

Region 2



2021 Regional Needs Assessment

**ABILENE RECOVERY COUNCIL
PREVENTION RESOURCE CENTER**

104 Pine, Suite 3
Abilene, TX 79601

(Ph) 325-673-3503

www.prc2.org

Table of Contents

Executive Summary	6
Methodology	8
Prevention Resource Center	11
Key Concepts	13
Regional Demographics	21
Overview of Region:	21
Demographic Information:	24
Risk and Protective Factors	28
Societal Domain	28
Community Domain	34
School Domain	60
Family Domain	63
Peer Domain	67
Individual Domain	71
Consumption Patterns and Public Health/Safety Consequences	77
Patterns of Consumption	77
Public Health/Safety Concerns	91
Emerging Trends	95
Region in Focus	98
Prevention Resources and Capacities.....	98
Overview of Community Readiness.....	105
Putting It all Together	107
Works Cited	108
Appendix A	110
Table 1. County total Population Density Ranked Order	110
Table 2. County Zip Codes	111
Table 3. County Total Population 2019-2021	115
Table 4. County Total Age Groups 2021	116
Table 5. County Total Under 18 - 2019-2021	117
Table 6. County Level Population Gender 2021	118
Table 7. County Total Race & Ethnicity 2021.....	119
Table 8. Limited English Proficiency 2014-2019	120

Table 9. Languages Spoken 2019 121

Table 10. County Total Median Income 2017-2019 122

Table 11. County Total Labor Force, Employed, and Unemployed 2020..... 123

Table 12. County Total Unemployment Percentages 2017-2019 124

Table 13. County Total TANF Recipients 2018-2020 125

Table 14. County Total TANF Recipients per 100k 2018-2020 126

Table 15. County Total TANF Recipients per 1k 2018-2020 127

Table 16. County Total SNAP Recipients 2017-2019 128

Table 17. County Total Free & Reduced Lunch Recipients 2018-2020..... 129

Table 18. County Total Free & Reduced Lunch Percentages 2018-2020..... 130

Table 19. County Homeless Student 2019-2021 131

Table 20. Brown and Taylor County Homeless Adults 2019-2021..... 132

Table 21. Less than High School Graduate and High School Graduate or Equivalent 2017-2019 133

Table 22. Some College or Associate’s and Bachelor’s Degree or Higher 2017-2019 134

Table 23. Juvenile Referrals 2019 135

Table 24. Juvenile Dispositions 2019 136

Table 25. Juvenile Drunkenness 2018-2020. 137

Table 26. Juvenile Liquor Law Violations 2018-2020..... 138

Table 27. Adult Drunkenness 2018-2020 139

Table 28. Adult Driving Under the Influence 2018-2020 140

Table 29. County level totals Adult Sale/Manufacturing and Possession of Drugs 2020..... 141

Table 30. County level totals Juvenile Sale/Manufacturing and Possession of Drugs 2020 142

Table 31. County level totals Adult Marijuana arrests 2020..... 143

Table 32. County level totals Juvenile Marijuana arrests 2020 144

Table 33. County level totals Adult Drug/Narcotics arrests 2020..... 145

Table 34. County level totals Juvenile Drug/Narcotics arrests 2020..... 146

Table 35. County level totals Crime Rates 2018-2020..... 147

Table 36. County level totals Violent Crimes 2020 148

Table 37. County level totals Property Crimes 2020 149

Table 38. County level totals DWI Incarcerations 2018-2020 150

Table 39. County level totals Drug Related Incarcerations 2018-2020..... 151

Table 40. Uninsured Adults 65 and Under 2017-2019 152

Table 41. Uninsured Children 19 and Under 2017-2019 153

Table 42. County Level Totals for Mental Health Providers 2017-2019	154
Table 43. County Level Totals for Mental Health Services for Adults and Youth 2017-2019	155
Table 44. County Level Totals for SUD Services for Adults and Youth 2017-2019.....	156
Table 45. County Level Totals for People Living with HIV Per 1k, 2017-2019.....	157
Table 46. County level totals for Alcohol Permits, 2018-2020	158
Table 47. County level totals for Alcohol Permits, 2018-2020	159
Table 48. Alcohol Sales to Minors, 2017-2020	160
Table 49. County level totals for Tobacco Permits and Permit Density Per 100k, 2019-2020.....	161
Table 50. County Level Totals for Prescriptions Dispensed 2018-2020.....	162
Table 51. County Level Totals for Prescriptions Dispensed Per 100k 2020	163
Table 52. County Level Totals for Prescriptions Dispensed Per 1k 2020	164
Table 53. County Totals of 3 rd Grade Students – Did Not Meet Grade Level in Math STAAR, 2018 & 2019	165
Table 54. County Totals of 3 rd Grade Students – Did Not Meet Grade Level in Reading STAAR, 2018 & 2019	166
Table 55. County Total Discipline Actions 7 th – 12 th grade,2019	167
Table 56. County Level Total Child Abuse/Neglect Confirmed Victims 2018-2020	168
Table 57. County Level Total Children in Substitute Care 2018-2020.	169
Table 58. County Level Total Single-Parent Households 2017-2019	170
Table 59. TSS Parental Disapproval 2020	171
Table 60. TSS How Many Close Friends Use? 2020	172
Table 61. TSS How Easy Would It Be to Get Alcohol, Tobacco, Marijuana 2020	173
Table 62. TSS Prescriptions not Prescribed Use 2020	174
Table 63. TSS Alcohol Used at Parties Students Attended During School Year 2020.....	175
Table 64. TSS Marijuana Used at Parties Students Attended During School Year 2020	176
Table 65. TSS How Dangerous is Alcohol for Kids Your Age to Use? 2020	177
Table 66. TSS How Dangerous is Tobacco for Kids Your Age to Use? 2020	178
Table 67. TSS How Dangerous is E-Vapor Products for Kids Your Age to Use? 2020.....	179
Table 68. TSS How Dangerous is E-Vapor Products for Kids Your Age to Use? 2020.....	180
Table 69 TSS How Dangerous Prescriptions Not Prescribed to You to Use? 2020	181
Appendix B	182
Table 70. TSS 30 Day Use of Alcohol 2020.....	182
Table 71. TSS Lifetime Use of Alcohol 2020.....	183
Table 72. TSS Underage Binge Drinking 2020.....	184

Table 73. TSS Marijuana 30-Day, School Year, and Lifetime Use 2020..... 185

Table 74. TSS Tobacco 30-Day, School Year, and Lifetime Use 2020..... 186

Table 75. TSS Electronic Vapor Product 30-Day, School Year, and Lifetime Use 2020 187

Table 76. TSS Prescription Drugs Not Prescribed 30-Day, School Year, and Lifetime Use 2020 188

Table 77. TSS Illicit Drug 30-Day, School Year, and Lifetime Use 2020 189

Table 78. Vehicular Alcohol Fatalities 2018- 2020..... 190

Table 79. County Level Combined Deaths 1999-2019..... 191

Table 80. County Level Alcohol Induced Deaths 1999-2019 192

Table 81. County Level Drug Induced Deaths 1999-2019..... 193

Table 82. County Deaths by Suicide 1999-2019 194

Table 83. County Level Total Positive COVID-19 Cases as of August 16, 2021 195

Appendix C 196

Table 84. Data Coordinator Contact Information 196

Table 85. Texas Health and Human Services Regions..... 197

Glossary of Terms..... 198

Executive Summary

What is the RNA?

The Regional Needs Assessment (RNA) is a document created by the Prevention Resource Center (PRC) in Region 2 along with Data Coordinators from PRCs across the State of Texas and supported by Texas Health and Human Services Commission (HHSC). The PRC 2 serves 30 counties in Northwest Texas.

This assessment was designed to aid PRCs, HHSC, and community stakeholders in long-term strategic prevention planning based on most current information about the unique needs of Texas' diverse communities. This document will present a summary of statistics on risk and protective factors associated with drug use, as well as consumption patterns and consequences data; at the same time it will offer insight on gaps in services and data.

Who writes the RNA?

A team of Data Coordinators has procured national, state, regional, and local data through collaborative partnerships with diverse agencies such as law enforcement, public health, and education, among others.

How is the RNA informed?

Qualitative data collection has been conducted, in the form of questionnaires, focus groups, and interviews with key informants. The information obtained through these partnerships has been analyzed and synthesized in the form of this RNA. PRC 2 recognizes those collaborators who contributed to the creation of this RNA. Quantitative data has been extrapolated from federal and state agencies to ensure reliability and accuracy.

Key Findings:

Demographics: 25.6% of the population in Region 2 are adults 25-44, the next largest groups are under 18 making up 22.6%, and 45-64 year old's at 22.65% of our population. The smallest population group is ages 18-24 at 10.15%. People who are classified as Anglo continue to make up the majority of our population, however the Hispanic population is growing at a faster rate than the Anglo population according to the population projections for 2021. At the time of publication, the United States Census Bureau has not released their results from the 2020 Census.

Substance Use Behaviors: Synthetic Narcotics, Methamphetamines, and Marijuana are the most seized substances by law enforcement in our reported area in 2018-2020. Alcohol and marijuana are the most consumed substances among high school and college aged students in Region 2.

Underlying Conditions: Mental health, child abuse, family violence, drug and alcohol poisoning deaths, drug related court cases and incarcerations exceed the state rates and/or are increasing.

Behavioral Health Disparities: Statewide higher recorded major depressive episodes in Hispanic youth and youth 16-17 years of age. Females received care at a higher rate than males, youth ages 12-13 received care less than older youth. Adults 18-25 reported a higher than the national average serious thoughts of suicide. More Texans ages 45-64 received mental health services when compared to the national average.

Protective Factors and Community Strengths: Our area is fortunate to have hundreds of non-profits and social service agencies within our counties. Many of these services basic needs such as food, water, clothes; others provide treatment for mental health, the intellectually disabled, psychiatric treatment; others provide counseling, inpatient/outpatient services; intervention services include drug and alcohol referrals and counseling, peer recovery coaching, pregnancy intervention for new and expecting mothers-at-risk, and the numerous coalitions and community groups all willing to assist participants or community members in their needs. Region 2 has an atmosphere of a small town in which people truly do care in assisting one another.



Methodology

This needs assessment is a review of data on substance misuse, substance use disorders, and related variables that will aid in substance misuse prevention decision making at the county, regional, and state level. In this needs assessment, the reader will find the following:

- primary focus on the state-delineated prevention priorities of alcohol (underage drinking)
- tobacco/nicotine, marijuana, prescription drugs, and other drug use among adolescents
- exploration of drug consumption trends and consequences, particularly where adolescents are concerned
- and an exploration of related risk and protective factors as defined by The Center for Substance Abuse Prevention (CSAP)

Conceptual Framework

The conceptual framework for this report examines empirical indicators related to the Social Determinants of Health (SDoH), documented risk and protective factors, consumption patterns, and public health consequences as they associate with substance use/misuse and behavioral health challenges. The indicators are organized in the domains (or levels) of the Social Ecological Model (SEM), as described below. For the purpose of strategic prevention planning, the report attempts to identify behavioral health disparities and inequities present in the region.

Purpose/Relevance of the RNA

The regional needs assessment can serve in the following capacities to:

- determine patterns of substance use among adolescents and monitor changes in substance use trends over time
- identify gaps in data where critical substance misuse information is missing
- determine county-level differences and disparities
- identify substance use issues that are unique to specific communities
- provide a comprehensive tool for local providers to design relevant, data-driven prevention and intervention programs targeted to needs
- provide data to local providers to support their grant-writing activities and provide justification for funding requests
- assist policymakers in program planning and policy decisions regarding substance misuse prevention, intervention, and treatment at the region and state level

Process

HHSC and the Data Coordinators collected primary and secondary data at the county, regional, and state levels between September 1, 2020, and June 30, 2021. Due to the global pandemic, COVID-19, the Regional Needs Assessment deadline was extended to August 31, 2021.

Between September and July, HHSC staff meets with the Data Coordinators via monthly conference calls to discuss the criteria for processing and collecting data. The information is primarily gathered through established secondary sources including federal and state government agencies. Region-specific data collected through local law enforcement, community coalitions, school districts and local-level governments are included to address the unique regional needs of the community. Additionally, qualitative data is collected through primary sources such as surveys and focus groups conducted with stakeholders and participants at the regional level.

Primary and secondary data sources are identified when developing the methodology behind this document. Readers can expect to find information from the American Community Survey, Texas Department of Public Safety, Texas School Survey of Drug and Alcohol Use, and the Community Commons, among others. For the purpose of this needs assessment, adults and youth in the region were selected as primary sources.

Quantitative Data Selection

Identification of Variables

The data collected is the most recent data available within the last five years. However, older data might be provided for comparison purposes.

Criteria for Selection

The criteria used for including data sets in this document are their relevance, timeliness, methodological soundness, representativeness, and accuracy. The data arise from well-documented methodology gathered through valid and reliable data collection tools.

Qualitative Data Selection

Data Coordinators conduct focus groups, questionnaires, and interviews with community members about what they believe their greatest needs to be. These qualitative data collection methods often reveal additional sources of data.

Key Informant Interviews

Interviews are conducted primarily with school officials and law enforcement officers where available. Participants are randomly selected by city and then approached to participate in an interview with the Data Coordinator. Each participant is asked the following questions:

- What problems do you see in your community?
- What is the greatest problem you see in your community?
- What hard evidence do you have to support this as the greatest problem?
- What services do you lack in your community?

Other questions inevitably arise during the interviews, but these four are asked of each participant.

Focus Groups

Participants for the focus groups are invited from a wide selection of professions including law enforcement, health and community leaders, clergy, high school educators, town councils, state representatives, university professors, and local business owners. In these sessions, participants discuss their perceptions of how their communities are affected by substance use/misuse and behavioral health challenges.

Longitudinally Presented Data

To capture a richer depiction of possible trends in the data, we report multi-year data where it is available from respective sources. Most longitudinal presentations of data in this needs assessment consist of (but are not limited to) the most recently available data collected over three years in one-year intervals of data-collection, or the most recently available data collected over three data-collection intervals of more than one year (e.g., data collection for the TSS is done in two-year intervals). Efforts are also made in presenting state- and national-level data with county-level data for comparison purposes. However, when neither state-level nor national-level data are included in tables and figures, this is generally because the data was not available at the time of the data request. Such requests are made to numerous counties, state, and national-level agencies in the development of this needs assessment.

Prevention Resource Center

PRCs are funded by the Texas Health and Human Services Commission (HHSC) to provide data and information related to substance use and misuse and to support prevention collaboration efforts in the community. There is one PRC located in each of the eleven Texas Health Service Regions (see Figure 1) to provide support to prevention providers located in their region with substance use data, trainings, media activities, and regional workgroups.

PRCs focus on the state's overall behavioral health and the four prevention priorities:

- underage alcohol use
- underage tobacco and nicotine products use
- marijuana and other cannabinoids use
- prescription drug misuse

PRCs have four fundamental objectives:

- collect data relevant to the state’s prevention priorities and share findings with community partners
- ensure sustainability of a Regional Epidemiological Workgroup focused on identifying strategies related to data collection, gaps in data, and prevention needs
- coordinate regional prevention trainings and conduct media awareness activities related to risks and consequences of alcohol, tobacco, and other drugs (ATOD) use
- conduct voluntary compliance checks and education on state tobacco laws to retailers

Regions

Figure 1. Map of Health Service Regions serviced by a Prevention Resource Center:

Region 1	Panhandle and South Plains
Region 2	Northwest Texas
Region 3	Dallas/Fort Worth Metroplex
Region 4	Upper East Texas
Region 5	Southeast Texas
Region 6	Gulf Coast
Region 7	Central Texas
Region 8	Upper South Texas
Region 9	West Texas
Region 10	Upper Rio Grande
Region 11	Rio Grande Valley/Lower South Texas



How PRCs Help the Community

PRCs provide technical assistance and consultation to providers, community groups, and other stakeholders to identify data related to substance use and behavioral health in general. PRCs work to promote and educate the community on substance use and misuse and associated consequences through various data products, media awareness activities, and an annual regional needs assessment. In this way, PRCs provide stakeholders with knowledge and understanding of the local populations they serve, help guide programmatic decision making, and provide community awareness and education related to substance use and misuse. The program also helps to identify community strengths, gaps in services and areas for improvement.

Data Coordinators

The PRC Data Coordinators serve as a primary resource for substance use and behavioral health data for their region. They lead a Regional Epidemiological Workgroup (REW), compile and synthesize data, and disseminate findings to the community. The PRC Data Coordinators also engage in building collaborative partnerships with key community members who aid in securing access to information.

Key Concepts

Adolescence

The World Health Organization (WHO) identifies adolescence as a critical transition in the lifespan characterized by tremendous growth and change, second only to infancy. This period of mental and physical development poses a critical point of vulnerability where the use and misuse of substances, or other risky behaviors, can have long-lasting negative effects on future health and well-being. The focus of prevention efforts on adolescence is particularly important since approximately 90% of adults who are clinically diagnosed with SUDs, began misusing substances before the age of 18, according to SAMSHA. Qualifiers for age-specific terms related to different data sources will be referenced in each section.

Texas School Survey

The Texas School Survey of Drug and Alcohol Use (TSS) collects self-reported tobacco, alcohol, and substance use data among students in grades 7 through 12 in Texas public schools. The survey is sponsored by HHSC and administered by the Public Policy Research Institute (PPRI). PPRI actively recruits approximately 20% of Texas public schools with grades 7 through 12 to participate in the statewide assessment during the spring of even-numbered years.

Figure 2. Number of Surveys Included in State Sample for Texas School Survey

Number of Surveys Included in State Sample for TSS							
Report Year	Original Campuses Selected	Campuses Signed Up to Participate	Actual Campuses Participated	Total Non-Blank Surveys	Usable Surveys	# Rejected	% Rejected
2020*	700	224	107	28,901	27,965	936	3.2%
2018	710	228	191	62,620	60,776	1,884	2.9%
2016	600	187	140	50,143	49,070	1,073	2.1%

Texas School Survey, 2020/2018/2016. <http://www.texaschoolsurvey.org/Report>. Accessed March 4, 2021

Figure 3. Texas School Survey Distribution Comparison and Impact of Pandemic

Grade	Survey Distribution TSS 2020*		Survey Distribution TSS 2018		Difference Between 2018 and 2020* TSS
	# of Usable Surveys	%	# of Usable Surveys	%	# of Usable Surveys
Grade 7	6,414	2.9%	12,445	20.5%	-6,031
Grade 8	6,472	23.1%	12,268	20.2%	-5,796
Grade 9	4,189	15.0%	9,409	15.5%	-5,220
Grade 10	4,119	14.7%	9,571	15.8%	-5,452
Grade 11	3,556	12.7%	9,163	15.1%	-5,607
Grade 12	3,215	11.5%	7,920	13.0%	-4,705
Total	27,965	100.0%	60,776	100.0%	-32,811

Texas School Survey, 2020/2018. <http://www.texaschoolsurvey.org/Report>. Accessed March 4, 2021

During the 2019-2020 school year, schools across Texas were closed from early March through the end of the school year due to the COVID-19 pandemic. Due to this sudden and unexpected closure, many schools that had registered for the survey were unable to complete it. Please note that both the drop in participation along with the fact that those that did complete did so before March may have impacted the data.” - **Public Policy Research Institute**, Texas School Survey.

Epidemiology

Epidemiology is described as “the study of the occurrence and distribution of health-related events, states, and processes in specified populations, including the study of the determinants influencing such processes, and the application of this knowledge to control relevant health problems.”¹ This definition provides the theoretical framework that this assessment uses to discuss the overall impact of substance use and misuse. Epidemiology frames substance use and misuse as a preventable and treatable public health concern. The Substance Abuse and Mental Health Services Administration (SAMHSA), the main federal authority on substance use, utilizes epidemiology to identify and analyze community patterns of substance misuse and the contributing factors influencing this behavior.

Strategic Prevention Framework

The Strategic Prevention Framework (SPF) provided by CSAP guides many prevention activities in Texas (see Figure 4). In 2004, Texas received a state incentive grant from CSAP to implement the SPF in close collaboration with local communities to tailor services to meet local needs for substance abuse prevention. This prevention framework provides a continuum of services that target the three classifications of prevention activities under the Institute of Medicine (IOM), which are universal, selective, and indicated.

¹ Porta, Miquel S. *A Dictionary of Epidemiology*. Oxford: Oxford University Press, 2016, p. 95.

Figure 4. Strategic Prevention Framework (SPF)

Strategic Prevention Framework



Assessment

Profile population needs, resources, and readiness to address needs and gaps

Capacity

Mobilize and/or build capacity to address needs

Planning

Develop a Comprehensive Strategic Plan

Implementation

Implement the Strategic Plan and corresponding evidence-based prevention strategies

Evaluation

Monitor, evaluate, sustain, and improve or replace those that fail

Source: Sustainability & Cultural Competence. 2020. AVPRIDE. <https://avpride.com/> Accessed April 29, 2020

Socio-Ecological Model

The Socio-Ecological Model (SEM) is a conceptual framework developed to better understand the multidimensional factors that influence health behavior and to categorize health intervention strategies. This RNA is organized using the six domains (or levels) of the SEM as described below:

- Societal Domain - social and cultural norms and socio-demographics such as the economic status of the community
- Community Domain - social and physical factors that indirectly influence youth including educational attainment of the community, community conditions, the health care/service system, and retail access to substances
- School Domain - social and physical factors that indirectly impact youth including academic achievement and the school environment
- Family Domain - social and physical factors that indirectly impact youth including family conditions and perceptions of parental attitudes
- Peer Domain - interpersonal factors including social norms and youth perceptions of peer consumption and social access
- Individual Domain - intrapersonal characteristics of youth such as knowledge, skills, attitudes, beliefs, and behaviors

The SEM proposes that behavior is impacted by all levels of influence, from the intrapersonal to the societal, and that the health promotion programs become more effective when they intervene at multiple levels. Changes at the community level will create change in individuals, and the support of individuals in the population is essential for implementing environmental change.

Risk and Protective Factors

One component shared by effective prevention programs is a focus on risk and protective factors that influence adolescents. Protective factors decrease an individual's risk for a substance use disorder. Examples include strong and positive family bonds, parental monitoring of children's activities, and access to mentoring. Risk factors increase the likelihood of substance use behaviors. Examples include unstable home environments, parental use of alcohol or drugs, parental mental illness, poverty levels, and failure in school performance. Risk and protective factors can exist in any of the domains of the Socio-Ecological Model (see Figure 5).²

² Adapted from: D'Amico, EJ, Osilla, KC. *Prevention and intervention in the school setting*. Edited by KJ Sher. Oxford: Oxford University Press, 2016. Vol. 2 of *The Oxford Handbook of Substance Use and Substance Use Disorders*, p. 678.

Figure 5. Socio-Ecological Model for Substance Use, with Examples

	Risk Factors	Protective Factors
Society	<ul style="list-style-type: none"> • Impoverishment • Unemployment and underemployment • Discrimination • Pro-ATOD-use messages in the media 	<ul style="list-style-type: none"> • Media literacy (resistance to pro-use messages) • Decreased accessibility • Increased pricing through taxation • Raised purchasing age and enforcement • Stricter driving-under-the-influence laws
Community	<ul style="list-style-type: none"> • Availability of ATOD • Community laws, norms favorable toward ATOD • Extreme economic and social deprivation • Transition and mobility • Low neighborhood attachment and community disorganization 	<ul style="list-style-type: none"> • Opportunities for participation as active members of the community • Decreasing ATOD accessibility • Cultural norms that set high expectations for youth • Social networks and support systems within the community
School	<ul style="list-style-type: none"> • Academic failure beginning in elementary school • Low commitment to school 	<ul style="list-style-type: none"> • Opportunities for prosocial involvement • Rewards/recognition for prosocial involvement • Healthy beliefs and clear standards for behavior • Caring and support from teachers and staff • Positive instructional climate
Family	<ul style="list-style-type: none"> • Family history of ATOD use • Family management problems • Family conflict • Parental beliefs about ATOD 	<ul style="list-style-type: none"> • Bonding (positive attachments) • Healthy beliefs and clear standards for behavior • High parental expectations • A sense of basic trust • Positive family dynamics
Peer	<ul style="list-style-type: none"> • Association with peers who use or value ATOD use • Association with peers who reject mainstream activities and pursuits • Susceptibility to negative peer pressure • Easily influenced by peers 	<ul style="list-style-type: none"> • Association with peers who are involved in school, recreation, service, religion, or other organized activities • Resistance to negative peer pressure • Not easily influenced by peers
Individual	<ul style="list-style-type: none"> • Biological and psychological dispositions • Positive beliefs about ATOD use • Early initiation of ATOD use • Negative relationships with adults • Risk-taking propensity/impulsivity 	<ul style="list-style-type: none"> • Opportunities for prosocial involvement • Rewards/recognition for prosocial involvement • Healthy beliefs and clear standards for behavior • Positive sense of self • Negative beliefs about ATOD • Positive relationships with adults

Social Determinants of Health

The U.S. Department of Health and Human Services, Health People 2030 defines the SDOH as the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. The SDOH are grouped into 5 domains; economic stability, education access, health care access, neighborhood and built environment, and social and community context. SDOH's have a major impact on health, well-being, and quality of life, they also contribute to health disparities and inequities.

Figure 6. Social Determinants of Health



Adapted from: Healthy People 2020

Source: <https://health.gov/healthypeople/objectives-and-data/social-determinants-health> Accessed April 20, 2021

Consumption Patterns

This needs assessment follows the example of the TSS, the Texas Youth Risk Surveillance System (YRBSS), and the National Survey on Drug Use and Health (NSDUH), by organizing consumption patterns into three categories: lifetime use (has tried a substance, even if only once), school year use (past year use when surveying adults or youth outside of a school setting), and current use (use within the past 30 days). These three consumption patterns are used in the TSS to elicit self-reports from adolescents on their use of tobacco, alcohol, marijuana, and illicit drugs and their misuse of prescription drugs. The TSS, in turn, is used as the primary outcome measure of Texas youth substance use and misuse in this needs assessment.

A plethora of information exists on risk factors that contribute to Alcohol Use Disorder (AUD) in the United States. According to SAMHSA, AUD is ranked as the most wide-reaching SUD in the U.S. for people ages 12 and older, followed by Tobacco Use Disorder, Cannabis Use Disorder, Stimulant Use Disorder, Hallucinogen Use Disorder, and Opioid Use Disorder. When evaluating alcohol consumption patterns in adolescents, more descriptive information beyond the aforementioned three general consumption categories is often desired and can be tapped by adding specific quantifiers (i.e., per capita sales, frequency and trends of consumption, and definitions of binge drinking and heavy drinking), and qualifiers (i.e., consequential behaviors, drinking and driving, alcohol consumption during pregnancy) to the operationalization process.

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) has created very specific guidelines that are widely used in the quantitative measurement of alcohol consumption (see Figure 7).

Some alcoholic drinks contain more alcohol than others. As with all matter's nutritional, you need to consider the portion size. For example, some cocktails may contain an alcohol "dose" equivalent to three standard drinks.

Figure 7. National Institute on Alcohol Abuse and Alcoholism (NIAAA)



National Institute on Alcohol Abuse and Alcoholism <https://www.niaaa.nih.gov/> Accessed April 16, 2020

Consequences

One of the hallmarks of SUDs is the continued use of a substance despite harmful or negative consequences. SUDs have health consequences, physical consequences, social consequences, and specific consequences for adolescents. The prevention of such consequences has received priority attention as Goal 2 (out of four goals) on the 2016-2020 NIDA Strategic Plan titled *Develop new and improved strategies to prevent drug use and its consequences*.

We caution our readers against drawing firm conclusions about the consequences of SUDs from the data reported here. The secondary data we have drawn from does not necessarily show a causal relationship between SUDs and consequences for the community.

Stakeholder/Audience

This document can provide useful information to stakeholders from a variety of disciplines: substance use prevention and treatment providers; community coalitions; medical providers; school districts and higher education institutions; city, county, and state leaders; and community members interested in public health and drug consumption. The information presented in this report aims to contribute to program planning, evidence-based decision making, and community education.

The executive summary found at the beginning of this report provides highlights of the report for those seeking a brief overview. Since readers of this report will come from a variety of backgrounds, a glossary of key concepts can be found at the end of this needs assessment. The core of the report focuses on risk factors, consumption patterns, consequences, and protective factors. A list of tables and figures can be found in Appendix A and B.

Regional Demographics

Overview of Region:

The demographic profile of our reported area can be beneficial in understanding the dynamics of Region 2. Demographic indicators include population size, race, ethnicity, languages, age distribution and concentrations of populations within the reported area. Demographic information is valuable as it affects all areas of human activity (socioeconomics, environmental risk, and protective factors). Demographics may also play a crucial role in understanding trends over time to prepare for future services in policy analysis and community development.

Geographic Boundaries

Region 2 is made up of 30 counties covering a total of 27,302.9 square miles. Wichita and Taylor Counties have the largest population density per square mile in Region 2. Wichita ranks 27th and Taylor County ranks 34th in the state. Kent county ranks last at 246th in the state. Below are the top four and lowest four counties in Region 2, population per square mile (density) according to the U.S. Census 2010 population projections. *County total population density may be found in Appendix A Table 1.*

Area	Population Per Square Mile (Density)
United States	92.9
Texas	96.3
Region 2	20.45
Highest Density Counties	
Wichita	209.5
Taylor	143.6
Brown	403
Jones	21.8
Lowest Density Counties	
Throckmorton	1.8
Cottle	1.7
Stonewall	1.6
Kent	0.9

Source: United States Census Bureau. "Summary File" U.S. Census Bureau, 2014-2018 America Community Survey 5-Year Estimates. <https://data.census.gov/cedsci/> Accessed April 1, 2020



Source: Texas Department of State Health Services. Region 2 Map, Accessed July 14, 2020.

Zip Codes

Zip codes are numbered with the first digit representing a certain group of U.S. states, the second and third together represent a region within that group, possibly a large city, and the fourth and fifth represent a group of delivery addresses within that region. Zip codes are not determined by population, but rather by mail volume and geography.

The two largest counties within Region 2, Taylor and Wichita Counties have multiple zip codes. Taylor County has 19 zip codes, 5 within the city limits of Abilene, 1 for Dyess Air Force Base, 1 for each of the 3 Universities, and 2 for P.O. Boxes, the remaining belonging to the rural cities within Taylor County. Wichita County has 13 zip codes, 7 within the city limits of Wichita Falls, 1 for Sheppard Air Force Base, and 1 for P.O. Boxes, the remainder belonging to rural cities with the county.³ Listing of all zip codes by county can be found in Appendix A as Table 2.

Counties

Region 2 services 30 counties, the following is a list of all counties served:

ARCHER	COMANCHE	HASKELL	MONTAGUE	STONEWALL
BAYLOR	COTTLE	JACK	NOLAN	TAYLOR
BROWN	EASTLAND	JONES	RUNNELS	THROCKMORTON
CALLAHAN	FISHER	KENT	SCURRY	WICHITA
CLAY	FOARD	KNOX	SHACKELFORD	WILBARGER
COLEMAN	HARDEMAN	MITCHELL	STEPHENS	YOUNG

³ United States Postal Service Zip Code Database Accessed June 15, 2021

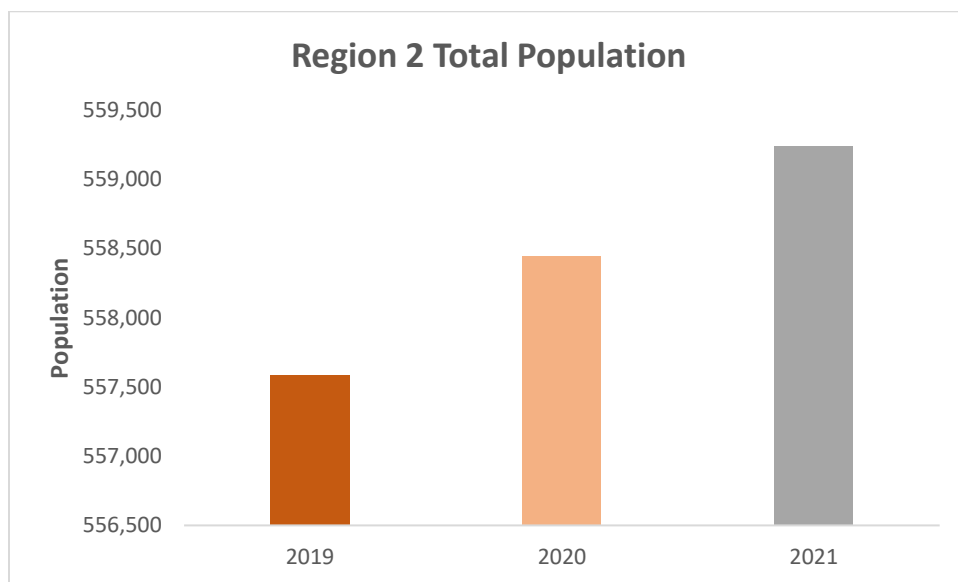
Major Metropolitan Areas (i.e., Concentrations of Populations)

Region 2 is primarily comprised of rural areas, however there are a few cities considered urban. **Abilene** is an urban area centrally located in our region within Taylor County with an estimated population in 2021 of 140,207. Taylor County continues to have residential growth and is the largest city within our area. **Wichita Falls** is, located in the northern section of our region, bordering the Texas - Oklahoma Stateline. Wichita County is the second largest urban area in Region 2 with an estimated population in 2021 of 133,234. This represents a small increase from 2020 with an estimated population of 133,138. Lastly, **Brownwood**, is in the southernmost part of Brown County with an estimated population in 2021 of 38,962. Brown County is the third largest urban area within Region 2. Estimated population data is reported by the Texas State Data Center, Texas Population data for 2019-2021.

Demographic Information:

Total Population

The 2020 U.S. Census release was delayed due to COVID-19. Population data is expected to be released fall of 2021. The Texas Demographic Center, Texas Populations Projections Programs produces a biannual projections report for all counties in the state of Texas. This report includes totals for age, sex, and race/ethnicity.⁴ These projections are utilized extensively by public and private entities across the state and region. Region 2 has shown a continuous growth in residents over the past three years. **2019 regional population was 557,583. The population increased slightly in 2020 to 558,447, and finally the projected population in 2021 is 559,237 residents.** *County level population projects for 2021 may be found in Appendix A as Table 3.*



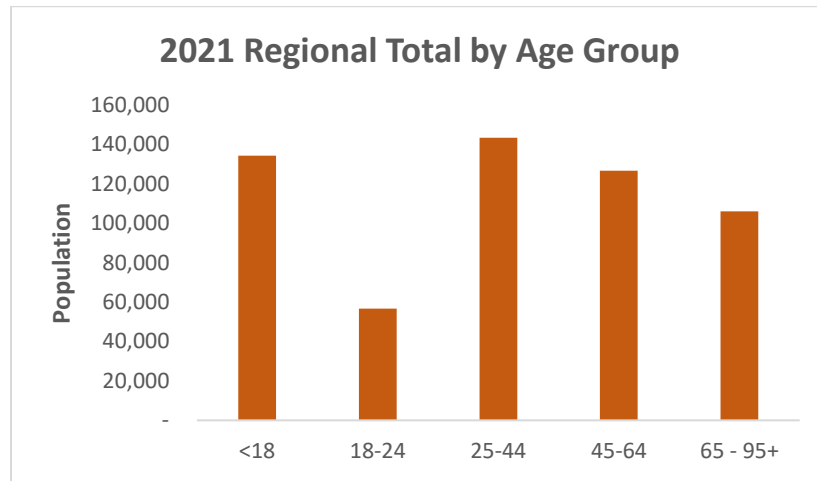
Source: Texas Demographic Center, Texas Population Projects Program, 2019-2021. Accessed June 15, 2021.

⁴ Texas Demographic Center, Texas Population Estimates Program.

<https://demographics.texas.gov/Data/TPEPP/Projections/Tool?fid=E78EA7AF7FA040DEA6D207B2F706C607>

Age

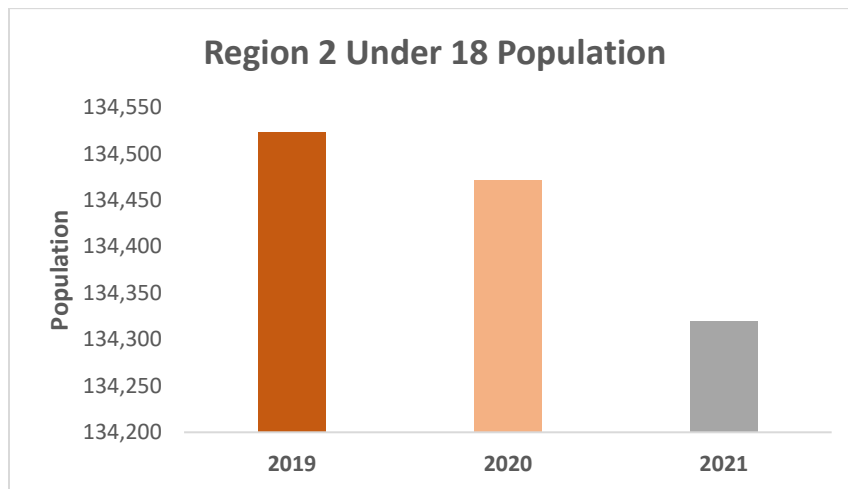
The Texas State Data Center organizes total population into age categories. These categories are: <18, 18-24, 25-44, 45-64, and 65-95+ years old. In 2020 the largest age group was 25-44, followed by <18. **In 2021, persons 25-44-years old remains the largest population, followed by 45-64 year olds, the smallest age group are persons 65 – 95+. The percentage breakdown is: <18 – 24.6%, 18-24 – 10.15%, 25-44 – 25.63%, 45-64 – 22.651%, and 65+ 19%.** The following chart shows the total number for each age category for 2021. *County level data for Total Age Groups in 2021 may be found in Appendix A Table 4.*



Source: Texas Demographic Center, Texas Population Program, 2018-2021. Accessed June 15, 2021.

Population <Age 18 including percentage

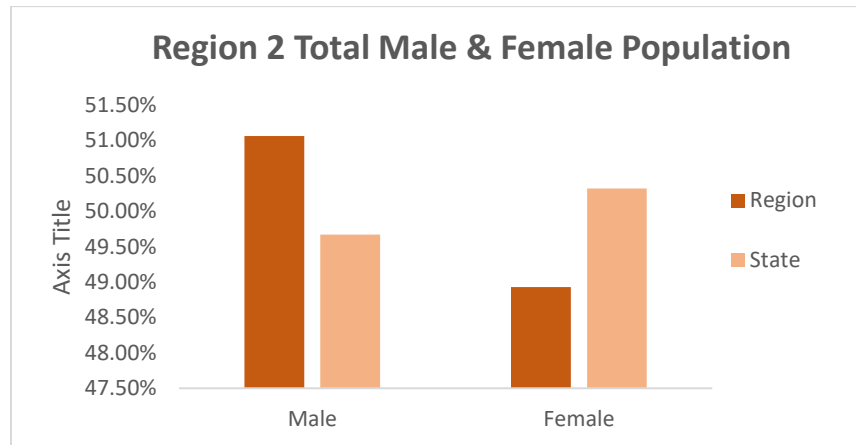
The population under 18 in Region 2 is continues to decrease, compared to the State which continues to show an increase. In 2019 under 18 population was 134,523. In 2020 it was 134,471, and the projection for 2021 under 18 population is 134,320. The state of Texas under 18 population in 2019 was 7,858,443. In 2020 it was 7,932,713, and in 2021 the projected under 18 population is 8,017,617. *County level data for under 18 age group may be found in Appendix A Table 5.*



Source: Texas Demographic Center, Texas Population Projects Program, 2019 - 2021. Accessed June15,2021.

Male/Female

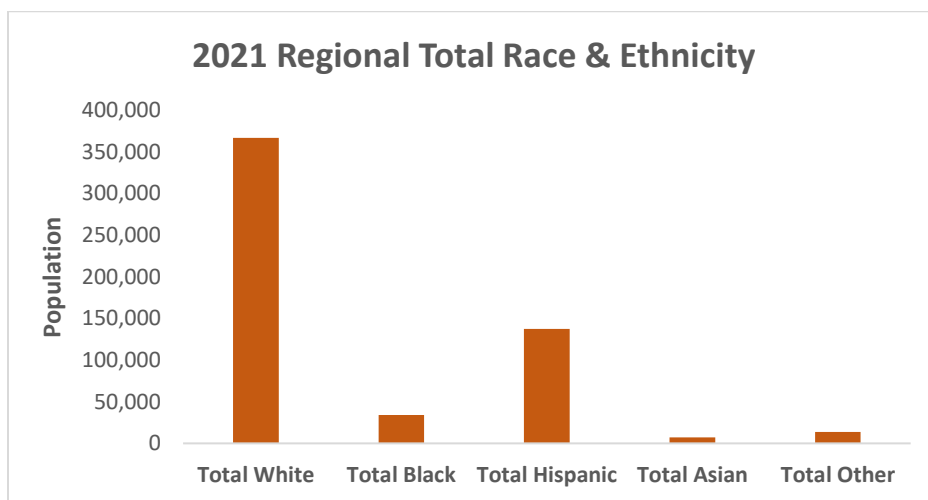
According to the U.S. Census Bureau, the sex of each person is asked to create statistics about males and females and to present other data, such as occupation, by sex. Local, state, tribal, and federal agencies use data about males and females to plan and fund government programs. These statistics also help enforce laws, regulations, and policies against discrimination in government programs and in society. In Region 2 the total male population is 51.06%, total female is 48.93%, the state total male is 49.67%, and total female is 50.32%. *County level data for Total Male & Female in 2021 may be found in Appendix A Table 6.*



Source: Texas Demographic Center, Texas Population Projects Program, 2021. Accessed June 15, 2021

Race/Ethnicity

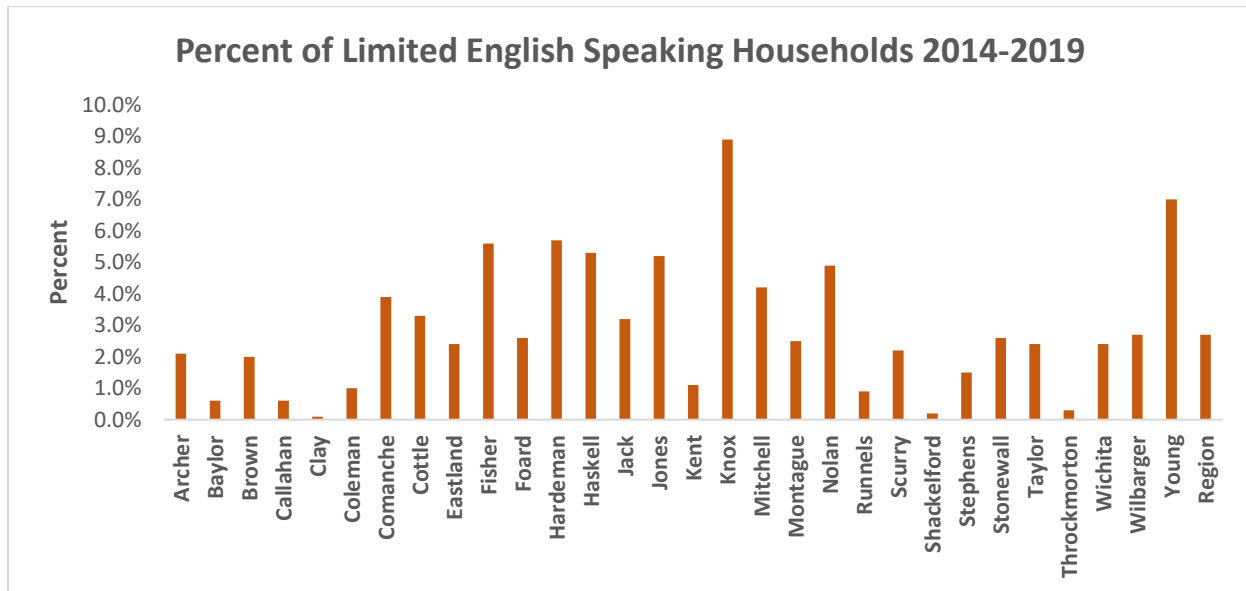
Ethnicity continues to be diverse in Region 2. Trends continue to show the ethnic makeup of Region 2 is changing. The Anglo population continues to decrease, while Black and Hispanic populations are increasing. Populations identifying as Other have stayed close to the same between 2019 and 2020. The ethnic breakdown for Region 2 is Anglo – 366,735, Black – 34,001, Hispanic – 137,546, Asian – 7,281, and Other – 13,674. *County level Race and Ethnicity in 2021 may be found in Appendix A Table 7.*



Source: Texas Demographic Center, Texas Population Projects Program, 2019-2021. Accessed June 15, 2021.

Languages Spoken/Language Proficiency

According to the U.S. Census American Community Survey a “limited English-speaking household” is one in which no member 14 years old and over 1.) Speaks only English or 2.) Speaks a non-English language and speaks English “very well.” In other words, all members 14 years old and over have at least some difficulties with English. English-only households cannot belong in this group. Previous Census Bureau data have referred to these households as “linguistically isolated”.⁵ *County level Languages Spoken in the Home and Limited English Proficiency may be found in Appendix A Tables 8 and 9.*



Source: U.S. Census Bureau, 2014-2019 American Community Survey 5-year

⁵ U. S. Census Bureau. 2014-2019 American Community Survey, 5-Year estimates. <https://data.census.gov/cedsci/> Accessed May 12, 2021

Risk and Protective Factors

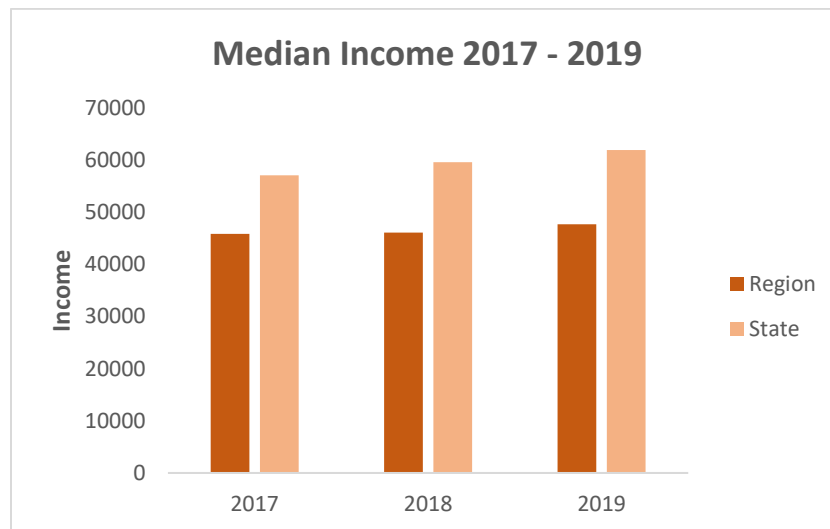
Societal Domain

Social and economic data is examined and reported to provide a greater understanding of our region's household composition. This data also assists our communities in better identifying the risk and protective factors influencing the population in our region.

Economic Status

Median Income

The U.S. Census Bureau collects data through the American Community Survey (ACS). The American Community Survey, a data tool of the U.S. Census, uses 5-year estimates.⁶ Median Household Income is generally defined as the gross income of all members of a household 15 years and older. This information is used to evaluate the economic health of an area. The ACS states that local, state and federal agencies use this income data to plan and fund programs that provide economic assistance for populations in need. In conjunction with poverty estimates, this data is part of funding formulas that determine the distribution of food, health care, job training, housing, and other assistance. The data for 2017-2019 shows our region has a lower median household income than the state of Texas, and additionally, lower than the U.S. In 2019 the U.S. Census Bureau reported the median household income in the U.S. was \$68,703, Texas reported \$61,874, and Region 2 reported \$47,650. *County level data for Household Median Income may be found in Appendix A Table 10.*

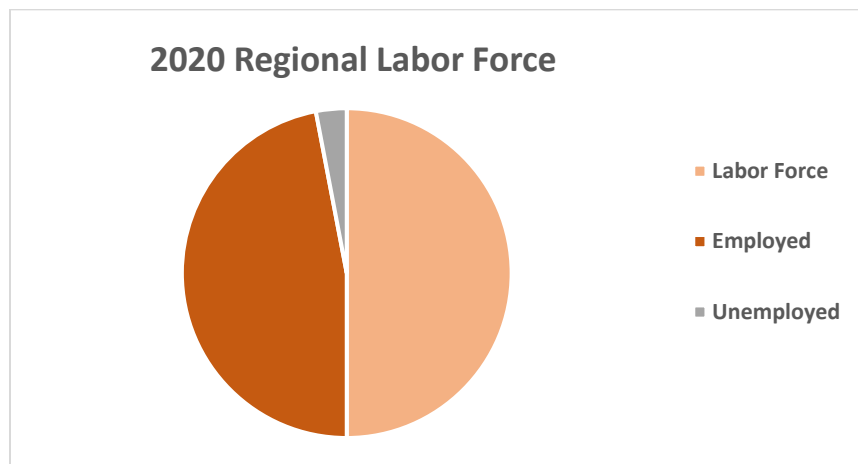


Source: U.S. Census Bureau, American Community Survey, Accessed June 9, 2021.

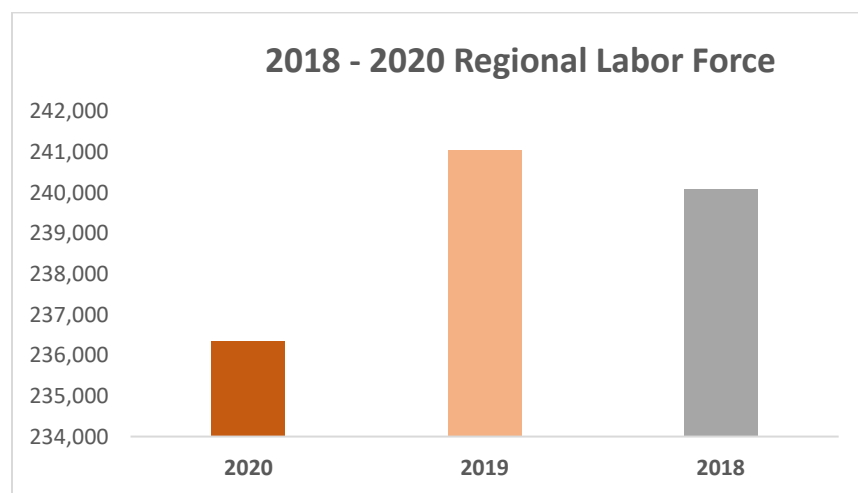
⁶ U.S. Census Bureau. American Community Survey, Texas Income by County <https://data.census.gov> Accessed June 9, 2021

Unemployment/Employment Rate

The U.S. Department of Labor records local area labor force statistics. The Local Area Unemployment Statistics (LAUS) produces employment, unemployment, and labor force data. The Bureau of Labor Statistics (BLS) of the U.S. Department of Labor is responsible for concepts, definitions, technical procedures, validation, and publication of the workforce agencies statewide.⁷ The U.S. Bureau of Labor Statistics published a news release on March 3, 2021, addressing the decreased labor force and the increased jobless rate for 2020. The U.S. jobless rate nearly doubled from 4.4 to 8.1, along with the employment population fell by 4% to 56.9%. This is the impact of COVID-19 pandemic. **In 2020, Region 2 had a total Labor Force of 236,358, which is a decrease of 4,663 or 9.8%. 222,199 of that labor force were reported as Employed, and 14,219 as Unemployed compared to 7,516 in 2019 . The average Unemployment rate is 5.3%, which is lower than the state rate of 7.6%. 2020 County level total numbers of labor force, employment, and unemployed may be found in Appendix A Table 11.**



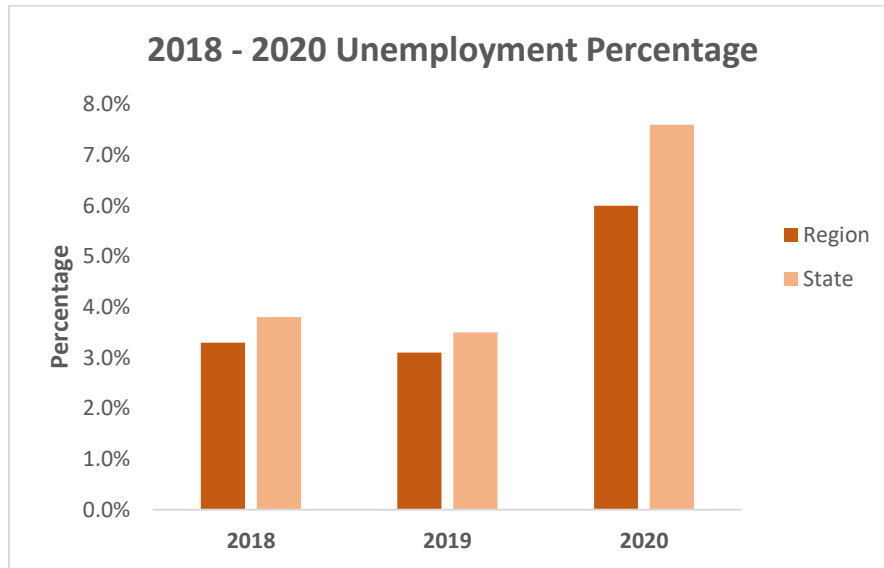
Source: United States Bureau of Labor Statistics, local area unemployment, 2020. Accessed February 9, 2021



Source: United States Bureau of Labor Statistics, local area unemployment, 2020. Accessed February 9, 2021

⁷ United States Department of Labor. Local Area Unemployment Statistics, <https://bls.gov/laui/#tables> Accessed February 9, 2021.

The chart below reports Region 2's unemployment percentage for 2018-2020. Our region's unemployment rate is below the state rate. The regional unemployment rate saw a large increase, according to data from the U.S. Department of Labor. The forecasted increase in the unemployment rate for 2020 for the U.S., state of Texas, and Region 2 was due to COVID-19. *County level data for the total percentage of unemployment for 2017-2019 is available in Appendix A Table 12.*

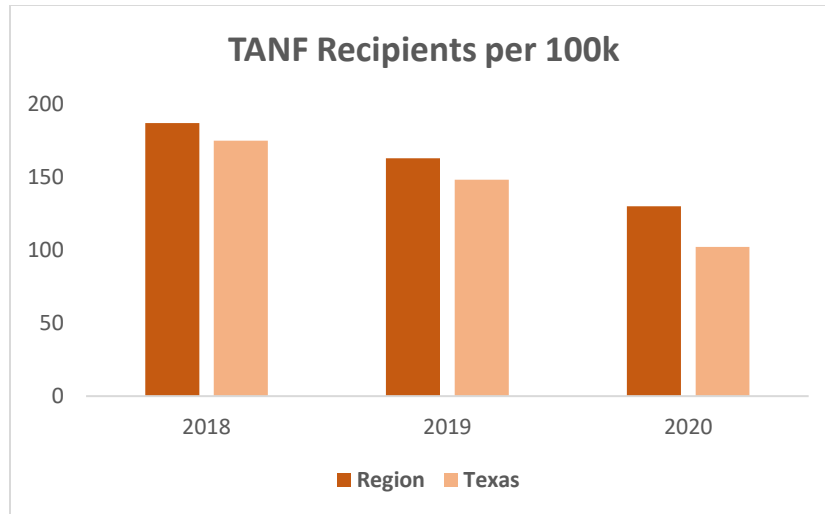


Source: United States Bureau of Labor Statistics, unemployment 2018 – 2020. Accessed February 9, 2021

TANF recipients

The Texas Temporary Assistance for Needy Families (TANF) is a support service for Texas families. TANF helps families pay for food, clothing, housing, and other essentials. Families with children 18 years of age and younger (parents and their children, or relatives caring for related children) may receive TANF. The Texas Health and Human Services Commission record the number of recipients for this benefit in our local counties; a recipient rate is calculated for each county⁸. The following data reports the regional rate of recipients per 100k compared to the state rate of recipients for the last three years. **Region 2 reported a rate of 71.63 recipients per 100k in 2020; the state reported a higher rate of 87.24 recipients per 100k in 2020. In 2019 Region 2 reported 162.89 recipients per 100k, and the state reported a lower rate again of 148.07 recipients per 100k.** This indicates an important need of financial and medical assistance for the families in our region. *Total County recipients and recipients per 100k data may be found in Appendix A Tables 13, 14, and 15.*

⁸ Temporary Assistance for Needy Families. Texas Health and Human Services Commission. 2018-2020, <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/temporary-assistance-needy-families-tanf-statistics> Accessed April 29, 2021.

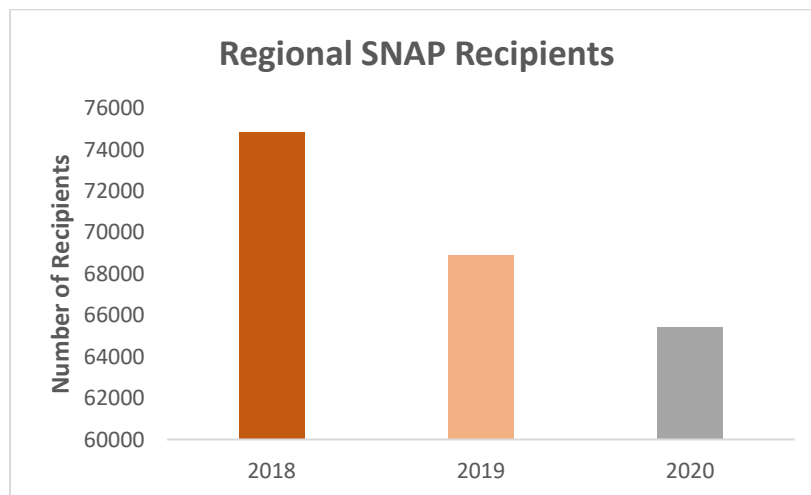


Source: Texas Health and Human Services Commission, TANF Basic and State Program, 2018-2020

SNAP recipients

The Health and Human Services Commission reports the monthly average of the Supplemental Nutritional Assistance Program (SNAP) recipients. SNAP helps individuals buy food they need for good health; it also allows for the purchase of garden seeds with SNAP benefits. SNAP cannot be used to purchase tobacco, alcohol, or items that cannot be eaten or drank, such as household items and cleaning products. SNAP requires most people ages 16 – 59 to follow work rules to receive SNAP benefits, meaning they must look for a job or be in an approved work program. If they are currently employed, they cannot quit without good reason. Individuals who are disabled or pregnant may not have to work to get benefits.⁹

Region 2 continues to see a decrease in recipients receiving SNAP benefits. The regional totals decreased from 74,831 in 2018 to 65,413 in 2020. County level data of SNAP recipients can be found in Appendix A Table 16.

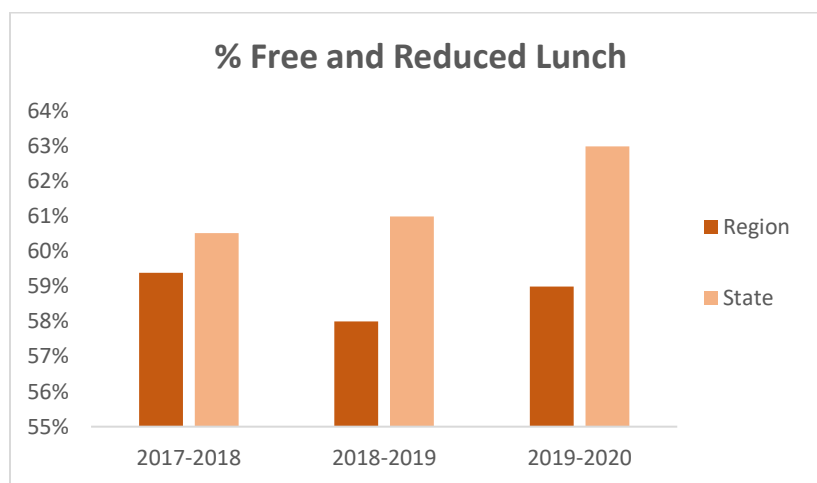


Source: Texas Health and Human Service Commission, SNAP Recipients, 2018-2020. Accessed May 12, 2021

⁹ Supplemental Nutritional Assistance Program (SNAP) Statistics. Texas Health and Human Services Commission, <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/supplemental-nutritional-assistance-program-snap-statistics> Accessed May 12, 2021.

Free, reduced school lunch recipients

The National School Lunch Program (NSLP) is a federally assisted meal program that provides free or reduced meals for more than 3 million Texas children in public, nonprofit private schools, and residential childcare institutions. Eligibility is based on total income and number of household members. Children whose family income is at or below 130% of the poverty level are eligible for **free meals**. Families whose income is between 130 – 185% of the poverty level are eligible for **reduced-priced meals**.¹⁰ *County level data for total number of Free & Reduced Lunch Recipients 2017-2020 may be found in Appendix A Tables 17 & 18.*



Source: National Center for Education Statistics, *Free and Reduced Lunch, 2016-2019*

Homeless Students

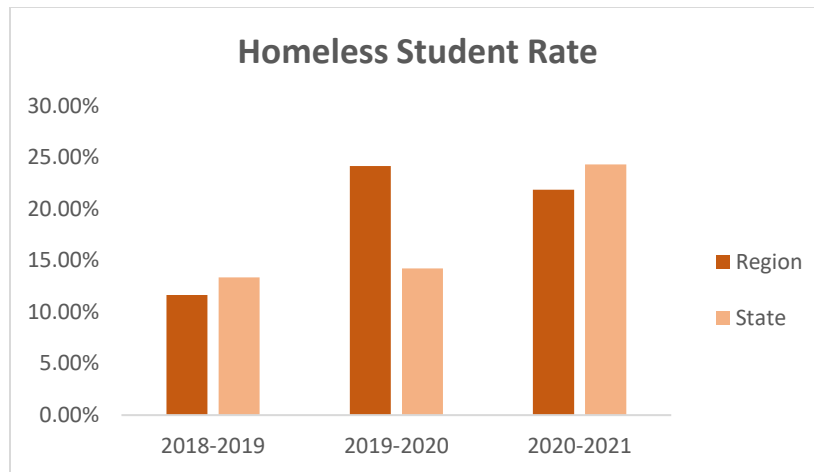
The Texas Education Agency records the number of students who are identified as homeless within each region. TEA defines homeless in several ways:

1. Students sharing a residence with a family or individual due to loss of housing or economic hardship
2. Students who are unsheltered, which is defined as a nighttime residence that is not normally used as sleeping accommodations for humans
3. Residing in hotels or motels, if students reside there due to housing loss and/or have a lack of alternative accommodations
4. Students living in a shelter or transitional housing. Shelters provide temporary living accommodations and do not include residential treatment facilities.¹¹

Homelessness is an important indicator when assessing a student's academic success. The following data is taken from Texas Education Agency Homelessness Counts for school years 2018-2019, 2019-2020, and 2020-2021. *County level data for Total number of Homeless Students for each school year may be found in Appendix A Table 19.*

¹⁰ U.S. Department of Education, National Center for Education Statistics: Common Core Data. ELSI – Elementary and Secondary Information System, <https://nces.ed.gov/ccd/elsi/tableGenerator.aspx> Accessed May 10, 2021

¹¹ The Texas Education Agency, Student Program and Special Populations Report, <https://rptsvr1.tea.texas.gov/adhocrpt/adspr.html> Accessed February 9, 2021.

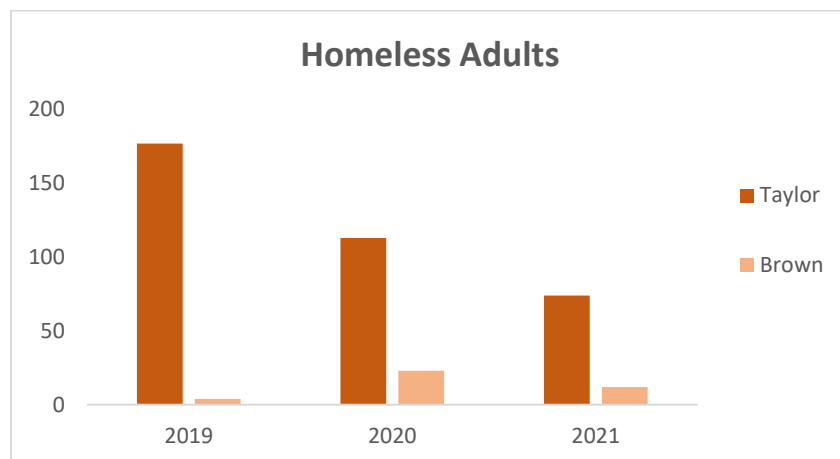


Source: Texas Education Agency, Homelessness Counts, 2019-2021.

Adults Experiencing Homelessness

The Texas Homeless Network completes a Point in Time Count (PIT) of homeless adults in Texas each January. 2020 had a 5% increase in individuals experiencing homelessness with, 27,229 compared to 25,848 in 2019. The largest increase was in persons aged 18-24. The PIT is a snapshot of the minimum number of people experiencing homelessness on a given night. The count is likely to be an under count in the majorities of communities that participate as numbers are self-reported or observed. There is a difference for 2021 compared to previous years due to Covid.

As stated in the 2020 Annual Report, "In an effort to promote safety during the global pandemic, the Continuum of Care board voted to cancel the 2021 Unsheltered count. Some communities opted to conduct an observation count of those experiencing unsheltered homelessness; however, this data is not as accurate as doing the full unsheltered count. It is also important to consider that while the sheltered count occurred as normal, the surveys were shortened in order to limit the amount of time required for face-to-face interaction." The 2021 PIT in Taylor county reported 27 of all adult homeless persons had a serious mental health disease, 27 also had a substance use disorder, and 16 were survivors of domestic violence. *Brown and Taylor County level homelessness data for 2019 – 2021 may be found in Appendix A Table 20.*



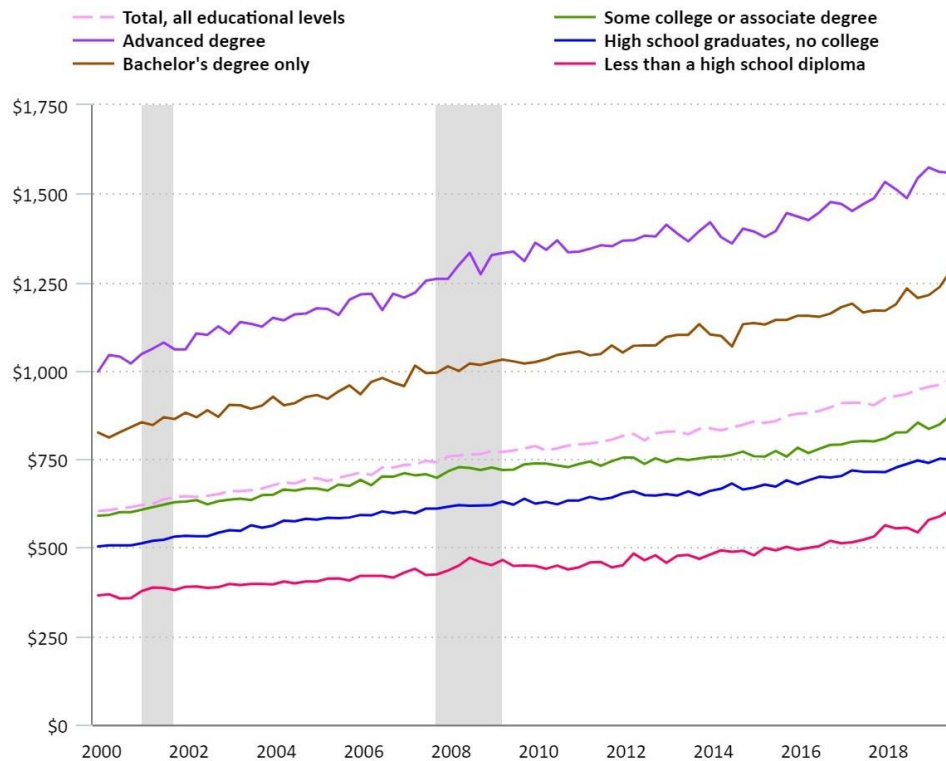
Source: Point-in-Time Count (PIT) Reports. Accessed May 11, 2021.

Community Domain

Educational Attainment of Community

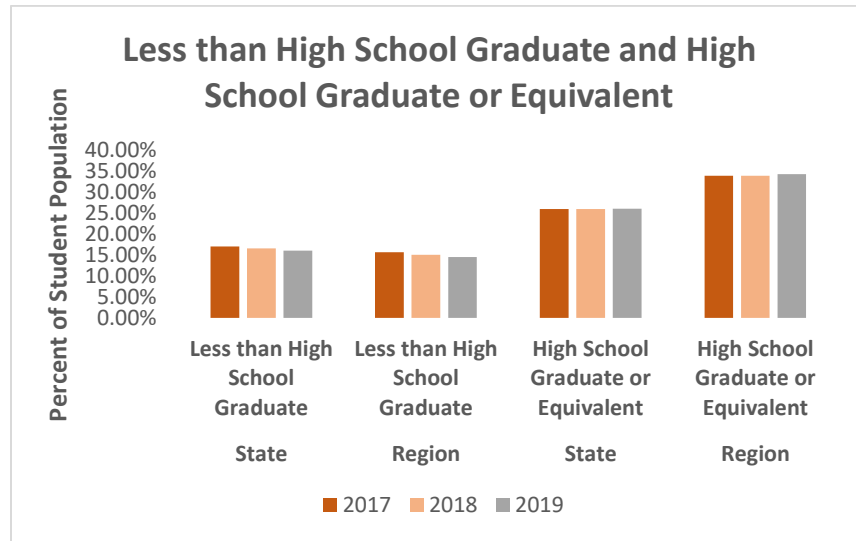
Earning potential is largely based on the level of education a person has. The U.S. Bureau of Labor Statistics (BLS) tracks median weekly earnings by educational attainment. In the 3rd quarter of 2019, The Economics Daily reported the median weekly earnings of full-time workers 25 years and older was \$975. Full-time workers with no high school Diploma - \$606, High School Graduates - \$749, Some College or an Associate Degree - \$874, Bachelor’s Degree - \$1281, and workers with an advanced degree (Master’s, Professional, or Doctoral) - \$1,559. In the 2nd quarter of 2021, the BLS reported a 1.2% decrease compared to the 2nd quarter of 2020. There continues to be disparities between earnings of women and men. The earnings between men and women also vary by race and ethnicity. White women earned 82.6 percent as much as their male counterparts, compared with 85.1 percent for Black women, 70.4 percent for Asian women, and 86.5 percent for Hispanic women. COVID-19 continues to impact the labor market. The rebound in employment among lower-paid workers has affected median weekly earnings, and these earnings should be interpreted with caution.

Median usual weekly earnings of full-time wage and salary workers age 25 years and older, by educational attainment, first quarter 2000–third quarter 2019, not seasonally adjusted

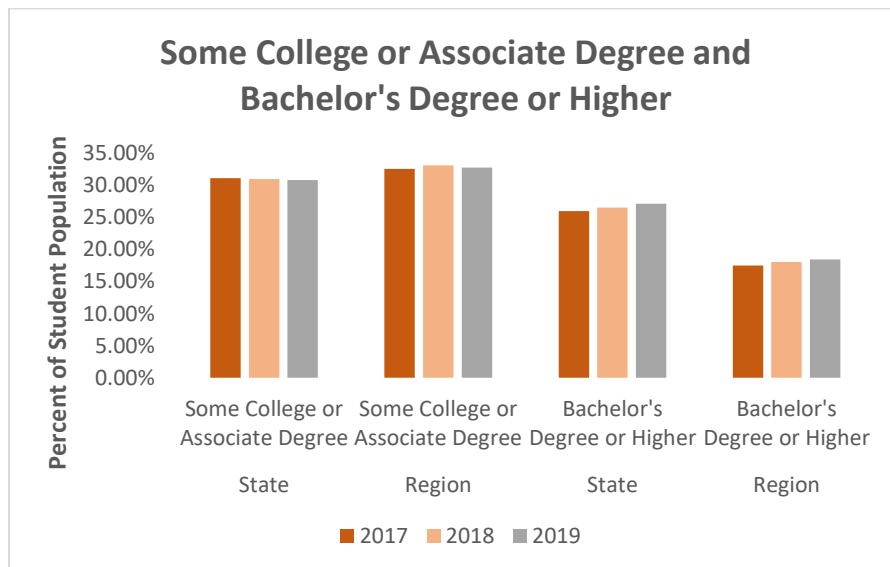


Source: U.S. Bureau of Labor Statistics

Region 2 shows steady increases in the number of students who graduate high school, along with a steady percentage of persons with a bachelor’s degree, and a slight increase in persons with a Graduate or Professional degree. County level data for Less than High School, High School, Some College, Bachelor’s or Higher for 2017-2019 can be found in Appendix A Tables 21, and 22.



Source: Educational Attainment, American Community Survey. U.S Census Bureau Accessed May 28, 2021.

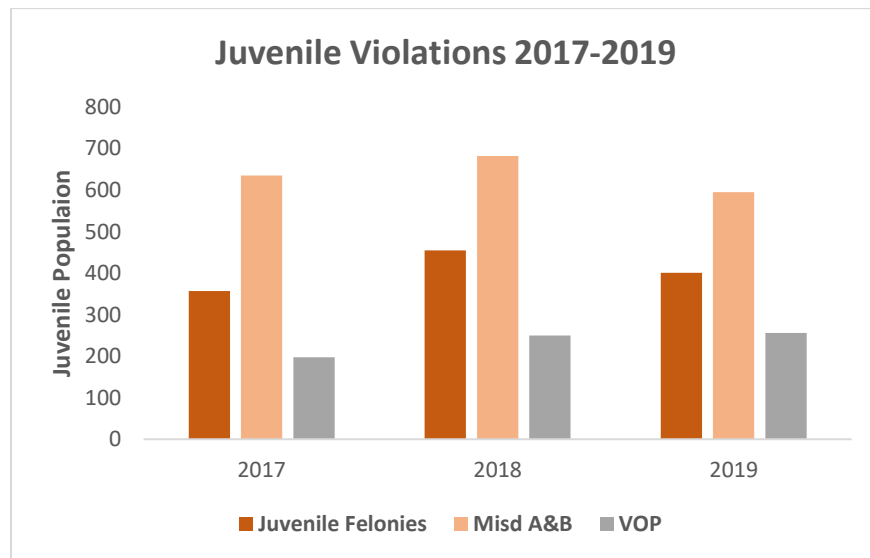


Source: Educational Attainment, American Community Survey. U.S Census Bureau Accessed May 28, 2021.

Community Conditions

Juvenile Justice involvement

The Texas Juvenile Justice Department reports information regarding the magnitude and nature of juvenile criminal activity and the juvenile probation system's response. This information is to assist the state's effort in improving the juvenile justice system and reducing juvenile crime. The juvenile justice system differs from the adult justice system by emphasizing treatment and rehabilitation vs punishment. Even when youth incarceration is needed, the goal is not punitive but, educational in regard to discipline, values, and work ethics. Juvenile records are sealed except in cases where the youth must register as a sex offender or is completing their sentence in the adult system.¹²



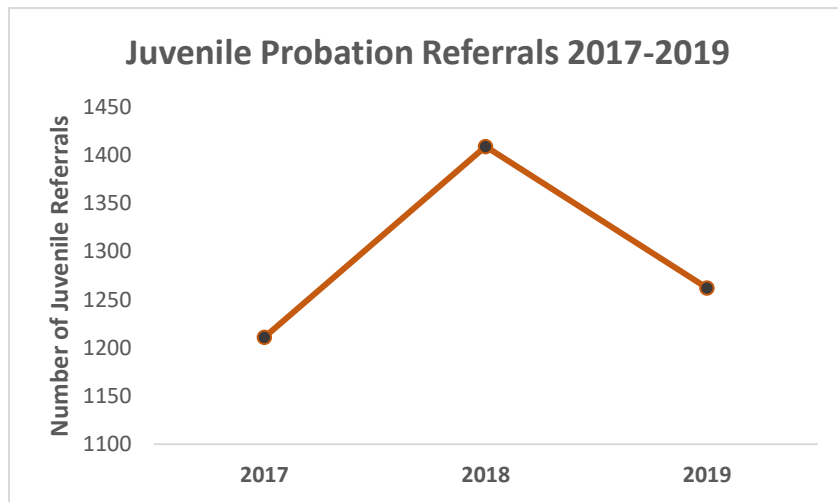
Source: Texas Juvenile Justice Department. Accessed March 18, 2021.

Probation/Parole Rates

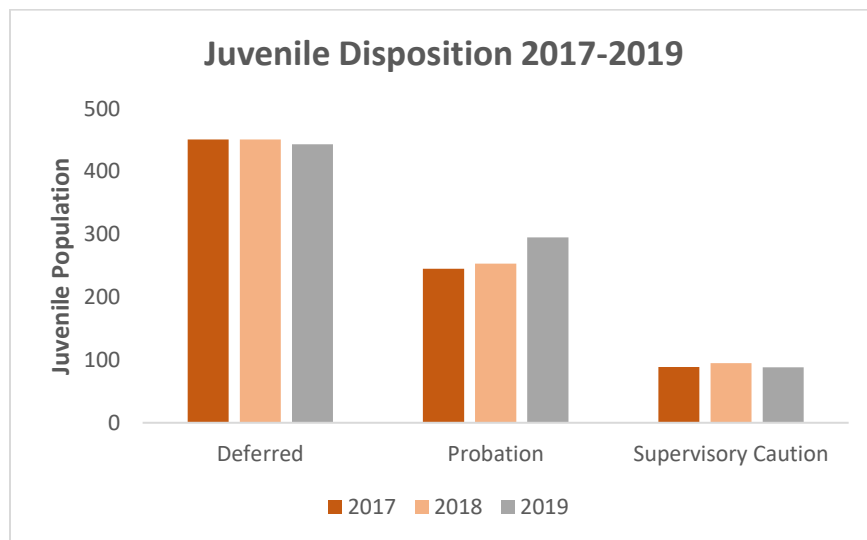
In 2017 and 2019 the juvenile referrals to probation remained close; however in 2018, the number of referrals increased by nearly 200. The rate per 1,000 was 24 referrals per 1,000 juveniles in 2017. In 2018 that increased to 27 referrals per 1,000 juveniles, and in 2019 there were 25 referrals per 1,000 juveniles in Region 2. This rate is above the state referral of 19 in 2017, 2018, and 2019 which indicates an increased risk factors for the youth involved in these cases. Juvenile Population is defined as youth between the ages of 10 and 16. Youth ages 17 and older fall under the jurisdiction of the juvenile justice system only if their alleged offense was committed when the youth was 16 years old or younger or for a violation of a juvenile court order if the youth is still under supervision. Juvenile referral is an event that occurs when all 3 of the following conditions exist: (1) a juvenile has allegedly committed delinquent conduct, conduct indicating a need for supervision, or a violation of probation; (2) the juvenile court served by the juvenile probation department has jurisdiction and (3) the office or official designated by the juvenile board has made face-to-face contact with the juvenile and the alleged offense has been presented as the reason for

¹² "The State of Juvenile Probation Activity in Texas Report." Texas Juvenile Justice Department, August 2020, www.tjjd.texas.gov/index.php/doc-library/category/334-state-of-juvenile-probation-activity Accessed March 18, 2021.

this contact or the office or official has given written or verbal authorization to detain the juvenile. Probation is a disposition option in which a juvenile who has been found to engage in delinquent conduct and/or conduct in need of supervision is formally placed on probation under the supervision of the juvenile court for a specific period. Deferral is a voluntary disposition alternative to adjudication in which the juvenile, parent/guardian(s), and intake agency or court agree upon supervision conditions. Supervisory Caution is a summary disposition made by the probation department. This informal disposition option may include counseling the juvenile about the consequences of his or her conduct, contacting the juvenile's parents to inform them of the juvenile's behavior, or referring the juvenile to a social service agency or a community-based citizen intervention program approved by the juvenile court. 2019 County level juvenile data can be found in Appendix A Tables 23 & 24.



Source: The Texas Juvenile Probation Department (TJJD) annual activity report. Accessed March 18, 2021.



Source: The Texas Juvenile Probation Department (TJJD) annual activity report. Accessed March 18, 2021.

Juvenile Alcohol Arrests

The data from the Texas Department of Public Safety (DPS) defines juveniles as persons 16 years and under, and adults as 17 years and older. Arrests in this section will cover Driving Under the Influence, Drunkenness, and Liquor Law Violations. Texas has strong laws associated with alcohol related law violations for juveniles and those who supply alcohol to minors. The Texas Alcoholic Beverage Commission (TABC) describes the penalties for Underage Drinking, Providing Alcohol to Minors, and Driving Under the Influence of any detectable amount of alcohol. These penalties range from misdemeanor charges, community service, alcohol awareness classes, suspension of driving license, and monetary fines.

Social Host ordinance violations

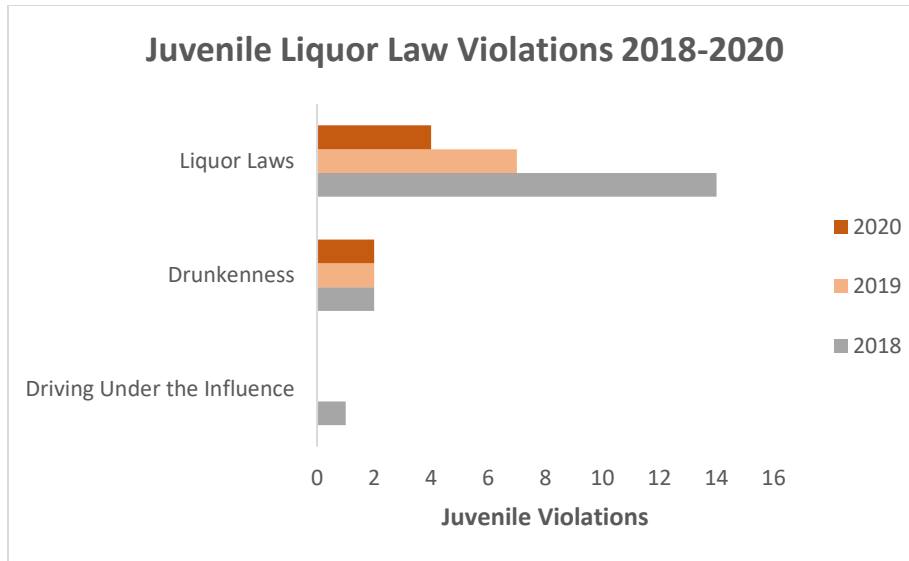
Texas passed legislation in 2005 that holds a person liable if they host a party where alcohol is provided to underage minors. Section 2.02 of the TABC extends the liability to those who provide alcohol to minors on their property or if the host supplies car keys to an intoxicated adult on the host's property. The law states that the host must know the minor's age, and if they do not know their age, the host cannot be held liable for the minor.

Minor in Possession (MIP) data

It is a class C misdemeanor for a minor to purchase, attempt to purchase, possess, consume alcoholic beverages, be intoxicated in public, or misrepresent their age to obtain alcohol. Consequences can include a fine of up to \$500.00, alcohol awareness class, and community service. A minor over 16 can face additional fines of loss of driver's license of up to 180 days, and the fines increase if the minor is over the age of 17. Region 2 continues to have a lower rate of Driving Under the Influence, Drunkenness, and Liquor Law violations than the state.

Juvenile Drunkenness, DUI, and Liquor Law Violations

Since 2018 Region 2 has seen a decrease in Juvenile Liquor Law violations. 2020's violations may have decreased as a result of the stay-at-home order during COVID-19. We will continue to monitor these areas in the coming years. Juvenile Drunkenness rates have stayed consistent with 2 per region in 2018, 2019, and 2020. Juvenile DUI rates show 1 reported for 2018 and, 0 reports in 2019, and 2020. *County level data for Juvenile Drunkenness and Liquor Law violation rates for 2018-2020 may be found in Appendix A Table 25 & 26.*



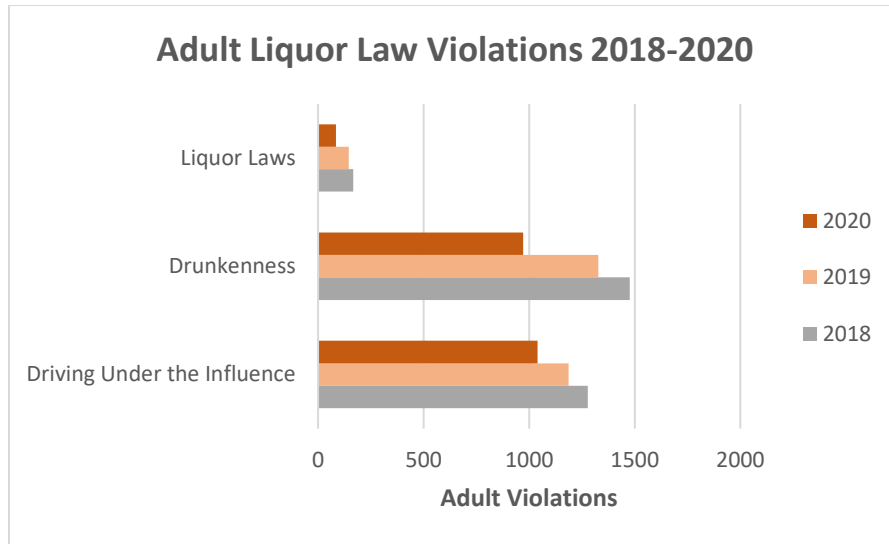
Source: Texas Department of Safety UCR Bureau. Accessed June 25, 2021.

Adult Alcohol Arrests

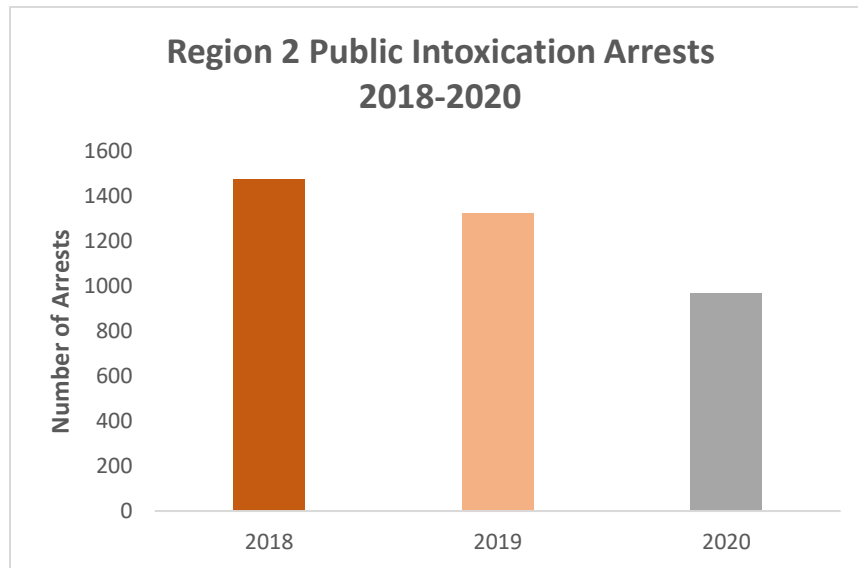
Behaviors can lead to legal consequences. The following information includes the latest consequences on adult alcohol arrests. The Texas Department of Public Safety Liquor Law Arrests records the number of arrests made for Drunkenness, Driving Under the Influence, and Liquor Law violations for each county within our region. In 2020 Region 2 reported 970 arrests for drunkenness, 1,039 arrests for Driving Under the Influence, and 84 arrests for liquor law violations. In 2019 there were 1,325 arrests for drunkenness, 1,187 arrests for Driving Under the Influence, and 139 arrests for liquor law violations. **Taylor County reported 399 DUI arrests in 2020, and Wichita County reported 160 for 2020.** Regional rates per 100k for Drunkenness are 2.56 in 2018, 2.37 in 2019, and 1.73 in 2020. Regional rates per 100,000 for Driving Under the Influence are 2.22 in 2018, 2.12 in 2019, and 1.86 in 2020. Region 2 rates per 100k are higher than the state rate for all 3 years.

Driving under the influence is a high-risk factor for the public health of each county. This behavior places the driver and any passengers at risk, along with anyone on the road with the intoxicated driver. Rates for arrests due to drunkenness has decreased in Region 2 according to the Uniform Crime Report Liquor Law Arrests.¹³ The two largest cities in Region 2 are also the counties with the highest arrest; however, all counties show a decrease in arrests. *County level data for Drunkenness and DUI rates for 2018-2020 may be found in Appendix A Table 27 & 28.*

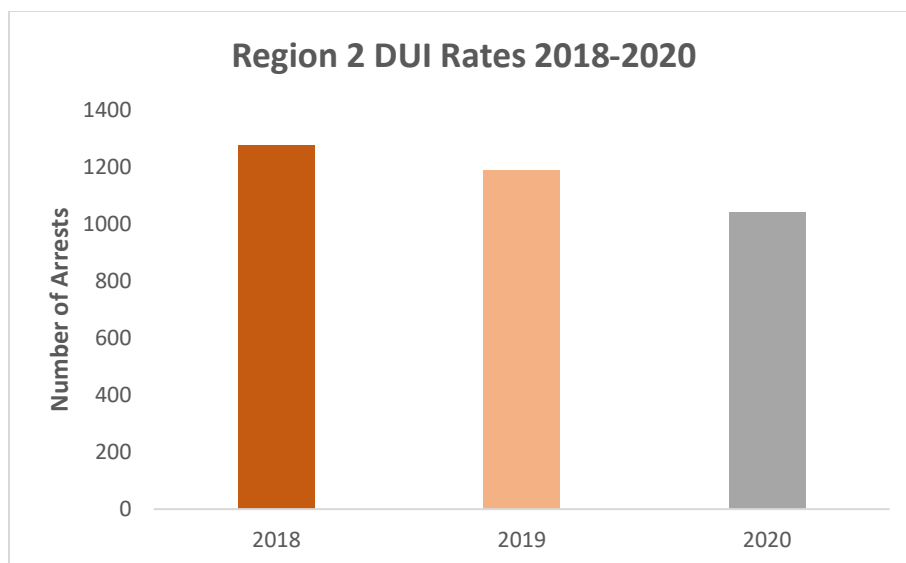
¹³ Texas Department of Public Safety. Liquor Law Arrests, 2018-2020, <https://txucr.nibrs.com/SRSReport/LiquorLawArresteeSummary> Accessed June 25, 2021.



Source: Texas Department of Safety UCR Bureau. Accessed June 25, 2021



Source: Texas Department of Safety UCR Bureau. Accessed June 25, 2021



Source: Texas Department of Safety UCR Bureau. Accessed June 25, 2021

Adult arrests for Marijuana, and other Drugs/Narcotics

The Texas Department of Public Safety Uniform Crime Report reports type of arrests per county. **In 2020 adult arrests for Sale/Manufacturing were 193, a decrease from 318 in 2019. Possession arrests were reported as 1,944 in 2020, down from 3,306 in 2019. Juvenile arrests for Sale/Manufacturing were 0 in 2020, down from 6 in 2019. Juvenile Possession arrests were 56 in 2020 vs. 127 in 2019.** These totals are likely skewed for both sale/manufacturing and possession arrests due to the Covid-19 stay at home order during 2020. These totals are for all drug arrests. A breakdown by drugs is available upon request. *County level totals for adult and juvenile drug arrests for sale/manufacturing, and possession may be found in Appendix A Tables 29-34.*

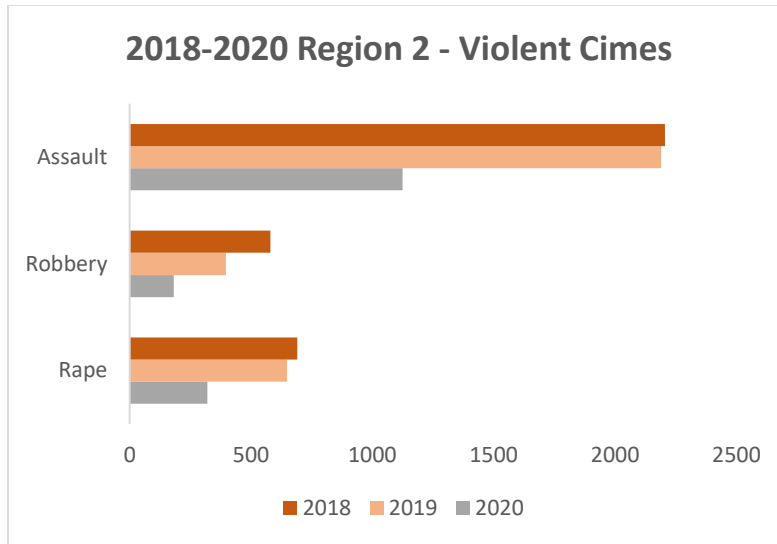
Crime rate

The Texas Department of Public Safety Uniform Crime Reporting program produces reliable crime statistics for law enforcement administration, operation, and management.¹⁴ The index shows totals of offenses, whether or not arrests were made, stolen property was recovered, or prosecution took place. The total crime rate for Region 2 continued to decrease from 12,799 in 2018, 11,997 in 2019, and 11,170 in 2020. *County level totals for crime rates may be found in Appendix A Table 35.*

¹⁴ Texas Department of Public Safety UCR Bureau Crime in Texas Online, Index Crime Report (2018,2019,2020) <https://txucr.nibrs.com/Report/IndexCrimesReport> . Accessed March 9, 2021

Violent Crime

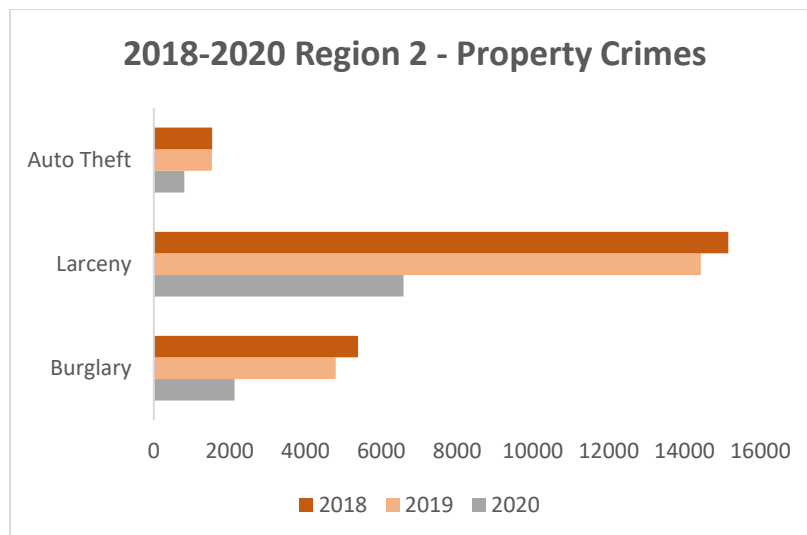
Violent Crime includes rape, robbery, and assault. In 2020 there were 1,650 reports of violent crime. 1.93% were rape, 11.03% was robbery, and 68.12% was assault. Violent crimes are defined as a personal confrontation between a perpetrator and a victim. *County level totals for violent crimes may be found in Appendix A Table 36.*



Source: Texas Department of Public Safety, UCR Bureau. Accessed March 9, 2021.

Property Crime

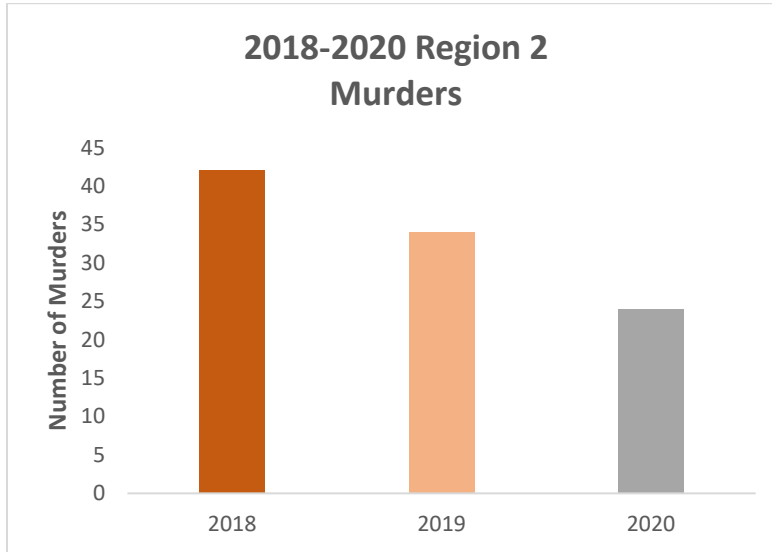
Property crime includes burglary larceny, and auto theft. There were 9,520 property crimes in Region 2 in 2020. 22.4% were burglary, 69.1% were larceny, and 8.45% were auto theft. *County level totals for property crimes may be found in Appendix A Table 37.*



Source: Texas Department of Public Safety, UCR Bureau. Accessed March 9, 2021.

Homicide Rates

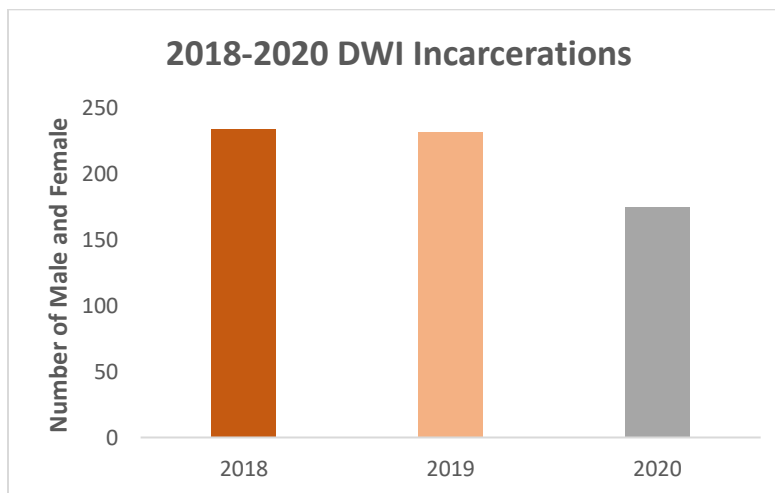
Murder and non-negligent manslaughter, as defined by the Texas Unified Crime Report (UCR), is the willful killing of a human by another. This includes any death resulting from a fight, argument, or assault. Attempted murder, suicide, and accidental deaths are excluded from this category. Region 2 reported 24 murders in 2020.



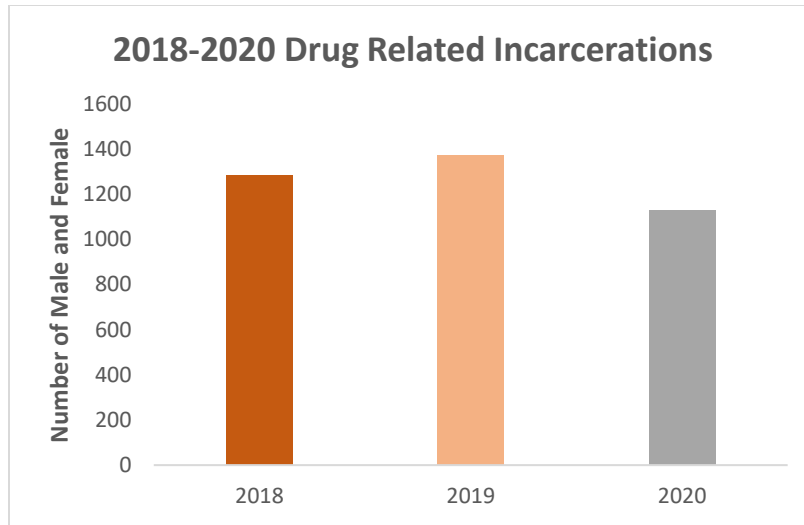
Source: Texas Department of Public Safety, UCR Bureau. Accessed March 9, 2021.

Incarceration rates

The Texas Criminal Justice Department (TDCJ) records incarcerations made in each county. Categories include Drug Delivery, Drug Possession, Drug Other, and DWI. Region 2 reports increases in both **DWI and Drug Incarceration rates for 2018 and 2019**. The chart below indicates the total number of incarcerations for DWI and Drugs in 2018 – 2020 for Region 2. These incarcerations are total On Hand Populations according to TDCJ. *County total adult drug related and DWI incarcerations may be found in Appendix A Tables 38 and 39.*



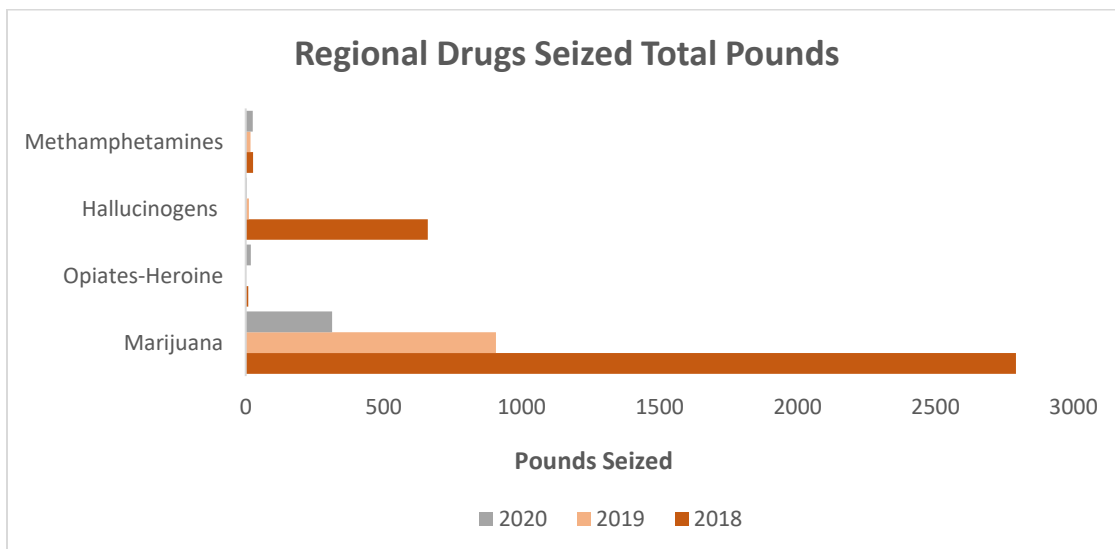
Source: Texas Department of Criminal Justice. Request for On Hand Population.



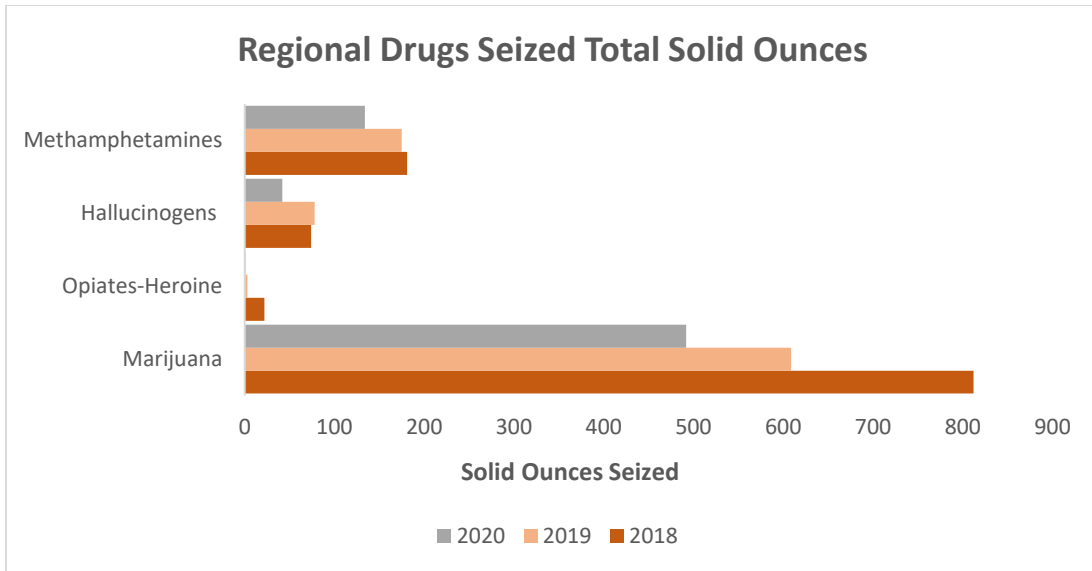
Source: Texas Department of Criminal Justice. Request for On Hand Population.

Drug Seizures/Trafficking Arrests

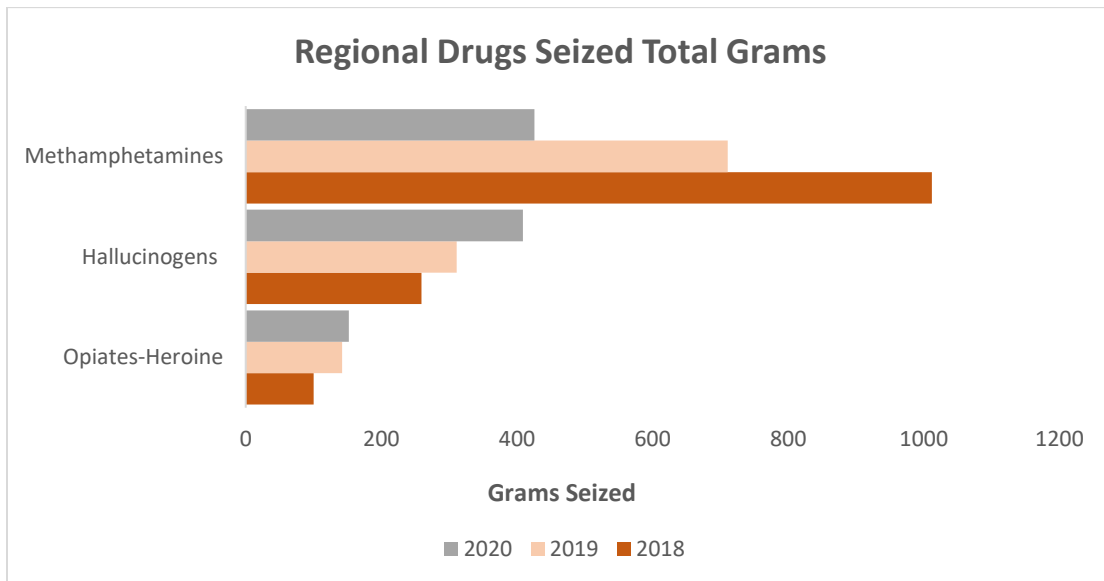
Law enforcement officers across our area spend countless hours seizing drugs. These drugs are then categorized in reporting groups which include: Marijuana, Hashish, Opiates (Morphine, Heroine, Codeine and Opium gum), Cocaine, Hallucinogens (LSD, PCP, Mushrooms, Peyote, and Designer Drugs), Barbiturates, Amphetamines, Methamphetamines, Tranquilizers and Synthetic Narcotics. These substances are measured in units of solid pounds, solid ounces, solid grams, liquid ounces, and dose units. According to the Texas Department of Public Safety Drug Seizures Report for 2018-2020, the most substances seized for our area include Opiates, Methamphetamines, and Marijuana. The following charts report the total amount seized for each substance over a three-year period. *County level data is available upon request.*



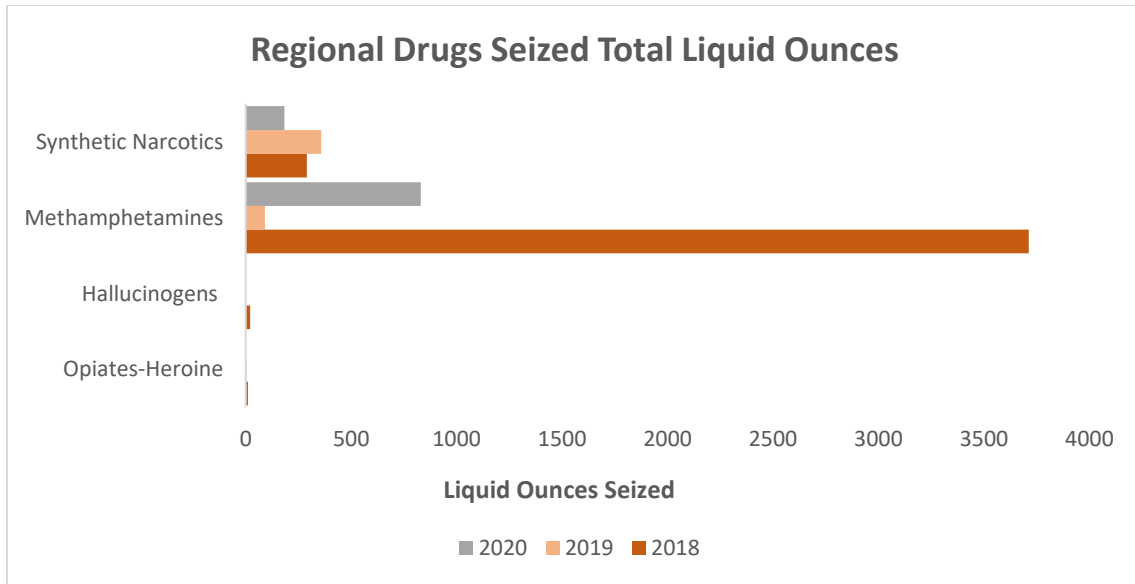
Source: Texas Department of Public Safety, Drug Seizures Report, 2018-2020



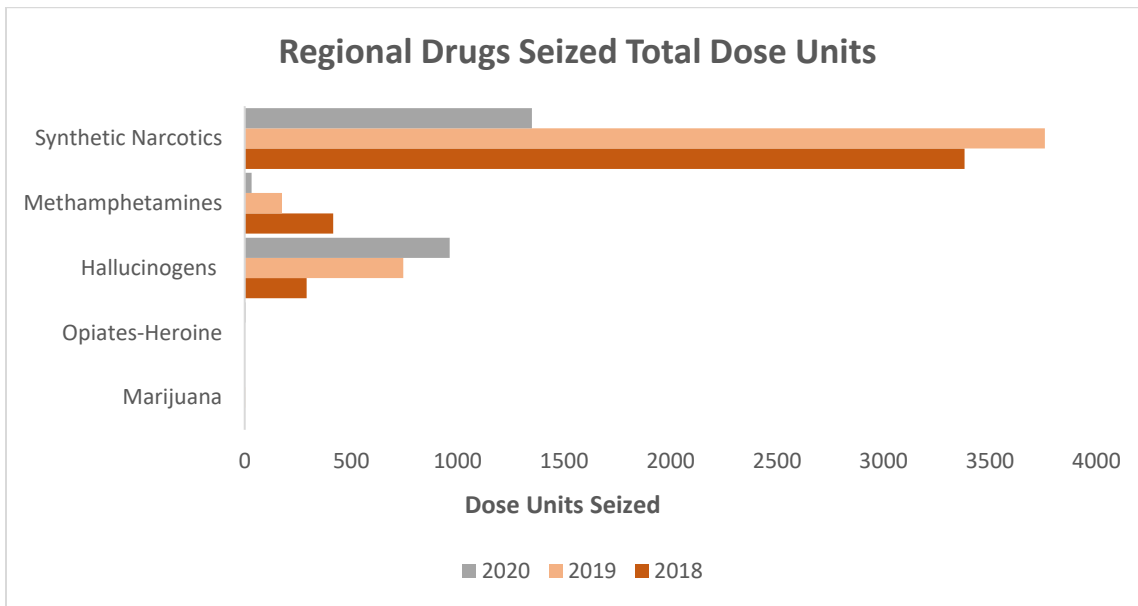
Source: Texas Department of Public Safety, Drug Seizures Report, 2018-2020



Source: Texas Department of Public Safety, Drug Seizures Report, 2018-2020



Source: Texas Department of Public Safety, Drug Seizures Report, 2018-2020

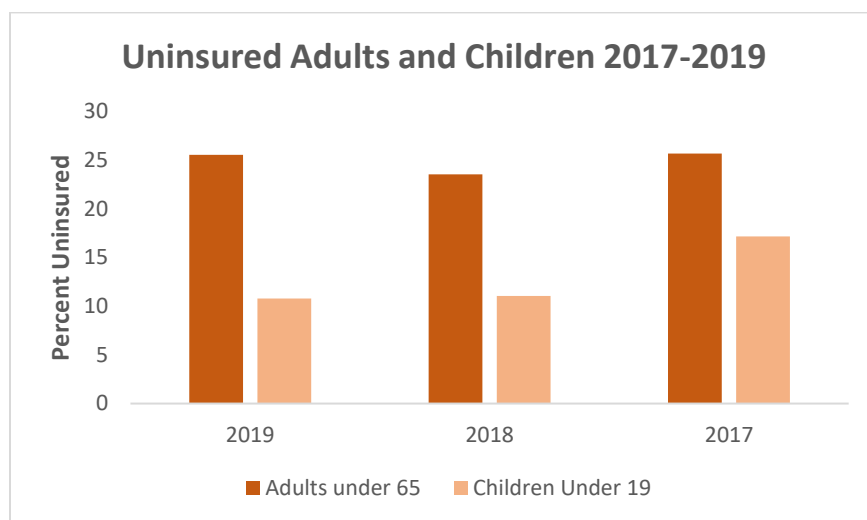


Source: Texas Department of Public Safety, Drug Seizures Report, 2018-2020

Health Care/Service System

Uninsured Children and Adults

Uninsured children are the percentage of the population under 19, and uninsured Adults are the percentage of the population under 65 years of age that have no health insurance coverage. The Kids Count Data Center, a project of the Annie E. Casey Foundation, utilizes data from the U.S. Census Bureau regarding uninsured children. Region 2 has seen a decrease in the percentage of uninsured children, and uninsured adults has also decreased slightly since 2017. This indicator shows children and adults that do not have general access to healthcare through either private or public insurance. *County level data for total number and percentages of uninsured children and adults may be found in Appendix A Tables 40 and 41.*

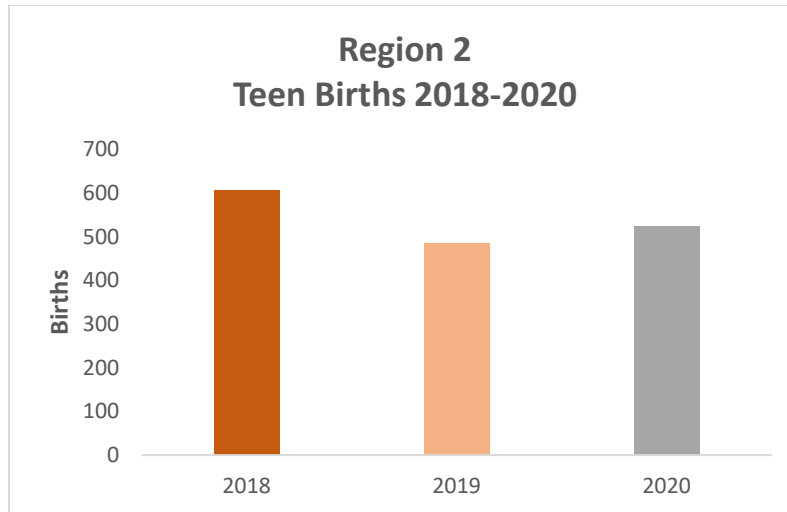


Source: U.S. Census Bureau, American Community Survey 2017-2019. Accessed July 26, 2021.

Teen Birth Rates

Teen pregnancy is a leading contributor to high school dropout rates for girls. The children of teen mothers have a lower school achievement, are at risk for dropping out of high school, being incarcerated, becoming teen parents, and facing unemployment as a young adult.¹⁵ Beginning in 2015, the U.S. has seen a decrease in birth rates of young women ages 15-19 years of age. This decline can be contributed to either less sexually active teens, and/or more teens using birth control. There are still disparities among racial groups. Texas continues to show a high percentage of teen births among the Hispanic population. A large number of counties have suppressed information due to counts being between 1-9 teen births, resulting in an incomplete look at the racial breakdown. In 2017 the CDC reported 28.9 Hispanic, and 27.5 non-Hispanic Black teen births, which was more than two times the 13.2 rate of non-White teen births.

¹⁵ Hoffman SD. Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy. Washington, DC: The Urban Institute Press



Source: Texas Department of State Health Services, Texas Birth Certificate Data. Accessed August 2, 2021.

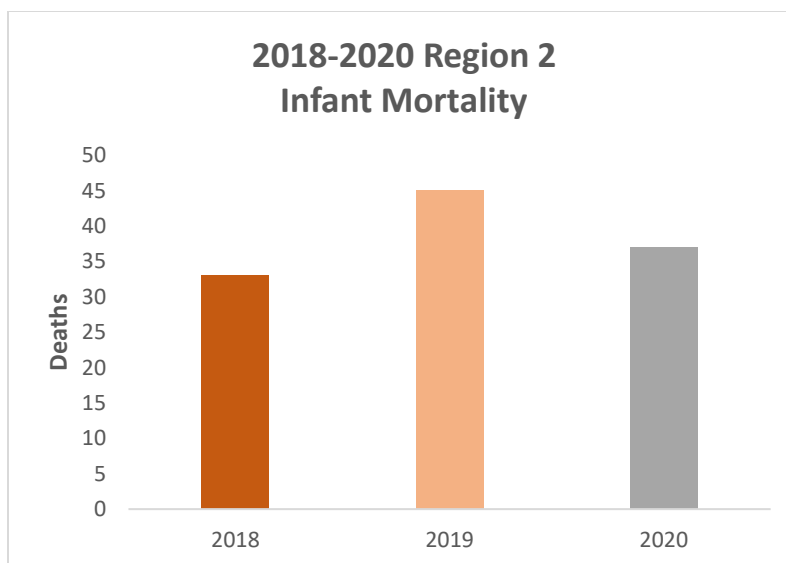
Infant Mortality

Infant mortality is defined as death of an infant before their first birthday. The mortality rate is an important marker of the overall health of a society. The leading cause of infant mortality in the U.S. in 2018 according to the CDC were:

- Birth Defects
- Preterm Birth and low weight
- Pregnancy complications
- Sudden Infant Death Syndrome
- Injuries

In 2018 the U.S. infant mortality rate was 5.7 deaths per 1,000 live births. The race and ethnicity breakdown are as follows:

- Non-Hispanic Black: 10.8
- Native Hawaiian or other Pacific Islander: 9.4
- American Indian/Alaska Native: 8.2
- Hispanic: 4.9
- Non-Hispanic White: 4.6
- Asian: 3.6



Source: Texas Department of State Health Services, Texas Birth Certificate Data. Accessed August 2, 2021

Mental Health/Providers

Mental health disorders vary widely in impact and severity, and approximately one in four adults in the United States has a diagnosable mental health disorder. Depression is the leading cause of disability in the U.S. for persons 15-44.¹⁶ Disorders can occur no matter the racial, ethnic, or socioeconomic group. Risk factors for mental health have been identified. Family history and addictive disorders can increase the risk factors; however, there is still a lot to learn about mental health. Biological, psychological, and sociocultural factors are still being researched.

Mental health providers are defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug abuse, as well as advanced practice nurses specializing in mental health care. Mental Health Providers is defined as the ratio of the population to mental health providers. The ratio represents the number of individuals served by one mental health provider in a county. Region 2 has fewer Mental Health providers than the state for 2017-2019. However, Region 2 is increasing in the number of providers. *County level data for Mental Health Providers may be found in Appendix A Table 42.*

Adults and Youth Utilizing SUD Treatment Services

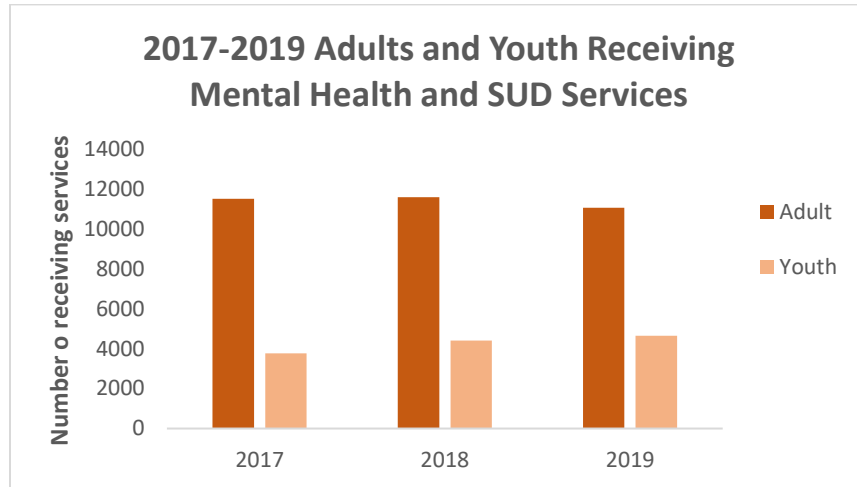
The Texas Department of Health and Human Services, TX Medicaid Behavioral/Mental Health, and Substance Use Disorder Clients¹⁷ by County report youth and adults receiving mental health services. Youth are categorized as 12-17 years of age; anyone over 18 is categorized as an adult. In the United States, over 15 million children and adolescents need mental health services; however, approximately 8,300 receive services.¹⁸ There are many barriers that have been identified in mental health services; these barriers differ by gender, age, ethnicity, and economics.

¹⁶ Centers for Disease Control and Prevention, Mental Health Awareness, <https://cdc.gov/mentalhealth/index.htm>

¹⁷ Texas Department of Health and Human Services. Youth/Adults Receiving Mental Health Services. TX Medicaid BMMH and SUD Clients by County, SFY2008-2016 Accessed March 13, 2021.

¹⁸ American Academy of Child & Adolescent Psychiatry. (2016)

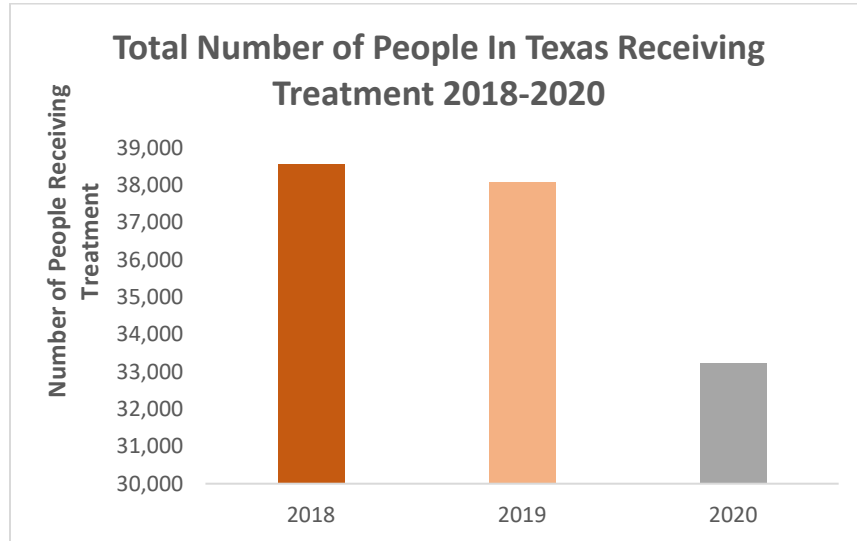
According to the National Institute of Mental Health, half of all chronic mental illness begins by age 14. Mental Health America reports 56.5 % of adults with mental health issues did not receive the necessary services. Client counts are not additive because clients may appear in more than one diagnosis category, county, age category, and/or fiscal year. *County level totals for persons receiving Mental Health and SUD services for 2016 may be found in Appendix A Tables 43 and 44.*



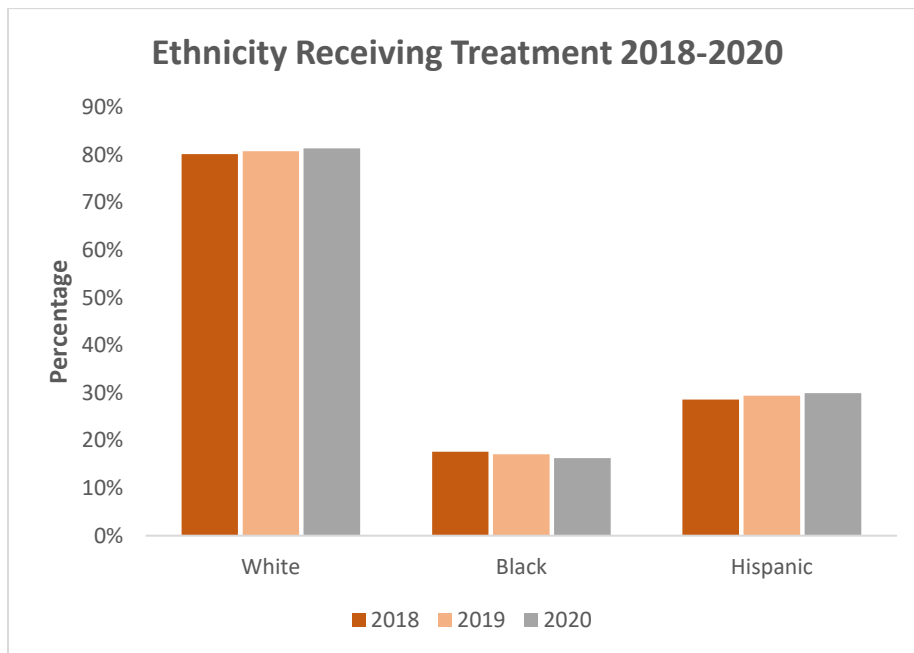
Source: Health and Human Services, TX Medicaid BHMH and SUD. Accessed March 13, 2021.

Category	Diagnosis for Treatment
<p align="center">Behavioral / Mental Health (BMMH)</p>	Mental disorders due to known physiological condition (dementia, etc.)
	Psychotic disorders
	Mood disorders
	Anxiety ... & other non-psychotic mental disorders
	Behavioral syndromes associated with physiological disturbances and physical factors
	Personality disorders, etc.
	Childhood disorders
	Mental disorder NOS
<p align="center">Substance Use Disorder (SUD)</p>	Alcohol related disorders
	Opioid related disorders
	Cannabis related disorders
	Sedative, hypnotic or anxiolytic related disorders
	Cocaine related disorders
	Other stimulant related disorders
	Hallucinogen related disorders
	Nicotine dependence
	Inhalant related disorders
	Other psychoactive substance related disorders

The Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS)¹⁹ reports the total number of people receiving treatment for all substances as follows: 2018 = 38,577, 2019 = 38,086, and 2020 = 33,219. Men continue to receive treatment at a higher percentage than women. Caucasian people receive treatment at a much greater percentage than any other ethnicity.



Source: 2018-2020 Treatment Episode Data Set Admissions

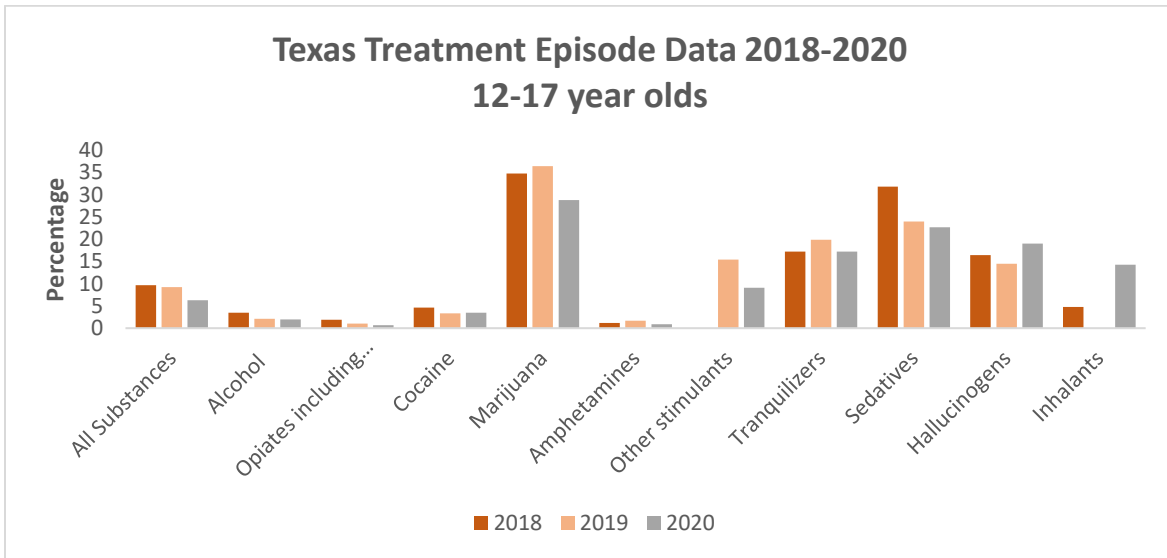


Source: 2018-2020 Treatment Episode Data Set Admissions

¹⁹ Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS) www.samhsa.gov/data/quick-statistics-results Accessed April 1, 2021.

Adolescents Receiving Substance Treatment

The Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS) also reports Texas youth aged 12 – 17 years of age with a diagnosed substance use disorder are eligible to receive treatment. Treatment can be administered through residential treatment, outpatient services, and recovery communities. Youth are given treatment that includes logical thinking, decision making, recreation choices, interactions with others, and living with life’s challenges. Youth 12 – 17 years old receive the most treatment for Sedatives and Marijuana. The following chart shows the breakdown of treatment for 2018-2020.



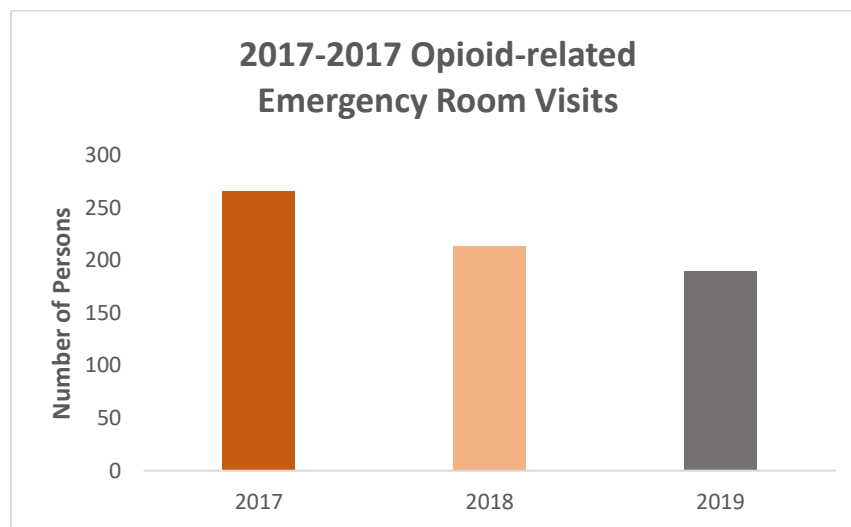
Source: 2018-2020 Treatment Episode Data Set Admissions

Opioid Related Emergency Room Visits

The Substance Abuse and Mental Health Services Administration classifies Opioids as prescription or illegal drugs used for pain. These include: Morphine, Codeine, Methadone, Oxycodone (OxyContin, Percodan, and Percocet), Hydrocodone (Vicodin, Lortab, and Norco), Fentanyl (Duragesic, Ferntora), Hydromorphone (Dilaudid, Exalgo), and Buprenorphine (Subutex, Sub Oxone). Illegal substances also include heroine. Opioids minimizes pain and can also affect other systems in the body including breathing, mood, and blood pressure.²⁰

Opioid-related emergency department visits offer data based on DSHS Hospital Discharge Data (HDD). Data is gathered from patients who were seen in a hospital- emergency departments (ED) and outpatient medical providers. Non-fatal emergency department visits involving opioids are based on guidance from Centers for Disease Control and Prevention. Visits containing opioid diagnoses are defined as non-fatal acute poisoning due to the effects of opioids, regardless of intent. Due to rates of ED visits between 1-19 being suppressed, the regional data is not an accurate account of Opioid Related ED visits.

From 2017 to 2018, the United States saw small decreases in deaths involving all opioids, prescription opioids, and heroin. Synthetic Opioids related deaths increased in 2018 and accounted for 2/3 of opioid-involved deaths according to the CDC.²¹



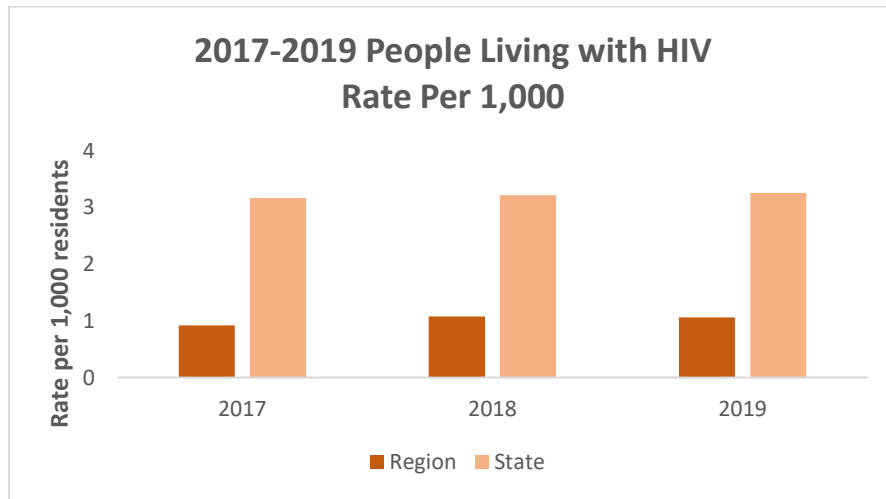
Source: Texas DSHS-Texas Health Care Information Collection (THCIC)

²⁰ Substance Abuse and Mental Health Services Administration. Opioid

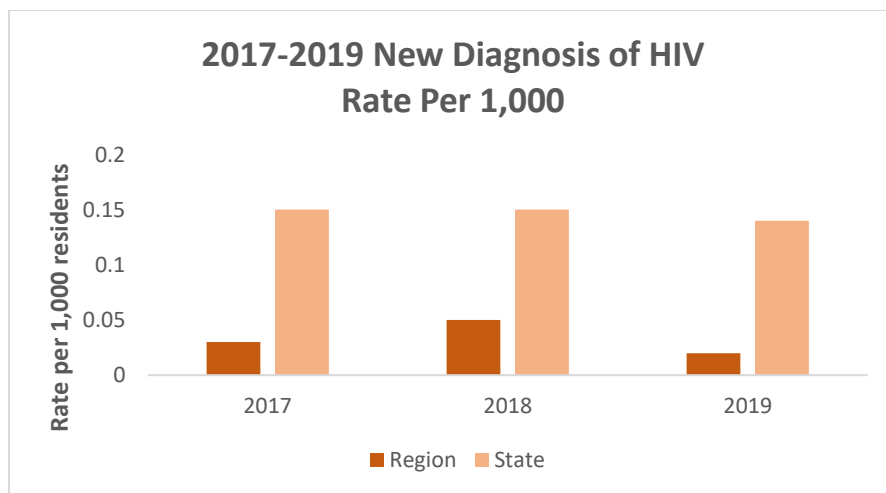
²¹ Centers for Disease Control and Prevention Drug and Opioid – Involved Overdose Deaths – United States, 2017-2018. Accessed July 27, 2021

HIV infection rates and transmission route

The Texas HIV Surveillance Report is annually generated by the Texas Department of State Health Services HIV/STD Epidemiology and Surveillance Branch. Current definitions used for this report are defined by the Centers for Disease Control and Prevention of the U.S. Public Health Service.²² Definition’s address calculations that account for both “sex assigned at birth” and “current gender identity”. People living with HIV who get and stay on HIV treatment can achieve an undetectable viral load. The chart below shows the cases of people living with HIV, and the number of new diagnoses in the State of Texas and Region 2 for 2017-2019. *County level data on Persons Living with HIV for 2017-2019 may be found in Appendix A Table 45.*



Source: Texas Department of State Health Services. HIV Surveillance 2019 Annual Report



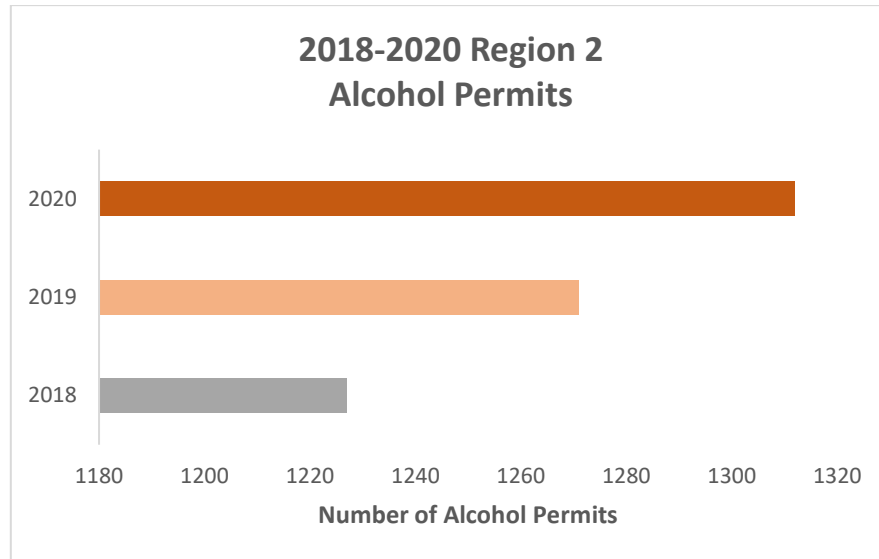
Source: Texas Department of State Health Services. HIV Surveillance 2019 Annual Report

²² Center for Disease Control and Prevention of the United States Public Health Service. Accessed July 28, 2021

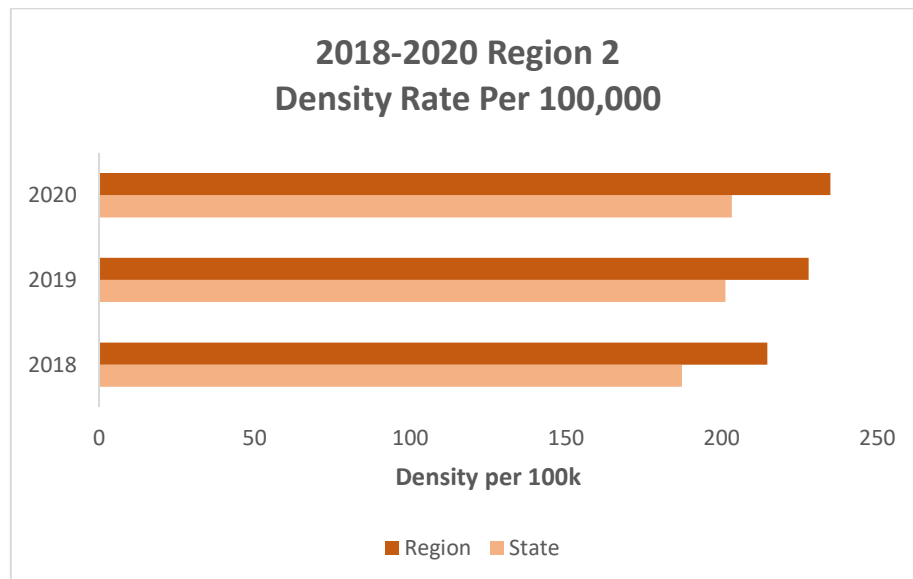
Retail Access

Alcohol Retail Licenses/Density

Accessibility is a known risk factor for substance use/misuse. The more accessible a substance is the higher the risk for substance misuse. A high permit density poses a risk factor regarding alcohol misuse. There are a total of 1,312 permits in Region 2 compared to 1,271 in 2019. The state of Texas currently holds 61,326 permits compared to 59,630 in 2019. Alcohol permits are licensed by the Texas Alcoholic Beverage Commission (TABC).²³ County level number of Permits and Permits by density may be found in Appendix A Tables 46 and 47.



Source: Texas Alcoholic Beverage Commission, 2018-2020

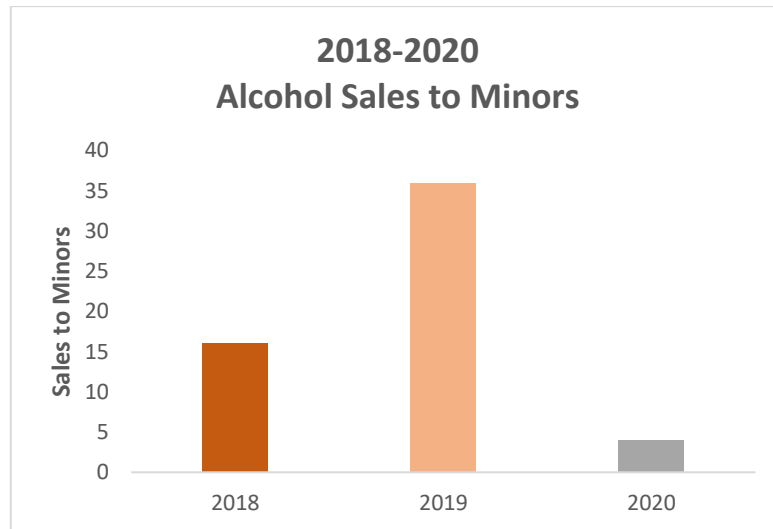


Source: Texas Alcoholic Beverage Commission, 2018-2020

²³ License Information Texas Alcoholic Beverage Commission (TABC) <https://apps.tabc.texas.gov/publicinquiry/> Accessed May 28, 2021

Alcohol Sales Violations

According to The Texas Health and Human Services and TABC sales to minors saw an increase in many of the counties between 2017 - 2019 in Region 2. Due to COVID – 19 and the stay-at-home order, sales to minors were almost zero in 2021. Adults who give alcohol to minors can face harsh penalties. Making alcoholic beverages available to minors is a Class A misdemeanor. Persons 21 or older (other than parents and guardians) can also be held liable for damages caused by intoxication of a minor.²⁴ County level data for Alcohol Sales to Minors may be found in Appendix A Table 48.

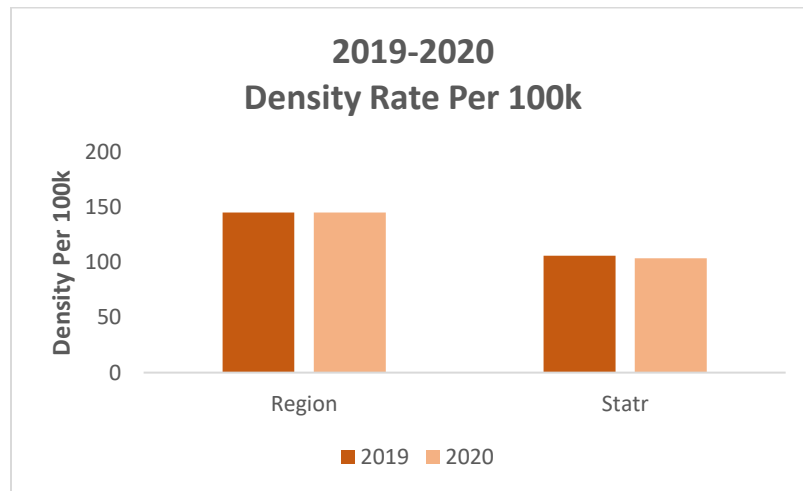


Source: Administrative Violations: Sales to Minors. TABC. Accessed May 28, 2021.

²⁴ Underage Drinking Laws. <https://tabc.texas.gov/texas-alcohol-laws-regulations/underage-drinking/> Accessed July 9, 2020.

Tobacco Retail Density

Tobacco retailers in Region 2 are higher than the state's density per 100k rate in both 2019 and 2020. In 2019 there was 145.09 permits per 100k compared to the state density rate of 105.97 per 100k. In 2020 the density rate in Region 2 was 145.04 per 100k compared to 103.65 per 100k. *County level number of Permits and Permits by density may be found in Appendix A Table 49.*



Source: Texas Comptroller, Active Cigarette/Tobacco Retailers. Accessed May 28, 2021.

Tobacco Sales to Minors

In December 2019, the United States adopted a law raising the federal minimum age of sale of all tobacco products to 21 years of age. Minors are prohibited from buying tobacco and nicotine products which also includes alternative nicotine products and e-cigarettes. Retailers are required to verify the age of persons purchasing tobacco or nicotine products that appear to be younger than 27 years of age through photo identification. In 2017-2019 there were only 3 tobacco and nicotine violations, and there were zero violations in 2020 in Region 2.

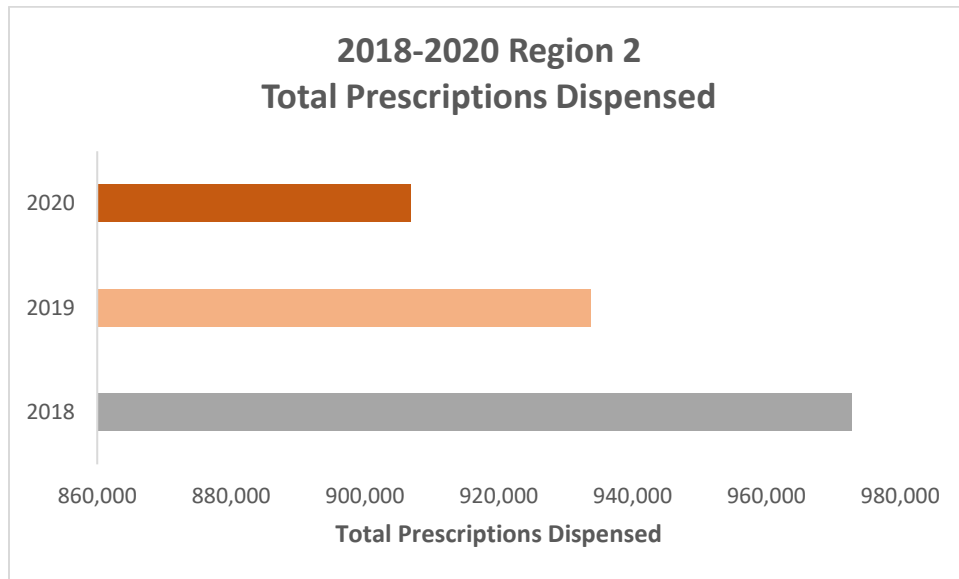
Prescription Drug Monitoring Program

The Texas Prescription Program (TPP) collects data on all prescriptions and organizes this data into all Scheduled 2,3,4, and 5 controlled substances as defined by the Drug Enforcement Agency (DEA). TPP then uses this data to better track the number or prescription drugs (grouped according to their schedule) dispenses in all Texas pharmacies or to a Texas patient by a pharmacy in another state. In 2008 Texas Legislature expanded TPP to include the monitoring of Schedule 3-5 controlled substance prescriptions. Although controlled substances meet legitimate medical demands for the patient, they also have a high potential for misuse and even abuse. This program was created to investigate and prevent drug diversion while remaining cost efficient. Diversion of prescription drugs indicates the drug misuse and abuse problems in communities. The federal government monitors the distribution of the controlled substances to retail facilities, and TPP seeks to control misuse by following controlled substances to the point of use. This program is also a system utilized by pharmacists to verify records and inquiries about patients. It is also useful in generating data trends regarding prescription drugs. All Texas-licensed pharmacies are now required to report any dispensed controlled substances within one business day of the prescription being

filled. Additionally, all prescribers are required to check patient’s prescription history before prescribing and/or dispensing any opioids, benzodiazepines, barbiturates, or carisoprodol, effective September 2018.

Prescription Drugs Dispensed

In 2019 TPP reported there were 167.47 total prescriptions per 100k in our region. This rate decreased slightly to 162.38 per 100k.²⁵ The regional rate exceeds the state rate of total prescriptions per 100k of 126.06. The overall total of prescriptions dispensed has been decreasing since 2018. *County level totals may be found in Appendix A Tables 50-52.*



Source: Texas Board of Pharmacy. Accessed March 3, 2021.

²⁵ Texas State Board of Pharmacy. Total dispensation data submitted to the PDMP by pharmacies located in Texas 2020, <https://pharmacy.texas.gov/resources.asp> Accessed 3/30/2021

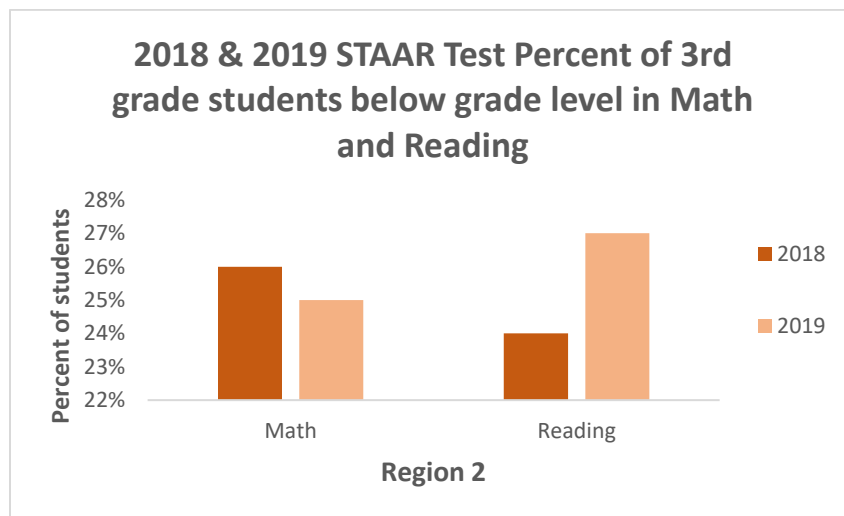
School Domain

Academic Achievement – TEA

STAAR achievement – 3rd graders

The State of Texas Assessments of Academic Readiness (STAAR) was implemented in the 2011-2012 school year. This assessment was developed in response to requirements set during the 80th and 81st Legislatures.²⁶ The STAAR test shows the level of mastery of a core subject at a certain grade level and if the student is adequately prepared for the next grade level.

26% of 3rd grade students in Region 2 did not meet grade level standards in Math in 2018, 25% in 2019. 24% of 3rd grade students did not meet grade level standards in Reading in 2018, 27% in 2019. STAAR tests were not administered during the 2019-2020 school year due to COVID-19. *County level number and percent of students not meeting grade level in Math and Reading for 2018 & 2019 may be found in Appendix A Tables 53 and 54.*

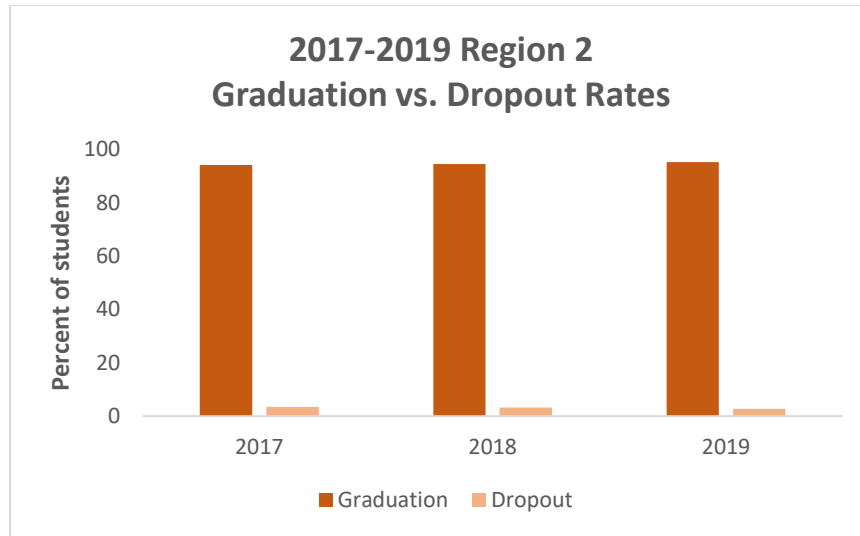


Source: TEA, STAAR 2018 & 2019. Accessed June 28, 2021.

Graduation/Dropout Rates

The Texas Education Agency has been, since 2003, proactively and aggressively addressing issues relating to retention. State and Federal resources identified as proven strategies are replicated for dropout prevention and recovery. The Texas Education Data Standards (TEDS) defines dropout classifications. These classifications include ethnicity, economically disadvantaged, gender, bilingual, dyslexic, foster students, homeless, immigrant, migrant, military connected, special education, and title 1 students. High School retention rates have continued to decrease in Region 2 since 2017, decreasing from 3.4 in 2017 to 2.7 in 2019.

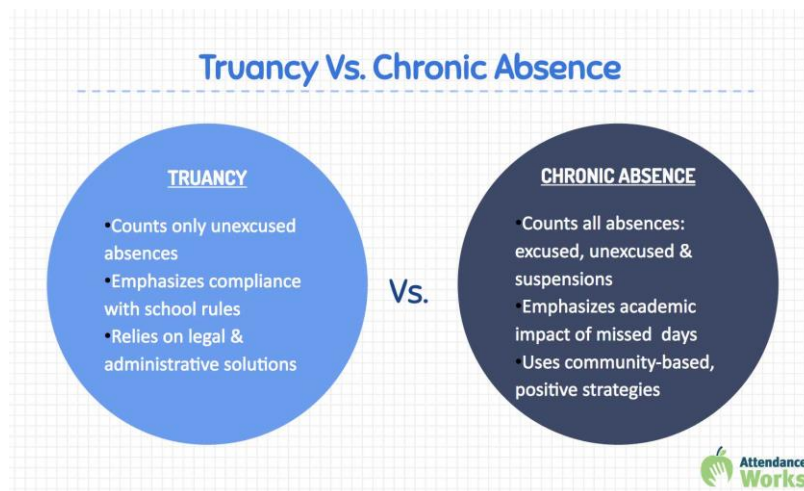
²⁶ Texas Education Agency, STAAR Resources. <https://tea.texas.gov/student-assessment/testing/staar/star-resources> Accessed June 28, 2021.



Source: Texas Education Agency. Accessed March 3, 2015

Absenteeism

According to Attendance Works – Advancing Student Success by Reducing Chronic Absence²⁷ Texas does not monitor chronic absence. However, state school funding formula factors in average daily attendance. Chronic absence has been released in three of Texas’s largest cities, Austin, Houston, and San Antonio. Approximately more than 8 million students across the United States miss enough school days that they are identified as academically at risk. A chronic absence is considered missing 10% or more of school days for any reason. These types of absences can translate into students being unable to meet grade level requirements.



Source: Attendance Works, *What’s the Difference Between Chronic Absence and Truancy?*

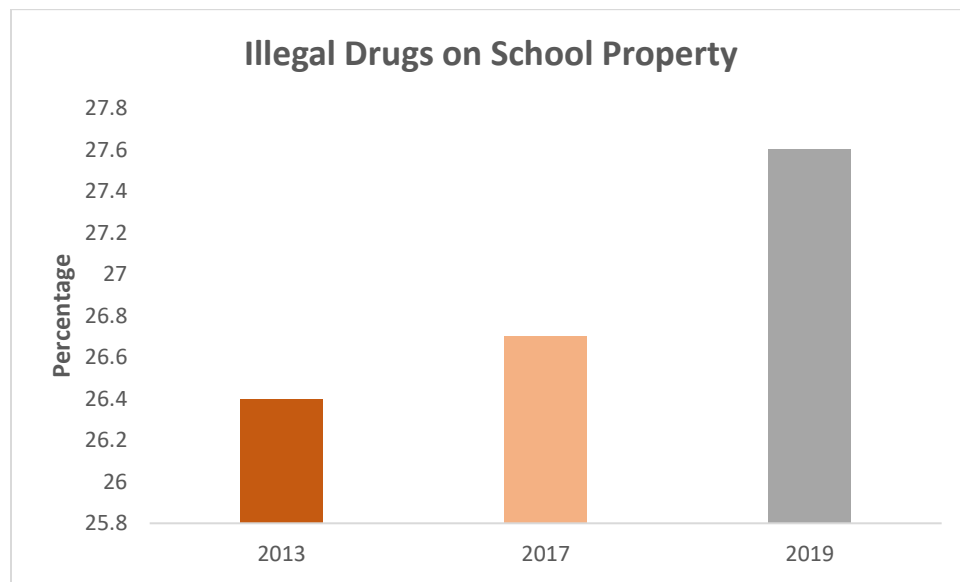
²⁷ State Attendance Policy. Attendance Works, *Advancing Student Success by Reducing Chronic Absence*. Accessed August 2020

School Suspensions, In or Out of School

During the 2019-2020 school year, Region 2 reported 341 school discipline actions for controlled substances/drugs in grades 7 – 12. These actions include out-of-school suspension and placement in off campus DAEP. *2018-2019 Discipline Data Reports for Region 2 may be found in Appendix A Table 55.*

Illegal Drugs on School Property

In accordance with the Texas Health and Safety Law Sec. 481.134 – Drug Free Zones, it is illegal to possess a controlled substance in a drug free zone, defined as being within 1000 feet of a public or private elementary or secondary school, a daycare, or on a school bus. In Texas the percent of students <15 – 18+ who were offered, sold, or given illegal drugs on school property by someone during the past 12 months in 2019 was 27.6%, which is an increase from 26.4% in 2017.²⁸ The Texas Youth Risk Behavior Surveillance System (YRBSS), initiated in 1991, is a federally funded classroom-based survey conducted biennially on odd years to monitor health-risk behaviors that contribute to the leading causes of death, disability, and social problems among young and adults in the United States.



Source: Center for Disease Control and Prevention, High School YRBSS, 2013-2019.

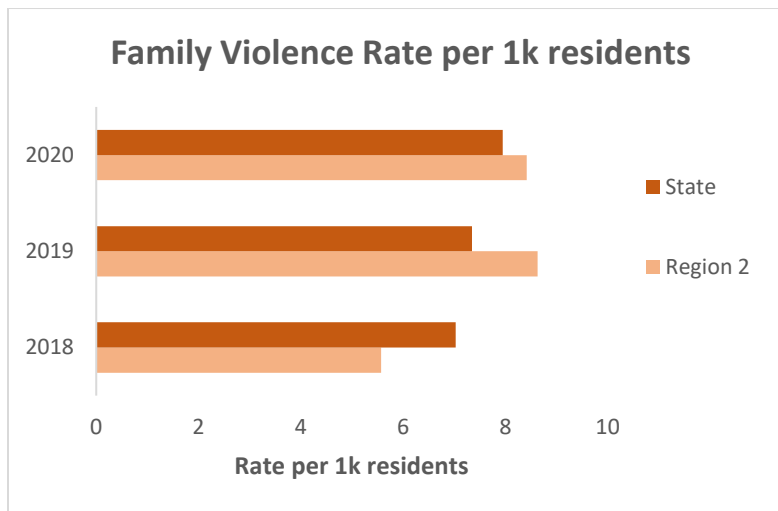
²⁸ Texas Department of State Health Services. 2001-20019 High School Youth Risk Behavior Survey Data. <https://healthdata.dshs.texas.gov/dashboard/surveys-and-profiles/youth-risk-behavior-survey#> Accessed April 12, 2021.

Family Domain

Family Environment

Family Violence Crime Rate

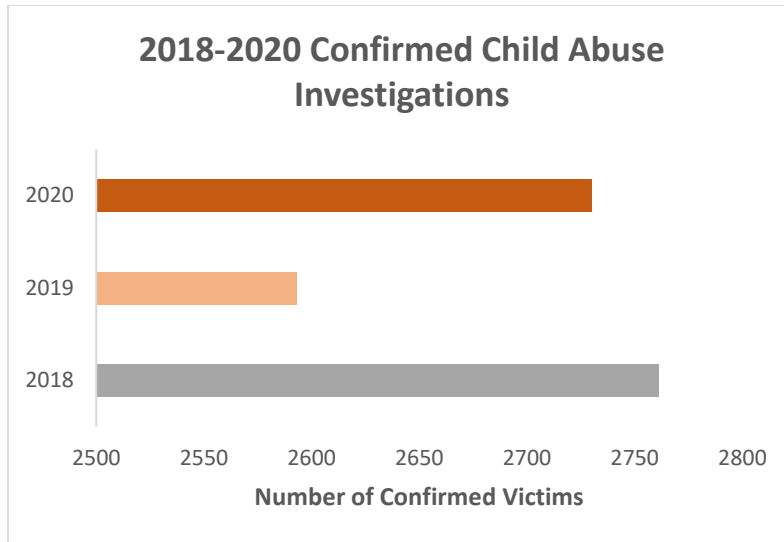
The Texas Family Code defines Family Violence as an act by a member of a family or household against another member that **is intended to result in physical harm, bodily injury, assault**, or a threat that reasonably places the member in fear of imminent physical harm. In 2019 40.1% of women and 34.9% of men in Texas experienced domestic violence. The National Network to End Violence reports that the U.S. domestic violence hotlines receive on average of almost 15 calls per minute, which is approximately 21,000 calls per day. Family violence incident reports in Region 2 were 3,201 calls in 2018, 4,816 calls in 2019, and 4,705 calls in 2020. In both 2019 and 2020 the rate of Family Violence Incident reports per 1,000 residents in Region 2 was higher than the state rate.



Source: Texas Department of Public Safety, Family Violence Summary Report. Accessed July 23, 2021.

Child Victims of Maltreatment

In accordance with Texas Family Code Section 261.101 (a), if you suspect a child is being abused or neglected, the law requires you to report it to the Texas Department of Family and Protective Services (DFPS). There are four major types of child maltreatment: neglect, physical, sexual, and emotional abuse. As with many areas that experienced an increase in 2020, COVID-19 impacted families in ways not previously experienced. DFPS works collaboratively with communities, service providers, and families to keep children safe. In FY 2020, Texas saw an increase in preventable child fatalities. Fatalities included unsafe sleeping practices combined with substance use, vehicle-related accidents, and physical and medical neglect. *County level totals of Confirmed Child Abuse and Neglect Victims may be found in Appendix A Table 56.*



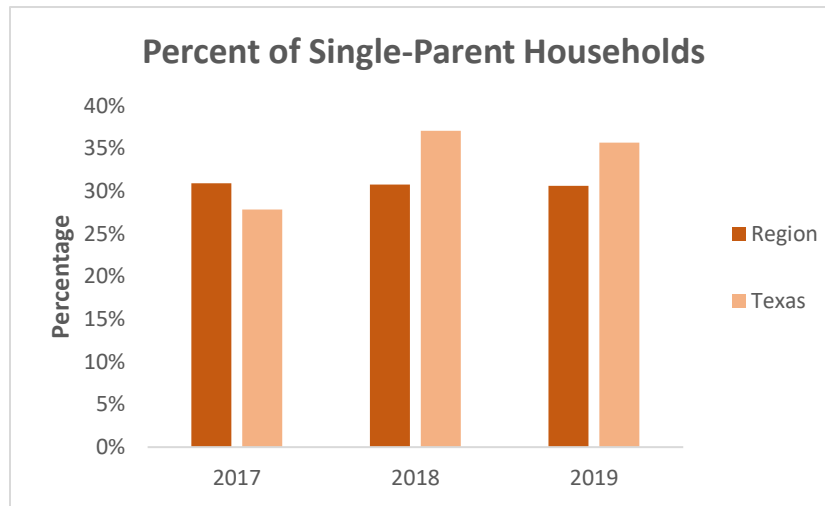
Source: Texas Department of Family Protective Services. Accessed July 23, 2021.

Children in Foster Care

Children in DFPS custody are those for whom a court has appointed DFPS legal responsibility through temporary or permanent managing conservatorship or other court ordered legal basis. These children may be residing in substitute care or may be living with a parent, referred to as a return and monitor. DFPS legal responsibility terminates when a court orders DFPS custody end or a youth turns 18, whichever comes first. Region 2 has seen an increase each year 2018-2020. *County level totals of Children in Substitute Care may be found in Appendix A Table 57.*

Single-parent households

The United States Census: American Community Survey (ACS) 5-year estimates produces population, demographic, and housing unit estimates. It is the Census Bureau's Population Estimates Program that produces and disseminates the official estimates of the population for the nation, states, counties, cities, and towns as well as estimates of housing units for states and counties. Single-parent households are included in this report and defined as a percentage of children less than 18 years of age living in a household that is headed by a single parent, male or female, with no spouse present. According to the ACS, adults and children in single-parent households are at risk for adverse health outcomes including mental illness and unhealthy behaviors such as substance use, substance misuse, smoking, and excessive alcohol use. Region 2 has had minor changes to their percentage of single-parent households over a three-year period. *County level data for Single-Parent Households for 2017-2019 may be found in Appendix A Table 58.*



Source: U.S. Census Bureau, American Community Survey. Accessed July 19, 2021.

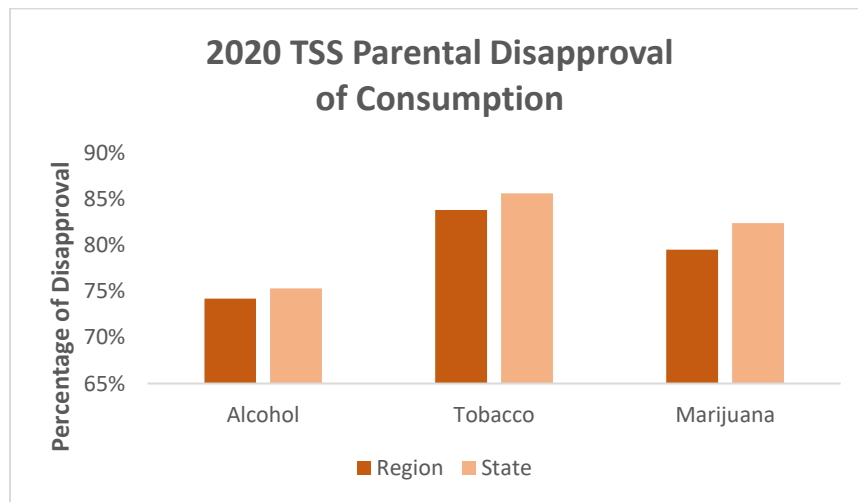
Perceptions of Parental Attitudes

Parents “Strongly” or “Mildly Disapprove” of Alcohol, Tobacco, and Marijuana Use

The TSS collects self-reported tobacco, alcohol, and substance use data among students in grades 7 thru 12 in Texas Public schools. The survey is sponsored by the Texas Department of State Health and Human Services Commission (HHSC) and administered by the Public Policy Research Institute (PPRI).

Parental views on students consuming substances are included in the TSS. Research in this study correlates parental approval of consumption and student’s behavior. The questions regarding parental approval read: “How do your parents feel about kids your age using tobacco, alcohol, or marijuana?” Each question is asked separately to students in grades 7-12.

The chart below reports the percentage of students’ belief their parents “strongly disapprove” and “mildly disapprove” of them consuming these substances. Alcohol has the least percentage of students’ belief their parents “strongly disapprove” of them consuming alcohol. Marijuana’s disapproval rate has decreased, and Tobacco currently has the highest disapproval rating. Region 2 students report a lower parental disapproval percentage for all three substances listed when compared to the state’s percentage of parental disapproval. *State and Region 2 data for each grade level may be found in Appendix A Table 59.*



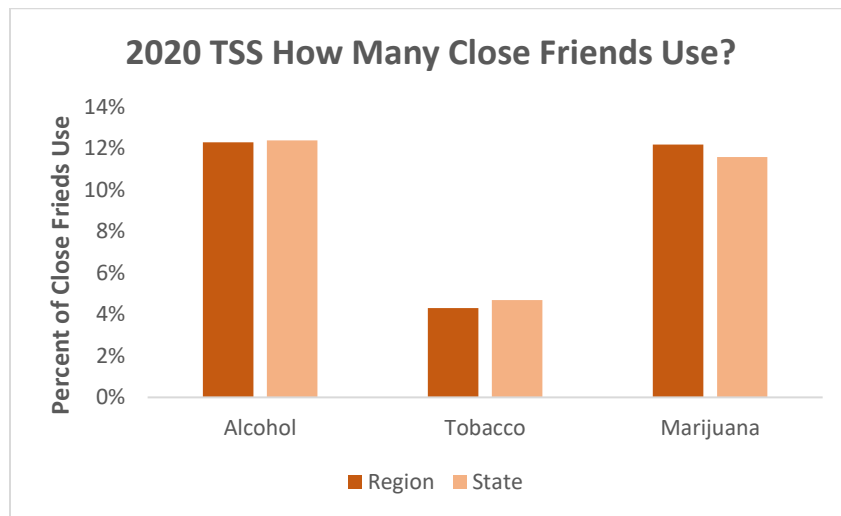
Source: Texas A&M University Public Policy Research Institute, TSS, Parent Disapproval 2018-2020. Accessed on July 28, 2021.

Peer Domain

Perceptions of Peer Consumption

“Most” or “All” of Close Friends Use

The TSS also questions students’ belief of their friends’ consumption behavior. Peer approval is asked through the question: “About how many of your close friends use tobacco, alcohol or marijuana?”. Questions are asked separately and are classified as “none”, “a few”, “some”, “most”, or “all”. Percentages are calculated excluding the responses of “none”. The following chart reports the total percentage of students who believe “most”, or “all” their friends consume these substances. 4.3% of students report their friends use tobacco; 12.3% report their friends consume alcohol, and 12.2% report their friends use marijuana. *State and Region 2 data for each grade level may be found in Appendix A Table 60.*



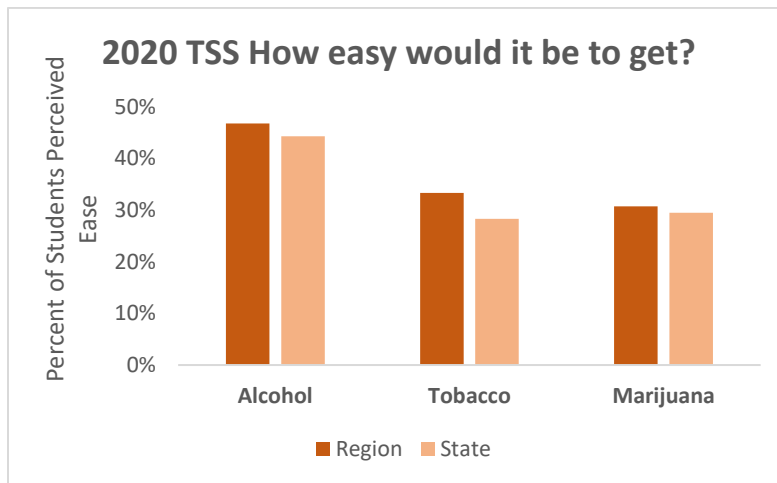
Source: Texas A&M University Public Policy Research Institute, Texas School Survey, 2020.

Perceived Social Access

Access is “Somewhat” or Very Easy”

The risk of substance use works in congruence with the risk factor model, and accessibility should be considered in the perception a person has in obtaining alcohol, marijuana, tobacco, or prescription drugs. Substances believed to bring harm reduce the risk of abuse, which provides a protective factor. Family associations may influence the risk of abuse if parents are social hosts for adolescent parties. A community also contributes to a perceived risk if businesses do not follow state licensing and regulations in alcohol and tobacco sales, increasing access as a result. The following information addresses each realm of the risk model in assessing the accessibility of alcohol, marijuana, and tobacco and nicotine products. The Texas School Survey (TSS) does not include a question regarding the perceived accessibility to prescription drugs. The TSS addresses a teenager’s perception of how difficult it would be for them to acquire alcohol, tobacco, other nicotine products. The following data is a comparison of all 7th – 12th graders in schools across Region 2 compared to other 7th – 12th graders across the state. Students were

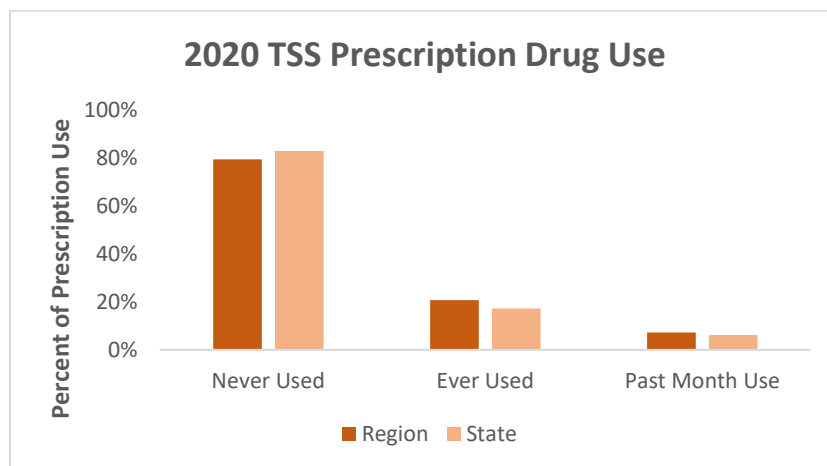
asked “If you wanted some, how difficult would it be to get alcohol, tobacco, and marijuana?” The numbers reported describe the percentage of students who reported it was “somewhat easy” or “very easy” for them to acquire these substances. An increased perception of access increases the risk of accessibility to the young people within our region. A lower perception of access lowers the risk of accessibility among young people within our region. The state and region percentages of students reporting the ease of acquiring alcohol is very similar.²⁹ *State and Region data percentages for each grade may be in found in Appendix A Table 61.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Prescription Drugs

The 2020 TSS includes questions regarding the perceived access to prescription drugs not prescribed to students. Students within Region 2 reported a higher rate than the statewide percentage when asked if they had ever used or used in the past month prescription drugs not prescribed to them. *Regional and State data percentages for each grade may be found in Appendix A Table 62.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

²⁹ Texas School Survey. Texas A & M Public Policy Research Institute, 2020. <https://texasschoolsurvey.org/Report> Accessed April 28, 2021

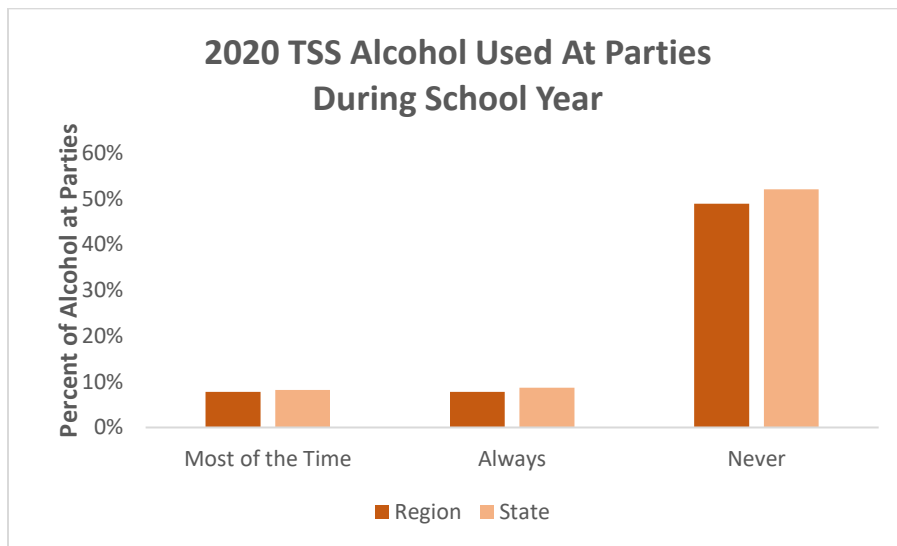
Presence of a Substance at Parties

Social Hosting of Parties

Texas passed legislation in 2005 that holds a person liable if they host a party where alcohol is provided to underage minors. Section 2.02 of the TABC extends the liability to those who provide alcohol to minors on their property or if the host supplies car keys to an intoxicated adult on the host’s property. The law states that the host must know the minor’s age, and if they do not know their age, the host cannot be held liable for the minor. In the 2018 TSS, youth report generally accessing alcohol through parties or at home. According to Texans for Safe and Drug Free Youth, previously Texas Standing Tall, “a social host ordinance is a prevention designed to stop parties where binge drinking is occurring by creating adult accountability without necessarily elevating the offense to the misdemeanor level that can carry a penalty of jail time” (TST). Underage drinking is a concern for our communities because it is often associated with violence, assaults, binge drinking, alcohol poisoning, sexual assaults, unwanted or unplanned sexual activity, in combination with drug use, and property damage or vandalism.

Alcohol at Parties “Most of the Time” or “Always”

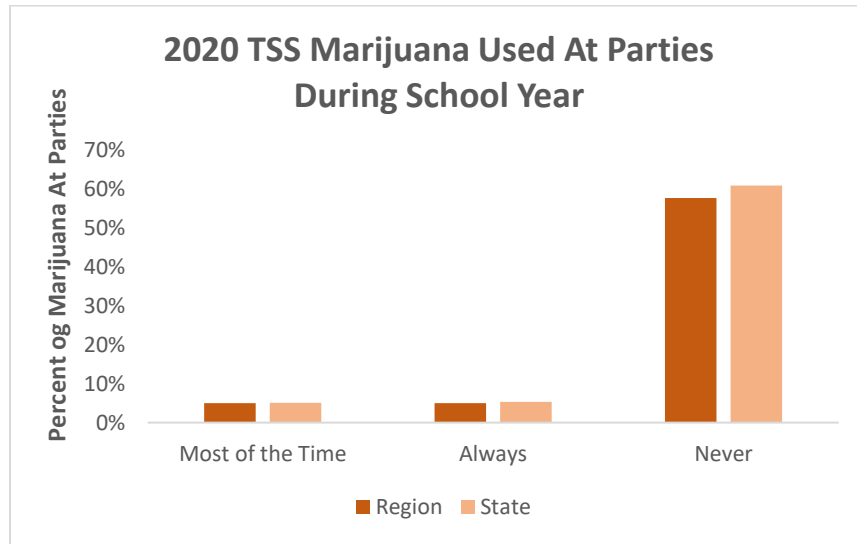
The TSS asks students how often alcohol was used at parties they attended during the school year. Region 2 reported a slightly lower rate than the state of students reporting alcohol was used “most of the time” or “always” at parties they attended during the school year. The state also reported a higher rate of students reporting alcohol was never used at parties they attended. *State and Region 2 data for each grade level may be found in Appendix A Table 63.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Marijuana at Parties “Most of the Time” or “Always”

The TSS also asks students how often marijuana was used at parties they attended during the school year. Region 2 and the state reported nearly the same rate of students reporting marijuana was used most of the time or always at parties they attended during the school year. The state reported a higher rate of students reporting marijuana was never used at parties they attended. *State and Region 2 data for each grade level may be found in Appendix A Table 64.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

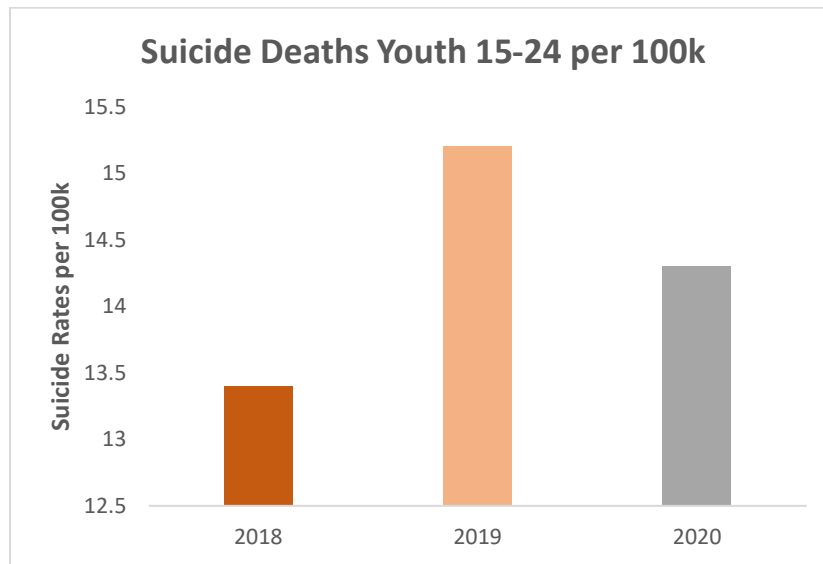
Individual Domain

Youth Mental Health

Adolescent Suicides

In 2017 suicide became the second leading cause of death for adolescents ages 15-24. In 2018 the CDC analysis extended deaths by suicide to include youth 10-24. Suicide rate is based on the number of deaths per 100,000 population. The National Vital Statistics Report, Vol. 69, No. 11, September 11, 2020 shows Texas reported a 47.1% increase in suicide deaths per 100,000 among persons aged 10-24 from 2007-2009 to 2016-2018. In 2007-2009 there were 1,152 deaths by suicide and a rate of 7.0 per 100k. In 2016-2018 suicides rose to 1,867 for persons 10-24 years of age with a rate of 10.3 per 100k. Risk factors for suicide among adolescents include major depressive disorders, substance use disorders, family history, physical and/or sexual abuse, feelings of isolation, and bullying.

In 2019 the Texas Youth Risk Behavior Surveillance System (YRBS) reports that 12.4% of females and 7.5% of male’s 9th – 12th grade report having attempted suicide. Of those attempts, 4.1% of females and 2.6% of male’s required medical treatment following a suicide attempt. Although more females attempt suicide nationally, males are more likely to die by suicide. Black students are more likely to attempt suicide than white students. According to the CDC, youth who identify as LGBTQIA+ are three times more likely to seriously contemplate suicide and five times more likely to attempt suicide.³⁰

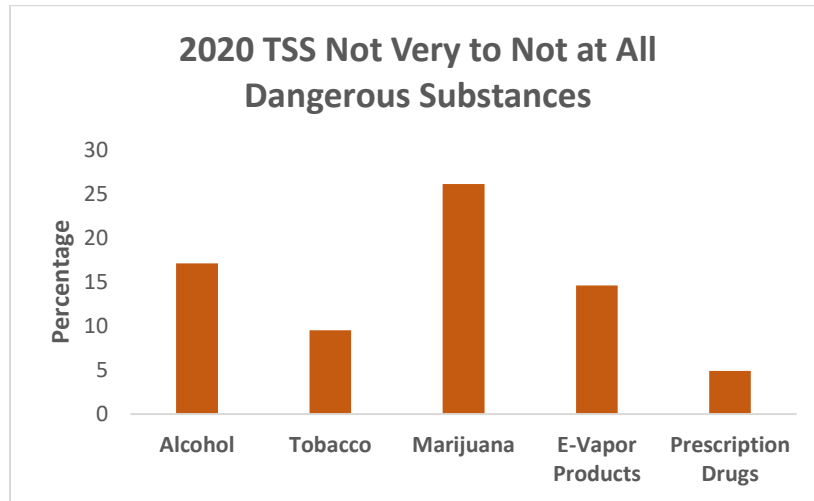


Source: Americas Health Rankings, Youth Suicide Rates. Accessed July 27, 2021.

³⁰ CDC (2016) Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: YRBS

Youth Perception of Risk/Harm

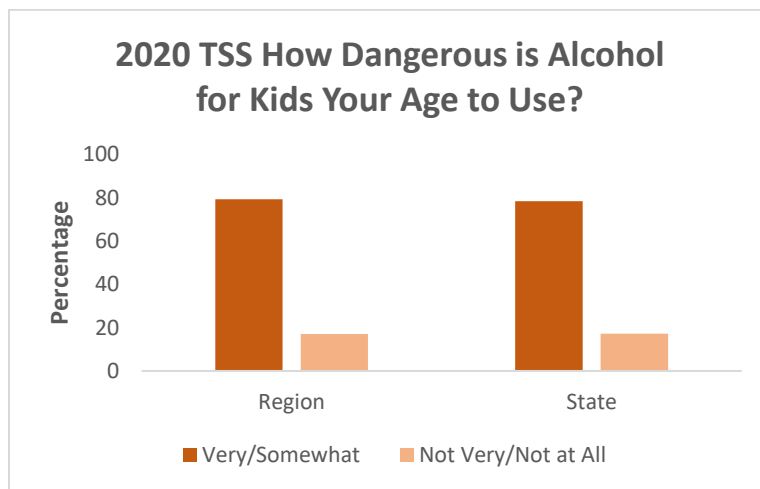
When assessing the risk of abusing substances, a perception of harm should be evaluated. If a person’s perception of harm is low, a person is more likely to have a higher risk of abuse. Likewise, a lower perception of harm often means a person is likely to use a substance. According to the results of the TSS, Marijuana is perceived as the least harmful of Alcohol, Tobacco, Marijuana, E-Vapor Products, and Prescription Drugs when comparing the reported percentages of all 7th – 12th graders.



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Alcohol is “Somewhat” to “Very Dangerous”

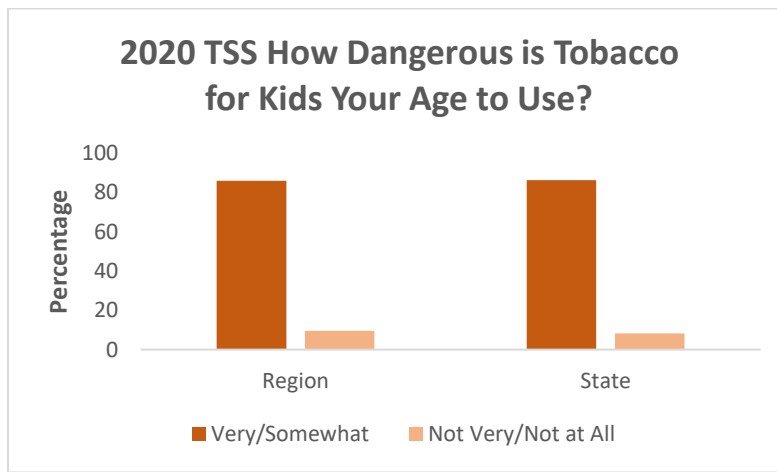
According to the 2020 TSS, 79.3% of students within our area reported alcohol as being “very dangerous” to “somewhat dangerous”. The following chart reports the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students’ response to the question asked below. *Region 2 data percentages for each grade level may be found in Appendix A Table 65.*



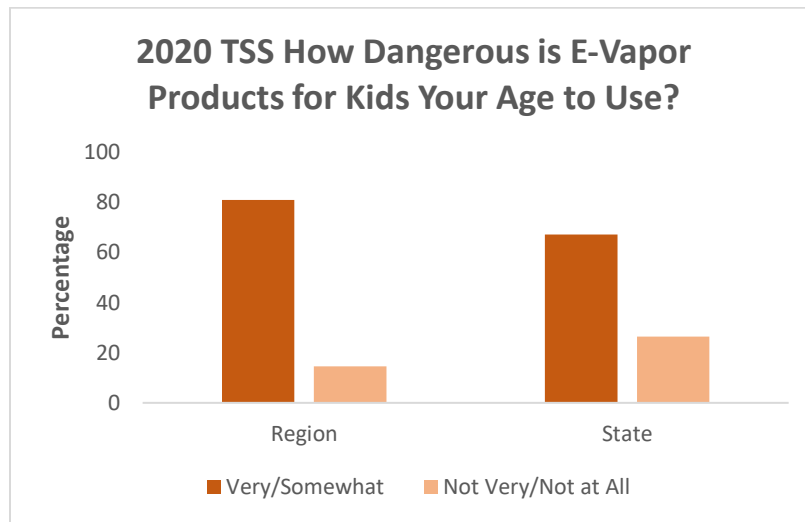
Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Tobacco and E-Vapor Products are “Somewhat” to “Very Dangerous”

In December 2019, the United States adopted a law raising the federal minimum age of sale of all tobacco products to 21 years of age. Minors are prohibited from buying tobacco and nicotine products which also includes alternative nicotine products and e-cigarettes.³¹ Retailers are required to verify the age of persons purchasing tobacco or nicotine products that appear to be younger than 27 years of age. 59.8% of surveyed students within our region reported using tobacco as “very dangerous”. This report is lower than the state percentage reports. The following chart reports the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students’ response to the question asked below. *Region 2 data percentages for each grade level may be found in Appendix A Tables 66 and 67.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

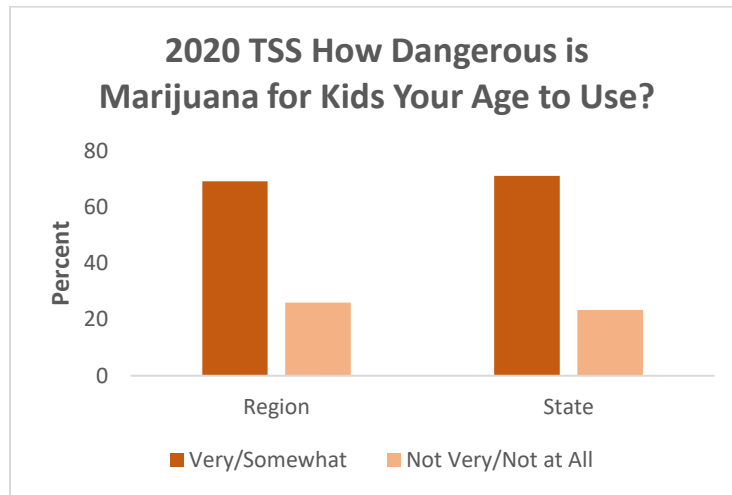


Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

³¹ 2019 Texas Tobacco fact sheet, Accessed July 14, 2021.

Marijuana is “Somewhat” to “Very Dangerous”

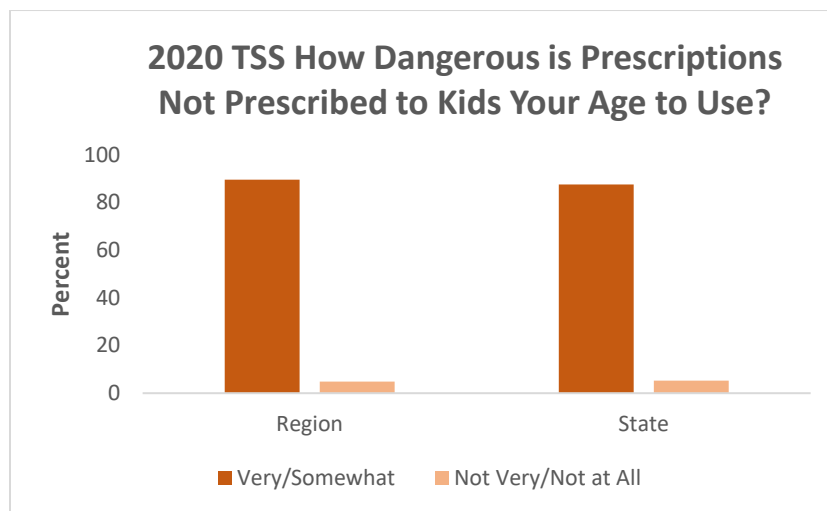
Over 54% of students surveyed within our region reported marijuana use as “very dangerous”. This percentage is lower than the state percentage. The following chart reports the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students’ response to the question asked below. *Region 2 data percentages for each grade level may be found in Appendix A Table 68.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Prescription Drugs is “Somewhat” to “Very Dangerous”

Over 75% of surveyed students within our area reported taking other people’s prescriptions as “very dangerous”. This is also higher than the state percentage. The following chart reports the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students’ response to the question asked below. *Region 2 data percentages for each grade level may be found in Appendix A Table 69.*

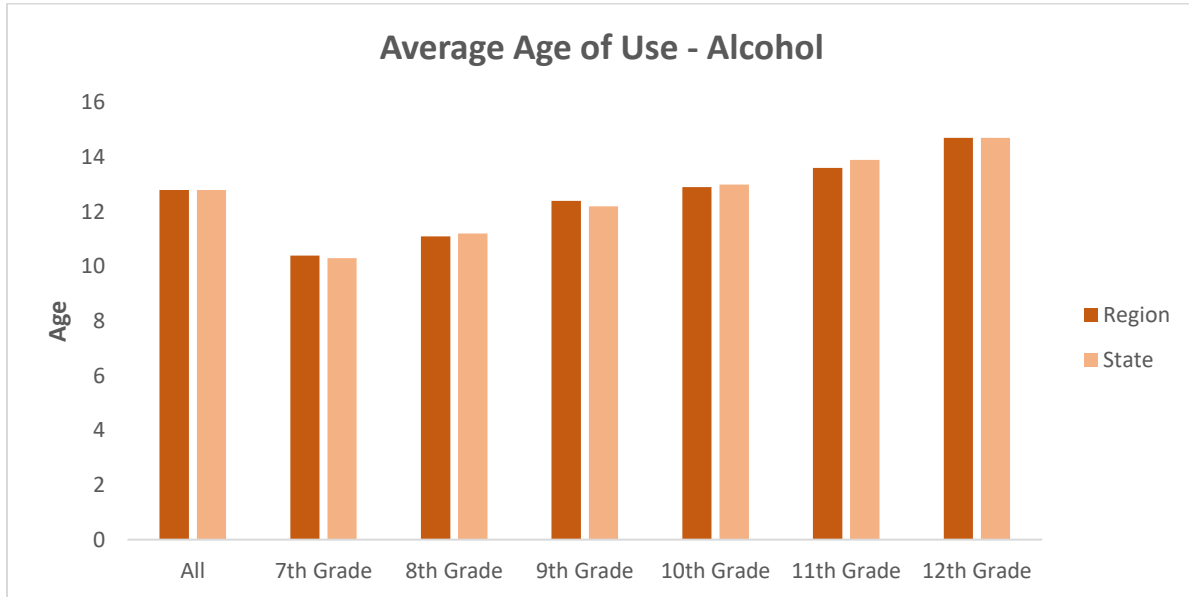


Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

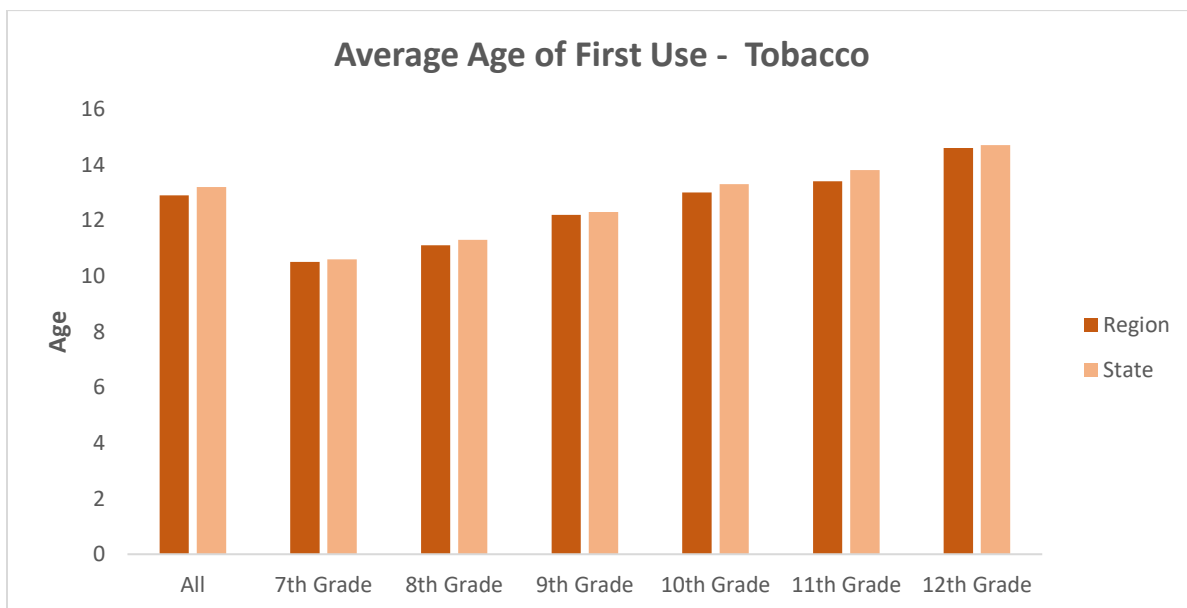
Early Initiation of Use

Early Initiation of Alcohol, Tobacco Products, and Marijuana

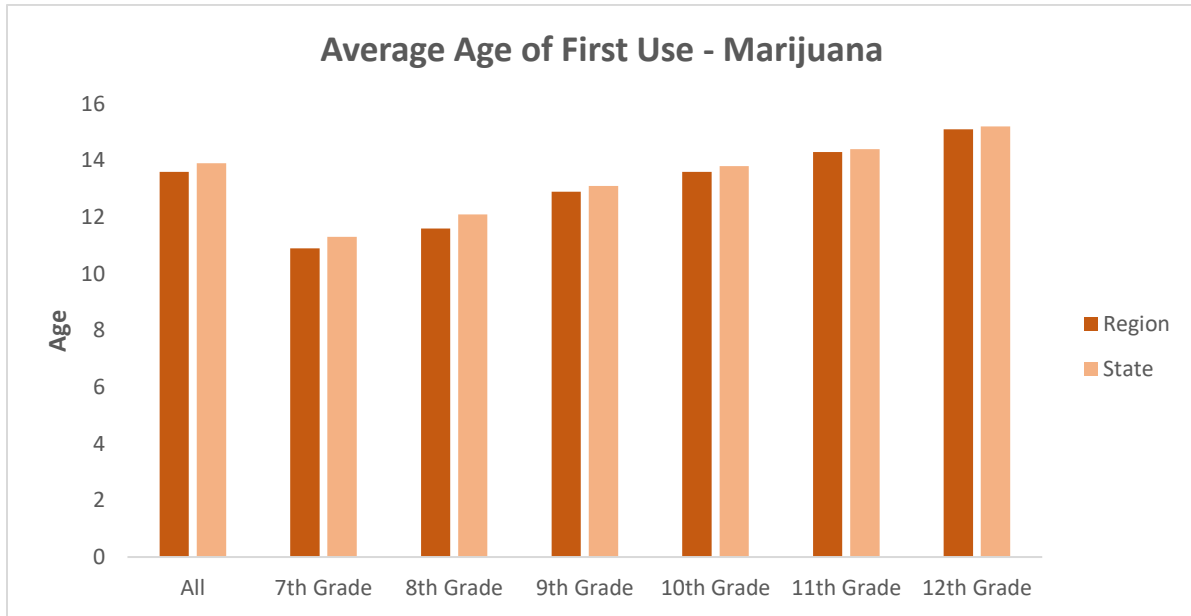
The following chart reports the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students' response when asked about their average age of First Use of Alcohol, Marijuana, and Tobacco.



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Consumption Patterns and Public Health/Safety Consequences

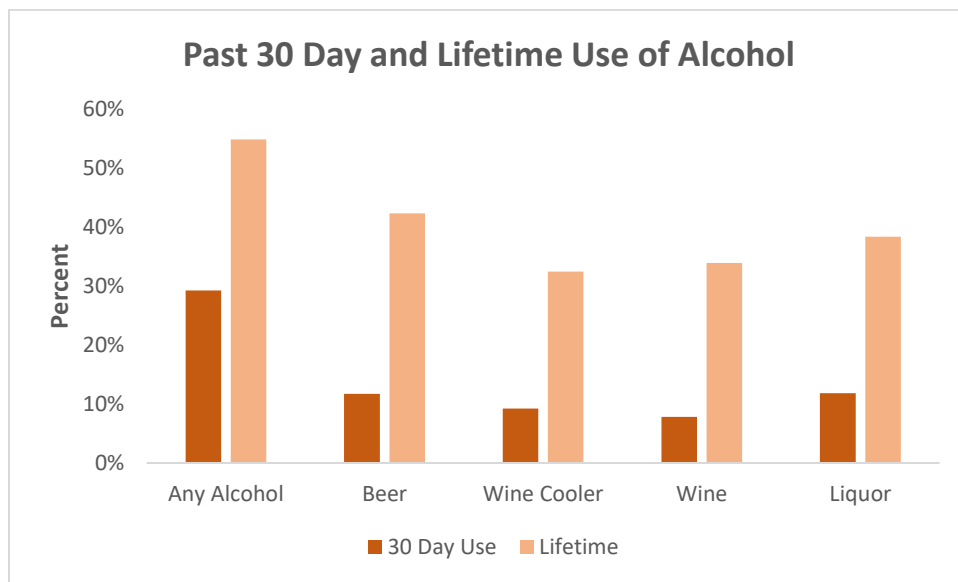
Patterns of Consumption

Youth Substance Use

The following is information on consumption rates of alcohol, marijuana, tobacco, and prescription drug use. In 2016 the decision was made to eliminate 6th graders from the survey population. Eliminating 6th grade students due to them not being mature enough for the survey materials.

30-day and Lifetime use of Alcohol

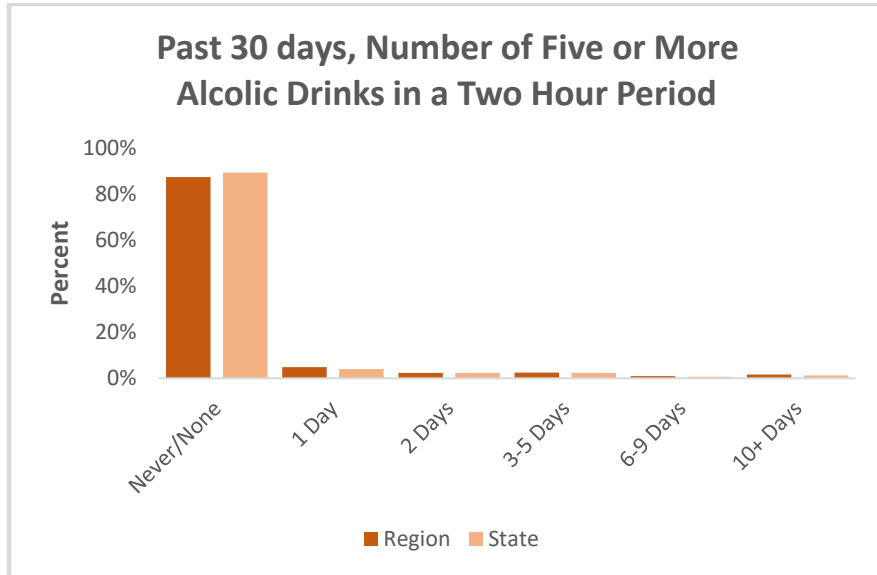
Alcohol is one of the most consumed substances among youth. Also, it may have long term effects on an adolescent’s biological development and functioning. The following information is from the 2020 Texas School Survey. This chart reports the data for the total percentage of students in Region 2 compared to the state percentage of Texas students’ response to when asked “How recently, if ever, have you used any alcohol, beer, wine coolers, wine, and liquor?” The Regional rates for all types of alcohol shown in the chart below is higher than the state rate indicating a risk factor among our youth 7th – 12th grade. In Region 2, beer and liquor are the highest reported alcohol used during the past 30 day and lifetime use. *Region 2 data percentages for each grade level for 30-day use and lifetime use may be found in Appendix B Tables 70 and 71.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Binge Drinking 30-Day Rates

According to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), underage drinking is a serious public health problem. The consequences include aggressive behavior, property damage, injuries, violence, and deaths.³² Recent research on underage binge drinking estimates that children may reach BAC levels equal to adults with fewer drinks. Some warning signs of underage drinking include changes in mood, academic and behavioral problems in school, changes in friend groups, coordination problems, and low energy level. Region 2 students report a slightly higher rate than the state regarding days of binge drinking. *Region 2 data percentages for each grade level for Underage Binge Drinking use may be found in Appendix B Table 72.*

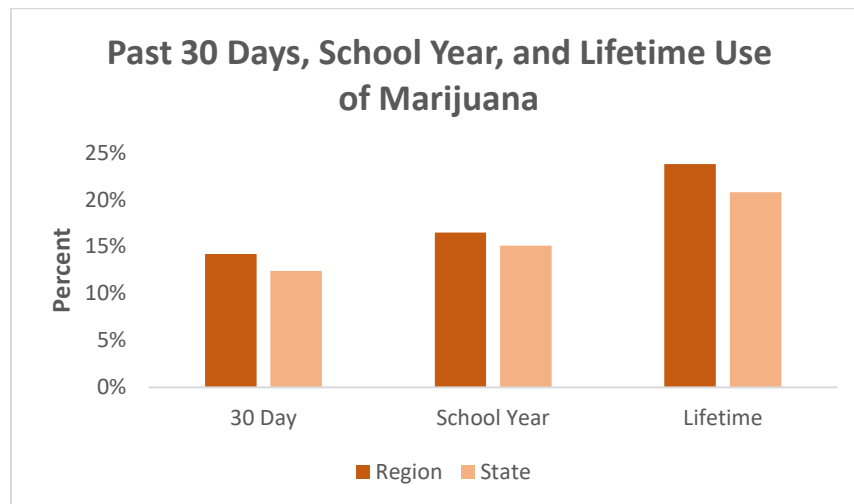


Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

³² The National Institute on Alcohol Abuse and Alcoholism, Underage Drinking facts, <https://niaaa.nih.gov/publications/brochures-and-fact-sheets/underage-drinking> Accessed June 18, 2021.

30-day and Lifetime use of Marijuana

Marijuana continues to be a drug used among young people in Region 2. Generally, young individuals consider societal norms such as the legalization of marijuana in eleven states (as well as the District of Columbia), social media, and general misconceptions as their reasonings for use. Prevention curriculum is necessary to educate the Region’s students on the harmful effects of marijuana use. Region 2 has a higher than the state rate for 30-day, school year, and lifetime use of marijuana. *Region 2 data percentages for each grade level for Marijuana use may be found in Appendix B Table 73.*

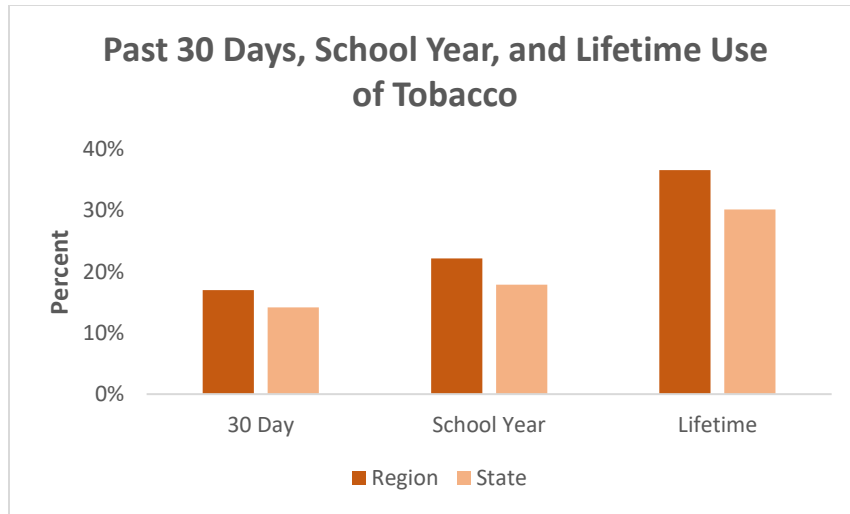


Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

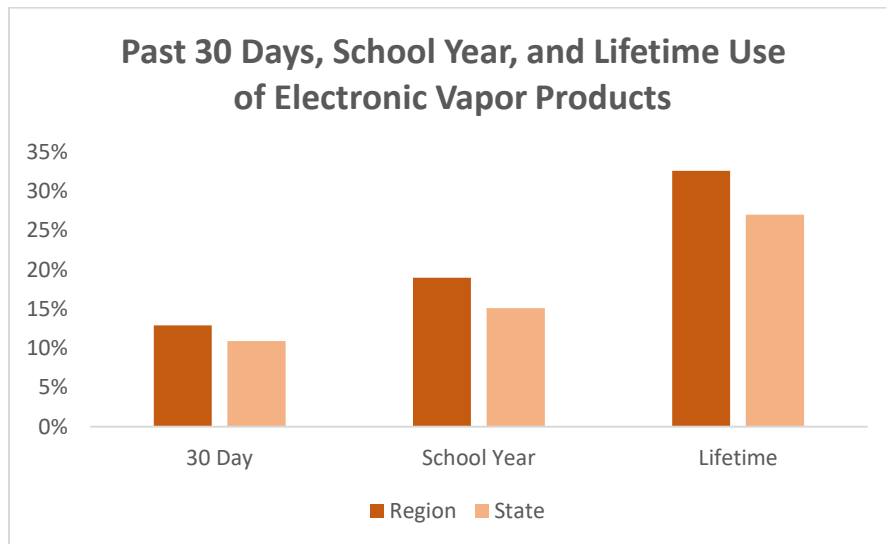
30-day and Lifetime use of Tobacco and Electronic Vapor Products

December 2019 legislation was signed increasing the federal minimum age for purchasing tobacco products, including cigarettes, cigars, and e-cigarettes from 18 to 21, with exceptions for individuals 18 and above with a valid active military identification card. The law does not allow for minors to possess tobacco products in the presence of a parent, guardian, or spouse. E-cigarette use among middle school and high school students in the U.S. increased greatly between 2017-2018. The FDA’s 2018 National Youth Tobacco Survey (NYTS)³³ reports a 78% increase in high school students and a 48% increase among middle school students. The 2020 NYTS report shows a decrease of 1.8 million U.S. youth using e-cigarettes. Region 2 has a higher than the state rate for 30-day, school year, and lifetime use of tobacco. *Region 2 data percentages for each grade level for Tobacco, and Electronic Vapor Products use may be found in Appendix B Tables 74 and 75.*

³³ U.S. Food & Drug Administration, <https://fda.gov/tobacco-products/youth-and-tobacco/youth-tobacco-use-results-youth-tobacco-survey> Accessed July 27, 2021.



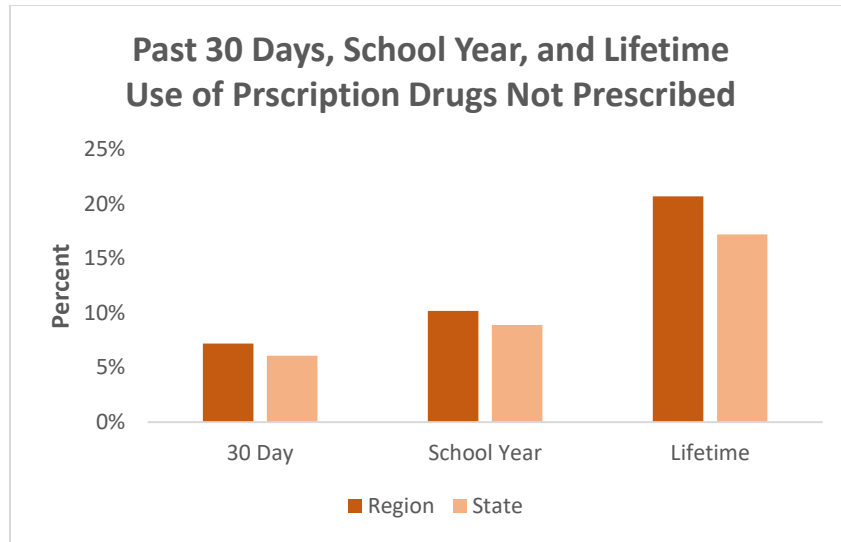
Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

30-day and Lifetime use of Prescription Medication

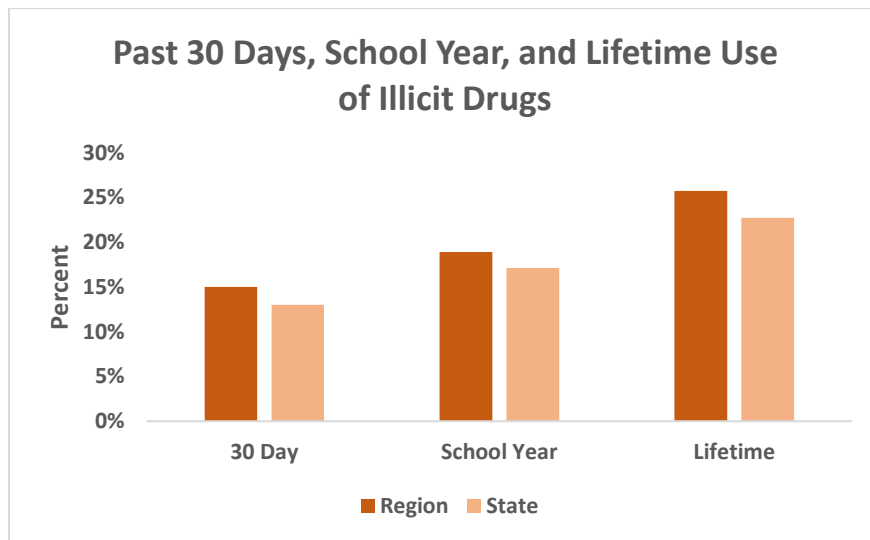
According to the 2020 Texas School Survey, the percentage of students who report using prescription drugs not prescribed to them in our region is higher when compared to the state percentage. The chart below shows the percentage of 7th – 12th grade students that report using prescription drugs not prescribed to them within the past month, school year, and lifetime in Region 2 and the state of Texas. *Region 2 data percentages for each grade level for Prescription Drugs Not Prescribed use may be found in Appendix B Table 76.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

30-day and Lifetime use of Illicit Drugs

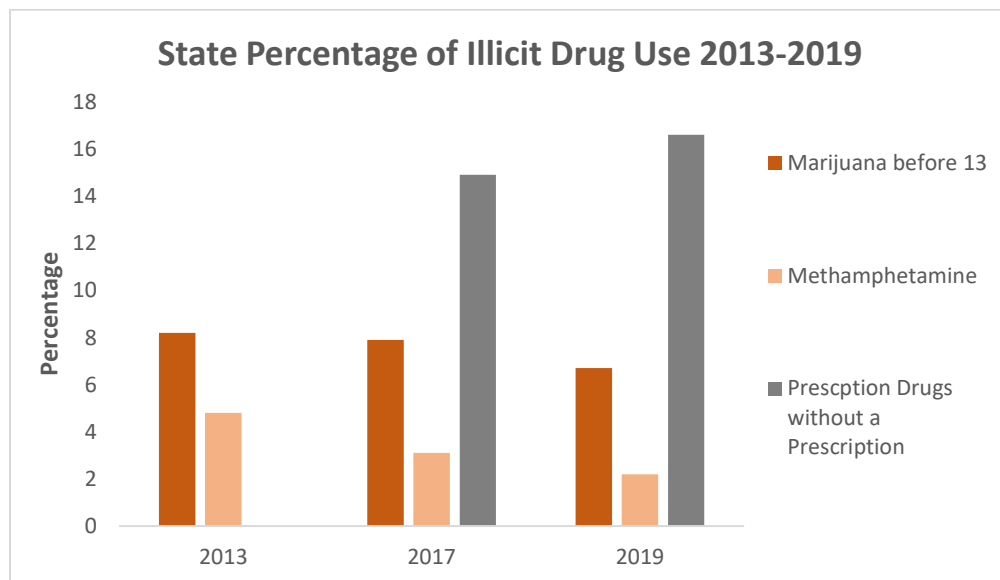
According to the 2020 Texas School Survey the percentage of students who report using Illicit drugs in our region is higher when compared to the state percentage. The chart below shows the percentage of 7th – 12th grade students that report using illicit drugs within the past month, school year, and lifetime in Region 2 and the state of Texas. *Region 2 data percentages for each grade level for Illicit Drug use may be found in Appendix B Table 77.*



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020

Texas Department of State Health Services, High School Youth Risk Behavior Survey (YRBS) is completed on a biennial basis. The YRBSS is a federally funded classroom-based paper survey conducted in odd-years to monitor priority health risk behaviors that contribute substantially to the leading causes of death, disability, and social problems among youth and adults in the United States. This can be used to monitor the Healthy People 2020 objectives of smoking, overweight, exercise, seat belt use, alcohol consumption, drug use, sexual activity, and other risk factors. This allows for intervention priorities to be established and long-term impact of health promotion programs to be monitored. State and federal public and private health authorities rely on the YRBS to identify current health issues, and help to write policy, set goals, and measure their progress.

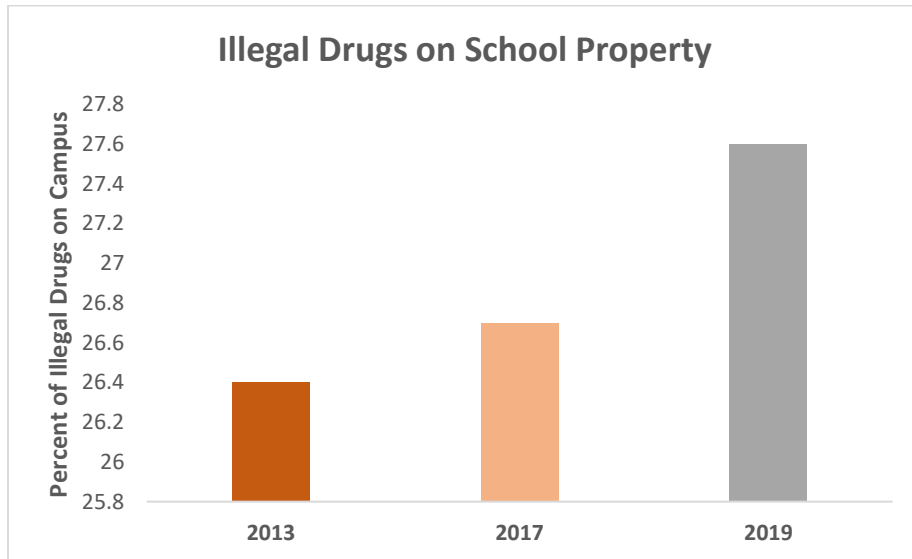
Adults with substance use disorders report using illicit substances during their teen and young adult years. There are many risk factors that increase the probability of substance use disorders in youth. These risk factors include family history, parental attitudes, family rejection of sexual orientation, sexual abuse, and mental health issues, among others. Protective factors that reduce the risk of substance use include family support and engagement, disapproval of use, and connections at school.



Source: Texas Department of State Health Services, YRBSS

Illegal Drugs on School Property

In accordance with the Texas Health and Safety Law Sec. 481.134 – Drug Free Zones. It is illegal to possess a controlled substance in a drug free zone, as defined as being within 1000 feet of a public or private elementary or secondary school, daycare, or on a school bus. In Texas 27.6% of students in 2019 ages <15 – 18+ reported being offered, sold, or given illegal drugs on school property by someone during the past 12 months.



Source: Center for Disease Control and Prevention, High School YRBS, 2013-2019.

College Student Consumption

The Public Policy Research Institute at Texas A&M University continues to research college student consumption through a bi-yearly survey of students across Texas. The purpose of this research is to “assess the prevalence of alcohol, tobacco, and illicit drug use on college campuses and community college districts.” In 2017 65 schools were invited to participate; 52 provided all information needed and were included in the results, in 2019 78 schools were invited to participate, 46 were included in the results. In 2019 schools ranged from 21 large four-year universities, 24 small four-year universities, and 33 two-year colleges. The survey is relevant as it “outlines patterns of licit and illicit substance use among college students, behaviors associated with substance use, demographic associations with substance use, and consequences of substance use as perceived by the respondents.”³⁴

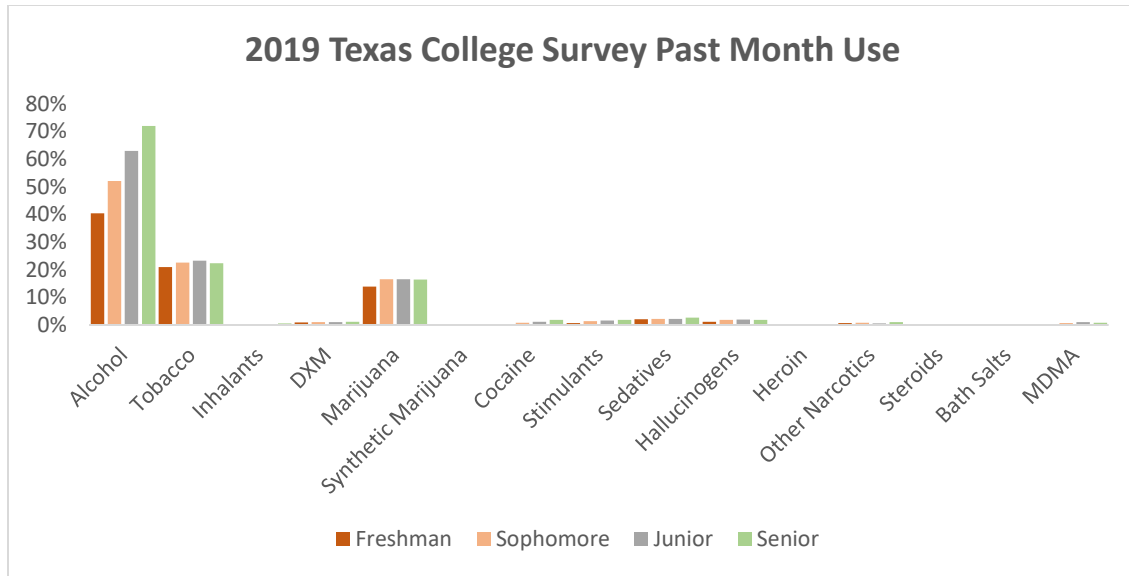
Results indicate positive and negative trends in overall consumption and behaviors. Fewer students reported drinking and driving in 2019 than in 2017, decreasing from 18% to 16%. Tobacco use increased by 4% since 2017. Marijuana is reported as the most used drug by students (94%) who report using drugs at least once during the academic year.

Students continue to report being unaware of school policies, procedures, or prevention programs on campus regarding drug and alcohol misuse. Underage drinking is still common among students, and alcohol is easily accessible to them. More students report not being able to obtain alcohol without an ID from businesses and restaurants.

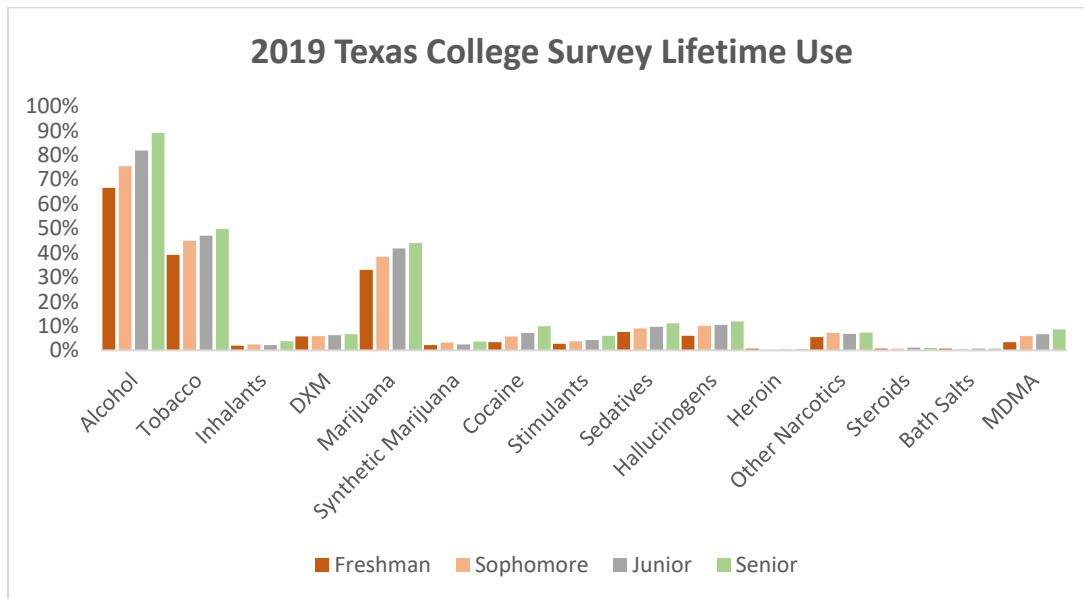
Illicit drug and alcohol use were reported associated with a lower quality of life; students reported higher levels of hopelessness and depression. Additionally, students earn lower grades and had unplanned and unprotected sex when compared to students who did not engage in drug and alcohol use.

Students perceived drugs as dangerous, except for marijuana. 40% of students reported marijuana as somewhat dangerous or very dangerous. The charts below are a snapshot from 2019 of the overall reported use of all substances within lifetime, past year, and past 30-day use.

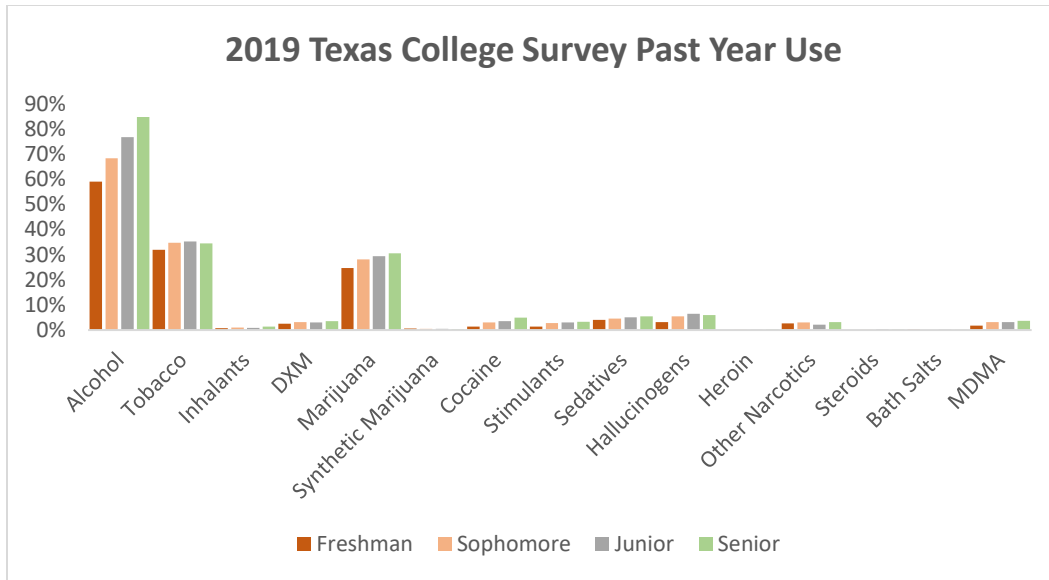
³⁴ Texas College Survey, 2019 Official Report, <https://texascollegesurvey.org>



Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019.

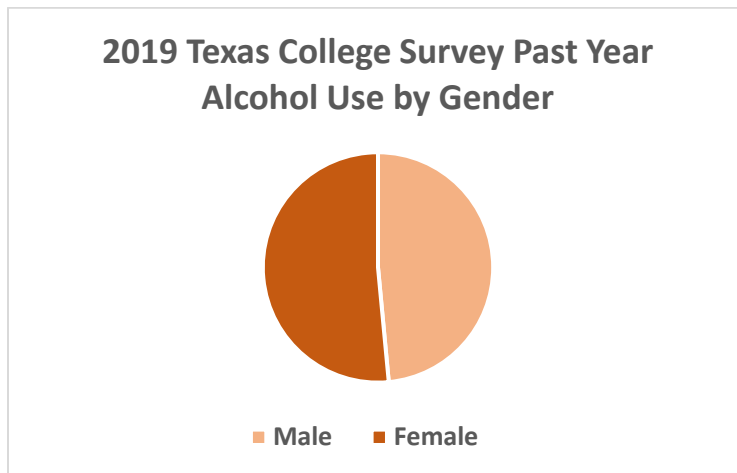


Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019.

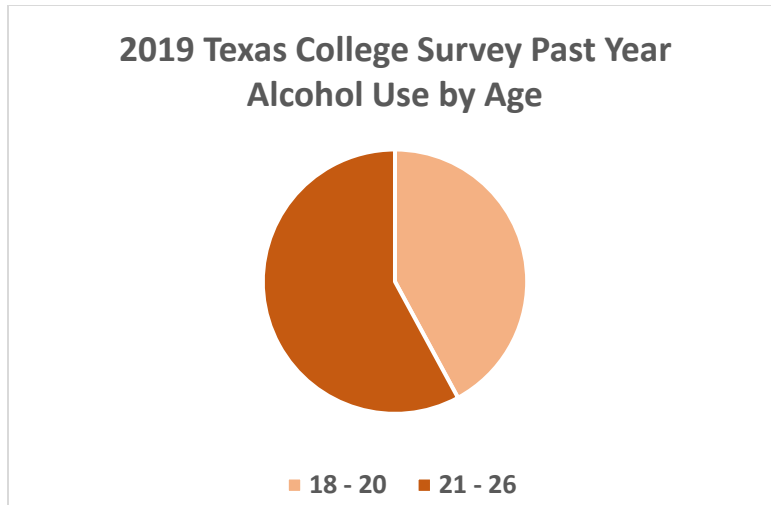


Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019.

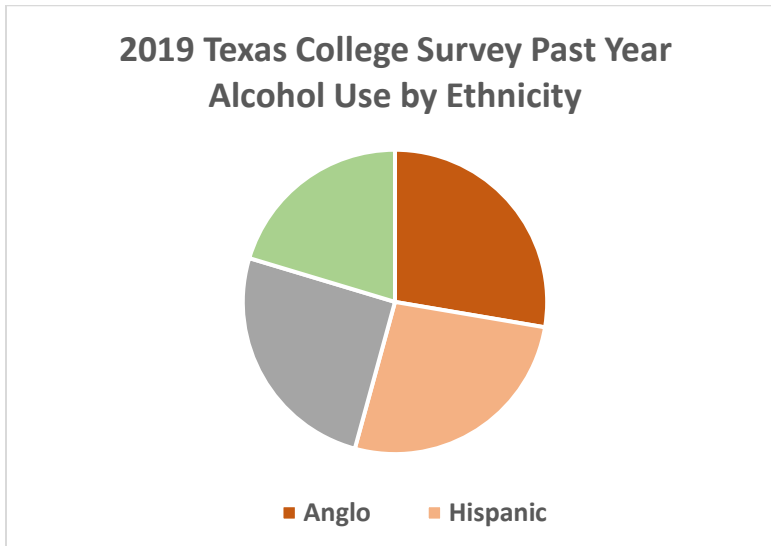
Alcohol is reported as the most consumed substance among college students. The following charts includes information on alcohol use in the past year.



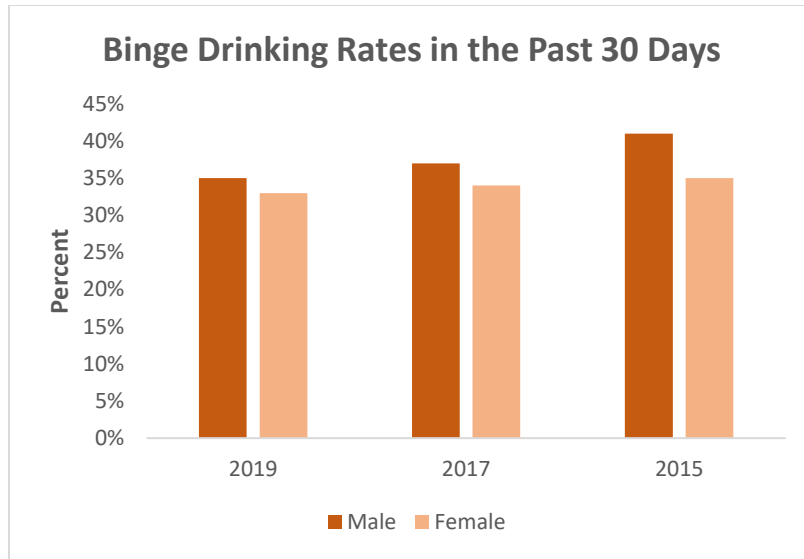
Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019.



Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019.



Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019

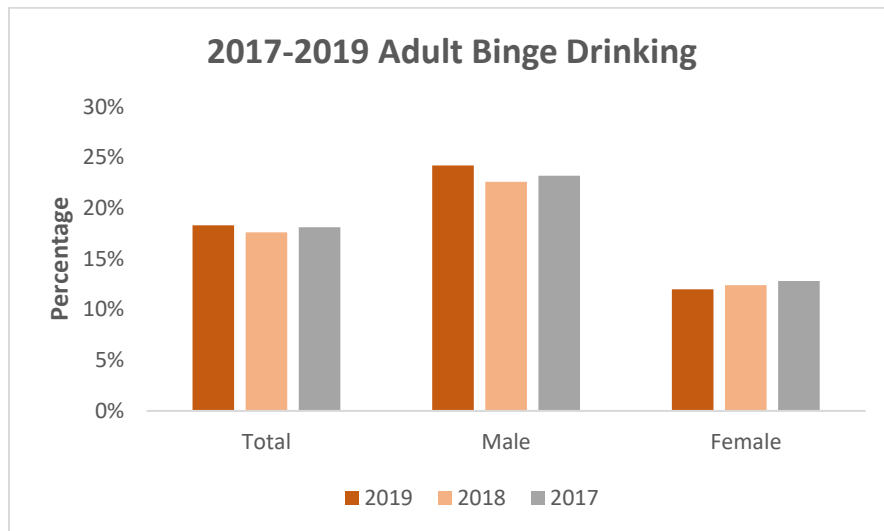


Source: Texas A&M University Public Policy Research Institute, Texas College Survey, 2019

Adult Substance Use

Adult binge drinking rates

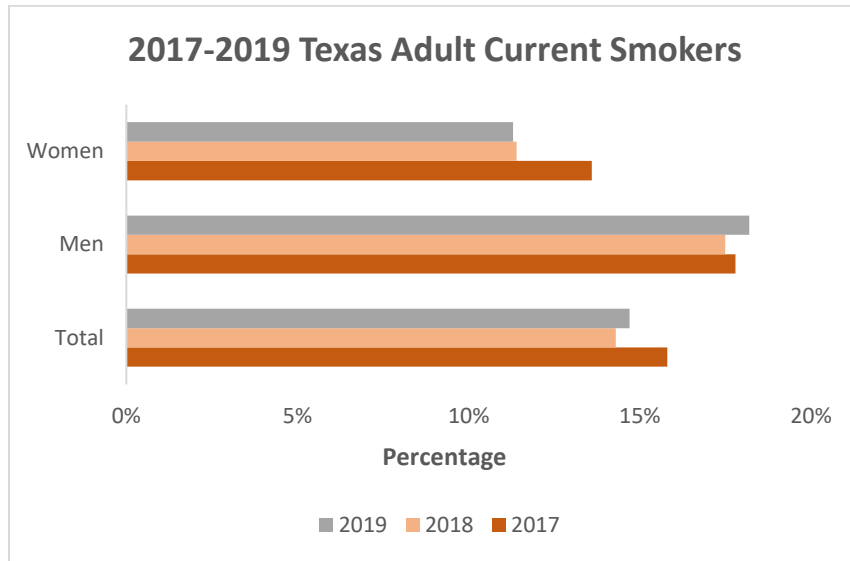
The NIAAA standard definition of binge drinking is drinking behaviors that raise an individual’s Blood Alcohol Concentration (BAC) up to or above the level of .08gm%, which is typically five or more drinks for men and four or more drinks for women in a two-hour time span. At-risk or heavy drinking is defined as more than four drinks a day or 14 drinks per week for men and more than three drinks a day or seven drinks per week for women. “Benders” are considered two or more days of sustained heavy drinking. The chart below shows Adult Binge drinking rates in Texas between 2017 to 2019.



Source: Centers for Disease Control, National Center for Chronic Disease and Health Promotion, BRFSS

Adult smoking rates

Smoking causes adverse health impacts including heart disease, stroke, respiratory diseases, diabetes, and multiple forms of cancer. More than 16 million Americans live with a disease caused by smoking.³⁵ Secondhand smoke causes an estimated 41,000 deaths each year. Populations identified as having a higher prevalence for smoking include adults with disabilities, adults with behavioral health issues, LGBTQIA+, 25+ year old’s who did graduate high school, and adults with an annual income less than \$25,000. The chart below shows current smokers 2017- 2019.



Source: Centers for Disease Control, National Center for Chronic Disease and Health Promotion, BRFSS

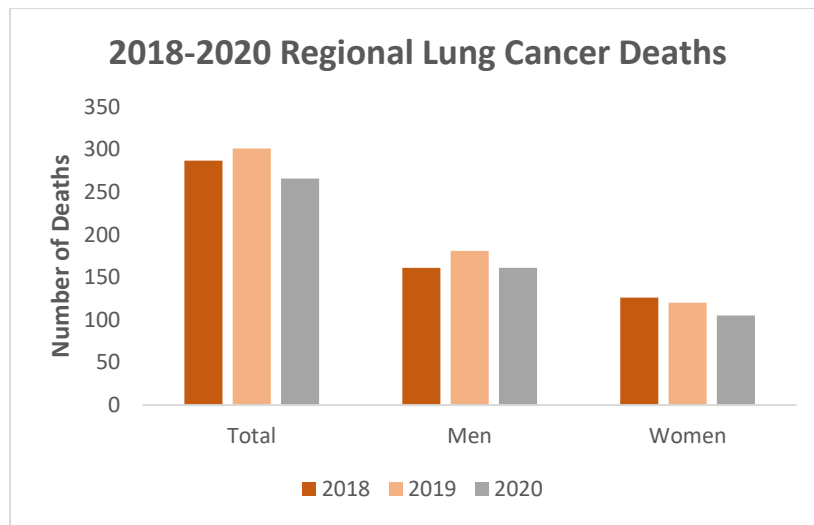
³⁵ Americas Health Rankings, 2020 Annual Texas Report. <https://americashealthrankings.org/learn/reports/2020-annual-report> Accessed August 13, 2021.

Public Health/Safety Concerns

Detrimental effects of consequential behavior may have lifelong consequences on families, schools, and communities. When risk factors outweigh protective factors, the consequences can be abrupt with long-term impacts. There have been more deaths, illness, and disabilities from substance misuse than from any other preventable health condition. One in four deaths are attributable to alcohol, tobacco, and illicit or prescription drug use.

Lung Cancer Deaths

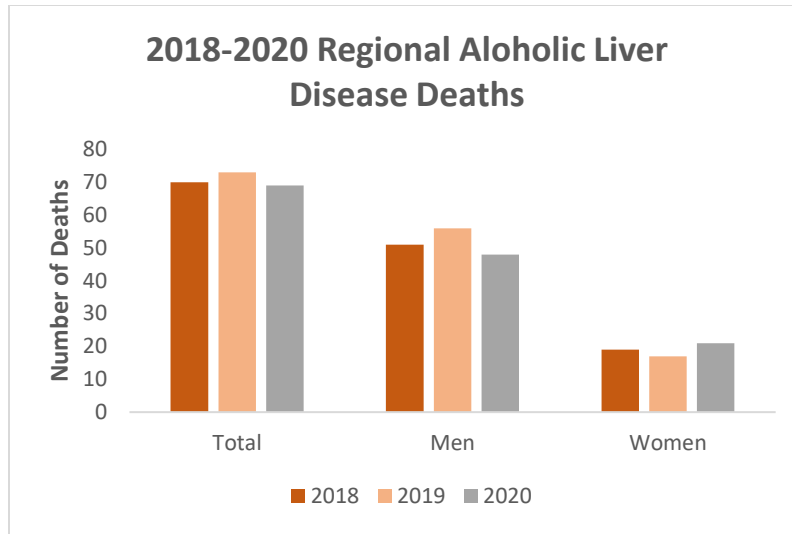
Although there was an increase in deaths in Region 2 between 2018 and 2019, 2020 has seen a decrease in lung cancer deaths. The American Cancer Society estimates approximately 131,880 lung cancer deaths in the U.S. in 2021. 69,410 men, and 62,470 women respectively. The average age of diagnosis is 70, and lung cancer makes up almost 25% of all cancer deaths. The chart below shows Regional Lung Cancer deaths in 2017- 2019.



Source: Texas Department of State Health Services, Center for Health Statistics

Alcoholic Liver Disease Deaths

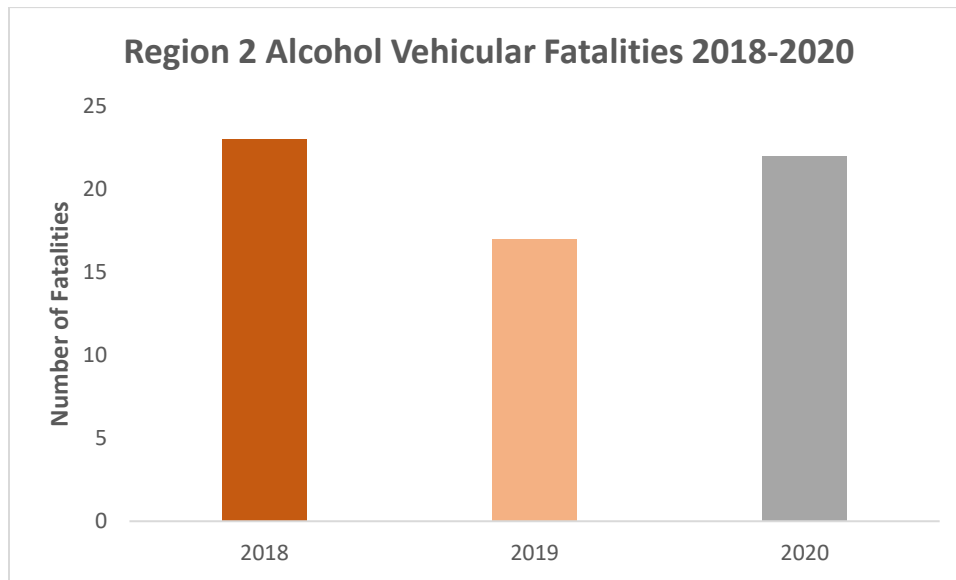
People with an alcohol use disorder (AUD) are at a high risk of developing liver disease, heart disease, depression, stroke, as well as cancer of the esophagus, and larynx due to alcohol consumption. In 2019 the CDC reported 24,110 deaths from alcoholic liver disease. The chart below shows Regional alcoholic liver disease deaths in 2018- 2020.



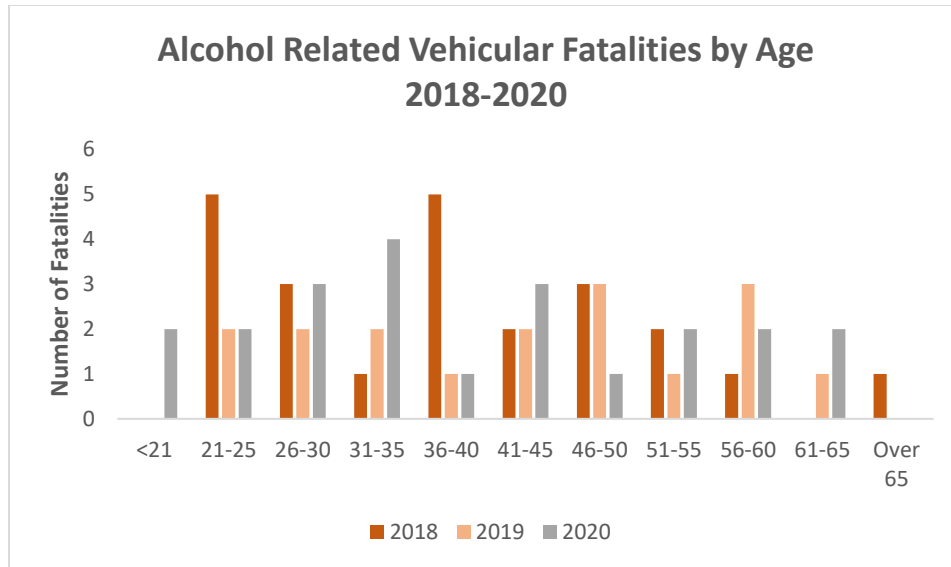
Source: Texas Department of State Health Services, Center for Health Statistics

Alcohol related vehicular fatalities

Approximately one in three traffic deaths in the U.S. involves a drunk driver. Dedicated efforts have resulted in reduced rates of alcohol-involved fatalities in recent years. The CDC outlines strategies to reduce drinking and driving, which would in turn reduce alcohol related vehicular fatalities. The following chart shows the total alcohol vehicular fatalities and vehicular fatalities by age in Region 2. *County level totals of alcohol related vehicular fatalities may be found in Appendix B Table 78.*



Source: Texas Department of Transportation, alcohol related fatalities 2018 – 2020.



Source: Texas Department of Transportation, alcohol related fatalities 2018 – 2020.

Overdose Deaths

The CDC National Center for Health Statistics compiles data on alcohol and drug induced deaths. Some data is suppressed when data meets the criteria for confidentiality. The crude rate per 100k for combined deaths in Region 2 for the years 1999-2019 is 22.8, and the crude rate for all of Texas is 16.2 for the same time period. Alcohol and drug induced deaths for the period of 1999-2019 are higher than the state rate. **Alcohol induced deaths per 100k for Region 2 is 10.9, the state is 6.6. Drug induced deaths 100k for Region 2 is 12.2, compared to the state at 9.6.**

The National Institute on Drug Abuse Advancing Addiction Science reports on overdoses deaths as either Intentional or Unintentional. The death certificate records whether the overdose was purposely self-inflicted, or accidental.³⁶ *County totals for Alcohol Induced Deaths, Drug Induced Deaths, and Combined Deaths may be found in Appendix B Tables 79-81.*

Suicide Rates

There are many risk and protective factors regarding suicide. There is a combination of individual, relationship, and community, and societal factors that contribute to a person's risk for suicide. Although less studies have been done on protective factors, identifying, and understanding protective factors are equally important.³⁷ Suicide rates in the U.S. have increased approximately 33% from 1999 to 2019. Suicide is the 10th leading cause of death in the U.S, the 2nd leading cause of death among persons 10 – 34, the fourth leading cause of death of persons ages 34-54, and the fifth leading cause of death among persons ages 45-54. Risk factors include family history of suicide, child maltreatment, previous suicide attempts, isolation, feeling of hopelessness, barriers to accessing mental health treatment, and unwillingness to seek help due to the stigma attached to mental and substance use disorder help. Mental

³⁶ National Institute on Drug Abuse, Advancing Addiction Science. Intentional vs. Unintentional Overdose Deaths. Accessed April 14, 2021.

³⁷ Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 <https://wonder.cdc.gov/uce-icd10.html> Accessed August 16, 2021.

health disorders and substance use disorders are a significant risk factor for suicide. Individuals at a higher risk of death by suicide are:

- Males are 3.7 times more likely to die by suicide than females.
- Older adults
- Veterans have a 1.5 times higher rate than non-veterans
- Individuals living in rural areas compared to urban areas
- Persons in the LGBTQIA+ community.

Protective factors include effective clinical care for mental, and substance use disorders, family and community support, skills in problem solving, conflict resolution, nonviolent ways of handling disputes, as well as support for ongoing medical and mental health.

There are strategies to help reduce suicide, these include:

- Emergency room screening
- Safety planning
- Behavioral therapy
- Reducing access to lethal means; firearms, medications, and alcohol
- Utilizing Suicide Prevention Resource Center

County level suicides for 1999-2018 may be found in Appendix B Table 82, not all counties are represented due to lack of available data.

Emerging Trends

Vaping

E-Cigarettes or Vaping continues to be an emerging trend. E-Cigarettes are sometimes called “e-cigs,” “Vapes,” “e-hookahs,” “vape pens,” and “electronic nicotine delivery systems (ENDS).” Some e-cigarettes look like regular cigarettes, cigars, or pipes, while others look like USB flash drives, pens, and other everyday items.³⁸ Juuls are battery operated devices “designed to deliver nicotine with flavorings and other chemicals” in vapor instead of smoke. E-Cigarettes are marketed to the general public as a safer alternative to smoking, yet little is known about the actual health risks associated with using these devices on a regular basis. Not only are there unknown health effects but using these devices may accustom youth to initiate use of tobacco or other nicotine products at an earlier age.

According to the Texas Department of State Health Services (DSHS), as of February 2020, there has been 250 cases of severe lung disease associated with vaping, including four deaths. The patients range in age from 13-75 years old, with a median age of 22. Three-quarters of these reported cases are male, and nine in ten of these cases report vaping THC or marijuana, possibly in combination with other substances. Most of these cases required hospitalization with many requiring intensive care.

Legalization of CBD oil:

In April 2019 CBD was removed as a Schedule 1 controlled substance following the 2018 Hemp Farming bill. House Bill 1325 was signed in June 2019 which establishes regulations for hemp production, cultivation, and testing. The Texas Compassionate Use Act legalizes CBD with .5% THC or less for patients with certain illnesses. The illnesses included: Autism, ALC or Lou Gehrig’s disease, incurable neurodegenerative disorders, intractable epilepsy, spasticity, Multiple Sclerosis, seizure disorders, or terminal cancer. Patients who qualify may apply for a medical CBD card. Possession of CBD is legal in Texas if it follows the limitations of .3% THC threshold.

Local Covid-19 Situation



Source: Texas Health and Human Services, Texas COVID-19 Data

COVID-19 is a global pandemic. A pandemic is a disease that is classified as a global disease outbreak. This differs from an outbreak or epidemic as it has wide geographical, often worldwide affects.

³⁸ Center for Disease Control. Accessed July 27, 2020. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm

Pandemics infect a greater number of people than an epidemic and, is also often caused by a new virus or strain of virus.

COVID-19 Epidemiologists work with other scientists about new infectious diseases once discovered. Scientists work to find out who has it, why they have it, and what the CDC can do about it. Since the beginning of COVID-19 the scientists at the CDC have been working to learn all they can about COVID and it's emerging variants.

Texas Department of State Health Services recommends the following actions to prevent the spread of COVID-19:

Actions to prevent the spread of COVID-19	
Wash hands for 20 seconds	Use hand sanitizer when soap and water is unavailable
Wear a cloth face covering in public and large gatherings	Cover coughs and sneezes
Avoid touching eyes, nose, and mouth	Disinfect surfaces
Stay six (6) feet away from others	Avoid close contact with people who are sick

The CDC also provides information on taking care of mental health concerns during a pandemic. The COVID-19 pandemic can be very stressful for many people. Both adults and children experience fear and anxiety. Isolation can increase feelings of loneliness, so there are recommendations to cope with stress in a healthy way.

COVID-19 has changed the way many people work: some are working at home, in the office, a combination of both, or looking for a new career. These changes can cause feelings of stress, burnout, and anxiety. Learning how to cope with our emotions during this pandemic increases our well-being at home, at work, and in our communities. The CDC recommends learning to recognize the signs of stress and suggests tips for building resilience and managing job related stress.

Recognizing the signs of stress	
Feelings of irritation, anger, uncertainty, anxiety	Concern about the risk of being exposed to the virus
Feeling tired, overwhelmed, sad, or depressed	Managing a different workload
Trouble sleeping, or concentrating	Uncertainty about the future of your employment
Lack of motivation	Learning new communication tools, technical difficulties

Building resilience and managing job stress	
Identify things that cause stress	Take breaks to stretch, and check in with colleagues, family, and friends.
Open communication with employer	Spend time outdoors
Ask about access to mental health resources	If working from home, set regular hours
Develop daily routines	Practice mindfulness techniques

Behavior changes in your child	
Excessive worry or sadness	Use of alcohol, tobacco, or other drugs
Poor school performance	Difficulties concentrating
Unhealthy eating or sleeping	Unexplained headaches
Irritability	Excessive crying

Ways to support your child	
Age-appropriate conversations about COVID	Limit exposure to news and social media
Reassure your child of their safety	Keep regular routines whenever possible
Be a role model, practice self-care	Connect with family and friends
Encourage your child to practice self-care	Spend time in meaningful activities

Region 2 reported its first COVID-19 positive case on March 20, 2020, and as of August 16, 2021, Region 2 has reported a total of **33,216 positive cases** of COVID-19. These numbers do not include probable cases. Region 2 has also reported a total of **1,735 deaths**. *County level totals for positive cases, deaths, and vaccinations may be found in Appendix B Table 83.*



Source: *Tips for Managing Mental Health during COVID-19, TOC*

Region in Focus

Prevention Resources and Capacities

Community Coalitions

Communities have a unique opportunity to provide support services for their residents. Protective factors within the community may include coalitions, policy development or change, treatment providers, social services, law enforcement capacity. Communities may offer support by providing healthy youth activities and prevention through religious communities. Each of these areas serve as a protective factor and has their own roles and responsibilities within the communities they serve.

The Taylor Alliance for Prevention (TAP) is a Community Coalition Partnership group funded by DSHS. The group works within Taylor County to reduce and prevent youth and college aged substance use and misuse. They also work to reduce underage access to alcohol, marijuana, tobacco and nicotine, and prescription or other illicit drugs through various strategic efforts such as using media advertisements, providing health education, and working with law enforcement. TAP provides the opportunity for any citizen to become a member of the coalition and support prevention efforts throughout the community.

The West Texas Homeless Network (WTHN) is comprised of shelter providers, mental health professionals, substance misuse prevention professionals, treatment facility professionals, job corps representatives and social service representatives who collaborate to find solutions for homelessness within Taylor County and surrounding areas. The WTHN also attends the Basic Needs Network meetings and receives quarterly reports on the work being done within the area. The WTHN is funded through the Texas Department of Housing and Community Affairs and Texas Department of Mental Health and Mental Retardation. Currently, the WTHN services Taylor County in Texas.

Basic Needs Network of West Central Texas (BNN) is a multifaceted group consisting of social services agencies across nineteen counties within the area. The group is facilitated through Texas 211 A Call for Help and meets on a quarterly basis. Its purpose is to collaborate with as many organizations as possible in order to better meet the needs of those living within the area. The BNN serves clients by providing food, clothing, shelter, and paying bills. This group is only a small picture of the assistance and willingness of people within the area to assist with client needs by the provision of services.

Drive Safe Coalition is a valuable group facilitated through the Texas Department of Transportation. Their mission is “To create a partnership to raise public awareness and improve traffic safety throughout the communities”. This group is committed to issues such as impaired and distracted driving, seat belt usage, child passenger safety, motorcycle safety, teen drivers, underage drinking, pedestrian, and bicycle and school bus safety in ten counties within the region. This group has been an active partner with the PRC and other local coalitions in the area when opportunities arise for public awareness.

The Big Country Reentry Coalition facilitates and supports the successful re-entry of formerly incarcerated individuals to the community. They work in collaboration with local resource providers, community and faith-based organizations, and government entities to assist with education, treatment, mental health, employment, mentorship, and housing. They aim to foster an increase in public safety through the reduction of recidivism and to improve the lives of the formerly incarcerated and their communities.

Other Coalitions

Community Resource Coordination Groups (CRCG) are local interagency groups comprised of public and private agencies. These groups are mandated by the state and funded through the Department of State Health Services. Their purpose is to develop a service plan for families or individual's needing collaboration between social services. Available to all Texans, CRCG's consist of representatives from commuters and caregivers, the Texas Health and Human Services Commission, the Texas Department of Aging and Disability Services, the Texas Department of Assistive and Rehabilitative Services, the Texas Department of Family and Protective Services, the Texas Department of Criminal Justice, the Texas Correctional Office on Offender with medical or mental impairments, the Texas Department of Housing and Community Affairs, the Texas Education Agency, the Texas Juvenile Probation Commission, the Texas Workforce Commission, the Texas youth Commission, and Private Child and Adult Serving Providers. All representatives and agencies cooperate and coordinate resources to provide services to community members in need.

School Health Advisory Councils (SHAC), A School Health Advisory Council is a group appointed by the school district to serve at a district level. Members of the SHAC come from different areas of the community and within the specific school district. Most members are required to be parents who are not employed by the district. Texas Education Code, Title 2, Chapter 28, requires a SHAC in every school district, that meets at least four times per year. SHAC's play an essential role in strengthening the connection between health and learning by assisting parents and the community to reinforce the knowledge and skills children need to maintain a healthy lifestyle.

Community Programs and Services (YMCA, Goodwill, etc.)

Youth Ahead is a program through Goodwill-West Texas facilities. This program targets at-risk youth in local communities by providing curriculum in partnership with local schools and organizations to provide employability. The goal is to prepare youth to enter the workforce. The program is divided into 5 modules: 1 – communication, 2-positive attitudes, 3-teamwork, 4-problem solving, and 5-professionalism.

Goodlife is a retail operations employment program within Goodwill which began in 1983. Employees receive on-the-job training and supportive services to ensure their success in the workplace.

Work Adjustment Training (WAT) partners Goodwill with the Texas Workforce Solutions – Vocational Rehabilitation Services to provide on-the-job training for people with disabilities. This program is by referral only.

Project Phoenix – YMCA, formally known as ISP, is a 5-phase mentoring program for at-risk youth ages 7-17. This program is partially funded by the Taylor County Probation Office, City of Abilene, and Abilene United Way. The program is free of charge to YMCA members and their families. This program operates during those high-risk hours and is a behavior modification program. The program is designed to teach accountability, is based on close monitoring and mentoring, is focused on working with both the participants and their families. Anger management is an essential tool that is taught, along with community service projects focusing on implementing a sense of community and helping others. Transportation is provided for AISD and WISD students.

SUD Treatment Providers (Treatment/Intervention providers)

The Abilene Recovery Council has been an asset to treatment and interventions in the Abilene for over 55 years and has been an award-winning organization for over 20 years. The Abilene Recovery Council is a non-profit agency offering many programs to assist those with substance use and misuse related issues. The Abilene Recovery Council houses programs such as Drug Offender Education, the Outreach, Screening, Assessment and Referral (OSAR) program, Peer Recovery, Parenting Awareness and Drug Risk Education (PADRE) program, and the Prevention Resource Center (PRC). Each program serves its own purpose for intervention, treatment, and prevention services for the region.

The Drug Offender Education, Alcohol Awareness and Texas Youth Tobacco Awareness programs all work to educate certain populations regarding alcohol and drug use and abuse within the big country we who have legal obligations to attend. Attendees for these classes are primarily mandated through the courts to fulfill a legal consequence of certain behaviors conducted.

The Outreach Screening Assessment and Referral (OSAR) program provides assistance for individuals' and families with dependence issues free of charge. Participants are self-referred or referred by other social services within the area. Counselors in this program screen and assess participants who need recovery services on a short term or long-term basis. The counselor determines the most applicable place for the client to receive the treatment for rehabilitation; these could in patient or outpatient services.

PADRE – Parenting Awareness and Drug Risk Education will work with parents and expectant, male and females, along with their children 0-6 years of age. PADRE will serve families in all 30 counties included in Region 2. There are two offices: Abilene and Wichita Falls, and once a week participants will be seen in Sweetwater at Rolling Plains Memorial Hospital. Rural communities will primarily be served using virtual platforms or phone services, with in person meetings once a month. Participants will be enrolled for approximately 12 weeks and then referred out if needed, except in extreme situations. PADRE will provide substance use counseling, case management, community referrals, parenting education, Family Group, psychoeducational sessions, relapse prevention, rapid HIV testing, pregnancy testing, street outreach, educational community presentations, as well as screenings and assessments. PADRE will also advocate for their participants by making court appearance on their behalf, working with DFPS caseworker or probation officers, and advocating for any community resources they are or could be utilizing.

Oceans Behavioral Hospital in Abilene is a behavioral health facility in the area committed to utilizing a comprehensive approach in treating their patients. Their patients include helping adolescents, adults and seniors manage anxiety, depression, and other mental health issues. They offer inpatient services, family, and caregiver therapy, education in behavioral challenges, and tools for those in care of the patient. The agency has psychiatrists and medical physicians to ensure patients health and healing while being served.

The Recovery Oriented Systems of Care Coalition (ROSC), funded through the Department of State Health Services, works to build community support for a person's recovery care. Region 2 has established groups in Abilene and Wichita Falls. Their goals are to understand every person is unique with their own specific needs in recovery, and recovery is a reality where everyone is invited to participate. ROSC strives to identify and build upon strengths in order to make our community a healthy place to live, recover, and improve their quality of life.

Healthcare Providers

Name	Address	Facility - County Location	Contact Information
Community Connections of Central Texas	408 Mulberry St. Brownwood, TX 76801 100 E. Live Oak St. Coleman, TX 76834 1009 S. Austin St. Comanche, TX 76442 301 Pogue Ave. Eastland, TX 76448	Brownwood, Coleman, Comanche, Eastland	325-643-3363 www.cflr.us
Graham Regional Hospital	1301 Montgomery Rd. Graham, TX 76450	Young	940-549-3400 www.grahamrmc.com
Helen Farabee Centers	500 Broad St. Wichita Falls, TX 76301 516 Denver St. Wichita Falls, TX 76307 510 King St. Quanah, TX 79252		www.helenfarabee.org
North Texas State Hospital	4730 College Dr. Vernon, TX 76385	Wilbarger	940-552-9901
Red River Hospital	1505 8 th St. Wichita Falls, TX 76301	Wichita	877-627-1134 www.redriverhospital.com
Rose Street Mental Health Care	1808 Rose St. Wichita Falls, TX 76301 1800 Rose St. Wichita Falls, TX 76301	Wichita	940-723-4488 www.rosestreet.org
Serenity Foundation	1502 N. 2 nd St. Abilene, TX 79601	Taylor	325-673-6489 www.serenitytexas.com
Seymour Hospital	511 E. Ingram Seymour, TX 76380	Baylor	940-889-4259 www.seymourhospital.com

Shades of Hope	402 Mulberry St. Buffalo Gap, TX 79508	Taylor	325-572-3843 www.shadesofhope.com
West Texas Centers	505 Chestnut St. Colorado City, TX 79512 1200 Henderson St. Sweetwater, TX 79556 126 State St. Winters, TX 79567 1300 26 th St. Snyder, TX 79549	Mitchell Nolan Runnels Scurry	325-728-3953 325-236-6619 325-754-5591 325-573-4947 www.wtcmhmr.org

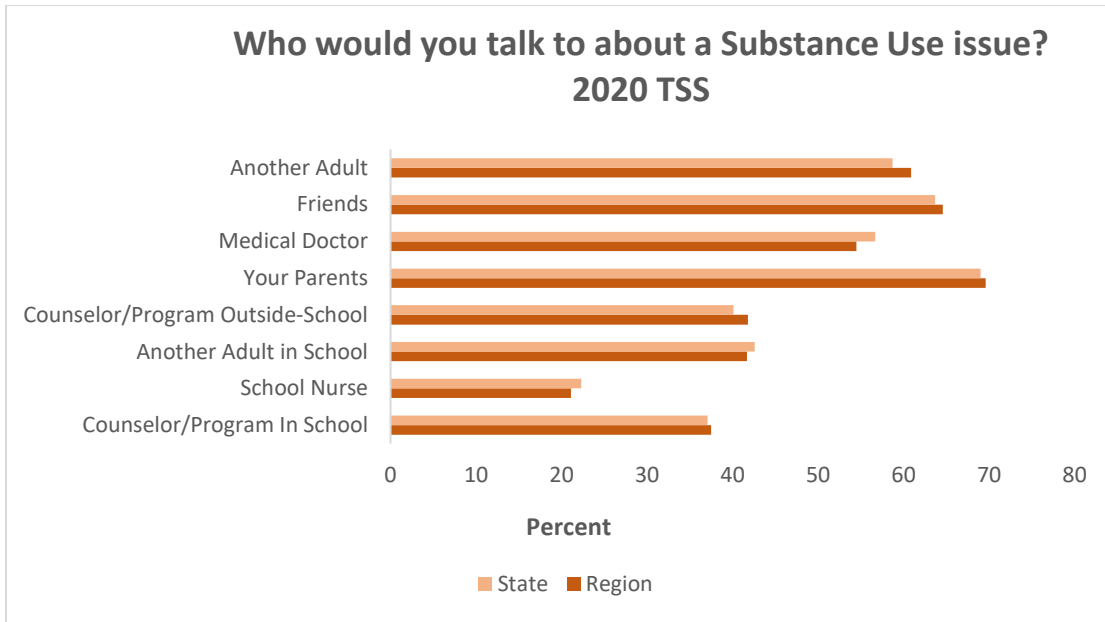
YP Programs

The Youth Prevention programs are offered throughout the state of Texas. These programs offer education to youth and empower them to make positive choices for their life. The programs utilize curriculum designed to teach students life skills in order to better strategize and handle life's difficult choices. For our region, the youth prevention program is offered in some schools but not to all schools across the reported area. Prevention Specialists work diligently to support our young people by offering them prevention education, life skills, and a unique atmosphere to discuss ways to handle difficult social situations which may or may not include drug and alcohol use. Youth Prevention programs are essential to providing positive education for life skills and drug-alcohol prevention throughout our reported area.

Students talking to parents about ATOD

Young people are curious about alcohol and drug use and what their parents think of drugs and alcohol. Maintaining an open communication line between parents, guardians, or trusted adults and young people allows for discussions regarding substance use. These conversations aren't always comfortable for anyone involved; however, the protective factors established make the awkwardness worthwhile.

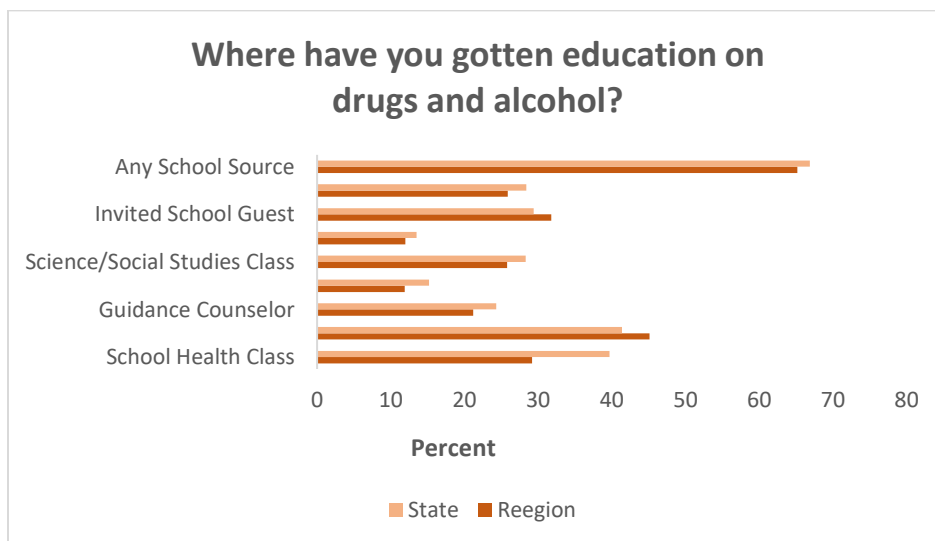
The 2020 Texas School Survey asked students "If you had a drug or alcohol problem and needed help, who would you go to?" 37% said they would go to a counselor or program in school. 21% reported they would talk to a school nurse. 41% said they would talk to another adult in their school. 41% would talk to a counselor outside of school. 70% reported they would speak to their parents. 54% would speak to their doctor. 64% said they would talk to their friends, and 61% said they would talk to another adult for help. **Students' 7th – 12th grade in Region 2 reported the highest percentage of adults they would go to with a substance use issue was their parents.** This data identifies the trust youth have with their parents. It also strengthens the importance of educating parents about how to speak with their children regarding substance use issues.



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020.

Students receiving education about ATOD

Students in Region 2 are provided alcohol and drug education through certain schools who have adopted new curriculum provided by their districts as well as through the schools who host the Youth Prevention programs. These programs are designed to communicate a positive message regarding healthy behaviors while educating youth on the harmful effects of alcohol and drugs. However, many schools within our region do not offer prevention education regarding substances to their students. The following charts report the data for the total percentage of all students in Region 2 compared to the total percentage of Texas students’ response to the question asked below.



Source: Texas A&M Public Policy Research Institute, Texas School Survey, 2020.

Life skills learned in YP Programs

Prevention education programs are offered in a few schools throughout Region 2. In this ten-week curriculum students learn how to set goals for themselves both short and long term. They learn social skills like learning how to make friends and positive peer groups. Good decision-making is an important aspect of being successful in life. The curriculum also teaches students how to identify and manage their emotions. Most programs teach students 2nd – 12th grade. Students will experience an array of emotions through the school year, and this program teaches them positive techniques to handle these emotions. Communication is also taught to students so they can learn to communicate effectively to people in their daily lives.

Overview of Community Readiness

There are many aspects that contribute to community readiness and can often vary by community. It is important to use the Strategic Prevention Framework (SPF) to determine a community's needs and how best to serve that community. Abilene has developed ThriveABI to determine the key focus areas that Abilene needs. Since Abilene is part of Taylor County, some of these focus areas spill over to the rural surrounding areas. It's important we keep in mind the cultural competence of the communities we serve, helping to enrich and better serve them.

Gaps in Services

There are tremendous services available for children, adolescents, and adults in our communities; however, rural communities are still in need of services that are geographically more accessible.

Substance misuse treatment for youth: There are preventive strategies and programs being offered, but there is a lack of long-term treatment facilities particularly for youth in our region, especially for the youth in our rural communities. Alcohol, prescription drugs, and marijuana continue to be consumed substances, more than other substances, by both high school and by college aged students.

Opioids: Although opioids are a necessary and effective treatment for chronic pain, the misuse of opioids continue to be issue in our region. More education and preventive measures need to be in place to prevent prescription misuse by both the individual the prescription is issued for, and the individuals' prescriptions are not prescribed.

Family services: We are seeing an increase in domestic and family violence due to COVID-19. The family court calendar is filled with cases of child neglect and abuse cases, requiring more attention to the safety of our children and our families. Parenting classes and anger management are essential to reduction in these cases. Emergency shelters are non-existent in many of our rural communities, not allowing families a way to deescalate tension or have a safe place to stay when necessary.

Transportation to treatment: Region 2 is primarily described as a rural area. Services to treatment and general welfare assistance agencies are not available in outlying areas. Participants referred to drug and alcohol treatment facilities or other social service agencies are generally located in urbanized communities such as Abilene, Brownwood, and Wichita Falls. Social services agencies do their best to provide necessary services in rural communities; however, most agencies are unable to provide transportation to those they serve.

Waiting lists for state funded agencies: Mental health and substance misuse treatment waiting lists generated by the Texas Department of State Health Services show data on both adult and child/adolescent waiting lists for substance use treatment. COVID has also made it difficult to receive in patient treatment safely.

Homeless shelters for adults and youth: There are shelters for homeless adults and adults with children, but their capacity is very limited. There are no shelters for youth who have no permanent home that were not removed by Child Protective Services. These youth live with friends or other relatives or on the streets, and many of these youth are a part of the LGBTQIA+ community and at high risk of substance use disorders, and mental health issues.

Gaps in Data

Certain indicator information is still needed in assessing the area for potential risk. The following information describes the gaps in data desired for purposes of this report.

Hospital discharges for youth substance overdose/poisoning

Data on hospital discharges for overdose/poisoning is currently not available. This data is vital in recognizing the need of the youth in communities. This information would help knowledge to find areas where gaps in service are and help to build programs and services that would increase the protective factors for these youth.

Adolescent AOD-related ER Admits

The Texas Poison Control Network follows exposures to substances which may be harmful to an individual's health. Data for this information is currently unavailable. The types of data that has been collected is for intentional abuse. Intentional Abuse is defined as "an exposure resulting from the intentional improper or incorrect use of a substance where the patient was likely attempting to gain a high, euphoric effect of some other psychotropic effect, including recreational use of a substance for any effect." Exposures are generally reported to a hospital when in route to an emergency room.

Rural area stakeholder input: The PRC values the input of all rural stakeholders. Although stakeholder meetings were done in rural communities with law enforcement, school administrators, and church organizations greater efforts are needed to gain insight from the many rural communities that make up Region 2. The Data Coordinator was unable to meet with each of our communities as, COVID-19 halted all in-person meetings beginning March 2020.

COVID-19: Due to the global pandemic of COVID-19, some data was delayed being reported or being released. The delay in the data's release or collection can increase the difficulty of providing services to the communities served in Region 2.

Texas School Survey: During the 2019-2020 school year, schools across Texas were closed from early March through the end of the school year due to the COVID-19 pandemic. Due to this sudden and unexpected closure, many schools that had registered for the survey were unable to complete it. This reduction in participation is directly correlated to COVID-19.

Moving Forward

Again, during a time of a global pandemic, we need to be creative in our efforts to share the information contained in this document and to reach our communities to learn and aid in their needs. This is a time when we all need to continue to be flexible and resilient in our commitment to our communities and the residents of those communities.

We will continue to provide data and information needed to our communities and stakeholders to assist them in meeting the needs of their communities.

Putting It all Together

What has the RNA identified as the region's most pressing substance use behaviors that need to be addressed and why?

Counterfeit drugs are on the rise. Law enforcement agencies don't learn about these drugs until there is an overdose. Overdoses and overdose deaths have been the result of the use of these drugs.

Prescription misuse by both the prescribed individual and individuals not prescribed the medication is a continued issue within our region.

Alcohol sales increased during a time of COVID. Laws now allowing alcohol-to-go sales to continue can increase access to alcohol, overserving, and underage drinking.

What is your analysis of the underlying conditions (Social Determinants of Health) that are contributing to substance use and misuse in your region?

There are many factors contributing to the substance use and misuse in Region 2. There has been an increase in illegal fentanyl within the region, increasing counterfeit drugs. One DEA drug take back day was cancelled due to COVID, decreasing proper disposal of medication, and increasing the access and potential misuse of prescriptions.

Increased retail access to alcohol can lead to increases in vehicular fatalities, alcohol sales to minors, and alcohol related deaths.

Mental health issues are prevalent as COVID continues to affect families physically, emotionally, and economically, which may lead to substance use, misuse, and abuse. Youth seeking treatment for substance use disorders and mental health needs continue to rise. Marijuana, Tranquilizers, Sedatives and Hallucinogens are the most substances youth seek treatment for.

What behavioral health disparities has the RNA identified in the region?

Region 2 consists of a majority of rural communities that do not have access to behavioral health care. Residents must travel a great distance to receive in person behavioral health care. Families also struggle to meet the behavioral needs of their children. Additionally, treatment facilities for both our adults and youth are needed. Continued education for school districts, day care centers, and families to identify and care for children's behavioral health needs, along with services for the entire family.

Works Cited

1. Porta, Miquel S. *A Dictionary of Epidemiology*. Oxford: Oxford University Press, 2016, p. 95.
2. Adapted from: D'Amico, EJ, Osilla, KC. *Prevention and intervention in the school setting*. Edited by KJ Sher. Oxford: Oxford University Press, 2016. Vol. 2 of *The Oxford Handbook of Substance Use and Substance Use Disorders*, p. 678.
3. United States Postal Service Zip Code Database <https://www.unitedstateszipcodes.org/zip-code-database/> Accessed June 15, 2021
4. Texas Demographic Center, Texas Population Estimates Program <https://demographics.texas.gov/Data/TPEPP/Projections>
5. U. S. Census Bureau. 2014-2019 American Community Survey, 5-Year estimates. <https://data.census.gov/cedsci/> Accessed May 12, 2021
6. U.S. Census Bureau. American Community Survey, Texas Income by County <https://data.census.gov> Accessed June 9, 2021
7. United States Department of Labor. Local Area Unemployment Statistics, <https://bls.gov/lau/#tables> Accessed February 9, 2021.
8. Temporary Assistance for Needy Families. Texas Health and Human Services Commission. 2018-2020, <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/temporary-assistance-needy-families-tanf-statistics> Accessed April 29, 2021.
9. Supplemental Nutritional Assistance Program (SNAP) Statistics. Texas Health and Human Services Commission, <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/supplemental-nutritional-assistance-program-snap-statistics> Accessed May 12, 2021.
10. U.S. Department of Education, National Center for Education Statistics: Common Core Data. ELSI – Elementary and Secondary Information System, <https://nces.ed.gov/ccd/elsi/tableGenerator.aspx> Accessed May 10, 2021
11. The Texas Education Agency, Student Program and Special Populations Report, <https://rptsrv1.tea.texas.gov/adhocrpt/adspr.html> Accessed February 9, 2021.
12. “The State of Juvenile Probation Activity in Texas Report.” Texas Juvenile Justice Department, August 2020, www.tjjd.texas.gov/index.php/doc-library/category/334-state-of-juvenile-probation-activity Accessed March 18, 2021.
13. Texas Department of Public Safety. Liquor Law Arrests, 2018-2020, <https://txucr.nibrs.com/SRSReport/LiquorLawArresteeSummary> Accessed June 25, 2021.
14. Texas Department of Public Safety UCR Bureau Crime in Texas Online, Index Crime Report (2018,2019,2020) <https://txucr.nibrs.com/Report/IndexCrimesReport> . Accessed March 9, 2021
15. Hoffman SD. Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy. Washington, DC: The Urban Institute Press
16. Centers for Disease Control and Prevention, Mental Health Awareness, <https://cdc.gov/mentalhealth/index.htm>
17. Texas Department of Health and Human Services. Youth/Adults Receiving Mental Health Services. TX Medicaid BMMH and SUD Clients by County, SFY2008-2016 Accessed March 13, 2021.
18. American Academy of Child & Adolescent Psychiatry. (2016)
19. Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS) www.samhsa.gov/data/quick-statistics-results Accessed April 1, 2021.

20. Substance Abuse and Mental Health Services Administration. National Survey on Drug Use and Health. 2016. <https://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2016/NSDUH-DetTabs-2016.pdf>. Accessed May 30, 2018.
21. Substance Abuse and Mental Health Services Administration. Substance use disorders. <https://www.samhsa.gov/disorders/substance-use>. Updated October 27, 2015. Accessed May 29, 2018.
22. Center for Disease Control and Prevention of the United States Public Health Service. Accessed July 28, 2021
23. License Information Texas Alcoholic Beverage Commission (TABC) <https://apps.tabc.texas.gov/publicinquiry/> Accessed May 28, 2021
24. Underage Drinking Laws. <https://tabc.texas.gov/texas-alcohol-laws-regulations/underage-drinking/> Accessed July 9, 2020.
25. Texas State Board of Pharmacy. Total dispensation data submitted to the PDMP by pharmacies located in Texas 2020, <https://pharmacy.texas.gov/resources.asp> Accessed 3/30/2021
26. Texas Education Agency, STAAR Resources. <https://tea.texas.gov/student-assessment/testing/staar/star-resources> Accessed June 28, 2021
27. State Attendance Policy. Attendance Works, Advancing Student Success by Reducing Chronic Absence. Accessed August 2020
28. Texas Department of State Health Services. 2001-20019 High School Youth Risk Behavior Survey Data. <https://healthdata.dshs.texas.gov/dashboard/surveys-and-profiles/youth-risk-behavior-survey#> Accessed April 12, 2021.
29. Texas School Survey. Texas A & M Public Policy Research Institute, 2020. <https://texasschoolsurvey.org/Report> Accessed April 28, 2021
30. CDC (2016) Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: YRBS
31. 2019 Texas Tobacco fact sheet, Accessed July 14, 2021.
32. The National Institute on Alcohol Abuse and Alcoholism, Underage Drinking facts, <https://niaaa.nih.gov/publications/brochures-and-fact-sheets/underage-drinking> Accessed June 18, 2021.
33. U.S. Food & Drug Administration, <https://fda.gov/tobacco-products/youth-and-tobacco/youth-tobacco-use-results-youth-tobacco-survey> Accessed July 27, 2021.
34. Texas College Survey, 2019 Official Report, <https://texascollegesurvey.org>
35. Americas Health Rankings, 2020 Annual Texas Report. <https://americashealthrankings.org/learn/reports/2020-annual-report> Accessed August 13, 2021.
36. National Institute on Drug Abuse, Advancing Addiction Science. Intentional vs. Unintentional Overdose Deaths. Accessed April 14, 2021
37. Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 <https://wonder.cdc.gov/uce-icd10.html> Accessed August 16, 2021.
38. Center for Disease Control. Accessed July 27, 2020. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm

Appendix A

Table 1. County total Population Density Ranked Order

Rank	Name	Population Density (mi2)	Population 2010	Land Area (mi2)	Projected 2020 Population
27	Wichita	209.5	131,500	627.8	133138
34	Taylor	143.6	131,506	915.6	139457
88	Brown	40.3	38,106	944.4	38923
127	Jones	21.8	20,202	928.6	19735
129	Montague	21.2	19,719	930.9	19199
133	Young	20.3	18,550	914.5	18712
134	Eastland	20.1	18,583	926.5	18205
139	Scurry	18.7	16,921	905.4	18368
145	Nolan	16.7	15,216	912	15642
151	Callahan	15.1	13,544	899.4	13456
152	Comanche	14.9	13,974	937.8	13075
156	Wilbarger	13.9	13,535	970.8	13038
165	Stephens	10.7	9,630	896.7	9570
166	Mitchell	10.3	9,403	911.1	9865
169	Archer	10	9,054	903.1	8344
170	Runnels	10	10,501	1,051.00	11009
171	Jack	9.9	9,044	910.7	8841
172	Clay	9.9	10,752	1,088.70	9787
186	Coleman	7	8,895	1,262.00	8478
192	Haskell	6.5	5,899	903.1	6197
195	Hardeman	6	4,139	695.1	3870
205	Fisher	4.4	3,974	898.9	3985
206	Knox	4.4	3,719	850.6	3937
208	Baylor	4.3	3,726	867.5	3624
215	Shackelford	3.7	3,378	914.3	3405
231	Foard	1.9	1,336	704.4	1240
233	Throckmorton	1.8	1,641	912.6	1519
234	Cottle	1.7	1,505	900.6	1510
235	Stonewall	1.6	1,490	916.3	1523
246	Kent	0.9	808	902.5	795
		96.3	550,250	27302.9	558447

Table 2. County Zip Codes

Zip	County	Primary cities	Acceptable cities
76351	Archer County	Archer City	
76366	Archer County	Holliday	
76370	Archer County	Megargel	
76379	Archer County	Scotland	
76389	Archer County	Windthorst	
76380	Baylor County	Seymour	Red Springs, Vera
76432	Brown County	Blanket	
76801	Brown County	Brownwood	
76802	Brown County	Early	Brownwood
76803	Brown County	Brownwood	
76804	Brown County	Brownwood	
76823	Brown County	Bangs	
76827	Brown County	Brookesmith	
76857	Brown County	May	
76890	Brown County	Zephyr	
76443	Callahan County	Cross Plains	
76469	Callahan County	Putnam	
79504	Callahan County	Baird	
79510	Callahan County	Clyde	
76228	Clay County	Bellevue	
76352	Clay County	Bluegrove	
76357	Clay County	Byers	
76365	Clay County	Henrietta	
76377	Clay County	Petrolia	
76828	Coleman County	Burkett	
76834	Coleman County	Coleman	
76845	Coleman County	Gouldbusk	
76873	Coleman County	Rockwood	
76878	Coleman County	Santa Anna	Whon
76882	Coleman County	Talpa	
76884	Coleman County	Valera	
76888	Coleman County	Voss	Leaday
79519	Coleman County	Goldsboro	
79538	Coleman County	Novice	
76442	Comanche County	Comanche	Hasse
76444	Comanche County	De Leon	
76452	Comanche County	Energy	
76455	Comanche County	Gustine	
76468	Comanche County	Proctor	

76474	Comanche County	Sidney	
79223	Cottle County	Cee Vee	
79248	Cottle County	Paducah	Dumont
76435	Eastland County	Carbon	
76437	Eastland County	Cisco	
76445	Eastland County	Desdemona	
76448	Eastland County	Eastland	
76454	Eastland County	Gorman	
76466	Eastland County	Olden	
76470	Eastland County	Ranger	
76471	Eastland County	Rising Star	
79534	Fisher County	Mc Caulley	
79543	Fisher County	Roby	
79546	Fisher County	Rotan	
79560	Fisher County	Sylvester	
79227	Foard County	Crowell	Truscott
79225	Hardeman County	Chillicothe	
79252	Hardeman County	Quanah	
76388	Haskell County	Weinert	
79521	Haskell County	Haskell	
79539	Haskell County	O Brien	
79544	Haskell County	Rochester	
79547	Haskell County	Rule	
79548	Haskell County	Rule	Sagerton
76427	Jack County	Bryson	
76458	Jack County	Jacksboro	
76459	Jack County	Jermyn	
76486	Jack County	Perrin	
79501	Jones County	Anson	
79503	Jones County	Avoca	
79520	Jones County	Hamlin	
79525	Jones County	Hawley	
79533	Jones County	Lueders	
79553	Jones County	Stamford	
79518	Kent County	Girard	
79528	Kent County	Jayton	
76363	Knox County	Goree	
76371	Knox County	Munday	
79505	Knox County	Benjamin	
79529	Knox County	Knox City	
79512	Mitchell County	Colorado City	
79532	Mitchell County	Loraine	
79565	Mitchell County	Westbrook	

76230	Montague County	Bowie	
76239	Montague County	Forestburg	
76251	Montague County	Montague	
76255	Montague County	Nocona	
76261	Montague County	Ringgold	
76265	Montague County	Saint Jo	
76270	Montague County	Sunset	
79506	Nolan County	Blackwell	
79535	Nolan County	Maryneal	
79537	Nolan County	Nolan	
79545	Nolan County	Roscoe	
79556	Nolan County	Sweetwater	
76821	Runnels County	Ballinger	
76861	Runnels County	Miles	
76865	Runnels County	Norton	
76875	Runnels County	Rowena	
79567	Runnels County	Winters	
79516	Scurry County	Dunn	
79517	Scurry County	Fluvanna	
79526	Scurry County	Hermleigh	
79527	Scurry County	Ira	
79549	Scurry County	Snyder	Dermott
79550	Scurry County	Snyder	
76430	Shackelford County	Albany	
76464	Shackelford County	Moran	
76424	Stephens County	Breckenridge	
76429	Stephens County	Caddo	
79502	Stonewall County	Aspermont	
79540	Stonewall County	Old Glory	
79508	Taylor County	Buffalo Gap	
79530	Taylor County	Lawn	
79536	Taylor County	Merkel	
79541	Taylor County	Ovalo	
79561	Taylor County	Trent	
79562	Taylor County	Tuscola	
79563	Taylor County	Tye	
79566	Taylor County	Wingate	
79601	Taylor County	Abilene	
79602	Taylor County	Abilene	
79603	Taylor County	Abilene	
79604	Taylor County	Abilene	
79605	Taylor County	Abilene	

79606	Taylor County	Abilene	
79607	Taylor County	Dyess Afb	Abilene
79608	Taylor County	Abilene	
79697	Taylor County	Abilene	
79698	Taylor County	Abilene	
79699	Taylor County	Abilene	
76483	Throckmorton County	Throckmorton	
76491	Throckmorton County	Woodson	
76301	Wichita County	Wichita Falls	
76302	Wichita County	Wichita Falls	
76305	Wichita County	Wichita Falls	Cashion Cmnty, Cashion Community, Dean, Jolly, Pleasant Valley, Pleasant Vly
76306	Wichita County	Wichita Falls	
76307	Wichita County	Wichita Falls	
76308	Wichita County	Wichita Falls	
76309	Wichita County	Wichita Falls	
76310	Wichita County	Wichita Falls	
76311	Wichita County	Sheppard Afb	
76354	Wichita County	Burkburnett	
76360	Wichita County	Electra	
76367	Wichita County	Iowa Park	
76369	Wichita County	Kamay	
76364	Wilbarger County	Harrold	
76373	Wilbarger County	Oklunion	
76384	Wilbarger County	Vernon	
76385	Wilbarger County	Vernon	
79247	Wilbarger County	Odell	
76372	Young County	Newcastle	Elbert
76374	Young County	Olney	
76450	Young County	Graham	
76460	Young County	Loving	
76481	Young County	South Bend	Eliasville

Table 3. County Total Population 2019-2021

County	2019 Total Population	2020 Total Population	2021 Total Population
Archer	8,393	8,344	8,303
Baylor	3,629	3,624	3,620
Brown	38,873	38,923	38,962
Callahan	13,454	13,456	13,465
Clay	9,885	9,787	9,693
Coleman	8,527	8,478	8,443
Comanche	13,173	13,075	12,980
Cottle	1,515	1,510	1,507
Eastland	18,261	18,205	18,149
Fisher	3,983	3,985	3,980
Foard	1,240	1,240	1,238
Hardeman	3,888	3,870	3,854
Haskell	6,150	6,197	6,237
Jack	8,845	8,841	8,830
Jones	19,766	19,735	19,702
Kent	792	795	798
Knox	3,912	3,937	3,960
Mitchell	9,802	9,865	9,895
Montague	19,247	19,199	19,154
Nolan	15,589	15,642	15,689
Runnels	10,948	11,009	11,072
Scurry	18,208	18,368	18,541
Shackelford	3,394	3,405	3,414
Stephens	9,573	9,570	9,570
Stonewall	1,519	1,523	1,524
Taylor	138,697	139,457	140,207
Throckmorton	1,528	1,519	1,513
Wichita	133,012	133,138	133,234
Wilbarger	13,085	13,038	12,973
Young	18,695	18,712	18,730
Region	557,583	558,447	559,237
Texas	29,193,268	29,677,668	30,168,926

Table 4. County Total Age Groups 2021

County	Age <18	Age 18-24	Age 25-44	Age 45-64	Age 65 - 95+
Archer	1,690	607	2,000	2,236	1,770
Baylor	818	269	767	868	898
Brown	8,380	3,079	9,335	9,446	8,722
Callahan	2,559	899	3,276	3,574	3,157
Clay	1,884	577	2,139	2,690	2,403
Coleman	1,946	715	1,721	1,904	2,157
Comanche	2,941	827	2,573	3,320	3,319
Cottle	299	126	284	348	450
Eastland	4,015	1,509	3,985	4,382	4,258
Fisher	837	247	828	1,004	1,064
Foard	245	77	229	335	352
Hardeman	942	279	869	973	791
Haskell	1,255	576	1,648	1,371	1,387
Jack	1,932	798	2,321	2,221	1,558
Jones	3,211	1,849	6,705	4,745	3,192
Kent	151	64	126	202	255
Knox	999	341	824	896	900
Mitchell	1,914	1,254	2,973	1,992	1,762
Montague	4,257	1,266	4,220	4,927	4,484
Nolan	4,042	1,314	3,939	3,443	2,951
Runnels	2,590	790	2,592	2,494	2,606
Scurry	4,668	1,719	5,332	4,025	2,797
Shackelford	781	232	755	914	732
Stephens	2,185	836	2,398	2,120	2,031
Stonewall	308	96	280	358	482
Taylor	34,395	17,528	37,614	29,025	21,645
Throckmorton	307	98	301	388	419
Wichita	29,430	16,430	35,635	29,207	22,532
Wilbarger	2,934	1,019	3,390	2,910	2,720
Young	4,421	1,347	4,316	4,377	4,269
Region	126,336	56,768	143,375	126,695	106,063
Texas	8,017,617	3,016,768	8,458,410	702,521	4,073,596

Table 5. County Total Under 18 - 2019-2021

County	2019 <18 Population	2020 <18 Population	2021 <18 Population
Archer	1,813	1,800	1,690
Baylor	851	851	818
Brown	9,017	8,959	8,380
Callahan	2,777	2,741	2,559
Clay	2,035	2,001	1,884
Coleman	2,043	2,048	1,946
Comanche	3,102	3,091	2,941
Cottle	337	327	299
Eastland	4,354	4,335	4,015
Fisher	868	876	837
Foard	254	257	245
Hardeman	988	985	942
Haskell	1,312	1,332	1,255
Jack	1,989	2,011	1,932
Jones	3,477	3,436	3,211
Kent	165	163	151
Knox	1,045	1,045	999
Mitchell	1,980	1,997	1,914
Montague	4,473	4,459	4,257
Nolan	4,224	4,245	4,042
Runnels	2,683	2,696	2,590
Scurry	4,809	4,856	4,668
Shackelford	814	815	781
Stephens	2,288	2,289	2,185
Stonewall	326	325	308
Taylor	36,594	36,723	34,395
Throckmorton	322	320	307
Wichita	31,778	31,720	29,430
Wilbarger	3,197	3,160	2,934
Young	4,608	4,608	4,421
Region	134,523	134,471	126,336
Texas	7,858,443	7,932,713	8,017,617

Table 6. County Level Population Gender 2021

County	Total Population	Total Male	Total Female
Archer	8,303	4,095	4,208
Baylor	3,620	1,808	1,812
Brown	38,962	19,182	19,780
Callahan	13,465	6,704	6,761
Clay	9,693	4,932	4,761
Coleman	8,443	4,259	4,184
Comanche	12,980	6,363	6,617
Cottle	1,507	722	785
Eastland	18,149	9,204	8,945
Fisher	3,980	1,976	2,004
Foard	1,238	602	636
Hardeman	3,854	1,971	1,883
Haskell	6,237	3,406	2,831
Jack	8,830	4,997	3,833
Jones	19,702	12,586	7,116
Kent	798	392	406
Knox	3,960	1,951	2,009
Mitchell	9,895	5,858	4,037
Montague	19,154	9,486	9,668
Nolan	15,689	7,894	7,795
Runnels	11,072	5,552	5,520
Scurry	18,541	10,180	8,361
Shackelford	3,414	1,642	1,772
Stephens	9,570	5,097	4,473
Stonewall	1,524	739	785
Taylor	140,207	68,502	71,705
Throckmorton	1,513	751	762
Wichita	133,234	69,075	64,159
Wilbarger	12,973	6,449	6,524
Young	18,730	9,214	9,516
Region	559,237	285,589	273,648
Texas	30,168,926	14,985,240	15,183,686

Table 7. County Total Race & Ethnicity 2021

County	Total White	Total Black	Total Hispanic	Total Asian	Total Other
Archer	7,107	50	947	18	181
Baylor	2,896	82	580	4	58
Brown	26,869	1,545	9,453	193	902
Callahan	11,340	168	1,562	67	328
Clay	8,636	75	633	34	315
Coleman	6,218	219	1,789	43	174
Comanche	8,782	47	3,888	48	215
Cottle	941	150	393	0	23
Eastland	13,852	342	3,534	75	346
Fisher	2,544	146	1,227	7	56
Foard	924	66	239	4	5
Hardeman	2,364	243	1,135	12	100
Haskell	3,918	221	1,938	31	129
Jack	6,500	360	1,793	40	137
Jones	10,983	2,381	5,926	87	325
Kent	633	6	146	0	13
Knox	2,291	238	1,356	7	68
Mitchell	4,764	1,074	3,893	35	129
Montague	16,138	65	2,418	73	460
Nolan	8,320	735	6,312	69	253
Runnels	6,562	198	4,141	20	151
Scurry	9,296	822	8,117	59	247
Shackelford	2,871	17	449	9	68
Stephens	6,620	216	2,555	37	142
Stonewall	1,154	48	273	16	33
Taylor	86,174	9,901	37,021	3,140	3,971
Throckmorton	1,269	9	198	7	30
Wichita	85,344	13,127	27,735	2,965	4,063
Wilbarger	7,262	1,191	4,045	108	367
Young	14,163	259	3,850	73	385
Region	366,735	34,001	137,546	7,281	13,674
Texas	12,209,069	3,630,915	12,056,086	1,597,919	674,937

Table 8. Limited English Proficiency 2014-2019

County	Total Households 2014-2019	Limited English-Speaking Household 2014-2019	Percent 2014-2019
Archer	3,452	72	2.1%
Baylor	1,530	9	0.6%
Brown	14,409	288	2.0%
Callahan	5,367	34	0.6%
Clay	4,105	6	0.1%
Coleman	3,423	34	1.0%
Comanche	5,487	214	3.9%
Cottle	707	23	3.3%
Eastland	6,492	157	2.4%
Fisher	1,601	89	5.6%
Foard	533	14	2.6%
Hardeman	1,596	91	5.7%
Haskell	2,146	114	5.3%
Jack	3,168	101	3.2%
Jones	5,696	294	5.2%
Kent	273	3	1.1%
Knox	1,375	123	8.9%
Mitchell	2,382	99	4.2%
Montague	7,800	192	2.5%
Nolan	5,407	263	4.9%
Runnels	3,896	37	0.9%
Scurry	5,941	132	2.2%
Shackelford	1,317	3	0.2%
Stephens	3,247	50	1.5%
Stonewall	580	15	2.6%
Taylor	49,868	1,210	2.4%
Throckmorton	668	2	0.3%
Wichita	48,356	1,178	2.4%
Wilbarger	5,180	141	2.7%
Young	7,307	514	7.0%
Region	203,309	5,502	2.7%

Table 9. Languages Spoken 2019

County	% English	% Spanish	% Indo-European	% Asian and Pacific	% Other
Archer	94.3%	5.5%	0.2%	0.2%	0.0%
Baylor	95.4%	3.0%	0.4%	0.1%	0.0%
Brown	87.3%	11.6%	0.4%	0.5%	0.1%
Callahan	92.2%	6.2%	1.0%	0.3%	0.0%
Clay	93.3%	5.3%	0.0%	0.1%	0.1%
Coleman	89.9%	9.7%	0.0%	0.2%	0.0%
Comanche	78.0%	21.2%	0.0%	0.1%	0.0%
Cottle	80.0%	19.1%	1.0%	0.0%	0.0%
Eastland	87.1%	11.6%	0.4%	0.7%	0.1%
Fisher	79.9%	18.9%	0.4%	0.3%	0.0%
Foard	85.1%	14.9%	0.0%	0.0%	0.0%
Hardeman	84.9%	14.8%	0.0%	0.0%	0.2%
Haskell	79.6%	19.3%	0.7%	0.3%	0.1%
Jack	85.1%	12.4%	0.2%	0.0%	0.0%
Jones	84.9%	17.5%	0.3%	0.4%	0.2%
Kent	79.6%	10.8%	0.0%	0.0%	0.0%
Knox	87.4%	22.6%	0.2%	0.0%	0.0%
Mitchell	81.5%	25.1%	0.1%	0.0%	0.1%
Montague	89.1%	9.7%	0.4%	0.0%	0.0%
Nolan	75.3%	24.0%	0.5%	0.1%	0.5%
Runnels	74.7%	12.5%	0.1%	0.1%	0.0%
Scurry	73.7%	25.7%	0.1%	0.3%	0.1%
Shackelford	92.9%	6.6%	0.0%	0.3%	0.0%
Stephens	82.9%	16.2%	0.3%	0.3%	0.2%
Stonewall	86.1%	13.7%	0.0%	0.0%	0.2%
Taylor	82.7%	13.4%	1.5%	1.5%	0.8%
Throckmorton	90.0%	9.8%	0.0%	0.0%	0.0%
Wichita	86.2%	10.4%	1.0%	1.7%	0.6%
Wilbarger	82.8%	15.8%	0.3%	0.8%	0.0%
Young	86.0%	13.3%	0.2%	0.3%	0.0%
Region	84.6%	13.2%	0.8%	1.0%	0.4%
Texas	64.5%	29.2%	2.4%	2.9%	1.0%

Table 10. County Total Median Income 2017-2019

County	2017 Median Income	2018 Median Income	2019 Median Income
Archer	63192	64476	63835
Baylor	36157	40750	40739
Brown	43062	45457	48365
Callahan	40945	44602	48651
Clay	46863	51191	55989
Coleman	40804	43981	46743
Comanche	42419	47893	53516
Cottle	33534	34375	32305
Eastland	32135	35325	37276
Fisher	45294	46827	46146
Foard	50000	46354	43625
Hardeman	37995	42238	41859
Haskell	43529	46013	40313
Jack	52829	51700	52045
Jones	48601	45694	50344
Kent	52250	45926	44688
Knox	46319	46146	48798
Mitchell	52194	49670	51492
Montague	46592	51774	51765
Nolan	42019	44346	45537
Runnels	41226	41732	44940
Scurry	54565	55889	54326
Shackelford	46685	45187	46935
Stephens	45862	45336	46232
Stonewall	46786	48000	51250
Taylor	49161	50818	53143
Throckmorton	37279	44196	40000
Wichita	45776	46575	48650
Wilbarger	43913	48773	45302
Young	46351	47194	50635
Region	45819	46079	47650
Texas	57051	59570	61874

Table 11. County Total Labor Force, Employed, and Unemployed 2020

County	Labor Force	Employed	Unemployed
Archer	3,911	3,703	208
Baylor	1,767	1,705	62
Brown	15,245	14,253	992
Callahan	5,979	5,654	325
Clay	4,793	4,528	265
Coleman	2,886	2,673	213
Comanche	5,618	5,309	309
Cottle	570	542	28
Eastland	7,390	6,893	497
Fisher	1,605	1,533	72
Foard	576	552	24
Hardeman	1,710	1,635	75
Haskell	2,653	2,539	114
Jack	3,393	3,155	238
Jones	5,738	5,337	401
Kent	458	440	18
Knox	1,454	1,372	82
Mitchell	2,381	2,192	189
Montague	9,081	8,479	602
Nolan	7,151	6,774	377
Runnels	4,529	4,306	223
Scurry	6,251	5,739	512
Shackelford	1,782	1,688	94
Stephens	4,020	3,775	245
Stonewall	576	547	29
Taylor	66,148	62,540	3,608
Throckmorton	635	604	31
Wichita	55,306	51,620	3,686
Wilbarger	4,949	4,659	290
Young	7,803	7,393	410
Region	236,358	222,139	14,219
Texas	13,983,343	12,915,349	1,067,994

Table 12. County Total Unemployment Percentages 2017-2019

County	2018 % Unemployment	2019 % Unemployment	2020 % Unemployment
Archer	3.0	2.8	5.3
Baylor	3.2	2.3	3.5
Brown	3.7	3.7	6.5
Callahan	3.3	3.1	5.4
Clay	3.1	3.1	5.5
Coleman	3.9	4.1	7.4
Comanche	3.6	3.2	5.5
Cottle	4.3	4.2	4.9
Eastland	3.3	3.3	6.7
Fisher	3.2	2.9	4.5
Foard	2.9	3.1	4.2
Hardeman	3.6	3.0	4.4
Haskell	3.8	3.3	4.3
Jack	2.5	3.1	7.0
Jones	4.8	4.3	7.0
Kent	2.4	2.3	3.9
Knox	3.6	3.3	5.6
Mitchell	4.1	3.5	7.9
Montague	3.2	2.8	6.6
Nolan	3.3	2.9	5.3
Runnels	3.1	2.8	4.9
Scurry	3.4	3.2	8.2
Shackelford	2.3	2.2	5.3
Stephens	3.6	3.1	6.1
Stonewall	3.4	2.9	5.0
Taylor	3.1	2.9	5.5
Throckmorton	3.3	3.8	4.9
Wichita	3.4	3.2	6.7
Wilbarger	4.1	3.6	5.9
Young	3.2	3.0	5.3
Region	3.3	3.1	6.0
Texas	3.8	3.5	7.6

Table 13. County Total TANF Recipients 2018-2020

County	2018 Number of Recipients	2019 Number of Recipients	2020 Number of Recipients
Archer	13	6	7
Baylor	6	10	15
Brown	60	69	39
Callahan	14	10	24
Clay	14	13	7
Coleman	22	17	13
Comanche	22	13	18
Cottle	3	8	0
Eastland	33	20	14
Fisher	21	12	8
Foard	1	2	2
Hardeman	9	8	9
Haskell	12	8	13
Jack	7	8	2
Jones	17	18	22
Kent	0	0	0
Knox	3	3	2
Mitchell	13	8	11
Montague	21	13	10
Nolan	28	19	16
Runnels	8	7	8
Scurry	22	8	13
Shackelford	2	1	0
Stephens	8	6	4
Stonewall	5	3	0
Taylor	306	259	177
Throckmorton	0	0	0
Wichita	337	334	254
Wilbarger	29	25	23
Young	39	31	15
Region	1073	940	726
Texas	51055	44344	30297

Table 14. County Total TANF Recipients per 100k 2018-2020

County	2018 Rate per 100k	2019 Rate per 100k	2020 Rate per 100k
Archer	153.81	71.49	83.89
Baylor	164.84	275.56	413.91
Brown	154.53	177.5	100.2
Callahan	104.19	74.33	178.36
Clay	140.22	131.51	71.52
Coleman	256.74	199.37	153.34
Comanche	165.91	98.69	137.67
Cottle	198.41	528.05	0
Eastland	180.26	109.52	76.9
Fisher	526.98	301.28	200.75
Foard	80.13	161.29	161.29
Hardeman	230.83	205.76	232.56
Haskell	196.5	130.1	209.78
Jack	78.95	90.45	22.62
Jones	85.9	91.1	114.48
Kent	0	0	0
Knox	77.16	76.69	50.8
Mitchell	133.14	81.62	111.51
Montague	108.82	67.54	52.1
Nolan	180.37	121.88	102.29
Runnels	76.46	63.94	72.67
Scurry	121.92	43.94	70.78
Shackelford	59.05	29.46	0
Stephens	83.62	62.68	41.8
Stonewall	330.47	197.5	0
Taylor	221.88	186.74	126.92
Throckmorton	0	0	0
Wichita	253.69	251.11	190.78
Wilbarger	220.87	191.06	176.41
Young	208.92	165.82	80.16
Region	186.86	162.89	130
Texas	174.89	148.07	102.09

Table 15. County Total TANF Recipients per 1k 2018-2020

County	2018 Rate per 1,000	2019 Rate per 1,000	2020 Rate per 1,000
Archer	1.54	1.55	0.84
Baylor	1.65	1.66	4.14
Brown	1.55	1.55	1
Callahan	1.05	0.75	1.78
Clay	1.5	1.32	0.72
Coleman	2.57	2	1.53
Comanche	1.66	0.99	1.38
Cottle	1.99	5.29	0
Eastland	1.8	1.1	0.77
Fisher	5.27	3.02	2.01
Foard	0.8	1.62	1.61
Hardeman	2.31	2.06	2.33
Haskell	1.97	1.4	2.1
Jack	0.79	0.91	0.23
Jones	0.86	0.92	1.11
Kent	0	0	0
Knox	0.78	0.77	0.51
Mitchell	1.34	0.82	1.12
Montague	1.09	0.68	0.52
Nolan	1.81	1.22	1.02
Runnels	0.74	0.64	0.73
Scurry	1.22	0.44	0.71
Shackelford	0.6	0.3	0
Stephens	0.84	0.63	0.42
Stonewall	3.31	1.98	0
Taylor	2.22	1.87	1.27
Throckmorton	0	0	0
Wichita	2.54	2.51	1.91
Wilbarger	2.21	1.92	1.76
Young	2.1	1.66	0.8
Region	1.87	1.68	1.3
Texas	1.75	1.51	1.02

Table 16. County Total SNAP Recipients 2017-2019

County	2018 Number of Recipients	2019 Number of Recipients	2020 Number of Recipients
Archer	629	577	521
Baylor	546	516	522
Brown	5401	5023	4826
Callahan	1733	1574	1530
Clay	870	783	759
Coleman	1266	1023	1056
Comanche	1748	1570	1580
Cottle	205	180	204
Eastland	2709	2532	2350
Fisher	422	419	430
Foard	132	110	102
Hardeman	517	491	510
Haskell	950	810	712
Jack	921	831	867
Jones	2061	1931	1807
Kent	55	47	56
Knox	523	438	483
Mitchell	942	887	875
Montague	2258	2080	2113
Nolan	2582	2434	2377
Runnels	1289	1181	1180
Scurry	1922	1801	1969
Shackelford	321	266	281
Stephens	1515	1177	1147
Stonewall	124	133	110
Taylor	19736	18246	16159
Throckmorton	132	123	119
Wichita	18949	17757	16904
Wilbarger	2118	1911	1951
Young	2258	2043	1913
Region	74831	68894	65413
Texas	3725683	3427736	3417266

Table 17. County Total Free & Reduced Lunch Recipients 2018-2020

County	2017-2018 Free and Reduced Lunch	2018-2019 Free and Reduced Lunch	2019-2020 Free and Reduced Lunch
Archer	561	650	629
Baylor	330	338	347
Brown	4349	4279	4104
Callahan	1323	1360	1361
Clay	805	782	782
Coleman	851	879	879
Comanche	1478	1543	1543
Cottle	143	136	136
Eastland	1767	178	1731
Fisher	292	311	311
Foard	161	178	178
Hardeman	591	593	593
Haskell	672	663	603
Jack	1009	1017	1066
Jones	1656	1691	1667
Kent	55	52	66
Knox	453	453	503
Mitchell	783	777	736
Montague	1849	1896	1822
Nolan	1990	1967	1984
Runnels	1106	1114	1177
Scurry	1796	1963	1961
Shackelford	306	275	314
Stephens	947	925	890
Stonewall	101	101	116
Taylor	14634	13841	13845
Throckmorton	186	190	187
Wichita	12645	12758	14387
Wilbarger	1407	1505	146
Young	1875	1962	1879
Region	56121	54377	55943
Texas	3169088	3312959	3441926

Table 18. County Total Free & Reduced Lunch Percentages 2018-2020

County	2017-2018 % Free and Reduced Lunch	2018-2019 % Free and Reduced Lunch	2019-2020 % Free and Reduced Lunch
Archer	33%	33%	32%
Baylor	58%	58%	60%
Brown	62%	63%	60%
Callahan	54%	54%	54%
Clay	50%	47%	47%
Coleman	67%	69%	69%
Comanche	67%	64%	64%
Cottle	64%	67%	67%
Eastland	62%	61%	61%
Fisher	55%	56%	56%
Foard	70%	85%	85%
Hardeman	80%	85%	85%
Haskell	76%	76%	69%
Jack	62%	62%	65%
Jones	63%	63%	62%
Kent	34%	34%	43%
Knox	64%	64%	71%
Mitchell	56%	56%	53%
Montague	55%	55%	53%
Nolan	62%	62%	62%
Runnels	56%	56%	59%
Scurry	62%	62%	62%
Shackelford	45%	45%	52%
Stephens	62%	62%	60%
Stonewall	45%	45%	52%
Taylor	57%	57%	57%
Throckmorton	65%	65%	64%
Wichita	62%	62%	69%
Wilbarger	65%	65%	63%
Young	60%	60%	58%
Region	59%	58%	59%
Texas	61%	61%	63%

Table 19. County Homeless Student 2019-2021

County	2018-2019 Homeless Students	2019-2020 Homeless Students	2020-2021 Homeless Students
Archer	26	masked	25
Baylor	0	masked	masked
Brown	75	77	83
Callahan	48	45	67
Clay	31	70	58
Coleman	41	33	48
Comanche	65	78	88
Cottle	0	0	0
Eastland	153	144	101
Fisher	10	29	21
Foard	0	0	0
Hardeman	42	masked	18
Haskell	masked	40	28
Jack	masked	20	masked
Jones	374	270	279
Kent	0	0	0
Knox	12	masked	masked
Mitchell	18	13	masked
Montague	10	20	18
Nolan	30	57	46
Runnels	38	33	41
Scurry	17	11	26
Shackelford	27	24	23
Stephens	22	64	74
Stonewall	masked	15	17
Taylor	4,306	1126	908
Throckmorton	89	34	26
Wichita	340	294	276
Wilbarger	14	22	18
Young	28	59	52
Region	5,816	2578	2341
Texas	72,782	78296	56648

Table 20. Brown and Taylor County Homeless Adults 2019-2021

County	Year	Total Homeless	Male	Female	Homeless Under 18	Homeless 18-24	Chronically Homeless
Brown	2019	4	3	1	0	0	1
Brown	2020	23	12	11	0	2	5
Brown	2021	15	5	10	3	2	0
Taylor	2019	206	130	73	29	10	16
Taylor	2020	116	69	42	3	7	18
Taylor	2021	87	56	28	13	9	14

Table 21. Less than High School Graduate and High School Graduate or Equivalent 2017-2019

County	2017 Less than High School Graduate	2017 High School Graduate or Equivalent	2018 Less than High School Graduate	2018 High School Graduate or Equivalent	2019 Less than High School Graduate	2019 High School Graduate or Equivalent
Archer	623	2,386	657	2,314	675	2,396
Baylor	322	950	304	923	383	997
Brown	4,173	10,991	4,057	10,407	3,868	10,720
Callahan	1,412	4,146	1,226	4,073	1,260	3,921
Clay	926	3,241	837	3,197	843	3,005
Coleman	1,242	2,419	1,242	2,225	944	2,362
Comanche	2,040	2,823	1,820	3,724	1,731	3,601
Cottle	273	364	236	347	275	293
Eastland	2,370	5,098	2,365	4,986	2,233	4,542
Fisher	504	971	427	1,061	417	1,027
Foard	242	336	254	302	176	303
Hardeman	735	995	692	1,013	730	973
Haskell	1,505	1,600	1,346	1,620	1,481	1,634
Jack	1,451	2,970	1,548	2,858	1,462	2,843
Jones	4,004	6,398	3,913	6,468	3,917	6,318
Kent	120	131	104	198	67	165
Knox	468	1,022	521	973	519	980
Mitchell	1,952	2,550	1,704	2,566	1,725	2,769
Montague	2,672	5,393	2,287	5,550	2,204	5,806
Nolan	2,244	3,902	2,280	3,612	2,151	3,839
Runnels	1,681	2,866	1,676	2,767	1,614	2,814
Scurry	2,855	4,367	2,932	4,329	2,766	4,659
Shackelford	428	701	468	598	408	545
Stephens	1,731	2,422	1,792	2,230	1,625	2,238
Stonewall	151	346	142	471	202	378
Taylor	12,459	30,842	11,549	31,488	10,637	32,815
Throckmorton	212	404	174	481	151	455
Wichita	12,845	34,754	12,704	34,734	12,534	34,875
Wilbarger	2,098	3,097	2,099	3,384	2,293	3,399
Young	2,519	4,744	2,276	4,869	2,300	4,874
Region	66,257	143,229	63,632	143,768	61,591	145,546
Texas	3,439,275	5,248,810	3,414,448	5,353,036	3,366,181	5,448,957

Table 22. Some College or Associate's and Bachelor's Degree or Higher 2017-2019

County	2017 Some College or Associate Degree	2017 Bachelor's Degree or Higher	2018 Some College or Associate Degree	2018 Bachelor's Degree or Higher	2019 Some College or Associate Degree	2019 Bachelor's Degree or Higher
Archer	2,307	1,525	2,375	1,531	2,214	1,537
Baylor	90	646	1,052	512	855	596
Brown	9,245	4,805	9,527	5,220	9,733	5,147
Callahan	3,270	1,564	3,383	1,867	3,449	2,124
Clay	2,654	1,346	2,770	1,430	2,783	1,645
Coleman	2,013	915	2,100	995	2,197	1,046
Comanche	2,779	1,805	3,010	1,918	3,152	2,026
Cottle	283	177	335	158	382	179
Eastland	5,380	1,672	5,406	1,772	5,578	2,097
Fisher	1,054	541	1,051	537	1,023	519
Foard	381	174	420	170	413	152
Hardeman	943	416	925	407	1,030	392
Haskell	1,191	532	1,153	572	1,064	495
Jack	1,835	696	1,804	766	1,853	817
Jones	4,392	1,645	4,277	1,736	4,404	1,822
Kent	158	118	149	131	136	120
Knox	733	502	751	467	736	482
Mitchell	1,869	727	1,912	727	1,667	674
Montague	4,622	2,273	4,971	2,159	4,648	2,364
Nolan	3,725	1,346	3,612	1,570	3,531	1,511
Runnels	1,907	1,381	2,061	1,321	2,139	1,314
Scurry	3,848	1,916	3,776	1,899	3,533	1,839
Shackelford	799	612	901	560	888	683
Stephens	2,034	1,097	2,146	1,095	2,321	1,061
Stonewall	225	104	318	146	341	157
Taylor	37,312	21,334	37,620	22,012	36,881	22,655
Throckmorton	378	228	684	220	359	241
Wichita	34,589	19,787	34,375	20,254	34,330	20,427
Wilbarger	3,405	1,395	3,038	1,474	2,872	1,393
Young	3,978	2,503	4,034	2,549	4,028	2,458
Region	137,399	73,782	139,936	76,175	138,540	77,973
Texas	6,278,048	5,240,362	6,367,061	5,457,964	6,439,120	5,668,153

Table 23. Juvenile Referrals 2019

County	2019 Juvenile Felonies	2019 Misdemeanor A & B	2019 Violations of Parole	2019 Referral Rate per 1,000
Archer	0	2	0	3
Baylor	2	0	0	7
Brown	28	37	4	20
Callahan	14	11	1	21
Clay	4	5	0	10
Coleman	4	10	3	23
Comanche	11	10	4	20
Cottle	1	0	0	8
Eastland	8	2	0	7
Fisher	0	0	0	0
Foard	0	3	0	36
Hardeman	3	5	0	21
Haskell	4	3	0	15
Jack	5	4	3	17
Jones	4	9	0	10
Kent	0	0	0	0
Knox	0	0	0	0
Mitchell	1	2	0	4
Montague	4	18	1	13
Nolan	47	52	3	62
Runnels	3	3	0	6
Scurry	12	34	0	28
Shackelford	0	2	0	7
Stephens	9	8	3	22
Stonewall	0	0	0	0
Taylor	88	171	68	25
Throckmorton	0	0	0	0
Wichita	129	180	162	39
Wilbarger	9	13	1	17
Young	11	11	3	14
Region	401	595	256	25
Texas	16,977	26,369	7,368	19

Table 24. Juvenile Dispositions 2019

County	2019 Juvenile Deferrals	2019 Probations	2019 Supervisory Caution	2019 Dismissed
Archer	1	0	0	1
Baylor	0	1	0	1
Brown	17	16	11	19
Callahan	14	6	0	6
Clay	6	1	0	1
Coleman	11	2	0	0
Comanche	8	8	0	6
Cottle	0	0	0	1
Eastland	7	0	0	3
Fisher	0	0	0	0
Foard	3	0	0	0
Hardeman	4	2	2	0
Haskell	3	1	1	1
Jack	3	6	1	2
Jones	7	2	3	2
Kent	0	0	0	0
Knox	0	0	0	0
Mitchell	1	2	0	2
Montague	15	3	1	6
Nolan	37	22	0	46
Runnels	3	0	1	0
Scurry	20	10	17	5
Shackelford	0	0	0	0
Stephens	13	3	0	2
Stonewall	0	0	0	0
Taylor	129	114	14	38
Throckmorton	0	0	0	0
Wichita	125	80	31	192
Wilbarger	5	8	6	0
Young	11	8	0	2
Region	443	295	88	336
Texas	14,089	12,553	10,303	14,189

Table 25. Juvenile Drunkenness 2018-2020.

County	2018 Juvenile Drunkenness	2019 Juvenile Drunkenness	2020 Juvenile Drunkenness
Archer	0	0	0
Baylor	0	0	0
Brown	0	0	0
Callahan	1	0	0
Clay	0	0	0
Coleman	0	0	0
Comanche	0	0	0
Cottle	0	0	0
Eastland	1	0	0
Fisher	0	0	0
Foard	0	0	0
Hardeman	0	0	0
Haskell	0	0	0
Jack	0	0	0
Jones	0	0	0
Kent	0	0	0
Knox	0	0	0
Mitchell	0	0	0
Montague	0	0	0
Nolan	0	0	0
Runnels	0	0	0
Scurry	0	0	0
Shackelford	0	0	0
Stephens	0	0	0
Stonewall	0	0	0
Taylor	0	1	0
Throckmorton	0	0	0
Wichita	0	1	2
Wilbarger	0	0	0
Young	0	0	0
Region	2	2	2
Texas	140	122	79

Table 26. Juvenile Liquor Law Violations 2018-2020.

County	2018 Juvenile Liquor Law Violations	2019 Juvenile Liquor Law Violations	2020 Juvenile Liquor Law Violations
Archer	0	0	0
Baylor	0	1	0
Brown	7	2	3
Callahan	0	2	0
Clay	1	0	0
Coleman	0	0	0
Comanche	0	0	0
Cottle	0	0	0
Eastland	0	0	0
Fisher	0	0	0
Foard	0	0	0
Hardeman	0	0	0
Haskell	0	0	0
Jack	0	0	0
Jones	0	0	0
Kent	0	0	0
Knox	0	0	0
Mitchell	0	0	0
Montague	0	0	0
Nolan	1	0	0
Runnels	0	0	0
Scurry	0	0	0
Shackelford	0	0	0
Stephens	0	0	0
Stonewall	0	0	0
Taylor	0	0	1
Throckmorton	0	0	0
Wichita	3	2	0
Wilbarger	2	0	0
Young	0	0	0
Region	14	7	4
Texas	548	564	336

Table 27. Adult Drunkenness 2018-2020

County	2018 Adult Drunkenness	2019 Adult Drunkenness	2020 Adult Drunkenness
Archer	1	0	1
Baylor	3	1	6
Brown	69	61	57
Callahan	34	17	11
Clay	36	15	15
Coleman	0	0	0
Comanche	19	7	8
Cottle	0	0	0
Eastland	42	11	14
Fisher	0	0	1
Foard	0	0	0
Hardeman	0	1	0
Haskell	2	0	0
Jack	4	8	9
Jones	29	28	23
Kent	1	3	0
Knox	3	1	1
Mitchell	22	13	11
Montague	58	27	16
Nolan	7	0	0
Runnels	7	4	6
Scurry	28	26	14
Shackelford	4	0	0
Stephens	9	13	11
Stonewall	0	0	0
Taylor	571	551	454
Throckmorton	0	0	0
Wichita	429	462	226
Wilbarger	58	47	59
Young	38	29	27
Region	1,474	1,325	970
Texas	58,728	51,961	39,427

Table 28. Adult Driving Under the Influence 2018-2020

County	2018 Adult DUI	2019 Adult DUI	2020 Adult DUI
Archer	1	0	0
Baylor	4	5	2
Brown	143	104	72
Callahan	18	1	7
Clay	29	5	7
Coleman	0	2	0
Comanche	30	46	38
Cottle	0	0	0
Eastland	35	11	13
Fisher	0	0	1
Foard	0	0	0
Hardeman	3	1	0
Haskell	15	13	1
Jack	23	33	21
Jones	54	58	72
Kent	2	1	1
Knox	4	0	0
Mitchell	14	11	16
Montague	41	35	35
Nolan	45	36	9
Runnels	38	11	6
Scurry	49	88	59
Shackelford	7	1	6
Stephens	7	6	4
Stonewall	0	0	0
Taylor	428	428	399
Throckmorton	2	2	0
Wichita	198	200	160
Wilbarger	27	22	47
Young	59	49	63
Region	1,276	1,187	1,039
Texas	73,907	71,396	60,949

Table 29. County level totals Adult Sale/Manufacturing and Possession of Drugs 2020

County	2020 Adult Sale/Manufacturing	2020 Adult Possession
Archer	1	5
Baylor	3	11
Brown	23	184
Callahan	2	25
Clay	2	20
Coleman	1	3
Comanche	7	66
Cottle	0	0
Eastland	7	34
Fisher	0	4
Foard	0	2
Hardeman	0	0
Haskell	0	13
Jack	0	40
Jones	21	42
Kent	0	1
Knox	0	1
Mitchell	13	22
Montague	14	67
Nolan	5	32
Runnels	3	12
Scurry	2	64
Shackelford	0	0
Stephens	8	49
Stonewall	0	0
Taylor	29	493
Throckmorton	2	9
Wichita	44	508
Wilbarger	1	94
Young	5	143
Region	193	1944
Texas	13693	72804

Table 30. County level totals Juvenile Sale/Manufacturing and Possession of Drugs 2020

County	2020 Juvenile Sale/Manufacturing	2020 Juvenile Possession
Archer	0	0
Baylor	0	0
Brown	0	4
Callahan	0	0
Clay	0	0
Coleman	0	0
Comanche	0	0
Cottle	0	0
Eastland	0	0
Fisher	0	0
Foard	0	0
Hardeman	0	0
Haskell	0	0
Jack	0	2
Jones	0	0
Kent	0	0
Knox	0	0
Mitchell	0	0
Montague	0	0
Nolan	0	0
Runnels	0	0
Scurry	0	0
Shackelford	0	0
Stephens	0	1
Stonewall	0	0
Taylor	0	14
Throckmorton	0	0
Wichita	0	26
Wilbarger	0	2
Young	0	7
Region	0	56
Texas	212	2420

Table 31. County level totals Adult Marijuana arrests 2020

County	Adult Marijuana Arrests
Archer	2
Baylor	2
Brown	45
Callahan	11
Clay	1
Coleman	0
Comanche	31
Cottle	0
Eastland	8
Fisher	3
Foard	0
Hardeman	0
Haskell	5
Jack	17
Jones	34
Kent	1
Knox	0
Mitchell	13
Montague	25
Nolan	6
Runnels	5
Scurry	24
Shackelford	0
Stephens	13
Stonewall	0
Taylor	92
Throckmorton	0
Wichita	174
Wilbarger	22
Young	45
Region	579
Texas	23277

Table 32. County level totals Juvenile Marijuana arrests 2020

County	Juvenile Marijuana Arrests
Archer	0
Baylor	0
Brown	2
Callahan	0
Clay	0
Coleman	0
Comanche	0
Cottle	0
Eastland	0
Fisher	0
Foard	0
Hardeman	0
Haskell	0
Jack	2
Jones	0
Kent	0
Knox	0
Mitchell	0
Montague	0
Nolan	0
Runnels	0
Scurry	0
Shackelford	0
Stephens	1
Stonewall	0
Taylor	11
Throckmorton	0
Wichita	18
Wilbarger	2
Young	2
Region	38
Texas	1592

Table 33. County level totals Adult Drug/Narcotics arrests 2020

County	Adult Drugs/Narcotics Arrests
Archer	4
Baylor	12
Brown	162
Callahan	16
Clay	21
Coleman	4
Comanche	42
Cottle	0
Eastland	33
Fisher	1
Foard	2
Hardeman	0
Haskell	8
Jack	23
Jones	29
Kent	0
Knox	1
Mitchell	22
Montague	56
Nolan	31
Runnels	10
Scurry	42
Shackelford	0
Stephens	44
Stonewall	0
Taylor	430
Throckmorton	11
Wichita	378
Wilbarger	73
Young	103
Region	1558
Texas	63220

Table 34. County level totals Juvenile Drug/Narcotics arrests 2020

County	Juvenile Drugs/Narcotics Arrests
Archer	0
Baylor	0
Brown	2
Callahan	0
Clay	0
Coleman	0
Comanche	0
Cottle	0
Eastland	0
Fisher	0
Foard	0
Hardeman	0
Haskell	0
Jack	0
Jones	0
Kent	0
Knox	0
Mitchell	0
Montague	0
Nolan	0
Runnels	0
Scurry	0
Shackelford	0
Stephens	0
Stonewall	0
Taylor	3
Throckmorton	0
Wichita	8
Wilbarger	0
Young	5
Region	18
Texas	1040

Table 35. County level totals Crime Rates 2018-2020

County	2018 Crime Rates	2019 Crime Rates	2020 Crime Rates
Archer	15	8	16
Baylor	42	33	37
Brown	904	1,024	1,019
Callahan	152	136	131
Clay	149	119	105
Coleman	62	66	40
Comanche	206	219	213
Cottle	5	0	0
Eastland	245	205	220
Fisher	0	14	20
Foard	0	3	0
Hardeman	6	23	27
Haskell	28	51	42
Jack	116	85	91
Jones	143	145	143
Kent	11	9	8
Knox	39	46	22
Mitchell	158	169	93
Montague	285	311	232
Nolan	399	346	184
Runnels	140	3	138
Scurry	266	433	261
Shackelford	9	8	15
Stephens	194	139	173
Stonewall	7	1	2
Taylor	4,448	3,866	3,463
Throckmorton	9	12	3
Wichita	4,231	4,080	4,077
Wilbarger	334	256	204
Young	196	187	191
Region	12,799	11,997	11,170
Texas	798,474	811,974	786,324

Table 36. County level totals Violent Crimes 2020

County	Murder	Rape	Robbery	Assault
Archer	0	0	0	1
Baylor	0	2	0	7
Brown	0	30	13	91
Callahan	0	0	0	19
Clay	0	3	1	9
Coleman	0	2	2	18
Comanche	4	4	1	13
Cottle	0	0	0	0
Eastland	1	10	3	15
Fisher	0	0	0	11
Foard	0	0	0	0
Hardeman	0	0	0	2
Haskell	0	0	0	5
Jack	0	3	0	13
Jones	2	1	1	13
Kent	0	0	0	0
Knox	0	2	0	3
Mitchell	0	0	1	11
Montague	0	5	3	20
Nolan	0	2	0	22
Runnels	1	3	2	21
Scurry	1	5	1	78
Shackelford	0	0	0	4
Stephens	0	2	2	18
Stonewall	0	0	0	2
Taylor	4	142	63	364
Throckmorton	0	0	0	1
Wichita	9	87	81	317
Wilbarger	0	8	5	26
Young	2	9	3	20
Region	24	320	182	1124
Texas	1,931	13,422	26,829	88,549

Table 37. County level totals Property Crimes 2020

County	Burglary	Larceny	Auto Theft
Archer	4	9	2
Baylor	4	15	9
Brown	213	609	63
Callahan	38	56	18
Clay	34	49	9
Coleman	8	7	3
Comanche	45	134	12
Cottle	0	0	0
Eastland	67	97	27
Fisher	3	4	2
Foard	0	0	0
Hardeman	8	17	0
Haskell	10	19	8
Jack	18	48	9
Jones	41	70	15
Kent	4	4	0
Knox	8	8	1
Mitchell	21	57	3
Montague	72	122	10
Nolan	55	100	5
Runnels	62	42	7
Scurry	60	104	12
Shackelford	3	8	0
Stephens	35	101	15
Stonewall	0	0	0
Taylor	488	2,182	220
Throckmorton	1	1	0
Wichita	719	2,543	321
Wilbarger	34	106	25
Young	76	72	9
Region	2,131	6,584	805
Texas	108,243	463,590	83,760

Table 38. County level totals DWI Incarcerations 2018-2020

County	2018 DWI Incarcerations	2019 DWI Incarcerations	2020 DWI Incarcerations
Archer	3	1	1
Baylor	0	1	1
Brown	26	33	28
Callahan	7	4	5
Clay	3	0	0
Coleman	1	4	3
Comanche	8	6	4
Cottle	0	0	0
Eastland	21	16	11
Fisher	1	0	0
Foard	0	0	0
Hardeman	1	1	1
Haskell	5	4	2
Jack	5	4	3
Jones	4	6	5
Kent	0	1	0
Knox	1	2	0
Mitchell	5	5	2
Montague	3	3	2
Nolan	6	6	4
Runnels	8	8	8
Scurry	18	11	10
Shackelford	0	0	0
Stephens	1	0	0
Stonewall	2	1	0
Taylor	70	71	61
Throckmorton	0	0	1
Wichita	26	28	16
Wilbarger	0	9	3
Young	9	7	4
Region	234	232	175
Texas	6,031	5,475	3,956

Table 39. County level totals Drug Related Incarcerations 2018-2020

County	2018 Drug Incarcerations	2019 Drug Incarcerations	2020 Drug Incarcerations
Archer	4	3	4
Baylor	3	3	3
Brown	260	263	216
Callahan	13	13	13
Clay	6	6	2
Coleman	1	39	5
Comanche	24	25	22
Cottle	1	3	2
Eastland	85	101	86
Fisher	3	3	2
Foard	0	0	0
Hardeman	6	7	9
Haskell	24	23	18
Jack	2	7	7
Jones	23	17	17
Kent	3	2	0
Knox	0	2	1
Mitchell	16	12	13
Montague	37	30	20
Nolan	24	4	33
Runnels	19	18	12
Scurry	23	27	19
Shackelford	0	0	0
Stephens	31	7	22
Stonewall	0	0	0
Taylor	413	468	402
Throckmorton	2	2	4
Wichita	193	208	147
Wilbarger	27	35	22
Young	40	45	29
Region	1,283	1,373	1,130
Texas	23,963	23,431	17,305

Table 40. Uninsured Adults 65 and Under 2017-2019

County	2017 Uninsured Adults	2018 Uninsured Adults	2019 Uninsured Adults
Archer	861	875	977
Baylor	470	400	403
Brown	4,937	4,540	4,682
Callahan	2,280	2,047	1,984
Clay	1,268	1,128	989
Coleman	1,674	1,544	1,482
Comanche	2,119	1,808	1,509
Cottle	238	218	192
Eastland	3,337	2,590	2,767
Fisher	535	447	391
Foard	126	133	136
Hardeman	572	500	501
Haskell	923	917	965
Jack	1,224	1,111	1,131
Jones	1,592	1,393	1,541
Kent	45	39	29
Knox	501	493	470
Mitchell	984	781	948
Montague	2,778	2,860	2,959
Nolan	2,033	1,997	2,171
Runnels	1,615	1,398	1,212
Scurry	1,853	1,909	2,189
Shackelford	427	395	391
Stephens	1,496	1,476	1,344
Stonewall	111	110	113
Taylor	16,004	15,085	15,287
Throckmorton	19	192	199
Wichita	14,605	13,687	13,802
Wilbarger	1,571	1,504	1,630
Young	2,804	2,448	2,624
Region	69,182	64,025	65,018

Table 41. Uninsured Children 19 and Under 2017-2019

County	2017 Uninsured Children	2018 Uninsured Children	2019 Uninsured Children
Archer	132	116	142
Baylor	47	59	89
Brown	504	493	608
Callahan	702	472	467
Clay	335	264	224
Coleman	343	377	444
Comanche	742	581	365
Cottle	11	3	3
Eastland	546	308	336
Fisher	140	146	91
Foard	42	49	46
Hardeman	120	122	44
Haskell	55	69	95
Jack	297	227	259
Jones	386	373	448
Kent	0	0	0
Knox	115	75	114
Mitchell	205	106	227
Montague	819	834	600
Nolan	438	554	626
Runnels	241	172	144
Scurry	601	500	761
Shackelford	80	28	29
Stephens	436	381	375
Stonewall	46	87	87
Taylor	2,816	2,423	2,893
Throckmorton	71	70	24
Wichita	2,847	2,428	2,650
Wilbarger	456	309	232
Young	825	865	826
Region	14,398	12,491	13,249

Table 42. County Level Totals for Mental Health Providers 2017-2019

County	2017 Mental Health Providers	2017 Ratio of MH Providers	2018 Mental Health Providers	2018 Ratio of MH Providers	2019 Mental Health Providers	2019 Ratio of MH Providers
Archer	1	8,700:1	0	0	0	
Baylor	0	0	0	0	0	
Brown	60	640:1	62	610:1	69	550:1
Callahan	2	6,910:1	2	6,970:1	1	13,990:1
Clay	0	0	0	0	0	0
Coleman	1	8,420:1	1	8,430:1	1	8,400:1
Comanche	7	1,930:1	7	1,940:1	6	2,260:1
Cottle	0	0	0	0	0	0
Eastland	3	6,090:1	4	4,600:1	4	4,580:1
Fisher	0	0	0	0	0	0
Foard	0	0	0	0	0	0
Hardeman	3	1,300:1	3	1,330:1	3	1,310:1
Haskell	3	1,890:1	3	1,920:1	3	1,940:1
Jack	1	8,740:1	1	8,830:1	1	8,840:1
Jones	1	20,010:1	1	19,980:1	1	19,820:1
Kent	0	0	0	0	0	0
Knox	0	0	0	0	0	0
Mitchell	0	0	0	0	0	0
Montague	6	3,240:1	5	3,910:1	5	9,920:1
Nolan	7	2,140:1	7	2,110:1	9	1,640:1
Runnels	3	3,480:1	3	3,420:1	4	2,560:1
Scurry	3	5,780:1	3	5,680:1	4	4,220:1
Shackelford	2	1,660:1	2	1,660:1	2	1,630:1
Stephens	2	4,950:1	2	4,670:1	2	4,720:1
Stonewall	2	710:1	2	690:1	2	680:1
Taylor	190	720:1	204	670:1	227	610:1
Throckmorton	1	1,530:1	1	1,530:1	1	1,520:1
Wichita	174	760:1	186	710:1	199	660:1
Wilbarger	19	680:1	18	710:1	20	640:1
Young	9	2,020:1	9	2,000:1	9	2,010:1
Region	500	1,142:1	526	1,091:1	573	1,007:1
State	27,513	1,010:1	29,561	960:1	32,666	880:1

Table 43. County Level Totals for Mental Health Services for Adults and Youth 2017-2019

County	2017 Adult BMMH Clients	2017 Youth BMMH Clients	2018 Adult BMMH Clients	2018 Youth BMMH Clients	2019 Adult BMMH Clients	2019 Youth BMMH Clients
Archer	104	46	115	42	92	43
Baylor	104	26	98	21	91	22
Brown	944	369	940	376	816	379
Callahan	224	96	222	111	229	128
Clay	144	61	160	61	145	59
Coleman	195	65	188	58	181	54
Comanche	241	74	214	79	181	113
Cottle	21	2	19	2	17	7
Eastland	495	162	492	149	426	131
Fisher	43	17	48	13	44	15
Foard	31	7	35	10	32	8
Hardeman	81	19	69	32	84	32
Haskell	84	33	73	42	89	47
Jack	101	46	104	51	92	59
Jones	244	96	229	110	224	119
Kent	14	3	15	5	13	4
Knox	115	29	109	22	118	25
Mitchell	119	39	114	38	108	39
Montague	410	126	368	136	351	115
Nolan	338	106	349	127	368	145
Runnels	201	81	211	82	215	87
Scurry	238	72	245	72	208	78
Shackelford	31	19	38	23	31	42
Stephens	160	68	157	88	136	85
Stonewall	30	3	24	2	24	5
Taylor	2,288	1,067	2,345	1,121	2,348	1,216
Throckmorton	16	8	19	4	22	10
Wichita	3,075	1,123	3,079	1,120	3,048	1,161
Wilbarger	263	150	270	134	247	125
Young	392	170	380	150	323	152
Region	10,746	3,661	10,729	4,281	10,303	4,505
State	289,084	145,045	286,070	151,405	279,405	158,951

Table 44. County Level Totals for SUD Services for Adults and Youth 2017-2019

County	2017 Adult SUD Clients	2017 Youth SUD Clients	2018 Adult SUD Clients	2018 Youth SUD Clients	2019 Adult SUD Clients	2019 Youth SUD Clients
Archer	4	1	6	0	8	0
Baylor	5	0	10	0	8	0
Brown	53	11	66	4	53	9
Callahan	13	3	12	0	15	0
Clay	14	1	10	0	7	0
Coleman	14	1	11	1	13	2
Comanche	10	1	8	2	13	2
Cottle	2	1	1	0	3	0
Eastland	19	1	22	1	20	0
Fisher	4	0	2	1	1	0
Foard	3	0	0	0	1	0
Hardeman	6	0	5	0	4	1
Haskell	3	0	4	1	7	2
Jack	7	0	7	0	7	1
Jones	9	6	15	3	14	5
Kent	1	0	0	0	0	0
Knox	9	0	9	3	9	1
Mitchell	3	0	4	1	4	2
Montague	26	1	25	0	17	1
Nolan	13	1	14	4	18	1
Runnels	14	1	10	1	15	2
Scurry	16	8	21	7	10	3
Shackelford	3	0	2	0	2	0
Stephens	14	1	18	2	10	3
Stonewall	1	0	3	0	0	0
Taylor	198	29	236	30	202	41
Throckmorton	1	0	1	0	1	0
Wichita	238	24	272	46	252	53
Wilbarger	27	7	26	6	14	1
Young	25	4	25	3	19	5
Region	755	102	845	116	747	135
State	29,695	7,331	29,450	7,227	27,515	7,566

Table 45. County Level Totals for People Living with HIV Per 1k, 2017-2019

County	2017 Living with HIV	2018 Living with HIV	2019 Living with HIV
Archer	0	0	0
Baylor	0	0	0
Brown	40	43	45
Callahan	7	7	5
Clay	5	7	9
Coleman	5	6	7
Comanche	8	9	9
Cottle	0	0	0
Eastland	12	13	14
Fisher	5	0	0
Foard	0	0	0
Hardeman	0	0	0
Haskell	9	9	9
Jack	0	0	0
Jones	9	13	14
Kent	0	0	0
Knox	0	0	0
Mitchell	0	0	5
Montague	10	10	10
Nolan	14	18	13
Runnels	7	9	8
Scurry	12	13	15
Shackelford	0	0	0
Stephens	7	8	6
Stonewall	0	0	0
Taylor	227	237	240
Throckmorton	0	0	0
Wichita	147	165	165
Wilbarger	5	5	0
Young	0	7	7
Region	529	579	581
State	91,469	94,630	97,844

Table 46. County level totals for Alcohol Permits, 2018-2020

County	2018 Number of Alcohol Permits	2019 Number of Alcohol Permits	2020 Number of Alcohol Permits
Archer	20	21	19
Baylor	11	15	13
Brown	85	88	90
Callahan	29	31	33
Clay	16	19	24
Coleman	23	26	28
Comanche	36	38	40
Cottle	2	3	3
Eastland	45	47	49
Fisher	8	8	7
Foard	4	4	3
Hardeman	13	14	15
Haskell	14	12	14
Jack	18	20	20
Jones	23	24	27
Kent	0	0	0
Knox	10	11	11
Mitchell	17	17	19
Montague	47	47	46
Nolan	42	41	40
Runnels	32	32	30
Scurry	32	34	35
Shackelford	4	4	4
Stephens	24	26	29
Stonewall	4	3	3
Taylor	300	311	322
Throckmorton	1	0	1
Wichita	312	317	320
Wilbarger	31	34	33
Young	24	24	34
Region	1,227	1,271	1,312
State	58,139	59,630	61,326

Table 47. County level totals for Alcohol Permits, 2018-2020

County	2018 Density Rate Per 100k	2019 Density Rate Per 100k	2020 Density Rate Per 100k
Archer	211.4	251.7	228.8
Baylor	293.1	413.9	359.1
Brown	216.4	2,261.0	231.0
Callahan	205.1	230.4	245.1
Clay	153.7	194.1	247.6
Coleman	270.4	306.7	331.6
Comanche	258.6	290.6	308.2
Cottle	145.5	198.7	199.1
Eastland	243.8	258.2	270.0
Fisher	211.8	200.8	175.9
Foard	329.2	322.6	242.3
Hardeman	340.7	361.8	389.2
Haskell	243.8	193.6	224.5
Jack	194.6	226.2	226.5
Jones	116.4	121.6	137.0
Kent	0.0	0.0	0.0
Knox	288.6	279.4	277.8
Mitchell	205.7	172.3	192.0
Montague	239.4	244.8	240.2
Nolan	289.8	262.1	255.0
Runnels	322.0	290.7	271.0
Scurry	187.7	185.1	188.8
Shackelford	120.7	117.5	117.2
Stephens	249.0	271.7	303.0
Stonewall	288.4	197.0	196.9
Taylor	216.1	223.0	229.7
Throckmorton	65.3	0.0	66.1
Wichita	235.2	238.1	240.2
Wilbarger	417.2	260.8	254.4
Young	123.2	128.3	181.5
Region	187.27	201.26	203.32
State	214.75	227.94	234.93

Table 48. Alcohol Sales to Minors, 2017-2020

County	2017 Alcohol Sales to Minors	2018 Alcohol Sales to Minors	2019 Alcohol Sales to Minors	2020 Alcohol Sales to Minors
Archer	0	0	1	0
Baylor	0	0	1	0
Brown	0	1	2	0
Callahan	1	0	0	0
Clay	0	0	0	0
Coleman	6	1	0	0
Comanche	0	0	3	0
Cottle	0	0	0	0
Eastland	2	0	1	0
Fisher	0	0	0	0
Foard	0	0	0	0
Hardeman	1	0	0	0
Haskell	0	0	0	0
Jack	0	1	0	0
Jones	0	0	0	0
Kent	0	0	0	0
Knox	0	0	0	0
Mitchell	0	0	0	0
Montague	0	0	1	1
Nolan	0	1	1	1
Runnels	0	0	1	1
Scurry	0	1	0	0
Shackelford	0	0	0	0
Stephens	0	0	0	0
Stonewall	0	0	0	0
Taylor	6	10	13	0
Throckmorton	0	0	0	0
Wichita	6	1	11	1
Wilbarger	0	0	0	0
Young	0	0	1	0
Region	22	16	36	4
Texas	914	1,204	953	185

Table 49. County level totals for Tobacco Permits and Permit Density Per 100k, 2019-2020

County	2019 Number of Tobacco Permits	2019 Density Rate Per 100k	2020 Number of Tobacco Permits	2020 Density Rate Per 100k
Archer	17	203.7	16	192.7
Baylor	7	193.2	7	193.4
Brown	58	1,490.2	56	143.7
Callahan	23	170.9	25	185.7
Clay	17	173.7	17	175.4
Coleman	15	176.9	18	213.2
Comanche	24	183.6	27	208.0
Cottle	5	331.1	4	265.4
Eastland	43	236.2	43	236.9
Fisher	8	200.8	9	226.1
Foard	3	241.9	3	242.3
Hardeman	10	258.4	9	233.5
Haskell	13	209.8	14	224.5
Jack	12	135.7	13	147.2
Jones	22	111.5	24	121.8
Kent	1	125.8	1	125.3
Knox	9	228.6	9	227.3
Mitchell	13	131.8	13	131.4
Montague	35	182.3	27	141.0
Nolan	32	204.6	31	197.6
Runnels	17	154.4	17	153.5
Scurry	26	141.6	26	140.2
Shackelford	8	234.9	8	234.3
Stephens	18	188.1	18	188.1
Stonewall	3	197.0	3	196.9
Taylor	167	119.8	171	122.0
Throckmorton	5	329.2	4	264.4
Wichita	155	116.4	156	117.1
Wilbarger	20	153.4	17	131.0
Young	23	122.9	24	128.1
Region	809	145.09	810	145.04
State	30,937	105.97	30,761	103.65

Table 50. County Level Totals for Prescriptions Dispensed 2018-2020

COUNTY	2018 Total Prescriptions Dispensed	2019 Total Prescriptions Dispensed	2020 Total Prescriptions Dispensed
Archer	0	0	102
Baylor	6627	5916	6044
Brown	99696	93750	92845
Callahan	6786	7088	7298
Clay	7717	7771	7279
Coleman	8874	8890	8185
Comanche	21674	20566	20464
Cottle	0	0	0
Eastland	25893	26062	26085
Fisher	3753	3775	3704
Foard	1417	1185	1049
Hardeman	6160	5266	4977
Haskell	8739	8953	9063
Jack	9736	9350	8735
Jones	12862	11018	10072
Kent	0	0	0
Knox	3860	3757	3768
Mitchell	13352	11578	9965
Montague	41780	40838	39701
Nolan	23681	24085	23031
Runnels	15664	15155	14634
Scurry	24711	23156	21406
Shackelford	2258	2235	2170
Stephens	14628	13135	12093
Stonewall	1311	1277	1275
Taylor	259777	262536	261968
Throckmorton	0	0	0
Wichita	276758	260572	248686
Wilbarger	32192	29444	28751
Young	42920	36470	33473
Region	972826	933828	906823

Table 51. County Level Totals for Prescriptions Dispensed Per 100k 2020

COUNTY	2020 Total Prescriptions Dispensed	Prescriptions Per 100K
Archer	102	122.2
Baylor	6044	166.77
Brown	92845	238.53
Callahan	7298	542.36
Clay	7279	743.74
Coleman	8185	965.43
Comanche	20464	156.51
Cottle	0	0
Eastland	26085	143.28
Fisher	3704	929.48
Foard	1049	845.96
Hardeman	4977	128.6
Haskell	9063	146.24
Jack	8735	988.01
Jones	10072	510.36
Kent	0	0
Knox	3768	957.07
Mitchell	9965	101.01
Montague	39701	206.78
Nolan	23031	147.23
Runnels	14634	132.92
Scurry	21406	116.53
Shackelford	2170	637.29
Stephens	12093	126.36
Stonewall	1275	837.16
Taylor	261968	187.84
Throckmorton	0	0
Wichita	248686	186.78
Wilbarger	28751	441.03
Young	33473	178.88
Region	906823	162.38

Table 52. County Level Totals for Prescriptions Dispensed Per 1k 2020

COUNTY	2020 Total Prescriptions Dispensed	Prescriptions Per 1K
Archer	102	12.22
Baylor	6044	16.67
Brown	92845	23.85
Callahan	7298	54.23
Clay	7279	74.37
Coleman	8185	96.54
Comanche	20464	15.65
Cottle	0	0
Eastland	26085	14.32
Fisher	3704	92.94
Foard	1049	84.59
Hardeman	4977	12.86
Haskell	9063	14.62
Jack	8735	98.8
Jones	10072	51.03
Kent	0	0
Knox	3768	95.7
Mitchell	9965	10.1
Montague	39701	20.67
Nolan	23031	14.72
Runnels	14634	13.29
Scurry	21406	11.65
Shackelford	2170	63.72
Stephens	12093	12.63
Stonewall	1275	83.71
Taylor	261968	18.78
Throckmorton	0	0
Wichita	248686	18.67
Wilbarger	28751	44.1
Young	33473	17.88
Region	906823	16.23

Table 53. County Totals of 3rd Grade Students – Did Not Meet Grade Level in Math STAAR, 2018 & 2019

County	2018 Math 3rd grade STAAR # Did Not Meet	2018 Math 3rd grade STAAR % Did Not Meet	2019 Math 3rd grade STAAR # Did Not Meet	2019 Math 3rd grade STAAR % Did Not Meet
Archer	24	17%	16	14%
Baylor	4	9%	8	18%
Brown	128	27%	120	26%
Callahan	51	29%	47	26%
Clay	23	18%	25	20%
Coleman	31	32%	28	37%
Comanche	32	19%	19	12%
Cottle	3	21%	6	43%
Eastland	77	37%	42	21%
Fisher	11	27%	11	24%
Foard	7	47%	3	21%
Hardeman	13	25%	17	33%
Haskell	21	34%	17	31%
Jack	25	23%	26	24%
Jones	54	30%	68	33%
Kent	1	13%	1	10%
Knox	12	20%	7	12%
Mitchell	27	30%	23	25%
Montague	59	24%	64	25%
Nolan	27	12%	41	18%
Runnels	33	24%	29	22%
Scurry	72	30%	57	22%
Shackelford	5	11%	6	16%
Stephens	21	21%	36	34%
Stonewall	4	36%	3	20%
Taylor	659	23%	648	23%
Throckmorton	5	24%	8	40%
Wichita	478	31%	442	30%
Wilbarger	53	31%	43	28%
Young	82	29%	61	26%
Region	2,042	26%	1,922	25%

Table 54. County Totals of 3rd Grade Students – Did Not Meet Grade Level in Reading STAAR, 2018 & 2019

County	2018 Reading 3rd grade STAAR # Did Not Meet	2018 Reading 3rd grade STAAR % Did Not Meet	2019 Reading 3rd grade STAAR # Did Not Meet	2019 Reading 3rd grade STAAR % Did Not Meet
Archer	15	11%	16	14%
Baylor	3	7%	7	16%
Brown	114	24%	135	29%
Callahan	37	21%	45	25%
Clay	17	13%	23	18%
Coleman	22	23%	28	37%
Comanche	43	26%	28	18%
Cottle	3	21%	2	14%
Eastland	43	20%	38	19%
Fisher	6	15%	7	16%
Foard	5	33%	6	43%
Hardeman	18	35%	13	25%
Haskell	14	23%	15	28%
Jack	31	28%	26	24%
Jones	45	25%	64	31%
Kent	1	13%	1	10%
Knox	15	25%	11	19%
Mitchell	33	37%	36	39%
Montague	55	22%	59	23%
Nolan	36	16%	67	29%
Runnels	30	22%	23	17%
Scurry	72	31%	77	29%
Shackelford	9	20%	5	13%
Stephens	27	27%	38	36%
Stonewall	4	36%	7	47%
Taylor	620	22%	690	24%
Throckmorton	4	22%	7	35%
Wichita	447	29%	500	34%
Wilbarger	53	31%	47	31%
Young	83	30%	62	27%
Region	1,905	24%	2,083	27%

Table 55. County Total Discipline Actions 7th – 12th grade,2019

County	Discipline Action	Discipline Action Reason	Grade	Number of Actions
Taylor	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	9	25
Taylor	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	10	12
Taylor	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	7	10
Taylor	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	9	35
Taylor	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	10	20
Wichita	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	9	34
Wichita	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	10	27
Wichita	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	11	26
Wichita	Out-of-School Suspension	CONTROLLED SUBSTANCE/DRUGS	12	28
Wichita	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	9	36
Wichita	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	10	27
Wichita	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	11	29
Wichita	Placement In On/Off Camp DAEP	CONTROLLED SUBSTANCE/DRUGS	12	32

Table 56. County Level Total Child Abuse/Neglect Confirmed Victims 2018-2020

COUNTY	2018 Number of Confirmed Victims	2019 Number of Confirmed Victims	2020 Number of Confirmed Victims
Archer	16	14	17
Baylor	12	14	20
Brown	191	232	293
Callahan	70	48	45
Clay	35	20	25
Coleman	56	51	54
Comanche	42	58	30
Cottle	3	9	3
Eastland	61	76	56
Fisher	18	8	21
Foard	5	4	3
Hardeman	9	6	9
Haskell	28	23	16
Jack	46	43	36
Jones	122	95	63
Kent	3	1	0
Knox	10	13	12
Mitchell	59	33	64
Montague	139	138	115
Nolan	125	102	107
Runnels	41	26	34
Scurry	88	68	77
Shackelford	15	4	3
Stephens	25	36	27
Stonewall	19	4	8
Taylor	912	862	943
Throckmorton	3	1	8
Wichita	504	485	526
Wilbarger	43	55	53
Young	61	64	62
Region	2761	2593	2730

Table 57. County Level Total Children in Substitute Care 2018-2020.

COUNTY	2018 Children in Substitute Care	2019 Children in Substitute Care	2020 Children in Substitute Care
Archer	3	5	10
Baylor	7	6	16
Brown	144	151	156
Callahan	22	17	25
Clay	16	10	8
Coleman	40	28	26
Comanche	17	26	18
Cottle	1	1	3
Eastland	29	22	27
Fisher	6	1	4
Foard	4	1	4
Hardeman	2	2	1
Haskell	19	13	12
Jack	13	11	12
Jones	57	72	48
Kent	0	0	0
Knox	1	2	4
Mitchell	21	20	29
Montague	50	40	41
Nolan	45	43	59
Runnels	24	24	17
Scurry	33	27	43
Shackelford	9	4	2
Stephens	11	13	14
Stonewall	1	1	1
Taylor	433	486	473
Throckmorton	0	1	5
Wichita	243	249	240
Wilbarger	25	20	32
Young	33	41	38
Region	1309	1337	1368

Table 58. County Level Total Single-Parent Households 2017-2019

County	2017 % Single-parent Households	2017 Total Households children under 18 years	2018 % Single-parent Households	2018 Total Households children under 18 years	2019 % Single-parent Households	2019 Total Households children under 18 years
Archer	4.7%	1,002	6.5%	1,044	4.7%	1,097
Baylor	6.2%	415	4.2%	411	2.2%	401
Brown	7.3%	4,349	7.9%	4,546	5.2%	4,432
Callahan	5.5%	1,246	4.7%	1,273	3.8%	1,315
Clay	6.9%	1,157	5.2%	1,122	4.3%	1,162
Coleman	8.1%	1,076	6.9%	1,006	2.7%	960
Comanche	6.6%	1,460	6.7%	1,479	3.8%	1,530
Cottle	9.8%	205	12.4%	199	12.0%	244
Eastland	3.0%	1,206	3.7%	1,224	3.2%	1,341
Fisher	3.3%	412	4.5%	451	4.2%	443
Foard	3.3%	146	3.4%	138	4.0%	135
Hardeman	4.3%	418	5.9%	431	3.9%	436
Haskell	11.7%	597	10.7%	594	10.1%	622
Jack	6.9%	1,056	7.6%	1,054	7.0%	1,110
Jones	9.0%	1,846	7.3%	1,688	7.4%	1,815
Kent	1.8%	66	0.0%	76	0.0%	77
Knox	8.4%	435	10.0%	386	6.1%	397
Mitchell	8.8%	786	6.2%	732	3.9%	826
Montague	6.5%	2,326	7.4%	2,461	5.8%	2,218
Nolan	9.8%	1,774	6.7%	1,686	6.9%	1,791
Runnels	8.5%	1,207	9.6%	1,158	4.8%	1,175
Scurry	8.7%	1,881	7.2%	1,923	6.5%	2,046
Shackelford	10.8%	389	7.4%	334	7.2%	382
Stephens	6.8%	1,038	9.5%	1,101	9.4%	1,102
Stonewall	2.6%	90	4.0%	111	1.6%	172
Taylor	10.1%	15,946	10.3%	16,329	7.5%	16,627
Throckmorton	4.9%	178	7.0%	168	5.1%	144
Wichita	11.5%	15,863	10.4%	15,009	7.4%	14,637
Wilbarger	12.4%	1,662	12.1%	1,569	3.9%	1,426
Young	7.7%	2,303	10.1%	2,324	7.1%	2,216
Region	30.95%	62,535	30.79%	62,027	30.63%	62,279
Texas	27.85%	3,530,159	37.10%	3,542,083	35.70%	3,563,862

Table 59. TSS Parental Disapproval 2020

State/Region	2020 TSS Parental Disapproval of Alcohol	2020 TSS Parental Disapproval of Tobacco	2020 TSS Parental Disapproval of Marijuana
Texas			
All Grades	75.3%	85.6%	82.4%
7th	82.3%	87.2%	86.8%
8th	81.0%	87.6%	86.4%
9th	78.8%	87.6%	84.5%
10th	73.0%	84.6%	80.3%
11th	71.0%	85.0%	78.9%
12th	63.2%	81.0%	76.1%
Region 2			
All Grades	74.2%	83.8%	79.5%
7th	83.3%	87.7%	86.1%
8th	77.9%	85.4%	84.3%
9th	72.6%	84.7%	77.8%
10th	75.1%	84.6%	79.9%
11th	69.8%	84.1%	77.1%
12th	65.0%	75.7%	70.4%

Table 60. TSS How Many Close Friends Use? 2020

State/Region	2020 TSS Close Friends Use Alcohol	2020 TSS Close Friends Use Tobacco	2020 TSS Close Friends Use Marijuana
Texas			
All Grades	12.4%	4.7%	11.6%
7th	2.3%	90.0%	1.9%
8th	4.9%	1.7%	5.2%
9th	9.6%	4.2%	10.9%
10th	15.4%	4.9%	15.7%
11th	19.4%	7.0%	17.5%
12th	26.5%	10.9%	21.5%
Region 2			
All Grades	12.3%	4.3%	12.2%
7th	4.2%	0.9%	4.4%
8th	6.8%	1.5%	6.8%
9th	10.7%	4.6%	14.9%
10th	11.7%	3.6%	14.1%
11th	19.4%	7.5%	16.6%
12th	22.7%	8.9%	17.9%

Table 61. TSS How Easy Would It Be to Get Alcohol, Tobacco, Marijuana 2020

State/Region	2020 TSS How Easy Would It Be to Get Alcohol	2020 TSS How Easy Would It Be to Get Tobacco	2020 TSS How Easy Would It Be to Get Marijuana
Texas			
All Grades	44.3%	28.3%	29.5%
7th	24.0%	10.2%	6.3%
8th	33.3%	18.2%	16.0%
9th	44.4%	26.9%	27.2%
10th	54.3%	35.2%	39.0%
11th	55.5%	38.9%	44.3%
12th	59.1%	45.9%	51.4%
Region 2			
All Grades	46.8%	33.3%	30.7%
7th	29.8%	16.5%	10.2%
8th	35.0%	25.2%	21.4%
9th	46.8%	32.8%	29.0%
10th	51.2%	34.6%	33.9%
11th	59.3%	44.8%	46.3%
12th	63.5%	50.4%	48.6%

Table 62. TSS Prescriptions not Prescribed Use 2020

State/Region	2020 TSS NEVER Used Prescription Drug Not Prescribed	2020 TSS EVER Used Prescription Drug Not Prescribed	2020 TSS PAST MONTH Used Prescription Drug Not Prescribed
Texas			
All Grades	82.8%	17.2%	6.1%
7th	86.3%	13.7%	5.3%
8th	81.7%	18.3%	6.9%
9th	82.7%	17.3%	7.0%
10th	83.1%	16.9%	5.5%
11th	82.8%	17.2%	6.0%
12th	79.7%	20.3%	5.7%
Region 2			
All Grades	79.3%	20.7%	7.2%
7th	81.6%	18.4%	8.8%
8th	79.2%	20.8%	7.0%
9th	79.8%	20.2%	6.9%
10th	83.0%	17.0%	5.5%
11th	74.0%	26.0%	9.0%
12th	77.2%	22.8%	5.8%

Table 63. TSS Alcohol Used at Parties Students Attended During School Year 2020

State/Region	2020 TSS Alcohol Used at Parties Most of the Time	2020 TSS Alcohol Used at Parties Always	2020 TSS Alcohol Used at Parties Never
Texas			
All Grades	8.2%	8.7%	52.0%
7th	3.5%	1.5%	72.7%
8th	4.9%	3.9%	63.4%
9th	7.2%	5.6%	51.4%
10th	11.7%	10.1%	42.3%
11th	10.9%	14.4%	40.8%
12th	12.4%	19.8%	36.6%
Region 2			
All Grades	7.8%	7.8%	48.9%
7th	3.6%	2.7%	65.6%
8th	5.2%	3.5%	60.7%
9th	10.6%	4.3%	45.9%
10th	8.7%	8.1%	44.7%
11th	10.5%	13.8%	34.1%
12th	8.3%	16.5%	38.9%

Table 64. TSS Marijuana Used at Parties Students Attended During School Year 2020

State/Region	2020 TSS Marijuana Used at Parties Most of the Time	2020 TSS Marijuana Used at Parties Always	2020 TSS Marijuana Used at Parties Never
Texas			
All Grades	5.1%	5.3%	60.9%
7th	0.9%	0.5%	83.3%
8th	2.1%	2.2%	73.5%
9th	4.4%	3.7%	60.3%
10th	6.7%	5.8%	51.2%
11th	9.0%	8.8%	48.4%
12th	9.0%	12.7%	43.4%
Region 2			
All Grades	5.0%	5.0%	57.7%
7th	2.1%	1.4%	74.4%
8th	2.8%	2.5%	70.0%
9th	5.0%	4.5%	54.6%
10th	7.8%	5.0%	52.3%
11th	6.1%	8.1%	44.6%
12th	7.0%	9.1%	47.0%

Table 65. TSS How Dangerous is Alcohol for Kids Your Age to Use? 2020

State/Region	2020 TSS Alcohol is Very Dangerous	2020 TSS Alcohol is Somewhat Dangerous	2020 TSS Alcohol is Not Very Dangerous	2020 TSS Alcohol is Not at All Dangerous
Texas				
All Grades	47.8%	30.5%	14.5%	2.7%
7th	58.5%	24.6%	10.1%	2.0%
8th	51.6%	28.1%	13.1%	2.4%
9th	47.4%	31.0%	15.0%	2.8%
10th	42.6%	32.0%	17.3%	3.0%
11th	42.4%	34.0%	15.6%	3.3%
12th	42.4%	34.5%	16.6%	2.8%
Region 2				
All Grades	47.8%	31.5%	15.2%	1.9%
7th	59.8%	24.7%	10.6%	1.0%
8th	50.6%	26.3%	16.6%	1.9%
9th	47.6%	32.8%	15.6%	1.0%
10th	47.8%	31.3%	15.7%	1.6%
11th	42.2%	33.9%	16.3%	3.8%
12th	36.2%	42.3%	17.1%	2.5%

Table 66. TSS How Dangerous is Tobacco for Kids Your Age to Use? 2020

State/Region	2020 TSS Tobacco is Very Dangerous	2020 TSS Tobacco is Somewhat Dangerous	2020 TSS Tobacco is Not Very Dangerous	2020 TSS Tobacco is Not at All Dangerous
Texas				
All Grades	61.5%	24.7%	6.7%	1.6%
7th	74.4%	16.3%	3.5%	0.6%
8th	68.5%	20.7%	4.8%	1.2%
9th	62.5%	24.4%	7.0%	1.3%
10th	56.3%	26.9%	7.8%	2.0%
11th	53.1%	31.3%	7.8%	2.0%
12th	50.7%	30.7%	10.2%	2.6%
Region 2				
All Grades	59.8%	26.0%	8.1%	1.4%
7th	70.7%	20.1%	3.9%	1.1%
8th	67.1%	19.3%	6.7%	0.6%
9th	62.9%	23.7%	8.1%	0.5%
10th	58.2%	27.3%	9.1%	1.7%
11th	53.4%	30.9%	8.0%	2.5%
12th	42.5%	37.7%	13.9%	2.1%

Table 67. TSS How Dangerous is E-Vapor Products for Kids Your Age to Use? 2020

State/Region	2020 TSS E-Vapor Products is Very Dangerous	2020 TSS E-Vapor Products is Somewhat Dangerous	2020 TSS E-Vapor Products is Not Very Dangerous	2020 TSS E-Vapor Products is Not at All Dangerous
Texas				
All Grades	54.7%	12.4%	14.6%	11.8%
7th	71.1%	11.6%	6.6%	4.6%
8th	62.5%	12.7%	10.2%	8.0%
9th	51.4%	12.3%	15.9%	14.0%
10th	48.3%	13.3%	17.8%	13.3%
11th	47.3%	13.0%	19.6%	14.6%
12th	45.6%	11.8%	18.4%	17.5%
Region 2				
All Grades	61.1%	19.9%	11.0%	3.6%
7th	69.1%	15.8%	7.4%	2.7%
8th	68.3%	14.1%	9.6%	3.3%
9th	61.4%	18.7%	12.5%	3.1%
10th	57.7%	22.8%	11.4%	3.5%
11th	53.6%	25.5%	13.0%	4.1%
12th	54.3%	24.0%	12.6%	5.2%

Table 68. TSS How Dangerous is E-Vapor Products for Kids Your Age to Use? 2020

State/Region	2020 TSS Marijuana is Very Dangerous	2020 TSS Marijuana is Somewhat Dangerous	2020 TSS Marijuana is Not Very Dangerous	2020 TSS Marijuana is Not at All Dangerous
Texas				
All Grades	56.9%	14.3%	12.9%	10.5%
7th	73.3%	10.4%	3.5%	2.6%
8th	68.2%	12.7%	8.2%	5.6%
9th	59.8%	15.4%	11.6%	7.9%
10th	47.4%	16.1%	16.5%	14.1%
11th	43.5%	15.4%	19.2%	16.4%
12th	38.7%	16.2%	21.4%	19.0%
Region 2				
All Grades	54.3%	14.9%	13.9%	12.2%
7th	73.7%	11.8%	5.8%	4.5%
8th	65.7%	13.4%	6.9%	9.7%
9th	5.3%	14.7%	14.7%	10.7%
10th	48.3%	19.0%	14.9%	12.5%
11th	42.8%	17.6%	16.7%	17.7%
12th	35.0%	13.6%	26.9%	20.2%

Table 69 TSS How Dangerous Prescriptions Not Prescribed to You to Use? 2020

State/Region	2020 TSS Prescriptions Not Prescribed is Very Dangerous	2020 TSS Prescriptions Not Prescribed is Somewhat Dangerous	2020 TSS Prescriptions Not Prescribed is Not Very Dangerous	2020 TSS Prescriptions Not Prescribed is Not at All Dangerous
Texas				
All Grades	73.6%	13.8%	4.0%	1.3%
7th	79.5%	8.9%	2.8%	0.8%
8th	74.7%	12.6%	4.1%	1.7%
9th	72.6%	15.0%	4.4%	1.5%
10th	71.8%	15.4%	4.6%	1.6%
11th	70.5%	15.7%	5.1%	1.3%
12th	71.8%	16.1%	3.4%	0.9%
Region 2				
All Grades	76.2%	13.2%	3.8%	1.1%
7th	79.3%	10.6%	2.9%	1.7%
8th	80.0%	9.0%	3.3%	0.7%
9th	78.0%	11.8%	3.7%	1.3%
10th	72.8%	17.5%	3.5%	0.7%
11th	71.3%	17.2%	5.2%	1.3%
12th	74.8%	14.4%	4.1%	0.9%

Appendix B

Table 70. TSS 30 Day Use of Alcohol 2020

State/Region	2020 TSS 30 Day use Any Alcohol	2020 TSS 30 Day use Beer	2020 TSS 30 Day use Wine Cooler	2020 TSS 30 Day use Wine	2020 TSS 30 Day use Liquor
Texas					
All Grades	27.4%	9.9%	8.5%	6.9%	10.7%
7th	16.5%	4.2%	2.7%	3.1%	2.8%
8th	21.5%	6.7%	4.8%	5.0%	5.9%
9th	26.0%	8.4%	7.5%	6.7%	9.9%
10th	30.8%	11.9%	9.9%	7.6%	12.8%
11th	31.9%	13.2%	11.5%	7.5%	14.6%
12th	41.6%	17.0%	16.8%	12.7%	21.1%
Region 2					
All Grades	29.2%	11.7%	9.2%	7.8%	11.8%
7th	16.4%	5.0%	4.1%	4.0%	4.3%
8th	23.2%	7.6%	5.1%	3.7%	6.5%
9th	32.4%	11.0%	7.9%	8.1%	11.1%
10th	28.0%	11.3%	9.0%	7.3%	11.6%
11th	37.5%	17.5%	14.9%	11.8%	18.2%
12th	41.3%	20.3%	16.8%	13.2%	22.0%

Table 71. TSS Lifetime Use of Alcohol 2020

State/Region	2020 TSS Lifetime use Any Alcohol	2020 TSS Lifetime use Beer	2020 TSS Lifetime use Wine Cooler	2020 TSS Lifetime use Wine	2020 TSS Lifetime use Liquor
Texas					
All Grades	50.5%	37.7%	29.7%	32.0%	34.6%
7th	35.9%	26.9%	15.2%	20.8%	16.7%
8th	43.5%	32.8%	21.4%	26.4%	24.7%
9th	50.8%	35.7%	28.7%	31.2%	33.8%
10th	55.8%	41.9%	34.6%	36.0%	41.1%
11th	57.1%	43.2%	37.3%	36.9%	42.7%
12th	63.9%	49.2%	45.5%	44.3%	54.3%
Region 2					
All Grades	54.8%	42.3%	32.4%	33.9%	38.3%
7th	40.2%	32.3%	17.4%	23.1%	19.6%
8th	500.0%	38.7%	25.2%	27.5%	30.3%
9th	58.5%	42.1%	32.3%	35.9%	39.9%
10th	51.9%	41.1%	33.1%	31.0%	38.6%
11th	65.7%	51.1%	44.4%	42.6%	51.1%
12th	66.1%	51.3%	46.6%	46.4%	55.1%

Table 72. TSS Underage Binge Drinking 2020

State/Region	2020 TSS Binge Drinking Never/None	2020 TSS Binge Drinking 1 Day	2020 TSS Binge Drinking 2 Days	2020 TSS Binge Drinking 3 to 5 Days	2020 TSS Binge Drinking 6 to 9 Days	2020 TSS Binge Drinking 10+ Days
Texas						
All Grades	89.4%	4.0%	2.3%	2.3%	0.7%	1.3%
7th	96.1%	1.9%	0.6%	0.4%	0.2%	0.9%
8th	94.7%	1.9%	1.2%	1.3%	0.3%	0.6%
9th	91.1%	3.8%	1.7%	1.8%	0.6%	1.1%
10th	87.9%	5.2%	2.2%	2.2%	1.0%	1.6%
11th	85.0%	4.9%	4.1%	3.4%	0.9%	1.8%
12th	79.3%	6.9%	5.0%	5.1%	1.4%	2.3%
Region 2						
All Grades	87.5%	4.9%	2.4%	2.5%	1.0%	1.6%
7th	94.1%	2.8%	0.5%	1.6%	0.4%	0.6%
8th	92.7%	3.4%	1.0%	0.8%	0.4%	1.7%
9th	87.2%	5.9%	2.6%	2.3%	0.5%	1.5%
10th	89.0%	3.4%	2.9%	2.4%	0.9%	1.5%
11th	80.8%	6.5%	3.5%	4.8%	3.0%	1.4%
12th	79.4%	7.9%	4.4%	3.8%	1.4%	3.1%

Table 73. TSS Marijuana 30-Day, School Year, and Lifetime Use 2020

State/Region	2020 TSS 30 Day Marijuana Use	2020 TSS School Year Marijuana Use	2020 TSS Lifetime Use Marijuana Use
Texas			
All Grades	12.4%	15.1%	20.8%
7th	3.4%	3.9%	5.3%
8th	7.1%	8.3%	11.7%
9th	11.6%	13.8%	17.4%
10th	14.9%	18.5%	25.9%
11th	18.3%	22.6%	30.6%
12th	22.0%	27.4%	39.9%
Region 2			
All Grades	14.2%	16.5%	23.8%
7th	5.2%	5.7%	7.8%
8th	9.1%	11.2%	16.2%
9th	15.4%	18.0%	24.1%
10th	15.0%	17.1%	26.9%
11th	20.6%	23.4%	33.6%
12th	22.1%	26.8%	38.8%

Table 74. TSS Tobacco 30-Day, School Year, and Lifetime Use 2020

State/Region	2020 TSS 30 Day Tobacco Use	2020 TSS School Year Tobacco Use	2020 TSS Lifetime Use Tobacco Use
Texas			
All Grades	14.2%	17.9%	30.2%
7th	4.4%	5.8%	13.2%
8th	9.6%	12.1%	23.1%
9th	13.7%	16.5%	27.7%
10th	16.8%	22.0%	37.3%
11th	19.1%	24.1%	38.9%
12th	24.7%	30.9%	45.7%
Region 2			
All Grades	17.0%	22.2%	36.6%
7th	7.1%	9.7%	22.0%
8th	12.9%	16.9%	29.1%
9th	16.4%	23.2%	38.4%
10th	17.4%	22.7%	38.0%
11th	25.0%	31.2%	47.2%
12th	25.8%	32.7%	49.0%

Table 75. TSS Electronic Vapor Product 30-Day, School Year, and Lifetime Use 2020

State/Region	2020 TSS 30 Day Electronic Vapor Products Use	2020 TSS School Year Electronic Vapor Products Use	2020 TSS Lifetime Use Electronic Vapor Products Use
Texas			
All Grades	10.9%	15.1%	27.0%
7th	2.6%	4.1%	10.5%
8th	6.9%	9.7%	20.2%
9th	10.2%	13.8%	25.1%
10th	12.7%	18.7%	33.3%
11th	15.3%	20.7%	35.5%
12th	20.4%	27.2%	41.8%
Region 2			
All Grades	12.9%	19.0%	32.6%
7th	5.2%	7.6%	18.8%
8th	8.0%	12.5%	25.1%
9th	12.4%	21.0%	34.2%
10th	13.5%	19.9%	33.7%
11th	20.8%	28.2%	45.0%
12th	20.0%	27.7%	42.3%

Table 76. TSS Prescription Drugs Not Prescribed 30-Day, School Year, and Lifetime Use 2020

State/Region	2020 TSS 30 Day Prescription Drugs Not Prescribed Use	2020 TSS School Year Prescription Drugs Not Prescribed Use	2020 TSS Lifetime Use Prescription Drugs Not Prescribed Use
Texas			
All Grades	6.1%	8.9%	17.2%
7th	5.3%	7.7%	13.7%
8th	6.9%	10.0%	18.3%
9th	7.0%	9.2%	17.3%
10th	5.5%	8.9%	16.9%
11th	6.0%	8.8%	17.2%
12th	5.7%	8.6%	20.3%
Region 2			
All Grades	7.2%	10.2%	20.7%
7th	8.8%	11.3%	18.4%
8th	7.0%	9.9%	20.8%
9th	6.9%	9.9%	20.2%
10th	5.5%	8.0%	17.0%
11th	9.0%	12.1%	26.0%
12th	5.8%	10.1%	22.8%

Table 77. TSS Illicit Drug 30-Day, School Year, and Lifetime Use 2020

State/Region	2020 TSS 30 Day Illicit Drug Use	2020 TSS School Year Illicit Drug Use	2020 TSS Lifetime Use Illicit Drug Use
Texas			
All Grades	13.0%	17.1%	22.7%
7th	4.4%	6.0%	7.7%
8th	7.8%	10.9%	14.7%
9th	12.1%	15.7%	18.9%
10th	15.1%	20.2%	27.7%
11th	18.8%	24.2%	31.5%
12th	22.1%	29.4%	41.0%
Region 2			
All Grades	15.0%	18.9%	25.7%
7th	6.0%	8.9%	11.2%
8th	10.6%	13.8%	18.3%
9th	16.1%	19.7%	25.4%
10th	15.5%	19.6%	28.5%
11th	21.2%	25.7%	35.7%
12th	22.9%	28.2%	39.5%

Table 78. Vehicular Alcohol Fatalities 2018- 2020

County	2018 Alcohol Related Vehicular Fatalities	2019 Alcohol Related Vehicular Fatalities	2020 Alcohol Related Vehicular Fatalities
Archer	0	0	0
Baylor	0	1	1
Brown	1	0	2
Callahan	1	0	1
Clay	2	1	0
Coleman	1	2	0
Comanche	0	1	0
Cottle	0	0	0
Eastland	1	0	3
Fisher	0	0	0
Foard	0	0	0
Hardeman	1	0	1
Haskell	0	0	1
Jack	1	0	0
Jones	0	2	1
Kent	0	0	0
Knox	0	0	2
Mitchell	0	0	1
Montague	2	2	0
Nolan	3	2	1
Runnels	1	0	2
Scurry	2	0	0
Shackelford	0	0	0
Stephens	0	1	1
Stonewall	0	0	0
Taylor	3	2	2
Throckmorton	1	0	0
Wichita	3	3	3
Wilbarger	0	0	0
Young	0	0	0
Region	23	17	22
Texas	618	591	638

Table 79. County Level Combined Deaths 1999-2019

County	1999-2019 Combined Deaths	1999-2019 Population	Crude Rate Per 100k
Archer	52	186164	27.9
Baylor	29	79336	36.6
Brown	191	796657	24.0
Callahan	58	281167	20.6
Clay	59	226602	26.0
Coleman	36	183480	19.6
Comanche	34	288061	11.8
Cottle	0	0	0.0
Eastland	45	385909	11.7
Fisher	14	84536	Unreliable
Foard	0	0	0.0
Hardeman	11	88942	Unreliable
Haskell	21	123266	16.4
Jack	32	187556	17.1
Jones	57	423436	13.5
Kent	0	0	0.0
Knox	0	0	0.0
Mitchell	44	193374	22.8
Montague	105	409691	25.6
Nolan	96	316888	30.8
Runnels	34	223462	15.2
Scurry	73	350191	20.8
Shackelford	0	0	0.0
Stephens	33	199351	16.6
Stonewall	0	0	0.0
Taylor	569	2751257	20.7
Throckmorton	0	0	0.0
Wichita	789	2759505	28.6
Wilbarger	49	284897	17.2
Young	119	380306	31.3
Region	2550	11204034	22.8
Texas	89913	519544055	16.2

Table 80. County Level Alcohol Induced Deaths 1999-2019

County	1999-2019 Alcohol Induced Deaths	1999-2019 Population	Crude Rate Per 100k
Archer	22	186164	11.8
Baylor	11	79336	Unreliable
Brown	82	796657	10.3
Callahan	30	281167	10.7
Clay	32	226602	14.1
Coleman	28	183480	15.3
Comanche	11	288061	Unreliable
Cottle	0	0	0.0
Eastland	20	385909	8.7
Fisher	0	0	0.0
Foard	0	0	0.0
Hardeman	0	0	0.0
Haskell	10	123266	Unreliable
Jack	12	187556	Unreliable
Jones	34	423436	8.0
Kent	0	0	0.0
Knox	0	0	0.0
Mitchell	32	193374	16.5
Montague	44	409691	10.7
Nolan	53	316888	16.7
Runnels	22	223462	9.8
Scurry	37	350191	10.6
Shackelford	0	0	0.0
Stephens	23	199351	11.5
Stonewall	0	0	0.0
Taylor	281	2751257	10.2
Throckmorton	0	0	0.0
Wichita	357	2759505	12.9
Wilbarger	17	284897	Unreliable
Young	39	380306	10.3
Region	1197	11030556	10.9
Texas	34075	519544055	6.6

Table 81. County Level Drug Induced Deaths 1999-2019

County	1999-2019 Drug Induced Deaths	1999-2019 Population	Crude Rate Per 100k
Archer	30	186164	16.1
Baylor	18	79336	Unreliable
Brown	109	796657	13.7
Callahan	28	281167	10.0
Clay	27	226602	11.9
Coleman	0	0	0.0
Comanche	23	288061	8.0
Cottle	0	0	0.0
Eastland	25	385909	6.5
Fisher	0	0	0.0
Foard	0	0	0.0
Hardeman	0	0	0.0
Haskell	11	123266	Unreliable
Jack	20	187556	10.7
Jones	23	423436	5.4
Kent	0	0	0.0
Knox	0	0	0.0
Mitchell	12	193374	Unreliable
Montague	61	409691	14.9
Nolan	43	316888	13.6
Runnels	12	223462	Unreliable
Scurry	36	350191	10.3
Shackelford	0	0	0.0
Stephens	10	199351	Unreliable
Stonewall	0	0	0.0
Taylor	288	2751257	10.5
Throckmorton	0	0	0.0
Wichita	432	2759505	15.7
Wilbarger	32	284897	11.2
Young	80	380306	21.0
Region	1320	10847076	12.2
Texas	49838	519544055	9.6

Table 82. County Deaths by Suicide 1999-2019

County	1999-2019 Suicide Deaths	1999-2019 Population	Crude Rate Per 100k
Archer	20	126,842	15.8
Brown	115	530,360	21.7
Callahan	47	194,290	24.2
Clay	36	159,241	22.6
Coleman	15	130,434	Unreliable
Comanche	27	197,730	13.7
Eastland	47	259,549	18.1
Fisher	10	59,634	Unreliable
Haskell	27	87,788	30.8
Jack	20	127,046	15.7
Jones	79	297,994	26.5
Mitchell	21	131,943	15.9
Montague	82	285,133	28.8
Nolan	47	206,391	22.8
Runnels	24	15,101	15.9
Scurry	35	226,737	15.4
Stephens	33	135,174	24.4
Taylor	325	1,667,366	19.5
Wichita	374	1,726,651	21.7
Wilbarger	40	185,131	21.6
Young	61	258,741	24.7
Region	1485	7,009,276	21.2
Texas	50,119	325,545,390	15.4

Table 83. County Level Total Positive COVID-19 Cases as of August 16, 2021

County	Confirmed Cases	Deaths	Persons Receiving at Least One Dose of Vaccine
Archer	732	12	3,611
Baylor	136	13	1,291
Brown	2,397	127	13,461
Callahan	674	41	4,629
Clay	998	17	3,947
Coleman	576	36	2,772
Comanche	1,280	52	5,424
Cottle	149	7	497
Eastland	1,038	51	5,912
Fisher	337	14	1,215
Foard	101	10	467
Hardeman	342	12	1,578
Haskell	213	28	2,075
Jack	567	16	2,983
Jones	1,913	57	7,830
Kent	45	2	268
Knox	175	18	1,266
Mitchell	667	31	2,661
Montague	1,924	74	6,362
Nolan	1,660	54	5,661
Runnels	835	42	3,958
Scurry	2,493	62	6,649
Shackelford	139	5	1,087
Stephens	450	27	2,947
Stonewall	51	6	495
Taylor	7,930	420	56,175
Throckmorton	51	5	574
Wichita	1,619	395	52,161
Wilbarger	1,662	56	5,611
Young	2,062	45	6,240
Region	33,216	1,735	209,807
Texas	2,808,388	53,091	15,725,309

Appendix C

Table 84. Data Coordinator Contact Information

2020 Data Coordinator		
Region	Evaluator	Email
1	Lisa Howe	lhowe@mail.ci.lubbock.tx.us
2	Cindy Frazier	cfrazier@abirecovery.org
3	Kaothar Ibrahim Hashim	k.ibrahimhashim@recoverycouncil.org
4	Mindy Robertson	mrobertson@etcada.com
5	Kim Bartel	kbartel@adacdet.org
6	Melissa Romain-Harrott	mromain-harrott@councilonrecovery.org
7	Jared Datzman	jdatzman@bvccasa.org
8	Danielle Johnson	djohnson@sacada.org
9	Travis Cress	tcress@pbrcada.org
10	Michelle Millen	mmillen@aliviane.org
11	Karen Rodriguez	krodriguez@bhsst.org

Table 85. Texas Health and Human Services Regions

Prevention Resource Center Health and Human Services Regions		
Region	Area	Counties
1	Amarillo, Lubbock	Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum
2	Wichita Falls, Abilene	Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackelford, Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young
3	Dallas/Fort Worth, Arlington	Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise
4	Texarkana, Longview, Tyler	Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood
5	Beaumont, Port Arthur	Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler
6	Houston-Galveston, Conroe	Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton
7	Austin, Round Rock, Killeen, Temple, Bryan/College Station, Waco	Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson
8	San Antonio, New Braunfels, Victoria	Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala
9	Midland/Odessa, San Angelo	Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler
10	El Paso	Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio
11	Corpus Christi, Brownsville, Harlingen, McAllen, Edinburg, Mission, Laredo	Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata

Glossary of Terms

30 Day Use	The percentage of people who have used a substance in the 30 days before they participated in the survey.
ACES	Adverse Childhood Experiences. Potentially traumatic events that occur in childhood (0-17 years) such as experiencing violence, abuse, or neglect; witnessing violence in the home; and having a family member attempt or die by suicide. Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding such as growing up in a household with substance misuse, mental health problems, or instability due to parental separation or incarceration of a parent, sibling, or other member of the household.
Adolescent	An individual between the ages of 12 and 17 years.
ATOD	Alcohol, tobacco, and other drugs.
BRFSS	Behavioral Risk Factor Surveillance System. Health-related telephone survey that collects state data about U.S. residents regarding their health-related behaviors, chronic health conditions, and use of preventive services.
Counterfeit Drug	A medication or pharmaceutical item which is fraudulently produced and/or mislabeled then sold with the intent to deceptively represent its origin, authenticity, or effectiveness. Counterfeit drugs include drugs that contain no active pharmaceutical ingredient (API), an incorrect amount of API, an inferior-quality API, a wrong API, contaminants, or repackaged expired products.
DSHS	Department of State Health Services. A state agency of Texas that assists Texans who need services or help. The agency's mission is to improve the health, safety, and well-being of Texans through good stewardship of public resources and a focus on core public health functions.
Drug	A medicine or other substance which has a physiological effect when ingested or otherwise introduced into the body. Drugs can affect how the brain and the rest of the body work and cause changes in mood, awareness, thoughts, feelings, or behavior.

<i>Epidemiology</i>	The study (scientific, systematic, and data driven) and analysis of the distribution (who, when, and where), patterns, and determinants of health and disease conditions in defined populations.
<i>Evaluation</i>	Systematic application of scientific and statistical procedures for measuring program conceptualization, design, implementation, and utility, making comparisons based on these measurements, and the use of the resulting information to optimize program outcomes. The primary purpose is to gain insight to assist in future change.
<i>HHS</i>	Health and Human Services. The mission of the U.S. Department of Health and Human Services is to enhance the health and well-being of all Americans, by providing for effective health and human services and by fostering sound, sustained advances in the sciences underlying medicine, public health, and social services.
<i>Incidence</i>	The occurrence, rate, or frequency of a disease, crime, or something else undesirable. A measure of the risk for new substance abuse cases within a region.
<i>LGBTQIA+</i>	An inclusive term covering people of all genders and sexualities, such as lesbian, gay, bisexual, transgender, questioning, queer, intersex, asexual, pansexual, and allies.
<i>MAT</i>	Medication-Assisted Treatment. The use of medications, in combination with counseling and behavioral therapies, to provide a “whole patient” approach to the treatment of substance use disorders.
<i>Neurotoxin</i>	Synthetic or naturally occurring substances that damage, destroy, or impair nerve tissue and the function of the nervous system. They inhibit communication between neurons across a synapse.
<i>Person-Centered Language</i>	Language that puts people first. A person’s identity and self-image are closely linked to the words used to describe them. Using person-centered language is about respecting the dignity, worth, unique qualities, and strengths of every individual. It reinforces the idea that people are so much more than their substance use disorder, mental illness, or disability.
<i>PRC</i>	Prevention Resource Center. Prevention Resource Centers provide information about substance use to the general community and help track substance use problems. They provide trainings, support community programs and tobacco prevention activities, and connect people with community resources related to drug and alcohol use.

<i>Prevalence</i>	The proportion of the population within the region found to already have a certain substance abuse problem.
<i>Protective Factor</i>	Conditions or attributes (skills, strengths, resources, supports or coping strategies) in individuals, families, communities, or the larger society that help people deal more effectively with stressful events and mitigate or eliminate risk in families and communities.
<i>Recovery</i>	A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.
<i>Risk Factor</i>	Conditions, behaviors, or attributes in individuals, families, communities, or the larger society that contribute to or increase the risk in families and communities.
<i>Self-Directed Violence</i>	Anything a person does intentionally that can cause injury to self, including death.
<i>SPF</i>	Strategic Prevention Framework. The idea behind the SPF is to use findings from public health research along with evidence-based prevention programs to build capacity and sustainable prevention. This, in turn, promotes resilience and decreases risk factors in individuals, families, and communities.
<i>Stigma</i>	The stigma of addiction—the mark of disgrace or infamy associated with the disease—stems from behavioral symptoms and aspects of substance use disorder. The concept of stigma describes the powerful, negative perceptions commonly associated with substance abuse and addiction. Stigma has the potential to negatively affect a person’s self-esteem, damage relationships with loved ones, and prevent those suffering from addiction from accessing treatment.
<i>SDoH</i>	Social Determinants of Health. The economic and social conditions that influence individual and group differences in health status.
<i>Substance Abuse</i>	When alcohol or drug use adversely affects the health of the user or when the use of a substance imposes social and personal costs.
<i>Substance Dependence</i>	An adaptive state that develops from repeated drug administration, and which results in withdrawal upon cessation of drug use.
<i>Substance Misuse</i>	The use of a substance for a purpose not consistent with legal or medical guidelines. This term often describes the use of a prescription drug in a way that varies from the medical direction, such as taking more than the prescribed amount of a drug or using someone else’s prescribed drug for medical or recreational use.

Substance Use	The consumption of low and/or infrequent doses of alcohol and other drugs such that damaging consequences may be rare or minor. Substance use might include an occasional glass of wine or beer with dinner, or the legal use of prescription medication as directed by a doctor to relieve pain or to treat a behavioral health disorder.
SUD	Substance Use Disorder. A condition in which there is uncontrolled use of a substance despite harmful consequences. SUDs occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.
Telehealth	The use of electronic information and telecommunications technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health, and health administration. Technologies include videoconferencing, the internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications.
TCS	Texas College Survey of Substance Use. A biennial collection of self-reported data related to alcohol and drug use, mental health status, risk behaviors, and perceived attitudes and beliefs among college students in Texas.
TSS	Texas School Survey. Collection of self-reported tobacco, alcohol, and substance use data among students in grades 7 through 12 in Texas public schools. The survey is sponsored by the Texas Health and Human Services Commission and administered by the Public Policy Research Institute.
YRBS	Youth Risk Behavior Surveillance Survey. an American biennial survey of adolescent health risk and health protective behaviors such as smoking, drinking, drug use, diet, and physical activity conducted by the Centers for Disease Control and Prevention. It surveys students in grades 9–12.