



# Winona County Substance Use and Consequences, 2011

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

## KEY FINDINGS

- Binge drinking rates among Winona County youth fell by 41%.
- From 1998 to 2010, youth smoking rates dropped from 19% to 10% in Winona County.
- In 2010, 21% of Winona County 12th graders reported past-month marijuana use.

## Alcohol Consumption

The rate of reported past-month alcohol consumption by youth in Winona County dropped from 33% in 1998 to 22% in 2010. Comparatively, the rate for Minnesota's Southeast Alcohol, Tobacco and Other Drug Prevention Region dropped steadily from 32% to 19%, and the state's from 31% to 20%.

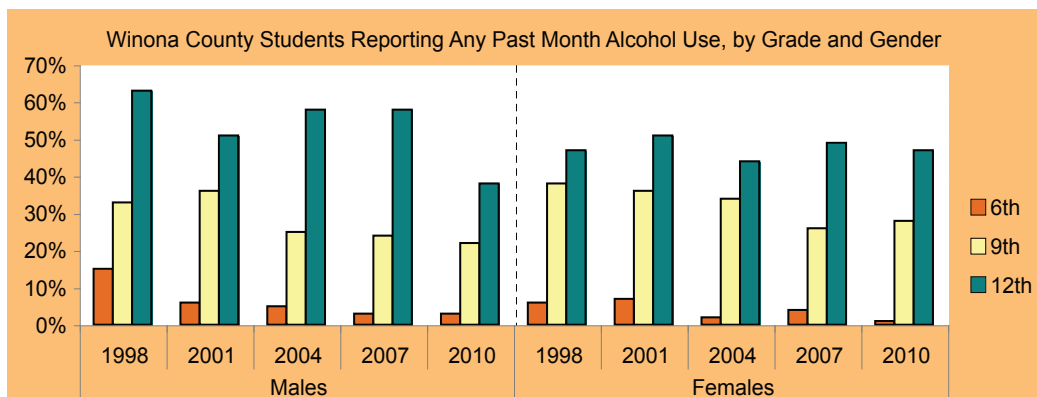
In Winona County, report-

ed use varied by grade and by gender (*see graph below*).

The percent of Winona County students reporting binge drinking in the past two weeks—having five or more drinks in a row on one occasion—fell from 27% in 1998 to 16% in 2010. Comparatively, the Southeast rate fell steadily from 27% to 16% and the state rate from 26% to 16%.

In 2010, binge drinking was reported by 9% of 9th grade males, 13% of 9th grade females, 25% of 12th grade males, and 20% of 12th grade females in Winona County.

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



## INSIDE

Tobacco Consumption ..... 2

Tobacco Consequences..... 2

Risk & Protective Factors ..... 2

Other Drug Consumption ..... 3

Other Drug Consequences... 3

MN SEOW ..... 4

Data Sources..... 4

## Alcohol Consequences

From 2005 to 2009, the average cost per capita of alcohol-related motor vehicle crashes, fatalities and injuries was \$59 in Winona County, \$53 in the Southeast Region and \$54 in Minnesota (OTS).

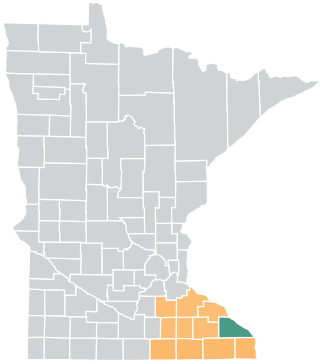
Over that same period, the driving while intoxicated

(DWI) arrest rate with Winona as the county of residence averaged 58.8 per 10,000 population. With Winona as the county of arrest, the average rate was 76.6 (OTS).

The percent of all motor vehicle crashes that were alcohol-related averaged 6%

in Winona County, compared to 5% in the Southeast Region and in Minnesota (OTS).

The annual cirrhosis death rate per 100,000 population averaged 6 in Winona County and in Minnesota from 2004 to 2008 compared to 5 in the Southeast Region. (MCHS).



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

- Past-month alcohol use was lower among both men, 67% vs. 65%, and women, 50% vs. 53%, in the Southeast Region as compared to the state average.

- In the Southeast, past month smoking was reported by 36% of 18-20 year-olds, 57% of 21-24 year-olds, 27% of 25-44 year-olds, 18% of 45-64 year-olds, and 5% of persons aged 65+.

- Southeast adults were less likely than the state average to report past month use of marijuana, 3% vs. 4%. They were as likely to report past year use of crack/cocaine, 1%, and abuse of prescription pain relievers, 2%. Less than half of one percent of Southeast adults reported past-year use of methamphetamines.

*Minnesota Survey of Adult Substance Use*

## Tobacco Consumption

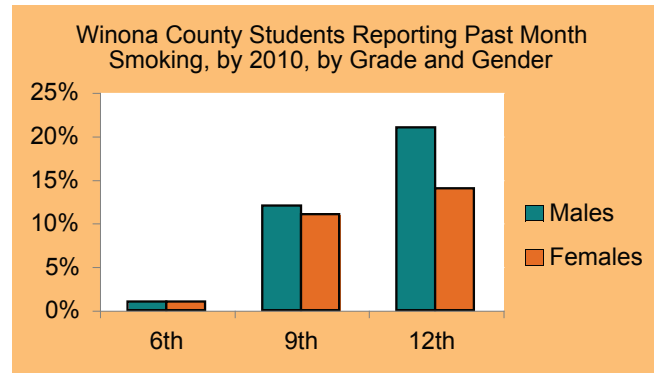
Smoking among youth declined statewide from 1998 to 2010: down from 19% to 10% in Winona County, 19% to 10% in the Southeast Region, and 19% to 10% in Minnesota. In 2010, Winona rates varied by grade and by gender (*see graph*).

From 2004 to 2010, reported past-month chewing tobacco use increased in Winona County among males: 9th graders, 4% to 11%, and 12th graders, 9% to 17%.

Winona youth were slightly less likely than the state average to report first smoking by age 13 or younger: 11% 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 Winona County was 52 from 2004 to 2008. In comparison, the Southeast Region averaged 47 while the

state averaged 45 per 100,000 (MCHS).

(MCSS).

The number of Winona County lung and bronchus cancer deaths averaged 14 among males and 11 among females from 2004 to 2008

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. Winona County students most often reported social access to alcohol (86%) and tobacco (64%). Winona County students were less likely (16%) as Southeast (23%) and all Minnesota students (26%) to report taking alcohol from someone or somewhere. They were about as likely to report

buying (Winona: 58%, SE: 52%, MN: 53%) tobacco, and taking (19%, 16%, 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 77% of Wino-

na County students, perception of tobacco harm was reported by 88% of Winona students, and perception of marijuana harm was reported by 74% of Winona 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 88% for alcohol, 95% for tobacco and 95% for marijuana (MSS).

## Other Drug Consumption

Winona County youth were more likely to report use of marijuana than any other illicit drug (*see graph below*). In 2010, marijuana use was reported by 11% of Winona County 9th graders and 21% of 12th graders—but less than 1% of 6th graders. Male students were more likely than female students to report use: 12% vs. 8%.

From 2001 to 2010, reported use of methamphetamines fell from 4% to 2% among Winona 9th graders, and 6% to 1% among 12th graders.

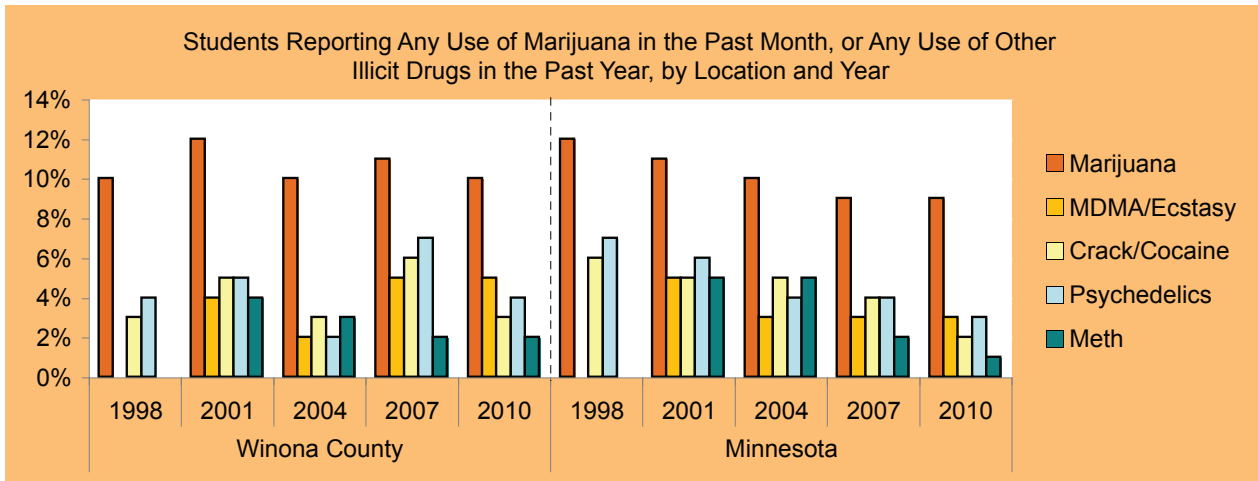
From 1998 to 2010, reported past-year use of inhalants fell among Winona 6th graders, 7% to 2%, and 12th graders, 5% to 1%, but increased for 9th graders: 3% to 4%. During that period, reported use of psychedelics increased among Winona County male students, 4% to 5%, and decreased for female students, 4% to 3%. Reported use of crack/cocaine increased from 3% to 4% for males and decreased 2% to 1% for females.

In 2010, 1% of 6th graders in Winona County, the Southeast Region and the state

reported past-year abuse of prescription drugs. Winona County 9th and 12th graders were asked about abuse of specific types of prescription drugs in 2010: painkillers (reported by 4% of 9th graders and 7% of 12th graders), ADD/ADHD drugs (3% of 9th graders; 6% of 12th graders), tranquilizers/sedatives (1% of 9th graders; 5% of 12th graders), and stimulants/diet pills: 2% of 9th graders; 3% of 12th graders (MSS).

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

The US Census Bureau estimate for the 2008 Winona County population is 50,019. Winona County is approximately 95% White, 2% Asian/Pacific Islander, 1% African-American and 1% Hispanic/Latino. In 2000, the percent of individuals living below the poverty level was 12% in Winona County compared to 8% in Minnesota..



## Other Drug Consequences

There were 196 Winona County narcotics arrests in 2009—88 of which involved marijuana. Comparatively, the average annual number of narcotics arrests for Winona County from 2005 to 2009 was 185 (BCA). For probation and prison data related to drug offenses, see table below (DOC)

DRUG OFFENSES	WINONA COUNTY			SOUTHEAST REGION			MINNESOTA		
Rates per 1,000 Population	2007	2008	2009	2007	2008	2009	2007	2008	2009
Adults on Probation	2.0	2.4	2.5	3.0	2.1	3.2	3.4	3.6	3.5
Juveniles on Probation	0.5	1.3	0.9	0.3	0.1	0.6	0.4	0.5	0.5
Adults in Prison	0.8	0.9	0.7	0.5	0.6	0.5	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](mailto:sumn@miph.org)

## 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.