

2022 Humboldt County Community Health Assessment Enhancement

Data for Planning and Policy Making



Produced by the Humboldt County Department of
Health & Human Services, Public Health



What is a Community Health Assessment (CHA) Enhancement?

The Department of Health & Human Services (DHHS), Public Health, produces a new Community Health Assessment every five years. Our first one was published in 2013 and another in 2018. Public Health and community partners use these documents to update the Community Health Improvement Plan (CHIP)—most recently published in 2017—a resource for planning and policy making. To access both the 2018 CHA and 2017 CHIP, visit humboldt.gov/PublicHealth.

Following priorities set forth in the 2017 CHIP, Public Health and community partners have worked together to tackle some specific health issues, which revealed new knowledge that can help us provide more focused outreach and services. The CHA Enhancement is our opportunity to share this new data with the community at large. This not only increases our shared understanding of the health issues and health inequities that we face, but also provides a benchmark in our efforts to design programs to meet the identified needs—a place to begin (or continue) a community conversation.

Data included in a CHA enhancement is primary data. Primary data may be collected through activities like surveys, focus groups, key informant interviews, listening groups and other culturally appropriate methods, such as talking circles, Tribal consultation, etc. This type of data may be quantitative (numbers/quantity) or qualitative (language/descriptive).

The 2022 CHA Enhancement introduces two new reports containing primary data.

1. Oral Health Assessment

In 2020, the DHHS Public Health Oral Health program partnered with the California Center for Rural Policy (CCRP) at Cal Poly Humboldt to learn more about the oral health needs, challenges and opportunities for some members of our community who experience inequitable access to oral health. The following includes some of the key findings from 311 surveys conducted with Humboldt County residents who identified as:

- a) Adults aged 18-64 with complex health or behavioral health conditions who have housing and/or transportation challenges that impede their ability to obtain necessary health care services.
- b) Adults with health and/or behavioral health conditions who have been released from incarceration.

2. Youth Report on Substance Use in Humboldt County

In the spring 2021, our Healthy Communities team partnered with the Humboldt Allies for Substance Use Prevention (Humboldt ASUP) to design a survey titled “Your Thoughts on Substance Abuse in Humboldt,” in order to capture community input about alcohol and other drug use prevention for youth. This survey brought responses from 220 people, 28% of whom were young people ages 12-25.

Data insights from each of these reports provide specific information about health issues in our local communities and serve as guidelines for activities and interventions that DHHS and its partnering health agencies can concretely focus on to address the needs of Humboldt residents.

A summary of the Oral Health Assessment begins on page 4 of this document. The full report prepared by (CCRP), titled “Strategies to Increase Access to Oral Health in Humboldt County 2022,” is available directly from them by emailing ccrp@humboldt.edu or calling their office at 707-826-3400.

The 2021 Youth Report on Substance Abuse, titled “Your Thoughts on Substance Abuse in Humboldt,” is contained in this document and begins on page 10. It is a self-contained report with a distinct design from this section of the CHA.

Please contact the Live Well Humboldt Coordinator at livewellhumboldt@co.humboldt.ca.us if you would like to discuss the possibility of submitting new data for the CHA.

Oral Health Assessment Summary

What is oral health?

According to the California Department of Public Health (CDPH), oral health is an essential part of overall health throughout life. Oral health refers to more than just healthy teeth. Oral health refers to the health of the entire mouth. Good oral health means being free of:

- Tooth decay
- Gum disease
- Chronic oral pain
- Oral cancer
- Other conditions that affect the mouth and throat.

Good oral health supports a person's quality of life through the ability to eat, speak and have confidence in their appearance. Poor oral health, on the other hand, can result in pain, difficulty with daily activities including work and school and untreated dental diseases, like gum disease, dental caries (cavities) and oral cancers. Studies reviewed by the Centers for Disease Control and Prevention (CDC) have shown that poor oral health can harm a person's physical, mental and economic well-being. Regular preventive dental care, including brushing, flossing and visiting a dentist, is essential for good oral health. Preventive care helps catch problems earlier when they are easier to treat, but many people don't have access to the care they need.

Inequitable outcomes

The CDC reports that while the nation's oral health has improved a lot since the 1960s, not all Americans have equal access to these improvements. Some racial/ethnic and socioeconomic groups experience challenges with oral health due to the social determinants of health—conditions in the places where people are born, live, learn, work and play. For example, according to a CDC report on Disparities in Oral Health, some groups of people:

- Can't afford to pay for dental care without insurance, don't have dental insurance or can't get time off work to receive dental care.
- Live in communities where there is not access to fluoridated water and school sealant programs, healthy foods and public transportation to get to dental care appointments.

Living in rural areas, like Humboldt County, can also impact access to good oral health. The National Advisory Committee on Rural Health and Human Services reports that oral health continues to be one of the greatest unmet needs of rural Americans. According to the National Advisory Committee on Rural Health and Human Services, higher rates of poverty, along with issues like geographic isolation, lack of adequate transportation and acute provider shortages, are some of the factors that make it challenging to access oral health care in rural America.

New data

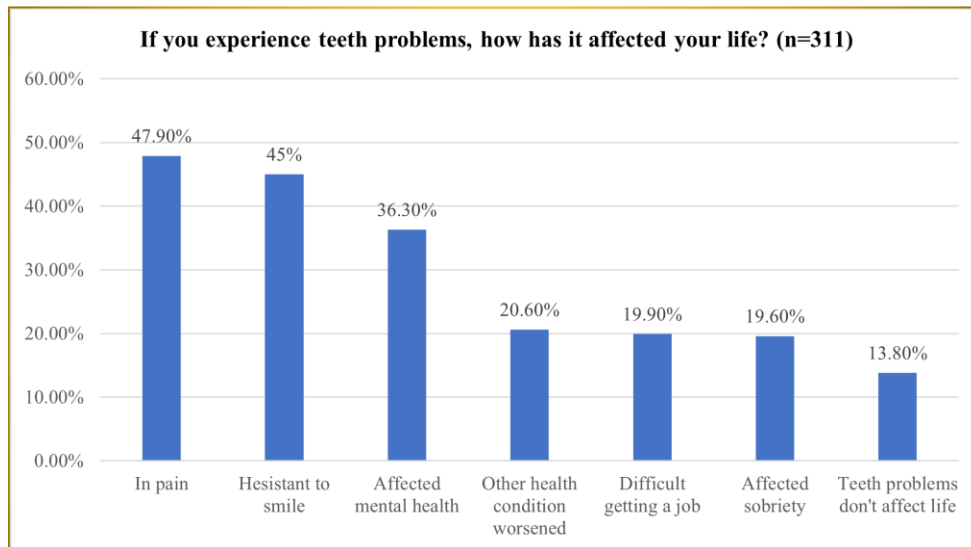
In 2020, the DHHS Public Health Oral Health program partnered with CCRP at Cal Poly Humboldt to learn more about the oral health needs, challenges and opportunities for some members of our community who experience inequitable access to oral health. The following includes some of the key findings from 311 surveys conducted with Humboldt County residents who identified as:

- Adults aged 18-64 with complex health or behavioral health conditions who have housing and/or transportation challenges that impede their ability to obtain necessary health care services.
- Adults with health and/or behavioral health conditions who have been released from incarceration.

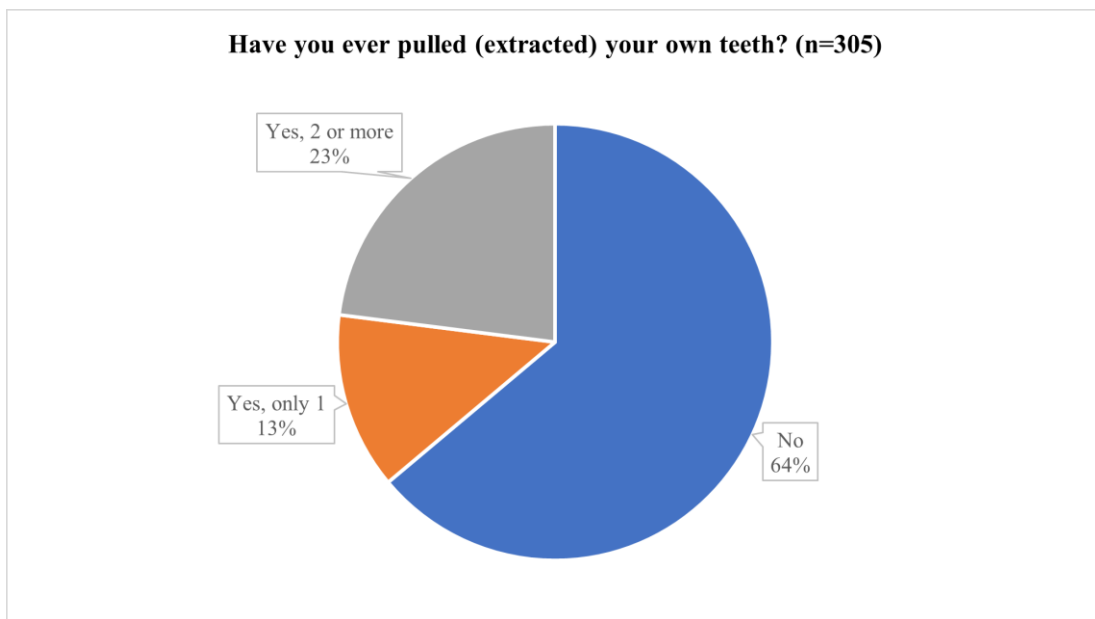
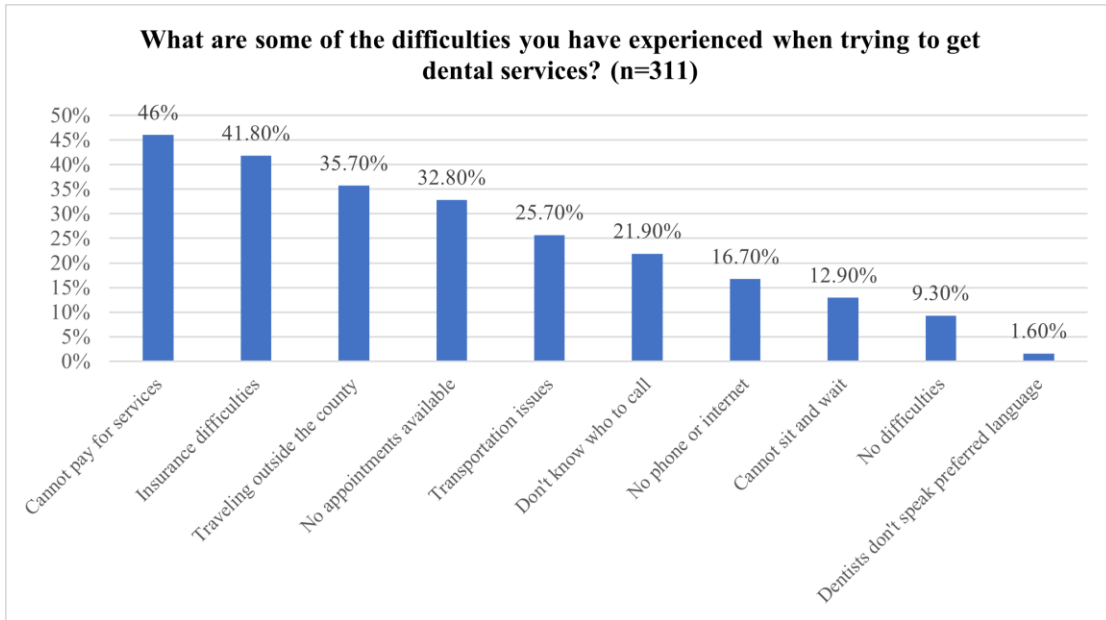
Key Findings

Based on survey results, these adults, in general, do not access dental care on a regular basis. Over half (64%) of the survey respondents said it had been more than two years since their last in-person dental visit. The need for dental services is significant since more than 80% of respondents reported experiencing a problem with their teeth in the seven days before taking the survey. Over half (51%) self-reported they have decay or cavities, 39% reported pain and 38% said they are missing teeth.

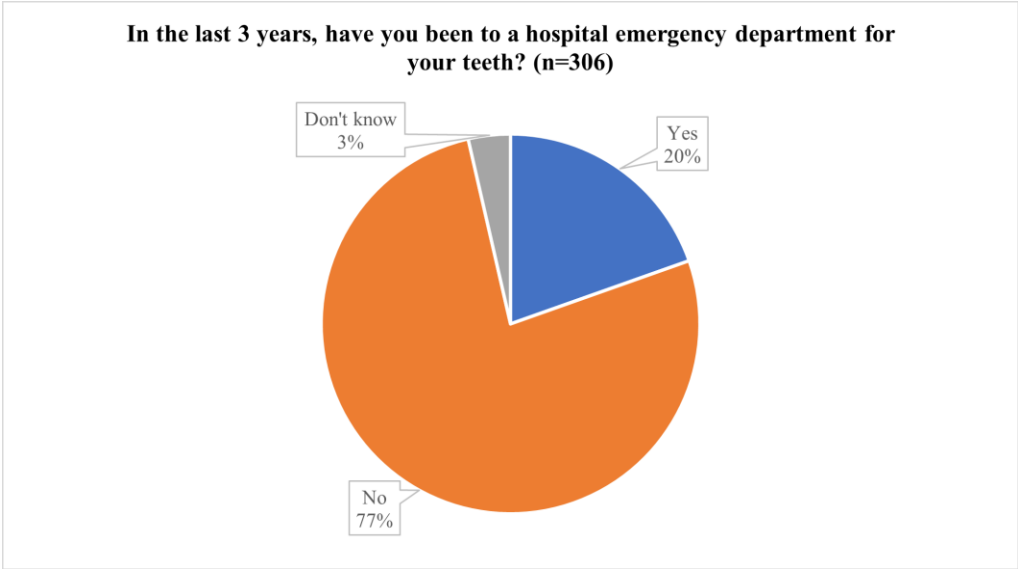
More than 85% of respondents reported a negative impact on their quality of life because of oral health problems. The top three impacts included experiencing pain (48%), being hesitant to smile (45%) and impacts on mental health (36%). One in five respondents reported other health conditions worsening, difficulty getting a job and impacts to sobriety because of teeth problems. As local organizations work to support people with housing, recovery and employment, the impact of poor oral health needs to be addressed as an important factor for success.



Despite the clear need for dental care, over 90% of survey respondents reported experiencing challenges to accessing dental services. The most frequent challenges that this population stated it has when trying to access dental services are related to financial difficulties including not being able to pay for care (46%) and having insurance difficulties (42%). More than a quarter (26%) of survey respondents experience difficulties traveling outside the county for care. Consequently, many people (36%) reported having pulled their own teeth. 13% have extracted one tooth and 23% have extracted two or more.



The two emergency departments (EDs) in Humboldt County are often last options for adults in pain. Based on the survey of 306 target audience respondents, 20% reported having had to go to the ED in the last three years. CDPH’s Office of Oral Health provided nine years of ED rates for non-traumatic dental conditions which showed a significantly higher rate for adults in Humboldt County than the California rate overall.



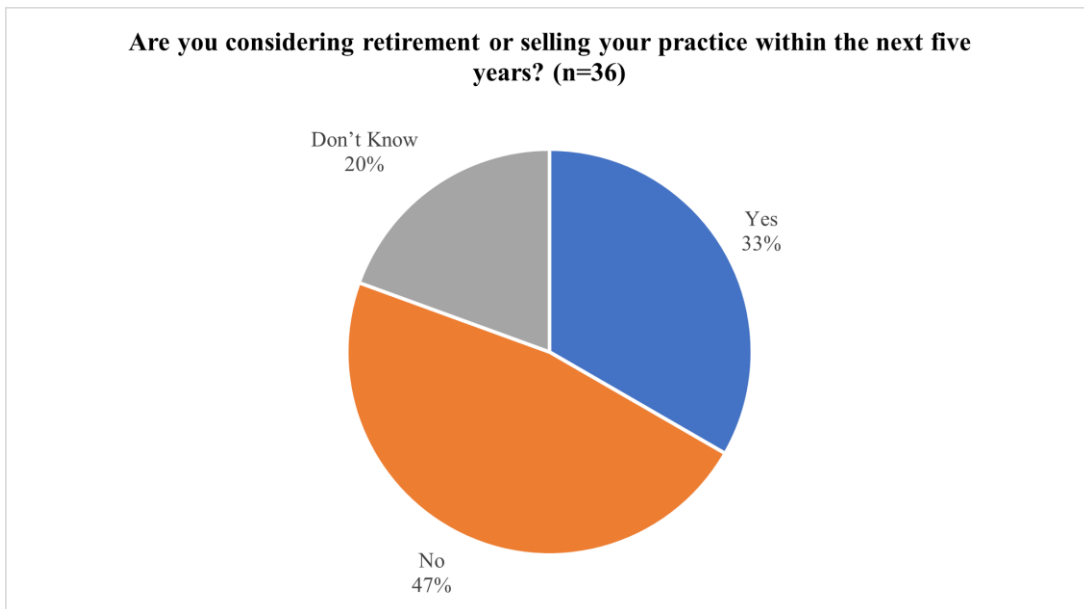
While there are a variety of insurances or funding sources that may be available to adults experiencing challenges like those participating in this survey, in Humboldt County demand for dental services for adults with low incomes is greater than the capacity to provide those services. Humboldt County has a limited number of dental offices and clinics, and most dental clinics that serve adults with low incomes are running close to or beyond capacity. Based on interviews with local dental clinic directors, the staffing level for dental professionals is the biggest impact on the number of clients the clinic can serve, not insurance or payment systems. Hiring dental professionals is very difficult and clinics have historically recruited for some positions for months at a time.

For many years, the Office of Statewide Health Planning and Development (OSHPD) has designated most of Humboldt a dental Health Professional Shortage Area (HPSA). Based on a conversation with Dr. Jayanth Kumar, CDPH Dental Director, this dental workforce desert is not because of a limited number of dental professionals in the state overall, but a geographic unequal distribution. There are more dentists in the areas around dental schools, such as San Francisco and Los Angeles, and not enough in many rural California counties, including Humboldt. Lack of access to oral health services can result in poorer quality of life for people in need of care.

Since access to dental services is so limited for adults in the target population and has been for a long time, all dental services are needed. Emergency care to treat infection and pain is critical. Restorative care, such as fillings, extractions and crowns, is needed to restore sound dentition. Dentures and partials are needed for smiling and eating. On-going preventive care is critical to prevent more dental decay. In addition, daily personal habits, such as brushing, flossing and tobacco cessation are key to good oral health.

Limited Access for Those with Private Insurance

Access to dental care for those with private insurance is expected to become increasingly difficult. In 2021, DHHS Public Health’s Oral Health program surveyed private practice dentists in Humboldt with an 80% response rate. When asked if the dentist was considering retiring in the next five years, 33% (n = 12) said they were considering retiring, 20% (n = 7) didn’t know and 47% (n = 17) said no. Recently, dentists have closed their practices because they were unable to find another dentist to buy or take over the practice. Currently, more than half of all private practice dentists in Humboldt County are not accepting new patients.



The demand for dental services is also expected to increase as Humboldt’s population grows. Humboldt State University is now Cal Poly Humboldt and is working to increase student enrollment by 50% as well as add 27 new academic programs by 2029. These new students, faculty and staff will place an increased demand for oral health services on a dental workforce that is declining.

Oral health is an important component of overall health. Poor oral health compounds quality of life issues such as confidence, sobriety, workforce and housing. Access to dental services is an important factor in having good oral health, but access is very difficult for adults with low incomes and will soon be even more challenging for those with private insurance. Oral health and its negative consequences impact the entire community.

The full report prepared by the California Center for Rural Policy, titled “Strategies to Increase Access to Oral Health in Humboldt County 2022” is available directly from CCRP by emailing ccrp@humboldt.edu or calling their office at 707-826-3400.

Sources

Centers for Disease Control and Prevention. Oral Health Fast Facts. Available at:
<https://www.cdc.gov/oralhealth/fast-facts/index.html>

Centers for Disease Control and Prevention. Disparities in Oral Health. Available at:
https://www.cdc.gov/oralhealth/oral_health_disparities/index.htm

National Advisory Committee on Rural Health and Human Services. “Improving Oral Health Care Services in Rural America” (2018). Available at: <https://www.hrsa.gov/sites/default/files/hrsa/advisory-committees/rural/publications/2018-Oral-Health-Policy-Brief.pdf>

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Your Thoughts on Substance Use in Humboldt

2021 Survey Report



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Executive Summary

The “Your Thoughts on Substance Use in Humboldt” survey asked people questions about alcohol and other drug use. It took place in the spring of 2021. The information will help plan how to keep youth safe from drugs and alcohol. It had some questions that everyone answered. It also had questions that only adults answered (ages 26 and over). And some questions only young people answered (ages 12 to 25). 220 people took the survey. 61 of them were young people. The results may not represent Humboldt County as a whole.

The survey results showed that people were concerned about alcohol and other drug use in Humboldt County, California. It also showed that people cared about young people. People wanted to protect young people from bad things that might happen because of alcohol and other kinds of drugs. People were worried about Adverse Childhood Experiences (ACEs). ACEs happen in childhood and could cause stress or trauma. For example, violence, abuse, or neglect. They thought that ACEs could lead children or teenagers to use alcohol or other drugs.

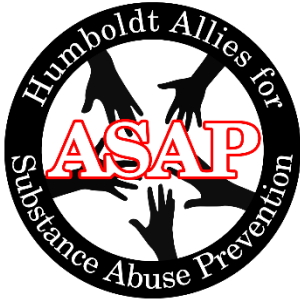
Young people were asked how COVID-19 affected their mental health. They were also asked about alcohol and other drug use. More than half of the young people said their mental health had gotten worse during COVID-19. This was a concern because mental health issues could make someone more likely to use alcohol and other drugs.

The survey results showed that people in Humboldt care about alcohol and other drug use. Especially when it comes to the health and well-being of young people.

Please visit the full survey report for a detailed analysis of the survey results. The survey report also includes survey limitations, survey methods, recommendations, and conclusions.



About the Authors



Humboldt Allies for Substance Abuse Prevention (Humboldt ASAP)

Humboldt ASAP (Allies for Substance Abuse Prevention) is a community coalition dedicated to reducing and preventing youth alcohol and other drug use in Humboldt County since 2002¹.

ASAP is funded by a Federal Drug Free Communities (DFC) grant and Humboldt County Department of Health and Human Services (DHHS) is the coalition's Fiscal Sponsor. Coalition staff are part of the Substance Use Prevention (SUP) Program of DHHS Public Health Branch, Healthy Communities Division.

ASAP provides a space in Humboldt for individuals throughout community to work together on youth alcohol and other drug use prevention. The coalition brings together people who normally do not always work together, such as teachers, law enforcement, healthcare professionals, county employees and more. The coalition currently has 38 active members, including 7 youth members aged 18 or under.

¹ Currently, the vocabulary and language that prevention workers, professionals, and community members use to talk about substances and substance use is changing in many ways. However, the authors consider the term "alcohol and other drugs" the most accessible to the general community and will use that term throughout this report. This report will address survey responses related to language.

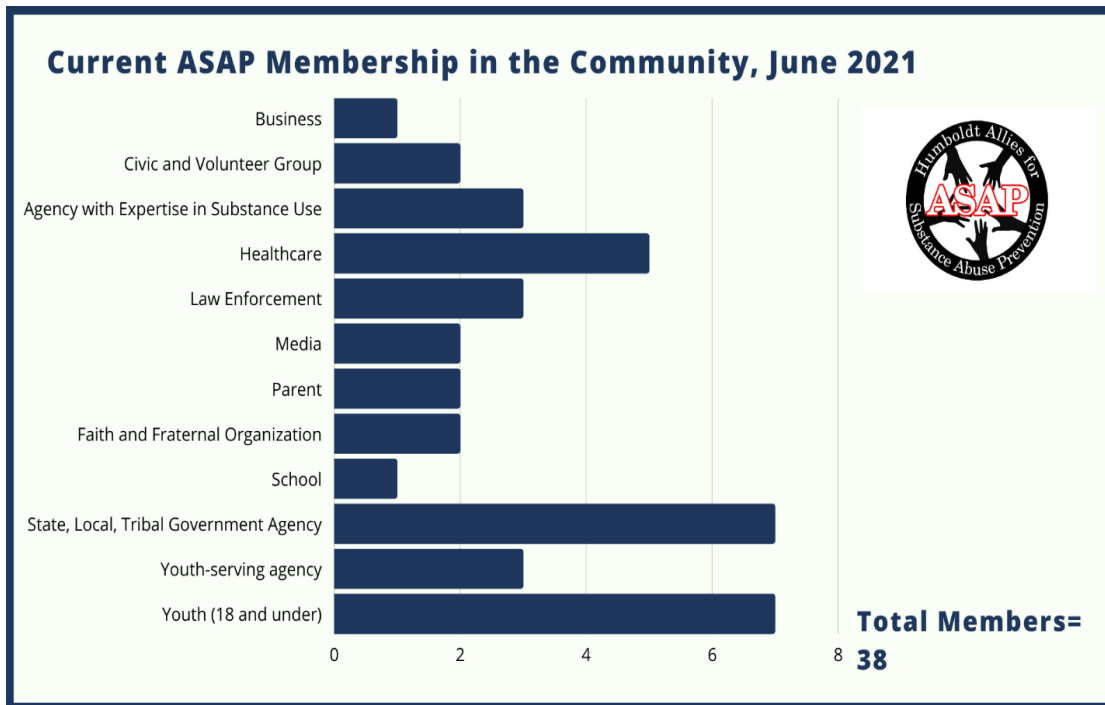


Chart 1.1

Currently, there are 38 ASAP coalition members who represent various parts of the community in Humboldt County. The coalition has a diverse membership from many different backgrounds. Young people (18 and under) and professionals working for state, local, and tribal government agencies are the most represented.

Substance Use Prevention (SUP) Program

SUP staff use evidence-based approaches to help reduce and prevent substance use among youth and adults. Strategies include community education, supporting public policies that promote healthy behavior, and collaboration with coalitions and partners to help build communities that are free of alcohol and other drug related harm.

Introduction

The “Your Thoughts on Substance Use in Humboldt” survey was created to capture community input about alcohol and other drug use prevention for youth. The survey was designed to have a main body of questions that all participants would answer, as well as questions specifically tailored for adults (ages 26 and over) or young people (ages 12 to 25). ASAP’s Youth Sector Representative helped build the youth track of the survey, which addressed the impact of COVID-19 on young peoples’ substance use and mental health.

This report was written to summarize the information gathered on community thoughts about alcohol and other drug use as well as substance use prevention. First, a summary of key findings, then survey methods (how the information was gathered), a summary of the limitations of the survey and a description of participants (people who took the survey), followed by a detailed analysis complete with data charts, recommendations, and conclusions. Appendices and references were included at the end of the report.



Analysis of the survey data identified key points about community attitudes towards substance use prevention. The unifying theme underlying all qualitative (short answer written responses) survey responses was care for youth and concern that they be protected from the negative effects of alcohol and other drug use. The use of “we” language throughout the qualitative responses was notable. This was most striking when adult participants were asked to give personalized input about substance use prevention. This indicated that those who took the survey were invested in meeting the challenges of this work.

Key Findings

1

Survey participants were concerned about the impact of generational trauma and Adverse Childhood Experiences (ACEs) on the uptake of substance use among people in Humboldt, especially among young people. For more information about ACEs please see the Appendices.

2

Survey participants expressed belief in a relationship between the availability of alcohol and other drugs, the presence trauma in young peoples' lives, and their uptake of alcohol and other drug use.

3

Survey participants revealed diverse views on substance use. Responses lacked a common vocabulary acceptable for all to use in talking about alcohol and other drugs.

4

Survey participants communicated the need to provide young people alternative activities to using alcohol and other drugs. They expressed that promoting a sense of community, belonging, and inclusion for young people would be key to effective prevention efforts. One participant wrote, "youth prevention starts with consistent and authentic demonstrations of youth support by community, its organizations and structures." Participants included varied examples of alternative activities, including skills building, storytelling, building connections with the community and positive adults, and safe spaces to gather.

5

Survey participants conveyed the need for young people to be engaged in more frequent prevention education about alcohol and other drugs. They also cited the need for skills education, such as dealing with emotions, harm reduction, and becoming a part of the community.

6

When asked how large an issue alcohol and other drugs are in the community, survey participants ranked many substances as a "big issue" for both adults and young people. Cannabis, alcohol, and tobacco were considered the largest issues for young people. Illegal opioids, methamphetamine, and alcohol were considered the largest issues for adults.

7

Participants used various terms to describe the need for increased parent, caregiver, or adult ally engagement. Some examples are "lack of adult role models," "lack of connection with adults," and "parents should have the knowledge about the issues teens are facing today."

Methods

Sampling

Survey participants were reached through a modified convenience sample. A convenience sample is a group that is easy to contact or reach. This technique was modified by extending outreach beyond immediate contacts.

Coalition staff and coalition members performed extensive outreach to community partners and local agencies. Notably, ASAP's Business Sector Representative included a notice for the survey in the Fortuna Chamber of Commerce's print newsletter. The Chamber mailed the newsletter to all Fortuna residents. ASAP members posted links to the survey on several Facebook community groups in Southern Humboldt, such as "What's Going on Redway" and "Shelter Cove Community Unity." ASAP members brought the survey into their classrooms and encouraged their students to participate.

Coalition staff reached out to churches and community groups serving primarily Spanish speaking and Hmong-speaking populations for help reaching those groups and advice on outreach tactics.

220 people completed the survey. The survey results were not statistically significant. The results could have occurred by chance and, while informative, did not represent the Humboldt County population as a whole. Given how survey responses were collected, it could be possible that participants were more likely to be involved in youth substance use prevention and treatment.

Background of Survey Questions

Substance Use Prevention staff, the ASAP Steering Committee, and the ASAP Youth Representative wrote the survey. The authors used current information from Drug-Free Communities (DFC) and the Community Anti-Drug Coalitions of America (CADCA) regarding best practices within the substance use prevention field. The Community Prevention Initiative (CPI) provided technical assistance with designing the survey format, questions, and topics.

Limitations

220 participants completed the survey. Another 123 people opened the survey but chose not to complete it.

The survey was available in English and Spanish. Limited responses from primarily Spanish-speaking community members demonstrate a need for enhanced outreach to the Spanish-speaking community. Primarily Spanish speaking young people did not provide any responses. One adult used the Spanish language survey. Coalition staff were advised to do in-person outreach to the Spanish speaking population; staffing restrictions during data-collection prevented this. Coalition staff will design an outreach plan tailored for the Spanish-speaking community before future community surveys.

A survey participant gave this valuable feedback: "I think that this survey is centered on the white experience and misses the causes for LGBTQIA+ and BIPOC+ persons and youth." Similarly, this participant said that the survey failed to address the root causes of alcohol and other drug use for LGBTQIA+ youth. At least one other participant felt that the survey did not meet the needs of BIPOC+ community. Staff agrees

with this feedback and will collaborate with a prevention worker(s) with expertise in LGBTQIA+ and BIPOC+ youth in future survey designs.

Survey Participants

Of the 343 people who started the survey, 220 completed it. 149 of these people completed the adult only questions. Sixty-one completed the youth only survey. Roughly a third of youth qualifying to answer questions about alcohol and other drug use. Overall, the survey had a 64.14% completion rate. The survey was available in Spanish for both youth and adults. One person completed the Spanish language survey. (See *Limitations*).

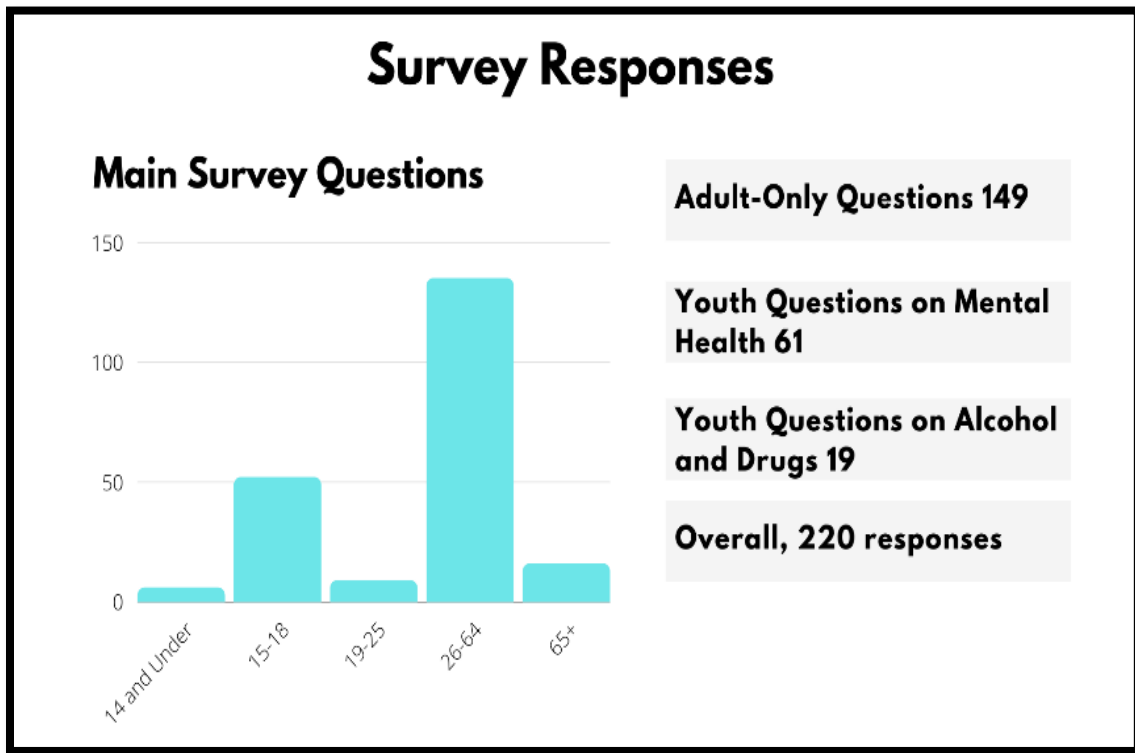


Chart 1.2

All 220 survey participants answered questions in the main body of the survey. 149 survey participants (ages 26-64) answered the adult-only questions. 61 survey participants (ages 12-25) responded to the youth-focused questions. 19 youth survey participants reported that they

currently use alcohol and other drugs and answered questions about their current use and access points during COVID-19.

41% of survey participants lived in Eureka and the greater Humboldt Bay Area. Arcata, McKinleyville, southern Humboldt and the Eel River Valley (Fortuna, Ferndale, Rio Dell, and Scotia) were all well represented. Most participants lived in the micropolitan area (small cities near the coast) with rural and remote individuals the least represented. The fewest survey participants lived in Blue Lake, northern Humboldt, eastern Humboldt, and the Highway 36 area. A quarter of survey participants were parents or caregivers of school-aged youth. 28% of participants were youth.

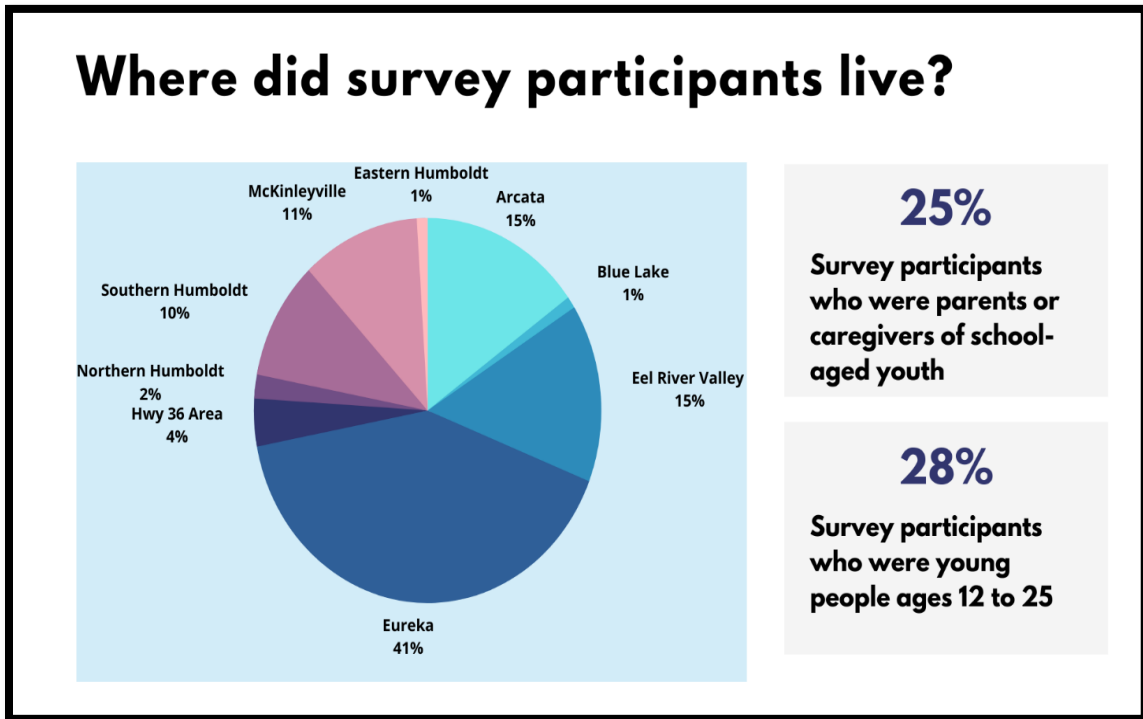


Chart 1.3

Describes where the survey participants lived in Humboldt County. Most participants (41%) lived in Eureka and the greater Humboldt Bay Area.

Detailed Analysis

Data from Main Survey Questions (All Ages)

Throughout the survey responses, participants expressed concern about the impact of generational trauma and ACEs (adverse childhood experiences) on alcohol and other drug use among people in Humboldt. This concern was primarily for young people. The impact of trauma and ACEs emerged in both multiple-choice answer sets (where ACEs or trauma was one of the multiple-choice options) and in qualitative data (short answer written responses). 183 participants marked this as the top concern. Other concerns that fall under the ACEs category were also mentioned, such as parental neglect and poverty. This could indicate that the people who took the survey were well educated about ACEs before they took the survey.

Concerns about Adverse Childhood Experiences (ACEs), generational trauma and youth alcohol and other drug use:

"Trauma is the gateway drug, and this county is highly traumatized with high ACEs."

"Cannabis culture combined with high Adverse Childhood Experiences."

"Reduce ACEs, that's the core [of reducing youth alcohol and other drug use in the community]."

"ACEs is the bottom line."

Chart 1.4

Selected participant quotes about Adverse Childhood Experiences (ACEs) from the qualitative survey responses. Adverse Childhood Experiences (ACEs) includes forms of abuse, neglect, and

household dysfunction such as: violence; growing up in a family with mental health issues or alcohol and other drug use disorder; the presence of generational trauma for young people, parents, and family systems; lack of substance use disorder treatment and mental health resources; having a family member who is incarcerated; and having parents or caregivers who are divorced.

When asked about what contributed the most to youth use of alcohol and other drugs, the most frequent response was “substances are available to youth” (12.19%). Survey participants also cited a lack of alternative activities for youth (10.10%) which was a recurring theme across other questions in the survey.

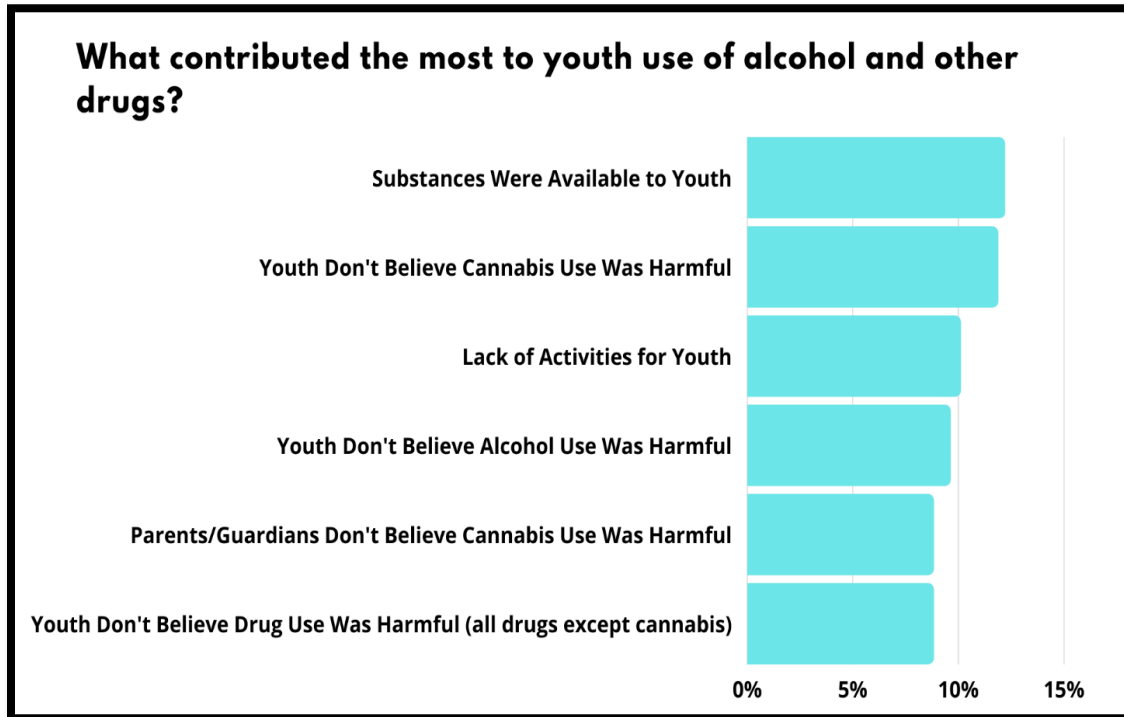


Chart 1.5

The most frequent response to what survey participants thought contributed the most to youth use of alcohol and other drugs was “substances are available to youth” (12.2%).

Three common themes emerged in the “other” category (short answer responses), the presence of ACEs and generational trauma for young people, issues with parents and family systems, and a lack of mental health and substance use disorder treatment resources.

Responses to the question of what would help the most to reduce youth use of alcohol and other drugs were highly varied. The most frequent responses were reducing ACEs (13.72%), increased mental health support (13.19%), followed by better access to treatment for young people with problematic substance use (10.87%), and alternative activities for youth (10.12%).

Three common themes emerged when survey participants entered short text answers in the “other” category for this question: alternative activities for youth, peer-led prevention programming, and addressing factors that lead to ACEs. Examples of alternative activities for youth included “programs that promote connection” and “more opportunities for youth to be educated about exciting careers/interests.” Examples of local factors that lead to ACEs included poverty, systemic racism, and untreated mental health issues in family systems.

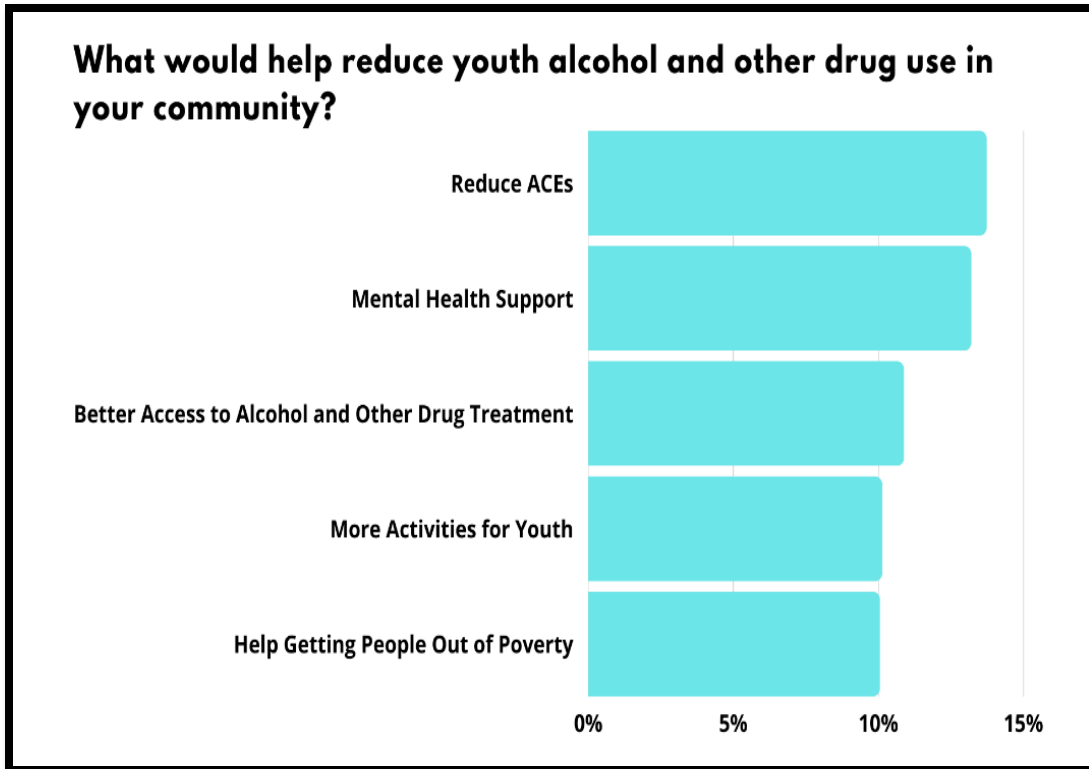


Chart 1.6

13.72% of survey participants thought that reducing ACEs would also reduce youth alcohol and other drug use in their community.

The survey asked if substances were a big issue, medium issue, small issue, or not an issue for either young people or adults. Survey participants considered three substances the biggest issues for young people in the community: cannabis, alcohol, and tobacco.

Substance	Number of participants who agree the substance was a “big issue” for young people
Cannabis	131
Alcohol	128
Tobacco (smoking or vaping)	127
Methamphetamines	97
Illegal opioids (heroin, fentanyl, etc.)	97
Prescription drug misuse	89
Ecstasy/Psychedelics	65
Inhalants (nitrous oxide, etc.)	64
Over-the-counter (OTC) medication misuse (cough syrup, etc.)	50

Most survey participants agreed that each substance was a big or medium issue for youth. However, larger clusters of participants thought that inhalants, illegal opioids or methamphetamines were “not an issue” for young people.

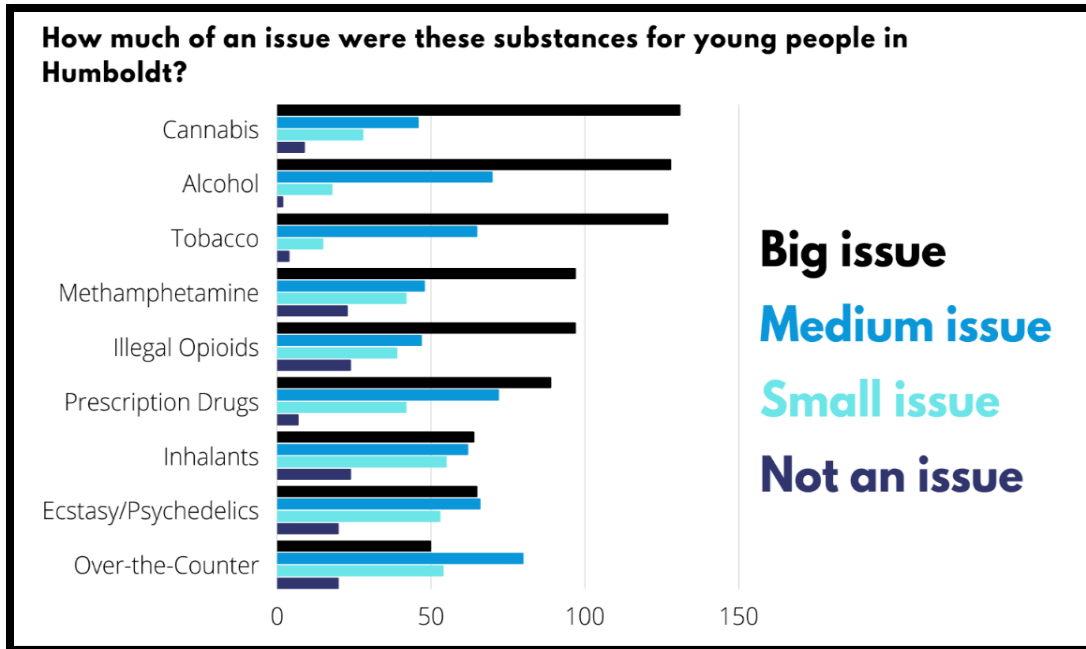


Chart 1.7

Survey participants expressed that cannabis, alcohol, and tobacco were the biggest issues for young people in Humboldt.

Survey participants considered illegal opioids, methamphetamine, and alcohol the biggest issues when asked the same question about adults. Despite having serious long-term negative health effects, participants ranked some substances as less harmful for adults, including cannabis and tobacco. Polysubstance use among adults (the use of more than one substance at the same time) has been an ongoing issue in Humboldt. According to Humboldt County Public Health Epidemiologist Ron Largusa (2019), “drug poisoning/SUD deaths involving methamphetamine and/or multiple non-opioid drugs made up approximately half of OD/SUD 2018 deaths in Humboldt County.” Data from the Humboldt County Office of Vital Statistics indicated that in 2020 there were at least 26 deaths that involved more than one substance.

Substance	Number of participants who agree the substance was a “big issue” for adults
Illegal opioids (heroin, fentanyl, etc.)	153
Methamphetamines	152
Alcohol	146
Prescription drug misuse	112
Cannabis	103
Tobacco (smoking or vaping)	101
Over-the-counter (OTC) medication misuse (cough syrup, etc.)	53
Inhalants (nitrous oxide, etc.)	53
Ecstasy/Psychedelics	51

Most participants agreed that each substance was a big or medium issue for adults. However, large clusters of survey participants thought that inhalants, over-the-counter medication misuse, and cannabis were “not an issue” for adults.



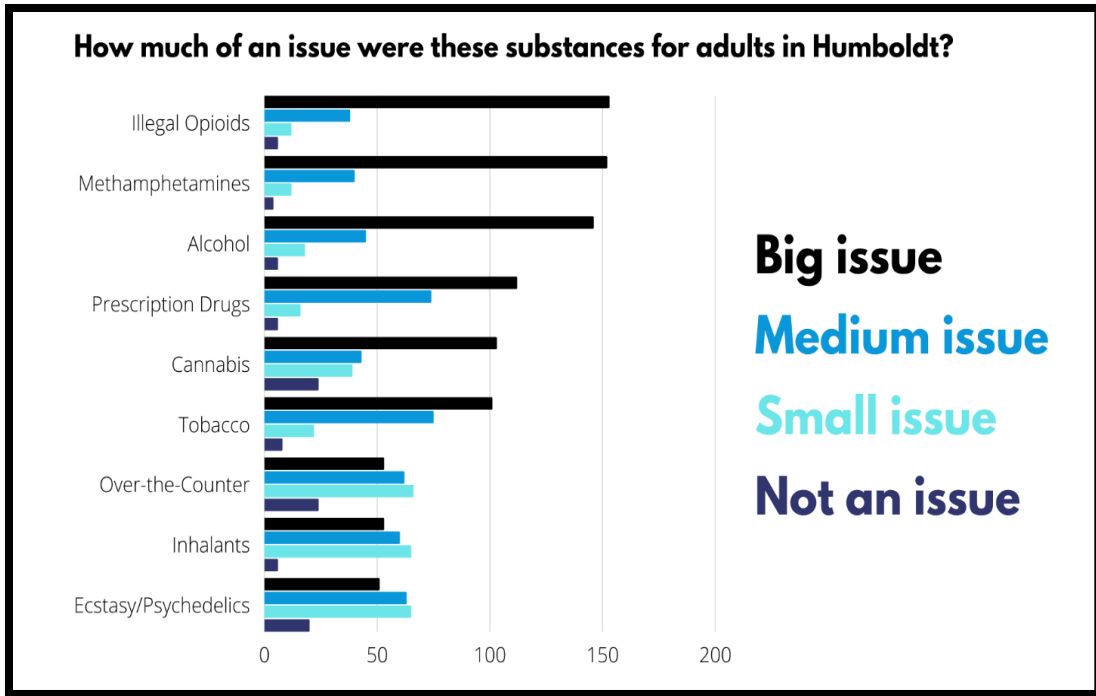


Chart 1.8

Survey participants indicated that illegal opioids, methamphetamines, and alcohol were the biggest issues for adults in Humboldt.

Despite local initiatives to promote safe storage of prescription drugs, 53.7% of survey participants were “not sure” if the community understood that safe storage has been effective to reduce prescription drug misuse. Each year in the United States the harm resulting from medication misuse will cause more than one million visits to hospital emergency departments. Practicing medication safety has been shown to reduce this number (Shehab et al, 2016).

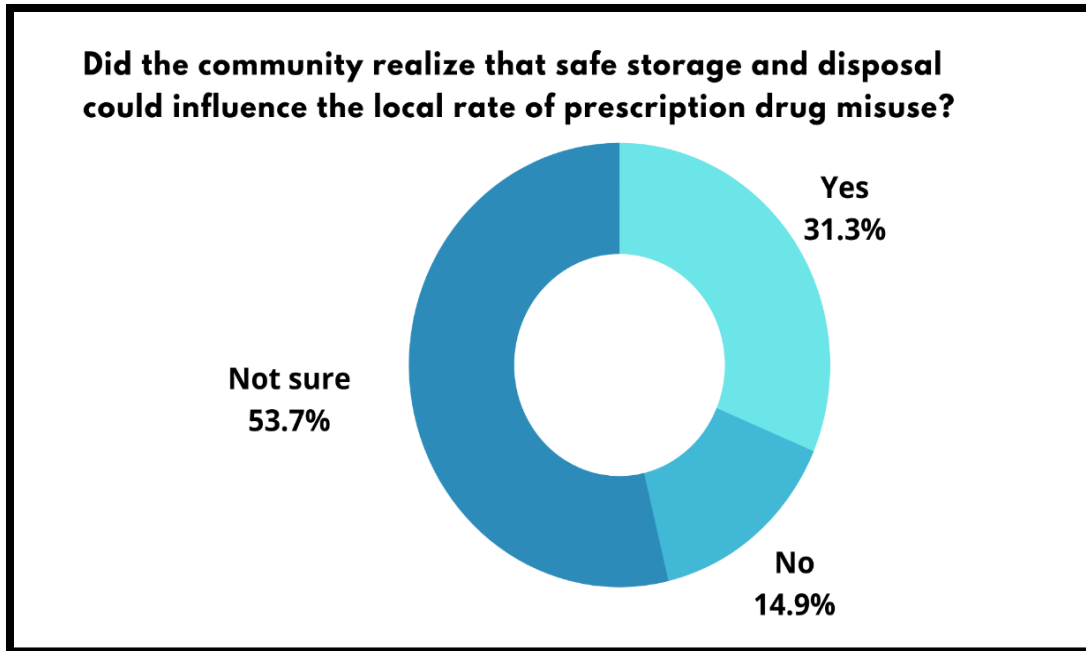


Chart 1.9

More than half of survey participants are “not sure” if people understand that the way they store and dispose of prescription drugs can influence the local rate of prescription drug misuse. Prescription drug misuse is taking more of a prescription medication than prescribed; taking a prescription medication for a reason different than prescribed; or sharing or taking someone else’s prescription medication.

There were concerns among the survey participants about the misuse of inhalants, particularly nitrous oxide or “whip-its.” Both adult and youth survey participants expressed that the amount of used “whip-it” canisters on the streets is evidence of a local issue.

Both the chart below and a review of the “other” responses show there was no central place where survey participants got information about alcohol and other drugs. This information highlights the need to do outreach and education through a wide variety of avenues.

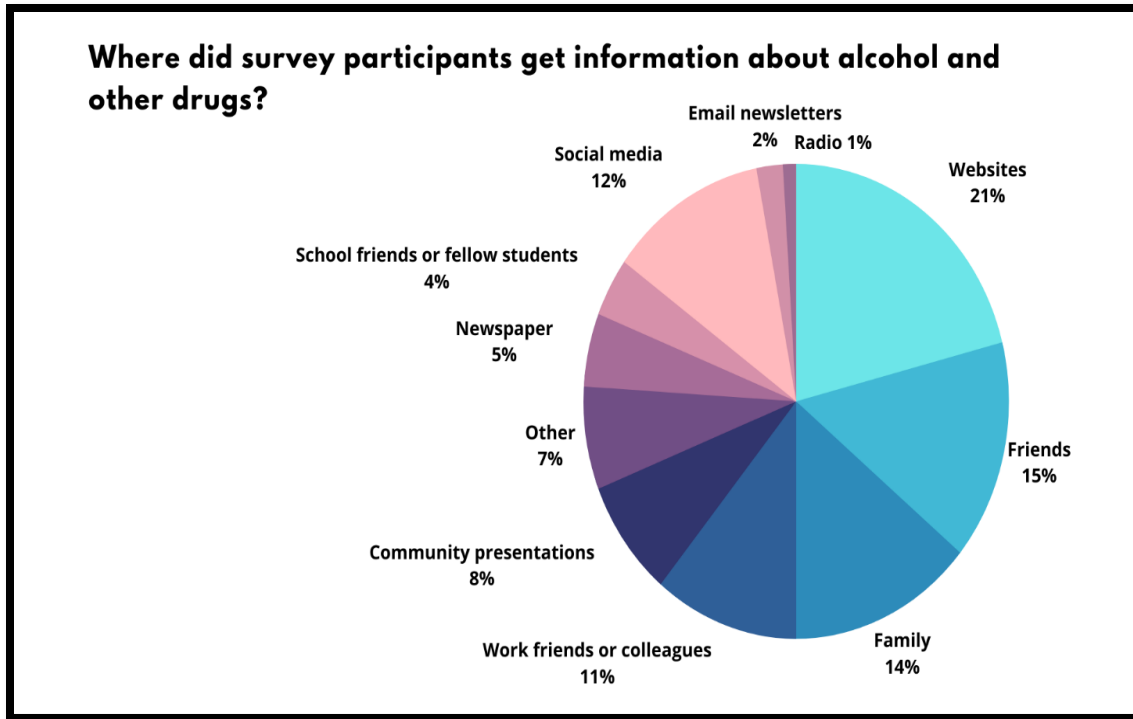


Chart 1.10

Survey participants were asked to pick their top three sources of information. The chart showed there was no central place where survey participants got information about alcohol and other drugs.

Adult-Only Questions (Ages 26 and over)

This series of questions asked adults survey participants (ages 26 and over) to weigh in on the following statements:

- I am comfortable allowing my teen and their friends (or teens, in general, if you are not a parent of a teen) to drink alcohol, consume cannabis, or use tobacco in my home if I take car keys and feel everyone is safe.
- I believe that underage [alcohol, cannabis, tobacco] use is a rite of passage.

Overall, survey participants disagreed with allowing alcohol, tobacco, and cannabis use in home settings. Responses also showed that participants agreed that using alcohol, tobacco, or cannabis was a rite of passage.

Some survey participants expressed that they were open to harm reduction around youth substance use, if necessary. No or low use by youth was preferred, however, participants preferred harm reduction over unsupervised use. Many participants expressed discomfort answering questions about whether they would allow youth use in their homes. This speaks to the complex nature of alcohol and other drugs in our society. One participant stated:

“Keeping an open dialogue with my child and discouraging underage use, but also being available to talk about it when things happen with them using substances or being exposed to substance use seems to be really key with making sure that my child is making informed choices and preventing themselves from getting into a bad situation. Safety and responsibility are the most important considerations for me as a parent.”

The agree/yes and other responses were relatively equal for both youth use in home settings and rite of passage questions for both alcohol and cannabis. In the “other” (short answer written responses) category, survey participants expressed discomfort with both sets of questions. They used different words than “yes” or “agree” to say that they agreed with the statements indirectly. Some included caveats. Some participants wrote about harm reduction. For example, one participant who selected “other” for the question

about allowing cannabis use in home settings explained: “haven’t dealt with this yet, but, I think that this is the best alternative we have to offer them.”

The negative responses to youth using of tobacco in home settings were the most pronounced, with only one person writing in a comment that indicated some approval. This could be due to the success of statewide anti-tobacco campaigns and taxes since 1988. The difference in responses between alcohol and cannabis use demonstrated that more work should be done to change community norms around the use of these substances by youth.

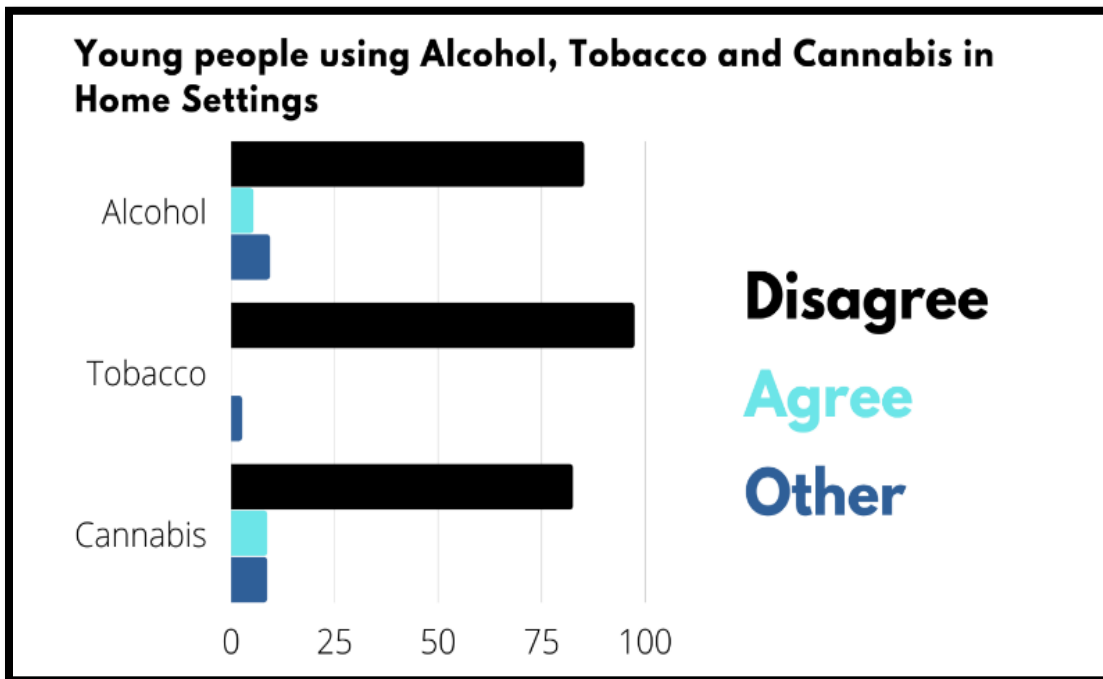


Chart 1.11

Most adult survey participants disagreed with allowing youth to use alcohol, tobacco, and cannabis in home settings.

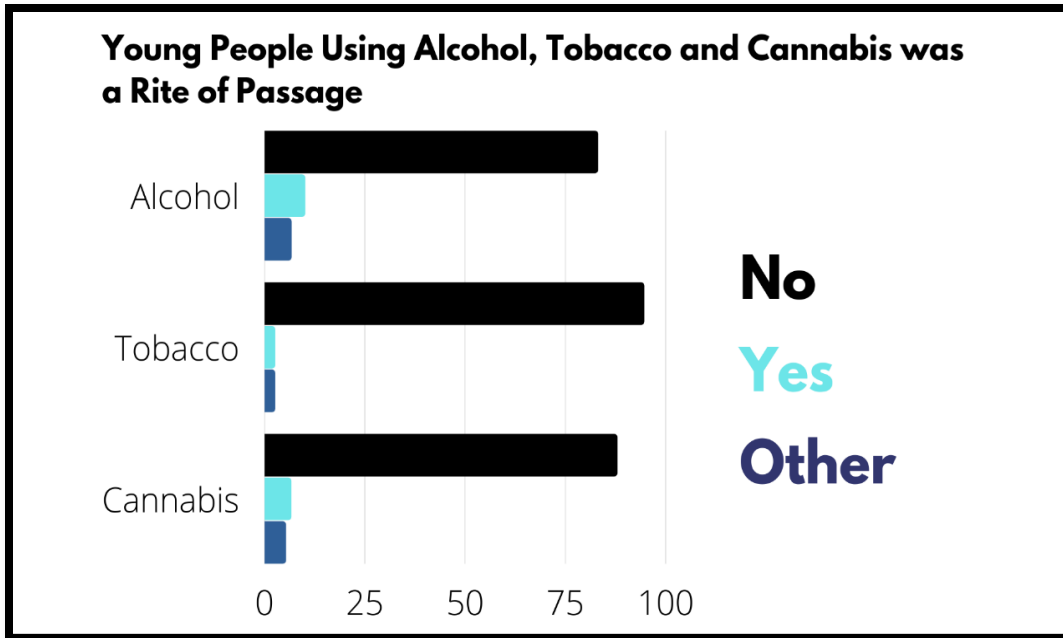


Chart 1.12

Most adult survey participants said that youth use of alcohol, tobacco and cannabis was not a rite of passage for young people.

The qualitative responses in the “other” category for each question highlighted the need for continued education and support for parents and caregivers about having conversations with young people about alcohol and other drug use.

Interestingly, some participants who were not parents or caregivers did not want to answer these questions.

Fifty-one participants addressed the final question in this section: Please add anything you would like to share about alcohol and other drug use prevention. The use of the “we” language throughout these responses was notable. Using “we” indicates engagement with addressing the issues that could lead to young people using alcohol and other drugs. Throughout these responses, the most common themes were: the need for increased education and support for young people; the need to address ACEs; the

importance of positive adult relationships for young people; and the need to provide more support for parents and caregivers.

Youth Survey

Sixty-one young people (ages 12 to 25) completed the section of the survey on mental health and substance use during COVID-19. More than half of youth participants agreed with the statement “my mental health feels worse than before [COVID-19].” This information is concerning because mental health issues are an established risk factor for substance use among young people (Youth.gov, n.d.).

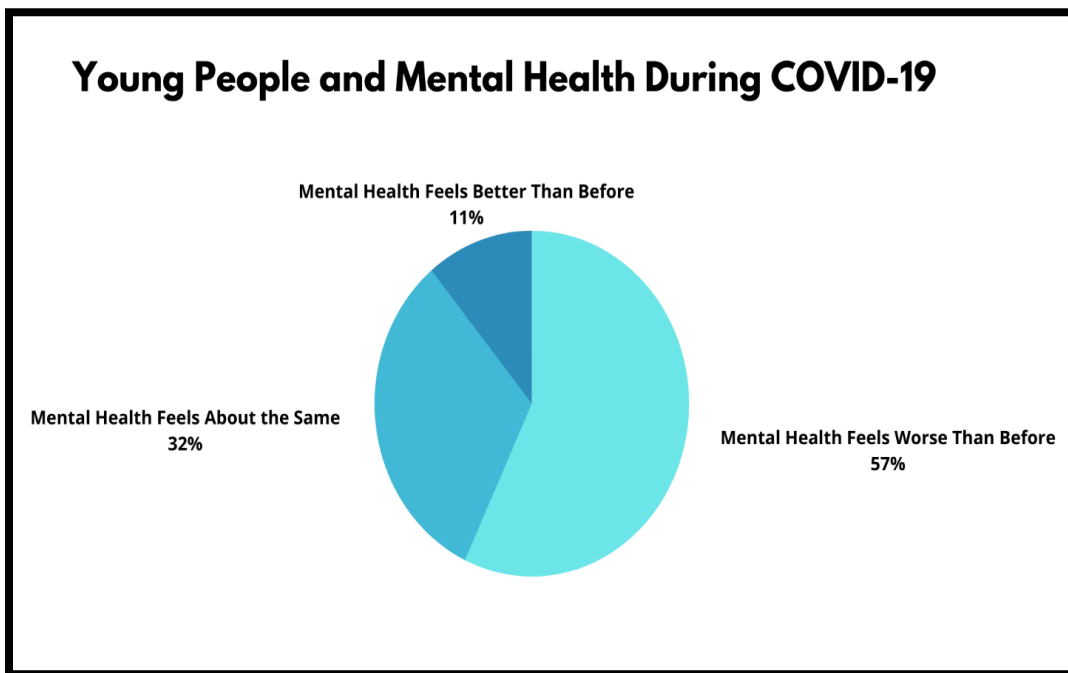


Chart 1.13

More than half of youth survey participants (57%) indicated that their mental health was “worse than before” during COVID-19.

When asked what would be most helpful for them now, youth stated they wanted general mental health information (52%). 20% indicated that they need suicide prevention information. One participant wrote in a need for therapy. In California, of the one in eight teenagers living with depression, only about one-third have received treatment (Teare & Gaines, 2018).

One participant requested “information on moderation use” which the survey authors read as harm reduction information. The need for harm reduction information and education also emerged as a theme among responses from adult participants.

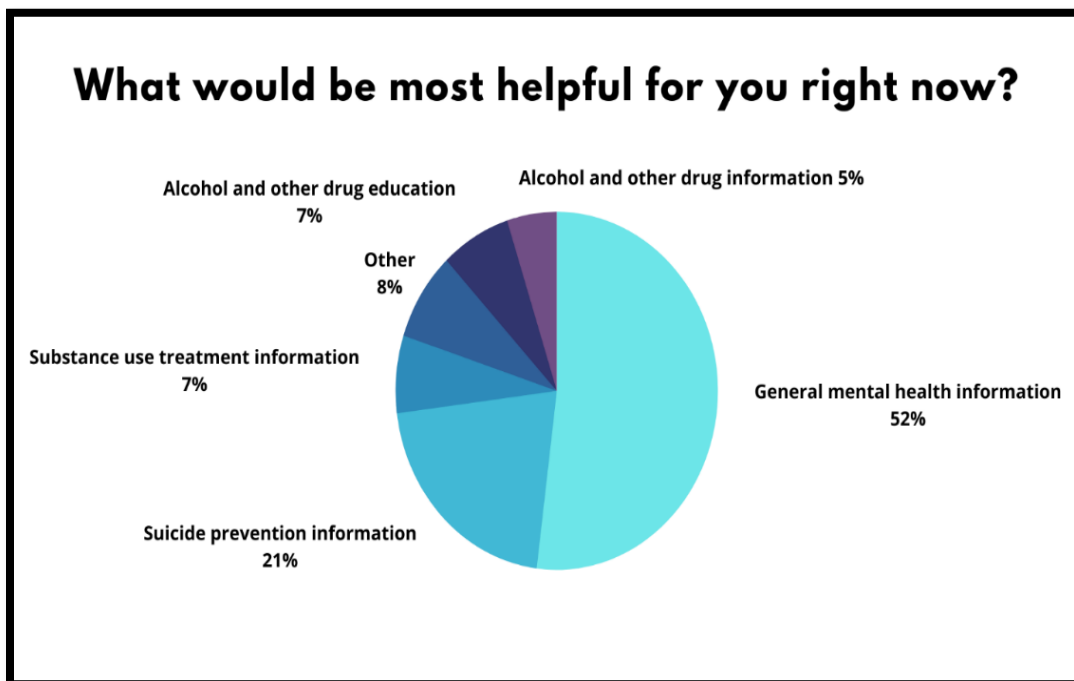


Chart 1.14

Youth survey participants expressed a need for general mental health information (52%) as well as suicide prevention information (21%).

Nineteen youth responded that they use alcohol and other drugs and then answered a series of questions about their use during COVID-19. Due the small sample size, the results could have occurred by chance. While informative, the responses do not represent young people ages 12 to 25 in Humboldt County as a whole.

The first question addressed how the survey participants use of alcohol and other drugs had changed during COVID-19. There was no reported use of methamphetamines or other stimulants among youth survey participants.

Substance	Youth who use alcohol or drugs who agree with the statement “I use more of this substance now” (at the time of survey)
Cannabis	8
Alcohol	7
Vaping (Any substance)	6
Tobacco	4
Prescription Drugs	2



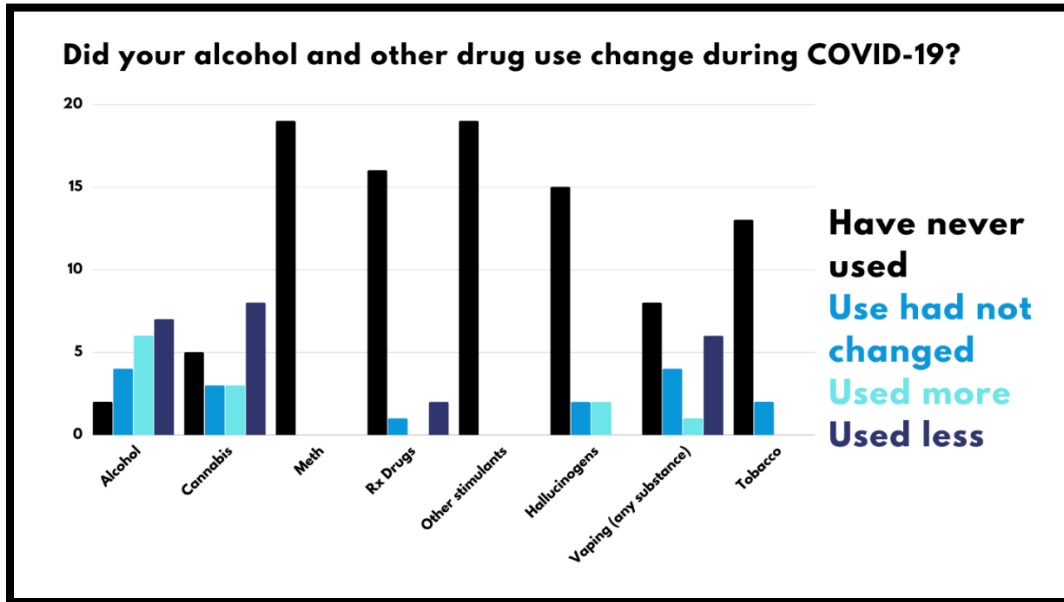


Chart 1.15

Alcohol and other drug use among the 19 youth survey participants during COVID-19. The largest change was youth using more and less alcohol, as well as less cannabis and vaping. There was no reported use of methamphetamines or other stimulants among these participants.

Twelve participants reported that they get alcohol and other drugs by buying from people they know, nine got them from friends, and six reported accessing them at home. Three participants who selected “other” (short answer written responses) explained that they buy alcohol and other drugs from stores. One participant specified that they were of legal age to do so. However, the survey did not ask participants if they were of age to purchase drugs or alcohol from the store, therefore, this information does not mean youth were buying substances from retail illegally.

It would be helpful to have further conversations with young people in the community about their access points for alcohol and other drugs during COVID-19. In particular, how their friends and other people they knew were getting the alcohol and other drugs to sell or give away. Substance use prevention activities that reduce access to drugs and alcohol have been proven to reduce youth substance misuse.

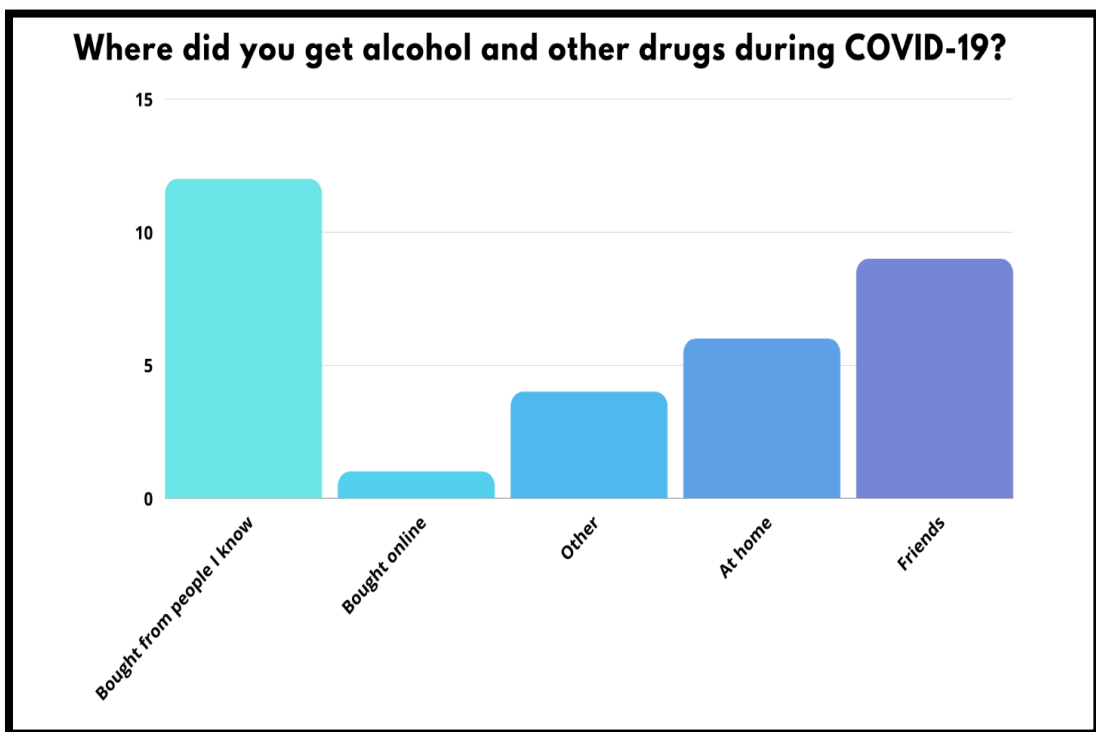


Chart 1.16

Twelve youth survey participants selected that they buy alcohol and other drugs from people they know during COVID-19.

What youth survey participants said about alcohol or other drug use.

- No matter how much you take it will never make your problems go away.
- Peoples' mental health is the most important thing we need to focus on in my opinion.
- The youth need more access to HELPFUL therapy, they need stability and mental health support.
- Drugs and alcohol can make you stop feeling so much. Instead of just trying to take these things away, try to get to the root of why these people want to stop feeling.

Chart 1.17

Selected participant quotes about alcohol and other drug use from the qualitative survey responses.

Recommendations

Community members were willing to take the time to respond to a survey about alcohol and other drug use in Humboldt. However, the survey authors recognize the need to hone the survey format so that future surveys are more accessible and user-friendly. As well, the survey content should be updated to be more inclusive and relevant for LGBTQIA+ and BIPOC+ participants. It is recommended that in the future, more technical assistance and community input be sought for survey content.

Countywide, the substance use prevention, substance use disorder treatment, and harm reduction communities should come together to discuss a local shared vocabulary around alcohol and other drugs that will better enable community conversations.

The substance use prevention, substance use disorder treatment, and harm reduction communities should build partnerships and collaborations with initiatives working to address Adverse Childhood Experiences (ACEs).

It is recommended that the Humboldt Allies for Substance Abuse Prevention coalition expedite rebranding. The coalition could begin work on renaming to reflect the changes that have occurred in prevention since the start of the coalition.

The ASAP coalition and the Substance Use Prevention Program should continue to provide substance use prevention education to parents/caregivers and other concerned adults, as well as youth.

Both the coalition and the Substance Use Prevention Program should increase education and outreach about the value of safe storage and disposal of prescription drugs.

It is recommended that the coalition gather more information on local use of nitrous oxide and explore safe disposal options for nitrous oxide canister litter.

Conclusions

The Humboldt community cares about alcohol and other drug use and misuse, especially when it comes to the health and well-being of young people. As one survey participant explains, “These are complicated issues and I appreciate you reaching out to the community.” Another survey participant writes, “It’s so hard/complex and heartbreaking, but thank you for working on this. It is going to take all of us.”

There is a large amount of room for collaboration and growth even if survey participants do not always agree about vocabulary, language, or methods. Engaging and working with the community is a key to effective prevention activities in Humboldt County. There are immediate and long-term goals best addressed by collaboration with community members who want to be involved with these activities.

For more information about this report, please contact the Substance Use Prevention Program at (707) 268-2132 or publichealthaod@co.humboldt.ca.us.



References

Largusa, Ron. (2019). *Humboldt County substance abuse mortality data report: Drug poisoning and substance use disorder (SUD) Deaths, 2005-2018, version 6/27/2019*. Humboldt County Department of Health and Human Services (DHHS) Public Health Branch. <https://humboldt.gov/DocumentCenter/View/82839/Humboldt-County-Substance-Abuse-Mortality-Data-Report---Drug-Poisoning-and-Substance-Use-Disorder-SUD-Deaths-2005-2018-PDF>

Shehab N, Lovegrove MC, Geller AI, Rose KO, Weidle NJ, Budnitz DS. *US emergency department visits for outpatient adverse drug events, 2013-2014*. JAMA 2016 316: 2115-25.

Teare, C. & Gaines, R. (2018). *Many Californians have coverage, but not care, for mental health conditions*. California Health Care Foundation. <https://www.chcf.org/blog/many-californians-have-coverage-but-not-care-for-mental-health-conditions/#related-links-and-downloads>

Youth.gov. (n.d.). *Risk & Protective Factors*. <https://youth.gov/youth-topics/risk-and-protective-factors>

Appendices

Centers for Disease Control & Prevention, CDC Vital Signs, Adverse Childhood Experiences (ACEs), Preventing Early Trauma to Improve Adult Health.

Your Thoughts on Substance Use in Humboldt Survey-English

Your Thoughts on Substance Use in Humboldt Survey-Spanish

CDC Vitalsigns™

Adverse Childhood Experiences (ACEs) Preventing early trauma to improve adult health



Want to learn more?
www.cdc.gov/vitalsigns/aces

1 in 6

1 in 6 adults experienced four or more types of ACEs.

5 of 10

At least 5 of the top 10 leading causes of death are associated with ACEs.

44%

Preventing ACEs could reduce the number of adults with depression by as much as 44%.

Overview:

Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance use problems. Toxic stress from ACEs can change brain development and affect how the body responds to stress. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. However, ACEs can be prevented.

Preventing ACEs can help children and adults thrive and potentially:

- Lower risk for conditions like depression, asthma, cancer, and diabetes in adulthood.
- Reduce risky behaviors like smoking, and heavy drinking.
- Improve education and job potential.
- Stop ACEs from being passed from one generation to the next.



PROBLEM:

Adverse Childhood Experiences impact lifelong health and opportunities.

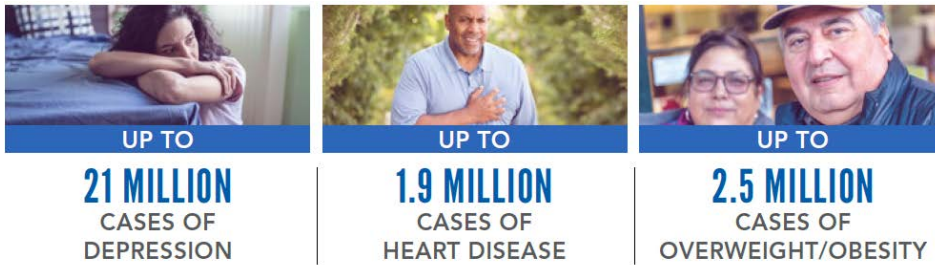
ACEs are common and the effects can add up over time.

- 61% of adults had at least one ACE and 16% had 4 or more types of ACEs.
- Females and several racial/ethnic minority groups were at greater risk for experiencing 4 or more ACEs.
- Many people do not realize that exposure to ACEs is associated with increased risk for health problems across the lifespan.



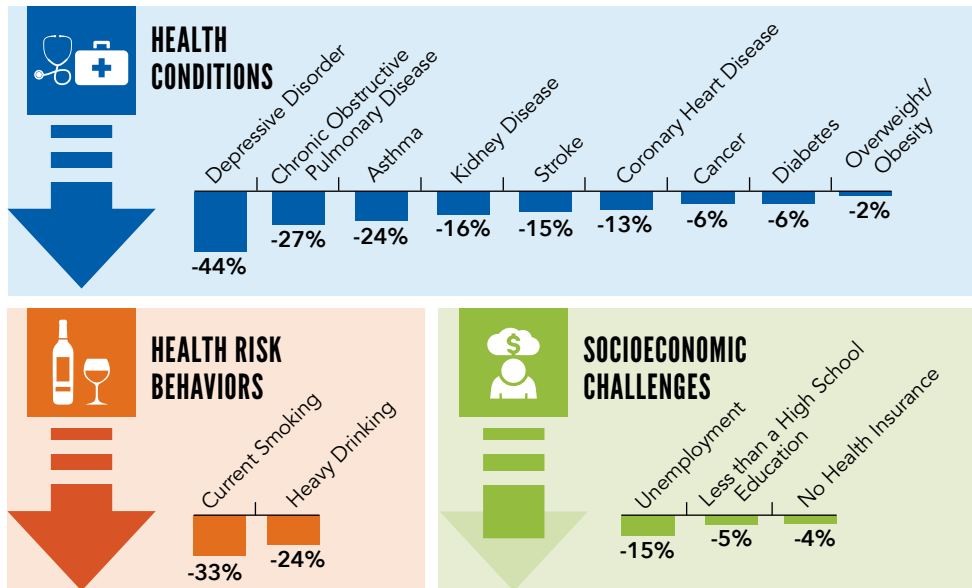
Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

Preventing ACEs could reduce a large number of health conditions.



SOURCE: National Estimates based on 2017 BRFSS; Vital Signs, MMWR November 2019.

Potential reduction of negative outcomes in adulthood



SOURCE: BRFSS 2015-2017, 25 states, CDC Vital Signs, November 2019.



Raising awareness about ACEs can help:

- Change how people think about the causes of ACEs and who could help prevent them.
- Shift the focus from individual responsibility to community solutions.
- Reduce stigma around seeking help with parenting challenges or for substance misuse, depression, or suicidal thoughts.
- Promote safe, stable, nurturing relationships and environments where children live, learn, and play.

THE WAY FORWARD >>>

HEALTHCARE PROVIDERS CAN:

- Anticipate and recognize current risk for ACEs in children and history of ACEs in adults. Refer patients to effective services and support.
- Link adults to family-centered treatment approaches that include substance abuse treatment and parenting interventions.

EMPLOYERS CAN:

- Adopt and support family-friendly policies, such as paid family leave and flexible work schedules.

STATES AND COMMUNITIES CAN:

- Improve access to high-quality childcare by expanding eligibility, activities offered, and family involvement.
- Use effective social and economic supports that address financial hardship and other conditions that put families at risk for ACEs.
- Enhance connections to caring adults and increase parents' and youth skills to manage emotions and conflicts using approaches in schools and other settings.

EVERYONE CAN:

- Recognize challenges that families face and offer support and encouragement to reduce stress.
- Support community programs and policies that provide safe and healthy conditions for all children and families.

<http://go.usa.gov/xVvqD>

For more information

1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 | Web: www.cdc.gov

Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Publication date: November 5, 2019 CS310418

Hello:

You are invited to participate in our survey. In this survey, you will be asked questions about drug, alcohol, and tobacco use in Humboldt County.

Your participation in this study is completely voluntary. There are no foreseeable risks associated with this project. However, if you feel uncomfortable answering any questions, you can withdraw from the survey at any point. It is very important for us to learn your opinions.

Your survey responses will be strictly confidential and data from this research will be reported only in the aggregate. Your information will be coded and will remain confidential. If you have questions at any time about the survey or the procedures, you may contact Katie Jo Slaughter by email at publichealthaod@co.humboldt.ca.us or by calling 707-268-2132.

Thank you very much for your time and support. Please start with the survey now by clicking on the **Continue** button below.

What area of Humboldt County do you live in?

- Arcata
 - Blue Lake
 - Eastern Humboldt (east of Blue Lake)
 - Eel River Valley (Fortuna, Ferndale, Rio Dell, Scotia)
 - Eureka
 - Highway 36 area
 - Northern Humboldt (north of McKinleyville)
 - Southern Humboldt (south of Eel River Valley)
 - McKinleyville
-

* Where do you go for information about alcohol or other drugs? (Mark your top three sources of information).

- Family
- Friends
- Work friends or colleagues
- School friends or fellow students
- Radio
- Websites
- Facebook
- Instagram
- TikTok
- Other social media
- Newspaper
- Community presentations
- YouTube
- Email Newsletter
- Other

Other

How much of a problem are these substances for YOUTH in Humboldt County? (Under age 25).

	A Big Issue	A Medium Issue	A Small Issue	Not an Issue
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tobacco (smoking or vaping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cannabis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescription drugs (misuse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalants (For example, nitrous oxide, solvents, aerosols, glues, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over the counter medications (Misuse. For example, cough syrup or cold medications)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illegal opioids (For example, heroin, fentanyl, non-prescription methadone, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ecstasy, LSD, or other psychedelics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How much of a problem are these substances for ADULTS in Humboldt County? (Over age 25).

	A Big Issue	A Medium Issue	A Small Issue	Not an Issue
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tobacco (smoking or vaping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cannabis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescription drugs (misuse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalants (For example, nitrous oxide, solvents, aerosols, glues, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over the counter medications (Misuse. For example, cough syrup or cold medications)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illegal opioids (For example, heroin, fentanyl, non-prescription methadone, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ecstasy, LSD, or other psychedelics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* What do you think most contributes to youth use of alcohol and drugs?

- Youth do not believe drug use is harmful (For this answer, drugs means all drugs but cannabis)
- Parents/guardians do not believe drug use is harmful (For this answer, drugs means all drugs but cannabis)
- Substances are available to youth
- Lack of enforcement of alcohol purchasing laws (for retailers)
- Lack of other activities for youth
- Other
- Lack of substance use prevention education for youth
- Lack of substance use prevention education for parents/guardians
- Bullying or other violence
- Youth do not believe cannabis use is harmful
- Parents/guardians do not believe cannabis use is harmful
- Youth do not believe alcohol use is harmful
- Parents/guardians do not believe alcohol use is harmful

Other

What do you think would help the most to reduce youth alcohol and substance use in your community?

- More activities for youth
- Education and information for adults and youth about alcohol and substance use
- Help getting people out of poverty
- Mental health support
- Improved law enforcement practices related to alcohol and drug use
- Better access to treatment for drug or alcohol use that causes harm
- Teach youth how to refuse alcohol or drugs
- Support youth led prevention
- Restrict advertisements for alcohol, tobacco, and other drugs
- More people working together to prevent alcohol and drug use
- More drunk/drugged driving prevention
- Other
- Reduce adverse childhood experiences (These experiences can include things like physical and emotional abuse, neglect, and household violence. There are many types of adverse childhood experiences that can affect health and well-being).

Say more:

Say more:

Other

Do you think that people in Humboldt know that the way they store and dispose of prescription drugs can influence prescription drug misuse?

- Yes
 - No
 - Not sure
-

Are you a parent or guardian of a school-aged child (ages 5 through 18)?

- Yes
 - No
-

How old are you?

- 14 or younger
 - 15-18
 - 19-25
 - 26-64
 - 65+
-

Questions for adults only

I am comfortable allowing my teen and their friends (or teens, in general, if you are not a parent of a teen) to drink alcohol in my home as long as I take car keys and feel everyone is safe.

- Agree
- Disagree
- Other

Please explain

I believe that underage drinking is a rite of passage.

- Yes
- No
- Other

Please explain

I am comfortable allowing my teen and their friends (or teens, in general, if you are not a parent of a teen) to use cannabis in my home as long as I take car keys and feel everyone is safe.

- No
- Yes
- Other

Please explain

I believe that using cannabis is a rite of passage.

- Yes
- No
- Other

Please explain

I am comfortable allowing my teen and their friends (or teens, in general, if you are not a parent of a teen) to use tobacco in my home.

- Yes
- No
- Other

Please explain

I believe that underage tobacco use is a rite of passage.

- Yes
- No
- Other

Please explain

Please add anything you would like to share about alcohol and drug use prevention:

Youth Survey

How has your mental health been during Covid-19? (Over the past year).

- My mental health feels worse than before
 - My mental health has been about the same
 - My mental health has been better than before
-

What would be most helpful for you right now?

- Substance use treatment information
- Suicide prevention information
- General mental health information
- Alcohol and other drug information (things to read, videos, websites, etc)
- Alcohol and other drug education
- Other

Please explain

Do you use drugs, tobacco or alcohol?

- Yes
 - No
-

Thank you for taking this survey. The information will be used to create prevention activities that help our community. Below are links to resources that you may find helpful for yourself or your friends or family.

Resources:

- o California College Pathways <http://www.student.cacollegepathways.org/>
 - o Resources for Parenting Foster Youth
<https://www.jbaforyouth.org/resources-for-parenting-foster-youth/>
 - o Crisis Text Line <https://www.crisistextline.org/>
 - o National Suicide Prevention Lifeline <https://suicidepreventionlifeline.org/>
 - o Advocates for Youth (reproductive and sexual health information)
<https://www.advocatesforyouth.org/issues/>
 - o North Coast Rape Crisis Team <https://www.ncrct.org/>
 - o Love Is Respect <https://www.loveisrespect.org/>
 - o National Runaway Safeline <https://www.1800runaway.org/>
-

Youth Survey Part 2

Please indicate whether your substance use has changed at all since the Covid-19 pandemic started.

	I still do not use this substance	My use has not changed	I use more of this substance now	I use less of this substance now
Alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cannabis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vaping (of anything)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Methamphetamine/Meth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other stimulants (uppers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hallucinogens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Where do you get drugs/alcohol during Covid-19?

- At home
- Friends
- Buy from people I know
- Buy online
- Other

Please explain

Is there anything else you would like to say about alcohol or drug use?

Thank you for taking this survey. The information will be used to create prevention activities that help our community. Below are links to resources that you may find helpful for yourself or your friends or family.

Resources:

- o California College Pathways <http://www.student.cacollegepathways.org/>
- o Resources for Parenting Foster Youth
<https://www.jbaforyouth.org/resources-for-parenting-foster-youth/>
- o Crisis Text Line <https://www.crisistextline.org/>
- o National Suicide Prevention Lifeline <https://suicidepreventionlifeline.org/>
- o Advocates for Youth (reproductive and sexual health information)
<https://www.advocatesforyouth.org/issues/>
- o North Coast Rape Crisis Team <https://www.ncrct.org/>
- o Love Is Respect <https://www.loveisrespect.org/>
- o National Runaway Safeline <https://www.1800runaway.org/>

Hola:

Está invitado a participar en nuestra encuesta. En esta encuesta, se le harán preguntas sobre el consumo de drogas, alcohol y tabaco en el condado de Humboldt.

Su participación en esta encuesta es completamente voluntaria. No hay riesgos previsibles asociados con este proyecto. Sin embargo, si no se siente cómodo respondiendo alguna pregunta, puede retirarse de la encuesta en cualquier momento. Es muy importante para nosotros conocer sus opiniones.

Sus respuestas a la encuesta serán estrictamente confidenciales y los datos de esta investigación se informarán solo en conjunto. Su información será codificada y permanecerá confidencial. Si tiene preguntas en cualquier momento sobre la encuesta o los procedimientos, puede comunicarse con Katie Jo Slaughter por correo electrónico a publichealthaod@co.humboldt.ca.us o llamando al 707-268-2132.

Muchas gracias por su tiempo y apoyo. Comience con la encuesta ahora haciendo clic en el botón Continuar a continuación.

¿En qué área del condado vive?

- Eureka
 - Arcata
 - McKinleyville
 - Eel River Valley (Fortuna, Ferndale, Rio Dell, Scotia)
 - Área de la carretera 36
 - Humboldt del Este
 - Humboldt del Sur
 - Humboldt del Norte
-

* ¿A dónde va usted para obtener información sobre alcohol u otras drogas? (marque las 3 principales fuentes de información)

- Familia
- Amigos
- Facebook
- Instagram
- Otras redes sociales
- Radio
- Sitios web
- Amigos o colegas del trabajo
- Periódico
- Presentaciones
- Vídeos cortos – YouTube
- Boletín de correo electrónico
- Other

Other

¿Cómo tan problemáticas son estas sustancias por los adultos en el condado de Humboldt?

	Un gran problema	Un problema medio	Un pequeño problema	No es un problema
Consumo de alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de tabaco (fumar o vapear)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de cannabis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo indebido de medicamentos recetados	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medicamentos de venta libre (por ejemplo, jarabe para la tos o medicamentos para el resfrío)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opioides ilegales (por ejemplo, heroína, fentanilo, metadona sin receta)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inhalantes (por ejemplo: Óxido nítrico, disolventes, aerosoles, pegamentos, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de metanfetaminas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Éxtasis, LSD u otros psicodélicos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

¿Cómo tan problemáticas son estas sustancias por los jóvenes en el condado de Humboldt?

	Un gran problema	Un problema medio	Un pequeño problema	No es un problema
Consumo de alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de tabaco (fumar o vapear)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de cannabis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo de metanfetaminas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumo indebido de medicamentos recetados	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medicamentos de venta libre (por ejemplo, jarabe para la tos o medicamentos para el resfrío)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opioides ilegales (por ejemplo, heroína, fentanilo, metadona sin receta)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inhalantes (por ejemplo: Óxido nitroso, disolventes, aerosoles, pegamentos, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Éxtasis, LSD u otros psicodélicos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Otros: Por favor, enumere	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

En su opinión, ¿qué contribuye más a que los jóvenes consumen alcohol o drogas?

- Los adolescentes no creen que el consumo de alcohol sea dañino en menores de edad
- Los adultos y los minoristas hacen que las sustancias sean accesibles a los adolescentes
- Falta de leyes o aplicación de las leyes de compra de alcohol
- Los padres no creen que beber sea dañino
- Otros

Otros

En su opinión,
¿qué contribuye más a que los jóvenes consumen cannabis?

- Los adolescentes no creen que el consumo de cannabis sea dañino en menores de edad
- Los padres no creen que el consumo de cannabis sea dañino
- Los adultos hacen que el cannabis sea accesible a los adolescentes
- Otros

Other

En su opinion, ¿qué contribuye más a que los jóvenes consumen otras drogas?

- Los adolescentes no creen que el consumo de drogas sea dañino
- Los padres no creen que el consumo de drogas sea dañino en menores de edad
- Los adultos hacen que las drogas sean accesibles a los adolescentes
- Otros

Por favor explique

¿Qué cree que ayudaría más a reducir el consumo de alcohol y sustancias en su comunidad?

- Educación e información para adultos y jóvenes sobre el consumo de alcohol y sustancias
- Ayudar a sacar a la gente de la pobreza
- Apoyo de salud mental
- Mejor cumplimiento de la ley
- Mejor acceso a tratamientos por consumo de alcohol y otras drogas
- Enseñar a los jóvenes a rechazar el alcohol y las sustancias
- Apoyar la prevención dirigida por los estudiantes
- Restringir la publicidad de sustancias
- Colaboración en la comunidad para prevenir el consumo de alcohol y sustancias
- Más actividades para jóvenes
- Programas específicos de prevención para no conducir ebrios ni drogados
- Otros

Por favor explique

¿Cree que la gente en Humboldt se da cuenta de que la manera en que guardan y desechan los medicamentos recetados puede influir la tasa local de uso indebido de medicamentos recetados?

- Sí
- No
- No estoy seguro(a)

Elija dos áreas que considere prioritarias en el Condado de Humboldt con respecto al consumo de alcohol de los jóvenes

- Prevenir las lesiones relacionadas con el alcohol por conducir en estado de ebriedad
- Prevenir las lesiones relacionadas con el alcohol por nadar o andar en barco en estado de ebriedad
- Reducir la cantidad de anuncios de alcohol que se dirigen a los jóvenes
- Aumentar los impuestos locales sobre el alcohol
- Limitar la cantidad de tiendas de venta minorista de alcohol en el condado
- Formación responsable de servidores para bares y restaurantes que sirven alcohol
- Otros

Por favor explique

Elija dos áreas que considere prioritarias en el Condado de Humboldt con respecto al consumo de cannabis de los jóvenes

- Prevenir las lesiones relacionadas con la conducción bajo la influencia del cannabis
- Utilizar las campañas de los medios de comunicación para aumentar la preocupación pública por el uso de indebido de cannabis por parte de los jóvenes
- Educar a las familias sobre cómo hablar con los jóvenes sobre el uso indebido del cannabis
- Formación responsable para servidores de dispensarios de cannabis
- Otros
- Reducir la cantidad de anuncios de cannabis que se dirigen a los jóvenes

Por favor explique

Elija dos áreas que considere prioritarias en el Condado de Humboldt con respecto al consumo de tabaco de los jóvenes

- Educar a la comunidad sobre el consumo de cigarrillos /vapeo/masticación y las opciones de tratamiento disponibles
- Trabajar para ampliar la educación para la prevención del tabaco/vapeo a más escuelas secundarias y preparatorias del Condado de Humboldt
- Reducir la cantidad de anuncios de tabaco/vapeo que se dirigen a los jóvenes
- Limitar la cantidad de tiendas de venta minorista de tabaco/vapeo en el condado/la ciudad
- Otros

Por favor explique

Elija dos áreas que considere prioritarias en el Condado de Humboldt con respecto al consumo de metanfetaminas de los jóvenes

- Utilizar las campañas de los medios de comunicación para aumentar la preocupación pública por el consumo de metanfetaminas
- Reunir información para averiguar cuán grande es el problema del consumo de la metanfetamina en el Condado
- Educar a la comunidad sobre el consumo de metanfetaminas y las opciones de tratamientos disponibles
- Trabajar para ampliar la educación para la prevención contra las drogas a más escuelas secundarias y preparatorias del Condado de Humboldt
- Reducir el estigma relacionado con el uso indebido y el tratamiento de drogas
- Otros

Por favor explique

¿Es usted padre o tutor de un niño en edad escolar (de 5 a 18 años)?

- Sí
- No

Grupo de edad

- 14 años o menos (edad de la escuela secundaria)
 - 15-18 (edad de la escuela preparatoria)
 - 19-25
 - 26-64
 - 65+
-

Preguntas para adultos solamente

Me siento cómodo(a) permitiendo que mi hijo y sus amigos (o adolescentes, en general, si usted no es un padre de un adolescente) beban alcohol en mi casa. Mientras que yo tomo las llaves del coche, yo siento que todo está seguro.

- Estoy de acuerdo
- No estoy de acuerdo
- Otro

Por favor explique

Creo que el beber en menores de edad es un rito de iniciación.

- Sí
- No
- Otro

Por favor explique

Me siento cómodo(a) permitiendo que mi hijo y sus amigos (o adolescentes, en general, si usted no es padre de un adolescente) usen cannabis en mi casa. Mientras que yo tomo las llaves del coche, yo siento que todo está seguro.

- Sí
- No
- Otro

Por favor explique

Creo que el consumo de cannabis es un rito de iniciación.

- Sí
- No
- Otro

Por favor explique

Me siento cómodo(a) al permitir que mi hijo y sus amigos (o adolescentes, en general, si usted no es un padre de un adolescente) consuman tabaco en mi casa.

- Sí
- No
- Otro

Por favor explique

Creo que el consumo de tabaco en menores de edad es un rito de iniciación.

- Sí
- No
- Otro

Por favor explique

Encuesta de jóvenes

¿Cómo ha estado tu salud mental durante COVID-19?

- Mi salud mental se siente peor que antes
 - Mi salud mental ha sido casi la misma
 - Mi salud mental está mejor que antes
-

¿Qué sería más útil para ti en este momento? (Elegir todas las que correspondan).

- Información sobre el tratamiento del consumo de sustancias
- Información sobre prevención del suicidio
- Información general sobre salud mental
- Información sobre el alcohol y otras drogas (cosas que leer, vídeos, sitios web, etc.)
- Educación sobre el alcohol y otras drogas
- Otros

Por favor explique

¿Usas drogas, tabaco, o alcohol?

- Sí
 - No
-

Recursos:

Trayectos de Universidad de California <http://www.jbaforyouth.org/fy-ed-planning-guide/>

Recursos para la crianza de los Jóvenes de crianza temporal
<https://www.jbaforyouth.org/resources-for-parenting-foster-y>

Línea de texto de crisis <https://www.crisistextline.org/donde-estamos/>

Línea de vida para Prevención del Suicidio

<https://suicidepreventionlifeline.org/help-yourself/en-espanol/>

Equipo de Crisis de Violaciones de la Costa Norte

<https://www.ncrct.org/recursos-2/>

El amor es respeto <https://espanol.loveisrespect.org/>

Encuesta de jóvenes, parte 2

Indica si tu consumo de sustancias ha cambiado desde cuando comenzó la pandemia de COVID-19.

	Todavía no consumo esta sustancia	Mi consumo no ha cambiado	Consumo más de esta sustancia ahora	Consumo menos de esta sustancia ahora
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vapeo (de cualquier cosa)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cannabis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Metanfetamina	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tabaco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Otros estimulantes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicamentos recetados	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alucinógenos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¿Dónde consigues drogas/alcohol durante COVID-19?

- En casa
- De amigos
- Compro a personas que conozco
- Compro en línea
- Otros

Por favor explique

Recursos:

Trayectos de Universidad de California <http://www.jbaforyouth.org/fy-ed-planning-guide/>

Recursos para la crianza de los Jóvenes de crianza

temporal <https://www.jbaforyouth.org/resources-for-parenting-foster-y>

Línea de texto de crisis <https://www.crisistextline.org/donde-estamos/>

Línea de vida para Prevención del

Suicidio <https://suicidepreventionlifeline.org/help-yourself/en-espanol/>

Equipo de Crisis de Violaciones de la Costa

Norte <https://www.ncrct.org/recursos-2/>

El amor es respeto <https://espanol.loveisrespect.org/>
