

MAY 20, 2022

**BOYS & GIRLS CLUBS OF HARRISON-CRAWFORD
COUNTIES**

CRAWFORD COUNTY COMMUNITY ASSESSMENT FOR YOUTH SUBSTANCE USE PREVENTION

**Boys & Girls Clubs of
Harrison-Crawford Counties**

**177 S 2nd St.
Marengo, IN 47140**

**Authored by: Taylor Johnson
Funded by: DMHA**

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EXECUTIVE SUMMARY

For most, it should be no surprise that drugs and alcohol are substances that are negatively impacting the youth and families of our communities. While this recognition is important, up until now, very little work has been done to come to more specific conclusions regarding youth substance use in Crawford County. This assessment works to provide clarity when it comes to youth substance use and strategies for primary prevention. We will explore how the statistics indicate that Crawford youth exhibit a **low degree of commitment to school** and we'll discuss the negative outcomes associated with this attitude. We'll provide evidence that adolescents in the community **view substance use as non-risky behavior** and **falsely believe the majority of their peers engage in substance use**. We will also examine the **low opportunities for prosocial involvement** for youth in the county, and draw a direct linkage to the **engagement in antisocial behavior** as a result. These factors work to increase the risk of substance use among adolescents and decrease the protections that are provided by family, school, community, and other peers. We see the erosion of these protections in the concerning usage levels, among most grades, of **alcohol, marijuana, and electronic vapor products**.

The factors above and the resulting substance use consequences do not exclusively impact youth in Crawford. Whether in the legal, health, social, or economic realms, we provide evidence of the clear linear relationships between youth substance use and the broader societal indicators that have worked to suppress Crawford County's potential for decades. Throughout this assessment, we work to present these statistics as an honest portrayal of the obstacles that Crawford County faces. However, we will also present opportunity and potential for growth in each of these areas. As will be discussed, effective community coalitions take time and dedication to build. This assessment diligently attempts to provide a solid foundation and footing for the work that will follow in addressing youth substance use in Crawford County.

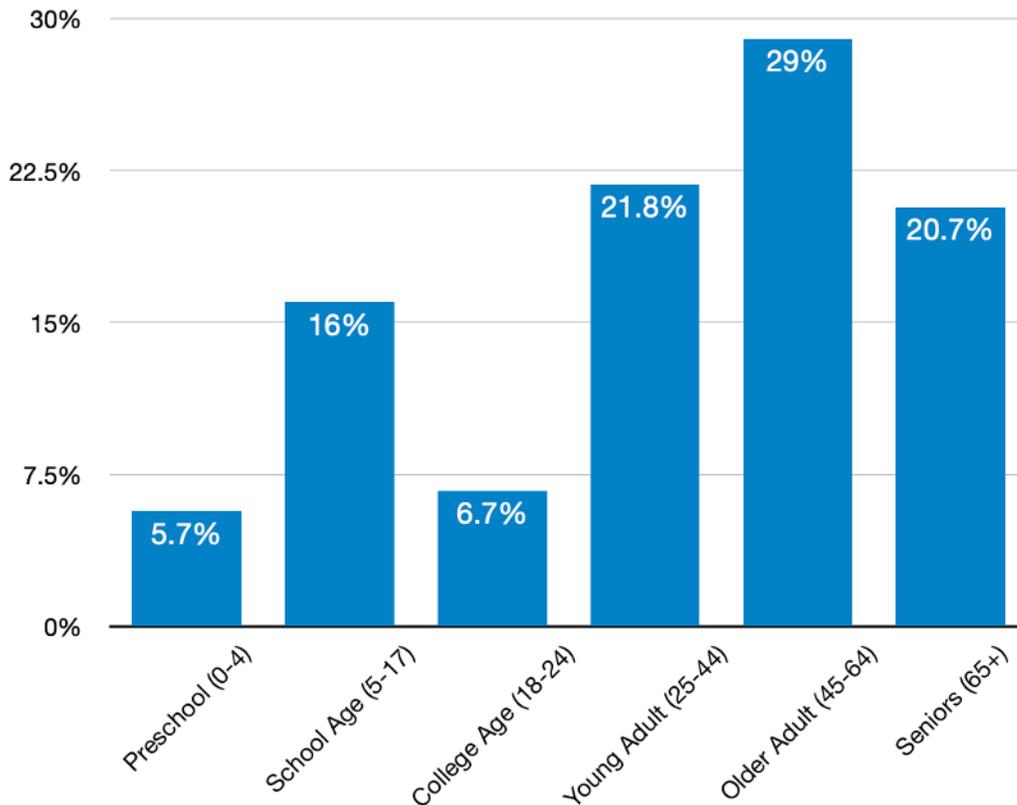
SECTION I:

COMMUNITY ASSESSMENT

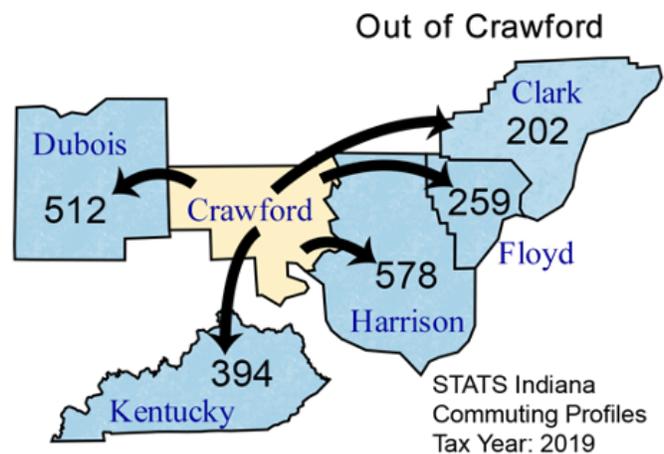
ASSESSMENT INTRODUCTION

Crawford County, Indiana is tucked away in the south-central portion of the state. With over 24,000 acres of National Forestry and nearly 16,000 acres of state land [23], Crawford is brimming with wildlife and adventure. Throughout the year, thousands of tourists from across the region and outside of the state visit Crawford to enjoy the natural beauty by kayaking Blue River, hiking the expansive trails, touring it’s two extensive cave systems, and camping on its lakes and rivers. With a population of only 10,526 [27] spread across 309 mi² [23], the county’s residential landscape is sparse. As one of the least populous counties in the state, Crawford is home to only five towns – English, Alton, Marengo, Milltown, and Leavenworth – classifying Crawford as a rural community.[27] Like many rural counties throughout the nation, Crawford’s population is predominately white with a reported 97% white only population in 2020. [27] While overall population is low, the generational distribution is spread relatively equally across age groups, with the exception of the 0-4 and 18-24 age ranges.[27]

Figure 1. Generational Age Distribution



As beneficial as the topography of the county is to tourism and natural attractions, its geographical makeup also contributes to serious challenges and obstacles as it pertains to infrastructure and overall economic outlook. In 2018, the United Way’s Asset Limited, Income Constrained, Employed (ALICE) report,^[16] in conjunction with the American Community Survey, determined that the median household income is \$43,875. Of the 3,915 households in Crawford, 15% of those households are below the poverty line and an additional 32% of households meet the ALICE threshold – households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county. Among children under the age of 18, the poverty rate balloons to 23.1% meaning that nearly 1 in 4 children in Crawford County live in poverty.^[4] These numbers illustrate a bleak economic picture as nearly half of the county’s households are struggling to or do not earn enough to cover the basic cost of living. The income situation is compounded by the lack of industry and employers present in the county. The largest employers include the Crawford County Community School Corporation, Jasper Engines, county government, and seasonal work at tourism hotspots. Aside from these organizations, there are few employment opportunities throughout the county. This is corroborated by the daily migration of 38% of the workforce who live in Crawford but are employed outside of the county.^[1] In addition, only 62% of its residents report having access to broadband internet connectivity,^[7] limiting the availability of remote work.



As will be explored further in this assessment, many youth in Crawford County face significant disadvantages when it comes to growing up in a supportive atmosphere. Crawford has a child population (age 0-17) of 2,421 and similar to the number of children in poverty, 21.8% of children in Crawford experience food

insecurity.^[4] Throughout the school corporation, every 3 out of 5 students qualify and receive free and reduced lunch, with 50.4% of the student population qualifying for free lunches.^[4] Environmentally, the school corporation struggles with behavior resulting in disciplinary actions. For the 2019-2020 school year, the high school recorded 304 safety and disciplinary incidents while the middle school recorded 241 of the same. These incidents resulted in an in-school suspension rate that far exceeded both the state average and schools with similar demographics. The high school reported an in-school suspension rate of 18.4% and the middle school reported 17.1%, compared to the state average of just 3.9%.^[6] Many studies^[2] indicate that these disciplinary events and behavioral problems can be linked to a poor home life or poor family management. In 2019, the Indiana Department of Child Services reported that the substantiated rate of child abuse and neglect in Crawford County had reached a rate of 77.9 per 1000 children. This number resulted in a 24% increase of child abuse and neglect from 2017, just two years prior.^[4] Additionally, 46.7% of 12th graders in 2020 indicated that their family has serious arguments.^[18]

Historically, it has been commonplace to reduce Crawford County to a simplistic collection of statistics and there is no doubt that these indicators pose serious and difficult challenges to the Crawford County community. When assessing and evaluating a community such as Crawford, it can be far too easy to lose track of what these numbers represent, but in this assessment, we take special care to avoid such a reductive approach. Behind the numbers of child poverty, there are real children who are scared, hungry, and confused. Beneath the myriad of poor economic factors, there are parents and guardians who are struggling to find work, purchase basic needs, and don't know what else they can do to provide for their family. Underlying every stat about substance use, explored later in this assessment, are individuals who often use alcohol and other substances to cope with depression, trauma, and/or abuse. Throughout this assessment, we attempted to approach these statistics with unbiased analysis and as problems that need solutions. We also believe it is equally important to view these statistics as opportunities to support and uplift a struggling community. We cannot just view these needs through a pejorative lens, but they must

be viewed optimistically as well, highlighting the areas where Crawford County can work to be better, stronger, and more supportive. As this assessment works to further uncover the determinants of substance use and what factors play a role in posing risks to youth in Crawford County, it is imperative to see, not just the negative connotations, but simultaneously see a community that cares deeply about its people and is working hard to provide its youth with a positive and supported future.

DETERMINANTS

DETERMINANTS DEFINED

The study of substance prevention has progressed significantly through the years. Numerous studies and supported findings have led researchers and prevention specialists to focus predominately on indicators known as risk and protective factors. The work and research by Dr.'s Hawkins and Catalano present the definition of **risk factors** as this; *“Precursors of drug and alcohol problems have been described as risk factors for drug abuse. Risk factors occur before drug abuse and are associated statistically with an increased probability of drug abuse.”* Put simply, risk factors are external forces that often precede substance use and the presence of risk factors dramatically increases the likelihood that an adolescent may begin using substances or engage in problem behaviors.

Protective factors work similarly, in the opposite fashion of risk factors. The presence of protective factors helps to insulate youth from negative external forces and results in a lower likelihood of engaging in problem behaviors. It's important to note that protective factors are not always directly opposite of risk factors. Instead, protective factors work to shield youth from the negative outcomes of inevitably being exposed to risk factors as they age and mature.

Research has shown that risk factors have a positive correlation with each other (the presence of one, increases the likelihood of others) and have a negative correlation with protective factors (the presence of risk factors, decreases the likelihood of protective factors).^[24] We also know that these factors are cumulative. The presence of multiple risk factors dramatically *heightens* the challenges, both behavioral and developmental, that youth will face in their life.^[24] Oppositely, the presence of multiple protective factors dramatically *reduces* the risk that youth will encounter. Knowing all this, much of the work of this section and the entire assessment, is to identify the risk and protective factors that are at play among

Crawford County youth. Both factors operate in several domains of an individual's life. These domains are broadly recognized as:

- Peer/Individual
- School
- Family
- Community

Our goal, as individuals working in prevention, is to identify which risk factors pose the greatest risks to Crawford youth, and which protective factors can be bolstered to even better insulate our youth.

Having established a definition of risk and protective factors, identifying the domains in which they operate, and outlining the broad goal of prevention work, we are now able to specifically identify which determinants and factors have the greatest effects on youth in Crawford County.

LOW COMMITMENT TO SCHOOL

When J. David Hawkins, Richard F. Catalano, and Janet Y. Miller published an article exploring the effects of 17 known risk factors on adolescent drug use, their examination of low commitment to school resulted in this summary;

"G.D. Gottfredson (1988) found that truancy for both boys and girls was associated with drug involvement after accounting for effects of ethnicity, parental education, and delinquency. Factors such as how much students like school (Kelly & Balch, 1971), time spent on homework, and perception of the relevance of course work are also related to levels of drug use (Friedman, 1983), **indicating a negative relationship between commitment to education and frequent drug use among junior and senior high schools students.**"^{[12,}

Emphasis Added]

These findings are particularly troubling when coupled with the degree of school commitment among youth in Crawford County.

As a corporation, Crawford County schools trail slightly behind the state average in **students graduating within 4 years**. The state average is reported for the 2019-2020 school year as 87% while the corporation reported 83.2% for the same year. This deviation from the state average is not particularly alarming by itself, but the disparity grows when compared to regional graduation rates. Table 1 shows the 2019-2020 graduation rates for the surrounding school corporations.

Table 1.

Crawford County Community Schools	Paoli Community School Corporation	Perry Central Community Schools	South Harrison Community Schools	North Harrison Community Schools
83.2%	89.6%	94%	95%	99%

Where the variance, compared to state averages, does become concerning is the pattern of **chronic absenteeism** across the corporation. Crawford County schools dramatically outpace the state averages of 11.4% by nearly double, reporting a 19.4% rate of chronic absenteeism. This number indicates that 1 out of 5 students in Crawford County are missing at least 10% of the school year.^[6]

Attendance is not the only indicator that represents a low degree of commitment to school in Crawford. When asked about the **meaningfulness and importance of schoolwork**, 37.3% of 10th graders and 31.3% of 12th graders reported that it was either seldom or never meaningful or important. When asked **how many of their friends liked school in the past year**, 27% of 10th graders and 34.5% of 12th graders said none. Further exacerbating the problem, 37.3% of 10th graders indicated that while they tried to do their best work in school “a lot,” 42.4% also responded “no” when asked **if teachers praised them when they worked hard** in school. Using the Social Development Strategy, Communities that Care (CTC) works to identify the

national median of students at low risk or high risk of a particular risk factor. Based on this model, 52.5% of 10th graders and 56.3% of 12th graders scored above the national median and are considered to be at high risk when it comes to commitment to school.^[18]

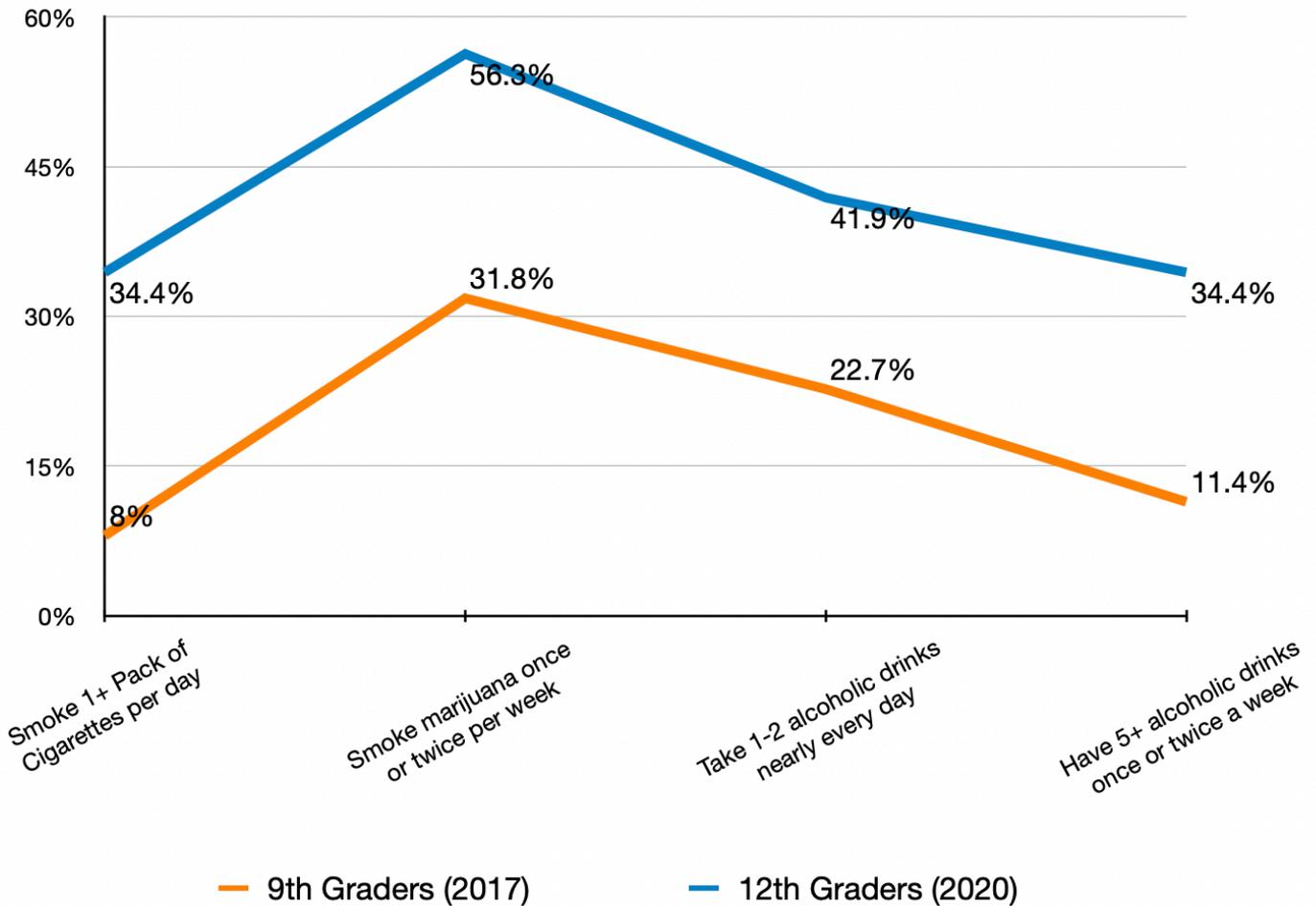
PERCEIVED RISK OF HARM

For most individuals, the riskier an action is or is perceived to be, the less likely they are to engage in that action. The same principle is true when applied to substances like alcohol, tobacco, marijuana, etc. The higher the perceived or understood risk of engaging in substance use, the less likely adolescents and young adults are to use those substances.^{[11][21]} This perception of risk can be influenced by several factors within the school, community, and family domains. The relationship between these two variables, results in an inverse correlation. As perceived risk *increases*, the likelihood of substance use *decreases* and as perceived risk *decreases*, the likelihood of substance use *increases*. Given this relationship between the two, it's important to explore the attitudes and perceived risk associated with substance use among Crawford County juveniles.

When evaluated as a grade level or cohort, Figure 2 clearly illustrates that the **perception of harm surrounding substance use has dramatically declined** among the same grade group. Across nearly all questions posed to Crawford County students as 9th graders in 2017 and again as 12th graders in 2020, there was an average 23 percentage point increase in responses indicating "No Risk."^{[17][18]} Of 12th graders in 2020, 56.3% said there was **little to no risk of consuming 5 or more alcoholic drinks** once or twice a week. Among the same students, 53.2% indicated there was **little to no risk of smoking one or more packs of cigarettes per day**.

The reduction of perceived risk across one cohort is not the only concerning metric when it comes to this indicator. Equally concerning is the reduction of perceived risk among youth in the same grades, three years apart. Figure 3 presents

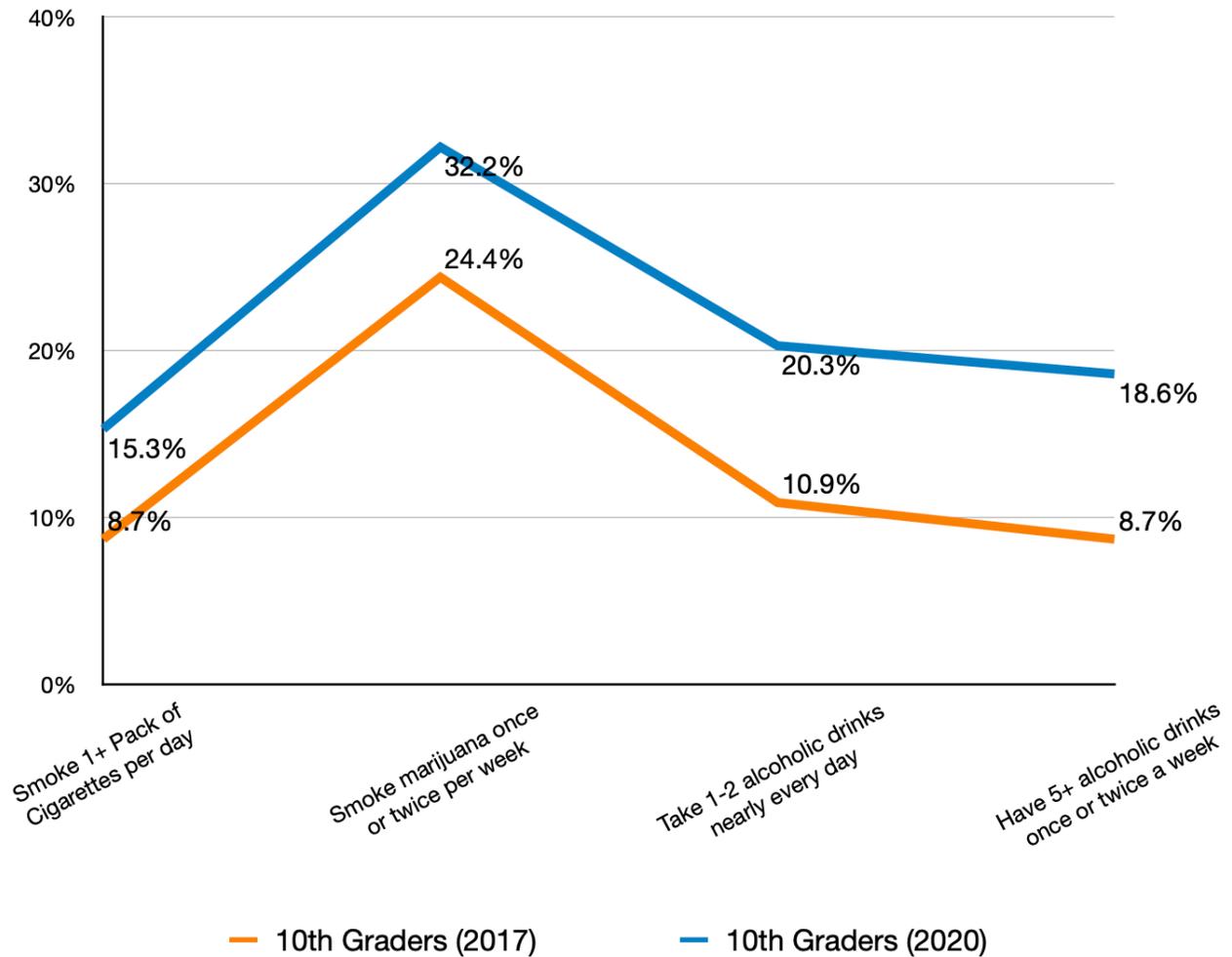
Figure 2. Perception of “No Risk” of Drug Use: Same Cohort, 2017 and 2020



the same questions and responses of “No Risk” for 10th graders in 2017 and 10th graders in 2020. This data suggests that kids are not just decreasingly viewing substance use as risky behavior as they mature, but that the floor of that low

perception of risk is getting higher with each passing graduating class. Each subsequent class has a seemingly decreased risk association with substance use.

Figure 3. Perception of “No Risk” of Drug Use: 10th Graders Over Time



LOW PROSOCIAL INVOLVEMENT/REWARDS FOR ANTISOCIAL INVOLVEMENT

Unlike the previous two determinants, this section will not only cover an elevated risk factor for Crawford youth (**antisocial involvement**) but also a weak protective factor (**prosocial involvement**). Most risk and protective factors are not mirror opposites of each other, but in this instance, the determinant of social involvement is two sides of the same coin. Perhaps one of the strongest predictors of adolescent substance use is the association among peers that use. Growing up, youth are easily impressionable and spend much of their social lives trying to figure out where they fit in as they also figure out who they are. They receive an untold number of messages about what's acceptable, what's cool, what everyone else is doing, and why they don't "belong" if they aren't doing certain activities.

On the positive side of social involvement are prosocial activities. Youth are much less likely to engage in problematic behavior and substance use when they are associated with, not only prosocial peers, but prosocial activities such as extracurricular clubs, religious organizations, school organizations, and community events. The availability of these opportunities, and the involvement in them by youth, can have profound effects across all domains of influence. Equally so, the lack of existence of these opportunities can have crippling effects throughout the social health of the community, as the data indicates in Crawford County.

As a community overall, and as previously discussed, Crawford faces significant challenges in community development. Studies suggest social support networks or civic organizations are powerful predictors of health behaviors^[20] and the magnitude of risk associated with social isolation is similar to that of cigarette smoking.^[14] A common theme echoed throughout rural communities is that youth often complain that 'there is nothing to do.' This complaint, though not without merit, is usually

anecdotal. In Crawford’s case however, the data is both anecdotal and empirical. When assessing the number of membership associations per 10,000 population, Crawford ranks last in the state of Indiana with 2.8 per 10,000 people.^[8] Given that the population of Crawford County is roughly 10,000 people, this means that there are only 3 membership associations within the community. This lack of social engagement is consequential, not just for the overall health of the community, but for the social development of youth as they mature. The relative absence of positive social involvement in the community is illustrated by both 10th and 12th graders when asked if neighbors noticed when they do a good job and let them know. Of 10th graders, 78.9% responded to that question with either “no” or an emphatic “NO!” and 58.6% of 12th graders responded the same. When presented with, “There are people in my neighborhood who are proud of me” 73.1% of 10th graders reported that there are not and 48.2% of 12th graders responded the same. When the same question was posed, this time focusing on encouragement, the responses were similar; 76.9% of 10th graders and 48.2% of 12th graders said people in their neighborhood *do not* encourage them to do their best.^[18]

Table 2. Percentage of kids that answered “no” or “NO!”

	10th Grade	12th Grade
Neighbors notice when I do a good job and let me know	78.9%	58.6%
There are people in my neighborhood who are proud of me	73.1%	48.2%
There are people in my neighborhood who encourage me to do my best	76.9%	48.2%

With low rewards for prosocial involvement at the community level and having previously identified low rewards for prosocial involvement in the school, the last two domains, and arguably most influential, are the family and peer/individual domains. Within the family domain, the opportunity and rewards for prosocial involvement seem to be strong. According to the CTC scores on these indicators, more than 60% of 10th and 12th graders are considered to have high protection for rewards of prosocial involvement in the family sphere. Parental attitudes on drug use also leans heavily towards unfavorable. Among 10th and 12th grade students, 70% or higher of respondents indicated that their parents thought it would be “Very Wrong” for them to engage in behaviors such as smoking tobacco, drinking alcohol, and smoking marijuana.^[18] This data clearly indicates that there seems to be a high degree of prosocial rewards at home and most students also believe their parents are strongly opposed to their children using substances. Both of these indicators within the family sphere of influence are positive and should be noted as an opportunity to build upon. While the low degree of risk and high degree of protection among families is encouraging, prevention science also tells us that the influence of peers on drug use is stronger than that of parental influence.^[22] In fact, nationally, among students who used devices such as e-cigarettes, 57.8% of students said their reason for first use was because “a friend used them.”^[3] So, for an accurate depiction of prosocial and antisocial involvement, we must lastly look at the peer/individual factors.

Approaching the data with a focus on antisocial behaviors, there are a few key indicators that should be specifically addressed. Among Crawford County youth, interaction with prosocial peers is low, as demonstrated by INYS questions focusing on involvement among prosocial peers. When asked **how many friends had made a commitment to stay drug-free**, 21.2% of 10th graders and 37.9% of 12th graders said that *none* of their friends had made this commitment. Asked **how wrong their friends would feel it would be for them to smoke marijuana**, 25% of 12th grade students said not at all wrong. When the substance changed to **alcohol (1-2 drinks nearly every day)**, 18% of both grades indicated that their friends would think it was not at all wrong. Perhaps the greatest factor of influence lies in the perception of peer use

Figure 4. Perceived vs. Actual Substance Use (12th Grade)

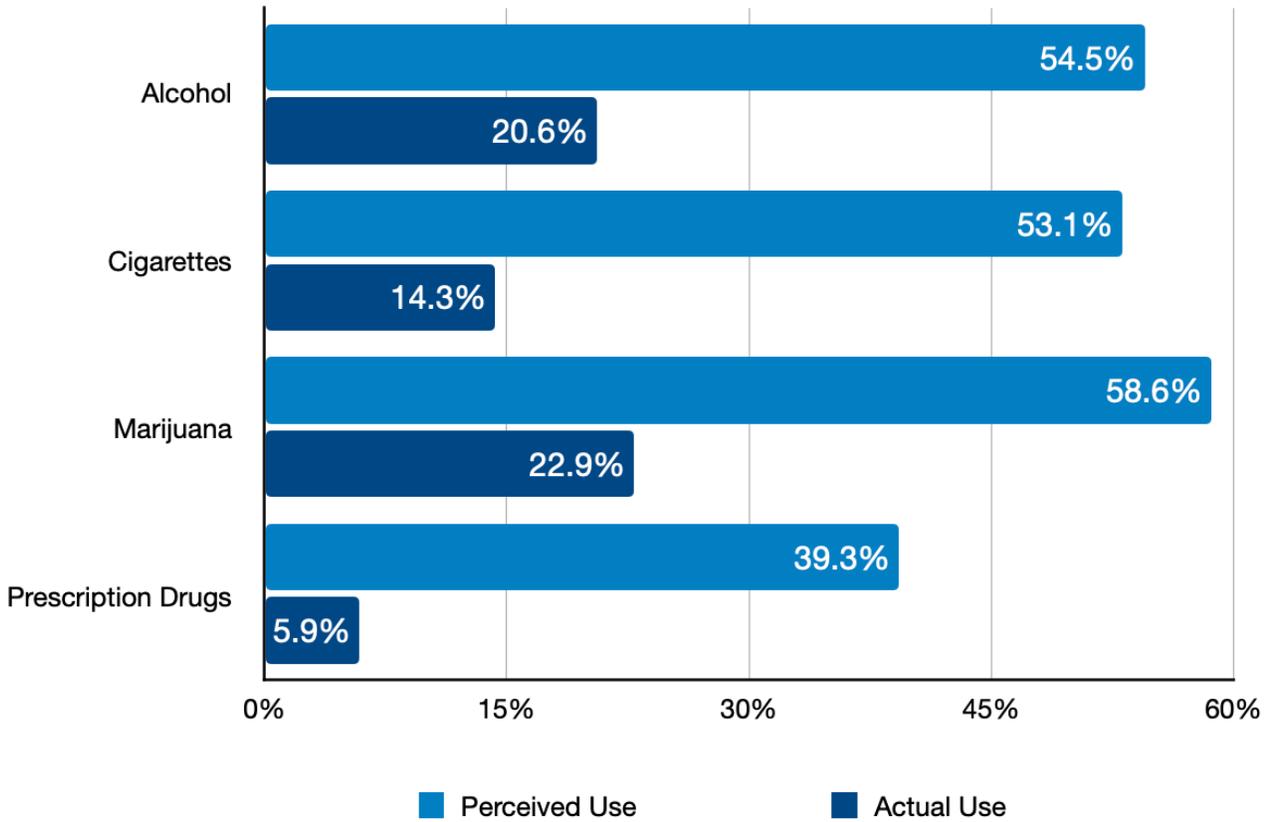
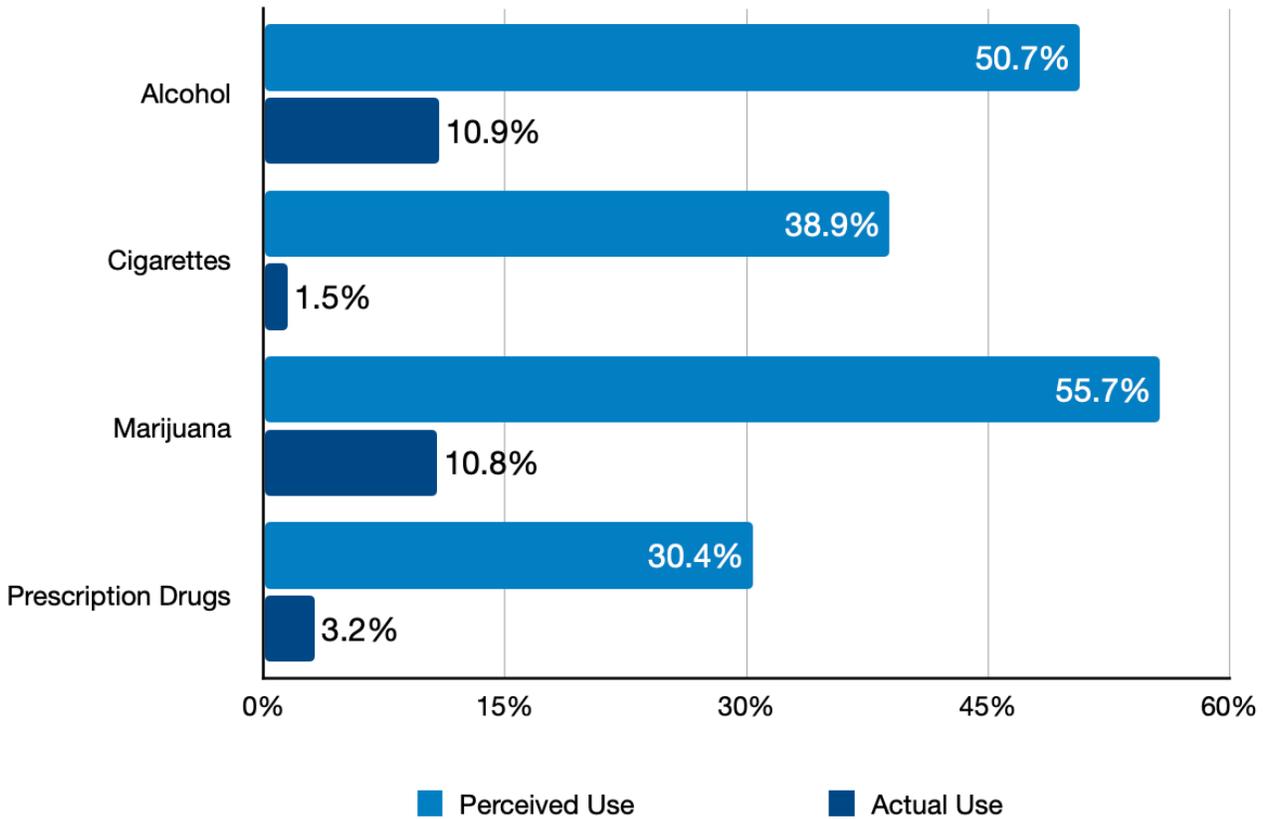


Figure 5. Perceived vs. Actual Substance Use (10th Grade)



versus actual reported 30-day use. Figures 4 and 5 show the wide disparity between perception and actual use. Notably, the perceived past 30-day use of marijuana and alcohol, for both grades, is above 50%. But the actual reported use is closer to 10% and 20% for 10th and 12th grades, respectively.^[18]

It's clear to see that children in Crawford face high reward/low consequences for antisocial behavior and have little opportunity and low reward for engaging in prosocial behavior. Individually, the factors influencing the four central domains are cause for concern. When combined and working in tandem, they pose serious threats to the overall development and influence of youth. Using the CTC metrics once again, 56.3% of 12th graders are at high risk, scoring higher than the national median, when it comes to rewards for antisocial involvement. Higher still, 65.5% of 12th graders have low protection in the form of interaction with prosocial peers. ^[18]

PROBLEM BEHAVIORS

It's important to isolate and focus on what factors pose the greatest threats and offer the greatest protections to Crawford youth. However, we must also look intentionally at what outcomes these factors result in. Communities that Care (CTC), while working to identify risk and protective factors, also is specifically aimed at addressing five problem behaviors among youth:

- Substance Use
- Delinquency
- Teen Pregnancy
- School Dropout
- Violence

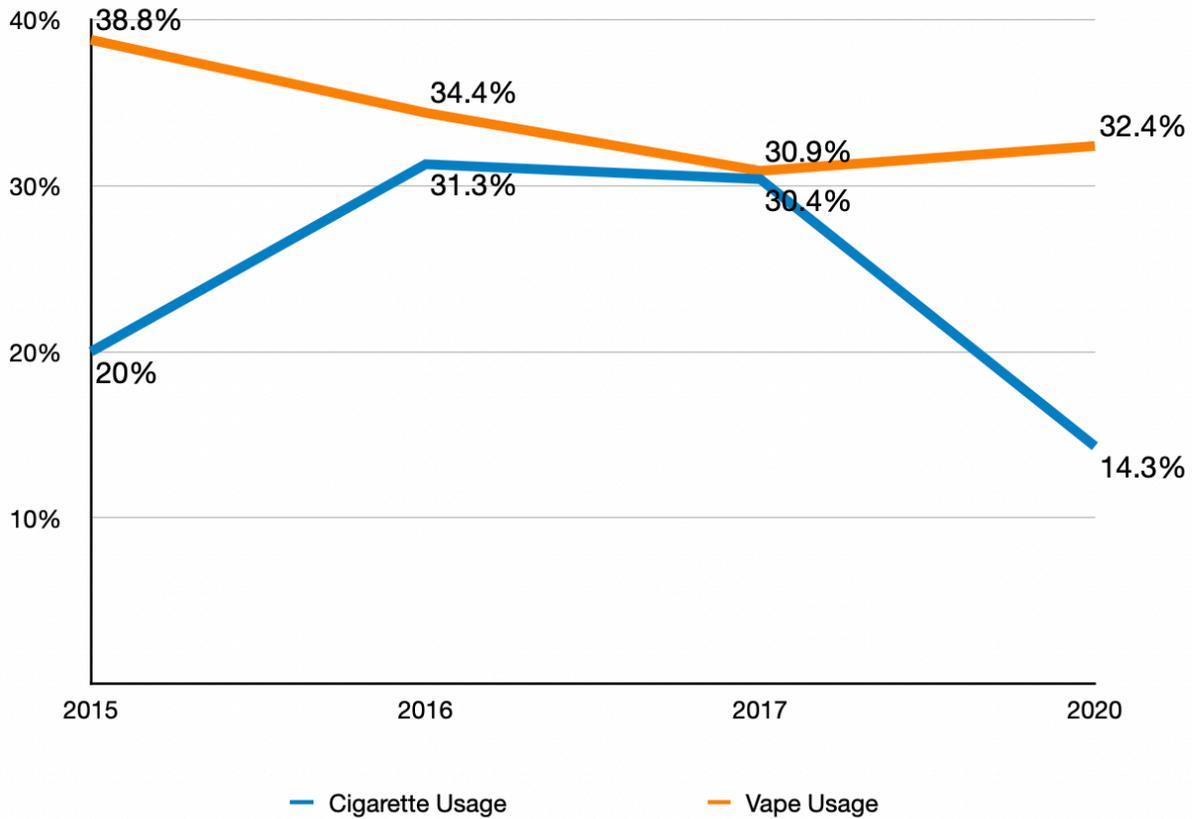
While risk factors can contribute to any of the problem behaviors above, the scope of this assessment is specifically concentrated on substance use and primary prevention. For this purpose, our problem behaviors will bring focus primarily on substance use that is a result of the contributing determinants outlined in the previous section.

LESS TOBACCO, MORE VAPES

Appearing to be a national trend among youth substance use, traditional tobacco product usage (cigarettes, cigars, smokeless tobacco) has seen significant decline in large part, due to the increased popularity of electronic vapor products, colloquially referred to as vapes. The same trend can be identified regionally and locally in Crawford County. In 2017, past month useⁱ of cigarettes among 10th graders sat just below a quarter of the class at 24.5%. In 2020, that number plummeted to 1.5% of 10th graders. For 12th graders, the fall is not as dramatic, but still significant. Smokeless tobacco usage fell from 21.1% in 2017 to 5.7% in 2020. Among 12th graders in 2017,

ⁱPast month or past 30-day use is defined as the self-reported use of the substance in question, in the past 30 days of when the survey was administered.

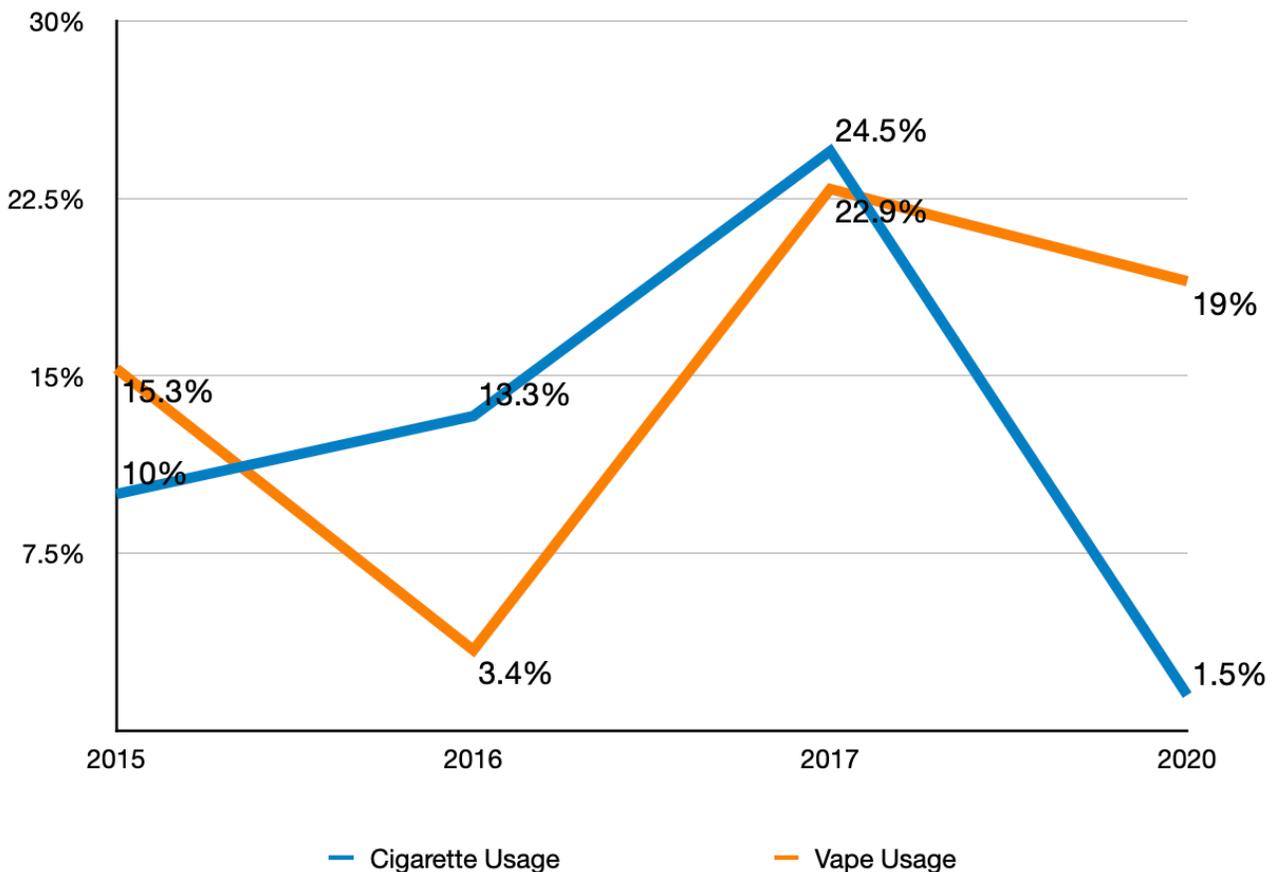
Figure 6. Past Month Substance Use (12th Grade)



30.4% reported using cigarettes in the last 30 days and in 2020, that number hit a historical low of 14.3%. Admittedly, this is still a high percentage of cigarette usage, but given the age of first use of tobacco among Crawford youth, this number makes sense. Members of the 9th grade class in 2017 would be 12th graders in 2020, and in 2017, the average age of first use for cigarettes among 9th graders was 12.4 years old. Paired with the past 30-day usage of 9th graders in 2017 at 25%, it's not inconceivable that while electronic vapor products have become increasingly popular, among 12th graders, the addiction to traditional tobacco products had already been established. [18]

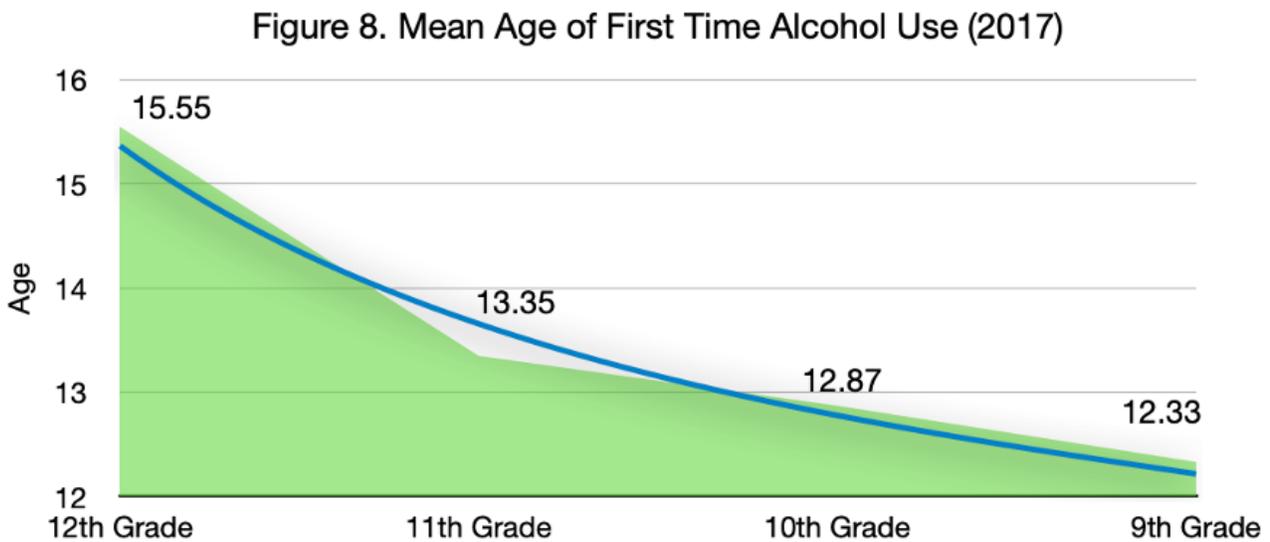
As we see an overall decline of traditional tobacco products, we simultaneously see steady usage of electronic vapor products from the time INYS started including those products in the questions in 2015. For 10th graders in 2020, 19% of the class reported use of vapes in the past 30 days. When asking 12th graders, that percentage increases to 32.4%. Put simply, 1 in 5 10th graders and 1 in 3 12th graders report vape usage in the past 30 days. While we don't have INYS data for the Middle School for 2020, we do know from interviews that from the start of school in 2021 through April 16th of 2022, there were at least 30 vape infractions within the middle school population of 336. This translates to roughly 9% of 6th-8th graders being **caught** using vapor products on school campus. When compared to nationwide data, Crawford County youth vape usage vastly outpaces the national average. Among students who reported past 30-day use of any tobacco product, 11.3% of high schoolers nationwide indicated they had used vape products.^[3] For the Crawford high school population, past 30-day vape usage balloons to 23.5%, doubling the national average of vape usage among their high school peers. ^[18]

Figure 7. Past Month Substance Use (10th Grade)



ALCOHOL

Underage drinking continues to be a problem and a targeted health priority for communities throughout the state. Drinking among adolescents is not only dangerous in and of itself, but several studies suggest that the early onset of alcohol use is tied with an escalation of substance use as well as other risky behavior.^[25] Figure 8 shows a steady decline in the age of first use of alcohol among Crawford students in 2017. Between 12th graders and 9th graders in the same year, there was a 3.22-year difference in the age of first use of alcohol. This suggests that the pressures to drink and the actual act of drinking are beginning at an earlier and earlier age, which is significant cause for concern. In 2020, the age of first use of alcohol appeared to settle for both grades at 13.6. Throughout the state, these numbers trend accordingly with other 10th graders, but the average age of first use for 12th graders was 15.1, which further highlights the disparities of early onset usage within Crawford County.
[17]



The age of first use is an important indicator, but current (past 30-day) use is as well. While studies suggest that early onset usage is a predictor for continued use,

this is not a guaranteed outcome. To justify the cause for concern of age of first use, we need to pair it with the continued use of the substance. In 2020, 20.6% of 12th graders reported current use of alcohol and 14.7% reported binge drinkingⁱⁱ within the past 30 days. ^[18] The binge drinking number is not only alarming, but it also means that 71% of all reported drinking activities were in the form of binge drinking. For 10th graders, the overall percentage of alcohol usage among students drops to 11%, but binge drinking accounted for 57.7% of past 30-day alcohol use.

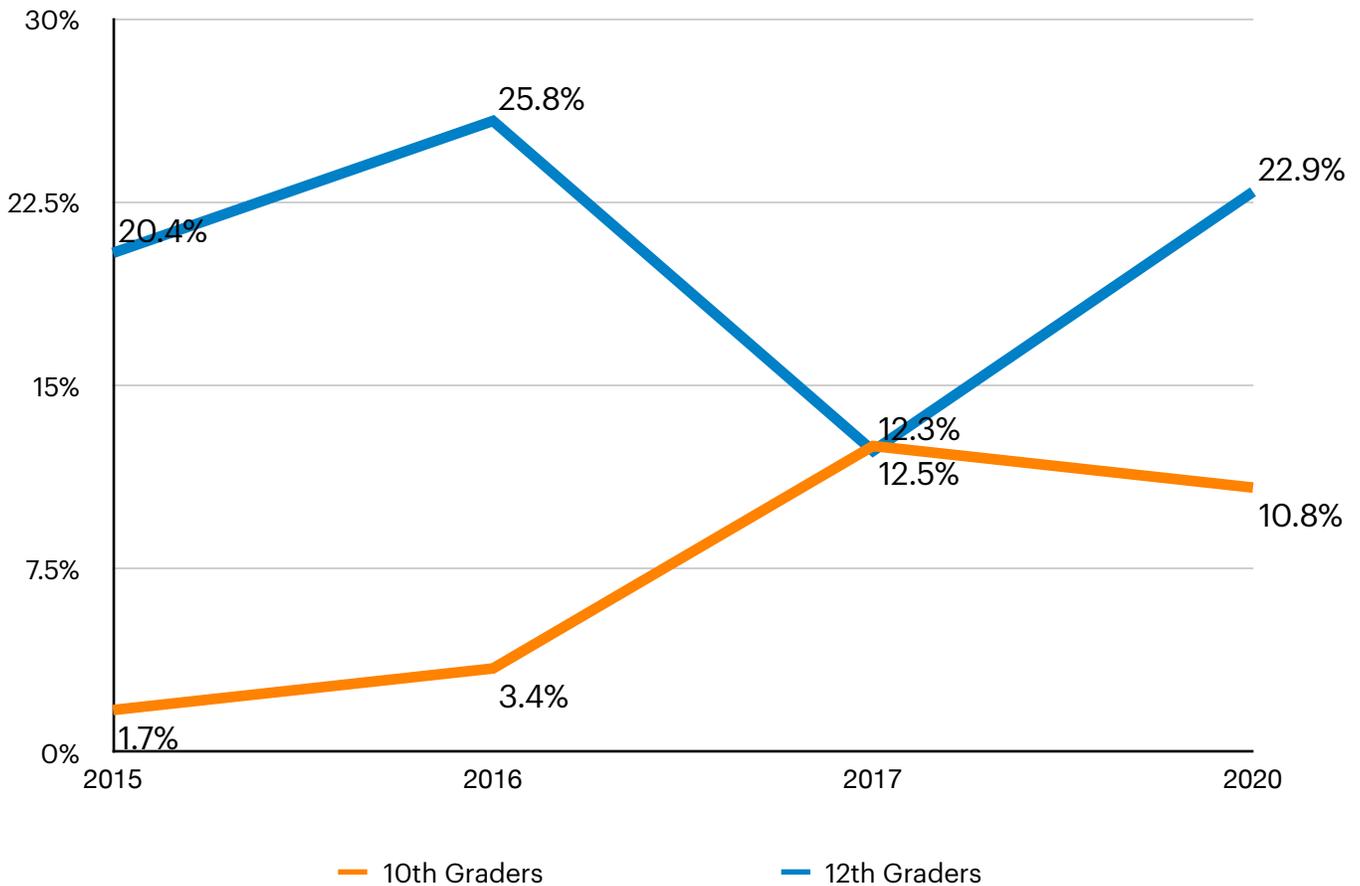
MARIJUANA

With the advent of electronic vapor products, marijuana has become easier to obtain and consume through THC cartridges installed in vape products. Vape products allow for the incredibly convenient use of marijuana as they can be smokeless, odorless, and easy to conceal. While vapes are still predominately nicotine based in Crawford, the presence of THC cartridges cannot be dismissed. Currently, there is no local data that specifies the vehicle of marijuana consumption among the student population in Crawford. There is qualitative data that indicates the use of THC cartridges among high schoolers in the community, but more concrete data is needed before deciding on the degree of prioritization. While we do not have a solid statistical analysis on the mode of usage, the potential of marijuana usage through vapes should give all community members pause. Vaping devices containing THC more frequently utilize marijuana concentrates to deliver the marijuana to the user.^[9] Marijuana concentrates are highly potent liquids containing up to 80% of THC. The strength of marijuana concentrates can be four times greater than the strength of traditional marijuana products. Again, the data presented below contains no distinction between vape products or traditional means of marijuana consumption, but community members should view this data while giving thought to the continued prevalence of THC vapes.

ⁱⁱ Binge drinking is defined as consuming five or more drinks in a row

Since 2015, there has been a marked increase in marijuana usage among 10th grade students in Crawford. Figure 9 shows the percentage of students reporting past 30-day marijuana usage since 2015. When evaluating usage for 12th grade students, usage has hovered around 20% since 2015 with the exception of 2017 data. Despite the usage in 2017, the past month usage in 2020 returned to historical levels at 22.9%. There are notable differences between the frequency of male use and female use. Between the genders, 11.8% of 12th grade males indicated they had used marijuana 20-39 times over the past month whereas no females reported that frequency of use. Among females, 11.1% reported 30-day use between 6-19 times. Comparatively, male and female youth in Crawford are using marijuana at similar percentages, 23% and 22% respectively. The difference clearly lies in how often they choose to engage in marijuana use.

Figure 9. Past Month Use of Marijuana, 2015-2020



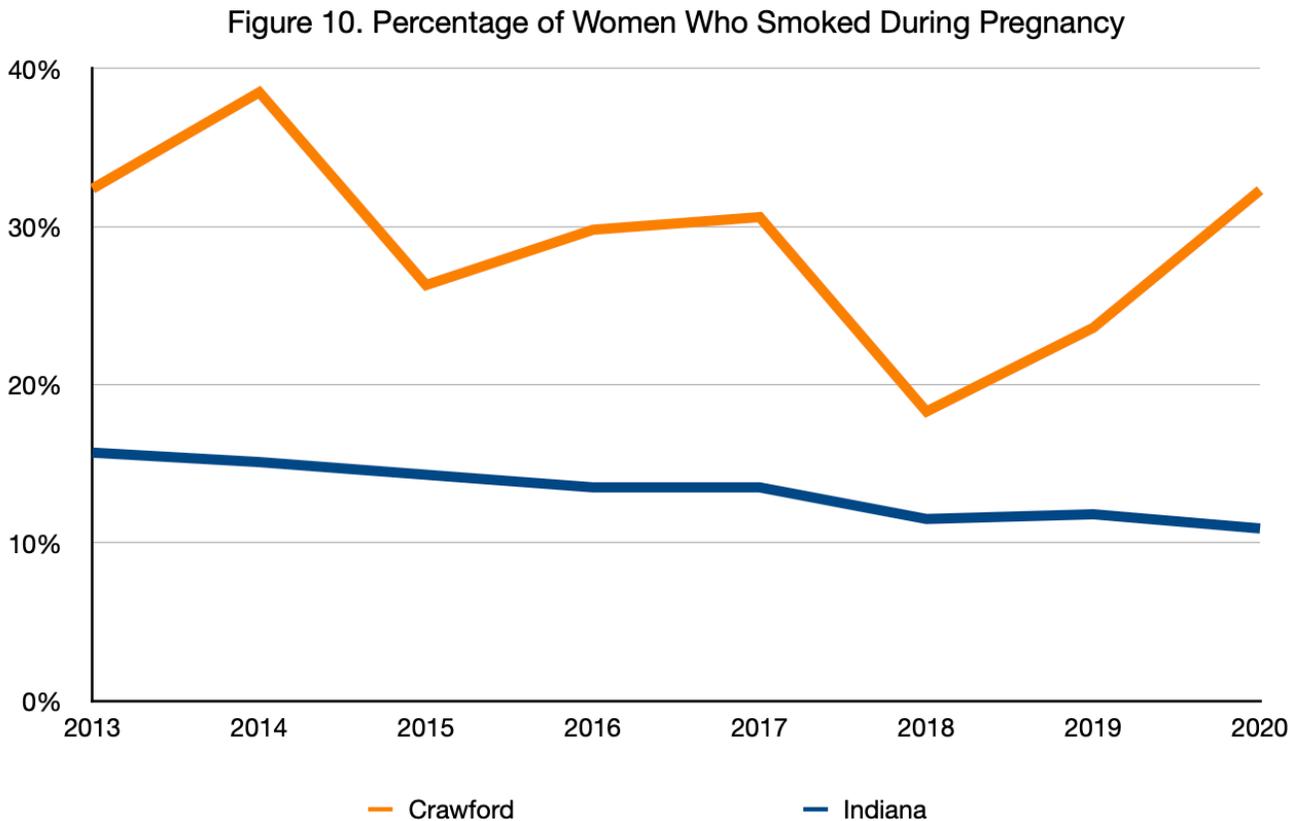
SOCIETAL CONSEQUENCES

Up until this point, we have focused on the youth-specific impacts and behaviors in the Crawford community. While a best effort is used to ensure that the most recent data is used, youth substance use is not new. In fact, tobacco, alcohol, and marijuana have been significant substances for well over a decade. It should not come as any surprise that substance use, especially underage use, does not occur in a silo. There are extending consequences that affect the user's family, friend group, community, and future selves. There are wide ranging ripple effects that impact all facets of the population of the community, throughout the lifespan. With this in mind, we will pull back on our isolated focus on youth and examine the broader community effects, or societal consequences, that could be linked back to youth substance use.

Adjusted for age, 25% of residents in Crawford reported their overall health as poor or fair in 2019.^[8] This aligns with a survey completed by the IU School of Public Health in 2020, where 22% of respondents ranked both their physical and overall health as fair. When asked to assess the community's overall health, 67% of respondents said either fair or poor.^[19] This high percentage could be a result of over-reporting, but more likely, it indicates that individuals assessing their own degree of health do not view it as serious a problem as it is. County Health Rankings & Roadmaps provides quality data and rankings, for both health factors and health outcomes, for counties across the nation. Health outcomes focus on the length and quality of life whereas health factors focus more on the behaviors that influence health in the community. For the 2020 rankings in the state of Indiana, Crawford ranks 92 out of 92 in health outcomes and 87 out of 92 in health factors.

We've explored the past prevalence of tobacco usage among youth and the impact on the society reflects this high degree of past usage. In 2019, 28% of the Crawford population identified as smokers, placing Crawford among the counties with the highest percentage of a smoking population in Indiana. ^[13] Among mothers,

the smoking rate remains unchanged. Of the 93 live births reported in 2020 in Crawford, 30 babies were born to mothers who smoked during pregnancy. This shocking number results in a 32.3% of mothers who smoked while pregnant.^[10] Figure 10 shows the comparison to Indiana rates year over year.



While the percentage of pregnant smokers has continued to decline in recent years, the number has rapidly *increased* among Crawford County women. In 2019, of the 123 live births in Crawford, 29 of those births were affected by smoking through either low birth weight, SIDS, or reduced lung function. It's estimated that while the cost of smoking related births in Crawford was \$39,382, the total economic burden of secondhand smoke for just Crawford County was a staggering \$3.4 million.^[15]

Shifting our focus away from smoking births and looking at teen births and overall sexual activity, we find additional data related to our discussion focusing on

early onset substance use. As previously discussed, the earlier the age of onset of substance use, the higher the likelihood of further substance use and risky behavior^[25](i.e. unprotected sexual activity, multiple sexual partners). Teen births and pregnancy are particularly risky as they place the mother at a social disadvantage, putting additional mental and physical stress on the mother at a young age.^[26] Teen births are calculated as a rate of the number of births to females ages 15-19 per 1,000 females in the county. This rate is also calculated over a 7-year period, in this instance from 2014-2020. Crawford ranks in the top quartile of state with 32 teen births among 1,000 females for the 2014-2020 time period.^[8] While this number may not seem large at first glance, we must remember the total population of Crawford is relatively low at approximately 10,000 people. The female population of Crawford is even lower, at 5,157.

Low commitment to school not only translates to the high school graduation rate we see today of 83%, but it extends into the likelihood of college attendance and graduation among Crawford's population. Barriers to higher education are not limited to the level of intellectual curiosity, but also the means to which a family or individual can afford a degree. Some 43% of Crawford residents report attending some college, whether that be an associates degree or dropping out before obtaining a bachelor's degree. Only 10.5% of the population, aged 25 and above, has a bachelor's degree or higher.^{[8][7]} Among this age group, that percentage translates to roughly 760 individuals who hold a bachelor's degree or higher in entire county. It is likely that a significant portion of those individuals are employed by the school corporation. This leaves a small pool of highly educated workers to attract as potential employers evaluate the region and the possible work force, further decreasing any opportunities for economic growth in the county.

FINDINGS

Each section above contains a vast amount of statistics and information regarding not just youth in Crawford County, but the population of the community as a whole. It can be easy to get lost in the magnitude of the data presented. In an effort to condense and simplify the data above, a logic model has been utilized to show the key points among determinants, behaviors and consequences. This logic model should not be viewed as strictly linear. That is to say that one consequence is not a direct result of one behavior which is a direct result of a specific determinant. Instead, this model should be viewed aggregately or as compounding variables. The whole section of determinants contributes to the whole section of behaviors which leads to the whole section of consequences.

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<p>Substance Use -28% of adults in Crawford County are smokers compared to a state average of 20%</p> <p>-17% of adults in Crawford County report excessive drinking</p> <p>Social -43.5% of 14 year olds in 2017 reported having ridden in a car driven by someone who was high or had been using alcohol or drugs</p> <p>-Of the 25 child removal by DCS, 16% were reacted to parental alcohol abuse in SFY 2020^[5]</p>	<p>Substance Use -19% of 10th graders and 32.4% of 12th graders reported using electronic vapor products in the past 30 days</p> <p>-11% of 10th graders and 23% of 12th graders report past 30-day use of marijuana</p> <p>-Among 12th graders, 71% of all reported drinking activities were in the form of binge drinking</p> <p>School Performance -High School graduation is 83.2% compared to a surrounding regional average of 94.4%</p>	<p>Contributing Factors -37.3% of 10th graders and 31.3% of 12th graders said they have felt sad or hopeless for 2+ weeks in a row</p> <p>-43% of 10th graders believe it is “sort of easy” or “very easy” to obtain marijuana</p> <p>Risk Factors <u>Low Commitment to School</u></p> <ul style="list-style-type: none"> - 1 in 5 students miss at least 10% of the school year - 1/3 of 10th graders and 12th graders never or rarely find schoolwork meaningful or important

CONSEQUENCES (contd.)	BEHAVIORS (contd.)	DETERMINANTS (contd.)
<p>-41 suspensions/expulsions related to substance use in 2019 with 36 individual students.^[5]</p> <p>Health</p> <p>-67% of Crawford residents rank the community’s overall health as fair or poor</p> <p>-Estimated economic burden of \$3.4 million as a result of secondhand smoke</p> <p>-32.3% of live births were to mothers who smoked while pregnant</p> <p>-Main food sources in the county are Jay C and Dollar General</p> <p>Economic</p> <p>-Half of the households in Crawford struggle to earn enough to cover the basic cost of living</p> <p>-60% of children are eligible for free and reduced lunch</p> <p>-Nearly 1 and 4 children in Crawford County live in poverty</p> <p>-Only 10.5% of residents older than 25 has a bachelor's degree</p>	<p>Early Onset of Use</p> <p>-Average age of first alcohol use among 10th and 12th graders was 13.6 years old</p> <p>-Average age of first cigarette use among 10th graders was 11.75 years old</p> <p>Mental Health</p> <p>-12% of 10th graders reported making a plan attempting suicide</p>	<ul style="list-style-type: none"> - Crawford Schools have an 18.4% (HS) and 17.1% (MS) in-school suspension rate <p><u>Perceived Risk of Harm</u></p> <ul style="list-style-type: none"> - 56.3% of 12th graders view smoking marijuana once or twice a week as having “no risk” - 34.4% of 12th graders view having 5+ alcoholic drinks once or twice a week as having “no risk” <p><u>Rewards for Antisocial Involvement</u></p> <ul style="list-style-type: none"> - 37.9% of 12th graders said none of their friends had made a commitment to stay drug free - The perception of marijuana use among 10th graders is 55.7% while the actual use is 10.8% <p>Protective Factors</p> <p><u>Rewards for Prosocial Involvement</u></p> <ul style="list-style-type: none"> - Over 60% of both 10th and 12th graders are considered to have high prosocial protection within the family sphere - 70% of respondents in either grade said their parents would view activities such as drinking alcohol or smoking as “Very wrong”

PRIORITIES

When assessing and evaluating the data to determine priorities in primary prevention in Crawford County, there are several things to keep in mind. First, we must evaluate the resources available to address the determined priorities. This will be explored further in later sections, but it nevertheless contributes to how priorities are determined now. We must also be honest about the changeability and measurability of a specific metric. As convenient as it would be to target every problem that plagues the Crawford community, it simply is not realistic to make substantive change among the more systemic issues. Lastly, the readiness of the community is paramount to the success of the identified priorities. A handful of community members can work tirelessly to change the outcomes of specific behaviors, but if they face substantial headwinds from the broader community, their efforts will likely be in vain. All these factors are considered when determining what priorities to address. With this in mind, these are the top priorities that meet the threshold of resource availability, changeability, and community readiness.

PRIORITY #1

The first identified priority is to **raise awareness surrounding the harm of substance use and to lower the perception of use among students**. The data presented above and simplified in the logic model below clearly indicate the youth in Crawford County are at high risk when it comes to their knowledge of substance use and are at greater risk in their misled belief that the majority of their peers are using substances.

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<p>Legal 16% of all child removals by DCS in Crawford County in 2020 were related to alcohol abuse.</p>	<p>Substance Use Binge drinking accounts for 57.7% of alcohol use among 10th graders and 71% of alcohol use among 12th graders</p>	<p>Contributing Factors A majority of 12th graders don't believe that smoking one or more packs of cigarettes a day is risky (53.3%) or that consuming 5+ alcoholic drinks once or twice a week posed any risk (56.3%)</p>

PRIORITY #2

The second identified priority should be to **raise the academic success and interest in school among students in Crawford County**. Not every child is naturally equipped for academic success and school is not the “silver bullet” solution to all societal consequences. However, the data does suggest that with an improved commitment to school, there can be improvement in behavioral development, social opportunities, absenteeism, and college attendance.

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<ul style="list-style-type: none"> - 41 suspensions/ expulsions in 2019 were substance related - Only 10.5% of the adult population in Crawford County has a bachelor’s degree or higher 	<p>Crawford High School has an in-school suspension rate of 18.4% compared to the state average of 3.9%</p>	<p>Contributing Factors</p> <ul style="list-style-type: none"> - Crawford trails behind regional graduation rates and suffers from 19.4% rate of chronic absenteeism - 37.3% of 10th graders say that schoolwork is either seldom or never meaningful or important

PRIORITY #3

The third priority is to **increase rewards and opportunities for prosocial involvement while also decreasing the rewards and opportunities for antisocial involvement**. The peer-to-peer influence is clear in both the prosocial and antisocial realm. Measures should be prioritized to dramatically broaden the prosocial opportunities for youth in Crawford County.

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<p>65.5% of 12th graders are at high risk by having low protection of interaction with prosocial peers</p>	<p>21.2% of 10th graders and 38% of 12th graders said none of their friends had made the commitment to be drug free</p>	<p>Contributing Factors</p> <ul style="list-style-type: none"> - 52.8% of 10th graders said a youth engaging in underaged drinking would <i>not</i> be caught by the police in their neighborhood - 18% of both grades said their friends would not think it was “at all wrong” to drink 1-2 drinks every day

HEALTH DISPARITIES

There currently exists little infrastructure to collect data on health disparities and disproportionalities within the Crawford community. The gaps in Crawford's health system do not seem unique to specific sub-populations or are particularly prevalent among one group of the population. This is due, in part, to the relative homogeneity of the racial make-up of the county as well as the equal distribution of male vs. female population. Being such a small, rural community, data collection focusing on racial disparities or the LGBTQ+ community are not currently in place.

This is not to say that there are not wide-ranging gaps in the health needs of Crawford County, but these gaps affect the community as a whole. **Economically disadvantaged individuals face great disparities in accessing healthcare.** There is no hospital in the county and only two health care clinics: one in Marengo and the other in English. While these clinics provide basic medical support, they do not offer any after-hours care or extensive lab or diagnostic tests. The nearest hospital is the IU Health Hospital located in Paoli, 25 minutes from English. The other neighboring hospital, Harrison County Hospital, is a 32-minute drive from English. Speaking with the EMS director of the county, he indicated that most EMS runs are made to Baptist Health Floyd, based on the quality of care and services they are able to provide. From English, this drive takes approximately 45 minutes. Even if there was a hospital in the county, **12% of the under 65 population do not carry health insurance** and would likely be unable to afford visits, tests, or life-saving procedures.

In 2019, it was estimated that 12% of the Crawford population had either Type 1 or Type 2 diabetes. With **low access to quality, fresh food for much of the community**, the problems arising from unregulated diabetes are likely exacerbated due to poor quality diets. 38% of adults in the county are considered obese, having a body mass index (BMI) greater than or equal to 30kg/m². Crawford ranks second in the state for levels of inactivity. Even for those without diabetes and of a healthy

weight, access to fresh food is a problem. The nearest Walmart Supercenter is in Paoli and is 24 minutes away. Corydon, IN also has a Walmart Supercenter and is 32 minutes away. Adding to these difficulties, many residents in Crawford do not have reliable transportation as there are no rideshare programs present in the county. Those without reliable transportation are forced to depend on friends, families, or close neighbors to provide transportation to and from destinations.

While there are shortcomings in the data collection regarding health disparities in the county, **there is work being done to advance health improvement and data collection.** Section 501(r)(3)(a) of the Internal Revenue Code requires non-profit hospitals complete a Community Health Needs Assessment every 3 years in order to maintain their tax-exempt status. Since there is no hospital located in the county, the IU School of Public Health, the IU Center for Rural Engagement and community partners in Crawford County have developed a partnership to assess the community health needs. The last report was completed in 2020 and the next report should be expected in 2023 or 2024.

SECTION II:

RESOURCES AND GAPS

INTRODUCTION

At this point it should be no surprise that many of the issues surrounding youth in Crawford County are not because of a lack of recognition or a lack of community willingness to address these problems. The inability to address the outlined priorities is the deficit of resources available to the community, both monetarily and socially. Working with a narrow pool of volunteers and employees, limited financial support, and significant difficulties in scaling operations to reach the entire county, there are few organizations that specifically provide resources that focus on prevention. To date, much of the work surrounding substance use has been focused on the treatment side and only recently has there been a shift in addressing prevention of substance use.

For these reasons, this section will be not only “gap heavy” but “resource light.” It takes time to build a sustainable coalition that addresses the specific needs of the community. Given the gaps within the community, there is little risk of duplicating efforts, but this also means that knowing where to begin can be challenging. This assessment has already outlined the limited social organizations that would normally play an integral role in building prevention capacity. That’s not to suggest that there are not any social organizations within the county, but instead that their framework and ability to implement prevention strategies needs support before prevention work can begin.

EXISTING RESOURCES

PRIORITY #1: PERCEIVED RISK OF HARM

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<p>Legal 16% of all child removals by DCS in Crawford County in 2020 were related to alcohol abuse.</p>	<p>Substance Use Binge drinking accounts for 57.7% of alcohol use among 10th graders and 71% of alcohol use among 12th graders</p>	<p>Contributing Factors A majority of 12th graders don't believe that smoking one or more packs of cigarettes a day is risky (53.3%) or that consuming 5+ alcoholic drinks once or twice a week posed any risk (56.3%)</p>

Program Offered: SMART Moves	
Agency: Boys & Girls Clubs of Harrison-Crawford Counties	Target population: 5-15 year olds

PRIORITY #2: LOW COMMITMENT TO SCHOOL

CONSEQUENCES	BEHAVIORS	DETERMINANTS
<ul style="list-style-type: none"> - 41 suspensions/expulsions in 2019 were substance related - Only 10.5% of the adult population in Crawford County has a bachelor's degree or higher 	<p>Crawford High School has an in-school suspension rate of 18.4% compared to the state average of 3.9%</p>	<p>Contributing Factors</p> <ul style="list-style-type: none"> - Crawford trails behind regional graduation rates and suffers from 19.4% rate of chronic absenteeism - 37.3% of 10th graders say that schoolwork is either seldom or never meaningful or important

Program Offered: NA	
Agency: NA	Target population: NA

PRIORITY #3: LOW PROSOCIAL INVOLVEMENT/HIGH ANTISOCIAL INVOLVEMENT

CONSEQUENCES	BEHAVIORS	DETERMINANTS
65.5% of 12th graders are at high risk by having low protection of interaction with prosocial peers	21.2% of 10th graders and 38% of 12th graders said none of their friends had made the commitment to be drug free	<p>Contributing Factors</p> <ul style="list-style-type: none"> - 52.8% of 10th graders said a youth engaging in underage drinking would <i>not</i> be caught by the police in their neighborhood - 18% of both grades said their friends would not think it was “at all wrong” to drink 1-2 drinks every day

Program Offered: 4-H	
Agency: Purdue Extension	Target population: School age children
Program Offered: Little League	
Agency: Crawford County Little League	Target population: Children age 12 and under
Program Offered: Afterschool Programming	
Agency: Boys & Girls Clubs of Harrison-Crawford Counties	Target population: School age children

GAPS AND BARRIERS MATRIX

Domain:	Individual - Peer			School		Family			Community	
IOM Cat:	Universal-Indirect	Universal-Direct	Selective Indicated	Universal-Direct	Selective Indicated	Universal-Indirect	Universal-Direct	Selective Indicated	Universal-Indirect	Universal-Direct
Preschool (-5)	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach
	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization
	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage
	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type				
Elementary (5-12)	Approach	SMART Moves	Approach	Approach	Approach	Approach	Approach	Approach	4-H	Approach
	Organization	BGC	Organization	Organization	Organization	Organization	Organization	Organization	Purdue Extension	Organization
	Coverage	6-12	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	5-12	Coverage
	CSAP Core Strategy Type	Education	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	Education/Environmental	CSAP Core Strategy Type
Middle School (11-14)	Approach	SMART Moves	Approach	Approach	Tutoring Program	Approach	Approach	Approach	4-H	Approach
	Organization	BGC	Organization	Organization	BGC	Organization	Organization	Organization	Purdue Extension	Organization
	Coverage	11-14	Coverage	Coverage	11-14	Coverage	Coverage	Coverage	11-14	Coverage
	CSAP Core Strategy Type	Education	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	Education/Environmental	CSAP Core Strategy Type
High School (14-19)	Approach	SMART Moves	Approach	Approach	Tutoring Program	Approach	Approach	Approach	4-H	Approach
	Organization	BGC	Organization	Organization	BGC	Organization	Organization	Organization	Purdue Extension	Organization
	Coverage	14-15	Coverage	Coverage	11-14	Coverage	Coverage	Coverage	14-19	Coverage
	CSAP Core Strategy Type	Education	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	Education/Environmental	CSAP Core Strategy Type
Parents and Caregivers (24-64)	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach	Approach
	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization	Organization
	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage	Coverage
	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type	CSAP Core Strategy Type				

CONCLUSIONS AND RECOMMENDATIONS

By now, the data should clearly present the top factors and substances that are adversely affecting youth in Crawford County. We've explored and confirmed that Crawford youth exhibit a low degree of commitment to school, and we've discussed the negative outcomes associated with such attitudes. The low perception of risk among students and the high perception of substance use among peers has been evident throughout the data. Children view substance use as non-risky behavior and falsely believe that the majority of their peers engage in such behaviors. From the beginning, we've discussed the challenges that Crawford County faces as a community and society in providing positive social reinforcement for students and young adults. As a result, children more regularly engage in antisocial activities because of the high rewards and high opportunities and seldom engage in prosocial activities because of the low rewards and low opportunities. These main risk factors result in concerning usage levels, among most grade levels, of alcohol, marijuana, and electronic vapor products.

The societal consequences surrounding youth substance use continues to tell a concerning story of substance use in the county. Whether you examine the legal, health, or social ramifications, the consequences of youth substance use are pervasive throughout the community. This assessment has outlined the health disparities at play within the county and the extreme lack of resources and infrastructure in place to support prevention programs. We have referenced many troubling statistics and indicators that regularly place Crawford County in the bottom percentile of health and economic performance in the state.

With all the data, risk factors, behaviors, and consequences in mind, the question we must now turn to begins the real work — what now? Referenced in the first pages of this assessment, it is often far too easy to view such a wide collection of seemingly negative statistics as an insurmountable obstacle. Where there are shortcomings however, there are also opportunities for growth. What could easily be

viewed as a discouraging situation should be viewed instead as the right moment to begin building. Building organizations focused on prevention strategies, building programs that encourage positive social involvement, building a drug free community, and ultimately building a better Crawford County for future generations. Perhaps more encouraging than the opportunities presented here is the actual work that is occurring to build up the Crawford community.

- There is promising collaborative work being done to re-energize the Local Coordinating Council, a county-based committee tasked with addressing substance issues in each community.
- The school corporation successfully signed up and implemented the 2022 edition of the Indiana Youth Survey, which provides local data about where our efforts should be specifically targeted.
- The Boys & Girls Clubs, not only participated in the undertaking of this assessment, but is in the advanced stages of consolidating all of their programs and activities in the the former Marengo Elementary building. This consolidation provides opportunity for expanded programs in an accessible and welcoming building for all youth throughout Crawford County.

These possibilities are what's at stake when it comes to prevention priorities. As a community, it is our privilege to enthusiastically and collaboratively tackle the issues facing our county. Don't be mistaken, these priorities are large and significant in contributing to the overall health of the community. It's the importance of these priorities that make it imperative for the community to begin this work with a determined focus. With the help and support of prevention colleagues throughout the state, financial and logistical support from government agencies, and the resolve that has driven the population of Crawford County for generations, this community has an opportunity to build, not just a better future, but a framework for other struggling rural counties to look towards. In answering the question, "what now?" the answer is simple — now we start building.

SECTION III:

APPENDIX

ACKNOWLEDGEMENTS

This assessment is the result of a grant awarded to the Boys & Girls Clubs of Harrison-Crawford Counties and is funded by the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA). It was generously funded at the state level by the Division of Mental Health and Addiction (DMHA) and technical assistance and expertise was provided by the staff at Prevention Insights, part of the IU School of Public Health.

DATA COLLECTION PROCESS

In any assessment or report, the quality and validity of data is paramount. Without accurate and representative data, the final assessment is at risk of being incomplete or worse, presenting an inaccurate portrayal of a community. From the beginning of this assessment process, in December 2021, we discussed the importance of collecting valid quantitative and qualitative data. Knowing this, much work and care was taken to ensure that all the data presented in this assessment was not only accurate but was supported by local data as well. Much of the statistical data was found through a number of studies, other assessments, and statistics collected and distributed by the state.

In order to ensure that this data was painting an appropriate and true picture, we also took time to engage in numerous conversations with school officials, elected officials, key community leaders, and stake-holders. Interviews were conducted with the Sheriff, school principals, non-profit leaders, and community organizers. These interviews helped to shed light and frame the statistics not just as data points, but as local evidence. Attempts were also made to conduct a community survey, but due to obstacles in implementing the survey, results were not able to be collected in time to include in this assessment.

Discussed at length in this assessment is the data from the Indiana Youth Survey (INYS). This survey was successfully completed for the 2022 cycle in both the Middle School and High School and will provide local, specific data about our youth when the data is released in the Fall of 2022. State and regional data from 2020 is currently

available to the public by visiting <https://inys.indiana.edu>. As the new INYS data is released and continued work is done to gather more data and ensure validity of existing data, this assessment may be amended to reflect any changes in data, prior to the end of 2022.

SPECIAL THANKS

This assessment relies heavily on the help and partnership of a strong and dedicated Crawford County community. No one organization can accomplish sustainable and effective change in substance prevention and similarly, no one organization can know all there is to know when preparing a community assessment. Without the help and support of these partner organizations, this assessment would not be possible.

- Crawford County Community Schools
- Crawford County Sheriff's Department
- Purdue Extension Crawford County
- Crawford County Community Foundation
- Crawford County Probation Office
- Crawford County Prosecutor's Office
- Crawford County EMS

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