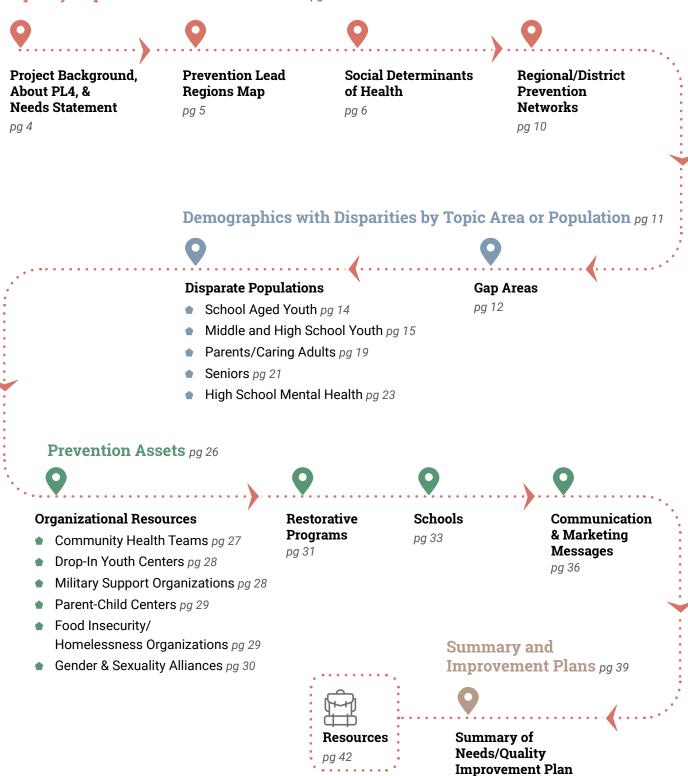
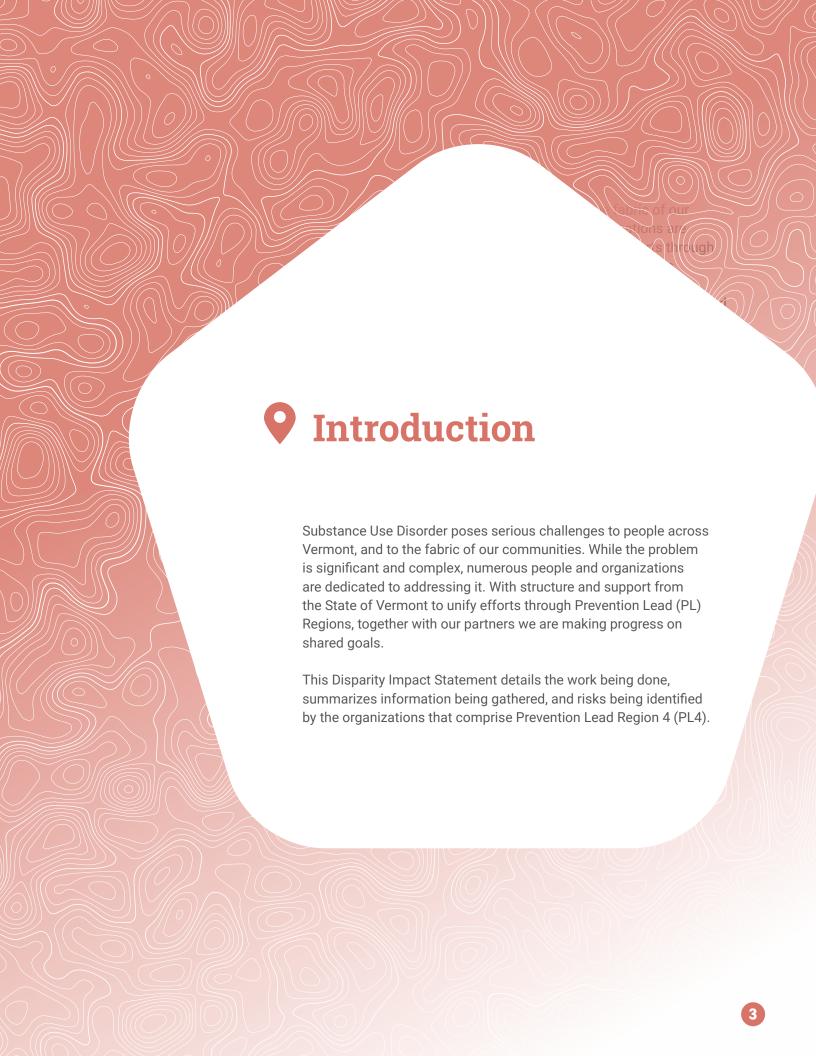


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Project Background

The Vermont Department of Health (VDH), Division of Substance Use Programs (DSU) envisions a substance misuse prevention system in Vermont that is sustainable, scalable, and equitable. This system will use evidence-based/informed/best practice programs, policies, and innovative approaches to prevent the onset of substance misuse disorder, delay initiation of use, promote healthy lifestyles and optimize well-being among individuals, families, and communities across the lifespans of Vermonters.

To accomplish this, DSU has established four (4) regional Prevention Leads (PLs) to increase state, regional, and community capacity to deliver meaningful substance misuse prevention statewide in a manner that ensures prevention coverage in all twelve (12) VDH Health Districts. Funding for these grants comes from state dollars to support substance misuse coalitions. The Prevention Lead Region model:

- builds upon the past and current successes with regional structures;
- strengthens and bolsters existing partnerships;
- and creates new opportunities to build prevention capacity and fill geographic and other identified gaps.

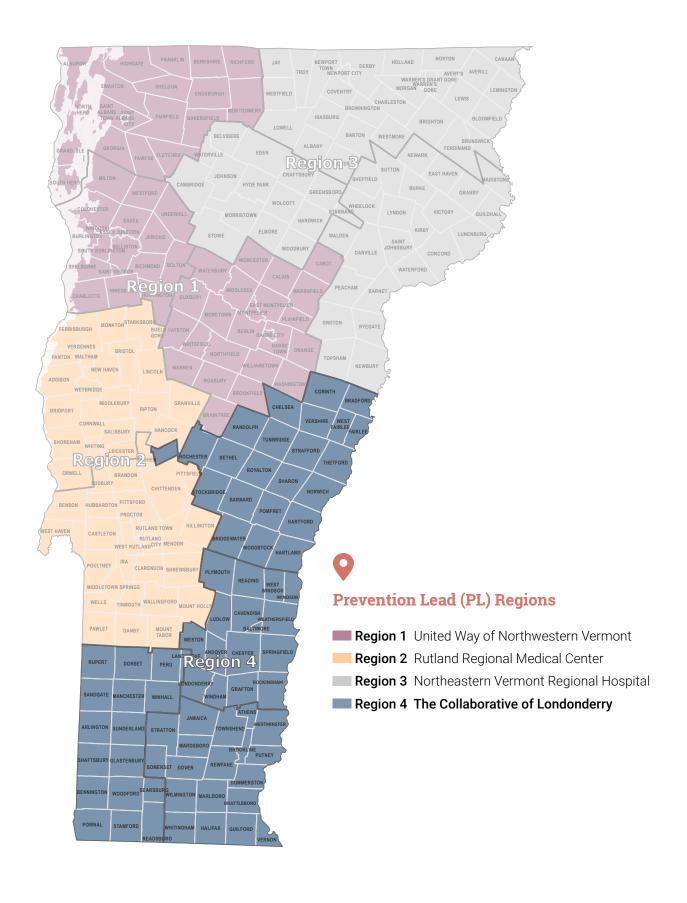
About PL4

Led by The Collaborative of Londonderry, **Prevention Lead Region 4** (PL4) is organized under a grant from the Vermont Department of Health, Division of Substance Use Programs. As part of the statewide initiative, our mission is to increase state, regional and community capacity to deliver meaningful substance misuse prevention in the four VDH Health Districts of East Central Vermont and Southern Vermont, including Bennington, Brattleboro, Springfield, and White River Junction.

PL4 is charged with leading the region in the Strategic Prevention Framework (SPF) process to determine needs, gaps, priorities, and funding allocations. This entity also serves as a fiscal agent, and working with an advisory structure, allocates funding in the region based on need and in a manner that ensures prevention coverage in all health districts. 70% of the funds need to be distributed locally through subrecipient agreements for substance misuse prevention strategies.

Needs Statement

Data from the PL4 needs assessment—a compilation of several federal, state, and local data sources—reveal significant risks and strengths in our community regarding substance misuse prevention. The narrative below outlines these trends for different populations within the communities in this region. Using this information, the quality improvement plan is tailored to address the identified gaps, reinforce protective factors, and guide effective prevention efforts to create a healthier and more resilient community.





Social Determinants of Health

The US Department of Health and Human Services defines social determinants of health as "the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks."

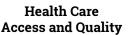
SDOH can be grouped into 5 domains:



Stability









Neighborhood and Built Environment



Social and Community Context

Source: https://health.gov/healthypeople/priority-areas/social-determinants-health

Addressing Social Determinants of Health (SDOH) and equitably serving vulnerable populations in substance misuse prevention is crucial. While SDOH are vast, prevention strategies, in practice, impact several key components of the SDOH model, including culture, healthy child development, social/physical environments, and social support networks. For instance, preventionists often work with housing trusts, property managers, etc. to create smoke-free housing policies to protect youth and non-smokers, as well as shifts cultural norms.

While all of these factors are important, we believe that Economic Stability is the most urgent issue for our region at this point in time.

Many people in our region are experiencing a cost-of-living crisis. High inflation, housing shortages and soaring housing costs, sky-rocketing food costs, impacts from the summer 2023 floods, and the ending of assistance programs that were in place during the Covid Public Health Emergency all contribute to a rising number of people being unable to meet their basic needs.



BY THE NUMBERS: POVERTY

Families and Individuals Experiencing Financial Insecurity

County	% living below poverty level	% age 17 or younger living below poverty level
Orange	9.5%	11.6%
Windsor	9.1%	7.6%
Bennington	13.2%	16.1%
Windham	13.4 %	13.8 %

Due to the cost-of-living crisis, many who are above the poverty level still face the challenges of economic instability.

This issue is not limited to small rural towns; Some of PL4's major population centers have high percentages of people living below the poverty level:

Brattleboro (Windham Co.):



Springfield (Windsor Co.):



Bennington (Bennington Co.):



Data Source: 2021: ACS 5-Year Estimates Subject Tables



"The reality is that the federal poverty level is not a measure of economic well-being. Many Vermonters earning well above the FPL struggle to cover the cost of basic needs such as housing, transportation, and healthcare."

- The State of Vermont's Children 2022 report by Building Bright Futures. See Resources section for full report.



A measure of economic security includes spending less than 30% of annual income on housing. In this region, around 1/3 of those in our region spend 30% or more:

Data Source: 2021: <u>ACS 5-Year Estimates Subject Tables</u>, (accessed 6/19/23)

County	% of Households spending 30% or more of income on housing
Orange	28%
Windsor	30%
Bennington	32%
Windham	35%



BY THE NUMBERS: HOMELESSNESS

Across Vermont, there are staggering increases in unhoused people.

The Point-in-Time Count (PiTC) report for January, 2023 found "an 18.5% increase in persons experiencing homelessness in Vermont compared to the prior year. This is an increase of 197% since the pre-pandemic Point in Time Count in 2020...The number of persons experiencing homelessness and in a household with children increased by 36% compared to the prior year, compared to an 11% increase of people in households with adults only children who experience homelessness are more likely to experience homelessness as adults."

PiTC numbers for PL4 Districts are depicted in the chart below.

Note that, due to limitations of point-in-time data, these numbers do not capture the actual numbers of unhoused persons and households. For example, the Project Alliance in Bennington, a multidisciplinary team tracking Bennington-area homelessness, reports there are 137 households with 98 young people needing housing as of October 2023, a far greater number than reflected in the PiTC study. The PiTC can, however, provide a way to compare rates from year to year and between districts.

Health District	Total # of Persons	# of Unhoused Households with at least one adult and one child
Bennington	312	43
Brattleboro	329	34
Springfield	99	15
White River Junction	188	13

BY THE NUMBERS: FOOD INSECURITY

The price of food rose sharply across the United States over the past 2 years. A new report by the U.S. Department of Agriculture found that 44.2 million people lived in households that had difficulty getting enough food to feed everyone in 2022, up from 33.8 million people the year prior. Those families include more than 13 million youth experiencing food insecurity, a jump of nearly 45 percent from 2021.

- Household Food Security in the United States in 2022, Economic Research Service Economic Research Report Number 325, October 2023

The price of food means that more people are turning to supplemental food support such as food shelves, community meals, and the Veggie Van Go program.

In our region, for example:

Over the past year, the number of visits to White River Junction's LISTEN Food Pantry:

Visits to all WRJ food assistance programs (food pantry, community dinners, etc.):

个50%

个126%

-Listen Community Center annual report Fall 2023

Schools In PL4 that qualify as **Mid-to-High-Poverty** or as **High-Poverty** (75+ Free and Reduced Public Lunch eligible):

Poverty/Food Insecurity High level of free and reduced lunch

7 schools in Region 4 qualify as High-Poverty (75%+ FRPL-eligible)

15 schools qualify as Mid- to High-Poverty (50.1% - 75% FRPL-eligible)

The Kitchen Cupboard* at GBCS (Greater Bennington Community Services), cites an increase of nearly

†70% in shopper visits over the previous year's average.

– Bennington Banner article 11/21/2023 Food security coordinator at the GBCS Kitchen Cupboard sounds the alarm, By Danielle M. Crosier

* A food pantry which serves the greater Bennington region



BY THE NUMBERS: BASIC NEEDS INSECURITY

A lack of access to food and personal care products can have significant physical, emotional, and educational impacts on our communities, and can make substance misuse and poor mental health worse. A survey conducted by ACT Bennington at Mount Anthony Union Middle School in 2022 shows that 31% of the middle school students reported not always having access to menstrual products, clean clothes, soap and shampoo, toothbrushes and toothpaste, or a combination of these items.

Because of the cost-of-living crisis, existing programs are not enough for people to meet their basic needs. As a result, grassroots efforts are springing up to fill the gaps.

Examples:

Online "buy nothing" groups where people give and receive goods and services for free Third spaces, such as the YMCA/Rec Center in Bennington which currently has a free shower program (Bennington District) **Churches** that host community dinners

Area Agencies on Aging, providing services like the Meals on Wheels program that delivers nutritional meals to older people across all districts in PL4

Schools such as Green
Mountain Union High
School in Chester
(Springfield District)
which provides a
shower, washer/dryer,
a free-to-all thrift store,
some food, some
menstrual care products
and other personal
hygiene items, all for
students to use at no
charge

"I got you UV" Facebook group where people post imminent needs for money to pay their electric bill so power isn't turned off, or for rent money so they aren't evicted, or to fill up their tank with gas so they can get to work. Other community members send them money or suggest an organization who can help fill the gap. (White River Junction District)

Coalitions such as ACT Bennington, whose Take Care Project provides free menstrual products, soap, deodorant; 49,300 menstrual products distributed from Jan-Oct, 2023 Hospitals, including
Mt. Ascutney Hospital
and Health Center in
Windsor (Springfield
District), whose
Community Health
Department organizes a
holiday giving program
which will provide gifts
to 125 young people
whose families need
help for the 2023
holidays



"When everyone has what they need to feel healthy and well, our whole community is stronger."

Take Care Project display at VDH-Bennington featuring monthly period kits

ACT Bennington Website



Regional/District Prevention Networks

Across PL4, regional prevention networks and their representatives leverage connections and relationships with regional planning partners, law enforcement, schools, and service organizations to implement prevention practices and participate in projects across the continuum of care. Projects include substance misuse prevention education, prescription medication take-back initiatives, and positive activities and supports for youth.



Green Peak Alliance

Springfield and WRJ Health Districts greenpeakalliance.org

Established in 2018, Green Peak Alliance is a regional network, consisting of five prevention coalitions, that promotes healthy communities in East Central Vermont. The organization brings federal and state resources to local areas in its work with schools and service organizations. Through research, education, and outreach, GPA creates conditions to positively influence the public by increasing youth assets and reducing risks.



Bennington County Regional Prevention Partnership

Bennington Health District thecollaborative.us

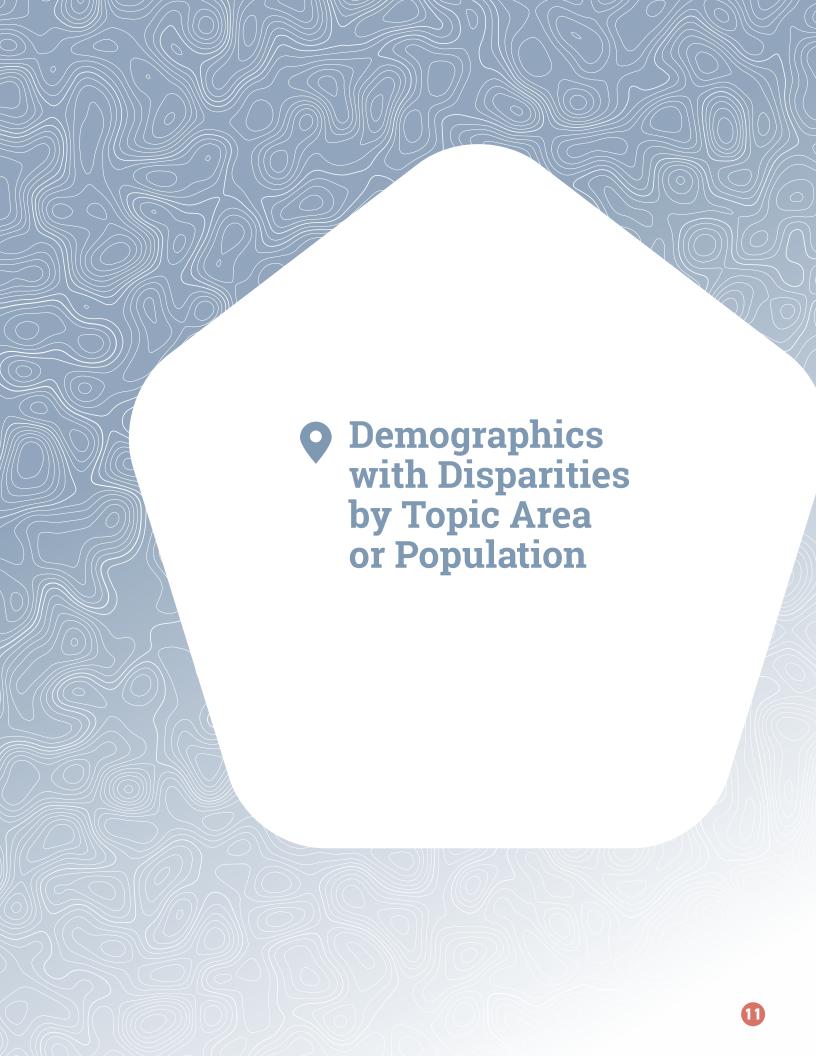
Bennington County Regional Prevention Partnership is a community health group that pursues a public health planning process fostering community action and collaboration to reduce and prevent underage and binge drinking, prescription drug misuse, and cannabis misuse at the regional level.



Windham County Regional Prevention Partnership

Brattleboro Health District | windhampartnership.com

Windham County Regional Prevention Partnership consists of three prevention coalitions in Windham County working together in support of a comprehensive effort to promote wellness and prevent the use/misuse of substances, primarily by youth and young adults throughout Windham County. Its' vision is to create "Communities and places where people are supported, connected and thriving," guided by the principles of health equity and cultural competency.



Q Gap Areas

Prevention is an ongoing project in a continually changing environment. Historically, subject to federal and other funding sources, services have been sporadic. Not every community in VT has equal access to prevention services. One of PL4's key missions is to identify and decrease geographic, demographic, and other gaps in services based on population needs.



Population Break	downs by I	Race						
	Windsor	County	Orange	County	Benningto	on County	Windhan	n County
Total	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Population	57,753		29,277		37,347		45,905	
White alone	52,881	91.56%	26,852	91.72%	35,442	94.9%	41,380	90.10%
Black or African American alone	466	0.81%	151	0.52%	560	1.5%	536	1.20%
American Indian or Alaska Native alone	185	0.32%	113	0.39%	149	0.4%	139	0.30%
Asian alone	548	0.95%	160	0.55%	522	1.4%	494	1.10%
Native Hawaiian or other Pacific Islander alone	17	0.03%	5	0.02%	-	<0.5%	9	0.00%
Some other race alone	437	0.76%	119	0.41%	971	2.6%	523	1.10%
Multi-racial	3,388	5.87%	1,400	4.78%	635	1.7%	2,824	6.20%

Data Source: 2020 Decennial Census

Population Break	downs by	Age						
	Windsor	County	Orange County		Bennington County		Windham County	
Total	Estimate	Percent	Estimate	Percent	Estimate	Percent	Estimate	Percent
Population	57,753		29,277		37,347		45,905	
Under 5 years	2,365	4.1%	1,334	4.6%	1,742	4.7%	1,838	4.0%
5 to 9 years	2,773	4.8%	1,554	5.3%	1,906	5.1%	2,228	4.9%
10 to 14 years	3,101	5.4%	1,696	5.8%	2,109	5.7%	2,445	5.3%
15 to 19 years	2,880	5.0%	1,711	5.8%	2,391	6.4%	2,406	5.2%
20 to 24 years	2,460	4.3%	1,273	4.3%	2,507	6.7%	2,731	5.9%
25 to 64 years	29,948	51.9%	15,140	51.7%	18,212	48.9%	23,358	50.88%
65+	14,226	24.6%	6,569	22.4%	8,097	21.7%	10,899	23.7%

Data Source: 2020 Decennial Census



PL4, which includes the most VT health discricts in the 4 regions of the PL structure, boasts numerous local and regional substance misuse prevention organizations and teams. Despite the efforts of these organizations, significant gap populations persist, categorized into geographic and demographic sectors.

Geographic Gap Populations:

Towns in Vermont near the New Hampshire border may be benefiting from substance misuse prevention efforts in New Hampshire. But there are not many Vermont specific substance misuse prevention efforts in these border areas. They should be categorized as gap areas until a comprehensive assessment and understanding of the work in these regions is achieved.

Rural areas, such as the northern part of Orange County, face a gap in substance misuse prevention. While Little Rivers Health Care and Gifford Health Care serve these towns, their prevention efforts are not sufficiently robust or a primary focus.

Other gap areas arise due to their lack of alignment with adjacent regions. Bennington County's Arlington, VT, situated between two well-resourced areas for substance misuse prevention, poses a unique challenge as it doesn't easily fit into either area. Effective service here necessitates individualized programs and targeted outreach.

Even a sizable town in PL4, Springfield, is designated as a gap area. While abundant resources are available, none are specifically tailored to substance misuse prevention, hindering coordinated activities and community outreach.

Demographic Gap Populations:

The senior citizen population across PL4 has received limited outreach focused on substance misuse prevention.

Young adults in our region, known for being challenging to reach, are identified as a demographic gap population in need of targeted efforts.

Disparate Populations

Vermont is changing, with younger generations displaying increasingly greater demographic diversity. Effective prevention requires understanding our evolving population and designing messages and services that account for our diverse experiences as Vermonters.

Based on 2023 YRBS data, there is a great representation of BIPOC within middle and high school populations versus overall county data. Additionally, LGBTQIA+ populations are increasing for middle, high school and young adults. This shows the possibility of a growing more diverse population. Nearly a quarter of the region's population is 65+.

See Key in Resources section for explanation of terms and acronyms.

School Aged Youth

Effective substance misuse prevention in Vermont starts with our youngest residents. This is rooted in an understanding of the economic and social challenges faced by young people and families across Vermont's PL4, from poverty rates to school readiness statistics.



As of 2020, a high percentage of youth under 12 were living in poverty, ranging from **29.5%** in Northern Windsor and Orange Counties, to **34.9%** in Bennington, **38.8%** in Springfield, and **41.9%** in southeast Vermont. Southeast Vermont and Bennington have two to three times as many young people in out-of-home custody as other parts of the region, putting them at much greater risk for future overdose fatality.

Data from SBAC (Smarter Balanced Assessment Consortium) testing demonstrates that approximately **only 50% of Vermont third-grade students met proficiency in English Language Arts**. Nearly all of PL4 Supervisory Unions are at or below 50%. Reading well at an early age is essential to later success in education, employment, and life.



Across all of PL4 region 4, approximately 30% of young people live in poverty. However, the rate is highest in the southeast region of the state, where more than 40% of young people live in poverty.

Third grade reading proficiency varies greatly throughout the region with the Two Rivers Supervisory Union in Windsor County being particularly notable for lack of kindergarten readiness. The Two Rivers Supervisory Union is the lowest in the state for reading proficiency, marking this as a school system and geography to focus on. Southwest Vermont is also lower in reading proficiency than others. The Bright Futures report also states that for "historically marginalized" students, 27% are proficient or above in both reading and math, while the rates for "historically advantaged" students are 59% and 57% respectively. According the the Obama Foundation, students who are not reading at proficient levels by the end of third grade are more likely to struggle throughout their school years, which in turn leads to higher dropout rates and fewer students being college and career-ready.

♠ Middle and High School Youth

As young people move into their middle school and high school years, the pressures and risk factors associated with substance use increase as their lives and relationships become more complex. It is during this time of life that decisions are made that can lead to long-term positive or negative consequences, so it is where many prevention efforts are focused. Through data review and engagement, we seek to understand what young people are experiencing, in order to bolster effective protective factors.



The <u>2023 Vermont Youth Risk Behavior Survey</u> (YRBS) is the source of many of the following statistics.

Middle School and High School Population									
	Windsor County		Orange County		Bennington County		Windham County		
School	Middle	High	Middle	High	Middle	High	Middle	High	
Total Students	1208	1658	621	822	514	993	705	1060	
White, non-hispanic	82%	82%	88%	87%	86%	82%	85%	82%	
Students of color	18%	18%	12%	13%	14%	18%	15%	18%	

Data Source: 2023 County YRBS Reports

Population Bre	akdowns by LO	BTQ+		
	Total Population	LGBTQ+ Middle School	LGBTQ+ High School	LGBTQ+ Young Adults
Windsor	57,753	29%	30%	33.1%
Orange	29,277	25%	31%	33.2%
Bennington	37,347	28%	27%	57.2%
Windham	45,905	25%	31%	42%

Data Sources: 2020
Decennial Census,
2023 County YRBS
reports, 2022 Vermont
Young Adult Survey,
healthvermont.gov

See the Resources section for a Prevention Coverage Map

(Prevalence Estimates prepared by Pacific Institute for Research and Evaluation)

PIRE notes that these data represent only the young adults who participated in the Young Adult Survey and may not reflect a precise estimate of the percent of county residents who are LGBTQ+. 2021 BRFSS data estimates 10% of the Vermont adult population identifies as LGB, and 1% identifies as transgender. No data breakdown for LGBTQ+ adults by county or OLH is available on VDH site.

Poverty

7 schools in PL4 qualify as High-Poverty (75%+ FRPL-eligible)

15 schools in PL4 qualify as Mid- to High-Poverty (50.1% - 75% FRPL-eligible)

Towns with Highest Percent below Poverty (15% and above)

Listed in order from lowest to highest poverty rate:

Town	County	Population	Under 18
Woodford	Bennington	274	47
Corinth	Orange	1525	252
Bennington	Bennington	14,044	2572
Westminster	Windham	2917	520
Topsham	Orange	1036	197
Tunbridge	Orange	1324	249
Rockingham	Windham	4850	1051
Putney	Windham	2078	518
Whitingham	Windham	1584	414
Sandgate	Bennington	458	97
Springfield	Windsor	8660	1072
Athens	Windham	472	103
Brattleboro	Windham	11848	2124
Baltimore	Windsor	354	76

Data Source: 2021 ACS 5-year estimates

Out of 97 schools in PL4:

49 have afterschool mentoring programs (EmpowerUp, Girls on the Run, Getting to Y, LEAD, Windsor County Mentors)

29 Schools with grades 6-12 do not have Student Assistance Professionals (SAPs).

Only 15 schools have SAPs including;

White River Valley Middle School
Brattleboro Union High School
Brattleboro Area Middle School
Green Mountain Union High School
Randolph Union High School
Sharon Elementary School
White River Valley High School
Newton School

Riverside Middle School
Thetford Academy
Leland & Gray Union Middle & High School
Hartford High School
Hartford Memorial Middle School
Windsor School
Woodstock Union Middle/High School

To learn more about the importance of SAPs in schools, see page 34.

Unwanted Sexual Contact

In the <u>State of Vermont, per the 2023 YRBS</u> high school data: LGBTQ+ students report unwanted sexual contact at a higher rate of **41**%, whereas Het/Cis students report **17**%. High school populations experiencing significantly higher unwanted sexual contact include:



Female Students



Older Students



BIPOC Students



LGBTQIA+ Students



IEP Students

Bullying

In the State of Vermont, per the 2023 YRBS high school data:



LGBTQ+ students are more likely to experience bullying during the past 30 days compared to heterosexual cisgender students (29% vs 17%).



Female students are more likely to report bullying in the past 30 days compared to male students (25% vs 16%).



BIPOC students (24%) are significantly more likely than white, non-Hispanic students (20%) to report being treated badly or unfairly because of their race, ethnicity, sexual orientation, gender identity, or age.



IEP students (27%) are more likely than non IEP students (19%) to report bullying in the past 30 days.

In one PL4 high school, 24% LGBTQ+ students vs. 17% HetCis students report being electronically bullied.

Substance Use

The 2018-2019 National Survey on Drug Use and Health (NSDUH) ranked Vermont youth alcohol use, youth binge drinking, and cannabis use by teens in the highest percentile group in the nation. Cannabis use is of particular concern in VT, due to the recreational use legislation that took effect in July 2018, and with retail sales beginning in 2022.

In the State of Vermont, per the 2023 YRBS:



One in eight high school students (13%) report binge drinking in the past 30 days. Binge drinking is defined as having four or more drinks of alcohol in a row, within a couple of hours if you are female (14%) and five or more drinks in a row if you are male (13%).



Most students believe people face moderate or great risk of harming themselves if they use electronic vapor products (77%), alcohol (74%), or marijuana (56%).

27% of high school students in Windham County currently use cannabis, which is significantly higher than VT (2023 YRBS). **24%** of high school students in Windham County currently use alcohol (2023 YRBS).

Only **35.1%** of parents report that prevention messaging led them to talk with their child or any youth about the harm or risks of underage, binge drinking, or nicotine use (ALL Together 2022 Upper Valley Region Community Survey).

93% of parents reported the use of cannabis is OK for people under 18 if it doesn't interfere with schoolwork or other responsibilities (ALL Together 2022 Upper Valley Region Community Survey).

Differences between LGBTQIA+/BIPOC and Het/Cis/White reporting								
	LGBTQ+	HetCis	BIPOC	White				
Clear consequences at school and 30-day use	47%	74%						
30-day alcohol	12%	5%						
30-day cannabis	26%	16%	32%	17%				
Perceived risk of cannabis use	14%	22%						

In Bennington County, according to the 2023 YRBS high school data:

In the State of Vermont | 2023 YRBS high school data:



Report it's "very easy" or "sort of easy" to obtain vaping devices & cannabis



Report it's "very easy" or "sort of easy" to obtain alcohol



of students who reported nicotine use also tried to quit in the past year

◆ Parents/Caring Adults

Parents, guardians, teachers, coaches, and mentors have a crucial role to play in shaping the attitudes young people develop and the choices they make about substances. PL4 seeks to understand adults' opinions and behaviors, and to support their ability to guide the young people in their lives toward informed, healthy decisions.



The 2019 Vermont Parent Survey reveals that parental discussions about substance misuse with their children remained steady for alcohol and prescription drugs, while talks about cannabis and vaping devices increased significantly. High school parents were more likely to discuss substance dangers than middle school parents. Confidence in discussing substance use with children remained largely unchanged, with around 70% feeling very confident. However, confidence in recognizing signs of alcohol or drug use dropped from 59% in 2017 to 37% in 2019, possibly linked to rising vaping device use.

Parents perceive moderate to great risk in their child using alcohol, cannabis, and vaping devices (80-90%). Concerns about vaping devices rose from 63% to 73% between 2017 and 2019. Among parents aware of their child's substance use, more concern was expressed for nicotine and vaping devices than alcohol and cannabis.

Alcohol remains the most accessible substance at home without parental knowledge (35%), followed by prescription drugs (20%) and cannabis (9%). Although access decreased for alcohol and prescription drugs, changes were modest.

Top parenting concerns for the upcoming year include addressing **child stress (62%)**, **connecting with positive influences (43%)**, **and monitoring online activity (40%)**—fewer parents (16%) plan to seek information on preventing substance use.

The internet is the preferred source for parenting information (60% through specific websites, 33% via online searches). In 2019, slightly fewer parents agreed that community resources were available for preventing substance use (65%) and assisting with substance issues (64%), compared to 2017 (71% and 73% respectively).

In the 2023 Brattleboro health district survey, 43% of parents believe it's somewhat or very likely that their child could access alcohol at home without their knowledge. However, a significant majority (77%) never permit their child to consume alcohol at home, with 14% allowing it rarely and 6% occasionally.

Regarding cannabis, 12% of parents in their own homes think it's somewhat likely for their child to access cannabis without their knowledge. Only 6% permit their child to use cannabis at home, while the vast majority (91%) never allow such use.

See Resources section for the 2019 VT Parent Survey.

Bennington Health District

In the 2019 Bennington County Parent Survey, 29.1% of parents reported it was likely or very likely that their youth could access alcohol in the home without their knowledge. 45.5% of parents reported they were not very or somewhat confident they could identify underage alcohol use in their youth. 22.8% of parents reported they know where they can learn more about how to help prevent their child from using alcohol and drugs.

According to Bennington County Community Survey, 10% of parents report they believe it is acceptable to offer alcohol to underage youth in their home. 76.7% of parents disagreed or strongly disagreed with this statement and the remaining percentage did not have an opinion.

5.5% of parents report they believe it is acceptable to offer cannabis to underage youth as long as they are in their home. 85.5% disagree or strongly disagree with this statement.

See Resources section for Bennington County 2019 Parent Survey, and 2022 Community Survey. Visit Bennington County Regional Prevention Partnership: Listen. Talk. Connect. for more details.



"Parents need an outlet and support system. If they do have children who have been around substances they need a supportive group. It feels like all ears and eyes are listening in a small community. It can be helpful for parents to have something for support."

- Northshire Parent

Seniors

Vermont is a state with a high percentage of seniors (age 65+) relative to the overall population (prb.org/resources/which-us-states-are-the-oldest/), and also a high percentage of seniors who report at-risk drinking behavior. Seniors in PL4 would benefit from more education, more outreach, and additional support services to address substance misuse.



65 and older at-risk drinking:

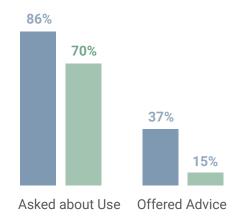


65 and older chronic drinking:

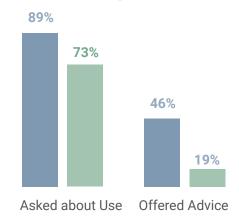


BRFSS 2021 Data Brief (<u>healthvermont.gov</u>). See Resources section for link to full report.

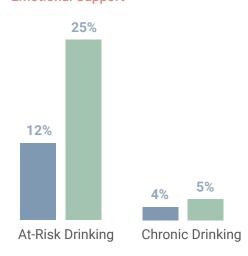
Older Adults Screened for Alcohol Use who Report and Do Not Report At-Risk Drinking



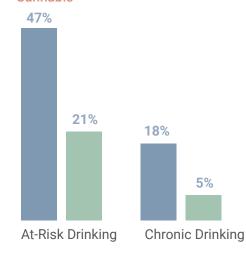
Older Adults Screened for Alcohol Use who Report and Do Not Report Chronic Drinking



Alcohol Use among Adults 65 and Older who Lack and Do Not Lack Emotional Support



Alcohol Use among Adults 65 and Older who Use and Do Not Use Cannabis





Charles Gurney, the Substance Use and Aging Specialist for the Department of Disabilities, Aging and Independent Living, State Unit on Aging, and the Vermont Department of Health, Alcohol and Drug Use Programs, reported that there are no regional data available on older adults as there were no significant differences between any of the counties in the state. He stated that the statewide data could be used as representative of local data.

About a quarter of Vermont seniors report at risk drinking (24%), which is significantly higher than U.S. adults of the same age (18%). At-risk drinking among seniors is defined as three or more drinks on an occasion for men and two or more for women.

Six percent of Vermont seniors report chronic drinking, which is significantly higher than U.S. adults of the same age (4%). Chronic drinking is defined as an average of more than two drinks per day for men and more than one drink for women.

Older adults who visited the doctor in the last two years are significantly less likely than younger adults to be asked about their alcohol use and offered advice about what level of drinking is harmful.

Older adults who rarely or never get the emotional support they need are significantly less likely to report at risk drinking and as likely to report chronic drinking, compared to adults who get emotional support at least some of the time.

◆ High School Mental Health

Mental health status is closely linked to substance misuse; young people who are struggling with mental or behavioral issues are at greater risk of turning to substances. Mental health needs are increasing for young people across PL4—particularly female and LBGTQ+ students—requiring a greater investment of time and energy into bolstering protective factors.



The <u>2023 Vermont Youth</u> <u>Risk Behavior Survey</u> (YRBS) is the source of many of the following statistics.

Reported that
their mental
health was most
of the time or
always not good

County	F	M	BIPOC	LGBTQ+	HetCis
Windsor	44	21	31	53	23
Windham	47	25	36	57	27
Bennington	53	20	41	57	28
Orange	48	21	37	56	26

Have been bothered by feeling nervous, anxious, or on edge most of the time or always

Windsor	51	22	36	62	26
Windham	55	25	40	63	31
Bennington	55	20	41	61	29
Orange	53	21	40	59	27

Felt sad or hopeless

Windsor	39	20	29	48	22
Windham	42	23	38	53	24
Bennington	46	21	44	57	25
Orange	38	20	41	53	20

In the State of Vermont, per the 2023 <u>YRBS</u> <u>high school data</u>:



One in four students reported hurting themselves in the last year



One in seven students made a suicide plan in the last 12 months

<u>2023 YRBS data</u> indicates that the incidence of students mostly or always experiencing poor mental health statistically did not change between the 2021 and 2023 YRBS reports. The percent of high school students who reported their mental health was not good, most of the time or always, over the past 30 days includes: **54% of LGBTQ+** students and **26% of heterosexual cisgender** students, and **47% of females versus 21% of males**. A third of students reported that their mental health was not good at least most of the time in the past 30 days, while **one in five** reported that they rarely or never experienced poor mental health. Notably, female, LGBTQ+, and IEP students are significantly more likely to report poor mental health at least most of the time within the past month. Race and ethnicity do not show marked differences in this measure.



Over 70% of adults said they knew of a youth struggling with mental health in the past 2 weeks.

-ALL Together 2022 Upper Valley Region Community Survey Statewide, LGBTQ+ high school students are four times more likely to report self-harm, make a plan to kill themselves, and attempt to kill themselves within the past year compared to heterosexual cisgender students.

Female high school students are two times more likely than male students to report self-harm, make a plan to kill themselves, and attempt to kill themselves within the past year.

While many middle school students report the presence of protective factors, Female, BIPOC and LGBTQ+ students tend to experience protective factors at lower rates than their peers.

Additionally, 47% of LGBTQ+ and 37% of HetCis high school students in Windham County did not go to school because they felt unsafe at school or on their way to or from school, compared to 9% statewide.

65% of LGBTQ+ and 31% of Het/Cis high school students have been bothered by feeling nervous, anxious, or on edge most of the time or always.



The 2023 YRBS data from the four counties underscores the ever-increasing mental health needs of high school students. While no category has satisfactory outcomes, notably, female and LGBTQ+ respondents appear to face more substantial challenges.

This data is supported by mental health clinicians in these counties who cite an increase in referrals to outside counseling. One school in Bennington County has noted an increase of 30% of females coming to the health offices during the school day with unspecified mental health needs.

The vast differences in LGBTQ+ and HetCis students' mental health are noted. Outright Vermont reports that schools with GSA/GLO groups show better outcomes for all students.

While BIPOC and White/nonHispanic students' measures are similar in most topics and across counties, BIPOC high school students reporting feeling sad and hopeless is 10 points higher in Orange and Windham Counties. These counties experience no real differences in BIPOC demographics for this age group.

This data highlights the urgent and widespread mental health needs of high school students. The fact that female and LGBTQ+ respondents appear to be disproportionately affected emphasizes the importance of targeted support and resources for these groups. These findings underscore the crucial need for comprehensive mental health programs, counseling services, and community initiatives to address the mental well-being of high school students and ensure that they receive the support they require to thrive.



"Through our GSA I have learned to voice my feelings when I am sad, angry, or fearful about something. I turn to someone I trust and let them know what is going on in my life. I ask for help if I need it."

Bennington County
 High School student



Organizational Resources

The following organizations address the needs identified in this document and can serve as resources in prevention efforts. Below is an overview of these organizations with an example of each.

See Key in <u>Resources</u> section for explanation of terms and acronyms.

◆ Community Health Teams

Community Health Teams (CHT) are groups of specialized caregivers within medical practices who work to improve population health through screening for social determinants of health and supporting patients to help manage Chronic Health Conditions. CHTs can include Chronic Care Nurses, Social Workers, Mental Health Workers, Community Health Workers, etc. Their work results in an improved quality of care, increased ease of access to care, and effective reduction in the cost of healthcare.



Vermont's Blueprint for Health is advancing Healthcare Reform across the state. It integrates a system of health care for patients, improving the health of the overall population, and improving control over health care costs by promoting health maintenance, prevention, and care coordination and management. One of several components of the Blueprint are Community Health Teams (CHT) embedded in Primary Care Practices that have received a Patient Centered Medical Home designation.

Most referrals to CHT are made by providers in the practices. However, they are often connected to referral network partners such as Hub & Spoke Opioid Treatment and Recovery Centers, as well as Mental Health Agencies, and Community Health Organizations providing for basic needs such as food shelves, community action groups, Family Services, and Economic Services.

Community-based organizations looking to build closer working relationships with their local Community Health Team can contact the area Project Manager or Community Health Team lead.

◆ Drop-in Youth Centers

Drop-in youth centers provide safe, diverse, supervised, substance-free environments when school is not in session. These teen-driven organizations aim to build community, develop leadership, and empower and strengthen young people.



The Space

Founded in 2019 in Springfield, The Space aims to provide an alternative to traditional after-school activities by giving teens a place of their own to socialize, study, share skills, and explore interests. The organization provides youth-directed after-school activities including skill-sharing, creative arts projects, videography, and music. Planned events include dinner and movie nights, book discussions, a cooking series for youth and their families, and a "jobs 101" workshop to help teens explore career opportunities.



Vermont National Guard Family Programs: Child and Youth Program

The Vermont National Guard Child and Youth Program provides a supportive environment for children and youth (6 to 17 years old) through activities and events. The program, which includes a teen council, hosts summer camps for military children and provides school outreach to help teachers and administrators recognize the needs of military children. Activities are specifically designed to encourage personal growth, strength of character and moral development in peacetime and through the cycles of deployment.

♠ Military Support Organizations

PL4 has eight organizations that specialize in working with military families. The organizations' experts include licensed mental health counselors, a Veterans Administration (VA) nurse, a military child and youth coordinator, and a coordinator for veteran behavioral health services. These organizations serve as a bridge between military families and prevention efforts; the affiliated experts can provide information and insights into the issues military families face and provide direct support and services, such as mental health counseling for PTSD and co-occurring addiction, and spring break camps for military children.

◆ Parent Child Centers

Vermont has 15 parent-child centers that help families get off to a healthy start by providing early childhood services, home visits to families with young people, playgroups, parent education, parent support, and information and referral.



The Family Place

The Family Place in Norwich uses a wholefamily approach to help young people thrive. The organization works with youth and caregivers, promoting positive parenting strategies and ensuring that young people have the kinds of experiences that support their physical development, their social functioning, their ability to learn, and their long-term health. Through home visits, early intervention for infants and toddlers with developmental delays, nursing services, parenting classes and groups, treatment for families dealing with the trauma of sexual abuse, assistance with childcare costs, intensive wraparound supports for young families in poverty, community playgroups, and more, The Family Place partners with families to increase the presence of protective factors families need to be strong and thrive.



The Haven

The Haven in White River Junction provides temporary shelter and educational programming for unhoused families and adults as well as food to anyone in need. It is open 365 days per year and serves over 14,500 people per year.

◆ Organizations Addressing Food Insecurity and Homelessness

Social service organizations that address homelessness and food insecurity provide a variety of services including temporary shelter for homeless families and adults, educational programming, food, and clothing.

◆ Gender & Sexuality Alliances

Gender & Sexuality Alliances (GSAs) are school-based student groups for LGBTQ+ and allied youth to build community and organize around issues that impact their daily lives. GSAs are a springboard for young LGBTQ+ leaders and help to make schools safer for students, by helping prevent the negative impact of biased language, bullying, and harassment.

- ☐ LGBTQ+ students who belong to GSAs are less likely to miss days of school because they are afraid to go.
- GSA's increase social connections, advocate for more inclusive school policies and environments, are sites for emotional support, and more.

According to the Outright VT blog, "GSAs promote connection, leadership, and tangible opportunities to transform school climates. ...GSAs are evidence-based and have a proven track record of success. In fact, GSAs benefit all students who are experiencing bullying based on their identities, not just LGBTQ+ kids. Research shows that in schools with GSAs, students' reports of all forms of bias-based bullying were lower, reducing adverse health outcomes like stress, sleep problems, and depression."

Read the GSA Study Report at glsen.org/gsa-study



GLOW at Mount Anthony Union Middle School

GLOW (Gay, Lesbian, Or Whatever!), the Gender & Sexuality Alliance at Mt. Anthony Union Middle School, provides an affirming, safe space for LGBTQ+ and Allied youth in grades 6-8. Co-facilitated by prevention organization ACT Bennington, the club of 15-20 students meet weekly where they make art and play games, socialize, and build relationships with peers and adult facilitators. GLOWers also participate in Outright Vermont's statewide Leadership Day and help to plan Pride events at school.

Restorative Programs

Vermont is a national leader in the development and implementation of community-based restorative practices and restorative justice.

Hartford Community Justice Center defines Restorative Justice as "a victim-centered, community-based approach for responding to crime. It focuses on the harm that was caused and what needs to happen to make things better. The goal is to build understanding, encourage accountability, and provide an opportunity for healing."

Community Restorative Justice Centers are located throughout PL4 and offer a variety of programs. See Resources for the full list.

Restorative Practice

is a framework rooted in relationship building and rebuilding, designed to create a culture of equity and belonging that rethinks how we view conflict and results in healing and learning. Restorative Practices are mostly used in schools and afterschool programs and activities.

Schools Implementing Restorative Practice School Name	es in PL4:
Twin Valley Union Middle/High School	Unknown
Brattleboro Union Middle/High School	Over 20 yrs
Bellows Falls Elementary, Middle, and High School	Over 3 yrs
Mount Holly Elementary School	4 yrs
Randolph Union High School	7 yrs
Proctor Junior/Senior High School	Over 2 yrs
Springfield Middle School and High School	Over 3 yrs
Green Mountain Union Middle/High School	2 yrs
Woodstock Middle/High School	Unknown
Putney Private School	Over 5 yrs



In 2021, the Brattleboro Community Justice Center (BCJC) merged with Brattleboro's Youth Services Restorative Justice programs. Youth Services announced a new restorative practices program, Circle Up, to provide community conflict support through circle facilitation and training in restorative practices, which began in September 2023.



While Restorative Practices are frequently used in schools throughout PL4 there is a variety of experience, consistency, and method. Additionally, schools tend to not have policies in place around restorative practices relying more heavily on processes that may or may not be used with consistency.

According to a 2021 article from Granite State News Collaborative, Vermont is the only state in the nation with a community justice center in every county. However, while alternative justice is written into statute, Vermont is still missing some major data points. The state does not track data from the CJCs — and many CJCs do not track their own recidivism rates — making it difficult to compare the effectiveness of alternative sentencing options.

Schools

For young people, schools are centers of learning, opportunity, risk, and resources. Because of the role they play in young people's lives, schools are especially important to prevention efforts. Many schools across PL4 offer protective factors from trusted teachers to Student Assistance Professionals (SAPs) who provide direct intervention services, especially for older students.



2023 Youth Risk Behavior Sur	vey High Scho	ol Data						
	County	F	M	ALL	VT	BIPOC	LGBTQ+	HetCis
Were threatened or injured with a weapon on school property	Windsor	7	8	8	9	13	9	7
	Windham	10	12	11	9	16	14	9
	Bennington	11	8	9	9	11	13	7
	Orange	12	7	9	9	19	13	8
Did not go to school because they felt unsafe at school or on their way to or from school	Windsor	13	7	10	10	15	14	8
	Windham	18	7	13	10	16	22	9
	Bennington	13	6	9	10	15	15	7
	Orange	15	6	10	10	17	16	8
Attended school under the influence of alcohol or other illegal drugs	Windsor	12	12	12	12	18	15	11
	Windham	19	15	17	12	19	25	14
	Bennington	15	12	13	12	16	18	11
	Orange	13	10	11	12	18	20	8
Reported there is at least one teacher or other adult in their school that they can talk to if they have a problem	Windsor	72	70	71	69	65	67	73
	Windham	75	70	72	69	66	73	73
	Bennington	65	66	66	69	63	59	69
	Orange	73	67	70	69	66	73	69
Strongly agree or agree that	Windsor	42	56	49	48	48	37	54
their school has clear rules and consequences for behavior	Windham	33	54	43	48	47	35	47
	Bennington	48	57	53	48	54	47	55
	Orange	35	54	45	48	45	35	49

Student Assistant Professionals in PL4 Region:



There are 7 combined middle high schools in the PL4 Region.
4 currently have an SAP.



There are 12 combined elementary middle schools. Only 1 currently has an SAP.



There are 8 stand-alone high schools. Only 4 currently have an SAP.



There are 8 stand-alone middle schools. Only 3 currently have an SAP.



There are 6
Technical
High Schools
(grades 11-12).
None have an SAP.

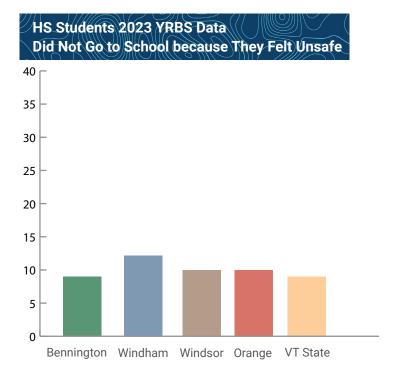


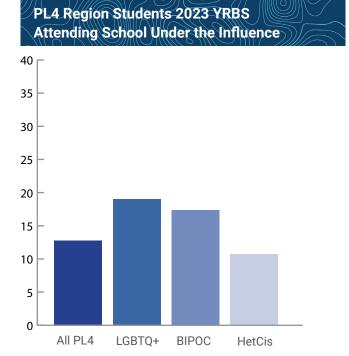
Student Assistance Professionals (SAPs) play a vital role in enhancing the school environment by integrating trained personnel who provide direct intervention services to students and support school faculty. Originally designed to address issues related to alcohol or substance use disorders, SAPs, modeled after components of employee assistance programs, have proven effective when aligned with best practices and research.

Implementing SAPs following best practices yields positive outcomes valued by both families and schools. These outcomes include improved student behavior, increased school attendance, enhanced assignment completion, higher grades and academic achievement, elevated rates of school graduation, and improved self-efficacy, self-control, and social competence. Despite their proven benefits, there is a pressing need for additional SAPs in PL4 Region schools, a need consistently emphasized in state meetings and discussions with legislators. Current job openings with available funding for SAPs often remain unfilled, underscoring the urgency for workforce development in this crucial area.

Analyzing Youth Risk Behavior Survey (2023 YRBS) data for Bennington and Windham counties reveals a critical need to address school culture, particularly in instances where students feel unsafe or face threats or injuries with weapons on school property. While Windham County high schools like Twin Valley, Bellows Falls, and Leland & Gray fall below state averages, alarming numbers for WSESU (Brattleboro Union HS) students who feel unsafe or have been threatened warrant attention. Notably, higher levels of insecurity are observed among BIPOC and LGBTQ+ youth. The data also points to higher rates of alcohol or drug use among LGBTQ+ and BIPOC students compared to HetCis students, underscoring the need for targeted support for this population.

However, differences emerge among BIPOC and LGBTQ+ students, emphasizing the importance of tailoring support strategies to address the unique needs of these communities.







"Hiring an SAP at the Twin Valley Middle High School has been a challenge. Funding is available and the position has been advertised but we have not received a single applicant."

-Cindy Hayford, Deerfield Valley Community Partnership Director.

Communication & Marketing Messages

Prevention efforts are more effective when the right message reaches the right audiences in a way that genuinely gets through, causing people to think through their decisions and make healthy choices. Therefore, targeting effective messaging for populations of focus is a primary activity for PL4.

BY THE NUMBERS:

Communication and marketing play a crucial role as both risk and protective factors in influencing substance use among young people. The National Institutes of Health highlight the consistent evidence that exposes youth to substance use portrayals in various media, a phenomenon associated with subsequent substance misuse. This exposure is especially concerning in the era of social media, with an alarming rise in substance-related content on various platforms.

A study by the **Truth Initiative** emphasizes the direct correlation between high exposure to nicotine imagery in popular streaming and TV shows and the increased likelihood of youth and young adults starting to use vaping devices. The findings reveal that **64% of binge-watched shows among youth featured nicotine depictions**, with Netflix being a significant contributor. The top Billboard songs in 2020 also contributed to this influence, with **23% featuring smoking and/or vaping in their music videos** and accumulating over **6 billion views on YouTube** alone.

In this context, communication and marketing become a risk factor, exposing young minds to substance-related content that can contribute to the initiation of harmful behaviors.

On the flip side, effective communication and marketing strategies can act as protective factors by **promoting** substance-free lifestyles, raising awareness about the negative consequences of substance use, and encouraging positive behavioral choices. Education campaigns and responsible marketing practices can counterbalance negative impacts, providing a powerful tool for prevention efforts and creating a protective environment for youth and young adults.



PL4 prevention organizations offer a wide array of accessible educational resources for youth, caring adults, and educators and disseminate information through a variety of media channels which include business, school, and healthcare sectors. Coordination with Prevention Works VT, the Division of Substance Use Programs, and the Vermont Department of Health helps inform and unify prevention messaging practices.



SPOTLIGHT

Middle and high school students in Bennington County who were interviewed cited lower perceptions of harm for cannabis use in part due to parental and peer norms and view it as a "safer" drug over others. Additionally, many students do not understand the difference between CBD and high THC products.

Bennington Health District

The Collaborative

YA Campaign for young adults

RTU for youth & caring adults

<u>Vaping Resource Portal</u> for youth, caring adults, and educators (RPP)

Facebook

Bi-Monthly prevention "ads" in the Bennington Banner

Monthly email newsletter

MAP Project

Bennington County Regional Prevention

Partnership: Listen. Talk. Connect.

ACT Bennington

Facebook & Instagram

Bennington Youth Thrive Calendar

Bi-Monthly prevention "ads" in the Bennington Banner

Monthly email newsletter

Sunshine Box Project for middle school youth

Take Care Project for youth and families

Youth Vape Campaign

Youth-led Community Dialogue Night

Springfield and White River Junction Health Districts

Green Peak Alliance

Facebook & Instagram

School Newsletter (for educators and caring adults)

Youth Resources

Campaign Toolkits

We Are Worthwhile campaign &

Stigma-Free Language campaign

Cannabis Safety

E-checkup

Asset Development

Windham Health District

Windham County Prevention Partnership

Deerfield Valley Community Partnership

West River Valley Thrives

Building a Positive Community

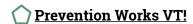
WCPP Family Handbook

Parent Resources

Active Parenting: LGBTQ+ youth

Substance over Substances

Statewide



🕜 <u>Vermont Department of Health</u>

Let's Talk Cannabis

Parent Up

802 Ouits









PL4 Catalog of Communications

Summary and Improvement Plans



Summary of Needs / Quality Improvement Plans

In addressing the challenges within our region, a comprehensive approach to quality improvement is imperative. Areas requiring attention and strategic intervention include:

Enhance Support for Schools by:

- Expanding and strengthening GSA/GLO programs in terms of both numbers and outreach.
- Boosting and expanding the presence of SAPs (Student Assistance Professionals) within schools.
- Facilitating the establishment and growth of student empowerment groups.
- Improving the implementation of restorative practices in schools by providing support for policy development, procedural refinement, and ongoing training.
- Providing supports for school age teachers, families and students.
- Increasing understanding of and resources for the connection of substance misuse and mental health.
- Including colleges and tech centers in outreach and capacity building.

Create Connections by:

- Building awareness of aligned organizations engaged in prevention efforts, fostering collaboration and support among them.
- Engaging with BIPOC and LGBTQIA+ agencies to assess needs and capacity for mental health and substance misuse work.
- Strengthening the capacity of current prevention organizations and aligned entities to effectively carry out prevention initiatives.
- Fostering increased collaborations with other teams and organizations actively involved in prevention efforts or the continuum of care.
- Assessing and addressing the dynamics of isolation and connection within the region.
- Ensuring the continuity of existing district prevention working groups to sustain ongoing prevention initiatives.

Support and Fund Projects that:

- Enhance mental health initiatives.
- Increase health equity through targeted interventions.
- Expand prevention efforts to cover gap areas.
- Establish and sustain safe and informative spaces for diverse groups, including but not limited to BIPOC, LGBTQIA+, and the 65+ community.
- Address risk and protective factors across the age span.
- Amplify the voices of youth and disparate populations, providing a platform to express challenges.
- Create spaces for disseminating prevention resources and education.
- Strategically address issues related to isolation and connection within the community.

Conduct assessments and formulate strategic plans to:

- Comprehend the needs of parents and available resources.
- Address prevention in gap areas and gap demographics.

Evaluate the project by:

- Identifying and addressing gaps in service delivery across different regions and demographics.
- Implementing a collective impact approach for more effective and sustainable solutions.
- Incorporating results-based accountability measures to track impact, ensuring a clear understanding of whether individuals are genuinely better off.

Enhance communication efforts by:

- Expanding cannabis education initiatives.
- Tailoring communication strategies specifically for seniors.
- Crafting targeted communication for different audiences to ensure relevance and effectiveness.
- Highlighting opportunities to reduce isolation and build connection within the community.
- Strengthening communication networks among peers working in prevention throughout the region to facilitate collaboration and knowledge-sharing.

Ensure ongoing professional development by:

- Requiring funded partners be connected to Prevention Works!
- Sharing all VDH/DSU training opportunities with PL4 partners, across all levels of organization chart.
- Promoting CPS certification.



M-Male

F-Female

Older students -11th and 12th grades

Younger students-9th and 10th grades

WnH-White and non-Hispanic

BIPOC--American Indian/Alaska Native, Asian, Black or African American, Native Hawaiian/Other Pacific Islander, or Hispanic /Latino

HetCis-Heterosexual and cisgender

LGBTQ+-Transgender, lesbian, gay, bisexual, other sexual orientation, and questioning or unsure if they are transgender

See Social Determinants of Health/Spotlight, pg 6

Prevention Coverage Map See Middle & High School Youth/By The Numbers, pg 15

2019 Vermont Parent Survey on Youth Substance Use See Parents/Caring Adults Observations, pg 19

Bennington County Community Survey (2022) See Parents/Caring Adults Bennington Health District, pg 20

2021 Behavioral Risk Factor Surveillance Data Brief See Seniors/By the Numbers, pg 21

2023 Vermont Youth Risk Behavior Survey High School Mental Health/By the Numbers, pg 23

Vermont Community Justice Centers, including four in PL4 See Restorative Programs, pg 31