



La Crosse County

# Youth Risk Behavior Survey Report

2023



# Better Together

in La Crosse County

Better Together was funded by the Advancing a Healthier Wisconsin Endowment from 2016-2024. During this time, the goal of Better Together was to increase protective factors and resilience for middle and high school-age youth at risk for depression. One of the key strategies to achieve this goal was to increase knowledge and awareness of youth and family needs through data collection, data sharing, and improved communication processes. Part of implementing this strategy included the creation and distribution of the La Crosse County Youth Risk Behavior Survey (YRBS) Report and Summary Trends, highlighting risks and protective factors for La Crosse County youth. Future work on the YRBS report will be transitioned to the La Crosse County Health Department, ensuring the continuation of this important data-driven work for the 2025 report.

*Special thanks to Diana DiazGranados and Katy Steffes for preparing and writing this report.  
Graphic Design by Bridget Leonhard*



## Introduction

In 2023, 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 and violence; sexual health; mental health; protective factors; adversity; tobacco use and vaping; alcohol and other drug use; nutrition and physical activity; and screen time and social media use.



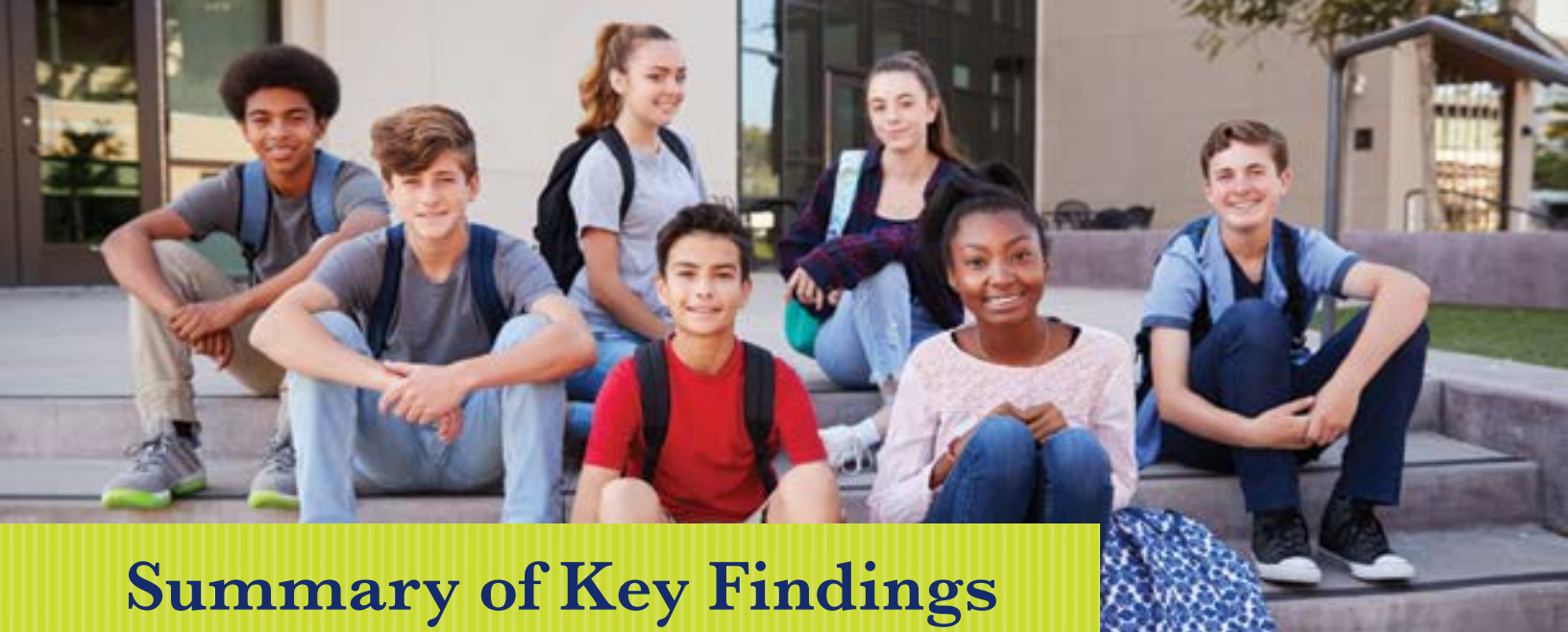
Administered every two years, the YRBS is a voluntary, self-administered, anonymous questionnaire that students take using the Wisconsin Online YRBS system in a proctored environment during the school day. Parents are informed of the survey and have the option to not have their student participate.

In 2023, La Crosse County public schools completed the YRBS survey between January-April. This is the second La Crosse County Youth Risk Behavior Report. This report includes 2019, 2021, 2023 La Crosse County YRBS data and 2023 YRBS data at the state level for comparison. We include quotes at the end of the report from focus groups held with students across the county where they discussed issues important to them. The purpose of this 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

This is the first comprehensive look at youth well-being in La Crosse County following the height of the COVID-19 pandemic. While many aspects of life have returned to normal, the lingering effects of the pandemic continue to impact our communities. Youth face ongoing stressors, including disruptions in learning, challenges to social-emotional development, and increased mental health struggles. Additionally, new challenges, such as the rise in school shootings nationally and risks posed by social media, further exacerbate the stress students may experience. In La Crosse County, 80% of high school students reported daily use of social media, and 41% reported “heavy use,” defined as using social media at least once per hour. This highlights the need to foster healthy usage among youth.

Despite these challenges, La Crosse County youth continue to demonstrate resilience. Most students in the county report positive health behaviors, such as wearing seatbelts, getting regular exercise, practicing healthy nutrition, and engaging in school activities. Many students also have protective factors, including a sense of belonging at school, a supportive adult in their lives, and an avoidance of substance use. While most indicators

remained statistically unchanged compared to 2021, a few exceptions are cause for concern. Compared to 2021, negative trends have emerged in alcohol use and binge drinking. Additionally, there were increases in reported drinking and driving as well as texting and driving. More students reported ever having sex and sexual and dating violence rates remain relatively unchanged, highlighting the importance of promoting healthy relationships.

Mental health indicators remain a significant concern. The percentage of students who reported feeling so sad and hopeless that it affected their daily activities decreased slightly but remains high at 29%. Similar to 2021, nearly half of all students reported struggling with anxiety, 20% reported engaging in self-harm, and 16% reported seriously considering suicide in the past year. Over a third of students reported living with someone who has a mental illness or was suicidal, signaling exposure to childhood adversity. These indicators underscore the ongoing need for youth to receive support in addressing mental health challenges.

As we continue to monitor YRBS trends, it is important to prioritize prevention and intervention practices that support youth well-being and help them navigate the challenges they face.

## SURVEY RESULTS

The La Crosse YRBS Report includes responses from **3,410** students from all five public school districts in La Crosse County. This represents **71%** 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, 2021 and 2023 and the 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/vrbs/online>). The DPI report includes a more detailed breakdown of data by sex, grade level, and higher risk populations.

## STUDENT CHARACTERISTICS

	2021	2023
<b>GENDER</b>		
Female	48%	49%
Male	52%	51%
<b>GRADE LEVEL</b>		
9th Grade	28%	28%
10th Grade	25%	29%
11th Grade	25%	24%
12th Grade	22%	20%
<b>RACE / ETHNICITY</b>		
American Indian/Native American	1%	<1%
Asian/Pacific Islander	9%	9%
Black/African American	3%	3%
Hispanic/Latino	6%	6%
White (Non-Hispanic)	77%	76%
More than one race	5%	6%
<b>ADDITIONAL CHARACTERISTICS</b>		
Lesbian, Gay, Bisexual, Transgender (LGBT)	15%	15%
Have a physical disability or chronic health condition	11%	12%
Experienced hunger in past 30 days due to lack of food at home	21%	22%
Have lived in 4 or more places in their lifetime	33%	33%

## 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:

- Females
- Students who identify as lesbian, gay, bisexual, or transgender
- Students who report low grades: Ds and Fs
- Students of color (students who identify as 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)
- Students with Special Education Services

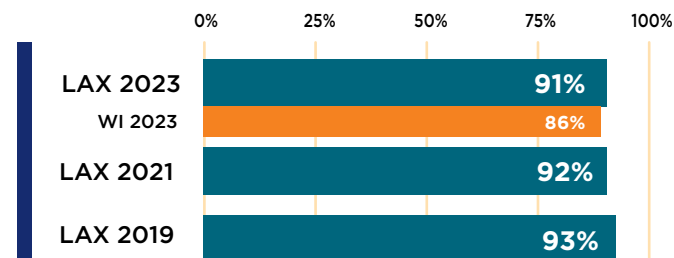


# SAFETY & VIOLENCE

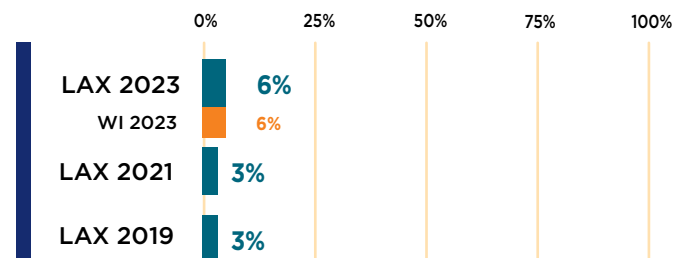
## TRAFFIC SAFETY

According to the Centers for Disease Control and Prevention (CDC), motor vehicle crashes are a 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.

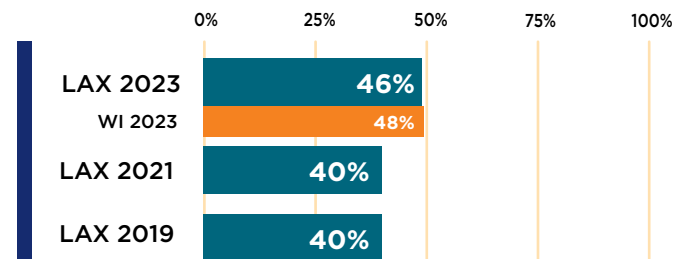
### % most of the time or always wear a seatbelt



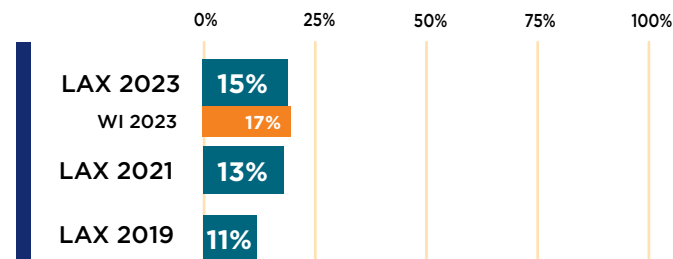
### in the past 30 days... % drove after drinking



### in the past 30 days... % text/email while driving



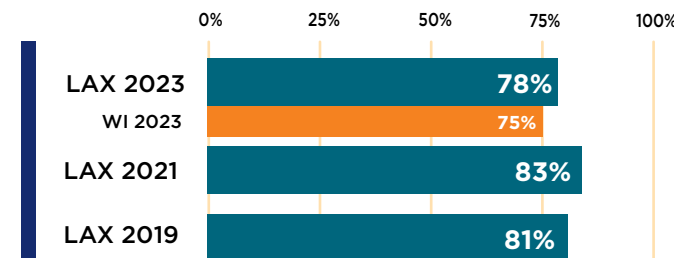
### in the past 30 days... % rode with driver who drank



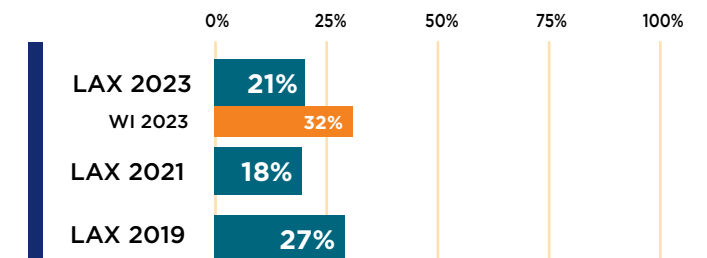
## SCHOOL SAFETY

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.

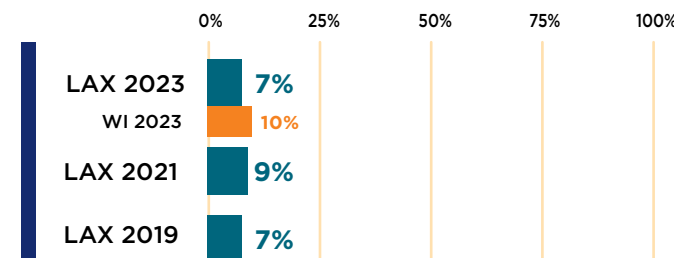
### % most of the time or always feel safe at school



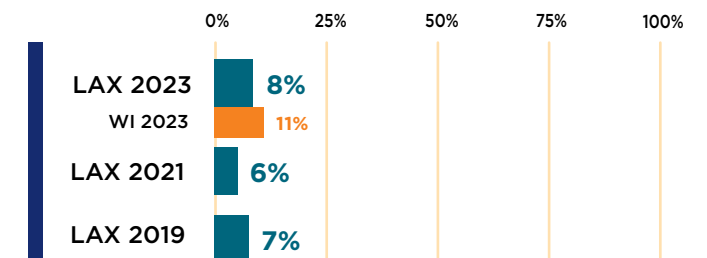
### % agree or strongly agree that violence is a problem at school



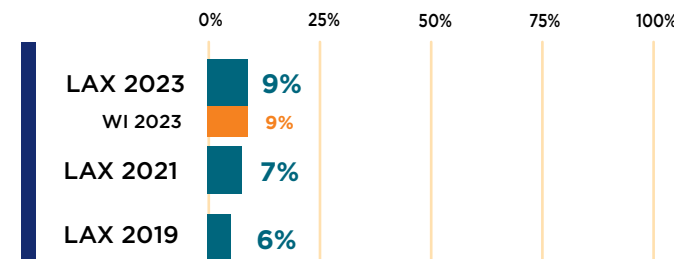
### in the past 30 days... % missed school due to safety concerns at school or en route



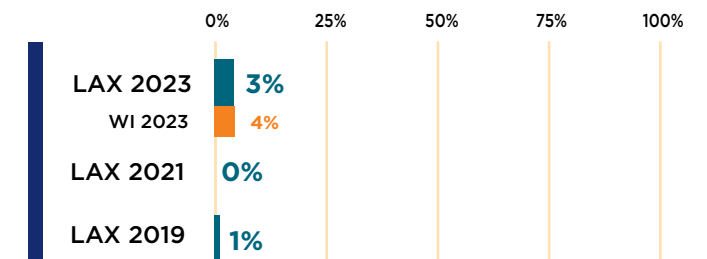
### in the past 12 months... % in a physical fight on school property



### in the past 12 months... % threatened or injured with weapon at school



### in the past 30 days... % brought a weapon\* to school



\*In 2023 the question wording changed from "gun only" to "any weapon, such as a gun, knife, or club".



# FOCUS ON: Gun Violence

## Why this matters:

In 2020, firearms became the leading cause of death for children and teens ages 1-17<sup>1</sup>. The prevalence of school shootings in the U.S. significantly impacts youth mental health by fostering heightened anxiety, fear, and a sense of vulnerability, even among students not directly affected. Exposure to gun violence, whether through direct experience or witnessing it in their communities, can lead to long-term physical, emotional, and psychological harm, making it critical to address this issue through both preventative and supportive measures.

## What we can do<sup>2</sup>:

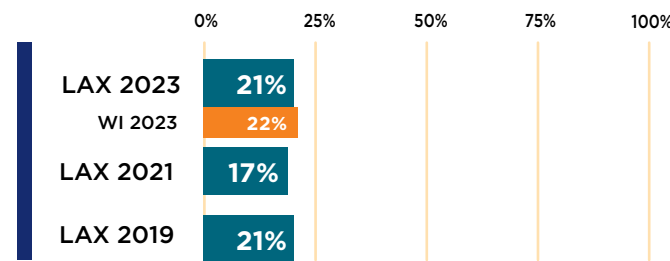
- Ensure that guns kept at home are stored locked and unloaded.
- Report any threats or knowledge of an attacker's plan immediately.
- Know the warning signs that may indicate an individual is in crisis or needs help:
  - Suddenly withdrawing from friends, family and activities (including online or via social media).
  - Excessive irritability, lack of patience, or becoming angry quickly.
  - Experiencing chronic loneliness, social isolation, or bullying.
  - Expressing persistent thoughts of harming themselves or someone else.
  - Making direct threats toward a place, another person, or themselves.
  - Bragging about access to guns or weapons.
  - Recruiting accomplices or audiences for an attack.
  - Cruelty to animals.



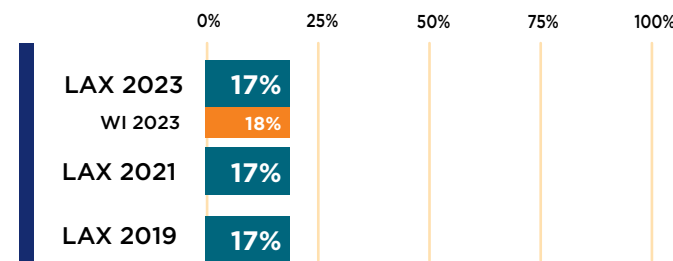
## BULLYING & MISTREATMENT

Bullying and mistreatment encompass unwanted, ongoing aggressive behavior and unfair treatment that involves a real or perceived power imbalance. Youth who experience bullying or mistreatment, including mistreatment based on race or ethnicity, may face serious, lasting consequences. Caregivers, school staff, and other adults can help prevent bullying and mistreatment by talking about it, building a safe school environment, and communicating with and listening to youth.

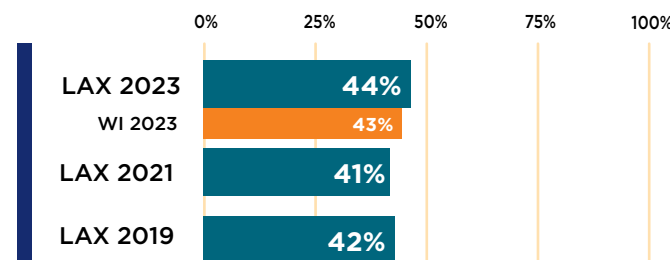
in the past 12 months...  
**% bullied on school property**



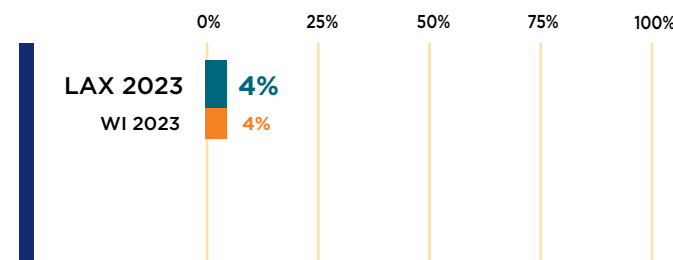
in the past 12 months...  
**% electronically bullied**



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



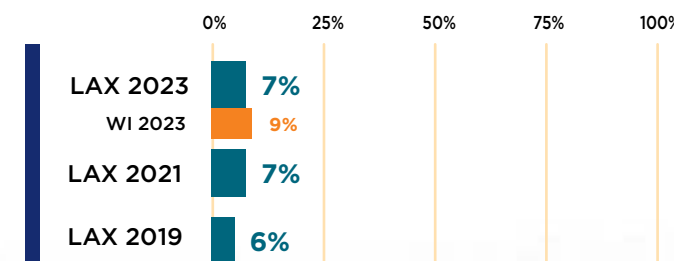
**% most of time or always experience mistreatment due to race/ethnicity**



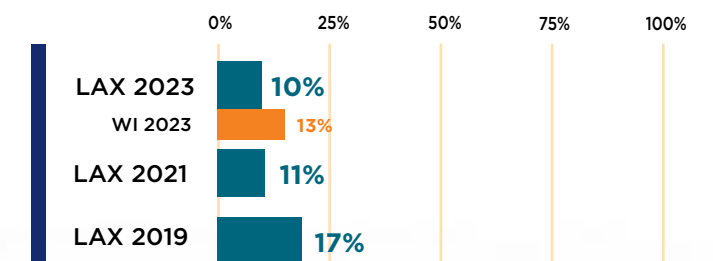
## SEXUAL & DATING VIOLENCE

Sexual 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.

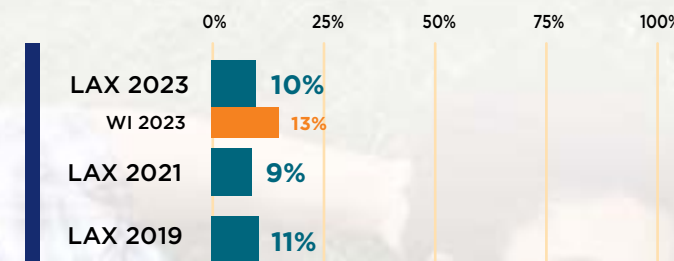
**% ever been raped**



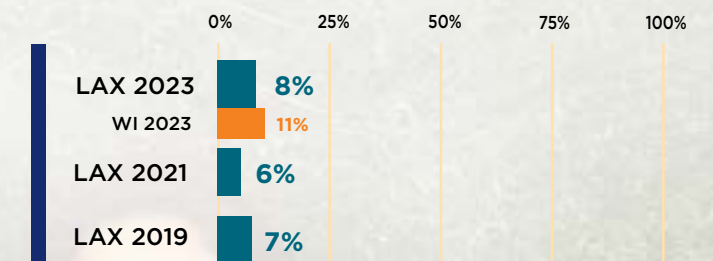
**% ever been forced to do anything sexual**



in the past 12 months...  
**% dating partner forced something sexual**



in the past 12 months...  
**% physical violence by dating partner**



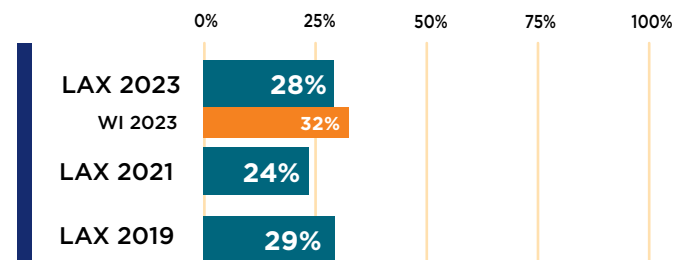
**RAINN (800-656-4673) is the National Sexual Assault Hotline. If you or someone you know has been sexually assaulted or needs support, RAINN is available 24/7 and is confidential.**



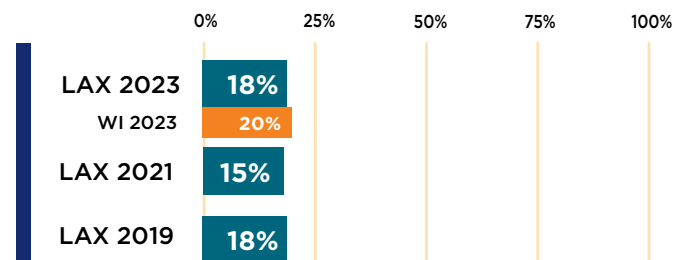
# SEXUAL HEALTH

Healthy sexuality is an important part of adolescent development. Risky sexual behavior can negatively affect youth by increasing their risk of STIs and unintended pregnancy and can contribute to poor health outcomes in adulthood.

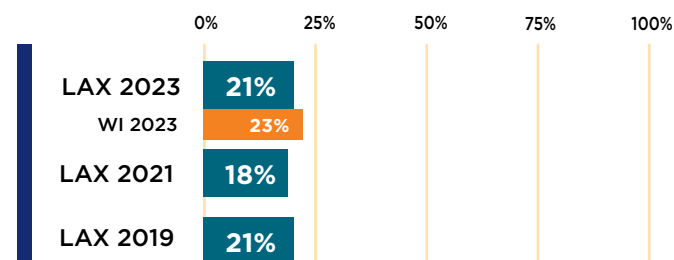
## % ever had sexual intercourse



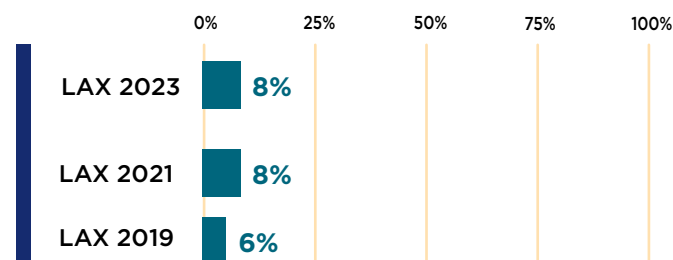
## in the past 30 days... % sent, received, or shared sexual photos or images



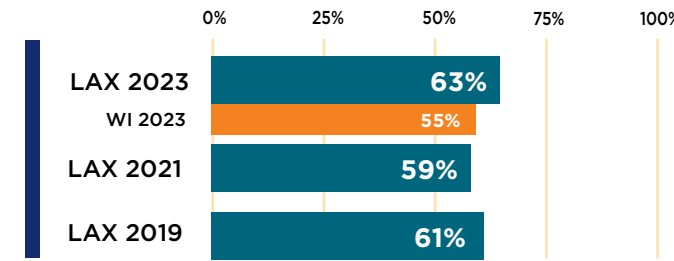
## in the past 3 months... % currently sexually active



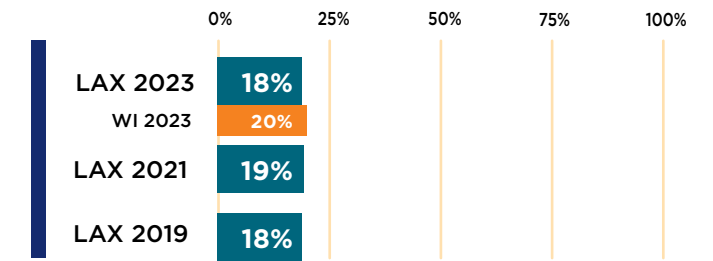
## among sexually active students... % whose first sexual intercourse was before age 13



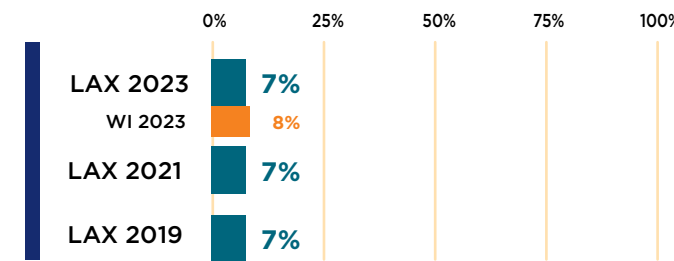
## among sexually active students... % who used a condom during last sexual intercourse



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



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



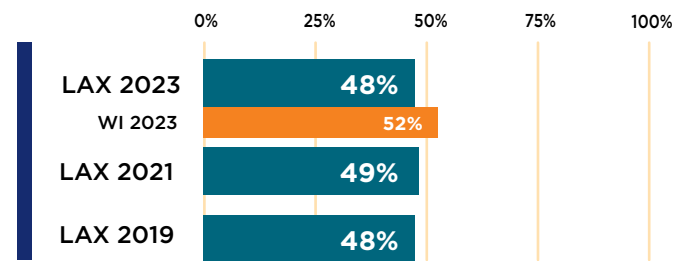




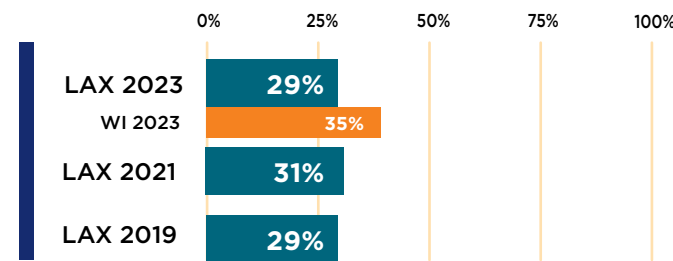
# MENTAL HEALTH

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.

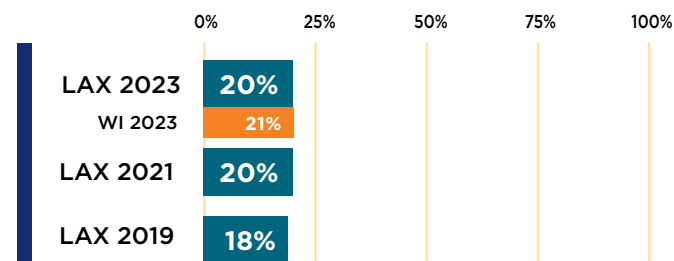
in the past 12 months...  
**% experienced problems with anxiety**



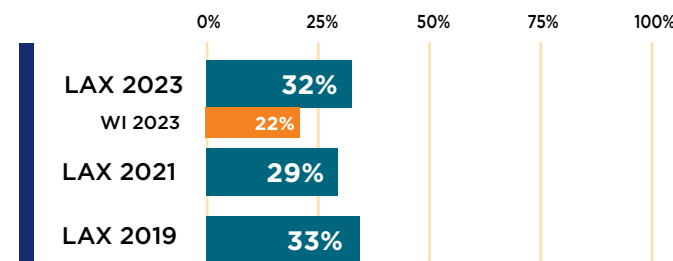
in the past 12 months...  
**% so sad or hopeless they stopped usual activities**



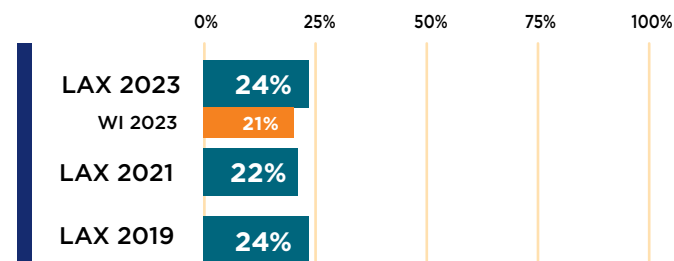
in the past 12 months...  
**% hurt themselves on purpose (self-harm)**



**% list adult as most likely source of emotional support**

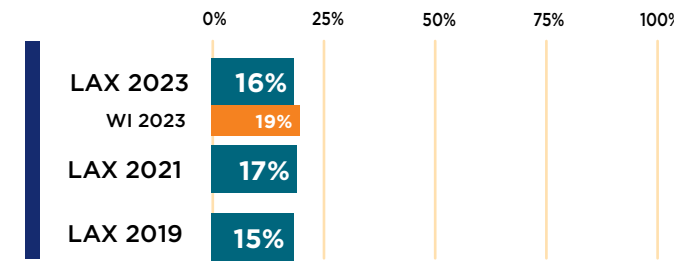


**% most of the time or always get emotional help when needed**

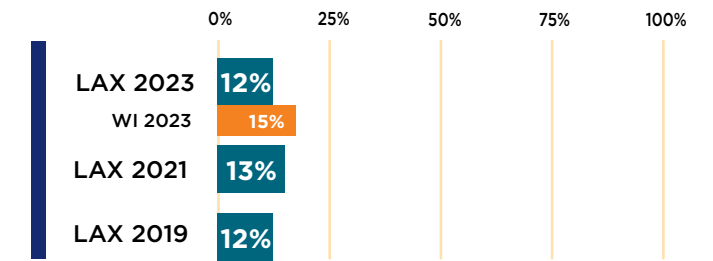


## SUICIDE

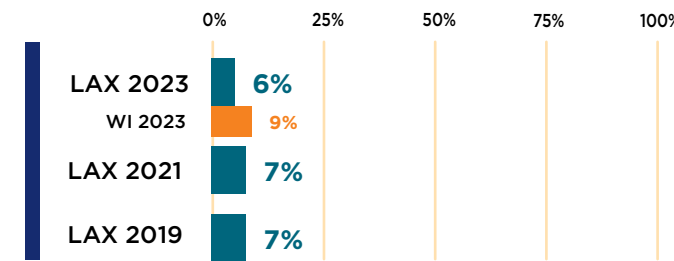
in the past 12 months...  
**% seriously considered suicide**



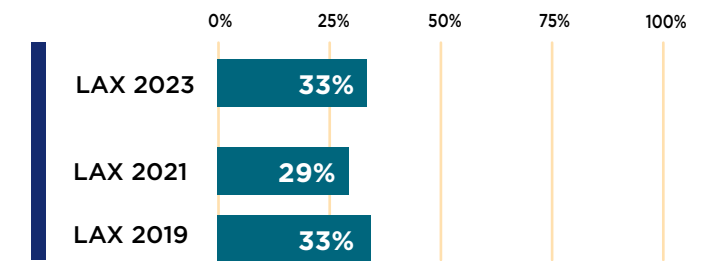
in the past 12 months...  
**% made a suicide plan**



in the past 12 months...  
**% attempted suicide**



among students who attempted suicide in the past 12 months...  
**% who received medical attention**



## FOCUS ON: Suicide Prevention

### 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 self-harm, 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

- 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

**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.

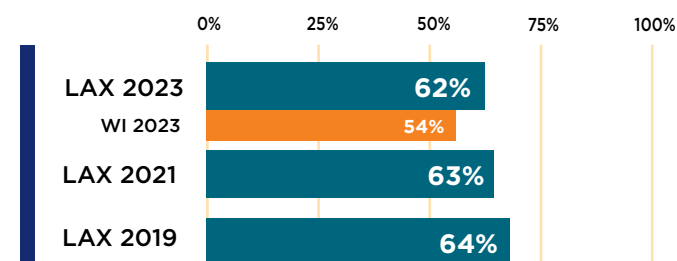


# PROTECTIVE FACTORS

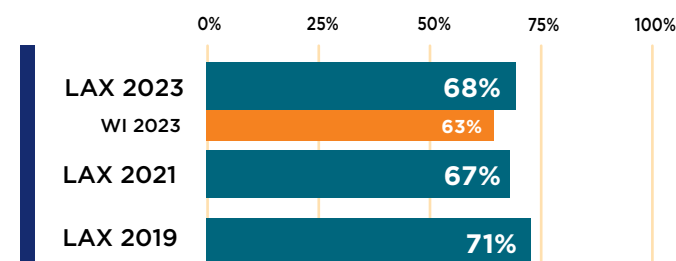
## AT SCHOOL, COMMUNITY & AT HOME

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.

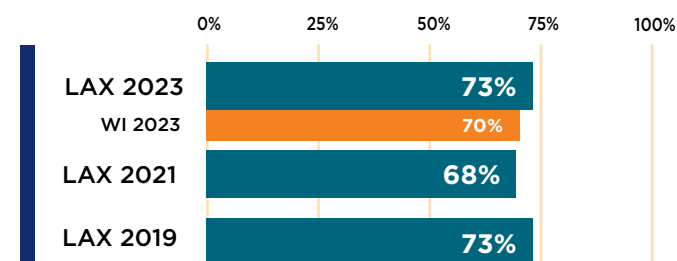
### % agree or strongly agree they belong at school



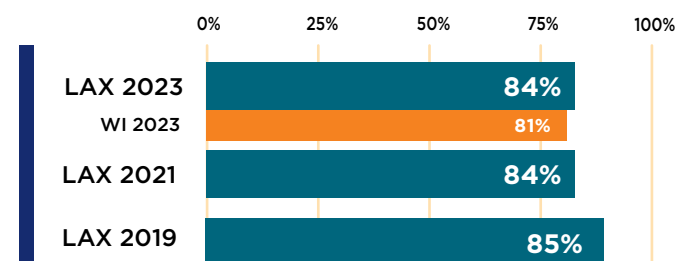
### % participate in school activities, teams, or clubs



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



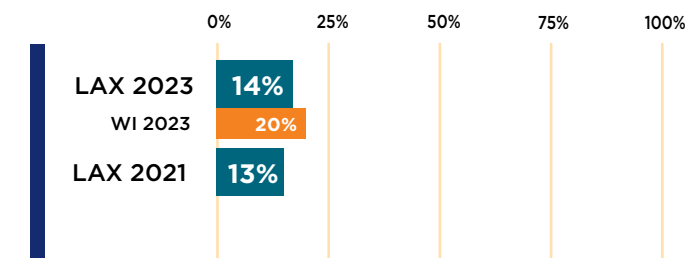
### % have at least one supportive adult besides parent(s)



## ADVERSITY

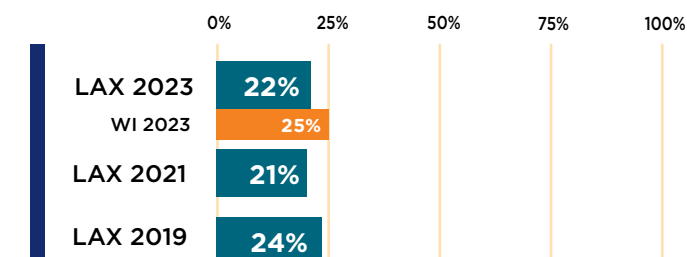
Adversity includes factors such as unstable housing, food insecurity, exposure to violence, and lack of supportive adults. These challenges can create significant barriers to healthy development and long-term success.

### % ever witnessed an attack in their neighborhood

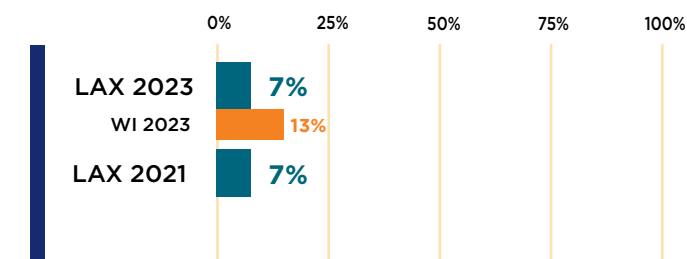


in the past 30 days...

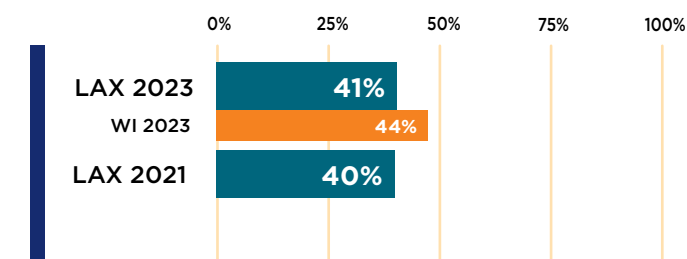
### % experienced hunger due to lack of food at home



### % do not have adult who provides for their basic needs



### % have lived with someone with a mental illness



## 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?

1. 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.<sup>3</sup>
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.

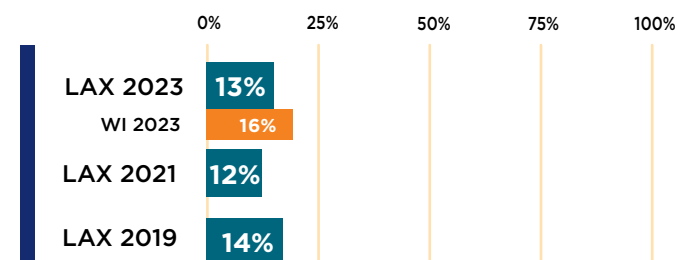




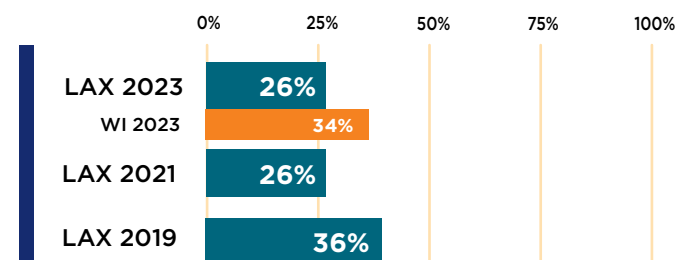
# TOBACCO & VAPING

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, nicotine, and e-cigarette products among youth should continue in order to sustain any progress.

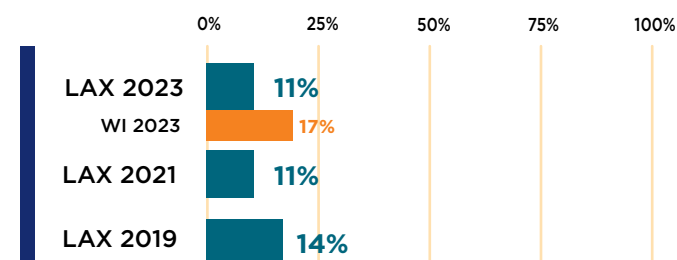
in the past 30 days...  
**% used vape/juul/e-cigarette**



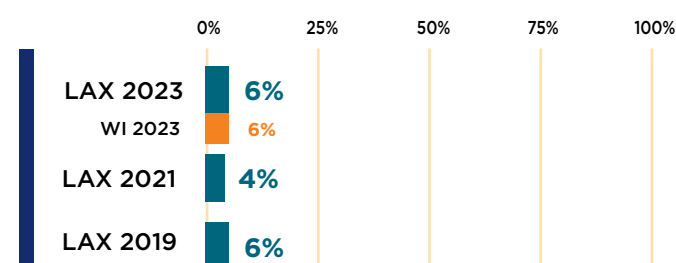
**% ever tried vaping/juul/e-cigarette**



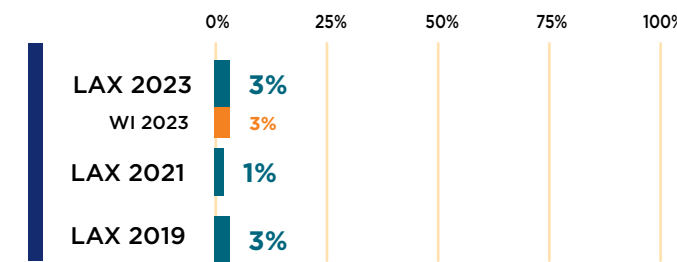
**% ever tried cigarettes**



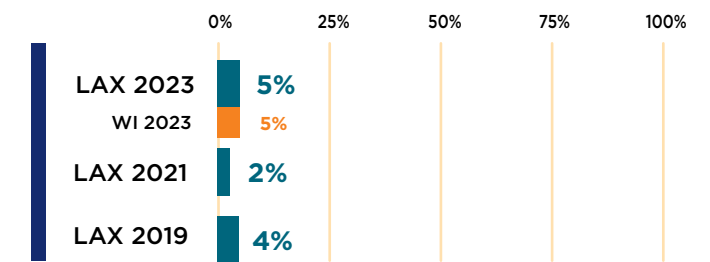
in the past 30 days...  
**% use of any other tobacco product**



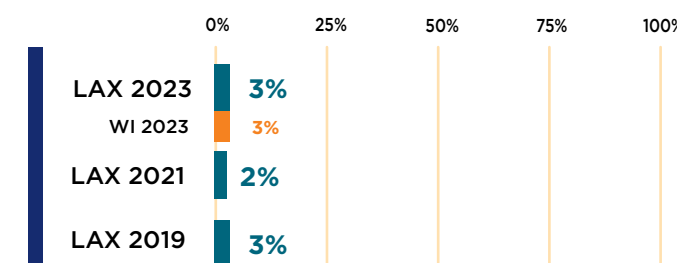
in the past 30 days...  
**% use chew, dip, or other smokeless tobacco**



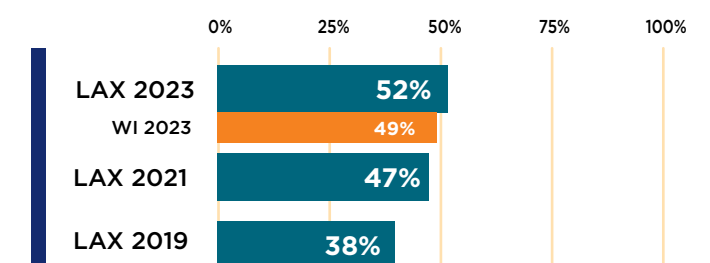
in the past 30 days...  
**% smoke cigars/cigarillos**



in the past 30 days...  
**% smoke cigarettes**



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

- 1. 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 THC and other drugs.
- 2. Vapes/e-cigarettes come in many shapes and sizes.** Many vapes/e-cigarettes are aggressively

- 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.<sup>4</sup>

#### Truth Initiative

<https://truthinitiative.org> offers facts, quitting resources and ways to get involved in preventing youth nicotine addiction. Live VAPE Free is the youth Wisconsin Quit Line, Text VAPEFREE to 873373.



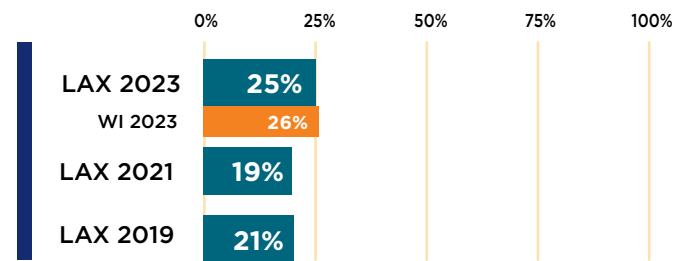


# ALCOHOL, MARIJUANA & OTHER DRUG USE

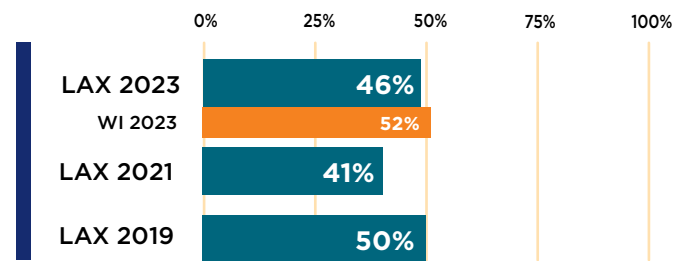
## ALCOHOL

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.

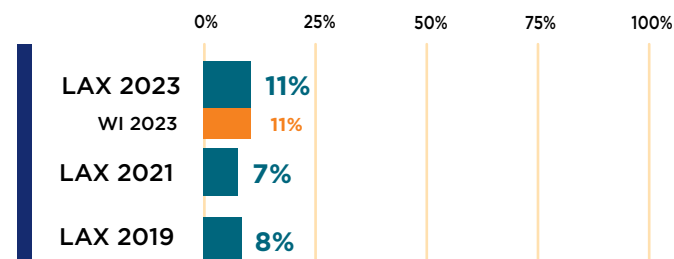
in the past 30 days...  
**% drank alcohol**



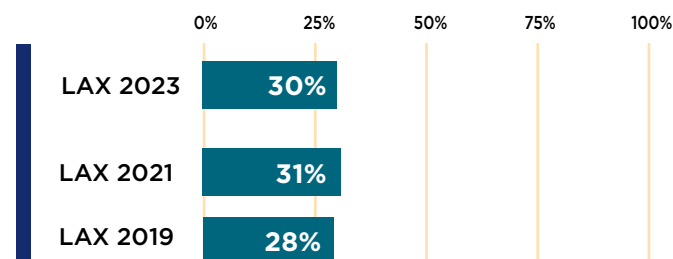
**% ever had an alcoholic beverage**



in the past 30 days...  
**% binge drinking**

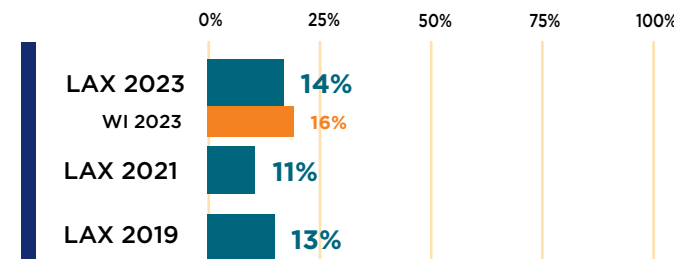


among students who have drunk alcohol...  
**% whose first drink was before age 13**

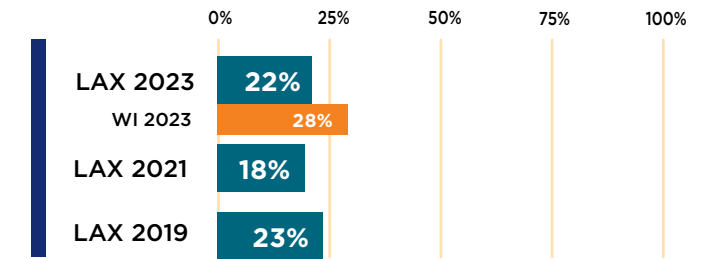


## MARIJUANA

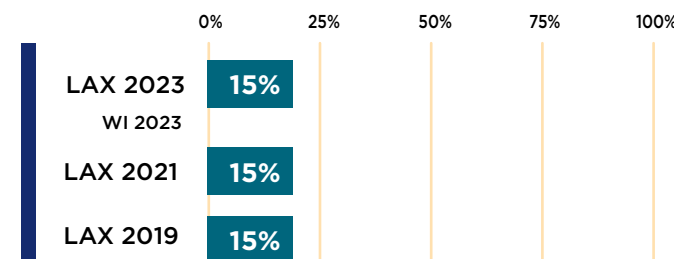
in the past 30 days...  
**% used marijuana**



**% ever used marijuana**



among students who tried marijuana...  
**% who first tried it 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.

### How risky is use?

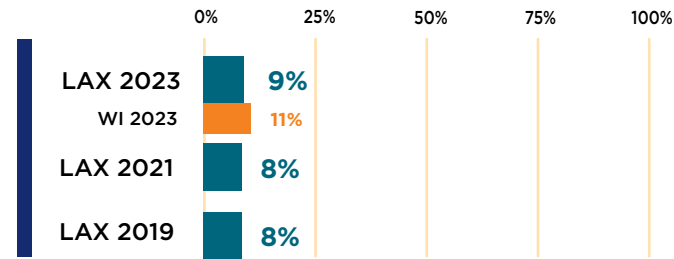
Marijuana directly affects brain function; increases the heartbeat; and harms lung tissue causing damage to blood vessels. Along with the physical risks come mental health risks. Negative effects of marijuana use include difficulty thinking and problem solving; problems with memory and learning; reduced coordination; difficulty maintaining attention; problems with school and social life. Using marijuana during adolescence increases the risk of developing Cannabis Use Disorder.<sup>5</sup>



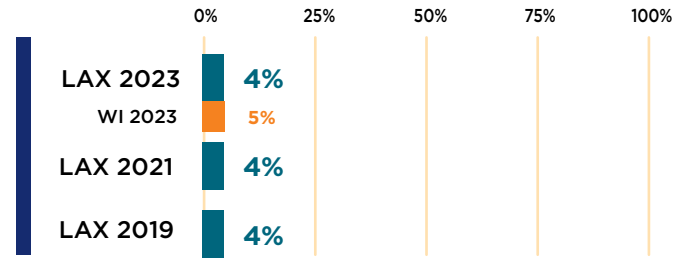


## OTHER DRUG USE

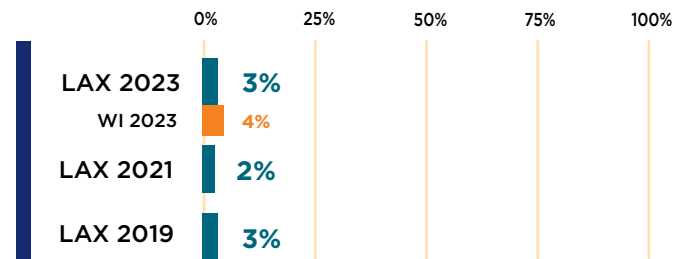
**% ever misused a prescription pain medicine**



**% ever misused an over-the-counter drug**



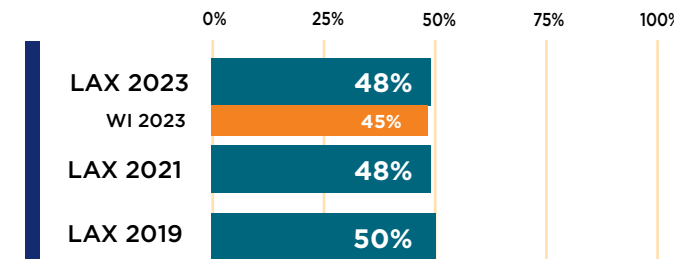
in the past 12 months...  
**% used any illegal drugs besides marijuana**



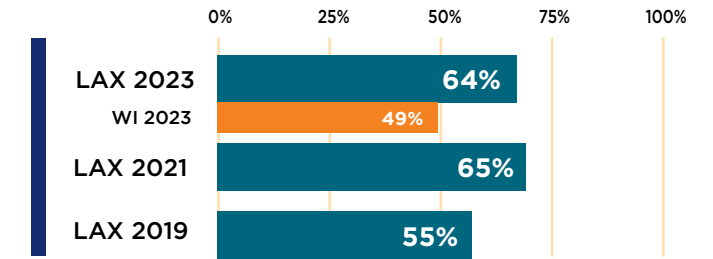
## PHYSICAL HEALTH & HEALTHY HABITS

Health habits that are fundamental to developing youth are adequate sleep, exercise, and healthy nutrition.

**% describe their health as excellent or very good**

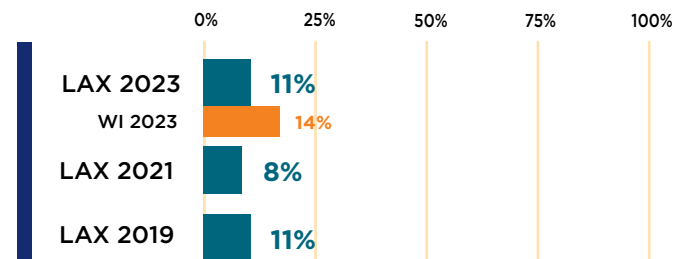


in the past 7 days...  
**% exercise most days**

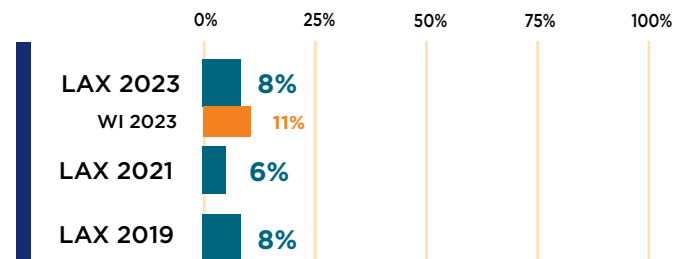


## ALCOHOL & DRUGS AT SCHOOL

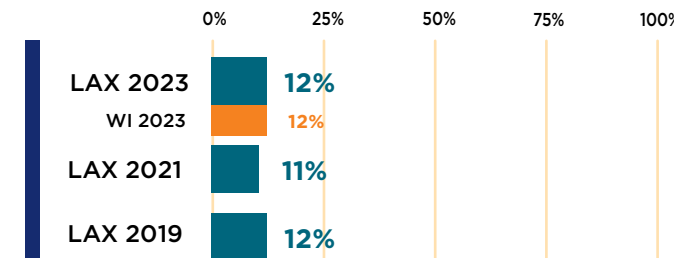
in the past 12 months...  
**% were offered, sold, or given drugs on school property**



in the past 12 months...  
**% attended school under the influence of alcohol or drugs**



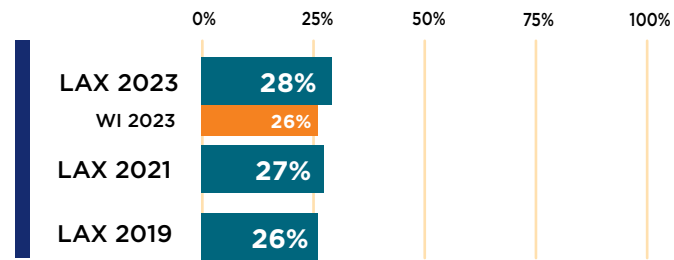
**% have physical disability or chronic health problem**



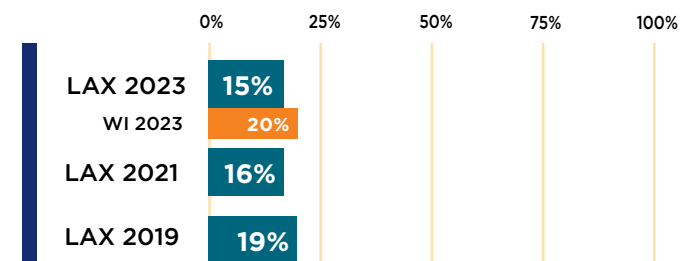


## SLEEP

### % sleep 8 or more hours per night

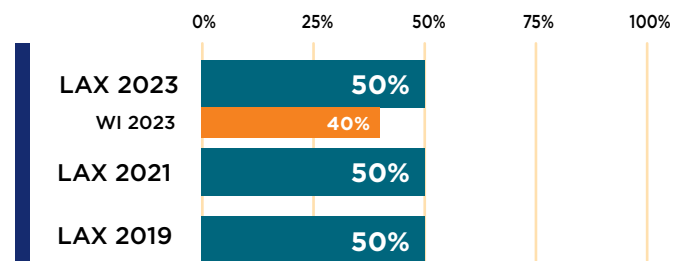


### % sleep 5 or fewer hours per night

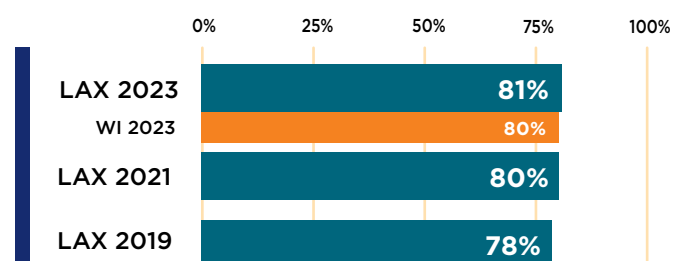


## NUTRITION

### in the past 7 days... % ate fruit every day



### in the past 7 days... % drank water every day



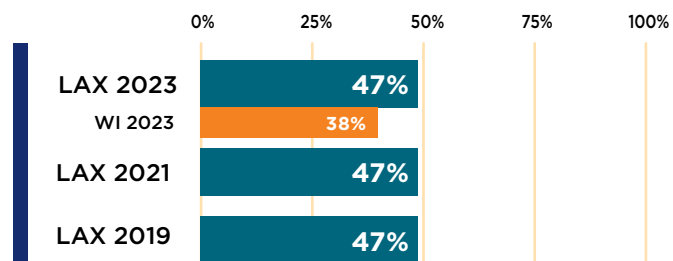
## FOCUS ON: Sleep

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:

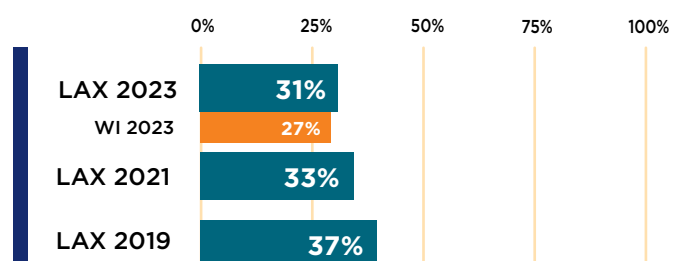
- Keeping a consistent bedtime
- Keeping a quiet, dark, cool bedroom
- Removing electronic devices and stop using them 1 hour before bedtime
- Avoiding caffeine and energy drinks in the afternoon and evening<sup>6</sup>



### in the past 7 days... % ate vegetables every day



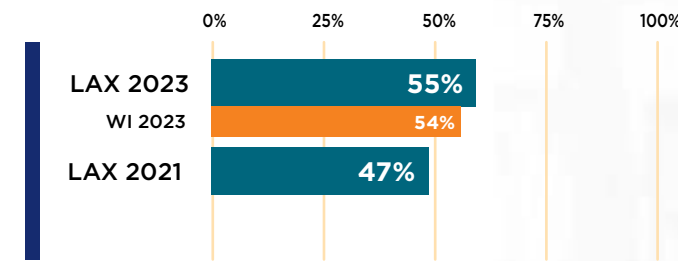
### in the past 7 days... % ate breakfast every day



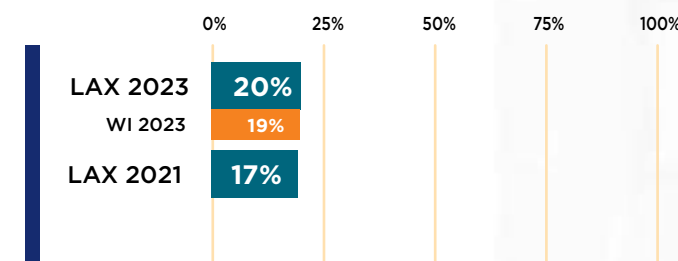
## STUDENT EMPLOYMENT

Student employment can help teens gain important life skills and increase their engagement in their community. However, working excessive hours during the school year can negatively impact teens' academic performance, sleep, and limit their involvement in extracurricular activities that can promote positive connections at school.

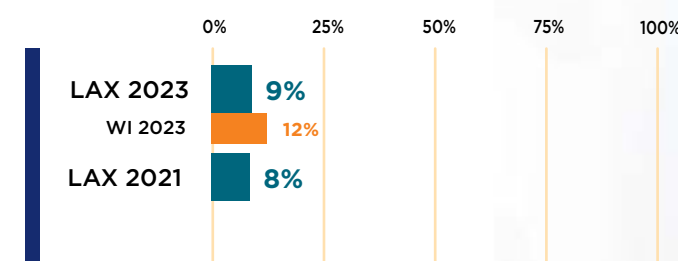
### % worked at least 1 hour per week at a job outside the home



### % worked 10-19 hours per week at a job outside the home



### % worked 20+ hours per week at a job outside the home



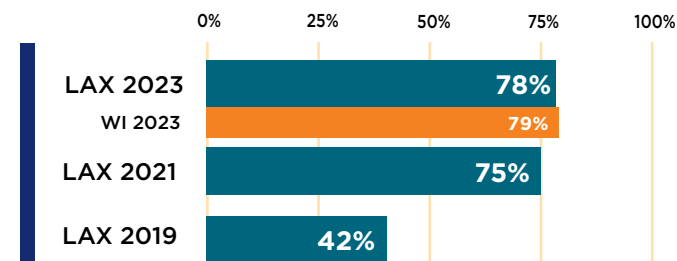




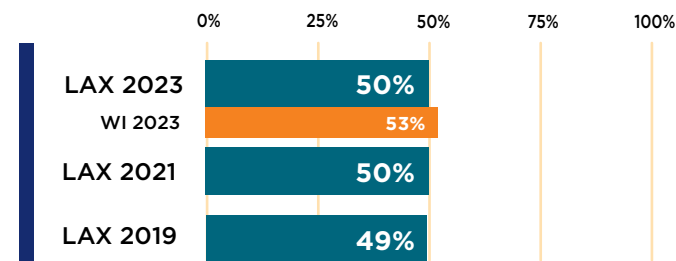
# SCREEN TIME & SOCIAL MEDIA USE

Adolescents spend a lot of time watching screens, including smartphones, tablets, gaming consoles, TVs, and computers. While technology can entertain and teach, too much screen time may lead to health concerns. With the increasing use of social media, there are growing concerns about its impact on mental health and well-being.

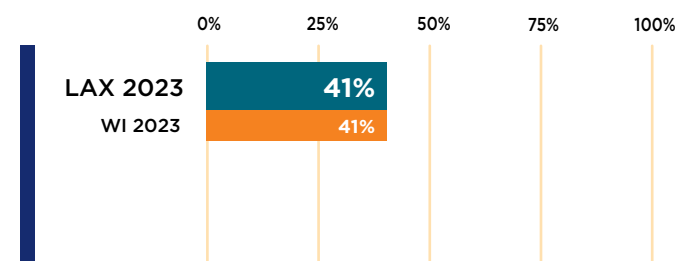
**% spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)**



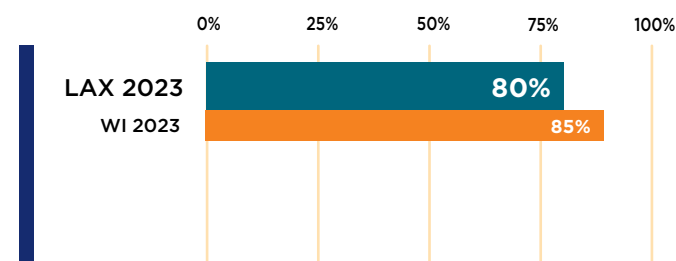
**in the past 7 days... % use phone, Xbox, or other device after midnight on a school night**



**% use social media very frequently (at least once per hour)**



**% use social media daily**



## FOCUS ON: Social Media & Screen Time

### WHY this matters:

Since the pandemic, the use of electronics and social media has increased exponentially.

In 2023, the U.S. Surgeon General released an [Advisory on Social Media and Youth Mental Health](#) highlighting concerns about its impact on children and adolescents. It warns of risks such as exposure to harmful content, cyberbullying, and negative effects on self-esteem.<sup>7</sup>

### 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 as 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.<sup>8</sup> It is important for whole communities to support and uplift LGBT youth and promote a safe and accepting environment for them to thrive in.

### Ways for communities and schools to support LGBT youth<sup>8</sup>

- Use actions to show support for individuals who identify as LGBT, for example:
  - Introduce yourself using your name and pronouns
  - Use inclusive language (i.e., use “they” or “them” when referring to someone who’s pronouns you don’t know, use the term partner instead of boyfriend/girlfriend)
  - Respond to anti-LGBT behavior
- Be visible so youth can see that you are an ally, for example:
  - Display LGBT supportive materials like stickers, posters, or a flag in your classroom or office, if possible
  - Wear a button with your pronouns

- Implement and/or advocate for supportive school policies and practices for LGBT students, for example:
  - Gay-Straight/Genders and Sexuality Alliances
  - Safe spaces
  - Inclusive curricula
- Recognize the risk and protective factors for LGBT students that are present in school environments

2023 YRBS Data by Identity	Students Who identify as LGBT	Non-LGBT Students
% experienced problems with anxiety in the past 12 months	78%	40%
% so sad or hopeless they stopped usual activities in the past 12 months	60%	22%
% hurt themselves on purpose (self-harm) in the past 12 months	47%	13%
% seriously considered suicide in the past 12 months	40%	10%
% agree or strongly agree they belong at school	41%	68%
% most of the time or always get the emotional support when needed	19%	25%
In the past 30 days...% drank alcohol	33%	24%
In the past 30 days...% used marijuana	21%	12%
% bullied at school and/or online in the past 12 months	43%	22%
% ever been raped	18%	4%
% ever been forced to do anything sexual	23%	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 2013-2023

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. 2021 and 2023 results have been weighted and cleaned according to CDC methodology. The last column indicates the 2-year trend for each indicator. The trend directions were calculated using confidence intervals provided by DPI.

**PARTICIPATING SCHOOL DISTRICTS:** West Salem, La Crosse, Onalaska, Holmen, and Bangor

La Crosse County High School Students who reported...	2013	2015	2017	2019	2021	2023	2-Year Trend
<b>TRAFFIC SAFETY</b>							
Rarely or never wore a seatbelt	6%	5%	4%	3%	4%	4%	■
Texted or emailed while driving in past 30 days	49%	29%	25%	40%	40%	46%	■
Drove after drinking alcohol in past 30 days	7%	5%	4%	3%	3%	6%	■
Rode with driver who had been drinking	20%	18%	15%	11%	13%	15%	■
<b>SCHOOL SAFETY</b>							
Most of the time or always felt safe at school				81%	83%	78%	■
Did not go to school because they felt unsafe in the past 30 days	9%	7%	6%	7%	9%	7%	■
<b>BULLYING &amp; MISTREATMENT</b>							
Bullied on school property in past 12 months	30%	27%	26%	21%	17%	21%	■
Electronically bullied during the past 12 months		22%	21%	17%	17%	17%	■
<b>SEXUAL HEALTH &amp; DATING VIOLENCE</b>							
Have ever had sex	38%	32%	27%	29%	24%	28%	■
Sexually active in past 3 months				21%	18%	21%	■
Used a condom at last sexual intercourse				61%	59%	63%	■
Sent, received, or shared a sexually explicit photo or image in past 30 days		19%	19%	18%	15%	18%	■
Ever forced to do anything sexual (kissing, touching, or sexual intercourse)				17%	11%	10%	■
Ever been raped				6%	7%	7%	■
<b>MENTAL HEALTH &amp; HELP SEEKING</b>							
Felt so sad or hopeless almost every day for two weeks or more in past 12 months	29%	31%	28%	29%	31%	29%	■
Significant problems with anxiety in past 12 months				48%	49%	48%	■
Purposefully hurt themselves in last 12 months (self-harm)			17%	18%	20%	20%	■
Most of the time or always get emotional help when needed		20%	20%	24%	22%	24%	■
List an adult as most likely source of emotional support				33%	29%	32%	■
<b>SUICIDE &amp; SUICIDAL THOUGHTS</b>							
Seriously considered suicide in last 12 months	17%	19%	15%	15%	17%	16%	■
Made a suicide plan in last 12 months	16%	13%	10%	12%	13%	12%	■
Attempted suicide in last 12 months	7%	8%	5%	7%	7%	6%	■

**KEY:** ■ No statistically significant change ■ Moving in the wrong direction ■ Moving in the right direction

La Crosse County High School Students who reported...	2013	2015	2017	2019	2021	2023	2-Year Trend
<b>PROTECTIVE FACTORS</b>							
Agree or strongly agree they belong at school	68%	61%	61%	64%	63%	62%	■
Have at least one teacher or other adult at school to talk to	71%	68%	71%	73%	68%	73%	■
Have at least one supportive adult besides a parent(s)				85%	84%	84%	■
Participated in school activities, teams, or clubs				71%	67%	68%	■
<b>ADVERSITY</b>							
Witnessed an attack in their neighborhood					13%	14%	■
Experienced hunger due to lack of food at home in past 30 days				24%	21%	22%	■
Lived in 4 more more residences				33%	33%	33%	■
Do not have an adult who provides for their basic needs					7%	7%	■
Ever lived with someone with a mental illness					40%	41%	■
<b>TOBACCO &amp; VAPING</b>							
Smoked cigarettes in past 30 days	14%	9%	6%	3%	2%	3%	■
Used chewing tobacco at least once in past 30 days	7%	6%	4%	3%	1%	3%	■
Ever tried vaping or e-cigarette				36%	26%	26%	■
Used a vape or e-cigarette in the past 30 days		14%	9%	14%	12%	13%	■
Smoked cigars, cigarillos, or little cigars in past 30 days	12%	9%	6%	4%	2%	5%	■
Among students who vaped or used tobacco products in past 12 months, percentage who tried to quit				38%	47%	52%	■
<b>ALCOHOL &amp; OTHER DRUGS</b>							
Drank alcohol in past 30 days	28%	24%	19%	21%	19%	25%	■
Binge drank in past 30 days	16%	15%	11%	8%	7%	11%	■
Used marijuana in lifetime	33%	31%	23%	23%	18%	22%	■
Used marijuana in past 30 days	18%	13%	14%	13%	11%	14%	■
Used heroin in past 12 months				1%*	1%	1%	■
Used methamphetamines in past 12 months				1%**	1%	1%	■
Ever used prescription pain drug without a doctor's permission	16%	14%	10%	8%	8%	9%	■
Were offered, sold, or given an illegal drug on school property in the past 12 months	16%	13%	8%	11%	8%	11%	■
Attended school under the influence of alcohol or drugs				8%	6%	8%	■
<b>PHYSICAL HEALTH, SLEEP &amp; SCREEN TIME</b>							
Describe their physical health as excellent or very good				50%	48%	48%	■
Physically active 60 or more mins/day on 4 or more days/week	49%	48%	45%	55%^	65%	64%	■
Sleep 8 or more hours a night				26%	27%	28%	■
Sleep 5 or less hours per night				19%	16%	15%	■
Late night screen use (after midnight on a school night)				49%	50%	50%	■
Spent 3+hrs/day engaged in TV, smart phone, video games or other device (non-school work)	35%	38%	42%	42%	75%	78%	■
Saw a dentist in past 12 months				78%	77%	78%	■
<b>STUDENT EMPLOYMENT</b>							
Worked at least 1 hour per week at a job outside the home					47%	55%	***
Work 10-19 hours per week at a job outside the home					17%	20%	***
Work 20+ hours per week at a job outside the home					8%	9%	***

**KEY:** ■ No statistically significant change ■ Moving in the wrong direction ■ Moving in the right direction

^ 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. \*\*\* Cannot be assessed.

# IN THEIR OWN WORDS...

In 2022, we held discussions and focus groups with youth in La Crosse County. These quotes offer a deeper understanding of the data by capturing some of the voices behind the statistics.

## When asked about specific health behaviors, teens said:

- *In regard to vaping:* “Some people just don’t have the ability to, like, monitor it or use it in moderation. A lot of teens are addicted to it and think you can’t get addicted to it and it gets you involved in other things... next thing you know you’re doing hard drugs.”
- “You can get alcohol anywhere here so it’s just encouraging people... to go get a drink. It’s literally everywhere.”
- *In regard to marijuana:* “There’s no activities for teenagers... Once you get to high school there’s not a lot for you to do after school. That’s how they get into drugs and stuff.”
- “My social anxiety first started, like, not being around a whole bunch of people, and, like, a lot of people on Instagram care about likes and stuff so when you go to school there’s, like, pressure on you.”

## When asked how adults, schools and the community could support teen mental health, teens said:

- “Provide more resources and coping skills to students.”
- “Safe spaces, create an environment where teens feel safe and can be themselves.”
- “Listen to students about family problems and understand school might not be a top priority at the moment.”
- “Learn about the signs they might have if they start to struggle with their mental health.”
- “Be more open about it. Talk about things so that other people know that they aren’t alone in what they’re going through.”



**I think if we had more conversations about mental health in school, like the awareness about it, more students would realize that these small anxious feelings can be helped before they get to the point that they are depressed or they have this or that...**



## 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 judgment-free place to talk, call The Trevor Lifeline now. **Dial 866-488-7386 or text ‘START’ to 678-678**  
[www.thetrevorproject.org](http://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](http://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](http://www.lacrosseschools.org/couleebridges)



## Endnotes:

- <sup>1</sup> Villarreal, S., et al. (2024). Gun Violence in the United States 2022: Examining the Burden Among Children and Teens. Johns Hopkins Center for Gun Violence Solutions. Johns Hopkins Bloomberg School of Public Health. <https://publichealth.jhu.edu/2024/guns-remain-leading-cause-of-death-for-children-and-teens>
- <sup>2</sup> Know the signs: You can prevent gun violence and other harmful acts. Sandy Hook Promise. (2024, February 15). <https://www.sandyhookpromise.org/blog/gun-violence/know-the-signs-of-gun-violence/>
- <sup>3</sup> Au, R., et al. (2014). School Start Times for Adolescents. *Pediatrics*, 134(3), 642-649. <https://doi.org/10.1542/peds.2014-1697>
- <sup>4</sup> 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/e-cigarettes/youth.html>
- <sup>5</sup> 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](https://www.cdc.gov/marijuana/health-effects/teens.html)
- <sup>6</sup> CDC. (2020, September 10). Sleep in Middle and High School Students. [www.cdc.gov; CDC. https://www.cdc.gov/healthyschools/features/students-sleep.htm](https://www.cdc.gov/healthyschools/features/students-sleep.htm)
- <sup>7</sup> Office of the Surgeon General (OSG). (2023). Social Media and Youth Mental Health: The U.S. Surgeon General's Advisory. US Department of Health and Human Services. <https://www.hhs.gov/sites/default/files/sg-youth-mental-health-social-media-advisory.pdf>
- <sup>8</sup> Health Considerations for LGBTQ Youth | Disparities | Adolescent and School Health | CDC. (n.d.). <https://www.cdc.gov/healthyyouth/disparities/health-considerations-lgbtq-youth.htm>
- <sup>9</sup> Gay, Lesbian, and Straight Education Network (GLSEN). (2019). Safe Space Kit - A Guide to Supporting Lesbian, Gay, Bisexual, Transgender, and Queer Students in Your School. <https://www.glsen.org/activity/glsen-safe-space-kit-solidarity-lgbtq-youth>

For more information, please visit  
[bettertogetherlacrosse.org](https://bettertogetherlacrosse.org)

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