



Substance Use and Consequences in the Northeast ATOD Prevention Region, 2008

MN STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

KEY FINDINGS

- From 1996 to 2007, 7%–10% of motor vehicle crashes in the Northeast were alcohol related.
- In 2004/2005, 18–20 year-old females reported the highest smoking rate: 47%.
- Reported rates of abuse of inhalants, stimulants and diet pills, and tranquilizers and sedatives, painkillers, and ADD/ADHD drugs were all higher than the state average among Northeast students in 2007.

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Alcohol Consumption

From 1998 to 2007, reported 30-day alcohol use was higher in the Northeast ATOD Prevention Region than in the state as a whole. The rate dropped from 31% to 23% in Minnesota, and from 34% to 25% in the Northeast. In 2007, 48% of all Northeast 12th graders reported past month alcohol use (MSS).

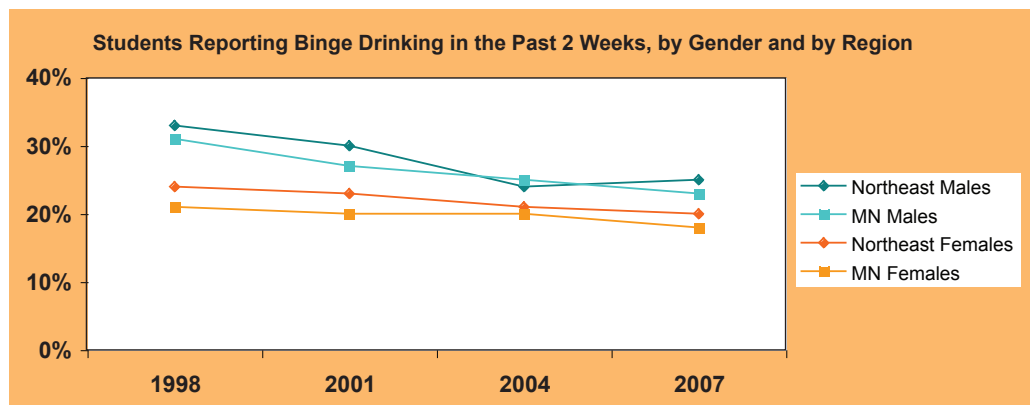
Among adults, reported 30-day alcohol use was lower

than the state average for Northeast men (66% vs. 67%) and women (48% vs. 53%) in 2004/2005. Reported use by Northeast men was highest for 45–64 year olds, 71%, and by women was highest for 21–24 year olds, 62% (MNSASU).

Reported binge drinking has been higher than average among students in the Northeast (see graph below). In 2007, 16% of Northeast 9th grade

males and 15% of females reported binge drinking. Among Northeast 12th graders, 36% of males reported binge drinking vs. 26% of females (MSS).

Adult males in the Northeast were more likely than the state average to report binge drinking in 2004/2005, 27% vs. 24%, while females were slightly less likely—12% vs. 13% (MNSASU).



Alcohol Consequences

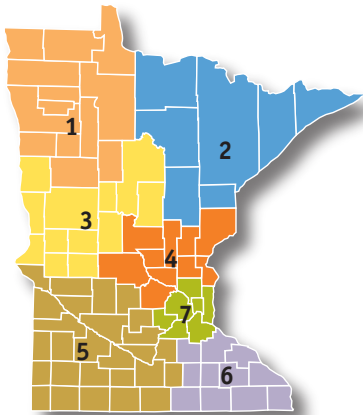
While the cost per capita of alcohol-related traffic crashes, fatalities and injuries has fluctuated, Northeast costs were consistently higher than the state average from 1995 to 2007. Northeast area costs ranged from \$63–\$124 per capita; the range was \$49–\$75

for Minnesota (OTS).

In 2007, the rate of arrests or incidents on record of driving while intoxicated (DWI) was 75.4 per 10,000 population for Northeast as region of residence, and 86.0 per 10,000 population for Northeast as region of arrest (both higher

than the state rate of 71.2 per 10,000 population.)

From 1996 to 2007, 7%–10% of motor vehicle crashes in the Northeast were alcohol related. The alcohol-related motor vehicle fatality rate has been 0.4–1.0 per 10,000 population in the Northeast.



Minnesota is divided into seven Alcohol, Tobacco and Other Drug Prevention Regions. Northeast Region 2 contains the counties of: Aitkin, Carlton, Cook, Itasca, Koochiching, Lake and St. Louis. Also included are Bois Forte/Nett Lake, Fond du Lac and Grand Portage Indian Reservations.

Minnesota's Prevention Region Coordinators support communities in their efforts to prevent alcohol, tobacco and other drug (ATOD) abuse. For more information on the Northeast ATOD Prevention Region go to: www.rpcmn.org.

Tobacco Consumption

Reported 30-day cigarette smoking among Northeast students, though on the decline, has been higher than the state average over the past 9 years. Northeast rates dropped for: 9th grade males, 25% to 15%; 9th grade females, 29% to 16%; 12th grade males, 38% to 27%; and 12th grade females, 40% to 27% (MSS).

2004/2005 reported past-month smoking rates were higher than the state average for adults in the Northeast,

except for 18–24 year-old men and 21–24 year-old women. 18–20 year-old females reported the highest smoking rate: 47% (MNSASU).

The percent of male students reporting past-month chewing tobacco use in 2007 was higher in the Northeast region than the state average for 6th graders, 2% vs. 1%; 9th graders, 15% vs. 8%; and 12th graders, 25% vs. 19% (MSS).

Northeast students were more likely than the state average to report first having smoked all or part of a cigarette by age 13 or younger: 17% vs. 16% among males and 16% vs. 14% among females. Similarly, Northeast male students were slightly more likely to report first having smoked a cigar or used chewing tobacco by the age of 13 or younger: 14% vs. 9% (MSS).

Tobacco Consequences

The lung and bronchus cancer death rate in the Northeast Region increased changed from 7.2 per 10,000 (115 deaths) in 2000 to 7.7 per 10,000 (125 deaths) in 2006 among males, and from 5.0 per 10,000 (82 deaths) to 5.9

per 10,000 (95 deaths) among females. Comparatively, the state rate held steady for males at 5.0 per 10,000 and increased from 3.9 per 10,000 to 4.1 for females (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. Percent of smoking-attributable deaths may vary from one location to another.

Risk and Protective Factors

In 2007, students who reported past 30 day use of alcohol and tobacco were asked how they obtained those substances. Similar to all students in the state, Northeast students most often reported social access to alcohol (88%) and tobacco (71%). In addition, 12% reported buying alcohol and 25% reported taking it; 60% reported buying tobacco and 21% reported

taking it (MSS).

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 Northeast students, perception of tobacco harm was

reported by 89% of Northeast students, and perception of marijuana harm was reported by 81% of Northeast 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 76% for alcohol, 85% for tobacco and 83% for marijuana.

Other Drug Consumption

From 1998 to 2007, the percent of Northeast students reporting 30-day marijuana use dropped from 15% down to 11%. Northeast rates were equal to the state average in 2007 for 6th graders and 12th grade females, but higher for 9th grade males, 14% vs. 11%; 9th grade females, 12% vs. 9%; and 12th grade males, 25% vs. 23% (MSS).

In 2004/2005, Minnesota adults were asked if they'd smoked marijuana in the past month—5% of Northeast men

and 1% of Northeast women said they had, as compared to 6% of men and 3% of women in the state (MNSASU).

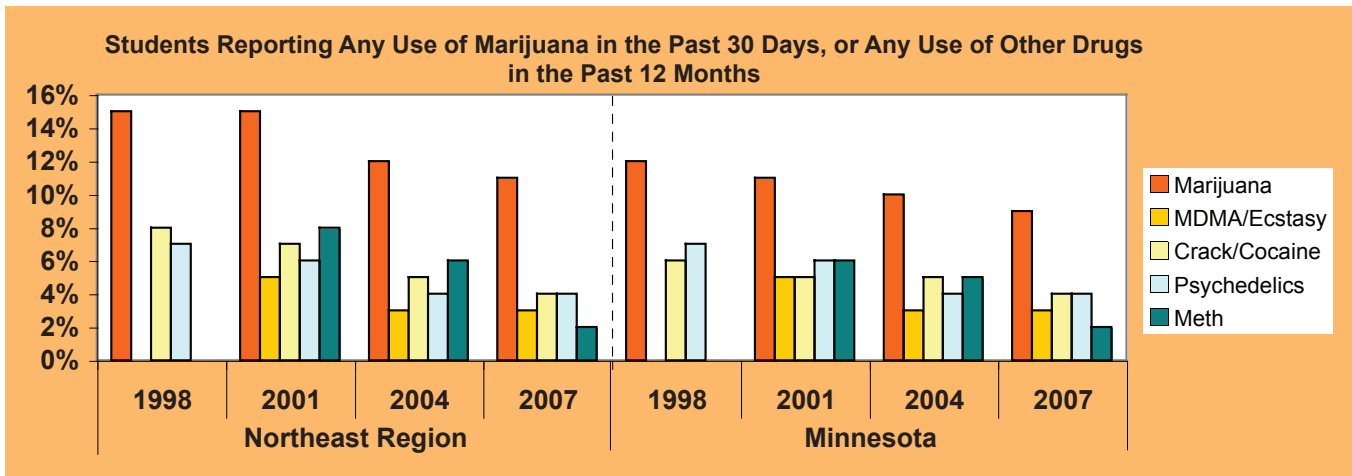
Reported 12 month use of a number of illicit drugs by students dropped from 1998 to 2007 (*see bar graph below*).

Reported rates of abuse of inhalants, stimulants and diet pills, and tranquilizers and sedatives, painkillers, and ADD/ADHD drugs were all higher than the state average among Northeast students in 2007. Generally, higher rates

were found among Northeast 9th graders and female students (MSS).

In 2004/2005, Northeast adults were less likely than the state average to report abuse of painkillers (men: 2% vs. 3%; women: 1% vs. 2%), and women were less likely to report abuse of tranquilizers/sedatives (3% vs. 4%). One percent or less of Northeast adults reported past-year use of methamphetamines, MDMA/Ecstasy, and/or psychedelics (MNSASU).

The US Census Bureau estimate for the 2007 Northeast region's population is 320,637. This is approximately 6.2% of the state's entire population. The population is about 94% White, 3% American Indian/Alaska Native, 1% African-American, 2% Hispanic/Latino, and 1% Asian/Pacific Islander.



Other Drug Consequences

The rate of adult prison inmates in the metro region, per 1,000 population, sentenced for drug offenses has roughly mirrored that of the state: ranging from 0.3 to 0.5 over the past five years. Among Northeast adults in prison for drug offenses in 2007, approx-

imately 60.5% were White, 28.9% were African-American or Black, 2.6% were Hispanic/Latino and 7.9% were American Indian/Alaska Native (DOC).

The rate per 1,000 population of Northeast area adults on probation for

drug offenses as governing sentence has fluctuated over the past 10 years, ranging from 1.9 to 3.9. Juvenile rates have also fluctuated, from 0.5 to 1.8. Rates may be influenced by pretrial diversion programs (DOC).

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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.

Tobacco consequence 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' Inmate Profile and Probation Survey.

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.