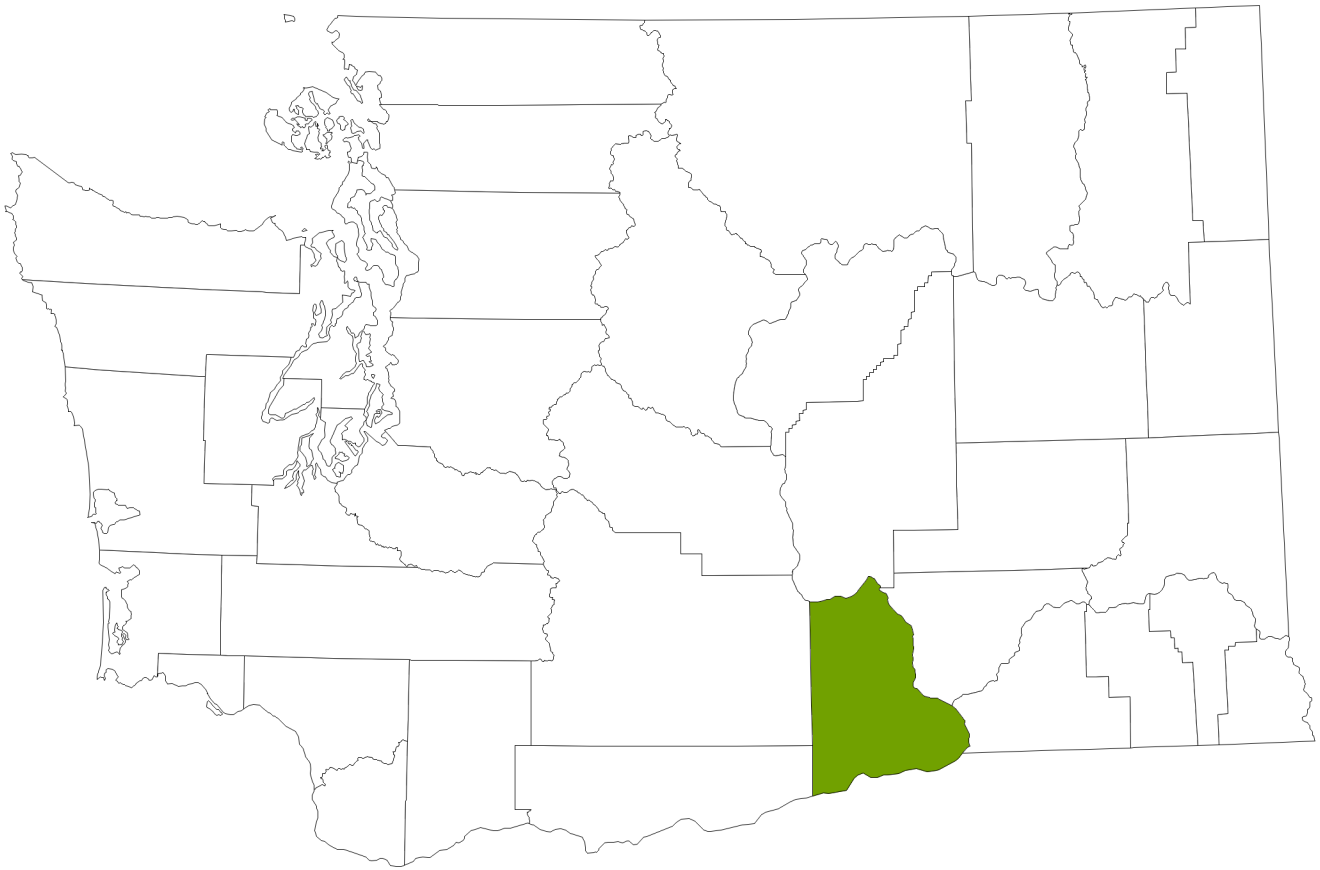
2026 Community Risk Profile Summary

Benton County

September 2026

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: Grace Hong, PhD | Aaron Starks, MA | Stephen Leibenguth
In collaboration with the HCA Division of Behavioral Health and Recovery, Substance Use Disorder Prevention and Mental Health Promotion Section:
Kasey Kates, MSW, Policy and Program Supervisor| Sarah Mariani, CPP, Section Manager

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Washington State Health Care Authority

ABOUT THIS REPORT

This summary report has been developed for the Community Prevention and Wellness Initiative (CPWI) to assist coalitions in their prevention strategic planning. We have included data from your county, presented by school district, for the assessment of problems associated with substance use. This report is intended to serve as a starting point for your planning and assessment work. Additional data that can only be collected locally will help with the interpretation of the data and in other ways enhance this assessment process.

The Community Prevention and Wellness Initiative is a project of the Health Care Authority's Division of Behavioral Health and Recovery (DBHR) in collaboration with the Office of the Superintendent of Public Instruction (OSPI). The Department of Social and Health Services' Division of Research and Data Analysis is a key partner that leads the publication of this report and the associated data.

ABOUT THE DATA

The Community Outcome & Risk Evaluation (CORE) data set contains archival indicators (or social indicators) that are highly correlated with adolescent substance use, and the risk factors that predict substance use. There are currently 47 indicators, most of which originate from the Department of Health, Department of Social and Health Services, Uniform Crime Report/National Incident-Based Reporting System, and the Office of the Superintendent of Public Instruction. The data are published twice a year on a public website, and reported at the lowest feasible geography level: state, county, school district/community, and locale (a geography that incorporates more than one school district when the base population of the school district is too low for reliable reporting). See https://www.dshs.wa.gov/ffa/research-and-data-analysis/community-risk-profiles.

The Risk Rankings table(s) and maps have been developed using the data from CORE and Healthy Youth Survey (HYS). School district-level and more detailed HYS data are password protected and require a data sharing agreement with the Department of Health. State and county reports are available to the public at AskHYS.net.

ATTENTION! HYS 2025, 2023 and 2021 were different from past surveys in several ways, so caution should be used when examining the long-term trends before and after the 2021 HYS:

- The COVID-19 pandemic 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.
- HYS since 2021 were conducted electronically while previous surveys were conducted using paper and pencil.
- Results from the 2021 HYS showed dramatic changes compared to prepandemic trends, calling for cautious interpretation. The 2023 and 2025 data are beginning to provide a more complete understanding of adolescent health during and after the height of the pandemic.

FOR MORE INFORMATION

Questions about this report or the Community Prevention and Wellness Initiative may be directed to the DBHR Training team at PxTraining@hca.wa.gov.

BENTON COUNTY		RISK RANKING		RISK CATEGORY RANK		CONTEXTUAL INDICATORS	
School District	**Population: Age 10-17***	**Rank for Variable**	**Indicators with Data**	**ATMO Consumption**	**Consequence**	**Economic Deprivation**	**Troubled Family**
Finley	588	93	22	Very High	High	Average	Average
Kennewick	13,308	56	22	Average	Average	Average	Average
Kiona Benton	1,073	95	22	Very High	High	Average	Average
Paterson	50	.	0	No Data	No Data	Low	Low
Prosser	1,940	43	22	Average	Average	Average	Low
Richland	9,950	8	22	Very Low	Low	Average	Average

NOTES:

***** This is a 5-year average value.

This risk profile reflects the risk levels of this county as of September 2026. School districts with no high schools are not included in this summary. Please note risk levels and risk rankings may change over time.

The **ATMO Consumption** risk score is calculated from prevalence of Alcohol, Tobacco, Marijuana, and prescription Opioids use. The consequence risk score is calculated from school performance, youth delinquency, and mental health 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 between 25% and 75% of School Districts in the risk category.
A Risk Category Rank of "Low" indicates the referenced School District Risk Score was in the bottom 25% 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, 22 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" value may be greater than district enrollment as it accounts for kids not in school as well as those in private schools.

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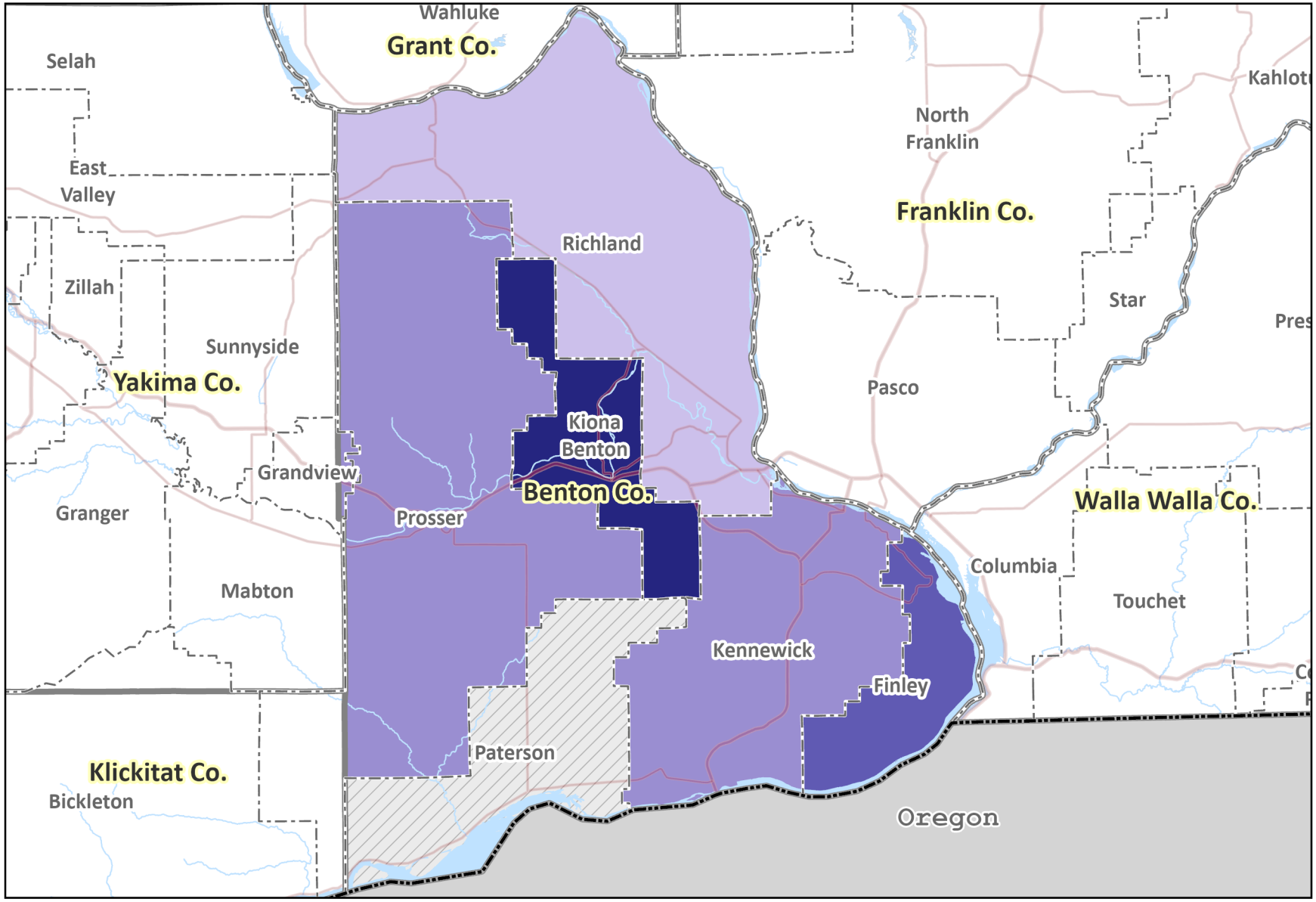
- There was a three-year gap (2018 to 2021) instead of the usual two-year gap - delaying the survey by a year changed the group/cohort of students being surveyed.
- HYS since 2021 were conducted electronically while previous surveys were conducted using paper and pencil.
- Results from the 2021 HYS showed dramatic changes compared to prepandemic trends, calling for cautious interpretation. The 2025 data are beginning to provide a more complete understanding of adolescent health during and after the height of the pandemic.

Marijuana Composite Ranking

by School District, Benton County



Composite Risk Ranking

- Very High 90 - 99
- High 75 - 89
- Average 25 - 74
- Low 10 - 24
- Very Low 0 - 9
- No data
- School Districts
- Counties
- Highways and Major Roads
- Water Bodies

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DATA NOTES: The percentile of the composite risk scores. The composite risk scores were calculated using standardized indicators in marijuana consumption and consequence. Based on 2025 HYS data. CARTOGRAPHY: Steve Leibenguth.

SOURCE: DSHS Research and Data Analysis, Community Outcome and Risk Evaluation Geographic Information System (COREGIS).

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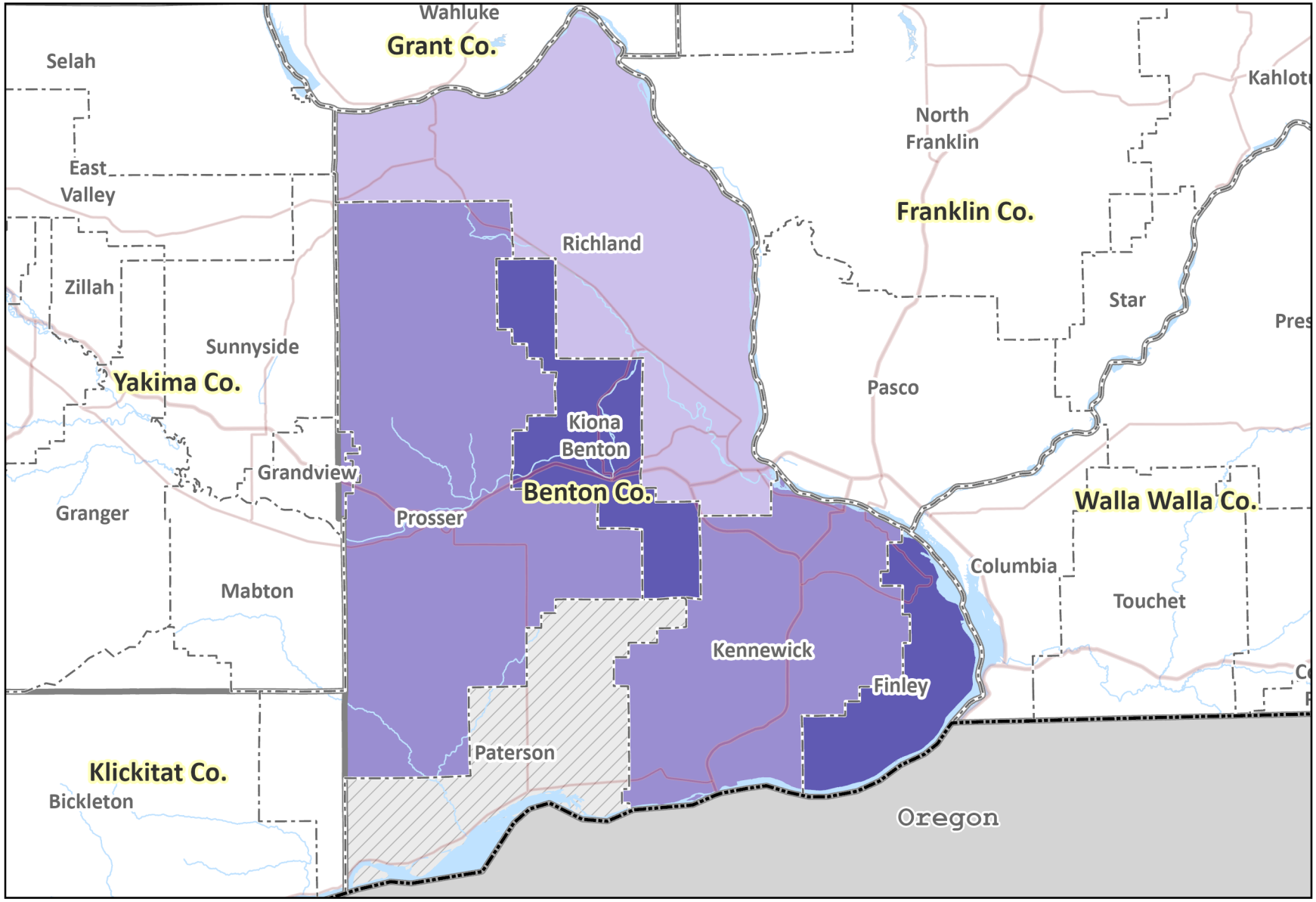

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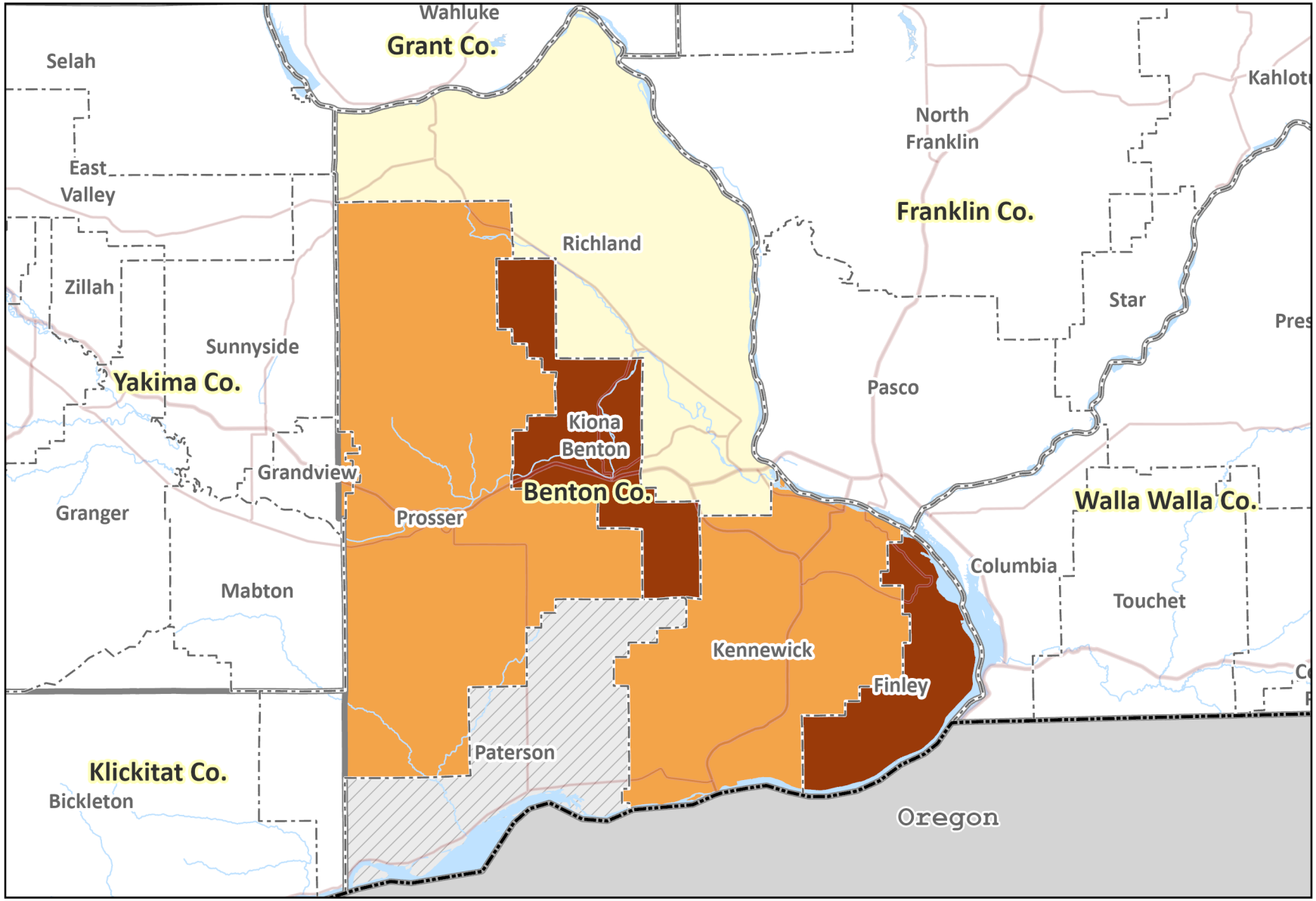
Alcohol, Tobacco, Marijuana and Prescription Opioids Composite Ranking

by School District, Benton County



DATA NOTES: The percentile of the composite risk scores. The composite risk scores were calculated using standardized indicators in the alcohol, tobacco, marijuana and prescription opioids (ATMO) consumption and consequence. Based on 2025 HYS data. CARTOGRAPHY: Steve Leibenguth.

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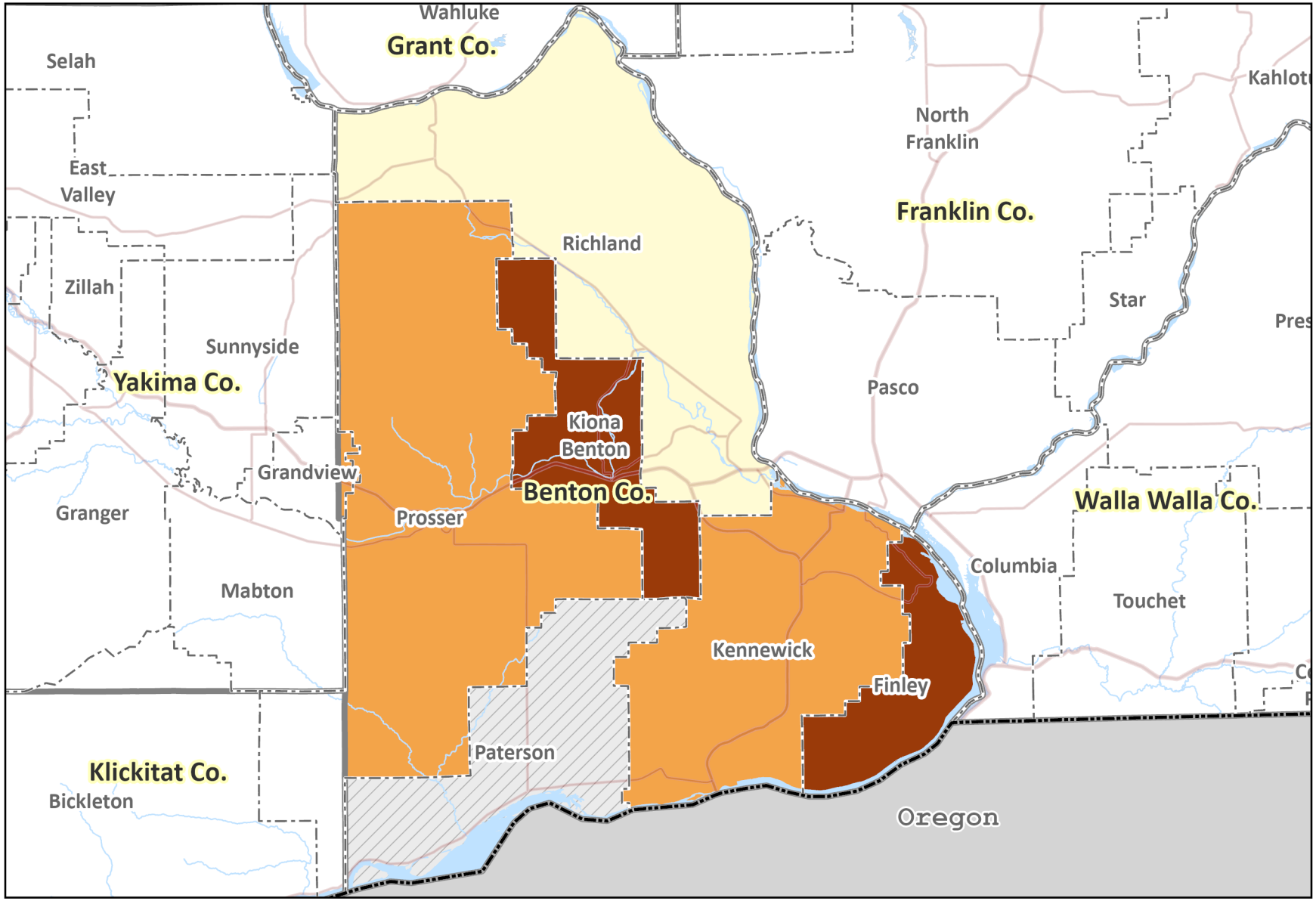

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Consequence Risk Ranking

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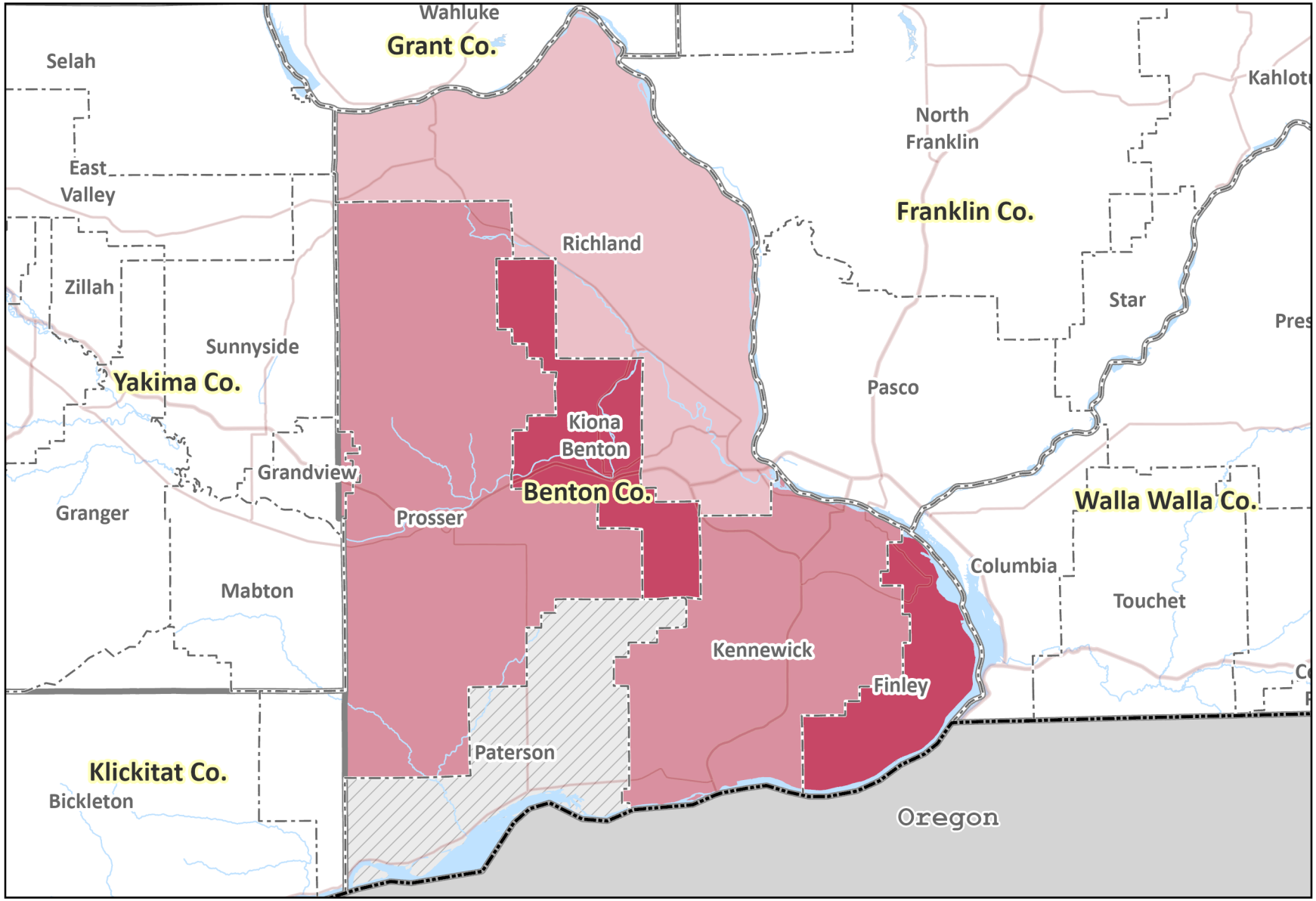

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DATA NOTES: The percentile of the consequence risk scores. The consequence risk scores were calculated using standardized indicators in three sub-domains: school performance, youth delinquency, and mental health. Based on 2025 HYS data. CARTOGRAPHY: Steve Leibenguth.

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