



Redwood County Substance Use and Consequences, 2011

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

KEY FINDINGS

- The percent of all Redwood County motor vehicle crashes that were alcohol-related in 2009 was 11%—more than double the state average.
- From 2004 to 2010, reported past month use of chewing tobacco increased among Redwood male students from 5% to 13%.
- The percent of Redwood youth reporting illicit drug use increased from 2007 to 2010.

Alcohol Consumption

The rate of reported past-month alcohol use by youth in Redwood County fell from 28% in 1998 to 23% 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%.

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

In 2010, Redwood male

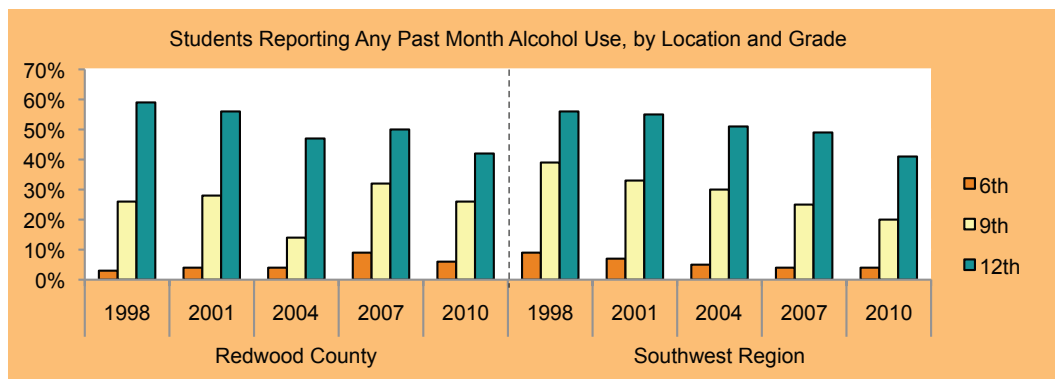
students were more likely than female students to report past month use: 25% vs. 21%.

From 1998 to 2010, the percent of Redwood County students reporting binge drinking in the past two weeks—having five or more drinks in a row on one occasion—dropped from 22% to 18%. In comparison, the Southwest rate fell from 28% to 17% and the state rate from

26% to 16%.

In 2010, 14% of Redwood 9th graders reported binge drinking, as did 25% of 12th graders. Binge drinking was reported by more male students than female students: 22% vs. 13% (MSS).

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



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Alcohol Consequences

From 2005 to 2009, the average cost per capita of alcohol-related motor vehicle crashes, fatalities and injuries was \$113 in Redwood County, \$70 in the Southwest Region and \$54 in Minnesota (OTS).

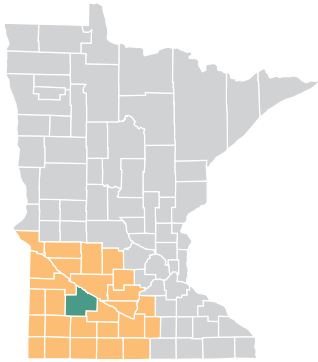
Over that same period, the driving while intoxicated

(DWI) arrest rate with Redwood as the county of residence averaged 71.7 per 10,000 population. With Redwood as the county of arrest, the average rate was 86.7 (OTS).

The percent of all motor vehicle crashes that were alcohol-related averaged 11%

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

The annual cirrhosis death rate per 100,000 population averaged 14 in Redwood 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

In Redwood County, smoking among youth decreased slightly from 14% in 1998 to 13% in 2010. Comparatively, the Southwest Region's rate fell steadily from 20% to 12% and the state fell from 19% to 10%.

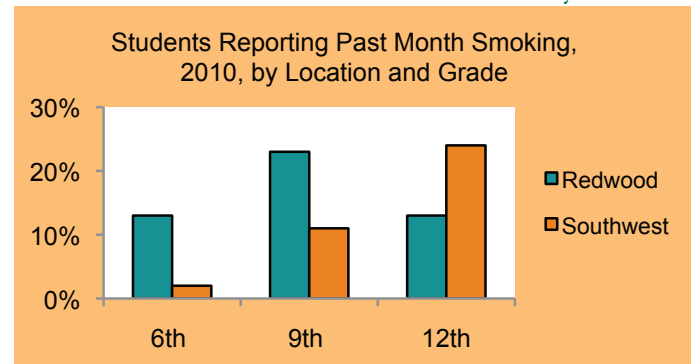
In 2010, Redwood County rates varied greatly by grade (see graph). Past month smoking was reported by 14% of males and 13% of female students.

From 2004 to 2010, reported past-month chewing tobacco

use increased among Redwood County males: 5% to 13%.

Redwood County youth were less likely than the state

average to report first smoking by age 13 or younger: 7% 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 Redwood County was 58 from 2004 to 2008. Comparatively, the Southwest rate averaged 51 and the state

rate averaged 45 (MCHS).

The number of Redwood County lung and bronchus cancer deaths averaged five 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. Redwood County students most often reported social access to alcohol (90%) and tobacco (68%). Redwood County students were more likely (31%) than Southwest (23%) and all Minnesota students (26%) to report taking alcohol from someone or somewhere. They were less likely to report

buying (Redwood: 29%, SW: 56%, MN: 53%) tobacco, and also slightly less likely to report taking (13%, 14%, 17%).

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 78%

of Redwood County students, perception of tobacco harm was reported by 88% of Redwood students, and perception of marijuana harm was reported by 80% of Redwood 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, 95% for tobacco and 96% for marijuana (MSS).

Other Drug Consumption

Past-month marijuana use increased recently among Redwood youth (*see graph below*). In 2010, marijuana use was reported by 5% of 6th graders, 10% of 9th graders and 10% of 12th graders. Male students were slightly more likely than female students to report use: 10% vs. 6%.

From 2004 to 2010, reported past-year use of methamphetamines increased from 0% to 3% among Redwood 9th graders. For 12th graders use fell between 2004 and 2010 from 2% to 1%. During

that period, reported past-year use of crack/cocaine increased from 1% to 6% among male students, and increased slightly from 1% to 2% for female students.

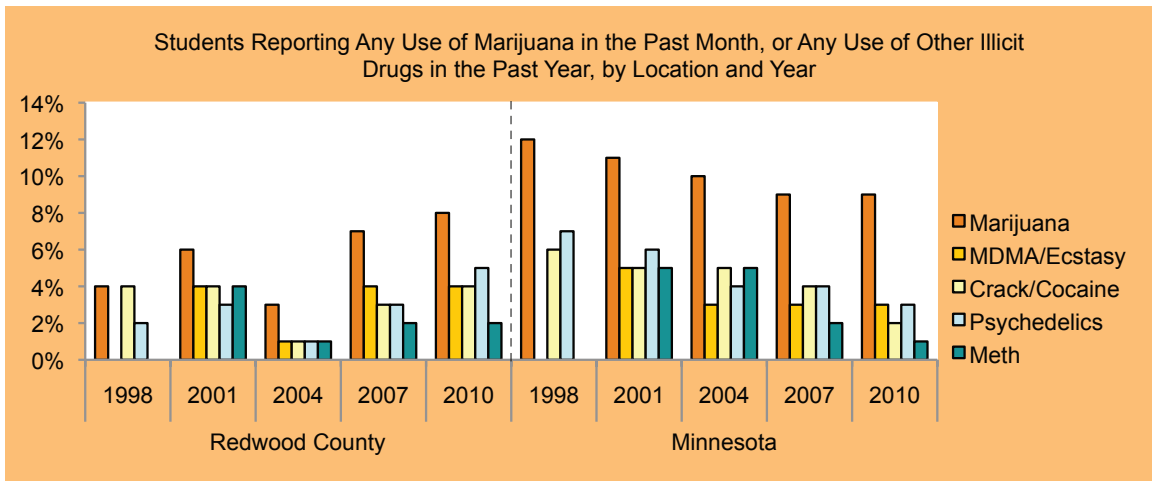
In 2010, past-year use of inhalants was reported by 5% of Redwood County 6th graders, 6% of 9th graders and 3% of 12th graders. Past-year use of psychedelics was reported by 6% of male students and 4% of female students.

In 2010, 2% of 6th graders in Redwood reported past-year abuse of prescription

drugs compared to 1% in the Southwest Region and in the state. Redwood 9th and 12th graders were asked about abuse of specific prescription drugs: painkillers (reported by 6% of 9th graders and 9% of 12th graders), ADD/ADHD drugs (4% of 9th graders; 4% of 12th graders), tranquilizers/sedatives (2% of 9th graders; 2% of 12th graders), and stimulants/diet pills: 2% of 9th graders; 2% of 12th graders (MSS).

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

The US Census Bureau estimate for the 2008 Redwood County population is 15,493. Redwood County is approximately 92% White, 4% American Indian, 2% Hispanic and 2% Asian/Pacific Islander. In 2000, the percent of individuals living below the poverty level was 8% in both Redwood County and in the state compared to 9% in the Southwest Region.



Other Drug Consequences

There were 5 Redwood County narcotics arrests in 2009—4 of which involved marijuana. Comparatively, the average annual number of narcotics arrests for Redwood County from 2005 to 2009 was 23 (BCA). For probation and prison data related to drug offenses, see table below (DOC).

DRUG OFFENSES	REDWOOD COUNTY			SOUTHWEST REGION			MINNESOTA		
Rates per 1,000 Population	2007	2008	2009	2007	2008	2009	2007	2008	2009
Adults on Probation	2.0	3.1	3.4	2.6	4.2	3.1	3.4	3.6	3.5
Juveniles on Probation	0.3	0.8	0.0	0.3	0.2	0.6	0.4	0.5	0.5
Adults in Prison	0.5	0.4	0.5	0.5	0.6	0.4	0.4	0.5	0.3

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

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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.