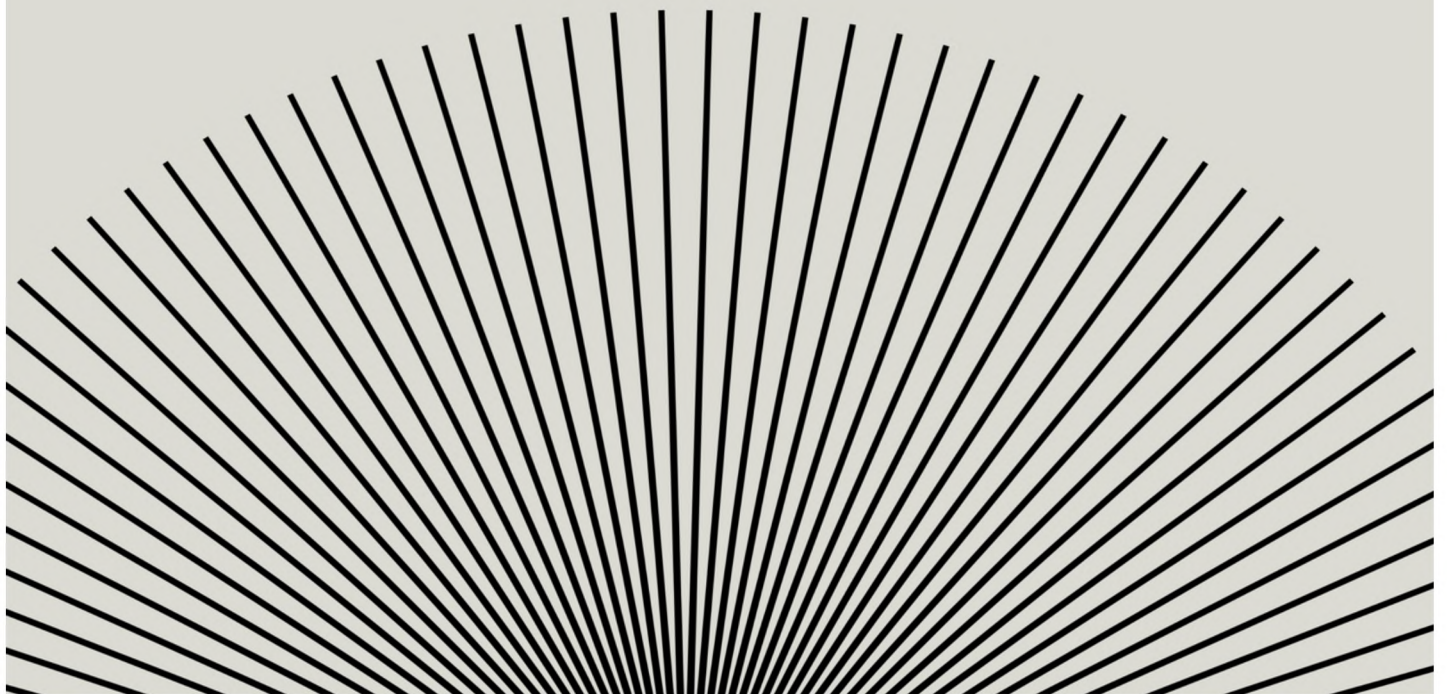


**March
2026**

Comprehensive Assessment of
Substance Use Readiness in
Surry County



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We do not know what the future will bring, so let us build it together.

Introduction

As we present this comprehensive assessment of substance use readiness in Surry County, it is essential to recognize what these pages truly represent: the authentic voices, experiences, and perspectives of our community members. This is not a report written from an outside perspective or based on assumptions about our county. Rather, it is a collection of insights shared directly by 30 of our neighbors, colleagues, family members, and community leaders who live and work here every day—from business owners and educators to healthcare providers and law enforcement officers, from faith leaders and social service professionals to individuals and families directly affected by substance use. These perspectives come from farming communities and town centers, from civic volunteers and government officials, from those in recovery and those supporting loved ones on that journey.

The Tri-Ethnic Community Readiness Model employed for this assessment was specifically designed to capture the honest, unfiltered reality of how communities perceive and respond to critical issues. Through 40 carefully structured questions, our community members shared not just facts and figures, but their fears, frustrations, hopes, and hard-won wisdom.

These perspectives matter because community readiness is the foundation of effective action. For too long, conversations about substance use have been dominated by assumptions, stereotypes, and viewpoints from outside our community. By using the scientifically validated Community Readiness Model, we have created a systematic record of what Surry County residents actually think, know, believe, and experience regarding substance use and our community's response to it.

As the research clearly demonstrates, interventions that don't match a community's level of readiness are far more likely to fail—met with resistance, indifference, or an inability to sustain effort over time. By understanding where we truly are, we can develop strategies that meet our community where it stands today and systematically build toward where we want to be tomorrow.

As you read through these findings, you may recognize some perspectives as reflecting your own views, while others may surprise you or even challenge your assumptions about what "most people" in Surry County think or believe. Our assessment revealed that awareness, knowledge, and engagement with substance use issues vary dramatically across our county. Some residents are deeply informed and actively involved; others remain largely unaware of the scope of the crisis or the resources available. Some view substance use primarily through a lens of public safety and criminal justice; others understand it as a complex health crisis requiring compassionate, evidence-based responses. Some have been personally touched by addiction and bring the perspective of lived experience; others have maintained distance from the issue and struggle to fully grasp its impact. All these perspectives coexist within Surry County, and this assessment honors that reality.

The purpose of documenting these perspectives is to provide the foundation for meaningful, effective action. The Community Readiness Model teaches us that sustainable change happens when we understand our starting point, build on existing strengths, address identified gaps, and match our strategies to our community's actual capacity and readiness level. The perspectives shared in this document have already begun to shape our path forward, informing the development of the Surry Strategic Framework 2030, guiding resource allocation decisions, and highlighting both

the remarkable progress we've made and the critical work that remains. It is important to note that these perspectives represent a specific moment in time—the views and experiences of 30 community members interviewed between June and September 2025. As we implement new strategies, expand services, and work to shift attitudes toward greater understanding and compassion, these perspectives will shift as well. This assessment provides a critical benchmark and a baseline against which we can measure future progress.

As you engage with this material, remember that behind every statistic and every quoted perspective is a real person—a member of our Surry County community who took time to share their truth. The pages that follow contain detailed findings, data, and analysis drawn from these community perspectives. You will encounter both quantitative measures and rich qualitative insights. You will see where we have consensus and where we are divided. You will understand our capacity and our constraints, our achievements and our obstacles. Some perspectives may be difficult to read—you will encounter stories of loss, accounts of stigma and judgment, and frank acknowledgments of where our systems fall short. You will also find stories of remarkable compassion, dedication that goes beyond job descriptions, and a genuine desire to help our neighbors find pathways to recovery.

Whether each perspective aligns with yours or challenges it, each voice deserves to be heard and considered as we chart our collective path toward a healthier, more resilient community.

These are our perspectives. This is our reality. And together, we will shape our future.

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March 2026

Summary

Surry County Substance Use Community Readiness Assessment: Comprehensive Report

Understanding the Community Readiness Model

The community readiness assessment conducted in Surry County utilized the Community Readiness Model (CRM), is a scientifically-grounded research tool developed by the Tri-Ethnic Center for Prevention Research at Colorado State University. This evidence-based framework has been extensively field-tested across diverse communities varying widely in ethnicity, level of rurality, region of the United States, and internationally since its original development in 1995.

The Science Behind Community Readiness

Community readiness is defined as the degree to which a community is willing and prepared to take action on an issue. The model's development drew upon two foundational theoretical frameworks: The Transtheoretical Model of Behavior Change (Prochaska and DiClemente, 1992), also called the Stages of Change Model, which assesses an individual's readiness to act on new, typically healthier behaviors and provides appropriate strategies to guide individuals through stages of change to action and maintenance.

Social Action Theory from community development (Warren, 1978), which identifies stages on the community level that lay the groundwork for collective action, including Stimulation of Interest (recognition of need), Initiation (development of problem definition and proposed solutions), Legitimization (acceptance by local leaders), Decision to Act (development of specific plans), and Action (implementation).

Communities, like individuals, move through stages before they are ready to implement programs, develop interventions, and take action to address issues. Matching a community intervention to the community's level of readiness is key to achieving success. If your community is not ready for your efforts, failure is much more likely—the community may deny there is a problem, leading to resistance or hostility; community members may not understand the issue, resulting in indifference; or leaders may be unwilling to provide necessary resources for effective implementation.

The Intent and Purpose of the Model

The Community Readiness Model was specifically designed to help communities be more successful in their efforts to address a variety of issues, including drug and alcohol use, HIV/AIDS prevention, intimate partner violence, child abuse, heart health, obesity/nutrition, and many others.

The model serves multiple critical purposes:

- Measuring readiness levels on several dimensions to diagnose where initial efforts need to be focused

- Identifying community weaknesses and strengths and the obstacles likely to be encountered
- Pointing to appropriate actions that match the community's readiness levels
- Working within the community's culture to develop actions that are contextually appropriate
- Aiding in securing funding, cooperating with other organizations, and working with leadership
- Why This Assessment Tool is Important

Community efforts to implement programs and activities often meet with frustration and failure due to:

- Little enthusiasm to provide resources or cooperate in implementation efforts
- Resistance by community members and/or leadership who erect obstacles
- Lack of action by the community and/or leaders to move efforts forward
- Ultimate failure as resources run out, volunteers burn out, and new programs prove ineffective

One fundamental reason for this frustration and failure is a lack of readiness to address the issue by community members and leadership. Just as with individual change, communities must use appropriate actions and techniques to move forward.

The Five Dimensions of Community Readiness

The Community Readiness Model assesses a community's preparedness across five critical dimensions:

- Community Knowledge of Efforts - How much does the community know about current programs and activities addressing the issue?
- Leadership - What is leadership's attitude toward addressing the issue? To what extent are leaders willing to support efforts?
- Community Climate - What is the community's overall attitude toward addressing the issue? How much priority do community members place on this issue?
- Community Knowledge of the Issue - How much does the community understand about the causes, consequences, signs, symptoms, and local prevalence of the issue?
- Resources - What resources (financial, human, space, expertise) are available or could be used to address the issue?

Each dimension receives its own readiness score, allowing communities to identify specific areas requiring focused attention before broader implementation efforts can succeed.

The Nine Stages of Community Readiness

The model defines nine distinct stages of readiness, from Stage 1 (No Awareness - where the issue is not recognized as a concern) through Stage 9 (High Level of Community Ownership - where

efforts are deeply integrated into the community fabric with diversified, sustainable funding and ongoing evaluation driving continuous improvement).

Understanding where a community falls along this continuum is essential because different stages require fundamentally different strategies. For example, at lower readiness levels (Stages 1-3), one-on-one meetings with community leaders and small group discussions are most effective, while large public events or comprehensive programs would likely fail. At higher readiness levels (Stages 6-9), communities can successfully implement and sustain evidence-based programs with broad community participation.

The Assessment Methodology

The Surry County assessment followed the rigorous methodology outlined in the Community Readiness Handbook. This process included:

- Key respondent interviews with individuals representing diverse community sectors who possess knowledge about the community and the issue
- Structured interview questions consisting of open-ended questions about community attitudes, knowledge, beliefs, and resources
- Systematic scoring using standardized rating scales for each dimension of community readiness
- Calculation of dimension scores to identify specific areas of strength and need

This approach provides both quantitative data (numerical readiness scores) and rich qualitative information (detailed responses explaining community perspectives, barriers, and opportunities) that together create a comprehensive picture of community capacity and readiness.

Why This Matters for Surry County

The Community Readiness Assessment is not simply an academic exercise—it is a strategic planning tool that enables Surry County to:

- Avoid wasted resources by ensuring interventions match current community capacity
- Build on existing strengths identified through the assessment process
- Address critical gaps before they undermine implementation efforts
- Develop culturally appropriate strategies that resonate with local values and norms
- Create realistic timelines for moving through stages of readiness
- Secure stakeholder buy-in by demonstrating a data-driven, systematic approach

Importantly, while the Community Readiness Model is a well-researched and highly valued approach to initiate community change, it is not a method for determining whether an issue is actually occurring in the community, nor does it prescribe exactly what to do. Rather, it provides the diagnostic information necessary to make informed decisions about appropriate next steps and strategies that will be most effective given current community conditions.

Executive Overview: Surry County Assessment

The Tri-Ethnic Community Readiness for Community Change Interview represents a comprehensive assessment of Surry County's substance use landscape, conducted through interviews with 30 diverse community stakeholders. This document captures critical insights into how the community perceives, addresses, and struggles with substance use disorder, revealing both significant progress and persistent challenges in building an effective recovery ecosystem.

The assessment utilized a structured 40-question interview format, gathering both quantitative scaling data and rich qualitative responses from representatives spanning business, education, healthcare, law enforcement, religious organizations, social services, and individuals with lived experience. Segment representation included farming/landlords, civic and volunteer groups, parents, recovery community members, local management entities, local officials, state/local government representatives, payers, youth-serving agencies, and veterans.

Community Perception and Awareness

Severity and Leadership Response

Community members rated substance use as a major concern with an average score of 7-8 out of 10, recognizing its pervasive impact across nearly every household in Surry County. The crisis affects public safety, healthcare costs, workforce productivity, and economic development. Substance use has broadly impacted the community, with nearly everyone having experienced loss or knowing someone affected, touching all aspects of life including families, workplaces, and safety.

Leadership concern registered similarly high (average 7-8 out of 10), with officials demonstrating support through resource allocation and initiatives like the Surry County Office of Substance Abuse Recovery (SCOSAR). Surry County community members generally perceive leadership as taking substance use seriously, with the most recent survey showing a heavy concentration of concern ratings between 8 and 10.

However, this response is constrained by limited funding, competing governance priorities, and the political sensitivity of being labeled a "substance use problem area." A critical "hands-off" dynamic exists where sustained attention tends to wane when visible crisis indicators, like overdose rates, improve. Leadership attention and political will often fluctuate based on visible crisis indicators rather than sustained commitment to addressing root causes.

Furthermore, a gap exists between general awareness and technical understanding, as many leaders may not fully grasp the data or addiction science necessary to implement the most effective policy responses. This complex environment requires a sustained, coordinated effort that transcends simple public relations to address the deep-rooted social and economic drivers of the epidemic.

Community Awareness: An "Out of Sight, Out of Mind" Mentality

While there is general recognition that substance use is a problem—evidenced by news coverage, overdose deaths, and it becoming a major political topic—awareness exists on a continuum, with many people not understanding the full extent unless directly affected, and significant denial persists despite worsening conditions over the past five years.

The primary barrier to community awareness of substance use efforts in Surry County is an "out of sight, out of mind" mentality, where residents often remain disengaged unless personally impacted by the issue. This detachment is reinforced by pervasive stigma and a conscious avoidance of the topic, with some community members fearing that increased knowledge brings a greater responsibility to help.

Cultural stigma and bias remain pervasive, causing many who struggle to hide their challenges. While concern is high—especially among non-users worried about safety and the proximity of available substances—only a small portion actively seek to help people recover. Surry County residents acknowledge the problem will not disappear, with law enforcement managing rather than fixing it, as Narcan use has exploded over recent years the crisis has progressed to unprecedented levels affecting employment, families, and every aspect of county life.

Knowledge Gaps and Misconceptions

Community knowledge about substance use varies dramatically based on personal proximity to the crisis rather than general public awareness. While most residents possess surface-level recognition that substance use exists, a significant gap remains between baseline awareness and true understanding of the complex socio-economic, medical, and criminal justice impacts of addiction.

Media exposure has certainly increased the community's familiarity with the topic over time, but this has often failed to cultivate a deeper grasp of addiction mechanisms or the nuances of effective recovery processes. Ultimately, detailed knowledge remains concentrated among those directly "in the trenches," such as healthcare workers and affected families, while the average citizen lacks the specific education required to move beyond stigmatic or simplistic views of the issue.

The most pervasive misconceptions among community members include:

- **Moral Failing Belief:** Addiction is a moral failing or personal choice that "good people" can simply stop if they decide to
- **Socioeconomic Stereotyping:** Substance use is exclusive to lower-income or marginalized populations, fostering an "it could never happen here" mentality that blinds residents to the crisis's prevalence across all socioeconomic levels
- **Quick Fix Expectation:** Treatment is a quick, one-time fix rather than a complex, long-term medical process
- **Lack of Local Understanding:** Many residents don't fully understand how much substance use occurs locally or the true consequences for families and the community

These persistent myths, fueled by a lack of education and a preference for turning a blind eye, prevent the community from seeing the true scope of substance use and hinder the adoption of

comprehensive, evidence-based solutions.

Current Efforts and Infrastructure

Existing Programs and Services

All 30 community stakeholders surveyed confirm that substance use initiatives exist in Surry County, frequently citing SCOSAR, Daymark Recovery Services, and various detention-center and school-based programs as key contributors. While collaborative efforts between government agencies, EMS, and groups like Hope Valley are widely recognized, many respondents still lack awareness of specific program details beyond these prominent entities.

SCOSAR serves as the central hub for comprehensive resources, including recovery-to-work services, transportation programs, and public awareness campaigns. These initiatives are supported by a network of faith-based organizations and local civic groups that provide essential transitional housing, peer support, and spiritual encouragement. Clinical treatment needs are addressed by professional mental health providers offering outpatient counseling and Medication-Assisted Treatment (MAT), while specialized clinics handle long-term addiction recovery.

Furthermore, law enforcement and emergency services play a critical role through integrated partnerships that facilitate overdose response, jail-based treatment, and school-based prevention education. Most programs are designed to be universally accessible, serving all community members regardless of background, though several are tailored to specific demographics such as justice-involved adults, at-risk youth, the unhoused, and individuals seeking employment.

Program History and Evolution

While some long-standing recovery services like AA and Hope Valley have operated in Surry County for decades, SCOSAR was established more recently, in 2017, in response to heightened public attention regarding local overdose rates. Over the past decade, the county has launched additional initiatives, including detention-center based programs and Recovery to Work connections, with public visibility rising significantly in the last three years.

Despite these long-term and newer efforts, a recurring theme is that many residents remain unaware of how long these programs have existed or what services are specifically available. This ongoing knowledge gap persists even as community awareness is gradually improving through more coordinated partnerships and increased media engagement.

Strengths of Current Efforts

The strength of Surry County's substance use efforts is rooted in a deeply compassionate, human-centered approach by professionals who prioritize empathy and advocate for the humanity of those in crisis. This dedication has built a robust infrastructure of accessible services, including the Post Overdose Response Team and Surry Transition Project programs, which provide practical supports like overdose response and detention center focused programming to help individuals overcome systemic barriers.

These efforts are further bolstered by strong collaborative backing from county commissioners and school systems, ensuring that prevention and education initiatives reach a wide audience. Ultimately, the county has created a stable, solution-focused ecosystem where growing community awareness and cross-agency partnerships provide a foundation of hope for long-term recovery.

Community Perception of Program Success

Community perceptions of substance use efforts in Surry County are deeply divided, often split between "informed" stakeholders who see progress and a public that primarily observes a "revolving door" of addiction. Positive feedback highlights the value of SCOSAR, increased compassion, and the availability of tangible resources like transportation and workforce assistance.

However, these successes are frequently overshadowed by vocal criticism regarding the use of tax dollars for harm reduction, a lack of visible long-term data, and "not in my backyard" (NIMBY) attitudes. Ultimately, the community remains caught between traditional punitive views and modern recovery models, leaving the overall success of these initiatives "undetermined" until more consistent, factual success stories are shared.

Critical Challenges and Barriers

Weaknesses of Current Efforts

Substance use efforts in Surry County are primarily hindered by a critical shortage of funding, manpower, and specialized service providers, leaving existing staff overwhelmed by the sheer scale of the crisis. This resource gap is compounded by fragmented community engagement and communication failures, as many residents remain unaware of available services like SCOSAR or feel disconnected from the issue entirely.

Structural barriers, such as a lack of weekend treatment options and the politicization of recovery efforts, further obstruct access for those in active addiction. Ultimately, the evolving nature of substance use requires a shift from isolated interventions toward a coordinated, long-term community response that uses success stories to overcome stigma and apathy.

Individual-Level Obstacles to Participation

Individuals in Surry County face a complex web of recovery barriers, with transportation emerging as the most persistent practical obstacle alongside unstable housing, unemployment, and a lack of basic financial resources. These physical hurdles are reinforced by deep-seated community stigma and a "don't air your dirty laundry" mentality, which often discourages people from seeking help or admitting they have a problem.

Psychological challenges, including low self-esteem and a lack of immediate motivation, are further exacerbated by systemic deficiencies like chronic provider understaffing and a general lack of family-centered support systems. Ultimately, these factors create a "revolving door" effect where a lack of supportive employers and a return to triggering peer groups frequently undermine long-

term recovery efforts.

Information Dissemination Challenges

Surry County residents primarily learn about substance use efforts through social media and word of mouth, though many respondents caution that these digital channels can often spread inaccurate information. Traditional outlets like the Mt. Airy News, local television, and church groups provide supplementary information, yet navigation remains difficult for those who do not proactively seek out details.

While information is available through local news, social media, and government meetings, dissemination remains fragmented because most citizens do not proactively seek out these resources unless a specific need arises. While multi-sector strategies—including job fairs, school programs, and SCOSAR initiatives—aim for broad reach, actual engagement is frequently limited to professional circles or those personally affected.

Substance use information is widely distributed across Surry County through a combination of traditional print materials in public spaces like schools and health departments, and a heavy reliance on digital platforms such as Facebook. Despite a diverse array of communication methods, the community faces significant hurdles in moving past passive information consumption toward the active, sustained participation needed to overcome historical stigmas and misinformation.

Community Engagement and Support

Leadership Support Patterns

When asked about how leadership demonstrates support for substance use efforts, responses revealed varying levels of engagement:

- **Passive Support:** Most or many leaders show at least passive support without being actively involved
- **Resource Allocation:** Some to many leaders support allocating resources to fund community efforts
- **Active Planning Role:** A few to some leaders play a key role as driving forces in planning, developing, or implementing efforts
- **Long-term Viability:** A few to some leaders play a key role in ensuring long-term viability through sustained funding

Surry County leaders primarily demonstrate support for expanded substance use efforts through passive verbal endorsements, publicly acknowledging the issue's severity without directly engaging in implementation. While a smaller group provides tangible support by budgeting for programs and expanding SCOSAR initiatives, most engagement remains moderate, consisting of board service and attendance at collaborative meetings.

Concrete actions, such as developing directives for service linkage or supporting Mobile Integrated Health teams, coexist with significant barriers like limited funding and the current level of political

popularity of the topic.

Community Member Engagement

The priority level for addressing substance use in Surry County is deeply polarized, driven largely by personal proximity to the crisis; those directly affected by family or workforce issues rate it a top priority, while those without personal ties often remain indifferent. Many residents view the issue primarily through a public safety lens, recognizing its heavy impact on crime and jail overcrowding as a reason for concern.

However, a significant gap exists between this verbal acknowledgment and actual participation, with community members often supportive of solutions in theory but unwilling to "work in the trenches" or commit tax dollars. Consequently, substance use must compete for limited resources and attention against more "positive" public projects like roads and schools. While most recognize the problem exists, passive support and resource constraints prevent the issue from becoming a unified, high-priority community mandate.

When asked about community member support patterns:

- **Passive Support:** Some to many community members show passive support without active involvement
- **Active Participation:** A few to some actually participate in developing, improving, or implementing efforts
- **Leadership Roles:** Very few (a few or none) play key leadership or driving force roles
- **Financial Support:** A few to some are willing to pay more in taxes to help fund efforts
- **The "Saying Rather Than Doing" Culture**

Surry County exhibits a "saying rather than doing" culture regarding substance use, where "many" to "most" residents offer verbal or social media support but very few engage in hands-on work. While the community broadly wants issues like crime and drugs "cleaned up," this desire rarely translates into active volunteering or a willingness to increase taxes or fees to fund solutions.

Financial and time constraints serve as major barriers, with many citizens supporting the theory of expansion only if it requires no personal sacrifice of money or effort. Consequently, sustained involvement is limited to a small fraction of the population, typically those who are highly educated on the issue or have been directly impacted by it personally. This gap between passive endorsement and active participation leaves the "heavy lifting" of community initiatives to a very small group of dedicated individuals.

Support for Expansion

About "some" to "many" community members would support expanding efforts in the community to address substance use issues. While a strong majority of Surry County residents and leaders support using available resources to address substance use, this willingness is largely driven by the recognition that the crisis is an economic deterrent and a blight on community quality of life. However, significant resistance remains among a subset of the population due to entrenched stigma and the "negative mindset" that the problem can be solved through law enforcement alone.

Support is often conditional, contingent upon the availability of funding and space, and a desire for tangible proof that programs are effective before committing further resources.

Despite these hurdles, stakeholders note that awareness has increased over the last decade, creating a foundation for collaborative action if efforts are paired with comprehensive public education. Ultimately, the community is described as generous and ready for change, provided that new initiatives do not force difficult trade-offs with other essential public services.

Opposition and Resistance

Sources of Opposition

Opposition to substance use initiatives in Surry County is primarily rooted in pervasive stigma and punitive attitudes, where many view addiction as a personal choice rather than a disease. While vocal opposition is rare, it frequently manifests as passive disengagement, characterized by declining attendance at events and a general "hands-off" approach to community solutions.

This resistance is further fueled by denial and minimization, as some leaders and residents avoid the topic to protect the county's public image or insist the issue be handled strictly through the criminal justice system. Additionally, financial resistance remains a hurdle, with critics often viewing investment in recovery programs as a waste of resources compared to other priorities like schools. Ultimately, this combination of public discourse and organizational silence creates a significant barrier to the empathy and funding required for effective intervention.

How Opposition Manifests

Rather than vocal protest, resistance usually manifests as passive avoidance, apathy, or a "not me, not mine" mentality that seeks to ignore the issue to maintain a specific community image. Financial criticism also plays a significant role, as some residents view investments in recovery as a waste of resources that should be redirected toward other local priorities.

While this opposition is often limited in scope, it remains persistent, fueled by social media biases and discomfort with addressing addiction as a collective community problem. Ultimately, this resistance is often a symptom of being uninformed about the complexities of addiction, creating a barrier to broader public engagement.

Tolerance and Acceptance

In Surry County, attitudes toward substance use range from a pragmatic resignation that the problem is an unavoidable reality to a "live and let live" mentality that views addiction as a private, individual choice. While cultural shifts have led to increased acceptance of marijuana use, tolerance for most other substance use remains quite low across the broader community.

Many residents, particularly those in older or faith-based demographics, continue to reject the idea of tolerance, often favoring punitive measures over harm reduction because they view addiction as a moral failing or a danger to public order. Even when people advocate for tolerance, they often do so inconsistently, frequently shifting their stance when the issue directly impacts their own families

or livelihoods.

Ultimately, while there is a growing understanding of the complexity of addiction, this has not translated into widespread social acceptance, leaving harm reduction efforts to contend with persistent stigma and a lingering desire for "tough love" responses.

Resources and Sustainability

Current Resource Availability

Community stakeholders assessed the availability of various resources that could be used to address substance use:

- Volunteers: A little to some volunteers available
- Financial Donations: A little to some donations from organizations/businesses
- Grant Funding: Some grant funding available
- Experts: Some to a lot of experts available
- Space: Some to a lot of space available

Funding Sources and Stability

Substance use initiatives in Surry County are supported by a diverse funding mix, including temporary opioid settlement funds, federal and state grants, county tax allocations, and private donations. While tax-based support is expected to persist as long as the crisis remains, there is significant anxiety surrounding the "temporary" nature of settlement money and the competitive, cyclical nature of grants.

Many stakeholders believe that long-term stability depends on the community's ability to prove program effectiveness through data and consistent advocacy to local commissioners. Furthermore, respondents noted that governmental funding is often "politically based," making it vulnerable to election outcomes and changing public priorities. Ultimately, maintaining these efforts will require a proactive, diversified strategy that shifts away from a reliance on finite settlement funds toward more sustainable local and federal commitments.

Efforts to Increase Resources

When asked about efforts to increase resources (on a scale of 1-5, where 1 is "no effort" and 5 is "great effort"), the average rating was 2.4, indicating modest but not intensive efforts. Specifically:

- Seeking Volunteers: Limited to modest effort
- Soliciting Donations: Limited to modest effort
- Writing Grant Proposals: Some to moderate effort
- Training Community Members: Limited to modest effort
- Recruiting Experts: Limited effort
- Awareness of Funding Proposals

The vast majority of community stakeholders are unaware of any specific funding proposals or action plans currently being submitted to address substance use in Surry County. While a small number of respondents recognized the existence of opioid settlement funds, this remains the only widely visible funding mechanism among those interviewed.

Awareness of active grant-seeking is largely limited to the activities of SCOSAR or specific federal teen programs, yet even informed individuals expressed confusion over how these funds are ultimately utilized. This pervasive lack of knowledge reveals a significant communication gap, as many stakeholders could only recall historical efforts rather than current initiatives. These findings highlight a critical need for increased transparency and more frequent reporting to ensure the community remains informed and supportive of local funding pursuits.

Policy Environment

Existing Policies and Practices

Surry County has established a robust framework of formal policies and collaborative partnerships, including a specialized accountability and drug court, SCOSAR, and workplace efforts. While these efforts are intended to apply universally, many stakeholders acknowledge a "lived reality" where enforcement and outcomes differ based on race, socioeconomic status, and "good ole boy" connections.

Practical disparities often emerge through unequal access to quality legal counsel and the heightened scrutiny of impoverished or minority populations, despite the formal principle of equality. Furthermore, while formal structures are dominant, there is a significant knowledge gap among the public regarding specific policies, leading to a reliance on informal community practices and harm reduction efforts like businesses carrying Narcan.

Ultimately, the community is divided between those who believe the system is fair and those who see systemic biases—such as disparate prison ratios—that prevent truly equitable policy application.

Policy Application

While 20 out of 29 community stakeholders affirm that substance use laws formally apply to everyone equally, a significant minority acknowledges that practical enforcement often varies based on socioeconomic status, race, and community connections. These respondents highlight that factors such as access to quality legal counsel, "good ole boy" networks, and systemic biases can lead to more critical scrutiny of younger, impoverished, or darker-skinned individuals.

Furthermore, vulnerabilities like economic desperation and geographic isolation create unique barriers that prevent certain populations from experiencing the same legal protections or recovery outcomes as more affluent citizens. Consequently, there is a clear tension in Surry County between the idealized principle of universal accountability and the lived reality where community reputation and privilege significantly influence how policies are actually experienced.

Need for Policy Expansion

Community stakeholders overwhelmingly agree on the need to expand substance use initiatives, prioritizing enhanced support services and public education over the creation of new laws. Key priorities include extending resources to smaller rural communities, expanding drug court programs as alternatives to incarceration, retaining existing jail based programming and providing practical assistance like transportation.

However, there is a significant disconnect between recognizing this need and knowing about actual implementation plans, with many respondents expressing uncertainty about specific strategies or timelines. While a small minority believes current resources are sufficient or that the primary barrier is individual resistance to treatment, the majority advocates for "out of the box" thinking to dismantle systemic barriers. Ultimately, the focus remains on optimizing existing legal frameworks through better awareness and refined service delivery rather than increasing regulation.

Community Views on Policies

Community views on substance use policies in Surry County are defined by a strong awareness of basic laws but a significant lack of understanding regarding broader, comprehensive policies. Most residents view these measures through a lens of personal safety and procedural order, often supporting enforcement only as long as it does not directly impact their own lives or families.

This conditional support reveals a deep philosophical divide between those who advocate for stricter punitive measures and those who recognize that the community cannot simply "jail its way out" of the crisis. Perceptions are further complicated by media misinformation and geographic disparities, which leave many residents in smaller communities feeling disconnected from resource planning. Ultimately, while the public generally favors policies that safeguard the community, a fragmented understanding of treatment-oriented goals prevents a unified approach to reform.

Evaluation and Planning

Use of Evaluation Data

Most respondents believe that evaluation data is actively used to refine substance use efforts, citing the use of risk assessments, SWOT analyses, and the sharing of success stories to guide program evolution. Organizations like SCOSAR and local EMS are recognized as leaders in this data-driven approach, using feedback to secure funding and develop more tailored services for the community.

Despite these professional successes, a significant gap in awareness exists among the public and even some stakeholders who remain unsure of how data is collected or applied. Ultimately, while evaluation helps temper misconceptions and drive improvements, the ability to fully act on these findings is often hindered by limited resources and a lack of integrated case management.

Future Planning Effort

Future planning in Surry County is anchored by the Surry Transition Project, a jail-based reentry initiative that provides justice-involved individuals with counseling, job training, and essential housing and transportation support. SCOSAR acts as the primary coordinator for these efforts, strategically managing opioid settlement funds and building partnerships across law enforcement, schools, and medical providers.

Emerging infrastructure, such as expanded EMS capacity and more modern detention facilities, allows for more integrated services and authentic community dialogue regarding long-term solutions. Despite these strategic advancements, significant communication gaps remain, highlighting the need for data-driven planning and increased public awareness to ensure programs can scale effectively.

Community Character and Context

Description of Surry County

Surry County is widely defined as a tight-knit, family-oriented rural community that prides itself on strong faith-based values and a warm, welcoming environment often compared to "Mayberry." While the county maintains a traditional, conservative culture that can be resistant to change, it is currently in a transition period as it adapts to new ways of thinking and evolving societal challenges. This progress is complicated by significant economic hurdles, including a decline in local industry, poverty, and a shortage of affordable housing, which have impacted workforce stability and population growth. Despite these constraints, the county faces a pervasive struggle with substance use and mental health that affects nearly every aspect of local life and infrastructure.

Ultimately, residents remain deeply proud of their community, balancing a realistic acknowledgment of these widespread "wicked" problems with a steadfast desire to preserve the area's identity as a safe and caring place to live.

Strategic Priorities and Recommendations

The Empathy Gap and Cultural Transformation

Community stakeholders emphasize that progress depends on collaborative networking and formal leadership acting as a catalyst for tough, coordinated conversations. While many residents believe they understand the issue, a significant "empathy gap" persists; most view addiction through a judgmental lens until it personally affects their own families.

To counter this, stakeholders advocate for aggressive outreach—ranging from business signage to presence at local festivals—to humanize the crisis and highlight available resources. However, the response must remain adaptive, as the "flavor of the month" shifts between alcohol, meth, and fentanyl, requiring a workforce that can address deep-rooted social issues and service gaps. Ultimately, success requires moving past simplistic solutions to embrace a complex, compassionate approach that treats substance use as a shared community responsibility rather

than an isolated criminal problem.

System-Level Transformation Needs

The evolving nature of substance use requires a shift from isolated interventions toward a coordinated, long-term community response that uses success stories to overcome stigma and apathy. The community needs to move from judgment to empathy, from avoidance to engagement, and from fragmented efforts to coordinated, sustainable systems of care.

Success will be measured not just by program existence, but by the community's ability to transform passive community support into active engagement through sustained education, data-driven advocacy, and addressing the practical barriers that prevent both individuals and community members from fully participating in recovery solutions.

Conclusion

The Tri-Ethnic Community Readiness Assessment reveals Surry County at a critical juncture—possessing foundational infrastructure and genuine concern, yet struggling with resource constraints, persistent stigma, and the gap between awareness and action. SCOSAR and partner organizations have built a robust foundation, but transforming passive community support into active engagement requires sustained education, data-driven advocacy, and addressing the practical barriers that prevent both individuals and community members from fully participating in recovery solutions.

The path forward demands collaborative, adaptive, and compassionate approaches that recognize substance use as a complex public health crisis affecting all socioeconomic levels, requiring long-term commitment rather than quick fixes. Success will be measured not just by program existence, but by the community's ability to move from judgment to empathy, from avoidance to engagement, and from fragmented efforts to coordinated, sustainable systems of care.

Based on the Community Readiness Model's framework, Surry County's assessment provides the diagnostic information necessary to make informed decisions about appropriate next steps and strategies that will be most effective given current community conditions. By understanding where the community falls across the five dimensions of readiness—Community Knowledge of Efforts, Leadership, Community Climate, Community Knowledge of the Issue, and Resources—stakeholders can develop targeted interventions that match the community's current capacity and systematically build toward higher levels of sustainable action.

This is not simply an academic exercise but a strategic roadmap for avoiding wasted resources, building on existing strengths, addressing critical gaps before they undermine implementation, developing culturally appropriate strategies, creating realistic timelines, and securing stakeholder buy-in through a data-driven, systematic approach to community change.

Tri-Ethnic Community Readiness for Community Change Interview

Forty (40) questions were included in the Tri-Ethnic Community Readiness for Community Change Interview Questionnaire with thirty (30) Surry County Residents being interviewed. Responses were reported using the following framework:

- Actual Question Presented to Interviewer
- Number of Comments Provided
- Common Themes Presented
- Collected Responses

*Please note that some interviewees did not answer all questions.

Segment Representation of Interviewees

A total of thirty (30) individuals were interviewed representing the following community segments:

- Business
- Farming, Landlord
- Civic or Volunteer Groups
- Community Groups
- Education
- Parents
- Healthcare
- Lived Experiences
- Local Management Entity
- Law Enforcement
- Local Officials
- Recovery Community
- Religious
- Social Services
- State/Local/Govt
- Payers
- Youth Serving Agencies
- Veteran

Scaling Question Results

Four (4) scaling questions were included as part of the *Community Readiness for Community Change Questionnaire*. The calculated questions are provided below as well as within the actual question on subsequent pages.

Scaling questions were scored using a simple Mean, Median, and Mode structure. Definitions of each term are provided below. The Mean (or average) of the values submitted are the most important calculation for the purposes of the current publication.

Mean	The mean average of a data set is found by adding all numbers in the data set and then dividing by the number of values in the set.
Median	The middle value when a data set is ordered from least to greatest.
Mode	The number that occurs most often in a data set.

Definition of Leadership: Referring to those who could affect the outcome of the Substance Use Issue and those who have influence in the community and/or who lead the community in helping achieve its goals.

Question

How much of a concern is substance use to members of the Surry Community?

Scale of 1 to 10 with 1 being “not a concern at all” and 10 being “a very great concern”.

Mean	7.5
Median	8
Mode	8

Question

How much of a concern is substance use to the leadership of Surry County?

“Scale of 1 to 10 with 1 being “not a concern at all” and 10 being “a very great concern”.

Mean	8.1
Median	8
Mode	10

Question

How much do community members know about substance use?

“Scale of 1 to 10 with 1 being “not a concern at all” and 10 being “a very great concern”.

Mean	5
Median	5
Mode	4

Question

How much effort are community members and/or leadership putting into doing things to increase resources related to substance use in your community?

“Scale of 1 to 5, where 1 is “no effort” and 5 is “great effort”.

Mean	2.4
Median	2
Mode	1

Interview Overview Question

For the following question, please answer, keeping in mind your perspective of what community members believe and not what you personally believe.

On a scale from 1-10, how much of a concern is substance use to members of Surry Community with 1 being “not a concern at all” and 10 being “a very great concern”?

Calculated Scores

Mean	7.5
Median	8
Mode	8

Surry County community members generally perceive leadership as taking substance use seriously, with the most recent survey showing a heavy concentration of concern ratings between 8 and 10. Qualitative feedback highlights that while initiatives like the Substance Abuse Recovery Office (SCOSAR) prove genuine investment, concern varies among individual leaders based on their personal experiences and age. Ultimately, while leadership is seen as recognizing the issue's gravity, community members believe competing county priorities and resource limitations prevent it from receiving the absolute maximum level of urgency required.

Can you tell me why you think it's at that level?

Substance use has broadly impacted the community, with nearly everyone having experienced loss or knowing someone affected, touching all aspects of life including families, workplaces, and safety. While there is general recognition that substance use is a problem—evidenced by news coverage, rising overdose deaths, and it is becoming a major political topic—awareness exists on a continuum, with many people not understanding the full extent unless directly affected, and significant denial persists despite worsening conditions over the past five years. Cultural stigma and bias remain pervasive, causing many who struggle to hide their challenges, and while concern is high (especially among non-users worried about safety and the proximity of available substances), only a small portion actively seek to help people recover. Surry County residents acknowledge the problem will not disappear, with law enforcement managing rather than fixing it, as Narcan use has exploded over 20 years and the crisis has progressed to unprecedented levels affecting employment, families, and every aspect of county life.

Community Knowledge of Efforts

This section asks about current community efforts to address substance use. By efforts, we mean any programs, activities, or services in your community that address substance use.

Are there efforts in the county that address substance use?

All 30 community stakeholders surveyed confirm that substance use initiatives exist in Surry County, frequently citing SCOSAR, Daymark Recovery Services, and various detention-center and school-based programs as key contributors. While collaborative efforts between government agencies, EMS, and faith-based groups like Hope Valley are widely recognized, many respondents still lack awareness of specific program details beyond these prominent entities. Consequently, residents often feel they would need to contact the Department of Social Services or emergency services directly to navigate available resources. Despite this acknowledged progress, stakeholders remain concerned that current efforts are under-resourced and insufficient, highlighting a persistent need for expanded capacity and more comprehensive service delivery.

Can you briefly describe each of these?

Surry County's substance use efforts are anchored by SCOSAR, which serves as a central hub for comprehensive resources, including recovery-to-work services, transportation programs, and public awareness campaigns. These initiatives are supported by a network of faith-based organizations and local civic groups that provide essential transitional housing, peer support, and spiritual encouragement. Clinical treatment needs are addressed by professional mental health providers offering outpatient counseling and Medication-Assisted Treatment (MAT), while specialized clinics handle long-term addiction recovery. Furthermore, law enforcement and emergency services play a critical role through integrated partnerships that facilitate overdose response, jail-based treatment, and school-based prevention education.

How long have each of these efforts been going on?

While some long-standing recovery services like AA and Hope Valley have operated in Surry County for decades, the Surry County Substance Abuse Recovery Office (SCOSAR) was established more recently, in 2017, in response to heightened public attention regarding local overdose rates. Over the past decade, the county has launched additional initiatives, including detention-center based programs and Recovery to Work connections, with public visibility rising significantly in the last three years. Despite these long-term and newer efforts, a recurring theme is that many residents remain unaware of how long these programs have existed or what services are specifically available. This ongoing knowledge gap persists even as community awareness is gradually improving through more coordinated partnerships and increased media engagement.

Who does each of these efforts serve (e.g., a certain age group, ethnicity, etc.)?

Most substance use initiatives in Surry County are designed to be universally accessible, with most providers serving all community members regardless of background. While many programs maintain this inclusive approach, several are tailored to specific demographics, such as justice-involved adults, at-risk youth, the unhoused, and individuals seeking employment through entities like The Children's Center and New Hope New Beginnings. Despite these efforts, stakeholders identified significant service gaps, particularly for youth transitioning out of high school into the

court system and adults who fall outside of existing prevention frameworks. Ultimately, while the county offers a diverse array of targeted programming, a lack of consistent coverage for these specific vulnerable groups remains a critical challenge.

About how many community members are aware of each of the following aspects of the efforts – non, a few, some, many, or most?

- ***Have heard of efforts?***

Frequency Distribution **27 total responses**. Below is the frequency count for each quantifier term:

Quantifier Term	Frequency	Frequency	Percentage (%)
None	1	1	3.7%
A few	5	12	18.5%
Some	12	10	44.4%
Many	8	3	29.6%
Most	1	0	3.7%
Total	27	26	100%

- ***Know the purpose of the effects?***

Frequency Distribution **26 total responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	1	3.8%
A few	2	12	46.2%
Some	3	10	38.5%
Many	4	3	11.5%
Most	5	0	0.0%
Total	—	26	100%

- ***Know who the efforts are for?***

Frequency Distribution **28 total responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	7.1%
A few	2	11	39.3%
Some	3	11	39.3%
Many	4	4	14.3%
Most	5	0	0.0%
Total	—	28	100%

Thinking back to your answers, why do you think members of your community have this amount of knowledge?

The primary barrier to community awareness of substance use efforts in Surry County is an "out of sight, out of mind" mentality, where residents often remain disengaged unless personally impacted

by the issue. This detachment is reinforced by a pervasive stigma and a conscious avoidance of the topic, with some community members fearing that increased knowledge brings a greater responsibility to help. While information is available through local news, social media, and government meetings, dissemination remains fragmented because most citizens do not proactively seek out these resources unless a specific need arises. Despite these challenges, there is a growing trend toward collaborative dialogue and increased awareness within professional circles, suggesting a slow shift away from historical stereotypes and toward a more informed public.

Are there misconceptions or incorrect information among community members about the current efforts? If yes: What are these?

The most pervasive misconception in Surry County is a widespread lack of factual knowledge regarding the true depth of substance use issues and the specific recovery resources available to the public. Many residents continue to view addiction as a simple moral choice rather than a complex disease, leading to harmful stigmas and the dismissive belief that treatment should be a "fast fix." Contradictory perceptions further complicate the issue, with community members often split between thinking help is too difficult to access or erroneously believing that local funding is creating a "haven" for further drug use. These systemic misunderstandings are fueled by isolation and confusion highlighting a critical need for enhanced community networking to replace myths with a realistic understanding of how addiction impacts entire families and the broader community.

How do community members learn about the current efforts?

Surry County residents primarily learn about substance use efforts through social media and word of mouth, though many respondents caution that these digital channels can often spread inaccurate information. Traditional outlets like the *Mt. Airy News*, local television, and church groups provide supplementary information, yet navigation remains difficult for those who do not proactively seek out details. While multi-sector strategies—including job fairs, school programs, and SCOSAR initiatives—aim for broad reach, actual engagement is frequently limited to professional circles or those personally affected. Ultimately, despite a diverse array of communication methods, the community faces significant hurdles in moving past passive information consumption toward the active, sustained participation needed to overcome historical stigmas and misinformation.

Do community members view current efforts as successful?

Community perceptions of substance use efforts in Surry County are deeply divided, often split between "informed" stakeholders who see progress and a public that primarily observes a "revolving door" of addiction. Positive feedback highlights the value of the Substance Abuse Recovery Office (SCOSAR), increased compassion, and the availability of tangible resources like transportation and workforce assistance. However, these successes are frequently overshadowed by vocal criticism regarding the use of tax dollars for harm reduction, a lack of visible long-term data, and "not in my backyard" (NIMBY) attitudes. Ultimately, the community remains caught between traditional punitive views and modern recovery models, leaving the overall success of these initiatives "undetermined" until more consistent, factual success stories are shared.

What are the obstacles to individuals participating in these efforts?

Individuals in Surry County face a complex web of recovery barriers, with transportation emerging as the most persistent practical obstacle alongside unstable housing, unemployment, and a lack of basic financial resources. These physical hurdles are reinforced by deep-seated community stigma and a "don't air your dirty laundry" mentality, which often discourages people from seeking help or admitting they have a problem. Psychological challenges, including low self-esteem and a lack of immediate motivation, are further exacerbated by systemic deficiencies like chronic provider understaffing and a general lack of family-centered support systems. Ultimately, these factors create a "revolving door" effect where a lack of supportive employers and a return to triggering peer groups frequently undermine long-term recovery efforts.

What are the strengths of these efforts?

The strength of Surry County's substance use efforts is rooted in a deeply compassionate, human-centered approach led by professionals who prioritize empathy and advocate for the humanity of those in crisis. This dedication has built a robust infrastructure of accessible services, including the Post Overdose Response Team and Surry Transition Project programs, which provide practical supports like overdose response and detention center focused programming, to help individuals overcome systemic barriers. These efforts are further bolstered by strong collaborative backing from county commissioners and school systems, ensuring that prevention and education initiatives reach a wide audience. Ultimately, the county has created a stable, solution-focused ecosystem where growing community awareness and cross-agency partnerships provide a foundation of hope for long-term recovery.

What are the weaknesses of these efforts?

Substance use efforts in Surry County are primarily hindered by a critical shortage of funding, manpower, and specialized service providers, leaving existing staff overwhelmed by the sheer scale of the crisis. This resource gap is compounded by fragmented community engagement and communication failures, as many residents remain unaware of available services like SCOSAR or feel disconnected from the issue entirely. Structural barriers, such as a lack of weekend treatment options and the politicization of recovery efforts, further obstruct access for those in active addiction. Ultimately, the evolving nature of substance use requires a shift from isolated interventions toward a coordinated, long-term community response that uses success stories to overcome stigma and apathy.

Are the evaluation results being used to make changes in efforts or to start new ones?

Most respondents believe that evaluation data is actively used to refine substance use efforts, citing the use of risk assessments, SWOT analyses, and the sharing of success stories to guide program evolution. Organizations like SCOSAR and local EMS are recognized as leaders in this data-driven approach, using feedback to secure funding and develop more tailored services for the community. Despite these professional successes, a significant gap in awareness exists among the public and even some stakeholders who remain unsure of how data is collected or applied. Ultimately, while evaluation helps temper misconceptions and drive improvements, the ability to fully act on these findings is often hindered by limited resources and a lack of integrated case management.

What planning for additional efforts to address substance use is going on in Surry County?

Future planning in Surry County is anchored by the Surry Transition Project, a jail-based reentry initiative that provides justice-involved individuals with counseling, job training, and essential housing and transportation support. SCOSAR acts as the primary coordinator for these efforts, strategically managing opioid settlement funds and building partnerships across law enforcement, schools, and medical providers. Emerging infrastructure, such as expanded EMS capacity and more modern detention facilities, allows for more integrated services and authentic community dialogue regarding long-term solutions. Despite these strategic advancements, significant communication gaps remain, highlighting the need for data-driven planning and increased public awareness to ensure programs can scale effectively.

Is anyone in (community) trying to get something started to address (issue)? Can you tell me about that?

When asked if anyone in the community is addressing the local substance use issue, six out of seven respondents were completely unaware of any ongoing efforts. Only one participant could identify specific groups like SCOSAR, yet they noted that these data-driven initiatives often fail to change public perception or shift deep-seated community attitudes. This pattern reveals a significant disconnect where organizational activities remain invisible to the broader public, hindering the development of vital social support and volunteer networks. Ultimately, this awareness gap highlights a critical failure in communication and outreach rather than a lack of actual initiatives, leaving the community disempowered and disconnected from the solutions being developed.

Leadership

How does leadership in Surry County perceives substance use? By leadership, we are referring to those who could affect the outcome of this issue and those who have influence in the community and/or who leads the community in helping it achieve its goals.

Using a scale from 1-10, how much of a concern is substance use to the leadership of Surry County with 1 being “not a concern at all” and 10 being “a very great concern”?

Mean	8.1
Median	8
Mode	10

Can you tell me why you think it’s at that level?

Surry County leadership recognizes substance use as a pervasive crisis that impacts nearly every home, affecting everything from public safety and healthcare costs to workforce productivity and economic development. While officials have shown support through resource allocation and initiatives like SCOSAR, their response is often constrained by limited funding, competing governance priorities, and the political sensitivity of being labeled a "substance use problem area." Consequently, there is a "hands-off" dynamic where sustained attention tends to wane when visible crisis indicators, like overdose rates, improve. Furthermore, a gap exists between general awareness and technical understanding, as many leaders may not fully grasp the data or addiction science necessary to implement the most effective policy responses. This complex environment requires a sustained, coordinated effort that transcends simple public relations to address the deep-rooted social and economic drivers of the epidemic.

How much of a priority is addressing this substance use to leadership? Can you explain why you say this?

Community members’ assessments of how leadership prioritizes substance use are deeply divided, with most ratings clustering between 5 and 7 out of 10. While leaders acknowledge the crisis’s massive impact on the local economy and public safety, this concern must constantly compete with other fundamental priorities like education, jobs, and general public services. A significant "out of sight, out of mind" dynamic exists, where leadership attention and political will often fluctuate based on visible crisis indicators like overdose death rates. Despite positive steps such as the funding of SCOSAR and cross-system partnerships with law enforcement, respondents remain skeptical about whether rhetoric translates into the long-term, comprehensive action needed to address root causes like housing and mental health. Ultimately, addressing substance use is viewed as a "wicked problem" that leadership recognizes as serious but struggles to manage amid resource constraints, political calculations, and the complexity of the recovery landscape.

I'm going to read a list of ways that leadership might show its support or lack of support for efforts to address substance use. Can you please tell me whether none, a few, some, many or most leaders would or do show support in this way? Also, feel free to explain your responses as we move through the list.
How many leaders...

- **At least passively support efforts without necessarily being active in that support**
 Frequency Distribution **27 responses**. Below is the complete frequency count:

Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	7.4%
A few	2	10	37.0%
Some	3	11	40.7%
Many	4	4	14.8%
Most	5	0	0.0%
Total	—	27	100%

- **Support allocating resources to fund community effort**
 Frequency Distribution **28 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	7.1%
A few	2	10	35.7%
Some	3	12	42.9%
Many	4	4	14.3%
Most	5	0	0.0%
Total	—	28	100%

- **Play a key role as a leader or driving force in planning, developing, or implementing efforts? (Prompt: How do they do that?)**
 Frequency Distribution **27 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	7.4%
A few	2	10	37.0%
Some	3	11	40.7%
Many	4	4	14.8%
Most	5	0	0.0%
Total	—	27	100%

- **Play a key role in ensuring the long-term viability of community efforts, for example by allocating long-term funding?**

Frequency Distribution **27 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage
None	1	2	7.4%
A few	2	10	37.0%
Some	3	11	40.7%
Many	4	4	14.8%
Most	5	0	0.0%
Total	—	27	100%

- **Does the leadership support expanded efforts in the community to address (substance use?)**

Frequency Distribution **27 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	7.4%
A few	2	10	37.0%
Some	3	11	40.7%
Many	4	4	14.8%
Most	5	0	0.0%
Total	—	27	100%

If yes, how do they show this support? For example, by passively supporting, by being involved in developing the efforts, or by being a driving force or key players in achieving these expanded efforts?

Surry County leaders primarily demonstrate support for expanded substance use efforts through passive verbal endorsements, publicly acknowledging the issue’s severity without directly engaging in implementation. While a smaller group provides tangible support by budgeting for programs and expanding SCOSAR initiatives, most engagement remains moderate, consisting of board service and attendance at collaborative meetings. Concrete actions, such as developing directives for service linkage or supporting Mobile Integrated Health teams, coexist with significant barriers like limited funding and the current level of political popularity of the topic. Ultimately, many leaders maintain a cautious stance, often hoping for external solutions while expressing reservations about specific interventions like harm reduction or even jail-based programs. This pattern reveals a leadership landscape where symbolic support is common, but active, resource-backed commitment is limited by political and financial constraints.

Who are groups/leaders that are supportive of addressing this issue in your community?

- SCOSAR, community groups/people
- Some businesses- Wayne/Sanderson Farms, Rubberlogix, Work Force Unlimited (served on panel).
- Sheriff's department, employees, schools, churches
- Church leaders, community group leaders
- Law enforcement, first responder groups, schools, recovery-friendly employees.
- Commissioners, community advocates, business leaders
- Nonprofits, religious leaders, county government, other community leaders affected by SU.
- Elected and administration of county leaders, educational municipalities- challenge in how to best help.
- County Commissioners, EMS, SCOSAR
- Churches, civic organizations, local media, schools
- Don't know of any actively
- Not certain
- All leaders, DAC
- Churches, EMS
- County manager, county commissioners, all county leaders.
- Commissioners, SCOSAR department employees
- Law enforcement, faith community. Some- quietly support.
- County department leads, commissioners- "all ships rise together."
- SCOSAR, Sheriff's office, church groups/chaplin
- Any/most business leaders. Supportive civic leaders
- EMS, local health department, a few commissioners
- SCOSAR leadership, non-profit groups
- Medical community, law enforcement, county government leaders
- SCOSAR
- Program managers, county department heads, some civic groups, commissioners (still lack of understanding fully).
- County managers office, Local non-profit leaders, Children Center leadership, Hospital leadership
- Boards of commissioners, Recovery friendly employees. Law enforcement, judicial system (Accountability and Drug Court).
- SCOSAR, community groups/people
- Education, DSS, DJJ, law enforcement, SFoY, children's center, hospitals
- County commissioners, SCOSAR, businesses, youth leadership, SFoY, SROs (DARE)

Are there groups/leaders who might oppose addressing (substance abuse)? How do they show their opposition?

Opposition to substance use initiatives in Surry County is primarily rooted in pervasive stigma and punitive attitudes, where many view addiction as a personal choice rather than a disease. While vocal opposition is rare, it frequently manifests as passive disengagement, characterized by declining attendance at events and a general "hands-off" approach to community solutions. This

resistance is further fueled by denial and minimization, as some leaders and residents avoid the topic to protect the county's public image or insist the issue be handled strictly through the criminal justice system. Additionally, financial resistance remains a hurdle, with critics often viewing investment in recovery programs as a waste of resources compared to other priorities like schools. Ultimately, this combination of public discourse and organizational silence creates a significant barrier to the empathy and funding required for effective intervention.

Community Climate

For the following questions, again please answer keeping in mind your perspective of what community members believe and not what you personally believe.

How much of a priority is addressing this issue to community members? Can you explain your answer?

The priority level for addressing substance use in Surry County is deeply polarized, driven largely by personal proximity to the crisis; those directly affected by family or workforce issues rate it a top priority, while those without personal ties often remain indifferent. Many residents view the issue primarily through a public safety lens, recognizing its heavy impact on crime and jail overcrowding as a reason for concern. However, a significant gap exists between this verbal acknowledgment and actual participation, with community members often supportive of solutions in theory but unwilling to "work in the trenches" or commit tax dollars. Consequently, substance use must compete for limited resources and attention against more "positive" public projects like roads and schools. Ultimately, while most recognize the problem exists, passive support and resource constraints prevent the issue from becoming a unified, high-priority community mandate.

I'm going to read a list of ways that community members might show their support or their lack of support for community efforts to address substance use. Can you Please tell me whether none, a few, some, many or most community members would or do show their support in this way? Also, feel free to explain your responses as we move through the list.

How many community members...

- **At least passively support community efforts without being active in that support.** Frequency Distribution **30 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	0	0.0%
A few	2	2	6.7%
Some	3	9	30.0%
Many	4	11	36.7%
Most	5	8	26.7%
Total	—	30	100%

- **Participate in developing, improving or implementing efforts, for example by attending group meetings that are working toward these efforts?** Frequency Distribution **30 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	0	0.0%
A few	2	14	46.7%
Some	3	14	46.7%
Many	4	2	6.7%

Most	5	0	0.0%
Total	—	30	100%

- **Play a key role as a leader or driving force in planning, developing, or implementing efforts? (Prompt: How do they do that?)**

Frequency Distribution **32 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	6.3%
A few	2	22	68.8%
Some	3	4	12.5%
Many	4	2	6.3%
Most	5	2	6.3%
Total	—	32	100%

- **Are willing to pay more (for example, in taxes) to help fund community efforts?**

Frequency Distribution **30 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	6.7%
A few	2	26	86.7%
Some	3	2	6.7%
Many	4	0	0.0%
Most	5	0	0.0%
Total	—	30	100%

About how many community members would support expanding efforts in the community to address substance use issues? Would you say none, a few, some, many or most? If most, how might they show this support? For example, by passively than none: supporting or by being actively involved in developing the efforts?

Surry County exhibits a "saying rather than doing" culture regarding substance use, where "many" to "most" residents offer verbal or social media support but very few engage in hands-on work. While the community broadly wants issues like crime and drugs "cleaned up," this desire rarely translates into active volunteering or a willingness to increase taxes or fees to fund solutions. Financial and time constraints serve as major barriers, with many citizens supporting the theory of expansion only if it requires no personal sacrifice of money or effort. Consequently, sustained involvement is limited to a small fraction of the population, typically those who are highly educated on the issue or have been directly impacted by it personally. This gap between passive endorsement and active participation leaves the "heavy lifting" of community initiatives to a very small group of dedicated individuals.

Are there community members who oppose or might oppose addressing substance use? How do or will they show their opposition?

Opposition to substance use initiatives in Surry County is primarily driven by the belief that addiction is a moral failing or personal choice rather than a medical condition, leading many to favor punitive "tough love" approaches. Rather than vocal protest, this resistance usually manifests as passive avoidance, apathy, or a "not me, not mine" mentality that seeks to ignore the issue to maintain a specific community image. Financial criticism also plays a significant role, as some residents view investments in recovery as a waste of resources that should be redirected toward other local priorities.

While this opposition is often limited in scope, it remains persistent, fueled by social media biases and discomfort with addressing addiction as a collective community problem. Ultimately, this resistance is often a symptom of being uninformed about the complexities of addiction, creating a barrier to broader public engagement.

Are there any circumstances in which members of Surry County might think that this issue should be tolerated? Please explain.

In Surry County, attitudes toward substance use range from a pragmatic resignation that the problem is an unavoidable reality to a "live and let live" mentality that views addiction as a private, individual choice. While cultural shifts have led to increased acceptance of marijuana use, tolerance for most other substance use remains quite low across the broader community. Many residents, particularly those in older or faith-based demographics, continue to reject the idea of tolerance, often favoring punitive measures over harm reduction because they view addiction as a moral failing or a danger to public order.

Even when people advocate for tolerance, they often do so inconsistently, frequently shifting their stance when the issue directly impacts their own families or livelihoods. Ultimately, while there is a growing understanding of the complexity of addiction, this has not translated into widespread social acceptance, leaving harm reduction efforts to contend with persistent stigma and a lingering desire for "tough love" responses.

Describe Surry County.

Surry County is widely defined as a tight-knit, family-oriented rural community that prides itself on strong faith-based values and a warm, welcoming environment often compared to "Mayberry." While the county maintains a traditional, conservative culture that can be resistant to change, it is currently in a transition period as it adapts to new ways of thinking and evolving societal challenges. This progress is complicated by significant economic hurdles, including a decline in local industry, poverty, and a shortage of affordable housing, which have impacted workforce stability and population growth.

Despite these constraints, the county faces a pervasive struggle with substance use and mental health that affects nearly every aspect of local life and infrastructure. Ultimately, residents remain deeply proud of their community, balancing a realistic acknowledgment of these widespread "wicked" problems with a steadfast desire to preserve the area's identity as a safe and caring place to live.

Knowledge About the Issue

On a scale of 1 to 10 where a 1 is no knowledge and a 10 is detailed knowledge, how much do community members know about Substance Use?

Mean	5
Median	5
Mode	4

Why do you say it's a _____?

Community knowledge regarding substance use in Surry County varies dramatically, largely determined by an individual's personal or professional proximity to the crisis rather than general public awareness. While most residents possess a surface-level recognition that substance use exists, a significant gap remains between this baseline awareness and a true understanding of the complex socio-economic, medical, and criminal justice impacts of addiction. Media exposure has certainly increased the community's familiarity with the topic over time, but this has often failed to cultivate a deeper grasp of addiction mechanisms or the nuances of effective recovery processes. Ultimately, detailed knowledge remains concentrated among those directly "in the trenches," such as healthcare workers and affected families, while the average citizen lacks the specific education required to move beyond stigmatic or simplistic views of the issue.

- **Substance use, in general (Prompt as needed with "nothing, a little, some or a lot").** Frequency Distribution **30 responses.** Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	10	33.3%
Some	3	15	50.0%
A lot	4	5	16.7%
Total	—	30	100%

- **The signs and symptoms** Frequency Distribution **30 responses.** Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	16	53.3%
Some	3	12	40.0%
A lot	4	2	6.7%
Total	—	30	100%

- **The causes**

Frequency Distribution **28 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	3	10.7%
A little	2	18	64.3%
Some	3	6	21.4%
A lot	4	1	3.6%
Total	—	28	100%

- **The consequences**

Frequency Distribution **29 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	6	20.7%
Some	3	16	55.2%
A lot	4	7	24.1%
Total	—	29	100%

- **How much substance use occurs locally (or the number of people living with substance use in your community).**

Frequency Distribution **30 response**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	7	23.3%
Some	3	16	53.3%
A lot	4	7	23.3%
Total	—	30	100

- **What can be done to prevent or treat substance use?**

Frequency Distribution **29 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	6	20.7%
Some	3	16	55.2%
A lot	4	7	24.1%
Total	—	29	100%

- **The effects of substance use on family and friends**

Frequency Distribution **29 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
Nothing	1	0	0.0%
A little	2	6	20.7%
Some	3	16	55.2%
A lot	4	7	24.1%
Total	—	29	100%

What are the misconceptions among community members about substance use, e.g., why it occurs, how much it occurs locally, or what the consequences are?

Many community members in Surry County hold deep-seated misconceptions, most notably the belief that addiction is a moral failing or a personal choice that "good people" can simply stop if they decide to. These stakeholders frequently stereotype substance use as an issue exclusive to lower-income or marginalized populations, fostering a "it could never happen here" mentality that blinds them to the crisis's prevalence across all socioeconomic levels. Furthermore, there is a pervasive misunderstanding of recovery, with many residents viewing treatment as a quick, one-time fix rather than a complex, long-term medical process. These persistent myths, fueled by a lack of education and a preference for turning a blind eye, prevent the community from seeing the true scope of substance use and hinder the adoption of comprehensive, evidence-based solutions.

What type of information is available in Surry County about substance use (e.g., newspaper articles, brochures, posters??)

Substance use information is widely distributed across Surry County through a combination of traditional print materials in public spaces like schools and health departments, and a heavy reliance on digital platforms such as Facebook. Local news media serves as a consistent source of information, though coverage tends to focus predominantly on negative incident reports—such as arrests and overdoses—rather than highlighting prevention or recovery success stories. Additionally, organizations like SCOSAR provide robust online educational programming and resources, yet many residents remain unaware of these tools or are reluctant to actively seek them out. Ultimately, while a substantial volume of information is technically accessible, its effectiveness is hindered by inconsistent community-wide engagement and the necessity for individuals to proactively search for these resources rather than encountering them in daily life.

Do community members access and/or use this information?

Substance use information is widely distributed across Surry County through a combination of traditional print materials in public spaces like schools and health departments, and a heavy reliance on digital platforms like Facebook. Local news media serves as a primary, albeit often negative, source of information by focusing predominantly on incident reports such as arrests and overdose statistics rather than recovery successes. Additionally, specialized organizations like SCOSAR offer robust online resources and educational programming, though many residents remain unaware of these tools or are reluctant to actively seek them out. Ultimately, while a substantial volume of information is technically accessible, its impact is hindered by inconsistent

community-wide awareness and a tendency for the public to miss prevention resources that require proactive searching.

How are current efforts funded? Is this funding likely to continue in the future?

Substance use initiatives in Surry County are supported by a diverse funding mix, including temporary opioid settlement funds, federal and state grants, county tax allocations, and private donations. While tax-based support is expected to persist as long as the crisis remains, there is significant anxiety surrounding the "temporary" nature of settlement money and the competitive, cyclical nature of grants. Many stakeholders believe that long-term stability depends on the community's ability to prove program effectiveness through data and consistent advocacy to local commissioners. Furthermore, respondents noted that governmental funding is often "politically based," making it vulnerable to election outcomes and changing public priorities. Ultimately, maintaining these efforts will require a proactive, diversified strategy that shifts away from a reliance on finite settlement funds toward more sustainable local and federal commitments.

- **Financial donations from organizations and/or businesses?**

Frequency Distribution **29 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	1	3.3%
A little	2	14	46.7%
Some	3	12	40.0%
A lot	4	3	10.0%
Total	—	30	100%

- **Grant funding?**

Frequency Distribution **29 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	2	6.9%
A little	2	2	6.9%
Some	3	19	65.5%
A lot	4	6	20.7%
Total	—	29	100%

- **Experts?**

Frequency Distribution **30 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	1	3.3%
A little	2	17	56.7%
Some	3	10	33.3%
A lot	4	2	6.7%
Total	—	30	100%

- **Space?**

Frequency Distribution **30 responses**. Below is the complete frequency count:

Quantifier Term	Ordinal Value	Frequency	Percentage (%)
None	1	1	3.3%
A little	2	13	43.3%
Some	3	11	36.7%
A lot	4	5	16.7%
Total	—	30	100%

Would community members and leadership support using these resources to address substance use issues? Please explain.

While a strong majority of Surry County residents and leaders support using available resources to address substance use, this willingness is largely driven by the recognition that the crisis is an economic deterrent and a blight on community quality of life. However, significant resistance remains among a subset of the population due to entrenched stigma and the "negative mindset" that the problem can be solved through law enforcement alone. Support is often conditional, contingent upon the availability of funding and space, and a desire for tangible proof that programs are effective before committing further resources. Despite these hurdles, stakeholders note that awareness has increased over the last decade, creating a foundation for collaborative action if efforts are paired with comprehensive public education. Ultimately, the community is described as generous and ready for change, provided that new initiatives do not force difficult trade-offs with other essential public services.

- **Seeking volunteers for current or future efforts to address substance use issues in the community?**

Frequency Distribution **30 responses**. Below is the complete frequency count:

Score	Label	Frequency	Percentage (%)
1	No effort	5	16.7%
2	A little effort	9	30.0%
3	Some effort	12	40.0%
4	Considerable effort	1	3.3%
5	A great effort	3	10.0%
Total	—	30	100%

- **Soliciting donations from businesses or other organizations to fund current or expanded community efforts?**

Frequency Distribution **30 responses**. Below is the complete frequency count:

Rating	Meaning	Frequency	Percentage (%)
1	No effort	10	33.3%
2	Little effort	8	26.7%
3	Moderate effort	7	23.3%

4	Considerable effort	5	16.7%
5	Great effort	0	0.0%
Total	—	30	100%

- **Writing grant proposals to obtain funding to address (issue) in the community**
Frequency Distribution **27 responses**. Below is the complete frequency count:

Rating	Meaning	Frequency	Percentage (%)
1	No effort	8	29.6%
2	Little effort	3	11.1%
3	Moderate effort	5	18.5%
4	Considerable effort	6	22.2%
5	Great effort	5	18.5%
Total	—	27	100%

- **Training community members to become experts**
Frequency Distribution **30 responses**. Below is the complete frequency count:

Rating	Meaning	Frequency	Percentage (%)
1	No effort	7	23.3%
2	Little effort	11	36.7%
3	Moderate effort	9	30.0%
4	Considerable effort	2	6.7%
5	Great effort	1	3.3%
Total	—	30	100%

- **Recruiting experts to the community**
Frequency Distribution **30 responses**. Below is the complete frequency count:

Rating	Meaning	Frequency	Percentage (%)
1	No effort	6	20.7%
2	Little effort	13	44.8%
3	Moderate effort	5	17.2%
4	Considerable effort	5	17.2%
5	Great effort	0	0.0%
Total	—	29	100%

Are you aware of any proposals or action plans that have been submitted for funding to address substance use issues in Surry County?

The vast majority of community stakeholders are unaware of any specific funding proposals or action plans currently being submitted to address substance use in Surry County. While a small number of respondents recognized the existence of opioid settlement funds, this remains the only widely visible funding mechanism among those interviewed. Awareness of active grant-seeking is largely limited to the activities of SCOSAR or specific federal teen programs, yet even informed individuals expressed confusion over how these funds are ultimately utilized. This pervasive lack of

knowledge reveals a significant communication gap, as many stakeholders could only recall historical efforts rather than current initiatives. Ultimately, these findings highlight a critical need for increased transparency and more frequent reporting to ensure the community remains informed and supportive of local funding pursuits.

What formal or informal policies, practices and laws related to this issue are in place in your community?

Surry County has established a robust framework of formal policies and collaborative partnerships, including a specialized accountability and drug court, SCOSAR, and workplace efforts. While these efforts are intended to apply universally, many stakeholders acknowledge a "lived reality" where enforcement and outcomes differ based on race, socioeconomic status, and "good ole boy" connections. Practical disparities often emerge through unequal access to quality legal counsel and the heightened scrutiny of impoverished or minority populations, despite the formal principle of equality. Furthermore, while formal structures are dominant, there is a significant knowledge gap among the public regarding specific policies, leading to a reliance on informal community practices and harm reduction efforts like businesses carrying Narcan. Ultimately, the community is divided between those who believe the system is fair and those who see systemic biases—such as disparate prison ratios—that prevent truly equitable policy application.

Are there segments of the community for which these policies, practices, and laws may not apply, for example, due to socioeconomic status, ethnicity, age?

While 20 out of 29 community stakeholders affirm that substance use laws formally apply to everyone equally, a significant minority acknowledges that practical enforcement often varies based on socioeconomic status, race, and community connections. These respondents highlight that factors such as access to quality legal counsel, "good ole boy" networks, and systemic biases can lead to more critical scrutiny of younger, impoverished, or darker-skinned individuals. Furthermore, vulnerabilities like economic desperation and geographic isolation create unique barriers that prevent certain populations from experiencing the same legal protections or recovery outcomes as more affluent citizens. Consequently, there is a clear tension in Surry County between the idealized principle of universal accountability and the lived reality where community reputation and privilege significantly influence how policies are actually experienced.

Is there a need to expand these policies, practices, and laws? If so, are there plans to expand them? Please explain.

Community stakeholders overwhelmingly agree on the need to expand substance use initiatives, prioritizing enhanced support services and public education over the creation of new laws. Key priorities include extending resources to smaller rural communities, expanding drug court programs as alternatives to incarceration, and providing practical assistance like transportation. However, there is a significant disconnect between recognizing this need and knowing about actual implementation plans, with many respondents expressing uncertainty about specific strategies or timelines. While a small minority believes current resources are sufficient or that the primary barrier is individual resistance to treatment, the majority advocates for "out of the box" thinking to dismantle systemic barriers. Ultimately, the focus remains on optimizing existing legal frameworks through better awareness and refined service delivery rather than increasing regulation.

How does the community view these policies, practices, and laws?

Community views on substance use policies in Surry County are defined by a strong awareness of basic laws but a significant lack of understanding regarding broader, comprehensive policies. Most residents view these measures through a lens of personal safety and procedural order, often supporting enforcement only as long as it does not directly impact on their own lives or families. This conditional support reveals a deep philosophical divide between those who advocate for stricter punitive measures and those who recognize that the community cannot simply "jail its way out" of the crisis. Perceptions are further complicated by media misinformation and geographic disparities, which leave many residents in smaller communities feeling disconnected from resource planning. Ultimately, while the public generally favors policies that safeguard the community, a fragmented understanding of treatment-oriented goals prevents a unified approach to reform.

Other items

Community stakeholders emphasize that progress depends on collaborative networking and formal leadership acting as a catalyst for tough, coordinated conversations. While many residents believe they understand the issue, a significant "empathy gap" persists; most view addiction through a judgmental lens until it personally affects their own families. To counter this, stakeholders advocate for aggressive outreach—ranging from business signage to presence at local festivals—to humanize the crisis and highlight available resources. However, the response must remain adaptive, as the "flavor of the month" shifts between alcohol, meth, and fentanyl, requiring a workforce that can address deep-rooted social issues and service gaps. Ultimately, success requires moving past simplistic solutions to embrace a complex, compassionate approach that treats substance use as a shared community responsibility rather than an isolated criminal problem.