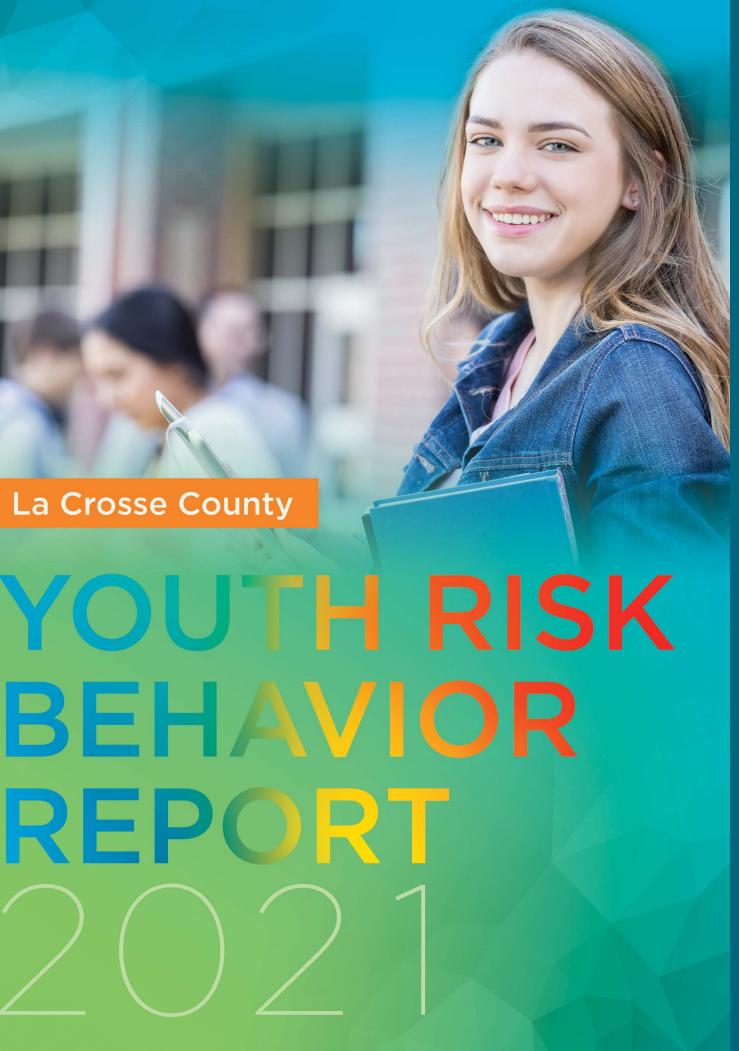
This report was prepared by Better Together in La Crosse County in partnership with many local and regional organizations and entities. This project is funded by the Advancing a Healthier Wisconsin Endowment at the Medical College of Wisconsin.

Published February 2023

La Crosse County

BEHAVIOR REPORT



THIS REPORT BROUGHT TO YOU BY

Better **Together** in La Crosse County

Better Together is an extraordinary opportunity to improve mental health in La Crosse County. funded through 2024 by the Advancing a Healthier Wisconsin Endowment at the Medical College of Wisconsin.

Better Together works in collaboration with a **Steering Committee from** the following organizations and entities:

- La Crosse Medical Health **Science Consortium**
- La Crosse County Health Department
- City of La Crosse **Police Department**
- La Crosse School District
- Holmen School District
- Great Rivers United Way
- La Crosse County System of Care
- Viterbo University
- University of Wisconsin La Crosse
- Campaign to **Change Direction**

La Crosse Community Foundation and a **Community Advocate**

Special thanks to Diana DiazGranados and Corianne Johnson for preparing and writing this report. Graphic Design by Bridget Leonhard



Introduction

In 2021, the five public school districts in La Crosse County participated in the Youth Risk Behavior Survey (YRBS) which is part of the national and state effort conducted by the US Centers for Disease Control and Prevention (CDC) and the Wisconsin Department of Public Instruction (DPI) to monitor health risk behaviors among high school students. The YRBS provides the county with a snapshot of youth health behaviors that contribute to the leading causes of death, disability, and social problems. The behaviors monitored by the Wisconsin YRBS include safety; mental health; tobacco use; alcohol and other drug use; sexual behavior; and nutrition and physical activity.

Administered every two years, the YRBS is a voluntary, self-administered, anonymous guestionnaire that students take using the Wisconsin Online YRBS system in a proctored environment during the school day. Parents are informed of the survey and have the option to not have their student participate.

In 2021, schools completed the YRBS survey between October-November amidst the COVID-19 pandemic. This report is a first for La Crosse County. It includes comparisons to the 2019 La Crosse County YRBS data and current results at the state level. The purpose of the report is to highlight areas where students are doing well and highlight areas to target interventions to improve the lives of La Crosse County youth.



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SUMMARY OF KEY FINDINGS

The 2021 YRBS was conducted during the COVID-19 pandemic. By the Fall of 2021, most students in La Crosse County had experienced 18 months of remote, hybrid, and disrupted schooling. The pandemic posed unique challenges for students. Overall, 18% of students report that a family member lost their job during the pandemic and 49% of students knew someone who had died or had been very sick from COVID-19. Despite the added stressors of the pandemic, the 2021 YRBS shows that youth overall showed resilience during such a challenging time.

Compared to 2019, most YRBS indicators stayed statistically the same. La Crosse County continues to see stable or improving trends in alcohol, marijuana, and other drug use. Tobacco and vaping use rates are also moving in a healthier direction. Although most sexual behavior indicators did not increase, condom use at last intercourse also did not increase. It is a concern to see sexual and dating violence indicators not decreasing.

Overall, youth in La Crosse County have many protective factors. Most students have a sense of belonging at school, have a trusted adult at school, most participate in school activities and practice healthy nutrition and exercise habits. The vast majority of students continue to feel safe at school and the perception of violence as a problem at school decreased significantly. Bullying at school decreased, but online bullying stayed at 17%. There was a dramatic increase in technology use that is concerning.

Mental health indicators are moving in an alarming direction. The percentage of students who reported feeling sad and hopeless for at least two weeks that it impacted their normal activities rose to 31%, while 49% of students reported struggling with anxiety, 20% reported using self-harming practices, and 17% reported having seriously considered suicide in the past year. These indicators show that youth need supportive adults to help them address mental health issues. It is encouraging that a significant majority of students report having at least one supportive adult besides a parent (84%), yet concerning that less than a quarter of students report consistently receiving the emotional help they need.

SURVEY **RESULTS**

The La Crosse YRBS Report includes responses from 3,645 students from six area high schools from all five public school districts in La Crosse County. This represents 78% of all public high school students in the county. These data are representative of students in grades 9-12. This report highlights health indicators from each of the topic areas of the YRBS. Data is reported for 2019 and 2021 and the 2021 state comparison is reported as it was available. The full report as issued by the Department of Public Instruction can be found on the DPI website (https://dpi.wi.gov/sspw/yrbs/online). The DPI report includes a more detailed breakdown of data by sex, grade level, and higher risk populations.

FOCUS ON: Health Disparities

The YRBS highlights disparities among some student groups. Students who belong to one or more of the groups listed at right, can still thrive with appropriate supports. And students who do not belong to any of these groups may still experience significant challenges and need additional support. Understanding how risks and challenges impact certain groups disproportionately can be key to focus responses to their needs.

Overall, the following groups report fewer protective factors, more risks, and more challenges:

STUDENT CHARACTERISTICS

	2019	2021
GENDER		
Female	49%	48%
Male	51%	52%
GRADE LEVEL		
9th Grade	32%	28%
10th Grade	29%	25%
11th Grade	21%	25%
12th Grade	18%	22%
RACE / ETHNICITY		
American Indian/Native American	1%	1%
Asian/Pacific Islander	8%	9%
Black/African American	3%	3%
Hispanic/Latino	5%	6%
White*	78%	77%
More than one race	5%	5%
ADDITIONAL CHARACTERISTIC	:s	
Lesbian, Gay, Bisexual,		
Transgender (LGBT)	12%	15%
Have a physical disability or		
chronic health condition	12%	11%
Experienced hunger in past 30		
days due to lack of food at home	24%	21%
Have lived in 4 or more places		
in their lifetime	33%	33%
*Non-Hispanic		

Females

- Students who identify lesbian, gay, bisexual, or transgender
- Students who report low grades: Ds and Es
- Students of color (students who identify Latino/a and/or identify with a racial minority group)
- Students who report a physical disability or a chronic health condition
- Students who report food insecurity (which is used as a proxy measure for students living in poverty)

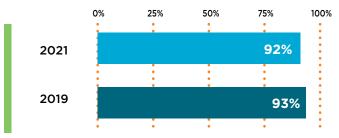


SAFETY & VIOLENCE

TRAFFIC SAFETY

According to the Centers for Disease Control and Prevention, motor vehicle crashes are the leading cause of death among youth. Distractions like speeding, having many passengers in the car, texting and driving under the influence of any impairing substance can lead to tragic consequences.

% most of the time or always wear a seatbelt



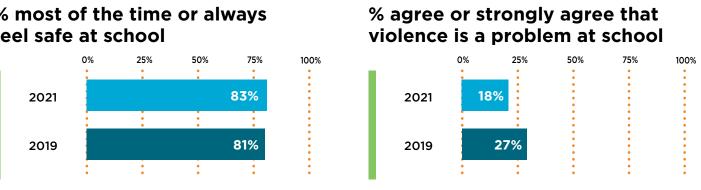
in the past 30 days... % drove after drinking



SCHOOL SAFETY

School safety is defined as schools and school-related activities where students are safe from violence, bullying and harassment. School safety is linked to positive student outcomes. Emotional and physical safety in school are related to increased academic performance, attendance and student mental health.

% most of the time or always feel safe at school

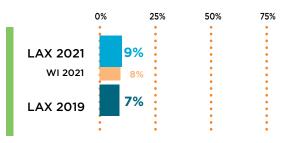


100%

100%

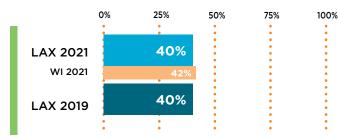
in the past 30 days...

% missed school due to safety concerns at school or en route

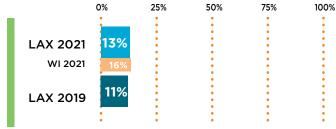


in the past 30 days...

% text/email while driving

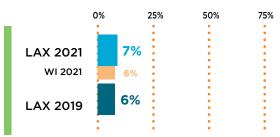




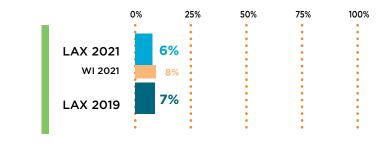


in the past 12 months...

% threatened or injured with weapon at school



in the past 12 months... % in a physical fight on school property



in the past 30 days...

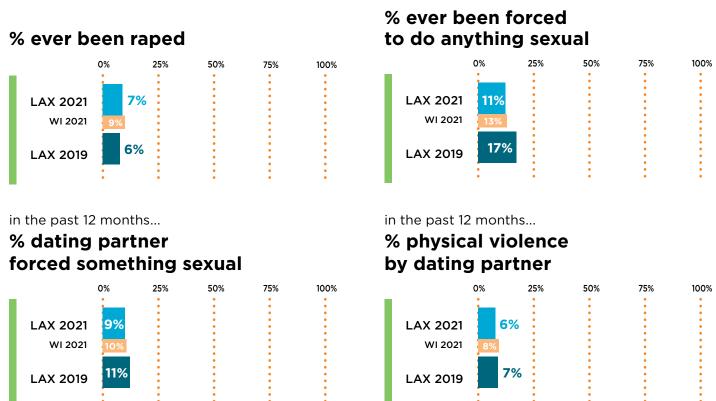
% brought a gun to school

	0%	25%	50%	75%	100%
LAX 2021 WI 2021					•
LAX 2019	1% 1%				•
	÷	:			:

assaulted or needs support, RAINN is available 24/7 and is confidential.

SEXUAL & DATING VIOLENCE

Teen dating violence can negatively influence the development of healthy sexuality, intimacy, and identity in youth. It can increase the likelihood of risky behaviors and can impact mental health.



- Friends and family may blame the victim for the assault.
- Young people who are victimized may be more likely to be violated again.
- Most violence occurs in the victim's home, neighborhood, or school.
- ALL age groups can commit sexual violence.

To help prevent violence, parents and families can talk with youth about this topic and ask how they can best support them. Communities can make teen mentoring and leadership programs more

Bullying is unwanted, ongoing aggressive behavior that involves a real or perceived power imbalance. Youth who are bullied and who bully others may have serious, lasting problems. Caregivers, school staff, and other adults can help prevent bullying by talking about it, building a safe school environment, and communicating with and listening to youth.

in the past 12 months...

LAX 2021

LAX 2019

WI 2021

% electronically bullied

17%

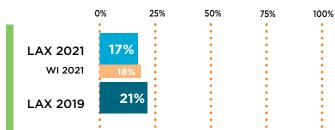
17%

75%

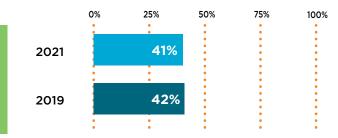
100%

in the past 12 months... % bullied on school property

BULLYING



% agree/strongly agree that bullying is a problem at school



FOCUS ON: Sexual

Bullying, physical fighting, threats with weapons, gang-related violence, and more severe assault are all forms of youth violence. Sexual violence is common in youth and is usually committed by someone the victim knows.

Common factors in youth sexual violence

Many young individuals do not seek help.

available. Schools can adopt practices that create safe, supportive environments for students and provide them with healthy social and emotional navigation tools.

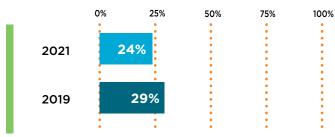
As young people mature, it's important to continue having respectful, open discussions about sex and consent to normalize the topics. For any sexual activity to happen, each participant needs to consent, or say "yes" willingly. Each person has the right to change their minds at any point and the sexual activity must stop.



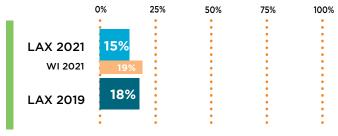
SEXUAL HEALTH

Young people are particularly vulnerable to poor sexual health outcomes. A large proportion of youth are engaging in sexual behaviors that can result in HIV, STIs, and unintended pregnancy.

% ever had sexual intercourse

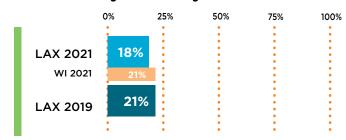


in the past 30 days... % sent, received, or shared sexual photos or images

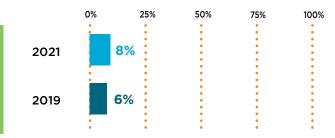


in the past 3 months...

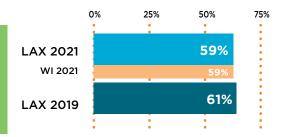
% currently sexually active



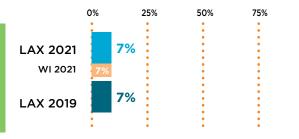
among sexually active students... % whose first sexual intercourse was before age 13

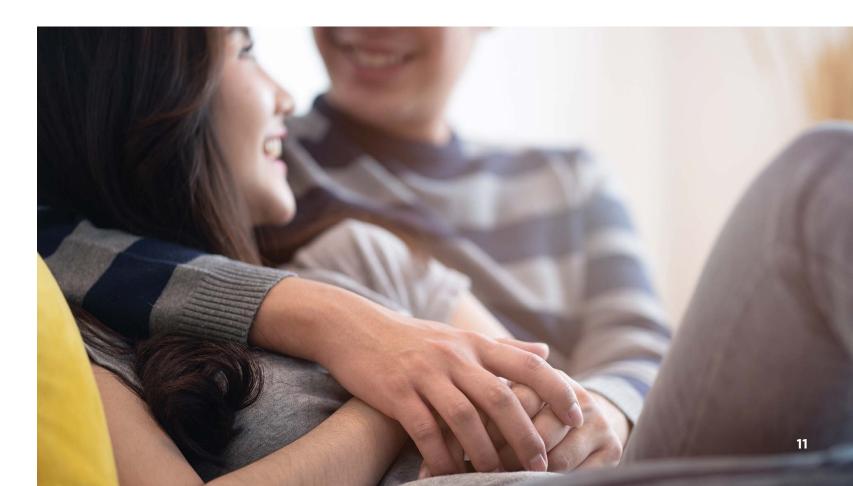


among sexually active students... % who used a condom during last sexual intercourse



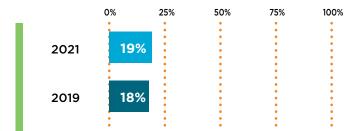
among sexually active students... % who had sex without any pregnancy prevention method





among sexually active students... % have had 4 or more sexual partners





100%





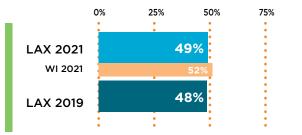
MENTAL HEALTH

Nationally, there is a mental health crisis among youth. Untreated mental health problems interfere with important aspects of a teen's development that can have lifelong repercussions.

100%

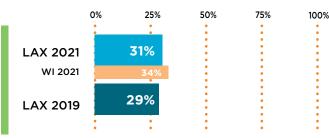
in the past 12 months...

% experienced problems with anxiety



in the past 12 months...

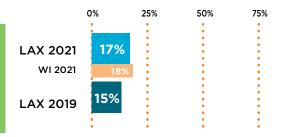
% so sad or hopeless they stopped usual activities



SUICIDE

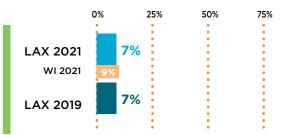
in the past 12 months...

% seriously considered suicide



in the past 12 months...

% attempted suicide

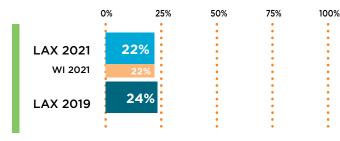


in the past 12 months...

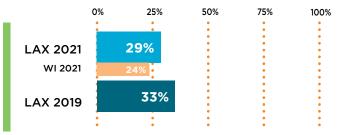
% hurt themselves on purpose (self-harm)



% most of the time or always get emotional help when needed



% list adult as most likely source of emotional support





FOCUS ON: Suicide

Suicide is a serious public health problem.

Suicide is the second leading cause of death for young people. Youth-focused suicide prevention approaches are an important aspect of public health. Providing support services, talking about suicide, reducing access to lethal means of selfharm, and improving access to mental health resources are just some actions we can take to help others. Schools, where youth spend much of their time, are a natural setting to support mental health and provide suicide prevention.

Know the warning signs:

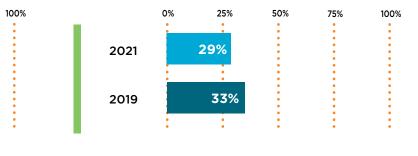
- Talking or writing about wanting to die
- Expressing hopelessness, no reason for living

988 is the three-digit dialing code that will route callers to the National Suicide Prevention Lifeline. If you or someone you know is in crisis, help is available 24/7 and is confidential.

	in the past 12 % made a			olan		
100%		0%	25%	50%	75%	100%
	LAX 2021 WI 2021 LAX 2019	13% 15% 12%				
:		•	:	•	•	•

among students who attempted suicide in the past 12 months...

% who received medical attention



Feeling trapped or in unbearable pain

- Looking for methods and making plans (i.e., searching online, buying a gun)
- Increasing use of alcohol or drugs
- Withdrawal or isolation from friends, family or society
- Having rage, extreme mood swings or seeking revenge

Prevention strategies:

- Create protective environments
- Promote connectedness
- Teach coping and problem-solving skills
- Create access to mental health care
- Educate school staff, parents and any adults who work with youth on Mental Health First Aid

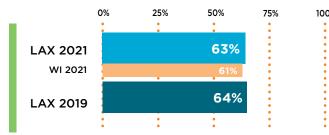


PROTECTIVE FACTORS

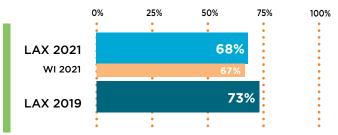
AT SCHOOL, COMMUNITY & AT HOME

When youth have protective factors in place, they are more resilient, less likely to engage in risky behaviors, and more likely to succeed academically. Protective factors can be thought of as "buffers", or characteristics or conditions that reduce the negative effects of adversity. Important protective factors include having support at home, in school, and in the community.

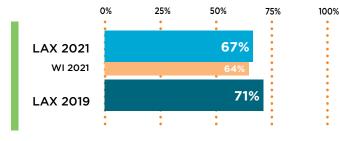
% agree or strongly agree they belong at school



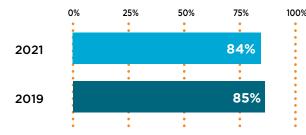
% have at least one teacher or other adult at school to talk to



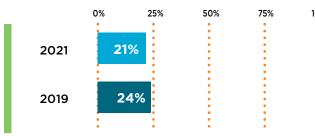
% participate in school activities, teams, or clubs



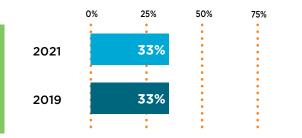
% have at least one supportive adult besides parent(s)



in the past 30 days...% experienced hungerdue to lack of food at home



% lived in 4 or more residences







100%

00%

FOCUS ON: Mental Wellness

Mental wellness comes from feeling balanced, connected to others, and able to meet life's challenges. Our skills, physical health, and social connections help us cope with adversity and unexpected hurdles.

What helps our mental wellness?

- Access to "buffering" supports like healthy relationships, physical activity, balanced nutrition, and mindfulness — can prevent and/or alleviate the effects of stress on a young person's mental health.
- 2. Sleep is a crucial element in a youth's mental well-being and can affect more than just academic performance. Poor sleep patterns among youth may be caused by changing hormones, using screen-based devices before bed, hectic after-school schedules, the lure of TV, internet and video games, and light exposure from smartphones, computers, and TVs. Research shows later school start times improve overall mental and physical wellness, increase academic performance, and allow youth to achieve higher-quality sleep.¹
- 3. Youth are socially connected when they are actively engaged in positive relationships where they feel they belong, are safe, cared for, valued and supported. Positive and strong social connections – with family, supportive adults, culture/ community, school, and peers – make for resilient youth that can better navigate mental health challenges.



TOBACCO & VAPING

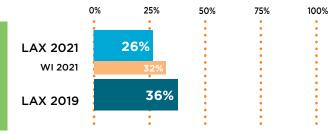
Trends in tobacco use indicate that while cigarette smoking has decreased among youth, vaping (e-cigarette use) continues to be a concern. Efforts to prevent and reduce all forms of tobacco product use should continue in order to sustain any progress.

in the past 30 days...

% used vape/juul/e-cigarette

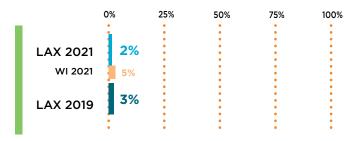
	0%	25%	50%	75%	100%
	•	•	•	•	:
LAX	2021 <mark>12%</mark>				•
w	2021 15%				
LAX :	2019 14%			•	•

% ever tried vaping/juul/e-cigarette

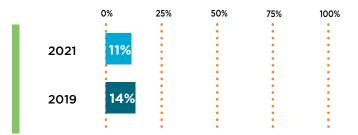


in the past 30 days...

% smoke cigarettes

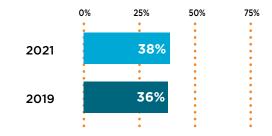






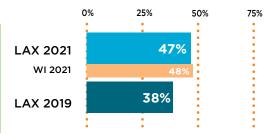
among smokers...

% who tried cigarettes before age 13



among students who vaped or used other tobacco products in the past 12 months...

% who tried to quit



FOCUS ON: Vaping

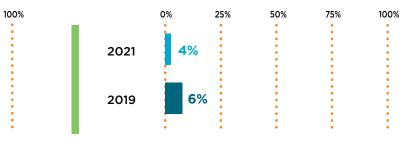
3 Reasons to be Concerned

- Vape/e-cigarette aerosol is NOT harmless
 "water vapor". Vapes contain and emit several
 toxic substances that can cause lung changes,
 increasing asthma among youth. It is difficult to
 know what vape products contain; some vape
 devices can be used to deliver marijuana and
 other drugs.
- 2. Vapes/e-cigarettes come in many shapes and sizes. Many vapes/e-cigarettes are aggressively



in the past 30 days...

% use of any tobacco product (cigarettes, chew, cigars, cigarillos)



100%

•

•

marketed with bright colors, fruit, or candy flavorings that appeal to youth. Some vape products resemble pens, USB sticks, and other everyday items.

3. Vaping is harmful to the developing brain. Vapes typically deliver nicotine, a harmful drug to the youth brain and body. This highly addictive drug can harm brain development up to age 25 affecting areas of the brain that control attention, learning, mood, and impulse control.²

This is Quitting

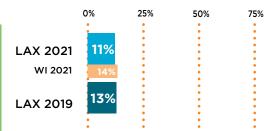
https://truthinitiative.org/thisisquitting is a free and anonymous text messaging program from the Truth Initiative designed to help young people quit vaping.



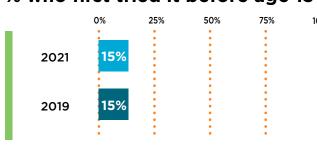
ALCOHOL, MARIJUANA & OTHER DRUG USE

MARIJUANA

in the past 30 days... **% used marijuana**



among students who tried marijuana... % who first tried it before age 13

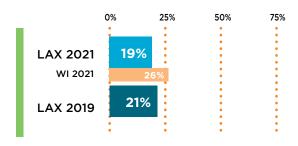


ALCOHOL

Substance use by teens can have a big impact on their health and well-being. Substance use is associated with negative consequences including increased risk of drug use later in life, school failure, and poor health outcomes.

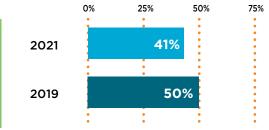
100%

in the past 30 days... **% drank alcohol**

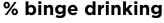


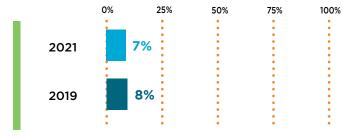
% ever had an alcoholic beverage

100%

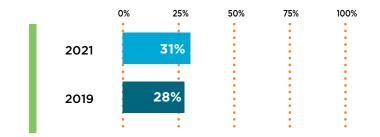


in the past 30 days...





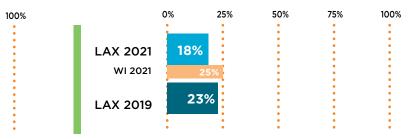
among students who have drunk alcohol...% whose first drinkwas before age 13



FOCUS ON: Marijuana

Marijuana is the dried flowers/leaves/stems/seeds of the cannabis plant, containing more than 100 compounds including THC and CBD. THC causes a mind-altering state and brain impairment; CBD is not psychoactive and does not cause a high. Delta-8 THC products pose serious health risks and are not approved by the FDA for safe use. Marijuana can be laced with other substances such as the opioid fentanyl. Marijuana can be used in several ways and can be mixed or infused into foods (edibles). Among youth, vaping marijuana has increased.

% ever used marijuana



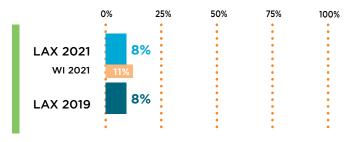
How risky is use?

Marijuana directly affects brain function; increases the heartbeat; and harms lung tissue causing damage to blood vessels. Along with the physical risks, come mental health risks. Negative effects of marijuana use include difficulty thinking and problem solving; problems with memory and learning; reduced coordination; difficulty maintaining attention; problems with school and social life. Using marijuana during adolescence increases the risk of developing Marijuana Use Disorder.³



OTHER DRUG USE

% ever misused a prescription pain medicine



% ever misused an over-the-counter drug 0% 25% 50% LAX 2021 4% WI 2021 5%

4%

LAX 2019

100%

in the past 12 months...

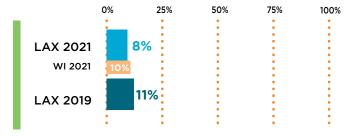
% used any illegal drugs besides marijuana

c	0%	25%	50%	75%	100%
	•	•	:		:
LAX 2021	2%	•			•
WI 2021	4%				
LAX 2019	3%	•	•	• • • • • • • • • • • • • • • • • • • •	

ALCOHOL & DRUGS AT SCHOOL

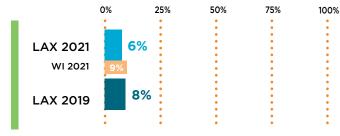
in the past 12 months...

% were offered, sold, or given drugs on school property



in the past 12 months... % attended school under the

influence of alcohol or drugs

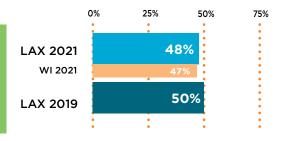




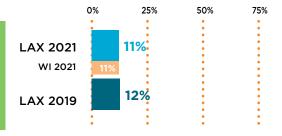
PHYSICAL HEALTH & HEALTHY HABITS

Healthy habits among adolescents lay the groundwork for positive youth development. Most fundamental to the developing youth are health habits involving adequate sleep, exercise, and healthy nutrition.

% describe their health as excellent or very good



% have physical disability or chronic health problem



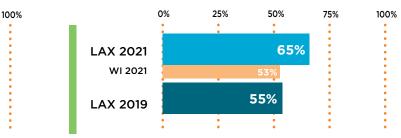
in the past 12 months...

% had sports-related concussion

100%		0%	25%	50%	75%	100%
		;				
	LAX 2021	1	0%			
	WI 2021	12%		•		
	LAX 2019		12%	•		
		•	•	:	•	:

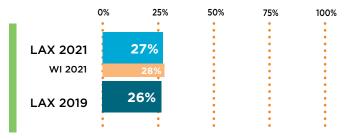
in the past 7 days...

% exercise most days

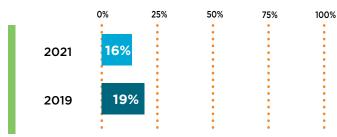


SLEEP

% sleep 8 or more hours per night



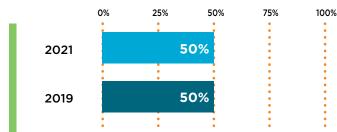
% sleep 5 or fewer hours per night



NUTRITION

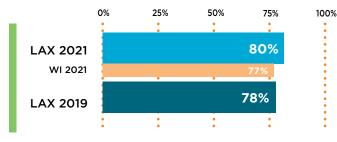
in the past 7 days...

% ate fruit every day



in the past 7 days...

% drank water every day



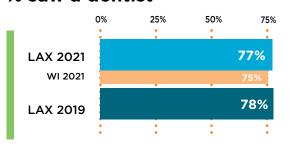
FOCUS ON: Sleep

Teens need 8 to 10 hours of sleep each night. A lack of sleep can affect a teen's physical health, mental health, relationships and the ability to pay attention and make healthy decisions. Healthy sleep habits that can improve sleep include:

- Keeping a consistent bedtime
- Keeping a quiet, dark, cool bedroom
- Removing electronic devices and stop using them 1 hour before bedtime
- Avoiding caffeine and energy drinks in the afternoon and evening⁴

OTHER HEALTHY HABITS

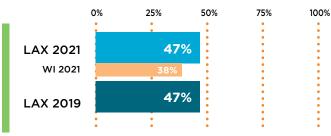
in the past 12 months... **% saw a dentist**



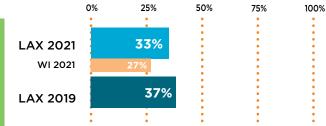


in the past 7 days...

% ate vegetables every day



in the past 7 days... **% ate breakfast every day**



% most of the time or always wear sunscreen when outside

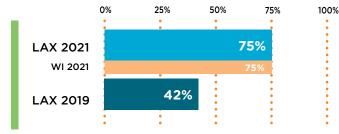
100%	C	0%	25%	50%	75%	100%
		210/		•	•	
•	LAX 2021	21%	-			:
•	WI 2021	21%			•	
	LAX 2019	25%		•	•	
•		•	•	•	•	•



TECHNOLOGY USE & SCREEN TIME

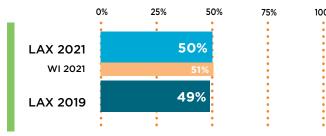
Adolescents spend a lot of time watching screens, including smartphones, tablets, gaming consoles, TVs, and computers. On average, teens spend up to nine hours a day watching or using screen-based devices. While technology can entertain and teach, too much screen time may lead to health concerns.

% spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)



in the past 7 days...

% use phone, Xbox, or other device after midnight on a school night



FOCUS ON: Social Media & Screen Time

WHY this matters:

A common part of daily life for the majority of adolescents includes TVs, smartphones, tablets, computers, and gaming consoles. Since the pandemic, the use of electronics and social media has increased. The amount of screen usage and time spent on social media platforms may trigger symptoms of poor mental health. The more time adolescents spend on screens and on social media, the less time they have for healthy sleep habits, regular physical activity and time outdoors.



WHAT we can do:

It's important to be aware of our screen time and be intentional about our digital wellness practices. As adults, it's important to model healthy screen time habits and establish limits. Developing a family media plan can help establish boundaries and time limits for screen use. An important aspect of healthy social media and video game use is to encourage age-appropriate video games and apps.

A CLOSER LOOK: Lesbian, Gay, Bisexual, and Transgender Youth

In La Crosse County, 15% of students identify as Lesbian, Gay, Bisexual or Transgender (LGBT). YRBS data show that students who identify LGBT are at greater risk of negative health outcomes and need support.

While many LGBT youth thrive during adolescence, YRBS data show overall LGBT youth are at greater risk of poor mental health, victimization and engaging in substance use. They are also less likely to report protective factors such as receiving emotional support or a sense of belonging at school compared to their non-LGBT peers. These negative outcomes may be a result of the stress and trauma associated with experiencing discrimination, harassment,



social rejection, or family disapproval because of their identity.⁵ It is important for whole communities to support and uplift LGBT youth and promote a safe and accepting environment for them to thrive in.

2021 YRBS Data by Identity	Students Who identify as LGBT	Non- LGBT Students
% experienced problems with anxiety in the past 12 months	77%	40%
% so sad or hopeless they stopped usual activities in the past 12 months	61%	24%
% hurt themselves on purpose (self-harm) in the past 12 months	49%	12%
% seriously considered suicide in the past 12 months	42%	10%
% agree or strongly agree they belong at school	41%	70%
% most of the time or always get the emotional support when needed	17%	25%
In the past 30 days% drank alcohol	30%	17%
In the past 30 days% used marijuana	34%	15%
% bullied at school and/or online in the past 12 months	39%	19%
% ever been raped	20%	4%
% ever been forced to do anything sexual	24%	8%

WHAT CAN WE DO

to support young people in our community?

The patterns, behaviors and choices made by youth and the environment and experiences they are exposed to, can have a long-term impact on their health and ability to flourish.

Behaviors related to exercise, nutrition, reproductive health, and substance use can all have short and long-term health outcomes. Many mental health challenges first appear during adolescence and addressing them early increases positive outcomes. Providing support and resources to youth can help them develop the skills and knowledge they need to succeed and thrive. There are many ways to support youth in our community, such as by:

PROVIDING GUIDANCE AND **MENTORSHIP:**

Adults can offer young people guidance and support as they navigate the challenges of adolescence. This can involve providing support and assistance on a wide range of topics, from academic and career decisions to relationships and personal issues.

ENCOURAGING POSITIVE BEHAVIORS:

Adults can encourage young people to engage in healthy and positive behaviors, such as regular exercise, good nutrition, and avoiding risky behaviors such as drug and alcohol use.

PROVIDING A SAFE AND SUPPORTIVE **ENVIRONMENT:** Adults can help to create

a safe and supportive environment for young people by providing them with a place to go for help and support when they need it. This can include providing access to mental health services, counseling, and other resources that can help young people cope with the challenges they face.

PROMOTING INCLUSION AND **DIVERSITY:** Adults can work together with youth to create spaces where young people feel welcome and supported, and where they can express themselves and be themselves without fear of judgment or discrimination. This can involve supporting organizations and programs that celebrate and appreciate different cultures and backgrounds.

PROVIDING OPPORTUNITIES FOR YOUTH ENGAGEMENT AND **EMPOWERMENT**: Engaging young people in their communities and empowering them to take an active role can help to promote their mental health and well-being. Communities can provide opportunities for youth to participate in decision-making, leadership, and other activities that can help them feel valued and connected to their communities.

LA CROSSE COUNTY YOUTH RISK BEHAVIOR SURVEY SUMMARY OF RESULTS 2010-2021

The Wisconsin Department of Public Instruction (DPI) has administered the YRBS in La Crosse County every two years since 1999 to monitor health risk behaviors among high school students. The YRBS is part of a national effort conducted by the US Centers for Disease Control and Prevention (CDC). The YRBS is self-administered and anonymous. 2019 and 2021 results have been weighted and cleaned according to CDC methodology.

WHO PARTICIPATED IN THE 2021 YRBS SURVEY?

- Participating schools: West Salem High, Onalaska High, Logan High, Holmen High, Central High, Bangor Middle/High
- **3,645 Student responses**: 48% Female, 52% Male 15% identify as Lesbian, Gay, Bisexual, and/or Transgender
- Race breakdown of respondents: 77% White, 9% Asian/Pacific Islander, 6% Hispanic/Latino, 3% Black/African American, 1% American Indian/Native American, 5% selected two or more races

La Crosse County High School Students who reported	2010	2013	2015	2017	2019	2021
PROTECTIVE FACTORS						
Feel like they belong at school	73%	68%	61%	61%	64%	63%
Have at least one adult at school they could talk to with a problem	69%	71%	68%	71%	73%	68%
Have at least one supportive adult besides a parent/caregiver					85%	84%
List an adult as most likely source of emotional support					33%	29%
Participated in school activities, teams, or clubs					71%	67%
MENTAL HEALTH AND HELP SEEKING						
Felt so sad or hopeless almost every day for two weeks or more in past 12 months	23%	29%	31%	28%	29%	31%
ignificant problems with anxiety in past 12 months					48%	49%
Purposefully hurt themselves in last 12 months (self-harm)			18%	20%		
Most of the time or always get emotional help when needed	20% 20%				24%	22%
SUICIDAL THOUGHTS						
Seriously considered suicide in last 12 months	14%	17%	19%	15%	15%	17%
Made a suicide plan in last 12 months	10%	16%	13%	10%	12%	13%
Attempted suicide in last 12 months	8%	7%	8%	5%	7%	7%
PHYSICAL HEALTH						
Describe their physical health as excellent or very good					50%	48%
Sleep 8 or more hours a night					26%	27%
Sleep 5 or less hours per night					19%	16%
Late night screen use (after midnight on a school night)					49%	50%
Spent 3+hrs/day engaged in TV, smart phone, video games or other device (non-school work)	24%	35%	38%	42%	42%	75%
Physically active 60 or more mins/day on four or more days/week	47%	49%	48%	45%	55%^	65%

La Crosse County High School Students who rep BULLYING

Bullied on school property in past 12 months

Electronically bullied during the past 12 months

SCHOOL SAFETY

Most of the time or always felt safe at school

Did not go to school because they felt unsafe in the p

SEXUAL AND DATING VIOLENCE

Have ever had sex

Sent, received, or shared a sexually explicit photo or i in past 30 days

Ever forced to do anything sexual (kissing, touching, o sexual intercourse)

Ever raped

ALCOHOL AND OTHER DRUGS

Drank alcohol in past 30 days

Binge drank in past 30 days

Used marijuana in lifetime

Used marijuana in past 30 days

Ever used prescription pain drug without a doctor's p

Used heroin in past 12 months

Used methamphetamines in past 12 months

Were offered, sold, or given an illegal drug on school in the past 12 months

Attended school under the influence of alcohol or drug

TOBACCO

Smoked cigarettes in past 30 days

Used chewing tobacco at least once in past 30 days

Ever tried vaping or e-cigarette

Used a vape or e-cigarette in the past 30 days

Smoked cigars, cigarillos, or little cigars in past 30 day

Among students who vaped or used tobacco product past 12 months, percentage who tried to quit

TRAFFIC SAFETY

Rarely or never wore a seatbelt

Texted or emailed while driving in past 30 days

Drove after drinking alcohol in past 30 days

Rode with driver who had been drinking

ADVERSITY

Experienced hunger due to lack of food at home

Were physically hurt on purpose by someone they we (past 12 months)

Ever lived with a family member with mental illness

^ In 2019 the time frame changed from 5 days to 4 days a week.

* In 2019 the time frame of the question changed from lifetime.

**In 2019 the time frame of the question changed from in the past 30 days to in the past 12 months.

2010	2013	2015	2017	2019	2021
					17%
19%	NA	22%	21%	17%	17%
					83%
5%	9%	7%	6%	7%	9%
750/	700/	700/	070/	0.004	0.494
35%	38%				24%
		19%	19%	18%	15%
				17%	11%
				6%	7%
32%	28%	24%	19%	21%	19%
20%	16%	15%	11%	8%	7%
30%	33%	31%	23%	23%	18%
18%	18%	13%	14%	13%	11%
15%	16%	14%	10%	8%	8%
3%	3%	3%	1%	1%*	1%
			2%	1%**	1%
20%	5 16%	13%	8%	11%	8%
				00/	604
				8%	6%
1.40/	1.40/	00/	60(70/	20/
					2%
5%	1%	6%	4%		1%
		1/10/	0.0/		26%
170/	100/				12% 2%
15%	I∠%	9%	0%		2% 47%
				30%	47%
7%	6%	5%	4%	3%	4%
				40%	40%
8%	7%	5%	4%	3%	3%
23%	20%	18%	15%	11%	13%
				24%	21%
12%	12%	6%	5%	7%	6%
					40%
	20% 30% 18% 15% 20% 14% 5% 13% 7% 8% 23%	24% 30% 19% NA 5% 9% 5% 9% 35% 38% 35% 28% 20% 16% 30% 33% 18% 18% 15% 16% 30% 33% 18% 16% 3% 7% 18% 16% 3% 7% 18% 16% 15% 16% 3% 3% 18% 16% 3% 3% 18% 16% 3% 3% 18% 16% 3% 7% 4 14% 5% 7% 4 13% 12% 8% 7% 8% 7% 8% 7% 23% 20%	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	24% 30% 27% 26% 19% NA 22% 21% 19% 9% 7% 6% 5% 9% 7% 6% 35% 38% 32% 27% 35% 38% 32% 27% 35% 38% 32% 27% 35% 38% 32% 27% 35% 38% 32% 1% 19% 19% 19% 1% 20% 16% 15% 1% 18% 18% 13% 14% 15% 16% 14% 10% 30% 3% 3% 3% 20% 16% 13% 8% 18% 16% 13% 8% 20% 16% 13% 8% 14% 9% 6% 4% 13% 12% 9% 6% 13% 12% 9% 25% 4 9% 5% 4% 23% 20% 5%	24% 30% 27% 26% 21% 19% NA 22% 21% 17% 19% NA 22% 21% 17% 5% 9% 7% 6% 7% 35% 38% 32% 27% 29% 35% 38% 32% 27% 29% 35% 38% 32% 27% 29% 35% 38% 32% 27% 29% 19% 19% 18% 18% 18% 20% 16% 19% 21% 6% 20% 16% 15% 11% 8% 30% 33% 31% 23% 23% 15% 16% 14% 10% 8% 30% 33% 3% 1% 1%* 40% 13% 16% 14% 1%* 15% 16% 13% 8% 1%* 20% 16% 13% 6% 3% 14% 9% 6% 3% 3%



RESOURCES Who can I contact for help?

Listed below are various community resources to assist in getting the help you, your child, family member or friend may need. These contacts are not to be used in an emergency.

If you have an emergency, please call 911 immediately.

Great Rivers 211

Offers free, confidential community information and referrals 24 hours/7 days a week. Trained specialists are available to talk about any situation or problem and can help you find resources in your community. Dial: 2-1-1

National Suicide Prevention Lifeline

988 has been designated the three-digit dialing code that will route callers to the National Suicide Prevention Lifeline. It is active across the United States. Trained counselors will provide support and connect you to resources. Dial or text 9-8-8

The Trevor Project

An online resource hub for LGBTQ young people and the adults and allies who support them. They provide crisis support, peer support, education and advocacy. Trained counselors available 24/7. If you are a young person who is in crisis, feeling suicidal, or in need of a safe and judgmentfree place to talk, call The Trevor Lifeline now. Dial 866-488-7386 or text 'START' to 678-678 www.thetrevorproject.org

Child Mind Institute

An independent nonprofit dedicated to providing research and resources to support children and families struggling with mental health or learning challenges. www.childmind.org

Coulee Bridges

A website created by the School District of La Crosse with information and local resources to address a variety of youth challenges. www.lacrosseschools.org/couleebridges

Endnotes:

- ¹ Au, R., et al. (2014). School Start Times for Adolescents. Pediatrics, 134(3), 642-649. https://doi.org/10.1542/peds.2014-1697
- ³ Centers for Disease Control and Prevention. (2021, September 8). Teens | Health Effects | Marijuana | CDC. www.cdc.gov. https://www.cdc.gov/marijuana/health-effects/teens.html
- ⁴ CDC. (2020, September 10). Sleep in Middle and High School Students. <u>www.cdc.gov;</u> CDC. https://www.cdc.gov/healthyschools/features/students-sleep.htm
- ⁵ Health Considerations for LGBTQ Youth | Disparities | Adolescent and School Health | CDC. (n.d.). https://www.cdc.gov/healthyyouth/disparities/health-considerations-Igbtq-youth.htm



For more information, please visit bettertogetherlacrosse.org

² Centers for Disease Control and Prevention. (2022, November 10). Quick facts on the risks of e-cigarettes for kids, teens, and young adults. Centers for Disease Control and Prevention; CDC. https://www.cdc.gov/tobacco/basic_ information/e-cigarettes/Quick-Facts-on-the-Risks-of-E-cigarettes-for-Kids-Teens-and-Young-Adults.html