

New Mexico Substance Abuse Epidemiology Profile

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

July 2011



This document made possible by the NMHSD Behavioral Health Services Division Office of Substance Abuse Prevention through a generous allocation of funds from the State Epidemiological Outcomes Workgroup (SEOW) grant it received from the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (SAMHSA-CSAP); and by funding from the Centers for Disease Control and Prevention (CDC) Alcohol Team.

NEW MEXICO DEPARTMENT OF HEALTH

Dr. Catherine D. Torres, MD, Secretary

Epidemiology and Response Division

C. Mack Sewell, DrPH, MS, Director and State Epidemiologist
Michael Landen, MD, MPH, Deputy State Epidemiologist

Injury and Behavioral Epidemiology Bureau

Toby Rosenblatt, MPA, Bureau Chief

Substance Abuse Epidemiology Program

Nina Shah, MS, Drug Epidemiologist
Jim Roeber, MSPH, Alcohol Epidemiologist

Survey Section

Dan Green, MPH, YRRS Coordinator and Survey Epidemiologist

Office of Injury Prevention

Tierney Murphy, MD, MPH, Injury Epidemiologist

Acknowledgments

The New Mexico Substance Abuse Epidemiology Profile was prepared by the New Mexico Department of Health (NMDOH) Epidemiology and Response Division (ERD) Injury and Behavioral Epidemiology Bureau (IBEB) Substance Abuse Epidemiology Program (SAEP), with data provision and analytic support from the NMDOH IBEB Survey Section; and was made possible by the generous support of the NMHSD Behavioral Health Services Division (BHSD) Office of Substance Abuse Prevention (OSAP), based on an allocation from the State Epidemiological Outcomes Workgroup (SEOW) grant received from the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (SAMHSA-CSAP); and by funding from the Centers for Disease Control and Prevention (CDC) Alcohol Team.

SPF-SIG Statewide Epidemiology Workgroup (SEW)

The State Epidemiological Outcomes Workgroup (SEOW) is a core component funded by the State Epidemiological Outcomes Workgroup grant. Its focus is the development of assessment data and indicators for use in planning and evaluation. The workgroup includes the following individuals: Jim Roeber and Nina Shah, NMDOH-ERD Substance Abuse Epidemiology Program; Daphne Rood-Hopkins and Karen Cheman, NMHSD-BHSD Office of Substance Abuse Prevention; Glenn Wieringa, New Mexico Department of Transportation Traffic Safety Bureau; Brenda Martinez, Optum Health; Nadine Tafoya, community member; Ann DeVecchio, community member; Sindy Sacoman, community member; Paula Feathers, New Mexico ATODA Prevention Training System; Martha Waller and Liz Lilliott, PIRE (under contract to the OSAP); and, is coordinated and staffed by Michael Coop and Natalie Skogerboe, Coop Consulting, Inc.

TABLE OF CONTENTS

	Page
Introduction	iii
- Technical Note: Methodological Changes since Previous Reports	vi
Executive Summary	vii
- Data Sources	ix
Sections	
I. Consequences	1
A. Alcohol-Related Death	3
1. Alcohol-Related Chronic Disease Death	7
(a) Alcohol-Related Chronic Liver Disease Death	11
2. Alcohol-Related Injury Death	15
(a) Alcohol-Related Motor Vehicle Crash Death	19
B. Smoking-Related Death	23
C. Drug-Induced Death	27
D. Suicide	33
E. Adult Mental Health	37
1. Frequent Mental Distress (BRFSS)	37
2. Current Depression (BRFSS)	41
F. Youth Mental Health	45
1. Persistent Sadness or Hopelessness (YRRS)	45
2. Seriously Considered Suicide (YRRS)	49
3. Attempted Suicide (YRRS)	53
4. Risk and Resiliency (YRRS)	57
II. Consumption	61
A. Alcohol	63
1. Binge Drinking	
(a) Adult Binge Drinking (BRFSS)	63
(b) Youth Binge Drinking (YRRS)	67
2. Heavy Drinking	
(a) Adult Heavy Drinking (BRFSS)	71
3. Drinking and Driving	
(a) Adult Drinking and Driving (BRFSS)	75
(b) Youth Drinking and Driving (YRRS)	79
B. Illicit Drugs	
1. Youth Marijuana Use (YRRS)	83
2. Youth Cocaine Use (YRRS)	87
3. Youth Painkiller Use to Get High (YRRS)	91
4. Youth Other Drug Use (YRRS)	95

TABLE OF CONTENTS (continued)

II. Consumption (continued) 99

C. Tobacco

- | | |
|---|------------|
| 1. Adult Cigarette Smoking (BRFSS) | 99 |
| 2. Youth Cigarette Smoking (YRRS) | 103 |

Appendices

- | | |
|---|------------|
| 1. State Population by Age, Sex, Race/Ethnicity, and County, 2007 | 107 |
| 2. Substance Abuse and Mental Health by Region, Age 12+, 2006-2008 | 115 |

INTRODUCTION

New Mexico Substance Abuse Epidemiology Profile

The *New Mexico Substance Abuse Epidemiology Profile* is a tool for substance abuse prevention planners at the county and community level. The primary purpose is to support efforts related to the State Epidemiological Outcomes Workgroup (SEOW) grant received by the New Mexico Human Services Department (NMHSD) Behavioral Health Services Division (BHSD) Office of Substance Abuse Prevention (OSAP) from the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (SAMHSA-CSAP). The SEOW funding 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.

Important Note about Comparability to Previous Reports

This report is the third in a series that began with the New Mexico State Epidemiology Profile published in 2005 (available at http://nmhealth.org/ERD/HealthData/pdf/SPF-SIG_State_Epi_Report_v3.2.pdf); and continued with the New Mexico Substance Abuse Epidemiology Profile published in 2010 (available at <http://nmhealth.org/ERD/HealthData/SubstanceAbuse/2010%20New%20Mexico%20Substance%20Abuse%20Epidemiology%20Profile.pdf>). Each report has reflected important methodological changes from the previous report in this series. As a result, this 2011 report is not comparable to previous reports 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 based on deaths or the Behavioral Risk Factor Surveillance Survey (BRFSS) should not be compared between the 2005 report and any later reports
- Race/ethnicity reporting for indicators based on the Youth Risk and Resiliency Survey (YRRS) should not be compared between the 2005 or 2010 reports and the 2011 reports

The 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.

New Additions this Report

This report contains some new indicators added since the previous (2010) edition, intended to support the Substance Abuse and Mental Health Services Administration's increased focus on mental health and co-morbidities of substance abuse, in addition to its ongoing focus on substance abuse prevention. These new indicators include: new sections on suicide and adult mental health; new sections on youth persistent sadness and hopelessness and youth seriously considering and/or attempting suicide; a new section on youth risk and resiliency and its association with other risk behaviors; and a new appendix which includes estimates of substance use and mental health disorders by New Mexico health region, from the National Survey on Drug Use and Health.

How to Use this Report

The main section of the profile presents several major indicators of substance abuse in New Mexico. These major indicators include outcome indicators (e.g., major causes of alcohol-related death) and indicators of substance abuse consumption behavior (i.e., self-reported substance use behavior from statewide surveys). 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 recent trends are included for numerous indicators. There is also an appendix that provides population denominators used in the calculation of death rates included in this report.

A combined five-year period is used when presenting death rates. Combining deaths over multiple years is necessary because in many of New Mexico's small counties there are very few deaths due to a given cause in any given year. Combining deaths over multiple years allows the calculation of rates that are more stable and therefore more meaningful than rates calculated based on very few cases. Death rates were calculated and reported for the five-year period 2005-2009 for all reported causes of death. These represented the most current years of data available when this report was compiled.

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 to be found in tables and charts. One way to synthesize this information has been through the development of specific "Problem Statements" which give the reader 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 deaths and death rates by sex, age group, and race/ethnicity. In sections that report on causes of death, these tables include the numbers 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 adult risk behaviors, these tables include an estimate of the number of persons engaging in the risk behavior, on the left side of the table, and the prevalence rate of the behavior in the population, on the right side of the table. In sections that report 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 outcome indicator presents results for each New Mexico county by race/ethnicity. Once again, the numbers of deaths (or the estimated number of persons engaging in a risk behavior) are presented on the left side of the table; and the age-adjusted death rates (or the weighted behavior prevalence rates) are presented on the right side of the table. These tables are useful in determining which counties have the most severe substance use problems, and which groups are at the highest risk within each county.

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 New Mexico county in descending order. Adjacent to each county name on the left side of the chart, the number of deaths occurring (or the estimated number of persons engaging in the behavior) in the county and the percent of New Mexico deaths occurring (or the weighted percent of New Mexicans engaging in a 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 of the chart. The state rate is depicted with a darker colored bar, and for most indicators the most recent available United States 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 severity of the problem 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 most of the maps based on death rates this threshold is rates that are 50% or higher than the state rate; for most of the maps based on behavioral data from either the adult Behavioral Risk Factor Surveillance Survey (BRFSS) or the high-school Youth Risk and Resiliency Survey (YRRS), this threshold is rates that are 15-25% higher than the state rate.

Use of this Report: Rates and Numbers

Both death rates and the numbers of deaths are presented in the tables and charts of the Epidemiology Profile. While the rates are very important in indicating the severity of an indicator within any given county or population group, they only provide part of the picture when comparing the burden of a problem from one county or group to another. For instance, Rio Arriba County has an alcohol-related death rate (100.8 per 100,000 population) more than twice that of Bernalillo County (47.8 per 100,000). However, the number of alcohol-related deaths in Bernalillo County (1,499) is more than seven times the number in Rio Arriba County (211). Another way of expressing a similar idea is to say that Bernalillo County accounts for 30.7% of all alcohol-related deaths in the state, and Rio Arriba County accounts for 4.3%. 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 the extremely high rate of alcohol-related deaths, interventions that address this problem are very important in Rio Arriba County. At the same time, Bernalillo 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?

Even though deaths were combined over a five-year period, for some causes of death there were still very few deaths occurring in some small counties or for specific age/sex/race-ethnic groups. While rates can be calculated based on very small numbers, these rates can be unstable and are often misleading. In a small county, even a single death over a five year period can result in a rate that is extremely high. Such rates are of questionable value for planning purposes. Including these rates would have resulted in very dense tables that were difficult to interpret because they included information that clouded the overall picture rather than clarifying it. For this reason, county rates based on fewer than two deaths per year have been removed from all county-level tables and charts. For the same reason, for survey-based measures of adult risk behaviors, rates based on fewer than 50 respondents for a given table cell have been removed.

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 serious program planners will want to refer to these documents for further information. These publications include:

- **Other reports produced by the Substance Abuse Epidemiology Program (SAEP)**, Injury and Behavioral Epidemiology Bureau, Epidemiology and Response Division (ERD), NMDOH.
Available online at:
http://nmhealth.org/ERD/HealthData/substance_abuse.shtml.
- **New Mexico Behavioral Risk Factor Surveillance System (BRFSS) reports**, produced by the Survey Section, Injury and Behavioral Epidemiology Bureau, Epidemiology and Response Division (ERD), NMDOH.
Available online at:
http://nmhealth.org/ERD/HealthData/health_behaviors.shtml.
- **New Mexico Youth Risk and Resiliency Survey (YRRS) reports**, produced by NMDOH, NM Public Education Department, and the UNM Prevention Research Center.
Available online at:
http://nmhealth.org/ERD/HealthData/health_behaviors.shtml.

This 2011 report and the previous 2010 report in this series reflects several important methodological changes implemented since the original New Mexico State Epidemiology Profile (the first report in this series) was published in 2005. These methodological changes and their impact on this report are described in more detail below:

- Changes to the definition of alcohol-related death. The Center for Disease Control's (CDC's) revised Alcohol-Related Disease Impact (ARDI) alcohol attributable fractions (AAFs) were implemented in the 2010 and 2011 reports. AAFs are the proportion of a given cause of death which 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 the publication Alcohol-Attributable Deaths and Years of Potential Life Lost --- United States, 2001 (Centers for Disease Control and Prevention. MMWR. 2004;53(37);866-870). The revised ARDI AAFs are further described on the CDC website <https://apps.nccd.cdc.gov/ardi/Homepage.aspx>.

Key differences between the revised CDC ARDI AAFs used in the 2010 and 2011 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 2011 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 2011 reports' counts and rates for all the alcohol-related 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 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 non-Hispanic, Black non-Hispanic, 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 the New Mexico Department of Health (NMDOH), for all indicators except those based on the Youth Risk and Resiliency Survey (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.

These changes in the race/ethnicity categories make the 2010 and 2011 reports' counts and rates by race/ethnicity comparable to each other, and not comparable to the 2005 report, for all indicators except those based on the Youth Risk and Resiliency Survey (YRRS). For indicators based on YRRS, the 2005 and 2010 reports' rates by race/ethnicity are comparable to each other, but are not comparable to the 2011 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 2009, the ten leading causes of death in New Mexico were diseases of the heart, malignant neoplasms, unintentional injuries, chronic lower respiratory disease, cerebrovascular disease, diabetes, suicide, Alzheimer's disease, chronic liver disease, and influenza and pneumonia. Of these, chronic liver disease, unintentional injuries, and suicide are associated with alcohol use; chronic lower respiratory disease and influenza and pneumonia are associated with tobacco use; heart disease, malignant neoplasms, and cerebrovascular disease are associated with both alcohol and tobacco use; and unintentional injuries and suicide are associated with the use of other drugs.

Alcohol-Related Death

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 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. In 2006, the economic cost of alcohol abuse in New Mexico was more than \$2.5 billion, or \$1,250 per person.

Death rates from alcohol-related causes increase with age. Male rates are substantially higher than female rates. American Indians have higher alcohol-related death rates than other race/ethnicities. McKinley and Rio Arriba 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 2005-2009 are Bernalillo, San Juan, Santa Fe, McKinley, and Doña Ana. New Mexico has extremely high death rates due to both alcohol-related chronic diseases and alcohol-related injuries.

- Alcohol-Related Chronic Disease Death. New Mexico's rate of death due to alcohol-related chronic diseases is 1.9 times 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, McKinley and Rio Arriba 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. While Bernalillo County has the highest number of deaths due to AR-CLD (458 for the years 2005-2009), three counties that stand out for their very high rates are Rio Arriba, McKinley, and Cibola counties, which have rates 3.5 to almost 6 times the national rate.

- Alcohol-Related Injury Death. New Mexico's rate of alcohol-related injury death is 1.8 times the national rate. In the current reporting period (2005-2009) falls injuries surpassed alcohol-related motor vehicle traffic crashes 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, see below). Deaths from drug overdose, a sizeable portion of which are partially attributable to alcohol, have also 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

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, New Mexico'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 during the period 2005-2008. Nonetheless, rate disparities remain: both male and female American Indians have elevated rates, especially among younger males (age 15-44). McKinley and Rio Arriba counties had rates almost five times the national rate for the period covered by this report (2005-2009). The McKinley County rate was driven by the high American Indian rate, while the Rio Arriba County rate was driven by the high Hispanic and American Indian rates.

EXECUTIVE SUMMARY (continued)

Consequences of Substance Abuse (continued)

Smoking-Related Death

Historically, New Mexico has had one of the lowest smoking-related death rates in the nation. Nonetheless, New Mexico's burden of death associated with smoking is considerably greater than the burden associated with alcohol and other drugs. Among all race/ethnic groups, males have higher smoking-related death rates than females. Among both males and 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 Torrance, Sierra, Quay, Valencia, and Socorro counties. The high rates in most of these counties and in the state overall are driven by high rates among Whites.

Drug-Induced Death

New Mexico has the highest drug-induced death rate in the nation, and the consequences of drug use continue to burden New Mexico communities. Drug-induced death rates remained higher for males than for females. The highest drug-induced death rate was among Hispanic males, followed by White males. Rio Arriba County had the highest drug-induced death rate in the state, followed by Eddy, Torrance, Chaves, and Bernalillo counties. Bernalillo County continued to bear the highest burden of drug-induced death in terms of total numbers of deaths. Unintentional drug overdoses account for more than 80% of drug-induced deaths. The most common drugs causing unintentional overdose death for the period covered in this report were prescription opioids (i.e., methadone, oxycodone, morphine; 49%), heroin (36%), cocaine (31%), tranquilizers/muscle relaxants (29%) and antidepressants (16%). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available.

Suicide and Mental Health

Suicide is a serious and persistent public health problem in New Mexico. Over the period 1981 through 2007 New Mexico's suicide rate has consistently been among the highest in the nation -- 1.5 to 1.9 times the U.S. rate. Male suicide rates are more than three times female rates across the age range, and among all race/ethnic groups. Six counties (Taos, Sierra, Grant, Rio Arriba, Torrance, and Otero) had suicide rates in 2005-2009 that were more than twice the most recent available U.S. rates.

New 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 use behaviors are important to examine not only because substance abuse can lead to very negative consequences in the short term, but because substance abuse can also 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.

The following is a list of the substance use indicators included in this report, along with a brief description of key findings related to each indicator:

- Adult Binge Drinking. Binge drinking (defined as drinking 5+ drinks on a single occasion, for men, or 4+ 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, American Indians were more likely to report binge drinking than other ethnicities. Young adults (age 18-24) were more likely than other age groups to report binge drinking.

- Youth Binge Drinking. In 2009, New Mexico public high school students were slightly more 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. Hispanic students were more likely to report binge drinking than high school students of other race/ethnicities.

EXECUTIVE SUMMARY (continued)

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

- Adult Heavy Drinking. In 2009, adult heavy drinking (defined as drinking more than two drinks per day, on average, for men, or more than one drink per day, on average, for women) was less commonly reported in New Mexico (4.2%) than in the rest of the nation (5.1%). Heavy drinking was more prevalent among younger (aged 18-24) and middle-aged (aged 25-64) adults, with 4.3% and 4.4% of these age groups, respectively, reporting past-month heavy drinking. New Mexico men were 1.2 times more likely to report chronic drinking than women (4.5% vs. 3.9%).

- Adult Drinking and Driving. In 2008, 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 adults (aged 18-24) than among older age groups. New Mexico men were more than three times as likely to report drinking and driving than women (1.9% vs 0.6%). Hispanic males (2.5%) were more likely to report drinking and driving than American Indian (2.0%) and White (1.6%) males.

- Youth Drinking and Driving. In 2009, New Mexico high school students were as likely to report driving after drinking alcohol as other U.S. students. Driving after drinking was more slightly common among boys than girls, and was less common among White youth than among other race/ethnic groups. Eleventh and 12th grade students were more likely to report drinking and driving than 9th and 10th grade students.

- Youth Drug Use. In 2009, 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 pain-killers was less commonly reported by White students than by students in other race/ethnic groups.

- Adult Tobacco Use. In 2009, the prevalence of adult smoking was the same in New Mexico as in the nation overall (17.9%). Smoking was most prevalent among younger age groups, and was more common among men than women for the age categories 18-24 and 25-64.

- Youth Tobacco Use. In 2009, smoking was more prevalent among New Mexico high school students (24.0%) than in the rest of the nation (19.5%). New Mexico boys were slightly more likely than girls to report current smoking (24.6% vs. 23.2%). American Indian high school students (28.1%) were more likely to report current cigarette smoking than White (23.1%) and Hispanic (23.2%) 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/archives/1980s/80s_st_detail.html as of August 16, 2010.

National/New Mexico population data, 1990-1999: 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.

EXECUTIVE SUMMARY (continued)

Data Sources (continued)

National population data, 2000-2008: National Center for Health Statistics. Postcensal estimates of the resident population of the United States for July 1, 2000-July 1, 2008, by year, county, age, bridged race, Hispanic origin, and sex (Vintage 2008). Prepared under a collaborative arrangement with the U.S. Census Bureau; released May 14, 2009. Available from: http://www.cdc.gov/nchs/nvss/bridged_race.htm as of September 2, 2009.

New Mexico population data, 2000-2009: University of New Mexico, Bureau of Business and Economic Research. Annual Estimates of the Population of New Mexico by County, Age, Sex, Race and Hispanic Origin, 2000 to 2009.

National death data: National Center for Health Statistics. Multiple Cause-of-Death files, 1981-2007, 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, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program.

New Mexico death data: New Mexico Department of Health, Epidemiology and Response Division, Bureau of Vital Records and Health Statistics; and University of New Mexico, Office of the Medical Investigator (for drug overdose death reporting). Death rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program..

National/New Mexico motor vehicle traffic crash fatality data: National Highway Traffic Safety Administration, Fatality Analysis Reporting System.

(1) VMT reporting: Fatalities, Fatalities in Crashes by Driver Alcohol Involvement, Vehicle Miles Traveled (VMT), and Fatality Rate per 100 Million VMT, by State, 1982-2007. Report provided by NHTSA National Center for Statistics and Analysis, Information Services Team. 2008 death rates per 100M VMT calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program.

(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 Program.

National adult behavioral data: 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, 1995-2009. Available from: <http://apps.nccd.cdc.gov/brfss/> as of April 12, 2011.

New Mexico adult behavioral data: 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://nmhealth.org/ERD/HealthData/health_behaviors.shtml as of April 12, 2011.

National youth behavioral data: Centers for Disease Control and Prevention. Surveillance Summaries, June 4, 2010. MMWR. 2010;59(SS-5). More reporting available from: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm> as of April 12, 2011.

New Mexico youth behavioral data: 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://nmhealth.org/ERD/HealthData/health_behaviors.shtml as of April 12, 2011.

New Mexico substance use disorder and mental health data: Substance Abuse and Mental Health Services Administration, Office of Applied Studies. Substate Estimates from the 2006-2008 National Surveys on Drug Use and Health. Available from: <http://oas.samhsa.gov/substate2k10/StateFiles/NM.htm>. More reporting available from: <http://oas.samhsa.gov/statesList.cfm> as of April 12, 2011.

Section 1

Consequences

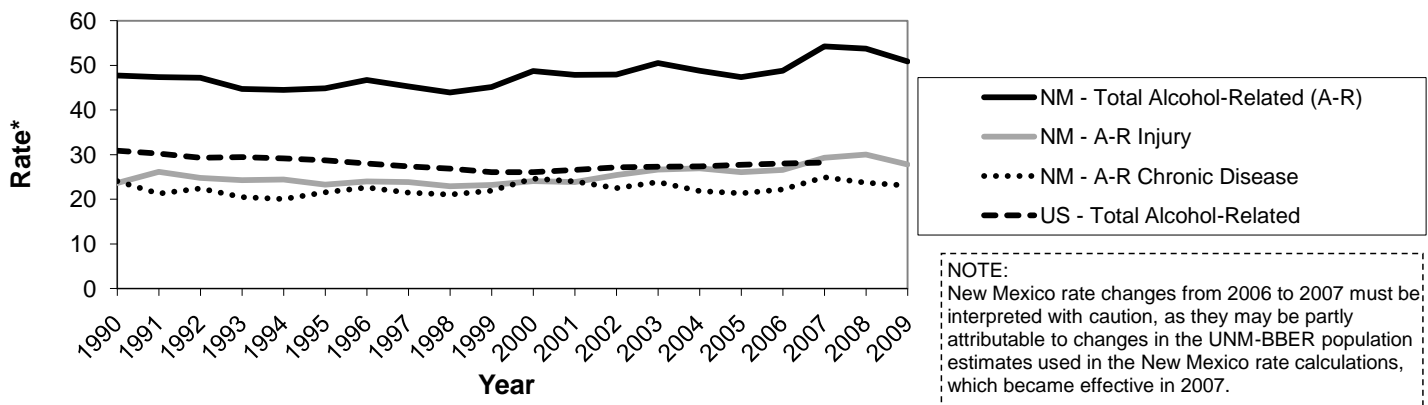
ALCOHOL-RELATED DEATH

Problem Statement

The consequences of excessive alcohol use are severe in New Mexico. New Mexico's total alcohol-related death rate has ranked 1st, 2nd, or 3rd in the U.S. since 1981; and 1st for the period 1997 through 2007 (the most recent year for which state comparison data is 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.

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 in a later section of this report. Chart 1 shows that while New Mexico's alcohol-related chronic disease death rates were relatively unchanged over the past 18 years, its alcohol-related injury death rate has been increasing since 2001. New Mexico's total alcohol-related death rate increased 11% from 1990 through 2007, driven by a 19% increase in alcohol-related injury death rates from 2001 through 2007. By contrast, the U.S. alcohol-related death rate decreased 9% from 1990 through 2007 (16% for alcohol-related chronic disease; 3% for alcohol-related injury), although US alcohol-related injury death rates have also been increasing since 2000 (data not shown).

Chart 1: Alcohol-Related Death Rates*, New Mexico and United States, 1990-2009



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

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

Table 1: Alcohol-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	83	863	402	1,348	13.7	71.4	109.5	55.5
	Hispanic	181	1,112	256	1,549	20.5	106.8	144.5	83.8
	American Indian	75	489	61	625	29.0	193.6	183.1	136.0
	Black	10	34	6	50	16.8	48.3	59.1	41.8
	Asian/Pacific Islander	3	6	3	12	9.4	13.1	57.1	23.6
	Total	353	2,505	727	3,585	19.2	95.7	122.9	73.3
Female	White	25	383	312	721	4.5	30.5	69.4	27.2
	Hispanic	41	310	156	507	4.8	29.4	70.3	29.6
	American Indian	23	207	42	272	8.7	74.2	93.2	56.0
	Black	2	12	3	18	4.2	19.7	24.5	15.8
	Asian/Pacific Islander	1	5	3	9	4.6	8.6	38.6	12.5
	Total	93	917	517	1,526	5.2	33.9	70.1	30.6
Total	White	109	1,246	714	2,069	9.3	50.6	87.4	40.9
	Hispanic	222	1,422	412	2,056	12.8	67.9	103.2	56.1
	American Indian	98	696	103	898	18.7	131.0	131.2	93.5
	Black	13	47	8	68	10.6	34.9	39.9	28.5
	Asian/Pacific Islander	4	10	6	21	7.1	10.7	45.8	17.2
	Total	446	3,421	1,244	5,111	12.3	64.3	93.6	51.4

* 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-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED DEATH (continued)

Problem Statement (continued)

Table 1 shows that death rates from alcohol-related causes increase with age. However, there are 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 (almost twice the state rate for both males and females); and the 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 have the highest rates of alcohol-related death, with rates roughly twice the state rate and almost 4 times the national rate (see Chart 2). Several other counties (Cibola, San Miguel, Taos, and San Juan) have a substantial burden (20 or more alcohol-related deaths per year) and rates more than twice the U.S. rate (see Chart 2). 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, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	728	713	119	39	11	1,609	41.1	59.9	72.0	36.0	17.9	49.5
Catron	8	2	0	0	0	11	--	--	--	--	--	52.2
Chaves	90	65	2	2	0	159	51.5	54.6	--	--	--	51.4
Cibola	20	27	52	0	0	100	46.3	68.8	99.2	--	--	73.0
Colfax	22	22	0	0	0	44	44.1	64.4	--	--	--	51.5
Curry	38	31	1	4	0	74	27.1	50.1	--	--	--	33.6
De Baca	4	2	0	0	0	6	--	--	--	--	--	--
Dona Ana	146	168	1	3	1	319	38.8	34.0	--	--	--	35.5
Eddy	74	48	2	2	0	126	49.8	56.1	--	--	--	50.1
Grant	40	38	2	0	1	82	42.2	52.1	--	--	--	48.6
Guadalupe	2	12	0	0	0	14	--	99.0	--	--	--	83.1
Harding	1	1	0	0	0	2	--	--	--	--	--	--
Hidalgo	7	11	0	0	0	18	--	73	--	--	--	60.5
Lea	74	42	1	5	0	122	46.9	49.3	--	--	--	44.0
Lincoln	30	10	3	0	0	43	31.3	37.5	--	--	--	35.5
Los Alamos	21	4	0	0	0	25	23.0	--	--	--	--	22.5
Luna	29	26	0	0	1	56	44.2	45.1	--	--	--	41.7
McKinley	20	16	302	2	0	340	44.5	51.4	132.5	--	--	107.6
Mora	2	9	0	0	0	12	--	--	--	--	--	46.9
Otero	66	27	29	2	1	125	32.6	35.3	142.3	--	--	39.3
Quay	23	8	0	1	0	32	62.5	--	--	--	--	54.6
Rio Arriba	19	143	51	0	0	213	58.7	97.7	166.6	--	--	100.6
Roosevelt	14	10	0	0	0	25	23.5	35.4	--	--	--	28.5
Sandoval	105	65	67	1	1	240	34.6	46.9	82.4	--	--	44.0
San Juan	115	34	215	1	0	365	39.6	42.7	88.3	--	--	58.6
San Miguel	17	89	1	0	0	108	43.0	80.7	--	--	--	68.5
Santa Fe	151	192	20	2	1	365	44.5	63.6	64.9	--	--	53.0
Sierra	40	9	0	0	0	49	64.9	--	--	--	--	57.7
Socorro	17	29	12	0	0	59	46.5	76.5	115.6	--	--	68.5
Taos	35	68	7	0	1	111	50.1	80.1	--	--	--	66.6
Torrance	33	22	1	0	0	57	74.7	91.4	--	--	--	77.8
Union	5	4	1	0	0	11	--	--	--	--	--	43.0
Valencia	71	108	6	2	1	188	46.7	65.1	--	--	--	55.3
Total	2,069	2,056	898	68	21	5,111	40.9	56.1	93.5	28.5	17.2	51.4

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

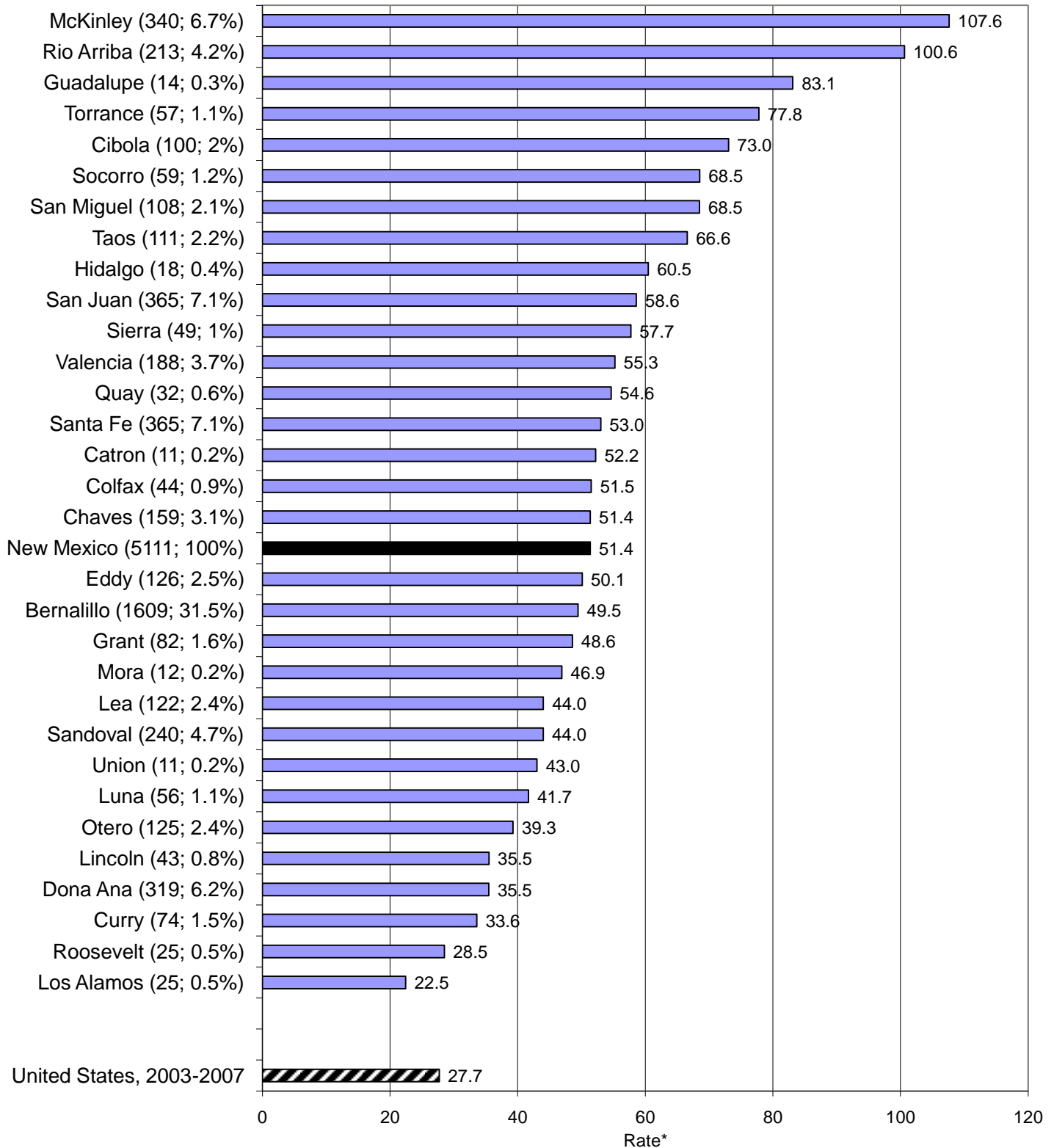
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED DEATH (continued)

Chart 2: Alcohol-Related Death Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



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

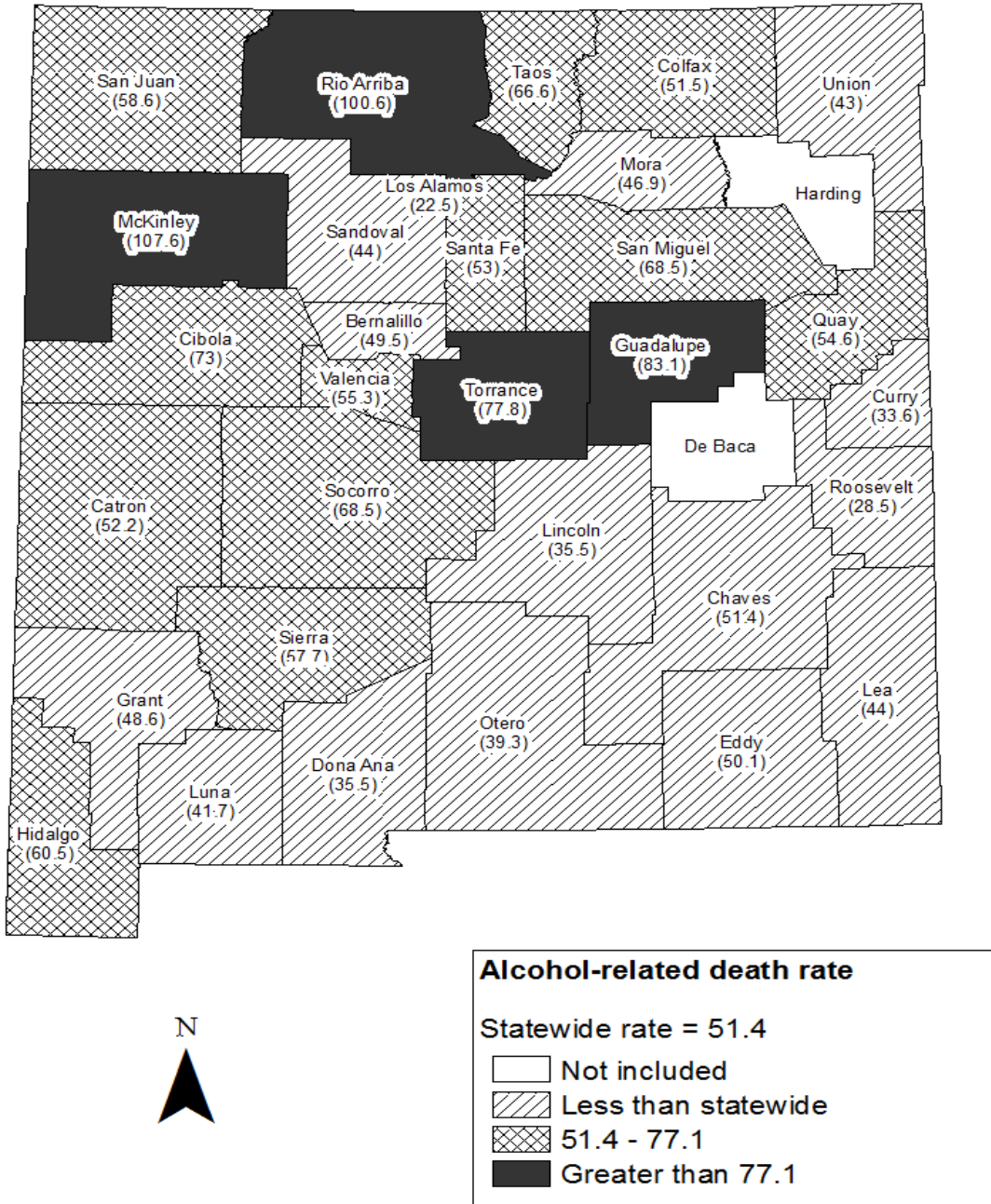
The following counties were not included due to small number of deaths (< 2 per county per year) during reported period:

De Baca, Harding

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

ALCOHOL-RELATED DEATH (continued)

Chart 3: Alcohol-Related Death Rates* by County, New Mexico, 2005-2009



* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period
 Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED CHRONIC DISEASE DEATH

Problem Statement

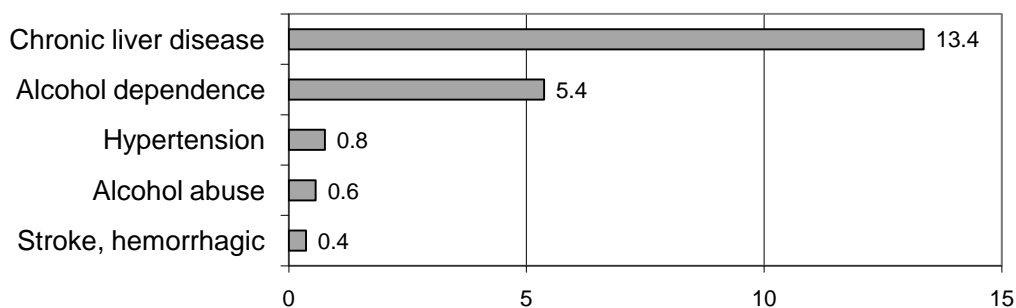
Chronic heavy drinking (defined as drinking, on average, more than two drinks per day for men, and more than one drink per day for women) often is associated with alcoholism or alcohol dependence, and can cause or contribute to a number of diseases, including alcoholic liver cirrhosis. For the past 15 years, New Mexico's death rate from alcohol-related chronic disease has consistently been first or second in the nation, and 1.5 to 2 times the national rate. Furthermore, while the national death rate from alcohol-related chronic disease decreased 16% from 1990-2007, New Mexico's rate remained high and unchanged.

Chart 1 shows the five leading causes of alcohol-related chronic disease death in New Mexico during 2005-2009. Alcohol-related 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 in a later section of this report. New Mexico also had the highest rate of alcohol dependence death in the U.S. for the period 1999 through 2007 (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 age 25-64 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, 2005-2009

Alcohol-related* deaths due to:



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

Rate **

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

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

Table 1: Alcohol-Related Chronic Disease Deaths/Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	1	412	193	606	0.2	34.1	52.6	22.0
	Hispanic	4	564	175	743	0.4	54.2	98.9	42.5
	American Indian	4	267	42	312	1.4	105.7	125.0	72.4
	Black	0	8	3	11	0.3	10.7	35.4	11.6
	Asian/Pacific Islander	0	1	1	2	0.4	3.4	15.5	4.9
	Total	9	1,253	414	1,675	0.5	47.9	69.9	33.0
Female	White	0	191	110	302	0.1	15.2	24.5	10.3
	Hispanic	3	160	84	247	0.4	15.1	37.8	13.8
	American Indian	1	149	31	181	0.4	53.6	68.0	37.9
	Black	0	7	2	9	0.1	11.5	16.4	8.9
	Asian/Pacific Islander	0	2	2	3	0.1	3.0	20.0	4.0
	Total	5	509	228	742	0.3	18.8	31.0	13.8
Total	White	2	603	303	908	0.1	24.5	37.1	15.9
	Hispanic	7	724	259	990	0.4	34.6	64.9	27.5
	American Indian	5	416	73	494	0.9	78.4	92.1	53.9
	Black	0	15	5	20	0.2	11.1	24.9	10.0
	Asian/Pacific Islander	0	3	2	6	0.2	3.2	18.3	4.4
	Total	14	1,761	642	2,417	0.4	33.1	48.3	23.0

* 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-BBER population files; CDC ARDI; SAEP

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 2-3 times higher than female rates, across most racial/ethnic groups (except Blacks and Asian/Pacific Islanders). American Indians are most at risk among the race/ethnic groups, with both total rates and male and female rates more than twice the corresponding state rates. As mentioned earlier, Hispanic males are also at elevated risk, with rates 1.3 times the state rate for males (42.5 vs. 33.0), and almost twice the total state rate (42.5 vs. 23.0).

Table 2 shows that McKinley, Rio Arriba, and Cibola counties have the highest death rates for diseases associated with chronic heavy alcohol use. In these counties, the rates are 3 to 5 times the national rate of 12.0 (see Chart 2). The high rates in McKinley and Cibola counties 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 McKinley and Cibola 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: Alcohol-Related Chronic Disease Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	340	345	68	13	3	768	17.5	29.6	43.7	12.8	--	22.3
Catron	3	2	0	0	0	5	--	--	--	--	--	--
Chaves	37	22	1	1	0	61	19.6	20.2	--	--	--	19.2
Cibola	8	14	31	0	0	53	--	38.9	57.9	--	--	36.8
Colfax	12	12	0	0	0	25	21.2	34.3	--	--	--	25.7
Curry	16	17	1	1	0	36	10.8	31.9	--	--	--	15.8
De Baca	1	0	0	0	0	1	--	--	--	--	--	--
Dona Ana	63	83	0	2	0	147	14.5	17.0	--	--	--	15.6
Eddy	24	21	0	0	0	46	13.8	25.5	--	--	--	16.3
Grant	13	17	1	0	1	32	10.5	23.5	--	--	--	17.2
Guadalupe	1	5	0	0	0	6	--	--	--	--	--	--
Harding	0	1	0	0	0	1	--	--	--	--	--	--
Hidalgo	4	7	0	0	0	11	--	--	--	--	--	33.7
Lea	31	15	1	0	0	48	16.7	21.3	--	--	--	17.0
Lincoln	15	3	1	0	0	19	11.8	--	--	--	--	11.5
Los Alamos	9	2	0	0	0	11	--	--	--	--	--	8.0
Luna	14	12	0	0	0	26	16.0	24.6	--	--	--	18.1
McKinley	9	8	170	0	0	187	--	--	79.7	--	--	61.3
Mora	0	4	0	0	0	4	--	--	--	--	--	--
Otero	30	16	15	0	0	61	13.4	19.2	78.2	--	--	18.0
Quay	13	4	0	0	0	18	32.6	--	--	--	--	26.8
Rio Arriba	8	71	37	0	0	116	--	47.8	117.6	--	--	52.8
Roosevelt	4	4	0	0	0	8	--	--	--	--	--	--
Sandoval	50	34	39	0	1	123	14.9	26.5	48.6	--	--	21.9
San Juan	39	13	102	0	0	154	11.2	15.9	43.8	--	--	23.7
San Miguel	7	47	1	0	0	56	--	40.2	--	--	--	33.1
Santa Fe	63	101	13	0	0	177	14.3	32.4	43.9	--	--	22.4
Sierra	21	5	0	0	0	26	28.7	--	--	--	--	27.5
Socorro	8	12	6	0	0	26	--	30.9	--	--	--	29.4
Taos	15	34	4	0	0	53	14.8	35.7	--	--	--	26.9
Torrance	16	12	1	0	0	29	28.1	53.3	--	--	--	34.8
Union	1	3	1	0	0	5	--	--	--	--	--	--
Valencia	32	44	2	1	0	79	18.4	28.5	--	--	--	21.9
Total	908	990	494	20	6	2,417	15.9	27.5	53.9	10.0	--	23.0

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

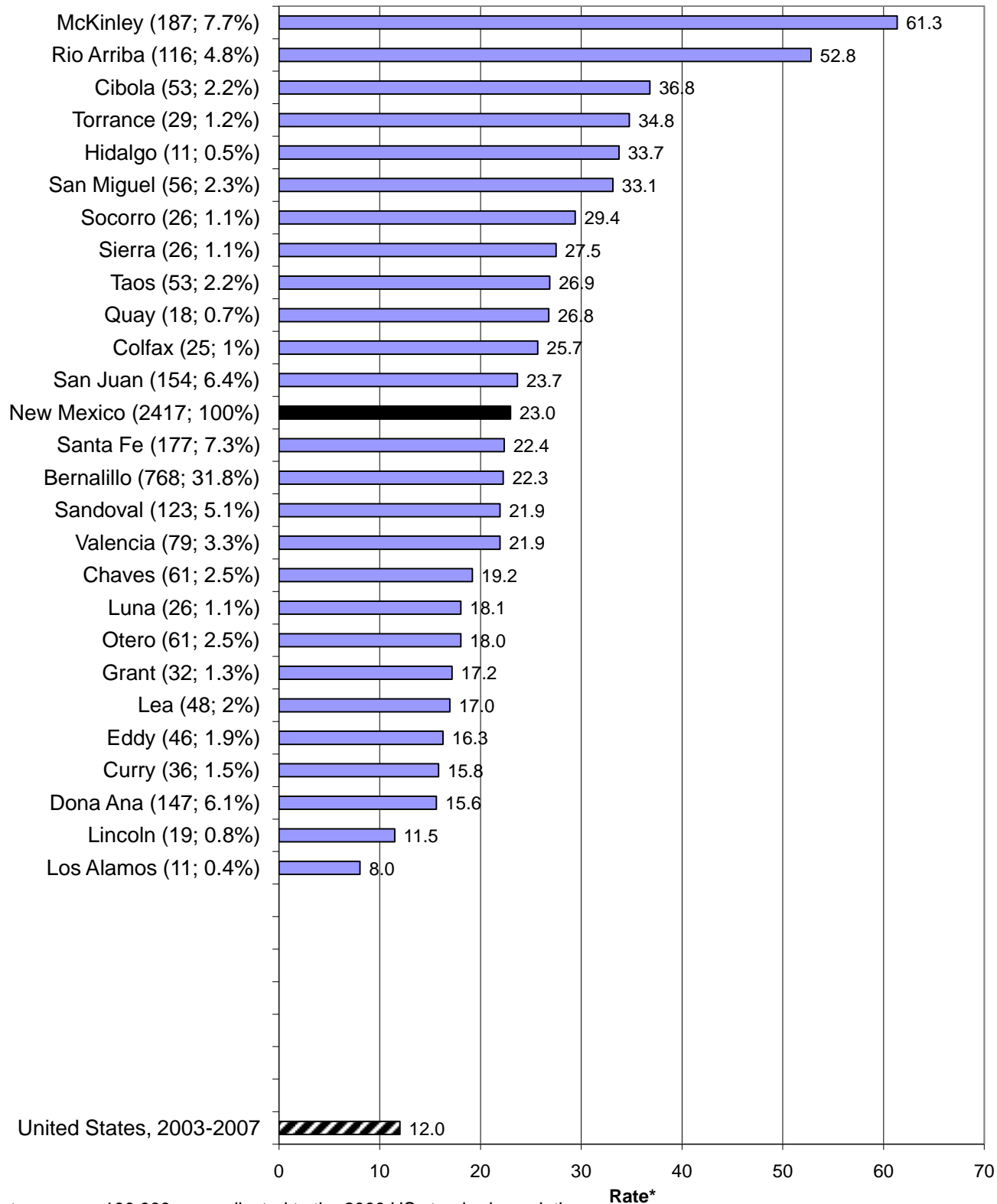
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 2: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2005-2009

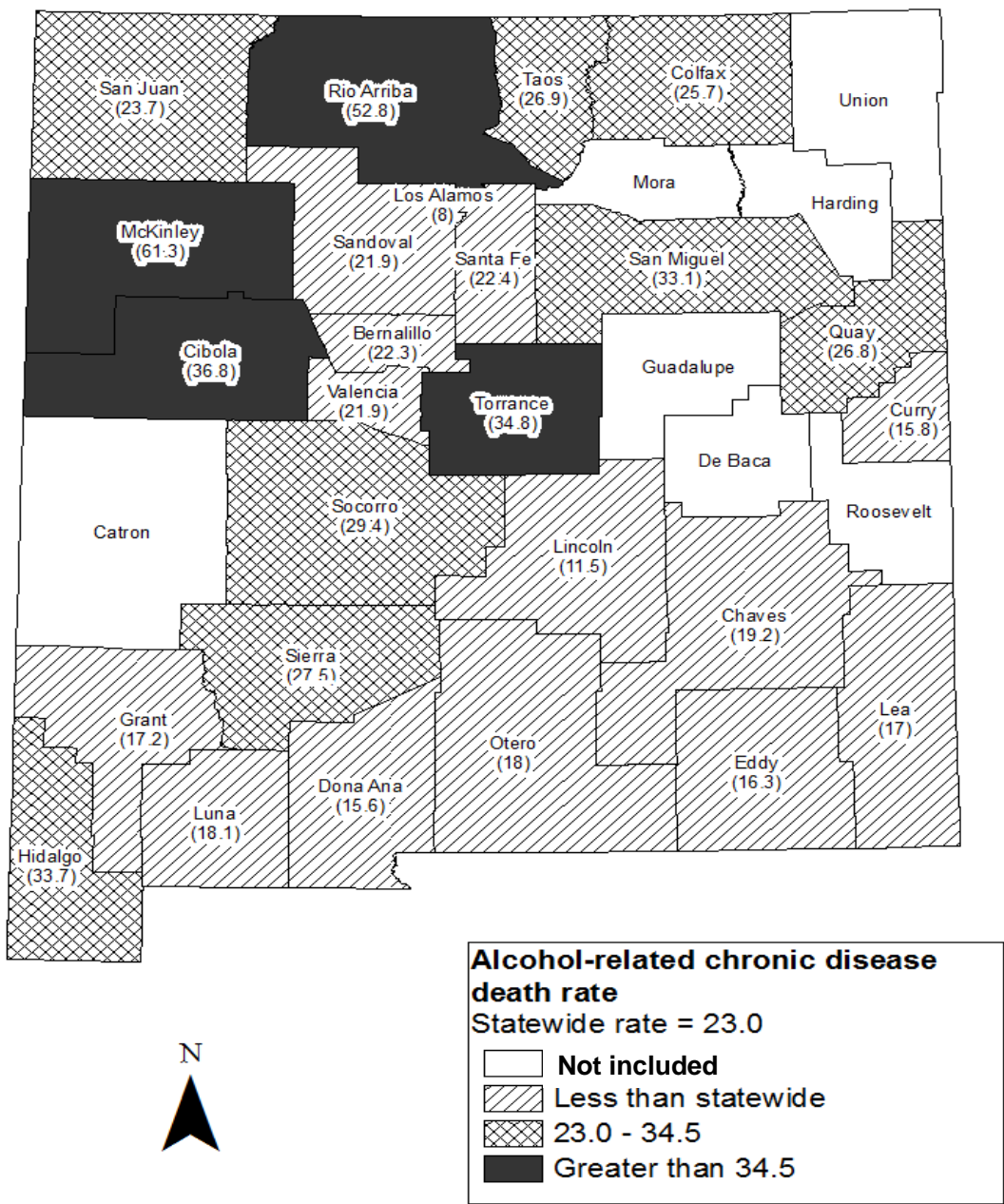
County (# of deaths; % of statewide deaths)



* All rates are per 100,000, age-adjusted to the 2000 US standard population
 The following counties were not included due to small number of deaths (< 2 per county per year) during reported period:
 Catron, De Baca, Guadalupe, Harding, Mora, Roosevelt, Union
 Sources: NMDOH BVRHS death files and UNM-BBER population files (NM); NCHS death and population files (US); CDC ARDI; SAEP

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 3: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2005-2009



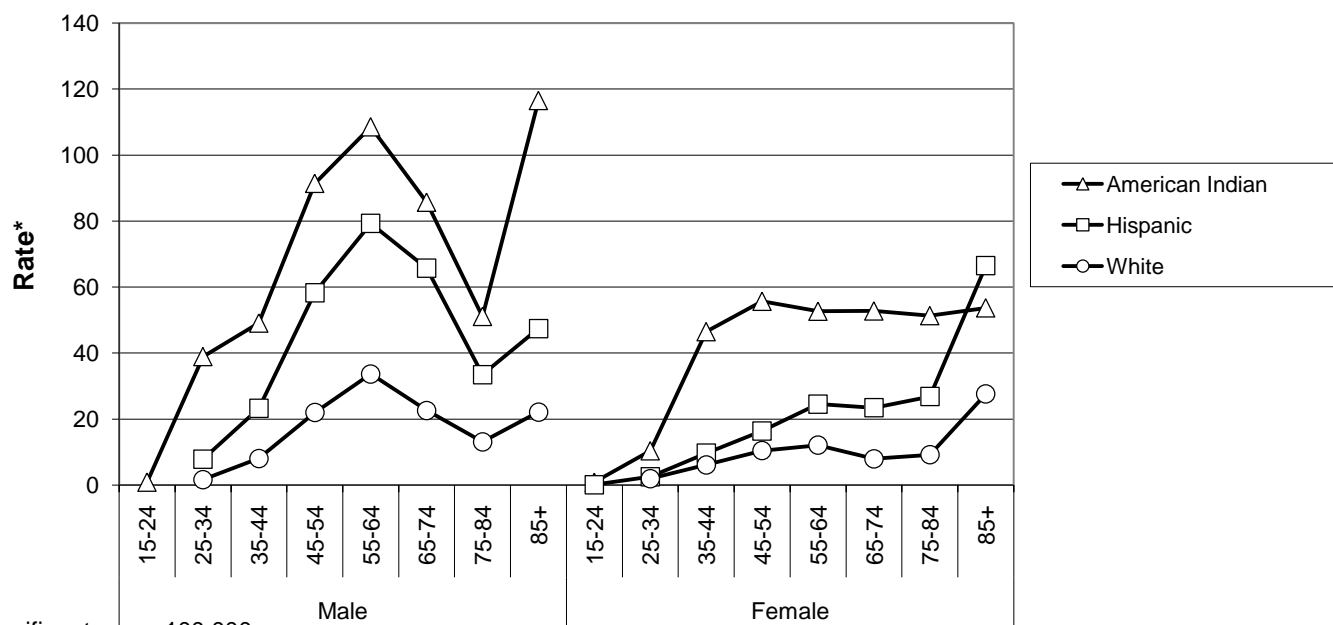
* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period
 Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEF

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH

Problem Statement

Alcohol-related chronic liver disease (AR-CLD) is a progressive chronic disease caused by chronic 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 27 years, New Mexico's AR-CLD rate has increased 25%, whereas the national rate has decreased 25%. New Mexico has had the highest AR-CLD death rate in the U.S. for most of this period, including every year from 1999 through 2007 (the most recent year for which state comparison data is available). In 1993, AR-CLD surpassed alcohol-related motor vehicle crash death as the leading cause of alcohol-related death in New Mexico. Since 1998, New Mexico's death rate from AR-CLD has consistently been 45-50% 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, 2005-2009



* Age-specific rates per 100,000

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

Table 1: Alcohol-Related CLD Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	0	215	70	285	0.0	17.8	19.0	9.9
	Hispanic	0	383	94	477	0.0	36.8	53.3	26.2
	American Indian	1	166	25	193	0.4	65.9	76.2	44.9
	Black	0	3	0	3	0.0	3.9	4.3	2.9
	Asian/Pacific Islander	0	0	0	0	0.0	0.9	0.0	0.5
	Total	1	768	190	959	0.1	29.3	32.1	18.3
Female	White	0	105	44	149	0.0	8.4	9.8	5.1
	Hispanic	0	126	60	187	0.0	12.0	27.0	10.1
	American Indian	1	113	24	137	0.4	40.4	52.3	27.8
	Black	0	5	1	6	0.0	7.7	8.6	5.1
	Asian/Pacific Islander	0	0	1	1	0.0	0.0	15.6	1.6
	Total	1	349	130	480	0.1	12.9	17.7	8.7
Total	White	0	320	114	434	0.0	13.0	14.0	7.4
	Hispanic	0	509	154	664	0.0	24.3	38.6	17.9
	American Indian	2	279	49	330	0.4	52.5	62.4	35.7
	Black	0	8	1	9	0.0	5.7	6.6	3.9
	Asian/Pacific Islander	0	0	1	2	0.0	0.4	9.5	1.2
	Total	2	1,116	320	1,439	0.1	21.0	24.1	13.4

* 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-BBER population files; CDC ARDI; SAEP

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 age 35-64 range represent a tremendous burden in terms of years of potential life lost (YPLLs, which estimate the average years a person would have lived if he or she had not died prematurely). For the period 2001-2005, New Mexico AR-CLD decedents lost an average of 26 years of potential life (data not shown).

Chart 2 shows that AR-CLD death rates in Rio Arriba and McKinley counties are more than 5 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, Santa Fe) have both high rates 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's 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, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	161	245	44	6	1	458	8.2	20.3	29.3	--	--	13.0
Catron	1	1	0	0	0	2	--	--	--	--	--	--
Chaves	20	15	1	1	0	37	9.9	13.4	--	--	--	11.2
Cibola	2	11	21	0	0	35	--	31.5	39.1	--	--	23.6
Colfax	8	8	0	0	0	16	--	--	--	--	--	16.3
Curry	8	10	1	0	0	19	--	18.2	--	--	--	8.3
De Baca	0	0	0	0	0	0	--	--	--	--	--	--
Dona Ana	29	60	0	0	0	89	6.6	12.0	--	--	--	9.3
Eddy	11	16	0	0	0	27	6.4	18.4	--	--	--	9.5
Grant	5	11	0	0	0	16	--	13.5	--	--	--	7.6
Guadalupe	0	3	0	0	0	3	--	--	--	--	--	--
Harding	0	0	0	0	0	0	--	--	--	--	--	--
Hidalgo	4	5	0	0	0	8	--	--	--	--	--	--
Lea	16	12	0	0	0	28	9.1	15.2	--	--	--	10.0
Lincoln	6	1	0	0	0	7	--	--	--	--	--	--
Los Alamos	4	1	0	0	0	6	--	--	--	--	--	--
Luna	4	5	0	0	0	8	--	--	--	--	--	--
McKinley	2	4	115	0	0	121	--	--	52.1	--	--	38.7
Mora	0	3	0	0	0	3	--	--	--	--	--	--
Otero	19	10	10	0	0	39	8.2	11.3	55.7	--	--	11.1
Quay	7	4	0	0	0	11	--	--	--	--	--	15.8
Rio Arriba	6	48	24	0	0	78	--	32.1	79.0	--	--	35.2
Roosevelt	1	4	0	0	0	5	--	--	--	--	--	--
Sandoval	21	25	25	0	0	72	5.7	18.5	31.4	--	--	11.9
San Juan	19	7	66	0	0	92	5.1	--	28.5	--	--	14.0
San Miguel	4	29	0	0	0	33	--	24.8	--	--	--	19.4
Santa Fe	30	60	11	0	0	102	5.8	18.0	38.5	--	--	12.0
Sierra	8	4	0	0	0	12	--	--	--	--	--	12.8
Socorro	2	8	6	0	0	15	--	--	--	--	--	17.5
Taos	8	21	3	0	0	32	--	22.3	--	--	--	16.1
Torrance	10	6	0	0	0	15	16.2	--	--	--	--	18.4
Union	1	2	1	0	0	4	--	--	--	--	--	--
Valencia	17	27	0	1	0	46	9.5	17.8	--	--	--	12.4
Total	434	664	330	9	2	1,439	7.4	17.9	35.7	--	--	13.4

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

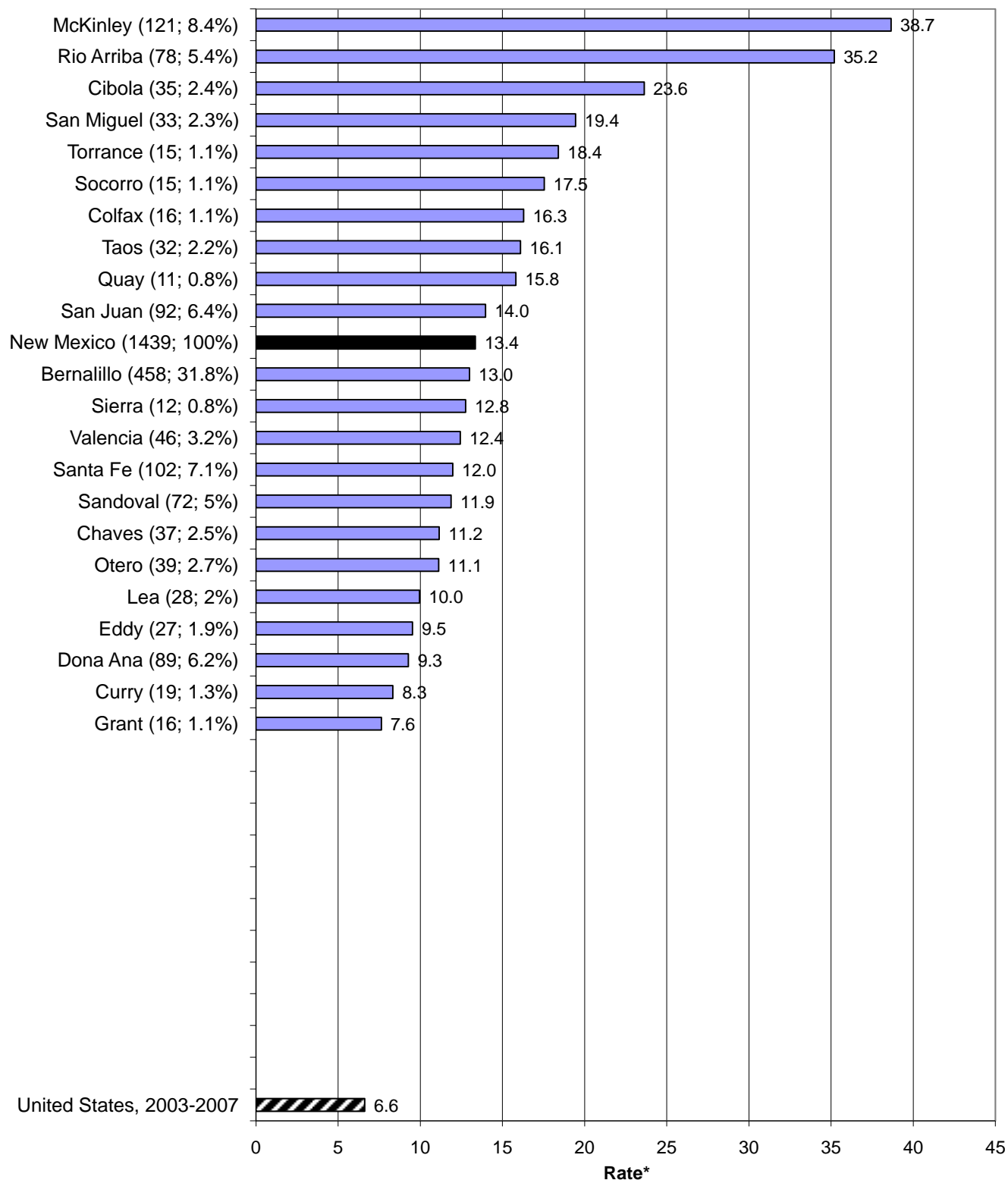
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

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

Chart 2: Alcohol-Related CLD Death Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



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

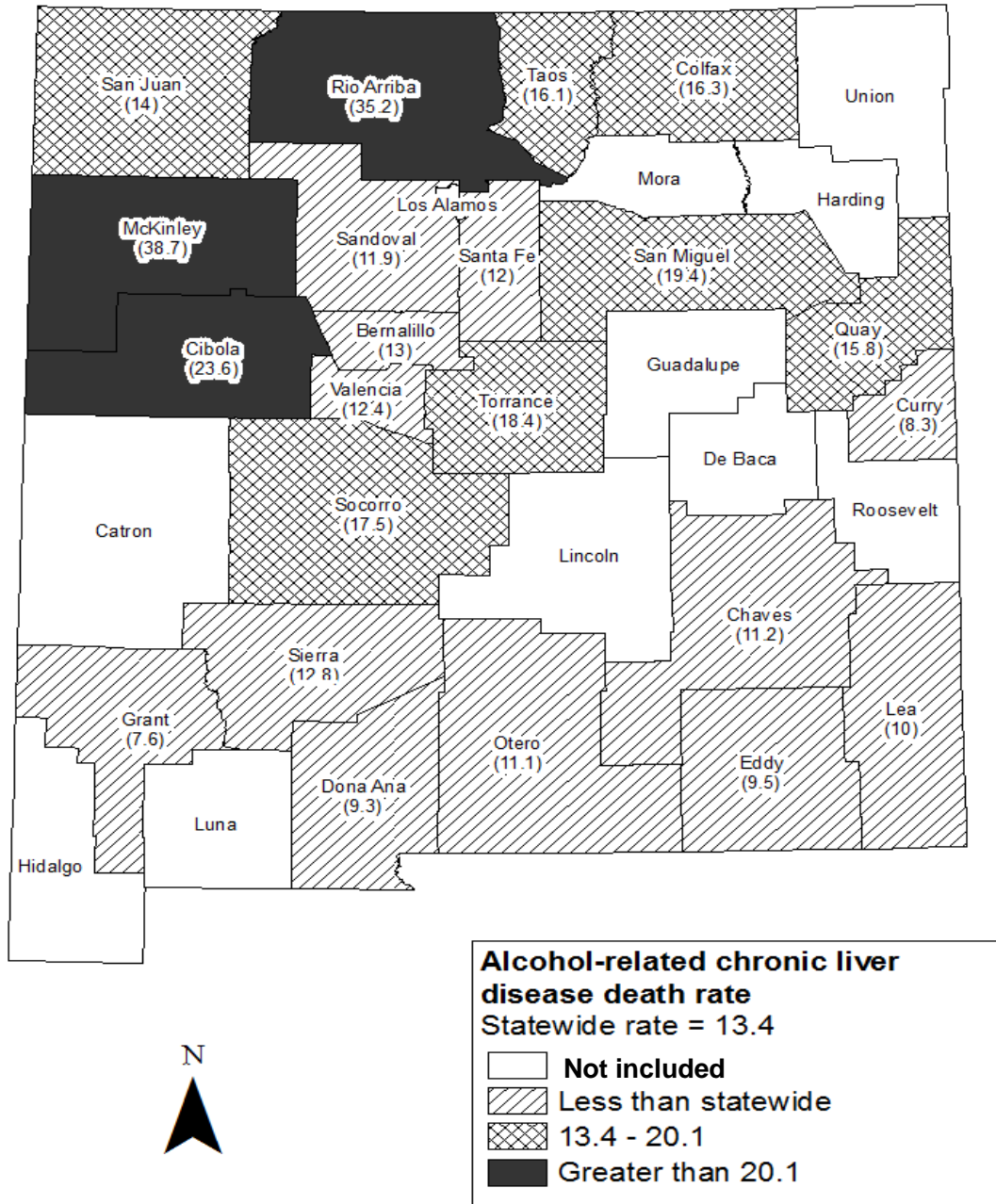
The following counties were not included due to small number of deaths (< 2 per county per year) during reported period:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Lincoln, Los Alamos, Luna, Mora, Roosevelt, Union

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

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

Chart 3: Alcohol-Related CLD Death Rates* by County, New Mexico, 2005-2009



* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period
 Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

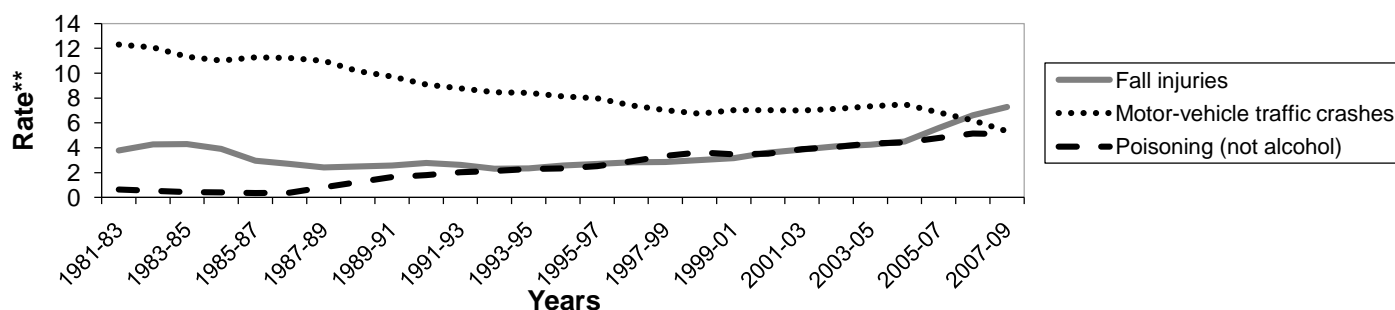
ALCOHOL-RELATED INJURY DEATH

Problem Statement

Acute or episodic heavy drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) also called binge drinking, 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 AR motor vehicle crash death rates have declined more than 30% 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 1990s. 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 18.2% increase in New Mexico's AR injury death during the period 1990 through 2007. During the period 2005-2009, AR falls injury 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), especially among American Indian and Hispanic males. Deaths in this age category represent a very large burden of premature mortality (years of potential life lost). For the period 2001-2005, New Mexico AR injury decedents (and their families and communities) lost an average of 35 years of potential life (data not shown).

Chart 1: Top 3 Leading Causes of Alcohol-Related Injury Death (from 2005-2009), New Mexico, 1981-2009



* Rates reflect only alcohol-related 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-BBER population files; CDC ARDI; SAEP

Table 1: Alcohol-Related Injury Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	82	451	209	742	13.5	37.4	57.0	33.6
	Hispanic	178	547	81	806	20.1	52.6	45.6	41.3
	American Indian	72	222	19	313	27.7	87.9	58.1	63.7
	Black	10	27	2	39	16.5	37.6	23.7	30.2
	Asian/Pacific Islander	3	4	2	9	9.0	9.7	41.6	18.7
	Total	344	1,252	313	1,910	18.7	47.8	53.0	40.3
Female	White	25	192	202	419	4.4	15.3	44.9	16.9
	Hispanic	38	150	72	260	4.4	14.3	32.5	15.8
	American Indian	22	58	11	91	8.2	20.7	25.2	18.1
	Black	2	5	1	8	4.1	8.2	8.0	6.9
	Asian/Pacific Islander	1	3	1	6	4.5	5.7	18.6	8.5
	Total	88	408	288	784	5.0	15.1	39.1	16.8
Total	White	107	643	411	1,161	9.1	26.1	50.3	25.1
	Hispanic	215	698	153	1,066	12.4	33.3	38.3	28.5
	American Indian	93	280	31	404	17.8	52.6	39.1	39.7
	Black	12	32	3	47	10.4	23.9	15.0	18.5
	Asian/Pacific Islander	4	7	3	15	6.9	7.5	27.6	12.8
	Total	432	1,660	602	2,694	11.9	31.2	45.3	28.4

* 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-BBER population files; CDC ARDI; SAEP

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 2-4 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 1.9 times 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 roughly 3 times the U.S. rate. More than a third of New Mexico counties have rates more than twice the U.S. rate (see Chart 2); and more than half have rates more than 1.5 times the U.S. rate. A number of counties have high rates and a relatively heavy burden (roughly 20 or more alcohol-related 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, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	388	368	51	26	8	841	23.6	30.3	28.3	23.2	--	27.2
Catron	5	1	0	0	0	6	--	--	--	--	--	--
Chaves	53	43	1	0	0	98	31.9	34.4	--	--	--	32.2
Cibola	12	13	21	0	0	47	31.4	29.9	41.3	--	--	36.2
Colfax	9	10	0	0	0	19	--	30.1	--	--	--	25.9
Curry	22	14	0	2	0	39	16.4	18.2	--	--	--	17.8
De Baca	3	2	0	0	0	5	--	--	--	--	--	--
Dona Ana	83	85	1	1	1	172	24.3	17.0	--	--	--	19.9
Eddy	50	27	2	2	0	80	36.0	30.6	--	--	--	33.8
Grant	27	20	1	0	0	49	31.7	28.6	--	--	--	31.4
Guadalupe	1	7	0	0	0	8	--	--	--	--	--	--
Harding	1	0	0	0	0	1	--	--	--	--	--	--
Hidalgo	3	4	0	0	0	7	--	--	--	--	--	--
Lea	43	27	0	4	0	74	30.2	27.9	--	--	--	27.1
Lincoln	15	7	2	0	0	24	19.5	--	--	--	--	24.0
Los Alamos	12	2	0	0	0	15	15.1	--	--	--	--	14.4
Luna	15	14	0	0	1	30	28.2	20.5	--	--	--	23.7
McKinley	11	7	132	2	0	153	26.1	--	52.8	--	--	46.3
Mora	2	5	0	0	0	8	--	--	--	--	--	--
Otero	36	11	14	2	1	64	19.2	16.0	64.1	--	--	21.2
Quay	10	4	0	1	0	14	29.8	--	--	--	--	27.9
Rio Arriba	11	72	14	0	0	97	39.1	49.9	49.0	--	--	47.8
Roosevelt	10	6	0	0	0	17	16.8	--	--	--	--	19.0
Sandoval	56	31	28	1	1	116	19.7	20.4	33.9	--	--	22.1
San Juan	76	22	113	1	0	211	28.4	26.8	44.5	--	--	34.9
San Miguel	9	42	0	0	0	52	--	40.5	--	--	--	35.4
Santa Fe	88	91	7	2	1	188	30.3	31.2	--	--	--	30.7
Sierra	19	4	0	0	0	23	36.2	--	--	--	--	30.2
Socorro	9	17	7	0	0	33	--	45.6	--	--	--	39.1
Taos	20	34	3	0	1	58	35.3	44.4	--	--	--	39.7
Torrance	17	11	0	0	0	29	46.6	38.1	--	--	--	43.0
Union	4	1	0	0	0	6	--	--	--	--	--	--
Valencia	39	64	4	1	1	109	28.3	36.5	--	--	--	33.3
Total	1,161	1,066	404	47	15	2,694	25.1	28.5	39.7	18.5	12.8	28.4

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

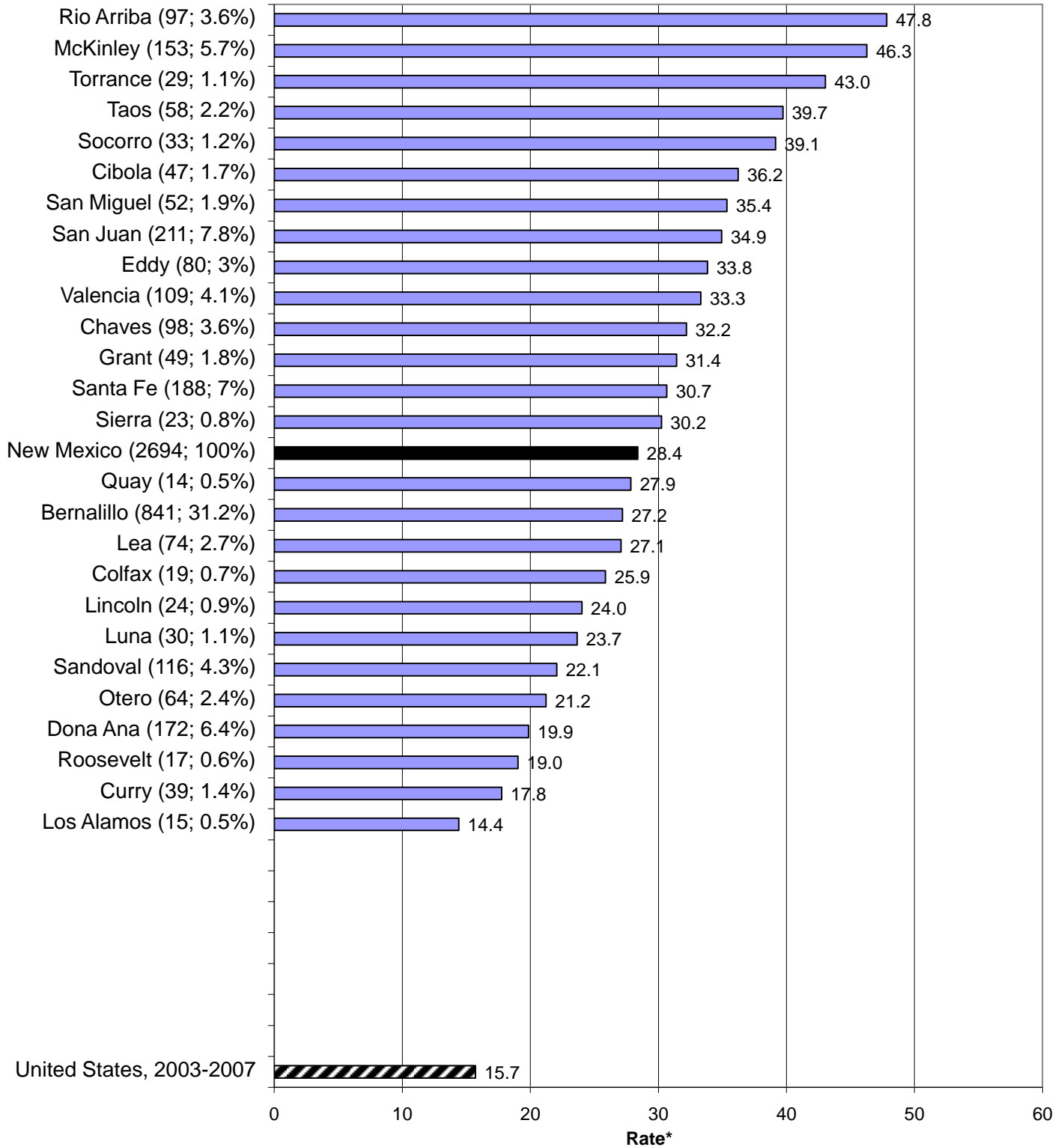
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 2: Alcohol-Related Injury Death Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



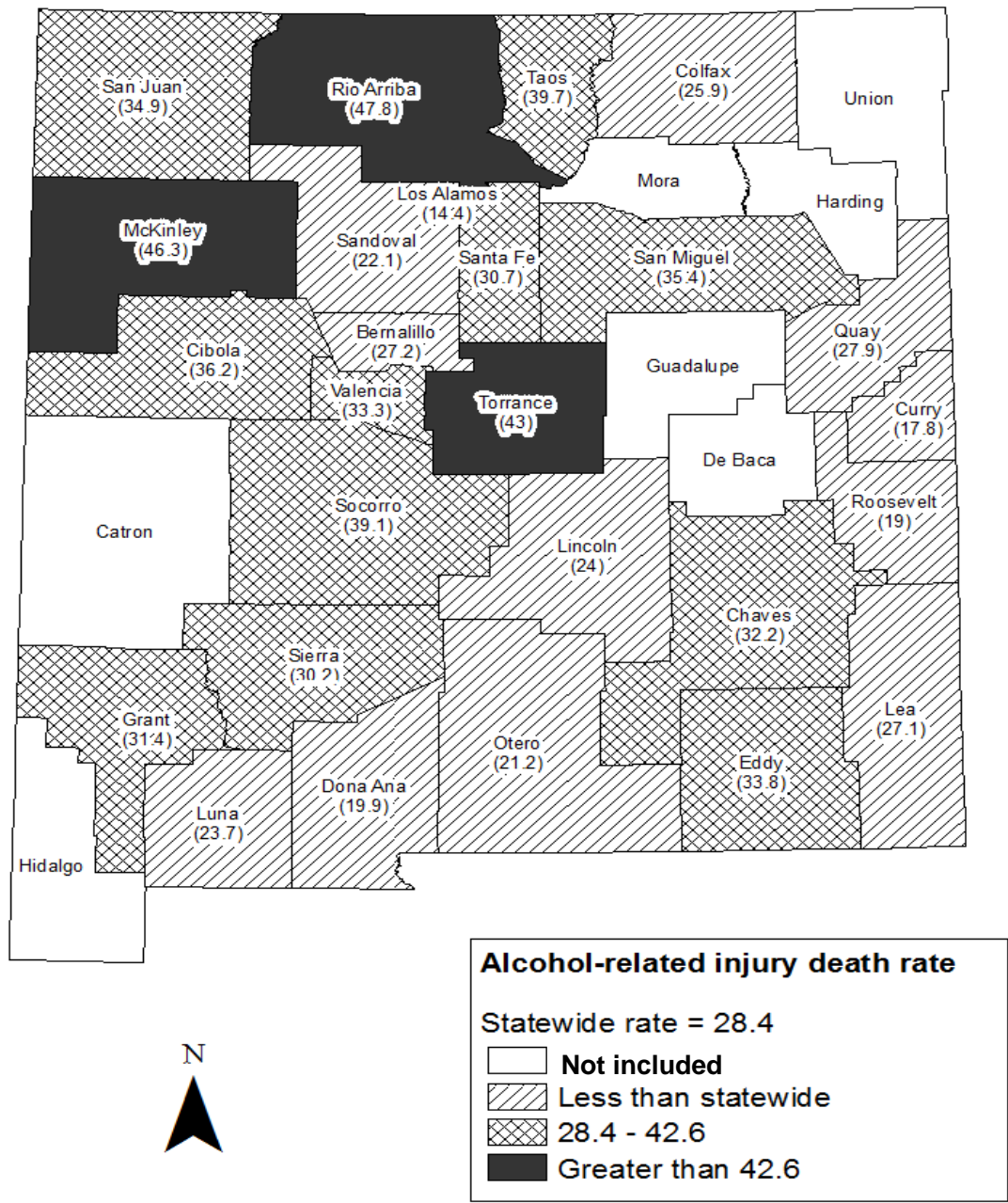
* All rates are per 100,000, age-adjusted to the 2000 US standard population

The following counties were not included due to small number of deaths (< 2 per county per year) during reported period: Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

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

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 3: Alcohol-Related Injury Death Rates* by County, New Mexico, 2005-2009



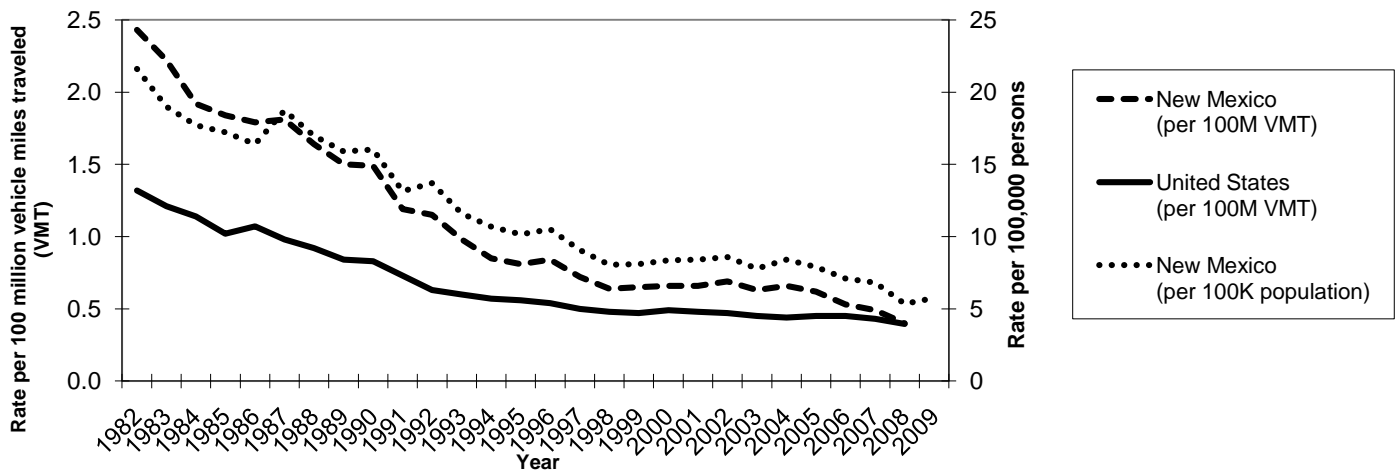
* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period
 Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Problem Statement

Alcohol-related motor vehicle 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 using a public health approach, both nationally and in New Mexico. From 1982 through 2009, 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 74% and dropping New Mexico from 1st to 12th 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 2007 was one-fifth what it was in 1982. 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 2005 through 2008 (the most recent year for which VMT estimates are available) New Mexico's AI-MVTC fatality rate per 100 million VMT dropped 36%.

Chart 1: Alcohol-Impaired MVTC Fatality Rates*, New Mexico and United States, 1982-2009



* 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); 2009 rates per 100M VMT not yet available at time of report

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

Table 1: Alcohol-Related MVTC Deaths/Rates^{1,2} by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	34	115	12	162	5.7	9.5	3.4	7.5
	Hispanic	71	134	6	210	8.0	12.8	3.2	9.7
	American Indian	31	71	1	103	12.0	28.0	3.5	18.8
	Black	2	6	0	8	2.8	8.4	4.1	5.7
	Asian/Pacific Islander	1	1	0	3	3.7	2.9	2.6	3.1
	Total	139	326	20	485	7.5	12.5	3.3	9.6
Female	White	10	30	5	46	1.8	2.4	1.1	2.1
	Hispanic	19	33	2	54	2.2	3.1	0.9	2.5
	American Indian	11	20	1	32	4.3	7.1	1.4	5.3
	Black	1	1	0	2	1.5	1.5	0.6	1.4
	Asian/Pacific Islander	1	1	0	1	2.2	1.3	0.0	1.4
	Total	43	85	8	135	2.4	3.1	1.1	2.6
Total	White	45	145	18	207	3.8	5.9	2.1	4.8
	Hispanic	90	166	8	264	5.2	7.9	1.9	6.1
	American Indian	42	91	2	135	8.1	17.0	2.3	11.7
	Black	3	7	0	10	2.2	5.2	2.2	3.6
	Asian/Pacific Islander	2	2	0	4	3.0	2.1	1.0	2.2
	Total	182	411	28	620	5.0	7.7	2.1	6.1

* 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-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Problem Statement (continued)

Table 1 shows the demographic distribution of AR-MVTC deaths in New Mexico. Because demographic data is not readily available from the system of record for motor vehicle crash death (the Fatality Analysis Reporting System used for Charts 1-3), death certificate data for alcohol-related motor vehicle crash deaths was 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 to 3.5 times the corresponding White rates -- among American Indian males and females ages 15-54. Hispanic and White male rates are highest in the age range 15-54, with a slight elevation of Hispanic rates relative to White rates. There are no meaningful differences between White and Hispanic female rates across the age range. Chart 2 shows that McKinley, Rio Arriba and San Juan counties have both substantial AI-MVTC fatalities and high rates; other counties have high rates but fewer deaths. Table 2 shows that the McKinley and San Juan county rates are driven by the American Indian rates (both male and female rates are high, data not shown); and that the Rio Arriba County rate is driven by the Hispanic rate (the male rate is high, data not shown).

Table 2: Alcohol-Related MVTC Deaths and Rates^{*,1,2} by Race/Ethnicity and County, New Mexico, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	49	63	14	5	2	132	3.1	4.6	7.2	--	--	4.0
Catron	2	0	0	0	0	2	--	--	--	--	--	--
Chaves	11	12	0	0	0	24	8.0	9.0	--	--	--	7.9
Cibola	3	5	6	0	0	13	--	--	--	--	--	9.3
Colfax	3	1	0	0	0	4	--	--	--	--	--	--
Curry	5	7	0	0	0	13	--	--	--	--	--	5.2
De Baca	1	1	0	0	0	2	--	--	--	--	--	--
Dona Ana	10	24	0	0	0	35	3.1	3.6	--	--	--	3.3
Eddy	13	8	0	0	0	22	11.2	--	--	--	--	9.2
Grant	4	5	0	0	0	9	--	--	--	--	--	--
Guadalupe	1	2	0	0	0	2	--	--	--	--	--	--
Harding	0	0	0	0	0	0	--	--	--	--	--	--
Hidalgo	1	1	0	0	0	2	--	--	--	--	--	--
Lea	15	12	0	1	0	28	11.1	8.7	--	--	--	9.6
Lincoln	3	2	0	0	0	5	--	--	--	--	--	--
Los Alamos	1	1	0	0	0	2	--	--	--	--	--	--
Luna	4	7	0	0	1	11	--	--	--	--	--	8.5
McKinley	3	1	47	1	0	52	--	--	15.9	--	--	13.7
Mora	0	1	0	0	0	1	--	--	--	--	--	--
Otero	5	2	4	0	0	10	--	--	--	--	--	3.1
Quay	2	1	0	0	0	3	--	--	--	--	--	--
Rio Arriba	1	20	5	0	0	26	--	12.8	--	--	--	11.9
Roosevelt	2	3	0	0	0	5	--	--	--	--	--	--
Sandoval	8	5	14	0	0	27	--	--	12.4	--	--	4.2
San Juan	20	6	37	0	0	63	7.6	--	13.5	--	--	9.9
San Miguel	3	10	0	0	0	13	--	8.8	--	--	--	8.3
Santa Fe	17	22	2	1	0	42	5.3	6.0	--	--	--	5.8
Sierra	2	1	0	0	0	2	--	--	--	--	--	--
Socorro	3	7	1	0	0	11	--	--	--	--	--	11.5
Taos	4	13	2	0	0	19	--	17.0	--	--	--	13.4
Torrance	5	4	0	0	0	9	--	--	--	--	--	--
Union	1	0	0	0	0	2	--	--	--	--	--	--
Valencia	7	19	2	0	0	28	--	9.9	--	--	--	7.6
Total	207	264	135	10	4	620	4.8	6.1	11.7	3.6	--	6.1

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

-- Excluded due to small number of deaths (< 2 per county per year) during reported period

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

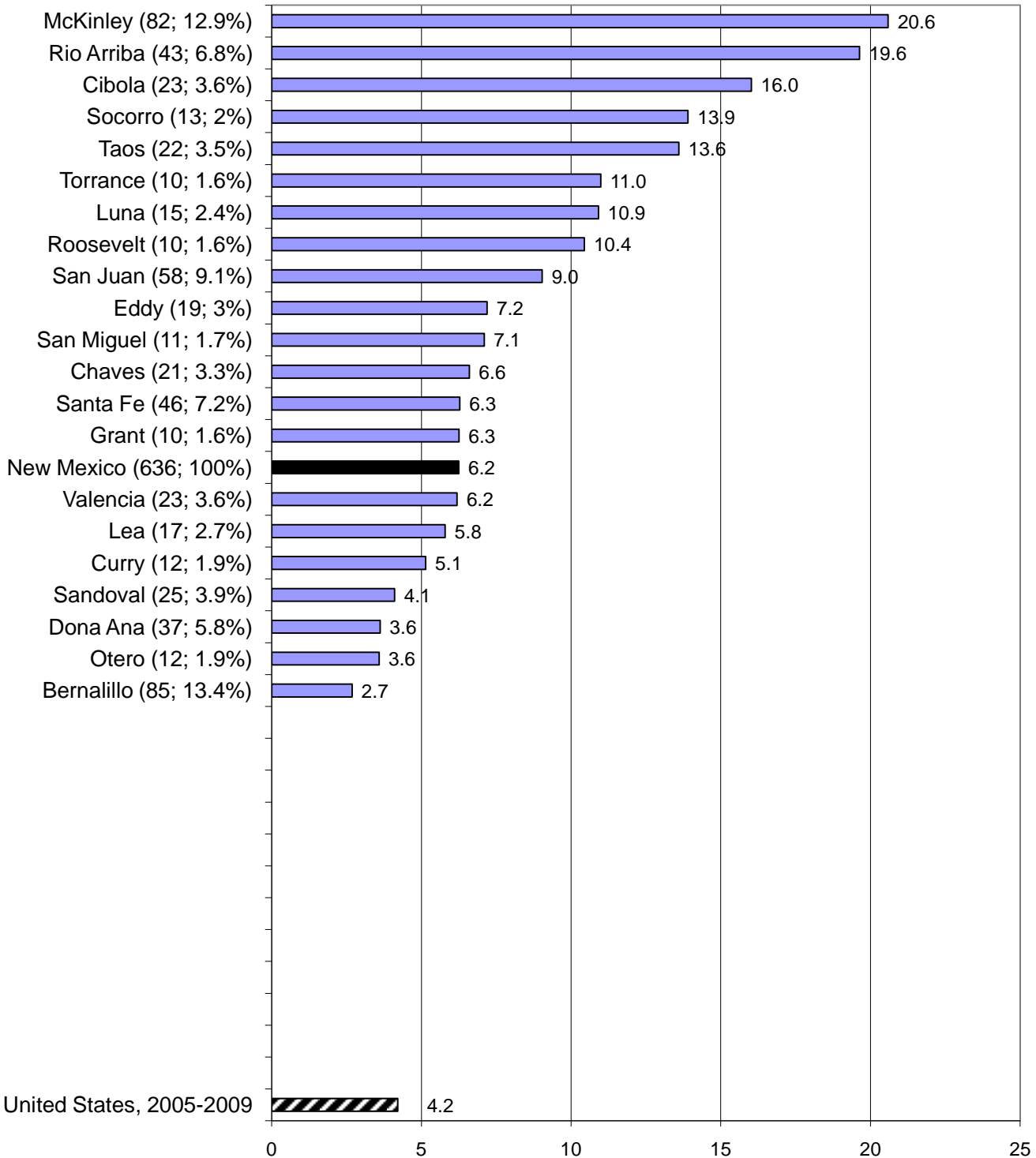
² See footnote 2 for Table 1

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Chart 2: Alcohol-Impaired MVTC Fatality Rates^{*,1,2} by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



* All rates are crude per 100,000 population

The following counties were not included due to small number of deaths (< 2 per county per year) during reported period: Catron, Colfax, De Baca, Grant, Guadalupe, Harding, Hidalgo, Lincoln, Los Alamos, Mora, Quay, Roosevelt, Sierra, Union

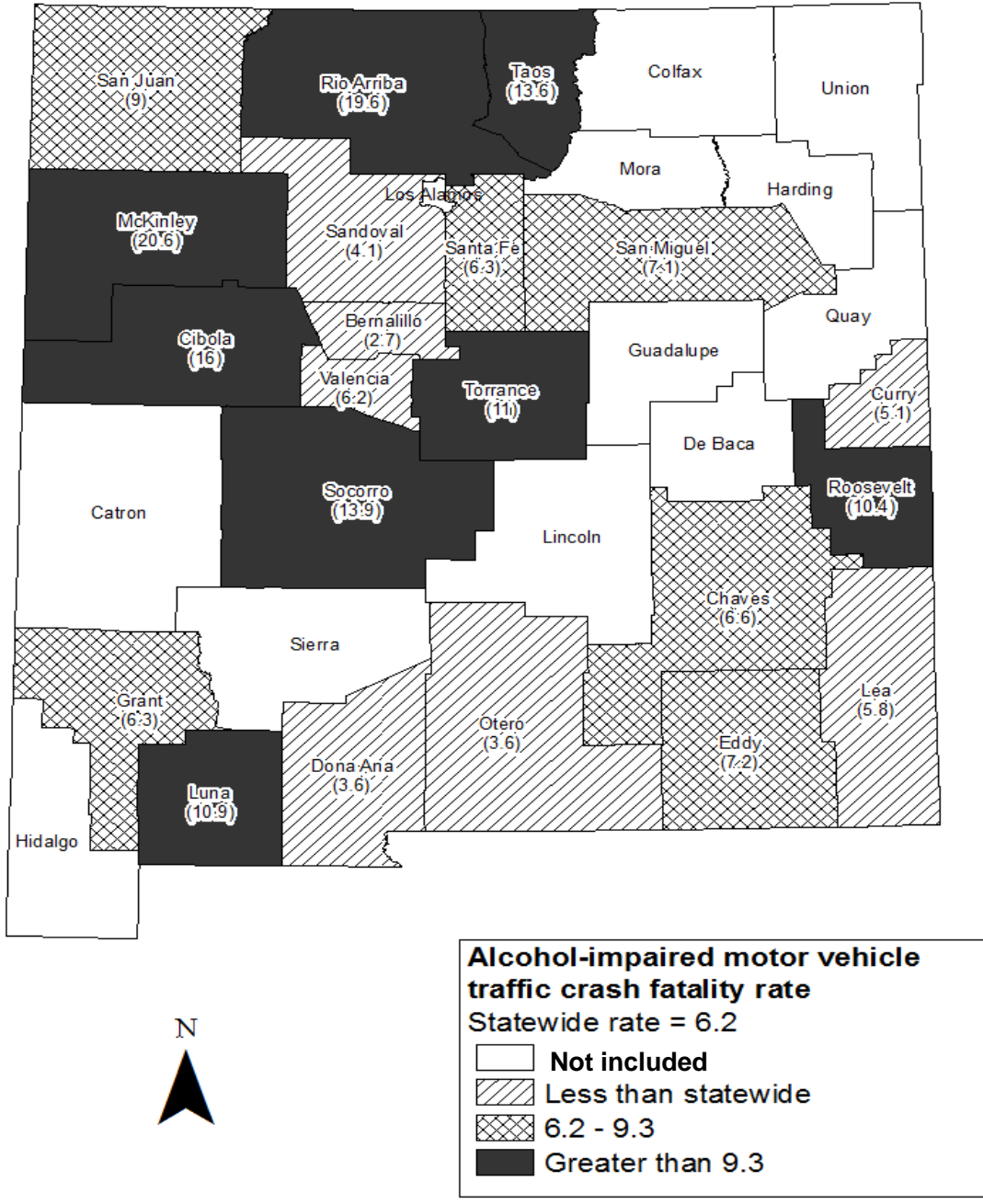
¹ Alcohol-impaired MVTC deaths are from FARS (highest driver BAC >=0.08); NM population from BBER, US population from NCHS

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

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

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Chart 3: Alcohol-Impaired MVTC Fatality Rates^{1,2} by County, New Mexico, 2005-2009



* All rates are crude per 100,000 population

Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period

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

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

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

SMOKING-RELATED DEATH

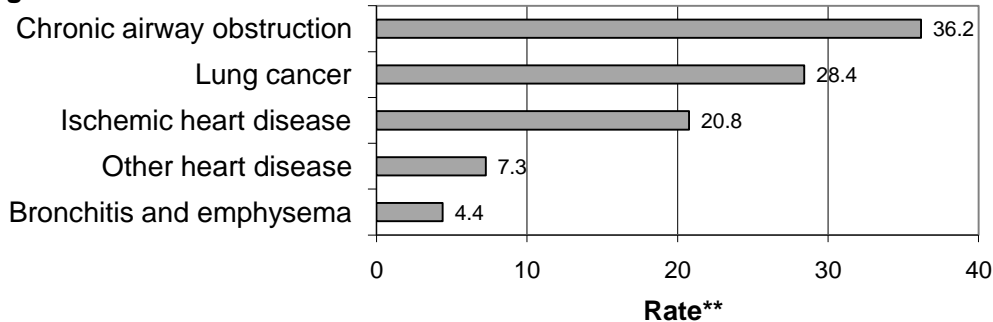
Problem Statement

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. New Mexico's smoking-related death rate is actually lower than the national rate. 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 both alcohol and drug-related deaths, both of which show a greater proportion of "premature" deaths (deaths before age 65+).

Chart 1: Leading Causes of Smoking-Related Death, New Mexico, 2005-2009

Smoking-related* deaths due to:



* 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-BBER population files; CDC SAMMEC; SAEP

Table 1: Smoking-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	0	1,148	3,300	4,449	0.0	95.0	899.7	174.7
	Hispanic	0	531	1,204	1,735	0.0	51.0	679.1	142.2
	American Indian	0	90	127	216	0.0	35.5	379.3	89.3
	Black	0	36	77	112	0.0	50.1	814.5	161.2
	Asian/Pacific Islander	0	17	12	29	0.0	38.9	239.4	72.4
	Total	0	1,822	4,719	6,541	0.0	69.6	797.4	159.1
Female	White	0	577	2,420	2,997	0.0	45.9	537.9	99.0
	Hispanic	0	239	740	979	0.0	22.7	333.0	70.6
	American Indian	0	51	79	131	0.0	18.4	174.7	43.0
	Black	0	17	40	57	0.0	27.1	340.9	77.6
	Asian/Pacific Islander	0	4	16	20	0.0	7.9	204.9	40.0
	Total	0	888	3,295	4,183	0.0	32.8	447.1	86.5
Total	White	0	1,725	5,720	7,445	0.0	70.0	700.4	132.8
	Hispanic	0	770	1,944	2,714	0.0	36.8	486.5	102.6
	American Indian	0	141	206	347	0.0	26.5	261.3	62.7
	Black	0	53	116	169	0.0	39.4	552.1	114.2
	Asian/Pacific Islander	0	22	28	49	0.0	22.0	218.4	53.1
	Total	0	2,710	8,014	10,724	0.0	50.9	603.1	118.7

* 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-BBER population files; CDC SAMMEC; SAEP

SMOKING-RELATED DEATH (continued)

Problem Statement (continued)

Table 1 also shows that male rates are 1.8 to 2 times female rates across all race/ethnic groups. Among both males and females, Whites have the highest rates followed by Blacks.

Table 2 and Chart 2 show that the counties with the highest rates and relatively heavy burdens of smoking-related death (i.e., 20 or more deaths a year) are Tarrant, Sierra, Quay, Valencia, and Socorro counties. 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 and Valencia counties; and a substantial burden of smoking-related death among Hispanics in several other counties (e.g., Dona Ana, Bernalillo, Santa Fe). The high rates of smoking-related death among Blacks in Curry and Lea counties are also notable. The smoking-related death rates among the American Indian and Asian/Pacific Islander population 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, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	2,273	818	49	80	26	3,247	116.1	93.5	53.1	124.1	55.3	107.4
Catron	23	3	1	0	0	27	107.8	--	--	--	--	98.2
Chaves	374	79	1	4	0	459	159.5	115.3	--	--	--	142.9
Cibola	73	37	25	1	2	137	155.2	111.2	70.2	--	--	115.2
Colfax	68	36	0	1	0	105	123.9	105.1	--	--	--	115.3
Curry	210	50	3	16	1	280	141.7	147.3	--	181.4	--	141.6
De Baca	18	7	0	0	0	24	173.7	--	--	--	--	142.3
Dona Ana	591	305	3	8	3	910	139.7	86.5	--	--	--	112.7
Eddy	334	63	0	8	0	406	172.3	96.8	--	--	--	150.9
Grant	171	65	1	0	0	237	150.8	95.2	--	--	--	128.3
Guadalupe	5	21	1	0	0	26	--	165.9	--	--	--	160.5
Harding	1	3	0	0	0	5	--	--	--	--	--	--
Hidalgo	26	10	0	0	0	36	152.2	94	--	--	--	125.0
Lea	319	47	1	16	1	384	164.0	113.1	--	135.1	--	149.7
Lincoln	110	18	1	0	0	129	96.9	75.9	--	--	--	91.2
Los Alamos	53	6	1	0	0	60	55.6	--	--	--	--	56.6
Luna	175	44	1	2	1	222	172.5	122.4	--	--	--	151.3
McKinley	70	23	100	4	0	196	189.0	110.8	85.4	--	--	111.2
Mora	6	23	0	0	0	30	--	122.2	--	--	--	109.2
Otero	332	63	6	7	1	409	166.1	105.0	--	--	--	146.1
Quay	87	29	0	2	1	119	166.3	238.1	--	--	--	173.8
Rio Arriba	49	133	13	2	2	198	150.7	117.5	79.7	--	--	121.6
Roosevelt	108	13	1	0	0	122	165.2	75.3	--	--	--	143.5
Sandoval	392	94	36	9	4	536	126.1	106.8	77.7	--	--	117.0
San Juan	453	53	83	2	1	592	136.0	100.6	53.0	--	--	108.8
San Miguel	50	123	1	0	1	175	132.7	127.3	--	--	--	127.0
Santa Fe	349	240	5	1	3	597	106.1	111.6	--	--	--	106.1
Sierra	182	20	1	2	0	204	187.4	126.3	--	--	--	175.7
Socorro	72	34	2	0	0	109	194.5	125.8	--	--	--	156.3
Taos	64	87	6	0	0	157	106.1	105.7	--	--	--	103.0
Tarrant	91	23	3	0	0	117	242.7	147.6	--	--	--	212.2
Union	31	8	0	0	0	39	158.9	--	--	--	--	140.1
Valencia	285	138	4	4	0	431	189.3	134.9	--	--	--	159.3
Total	7,445	2,714	347	169	49	10,724	132.8	102.6	62.7	114.2	53.1	118.7

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

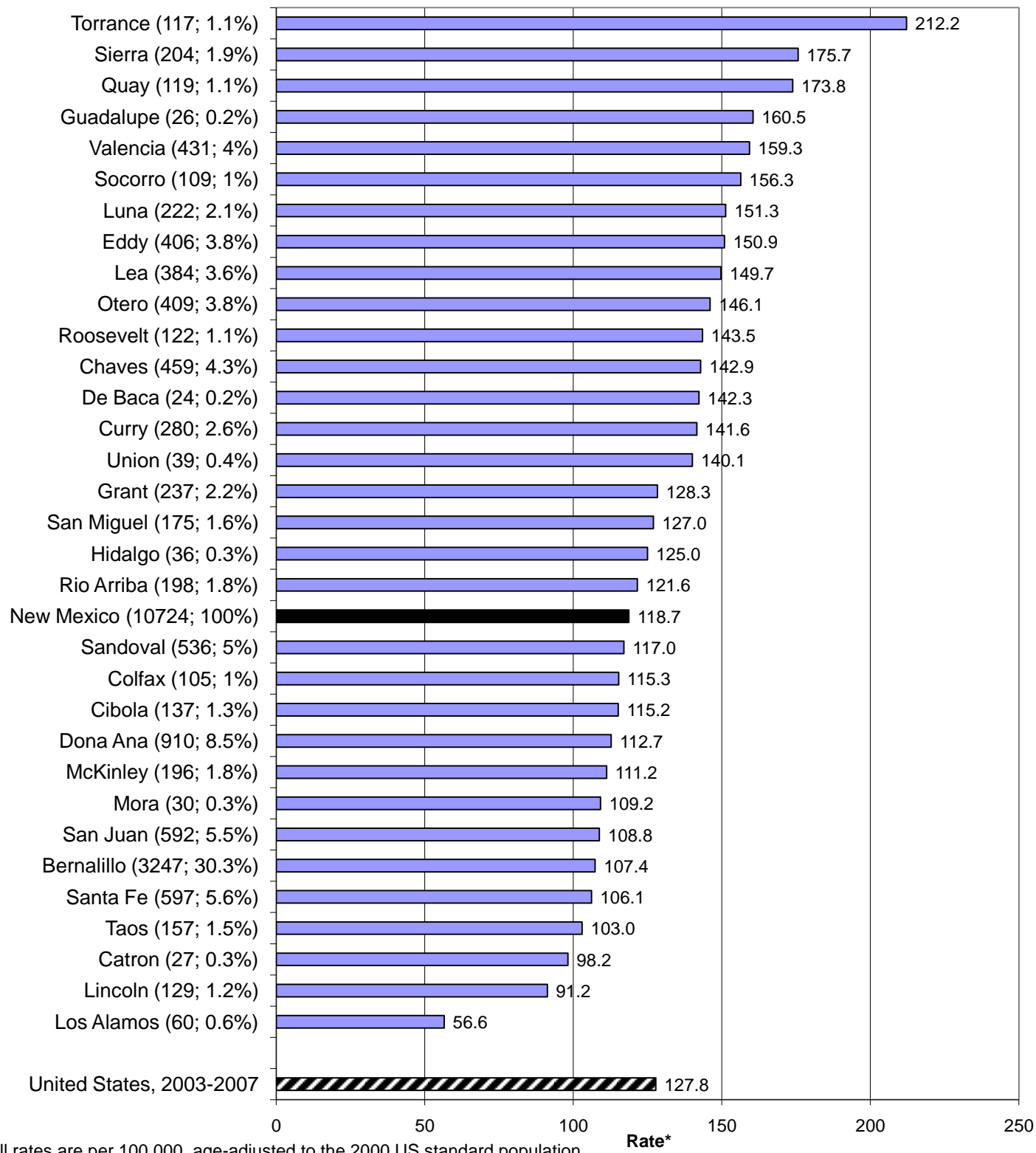
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC SAMMEC; SAEP

SMOKING-RELATED DEATH (continued)

Chart 2: Smoking-Related Death Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



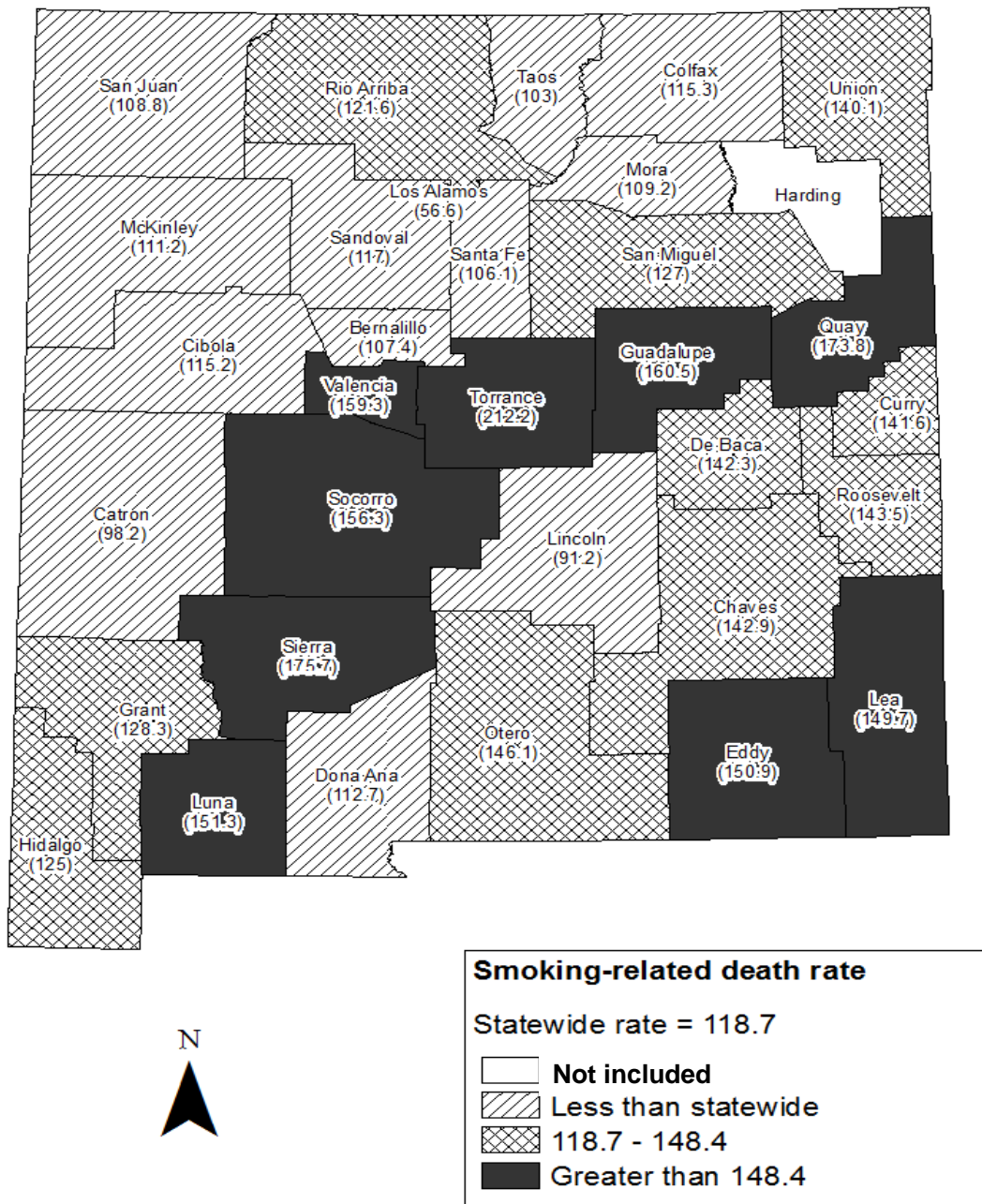
* All rates are per 100,000, age-adjusted to the 2000 US standard population

The following county was not included due to small number of deaths (< 2 per county per year) during reported period:
Harding

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

SMOKING-RELATED DEATH (continued)

Chart 3: Smoking-Related Death Rates* by County, New Mexico, 2005-2009



* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period
 Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC SAMMEC; SAEP

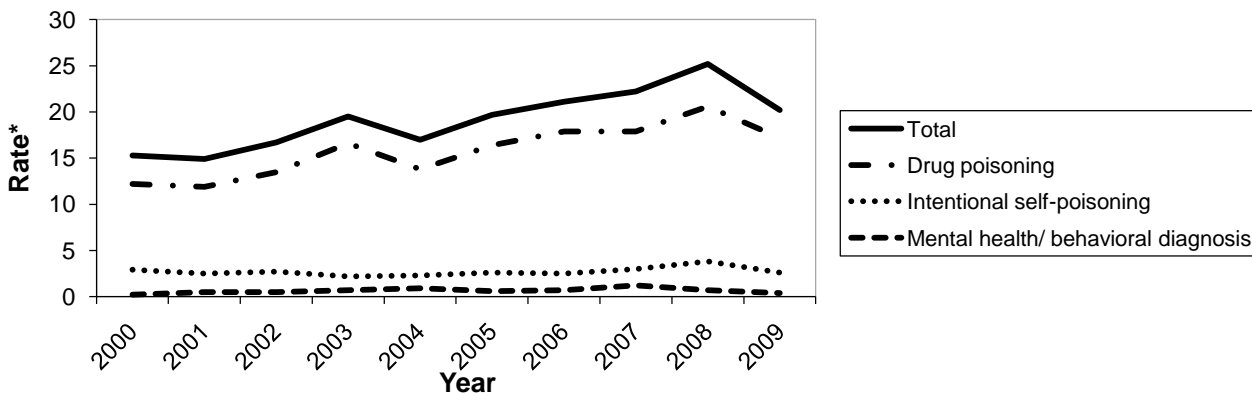
DRUG-INDUCED DEATH

Problem Statement

In 2007, New Mexico had the highest drug-induced death rate in the nation and the consequences of drug use continue to burden New Mexico communities. 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 overdose, or poisoning, is the largest subset of drug-induced death, accounting for 80-85% of drug-induced death in New Mexico (Chart 1). The other substantial cause of drug-induced death is suicide, or intentional self-poisoning, which accounts for 10-15% of all drug-induced death in New Mexico. Poisoning was the leading cause of unintentional injury in New Mexico during 2007, surpassing motor vehicle crash.

During 2005-2009, 60% of unintentional drug overdose deaths were caused primarily by illicit drugs, while 40% were caused primarily by prescription drugs. Medical examiner data indicate that the most common drug types causing death were prescription opioids (i.e., methadone, oxycodone, morphine; 49%), heroin (36%), cocaine (31%), tranquilizers/muscle relaxants (29%) and antidepressants (16%)(not mutually exclusive). The median age of unintentional drug overdose decedents was 43.7 years. In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available. Interventions are currently being formulated, assessed and implemented in-state and in communities across the country.

Chart 1: Drug-Induced Death Rates* by Cause Category, New Mexico, 2000-2009



* Rate per 100,000, age-adjusted to the 2000 US standard population
Sources: NMDOH BVRHS death files and UNM-BBER population files

Table 1: Drug-Induced Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	48	460	25	533	7.9	38.1	6.8	23.5
	Hispanic	83	679	14	776	9.4	65.2	7.9	37.9
	American Indian	16	57	1	74	6.2	22.6	3.0	13.7
	Black	3	29	0	32	5.0	40.7	0.0	23.0
	Asian/Pacific Islander	2	4	0	6	6.1	9.0	0.0	7.0
	Total	152	1,229	40	1,421	8.3	47.0	6.8	28.2
Female	White	17	378	34	429	3.0	30.1	7.6	17.2
	Hispanic	30	257	5	292	3.5	24.4	2.2	14.1
	American Indian	6	36	0	42	2.3	12.9	0.0	7.4
	Black	2	9	0	11	3.5	14.4	0.0	8.4
	Asian/Pacific Islander	0	4	0	4	0.0	7.5	0.0	4.0
	Total	55	684	39	778	3.1	25.3	5.3	14.8
Total	White	65	838	59	962	5.5	34.0	7.2	20.4
	Hispanic	113	936	19	1,068	6.5	44.7	4.8	25.9
	American Indian	22	93	1	116	4.2	17.5	1.3	10.4
	Black	5	38	0	43	4.2	28.4	0.0	16.1
	Asian/Pacific Islander	2	8	0	10	3.2	8.2	0.0	5.5
	Total	207	1,913	79	2,199	5.7	36.0	5.9	21.4

* 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-BBER population files; SAEP

DRUG-INDUCED DEATH (continued)

Problem Statement (continued)

Table 1 shows that Hispanics had the highest drug-induced death rate during 2005-2009. Hispanics also had higher unintentional drug overdose death rates by age group, compared to white decedents (Chart 4). The rates of drug-induced death (Table 1) and unintentional drug overdose death (Table 3) among males were roughly two times that of females. Among females, drug overdose death from prescription drugs was more common than from illicit drugs for women aged 45-74 years (Chart 4). Illicit drugs were the predominant drug type causing death among males across age groups, where the rates were highest among the age group of 25-54 years.

Rio Arriba County had the highest drug-induced death rate (51.1 deaths per 100,000; Chart 2) and unintentional drug overdose death rate (47.5 deaths per 100,000; Chart 5) among all New Mexico counties during 2005-2009. Rio Arriba had the third highest unintentional/undetermined drug overdose death rate in the nation during 2003-2007 (data not shown). As expected, Bernalillo County had the largest number of overdose deaths (Table 3). The death rate from prescription drugs exceeded the death rate from illicit drugs in 10 of the 24 New Mexico counties with rates reported in Table 3.

Table 2: Drug-Induced Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	362	463	30	23	4	882	22.1	34.7	15.2	20.1	--	26.5
Catron	3	0	0	0	0	3	--	--	--	--	--	--
Chaves	48	32	1	0	1	82	30.8	24.6	--	--	--	26.6
Cibola	5	11	5	0	0	21	--	24.3	--	--	--	15.1
Colfax	4	11	0	0	0	15	--	34.0	--	--	--	20.0
Curry	17	7	0	2	0	26	11.9	--	--	--	--	11.4
De Baca	1	0	0	0	0	1	--	--	--	--	--	--
Dona Ana	78	73	2	1	1	155	23.2	12.8	--	--	--	16.1
Eddy	41	26	2	1	0	70	29.1	28.2	--	--	--	28.0
Grant	22	14	0	1	0	37	30.2	19.0	--	--	--	24.0
Guadalupe	1	7	0	0	0	8	--	--	--	--	--	--
Harding	0	0	0	0	0	0	--	--	--	--	--	--
Hidalgo	1	2	0	0	0	3	--	--	--	--	--	--
Lea	30	9	0	6	0	45	21.9	--	--	--	--	16.3
Lincoln	19	1	0	0	0	20	21.4	--	--	--	--	16.4
Los Alamos	7	0	0	0	0	7	--	--	--	--	--	--
Luna	9	4	0	0	0	13	--	--	--	--	--	10.8
McKinley	13	11	22	1	0	47	26.6	40.2	7.8	--	--	13.5
Mora	3	2	0	0	0	5	--	--	--	--	--	--
Otero	39	17	5	2	0	63	19.8	17.6	--	--	--	18.8
Quay	5	5	0	0	0	10	--	--	--	--	--	20.2
Rio Arriba	15	92	4	1	0	112	47.2	61.4	--	--	--	51.1
Roosevelt	4	7	0	0	0	11	--	--	--	--	--	12.5
Sandoval	44	39	9	0	1	93	14.2	21.3	--	--	--	15.6
San Juan	56	14	19	1	0	90	20.4	14.8	6.8	--	--	14.0
San Miguel	6	29	0	0	0	35	--	28.9	--	--	--	23.5
Santa Fe	45	85	10	1	0	141	12.8	23.4	31.3	--	--	18.1
Sierra	15	1	0	0	0	16	30.8	--	--	--	--	23.1
Socorro	4	15	2	0	0	21	--	36.2	--	--	--	22.4
Taos	16	21	1	0	2	40	24.8	26.8	--	--	--	24.8
Torrance	18	7	0	1	0	26	31.9	--	--	--	--	27.9
Union	1	2	0	0	0	3	--	--	--	--	--	--
Valencia	28	61	4	2	1	96	18.0	32.2	--	--	--	25.8
Total	962	1,068	116	43	10	2,199	20.4	25.9	10.4	16.1	5.5	21.4

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

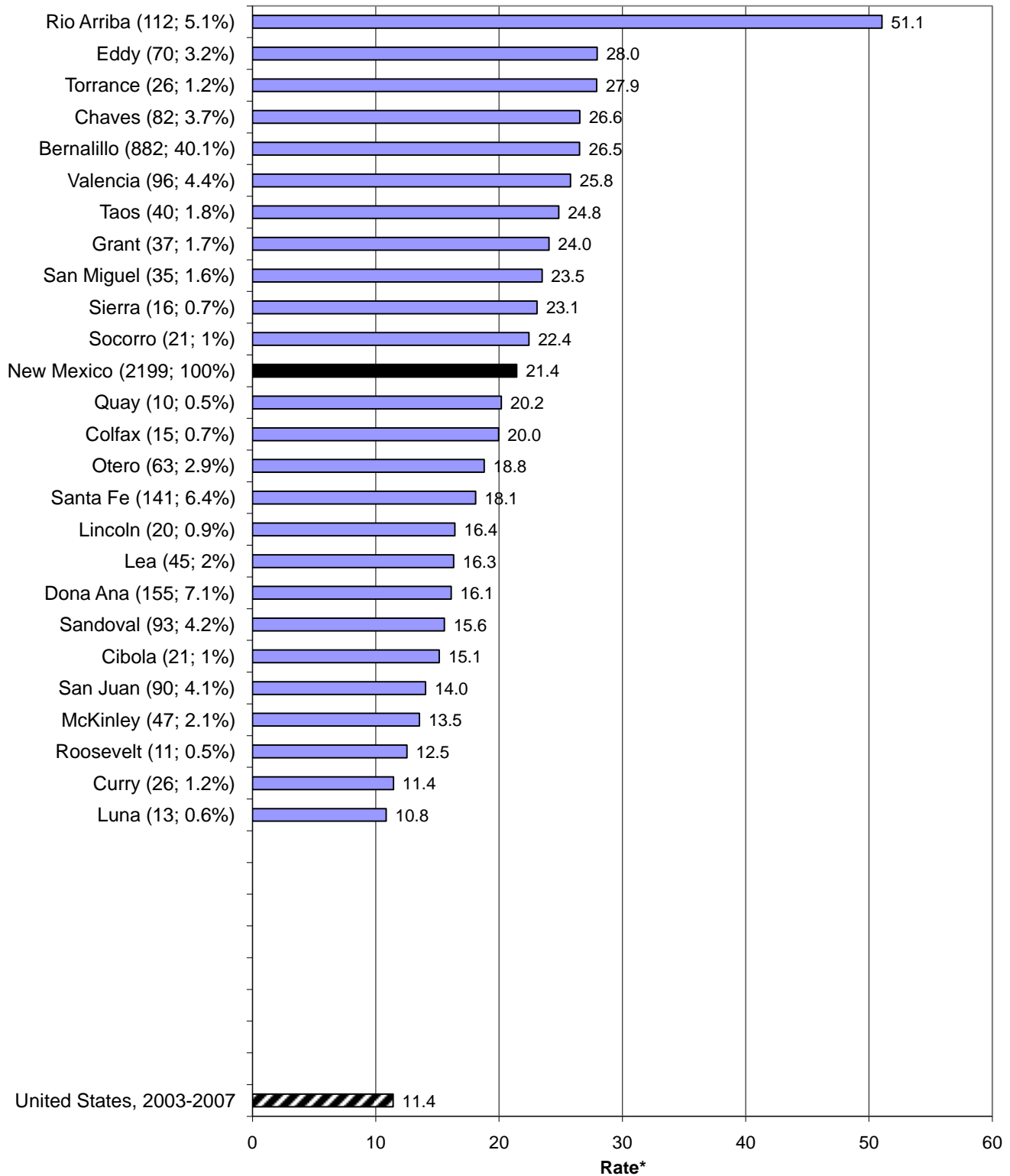
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; SAEP

DRUG-INDUCED DEATH (continued)

Chart 2: Drug-Induced Death Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



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

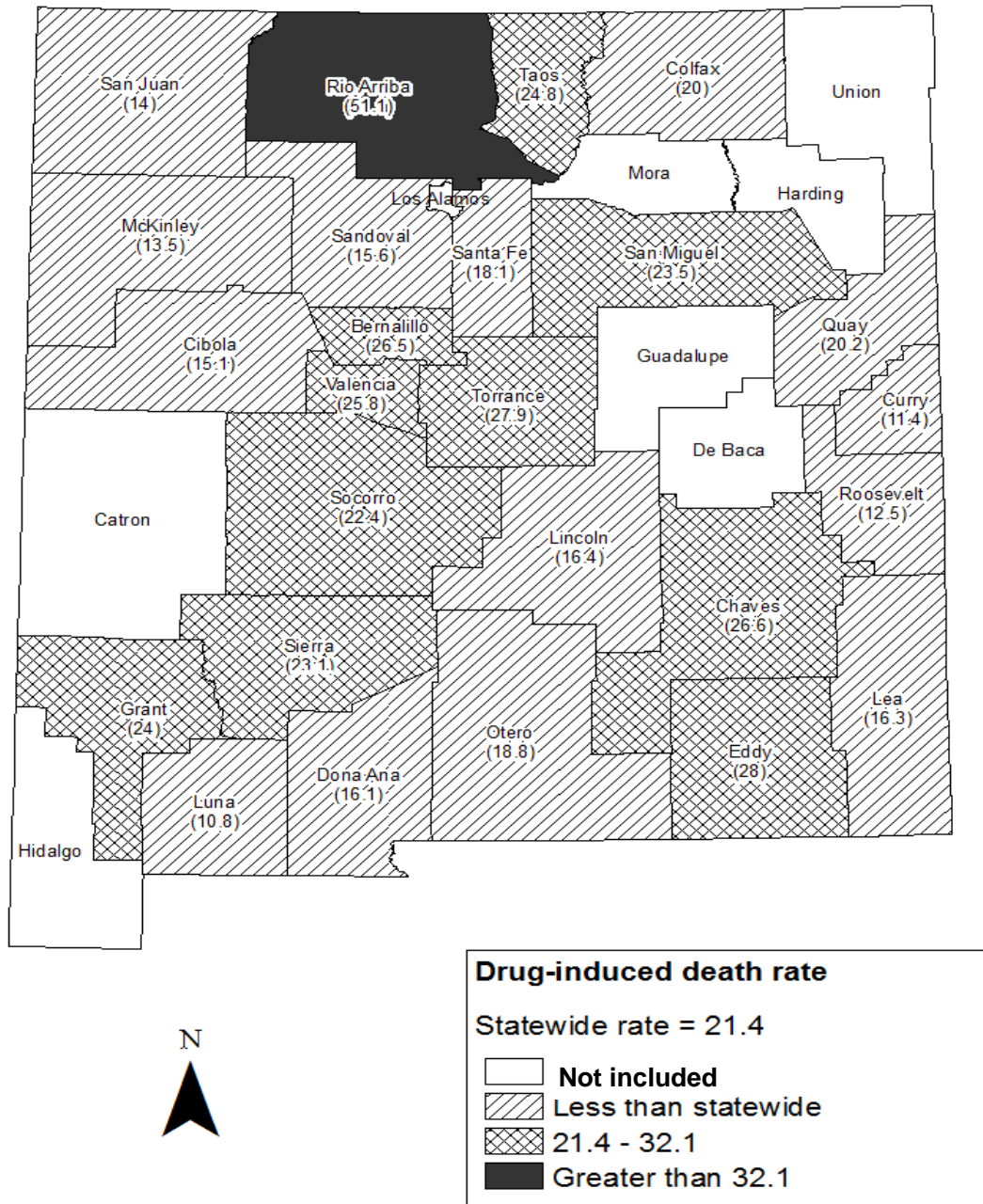
The following counties were not included due to small number of deaths (< 2 per county per year) during reported period:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Los Alamos, Mora, Union

Sources: NMDOH BVRHS death files and UNM-BBER population files (NM); NCHS death and population files (US); SAEP

DRUG-INDUCED DEATH (continued)

Chart 3: Drug-Induced Death Rates* by County, New Mexico, 2005-2009

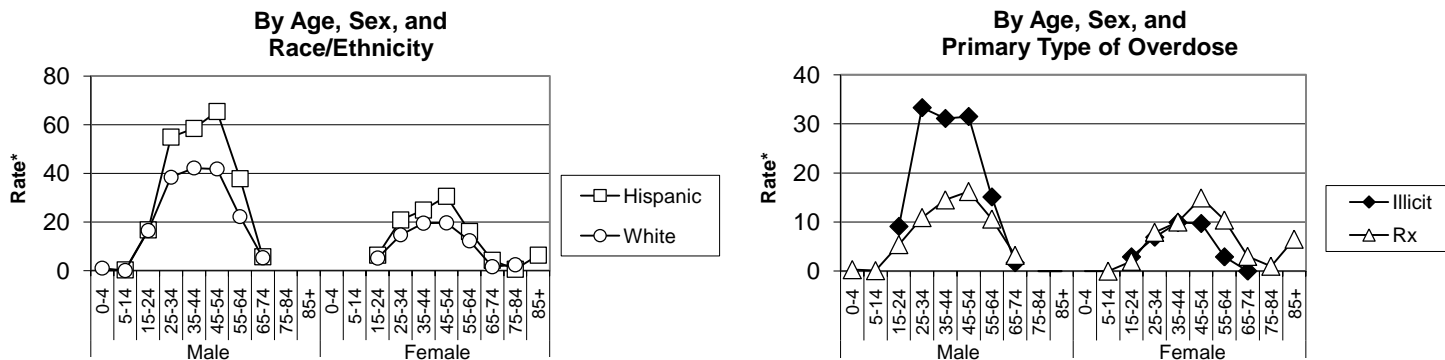


* All rates are per 100,000, age-adjusted to the 2000 US standard population
 Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; SAEP

DRUG-INDUCED DEATH (continued)

Chart 4: Unintentional Drug Overdose Death Rates* by Selected Characteristics, New Mexico, 2005-2009



* Age-specific rates per 100,000 population; drug overdose primary type categories are mutually exclusive

Source: OMI death files; UNM-BBER population files; SAEF

Table 3: Unintentional Drug Overdose Deaths and Rates*, New Mexico, 2005-2009

County	Deaths					Rates*				
	Sex		Primary Type		Total	Sex		Primary Type		Total
	Male	Female	Illicit	Rx		Male	Female	Illicit	Rx	
Bernalillo	545	234	506	275	781	33.3	13.7	15.3	8.1	23.5
Catron	3	0	2	1	3	--	--	--	--	--
Chaves	31	24	26	29	55	19.7	15.4	8.4	9.1	17.5
Cibola	16	5	13	8	21	25.1	--	9.6	--	15.3
Colfax	6	5	2	9	11	--	--	--	--	13.4
Curry	14	6	7	13	20	12.5	--	--	5.6	8.7
DeBaca	1	1	0	2	2	--	--	--	--	--
Dona Ana	72	36	58	50	108	15.7	7.1	6.1	5.1	11.2
Eddy	32	19	29	22	51	25.6	15.4	11.8	8.7	20.4
Grant	15	12	13	14	27	19.2	13.5	8.1	8.3	16.3
Guadalupe	7	2	4	5	9	--	--	--	--	--
Harding	0	0	0	0	0	--	--	--	--	--
Hidalgo	1	1	1	1	2	--	--	--	--	--
Lea	22	18	25	17	42	15.7	12.9	9.1	5.9	15.0
Lincoln	11	7	7	11	18	22.2	--	--	9.4	16.2
Los Alamos	3	3	3	3	6	--	--	--	--	--
Luna	5	5	4	6	10	--	--	--	--	8.8
McKinley	24	9	18	15	33	13.0	--	4.8	4.8	9.5
Mora	3	1	2	2	4	--	--	--	--	--
Otero	33	20	16	37	53	20.4	11.5	5.0	10.9	15.8
Quay	6	3	5	4	9	--	--	--	--	--
Rio Arriba	86	18	77	28	105	77.7	15.8	34.8	12.7	47.5
Roosevelt	10	0	6	4	10	23.0	--	--	--	11.4
Sandoval	39	24	32	33	65	12.8	7.8	5.1	5.5	10.6
San Juan	30	24	20	34	54	9.7	7.4	3.2	5.3	8.5
San Miguel	18	7	20	5	25	26.1	--	13.8	--	17.5
Santa Fe	82	31	71	42	113	21.6	7.9	9.3	5.4	14.7
Sierra	8	8	2	14	16	--	--	--	20.4	23.6
Socorro	16	4	10	10	20	33.8	--	10.7	11.3	22.1
Taos	23	13	20	16	36	29.9	14.3	11.5	11.4	22.9
Torrance	11	9	7	13	20	22.9	--	--	13.8	22.1
Union	5	0	3	2	5	--	--	--	--	--
Valencia	58	19	56	21	77	31.2	10.2	15.0	5.7	20.7
Total	1,237	568	1,066	746	1,812	24.5	10.8	10.5	7.1	17.6

* All rates are per 100,000, age-adjusted to the 2000 US standard population; drug overdose primary type categories are mutually exclusive

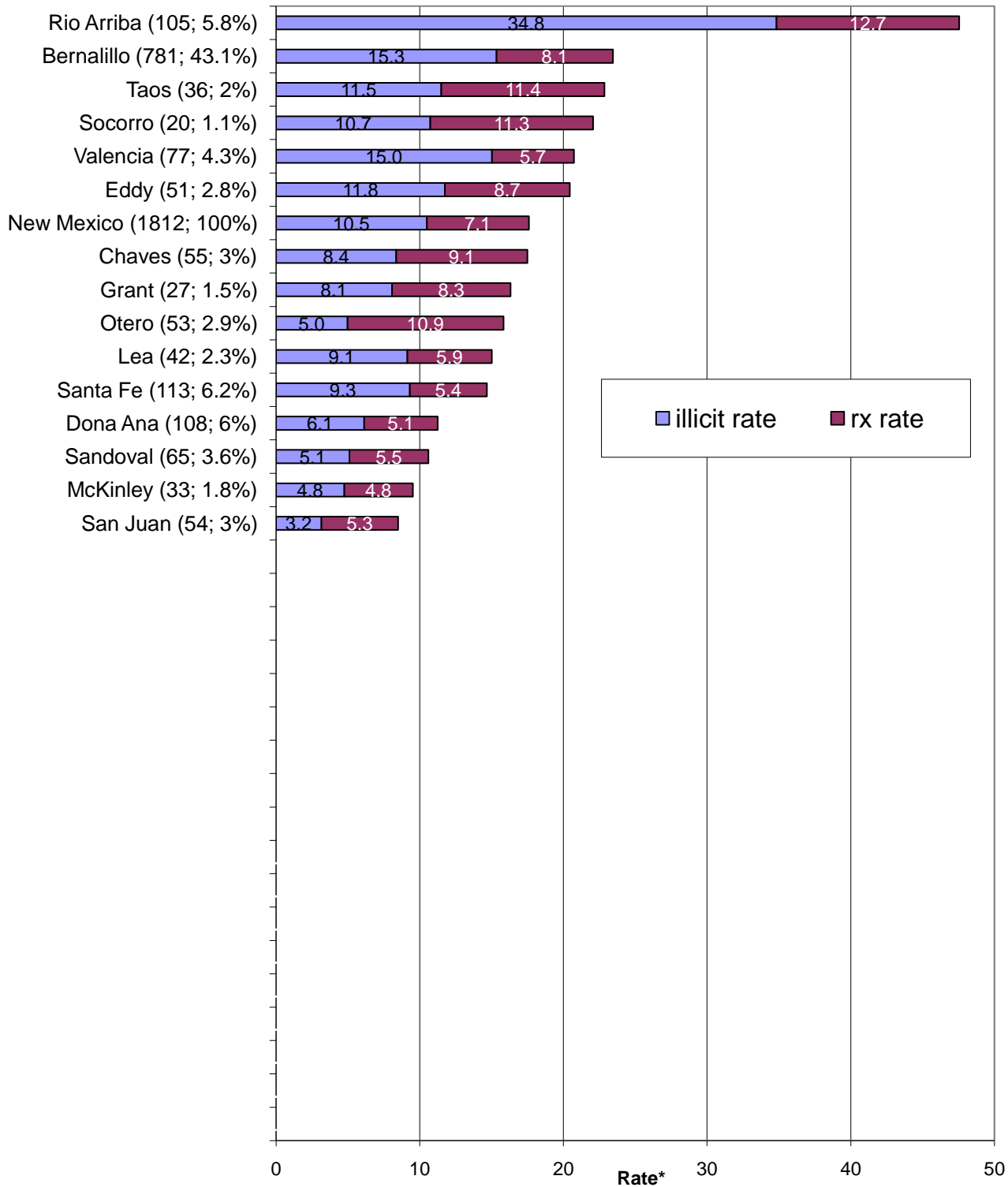
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Source: OMI death files; UNM-BBER population files; SAEF

DRUG-INDUCED DEATH (continued)

Chart 5: Unintentional Drug Overdose Death Rates* by County and Drug Type, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



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

The following counties were not included due to small number of illicit and/or rx deaths (< 2 per county per year) during reported period: Catron, Cibola, Colfax, Curry, DeBaca, Guadalupe, Harding, Hidalgo, Lincoln, Los Alamos, Luna, Mora, Quay, Roosevelt, San Miguel, Sierra, Torrance, Union

Source: OMI death files; UNM-BBER population files; SAEP

SUICIDE

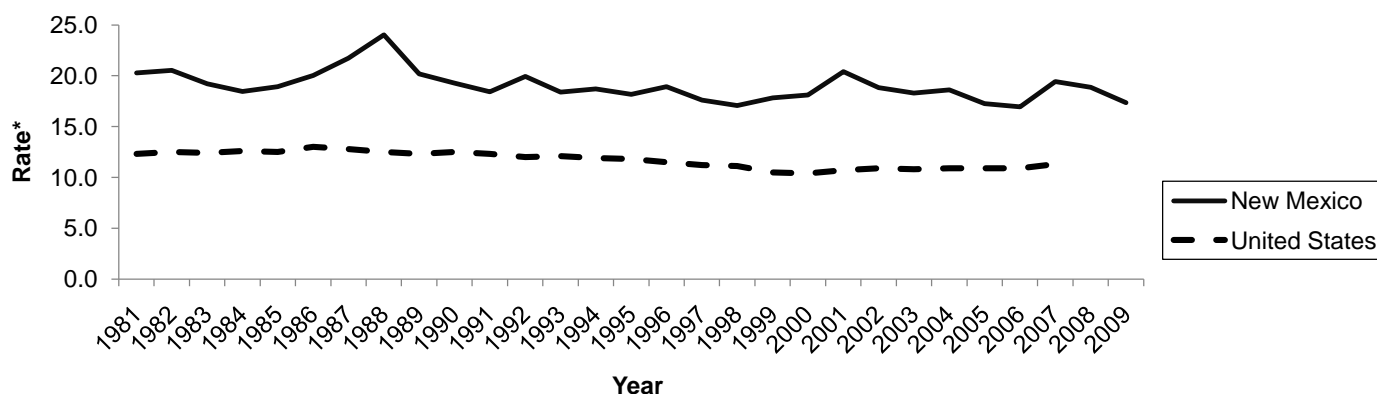
Problem Statement

Suicide is a serious and persistent public health problem in New Mexico. As shown in Chart 1, over the period 1981 through 2007 New Mexico's suicide rate has consistently been 1.5 to 1.9 times the U.S. rate. New Mexico has ranked among the top 5 states for all but one of those years. While the U.S. rate declined 10% between 1981 and 2000, then increased slightly for an overall 5% decline during the period, the New Mexico rate remained high throughout. In New Mexico in 2007, suicide was the second leading cause of death (after unintentional injuries) for persons aged 10-44; and the seventh leading cause of death overall.

Table 1 and Chart 2 show that male suicide rates are more than three times female rates across the age range, and among all race/ethnic groups. 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 15-34; but White males have substantially higher rates at older ages. It's 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 six counties (Taos, Sierra, Grant, Rio Arriba, Torrance, and Otero) had suicide rates in 2005-2009 that were more than twice the most recent available U.S. rates. Suicide remains a problem throughout the state.

Chart 1: Suicide Rates*, New Mexico and United States, 1981-2009



* Rate per 100,000, age-adjusted to the 2000 US standard population
 Source: NMDOH BVRHS death files and UNM-BBER population files (NM); CDC Wonder (US)

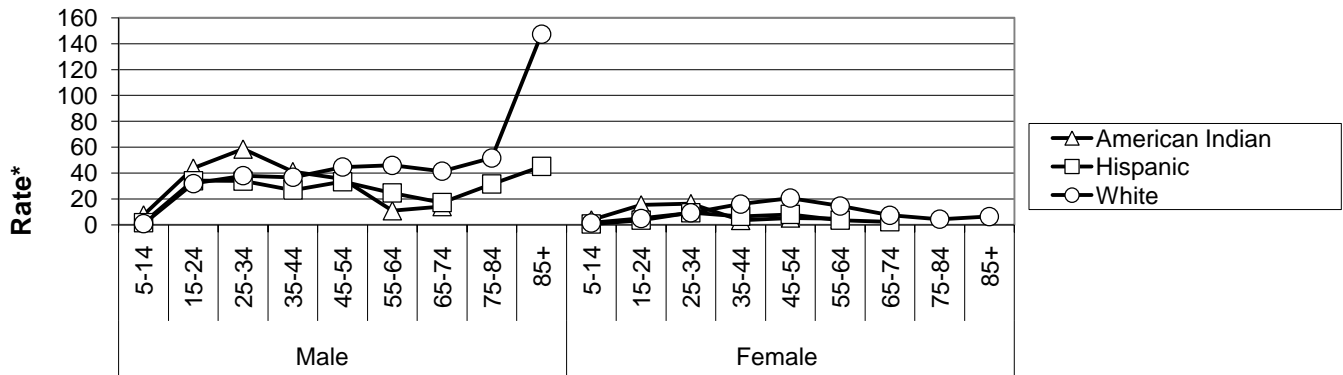
Table 1: Suicide Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009

Sex	Race/Ethnicity	Deaths				Rates*			
		Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	93	505	189	787	15.4	41.8	51.5	33.0
	Hispanic	133	314	42	489	15.0	30.2	23.7	23.8
	American Indian	57	101	3	161	22.0	40.0	9.0	28.5
	Black	12	10	2	24	19.9	14.0	21.3	19.5
	Asian/Pacific Islander	1	5	0	6	3.1	11.2	0.0	7.5
	Total	296	935	236	1,467	16.1	35.7	39.9	29.3
Female	White	16	202	27	245	2.8	16.1	6.0	9.6
	Hispanic	15	76	3	94	1.7	7.2	1.3	4.5
	American Indian	22	21	0	43	8.3	7.5	0.0	6.6
	Black	2	1	1	4	3.5	1.6	8.6	2.8
	Asian/Pacific Islander	1	4	0	5	3.3	7.5	0.0	5.0
	Total	56	304	31	391	3.1	11.2	4.2	7.3
Total	White	109	707	216	1,032	9.3	28.7	26.4	20.9
	Hispanic	148	390	45	583	8.5	18.6	11.3	14.0
	American Indian	79	122	3	204	15.1	23.0	3.8	17.1
	Black	14	11	3	28	11.8	8.2	14.2	10.8
	Asian/Pacific Islander	2	9	0	11	3.2	9.2	0.0	6.0
	Total	352	1,239	267	1,858	9.7	23.3	20.1	17.9

* 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-BBER population files; CDC ARDI; SAEP

SUICIDE (continued)

Chart 2: Suicide Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2005-2009



* Age-specific rates per 100,000

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEF

Table 2: Suicide Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2005-2009

County	Deaths						Rates*					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	335	204	25	14	4	582	20.2	15.2	12.8	10.7	--	17.6
Catron	6	0	0	0	0	6	--	--	--	--	--	--
Chaves	35	15	2	0	0	52	20.2	10.8	--	--	--	16.1
Cibola	4	6	17	0	0	27	--	--	30.3	--	--	19.2
Colfax	4	11	0	0	0	15	--	34.1	--	--	--	21.3
Curry	13	6	0	1	0	20	9.7	--	--	--	--	8.5
De Baca	1	2	0	0	0	3	--	--	--	--	--	--
Dona Ana	98	55	0	2	2	157	26.6	9.3	--	--	--	16.2
Eddy	41	8	2	1	1	53	27.1	--	--	--	--	21.1
Grant	28	13	0	1	0	42	27.7	19.6	--	--	--	25.3
Guadalupe	1	3	0	0	0	4	--	--	--	--	--	--
Harding	0	0	0	0	0	0	--	--	--	--	--	--
Hidalgo	2	6	0	0	0	8	--	--	--	--	--	--
Lea	25	18	0	1	0	44	16.1	13.8	--	--	--	15.3
Lincoln	12	5	1	0	0	18	14.4	--	--	--	--	16.5
Los Alamos	12	3	0	0	0	15	13.1	--	--	--	--	13.0
Luna	13	7	0	0	0	20	19.7	--	--	--	--	14.7
McKinley	8	3	62	1	0	74	--	--	19.5	--	--	19.3
Mora	1	5	1	0	0	7	--	--	--	--	--	--
Otero	49	6	13	1	2	71	24.5	--	49.9	--	--	22.1
Quay	6	1	0	1	0	8	--	--	--	--	--	--
Rio Arriba	14	30	10	0	0	54	46.3	19.5	25.4	--	--	24.4
Roosevelt	11	3	0	0	0	14	17.8	--	--	--	--	15.1
Sandoval	57	18	10	1	0	86	17.6	9.8	9.7	--	--	14.2
San Juan	52	17	55	1	0	125	19.9	17.3	18.1	--	--	19.0
San Miguel	9	21	0	0	0	30	--	20.2	--	--	--	19.3
Santa Fe	83	47	1	2	0	133	22.4	13.3	--	--	--	17.2
Sierra	17	4	0	0	0	21	36.2	--	--	--	--	30.3
Socorro	11	9	1	0	0	21	27.3	--	--	--	--	21.5
Taos	32	18	2	1	1	54	49.3	22.8	--	--	--	33.5
Torrance	14	6	0	0	0	20	25.4	--	--	--	--	22.6
Union	4	3	0	0	0	7	--	--	--	--	--	--
Valencia	33	30	2	0	1	66	21.8	15.6	--	--	--	18.7
Total	1,032	583	204	28	11	1,858	20.9	14.0	17.1	10.8	6.0	17.9

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

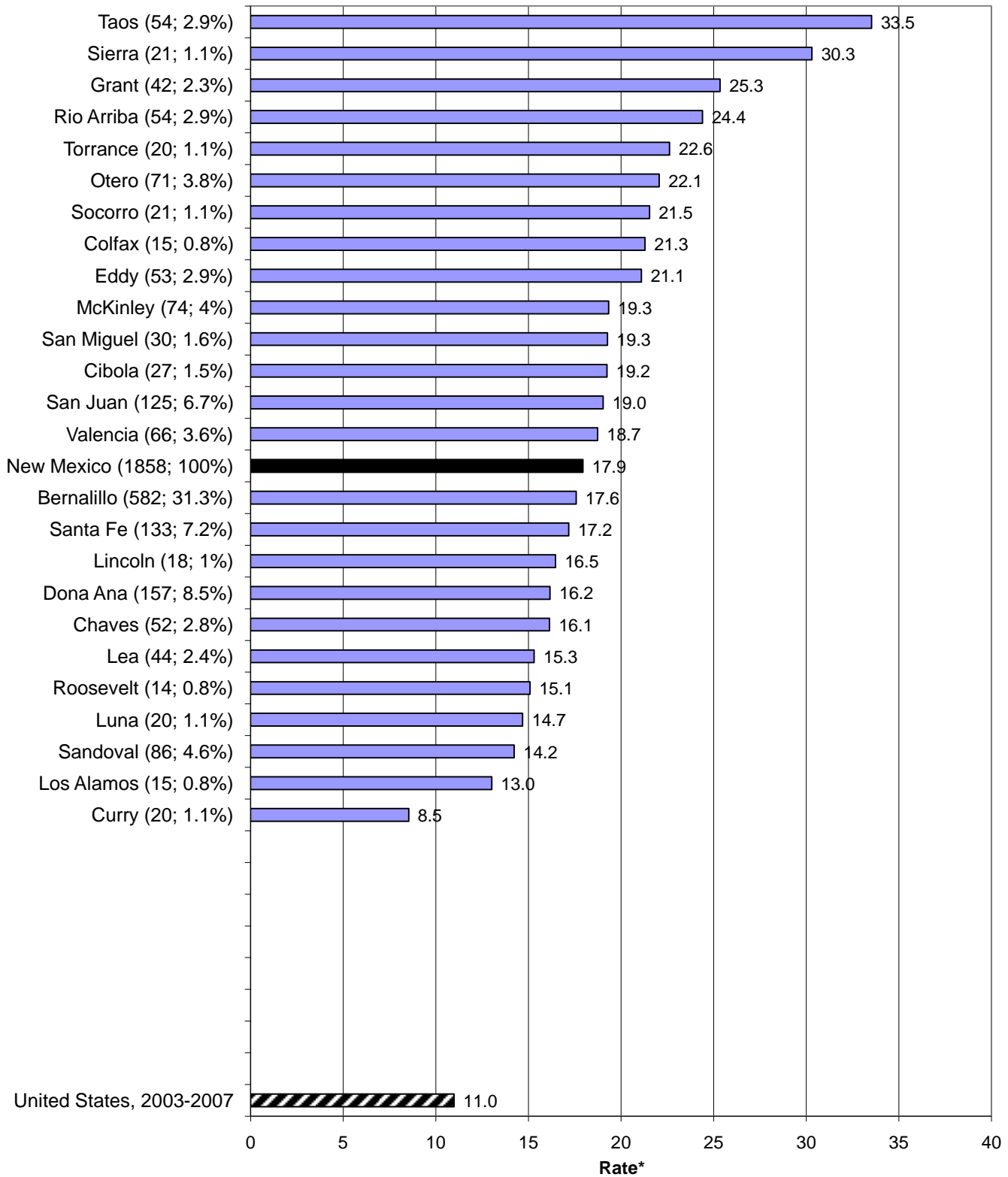
-- Excluded due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEF

SUICIDE (continued)

Chart 3: Suicide Rates* by County, New Mexico, 2005-2009

County (# of deaths; % of statewide deaths)



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

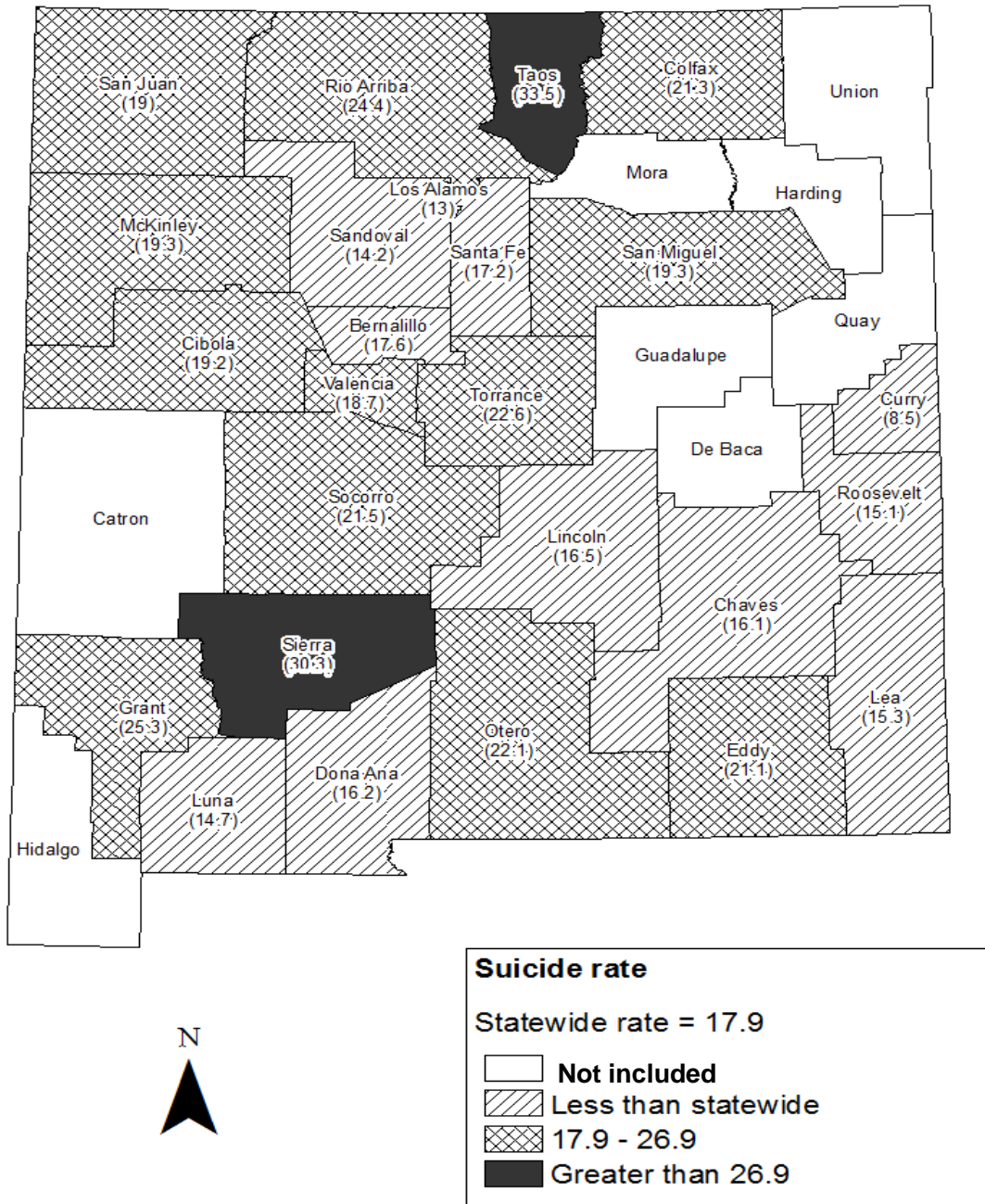
The following counties were not included due to small number of deaths (< 2 per county per year) during reported period:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Quay, Union

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

SUICIDE (continued)

Chart 4: Suicide Rates* by County, New Mexico, 2005-2009



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

Not included: Rate not reported due to small number of deaths (< 2 per county per year) during reported period

Sources: NMDOH BVRHS death files and UNM-BBER population files; CDC ARDI; SAEP

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 and depression; to serious life-threatening situations such as suicidal ideation and suicide attempt, which sometimes result from a combination of the mental 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 could 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 could 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 clinical diagnosis, there is evidence to suggest that it is indeed associated with a person's mental health status. In 2006, the New Mexico Behavioral Risk Factor Surveillance Survey (BRFSS) asked the FMD question as well as questions about anxiety and depression, experience of various chronic health conditions, and experience of suicidal ideation and/or suicide attempt. Chart 1 shows the proportion of people in various response categories who also experienced FMD. The proportion of the total New Mexico population that experienced FMD was only about 10%. 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 ever being diagnosed with an anxiety disorder (31% reported past-month FMD), screening positive for alcohol dependence or abuse (33% reported FMD), current depression based on the Patient Health Questionnaire (54%), and among the very high-risk cohort that reported both past-year suicidal ideation and a lifetime suicide attempt (64% reported past-month FMD). Fully half of the FMD respondents were diagnosed with current depression. These results suggest that this simple question, which is asked annually on the BRFSS, could potentially be a useful indicator of population mental health.

Table 1: Frequent Mental Distress (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2009

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	19,590	2,996	25,733	--	7.7	3.8	7.1
	Hispanic	6,201	27,101	1,272	34,575	13.8	15.1	4.9	13.8
	American Indian	--	5,471	--	5,895	--	14.9	--	9.7
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	10,508	54,885	4,615	70,008	10.0	10.9	4.0	9.7
Female	White	--	27,257	6,911	36,000	--	11.3	7.4	10.0
	Hispanic	2,986	27,984	3,450	34,420	5.5	13.6	9.3	11.6
	American Indian	--	5,836	485	6,669	--	16.5	14.4	12.7
	Black	--	2,196	--	2,459	--	20.9	--	18.9
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	5,165	68,885	11,579	85,629	5.4	13.4	8.2	11.4
Total	White	4,979	46,847	9,906	61,732	9.3	9.5	5.7	8.6
	Hispanic	9,187	55,085	4,723	68,995	9.3	14.3	7.5	12.6
	American Indian	743	11,308	513	12,564	2.1	15.7	8.3	11.1
	Black	--	3,395	--	3,658	--	19.8	--	15.5
	Asian/Pacific Islander	--	2,981	--	2,981	--	21.7	--	17.3
	Total	15,674	123,770	16,194	155,637	7.8	12.2	6.3	10.6

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

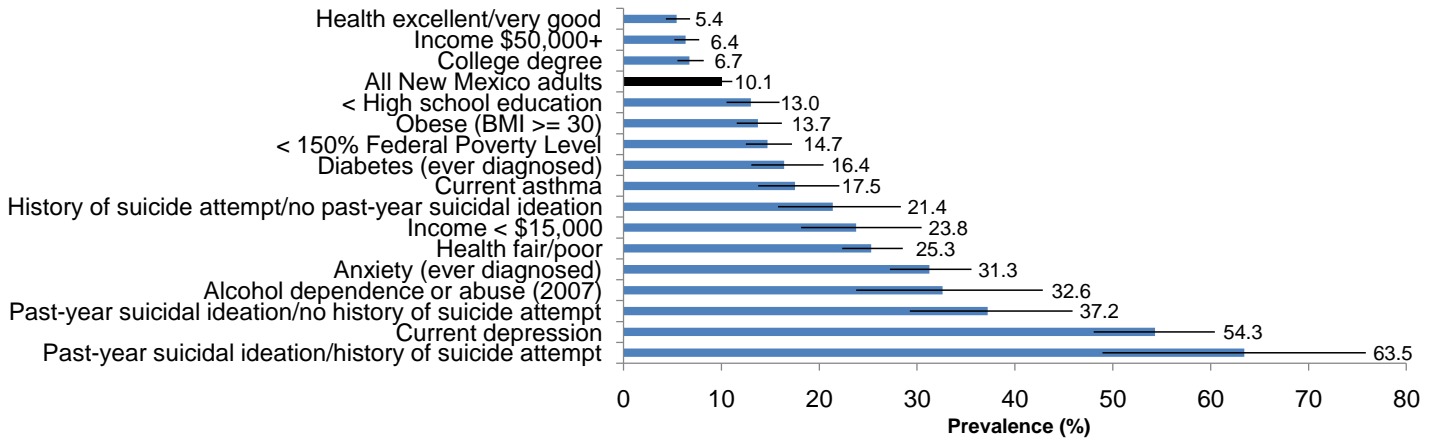
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

Source: BRFSS; SAEP

ADULT MENTAL HEALTH (continued)

Chart 1: Frequent Mental Distress (past 30 days)* by Selected Characteristics, Adults Aged 18+, New Mexico, 2006



* Frequent Mental Distress definition: respondent reported 14 or more days in past 30 days when mental health was "not good"

Source: BRFSS; SAEP (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, 2009

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	14,311	20,487	1,673	--	--	40,649	5.9	11.6	6.8	--	--	8.5
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	1,717	2,851	--	--	--	6,222	7.4	14.5	--	--	--	13.0
Cibola	472	--	550	--	--	2,056	10.3	--	9.6	--	--	11.9
Colfax	441	--	--	--	--	1,803	5.0	--	--	--	--	11.4
Curry	1,506	--	--	--	--	2,330	9.3	--	--	--	--	8.1
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	4,318	9,705	--	--	--	15,749	8.7	11.5	--	--	--	10.7
Eddy	2,726	4,260	--	--	--	7,250	11.3	35.8	--	--	--	18.2
Grant	1,676	3,667	--	--	--	5,671	12.8	31.3	--	--	--	20.9
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	1,269	633	--	--	--	2,281	6.7	4.2	--	--	--	6.2
Lincoln	811	--	--	--	--	1,371	7.2	--	--	--	--	7.7
Los Alamos	1,909	--	--	--	--	2,319	16.1	--	--	--	--	14.7
Luna	1,120	--	--	--	--	2,004	15.3	--	--	--	--	13.7
McKinley	765	401	1,869	--	--	3,250	10.2	6.7	9.3	--	--	9.2
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	3,082	1,023	--	--	--	4,915	12.8	11.7	--	--	--	12.4
Quay	--	--	--	--	--	1,200	--	--	--	--	--	14.1
Rio Arriba	--	2,128	--	--	--	3,605	--	10.3	--	--	--	10.8
Roosevelt	1,040	--	--	--	--	1,435	13.1	--	--	--	--	10.6
Sandoval	6,533	3,141	350	--	--	10,704	11.0	12.3	3.1	--	--	10.5
San Juan	5,263	2,113	2,299	--	--	10,238	10.7	14.1	13.4	--	--	12.0
San Miguel	--	1,904	--	--	--	2,015	--	19.0	--	--	--	13.7
Santa Fe	4,599	5,444	--	--	--	11,098	8.6	13.4	--	--	--	11.0
Sierra	770	--	--	--	--	1,418	8.5	--	--	--	--	12.0
Socorro	891	--	--	--	--	1,759	14.1	--	--	--	--	13.8
Taos	594	1,505	--	--	--	2,174	4.8	10.9	--	--	--	7.0
Torrance	1,137	--	--	--	--	2,715	11.1	--	--	--	--	15.8
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	2,650	3,416	--	--	--	7,559	10.4	11.2	--	--	--	12.4
Total	61,673	68,995	12,564	3,658	2,981	155,717	8.5	12.6	11.1	15.4	17.3	10.6

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

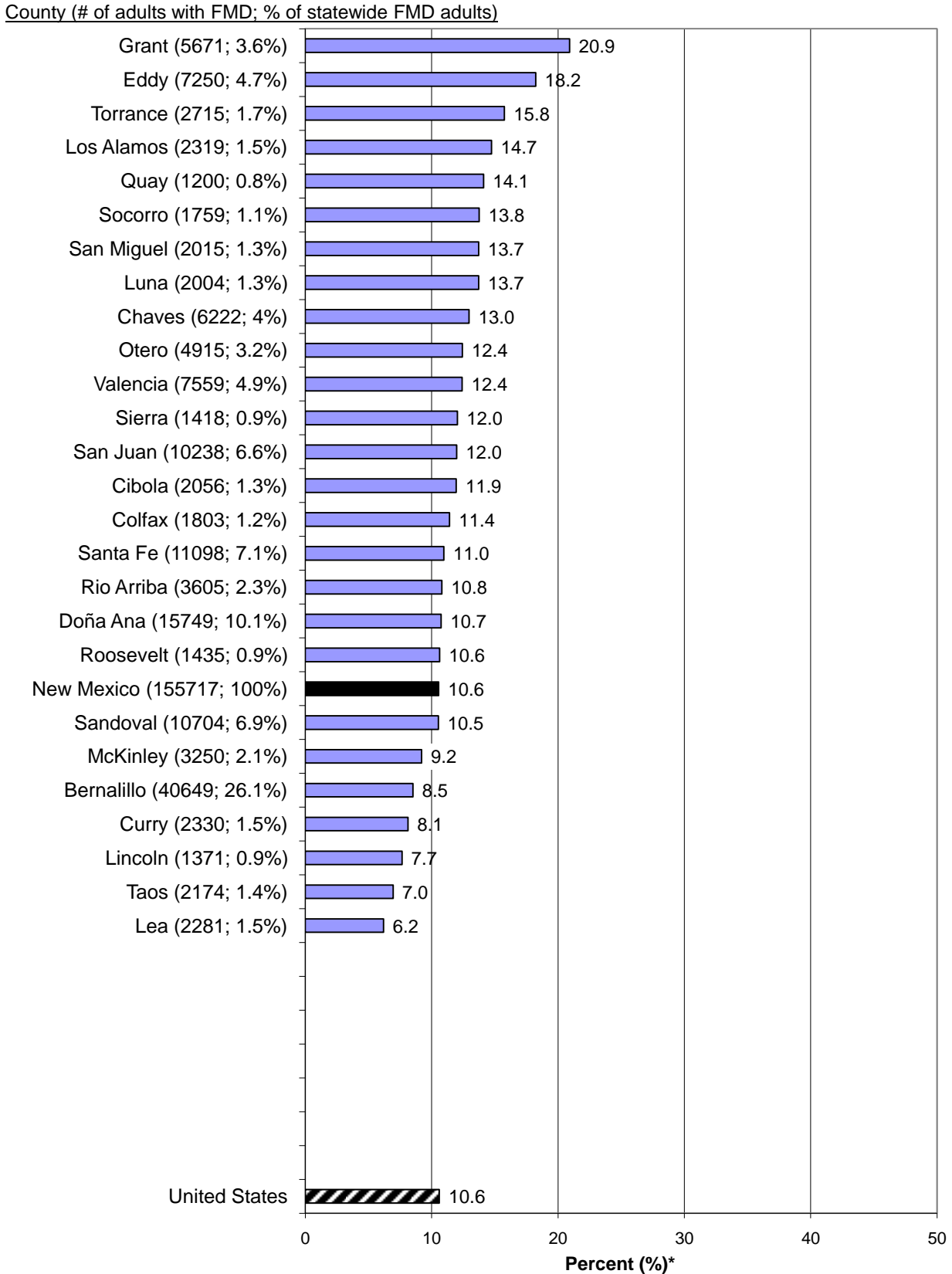
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

Source: BRFSS; SAEP

ADULT MENTAL HEALTH (continued)

Chart 2: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



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

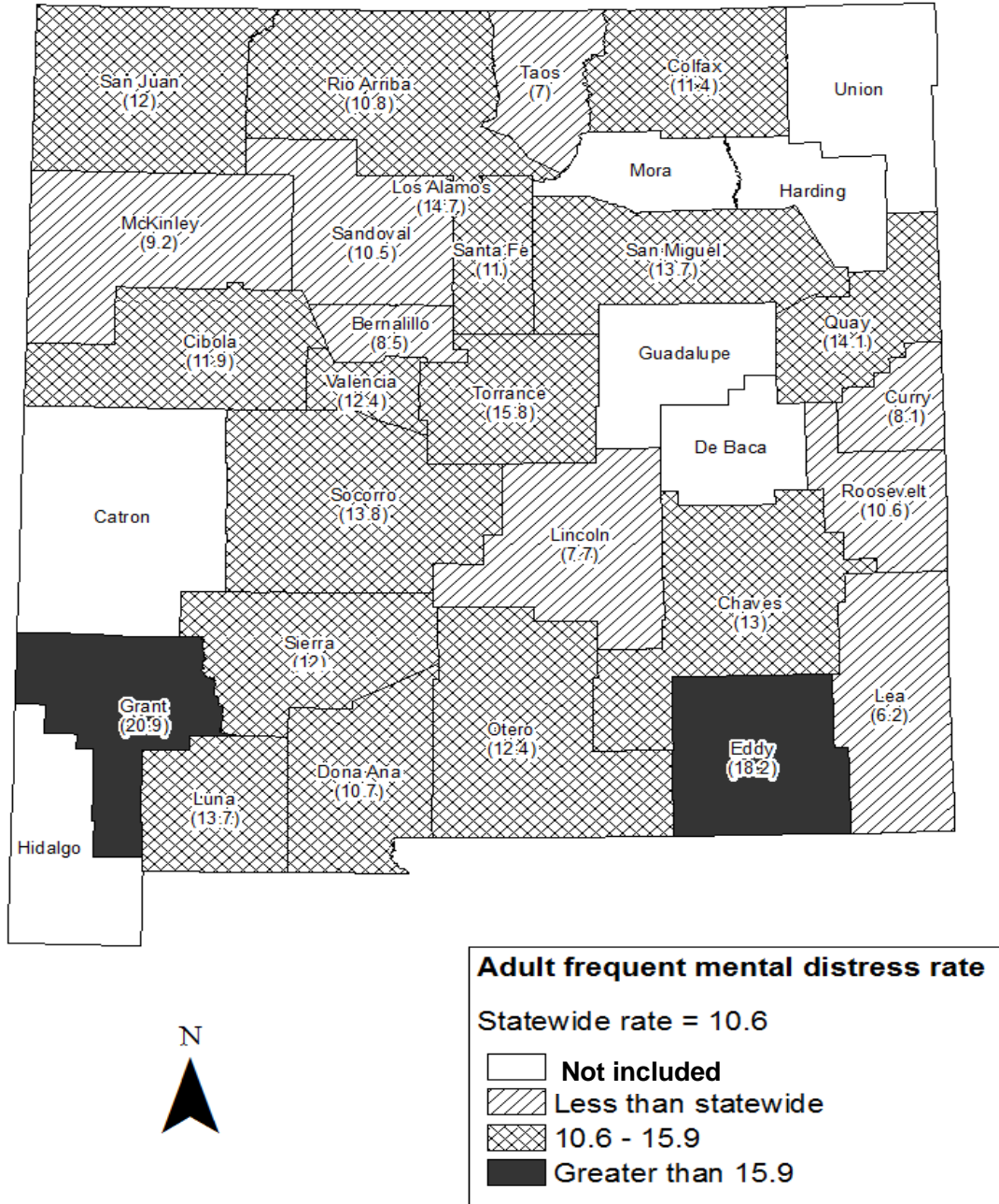
The following counties were not included due to small number of respondents (< 50) in cell:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

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

ADULT MENTAL HEALTH (continued)

Chart 3: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days
 Not included: Rate not reported due to small number of respondents (< 50) in cell
 Source: BRFSS; SAEP

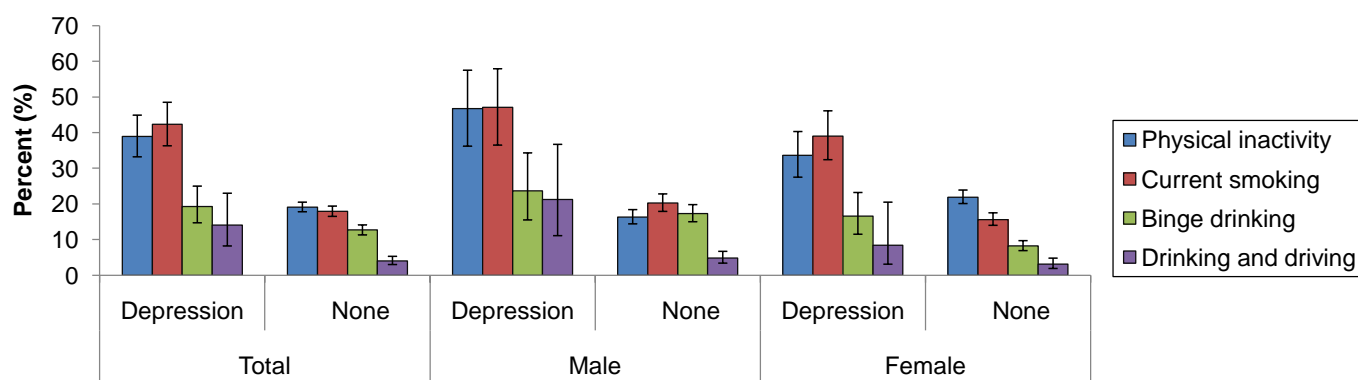
ADULT MENTAL HEALTH

Problem Statement (continued)

Depression is one of the most prevalent and treatable mental disorders. Major depression is usually associated with co-morbid mental disorders, such as anxiety and substance use disorders, and impairment of a person's ability to function in work, home, relationship, 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 2006, the BRFSS assessed current depression using Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria.

Table 1 shows the prevalence of current depression was highest among young adults 18-24 years (12.5%), higher among females than males for ages less than 65, and higher among Hispanic (11.6%) and American Indian adults (10.1%) than White adults (7.9%). Depression was more common among American Indian females (15.3%) and Hispanic females (13.6%) than among White females (8.6%). Chart 4 shows that current depression was associated among both males and females with higher rates of unhealthy behaviors including physical inactivity, current smoking, binge drinking, and drinking and driving. Chart 5 shows that current depression was associated with higher rates of chronic health conditions such as heart disease and diabetes among males, and asthma and obesity among females.

Chart 4: Unhealthy Behaviors by Depression Status and Sex, New Mexico, 2006



* Current Depression definition: scored 10 or more on Patient Health Questionnaire 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; SAEP (NOTE: Brackets around reported rates are 95% confidence intervals)

Figure reproduced from: Murphy, T. "Major Depression in New Mexico Adults". *New Mexico Epidemiology Report*, 2008(5), 2008.

Table 3: Current Depression (past 2 weeks) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2006

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	13,748	4,141	22,322	--	6.2	6.8	7.1
	Hispanic	3,826	15,792	1,111	20,730	7.4	10.8	5.4	9.5
	American Indian	--	1,703	--	2,412	--	4.3	--	5.0
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	8,856	32,660	6,129	47,646	9.4	7.5	7.0	7.7
Female	White	3,334	22,520	3,617	29,471	9.6	9.9	4.7	8.6
	Hispanic	7,592	22,856	2,049	32,497	21.2	13.0	7.5	13.6
	American Indian	--	4,118	--	7,022	--	13.0	--	15.3
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	13,570	51,153	6,133	70,856	15.8	11.3	5.5	10.9
Total	White	7,767	36,267	7,758	51,793	12.1	8.0	5.6	7.9
	Hispanic	11,418	38,649	3,160	53,228	13.1	12.0	6.6	11.6
	American Indian	--	5,821	373	9,434	--	8.2	7.1	10.1
	Black	--	472	--	1,237	--	2.8	--	4.9
	Asian/Pacific Islander	--	--	--	1,549	--	--	--	12.9
	Total	22,426	83,813	12,262	118,502	12.5	9.5	6.2	9.3

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

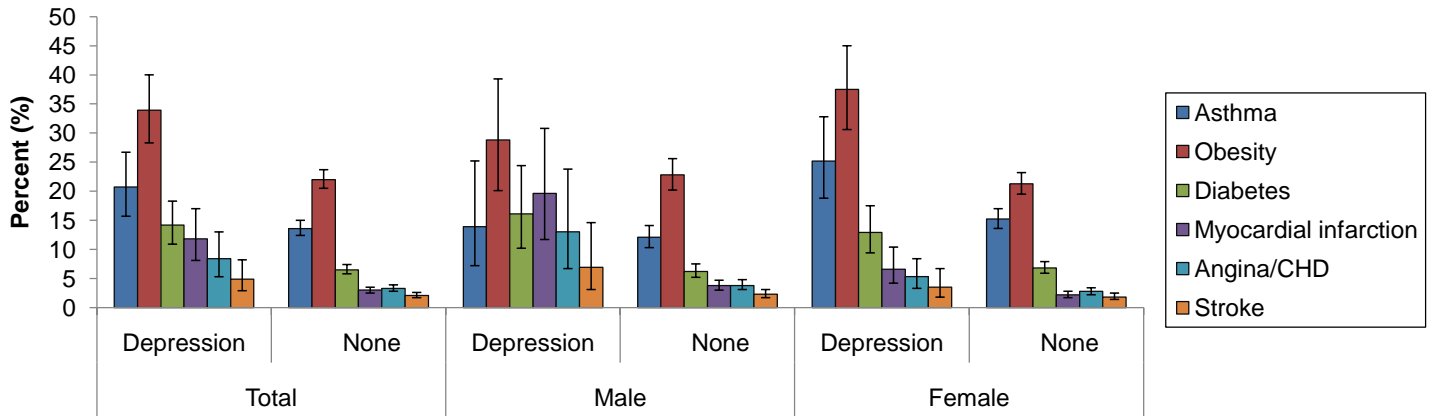
** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

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

Source: BRFSS; SAEP

ADULT MENTAL HEALTH (continued)

Chart 5: Chronic Health Conditions by Depression Status and Sex, New Mexico, 2006



Source: BRFSS; SAEP

Figure reproduced from: Murphy, T. "Major Depression in New Mexico Adults". *New Mexico Epidemiology Report*, 2008(5), 2008.

Table 4: Current Depression (past 2 weeks) by Race and County, Adults Aged 18+, New Mexico, 2006

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	11,883	19,361	1,497	--	--	35,445	5.8	12.9	7.0	--	--	8.8
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	2,723	1,502	--	--	--	4,769	13.5	9.3	--	--	--	11.8
Cibola	--	--	--	--	--	2,405	--	--	--	--	--	15.4
Colfax	--	--	--	--	--	1,784	--	--	--	--	--	14.2
Curry	1,597	--	--	--	--	1,762	10.6	--	--	--	--	6.9
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	5,210	6,573	--	--	--	11,974	10.6	10.7	--	--	--	10.1
Eddy	2,643	2,184	--	--	--	5,070	10.8	21.3	--	--	--	13.9
Grant	1,566	--	--	--	--	2,395	11.4	--	--	--	--	11.5
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	2,619	1,106	--	--	--	3,818	12.7	9.9	--	--	--	11.0
Lincoln	583	--	--	--	--	583	4.4	--	--	--	--	3.5
Los Alamos	1,053	--	--	--	--	1,053	7.1	--	--	--	--	5.2
Luna	--	--	--	--	--	3,060	--	--	--	--	--	17.5
McKinley	613	214	1,635	--	--	2,497	7.0	3.2	8.9	--	--	7.0
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	1,075	--	--	--	--	3,010	4.1	--	--	--	--	8.3
Quay	--	--	--	--	--	827	--	--	--	--	--	14.2
Rio Arriba	--	1,689	--	--	--	2,040	--	9.0	--	--	--	7.7
Roosevelt	590	--	--	--	--	767	8.1	--	--	--	--	5.6
Sandoval	2,339	2,552	--	--	--	5,232	5.2	13.9	--	--	--	7.4
San Juan	3,902	2,531	1,813	--	--	8,378	8.2	18.5	9.1	--	--	10.1
San Miguel	--	1,375	--	--	--	1,724	--	11.5	--	--	--	10.3
Santa Fe	2,921	3,540	--	--	--	6,833	5.8	9.1	--	--	--	7.3
Sierra	--	--	--	--	--	--	--	--	--	--	--	--
Socorro	--	--	--	--	--	--	--	--	--	--	--	--
Taos	537	1,843	--	--	--	2,586	5.1	18.5	--	--	--	11.6
Torrance	--	--	--	--	--	--	--	--	--	--	--	--
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	2,686	913	--	--	--	3,984	11.8	4.0	--	--	--	8.3
Total	51,012	53,228	9,434	1,237	1,549	117,721	7.8	11.6	10.1	5.1	12.9	9.3

* 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

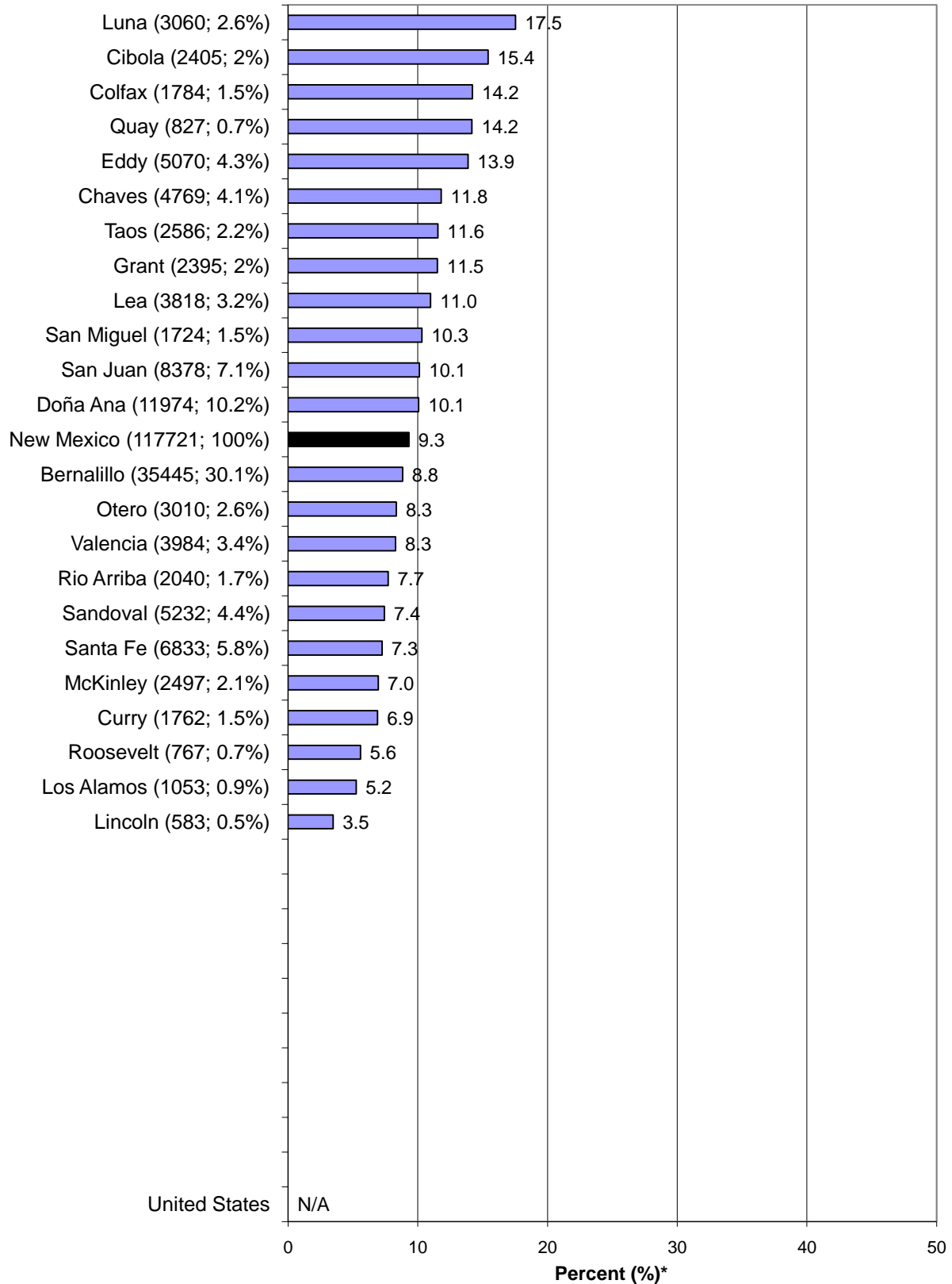
-- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

ADULT MENTAL HEALTH (continued)

Chart 6: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2006

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

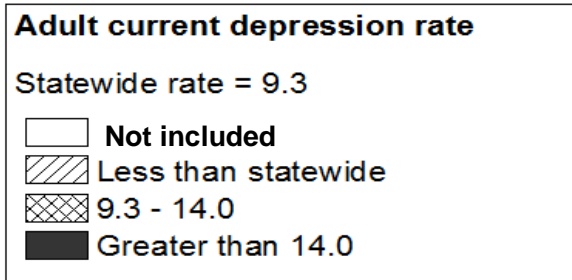
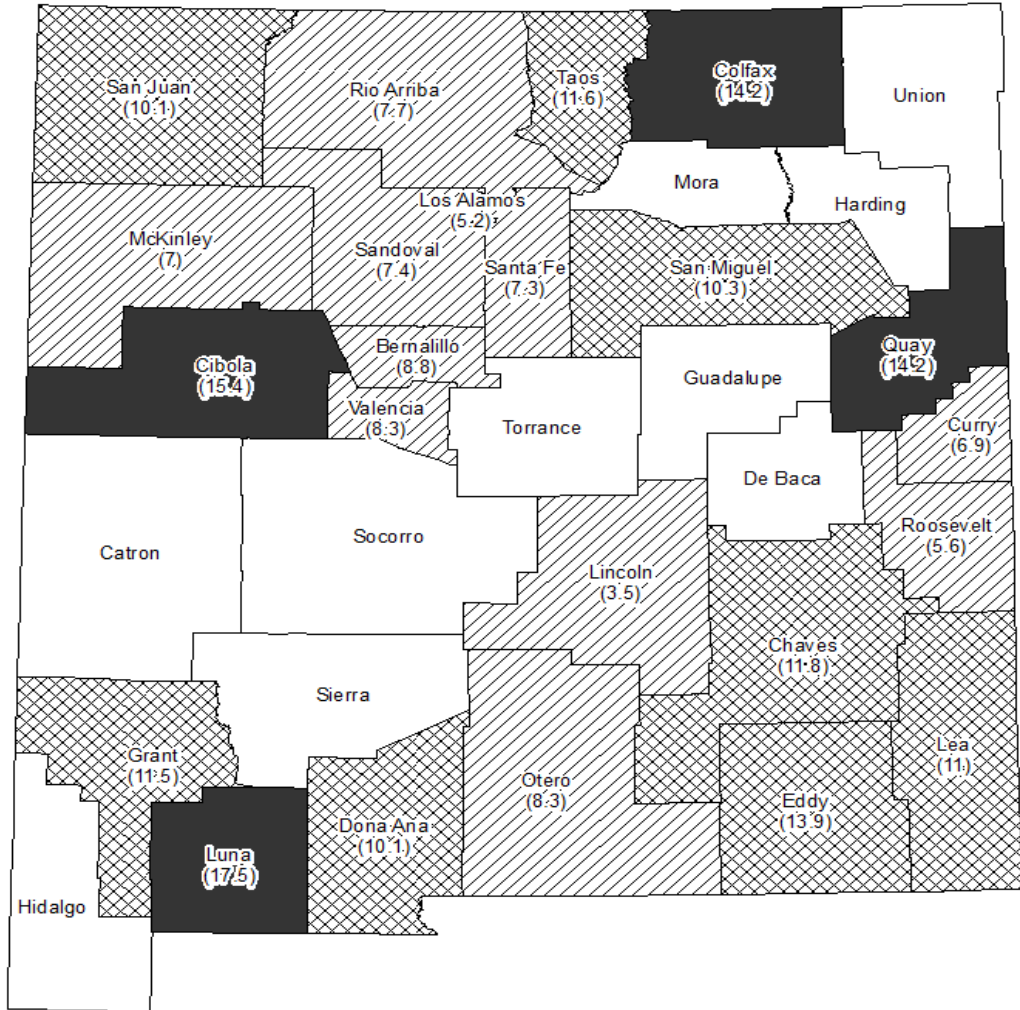
The following counties were not included due to small number of respondents (< 50) in cell:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Sierra, Socorro, Torrance, Union

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

ADULT MENTAL HEALTH (continued)

Chart 7: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2006



* Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria
 Not included: Rate not reported due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

YOUTH PERSISTENT SADNESS OR HOPELESSNESS

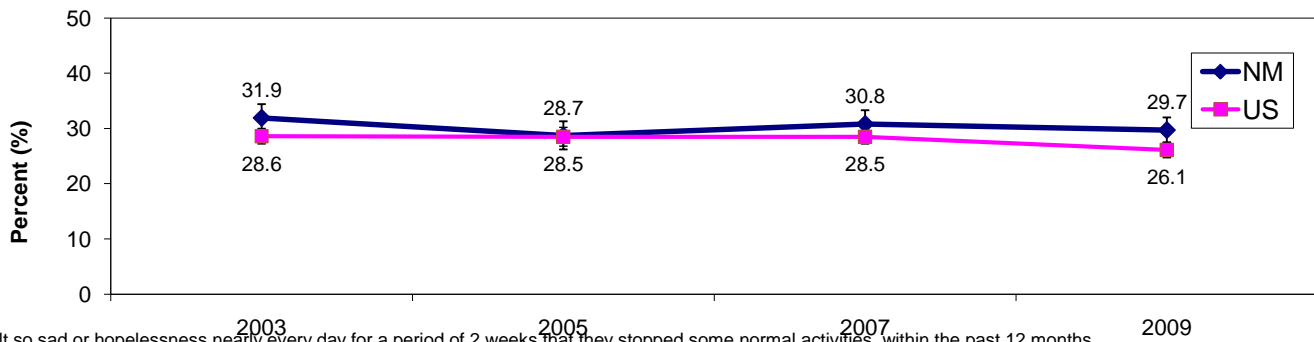
Problem Statement

Persistent feelings of sadness or hopelessness are a risk factor for depression. The prevalence of persistent feelings of sadness or hopelessness among NM high school students has not varied significantly from 2003-2009.

Girls (37.3%) were far more likely to report feelings of sadness or hopelessness than boys (22.3%). There was no statistically significant variation by grade level. American Indians (33.8%) and Asian/Pacific Islanders (38.6%) had higher rates than Hispanic students (27.9%).

The counties with the highest prevalence of prevalence of persistent feelings of sadness or hopelessness were Sierra (40.6%), Luna (39.1%), and Lea (35.1%). The counties with the lowest prevalence were De Baca (20.0), Mora (22.9%), and San Miguel (24.4%).

Chart 1. Persistent Sadness or Hopelessness*, Grades 9-12, New Mexico and US, 2001-2009



* 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)

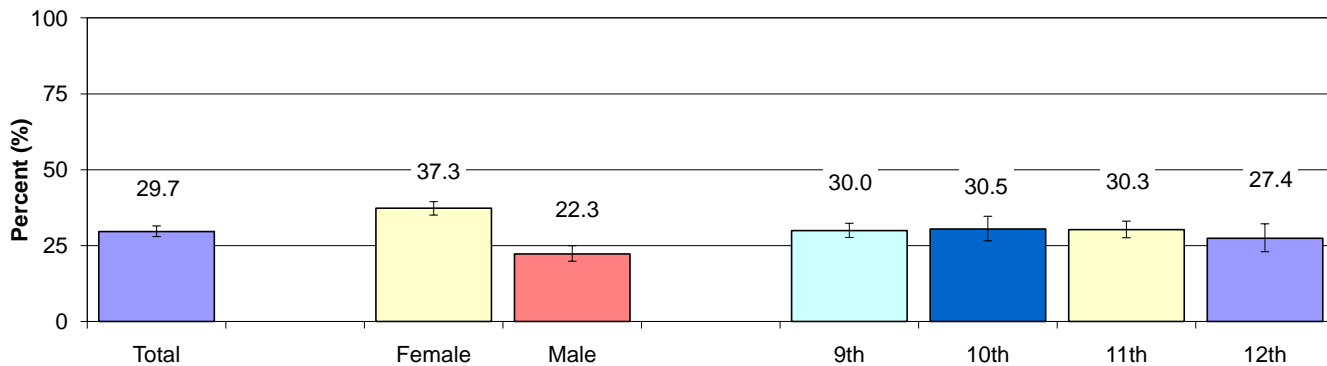
Table 1: Persistent Sadness or Hopelessness by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico,

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	22.7 [14.8-33.1]	28.8 [21.8-36.9]	26.3 [19.9-33.8]	30.0 [20.5-41.6]	26.2 [21.7-31.4]
	Asian/Pacific-Islander	--	--	--	--	25.3 [17.7-34.8]
	Black/African-American	20.9 [9.9-38.8]	--	22.3 [11.3-39.3]	--	26.5 [20.6-33.5]
	Hispanic	22.4 [16.4-29.7]	19.2 [14.6-24.7]	21.4 [15.5-28.9]	21.6 [14.0-31.8]	21.2 [18.8-24.0]
	White	18.5 [13.6-24.8]	16.6 [10.1-26.1]	22.2 [16.4-29.3]	24.1 [14.9-36.4]	20.1 [15.8-25.2]
	Total	20.8 [17.3-24.8]	22.0 [18.2-26.4]	23.3 [19.7-27.4]	23.5 [17.8-30.3]	22.3 [19.9-25.0]
Female	American Indian	48.3 [35.2-61.7]	46.3 [40.5-52.2]	45.1 [33.3-57.6]	21.7 [11.1-38.1]	42.1 [37.0-47.4]
	Asian/Pacific-Islander	--	--	--	--	49.4 [38.8-60.1]
	Black/African-American	--	--	--	--	35.3 [24.3-48.1]
	Hispanic	32.7 [28.4-37.2]	39.2 [33.0-45.7]	34.2 [29.0-39.9]	29.8 [20.2-41.7]	34.4 [30.7-38.3]
	White	43.3 [32.8-54.5]	31.5 [23.5-40.9]	35.2 [25.0-47.0]	35.9 [25.2-48.3]	36.9 [32.4-41.8]
	Total	39.9 [35.9-44.1]	39.4 [34.8-44.1]	37.1 [32.1-42.4]	31.1 [24.8-38.2]	37.3 [35.1-39.5]
Total	American Indian	34.2 [25.2-44.4]	37.6 [32.7-42.6]	35.6 [29.2-42.5]	25.7 [18.5-34.6]	33.8 [30.7-37.1]
	Asian/Pacific-Islander	38.2 [24.7-53.9]	--	44.5 [35.3-54.1]	--	38.6 [31.9-45.7]
	Black/African-American	24.6 [16.1-35.6]	34.6 [26.9-43.2]	26.1 [14.4-42.7]	--	29.7 [24.2-35.9]
	Hispanic	27.4 [23.7-31.6]	29.4 [25.8-33.3]	28.0 [22.7-33.9]	25.6 [18.1-34.9]	27.9 [25.7-30.1]
	White	30.4 [26.2-34.9]	23.4 [17.4-30.7]	29.0 [22.5-36.4]	30.9 [22.8-40.3]	28.5 [25.8-31.4]
	Total	30.0 [27.7-32.4]	30.5 [26.6-34.7]	30.3 [27.6-33.1]	27.4 [23.0-32.2]	29.7 [28.0-31.5]

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

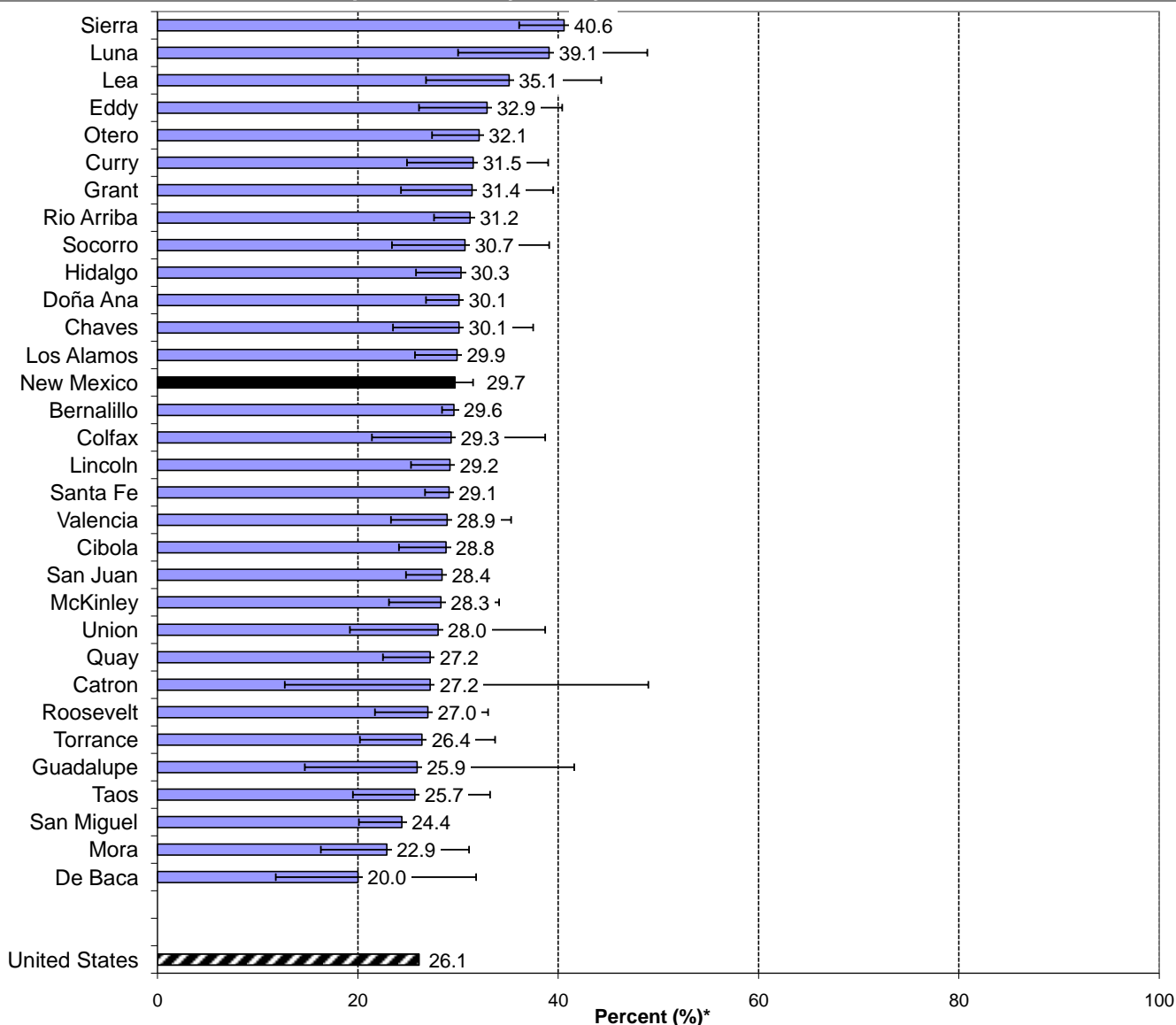
YOUTH PERSISTENT SADNESS OR HOPELESSNESS (continued)

Chart 2. Persistent Sadness or Hopelessness by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Persistent Sadness or Hopelessness* by County, Grades 9-12, New Mexico, 2009

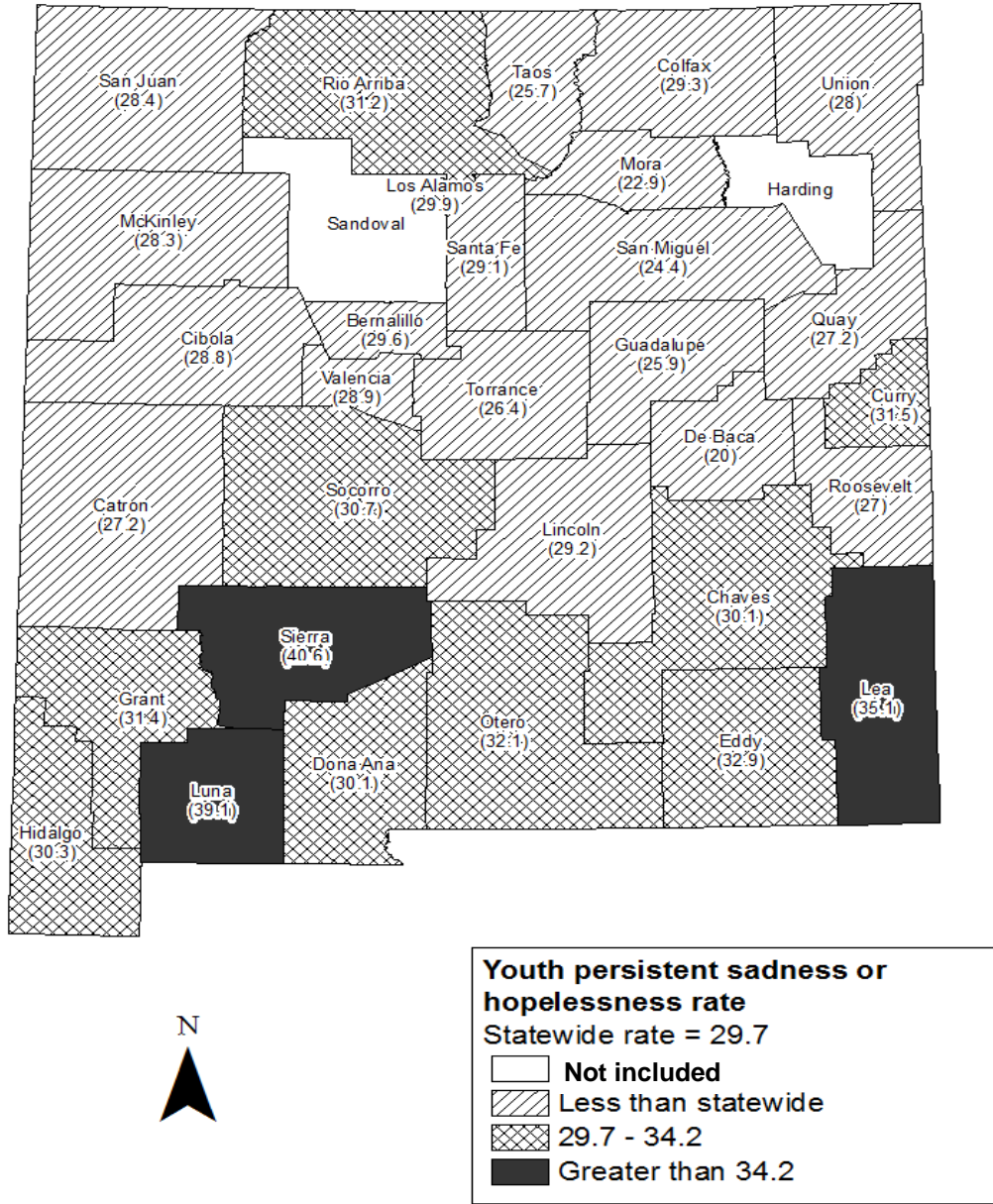


* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months
 Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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

YOUTH PERSISTENT SADNESS OR HOPELESSNESS (continued)

Chart 4. Persistent Sadness or Hopelessness* by County, Grades 9 - 12, New Mexico, 2009



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

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

YOUTH SERIOUSLY CONSIDERED SUICIDE

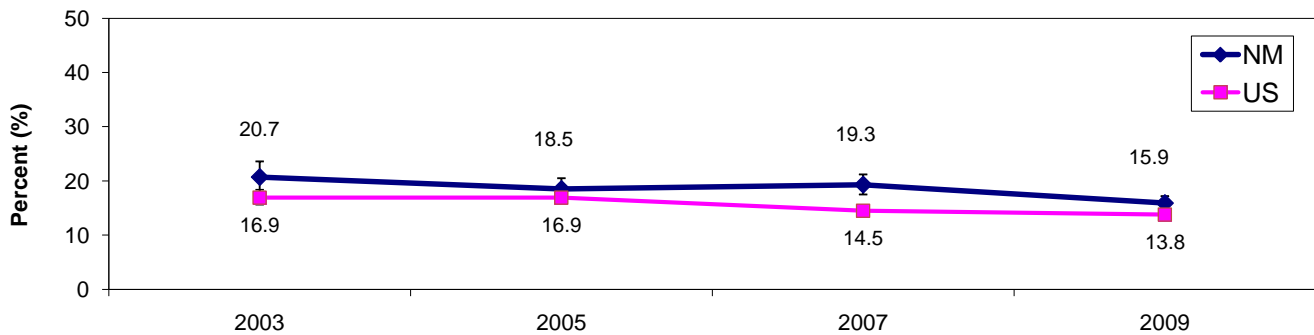
Problem Statement

Suicidal ideation is a risk factor for suicide. Among NM high school students, the prevalence of seriously considering suicide in the past 12 months decreased from 20.7% in 2003 to 15.9% in 2009. This corresponds to a decrease in the US rate over the same time period (2003= 16.9%, 2009 = 13.8%). While the NM rate has been higher than the US rate over most of these years, the difference between the US and NM was not statistically significant in 2009.

NM girls (20.0%) had a higher rate than boys (11.9%) in 2009. There was no statistically significant variation by grade level. American Indians (20.0%) and Asian/Pacific Islanders (25.3%) had higher rates than Hispanics (13.6%).

The counties with the highest prevalence of seriously considering suicide were Luna (23.4%), Sierra (20.2%), and McKinley (19.0%). The counties with the lowest prevalence were De Baca (5.2), Catron (6.7%), and San Miguel (11.4%).

Chart 1. Seriously Considered Suicide (past 12 months), Grades 9-12, New Mexico and US, 2001-2009



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

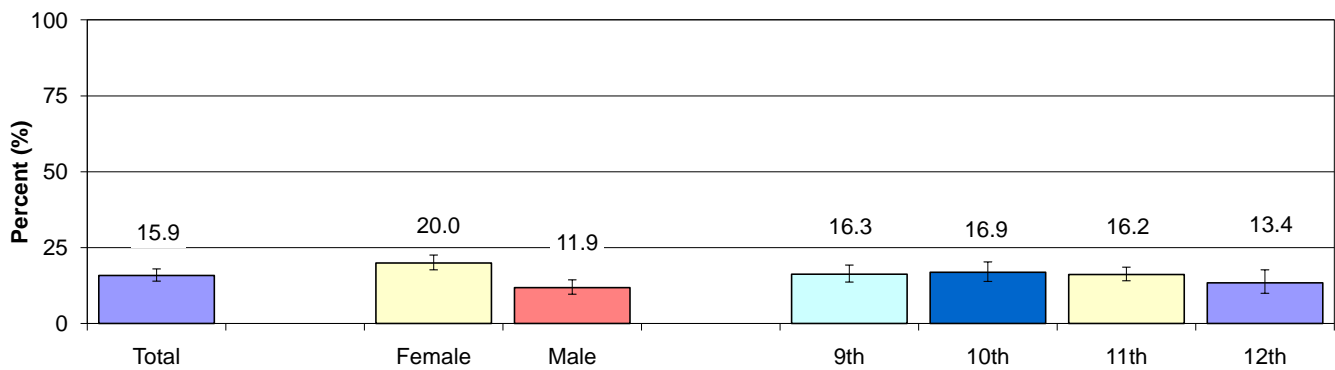
Table 1: Seriously Considered Suicide (past 12 months) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	16.9 [10.2-26.9]	14.8 [7.7-26.7]	15.1 [7.1-29.3]	12.5 [5.5-26.0]	15.2 [10.9-20.9]
	Asian/Pacific-Islander	--	--	--	--	19.5 [12.8-28.8]
	Black/African-American	17.0 [6.6-37.2]	--	23.8 [10.1-46.5]	--	20.5 [12.3-32.1]
	Hispanic	12.1 [9.0-16.2]	7.9 [5.0-12.3]	8.9 [5.8-13.5]	8.7 [5.5-13.4]	9.6 [7.8-11.7]
	White	7.5 [5.1-10.9]	11.7 [6.6-19.9]	11.8 [6.7-20.1]	10.2 [5.0-19.8]	10.2 [7.1-14.3]
	Total	12.0 [8.9-15.9]	11.7 [9.5-14.3]	12.7 [9.0-17.6]	10.4 [7.0-15.2]	11.9 [9.7-14.4]
Female	American Indian	28.9 [22.4-36.5]	27.5 [21.1-34.8]	25.5 [16.8-36.8]	15.4 [8.9-25.3]	25.3 [20.5-30.8]
	Asian/Pacific-Islander	--	--	--	--	30.2 [21.2-41.0]
	Black/African-American	--	--	--	--	18.7 [11.5-28.9]
	Hispanic	16.6 [14.2-19.2]	21.1 [14.7-29.5]	17.1 [14.3-20.3]	14.4 [10.1-20.0]	17.6 [15.4-20.2]
	White	21.6 [17.4-26.6]	17.9 [11.2-27.6]	18.9 [12.7-27.3]	18.5 [10.6-30.3]	19.3 [15.4-23.9]
	Total	21.0 [18.0-24.4]	22.4 [17.7-27.9]	19.5 [16.6-22.9]	16.2 [12.1-21.4]	20.0 [17.7-22.6]
Total	American Indian	22.3 [16.4-29.5]	21.2 [17.7-25.2]	20.2 [15.4-25.9]	13.8 [9.0-20.7]	20.0 [16.4-24.1]
	Asian/Pacific-Islander	19.5 [10.8-32.7]	--	28.3 [21.0-37.0]	--	25.3 [19.4-32.4]
	Black/African-American	19.8 [9.3-37.1]	27.6 [19.1-38.0]	19.5 [9.3-36.3]	--	19.8 [14.4-26.6]
	Hispanic	14.3 [12.3-16.5]	14.7 [11.3-18.9]	13.1 [10.7-15.9]	11.5 [8.3-15.6]	13.6 [12.3-15.1]
	White	14.2 [12.6-16.1]	14.6 [9.1-22.6]	15.8 [12.7-19.4]	14.9 [9.9-22.0]	14.8 [12.7-17.3]
	Total	16.3 [13.7-19.3]	16.9 [13.9-20.3]	16.2 [14.1-18.6]	13.4 [10.0-17.7]	15.9 [14.0-18.0]

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

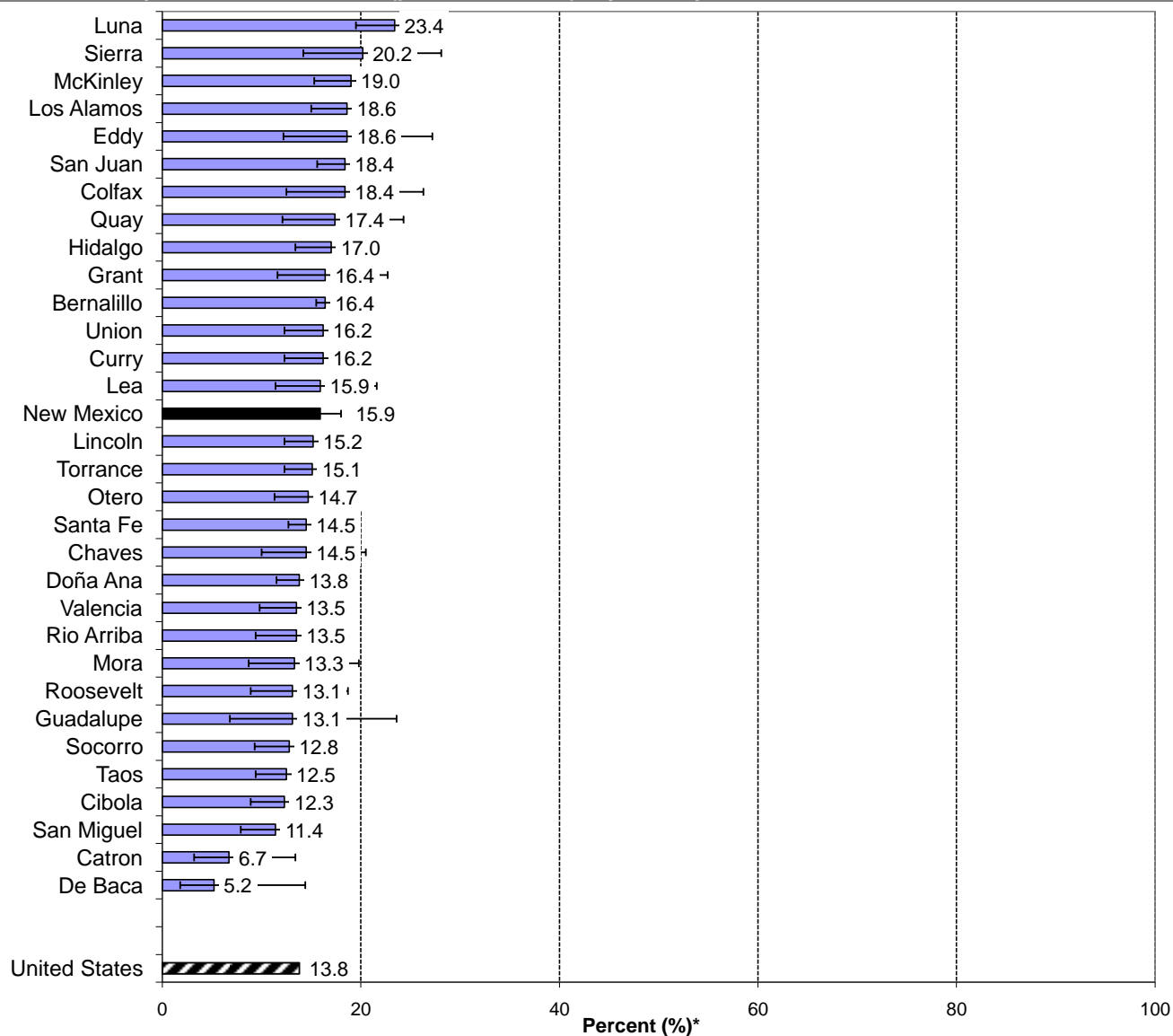
YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

Chart 2. Seriously Considered Suicide (past 12 months) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Seriously Considered Suicide (past 12 months)* by County, Grades 9-12, New Mexico, 2009

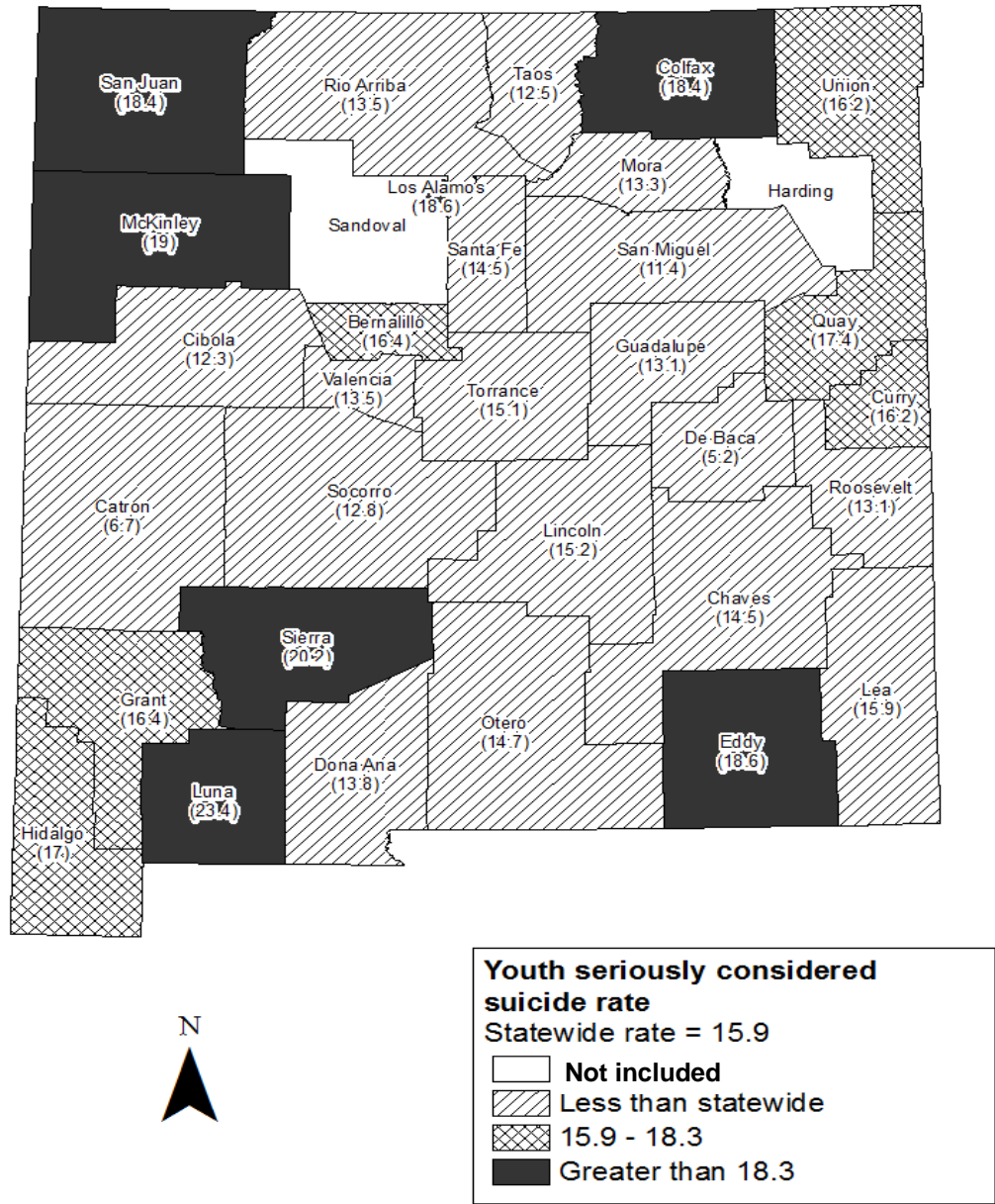


* Estimate of percent of high school students seriously considered suicide at least once in past 12 months
 Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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 (past 12 months)* by County, Grades 9 - 12, New Mexico, 2009



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

YOUTH ATTEMPTED SUICIDE

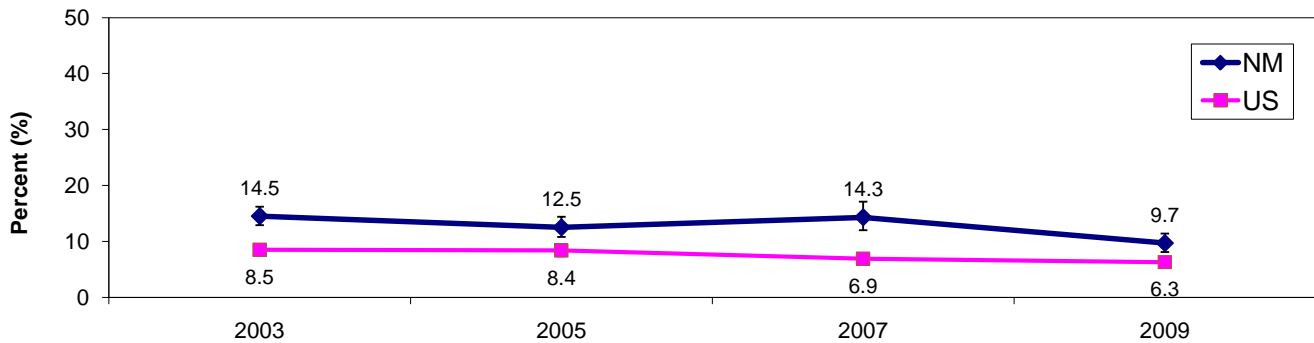
Problem Statement

Suicide is the second leading cause of death among NM youth of high school age. Previous suicide attempts are an important risk factor for completed suicide. The prevalence of past year suicide attempts among NM high school students decreased from 14.3% in 2007 to 9.7% in 2009. The rate of suicide attempts among NM students has been consistently higher than among US students.

In 2009, the difference in the suicide attempt rate between girls (11.7%) and boys (7.6%) was not statistically significant. There was no statistically significant variation in suicide attempts by grade level. The rates among American Indians (14.7%) and Asian/Pacific Islanders (19.9%) were higher than among Hispanic (7.6%) and White (7.3%) students.

The counties with the highest prevalence of suicide attempts were McKinley (15.5%), San Juan (13.4%), and Luna (13.2%). The counties with the lowest prevalence of suicide attempts were Roosevelt (4.9%), Mora (6.2), Valencia (6.2%), and Cibola (6.4%).

Chart 1. Attempted Suicide (past 12 months), Grades 9-12, New Mexico and US, 2001-2009



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

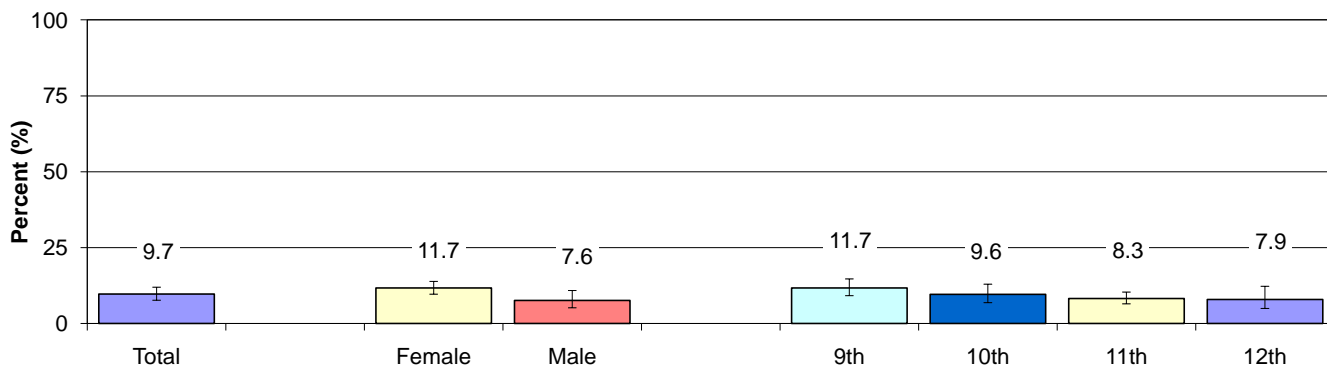
Table 1: Attempted Suicide (past 12 months) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico,

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	13.7 [7.5,23.8]	12.4 [4.4,30.6]	6.3 [3.2,12.1]	--	12.5 [7.3,20.4]
	Asian/Pacific-Islander	--	--	--	--	17.6 [10.1,28.9]
	Black/African-American	--	--	--	--	16.6 [9.5,27.4]
	Hispanic	7.6 [4.6,12.3]	2.8 [2.0,4.0]	4.0 [2.0,8.1]	4.8 [2.1,10.8]	4.8 [3.5,6.7]
	White	1.9 [0.5,6.6]	4.8 [2.4,9.1]	7.3 [3.5,14.3]	7.6 [4.2,13.5]	5.2 [3.5,7.7]
	Total	7.8 [5.0-11.9]	6.7 [4.0-10.9]	6.3 [3.6-11.1]	9.3 [5.5-15.1]	7.6 [5.2-10.9]
Female	American Indian	19.3 [10.9,32.0]	18.9 [13.0,26.8]	17.9 [11.5,26.7]	--	17.1 [13.0,22.0]
	Asian/Pacific-Islander	--	--	--	--	22.0 [15.0,31.0]
	Black/African-American	--	--	--	--	9.0 [3.8,19.8]
	Hispanic	12.8 [10.6,15.3]	11.7 [8.8,15.6]	9.0 [6.1,13.2]	5.2 [2.2,12.2]	10.3 [8.4,12.5]
	White	15.0 [11.3,19.5]	7.8 [3.3,17.2]	7.2 [2.9,16.7]	6.6 [2.4,17.0]	9.2 [7.0,11.9]
	Total	15.8 [13.4-18.6]	12.4 [9.6-15.9]	9.8 [7.3-12.9]	6.7 [3.3-13.1]	11.7 [9.7-13.9]
Total	American Indian	16.3 [9.4,26.6]	15.8 [9.6,25.0]	12.2 [8.4,17.4]	12.3 [5.1,26.7]	14.7 [10.5,20.2]
	Asian/Pacific-Islander	20.6 [11.0,35.3]	--	13.7 [8.7,20.9]	--	19.9 [14.5,26.7]
	Black/African-American	17.2 [6.3,39.0]	14.4 [7.2,26.9]	7.3 [2.1,22.5]	--	13.8 [8.7,21.2]
	Hispanic	10.2 [8.2,12.6]	7.5 [5.6,9.8]	6.6 [4.8,9.0]	5.0 [2.9,8.6]	7.6 [6.3,9.2]
	White	8.2 [5.8,11.4]	6.2 [3.1,12.0]	7.7 [4.2,13.8]	7.0 [3.8,12.8]	7.3 [6.1,8.7]
	Total	11.7 [9.2-14.7]	9.6 [6.9-13.0]	8.3 [6.5-10.4]	7.9 [5.0-12.3]	9.7 [7.7-12.0]

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

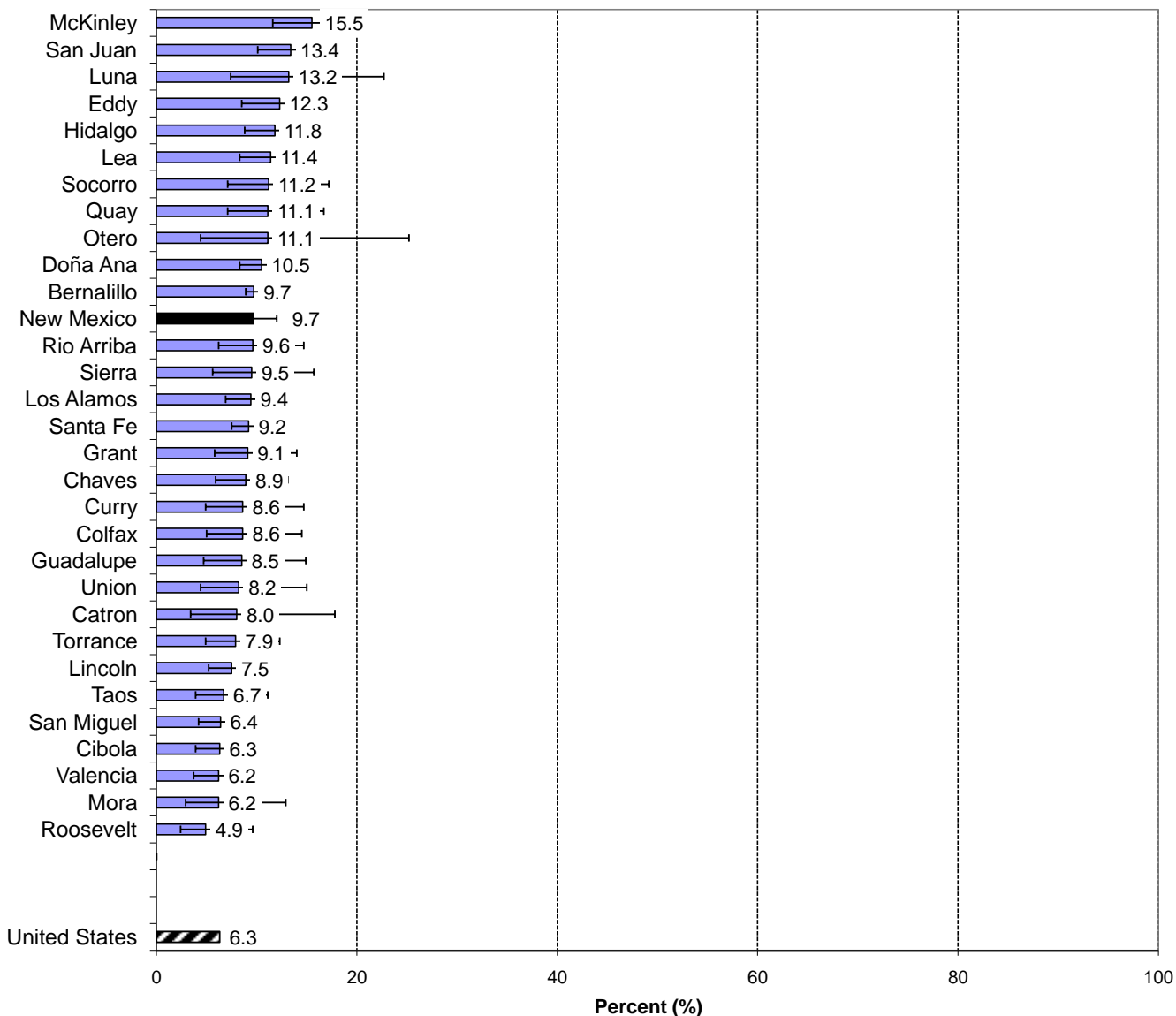
YOUTH ATTEMPTED SUICIDE (continued)

Chart 2. Attempted Suicide (past 12 months) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Attempted Suicide (past 12 months)* by County, Grades 9-12, New Mexico, 2009



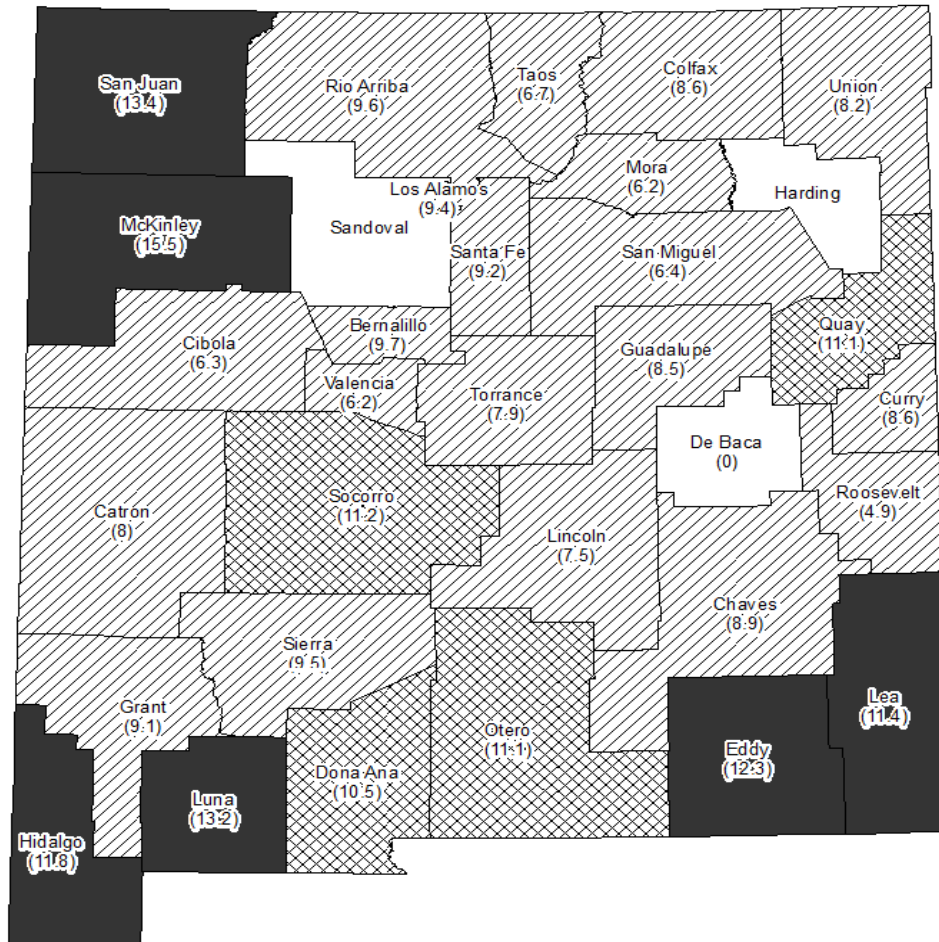
* Estimate of percent of high school students who attempted suicide at least once in past 12 months

De Baca, Harding, and Sandoval 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 (past 12 months)* by County, Grades 9 - 12, New Mexico, 2009



Youth attempted suicide rate
 Statewide rate = 9.7

- Not included
- Less than statewide
- 9.7 - 11.2
- Greater than 11.2

* 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

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

YOUTH RISK AND RESILIENCY

Association Between Risk and Resiliency

Strong relationships with parents, peers, schools, and adults in the community can be protective factors for engaging in risk behaviors that endanger the health and well being of young people. These protective factors, or resiliency factors, are measured by several series of questions in the NM Youth Risk and Resiliency Survey. Results from the 2009 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 factors presented in the following charts are:

- Caring and supportive relationships in the family: the interactions between youth and parents or other adults in the home that convey love, acceptance, and affirmation.
- Positive peer influence (pro-social peers): standards for acceptable behavior are influenced by peers and close friends (i.e., students whose friends do not get into a lot of trouble and do well in school are likely to do the same).
- High expectations by an adult in the community: adults outside of the home who recognize and expect success from youth.
- Caring and supportive relationships in the school: the interactions between youth and teachers or other adults in the school that convey love, acceptance, and affirmation.
- Behavioral boundaries in the school: student perception that there are clear standards for acceptable and appropriate behavior in the school.
- Involvement in school activities: taking part in in school sports, clubs, or other extra-curricular activities

Students responding to the YRRS are categorized as having low, moderate, or high levels of each resiliency factor. The bar charts below and on the following pages show the prevalence of selected risk behaviors among each of these three groups of students. In general, students having low levels of resiliency factors (light colored bars) have a higher prevalence of risk behaviors than other students, and students having high levels of resiliency factors (dark colored bars) have lower rates of risk behaviors.

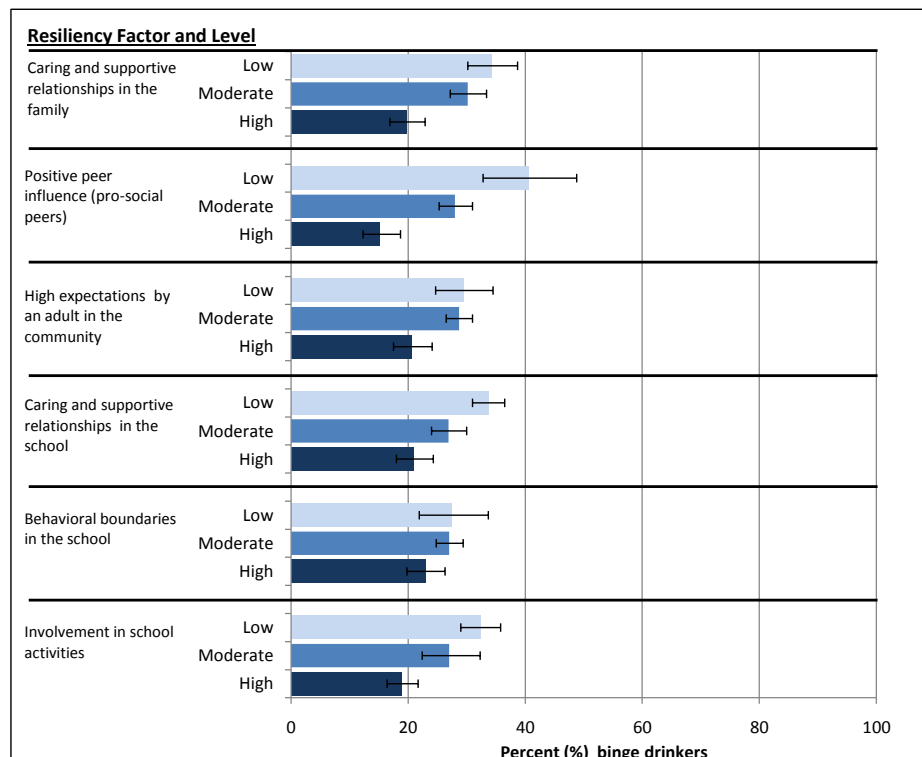
Chart 1: Binge Drinking by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to be binge drinkers if they had high levels

- Caring and supportive relationships in the family
- Positive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Involvement in school activities.

This relationship is not statistically significant for

- Behavioral boundaries in the school.



* Had 5 or more drinks on a single occasion (i.e., in a row or within a couple of hours) at least once in the past 30 days

YOUTH RISK AND RESILIENCY (continued)

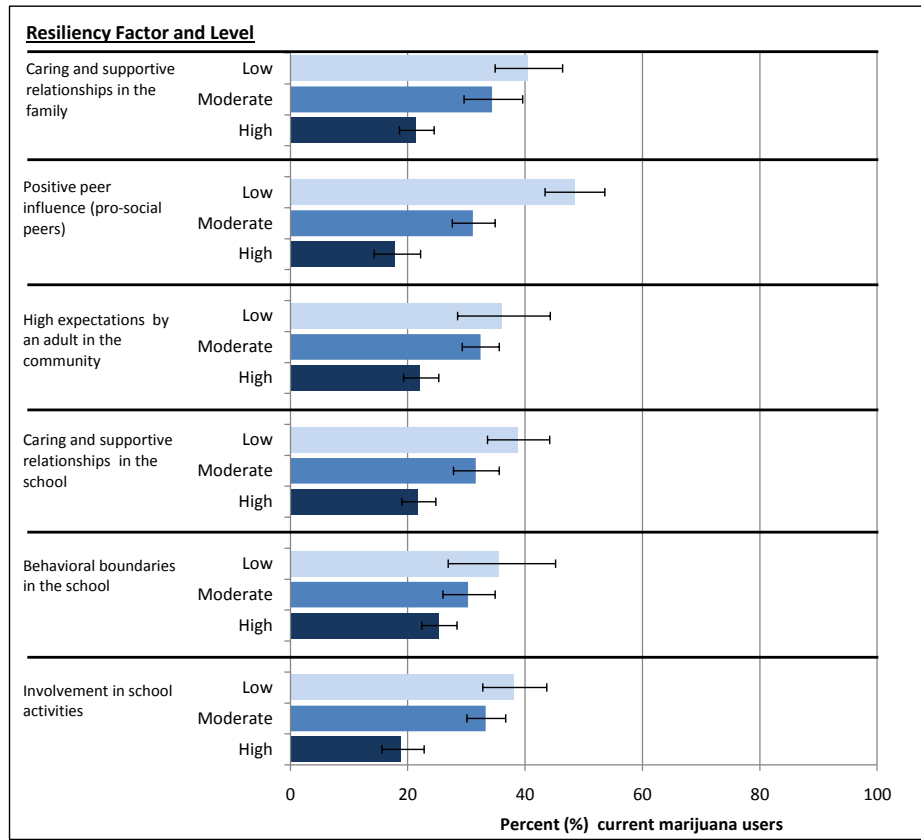
Chart 2: Current Marijuana Use* by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to be current marijuana users if they had high levels of

- Caring and supportive relationships in the family
- Postive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Involvement in school activities.

This relationship is not statistically significant for

- Behavioral boundaries in the school.

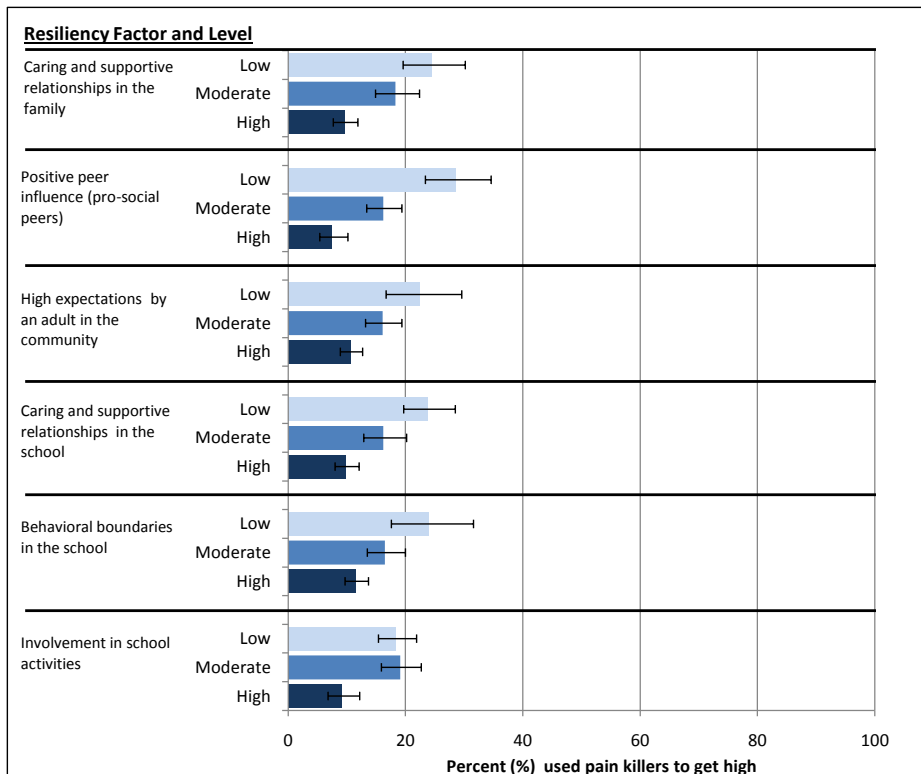


* Used marijuana in the past 30 days

Chart 3: Used Pain Killers to Get High by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to be use pain killers to get high if they had

- Caring and supportive relationships in the family
- Postive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Behavioral boundaries in the school.
- Involvement in school activities.



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

YOUTH RISK AND RESILIENCY (continued)

Chart 4: Current Cocaine Use* by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to be current cocaine users if they had high levels of

- Caring and supportive relationships in the family
- Postive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Involvement in school activities.

Students were less likely to be current cocaine users if they had high or moderage levels of

- Behavioral boundaries in the school.

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

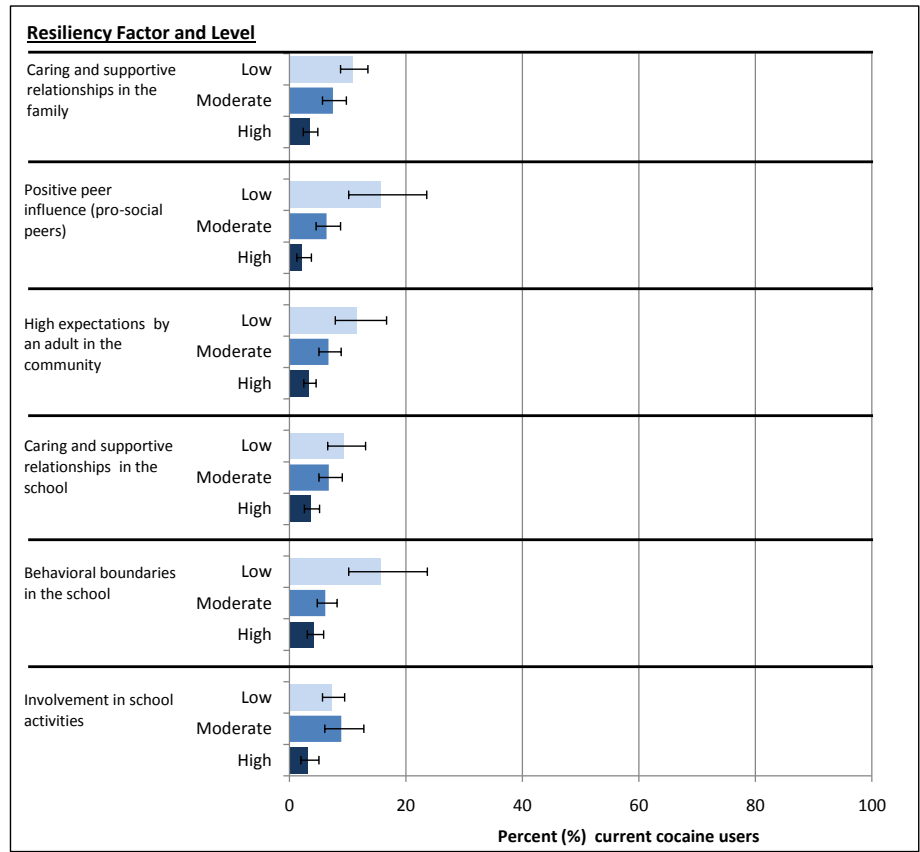


Chart 5: Current Cigarette Smoking by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

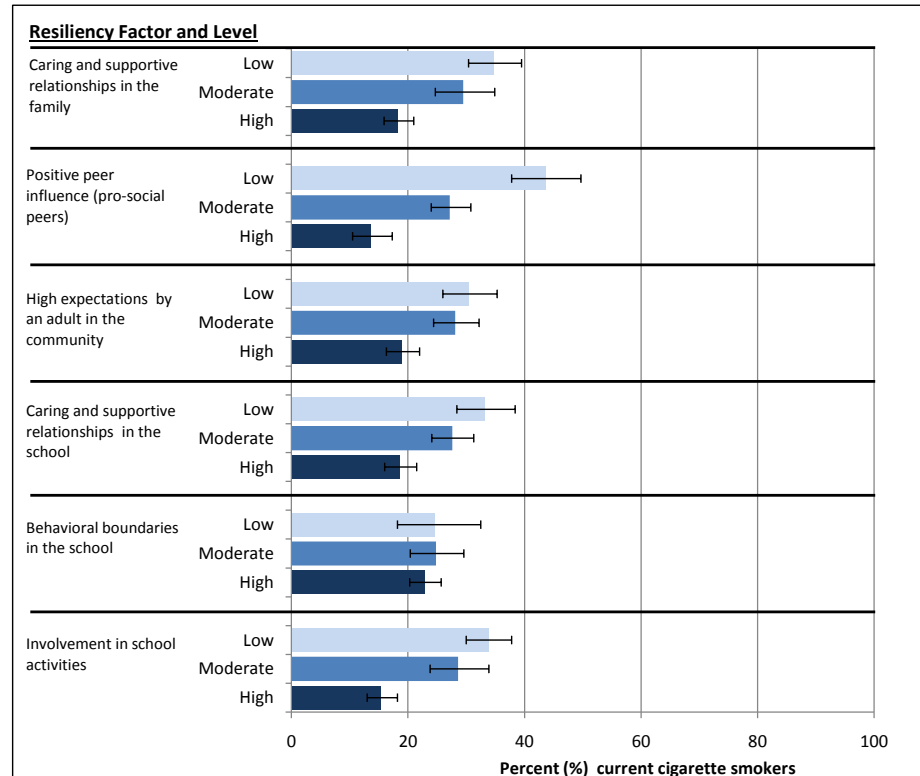
Students were less likely to be current cigarette smokers if they had

- Caring and supportive relationships in the family
- Postive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Involvement in school activities.

This relationship is not statistically significant for

- Behavioral boundaries in the school.

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



YOUTH RISK AND RESILIENCY (continued)

Chart 6: Persistent Sadness or Hopelessness by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to have persistent feelings of sadness or hopelessness if they had high levels of

- Caring and supportive relationships in the family
- Positive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Behavioral boundaries in the school.
- Involvement in school activities.

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

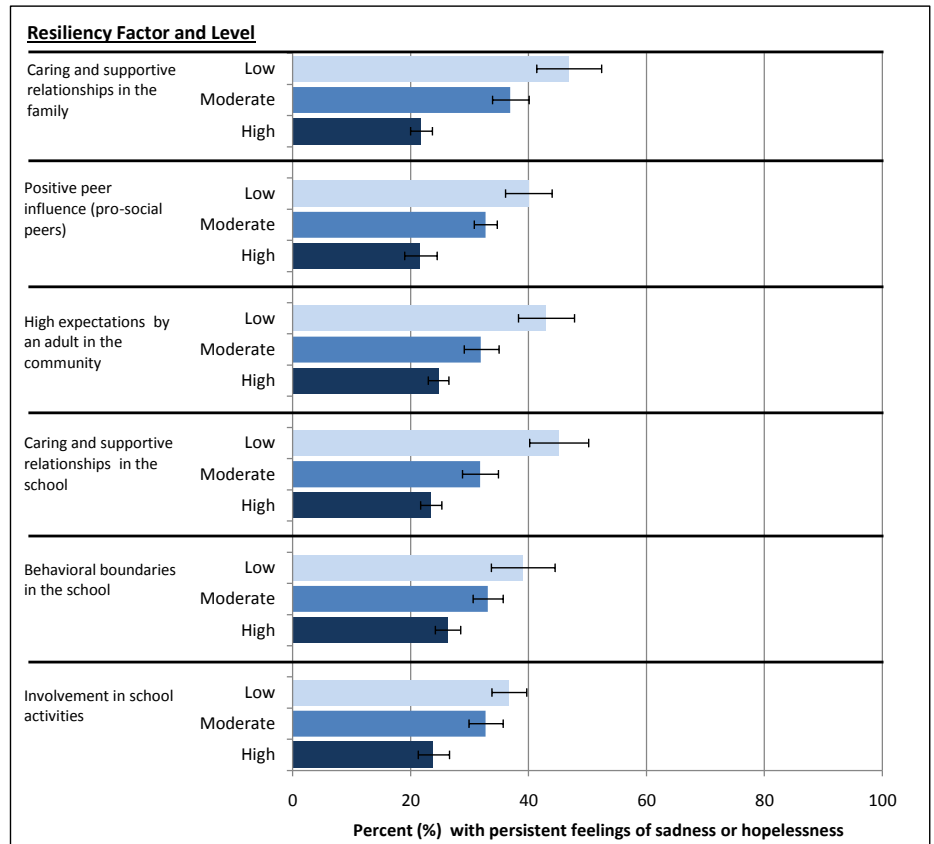
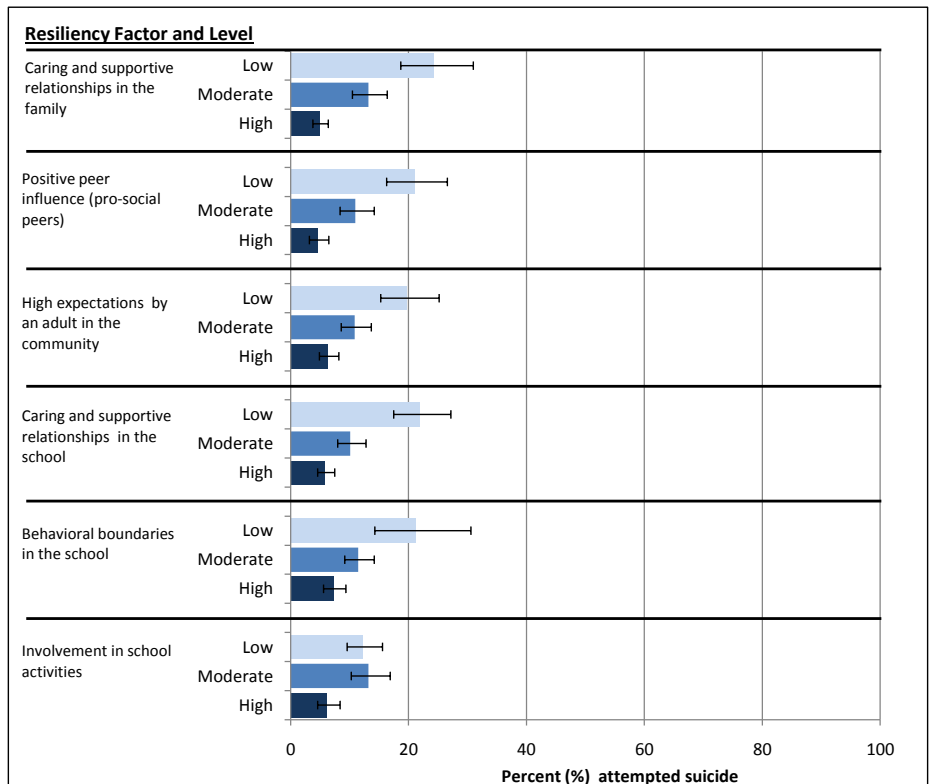


Chart 7: Suicide Attempts by Selected Resiliency Factors, Grades 9-12, New Mexico, 2009

Students were less likely to attempt suicide if they had high levels of

- Caring and supportive relationships in the family
- Positive peer influence
- High expectations in the community
- Caring and supportive relationships in the school
- Behavioral boundaries in the school.
- Involvement in school activities.

** Attempted suicide at least once in the past 12 months*



Section 2

Consumption

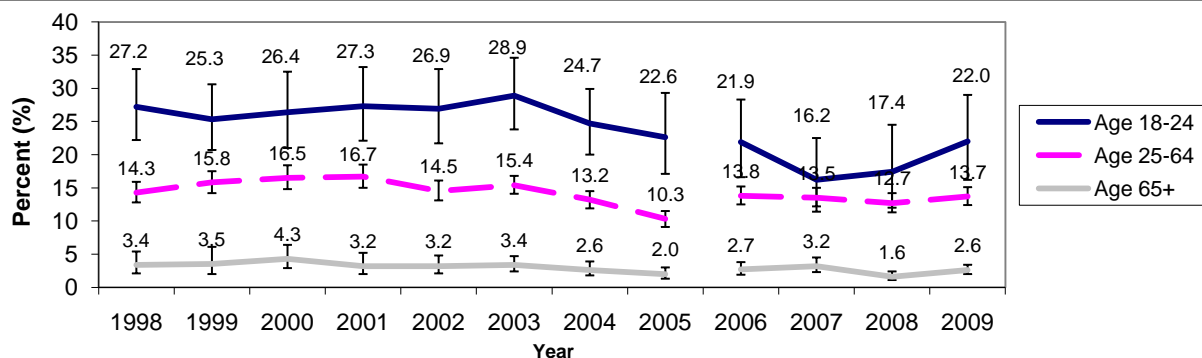
ADULT BINGE DRINKING

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 5 or more drinks on a single occasion for men or 4 or more drinks on a single occasion for women, generally within about 2 hours. According to the latest estimates from the Centers for Disease Control and Prevention, about 47% of homicides, 32% of falls 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, after decreasing for several years in a row, appears to have increased in 2008 and 2009. Chart 2 shows that adults who do binge drink continue to do so multiple times per month; and to drink well above the binge drinking limit when they do. County-level results are shown in Table 2 and Charts 3-4. Survey-related issues (e.g., poor landline telephone coverage) may be affecting reported binge drinking rates in some counties (e.g., McKinley County).

Chart 1: Binge Drinking (past 30 days)* by Age, Adults Aged 18+, New Mexico, 1998-2009



* Binge drinking definition: 1998-2005, drinking five or more drinks on an occasion at least once in past 30 days; 2006-2009, drinking five or more drinks (for men) or four or more drinks (for women) on an occasion at least once in past 30 days
 Source: BRFSS; SAEP (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, 2009

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	42,012	2,520	56,309	--	16.8	3.2	15.8
	Hispanic	11,008	35,941	1,294	48,243	25.9	20.7	5.1	20.0
	American Indian	--	7,731	--	14,503	--	22.5	--	24.9
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	32,953	89,245	4,127	126,325	32.2	18.2	3.7	17.9
Female	White	--	22,288	2,342	29,510	--	9.3	2.5	8.2
	Hispanic	4,824	19,847	168	24,838	9.7	9.7	0.5	8.5
	American Indian	--	2,780	0	3,302	--	8.0	0.0	6.3
	Black	--	1,103	--	1,103	--	10.9	--	8.6
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	10,226	47,230	2,510	59,966	10.9	9.3	1.8	8.0
Total	White	16,658	64,300	4,862	85,819	30.0	13.2	2.8	12.0
	Hispanic	15,832	55,788	1,462	73,081	17.1	14.8	2.3	13.7
	American Indian	7,099	10,511	195	17,805	20.4	15.2	3.2	16.2
	Black	--	1,666	--	1,666	--	9.8	--	7.1
	Asian/Pacific Islander	--	408	--	1,301	--	3.1	--	7.7
	Total	43,179	136,476	6,637	186,292	22.0	13.7	2.6	12.8

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

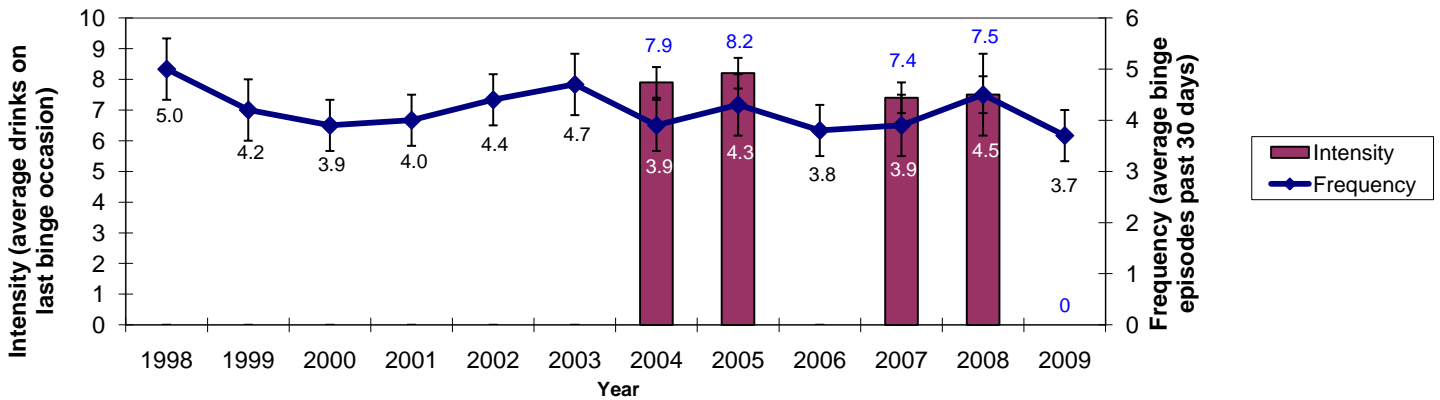
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAEP

ADULT BINGE DRINKING (continued)

Chart 2: Binge Drinking Frequency and Intensity*, Adult Binge Drinkers Aged 18+, New Mexico, 1998-2009



* Binge frequency is number of binge episodes in past 30 days; binge intensity is average number of drinks on last binge occasion
 Source: BRFSS; SAEP

Table 2: Binge Drinking (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2009

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	35,289	22,630	4,569	--	--	63,718	14.6	13.4	19.4	--	--	13.6
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	1,725	2,597	--	--	--	5,445	7.4	14.0	--	--	--	11.7
Cibola	15	--	945	--	--	1,871	0.3	--	16.5	--	--	11.0
Colfax	302	--	--	--	--	519	3.7	--	--	--	--	3.7
Curry	2,669	--	--	--	--	4,808	16.4	--	--	--	--	17.2
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	3,409	13,575	--	--	--	18,403	6.9	16.4	--	--	--	12.6
Eddy	3,987	992	--	--	--	5,745	16.8	8.4	--	--	--	14.5
Grant	857	660	--	--	--	1,692	6.6	5.7	--	--	--	6.3
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	1,824	1,753	--	--	--	4,419	9.6	11.6	--	--	--	12.0
Lincoln	1,993	--	--	--	--	2,822	17.4	--	--	--	--	15.7
Los Alamos	1,905	--	--	--	--	2,090	16.5	--	--	--	--	14.0
Luna	1,201	--	--	--	--	2,569	16.8	--	--	--	--	17.7
McKinley	428	578	2,130	--	--	3,136	5.5	9.6	11.0	--	--	9.0
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	3,252	373	--	--	--	4,708	13.7	4.4	--	--	--	12.2
Quay	--	--	--	--	--	670	--	--	--	--	--	8.2
Rio Arriba	--	1,759	--	--	--	3,366	--	8.6	--	--	--	10.4
Roosevelt	757	--	--	--	--	1,293	9.6	--	--	--	--	9.6
Sandoval	7,103	2,966	--	--	--	13,576	12.2	11.7	--	--	--	13.5
San Juan	3,627	2,570	3,455	--	--	9,896	7.4	17.1	21.2	--	--	11.8
San Miguel	--	1,826	--	--	--	2,979	--	18.8	--	--	--	21.0
Santa Fe	5,912	7,473	--	--	--	13,905	11.1	18.8	--	--	--	14.0
Sierra	669	--	--	--	--	669	7.4	--	--	--	--	5.7
Socorro	1,129	--	--	--	--	1,822	17.7	--	--	--	--	14.1
Taos	2,321	842	--	--	--	3,852	18.9	6.1	--	--	--	12.4
Torrance	1,365	--	--	--	--	3,109	13.3	--	--	--	--	18.3
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	1,829	4,514	--	--	--	7,328	7.3	15.3	--	--	--	12.3
Total	85,633	73,260	17,805	1,666	1,301	186,284	12.0	13.8	16.2	7.1	7.7	12.8

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

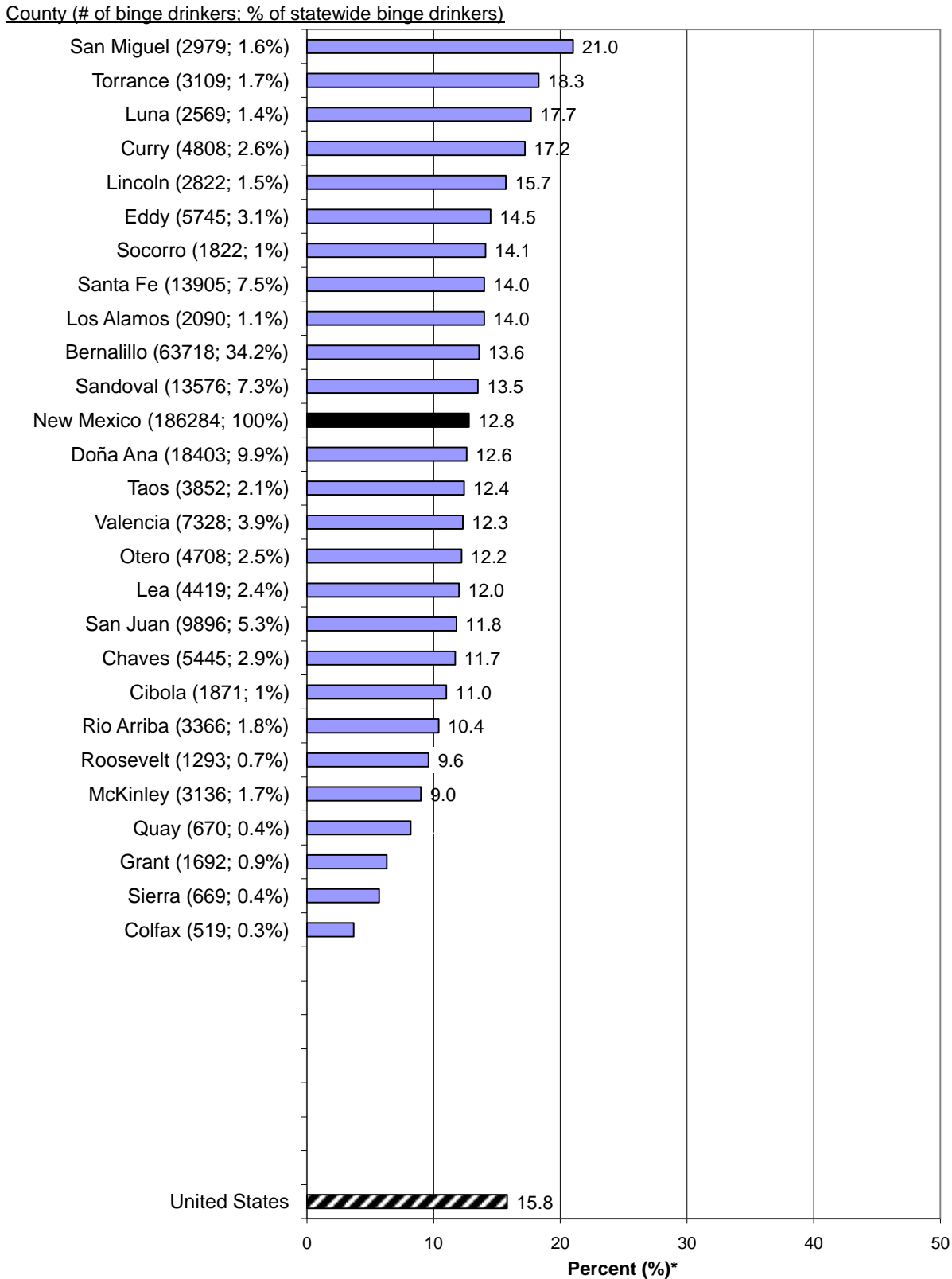
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAEP

ADULT BINGE DRINKING (continued)

Chart 3: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



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

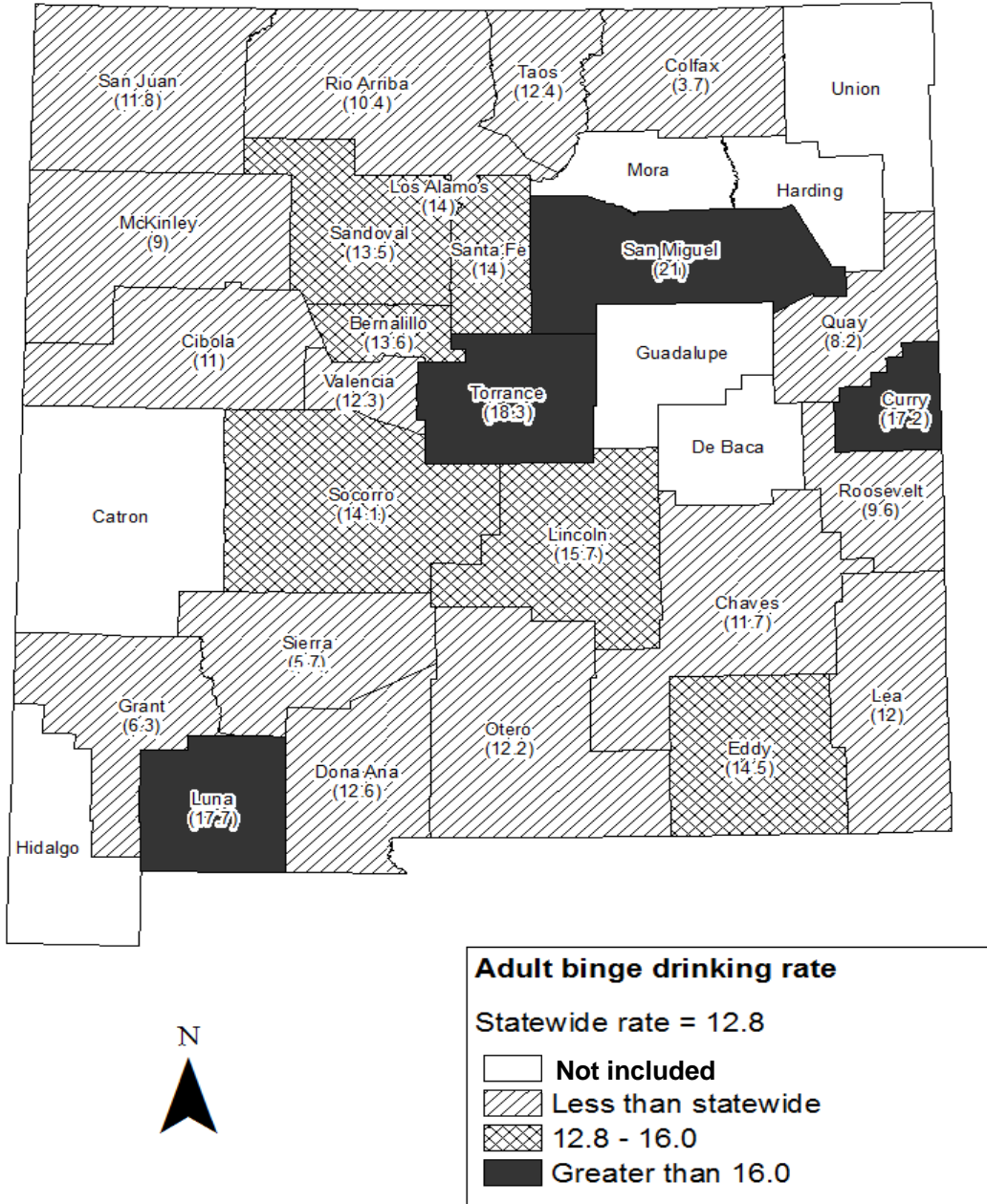
The following counties were not included due to small number of respondents (< 50) in cell:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

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

ADULT BINGE DRINKING (continued)

Chart 4: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days
 Not included: Rate not reported due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

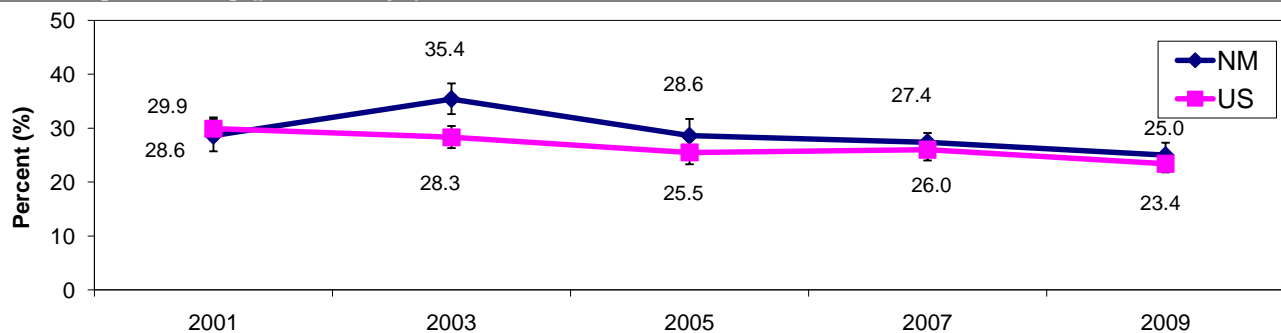
YOUTH BINGE DRINKING

Problem Statement

Binge drinking (defined as having 5 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.

Binge drinking is the norm among current high school drinkers in NM. In 2009, of the 40.5% of students who were current drinkers, 64.2% were binge drinkers, while only 35.8% did not binge drink. Chart 1 demonstrates that binge drinking prevalence has been decreasing in NM since 2003, as it has been in the US since 2001 or earlier. As shown in Chart 2, while binge drinking prevalence jumped significantly from 9th to 10th grade, there was no significant difference in prevalence between grades 10 and 12. There was also no difference in the prevalence of binge drinking between boys and girls. As seen in Table 1, the rate of binge drinking was higher among Hispanic students (29.4%) than White students (17.8%), and this was true among both girls (29.4% vs. 18.1%) and boys (29.4% vs. 17.2%). The prevalence of binge drinking was similar for boys (24.5%) and girls (25.4%). The binge drinking rate increased with grade level (9th=20.1%; 10th=25.4%; 11th=26.6%; 12th=29.2%).

Chart 1. Binge Drinking (past 30 days)*, Grades 9-12, New Mexico and US, 2001-2009



* Binge drinking definition: drinking five or more drinks of alcohol in a row within a couple of hours at least once in past 30 days

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

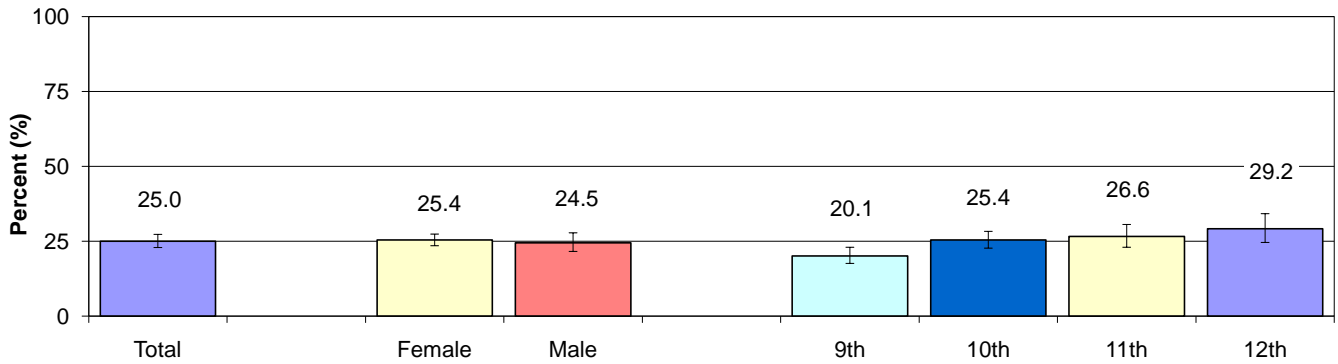
Table 1: Binge Drinking (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico, 2009

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	19.9 [12.8-29.7]	23.9 [18.4-30.4]	27.1 [17.1-40.0]	30.9 [23.9-39.0]	24.2 [19.3-29.9]
	Asian/Pacific-Islander	--	--	--	--	26.0 [13.9-43.5]
	Black/African-American	28.6 [16.0-45.6]	--	27.3 [13.6-47.1]	--	31.1 [20.1-44.6]
	Hispanic	23.2 [16.8-31.1]	30.9 [24.9-37.5]	30.6 [25.6-36.0]	33.7 [26.7-41.5]	29.4 [27.1-31.8]
	White	9.3 [5.8-14.6]	14.9 [10.7-20.3]	25.0 [14.8-38.8]	22.1 [12.4-36.3]	17.2 [12.1-23.9]
	Total	19.2 [15.3-23.8]	25.1 [21.2-29.4]	27.4 [23.3-32.0]	28.1 [21.6-35.6]	24.5 [21.6-27.8]
Female	American Indian	25.9 [21.3-31.1]	28.0 [21.6-35.3]	28.7 [12.6-52.9]	34.0 [20.2-51.2]	28.4 [22.9-34.6]
	Asian/Pacific-Islander	--	--	--	--	28.7 [18.6-41.5]
	Black/African-American	--	--	--	--	18.7 [11.1-29.8]
	Hispanic	25.4 [19.4-32.7]	30.2 [22.5-39.2]	26.9 [22.4-32.0]	36.4 [32.8-40.2]	29.4 [26.6-32.4]
	White	11.6 [7.1-18.2]	16.0 [9.0-26.9]	21.2 [14.2-30.3]	22.8 [15.0-33.1]	18.1 [15.7-20.6]
	Total	21.2 [17.7-25.1]	25.5 [21.5-30.0]	25.6 [21.6-30.0]	30.3 [25.3-35.8]	25.4 [23.5-27.4]
Total	American Indian	22.6 [18.2-27.7]	25.9 [21.4-31.0]	27.9 [16.0-43.9]	32.2 [23.0-43.0]	26.2 [22.1-30.7]
	Asian/Pacific-Islander	26.8 [14.2-44.8]	--	24.3 [13.8-39.2]	--	28.0 [18.5-39.9]
	Black/African-American	25.5 [13.8-42.3]	28.9 [14.7-48.8]	26.8 [18.5-37.1]	--	26.4 [17.4-37.9]
	Hispanic	24.3 [19.9-29.3]	30.5 [25.6-35.9]	28.7 [25.1-32.5]	35.1 [31.0-39.4]	29.4 [28.1-30.7]
	White	10.4 [6.6-15.9]	15.5 [12.0-19.9]	23.5 [16.6-32.1]	22.5 [17.7-28.1]	17.8 [15.3-20.7]
	Total	20.1 [17.6-23.0]	25.4 [22.7-28.3]	26.6 [23.0-30.6]	29.2 [24.6-34.2]	25.0 [22.9-27.3]

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

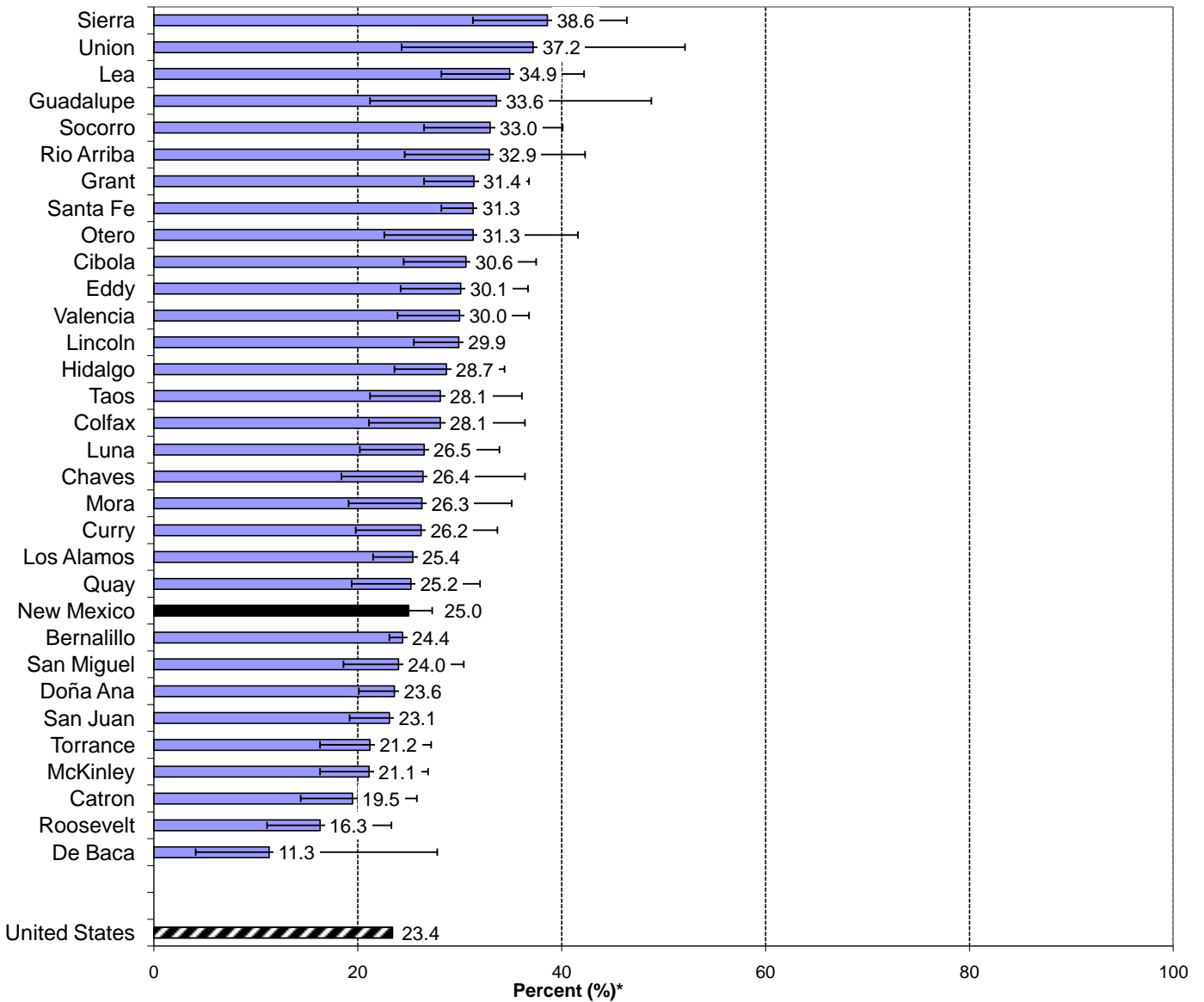
YOUTH BINGE DRINKING (continued)

Chart 2. Binge Drinking (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Binge Drinking (past 30 days)* by County, Grades 9-12, New Mexico, 2009

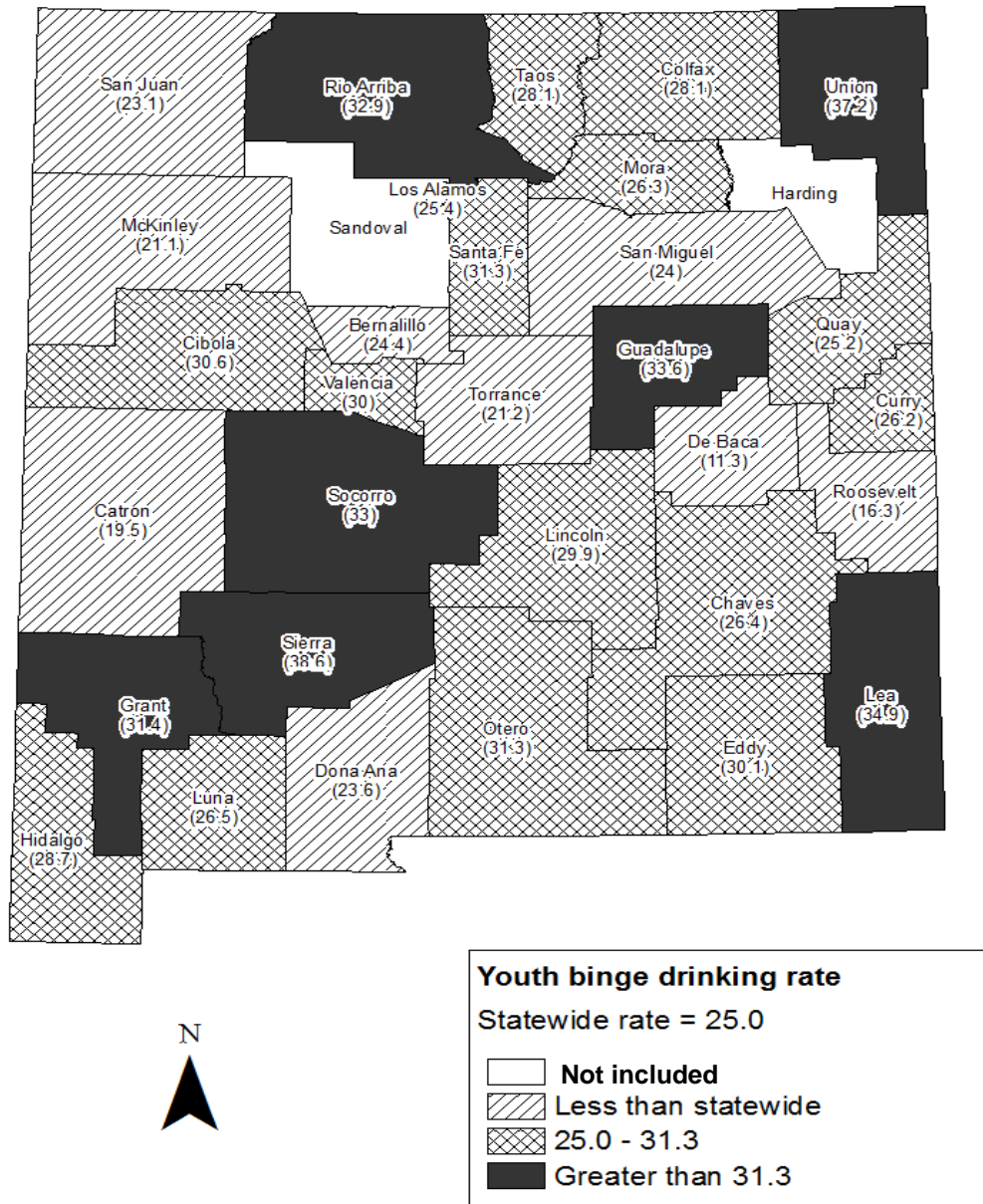


* Estimate of percent of high school students who reported binge drinking at least once in past 30 days
 Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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

YOUTH BINGE DRINKING (continued)

Chart 4. Binge Drinking (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009*



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

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

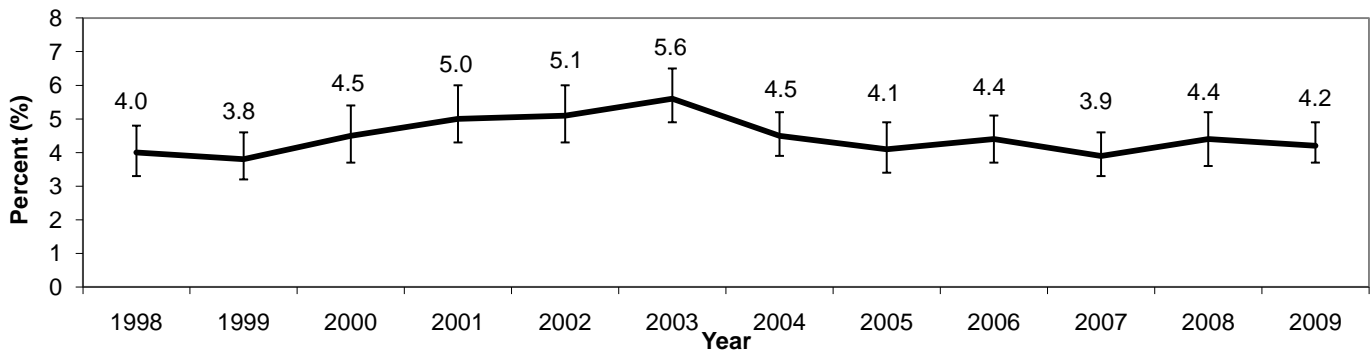
ADULT HEAVY DRINKING

Problem Statement

Heavy drinking (defined as having more than 2 drinks/day, for males; and more than 1 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 increased slightly in 2008 and 2009, from a rate of 3.9% in 2007. Heavy drinking prevalence is still lower among adults in New Mexico (4.2%) than in the U.S. overall (5.1%). As shown in Table 1, heavy drinking was most prevalent among adults in the 25-64 year age group, with 4.4% of adults in this group reporting past-month heavy drinking. New Mexico men were only slightly more likely to report chronic drinking than women (4.5% vs 3.9%); and White females had the highest reported rate of heavy drinking (6.0%) followed by Hispanic males (5.7%) and White males (4.1%).

Chart 1: Heavy Drinking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2009



* 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; SAEP (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, 2009

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	11,686	2,193	14,389	--	4.7	2.8	4.1
	Hispanic	4,988	8,469	214	13,671	11.6	4.9	0.8	5.7
	American Indian	--	1,453	--	1,521	--	4.3	--	2.7
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	6,264	22,244	2,614	31,122	6.4	4.6	2.3	4.5
Female	White	--	15,533	4,349	21,585	--	6.5	4.6	6.0
	Hispanic	0	4,930	373	5,303	0.0	2.4	1.0	1.8
	American Indian	--	389	0	650	--	1.1	0.0	1.3
	Black	--	577	--	614	--	5.7	--	4.8
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	1,964	21,949	4,759	28,672	2.1	4.3	3.4	3.9
Total	White	2,212	27,219	6,543	35,974	4.2	5.6	3.8	5.1
	Hispanic	4,988	13,399	586	18,974	5.5	3.6	0.9	3.6
	American Indian	261	1,842	68	2,172	0.8	2.7	1.1	2.0
	Black	--	577	--	614	--	3.5	--	2.7
	Asian/Pacific Islander	--	0	--	0	--	0.0	--	0.0
	Total	8,228	44,193	7,373	59,794	4.3	4.4	2.9	4.2

* 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; SAEP

ADULT HEAVY DRINKING (continued)

Problem Statement (continued)

Meanwhile, it is notable that American Indian males and females, who have the highest rates of alcohol-related chronic disease death, once again, as in past years, have the lowest reported heavy drinking rates. The lack of congruence between heavy drinking rates and chronic disease death rates raises important questions. Is this result accurate? If so, 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. On the other hand, it's also possible that this low heavy drinking rate is an artifact of survey methods. Ongoing efforts are being made to improve American Indian representation in the Behavioral Risk Factor Surveillance Survey (BRFSS). American Indian male binge drinking rates were higher than the binge drinking rates for males in other race/ethnic groups. This finding, which is congruent with the very high alcohol-related injury rates in this population, suggests that the BRFSS may be more accurately measuring American Indian alcohol consumption than in the past.

In 2007, as shown in Table 2 and Chart 2, heavy drinking rates were highest in Curry, Los Alamos, Colfax, and Otero counties; and substantially lower in counties that have among the highest rates of alcohol-related chronic disease death rates (e.g., McKinley, Cibola), once again raising the types of questions mentioned above.

Table 2: Heavy Drinking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2009

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	10,927	7,081	187	--	--	18,990	4.6	4.2	0.9	--	--	4.1
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	1,643	384	--	--	--	2,028	7.1	2.0	--	--	--	4.4
Cibola	47	--	0	--	--	72	1.0	--	0.0	--	--	0.4
Colfax	272	--	--	--	--	1,139	3.4	--	--	--	--	7.8
Curry	1,018	--	--	--	--	2,598	6.3	--	--	--	--	9.3
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	3,026	2,523	--	--	--	5,961	6.1	3.1	--	--	--	4.1
Eddy	1,365	0	--	--	--	2,130	5.8	0.0	--	--	--	5.4
Grant	543	359	--	--	--	903	4.2	3.1	--	--	--	3.4
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	444	337	--	--	--	781	2.3	2.3	--	--	--	2.2
Lincoln	920	--	--	--	--	1,073	8.0	--	--	--	--	6.0
Los Alamos	1,221	--	--	--	--	1,221	10.6	--	--	--	--	8.1
Luna	258	--	--	--	--	258	3.7	--	--	--	--	1.8
McKinley	139	0	307	--	--	463	1.8	0.0	1.6	--	--	1.3
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	1,860	373	--	--	--	2,537	7.8	4.4	--	--	--	6.6
Quay	--	--	--	--	--	239	--	--	--	--	--	3.0
Rio Arriba	--	963	--	--	--	1,217	--	4.7	--	--	--	3.7
Roosevelt	41	--	--	--	--	340	0.5	--	--	--	--	2.5
Sandoval	3,254	816	--	--	--	4,362	5.7	3.2	--	--	--	4.4
San Juan	1,517	676	408	--	--	2,638	3.1	4.6	2.5	--	--	3.1
San Miguel	--	90	--	--	--	133	--	0.9	--	--	--	0.9
Santa Fe	3,808	2,073	--	--	--	6,083	7.2	5.4	--	--	--	6.2
Sierra	263	--	--	--	--	263	2.9	--	--	--	--	2.2
Socorro	283	--	--	--	--	585	4.4	--	--	--	--	4.6
Taos	780	0	--	--	--	1,114	6.3	0.0	--	--	--	3.6
Torrance	498	--	--	--	--	498	4.9	--	--	--	--	2.9
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	1,256	597	--	--	--	1,929	5.0	2.1	--	--	--	3.3
Total	36,062	18,974	2,172	614	0	59,882	5.1	3.6	2.0	2.7	0.0	4.2

* 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

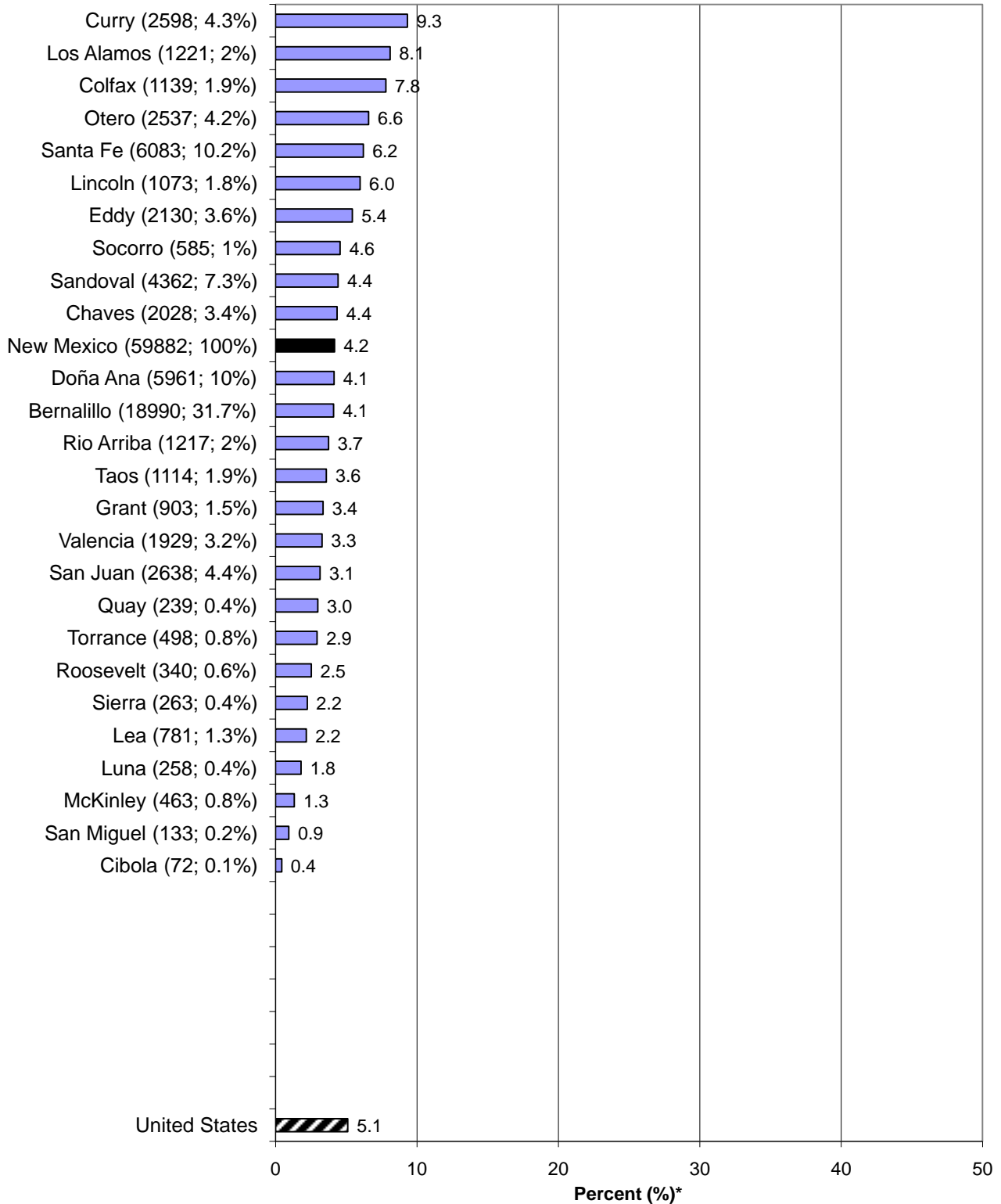
-- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

ADULT HEAVY DRINKING (continued)

Chart 2: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009

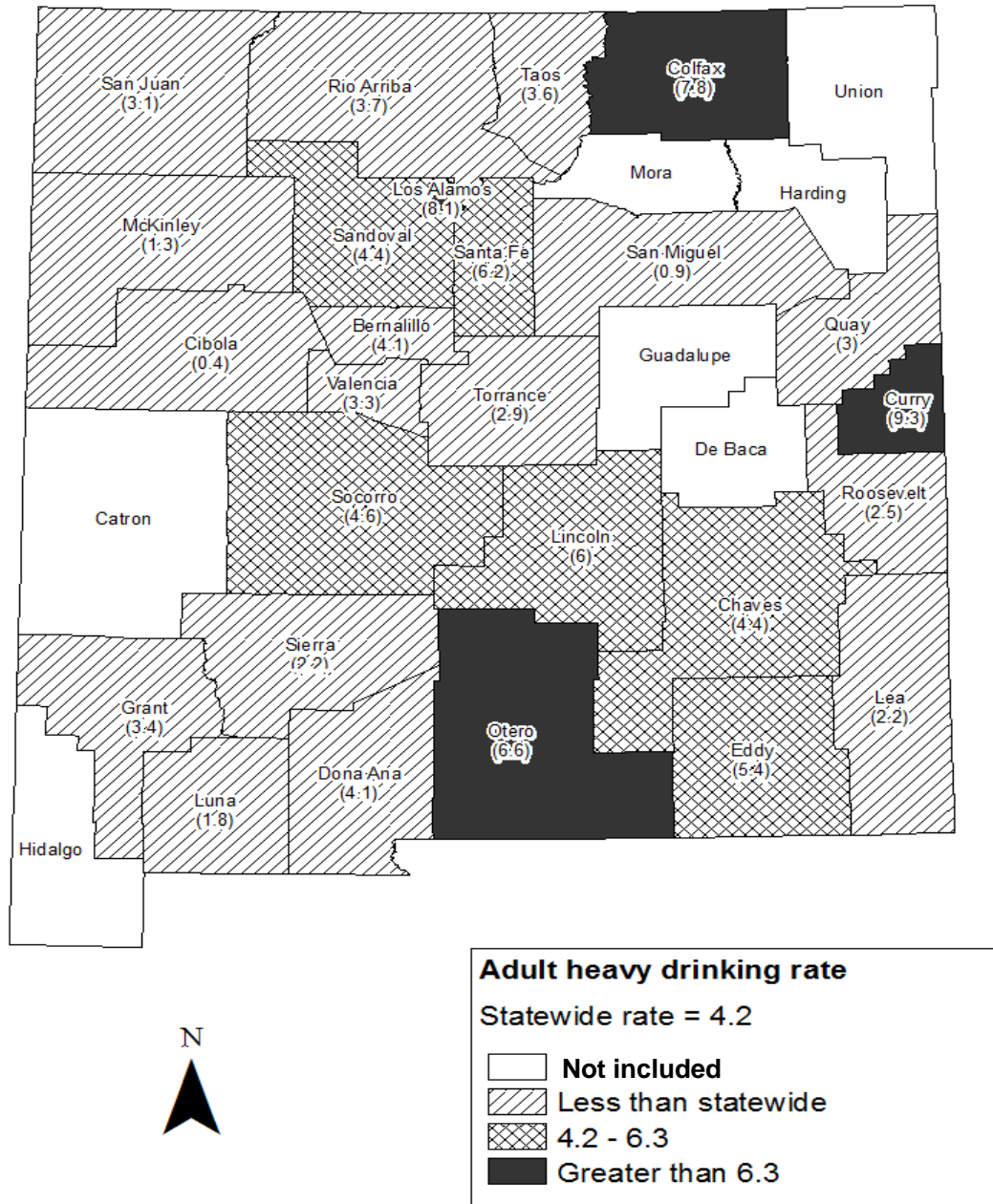
County (# of heavy drinkers; % of statewide heavy drinkers)



* 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, Union
 Source: NMBRFSS (NM); CDC BRFSS (US); SAEF

ADULT HEAVY DRINKING (continued)

Chart 3: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



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

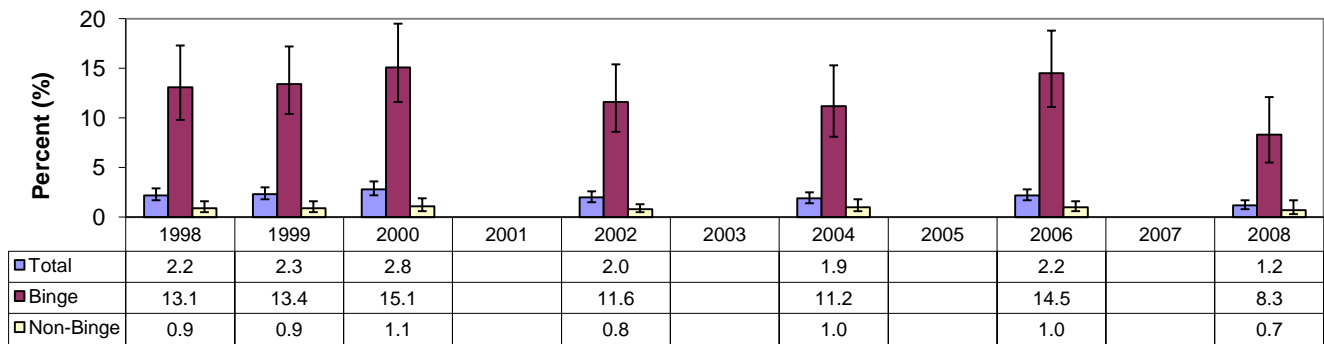
ADULT DRINKING AND DRIVING

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 2006, only 2.2% of the general population reported driving after drinking; but 14.5% of binge drinkers reported engaging in this risky behavior in the past 30 days, compared to only 1.0% of non-binge drinkers. On a positive note, Chart 1 shows that driving after drinking prevalence decreased significantly between 2006 and 2008 (from 2.1% to 1.2%), including a substantial decline among binge drinkers (from 14.5% to 8.3%).

As shown in Table 1 and Chart 2, driving after drinking continues to be most prevalent among the younger age groups that are also most likely to binge drink, with 2.9% of young adults (aged 18-24) reporting past-month drinking and driving in 2006, compared to lower rates in older age groups. New Mexico men continued to be more than twice as likely to report drinking and driving as women (1.9% vs 0.6%). Hispanic males (2.5%) were more likely to report drinking and driving than American Indian (2.0%) and White (1.6%) males. On the plus side, rates among all these groups were substantially reduced from 2006. Table 2 and Chart 3 show drinking and driving rates by county. Four of the ten counties with the highest reported drinking and driving rates (i.e., McKinley, Socorro, Taos, and Eddy) are also among the top ten counties in terms of alcohol-impaired motor vehicle crash fatality rates.

Chart 1: Drinking and Driving (past 30 days)* by Drinking Status, Adults Aged 18+, New Mexico, 1998-2008*



* Drinking and driving definition: drove after having "perhaps too much to drink" at least once in past 30 days

Source: BRFSS; SAEP (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, 2008

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	4,719	795	6,148	--	1.8	1.0	1.6
	Hispanic	--	2,077	0	5,793	--	1.2	0.0	2.5
	American Indian	--	1,117	--	1,117	--	2.9	--	2.0
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	4,349	8,307	795	13,451	4.1	1.7	0.7	1.9
Female	White	--	779	35	1,923	--	0.3	0.0	0.5
	Hispanic	117	940	0	1,058	0.2	0.5	0.0	0.4
	American Indian	--	76	--	358	--	0.2	--	0.7
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	1,507	2,564	35	4,106	1.5	0.5	0.0	0.6
Total	White	1,742	5,499	831	8,071	2.6	1.1	0.5	1.1
	Hispanic	3,833	3,017	0	6,850	4.3	0.8	0.0	1.3
	American Indian	281	1,194	0	1,475	1.0	1.7	0.0	1.4
	Black	--	--	--	651	--	--	--	3.5
	Asian/Pacific Islander	--	352	--	352	--	1.8	--	1.3
	Total	5,856	10,871	831	17,558	2.9	1.1	0.3	1.2

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

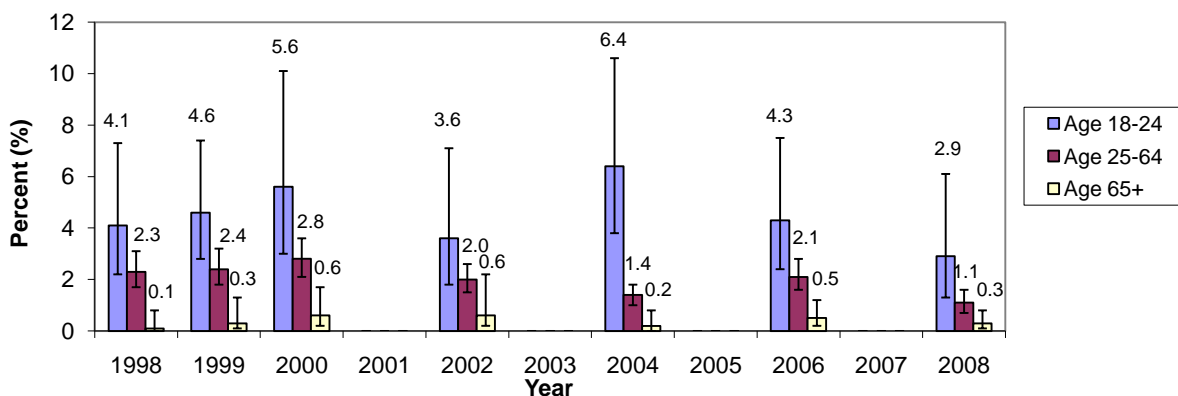
** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

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

Source: BRFSS; SAEP

ADULT DRINKING AND DRIVING (continued)

Chart 2: Drinking and Driving (past 30 days)* by Age, Adults Aged 18+, New Mexico, 1998-2008



* Drinking and driving definition: drove after having "perhaps too much to drink" at least once in past 30 days

Source: BRFSS; SAEP (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, 2008

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	2,269	290	--	--	--	3,327	0.9	0.2	--	--	--	0.7
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	0	229	--	--	--	229	0.0	1.1	--	--	--	0.5
Cibola	--	--	--	--	--	76	--	--	--	--	--	0.5
Colfax	--	--	--	--	--	0	--	--	--	--	--	0.0
Curry	193	--	--	--	--	1,248	1.1	--	--	--	--	3.7
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	916	2,101	--	--	--	3,018	1.7	2.9	--	--	--	2.2
Eddy	1,230	0	--	--	--	1,230	6.5	0.0	--	--	--	4.0
Grant	183	--	--	--	--	371	1.3	--	--	--	--	1.4
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	0	193	--	--	--	193	0.0	1.2	--	--	--	0.5
Lincoln	198	--	--	--	--	198	1.5	--	--	--	--	1.2
Los Alamos	0	--	--	--	--	0	0.0	--	--	--	--	0.0
Luna	--	--	--	--	--	0	--	--	--	--	--	0.0
McKinley	336	0	287	--	--	623	3.9	0.0	1.1	--	--	1.5
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	0	--	--	--	--	1,400	0.0	--	--	--	--	3.2
Quay	--	--	--	--	--	0	--	--	--	--	--	0.0
Rio Arriba	--	0	--	--	--	0	--	0.0	--	--	--	0.0
Roosevelt	116	--	--	--	--	116	1.4	--	--	--	--	1.0
Sandoval	1,108	0	--	--	--	1,150	2.0	0.0	--	--	--	1.3
San Juan	144	117	349	--	--	611	0.3	0.8	2.0	--	--	0.7
San Miguel	--	0	--	--	--	0	--	0.0	--	--	--	0.0
Santa Fe	982	1,185	--	--	--	2,167	1.9	3.0	--	--	--	2.1
Sierra	--	--	--	--	--	0	--	--	--	--	--	0.0
Socorro	--	--	--	--	--	481	--	--	--	--	--	3.5
Taos	355	373	--	--	--	1,080	3.1	4.1	--	--	--	5.0
Torrance	--	--	--	--	--	0	--	--	--	--	--	0.0
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	39	0	--	--	--	39	0.1	0.0	--	--	--	0.1
Total	8,071	6,850	1,475	651	352	17,558	1.1	1.3	1.4	3.5	1.3	1.2

* 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

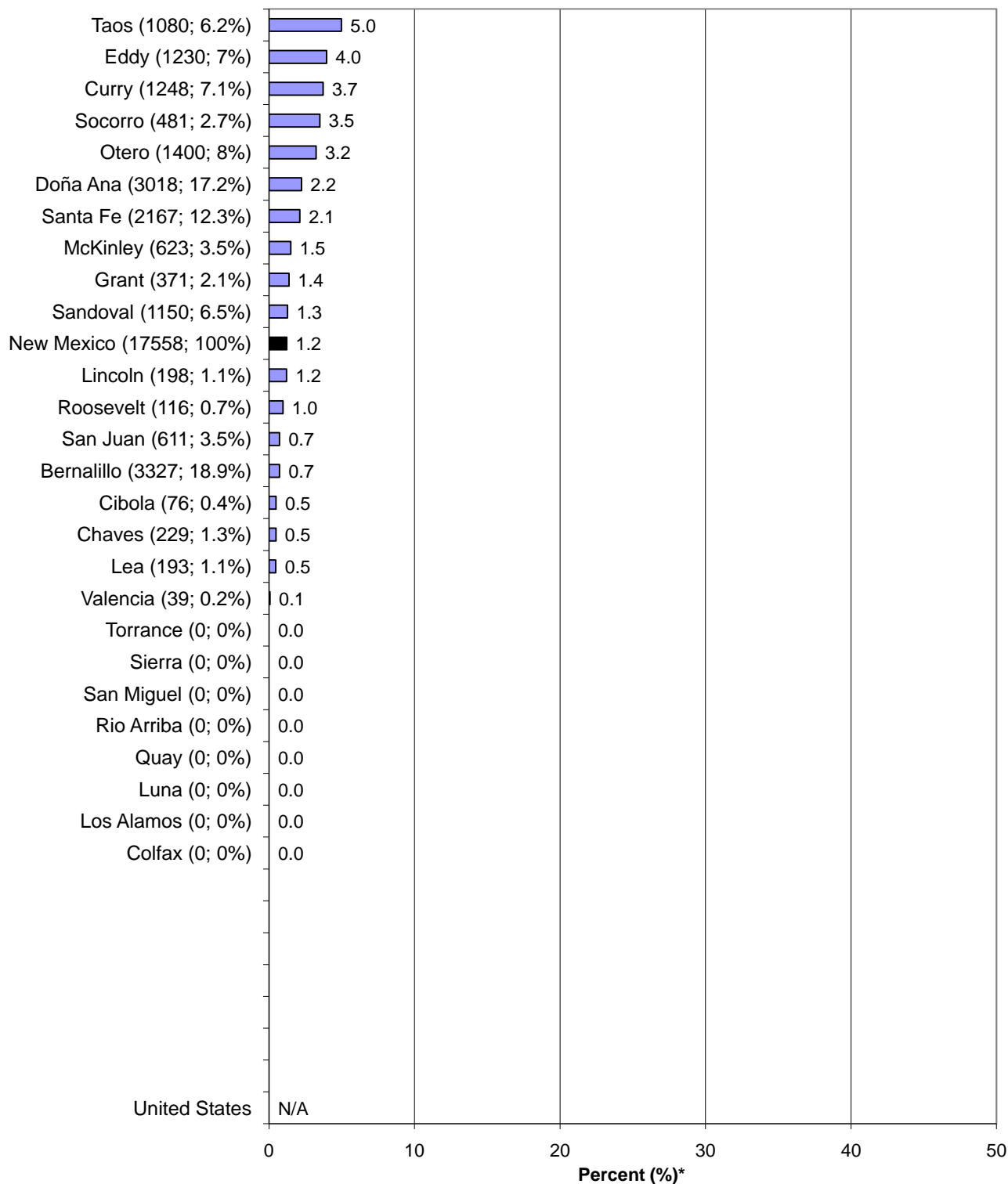
-- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

ADULT DRINKING AND DRIVING (continued)

Chart 3: Drinking and Driving (past 30 days)* by County, Adults Aged 18+, New Mexico, 2008

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:

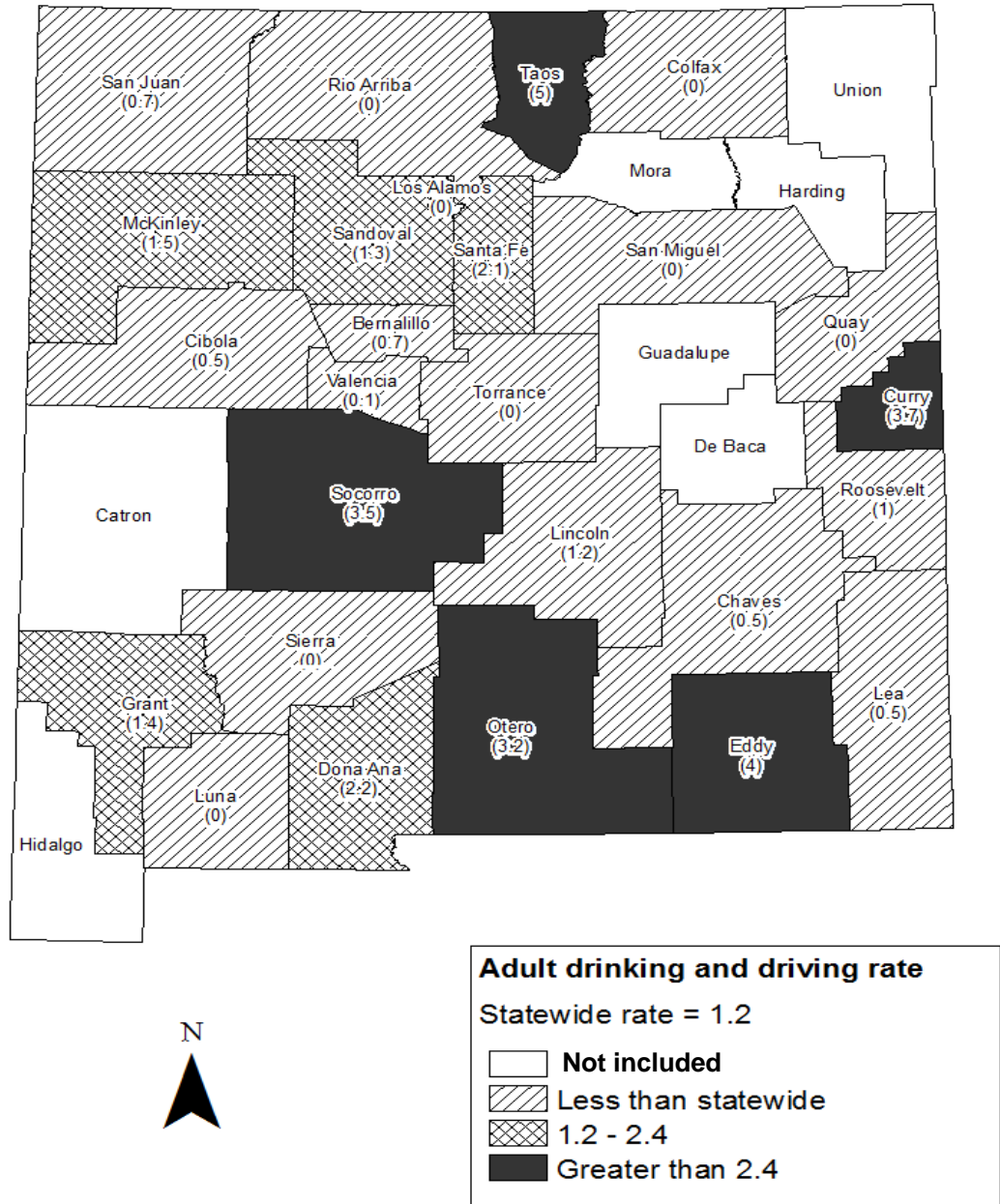
Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

N/A: United States rate not available

Source: BRFSS; SAEP

ADULT DRINKING AND DRIVING (continued)

Chart 4: Drinking and Driving (past 30 days)* by County, Adults Aged 18+, New Mexico, 2008



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

YOUTH DRINKING AND DRIVING

Problem Statement

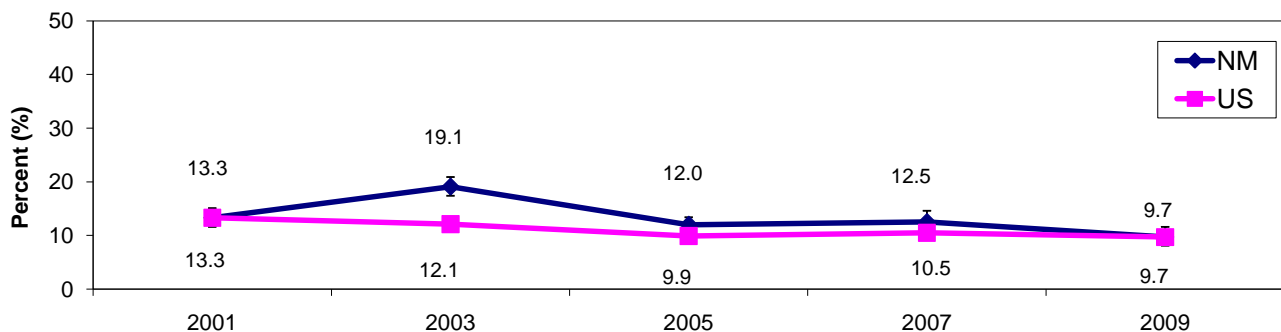
Drinking and driving is a major risk factor for the motor vehicle accidents, the leading cause of death among youth.

The rate of drinking and driving among NM high school students has been decreasing since 2003, and has been decreasing among US high school students since 2001 or earlier. In recent years NM had a higher rate than the US, but in 2009 the difference between the US and NM disappeared, and both had a rate of 9.7%.

Drinking and driving increased in prevalence with increasing grade levels (9th = 7.9%; 10th = 9.4%; 11th = 10.2%; 12th = 11.9%). The prevalence did not vary significantly by gender or by race/ethnicity.

The drinking and driving rate was highest in Union (29.6%), Sierra (17.2%), and Eddy County (16.6%). The rate was lowest in Torrance (5.9%), Roosevelt (7.3%), Colfax (8.6%), and De Baca County (8.6%).

Chart 1. Drinking and Driving (past 30 days)*, Grades 9-12, New Mexico and US, 2001-2009



* Drinking and driving definition: drove "when [they] had been drinking alcohol" at least once in past 30 days

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

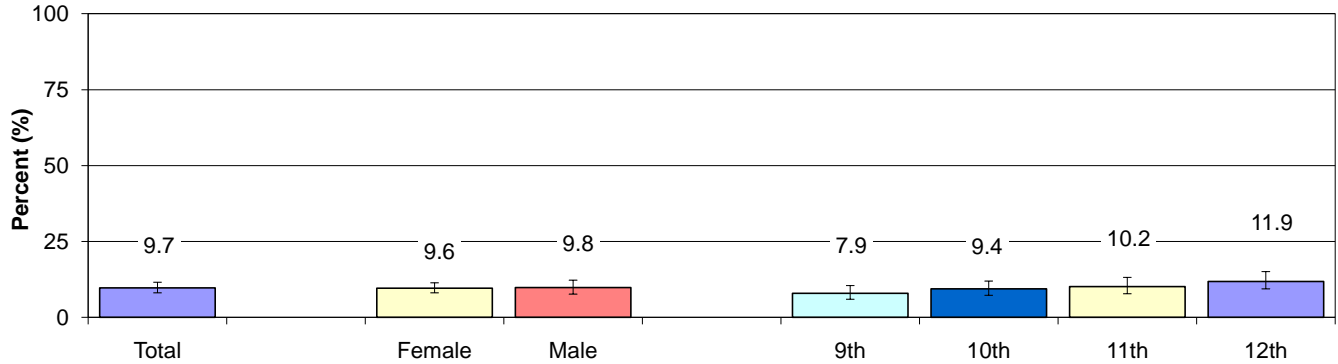
Table 1: Drinking and Driving (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico,

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	12.6 [5.0-28.2]	9.5 [5.0-17.1]	13.5 [8.4-20.8]	16.9 [10.4-26.3]	12.6 [8.0-19.2]
	Asian/Pacific-Islander	--	--	--	--	12.8 [6.4-24.1]
	Black/African-American	10.1 [2.2-36.3]	--	11.1 [4.5-24.7]	--	11.6 [6.1-20.7]
	Hispanic	8.2 [4.7-13.9]	11.0 [8.5-14.1]	12.4 [9.2-16.5]	9.3 [5.8-14.7]	10.3 [8.7-12.1]
	White	2.7 [0.8-8.7]	4.3 [0.9-17.8]	10.4 [3.6-26.6]	12.0 [6.1-22.4]	6.8 [3.7-12.3]
	Total	7.8 [4.9-12.2]	8.8 [6.6-11.7]	12.0 [8.6-16.6]	11.4 [8.0-16.0]	9.8 [7.7-12.3]
Female	American Indian	12.2 [7.1-20.2]	14.4 [7.5-25.9]	12.0 [4.8-26.8]	11.6 [7.7-17.1]	12.7 [9.7-16.4]
	Asian/Pacific-Islander	--	--	--	--	14.4 [8.5-23.4]
	Black/African-American	--	--	--	--	7.6 [3.3-16.2]
	Hispanic	7.2 [4.9-10.4]	9.4 [7.1-12.4]	7.5 [5.2-10.9]	11.4 [8.5-15.3]	8.9 [7.1-11.1]
	White	5.6 [2.7-11.0]	5.2 [2.5-10.5]	6.5 [3.2-13.0]	14.2 [8.0-24.0]	8.0 [5.7-11.0]
	Total	8.1 [6.4-10.2]	9.9 [6.9-14.0]	8.3 [6.4-10.8]	12.5 [9.7-15.9]	9.6 [8.1-11.4]
Total	American Indian	12.4 [7.3-20.2]	11.9 [7.4-18.8]	12.8 [7.5-20.9]	14.2 [10.4-19.0]	12.6 [9.6-16.3]
	Asian/Pacific-Islander	12.3 [5.1-26.7]	--	11.1 [5.2-22.2]	--	14.2 [8.6-22.7]
	Black/African-American	10.4 [2.4-35.0]	11.0 [5.2-21.6]	10.9 [5.2-21.6]	--	10.0 [5.6-17.2]
	Hispanic	7.7 [5.8-10.0]	10.2 [8.1-12.7]	9.9 [7.3-13.2]	10.4 [7.4-14.3]	9.6 [8.2-11.1]
	White	4.1 [2.2-7.5]	4.7 [1.9-10.9]	8.5 [4.1-16.5]	13.3 [8.1-20.9]	7.4 [4.9-10.9]
	Total	7.9 [6.0-10.5]	9.4 [7.3-12.0]	10.2 [7.8-13.2]	11.9 [9.4-15.1]	9.7 [8.1-11.6]

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

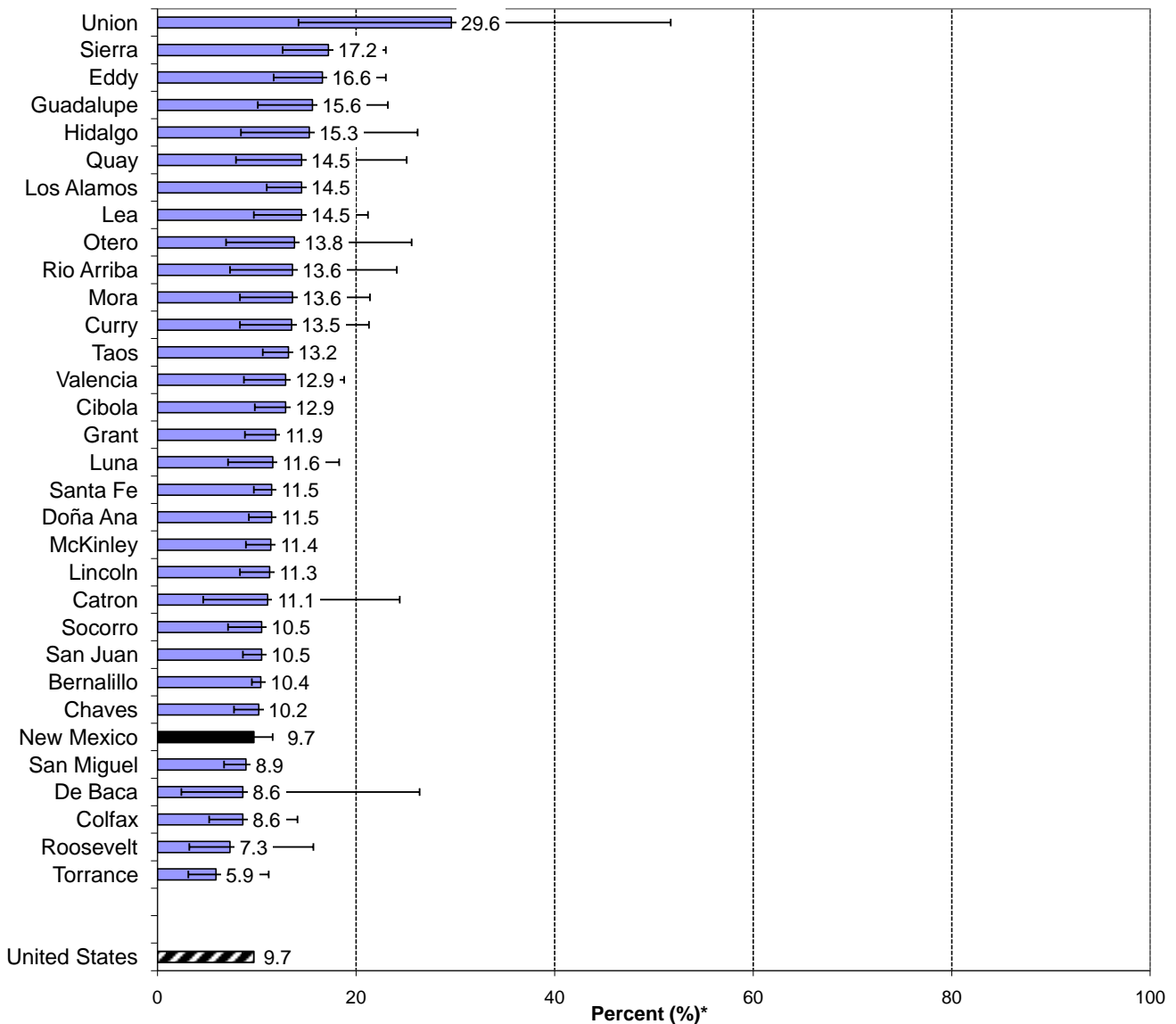
YOUTH DRINKING AND DRIVING (continued)

Chart 2. Drinking and Driving (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Drinking and Driving (past 30 days)* by County, Grades 9-12, New Mexico, 2009



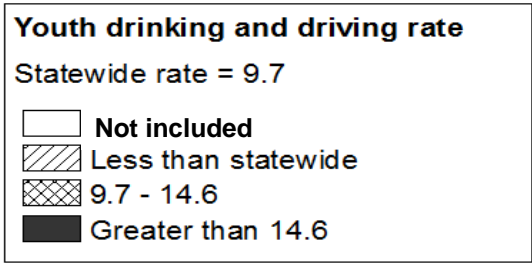
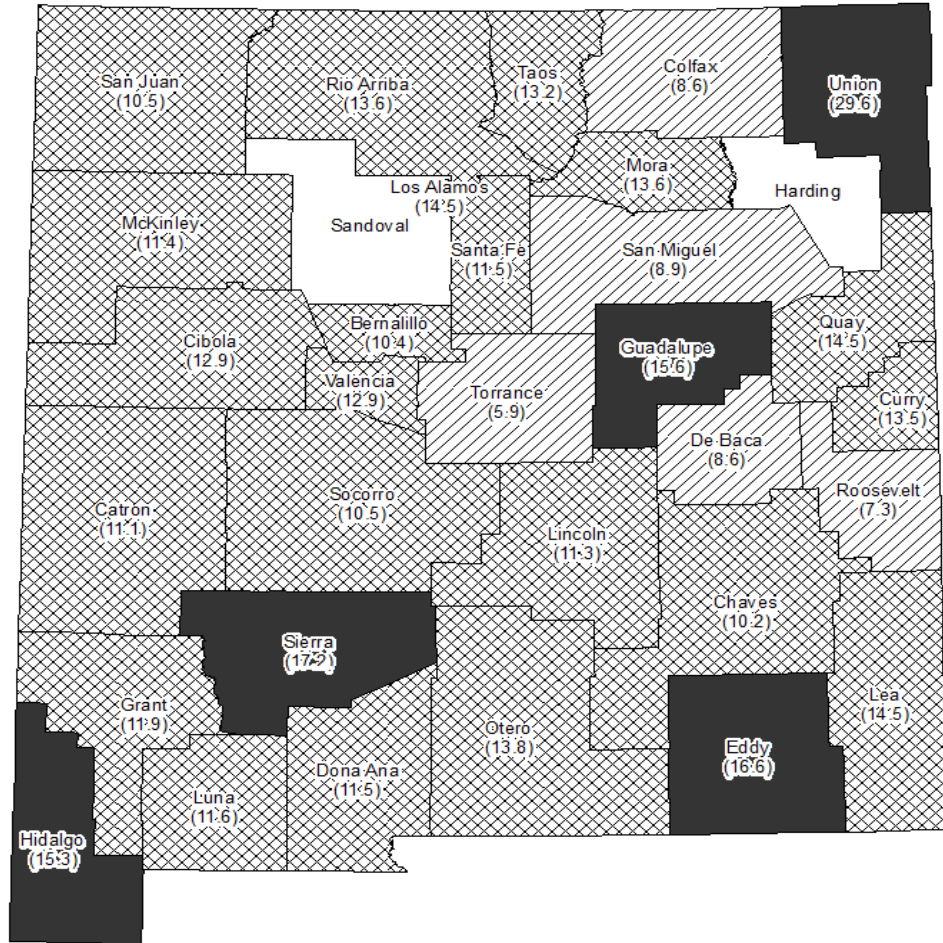
* Estimate of percent of high school students who reported drinking and driving at least once in past 30 days

Harding and Sandoval 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 DRINKING AND DRIVING (continued)

Chart 4. Drinking and Driving (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



* Estimate of percent of high school students who reported drinking and driving at least once in past 30 days

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

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

YOUTH MARIJUANA USE

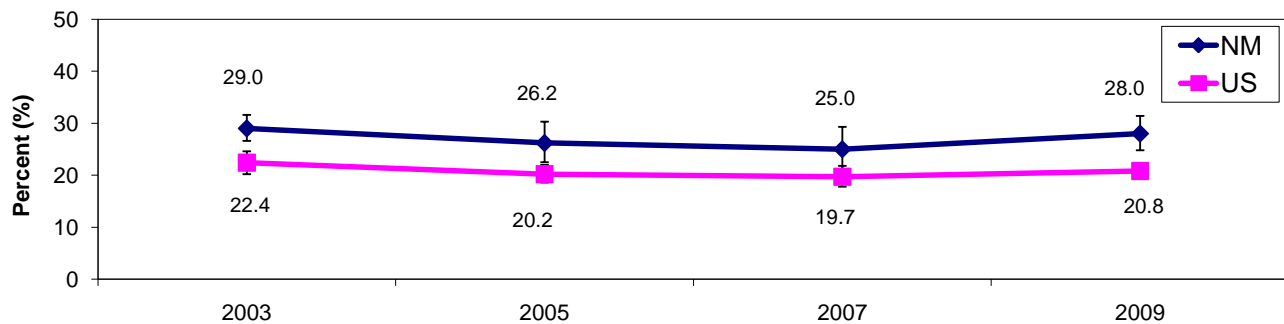
Problem Statement

There is no apparent trend in the rate of past 30-day marijuana use by NM high school students. While it appears that the rate in 2009 (28.0%) was higher than the rate in 2007 (25.0%), the difference is not statistically significant. The NM rate has been consistently higher than the US rate.

In 2007, there was no statistically significant variation in the rate of past 30-day marijuana use by grade level or gender. The rate among American Indian students (35.3%) was higher than among White students (20.5%). This was true for both males (34.8% vs. 18.4%) and females (35.9% vs. 22.7%).

The rate of past 30-day marijuana use was highest in Mora (37.1%), Taos (39.4%), and Sierra County (37.3%). The rate was lowest in Catron (4.6%), De Baca (11.2%), and Roosevelt County (13.5%).

Chart 1. Marijuana Use (past 30 days)*, Grades 9-12, New Mexico and US, 2001-2009



* Marijuana use definition: used marijuana at least once in past 30 days

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

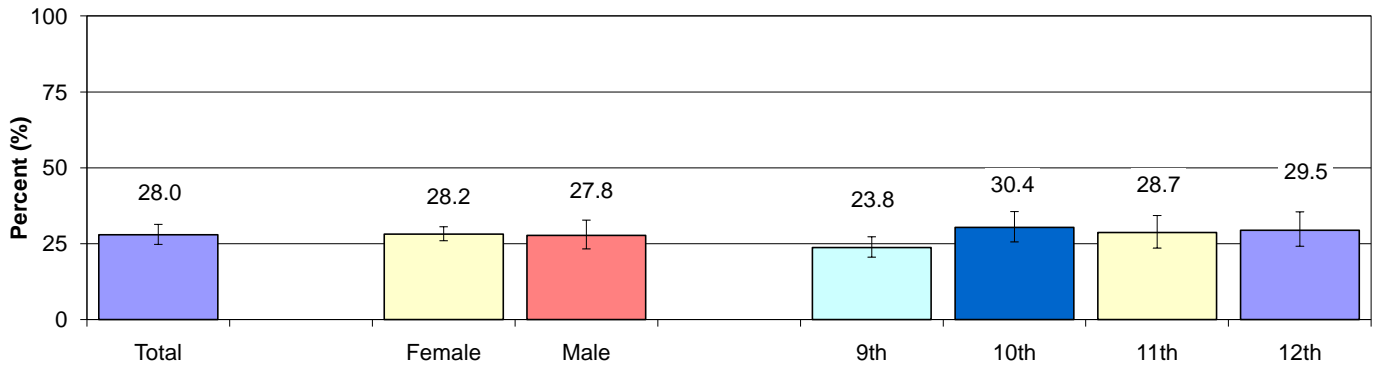
Table 1: Marijuana Use (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico, 2009

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	28.5 [16.0-45.6]	39.6 [29.6-50.6]	37.1 [28.1-47.2]	38.0 [25.8-51.8]	34.8 [26.4-44.2]
	Asian/Pacific-Islander	--	--	--	--	34.2 [24.7-45.0]
	Black/African-American	21.6 [11.5-36.9]	--	--	--	39.0 [26.7-52.9]
	Hispanic	23.6 [17.1-31.7]	33.5 [25.2-42.9]	29.2 [21.3-38.7]	27.9 [19.0-38.9]	28.8 [24.9-33.1]
	White	16.1 [9.3-26.4]	14.4 [9.1-22.1]	20.8 [13.9-29.9]	23.2 [14.5-35.0]	18.4 [13.8-24.0]
	Total	23.5 [18.1-29.9]	29.3 [23.4-35.9]	29.6 [23.0-37.1]	29.1 [21.7-37.7]	27.8 [23.3-32.8]
Female	American Indian	32.1 [24.7-40.5]	37.6 [30.6-45.1]	35.3 [25.4-46.8]	40.6 [26.1-56.9]	35.9 [31.3-40.8]
	Asian/Pacific-Islander	--	--	--	--	24.4 [16.3-34.7]
	Black/African-American	--	--	--	--	29.8 [16.4-47.8]
	Hispanic	24.4 [18.4-31.6]	33.0 [26.9-39.8]	27.9 [21.2-35.7]	32.3 [22.6-44.0]	29.3 [26.4-32.4]
	White	18.8 [14.4-24.1]	24.0 [15.3-35.5]	23.2 [14.7-34.7]	24.3 [15.4-36.1]	22.7 [20.1-25.5]
	Total	24.1 [21.4-27.1]	31.4 [26.3-37.1]	27.9 [22.9-33.5]	29.9 [23.5-37.3]	28.2 [26.0-30.6]
Total	American Indian	30.0 [22.2-39.3]	38.6 [32.8-44.7]	36.2 [30.1-42.8]	39.4 [30.7-48.9]	35.3 [29.6-41.5]
	Asian/Pacific-Islander	30.0 [18.9-44.0]	--	34.6 [27.0-43.0]	--	29.3 [21.3-38.7]
	Black/African-American	21.0 [10.4-37.9]	40.1 [22.6-60.4]	46.2 [29.7-63.5]	--	35.5 [22.6-50.8]
	Hispanic	23.9 [20.8-27.3]	33.2 [26.7-40.4]	28.5 [21.8-36.3]	30.1 [23.7-37.3]	29.0 [26.1-32.1]
	White	17.4 [12.5-23.7]	18.8 [13.6-25.5]	21.9 [16.1-29.0]	23.8 [18.0-30.7]	20.5 [18.3-23.1]
	Total	23.8 [20.6-27.3]	30.4 [25.6-35.6]	28.7 [23.6-34.3]	29.5 [24.2-35.5]	28.0 [24.8-31.4]

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

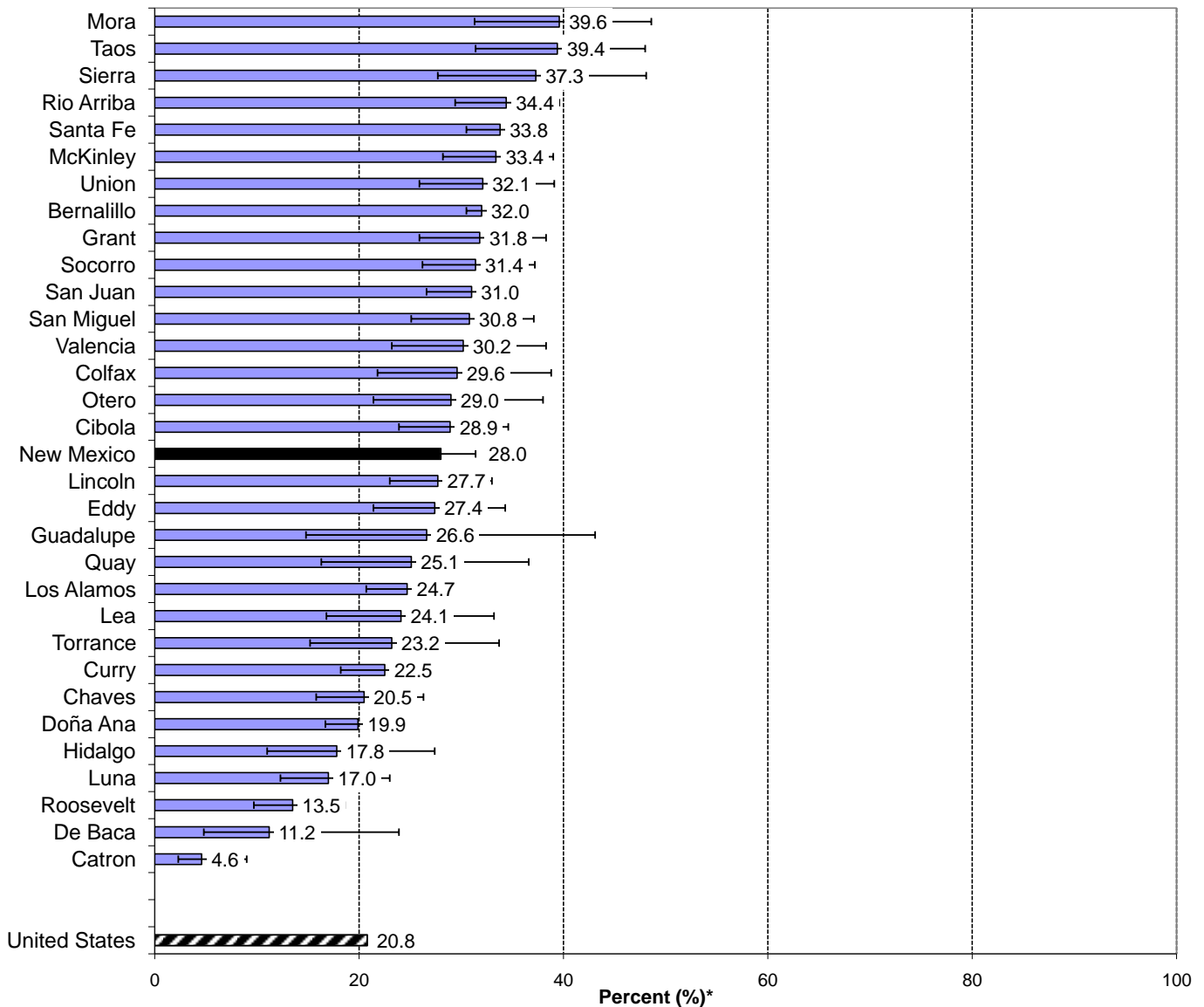
YOUTH MARIJUANA USE (continued)

Chart 2. Marijuana Use (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Marijuana Use (past 30 days) by County, Grades 9-12, New Mexico, 2009

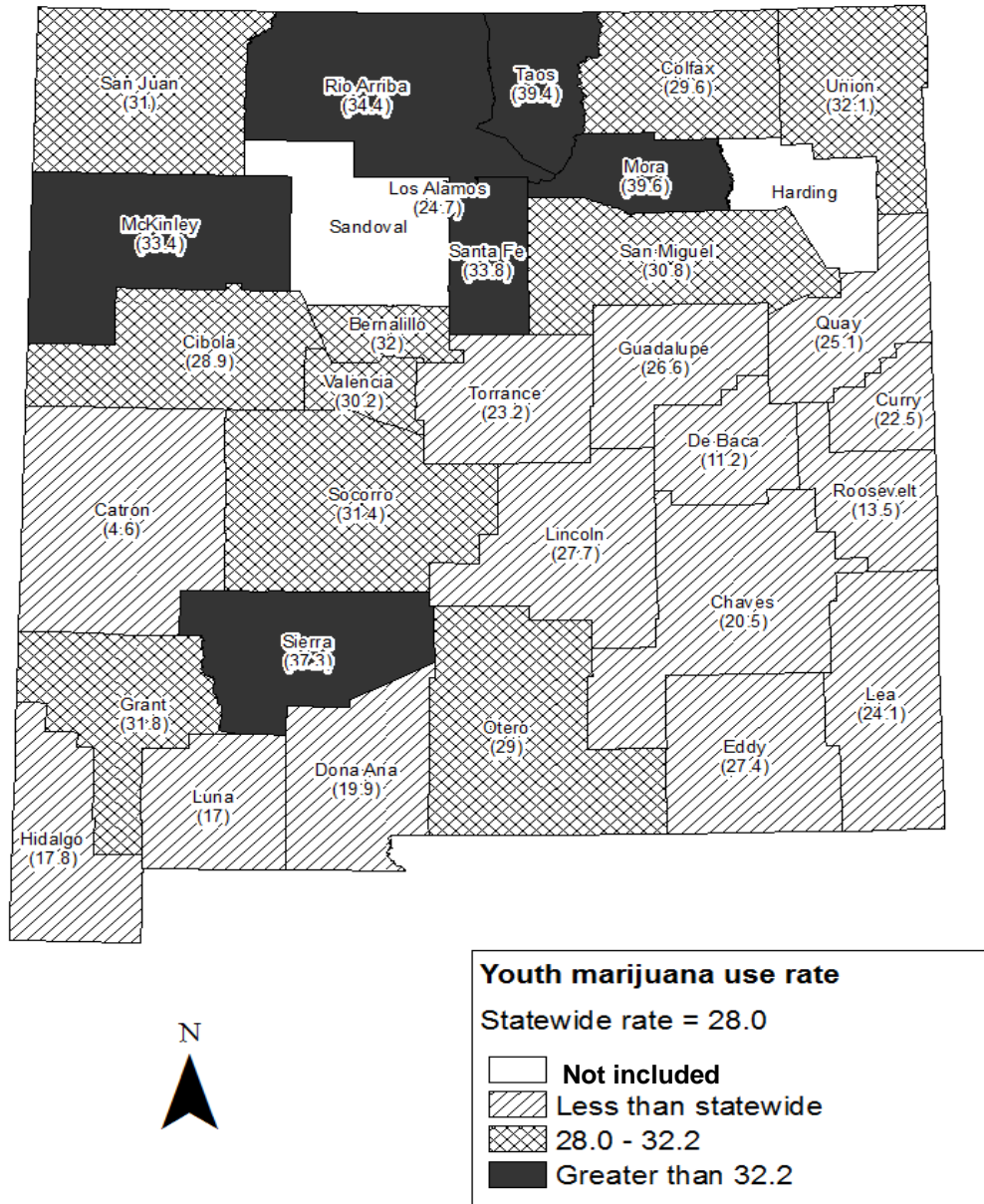


* Estimate of percent of high school students who reported marijuana use at least once in past 30 days
Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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

YOUTH MARIJUANA USE (continued)

Chart 4. Marijuana Use (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



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

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

YOUTH COCAINE USE

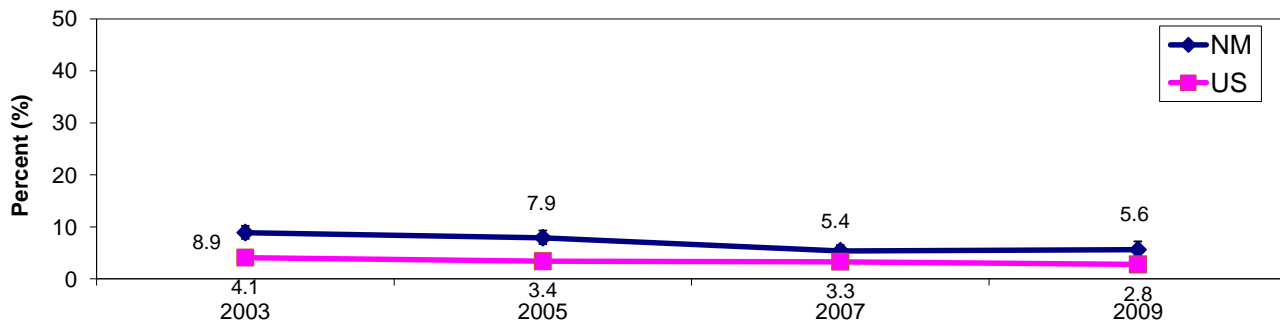
Problem Statement

While the past 30-day cocaine use prevalence among NM high school students did not change significantly from 2007 to 2009, it has been generally decreasing since 2003. Despite the decreasing rate of cocaine use among NM youth, the NM rate has consistently been higher than the US rate. In 2009 the NM rate was two times as high as the US rate (5.6% vs. 2.8%).

The difference in the rate between males (6.2%) and females (5.1%) was not statistically significant. The rate did not vary significantly by grade level. The rate of cocaine use was higher among Asian/Pacific Islanders (11.0%) and American Indians (7.7%) than among White students (3.8%).

The rate of past 30-day cocaine use was highest in Los Alamos (10.3%), Hidalgo (9.6%), Rio Arriba (8.6%), and Lea County (8.6%). The rate was lowest in Roosevelt (0.9%), Catron (1.3%), and Luna (1.3%).

Chart 1. Cocaine Use (past 30 days)*, Grades 9-12, New Mexico and US, 2001-2009



* Cocaine use definition: used cocaine at least once in past 30 days

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

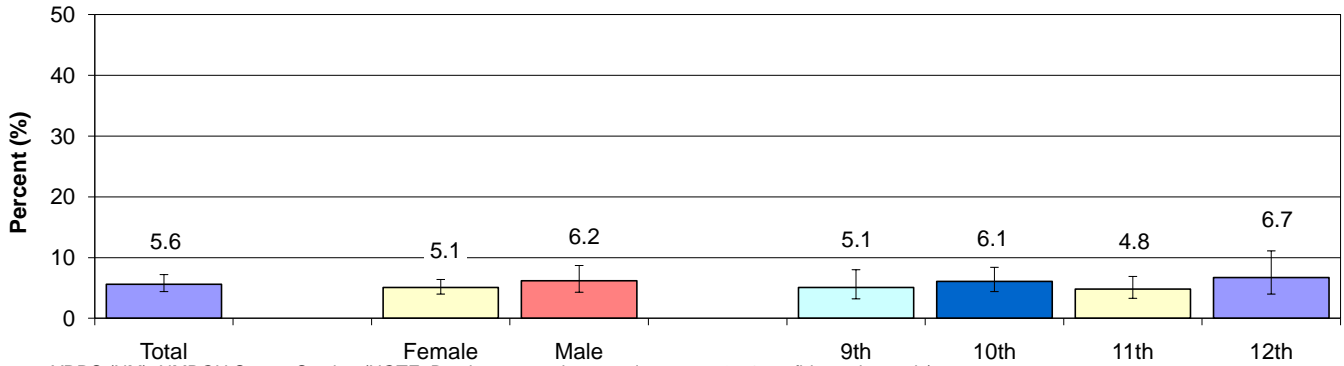
Table 1: Cocaine Use (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico, 2009

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	8.4 [2.1-28.2]	8.8 [4.6-16.1]	7.3 [3.7-13.9]	11.1 [5.6-20.7]	8.8 [4.4-16.8]
	Asian/Pacific-Islander	--	--	--	--	12.3 [5.5-25.4]
	Black/African-American	0.9 [0.1-6.6]	--	7.6 [2.4-21.7]	--	10.5 [3.5-27.5]
	Hispanic	5.8 [3.5-9.2]	6.7 [4.1-10.9]	5.9 [3.8-9.0]	6.9 [2.8-16.0]	6.3 [5.1-7.7]
	White	2.0 [0.6-6.1]	1.3 [0.2-7.8]	3.4 [1.3-8.7]	6.1 [3.2-11.4]	3.0 [1.7-5.5]
	Total	5.3 [2.6-10.4]	5.6 [3.7-8.4]	5.8 [4.4-7.6]	8.6 [4.2-16.7]	6.2 [4.3-8.7]
Female	American Indian	4.2 [2.0-8.6]	10.0 [7.1-14.1]	4.5 [0.9-19.1]	7.4 [2.9-17.9]	6.6 [5.1-8.5]
	Asian/Pacific-Islander	--	--	--	--	9.8 [4.4-20.2]
	Black/African-American	--	--	--	--	3.1 [0.7-12.7]
	Hispanic	4.4 [2.5-7.5]	5.8 [3.1-10.7]	3.9 [1.8-8.0]	4.4 [1.5-12.0]	4.6 [3.0-7.2]
	White	5.0 [1.3-17.2]	6.0 [2.8-12.2]	2.3 [0.9-5.4]	4.8 [2.4-9.3]	4.5 [2.9-6.9]
	Total	4.9 [3.0-7.8]	6.7 [4.2-10.4]	3.7 [1.7-7.8]	5.0 [2.9-8.4]	5.1 [4.0-6.4]
Total	American Indian	6.5 [2.2-17.8]	9.4 [6.4-13.7]	5.9 [2.5-13.3]	9.1 [5.8-14.1]	7.7 [5.1-11.6]
	Asian/Pacific-Islander	14.2 [6.1-29.6]	--	12.0 [6.7-20.6]	--	11.0 [6.6-17.9]
	Black/African-American	0.6 [0.1-4.5]	6.6 [1.2-29.3]	4.9 [1.4-15.4]	--	7.7 [2.5-21.5]
	Hispanic	5.0 [3.3-7.6]	6.3 [3.9-9.9]	4.9 [3.2-7.3]	5.6 [2.9-10.6]	5.4 [4.3-6.9]
	White	3.4 [1.4-8.1]	3.4 [1.9-6.1]	2.8 [1.3-6.0]	5.4 [3.1-9.2]	3.8 [2.9-4.9]
	Total	5.1 [3.2-8.0]	6.1 [4.4-8.4]	4.8 [3.3-6.9]	6.7 [4.0-11.1]	5.6 [4.4-7.2]

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

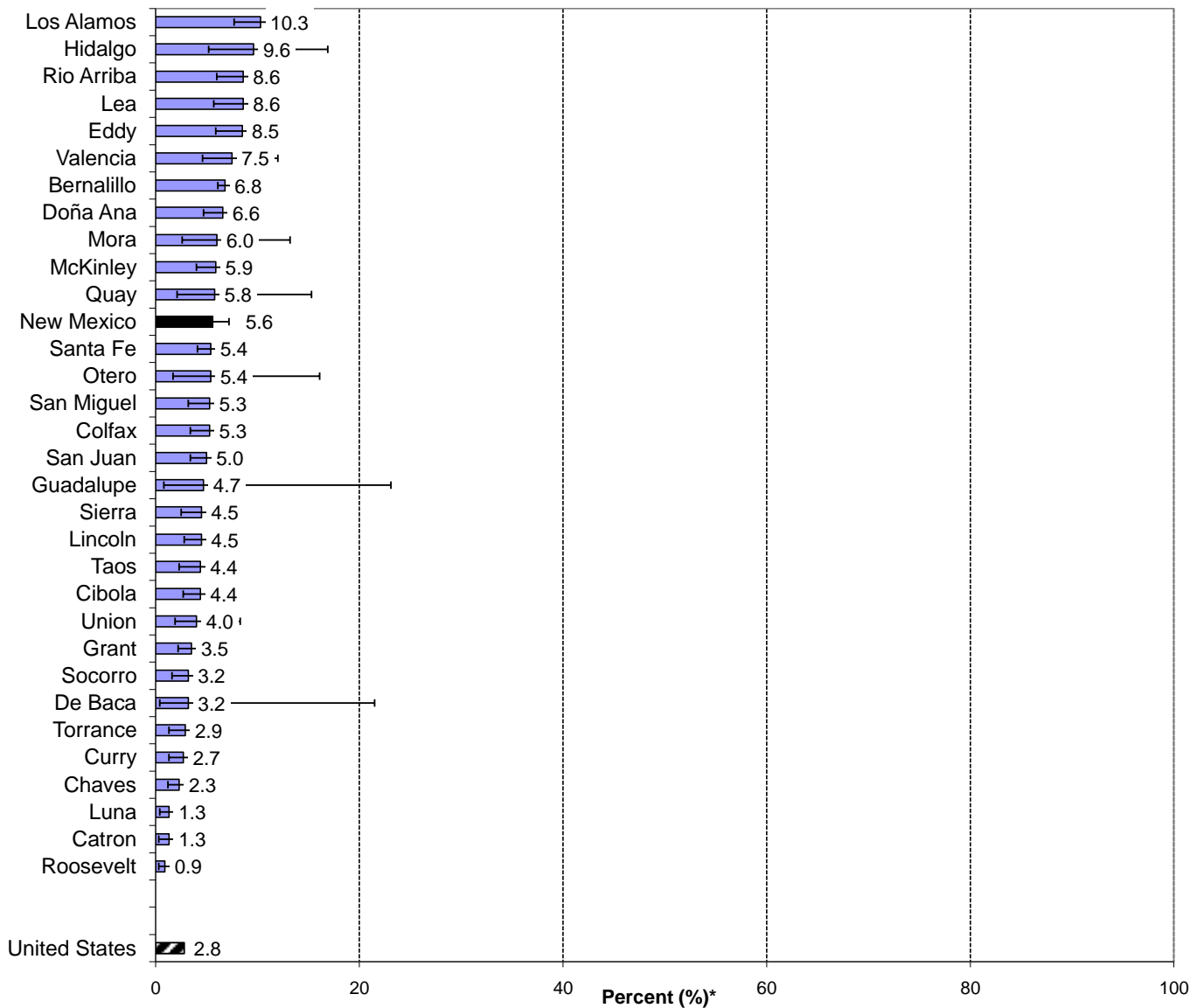
YOUTH COCAINE USE (continued)

Chart 2. Cocaine Use (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Cocaine Use (past 30 days)* by County, Grades 9-12, New Mexico, 2009

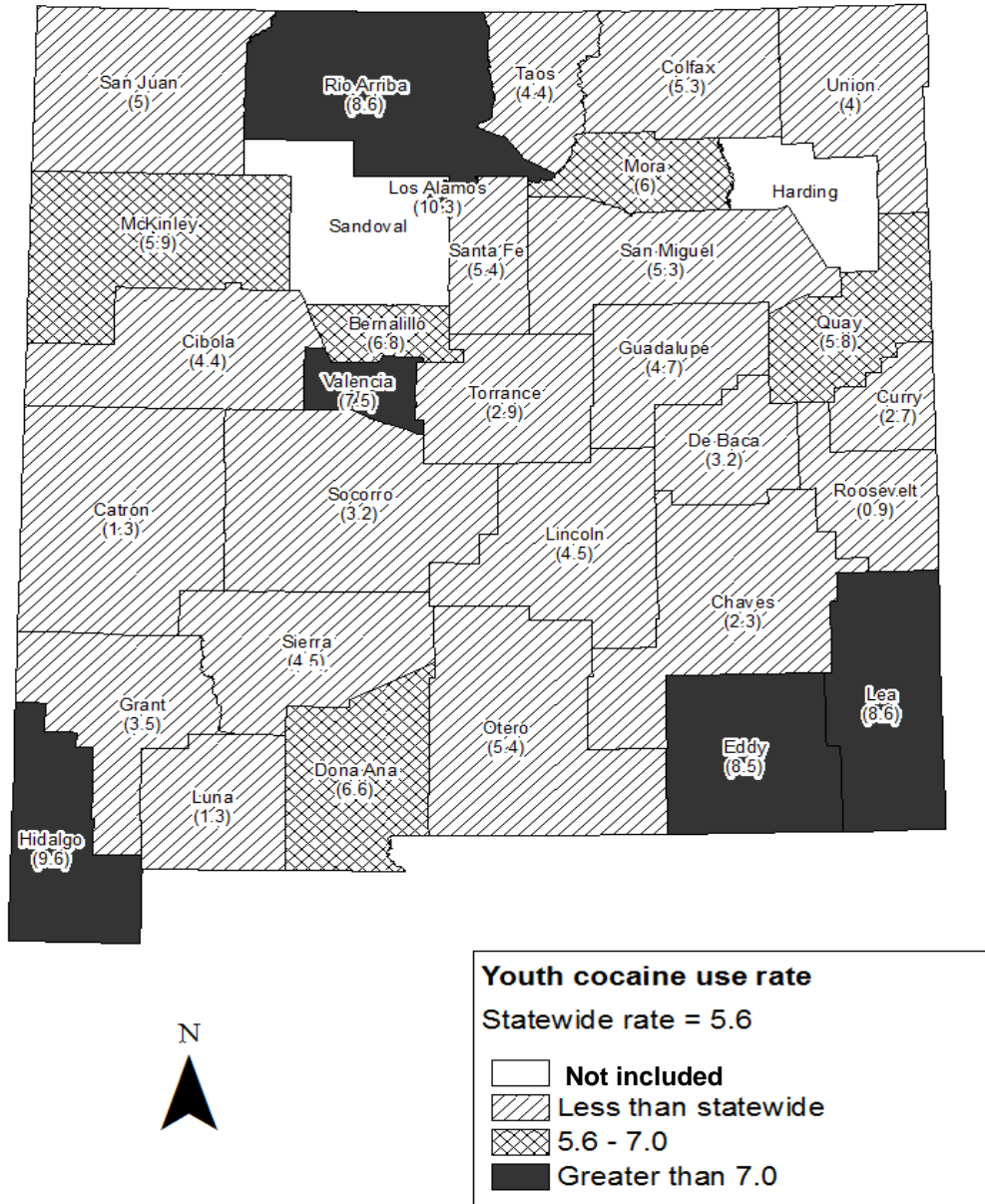


* Estimate of percent of high school students who reported cocaine use at least once in past 30 days
 Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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

YOUTH COCAINE USE (continued)

Chart 4. Cocaine Use (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



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

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

YOUTH PAIN KILLER USE TO GET HIGH

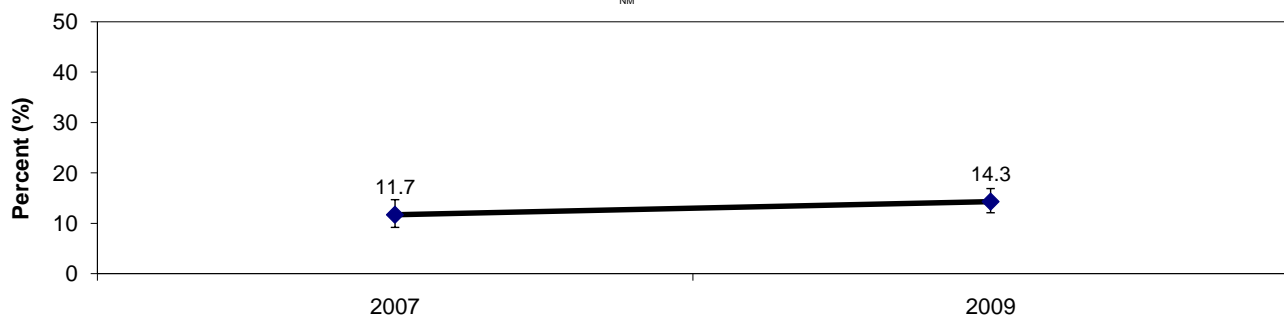
Problem Statement

The rate of past 30 day use of pain killers to get high was 14.3% in 2009, and 11.7% in 2007, but the difference between the two rates was not statistically significant. Pain killer use to get high had the second highest prevalence of all 30 day drug use measures in the 2009 YRRS, just behind marijuana (28.0%). The question about the use of pain killers to get high was new to the NM YRRS in 2007, and there is no national comparison.

The rate of pain killer use to get high did not vary significantly by gender, and the difference by grade level was not statistically significant. The prevalence was higher among Black/African Americans (22.7%), and Hispanics (15.4%) than among White students (10.2%). The rate among Hispanic males (9.6%) was higher than among White males (9.6%).

The rate of pain killer use to get high was highest in Eddy (26.8%), Socorro (24.4%), and Sierra counties (24.1%). The rate was lowest in Luna (1.6%), Catron (3.6%), and Cibola counties (6.8%).

Chart 1. Pain Killer Use to Get High (past 30 days)*, Grades 9-12, New Mexico and US, 2001-2009



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

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

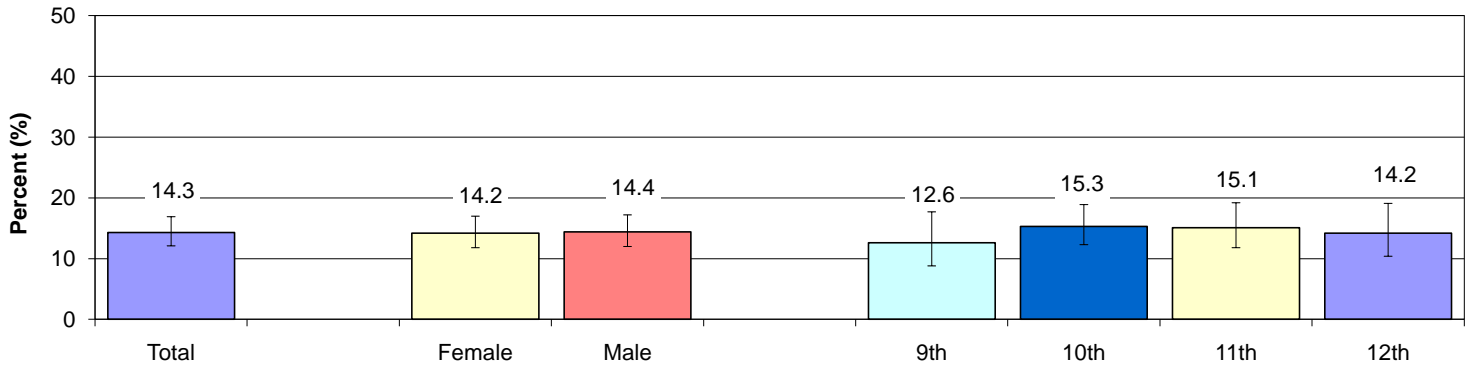
Table 1: Pain Killer Use to Get High (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	14.1 [6.2-28.8]	12.1 [7.3-19.2]	20.1 [12.0-31.9]	17.2 [10.6-26.6]	15.1 [9.5-23.4]
	Asian/Pacific-Islander	--	--	--	--	21.5 [12.2-35.0]
	Black/African-American	17.6 [4.6-48.3]	--	31.8 [15.6-54.0]	--	28.7 [15.7-46.6]
	Hispanic	12.2 [7.7-18.7]	17.5 [13.2-22.9]	17.8 [13.7-22.7]	12.6 [7.6-20.3]	15.1 [12.8-17.7]
	White	8.3 [4.1-15.9]	8.2 [4.5-14.4]	10.1 [6.5-15.4]	13.0 [7.3-21.9]	9.6 [7.4-12.5]
	Total	12.2 [7.9-18.5]	14.1 [10.8-18.1]	16.7 [13.0-21.2]	15.4 [11.5-20.3]	14.4 [12.0-17.2]
Female	American Indian	14.8 [8.8-23.7]	15.0 [10.4-21.1]	16.5 [9.7-26.6]	12.4 [5.5-25.3]	15.0 [11.0-20.1]
	Asian/Pacific-Islander	--	--	--	--	20.7 [12.0-33.3]
	Black/African-American	--	--	--	--	12.3 [6.1-23.3]
	Hispanic	13.4 [8.6-20.1]	18.3 [12.4-26.3]	12.7 [7.0-22.1]	18.4 [12.5-26.4]	15.7 [12.7-19.3]
	White	11.3 [5.0-23.5]	14.2 [7.6-24.9]	10.7 [4.8-22.1]	7.3 [4.1-12.7]	10.7 [7.3-15.4]
	Total	13.0 [9.0-18.3]	16.6 [13.6-20.1]	13.6 [9.5-19.1]	13.1 [8.7-19.2]	14.2 [11.8-17.0]
Total	American Indian	14.4 [8.0-24.4]	13.5 [10.8-16.7]	18.4 [12.0-27.0]	14.9 [8.5-25.0]	15.1 [10.8-20.7]
	Asian/Pacific-Islander	18.4 [10.2-30.9]	--	27.3 [19.3-37.1]	--	21.5 [15.8-28.6]
	Black/African-American	16.2 [4.8-42.6]	23.6 [11.3-42.9]	24.5 [13.3-40.5]	--	22.7 [13.1-36.5]
	Hispanic	12.7 [8.8-18.0]	17.9 [13.2-23.9]	15.2 [11.3-20.1]	15.5 [10.5-22.2]	15.4 [13.3-17.8]
	White	9.7 [4.9-18.3]	10.9 [6.1-18.6]	10.4 [6.3-16.7]	9.7 [6.4-14.5]	10.2 [8.0-12.9]
	Total	12.6 [8.8-17.7]	15.3 [12.3-18.9]	15.1 [11.8-19.2]	14.2 [10.4-19.1]	14.3 [12.1-16.9]

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

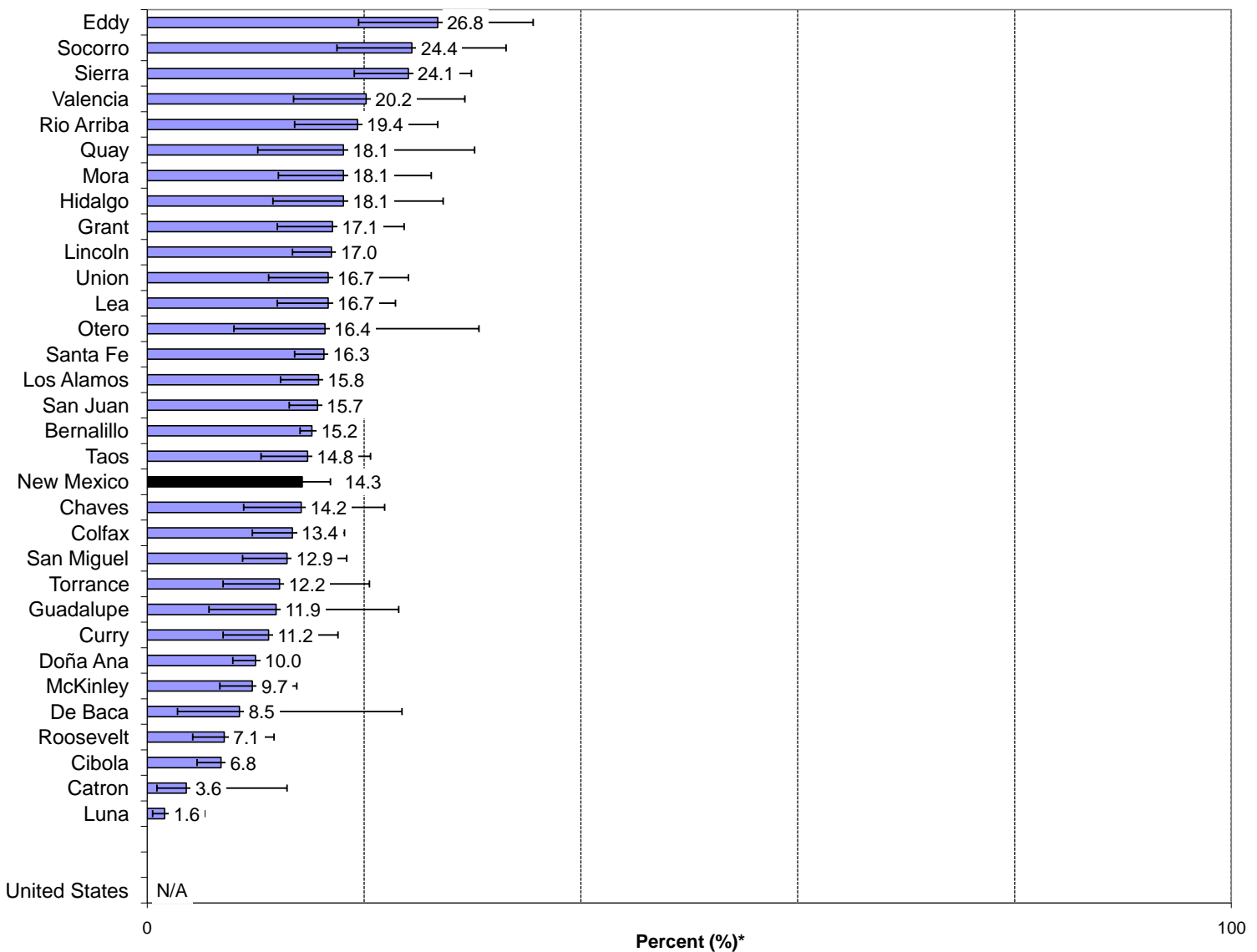
YOUTH PAIN KILLER USE TO GET HIGH (Continued)

Chart 2. Pain Killer Use to Get High (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Pain Killer Use to Get High (past 30 days)* by County, Grades 9-12, New Mexico, 2009



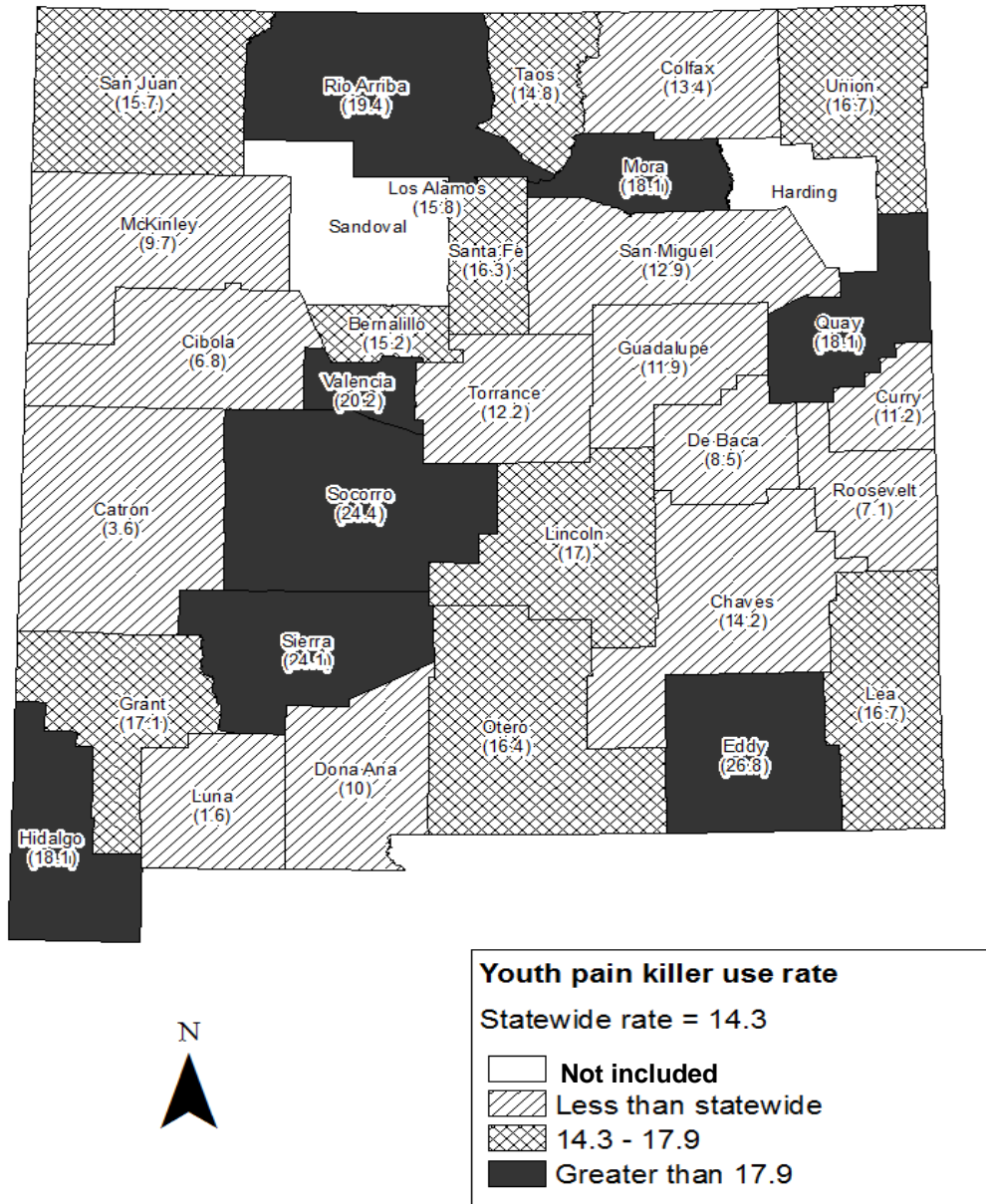
* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days

Harding and Sandoval 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 PAIN KILLER USE TO GET HIGH (Continued)

Chart 4. Pain Killer Use to Get High (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days

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

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

YOUTH OTHER DRUG USE

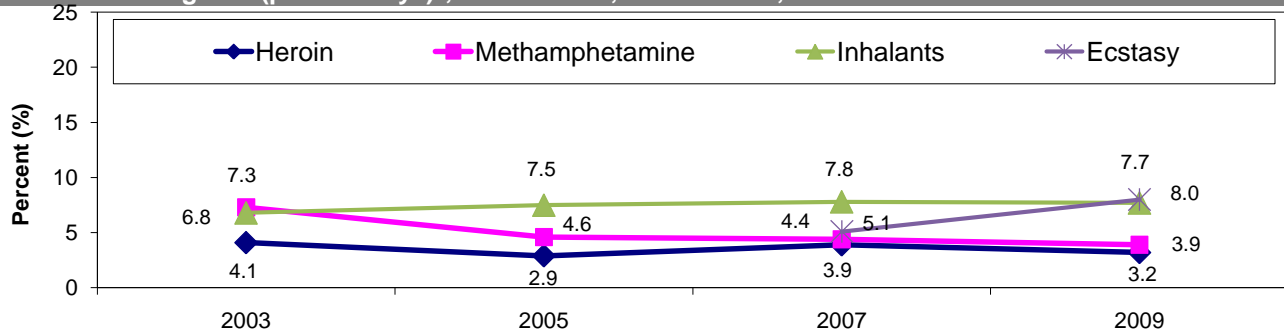
Problem Statement

Past 30 day use of other drugs (inhalants, ecstasy, methamphetamine, or heroin) shows mixed trends. While the rate of past 30-day methamphetamine use has decreased from 7.3% in 2003 to 3.9% in 2009, the rates for inhalants (8.0%) and heroin (3.2%) use have remained relatively stable. The rate for past 30-day ecstasy use increased from 5.1% in 2007 to 8.0% in 2009.

For the combined measure for all four substances, there was no statistically significant difference between boys (12.6%) and girls (12.6%), or between the different grade levels (9th=13.8%; 10th=14.1%; 11th=12.2%; 12th=12.5%) in 2009. Heroin use was more common among boys (4.6%) than girls (1.7%). There was not a statistically significant difference between boys and girls for the other three substances (methamphetamine - boys=4.8%, girls=3.0%; inhalants - boys=6.9%, girls=8.6%; ecstasy - boys=8.7%, girls=7.3%). The decrease in prevalence with increasing grade level for inhalants was not statistically significant (9th=9.8%; 10th=7.3%; 11th=6.6%; 12th=5.9%). Other differences by grade level were not statistically significant.

The rate of past 30-day other drug use was highest in Eddy (23.2%), Union (18.6%), and Rio Arriba counties (18.4%). The rate was lowest in Catron (0.4%), Roosevelt (4.2%), and Luna counties (5.5%).

Chart 1. Other Drug Use (past 30 days)*, Grades 9-12, New Mexico, 2001-2009



* Other drug use definition: used inhalants, ecstasy, methamphetamine, or heroin at least once in past 30 days

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

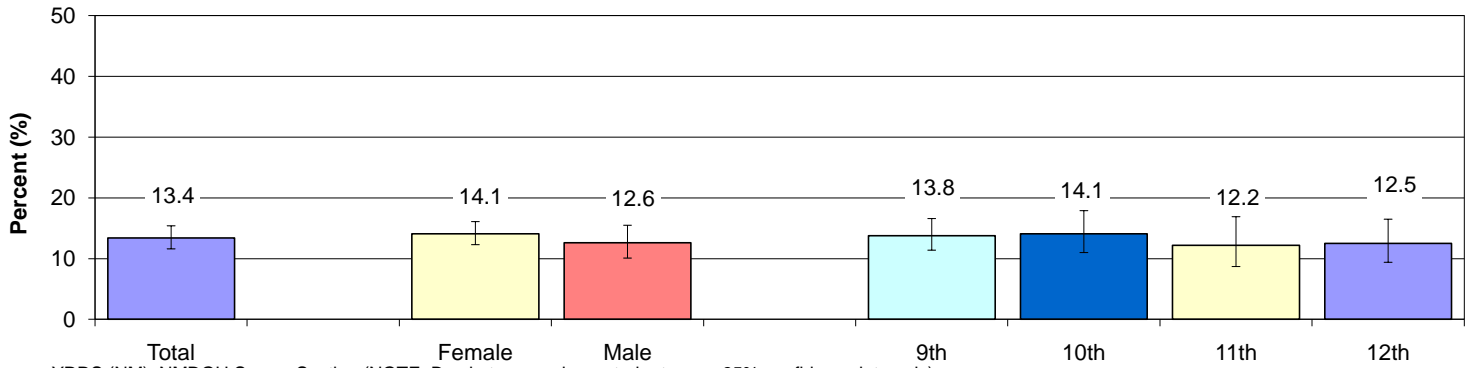
Table 1: Other Drug Use (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico, 2009

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	13.2 [5.2-29.7]	16.4 [10.2-25.3]	12.5 [7.1-21.1]	19.8 [8.6-39.2]	15.1 [10.0-22.2]
	Asian/Pacific-Islander	--	--	--	--	21.2 [12.5-33.8]
	Black/African-American	20.7 [7.3-46.4]	--	30.5 [18.3-46.3]	--	28.4 [16.9-43.7]
	Hispanic	11.7 [7.9-17.1]	13.8 [9.3-20.0]	13.7 [8.9-20.5]	12.3 [6.8-21.2]	12.9 [10.5-15.8]
	White	7.0 [3.0-15.3]	4.1 [1.5-10.7]	6.5 [2.3-17.3]	9.8 [5.5-17.0]	6.7 [3.8-11.3]
	Total	11.7 [8.8-15.4]	11.9 [8.4-16.6]	12.9 [9.1-18.0]	14.3 [8.9-22.3]	12.6 [10.1-15.5]
Female	American Indian	14.9 [9.1-23.4]	21.6 [16.3-28.1]	13.4 [4.5-33.7]	10.5 [5.2-20.1]	16.2 [12.0-21.4]
	Asian/Pacific-Islander	--	--	--	--	22.5 [16.5-30.0]
	Black/African-American	--	--	--	--	8.7 [4.4-16.6]
	Hispanic	17.3 [13.3-22.2]	16.5 [12.2-22.0]	7.2 [5.3-9.6]	9.8 [5.5-16.8]	13.3 [11.0-16.1]
	White	14.8 [7.4-27.1]	12.5 [8.5-17.9]	12.6 [5.9-25.0]	12.5 [7.2-20.8]	13.1 [10.2-16.7]
	Total	15.9 [12.0-20.8]	16.4 [13.4-20.0]	11.2 [7.8-15.9]	10.8 [7.9-14.6]	14.1 [12.3-16.1]
Total	American Indian	14.2 [7.9-24.1]	19.0 [14.9-23.9]	12.9 [7.1-22.5]	14.9 [8.0-26.2]	15.6 [12.2-19.8]
	Asian/Pacific-Islander	24.1 [16.3-34.0]	--	30.0 [21.7-39.9]	--	22.0 [18.2-26.3]
	Black/African-American	17.7 [7.7-35.9]	21.3 [10.8-37.5]	22.2 [13.4-34.5]	--	21.1 [13.1-32.3]
	Hispanic	14.5 [11.5-18.2]	15.2 [12.1-18.9]	10.4 [7.5-14.1]	11.1 [7.2-16.6]	13.1 [11.3-15.2]
	White	10.7 [7.2-15.7]	8.0 [4.6-13.6]	10.0 [4.2-22.0]	11.4 [7.8-16.4]	10.0 [7.6-13.0]
	Total	13.8 [11.4-16.6]	14.1 [11.0-17.9]	12.2 [8.7-16.9]	12.5 [9.4-16.5]	13.4 [11.6-15.4]

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

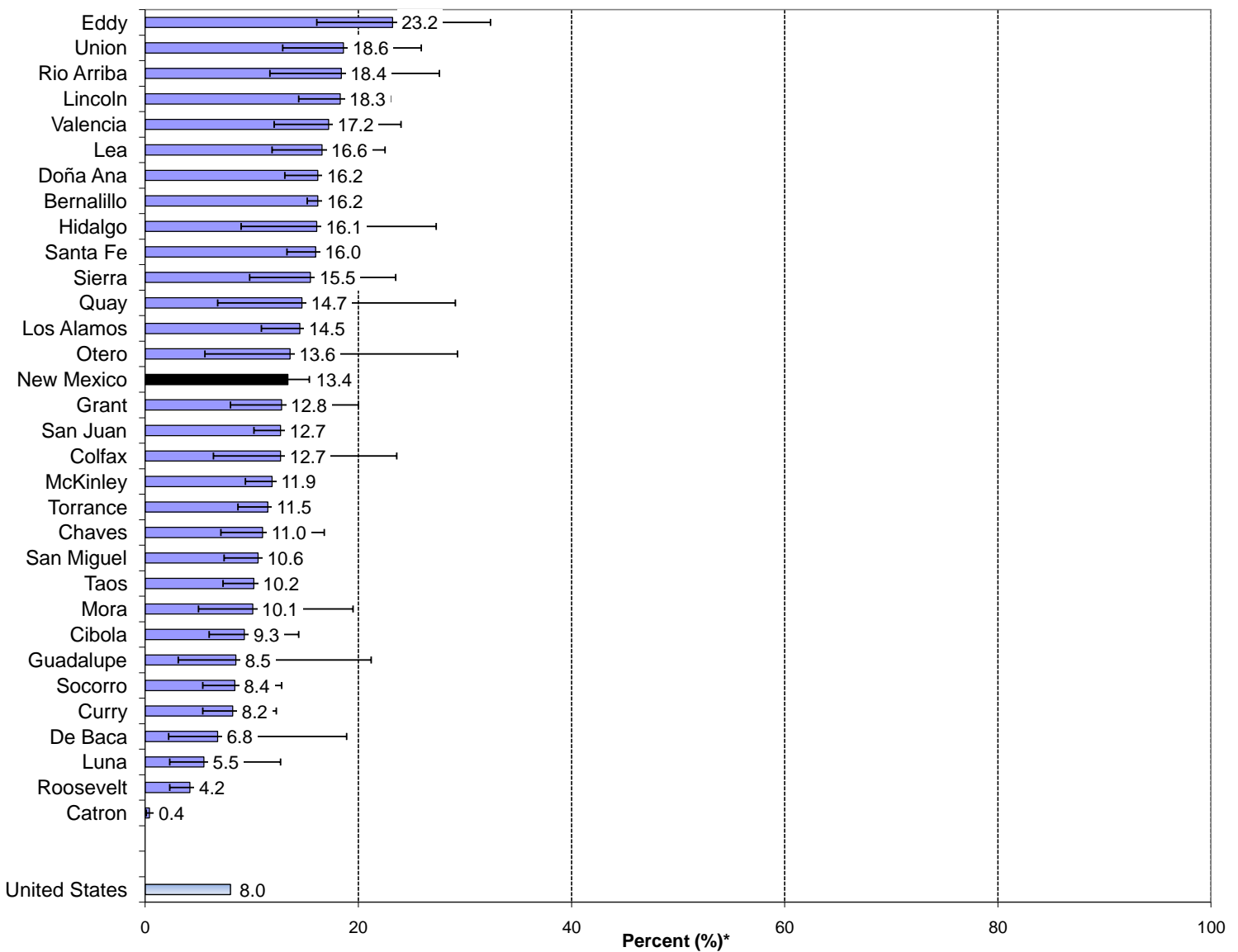
YOUTH OTHER DRUG USE (Continued)

Chart 2. Other Drug Use (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Other Drug Use (past 30 days)* by County, Grades 9-12, New Mexico, 2009



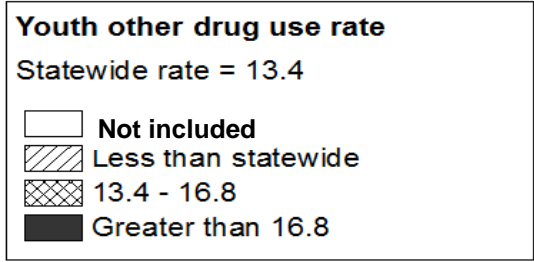
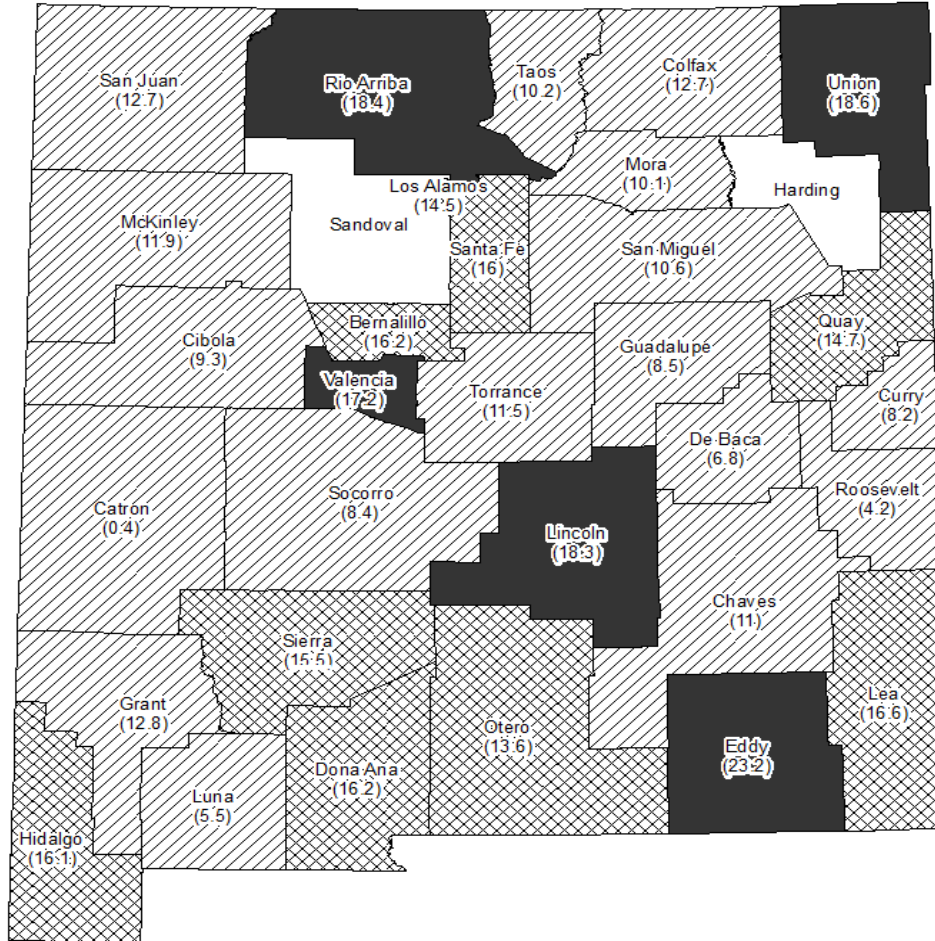
* Methamphetamine, ecstasy, heroin, or inhalants

Harding and Sandoval 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 OTHER DRUG USE (Continued)

Chart 4. Other Drug Use (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



* Estimate of percent of high school students who used methamphetamine, ecstasy, heroin, or inhalants in the past 30 days
 Not included: county estimates not available because of low numbers and/or low response rates

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

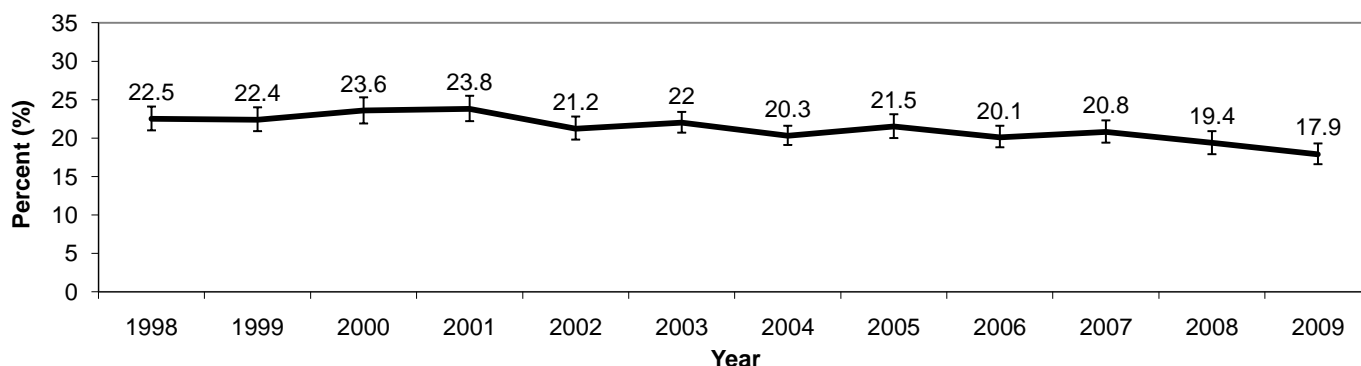
ADULT CIGARETTE SMOKING

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 SAMMEC (Smoking Attributable Mortality, Morbidity, and Economic Costs) 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 numerous 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 United States.

In 2009, the same proportion of adults in New Mexico reported current smoking as in the U.S. overall (17.9%). As shown in Chart 1, New Mexico's adult smoking prevalence rate has decreased over the past 10 years, with two successive declines seen in the past two years. In 2009, as shown in Table 1, smoking was more prevalent among young adults aged 18-24 (24.9%), than among adults aged 25-64 (18.7%) or adults aged 65 and over (9.3%). New Mexico men were more likely to smoke than women (19.9% vs 16.1%). Among males, American Indian males had the highest smoking prevalence (32.6%), a substantial increase from the 2007 rate (25.1) last reported; followed by Hispanic males (21.4) and White males (16.3%). Among females, the highest prevalence of smoking was among Black females (29.8%), followed by White females (16.0%).

Chart 1: Cigarette Smoking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2009



* Cigarette smoking definition: smoked \geq 100 cigarettes in lifetime and smoked cigarettes in past 30 days
 Source: BRFSS; SAEP (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, 2009

Sex	Race/Ethnicity	Number*				Percent**			
		Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	White	--	47,493	5,565	58,925	--	18.7	7.1	16.3
	Hispanic	12,996	39,151	1,803	53,950	28.9	21.7	6.8	21.4
	American Indian	--	9,025	--	19,807	--	24.7	--	32.6
	Black	--	--	--	--	--	--	--	--
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	33,898	101,207	9,005	144,110	32.2	20.0	7.9	19.9
Female	White	--	43,116	9,782	58,314	--	17.8	10.1	16.0
	Hispanic	9,257	33,355	4,237	46,849	17.2	16.2	11.2	15.7
	American Indian	--	6,669	460	8,374	--	18.8	14.0	15.8
	Black	--	3,646	--	3,928	--	34.8	--	29.8
	Asian/Pacific Islander	--	--	--	--	--	--	--	--
	Total	16,646	90,137	15,069	121,852	17.0	17.5	10.4	16.1
Total	White	11,283	90,609	15,347	117,239	20.6	18.3	8.8	16.1
	Hispanic	22,253	72,506	6,040	100,799	22.5	18.7	9.4	18.3
	American Indian	11,524	15,694	964	28,182	32.5	21.8	15.6	24.8
	Black	--	5,253	--	5,915	--	29.4	--	24.1
	Asian/Pacific Islander	--	1,796	--	2,815	--	12.9	--	16.2
	Total	50,544	191,344	24,074	265,963	24.9	18.7	9.3	17.9

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

** Estimate of percent of people in population group who have smoked \geq 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

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

Source: BRFSS; SAEP

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 American Indian and Hispanic males had the highest smoking rates among males, their smoking-related death rates were substantially lower than the Black male and White male 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 eastern half of the state.

Table 2: Cigarette Smoking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2009

County	Number*						Percent**					
	White	Hispanic	American Indian	Black	Asian PI	All Races	White	Hispanic	American Indian	Black	Asian PI	All Races
Bernalillo	33,626	28,402	9,629	--	--	78,615	13.8	16.0	39.4	--	--	16.3
Catron	--	--	--	--	--	--	--	--	--	--	--	--
Chaves	3,985	3,793	--	--	--	9,376	16.8	19.3	--	--	--	19.4
Cibola	1,192	--	257	--	--	3,366	26.1	--	4.5	--	--	19.6
Colfax	1,528	--	--	--	--	3,265	17.3	--	--	--	--	20.8
Curry	2,719	--	--	--	--	5,133	16.6	--	--	--	--	17.8
De Baca	--	--	--	--	--	--	--	--	--	--	--	--
Doña Ana	5,153	15,423	--	--	--	23,091	10.3	18.3	--	--	--	15.6
Eddy	6,080	4,185	--	--	--	11,565	24.9	35.1	--	--	--	28.6
Grant	1,784	2,615	--	--	--	4,669	14.3	21.9	--	--	--	17.5
Guadalupe	--	--	--	--	--	--	--	--	--	--	--	--
Harding	--	--	--	--	--	--	--	--	--	--	--	--
Hidalgo	--	--	--	--	--	--	--	--	--	--	--	--
Lea	4,179	1,389	--	--	--	6,795	21.8	8.9	--	--	--	18.1
Lincoln	2,056	--	--	--	--	5,691	17.8	--	--	--	--	30.7
Los Alamos	1,169	--	--	--	--	1,699	9.8	--	--	--	--	10.8
Luna	2,110	--	--	--	--	3,937	28.2	--	--	--	--	26.5
McKinley	673	1,542	2,697	--	--	5,119	8.6	25.6	13.3	--	--	14.3
Mora	--	--	--	--	--	--	--	--	--	--	--	--
Otero	5,207	2,813	--	--	--	10,496	21.2	31.9	--	--	--	26.3
Quay	--	--	--	--	--	2,672	--	--	--	--	--	31.2
Rio Arriba	--	2,757	--	--	--	5,115	--	13.2	--	--	--	15.3
Roosevelt	1,648	--	--	--	--	2,517	21.5	--	--	--	--	19.0
Sandoval	7,127	2,497	1,896	--	--	12,754	12.0	9.7	16.4	--	--	12.4
San Juan	11,073	3,705	3,702	--	--	20,087	22.3	24.6	21.4	--	--	23.3
San Miguel	--	3,075	--	--	--	4,563	--	30.6	--	--	--	31.0
Santa Fe	4,900	4,645	--	--	--	10,782	9.0	11.5	--	--	--	10.6
Sierra	2,598	--	--	--	--	2,668	28.4	--	--	--	--	22.3
Socorro	1,016	--	--	--	--	2,178	16.6	--	--	--	--	17.3
Taos	2,145	2,507	--	--	--	5,687	17.2	17.9	--	--	--	18.0
Torrance	3,101	--	--	--	--	5,201	30.3	--	--	--	--	30.2
Union	--	--	--	--	--	--	--	--	--	--	--	--
Valencia	6,768	6,260	--	--	--	14,394	26.5	20.5	--	--	--	23.6
Total	116,501	100,881	28,574	5,915	2,815	266,069	16.0	18.3	25.2	24.0	16.2	17.9

* 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

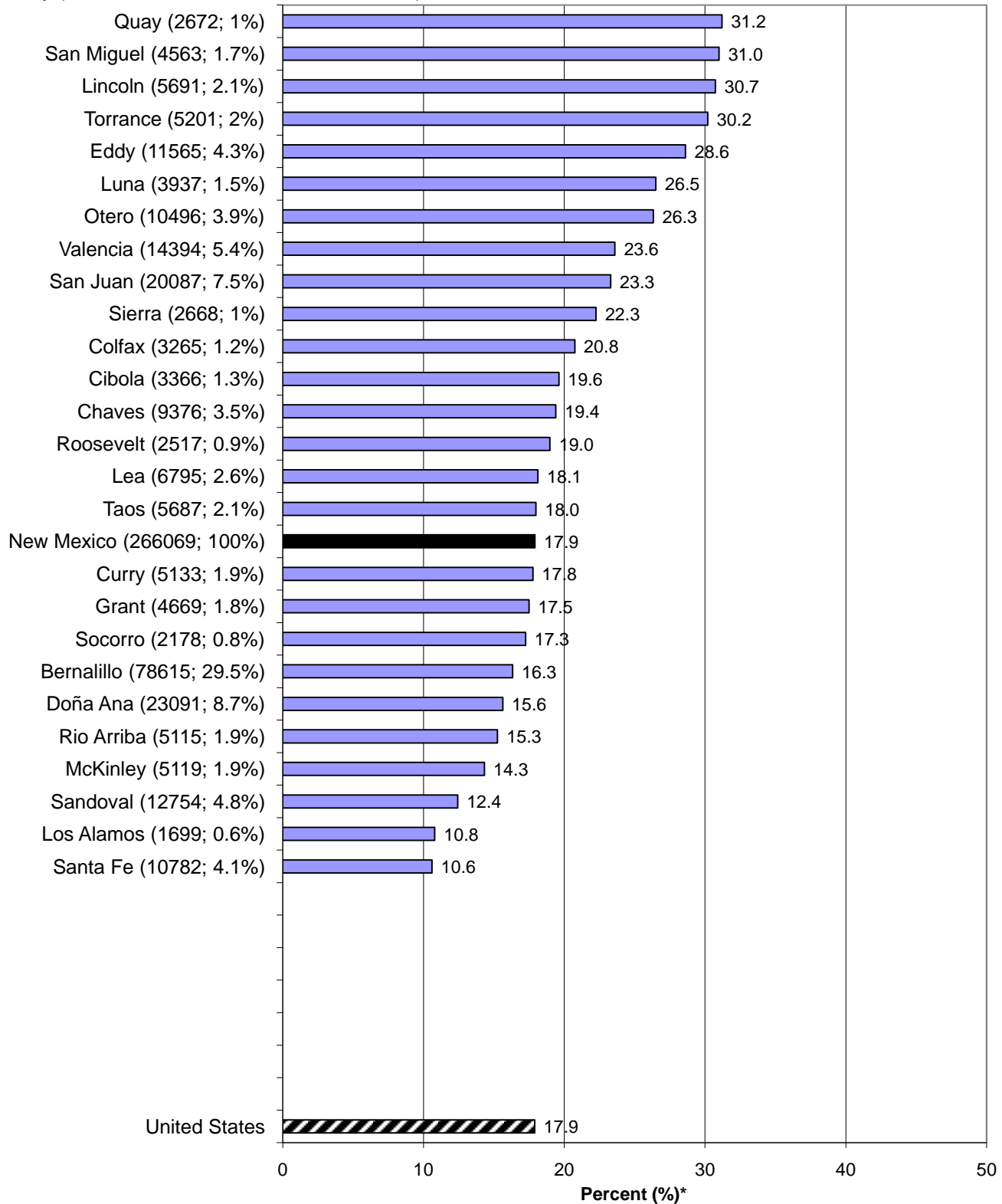
-- Excluded due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

ADULT CIGARETTE SMOKING (continued)

Chart 2: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009

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

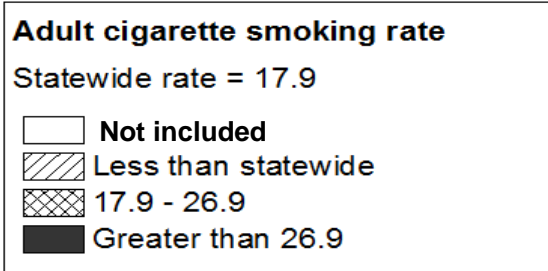
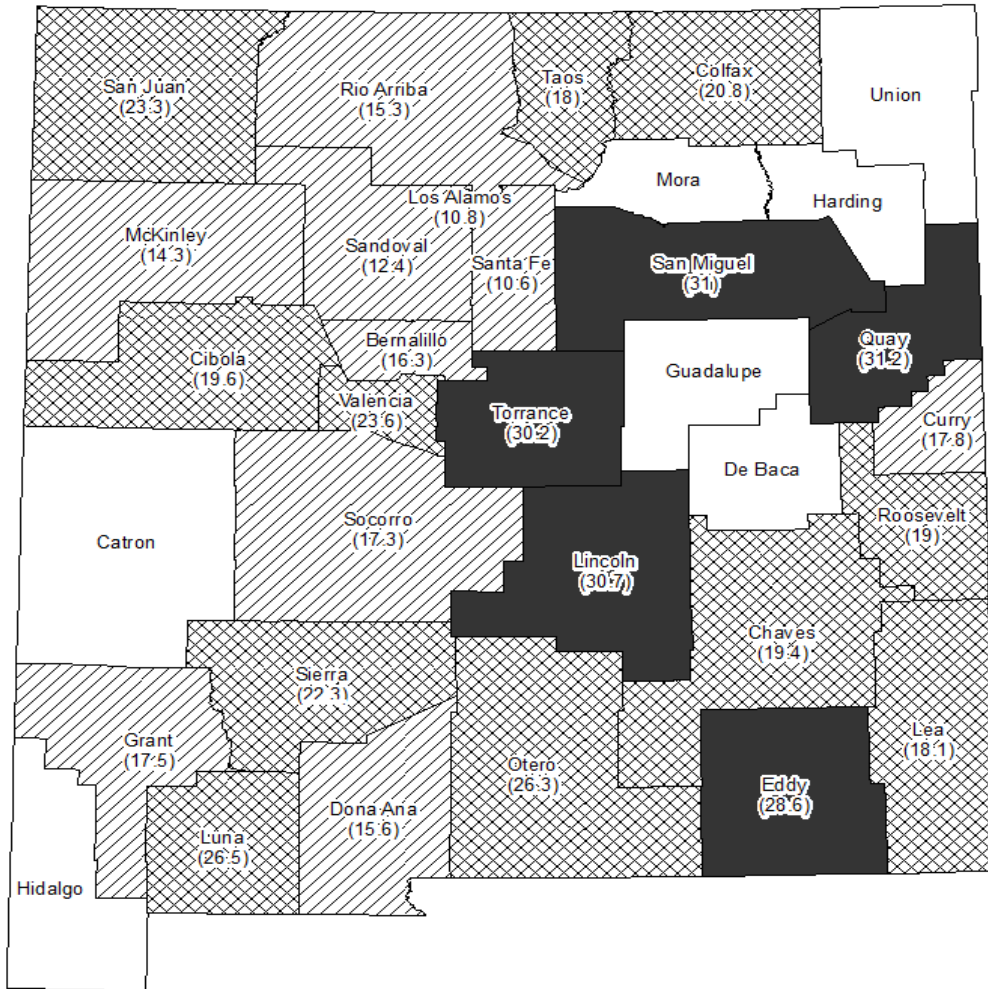
The following counties were not included due to small number of respondents (< 50) in cell:

Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

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

ADULT CIGARETTE SMOKING (continued)

Chart 3: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2009



* Estimate of percent of people in population group who have smoked ≥ 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

Not included: Rate not reported due to small number of respondents (< 50) in cell

Source: BRFSS; SAEP

YOUTH CIGARETTE SMOKING

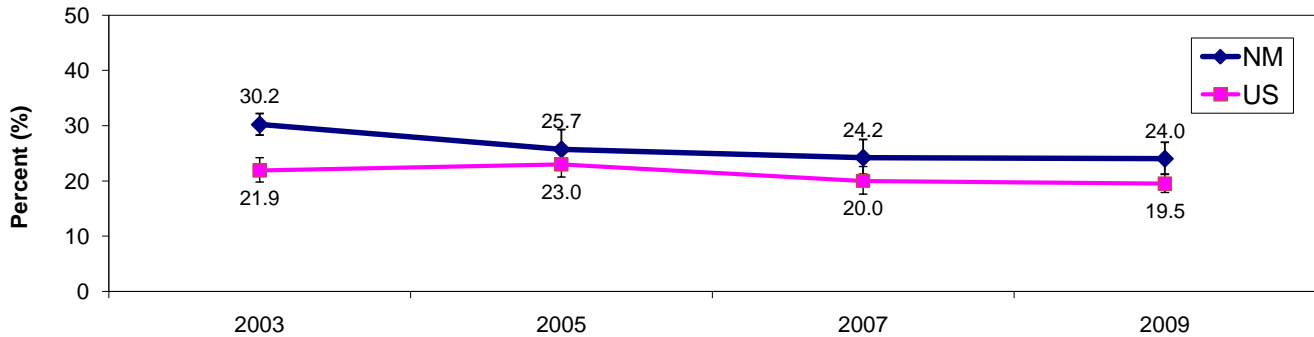
Problem Statement

The prevalence of current cigarette smoking (smoked cigarettes within the past 30 days) among NM high school students has decreased from 30.2% in 2003 to 24.0% in 2009. This coincides with a decrease in the rate of current smoking among US high school students that has occurred over the past several years. At the same time, the NM rate of current smoking has been consistently higher than the US rate.

In 2009, there was no statistically significant variation in this rate by gender. The prevalence of current smoking increased with grade level (9th=19.8%; 10th=22.9%; 11th=24.6%; 12th=30.3%). Differences by race/ethnicity were not statistically significant.

The counties with the highest prevalence of current smoking were Union (42.3%), Socorro (31.9%), and Eddy (31.9%). The counties with the lowest prevalence of current smoking were Catron (17.7%), Los Alamos (17.7%), and De Baca (18.1%).

Chart 1. Cigarette Smoking (past 30 days) by Sex and Grade, Grades 9-12, New Mexico and US, 2001-2009



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

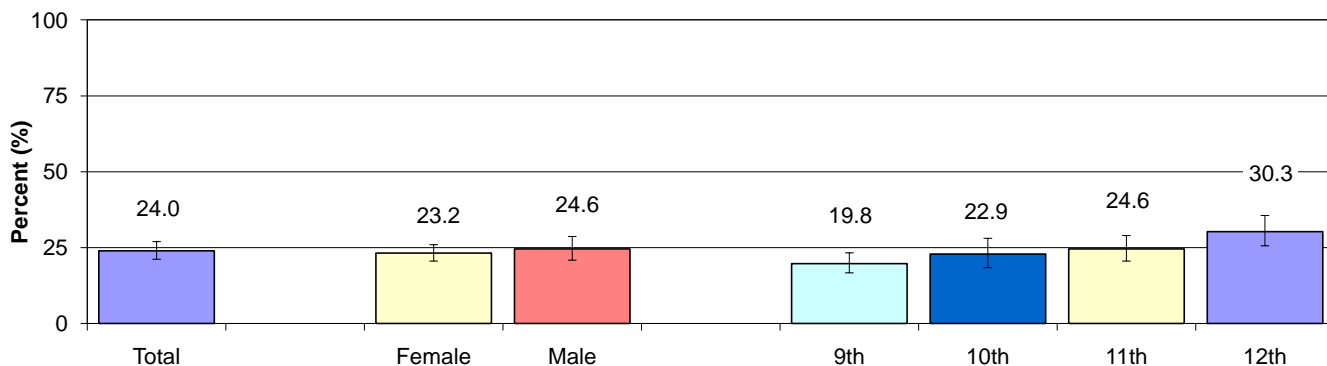
Table 1: Cigarette Smoking (past 30 days) by Grade, Sex, and Race/Ethnicity, Grades 9-12, New Mexico, 2009

Sex	Race/Ethnicity	9th Grade	10th Grade	11th Grade	12th Grade	All Grades
		Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]	Percent [95% CI]
Male	American Indian	23.0 [15.5-32.7]	37.9 [26.1-51.4]	27.9 [22.4-34.2]	--	30.9 [23.3-39.7]
	Asian/Pacific-Islander	--	--	--	--	27.5 [20.3-36.3]
	Black/African-American	--	--	--	--	22.8 [11.4-40.2]
	Hispanic	19.7 [15.2-25.1]	20.0 [15.0-26.2]	26.1 [18.3-35.9]	26.7 [21.2-33.1]	23.0 [20.5-25.7]
	White	18.9 [11.2-30.2]	17.6 [11.8-25.4]	26.2 [19.6-34.0]	32.1 [20.6-46.2]	22.9 [18.6-28.0]
	Total	20.3 [16.4-24.9]	23.7 [17.4-31.4]	26.8 [20.8-33.6]	29.2 [23.3-35.8]	24.6 [20.9-28.7]
Female	American Indian	19.4 [10.3-33.4]	24.7 [13.0-41.8]	28.6 [19.9-39.1]	32.5 [16.5-53.9]	25.2 [16.4-36.6]
	Asian/Pacific-Islander	--	--	--	--	22.9 [14.2-34.8]
	Black/African-American	--	--	--	--	13.6 [8.0-22.3]
	Hispanic	21.0 [15.9-27.1]	22.5 [17.0-29.2]	23.4 [17.4-30.7]	27.9 [18.1-40.4]	23.4 [19.2-28.3]
	White	16.5 [12.3-21.9]	20.2 [13.6-28.8]	16.9 [9.8-27.7]	37.0 [26.7-48.6]	22.8 [18.4-27.9]
	Total	19.2 [15.8-23.3]	21.8 [17.3-27.0]	22.1 [18.9-25.7]	31.4 [25.7-37.8]	23.2 [20.6-26.0]
Total	American Indian	21.3 [15.6-28.4]	31.6 [20.7-44.8]	28.2 [23.8-33.2]	35.2 [20.8-52.9]	28.1 [20.6-37.0]
	Asian/Pacific-Islander	23.6 [13.7-37.6]	--	28.7 [17.1-43.8]	--	25.3 [18.4-33.8]
	Black/African-American	19.4 [10.6-32.8]	17.0 [7.0-35.8]	20.4 [10.0-37.3]	--	19.2 [11.3-30.6]
	Hispanic	20.3 [16.4-24.7]	21.3 [17.2-26.1]	24.7 [19.1-31.3]	27.3 [21.3-34.3]	23.2 [20.9-25.7]
	White	17.8 [12.8-24.1]	18.9 [13.6-25.6]	22.0 [16.5-28.9]	34.9 [27.3-43.4]	23.1 [19.5-27.1]
	Total	19.8 [16.7-23.3]	22.9 [18.4-28.1]	24.6 [20.6-29.0]	30.3 [25.6-35.6]	24.0 [21.2-27.0]

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

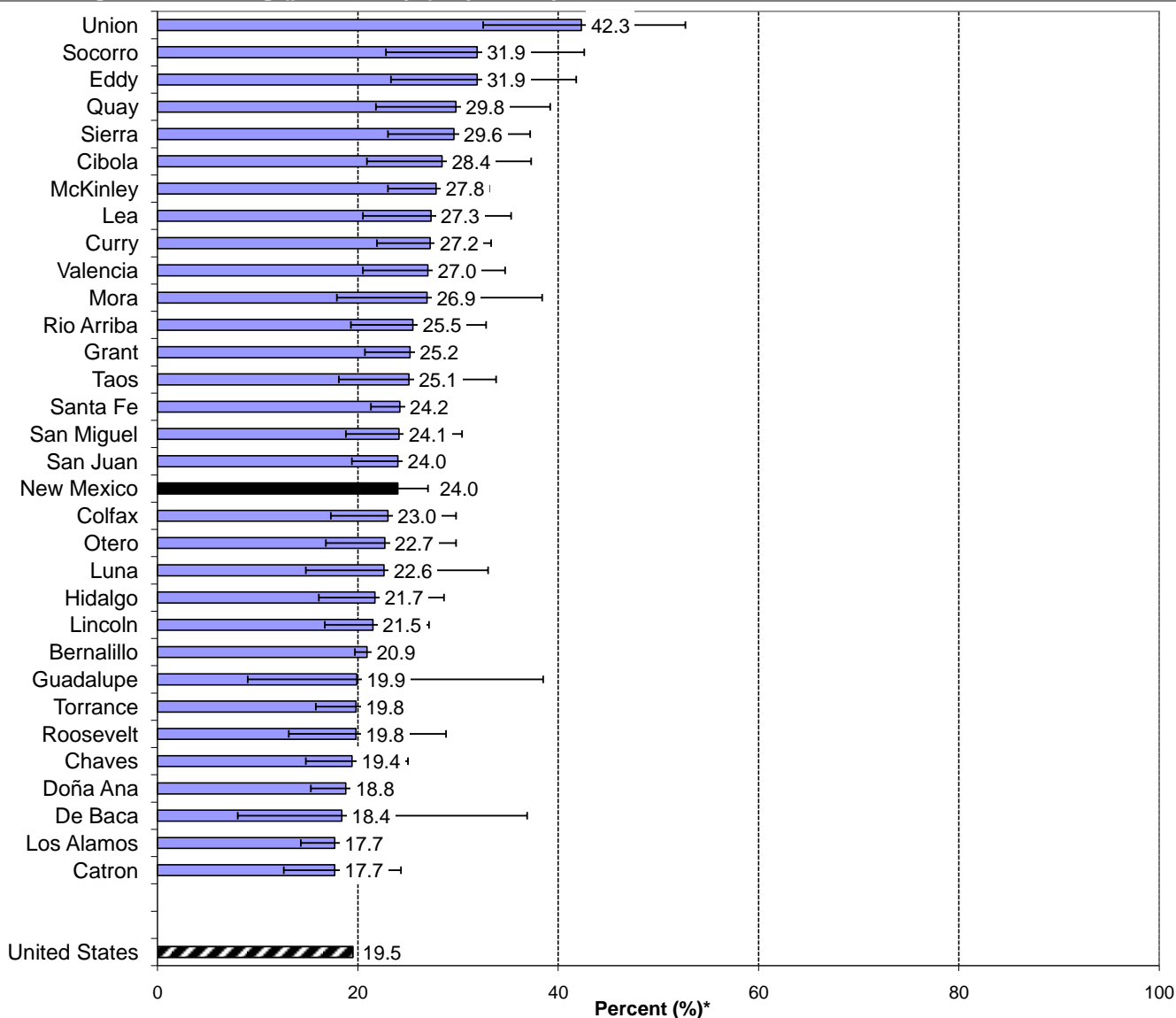
YOUTH CIGARETTE SMOKING (continued)

Chart 2. Cigarette Smoking (past 30 days) by Sex and Grade, Grades 9-12, New Mexico, 2009



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

Chart 3: Cigarette Smoking (past 30 days)* by County, Grades 9-12, New Mexico, 2009

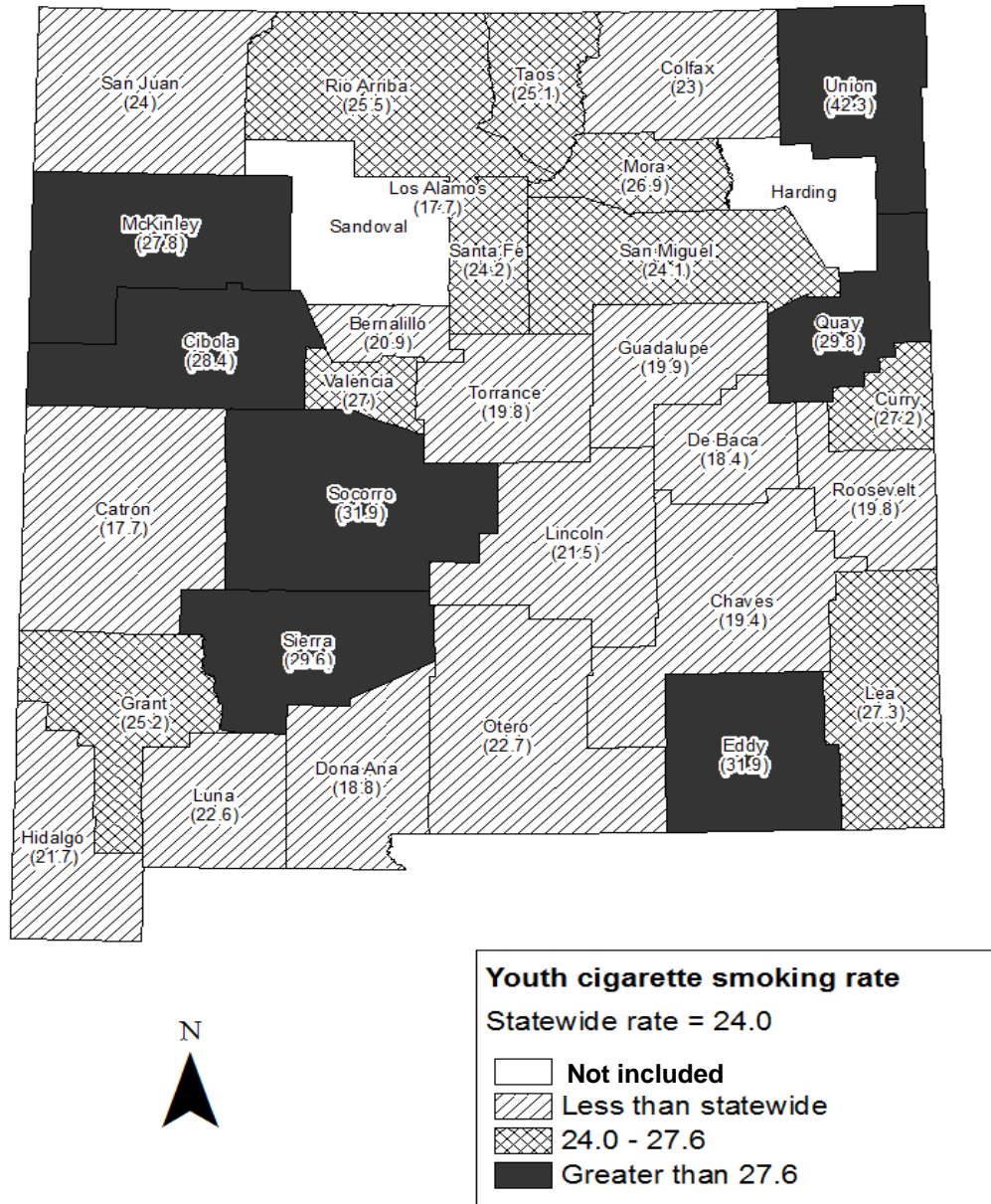


* Estimate of percent of high school students who reported binge drinking at least once in past 30 days
 Harding and Sandoval County estimates not available because of low numbers and/or low response rates

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

YOUTH CIGARETTE SMOKING (continued)

Chart 4. Cigarette Smoking (past 30 days)* by County, Grades 9 - 12, New Mexico, 2009



* Estimate of percent of high school students who reported binge drinking at least once in past 30 days

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

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

Appendix 1

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

Appendix 1: Male Population, New Mexico, 2007*

Sex	County Name	Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
		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	37,104	84,786	25,067	146,957	4,927	5,955	872	11,754	51,663	67,295	11,370	130,328	7,952	8,860	1,016	17,828	3,012	4,624	598	8,234	104,658	171,520	38,923	315,101
	Catron	389	825	319	1,533	0	0	3	3	137	174	77	388	14	29	6	49	0	4	2	6	540	1,032	407	1,979
	Chaves	4,379	7,702	2,908	14,989	445	408	68	921	6,485	6,731	923	14,139	249	311	46	606	158	162	18	338	11,716	15,314	3,963	30,993
	Cibola	917	1,999	763	3,679	37	126	25	188	1,694	2,327	549	4,570	2,470	2,601	495	5,566	19	40	5	64	5,137	7,093	1,837	14,067
	Coffax	921	2,025	748	3,694	15	25	2	42	1,360	1,666	436	3,462	62	111	18	191	7	18	1	26	2,365	3,845	1,205	7,415
	Curry	4,231	6,614	1,891	12,736	934	845	112	1,891	3,563	3,459	415	7,437	205	281	43	529	329	424	9	762	9,262	11,623	2,470	23,355
	De Baca	197	318	185	700	0	1	0	1	149	174	79	402	3	11	0	14	1	0	0	1	350	504	264	1,118
	Dona Ana	9,414	16,835	5,636	31,885	1,176	1,448	134	2,758	28,639	29,182	4,884	62,705	1,008	1,149	212	2,369	591	744	71	1,406	40,828	49,358	10,937	101,123
	Eddy	4,385	7,283	2,415	14,083	272	278	60	610	4,702	4,813	832	10,347	188	266	55	509	68	96	13	177	9,615	12,736	3,375	25,726
	Grant	2,093	3,919	1,601	7,613	70	103	5	178	3,013	3,308	890	7,211	138	191	27	356	32	37	6	75	5,346	7,558	2,529	15,433
	Guadalupe	101	373	68	542	12	66	0	78	702	1,122	242	2,066	5	40	1	46	3	14	0	17	823	1,615	311	2,749
	Harding	30	116	60	206	0	1	0	1	35	84	64	183	1	3	0	4	0	0	0	0	66	204	124	394
	Hidalgo	385	627	252	1,264	11	8	1	20	715	739	193	1,647	0	22	5	27	7	14	0	21	1,118	1,410	451	2,979
	Lea	4,336	7,260	2,409	14,005	688	777	142	1,607	6,203	6,042	625	12,870	181	283	51	515	103	103	13	219	11,511	14,465	3,240	29,216
	Lincoln	1,901	3,949	1,790	7,640	46	68	9	123	1,363	1,445	299	3,107	126	131	23	280	7	26	3	36	3,443	5,619	2,124	11,186
	Los Alamos	2,091	4,651	1,298	8,040	39	36	4	79	466	565	136	1,167	57	93	13	163	221	324	17	562	2,874	5,669	1,468	10,011
	Luna	1,123	2,278	1,660	5,061	175	115	25	315	4,062	3,313	670	8,045	99	110	37	246	36	29	4	69	5,495	5,845	2,396	13,736
	McKinley	1,367	2,623	508	4,498	124	149	19	292	1,507	1,738	292	3,537	15,797	12,855	1,377	30,029	80	144	17	241	18,875	17,509	2,213	38,597
	Mora	161	313	119	593	2	4	0	6	769	1,055	335	2,159	12	17	4	33	1	6	1	8	945	1,395	459	2,799
	Otero	5,593	9,597	2,921	18,111	796	783	108	1,687	4,886	4,715	865	10,466	1,200	907	117	2,224	355	170	16	541	12,830	16,172	4,027	33,029
	Quay	717	1,463	738	2,918	20	32	12	64	747	910	239	1,896	21	43	10	74	21	27	24	72	1,526	2,475	1,023	5,024
	Rio Arriba	571	1,876	506	2,953	97	102	9	208	5,682	7,992	1,540	15,214	1,475	1,689	168	3,332	48	89	11	148	7,873	11,748	2,234	21,855
	Roosevelt	2,095	2,722	859	5,676	123	115	8	246	1,593	1,532	225	3,350	65	68	10	143	19	34	2	55	3,895	4,471	1,104	9,470
	San Juan	7,783	15,089	4,123	26,995	301	317	34	652	3,914	4,864	677	9,455	11,710	11,995	1,790	25,495	141	221	21	383	23,849	32,486	6,645	62,980
	San Miguel	688	2,022	472	3,182	97	104	10	211	4,252	5,838	1,110	11,200	155	209	33	397	46	87	10	143	5,238	8,260	1,635	15,133
	Sandoval	10,044	16,089	4,052	30,185	668	802	110	1,580	8,624	8,778	1,198	18,600	5,213	4,303	629	10,145	517	397	47	961	25,066	30,369	6,036	61,471
	Santa Fe	7,467	19,464	4,626	31,557	472	572	40	1,084	12,886	18,920	2,854	34,660	1,184	1,670	172	3,026	404	620	50	1,074	22,413	41,246	7,742	71,401
	Sierra	1,009	1,993	1,604	4,606	23	16	8	47	910	860	293	2,063	50	90	19	159	1	11	5	17	1,993	2,970	1,929	6,892
	Socorro	1,331	1,950	456	3,737	57	59	4	120	1,795	1,995	394	4,184	688	509	58	1,255	41	146	6	193	3,912	4,659	918	9,489
	Taos	1,371	3,682	801	5,854	44	87	11	142	2,998	4,360	1,148	8,506	442	628	107	1,177	78	80	4	162	4,933	8,837	2,071	15,841
	Torrance	1,754	2,603	447	4,804	94	334	6	434	1,611	1,776	213	3,600	177	163	14	354	39	22	2	63	3,675	4,898	682	9,255
	Union	450	714	266	1,430	0	0	0	0	326	382	95	803	11	12	5	28	3	6	0	9	790	1,114	366	2,270
	Valencia	4,629	7,894	1,798	14,321	280	503	40	823	9,482	9,986	1,283	20,751	817	889	110	1,816	154	172	15	341	15,362	19,444	3,246	38,052
	Male Total	121,027	241,654	73,366	436,047	12,045	14,239	1,881	28,165	176,933	208,140	35,445	420,518	51,775	50,539	6,671	108,985	6,542	8,891	991	16,424	368,322	523,463	118,354	1,010,139

* 2007 population is reported here because 2007 was the mid-point year used as the denominator for the 2005-2009 rates calculated for this report

SOURCE: University of New Mexico Bureau of Business and Economic Research

Appendix 1: Female Population, New Mexico, 2007*

Sex	County Name	Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
		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	34,717	86,540	31,854	153,111	4,835	5,498	1,111	11,444	51,138	69,076	15,409	135,623	8,108	9,916	1,427	19,451	2,940	5,433	920	9,293	101,738	176,463	50,721	328,922
	Catron	329	861	319	1,509	1	4	1	6	111	165	76	352	19	30	10	59	1	11	5	17	461	1,071	411	1,943
	Chaves	4,273	8,060	3,932	16,265	397	385	99	881	6,594	6,632	1,105	14,331	302	273	68	643	165	171	31	367	11,731	15,521	5,235	32,487
	Cibola	789	2,039	765	3,593	70	151	14	235	1,539	2,373	592	4,504	2,613	3,033	705	6,351	30	50	5	85	5,041	7,646	2,081	14,768
	Coffax	773	1,992	907	3,672	14	16	2	32	1,251	1,521	529	3,301	68	90	13	171	3	22	3	28	2,109	3,641	1,454	7,204
	Curry	3,954	6,670	2,626	13,250	955	922	143	2,020	3,347	3,516	504	7,367	219	307	27	553	252	424	40	716	8,727	11,839	3,340	23,906
	De Baca	189	327	246	762	0	4	0	4	132	148	94	374	5	10	2	17	0	4	0	4	326	493	342	1,161
	Dona Ana	9,214	17,219	6,948	33,381	1,167	1,203	196	2,566	27,733	30,662	6,005	64,400	972	1,197	233	2,402	518	744	113	1,375	39,604	51,025	13,495	104,124
	Eddy	4,293	7,748	3,184	15,225	238	253	79	570	4,640	4,800	965	10,405	177	254	58	489	84	157	20	261	9,432	13,212	4,306	26,950
	Grant	1,922	4,266	1,803	7,991	97	82	6	185	2,979	3,730	1,122	7,831	149	179	41	369	38	70	8	116	5,185	8,327	2,980	16,492
	Guadalupe	78	175	66	319	1	5	0	6	603	834	289	1,726	1	10	2	13	7	12	1	20	690	1,036	358	2,084
	Harding	31	118	78	227	1	0	0	1	41	80	69	190	0	5	0	5	0	0	0	0	73	203	147	423
	Hidalgo	354	694	274	1,322	10	4	1	15	695	728	205	1,628	7	13	4	24	0	15	2	17	1,066	1,454	486	3,006
	Lea	4,268	7,386	3,281	14,935	682	697	192	1,571	5,866	5,565	669	12,100	141	236	61	438	96	113	16	225	11,053	13,997	4,219	29,269
	Lincoln	1,794	4,447	1,884	8,125	40	74	8	122	1,156	1,432	324	2,912	152	183	26	361	36	39	2	77	3,178	6,175	2,244	11,597
	Los Alamos	1,996	4,452	1,437	7,885	35	28	4	67	424	692	212	1,328	62	80	5	147	177	370	20	567	2,694	5,622	1,678	9,994
	Luna	1,230	2,407	1,684	5,321	137	126	30	293	4,155	3,740	650	8,545	72	110	25	207	22	56	9	87	5,616	6,439	2,398	14,453
	McKinley	1,112	2,851	620	4,583	93	152	23	268	1,347	1,720	387	3,454	15,963	14,672	2,090	32,725	56	186	36	278	18,571	19,581	3,156	41,308
	Mora	110	328	112	550	1	8	0	9	725	1,043	359	2,127	11	17	5	33	0	1	1	2	847	1,397	477	2,721
	Otero	5,290	9,317	3,369	17,976	729	699	120	1,548	4,820	5,213	981	11,014	1,205	1,180	140	2,525	252	487	75	814	12,296	16,896	4,685	33,877
	Quay	685	1,567	881	3,133	27	21	10	58	666	944	293	1,903	22	51	5	78	20	50	7	77	1,420	2,633	1,196	5,249
	Rio Arriba	572	1,886	536	2,994	57	61	5	123	5,485	7,692	1,906	15,083	1,643	1,813	304	3,760	17	84	3	104	7,774	11,536	2,754	22,064
	Roosevelt	2,034	2,779	1,097	5,910	104	103	6	213	1,500	1,514	202	3,216	86	82	10	178	40	58	9	107	3,764	4,536	1,324	9,624
	San Juan	7,601	15,543	4,895	28,039	268	277	40	585	4,048	4,534	708	9,290	12,127	13,124	2,304	27,555	136	274	25	435	24,180	33,752	7,972	65,904
	San Miguel	704	1,989	532	3,225	85	92	3	180	4,041	6,340	1,553	11,934	155	224	36	415	47	88	11	146	5,032	8,733	2,135	15,900
	Sandoval	8,836	16,606	4,980	30,422	703	694	137	1,534	8,477	8,910	1,421	18,808	4,892	4,548	897	10,337	460	591	71	1,122	23,368	31,349	7,506	62,223
	Santa Fe	6,787	22,828	5,476	35,091	333	512	36	881	12,344	18,324	3,768	34,436	1,349	1,724	249	3,322	375	743	46	1,164	21,188	44,131	9,575	74,894
	Sierra	961	2,202	1,587	4,750	15	15	4	34	819	852	256	1,927	45	99	12	156	0	21	6	27	1,840	3,189	1,865	6,894
	Socorro	971	1,886	531	3,388	39	39	2	80	1,818	2,075	446	4,339	698	571	73	1,342	66	81	3	150	3,592	4,652	1,055	9,299
	Taos	1,178	4,126	989	6,293	40	57	11	108	2,901	4,407	1,415	8,723	500	618	137	1,255	32	68	11	111	4,651	9,276	2,563	16,490
	Torrance	1,740	2,826	498	5,064	67	26	4	97	1,418	1,438	219	3,075	150	138	10	298	15	41	5	61	3,390	4,469	736	8,595
	Union	381	677	331	1,389	0	0	0	0	313	351	117	781	4	13	5	22	0	10	2	12	698	1,051	455	2,204
	Valencia	4,369	8,314	2,251	14,934	343	303	50	696	8,542	9,528	1,615	19,685	959	910	115	1,984	214	207	35	456	14,427	19,262	4,066	37,755
	Female Total	113,535	251,126	89,973	454,634	11,584	12,511	2,337	26,432	171,668	210,579	44,465	426,712	52,876	55,710	9,099	117,685	6,099	10,681	1,541	18,321	355,762	540,607	147,415	1,043,784

* 2007 population is reported here because 2007 was the mid-point year used as the denominator for the 2005-2009 rates calculated for this report

SOURCE: University of New Mexico Bureau of Business and Economic Research

Appendix 1: Total Population, New Mexico, 2007*

Sex	County Name	Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
		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	71,821	171,326	56,921	300,068	9,762	11,453	1,983	23,198	102,801	136,371	26,779	265,951	16,060	18,776	2,443	37,279	5,952	10,057	1,518	17,527	206,396	347,983	89,644	644,023
	Catron	718	1,686	638	3,042	1	4	4	9	248	339	153	740	33	59	16	108	1	15	7	23	1,001	2,103	818	3,922
	Chaves	8,652	15,762	6,840	31,254	842	793	167	1,802	13,079	13,363	2,028	28,470	551	584	114	1,249	323	333	49	705	23,447	30,835	9,198	63,480
	Cibola	1,706	4,038	1,528	7,272	107	277	39	423	3,233	4,700	1,141	9,074	5,083	5,634	1,200	11,917	49	90	10	149	10,178	14,739	3,918	28,835
	Coffax	1,694	4,017	1,655	7,366	29	41	4	74	2,611	3,187	965	6,763	130	201	31	362	10	40	4	54	4,474	7,486	2,659	14,619
	Curry	8,185	13,284	4,517	25,986	1,889	1,767	255	3,911	6,910	6,975	919	14,804	424	588	70	1,082	581	848	49	1,478	17,989	23,462	5,810	47,261
	De Baca	386	645	431	1,462	0	5	0	5	281	322	173	776	8	21	2	31	1	4	0	5	676	997	606	2,279
	Dona Ana	18,628	34,054	12,584	65,266	2,343	2,651	330	5,324	56,372	59,844	10,889	127,105	1,980	2,346	445	4,771	1,109	1,488	184	2,781	80,432	100,383	24,432	205,247
	Eddy	8,678	15,031	5,599	29,308	510	531	139	1,180	9,342	9,613	1,797	20,752	365	520	113	998	152	253	33	438	19,047	25,948	7,681	52,676
	Grant	4,015	8,185	3,404	15,604	167	185	11	363	5,992	7,038	2,012	15,042	287	370	68	725	70	107	14	191	10,531	15,885	5,509	31,925
	Guadalupe	179	548	134	861	13	71	0	84	1,305	1,956	531	3,792	6	50	3	59	10	26	1	37	1,513	2,651	669	4,833
	Harding	61	234	138	433	1	1	0	2	76	164	133	373	1	8	0	9	0	0	0	0	139	407	271	817
	Hidalgo	739	1,321	526	2,586	21	12	2	35	1,410	1,467	398	3,275	7	35	9	51	7	29	2	38	2,184	2,864	937	5,985
	Lea	8,604	14,646	5,690	28,940	1,370	1,474	334	3,178	12,069	11,607	1,294	24,970	322	519	112	953	199	216	29	444	22,564	28,462	7,459	58,485
	Lincoln	3,695	8,396	3,674	15,765	86	142	17	245	2,519	2,877	623	6,019	278	314	49	641	43	65	5	113	6,621	11,794	4,368	22,783
	Los Alamos	4,087	9,103	2,735	15,925	74	64	8	146	890	1,257	348	2,495	119	173	18	310	398	694	37	1,129	5,568	11,291	3,146	20,005
	Luna	2,353	4,685	3,344	10,382	312	241	55	608	8,217	7,053	1,320	16,590	171	220	62	453	58	85	13	156	11,111	12,284	4,794	28,189
	McKinley	2,479	5,474	1,128	9,081	217	301	42	560	2,854	3,458	679	6,991	31,760	27,527	3,467	62,754	136	330	53	519	37,446	37,090	5,369	79,905
	Mora	271	641	231	1,143	3	12	0	15	1,494	2,098	694	4,286	23	34	9	66	1	7	2	10	1,792	2,792	936	5,520
	Otero	10,883	18,914	6,290	36,087	1,525	1,482	228	3,235	9,706	9,928	1,846	21,480	2,405	2,087	257	4,749	607	657	91	1,355	25,126	33,068	8,712	66,906
	Quay	1,402	3,030	1,619	6,051	47	53	22	122	1,413	1,854	532	3,799	43	94	15	152	41	77	31	149	2,946	5,108	2,219	10,273
	Rio Arriba	1,143	3,762	1,042	5,947	154	163	14	331	11,167	15,684	3,446	30,297	3,118	3,502	472	7,092	65	173	14	252	15,647	23,284	4,988	43,919
	Roosevelt	4,129	5,501	1,956	11,586	227	218	14	459	3,093	3,046	427	6,566	151	150	20	321	59	92	11	162	7,659	9,007	2,428	19,094
	San Juan	15,384	30,632	9,018	55,034	569	594	74	1,237	7,962	9,398	1,385	18,745	23,837	25,119	4,094	53,050	277	495	46	818	48,029	66,238	14,617	128,884
	San Miguel	1,392	4,011	1,004	6,407	182	196	13	391	8,293	12,178	2,663	23,134	310	433	69	812	93	175	21	289	10,270	16,993	3,770	31,033
	Sandoval	18,880	32,695	9,032	60,607	1,371	1,496	247	3,114	17,101	17,688	2,619	37,408	10,105	8,851	1,526	20,482	977	988	118	2,083	48,434	61,718	13,542	123,694
	Santa Fe	14,254	42,292	10,102	66,648	805	1,084	76	1,965	25,230	37,244	6,622	69,096	2,533	3,394	421	6,348	779	1,363	96	2,238	43,601	85,377	17,317	146,295
	Sierra	1,970	4,195	3,191	9,356	38	31	12	81	1,729	1,712	549	3,990	95	189	31	315	1	32	11	44	3,833	6,159	3,794	13,786
	Socorro	2,302	3,836	987	7,125	96	98	6	200	3,613	4,070	840	8,523	1,386	1,080	131	2,597	107	227	9	343	7,504	9,311	1,973	18,788
	Taos	2,549	7,808	1,790	12,147	84	144	22	250	5,899	8,767	2,563	17,229	942	1,246	244	2,432	110	148	15	273	9,584	18,113	4,634	32,331
	Torrance	3,494	5,429	945	9,868	161	360	10	531	3,029	3,214	432	6,675	327	301	24	652	54	63	7	124	7,065	9,367	1,418	17,850
	Union	831	1,391	597	2,819	0	0	0	0	639	733	212	1,584	15	25	10	50	3	16	2	21	1,488	2,165	821	4,474
	Valencia	8,998	16,208	4,049	29,255	623	806	90	1,519	18,024	19,514	2,898	40,436	1,776	1,799	225	3,800	368	379	50	797	29,789	38,706	7,312	75,807
	Both Sexes	234,562	492,780	163,339	890,681	23,629	26,750	4,218	54,597	348,601	418,719	79,910	847,230	104,651	106,249	15,770	226,670	12,641	19,572	2,532	34,745	724,084	1,064,070	265,769	2,053,923

* 2007 population is reported here because 2007 was the mid-point year used as the denominator for the 2005-2009 rates calculated for this report

SOURCE: University of New Mexico Bureau of Business and Economic Research

Appendix 2

Substance Abuse and Mental Health by Region, Age 12+, 2006-2008

National Survey on Drug Use and Health (NSDUH)

Appendix 2. Substance Abuse and Mental Health by Region, Age 12+, 2006-2008 (NSDUH)

INDICATORS ⁺	Health Region					New Mexico
	NW	NE	Bernalillo County	SE	SW	
ALCOHOL						
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week ¹	45.13 (41.13 - 49.19)	50.36 (45.55 - 55.16)	49.61 (45.84 - 53.39)	44.19 (39.92 - 48.55)	45.99 (41.63 - 50.40)	47.4 (44.71 - 50.11)
ILLICIT DRUGS						
Past Month Illicit Drug Use ²	8.55 (6.74 - 10.80)	10.21 (7.75 - 13.33)	10.69 (8.66 - 13.13)	7.31 (5.49 - 9.66)	8.30 (6.48 - 10.58)	9.28 (8.02 - 10.71)
Past Year Marijuana Use	11.17 (9.21 - 13.48)	11.71 (9.12 - 14.91)	11.87 (9.94 - 14.11)	8.36 (6.40 - 10.85)	9.73 (7.80 - 12.06)	10.83 (9.58 - 12.23)
Past Month Marijuana Use	6.25 (4.76 - 8.15)	8.54 (6.22 - 11.61)	7.44 (5.88 - 9.37)	5.22 (3.80 - 7.14)	5.75 (4.34 - 7.60)	6.75 (5.74 - 7.92)
Past Month Use of Illicit Drugs Other Than Marijuana ³	3.28 (2.41 - 4.45)	3.38 (2.34 - 4.84)	3.88 (2.88 - 5.21)	3.92 (2.83 - 5.41)	3.97 (2.90 - 5.42)	3.7 (2.98 - 4.60)
Past Year Cocaine Use	2.1 (1.45 - 3.03)	2.11 (1.36 - 3.27)	2.79 (1.96 - 3.94)	2.17 (1.46 - 3.21)	2.49 (1.72 - 3.60)	2.41 (1.84 - 3.14)
Past Year Nonmedical Pain Reliever Use	5.48 (4.21 - 7.09)	6.08 (4.45 - 8.24)	6.16 (4.80 - 7.88)	5.94 (4.48 - 7.84)	5.96 (4.57 - 7.75)	5.94 (4.96 - 7.11)
Perception of Great Risk of Smoking Marijuana Once a Month	39.35 (35.12 - 43.74)	37.27 (31.97 - 42.89)	37.06 (33.05 - 41.25)	45.46 (40.39 - 50.63)	43.6 (38.75 - 48.59)	39.92 (37.20 - 42.69)
Average Annual Number of Marijuana Initiates ⁴	2.32 (1.86 - 2.88)	2.06 (1.58 - 2.69)	1.91 (1.56 - 2.35)	1.67 (1.29 - 2.15)	1.74 (1.37 - 2.21)	1.94 (1.70 - 2.22)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT						
Illicit Drug Dependence ⁵	2.33 (1.62 - 3.35)	1.85 (1.14 - 2.98)	2.27 (1.58 - 3.25)	1.89 (1.19 - 3.00)	2.26 (1.50 - 3.38)	2.17 (1.69 - 2.78)
Illicit Drug Dependence or Abuse ⁵	3.55 (2.60 - 4.83)	2.6 (1.70 - 3.95)	3.57 (2.63 - 4.82)	2.56 (1.71 - 3.82)	3 (2.10 - 4.28)	3.18 (2.61 - 3.86)
Alcohol Dependence ⁶	4.27 (3.17 - 5.74)	3.5 (2.49 - 4.91)	4.1 (3.09 - 5.43)	3.54 (2.61 - 4.79)	4.13 (3.10 - 5.48)	3.98 (3.28 - 4.83)
Alcohol Dependence or Abuse ⁶	8.79 (7.13 - 10.78)	7.8 (6.06 - 9.97)	8.2 (6.69 - 10.02)	7.53 (5.95 - 9.48)	8.42 (6.73 - 10.49)	8.22 (7.15 - 9.43)
Alcohol or Illicit Drug Dependence or Abuse ⁵	10.9 (8.96 - 13.18)	9.16 (7.05 - 11.82)	10.57 (8.75 - 12.71)	9.00 (7.05 - 11.41)	10.04 (8.02 - 12.49)	10.12 (8.93 - 11.44)
Needing But Not Receiving Treatment for Illicit Drug Use ⁷	3.4 (2.46 - 4.68)	2.36 (1.55 - 3.59)	3.22 (2.35 - 4.40)	2.59 (1.72 - 3.88)	2.86 (2.00 - 4.06)	2.98 (2.43 - 3.64)
Needing But Not Receiving Treatment for Alcohol Use ⁸	8.39 (6.74 - 10.39)	7.51 (5.80 - 9.67)	7.87 (6.41 - 9.63)	7.26 (5.67 - 9.26)	8.17 (6.54 - 10.16)	7.91 (6.87 - 9.09)
SERIOUS PSYCHOLOGICAL DISTRESS AND ILLICIT DRUG OR ALCOHOL DEPENDENCE OR ABUSE⁹						
- Age 18+ (2005-2007)	2.6 (n/a)	* (n/a)	4.4 (n/a)	1.4 (n/a)	1.8 (n/a)	3.5 (n/a)
HAVING AT LEAST ONE MAJOR DEPRESSIVE EPISODE¹⁰						
Lifetime						
- Total (Age 12+)	15.5 (n/a)	17.1 (n/a)	18.1 (n/a)	15.2 (n/a)	13.6 (n/a)	16.3 (n/a)
- Age 12-17	16.2 (n/a)	* (n/a)	13.4 (n/a)	18.1 (n/a)	15.5 (n/a)	15.2 (n/a)
- Age 18-25	16.6 (n/a)	* (n/a)	16.0 (n/a)	15.5 (n/a)	* (n/a)	17.3 (n/a)
- Age 26+	15.2 (n/a)	17.5 (n/a)	19.1 (n/a)	* (n/a)	11.1 (n/a)	16.3 (n/a)
Past Year						
- Total (Age 12+)	9.5 (n/a)	11.4 (n/a)	7.9 (n/a)	9.9 (n/a)	9.0 (n/a)	9.2 (n/a)
- Age 12-17	11.0 (n/a)	9.3 (n/a)	7.2 (n/a)	9.9 (n/a)	11.0 (n/a)	9.4 (n/a)
- Age 18-25	11.5 (n/a)	* (n/a)	7.6 (n/a)	9.3 (n/a)	11.9 (n/a)	9.5 (n/a)
- Age 26+	9.0 (n/a)	* (n/a)	8.1 (n/a)	* (n/a)	8.0 (n/a)	9.1 (n/a)
MENTAL HEALTH TREATMENT OR COUNSELING¹¹ among persons aged 18 or older						
Past year received any mental health treatment or counseling	14.4 (n/a)	15.1 (n/a)	11.6 (n/a)	13.9 (n/a)	14.2 (n/a)	13.4 (n/a)
Past year received inpatient mental health treatment or counseling	0.6 (n/a)	0.6 (n/a)	1.4 (n/a)	* (n/a)	0.5 (n/a)	1.0 (n/a)
Past year received outpatient mental health treatment or counseling	3.9 (n/a)	11.1 (n/a)	5.9 (n/a)	* (n/a)	* (n/a)	6.8 (n/a)
Past year unmet need for mental health treatment or counseling ¹²	4.0 (n/a)	* (n/a)	4.9 (n/a)	4.2 (n/a)	3.2 (n/a)	4.7 (n/a)

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

* Low precision; no estimate reported

Source: 2006, 2007, and 2008 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

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. Serious Psychological Distress (SPD) is defined as having a score of 13 or higher on the K6 scale. Illicit Drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically. Dependence or abuse is based on definitions found in the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV).
10. 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. Respondents with unknown data for the respective lifetime or past year MDE measure were excluded.
11. Mental Health Treatment/Counseling is defined as having received inpatient care or outpatient care or having used prescription medication for problems with emotions, nerves, or mental health. Respondents were not to include treatment for drug or alcohol use. Respondents with unknown treatment/counseling information were excluded. Estimates were based only on responses to items in the Adult Mental Health Service Utilization module.
12. Unmet Need for Mental Health Treatment/Counseling is defined as a perceived need for treatment that was not received. Respondents with unknown unmet need information were excluded.