



Youth Assessment Report of Marinette & Menominee Counties

FEBRUARY 2024

Prepared by Communities that Care (CTC) of Marinette & Menominee Counties Data Workgroup

INTRODUCTION

This Youth Assessment Report provides highlights from the Pride PLUS Survey, a survey completed by 6th, 8th, 10th, and 12th grade public school students in Marinette and Menominee Counties during the 2022-2023 school year. This is an approved survey to collect required core measures by the Centers for Disease Control and Prevention (CDC) and the White House Office for National Drug Control Policy (ONDCP) for their Drug-Free Communities (DFC) Grant, which currently funds the CTC coalition.

The goal of this survey and analysis is to provide information to our communities about youth use and perceptions of use of alcohol, tobacco, and other drugs. This report highlights the data which warrants the communities' greatest attention and focus now.

Additionally, the Data Workgroup of Communities that Care of Marinette & Menominee Counties was able to consider:

- comparative national data,
- prior local survey data responses,
- trends within and across grade levels, and
- results of focus groups with youth in several of our communities. *

*For full results of these focus groups, please visit <https://ctcmarinette-menominee.org/>

This Youth Assessment Report provides a baseline for further prioritization, conversation, and action by other Communities that Care Workgroups, key leaders in Marinette and Menominee Counties, other community organizations, parents, and community members.

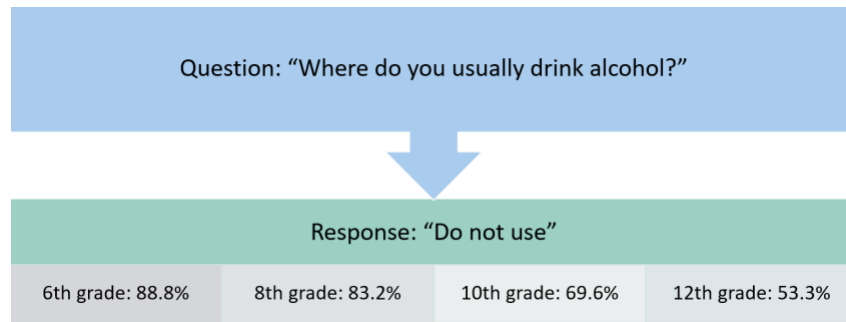
The survey results look at both risk and protective factors.

- **Protective factors** are conditions that buffer children and youth from exposure to risk by either reducing the impact of the risks or changing the way that young people respond to risks.
- **Risk factors** are conditions that increase the likelihood of a young person becoming involved in drug use, delinquency, school dropout and/or violence.

SURVEY RESULTS

Who's not drinking alcohol?

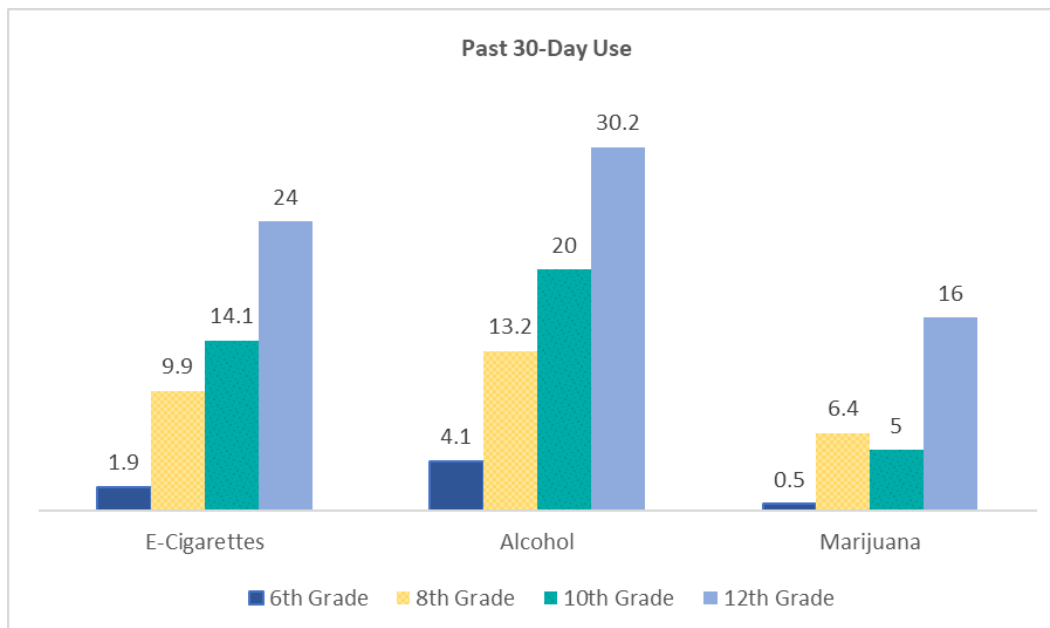
When students were asked in the survey, "Where do you usually drink alcohol?" a significant percentage of students said they "do not use" alcohol.



Let's celebrate youth who are making great choices. The more we normalize not drinking and share the statistics of those youth who are not drinking, the more youth perceptions will change from "everyone's drinking" to "it's normal if I choose not to drink." As a community, we can work together to build these numbers.

How many youth are using illegal substances?

The information provided in the graph below reflects the top three illegal substances used by youth, and how many students reported using these substances over the past 30 days. Per federal grant guidelines, DFC-funded coalitions must select at least two substances that their coalition will focus on targeting in their community according to local data results.

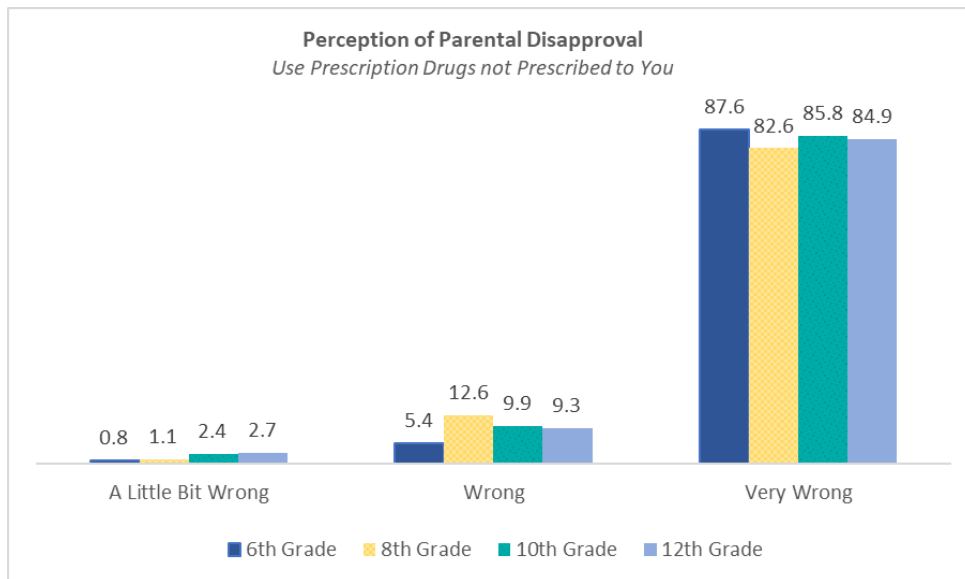


The survey also shows that youth do not have an accurate sense of how many of their peers are using illegal substances. For example, focusing on the marijuana data, over the past 30 days, 16% of 12th

graders reported using marijuana. The 12th grade peer perception (data from another question) is that 30.9% use marijuana “a lot” or “sometimes.” That means 12th graders think that almost 31% of their peers are using marijuana. The self-reported data shows that it was half that, at 16%. While neither number is positive, it highlights a large disconnect between peers’ perception of how many people are using a certain substance and actual usage. The message that is often heard is “everyone is using _____”; helping teens see that this is not true might lower usage overall.

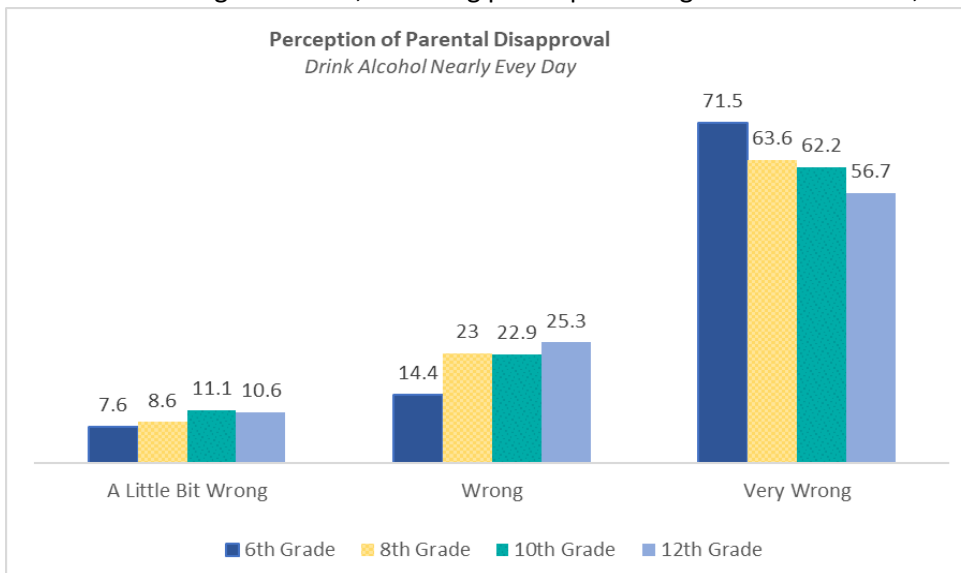
Do youth think their parents would disapprove of their use of illegal substances?

Youth are listening! It is clear from the graph below that our youth are hearing the message from parents that using prescription drugs not prescribed to them is wrong.

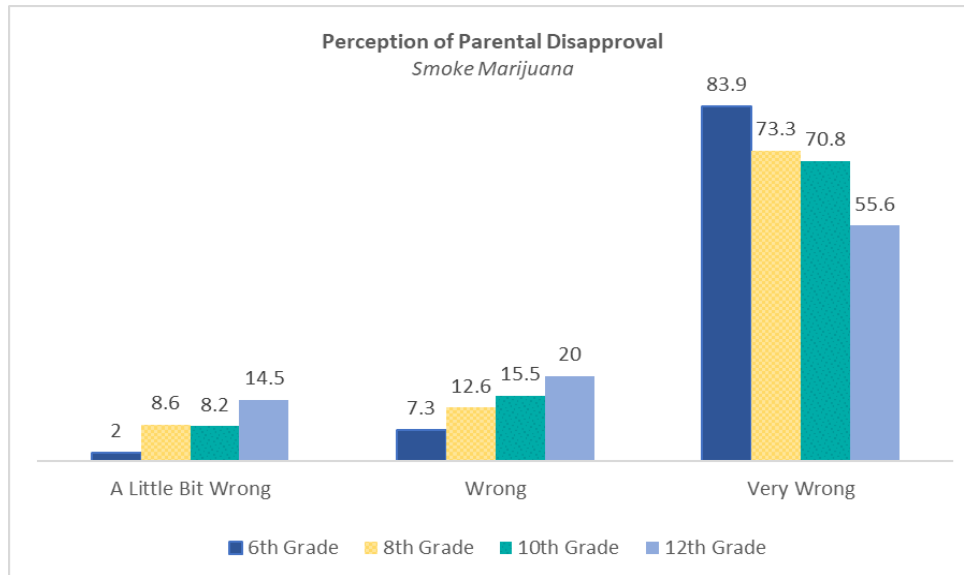


Friends’ disapproval rates of using prescription drugs not prescribed to them were similar. Also, youth reported it is very difficult to get opioids and prescription drugs.

However, the data associated with perceptions of parental disapproval of drinking alcohol and smoking marijuana is not flat across grade levels, like using prescription drugs. As shown below, there is a steep



decline from 6th to 12th grade in how much youth think parents will disapprove of them drinking alcohol nearly every day or smoking marijuana.



The above graph also shows another trend: a significant change from 10th to 12th grade related to perception of disapproval of marijuana, a trend that will be closely monitored going forward.

Do youth report conversation with parents and teachers about the dangers of drugs?

The danger of drugs is an important message for youth to hear from many directions. The data below shows that students report that their parents (40%) and teachers (50%) never or seldom discuss the dangers. Discussing the dangers can impact perception and ultimately deter potential use. Ideally, youth should hear similar messages from parents and teachers to reaffirm the dangers.

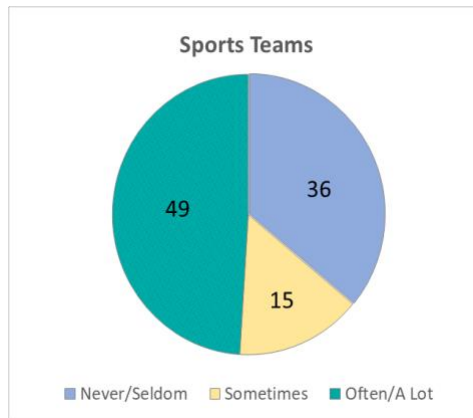
Parents Talk about Dangers of Drugs	
RESPONSE	PCT
Never	22.0
Seldom	18.0
Sometimes	31.8
Often	17.5
A Lot	10.6

Teachers Talk about Dangers of Drugs	
RESPONSE	PCT
Never	22.3
Seldom	23.9
Sometimes	33.1
Often	13.6
A Lot	7.2

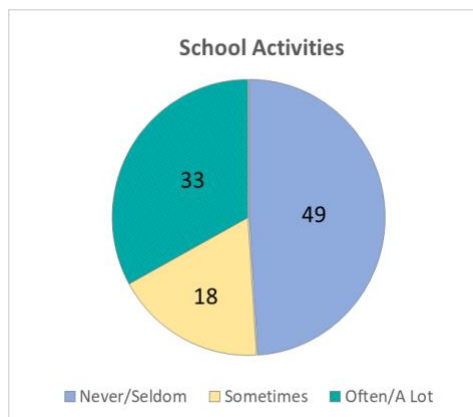
What protective factors are helping students reduce or avoid the use of harmful substances?

In addition to identifying risk factors for local youth, the Pride PLUS Survey also seeks to identify aspects within the community that provide protection for youth and reduce their risk of utilizing harmful substances. Pro-social involvement is recognized as an element providing this protection. Pro-social involvement is categorized into four areas: sports, school, church, and community activities.

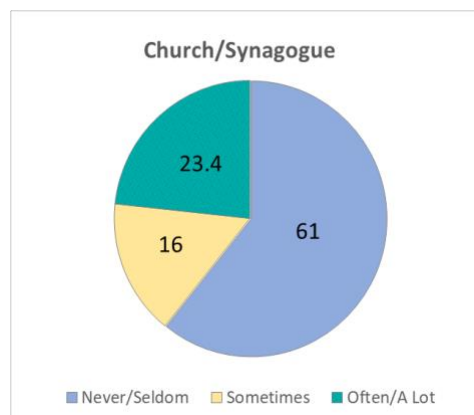
A. Sports. Over half the students surveyed reported being involved in a team sport “often” or “sometimes.” This protective factor encompasses time invested, as well as the physical and social benefits from the activity. Further, many schools require students be substance free for continued participation.



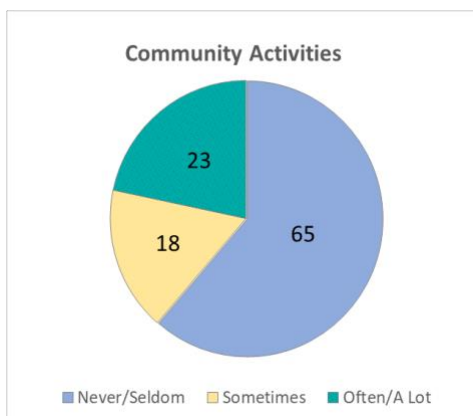
B. School. Approximately half of the students surveyed reported engagement in school activities “often” or “sometimes.” This could include participation in field trips, social clubs, or musical activities, for example, and highlights the crucial role educators play in the lives of youth.



C. Church/Synagogue. Less than half the local youth surveyed reported being involved with a church or synagogue “often” or “sometimes.” For those that do, religious involvement often supports healthy lifestyle choices, and provides alternative social activities.



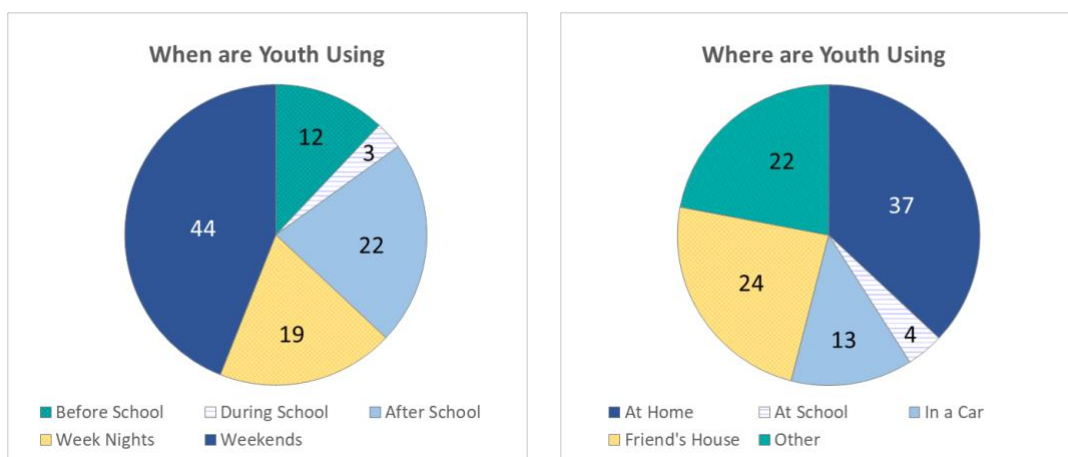
D. Community. Less than half the youth surveyed reported being “often” or “sometimes” involved in community activities. A wide range of options exist for community involvement, such as 4-H, Girl/Boy Scouts, or volunteerism, to name a few. Some community activities may be held in school buildings, however, and therefore be mistaken for school activities by the youth surveyed.



In summary, pro-social involvement is a strong protective factor. Local data indicate that participation in sports and school activities is higher than involvement with religious institutions or other community entities. This demonstrates the important role of schools in this endeavor, as well as indicating need for other organizations and/or community events to engage youth in additional opportunities.

When and where are our youth using illegal substances?

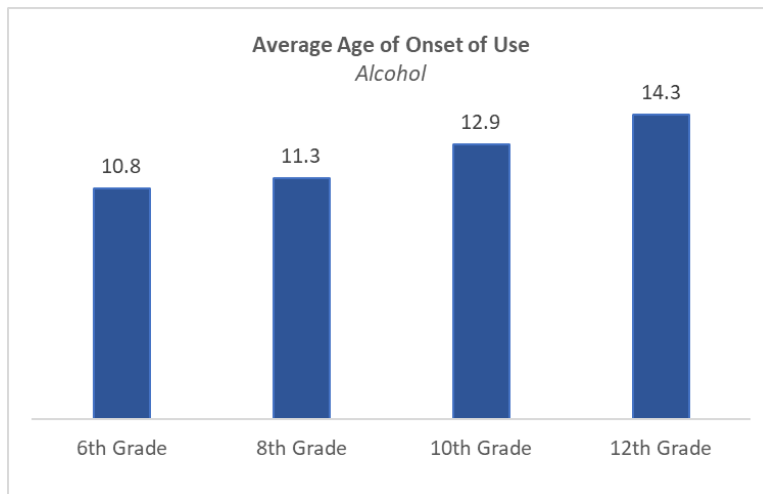
The survey results indicate that 61% of use occurs in a home (either their own or a friend’s home). Youth self-report that only 4% of their use is occurring at schools. Having structured activities such as those found at school may occupy youth time and energy. Continued efforts towards structured activities for youth when outside of school may positively interrupt youth substance use.



When do our youth begin using illegal substances?

Those youth who report using illegal substances tell us at what age they began to use. For example, with alcohol, 6th graders who report that they drink alcohol say they started at an average age of 10.8.

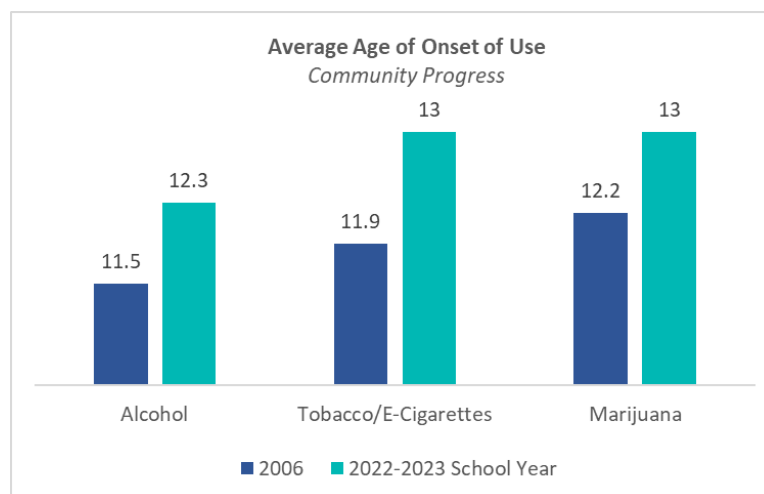
Eighth graders who report that they drink alcohol say they started at an average age of 11.3, 10th graders an average age of 12.9, and 12th graders, age 14.3.



When comparing data from 2006 to 2022, there has been a positive change in this age of first use across all illegal substances. While youth are still engaging in substance use at early ages, in the last 16 years, youth have begun use of substances at an older age than previously. This delay in use has increased by nearly one year.

This increase in the age when they begin to use is important. The later a person engages in use of substances, the lesser the incidence of psychosocial concerns with relationships, work, mental health disorders, etc. This progress of delaying use by youth by one year may seem slow, but it is a step in the right direction.

Continued prevention, treatment, and recovery efforts are needed to further this delay in substance use in our youth.



CONCLUSION

Gathering data and compiling a report is not going to solve any of the items listed in this document. The consolidation of the data allows us to identify key concerns that impact youth in our region. By involving key stakeholders in the community—people like you—we can use data to narrow the focus of our work. That helps increase our collective impact.

There are agencies in our community that are already in place to help address some of these issues, but they tend to only work on one aspect of a problem without the support or resources to tackle the entire issue. Communities that Care can pull together these resources, workgroups, and other agencies to focus on the root causes of the risk factors rather than each group working independently to try to solve community issues. That's what collective impact is all about.

These issues are not new or exclusive to our community. Avoidance of the issues will only expand their impact on our community. Prevention work is about setting up a solid base for our community's youth to build upon. The resources and time we dedicate to addressing these risks will help set up a solid foundation for them to construct something positive.

These changes do not happen rapidly. They require guidance and monitoring to verify that good intentions are producing the intended results. Communities that Care is committed to an ongoing cycle of surveying area students every other year to continue to provide data to assess the measures implemented in our communities. Our school districts work with us to make that happen.

If you have specific questions, would like a facilitated conversation with other groups about the data, or would like the workgroup to do additional research on a specific topic or risk, please contact ctcmarinettetemenominee@gmail.com.

If you would like to attend regular meetings of Communities that Care, become involved in a workgroup, or learn more about how you can make a difference in these issues, call 906-863-5665 ext.1033, or email ctcmarinettetemenominee@gmail.com