New Mexico Substance Abuse Epidemiology Profile

Substance Abuse Epidemiology Section Injury and Behavioral Epidemiology Bureau Epidemiology and Response Division New Mexico Department of Health

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Statewide Epidemiological and Outcomes Workgroup (SEOW)

SEOW is a core component funded by the Partnerships for Success 2015 grant. Under the Strategic Prevention Framework State Incentive Grant from SAMHSA over a decade ago, the SEOW guided the development of the first New Mexico Substance Abuse Epidemiology Profile as part of its mission to create a focus on community-based and data-driven planning and accountability. The on-going focus of the SEOW is the development and informed use of assessment data and indicators for use in community planning, prioritization and evaluation; and, the support of evidence-based strategies, policies and practices in all community prevention activity. The current membership of the SEOW includes: Laura Tomedi, Jim Davis, and Luigi Garcia Saavedra, NMDOH-ERD Substance Abuse Epidemiology Section: Karen Cheman and Heather Stanton, NMHSD-BHSD Office of Substance Abuse Prevention; Kimberly Wildharber, New Mexico Department of Transportation, Traffic Safety Bureau; Julie Krupcale, LDWI Bureau Chief; Michael Hock, CYFD Children's Behavioral Health; Patricia Lincoln, community member; Ann DelVecchio, community member; Pamela Drake, community member; Shelley Moeller, community member; Shelley Mann-Lev, community member; Sindy Sacoman, community member; Martha Waller and Liz Lilliott, PIRE (under contract to the OSAP); and, is coordinated and staffed by Tina Ruiz, McKenzie Wannigman, and Michael Coop of Coop Consulting, Inc.

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INTRODUCTION

New Mexico Substance Abuse Epidemiology Profile

The New Mexico Substance Abuse Epidemiology Profile is a tool for substance abuse prevention planners at the state, county, and community level. Its primary purpose is to support efforts related to the Statewide Epidemiological and Outcomes Workgroup (SEOW). The SEOW is intended to develop resources to help communities conduct needs assessments regarding substance use and its consequences; build capacity to address those needs; and plan, implement, and evaluate evidence-based programs, policies, and practices designed to address the intervening variables related to identified substance-related problems. This document will be useful to those preparing proposals for funding and to program planners designing substance abuse prevention interventions for other purposes. SEOW is funded by the New Mexico Human Services Department (NMHSD) Behavioral Health Services Division (BHSD) Office of Substance Abuse Prevention (OSAP) and the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (SAMHSA-CSAP)

Important Notes about Comparability to Previous Reports

This report is the sixth in a series that began with the New Mexico State Epidemiology Profile published in 2005, and continued with the publication of updates in 2010, 2011, 2013, and 2014. These reports are available at: http://nmhealth.org/about/erd/ibeb/sap.

Important methodological changes have occurred during the years. As a result, these reports may not be comparable with all others in the series, in several important ways. The following categories should not be compared between the reports in this series:

- Death counts and/or rates for any *Alcohol-Related Death* indicators should not be compared between the 2005 report and any later reports

- Race/ethnicity reporting for indicators should not be compared between the 2012 and subsequent reports and previous reports

- Beginning with 2011 estimates, the Behavioral Risk Factor Surveillance System (BRFSS) updated its surveillance methods. Any shift in prevalence between 2010 and 2011 must be interpreted with caution, as it may be partially due to change in methods necessary to keep up with changes in cell phone use in the US and take advantage of improved statistical procedures.

These methodological changes and their impact on the comparability of reports in this series are described, in more detail, in a technical note at the end of this section.

Also, prior reports (2005, 2010, and 2011 reports) reflected a special *small numbers rule* that was specific to those reports. This rule, devised by the SEOW during the design of the original 2005 report, suppressed the reporting of death rates for table cells based on fewer than two deaths per year. This special rule was replaced by the standard *NMDOH small numbers rule* used in other NMDOH publications. The NMDOH small numbers rule establishes suppression of reporting only for table cells based on three or fewer events coming from a population of fewer than 20 people.

How to Use this Report

This report presents commonly used indicators of substance abuse in New Mexico. These indicators include outcome measures (e.g., alcohol-related death) reported in the *Consequences* section, mental health indicators associated with substance abuse (e.g., depression) in the *Mental Health* section, and consumption measures (e.g., self-reported substance use behavior from statewide surveys) reported in the *Consumption* section. The presentation of each major indicator includes a text description of the major data findings; a detailed table with results by gender, age-group, and race/ethnicity; a table detailing county results by race/ethnicity; a bar chart and a map with rates for each New Mexico county; and additional charts illustrating other pertinent findings. For example, charts of rate trends are included for numerous indicators. There are also appendices that provide population denominators used in the calculation of death rates and substance abuse and mental health indicators from the National Survey on Drug Use and Health (NSDUH).

A combined five-year period is used when presenting death, emergency department visits, and hospital discharges. Combining counts over multiple years is necessary because in many of New Mexico's counties, there may be very few deaths (emergency department visits or hospital discharges) due to a given cause in any given year. Combining counts over multiple years allows the calculation of rates that are more stable and, therefore, more meaningful than rates calculated based on very few cases. In this report, death and hospital-related rates were calculated and reported for 2010-2014, the most current available five-year period.

INTRODUCTION (continued)

Use of this Report: The Problem Statements

This report presents considerable detail in the form of numbers, proportions, rates, and other statistical summaries, many of these can be found in tables and charts. This information is synthesized in *Problem Statements*, which provide a brief narrative overview of the data and detailed statistics. These *Problem Statements* are designed to help explain and frame the epidemiological data presented in each section of the report.

Use of this Report: Tables and Charts

Each of the outcome indicators is presented with at least two tables. Table 1 for each indicator presents number of events (deaths, emergency department visits, hospital discharges, or number of persons engaging in or experiencing a risk behavior) and their respective rates (or the weighted behavior prevalence rates) by sex, age-group (or grade, in the case of Youth Risk and Resiliency Survey [YRRS] data), and race/ethnicity. In sections that report on causes of death, these tables include the number of deaths, on the left side of the table, and age-adjusted death rates per 100,000 population, on the right side of the table. In sections that report on emergency department visits or hospital discharges, these tables include the number of emergency department visits or hospital discharges, on the left side, and age-adjusted rates per 100,000 population, on the right side. In sections that report on risk behaviors, these tables include an estimate of the number of persons engaging in or experiencing the risk behavior, on the left side, and the prevalence rate of the behavior in the population, on the right side. In sections that report specifically on youth risk behaviors, Table 1 includes only prevalence rates. These tables are very useful in determining the most important risk groups at the statewide level.

Table 2 for each indicator presents results for each NM county by race/ethnicity. Again, the number of events are presented on the left side of the table and the age-adjusted rates on the right side of the table. These tables are useful in determining which counties have the most severe substance use issues, and which racial/ethnic groups are at the highest risk within each county. Youth data are presented by county only.

The discussion of each indicator also includes a county bar chart that graphically presents age-adjusted death rates (or weighted behavior prevalence rates) for each NM county, in descending order. Adjacent to each county name, on the left side of the chart, the number of events occurring (or the estimated number of persons engaging in or experiencing the behavior) in the county and the percent of NM events occurring (or the weighted percent of New Mexicans engaging in or experiencing the behavior) in each county are presented. Counties with the highest rates are easily identified at the top of the chart, while counties with low rates are at the bottom. The state rate is depicted with a darker colored bar and, for most indicators, the most recent available US rate is also included, depicted with a cross-hatched bar, making it easy to compare the county rate to the state and national rate in each instance.

Finally, maps showing rates by county have been included for each indicator. The counties have been categorized and shaded in these maps according to the degree of the issue in the county. The map shading categories have been chosen to identify counties that have rates lower than the state rate, counties that have rates somewhat higher than the state rate, and counties that have rates substantially higher than the state rate. The latter category (corresponding to the darkest-shaded counties on each map) represents rates that are higher than the state rate by a selected amount. For maps based either on death or hospital-related event rates, this threshold are rates that are 50% or higher than the state rate; for most of the maps based on behavioral data, from either the adult BRFSS or the YRRS, this threshold are rates that are 25% higher than the state rate.

Use of this Report: Rates and Numbers

Both rates and the numbers of events are presented in the tables and charts of the Epidemiology Profile. While the rates are very important for indicating the degree of an issue in a given county or population group, they only provide part of the picture needed for comparing the burden of a problem from one county or group to another. The number of events also needs to be considered when making planning decisions. For instance, Rio Arriba County has an alcohol-related death rate (126 per 100,000 population), more than twice that of Bernalillo County (49.9 per 100,000). However, the number of alcohol-related deaths in Bernalillo County (1,774) is almost seven times the number in Rio Arriba County (259). While problems are more severe in Rio Arriba County (reflected in higher rates), Bernalillo County bears a larger proportion of the statewide burden (30.0% of all alcohol-related deaths in the state compared to 4.5% for Rio Arriba County). When prioritizing the distribution of resources and selecting interventions, it is important to look at both the total number of deaths and the death rate. Because of its extremely high rate of alcohol-related deaths, interventions that address this problem are very important in Rio Arriba County is also very important when locating interventions because it bears much of the statewide burden of alcohol-related deaths.

INTRODUCTION (continued)

Use of this Report: Why are some rates missing from the tables?

For survey-based measures of risk behaviors (i.e., BRFSS and YRRS), rates based on fewer than 50 respondents for a given table cell have been removed from this report. While prevalence estimates can be calculated based on very small numbers of respondents, estimates based on fewer than 50 respondents can be unstable and are often misleading. Such estimates are of questionable value for planning purposes and have been excluded from this report.

Note that the suppression of death rate reporting for table cells based on fewer than 2 deaths per year, which was a feature of previous reports in this series, has been discontinued beginning with the 2013 report. This change has been implemented to be consistent with other NMDOH reports, which suppress mortality reporting only for table cells which violate the NMDOH *small numbers rule*.

Other Data Resources

The data presented here come from various sources. Other valuable publications have been written utilizing these data sources. The New Mexico Substance Abuse Epidemiology Profile should be seen as complementary to these other publications, and program planners will want to refer to these other documents for additional information. These publications include:

- Other reports produced by the Substance Abuse Epidemiology Section (SAES), Injury and Behavioral Epidemiology Bureau (IBEB), Epidemiology and Response Division (ERD), New Mexico Department of Health (NMDOH). Available online at: http://nmhealth.org/about/erd/ibeb/sap/

- New Mexico Behavioral Risk Factor Surveillance System (BRFSS) reports, produced by the Survey Section, IBEB-ERD-NMDOH. Available online at: http://archive.nmhealth.org/erd/healthdata/health_behaviors.shtml

 New Mexico Youth Risk and Resiliency Survey (YRRS) reports, NMDOH, NM Public Education Department, and the UNM Prevention Research Center. Available online at: http://archive.nmhealth.org/erd/healthdata/yrrs.shtml

- Emergency Department Data (EDD) Annual Reports, produced by the Health Systems Epidemiology program, ERD-NMDOH Available online at: http://nmhealth.org/about/erd/hsep/edd/

 Hospital Inpatient Discharge Data (HIDD) Annual Reports, produced by the Health Systems Epidemiology program, ERD-NMDOH Available online at: http://nmhealth.org/about/erd/hsep/hidd/

INTRODUCTION (continued)

Technical Note: Methodological Changes since Previous Reports

Changes to the Definition of Alcohol-Related Death

The Centers for Disease Control and Prevention (CDC's) revised Alcohol-Related Disease Impact (ARDI) Alcohol-Attributable Fractions (AAFs) were implemented in the 2010 and subsequent reports. AAFs are the proportion of a given cause of death that can be attributed to excessive alcohol use. These AAFs are central to the estimation of alcohol-related deaths and alcohol-related death rates in this report. The revised CDC ARDI AAFs are the standard AAFs recommended for use by the CDC. These AAFs were first reported in Midanik, L., Chaloupka, F., Saitz, R., Toomey, T., Fellows, J., Dufour, M., Landen, M., Brounstein, P., Stahre, M., Brewer, R., Naimi, T., & Miller, J. (2004). Alcohol-attributable deaths and years of potential life lost - United States, 2001. *Morbidity and Mortality Weekly Report, 53*[37]:866-870). The revised ARDI AAFs are further described on the CDC website (https://http://nccd.cdc.gov/DPH_ARDI/default/Default.aspx).

Key differences between the revised CDC's ARDI AAFs used in the 2010 and subsequent reports and the AAFs used in the 2005 report include: (a) elimination of AAFs for a number of alcohol-related causes of death (e.g., diabetes mellitus); (b) addition of AAFs for a number of alcohol-related causes of death (e.g., liver cancer); (c) changes to the AAFs for many of the causes of alcohol-related death retained from the previous version (e.g., reduction in the AAF for unspecified liver cirrhosis); and (d) implementation of age-and-sex-specific AAFs for motor vehicle traffic crash deaths.

The net impact of these changes in the AAFs has been to: (a) reduce the overall alcohol-related death rate by about 15% in the 2010 and subsequent reports compared to the 2005 report; (b) to reduce the alcohol-related chronic disease death rate by about 30% compared to the 2005 report; (c) to increase the alcohol-related injury death rate by about 5% compared to the 2005 report; and (d) to change the relative ranking of these two high-level alcohol-related cause-of-death categories compared to the 2005 report, so that alcohol-related injury rates are now higher than alcohol-related chronic disease rates (the reverse of the rank order in the original report).

These changes in the AAFs make the 2010 and subsequent reports' counts and rates for all the alcoholrelated death indicators non-comparable to the 2005 report. For this reason, comparison of alcohol-related death indicators in these reports to similarly-labeled indicators in the 2005 report is strongly discouraged. In order to support trend analysis based on the revised CDC's ARDI AAFs, multi-year trend charts have been added to the Alcohol-Related Death sections in the later reports.

Changes to Race/Ethnicity Categories

The original 2005 report in this series used the National Center for Health Statistics (NCHS) standard race/ethnicity categories for reporting by race/ethnicity. These NCHS standard race/ethnicity categories break out Hispanic for each race category (e.g., White, Black, etc.); and combine the Hispanic portion of each race category (e.g., White Hispanic, Black Hispanic, etc.) when reporting the Hispanic category.

The 2010 report implemented new race/ethnicity reporting standards used by NMDOH for all indicators except those based on the YRRS. These NMDOH standard race/ethnicity categories report only the White Hispanic category as Hispanic; and report the Hispanic subset of other race groups (e.g., Black Hispanic) in the corresponding race category (e.g., Black). The 2011 report implemented the NMDOH race/ethnicity reporting categories for all YRRS-based indicators as well.

In 2012, NMDOH adopted a new standard for reporting race/ethinicity. The New Mexico reporting standard uses the estimates by bridged race and Hispanic ethnicity. Presentation of race and ethnicity will be done together in the same table. Race/ethnicity will be viewed as a single social and cultural construct. Persons designated as Hispanic ethnicity, regardless of race, will be categorized as 'Hispanic.' Persons not designated as Hispanic will be categorized by their single race ('Black or African American,' 'American Indian or Alaska native,' 'Asian or Pacific Islander,' 'White,' or 'Other'). For more information, refer to the *NMDOH Guidelines for Race/Ethnicity Data* at https://ibis.health.state.nm.us/docs/Standards/Race_Guidelines.pdf.

These changes in the race/ethnicity categories make the 2012 and subsequent reports' counts and rates by race/ethnicity comparable to each other but not comparable to the 2005 report.

EXECUTIVE SUMMARY

Consequences of Substance Abuse

Introduction

Eight of the ten leading causes of death in New Mexico are, at least partially, caused by the abuse of alcohol, tobacco, or other drugs. In 2014, the ten leading causes of death in New Mexico were diseases of the heart, malignant neoplasms, unintentional injuries, chronic lower respiratory diseases, cerebrovascular diseases, diabetes, chronic liver disease and cirrhosis, suicide, Alzheimer's disease, and influenza and pneumonia. Of these, chronic liver disease, unintentional injuries, and suicide are associated with alcohol use; chronic lower respiratory diseases and influenza and pneumonia are associated with tobacco use; heart disease, malignant neoplasms, and cerebrovascular diseases are associated with both alcohol and tobacco use; and unintentional injuries and suicide are associated with the use of other drugs.

Alcohol-Related Deaths and Hospitalizations

Over the past 30 years, New Mexico has consistently had among the highest alcohol-related death rates in the United States, and it has had the highest alcohol-related death rate since 1997. The negative consequences of excessive alcohol use in NM are not limited to death, but also include domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and other injuries, mental illness, and a variety of other medical problems. In 2006, the economic cost of excessive alcohol consumption in New Mexico was more than \$1.9 billion, or \$960 per person (Sacks, J., Roeber, J., Bouchery, E., Gonzales, K., Chaloupka, F., & Brewer, R. (2013). State costs of excessive alcohol consumption, 2006. *American Journal of Preventive Medicine*, *45*(4):474–485).

Death rates from alcohol-related causes increase with age. However, one in six deaths among working age adults (20-64) in NM is attributable to alcohol. Male rates are substantially higher than female rates. American Indians have higher alcohol-related death rates than other race/ethnicities. Rio Arriba and McKinley counties have extremely high alcohol-related death rates, driven by high rates in the American Indian and Hispanic male populations, respectively. The counties with the most deaths for the five-year period 2010-2014 were Bernalillo, San Juan, Santa Fe, Doña Ana, and McKinley. New Mexico has extremely high death rates due to both alcohol-

- <u>Alcohol-Related Chronic Disease Death.</u> NM's rate of death due to alcohol-related chronic diseases is roughly twice the national rate. Death rates increase with age. American Indians, both male and female, and Hispanic males have extremely high rates. As with total alcohol-related death, Rio Arriba and McKinley counties have the highest rates in the state.

Alcohol-related chronic liver disease (AR-CLD) is the disease that accounts for the most deaths due to alcohol-related chronic disease. AR-CLD death rates are extremely high among American Indians, both male and female, and Hispanic males. The high rates among American Indians and Hispanic males between the ages of 35 and 64 represent a tremendous burden in terms of years of potential life lost (YPLL). While Bernalillo County has the highest number of deaths due to AR-CLD (565 for the years 2010-2014), two counties that stand out for their very high rates are Rio Arriba and McKinley counties, which have rates that are more than four times the national rate.

Chronic liver disease hospitalizations (CLD-HIDD) can provide information on CLD risk at an earlier time point in the disease's development then AR-CLD mortality and number of visits can be used as a measure of the impact of CLD on the medical system. The rate of CLD-HIDD increased from 2010 to 2014. Women are at lower risk than men. Women who identify as Asian or Pacific Islander have the lowest rates whereas men who identify as American Indian have the highest rates. Cibola County has the highest rate of CLD-HIDD, followed by Rio Arriba, Guadalupe, and McKinley. Los Alamos County had the lowest rate. It is important to note that federal facilities (e.g. Indian Health Services and Veterans Administration) are not included in these results.

- <u>Alcohol-Related Injury Death.</u> NM's rate of alcohol-related injury death is 1.7 times the national rate. In the current reporting period (2010-2014) alcohol-attributable non-alcohol poisoning (e.g., drug overdose) surpassed alcohol-related motor vehicle traffic crashes and falls as the leading cause of alcohol-related injury death; and numerous other types of injury death are also associated with excessive alcohol use (particularly binge drinking). Deaths from drug overdose, a sizeable portion of which are partially attributable to alcohol, have increased substantially in recent years. Males are more at risk for alcohol-related injury death than females, with American Indian males at particularly elevated risk.

Consequences of Substance Abuse (continued)

New Mexico's alcohol-related motor vehicle traffic crash (AR-MVTC) death rate has decreased dramatically over the past 30 years. After substantial declines during the 1980's and 1990's, NM's rate stagnated for almost ten years. However, a comprehensive program to prevent driving while intoxicated (DWI), initiated in 2004, resulted in substantial rate declines, particularly during the period 2005-2008. Nonetheless, rate disparities remain: both male and female American Indians have elevated rates, especially among middle age males (age 25-64). Catron, Harding, Union, Mora, Sandoval, and McKinley are the counties with the highest alcohol-impaired motor vehicle traffic crash (AI-MVTC) death rates. However, Catron, Harding and Union counties have low number of deaths, whereas McKinley and Sandoval counties are second and sixth in number of deaths, respectively.

Smoking-Related Death

Historically, New Mexico has had one of the lowest smoking-related death rates in the nation. Nonetheless, New Mexico's burden o death associated with smoking is considerably greater than the burden associated with alcohol and other drugs. Among all racial/ethnic groups, males have higher smoking-related death rates than females. Among males, Blacks have the highest rates, followed by Whites. Among females, Whites have the highest rates, followed by Blacks. The counties with the highest rates and relatively heavy burdens of smoking-related death (i.e., 20 or more deaths a year) are Sierra, Quay, Torrance, Lea, and Chaves. The high rates in most of these counties, and in the state overall, are driven by high rates among Whites.

Total Drug Overdose Death

New Mexico has the second highest drug overdose death rate in the nation and the consequences of drug use continue to burden New Mexico communities. Drug overdose death rates remained higher for males than for females. The highest drug overdose death rate was among Hispanic males, followed by Blacks. Rio Arriba County had the highest drug overdose death rate in the state. Bernalillo County continued to bear the highest burden of drug overdose death in terms of total numbers of deaths. Unintentional drug overdoses account for almost 90% of drug overdose deaths. The most common drugs causing unintentional overdose death for the period covered in this report were prescription opioids (i.e., methadone, oxycodone, morphine; 48%), heroin (34%), tranquilizers/muscle relaxants (23%), cocaine (17%), methamphetamine (16%) and antidepressants (12%). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available.

Opioid Overdose Related Emergency Department Visits (OOD-EDV) have increased 98.4% in the US between 2004 and 2009. In NM, between 2010 and 2014, ED vists increased 46.3%. Male rates of OOD-EDV were higher compared to female rates. For both groups, Whites had the highest rates. Rio Arriba County had the highest rate of OOD-EDV during 2010-2014 with 183.7 OOD-EDVs per 100,000

Mental Health

Suicide and Mental Health

Suicide is a serious and persistent public health problem in New Mexico. Over the period 1981 through 2010, New Mexico's suicide rate has consistently been among the highest in the nation, at 1.5 to 1.9 times the U.S. rate. Male suicide rates are three times or more those of females, across the age range and among all racial/ethnic groups For the five-year period 2010-2014, fourteen counties had suicide rates that were more than twice the most recent available U.S. rate.

Indicators in this report also document the prevalence of frequent mental distress and current depression among New Mexico adults; persistent sadness or hopelessness, suicidal ideation, and suicide attempt among New Mexico youth; and the association between risk and resiliency factors and substance abuse and mental health indicators, among New Mexico youth.

Alcohol, Tobacco, and Other Drug Consumption Behavior

Substance abuse behaviors are important to examine not only because substance abuse can lead to very negative consequences in the short-term, but also because substance abuse can have long-term negative consequences. For example, while drinking by youth is a behavior that can lead directly to alcohol-related injury or death, it can also lead to very serious consequences in adulthood, ranging from alcohol abuse or dependence to a variety of diseases associated with chronic heavy drinking.

Substance Use Indicators included in this Report

- <u>Adult Binge Drinking.</u> Binge drinking (defined as drinking five or more drinks on a single occasion for men, or four or more drinks on a single occasion for women) is associated with numerous types of injury death, including motor vehicle traffic crash fatalities, drug overdose, falls, suicide, and homicide. Among adults (age 18 or over) of all ethnicities, binge drinking was more commonly reported by males than females, mirroring higher rates of alcohol-related injury death among males. Among males, Hispanics were more likely to report binge drinking than other race/ethnicities. Young adults (age 18-24) were more likely than other age groups to report binge drinking.

- <u>Youth Current Drinking</u>. Any alcohol consumption by a person under the age of 21 is considered to be excessive drinking. Alcohol is the most commonly used drug among youth in New Mexico, more than tobacco or other drugs. However, contrary to common perception, most high school students do not drink. In 2013, 28.9% of high school students reported that they were current drinkers. This is a significant decrease from 43.3% in 2005.

- <u>Youth Binge Drinking</u>. Youth binge drinking has significantly decreased over the last decade. In 2013, New Mexico public high school students were less likely to report binge drinking than U.S. high school students. Among New Mexico high school students, binge drinking was more commonly reported by upper grade students than lower grade students. There was no significant difference in the binge drinking rate between male and female high school students. Binge drinking rates were lower among White youth than other racial/ethnic groups.

- <u>Youth Having Ten or More Drinks</u>. On average, underage drinkers consume more drinks per drinking occasion than adult drinkers and risk of harm increases as the number of drinks consumed on an occasion increases. Students in the 12th grade are more likely to drink ten or more drinks on an occasion then 9th grade students. Although boys and girls are equally likely to drink (see current drinking indicator), boys are more than twice as likely to drink ten or more drinks ten or more drinks on an occasion as girls.

- <u>Adult Heavy Drinking</u>. In 2014, adult heavy drinking (defined as drinking, on average, more than two drinks per day, for men; or more than one drink per day, for women) was more commonly reported in New Mexico (5.7%) than in the rest of the nation (5.0%). Heavy drinking was more prevalent among young (age 18-24) and middle-aged (age 25-64) adults, with 6.3% and 7.6% of these age groups, respectively, reporting past-month heavy drinking. New Mexico men were 1.5 times more likely to report chronic drinking than women (6.9% v. 4.5%).

- <u>Adult Drinking and Driving</u>. In 2014, adult past-30-day drinking and driving was reported in New Mexico by 1.2% of adults aged 18 and over. Past-30-day drinking and driving was more prevalent among young (age 18-24) and middle-age (age 25-64) adults than among older adults (age 65+). New Mexico men were almost six times more likely to report drinking and driving than women (1.9% v. 0.3%). Hispanic males (2.4%) were more likely to report drinking and driving than American Indian (1.8%) and White (1.7%) males.

- <u>Youth Drinking and Driving</u>. In 2013, New Mexico high school students were less likely to report driving after drinking alcohol than other U.S. students. Driving after drinking was more common among boys than girls, and was less common among Hispanic and American Indian youth than among other racial/ethnic groups. Twelfth grade students were more likely to report drinking and driving than ninth and tenth grade students.

Alcohol, Tobacco, and Other Drug Consumption Behavior (continued)

- <u>Youth Drug Use.</u> In 2013, past-30-day marijuana and cocaine use were more prevalent among New Mexico students than among U.S. students. The use of marijuana, cocaine, other illicit drugs (heroin, methamphetamine, inhalants, or ecstasy), and painkillers was more commonly reported by Black students than by students in other racial/ethnic groups.

- <u>Adult Tobacco Use.</u> In 2014, the prevalence of adult smoking was slightly lower in New Mexico than in the nation overall (19.1% v. 19.6%). Smoking was most prevalent among middle-aged groups, and was more common among men than women for all age categories.

-<u>Youth Tobacco Use.</u> In 2013, smoking was slightly less prevalent among New Mexico high school students (14.4%) than in the nation overall (15.7%). New Mexico boys were more likely than girls to report current smoking (16.4% vs. 12.3%). American Indian high school students (15.7%) were more likely to report current cigarette smoking than Asian or Pacific Islander (11.3%) and White (12.3%) students.

Data Sources

National/New Mexico population data, 1981-1989: U.S. Census Bureau. Estimates of the Population of States by Age, Sex, Race, and Hispanic Origin: 1981 to 1989. Available from:

http://www.census.gov/popest/data/historical/1980s/index.html as of December 8, 2011.

<u>National/New Mexico population data, 1990-1999</u>: U.S. Census Bureau. Estimates of the Population of States by Age, Sex, Race, and Hispanic Origin: 1990 to 1999, Internet Release Date August 30, 2000. Available from: http://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm#july1999 as of September 23, 2010.

<u>National population data, 2000-2010:</u> National Center for Health Statistics (NCHS). Intercensal estimates of the resident population of the United States for July 1, 2000-July 1, 2010, by year, county, age, bridged race, Hispanic origin, and sex. Prepared under a collaborative arrangement with the U.S. Census Bureau; released November 17, 2011. Available from: http://www.cdc.gov/nchs/nvss/bridged_race.htm as of November 17, 2011.

<u>New Mexico population data, 2000-2012:</u> University of New Mexico (UNM), Geospatial and Population Studies (GPS). Annual Estimates of the Population of New Mexico by County, Age, Sex, Race, and Hispanic Origin, 2000 to 2012 (7/02/14 update).

<u>National death data:</u> National Center for Health Statistics (NCHS). Multiple Cause-of-Death files, 1981-2010, machine readable data files and documentation. National Center for Health Statistics, Hyattsville, Maryland. Available from: http://www.cdc.gov/nchs/data_access/VitalStatsOnline.htm#Mortality_Multiple. Death rates were calculated by the New Mexico Department of Health (NMDOH), Epidemiology and Response Division (ERD), Injury and Behavioral Epidemiology Bureau (IBEB), Substance Abuse Epidemiology Section (SAES).

<u>New Mexico death data:</u> New Mexico Department of Health, Epidemiology and Response Division, Bureau of Vital Records and Health Statistics (BVRHS). Death rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Section.

<u>National/New Mexico motor vehicle traffic crash fatality data:</u> National Highway Traffic Safety Administration (NHTSA), Fatality Analysis Reporting System (FARS).

(1) VMT reporting: Fatalities, Fatalities in Crashes by Driver Alcohol Involvement, Vehicle Miles Traveled (VMT), and Fatality Rate per 100 Million VMT, by State, 1982-2012. Report provided by NHTSA National Center for Statistics and Analysis, Information Services Team. 2008-2012 death rates per 100 Million VMT calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Section.

Data Sources (continued)

(2) Per 100,00 population reporting: Persons killed, by state and Highest Driver Blood Alcohol Concentration (BAC) in Crash - State: USA, Year. Available from:

http://www-fars.nhtsa.dot.gov/States/StatesAlcohol.aspx. Death rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Section.

<u>New Mexico Emergency Department Visits</u>: New Mexico Department of Health, Epidemiology and Response Division, Health Systems Epidemiology Unit. Visit rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Section according to methodology described in: nmhealth.org/data/view/newsletter/1729/

<u>New Mexico Hospital Inpatient Discharges</u>: New Mexico Department of Health, Epidemiology and Response Division, Health Systems Epidemiology Unit. Discharge rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Section

<u>National adult behavioral data:</u> Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adult and Community Health. Behavioral Risk Factor Surveillance System Online Prevalence Data, 1995-2012. Available from: http://www.cdc.gov/brfss/data_tools.htm.

<u>New Mexico adult behavioral data:</u> New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Survey Unit. New Mexico Behavioral Risk Factor Surveillance System (BRFSS). More reporting available from:

http://archive.nmhealth.org/erd/healthdata/health_behaviors.shtml as of July 1, 2014.

<u>National youth behavioral data:</u> Centers for Disease Control and Prevention (CDC). Surveillance Summaries, June 8, 2012. MMWR. 201:61(SS-4). More reporting available from: http://www.cdc.gov/HealthyYouth/yrbs/index.htm as of July 1, 2014.

<u>New Mexico youth behavioral data:</u> New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Survey Unit; and the New Mexico Public Education Department, School and Family Support Bureau. New Mexico Youth Risk and Resiliency Survey (YRRS). More reporting available from:

http://archive.nmhealth.org/erd/healthdata/health_behaviors.shtml as of July 1, 2014.

<u>New Mexico substance use disorder and mental health data:</u> Substance Abuse and Mental Health Services Administration, Office of Applied Studies. Sub-state Estimates from the 2008-2010 National Surveys on Drug Use and Health and Statewide Estimates from 2011-2012. Available from:

http://www.samhsa.gov/data/NSDUH/substate2k10/toc.aspx,

http://www.samhsa.gov/data/NSDUH/2k12State/Tables/NSDUHsaeTables2012.pdf

More reporting available from: http://www.samhsa.gov/data/population-data-nsduh as of January 12, 2015

New Mexico Substance Abuse Epidemiology Profile

Section 1

Consequences

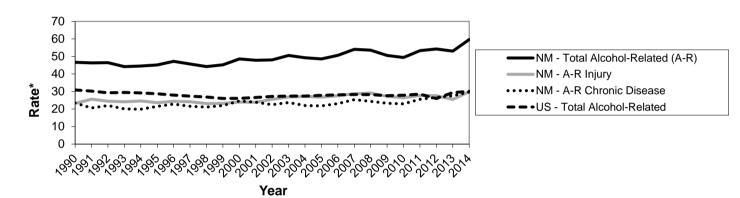
ALCOHOL-RELATED DEATH

Problem Statement

The consequences of excessive alcohol use are severe in New Mexico. New Mexico's total alcohol-related death rate has ranked first, second, or third in the U.S. since 1981; and 1st for the period 1997 through 2010 (the most recent year for which state comparison data are available). The negative consequences of excessive alcohol use in New Mexico are not limited to death but also include domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and other injuries, mental illness, and a variety of other medical problems. Nationally, one in ten deaths among working age adults (age 20-64) is attributable to alcohol. In New Mexico this ratio is one in six deaths.

Chart 1 shows the two principal components of alcohol-related death: deaths due to chronic diseases (such as chronic liver disease), which are strongly associated with chronic heavy drinking; and deaths due to alcohol-related injuries, which are strongly associated with binge drinking. Each of these categories will be considered in more detail later in this report. New Mexico's total alcohol-related death rate increased 16% from 1990 through 2012, driven by a 19% increase in alcohol-related injury death rates from 2001 through 2012. By contrast, the US alcohol-related death rate decreased eight percent from 1990 through 2011. Although the alcohol-related chronic disease death rate has remained fairly stable from 1990 to 2009 in NM, from 2010 to 2012 there has been a 16% increase in the alcohol-related chronic disease death rate.





* Rate per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES Table 1: Alcohol-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Rate	es*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	57	559	88	704	28.4	266.8	283.9	185.0
	Asian/Pacific Islander	1	12	3	16	4.2	30.5	57.6	26.0
	Black	7	51	13	71	15.2	82.4	136.6	63.8
	Hispanic	153	1,311	318	1,782	15.2	110.3	157.1	82.9
	White	71	929	447	1,446	12.5	80.6	110.9	57.5
	Total	289	2,887	875	4,051	15.6	108.9	134.3	77.9
Female	American Indian	22	267	54	343	11.3	116.2	120.5	80.0
	Asian/Pacific Islander	1	5	1	8	5.6	9.7	16.4	9.7
	Black	1	12	4	17	2.7	24.7	42.8	18.4
	Hispanic	46	433	174	653	4.7	35.9	68.2	29.1
	White	23	401	302	726	4.3	34.1	63.3	25.8
	Total	94	1,122	536	1,753	5.3	41.4	67.4	31.4
Total	American Indian	79	827	141	1,047	19.9	187.9	187.4	128.8
	Asian/Pacific Islander	3	17	5	24	4.9	18.9	32.6	16.5
	Black	8	62	18	88	9.6	57.4	87.7	43.1
	Hispanic	200	1,744	492	2,435	10.0	72.8	107.6	55.1
	White	94	1,330	749	2,172	8.5	57.1	85.0	41.2
	Total	384	4,008	1,411	5,804	10.6	74.8	97.5	54.0

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES New Mexico Substance Abuse Epidemiology Profile

Page 3

ALCOHOL-RELATED DEATH (continued)

Problem Statement (continued)

Table 1 shows that death rates from alcohol-related causes increase with age. However, there were substantial numbers of alcohol-related deaths in the 0-24 year age category (these are mostly injury-related); and large numbers and high rates of alcohol-related death in the 25-64 year age category (due to both chronic disease and injury). Table 1 also shows extremely high alcohol-related death rates among American Indians (more than twice the state rate for both males and females); and a relatively high rate among Hispanic males relative to White non-Hispanic males. As will be shown in later sections, the rate disparities for American Indian males are driven by this group's relatively high rates of both alcohol-related injury and alcohol-related chronic disease death; whereas the rate disparities for Hispanic males and American Indian females are driven largely by their relatively high alcohol-related chronic disease death rates.

Table 2 shows that Rio Arriba and McKinley counties had the highest rates of alcohol-related death, with rates more than twice the state rate and almost four times the national rate. Several other counties (Cibola, San Miguel, San Juan, and Taos) had a substantial burden (20 or more alcohol-related deaths per year) and rates more than twice the U.S. rate. High rates among American Indian males and females drive the rates in McKinley, Cibola, and San Juan counties; Rio Arriba has high rates among both Hispanic and American Indian males and females; deaths among Hispanic males drive the high rates in San Miguel and Taos counties (data by gender not shown).

Table 2: Alcohol-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

			Dea	aths					Ra	ites*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	141	12	45	799	725	1,743	118.1	16.1	45.9	55.3	41.5	49.9
Catron	1	0	0	3	8	12	172.5	0	0.0	87.2	51.8	61.7
Chaves	1	0	2	84	90	177	37.9	0.0	28.5	57.2	48.0	52.3
Cibola	61	0	0	27	21	109	116.3	0.0	0.0	54.2	55.3	76.2
Colfax	0	0	0	25	14	40	0.0	0.0	0.0	73.5	30.7	50.7
Curry	1	1	6	34	37	79	53.5	17.9	44.8	46.2	26.3	33.3
De Baca	0	0	0	2	3	5	0.0	0.0	0.0	56.2	44.3	49.3
Dona Ana	4	2	6	219	171	405	53.1	24.8	41.4	35.7	41.1	37.9
Eddy	1	0	0	60	77	138	32.8	0.0	0.0	53.5	48.5	48.7
Grant	2	0	1	42	48	93	205.2	0.0	180.3	56.1	48.3	53.8
Guadalupe	0	0	0	17	1	18	0.0	0.0	0.0	80.2	28.2	67.4
Harding	0	0	0	0	0	1	0.0	0.0	0.0	0.0	0.0	8.6
Hidalgo	0	0	0	9	6	15	0.0	0	0.0	65.4	46.0	57.8
Lea	0	1	8	55	70	135	0.0	31.7	60.1	45.3	45.5	43.1
Lincoln	2	0	0	10	42	54	99.9	0.0	0.0	37.4	46.2	42.7
Los Alamos	0	0	0	4	24	28	0.0	0.0	0.0	29.6	27.9	27.0
Luna	0	0	2	24	34	60	0.0	0.0	189.6	35.0	54.7	41.3
McKinley	345	0	1	17	20	383	144.8	0.0	27.5	39.3	42.7	114.7
Mora	0	0	0	13	1	15	0.0	0.0	0.0	69.9	10.5	61.1
Otero	29	1	7	41	91	170	167.2	24.3	56.4	41.7	43.9	49.0
Quay	0	0	0	20	15	36	0.0	0.0	0.0	99.8	53.7	70.9
Rio Arriba	51	0	0	190	18	259	188.5	0.0	0.0	131.2	50.1	126.0
Roosevelt	0	0	0	9	21	31	0.0	0.0	0.0	31.6	35.1	32.3
Sandoval	96	1	4	96	129	332	131.3	10.0	26.9	46.3	33.5	48.8
San Juan	257	1	3	53	113	426	123.9	41.8	58.1	54.5	35.8	69.8
San Miguel	0	1	0	92	21	115	0.0	151.1	0.0	78.8	56.2	73.3
Santa Fe	13	1	1	251	152	422	82.2	8.1	10.0	69.3	37.5	52.9
Sierra	1	0	0	9	44	55	69.3	0.0	0.0	49.4	73.2	66.8
Socorro	17	0	0	30	23	71	214.6	0.0	0.0	69.6	52.2	78.4
Taos	11	0	0	63	39	113	104.5	0.0	0.0	62.7	48.7	58.7
Torrance	2	0	0	18	27	47	111.2	0.0	0.0	61.7	50.8	55.1
Union	0	0	0	4	5	10	0.0	0.0	0.0	43.1	34.9	35.1
Valencia	9	2	2	115	79	207	84.9	98.2	33.9	54.5	48.9	52.2
New Mexico	1,047	24	88	2,435	2,172	5,804	128.8	16.5	43.1	55.1	41.2	54.0

* All rates are per 100,000, age-adjusted to the 2000 US standard population

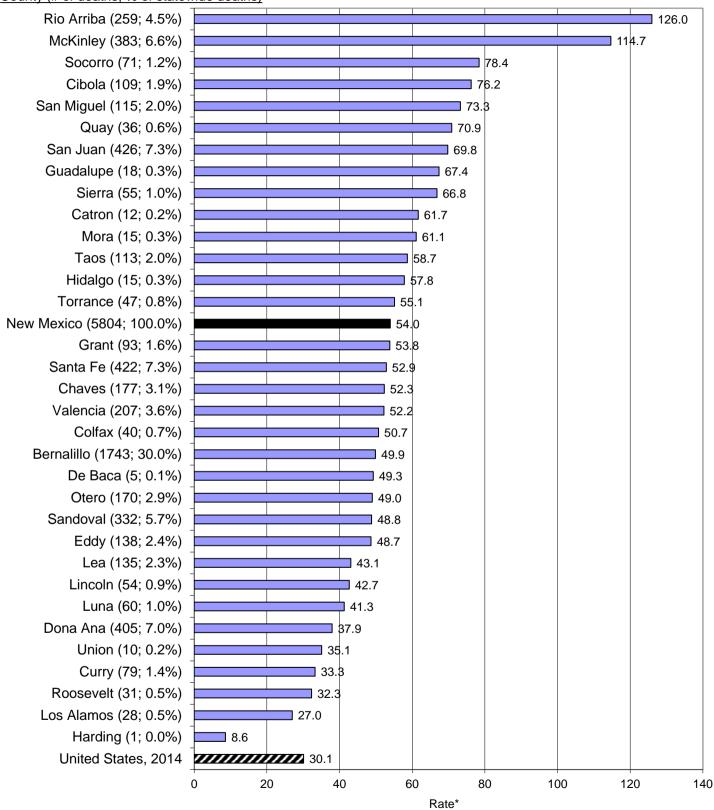
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

New Mexico Substance Abuse Epidemiology Profile

ALCOHOL-RELATED DEATH (continued)

Chart 2: Alcohol-Related Death Rates* by County, New Mexico, 2010-2014

County (# of deaths; % of statewide deaths)

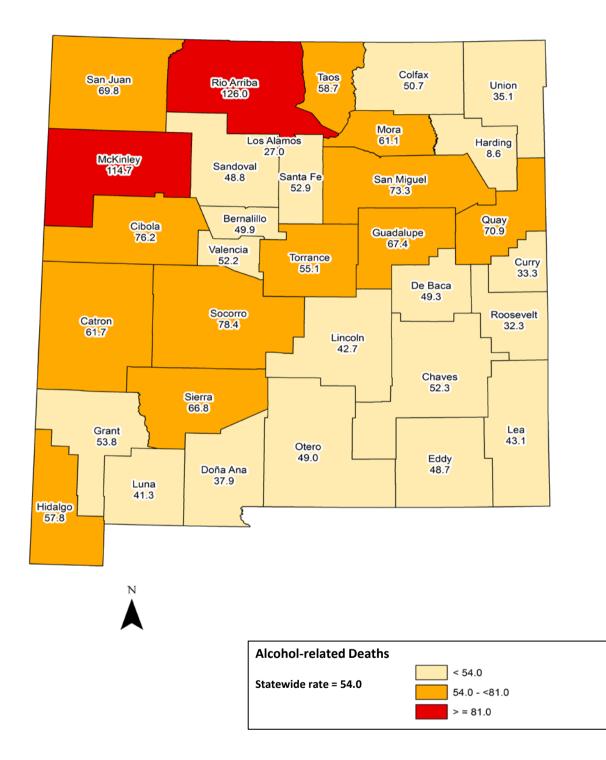


* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES New Mexico Substance Abuse Epidemiology Profile

ALCOHOL-RELATED DEATH (continued)

Chart 3: Alcohol-Related Death Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

ALCOHOL-RELATED CHRONIC DISEASE DEATH

Problem Statement

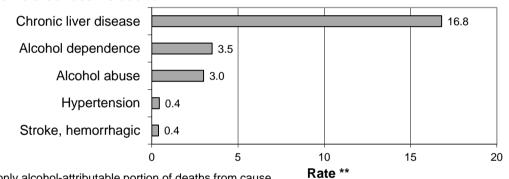
Chronic heavy drinking (defined as drinking, on average, more than two drinks per day for men, and more than one drink per day for women) often is associated with alcoholism or alcohol dependence, and can cause or contribute to a number of diseases, including alcoholic liver cirrhosis. For the past 15 years, New Mexico's death rate from alcohol-related chronic disease has consistently been first or second in the nation, and 1.5 to two times the national rate. Furthermore, while the national death rate from alcohol-related chronic disease decreased 12% from 1990-2011, New Mexico's rate increased seven percent from 1990 to 2012.

Chart 1 shows the five leading causes of alcohol-related chronic disease death in New Mexico during 2010-2014. Alcoholrelated chronic liver disease (AR-CLD) was the leading cause of alcohol-related death overall, and of alcohol-related chronic disease death during this period. This cause of death will be discussed in more detail later in this report. New Mexico also had the highest rate of alcohol dependence death in the U.S. for the period 1999 through 2010 (the most recent year for which state comparison data is available).

Table 1 shows that death rates from alcohol-related chronic diseases increase with age. The large number of deaths in the 25-64 age category illustrates the very large burden of premature mortality associated with alcohol-related chronic disease. The high rates in this age category among American Indians (both males and females) and Hispanic males further illustrate the heavy burden of premature death due to heavy drinking in these racial/ethnic groups.

Chart 1: Leading Causes of Alcohol-Related Chronic Disease Death, New Mexico, 2010-2014

Alcohol-related* deaths due to:



* Rates reflect only alcohol-attributable portion of deaths from cause

** Rate per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

Table 1: Alcohol-Related Chronic Disease Deaths/Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Rate	es*	
Cov		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	4	298	60	362	2.1	142.0	195.6	98.9
	Asian/Pacific Islander	0	2	1	3	0.0	6.2	14.2	5.5
	Black	0	22	10	32	0.0	35.6	100.0	29.8
	Hispanic	4	731	229	963	0.4	61.5	112.9	45.3
	White	3	471	242	716	0.5	40.9	60.0	25.5
	Total	11	1,536	545	2,092	0.6	57.9	83.6	38.4
Female	American Indian	1	195	38	233	0.3	84.6	86.0	54.9
	Asian/Pacific Islander	0	3	1	4	0.0	5.2	9.9	4.6
	Black	0	6	2	8	0.0	13.0	21.7	8.6
	Hispanic	3	242	97	342	0.3	20.0	38.3	15.0
	White	1	194	106	301	0.1	16.5	22.2	10.3
	Total	5	641	245	890	0.3	23.6	30.8	15.6
Total	American Indian	5	492	99	596	1.2	111.9	130.9	75.0
	Asian/Pacific Islander	0	5	2	7	0.0	5.6	11.6	4.9
	Black	0	28	12	40	0.0	25.8	59.2	19.6
	Hispanic	7	972	326	1,305	0.3	40.6	71.3	29.4
	White	4	665	348	1,017	0.3	28.6	39.5	17.5
	Total	16	2,177	789	2,982	0.4	40.6	54.6	26.5

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Problem Statement (continued)

Table 1 also shows that, in general, males are more at risk than females for alcohol-related chronic disease death. Male rates are two to three times higher than female rates, across all racial/ethnic groups except Asian/Pacific Islanders. American Indians are most at risk among the race/ethnic groups, with total, male, and female rates more than twice the corresponding state rates. As mentioned earlier, Hispanic males are also at elevated risk, with rates 1.2 times the state rate for males (45.3 v. 38.4), and almost twice the total state rate (45.3 v. 26.5).

Table 2 shows that Rio Arriba and McKinley counties have the highest death rates for diseases associated with chronic heavy drinking. In these counties, the rates are more than 4 times the national rate of 12.9. The high rates in McKinley County are driven by unusually high rates in the American Indian population. In Rio Arriba County, the rate is driven by high rates in both the Hispanic and American Indian populations. It is worth noting the considerable variation across counties in American Indian alcohol-related chronic disease death rates, with substantially lower rates seen in San Juan County than in Cibola, McKinley, and Rio Arriba counties. It is also important to remember that these chronic disease deaths represent only the tip of the iceberg of health and social problems associated with chronic heavy alcohol use in New Mexico. For every alcohol-related death, there are many living persons (and their families) impaired by serious morbidity and reduced quality of life due to chronic alcohol abuse.

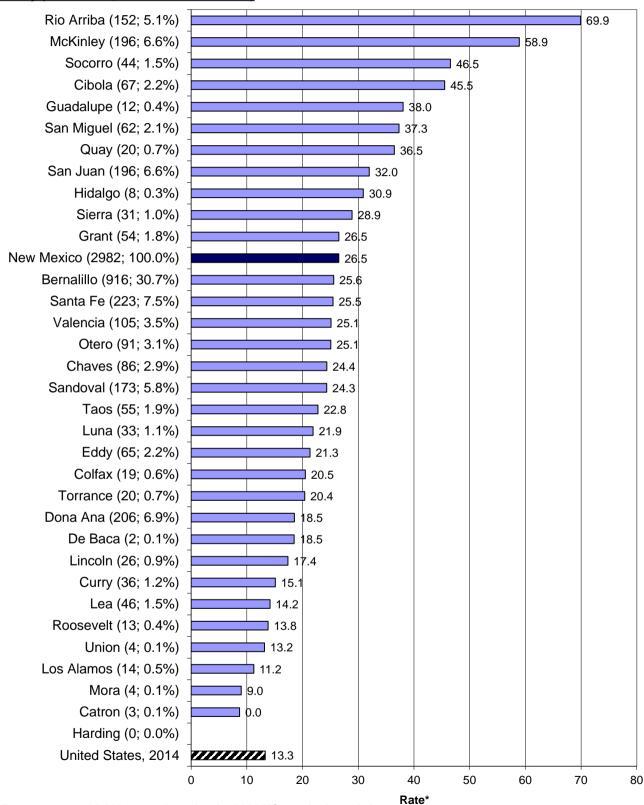
Table 2: Alc	ohol-Relat	ed Chroni	c Disea	se Deaths	and Ra	tes* by Ra	ice/Ethnici	ty and Co	unty, N	ew Mexico	o, 2010-2	014
			Dea	aths					Rat	tes*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	99	2	22	428	355	916	86.1	2.9	21.4	30.1	19.2	25.6
Catron	0	0	0	1	2	3	0.0	0	0.0	13.7	7.5	8.7
Chaves	0	0	0	41	45	86	0.0	0.0	0.0	28.6	22.2	24.4
Cibola	40	0	0	15	12	67	75.7	0.0	0.0	30.4	29.2	45.5
Colfax	0	0	0	13	6	19	0.0	0.0	0.0	36.0	8.5	20.5
Curry	1	0	2	17	16	36	43.5	0.0	19.1	24.1	11.5	15.1
De Baca	0	0	0	1	1	2	0.0	0.0	0.0	35.7	6.3	18.5
Dona Ana	4	2	4	118	79	206	48.6	17.8	21.6	19.5	16.8	18.5
Eddy	0	0	0	33	32	65	0.0	0.0	0.0	29.2	18.3	21.3
Grant	2	0	1	25	26	54	205.2	0.0	180.3	29.5	20.2	26.5
Guadalupe	0	0	0	11	0	12	0.0	0.0	0.0	46.1	0.0	38.0
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	6	2	8	0.0	0	0.0	45.4	12.0	30.9
Lea	0	0	1	20	24	46	0.0	0.0	8.4	19.7	13.2	14.2
Lincoln	2	0	0	4	21	26	91.8	0.0	0.0	14.9	18.9	17.4
Los Alamos	0	0	0	2	11	14	0.0	0.0	0.0	14.7	11.2	11.2
Luna	0	0	2	16	15	33	0.0	0.0	180.1	23.3	21.8	21.9
McKinley	179	0	0	8	8	196	77.0	0.0	0.0	17.8	15.2	58.9
Mora	0	0	0	3	1	4	0.0	0.0	0.0	9.1	7.6	9.0
Otero	19	0	3	23	46	91	110.9	0.0	32.3	22.8	20.9	25.1
Quay	0	0	0	13	7	20	0.0	0.0	0.0	58.0	24.2	36.5
Rio Arriba	36	0	0	108	8	152	133.6	0.0	0.0	70.0	21.2	69.9
Roosevelt	0	0	0	3	9	13	0.0	0.0	0.0	14.2	15.9	13.8
Sandoval	57	0	3	57	53	173	77.8	0.0	19.0	27.8	12.1	24.3
San Juan	123	0	1	26	47	196	61.3	0.0	8.9	28.6	14.3	32.0
San Miguel	0	1	0	47	14	62	0.0	107.3	0.0	39.1	33.3	37.3
Santa Fe	10	0	0	136	72	223	62.7	0.0	0.0	37.0	15.2	25.5
Sierra	0	0	0	5	25	31	0.0	0.0	0.0	21.2	30.0	28.9
Socorro	10	0	0	20	13	44	134.9	0.0	0.0	43.3	29.4	46.5
Taos	5	0	0	32	18	55	42.3	0.0	0.0	27.1	16.9	22.8
Torrance	1	0	0	8	10	20	75.2	0.0	0.0	26.0	16.4	20.4
Union	0	0	0	3	1	4	0.0	0.0	0.0	27.2	7.6	13.2
Valencia	7	1	0	61	36	105	64.8	69.7	0.0	29.2	19.6	25.1
New Mexico	596	7	40	1,305	1,017	2,982	75.0	4.9	19.6	29.4	17.5	26.5

* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 2: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2010-2014



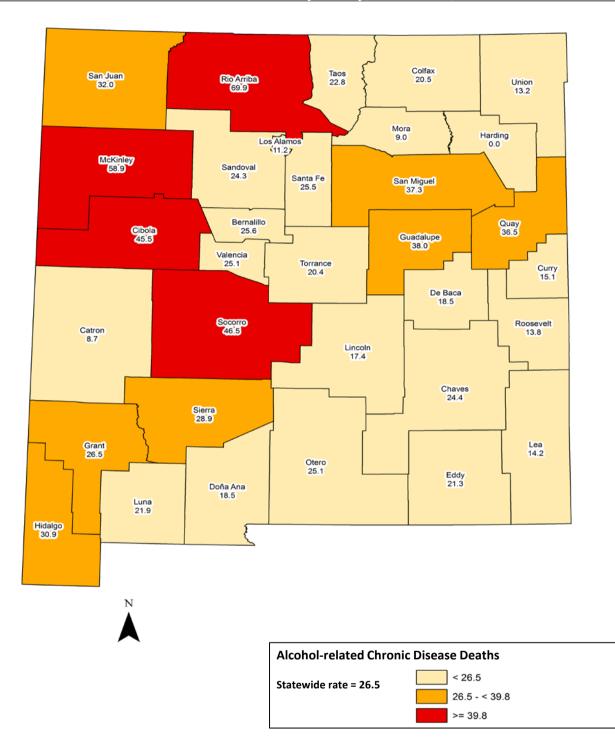
County (# of deaths; % of statewide deaths)

* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 3: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

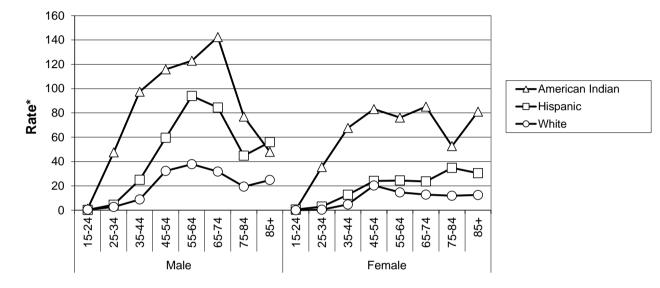
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH

Problem Statement

Alcohol-related chronic liver disease (AR-CLD) is a progressive disease caused by alcohol abuse. It imposes a heavy burden of morbidity and mortality in New Mexico, and is the principal driver of New Mexico's consistently high alcohol-related chronic disease death rate. Over the past 30 years, New Mexico's AR-CLD rate has trended upward, while the national rate has decreased 20%. In 1993, AR-CLD surpassed alcohol-related motor vehicle crash death as the leading cause of alcohol-related death in New Mexico. Since 1997, New Mexico's death rate from AR-CLD has consistently been substantially higher than the death rate from alcohol-related motor vehicle crashes.

Chart 1: Alcohol-Related CLD Death Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014



* Age-specific rates per 100,000

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES Table 1: Alcohol-Related CLD Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Rate	s*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	1	193	36	230	0.5	92.2	116.1	62.4
	Asian/Pacific Islander	0	1	0	1	0.0	3.6	0.0	2.0
	Black	0	6	4	10	0.0	9.7	45.8	10.7
	Hispanic	1	496	142	639	0.1	41.8	69.9	29.4
	White	1	256	110	367	0.2	22.2	27.2	12.9
	Total	3	960	291	1,254	0.2	36.2	44.7	22.8
Female	American Indian	0	149	33	183	0.0	64.7	75.1	43.0
	Asian/Pacific Islander	0	0	0	1	0.0	0.0	0.0	1.0
	Black	0	5	0	5	0.0	9.8	0.0	4.9
	Hispanic	2	189	71	262	0.2	15.6	28.1	11.5
	White	0	129	60	188	0.0	11.0	12.5	6.4
	Total	2	473	165	641	0.1	17.5	20.8	11.2
Total	American Indian	1	342	69	413	0.4	77.8	91.9	52.0
	Asian/Pacific Islander	0	2	0	2	0.0	2.0	0.0	1.5
	Black	0	11	5	15	0.0	9.8	23.9	7.6
	Hispanic	3	685	213	901	0.2	28.6	47	20
	White	1	385	169	555	0.1	16.5	19.2	9.5
	Total	5	1,433	457	1,895	0.1	26.7	31.6	16.8

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES New Mexico Substance Abuse Epidemiology Profile

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH (continued)

Problem Statement (continued)

As Table 1 shows, more than 75% of AR-CLD deaths occur before age 65. Chart 1 shows the demographic distribution of AR-CLD death rates and graphically illustrates the extremely high burden of premature mortality this disease places on the American Indian population (both male and female), as well as on the Hispanic male population. The high death rates among American Indians and Hispanic males in the 35-64 age range represent a tremendous burden in terms of years of potential life lost (YPLLs), which estimates the average years a person would have lived if he or she had not died prematurely.

Chart 2 shows that AR-CLD death rates in Rio Arriba and McKinley counties are more than five times the national rate. More than a third of New Mexico's counties have rates more than twice the U.S. rate; and a number of counties with rates below the state average (e.g., Bernalillo, Sandoval, Valencia) still have high rates compared to the U.S., and substantial numbers of deaths. The American Indian and/or Hispanic male rates tend to drive the county rates in all counties (data not shown). It is worth noting the relatively lower rates for American Indians in San Juan County and for Hispanics in Doña Ana County (Table 2).

Table 2: Alcohol-Related CLD Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

			Dea	aths					Rat	tes*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	66	0	7	289	198	565	58.2	0.0	7.0	20.3	10.8	15.8
Catron	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Chaves	0	0	0	33	22	55	0.0	0.0	0.0	22.4	10.9	15.5
Cibola	29	0	0	12	9	49	53.7	0.0	0.0	23.3	21.5	33.0
Colfax	0	0	0	11	2	12	0.0	0.0	0.0	28.4	2.5	13.9
Curry	1	0	1	12	7	22	43.4	0.0	7.8	18.0	5.3	9.2
De Baca	0	0	0	1	0	2	0.0	0.0	0.0	31.9	0.0	15.3
Dona Ana	2	0	2	88	34	127	35.4	0.0	11.0	14.4	7.4	11.5
Eddy	0	0	0	23	21	44	0.0	0.0	0.0	20.7	12.5	14.6
Grant	0	0	0	15	17	32	0.0	0.0	0.0	18.3	12.9	15.2
Guadalupe	0	0	0	9	0	10	0.0	0.0	0.0	37.9	0.0	31.8
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	5	1	6	0.0	0.0	0.0	36.3	4.8	21.8
Lea	0	0	1	9	15	25	0.0	0.0	5.8	8.6	8.4	7.9
Lincoln	2	0	0	2	16	20	91.7	0.0	0.0	7.8	13.8	13.0
Los Alamos	0	0	0	1	4	6	0.0	0.0	0.0	9.1	4.4	4.9
Luna	0	0	1	11	11	23	0.0	0.0	123.1	15.5	15.9	15.0
McKinley	129	0	0	7	3	139	55.8	0.0	0.0	15.3	6.1	42.2
Mora	0	0	0	2	1	3	0.0	0.0	0.0	7.2	6.1	7.1
Otero	14	0	2	20	18	54	80.0	0.0	19.8	19.1	8.3	14.4
Quay	0	0	0	9	4	13	0.0	0.0	0.0	42.0	10.1	22.0
Rio Arriba	24	0	0	74	8	106	91.6	0.0	0.0	47.6	19.8	48.4
Roosevelt	0	0	0	3	7	10	0.0	0.0	0.0	12.1	12.5	10.7
Sandoval	43	0	0	39	29	114	59.8	0.0	0.0	18.9	6.6	16.0
San Juan	76	0	0	21	28	125	37.6	0.0	0.0	22.1	8.5	20.3
San Miguel	0	1	0	32	3	36	0.0	106.8	0.0	25.8	6.8	21.6
Santa Fe	7	0	0	86	39	133	40.5	0.0	0.0	22.5	7.6	14.8
Sierra	0	0	0	3	15	20	0.0	0.0	0.0	15.4	16.4	17.2
Socorro	9	0	0	13	8	30	117.5	0.0	0.0	27.0	18.4	32.4
Taos	4	0	0	20	10	35	32.5	0.0	0.0	17.0	8.9	14.2
Torrance	0	0	0	4	5	9	0.0	0.0	0.0	11.8	5.5	7.4
Union	0	0	0	1	1	2	0.0	0.0	0.0	15.0	6.8	8.9
Valencia	6	0	0	45	19	69	52.9	0.0	0.0	21.5	9.8	16.4
New Mexico * All rates are	413	2	15	901	555	1,895	52.0	1.5	7.6	20.1	9.5	16.8

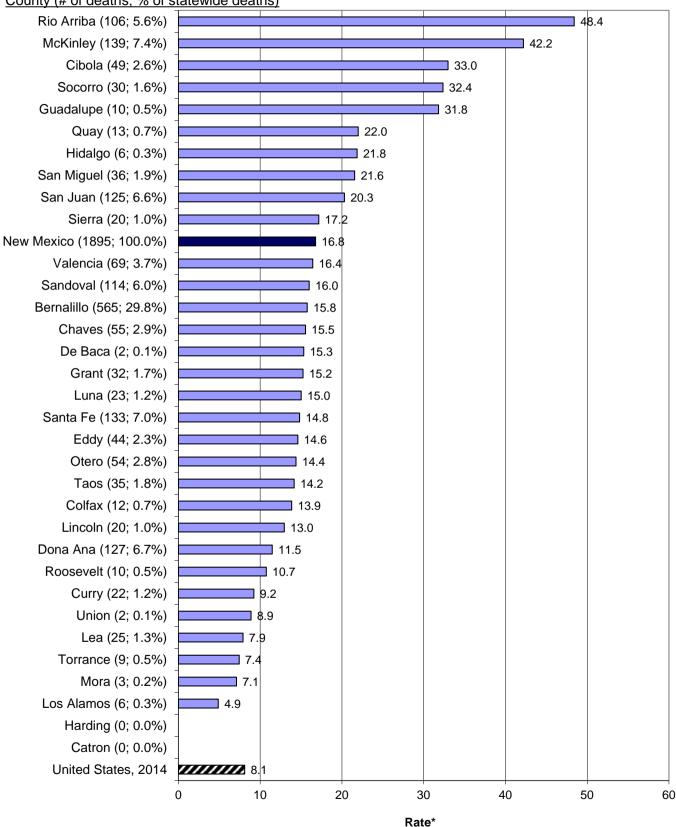
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

New Mexico Substance Abuse Epidemiology Profile

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH (continued)

Chart 2: Alcohol-Related CLD Death Rates* by County, New Mexico, 2010-2014



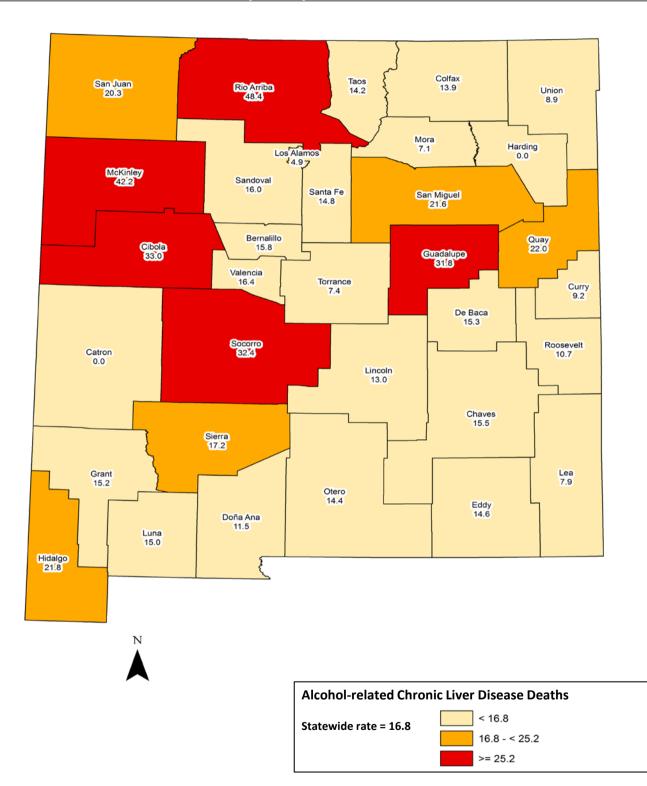
County (# of deaths; % of statewide deaths)

* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH (continued)

Chart 3: Alcohol-Related CLD Death Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

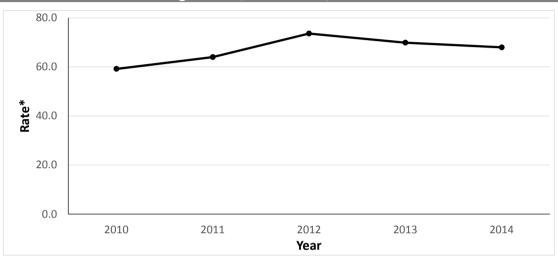
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES New Mexico Substance Abuse Epidemiology Profile

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES

Problem Statement

Excessive alcohol use is the most common cause of CLD. Other causes (e.g. acetaminophen use) are less common. CLD can develop over many years, in some cases 20-30 years, and data on hospitalizations can provide information on CLD risk at an earlier time point in the disease's development than AR-CLD mortality. However CLD hospitalizations are not limited to alcohol-related conditions, and include all hospital stays where the primary diagnosis was determined to be CLD. Additionally, CLD hospitalizations measure number of hospital stays rather than individuals diagnosed with CLD (i.e. a person can be hospitalized more than once). The rate of CLD hospitalizations has increased slightly from 59.2 hospitalizations per 100,000 in 2010 to 68.0 hospitalizations per 100,000 in 2014. Women are at lower risk than men. Women who identify as Asian or Pacific Islander have the lowest rates whereas men who identify as American Indian have the highest rates.

Chart 1: Alcohol-Related CLD Discharge Rates*, New Mexico, 2010-2014



* Rates per 100,000

Sources: NMDOH HIDD files and UNM-GPS population files; SAES

Table 1: CLD Hospital Discharges and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Hospital D	ischarges			Rate	s*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	9	631	78	718	4.5	301.0	252.9	188.2
	Asian/Pacific Islander		16	2	18		40.6	36.2	25.8
	Black		24	7	31		39.0	72.9	27.4
	Hispanic	12	1,614	391	2,017	1.2	135.9	192.9	92.4
	White	6	939	282	1,227	1.1	81.4	70.0	47.0
	Total	31	3,485	833	4,349	1.7	131.4	127.9	80.9
Female	American Indian	3	459	134	596	1.5	199.4	301.2	141.0
	Asian/Pacific Islander		3	2	5		6.0	23.6	5.1
	Black	1	16	4	21	2.6	34.1	38.2	23.7
	Hispanic	15	896	362	1,273	1.5	74.1	142.2	56.0
	White	6	656	290	952	1.1	55.8	60.7	35.0
	Total	25	2,186	850	3,061	1.4	80.6	106.8	53.7
Total	American Indian	12	1,090	212	1,314	3.0	247.8	281.4	164.0
	Asian/Pacific Islander		19	4	23		21.2	28.6	13.9
	Black	1	40	11	52	1.2	36.8	54.8	25.2
	Hispanic	27	2,510	753	3,290	1.4	104.7	165	74
	White	12	1,595	572	2,179	1.1	68.5	65.0	40.8
	Total	56	5,671	1,683	7,410	1.5	105.8	116.3	67.0

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Problem Statement (continued)

The number of hospital visits for CLD can be used as a measure of the impact of CLD on the medical system and the need for care. From 2010 to 2014, there were 7,410 hospitalizations reported by non-federal facilities. This equates to approximately four hospitalizations for CLD every day in New Mexico.

For 2010-2014, Cibola County had the highest rate of CLD hospitalizations (179.5 hospitalizations per 100,000 population), followed by Rio Arriba (163.6 hospitalizations per 100,000 population), Guadalupe (134.8 hospitalizations per 100,000 population), and McKinley (111 hospitalizations per 100,000 population). Los Alamos County had the lowest rate (19.5 hospitalizations per 100,000 population).

It is important to note that federal facilities (e.g. Indian Health Services and Veterans Administration) are not included in these results.

Table 2: CLD Discharges and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

]		Но	spital Di	ischarges			Rates*						
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	
Bernalillo	288	9	17	1,074	832	2,324	241.4	9.8	17.5		48.6	66.0	
Catron				2	1	3				70.6	2.4	17.0	
Chaves	2		2		116	333	71.1		32.3		63.5	94.7	
Cibola	121	1		62	53	260	227.6	94.2		123.2	154.5	179.5	
Colfax	-			36	13	49				90.4	29.1	50.4	
Curry	1		6	51	21	81	60.7		44.4	72.5	16.9	35.1	
De Baca		-		1	2	3				17.9	24.4	19.7	
Dona Ana	4		3	393	194	649	64.7		15.9	64.4	48.6	60.6	
Eddy				61	84	171				57.1	46.3	56.8	
Grant		-		36	29	70				46.4	23.9	34.6	
Guadalupe				32	4	38				145.8	60.4	134.8	
Harding				1		1				34.2		14.1	
Hidalgo				9	6	16				72.1	34.5	64.1	
Lea			1	42	51	100			7.9	37.1	29.1	31.8	
Lincoln	2		1	17	25	47	82.6		135.2	57.2	25.2	34.9	
Los Alamos	1			2	16	19	164.6			15.1	21.2	19.5	
Luna			3		27	120			240.7	85.9	49.6	85.0	
McKinley	254	1	1		21	372	107.4	25.1	37.5	117.2	44.8	111.0	
Mora		4		13	2	20		3,216.0		52.1	13.3	62.6	
Otero	39	2	3	36	50	177	201.5	40.6	27.3	34.5	25.7	51.1	
Quay				23	4	29				110.4	7.8	50.2	
Rio Arriba	70			234	24	345	263.1			155.1	82.5	163.6	
Roosevelt				7	13	20				19.5	20.6	21.2	
Sandoval	167	-	6		106	432	231.9		43.3		26.4	59.7	
San Juan	202	-		45	103	358	101.6			50.8	32.1	57.6	
San Miguel	3	4	2		10	137	846.7	518.0	184.6		29.7	80.4	
Santa Fe	50	2	1		154	560	277.2	15.3	10.1	85.8	31.7	65.4	
Sierra		-	4	13	36	54			749.6		52.9	63.0	
Socorro	40		1	30	20	96	519.7		94.4	63.9	50.1	109.6	
Taos	28			84	29	150	218.2			81.8	28.0	70.5	
Torrance				24	33	59				86.2	47.2	60.9	
Union				10	5	15				120.3	35.9	57.7	
Valencia	41		1	146	95	301	400.5		18.0	68.9	51.6	72.8	
New Mexico	1,314	23	52	3,290	2,179	7,410	164.0	13.9	25.2	73.7	40.8	67.0	

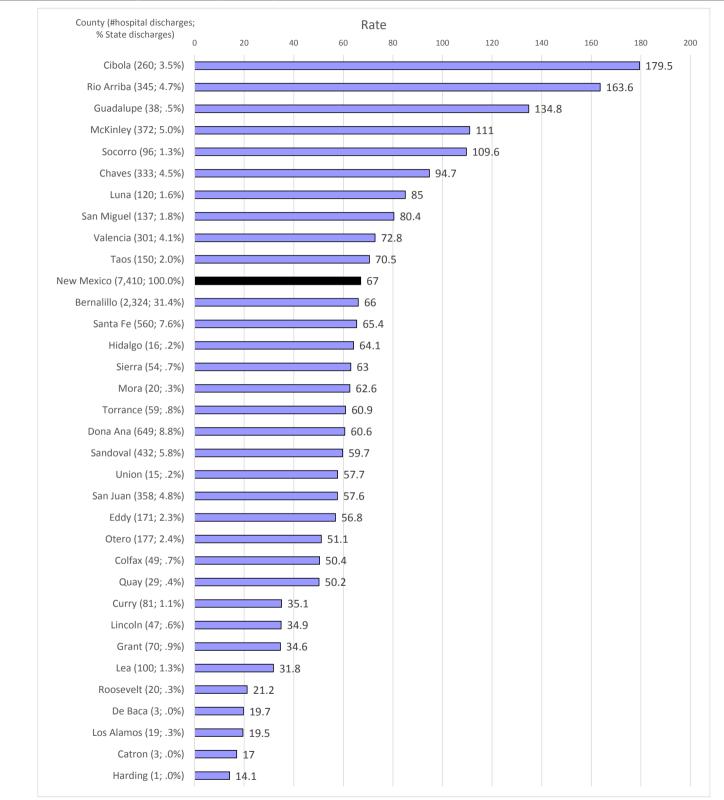
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH HIDD files and UNM-GPS population files; SAES

New Mexico Substance Abuse Epidemiology Profile

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Chart 2: CLD Discharges Rates* by County, New Mexico, 2010-2014



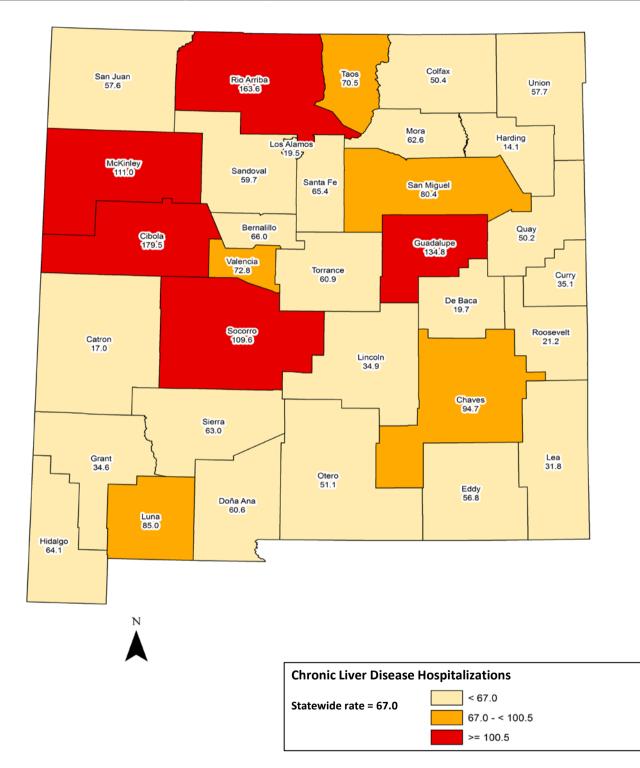
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH HIDD files and UNM-GPS population files (NM); SAES

New Mexico Substance Abuse Epidemiology Profile

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Chart 3: Alcohol-Related CLD Discharges Rates* by County, New Mexico, 2010-2014



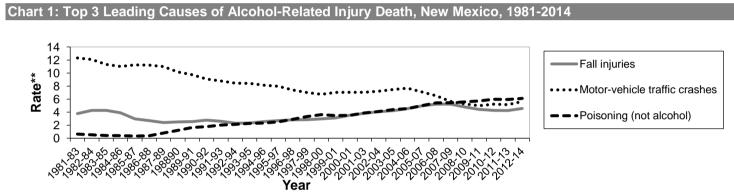
* All rates are per 100,000, age-adjusted to the 2000 US standard population

ALCOHOL-RELATED INJURY DEATH

Problem Statement

Binge drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) is a high-risk behavior associated with numerous injury outcomes, including motor vehicle fatalities, homicide, and suicide. Since 1990, New Mexico's death rate for alcohol-related (AR) injury has consistently been among the highest in the nation, ranging from 1.4 to 1.8 times the national rate. While New Mexico's alcohol-impaired motor vehicle crash fatality rates have declined almost 60% during this period, death rates from other AR injuries have increased. Chart 1 shows the substantial increase in AR fall injury and AR drug overdose death rates since the early 90s; this is due to the AR fall death rate peaking in 2007-09 and declining since, while AR poisoning has continued to rise. These increases have more than offset the decline in AR motor vehicle crash deaths, as well as slight decreases in AR homicide and suicide death rates, to drive an overall 16.5% increase in New Mexico's AR injury death during the period 1990-2012. During the period 2008-2012, AR drug overdose deaths replaced AR motor vehicle crash deaths as the leading cause of alcohol-related injury death in New Mexico.

Table 1 shows that total death rates from AR injuries increase with age. However, there were substantially high numbers and rates of AR injury death in the lowest age category (age 0-24), with especially high rates among American Indian and Hispanic males. Deaths in this age category represent a very large burden of premature mortality (YPLL).



* Rates reflect only alcohol-attributable portion of deaths from cause

** Rates are rolling 3-year average per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

Table 1: Alcohol-Related Injury Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Ra	tes*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	53	262	27	342	26.3	124.8	88.3	86.1
	Asian/Pacific Islander	1	10	2	13	3.9	24.4	43.5	20.5
	Black	7	29	4	39	14.9	46.8	36.6	34.0
	Hispanic	150	580	90	819	14.8	48.8	44.2	37.6
	White	68	458	205	730	11.9	39.7	50.8	32.0
	Total	278	1,351	330	1,959	15.0	50.9	50.7	39.5
Female	American Indian	22	73	15	110	11.0	31.6	34.5	25.1
	Asian/Pacific Islander	1	2	1	4	5.1	4.5	6.5	5.1
	Black	1	6	2	9	2.7	11.7	21.0	9.8
	Hispanic	43	192	76	311	4.4	15.9	30.0	14.0
	White	22	207	196	425	4.2	17.6	41.1	15.5
	Total	90	481	292	863	5.1	17.7	36.7	15.8
Total	American Indian	75	334	43	451	18.7	76.0	56.5	53.8
	Asian/Pacific Islander	2	12	3	17	4.5	13.2	21.1	11.6
	Black	8	34	6	48	9.4	31.6	28.5	23.5
	Hispanic	193	772	166	1,130	9.7	32.2	36.3	25.6
	White	90	664	401	1,156	8.2	28.5	45.5	23.6
	Total	368	1,832	622	2,822	10.2	34.2	43.0	27.5

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED INJURY DEATH (continued)

Problem Statement (continued)

Table 1 shows that males are more at risk of AR injury death than females, with male rates two to four times higher than female rates across the race/ethnic categories. American Indian males are the most at-risk, with a rate more than twice the state rate and twice the White male rate. Hispanic males are also at risk, with a rate 20% (1.2 times) higher than the rate for White males.

Table 2 shows that AR injury is a serious issue in many New Mexico counties. Rio Arriba and McKinley counties have the most serious problems, with rates more than three times the U.S. rate. Almost a third of New Mexico counties have rates more than twice the U.S. rate (see Chart 2); and almost two-thirds have rates 1.5 times that of the US rate, or more. A number of counties have both high rates and a relatively heavy burden (e.g., 20 or more alcohol-related injury deaths per year). Rio Arriba County's high rate is driven by high rates in both the Hispanic and American Indian population; but most of the burden of deaths falls on the Hispanic population. In McKinley and San Juan counties, elevated rates are driven by high rates in the American Indian male population. Valencia County's high rate is driven by elevated rates in the Hispanic male population.

Table 2: Alcohol-Related Injury Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

			De	aths					Ra	ates*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	42	10	23	371	370	827	32.0	13.3	24.5	25.2	22.3	24.3
Catron	1	0	0	2	6	9	172.2	0	0.0	73.5	44.3	53.0
Chaves	1	0	2	43	46	91	36.3	0.0	25.6	28.6	25.8	27.9
Cibola	21	0	0	12	9	42	40.6	0.0	0.0	23.8	26.1	30.7
Colfax	0	0	0	11	9	21	0.0	0.0	0.0	37.5	22.1	30.2
Curry	0	1	3	17	22	43	0.0	16.4	25.7	22.1	14.8	18.1
De Baca	0	0	0	1	2	3	0.0	0.0	0.0	20.6	38.0	30.8
Dona Ana	0	1	3	101	92	199	0.0	6.9	19.7	16.2	24.4	19.4
Eddy	1	0	0	27	45	73	31.1	0.0	0.0	24.3	30.2	27.3
Grant	0	0	0	17	22	39	0.0	0.0	0.0	26.7	28.0	27.3
Guadalupe	0	0	0	6	0	7	0.0	0.0	0.0	34.1	0.0	29.3
Harding	0	0	0	0	0	1	0.0	0.0	0.0	0.0	0.0	7.5
Hidalgo	0	0	0	2	3	6	0.0	0	0.0	20.0	33.9	26.9
Lea	0	0	7	36	46	89	0.0	0.0	51.7	25.6	32.4	28.9
Lincoln	0	0	0	6	22	28	0.0	0.0	0.0	22.6	27.3	25.3
Los Alamos	0	0	0	2	13	15	0.0	0.0	0.0	14.9	16.7	15.7
Luna	0	0	0	7	19	26	0.0	0.0	0.0	11.7	32.9	19.4
McKinley	165	0	1	9	12	187	67.8	0.0	26.8	21.5	27.6	55.7
Mora	0	0	0	11	0	11	0.0	0.0	0.0	60.8	0.0	52.1
Otero	11	1	3	18	44	78	56.2	24.2	24.0	18.9	23.1	23.9
Quay	0	0	0	7	8	15	0.0	0.0	0.0	41.8	29.5	34.4
Rio Arriba	15	0	0	82	10	107	54.9	0.0	0.0	61.2	29.0	56.0
Roosevelt	0	0	0	5	12	18	0.0	0.0	0.0	17.4	19.2	18.5
Sandoval	39	1	1	39	76	159	53.5	9.1	7.9	18.5	21.4	24.5
San Juan	134	1	2	27	66	230	62.5	40.4	49.2	26.0	21.6	37.8
San Miguel	0	0	0	45	8	53	0.0	0.0	0.0	39.7	22.9	36.0
Santa Fe	3	1	0	114	79	199	19.5	4.7	0.0	32.3	22.3	27.4
Sierra	1	0	0	5	19	24	69.1	0.0	0.0	28.2	43.2	37.9
Socorro	7	0	0	10	9	27	79.7	0.0	0.0	26.2	22.8	31.9
Taos	6	0	0	31	21	58	62.2	0.0	0.0	35.5	31.8	35.9
Torrance	1	0	0	10	17	28	36.0	0.0	0.0	35.7	34.4	34.7
Union	0	0	0	2	4	6	0.0	0.0	0.0	15.9	27.4	21.9
Valencia	2	1	2	54	44	103	20.1	28.5	33.9	25.3	29.3	27.1
New Mexico	451	17	48	1,130	1,156	2,822	53.8	11.6	23.5	25.6	23.6	27.5

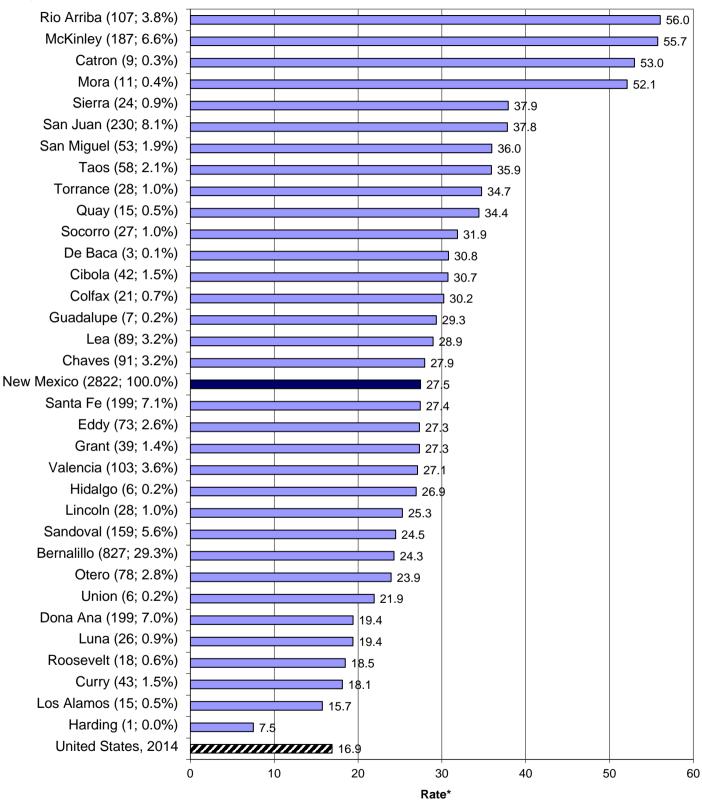
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 2: Alcohol-Related Injury Death Rates* by County, New Mexico, 2010-2014

County (# of deaths; % of statewide deaths)

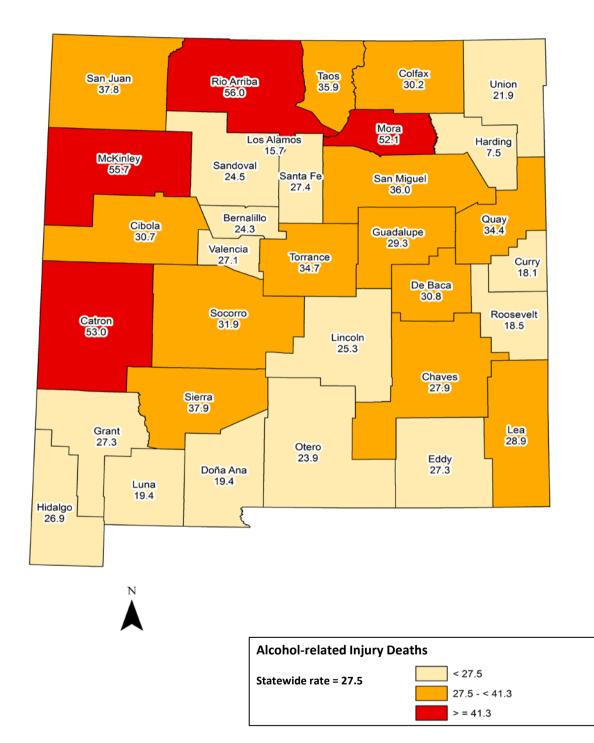


* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 3: Alcohol-Related Injury Death Rates* by County, New Mexico, 2010-2014



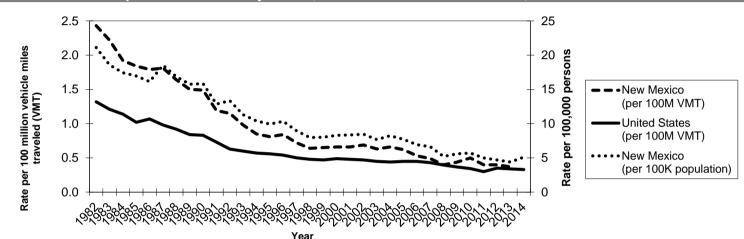
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

Problem Statement

Alcohol-related motor vehicle traffic crash (AR-MVTC) death has historically been the leading cause of alcohol-related injury death. Nonetheless, AR-MVTC deaths provide a hopeful example of a substance-related health outcome that has been successfully reduced by using a public health approach, both nationally and in New Mexico. From 1982 through 2010, in response to a wide range of policy and preventive interventions, New Mexico's alcohol-impaired motor vehicle traffic crash (AI-MVTC) fatality rate declined more dramatically than the U.S. rate, decreasing 83% and dropping New Mexico from first to tenth among states in AI-MVTC fatalities per 100,000 population. In terms of deaths per 100 million vehicle miles traveled (VMT), New Mexico's AI-MVTC fatality rate in 2013 (0.37) was one-sixth what it was in 1982 (2.4). Furthermore, a comprehensive AR-MVTC prevention campaign in place from 2005-2009 was successful in reinitiating rate decreases that had been stalled since the late 1990s. From 2004 to 2013 New Mexico's AI-MVTC fatality rate per 100 million VMT dropped 44%. Rates increased slightly in 2014.

Chart 1: Alcohol-Impaired MVTC Fatality Rates*, New Mexico and United States, 1982-2014



* Deaths in motor vehicle traffic crashes with highest driver blood alcohol content (BAC) >= 0.08; rates are crude rates per 100 million vehicle miles traveled (VMT)(NM and US); and per 100,000 population (NM)

Source: National Highway Traffic Safety Administration (NHTSA) Fatality Analysis Reporting System (FARS); NCHS (population)

Table 1: Alcohol-Related MVTC Deaths/Rates',² by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Deat	hs			Rate	S*	
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	22	68	1	91	11.1	32.4	3.9	21.2
	Asian/Pacific Islander	0	4	0	4	0.0	9.1	0.0	5.6
	Black	1	4	0	5	1.5	6.7	0.0	4.5
	Hispanic	48	132	5	186	4.8	11.1	2.5	7.9
	White	23	91	10	125	4.1	7.9	2.6	5.9
	Total	95	301	18	413	5.1	11.4	2.7	8.3
Female	American Indian	10	25	1	36	4.9	10.7	2.9	7.9
	Asian/Pacific Islander	1	0	0	1	2.7	0.0	0.0	1.1
	Black	0	1	0	1	0.0	1.4	0.0	0.9
	Hispanic	18	36	2	57	1.9	3.0	0.8	2.4
	White	6	19	3	29	1.2	1.6	0.6	1.4
	Total	35	81	6	123	2.0	3.0	0.8	2.5
Total	American Indian	32	92	2	127	8.0	21.0	3.3	14.4
	Asian/Pacific Islander	1	4	0	5	1.6	4.4	0.0	3.1
	Black	1	5	1	6	0.8	4.4	2.8	2.9
	Hispanic	67	168	7	242	3.3	7.0	1.6	5.1
	White	30	111	13	154	2.7	4.8	1.5	3.7
	Total	130	383	24	536	3.6	7.1	1.6	5.4

* Age-specific rates (e.g., Ages 0-24) per 100,000 population; all-ages rate per 100,000 population, age-adjusted to 2000 US standard population

¹ Alcohol-related motor vehicle traffic crash (AR-MVTC) deaths estimated based on CDC ARDI alcohol-attributable fractions (BAC>=0.10)

² These death counts/rates are estimates. They do not equal the actual deaths/rates reported in Charts 1-3 based on FARS. ARDI-based deaths/rates are included here to describe the demographic distribution of AR-MVTC deaths, which is not available from FARS.

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

Problem Statement (continued)

Table 1 shows the demographic distribution of AR-MVTC deaths in New Mexico. Because demographic data are not readily available from the system of record for motor vehicle crash death (the Fatality Analysis Reporting System [FARS] used for Charts 1-3), death certificate data for alcohol-related motor vehicle crash deaths were used here to provide the demographic descriptions in Tables 1 and 2. Because they are based on different data sources, the total and county-level rates reported in Tables 1 and 2 do not match the rates reported in Charts 1-3. The most pronounced feature of the demographic profile of AR-MVTC deaths is the elevated rates among both male and female American Indians. A finer breakdown by age (not shown) shows that rates are especially high - 2.5 to five times the corresponding White rates - among American Indian males and females ages 15-54. Hispanic and White rates are also highest in the age range 15-54, with a slight elevation of Hispanic rates (by a factor of 1.3) relative to White rates across all ages. Chart 2 shows that, among counties for which stable rates can be calculated, Sandoval, McKinley, and Rio Arriba counties have substantial AI-MVTC fatalities and high rates; other counties have high rates but fewer deaths. Table 2 shows that McKinley and San Juan county rate is driven by the American Indian rates (both male and female rates are high, data not shown); and that Rio Arriba County rate is driven by the Hispanic rate (the male rate is high, data not shown) and the American Indian rate.

Table 2: Alcohol-Related MVTC Deaths and Rates^{*,1,2} by Race/Ethnicity and County, New Mexico, 2010-2014

			De	aths					Ra	tes*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	12	2	2	62	36	115	7.7	2.9	2.1	3.8	2.4	3.3
Catron	0	0	0	0	1	2	0.0	0.0	0.0	0.0	14.5	
Chaves	0	0	0	12	5	17	0.0	0.0	0.0	6.9	3.7	5.6
Cibola	7	0	0	4	1	12	15.3	0.0	0.0	7.3	2.3	9.1
Colfax	0	0	0	1	2	4	0.0	0.0	0.0	4.0	5.6	5.3
Curry	0	0	1	6	4	11	0.0	0.0	4.0	6.4	2.8	4.3
De Baca	0	0	0	0	1	1	0.0	0.0	0.0	0.0	19.8	14.7
Dona Ana	0	0	0	26	8	35	0.0	0.0	0.0	3.9	2.5	
Eddy	0	0	0	10	11	22	0.0	0.0	0.0	8.6	9.1	8.7
Grant	0	0	0	3	1	5	0.0	0.0	0.0	5.2	1.7	3.7
Guadalupe	0	0	0	2	0	2	0.0	0.0	0.0	15.0	0.0	12.7
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	0	0	0	0.0	0	0.0	0.0	0.0	0.0
Lea	0	0	0	16	15	31	0.0	0.0	0.0	10.3	11.2	10.1
Lincoln	0	0	0	1	4	5	0.0	0.0	0.0	1.4	6.0	4.1
Los Alamos	0	0	0	1	1	2	0.0	0.0	0.0	4.5	1.9	2.4
Luna	0	0	0	1	1	2	0.0	0.0	0.0	0.9	1.1	1.3
McKinley	47	0	0	2	2	52	18.5	0.0	0.0	6.4	5.5	15.3
Mora	0	0	0	4	0	4	0.0	0.0	0.0	25.2	0.0	22.3
Otero	4	0	1	3	7	16	17.8	0.0	9.8	2.7	4.5	4.9
Quay	0	0	0	1	3	4	0.0	0.0	0.0	7.2	9.9	8.7
Rio Arriba	3	0	0	16	2	21	11.5	0.0	0.0	12.3	6.2	11.3
Roosevelt	0	0	0	2	2	4	0.0	0.0	0.0	6.2	3.8	4.7
Sandoval	6	1	0	8	9	25	8.0	7.3	0.0	3.5	2.9	3.9
San Juan	39	0	0	6	9	55	16.7	0.0	0.0	5.5	3.3	8.8
San Miguel	0	0	0	10	1	12	0.0	0.0	0.0	9.4	4.8	
Santa Fe	1	0	0	15	9	27	7.2	0.0	0.0	4.1	3.0	3.9
Sierra	0	0	0	1	3	4	0.0	0.0	0.0	7.5	10.7	9.1
Socorro	4	0	0	2	1	7	46.9	0.0	0.0	5.5	4.0	9.9
Taos	1	0	0	6	4	11	14.9	0.0	0.0	7.0	8.1	7.5
Torrance	0	0	0		3		0.0	0.0	0.0	7.7	6.5	
Union	0	0	0	1	1	1	0.0	0.0	0.0	6.4	3.8	
Valencia	1	0	0	15	6		6.6	0.0	0.0	6.7	4.5	5.8
New Mexico	127	5	6		154		14.4	3.1	2.9	5.1	3.7	5.4

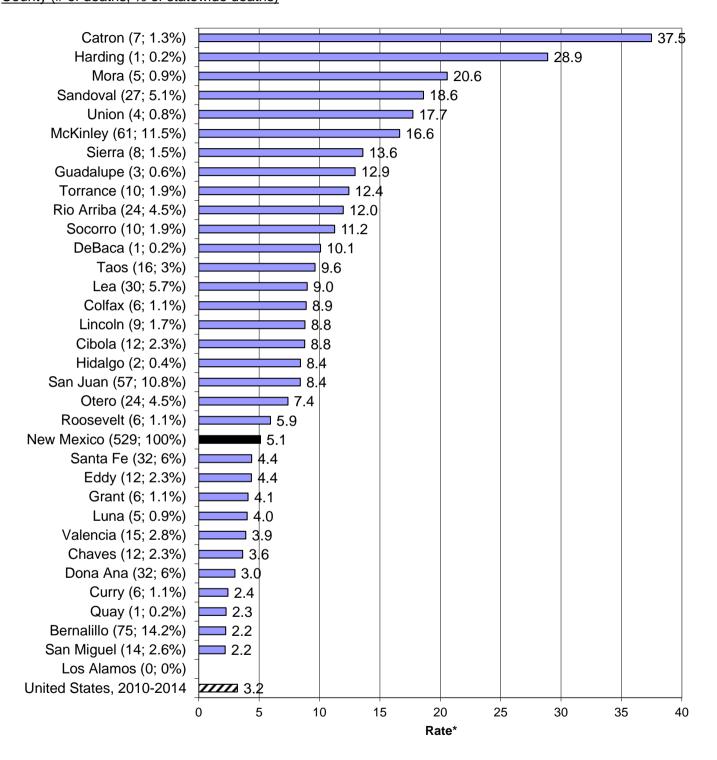
* All rates are per 100,000 population, age-adjusted to the 2000 US standard population

¹ Alcohol-related motor vehicle traffic crash (AR-MVTC) deaths estimated based on CDC ARDI alcohol-attributable fractions (BAC>=0.10)

² See footnote 2 for Table 1

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

Chart 2: Alcohol-Impaired MVTC Fatality Rates^{*,1,2} by County, New Mexico, 2010-2014 County (# of deaths; % of statewide deaths)

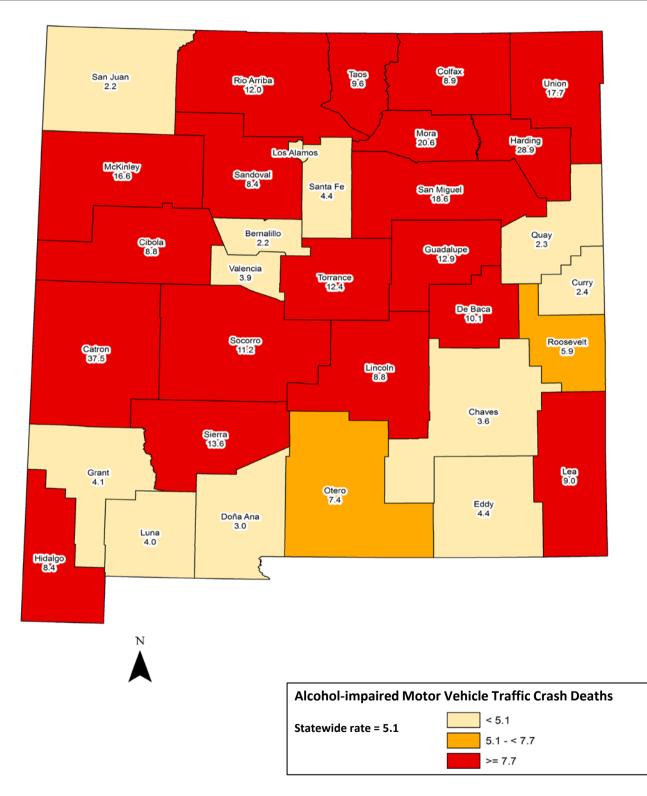


* All rates are crude per 100,000 population

¹ Alcohol-impaired MVTC deaths are from FARS (highest driver BAC >=0.08); NM population from GPS, US population from NCHS

² Numerator (deaths) based on county of occurance; denominator (population) based on county of residence

Chart 3: Alcohol-Impaired MVTC Fatality Rates^{1,2} by County, New Mexico, 2010-2014



* All rates are crude per 100,000 population

- ¹ Alcohol-impaired MVTC deaths are from FARS (highest driver BAC >=0.08); NM population from GPS, US population from NCHS
- ² Numerator (deaths) based on county of occurance; denominator (population) based on county of residence

Source: National Highway Traffic Safety Administration (NHTSA) Fatality Analysis Reporting System (FARS); NCHS (US population); GPS (NM population) New Mexico Substance Abuse Epidemiology Profile

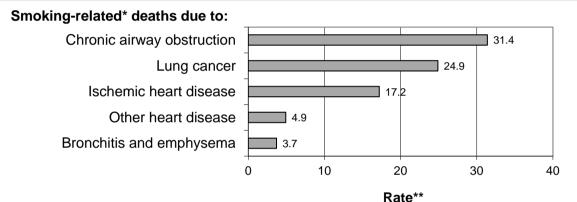
SMOKING-RELATED DEATH

Problem Statement

Smoking is a risk factor for many causes of death and a serious source of preventable death in New Mexico. Chart 1 shows the five leading causes of smoking-related death in New Mexico, and Table 1 shows the cumulative deaths and rates for all smoking-related causes. Historically, New Mexico's rates for smoking-related causes, such as lung cancer have been among the lowest in the nation. Nonetheless, a comparison of New Mexico's smoking-related death rates to its alcohol- and drug-related death rates shows that the burden of death associated with smoking is still considerably greater than the burden associated with these other substances. This speaks to the public health importance of smoking prevention efforts, even in a state with low rates relative to the rest of the nation.

Table 1 shows the demographic distribution of smoking-related death in New Mexico. Smoking-related death rates increase sharply in the oldest age group (age 65+), consistent with the fact that smoking-related causes of death are mostly chronic conditions with a long development period. This is in contrast to alcohol- and drug-related deaths, both of which show a large burden of "premature" deaths (deaths before age 65+).

Chart 1: Leading Causes of Smoking-Related Death, New Mexico, 2010-2014



* Rates reflect only smoking-related portion of deaths from cause

** Rate per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC SAMMEC; SAES

Table 1: Smoking-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Rate	s*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	0	104	154	258	0.0	49.6	498.8	99.8
	Asian/Pacific Islander	0	19	19	38	0.0	47.9	339.5	77.3
	Black	0	59	80	139	0.0	96.1	835.0	164.4
	Hispanic	0	622	1,316	1,938	0.0	52.4	649.1	120.0
	White	0	1,136	3,439	4,574	0.0	98.5	853.7	152.7
	Total	0	1,962	5,022	6,984	0.0	74.0	770.9	139.3
Female	American Indian	0	45	80	124	0.0	19.5	179.0	34.3
	Asian/Pacific Islander	0	11	18	29	0.0	22.0	216.4	43.2
	Black	0	25	33	58	0.0	54.0	312.5	62.9
	Hispanic	0	272	845	1,118	0.0	22.5	332.2	54.7
	White	0	632	2,520	3,152	0.0	53.8	527.7	83.6
	Total	0	989	3,501	4,491	0.0	36.5	440.1	70.3
Total	American Indian	0	149	233	382	0.0	33.9	309.9	60.7
	Asian/Pacific Islander	0	30	37	67	0.0	33.4	265.0	56.9
	Black	0	85	113	197	0.0	77.9	562.6	110.6
	Hispanic	0	894	2,161	3,056	0.0	37.3	472.7	83.1
	White	0	1,768	5,959	7,727	0.0	75.9	676.9	114.0
	Total	0	2,951	8,524	11,475	0.0	55.0	589.0	100.5

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC SAMMEC; SAES

SMOKING-RELATED DEATH (continued)

Problem Statement (continued)

Table 1 also shows that male rates are roughly 2 to 3 times female rates across all race/ethnic groups. Among males, Blacks have the highest rates followed by Whites; among females Whites have the highest rates followed by Blacks.

Table 2 and Chart 2 show that the counties with the highest rates are Sierra, Quay, Socorro, Torrance, and Chaves. The high rates in most of these counties (and in the state overall) are driven by high rates among Whites. However, there are notably elevated rates among Hispanics in Quay, Union, and Curry counties; and a substantial burden of smoking-related death among Hispanics in several other counties (e.g., Bernalillo, Dona Ana, Santa Fe). The high rates of smoking-related death among Blacks in Curry, Lea, Otero, and Sandoval counties are also notable. The smoking-related death rates among the American Indian and Asian/Pacific Islander populations are relatively low.

NOTE: These tables are based on the Centers for Disease Control and Prevention Smoking Attributable Mortality, Morbidity, and Economic Costs (SAMMEC) methodology. However, CDC's SAMMEC site reports age-adjusted rates based on the age 35+ population; whereas this report calculates age-adjusted rates for the entire population. As a result, the smoking-attributable mortality rates reported here are lower than those reported by the CDC's SAMMEC site.

Table 2: Smoking-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

County	merican Indian 53 1 3 29 0 1	Asian/ Pacific Islander 35 0 1 1 0	Black 86 1 7	Hispanic 957 5	White 2,202	All Races	American Indian	Asian/ Pacific	Black	Hispanic	White	All Races
Catron Chaves Cibola Colfax Curry	1 3 29 0 1	0 1 0	1		2 202			Islander		•		
Chaves Cibola Colfax Curry	3 29 0 1	0 1 0	-	5		3,364	73.7	55.4	104.1	85.1	102.2	95.9
Cibola Colfax Curry	29 0 1	0	7	5	28	35	145.5	0.0	3,749.3	70.9	96.8	97.1
Colfax Curry	0 1		1	92	415	518	127.5	44.5	111.3	92.8	157.0	134.9
Curry	1		0	39	79	148	58.1	0.0	0.0	95.9	156.3	104.1
		0	0	41	70	112	0.0	0.0	0.0	110.7	98.0	105.7
De Baca		3	16	51	234	305	74.1	116.3	143.3	111.0	142.0	132.3
	0	0	0	4	19	23	0.0	0.0	0.0	76.2	151.5	126.5
Dona Ana	2	4	15	356	616	995	39.5	43.8	109.4	67.7	109.1	87.6
Eddy	1	3	4	74	352	436	63.2	178.9	106.8	81.6	159.4	134.4
Grant	0	0	1	73	166	241	0.0	0.0	152.0	83.4	110.7	100.3
Guadalupe	0	0	0	21	12	34	0.0	0.0	0.0	92.0	200.6	116.8
Harding	0	0	0	2	3	6	0.0	0.0	0.0	53.1	54.6	57.5
Hidalgo	0	0	0	11	21	32	0.0	0.0	0.0	75.7	126.0	102.4
Lea	3	1	18	60	322	406	77.7	46.8	148.4	78.7	161.0	136.4
Lincoln	1	1	0	24	148	173	37.4	275.3	0.0	93.5	111.1	107.1
Los Alamos	0	1	0	4	55	60	0.0	84.8	0.0	30.0	53.2	51.1
Luna	1	0	3	50	185	240	127.9	0.0	271.1	85.6	172.7	134.8
McKinley	108	0	1	27	57	193	54.8	0.0	37.1	63.4	100.8	64.7
Mora	0	0	0	21	6	27	0.0	0.0	0.0	75.1	62.8	71.6
Otero	14	3	13	59	381	472	128.9	69.9	116.3	71.9	143.9	125.3
Quay	0	1	0	25	80	107	0.0	155.0	0.0	132.5	166.4	155.6
Rio Arriba	19	0	0	130	44	193	82.1	0.0	0.0	84.1	91.5	85.3
Roosevelt	1	0	1	18	101	121	124.6	0.0	226.5	105.7	130.8	121.6
Sandoval	35	4	13	124	435	614	56.1	50.0	97.9	79.3	95.8	88.2
San Juan	82	1	4	63	442	592	56.1	87.2	120.9	99.6	123.5	102.8
San Miguel	0	3	1	122	57	184	0.0	331.6	94.3	99.5	113.4	104.3
Santa Fe	7	3	3	257	405	676	50.9	27.3	64.1	80.7	74.6	75.9
Sierra	1	0	1	21	205	229	78.3	0.0	124.5	113.8	195.2	176.8
Socorro	3	0	1	41	81	126	49.4	0.0	37.8	100.7	156.3	127.5
Taos	5	0	0	95	70	170	51.4	0.0	0.0	83.9	71.0	76.2
Torrance	2	1	2	29	104	138	137.9	124.3	171.5	101.4	157.8	140.5
Union	0	0	0	10	28	38	0.0	0.0	0.0	125.2	124.2	121.1
Valencia	7	2	6	148	303	468	83.4	82.9	139.6	86.7	145.6	118.4
New Mexico	382	67	197	3,056	7,727	11,475	60.7	56.9	110.6	83.1	114.0	100.5

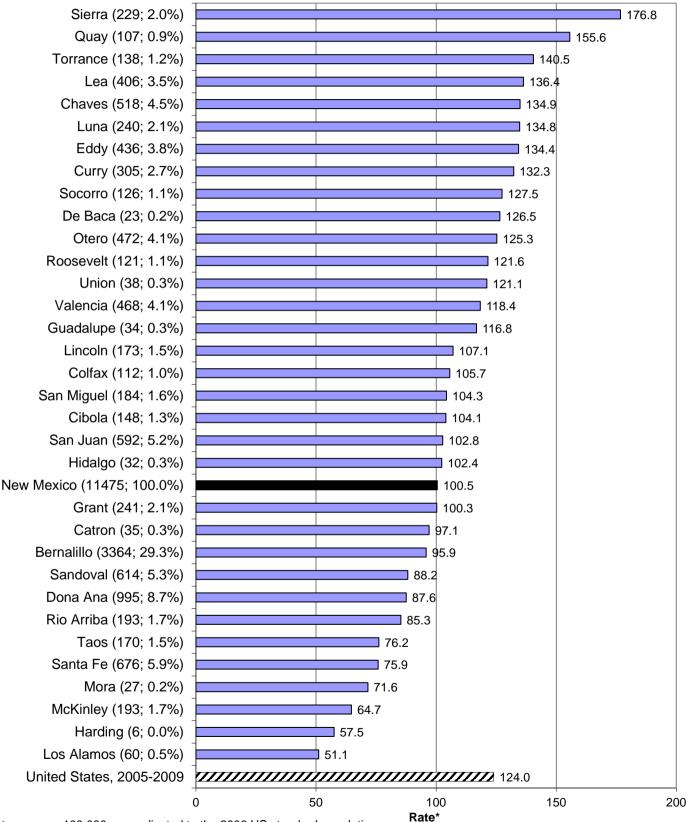
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC SAMMEC; SAES

SMOKING-RELATED DEATH (continued)

Chart 2: Smoking-Related Death Rates* by County, New Mexico, 2010-2014

County (# of deaths; % of statewide deaths)

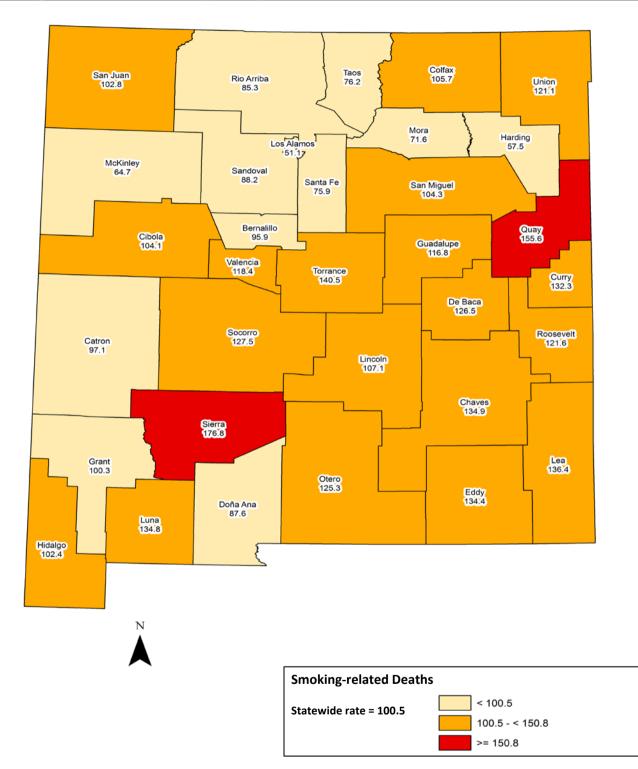


* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC SAMMEC; SAES

SMOKING-RELATED DEATH (continued)

Chart 3: Smoking-Related Death Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC SAMMEC; SAES New Mexico Substance Abuse Epidemiology Profile

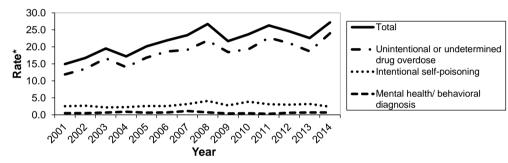
TOTAL DRUG OVERDOSE DEATH

Problem Statement

In 2014, New Mexico had the second highest total drug overdose death rate in the nation (most recent data available). Drug use can result in overdose death and is also associated with other societal problems including crime, violence, homelessness, loss of productivity, and spread of blood-borne disease such as HIV and hepatitis. Unintentional drug overdose is the largest subset of total drug overdose death, accounting for 80-85% of drug overdose deaths in New Mexico (Chart 1). The other substantial cause of drug overdose death is suicide, or intentional self-poisoning, which accounts for the remaining 10-15%. Poisoning has been the leading cause of unintentional injury in New Mexico since 2007, surpassing motor vehicle crash deaths, largely as a result of increased unintentional drug overdose deaths associated with prescription drug use.

During 2010-2014, 48% of unintentional drug overdose deaths were caused by prescription drugs, while 38% were caused by illicit drugs, and 14% involved both types. Medical examiner data indicate that the most common drugs causing unintentional overdose death, for the period covered in this report, were prescription opioids (e.g., methadone, oxycodone, morphine; 48%), heroin (34%), tranquilizers/muscle relaxants (23%), cocaine (17%), methamphetamine (16%) and antidepressants (12%) (not mutually exclusive). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern. Interventions are currently being formulated, implemented, and assessed in New Mexico and in communities across the country, and may be contributing to decreases in death in the most recent data available.

Chart 1: Total Drug Overdose Death Rates* by Cause Category, New Mexico, 2001-2014



* Rate per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files

Table 1: T	otal Drug Overdose Dea	ths and Rat	tes* by Ag	je, Sex, ar	nd Race/E	thnicity, N	lew Mexic	o, 2010-2:	014
			Dea	ths			Rate	es*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	7	66	0	73	3.5	31.5	0.0	18.6
	Asian/Pacific Islander	0	7	0	7	0.0	17.8	0.0	8.8
	Black	3	31	1	35	6.3	50.3	10.4	29.0
	Hispanic	82	684	16	782	8.1	57.6	7.9	34.7
	White	49	471	28	548	8.6	40.8	7.0	25.8
	Total	141	1,277	48	1,466	7.6	48.2	7.4	29.4
Female	American Indian	4	39	1	44	2.0	16.9	2.2	9.9
	Asian/Pacific Islander	0	4	0	4	0.0	8.0	0.0	4.0
	Black	3	11	0	14	7.7	23.4	0.0	14.5
	Hispanic	38	344	13	395	3.9	28.5	5.1	17.3
	White	25	453	54	532	4.7	38.6	11.3	23.5
	Total	70	859	69	998	3.9	31.7	8.7	19.2
Total	American Indian	11	105	1	117	2.8	23.9	1.3	14.1
	Asian/Pacific Islander	0	11	0	11	0.0	12.3	0.0	6.2
	Black	6	42	1	49	6.9	38.7	5.0	22.7
	Hispanic	120	1,028	29	1,177	6.0	42.9	6.3	26.0
	White	74	924	82	1,080	6.7	39.7	9.3	24.7
	Total	211	2,136	117	2,464	5.8	39.8	8.1	24.3

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population Sources: NMDOH BVRHS death files and UNM-GPS population files; SAES

New Mexico Substance Abuse Epidemiology Profile

Problem Statement (continued)

Table 1 shows that Hispanic men had the highest total drug overdose death rate during 2010-2014. Hispanic men had higher unintentional drug overdose death rates than White men across the age range (Chart 4). The rates of total drug overdose death (Table 1) and unintentional drug overdose death (Table 3) among men were roughly 1.5 times that of women (Table 2). Among women, drug overdose death from prescription drugs was more common than from illicit drugs across the age range. Illicit drugs were the predominant drug type causing death among males across the age range, and the rates were highest among males aged 25-54 years.

Rio Arriba County had the highest total drug overdose death rate (78.4 deaths per 100.000) and unintentional drug overdose death rate (69.8 deaths per 100,000; Table 3) among all New Mexico counties during 2010-2014. However, the problem of drug overdose is by no means limited to Rio Arriba County. As expected, Bernalillo County had the largest number of unintentional drug overdose deaths (Table 3) and eight New Mexico counties had total drug overdose death rates more than twice the U.S. rate (Chart 2).

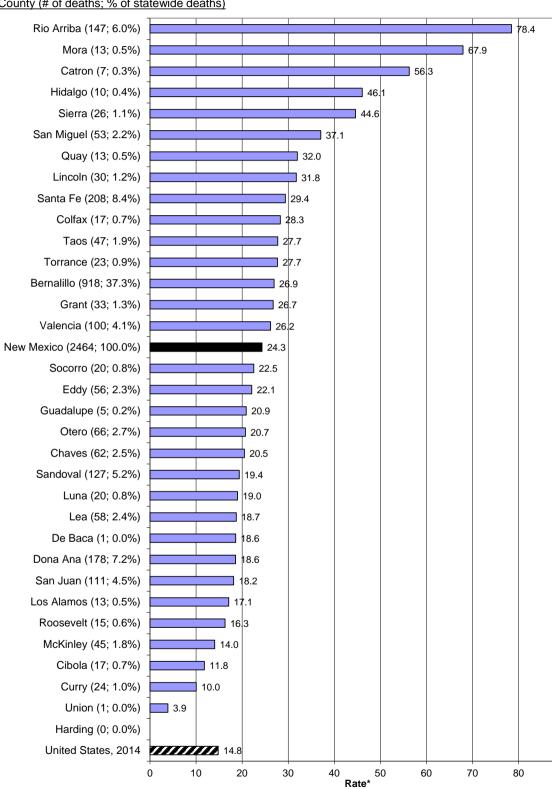
The death rate from prescription drugs exceeded the statewide death rate from illicit drugs in more than 80% (27 of 33) of the counties (Table 3).

Table 2: Total Drug Overdose Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

			Deat	hs					Rates	S*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	19	9	23	456	396	918	14.0	9.2	23.0	29.1	26.4	26.9
Catron	0	0	0	2	5	7	0.0	0	0.0	83.3	49.4	56.3
Chaves	1	1	3	25	32	62	41.7	33.2	46.8	17.0	23.0	20.5
Cibola	2	0	0	6	9	17	4.2	0.0	0.0	11.7	27.9	11.8
Colfax	0	0	0	10	7	17	0.0	0.0	0.0	35.3	22.7	28.3
Curry	0	0	2	6	16	24	0.0	0.0	13.3	6.9	13.0	10.0
De Baca	0	0	0	1	0	1	0.0	0.0	0.0	40.4	0.0	18.6
Dona Ana	0	0	4	84	87	178	0.0	0.0	21.4	13.5	30.1	18.6
Eddy	0	0	0	19	37	56	0.0	0.0	0.0	17.0	27.1	22.1
Grant	0	0	0		17	33	0.0	0.0	0.0	27.0	28.3	26.7
Guadalupe	0	0	0	5	0	5	0.0	0.0	0.0	26.3	0.0	20.9
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	1	2	6	10	0.0	0	1,344.0	17.1	71.4	46.1
Lea	0	1	5		39	58	0.0	57.3	37.2	8.8	28.6	18.7
Lincoln	1	0	0		20	30	27.9	0.0	0.0	33.4	31.3	31.8
Los Alamos	0	0	0		11	13	0.0	0.0	0.0	21.2	19.1	17.1
Luna	0	0	0		16	20	0.0	0.0	0.0	3.9	47.4	19.0
McKinley	29	0	1	8	7	45	12.5	0.0	45.1	19.2	16.4	14.0
Mora	0	0	0		0	13	0.0	0.0	0.0	80.0	0.0	67.9
Otero	4	0	3	19	39	66	17.6	0.0	28.1	19.5	21.5	20.7
Quay	0	0	0		5	13	0.0	0.0	0.0	45.9	23.1	32.0
Rio Arriba	10	0	1	126	10	147	35.5	0.0	116.3	95.2	35.2	78.4
Roosevelt	0	0	1	4	10	15	0.0	0.0	21.0	11.9	18.6	16.3
Sandoval	13	0	1	46	62	127	18.5	0.0	7.6	20.2	19.7	19.4
San Juan	29	0	2	17	63	111	14.1	0.0	53.4	16.4	21.1	18.2
San Miguel	0	0	0	46	7	53	0.0	0.0	0.0	41.5	24.7	37.1
Santa Fe	2	0	1	131	71	208	9.4	0.0	16.1	36.6	22.3	29.4
Sierra	1	0	0	5	20	200	96.0	0.0	0.0	31.0	53.6	44.6
Socorro	2	0	0		7	20	18.9	0.0	0.0	27.3	16.8	22.5
Taos	1	0	0	26	20	47	9.5	0.0	0.0	30.6	24.8	27.7
Torrance	1	0	0		11	23	45.8	0.0	0.0	39.9	24.0	27.7
Union	0	0	0	1	0	1	0.0	0.0	0.0	9.4	0.0	3.9
Valencia	2	0	1	46	50	100	21.6	0.0	25.6	21.3	33.1	26.2
New Mexico	117	11 0, age-adjust	49	1,177	1,080	2,464	14.1	6.2	22.7	26.0	24.7	24.3

All rates are per 100,000, age-adjusted to the 2000 US standard population Sources: NMDOH BVRHS death files and UNM-GPS population files; SAES

Chart 2: Total Drug Overdose Death Rates* by County, New Mexico, 2010-2014



County (# of deaths; % of statewide deaths)

* All rates are per 100,000, age-adjusted to the 2000 US standard population Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); SAES New Mexico Substance Abuse Epidemiology Profile

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Chart 3: Total Drug Overdose Death Rates* by County, New Mexico, 2010-2014

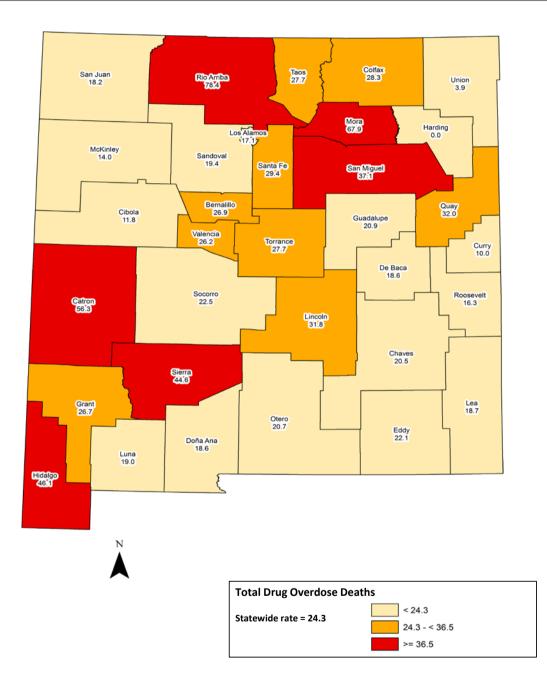
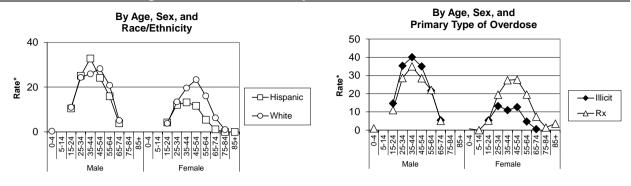


Chart 4: Unintentional Drug Overdose Death Rates* by Selected Characteristics, New Mexico, 2010-2014



* Age-specific rates per 100,000 population; drug overdose primary type categories are not mutually exclusive Source: OMI death files; UNM-GPS population files; SAES

Table 3: Uninintentional Drug Overdose Deaths and Rates*, New Mexico, 2010-2014

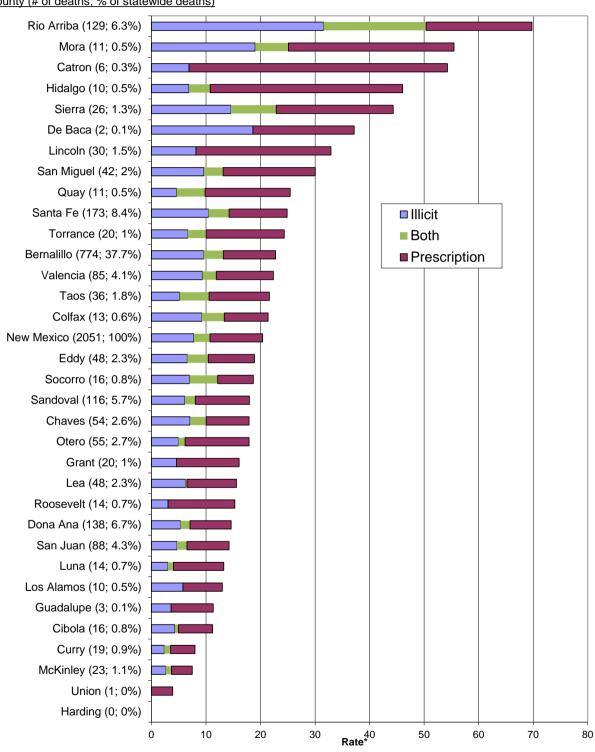
			Dea	ths					Rates	5*		
	S	ex	Ove	erdose Ty	pe	Total	Se	ex	Ove	erdose Ty	ре	Total
County	Male	Female	Illicit	Rx	Both		Male	Female	Illicit	Rx	Both	
Bernalillo	504	264	325	326	123	774	14.8	7.7	9.6	9.6	3.6	22.8
Catron	3	3	2	4	0	6	20.5	34	6.9	47.4	0.0	54.3
Chaves	27	27	22	24	8	54	8.6	9.3	7.1	7.9	2.9	17.9
Cibola	10	6	6	9	1	16	7.1	4.1	4.3	6.3	0.7	11.2
Colfax	9	4	5	5	3	13	14.1	7.3	9.2	8.1	4.1	21.4
Curry	11	8	6	10	3	19	4.3	3.6	2.3	4.5	1.2	8.0
De Baca	2	0	1	1	0	2	37.2	0.0	18.6	18.6	0.0	37.2
Dona Ana	87	51	51	70	17	138	9.1	5.6	5.3	7.5	1.8	14.6
Eddy	26	21	17	21	10	48	10.1	8.4	6.6	8.5	3.8	18.9
Grant	11	9	5	14	0	20	9.8	7.4	4.6	11.5	0.0	17.3
Guadalupe	2	1	1	2	0	3	7.7	3.6	3.6	7.7	0.0	11.3
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	5	5	2	7	1	10	24.6	21	6.9	35.3	3.9	46.1
Lea	25	23	19	28	1	48	8.1	7.5	6.2	9.0	0.3	15.6
Lincoln	15	15	6	24	0	30	16.2	16.7	8.2	24.8	0.0	32.9
Los Alamos	7	3	4	6	0	10	9.2	3.8	5.8	7.2	0.0	13.0
Luna	6	8	3	10	1	14	5.3	7.9	3.0	9.3	1.0	13.3
McKinley	17	6	9	11	3	23	5.6	1.9	2.6	3.8	1.0	7.5
Mora	7	4	4	6	1	11	32.6	22.9	19.0	30.4	6.1	55.5
Otero	36	19	14	37	4	55	12.1	5.7	4.9	11.7	1.2	17.9
Quay	4	7	3	6	2	11	8.8	16.6	4.6	15.6	5.2	25.4
Rio Arriba	99	30	59	37	33	129	54.1	15.7	31.5	19.4	18.8	69.8
Roosevelt	10	4	3	11	0	14	10.7	4.6	3.0	12.2	0.0	15.3
Sandoval	75	40	37	66	12	116	12.0	6.0	6.1	9.9	2.0	18.1
San Juan	55	33	29	48	11	88	9.0	5.2	4.7	7.7	1.8	14.2
San Miguel	23	19	13	24	5	42	15.8	14.3	9.6	16.9	3.5	30.0
Santa Fe	114	59	68	79	26	173	16.7	8.1	10.4	10.6	3.8	24.9
Sierra	14	12	8	14	4	26	23.6	20.7	14.6	21.4	8.3	44.3
Socorro	8	8	6	6	4	16	9.0	9.7	6.9	6.5	5.2	18.7
Taos	24	12	7	20	9	36	15.4	6.2	5.1	11.1	5.4	21.6
Torrance	10	10	5	13	2	20	12.9	11.4	6.6	14.3	3.4	24.4
Union Valencia	1 53	0	0 35	1 39	0 11	1 85	3.9 13.9	0.0 8.4	0.0 9.3	3.9 10.5	0.0 2.5	3.9 22.3
Total	1,300	743	775	979	295	2,051	13.9	0.4 7.3	9.3 7.8	9.6	2.5	22.3

* All rates are per 100,000, age-adjusted to the 2000 US standard population;

drug overdose type categories are mutually exclusive

Source: OMI death files; UNM-GPS population files; SAES

Chart 5: Uninintentional Drug Overdose Death Rates* by County and Drug Type, New Mexico, 2010-2014



County (# of deaths; % of statewide deaths)

* All rates are per 100,000, age-adjusted to the 2000 US standard population

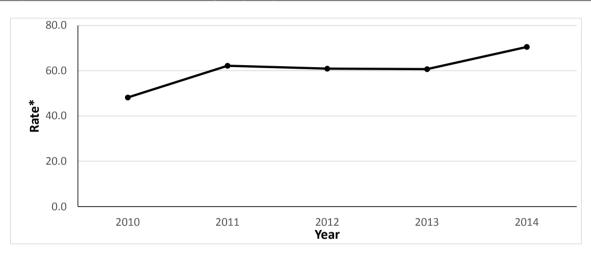
OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS

Problem Statement

Mortality is just one, and the most extreme, of the health outcomes associated with drug abuse. In the U.S., between 2004 and 2009, there has been a 98.4% increase in emergency department (ED) visits related to misuse or abuse of prescription drugs, particularly opioids (Paulozzi, L. J., Jones, C. M., Mack, K. A., & Rudd, R. A. [2011]. Vital Signs: Overdoses of prescription opioid pain relievers-United States, 1999–2008. *Morbidity and Mortality Weekly Report*, *60*[43], 6). In NM, the emergency department dataset (EDD) is collected in accordance with the NM Public Health Act and New Mexico Administrative Code 7.4.3.10.

Chart 1 shows that between 2010 and 2014, the rate of opioid-related overdose emergency department visits increased 46.3%. Just between 2013 and 2014 this increase was 16.1%.

Chart 1: Opioid Overdose Related Emergency Department Visit Rates*, New Mexico, 2010-2014



* Rates per 100,000

Sources: NMDOH EDD files and UNM-GPS population files; SAES

Table 1: Opioid Overdose Related Emergency Department Visit Events and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

		Eme	ergency Dep	partment Vi	sits		Rate	es*	
		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	16	59	3	78	8.0	28.1	9.7	18.2
	Asian/Pacific Islander	3	1	1	5	11.2	2.5	18.1	7.7
	Black	12	38	1	51	25.2	61.7	10.4	40.7
	Hispanic	334	945	36	1,315	33.1	79.6	17.8	55.6
	White	303	890	99	1,292	53.4	77.2	24.6	64.2
	Total	838	2,404	164	3,406	45.3	90.7	25.2	67.6
Female	American Indian	33	63	6	102	16.6	27.4	13.5	23.1
	Asian/Pacific Islander	0	3	0	3	0.0	6.0	0.0	3.0
	Black	11	26	2	39	28.3	55.3	19.1	40.8
	Hispanic	233	553	48	834	23.8	45.8	18.9	35.4
	White	265	896	147	1,308	49.9	76.3	30.8	63.9
	Total	667	1,819	231	2,717	37.6	67.1	29.0	53.3
Total	American Indian	49	122	9	180	12.3	27.7	11.9	20.7
	Asian/Pacific Islander	3	4	1	8	5.7	4.5	7.1	4.9
	Black	23	64	3	90	26.6	58.9	15.0	41.4
	Hispanic	567	1,498	84	2,149	28.5	62.5	18	46
	White	568	1,786	246	2,600	51.7	76.7	27.9	64.2
	Total	1,505	4,223	395	6,123	41.5	78.8	27.3	60.5

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Problem Statement (continued)

Men had higher rates of opioid-related overdose emergency department visits during 2010-2014 compared to women (Table1). Among both men and women, Whites had the highest rates compared to all other racial/ethnic groups. Among men, Whites are followed by Hispanics. Blacks followed Whites among women. Table 1 also shows that for both sexes, those in the 25-64 age group had the highest rates.

Rio Arriba, San Miguel, and Santa Fe counties had the highest rates of opioid-related overdose emergency department visits during 2010-2014 (Char 2). Table 2 shows that in Rio Arriba (183.7 opioid-related overdose emergency department visits per 100,000) and Santa Fe (115.5 opioid-related overdose emergency department visits per 100,000) counties, the rates were driven by Whites (471.3 and 151.9 opioid-related overdose emergency department visits per 100,000; respectively) whereas in San Miguel (127.3 opioid-related overdose emergency department visits per 100,000) it is driven by Hispanics (134.4 opioid-related overdose emergency department visits per 100,000). Bernalillo County had the biggest percentage of opioid-related overdose emergency department visits (22.2% of the state total), followed by Santa Fe County (7.7%). It is important to note that federal facilities (e.g. Indian Health Services and Veterans Administration) are not included in these results.

]		Emerge	ncy Dep	artment Vi	sits				Rate	es*		
County	American Indian	Asian/ Pacific Islander	Black		White	All Races	American Indian	Asian/ Pacific Islander	Black		White	All Races
Bernalillo	60	5	52	676	857	2,199	40.8	6.3	50.4	41.6	61.7	64.8
Catron	0			0	5	5	0.0			0.0	32.0	24.5
Chaves	0	0	0		104	176	0.0	0.0	0.0	38.2	75.5	55.6
Cibola	2	0	0		9	59	3.3	0.0	0.0	70.0	34.1	43.8
Colfax	0		0		14	39	0.0		0.0	72.2	55.0	68.4
Curry	0	0	2		31	57	0.0	0.0	10.4	4.3	25.5	23.2
De Baca			0		1	2			0.0	34.1	7.7	18.8
Dona Ana	0	1	5	197	256	537	0.0	7.2	33.0	30.0	83.1	52.7
Eddy	0	0	1	-	79	138	0.0	0.0	26.1	35.7	55.8	50.7
Grant	0	0	1	47	72	122	0.0	0.0	100.5	70.7	108.7	88.0
Guadalupe	0	0	0	4	0	6	0.0	0.0	0.0	27.8	0.0	31.2
Harding		-		0	0	0				0.0	0.0	0.0
Hidalgo				7	4	11				57.6	50.8	54.1
Lea	0	0	6	49	64	124	0.0	0.0	48.5	34.7	45.2	38.6
Lincoln	0	0	1	3	21	32	0.0	0.0	114.9	8.1	38.6	35.4
Los Alamos	0	0	0	7	20	33	0.0	0.0	0.0	59.3	36.7	45.5
Luna	0	0	0	19	28	50	0.0	0.0	0.0	25.4	65.8	41.5
McKinley	11	0	1	8	15	49	4.4	0.0	18.2	16.7	35.3	14.3
Mora	0	0	0		5	23	0.0	0.0	0.0	97.7	201.4	106.1
Otero	7	0	3	17	52	92	41.1	0.0	23.4	15.8	29.0	27.5
Quay	0	0	0		9	26	0.0	0.0	0.0	53.6	54.6	69.7
Rio Arriba	10	0	2	137	91	335	38.8	0.0	229.8	106.0	471.3	183.7
Roosevelt	0	0	1	2	15	21	0.0	0.0	64.0	5.5	29.6	23.7
Sandoval	19	1	4	93	148	336	24.8	9.7	28.7	40.8	50.6	53.2
San Juan	55	0	2	40	102	204	25.2	0.0	31.7	34.4	35.4	32.8
San Miguel	0	0	0	148	26	177	0.0	0.0	0.0	134.4	98.3	127.3
Santa Fe	2	0	7	304	373	760	9.5	0.0	104.4	83.3	151.9	115.5
Sierra	2	0	0	5	27	37	394.6	0.0	0.0	27.9	92.5	80.4
Socorro	2	0	0		21	55	24.1	0.0	0.0	38.9	62.5	61.3
Taos	7	0	0	75	27	114	79.3	0.0	0.0	89.9	54.2	79.9
Torrance	0		1	8	20	37	0.0		73.9	28.6	43.9	47.2
Union	0		0	-	3	6	0.0		0.0	27.0	33.7	29.1
Valencia	3	1	1	87	97	253	28.2	40.5	25.6	41.3	73.0	70.0
New Mexico	180	8	90	,	2,600	6,123	20.7	4.9	41.4	45.5	64.2	60.5

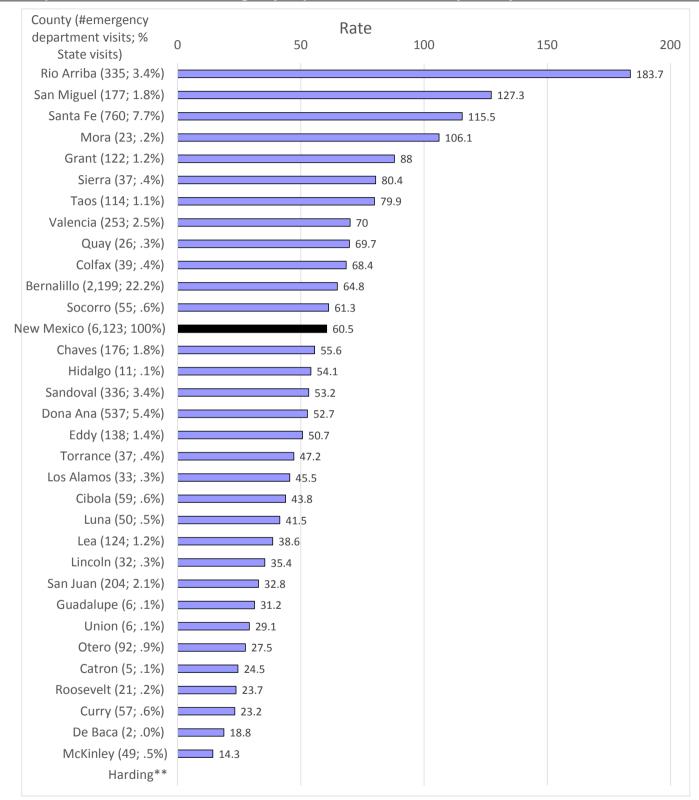
Table 2: Opioid Overdose Related Emergency Department Visit Events and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH EDD files and UNM-GPS population files; SAES

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Chart 2: Opioid Overdose Related Emergency Department Visit Rates* by County, New Mexico, 2010-2014

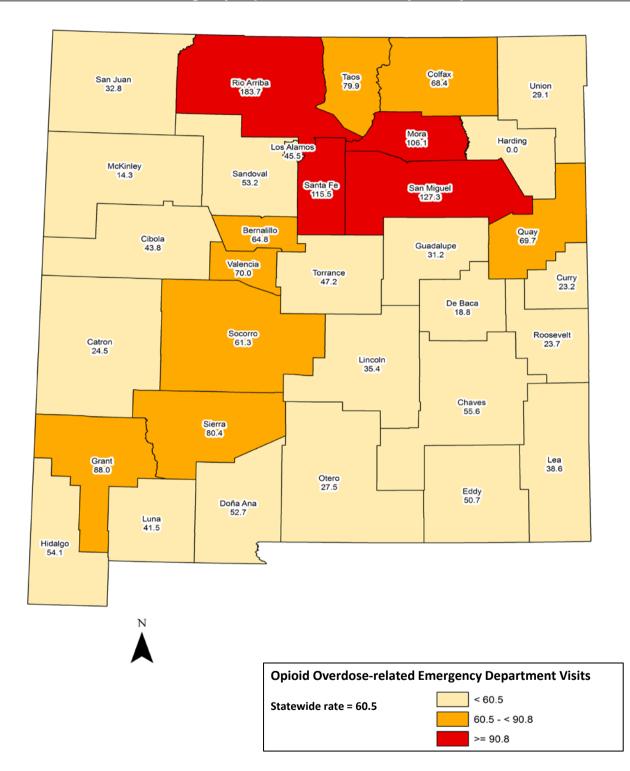


* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH EDD files and UNM-GPS population files (NM); SAES

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Chart 2: Opioid Overdose Related Emergency Department Visit Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

SUICIDE

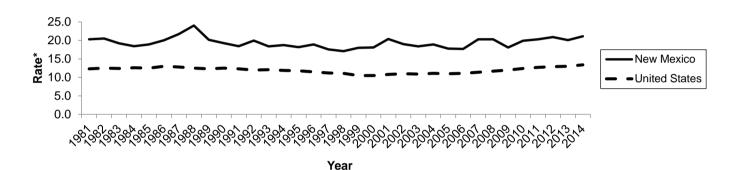
Problem Statement

Suicide is a serious and persistent public health problem in New Mexico. As shown in Chart 1, over the period 1981 through 2014 NM's suicide rate has consistently been 1.5 to 1.9 times the U.S. rate. NM has ranked among the top five states for all but two of those years. While the U.S. rate declined 15% between 1981 and 2000, it increased thereafter for an overall 6% increase from 1981 to 2013. The NM rate followed a similar pattern. In NM in 2012, suicide was the second leading cause of death (after unintentional injuries) for persons aged 15-44; and the seventh leading cause of death overall.

Table 1 and Chart 2 show that male suicide rates were three or more times female rates across the age range and among all race/ethnic groups except Asian/Pacific Islanders. This reflects the fact that men tend to choose more lethal means (e.g., firearms) when attempting suicide. American Indian males have somewhat higher suicide rates from ages 15-44; but White males have substantially higher rates at older ages. It is important to note that the very high White male rate in the age 85+ category is based on a small number of deaths. The vast majority (75%) of White male suicides (and an even higher proportion of Hispanic and American Indian male suicides) occur before age 65.

Chart 3 shows that five counties (Bernalillo, Dona Ana, Santa Fe, Sandoval, and San Juan) had substantial numbers of suicides (more than five per year). For the time period 2010-2014, almost a third of NM's counties were more than twice the most recent available U.S. data. A number of smaller counties also had very high rates. Suicide remains a problem throughout the state.

Chart 1: Suicide Rates*, New Mexico and United States, 1981-2014



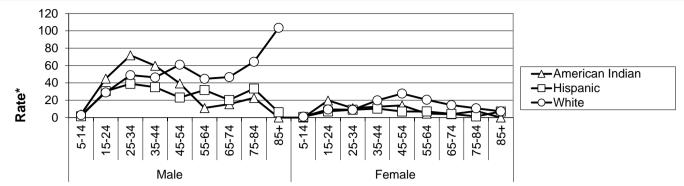
* Rate per 100,000, age-adjusted to the 2000 US standard population Source: NMDOH BVRHS death files and UNM-GPS population files (NM); CDC Wonder (US) Table 1: Suicide Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014

			Dea	ths			Rat	es*	
0		Ages	Ages	Ages	All	Ages	Ages	Ages	All
Sex	Race/Ethnicity	0-24	25-64	65+	Ages	0-24	25-64	65+	Ages*
Male	American Indian	40	103	5	148	20.0	49.1	16.2	34.5
	Asian/Pacific Islander	2	7	2	11	7.5	17.8	36.2	14.7
	Black	5	13	2	20	10.5	21.1	20.8	16.8
	Hispanic	121	380	47	548	12.0	32.0	23.2	24.2
	White	80	574	232	886	14.1	49.8	57.6	38.2
	Total	249	1,083	298	1,630	13.5	40.8	45.7	32.0
Female	American Indian	16	25	2	43	8.0	10.9	4.5	9.1
	Asian/Pacific Islander	2	7	1	10	7.6	13.9	11.8	11.2
	Black	0	3	0	3	0.0	6.4	0.0	4.0
	Hispanic	29	100	9	138	3.0	8.3	3.5	5.9
	White	24	232	58	314	4.5	19.8	12.1	12.9
	Total	71	370	70	511	4.0	13.7	8.8	9.5
Total	American Indian	56	128	7	191	14.0	29.1	9.3	21.3
	Asian/Pacific Islander	4	14	3	21	7.5	15.6	21.4	12.8
	Black	5	16	2	23	5.8	14.7	10.0	11.1
	Hispanic	150	480	56	686	7.5	20.0	12.2	14.9
	White	104	806	290	1,200	9.5	34.6	32.9	25.3
	Total	320	1,453	368	2,141	8.8	27.1	25.4	20.5

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population Sources: NMDOH BVRHS death files and UNM-GPS population files; SAES

SUICIDE (continued)

Chart 2: Suicide Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2010-2014



* Age-specific rates per 100,000

Sources: NMDOH BVRHS death files and UNM-GPS population files; SAES

Table 2: Suicide Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2010-2014

			Dea	aths					Ra	tes*		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	18	11	11	228	387	665	13.1	12.0	11.6	14.7	23.9	19.3
Catron	1	0	0	4	7	12	137.6	0.0	0.0	135.4	35.1	66.2
Chaves	2	0	0	14	49	65	83.3	0.0	0.0	9.4	31.9	20.4
Cibola	10	0	0	6	10	27	18.0	0.0	0.0	12.8	25.9	19.1
Colfax	0	0	0	8	8	17	0.0	0.0	0.0	28.0	16.6	23.4
Curry	1	0	3	9	16	29	43.4	0.0	16.7	8.9	10.9	11.2
De Baca	0	0	0	0	4	4	0.0	0.0	0.0	0.0	67.3	38.3
Dona Ana	2	1	3	75	90	173	19.3	7.2	20.6	11.5	25.0	16.4
Eddy	1	0	0	19	38		44.4	0.0	0.0	19.1	27.0	22.9
Grant	0	0	0	18	35	53	0.0	0.0	0.0	30.7	50.8	
Guadalupe	0	0	0	3	1	4	0.0	0.0	0.0	20.1	32.7	20.9
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	3	2	5	0.0	0	0.0	30.0	30.0	29.7
Lea	1	0	1	10	37	49	51.2	0.0	6.5	6.0	26.2	15.6
Lincoln	0	0	0	3	22	25	0.0	0.0	0.0	12.6	25.4	21.6
Los Alamos	0	0	0	2	12	14	0.0	0.0	0.0	18.4	16.9	16.0
Luna	0	0	0	6	16	23	0.0	0.0	0.0	8.1	30.4	16.8
McKinley	80	0	0	9	10	99	31.0	0.0	0.0	18.7	20.0	28.4
Mora	0	0	0	7	0		0.0	0.0	0.0	38.4	0.0	31.3
Otero	4	3	1	13	63	86	20.1	69.7	8.3	13.1	32.1	26.0
Quay	0	0	0	6	6		0.0	0.0	0.0	31.1	25.2	26.7
Rio Arriba	7	0	0	30	10	47	27.7	0.0	0.0	21.7	28.9	23.7
Roosevelt	0	0	0	1	8		0.0	0.0	0.0	2.7	14.1	10.0
Sandoval	21	1	2	38	81	144	26.6	7.7	13.4	15.5	23.4	
San Juan	39	2	1	19	74	135	16.6	155.1	16.2	17.0	25.3	21.9
San Miguel	0	0	0	22	12	34	0.0	0.0	0.0	20.8	33.3	22.9
Santa Fe	0	1	0	67	87	157	0.0	7.8	0.0	18.4	25.2	20.7
Sierra	1	0	0	2	18		179.4	0.0	0.0	12.5	33.1	30.3
Socorro	0	0	0	5	17	22	0.0	0.0	0.0	12.1	45.1	24.4
Taos	2	0	0		23	44	23.3	0.0	0.0	22.8	32.2	26.2
Torrance	0	0	0	5	13		0.0	0.0	0.0	13.4	31.6	22.4
Union	0	0	0	1	6		0.0	0.0	0.0	15.2	54.6	31.5
Valencia	1	2	1	33	38	75	8.7	97.6	19.4	15.4	25.6	19.9
New Mexico	191	21	23		1,200			12.8	11.1	14.9	25.3	20.5

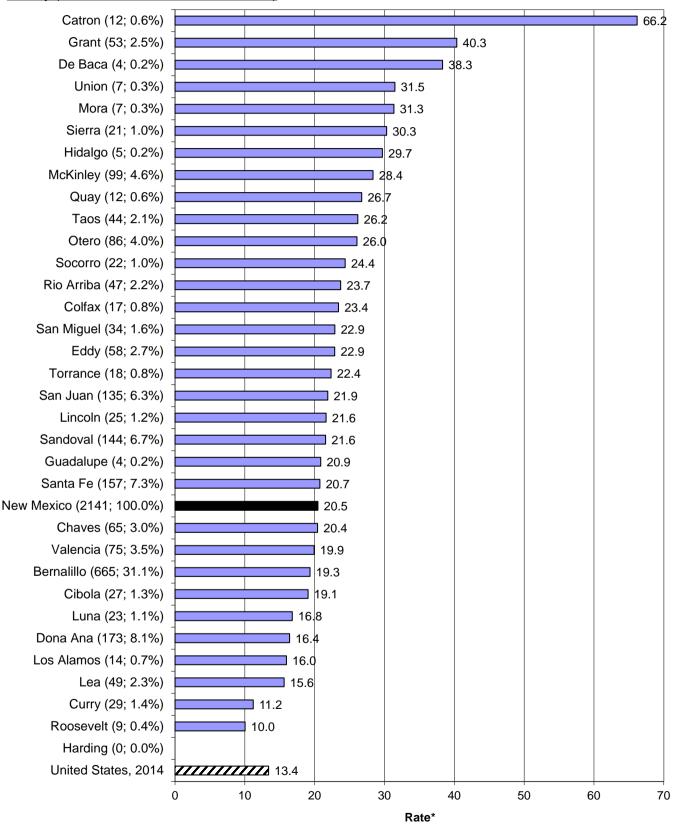
* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files; SAES

SUICIDE (continued)

Chart 3: Suicide Rates* by County, New Mexico, 2010-2014

County (# of deaths; % of statewide deaths)

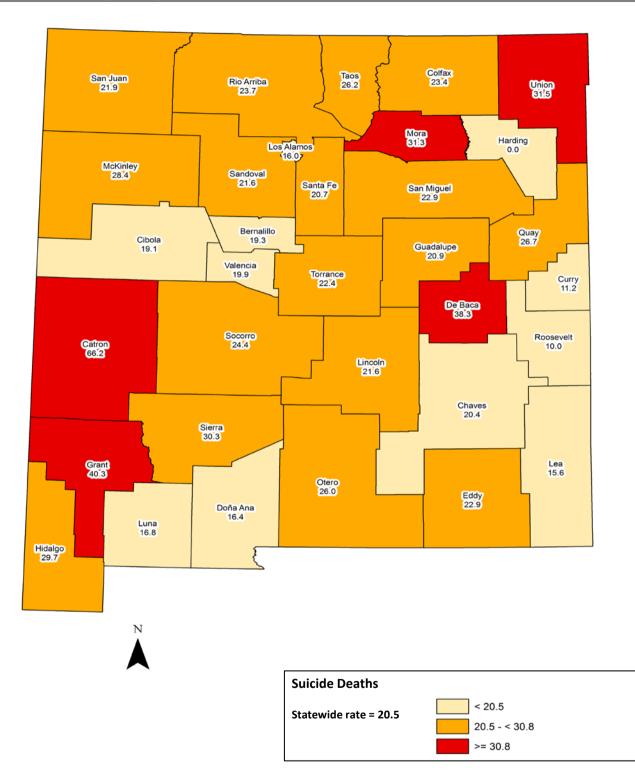


* All rates are per 100,000, age-adjusted to the 2000 US standard population

Sources: NMDOH BVRHS death files and UNM-GPS population files (NM); NCHS death and population files (US); CDC ARDI; SAES

SUICIDE (continued)

Chart 4: Suicide Rates* by County, New Mexico, 2010-2014



* All rates are per 100,000, age-adjusted to the 2000 US standard population

Section 2

Mental Health

ADULT MENTAL HEALTH

Problem Statement

Adult mental health issues range in a spectrum from day-to-day challenges with stress, anxiety, and "the blues"; to persistent mental health challenges arising from chronic physical conditions such as diabetes, asthma, and obesity; to chronic clinically diagnosable psychiatric morbidities such as clinical anxiety, schizophrenia, bipolar disorder, and depression; to serious life-threatening situations such as suicidal ideation and suicide attempt, which sometimes result from a combination of the mental and physical health challenges mentioned above. A host of measures exist for assessing the mental health status of individuals, but characterizing the mental health status of the population is a relatively new field. If such an assessment can be done using a simple and non-invasive approach with a reasonable level of sensitivity and specificity, the resulting characterization of the population's mental health can help public health and mental health professionals better understand the distribution of mental health issues in the population; and design better systems to help identify, address, and mitigate these issues before they become more serious.

Among measures that have been suggested by the CDC as potential tools for assessing population well-being and mental health is a measure of the frequency with which people experience poor mental health. This measure is based on the single simple question "How many days during the past 30 days was your mental health not good?". Respondents who report that they experienced 14 or more days when their mental health was "not good" are classified as experiencing Frequent Mental Distress (FMD). Although FMD is certainly not a clincal diagnosis, there is evidence to suggest that it is indeed associated with a person's mental health status. Chart 1 shows the proportion of people in various response categories who experienced FMD. The proportion of the total New Mexico population that experienced FMD was about 12.4%. As might be expected, people in good health with higher incomes and more education were significantly less likely than the general population to report FMD. People with less education, with chronic health conditions such as obesity, diabetes, or asthma, or with lower income, were significantly more likely to report FMD. Of particular relevance regarding FMD's potential usefulness as a measure of population mental health, FMD was many times more prevalent among respondents who reported more serious psychiatric morbidity, including screening positive for alcohol dependence or abuse (33% reported FMD), ever being diagnosed with an anxiety disorder (37% reported past-month FMD), or receiving a diagnosis of current depression based on the Patient Health Questionaire (65% reported past-month FMD). Among the cohort that reported past-year suicidal ideation with no history of suicide attempt, 48% reported past-month FMD; and among the cohort at high risk for suicide that reported both past-year suicidal ideation and a prior suicide attempt, 62% reported past-month FMD. Meanwhile, almost half (46%) of FMD respondents were diagnosed with current depression (data not shown). These results suggest that this simple question, which is asked annually on the BRFSS, is a useful indicator of population mental health.

			Num	ber*			Perce	nt**	
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	-	6,157	-	6,695	-	14.7	-	11.8
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Black	-	-	-	1,641	-	-	-	10.2
	Hispanic	8,966	30,163	4,080	43,209	16.2	12.6	9.3	12.7
	White	7,645	17,365	4,883	30,232	21.5	8.7	5.8	9.4
	Total	16,945	58,372	10,252	86,069	16.2	11.4	7.2	11.2
Female	American Indian	-	5,117	894	6,810	-	11.5	8.9	10.4
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Black	-	-	-	2,492	-	-	-	16.1
	Hispanic	3,691	37,312	4,476	45,501	7.1	15.1	8.9	12.9
	White	4,361	30,886	11,008	46,369	17.9	15.1	10.8	13.9
	Total	10,577	79,159	17,295	107,385	10.9	15.2	10.2	13.5
Total	American Indian	912	11,274	1,319	13,505	4.4	13.1	9.2	11.1
	Asian/Pacific Islander	-	570	-	1,148	-	4.6	-	6.0
	Black	-	3,269	-	4,133	-	16.0	-	13.1
	Hispanic	12,657	67,475	8,556	88,710	11.8	13.8	9.1	12.8
	White	12,006	48,252	15,890	76,601	20.0	12.0	8.5	11.7
	Total	27,522	137,532	27,547	193,453	13.6	13.3	8.8	12.4

Table 1: Frequent Mental Distress (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2014

* Estimate of number of people in population group who reported Frequent Mental Distress in past 30 days

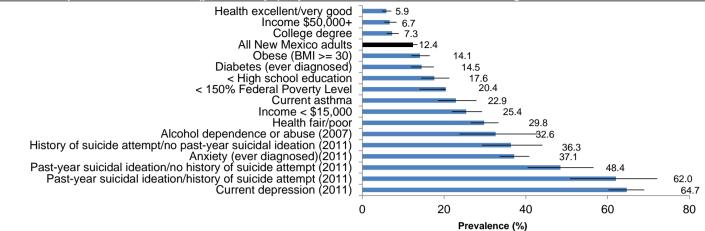
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)





* Frequent Mental Distress definition: respondent reported 14 or more days in past 30 days when mental health was "not good" Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 2: Frequent Mental Distress (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2014

			nber*		Percent**							
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	-	-	-	26,049	23,516	57,228	-	-	-	12.4	11.7	12.2
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	-	-	-	2,273	2,726	5,891	-	-	-	10.8	13.6	13.2
Cibola	-	-	-	833	789	1,935	-	-	-	12.6	17.8	10.9
Colfax	-	-	-	-	-	1,046	-	-	-	-	-	10.6
Curry	-	-	-	1,582	2,893	4,639	-	-	-	14.4	15.0	14.2
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	-	-	-	12,520	6,042	19,235	-	-	-	13.3	12.8	12.9
Eddy	-	-	-	1,976	2,523	5,019	-	-	-	12.0	12.7	13.3
Grant	-	-	-	868	923	1,881	-	-	-	9.2	7.3	8.3
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	-	-	-	1,799	2,566	4,775	-	-	-	7.6	13.4	10.1
Lincoln	-	-	-	-	1,485	2,000	-	-	-	-	14.1	13.2
Los Alamos	-	-	-	-	483	1,420	-	-	-	-	5.7	10.3
Luna	-	-	-	620	-	1,333	-	-	-	5.5	-	7.8
McKinley	3,982	-	-	491	645	5,270	12.8	-	-	7.0	10.3	11.5
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	-	-	-	1,671	3,436	6,219	-	-	-	13.7	16.6	15.7
Quay	-	-	-	-	-	228	-	-	-	-	-	3.3
Rio Arriba	-	-	-	4,637	476	5,154	-	-	-	21.4	8.7	16.6
Roosevelt	-	-	-	-	768	1,722	-	-	-	-	9.4	13.2
Sandoval	-	-	-	8,634	5,635	15,298	-	-	-	24.6	12.8	16.2
San Juan	4,265	-	-	1,468	5,295	11,214	14.5	-	-	10.1	14.9	13.6
San Miguel	-	-	-	2,522	-	3,129	-	-	-	17.6	-	17.0
Santa Fe	-	-	-	5,402	6,536	12,634	-	-	-	10.8	12.4	11.5
Sierra	-	-	-	-	529	1,607	-	-	-	-	7.6	15.9
Socorro	-	-	-	-	-	1,545	-	-	-	-	-	12.3
Taos	-	-	-	1,364	891	2,591	-	-	-	11.5	10.2	11.8
Torrance	-	-	-	-	-	-	-	-	-	-	-	-
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	-	-	-	2,855	3,070	6,721	-	-	-	9.8	12.8	11.7
New Mexico	13,505	1,148	4,133	88,710	76,601	193,453	11.1	6.0	13.1	12.8	11.7	12.4

* Estimate of number of people in population group who reported Frequent Mental Distress in past 30 days

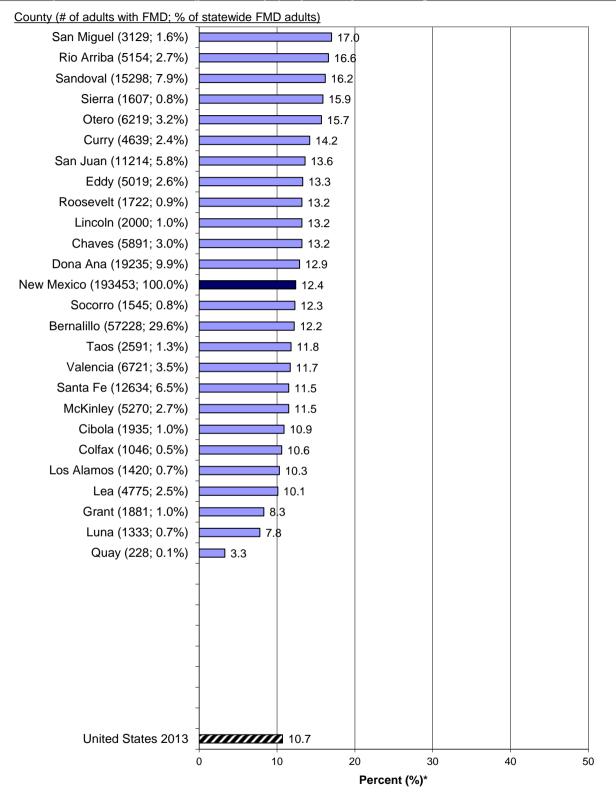
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 2: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014

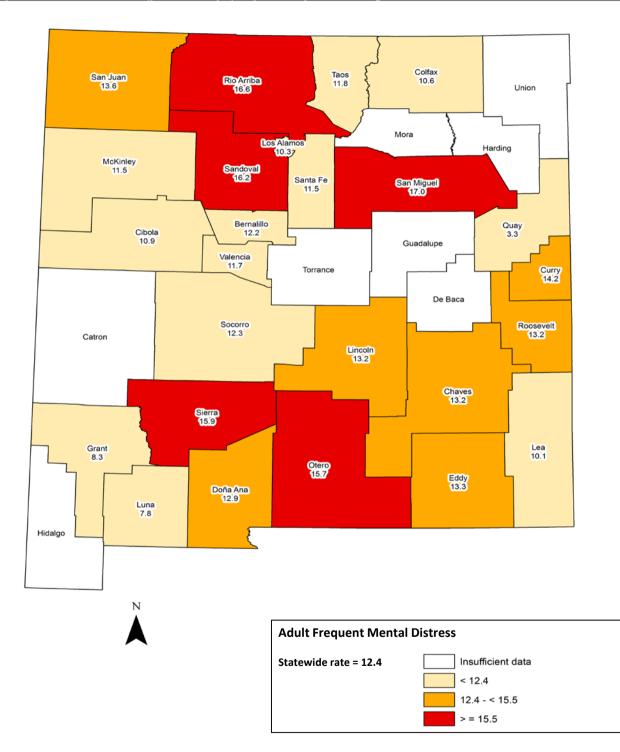


* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days The following counties were not included due to small number of respondents (< 50) in cell: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Torrance, Union

Source: NMBRFSS (NM); CDC BRFSS (US); SAES

ADULT MENTAL HEALTH (continued)

Chart 3: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days Insufficient data: Rate not reported due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

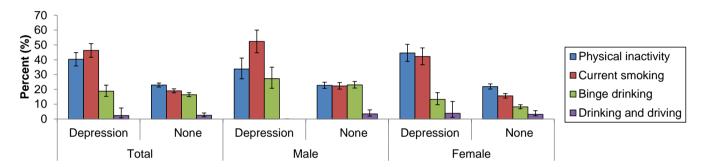
ADULT MENTAL HEALTH - DEPRESSION

Problem Statement (continued)

Depression is one of the most prevalent and treatable mental disorders. Major depression is usually associated with comorbid mental disorders, such as anxiety and substance use disorders, and impairment of a person's ability to function in work, home, relationships, and social roles. Depression is also a risk factor for suicide and attempted suicide. In addition, depressive disorders have been associated with an increased prevalence of chronic medical conditions, such as heart disease, stroke, asthma, arthritis, cancer, diabetes, and obesity. In 2011, the BRFSS assessed current depression using Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria.

Table 3 shows the prevalence of current depression was highest among the age-group 25-64 years (11.8%), slightly higher among females than males across the age range, and higher among Black (12.1%) and Hispanic adults (10.8%) than White adults (9.7%). Depression was more common among American Indian females (13.6%) and Hispanic females (13.2%) than among White females (11.1%). Chart 4 shows that current depression was associated, among both males and females, with significantly higher rates of some unhealthy behaviors including physical inactivity and current smoking. Chart 5 shows that current depression was associated with higher rates of chronic health conditions such as asthma and heart disease among males, and asthma, obesity, diabetes, and heart disease among females.

Chart 4: Unhealthy Behaviors by Depression Status and Sex, New Mexico, 2011



* Current Depression definition: scored 10 or more on Patient Health Questionaire depression inventory (PHQ-8); this instrument can establish a provisional depressive disorder diagnosis using Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) criteria. Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 3: Current Depression (past 2 weeks) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2011

			Num	ber*	Percent**					
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*	
Male	American Indian	-	4,220	-	4,636	-	10.3	-	9.0	
	Asian/Pacific Islander	-	-	-	-	-	-	-	-	
	Black	-	-	-	2,033	-	-	-	13.6	
	Hispanic	3,211	15,677	1,355	20,242	7.8	9.0	5.6	8.4	
	White	3,129	18,619	2,926	24,674	9.3	9.0	4.3	8.0	
	Total	7,152	40,978	4,908	53,037	8.2	9.2	4.9	8.4	
Female	American Indian	-	6,360	110	7,674	-	16.5	2.3	13.6	
	Asian/Pacific Islander	-	-	-	-	-	-	-	-	
	Black	-	1,085	-	1,156	-	12.8	-	10.1	
	Hispanic	2,441	26,895	2,434	31,770	8.2	15.4	6.5	13.2	
	White	2,957	30,547	3,926	37,431	9.7	13.3	5.2	11.1	
	Total	6,603	66,324	6,772	79,700	8.5	14.4	5.6	12.1	
Total	American Indian	-	10,579	110	12,311	-	13.3	1.3	11.4	
	Asian/Pacific Islander	-	-	-	1,414	-	-	-	7.2	
	Black	-	2,722	-	3,188	-	13.5	-	12.1	
	Hispanic	5,652	42,572	3,788	52,012	8.0	12.2	6.2	10.8	
	White	6,086	49,167	6,852	62,105	9.5	11.3	4.8	9.7	
	Total	13,755	107,302	11,680	132,737	8.4	11.8	5.3	10.3	

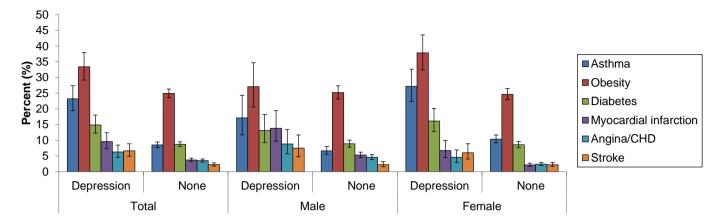
* Estimate of number of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria - Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT MENTAL HEALTH - DEPRESSION (continued)

Chart 5: Chronic Health Conditions by Depression Status and Sex, New Mexico, 2011



Source: BRFSS; SAES

Table 4: Current Depression (past 2 weeks) by Race and County, Adults Aged 18+, New Mexico, 2011

		Number*							Percent**					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races		
Bernalillo	2,617	-	-	17,465	20,696	43,877	13.6	-	-	11.2	9.6	10.4		
Catron	-	-	-	-	-	-	-	-	-	-	-	-		
Chaves	-	-	-	2,605	2,671	5,945	-	-	-	17.4	11.4	14.5		
Cibola	-	-	-	-	452	1,609	-	-	-	-	8.0	8.8		
Colfax	-	-	-	-	-	1,518	-	-	-	-	-	16.5		
Curry	-	-	-	-	1,039	2,117	-	-	-	-	6.3	8.5		
De Baca	-	-	-	-	-	-	-	-	-	-	-	-		
Dona Ana	-	-	-	6,492	3,685	10,778	-	-	-	9.5	8.8	9.3		
Eddy	-	-	-	2,315	2,190	4,813	-	-	-	21.9	10.6	14.4		
Grant	-	-	-	-	1,040	1,807	-	-	-	-	7.3	8.3		
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-		
Harding	-	-	-	-	-	-	-	-	-	-	-	-		
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-		
Lea	-	-	-	533	2,590	3,232	-	-	-	3.5	15.6	9.4		
Lincoln	-	-	-	-	939	1,729	-	-	-	-	7.7	9.4		
Los Alamos	-	-	-	-	1,567	2,095	-	-	-	-	13.6	15.5		
Luna	-	-	-	-	-	1,614	-	-	-	-	-	12.7		
McKinley	2,586	-	-	383	466	3,435	9.2	-	-	5.1	8.4	8.2		
Mora	-	-	-	-	-	-	-	-	-	-	-	-		
Otero	-	-	-	-	3,753	4,928	-	-	-	-	14.2	12.6		
Quay	-	-	-	-	-	1,101	-	-	-	-	-	22.2		
Rio Arriba	-	-	-	2,406	-	4,325	-	-	-	12.0	-	13.9		
Roosevelt	-	-	-	-	849	849	-	-	-	-	13.3	9.1		
Sandoval	-	-	-	1,605	4,721	6,586	-	-	-	9.7	9.4	8.3		
San Juan	2,258	-	-	93	3,584	5,935	12.2	-	-	0.8	8.8	8.3		
San Miguel	-	-	-	2,523	-	3,480	-	-	-	18.2	-	18.5		
Santa Fe	-	-	-	4,525	4,314	9,074	-	-	-	11.0	8.6	9.2		
Sierra	-	-	-	-	-	2,328	-	-	-	-	-	24.0		
Socorro	-	-	-	-	-	1,374	-	-	-	-	-	8.6		
Taos	-	-	-	740	287	1,157	-	-	-	6.6	3.6	5.7		
Torrance	-	-	-	-	-	1,477	-	-	-	-	-	10.7		
Union	-	-	-	-	-		-	-	-	-	-	-		
Valencia	-	-	-	1,737	1,935	4,110	-	-	-	7.3	8.6	8.3		
New Mexico	12,311	1,414	3,188		62,105	132,737	11.4	7.2	12.1	10.8	9.7	10.3		

* Estimate of number of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

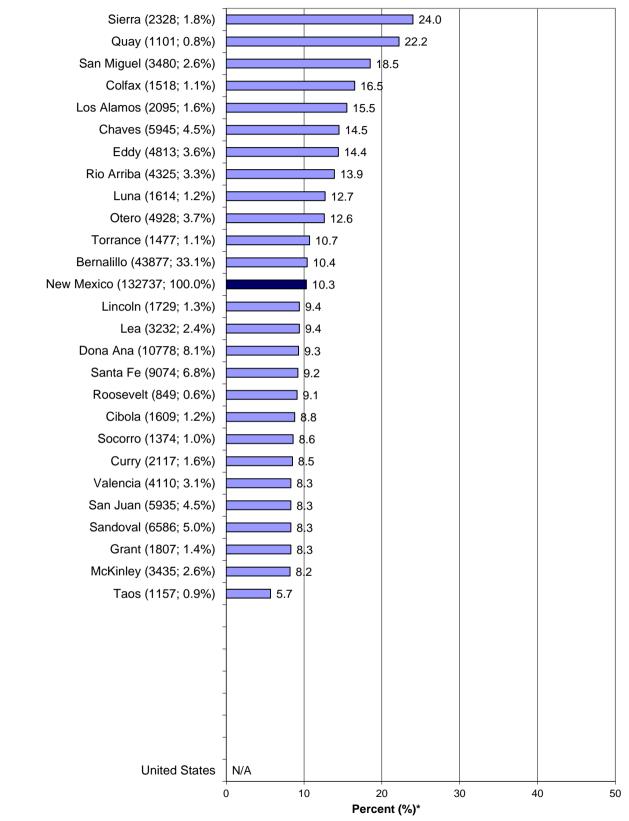
** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria - Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT MENTAL HEALTH - DEPRESSION (continued)

Chart 6: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2011

County (# of adults with current depression; % of statewide currently depressed adults)

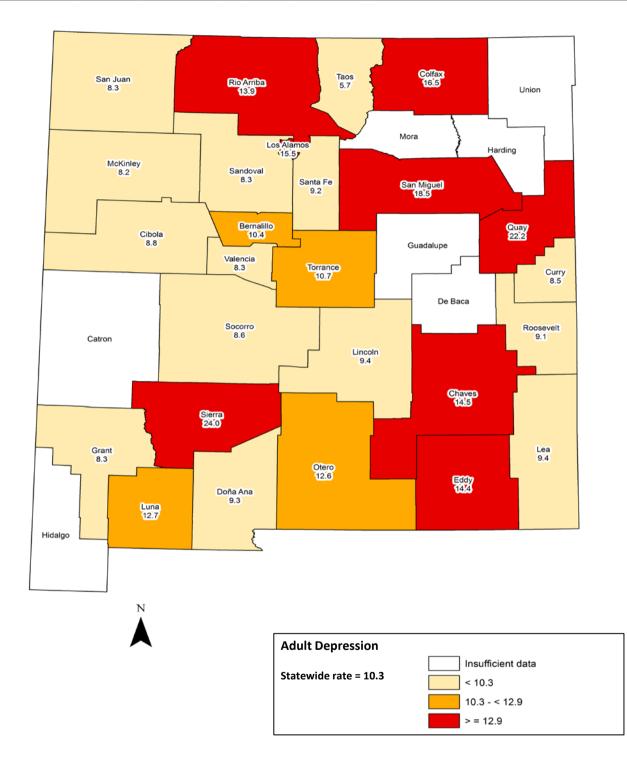


* Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria The following counties were not included due to small number of respondents (< 50) in cell: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

Source: NMBRFSS (NM); CDC BRFSS (US); SAES

ADULT MENTAL HEALTH - DEPRESSION (continued)

Chart 7: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2011



* Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria Insufficient data: Rate not reported due to small number of responents (< 50) in cell Source: BRFSS; SAES

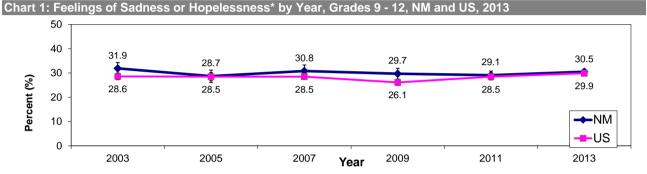
YOUTH FEELINGS OF SADNESS OR HOPELESSNESS

Problem Statement

Persistent feelings of sadness and hopelessness are criteria for, and predictors of, clinical depression for youth, and youth who experience depression are at a higher risk for being depressed as adults. Persistent sadness in youth has also been linked with suicidal behavior, drug and alcohol abuse, unsafe sex, and academic and social deficits. Feelings of sadness or loneliness not only affect teens but those around them, often causing problems in relationships with peers and family members.

The prevalence of persistent feelings of sadness or hopelessness among NM high school students showed no trend from 2003-2013. There was no statistically significant difference between the U.S. rate (29.9%) and the NM rate (30.5%) for feelings of sadness or hopelessness. Girls (40.0%) were far more likely to report feelings of sadness or hopelessness than boys (21.4%). There were no statistically significant variations by grade level or race/ ethnicity.

In 2013, the counties with the highest prevalence of persistent feelings of sadness or hopelessness were Sierra (39.3%), Catron (39.2%), San Miguel (37.8%), Luna (37.7%), and Lea (35.4%). The counties with the lowest prevalence were Hidalgo (17.1%), Mora (19.5%) and De Baca (22.3%). However, there was no statistical difference between any of the counties.



* Felt so sad or hopeless nearly every day for a period of 2 weeks that they stopped some normal activities, within the past 12 months Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Table 1: Feelings of Sadness or Hopelessness, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2013

	r	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	Race/Ethnicity	Percent [95% CI]				
Male	American Indian	18.2 (11.6-27.4)	21.9 (11.8-36.9)	23.8 (10.3-45.8)	10.8 (4.1-25.5)	19.2 (10.6-32.1)
	Asian/Pacific Islander					27.7 (16.5-42.6)
	Black					22.1 (14.1-33.0)
	Hispanic	21.7 (17.7-26.4)	22.8 (19.6-26.4)	22.0 (17.9-26.8)	23.2 (18.3-28.8)	22.5 (20.4-24.8)
	White	18.2 (14.6-22.3)	20.4 (14.8-27.3)	20.8 (13.8-30.0)	17.3 (14.7-20.2)	19.2 (16.8-21.7)
	Total	20.7 (17.8-23.9)	22.4 (19.3-25.9)	21.8 (17.8-26.3)	20.3 (16.7-24.5)	21.4 (19.2-23.8)
Female	American Indian	39.6 (27.7-53.0)	41.7 (31.1-53.2)	27.8 (15.5-44.6)	12.3 (4.5-29.4)	32.0 (23.7-41.5)
	Asian/Pacific Islander					19.1 (10.4-32.5)
	Black					
	Hispanic	43.0 (38.2-48.0)	46.2 (38.8-53.8)	44.4 (39.3-49.7)	40.9 (34.4-47.6)	43.6 (40.1-47.2)
	White	34.1 (24.4-45.3)	42.0 (33.6-50.9)	29.1 (23.1-35.8)	38.1 (28.4-49.0)	35.7 (29.8-42.0)
	Total	40.0 (36.1-44.0)	44.4 (38.0-51.0)	38.2 (33.4-43.2)	36.8 (31.6-42.3)	40.0 (36.4-43.6)
Total	American Indian	28.6 (19.9-39.2)	30.5 (24.1-37.9)	25.8 (14.2-42.4)	11.5 (4.7-25.8)	25.3 (17.1-35.7)
	Asian/Pacific Islander					25.0 (14.8-39.1)
	Black					25.0 (19.2-31.8)
	Hispanic	31.9 (29.0-35.0)	34.8 (31.0-38.7)	33.3 (30.8-35.9)	32.5 (28.1-37.2)	33.1 (31.1-35.1)
	White	25.8 (20.1-32.3)	30.3 (24.8-36.4)	24.4 (18.8-31.1)	27.2 (22.5-32.5)	26.8 (24.1-29.7)
	Total	29.9 (27.3-32.5)	33.1 (29.6-36.9)	29.8 (26.8-32.9)	28.7 (25.2-32.4)	30.5 (28.4-32.7)

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH FEELINGS OF SADNESS OR HOPELESSNESS (continued)

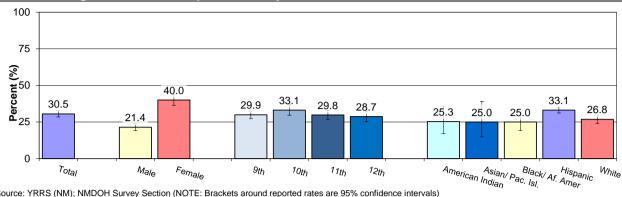
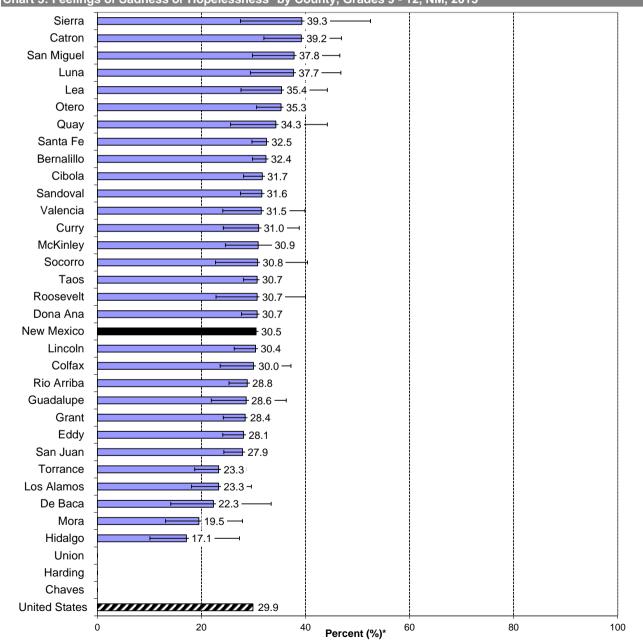


Chart 2: Feelings of Sadness or Hopelessness, by Grade Level and Gender, Grades 9 - 12, NM, 2013

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Feelings of Sadness or Hopelessness* by County, Grades 9 - 12, NM, 2013



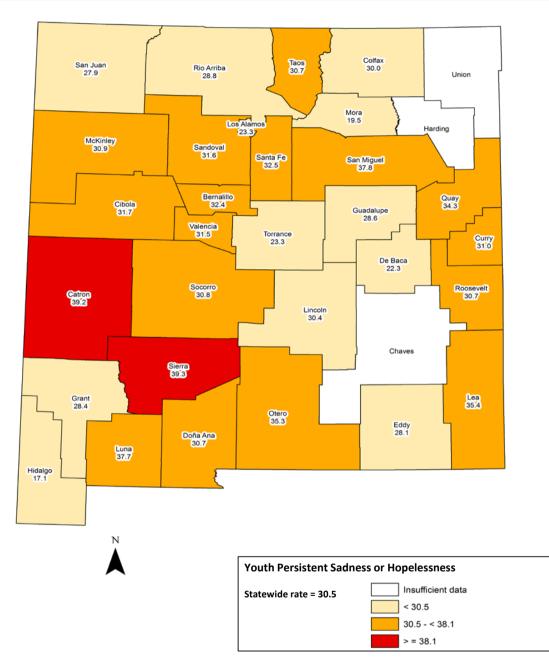
* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months

Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) New Mexico Substance Abuse Epidemiology Profile

YOUTH FEELINGS OF SADNESS OR HOPELESSNESS (continued)

Chart 4: Feelings of Sadness or Hopelessness* by County, Grades 9 - 12, NM, 2013



* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months

Not included: county estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section; SAES

YOUTH SERIOUSLY CONSIDERED SUICIDE

Problem Statement

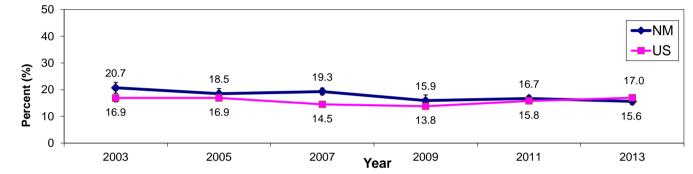
Suicide is a complex behavior, with no single determining cause. Suicidal ideation refers to thoughts of suicide or wanting to take one's own life. Suicidal ideation is a risk factor for suicide attempt/death.

Among NM high school students, the rate of "Seriously considered suicide" decreased from 20.7% in 2003 to 15.6% in 2013. The difference between the 2011 and 2013 rates was not statistically significant. The U.S. rate decreased until 2009, but increased from 2009 to 2013 (13.8% to 17.0%). There was no statistical difference between the NM and U.S. rates for 2013.

New Mexico girls (19.9%) had a higher rate than boys (11.6%) in 2013. Seriously considered suicide decreases as grade level increases. There were no significant differences between Hispanic (16.1%), White (15.7%), American Indian (13.7%), Black/African American (11.0%), and Asian or Pacific Islander (10.9%) students.

In 2013, the counties with the highest prevalence of seriously considering suicide were Sierra (23.3%), Otero (20.9%), San Miguel (19.3%), Catron (19.0%), and Luna (18.7%). The counties with the lowest prevalence were Mora (6.8%) and Hidalgo (7.1%).

Chart 1: Seriously Considered Suicide* by Year, Grades 9 - 12, NM and US, 2013



^{*} Estimate of percent of high school students seriously considered suicide at least once in past 12 months

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1:	Seriously Considered S		Level, Gender, a	and Race/Ethnic	ity, Grades 9 - 1	2, NM, 2013
		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	Race/Ethnicity	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	13.4 (7.0-24.1)	7.1 (1.5-27.2)	13.5 (4.5-34.4)	5.6 (3.5-8.9)	10.8 (5.0-21.7)
	Asian/Pacific Islander					14.9 (9.0-23.5)
	Black					8.8 (3.6-19.9)
	Hispanic	10.9 (8.4-13.9)	13.0 (10.1-16.7)	10.8 (8.3-13.9)	13.2 (9.5-18.0)	12.0 (10.8-13.3)
	White	10.8 (7.1-15.9)	13.1 (10.7-15.9)	10.9 (8.7-13.4)	9.5 (5.2-16.9)	11.3 (9.7-13.1)
	Total	10.9 (9.4-12.7)	12.6 (10.2-15.3)	11.1 (9.7-12.6)	11.4 (8.7-14.7)	11.6 (10.6-12.7)
Female	American Indian	22.2 (13.0-35.4)	20.8 (10.5-36.9)	9.6 (5.0-17.5)	11.3 (3.7-30.0)	16.9 (11.0-25.2)
	Asian/Pacific Islander					6.8 (1.9-21.1)
	Black					
	Hispanic	25.0 (17.0-35.2)	20.5 (14.0-29.0)	17.3 (13.7-21.6)	16.5 (11.5-23.1)	20.2 (17.6-23.0)
	White	23.6 (18.4-29.8)	23.6 (18.1-30.1)	16.8 (11.4-24.0)	17.8 (11.7-26.0)	20.7 (18.6-23.0)
	Total	24.3 (19.3-30.2)	21.1 (16.1-27.2)	16.1 (14.1-18.2)	16.2 (12.3-21.1)	19.9 (17.9-22.0)
Total	American Indian	17.6 (10.6-27.9)	13.1 (8.0-20.6)	11.5 (6.1-20.6)	8.4 (3.9-17.3)	13.7 (8.1-22.3)
	Asian/Pacific Islander					10.9 (6.3-18.1)
	Black					11.0 (6.4-18.3)
	Hispanic	17.7 (13.4-22.9)	16.8 (12.9-21.7)	14.1 (11.7-16.8)	14.9 (11.2-19.7)	16.1 (14.7-17.6)
	White	16.8 (12.3-22.6)	17.9 (15.5-20.5)	13.5 (10.8-16.7)	13.4 (9.3-19.0)	15.7 (14.3-17.1)
	Total	17.3 (14.7-20.3)	16.7 (13.6-20.4)	13.5 (12.5-14.6)	13.8 (11.1-17.1)	15.6 (14.4-16.9)

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

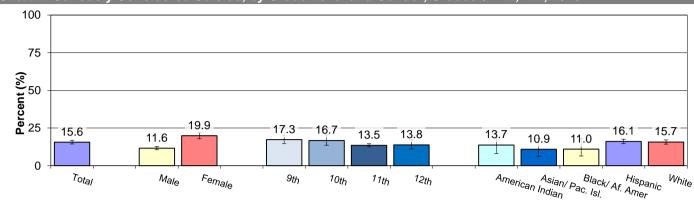
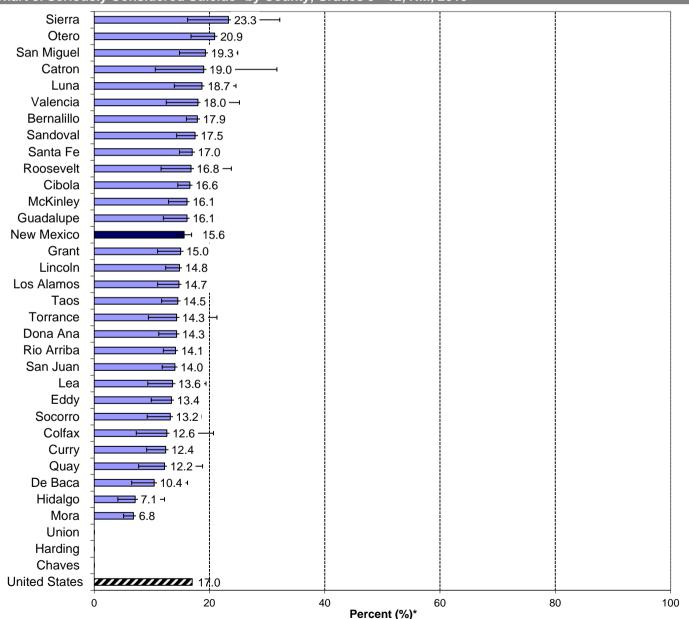


Chart 2: Seriously Considered Suicide, by Grade Level and Gender, Grades 9 - 12, NM, 2013

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3. Seriously Considered Suicide* by County, Grades 9 - 12, NM, 2013

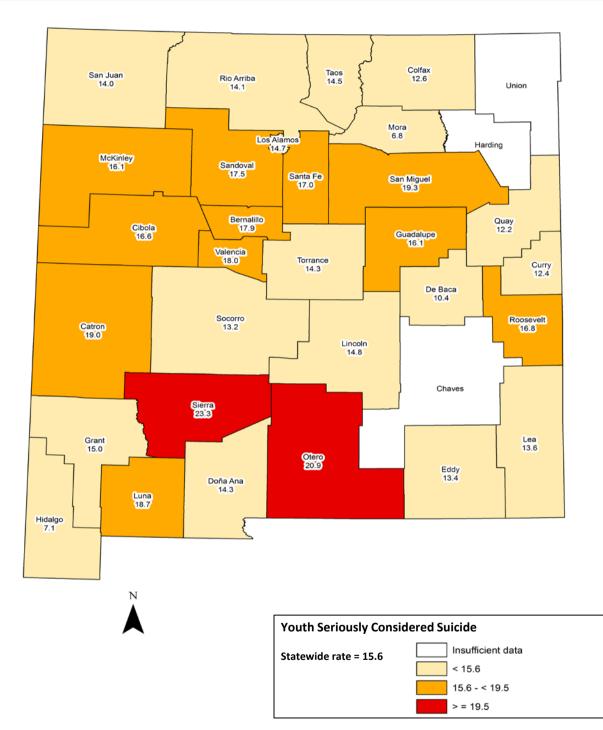


* Estimate of percent of high school students seriously considered suicide at least once in past 12 months Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates.

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

Chart 4: Seriously Considered Suicide* by County, Grades 9 - 12, NM, 2013



* Estimate of percent of high school students seriously considered suicide at least once in past 12 months Insufficient data: county estimates not available because of low numbers and/or low response rates

YOUTH ATTEMPTED SUICIDE

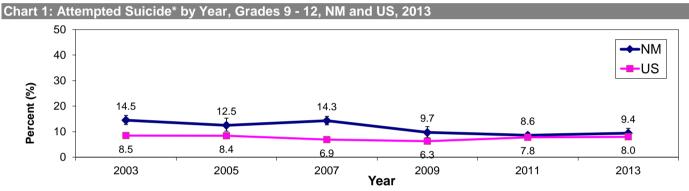
Problem Statement

In 2013, suicide was the second leading cause of death in NM among youth. In the U.S., in 2011 (last year for which information is available), suicide was also the second leading cause of death for youth between the ages of 15 and 24. While girls are more likely than boys to attempt suicide, boys are more likely than girls to die of suicide. Cultural variations in suicide rates also exist, with American Indian/Alaska Native youth having the highest rates of suicide-related fatalities in New Mexico. A previous suicide attempt is among the stongest risk factors for completed suicide.

The prevalence of past year suicide attempts among NM high school students decreased from 14.5% in 2003 to 9.4% in 2013. While the U.S. rate decreased from 2003 to 2009, it increased from 2009 to 2013 (6.3% to 8.0%). In 2013, there was no statistical difference between the US (8%) and NM (9.4%) students for the rate of suicide attempts.

Girls (10.6%) had a higher rate of attempted suicide than boys (8.1%). White students (6.0%) had a lower rate of suicide attempts than American Indian students (11.2%). The difference by grade level was not statistically significant.

In 2013, the counties with the highest prevalence of suicide attempts were Luna (14.6%), Valencia (14.0%), Cibola (13.9%), San Miguel (13.2%), and McKinley (13.1%). The counties with the lowest prevalence of suicide attempts were Hidalgo (4.7%), Mora (5.6%), De Baca (6.4%), and Los Alamos (6.5%).



* Attempted suicide at least one time in the past 12 months

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

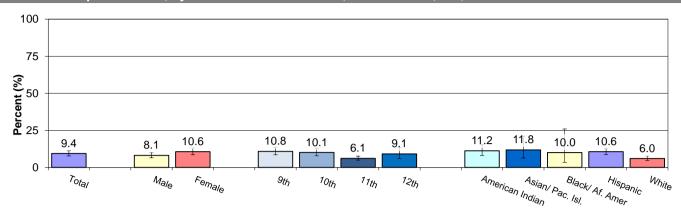
Table 1: Attempted Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	10.6 (6.0-18.0)	8.6 (3.8-18.2)			10.8 (7.4-15.6)	
	Asian/Pacific Islander					13.2 (8.3-20.3)	
	Black					8.3 (2.3-25.8)	
	Hispanic	8.6 (5.7-12.8)	9.8 (7.7-12.3)	8.4 (6.2-11.1)	9.9 (6.2-15.5)	9.4 (7.6-11.6)	
	White	4.5 (2.1-9.1)	5.9 (3.7-9.3)	2.2 (1.1-4.4)	3.8 (1.6-8.4)	4.5 (3.5-5.7)	
	Total	7.6 (5.5-10.3)	8.6 (6.9-10.6)	6.2 (4.5-8.5)	8.6 (5.3-13.7)	8.1 (6.5-10.0)	
Female	American Indian	17.4 (13.2-22.5)	11.7 (6.7-19.6)	2.8 (0.4-18.3)		11.6 (8.1-16.3)	
	Asian/Pacific Islander					6.2 (2.3-16.0)	
	Black						
	Hispanic	15.9 (10.9-22.5)	12.5 (9.2-16.8)	7.0 (5.0-9.7)	10.4 (5.1-20.3)	11.8 (9.2-14.9)	
	White	8.3 (4.6-14.5)	10.7 (5.5-19.7)	4.1 (2.2-7.7)	7.7 (3.4-16.5)	7.8 (5.6-10.7)	
	Total	14.2 (10.7-18.5)	11.7 (8.5-15.9)	6.0 (4.5-7.9)	9.7 (5.5-16.4)	10.6 (8.6-13.1)	
Total	American Indian	13.9 (11.9-16.2)	10.0 (5.7-16.9)	4.4 (1.1-16.7)	13.2 (8.3-20.3)	11.2 (8.1-15.3)	
	Asian/Pacific Islander					11.8 (6.3-21.1)	
	Black					10.0 (3.4-25.9)	
	Hispanic	12.3 (9.0-16.6)	11.2 (8.7-14.3)	7.7 (6.0-9.8)	10.2 (6.4-16.0)	10.6 (8.7-12.9)	
	White	6.3 (3.5-11.1)	8.2 (5.6-11.8)	3.0 (1.9-4.8)	5.7 (3.0-10.6)	6.0 (4.7-7.7)	
	Total	10.8 (8.5-13.6)	10.1 (7.8-13.0)	6.1 (4.9-7.6)	9.1 (6.1-13.5)	9.4 (7.7-11.3)	

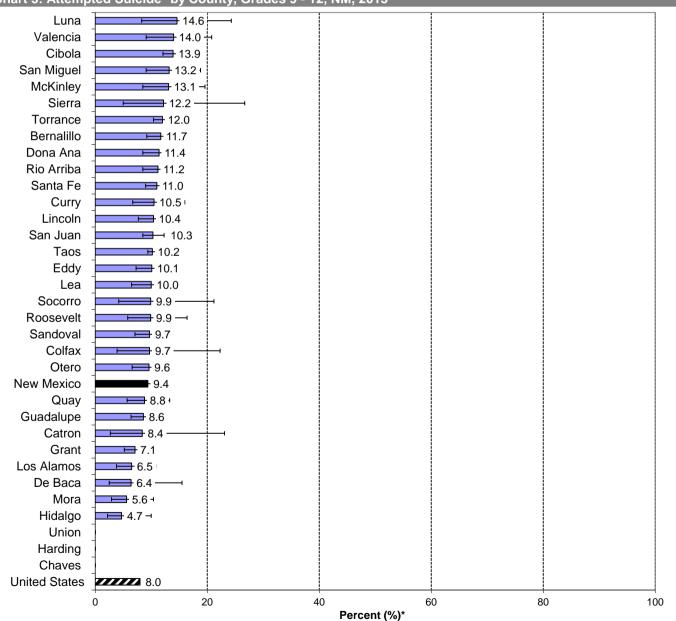
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH ATTEMPTED SUICIDE (continued)

Chart 2: Attempted Suicide, by Grade Level and Gender, Grades 9 - 12, NM, 2013



Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Attempted Suicide* by County, Grades 9 - 12, NM, 2013



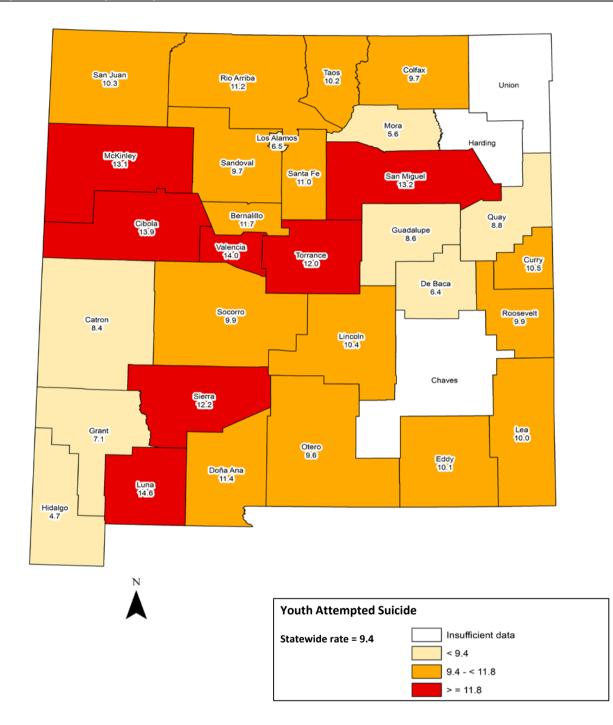
* Estimate of percent of high school students who attempted suicide at least once in past 12 months

Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

YOUTH ATTEMPTED SUICIDE (continued)

Chart 4: Attempted Suicide* by County, Grades 9 - 12, NM, 2013



* Estimate of percent of high school students who attempted suicide at least once in past 12 months Not included: county estimates not available because of low numbers and/or low response rates

YOUTH RISK AND RESILIENCY

Association Between Risk and Resiliency

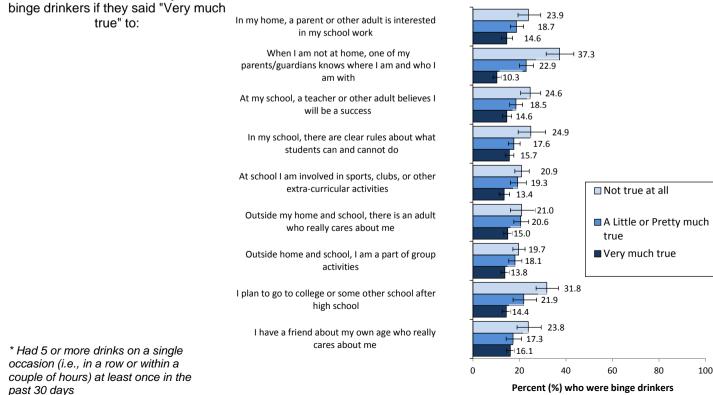
Strong relationships with parents, peers, schools, and adults in the community can be protective factors against risk behaviors that endanger the health and well-being of young people. These protective factors, or resiliency factors, are measured by several questions in the NM Youth Risk and Resiliency Survey (YRRS). Results from the 2013 YRRS demonstrate that youth with high levels of these resiliency factors were less likely than other students to engage in binge drinking, drug use, tobacco use, and suicidal ideation and attempts.

Resiliency factor results presented in the following charts are for:

- In my home, a parent or other adult is interested in my school work
- When I am not at home, one of my parents/guardians knows where I am and who I am with
- At my school, a teacher or other adult believes I will be a success
- In my school, there are clear rules about what students can and cannot do
- At school I am involved in sports, clubs, or other extra-curricular activities
- Outside my home and school, there is an adult who really cares about me
- Outside home and school, I am a part of group activities
- I plan to go to college or some other school after high school
- I have a friend about my own age who really cares about me

Students were asked how true each of these statements was for them. In each chart, results are organized by assigning one of three colored bars to those who said the statement was "Very much true", another bar to those who said the statement was "A little true" or "Pretty much true" and another to those who said "Not true at all". The length of each bar represents the percent of students who reported engaging in each risk behavior. In general, students who said "Very much true" to each resiliency factor (dark colored bars) had a lower prevalence of risk behaviors than other students, and students who said "Not true at all" (light colored bars) had higher rates of risk behaviors.





YOUTH RISK AND RESILIENCY (continued)

Chart 2: Current Marijuana Use* by Selected Resiliency Factors, Grades 9-12, 2013

Students were less likely to be current marijuana users if they said "Very much true" to any of the resiliency questions.

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

At school I am involved in sports, clubs, or other extra-curricular activities

Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me

+ 43.2 33.2 -120.5 54 9 35.4 18.2 → 44.4 \vdash 31.2 -121 2 -- 44 6 28.5 124.5 ₩ 37.3 H-33.7 Not true at all 18.0 40.5 A Little or Pretty much true -123.3 ■ Very much true ₩ 37.0 H 28.9 18.1 -46.7 138.9 22.3 H -44.2 - 29.4 -124.6 0 20 80 100 40 60 Percent (%) who were current marijuana users

* Used marijuana in the past 30 days

Chart 3: Used Pain Killers to Get High* by Selected Resiliency Factors, Grades 9-12, 2013

Students were less likely to use pain killers to get high if they said "Very much true" to any of the resiliency questions.

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

At school I am involved in sports, clubs, or other extra-curricular activities

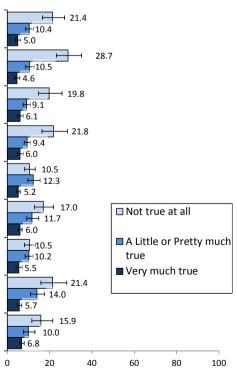
Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me

* Used a pain killer, like Vicodin, OxyContin, or Percocet, to get high in the past 30 days



Percent (%) who used painkillers to get high

YOUTH RISK AND RESILIENCY (continued)

Chart 4: Current Cocaine Use* by Selected Resiliency Factors, Grades 9-12, 2013

Students were less likely to be current cocaine users if they said "Very much true" to any of the resiliency questions.

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

At school I am involved in sports, clubs, or other extra-curricular activities

Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me

* Used any form of cocaine, including powder, crack, or freebase in the past 30 days

Students were less likely to be

current cigarette smokers if they said

"Very much true" to any of the

resiliency questions.

Chart 5: Current Cigarette Smoking* by Selected Resiliency Factors, Grades 9-12, 2013

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

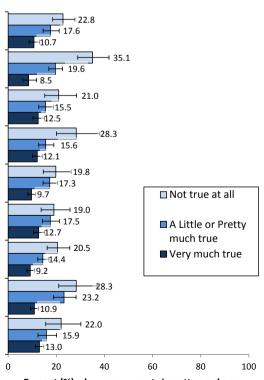
At school I am involved in sports, clubs, or other extra-curricular activities

Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me

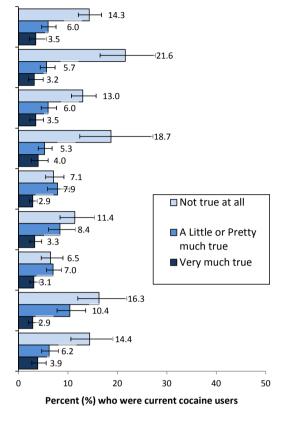


Percent (%) who were current cigarette smokers

l pla

* Smoked cigarettes on at least one of the past 30 days





YOUTH RISK AND RESILIENCY (continued)

Chart 6: Feelings of Sadness or Hopelessness* by Selected Resiliency Factors, Grades 9-12, 2013

Students were less likely to have feelings of sadness and hopelessness if they said "Very much true" to:

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

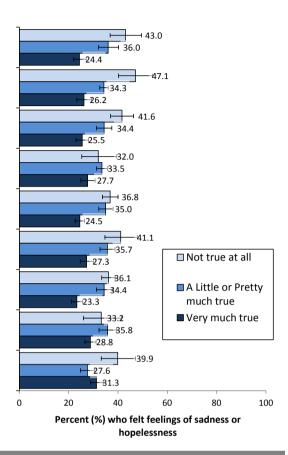
At school I am involved in sports, clubs, or other extra-curricular activities

Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me



* Felt so sad or hopeless almost every day for at least two weeks that they stopped some normal activities, within the past 12 months

Chart 7: Suicide Attempts* by Selected Resiliency Factors, Grades 9-12, 2013

Students were less likely to attempt suicide if they said "Very much true" to any of the resiliency questions.

Resiliency Factor Question

In my home, a parent or other adult is interested in my school work

When I am not at home, one of my parents/guardians knows where I am and who I am with

At my school, a teacher or other adult believes I will be a success

In my school, there are clear rules about what students can and cannot do

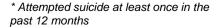
At school I am involved in sports, clubs, or other extra-curricular activities

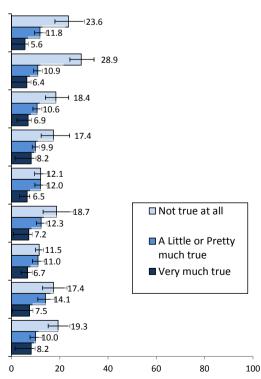
Outside my home and school, there is an adult who really cares about me

Outside home and school, I am a part of group activities

I plan to go to college or some other school after high school

I have a friend about my own age who really cares about me





Percent (%) who attempted suicide

Section 2

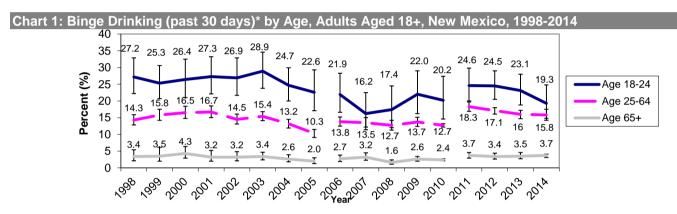
Consumption

ADULT BINGE DRINKING

Problem Statement

Binge drinking is defined as a pattern of alcohol consumption that brings the blood alcohol concentration (BAC) level to 0.08% or above. This pattern of drinking usually corresponds to five or more drinks on a single occasion for men, or four or more drinks on a single occasion for women, generally within about more hours. According to the latest estimates from the Centers for Disease Control and Prevention, about 47% of homicides, 32% of fall injury deaths, 29% of drug overdose deaths, and 23% of suicide deaths are alcohol attributable. Likewise, alcohol consumption is the primary causal factor in roughly 45% of motor vehicle crash deaths among males aged 20-44, and in more than a third of motor vehicle crash deaths among females aged 20-44. Binge drinking is also associated with a wide range of other social problems, including domestic and sexual violence, crime, and risky sexual behavior.

Table 1 shows that binge drinking rates decrease with age and are higher among males. Chart 1 shows that binge drinking prevalence among younger adults has remained stable. Chart 2 shows that adults who do binge drink continue to do so on average five times per month; and to drink well above the binge drinking threshold when they do. County-level results are shown in Table 2 and Charts 3-4.



* Binge drinking definition: 1998-2005, drinking five or more drinks on an occasion at least once in past 30 days; 2006-present, drinking five or more drinks (for men) or four or more drinks (for women) on an occasion at least once in past 30 days **In 2011, BRFSS updated its surveillance methods. Any shift in prevalence between 2010 and 2011 must be interpreted with caution, as it may be partially due to change in methods.

Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: Binge Drinking (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2014

			Num	ber*			Percent**				
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*		
Male	American Indian	-	7,994	-	10,326	-	20.8	-	19.8		
	Asian/Pacific Islander	-	-	-	-	-	-	-	-		
	Black	-	-	-	-	-	-	-	-		
	Hispanic	16,441	58,218	3,065	77,724	32.1	27.8	8.0	25.9		
	White	8,498	37,298	4,444	50,422	25.0	20.1	5.5	16.7		
	Total	27,352	107,254	7,958	142,869	27.6	23.2	6.1	20.5		
Female	American Indian	-	2,541	0	2,951	-	6.3	0.0	5.0		
	Asian/Pacific Islander	-	-	-	-	-	-	-	-		
	Black	-	-	-	3,777	-	-	-	25.3		
	Hispanic	5,968	15,109	609	21,709	12.6	6.6	1.3	6.7		
	White	2,160	20,279	2,037	24,759	8.9	10.5	2.1	7.8		
	Total	9,193	42,647	2,702	54,891	10.2	8.7	1.7	7.4		
Total	American Indian	2,482	10,535	261	13,277	12.7	13.4	2.0	11.9		
	Asian/Pacific Islander	-	-	-	418	-	-	-	2.5		
	Black	-	4,441	-	5,095	-	24.1	-	17.6		
	Hispanic	22,409	73,327	3,674	99,432	22.7	16.7	4.3	15.9		
	White	10,658	57,578	6,480	75,182	18.3	15.2	3.7	12.2		
	Total	36,545	149,901	10,660	197,760	19.3	15.8	3.7	13.7		

* Estimate of number of people in population group who reported binge drinking at least once in past 30 days

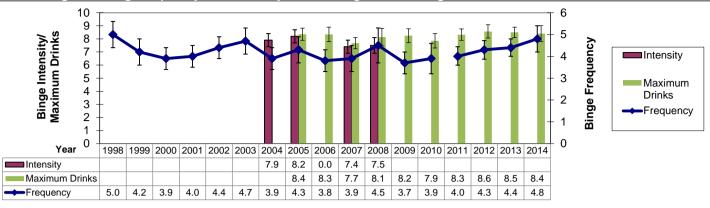
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

- Excluded due to small number of respondents (< 50) in cell

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Source: BRFSS; SAES
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ADULT BINGE DRINKING (continued)

Chart 2: Binge Drinking Frequency and Intensity*, Adult Binge Drinkers Aged 18+, New Mexico, 1998-2014



* Binge frequency is number of binge episodes in past 30 days; binge intensity is average number of drinks on last binge occasion; maximum drinks is the maximum number of drinks in past month, among binge drinkers

Source: BRFSS; SAES

Table 2: Binge Drinking (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2014

			Num	nber*			Percent**					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	-	-	-	27,536	24,260	57,921	-	-	-	13.9	12.5	12.9
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	-	-	-	3,306	2,277	5,832	-	-	-	17.3	11.8	13.9
Cibola	-	-	-	901	248	1,885	-	-	-	13.6	6.2	10.7
Colfax	-	-	-	-	-	436	-	-	-	-	-	4.4
Curry	-	-	-	934	3,526	4,459	-	-	-	8.9	18.5	14.1
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	-	-	-	22,508	5,809	29,486	-	-	-	24.5	12.6	20.2
Eddy	-	-	-	3,065	1,166	4,231	-	-	-	20.2	5.9	11.9
Grant	-	-	-	1,848	2,807	4,655	-	-	-	20.4	22.1	20.8
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	-	-	-	5,179	2,136	7,314	-	-	-	22.5	11.3	15.9
Lincoln	-	-	-	-	2,111	3,593	-	-	-	-	20.9	24.7
Los Alamos	-	-	-	-	988	2,380	-	-	-	-	12.0	18.1
Luna	-	-	-	875	-	1,097	-	-	-	8.1	-	6.7
McKinley	3,146	-	-	1,489	121	4,872	10.6	-	-	21.3	2.0	11.0
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	-	-	-	2,680	2,314	6,959	-	-	-	22.1	11.5	18.0
Quay	-	-	-	-	-	109	-	-	-	-	-	1.6
Rio Arriba	-	-	-	1,819	432	2,465	-	-	-	8.6	8.2	8.3
Roosevelt	-	-	-	-	603	1,723	-	-	-	-	7.5	13.7
Sandoval	-	-	-	6,217	4,639	11,771	-	-	-	18.2	11.4	13.2
San Juan	4,169	-	-	1,539	2,850	8,723	14.8	-	-	11.1	8.1	10.9
San Miguel	-	-	-	1,589	-	1,985	-	-	-	11.7	-	11.3
Santa Fe	-	-	-	4,222	7,273	13,053	-	-	-	8.8	14.2	12.3
Sierra	-	-	-	-	1,330	2,213	-	-	-	-	20.1	22.7
Socorro	-	-	-	-	-	2,070		-	-	-	-	17.2
Taos	-	-	-	989	838	1,905	-	-	-	8.8	10.2	9.2
Torrance	-	-	-	-	-	-	-	-	-	-	-	-
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	-	-	-	4,135	4,377	9,559		-	-	15.3	19.0	17.5
New Mexico	13,277	418	5,095	99,432	75,182	197,760	11.9	2.5	17.6	15.9	12.2	13.7

* Estimate of number of people in population group who reported binge drinking at least once in past 30 days

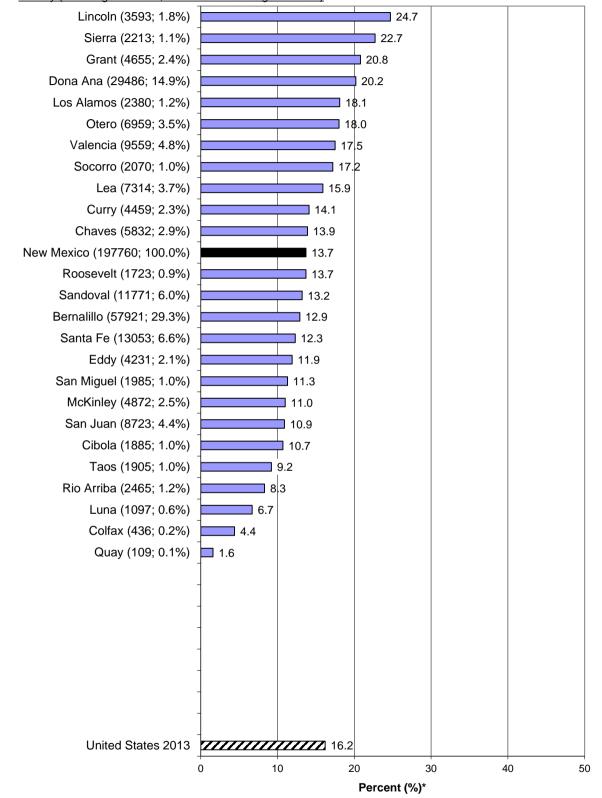
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT BINGE DRINKING (continued)

Chart 3: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014

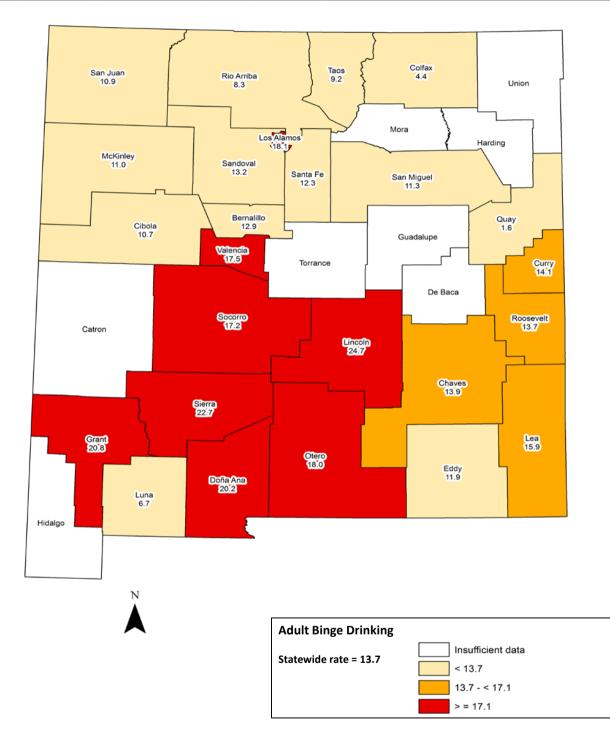


County (# of binge drinkers; % of statewide binge drinkers)

* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days The following counties were not included due to small number of respondents (< 50) in cell: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Torrance, Union Source: NMBRFSS (NM); CDC BRFSS (US); SAES

ADULT BINGE DRINKING (continued)

Chart 4: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days Insufficient data: Rate not reported due to small number of respodents (< 50) in cell Source: BRFSS; SAES

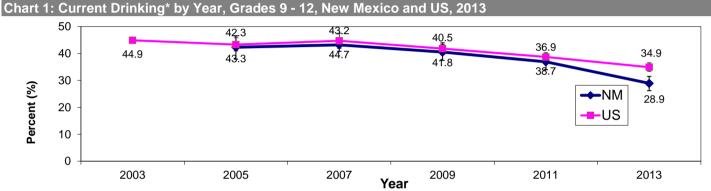
YOUTH CURRENT DRINKING

Problem Statement

Any alcohol consumption by a person under the age of 21 is considered to be excessive drinking. Alcohol is the most commonly used drug among youth in New Mexico, more than tobacco or other drugs. However, contrary to common perception, most high school students do not drink. "Current drinking" is defined as responding yes to the question: "During the past 30 days, on how many days did you have at least one drink of alcohol?"

In 2013, 28.9% of high school students reported that they were current drinkers. This is a significant decrease from 43.3% in 2005. Boys and girls are equally likely to be current drinkers and the percent of youth who drink increases with grade level. However, it is important to note that by ninth grade, one in five students are already drinking. Students who identify as Black are most likely to currently drink, followed by Hispanic students and White students. American Indian students and Asian/Pacific Islander students are the least likely to drink.

Catron County has the highest prevalence of current drinking among high school students (42.8%), followed by Socorro (41.3%) and Luna (41.3%) counties. McKinley County has the lowest percent (16.1%).



 * Had 5 or more drinks of alcohol in a row, or within a couple of hours, in the past 30 days

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1:	Table 1: Current Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013										
		9th Grade	10th Grade	11th Grade	12th Grade	All Grades					
Sex	Race/Ethnicity	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]		Percent [95% CI]					
Male	American Indian	12.9 (7.5-21.3)	17.3 (8.1-33.2)	17.9 (10.8-28.2)	16.1 (6.9-33.0)	15.6 (9.5-24.6)					
	Asian/Pacific Islander					13.8 (8.5-21.8)					
	Black					35.6 (18.4-57.6)					
	Hispanic	25.1 (19.4-31.7)	30.7 (25.1-37.0)	30.2 (24.3-36.8)	45.8 (39.3-52.4)	32.4 (29.2-35.8)					
	White	15.9 (13.0-19.4)	18.7 (14.6-23.6)	26.9 (22.1-32.3)	36.8 (26.3-48.8)	23.8 (20.8-27.1)					
	Total	20.8 (16.9-25.2)	25.9 (21.9-30.5)	28.1 (23.8-32.8)	39.1 (31.9-46.9)	27.9 (24.9-31.0)					
Female	American Indian	22.8 (12.4-38.0)	22.3 (16.8-28.9)	16.9 (12.6-22.3)		19.7 (13.6-27.7)					
	Asian/Pacific Islander					16.5 (6.2-37.0)					
	Black										
	Hispanic	29.5 (23.7-36.1)	31.1 (27.3-35.2)	33.2 (26.9-40.2)	45.9 (38.1-53.8)	34.6 (31.1-38.2)					
	White	15.8 (12.0-20.5)	22.1 (14.6-32.1)	26.7 (20.6-33.8)	33.2 (22.3-46.1)	23.7 (18.9-29.4)					
	Total	24.5 (20.3-29.2)	27.8 (24.0-31.9)	29.7 (26.1-33.6)	39.7 (33.8-45.8)	29.9 (26.5-33.5)					
Total	American Indian	17.7 (12.5-24.5)	19.4 (12.3-29.2)	17.4 (12.6-23.5)	15.2 (8.6-25.6)	17.6 (13.5-22.5)					
	Asian/Pacific Islander					16.7 (8.6-30.0)					
	Black					35.7 (21.4-53.1)					
	Hispanic	27.2 (23.4-31.5)	30.9 (27.5-34.5)	31.8 (27.1-36.8)	45.8 (40.5-51.3)	33.5 (30.8-36.3)					
	White	15.9 (13.1-19.1)	20.2 (16.6-24.4)	26.7 (22.5-31.2)	35.0 (28.0-42.8)	23.7 (20.9-26.8)					
	Total	22.5 (19.4-26.0)	26.8 (24.0-29.8)	28.9 (25.8-32.1)	39.4 (34.8-44.2)	28.9 (26.3-31.6)					

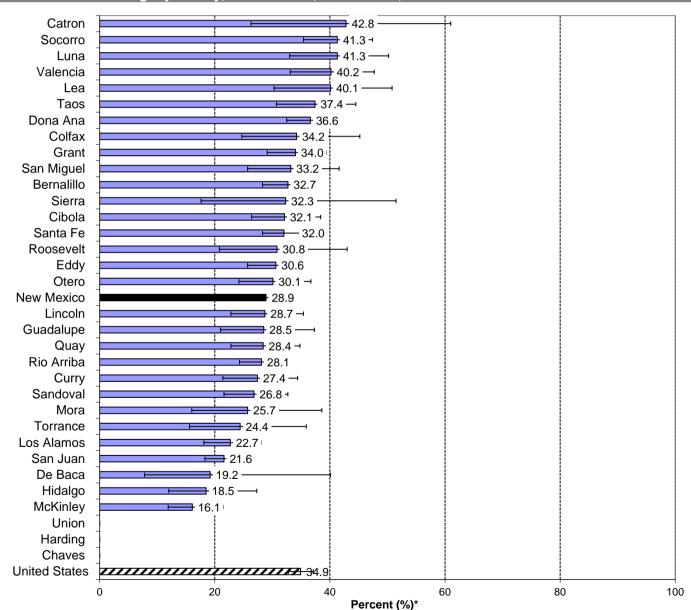
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH CURRENT DRINKING (continued)

100 75 **6%** 50 **Bercent (%)** 25 39.4 35.7 33.5 29.9 28.9 28.9 27.9 26.8 23.7 22.5 17.6 16.7 0.0 0.0 0.0 0 Asian/ Pac. Isl. Black/ Af. Amer American Indian Hispanic Total F_{emale} White 2013 9th Male 10th 11th 12th

Chart 2: Current Drinking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Current Drinking* by County, Grades 9 - 12, New Mexico, 2013



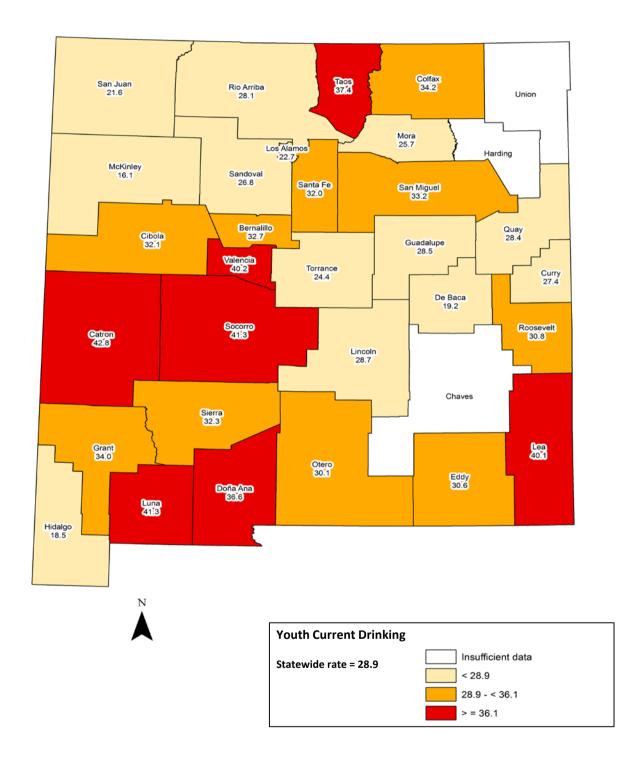
* Estimate of percent of high school students who reported current drinking in past 30 days

Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) New Mexico Substance Abuse Epidemiology Profile

YOUTH CURRENT DRINKING (continued)

Chart 4: Current Drinking* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported current drinking in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

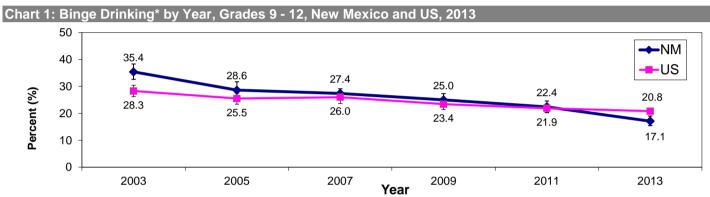
YOUTH BINGE DRINKING

Problem Statement

Binge drinking (defined as having five or more drinks of alcohol in a row within a couple of hours) is a major risk factor for the three leading causes of death among youth (motor vehicle crashes, suicide, and homicide), as well as being associated with poor academic performance and risk behaviors such as impaired driving, riding with a drinking driver, physical fighting, increased number of sexual partners, and other substance use.

In 2013, 17.1% of New Mexico high school students reported binge drinking at least once in the past month. Binge drinking is the norm among current high school drinkers in New Mexico. In 2013, of the 28.9% of students who were current drinkers, 62.8% were binge drinkers. Chart 1 demonstrates that binge drinking prevalence has been decreasing in New Mexico since 2003, as it has been in the U.S. since 2001 or earlier. In 2013, the difference between the US (20.8%, 95%CI [19.1-22.7]) and New Mexico (17.1%, 95%CI [15.4-19.0]) rates for binge drinking in 2013 was statistically significant.

As shown in Chart 2, binge drinking significantly increases with increasing grade level. Hispanic boys are significantly more likely to binge drink than White, American Indian/Alaska Native, or Asian/Pacific Island boys. There are no significant differences by race/ethnicity for girls.



^{*} Had 5 or more drinks of alcohol in a row, or within a couple of hours, in the past 30 days

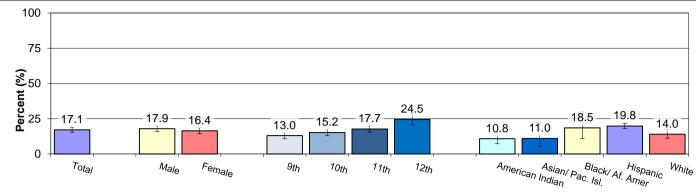
Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: I	Binge Drinking, by Grac	le Level, Gender,	and Race/Ethni	city, Grades 9 -	12, New Mexico	, 2013
		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	Race/Ethnicity	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	6.7 (2.7-15.4)	11.1 (4.7-23.9)	12.6 (5.7-25.8)	12.5 (5.5-26.1)	10.1 (5.5-17.9)
	Asian/Pacific Islander					6.4 (2.7-14.5)
	Black					22.5 (11.4-39.6)
	Hispanic	16.1 (12.2-21.0)	19.6 (14.5-25.8)	18.9 (15.7-22.7)	32.4 (27.4-37.8)	21.1 (19.1-23.2)
	White	8.9 (5.7-13.7)	8.6 (5.1-14.3)	17.1 (12.3-23.3)	26.1 (16.6-38.6)	14.6 (12.0-17.7)
	Total	12.6 (9.9-15.8)	15.8 (12.1-20.3)	17.8 (15.6-20.2)	27.6 (21.8-34.3)	17.9 (15.9-20.0)
Female	American Indian	11.4 (6.8-18.4)	11.0 (7.3-16.3)	15.4 (11.3-20.6)	8.1 (2.8-21.4)	11.5 (7.9-16.6)
	Asian/Pacific Islander					12.8 (4.1-33.2)
	Black					
	Hispanic	17.3 (12.8-22.9)	16.4 (13.1-20.4)	17.6 (11.8-25.4)	23.8 (19.6-28.5)	18.6 (16.4-20.9)
	White	7.0 (3.6-12.9)	11.1 (6.1-19.4)	17.1 (12.6-22.7)	20.7 (11.6-34.3)	13.3 (9.2-18.8)
	Total	13.4 (10.3-17.3)	14.6 (12.4-17.1)	17.6 (14.2-21.6)	21.4 (17.5-25.9)	16.4 (14.4-18.5)
Total	American Indian	9.0 (5.2-14.9)	11.1 (6.1-19.2)	14.0 (9.5-20.3)	10.4 (5.2-19.7)	10.8 (7.3-15.6)
	Asian/Pacific Islander					11.0 (5.1-22.1)
	Black					18.5 (10.9-29.8)
	Hispanic	16.7 (13.8-20.0)	17.9 (14.5-21.9)	18.3 (14.5-22.7)	27.8 (24.2-31.6)	19.8 (18.1-21.6)
	White	8.0 (5.1-12.2)	9.8 (7.0-13.5)	17.0 (14.0-20.6)	23.5 (17.2-31.3)	14.0 (11.2-17.3)
	Total	13.0 (10.8-15.5)	15.2 (13.0-17.7)	17.7 (15.5-20.1)	24.5 (20.6-28.8)	17.1 (15.4-19.0)

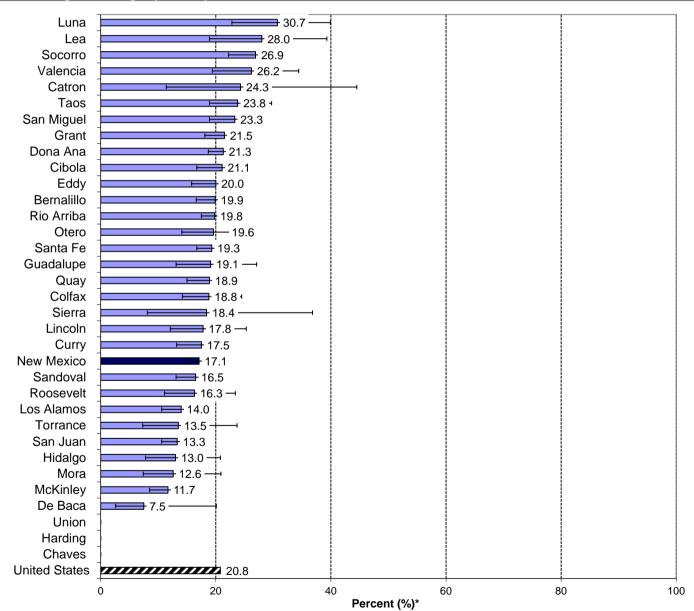
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH BINGE DRINKING (continued)

Chart 2: Binge Drinking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013



Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Binge Drinking* by County, Grades 9 - 12, New Mexico, 2013

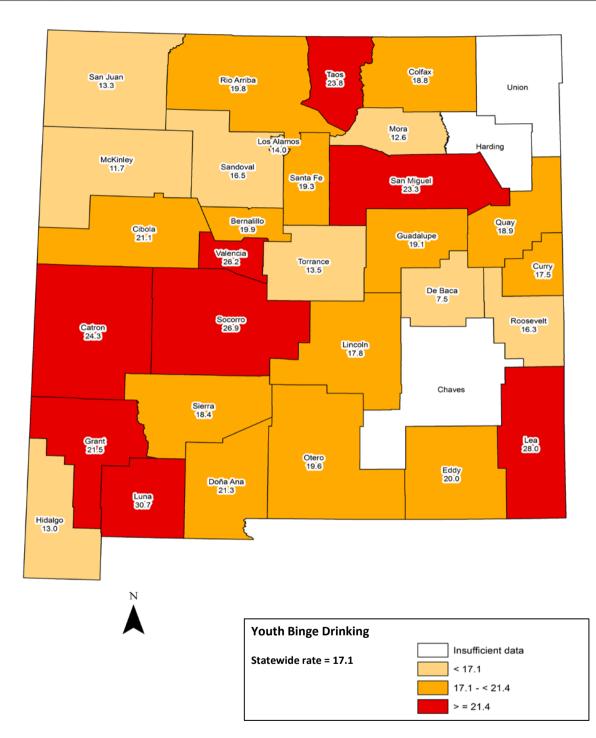


* Estimate of percent of high school students who reported binge drinking at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) New Mexico Substance Abuse Epidemiology Profile

YOUTH BINGE DRINKING (continued)

Chart 4: Binge Drinking* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported binge drinking at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

YOUTH 10 PLUS DRINKS

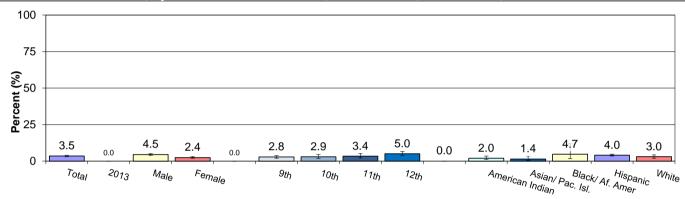
Problem Statement

On average, underage drinkers consume more drinks per drinking occasion than adult drinkers. The risk of harm increases as the number of drinks consumed on an occasion increases.

The maximum number of drinks that a student consumed on an occasion is determined by the question: "During the past 30 days, what is the largest number of alcoholic drinks you had in a row, that is, within a couple of hours?"

Students in the 12th grade are more likely to drink 10 or more drinks on an occasion then ninth grade students. Although boys and girls are equally likely to drink (see current drinking indicator), boys are more than twice as likely to drink ten or more drinks on an occasion as girls. Asian/Pacific Islander students are least likely to consume ten or more drinks. Asian/Pacific Islander students and American Indian students are significantly less likely to consume ten or more drinks than Hispanic students. Prevalence was fairly similar by county, ranging from 1.4% of students to 9.5% of students.

Chart 1: 10 Plus Drinks, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013



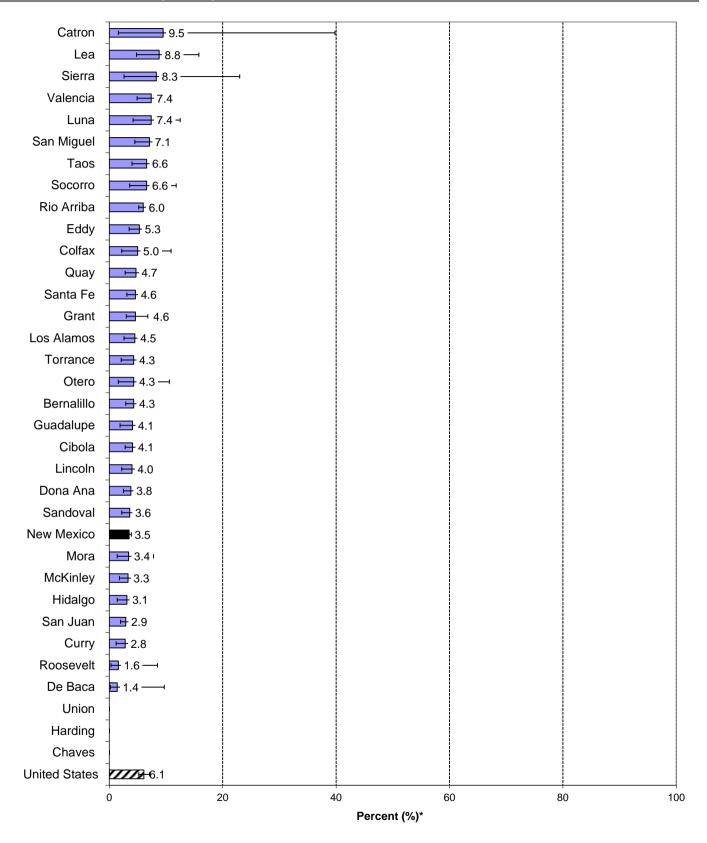
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table I:	10 Plus Drinks, by Grad						
	F	9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]		Percent [95% CI]		Percent [95% CI]	
Male	American Indian	0.4 (0.0-5.8)	0.0 ()	1.6 (0.2-12.0)	8.0 (3.6-17.1)	2.1 (0.9-5.1)	
	Asian/Pacific Islander					1.5 (0.3-6.6)	
	Black					5.4 (1.5-17.3)	
	Hispanic	4.3 (3.3-5.7)	4.7 (2.7-7.9)	3.4 (2.1-5.2)	8.8 (6.6-11.6)	5.3 (4.4-6.2)	
	White	3.5 (1.9-6.6)	1.9 (0.7-5.5)	5.2 (2.6-10.2)	5.4 (2.3-12.0)	4.2 (2.9-5.9)	
	Total	3.4 (2.7-4.3)	3.7 (2.2-6.3)	3.7 (2.4-5.6)	7.3 (5.5-9.7)	4.5 (3.9-5.1)	
Female	American Indian	0.0 ()	4.3 (1.6-10.6)	4.5 (2.1-9.7)	0.0 ()	1.9 (1.5-2.3)	
	Asian/Pacific Islander					1.3 (0.1-11.0)	
	Black						
	Hispanic	2.5 (1.5-4.2)	1.9 (0.7-5.0)	3.7 (1.7-7.7)	3.4 (1.8-6.3)	2.8 (2.2-3.5)	
	White	2.1 (0.7-6.1)	1.3 (0.3-5.3)	0.5 (0.0-4.5)	2.6 (0.7-8.5)	1.6 (0.8-3.0)	
	Total	2.1 (1.1-3.7)	2.1 (1.1-3.9)	3.1 (1.5-6.1)	2.8 (1.4-5.4)	2.4 (2.0-3.0)	
Total	American Indian	0.2 (0.0-2.7)	1.9 (0.8-4.1)	3.1 (1.7-5.6)	4.1 (1.8-9.0)	2.0 (1.2-3.4)	
	Asian/Pacific Islander					1.4 (0.5-3.4)	
	Black					4.7 (1.7-11.9)	
	Hispanic	3.4 (2.6-4.5)	3.3 (2.0-5.3)	3.5 (2.1-5.9)	6.0 (4.5-7.9)	4.0 (3.5-4.7)	
	White	2.8 (1.3-6.0)	1.7 (0.7-4.0)	3.1 (1.5-6.1)	4.0 (1.9-8.5)	3.0 (2.0-4.3)	
	Total	2.8 (2.0-3.8)	2.9 (1.8-4.6)	3.4 (2.2-5.1)	5.0 (3.8-6.6)	3.5 (3.1-3.9)	

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH 10 PLUS DRINKS (continued)

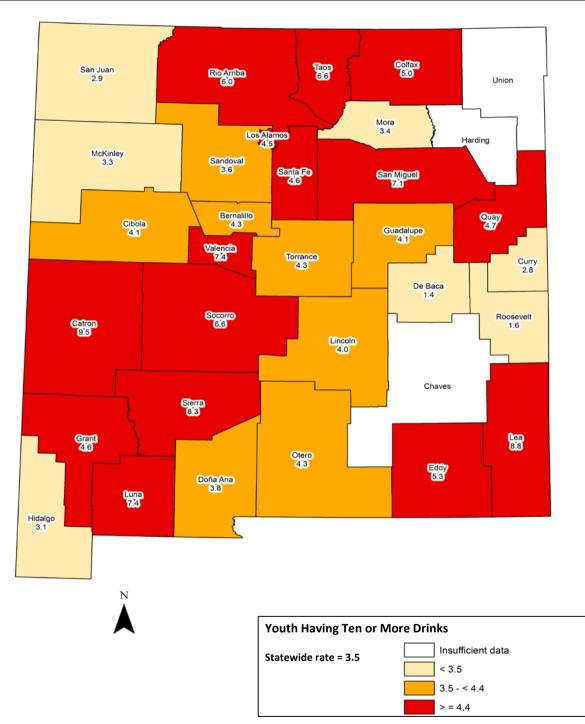
Chart 2: 10 Plus Drinks* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported binge drinking at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH 10 PLUS DRINKS (continued)

Chart 3: 10 Plus Drinks* by County, Grades 9 - 12, New Mexico, 2013



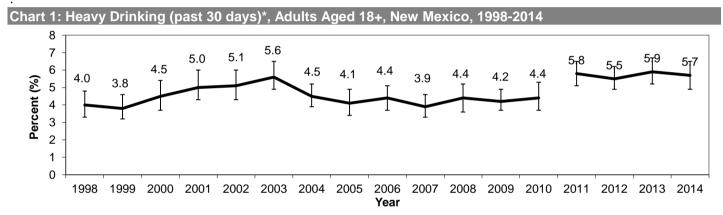
* Estimate of percent of high school students who reported binge drinking at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

ADULT HEAVY DRINKING

Problem Statement

Heavy drinking (defined as having more than 2 drinks/day, for males; and more than one drink/day, for females) is a pattern of excessive alcohol consumption that can lead to alcohol-related chronic disease and death. According to the latest estimates from the CDC, 100% of numerous chronic disease conditions (e.g., alcoholic liver disease, alcohol dependence syndrome), and a significant proportion of many other conditions (e.g., unspecified liver cirrhosis, pancreatitis) are alcohol-related. For each of these causes, it is chronic heavy drinking (as opposed to acute episodic or binge drinking) that is considered primarily responsible for the incidence and progression of alcohol-related chronic disease. Heavy drinking is also associated with a wide range of other social problems, including alcoholism (also known as alcohol dependence), domestic violence, and family disruption.

Chart 1 shows that adult heavy drinking prevalence has been, more or less, constant since 2005. Heavy drinking prevalence is lower among adults in New Mexico (5.7%) than in the U.S. overall (6.2%). As shown in Table 1, heavy drinking was most prevalent among adults in the 25-64 age group, with 6.4% reporting past-month heavy drinking. New Mexico men were somewhat more likely to report chronic drinking than women (6.9% v. 4.5%); and Hispanic males had the highest reported rate of heavy drinking (7.8%) followed by White males (6.6%). However, among women, Black females had the highest rate, followed by White women.



* Heavy drinking definition: drinking more than 2 drinks/day on average (for men) or more than 1 drink/day (for women) in past 30 days

Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: Heavy Drinking (past 30 days) by Age, Sex, and Race/Ethnicity, Adults Aged 18+, New Mexico, 2014

			Num	ber*		Percent**					
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*		
Male	American Indian	-	2,629	-	3,228	-	6.9	-	6.3		
	Asian/Pacific Islander	-	-	-	-	-	-	-	-		
	Black	-	-	-	-	-	-	-	-		
	Hispanic	4,040	17,043	2,467	23,551	7.9	8.1	6.4	7.8		
	White	1,659	14,519	3,770	19,948	4.9	7.7	4.7	6.6		
	Total	6,194	35,453	6,648	48,296	6.3	7.6	5.1	6.9		
Female	American Indian	-	424	0	489	-	1.1	0.0	0.8		
	Asian/Pacific Islander	-	-	-	-	-	-	-	-		
	Black	-	-	-	3,348	-	-	-	22.1		
	Hispanic	1,377	4,269	591	6,237	2.9	1.9	1.3	1.9		
	White	789	16,201	5,092	22,082	3.3	8.3	5.3	6.9		
	Total	2,230	25,540	5,748	33,518	2.5	5.2	3.6	4.5		
Total	American Indian	560	3,054	103	3,717	2.8	3.9	0.8	3.3		
	Asian/Pacific Islander	-	-	-	90	-	-	-	0.5		
	Black	-	3,715	-	3,926	-	19.8	-	13.5		
	Hispanic	5,417	21,312	3,058	29,787	5.5	4.9	3.6	4.8		
	White	2,448	30,720	8,863	42,030	4.2	8.0	5.0	6.8		
	Total	8,424	60,993	12,396	81,813	4.4	6.4	4.3	5.7		

* Estimate of number of people in population group who reported heavy drinking in past 30 days

** Estimate of percent of people in population group who reported heavy drinking in past 30 days

- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Problem Statement (continued)

American Indian males, who have the highest rates of alcohol-related chronic disease death, once again (as in past years) have low reported heavy drinking rates. The lack of congruence between heavy drinking rates and chronic disease death rates raises important questions. It might suggest differences in the patterns of heavy drinking between different population groups. Perhaps, for example, the smaller proportion of the American Indian population that drinks heavily tends to drink more heavily (hence with more lethal effect) than heavy drinkers in other race/ethnic groups.

In 2014, as shown in Table 2 and Chart 2, heavy drinking rates were highest in Lincoln (2.1%), Los Alamos (1.9%), and Luna (1.9%) counties; and substantially lower in counties that have among the highest rates of alcohol-related chronic disease death rates (e.g., Rio Arriba, McKinley, Socorro). High rates in Lincoln and Los Alamos counties may be driven by high rates in the White population in those counties.

Table 2: Heavy Drinking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2014

	Number*							Percent**					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	
Bernalillo	-	-	-	6,844	13,714	25,617	-	-	-	3.5	7.0	5.7	
Catron	-	-	-	-	-	-	-	-	-	-	-	-	
Chaves	-	-	-	1,301	1,311	2,682	-	-	-	7.0	6.8	6.5	
Cibola	-	-	-	152	209	769	-	-	-	2.3	5.1	4.4	
Colfax	-	-	-	-	-	350	-	-	-	-	-	3.6	
Curry	-	-	-	364	2,679	3,043	-	-	-	3.5	14.0	9.6	
De Baca	-	-	-	-	-	-	-	-	-	-	-	-	
Dona Ana	-	-	-	5,168	3,011	8,486	-	-	-	5.6	6.5	5.8	
Eddy	-	-	-	887	1,220	2,108	-	-	-	5.7	6.2	5.8	
Grant	-	-	-	548	1,629	2,178	-	-	-	5.9	12.9	9.6	
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-	
Harding	-	-	-	-	-	-	-	-	-	-	-	-	
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-	
Lea	-	-	-	359	651	1,411	-	-	-	1.5	3.4	3.0	
Lincoln	-	-	-	-	1,173	1,729	-	-	-	-	11.6	12.1	
Los Alamos	-	-	-	-	500	1,575	-	-	-	-	6.1	12.0	
Luna	-	-	-	1,564	-	1,564	-	-	-	14.5	-	9.6	
McKinley	171	-	-	1,070	65	1,423	0.6	-	-	15.2	1.0	3.2	
Mora	-	-	-	-	-	-	-	-	-	-	-	-	
Otero	-	-	-	594	942	2,074	-	-	-	4.9	4.7	5.4	
Quay	-	-	-	-	-	200	-	-	-	-	-	3.0	
Rio Árriba	-	-	-	804	375	1,312	-	-	-	3.8	7.1	4.5	
Roosevelt	-	-	-	-	131	623	-	-	-	-	1.7	4.9	
Sandoval	-	-	-	3,056	2,219	5,461	-	-	-	8.9	5.5	6.1	
San Juan	526	-	-	923	1,273	2,722	1.9	-	-	6.6	3.6	3.4	
San Miguel	-	-	-	444	-	587	-	-	-	3.3	-	3.3	
Santa Fe	-	-	-	2,128	4,507	7,159	-	-	-	4.5	8.8	6.8	
Sierra	-	-	-	-	550	550	-	-	-	-	8.5	5.7	
Socorro	-	-	-	-	-	553	-	-	-	-	-	4.6	
Taos	-	-	-	481	517	1,076	-	-	-	4.3	6.3	5.2	
Torrance	-	-	-	-	-	-	-	-	-	-	-	-	
Union	-	-	-	-	-	-	-	-	-	-	-	-	
Valencia	-	-	-	591	1,770	3,533	-	-	-	2.2	7.7	6.5	
New Mexico	3,717	90	3,926		42,030	81,813	3.3	0.5	13.5	4.8	6.8	5.7	

* Estimate of number of people in population group who reported heavy drinking in past 30 days

** Estimate of percent of people in population group who reported heavy drinking in past 30 days

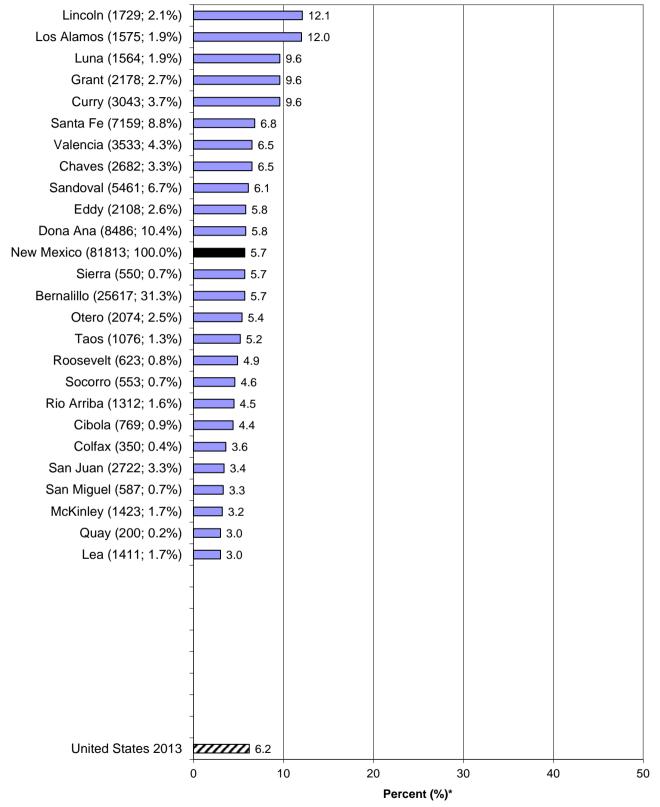
- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Chart 2: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014

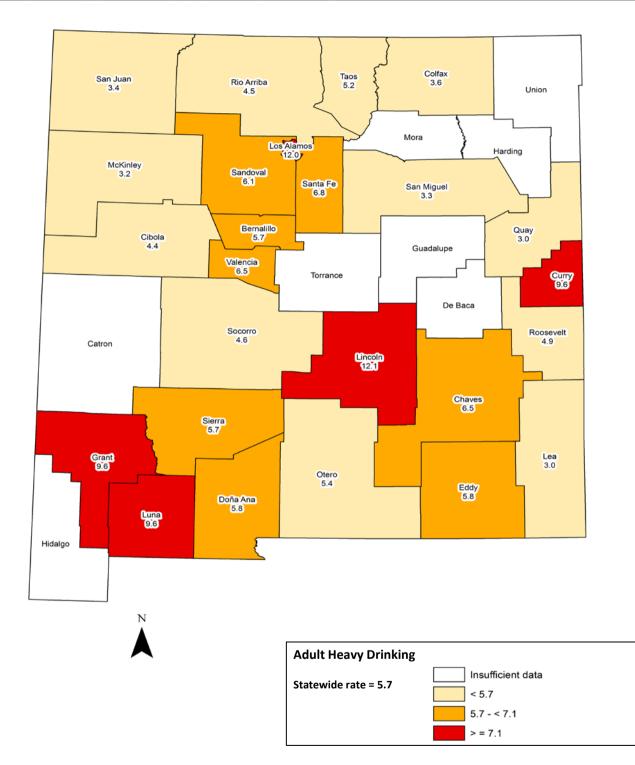
County (# of heavy drinkers; % of statewide heavy drinkers)



* Estimate of percent of people in population group who reported heavy drinking in past 30 days The following counties were not included due to small number of respondents (< 50) in cell: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Torrance, Union Source: NMBRFSS (NM); CDC BRFSS (US); SAES

ADULT HEAVY DRINKING (continued)

Chart 3: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



* Estimate of percent of people in population group who reported heavy drinking in past 30 days Insufficient data: Rate not reported due to small number of respodents (< 50) in cell Source: NMBRFSS (NM); CDC BRFSS (US); SAES

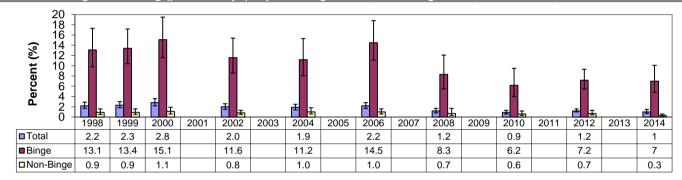
ADULT DRINKING AND DRIVING

Problem Statement

Adult drinking and driving is a precursor to alcohol-related motor vehicle crash injury and death. Any drinking and driving is dangerous (i.e., associated with an elevated risk of crash and injury), but driving after binge drinking (which is defined as a level of drinking likely to lead to a 0.08 BAC) is particularly risky. Unfortunately, as shown in Chart 1, binge drinkers are much more likely to report driving after drinking than non-binge drinkers. For example, in 2012, only 1.2% of the general population reported driving after drinking; but 7.2% of binge drinkers reported engaging in this risky behavior in the past 30 days, compared to only 0.7% of non-binge drinkers. On a positive note, Chart 1 shows that driving after drinking prevalence decreased significantly between 2006 and 2010 (from 2.2% to 0.9%), including a substantial decline among binge drinkers (from 14.5% to 6.2%).

As shown in Chart 2, in 2014 driving after drinking was most prevalent among young adults, with 1.7% of those aged 18-24 reporting past-month drinking and driving. Chart 2 shows a decline (although not statistically significant) in drinking and driving by young adults (age 18-24) and a fluctuating pattern among those aged 25-64. Table 1 shows that New Mexico men were six times more likely to report drinking and driving than women (1.9% v. 0.3%). Hispanic males (2.4%) were more likely to report drinking and driving than (1.8%) and White (1.7%) males. Table 2 and Chart 3 show drinking and driving rates by county.

Chart 1: Drinking and Driving (past 30 days)* by Drinking Status, Adults Aged 18+, New Mexico, 1998-2014



* Drinking and driving definition: drove after having "perhaps too much to drink" at least once in past 30 days Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals) Table 1: Drinking and Driving (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2014

			Num	ber*			Perce	nt**	
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	-	308	-	911	-	0.8	-	1.8
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Black	-	-	-	-	-	-	-	
	Hispanic	1,146	6,110	56	7,312	2.3	2.9	0.1	2.4
	White	477	4,237	393	5,107	1.4	2.3	0.5	1.7
	Total	2,227	10,655	501	13,383	2.3	2.3	0.4	1.9
Female	American Indian	-	37	0	37	-	0.1	0.0	0.1
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Black	-	-	-	0	-	-	-	0.0
	Hispanic	948	190	0	1,138	2.0	0.1	0.0	0.4
	White	0	948	151	1,099	0.0	0.5	0.2	0.3
	Total	948	1,285	151	2,384	1.1	0.3	0.1	0.3
Total	American Indian	603	344	0	947	3.1	0.4	0.0	0.9
	Asian/Pacific Islander	-	-	-	0	-	-	-	0.0
	Black	-	0	-	52	-	0.0	-	0.2
	Hispanic	2,094	6,300	56	8,450	2.2	1.4	0.1	1.4
	White	477	5,185	544	6,206	0.8	1.4	0.3	1.0
	Total	3,175	11,940	652	15,766		1.3	0.2	1.1

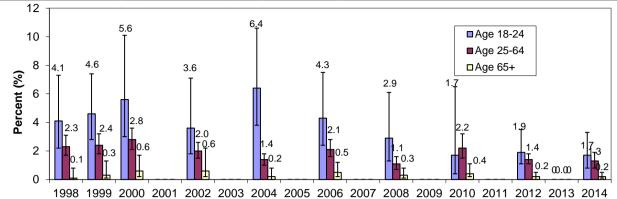
* Estimate of number of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days - Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

Chart 2: Drinking and Driving (past 30 days)* by Age, Adults Aged 18+, New Mexico, 1998-2014



Year * Drinking and driving definition: drove after having "perhaps too much to drink" at least once in past 30 days Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 2: Drinking and Driving (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2014

County American Indian Asian/ Pacific Islander Black Hispanic Hispanic White All Races American Indian Asian/ Pacific Islander Black Hispanic White All Races Bernallilo -				Num	nber*					Perc	ent**			
Catron - - - - - - - - - - Chaves - - Chaves - - - 2.9 0.6 Cibola - - 0 0 269 - - 0.0 0.0 Colfax - - - 0 - - 0.0 0.0 0.0 Curry -<	County		Pacific			White			Pacific			White	All Races	
Chaves - - 548 123 671 - - 2.9 0.6 Cibola - - 0 0 269 - - 0.0 0.0 Colfax - - 2.14 163 377 - - 2.1 0.9 De Baca - - - - - - - - - - - - - - - - - 0.0 0 - - 1.13 2.0 Eddy - - 0.0 0.0 - - 1.3 2.0 Eddy - - 0.0 0.0 - - 0.0 0.0 Giadalupe -	Bernalillo	-	-	-	4,203	1,965	6,169	-	-	-	2.1	1.0	1.4	
Cibola - - 0 0 269 - - 0.0 0.0 Colfax - - - 0 - - 0.0 0.0 Curry - - 214 163 377 - <t< td=""><td></td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td></t<>		-	-	-	-	-	-	-	-	-	-	-	-	
Colfax - - - 0 - - - - Curry - - 214 163 377 - - 2.1 0.9 De Baca - - - - - - - 2.1 0.9 De Baca - - 1.181 909 2.090 - - 1.3 2.0 Eddy - - 0 0 0 - - 0.0 0.0 Grant - - 56 0 56 - - 0.6 0.0 Guadupe -		-	-	-	548	123		-	-	-		0.6	1.6	
Curry - - 214 163 377 - - 2.1 0.9 De Baca - <td></td> <td>-</td> <td>-</td> <td>-</td> <td>0</td> <td>0</td> <td>269</td> <td>-</td> <td>-</td> <td>-</td> <td>0.0</td> <td>0.0</td> <td>1.5</td>		-	-	-	0	0	269	-	-	-	0.0	0.0	1.5	
De Baca - </td <td></td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td></td> <td></td> <td>-</td> <td>-</td> <td>-</td> <td></td> <td>-</td> <td>0.0</td>		-	-	-	-			-	-	-		-	0.0	
Dona Ana - - 1,181 909 2,090 - - - 1,3 2.0 Eddy - - 0 0 0 - - 0.0 0.0 Grant - - 56 0 56 - - 0.6 0.0 Guadalupe -		-	-	-	214	163	377	-	-	-	2.1	0.9	1.2	
Eddy - - 0 0 0 - - 0.0 0.0 Grant - - 56 0 56 - - 0.6 0.0 Guadalupe - - - - - - - - - - Harding - - - - - - - - - - Hidalgo - <t< td=""><td></td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td></td><td>-</td><td>-</td></t<>		-	-	-	-	-	-	-	-	-		-	-	
Grant - - 56 0 56 - - 0.6 0.0 Guadalupe - - - - - - - - - Harding - - - - - - - - - - Hidalgo -		-	-	-	1,181	909	2,090	-	-	-			1.5	
Guadalupe -	Eddy	-	-	-	-	0	-	-	-	-	0.0		0.0	
Harding - </td <td></td> <td>-</td> <td>-</td> <td>-</td> <td>56</td> <td>0</td> <td>56</td> <td>-</td> <td>-</td> <td>-</td> <td>0.6</td> <td>0.0</td> <td>0.3</td>		-	-	-	56	0	56	-	-	-	0.6	0.0	0.3	
Hidalgo - 0 0 - - 0 0 - - - - - - - 0 0 - - 0 0 - - 0 0 0 - - 0 0 1 1 </td <td>Guadalupe</td> <td>-</td>	Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-	
Lea - - 306 98 404 - - 1.3 0.5 Lincoln - - - 26 280 - - 0.2 Los Alamos - - - 137 137 - - - 0.2 Luna - - 0 - 0 - - 0.0 - McKinley 352 - 0 31 383 1.2 - 0.0 0.5 Mora - - - - - - - - - - Otero - - - 0 107 126 - - - - Quay - - - 0 0 -	Harding	-	-	-	-	-	-	-	-	-	-	-	-	
Lincoln - - 26 280 - - - 0.2 Los Alamos - - - 137 137 - - - 0.2 Luna - - 0 - 0 - - 0.0 - McKinley 352 - - 0 31 383 1.2 - 0.0 0.5 Mora - - - - - - - - - - - - 0.0 0.5 Quay - - - 0 107 126 - - 0.0 0.5 Quay - - - 0 0 - - - 0.0 0.5 Quay - - - 0 0 - - - 0.0 0.5 Quay - - - 0 0 - - 1.1 0.0 0.5 Rosevelt - - -	Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-	
Los Alamos - - - 137 137 - - - 1.7 Luna - - 0 - 0 - - 0.0 - McKinley 352 - 0 31 383 1.2 - 0.0 0.5 Mora - - - - - - - 0.0 0.5 Quay - - - - - - - - - - Quay - - - 0 0.7 126 - - - 0.0 0.5 Quay - - - 0 0 - - - - - - 0.0 0.5 Rio Arriba - - 222 0 222 - - 1.1 0.0 Sandoval - - - 0 0 - - - 0.0 - Sandoval - - - 0	Lea	-	-	-	306	98	404	-	-	-	1.3	0.5	0.9	
Luna - - 0 - - 0.0 - McKinley 352 - - 0 31 383 1.2 - - 0.0 0.5 Mora - - - - - - - - 0.0 0.5 Mora - 0.0 0.5 . . . - - - - - 0.0 0.5 0.0 0.5 0.0 0.5 . <td>Lincoln</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>26</td> <td>280</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>0.2</td> <td>1.9</td>	Lincoln	-	-	-	-	26	280	-	-	-	-	0.2	1.9	
McKinley 352 - - 0 31 383 1.2 - - 0.0 0.5 Mora - 0 0 - - - 0 0 - - 0 0 0 - 0 0 0 - 0 </td <td>Los Alamos</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>137</td> <td>137</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>1.7</td> <td>1.1</td>	Los Alamos	-	-	-	-	137	137	-	-	-	-	1.7	1.1	
Mora -	Luna	-	-	-	0	-	0	-	-	-	0.0	-	0.0	
Otero - - 0 107 126 - - 0.0 0.5 Quay - - - - 0 - 0.0 - - - - - 0.0 - - - - - - - - - <td>McKinley</td> <td>352</td> <td>-</td> <td>-</td> <td>0</td> <td>31</td> <td>383</td> <td>1.2</td> <td>-</td> <td>-</td> <td>0.0</td> <td>0.5</td> <td>0.9</td>	McKinley	352	-	-	0	31	383	1.2	-	-	0.0	0.5	0.9	
Quay - - - 0 - - - - Rio Arriba - - 222 0 222 - - 1.1 0.0 Roosevelt - - - 0 0 - - 0.0 Sandoval - - - 661 837 1,497 - - 2.0 2.0 Sandoval - - 661 837 1,497 - - 2.0 2.0 Sandoval - - 0 30 337 1.1 - 2.0 2.0 San Miguel - - 0 - 0 - 0 - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - - 1.3 Socorro - - 2.21 98 350 - - 2.2 1.2 <	Mora	-	-	-	-	-	-	-	-	-	-	-	-	
Rio Arriba - - 222 0 222 - - 1.1 0.0 Roosevelt - - - 0 0 - - 0.0 Sandoval - - 661 837 1,497 - - 2.0 2.0 Sandoval - - 0 30 337 1.1 - 0.0 0.1 San Juan 308 - - 0 30 337 1.1 - 0.0 0.1 San Miguel - - 0 - 0 - 0 - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - - 1.3 Socorro - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - - - </td <td>Otero</td> <td>-</td> <td>-</td> <td>-</td> <td>0</td> <td>107</td> <td>126</td> <td>-</td> <td>-</td> <td>-</td> <td>0.0</td> <td>0.5</td> <td>0.3</td>	Otero	-	-	-	0	107	126	-	-	-	0.0	0.5	0.3	
Rio Arriba - - 222 0 222 - - - 1.1 0.0 Roosevelt - - - 0 0 - - 0.0 Sandoval - - - 661 837 1,497 - - 2.0 2.0 Sandoval - - 0 30 337 1.1 - - 0.0 0.1 San Juan 308 - - 0 30 337 1.1 - - 0.0 0.1 San Miguel - - 0 - 0 - - 0.0 - - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.3 Socorro - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - </td <td>Quay</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>0</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>0.0</td>	Quay	-	-	-	-	-	0	-	-	-	-	-	0.0	
Sandoval - - 661 837 1,497 - - 2.0 2.0 San Juan 308 - - 0 30 337 1.1 - - 0.0 0.1 San Miguel - - 0 - 0 - 0 - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.3 Socorro - - - 0 - - 0 - - Taos - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - - Union - - - - - - - - - - Valencia - - - - - - - - - <t< td=""><td></td><td>-</td><td>-</td><td>-</td><td>222</td><td>0</td><td>222</td><td>-</td><td>-</td><td>-</td><td>1.1</td><td>0.0</td><td>0.8</td></t<>		-	-	-	222	0	222	-	-	-	1.1	0.0	0.8	
Sandoval - - 661 837 1,497 - - 2.0 2.0 San Juan 308 - - 0 30 337 1.1 - - 0.0 0.1 San Miguel - - 0 - 0 - 0 - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.3 Socorro - - - 0 - - - 1.3 Socorro - - - 0 - - - - - Taos - - - - - - - - - - Union - - - - - - - - - - Valencia - - - - - - - - -	Roosevelt	-	-	-	-	0	0	-	-	-	-	0.0	0.0	
San Juan 308 - - 0 30 337 1.1 - - 0.0 0.1 San Miguel - - 0 - 0 - - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.3 Socorro - - - 0 - - - 1.3 Socorro - - - 0 - - - - 1.3 Socorro - - - 0 - - - - - Taos - <t< td=""><td>Sandoval</td><td>-</td><td>-</td><td>-</td><td>661</td><td>837</td><td>1,497</td><td>-</td><td>-</td><td>-</td><td>2.0</td><td>2.0</td><td>1.7</td></t<>	Sandoval	-	-	-	661	837	1,497	-	-	-	2.0	2.0	1.7	
San Miguel - - 0 - 0 - 0.0 - Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.3 Socorro - - - 86 86 - - 1.3 Socorro - - - 0 - - - 1.3 Socorro - - - 0 - - - - Taos - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - - Union - - - - - - - - - Valencia - - 0 578 578 - - 0.0 2.5		308	-	-				1.1	-	-	0.0	0.1	0.4	
Santa Fe - - 664 652 1,368 - - 1.4 1.3 Sierra - - - 86 86 - - 1.4 1.3 Sierra - - - 86 86 - - - 1.3 Socorro - - - 0 - - - 1.3 Taos - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - - - Union - - - - - - - - - Valencia - - 0 578 578 - - 0.0 2.5		-	-	-	0	-			-	-		-	0.0	
Sierra - - - 86 86 - - - 1.3 Socorro - - - 0 - - - 1.3 Taos - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - - - Union - - - - - - - - - Valencia - - 0 578 578 - - 0.0 2.5		-	-	-	664	652	1.368	1	-	-		1.3	1.3	
Socorro - - - 0 - <th -<="" <="" td=""><td></td><td>-</td><td>-</td><td>-</td><td></td><td></td><td></td><td></td><td>-</td><td>-</td><td></td><td></td><td>0.9</td></th>	<td></td> <td>-</td> <td>-</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td>-</td> <td></td> <td></td> <td>0.9</td>		-	-	-					-	-			0.9
Taos - - 251 98 350 - - 2.2 1.2 Torrance - - - - - - - 2.2 1.2 Torrance -		-	-	-	_	-			-	-	_	-	0.0	
Torrance -<		-	-	-	251	98	-		-	-	2.2	1.2	1.7	
Union - <td></td> <td>-</td> <td>-</td> <td>-</td> <td></td> <td></td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>1</td> <td>-</td> <td>-</td>		-	-	-			-	-	-	-	1	-	-	
Valencia 0 578 578 0.0 2.5		-	-	-	-	-	-	-	-	-		-	-	
		-	-	-	0	578	578	-	-	-	0.0	2.5	1.1	
New Mexico 947 0 52 8,450 6,206 15,766 0.9 0.0 0.2 1.4 1.0		947	0	52	8,450	6,206	15,766	0.9	0.0	0.2		1.0	1.1	

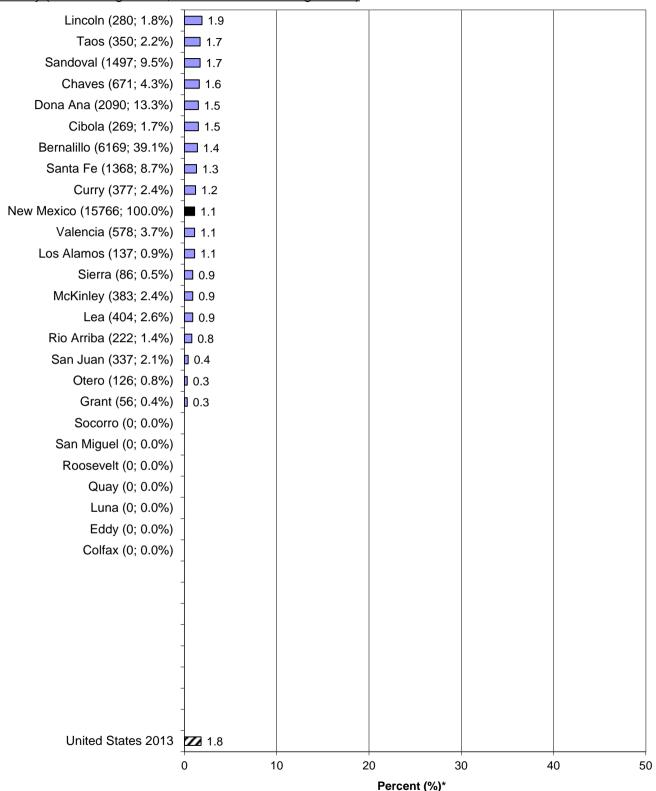
* Estimate of number of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days - Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

Chart 3: Drinking and Driving (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



County (# of drinking drivers; % of statewide drinking drivers)

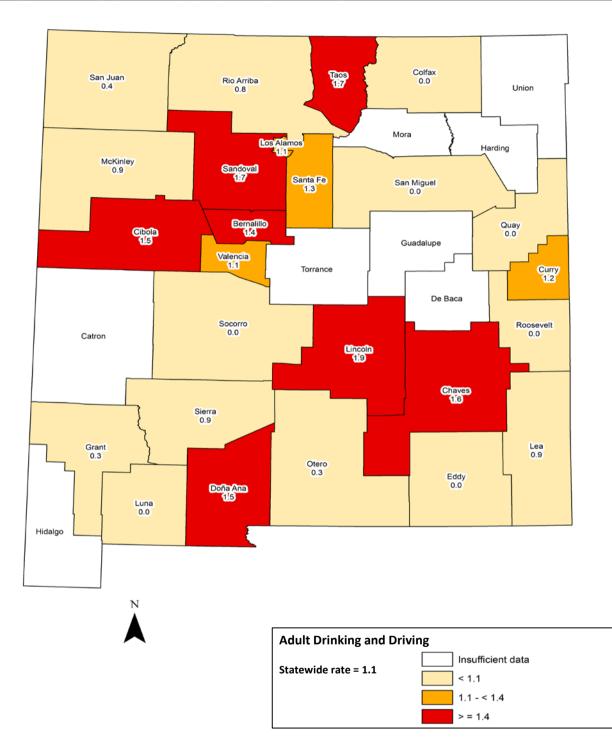
* Estimate of percent of people in population group who drove after having "perhaps too much to drink" at least once in past 30 days The following counties were not included due to small number of respondents (< 50) in cell:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union N/A: United States rate not available

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

Chart 4: Drinking and Driving (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



* Estimate of percent of people in population group who drove after having "perhaps too much to drink" at least once in past 30 days Insufficient data: Rate not reported due to small number of respodents (< 50) in cell Source: BRFSS; SAES

YOUTH DRINKING AND DRIVING

Problem Statement

Drinking and driving is a major risk factor for motor vehicle accidents. Motor vehicle crashes are the leading cause of death for youth aged 15-20 years. According to the National Highway Traffic Safety Administration (NHTSA), alcohol impaired-driving fatalities accounted for 31% of the total motor vehicle traffic fatalities in the U.S. in 2013.*

The rate of drinking and driving among New Mexico high school students has been decreasing since 2003, and has been decreasing among U.S. high school students since 2001 or earlier. In recent years, NM had a higher rate than the U.S., but since 2009 there has not been a statistical difference between their rates.

In 2013, the prevalence of past-30-day drinking and driving was 8.9% among NM high school students. Drinking and driving increased in prevalence with increasing grade levels (ninth = 6.2%; tenth = 7.5%; 11th = 9.3%; 12th = 11.2%). White (6.6%) and American Indian (6.7%) students had lower rates of drinking and driving than Black (19.6%) students. The difference in rates between boys (10.8%) and girls (6.7%) was statistically significant.

In 2013, the drinking and driving rate was highest in Lea (20.6%), Luna (16.7%), Socorro (16.2%), and Valencia (15.9%) counties. The rate was lowest in Catron (1.9%). De Baca (2.0%). San Juan (4.6%), and Roosevelt (4.8%) counties. *http://www-nrd.nhtsa.dot.gov/Pubs/812102.pdf

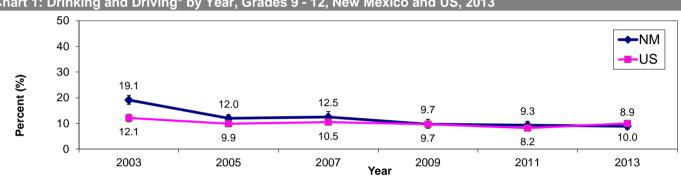


Chart 1: Drinking and Driving* by Year, Grades 9 - 12, New Mexico and US, 2013

* Drove a car or other vehicle when they had been drinking, in the past 30 days Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: Drinking and Driving,	, by Grade Level, Gender	, and Race/Ethnicity, Grades 9	- 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	7.9 (2.3-23.6)	5.3 (2.8-10.0)			8.2 (4.2-15.3)	
	Asian/Pacific Islander						
	Black						
	Hispanic	9.6 (5.9-15.3)	12.4 (9.2-16.5)	9.7 (6.1-14.9)	17.8 (14.0-22.4)	12.6 (10.7-14.7)	
	White	3.1 (0.5-17.1)	4.9 (1.8-12.4)	11.6 (7.1-18.4)	7.8 (3.9-15.0)	7.7 (5.0-11.9)	
	Total	8.0 (5.3-11.9)	10.0 (7.8-12.7)	10.3 (7.6-13.8)	13.8 (10.7-17.7)	10.8 (9.3-12.5)	
Female	American Indian					4.9 (3.4-7.0)	
	Asian/Pacific Islander						
	Black						
	Hispanic	4.1 (1.8-9.0)	5.2 (3.5-7.5)	9.5 (4.9-17.7)	8.5 (4.8-14.8)	7.1 (4.7-10.6)	
	White		3.4 (1.0-11.0)	3.3 (0.9-11.7)	9.6 (5.2-17.3)	5.1 (2.8-9.0)	
	Total	4.0 (2.1-7.5)	4.7 (3.2-7.0)	8.3 (4.8-13.9)	8.7 (5.7-13.0)	6.7 (4.8-9.2)	
Total	American Indian	6.2 (2.6-14.3)	5.8 (3.3-10.0)	7.5 (3.7-14.4)	7.1 (3.0-15.9)	6.7 (4.7-9.4)	
	Asian/Pacific Islander					7.7 (3.3-17.2)	
	Black					19.6 (10.6-33.3)	
	Hispanic	7.0 (4.1-11.6)	9.0 (7.2-11.1)	9.6 (6.3-14.4)	12.8 (9.8-16.6)	9.9 (8.4-11.6)	
	White	3.3 (0.5-19.1)	4.2 (1.9-9.0)	8.0 (5.5-11.5)	8.7 (5.3-14.0)	6.6 (4.4-9.7)	
	Total	6.2 (4.2-9.0)	7.5 (6.0-9.4)	9.3 (6.9-12.5)	11.2 (8.7-14.3)	8.9 (7.7-10.2)	

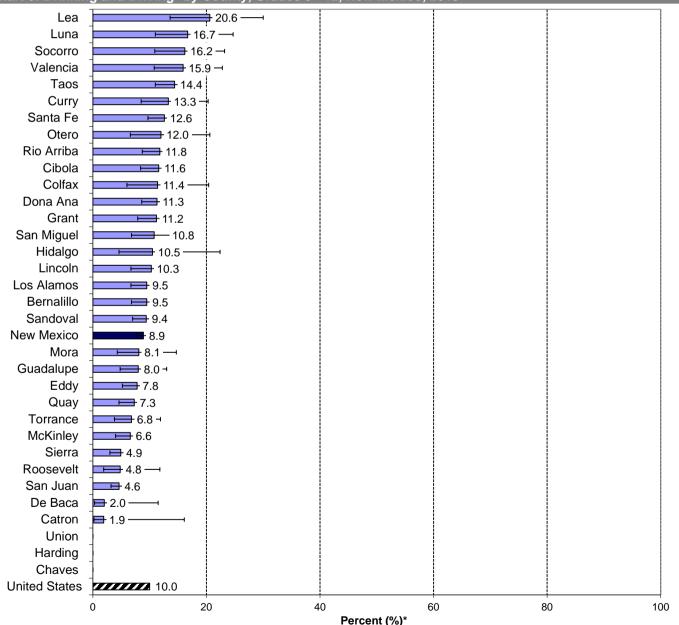
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH DRINKING AND DRIVING (continued)

100 75 **Percent (%)** 50 50 19.6 10.8 11.2 9.9 8.9 9.3 7.5 7.7 6.7 6.2 6.7 6.6 0 Asian/ Pac. Isl. Black/ Af. Amer Total Male F_{emale} Hispanic White 9th 10th 11th 12th

Chart 2: Drinking and Driving, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

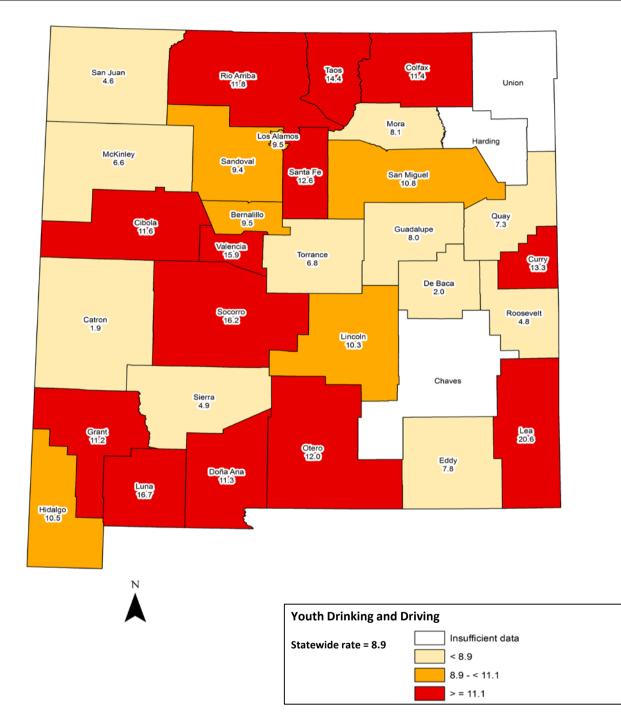
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Drinking and Driving* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported drinking and driving at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH DRINKING AND DRIVING (continued)

Chart 4: Drinking and Driving* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported drinking and driving at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section; SAES

YOUTH CURRENT MARIJUANA USE

Problem Statement

There has been no apparent trend in the rate of current marijuana use by New Mexico high school students in recent years. While the US rate decreased from 1999 to 2007, it has increased since then. While the NM rate in 2009 (28.0%) was higher than the rate in 2007 (25.0%), the difference was not statistically significant. In 2013, the New Mexico rate (27.8%) was higher than the U.S. rate (23.4%), as it has been consistently higher for several years.

There was no statistically significant variation in the rate of current marijuana use by grade level or gender. The rate among Black/African American students (47.0%) was higher than among American Indian (32.9%), Hispanic (30.4%), and White (19.3%) students.

In 2013, the rate of past 30-day marijuana use was highest in Cibola (39.2%), Valencia (39.0%), and San Miguel (38.2%) counties. The rate was lowest in De Baca (6.3%), Roosevelt (11.9%), and Hidalgo (12.7%) counties.

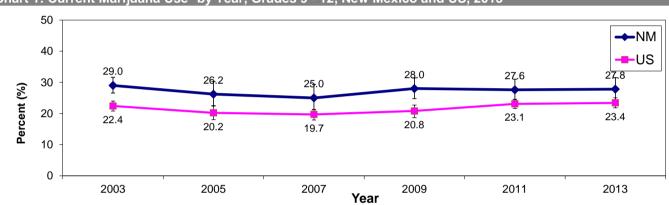


Chart 1: Current Marijuana Use* by Year, Grades 9 - 12, New Mexico and US, 2013

* Used marijuana at least one time in the past 30 days

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: Current Marijuana Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	37.4 (32.9-42.1)	35.7 (25.3-47.7)	25.8 (12.9-44.9)	25.6 (19.1-33.4)	32.6 (27.6-38.0)	
	Asian/Pacific Islander					16.2 (11.6-22.1)	
	Black					52.2 (36.6-67.4)	
	Hispanic	28.3 (20.8-37.2)	30.8 (25.7-36.5)	33.4 (28.4-38.9)	42.4 (34.8-50.3)	33.2 (29.0-37.8)	
	White	10.6 (7.2-15.2)	16.7 (11.5-23.6)	22.5 (17.9-28.0)	35.4 (26.5-45.5)	20.5 (16.1-25.7)	
	Total	25.5 (20.5-31.3)	28.0 (23.6-32.8)	29.2 (26.2-32.4)	38.1 (32.5-44.1)	29.8 (26.6-33.3)	
Female	American Indian	36.8 (31.8-42.0)	39.5 (27.7-52.7)	32.7 (26.7-39.4)	21.1 (6.7-49.7)	33.3 (26.2-41.3)	
	Asian/Pacific Islander					20.4 (11.7-33.0)	
	Black						
	Hispanic	27.2 (21.2-34.0)	25.6 (19.4-33.0)	28.3 (22.9-34.4)	29.8 (23.5-37.0)	27.7 (23.3-32.5)	
	White	13.7 (10.4-17.8)	15.5 (10.3-22.5)	21.4 (16.1-27.8)	22.8 (14.5-33.9)	18.0 (14.0-22.9)	
	Total	24.5 (19.6-30.2)	24.4 (18.8-31.0)	26.5 (22.2-31.3)	27.5 (22.0-33.7)	25.7 (21.5-30.3)	
Total	American Indian	37.1 (33.2-41.1)	37.4 (26.6-49.6)	29.4 (23.4-36.1)	23.4 (14.4-35.7)	32.9 (27.7-38.6)	
	Asian/Pacific Islander					17.8 (14.1-22.3)	
	Black					47.0 (35.7-58.6)	
	Hispanic	27.8 (21.7-34.8)	28.0 (23.6-33.0)	30.9 (26.7-35.4)	35.7 (29.7-42.3)	30.4 (26.4-34.7)	
	White	12.0 (9.2-15.5)	16.1 (11.8-21.6)	21.9 (19.0-25.1)	29.4 (23.0-36.8)	19.3 (15.7-23.5)	
	Total	25.0 (20.5-30.2)	26.1 (21.8-31.1)	27.8 (25.0-30.9)	32.7 (28.1-37.7)	27.8 (24.3-31.5)	

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH CURRENT MARIJUANA USE (continued)

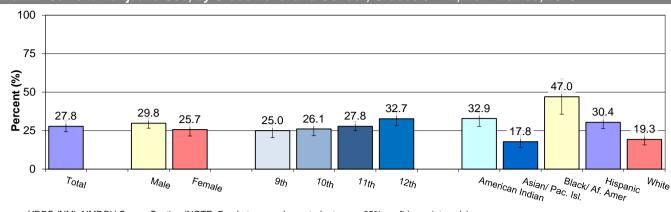
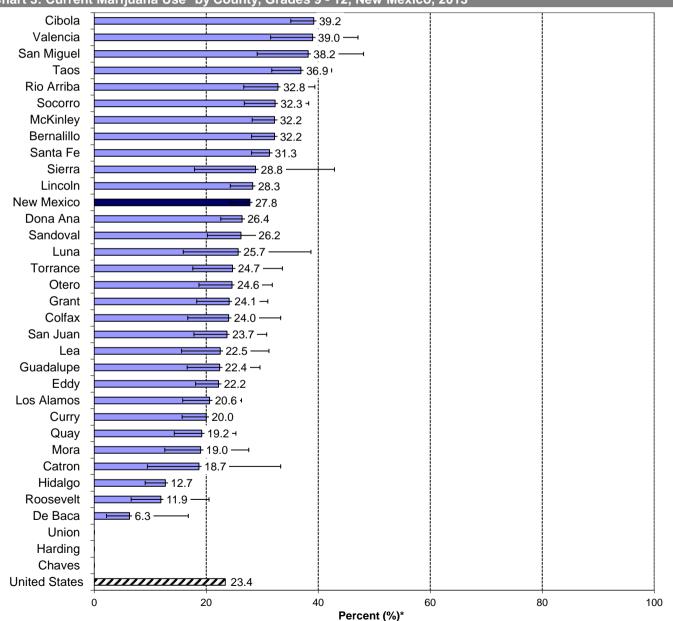


Chart 2: Current Marijuana Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

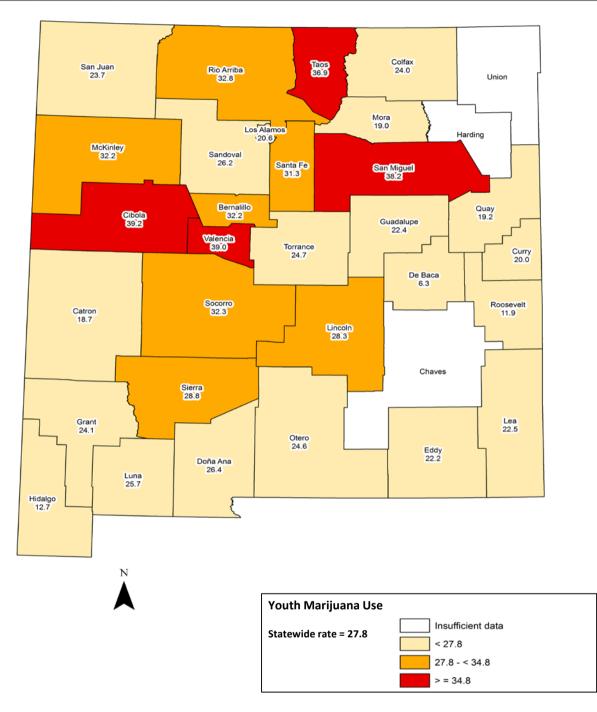
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Current Marijuana Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported marijuana use at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH CURRENT MARIJUANA USE (continued)

Chart 4: Current Marijuana Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported marijuana use at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

YOUTH CURRENT COCAINE USE

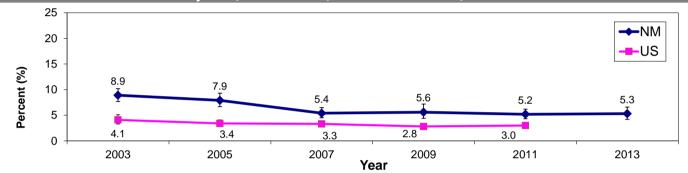
Problem Statement

The New Mexico rate of current cocaine use decreased from 2003 (8.9%) to 2007 (5.4%) and has not shown significant change since then. The U.S. rate decreased from 4.1% in 2003 to 2.8% in 2009, and has not significantly changed from 2009 to 2011. The New Mexico rate in 2013 (5.3%) was higher than the U.S. rate (3.0%) in 2011, and has been consistently higher than the US rate since 2003.

The difference in the rate between males (6.2%) and females (4.3%) was not statistically significant. The rate among 12th graders (7.6%) was higher than among ninth graders (4.8%). Black/African American (12.1%) and Asian or Pacific Islander students (11.0%) had higher rates of current cocaine use than Hispanic (5.8%) or White (3.8%) students. Other differences between racial/ethnic groups were not statistically significant.

In 2013, the rate of past 30-day cocaine use was highest in Valencia (12.3%), San Miguel (10.1%), Dona Ana (8.2%), Lincoln (7.8%), and Santa Fe (7.5%) counties. The rate was lowest in Roosevelt (0.8%), De Baca (1.4%), San Juan (2.0%), Torrance (2.4%), and Guadalupe (2.5%) counties.

Chart 1: Current Cocaine Use* by Year, Grades 9 - 12, New Mexico and US, 2013



* Used cocaine at least one time in the past 30 days

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

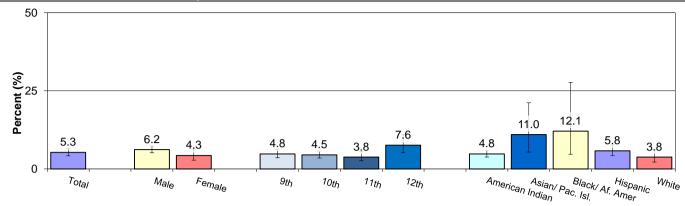
Table 1: Current Cocaine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	4.9 (2.8-8.6)	4.9 (2.4-9.6)	2.3 (0.7-7.7)	10.4 (4.4-22.6)	5.4 (3.8-7.6)	
	Asian/Pacific Islander					8.3 (4.6-14.6)	
	Black					16.9 (6.4-37.4)	
	Hispanic	7.3 (4.6-11.4)	6.9 (4.4-10.7)	4.1 (2.1-7.7)	8.7 (5.0-14.5)	7.0 (5.4-9.1)	
	White	2.4 (0.9-6.2)	3.3 (1.9-5.6)	3.3 (1.2-8.5)	7.4 (3.6-14.6)	4.2 (2.7-6.5)	
	Total	5.9 (4.3-8.2)	5.9 (4.2-8.2)	3.8 (2.4-6.0)	8.4 (5.8-12.0)	6.2 (5.2-7.3)	
Female	American Indian	5.2 (1.1-22.1)	1.2 (0.1-13.1)	5.4 (2.6-10.7)	3.1 (0.4-22.0)	4.0 (1.9-8.4)	
	Asian/Pacific Islander					10.7 (2.9-32.8)	
	Black						
	Hispanic	3.8 (1.9-7.2)	3.1 (1.6-5.9)	4.7 (2.5-8.7)	6.6 (3.2-13.2)	4.6 (2.7-7.5)	
	White	2.4 (0.7-7.3)	3.4 (1.7-6.8)	1.0 (0.1-8.2)	7.4 (2.4-20.7)	3.3 (1.6-6.5)	
	Total	3.6 (2.1-5.9)	3.0 (1.8-5.0)	3.9 (2.2-6.7)	6.8 (3.8-11.9)	4.3 (2.8-6.4)	
Total	American Indian	5.1 (2.3-10.7)	3.3 (1.8-5.9)	3.9 (2.3-6.5)	6.8 (3.7-12.4)	4.8 (3.8-6.0)	
	Asian/Pacific Islander					11.0 (5.4-21.2)	
	Black					12.1 (4.7-27.7)	
	Hispanic	5.6 (3.5-8.8)	4.9 (3.5-6.8)	4.4 (2.9-6.5)	7.6 (4.5-12.4)	5.8 (4.3-7.7)	
	White	2.4 (1.1-5.3)	3.3 (2.2-5.1)	2.2 (0.9-5.3)	7.4 (3.6-14.5)	3.8 (2.2-6.2)	
	Total	4.8 (3.6-6.3)	4.5 (3.5-5.7)	3.8 (2.6-5.6)	7.6 (5.2-11.0)	5.3 (4.2-6.6)	

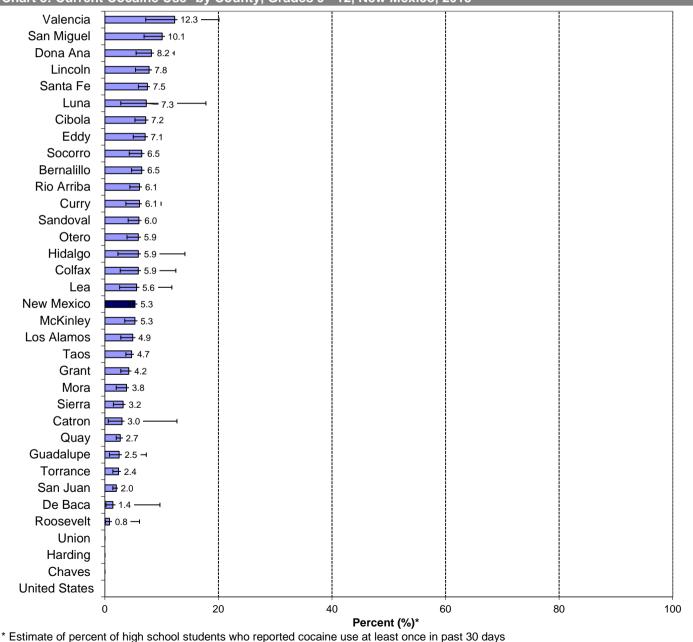
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH CURRENT COCAINE USE (continued)

Chart 2: Current Cocaine Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013



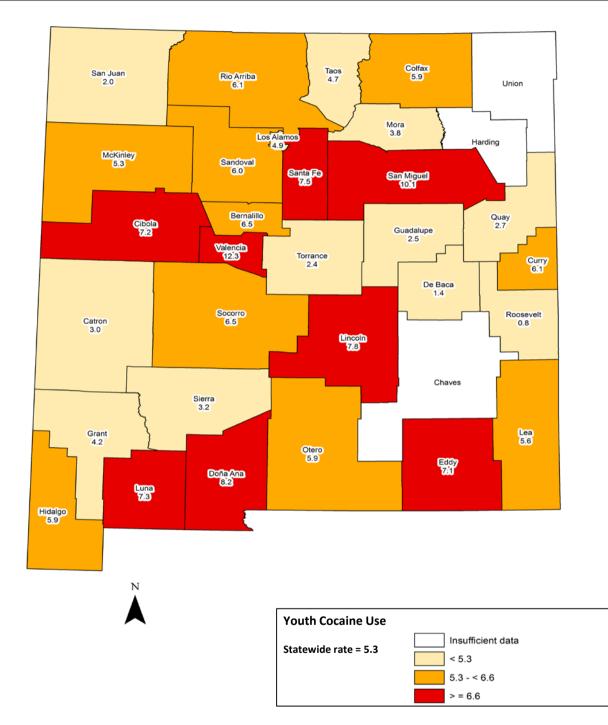
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Current Cocaine Use* by County, Grades 9 - 12, New Mexico, 2013



Chaves, Harding, Union County estimates not available because of low numbers and/or low response rates

YOUTH CURRENT COCAINE USE (continued)

Chart 4: Current Cocaine Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported cocaine use at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section; SAES

YOUTH USED PAINKILLER TO GET HIGH

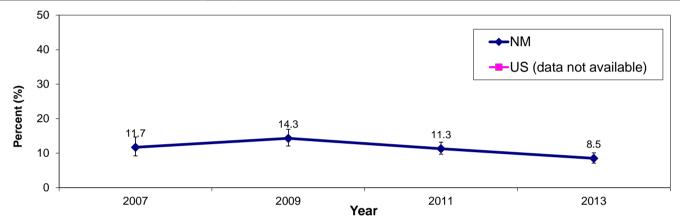
Problem Statement

The rate of current use of painkillers to get high has shown no noticeable trend since the measure was added to the YRRS survey questionnaire in 2007. Painkiller use to get high had the second highest prevalence of all 30-day drug use measures in the 2013 YRRS, behind marijuana (27.8%). The question about the use of painkillers to get high is not on the national YRBS, and there is no national comparison.

The rate of painkiller use to get high was higher among males (9.4%) than females (7.4%), but this difference is not statistically significant. The difference by grade level was not statistically significant. The prevalence was higher among American Indian/Alaska Native (6.9%) than among Hispanic (9.6%) and White (5.8%) students.

In 2013, the rate of painkiller use to get high was highest in San Miguel (18.5%), Valencia (17.5%), Lincoln (12.4%), Lea (12.1%), and Cibola counties (11.9%). The rate was lowest in Mora (1.3%), Roosevelt (5.1%), San Juan (5.2%), De Baca (6.4%), and Hidalgo (6.5%) counties.

Chart 1: Used Painkiller to Get High* by Year, Grades 9 - 12, New Mexico, 2013



^{*} Used a painkiller (such as Vicodin, OxyContin, or Percocet) to get high at least one time in the past 30 days Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Table 1: Used Painkiller to Get High, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	8.7 (5.2-14.1)	10.3 (5.6-18.2)	5.4 (1.1-22.3)	10.4 (4.4-22.6)	8.7 (6.5-11.6)	
	Asian/Pacific Islander					10.0 (5.8-16.7)	
	Black					23.4 (14.0-36.5)	
	Hispanic	11.4 (8.4-15.3)	7.7 (6.1-9.7)	9.7 (7.0-13.4)	12.3 (8.5-17.3)	10.5 (8.5-12.9)	
	White	5.2 (2.6-10.0)	5.0 (2.8-8.7)	7.9 (4.4-13.5)	8.1 (4.6-13.8)	6.7 (5.1-8.8)	
	Total	9.6 (7.4-12.5)	7.6 (6.0-9.7)	8.9 (6.6-11.8)	10.6 (7.9-14.1)	9.4 (8.0-11.1)	
Female	American Indian	6.1 (5.1-7.3)	8.2 (5.2-12.6)	0.6 (0.1-7.6)	3.9 (0.5-24.4)	4.9 (3.3-7.3)	
	Asian/Pacific Islander					14.3 (4.9-35.4)	
	Black						
	Hispanic	9.0 (6.1-13.2)	7.6 (5.0-11.5)	8.5 (5.2-13.7)	9.3 (6.2-13.6)	8.6 (6.5-11.4)	
	White	3.9 (1.9-8.0)	7.1 (4.1-12.0)	4.1 (1.7-9.9)	4.3 (2.0-9.1)	4.9 (3.8-6.3)	
	Total	7.4 (5.1-10.6)	7.7 (5.5-10.6)	6.5 (4.0-10.4)	7.9 (5.7-11.0)	7.4 (5.8-9.5)	
Total	American Indian	7.4 (5.4-10.1)	9.3 (5.8-14.6)	3.0 (0.6-13.9)	7.2 (3.8-13.4)	6.9 (5.3-8.9)	
	Asian/Pacific Islander					13.5 (7.1-24.2)	
	Black					17.9 (9.9-30.2)	
	Hispanic	10.2 (7.5-13.8)	7.7 (5.8-10.0)	9.1 (6.9-11.9)	10.7 (8.2-13.7)	9.6 (7.8-11.7)	
	White	4.6 (2.5-8.3)	5.9 (4.3-8.2)	6.1 (3.9-9.5)	6.3 (4.2-9.3)	5.8 (4.7-7.2)	
	Total	8.6 (6.5-11.2)	7.6 (6.2-9.4)	7.7 (6.0-9.8)	9.3 (7.5-11.5)	8.5 (7.1-10.1)	

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH USED PAINKILLER TO GET HIGH (continued)

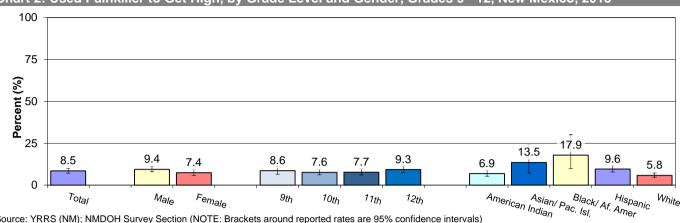
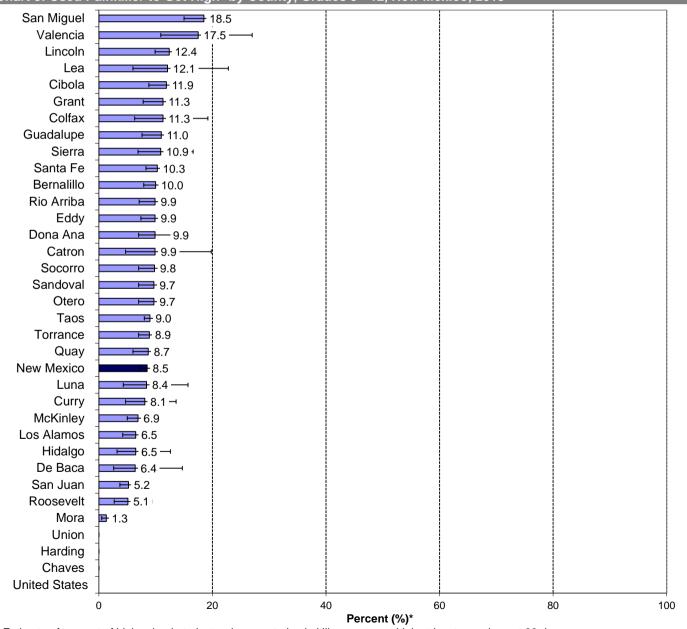


Chart 2: Used Painkiller to Get High, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

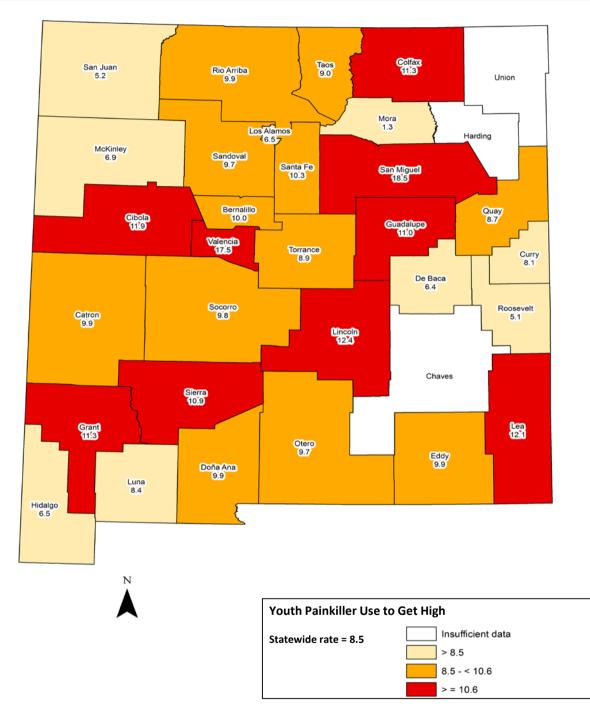
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Used Painkiller to Get High* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH USED PAINKILLER TO GET HIGH (continued)

Chart 4: Used Painkiller to Get High* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section; SAES

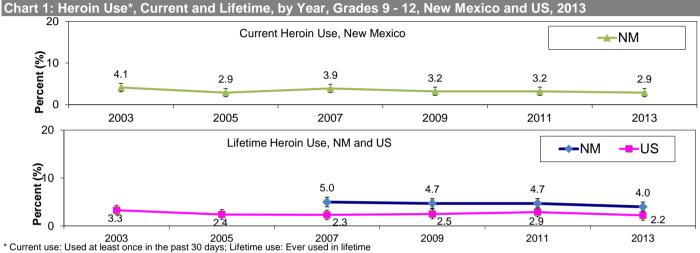
YOUTH HEROIN USE

Problem Statement

The rate of lifetime heroin use has not significantly varied in recent years, neither in New Mexico nor the U.S. The NM rate for lifetime heroin use has been consistently higher than the US rate. This remained true in 2013, with a rate of 4.0% for NM and 2.2% for the U.S. For current heroin use, there is no apparent trend in the New Mexico rate. There is no national comparison for current heroin use.

Black (11.0%) and Asian or Pacific Islander (8.6%) students were more likely to be current heroin users than American Indian (1.8%), Hispanic (3.0%), or White (2.4%) students. The prevalence of current heroin use was not associated with grade level. Males were more likely to report current heroin use (3.8%) than females (1.9%), but this difference was not statistically significant.

In 2013, the highest rates for lifetime heroin use were in Valencia (8.6%), San Miguel (7.8%) and Lincoln (6.8%) counties, and the lowest in De Baca (1.4%), Roosevelt (1.4%), and San Juan (1.7%) counties.



Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

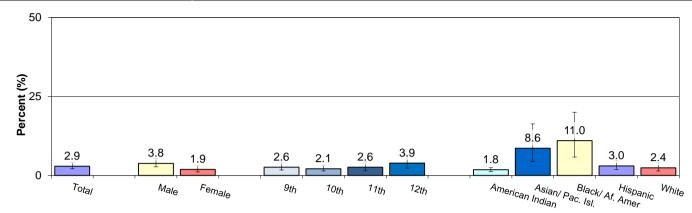
Table 1: Current Heroin Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	2.5 (1.6-3.9)	2.5 (1.0-6.1)	0.0 ()	3.8 (1.5-9.2)	2.3 (1.5-3.4)	
	Asian/Pacific Islander					7.7 (3.8-15.0)	
	Black					13.8 (7.8-23.3)	
	Hispanic	3.8 (2.2-6.5)	2.7 (1.2-5.9)	5.2 (2.5-10.3)	5.1 (2.1-11.6)	4.3 (2.6-7.1)	
	White	1.9 (0.5-6.5)	2.6 (1.1-6.1)	1.5 (0.3-6.0)	4.9 (2.1-11.0)	2.9 (1.7-4.7)	
	Total	3.2 (2.1-4.8)	3.0 (2.1-4.4)	3.6 (1.9-6.9)	5.0 (2.8-8.8)	3.8 (2.7-5.3)	
Female	American Indian	1.4 (0.4-5.5)	1.2 (0.1-13.1)	1.3 (0.1-13.8)	0.8 (0.1-9.6)	1.2 (0.3-4.3)	
	Asian/Pacific Islander					6.3 (2.0-17.9)	
	Black						
	Hispanic	2.2 (0.9-5.1)	1.0 (0.5-2.2)	1.0 (0.3-3.8)	2.2 (0.6-7.6)	1.8 (0.9-3.4)	
	White	1.1 (0.3-3.8)	1.8 (0.6-4.9)	1.0 (0.3-3.2)	4.3 (1.1-15.4)	1.9 (0.8-4.1)	
	Total	1.9 (0.9-3.8)	1.2 (0.6-2.4)	1.5 (0.6-3.5)	2.7 (1.2-5.8)	1.9 (1.1-3.2)	
Total	American Indian	2.0 (1.0-3.9)	2.0 (0.8-4.9)	0.7 (0.1-6.9)	2.3 (0.8-6.9)	1.8 (1.2-2.6)	
	Asian/Pacific Islander					8.6 (4.4-16.3)	
	Black					11.0 (5.8-20.0)	
	Hispanic	3.0 (1.8-5.1)	1.8 (0.9-3.6)	3.1 (1.6-6.1)	3.6 (1.5-8.2)	3.0 (1.9-4.8)	
	White	1.5 (0.6-4.0)	2.2 (1.0-4.6)	1.2 (0.5-3.1)	4.6 (2.2-9.6)	2.4 (1.4-4.0)	
	Total	2.6 (1.7-3.9)	2.1 (1.4-3.2)	2.6 (1.5-4.3)	3.9 (2.3-6.5)	2.9 (2.1-4.1)	

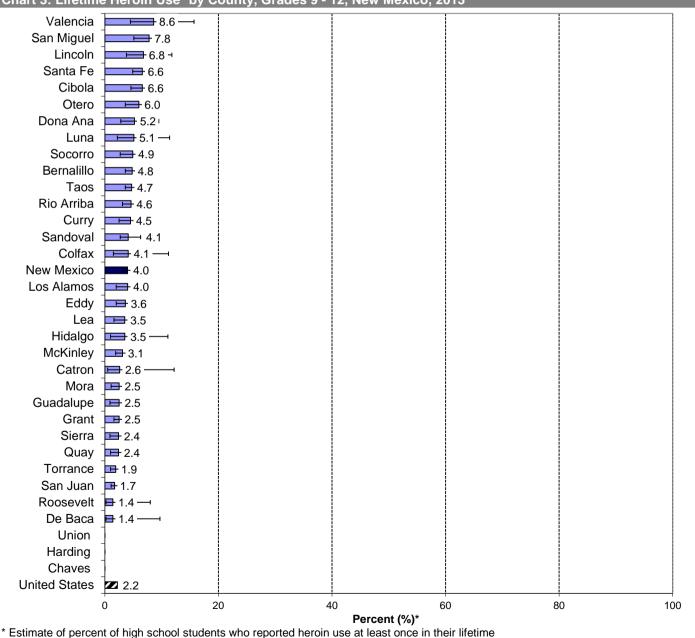
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH HEROIN USE (continued)

Chart 2: Current Heroin Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013



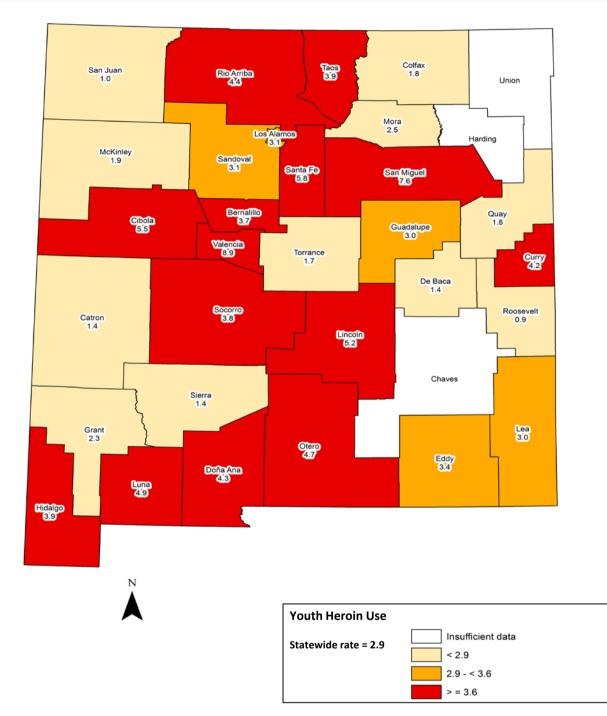
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Lifetime Heroin Use* by County, Grades 9 - 12, New Mexico, 2013



Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH HEROIN USE (continued)

Chart 4: Current Heroin Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported heroin use at least once in their lifetime Insufficient data: county estimates not available because of low numbers and/or low response rates

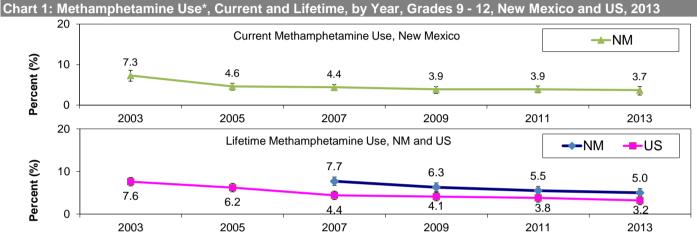
YOUTH METHAMPHETAMINE USE

Problem Statement

The New Mexico rate of lifetime methamphetamine use decreased from 7.7% in 2007 to 5.0% in 2013. The U.S. rate decreased from 1999 (9.1%, not shown) to 2013 (3.2%). The New Mexico rate for lifetime methamphetamine use has been consistently higher than the U.S. rate. This remained true in 2013, with a rate of 5.0% in NM and 3.2% for the U.S. For current methamphetamine use, the prevalence decreased from 7.3% in 2003 to 4.6% in 2005, but there has been no significant change since then. There is no national comparison for current methamphetamine use.

Black/African American (13.5%) and Asian or Pacific Islander (11.3%) students were more likely to be current methamphetamine users than White (2.8%) students. The prevalence of current methamphetamine use was not associated with grade level. Males were more likely to report current methamphetamine use (4.8%) than females (2.5%), but the differences were not statistically significant.

In 2013, the highest rates of current methamphetamine use were in Valencia (10.5%), San Miguel (9.3%), and Lincoln (8.9%) counties, and the lowest rates were in Roosevelt (1.3%), De Baca (1.4%), and Guadalupe (2.5%) counties.



* Current use: Used at least once in the past 30 days; Lifetime use: Ever used in lifetime

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

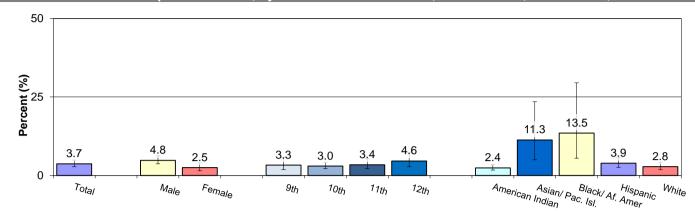
Table 1: Current Methamphetamine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	1.9 (0.5-7.3)	2.5 (1.0-6.1)	0.0 ()	8.0 (3.6-17.1)	2.9 (1.1-7.2)	
	Asian/Pacific Islander					9.0 (3.9-19.2)	
	Black					19.4 (8.8-37.4)	
	Hispanic	5.2 (2.4-10.8)	4.2 (2.2-7.7)	4.7 (2.5-8.6)	6.8 (3.5-12.7)	5.4 (3.7-7.7)	
	White	2.3 (0.8-6.7)	3.7 (1.9-6.9)	2.9 (1.1-7.4)	4.7 (2.5-8.8)	3.6 (2.6-5.1)	
	Total	4.3 (2.3-7.6)	4.3 (2.8-6.4)	3.8 (2.1-6.7)	6.5 (4.0-10.4)	4.8 (3.7-6.3)	
Female	American Indian	2.4 (0.4-13.0)	0.6 (0.1-7.0)	3.3 (1.4-7.6)	0.8 (0.1-9.6)	1.9 (0.9-4.1)	
	Asian/Pacific Islander					10.7 (2.7-34.0)	
	Black						
	Hispanic	2.9 (1.4-6.2)	1.6 (0.8-3.2)	3.4 (1.3-8.3)	1.6 (0.4-5.9)	2.4 (1.2-4.7)	
	White	0.5 (0.1-3.9)	2.5 (0.8-7.5)	1.0 (0.3-3.2)	4.8 (1.4-15.1)	2.0 (1.1-3.6)	
	Total	2.3 (1.2-4.7)	1.8 (0.9-3.4)	3.0 (1.6-5.5)	2.7 (1.2-5.8)	2.5 (1.5-4.0)	
Total	American Indian	2.2 (1.2-3.8)	1.7 (0.7-3.8)	1.7 (0.7-4.2)	4.5 (2.0-9.7)	2.4 (1.7-3.5)	
	Asian/Pacific Islander					11.3 (5.0-23.5)	
	Black					13.5 (5.5-29.5)	
	Hispanic	4.1 (2.1-7.9)	2.8 (1.7-4.8)	4.0 (2.3-7.0)	4.1 (2.1-7.9)	3.9 (2.6-5.7)	
	White	1.5 (0.5-4.2)	3.1 (2.0-4.7)	2.0 (1.0-4.1)	4.8 (2.5-8.8)	2.8 (1.9-4.2)	
	Total	3.3 (1.9-5.7)	3.0 (2.2-4.2)	3.4 (2.2-5.3)	4.6 (2.8-7.4)	3.7 (2.8-4.9)	

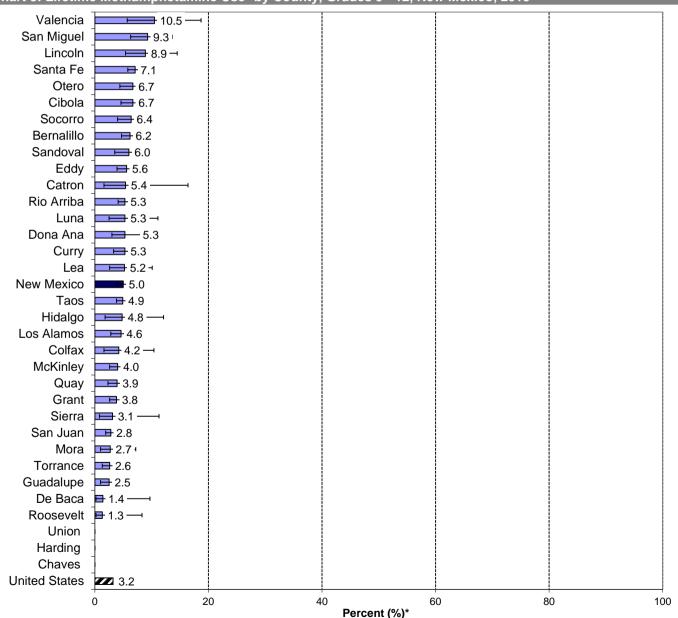
Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH METHAMPHETAMINE USE (continued)

Chart 2: Current Methamphetamine Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013



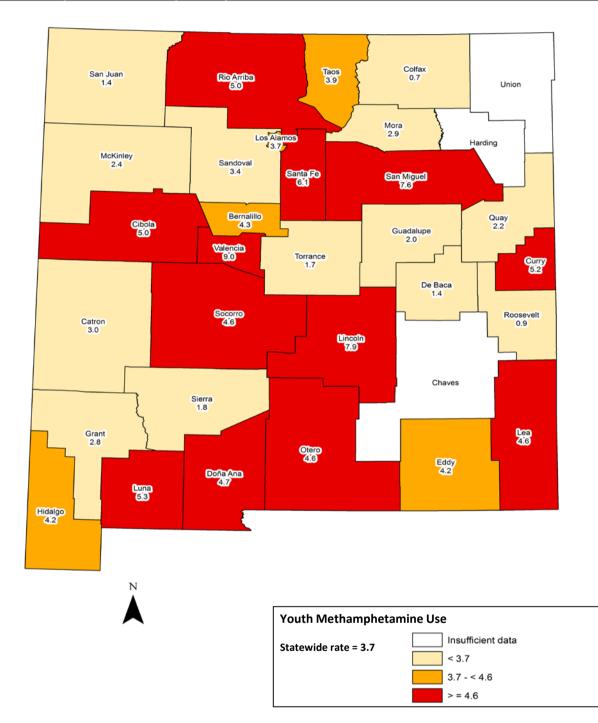
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Lifetime Methamphetamine Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported methamphetamine use at least once in their lifetime Chaves, Harding, Union County estimates not available because of low numbers and/or low response rates

YOUTH METHAMPHETAMINE USE (continued)

Chart 4: Current Methamphetamine Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported methamphetamine use at least once in their lifetime Insufficient data: county estimates not available because of low numbers and/or low response rates

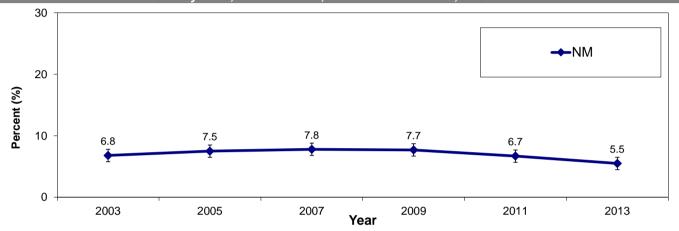
YOUTH CURRENT INHALANT USE

Problem Statement

The rate of current use of inhalants (sniffing glue, breathing the contents of aerosol spray cans, or inhaling paints or sprays) was 5.5% in 2013, and has not varied significantly over recent years. There is no national comparison for current inhalant use.

Black/African American (13.0%) students were more likely to use inhalants than White (3.7%) students. Other differences by race/ethnicity were not significant. The prevalence of inhalant use decreased from 7.1% among ninth graders to 3.6% among 11th graders, but increased again for 12th graders (5.2%). There was no difference in prevalence of inhalant use between males and females.

In 2013, the highest rates for current inhalant use were in Valencia (13.7%), San Miguel (13.4%), and Guadalupe (10.4%) counties; and the lowest in Torrance (2.5%), Roosevelt (3.0%), De Baca (3.1%), and Mora (3.1%) counties. Chart 1: Current Inhalant Use* by Year, Grades 9 - 12, New Mexico and US, 2013



* Used inhalants (sniffed glue, breathed contents of aerosol spray cans, or inhaled paints or sprays) at least one time in the past 30 days Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Table 1: Current Inhalant Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2013

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades	
Sex	Race/Ethnicity	Percent [95% CI]					
Male	American Indian	6.4 (4.3-9.5)	5.7 (3.5-9.1)	0.7 (0.1-7.9)	3.8 (1.5-9.2)	4.6 (3.0-6.9)	
	Asian/Pacific Islander					9.3 (3.0-25.4)	
	Black					15.1 (7.4-28.3)	
	Hispanic	5.4 (3.6-8.0)	6.2 (3.6-10.5)	5.6 (2.9-10.6)	7.1 (3.8-13.0)	6.2 (4.5-8.4)	
	White	3.1 (1.3-7.1)	3.3 (1.6-7.0)	3.6 (1.6-8.0)	4.7 (2.4-9.1)	3.9 (2.9-5.4)	
	Total	5.1 (3.7-7.1)	5.4 (3.6-8.1)	4.5 (2.4-8.1)	6.1 (3.4-10.7)	5.5 (4.3-7.0)	
Female	American Indian	11.1 (6.7-18.0)	6.9 (2.0-21.4)	1.3 (0.1-13.8)	5.1 (1.0-22.8)	6.9 (3.3-14.1)	
	Asian/Pacific Islander					11.9 (3.2-35.3)	
	Black						
	Hispanic	11.4 (8.6-14.9)	3.6 (2.0-6.5)	3.1 (1.6-5.9)	3.2 (2.1-5.1)	5.7 (4.6-7.1)	
	White	3.2 (1.2-8.4)	4.7 (2.5-8.7)	1.6 (0.5-5.1)	4.5 (1.0-17.8)	3.5 (1.8-6.6)	
	Total	9.2 (7.4-11.5)	4.5 (2.9-6.7)	2.7 (1.7-4.5)	4.2 (2.7-6.6)	5.5 (4.4-6.9)	
Total	American Indian	8.7 (6.6-11.5)	6.2 (3.0-12.6)	1.0 (0.1-6.6)	4.4 (1.9-9.7)	5.7 (3.7-8.8)	
	Asian/Pacific Islander					12.0 (5.2-25.6)	
	Black					13.0 (6.2-25.0)	
	Hispanic	8.3 (6.6-10.3)	4.9 (3.0-7.9)	4.3 (2.6-7.2)	5.1 (3.1-8.2)	5.9 (4.8-7.4)	
	White	3.1 (1.6-6.1)	4.0 (2.4-6.5)	2.7 (1.3-5.5)	4.6 (2.1-9.8)	3.7 (2.5-5.5)	
	Total	7.1 (5.9-8.5)	4.9 (3.5-6.9)	3.6 (2.4-5.5)	5.2 (3.3-8.0)	5.5 (4.5-6.7)	

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH CURRENT INHALANT USE (continued)

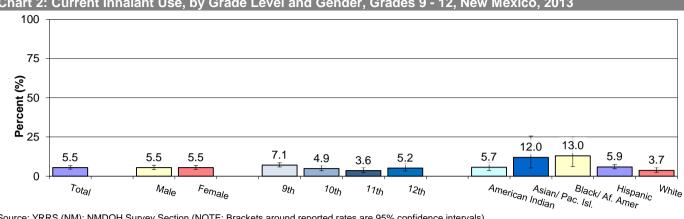
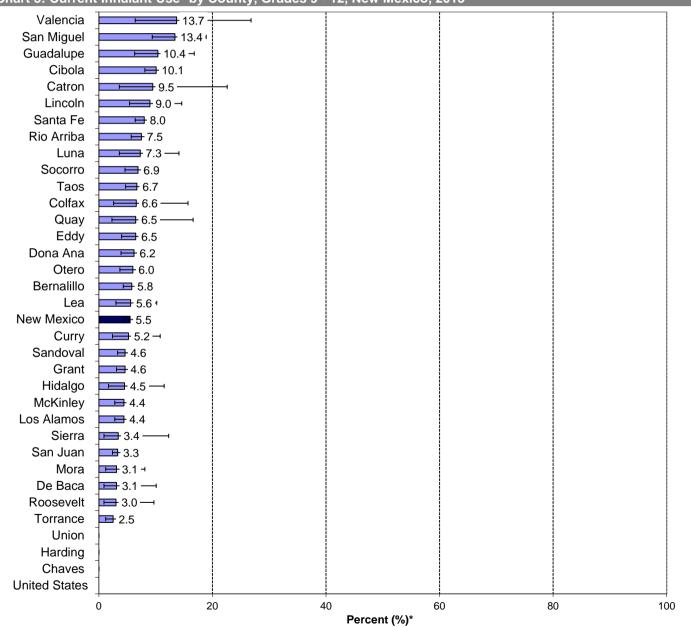


Chart 2: Current Inhalant Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

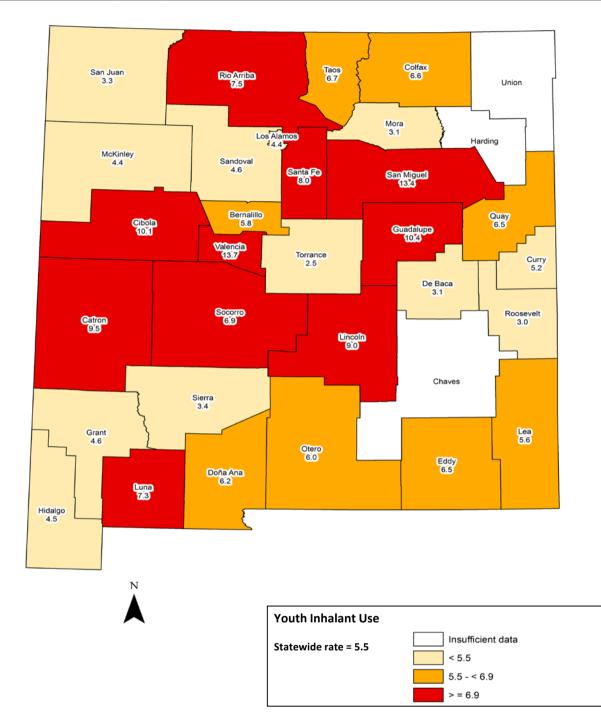
Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Current Inhalant Use* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported inhalant use at least once in past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

YOUTH CURRENT INHALANT USE (continued)

Chart 4: Current Inhalant Use* by County, Grades 9 - 12, New Mexico, 2013



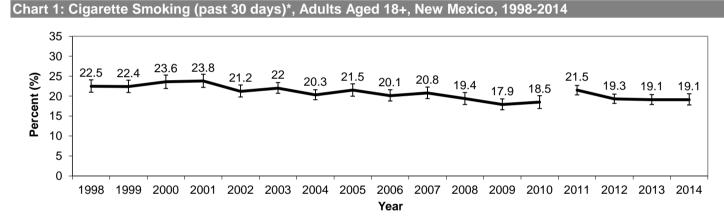
* Estimate of percent of high school students who reported inhalant use at least once in past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

ADULT CIGARETTE SMOKING

Problem Statement

Adult cigarette smoking (defined as having smoked 100 or more cigarettes in lifetime, and currently smoking) is associated with significant rates of smoking-related death and morbidity. According to the CDC's Smoking Attributable Mortality, Morbidity, and Economic Costs (SAMMEC) website, smoking is responsible for a significant proportion of the deaths from numerous types of malignant neoplasms (e.g., lung, esophageal, and laryngeal cancers); from cardiovascular diseases (e.g., ischemic heart disease, cerebrovascular disease); and from several respiratory diseases (e.g., bronchitis, emphysema, chronic airway obstruction). Combined, these smoking-related deaths make smoking the leading behavioral cause of death in the U.S.

In 2014, adults in New Mexico reported current smoking at similar rates (19.1%) as the U.S. overall (19.0%). As shown in Chart 1, New Mexico's adult smoking prevalence rate has decreased over the past 10 years, with a small increase from 2009 to 2010. In 2014, as shown in Table 1, smoking was more prevalent among adults aged 25-64 (22.3%), than among young adults aged 18-24 (17.9%) or adults aged 65 and over (9.9%). New Mexico men were more likely to smoke than women (22.0% v 16.5%). Among males, Hispanics had the highest smoking prevalence (26.1%), followed by American Indians (19.1%) and Whites (18.9%). Among females, the highest prevalence of smoking was among Blacks (32.6%), followed by Whites (19.3%).



* Cigarette smoking definition: smoked >= 100 cigarettes in lifetime and smoked cigarettes in past 30 days Source: BRFSS; SAES (NOTE: Brackets around reported rates are 95% confidence intervals) Table 1: Cigarette Smoking (past 30 days) by Age, Sex, and Race/Ethnicity, Adults Aged 18+, New Mexico, 2014

			Num	ber*			Perce	nt**	
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	-	7,541	-	9,988	-	19.6	-	19.1
	Asian/Pacific Islander	-	-	-	-	-	-	-	
	Black	-	-	-	-	-	-	-	-
	Hispanic	10,510	64,519	5,248	80,277	20.2	30.0	13.3	26.1
	White	10,135	41,044	6,452	58,212	29.5	21.6	7.9	18.9
	Total	22,472	119,907	13,707	156,667	22.3	25.3	10.3	22.0
Female	American Indian	-	3,200	682	4,726	-	7.8	7.5	7.8
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Black	-	-	-	4,934	-	-	-	32.6
	Hispanic	3,856	38,043	4,658	46,794	8.1	16.3	9.8	14.2
	White	6,006	46,511	9,654	62,170	24.9	23.5	9.9	19.3
	Total	11,759	96,778	15,467	124,243	12.9	19.5	9.6	16.5
Total	American Indian	2,573	10,742	1,398	14,713	13.0	13.5	10.6	13.0
	Asian/Pacific Islander	-	-	-	487	-	-	-	2.7
	Black	-	7,380	-	8,497	-	39.4	-	29.0
	Hispanic	14,366	102,562	9,905	127,071	14.4	22.9	11.4	20.0
	White	16,141	87,554	16,106	120,382	27.6	22.6	9.0	19.1
	Total	34,231	216,685	29,174	280,910	17.9	22.3	9.9	19.1

* Estimate of number of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

** Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days
- Excluded due to small number of respondents (< 50) in cell</p>

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Problem Statement (continued)

Smoking prevalence rates by sex and race/ethnicity are not completely aligned with smoking-related death rates. For example, although Hispanic and American Indian males had the highest smoking rates among males, their smoking-related death rates were substantially lower than Blacks and Whites death rates. This suggests the possibility that Hispanic and American Indian male smoking rates have increased relatively recently, and may be followed by an increase in smoking-related death rates in these groups in coming years.

As shown in Table 2 and Chart 2, the counties with the highest smoking rates were in the southeast and central parts of the state.

Table 2: Cigarette Smoking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2014

			Nun	nber*					Perce	ent**		
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	-	-	-	40,273	39,723	93,302	-	-	-	19.8	20.0	20.3
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	-	-	-	3,990	4,184	8,848	-	-	-	20.0	21.0	20.4
Cibola	-	-	-	2,344	822	4,392	-	-	-	35.3	19.9	24.7
Colfax	-	-	-	-	-	2,029	-	-	-	-	-	21.1
Curry	-	-	-	2,623	5,122	8,120	-	-	-	24.8	26.5	25.4
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	-	-	-	18,787	8,433	28,052	-	-	-	20.0	17.8	18.8
Eddy	-	-	-	4,118	5,025	9,143	-	-	-	26.4	25.2	25.1
Grant	-	-	-	1,172	2,168	3,340	-	-	-	12.6	17.1	14.8
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	-	-	-	4,260	5,077	10,401	-	-	-	17.9	26.9	22.1
Lincoln	-	-	-	-	2,755	4,368	-	-	-	-	27.1	29.6
Los Alamos	-	-	-	-	367	1,299	-	-	-	-	4.5	9.7
Luna	-	-	-	1,624	-	2,825	-	-	-	15.1	-	17.3
McKinley	2,521	-	-	1,767	618	5,100	8.3	-	-	25.0	10.0	11.3
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	-	-	-	2,975	5,545	9,773	-	-	-	24.3	27.2	25.2
Quay	-	-	-	-	-	1,527	-	-	-	-	-	22.7
Rio Arriba	-	-	-	4,679	1,079	6,088	-	-	-	22.0	20.0	19.9
Roosevelt	-	-	-	-	1,308	2,294	-	-	-	-	16.3	17.9
Sandoval	-	-	-	5,074	4,796	10,901	-	-	-	15.3	11.3	12.0
San Juan	3,349	-	-	4,150	7,226	15,015	11.8	-	-	29.7	20.5	18.7
San Miguel	-	-	-	2,716	-	3,070	-	-	-	19.9	-	17.3
Santa Fe	-	-	-	7,885	4,869	14,621	-	-	-	16.2	9.5	13.6
Sierra	-	-	-	-	1,871	2,654	-	-	-	-	26.9	26.2
Socorro	-	-	-	-	-	3,217	-	-	-	-	-	26.2
Taos	-	-	-	1,653	1,861	3,667	-	-	-	14.9	22.3	17.6
Torrance	-	-	-	-	-	-	-	-	-	-	-	-
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	-	-	-	6,999	5,659	14,674	-	-	-	25.8	24.6	26.9
New Mexico	14,713		8,497			280,910			29.0		19.1	19.1

* Estimate of number of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

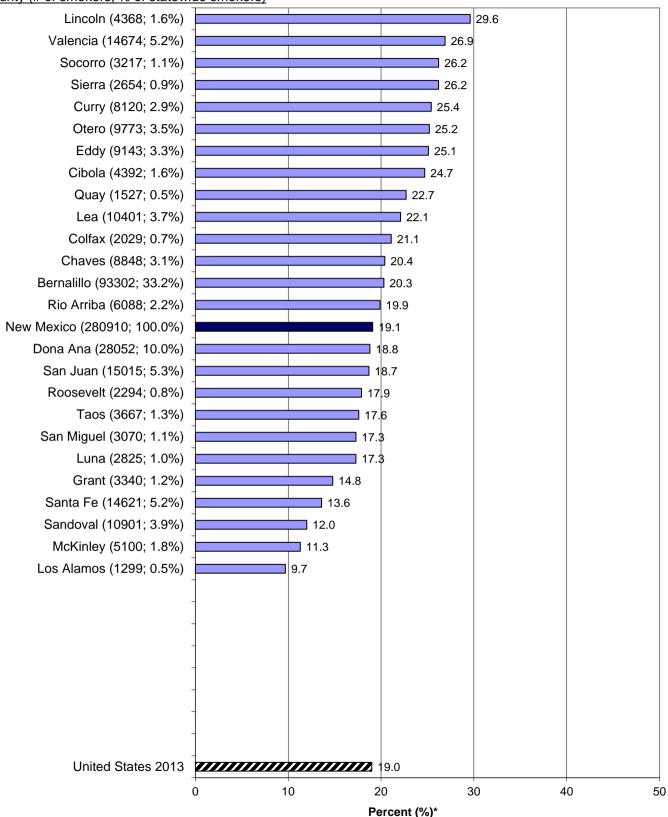
** Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days - Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Chart 2: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014

County (# of smokers; % of statewide smokers)

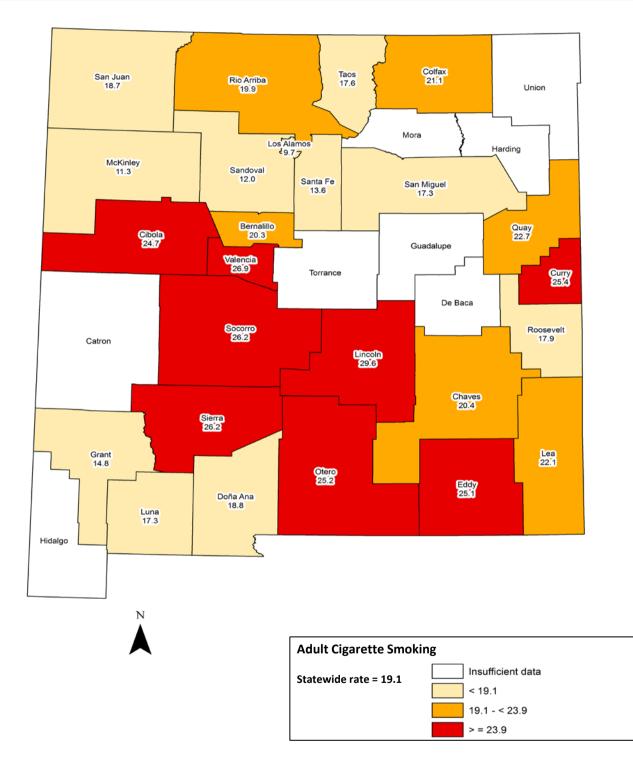


* Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days The following counties were not included due to small number of respondents (< 50) in cell: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Torrance, Union

Source: NMBRFSS (NM); CDC BRFSS (US); SAES

ADULT CIGARETTE SMOKING (continued)

Chart 3: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2014



* Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days Insufficient data: Rate not reported due to small number of responents (< 50) in cell Source: BRFSS; SAES

YOUTH CURRENT CIGARETTE SMOKING

Problem Statement*

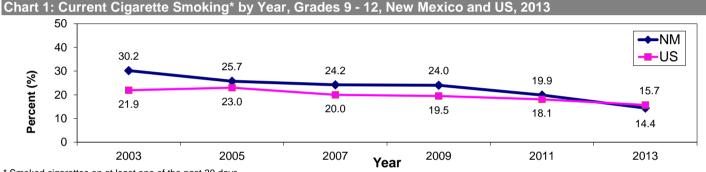
Cigarette smoking is the leading cause of preventable death in the U.S. Cigarette smoking increases risk for several cancers and other chronic conditions. Smoking is initiated and established primarily during adolescence, with more than 80% of adult smokers first smoking before age 18.**

The prevalence of current cigarette smoking among NM high school students has decreased from 30.2% in 2003 to 14.4% in 2013. This coincides with a decrease in the U.S. rate that has occurred over the past several years. NM rate was consistently higher than the U.S. rate until 2011. In 2011, NM and U.S. rates were not statistically distinguishable (U.S.=18.1%; NM=19.9%). In 2013, the NM rate (14.4%) was lower than that of the U.S. (15.7%).

Boys (16.4%) were more likely to be current cigarette smokers than girls (12.3%). White (12.3%) and Asian or Pacific Islander (11.3%) students had lower rates of current cigarette smoking than American Indian (15.7%) and Hispanic (15.3%) students. Chart 2 shows that prevalence increased significantly with grade level.

In 2013, the counties with the highest prevalence of current smoking were San Miguel (27.6%), Cibola (25.0%), Socorro (24.4%), Valencia (21.2%), and Catron (20.9%). The counties with the lowest prevalence of current smoking were Mora (8.9%), Curry (9.0%), Otero (10.4%), San Juan (10.7%), and Hidalgo (11.2%).

* YRRS tobacco questions do not distinguish between ceremonial/traditional and commercial tobacco use. ** Youth and Tobacco Use. Centers for Disease Control and Prevention.



* Smoked cigarettes on at least one of the past 30 days

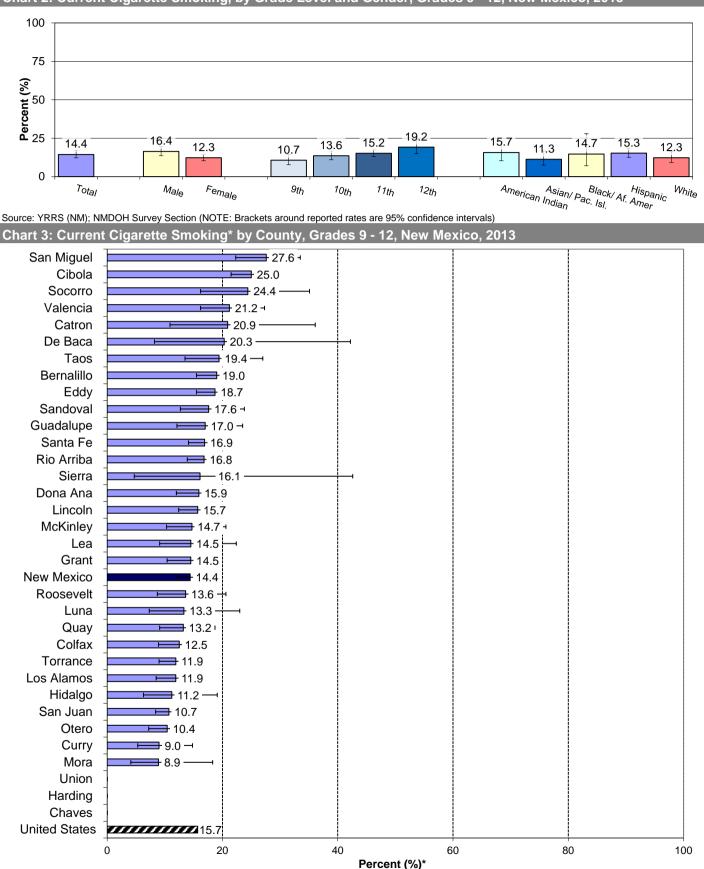
Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: C	Current Cigarette Smoking					
		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	Race/Ethnicity	Percent [95% CI]				
Male	American Indian	13.1 (9.6-17.5)	21.7 (14.2-31.8)	19.3 (7.0-43.5)	19.6 (12.1-30.1)	18.0 (12.1-25.8)
	Asian/Pacific Islander					11.2 (5.2-22.7)
	Black					20.4 (8.8-40.6)
	Hispanic	12.6 (6.0-24.5)	18.6 (15.2-22.5)	16.8 (11.9-23.2)	27.5 (20.4-35.8)	18.4 (14.7-22.7)
	White	8.4 (5.5-12.8)	12.4 (6.7-21.8)	10.1 (6.8-14.7)	21.4 (15.0-29.7)	12.7 (9.2-17.3)
	Total	11.5 (7.1-17.9)	16.9 (13.3-21.1)	14.9 (12.2-18.0)	24.1 (19.0-30.0)	16.4 (13.7-19.6)
Female	American Indian	11.1 (3.8-28.1)	12.8 (8.3-19.2)	16.7 (11.7-23.3)		13.2 (7.2-23.2)
	Asian/Pacific Islander					7.5 (3.1-17.4)
	Black					
	Hispanic	11.4 (7.8-16.5)	9.7 (7.4-12.6)	15.1 (11.8-19.0)	14.6 (10.5-19.9)	12.4 (10.3-15.0)
	White	6.5 (3.1-12.9)	9.8 (5.1-17.9)	16.9 (11.2-24.7)	16.4 (10.0-25.7)	11.8 (8.4-16.5)
	Total	9.9 (7.6-12.8)	10.4 (8.1-13.2)	15.5 (13.4-18.0)	14.5 (10.4-19.9)	12.3 (10.3-14.5)
Total	American Indian	12.1 (8.1-17.7)	17.9 (14.2-22.3)	17.9 (9.8-30.5)	16.7 (8.0-31.6)	15.7 (10.4-23.0)
	Asian/Pacific Islander					11.3 (7.5-16.7)
	Black					14.7 (7.1-28.0)
	Hispanic	12.0 (7.5-18.8)	13.9 (11.2-17.1)	15.9 (12.9-19.5)	20.5 (15.2-27.2)	15.3 (12.6-18.5)
	White	7.5 (4.7-11.8)	11.2 (7.4-16.4)	13.2 (10.0-17.2)	19.0 (13.7-25.8)	12.3 (9.2-16.1)
	Total	10.7 (7.8-14.6)	13.6 (11.0-16.7)	15.2 (13.2-17.4)	19.2 (15.0-24.2)	14.4 (12.2-17.0)

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH CURRENT CIGARETTE SMOKING (continued)

Chart 2: Current Cigarette Smoking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

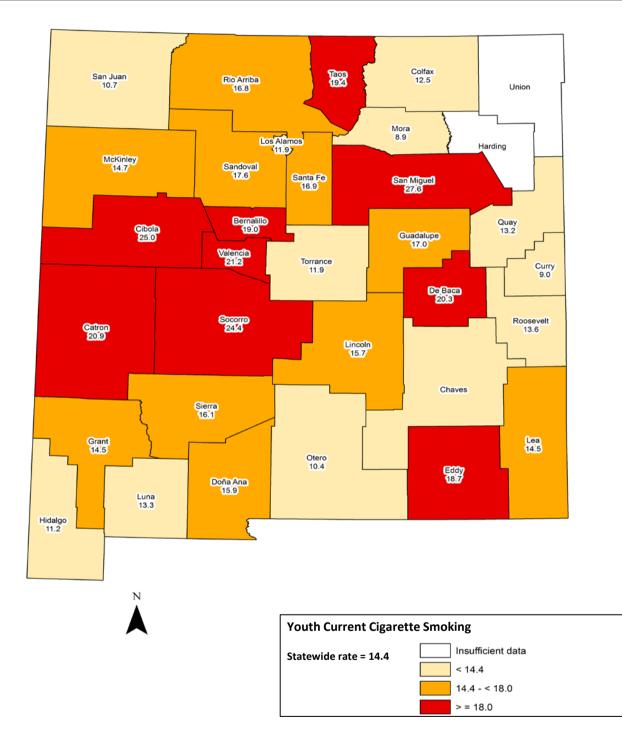


* Estimate of percent of high school students who reported smoking cigarettes on at least one of the past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

YOUTH CURRENT CIGARETTE SMOKING (continued)

Chart 4: Current Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported smoking cigarettes on at least one of the past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

YOUTH FREQUENT CIGARETTE SMOKING

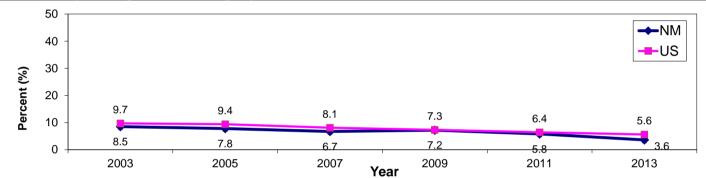
Problem Statement*

Frequent cigarette smoking means smoking cigarettes on at least 20 of the past 30 days. The prevalence of frequent cigarette smoking among New Mexico high school students has decreased from 8.5% in 2003 to 3.6% in 2013. This coincides with a decrease in the U.S. rate of frequent smoking over the past several years. In 2013, the New Mexico prevalence of frequent smoking was not statistically different from the U.S. rate (3.6% v 5.6%, respectively).

The difference in the prevalence of frequent smoking between boys (5.0%) and girls (2.2%) was not statistically significant. American Indian students (2.4%) had a lower prevalence of frequent smoking than Black (7.9%), Asian or Pacific Islander (5.1%), Hispanic (3.6%), or White (3.9%) students; but these differences were also not statistically significant. The prevalence of frequent smoking increased with grade level (ninth=2.1%; tenth=3.7%; 11th=3.5%; 12th=5.4%), but these rates were also not statistically different.

In 2013, the highest rates for frequent cigarette smoking were in San Miguel (10.0%), Valencia (7.8%), Socorro (7.0%), Sierra (7.0%), and Cibola (6.9%) counties. The lowest rates were in Catron (1.2%), Dona Ana (1.7%), Grant (1.8%), McKinley (1.8%), and Colfax (1.9%) counties.

Chart 1: Frequent Cigarette Smoking* by Year, Grades 9 - 12, New Mexico and US, 2013



* Smoked cigarettes on at least 20 of the past 30 days

Source: YRRS (NM); CDC YRBS (US); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

Table 1: F	requent Cigarette Smoki	ng, by Grade Level	, Gender, and Ra	ce/Ethnicity, Gra	des 9 - 12, New N	lexico, 2013
		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	Race/Ethnicity	Percent [95% CI]	Percent [95% CI]		Percent [95% CI]	Percent [95% CI]
Male	American Indian	0.8 (0.1-12.0)	3.8 (2.2-6.5)	5.2 (2.9-9.0)	6.7 (2.3-17.9)	3.6 (1.8-7.0)
	Asian/Pacific Islander					8.4 (3.7-18.3)
	Black					13.0 (4.6-31.6)
	Hispanic	3.5 (1.1-10.6)	4.4 (2.4-7.9)	5.0 (3.6-6.9)	8.2 (4.6-14.0)	5.2 (3.2-8.2)
	White	2.6 (0.8-8.5)	7.3 (3.3-15.6)	3.4 (1.8-6.5)	6.6 (3.2-13.0)	5.2 (2.9-8.9)
	Total	3.1 (1.2-7.5)	5.4 (3.1-9.1)	4.5 (3.5-5.8)	7.2 (4.5-11.2)	5.0 (3.3-7.6)
Female	American Indian	0.0 ()	0.7 (0.1-7.4)	2.6 (0.4-16.3)		1.1 (0.2-5.1)
	Asian/Pacific Islander					1.4 (0.2-11.8)
	Black					
	Hispanic	1.4 (0.4-4.3)	2.1 (0.9-4.8)	1.6 (0.6-4.1)	3.8 (1.9-7.5)	2.2 (1.1-4.1)
	White	0.5 (0.0-5.4)	2.0 (0.5-7.8)	3.8 (1.3-10.5)	5.0 (2.0-12.1)	2.6 (1.1-6.1)
	Total	1.0 (0.3-2.7)	2.1 (1.0-4.5)	2.5 (1.4-4.4)	3.7 (1.9-7.1)	2.2 (1.2-3.9)
Total	American Indian	0.4 (0.0-5.7)	2.4 (1.4-4.2)	3.8 (1.7-8.1)	4.3 (1.5-11.5)	2.4 (1.2-4.7)
	Asian/Pacific Islander					5.1 (2.5-10.0)
	Black					7.9 (2.9-19.8)
	Hispanic	2.5 (0.8-7.0)	3.2 (1.7-5.8)	3.2 (2.0-5.1)	5.8 (3.3-10.0)	3.6 (2.2-6.0)
	White	1.6 (0.5-5.1)	4.8 (2.3-9.9)	3.6 (2.2-5.9)	5.8 (3.0-10.9)	3.9 (2.2-7.0)
	Total	2.1 (0.9-4.8)	3.7 (2.3-6.2)	3.5 (2.6-4.7)	5.4 (3.4-8.5)	3.6 (2.3-5.7)

Source: YRRS (NM); NMDOH Survey Section (NOTE: "95% CI" is 95% confidence interval)

YOUTH FREQUENT CIGARETTE SMOKING (continued)

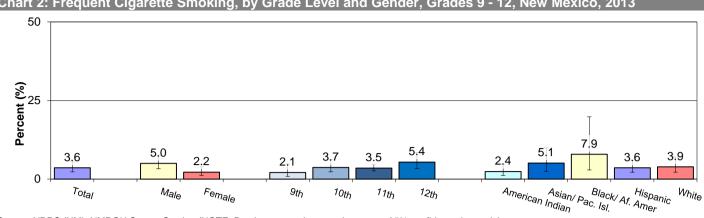
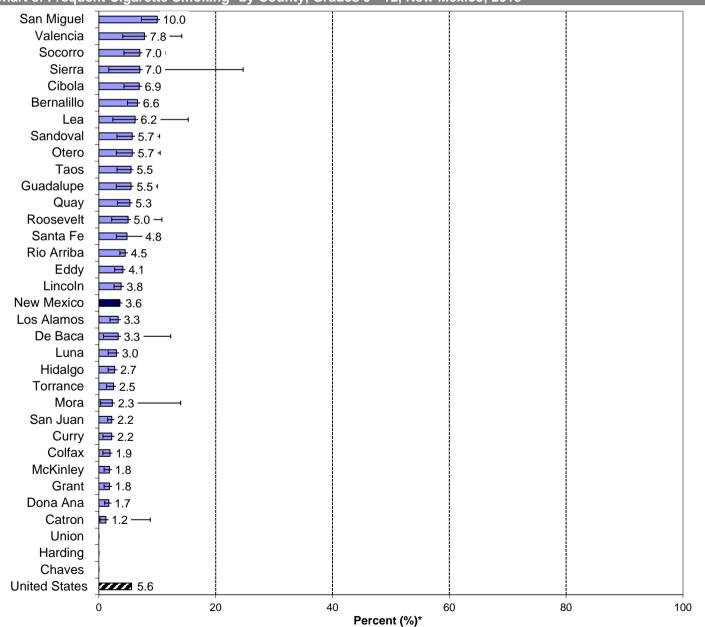


Chart 2: Frequent Cigarette Smoking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2013

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals) Chart 3: Frequent Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2013

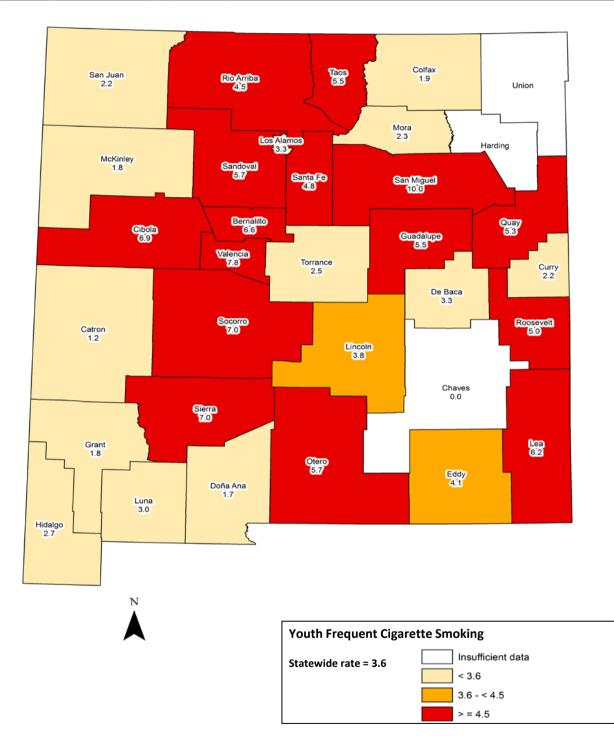


* Estimate of percent of high school students who reported smoking cigarettes on at least 20 of the past 30 days Chaves, Harding, and Union County estimates not available because of low numbers and/or low response rates

Source: YRRS (NM); NMDOH Survey Section (NOTE: Brackets around reported rates are 95% confidence intervals)

YOUTH FREQUENT CIGARETTE SMOKING (continued)

Chart 4: Frequent Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2013



* Estimate of percent of high school students who reported smoking cigarettes on at least 20 of the past 30 days Insufficient data: county estimates not available because of low numbers and/or low response rates

Appendix 1

State Population by Age, Sex, Race/Ethnicity, and County

Appendix 1: Male Population, New Mexico, 2012*

	1												Ra	ce/Ethnicity	/										
			Wh	nite			Bla	ck			Hispanio	0			American I	ndian			Ot	her			All Race/E	thnicities	
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Male	Bernalillo	37,537	78,949	23,576	140,062	3,970	5,753	836	10,559	66,918	80,383	11,421	158,722	6,069	6,555	633	13,257	2,797	4,509	638	7,944	117,291	176,149	37,104	330,544
	Catron	242	759	500	1,501	6	11	1	18	97	208	88	393	27	13	8	48	0	0	1	1	372	991	598	1,961
	Chaves	4,203	7,139	2,956	14,298	312	291	61	664	8,196	7,802	1,187	17,185	150	144	21	315	110	108	10	228	12,971	15,484	4,235	32,690
	Cibola	677	1,682	655	3,014	38	90	16	144	1,813	3,259	453	5,525	2,093	2,563	481	5,137	37	36	5	78	4,658	7,630	1,610	13,898
	Colfax	692	1,845	884	3,421	18	21	4	43	1,150	1,695	454	3,299	40	59	8	107	13	9	1	23	1,913	3,629	1,351	6,893
	Curry	4,468	6,603	1,848	12,919	759	814	106	1,679	4,697	4,659	508	9,864	69	84	17	170	147	145	15	307	10,140	12,305	2,494	24,939
	De Baca	124	283	151	558	5	3	2	10	120	215	64	399	1	4	1	6	1	1	1	3	251	506	219	976
	Dona Ana	9,738	15,929	8,013	33,680	795	912	167	1,874	30,123	30,699	6,311	67,133	382	419	85	886	520	524	88	1,132	41,558	48,483	14,664	104,705
	Eddy	4,212	7,757	2,453	14,422	144	234	41	419	5,182	6,014	952	12,148	114	146	21	281	54	93	14	161	9,706	14,244	3,481	27,431
	Grant	1,550	3,521	2,062	7,133	98	59	11	168	2,738	3,181	1,034	6,953	44	48	21	113	31	26	9	66	4,461	6,835	3,137	14,433
	Guadalupe	94	295	68	457	13	48	2	63	621	1,137	289	2,047	12	30	2	44	6	25	0	31	746	1,535	361	2,642
	Harding	25	121	60	206	0	1	0	1	30	80	50	160	1	0	0	1	0	0	0	0	56	202	110	368
	Hidalgo	262	491	240	993	12	3	1	16	540	678	162	1,380	2	4	2	8	7	8	0	15	823	1,184	405	2,412
	Lea	4,254	7,803	2,241	14,298	580	707	129	1,416	8,351	8,511	842	17,704	118	174	24	316	60	101	10	171	13,363	17,296	3,246	33,905
	Lincoln	1,318	3,487	1,953	6,758	30	34	3	67	1,175	1,546	330	3,051	85	101	15	201	9	24	3	36	2,617	5,192	2,304	10,113
	Los Alamos	1,871	4,128	1,196	7,195	38	53	4	95	544	669	94	1,307	27	27	7	61	162	319	33	514	2,642	5,196	1,334	9,172
	Luna	941	2,069	1,636	4,646	37	68	15	120	3,429	3,428	773	7,630	21	39	16	76	12	34	12	58	4,440	5,638	2,452	12,530
	McKinley	1,007	2,309	686	4,002	131	151	28	310	2,112	2,367	461	4,940	12,271	11,853	1,888	26,012	101	147	17	265	15,622	16,827	3,080	35,529
	Mora	77	233	114	424	3	4	6	13	623	1,036	361	2,020	0	4	3	7	2	3	1	6	705	1,280	485	2,470
	Otero	5,419	9,205	3,566	18,190	578	642	122	1,342	4,811	5,271	913	10,995	895	931	92	1,918	182	182	12	376	11,885	16,231	4,705	32,821
	Quay	544	1,192	636	2,372	21	32	4	57	706	910	237	1,853	21	20	3	44	18	20	4	42	1,310	2,174	884	4,368
	Rio Arriba	454	1,572	661	2,687	37	43	9	89	5,015	7,505	1,814	14,334	1,164	1,334	212	2,710	25	36	5	66	6,695	10,490	2,701	19,886 10,374
	Roosevelt	2,138 8,734	2,663 17,982	926 5.629	5,727 32,345	156 622	72	5	233 1.624	2,119	1,905 11.595	215	4,239	49 3.858	40 3.777	8 618	97 8.253	45	30		78 942	4,507 23,490	4,710 34,749	1,157 8,132	66.371
	San Juan San Miguel	8,734	17,982	5,629	27,503	264	854 297	148 23	1,624	9,945 5.918	5.936	702	23,207	3,858	3,777	1.595	23.050	331 109	541 154	16	942 279	25,385	34,749	6,257	63.972
	Sandoval	617	14,993	3,921	27,503	204	297	13	231	3,949	5,936	1.509	12,556	10,505	10,950	1,595	23,050	38	41	10	279	4,798	7,566	2,195	14,559
	Santoval Santa Fe	5,554	18.324	7.010	2,657	220	422	60	702	14.041	19,699	3.504	37.244	667	52 942	5 142	1.751	235	517	62	814	20,717	39,904	10.778	71.399
	Sierra	5,554	1.893	1,616	4,147	220	422	00	44	631	818	254	1,703	22	942	142	78	235	10	14	26	1.310	2,785	1.903	5.998
	Socorro	1,189	1,760	664	3.613	67	51	9	124	1.655	2,142	532	4.329	404	40	58	931	69	59	14	133	3.384	4,481	1,903	9,130
	Taos	1,109	3.450	1.298	5.854	48	50	10	124	3,158	4.835	1.335	9,328	340	409	102	931	28	50	5	83	4.680	8.875	2,750	16.305
	Torrance	1,100	2.659	835	4,741	40 54	80	12	146	1.224	1,655	362	3.241	95	490	102	932 191	13	14	5	32	2,633	4,490	1.228	8.351
	Union	310	2,039	258	1.390	21	55	12	77	353	662	101	1,116	95	25	14	37	5	14	1	32	2,033	1.574	362	2,636
	Valencia	3,703	7.742	2.672	14,117	197	371	62	630	9.397	11.425	2.041	22.863	484	579	101	1.164	63	89	21	173	13.844	20.206	4.897	38,947
Male To		113.534	231.242	81.642	426.418	9.435	12,318	1.917	23.670	201.381	237.742	41.020	480.143	404	42.004	6.214	88,309	5.232	7.865	1.091	14,188	369.673	531,171	131.884	1.032.728
ividle T	Jiai	115,554	201,242	01,042	420,410	3,433	12,310	1,317	20,070	201,301	201,142	41,020	400,143	40,091	42,004	0,214	00,309	J,232	1,000	1,091	14,100	303,073	551,171	131,004	1,002,720

* 2012 population is reported here because 2012 was the mid-point year for the 2010-2014 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Female Population, New Mexico, 2012*

]												Ra	ce/Ethnicity	y										
			Wł	nite			Bla				Hispanio	2			American I	ndian			O	ther			All Race/E	thnicities	
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Female	Bernalillo	35,837	80,429	30,122	146,388	3,425	4,564	943	8,932	65,560	84,202	15,819	165,581	6,410	7,574	1,001	14,985	2,778	5,410	930	9,118	114,010	182,179	48,815	345,004
	Catron	222	757	407	1,386	9	6	3	18	82	150	92	324	20	24	6	50	0	5	2	7	333	942	510	1,785
	Chaves	3,909	7,402	3,743	15,054	233	325	78	636	7,866	8,049	1,347	17,262	89	114	50	253	73	126	26	225	12,170	16,016	5,244	33,430
	Cibola	654	1,639	723	3,016	46	79	7	132	1,632	2,271	574	4,477	2,240	2,802	703	5,745	24	56	6	86	4,596	6,847	2,013	13,456
	Colfax	663	1,831	913	3,407	7	10	1	18	1,047	1,532	538	3,117	16	30	4	50	8	21	4	33	1,741	3,424	1,460	6,625
	Curry	4,077	6,309	2,433	12,819	647	705	120	1,472	4,478	4,662	617	9,757	81	119	13	213	111	242	43	396	9,394	12,037	3,226	24,657
	De Baca	139	309	174	622	2	5	1	8	134	174	71	379	0	5	1	6	-1	1	1	1	274	494	248	1,016
	Dona Ana	8,997	15,919	9,138	34,054	584	606	176	1,366	30,186	34,347	7,985	72,518	409	386	91	886	495	740	113	1,348	40,671	51,998	17,503	110,172
	Eddy	3,863	7,548	3,096	14,507	116	141	54	311	5,066	5,913	1,144	12,123	100	121	16	237	60	121	26	207	9,205	13,844	4,336	27,385
	Grant	1,406	3,828	2,156	7,390	38	39	9	86	2,584	3,444	1,240	7,268	45	73	17	135	21	44	13	78	4,094	7,428	3,435	14,957
	Guadalupe	62	159	69	290	4	5	0	9	552	821	310	1,683	5	4	1	10	13	17	1	31	636	1,006	381	2,023
	Harding	28	97	60	185	1	1	0	2	29	69	41	139	2	0	0	2	-1	0	0	-1	59	167	101	327
	Hidalgo	276	527	214	1,017	9	6	3	18	502	634	204	1,340	0	6	1	7	6	6	1	13	793	1,179	423	2,395
	Lea	4,201	7,426	2,893	14,520	480	590	158	1,228	7,989	7,406	852		105	124	19	248	52	105	17	174	12,827	15,651	3,939	32,417
	Lincoln	1,158	3,782	2,027	6,967	24	30	5	59	1,151	1,651	351	3,153	99	138	16	253	5	26	3	34	2,437	5,627	2,402	10,466
	Los Alamos	1,704	3,951	1,267	6,922	23	32	6	61	585	709	155	1,449	16	35	4	55	173	347	39	559	2,501	5,074	1,471	9,046
	Luna	812	2,064	1,674	4,550	37	65	15	117	3,397	3,565	830	7,792	26	40	14	80	14	45	10	69	4,286	5,779	2,543	12,608
	McKinley	1,022	2,250	801	4,073	124	120	15	259	2,062	2,241	563	4,866	11,953	13,499	2,888	28,340	103	219	36	358	15,264	18,329	4,303	37,896
	Mora	71	261	110	442	2	8	0	10	544	988	350	1,882	3	7	2	12	1	5	1	7	621	1,269	463	2,353
	Otero	4,467	8,506	3,866	16,839	466	466	133	1,065	4,748	5,470	1,145	11,363	855	1,068	146	2,069	174	350	89	613	10,710	15,860	5,379	31,949
	Quay	467	1,286	682	2,435	25	22	5	52	665	966	288	1,919	13	16	7	36	6	33	5	44	1,176	2,323	987	4,486
	Rio Arriba	405	1,671	686	2,762	24	31	6	61	4,927	7,271	2,210	14,408	1,225	1,486	347	3,058	26	51	6	83	6,607	10,510	3,255	20,372
	Roosevelt	2,082	2,663	1,138	5,883	79	43	3	125	1,956	1,796	219	3,971	63	44	11	118	65	39	3	107	4,245	4,585	1,374	10,204
	San Juan	8,037	18,952	6,616	33,605	536	701	183	1,420	9,846	12,480	2,140	24,466	3,695	4,215	884	8,794	388	788	119	1,295	22,502	37,136	9,942	69,580
	San Miguel	8,373	14,872	4,861	28,106	214	159	20	393	5,646	5,612	831	12,089	10,284	11,451	2,180	23,915	94	206	30	330	24,611	32,300	7,922	64,833
	Sandoval	592	1,694	738	3,024	111	42	8	161	3,720	5,691	1,734	11,145	88	60	5	153	54	53	11	118	4,565	7,540	2,496	14,601
	Santa Fe	5,487	20,775	8,329	34,591	183	271	54	508	13,413	19,103	4,665	37,181	722	963	173	1,858	280	658	83	1,021	20,085	41,770	13,304	75,159
	Sierra	622	1,939	1,534	4,095	14	17	8	39	571	821	277	1,669	19	42	17	78	4	16	9	29	1,230	2,835	1,845	5,910
	Socorro	819	1,666	677	3,162	38	28	4	70	1,639	2,093	574	4,306	454	482	66	1,002	38	53	3	94	2,988	4,322	1,324	8,634
	Taos	970	3,879	1,521	6,370	21	45	13	79	2,935	4,742	1,606	9,283	303	501	149	953	32	89	10	131	4,261	9,256	3,299	16,816
	Torrance	1,114	2,516	834	4,464	30	32	6	68	1,217	1,533	370	3,120	39	78	18	135	10	32	7	49	2,410	4,191	1,235	7,836
	Union	270	578	328	1,176	1	7	0	8	256	318	119	693	5	7	2	14	-1	7	2	8	531	917	451	1,899
	Valencia	3,438	7,972	2,971	14,381	129	194	45	368	8,901	11,089	2,316	22,306	405	581	123	1,109	71	140	40	251	12,944	19,976	5,495	38,415
Female	Total	106,244	235,457	96,801	438,502	7,682	9,395	2,082	19,159	195,886	241,813	51,577	489,276	39,789	46,095	8,975	94,859	5,176	10,051	1,689	16,916	354,777	542,811	161,124	1,058,712

* 2012 population is reported here because 2012 was the mid-point year for the 2010-2014 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Total Population, New Mexico, 2012*

													Rad	ce/Ethnicity	/										
			Wł	nite			Bla	ck			Hispanic	;			American Ir	ndian			0	ther			All Race/E	Ethnicities	
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Both	Bernalillo	73,373	159,378	53,698	286,449	7,396	10,316	1,779	19,491	132,477	164,585	27,240	324,302	12,479	14,129	1,634	28,242	5,578	9,921	1,568	17,067	231,303	358,329	85,919	675,551
Sexes	Catron	464	1,517	908	2,889	15	17	4	36	177	358	180	715	47	37	14	98	2	4	1	7	705	1,933	1,107	3,745
	Chaves	8,113	14,541	6,698	29,352	545	616	139	1,300	16,062	15,851	2,534	34,447	239	258	71	568	182	234	37	453	25,141	31,500	9,479	66,120
	Cibola	1,332	3,321	1,378	6,031	84	168	24	276	3,445	5,531	1,027	10,003	4,332	5,365	1,184	10,881	60	93	10	163	9,253	14,478	3,623	27,354
	Colfax	1,355	3,676	1,797	6,828	25	32	5	62	2,196	3,227	992	6,415	56	89	12	157	22	29	5	56	3,654	7,053	2,811	13,518
	Curry	8,544	12,912	4,281	25,737	1,406	1,518	227	3,151	9,176	9,321	1,125	19,622	150	203	30	383	258	388	57	703	19,534	24,342	5,720	49,596
	De Baca	264	592	326	1,182	6	8	3	17	254	389	135	778	1	8	2	11	0	3	0	3	525	1,000	466	1,991
	Dona Ana	18,735	31,849	17,151	67,735	1,379	1,518	343	3,240	60,310	65,046	14,297	139,653	792	805	176	1,773	1,012	1,264	201	2,477	82,228	100,482	32,168	214,878
	Eddy	8,075	15,306	5,549	28,930	261	376	94	731	10,247	11,927	2,096	24,270	214	267	36	517	113	212	42	367	18,910	28,088	7,817	54,815
	Grant	2,955	7,349	4,219	14,523	136	98	21	255	5,322	6,625	2,274	14,221	89	121	37	247	52	71	21	144	8,554	14,264	6,572	29,390
	Guadalupe	156	454	137	747	17	52	2	71	1,173	1,958	599	3,730	17	34	3	54	18	43	1	62	1,381	2,541	742	4,664
	Harding	53	217	120	390	1	2	0	3	59	149	91	299	3	0	0	3	-2	1	0	-1	114	369	211	694
	Hidalgo	539	1,018	454	2,011	21		4	34	1,042	1,313	367	2,722	2	9	3	14	12	13	0	25	1,616	2,362	828	4,806
	Lea	8,455	15,228	5,134	28,817	1,060	1,297	286	2,643	16,340	15,917	1,693	33,950	223	298	43	564	112	207	29	348	26,190	32,947	7,185	66,322
	Lincoln	2,475	7,269	3,980	13,724	54	64	8	126	2,326	3,197	681	6,204	183	239	30	452	16	50	7	73	5,054	10,819	4,706	20,579
	Los Alamos	3,575	8,079	2,463	14,117	61	85	10	156	1,128	1,378	249	2,755	43	62	11	116	337	666	73	1,076	5,144	10,270	2,806	18,220
	Luna	1,753	4,132	3,309	9,194	74	133	30	237	6,827	6,993	1,603	15,423	47	80	30	157	25	79	23	127	8,726	11,417	4,995	25,138
	McKinley	2,028	4,559	1,487	8,074	254	271	43	568	4,174	4,609	1,024	9,807	24,225	25,352	4,776	54,353	206	365	53	624	30,887	35,156	7,383	73,426
	Mora	147	494	224	865	5	12	6	23	1,168	2,025	712	3,905	3	11	5	19	3	7	1	11	1,326	2,549	948	4,823
	Otero	9,887	17,712	7,432	35,031	1,044	1,107	255	2,406	9,558	10,740	2,058	22,356	1,750	1,999	238	3,987	355	533	101	989	22,594	32,091	10,084	64,769
	Quay	1,010	2,478	1,318	4,806	46	54	9	109	1,371	1,876	524	3,771	34	36	10	80	24	53	9	86	2,485	4,497	1,870	8,852
	Rio Arriba	858	3,243	1,347	5,448	61	74	16	151	9,942	14,776	4,024	28,742	2,389	2,820	559	5,768	52	86	10	148	13,302	20,999	5,956	40,257
	Roosevelt	4,219	5,326	2,064	11,609	235	115	9	359	4,074	3,702	434	8,210	113	84	18	215	110	68	6	184	8,751	9,295	2,531	20,577
	San Juan	16,771	36,935	12,245	65,951	1,158	1,555	330	3,043	19,792	24,075	3,807	47,674	7,554	7,991	1,501	17,046	717	1,329	190	2,236	45,992	71,885	18,073	135,950
	San Miguel	16,962	29,865	8,782	55,609	479	456	43	978	11,564	11,548	1,533	24,645	20,789	22,401	3,775	46,965	202	360	46	608	49,996	64,630	14,179	128,805
	Sandoval	1,209	3,276	1,396	5,881	255	116	21	392	7,670	11,508	3,243	22,421	138	112	10	260	92	93	21	206	9,364	15,105	4,691	29,160
	Santa Fe	11,042	39,098	15,338	65,478	402	693	114	1,209	27,454	38,802	8,169	74,425	1,389	1,905	315	3,609	515	1,176	146	1,837	40,802	81,674	24,082	146,558
	Sierra	1,259	3,832	3,150	8,241	31	35	17	83	1,202	1,639	531	3,372	41	88	28	157	7	26	22	55	2,540	5,620	3,748	11,908
	Socorro	2,009	3,426	1,341	6,776	105	79	10	194	3,294	4,236	1,107	8,637	859	951	124	1,934	104	111	8	223	6,371	8,803	2,590	17,764
	Taos	2,075	7,330	2,819	12,224	69	95	22	186	6,093	9,578	2,940	18,611	643	991	251	1,885	62	138	16	216	8,942	18,132	6,048	33,122
	Torrance	2,361	5,175	1,669	9,205	84		18	214	2,440	3,188	732	6,360	133	160	32	325	25	46	12	83	5,043	8,681	2,463	16,187
	Union	580	1,400	586	2,566	22	63	1	86	609	980	219	1,808	15	33	3	51	5	15	4	24	1,231	2,491	813	4,535
	Valencia	7,141	15,714	5,644	28,499	326	565	108	999	18,298	22,514	4,357	45,169	888	1,160	224	2,272	134	229	59	422	26,787	40,182	10,392	77,361
Both Se	exes Total	219,774	466,701	178,444	864,919	17,117	21,711	4,001	42,829	397,264	479,561	92,597	969,422	79,880	88,098	15,185	183,163	10,410	17,913	2,779	31,102	724,445	1,073,984	293,006	2,091,435

* 2012 population is reported here because 2012 was the mid-point year for the 2010-2014 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 2

Substance Abuse and Mental Health by Region, Age 12+, 2010-2012

National Survey on Drug Use and Health (NSDUH)

Appendix 2A. Substance Abuse and Mental Health by Region, Age 12+, 2010-2012 (NSDUH)

			Health Region			
	NW	NE	Bernalillo County	SE	SW	New Mexico
ALCOHOL						
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic	48.86	50.79	47.56	45.81	46.73	47.92
Beverage Once or Twice a Week ¹	(44.47 - 53.28)	(45.78 - 55.80)	(43.18 - 51.98)	(41.21 - 50.49)	(42.39 - 51.12)	(45.08 - 50.76)
ILLICIT DRUGS						
Past Month Illicit Drug Use ²	10.80	9.56	13.45	8.03	8.21	10.62
	(8.71 - 13.32)	(7.26 - 12.49)	(11.10 - 16.20)	(6.16 - 10.42)	(6.39 - 10.48)	(9.23 - 12.20)
Past Year Marijuana Use	13.20	12.56	16.96	11.26	11.26	13.70
	(10.97 - 15.80)	(9.87 - 15.86)	(14.38 - 19.89)	(8.97 - 14.03)	(9.16 - 13.78)	(12.15 - 15.42)
Past Month Marijuana Use	8.08	7.75	11.16	6.54	6.82	8.59
·	(6.33 - 10.28)	(5.76 - 10.34)	(9.13 - 13.57)	(4.83 - 8.78)	(5.16 - 8.95)	(7.37 - 9.99)
Past Month Use of Illicit Drugs Other Than Marijuana ³	3.99	3.54	4.45	3.83	3.60	3.98
	(2.90 - 5.47)	(2.42 - 5.14)	(3.28 - 6.02)	(2.75 - 5.32)	(2.59 - 4.98)	(3.19 - 4.95)
Past Year Cocaine Use	1.74	1.90	2.64	1.70	2.10	2.12
	(1.19 - 2.55) 5.23	(1.27 - 2.83) 4.88	(1.89 - 3.68) 6.50	(1.16 - 2.49) 5.05	(1.45 - 3.04) 5.39	(1.60 - 2.81) 5.60
Past Year Nonmedical Pain Reliever Use	(4.05 - 6.74)	(3.58 - 6.62)	(5.14 - 8.19)	(3.81 - 6.66)	(4.09 - 7.07)	(4.70 - 6.66)
	31.24	32.77	27.34	34.90	36.08	31.61
Perception of Great Risk of Smoking Marijuana Once a Month	(27.05 - 35.76)	(27.65 - 38.33)	(23.38 - 31.69)	(30.15 - 39.98)	(31.70 - 40.72)	(28.99 - 34.36)
	2.27	2.03	2.75	2.42	1.90	2.32
Average Annual Marijuana Initiation Rate ⁴	(1.84 - 2.80)	(1.58 - 2.61)	(2.25 - 3.36)	(1.91 - 3.05)	(1.54 - 2.36)	(2.04 - 2.63)
	(1.01 2.00)	(1.00 2.01)	(2.20 0.00)	(1.01 0.00)	(1.01 2.00)	(2.01 2.00)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT						
Illicit Drug Dependence ⁵	2.45	1.52	2.54	2.05	1.79	2.16
	(1.79 - 3.36)	(1.04 - 2.21)	(1.88 - 3.44)	(1.45 - 2.90)	(1.26 - 2.52)	(1.75 - 2.68)
Illicit Drug Dependence or Abuse ⁵	3.3	2.48	3.8	3.02	3.11	3.27
	(2.56 - 4.25)	(1.83 - 3.36)	(2.99 - 4.82)	(2.25 - 4.03)	(2.34 - 4.11)	(2.72 - 3.93)
Alcohol Dependence ⁶	3.29	3.17	4.05	3.17	3.58	3.56
	(2.34 - 4.63)	(2.16 - 4.65)	(2.96 - 5.53)	(2.18 - 4.57)	(2.55 - 5.01)	(2.84 - 4.46)
Alcohol Dependence or Abuse ⁶	6.33	7.12	8.41	6.36	7.33	7.32
	(4.89 - 8.15)	(5.24 - 9.61)	(6.72 - 10.47)	(4.75 - 8.48)	(5.71 - 9.37)	(6.23 - 8.58)
Alcohol or Illicit Drug Dependence or Abuse ⁵	8.59	8.79	11.23	8.50	9.05	9.56
	(6.91 - 10.63)	(6.67 - 11.50)	(9.23 - 13.59)	(6.62 - 10.85)	(7.21 - 11.30)	(8.31 - 10.97)
Needing But Not Receiving Treatment for Illicit Drug Use ⁷	3.01	2.08	3.36	2.75	2.79	2.91
	(2.31 - 3.90)	(1.53 - 2.82)	(2.61 - 4.32) 7.92	(2.06 - 3.68)	(2.15 - 3.62) 7.22	(2.43 - 3.48)
Needing But Not Receiving Treatment for Alcohol Use ⁸	5.70 (4.31 - 7.50)	6.90 (4.97 - 9.51)	(6.16 - 10.13)	6.42 (4.77 - 8.61)	(5.47 - 9.47)	6.99 (5.85, 8.22)
MENTAL HEALTH	(4.31 - 7.30)	(4.97 - 9.51)	(0.10 - 10.13)	(4.77 - 0.01)	(5.47 - 9.47)	(5.85 - 8.32)
among persons aged 12 or older						
	18.51	17.71	18.45	18.97	18.74	18.47
Any mental illness in past year ⁹	(15.47 - 21.99)	(14.32 - 21.71)	(15.48 - 21.84)	(15.68 - 22.78)	(15.68 - 22.24)	(16.37 - 20.78)
	4.48	3.81	4.59	4.43	4.32	4.38
Serious mental illness in past year ¹⁰	(3.17 - 6.28)	(2.55 - 5.64)	(3.30 - 6.35)	(3.09 - 6.32)	(3.04 - 6.11)	(3.50 - 5.46)
	7.70	6.66	7.56	6.82	7.00	7.26
Had at least one major depressive episode in past year ¹¹	(5.70 - 10.32)	(4.77 - 9.23)	(5.63 - 10.09)	(4.97 - 9.28)	(5.18 - 9.40)	(6.02 - 8.72)
	3.98	3.29	3.95	3.87	3.66	3.79
Had serious thoughts of suicide in past year						

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals

* Low precision; no estimate reported

Source: 2008, 2009, and 2010 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2010-2012 (NSDUH)

				Health Region			<u> </u>
	AGE GROUP	NW	NE	Bernalillo County	SE	sw	New Mexico
ALCOHOL							
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week ¹	Age 12-17	41.60 (36.89 - 46.45)	40.99 (35.63 - 46.58)	38.59 (33.99 - 43.39)	39.48 (34.57 - 44.60)	39.42 (34.81 - 44.22)	39.89 (36.90 - 42.95)
	Age 18-25	43.46 (38.30 - 48.77)	42.52 (36.60 - 48.68)	36.06 (31.43 - 40.95)	37.63 (32.36 - 43.22)	37.59 (32.59 - 42.87)	38.83 (35.88 - 41.87)
	Age 26+	50.90	52.94	50.67	48.30	49.51	50.55
	Age 18+	(45.55 - 56.23) 49.80	(47.09 - 58.71) 51.74	(45.31 - 56.02) 48.48	(42.59 - 54.05) 46.59	(44.17 - 54.87) 47.55	(47.04 - 54.05) 48.81
ILLICIT DRUGS	-	(45.00 - 54.61)	(46.37 - 57.07)	(43.75 - 53.24)	(41.56 - 51.69)	(42.84 - 52.31)	(45.73 - 51.91)
Past Month Illicit Drug Use ²	Age 12-17	13.00	13.58	15.38	11.77	10.12	13.05
-	Age 18-25	(10.12 - 16.54) 23.70	(10.30 - 17.70)	(12.01 - 19.48) 32.22	(8.71 - 15.71) *	(7.61 - 13.33) 18.87	(11.15 - 15.22) 24.61
	Age 26+	(18.80 - 29.42) 8.25	(* - *) 7.33	(27.12 - 37.78) 9.92	(* - *) 5.66	(14.37 - 24.39) 5.86	(21.79 - 27.67) 7.87
	Age 18+	(6.07 - 11.12) 10.52	(5.08 - 10.48) 9.17	(7.45 - 13.08) 13.25	(3.95 - 8.04) 7.58	(4.11 - 8.27) 7.99	(6.31 - 9.78) 10.35
	•	(8.30 - 13.24)	(6.79 - 12.27)	(10.79 - 16.18)	(5.65 - 10.10)	(6.09 - 10.42)	(8.86 - 12.06)
Past Year Marijuana Use	Age 12-17	18.97 (15.34 - 23.23)	20.44 (15.92 - 25.85)	23.33 (19.08 - 28.20)	17.82 (13.88 - 22.58)	15.41 (12.13 - 19.38)	19.61 (17.23 - 22.22)
	Age 18-25	30.29 (25.25 - 35.85)	* (* - *)	40.17 (34.83 - 45.76)	25.28 (20.14 - 31.23)	26.70 (21.77 - 32.28)	32.16 (29.18 - 35.30)
	Age 26+	9.38	9.34	12.11	7.63	7.67	9.72
	Age 18+	(7.05 - 12.38) 12.45	(6.69 - 12.90) 11.80	(9.40 - 15.47) 16.31	(5.49 - 10.51) 10.45	(5.63 - 10.37) 10.80	(7.98 - 11.80) 13.04
Dard Marsh Marijuana Lina	Age 12-17	(10.11 - 15.25) 10.03	(9.05 - 15.24) 10.47	(13.61 - 19.42) 11.84	(8.13 - 13.34) 8.60	(8.61 - 13.46) 7.34	(11.39 - 14.90) 9.90
Past Month Marijuana Use	Age 18-25	(7.56 - 13.21) 19.39	(7.59 - 14.27)	(8.97 - 15.47) 28.29	(6.22 - 11.78) 14.97	(5.32 - 10.05) 16.97	(8.21 - 11.90) 21.39
	•	(15.25 - 24.34)	(* - *)	(23.66 - 33.43)	(10.95 - 20.12)	(12.84 - 22.08)	(18.86 - 24.16)
	Age 26+	5.84 (4.08 - 8.31)	5.74 (3.86 - 8.45)	8.06 (5.96 - 10.83)	4.63 (3.03 - 7.01)	4.75 (3.21 - 6.98)	6.19 (4.85 - 7.87)
	Age 18+	7.83 (5.97 - 10.22)	7.48 (5.44 - 10.21)	11.09 (8.94 - 13.67)	6.28 (4.51 - 8.70)	6.76 (5.01 - 9.05)	8.44 (7.13 - 9.97)
Past Month Use of Illicit Drugs Other Than Marijuana ³	Age 12-17	5.40	5.70	6.61	6.04	5.12	5.83
	Age 18-25	(3.77 - 7.68) 6.93	(3.92 - 8.21) 5.86	(4.64 - 9.33) 7.57	(4.15 - 8.72) 6.61	(3.56 - 7.32) 6.43	(4.58 - 7.40) 6.87
	Age 26+	(4.90 - 9.70) 3.28	(3.91 - 8.70) 2.99	(5.50 - 10.33) 3.64	(4.55 - 9.49) 2.98	(4.41 - 9.29) 2.84	(5.55 - 8.47) 3.23
	·	(2.11 - 5.06) 3.81	(1.83 - 4.87) 3.33	(2.38 - 5.54) 4.23	(1.87 - 4.73) 3.56	(1.80 - 4.44) 3.43	(2.37 - 4.40) 3.77
	Age 18+	(2.66 - 5.45)	(2.17 - 5.07)	(3.00 - 5.93)	(2.43 - 5.18)	(2.37 - 4.93)	(2.95 - 4.81)
Past Year Cocaine Use	Age 12-17	1.11 (0.60 - 2.05)	1.22 (0.67 - 2.23)	1.61 (0.89 - 2.89)	1.24 (0.67 - 2.27)	1.47 (0.83 - 2.56)	1.36 (0.93 - 2.00)
	Age 18-25	4.33 (2.78 - 6.66)	6.50 (4.09 - 10.19)	7.23 (5.12 - 10.13)	4.36 (2.72 - 6.91)	5.58 (3.61 - 8.54)	5.82 (4.55 - 7.42)
	Age 26+	1.39	1.38	1.96	1.26	1.51	1.58
	Age 18+	(0.83 - 2.32) 1.82	(0.80 - 2.35) 1.96	(1.19 - 3.21) 2.75	(0.77 - 2.07) 1.76	(0.90 - 2.52) 2.18	(1.04 - 2.40) 2.21
	Age 12-17	(1.22 - 2.71) 8.57	(1.30 - 2.97) 7.81	(1.94 - 3.88) 11.09	(1.18 - 2.60) 7.79	(1.48 - 3.18) 7.82	(1.64 - 2.96) 8.98
Past Year Nonmedical Pain Reliever Use	Age 18-25	(6.24 - 11.67)	(5.53 - 10.92) 9.44	(8.22 - 14.81) 13.31	(5.53 - 10.87) 9.29	(5.68 - 10.68) 10.05	(7.32 - 10.97) 11.21
	0	11.32 (8.52 - 14.88)	(6.71 - 13.10)	(10.40 - 16.88)	(6.71 - 12.71)	(7.37 - 13.58)	(9.41 - 13.30)
	Age 26+	3.68 (2.49 - 5.42)	3.97 (2.65 - 5.91)	4.75 (3.35 - 6.70)	3.84 (2.60 - 5.65)	4.15 (2.83 - 6.04)	4.19 (3.22 - 5.42)
	Age 18+	4.80 (3.57 - 6.43)	4.60 (3.26 - 6.45)	6.03 (4.63 - 7.82)	4.71 (3.44 - 6.43)	5.12 (3.77 - 6.90)	5.23 (4.28 - 6.36)
Perception of Great Risk of Smoking Marijuana Once a Month	Age 12-17	23.76	24.65	20.41	28.10	29.37	24.58
	Age 18-25	(19.58 - 28.50) 18.14	(19.68 - 30.40) 18.41	(16.63 - 24.80) 12.82	(23.06 - 33.77) 22.01	(24.74 - 34.48) 20.27	(21.93 - 27.43) 17.39
	Age 26+	(14.68 - 22.21) 34.66	(14.23 - 23.48) 35.53	(10.01 - 16.27) 30.76	(17.55 - 27.22) 38.38	(16.39 - 24.80) 40.12	(15.36 - 19.63) 35.03
	_	(29.50 - 40.22)	(29.59 - 41.96)	(25.94 - 36.04)	(32.59 - 44.53)	(34.70 - 45.80)	(31.76 - 38.46)
	Age 18+	32.21 (27.66 - 37.13)	33.55 (28.13 - 39.45)	28.05 (23.82 - 32.72)	35.74 (30.61 - 41.22)	36.84 (32.13 - 41.82)	32.40 (29.54 - 35.40)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals * Low precision; no estimate reported

Source: 2010, 2011, and 2012 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies New Mexico Substance Abuse Epidemiology Profile

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2010-2012 (NSDUH)

				Health Region]
	AGE GROUP	NW	NE	Bernalillo County	SE	sw	New Mexico
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT							
Illicit Drug Dependence ⁵	Age 12-17	4.11	3.09	4.42	3.09	2.95	3.70
mich Drug Dependence		(2.65 - 6.31)	(1.87 - 5.05)	(2.89 - 6.69)	(1.92 - 4.95)	(1.86 - 4.66)	(2.80 - 4.89)
	Age 18-25	7.20	4.84	6.63	5.37	4.58	5.92
	A	(4.88 - 10.50)	(3.05 - 7.60) 0.92	(4.61 - 9.43) 1.60	(3.50 - 8.14) 1.27	(2.95 - 7.03) 1.08	(4.61 - 7.57) 1.31
	Age 26+	1.38 (0.84 - 2.26)	(0.54 - 1.55)	(1.01 - 2.53)	(0.78 - 2.06)	(0.66 - 1.77)	(0.93 - 1.85)
	Age 18+	2.24	1.37	2.35	1.93	1.66	1.99
		(1.58 - 3.15)	(0.92 - 2.04)	(1.69 - 3.27)	(1.33 - 2.78)	(1.14 - 2.41)	(1.57 - 2.53)
Illicit Drug Dependence or Abuse ⁵	Age 12-17	7.07	6.25	8.49	5.54	6.18	7.00
linch Drug Dependence of Abuse		(4.91 - 10.07)	(4.21 - 9.18)	(6.02 - 11.84)	(3.70 - 8.21)	(4.33 - 8.73)	(5.61 - 8.70)
	Age 18-25	9.69	6.79	9.48	6.80	7.21	8.36
		(6.92 - 13.41)	(4.57 - 9.97)	(7.05 - 12.64)	(4.62 - 9.89)	(4.98 - 10.33)	(6.72 - 10.34)
	Age 26+	1.63 (1.04 - 2.55)	1.51 (0.93 - 2.44)	2.23 (1.45 - 3.43)	1.93 (1.23 - 3.01)	1.89 (1.20 - 2.96)	1.90 (1.36 - 2.64)
	Age 18+	2.82	2.12	3.32	2.71	2.76	2.85
	Ago Ioi	(2.10 - 3.76)	(1.48 - 3.01)	(2.51 - 4.37)	(1.95 - 3.75)	(2.00 - 3.80)	(2.29 - 3.55)
Al al D	Age 12-17	1.59	1.72	1.87	1.66	1.76	1.73
Alcohol Dependence ⁶	U	(1.06 - 2.38)	(1.11 - 2.65)	(1.23 - 2.84)	(1.05 - 2.61)	(1.15 - 2.68)	(1.29 - 2.33)
	Age 18-25	7.59	5.95	8.25	6.01	7.14	7.31
		(5.30 - 10.76)	(3.81 - 9.18)	(5.97 - 11.30)	(4.01 - 8.91)	(4.92 - 10.26)	(5.84 - 9.12)
	Age 26+	2.81	2.97	3.58	2.85	3.13	3.15
	A == 10 ·	(1.78 - 4.42) 3.52	(1.88 - 4.67) 3.31	(2.38 - 5.35) 4.28	(1.78 - 4.53) 3.35	(2.02 - 4.83) 3.79	(2.33 - 4.26) 3.77
	Age 18+	(2.46 - 5.00)	(2.22 - 4.91)	4.28 (3.10 - 5.89)	3.35 (2.28 - 4.90)	(2.67 - 5.36)	(2.98 - 4.76)
	Age 12-17	4.00	4.36	5.17	4.18	4.49	4.52
Alcohol Dependence or Abuse ⁶	/.go	(2.73 - 5.83)	(2.92 - 6.48)	(3.57 - 7.43)	(2.76 - 6.28)	(3.13 - 6.42)	(3.52 - 5.80)
	Age 18-25	14.74	15.50	17.98	13.57	16.75	16.18
		(11.47 - 18.76)	(11.74 - 20.18)	(14.62 - 21.92)	(10.25 - 17.75)	(13.13 - 21.13)	(14.02 - 18.60)
	Age 26+	5.23	6.34	7.11	5.31	5.87	6.15
	1 10	(3.71 - 7.32)	(4.36 - 9.14)	(5.29 - 9.50)	(3.65 - 7.68)	(4.19 - 8.17)	(4.93 - 7.65)
	Age 18+	6.63	7.39 (5.37 - 10.09)	8.74	6.63	7.65	7.64 (6.44 - 9.02)
	Age 12-17	(5.06 - 8.65) 8.86	8.60	(6.93 - 10.97) 11.53	(4.88 - 8.96) 7.92	(5.90 - 9.88) 9.24	9.58
Alcohol or Illicit Drug Dependence or Abuse ⁵	Age 12-17	(6.46 - 12.04)	(6.02 - 12.15)	(8.63 - 15.25)	(5.63 - 11.02)	(6.81 - 12.42)	(7.97 - 11.47)
	Age 18-25	21.41	18.31	23.84	16.79	18.78	20.66
	3	(17.35 - 26.11)	(14.13 - 23.40)	(19.92 - 28.27)	(13.03 - 21.37)	(14.93 - 23.35)	(18.23 - 23.32)
	Age 26+	6.34	7.58	8.97	7.01	7.12	7.62
		(4.64 - 8.61)	(5.35 - 10.63)	(6.80 - 11.76)	(5.02 - 9.71)	(5.20 - 9.68)	(6.20 - 9.34)
	Age 18+	8.55	8.81	11.20	8.57	9.03	9.55
	Age 12-17	(6.79 - 10.72) 6.45	(6.59 - 11.68) 5.23	(9.09 - 13.72) 8.08	(6.58 - 11.10) 5.30	(7.09 - 11.43) 5.87	(8.21 - 11.09) 6.51
Needing But Not Receiving Treatment for Illicit Drug Use ⁷	Age 12-17	(4.35 - 9.46)	(3.33 - 8.13)	(5.61 - 11.51)	(3.45 - 8.05)	(4.01 - 8.51)	(5.13 - 8.24)
	Age 18-25	9.44	6.72	8.92	7.01	7.35	8.17
	· .g- ·	(6.77 - 13.03)	(4.49 - 9.95)	(6.54 - 12.05)	(4.87 - 10.00)	(5.13 - 10.42)	(6.55 - 10.15)
	Age 26+	1.38	1.13	1.81	1.57	1.49	1.53
		(0.84 - 2.25)	(0.70 - 1.83)	(1.14 - 2.88)	(0.97 - 2.54)	(0.93 - 2.36)	(1.09 - 2.13)
	Age 18+	2.56	1.77	2.88	2.44	2.45	2.51
	A == 40, 17	(1.91 - 3.43)	(1.27 - 2.48)	(2.15 - 3.84)	(1.76 - 3.37)	(1.82 - 3.28)	(2.04 - 3.09)
Needing But Not Receiving Treatment for Alcohol Use ⁸	Age 12-17	3.78 (2.60 - 5.46)	4.23 (2.84 - 6.25)	4.81 (3.30 - 6.96)	4.05 (2.70 - 6.03)	4.36 (2.98 - 6.35)	4.30 (3.34 - 5.52)
	Age 18-25	(2.60 - 5.46)	(2.64 - 6.25)	16.84	13.27	(2.96 - 6.35)	(3.34 - 5.52) 15.16
	. igo 10-20	(10.50 - 17.38)	(11.08 - 19.42)	(13.56 - 20.73)	(10.11 - 17.23)	(12.00 - 19.60)	(13.07 - 17.51)
	Age 26+	4.64	6.18	6.72	5.47	6.00	5.92
		(3.18 - 6.73)	(4.13 - 9.14)	(4.81 - 9.32)	(3.72 - 7.98)	(4.14 - 8.62)	(4.65 - 7.52)
	Age 18+	5.95	7.16	8.24	6.72	7.54	7.29
		(4.44 - 7.94)	(5.09 - 9.99)	(6.34 - 10.64)	(4.92 - 9.10)	(5.65 - 10.00)	(6.05 - 8.75)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals * Low precision; no estimate reported

Source: 2010, 2011, and 2012 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2010-2012 (NSDUH)

				Health Region			
	AGE GROUP	NW	NE	Bernalillo County	SE	sw	New Mexico
MENTAL HEALTH							
Any mental illness in past year ⁹	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	19.83 (16.49 - 23.66)	18.24 (14.78 - 22.29)	20.56 (17.40 - 24.12)	17.85 (14.62 - 21.63)	19.44 (16.23 - 23.12)	19.54 (17.49 - 21.76)
	Age 26+	18.28 (14.89 - 22.24)	17.64 (13.93 - 22.08)	18.08 (14.75 - 21.96)	19.19 (15.45 - 23.58)	18.60 (15.14 - 22.65)	18.29 (15.90 - 20.95)
	Age 18+	18.51 (15.47 - 21.99)	17.71 (14.32 - 21.71)	18.45 (15.48 - 21.84)	18.97 (15.68 - 22.78)	18.74 (15.68 - 22.24)	18.47 (16.37 - 20.78)
Serious mental illness in past year ¹⁰	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	4.14 (2.95 - 5.78)	3.57 (2.44 - 5.19)	4.05 (2.93 - 5.57)	3.87 (2.68 - 5.55)	4.04 (2.88 - 5.65)	3.99 (3.21 - 4.95)
	Age 26+	4.53 (3.09 - 6.60)	3.84 (2.49 - 5.87)	4.69 (3.25 - 6.70)	4.54 (3.05 - 6.70)	4.38 (2.95 - 6.46)	4.45 (3.46 - 5.69)
	Age 18+	4.48 (3.17 - 6.28)	3.81 (2.55 - 5.64)	4.59 (3.30 - 6.35)	4.43 (3.09 - 6.32)	4.32 (3.04 - 6.11)	4.38 (3.50 - 5.46)
Had at least one major depressive episode in past year ¹¹	Age 12-17	10.02 (7.69 - 12.95)	10.26 (7.74 - 13.49)	12.21 (9.53 - 15.51)	10.79 (8.21 - 14.07)	10.35 (7.97 - 13.35)	10.88 (9.22 - 12.80)
	Age 18-25	9.16 (6.92 - 12.03)	8.21 (6.09 - 10.98)	9.12 (7.02 - 11.77)	8.29 (6.15 - 11.10)	8.75 (6.64 - 11.44)	8.83 (7.39 - 10.52)
	Age 26+	7.45 (5.27 - 10.43)	6.46 (4.45 - 9.28)	7.29 (5.19 - 10.15)	6.54 (4.54 - 9.33)	6.66 (4.67 - 9.41)	6.98 (5.61 - 8.66)
	Age 18+	7.70 (5.70 - 10.32)	6.66 (4.77 - 9.23)	7.56 (5.63 - 10.09)	6.82 (4.97 - 9.28)	7.00 (5.18 - 9.40)	7.26 (6.02 - 8.72)
Had serious thoughts of suicide in past year	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	7.42 (5.64 - 9.70)	6.63 (4.87 - 8.97)	7.41 (5.69 - 9.62)	6.78 (5.07 - 9.02)	7.00 (5.26 - 9.26)	7.15 (5.94 - 8.58)
	Age 26+	3.39 (2.31 - 4.96)	2.86 (1.90 - 4.29)	3.34 (2.32 - 4.80)	3.32 (2.26 - 4.86)	3.01 (2.02 - 4.46)	3.21 (2.44 - 4.21)
	Age 18+	3.98 (2.95 - 5.35)	3.29 (2.36 - 4.57)	3.95 (2.98 - 5.23)	3.87 (2.88 - 5.19)	3.66 (2.72 - 4.91)	3.79 (3.08 - 4.66)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals * Low precision; no estimate reported

Source: 2010, 2011, and 2012 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3

Substance Abuse and Mental Health by State, Age 12+, 2012-2013

National Survey on Drug Use and Health (NSDUH)

Appendix 3A. Substance Abuse and Mental Health, Age 12+, 2012-2013 (NSDUH)

	1	1					
	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
ALCOHOL							
	Age 12-17	12.23%	13.92%	12.45%	11.65%	11.75%	11.91%
	-	(11.82% - 12.65%) 59.91%	(13.14% - 14.74%) 64.59%	(11.85% - 13.06%) 63.79%	(11.09% - 12.23%) 56.82%	(10.97% - 12.57%) 57.80%	(9.98% - 14.15%) 56.43%
	Age 18-25	(59.19% - 60.64%)			(55.88% - 57.75%)	(56.56% - 59.03%)	(52.53% - 60.25%)
Past Month Alcohol Use	Age 26+	55.73%	61.61%	59.11%	51.42%	54.83%	54.20%
	Age 201	(55.01% - 56.43%)		(58.09% - 60.12%)	(50.43% - 52.41%)	(53.50% - 56.16%)	(49.93% - 58.41%)
	Age 18+	56.34% (55.71% - 56.97%)	62.03% (60.89% - 63.17%)	59.79% (58.90% - 60.67%)	52.21% (51.34% - 53.07%)	55.28% (54.13% - 56.44%)	54.53% (50.75% - 58.26%)
	4 40 47	6.73%	7.41%	6.89%	6.44%	6.58%	6.92%
	Age 12-17	(6.44% - 7.04%)	(6.84% - 8.01%)	(6.47% - 7.32%)	(6.03% - 6.88%)	(6.03% - 7.17%)	(5.55% - 8.60%)
	Age 18-25	38.70%	43.00%	43.09%	35.36%	36.78%	38.50%
Past Month Binge Alcohol Use	3	(37.95% - 39.46%) 22.21%	(41.68% - 44.34%) 23.13%	(42.05% - 44.14%) 24.88%	(34.36% - 36.37%) 20.94%	(35.44% - 38.13%) 21.03%	(34.75% - 42.38%) 24.23%
	Age 26+	(21.68% - 22.74%)	(22.11% - 24.18%)	(24.02% - 25.75%)	(20.18% - 21.71%)	(20.00% - 22.11%)	(21.02% - 27.76%)
	Age 18+	24.63%	25.97%	27.53%	23.04%	23.42%	26.35%
	Aye To+	(24.15% - 25.11%)		(26.76% - 28.31%)	(22.36% - 23.74%)	(22.49% - 24.38%)	(23.43% - 29.49%)
	Age 12-17	39.35%	38.54%	36.85%	41.39%	38.99%	37.38%
		(38.72% - 39.98%) 33.83%	(37.42% - 39.66%) 31.50%	(35.92% - 37.78%) 29.49%	(40.48% - 42.32%) 36.53%	(37.72% - 40.27%) 35.24%	(33.85% - 41.06%) 39.23%
Perceptions of Great Risk of Having Five or More Drinks of	Age 18-25	(33.19% - 34.47%)			(35.65% - 37.42%)	(33.98% - 36.53%)	(35.64% - 42.95%)
an Alcoholic Beverage Once or Twice a Week ¹	Age 26+	43.52%	42.04%	38.87%	45.39%	46.02%	47.57%
	Age 20+	(42.89% - 44.16%)	(40.80% - 43.30%)	(37.89% - 39.86%)	(44.38% - 46.39%)	(44.64% - 47.40%)	(43.81% - 51.37%)
	Age 18+	42.09%	40.53%	37.50%	44.09%	44.38%	46.33% (43.00% - 49.69%)
ILLICIT DRUGS		(41.54% - 42.65%)	(39.44% - 41.63%)	(36.64% - 38.37%)	(43.22% - 44.96%)	(43.19% - 45.57%)	(43.00% - 49.69%)
	4	9.18%	9.31%	8.86%	8.51%	10.42%	12.36%
	Age 12-17	(8.84% - 9.54%)	(8.70% - 9.96%)	(8.37% - 9.38%)	(8.03% - 9.02%)	(9.67% - 11.22%)	(10.15% - 14.98%)
	Age 18-25	21.44%	23.57%	20.90%	19.04%	24.02%	22.21%
Past Month Illicit Drug Use ²		(20.88% - 22.01%)		(20.12% - 21.70%)	(18.29% - 19.81%)	(22.86% - 25.22%)	(19.09% - 25.66%)
5	Age 26+	7.19% (6.88% - 7.51%)	7.28% (6.70% - 7.91%)	6.78% (6.33% - 7.25%)	6.05% (5.64% - 6.48%)	9.33% (8.60% - 10.12%)	8.41% (6.55% - 10.73%)
	A == 40.	9.28%	9.61%	8.83%	7.95%	11.56%	10.46%
	Age 18+	(8.99% - 9.58%)	(9.06% - 10.19%)	(8.42% - 9.27%)	(7.56% - 8.35%)	(10.90% - 12.26%)	(8.67% - 12.56%)
	Age 12-17	13.47%	14.29%	13.10%	12.37%	14.93%	18.38%
		(13.06% - 13.89%)	(13.50% - 15.11%) 35.32%	(12.48% - 13.76%) 31.29%	(11.76% - 13.00%) 28.44%	(13.99% - 15.92%)	(15.66% - 21.45%)
	Age 18-25	31.55% (30.85% - 32.26%)	(34.08% - 36.57%)	(30.36% - 32.24%)	28.44% (27.58% - 29.31%)	33.77% (32.49% - 35.07%)	32.06% (28.67% - 35.65%)
Past Year Marijuana Use		8.89%	9.50%	8.58%	7.39%	11.11%	11.72%
	Age 26+	(8.56% - 9.24%)	(8.81% - 10.24%)	(8.05% - 9.15%)	(6.90% - 7.92%)	(10.30% - 11.98%)	(9.34% - 14.60%)
	Age 18+	12.22%	13.19%	11.89%	10.47%	14.55%	14.73%
	J ¹	(11.89% - 12.55%) 7.15%	(12.54% - 13.87%) 7.67%	(11.40% - 12.41%) 6.95%	(10.00% - 10.96%) 6.31%	(13.80% - 15.33%) 8.26%	(12.51% - 17.27%) 9.22%
	Age 12-17	(6.85% - 7.46%)	(7.11% - 8.28%)	(6.55% - 7.38%)	(5.90% - 6.75%)	0.20% (7.62% - 8.96%)	9.22% (7.46% - 11.35%)
	A == 40.05	18.91%	20.96%	18.74%	16.40%	21.42%	19.33%
Past Month Marijuana Use	Age 18-25	(18.37% - 19.47%)		(18.01% - 19.51%)	(15.69% - 17.13%)	(20.31% - 22.57%)	(16.53% - 22.48%)
	Age 26+	5.45%	5.68%	5.12%	4.35%	7.34%	7.23%
		(5.18% - 5.73%) 7.43%	(5.15% - 6.26%) 7.86%	(4.72% - 5.55%) 7.10%	<u>(3.99% - 4.75%)</u> 6.11%	(6.70% - 8.04%) 9.48%	(5.51% - 9.42%) 9.02%
	Age 18+	(7.17% - 7.69%)	(7.36% - 8.39%)	(6.72% - 7.50%)	(5.77% - 6.48%)	9.46% (8.88% - 10.11%)	9.02% (7.38% - 10.99%)
	A == 40.47	3.36%	2.84%	3.19%	3.54%	3.61%	4.26%
	Age 12-17	(3.14% - 3.60%)	(2.50% - 3.23%)	(2.90% - 3.50%)	(3.23% - 3.88%)	(3.21% - 4.06%)	(3.16% - 5.72%)
	Age 18-25	6.88%	7.03%	6.70%	6.81%	7.03%	6.01%
Past Month Use of Illicit Drugs Other Than Marijuana ³		(6.55% - 7.22%) 2.75%	(6.46% - 7.65%) 2.43%	(6.24% - 7.18%) 2.50%	(6.36% - 7.29%) 2.74%	(6.41% - 7.71%) 3.26%	(4.65% - 7.73%) 3.27%
	Age 26+	(2.56% - 2.96%)	(2.13% - 2.78%)	(2.24% - 2.78%)	(2.47% - 3.04%)	(2.86% - 3.73%)	(2.23% - 4.79%)
	Ago 18:	3.36%	3.09%	3.11%	3.33%	3.84%	3.68%
	Age 18+	(3.18% - 3.54%)	(2.80% - 3.41%)	(2.87% - 3.36%)	(3.09% - 3.60%)	(3.46% - 4.25%)	(2.71% - 4.99%)
	Age 12-17	0.63%	0.60%	0.47%	0.62%	0.79%	0.95%
		(.54%73%) 4.53%	(.47%77%) 5.26%	(.36%62%) 3.51%	(.50%76%) 3.89%	(.61% - 1.02%) 5.88%	(.54% - 1.67%) 5.32%
	Age 18-25	4.53% (4.23% - 4.85%)	5.26% (4.75% - 5.83%)	(3.17% - 3.89%)	3.89% (3.55% - 4.25%)	5.88% (5.25% - 6.57%)	5.32% (3.92% - 7.17%)
Past Year Cocaine Use	A ma 26 (1.34%	1.53%	1.15%	1.28%	1.47%	1.73%
	Age 26+	(1.22% - 1.47%)	(1.28% - 1.81%)	(.96% - 1.36%)	(1.10% - 1.48%)	(1.21% - 1.77%)	(1.09% - 2.72%)
	Age 18+	1.81%	2.06%	1.49%	1.66%	2.14%	2.26%
	3	(1.69% - 1.93%)	(1.83% - 2.32%)	(1.32% - 1.69%)	(1.49% - 1.84%)	(1.89% - 2.42%)	(1.61% - 3.16%)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals * Low precision; no estimate reported New Mexico Substance Abuse Epidemiology Profile

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Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2013 (NSDUH)

	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
	AGE GROOT	101AL 0.0.	NORTHEADT			11201	
ALCOHOL		12.23%	13.92%	12.45%	11.65%	11.75%	11.91%
	Age 12-17	(11.82% - 12.65%)	(13.14% - 14.74%)	(11.85% - 13.06%)	(11.09% - 12.23%)	(10.97% - 12.57%)	(9.98% - 14.15%)
	Age 18-25	59.91% (59.19% - 60.64%)	64.59% (63.32% - 65.85%)	63.79% (62.84% - 64.72%)	56.82% (55.88% - 57.75%)	57.80% (56.56% - 59.03%)	56.43% (52.53% - 60.25%)
Past Month Alcohol Use	Age 26+	55.73%	61.61%	59.11%	51.42%	54.83%	54.20%
	-	(55.01% - 56.43%) 56.34%	(60.31% - 62.89%) 62.03%	(58.09% - 60.12%) 59.79%	(50.43% - 52.41%) 52.21%	(53.50% - 56.16%) 55.28%	(49.93% - 58.41%) 54.53%
	Age 18+	(55.71% - 56.97%) 6.73%	(60.89% - 63.17%) 7.41%	(58.90% - 60.67%) 6.89%	(51.34% - 53.07%) 6.44%	(54.13% - 56.44%) 6.58%	(50.75% - 58.26%) 6.92%
	Age 12-17	(6.44% - 7.04%)	(6.84% - 8.01%)	(6.47% - 7.32%)	(6.03% - 6.88%)	(6.03% - 7.17%)	(5.55% - 8.60%)
	Age 18-25	38.70% (37.95% - 39.46%)	43.00% (41.68% - 44.34%)	43.09% (42.05% - 44.14%)	35.36% (34.36% - 36.37%)	36.78% (35.44% - 38.13%)	38.50% (34.75% - 42.38%)
Past Month Binge Alcohol Use	Age 26+	22.21%	23.13%	24.88%	20.94%	21.03%	24.23%
	Age 18+	(21.68% - 22.74%) 24.63%	(22.11% - 24.18%) 25.97%	(24.02% - 25.75%) 27.53%	(20.18% - 21.71%) 23.04%	(20.00% - 22.11%) 23.42%	(21.02% - 27.76%) 26.35%
	-	(24.15% - 25.11%) 39.35%	(25.05% - 26.91%) 38.54%	(26.76% - 28.31%) 36.85%	(22.36% - 23.74%) 41.39%	(22.49% - 24.38%) 38.99%	(23.43% - 29.49%) 37.38%
	Age 12-17	(38.72% - 39.98%)	(37.42% - 39.66%)	(35.92% - 37.78%)	(40.48% - 42.32%)	(37.72% - 40.27%)	(33.85% - 41.06%)
Perceptions of Great Risk of Having Five or More Drinks of	Age 18-25	33.83% (33.19% - 34.47%)	31.50% (30.38% - 32.65%)	29.49% (28.62% - 30.37%)	36.53% (35.65% - 37.42%)	35.24% (33.98% - 36.53%)	39.23% (35.64% - 42.95%)
an Alcoholic Beverage Once or Twice a Week ¹	Age 26+	43.52% (42.89% - 44.16%)	42.04% (40.80% - 43.30%)	38.87% (37.89% - 39.86%)	45.39% (44.38% - 46.39%)	46.02%	47.57%
	Age 18+	42.09%	40.53%	37.50%	44.09%	(44.64% - 47.40%) 44.38%	(43.81% - 51.37%) 46.33%
ILLICIT DRUGS	, go ioi	(41.54% - 42.65%)	(39.44% - 41.63%)	(36.64% - 38.37%)	(43.22% - 44.96%)	(43.19% - 45.57%)	(43.00% - 49.69%)
	Age 12-17	9.18%	9.31%	8.86%	8.51%	10.42%	12.36%
	Age 18-25	(8.84% - 9.54%) 21.44%	(8.70% - 9.96%) 23.57%	(8.37% - 9.38%) 20.90%	(8.03% - 9.02%) 19.04%	(9.67% - 11.22%) 24.02%	(10.15% - 14.98%) 22.21%
Past Month Illicit Drug Use ²	Age 10 20	(20.88% - 22.01%)	(22.54% - 24.63%)	(20.12% - 21.70%)	(18.29% - 19.81%)	(22.86% - 25.22%)	(19.09% - 25.66%)
, i i i i i i i i i i i i i i i i i i i	Age 26+	7.19% (6.88% - 7.51%)	7.28% (6.70% - 7.91%)	6.78% (6.33% - 7.25%)	6.05% (5.64% - 6.48%)	9.33% (8.60% - 10.12%)	8.41% (6.55% - 10.73%)
	Age 18+	9.28%	9.61%	8.83%	7.95%	11.56%	10.46%
	Age 12-17	(8.99% - 9.58%) 13.47%	(9.06% - 10.19%) 14.29%	(8.42% - 9.27%) 13.10%	(7.56% - 8.35%) 12.37%	(10.90% - 12.26%) 14.93%	(8.67% - 12.56%) 18.38%
	-	(13.06% - 13.89%) 31.55%	(13.50% - 15.11%) 35.32%	(12.48% - 13.76%) 31.29%	(11.76% - 13.00%) 28.44%	(13.99% - 15.92%) 33.77%	(15.66% - 21.45%) 32.06%
	Age 18-25	(30.85% - 32.26%)	(34.08% - 36.57%)	(30.36% - 32.24%)	(27.58% - 29.31%)	(32.49% - 35.07%)	(28.67% - 35.65%)
Past Year Marijuana Use	Age 26+	8.89% (8.56% - 9.24%)	9.50% (8.81% - 10.24%)	8.58% (8.05% - 9.15%)	7.39% (6.90% - 7.92%)	11.11% (10.30% - 11.98%)	11.72% (9.34% - 14.60%)
	Ago 191	12.22%	13.19%	11.89%	10.47%	14.55%	14.73%
	Age 18+	(11.89% - 12.55%)	(12.54% - 13.87%)	(11.40% - 12.41%)	(10.00% - 10.96%)	(13.80% - 15.33%)	(12.51% - 17.27%)
	Age 12-17	7.15% (6.85% - 7.46%)	7.67% (7.11% - 8.28%)	6.95% (6.55% - 7.38%)	6.31% (5.90% - 6.75%)	8.26% (7.62% - 8.96%)	9.22% (7.46% - 11.35%)
	Age 18-25	18.91%	20.96%	18.74%	16.40%	21.42%	19.33%
Past Month Marijuana Use	Age 26+	(18.37% - 19.47%) 5.45%	(19.99% - 21.95%) 5.68%	(18.01% - 19.51%) 5.12%	(15.69% - 17.13%) 4.35%	(20.31% - 22.57%) 7.34%	(16.53% - 22.48%) 7.23%
	-	(5.18% - 5.73%) 7.43%	(5.15% - 6.26%) 7.86%	(4.72% - 5.55%) 7.10%	(3.99% - 4.75%) 6.11%	(6.70% - 8.04%) 9.48%	(5.51% - 9.42%) 9.02%
	Age 18+	(7.17% - 7.69%)	(7.36% - 8.39%)	(6.72% - 7.50%)	(5.77% - 6.48%)	(8.88% - 10.11%)	(7.38% - 10.99%)
	Age 12-17	3.36% (3.14% - 3.60%)	2.84% (2.50% - 3.23%)	3.19% (2.90% - 3.50%)	3.54% (3.23% - 3.88%)	3.61% (3.21% - 4.06%)	4.26% (3.16% - 5.72%)
	Age 18-25	6.88% (6.55% - 7.22%)	7.03% (6.46% - 7.65%)	6.70% (6.24% - 7.18%)	6.81% (6.36% - 7.29%)	7.03% (6.41% - 7.71%)	6.01% (4.65% - 7.73%)
Past Month Use of Illicit Drugs Other Than Marijuana ³	Age 26+	2.75%	2.43%	2.50%	2.74%	3.26%	3.27%
	-	(2.56% - 2.96%) 3.36%	(2.13% - 2.78%) 3.09%	(2.24% - 2.78%) 3.11%	(2.47% - 3.04%) 3.33%	(2.86% - 3.73%) 3.84%	(2.23% - 4.79%) 3.68%
	Age 18+	(3.18% - 3.54%) 0.63%	(2.80% - 3.41%) 0.60%	(2.87% - 3.36%) 0.47%	(3.09% - 3.60%) 0.62%	(3.46% - 4.25%) 0.79%	(2.71% - 4.99%) 0.95%
	Age 12-17	(.54%73%)	(.47%77%)	(.36%62%)	(.50%76%)	(.61% - 1.02%)	(.54% - 1.67%)
	Age 18-25	4.53% (4.23% - 4.85%)	5.26% (4.75% - 5.83%)	3.51% (3.17% - 3.89%)	3.89% (3.55% - 4.25%)	5.88% (5.25% - 6.57%)	5.32% (3.92% - 7.17%)
Past Year Cocaine Use	Age 26+	1.34%	1.53%	1.15%	1.28%	1.47%	1.73%
	-	(1.22% - 1.47%) 1.81%	(1.28% - 1.81%) 2.06%	(.96% - 1.36%) 1.49%	(1.10% - 1.48%) 1.66%	(1.21% - 1.77%) 2.14%	(1.09% - 2.72%) 2.26%
	Age 18+	(1.69% - 1.93%)	(1.83% - 2.32%)	(1.32% - 1.69%)	(1.49% - 1.84%)	(1.89% - 2.42%)	(1.61% - 3.16%)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals

* Low precision; no estimate reported

Source: National Survey on Drug Use and Health, 2012 and 2013, Substance Abuse and Mental Health Services Administration, Center for and Quality Behavioral Health Statistics

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2013 (NSDUH)

	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
ILLICIT DRUGS							
	Age 12-17	5.00%	4.05%	4.82%	5.16%	5.57%	6.81%
	//go 12 1/	(4.74% - 5.27%)	(3.63% - 4.51%)	(4.46% - 5.21%)	(4.78% - 5.56%)	(5.02% - 6.19%)	(5.26% - 8.78%)
	Age 18-25	9.47% (9.08% - 9.87%)	8.64% (8.01% - 9.31%)	9.41% (8.87% - 9.98%)	9.42% (8.89% - 9.98%)	10.19% (9.38% - 11.06%)	9.35% (7.48% - 11.64%)
Past Year Nonmedical Pain Reliever Use	A ma 26 i	3.60%	3.09%	3.41%	3.59%	4.19%	4.30%
	Age 26+	(3.38% - 3.83%)	(2.74% - 3.48%)	(3.12% - 3.73%)	(3.29% - 3.92%)	(3.72% - 4.71%)	(3.16% - 5.83%)
	Age 18+	4.46% (4.26% - 4.67%)	3.89% (3.55% - 4.25%)	4.29% (4.01% - 4.58%)	4.44% (4.16% - 4.75%)	5.10% (4.66% - 5.57%)	5.05% (3.95% - 6.44%)
	A == 40.47	25.34%	23.56%	26.05%	28.02%	21.76%	23.39%
	Age 12-17	(24.78% - 25.90%)	(22.48% - 24.67%)	(25.24% - 26.88%)	(27.18% - 28.88%)	(20.72% - 22.83%)	(20.47% - 26.59%)
Decentions of Creat Disk of Smaking Marijuana	Age 18-25	15.81%	13.21%	14.06%	18.41%	15.28%	15.89%
Perceptions of Great Risk of Smoking Marijuana Once a Month	-	(15.31% - 16.32%) 32.40%	(12.42% - 14.05%) 30.66%	(13.42% - 14.73%) 29.54%	(17.69% - 19.14%) 37.10%	(14.35% - 16.25%) 28.91%	(13.45% - 18.67%) 30.07%
	Age 26+	(31.76% - 33.06%)	(29.45% - 31.90%)	(28.58% - 30.51%)	(36.13% - 38.07%)	(27.66% - 30.20%)	(26.27% - 34.17%)
	Age 18+	29.94%	28.14%	27.26%	34.34%	26.82%	27.94%
	, .go .o.	(29.38% - 30.51%)	(27.08% - 29.23%)	(26.43% - 28.10%)	(33.50% - 35.19%)	(25.74% - 27.93%)	(24.61% - 31.53%)
	Age 12-17	5.76% (5.55% - 5.98%)	6.05% (5.68% - 6.44%)	5.70% (5.42% - 6.00%)	5.39% (5.11% - 5.69%)	6.20% (5.78% - 6.64%)	8.01% (6.76% - 9.48%)
	Ago 19 25	7.50%	8.56%	7.72%	6.62%	7.98%	6.97%
First Use of Marijuana ⁴	Age 18-25	(7.15% - 7.86%)	(7.95% - 9.23%)	(7.25% - 8.22%)	(6.18% - 7.09%)	(7.32% - 8.69%)	(5.49% - 8.82%)
	Age 26+	0.22%	0.23%	0.21%	0.18%	0.28%	0.31%
		<u>(.17%27%)</u> 1.23%	(.17%31%) 1.34%	(.16%28%) 1.26%	(.13%24%) 1.07%	(.20%38%) 1.40%	(.18%52%) 1.22%
	Age 18+	(1.16% - 1.30%)	(1.22% - 1.47%)	(1.16% - 1.37%)	(.97% - 1.17%)	(1.27% - 1.55%)	(.97% - 1.54%)
TOBACCO		· · ·			· · ·		
	Age 12-17	8.24%	8.14%	9.43%	8.45%	6.89%	10.11%
		(7.90% - 8.58%) 37.55%	(7.59% - 8.72%) 36.74%	(8.90% - 9.99%) 42.09%	(7.97% - 8.95%) 38.28%	(6.34% - 7.49%) 32.99%	(8.16% - 12.47%) 42.25%
	Age 18-25	(36.86% - 38.24%)	(35.52% - 37.98%)	(41.04% - 43.16%)	(37.29% - 39.28%)	(31.72% - 34.28%)	(38.50% - 46.08%)
Past Month Tobacco Product Use ¹²	A	26.34%	24.50%	29.60%	27.98%	22.14%	27.08%
	Age 26+	(25.75% - 26.94%)	(23.51% - 25.51%)	(28.74% - 30.49%)	(27.18% - 28.80%)	(21.15% - 23.16%)	(23.82% - 30.60%)
	Ago 19.	27.99%	26.25%	31.42%	29.49%	23.79%	29.33%
	Age 18+	(27.46% - 28.52%)	(25.38% - 27.14%)	(30.66% - 32.20%)	(28.78% - 30.21%)	(22.92% - 24.67%)	(26.40% - 32.43%)
	Age 12-17	6.08%	5.86%	7.11%	6.14%	5.23%	7.36%
		(5.79% - 6.39%) 31.23%	(5.38% - 6.37%) 30.59%	(6.69% - 7.56%) 34.44%	(5.75% - 6.55%) 31.69%	(4.74% - 5.76%) 28.14%	(5.75% - 9.37%) 35.18%
	Age 18-25	(30.56% - 31.90%)	(29.39% - 31.81%)	(33.44% - 35.45%)	(30.72% - 32.68%)	(26.91% - 29.41%)	(31.65% - 38.87%)
Past Month Cigarette Use	Age 26+	21.97%	20.13%	24.91%	23.41%	18.41%	22.63%
	7.go 201	(21.42% - 22.54%)	(19.21% - 21.09%)	(24.09% - 25.74%)	(22.64% - 24.19%)	(17.46% - 19.39%)	(19.70% - 25.86%)
	Age 18+	23.33%	21.63%	26.29%	24.62%	19.88%	24.49%
	Age 101	(22.84% - 23.84%)	(20.82% - 22.46%)	(25.59% - 27.01%)	(23.96% - 25.30%)	(19.06% - 20.73%)	(21.85% - 27.34%)
	Age 12-17	64.96%	65.81%	64.20%	64.52%	65.74%	62.89%
	/ go 12 17	(64.34% - 65.57%)	(64.70% - 66.89%)	(63.26% - 65.14%)	(63.62% - 65.41%)	(64.55% - 66.91%)	(59.42% - 66.24%)
Perceptions of Great Risk of Smoking One or More	Age 18-25	66.32% (65.72% - 66.93%)	68.00% (66.91% - 69.07%)	62.78% (61.88% - 63.66%)	65.59% (64.74% - 66.44%)	69.34% (68.15% - 70.51%)	65.31% (61.91% - 68.56%)
Packs of Cigarettes per Day	A === 00 ·	72.86%	75.03%	69.16%	72.25%	75.55%	74.89%
	Age 26+	(72.28% - 73.43%)	(74.02% - 76.01%)	(68.26% - 70.04%)	(71.43% - 73.06%)	(74.43% - 76.63%)	(71.63% - 77.89%)
	Age 18+	71.90%	74.03%	68.22%	71.28%	74.60%	73.47%
PAST YEAR DEPENDENCE, ABUSE, AND TREA		(71.39% - 72.40%)	(73.13% - 74.90%)	(67.44% - 69.00%)	(70.55% - 71.99%)	(73.63% - 75.55%)	(70.62% - 76.14%)
TAOT TEAN DEI ENDENGE, ADOOE, AND TREA		1.96%	1.92%	1.91%	1.99%	2.01%	2.47%
	Age 12-17	(1.80% - 2.14%)	(1.67% - 2.22%)	(1.71% - 2.14%)	(1.78% - 2.22%)	(1.73% - 2.33%)	(1.72% - 3.54%)
	Age 18-25	5.38%	5.76%	5.15%	4.91%	6.01%	5.80%
Illicit Drug Dependence in the Past Year ⁵		(5.09% - 5.68%) 1.31%	(5.24% - 6.32%) 1.36%	(4.75% - 5.57%) 1.26%	(4.54% - 5.31%) 1.28%	(5.38% - 6.69%) 1.34%	(4.35% - 7.71%) 1.66%
	Age 26+	(1.18% - 1.45%)	(1.16% - 1.61%)	(1.10% - 1.46%)	(1.10% - 1.48%)	(1.12% - 1.60%)	(1.09% - 2.52%)
	Age 18+	1.90%	1.99%	1.83%	1.81%	2.05%	2.27%
	, ige ior	(1.79% - 2.03%)	(1.79% - 2.22%)	(1.67% - 2.01%)	(1.65% - 1.99%)	(1.82% - 2.30%)	(1.68% - 3.08%)
	Age 12-17	3.76% (3.52% - 4.01%)	3.60% (3.22% - 4.04%)	3.47% (3.16% - 3.82%)	3.66% (3.33% - 4.02%)	4.27% (3.77% - 4.83%)	4.98% (3.64% - 6.76%)
	1	7.59%	8.02%	7.16%	7.08%	8.43%	7.75%
Illigit Drug Dependence or Abuse in the Dest Vers ⁵	Age 18-25	(7.24% - 7.95%)	(7.41% - 8.68%)	(6.69% - 7.65%)	(6.62% - 7.56%)	(7.71% - 9.22%)	(6.03% - 9.91%)
Illicit Drug Dependence or Abuse in the Past Year ⁵	Age 26+	1.74%	1.69%	1.73%	1.76%	1.77%	2.26%
		(1.59% - 1.91%)	(1.46% - 1.96%)	(1.53% - 1.96%)	(1.55% - 1.99%)	(1.52% - 2.08%)	(1.54% - 3.32%)
		2.60%	2.60%	2.52%	2.53%	2.79%	3.08%

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals

* Low precision; no estimate reported

Source: National Survey on Drug Use and Health, 2012 and 2013, Substance Abuse and Mental Health Services Administration, Center for and Quality Behavioral Health Statistics

Appendix 3B. Substance Abuse and Mental Health b	v Age Group, New Mexico, 2012-2013	(NSDUH)
	,	

	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
PAST YEAR DEPENDENCE, ABUSE, AND TRE	ATMENT						
Alcohol Dependence in the Past Year ⁶	Age 12-17	1.15%	1.16%	1.14%	1.09%	1.24%	1.20%
	Age 12-17	(1.03% - 1.29%)	(.99% - 1.36%)	(.99% - 1.32%)	(.94% - 1.26%)	(1.03% - 1.50%)	(.82% - 1.74%)
	Age 18-25	5.77% (5.47% - 6.09%)	5.94% (5.38% - 6.55%)	5.71% (5.31% - 6.14%)	5.28% (4.90% - 5.68%)	6.45% (5.84% - 7.13%)	5.76% (4.40% - 7.51%)
		2.99%	2.83%	3.00%	2.91%	3.22%	3.06%
	Age 26+	(2.80% - 3.19%)	(2.52% - 3.17%)	(2.74% - 3.29%)	(2.65% - 3.19%)	(2.86% - 3.64%)	(2.28% - 4.09%)
	Age 18+	3.40%	3.27%	3.40%	3.26%	3.71%	3.46%
		(3.23% - 3.57%)	(2.99% - 3.59%)	(3.16% - 3.66%)	(3.02% - 3.51%)	(3.38% - 4.08%)	(2.72% - 4.39%) 3.92%
	Age 12-17	3.11% (2.91% - 3.33%)	3.23% (2.88% - 3.62%)	3.16% (2.89% - 3.47%)	2.96% (2.70% - 3.25%)	3.23% (2.84% - 3.66%)	3.92% (2.93% - 5.21%)
	1	13.67%	14.17%	14.08%	12.64%	14.52%	13.98%
Alcohol Dependence or Abuse in the Past Year ⁶	Age 18-25	(13.19% - 14.16%)	(13.36% - 15.03%)	(13.44% - 14.75%)	(12.03% - 13.28%)	(13.63% - 15.46%)	(11.80% - 16.48%)
Alcohol Dependence of Abuse in the Past Year	Age 26+	5.95%	5.87%	5.99%	5.61%	6.50%	6.66%
		(5.68% - 6.22%)	(5.36% - 6.42%)	(5.57% - 6.44%)	(5.22% - 6.03%)	(5.92% - 7.14%)	(5.32% - 8.32%)
	Age 18+	7.08% (6.84% - 7.33%)	7.06% (6.59% - 7.55%)	7.17% (6.79% - 7.57%)	6.64% (6.29% - 7.01%)	7.72% (7.19% - 8.28%)	7.75% (6.47% - 9.26%)
	A == 40.47	5.66%	5.65%	5.40%	5.61%	5.97%	7.20%
	Age 12-17	(5.37% - 5.96%)	(5.18% - 6.17%)	(5.03% - 5.81%)	(5.21% - 6.03%)	(5.41% - 6.59%)	(5.71% - 9.03%)
	Age 18-25	18.09%	19.10%	18.39%	16.80%	19.06%	18.32%
Dependence or Abuse of Illicit Drugs or Alcohol in	U U	(17.54% - 18.65%) 7.04%	(18.17% - 20.06%) 6.83%	(17.69% - 19.12%)	(16.13% - 17.49%)	(18.05% - 20.11%) 7.50%	(15.77% - 21.19%)
	Age 26+	7.04% (6.75% - 7.34%)	6.83% (6.33% - 7.38%)	7.16% (6.73% - 7.62%)	6.78% (6.37% - 7.21%)	7.50% (6.92% - 8.13%)	8.36% (6.88% - 10.12%)
	1	8.66%	8.59%	8.80%	8.24%	9.26%	9.83%
	Age 18+	(8.39% - 8.94%)	(8.12% - 9.08%)	(8.41% - 9.20%)	(7.87% - 8.63%)	(8.72% - 9.82%)	(8.45% - 11.42%)
	Age 12-17	3.49%	3.30%	3.17%	3.42%	4.00%	4.77%
		(3.26% - 3.73%)	(2.95% - 3.69%)	(2.88% - 3.49%)	(3.13% - 3.75%)	(3.54% - 4.52%)	(3.54% - 6.39%)
No odine Dut Not Doooinine Too too out foo Illigit	Age 18-25	6.94% (6.61% - 7.28%)	7.18% (6.60% - 7.80%)	6.50% (6.06% - 6.97%)	6.55% (6.11% - 7.02%)	7.75% (7.04% - 8.52%)	7.05% (5.50% - 8.99%)
Needing But Not Receiving Treatment for Illicit Drug Use in the Past Year ⁷		1.51%	1.51%	1.48%	1.52%	1.51%	1.87%
	Age 26+	(1.37% - 1.66%)	(1.28% - 1.79%)	(1.29% - 1.71%)	(1.32% - 1.76%)	(1.25% - 1.81%)	(1.25% - 2.77%)
		2.31%	2.32%	2.22%	2.26%	2.45%	2.63%
	Age 18+	(2.18% - 2.44%)	(2.09% - 2.57%)	(2.02% - 2.43%)	(2.06% - 2.48%)	(2.19% - 2.74%)	(1.99% - 3.48%)
	Age 12-17	2.96%	3.10%	2.99%	2.82%	3.05%	3.74%
	Age 12-17	(2.76% - 3.17%)	(2.77% - 3.47%)	(2.72% - 3.29%)	(2.57% - 3.10%)	(2.68% - 3.47%)	(2.77% - 5.02%)
Needing But Not Receiving Treatment for Alcohol	Age 18-25	13.34%	13.77%	13.61%	12.53%	14.05%	13.26%
Use in the Past Year ⁸		(12.87% - 13.83%) 5.63%	(12.94% - 14.64%) 5.51%	(12.94% - 14.31%) 5.76%	(11.90% - 13.18%) 5.40%	(13.13% - 15.02%) 5.97%	(11.16% - 15.68%) 6.46%
	Age 26+	(5.37% - 5.89%)	(5.05% - 6.01%)	(5.36% - 6.19%)	(5.01% - 5.82%)	(5.46% - 6.52%)	(5.04% - 8.26%)
	Age 18+	6.76%	6.69%	6.90%	6.44%	7.19%	7.47%
	Age for	(6.53% - 7.00%)	(6.26% - 7.14%)	(6.54% - 7.28%)	(6.09% - 6.82%)	(6.72% - 7.69%)	(6.11% - 9.10%)
MENTAL HEALTH							
among persons aged 18 or older		N/A	N/A	N/A	N/A	N/A	N/A
Any Mental Illness in the Past Year ⁹	Age 12-17			1071		10/7	
	Age 18-25	19.50%	19.89%	19.86%	18.08%	21.07%	19.90%
	Age 10-20	(19.00% - 20.00%)	(18.96% - 20.86%)	(19.12% - 20.61%)	(17.36% - 18.82%)	(20.00% - 22.18%)	(17.32% - 22.75%)
	Age 26+	18.36%	17.84%	18.35%	18.48%	18.58%	19.24%
		(17.87% - 18.86%) 18.53%	(17.00% - 18.70%) 18.13%	(17.63% - 19.10%) 18.57%	(17.77% - 19.21%) 18.42%	(17.64% - 19.56%) 18.96%	(16.74% - 22.00%) 19.33%
	Age 18+	(18.10% - 18.96%)	(17.39% - 18.90%)	(17.94% - 19.23%)	(17.80% - 19.06%)	(18.13% - 19.81%)	(17.12% - 21.76%)
Serious Mental Illness in the Past Year ¹⁰	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
		4 470/	4 4 70/	4.000/	0.000/	4.05%	4.070/
	Age 18-25	4.17% (3.94% - 4.41%)	4.17% (3.79% - 4.60%)	4.60% (4.26% - 4.97%)	3.86% (3.56% - 4.18%)	4.25% (3.83% - 4.71%)	4.37% (3.41% - 5.58%)
		(3.94% - 4.41%) 4.14%	(3.79% - 4.60%) 3.80%	(4.26% - 4.97%) 4.21%	(3.56% - 4.18%) 4.26%	4.15%	(3.41% - 5.58%) 4.30%
	Age 26+	(3.90% - 4.39%)	(3.41% - 4.24%)	(3.87% - 4.58%)	(3.92% - 4.63%)	(3.71% - 4.62%)	(3.21% - 5.72%)
	Age 18+	4.14%	3.86%	4.27%	4.20%	4.16%	4.31%
		(3.94% - 4.36%)	(3.51% - 4.24%)	(3.97% - 4.58%)	(3.90% - 4.52%)	(3.79% - 4.57%)	(3.34% - 5.53%)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals * Low precision; no estimate reported

Source: National Survey on Drug Use and Health, 2012 and 2013, Substance Abuse and Mental Health Services Administration, Center for and Quality Behavioral Health Statistics

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2013 (NSDUH)

	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
MENTAL HEALTH among							
persons aged 18 or older							
	Age 12-17	9.86%	9.16%	9.74%	9.77%	10.61%	10.73%
	//go 12 11	(9.48% - 10.26%	(8.54% - 9.82%)	9.23% - 10.27%	9.26% - 10.30%	(9.87% - 11.39%	(8.94% - 12.83%)
	Age 18-25	8.81%	8.62%	9.15%	8.30%	9.45%	9.44%
Had at Least One Major Depressive Episode in the Past Year ¹¹	Age 10-23	(8.46% - 9.19%)	(8.02% - 9.26%)	(8.66% - 9.68%)	(7.84% - 8.77%)	(8.78% - 10.17%	(7.78% - 11.42%)
had at Least One Major Depressive Episode in the Past fear	Age 26+	6.41%	6.16%	6.46%	6.51%	6.43%	6.60%
	Age 20+	(6.12% - 6.73%)	(5.65% - 6.71%)	(6.03% - 6.91%)	(6.08% - 6.96%)	(5.89% - 7.02%)	(5.15% - 8.43%)
	Age 18+	6.77%	6.51%	6.85%	6.77%	6.89%	7.03%
	Age 101	(6.51% - 7.04%)	(6.05% - 7.00%)	(6.47% - 7.25%)	(6.39% - 7.17%)	(6.41% - 7.41%)	(5.70% - 8.63%)
	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	7.33%	7.31%	7.68%	6.78%	7.88%	7.14%
Had Serious Thoughts of Suicide in the Past Year	Age 10-25	(7.02% - 7.65%)	(6.77% - 7.89%)	(7.24% - 8.15%)	(6.36% - 7.23%)	(7.23% - 8.59%)	(5.71% - 8.89%)
Had Serious Thoughts of Suicide in the Past Year	Age 26+	3.30%	3.26%	3.36%	3.30%	3.27%	3.18%
	Age 20+	(3.09% - 3.52%)	(2.92% - 3.64%)	(3.06% - 3.68%)	(3.01% - 3.63%)	(2.91% - 3.67%)	(2.34% - 4.30%)
	Age 18+	3.89%	3.84%	3.98%	3.81%	3.97%	3.76%
	Aye lot	(3.70% - 4.09%)	(3.54% - 4.17%)	(3.72% - 4.27%)	(3.55% - 4.09%)	(3.64% - 4.32%)	(2.99% - 4.72%)

+ All figures are percent prevalence rates; figures in parantheses are 95% confidence intervals

* Low precision; no estimate reported

Source: National Survey on Drug Use and Health, 2012 and 2013, Substance Abuse and Mental Health Services Administration, Center for and Quality Behavioral Health Statistics

Appendix 2A, 2B, 3A, & 3B. FOOTNOTES

1. Binge Alcohol Use is defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past 30 days.

2. Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically.

3. Illicit Drugs Other Than Marijuana include cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically.

4. Average annual marijuana initiation rate = $100 * \{ [X_1 \div (0.5 * X_1 + X_2)] \div 2 \}$, where X_1 is the number of marijuana initiates in the past 24 months and X_2 is the number of persons who never used marijuana.

5. Dependence or abuse is based on definitions found in the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV). Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically.

6. Dependence or abuse is based on definitions found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).

7. Needing But Not Receiving Treatment refers to respondents classified as needing treatment for illicit drugs, but not receiving treatment for an illicit drug problem at a specialty facility (i.e., drug and alcohol rehabilitation facilities [inpatient or outpatient], hospitals [inpatient only], or mental health centers). Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically.

8. Needing But Not Receiving Treatment refers to respondents classified as needing treatment for alcohol, but not receiving treatment for an alcohol problem at a specialty facility (i.e., drug and alcohol rehabilitation facilities [inpatient or outpatient], hospitals [inpatient only], or mental health centers).

9. Any mental illness is defined as having a diagnosable mental, behavioral, or emotional disorder, other than a substance use disorder, that met the criteria found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), regardless of the level of impairment in carrying out major life activities.

10. Serious mental illness is defined as having a diagnosable mental, behavioral, or emotional disorder, other than a substance use disorder, that met the criteria found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) and resulted in serious functional impairment in carrying out major life activities.

11. Major depressive episode (MDE) is defined as in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), which specifies a period of at least 2 weeks when a person experienced a depressed mood or loss of interest or pleasure in daily activities and had a majority of specified depression symptoms.

12. Tobacco Products include cigarettes, smokeless tobacco (i.e., chewing tobacco or snuff), cigars, or pipe tobacco.