

HEALTH BEHAVIORS



Health behaviors are health-related practices that can impact – for better or worse – the health of community members. They also can be behaviors that lower or raise the risk of developing certain conditions or outcomes. Health behaviors are impacted by the physical environment and are often determined by the choices available in the places where people live, learn, work and play, such as food security and housing.

TOPIC OVERVIEW

Not everyone has the money, access and privilege needed to make healthy choices.¹ Shifting the lens from individual responsibility to the responsibility of societal organizations and the many institutions, structures, inequalities, and ideologies that influence and often determine health behavior in individuals has proved a valuable framework for promoting positive health behaviors and the prevention of adverse outcomes from negative health behaviors.²

While crime and violence can affect anyone, some groups are more likely to be exposed, directly or indirectly. For example, low-income neighborhoods are more likely to be affected by crime than high-income neighborhoods. This exposure can lead to detrimental health effects, which can occur at any age. Because of this, crime often contributes to and widens health inequities seen in our society.

***Note:** There are many interrelated behaviors that affect health and wellbeing that could be included in this chapter. Instead, health behaviors related to a specific topic will be discussed in the chapter directly related to that topic. This chapter focuses on substance use and behaviors related to safety.*

Trends for violence and substance use worsened during the COVID-19 pandemic. According to the CDC, by June 2020, 13% of Americans reported increasing or starting substance use as a way of coping with stress. During the first few months of 2020, there was an 18% increase nationwide in opioid overdoses compared to the same months in 2019. This trend continued through 2020 with more than 40 states, including Washington, reporting increased opioid deaths.

Similarly, violent crime was up about 4.7% in the U.S. in 2020 compared to 2019. It then fell by about 3% in 2021. Property crime steadily decreased from 2012 to 2021. Despite the overall decrease in 2021 in violent crime, the homicide rate rose in 2020 and 2021.

KEY FINDINGS

The following priority areas were identified from available public health data; these were selected based on changes over time for Kitsap residents, differences between Kitsap and Washington, and Kitsap resident input. They include:

Opioids

- Kitsap had an increasing opioid-related death rate from 2018 to 2022. Opioids accounted for more than three in four drug-related deaths in 2022. Non-fatal opioid hospitalizations and emergency room visits did not increase.
- Fentanyl was increasingly reported as the opioid causing visits to the emergency department in 2021 and 2022, overtaking heroin.

Alcohol

- The alcohol-related death rate increased in Kitsap from 2018 to 2021. Very little investigation into the effects of the COVID-19 pandemic or other contributing factors to this increasing death rate has been conducted.
- In Kitsap Community Resource's 2022 survey, alcohol was the most widely used substance in a given week. One in three (33%) reported weekly use.

Firearms

- The percentage of households that have a gun in or around their house in 2020 was higher in Kitsap (42%) than in the state (32%). More than one in 15 Kitsap residents (6.5%) had a loaded and unlocked firearm in or around their house.

E-cigarettes

- Trends in e-cigarette use among public high school students are unchanged over time; higher percentages of students reported vaping compared to smoking cigarettes in 2021. Anecdotally, e-cigarette use in school has been expressed as a concern of parents, teachers, and staff in our school districts.

Crime

- In general, crime appears to be decreasing in Kitsap. However, more serious offenses, such as the category of Group A crime, increased in 2022 in every jurisdiction in the county after years of decreasing rates. Group A crime includes 49 offenses grouped into 23 crime categories, such as murder, robbery, and arson.
- Domestic violence, child abuse and neglect referrals, sexual assault crimes, and homicides increased in 2021.



KEY DISPARITIES

While the findings from this report provide evidence of disparities in Kitsap County across multiple indicators, the following were identified as the most significant and are not a complete list of all disparities:

Sex and gender

- **Male and female**
 - Compared to females, males had a higher death rate due to alcohol from 2012 to 2021, a higher opioid overdose non-fatal emergency department visit rate in 2022, and a higher death rate due to firearms (including self-inflicted) from 2017 to 2019.
 - Among Kitsap youth, female 10th and 12th grade students reported higher percentages drinking alcohol, binge drinking, and vaping than males in 2021
- **Sexual orientation and gender identity**
 - In 2021, higher percentages of 10th and 12th grade students reported smoking cigarettes and vaping among those who reported a sexual orientation of gay, lesbian, bisexual or something other than heterosexual and among those who identified with a gender other than male or female.
 - In 2021, higher percentages of 10th and 12th grade students reported using marijuana among those who reported a sexual orientation of gay, lesbian, bisexual or something other than heterosexual.

Geography

- Bainbridge and North Kitsap 10th and 12th grade students reported higher percentages drinking alcohol and using marijuana in 2021, while Bremerton students reported the lowest alcohol use and Bremerton and South Kitsap students reported the lowest marijuana use. Bainbridge students also reported the highest percentages binge drinking, while South Kitsap reported the lowest.
- Bremerton had the highest rate of accepted referrals for child abuse and neglect, while Bainbridge had the lowest rate in 2021.
- Bremerton and South Kitsap adults reported the highest percentages of adults currently smoking from 2011 to 2021, while Bainbridge Island and North Kitsap reported the lowest percentages.

Educational attainment

- From 2011 to 2021, decreasing percentages of adults reported currently smoking as level of educational attainment increased.

SUBSTANCE USE

Alcohol, drugs, and medications, when not used appropriately or in moderation, can lead to substance use concerns. Substances of concern include tobacco, vape products, marijuana, alcohol, and opioids, among others. Resulting health issues can affect the individual, such as dental problems, cancer, chronic illness, and death, or our community. Concerns for our community include driving under the influence of substances, the ongoing negative consequences of dependency, and the potential long-term influences on youth.

Whether or not dependency and substance use issues develop is influenced by a variety of societal, environmental, and individual risk factors, including income level, peer group, adverse childhood experiences (ACEs), mental and physical health, employment status, genetic predisposition to addiction, exposure before birth, and early use.⁵

Prevention and early intervention are key; however, when prevention isn't effective, our community needs to ensure an adequate system to assist individuals with substance abuse and dependency issues. Substance use disorder (SUD) is a treatable mental disorder that affects a person's brain and behavior, leading to an inability to control their use of substances. Addiction is the most severe form of SUD. People with SUD may also have other mental health disorders, making prevention of common risk factors and co-occurring issues important.⁶

Nationally, while binge drinking has declined for younger adults over the past 10 years, adults 35 to 50 years old reported the highest percentages binge drinking ever reported for this age group.⁷

While there isn't sufficient data to clarify whether this trend also holds true in Kitsap, it is reflective of outcomes affected by the current national, social, economic, political, and physical environmental challenges. In the Kitsap County Community Health and Wellbeing Survey conducted by Kitsap Public Health District in 2021, 16% of respondents said their alcohol drinking and other substance use increased during the COVID-19 pandemic.

In the 2022 community survey conducted by Kitsap Community Resources (KCR), alcohol was the most widely used substance in an average week by respondents. One third of respondents (33%) said they used alcohol.

Nationally, use of marijuana and hallucinogens by adults 35 to 50 years old continued a long-term upward trend to reach all-time highs in 2022. Adults 19 to 30 years old have also had significant increases in the past five years, with marijuana use and vaping at the highest historic levels for this age group.⁸

In the 2022 community survey conducted by KCR, one in ten respondents said they used marijuana (10%) in an average week. Cigarettes were next, with 7% of the respondents, followed by vape products (5%), chewing tobacco (3%), and other drugs (1%).

In the Kitsap County Community Health and Wellbeing Survey conducted by Kitsap Public Health District in 2021, 84 respondents said that they needed mental health and substance use resources but hadn't been able to find them in the community.

Alcohol

The alcohol-related death rate has been increasing in Kitsap from 2018 to 2021, and the trend is statistically significant (Figure 1). In 2021, there were 24 deaths related to alcohol use for every 100,000 residents in Kitsap, after adjusting for age. See the **Methods** chapter for more information about adjusting for age.

This rate was similar to the state’s rate. The rate is higher among males (19 per 100,000) than among females (10 per 100,000). Among races and ethnicities, American Indian and Alaska Native residents had the highest rate (63 per 100,000).

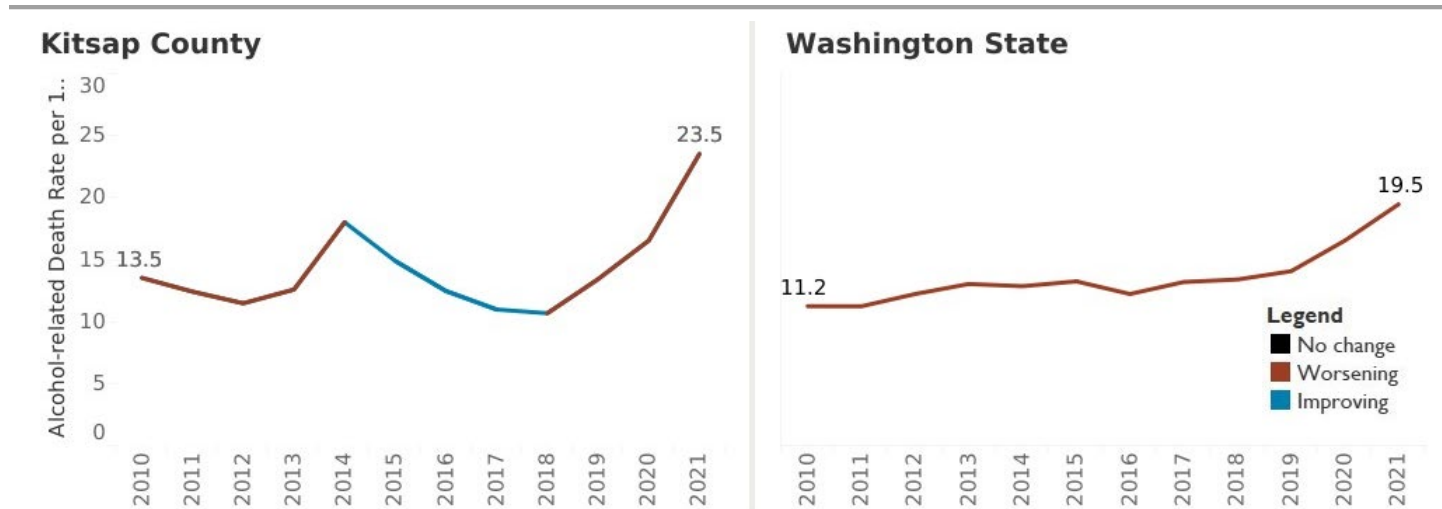


Figure 1. Alcohol-related death rate per 100,000 (age-adjusted)

Data source: Washington State Department of Health, Death Certificate Data

Binge drinking for adults is defined as a man aged 18 or older reporting having five or more alcoholic drinks (by serving size) on one occasion in the past 30 days, or a woman aged 18 or older having four or more alcoholic drinks on one occasion in the past 30 days. This indicator combines data for men and women.

Kitsap has had no increasing or decreasing trend in adults binge drinking over time from 2011 to 2021. Kitsap’s percentage in 2021 (13.9%) was approximately the same as the state’s percentage (15.2%). From 2011 to 2021, a higher percentage of males reported binge drinking (20.6%) compared to females (14.6%). Across the same period, binge drinking decreases as age group increases (Figure 2).



Figure 2. Kitsap adults reporting binge drinking alcohol by age group, 2011-21

Data source: Washington Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

In Kitsap, the percentage of 12th grade students indicating drinking alcohol in the past 30 days had a decreasing trend from 2012 to 2021. This trend was statistically significant. The percentage of 10th grade students reporting drinking alcohol decreased between 2018 (19.1%) and 2021 (7.7%), however the trend was not statistically significant.

Among 10th and 12th graders combined, a statistically significantly higher percentage of female students reported drinking alcohol in the past 30 days (14.2%) compared to male students (10.1%, Figure 3). However, there is no longer a statistically significant difference between males and females when students were allowed to define their gender identity. Bainbridge Island had a statistically significantly higher percentage of youth who drank alcohol in the past 30 days compared to all other geographic areas of Kitsap.

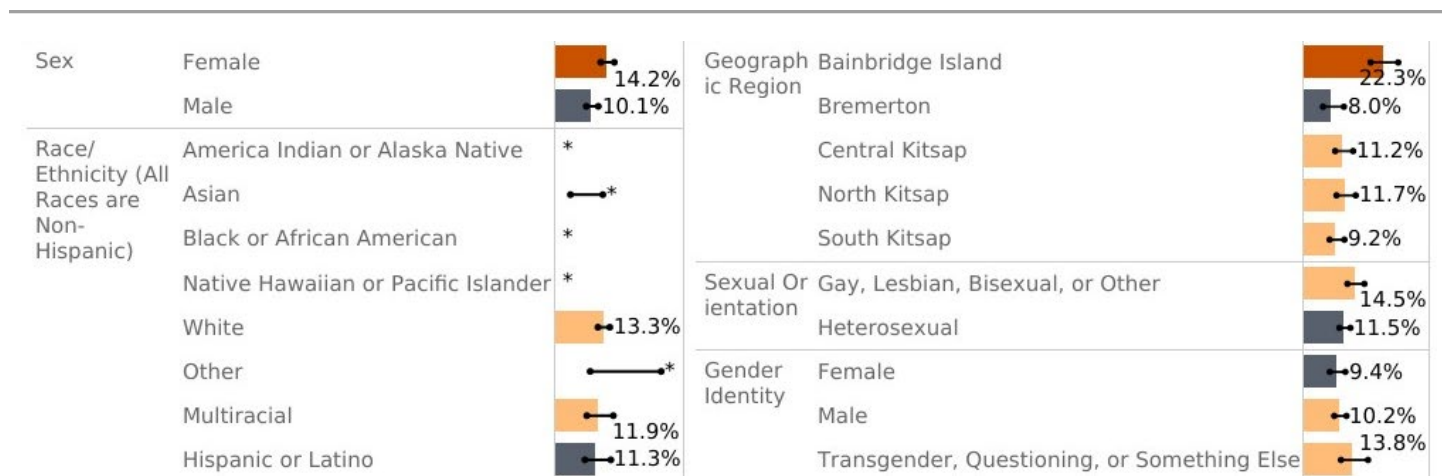


Figure 3. Kitsap 10th and 12th graders drinking alcohol in the past 30 days by subgroup, 2021

Data source: Washington State Healthy Youth Survey (HYS)

Notes: *The estimate has an elevated relative standard error (RSE) greater than 25% and does not meet KPHD reliability standards. Geographic region is based on school district.



Binge drinking for public school students is having five or more alcoholic drinks in a row at some point in the past two weeks. The percentage of students reporting this has a decreasing trend that is statistically significant for 8th graders, 10th graders and 12th graders. However, in 2021, one in twenty (5.2%) 10th graders and one in ten (10.6%) 12th graders reported binge drinking. Among 10th and 12th graders combined, higher percentages reported binge drinking among females (9.5%) compared to males (5.5%).

10th and 12th graders on Bainbridge Island also reported higher percentages binge drinking (14.5%) compared to South Kitsap (5.3%). Students in Central Kitsap had the second highest percentage (7.7%), followed by Bremerton (6.4%) and North Kitsap (5.4%).

Tobacco and vapor products

Regarding vapor and tobacco products, there have been many changes to Washington state law in the past 10 years to protect the health of youth and the general public. In 2016, laws went into effect restricting the sale and distribution of vapor products to people under the age of 18 with requirements for child-resistant packaging and labeling of vapor

products. Starting Jan. 1, 2020, the minimum legal age to buy tobacco and vapor products in Washington was raised to 21 years of age.⁹



Figure 4. Adults reporting currently smoking

Data source: Washington Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

Tobacco — After years of a decreasing trend, more than one in ten adults in Kitsap County (11%) reported currently smoking in 2021 (Figure 4). This percentage was similar to the state’s percentage (11%) and was the lowest percentage seen in Kitsap since at least 2011.

There were differences by age, with young adults aged 25 to 34 having the highest percentage reporting currently smoking (27%, Figure 5). Percentages decreased with each increasing age group after age 25-34; 24% for age 35-44, 21% for age 45-54, 16% for age 55-64, and 10% for age 65 and older. The youngest adults in Kitsap, age 18-24, reported 19% currently smoking.

Across Kitsap, Bremerton residents reported the highest percentage currently smoking (24%), followed by South Kitsap (22%), Central Kitsap (18%), North Kitsap (13%), and Bainbridge Island (12%).

There were also decreasing percentages of residents reporting currently smoking as the level of educational attainment increased. From 2011 to 2021, there were 36% of those who did not graduate high school currently smoking, 23% of those who graduated high school, but had no further education, 20% of those who had some college or technical school, but did not graduate, and 7% of those who graduated college or technical school (Figure 5).

Income also played a roll, with those with the lowest income (<\$25,000) reporting the highest percentages of currently smoking (35%).

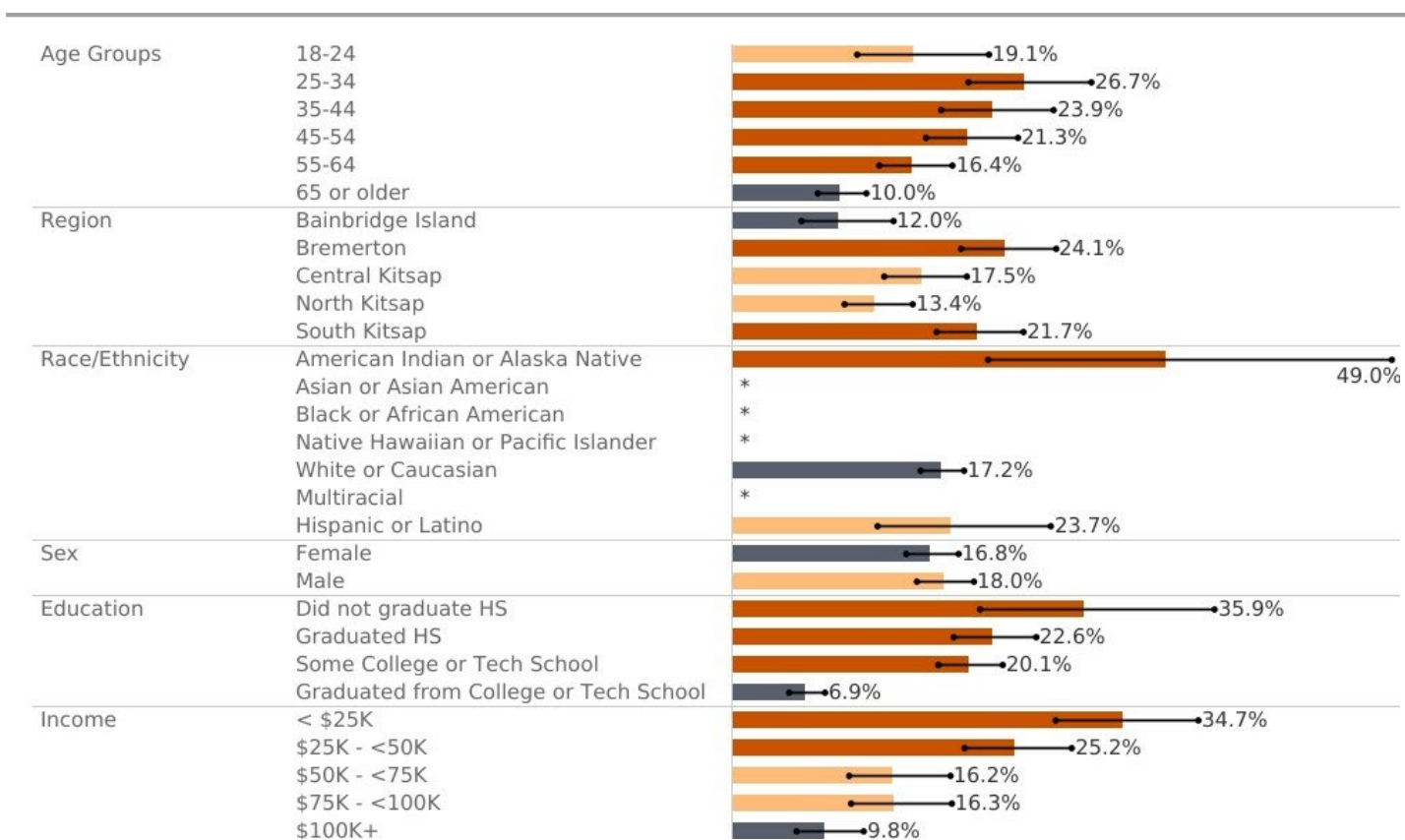


Figure 5. Kitsap adults reporting currently smoking by subgroup, 2011-21

Data source: Washington Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

Notes: *The estimate has an elevated relative standard error (RSE) greater than 25% and does not meet KPHD reliability standards. Geographic region is based on ZIP code rollup.

Legend
 ■ Reference Group
 ■ Not Statistically Significant
 ■ Statistically Significant

In Kitsap, the percentages of 8th grade students and 12th grade students indicating they had smoked cigarettes in the past 30 days have decreased statistically significantly from 2012 to 2021. The percentage of 10th grade students reporting smoking has decreased as well, however the trend was not statistically significant. In 2021, about one in twenty 12th graders (5.3%) and only 2.4% of 10th graders reported smoking.

Among 10th and 12th graders combined, higher percentages of students reported smoking among students with a sexual orientation of gay, lesbian, bisexual or something other than heterosexual (6.3%), and among those who identify with a gender other than male or female (7.7%). These higher percentages were statistically significantly different (Figure 6).



Figure 6. Kitsap 10th and 12th graders reporting smoking in the past 30 days by sexual orientation and gender, 2021

Data source: Washington State Healthy Youth Survey (HYS)

E-cigarettes — Also known as electronic cigarettes, vaping, and vape products, e-cigarettes are particularly dangerous to kids, teens, and young adults. A recent Health Impact Review by the Washington State Board of Health highlighted research findings that propylene glycol and glycerin, the most common solvents in vapor products, are toxic when aerosolized through the vaping process.¹⁰ In addition, research has also shown flavor chemicals, specifically benzaldehyde (used in cherry-flavored products) and 2, 5-dimethylpyrazine (used in chocolate-flavored products), to be toxic both in e-liquid and aerosol forms.

In addition to flavorings and other potential health risks, most e-cigarettes contain nicotine, the addictive drug commonly in cigarettes. Nicotine can harm the parts of the brain that control attention, learning, mood, and impulse control and change the way the brain develops.^{11 12}

For public school students, there has been no statistically significant trend over time for any grade in the percentage of students reporting using electronic cigarettes, e-cigs, or vape pens in the past 30 days. However, in 2021, about 7.9% of 10th grade students and 16.2% of 12th grade students reported using electronic cigarettes.

Like smoking cigarettes, among 10th and 12th graders combined, higher percentages of students reported vaping among students with a sexual orientation of gay, lesbian, bisexual or something other than heterosexual (15.2%), and among those who identify with a gender other than male or female (16.3%). These higher percentages were statistically significantly different.

For vaping, however, higher percentages were also seen among students who were female sex at birth (14.2%) and those who identified as female (13.3%), compared to males (9.0%) and those who identified as male (9.0%). These differences were statistically significant.

Marijuana

Purchasing cannabis is legal in Washington State for adults aged 21 and older from licensed cannabis retail stores. In addition, the Cannabis Patient Protection Act allows specific types of healthcare professionals to authorize cannabis for medical use.¹³ Data on marijuana use among adults is not addressed in this report. The major public health concern for marijuana is use by youth, where marijuana may harm the developing brain.¹⁴

In Kitsap, there has been no statistically significant trend in marijuana use from 2012 to 2021 for any grade, but there were decreases seen from 2018 to 2021 in every grade. For 8th grade students, the percentage reporting marijuana use decreased from 18.3% in 2018 to 7.8% in 2021. For 12th grade students, the percentage reporting marijuana use decreased from 28.2% in 2018 to 17.6% in 2021. Similar decreases were seen in Washington state.

Among 10th and 12th graders combined, higher percentages of students reported using marijuana among students with a sexual orientation of gay, lesbian, bisexual or something other than heterosexual (16.5%). This higher percentage was statistically significantly different.

A higher percentage was also seen among students on Bainbridge Island (14.6%), compared to South Kitsap (9.3%).

Opioids and other drugs

Drug addiction is a chronic disease characterized by drug seeking and use that is uncontrollable, despite harmful consequences.¹⁵ Drug use in Kitsap is a major concern because of increasing overdose death rates. The number of deaths in Kitsap where drugs were a contributing cause has doubled in preliminary data from 2022, compared to the 5-year average from 2014 to 2018.

In 2022, there were 73 drug overdose deaths in Kitsap County, an age-adjusted rate of about 27 for every 100,000 residents.¹⁶ See the **Methods chapter** for more information about adjusting for age.

This number has been increasing every year since 2019, and the increasing trend from 2019 to 2022 is statistically significant. Kitsap's rate in 2022 is similar to the state's rate overall.

Unlike deaths, non-fatal hospitalizations for drug overdose have had no statistically significant trend since at least 2000. In preliminary data for 2022, there were approximately 149 hospitalizations for drug overdose in Kitsap, an age-adjusted rate of 53 hospitalizations for every 100,000 residents. Kitsap's rate is similar to the state's rate.

More than three in four drug-related deaths (78%) in Kitsap in 2022 were due to opioids, a class of drugs that include heroin, synthetic opioids like fentanyl and pain relievers available by prescription, such as oxycodone.¹⁷

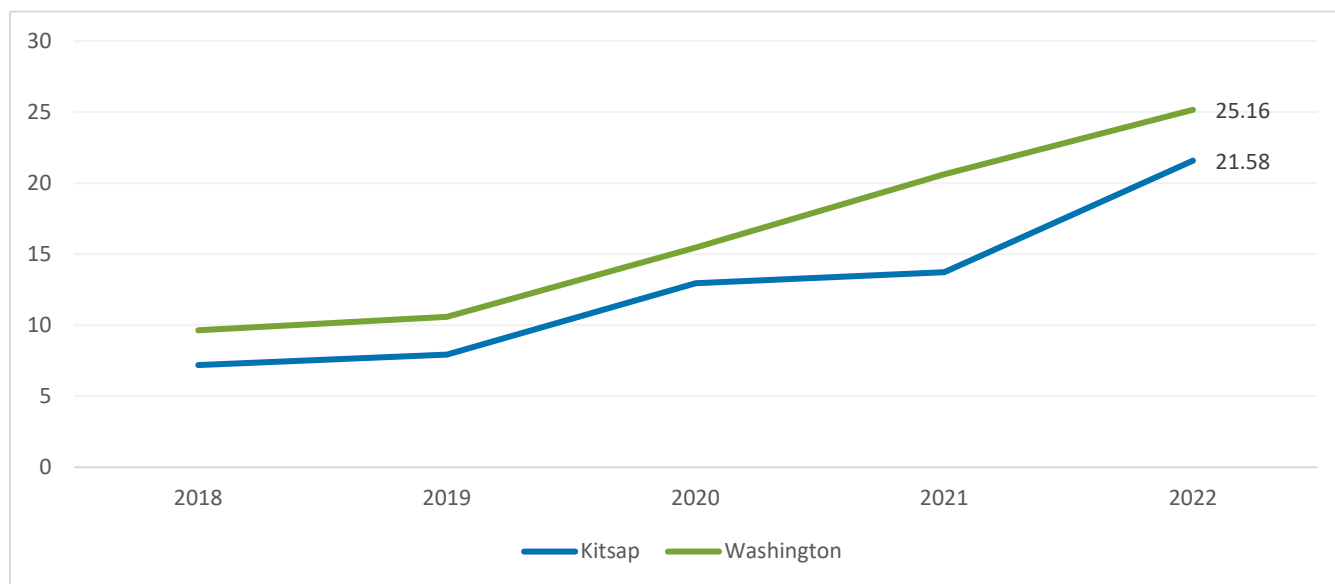


Figure 7. Rate of opioid overdose deaths per 100,000 population

Data source: Washington State Department of Health, Opioid and Drug Overdose Data Dashboard

In preliminary data from 2022, there were 57 deaths where an opioid was a contributing cause of death, a rate of 22 deaths due to opioids for every 100,000 residents. Kitsap's rate has been increasing from 2018 to 2022 and the trend is statistically significant. Kitsap's rate in 2022 was similar to Washington. (Figure 7)

Non-fatal opioid hospitalizations have remained unchanged from 2005 to 2022 in Kitsap. There were about 15 hospitalizations where any opioid was a contributing cause per 100,000 Kitsap residents in 2022. This rate was similar to the state's rate.

Non-fatal emergency department (ED) visits for drug overdose have remained unchanged from the first quarter of 2019 (71 per 10,000 ED visits) to the fourth quarter of 2022 (84 per 10,000 ED visits).¹⁸ The rate of drug overdose ED visits in Kitsap increases with increasing age group. The highest rate is among youth aged 11 to 17 (225 per 10,000 visits), followed by those 18 to 34 (114 per 10,000 visits), those 35 to 64 (100 per 10,000 visits), and those 65 or older (39 per 10,000 visits). The rate is higher among males (119 per 10,000 visits) than females (72 per 10,000 visits).

In the fourth quarter of 2022, only 32% of non-fatal ED visits for drug overdose in Kitsap were due to any opioid. The rate of non-fatal ED visits for opioids was 27 per 10,000 visits in Kitsap in the fourth quarter of 2022. These visits have been increasingly for fentanyl during the last half of 2021 and 2022. Visits due to heroin have been decreasing during that same period, while visits for other types of opioids have remained stable.

In 2022, the highest rates for non-fatal ED visits for opioids have been among those 35 to 64 (37 per 10,000 ED visits) and those 18 to 34 (32 per 10,000 ED visits), followed by those 65 and older (18 per 10,000 visits) and those 11 to 17 (less than 10 visits). Males had a higher rate (39 per 10,000 visits) than females (22 per 10,000 visits).

From 2015 to 2022, the number of patients that are prescribed any opioid has been decreasing, from 96 patients per 1,000 residents in the first quarter of 2015 to 46 patients per 1,000 residents in the fourth quarter of 2022.¹⁹ This decrease is seen most steeply in the younger population, but the rate has been decreasing for all age groups. At the same time, patients prescribed at least one opioid use disorder formulary buprenorphine prescription has been increasing, from 1.3 patients per 1,000 in the first quarter of 2015 to 4.0 patients per 1,000 in the fourth quarter of 2022.

The increase in deaths due to opioids combined with no corresponding increase in hospitalizations or ED visits may indicate an increase in fatality of opioid use rather than increased overall opioid use in Kitsap. Fentanyl has been increasingly reported as the opioid related to visits to the emergency department in 2021 and 2022, replacing heroin. More investigation into drug use, types of drugs used and consequences, and drug treatment availability in Kitsap is needed.

CRIME

Indicators of community safety and violence encompass public safety, incarceration, and exposure to crime or violence in the home and community settings. Violence and unsafe conditions can lead to injury and chronic health conditions, as well as poor mental health and toxic stress (stress that is prolonged, severe, or chronic, and creates additional challenges for a person's functioning).²⁰²¹

Total crime and Group A and B crime

Based on analysis by the Washington State Office of Financial Management, in 2021, there were about 47 crimes for every 1,000 Kitsap residents (Figure 8). This rate has been decreasing from at least 2012 through 2021 and the decreasing trend is statistically significant. Kitsap's rate in 2021 is lower than Washington's rate.

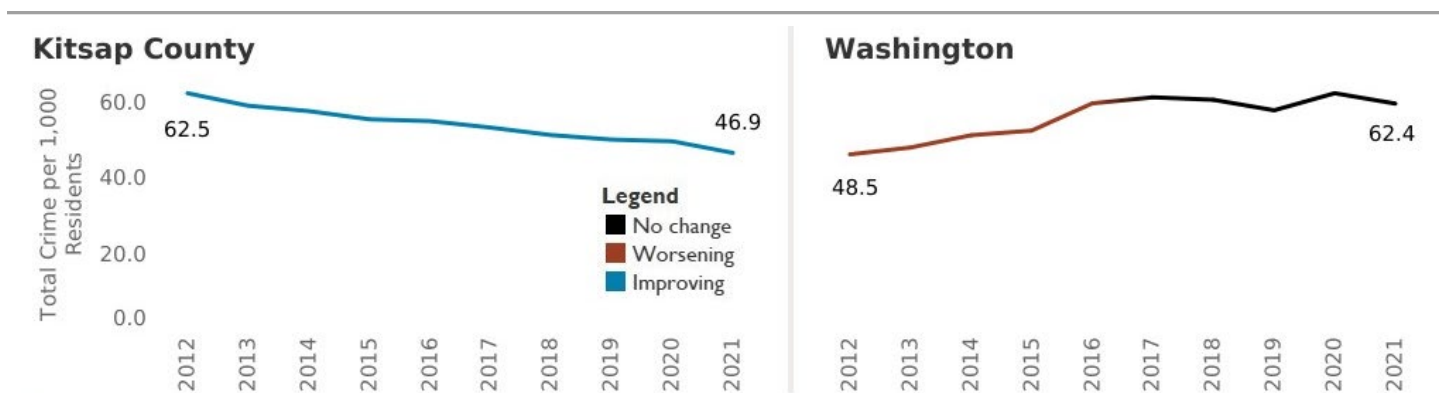


Figure 8. Total crime rate per 1,000 residents

Data source: Washington State Office of Financial Management, Statistical Analysis Center, Washington State County Criminal Justice Data Book

Compared to 2020 (4.3 per 1,000), society crime, like drug and weapon violations, decreased in 2021 to 1.7 per 1,000. Much of the decrease in society crime is a decrease in drug violations, likely due to the recent changes in Washington laws on drug possession, and the uncertainty following the Washington Supreme Court case *State v. Blake*.²²

Property crimes, like robbery, theft and arson, decreased slightly from 31.6 per 1,000 to 30.3 per 1,000, while person crimes, like murder, rape and kidnapping, increased slightly from 14.1 per 1,000 to 14.9 per 1,000 (Figure 9).

In data reported directly from the Washington Association of Sheriffs and Police Chiefs, there was a decrease each year from 2016 to 2021 in Group A crime, which includes 49 offenses grouped in 23 crime categories, such as murder, robbery, prostitution, and arson. In 2022, however, the rate of Group A crimes increased from 47 per 1,000 residents to 59 per 1,000 residents (Figure 10).

This increase in Group A crime between 2021 and 2022 was seen in every jurisdiction in Kitsap: by the Kitsap Sheriff's Office, the Bainbridge Island Police Department, the Bremerton Police Department, the Port Orchard Police Department and the Poulsbo Police Department. The Port Orchard Police Department had an increasing trend from 2019 to 2022 that was statistically significant, with increases every year.

Kitsap County



Figure 9. Crime rate per 1,000 residents by type

Data source: State Office of Financial Management, Statistical Analysis Center, Washington State County Criminal Justice Data Book

Kitsap County



Kitsap County

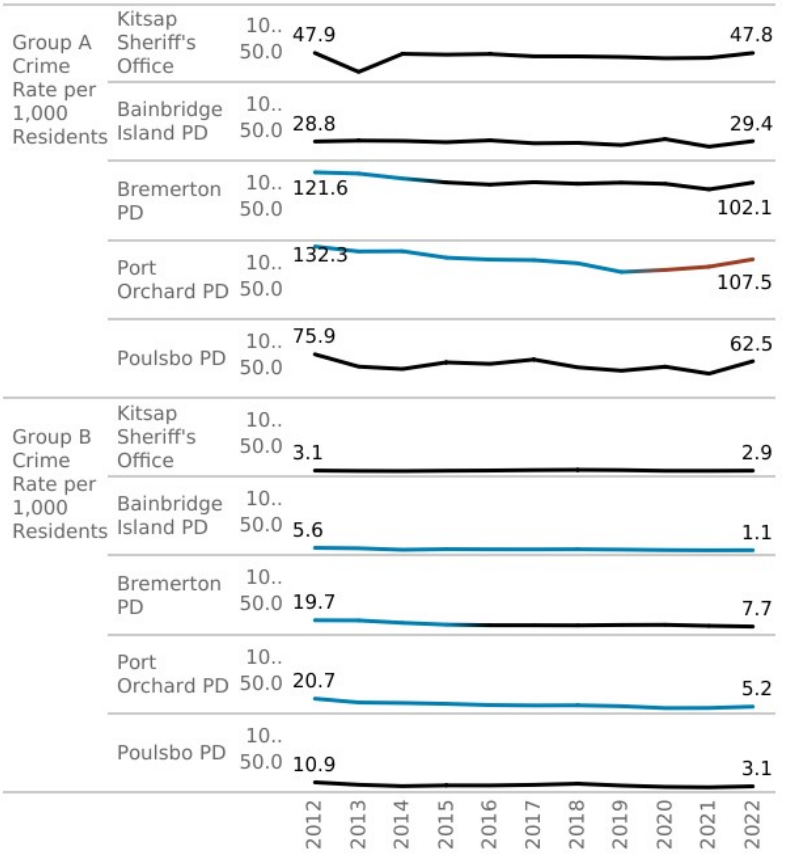


Figure 10. Group A crime rates per 1,000 Kitsap residents

Data source: Washington Association of Sheriffs & Police Chiefs, Uniform Crime Report

Legend

- No change
- Worsening
- Improving

Domestic violence

Domestic violence or intimate partner violence is abuse or aggression that occurs between romantic partners, such as spouses or dating partners.²³ Domestic violence can have long-term, negative effects on families and the communities in which they live.

Adult survivors can experience chronic health problems as a result, such as heart disease, chronic pain, stress disorders and increased health care costs. Witnessing violence committed against a parent can affect a child's attachment and trust of people. Strategies to promote healthy, respectful, and nonviolent relationship skills are an important part of prevention.

In data from Washington Department of Social and Health Services, domestic violence offenses are reported incidents based on any violence of one family member against another family member, where family can include spouses and former spouses, parents with children in common, adults living in the same household, and parents and children. Incidents are not arrests and are based on the victim, so that there is one report per victim.

From 2004 to 2021, there was no statistically significant increasing or decreasing trend in domestic violence reports, however there was a prolonged period of decreasing rates from 2015 to 2020 with only one year of increase in rate during that time (Figure 11). Kitsap's trend has not mirrored Washington, which has shown a statistically significant increasing trend from 2008 to 2021, and Kitsap's rate in 2021 (4.8 per 1,000) was lower than Washington (8.7 per 1,000). The difference was statistically significant.

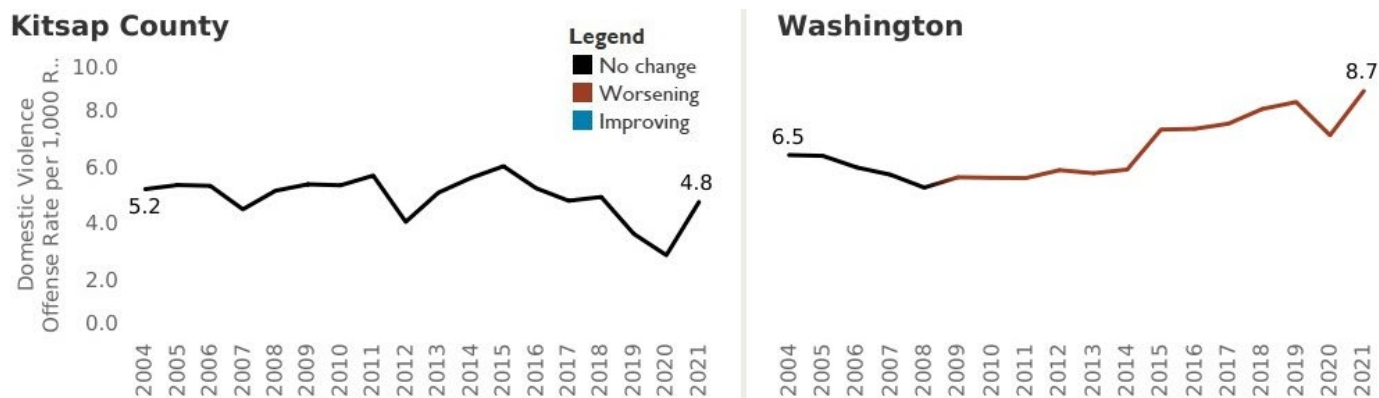


Figure 11. Domestic violence offense rate per 1,000 residents

Data source: Washington State Office of Financial Management, Statistical Analysis Center, Washington State County Criminal Justice Data Book

It is difficult to place data from law enforcement jurisdictions to specific areas of the county, however Bremerton Police Department aligns relatively well with the Bremerton area. This makes it clear that Bremerton had a higher domestic violence offense rate (6.6 per 1,000) compared to Kitsap overall. The difference is statistically significant.

Child abuse and neglect

The Centers for Disease Control and Prevention estimate that at least one in seven children in the U.S. have experienced child abuse or neglect in the past year. Experiencing poverty can place a lot of stress on families, which increases the risk for child abuse and neglect. Nationally, rates of child abuse and neglect are five times higher for children in families with low socioeconomic status.²⁴

Children's early experiences impact them throughout life. Kids that are raised in safe, stable, nurturing relationships and environments are more likely to enjoy good physical and mental health and succeed academically and socially.²⁵

Consequences of child abuse and neglect can lead to poor mental and physical health well into adulthood.

In data from the Washington Department of Social and Health Services, child abuse and neglect referrals reflect the number of children age birth to 17 identified as victims of suspected child abuse in reports to CPS that were accepted for further action, for every 1,000 children age birth to 17.

Similar to domestic violence, there was an increase in the child abuse and neglect referral rate between 2020 and 2021. From 2006 to 2021, there was no statistically significant increasing or decreasing trend in Kitsap.

In 2021, there were 33 referrals for child abuse and neglect for every 1,000 Kitsap residents, which was a lower rate than Washington State (36 per 1,000, Figure 12). The difference was statistically significant.

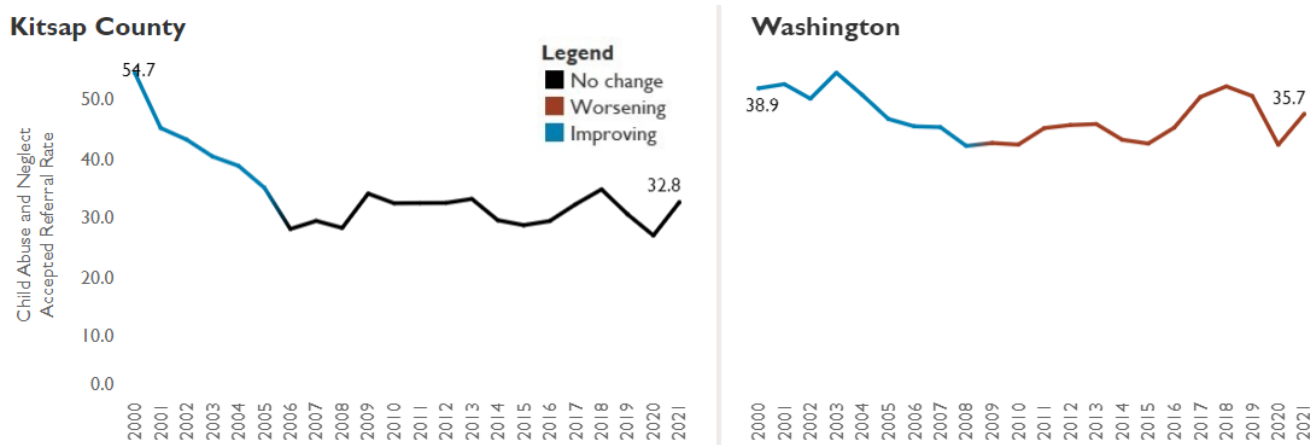


Figure 12. Child abuse and neglect referral rate per 1,000 children

Data source: Washington Department of Social and Health Services, Risk & Protection Profile for Substance Abuse Prevention

In 2021 there were statistically significant differences by subcounty geography in Kitsap. Bremerton (56.7 per 1,000) had a higher rate than either South Kitsap (36.9 per 1,000) or Central Kitsap (31.7 per 1,000), which in turn had higher rates than North Kitsap (22.9 per 1,000). North Kitsap's rate is also statistically significantly higher than the rate for Bainbridge Island (6.6 per 1,000).

Sexual assault

Based on analysis by the Washington State Office of Financial Management, in 2021, there were about 97 sexual assault crimes for every 100,000 Kitsap residents. Sexual assault crimes include all forcible sex crimes, such as forcible rape, forcible sodomy, sexual assault with an object and forcible fondling. They do not include commercial sex acts, human trafficking, prostitution, incest, or statutory rape.

Similar to domestic violence and child abuse, there was a decrease in rate in 2020 in both Kitsap and Washington, followed by an increase in rate in 2021, however there was no statistically significant trend from 2012 to 2021 in Kitsap (Figure 13). Unlike child abuse and domestic violence, which both have lower rates than the state, Kitsap's rate of sexual assault (97 per 100,000) was higher than Washington (75 per 100,000) in 2021, and the difference was statistically significant.

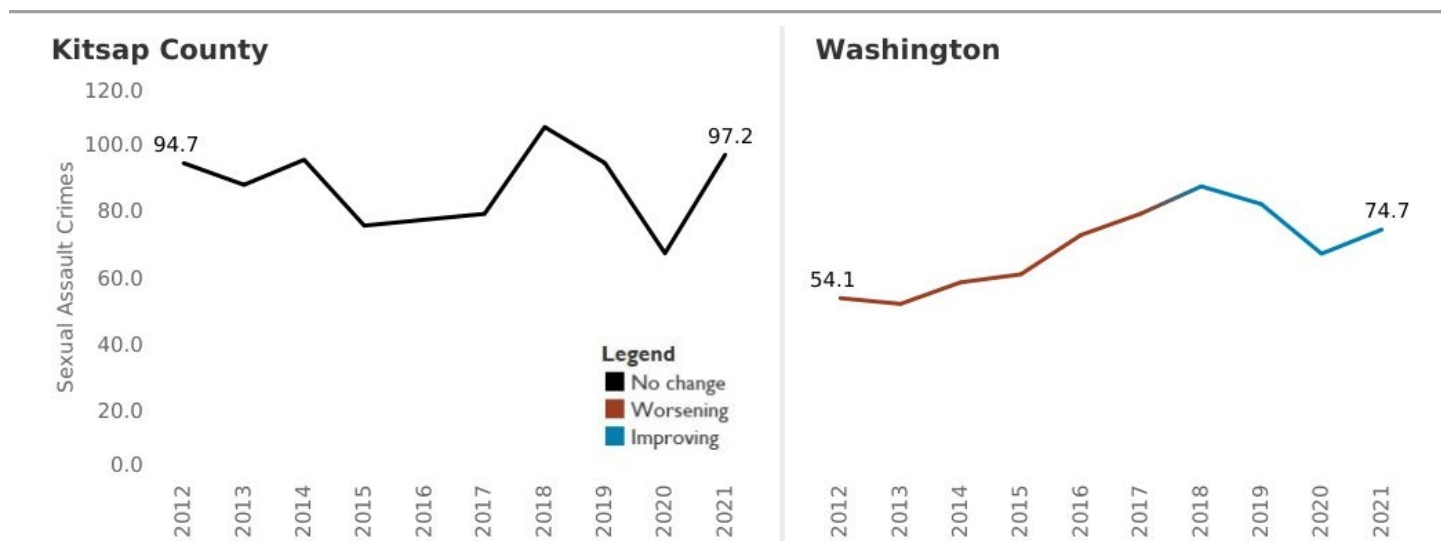


Figure 13. Sexual assault crimes per 100,000 residents

Data source: Washington State Office of Financial Management, Statistical Analysis Center, Washington State County Criminal Justice Data Book

Homicide and intentional injuries

From 2019 to 2021, there were 22 murders or homicides of Kitsap residents, which is a rate of about 3 for every 100,000 residents over the 3-year period, after adjusting for age (Figure 14). The rate was increasing from 2013-15 to 2019-21, and the trend was statistically significant. Kitsap's rate in 2019-21 was similar to the state's rate of 4 per 100,000. There were approximately 54 intentional injury hospitalizations for every 100,000 Kitsap residents in 2019, after adjusting for age. Intentional injuries in this data included assaults on another person and self-inflicted injuries. No trend was identified from 2016 to 2019, however Kitsap's rate in 2019 was lower than the state's rate (68 per 100,000, Figure 15).

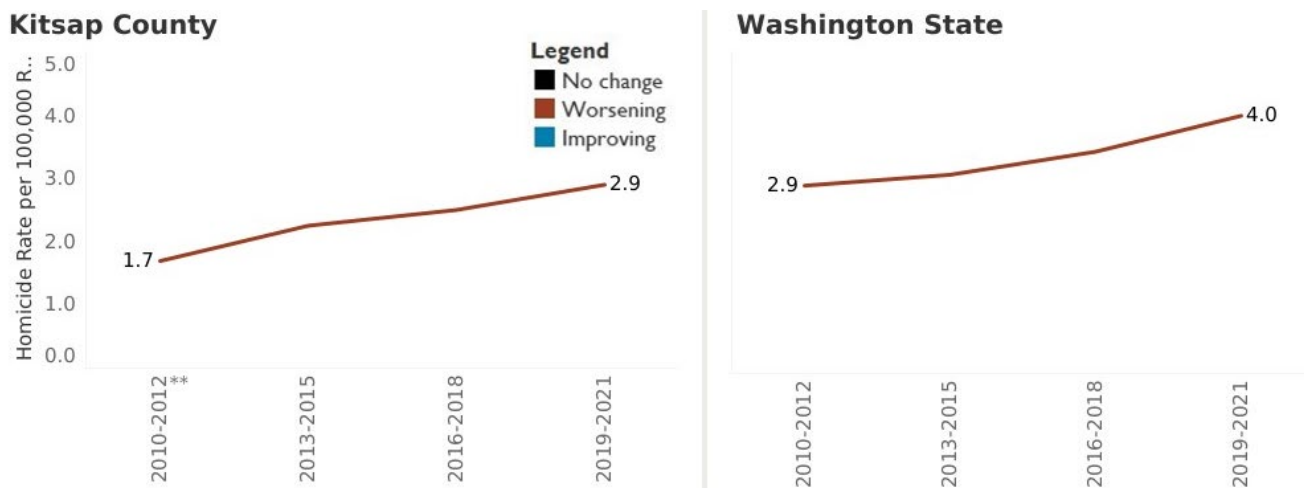


Figure 14. Homicide rate per 100,000 residents (age-adjusted)

Data source: Washington State Department of Health, Death Certificate Data

There were no statistically significant differences by sex or geographic area of the county. Adults 65 and older had the lowest rate of intentional injuries of any age group, with 17 per 100,000 (Figure 15). Children aged 0 to 17 were next lowest (45 per 100,000), followed by those aged 35 to 64 (50 per 100,000) and those 18 to 34 (73 per 100,000).

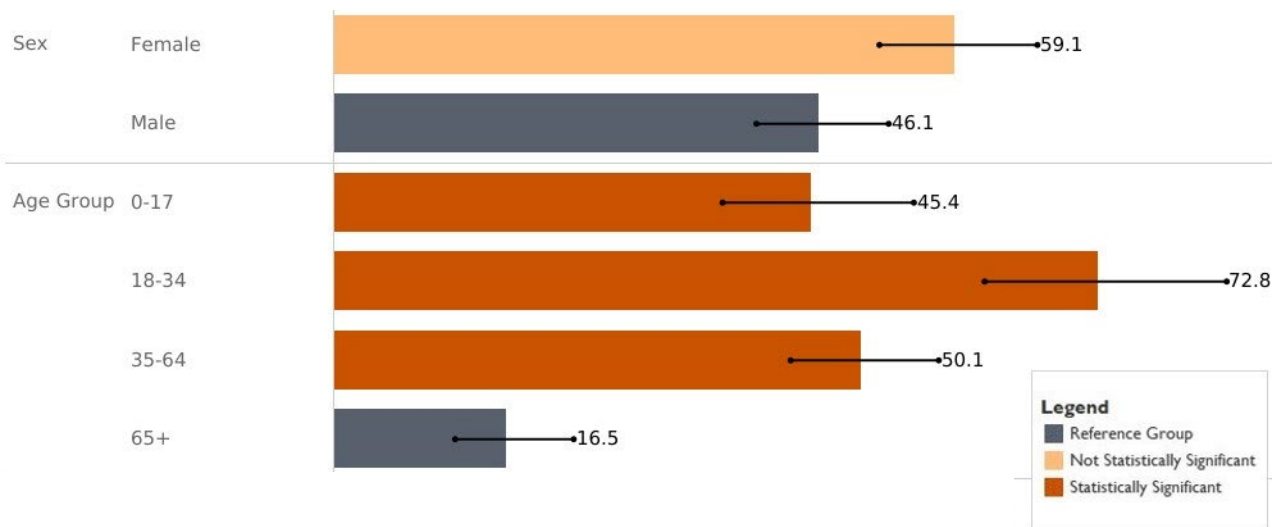


Figure 15. Intentional injury hospitalization rate per 100,000 Resident, 2016-19

Data source: Washington Hospital Discharge Data, Comprehensive Hospitalization Abstract Reporting System (CHARS), Washington State Department of Health

FIREARMS

Four in ten adults in the US say they live in a household with a gun, and at the same time, almost half (48%) of US adults see gun violence as a very big problem in our country today, according to the Pew Research Center.²⁶

Having firearms in the home are associated with an increased risk of firearm homicide and firearm suicide in the home.²⁷ In Washington, legislature was passed in April 2023 meant to address gun violence, including laws banning certain semi-automatic weapons, imposing waiting periods, and clearing the way for lawsuits against gun makers and sellers in certain cases. Washington is the 10th state to prohibit the sale of certain semi-automatic weapons.²⁸

Firearm ownership

In Kitsap, approximately 42% of Kitsap residents had a gun in or around their home in 2020, according to the Behavioral Risk Factor Surveillance System (BRFSS). This percentage has not changed since at least 2013 and was higher than the state's percentage (32%) in 2020. Out of the entire population, more than one in twenty residents (6.5%) in Kitsap report having a loaded and unlocked firearm in or around their house.

Firearm deaths

In 2021, there were 30 deaths that occurred in Kitsap from firearm-related causes. After adjusting for age, the rate in Kitsap was 9.7 for every 100,000 residents, similar to the state's rate overall (11.2 per 100,000). Kitsap's rate has had no increasing or decreasing trend in firearm-related deaths since at least 2010. Males have a higher rate (19.2 per 100,000) compared to females (2.6 per 100,000).

Firearm hospitalizations

From 2017 to 2019, there were approximately 20 hospitalizations due to firearm-related causes in Kitsap residents, which is a rate of 2.4 per 100,000 residents. Kitsap's rate is lower the state's rate (6.4 per 100,000) in 2017-19 and the difference is statistically significant.

COMMUNITY ASSETS

There are many community members and organizations striving to improve the health of our community by working to prevent substance use and crime. Many more are working on underlying issues that influence the underlying influences behind substance use and crime, such as economic stability and mental health.

Substance use prevention

[Kitsap County Substance Abuse Prevention Coalitions](#) in Bremerton, North Kitsap and South Kitsap are grassroots volunteer organizations formed for the purpose of preventing and reducing youth substance abuse.

Kitsap County Board of Health and [Public Health District's](#) Secure Medicine Return Regulation, Smoking/Vaping in Public Places Laws, and Marijuana and Tobacco Prevention Programs are aimed at minimizing harmful effects of legal substance use. The District also provides information on substance use prevention, naloxone, syringe services, and tobacco cessation.

[People's Harm Reduction Alliance](#) provides harm reduction and other health services to people who use drugs, including their Ostrich Bay (Kitsap) mobile syringe exchange program.

[Kitsap Recovery Center](#) in Port Orchard provides both inpatient and outpatient substance abuse treatment services, primarily for low-income and Medicaid-eligible clients.

[West Sound Treatment Center](#), [Peninsula Community Health Services](#), and [Cascadia Treatment Center](#) provide substance use disorder treatment and are dedicated to substance use disorder recovery through education and support services. [Coffee Oasis](#) provides treatment resources for youth.

The [BAART Program](#) in Bremerton is an Opioid Treatment Program (OTP) that provides comprehensive services including case management, lab services, medication-assisted treatment, and counseling.

[Agape Unlimited](#) is a non-profit, state-certified, outpatient chemical dependency treatment program, supplemented by a range of support services.

[Olympic Educational Services District \(OESD 114\) Student Assistance Program](#) addresses non-academic barriers to learning by providing mental health and substance use prevention and intervention counseling support and student dropout intervention services.

The [Washington State Department of Health Overdose Education and Naloxone Distribution](#) program provides information and distributes naloxone. University of Washington's [Stopoverdose.org](#) also provides information and resources on opioids, treatment, naloxone, and other topics.

The [Washington State Department of Health's Commercial Tobacco Prevention Program](#) (including vaping products) provides information and programs such as the [Washington State Quitline](#), [2Morrow Health](#) (a free, anonymous, self-guided app-based program that teaches you how to deal with unhelpful thoughts, urges, and cravings caused by nicotine) and [This is Quitting](#), a text-to-quit vaping program for young people ages 13-24.

Washington's [Safe Medication Return](#) program lets people dispose of household over-the-counter, and prescription medications (including medications for household pets).

[NEXT Distro](#) is online and mail-based **harm reduction service** designed to reduce opioid overdose death, prevent injection-related disease transmission, and improve the lives of people who use drugs.

The [National Syringe Exchange Network](#) has a map of syringe exchange programs across the United States.

Safety, injury, and violence

[Child Protective Services](#) is a state agency that investigates reports of child abuse and neglect. [Adult Protective Services](#) investigates reports about abuse, abandonment, neglect, exploitation and self-neglect of vulnerable adults in Washington State.

St. Michael Medical Center's [Sexual Assault Nurse Examiner \(SANE\) program](#) is designed to assure compassionate care for victims, assist law enforcement in the prosecution of crimes and provide sexual assault education to the community.

[Kitsap Support, Advocacy, and Counseling \(KSAC\)](#) offers free confidential advocacy and therapy services that are open to sexual assault/crime victim survivors and their non-offending family members.

[Kitsap Special Assault Investigation and Victim's Services](#) coordinate and enhance our community agencies' approach to sexual assault, domestic violence, child abuse, human trafficking, and exploitation of vulnerable adults.

Kitsap County Clerk's office provides a [pamphlet](#) on different civil protection orders, including those related to domestic violence, anti-harassment, and sexual assault.

[YWCA Kitsap County](#) offers programs such as crisis intervention, safety planning, case management supportive housing, emergency shelters, legal advocacy, support groups, and programs to survivors of domestic violence.

[Scarlet Road](#) provides holistic support services to survivors of sex trafficking, community prevention and awareness training, community provider training, and other related services.

King County's [Lock It Up](#) program offers information and resources on safe gun storage.

[Washington State Department of Health's Injury and Violence Prevention Program](#) has initiatives that addresses topics such as pedestrian and motor vehicle safety, child injury, suicide prevention, and traumatic brain injury.

The Washington State Chamber of Commerce's [Office of Crime Victims Advocacy](#)'s programs use advocacy, prevention, education, treatment and law enforcement to stop violence, substance abuse, and their social impacts so that Washington's communities are the best places to work and live.

[The Compassionate Friends](#) provides highly personal comfort, hope, and support to every family experiencing the death of a son or a daughter, a brother or a sister, or a grandchild, and helps others better assist the grieving family.

[Mothers Against Drunk Driving](#) aims to end drunk driving, help fight drugged driving, support the victims of these violent crimes, and prevent underage drinking.

[Naval Base Kitsap Family Advocacy Program](#) is responsible for the prevention and response to child abuse and neglect and domestic abuse and intimate partner violence in military families.

ENDNOTES

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