

# WASHINGTON COUNTY INDIANA | COMMUNITY NEEDS ASSESSMENT 2022



HOOSIER UPLANDS EDC & WASHINGTON COUNTY FAMILY YMCA

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HOOSIER UPLANDS in  
partnership with WASHINGTON  
COUNTY FAMILY YMCA  
**COMMUNITY ASSESSMENT**  
WASHINGTON COUNTY, IN  
**FOR YOUTH SUBSTANCE USE  
PREVENTION**

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5/27/2022

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# Executive Summary

Washington County, Indiana faces an issue that many counties across the United States are facing. The problems and consequences associated with substance misuse are impacting our local community and its effects can be felt by various individuals, young and old, and different sectors, big and small. While the societal consequences of substance misuse are not always obvious, The Washington County Prevention Initiative, which is a partnership between Hoosier Uplands Economic Development (EDC) and the Washington County Family YMCA, worked together to develop this community needs assessment to better understand the impacts of substance misuse within Washington County. Through this assessment Washington County was explored in depth through gathering relevant background information and data, both quantitative and qualitative, in order to better understand the determinants, behaviors, and consequences of substance use and misuse. Through the process of developing this assessment, the Washington County Prevention Initiative is better able to substantiate the need for youth primary prevention efforts as it relates to three key priority substances within the community in order to prevent the use and misuse of those substances by youth before problems occur.

Within Washington County, nicotine, THC, and alcohol were selected as the priorities to focus on as based on the information shared by Washington County community survey respondents and other information as gathered from a variety of conversations, data, and beyond. The survey was offered throughout the community to gather insight to the perceptions of substance misuse from adults living within Washington County. The survey revealed those substances to be of biggest concern. For example, 72% of respondents considered tobacco use, containing nicotine and 78% of respondents deemed vape/e-cig use to be issues among youth. Likewise, 77% of those responders viewed marijuana use, which contains THC and 75% believed alcohol use to be community issues among youth. To corroborate the perceptions shared within that survey, discussions with law enforcement, school administrations, parents, existing prevention partners, and other community stakeholders occurred, solidifying the findings from the survey. For instance, according to the Washington County Prosecutors office, alcohol is one of the leading causes of substance-related arrests within the county and high school students testing positive for THC when randomly drug screened is of significant concern as shared by a local principal. Additionally, data gathered from a variety of resources such as County Health Rankings and the State Epidemiological Outcomes Workgroup reinforced these findings revealing that Washington County has more adult smokers, on average, compared to other counties within Indiana and tobacco accounts for half of student school suspensions within the county. Ultimately, the consequences the community of Washington County is facing due to these challenges range from increased likelihood of premature death and other negative outcomes such as increased rates of students dropping out of high school and elevated child abuse and neglect to the potential decrease of economic development and the amplified need for resources.

The assessment further analyzes what resources currently focus on those priority areas as well as identifies the gaps that limit the potential strength for prevention. Within the county, there are two key agencies implementing primary prevention strategies within the community. Those existing agencies offer education and information dissemination across various age groups but there are gaps within those frameworks where certain domains are not included and students of different ages and school corporations are not being served.

Ultimately, these priority issues are substantial and the gaps in resources are significant, reiterating the need and importance for primary prevention that will enhance the education, engagement, and empowerment of Washington County in the future as it relates to the substance misuse within our community.

# Section I: Community Assessment

# Community Assessment Introduction

## Background Information



Map image sourced from Google Maps

Washington County, Indiana is nestled in the south-central part of the state and ranks as the seventh largest county in Indiana, in terms of land mass, made up of 514 acres defined by its vast croplands, routes of rolling hills, close proximity to major highway I-65 and the metropolitan area of Louisville, Kentucky to its southeast (US Census Bureau, 2022). With its large span of scenic acreage and rural identity, Washington County is often most identified by its most populated city, Salem, which sits in the most central part of the county and currently accounts for 22.1% of the county's total population (STATS Indiana, 2022). Salem showcases connectivity to other parts of the county and state using state roads 135, 56, and 60, and features the local hospital, the majority of health providers, the county courthouse adorned with its beautiful limestone belltower, parks with various sports fields, judicial offices and jail, fairgrounds home to the yearly Washington County Fair, and the historic Salem Speedway that draws large crowds nearly every weekend during racing season.

Greater Washington county is made up of various small towns surrounding Salem such as Campbellsville, Hardinsburg, Little York, Livonia, New Pekin, and Saltillo. These smaller communities are home to some of Washington County's beautiful sights such as Delaney Creek Park, Beck's Mill, and even festivals such as Pekin's 4th of July Celebration and the Sugarbush Maple Syrup festival that draw vendors and visitors alike from both near and far. Overall, Salem and its surrounding towns add to the county's mostly white population with only 2.8% of the population identifying as one or more races other than white in its total of 28,182 people (US Census Bureau, 2022).



Sourced from [www.indianalandmarks.org](http://www.indianalandmarks.org)  
Photo taken by - Lee Lewellen

As Washington County is spread out, so are its schools. Washington County features three school districts: Salem Community Schools of Salem, West Washington School Corporation of Campbellsville, and East Washington School Corporation of New Pekin. To better understand the youth of Washington County, it is important to consider what the households of Washington County look like.



Image sourced from STATS Indiana

The majority of families and households are working households which contributes to the robust labor force for employers in Washington County. The employers of the county offer a variety of employment opportunities for its citizens and its three major sectors of employment include: advanced manufacturing, lumber, hardwoods and wood production, and health care and medical services (Washington County Economic Growth Partnership, n.d.).

Washington County is notable by its low unemployment rate, which as of February 2022 was 2.5% (STATS Indiana, 2022). While the majority of the eligible workforce is working in Washington County, the average median household income for Washington County is \$11,300 less than the state average, 18% of children are considered to be living in poverty (STATS Indiana, 2022) and 50.6% of its youth qualify for free or reduced school lunch (The Annie E. Casey Foundation, 2022). The county, despite its roadway accessibility and employment opportunities within the healthcare industry, is lacking in health care accessibility from primary care, dental, to mental health and this access is worsening over time (County Health Rankings, 2022).

Based upon the environment of Washington County and that the school-aged youth (5-17 years of age) of Washington County make up 16.9% of the county, the school-aged youth will be the targeted population for future primary prevention efforts within the community (STATS Indiana, 2022). The goal for our upcoming efforts is to focus on the youth who have not yet used or misused substances for the upcoming strategies we plan to implement. This assessment will allow us to better understand the needs of our community so that we can integrate a Strategic Prevention Framework which is composed of planning, implementing, and evaluating the prevention practices of our community. Overall, the assessment is a planning tool that will allow us to hone in on what our implementation should look like so that it is based upon evidence that understands our specific community needs and promotes the education, engagement, and empowerment of Washington County. The want and need for prevention efforts in the community is a direct result of the collaborative efforts and work by The Washington County Drug Free Coalition.

The Washington County Drug Free Coalition has historically been a group of volunteers holding discussions to work towards a community with a comprehensive foundation, focused on meeting our community's specific needs, for sustainable prevention strategies. The coalition is currently made up of various individuals of different backgrounds representing various sectors of the community from: education, parents, business, media, government, and beyond. While the coalition is currently in place, consistency has been an issue for the coalition. For example, according to County Prosecutor and Washington County Substance Abuse Council President, in the early 2000s there were very prominent local prevention efforts in place and due to various reasons, those efforts dissolved. As time passed and issues related to substance use and misuse continued to occur, local community members began recognizing a need in the community for prevention efforts once again.

The coalition identified that in order for true prevention efforts for the county to become a reality, it would require a hired individual to take on the efforts of building up capacity for change. The coalition has since worked to build a partnership between two entities, the Washington County Family YMCA and Hoosier Uplands Economic Development. This partnership known as the Washington County Prevention Initiative allowed for the direct hire of a Prevention Coordinator to begin assessing the community, strengthening and mobilizing the coalition, and developing community relationships to enhance the implementation of future prevention strategies under the provisions of a grant from the Indiana Division of Mental Health and Addiction (DMHA).



# Determinants

Determinants are known as factors or causes that result in a behavior. In regards to youth substance use prevention, determinant areas that are typically explored are known as risk, protective, and contributing factors. Within Washington County, one must consider all of these factors as they relate to substance use and misuse. Determinants are critical to consider because they play a role in the ways behaviors become problematic and how those behaviors then correlate to consequences at the individual and societal level.

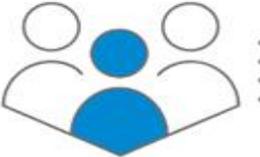
<p><b>Risk Factors</b> increase the likelihood young people will develop health and social problems</p>	<p><b>DOMAIN</b></p>	<p><b>Protective Factors</b> help buffer young people with high levels of risk factors from developing health and social problems</p>
<ul style="list-style-type: none"> <li>• Low community attachment</li> <li>• Community disorganisation</li> <li>• Community transitions and mobility</li> <li>• Personal transitions and mobility</li> <li>• Laws and norms favorable to drug use</li> <li>• Economic disadvantage (not measured in youth survey)</li> </ul>	<p><b>COMMUNITY</b></p> 	<ul style="list-style-type: none"> <li>• Opportunities for prosocial involvement in the community</li> <li>• Recognition of prosocial involvement</li> <li>• Exposure to evidence-based programs and strategies (some are measured in youth survey)</li> </ul>
<ul style="list-style-type: none"> <li>• Poor family management and discipline</li> <li>• Family conflict</li> <li>• A family history of antisocial behaviour</li> <li>• Favourable parental attitudes to the problem behaviour</li> </ul>	<p><b>FAMILY</b></p> 	<ul style="list-style-type: none"> <li>• Attachment and bonding to family</li> <li>• Opportunities for prosocial involvement in the family</li> <li>• Recognition of prosocial involvement</li> </ul>
<ul style="list-style-type: none"> <li>• Academic failure (low academic achievement)</li> <li>• Low commitment to school</li> <li>• Bullying</li> </ul>	<p><b>SCHOOL</b></p> 	<ul style="list-style-type: none"> <li>• Opportunities for prosocial involvement in school</li> <li>• Recognition of prosocial involvement</li> </ul>
<ul style="list-style-type: none"> <li>• Rebelliousness</li> <li>• Early initiation of problem behaviour</li> <li>• Impulsiveness</li> <li>• Antisocial behaviour</li> <li>• Interaction with friends involved in problem behavior</li> <li>• Sensation seeking</li> <li>• Rewards for antisocial involvement</li> </ul>	<p><b>PEER / INDIVIDUAL</b></p> 	<ul style="list-style-type: none"> <li>• Social skills</li> <li>• Belief in moral order</li> <li>• Emotional control</li> <li>• Interaction with prosocial peers</li> </ul>

Chart adapted from: Communities that Care model  
<https://www.communitiesthatcare.org.au/how-it-works/risk-and-protective-factors>

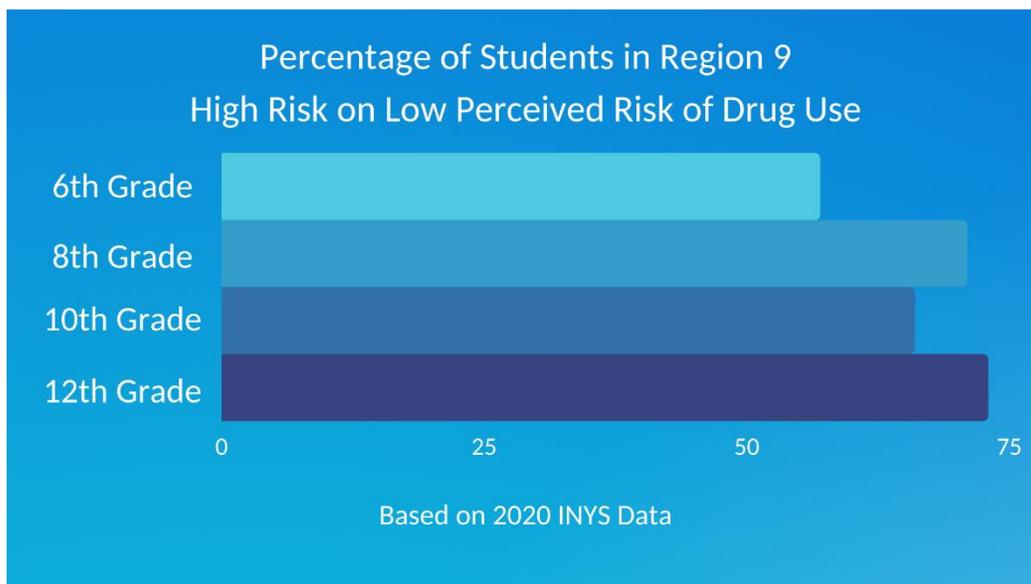
## Risk Factors

### Definition of Risk Factors

**Risk factors** are factors that would increase the likelihood of substance use and/or misuse in youth such as individual factors, family, school, or the community environment.

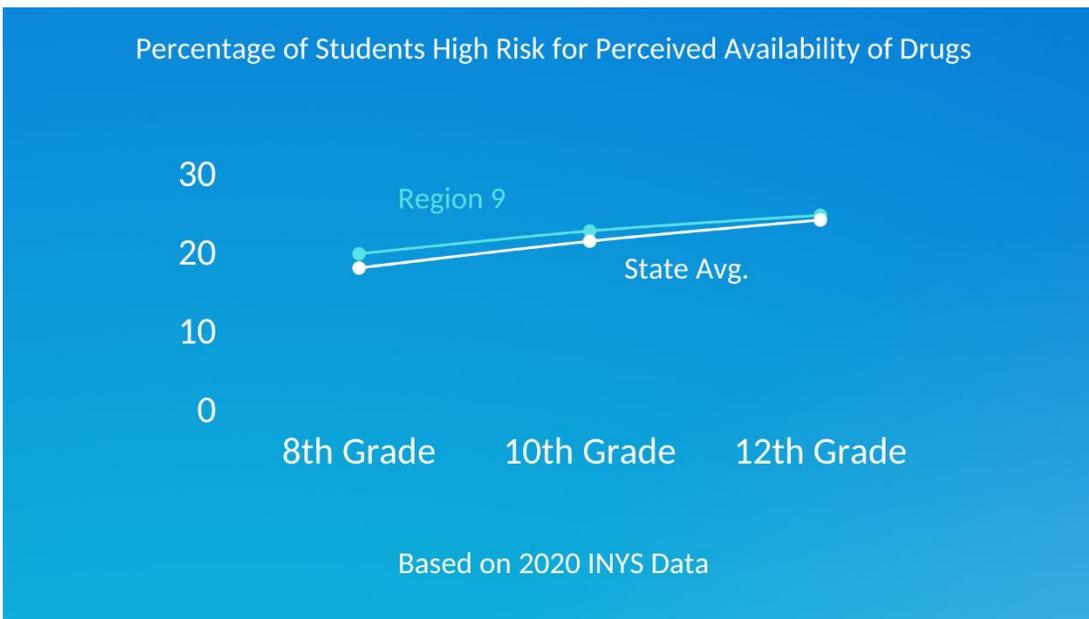
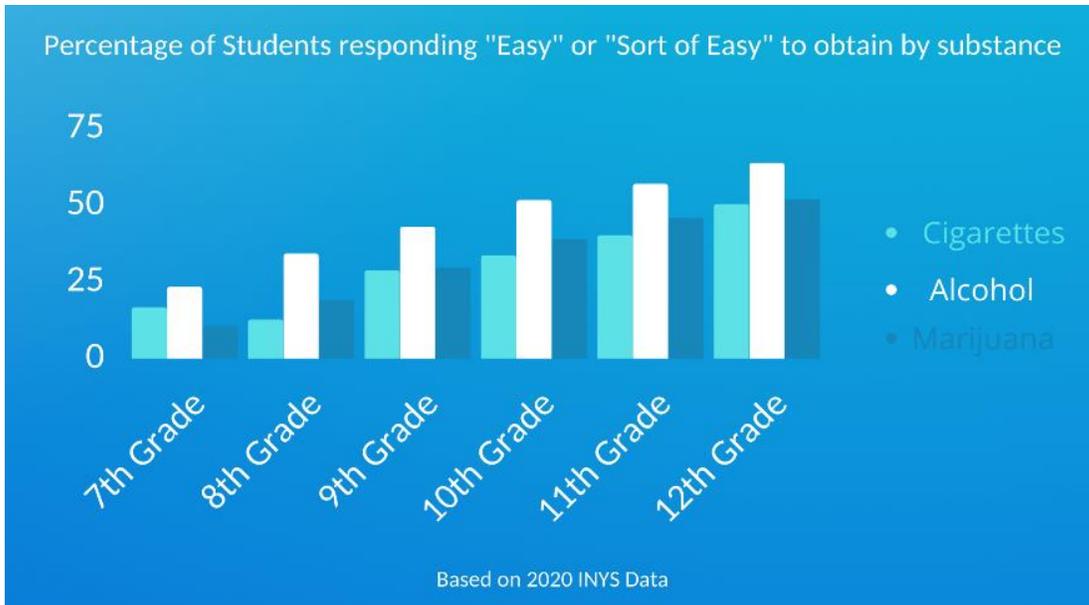
#### *Low Perceived Risk of Drug Use (Peer/Individual Level)*

Based upon the 2020 Indiana Youth Survey (INYS), the youth in our region, identified as Region 9, which include the following counties: Bartholomew, Brown, Clark, Crawford, Floyd, Harrison, Jackson, Johnson, Lawrence, Orange, Scott, and Washington, are high risk on low perceived risk of drug use. This perception indicates that the youth within our communities do not associate drug use with great risk. This is especially concerning as 57% of 6th graders, 71% of 8th graders, 66% of 10th graders, and 73% of 12th graders are considered high risk for this area of concern (The Institute for Research on Addictive Behavior, Prevention Insights, 2020). As a general rule for determining which areas are of highest risk, 50% is the threshold for when a population should be considered high risk or low protection or when above the state average. Based upon that, all surveyed grade levels within region 9 are at a high risk. As a part of future planning, we worked to obtain data agreements with the schools in Washington County in order to obtain the most localized data specific to Washington County alone. This data will become available by fall and allow us to provide a better definition of Washington County's overall needs and targets.



### High Risk on Perceived Availability of Drug Use (Community Level)

Of the studied grade levels: 8, 10, and 12 within our region, all three grade levels responded at a higher risk compared to the state in regards to the perceived availability of drug use. This means that responding students within those grade levels responded in a way that associates them to perceiving that it would be easy to obtain substances. The substances the survey asks “how easy would it be to get \_\_\_” are: cigarettes, alcohol, marijuana, and “drugs like cocaine, LSD, or amphetamines”. When compared to the responses of their peers across the state, those students in region 9 are at a higher associated risk. Additionally, when reviewed at the state level (as local and regional data does not provide specific breakdowns by substance) as students age in grade level the perception of ease to obtain substances increases. Concluding, students who enter higher grade levels or increase in age, are more likely to have access to a substance.



## Protective Factors

### Definition of Protective Factors

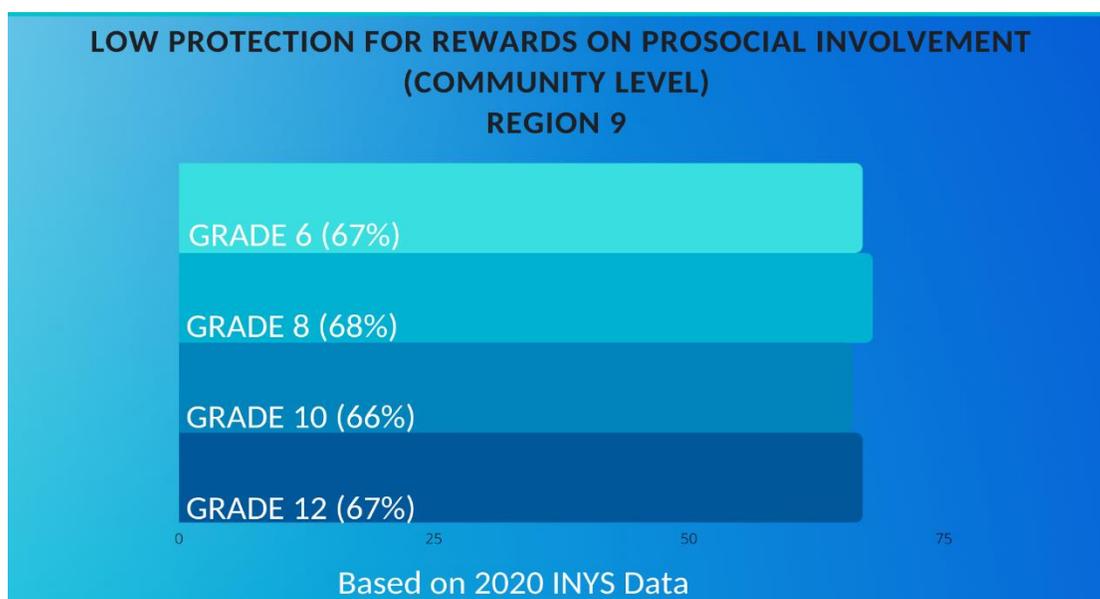
A **protective factor** is a factor that would decrease or buffer the likelihood of substance use and/or misuse in youth. Protective factors are the equivalent of the bumpers at the bowling alley; they help in aiding individuals navigate the lane of life in a way that helps prevent them from engaging in risky behaviors such as substance use and misuse. Protective factors are essential to the overall wellbeing of our youth and community. Therefore, protective factors must be considered in terms of the areas we need to improve and the areas we need to continue to maximize or build on. Within Washington County, we have areas of opportunity or areas we need to improve on and we have areas of strength, which is identified by the higher levels of protection we are seeing for youth within our county that we need not to ignore but continue to develop.

### Areas of Opportunity

Areas of opportunity are the protective areas in which the youth within our region are seeing the lowest levels of protection as compared to other regions and are considered the areas in which there is the most opportunity for growth.

#### *Low Protection for Rewards on Prosocial Involvement (Community Level)*

The youth in our region have low protection in terms of reward for prosocial involvement at the community level. This means the youth within our region do not associate prosocial involvement with community recognition, reward, etc. According to an article by Ching Man Lam, prosocial involvement is the events or activities across different settings that an individual or group of individuals participate in, with the express purpose of benefiting others [or self] (Lam, 2012). According to the 2020 Indiana Youth Survey (INYS), 67% of 6th graders, 68% of 8th graders, 66% of 10th graders, and 67% of 12th graders within region 9 have low protection in this regard. Within the INYS, the questions regarding community rewards for prosocial involvement are framed around whether or not the youth's neighbors notice their efforts and let them know about it, are proud of them, or encourage them.

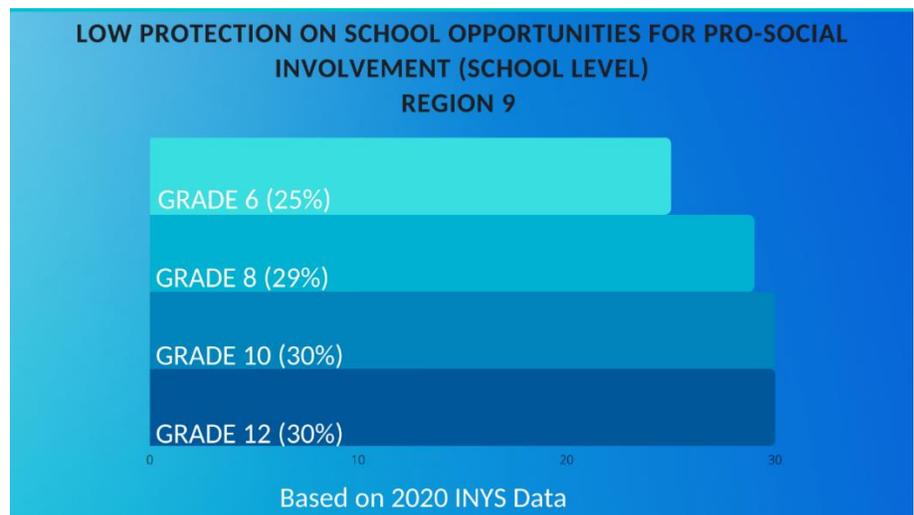


## Areas of Strength

Areas of strength are those protective areas in which our region is doing better than other areas of protection and it is important to continue to build and consistently strengthen these areas.

### *Low Protection on School Opportunities for Pro-social Involvement (School Level)*

One area within our region where we are experiencing higher levels of protection is at the school level. The protective factor area known as opportunities for pro-social involvement relates to the opportunities students have within school. The INYS poses questions in relation to whether or not students have the opportunities to become involved in activities outside of class and if students have lots of chances to talk to teachers one on one. Overall, our region sees higher perceptions of protection as it relates to positive opportunities within the school sector.



### *Low Protection on Opportunities for Pro-social Involvement (Family Level)*

At the family level, our region is at a higher protection level for pro-social involvement. This protective factor category relates to whether or not youth feel as if they have opportunities that relate to household decisions, opportunities for fun, and family communication. For example, students feel confident that they can ask their parents for help and parents give them chances to have fun with them as a family.



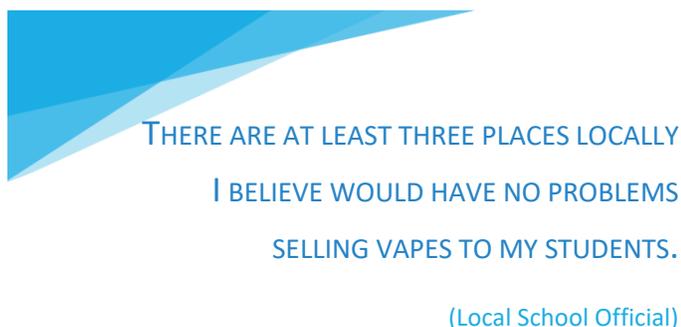
## Contributing Factors

### Definition of Contributing Factors

**Contributing factors** relate to the attitudes, behaviors, or any other characteristics such as community norms, policies, availability, etc. that can be associated to the likelihood of a health behavior increasing or decreasing.

#### *Community Perception of Availability (Nicotine and THC Products)*

Youth know of tobacco selling retail outlets within our community who sell nicotine-based vaping products as well as THC-



based synthetic products such as Delta 8 and Delta 10 to individuals who are under 21. This was shared through direct conversations with youth and adult community members. As the perception exists across both youth and adult age groups, there is reason to be concerned. In one conversation, it was stated that there are at minimum two locations within the county lines that sell to minors as young as the middle-school age group. In another conversation with a school official it was shared that three locations locally are believed to be selling to their students. These conversations lead to the

review of the Indiana Alcohol and Tobacco Commission’s (ATC) Compliance Checks for the last 5 years. The general passing rate is 95% since 2017. The number of compliance checks completed each year has declined. Digging a little deeper, it was revealed that in 2020 the retailers that were mentioned numerous times for selling to the under 21 years of age did in fact pass their ATC compliance checks. However, the ATC website states that their goal is to check each registered tobacco retailer at least once a year. It is hard to eliminate the possibility that these retailers may or may not sell to underage customers if only audited once a year. An additional consideration is that in 2019 and 2020 the numbers are most likely reflective of a decrease in compliance checks due to the COVID-19 Pandemic. However, the perception of accessibility for nicotine products and THC based products could be relevant to the decrease in compliance checks, driving the perception that nicotine and/or THC based products, especially vapes, are easier to come by for the youth population as these retailers are not being checked as regularly. For the population of Washington County, according to Indiana's Family and Social Services’ Tobacco Inspection map there are 31 retailers within the county lines (Tobacco Inspection Map, n.d.). According to County Epidemiological Data, Washington County’s number of tobacco outlets, which is 24, compared to population is higher than when compared to the state (Indiana Prevention Resource Center, 2021).

Tobacco Outlet Density- Washington County, IN

	Washington County, IN	Indiana
Number of tobacco outlets	24	5,577
Rate per 10,000 population	8.6	8.4

Based on County Epidemiological data  
[https://iprc.iu.edu/epidemiological-data/epi\\_table.php?table\\_id=t602&county=88](https://iprc.iu.edu/epidemiological-data/epi_table.php?table_id=t602&county=88)

While there is a discrepancy in the actual number of tobacco outlets, from the two resources, one can conclude that based off the lowest number of outlets, Washington County is still at a higher tobacco retail density than compared to the state average.

To further investigate the tobacco retailers within Washington County, environmental scans were conducted. The purpose of environmental scans is to observe both the inside and outside of the store, products available, transactions, etc. Environmental scans completed within the community revealed that there are multiple tobacco retailers within walking distance of nearby schools and are often frequented by the school age population. Due to the number and locations of retailers, and there are instances where IDs may not always be checked, when necessary, which could increase the number of opportunities in which youth are sold nicotine vapor products under age. Additional environmental scans revealed that there are at minimum three known distributors that have Delta 8 and Delta 10 products for sale such as gummies and vapor products. If a retailer is selling nicotine based vape products to underage individuals it could be argued that those same retailers are also selling the THC based vape products to underage individuals as well.

### *Ease of Accessibility*

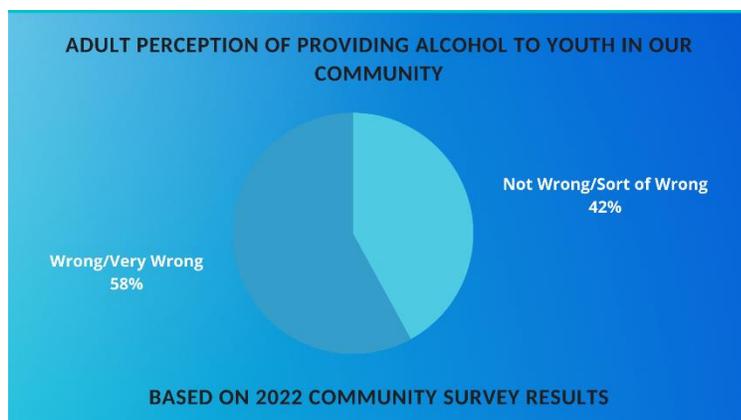
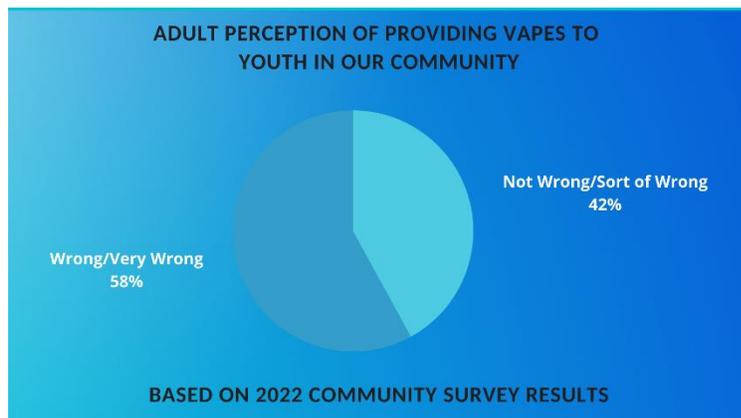
A community level survey and community discussions revealed that adults within the community view specific substances as easier to obtain than others. When surveying community members regarding the following substances: tobacco, vapes/e-cigarettes, alcohol, marijuana, prescription drugs, and other drugs (cocaine, LSD, amphetamines) the majority deemed that all substances were either easy or sort of easy for youth to obtain. 87% of respondents believe it to be easy or sort of easy for youth to obtain tobacco, 89% of respondents shared that it would be easy or sort of easy for youth to obtain vape/e-cigarette products, 86% of respondents said the same for alcohol and marijuana products, and 61% believed it would be easy for them to obtain drugs like cocaine, LSD, or amphetamines.



Discussions with local youth at the middle and high school level revealed that if they wanted to obtain vape products, both nicotine and/or THC based, they would not have a great level of difficulty in obtaining those items. It was shared that there have even been instances of youth selling such products to other youth within the schools in our community and one instance led to expulsion from school. When posed the question, “Where would you obtain such items?” they shared that they have friends who could get the products for them. At the middle school level, it was shared that most would be able to access a vape device if they wanted to. In relation to accessing alcohol, it was shared that they would either have access to it at home, in some instances with parent approval. Older siblings or friends were another source.

### Community Norms Favorable to Substance Use

Within Washington County, there are community norms that are favorable to substance use that could influence youth to use substances at an earlier age or perhaps lead to substance misuse. Based on various community conversations with parents, young adults, and even youth there is a common and general conception, or norm, that exists within our community. This norm points towards the belief that parents would still rather have their youth consuming alcohol under their supervision than somewhere else. Based upon a variety of conversations, the most relevant connection was that the parents of today once had parents who purchased them alcohol and let them drink only at home under their supervision, which resulted in them not getting in trouble and statements such as, "I turned out okay". Therefore, they believe this practice of hosting is the safe alternative to their children obtaining alcohol somewhere else. Speaking with local youth it was determined that it is not uncommon for youth to host parties for their friends to attend within their homes with alcohol and the parents of the host knowing this is occurring. To uncover the community beliefs within our community, we took a poll of adults within the county to see what the perception was regarding other adults contributing different substances to minors.



The poll revealed that 42% of respondents believed other community members would find it sort of wrong or not wrong to provide youth with alcohol. The other 58% of respondents provided their belief that the community would consider it wrong or very wrong.

### Quotes from the Community

"WE LET OUR KIDS AND FRIENDS DRINK AT HOME UNDER OUR WATCH SO THAT WE KNOW THEY WILL NOT GET HURT. WE JUST LET THEM DRINK THINGS LIKE WINE COOLERS. WE TAKE THEIR KEYS. KIDS ARE GOING TO EXPERIMENT EITHER AT HOME OR SOMEPLACE ELSE. AT LEAST WE KNOW THEY ARE SAFE WITH US."

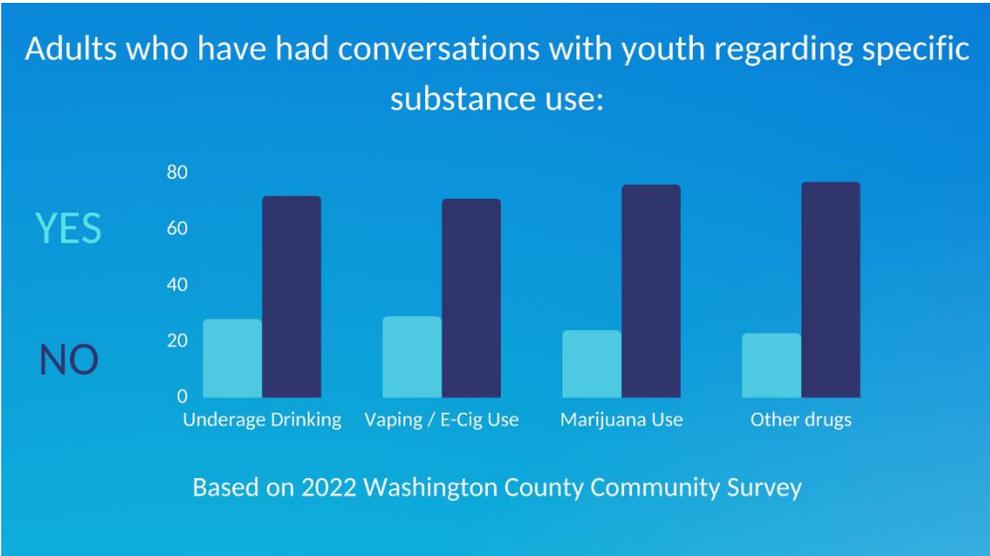
-Quote from Local Parent

"MY PARENTS BOUGHT US AND FRIENDS ALCOHOL ON THE WEEKENDS AS LONG AS WE STAYED HOME AND DIDN'T DRIVE. I DON'T SEE IT AS THAT BIG OF A DEAL. I TURNED OUT OKAY."

-Quote from Local Parent

Another point to consider is that based upon key community stakeholder conversations, when a youth is found in possession of a vaping device within the school system and the parent is notified often times a parent will call asking for the vape device to be released to the parent. Within our community, when vapes are confiscated at the school level those devices are not returned to parents or youth. Rather, those vape devices are turned over to the school resources officers, put into evidence, and then turned into the Sheriff's Department to be properly disposed of as they are considered hazmat materials. It was also shared that after confiscating the devices, personnel have had vape devices explode on them and this is a biosafety concern. In addition to the perception of whether or not adults would consider the supply of alcohol as wrong, the community survey also asked for the perception of vapes/e-cigarettes. The survey unveiled that similarly to alcohol, 42% of respondents believed other adults would consider it not wrong or sort of wrong.

Additionally, through a community poll it was revealed that most adults, including parents, grandparents, and community members at large, are not having regular conversations with youth in the community as it relates to substance use. On average, 74% of respondents said they had not had conversations within the last 30 days with youth regarding underage drinking, vaping/e-cig use, marijuana use, or other drugs. If adults within the community are not having conversations regularly with youth regarding substance use, the youth within our community are not being informed about the various substances, do not see it as a concern among adults, and the risks they may pose if used.



### Laws favorable to THC Use

Within Indiana, there are currently no laws that restrict the sale of synthetically derived cannabinoids. Cannabinoids are substances that contain THC, which is the main psychoactive compound found in marijuana. Delta 8 and Delta 10 products are currently legal for sale and purchase within the state of Indiana. These same products are visible in a variety of convenience store locations within the county and can be purchased in many forms ranging from gummy bears and candy to flavored vapes and snacks such as brownies and crispy rice treats. Products similar to the ones shown in the photo are locally available within our county for purchase. While the products fall within the legal THC “loop hole”, they are not legal for consumption to anyone under the age of 21. It is necessary to consider the messaging behind items that look very similar to the typical candies marketed towards youth and the safety concerns that could arise by having products that are visually similar to other goods. It is also important to consider that Indiana is a border state to states such as Michigan and Illinois where marijuana is fully legalized and also borders Ohio where marijuana has been decriminalized and is available for medicinal purposes. With so many mixed messages regarding THC use within our own state and at the national level, the gray areas that exist could shape the youth’s perception and lean toward favorable use of THC based products.



Picture obtained from [abcactionnews.com](https://www.abcactionnews.com)

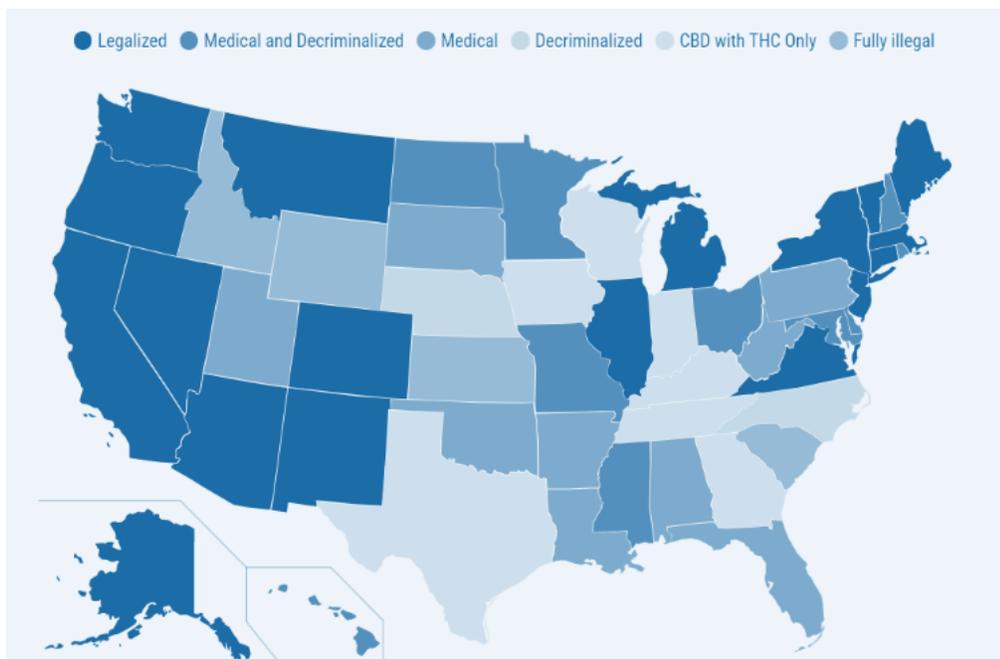


Image sourced from <https://disa.com/map-of-marijuana-legality-by-state>

## Data Collection Process

In order to understand the determinants that are relevant to our priorities within Washington County a variety of resources and methods were utilized. For example, to identify our risk and protective factors we utilized regional data as sourced from the Indiana Youth Surveys. This data was gleaned based upon our location in region 9. To validate the risk and protective factors youth revealed in their responses throughout the Indiana Youth Survey we surveyed adults within the community to gain their perception of what some of our biggest risk and protective areas were. Based upon those results, we felt confident in selecting the risk and protective factors to address within our assessment. As it relates to contributing factors, we worked to sit down with key community stakeholders to first gain an overview of the issues within Washington County. Through those conversations, the areas of concern followed common themes which are shared in our contributing factors. To explore those areas of concern within our greater population, we included questions about things such as accessibility to substances, consideration of availability, etc. We also partnered with the Washington County Tobacco Prevention and Cessation team to complete environmental scans to gain a better understanding of some of our local retailers.

## Other Relevant Information

One area to be considered as it relates to how we obtained our data and information is that we do not currently have any local data to understand our risk and protective factors as it relates to substance use and misuse. Based upon that, we had to rely on regional data to determine these areas. We have connected with our local school systems to ensure they participate in this year's Indiana Youth Survey and worked to gather data sharing agreements so that in the future we will have access to the most localized and county-specific data as possible.

## Problem Behaviors

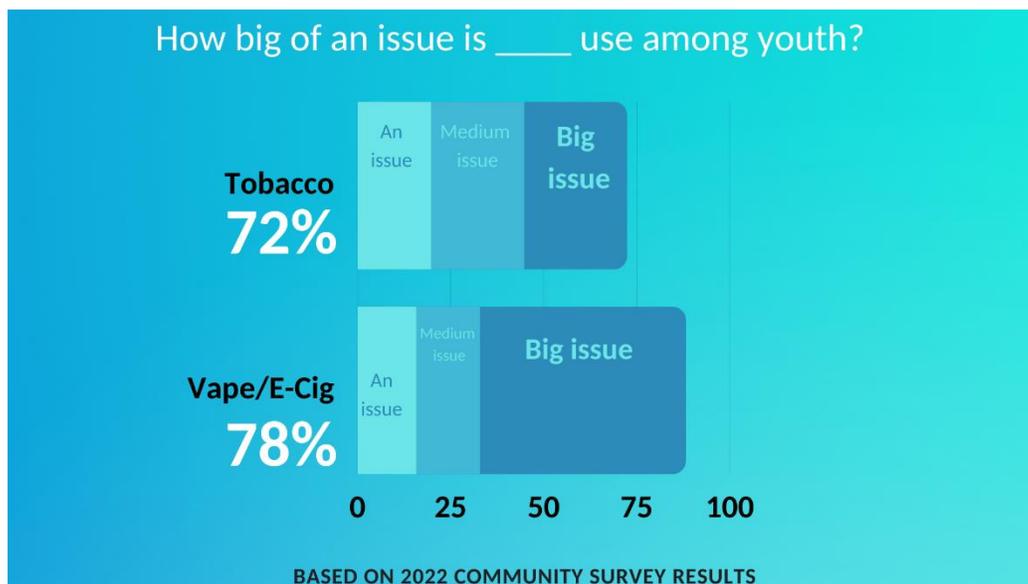
Problem behaviors are the actions often resulting from determinants and can cause a negative consequence. In this case, it is the actual behavior or “use” of a specific substance.

### Youth Problem Behaviors

Members of our community see various behaviors as problem behaviors of growing concern within our community. Based upon the community survey’s results the behaviors our community sees as being the biggest issues among youth are: nicotine use, marijuana use, and alcohol use. Similarly, to determinants, problem behaviors can see improvements over time with proper prevention initiatives; therefore, it is imperative to understand the problem behaviors within our community. These behaviors can lead to consequences which are not only an individual issue but also affect us at a societal level. We will examine our local youth problem behaviors further with the release of the 2022 Indiana Youth Survey results later in the year. The 2022 data will allow us to explore youth substance use at the most localized county level.

#### *Nicotine Use*

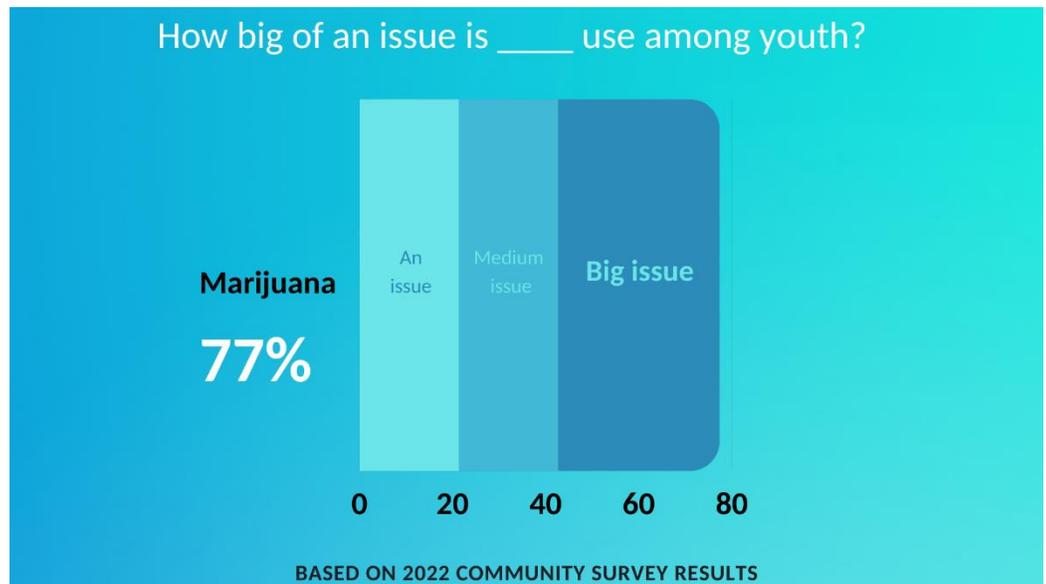
Based upon the community survey results, adults within our community consider nicotine product use by youth as a problem. Within the survey adults were asked to select whether they viewed specific substance use as: a big problem, a medium problem, a problem, a minor problem, or no problem. The community’s response determined that youth use of vapes/e-cigs and tobacco products, which contain nicotine, is an issue. The survey revealed that 72% of respondents viewed tobacco use as an issue and 88% viewed vape/e-cig use as an issue among youth. According to the administrators of local schools, vape/e-cig use amongst students, especially in the middle and high schools, is one of the most challenging problems they face.



### Marijuana Use

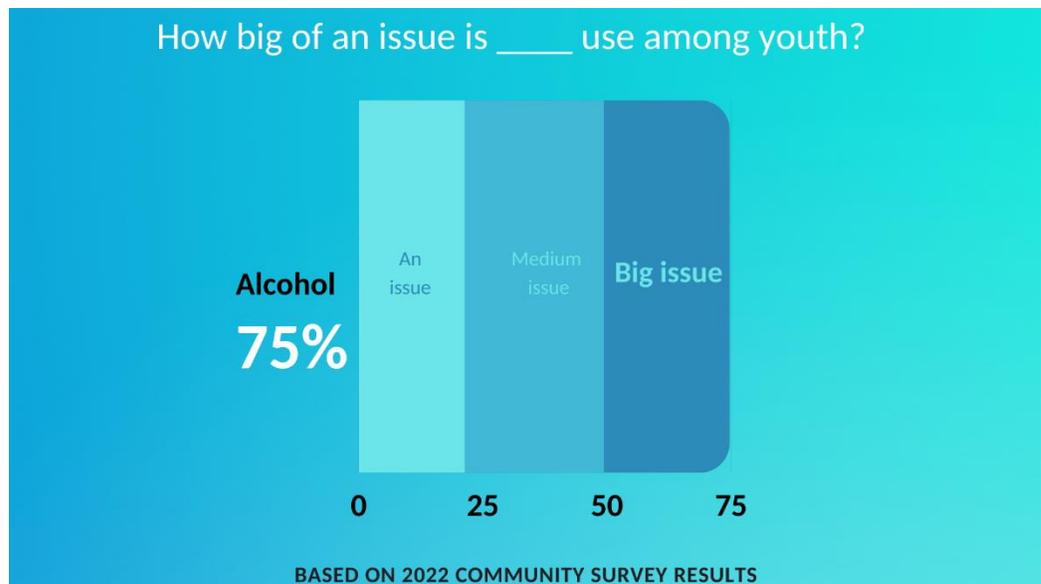
Similar to nicotine use, community members view youth marijuana use as a concern within our community. The survey's outcome shared that 77% of respondents view youth marijuana use as an issue within Washington County. Based upon the community discussions with local school administrators, marijuana use is of a growing concern. One local administrator shared that marijuana is impacting students within their

school as it relates to sports eligibility, academic proficiency, and even impacting the school's rate of expulsions. The administrator shared that within the last three to four years more students within their school have been expelled for marijuana possession than in the past. Based upon the random drug screens student drivers, athletes, and those involved in specific extra-curriculars within that school, over the course of 8 months 13 students had tested positive. It was shared that cannabinoids and nicotine are the two most common substances that students test positive for.



### Alcohol Use

75% of community survey respondents viewed alcohol as an issue within our community. While the majority of respondents only deemed it as a medium problem, it is still a behavior of concern. Alcohol use by youth is also a concern from local school administrators as it has shown up on random drug screens similarly to nicotine and cannabinoids.



## Adult Problem Behaviors (18 years or older)

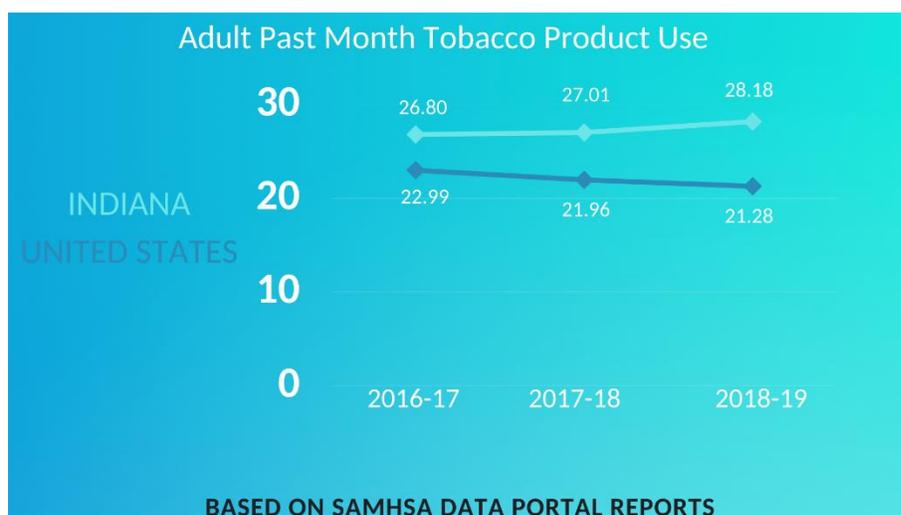
To understand the problem behaviors among the population of individuals 18 years or older, the data available is based upon the state level with the exception of localized smoking rates as made available by County Health Rankings. Using the Substance Abuse and Mental Health Services Administration’s (SAMHSA) interactive data portal, the ability to compare use within Indiana to the national averages across various problem behaviors allows for the ability to determine which problem behaviors are most relevant to the citizens of Washington County. Based upon the available state data and community perceptions, based on community survey results, the problem behaviors for the 18 years or older population are: nicotine use (could include cigarettes, e-cigarettes, smokeless tobacco, etc.), marijuana use, methamphetamine use, and alcohol use through binge drinking. Like youth problem behaviors, adult problem behaviors are linked to societal consequences. Therefore, it is necessary to understand the existing problem behaviors among those over the age of 18 within our community.

### Nicotine Use

Nicotine use encompasses a variety of products such as cigarettes, cigars, electronic vapor products, and more. Based upon community perceptions, local and state data, nicotine use is of a concern within Washington County. Considering the results of the community survey, 85.5% of respondents considered tobacco use to be a problem, a medium problem, or a big problem for the adults of the county and 90% of respondents deemed vaping or e-cigarette use to be of the same problem. In addition to the existing community perceptions, the adults of Washington County smoke at a higher rate than the rest of the state. According to County Health Rankings, the adult smoking rate in Washington County is 24%, compared to the state rate of 20% (County Health Rankings, 2022).

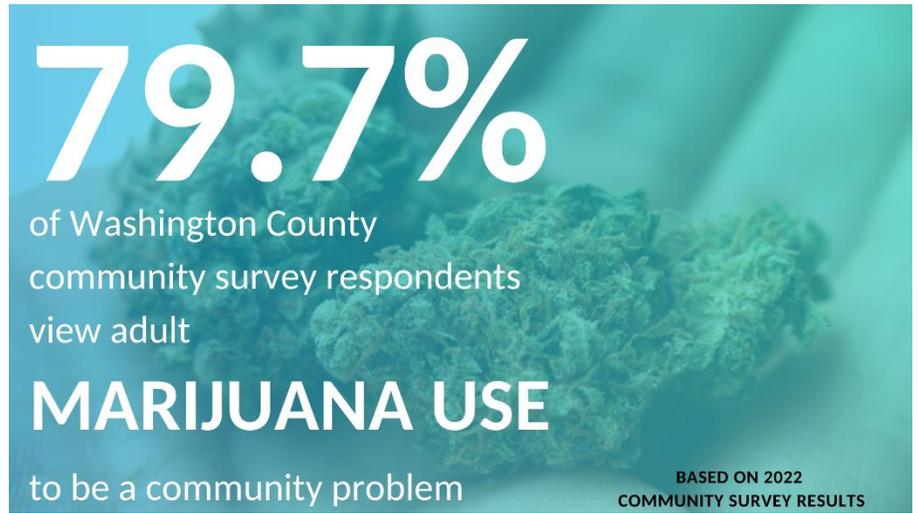
Comparing Indiana to the rest of the nation, Indiana currently uses tobacco products at a higher rate. One point that is

interesting to consider is that as the national past month use has been decreasing since 2016-2017, Indiana’s use has increased and is growing the marginal different between state and national use at a higher rate.

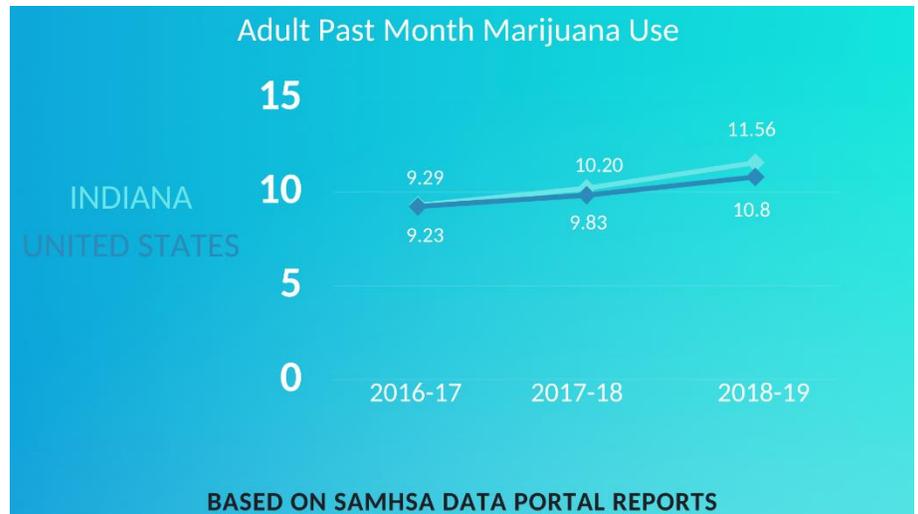


### Marijuana Use

Like nicotine use, marijuana use is a problem behavior amongst the adults of Washington County. Despite the lack of localized use data for adult marijuana use, Hoosier adults are using marijuana monthly at higher rates than other adults in the country. As use is higher in the state of Indiana, locally, community survey participants believe marijuana to be a community problem (Substance Abuse and Mental Health Data Archive, n.d.).

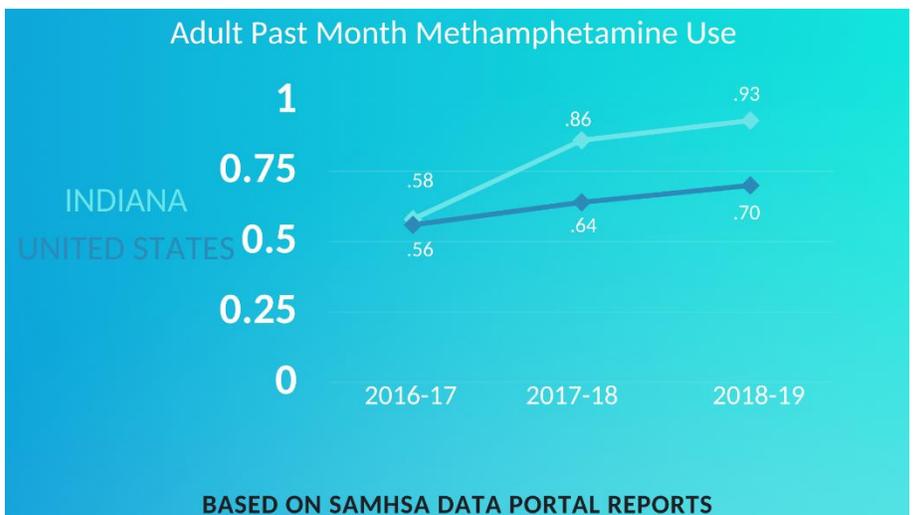


79.7% of local respondents to the community survey stated that adult marijuana use is a community issue based upon the responses of it being a problem, a medium problem, or a big problem. Additionally, adult marijuana use has increasingly gained momentum since the 2012-2013 timeframe and as of 2014-2015 has surpassed or stayed steady with the US' use trend line.



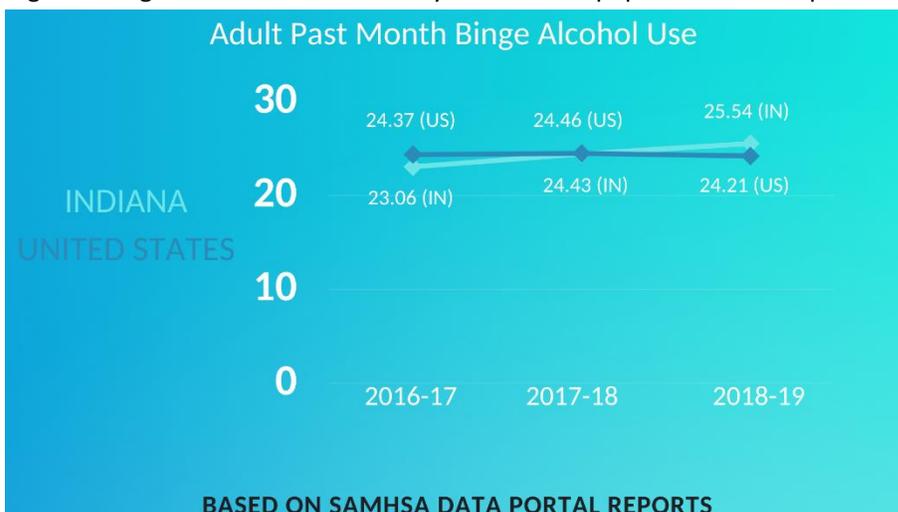
### Methamphetamine Use

While in Indiana, we have seen higher than national average methamphetamine use since the 2015-2016 timeframe, since 2016-2017 meth use has dramatically increased and continues to increase on both the national and state level (Substance Abuse and Mental Health Data Archive, n.d.). This data is relevant to the community's view of methamphetamine use as well as 94.7% of our community survey responses considered meth use to be a community problem and 70.7% of those respondents considered it a big problem.



### Alcohol Use - Binge Drinking

Since 2016, there has been a sharp increase in binge drinking behaviors within the 18 years or older population and surpassed the national average from the 2018-2019 year. Since its lowest measurement in 2016-2017, binge drinking in Indiana has increased by roughly 2.5% and compared to the national data in 2018-2019, Indiana’s binge drinking has surpassed the United States’ average (Substance Abuse and Mental Health Data Archive, n.d.). Locally, 90.8% of community survey respondents consider alcohol use by adults to be at minimum a community problem with the majority of responses considering it to be a medium or big problem.



While the data available does not account for the most recent years in the midst of the pandemic, according to an article from Massachusetts General Hospital in December of 2021, “using data from a national survey of U.S. adults on their drinking habits that found that excessive drinking (such as binge drinking) increased by 21% during the COVID-19 pandemic” (Brown, 2021). An additional article from Cedars Sinai stated that women specifically increased their drinking habits identified as “heavily drinking” by 41% (Dialing Back Pandemic Drinking, 2021).

**DURING COVID-19**  
 binge drinking  
 increased by **21%** &  
 heavy drinking habits increased  
 among women by **41%**

BASED ON STATS IN ARTICLES BY  
 MASSACHUSETTS GENERAL HOSPITAL  
 AND  
 CEDARS SINAI

## Data Collection Process

To explore the relevant problem behaviors to Washington County, it was necessary to consider the community's perceptions of behaviors, explore the Indiana Youth Survey, utilize SAMHSA's data tools and review the County Health Rankings websites. As there is not any localized data specific to Washington County in relation to youth data, the regional and state data provided by the Indiana Youth Survey was the guiding information as well as the community's view of issues. Similarly, SAMHSA's data did not provide reliable statistics across various measures as it relates to exploring the county levels so the use of state data that correlates directly to adult behavioral substance use was the method of data collection. We were able to identify localized, county data, from the aforementioned County Health Rankings website for the adult smoking rates.

## Other Relevant Information

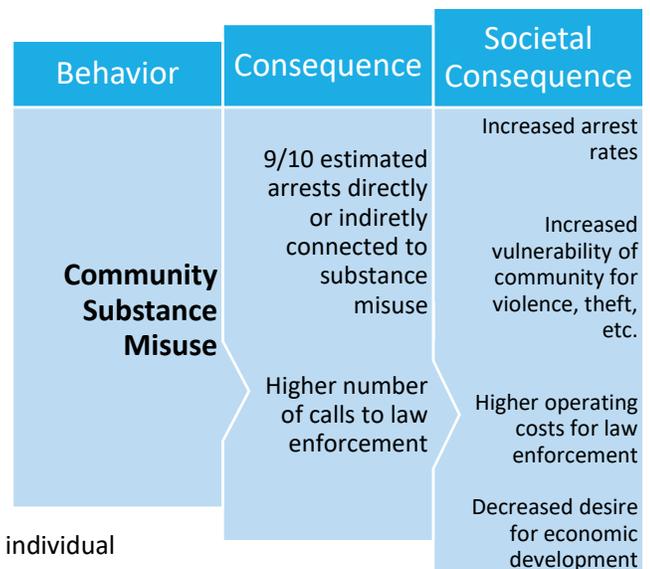
Two areas of adult problem behaviors that are showing a decline within the state are prescription drug misuse and heroin use. Due to the recent declines, those two substance related behaviors were omitted from the data sharing points. For more information regarding these trends, one can visit the website: <https://pdas.samhsa.gov/saes/state>.

## Societal Consequences

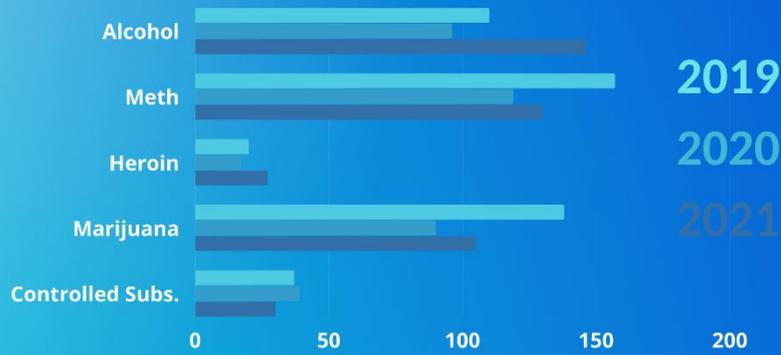
Societal consequences are the ways in which society is impacted by specific activities. Within Washington County, the societal consequences of substance misuse are varied ranging from substance involved legal cases at both the adult and juvenile level, higher than average child abuse and neglect, to early drop out and frequent absenteeism from school and higher emergency calls or emergency room visits. Due to the behaviors of members within our community, our society is impacted and average citizens carry the burdens that trickle down as a result of behaviors such as substance misuse and dropping out of high school. Ultimately, members of the greater society pay the price, both monetarily and in demand, as a result of reducing the competitiveness of the local economy, higher costs linked to public health, social services, and even criminal justice.

### *Prevalence of Arrests involving Substances*

In Washington County the prevalence of legal cases that are related to illegal substances and/or alcohol account for the majority of all cases within our community. While secondary reasons for arrests are not currently tracked based on conversations with local authorities and officials in Washington County, it was estimated from multiple individuals in various positions at the law enforcement and judicial level, that the majority of our arrests are illegal substances or alcohol involved. In one conversation, while reviewing the most recent non-substance or alcohol related cases, most who had been arrested had previous convictions and they were linked to known substance or alcohol misuse. When posed the question, “out of the last ten arrests made within the department, how many of them involved alcohol or other drugs?” the individual responded, that all ten arrests were most likely connected to alcohol or other drugs in one fashion or another. The individual further explained that a great deal of theft and battery charges within the county occur due to someone being under the influence or wanting to obtain a means to use substances. This information is important to consider at the societal level as it means citizens are at a higher risk for being impacted by theft, possible altercations, or other unsafe situations. These behaviors that lead to arrests and community issues can even impact the attractiveness of the community for growth and economic development.

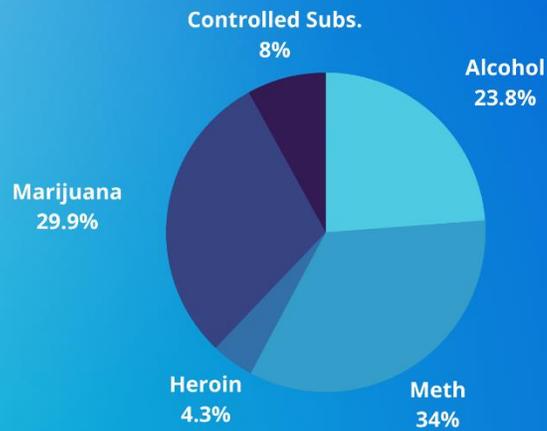


## ADULT- WASHINGTON COUNTY DRUG RELATED CASES



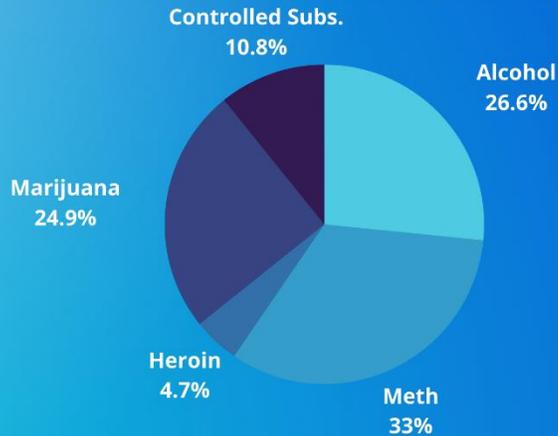
BASED ON DATA PROVIDED BY WASHINGTON COUNTY PROSECUTORS OFFICE

## BREAKDOWN OF ADULT DRUG RELATED ARRESTS (2019)

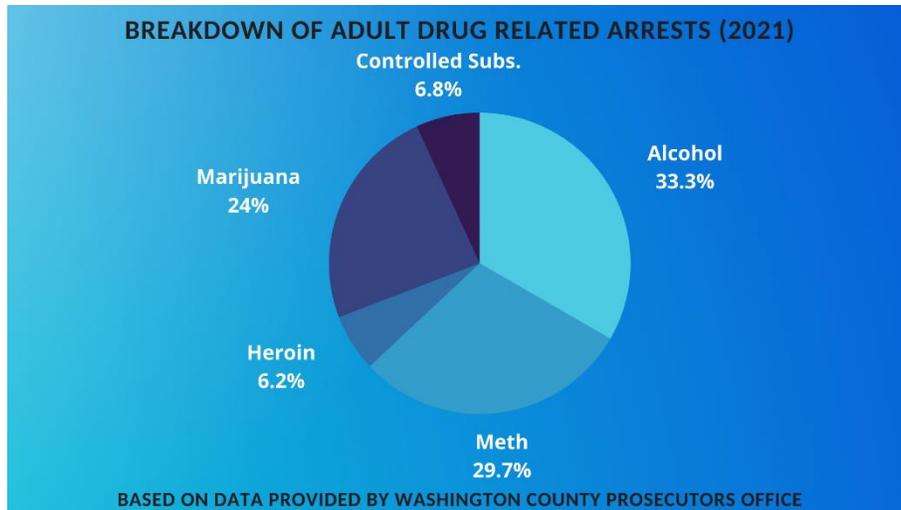


BASED ON DATA PROVIDED BY WASHINGTON COUNTY PROSECUTORS OFFICE

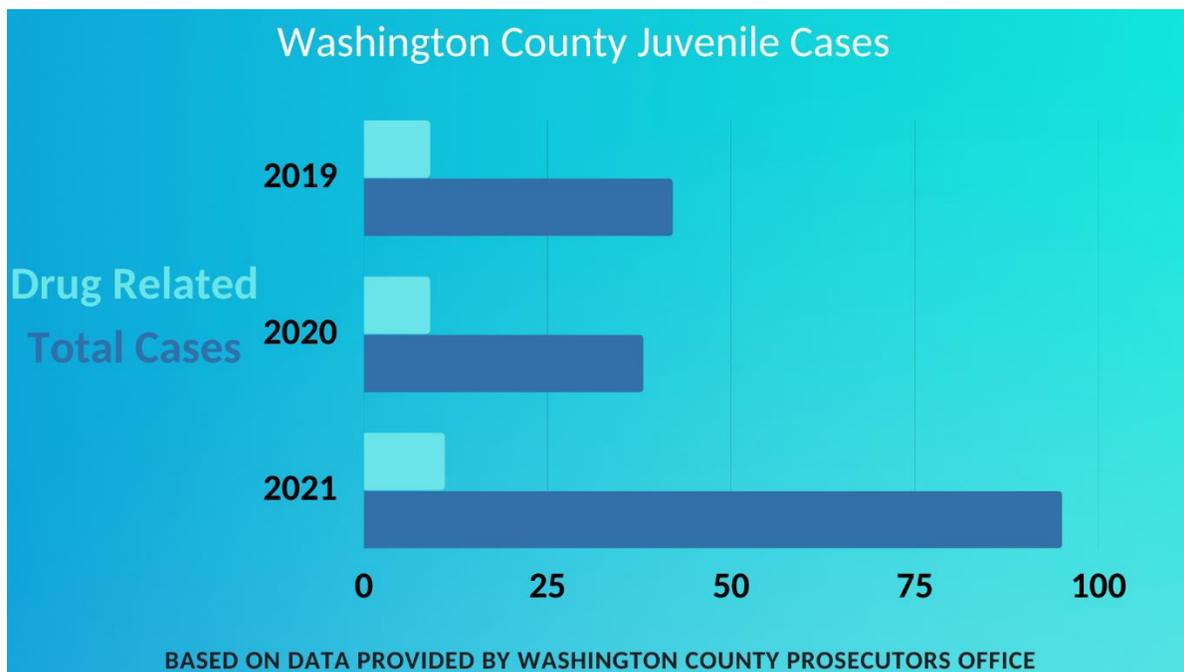
## BREAKDOWN OF ADULT DRUG RELATED ARRESTS (2020)



BASED ON DATA PROVIDED BY WASHINGTON COUNTY PROSECUTORS OFFICE

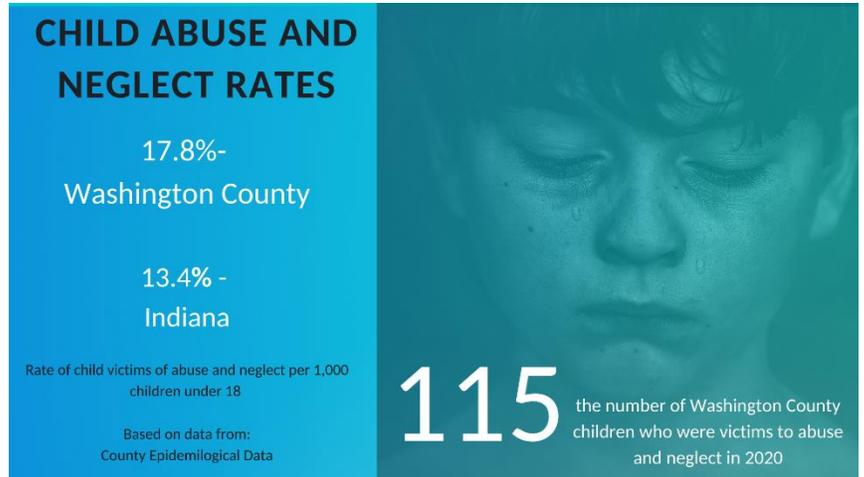


When considering the number of juvenile cases within the county, since 2019 there has been a major uptick in juvenile crimes from 2020 to 2021. While the number of juvenile cases involving drugs is at a lower prevalence, the majority of juvenile cases are connected to theft, battery, and runaways. Speaking with community stakeholders, the belief is that those cases are also intertwined with substance use either at the personal or home level. The prevalence of these arrests and crimes is relevant to the idea that youth in our community are subject and at a higher likelihood to have interactions at home, in public places, or beyond that involve substance and/or alcohol, which could lead to earlier use, other risky behavior, or involvement within the legal system at a younger age.



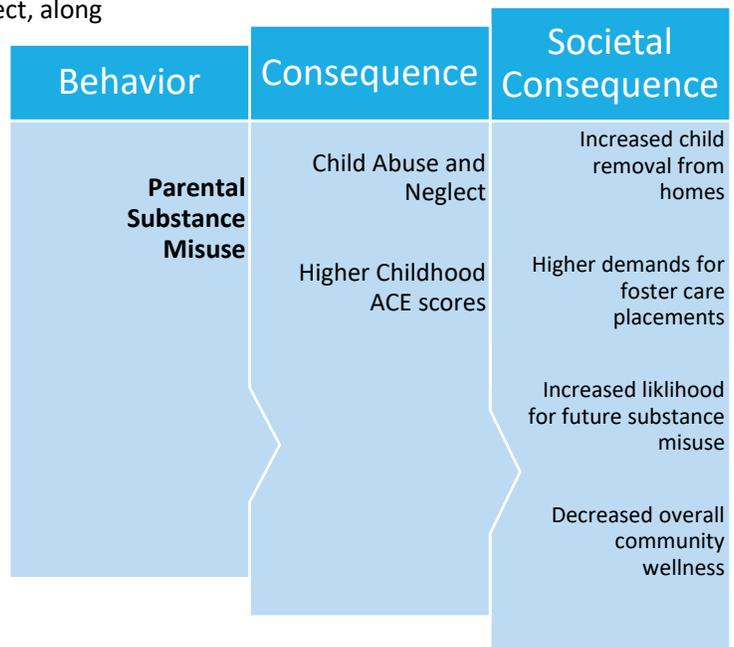
## Child Abuse and Neglect

The children of Washington County are at a higher risk of child abuse and neglect as compared to the state average. The County Epidemiological Data provides that 17.8% of Washington County youth experience child abuse and neglect as provided by Indiana Department of Child Services Data while the overall state average is 13.4% (Indiana Prevention Resource Center, 2021). Child abuse and neglect is a societal consequence that can be traced to a multitude of reasons but in the instance of cause of removal due to child abuse or neglect in Washington County, alcohol and/or drug misuse is a leading cause.



According to County Epidemiological Data, the Indiana state average for alcohol or drug misuse as being cause of child removal from home is 61% whereas in Washington County the same cause of reason is 67% ( Indiana Prevention Resource Center, 2021). It is important to note that there may be instances in cases where alcohol and/or drug misuse is present but would not be noted as the reason for removal.

Locally, CASA (Court Appointed Special Advocates) of Washington County, which is an organization that advocates on behalf of the youth who have been abused and neglected assists children. As of May 2022, CASA of Washington County had 29 cases in which they were assisting. Of those 29 cases, 26 are tied to guardian alcohol or substance misuse. This means that when CASA is involved the goal is safe, permanent placement for the youth involved. This increases the number of youths entered in the foster care system and places increased pressure on the agencies, their employees or volunteers, and the greater community involved. Additionally, these instances of abuse and neglect, along with household dysfunction emphasize the impact that substance and/or alcohol is connected to adverse childhood experiences (ACEs). Abuse which includes physical, emotional, and/or sexual abuse, neglect including physical and/or emotional, and household dysfunction which includes mental illness, incarcerated relatives, abuse toward parent, substance misuse, and divorce are tied to ACEs which are linked directly to increased risk of negative health outcomes including increased likelihood of substance use and addiction.



Adverse childhood experiences are linked to the increased likelihood of drug use and drug addictions. According to a publication by the IUPUI Center for Health Policy, “43.6% of the youth population in the U.S. and 47.3% of Hoosier youth have experienced at least one ACE in their life” and “it is estimated that 56 percent of the lifetime drug use prevalence can be



ACEs Graphic Source:  
<https://advokids.org/adverse-childhood-experience-study-aces/>

attributed to ACEs, as can 63 percent of the lifetime prevalence for illicit drug addictions” (Balio & Greene, 2018). Within Indiana, youth are more likely to have experienced adverse childhood experiences as compared to the national rate. For example, according to the same publication from IUPUI, “most recent estimates suggest that 43.6% of the youth population in the U.S. and 47.3% of Hoosier youth have experienced at least one ACE in their life” (Balio & Greene, 2018). As youth age, the impact of ACEs correlates to higher likelihood of substance use and addiction, meaning ACEs are a contributing factor to the use of substances by youth. As one considers consequences, ACEs are a consequence of family dysfunction, which is related to substance misuse within the home, meaning ACEs have the potential to be generational consequences that extend across the lifespan.

While child abuse, neglect, and household dysfunction often times go hand in hand with household alcohol or substance misuse, children who have experienced 4 or more ACEs are more likely to use or misuse substances themselves as adults and experience decreased overall wellness. Advokids.org shares adults who have 4 or more ACEs are “5.13 times more likely to be depressed, 2.93 times more likely to smoke, and 3.23 times more likely to binge drink” (Adverse Childhood Experience Study (ACES), 2022).

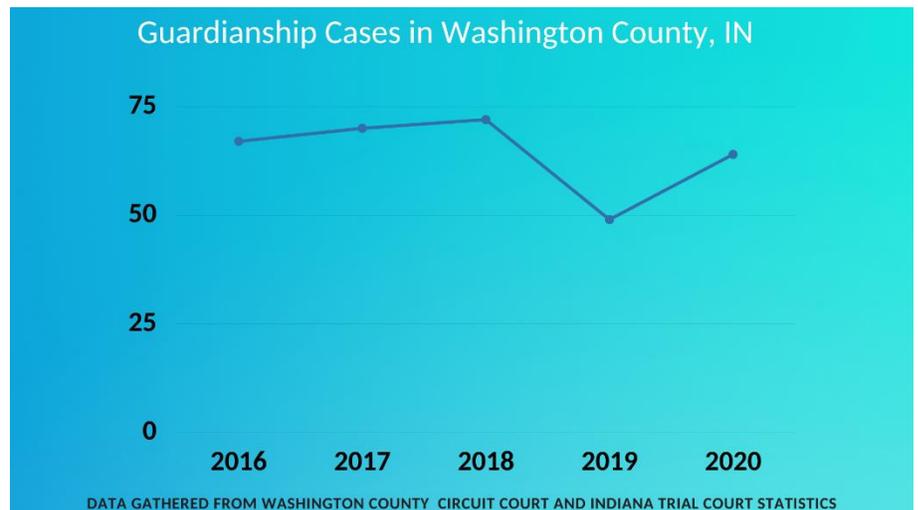
Ultimately, society as a whole is impacted through increased rates of childhood abuse and neglect as well as removal from home due to household alcohol and/or substance misuse.

## Guardianship Cases

Within the last five years the number of guardianship cases has been on an incline within Washington County, except for 2019 where there was a great decrease. However, as we look at 2020 the sharp increase returned.

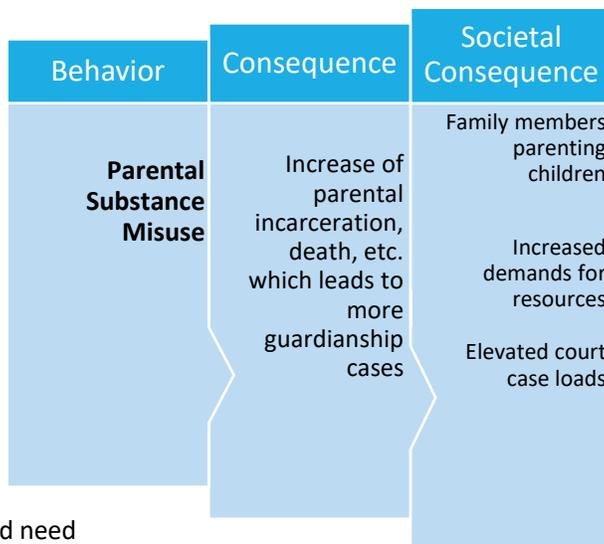
According to various conversations within the judicial system, a great deal of the guardianship cases is often linked to substance misuse issues. Some examples provided were when a parent is sentenced to jail time due to substance misuse and then guardianship is sought by grandparents or another family member to prevent the child from having to enter the foster care system. This then results in grandparents raising their grandchildren and being made the responsible parties for those children or single parents raising children on their own.

As one explores the greater impact of this, one must link the connection between substance misuse and the rising cases of guardianship and the societal impact that has. For instance, within our county a weekly workshop was offered to individuals who found themselves parenting youth who were not their biological children. Of those who participated in these sessions, the majority shared a story that connected them to being the sole providers of care for youth who required care due to parental substance misuse which led to incarceration, abandonment, or even death.



As the instances of guardianship cases are at a high rate within our community, the need for resources to assist the individuals who are now parenting is increasing. Through conversations within the community, navigating the world of parenting as a non-parent as it relates to being able to obtain access to health care, child care, and in some cases the necessities such as formula and diapers is challenging.

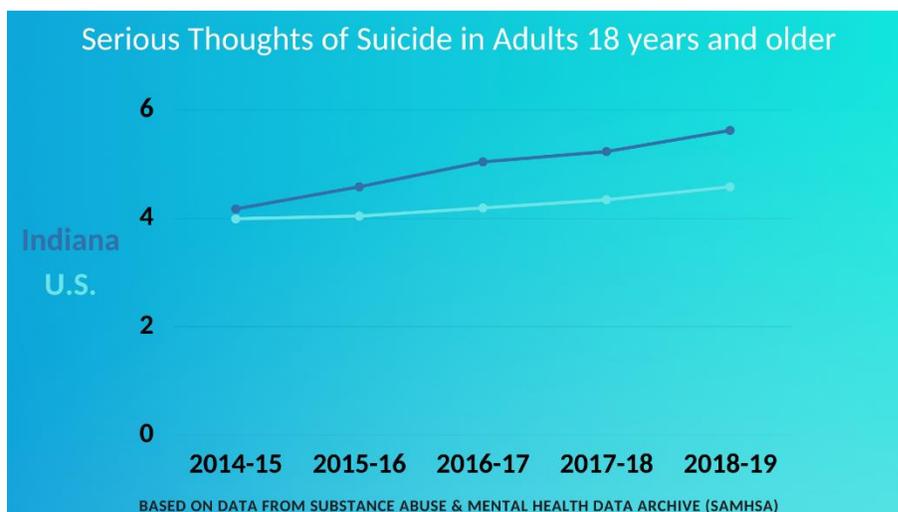
Ultimately, as the rate of guardianship cases increases as a result of parental substance misuse, the greater the need is for resources within our community to support the individuals and youth impacted as a result of the transfer of guardianship and the overall number of cases the courts must handle also increases, influencing the demand and need within the judicial system.



### Poor Mental Health

Within the greater part of 10 years, the number of adults in Indiana who have had serious thoughts of suicide has been on a trending increase and has remained above the national average. This is an important consequence to consider as there is a direct lineage between poor mental health, intentional self-harm deaths, and substance use. According to an article released by the Substance Abuse and Mental Health Services Administration (SAMHSA) reads, “a diagnosis of alcohol misuse or dependence

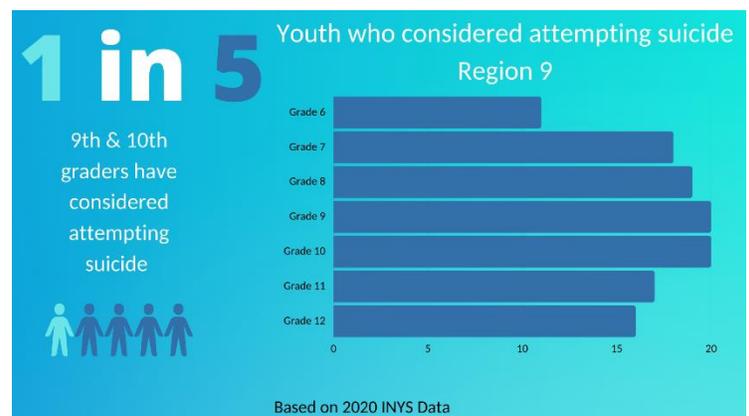
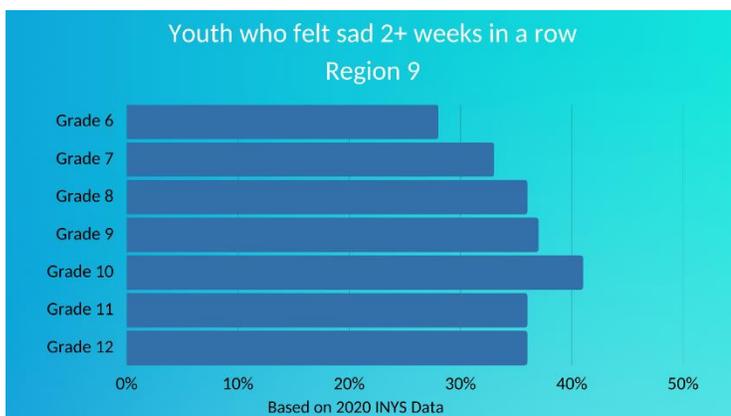
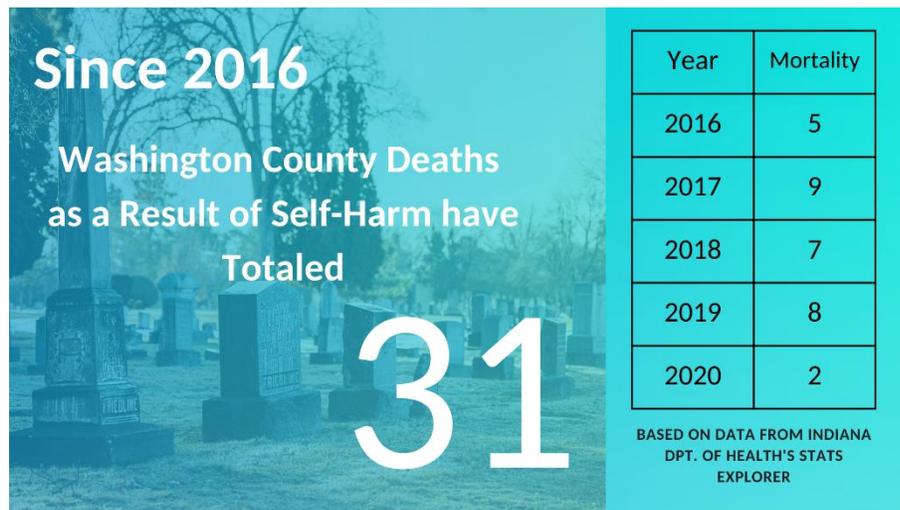
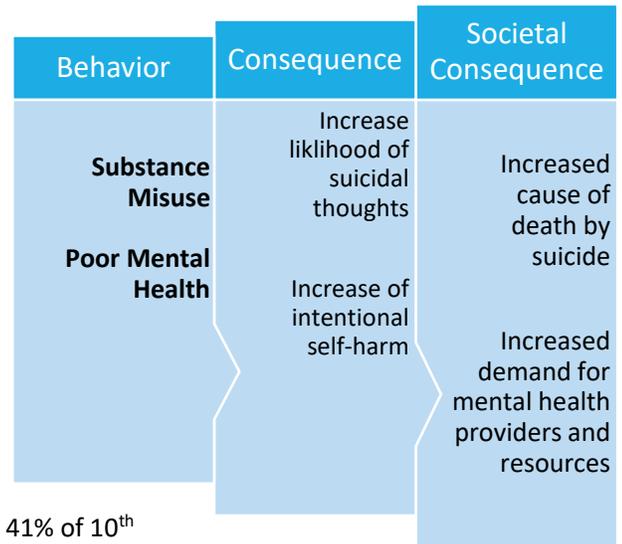
is associated with a suicide risk that is 10 times greater than the suicide risk in the general population, and individuals who inject drugs are at about 14 times greater risk for suicide” (Substance Abuse and Mental Health Services Administration, 2016). Therefore, it is necessary to consider the connection between substance misuse and suicidal thoughts and intentional self-harm.



Across the general population, when comparing Indiana to the United States, as a state, Indiana has ranked higher in deaths due to intentional self-harm than the national average.

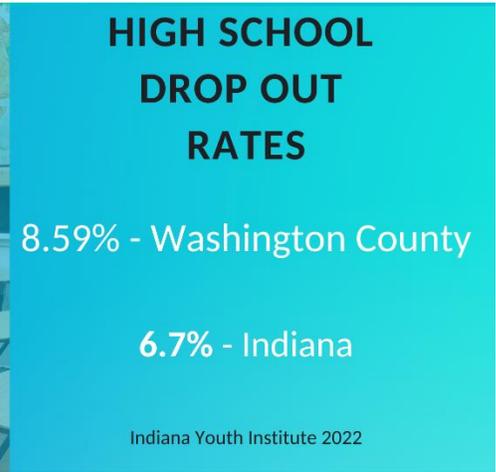
Despite the decline in the years between 2018 and 2019, suicidal thoughts and deaths are a societal consequence to consider as it is connected to substance misuse (Suicide in Indiana, n.d.). According to the Indiana Department of Health’s Stats Explorer, since 2016 in Washington County there have been 31 deaths as a result of self-harm (Indiana Department of Health, n.d.).

The Indiana Youth Survey has a portion of the survey dedicated to understanding mental health measures related to youth behaviors such as extended feelings of sadness or suicide contemplation. Within Region 9, 41% of 10<sup>th</sup> graders reported feeling sad for 2+ weeks in a row and 20% of 10<sup>th</sup> graders reported considering attempting suicide (INYS 2020). As youth experience mental health issues, the potential for self-harm, suicidal ideations, and the demand for resources increases.



### Dropping out of High School

Within Washington County, youth are dropping out of high school at higher rates than the rest of the state. Washington County's dropout rate (8.59%) is higher than the state average (6.7%) (Indiana Youth Institute, 2022). Expanding on this, County Health Rankings compared Washington County to the greater state of Indiana and the county's average high school completion rate falls below the state average. Washington County residents' completion rate for high school is 85% whereas the state's average is 89% (County Health Rankings, 2022). Ultimately, dropping out of high



school is a problem behavior because it is connected to higher likelihood of poor health and life outcomes. Furthermore, the behavior of dropping out of high school is linked to associated at risk students such as those experiencing homelessness, those who are chronically absent, and those who have exhibited behavior that results in some form of school discipline. The high school dropout rate of our community is necessary to explore because as more students leave the educational environment without a credential, youth are subsequently more likely to experience increased challenges. For example, an article published on the American Psychological Association website reads,

compared to high school graduates, they are less likely find a job and earn a living wage, and more likely to be poor and to suffer from a variety of adverse health outcomes. Moreover, they are more likely to rely on public assistance, engage in crime and generate other social costs borne by taxpayers. Poverty and dropouts are inextricably connected in the three primary settings affecting healthy child and adolescent development: families, schools and communities (Rumberger, 2013).

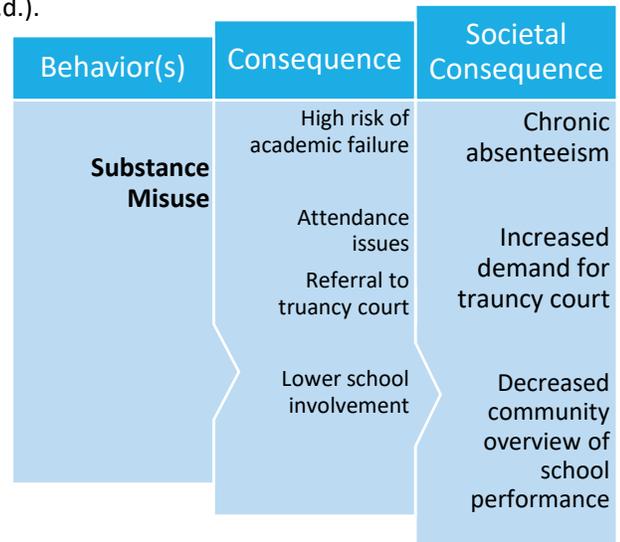
Ultimately, dropping out of high school is a problem behavior that leads to societal consequences because it is associated with an increased likelihood for poverty, decreased wage opportunity for both non-graduates and their graduate counterparts, and higher social costs that impacts the average taxpayer.

Behavior(s)	Consequence	Societal Consequence
<b>Substance Misuse</b>	Higher risk of academic failure	Increased need for public assistance
	Increased attendance issues	
	Decreased involvement within school	Increased social cost to taxpayers
		Laborforce less attractive to economic development

### Chronic Absenteeism

The schools of Washington County reported that on average between all three local school corporations, students are more likely to be chronically absent than compared to the rest of the state. The Indiana Department of Education’s data dashboard known as INview provided the average chronic absenteeism stats for each corporation and based upon averaging those figures out, across the school systems within the county, students are chronically absent to the percentage of 11.6 whereas the state average for truancy is 11.4% (Indiana Department of Education, n.d.).

Attendance issues are directly related to academic success and even the increased likelihood for dropping out, which is linked to greater societal challenges. Chronic Absenteeism is of growing issue within our county and has resulted in the demand for county truancy court. These truancy court cases then increase the need for judicial and probation department involvement. Additionally, chronic absenteeism is directly related to decreased academic performance, lower school involvement, etc., which then impacts the community overview of school performance.

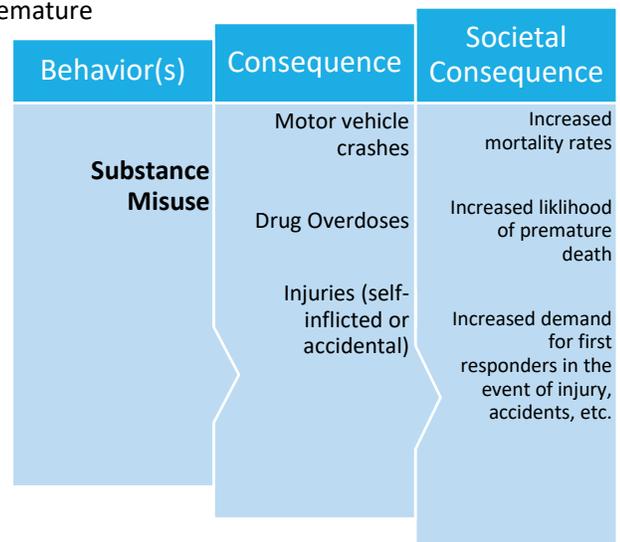


### Premature Death

The potential of life lost before the age of 75 within Washington County is at a much higher likelihood than the state average. For instance, County Health Rankings shares that per 100,000 individuals, 8,600 Hoosiers are likely to face mortality before the age of 75. In Washington County, that number surges to 10,100 early deaths per 100,000. Similarly, the average life expectancy for Washington County residents is 75.1 years of age. Additionally, the rankings shared that there were 504 deaths before the age of 75 within the county between the years of 2018-2020. Premature

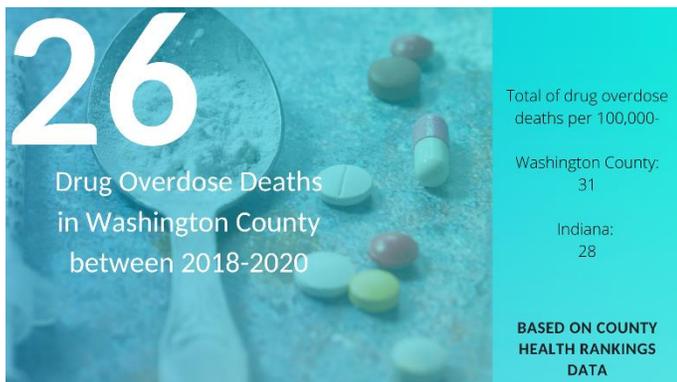
death can be correlated to the poor health outcomes and factors of the county. Washington County is ranked in the lowest 25% of the state for both outcomes and factors (County Health Rankings, 2022).

Exploring the mortality of Washington County, the number of deaths stemming from causes such as motor vehicle crashes, drug overdoses, injuries, and firearm fatalities are on average occurring more often in Washington County than other counties within the state. These causes of death could connect to the likelihood of earlier fatality for Washington County residents, which is a negative health outcome and relevant to the health disparities within the county.





Within the county, from 2014 to 2020 there have been 51 motor vehicle crash deaths (County Health Rankings, 2022). Washington County’s rate per 100,000 for deaths due to motor vehicle crashes is 26, which is over double the Indiana rate of 12. Based upon data available from the Indiana Criminal Justice Institute’s Indiana Traffic Safety facts, there were 99 alcohol-impaired collisions from 2015-2019 ( (Indiana University Public Policy Institute, 2019). In 2019 there were 12 alcohol-impaired collisions reported but none of them were fatal. Within the 2015-2019 time period there was only one reported motor vehicle fatality as a result of alcohol-impairment. While the data is insufficient in tying alcohol-impairment to motor vehicle crash deaths, this measure is still one to consider as it relates to the societal consequence of an increase in demand for first responders, likelihood for injury, etc.



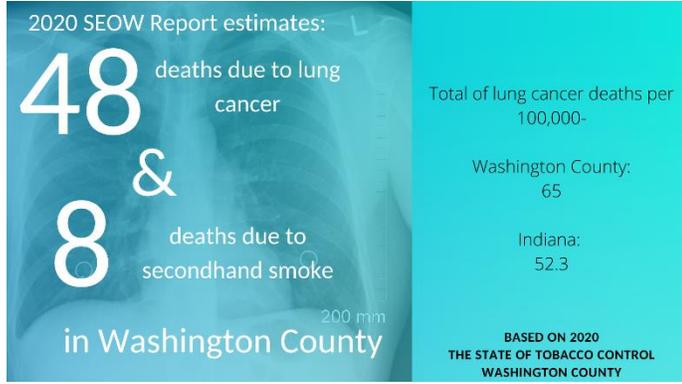
In Washington County between 2018 and 2020 there were 26 drug overdose deaths. Comparing the county to the state, the Washington County death rate per 100,000 for drug overdoses is 31 whereas the state of Indiana’s is 28 (County Health Rankings, 2022). This means that within the county residents are more likely to die due to drug overdose than residents of other counties. Death by overdose is directly related to substance misuse.



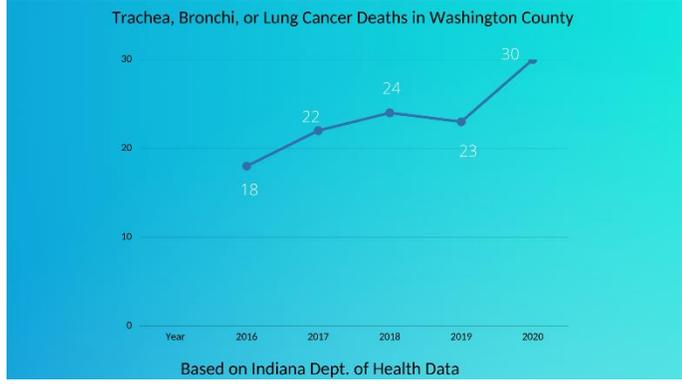
Washington County is also higher than the state for total of firearm fatalities per 100,000. In the county, there have been 32 firearm fatalities from 2016 to 2020, meaning the county’s rate is 23 per 100,000 while the state is at 15 firearm fatalities per 100,000 (County Health Rankings, 2022). According to Indiana’s Department of Health Stats Explorer, the number of self-inflicted fatalities by firearm in Washington County for the years 2016-2020 was 24 ( (Indiana Department of Health, n.d.). Concluding, 24 out of 32 firearm fatalities were self-inflicted. As discussed previously, death by suicide is closely connected to substance misuse and poor mental health.



Overall, the population of Washington County is more likely to experience death due to injury as compared to Hoosiers in other counties. For instance, County Health Rankings shared that per 100,000 residents of Washington County are dying due to injury at the rate of 105 compared to the state rate of 85 (County Health Rankings, 2022). While the cause of injuries leading to fatality is unknown, there is a known connection between substance misuse and increased risk of injury, which could lead to death.



Additionally, Washington County residents are dying at increased rates due to lung cancer than compared with the rest of the state. Per 100,000 residents, 65 deaths are attributed to lung cancer whereas the state rate is 52.3 deaths per 100,000 (Hoosier Hills PACT, 2020). The 2020 SEOW Report estimated that 48 deaths within the county could be traced to lung cancer and 8 deaths to secondhand smoke (Indiana State Epidemiological Outcomes Workgroup, 2020). There is a direct correlation between the behavior of smoking and lung cancer, which increases the likelihood for premature death. Also, the general trend as it relates to trachea, bronchi, or lung cancer deaths within Washington County has increased since 2016. In 2020, there were 30 deaths within the county due to trachea, bronchi, or lung cancer (Indiana Department of Health, n.d.). These types of cancers are often directly linked to the behavior of smoking which can lead to the possible outcome of earlier, or premature, death.



## Data Collection Process

The ability to collect the data and information relevant to the societal consequences of substance misuse within our community stemmed from a variety of methods. As we considered the impact of local arrests and the cases as a result of those arrests, it was imperative to have conversations with those individuals who work in the sectors most impacted by substance misuse. For instance, connecting with local law enforcement, the prosecutor's office, probation office, Department of Child Services, CASA, and the county circuit court allowed for greater understanding of the ripple effect that substance use and misuse has on Washington County. The insight from various individuals allowed for deeper meaning to connect to the levels of impact experienced by all citizens of our community. Additionally, the data collected from various sources such as the County Health Rankings and Indiana Criminal Justice Institute allowed for greater understanding of the impact that substance misuse has on various consequences and outcomes.

## Other Relevant Information

While many would consider overdoses to be an area of societal consequence, various conversations revealed that the number of recorded overdose emergencies and calls have been declining in the last year. The local connection through valuable communication highlighted that as the availability of Narcan, Naloxone, etc. has decreased the number of calls local emergency services receive in that context. While this data is missing, it was shared that while overdose emergencies and related calls might be down drug use and its related consequences are not. One of the biggest concerns regarding this is the individuals who should still be seeking medical assistance after overdosing and aren't.

# Findings

Consequences	Behaviors	Determinants																																																																																																																				
<p><b>Legal</b> 95 juvenile cases in the year 2021 Drug Involved - 11 Other causes (battery, theft, etc.) - 84 (Washington County Prosecutors Office 2022)</p> <p>438 substance involved adult arrests in 2021</p> <p style="padding-left: 40px;">Alcohol- 146 Meth- 130 Heroin- 27 Marijuana-105 Controlled Substances-30 (Washington County Prosecutors Office 2022)</p> <p>69% of traffic arrests in Washington County in 2021 were due to alcohol and/or drug impairment (<b>Indiana Arrest Dashboard, 2022</b>)</p> <p>11.5% of all alcohol arrests in Washington County since 2008 are minor involved arrests (Indiana Arrest Dashboard, 2022)</p> <p>54% of violent crimes in Washington County in 2021 were domestic battery (Indiana Arrest Dashboard, 2022)</p> <p>55% of property related crimes were theft in Washington County in 2021 (Indiana Arrest Dashboard, 2022)</p> <p><b>School Suspensions/Expulsions</b> In 2019, 94 incidents of school suspension or expulsion were reported involving 90 youth related to alcohol, tobacco, and/or drug use, over half were tobacco related Tobacco related: 59 incidents, 55 youth (SEOW Report 2019)</p>	<p><b>Youth substance use (Regional)</b> Monthly vape use higher than state rates:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr><td>7</td><td>8.9%</td><td>6.5%</td></tr> <tr><td>8</td><td>11.3%</td><td>10.0%</td></tr> <tr><td>9</td><td>14.0%</td><td>13.0%</td></tr> <tr><td>10</td><td>18.1%</td><td>17.3%</td></tr> <tr><td>12</td><td>23.9%</td><td>23.0%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p> <p>Monthly cigarette use at or higher than state rates:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr><td>6</td><td>1.2%</td><td>1.2%</td></tr> <tr><td>7</td><td>2.8%</td><td>2.1%</td></tr> <tr><td>8</td><td>3.1%</td><td>2.6%</td></tr> <tr><td>9</td><td>4.9%</td><td>3.4%</td></tr> <tr><td>10</td><td>4.6%</td><td>3.8%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p> <p>Monthly smokeless tobacco use higher than state rates:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr><td>7</td><td>1.0%</td><td>0.9%</td></tr> <tr><td>8</td><td>2.1%</td><td>1.3%</td></tr> <tr><td>9</td><td>2.3%</td><td>1.4%</td></tr> <tr><td>10</td><td>2.8%</td><td>2.2%</td></tr> <tr><td>11</td><td>3.0%</td><td>2.4%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p> <p>Monthly marijuana use at or higher than state rates:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr><td>6</td><td>1.0%</td><td>1.0%</td></tr> <tr><td>7</td><td>3.1%</td><td>2.8%</td></tr> <tr><td>8</td><td>5.9%</td><td>5.5%</td></tr> <tr><td>9</td><td>9.3%</td><td>8.2%</td></tr> <tr><td>10</td><td>12.7%</td><td>12.2%</td></tr> <tr><td>12</td><td>18.5%</td><td>17.3%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p> <p>Monthly alcohol use higher than state rates:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr><td>8</td><td>12.0%</td><td>11.2%</td></tr> <tr><td>9</td><td>15.0%</td><td>14.4%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p>	Grade	Region 9	Indiana	7	8.9%	6.5%	8	11.3%	10.0%	9	14.0%	13.0%	10	18.1%	17.3%	12	23.9%	23.0%	Grade	Region 9	Indiana	6	1.2%	1.2%	7	2.8%	2.1%	8	3.1%	2.6%	9	4.9%	3.4%	10	4.6%	3.8%	Grade	Region 9	Indiana	7	1.0%	0.9%	8	2.1%	1.3%	9	2.3%	1.4%	10	2.8%	2.2%	11	3.0%	2.4%	Grade	Region 9	Indiana	6	1.0%	1.0%	7	3.1%	2.8%	8	5.9%	5.5%	9	9.3%	8.2%	10	12.7%	12.2%	12	18.5%	17.3%	Grade	Region 9	Indiana	8	12.0%	11.2%	9	15.0%	14.4%	<p><b>Risk Factors</b> <b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr><td>6<sup>th</sup></td><td>57%</td></tr> <tr><td>8<sup>th</sup></td><td>71%</td></tr> <tr><td>10<sup>th</sup></td><td>66%</td></tr> <tr><td>12<sup>th</sup></td><td>73%</td></tr> </tbody> </table> <p style="text-align: center;">(INYS 2020)</p> <p><b>Perception of Avail. 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Average of in school suspension for 2019-2020 within the county is 4.4%, which is higher than the state average of 3.9% (Indiana Dept. of Ed)

Average of school expulsions within the county for 2019-2020 is at the same rate as the state average of 0.2% (Indiana Dept. of Ed)

**Family/Community Child Removal from Home**

Washington County’s removal of home due to substance use is 67% as cause of removal compared to the state average of 61% (County Epidemiological Data)

**Need for Court Appointed Special Advocates (CASA) for youth**

In Washington County there are currently 29 active CASA cases for a total of 44 children (26/29 cases are substance use related)

**Adverse Childhood Experiences (ACEs)**

Youth in Indiana are more likely to have 2 or more ACEs than compared to the national average.  
 Indiana- 24.2%  
 United States-21.7%  
 (IUPUI Center for Public Health)

Estimated that 56% of lifetime drug use is related to the prevalence of ACEs and 63% to the prevalence of lifetime illicit drug addiction (IUPUI Center for Public Health)

**School dropout**

Washington County’s dropout rate (8.59%) is higher than the state average (6.7%) (Indiana Youth Institute 2022)

**Chronic Absenteeism**

Within the three school corporations of Washington County, the average rate of chronic absenteeism was 11.6% for the 2020-2021 school year while the state average is 11.4% (Indiana Dept. of Ed)

**Binge drinking higher than state rates:**

Grade	Region 9	Indiana
7	2.8%	2.3%
8	3.6%	3.5%
9	5.4%	5.2%
10	8.1%	7.5%

(INYS 2020)

**Increasing trend of monthly cigarette use:**

**6<sup>th</sup> grade**

Year	Monthly Use
2016	0.9%
2018	1.1%
2020	1.2%

(INYS 2016, 2018, 2020)

**Increasing trend of monthly marijuana use:**

**6<sup>th</sup> grade**

Year	Monthly Use
2016	0.5%
2018	0.6%
2020	1.0%

(INYS 2016, 2018, 2020)

**10<sup>th</sup> grade**

Year	Monthly Use
2016	9.5%
2018	11.6%
2020	12.7%

(INYS 2016, 2018, 2020)

**Increasing trend of monthly alcohol use:**

**6<sup>th</sup> grade**

Year	Monthly Use
2016	3.1%
2018	3.2%
2020	3.9%

(INYS 2016, 2018, 2020)

**Adult substance use**

Hoosier adults’ use of substances is higher than the US’ average and is a trending increase since 2016

Adult Smoking Rate  
 Washington County- 24%  
 Indiana- 20%  
 (County Health Rankings 2022)

**Contributing Factors**

**Community Perception of Availability-**

There is a community perception that nicotine and THC products are being sold to underage youth as revealed by multiple conversations (Community member conversations)

**Community Perception of Ease of Substance Access-**

Members within our community believe that substances to be easy or sort of easy for youth to obtain at high rates

- Tobacco - 87%
  - Vape / E-Cig Products- 89%
  - Alcohol-86%
  - Marijuana - 86%
  - Drugs such as cocaine, LSD, or amphetamines - 61%
- (Community Survey May 2022)

**Community Norms favorable to use-**

Community members perceive that other adults within the community would find it not wrong or only sort of wrong to provide substances to youth within our community  
 Alcohol - 42%  
 Vapes/E-Cigs - 42%  
 (Community Survey May 2022)

**Lack of dialogue with youth-**

The majority of adults (parents, grandparents, and community members-at-large) within our community are not having regular conversations with youth regarding substance use

- Adults within the last 30 days not having a conversation regarding substance use
- Underage drinking - 72%
- Vaping / E-Cig use - 71%
- Marijuana use - 76%
- Other drug use - 77%

**Guardianship Cases**

Guardianship cases have increased within the last year from 49 to 64 (Washington County Circuit Court)

**Health**

**Premature Death**

Location	Mortality before 75 y.o. per 100,000
Washington County	10,100
Indiana	8,600

(County Health Rankings 2022)

**Motor Vehicle Crash Deaths**

Location	Mortality per 100,000
Washington County	26
Indiana	12

(County Health Rankings 2022)

**Drug Overdose Deaths**

Location	Mortality per 100,000
Washington County	31
Indiana	28

(County Health Rankings 2022)

**Firearm Fatalities**

Location	Mortality per 100,000
Washington County	23
Indiana	15

(County Health Rankings 2022)

**Injury Fatalities**

Location	Mortality per 100,000
Washington County	105
Indiana	85

(County Health Rankings 2022)

**Self-Inflicted Fatalities**

31 self-inflicted fatalities from 2016-2020 in Washington County (Indiana Dpt. Of Health)

Monthly Tobacco Product Use  
Indiana-28.18%  
US-21.28%  
(SAMHSA Data Portal)

Monthly Marijuana Use  
Indiana-11.56%  
US-10.80%  
(SAMHSA Data Portal)

Yearly Meth Use  
Indiana- 0.93%  
US- 0.70%  
(SAMHSA Data Portal)

Binge Alcohol Use  
Indiana-25.54%  
US-24.21%  
(SAMHSA Data Portal)

**Depression and anxiety**

Youth within our region are experiencing behaviors related to depression and anxiety at higher rates that other regions

Youth who have felt sad for 2+ weeks

- 6<sup>th</sup> grade- 28.4%
  - 7<sup>th</sup> grade-33.3%
  - 8<sup>th</sup> grade-36.4%
  - 9<sup>th</sup> grade-37.4%
  - 10<sup>th</sup> grade-40.5%
  - 11<sup>th</sup> grade-36.3%
  - 12<sup>th</sup> grade-36.2%
- (2020 INYS)

Youth who have made plans for attempting suicide

- 6<sup>th</sup> grade-8.8%
  - 7<sup>th</sup> grade-14.5%
  - 8<sup>th</sup> grade-14.5%
  - 9<sup>th</sup> grade-15.2%
  - 10<sup>th</sup> grade-15.0%
  - 11<sup>th</sup> grade-13.3%
  - 12<sup>th</sup> grade-11.2%
- (2020 INYS)

Youth who considered attempting suicide

- 6<sup>th</sup> grade-10.8%
- 7<sup>th</sup> grade-17.5%
- 8<sup>th</sup> grade-18.9%
- 9<sup>th</sup> grade-20.2%
- 10<sup>th</sup> grade-20.0%
- 11<sup>th</sup> grade-17.2%
- 12<sup>th</sup> grade- 16.2%

**Laws favorable to use-**

Within the state of Indiana Delta 8 and 10 THC products are available for legal sale to customers 21 years of age and older - multiple local retailers within Washington County have these items for sale

Bordering states Michigan and Illinois have legalized the use of marijuana and Ohio has legalized it for medicinal use

**Trachea, Bronchi, or Lung Cancer Deaths in Washington County (higher likelihood associated with smoking)**

Year	# Deaths
2016	18
2017	22
2018	24
2019	23
2020	30

(Indiana Dpt. Of Health)

**Estimated deaths due to tobacco**  
Washington County- 48  
(State Epidemiological Outcomes Workgroup 2020)

**Estimated deaths due to secondhand smoke**  
Washington County- 8  
(State Epidemiological Outcomes Workgroup 2020)

**Alcohol related deaths**

Year	# Deaths
2016	8
2017	5
2018	1
2019	7
2020	2

(Indiana Dpt. Of Health)

**Financial**

**Free and Reduced Lunch Rate**  
County’s rate for free + reduced price lunch 50.6% in 2020 (Annie E. Casey Foundation)

**Household Income**

The median household income for Washington County is \$11k less than the state average (Annie E. Casey Foundation)

**Cost of Secondhand Smoke**

Estimated cost of secondhand smoke due to medical costs and premature death in Washington County- \$9.6 million (State Epidemiological Outcomes Workgroup 2020)

(2020 INYS)

**School Safety and Disciplinary Incidents**

479 incidents within the three Washington County school corporations in 2020-2021 school year (Indiana Dept. of Ed)

**Children in Poverty**

17.4% of Washington County children are impoverished, 17.2% of children in Indiana live in poverty (IYI 2022)

**Housing Insecurity**

High Housing Burden (mortgage)-  
Washington County-22.3%  
Indiana-18.7%

High Housing Burden (rent)-  
Washington County-51.1%  
Indiana-45.4%  
(IYI 2019)

**Children of Opportunity**

Disconnected youth (ages 16-24 not engaged in education or employment)

Washington County-16.6%  
Indiana-13.1%  
US-12.6%

(Measure of America, 2022)

## Priority #1-Nicotine

“Nicotine is a highly addictive chemical compound present in a tobacco plant. All tobacco products contain nicotine, including cigarettes, non-combusted cigarettes (commonly referred to as “heat-not-burn tobacco products” or “heated tobacco products”), cigars, smokeless tobacco (such as dip, snuff, snus, and chewing tobacco), hookah tobacco, and most e-cigarettes” (U.S. Food and Drug Administration).

Nicotine is an identified priority substance within our community due to the associated community perception of the issue, regional and state data that points to the vaping of nicotine, monthly use of tobacco related products to the middle school and high school population within our region, and as the prevalence of tobacco use such as cigarettes and other products within the adult population is much higher than the national averages.

Ultimately, based upon community discussions the behavior of vaping is one of the largest areas of concern. 88% of the participants within our community identified vaping or e-cigarette use by youth within our community as either a problem, a medium problem, or a big problem. Of the 88%, 55% perceived vaping to be a big problem for the youth of Washington County. Additionally, based on further information that 89% of respondents believing it would be easy or sort of easy for a youth to obtain the vape devices for use, it is an issue the community identifies as well. While the youth in high school are reporting lower monthly use of vaping and other nicotine products, local school officials believe it is just as prominent of an issue as before if not worse. Based upon the reported monthly vape use of 7<sup>th</sup> and 8<sup>th</sup> graders, in addition to the gleaned information from the local schools, nicotine is resulting in consequences that impede on the youth’s education and livelihood. The consequences of nicotine use to youth within our county is best explained by the 55 youth in 2019 who experienced suspensions or expulsions due to tobacco. When a student is caught with tobacco or vaping, the infractions vary from school to school but generally students receive some form of discipline, sometimes probation from playing sports or involvement in other extra curriculums, and even expulsion.

It is important to note that at this time there is not sufficient enough data to determine if the act of vaping by youth in our community is tied to the substance of nicotine and/or THC. Discussions with local school administrators and school resource officers highlighted that the test kits to test the devices for THC are expensive and difficult to obtain due to backorders and shipping delays. Furthermore, it was shared that often times those who confiscate the vapes do not necessarily know how to handle them in a way to effectively test its components as the devices themselves are often complicated and have exploded in the past. As we do not have the sufficient understanding to determine whether vape use is mostly nicotine or THC based within our community, it is necessary for us to continue to gather more information and further develop our understanding. Despite this, nicotine, is still a relevant priority as it is directly linked to behaviors such as the elevated adult smoking rate and various consequences spanning the various age span such as the outcome for increased likelihood of lung cancer.

According to the Indiana Department of Health Stats Explorer, from 2016 to 2020, there have been 117 deaths associated with trachea, bronchial, and lung cancer, all often associated with the behavior of smoking (Indiana Department of Health, n.d.). Additionally, the 2020 report from the Indiana State Epidemiological Outcomes Workgroup (SEOW) estimated that within Washington County there are 1,444 individuals within the county living with a tobacco-related illness. The report also shared that there was an estimated 44 deaths due to tobacco and 8 deaths associated with secondhand smoke. The consequence of secondhand smoke within Washington County is estimated to cost \$9.6 million in medical costs and premature death (Indiana State Epidemiological Outcomes Workgroup, 2020). Overall, due to the perception of use, actual use, and consequences that span the lifespan and society as whole nicotine is a priority substance within Washington County.

Priority #1-Nicotine

Consequences	Behaviors	Determinants																																																																																																
<p><b>School Suspensions/Expulsions</b> 55 youth in Washington County were either suspended or expelled due to tobacco in 59 incidents (2019 SEOW Report)</p> <p><b>Trachea, Bronchi, or Lung Cancer Deaths (higher likelihood associated with smoking)</b></p> <table border="1" data-bbox="110 556 503 745"> <thead> <tr> <th>Year</th> <th># Deaths</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>18</td> </tr> <tr> <td>2017</td> <td>22</td> </tr> <tr> <td>2018</td> <td>24</td> </tr> <tr> <td>2019</td> <td>23</td> </tr> <tr> <td>2020</td> <td>30</td> </tr> </tbody> </table> <p>(Indiana Dpt. Of Health)</p> <p><b>Estimated deaths due to tobacco</b> Washington County- 48 (State Epidemiological Outcomes Workgroup 2020)</p> <p><b>Estimated deaths due to secondhand smoke</b> Washington County- 8 (State Epidemiological Outcomes Workgroup 2020)</p> <p><b>Cost of Secondhand Smoke</b> Estimated cost of secondhand smoke due to medical costs and premature death in Washington County- \$9.6 million (State Epidemiological Outcomes Workgroup 2020)</p>	Year	# Deaths	2016	18	2017	22	2018	24	2019	23	2020	30	<p><b>Youth Substance Use</b> Monthly vape use higher than state rates:</p> <table border="1" data-bbox="560 336 925 514"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>8.9%</td> <td>6.5%</td> </tr> <tr> <td>8</td> <td>11.3%</td> <td>10.0%</td> </tr> <tr> <td>9</td> <td>14.0%</td> <td>13.0%</td> </tr> <tr> <td>10</td> <td>18.1%</td> <td>17.3%</td> </tr> <tr> <td>12</td> <td>23.9%</td> <td>23.0%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Monthly cigarette use at or higher than state rates:</p> <table border="1" data-bbox="560 640 925 808"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>1.2%</td> <td>1.2%</td> </tr> <tr> <td>7</td> <td>2.8%</td> <td>2.1%</td> </tr> <tr> <td>8</td> <td>3.1%</td> <td>2.6%</td> </tr> <tr> <td>9</td> <td>4.9%</td> <td>3.4%</td> </tr> <tr> <td>10</td> <td>4.6%</td> <td>3.8%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Monthly smokeless tobacco use higher than state rates:</p> <table border="1" data-bbox="560 934 925 1102"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>1.0%</td> <td>0.9%</td> </tr> <tr> <td>8</td> <td>2.1%</td> <td>1.3%</td> </tr> <tr> <td>9</td> <td>2.3%</td> <td>1.4%</td> </tr> <tr> <td>10</td> <td>2.8%</td> <td>2.2%</td> </tr> <tr> <td>11</td> <td>3.0%</td> <td>2.4%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Increasing trend of monthly cigarette use: 6<sup>th</sup> grade</p> <table border="1" data-bbox="560 1260 925 1375"> <thead> <tr> <th>Year</th> <th>Monthly Use</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>0.9%</td> </tr> <tr> <td>2018</td> <td>1.1%</td> </tr> <tr> <td>2020</td> <td>1.2%</td> </tr> </tbody> </table> <p>(INYS 2016, 2018, 2020)</p> <p><b>Adult Substance Use</b></p> <p>Adult Smoking Rate Washington County- 24% Indiana- 20% (County Health Rankings 2022)</p> <p>Monthly Tobacco Product Use Indiana-28.18% US-21.28% (SAMHSA)</p>	Grade	Region 9	Indiana	7	8.9%	6.5%	8	11.3%	10.0%	9	14.0%	13.0%	10	18.1%	17.3%	12	23.9%	23.0%	Grade	Region 9	Indiana	6	1.2%	1.2%	7	2.8%	2.1%	8	3.1%	2.6%	9	4.9%	3.4%	10	4.6%	3.8%	Grade	Region 9	Indiana	7	1.0%	0.9%	8	2.1%	1.3%	9	2.3%	1.4%	10	2.8%	2.2%	11	3.0%	2.4%	Year	Monthly Use	2016	0.9%	2018	1.1%	2020	1.2%	<p><b>Contributing Factors</b> <b>Perception of Availability</b> 89% of community members believe it would be easy for youth to obtain nicotine and/or THC vape devices (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1" data-bbox="954 766 1347 934"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1" data-bbox="982 1291 1347 1459"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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## Priority #2- Tetrahydrocannabinol (THC)

Tetrahydrocannabinol, most commonly known as THC, “is the chemical responsible for most of marijuana's psychological effects” (Bradford, 2017). THC is the cannabinoid found in marijuana. Marijuana is most commonly identified in three products: herbal, hash, and hash oil. According to the IU School of Public Health, THC, which is the main “ingredient” of marijuana can be consumed in a multitude of ways ranging from smoking, eating or drinking, and breathing vapors (Prevention Insights, n.d.). Delta 8 and Delta 10 are manufactured forms of cannabinoids with claimed lower potency as to not provide a “high”. These products are gaining popularity within our state due to the permissible sale of them to anyone over the age of 21, youth obtaining and using those products is becoming a growing concern. As these laws do not restrict the use and norms of THC consumption, it is imperative that we prioritize THC as a substance of focus especially as we lack the current knowledge of whether or not the risky behavior of youth related to vaping is nicotine or THC based.

Based upon the community discussions with local school administrators, marijuana use is of a growing concern. One local administrator shared that marijuana is impacting students within their school as it relates to sports eligibility, academic proficiency, and even impacting the school’s rate of expulsions. The administrator shared that within the last three to four years more students within their school have been expelled for marijuana possession than in the past. Based upon the random drug screens student drivers, athletes, and those involved in specific extra-curriculars within that school are randomly selected for, it was shared that cannabinoids and nicotine are the two most common substances that students test positive for.

Youth within our region are using marijuana in elevated rates since the 2016 Indiana Youth Survey. For example, monthly use amongst 6<sup>th</sup> graders has doubled. While the percentage is still low, with only 1% of sixth graders reporting monthly use, it can be correlated that as the students age the more likely they are to use marijuana on a monthly basis, as 18.5% of 12<sup>th</sup> graders in region 9 recorded they had used marijuana within the last 30 days. This is an important consideration because all grade levels display the highest risk for not associating substance use with risk of harm. According to the Indiana Youth Survey general correlations, the more frequent the use of a particular substance is the lower the perceived risk of harm is for that particular substance. With that in mind, 12<sup>th</sup> graders are using marijuana at the highest prevalence and are also the highest at risk for low perception of harm due to use. As a connection between THC use and consequences, 95 juveniles were involved in legal cases in 2021. Eleven of those cases were drug involved while the majority of other charges were related to battery and theft. However, based on conversations with local authorities it is the perception that 9/10 cases not listed as drug involved are as a result or connection to substance use and/or misuse.

Priority #2-THC

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<p><b>Legal</b> 95 juvenile cases in the year 2021 Drug Involved - 11 Other causes (battery, theft, etc.) - 84 (Washington County Prosecutors Office 2022)</p> <p>105 Marijuana-related arrests in 2021 (Washington County Prosecutors Office 2022)</p> <p><b>Family/Community</b> <b>Child Removal from Home</b> Washington County’s removal of home due to substance use is 67% as cause of removal compared to the state average of 61% (County Epidemiological Data)</p> <p><b>Need for Court Appointed Special Advocates (CASA) for youth</b> In Washington County there are currently 29 active CASA cases for a total of 44 children (26/29 cases are substance use related)</p> <p><b>Adverse Childhood Experiences (ACEs)</b> Youth in Indiana are more likely to have 2 or more ACEs than compared to the national average. Indiana- 24.2% United States-21.7% (IUPUI Center for Public Health)</p> <p>Estimated that 56% of lifetime drug use is related to the prevalence of ACEs and 63% to the prevalence of lifetime illicit drug addiction (IUPUI Center for Public Health)</p>	<p><b>Youth Substance Use</b></p> <p>Monthly marijuana use at or higher than state rates:</p> <table border="1" data-bbox="560 325 927 583"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>1.0%</td> <td>1.0%</td> </tr> <tr> <td>7</td> <td>3.1%</td> <td>2.8%</td> </tr> <tr> <td>8</td> <td>5.9%</td> <td>5.5%</td> </tr> <tr> <td>9</td> <td>9.3%</td> <td>8.2%</td> </tr> <tr> <td>10</td> <td>12.7%</td> <td>12.2%</td> </tr> <tr> <td>12</td> <td>18.5%</td> <td>17.3%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Monthly vape use higher than state rates:</p> <table border="1" data-bbox="560 703 927 928"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>8.9%</td> <td>6.5%</td> </tr> <tr> <td>8</td> <td>11.3%</td> <td>10.0%</td> </tr> <tr> <td>9</td> <td>14.0%</td> <td>13.0%</td> </tr> <tr> <td>10</td> <td>18.1%</td> <td>17.3%</td> </tr> <tr> <td>12</td> <td>23.9%</td> <td>23.0%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Increasing trend of monthly marijuana use:</p> <p>6<sup>th</sup> grade</p> <table border="1" data-bbox="560 1081 927 1213"> <thead> <tr> <th>Year</th> <th>Monthly Use</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>0.5%</td> </tr> <tr> <td>2018</td> <td>0.6%</td> </tr> <tr> <td>2020</td> <td>1.0%</td> </tr> </tbody> </table> <p>(INYS 2016, 2018, 2020)</p> <p>10<sup>th</sup> grade</p> <table border="1" data-bbox="560 1333 927 1465"> <thead> <tr> <th>Year</th> <th>Monthly Use</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>9.5%</td> </tr> <tr> <td>2018</td> <td>11.6%</td> </tr> <tr> <td>2020</td> <td>12.7%</td> </tr> </tbody> </table> <p>(INYS 2016, 2018, 2020)</p> <p><b>Adult Substance Use</b></p> <p>Monthly Marijuana Use Indiana-11.56% US-10.80% (SAMHSA)</p>	Grade	Region 9	Indiana	6	1.0%	1.0%	7	3.1%	2.8%	8	5.9%	5.5%	9	9.3%	8.2%	10	12.7%	12.2%	12	18.5%	17.3%	Grade	Region 9	Indiana	7	8.9%	6.5%	8	11.3%	10.0%	9	14.0%	13.0%	10	18.1%	17.3%	12	23.9%	23.0%	Year	Monthly Use	2016	0.5%	2018	0.6%	2020	1.0%	Year	Monthly Use	2016	9.5%	2018	11.6%	2020	12.7%	<p><b>Contributing Factors</b> <b>Laws favorable to use</b> Within Indiana THC based products Delta 8 and 10 are available in retail establishments</p> <p><b>Perception of Availability</b> 89% of community members believe it would be easy for youth to obtain nicotine and/or THC vape devices (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1" data-bbox="954 913 1349 1075"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1" data-bbox="982 1411 1349 1572"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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## Priority #3-Alcohol

Alcohol has been identified as a priority substance within our county as it relates to the youth based on the regional data because as the past 30 days use of alcohol rates are declining and as is the rate of binge drinking, it is important to maintain that change and momentum for decrease so that the rate of change continues to move in a decreasing manner. Based upon community conversations and local data, alcohol is one of the largest issues that impacts individuals throughout the span of life. Locally, arrests amongst adults that involve a substance occur the most in connection to alcohol and 69% of traffic arrests are due to alcohol and/or other drug impairments.

An additional consideration for why alcohol is a substance of priority is due to the community norms that have been revealed through conversations with youth, parents, educators, and beyond.

Through the conversations that have taken place as part of this assessment, one common theme in relation to alcohol stood out. Adults within our area would rather allow their children to participate in alcohol use at home under their supervision than to drink alcohol somewhere else. The most typical rationale was that youth are going to experiment with alcohol regardless so it is in the youths' best interest to do it in a safe place, at home, and where the parents know they will not be able to leave or drive, decreasing the overall potential risk of harm or accidental injury. Through the community survey we released, it was identified that 72% of adult respondents, made up of parents, grandparents, and other community members, have not had a conversation with youth regarding underage drinking in the last 30 days. This is a relevant consideration because as the lack of dialogue exists, youth are less likely to see the concern of use among adults, are less likely to associate the use of alcohol with risk, and However, this community normalization of underage alcohol use in addition to the number of youth believing alcohol to be easy or fairly easy to access is likely to increase the overall behavior of alcohol use which then leads to the consequences associated with use, which are that since 2008, there have been 190 minors arrested for a total of 11.5% of alcohol related violations in Washington County.

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<p><b>Legal</b> 190 minors arrested since 2008, accounting for 11.5% of all alcohol related arrests since 2008 (Indiana Arrest Dashboard)</p> <p>146 alcohol related arrests in 2021 (Washington County Prosecutors Office)</p> <p>69% of traffic arrests in Washington County in 2021 were due to alcohol and/or drug impairment (Indiana Arrest Dashboard)</p> <p><b>Community/Family Adverse Childhood Experiences (ACEs)</b> Youth in Indiana are more likely to have 2 or more ACEs than compared to the national average. Indiana- 24.2% United States-21.7% (IUPUI Center for Public Health)</p> <p>Estimated that 56% of lifetime drug use is related to the prevalence of ACEs and 63% to the prevalence of lifetime illicit drug addiction (IUPUI Center for Public Health)</p> <p><b>Child Removal from Home</b> Washington County's removal of home due to substance use is 67% as cause of removal compared to the state average of 61% (County Epidemiological Data)</p> <p><b>Need for Court Appointed Special Advocates (CASA) for youth</b> In Washington County there are currently 29 active CASA cases for a total of 44 children (26/29 cases are substance use related)</p> <p><b>Health</b> <b>Alcohol related deaths</b></p> <table border="1" data-bbox="110 1577 505 1753"> <thead> <tr> <th>Year</th> <th># Deaths</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>8</td> </tr> <tr> <td>2017</td> <td>5</td> </tr> <tr> <td>2018</td> <td>1</td> </tr> <tr> <td>2019</td> <td>7</td> </tr> <tr> <td>2020</td> <td>2</td> </tr> </tbody> </table> <p>(Indiana Dpt. Of Health)</p>	Year	# Deaths	2016	8	2017	5	2018	1	2019	7	2020	2	<p><b>Youth Substance Use</b> Monthly alcohol use higher than state rates:</p> <table border="1" data-bbox="561 220 927 308"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>12.0%</td> <td>11.2%</td> </tr> <tr> <td>9</td> <td>15.0%</td> <td>14.4%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Binge drinking higher than state rates:</p> <table border="1" data-bbox="561 420 927 567"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>2.8%</td> <td>2.3%</td> </tr> <tr> <td>8</td> <td>3.6%</td> <td>3.5%</td> </tr> <tr> <td>9</td> <td>5.4%</td> <td>5.2%</td> </tr> <tr> <td>10</td> <td>8.1%</td> <td>7.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Adult Substance Use</b> Adult binge alcohol consumption: Indiana-25.54% US-24.21% (SAMHSA Data Portal 2020)</p>	Grade	Region 9	Indiana	8	12.0%	11.2%	9	15.0%	14.4%	Grade	Region 9	Indiana	7	2.8%	2.3%	8	3.6%	3.5%	9	5.4%	5.2%	10	8.1%	7.5%	<p><b>Contributing Factors</b> <b>Community Norms favorable to use-</b> 42% of community members perceive that other adults within the community would find it not wrong or only sort of wrong to provide alcohol to youth within our community</p> <p><b>Perception of Availability</b> 86% of community members believe it would be easy for youth to obtain alcohol (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1" data-bbox="956 886 1349 1033"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1" data-bbox="984 1281 1349 1398"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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## Health Disparities

According to healthypeople.gov, “if [an] outcome is seen to a greater or lesser extent between populations, there is disparity” (Office of Disease Prevention and Health Promotion, 2020). For the purpose of understanding our community and the populations served, it is necessary to understand those populations who are seeing higher indicators of likelihood for consequences of negative health outcomes. For this assessment, we are briefly providing an overview of identified health disparities within Washington County so that we can research them more thoroughly in the upcoming months.

To gain insight to the health disparities that exist within the county will allow us to better understand the overall needs of the subpopulations such as those of lower household income and those most likely to experience premature death. Ultimately, by learning more about the existing disparities within Washington County will allow us to identify the gaps in resources that could be contributing to these elevated negative health outcomes.

### Economic Deprivation

Students within the central part of the county are more likely to experience economic disadvantages than the rest of the county, according to the Indiana Department of Education’s INView school population overview. This is also representative of that subpopulation’s qualification for free and reduced lunch. The median household income in Washington County is really low, which contributes to the high free and reduce lunch rates within the county. The median household income is \$11,300 less than the state average (The Annie E. Casey Foundation, 2022). According to Indiana Department of Health’s Tobacco Prevention and Cessation Annual Report in 2020, “adult smoking rates are higher among people with lower income and lower levels of educational attainment when compared to the general population, both in Indiana and the U.S. Smoking disproportionately affects the health of people of lower socioeconomic status. Cigarette smokers of lower income suffer more from diseases caused by smoking than smokers with higher incomes” (Indiana Tobacco Control, 2020) .

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## Premature Death

In addition to the low household income, residents of Washington County are more likely to experience premature death. This is evident through the life expectancy of Washington County being lower than the average life expectancy of the state. Washington County's life expectancy is 75.1 years of age whereas the state's average life expectancy 76.5 (County Health Rankings, 2022). One possible reason for this is that youth, on a regional basis, are at great risk for low perception of risk of drug use, which could lead to increased cigarette use among youth and elevated adult smoking rates which could contribute to early death due to negative outcomes such as lung cancer. To better understand the premature death causes and the subpopulations this outcome impacts within the county, it will be necessary to do additional research in the future.

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## Data Collection Process

In order to gather the data regarding the subpopulation of economic disadvantaged youth within Washington County, it was required to look at the economic disadvantage percentages across the three local school corporations and average them out to see if there was a specific connection between region and elevated rates of economic disadvantages based on area-enrollment. Similarly, it was necessary to identify the connection between economic deprivation and the increased behaviors leading to negative outcomes. In this case, it will be necessary to explore the 2022 Indiana Youth Survey Data when it becomes available to see if there is a connection between local economic disadvantaged students, perception of risk, monthly substance use, etc. as those factors could be linked to the negative health outcomes such as increased likelihood of lung cancer. Likewise, in order to understand premature death outcomes, it was important to consider the connection to that outcome to the possible contributing factors such as low perceived risk of use and how that is then connected to substance use.

## Other Relevant Information

It is important to consider that as a relatively new partnership between Hoosier Uplands and the Washington County Family YMCA, we are in the beginning stages of understanding the health disparities within Washington County and how that relates to determinants, behaviors, and consequences. In the upcoming months we will work diligently to explore the subpopulations of Washington County further so that we can become more familiar with health disparities and ensure that we are working to meet the needs of those vulnerable, disparaged populations in a way that is professional, welcoming, appropriate, and empowering.

In the next two years it will be important to strengthen existing partnerships between agencies already serving these populations and forge new ones to reach the subpopulations experiencing disparities. At this time, we must, first, work to solidify our understanding of local health disparities to guide these partnerships so that we can identify the gaps and barriers that exist to meeting the needs of these populations.

# Section II: Resources & Gaps

## Resources and Gaps Introduction

Washington County has a variety of resources that serve various populations within our county. However, for the sake of this assessment, we will only be identifying the discovered resources that correlate to the priorities addressed in Section I: nicotine, THC, and alcohol. These resources directly support the youth of Washington County and can be correlated to the various determinants this assessment identifies.

Resources included are those agencies or programs that are currently offered in Washington County. In order to better understand the needs of our community, it is critical to also understand where as a community we are lacking resources, or the gaps that exist so that in the future we can take those factors into account when developing new or strengthening existing resources, strategies, programming, etc.

Washington County's Tobacco Prevention and Cessation Program, directed by Rhonda Mills, is a county-based program that zeroes in on the prevention of use of tobacco and related nicotine products as well as cessation, or ending the use of those products. The program, while it supports all age groups within our county, serves the youth population through the Point of Sale Presentation and by educating local school staff on various practices related to the use of nicotine products. The program is also responsible for completing the annual STARS (Standardized Tobacco Assessment for Retail Settings) program in which assigned retailers are scanned by volunteers to determine what products are being sold, if advertising or special pricing exists, etc. The STARS program then allows for local youth volunteers to present the Point of Sale Presentation, including the information gathered from the STARS assessments, to the local schools and students regarding the impact of nicotine, how specific products are marketed, and specific local examples. This past school year, the Point of Sale Presentation was presented by two students and was offered at Eastern Middle School to the 6<sup>th</sup> grade cohort. In the past, these presentations have been offered to upper elementary and middle school students within all three school corporations. Additionally, the program has presented to various groups such as Purdue Extension's PASTA program (Parenting A Second Time Around) to enhance the education of adults within the community to make informed parenting decisions which impact the youth of our community.

Our Place of New Albany, Indiana is an agency that supports the priorities and targeted youth population within our community. To understand the organization and its services, we sat down with their Executive Director, MeriBeth Adams-Wolf. In the past Our Place has offered a variety of programming to youth within our community at the elementary and high school age level. The programs, such as Footprints for Life, Life Skills, and Lions Quest, they have offered in Washington County directly supported substance use prevention. As COVID emerged and the difficulty of sustaining in-person programming and connecting with schools, Our Place worked diligently to reconnect in the 2021-2022 school year. Our Place offered the Footprints for Life program, targeted to elementary students to all three of our school corporations within the county and ultimately, provided the program to all 2<sup>nd</sup> grade students of Bradie Shrum Elementary within the Salem Community School Corporation this school year. Footprints for Life teaches students the use of "I messages" which empowers students through social skills to promote open communication to express feelings and thoughts, positive attitudes, and more while also briefly addressing substance use.

Based upon the research, these are the two main resource providers within Washington County that have supported the education and prevention for the priority substances identified within the last year. Therefore, it is necessary to highlight that other unidentified programming may exist and other resources have been offered to the youth of Washington County but have dissolved due to funding, lack of reconnection as a result of COVID, among a variety of other reasons.

Overall, Washington County's existing resources that target primary prevention and the priorities of nicotine, THC, and alcohol, while rich, have been sparse within the last year. With that in mind, the strengths of Washington County resources are that the Footprint program implemented within Bradie Shrum within the last school year is an evidence-based program that logically makes sense for the needs of our community and our youth and the prevention efforts of the Tobacco Prevention program have been consistent for a number of years and are founded upon excellent working relationships within the school systems, supported by a strong coalition, and the program collaborates with other providers often. There are opportunities to explore to begin filling in the gaps of offering comprehensive programming across the various grade levels, specifically the middle school and high school youth populations and working to ensure that some form of prevention programming exists within each county school corporation. Another required area to strengthen is to allow for community partners to be made more aware of prevention programming that exists. Based upon a local survey that was completed by community partners such as school administrators, health care professionals, and youth program directors, the majority of respondents were not aware of existing prevention initiatives taking place or did not understand what prevention is. Therefore, we must also work to continue to communicate with our community partners in a way that is intentional and educational so that those relationships can be fostered in a way that enhances collaboration.

An additional gap within resources is the funding extended to Washington County schools. Within the county, school funding adequacy is extremely low. Based upon County Health Ranking's measurement of funding adequacy, Washington County is and has been, consistently lower than the national and state average since 2011. To understand funding adequacy County Health Rankings describes it as, "school funding adequacy is the actual per-pupil spending compared with an estimated amount that would need to be spent to achieve US average test scores in each school district. The county value is the cross-district average of the spending surplus or deficit" (County Health Rankings, 2022). According to the school funding adequacy data, Washington County schools are in a deficit of \$1,824 while the Indiana average deficit is \$76. Therefore, it can be stated that Washington County students are receiving the least amount of funding which is directly linked to the availability of resources. As resources availability is heavily reliant on funding it is important to consider that without appropriate resources the possibility for success for students needing resources is hindered. This could ultimately impact those societal consequences of current concern such as dropout rates and chronic absenteeism.

As we celebrate the work that has been done in Washington County and look ahead at future opportunities and the work yet to be developed, it is not possible without the support of our community, partnering agencies, and collaboration. These components of understanding our resources and gaps will allow for enhanced sustainability so that the youth of Washington County are benefitting in such a way that so does our greater society.

## Information Collection Process

In order to understand the existing resources and gaps of our community, a community partner survey was developed and shared with agencies within our community. This survey asked our partners to identify prevention resources within our community and to share if their agency offered prevention programming, if they knew of other programming offered by other agencies, and whether or not they felt as if they were aware of existing programs. Those agencies and individuals who responded with pertinent information were contacted so that their programs or efforts could be further explored and explained.

## Other Relevant Information

It is necessary to consider the impact of the COVID pandemic on the approaches of organizations, ability to connect within the schools, and even funding.

# Existing Resources

## Priority #1: Nicotine

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<p><b>School Suspensions/Expulsions</b> 55 youth in Washington County were either suspended or expelled due to tobacco in 59 incidents (2019 SEOW Report)</p>	<p><b>Youth Substance Use</b> Monthly vape use higher than state rates:</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>8.9%</td> <td>6.5%</td> </tr> <tr> <td>8</td> <td>11.3%</td> <td>10.0%</td> </tr> <tr> <td>9</td> <td>14.0%</td> <td>13.0%</td> </tr> <tr> <td>10</td> <td>18.1%</td> <td>17.3%</td> </tr> <tr> <td>12</td> <td>23.9%</td> <td>23.0%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	Region 9	Indiana	7	8.9%	6.5%	8	11.3%	10.0%	9	14.0%	13.0%	10	18.1%	17.3%	12	23.9%	23.0%	<p><b>Contributing Factors</b> <b>Perception of Availability</b> 89% of community members believe it would be easy for youth to obtain nicotine and/or THC vape devices (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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## Priority #1: Nicotine

Existing resources:

Program Offered – Point of Sale Presentation	
Agency-Hoosier Hills PACT (Tobacco Prevention and Cessation Program)	Target population Upper elementary and middle school students

Program Offered – Footprints for Life	
Agency-Our Place	Target population Elementary (2 <sup>nd</sup> grade)

## Priority #2: THC

Consequences	Behaviors	Determinants																																																																													
<p><b>Legal</b> 95 juvenile cases in the year 2021 Drug Involved - 11 Other causes (battery, theft, etc.) - 84 (Washington County Prosecutors Office 2022)</p>	<p><b>Youth Substance Use</b></p> <p>Monthly marijuana use at or higher than state rates:</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>1.0%</td> <td>1.0%</td> </tr> <tr> <td>7</td> <td>3.1%</td> <td>2.8%</td> </tr> <tr> <td>8</td> <td>5.9%</td> <td>5.5%</td> </tr> <tr> <td>9</td> <td>9.3%</td> <td>8.2%</td> </tr> <tr> <td>10</td> <td>12.7%</td> <td>12.2%</td> </tr> <tr> <td>12</td> <td>18.5%</td> <td>17.3%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Monthly vape use higher than state rates:</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>8.9%</td> <td>6.5%</td> </tr> <tr> <td>8</td> <td>11.3%</td> <td>10.0%</td> </tr> <tr> <td>9</td> <td>14.0%</td> <td>13.0%</td> </tr> <tr> <td>10</td> <td>18.1%</td> <td>17.3%</td> </tr> <tr> <td>12</td> <td>23.9%</td> <td>23.0%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Increasing trend of monthly marijuana use:</p> <p>6<sup>th</sup> grade</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Monthly Use</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>0.5%</td> </tr> <tr> <td>2018</td> <td>0.6%</td> </tr> <tr> <td>2020</td> <td>1.0%</td> </tr> </tbody> </table> <p>(INYS 2016, 2018, 2020)</p> <p>10<sup>th</sup> grade</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Monthly Use</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>9.5%</td> </tr> <tr> <td>2018</td> <td>11.6%</td> </tr> <tr> <td>2020</td> <td>12.7%</td> </tr> </tbody> </table> <p>(INYS 2016, 2018, 2020)</p>	Grade	Region 9	Indiana	6	1.0%	1.0%	7	3.1%	2.8%	8	5.9%	5.5%	9	9.3%	8.2%	10	12.7%	12.2%	12	18.5%	17.3%	Grade	Region 9	Indiana	7	8.9%	6.5%	8	11.3%	10.0%	9	14.0%	13.0%	10	18.1%	17.3%	12	23.9%	23.0%	Year	Monthly Use	2016	0.5%	2018	0.6%	2020	1.0%	Year	Monthly Use	2016	9.5%	2018	11.6%	2020	12.7%	<p><b>Contributing Factors</b></p> <p><b>Laws favorable to use</b> Within Indiana THC based products Delta 8 and 10 are available in retail establishments</p> <p><b>Perception of Availability</b> 89% of community members believe it would be easy for youth to obtain nicotine and/or THC vape devices (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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## Priority #2: THC

Existing resources:

Program Offered – Footprints for Life	
Agency- Our Place	Target population Elementary (2 <sup>nd</sup> grade)

## Priority #3: Alcohol

Consequences	Behaviors	Determinants																																																	
<p><b>Legal</b> 190 minors arrested since 2008, accounting for 11.5% of all alcohol related arrests since 2008 (Indiana Arrest Dashboard)</p>	<p><b>Youth Substance Use</b> Monthly alcohol use higher than state rates:</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>12.0%</td> <td>11.2%</td> </tr> <tr> <td>9</td> <td>15.0%</td> <td>14.4%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p>Binge drinking higher than state rates:</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>7</td> <td>2.8%</td> <td>2.3%</td> </tr> <tr> <td>8</td> <td>3.6%</td> <td>3.5%</td> </tr> <tr> <td>9</td> <td>5.4%</td> <td>5.2%</td> </tr> <tr> <td>10</td> <td>8.1%</td> <td>7.5%</td> </tr> <tr> <td>12</td> <td>12.5%</td> <td>12.7%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	Region 9	Indiana	8	12.0%	11.2%	9	15.0%	14.4%	Grade	Region 9	Indiana	7	2.8%	2.3%	8	3.6%	3.5%	9	5.4%	5.2%	10	8.1%	7.5%	12	12.5%	12.7%	<p><b>Contributing Factors</b> <b>Community Norms favorable to use-</b> 42% of community members perceive that other adults within the community would find it not wrong or only sort of wrong to provide alcohol to youth within our community</p> <p><b>Perception of Availability</b> 86% of community members believe it would be easy for youth to obtain alcohol (2022 Washington County Community Survey)</p> <p><b>Low Perception of Risk of Drug Use</b> The number of youth in grades 6, 8, 10, and 12 in Region 9 are all considered high risk (greater than 50%) on low perceived risk of drug use</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>% at risk</th> </tr> </thead> <tbody> <tr> <td>6<sup>th</sup></td> <td>57%</td> </tr> <tr> <td>8<sup>th</sup></td> <td>71%</td> </tr> <tr> <td>10<sup>th</sup></td> <td>66%</td> </tr> <tr> <td>12<sup>th</sup></td> <td>73%</td> </tr> </tbody> </table> <p>(INYS 2020)</p> <p><b>Perception of Avail. Of Drug Use</b> Students in grades 8, 10, and 12 in Region 9 are at a higher associated risk in relation to perceived availability of drug use as compared to the rest of the state</p> <table border="1"> <thead> <tr> <th>Grade</th> <th>Region 9</th> <th>Indiana</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>20.2%</td> <td>18.4%</td> </tr> <tr> <td>10</td> <td>23.1%</td> <td>21.8%</td> </tr> <tr> <td>12</td> <td>25.1%</td> <td>24.5%</td> </tr> </tbody> </table> <p>(INYS 2020)</p>	Grade	% at risk	6 <sup>th</sup>	57%	8 <sup>th</sup>	71%	10 <sup>th</sup>	66%	12 <sup>th</sup>	73%	Grade	Region 9	Indiana	8	20.2%	18.4%	10	23.1%	21.8%	12	25.1%	24.5%
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### Priority #3: Alcohol

Existing resources:

Program Offered – Footprints for Life	
Agency- Our Place	Target population Elementary (2 <sup>nd</sup> grade)

# Gaps and Barriers

## Washington County Gaps Matrix

DOMAIN:	INDIVIDUAL-PEER	SCHOOL	FAMILY	COMMUNITY
IOM CAT:	UNIVERSAL-DIRECT	UNIVERSAL-DIRECT	UNIVERSAL-DIRECT	UNIVERSAL-INDIRECT
Preschool (<5)				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Elementary (5-12)	Footprints for Life Our Place Bradie Shrum Elementary (2 <sup>nd</sup> grade) Education	Footprints for Life Our Place Bradie Shrum Elementary (2 <sup>nd</sup> grade) Education		Community Event Booth / Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Middle School (11-14)	Point of Sale Tobacco Presentation Hoosier Hills PACT / Wash. Co. TPC Eastern Middle School (6 <sup>th</sup> grade) Education	Point of Sale Tobacco Presentation Hoosier Hills PACT / Wash. Co. TPC Eastern Middle School (6 <sup>th</sup> grade) Education		Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
High School (14-19)				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
College (18-24)				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Non-College (18-24)				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Parents & Caregivers (24-64)			Tobacco Prevention Presentation to PASTA attendees Hoosier Hills PACT / Wash. Co. TPC 4 families Education	Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Adults (24-64)				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination
Adults 65+				Community Event Booth/ Display Hoosier Hills PACT / Wash. Co. TPC Information Dissemination

\*Note\* (Wash. Co. TPC) refers to Washington County Tobacco Prevention and Cessation

## Priority #1: Nicotine

Based upon the current resources in place that serve the 2<sup>nd</sup> grade population at Bradie Shrum Elementary and the 6<sup>th</sup> graders at East Washington Middle School, it is recommended that evidence-based programming be implemented with a focus on additional grade levels and within all school corporations to maximize reach of resources for youth within Washington County. As the resources are only serving a small population and not spanning the age groups, a more comprehensive approach is an opportunity to expand and develop upon. In order to overcome the barrier and close the gap in services, more educational programming needs to be offered to various grade levels within all 3 county school corporations.

## Priority #2: THC

Similarly, to the recommendations for priority #1, nicotine, based upon the current resources in Washington County in place that currently only serve the 2<sup>nd</sup> grade population at Bradie Shrum Elementary it is recommended that evidence-based programming be implemented with a focus on additional grade levels and within all school corporations to maximize reach of resources for youth within Washington County. As the resources are only serving a small population and not spanning the age groups, a more comprehensive approach is an opportunity to expand and develop upon. In order to overcome the barrier and close the gap in services, more educational programming needs to be offered to various grade levels within all 3 county school corporations.

## Priority #3: Alcohol

Similar to the previous recommendations for priorities 1 and 2, based upon the current resources in Washington County in place that currently only serve the 2<sup>nd</sup> grade population at Bradie Shrum Elementary it is recommended that evidence-based programming be implemented with a focus on additional grade levels and within all school corporations to maximize reach of resources for youth within Washington County. As the resources are only serving a small population and not spanning the age groups, a more comprehensive approach is an opportunity to expand and develop upon. In order to overcome the barrier and close the gap in services, more educational programming needs to be offered to various grade levels within all 3 county school corporations.

## Resources and Gaps Findings

To meet the priorities within our community it is essential to understand the existing resources that are benefitting the youth of Washington County and the gaps that exist in those resources so that improvements can be made. Currently, there are two agencies serving as prevention resources for the targeted priorities within Washington County: Our Place and the Hoosier Hills PACT. As we consider the reach of these programs, it is important to understand that both agencies are representative of the stepping stones of success within our county.

Currently, Our Place is leading the way in evidence-based programming within Washington County addressing all three priority areas. Our Place offered Footprints for Life to the three county school corporation second grade classes. Due to the ever-changing demands of COVID and the challenge to reconnect with schools, Our Place was ultimately able to offer Footprints for Life to the second graders of Bradie Shrum within the Salem Community School Corporation, revealing a gap that West Washington Elementary and East Washington Elementary schools did not receive evidence-based prevention education programming in the 2021-2022 school year. As Footprints for Life was the program offered to Washington County schools this school year, an additional gap of resources being offered to middle and high school students existed. While it was shared by the majority of schools that the health teachers do cover the state-aligned drug prevention curriculum, no evidence-based programming was offered to students within the three middle and high schools within the county.

Hoosier Hills PACT is an asset to Washington County in its efforts as it relates to tobacco prevention and cessation, focusing on priority #1- nicotine. Hoosier Hills PACT takes lead on offering the Point of Sale presentation to different schools and grade levels throughout the school year. This past school year, the Point of Sale presentation was shared with the 6<sup>th</sup> graders at East Washington Middle School. Based upon those efforts, the 6<sup>th</sup> graders were able to connect with local findings in terms of tobacco marketing and risks of use. With that in mind, only one grade level within one school corporation was connected with this form of education. Due to that, a gap exists within sharing this educational information with the remaining grade levels and school corporations. Hoosier Hill PACT typically offers this presentation on a rotation every-so-often so that all county schools have access every few years. In addition to these efforts, Hoosier Hills PACT offered a family-based informational education program to the families who participated in the PASTA (Parenting A Second Time Around) program offered by Purdue Extension and the Washington County Family YMCA where vaping, tobacco use, etc. was discussed and resources were shared. Finally, the agency is also one that regularly sets up at various community events to disseminate information regarding tobacco prevention and cessation, reaching a number of families and community members regularly.

Overall, there are gaps that exist within prevention within Washington County especially as it relates to offering programs across greater grade levels and within all school corporations. There is a need for focused programming and implementation at the peer-individual level, school level, family level, and community level for all ages in Washington County but especially at the youth level as primary prevention, or prevention for those youth who have not used substances, is the focus at this time.

# Conclusion & Recommendations

As highlighted throughout this assessment, Washington County, Indiana faces an issue that many counties across the United States are facing. The problems and consequences associated with substance misuse are impacting our local community and its effects can be felt by various individuals, young and old, and different sectors, big and small.

Within Washington County, nicotine, THC, and alcohol were selected as the priorities to focus on as based on the information shared by Washington County community survey respondents and other information as presented throughout the assessment. The community survey was a critical piece to understanding our community as the individuals who see the issues on a daily basis within the county. The survey revealed those substances to be of biggest concern and also shed light into what could be contributing to the overall substance misuse issues. For example, 72% of respondents considered tobacco, containing nicotine, use and 78% of respondents deemed vape/e-cig use to be issues among youth. Likewise, 77% of those responders viewed marijuana, which contains THC, use and 75% believed alcohol use to be community issues among youth. The respondents also shared that they believe it would be easy for youth to obtain those substances, highlighting that the ease of accessibility is a contributing factor to the associated substance use and misuse behaviors. To further understand the perceptions shared within that survey, discussions with various individuals within various sectors such as those working within the circuit court, patrolling law enforcement officers, healthcare providers, parents, existing prevention partners, and other community stakeholders occurred. These conversations further revealed contributing factors such as community norms related to parents feeling as if they are minimizing the risks associated with underage drinking if they are supervising their youth when partaking in alcohol use and principals sharing that they believe there are local tobacco retailers that are selling vape or e-cig devices to their underage students.

While the survey and community conversations were key to understanding the issues through the lens of a community member, relevant data helped paint that picture even better. The important points, such as the breakdown of county arrests related to substances and the rates of negative consequences such as chronic absenteeism, removals of children from their homes, the increased need for free and reduced lunches, and increasing trends in regional marijuana usage within the Indiana Youth Survey as well as increasing monthly use rates of various substances within the adult population. These facts are representative of the issues Washington County residents, of all ages, face which are consequential to the contributing factors and behaviors. For instance, the data displays that youth within the region in which Washington County is represented are at the highest risk for low perception of risk of drug use, which could influence the behavioral use of substances, and then affect them individually throughout the lifespan and also impact society through an assortment of consequences.

The assessment further analyzes what resources currently focus on those priority substances as well as identifies the gaps that limit the potential strength for prevention. Within the county, there are two key agencies implementing primary prevention strategies within the community, Our Place of New Albany, Indiana and Hoosier Hills PACT which represents the Washington County Tobacco Prevention and Cessation (TPC) efforts. Those existing agencies offer education and information dissemination across various age groups but there are gaps within those frameworks where certain domains are not included and students of different ages and school corporations are not being served.

Our Place in the past has served Washington County youth for a number of years with the emphasis of primary prevention efforts. However, most recently, Our Place served the second-grade students of Bradie Shrum Elementary within the Salem Community Schools corporation through an evidence-based program known as Footprints for Life. Our Place offered the educational program to all second graders within all corporations in the county but was only able to secure the agreement with Bradie Shrum, which is representative of the struggle for providers to reconnect with the schools as a result of the COVID-19 pandemic. The Footprints for Life program served the elementary age group in both the individual to peer and school, universal direct strategies, highlighting the gaps of older school-aged youth receiving prevention programming and the domains of family and community not being served as well. Our Place is representative of the existing efforts within the county but yet there are opportunities for strengthening prevention within the community. As Our Place continues to work hard and meet the needs of the communities in which they serve, so is Washington County TPC.

Within the last school year, Washington County TPC served as lead for offering the educational Point of Sale Presentation to the 6<sup>th</sup> graders at East Washington Middle School and was a consistent in its capacity at setting up at various community events throughout the year to disseminate information related to tobacco and cessation efforts to all age groups within the community domain. Washington County TPC also partnered with a local resource to offer an educational presentation to four families. While Washington County TPC offered information and education across all domains, in both universal direct and universal indirect methods, its offerings were limited. Like Our Place, Washington County TPC works diligently to strengthen its efforts in educating and empowering the community through prevention work but has faced obstacles too. Overall, the prevention resources in place within Washington County embody the spirit of serving the needs of our community in steadfast strategies but with gaps, signifying the need for additional efforts.

As these priority issues are substantial and the gaps in resources are significant, reiterating the need and importance for primary prevention, the Prevention Initiative will work to identify direct and indirect strategies through the development of workplan in the next fiscal year. The workplan will focus on implementing primary prevention strategies addressing the priorities while continuing to build community capacity through coalition development, seek progress in reaching health disadvantaged populations, and maximize the efforts in a way that allows for sustainability of prevention efforts to enhance the education, engagement, and empowerment of Washington County for many years to come.

# Appendices

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## Additional Information

Determinants are factors that contribute to or cause a health behavior to occur. Determinants can be contributing factors, risk factors, or protective factors. Many risk and protective factors can be measured via the [Indiana Youth Survey](#).

**Contributing Factors:** Contributing Factors are attitudes, behaviors, and other characteristics associated with a likelihood of the health behavior.

<i>Contributing Factors</i>		
<ul style="list-style-type: none"> <li>Visible enforcement</li> <li>Laws</li> <li>Community norms</li> <li>Promotion</li> </ul>	<ul style="list-style-type: none"> <li>Price</li> <li>Retail Availability (<a href="#">TRIP</a> and <a href="#">SAC</a>)</li> <li>Social availability</li> <li>Use beliefs</li> </ul>	<ul style="list-style-type: none"> <li>Family, school, and peer influence</li> <li>Context</li> <li>Perceived risk of arrest</li> <li>Community concern about harm</li> </ul>

**Risk Factors (Youth):** Risk factors are characteristics of an individual, family, school, or community environment that are associated with increases in the development of problem behaviors (alcohol and other drug use, delinquency, school dropout and violence) among youth and adolescents.

Community (C)	Family (F)	School (S)	Individual/Peer (IP)
<ul style="list-style-type: none"> <li>Availability of drugs</li> <li>Availability of firearms</li> <li>Community laws and norms favorable toward drug use, firearms, and crime</li> <li>Media portrayals of violence</li> <li>Transitions and mobility</li> <li>Low neighborhood attachment and community disorganization</li> <li>Extreme economic deprivation</li> </ul>	<ul style="list-style-type: none"> <li>Family history of the problem behavior</li> <li>Family management problems</li> <li>Family conflict</li> <li>Favorable parental attitudes and involvement in the problem behavior</li> </ul>	<ul style="list-style-type: none"> <li>Academic failure beginning in late elementary school</li> <li>Lack of commitment to school</li> </ul>	<ul style="list-style-type: none"> <li>Early and persistent antisocial behavior</li> <li>Rebelliousness</li> <li>Friends who engage in the problem behavior</li> <li>Favorable attitudes toward the problem behavior</li> <li>Early initiation of the problem behavior</li> <li>Constitutional factors</li> </ul>

**Protective Factors (Youth):** Protective factors are associated with reducing potential for problem behaviors by mitigating the effects of risk factors. Protective factors are related to family, social, psychological and behavioral characteristics that provide a buffer to risk factors for young people.

<i>Protective factors</i>		
<ul style="list-style-type: none"> <li>Individual characteristics</li> <li>Opportunities</li> </ul>	<ul style="list-style-type: none"> <li>Skills</li> <li>Recognition</li> </ul>	<ul style="list-style-type: none"> <li>Bonding</li> <li>Healthy beliefs and clear standards</li> </ul>

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