

Community Health Risk Index (SUDRI & MHRI)

March 13, 2023

Sandy Salivaras, DBHR

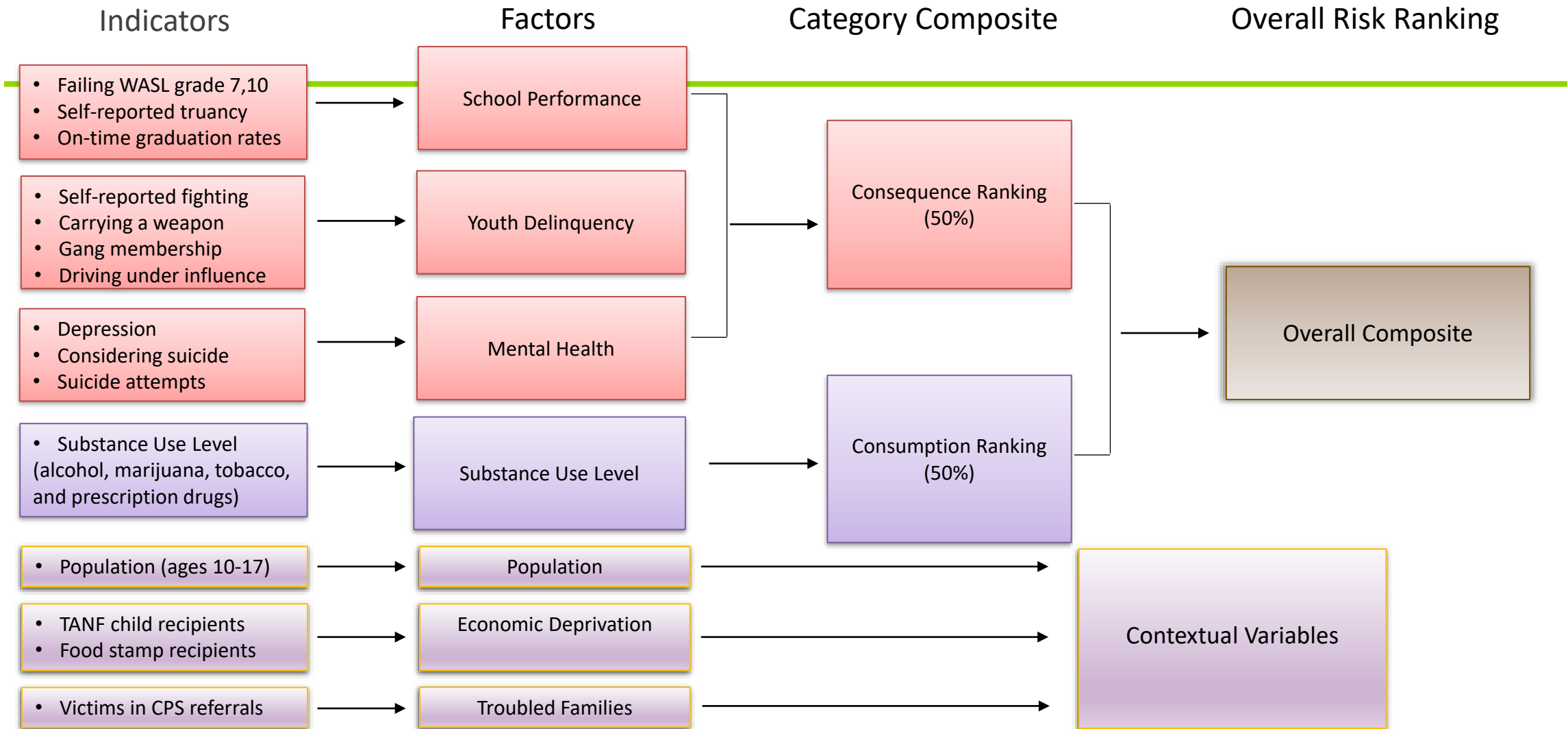
Index as a tool for CPWI Community Selection

- ▶ Data informed community selection process
- ▶ Communities selected based on high levels of risk for youth alcohol and other substance use (SUD RI), & mental health risk (MHRI)
- ▶ When funding available, high-need communities according to their risk ranking, are eligible to apply

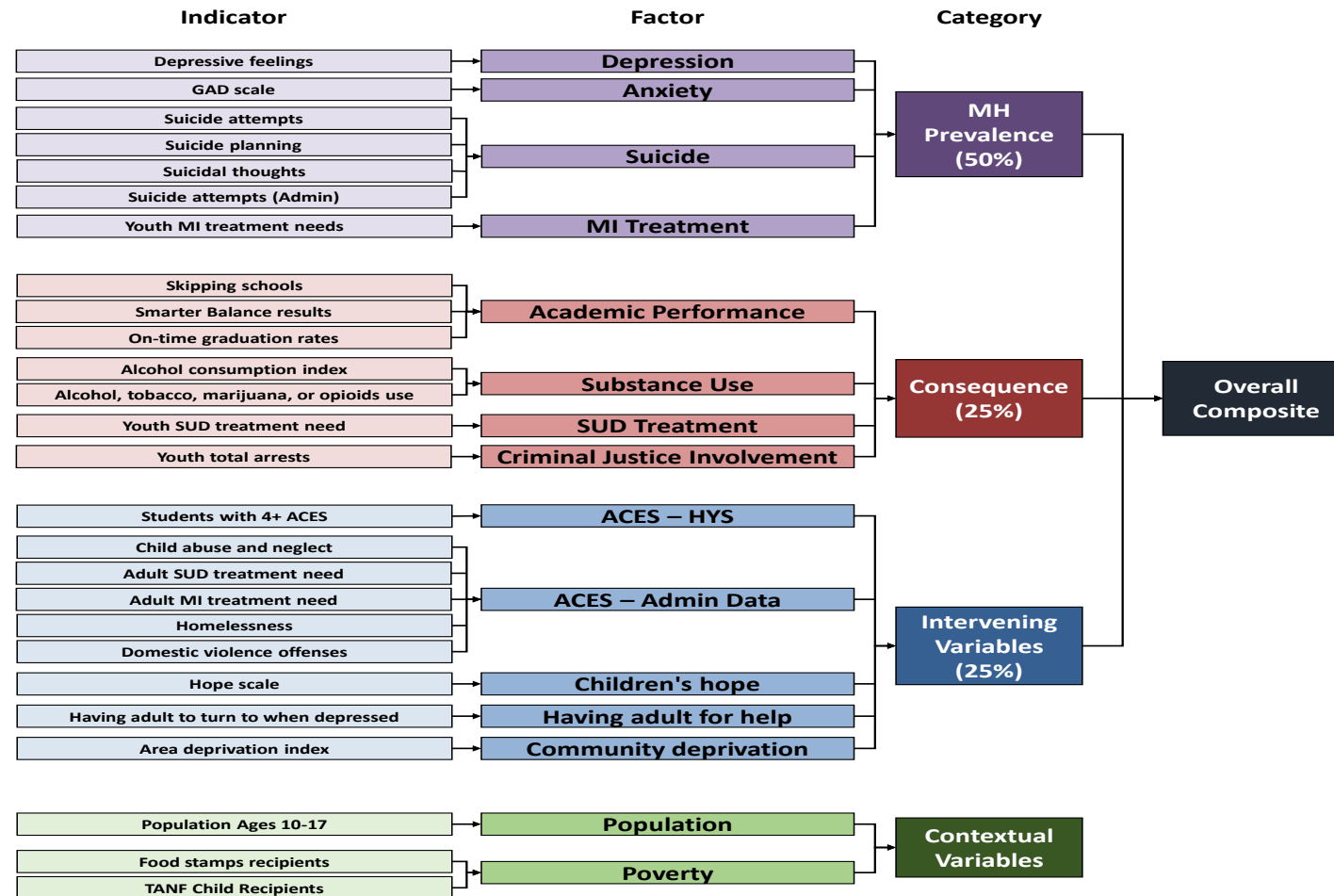
SUD RI & MHRI Overview

- ▶ Indexes measure community substance use risk & mental health risk
- ▶ A single risk score is computed for each school district or high school attendance area (HSAA)
- ▶ School districts and HSAA are then ranked statewide and assigned a percentile ranking
- ▶ Focus on youth and adolescents
- ▶ Data used to compute the risk score come from Healthy Youth Survey and other measures

Community Substance Use Risk Index Methodology



Community Mental Health Risk Index Methodology



County Community Risk Profiles

PIERCE COUNTY	School District	Population: Age 10-17*	RISK RANKING		RISK CATEGORY RANK		CONTEXTUAL INDICATORS	
			Rank for Variable	Indicators with Data	ATMO Consumption	Consequence	Economic Deprivation	Troubled Family
					Average	Average	Average	Average
	Bethel	13,961	56	22	Low	Average	High	High
	Clover Park	6,907	41	22	Average	Average	Average	Average
	Eatonville	1,420	69	22	Average	Average	High	No Data
	Fife	2,312	33	22	Average	Average	Low	Low
	Franklin Pierce	5,222	57	22	Average	Average	Very Low	Average
	Orting	1,794	67	22	Low	No Data	Average	Low
	Peninsula	7,129	15	3	No Data	No Data	Low	Low
	Puyallup	15,284	-	3	Average	Average	Average	Average
	Steilacoom Historical	2,169	38	22	Average	Low	Low	Low
	Summer	5,982	42	3	No Data	No Data	Average	Average
	University Place	3,218	-	-	-	-	-	-
	White River	2,830	-	-	-	-	-	-

NOTES:
 * This is a 5-year average value.
 This risk profile reflects the risk levels of this county as of May 2022. School districts with no high schools are not included in this summary. Please note risk levels and risk rankings may change over time.
 The risk profile is calculated from prevalence of alcohol, tobacco, marijuana, and prescription opioids use. The consequence risk score is calculated from school performance, youth indicators. The overall risk ranking is not computed if either consumption or consequence score is missing.
 A Risk Category Rank of "Very High" indicates the referenced School District Risk Score was in the top 10% of School Districts in the risk category.
 A Risk Category Rank of "High" indicates the referenced School District Risk Score was in the top 25% of School Districts in the risk category.
 A Risk Category Rank of "Average" indicates the referenced School District Risk Score was in the bottom 25% of School Districts in the risk category.
 A Risk Category Rank of "Low" indicates the referenced School District Risk Score was in the bottom 10% of School Districts in the risk category.
 A Risk Category Rank of "Very Low" indicates the referenced School District Risk Score was in the bottom 10% of School Districts in the risk category.
 Review Considerations:
 1) To get an overall sense of risk severity for both consumption and consequence, examine the "Risk Percentile". It reflects what % of School District had a Risk Score LOWER than the referenced School District.
 2) To ensure that the risk score is meaningful, examine the "Indicators with data" column. Risk scores based on few indicators should be interpreted with caution. In total, 21 indicators were used.
 3) To consider other contextual information, examine the "Population: Age 10-17", "economic deprivation" indicator, and the "troubled family" indicator. Note the "Population 10-17 year olds" enrollment as it accounts for kids not in school as well as those in private schools.
ATTENTION: HYS 2021 is different from past surveys in several ways, so caution should be used when comparing HYS 2021 results to prior survey years/trends:
 • The pandemic has likely influenced student behaviors and responses to the survey.
 • There was a three-year gap (2018 to 2021) instead of the usual two-year gap - delaying the survey by a year changed the group/cohort of students being surveyed.
 • This was the first time the survey was administered electronically. ~2% of students took a paper-and-pencil survey, and ~2% of students took the survey remotely (not on school property).
 • Future HYS cycles will tell us more about which changes or trends will continue and which were unique to 2021.

DSHS | Research and Data Analysis Division
 Community Outcome and Risk Evaluation (CORE), May, 2022

2022 Community Risk Profile Summary Pierce County

May 2022

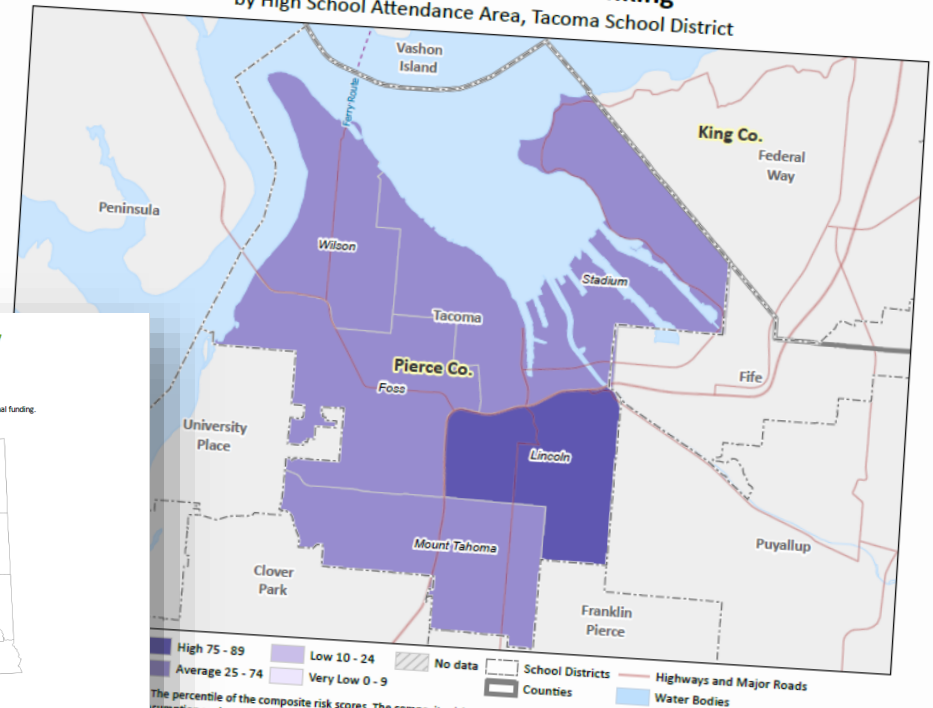
Indicators associated with substance use prevention and mental health promotion.
 Presented at the State, County, and School District level for use by communities in directing their resources and in seeking additional funding.



CONTRIBUTORS
 DSHS Research and Data Analysis Division: Aaron Davis, MSW, Grace Hong, PhD, Irina Sherkova, PhD
 In collaboration with the HCA Division of Behavioral Health and Recovery, Substance Use Disorder Prevention and Mental Health Promotion Section:
 Katelyn Kates, MSW, Policy and Program Supervisor; Sandy Salazar, MEd, MPH, Epidemiological Prevention Research and Evaluation Manager; Sarah Mariani, CPH, Section Manager

Washington State
 Health Care Authority

Marijuana Composite Ranking by High School Attendance Area, Tacoma School District



The percentile of the composite risk scores. The composite risk scores were calculated using standardized indicators in consumption and consequence. Based on 2021 HYS data. CARTOGRAPHY: Irina Sherkova and Steve Leibenguth.
 Research and Data Analysis, Community Outcome and Risk Evaluation Geographic Information System (COREGIS).

Washington State
 Health Care Authority
 May 2022

Questions

COUNTRY RISK PROFILES:

- ▶ https://theathenaforum.org/cpwi_coalitions
- ▶ <https://www.dshs.wa.gov/ffa/research-and-data-analysis/community-risk-profiles>

Sandy.salivaras@hca.wa.gov