

Creating Environments Free of Substance Use



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Community Assessment:

Comprehensive Review of Youth Substance Use

Antrim, Charlevoix, and Emmet Counties

2021

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Vision

SAFE in Northern Michigan is working on creating environments free of substance use.

Mission

SAFE in Northern Michigan exists to prevent youth substance use, increase community awareness and create change through collaboration, education, prevention initiatives and environmental strategies of tobacco, alcohol and other substance use in Antrim, Charlevoix and Emmet counties.

Executive Summary:

SAFE in Northern Michigan is a remarkable collaboration throughout Antrim, Charlevoix and Emmet counties, of many local human service agencies, community members, parents and most importantly, youth. Leaders from each organization provided valuable resources and oversight to the coalition. Through collaboration SAFE in Northern Michigan members can reduce youth drug and alcohol use in Antrim, Charlevoix and Emmet counties by identifying resources and increasing public understanding of issues in the community.



Following comprehensive data analysis, summarized below, SAFE has identified alcohol and marijuana as the two substances to address with Drug Free Communities Funding.

According to the 2020 Michigan Profile for Healthy Youth, a comprehensive survey administered by Michigan Department of Education every other year, past 30-day use of alcohol has declined for middle school students (7.0% in 2014 to 2.5% in 2020) as well as high school students (19.9% in 2014 to 18.6% in 2020). Past 30-day use of marijuana has also decreased among both middle school students (1.9% in 2014 to 1.6% in 2020) and high school students (13.9% in 2014 to 13.8% in 2018). Despite these improvements, substance use persists.

The primary root causes contributing to substance use in the three-county area include: easy access to alcohol and marijuana as well as youth demonstrate low perceptions of risk toward underage alcohol and marijuana use. According to the 2020 MiPHY, 57.9% of local high school students reported it was “sort of easy” or “very easy” to get alcohol and 39.9% reported is “sort of easy” or “very easy” to get marijuana. 44.7 % of local high school students who drank recently reported usually getting alcohol from someone giving it to them and 17.7% of high school students who drank recently usually get alcohol from a family member. Youth also demonstrate low perceptions of risk, which drives use rates reported in the 2020 MiPHY: 29.9% of high students reported having 5+ drinks of alcohol once or twice a weekend was not a moderate or great risk behavior and 11.1% of high school student reported riding in motor vehicle driven by someone who had been drinking alcohol one or more times during the past 30 days. Between 2014 and 2020 there was 9.0% decrease in the proportion of high school students who perceive marijuana use to be risky, from 49.8% to 40.8%. Finally, 12.6% students reported that they felt their parents did not feel marijuana use to be “wrong” or “very wrong”. Youth focus group themes reinforce low perceptions of risk: all five groups reported they are not concerned with consequences regarding alcohol use.

The purpose of the assessment is to collect and analyze valuable information on youth substance use and related behaviors in the three counties our coalition service. The assessment is important to laying the groundwork for a success of our coalition today and in the future. Data from this assessment will be used to inform the SAFE in Northern Michigan logic models and strategic action plans.

I. Community Description

A. Geographic Description

SAFE in Northern Michigan serves Antrim, Charlevoix, and Emmet counties, which are in the State's rural "ring finger" region. Two-lane highways, no interstates, wind around inland lakes, ski hills, and golf resorts, connecting nine villages and five small cities. Petoskey, the largest city (population: 5,808), is home to a major hospital and community college and the region's only big box stores. Throughout the three-county service area, there are 17 school districts. Many of the school districts have consolidated down to one or two buildings consisting of K-12th grade, a reflection of the rural nature of the communities.

B. Demographic Description

The U.S. Census Bureau estimates 82,498 people live in the region¹. With an average of 57.2 persons per square mile, the counties are characterized as "rural"². Overall, the population is more homogeneous (95% white; Native Americans, at 2%, are the largest minority) than the State³. Despite slightly higher education levels (18.8% of population has earned Bachelor's Degree, compared to 18.2% statewide), the population is poorer⁴. Median household income is less than Michigan (\$59,584)⁵ in Antrim (\$56,165)⁶, Charlevoix (\$55,760)⁷ and Emmet (\$55,829)⁸ counties.

C. Defining our Community

1. Communities of Place, Interest & Experience

Boating, golf, and camping are leading summer activities. Sailing, kayaking, canoeing, birding, bicycling, horseback riding, motorcycling, and 'off roading' are important avocations. The forest activities are available everywhere. There are a great many and other protected areas which make these parks truly a 'pleasant peninsula.' Fall activities include harvest festivals, seasonal beer and wine events, and fall color tours. Hunting in Northern Michigan is a popular fall pastime. There are seasons for bow hunting and a muzzle-loader season as well as for using modern rifle season. The opening day of deer season (November 15) is a major day for some residents. Some schools close November 15, due to low attendance because of the opening day of deer season.

In winter, downhill skiing, snowboarding and ice fishing are very popular. Another popular sport, snowmobiling, also called sledding, is enjoyed by the locals and draws many visitors to Northern Michigan. There are hundreds of miles of interconnected groomed trails cross the region.

2. Communities Within our Community:

Tourism is the dominant industry, producing mostly low-wage, seasonal jobs. The region has a significant seasonal population much like other regions that depend on tourism as their main industry. Overall, median incomes are lower and unemployment rates are higher in the three-county region when compared to the State rates. Workers typically live inland where housing is more affordable. The tradeoff is the need for a vehicle, and money for gas, to travel to town for work or school, shopping or services. (Public transportation options are limited across the region).

II. Community History:

A. Historical Origins of Community

¹ U.S. Census Bureau, 2010 Census

² U.S. Census Bureau, 2010 Census

³ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

⁴ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

⁵ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

⁶ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

⁷ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

⁸ U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates

History of Northern Michigan: Antrim, Charlevoix, and Emmet Counties

Northern Michigan is at the top of the Michigan mitten. Its northern tip bumps into the Straits of Mackinac and Lake Michigan outlines its western boundary. At first, Ottawa Indians, occupied the lake shore rim. Beyond the water's edge there were only the forest, the lakes, the streams, and some swamps dismal enough to discourage a traveling bear. Its strategic location on the Great Lakes waterways, however, marked it for early discovery by white men and the point of control for the whole upper Great Lakes territory.

Northern Michigan, also known as Northern Lower and Upper Michigan (known colloquially to residents of more southerly parts of the state and summer residents from cities such as Chicago as "up north"). The effect of rail connections was ultimately transformative; timber and other goods could be produced in the north and shipped to urban markets to the south. Industries such as iron works, tanneries, mills, cement plants, and agricultural enterprises developed. Rail connections to the large Midwestern cities through rail centers like Kalamazoo led to settlers immigrating and wealthy resorters establishing summer home associations in Bay View Association near Petoskey, the Belvedere Club in Charlevoix, and other lakeside getaways. By 1885, the intense harvesting and export of pine trees led to visible decline in the lumber industry. As the lumber supply began to run out in Northern Michigan, the rail lines began to promote Northern Michigan as a "fresh air" resort destination. Starting in 1875 (until 1895) the 1,044-acre (422 ha) Mackinac National Park became the second National Park in the United States after Yellowstone National Park in the Rocky Mountains.

The Resort era flourished in lakeside areas of Northern Michigan even as the fishing and lumbering industries experienced slow decline. Ernest Hemingway also documented turn-of-the-century life in Northern Michigan through his "Nick Adams" stories; Hemingway's own parents were restorers, wintering in Oak Park, Illinois but summering in the Windemere cottage on Walloon Lake starting in 1899.

As lumbering died down, many parts of Northern Michigan returned to their forested state through conservation efforts. State Parks were established as well, which continued to bring tourist to Northern Michigan.

B. Historical origin of related issues

SAFE in Northern Michigan was organized in 2007 as a community response after local students ranked youth substance use as a top priority for action. Since then, the number of students, schools, and adults engaged in the coalition has grown each year. In 2015 SAFE was awarded a Drug-Free Communities (DFC) grant, increasing capacity and reach from one county to three. Currently, over 100 youth are active in SAFE, representing nearly every school in the rural three-county area. Youth are the center of the coalition and make up for over 50% of the coalition membership (109 youth/48 adults). Youth members are diverse socioeconomically, academically, and geographically.

SAFE's mission is to prevent youth substance use, increase community awareness, and create change through collaboration, education, prevention initiatives and environmental strategies to reduce tobacco, alcohol, and other substance use in Antrim, Charlevoix, and Emmet counties (located in the rural "ring finger" region of the Lower Peninsula). A challenge to fulfilling the SAFE mission is assuring all adult coalition members are adequately trained in evidence-based substance use strategies. Many are unable to participate because they cannot afford the time away from work to travel to trainings, currently convened downstate a four-hour drive one way.

SAFE utilizes evidence-based approaches to define its work: The Strategic Prevention Framework provides an effective planning model and the Seven Strategies for Community Change guide implementation based upon data-driven logic models. Logic models are informed by qualitative and quantitative data; youth select SAMHSA-developed strategies that are focused at both individual and environmental levels to achieve lasting community change. The coalition is organized around five integrated processes: In **Assessment** data is analyzed from a wide range of secondary sources as well as primary data collection methods such as focus groups and key informant interviews. **Capacity** focuses on engaging the cross-sector partners required to address the complex community problem of youth substance use. **Planning** ensures the implementation of the SAFE mission by updating logic

models with current data and collaboratively developing action plans based on local conditions. In **Implementation**, SAFE maintains fidelity with planned adaptations to meet current community needs. **Evaluation** is completed in each phase to make needed mid-cycle adjustments.

Over the past five years, SAFE has utilized best practices to meet and exceed goals of the DFC Support Program and has been recognized numerous times, including being selected to present a poster at the CADCA National Leadership Forum in 2019; serving on the DFC National Evaluation Team Site Visit in 2020, and being selected to participate in CADCA's Graduate Coalition Academy in 2020. The number of active members in SAFE has grown significantly among youth members (from 82 in 2016 to 109 in 2020) and adults (from 32 in 2016 to 48 in 2020). Most importantly, substance use among high school and middle school students in the three-county area has decreased.

III. Community Needs:

A. Data Collection Methods:

SAFE in Northern Michigan uses both quantitative data and qualitative data collection methods for our local needs assessment.

Quantitative Data Sources:

- **Michigan Profile for Healthy Youth (MiPHY):** The Michigan Profile for Healthy Youth is an online student health survey offered by the Michigan Departments of Education and Health and Human Services to support local and regional needs assessment. The MiPHY provides student results on health risk behaviors including substance use, violence, physical activity, nutrition, sexual behavior, and emotional health in grades 7, 9, and 11. The survey also measures risk and protective factors most predictive of alcohol, tobacco, and other drug use and violence. MiPHY results, along with other school-reported data, will help schools make data-driven decisions to improve prevention and health promotion programming. The MiPHY went live beginning with the 2007-2008 school year.⁹
- **Emmet/Charlevoix Probate Court:** Local Probate court data is collected through law enforcement representatives that serve on the SAFE in Northern Michigan Coalition.
- **Behavioral Risk Factor Surveillance System (BRFSS)**- The BRFSS is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Established in 1984 with 15 states, BRFSS now collects data in all 50 states as well as the District of Columbia and three U.S. territories. BRFSS completes more than 400,000 adult interviews each year, making it the largest continuously conducted health survey system in the world.
- **State of Michigan, Marijuana Regulatory Agency Reports:** The Michigan Marijuana regulatory Agency publishes a monthly report that contains the following information that SAFE uses:
 - The number of qualifying patients and primary caregivers approved in each county.¹⁰
- **National Survey on Drug Use and Health:** The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States. NSDUH began in 1971 and is currently conducted on an annual basis.

Qualitative Data Sources:

For our qualitative data section, we completed 13 focus groups in 2016 with high school youth in Antrim, Charlevoix, and Emmet counties. In 2018 and 2020 we completed 8 focus groups with high school youth in Antrim, Charlevoix, and Emmet counties. Youth from multiple school districts within Antrim, Charlevoix, and

⁹ Michigan Department of Education, Michigan Profile for Healthy Youth, 2020

¹⁰ State of Michigan, Marijuana Regulatory Agency Reports, 2021

Emmet counties participated in the focus groups. These students participate in the SAFE in Northern Michigan Coalition. Focus group participants were included both genders, representatives from all grades 9-12, multiple races/ethnicities, students multiple school districts within each county, and multitude of students from different academic achievement levels.

Additional qualitative data methods used by the coalition include community forums/town hall meetings, environmental scans and key informant interviews.

B. Consequences:

Health, financial, educational, social, and legal consequences of substance misuse are seen across the SAFE region. Below is a list of consequences of misuse of alcohol and marijuana.

Youth who drink alcohol are more likely to experience school problems, such as higher absence and poor or failing grades; legal problems; unwanted, unplanned, and unprotected sexual activity; higher risk for suicide and homicide; alcohol-related car crashes and other unintentional injuries; memory problems. And, youth marijuana use can have a serious impact on a teens' lives and can lead to decline in school performance; increased risk of mental health issues; impaired driving; and problems with memory and learning¹¹.

These outcomes are evident in the three-county area. **School problems**, for example, include lack of graduation among ninth-grade cohort within four years (11.0%)¹²; dropping out of high school (4.3%); and not meeting college readiness benchmarks (58.6%)¹³. **Unplanned and unprotected sexual activity** is reflected in the proportion of live births to teens under age 20 (5.6%). Local students experience behavioral health issues putting them at **higher risk for suicide**, including the proportion of high school students who felt unsafe at school during the past year (6.3%)¹⁴; the proportion of high school students who experienced major depression in past year (54.0%)¹⁵; and proportion of youth who attempted suicide in the past year (9.6%)¹⁶. SAFE is also concerned that social distancing required to prevent spread of the coronavirus pandemic will further exacerbate these problems.

C. Problem Behaviors:

Current Youth Substance Use Problems in the Community: From a wide range of secondary sources, SAFE monitors use rates; analyzes perception of risk, and peer/parental disapproval for alcohol, tobacco, marijuana, and prescription drugs; and tracks impact of substance use in the community. SAFE also conducts extensive primary research, including at least five focus groups of high school youth; key informant interviews with representatives from 12 sectors; and annual environmental scans of alcohol and tobacco retailers. Finally, time is dedicated at monthly SAFE meetings for students to report perceptions on substance use trends among their peers as well as feedback SAFE projects implemented at schools.

Current Substance Use in the SAFE Region

		Past 30-Day Use	Perception of Risk/ Harm of Use	Perception of Parental Disapproval of Use	Perception of Peer Disapproval of Use
High School	Alcohol	18.6%	70.1%	96.1%	76.6%
	Marijuana	13.8%	40.8%	87.4%	61.1%
	Tobacco	4.8%	83.8%	95.7%	77.4%
	Prescription Drugs	2.5%	80.9%	97.4%	88.5%
Source(s): Michigan Department of Education, 2020 Michigan Profile for Healthy Youth, Antrim, Charlevoix and Emmet Counties Report					

¹¹ U.S. Centers for Disease Control and Prevention, *What You Need to Know About Marijuana Use in Teens* Fact Sheet, retrieved March 28, 2020.

¹² Robert Wood Johnson Foundation, *County Health Rankings*, 2019, retrieved March 28, 2020.

¹³ The Annie E. Casey Foundation, *Kids Count Data Center*, 2019, retrieved March 28, 2020.

¹⁴ Michigan Department of Education, *Michigan Profile for Healthy Youth*, County Reports for Substance Use, June 2020

¹⁵ Michigan Department of Education, *Michigan Profile for Healthy Youth*, County Reports for Substance Use, June 2020

¹⁶ Michigan Department of Education, *Michigan Profile for Healthy Youth*, County Reports for Substance Use, June 2020

Themes related across all youth focus groups include: **Alcohol** was used frequently, and students were drinking routinely before and after school events and on the weekends. **Marijuana** was one of the most frequently used drugs among youth. Use pattern for marijuana is different from alcohol though, with use daily or frequently and not just around events. While **conventional tobacco use** is down, especially since the national enactment of Tobacco 21, use of electronic devices and vapes is up.

There are three primary root causes to substance use in the three-county area: First, there is a **culture of substance use** in Northern Michigan. Adult rates in the Health Department of Northwest Michigan, which includes the three-county SAFE area, exceed Michigan rates for heavy drinking of alcohol in the past 30-days, at 10.1% vs state at 6.7%¹⁷, providing negative role models for youth. A recent law permitting medical and recreational use of marijuana also contributes to normalization of substance use. The region attracts visitors year-round with beaches, lakeside towns, and golf and ski resorts. There is even a local saying that sums up the party atmosphere among visitors: “Come up for vacation, go home on probation”.

Second, there is **easy access to substances**. According to the 2020 MiPHY, 57.9% of local high school students reported it was “sort of easy” or “very easy” to get alcohol and 39.9% reported is “sort of easy” or “very easy” to get marijuana. 44.7% of local high school students who drank recently reported usually getting alcohol from someone giving it to them and 17.7% of high school students who drank recently usually get alcohol from a family member. Similarly, SAFE focus group members reported older friends, siblings, or a “go to” person at school are willing to buy or provide marijuana. One focus group reported that some youth obtain marijuana from their parents/parents of their peers, who grow and/or use marijuana themselves.

Third, **youth demonstrate low perceptions of risk**, which drives use rates reported in the 2020 MiPHY: 29.9% of high students reported having 5+ drinks of alcohol once or twice a weekend was not a moderate or great risk behavior and 11.1% of high school student reported riding in motor vehicle driven by someone who had been drinking alcohol one or more times during the past 30 days. Between 2014 and 2020 there was 9.0% decrease in the proportion of high school students who perceive marijuana use to be risky, from 49.8% to 40.8%. Finally, 12.6% students reported that they felt their parents did not feel marijuana use to be “wrong” or “very wrong”. Youth focus group themes reinforce low perceptions of risk: all five groups reported they are not concerned with consequences regarding alcohol use. In two focus groups, members reported drinking alcohol on weekends at recreational sites and did not see a risk in their actions being discovered by adults or law enforcement. In addition, youth focus groups described marijuana use as “normal”. Although fewer students are abusing **prescription drugs**, one focus group reported youth are not concerned with the health consequences of consuming mixed prescription drugs. Indeed, they described “skittles” parties where various medications are tossed in a bowl and consumed by the handful.

Following comprehensive data analysis, SAFE identified alcohol and marijuana as the two substances to address with DFC funding.

Community Resources:

Coalition Resources: SAFE in Northern Michigan consists of collaborative relationships across the three-county area. These partnerships include representatives from all 12 sectors in the community, including, two local hospitals, the local tribe (Little Traverse Bay Band of Odawa Indians), intermediate school districts, local businesses, media, youth serving organizations, law enforcement, substance use coordinating agencies, substance use treatment facilities, local government, religious organizations, civic organizations, parents and youth. To make the most of limited resources, these partners have developed positive working relationships to tackle complex community problems such as substance abuse.

Our local health department provides substance abuse prevention curriculum at our local schools, works with schools on tobacco policies, provides tobacco/alcohol retail education along with tobacco compliance checks, completes prescription drug presentations and provides mental health first aid training to teachers, counselors and other community members working with teens. Our local hospital hosts prescription collection events twice a year and tobacco curriculum in the schools. Local churches

¹⁷ Michigan Department of Health and Human Services, *Michigan Behavioral Risk Factor Survey*, August 2019, retrieved May 18, 2020.

and the YMCA offer drug-free events to teens on a regular basis. Our local tribe participates with our coalition and collaboratively projects are reviewed. We have a State Police, Community Officer that works within the schools and the community to provide resources. All three of our counties have local foundations that are active and supportive of our coalition. Community resources change from time to time and our coalition will continue to research this on a regular basis.

Youth and Family Resources:

Charlevoix, Antrim, and Emmet County fall within the MiThrive Community Health Assessment Region. The MI Thrive project brings diverse partners together to assess community needs and collaborate for community health improvement in the 31 counties of the Northern Michigan Public Health Alliance. The MI Thrive Community Assessment assesses strengths of the community - creating an opportunity to build on what we already have. The following are reporting strengths identified by community members.



A. Gaps in Resources:

As described in the Youth and Family Resources section, Charlevoix, Antrim, and Emmet County fall within the MiThrive Community Health Assessment Region. After assessing health and wellbeing in Northern Michigan over the past year, the following was gathered:

Residential Input- residents want:

- Residents said when it came to supporting their health, they want better:
- Access to mental health providers
- Access to substance use treatment
- Response to the opioid crisis and other drugs
- Anti-tobacco policies
- Response to drunk driving

With the rising severity of these issues, more organizations and coalitions are working on Mental Health/Substance Use than ever before. Some examples of these efforts include our coalition, SAFE in NM; Northern Michigan Opioid Response Consortium; Adolescent Centers; Local Health Departments; and Community Connections program through the Community Health Innovation Region. With increased coordination among groups, the potential for significant impact is growing.

IV. Problem/Goal Statements:

As previously described, the top three most frequently used substances, as reported by high school

students from Antrim, Charlevoix and Emmet counties during the 2019/2020 academic year were ranked as follows:

1. Alcohol
2. Electronic Nicotine Devices (ENDS)/Vapes
3. Marijuana

Although the Drug Free Communities grant does recommend focusing on youth prescription drug abuse prevention, our data does not support widespread efforts towards this problem area, as our rates are low. In the SAFE region prescription drug abuse, has remained relatively low among youth and has continued to decrease between 2014 and 2018. As previously mentioned, Per the MiPHY, we have seen a steady decrease throughout our region in the percentage of students who took painkillers such as OxyContin, Codeine, Vicodin, or Percocet without a doctor's prescription during the past 30 days between 2014-2020, 5.7% (2014), 4.9 (2016), 1.9 (2018) and 2.5% (2020) .¹⁸ We will continue to monitor prescription drug trends in our community and adjust as necessary.

Drug	Problem Statement	Why is this a priority?	Goal Statement
Alcohol	Alcohol use for ages 14-20 in Antrim, Charlevoix and Emmet counties.	Underage drinking rates in the SAFE region are concerning, as 18.6% of high school youth reporting drinking alcohol in the past 30 days. Additionally, approximately 3 out of 10 students in the region do not view using alcohol as risky.	Decrease underage alcohol use by 2% from 18.6% in 2020 to 16.6% in 2022 as measured by Antrim, Charlevoix and Emmet County High School students reporting "alcohol use in the past 30 days" on the MiPHY.
Marijuana	Marijuana use for ages 14-20 in Antrim, Charlevoix and Emmet counties.	Overall, marijuana use rates among youth in our community remain concerning. After close review, it is easy to see the sharp decline in the number of youth who perceive marijuana use to be risky. Overwhelmingly, marijuana use rates are a hot topic of discussion at substance use prevention meetings, because it is becoming clear that there is a general increase in cultural acceptance of the drug. This normalization of marijuana is furthered by the legalization of recreational and medical marijuana in the state of Michigan. SAFE coalition members report anecdotally that many parents are open about using marijuana on a regular basis, and high school students and staff are reporting student access is getting easier and use is more acceptable. Among all four substances presented here, the perception of peer disapproval of use is lowest for marijuana.	Decrease current marijuana use among youth by 2% from 13.8% in 2020 to 11.8% in 2022 in Antrim, Charlevoix and Emmet counties; measurement: high school students reporting "marijuana use in the past 30 days" from the MiPHY survey.

¹⁸ Michigan Profile for Healthy Youth, 2014, 2016, 2018, 2020