



Meeker County Substance Use and Consequences, 2011

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

KEY FINDINGS

- From 1998 to 2010, youth binge drinking rates in Meeker County decreased from 22% to 15%.
- From 1998 to 2010, cigarettesmoking rates among Meeker students fell from 22% to 14% while chewing tobacco use increased from 5% to 9%.
- Sixty-one percent of all Meeker County narcotics arrests made in 2009 involved marijuana.

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Alcohol Consumption

The rate of reported past-month alcohol use by youth in Meeker County dropped from 29% in 1998 to 19% in 2010. Comparatively, the rate for Minnesota’s Southwest Alcohol, Tobacco and Other Drug Prevention Region fell from 33% to 21%, and the states from 31% to 20%.

Within Meeker County, reported use varied by grade and

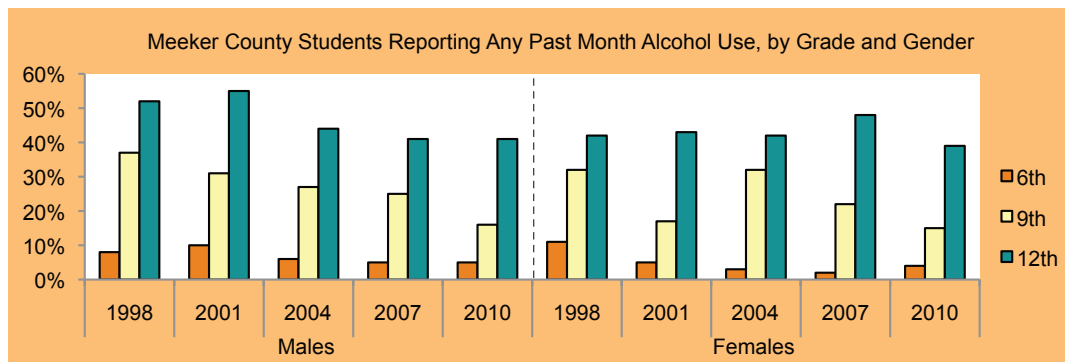
by gender (*see graph below*).

From 1998 to 2010, the percent of Meeker students reporting binge drinking in the past two weeks—having five or more drinks in a row on one occasion—fell from 22% to 15%. In comparison, the Southwest rate fell from 28% to 17% and the state rate from 26% to 16%. In 2010, binge drinking was reported

by 7% of 9th grade males, 8% of 9th grade females, 29% of 12th grade males, and 20% of 12th grade females in Meeker County.

Meeker youth were as likely as the state average to report first drinking by age 13 or younger: 20% (MSS).

Statistics on adult alcohol consumption are not available at the county level.



Alcohol Consequences

From 2005 to 2009, the average cost per capita of alcohol-related motor vehicle crashes, fatalities and injuries was \$81 in Meeker County, \$70 in the Southwest Region and \$54 in Minnesota (OTS).

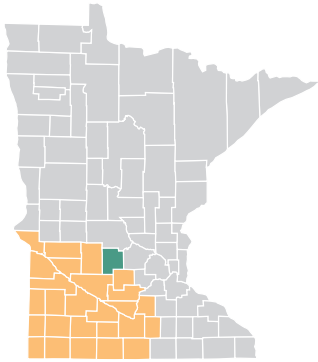
Over that same period, the driving while intoxicated

(DWI) arrest rate with Meeker as the county of residence averaged 58.1 per 10,000 population. With Meeker as the county of arrest, the average rate was 54.0 (OTS).

The percent of all motor vehicle crashes that were alcohol-related averaged 8%

in Meeker County, 6% in the Southwest Region (OTS), and 5% in Minnesota.

The annual cirrhosis death rate per 100,000 population averaged 11 in Meeker County, 7 in the Southwest Region and 6 in the state from 2004 to 2008 (MCHS).



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

- Past-month alcohol use was lower than the state average for Southwest women, 50% vs. 53%, but equal for men: 67%.

- In the Southwest, past month smoking was reported by 41% of 18-20 year-olds, 41% of 21-24 year-olds, 26% of 25-44 year-olds, 19% of 45-64 year-olds, and 8% of persons aged 65+.

- Southwest adults were less likely than the state average to report past month use of marijuana, 2% vs. 4%. They were as likely as the state average to report past year use of crack/cocaine, 1%, but less likely to report past-year use abuse of prescription pain relievers: 1% vs. 2%. Less than one percent of Southwest adults reported past-year methamphetamine use.

Minnesota Survey of Adult Substance Use

Tobacco Consumption

Smoking among youth declined statewide from 1998 to 2010: down from 22% to 14% in Meeker County, 20% to 12% in the Southwest Region, and 19% to 10% in Minnesota.

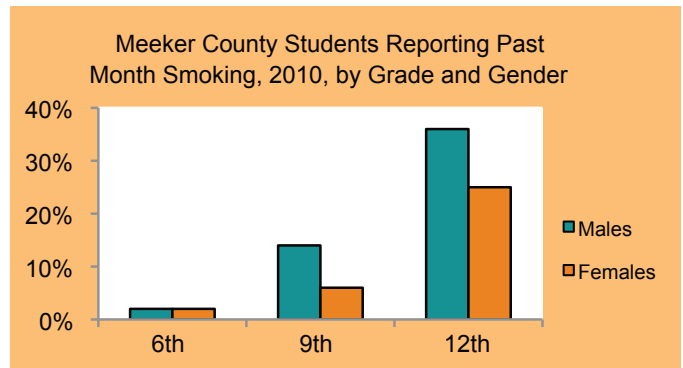
In 2010, Meeker County rates varied by grade and by gender (*see graph*).

From 2004 to 2010, reported past-month chewing tobacco use in Meeker County increased among 9th grade males, 9% to 15%, and among

12th grade males, 14% to 32%. Meeker County youth were more likely than the state average to report first smoking by age 13 or younger: 15% vs.

12% (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 Meeker County was 46 from 2004 to 2008. Comparatively, the Southwest rate averaged 51 and the state rate

averaged 45 (MCHS).

The number of Meeker County lung and bronchus cancer deaths averaged six among males and four among females from 2004 to 2008 (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 2010, students reporting past 30 day use of alcohol and tobacco were asked how they obtained those substances. Meeker County students most often reported social access to alcohol (90%) and tobacco (57%). Meeker County students were less likely (19%) as Southwest (23%) and all Minnesota students (26%) to report taking alcohol from someone or somewhere. They were more likely to report buy-

ing (Meeker: 59%, SW: 56%, MN: 53%) tobacco, but less likely to report taking (9%, 14%, 17%) 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 80%

of Meeker County students, perception of tobacco harm was reported by 89% of Meeker students, and perception of marijuana harm was reported by 83% of Meeker students. Similarly, students were asked if they thought their parents or guardians would disapprove or greatly disapprove of such levels of substance use. Perception of disapproval was 87% for alcohol, 93% for tobacco and 98% for marijuana (MSS).

Other Drug Consumption

Meeker County students were less likely than the state average to report use of illicit drugs (*see graph below*). In 2010, marijuana use was reported by 5% of Meeker County 9th graders and 14% of 12th graders and 1% of 6th graders. Male students were more likely than female students to report use: 7% vs. 5%.

From 2004 to 2010, reported past-year use of methamphetamines fell from 4% to 1% among Meeker 9th graders, and 2% to 1% among 12th graders. From 1998 to

2010, reported past-year use of inhalants fell among Meeker male students, 6% to 2%, and female students: 4% to 2%. During that period, reported past-year use of psychedelics fell among male students, 8% to 2%, and female students: 5% to 2%. Reported past-year use of crack/cocaine fell among male students, 7% to 1%, and among female students, 6% to 1%.

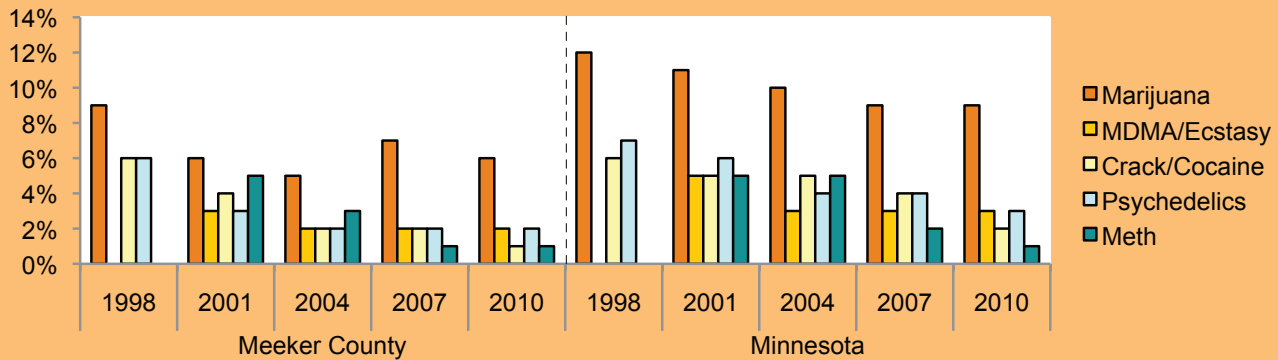
In 2010, 1% of 6th graders in Meeker County reported past-year abuse of prescription drugs, as did 1% in the South-

west Region and in the state. Meeker County 9th and 12th graders were asked about abuse of specific types of prescription drugs in 2010: painkillers (reported by 2% of 9th graders and 4% of 12th graders), ADD/ADHD drugs (2% of 9th graders; 2% of 12th graders), tranquilizers/sedatives (1% of 9th graders; 3% of 12th graders), and stimulants/diet pills: 2% of 9th graders; 1% of 12th graders (MSS).

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

The US Census Bureau estimate for the 2009 Meeker County population is 23,154. Meeker County is approximately 98% White and 3% Hispanic/Latino. In 2000, the percent of individuals living below the poverty level was 7% in Meeker County compared to 9% in the Southwest Region and 8% in Minnesota.

Students Reporting Any Use of Marijuana in the Past Month, or Any Use of Other Illicit Drugs in the Past Year, by Location and Year



Other Drug Consequences

There were 38 Meeker County narcotics arrests in 2009—23 involved marijuana. Comparatively, the average annual number of narcotics arrests for Meeker County from 2005 to 2009 was 51 (BCA).

For probation and prison data related to drug offenses, see table below (DOC).

DRUG OFFENSES	MEEKER COUNTY			SOUTHWEST REGION			MINNESOTA		
Rates per 1,000 Population	2007	2008	2009	2007	2008	2009	2007	2008	2009
Adults on Probation	1.9	2.2	2.7	2.6	4.2	3.1	3.4	3.6	3.5
Juveniles on Probation	0.2	0.4	0.5	0.3	0.2	0.6	0.4	0.5	0.5
Adults in Prison	0.4	0.7	0.5	0.5	0.6	0.4	0.4	0.5	0.3

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

Questions or comments? Contact:

Melissa Boeke, MS
Epidemiologist

Minnesota Institute of Public Health
2720 Highway 10 NE
Mounds View, MN 55112

Phone: 763.712.7615
Fax: 763.427.7841
E-mail: sumn@miph.org

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.