



# Stevens County Substance Use and Consequences, 2011

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

## KEY FINDINGS

- Stevens County's average annual cost per capita of alcohol-related motor vehicle crashes, fatalities and injuries is more than twice the state average.
- Unlike state and regional trends, reported past-month use of chewing tobacco among Stevens male students fell from 2004 to 2007.
- 2007 reported rates of illicit drug use among Stevens youth were less than half of statewide rates.

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## Alcohol Consumption

From 2004 to 2007, the rate of reported past-month alcohol consumption by youth fell in Stevens County from 28% to 21%, in Minnesota's West Central Alcohol, Tobacco and Other Drug Prevention Region from 26% to 24%, and in Minnesota from 25% to 23%.

In Stevens County, reported use varied by grade (*see graph below*). In 2007, Stevens male students were as likely as fe-

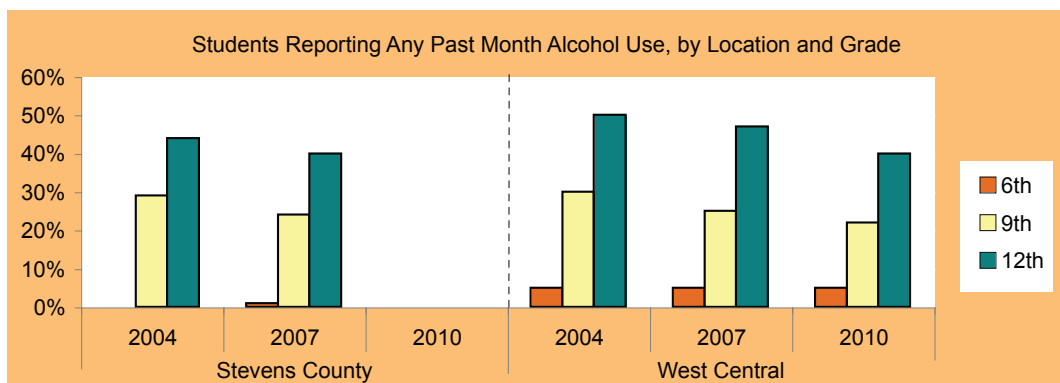
males to report use: 21%.

The percent of Stevens County students reporting binge drinking in the past two weeks—having five or more alcoholic drinks in a row on one occasion—dropped from 20% in 2004 to 16% in 2007. Comparatively, the West Central rate fell from 24% to 21% and the state rate fell from 22% to 20%.

In 2007, 13% of Stevens

County 9th graders reported binge drinking, as did 19% of 12th graders. Binge drinking was reported by as many male students as female students: 16% (MSS).

1998, 2001 and 2010 Minnesota Student Survey data are not available for Stevens; 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 \$136 in Stevens County, \$91 in the West Central Region and \$54 in Minnesota (OTS).

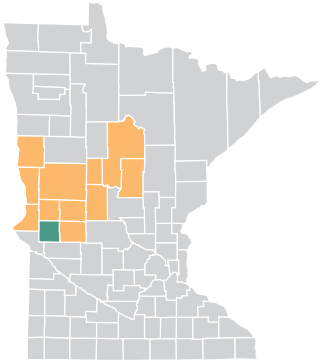
Over that same period, the driving while intoxicated

(DWI) arrest rate with Stevens as the county of residence averaged 49.3 per 10,000 population. With Stevens as the county of arrest, the average rate was 44.4 (OTS).

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

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

The cirrhosis death rate per 100,000 population in Stevens County averaged 4 from 2004 to 2008, as compared to 8 in the West Central Region and 6 in the state (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*

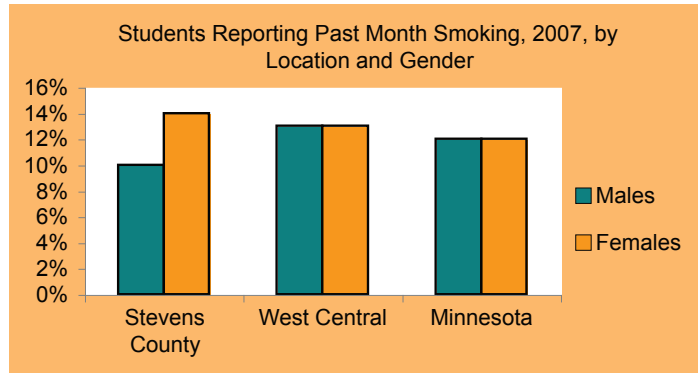
## Tobacco Consumption

Smoking among youth declined statewide from 2004 to 2007: down from 16% to 12% in Stevens County, 15% to 13% in the West Central Region, and 14% to 12% in Minnesota. In 2007, Stevens female students reported higher smoking rates than males (*see graph*).

From 2004 to 2007, reported past-month chewing tobacco use decreased among Stevens County males: 10% to 6%. Stevens youth were less

likely than average to report first smoking by age 13 or younger: 11% vs. 15% (MSS). 1998, 2001 and 2010 Minnesota Student Survey

data are not available for Stevens; statistics on adult alcohol consumption 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 Stevens County was 37 from 2004 to 2008. Comparatively, the West Central Region averaged 63 and the

state averaged 45 (MCHS).

The number of Stevens County lung and bronchus cancer deaths averaged two among males and two 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 2007, students reporting past 30 day use of alcohol and tobacco were asked how they obtained those substances. Stevens County students most often reported social access to alcohol (88%) and tobacco (71%). Stevens County students were more likely (35%) than West Central (25%) and all Minnesota students (27%) to report taking alcohol from someone or somewhere. They reported lower rates of buy-

ing (Stevens: 50%, WC: 56%, MN: 59%) tobacco, but slightly higher rates of taking (25%, 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 85% of Stevens

County students, perception of tobacco harm was reported by 93% of Stevens students, and perception of marijuana harm was reported by 91% of Stevens 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 84% for alcohol, 92% for tobacco and 93% for marijuana (MSS).

## Other Drug Consumption

Stevens County students have been less likely than average to report illicit drug use (*see graph below*). In 2007, marijuana use was reported by 3% of Stevens County 9th graders and 7% of 12th graders—but no 6th graders. Stevens County male students were as likely as female students to report use in 2007: 3%.

From 2004 to 2007, reported use of methamphetamines dropped from 8% to 0% among Stevens 12th graders, but held steady at 1% among 9th graders. During that same period,

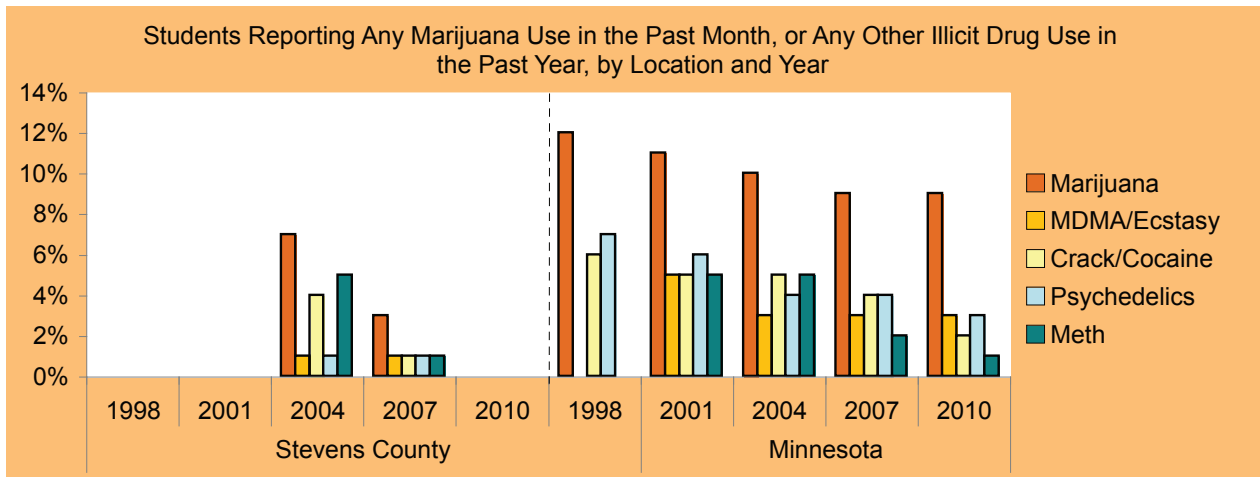
reported use of inhalants decreased slightly among Stevens 9th graders, 5% to 3%, and 12th graders, 3% to 2%, but increased slightly among 6th graders: 2% to 3%. Reported use of psychedelics dipped slightly for Stevens female students, 2% to 0%, but increased slightly among male students, 0% to 2%. Reported use of crack/cocaine fell from 6% to 0% among female students and increased slightly from 1% to 2% among male students.

Stevens 9th and 12th graders were asked about abuse of spe-

cific types of prescription drugs in 2007: painkillers (reported by 0% of 9th graders and 2% of 12th graders), ADD/ADHD drugs (3% of 9th graders; 0% of 12th graders), tranquilizers/sedatives (1% of 9th graders; 0% of 12th graders), and stimulants/diet pills: 4% of 9th graders; 3% of 12th graders (MSS).

1998, 2001 and 2010 Minnesota Student Survey data are not available for Stevens; statistics on adult alcohol consumption are not available at the county level.

The US Census Bureau estimate for the 2008 Stevens County population is 9,661. Stevens County is approximately 95% White, 2% African-American, 2% Hispanic, 1% American Indian and 1% Asian/Pacific Islander. In 2000, the percent of individuals living below the poverty level was 14% in Stevens County, compared to 8% in Minnesota.



## Other Drug Consequences

There were 24 Stevens County narcotics arrests in 2009—67% of which involved marijuana. This is similar to the average annual number of narcotics arrests for Stevens County, from 2005 to 2009: 26 (BCA). For probation and prison data related to drug offenses, see table below (DOC).

DRUG OFFENSES	STEVENS COUNTY			WEST CENTRAL REGION			MINNESOTA		
Rates per 1,000 Population	2007	2008	2009	2007	2008	2009	2007	2008	2009
Adults on Probation	2.5	2.4	2.3	2.9	1.7	3.4	3.4	3.6	3.5
Juveniles on Probation	0.6	1.1	0.0	0.7	0.2	0.9	0.4	0.5	0.5
Adults in Prison	0.1	0.3	0.2	0.5	0.6	0.5	0.4	0.5	0.3

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## What's Happening in Your County?



**Substance Use in Minnesota, located at [www.sumn.org](http://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](http://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.