



Grant County Substance Use and Consequences, 2011

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

KEY FINDINGS

- Youth alcohol consumption fell by 24% in Grant County from 2001 to 2007.
- Grant County's average annual lung, bronchus and trachea cancer death rate is more than double the state average.
- Grant County 12th graders reported higher than average abuse of prescription pain relievers (14% vs. 7% in the state) and ADD/ADHD drugs (10% vs. 5%) in 2007.

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Alcohol Consumption

The rate of reported past-month alcohol use by youth in Grant County decreased from 33% in 2001 to 25% in 2007. Comparatively, the rate for Minnesota's West Central Alcohol, Tobacco and Other Drug Prevention Region fell from 31% to 24%, and the state from 27% to 23% during that time period.

Reported use varied by grade (*see graph below*). In

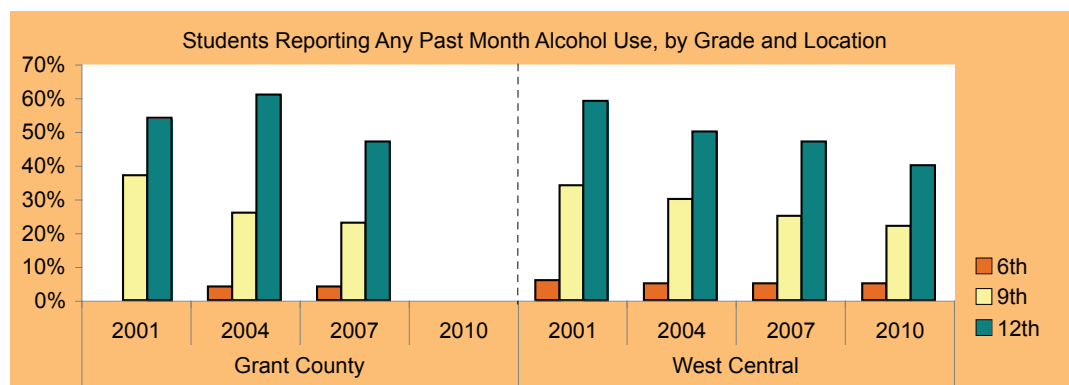
2007, Grant male students were more likely than female students to report past month use: 27% vs. 23%.

The percent of Grant County students reporting binge drinking in the past two weeks—having five or more drinks in a row on one occasion—fell from 25% in 2001 to 22% in 2007. In comparison, the West Central rate fell from 27% to 21% and the state

rate fell from 23% to 20%.

In 2007, 18% of Grant 9th graders reported binge drinking, as did 27% of 12th graders. Binge drinking was reported by more male students than female students: 28% vs. 18% (MSS).

Statistics on adult alcohol consumption are not available at the county level. 2010 Minnesota Student Survey data are not available for Grant County.



Alcohol Consequences

From 2005 to 2009, the average cost per capita of alcohol-related motor vehicle crashes, fatalities and injuries was \$65 in Grant County, \$91 in the West Central Region and \$54 in Minnesota (OTS).

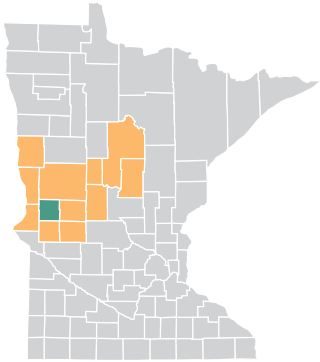
Over that same period, the driving while intoxicated

(DWI) arrest rate with Grant as the county of residence averaged 75.8 per 10,000 population. With Grant as the county of arrest, the average rate was 70.9 (OTS).

The percent of all motor vehicle crashes that were alcohol-related averaged 9% in

Grant County, 7% in the West Central Region, and 5% in Minnesota (OTS).

The cirrhosis death rate per 100,000 population in Grant County and in Minnesota averaged 6 from 2004 to 2008, as compared to 8 in the West Central Region (MCHS).



Statistics on adult substance use are available by region for 2004/2005:

- Past-month alcohol use was lower among West Central women than the state average: 48% vs. 53%, and slightly lower among West Central men: 66% vs. 67%.
- West Central adults aged 18-24 reported slightly lower smoking rates than the state average, while adults aged 25-64 reported slightly higher than average smoking rates.
- Reported 30-day use of marijuana among West Central adults was equal to the state average : 4%. West Central rates of past-year pain reliever abuse, 2%, crack/cocaine use, 1%, and methamphetamine use, 1%, equaled the state average. Less than 1% of West Central adults reported past-year use of MDMA/Ecstasy.

Minnesota Survey of Adult Substance Use

Tobacco Consumption

Smoking among youth declined statewide from 2001 to 2007: down from 20% to 16% in Grant County, 19% to 13% in the West Central Region, and 18% to 12% in Minnesota.

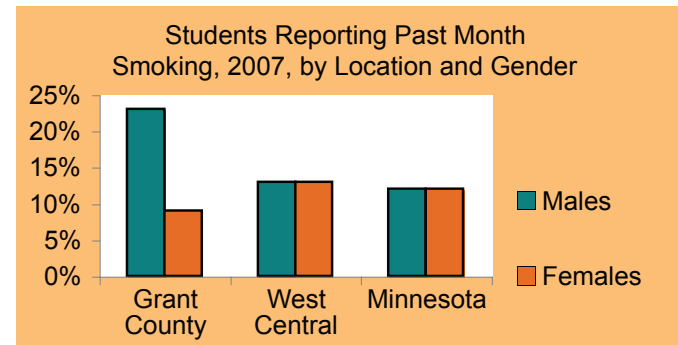
In 2007, Grant County rates varied greatly by gender (*see graph*). Past month smoking was reported by 12% of Grant 9th graders and 34% of 12th graders in 2007.

From 2004 to 2007, reported

past-month chewing tobacco use increased among Grant County males: 5% to 15%. Grant youth were slightly more likely than average to report first

smoking by age 13 or younger: 16% vs. 15% (MSS).

Statistics on adult smoking are not available at the county level.



Tobacco Consequences

The average annual rate per 100,000 population of lung, bronchus and trachea cancer deaths in Grant County was 96 from 2004 to 2008. Comparatively, the West Central Region averaged 63 and the state aver-

aged 45 (MCHS).

The number of Grant County lung and bronchus cancer deaths averaged three among males and two among females from 2003 to 2007 (MCSS).

It is estimated that 90% of lung cancer deaths among males and 79% of lung cancer deaths among females in the United States are smoking-related.

Risk and Protective Factors

In 2007, students reporting past 30 day use of alcohol and tobacco were asked how they obtained those substances. Grant County students most often reported social access to alcohol (93%) and tobacco (76%). Grant County students were more likely (31%) than West Central (25%) and all Minnesota students (27%) to report taking alcohol from someone or somewhere. They reported lower rates of buying

(Grant: 52%, WC: 56%, MN: 59%) tobacco, but similar rates of taking (24%, 24%, 22%) tobacco.

Students were also asked how much they thought people risked harming themselves by frequently binge drinking, smoking one or more packs of cigarettes per day, or smoking marijuana once or twice per week. Perception of great or moderate risk of alcohol harm was reported by 84% of Grant

County students, perception of tobacco harm was reported by 94% of Grant County students, and perception of marijuana harm was reported by 89% of Grant students. Similarly, students were asked if they thought their close friends would disapprove or greatly disapprove of such levels of substance use. Perception of disapproval was 73% for alcohol, 85% for tobacco and 91% for marijuana (MSS).

Other Drug Consumption

Grant County students are more likely to report use of marijuana than any other illicit drug (*see graph below*). In 2007, marijuana use was reported by 6% of Grant County 9th graders and 12% of 12th graders. Grant County male students were slightly more likely than female students to report use in 2007: 7% vs. 5%.

From 2001 to 2007, reported use of methamphetamines dropped from 6% to 0% among Grant 9th graders, and 5% to 2% among 12th graders. During that same period,

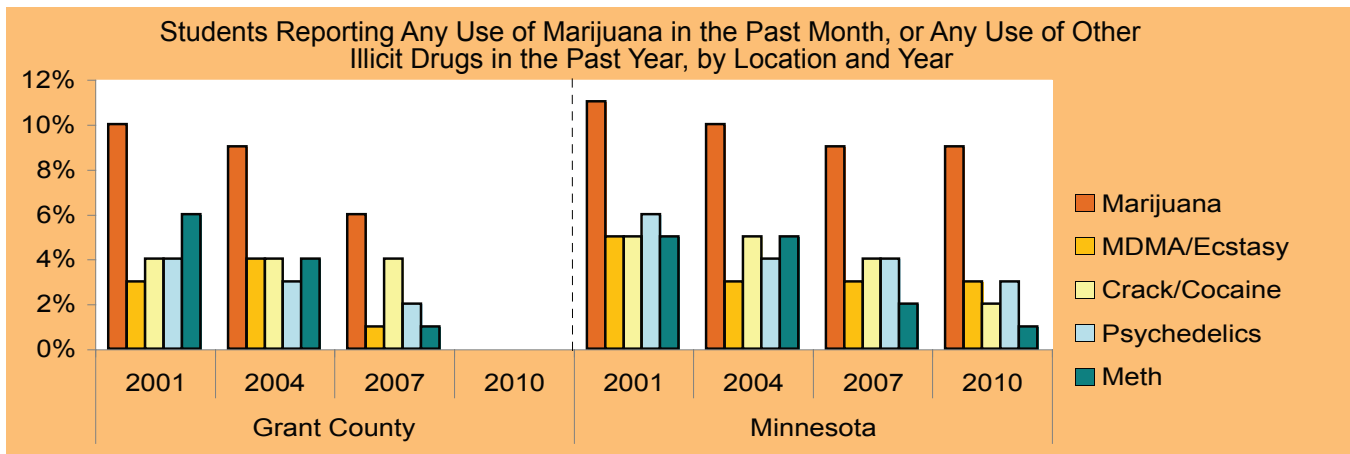
reported use of inhalants decreased among Grant 9th graders, 7% to 5%, but increased among 6th graders, 0% to 4%, and 12th graders: 1% to 5%. Reported use of psychedelics fell among Grant female students, 3% to 0%, holding steady among male students at 4%, while reported use of crack/cocaine fell from 4% to 1% among females and increased 3% to 7% among males.

In 2007, no Grant County 6th graders reported past-year abuse of prescription drugs, vs. 1% in the West Central

Region and the state. Grant County 9th and 12th graders were asked about abuse of specific types of prescription drugs in 2007: painkillers (reported by 2% of 9th graders and 14% of 12th graders), ADD/ADHD drugs (0% of 9th graders; 10% of 12th graders), tranquilizers/sedatives (3% of 9th graders; 2% of 12th graders), and stimulants/diet pills: 2% of 9th graders; 5% of 12th graders (MSS).

Statistics on adult drug use are not available at the county level.

The US Census Bureau estimate for the 2008 Grant County population is 6,005. Grant County is approximately 98% White and 1% Hispanic/Latino. In 2000, the percent of individuals living below the poverty level was 8% in both Grant County and Minnesota, compared to 11% in the West Central Region.



Other Drug Consequences

There were 9 Grant County narcotics arrests in 2009—8 of which involved marijuana. This is the same as the average annual number of narcotics arrests for Grant County, from 2005 to 2009: 8 (BCA). For probation and prison data related to drug offenses, see table below (DOC).

DRUG OFFENSES	GRANT COUNTY			WEST CENTRAL REGION			MINNESOTA		
	2007	2008	2009	2007	2008	2009	2007	2008	2009
Rates per 1,000 Population									
Adults on Probation	2.1	1.5	2.0	2.9	1.7	3.4	3.4	3.6	3.5
Juveniles on Probation	0.8	0.0	0.8	0.7	0.2	0.9	0.4	0.5	0.5
Adults in Prison	0.2	0.0	0.0	0.5	0.6	0.5	0.4	0.5	0.3

Questions or comments? Contact:

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What's Happening in Your County?



Substance Use in Minnesota, located at www.sumn.org, puts data on alcohol, tobacco and other drug use and consequences at your fingertips. The Web site was designed to help communities make decisions about substance abuse prevention efforts based on 55 indicators.

This site was developed by the Minnesota State Epidemiological Outcomes Workgroup (SEOW) with funding from the Minnesota Department of Human Services, Alcohol and Drug Abuse Division (ADAD). SEOW membership includes: Minnesota's departments of Human Services, Health, Education, Public Safety and Corrections and the Minnesota Institute of Public Health, which maintains the Web site.

Data Sources

Population statistics are from the U.S. Census Bureau.

Youth alcohol, tobacco and other drug consumption data are from the Minnesota Student Survey (MSS). The MSS is a confidential and anonymous self-administered survey given every three years to 6th, 9th and 12th grade students attending Minnesota public, charter and tribal schools. The Minnesota Student Survey Interagency Team is made up of four state agencies: the Minnesota Department of Education, the Minnesota Department of Health, the Minnesota Department of Human Services, and the Minnesota Department of Public Safety. Adult consumption data are

from the MN Survey of Adult Substance Use (MNSASU) from the Minnesota Department of Human Services, Performance Measurement and Quality Improvement. Binge drinking is defined as 5 or more drinks in a row on one occasion in the MSS, and 5 or more drinks for males or 4 or more drinks for females in the MNSASU.

Alcohol consequence data are from the Office of Traffic Safety's (OTS) *Impaired Driving Facts and Crash Facts*, and from the National Safety Council.

Alcohol and tobacco mortality data are from the Minnesota Center for Health Statistics (MCHS) and the Minnesota Cancer Surveillance

System (MCSS).

Drug consequence data are from the Minnesota Department of Corrections' (DOC) *Inmate Profile and Probation Survey*, and from the Bureau of Criminal Apprehension's (BCA) *Minnesota Crime Information* reports.

Detailed data source information can be found at www.sumn.org. Data source fact sheets can be found under Tools. Links to each data source, when available, can be found under each table when using Data by Location or Data by Topic.

Aggregated data at the state and county level do not reveal disparities that may exist within a given geographic area.