



## Comprehensive Community Prevention Plan 2021-2024

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Contents

Executive Summary ..... 4
Strategic Prevention Framework ..... 5
Risk and Protective Factors/Developmental Assets and Deficits ..... 8
Assessment – Needs ..... 12
General Findings ..... 14
Lifetime Use ..... 15
Frequency of Use..... 18
Mental Health Wellness..... 20
Capacity – Service Area ..... 23
Awareness of Problems ..... 24
Community Conditions..... 25
Family Conditions ..... 28
School Conditions..... 29
Readiness to Change..... 30
Resource Assessment ..... 35
Planning..... 36
Priority 1: Reduce Access to Alcohol, Tobacco, Marijuana, Methamphetamines, and Opioids ..... 37
Priority 2: Intervention for Substance Misuse ..... 38
Priority 3: Support Mental Wellness..... 39
Priority 4: Support Educational Attainment..... 40
Priority 5: Reduce Isolation ..... 41
Priority 6: Promote Physical Wellness ..... 42
Implementation..... 43
Evaluation ..... 46
Appendix A – Data ..... 54
About Data Sources..... 54
Domain: Community..... 55
Low Cost of Alcohol..... 56

Community Laws and Norms Favorable to Use.....	56
High Availability of Substances .....	62
Alcohol Access.....	62
Tobacco Access .....	62
Marijuana Access.....	63
Prescription and Other Drug Access.....	64
Media Portrayal of Alcohol Use .....	65
Low Neighborhood Attachment .....	66
Low Socioeconomic Status .....	67
Transitions and Mobility .....	68
Being a Victim of Violence (other than at home).....	69
Domain: School.....	71
Academic Failure Beginning in Late Elementary School .....	73
Lack of Commitment to School .....	74
Domain: Family.....	76
Family Management Problems .....	76
Family Conflict.....	79
Favorable Parental Attitudes.....	80
Family History of Substance Misuse .....	84
Domain: Individual/Peer .....	84
Early Initiation of Substance Use.....	85
Rebelliousness .....	90
Favorable Attitudes Toward Substance Use.....	93
Peer Substance Use .....	96
Health and Physical Wellness.....	99
Adult Mental and Behavioral Health Indicators .....	103
<b>Appendix B – Hypothetical Vignettes.....</b>	<b>106</b>
<b>Appendix C – Sources.....</b>	<b>111</b>

## Executive Summary

This Comprehensive Community Prevention Plan (CCPP) covers the timeframe from 2021-2024. This publication was supported in whole or in part by the Nevada Division of Public and Behavioral Health, Substance Abuse Prevention and Treatment Agency (SAPTA) through State General Funds, and SAPT Block and Partnership for Success federal grants from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the U.S. DHHS, SAMHSA, or the State of Nevada.

NyECC plans and organizes its substance misuse prevention activities in accordance with the Strategic Prevention Framework (see page 5) and by addressing specific risk and protective factors (see page 8). Sections are organized according to the steps in the Strategic Prevention Framework:

1. **Assessment.** What are the current needs in the service area? Does the data reveal any emerging trends? What cultural or geographic aspects of the service area might impact substance use or mental wellness?
2. **Capacity.** How well prepared is NYECC to address these needs? What resources exist in the service area to address these needs? What's missing?
3. **Planning.** What needs have been prioritized by NYECC? Who will their partners be in addressing these priorities? What activities and strategies will be utilized? What do they hope to accomplish?
4. **Implementation.** What is NYECC already doing to address needs in the community? Are their efforts rooted in solid research?
5. **Evaluation.** How well has NYECC performed in the past? How well have NYECC's subrecipients performed? What might they wish to improve upon?

As a result of this CCPP process, NyECC has chosen to focus their efforts on the following Priorities over the next three years:

1. Reduce Access to Alcohol, Tobacco, Marijuana, Methamphetamines, and Opioids
2. Intervention for Substance Misuse
3. Support Mental Wellness

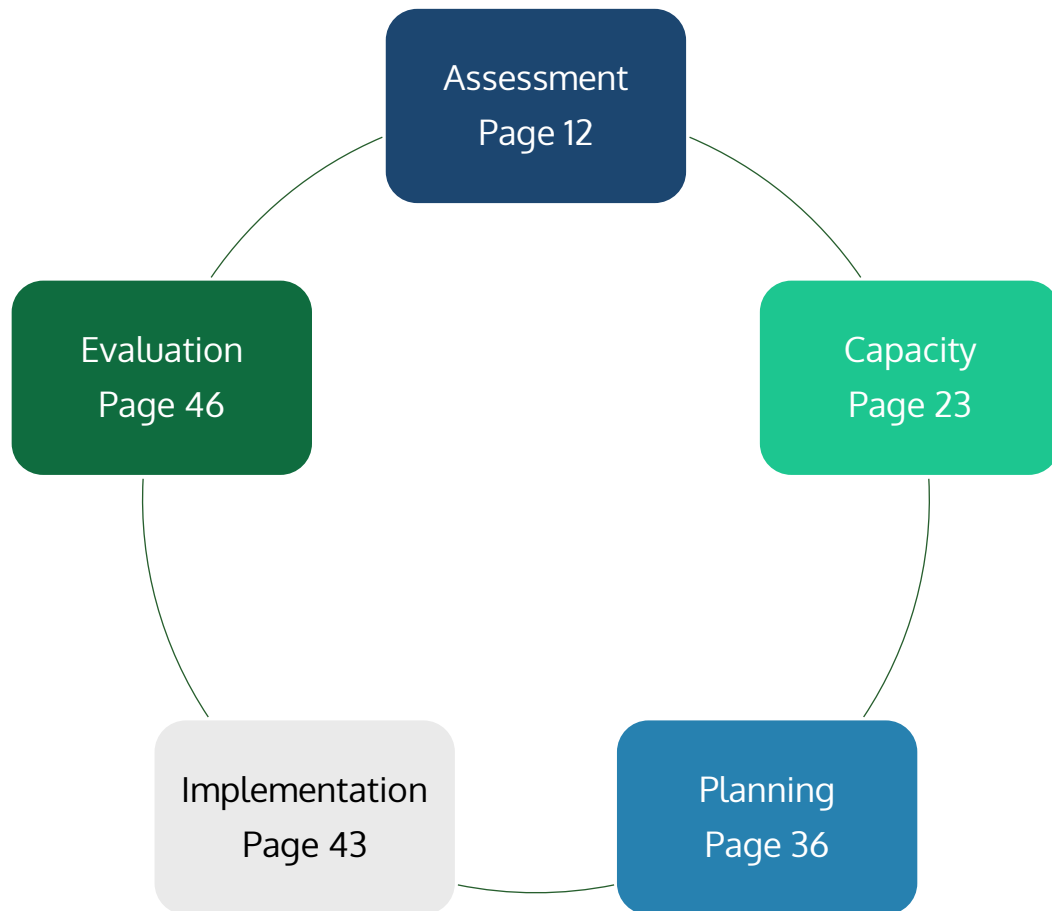
4. Support Educational Attainment
5. Reduce Isolation
6. Promote Physical Wellness

This CCPP is being written during the midst of the COVID-19 pandemic. Social scientists have documented the impact of natural disasters on domestic violence, both between adult partners and against children. Many experts believe factors related to COVID-19 (lack of contact with outside entities, increased stress, etc.) will mimic the impacts of natural disasters and will result in increased rates of domestic violence (Source: Campbell). In addition, several studies have linked COVID-19 quarantine orders with increased substance misuse (CDC, National Institute on Drug Abuse, etc.). Experts cite community collaborations with agencies, such as NyECC, as key to mitigating the impacts on children and families. It is especially timely for NyECC to re-visit their priorities and evaluate their efforts.

Readers may wish to review the "About the Data" section in Appendix A to familiarize themselves with the various sources cited throughout this document.

### Strategic Prevention Framework

NyECC utilizes the Strategic Prevention Framework to plan and deliver services. This framework, which was developed by the Substance Abuse & Mental Health Services Administration Center for Substance Abuse Prevention, was designed to help community coalitions guide their activities to maximize their impact on substance misuse, use and misuse.



NYECC's successful history addressing the opioid epidemic will explain how this process works for NYECC:

**Assessment.** NyECC identified the current problems with the help of local doctors and the EMS Director. This assessment included looking at the numbers of people impacted by opioid misuse along with an examination of the environment and norms within the community.

**Capacity.** Nevada was on the leading edge of the opioid epidemic. There were not many resources specific to opioid prevention or treatment. NyECC's response required various community members and agencies to pull together. NyECC formed a subgroup to address the opiate crisis that included medical doctors, emergency services, and Coalition staff. Medical doctors noted where they had leverage and resources, EMS noted their resources, and NyECC had general prevention funding to help. As the opioid crisis spread, additional funding became available.

**Planning.** NyECC staff and coalition membership utilized their prevention, health, and wellness knowledge, along with the best practice resources available, to begin to

implement changes. Access was identified as an initial point where the Coalition could make a difference. Medical doctors were especially focused on ensuring that everyone was aware that as prescription drugs were removed from the community there would most likely be an increase in heroin and other opiate use. This knowledge helped the Coalition plan for long-term prevention related to opiates.

**Implementation.** Medical doctors were able to implement policy changes at all but one medical office in Pahrump, which required them to join forces across competitive medical groups. They also began enforcing limits on the writing of prescription opiates. NyECC helped educate the community about this policy change and provided up-to-date resources and information about interventions and treatment options. Efforts in this area have continued to evolve and grow as the opioid crisis has continued and has evolved to include other opiate based substances. The opioid subgroup continued to meet monthly until the COVID-19 pandemic began. The subgroup examined relevant data and adjusted to changing norms. The same medical doctors who initially identified the local opioid crisis began integrating MAT treatment. The Coalition and its partners continue to educate the community and reduce access through programs such as This is NOT about Drugs (TINAD), Drug Take Backs, and media campaigns.

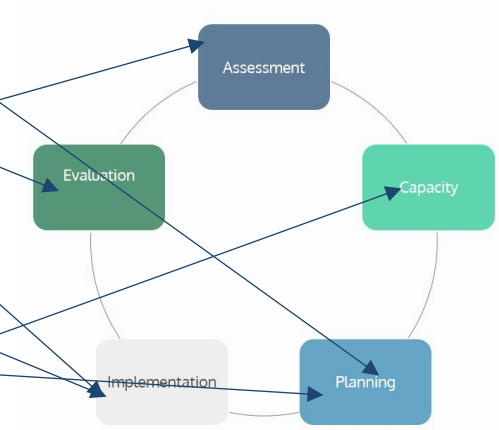
**Evaluation.** The opioid crisis has evolved from various prescription medications to heroin (Loratabs to Fentanyl to heroin, for example). In addition, baseline data for youth and adult misuse did not exist like it does for other substances (e.g., marijuana or alcohol). A final confounding factor stems from the State's various efforts to ask these questions appropriately on the YRBS. Initial efforts were too vague (e.g., "Have you ever used a prescription drug without a doctor's prescription") which may have led to youth answering "yes" if they had used someone else's antibiotics. The question is now worded "Have you Used Prescription Drugs/Pain Killers to Get High." All of this has exacerbated NyECC's efforts to evaluate the full impact of its prevention activities.

It should be noted that the Strategic Prevention Framework is compatible with the Collective Impact Process NyECC uses to guide all Coalition Activities, as follows:

## Collective Impact



## Strategic Prevention Framework



NyECC utilizes the principles of Collective Impact to dig deeper into Coalition activities, ensuring the effectiveness of the collaboration of the partnerships in Nye, Esmeralda, and Lincoln Counties.

## Risk and Protective Factors/Developmental Assets and Deficits

People typically have instinctive ideas or theories about what factors encourage or discourage substance misuse. While these ideas are not necessarily wrong, scientific research shows that certain risk factors present in a young person's life increase the possibility of becoming involved in problem behaviors. Using these research-based risk and protective factors provides a common language and understanding for prevention professionals. There is a direct correlation between the number of risk factors present for a young person and the likelihood that he or she will participate in negative behaviors.

NyECC utilizes the following matrices of Risk and Protective Factors from the National Institutes of Health to organize information and set priorities for youth.

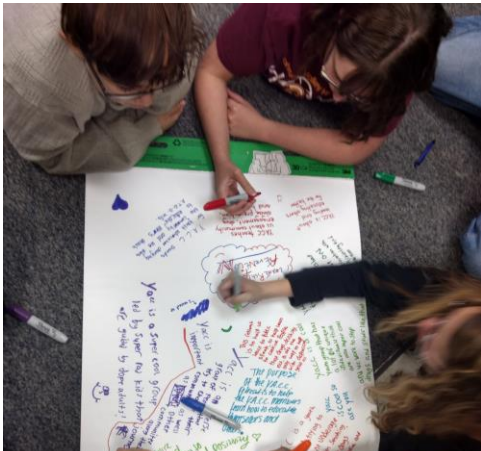


Risk Factors	Definition	Adolescent Substance Use	Young Adult Substance Use
<b>Individual/Peer</b>			
Early initiation of substance use	Engaging in alcohol or drug use at a young age.	✓	✓
Early and persistent problem behavior	Emotional distress, aggressiveness, and "difficult" temperaments in adolescents	✓	
Rebelliousness	High tolerance for deviance and rebellious activities.	✓	✓
Favorable attitudes toward substance use	Positive feelings towards alcohol or drug use, low perception of risk.	✓	✓
Peer substance use	Friends and peers who engage in alcohol or drug use.	✓	✓
Genetic predictors	Genetic susceptibility to alcohol or drug use.	✓	✓
<b>Family</b>			
Family management problems (monitoring, rewards, etc.)	Poor management practices, including parents' failure to set clear expectations for children's behavior, failure to supervise and monitor children, and excessively severe, harsh, or inconsistent punishment.	✓	✓
Family conflict	Conflict between parents or between parents and children, including abuse or neglect.	✓	✓
Favorable parental attitudes	Parental attitudes that are favorable to drug use and parental approval of drinking and drug use.	✓	✓
Family history of substance misuse	Persistent, progressive, and generalized substance use, misuse, and use disorders by family members.	✓	✓

School			
Academic failure beginning in late elementary school	Poor grades in school.	✓	✓
Lack of commitment to school	When a young person no longer considers the role of the student as meaningful and rewarding, or lacks investment or commitment to school	✓	✓
Community			
Low cost of alcohol	Low alcohol sales tax, happy hour specials, and other price discounting.	✓	✓
High availability of substances	High number of alcohol outlets in a defined geographical area or per a sector of the population.	✓	✓
Community laws and norms favorable to substance use	Community reinforcement of norms suggesting alcohol and drug use is acceptable for youth, including low tax rates on alcohol or tobacco or community beer tasting events.	✓	✓
Media portrayal of alcohol use	Exposure to actors using alcohol in movies or television.	✓	
Low neighborhood attachment	Low level of bonding to the neighborhood.	✓	
Community disorganization	Living in neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime.	✓	
Low socioeconomic status	A parent's low socioeconomic status, as measured through a combination of education, income, and occupation.	✓	
Transitions and mobility	Communities with high rates of mobility within or between communities.	✓	

Protective Factors	Definition	Adolescent Substance Use	Young Adult Substance Use
<b>Individual/Peer</b>			
Social, emotional, behavioral, cognitive, and moral competence	Interpersonal skills that help youth integrate feelings, thinking, and actions to achieve specific social interpersonal goals	✓	✓
Self-efficacy	An individual's belief that they can modify, control, or abstain from substance use	✓	✓
Spirituality	Belief in a higher being, or involvement in spiritual practices or religious activities	✓	✓
Resiliency	An individual's capacity for adapting to change and stressful events in healthy and flexible ways	✓	✓
<b>Family, School and Community</b>			
Opportunities for positive social involvement	Developmentally appropriate opportunities to be meaningfully involved with the family, school, or community	✓	✓
Recognition for positive behavior	Parents, teachers, peers and community members providing recognition for effort and accomplishments to motivate individuals to engage in positive behaviors in the future	✓	✓
Bonding	Attachment and commitment to, and positive communication with, family, schools, and communities	✓	✓
Marriage or committed relationship	Married or living with a partner in a committed relationship who does not misuse alcohol or drugs		✓
Healthy beliefs and standards for behavior	Family, school, and community norms that communicate clear and consistent expectations about not misusing alcohol and drugs	✓	✓

*(Source: National Center for Biotechnology Information/National Institutes of Health)*



*YACC Youth Team (sponsored by NyECC) participating in a bonding and communication exercise.*

This list of risk factors aids NyECC in planning prevention activities for older adults:

Risk Factors for Substance use Disorders in Older Adults
<b>Physical Risk Factors</b>
Chronic Pain
Physical Disabilities or Reduced Mobility
Transitions in Living or Care Situations
Loss of Loved Ones
Forced Retirement or Change in Income
Poor Health Status
Chronic Illness
Taking a Lot of Medicines and Supplements
<b>Psychiatric Risk Factors</b>
Avoidance Coping Style
History of Substance Use Disorders
Previous or Current Mental Illness
Feeling Socially Isolated

## Assessment – Needs

NyECC utilizes several quantitative data sources to assess community needs and prioritize their responses. These sources are more fully described and explored in Appendix A. In addition to those sources, NyECC formally reviews relevant, timely quantitative data from the State of Nevada, local law enforcement, and other community partners related to emerging trends and needs.

NyECC gathers input from community members in a variety of ways. Often this occurs during the grant writing process. In that case the CEO communicates with stakeholders specific to a certain topic for input while writing the grant. They will often refer her to other individuals who hold specific knowledge about the topic. In other cases NyECC

staff and leadership will notice a pattern of responses about a topic, or a topic being discussed with particular vehemence. When this is noted, NyECC leadership and staff are trained to “listen with big ears” to determine the relevancy and validity of an issue and start to formulate potential solutions.

As a third method of needs assessment, NyECC utilized the CDC’s “Calculating for an Adequate System Tool” (Source: Nevada Substance Abuse Prevention and Treatment Agency, Regional Capacity Assessment Report: Southern Rural Region 2019) to determine the estimated need for prevention services throughout the service area. The table below shows the “adjusted community need” and the “estimated need” (over or under) of each type of prevention activity. Activities that may need to be increased are highlighted in blue. It is important to note that this assessment includes Nye and Esmeralda Counties only. In addition, it is also important to understand that these services are not equally distributed from one community to another. For example, the Town of Pahrump may have an adequate number of school programs but the Town of Tonopah may not.

Promotion and Prevention Activities Needed in Service Area (Source: CDC CAST Tool)			
Promotion			
Activity	Adjusted Community Need	Observed Community Totals	Estimated Need (over or under)
Marketing Advertisements	226.43	537	+311
Media Advocacy Events	5.33	35	+30
Community Coalitions	0.09	2	2

Prevention			
Activity	Adjusted Community Need	Observed Community Totals	Estimated Need (overage or under)
School-Based Prevention Programs (1-hour long programs)	5.66	16	+10*
Community-Based Prevention Programs (1-hour long programs)	11.01	7	-4
Housing Vouchers for homeless residents	156.28	14	-142
Needle Exchange	5.27	0	-5
Prescription Drug Disposal Events/Locations	1.29	7	-6
Referral			
Activity	Adjusted Service Area Need	Observed Community Totals	Estimated Need (overage or under)
Adult Specialty Courts	0.30	2	2
Youth Specialty Courts	0.06	0	0
Social Workers	22.40	9	-13

\*Note: The number of school-based programs have declined significantly due to COVID-19 restrictions.

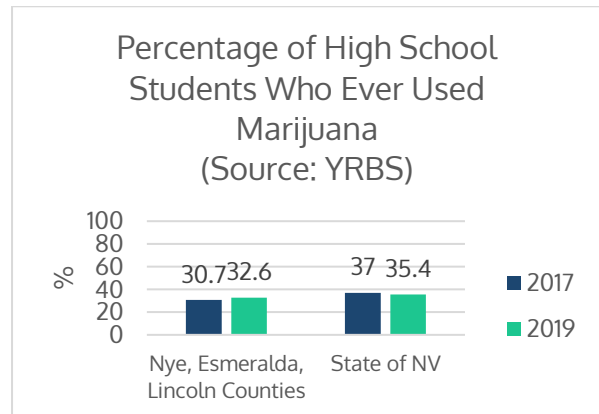
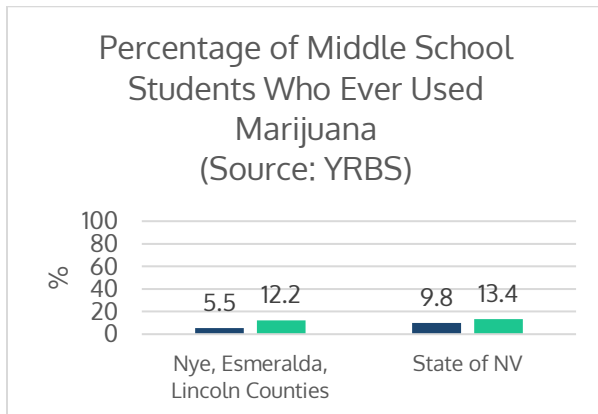
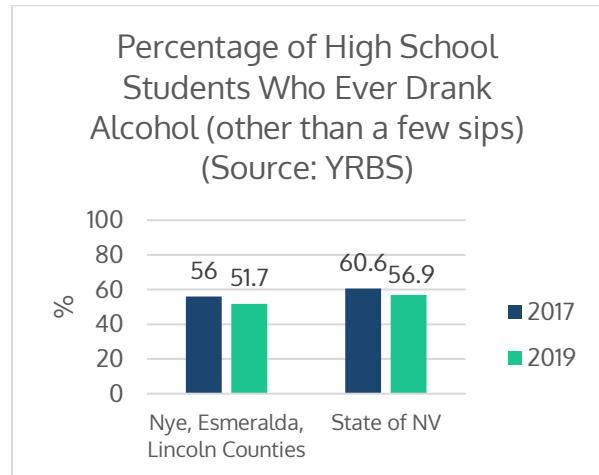
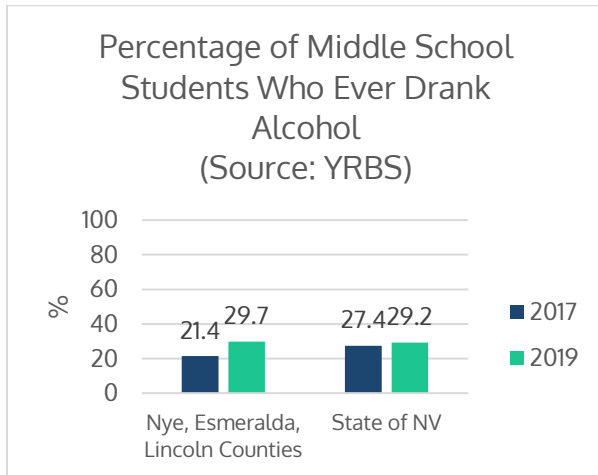
### General Findings

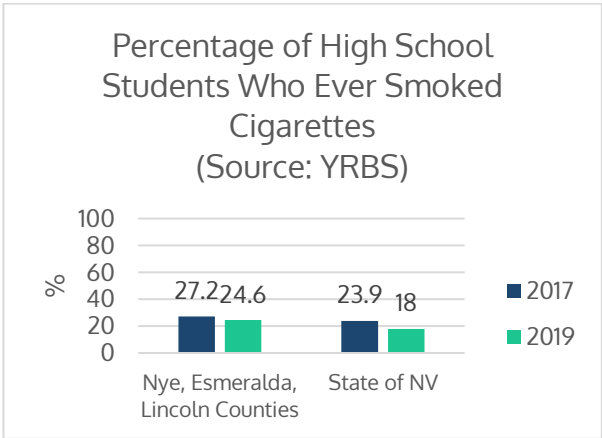
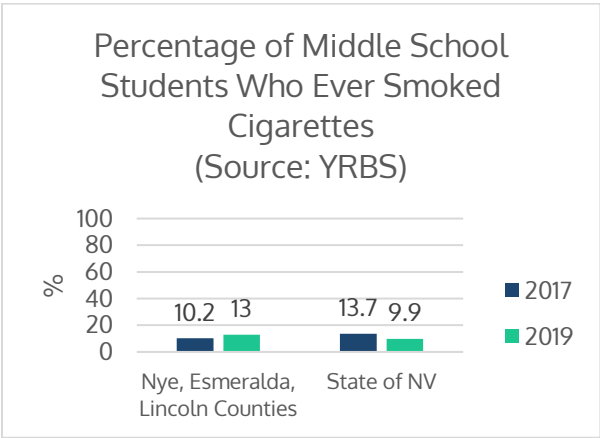
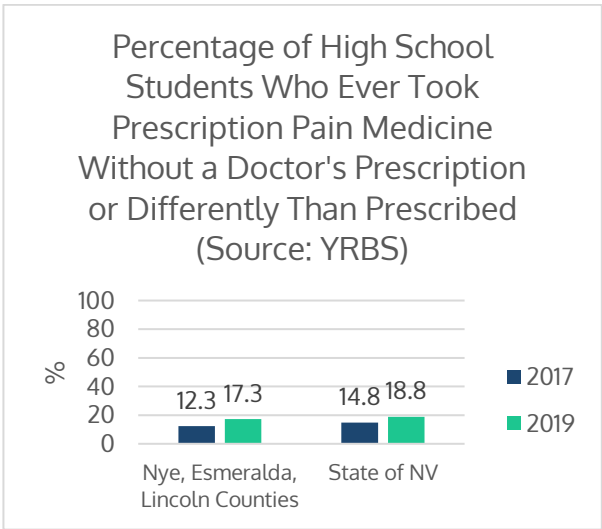
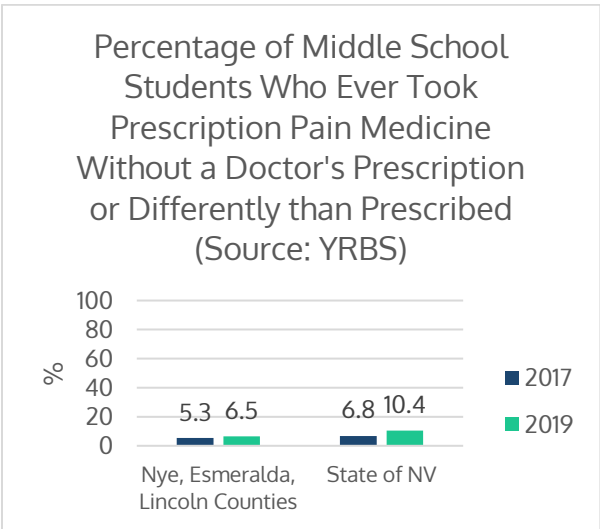
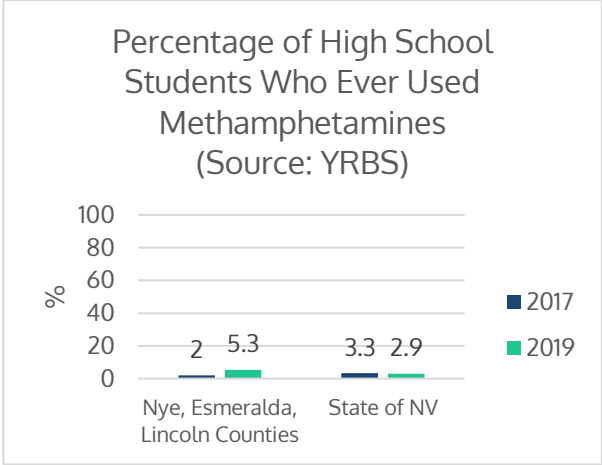
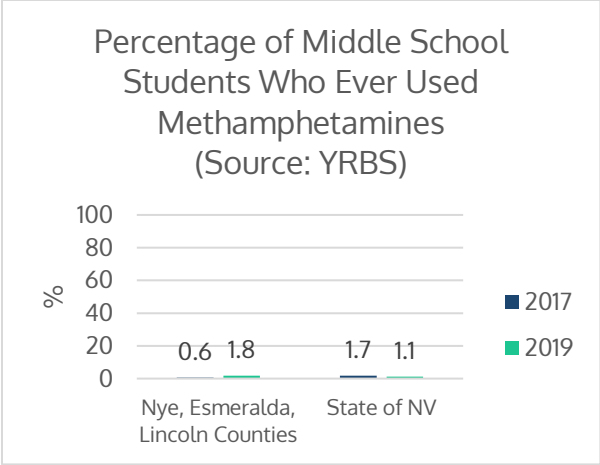
General findings include the variables of lifetime use, frequency of use, and mental health wellness. Other variables, such as age of onset of use and physical health, are addressed in Appendix A.

## Lifetime Use

It is definitely not the majority who use drugs. People use the one bad egg mentality. I try to clear that up when I hear it because it's discriminatory. Just like any kind of stereotype, sometimes kids lower their behavior to meet negative expectations, or sometimes they fight against it.

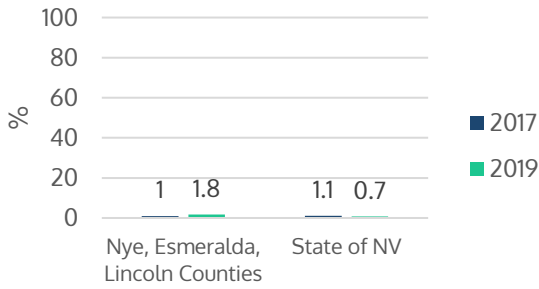
-YACC Youth Team Member



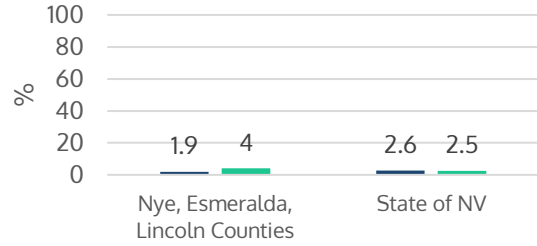




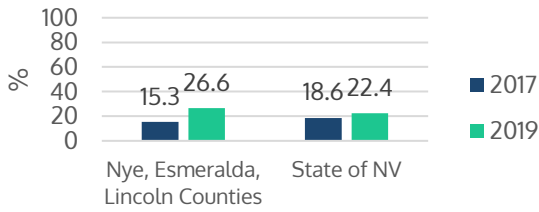
Percentage of Middle School Students Who Ever Used Heroin  
(Source: YRBS)



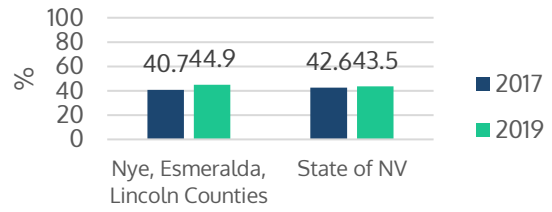
Percentage of High School Students Who Ever Used Heroin  
(Source: YRBS)



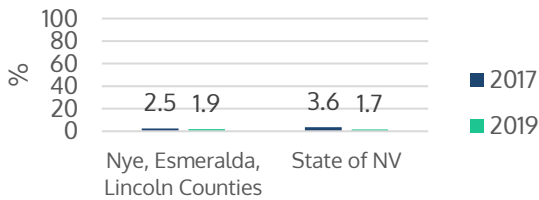
Percentage of Middle School Students Who Ever Used Electronic Vapor Products  
(Source: YRBS)



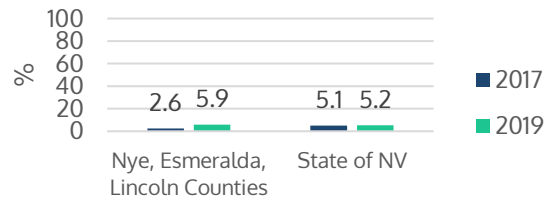
Percentage of High School Students Who Ever Used Electronic Vapor Products  
(Source: YRBS)



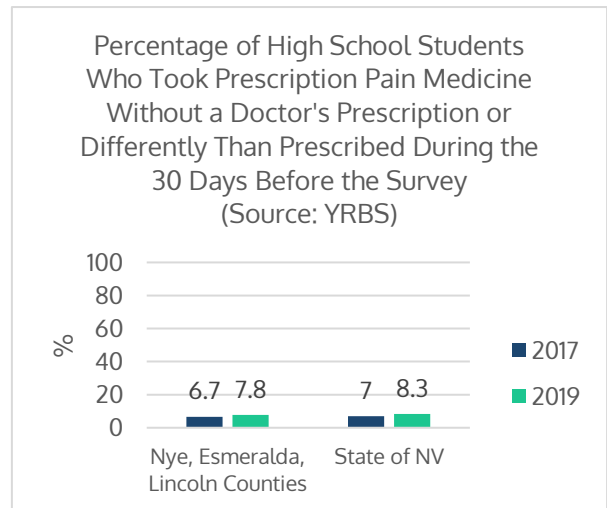
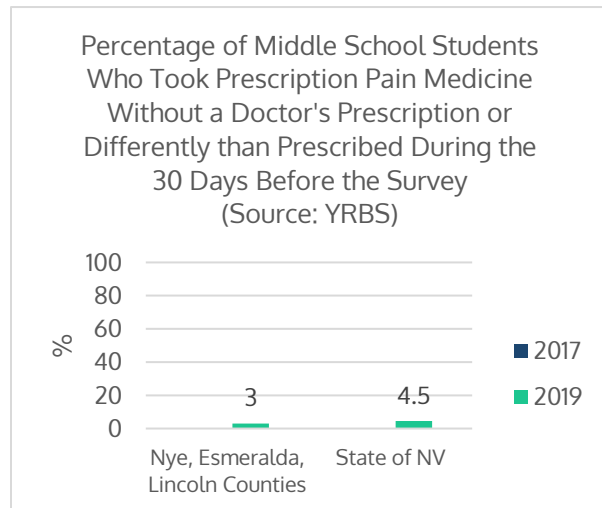
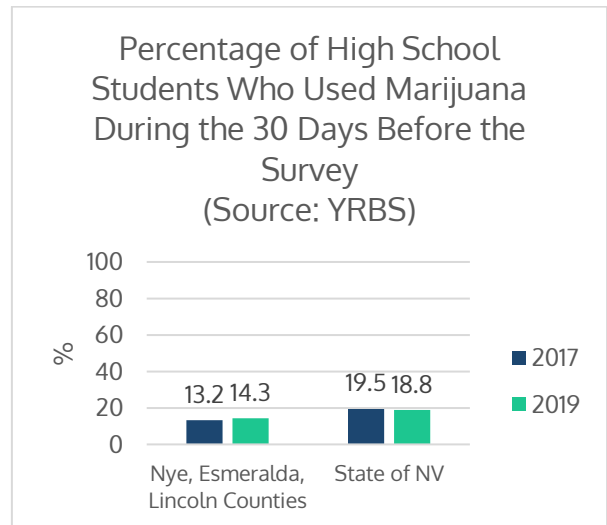
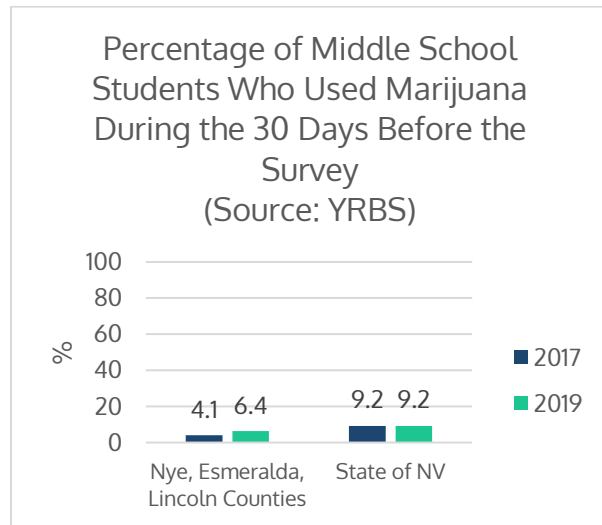
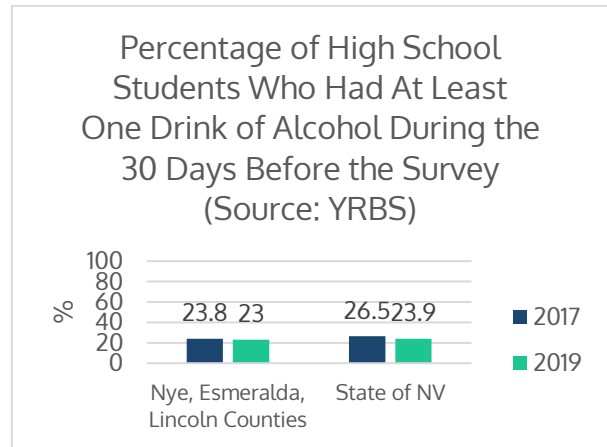
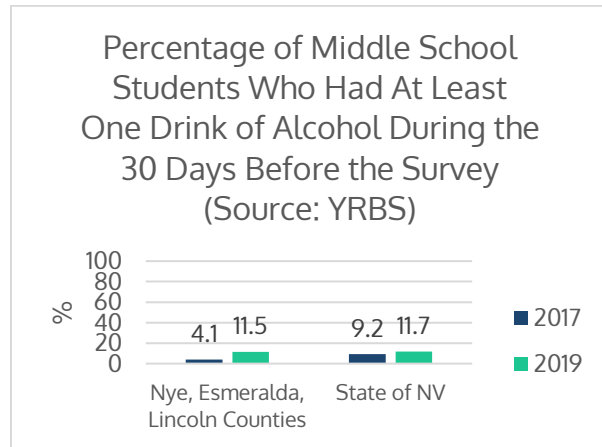
Percentage of Middle School Students Who Ever Used Cocaine  
(Source: YRBS)



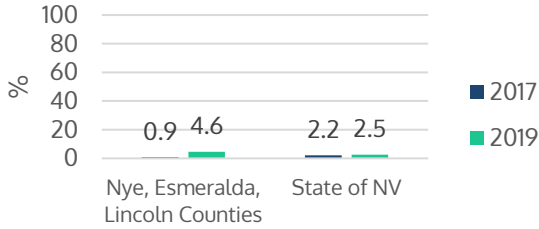
Percentage of High School Students Who Ever Used Cocaine  
(Source: YRBS)



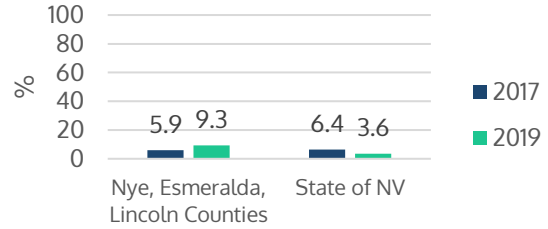
## Frequency of Use



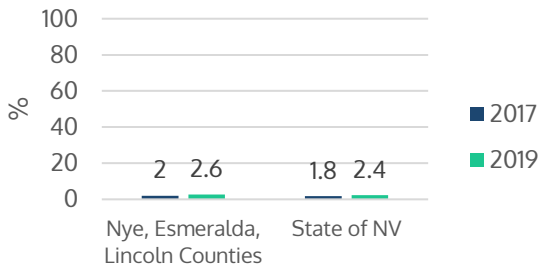
Percentage of Middle School Students Who Smoked Cigarettes During the 30 Days Before the Survey (Source: YRBS)



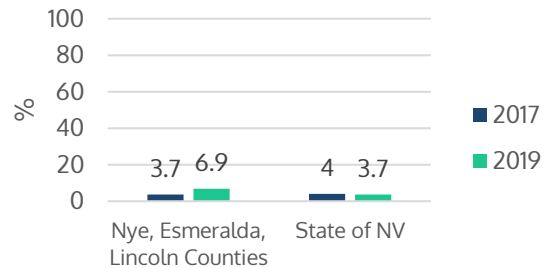
Percentage of High School Students Who Smoked Cigarettes During the 30 Days Before the Survey (Source: YRBS)



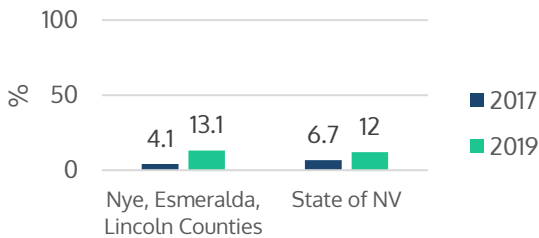
Percentage of Middle School Students Who Used Smokeless Tobacco During the 30 Days Before the Survey (Source: YRBS)



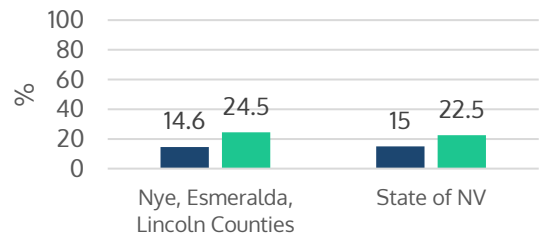
Percentage of High School Students Who Used Smokeless Tobacco During the 30 Days Before the Survey (Source: YRBS)



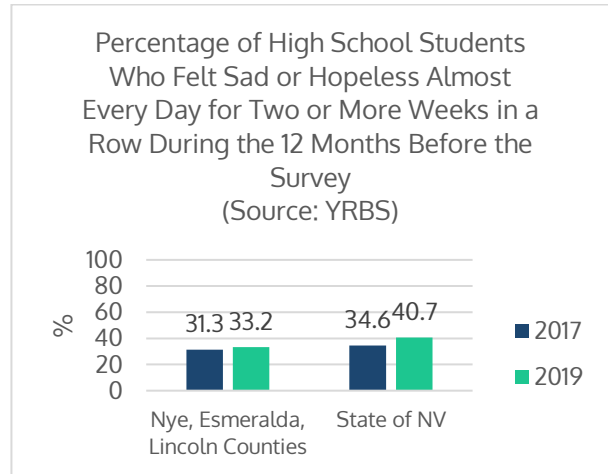
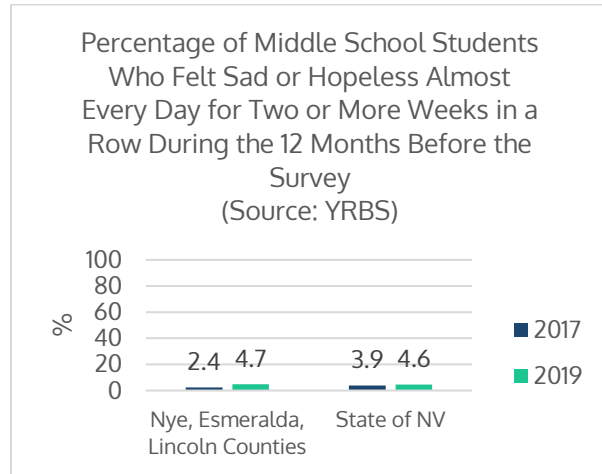
Percentage of Middle School Students Who Used Electronic Vapor Products During the 30 Days Before the Survey (Source: YRBS)



Percentage of High School Students Who Used Electronic Vapor Products During the 30 Days Before the Survey (Source: YRBS)



## Mental Health Wellness



I see a lot of kids who, when I ask, will tell me that they are depressed or even suicidal. But they don't want me to tell their parents. They will tell me, but they are afraid of their parents finding out. I don't know where that is coming from.

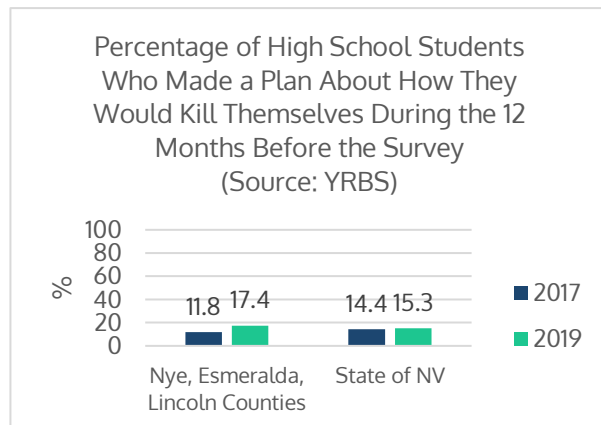
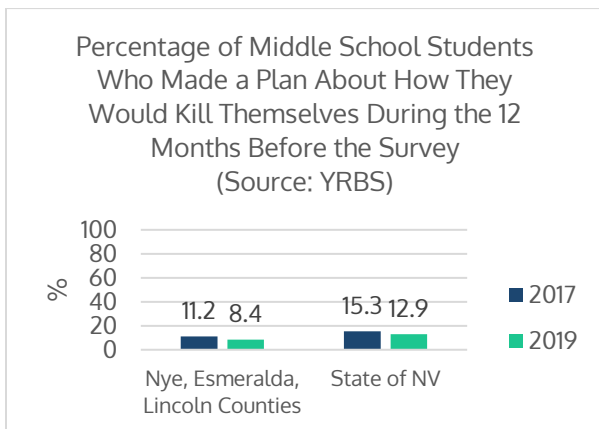
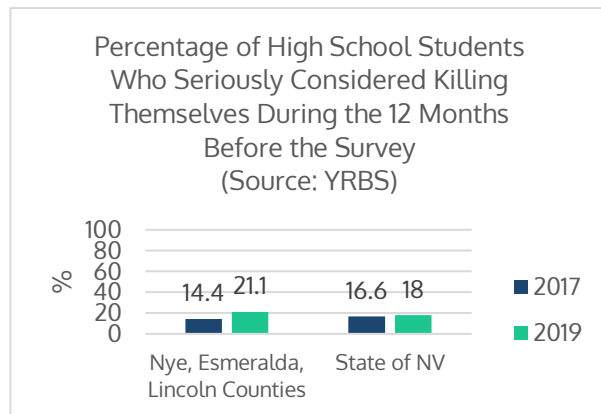
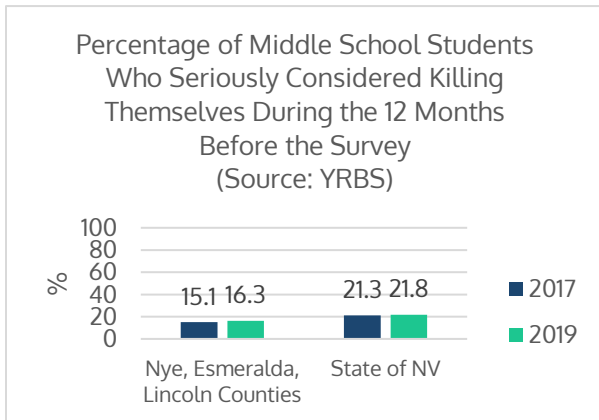
-School Representative

I'm seeing a lot of kids with depression that I wouldn't have expected before COVID. It's like the kids who I used to worry about are ok, the ones I didn't used to worry about are now showing up depressed.

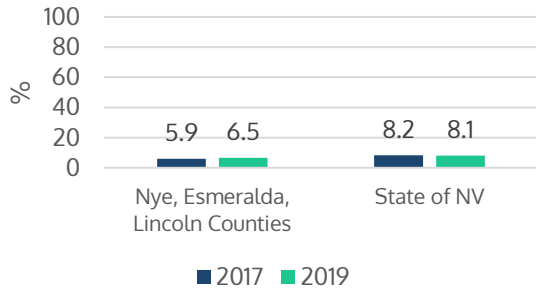
-School Representative



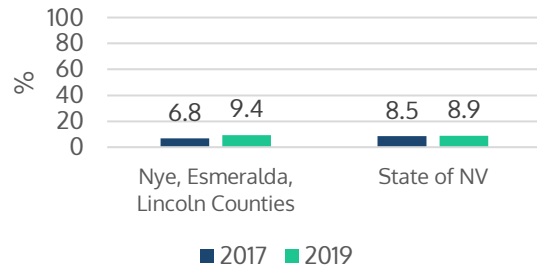
*Pahrump Valley High School, Pahrump Valley Times*



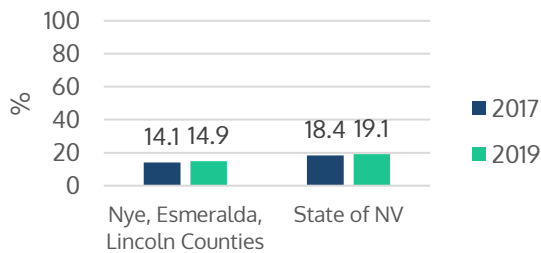
Percentage of Middle School Students Who Ever Tried Killing Themselves  
(Source: YRBS)



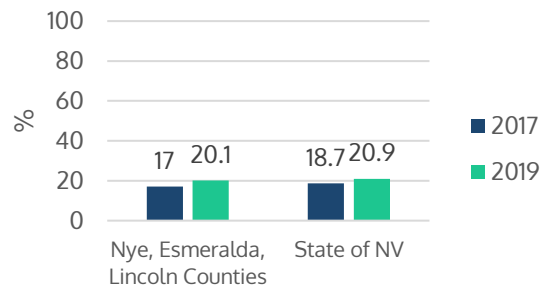
Percentage of High School Students Who Attempted Suicide During the 12 Months Before the Survey  
(Source: YRBS)



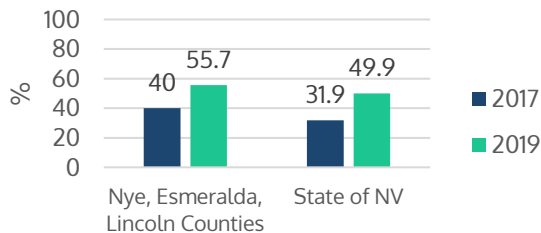
Percentage of Middle School Students Who Have Done Something to Purposely Hurt Themselves Without Wanting to Die, Such as Cutting or Burning Themselves on Purpose During the 12 Months Before the Survey  
(Source: YRBS)



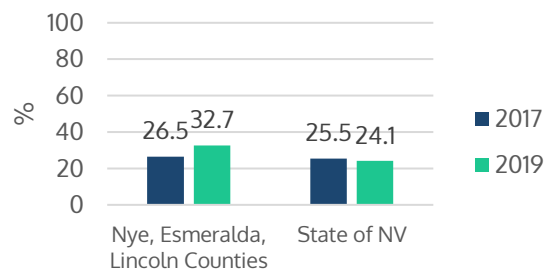
Percentage of High School Students Who Did Something to Purposely Hurt Themselves Without Wanting to Die, Such as Cutting or Burning Themselves on Purpose During the 12 Months Before the Survey  
(Source: YRBS)



Percentage of Middle School Students Who Ever Got the Kind of Help They Need When They Felt Sad, Empty, Hopeless, Angry, or Anxious "Most of the Time" or "Always"  
(Source: YRBS)



Percentage of High School Students Who Ever Got the Kind of Help They Need When They Felt Sad, Empty, Hopeless, Angry, or Anxious  
(Source: YRBS)



## Capacity – Service Area

The capacity of NyECC as an agency is more fully addressed in the 2018-2021 Coalition Evaluation and Learning Report. In terms of their internal structures and systems capacity to address substance misuse prevention:

- NyECC requires new employees to complete a comprehensive New Hire Orientation process. In addition to typical human resources-related activities (e.g., payroll and travel policies), new hires are expected to attend coalition meetings, complete Mental Health First Aid and related programs, participate in team building exercises, etc. Completion of these tasks is tracked using a New Hire Orientation Form. They are then required to participate in trainings related to their specific division or area of responsibility. In the case of substance misuse prevention, employees are required to attend a minimum of 20-40 hours (depending on part-time or full-time status) trainings per year. Trainings are selected by the most relevant to needs identified in the community. The following table identifies the trainings NyECC staff have recently attended:

Substance Misuse/Mental Wellness Trainings for NYECC STAFF From 2019-Present	
Type of Training	
Mental Health First Aide*	
Youth Mental Health First Aide*	
Psychological First Aide*	
SAFETalk*	
ASSIST*	
Naloxone*	
TINAD (This is Not About Drugs)*	
Crisis Intervention*	
SAPST (Substance Abuse Prevention Specialist Training)	
Servant Leadership	
Rural Equity	
Confidentiality	
Cannabis Policies	
Cannabis and Vaping	
Prevention Ethics	
Collective Impact	
Opioid Awareness*	
Diabetes Self-Management*	
Suicide Awareness	
WorkKeys	

Bingocize*
Nutrition*
Pain Management*
Chronic Disease Self-Management*
Managing Remote Employees
Tall Cop Alcohol Awareness
Civil Rights Awareness
Vape Pens and Trends*
High In Plain Sight

\*Asterisks indicate trainings for which NyECC is qualified as “trainer of trainers.” They offer these trainings to their staff and to the community at large, particularly law enforcement officers and school personnel.

NyECC leadership is creating a tool to evaluate the effectiveness of its trainers.

- Volunteers are required to complete the same New Hire Orientation as new employees (see description above). They can then carry this prevention training throughout the rest of their sphere of influence.
- NyECC utilizes a “Grant Manager Performance Measures” document to track both fiscal and programmatic progress for each grant it is awarded. Grant Managers self-document their performance and then bring that data to their employee performance reviews.
- As a Workforce Innovation and Opportunity Act Subgrantee, NyECC supports job seekers and employers by arranging for a wide range of trainings ranging from CNA to internet security to truck driving.

The following section analyzes the service area’s capacity to address substance misuse and mental health (i.e., awareness of problems, readiness to change, confidence in ability to change, and an assessment of existing resources).

### Awareness of Problems

NyECC conducted “Environmental Scans” in 2019. Adult respondents were well-aware of youth alcohol, marijuana, amphetamine use and offered support for educational campaigns.



Community Conditions



*Donkey Basketball event at Pahrump Valley High School*

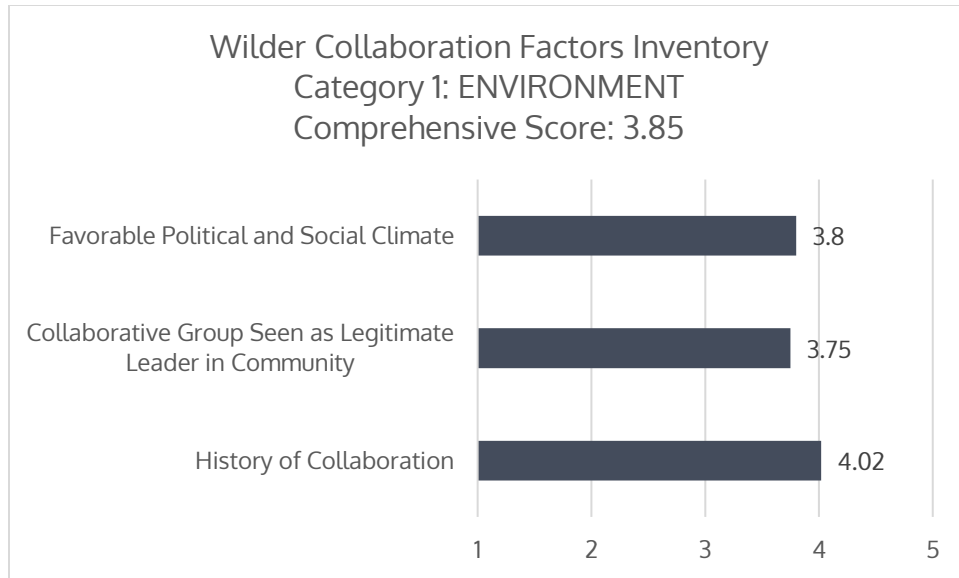
I moved here from [larger city/redacted] People tell me there's nothing to do here. I find lots to do. I think that's an excuse. It is true that you have to put time and effort into looking for things. We have sports, festivals, movie nights, outside stuff.

-YACC Youth Team Member

- NYECC seeks partnerships with representatives from community sectors as defined by Drug-Free Communities (DFC):



- NyECC conducted a survey of its members in 2019-2021 called the "Wilder Collaboration Factors Inventory" (Wilder). More details about and results from the Wilder Inventory can be found in the 2018-2021 Coalition Evaluation and Learning Report. Results pertaining to capacity are included here. Community sectors were fairly well-represented in the survey.



The cumulative score of 3.85 is considered "borderline." NyECC and its partners may wish to discuss factors further to determine what actions might be necessary.

- YACC Youth Team’s Drug Paraphernalia Education Trailer (DPET) has been well-received in the community.
- YACC Youth Team #Our Epidemic (21 tobacco impact video) presentation to the Nevada State Legislature.
- Youth and law enforcement collaborate for Alcohol Sales Compliance Checks.
- NyECC has supported several youth (now adults) through various internships, volunteer activities, and work experiences who are now well-versed in prevention and working elsewhere in the community.
- People living in the smaller communities in the service area (e.g., Tonopah and Lincoln County) are more tightknit and know one another, at least by name. They tend to live and work in the same geographic area. Pahrump’s footprint is somewhat spread out and without a common "city center." A large percentage are retired or work in Las Vegas. People tend to know the people they work with and the people they live next to, but not many others in the community. These are important differences when considering capacity and communication channels.
- Some barriers to capacity building throughout communities include limited Wi-Fi access and transportation.

- NyECC provides training locally and/or supports community members' travel to attend various substance misuse/mental wellness trainings, as follows:

Substance Misuse/Mental Wellness Trainings for COMMUNITY MEMBERS From 2019-Present
Community Anti-Drug Coalitions of America
RX Summit
Stimulant Summit
San Diego Marijuana Summit
Agents of Change Media Training
Utah Substance Abuse Summit
Mental Health First Aid, with Opioid Prevention
Crisis Intervention Training
Mental Health First Aid Certification
ASSIST
SafeTALK
Youth to Youth International Leadership Conference
Psychological First Aid

Over the years NyECC has provided hundreds of community members with similar trainings. These trainings provide community members in multiple community sectors with the information, resources, and guidance they need to work toward preventing substance misuse and/or improve mental wellness in their individual sphere of influence.

### Family Conditions

- There is no indication that families are generally unaware or in denial about problems related to substance misuse or mental health issues. Different communities within the service area demonstrate different levels of awareness and acceptance of these problems. In general, the smaller the town, and the less transiency, the more

Cannabis use is high among the youth population I work with. The parents usually don't see that as a problem. They are worried about other drugs, but not cannabis. They have no concept of the impact on the young person's developing mind.

-Healthcare Provider

- Several key informants expressed concerns about generational substance misuse leading to poverty, lack of supervision, a limited vision of the future, and ultimately, children using substances themselves. This concern was most prevalent in Pahrump.
- Key informants expressed frustrations about parents/guardians who do not attend school or community functions or educational events. They believe that the parents who do attend are not typically the ones who should be there.

### School Conditions



*Preschool children working on their motor skills during a parent-child workshop using the DARE To Be You curriculum led by Community Chest, Inc. Community Chest, Inc. is a sub grantee of NyECC and is able to provide the program DARE To Be You using Substance Abuse Primary Prevention (SAPP) funding.*

- There was no indication that schools are unaware or in denial about substance misuse or mental health issues in the community.
- Schools in this service area struggle to recruit and retain teachers. They believe this is due to a lack of other services in the communities (e.g., medical care) for themselves and their own families. This deficit impacts continuity not only with students but also any supplementary programs that NyECC may wish to implement at the schools.

- The relatively small number of students and troubles with recruiting and retaining teachers has impacted school district's ability to offer advanced classes. Several key informants mentioned that students who go to college feel less prepared than their counterparts who attended schools in larger districts.
- Local schools and school districts have greatly increased their capacity to provide substance misuse prevention and wellness education to their students through their association with NyECC. The Nye County School District is a subgrantee for SAPP grant and delivers prevention programming in the Pre-K. They also allow NyECC to deliver programming in the schools. The Lincoln County School District and NyECC are preparing to implement This Is Not About Drugs across all grades. NyECC delivers prevention and wellness lessons in before- and after-school programs. NyECC providing prevention programming for student athletes for years and then transferred that to the schools to deliver directly (NyECC still provides prevention education materials). NyECC also works with the schools to bring in presentations, including school-wide prevention and mental health awareness.

## Readiness to Change

The Center for Community Health and Development at the University of Kansas provides a 9-step framework for determining a community's "level of readiness" for change ranging from "no awareness" to "professionalization." (Source: Center for Community Health).

The following paragraphs provide some evidence for NyECC's Service Area's level of readiness. This assessment is structured using Drug-Free Communities' community sectors:

- **Business Sector:**
  - NyECC enjoys a very strong relationship with the business sector, primarily because of their workforce training programs. NyECC has established MOU's and contracts with businesses, they host job fairs, and they work daily with businesses across Nye and Esmeralda Counties.
  - NyECC employees serve on the Economic Development Boards for Nye and Esmeralda Counties.
  - Businesses partner with NyECC for their annual Back-to-School event and Red Ribbon week.

- Businesses help reduce stigma and promote substance misuse prevention by posting information about addiction and prevention for their employees and customers.
- Pharmacies partner with NyECC by including information on prescription bags.
- Local media outlets provide NyECC with free marketing access.
- **Local Government Sector:**
  - Representatives from local governmental are familiar with NyECC and their activities, particularly those related to workforce development. NyECC is a welcome partner.
  - NyECC collaborates with local governmental entities and routinely contributes to government processes and assessments. COVID-19 strengthened this relationship in Nye County as NyECC supported the County's vaccination distribution processes.
- **Tribal Government Sector:**
  - NyECC has collaborated with the Duckwater and Yomba tribes on various activities over the years, including substance misuse prevention, wellness, workforce, and safe irrigation water.
- **Healthcare Sector:**
  - Representatives from the healthcare sector are well-aware of NyECC's goals and objectives. They are willing to partner with NyECC in healthcare and prevention activities.
  - Healthcare partners lend their expertise to assist with substance misuse prevention and intervention. They have educated Coalition staff and helped with implementing policies to prevent access to prescription medications. Healthcare partners are key to the implementation of the annual Remote Area Medical event that includes dental, vision, medical, mental, and behavioral health services.
- **Education Sector:**
  - Schools, especially in the Pahrump area, view NyECC as a trusted and valuable partner.
  - NyECC funds large projects at schools, although some people involved with those projects aren't aware that NyECC is the funder.

- The local school districts, especially Nye County School District are very strong partners with NyECC. The Nye County School District was a founding partner for NyECC and the Coalition leases an old elementary school campus in Pahrump. NyECC collaborates daily with the schools, delivering before- and after-school programming, implementing prevention and wellness programming in the schools, and contributing to plan and system development on a recurring basis.

Interviewer: You mentioned that substance abuse is the biggest problem facing your community. Why do you think that is?

School Representative: Well, there isn't much for the kids to do out here. Idle hands and all that. We're in the rurals, what do you expect?

Interviewer: OK...

School Representative: You know what? That's a cop-out. I think it's probably a whole lot more complicated than that.

- **Youth Serving Organization Sector:**

- The youth serving sector view NyECC as a valuable and trusted partner. They are enthusiastic partners in prevention efforts and would like more specific guidance and education about *how* to prevent substance misuse.

- **Law Enforcement Sector:**

- Law enforcement in this service area is well-aware of NyECC and has a strong relationship with them. Various entities are engaged in prevention activities, with or without NyECC's direct involvement (e.g., juvenile probation officers, sheriff offices, etc.).

We have all the same problems that they have in cities, just a little less of it because there are fewer of us.

-Law Enforcement



- **Faith Based Sector:**
  - Representatives from the faith-based sector are generally aware of NyECC. Their role in direct services to people in need is somewhat removed from the realm of grant-making. While they are more familiar with aspects of substance misuse treatment, they would gladly accept support in implementing prevention activities in their sphere of influence.
  - Faith-based partners assist with the dissemination of information, especially in those churches that are functioning as food pantries.
  
- **Volunteer/Civic Organizations:**
  - Volunteer/Civic organizations throughout the service area are familiar with NyECC, particularly with respect to food insecurity projects. They appear to be less familiar with any substance misuse prevention but would be open to learning more.
  
- **Parent Sector:**
  - Through the various services that are provided by NyECC, including car safety seat inspections, crib safety training, before / after school programming, and workforce programming, NyECC connects with parents through many avenues. During these connections, parents are provided a variety of resources and referrals to internal NyECC services or out to other social service support systems.
  - Perhaps because of the widespread geography, or the non-traditional work schedules (casinos/mines), or the disparity in incomes, there seems to be a dichotomy of parental involvement in children's lives. For example, some parents are happy to drive 200 miles to attend their child's 8<sup>th</sup> grade volleyball game while others leave their children for extended periods of time to fend for themselves. When NyECC hosts events for parents, it is usually the super-involved parents who attend rather than the parents who might benefit from the information being presented. NyECC does not mean to suggest that other communities have some type of uniform parenting style. Rather, they believe there are unique aspects of the service area that seem to exacerbate engaged or disengaged parenting styles.

This is a small town. We definitely notice it when someone is struggling with drugs or alcohol. But what are you supposed to do? Call the police? If I see it, I can only assume the parents see it. If they are ok with it, I don't want to overstep. Sometimes I think maybe the parents are embarrassed to ask for help.

-Focus Group

- **Youth Sector:**


- NyECC facilitates and active youth team, Youth Advocates Changing Communities (YACC). It has just undergone its first year of formal evaluation.
- NyECC engages youth through various mechanisms, including the YACC team. NyECC provides youth workforce and teen pregnancy prevention programming, both of which actively seek youth input and understanding in the decision-making process for the program. NyECC also routinely meets with the Youth Leadership Team in Tonopah "Community Youth Advocating for Change" (CYAC). NyECC funds programming at Nye and Lincoln County schools to coordinate mental health/suicide awareness programming that provides insight to the Coalition's efforts.



*YACC Youth Team Members exploring the International Car Forest of the Last Church near Goldfield, NV, on their way to a leadership training.*

- **Media Sector:**
  - NyECC access local media throughout the service area to share prevention and wellness messaging.
  - Local media is a strong partner for NyECC. Print media provides weekly space in the local newspaper for NyECC to promote activities and prevention messaging. Television and radio stations regularly feature NyECC staff on shows and programming to increase awareness and provide information.
- **Substance Abuse Treatment Organization Sector:**
  - Several treatment providers partner with NyECC regularly. They assist during the annual Remote Area Medical event and provide training and information for the Coalition partnership. Providers attend Coalition meetings and provide data and information to the membership to assist with understanding local substance misuse conditions.
  - The sole substance misuse treatment provider in Tonopah routinely attends NyECC Coalition meetings.

After reviewing and comparing the basic levels of readiness for these various community sectors, it was determined the general level of readiness is Stage 9: High Level of Community Ownership.



**9. High level of community ownership.** Detailed and sophisticated knowledge exists about prevalence, causes, and consequences. Effective evaluation guides new directions. The model is applied to other issues.

(Source: Community Tool Box).

### Resource Assessment

The goal of a resource assessment is to: 1) identify services existing within the community that are available to address needs; and 2) to find any gaps in services. NyECC has conducted various assessments of community partnerships, gaps and resources over the years to varying degrees of success/satisfaction. At this time they are choosing to implement what they believe will be a more meaningful cross-sector

partnership assessment, in accordance with Collective Impact guidelines, during the next year.

## Planning

When NyECC is informed that they have successfully obtained grant funding, leadership, coordinators, and managers meet together to complete their “Grant Management Procedures” and “Performance Measures” planning tools. These planning documents match scopes of work and budgets with existing NyECC employees and procedures. In addition, specific tasks related to each grant are added to a “Tasks” document completed for each employee.

In an effort to keep NyECC’s activities in alignment with the agency’s vision, mission and goals, the Board of Directors and NyECC staff meet annually to review every activity. They discuss successes and struggles related to each activity and use a filter of “keep, quit, or give away” to determine the future of an activity. If an activity is no longer supported by the community, an activity is ineffective, or the underlying issue has been resolved, NyECC practices “purposeful abandonment.”

NyECC and its Subrecipients strive to implement policies, practices, and programs that are listed as “approved or evidence-based” programs in the State of Nevada, SAPTA, Evidence-Based Practices, Programs, and Policies Manual (March 2021) and/or various national clearinghouses (e.g., CDC, SAMHSA, etc.).

NyECC will use the following priorities and associated activities as a starting point in their activities. Specific activities and partners under each priority may change and shift as funding and partnerships ebb and flow. NyECC’s plans to evaluate the impact of activities associated with these priorities are addressed in the Evaluation section below.

**Priority 1: Reduce Access to Alcohol, Tobacco, Marijuana, Methamphetamines, and Opioids**

NYECC will reduce the incidence of youth substance use by reducing access to legalized substances (alcohol, tobacco, marijuana, and opioids).

By Addressing the Risk and Protective Factors of...

High Availability of Substances (R)	Community Laws and Norms (R)	Healthy Beliefs and Standards for Behavior (P)
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Through the Following Potential Activities...

<p><u>Communitywide Education and Awareness Campaign</u></p> <ul style="list-style-type: none"><li>- Drug Paraphernalia Education Trailer (DPET)</li><li>- Parents Who Host Media Program</li><li>- Drug Take Back</li><li>- Information Dissemination re: Securing Marijuana in the Home</li><li>- General Information Dissemination</li></ul>	<p><u>Retailer Education and Awareness Campaign</u></p> <ul style="list-style-type: none"><li>- Alcohol and Marijuana Sales Compliance Checks</li><li>- Responsible Beverage Server Training</li><li>- Information Dissemination re: Good Samaritan Law</li><li>- Work with Businesses on Policy and Procedure Changes</li></ul>
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With the Assistance of the Following Potential Partners...

- YACC Team
- Law Enforcement
- Partner Agencies/Sub-Recipients
- Local Civic and Service Groups

With the Assistance of the Following Potential Partners...

- Law Enforcement
- Sub-Recipients
- Local Businesses
- YACC Team

**Priority 2: Intervention for Substance Misuse**

NyECC will educate community members about reducing harms of substance misuse if they are concerned about their own or another person’s substance use (self, parents/youth, youth/youth, adult/adult)



By Addressing the Risk and Protective Factors of...

High Availability of Substances (R)	Community Disorganization (R)	Family History of Substance Misuse (R)
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Through the Following Potential Activities...

<p style="text-align: center;"><u>Parents</u></p> <ul style="list-style-type: none"> <li>- Evidence-based youth and parenting classes with a focus on potential youth substance use (i.e., WISE)</li> <li>- Information Dissemination re: Treatment Options</li> </ul>	<p style="text-align: center;"><u>Community</u></p> <ul style="list-style-type: none"> <li>- Safe Disposal of Needles</li> <li>- Safe Disposal of Prescription Medications</li> <li>- Safe Driving Laws</li> <li>- Education &amp; Awareness re: Naloxone</li> <li>- Information Dissemination re: Treatment Options</li> </ul>
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With the Assistance of the Following Potential Partners...

- Juvenile Probation
- Schools
- SA, Physical, and MH Treatment Providers

With the Assistance of the Following Potential Partners...

- Southern NV Health District
- Law Enforcement
- Partner Agencies/Sub-Recipients
- Health Care Partners

## Priority 3: Support Mental Wellness

NYECC will reduce the incidence of substance misuse by people of all ages by increasing awareness of Adverse Childhood Experiences (ACEs), reducing ACEs in children/youth, and building resiliency in the aftermath, especially in context of COVID-19. Work will specifically address grief (loss of people, loss of experiences, loss of potential futures), isolation, anxiety, and depression.

### By Addressing the Risk and Protective Factors of...

Early and Persistent Problem Behavior (R)	Rebelliousness (R)	Family Conflict (R)	Social, Emotional, Behavioral, Cognitive, Moral Competence (R)
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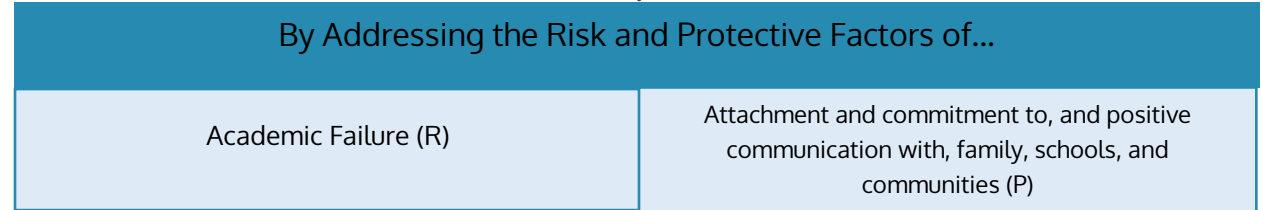
### Through the Following Potential Activities...

<p><u>Parents</u></p> <ul style="list-style-type: none"> <li>- Support evidence-based parenting classes with a focus on resiliency building and childhood development</li> <li>- Information Dissemination re: ACEs</li> <li>- Information Dissemination re: MH self-care and treatment options</li> </ul>	<p><u>All Adults</u></p> <ul style="list-style-type: none"> <li>- Support Community Health Workers in realm of MH</li> <li>- Information Dissemination re: Community Health Workers availability/capability</li> <li>- Education &amp; Awareness re: ACE's and linkages to MH and physical health outcomes</li> </ul>	<p><u>Schools</u></p> <ul style="list-style-type: none"> <li>- Support capacity of Multi-Tiered System of Support (i.e., offer Signs of Suicide Training and Screening, Suicide Prevention Group before &amp; after school, etc.)</li> </ul>	<p><u>Community</u></p> <ul style="list-style-type: none"> <li>- Build capacity for MH workforce through sponsoring internships, training, K-12 exposure to MH careers, AmeriCorps, etc.</li> <li>- Offer opportunities for inter-generational bonding in safe environments</li> </ul>
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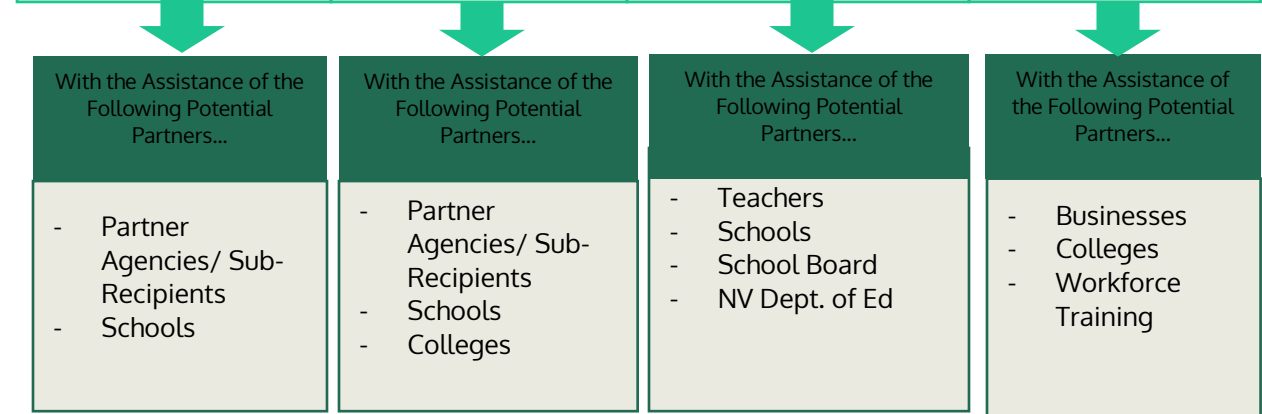
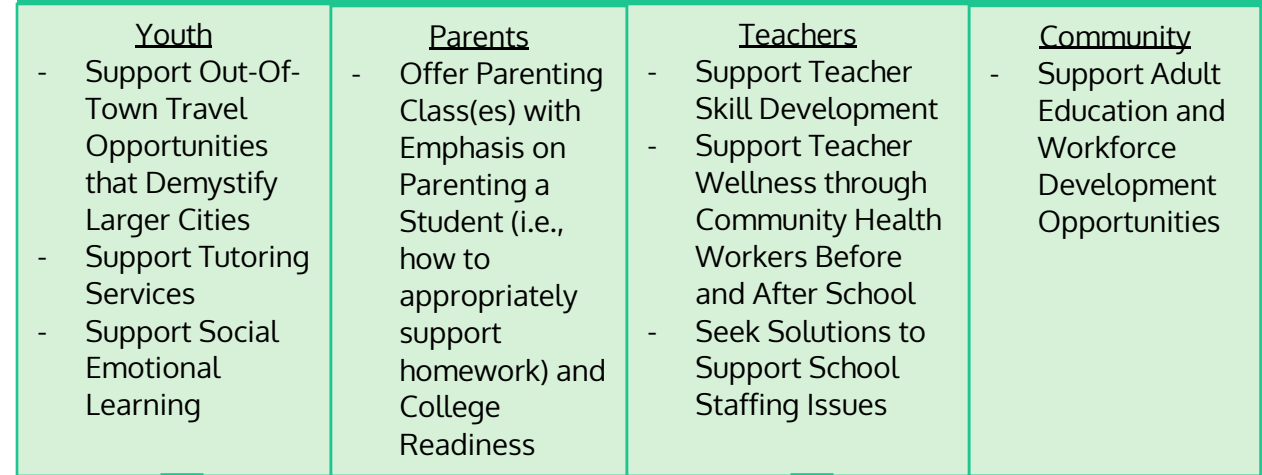
With the Assistance of the Following Potential Partners...	With the Assistance of the Following Potential Partners...	With the Assistance of the Following Potential Partners...	With the Assistance of the Following Potential Partners...
<ul style="list-style-type: none"> <li>-Partner Agencies/Sub-Recipients</li> <li>-Local Civic and Service Groups</li> </ul>	<ul style="list-style-type: none"> <li>-Partner Agencies/Sub-Recipients</li> <li>-Local Civic and Service Groups</li> <li>-Media</li> </ul>	<ul style="list-style-type: none"> <li>-Schools</li> <li>-Mental, Behavioral and Medical Care Providers</li> </ul>	<ul style="list-style-type: none"> <li>-Partner Agencies/Sub-Recipients</li> <li>-Local Health Care</li> </ul>

**Priority 4: Support Educational Attainment**

NyECC will reduce the incidence of youth substance use by supporting schools and other entities working to help youth catch up and excel academically in the wake of COVID-19



Through the Following Potential Activities...





**Priority 5: Reduce Isolation**

NyECC will reduce the incidence of substance misuse by people of all ages by reducing isolation.

By Addressing the Risk and Protective Factors of...

Low neighborhood attachment (R)	Attachment and commitment to, and positive communication with, family, schools, and communities (P)	Opportunities for Positive Social Involvement (P)	Bonding (P)
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Through the Following Potential Activities...

<u>Youth</u>	<u>Adults</u>
<ul style="list-style-type: none"> <li>- Host Youth Nights Throughout Service Area</li> <li>- Publicize Other Entities' Healthy Activities</li> <li>- Provide Opportunities for Youth to Safely Interact with Older Generations</li> <li>- Explore Partnerships with Mentoring and Advocacy Programs (i.e., CASA, Big Brothers/Big Sisters)</li> </ul>	<ul style="list-style-type: none"> <li>- Host Bingo or Similar Activities for All Age Groups</li> <li>- Support Yoga, Karate, Meditation/Stress Reduction and Other Healthy Activities for All Age Groups</li> <li>- Publicize Other Entities' Healthy Activities</li> </ul>

With the Assistance of the Following Potential Partners...

<ul style="list-style-type: none"> <li>- Schools</li> <li>- Recovery Community</li> <li>- Partner Agencies/Sub-Recipients</li> <li>- Agencies that Accept Volunteers</li> <li>- Faith Based Organizations</li> </ul>
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With the Assistance of the Following Potential Partners...

<ul style="list-style-type: none"> <li>- Senior living communities, RV Parks</li> <li>- Recovery Community</li> <li>- Partner Agencies/Sub-Recipients</li> <li>- Agencies that Accept Volunteers</li> </ul>
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**Priority 6: Promote Physical Wellness**

NyECC will reduce the incidence of substance misuse (opioids in particular) by people of all ages by supporting physical wellness from pre-conception through end of life.

By Addressing the Risk and Protective Factors of...

Early Initiation of Substance Use (R)	High Availability of Substances (R)	Self-Efficacy (P)
---------------------------------------	-------------------------------------	-------------------

Through the Following Potential Activities...

<u>Pre-Birth – 17 Years Old</u>	<u>Adults</u>	<u>Full Community</u>
<ul style="list-style-type: none"> <li>- Information Dissemination re: Healthy Pregnancy</li> <li>- Car Seat/Crib Safety</li> <li>- Support school-based healthcare workers</li> </ul>	<ul style="list-style-type: none"> <li>- Provide Opportunities to Interact w/Healthcare Providers (i.e., Walk with a Doc)</li> <li>- Offer Classes to Promote Health (i.e., Diabetes Management, Management of Other Chronic Illnesses, Managing Chronic Pain, Yoga, Meditation, Karate, etc.)</li> <li>- Remove Obstacles to Receiving Appropriate Medical Care (pets, travel, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>- Remote Area Medical Event</li> <li>- Information Dissemination re: Impaired and Distracted Driving</li> <li>- Information Dissemination re: Healthy Eating and Activity Levels</li> <li>- Build capacity for MH workforce through sponsoring internships, training, K-12 exposure to Health Careers, AmeriCorps, etc.</li> <li>- Coordinate countywide plan for referrals due to impracticability of 'medical home,' and to address social determinants of health such as food insecurity, unemployment, violence prevention, housing, transportation, isolation.</li> </ul>

With the Assistance of the Following Potential Partners...	With the Assistance of the Following Potential Partners...	With the Assistance of the Following Potential Partners...
<ul style="list-style-type: none"> <li>- Partner Agencies/ Sub-Recipients</li> <li>- Schools</li> </ul>	<ul style="list-style-type: none"> <li>- Partner Agencies/ Sub-Recipients</li> <li>- Local Healthcare</li> </ul>	<ul style="list-style-type: none"> <li>- Local Government</li> <li>- Local Healthcare</li> <li>- Partner Agencies/ Sub-Recipients</li> <li>- Media</li> <li>- NV Div. of Health</li> </ul>

## Implementation

*YACC Team  
Members working on  
a leadership  
development project.*



NyECC utilized a “Planning and Implementation” guide from their 2018-2021 CCPP to connect priorities to data to expected outcomes to strategies and activities. For the next three years (2021-2024) they will follow the priority graphics set forth in the planning section above.

NyECC’s Board of Directors reviews the Coalition’s activities on a monthly basis and has an annual review of all coalition activities. This offers an opportunity for Board Members to provide insight as well as ensuring that the efforts of the Coalition are focused on the vision and mission and are consistent with Coalition values.

NyECC implements multiple evidence-based substance misuse prevention and mental wellness programs throughout their service area. Current programs include:

Name of Program	Where Provided? (Town and County)
Community Chest/Dare To Be You (Pre-K)	Tonopah
Serenity Health/Botvin LifeSkills	Jail in Pahrump
7 <sup>th</sup> Judicial District Juvenile Probation/Botvin LifeSkills	Lincoln County
Nevada Outreach Training Organization/Nurturing Parenting Program and Two Families Now Program	Pahrump and Tonopah
Nye County School District/Triple P Positive Parenting (parents of Pre-K students)	Nye County
Erica’s Lighthouse	Pahrump Valley High School
I am the Change	Pahrump Valley High School
Alcohol Compliance Checks	Nye, Lincoln, and Esmeralda Counties
NyECC/Teen Outreach Program	YACC Youth Team Members in Pahrump
NyECC/Personal Responsibility Education Program	Pahrump High School Students (on NyECC’s campus)
NyECC/This is Not About Drugs	Nye, Esmeralda, and Lincoln County School Districts
Child Help Speak Up Be Safe	Pahrump Elementary Schools
Diabetes Self-Management	Nye, Esmeralda, and Lincoln Counties
Chronic Disease Self-Management	Nye, Esmeralda, and Lincoln Counties

These programs were chosen because they met needs identified in the community, they are based on research and proven effective, and because the communities have the capacity to deliver and sustain the programming.

Fidelity is monitored through the tools provided by the developer, by attending updated trainings, and oftentimes by trained staff sitting in on other staff's trainings.

Two programs (YACC and Alcohol Compliance) are undergoing a formal evaluation at this time. Their evaluation plans include logic models that include problem statements; goals and objectives; intended activities and whether they are evidence-based; process measures; and, short- and long-term outcome measures.

NyECC provides general substance misuse prevention and mental wellness training for staff and community members as needs arise in the community. One example is NARCAN. Some community events are led by youth:

We did some presentations about vaping to other youth in Tonopah.

-YACC Youth Team Member

NyECC refrains from implementing activities without the collaboration of at least one partner agency. Examples of some of community collaborated events in the past three years include:

Examples of NYECC Collaborative Activities 2020-2021	
Activity	Partner/Sector
Back-to-School Event	Nye County School District Local Businesses Local Medical Providers
Remote Area Medical	National Health Providers Local Medical Providers Governmental Agencies Nye County School District Local colleges/universities Local Businesses
Provider Directory	Local Social Service Agencies Governmental Agencies
Red Ribbon Week	Nye County School District Esmeralda County School District Lincoln County School District
Signs of Suicide	Nye County School District

## Evaluation

NyECC approaches evaluation from three directions. First, the Coalition itself has been evaluated (structures, leadership in the community, etc.) using the Collective Impact framework (Collective Impact). Findings are included in a separate document (“Nye Communities Coalition Evaluation and Learning Report 2021”).

The second approach to evaluation relates specifically to NyECC’s alcohol, tobacco and other drug use prevention goals over the past three years. The results are included in NyECC’s Evaluation of ATOD Prevention Efforts Report 2018-2021.

The third approach to evaluation relates to two of NyECC’s individual programs. In FY 2020/2021, NyECC chose to evaluate the impact of their Alcohol Compliance Check program and their Youth Advocates Changing Communities (YACC) Youth Team. The results of these program-specific evaluations will be included in Evaluation Reports that will be completed by Fall 2021. Other programs will be evaluated in future years.

Other activities, such as small group education efforts, are not evaluated separately.

Looking forward, NyECC will measure the impact of their current alcohol, tobacco and other drug use prevention activities as follows:

ATOD Evaluation Plan 2021-2024							
Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
1. Reduce Access to Alcohol, Tobacco, Marijuana and Opioids	# of Education and Awareness Events	Youth Perceptions of Access as measured by YRBS	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Information Dissemination Events	Youth substance use rates as measured by YRBS					
	# and Types of Partner Agencies Participating	Adult perceptions of youth access (qualitative)					

Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
<b>2. Intervention for Substance Misuse</b>	# of Education programs	Adult perceptions of resources for reducing harms (qualitative)	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Adults Participating						
	# of Youth Participating						
	# and Types of Partner Agencies Participating						
	# of Harm Reduction Activities Implemented						



Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve ?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
<b>3. Support Mental Wellness</b>	# of Education and Awareness Events	Youth self-reported mental wellness as measured by YRBS	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Information Dissemination Events	Youth substance use rates as measured by YRBS					
	# of Workforce Capacity Events/Activities Completed	Adult mental wellness and as measured by BRFSS					
	# of Adults Participating						
	# of Youth Participating						
	# and Types of Partner Agencies Participating						

Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve ?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
<b>4. Support Educational Attainment</b>	# of Education and Awareness Events	TBD	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Information Dissemination Events	Youth bonding with school and academic success as measured by YRBS					
	# of Out-of-Town Travel Opportunities for Youth	Adult Education and Workforce Training Completion Rates					
	# of Adults Participating						
	# of Youth Participating						
	# of Community Health Worker Interactions with Teachers						
	# of Adult Workforce Development Activities						
	# and Types of Partner Agencies Participating						

Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
<b>5. Reduce Isolation</b>	# of Opportunities for Positive Social Involvement for Youth hosted by NyECC	Adult Perceptions of Isolation vs. Bonding (Qualitative)	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Opportunities for Positive Social Involvement for Older Adults hosted by NyECC	Youth Perceptions of Isolation vs. Bonding (Qualitative)					
	# of Other Entities' Healthy Activities Promoted by NyECC	Youth substance use rates as measured by YRBS					
	# of Adults Participating	Adult mental wellness as measured by BRFSS					
	# of Youth Participating						

Priority	Process Measures ("Did we do what we said we were going to do?")	Outcome Measures ("Did what we do have an impact on our audience?")	In what ways did we address equity with this goal?	In what ways did we include community members in working toward this goal?	In what ways did we use data about this goal to learn, adapt, and improve ?	In what ways did we focus on program strategies?	What evidence do we have that systems have changed regarding this goal?
<b>6. Physical Wellnes s</b>	# of Education and Awareness Events	Increased knowledge/changed behaviors for Adults Completing Classes as measured by Program-Specific Pre/Post Tests	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews	Qualitative Notes, input from NyECC, focus groups, individual interviews
	# of Information Dissemination Events	Adult Education and Workforce Training Completion Rates					
	# of Participants (Patients and Health Care Providers) at RAM	Youth exposure to violence, and physical health rates as measured by YRBS					
	# of Opportunities for Interaction with Health Care Providers Completed	Adult physical health as measured by BRFSS					
	# of Adults Participating						
	# of Youth Participating						
	# and Types of Partner Agencies Participating						

	# and Types of Classes Offered						
	# of Adult Workforce Development Activities						

## Appendix A – Data

### About Data Sources

NyECC works diligently to make data-driven decisions. The following is a brief description of their primary data sources:

1. Nevada Youth Risk Behavior Survey (YRBS):

- Questions for the YRBS are determined at the State level and are not under the direct control of NYECC.
- Schools and classrooms are randomly selected within each county to receive the YRBS.
- The YRBS is typically administered every other year to middle school (grades 6, 7, 8) and high school (9, 10, 11, 12) students.
- UNR chooses to report results of the YRBS by individual county or by groups of counties. This approach increases confidentiality and anonymity in the less populated counties. At the same time, however, this type of aggregation may obscure results for an individual county.
- Active vs. passive consent policies have changed from school district to school district and over time. This distinction can have a dramatic impact on response rates and can skew results, making comparisons imperfect.

YRBS –High School (Nye, Lincoln, and Esmeralda)	
2017	2019
n=152	n=150

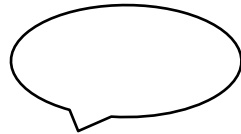
YRBS – Middle School (Nye, Lincoln, and Esmeralda)	
2017	2019
n=130	n=149

2. Qualitative Research

- This researcher conducted two focus groups (Tonopah and Pahrump), attended (virtually) three coalition meetings (Tonopah, Pahrump, Lincoln County), conducted approximately 16 individual interviews with adults, and conducted six interviews with youth. (Note: A parental consent form is

required for youth interviews). Because of the COVID-19 pandemic, these activities took place through video conferencing. They took place between June and September 2021. Interviewees and focus group participants were selected to represent various sectors in the communities (i.e. school district employees, parents, youth, law enforcement, faith based, etc.).

- Results from key informants and focus groups are indicated in conversation bubbles:



Even though the comments themselves are from one individual, they are included in this report only if they reflect a pattern of responses by others. Unless otherwise indicated, none of these comments should be interpreted to reflect the opinion of just one respondent.

3. The Behavioral Risk Factor Surveillance System (BRFSS) is a nationwide health-related telephone survey that collects data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services (Source: CDC). The State of Nevada, Department of Health and Human Services Office of Analytics, provided state and service area data for the purposes of this CCPP.

4. State of Nevada Substance Abuse Prevention and Treatment Agency 2020 Epidemiologic Profile.

**Domain: Community**

Wellness Dimension(s)
<b>Environmental.</b> Good health by occupying pleasant, stimulating environments that support well-being.
<b>Financial.</b> Satisfaction with current and future financial situations.
Risk and Protective Matrix Indicator
Low cost of alcohol
High availability of substances
Community laws and norms favorable to substance use
Media portrayal of alcohol use
Low neighborhood attachment
Community disorganization
Low socioeconomic status
Transitions and mobility

### Low Cost of Alcohol

This researcher was not able to locate any local data for this indicator. The State of Nevada ranks 39<sup>th</sup> (out of the 50 states and DC) for excise tax rate for alcohol (Scarboro 2017)). In other words, there are 12 states where alcohol is taxed at a lower rate per gallon. In addition, Hines' state-by-state research revealed that of the two types of alcohol analyzed for each state, there were only nine instances (or 9%) where Nevada was not the least expensive (2018). The CDC's Prevention Status Report (2013) recommended that the State of Nevada increase taxes on state beer, wine, and distilled spirits to reduce harms associated with over-consumption.

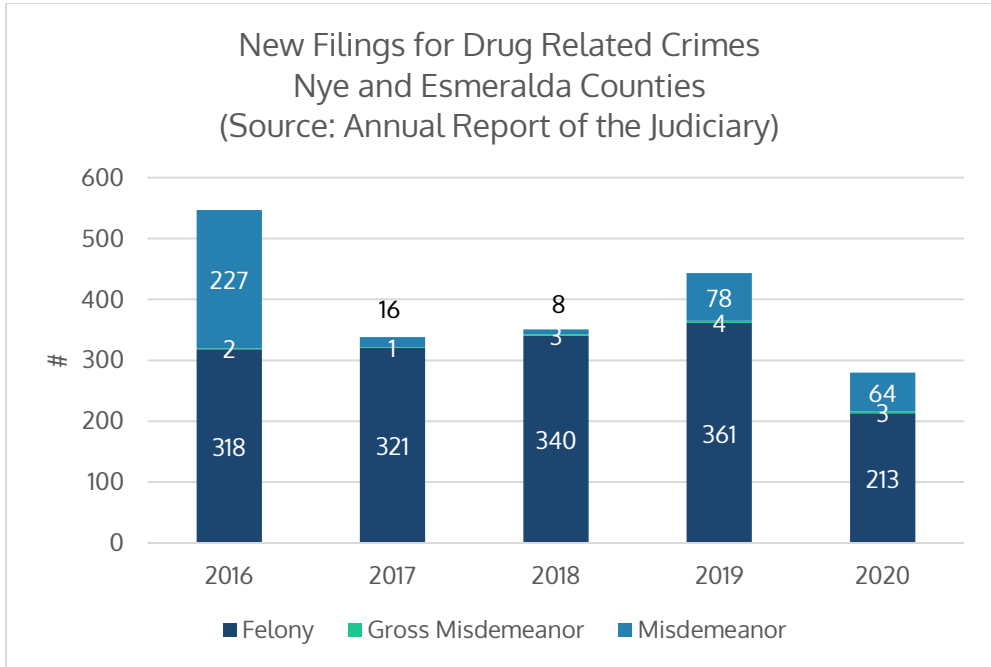
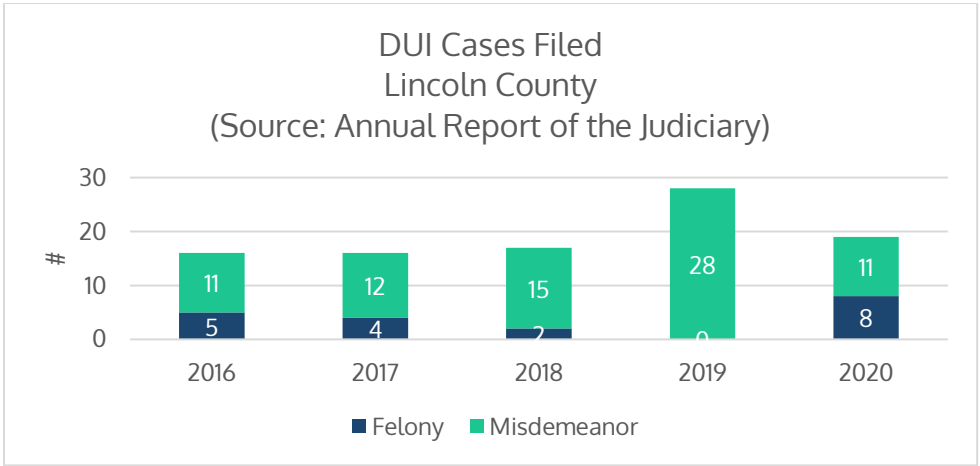
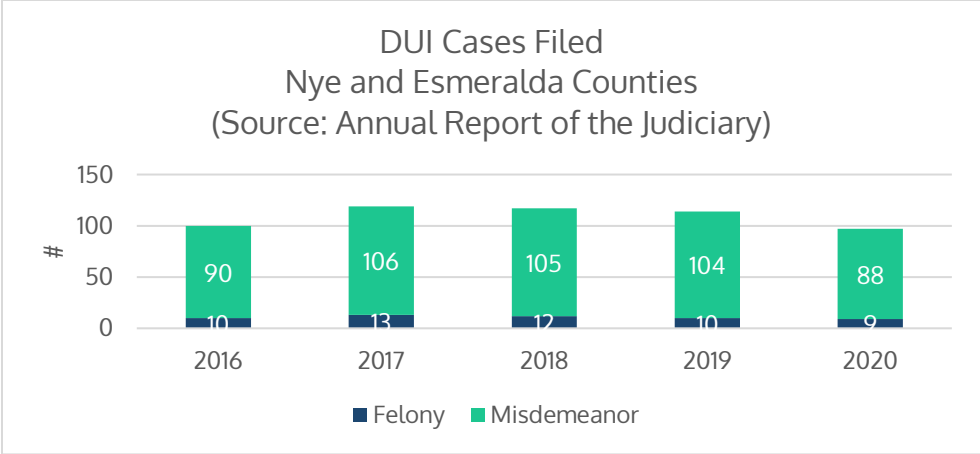
### Community Laws and Norms Favorable to Use

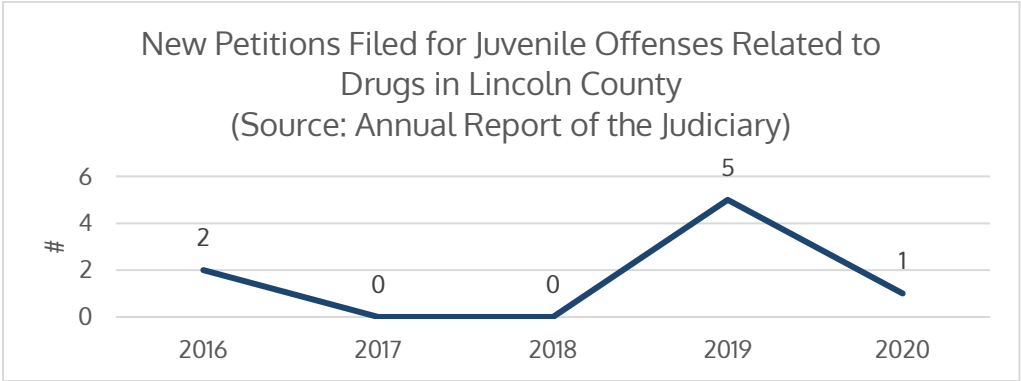
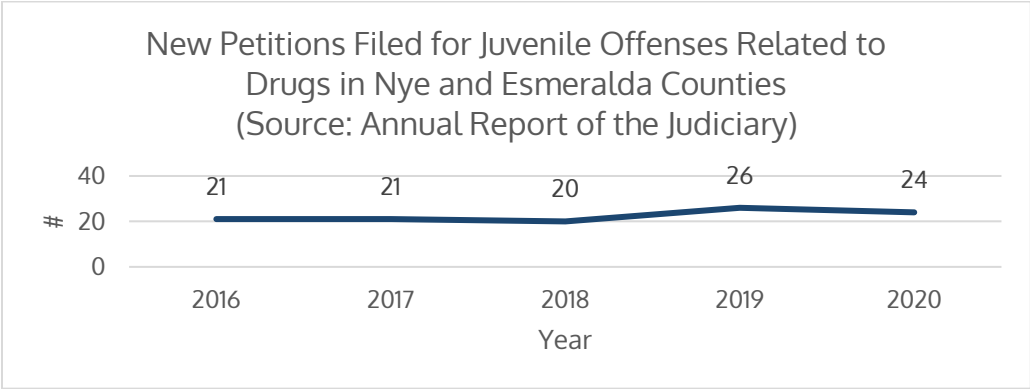
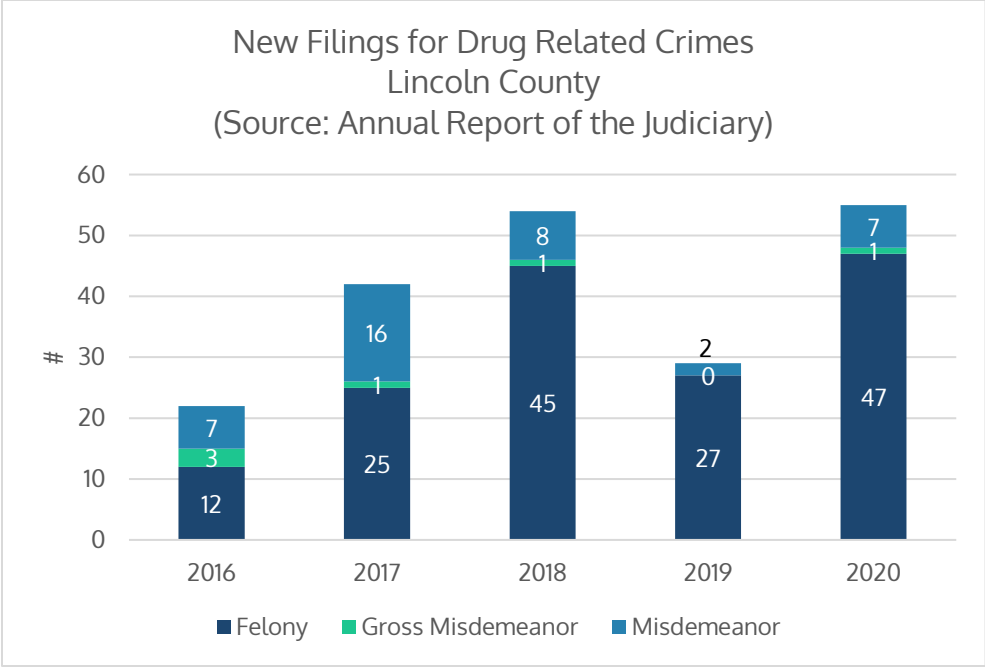
We [YACC Team] used to host youth nights, which were awesome. We had to stop that with COVID. There isn't a lot for teens to do here. There are a lot of casinos and bars. So those were really great. I hope we can get back to hosting those. We've adapted to COVID as gracefully as we could. We're trying to come back. As teenagers we're just figuring out how to handle social interactions anyway, not we are having to re-learn how to express ourselves and communicate with each other.

-YACC Youth Team Member

*Note: Nye and Esmeralda Counties are served by the 5<sup>th</sup> Judicial District Court. Lincoln County is served by the 7<sup>th</sup> Judicial District Court.*







*Note: The graphs above represent cases filed; they should not be construed to represent convictions or other legal dispositions. One should also keep in mind that the number of cases filed can be influenced by a myriad of factors, including policy*

*changes; law enforcement staffing levels; culture of district attorney's office; demographics, etc.*

Everyone knows who the druggies are. It's just ignored. But when someone new starts using...I don't know...it's like deny, deny, deny. Maybe we could have a training about how to approach someone without being judgmental, like the mental health trainings. In those we're learning to say, 'hey, you seem like you are struggling. Are you thinking about hurting yourself?' Why can't we do that with alcohol or drugs?

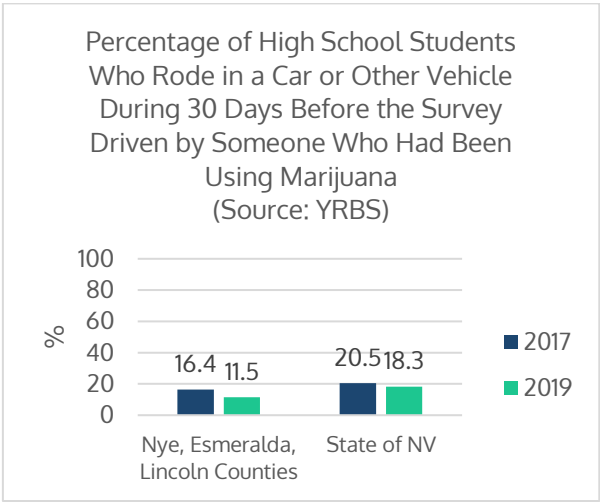
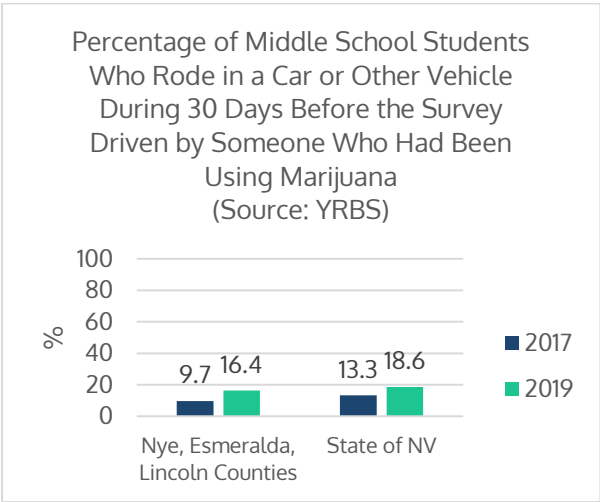
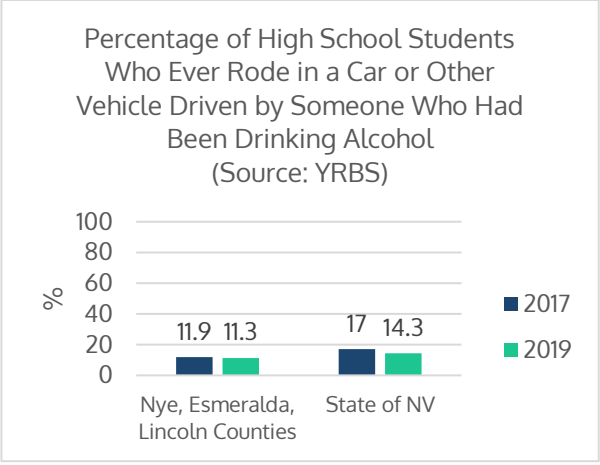
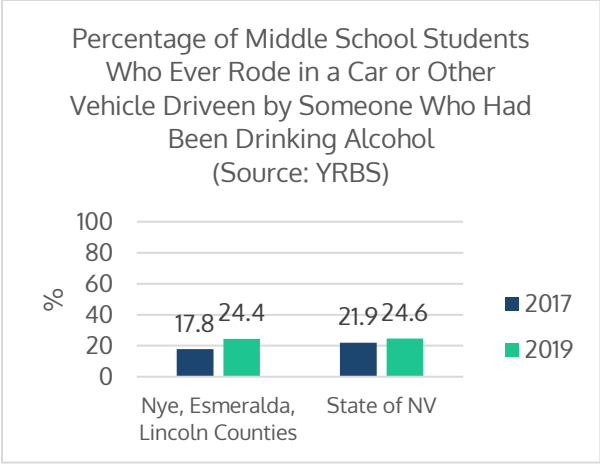
-Focus Group

*Alcohol - Laws and Norms*

- There is evidence to suggest that the current COVID-19 crisis has led to increased consumption of alcohol throughout the nation (American Heart Association News). Residents of Nye, Esmeralda, and Lincoln Counties are not likely to be exceptions to this trend and, in fact, some residents noted alcohol shortages in local stores.

Alcohol use is accepted and expected in young people. Nobody even gives it a second thought and they are surprised when you say something.

-Law Enforcement



Number of Fatal Impaired Driver Crashes Having a BAC of 0.08 or Higher 2015-2019 (Source: zerofatalitiesnv.com/Nevada Traffic Safety Crash Facts)		
Nye County	Esmeralda County	Lincoln County
23	6	4

*Tobacco – Laws and Norms*

Tobacco use in all its forms are higher among adults in the service area than in the State of Nevada as a whole (see adult mental and behavioral section below). All communities within the service area have laws in place prohibiting youth under 18 years of age from purchasing tobacco products.

*Marijuana – Laws and Norms*

From the playground of one of the elementary schools you can see and smell the hemp grow operation. I drive by the processing facility on my way to school. The younger kids complain about the smell. The older kids make jokes about weed. The community seems to accept it, but I don't know. I'm not sure what kind of message we are sending them.

-School Representative

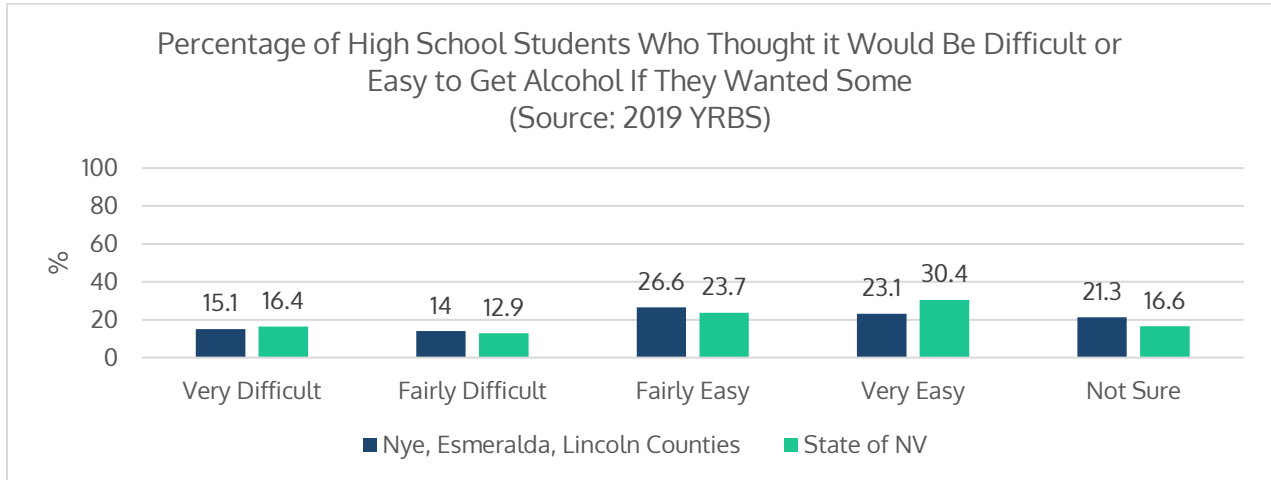
*Prescription and Other Drugs – Laws and Norms*

- Stephen M. Taylor, MD, MPH, American Society of Addiction Medicine, "...the issue isn't so much an opioid epidemic as really an epidemic of the disease of addiction, which is not a drug-specific disease" (AMA COVID-19 daily video update <https://www.ama-assn.org/delivering-care/opioids/ama-covid-19-daily-video-update-health-experts-discuss-nations-drug>).

Drug-Related Emergency Department Encounters Age-Adjusted Rates by Drug Type and Coalition/Rate per 100,000 (Source: State of Nevada 2020 Epidemiologic Profile)						
	Opioids	Heroin	Cocaine	Methamphetamine	Marijuana	Hallucinogens
NyECC	249.0	20.5	19.4	414.2	254.5	9.1
State of NV	200.1	10.4	70.7	489.1	382.7	19.9

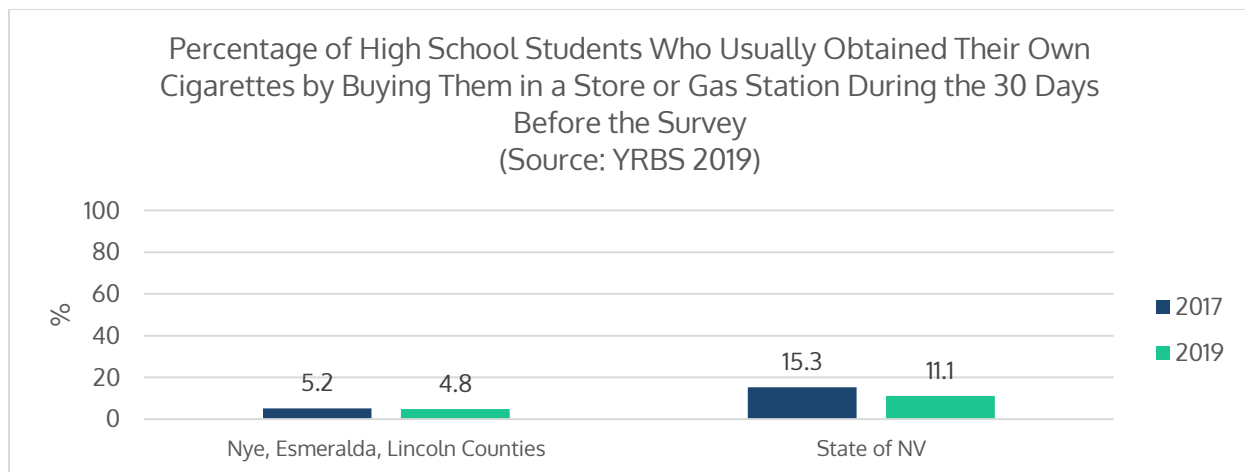
## High Availability of Substances

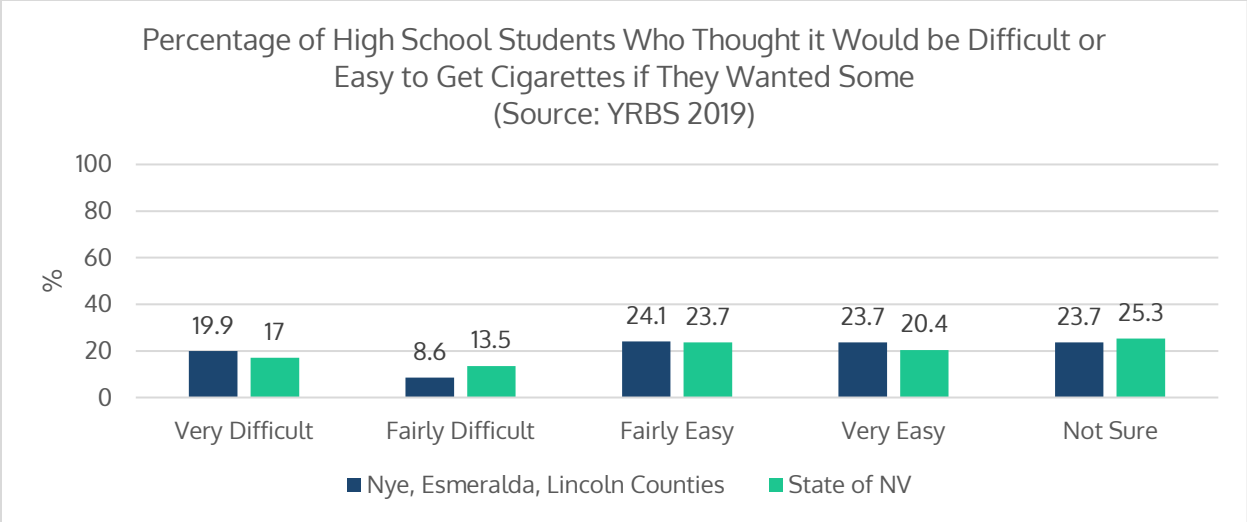
### Alcohol Access



- The CDC's Prevention Status Report (2013) found that Nevada's policies concerning local authority to regulate alcohol outlet density were effective.

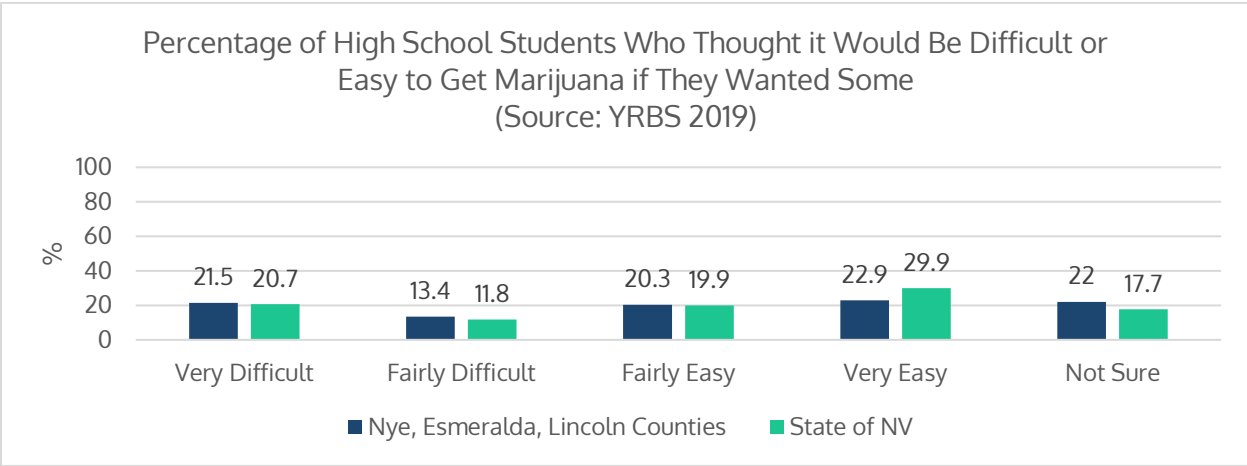
### Tobacco Access



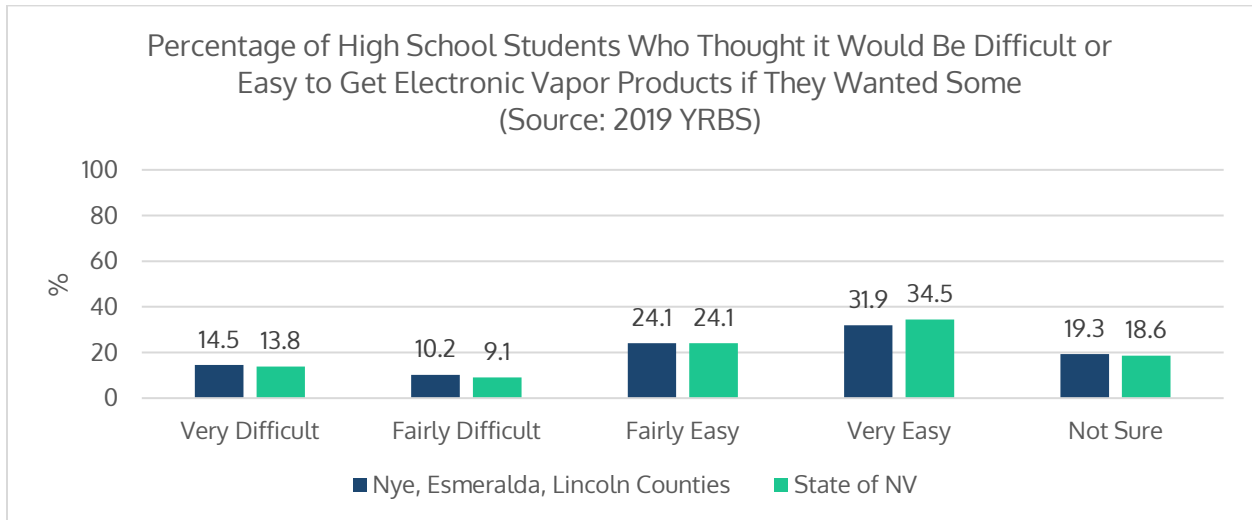
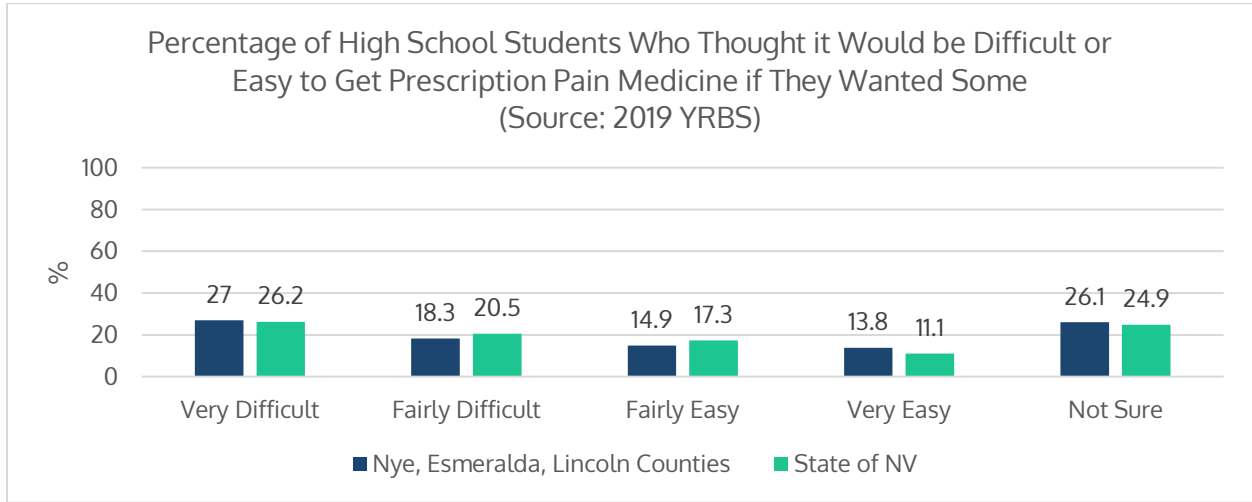


**Marijuana Access**

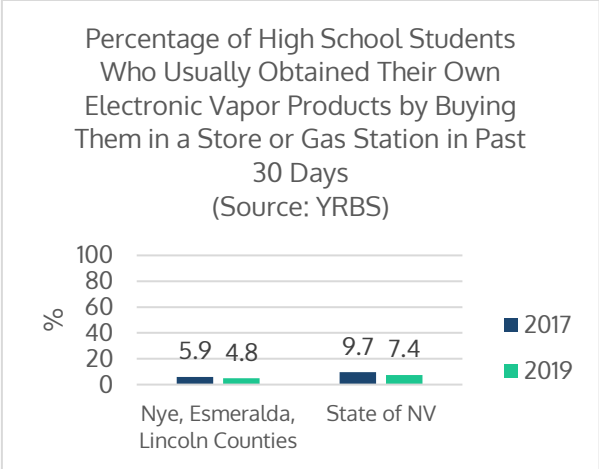
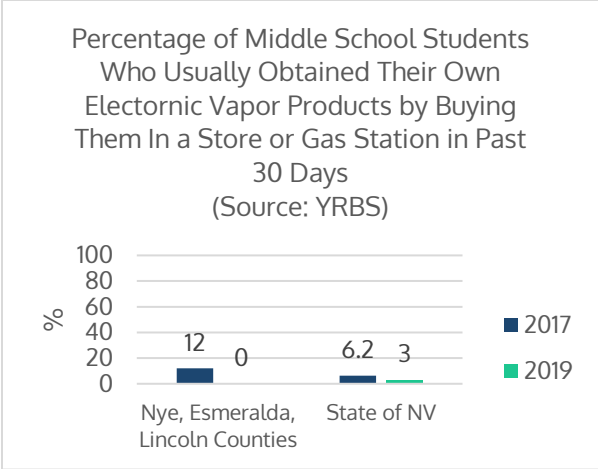
The use of recreational marijuana was legalized in the State of Nevada in 2017. There is currently one marijuana dispensary in Nye County. There are none (medical or recreational) in the other two counties in the service area (Esmeralda and Lincoln).



## Prescription and Other Drug Access

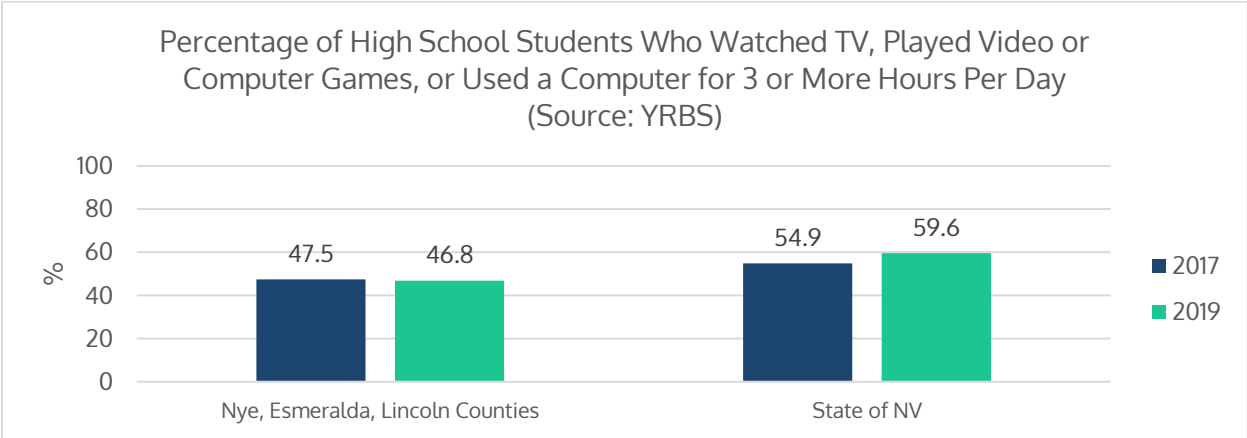






**Media Portrayal of Alcohol Use**

This researcher could find no measure of how often young people in the community are seeing media portrayal of alcohol use. High school students in the service area appear to have less exposure to some media outlets than their counterparts throughout the State of Nevada.



## Low Neighborhood Attachment

Our community (Pahrump) is very spread out. People don't live really close to neighbors. I see a lot of people who move here because they don't feel like they fit in elsewhere, but then they end up forming these supportive little communities. I see it on Facebook, 'Hey, I need help with this or that' and then people jump in to help. It's sometimes like a community of self-defined misfits who find ways to fit together.

-Social Worker

We seem to have a lot of older people, and then a lot of young families. We have pockets of poverty, and then we have wealthy retirees. There isn't much in between, probably because there aren't a lot of high paying jobs. But there is a lot of conflict between the generations, a lot of judging each other.

-Non-Profit

Our kids need a safe place to go to connect with each other and maybe build some skills. We are sometimes reluctant to spend money on kids in our communities because there are so many retirees.

-Social Worker

## Low Socioeconomic Status

Interviewer: You briefly mentioned racism, so if it's ok I'd like to ask you a couple of things about that...from your experience I mean.

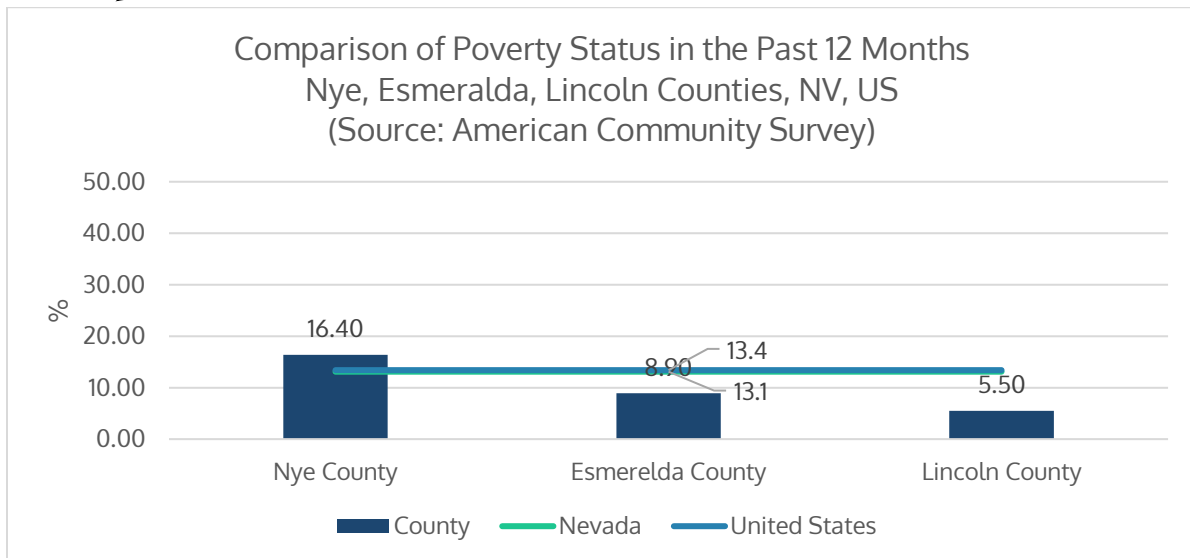
Interviewee: Oh, you're just going there, huh? [laughs]

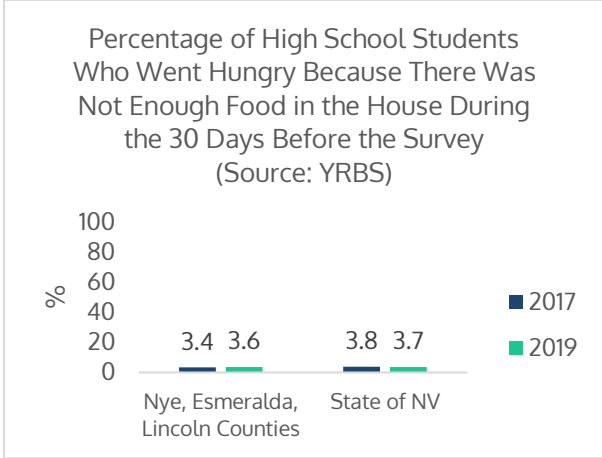
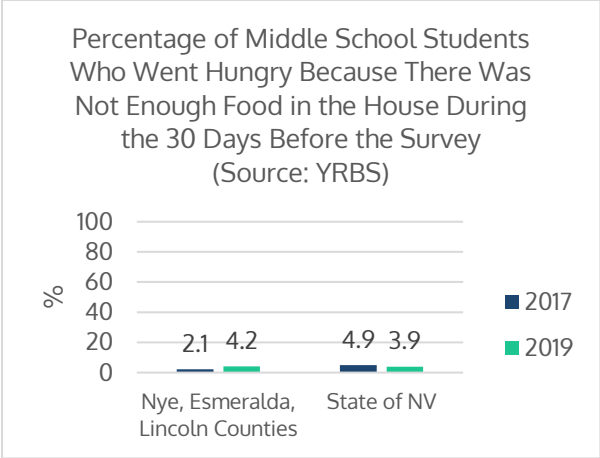
Interviewer: Yes, if you're ok with it. I've had a couple people mention it and I want to hear your experience if that's ok.

Interviewee: Yes, I'm glad we're going there. Yes, there is a lot of racism here. I am old enough to just let it roll off me. I don't get too worried. But there are not a lot of brown people here. I certainly feel the judgment. I see the looks. I get ignored.

Interviewer: How about your interactions with NyECC?

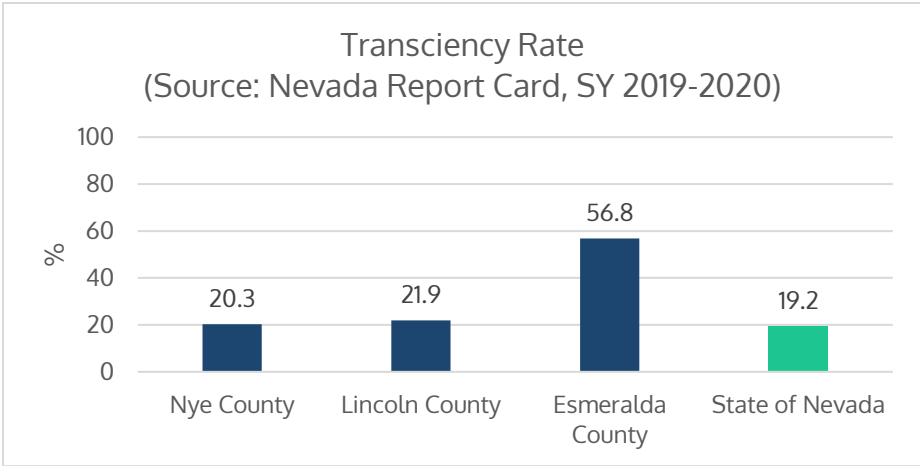
Interviewee: Oh, no! The community, yes, absolutely. NyECC? Never. Stacy is awesome. She truly models how we should all be acting as human beings.





### Transitions and Mobility

As has been discussed in this document, NyECC’s service area is comprised of several communities spread over a large geographic region. Population stability in most of these communities is highly impacted by fluctuations in the natural resource industry (primarily mining). Casinos also tend to attract a somewhat more transient population than other industries.



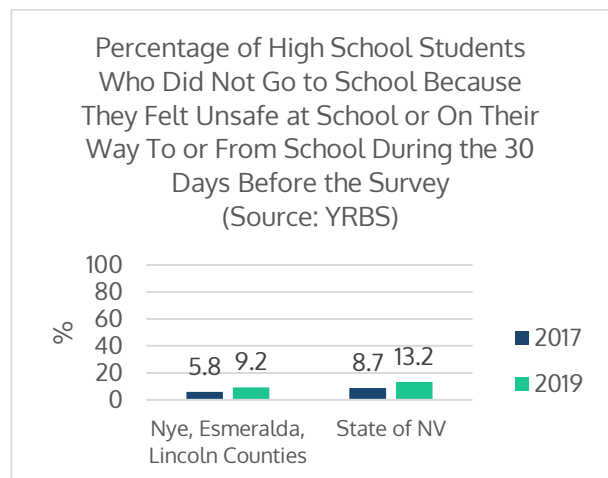
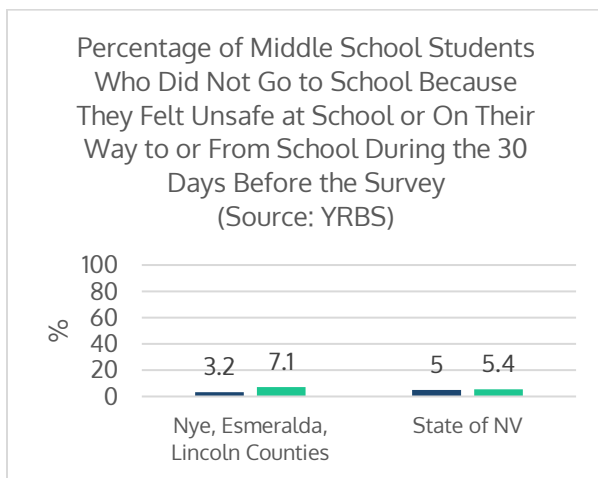
For a long time, Pahrump was pretty much a retirement community. But now I'm seeing a lot of people with families moving in. Maybe the family member living here is doing ok, so others will move in to get help.

-School Representative

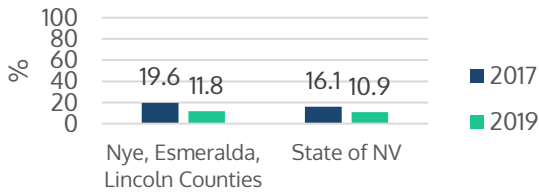
The 2021 Point in Time Count (Point in Time) identified the following numbers of homeless in each county:

Individuals Experiencing Homelessness in Nye County (Source: Rural Nevada Continuum of Care 2021 Point-In-Time Count)				
	Counted by Shelter/Providers	Unsheltered/Street Count	Motel Count	School Count
Nye County	NA	58	11	227
Esmeralda County	NA	0	0	4
Lincoln County	NA	2	NA	33

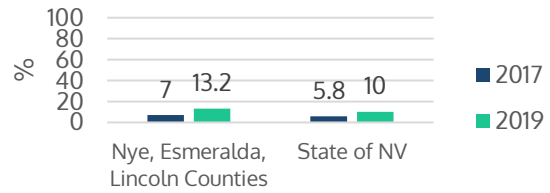
### Being a Victim of Violence (other than at home)



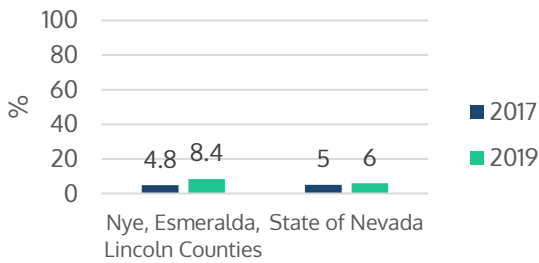
Percentage of Middle School Students Who Were In a Physical Fight on School Property During the 12 Months Before the Survey (Source: YRBS)



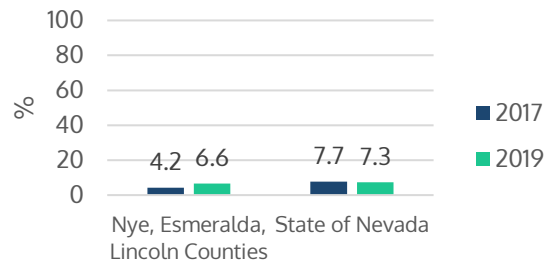
Percentage of High School Students Who Were in a Physical Fight on School Property During the 12 Months Before the Survey (Source: YRBS)



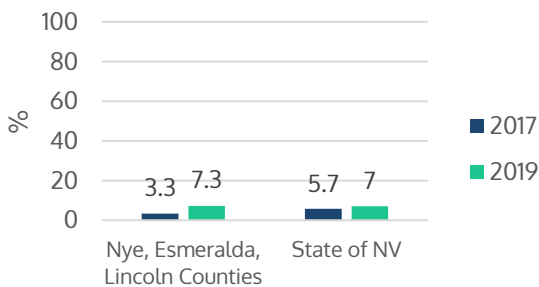
Percentage of Middle School Students Who Were Threatened or Injured by Someone with a Weapon on School Property During the 12 Months Before the Survey (Source: YRBS)



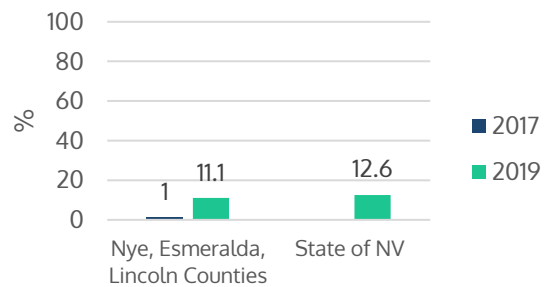
Percentage of High School Students Who Were Threatened or Injured by Someone with a Weapon on School Property During the 12 Months Before the Survey (Source: YRBS)

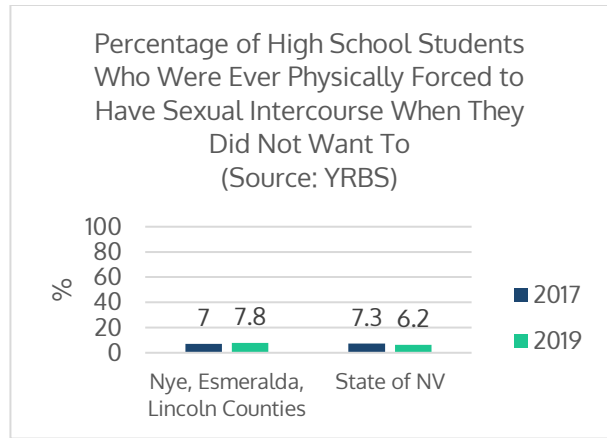
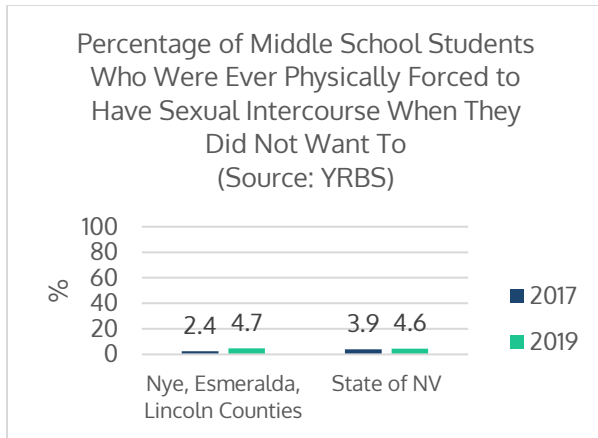


Percentage of High School Students Who Experienced Physical Dating Violence During the 12 Months Before the Survey (Source: YBS)



Percentage of High School Students Who Experienced Sexual Dating Violence During the 12 Months Before the Survey (Source: YRBS)



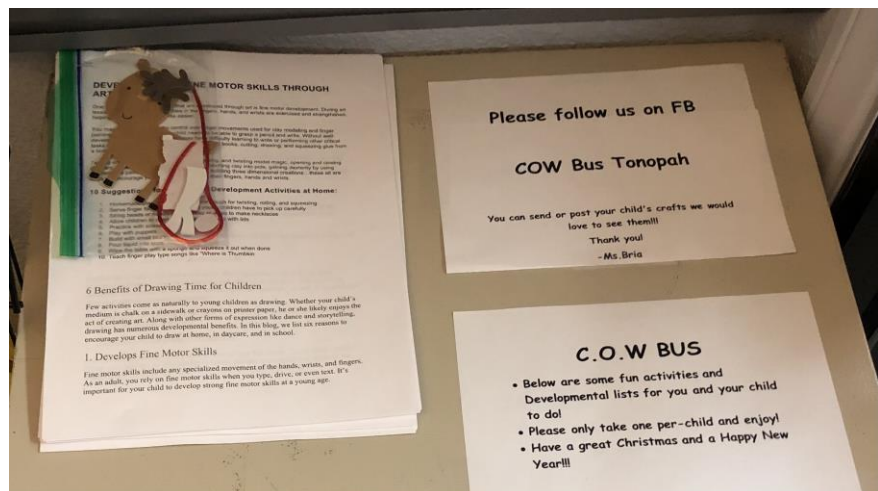


Domain: School

Wellness Dimension(s)
<b>Intellectual.</b> Recognizing creative abilities and finding ways to expand knowledge and skills.
<b>Occupational.</b> Personal Satisfaction and enrichment derived from one's work.
Risk and Protective Matrix Indicator
Academic failure beginning in late elementary school
Lack of commitment to school

School districts in the service area adopted various policies and procedures in response to the COVID-19 pandemic. Some adopted masks earlier than others, some adopted hybrid learning while others stayed in-person learning.

*Take-home learning activities for pre-school youth and families provided by NyECC-funded program during COVID-19 pandemic.*



The negative aspects of each of these approaches have been well-documented by this point in the pandemic. Some problems expressed by youth in this service area include:

- There is no time for the students to socialize with one another.
- The students are interacting with fewer teachers per day so may not be bonding with any particular teacher as they normally might.
- Students who participate in sports are losing the physical outlet, which may be impacting their mental health.
- The various nuances of the hybrid program may be undermining the basic ability of young people to learn, which might impact their academic achievements for years to come.
- Extreme isolation is negatively impacting mental health.

COVID closures were a mess for everyone. I'm thinking now that we're re-opening that we might be able to re-establish and even make stronger feedback loops between schools and supportive services and families. People are desperate for it. We might as well be strategic about it.

-Non-Profit

NyECC made attempts to bridge these gaps and reduce the impacts of isolation on youth in its service area. In some cases, NyECC staff would drop off (or have youth pick up) materials then host a virtual meeting for youth to cook, have a hang out session, or do some lighter programming. NyECC also held distance meetings in parks and open areas where participants stayed at least six feet apart.

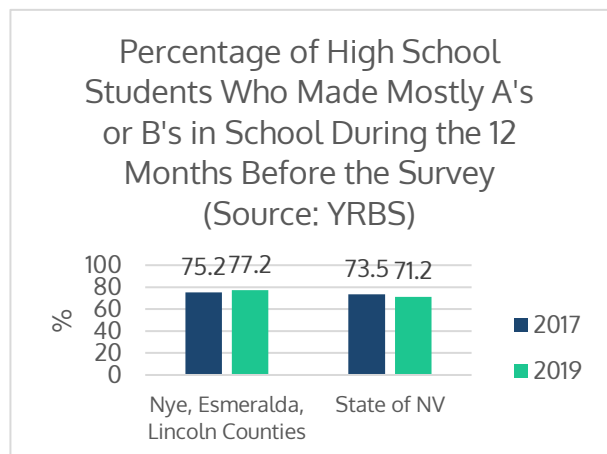
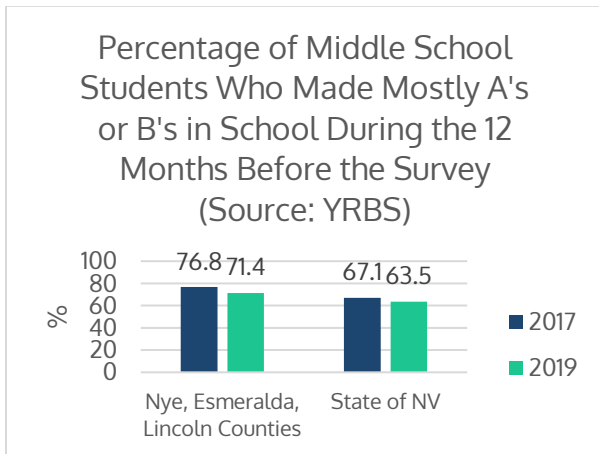
Cohort Graduation Rates (Source: Nevada Report Card SY 2019/2020)	
	Cohort Graduation Rate
Nye County	79.96%
Esmeralda County	NA
Lincoln County	87.84%
Nevada	84.11%

Nevada ranks second state from the last in the United States in terms of "Chance of Success" (*Source: Education Week 2021*).



Highest Level of Educational Achievement for Population 25 Years and Older (Source: American Community Survey)						
	Less than High School	High School Graduate	Some College, no Degree	Associate's Degree	Bachelor's Degree	Graduate or Professional Degree
Nye County	13.9%	38.9%	27.2%	9.2%	7.3%	3.5%
Esmeralda County	11.7%	40.6%	24.8%	6.8%	11.8%	4.2%
Lincoln County	13.8%	34.3%	24.7%	7.6%	12.1%	7.5%
Nevada	13.1%	27.8%	24.6%	8.8%	16.7%	9%
United States	11.4%	26.9%	20%	8.6%	20.3%	12.8%

### Academic Failure Beginning in Late Elementary School

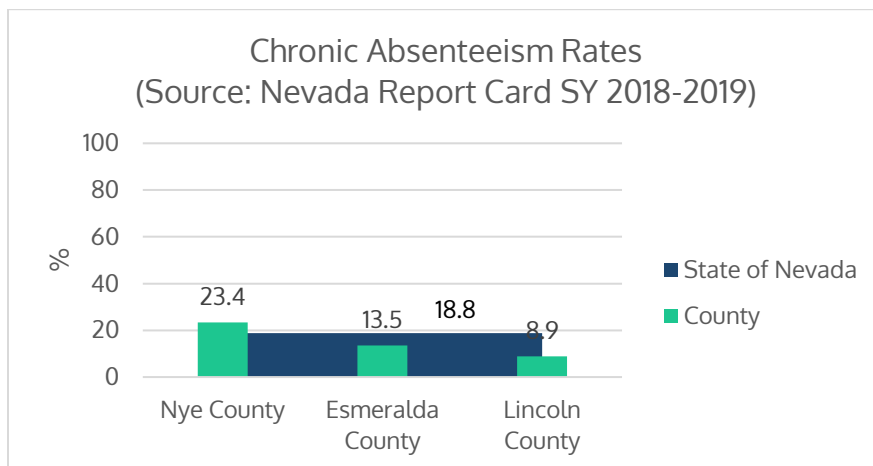


We could really use some tutors. Our teachers are stretched thin.

-Law Enforcement

Selected Childhood Disability Rates per 1,000 Enrolled Students (Source: Nevada Rural and Frontier Health Data Book 2020)		
	<i>Developmentally Delayed/ Mental Retardation</i>	<i>Learning Disability</i>
Nye County	14.4	68.9
Esmeralda County	NA	NA
Lincoln County	11.8	52.2
Nevada Totals	12	55

### Lack of Commitment to School

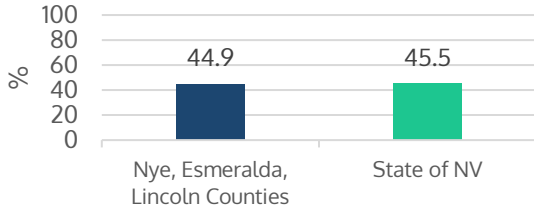


*Note: Some absences in this service area are due to students having to travel long distances for medical appointments. Some of the schools in the service area have moved to a 4-day week to try to accommodate this need. According to district personnel, this has not reduced absenteeism as much as they had hoped.*

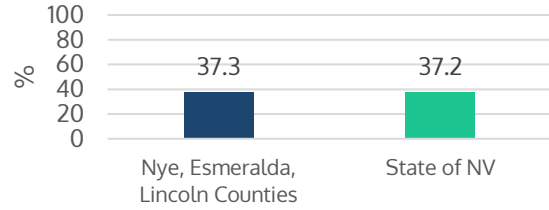
I work with a lot of dual enrolled students [high school students taking college courses]. They often have very low expectations for themselves for the future. They will tell me 'college is for rich kids.' I love it when I can make a connection with one of them to see a bigger future for themselves. A lot of their families have an open disdain for education, though, so it is hard to get them motivated to keep going.

-Secondary Education

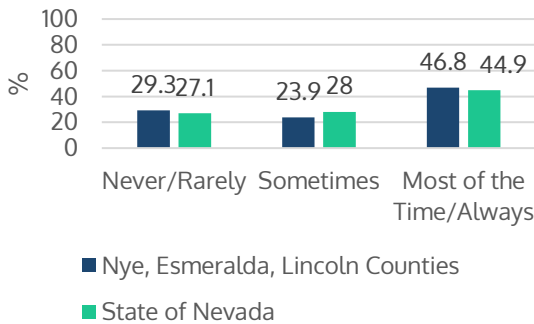
Percentage of Middle School Students Who Felt Close to People at Their School "Most of the Time" or "Always" (Source: YRBS 2019)



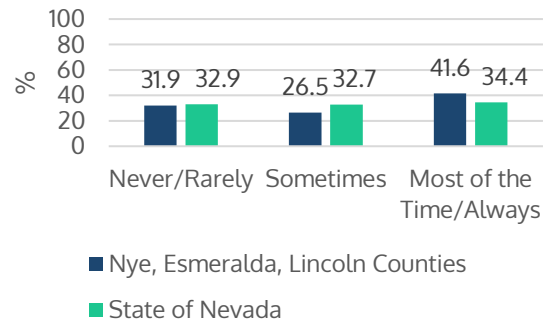
Percentage of High School Students Who Felt Close to People At Their School "Most of the Time" or "Always" (Source: YRBS 2019)



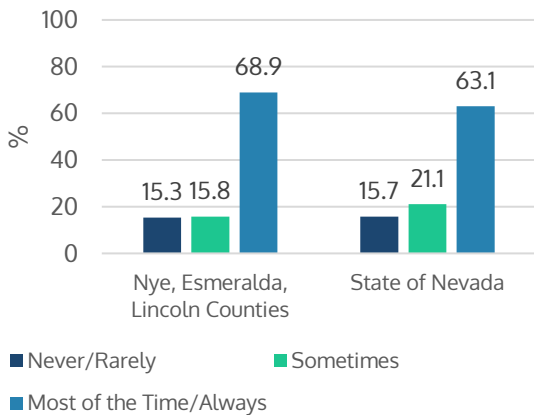
Percentage of Middle School Students Who Were Happy to be at Their School (Source: YRBS 2019)



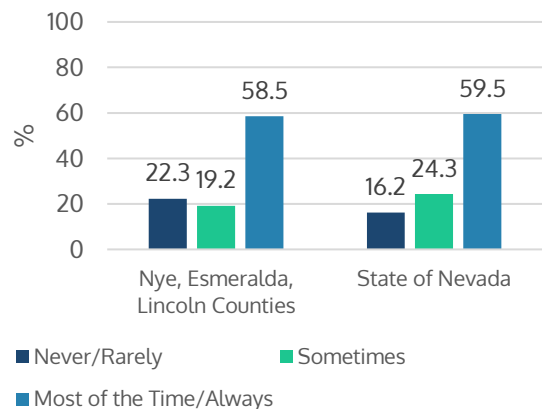
Percentage of High School Students Who Were Happy to be at Their School (Source: YRBS 2019)



Percentage of Middle School Students Who Reported that their Teachers at their School Treat Students Fairly (Source: YRBS 2019)



Percentage of High School Students Who Reported that their Teachers at their School Treat Students Fairly (Source: YRBS 2019)

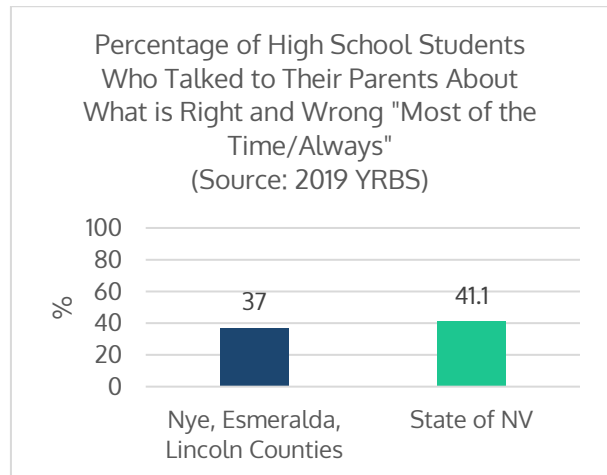
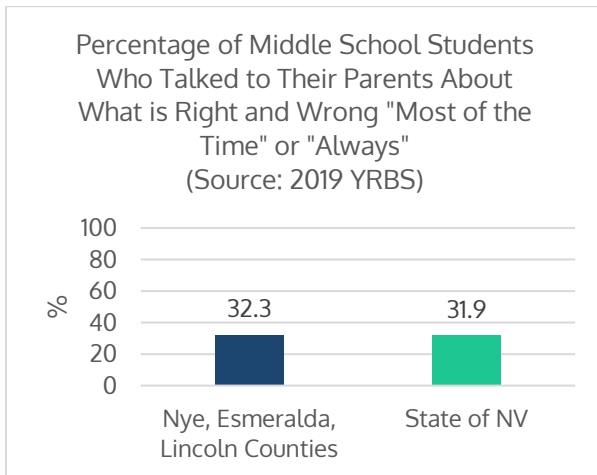


Risk and Protective Matrix Indicator
Family management problems (monitoring, rewards, etc.)
Family conflict
Favorable parental attitudes
Family history of substance misuse

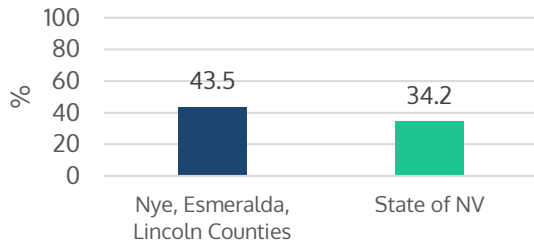
### Family Management Problems

Older people don't expect young people to care about things. Or to even know about things. It's really cool to surprise them like that and them to actually listen to you.

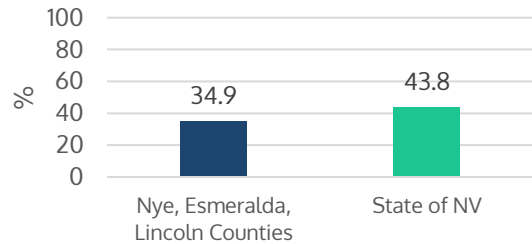
-YACC Youth Team Member



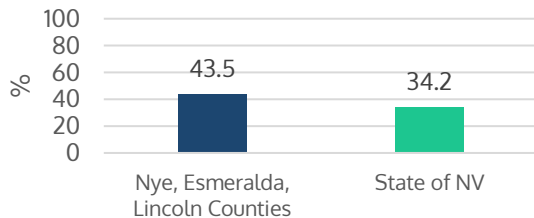
Percentage of Middle School Students Who Felt Comfortable Talking to Their Parents About Personal Matters "Most of the Time" or "Always"  
(Source: 2019 YRBS)



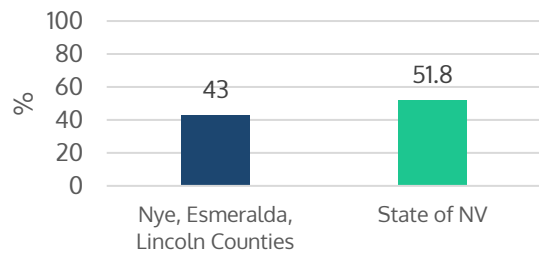
Percentage of High School Students Who Felt Comfortable Talking to Their Parents About Personal Matters "Most of the Time" or "Always"  
(Source: 2019 YRBS)



Percentage of Middle School Students Who Talked to Their Parents or Other Adults in Their Home About Their Problems "Most of the Time" or "Always"  
(Source: 2019 YRBS)



Percentage of High School Students Who Talked to Their Parents or Other Adults in Their Home About Their Problems  
(Source: 2019 YRBS)



I had some trouble with my son awhile back. I know NyECC, I know all these non-profits, I know everyone, and I'm telling you there was nothing for us. Thankfully he wasn't addicted to anything, and he didn't seem to have any kind of mental health situation, but he was using. We didn't even know it. He got caught by someone else. We just had to do what we thought was best. We cracked down on his cell phone, kept a close eye on his free time, kept him busy. But it really struck me that there is nothing for families who are in between.

-Parent

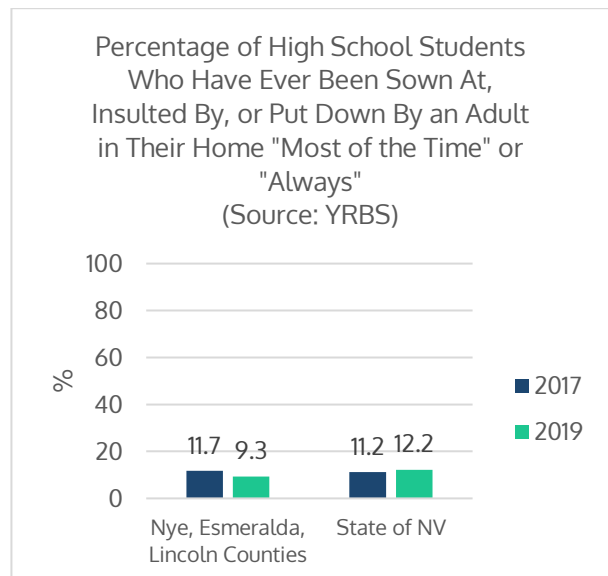
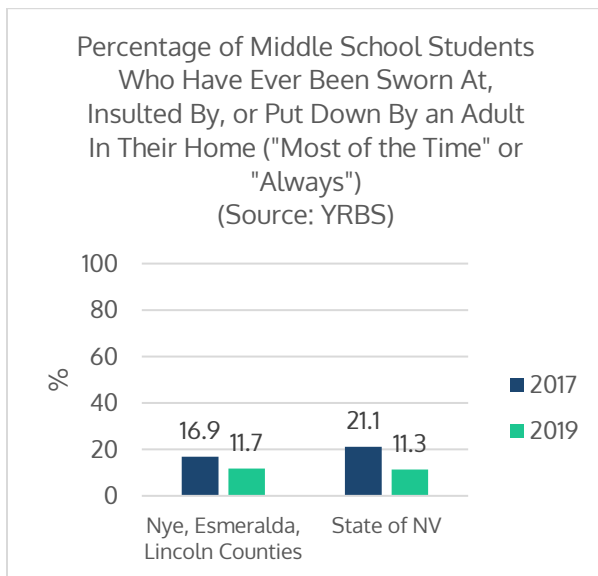
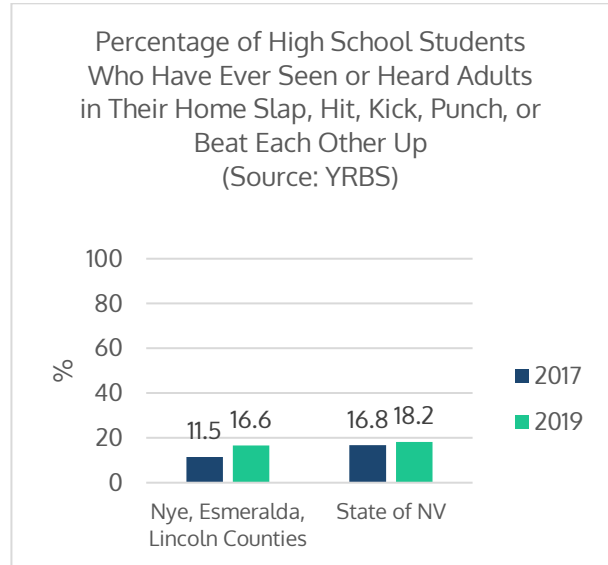
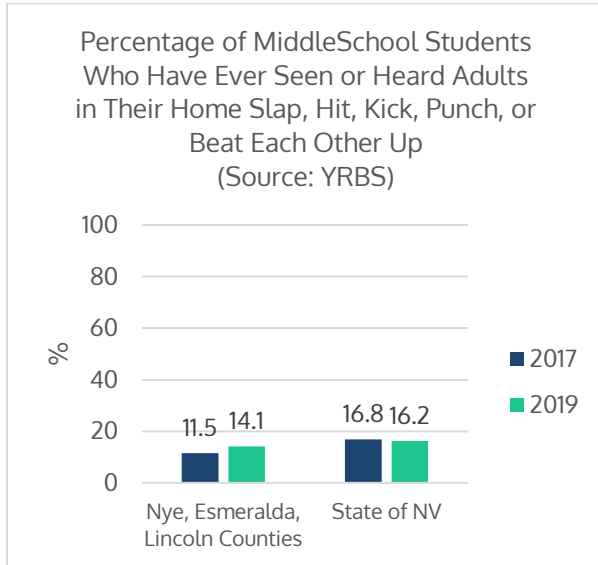
In my opinion, ATOD use seems to start with one parent who doesn't care what their kid does. They might buy them alcohol. And then the kid's friends have access and it grows from there..

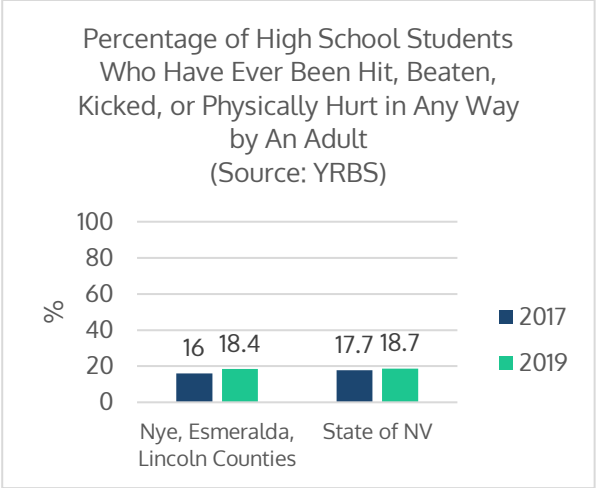
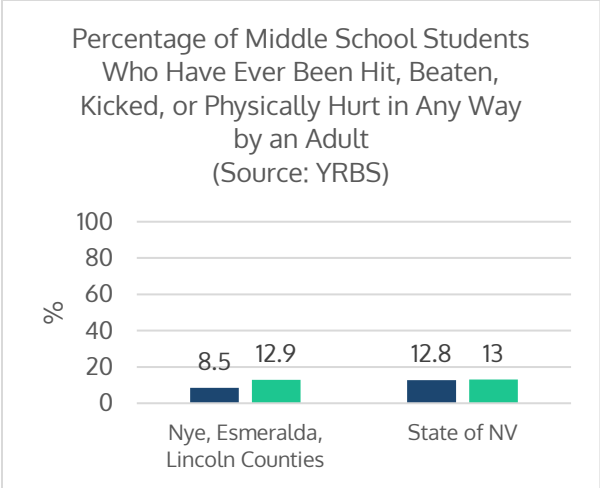
-YACC Youth Team Member



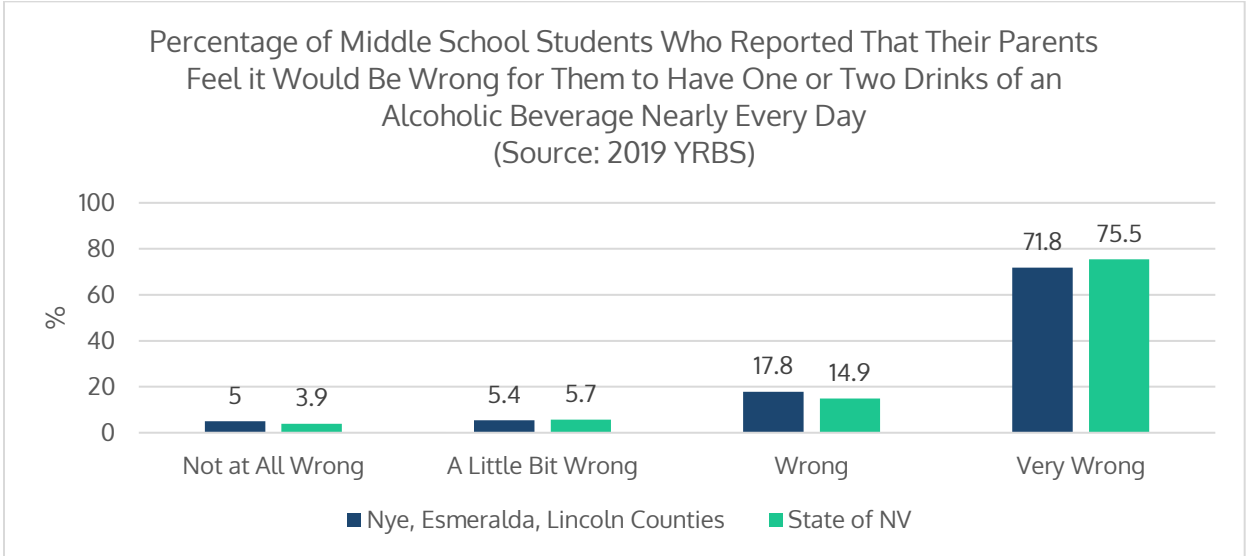
*Family visiting NyECC table during community event. Photo credit: NyECC*

## Family Conflict



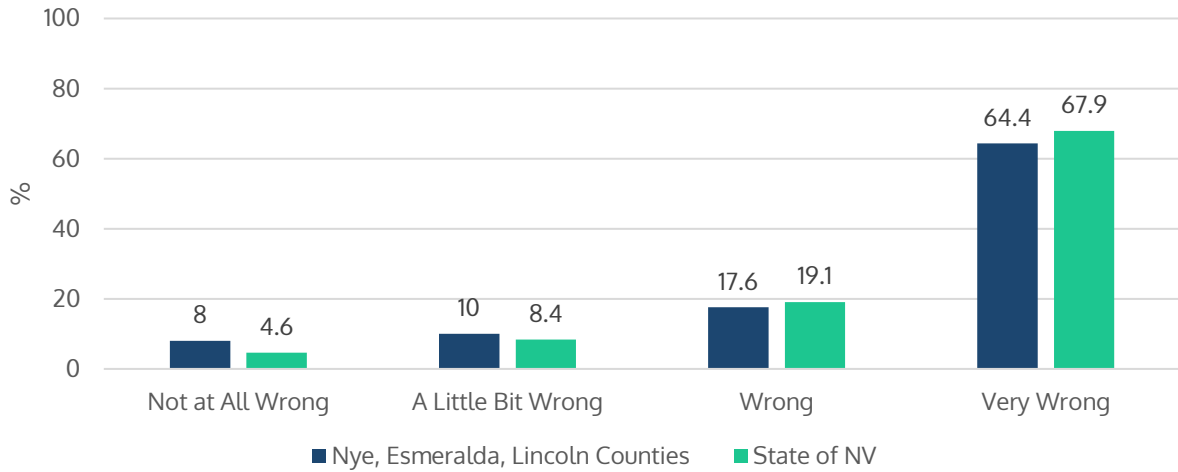


Favorable Parental Attitudes

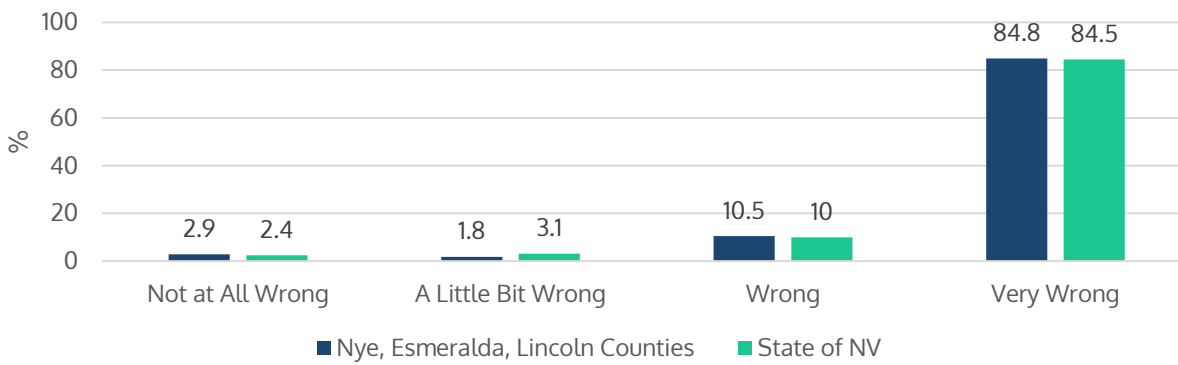


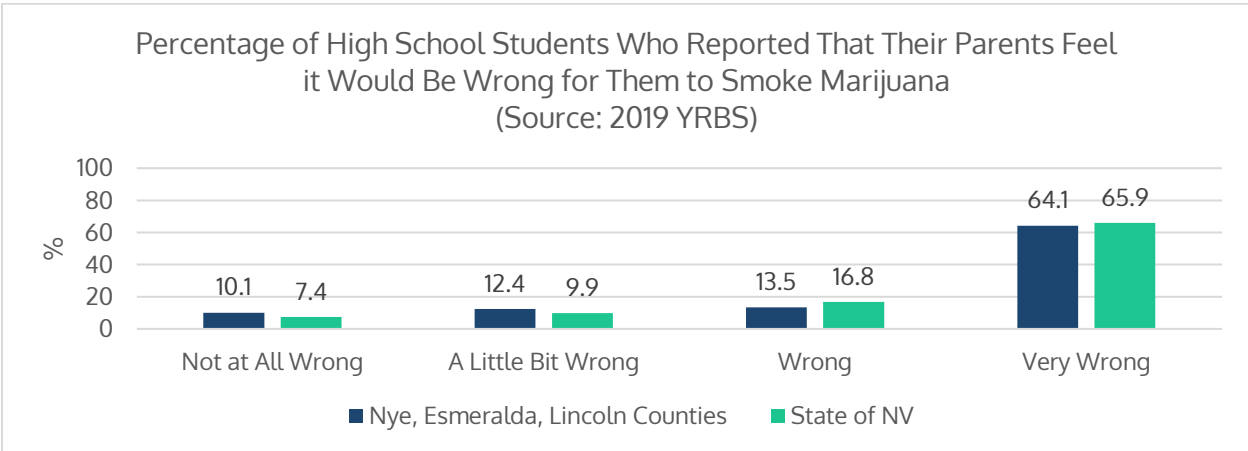
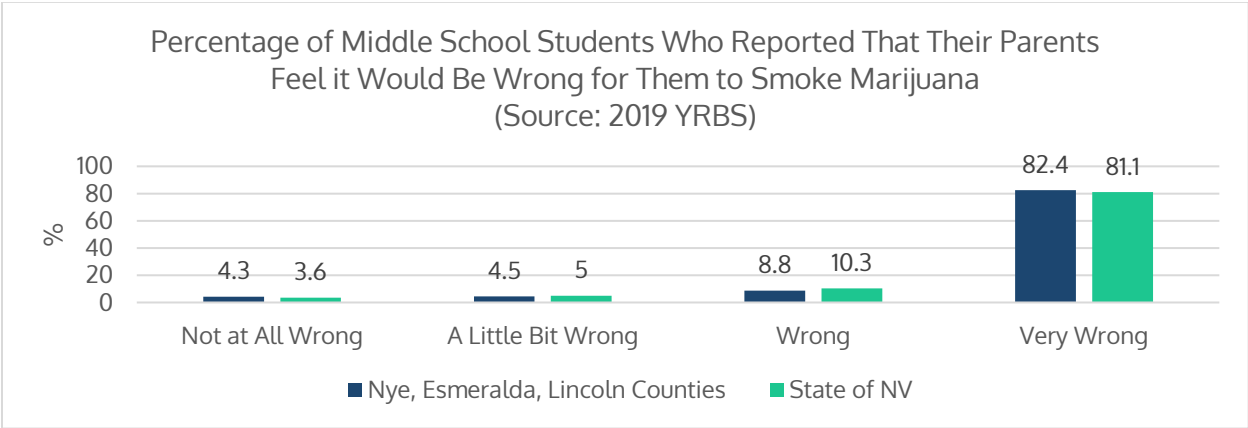
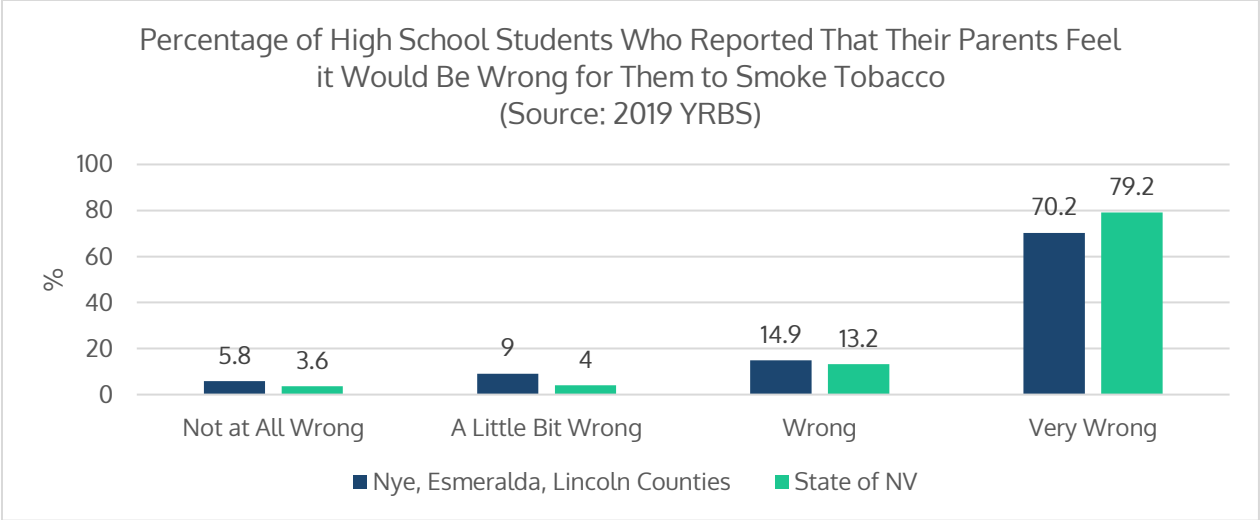


Percentage of High School Students Who Reported That Their Parents Feel it Would Be Wrong for Them to Have One or Two Drinks of an Alcoholic Beverage Nearly Every Day  
(Source: 2019 YRBS)

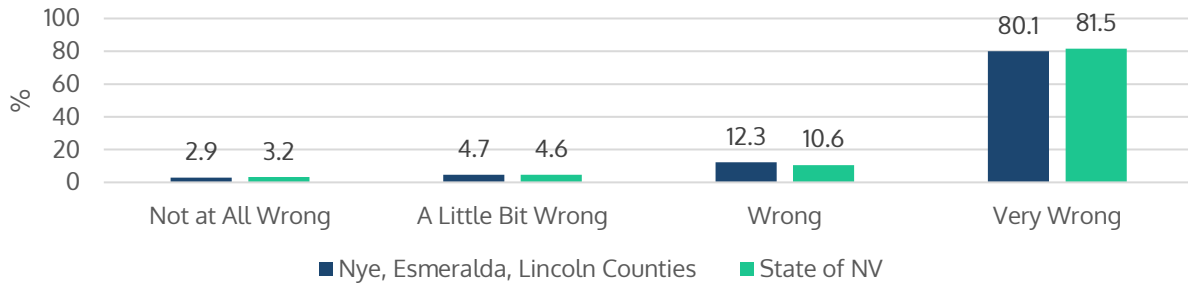


Percentage of Middle School Students Who Reported That Their Parents Feel it Would Be Wrong to Them to Smoke Tobacco  
(Source: 2019 YRBS)

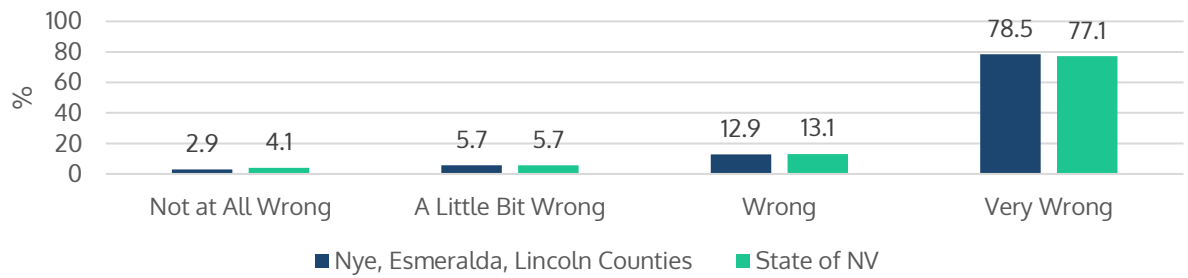




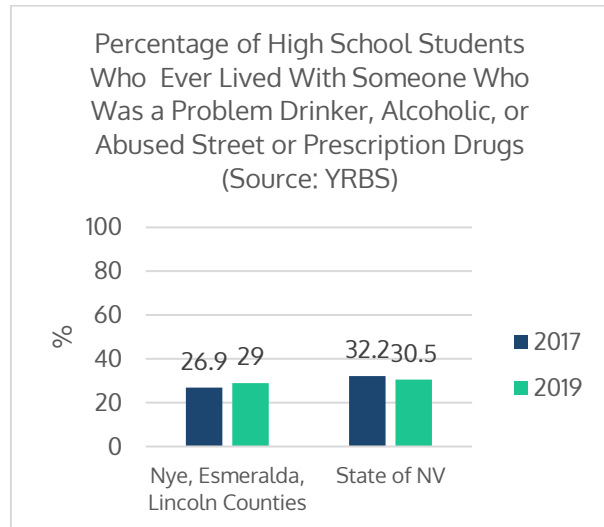
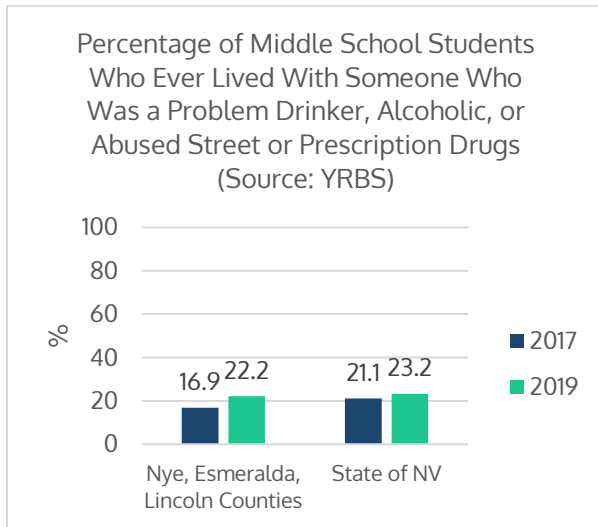
Percentage of Middle School Students Who Reported That Their Parents Feel it Would Be Wrong for Them to Use Prescription Drugs Not Prescribed To Them  
(Source: 2019 YRBS)



Percentage of High School Students Who Reported That Their Parents Feel it Would Be Wrong for Them to Use Prescription Drugs Not Prescribed To Them  
(Source: 2019 YRBS)



## Family History of Substance Misuse



### Domain: Individual/Peer

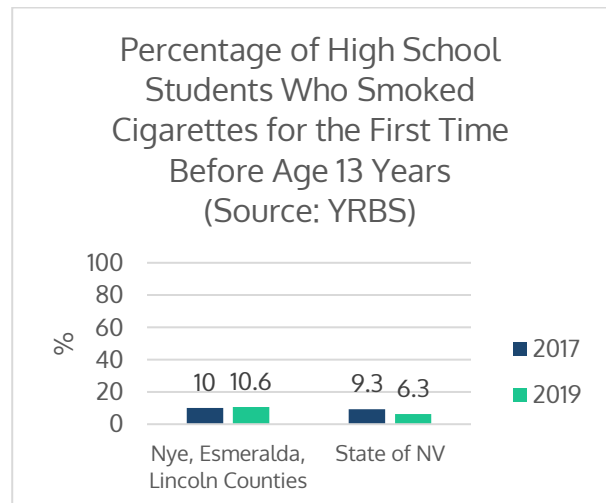
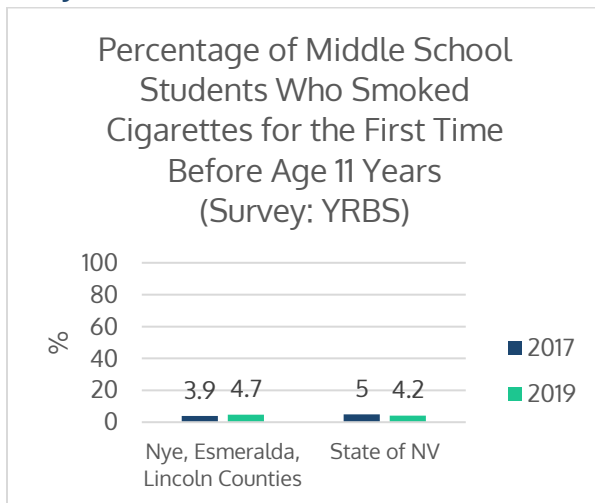
Wellness Dimension
<b>Emotional.</b> Coping effectively with life and creating satisfying relationships.
<b>Social.</b> Developing a sense of connection, belonging, and a well-developed support system.
<b>Spiritual.</b> Expanding our sense of purpose and meaning in life.
<b>Physical.</b> Recognizing the need for physical activity, diet, sleep, and nutrition.
Risk and Protective Matrix Indicator
Early initiation of substance use
Early and persistent problem behavior
Rebelliousness
Favorable attitudes toward substance use
Peer substance use
Genetic predictors

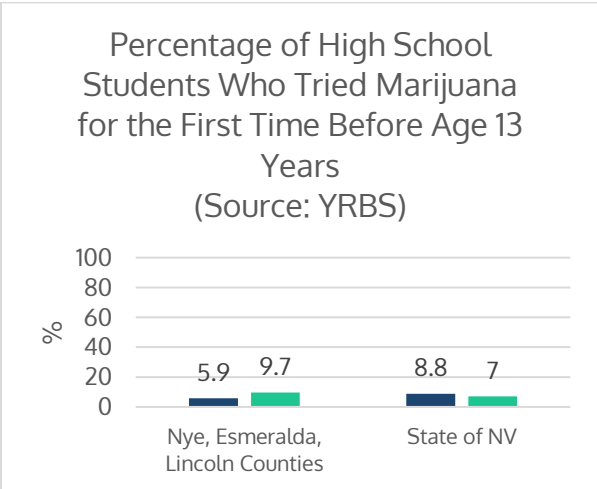
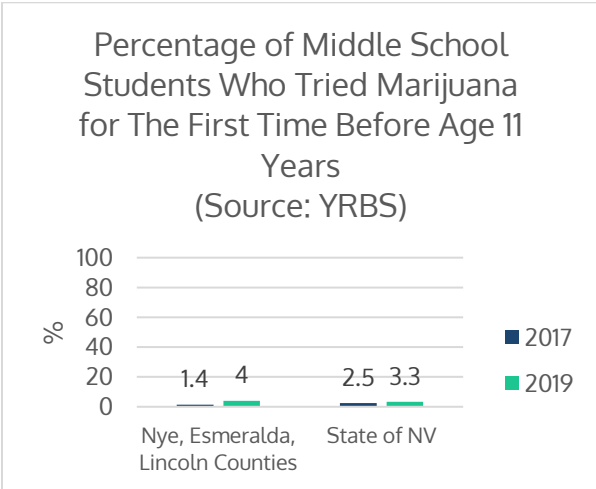
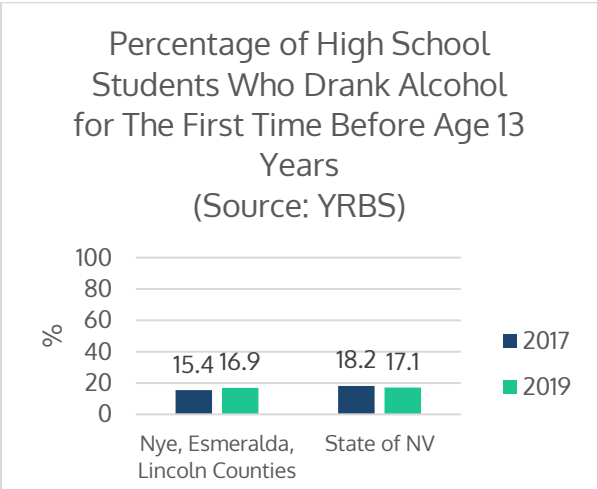
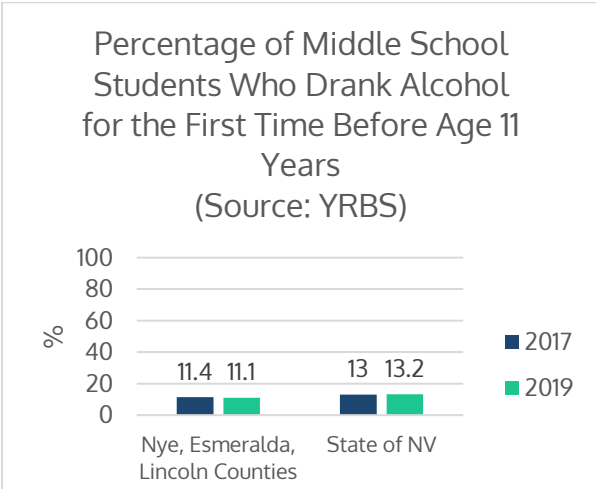
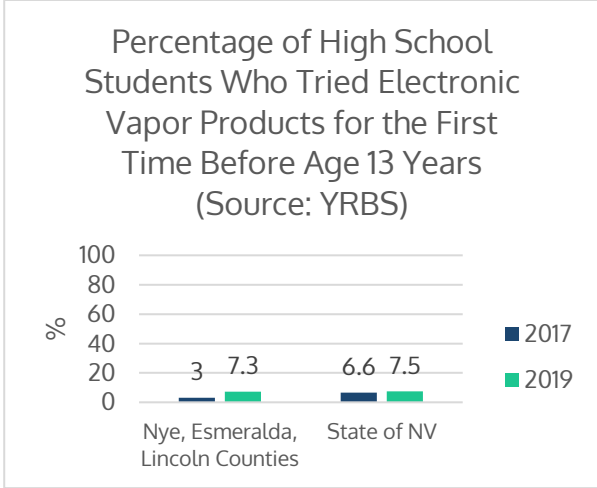
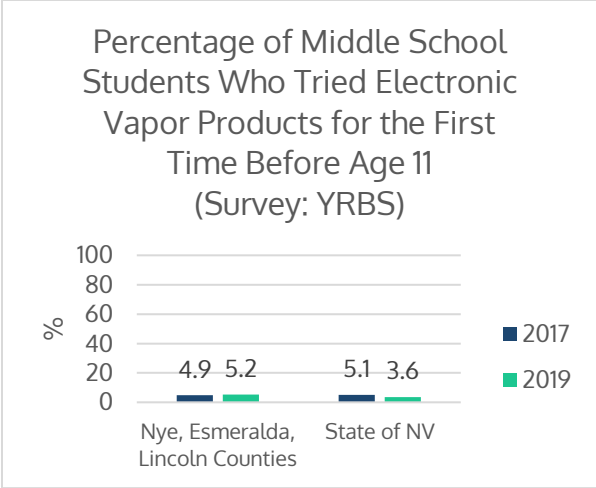
Indicators related to physical health are included in the "Health and Physical Wellness" section below. Indicators related to adult mental and behavioral health are included in this section.

I hate it when people try to talk to teenagers like they are kids. These are not children. What they are going through would be inconceivable to past generations of teenagers. If I had landed in 2021 as teenager instead of 1985, I don't think I would survive. They are fully immersed in a separate online reality. They have an entire online persona that they craft and interact with others. We don't just need to use social media to send messages to them...we are not going to get through all that BS. We need to consider that that is where they live when we try to communicate with them.

-Parent

### Early Initiation of Substance Use



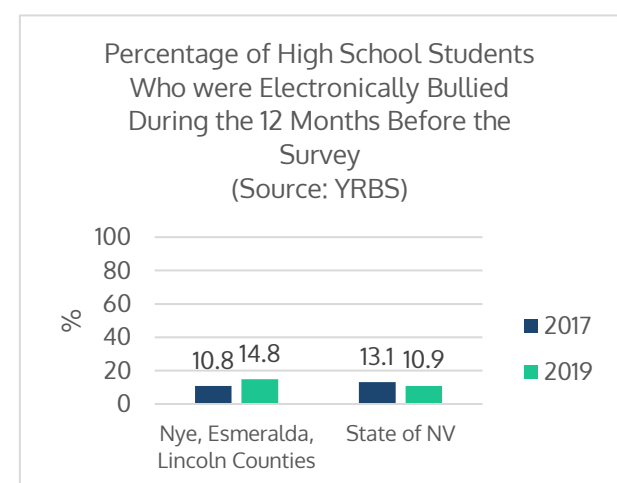
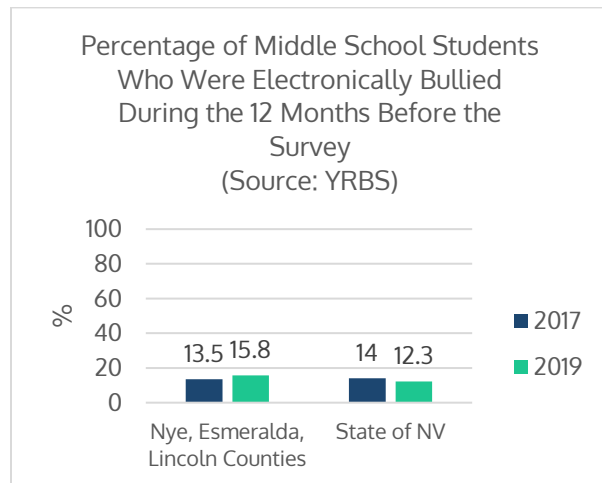
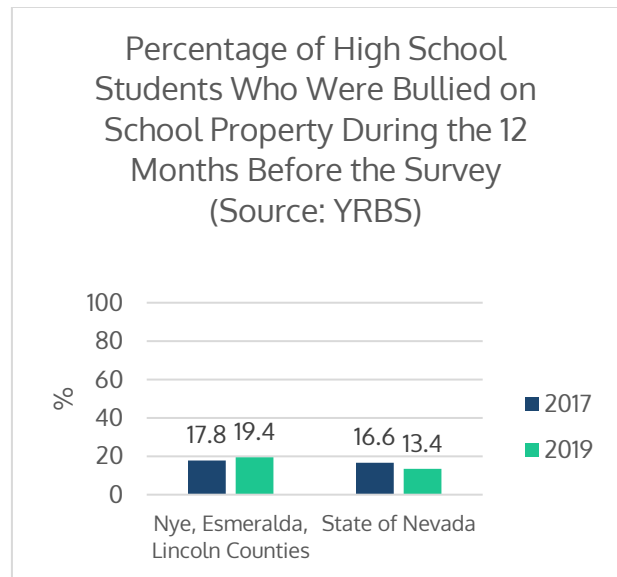
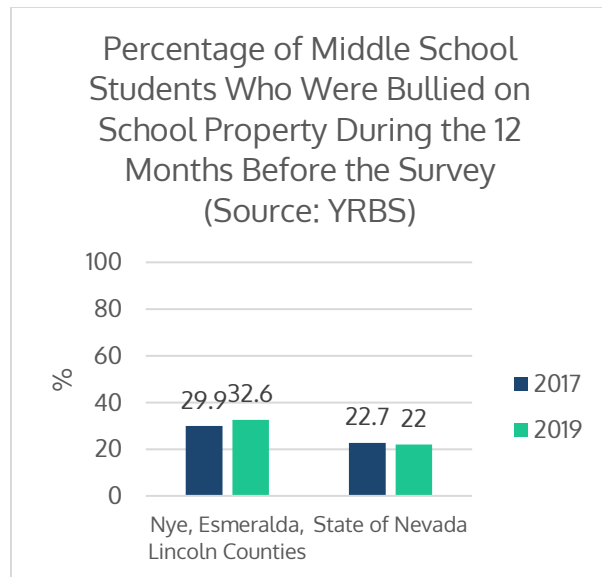


## Early and Persistent Problem Behavior

It is important to keep the definition of this particular risk factor in mind as one considers the following data:

Emotional distress, aggressiveness, and "difficult" temperaments in adolescents

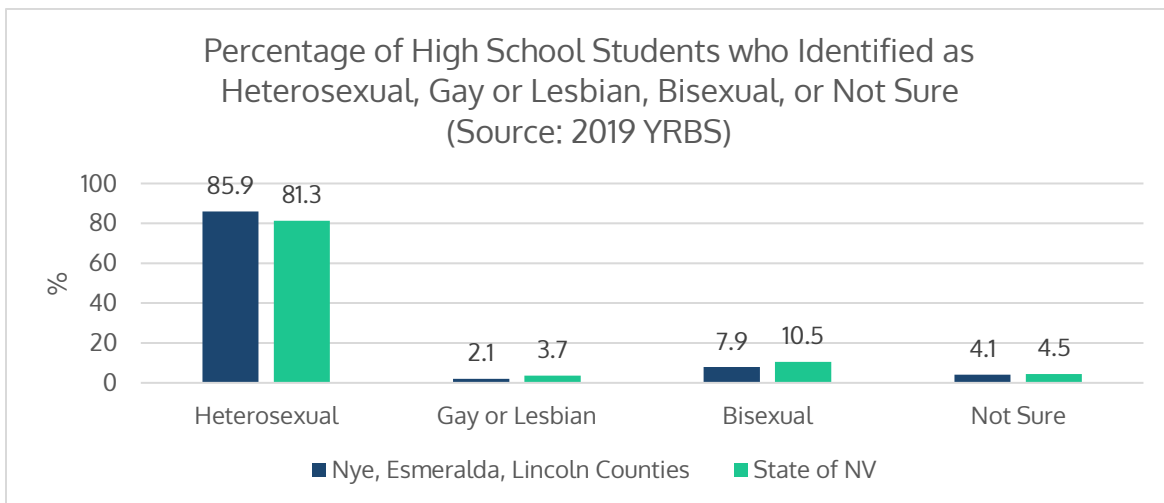
The following data points are related to topics that may or may not cause some young people emotional distress depending on their individual situation, support systems, and ability to cope. They are included here simply because they *can lead to emotional distress*, **not** because they are in and of themselves considered "problem behaviors." This emotional distress can then lead to substance misuse in some young people.



I don't hear a lot of people talking about this, but pornography is a big problem. It is at the root of most of the disciplinary issues I deal with. This isn't a moral issue. We are talking about exposure leading to addiction leading to behaviors leading to real life consequences. Most parents have no idea it is taking place and then they don't know how to monitor the devices.

-School Representative

Data related to identification as LGBTQ is not included in this category because it is, in itself, considered "problem behavior." The reason it is included in this section is because identifying as LGBTQ, especially in a small, rural area, can result in bullying and/or exclusion which can cause mental suffering (Source: Oswald).



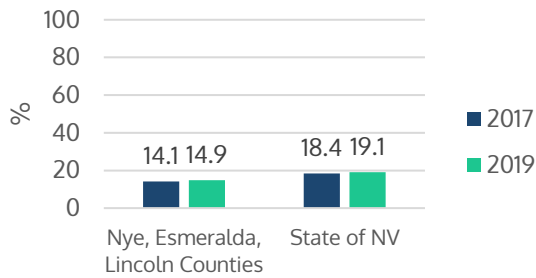
- 2.6% of respondents to the 2019 High School YRBS identified as transgender.

Our LGBTQ kids are truly suffering. There are very few supports for them.

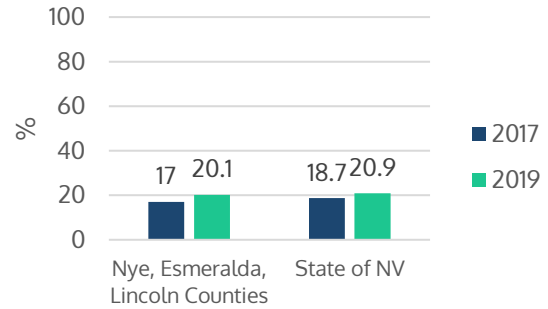
-Healthcare Worker



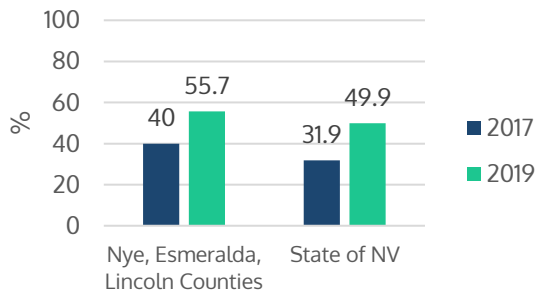
Percentage of Middle School Students Who Have Done Something to Purposely Hurt Themselves Without Wanting to Die, Such as Cutting or Burning Themselves on Purpose During the 12 Months Before the Survey  
(Source: YRBS)



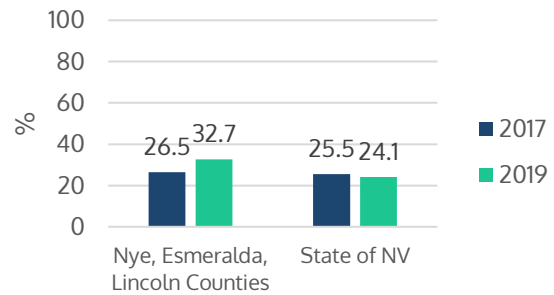
Percentage of High School Students Who Did Something to Purposely Hurt Themselves Without Wanting to Die, Such as Cutting or Burning Themselves on Purpose During the 12 Months Before the Survey  
(Source: YRBS)



Percentage of Middle School Students Who Ever Got the Kind of Help They Need When They Felt Sad, Empty, Hopeless, Angry, or Anxious "Most of the Time" or "Always"  
(Source: YRBS)



Percentage of High School Students Who Ever Got the Kind of Help They Need When They Felt Sad, Empty, Hopeless, Angry, or Anxious "Most of the Time" or "Always"  
(Source: YRBS)





Nye, Lincoln, and Esmeralda Counties are considered high level Health Professional Shortage Areas (HSPSAs) for Mental Health Care ( $\geq 16$ ). *Stock Image.*

Selected Childhood Disability Rates per 1,000 Enrolled Students (Source: Nevada Rural and Frontier Health Data Book 2020)	
	<i>Emotional Disturbance</i>
Nye County	8
Esmeralda County	NA
Lincoln County	NA
Nevada Totals	4.6

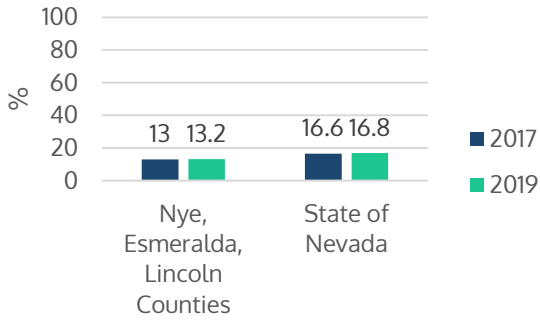
### Rebelliousness

Again, it is important to consider the definition of “rebelliousness” when one considers the following data points:

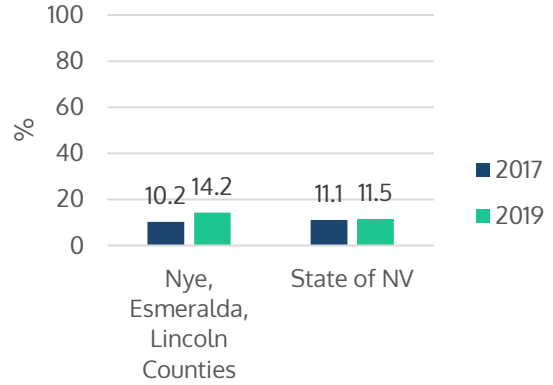
High tolerance for deviance and rebellious activities.

Some of the behaviors describe below may not in fact be “rebellious” or “deviant” depending upon the individual young person, their motivations, and their support systems.

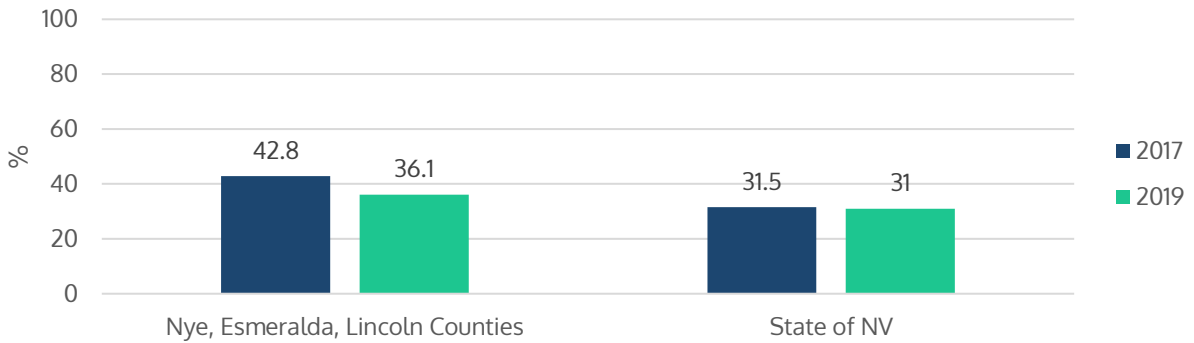
Percentage of High School Students Who Attended School Under the Influence of Alcohol or Other Illegal Drugs During the 12 Months Before the Survey  
(Source: YRBS)



Percentage of High School Students Who Participated in Binge Drinking During the 30 Days Before the Survey  
(Source: YRBS)

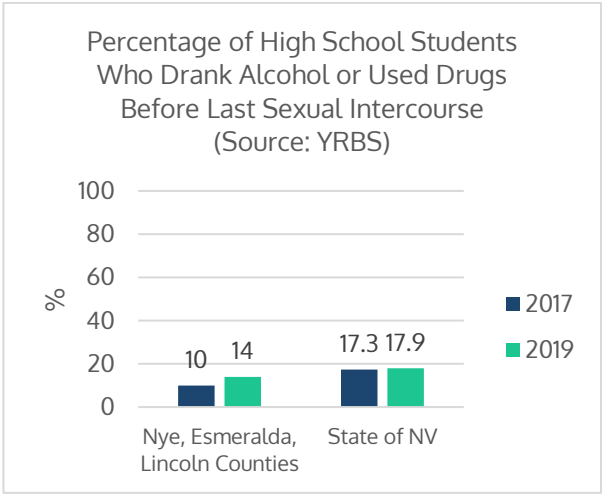
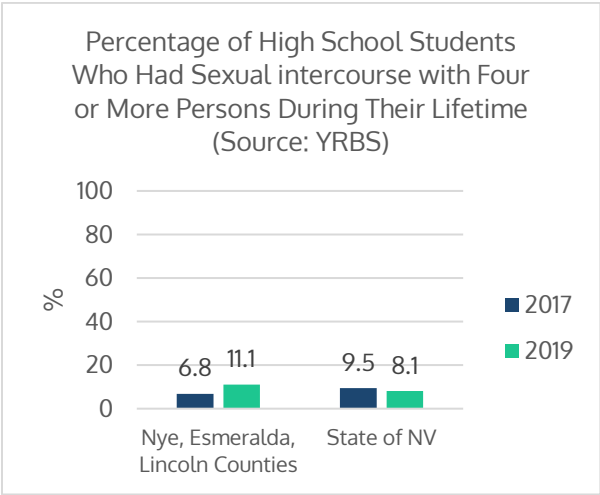
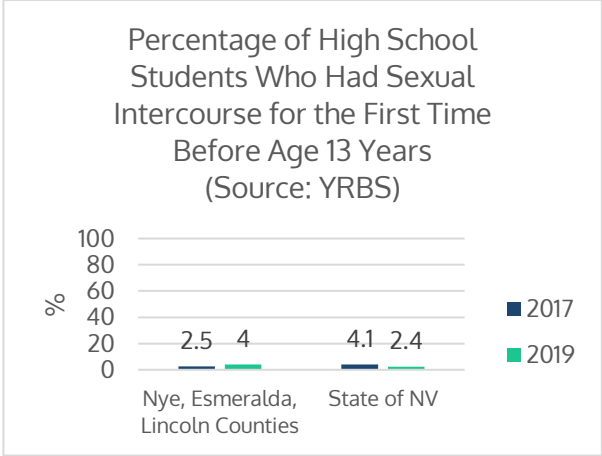
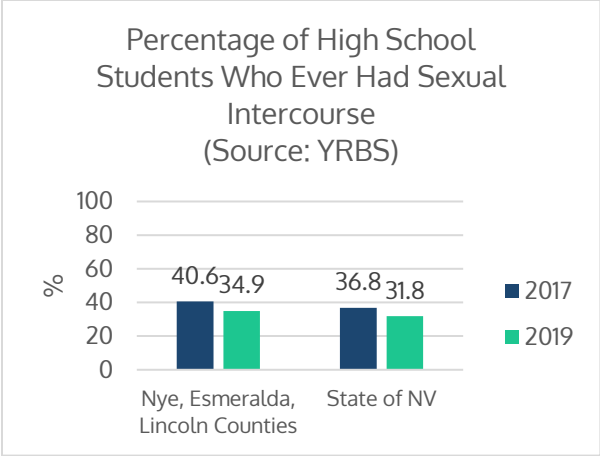


Percentage of High School Students Who Texted or E-Mailed While Driving a Car or Other Vehicle During the 30 Days Before the Survey  
(Source: YRBS)

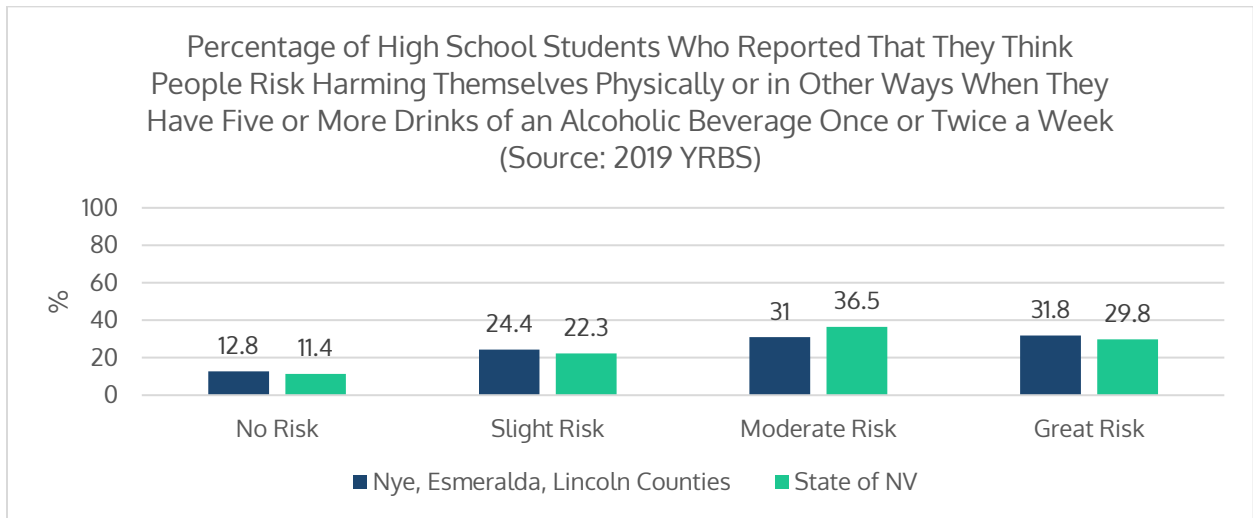
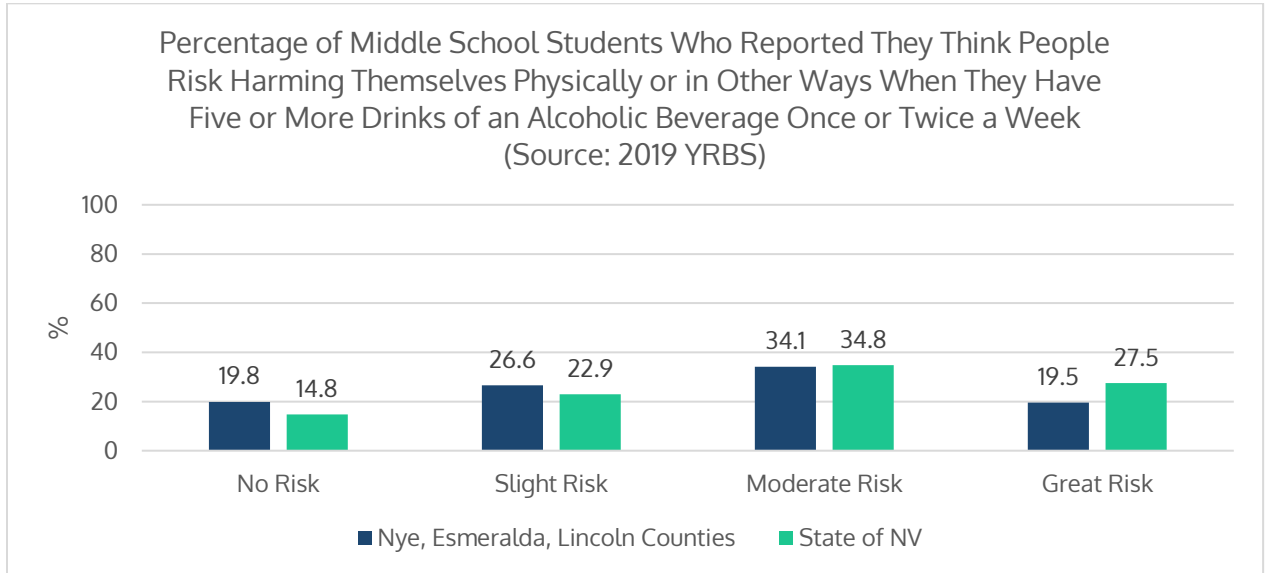


Percentage of High School Students Who Carried a Gun During the 12 Months Before the Survey  
(Source: 2019 YRBS)

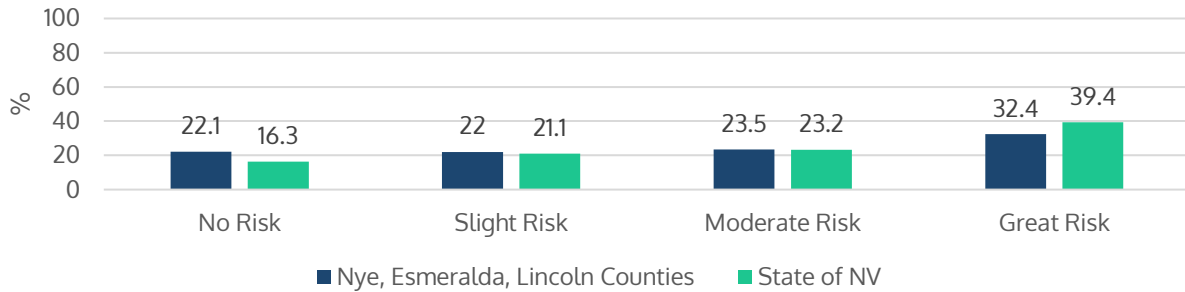




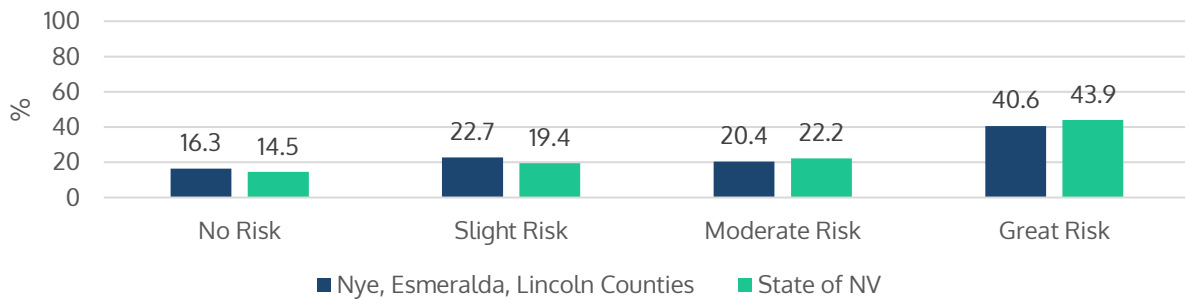
## Favorable Attitudes Toward Substance Use



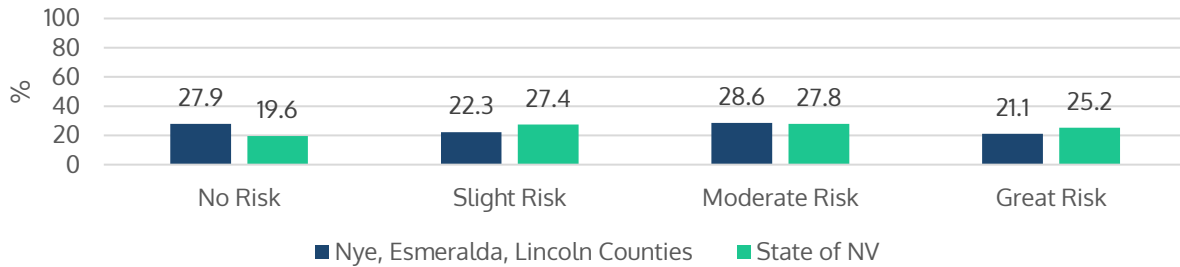
Percentage of Middle School Students Who Reported They Think People Risk Harming Themselves Physically or in Other ways If They Smoke One or More Packs of Cigarettes Per Day  
(Source: 2019 YRBS)



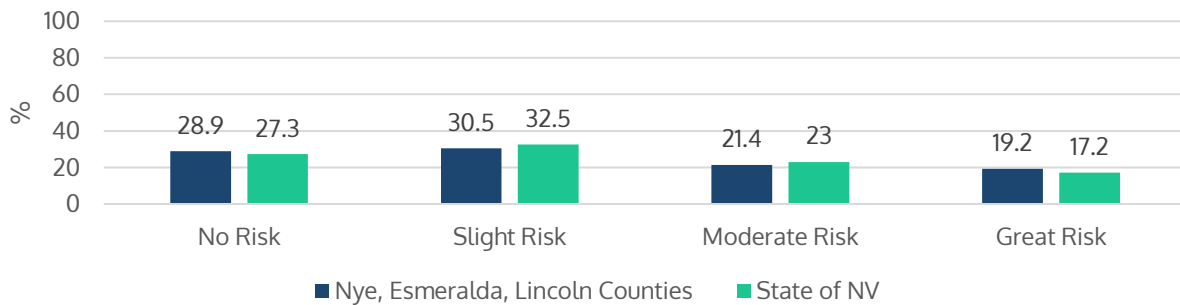
Percentage of High School Students Who Reported They Think People Risk Harming Themselves Physically or in Other Ways If They Smoke One or More Packs of Cigarettes Per Day  
(Source: 2019 YRBS)



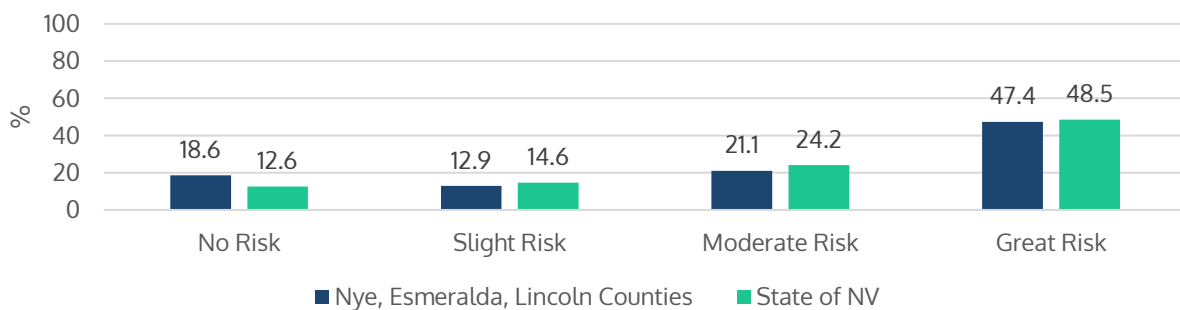
Percentage of Middle School Students Who Reported That They Think People Risk Harming Themselves Physically or in Other Ways if They Smoke Marijuana Once or Twice a Week  
(Source: 2019 YRBS)



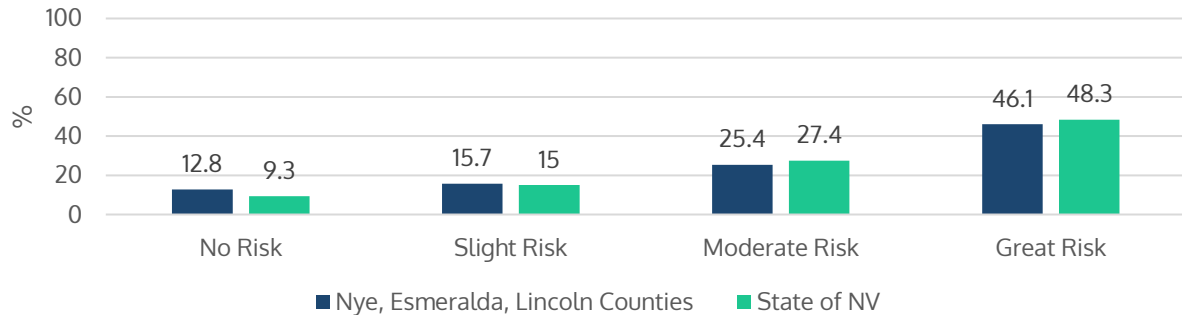
Percentage of High School Students Who Reported That They Think People Risk Harming Themselves Physically or in Other Ways if They Smoke Marijuana Once or Twice a Week  
(Source: 2019 YRBS)



Percentage of Middle School Students Who Reported That They Think People Risk Harming Themselves Physically or in Other Ways if They Use Prescription Drugs That Are Not Prescribed to Them  
(Source: 2019 YRBS)

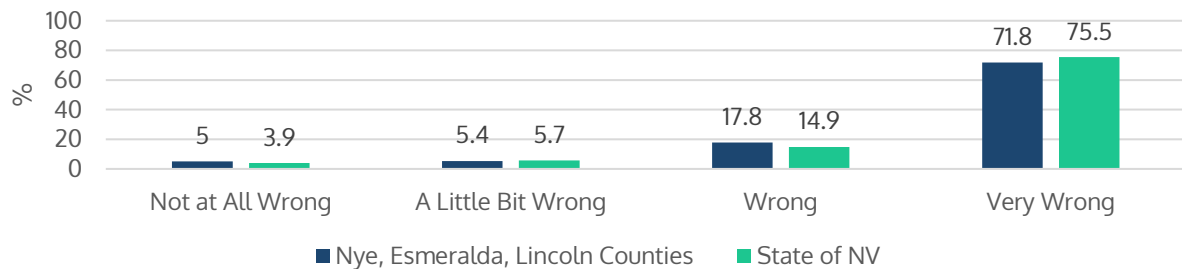


Percentage of High School Students Who Reported That They Think People Risk Harming Themselves Physically or in Other Ways if They Use Prescription Drugs That Are Not Prescribed to Them  
(Source: 2019 YRBS)



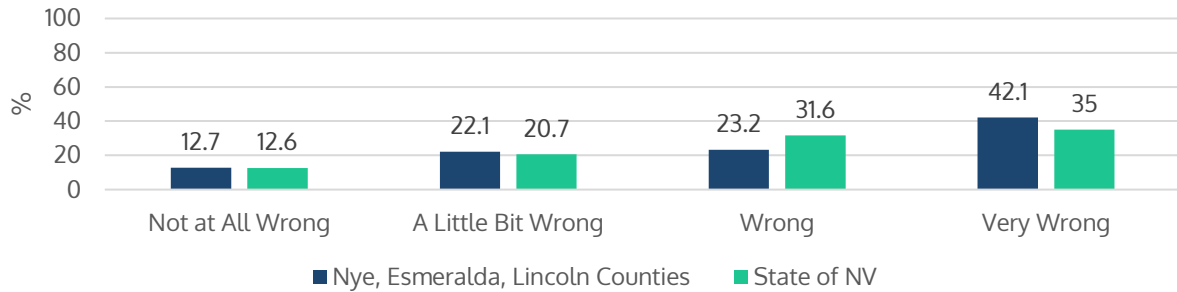
### Peer Substance Use

Percentage of Middle School Students Who Reported That Their Friends Feel it Would Be Wrong for Them to Have One or Two Drinks of an Alcoholic Beverage Nearly Every Day  
(Source: 2019 YRBS)

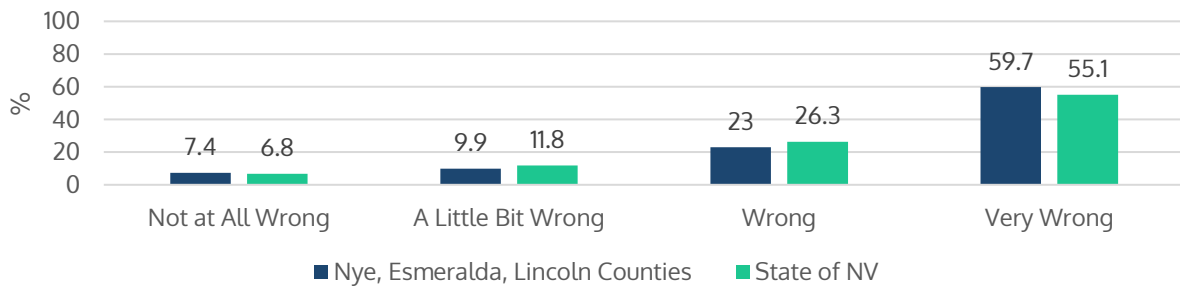




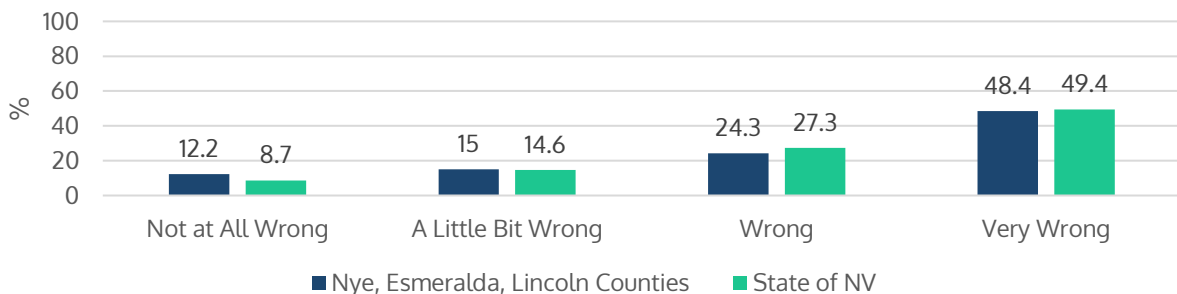
Percentage of High School Students Who Reported That Their Friends Feel it Would be Wrong for Them to Have One or Two Drinks of an Alcoholic Beverage Nearly Every Day  
(Source: 2019 YRBS)



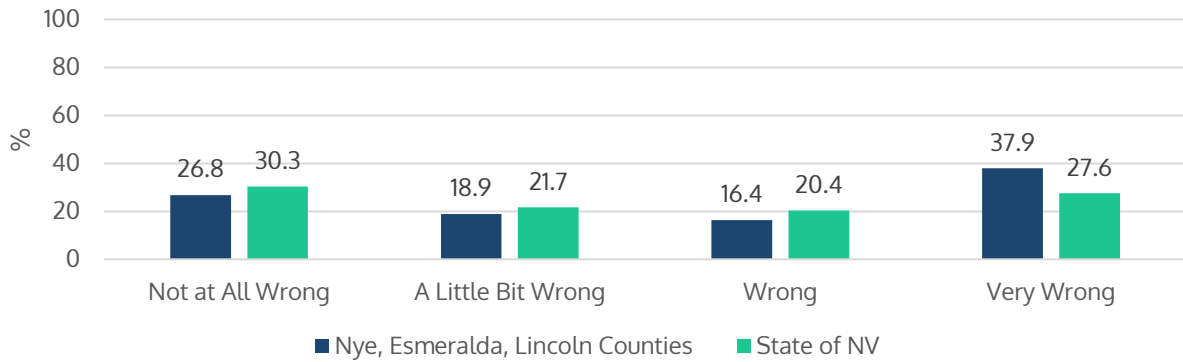
Percentage of Middle School Students Who Reported That Their Friends Feel it Would Be Wrong for Them to Smoke Tobacco  
(Source: 2019 YRBS)



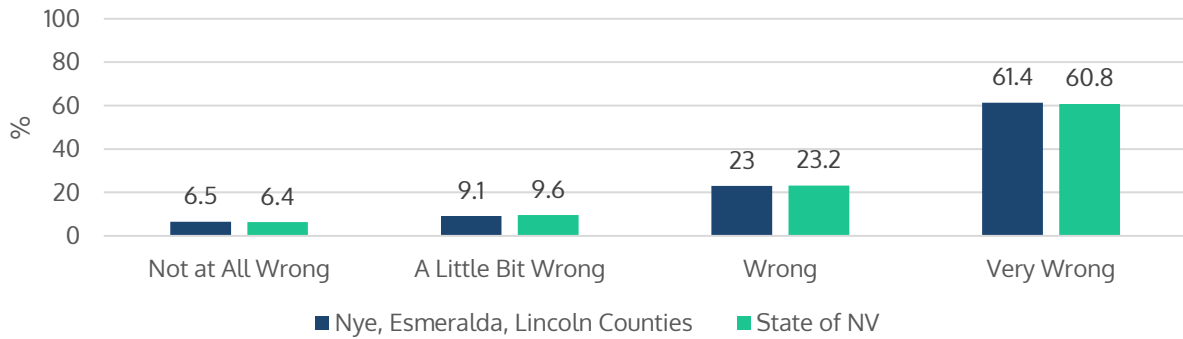
Percentage of High School Students Who Reported That Their Friends Feel it Would Be Wrong for Them to Smoke Tobacco  
(Source: 2019 YRBS)

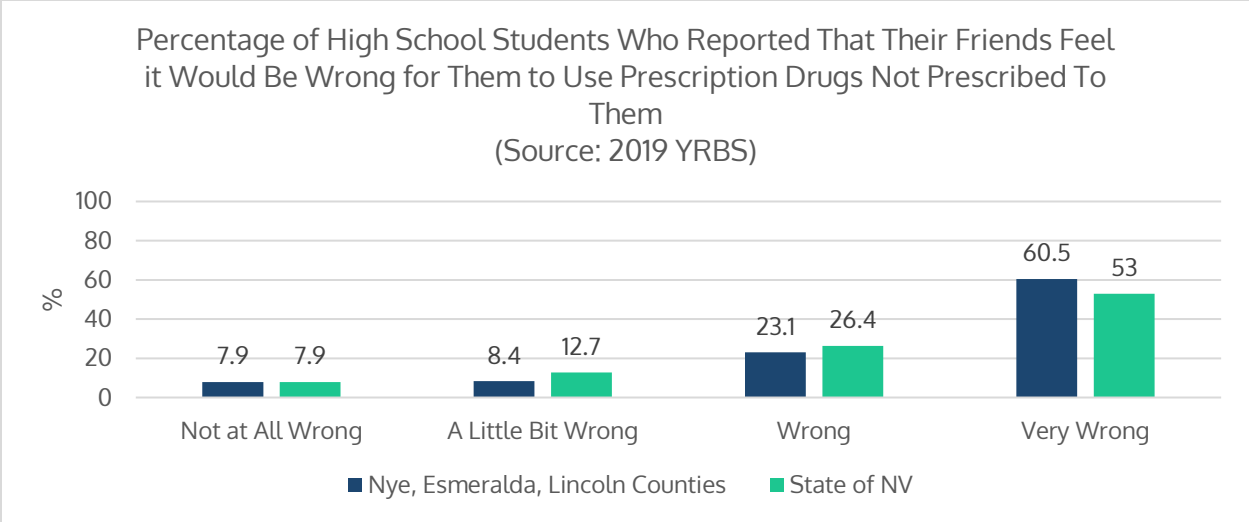


Percentage of High School Students Who Reported That Their Friends Feel it Would be Wrong for Them to Smoke Marijuana  
(Source: 2019 YRBS)



Percentage of Middle School Students Who Reported That Their Friends Feel it Would be Wrong for Them to Use Prescription Drugs Not Prescribed to Them  
(Source: 2019 YRBS)





Health and Physical Wellness

Priority Health Care Needs (Source: Nevada State Health Needs Assessment 2019)			
Nye County	Access to Health Care	Employment, Income, Poverty & Housing	Chronic Disease
Esmeralda County	Access to Health Care	Maternal Child Health	Income & Poverty
Lincoln County	Employment & Job Training	Access to Health Care	Health Behaviors & Preventive Care

Health Rankings by County (Source: Nevada Rural and Frontier Health Data Book 2020)		
	Overall Ranking for <i>Health Factors</i>	Overall Ranking for <i>Health Outcomes</i>
Nye County	13 <sup>th</sup> -15 <sup>th</sup> (least healthy)	13 <sup>th</sup> -15 <sup>th</sup> (least healthy)
Esmeralda County	Not ranked	Not ranked
Lincoln County	5 <sup>th</sup> -8 <sup>th</sup>	1-4 (most healthy)

Health Rankings by County (Source: Nevada Rural and Frontier Health Data Book 2020)		
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Esmeralda County	Not ranked	Not ranked
Lincoln County	5 <sup>th</sup> -8 <sup>th</sup>	1-4 (most healthy)

Access to healthcare in some of these rural areas is a huge deal, especially dental care. I love that NyECC brings in RAM. I send so many people there.

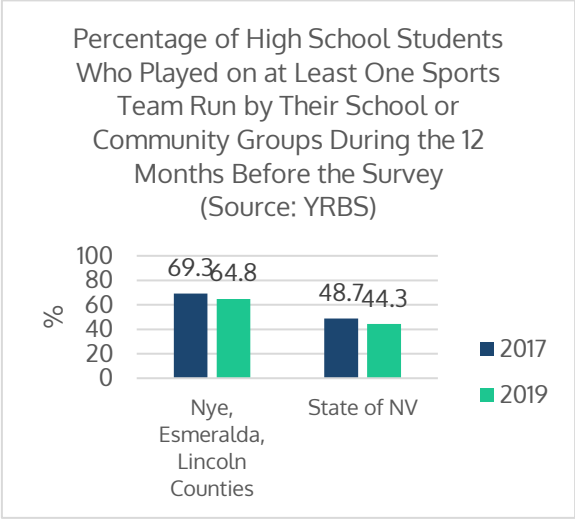
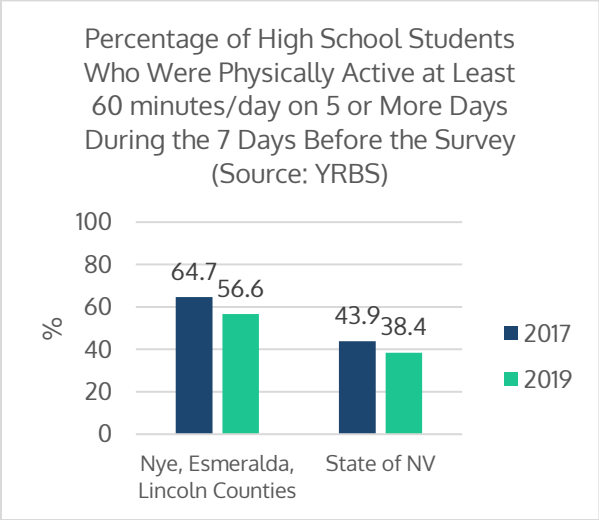
-Social Worker

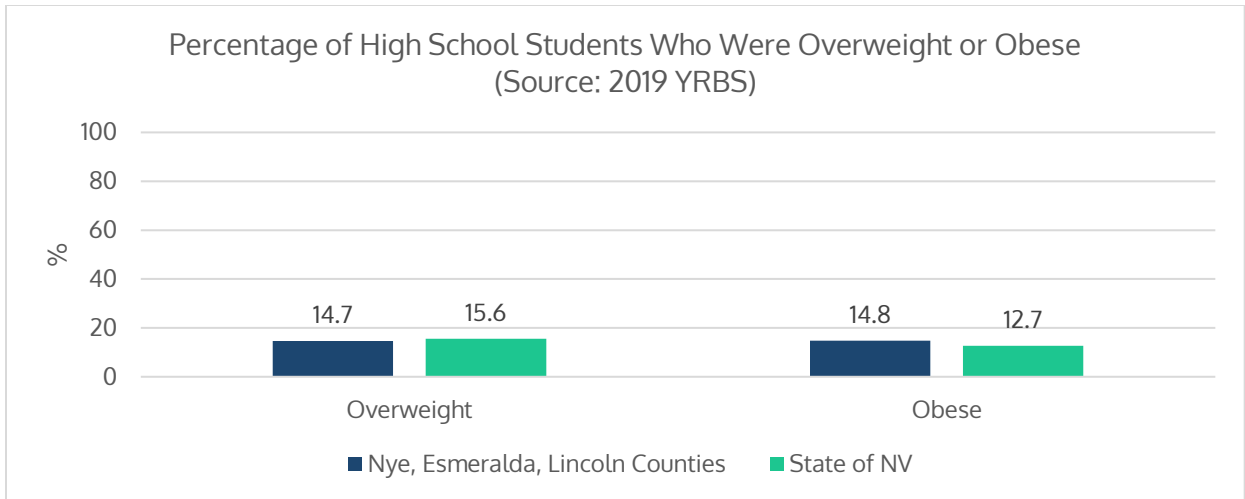
Maternal Health Behaviors and Birth Outcomes (Source: Nevada Rural and Frontier Health Data Book 2020)					
	Women Receiving Prenatal Care in First Trimester	Pregnant Women Abstaining from Alcohol Consumption	Pregnant Women Abstaining from Smoking	Live Births below 2,500 Grams	Births Prior to 37 Weeks of Gestation
Nye County	73.1	94.9	85.3	9.6	10.1
Esmeralda County	NA	NA	NA	NA	NA
Lincoln County	72.2	24.1*	NA	NA	NA
Nevada Totals	71.5	97	94.6	8.7	10.1

\*Note: Several attempts have been made to confirm the validity of this measure. This researcher has been assured that the information is accurate, however both NyECC and this researcher continue to have concerns that this does not match our knowledge of the communities in Lincoln County. Readers should interpret this measure with caution.

Selected Childhood Disability Rates per 1,000 Enrolled Students (Source: Nevada Rural and Frontier Health Data Book 2020)			
	<i>Autism Spectrum Disorder</i>	<i>Speech/ Language/ Hearing Impairment</i>	<i>Other Impairment Disabilities</i>
Nye County	14.6	NA	46.7
Esmeralda County	NA	NA	NA
Lincoln County	NA	57.1	NA
Nevada Totals	18.7	17.3	32.9

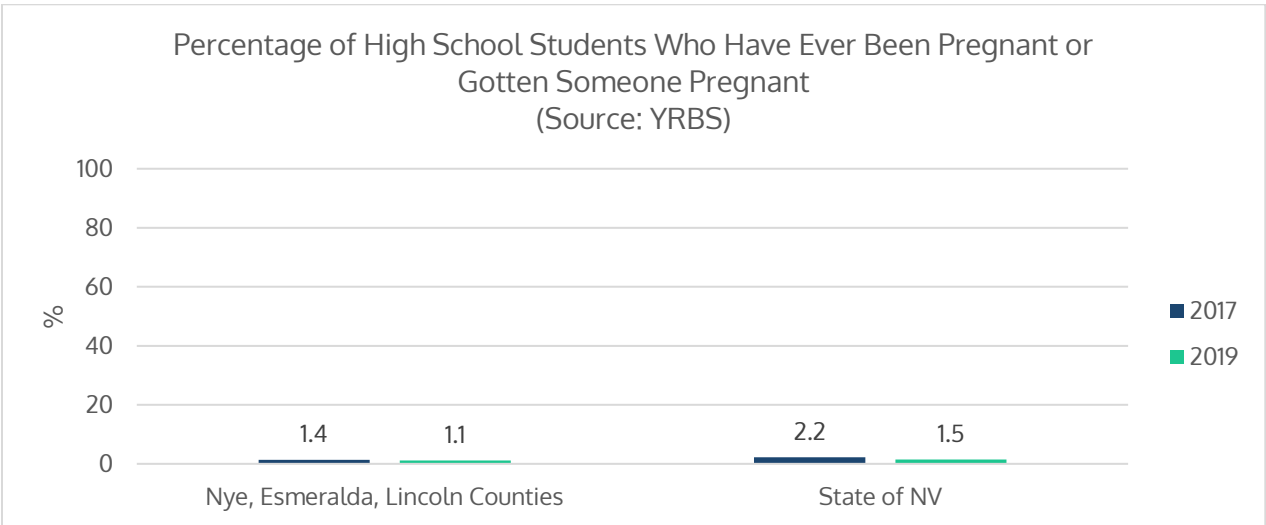
- Nye and Lincoln Counties are considered high level Health Professional Shortage Areas (HSPSAs) for Primary Medical Care ( $\geq 16$ ). Esmeralda County's HISPA score is 1-15 (mid-level shortage-area).



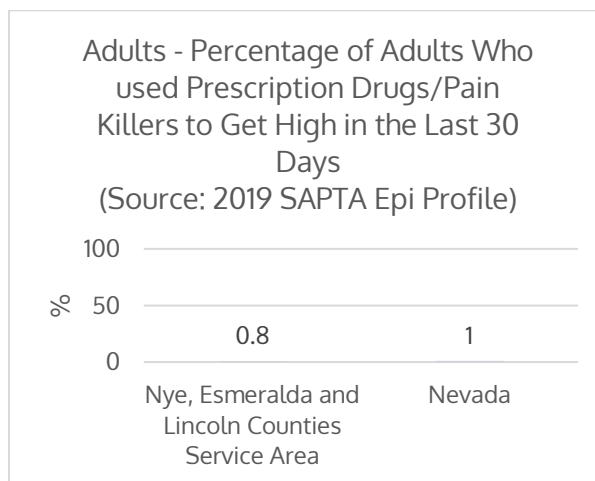
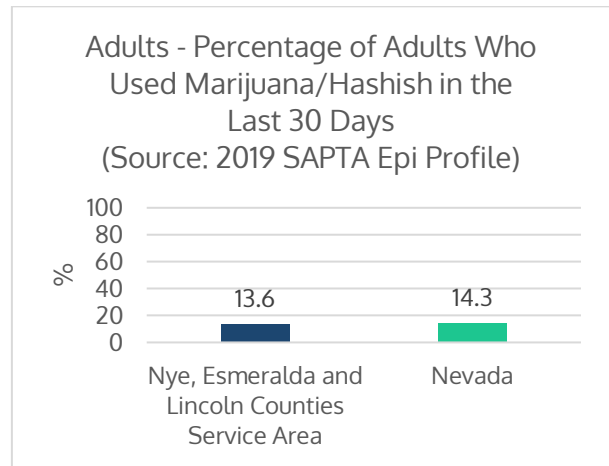
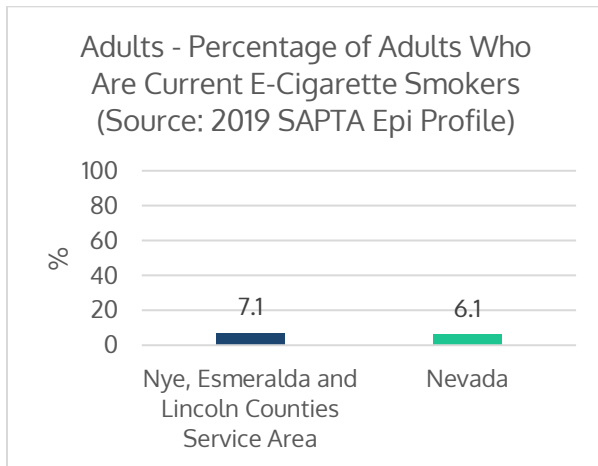
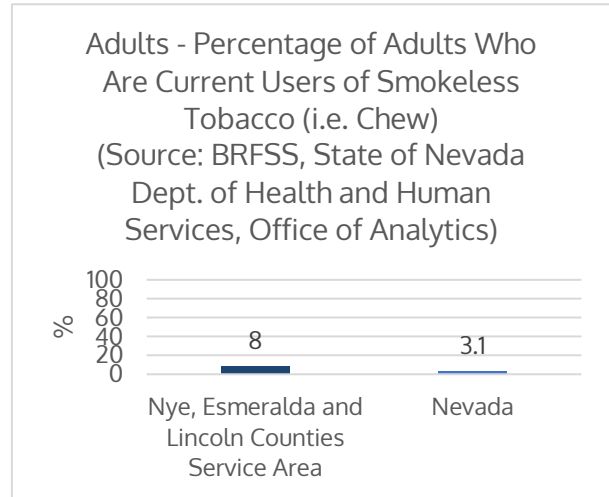
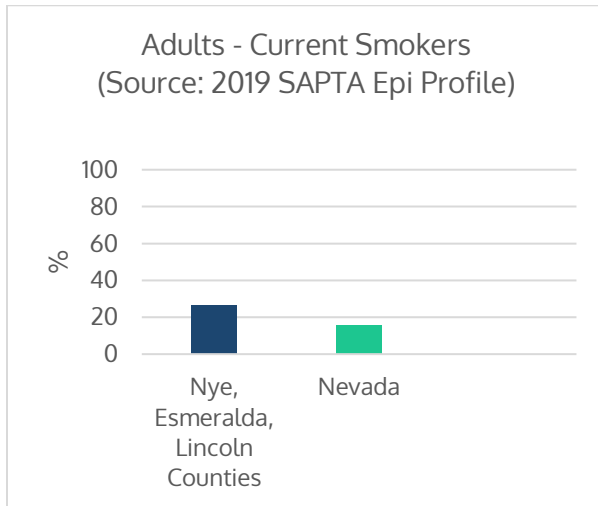


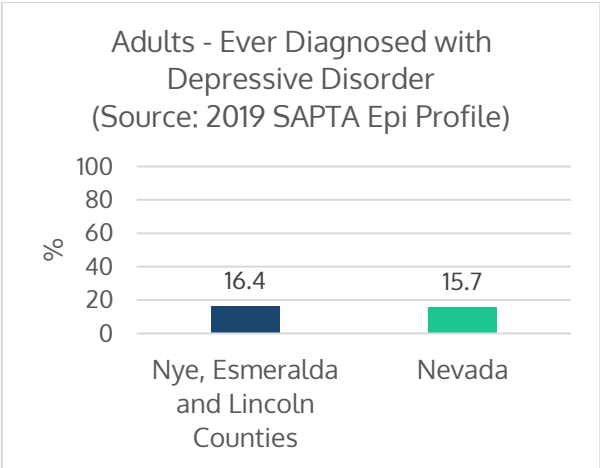
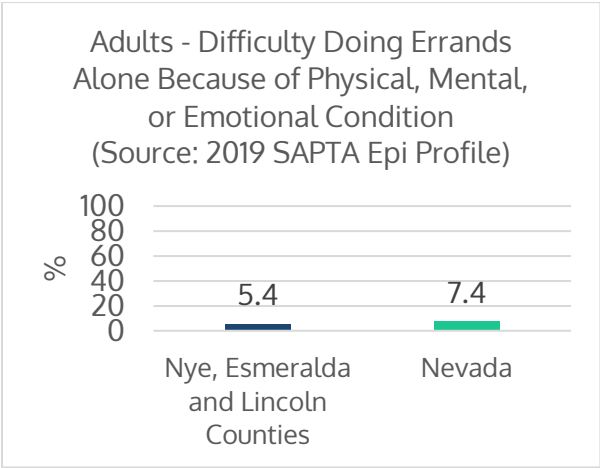
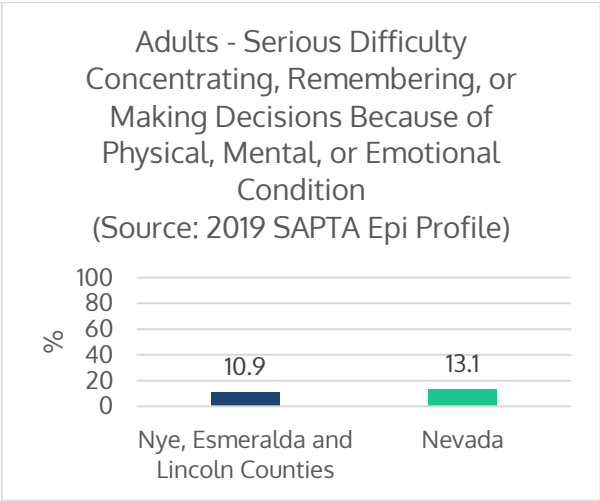
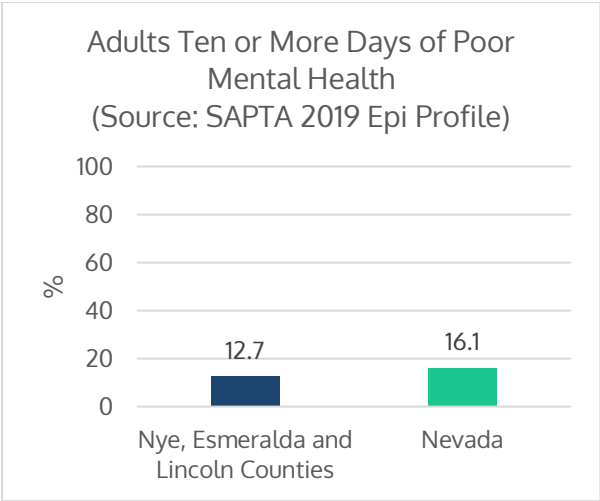
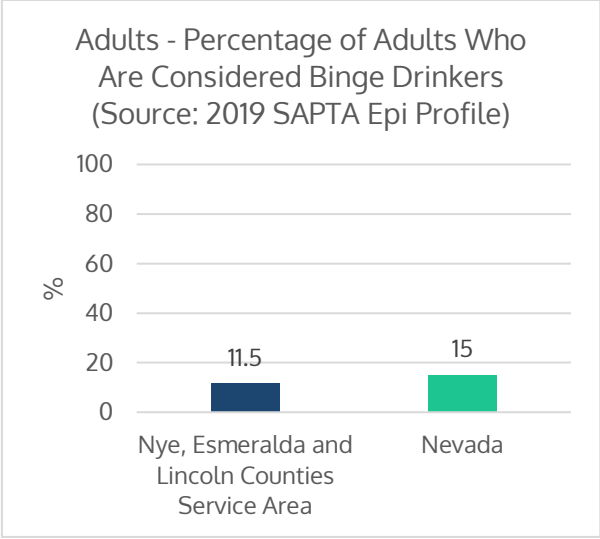
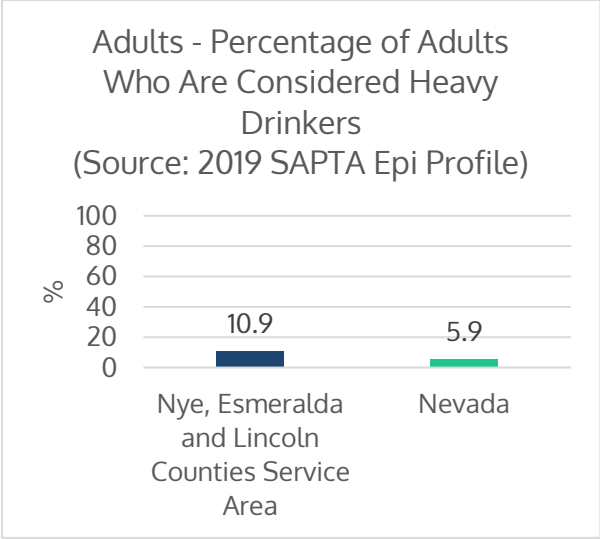
Fresh fruits and vegetables, any kind of fresh food is tough to get in some of these towns. There are real food deserts and then there are 'almost' food deserts out here. The food that is available is expensive. So, families will buy the frozen, non-perishable stuff, which is then not as healthy.

-Social Worker

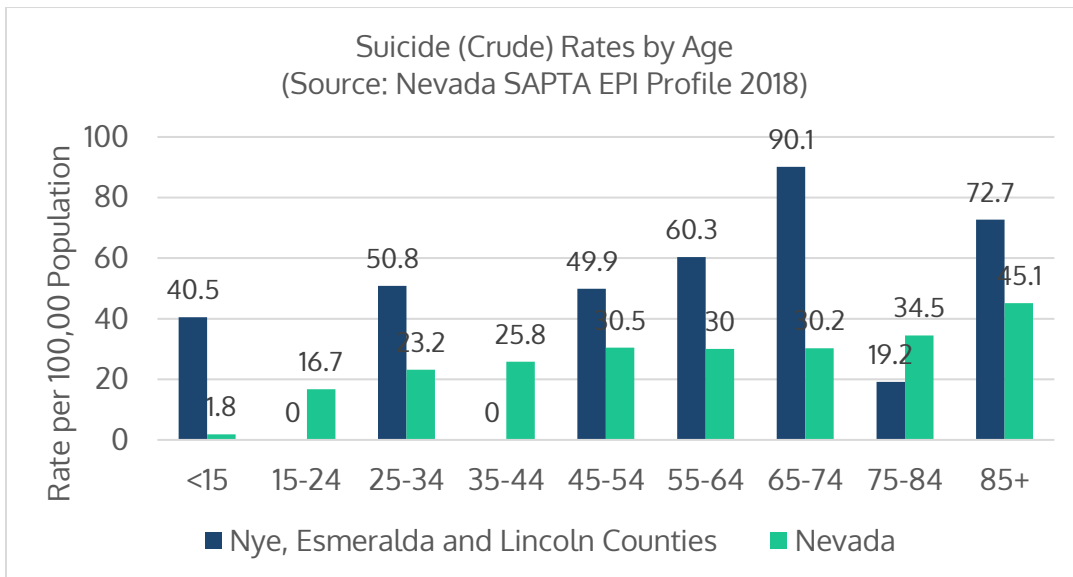
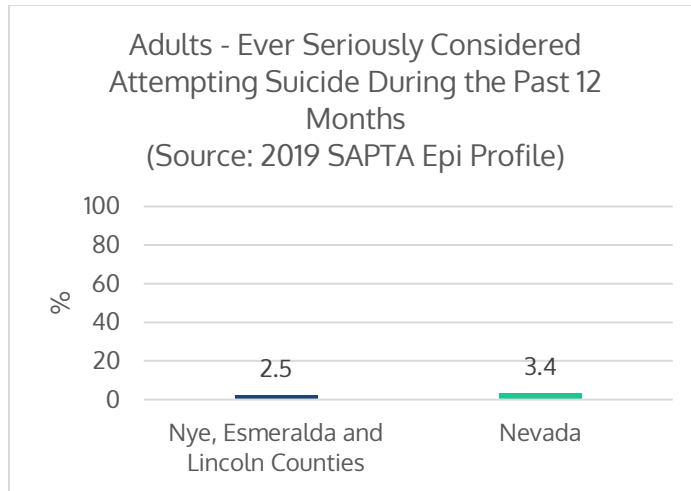


## Adult Mental and Behavioral Health Indicators









## Appendix B – Hypothetical Vignettes

This researcher employed the anthropological tool of “the vertical slice” to demonstrate how NYECC might interact with various groups of people (Stryker, et al). The following vignettes describe the likely experiences of hypothetical people. The vertical slice is age. Various risk and protective factors were written into the stories. The point of this exercise is to examine each “age slice” and look around them 360° to learn how someone their age and in their situation might interact with NYECC. Any similarities to actual people or situations are purely coincidental.

Heather, 17 year old female, Caliente, NV

Heather is a senior at CO Bastian High School in Caliente, NV. Heather lives with her mother and father. Her father works for the Bureau of Land Management and her mother works for the City. Heather has a reputation as being a rebel. She has had trouble controlling impulsive behaviors since she pulled the fire alarm in first grade. Heather’s friends are used to her coming up with crazy ideas, although they are not always sure they are good ideas. She got caught with alcohol a couple years ago and is still on probation.

Heather’s parents are never quite sure how to respond to the trouble she gets into. Her mom tends to want to punish her (e.g. ground her to the house, take away her phone, and restrict internet access). Her dad tends to say things like, “kids will be kids,” and thinks they should just let her figure things out on her own. Her dad sometimes works out in the field for days at a time. Her mom is usually in charge of discipline, but they frequently fight. From their perspectives, Heather’s parents really just wish someone would tell them what to do. Neither of them feels confident in their parenting decisions.

One thing Heather’s parents agree on is that she should not be using alcohol or any other drugs. They tell her she should wait to use alcohol or marijuana until she turns 21, but when her dad is with his old friends, they talk about all their parties in high school. Heather’s mom decorated their kitchen with wine décor. There are signs that say things like, “wine a little, laugh a lot,” hanging on the walls. Heather is confused why her parents are trying to keep her from something that they obviously think is good.

On one hand, Heather enjoys her reputation as a rebel and the fact that she is never really disciplined by her parents. On the other hand, she feels confused and frustrated in ways she can’t quite explain. The last time she

got in trouble for skipping school the vice principal at her school pulled her aside and told her that if she ever wanted to talk to let him know. She was expecting him to be angry, but he seemed concerned instead. Heather thinks he might be someone she can trust, someone who might be able to help her understand the frustration she is feeling and why she keeps making decisions that get her in trouble.

Now that Heather is nearing graduation, she is starting to see that some of her decisions have left her less prepared to go to college than some of her peers might be. She's starting to wonder what her future might look like and she's frightened that she's already limited her options.

#### Bill, Business Owner, Pahrump

Bill owns a restaurant in Pahrump. He and his wife moved to Pahrump ten years ago to retire. They found retirement to be boring so opened a restaurant. Bill's children are grown and live two states away.

Young people tend to congregate in Bill's restaurant. He routinely overhears their conversations. He sees them during community events. He knows many of their parents and even some of their extended families. Bill is worried. He thinks the young people he is seeing seem lonely and anxious. He worries about how much time they spend on their cell phones. Bill would like to help in some way, but he doesn't want to butt into family business. He doesn't want to overstep any boundaries. When he hears the young people planning a party, who should he call? When he overhears a troubling conversation between a young dating couple, what should he do? What should he do when a young man is sitting in one of his booths alone crying? Bill feels like he might be the only one paying attention to all of these young people.

#### Courtney, 6<sup>th</sup> Grade Teacher, Tonopah, NV

Courtney has been teaching 6<sup>th</sup> grade in Tonopah for 5 years. She loves the energy and enthusiasm of 6<sup>th</sup> graders. Even though she's had 5 years of experience now, teaching is difficult. Courtney puts in very long days planning her lessons and meeting all of the standards. She spends extra time offering tutoring before and after school and keeping up with COVID-19 protocols. She communicates with parents at all hours of the day and night to accommodate their work schedules. Courtney knows that middle school is a tricky time. She sees her students start to diverge

into “good” groups and “bad” groups during middle school. She worries about those students get labeled as “bad” and strongly believes that their futures depend on making good decisions now and over the next few years.

Courtney is vaguely aware that the School District has some social emotional learning curriculum. She knows the counselors and social workers at her school. Courtney is aware of NyECC but can’t really explain what they do. She wants to do more to help her students navigate other parts of their lives, but, frankly, it’s all she can do to teach them fractions and pre-algebra.

#### Janice and Brad, Young Adults, Pahrump, NV

Janice and Brad are in their late 20s and moved to Pahrump to work in the casino industry. It is cheaper to live in Pahrump than in Las Vegas. They live in an apartment building that is primarily inhabited by other casino workers. The couple do not have children or many other responsibilities and spend a lot of their time off gambling and partying with their friends. They don’t drink and drive, they don’t miss work, and they don’t get into fights or any other kinds of trouble. Brad saw a poster about problem gambling that said, “When the fun stops.” Since then he and Janice have had a few conversations about whether or not their substance use and gambling is “normal” or if it is a “problem.” They have plans for a family some day and career aspirations. They wonder how they are supposed to judge whether or not what they are doing is problematic.

#### Shirley and John, Separated Family, Amargosa Valley, NV

Shirley is the mother of two children: Brandon, 10; and Sam, 12. Both boys attend Amargosa School (prek-8<sup>th</sup> grade). Prior to COVID-19 both boys participated in several after school and summer activities (primarily sports and scouts) and both did relatively well in school. Shirley and the boys’ father, John, have established a respectful, healthy co-parenting relationship. John works on a local farm and Shirley works for the Never Give Up Youth Healing Center.

Before COVID-19, life was hectic but Shirley and John were managing relatively well. They relied on grandparents to supervise the boys after-school and during school breaks. The sudden closures related to the COVID-19 pandemic threw the family’s schedules into complete disarray.

Shirley was furloughed for a few months and has recently returned to work full-time. John has continued to work full-time throughout the pandemic. The boys' schools have gone back and forth between in person and hybrid, with or without masks.

Every facet of Shirley and John's lives, and their relationship, has been impacted by COVID-19. Shirley and John have very different risk tolerances for potential exposure to COVID-19 and they argue constantly about where Shirley takes the boys and how they spend their time when they are with her.

The grandparents are at high-risk for COVID-19 so are not able to supervise or transport the boys. Shirley and John are trying to figure out how to get the boys to and from school. They don't know how to supervise them on the days they are not at school and both parents are at work. Shirley and John are arguing about how safe school, the school bus, or after school activities will be. They disagree about wearing masks and about whether the boys should be spending time with their friends or at their friends' homes. They are also arguing about how much time the boys are spending playing video games and on their cell phones now that they can't participate in their normal activities. They struggled to help the boys complete their online work last spring and they are dreading the beginning of the school year. These differences of opinion are starting to undermine every interaction between Shirley and John. Issues that they thought they had worked through years ago are starting to pop back up under the strain.

Both Shirley and John are starting to notice behavior issues with the boys. There have been incidences of defiance and angry verbal outbursts with both parents and even some physical altercations between the boys. Shirley and John fully understand that their disagreements are having a negative impact on the boys. They also realize that these early signs of rebelliousness, lack of self-control, and frustration can lead to negative behaviors in the years to come. They are willing to get some help to resolve their issues, but they don't know where to turn. Shirley and John go to work and go home. They both listen to internet radio and read internet news. They have very little idea of what is available in the community.

To reiterate, the object of looking at these vertical slices is to take a 360° view to brainstorm where and how people might interact with NyECC. The exercise should help

NyECC better understand the structures and systems in place and where they might best fit in.

## Appendix C – Sources

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