New Mexico Substance Abuse Epidemiology Profile

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New Mexico Department of Health

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NEW MEXICO DEPARTMENT OF HEALTH

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NEW MEXICO DEPARTMENT OF HEALTH

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Statewide Epidemiological and Outcomes Workgroup (SEOW)

The Statewide Epidemiological and Outcomes Workgroup (SEOW) currently functions as a core component of the Partnerships for Success 2015 grant. Under the Strategic Prevention Framework State Incentive Grant from SAMHSA over a decade ago, the SEOW guided the development of the first New Mexico Substance Abuse Epidemiology Profile as part of its mission to create a focus on community-based and data-driven planning and accountability. The on-going focus of the SEOW is the development and informed use of assessment data and indicators for use in community planning, prioritization and evaluation; and, the support of evidence-based strategies, policies and practices in all community prevention activity. The current membership of New Mexico's Prevention SEOW includes representatives from BHSD: Mika Tari. Community Members: Piper Coalson, Debra Darmada, Pamela Drake, Shelley Mann-Lev, Tiffany Martinez, Amanda Platt, Pat Serna, and John Steiner. CYFD Children's Behavioral Health: Michael Hock. DFA DWI Program: Norma Vazquez. Evaluators: Ann DelVecchio, Loucia Jose, and Sindy Sacoman. NMDOH-ERD Injury and Behavioral Epidemiology Bureau: Jim Davis, Dan Green, Naomi Greene, Carol Moss, Luigi Garcia Saavedra, Laura Tomedi, and Chris Trujillo. NMHSD-BHSD Office of Substance Abuse Prevention: Brian Chavez, Karen Cheman, Antonette Silva-Jose, and Heather Stanton. NM Prevention Workforce Training System, Kamama Consulting: Paula Feathers. Pacific Institute for Research & Evaluation (PIRE): Liz Lilliott, Martha Waller, Kim Zamarin, and Lei Zhang; and, is coordinated and staffed by Michael Coop, Tina Ruiz, McKenzie Wannigman, and Tim Werwath of Coop Consulting, Inc.

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This report and other reports by the Substance Abuse Epidemiology Section are available electronically at: http://nmhealth.org/about/erd/ibeb/sap/

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INTRODUCTION

New Mexico Substance Abuse Epidemiology Profile

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

Important Notes about Comparability to Previous Reports

This report is the seventh in a series that began with the New Mexico State Epidemiology Profile published in 2005, and continued with the publication of updates in 2010, 2011, 2013, 2014, and 2016. These reports are available at: http://nmhealth.org/about/erd/ibeb/sap.

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

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

- Race/ethnicity reporting for indicators cannot be compared between the 2013 and subsequent reports and previous reports.

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

- Data for risk behaviors (BRFSS-based) indicators have been aggregated for years 2013-2015, except for Adult Depression and Adult Drinking and Driving, which are not asked every year. These two indicators are reported on a single-year basis.

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

How to Use this Report

This report presents commonly used indicators of substance abuse in New Mexico. These indicators include outcome measures (e.g., alcohol-related death) reported in the *Consequences* section, mental health indicators associated with substance abuse (e.g., depression) in the *Mental Health* section, and consumption measures (e.g., self-reported substance use behavior from statewide surveys) reported in the *Consumption* section. The presentation of each major indicator includes a text description of the major data findings; a detailed table with results by gender, age-group, and race/ethnicity; a table detailing county results by race/ethnicity; a bar chart and a map with rates for each New Mexico county; and, additional charts illustrating other pertinent findings. There are also appendices that provide population denominators used in the calculation of death rates, substance abuse and mental health indicators from the National Survey on Drug Use and Health (NSDUH), and the International Classification of Diseases, Clinical Modification, 9th (ICD-9-CM) and 10th (ICD-10-CM) Edition codes used to produce indicators based on hospital data.

A combined five-year period is used when presenting death, emergency department visits, and hospital discharges. Combining counts over multiple years is necessary because in many of New Mexico's counties, there may be very few events (deaths, emergency department visits, or hospital discharges) due to a given cause in any given year. Combining counts over multiple years allows the calculation of rates that are more stable and, therefore, more meaningful than those calculated based on very few cases. In this report, death, emergency department, and hospitalization rates were calculated and reported for 2011-2015, the most current available five-year period.

INTRODUCTION (continued)

Use of this Report: The Problem Statements

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

Use of this Report: Tables and Charts

Each of the outcome indicators is presented with at least two tables. Table 1 for each indicator presents the number of events (deaths, emergency department visits, hospital discharges, or number of persons engaging in or experiencing a risk behavior) and their respective rates (or the weighted behavior prevalence rates) by sex, age-group (or grade, in the case of Youth Risk and Resiliency Survey [YRRS] data), and race/ethnicity. In sections that report on causes of death, these tables include the number of deaths, on the left side of the table, and age-adjusted death rates per 100,000 population, on the right side of the table. In sections that report on emergency department visits or hospital discharges, these tables include the number of emergency department visits or hospital discharges, on the left side, and age-adjusted rates per 100,000 population, on the right side. For BRFSS-based indicators, these tables include an estimate of the number of persons engaging in or experiencing the risk behavior, on the left side, and the prevalence rate of the behavior in the population, on the right side. For the aggregated indicators, the number of people was estimated by multiplying the percentage of persons engaging in or experiencing the risk behavior by the population estimate for the corresponding group. In sections that report specifically on youth risk behaviors, Table 1 includes only prevalence rates. These tables are very useful in determining the most important risk groups at the statewide level. Table 2 for each indicator presents results for each NM county by race/ethnicity. Again, the number of events are presented on the left side of the table and the age-adjusted rates on the right side of the table. These tables are useful in determining which counties have the most severe substance use issues, and which racial/ethnic groups are at the highest risk within each county. Youth data are presented by county only.

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

Finally, maps showing rates by county have been included for each indicator. The counties have been categorized and shaded according the county rates. 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) represent rates that are higher than the state rate by a selected amount. For maps based either on death or hospital-related event rates, this amount corresponds to rates that are 50% or higher than the state rate; for those based on behavioral data (BRFSS or YRRS), this amount corresponds to rates that are 25% higher than the state rate.

Use of this Report: Rates and Numbers

Both rates and the numbers of events are presented in the tables and charts of this report. While the rates are very important for indicating the degree of an issue in a given county or population group, they only provide part of the picture needed for comparing the burden of a problem from one county or group to another. The number of events also needs to be considered when making planning decisions. For instance, Rio Arriba County has an alcohol-related death rate (144.5 per 100,000 population), more than twice that of Bernalillo County (53.0 per 100,000). However, the number of alcohol-related deaths in Bernalillo County (1,883) is over six times the number in Rio Arriba County (294). While problems are more severe in Rio Arriba County (reflected in higher rates), Bernalillo County bears a larger proportion of the statewide burden (30.4% of all alcohol-related deaths in the state compared to 4.7% for Rio Arriba County). When prioritizing the distribution of resources and selecting interventions, it is important to look at both the total number of deaths and the death rate. Because of its extremely high rate of alcohol-related deaths, interventions that address this problem are very important in Rio Arriba County. 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?

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

Morbidity and mortality numbers and rates are not reported when the number of events are three or less for a denominator (population) of less than twenty, in accordance with the *NMDOH small numbers rule* (https://ibis.health.state.nm.us/view/docs/Standards/NMSmallNumbersRule2006.pdf).

Although not suppressed, mortality and morbidity rates calculated with less than ten events (numerator) should be considered unstable. When rates are calculated using small numbers of events, rates can vary widely, from one reporting to the next, for reasons different from actual changes in the frequency of occurrence of the events measured.

Specifically, for indicators using Emergency Department Data (EDD) or Hospital Inpatient Discharge Data (HIDD), missing rates correspond to events for which data on race-ethnicity, sex, or county of residence were missing. Although these events are included in the total count of events for NM, rates cannot be calculated and are, therefore, not reported. Footnotes on the corresponding tables for these indicators will refer to the number of events missing. EDD and HIDD indicators have been produced by searching for specific diagnostic codes on these datasets. For EDD, all diagnosis fields have been used. Thus, the inclusion of the word 'Related' in the name of the indicator. For HIDD, only the main diagnosis was used. The International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and ICD-10-CM codes used are listed on Appendix 4.

Other Data Resources

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

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

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

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

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

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

INTRODUCTION (continued)

Technical Note: Methodological Changes since Previous Reports

Changes to the Definition of Alcohol-Related Death

In 2013, the Centers for Disease Control and Prevention (CDC) updated the Alcohol-Related Disease Impact (ARDI) Alcohol-Attributable Fractions (AAFs), which are central to the estimation of alcohol-related deaths and alcohol-related death rates in this report (https://www.cdc.gov/alcohol/announcement.html). The updated AAFs were implemented in the 2015 and subsequent reports. The key difference between the updated CDC's ARDI AAFs used in the 2015 and subsequent reports and the AAFs used in previous reports is that the age-specific AAFs for alcohol-attributable motor-vehicle traffic crashes have been updated.

The AAFs are the proportion of a given cause of death that can be attributed to excessive alcohol use. The CDC ARDI AAFs are the standard AAFs recommended for use by the CDC. These AAFs were first reported in Midanik, L., Chaloupka, F., Saitz, R., Toomey, T., Fellows, J., Dufour, M., Landen, M., Brounstein, P., Stahre, M., Brewer, R., Naimi, T., & Miller, J. (2004). Alcohol-attributable deaths and years of potential life lost - United States, 2001. Morbidity and Mortality Weekly Report, 53[37]:866-870). The ARDI AAFs are further described on the CDC website (http://nccd.cdc.gov/DPH_ARDI/default/Default.aspx).

Changes to Race/Ethnicity Categories

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

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

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

These changes in the race/ethnicity categories make the 2013 and subsequent reports' counts and rates by race/ethnicity comparable to each other but not comparable to the 2005 report.

EXECUTIVE SUMMARY

Consequences of Substance Abuse

Introduction

Eight of the ten leading causes of death in New Mexico are, at least partially, caused by the abuse of alcohol, tobacco, or other drugs. In 2015, the ten leading causes of death in New Mexico were malignant neoplasms, diseases of the heart, unintentional injuries, chronic lower respiratory diseases, cerebrovascular diseases, diabetes, chronic liver disease and cirrhosis, suicide, Alzheimer's disease, and influenza and pneumonia. Of these, chronic liver disease, unintentional injuries, and suicide are associated with alcohol use; chronic lower respiratory diseases and influenza and pneumonia are associated with tobacco use; heart disease, malignant neoplasms, and cerebrovascular diseases are associated with both alcohol and tobacco use; and unintentional injuries and suicide are associated with the use of other drugs.

Alcohol-Related Deaths and Hospitalizations

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

Death rates from alcohol-related causes increase with age. However, one in six deaths among working age adults (20-64) in NM is attributable to alcohol. Male rates are substantially higher than female rates. American Indians have higher alcohol-related death rates than other race/ethnicities. Rio Arriba and McKinley counties have extremely high alcohol-related death rates, driven by high rates in the American Indian and Hispanic male populations, respectively. The counties with the most deaths for the five-year period, of 2011-2015, were Bernalillo, San Juan, Santa Fe, Dona Ana, and McKinley. New Mexico has extremely high death rates due to both alcohol-related chronic diseases and alcohol-related injuries.

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

  Alcohol-related chronic liver disease (AR-CLD) is the disease that accounts for the most deaths due to alcohol-related chronic disease. AR-CLD death rates are extremely high among American Indians, both male and female, and Hispanic males. The high rates among American Indians and Hispanic males between the ages of 35 and 64 represent a tremendous burden in terms of years of potential life lost (YPLL). While Bernalillo County has the highest number of deaths due to AR-CLD (617 for the years 2011-2015), two counties that stand out for their very high rates are Rio Arriba and McKinley, which have rates that are more than five times the national rate.

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

- Alcohol-Related Injury Death. NM's rate of alcohol-related injury death is 1.7 times the national rate. In the current reporting period (2011-2015), drug overdose surpassed alcohol-related motor vehicle traffic crashes and falls as the leading cause of alcohol-related injury death; and numerous other types of injury death are also associated with excessive alcohol use (particularly binge drinking). Deaths from drug overdose, a portion of which are partially attributable to alcohol, have increased substantially in recent years. Males are more at risk for alcohol-related injury death than females, with American Indian males at particularly elevated risk.

EXECUTIVE SUMMARY (continued)

Consequences of Substance Abuse (continued)

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

Smoking-Related Death

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

Drug Overdose Death

In 2015, New Mexico had the eighth highest drug overdose death rate in the nation. The consequences of drug use continue to burden New Mexico communities. Drug overdose death rates remained higher for males than for females. The highest drug overdose death rate was among Hispanic males, followed by Whites. Rio Arriba County had the highest drug overdose death rate in the state. Bernalillo County continued to bear the highest burden of drug overdose death in terms of total numbers of deaths. Unintentional drug overdoses account for almost 85% of drug overdose deaths. The most common drugs causing unintentional overdose death for the period covered in this report were prescription opioids (i.e., methadone, oxycodone, morphine; 47%), heroin (37%), tranquilizers/muscle relaxants (24%), cocaine (15%), methamphetamine (20%) and antidepressants (12%)(not mutually exclusive). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available.

Opioid Overdose Related Emergency Department (OOR-ED) visits have increased 98.4% in the US between 2004 and 2009. In NM, between 2010 and 2015, ED vistis increased 9.8%. Male rates of OOR-ED visits were higher compared to female rates. For both groups, Whites had the highest rates. Rio Arriba County had the highest rate of OOR-ED visits during 2011-2015 with 182.2 OOR-ED visits per 100,000 population.

Suicide and Mental Health

Suicide and Mental Health

Suicide is a serious and persistent public health problem in New Mexico. Over the period 1981 through 2010, New Mexico's suicide rate has consistently been among the highest in the nation, at 1.5 to 1.9 times the US rate. Male suicide rates are around three times higher those of females, across the all racial/ethnic groups, except Asian/Pacific Islanders. For the five-year period 2011-2015, all but eight counties had suicide rates that were one and a half times higher than the most recent available US rate.

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

Alcohol, Tobacco, and Other Drug Consumption Behavior

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

Substance Use Indicators included in this Report

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

- Youth Current Drinking. Any alcohol consumption by a person under the age of 21 is considered to be excessive drinking. Alcohol is the most commonly used drug among youth in New Mexico, more than tobacco or other drugs. However, contrary to common perception, most high school students do not drink. In 2015, 26.1% of high school students reported that they were current drinkers. This is a significant decrease from 43.3% in 2005.

- Youth Binge Drinking. Youth binge drinking has significantly decreased over the last decade. In 2015, New Mexico public high school students were less likely to report binge drinking than US high school students. Among New Mexico high school students, binge drinking was more commonly reported by upper grade students than lower grade students. There was no significant difference in the binge drinking rate between male and female high school students. Binge drinking rates were lower among American Indian youth than other racial/ethnic groups. .

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

- Adult Heavy Drinking. In NM, between 2013-2015, adult heavy drinking (defined as drinking, on average, more than two drinks per day, for men; or more than one drink per day, for women) was less commonly reported (5.4%) than in the rest of the nation in 2015 (5.9%). Heavy drinking was more prevalent among middle-aged (age 25-64) adults, with 6.0% reporting past-month heavy drinking. New Mexico men were almost 1.5 times more likely to report chronic drinking than women (6.4% v. 4.5%).

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

- Youth Drinking and Driving. In 2015, New Mexico high school students were less likely to report driving after drinking alcohol than other US students. Driving after drinking was more common among boys than girls, and was less common among White and American Indian youth than among other racial/ethnic groups. Twelfth grade students were more likely to report drinking and driving than ninth and tenth grade students.

EXECUTIVE SUMMARY (continued)

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

- Youth Drug Use. In 2015, past-30-day marijuana and methamphetamine use were more prevalent among New Mexico students than among US students. The use of marijuana was more commonly reported by American Indian than by students in other racial/ethnic groups. Asian or Pacific Islander students were more likely to report past-30-day use of cocaine, heroin, methamphetamine, and inhalants than students of other racial/ethnic groups.

- Adult Tobacco Use. Between 2013-2015, the prevalence of adult smoking was the same for New Mexico and the 2015 US estimates (17.5%). Smoking was most prevalent among middle-aged groups, and was more common among men than women for all age categories.

-Youth Tobacco Use. In 2015, smoking was more prevalent among New Mexico high school students (11.4%) than in the nation overall (10.8%). New Mexico boys were more likely than girls to report current smoking (12.8% vs. 9.8). American Indian high school students (17.0%) were more likely to report current cigarette smoking than Black (9.5%) and White (10.5%) 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/programs-surveys/popest/data/data-sets.1980.html as of January 31, 2017.

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National population data, 2000-2010: National Center for Health Statistics (NCHS). Intercensal estimates of the resident population of the United States for July 1, 2000-July 1, 2010, by year, county, age, bridged race, Hispanic origin, and sex. Available from: http://www.census.gov/programs-surveys/popest/data/data-sets.2000.html as of January 31, 2017.

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

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

Data Sources (continued)

(2) Per 100,00 population reporting: Persons killed, by state and Highest Driver Blood Alcohol Concentration (BAC) in Crash - State: USA, Year. Available from:
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nmhealth.org/data/view/newsletter/1729/

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Section 1

Consequences

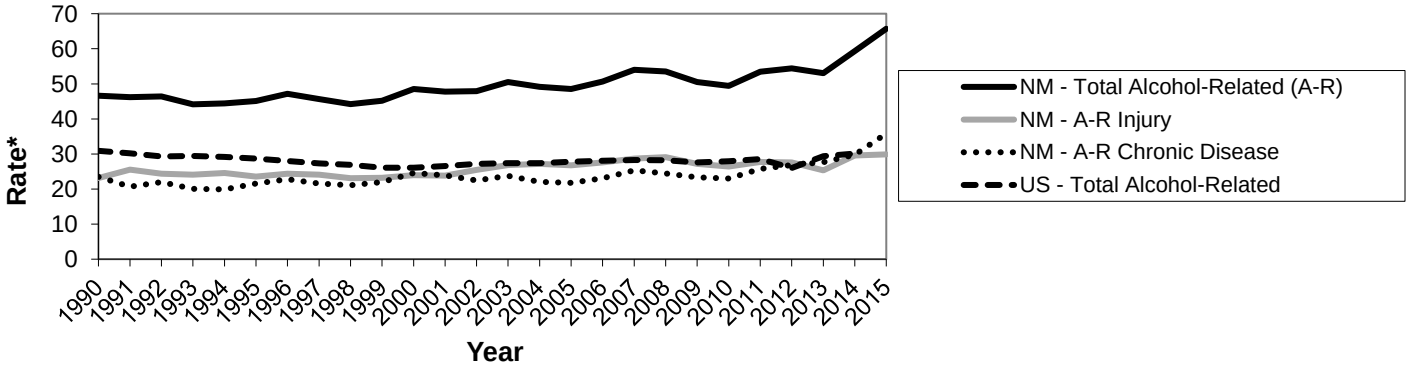
ALCOHOL-RELATED DEATH

Problem Statement

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

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

Chart 1: Alcohol-Related Death Rates*, New Mexico and United States, 1990-2015



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

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

Table 1: Alcohol-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	53	643	88	785	27.8	292.9	267.6	198.6
	Asian/Pacific Islander	1	13	3	16	4.0	28.5	43.5	23.0
	Black	7	52	12	72	15.0	78.4	117.9	59.5
	Hispanic	162	1,404	329	1,894	15.4	118.1	149.4	86.1
	White	66	978	473	1,518	12.7	87.0	110.1	59.8
	Total	290	3,115	914	4,319	15.8	117.8	130.6	82.2
Female	American Indian	21	304	56	381	10.8	125.7	117.3	84.8
	Asian/Pacific Islander	0	5	1	7	0.0	9.4	13.3	7.6
	Black	1	14	4	19	3.1	29.2	34.0	19.7
	Hispanic	50	449	193	692	4.9	37.2	71.0	30.2
	White	21	416	327	764	4.4	36.5	65.4	27.4
	Total	94	1,194	582	1,869	5.3	44.4	69.2	33.3
Total	American Indian	74	947	145	1,166	19.4	205.3	178.6	137.6
	Asian/Pacific Islander	2	18	4	24	2.9	17.9	24.7	13.9
	Black	9	66	16	90	9.5	58.0	75.1	41.9
	Hispanic	212	1,853	521	2,586	10.2	77.3	106.1	57.4
	White	87	1,394	800	2,281	8.7	61.5	86.1	43.3
	Total	384	4,309	1,496	6,188	10.7	80.7	97.1	57.2

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

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

ALCOHOL-RELATED DEATH (continued)

Problem Statement (continued)

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

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

Table 2: Alcohol-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

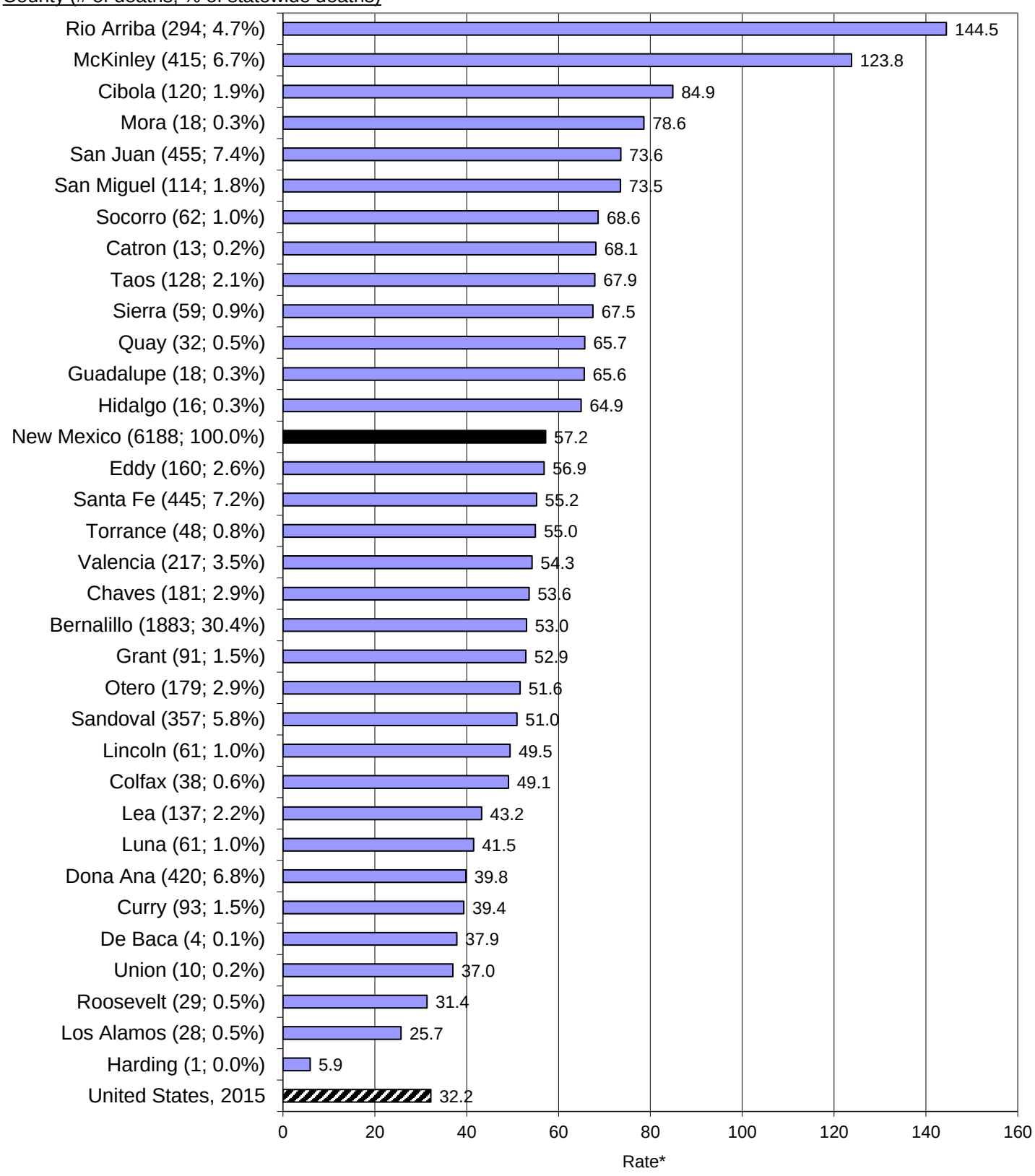
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	162	11	46	876	766	1,883	124.9	12.4	44.8	59.4	43.2	53.0
Catron	0	0	0	4	9	13	0.0	0	0.0	112.9	56.4	68.1
Chaves	1	0	2	85	93	181	31.4	0.0	41.7	55.5	51.3	53.6
Cibola	63	0	0	33	24	120	121.1	0.0	0.0	64.9	71.6	84.9
Colfax	0	0	0	24	13	38	0.0	0.0	0.0	71.6	29.2	49.1
Curry	2	1	7	36	47	93	71.9	17.7	56.0	47.7	32.7	39.4
De Baca	0	0	0	2	2	4	0.0	0.0	0.0	61.7	21.7	37.9
Dona Ana	3	2	6	227	179	420	47.9	15.3	38.8	36.8	42.5	39.8
Eddy	1	0	1	71	87	160	24.4	0.0	42.6	62.5	56.7	56.9
Grant	2	0	1	39	48	91	245.8	0.0	105.6	52.1	52.3	52.9
Guadalupe	0	0	0	17	1	18	0.0	0.0	0.0	79.4	28.5	65.6
Harding	0	0	0	0	0	1	0.0	0.0	0.0	0.0	0.0	5.9
Hidalgo	0	0	0	10	5	16	0.0	0	0.0	77.9	48.9	64.9
Lea	0	0	8	60	68	137	0.0	0.0	59.6	44.2	45.7	43.2
Lincoln	2	0	0	9	50	61	108.5	0.0	0.0	30.0	56.8	49.5
Los Alamos	0	0	0	3	25	28	0.0	0.0	0.0	22.7	28.8	25.7
Luna	0	0	1	24	35	61	0.0	0.0	65.3	33.2	56.1	41.5
McKinley	371	0	0	22	21	415	151.5	0.0	0.0	51.7	49.6	123.8
Mora	0	0	0	16	1	18	0.0	0.0	0.0	90.3	10.5	78.6
Otero	34	1	7	39	97	179	192.5	15.8	61.3	38.1	46.6	51.6
Quay	0	0	0	18	13	32	0.0	0.0	0.0	94.0	48.4	65.7
Rio Arriba	64	0	0	208	22	294	237.0	0.0	0.0	144.0	57.9	144.5
Roosevelt	0	0	0	10	19	29	0.0	0.0	0.0	31.6	32.3	31.4
Sandoval	109	1	5	102	135	357	143.1	5.8	30.0	45.6	34.5	51.0
San Juan	285	1	2	52	115	455	131.3	26.1	38.9	52.2	36.6	73.6
San Miguel	1	1	0	90	21	114	175.3	162.0	0.0	77.5	59.2	73.5
Santa Fe	18	2	1	253	166	445	105.9	17.1	7.7	68.4	41.3	55.2
Sierra	1	0	0	11	46	59	93.3	0.0	0.0	60.8	67.6	67.5
Socorro	18	0	0	27	17	62	219.0	0.0	0.0	63.4	36.4	68.6
Taos	15	0	0	71	42	128	141.0	0.0	0.0	71.9	55.5	67.9
Torrance	2	0	0	17	29	48	82.9	0.0	0.0	54.6	53.9	55.0
Union	0	0	0	6	4	10	0.0	0.0	0.0	64.2	26.9	37.0
Valencia	11	2	1	121	81	217	85.3	85.0	24.5	56.2	49.8	54.3
New Mexico	1,166	24	90	2,586	2,281	6,188	137.6	13.9	41.9	57.4	43.3	57.2

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

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

ALCOHOL-RELATED DEATH (continued)

Chart 2: Alcohol-Related Death Rates* by County, New Mexico, 2011-2015

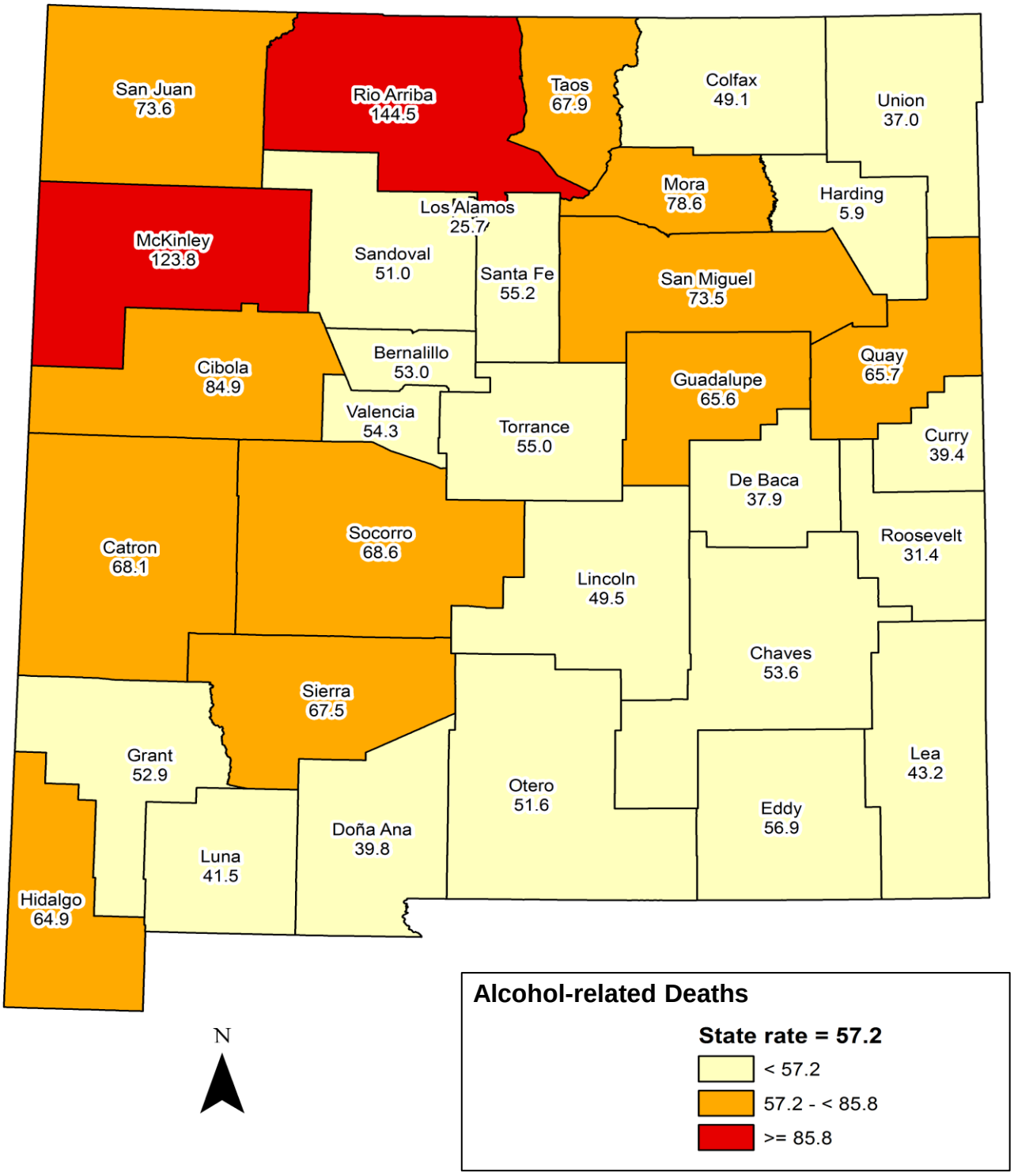


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

ALCOHOL-RELATED DEATH (continued)

Chart 3: Alcohol-Related Death Rates* by County, New Mexico, 2011-2015



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

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

ALCOHOL-RELATED CHRONIC DISEASE DEATH

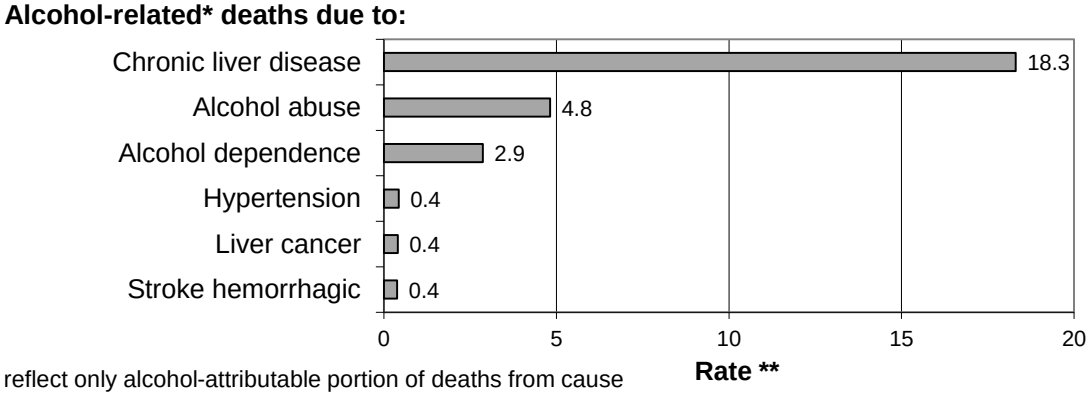
Problem Statement

Chronic heavy drinking (defined as drinking, on average, more than two drinks per day for men, and more than one drink per day for women) often is associated with alcoholism or alcohol dependence, and can cause or contribute to a number of diseases, including alcoholic liver cirrhosis. For the past 15 years, New Mexico's death rate from alcohol-related chronic disease has consistently been first or second in the nation, and 1.5 to two times the national rate. The national death rate from alcohol-related chronic disease in 2015 (13.9) was the same as that in 1990. In contrast, New Mexico's rate increased 52 percent from 1990 to 2015.

Chart 1 shows the five leading causes of alcohol-related chronic disease death in New Mexico during 2010-2014. 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 later in this report. New Mexico also had the highest rate of alcohol dependence death in the US for the period 1999 through 2010 (the most recent year for which state comparison data is available).

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

Chart 1: Leading Causes of Alcohol-Related Chronic Disease Death, New Mexico, 2011-2015



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

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

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

Table 1: Alcohol-Related Chronic Disease Deaths/Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	5	360	61	426	2.8	163.9	184.3	111.3
	Asian/Pacific Islander	0	4	1	5	0.0	9.0	15.6	7.1
	Black	0	20	9	29	0.0	30.4	84.3	25.4
	Hispanic	3	804	237	1,044	0.3	67.6	107.7	48.5
	White	3	518	250	771	0.6	46.0	58.2	27.0
	Total	12	1,718	562	2,292	0.6	65.0	80.3	41.9
Female	American Indian	1	234	43	277	0.3	96.7	89.4	62.3
	Asian/Pacific Islander	0	4	1	4	0.0	6.4	5.0	4.2
	Black	0	8	2	10	0.0	16.6	16.0	9.6
	Hispanic	3	250	108	362	0.3	20.8	39.9	15.9
	White	1	211	116	327	0.1	18.5	23.2	11.3
	Total	4	710	270	984	0.3	26.4	32.1	17.3
Total	American Indian	6	594	104	703	1.5	128.7	128.1	84.7
	Asian/Pacific Islander	0	8	2	9	0.0	7.6	9.0	5.3
	Black	0	28	11	39	0.0	24.7	49.5	18.0
	Hispanic	6	1,055	345	1,406	0.3	44.0	70.3	31.5
	White	4	728	366	1,098	0.4	32.1	39.4	18.9
	Total	16	2,428	832	3,276	0.4	45.5	54.0	29.2

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

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

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Problem Statement (continued)

Table 1 also shows that, in general, males are more at risk than females for alcohol-related chronic disease death. Male rates are almost two to three times higher than female rates, across all racial/ethnic groups except Asian/Pacific Islanders. American Indians are most at risk among the race/ethnic groups, with total, male, and female rates more than twice the corresponding state rates. As mentioned earlier, Hispanic males are also at an elevated risk, with rates almost twice the state rate (48.5 v. 29.2).

Table 2 shows that Rio Arriba, McKinley, and Cibola counties have the highest death rates for diseases associated with alcohol-related chronic disease. In these counties, the rates are more than 4 times the national rate (13.3). 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 Cibola, McKinley, and Rio Arriba counties. It is also important to remember that these chronic disease deaths represent only the tip of the iceberg of health and social problems associated with chronic heavy alcohol use in New Mexico. For every alcohol-related death, there are many living persons (and their families) impaired by serious morbidity and reduced quality of life due to chronic alcohol abuse.

Table 2: Alcohol-Related Chronic Disease Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

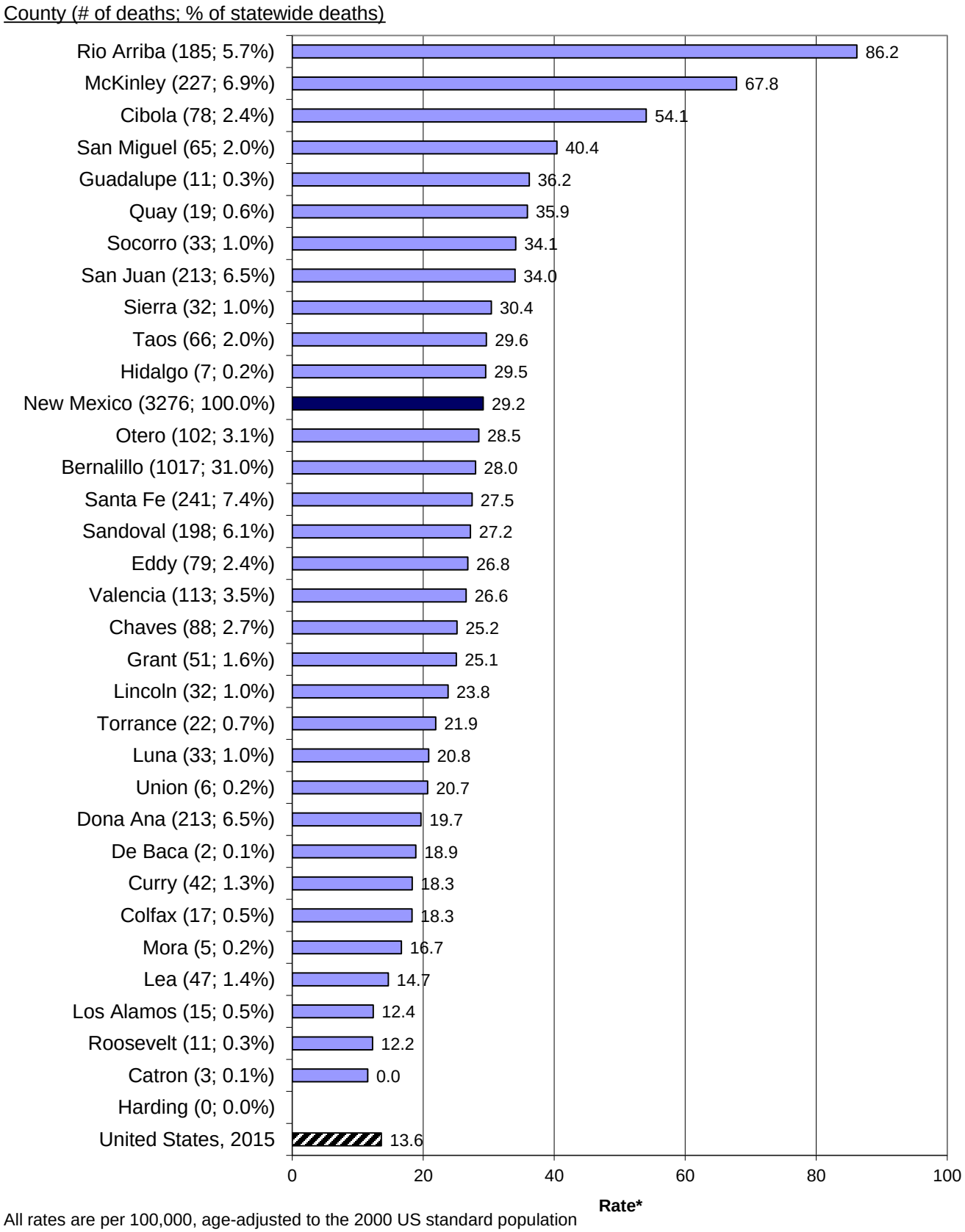
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	120	3	20	483	379	1,017	95.8	3.3	18.6	33.6	20.0	28.0
Catron	0	0	0	2	1	3	0.0	0	0.0	44.0	3.6	11.5
Chaves	0	0	1	40	48	88	0.0	0.0	10.3	27.8	23.8	25.2
Cibola	42	0	0	21	14	78	80.4	0.0	0.0	41.8	43.0	54.1
Colfax	0	0	0	12	4	17	0.0	0.0	0.0	33.9	6.7	18.3
Curry	1	0	3	16	23	42	48.8	0.0	25.5	22.6	15.9	18.3
De Baca	0	0	0	1	1	2	0.0	0.0	0.0	38.5	7.1	18.9
Dona Ana	3	2	2	117	89	213	39.6	15.3	15.4	19.6	19.3	19.7
Eddy	0	0	0	38	41	79	0.0	0.0	0.0	34.4	25.1	26.8
Grant	2	0	1	22	25	51	220.1	0.0	105.6	27.0	20.8	25.1
Guadalupe	0	0	0	11	0	11	0.0	0.0	0.0	44.5	0.0	36.2
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	6	1	7	0.0	0	0.0	47.9	6.8	29.5
Lea	0	0	1	23	23	47	0.0	0.0	9.1	19.7	13.3	14.7
Lincoln	2	0	0	3	27	32	93.8	0.0	0.0	12.7	25.8	23.8
Los Alamos	0	0	0	2	12	15	0.0	0.0	0.0	17.3	12.5	12.4
Luna	0	0	1	16	16	33	0.0	0.0	55.5	21.0	21.8	20.8
McKinley	205	0	0	12	10	227	85.0	0.0	0.0	26.7	18.9	67.8
Mora	0	0	0	4	1	5	0.0	0.0	0.0	18.2	7.5	16.7
Otero	25	0	4	23	50	102	144.3	0.0	40.8	21.8	22.4	28.5
Quay	0	0	0	12	5	19	0.0	0.0	0.0	61.1	20.2	35.9
Rio Arriba	49	0	0	125	12	185	180.3	0.0	0.0	81.3	25.1	86.2
Roosevelt	0	0	0	4	7	11	0.0	0.0	0.0	13.8	12.5	12.2
Sandoval	72	0	4	59	61	198	95.7	0.0	22.2	26.8	13.6	27.2
San Juan	140	0	0	23	49	213	66.3	0.0	0.0	25.5	14.6	34.0
San Miguel	0	1	0	51	13	65	0.0	115.0	0.0	42.2	36.7	40.4
Santa Fe	14	1	0	141	81	241	78.2	11.1	0.0	37.4	17.2	27.5
Sierra	0	0	0	6	25	32	0.0	0.0	0.0	33.8	26.9	30.4
Socorro	10	0	0	15	8	33	130.9	0.0	0.0	32.6	16.7	34.1
Taos	9	0	0	37	19	66	79.6	0.0	0.0	35.0	16.4	29.6
Torrance	1	0	0	10	11	22	51.7	0.0	0.0	27.8	17.5	21.9
Union	0	0	0	4	2	6	0.0	0.0	0.0	48.6	9.9	20.7
Valencia	8	1	0	65	38	113	69.0	42.4	0.0	29.9	20.2	26.6
New Mexico	703	9	39	1,406	1,098	3,276	84.7	5.3	18.0	31.5	18.9	29.2

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

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

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 2: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2011-2015

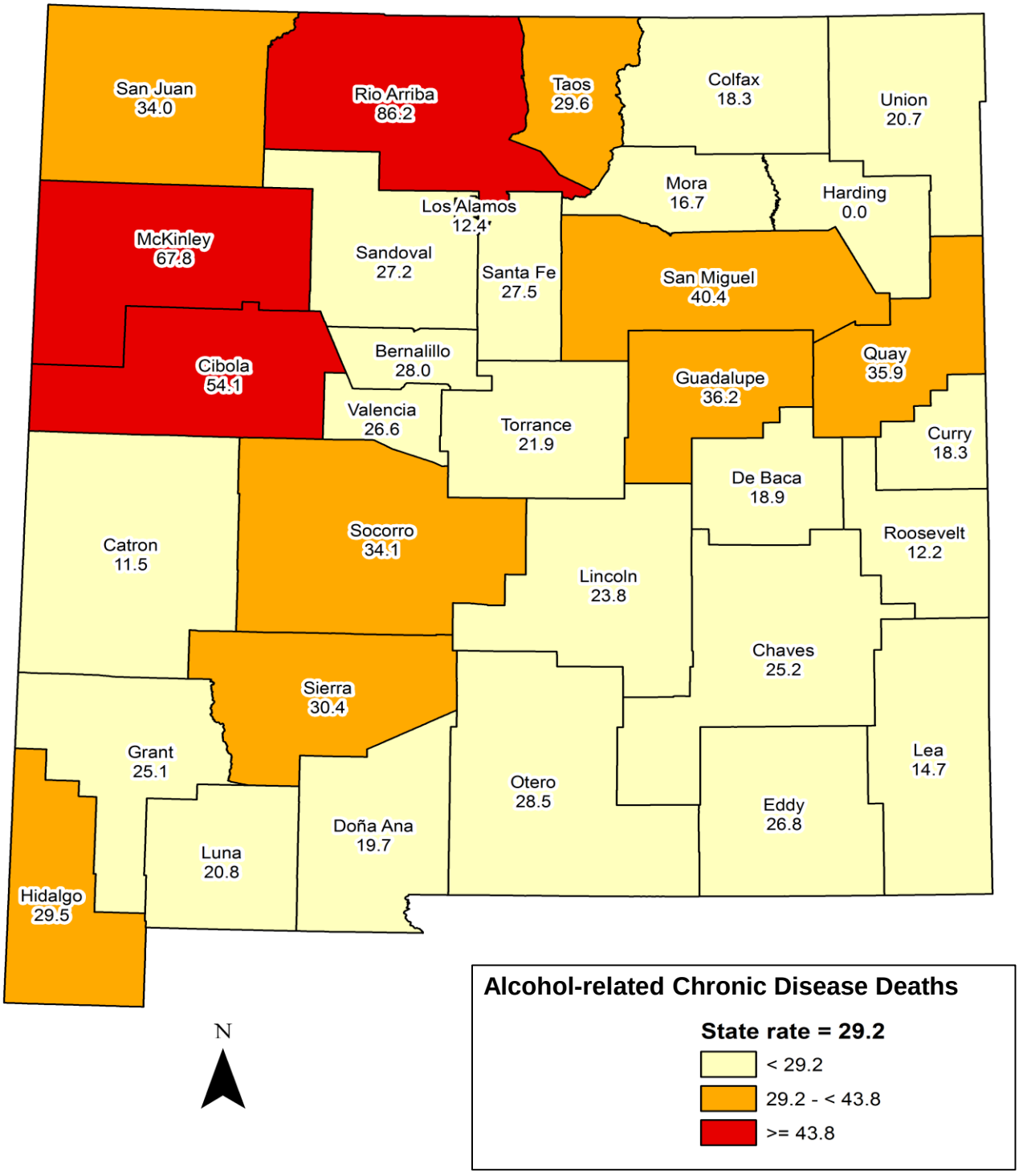


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

ALCOHOL-RELATED CHRONIC DISEASE DEATH (continued)

Chart 3: Alcohol-Related Chronic Disease Death Rates* by County, New Mexico, 2011-2015



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

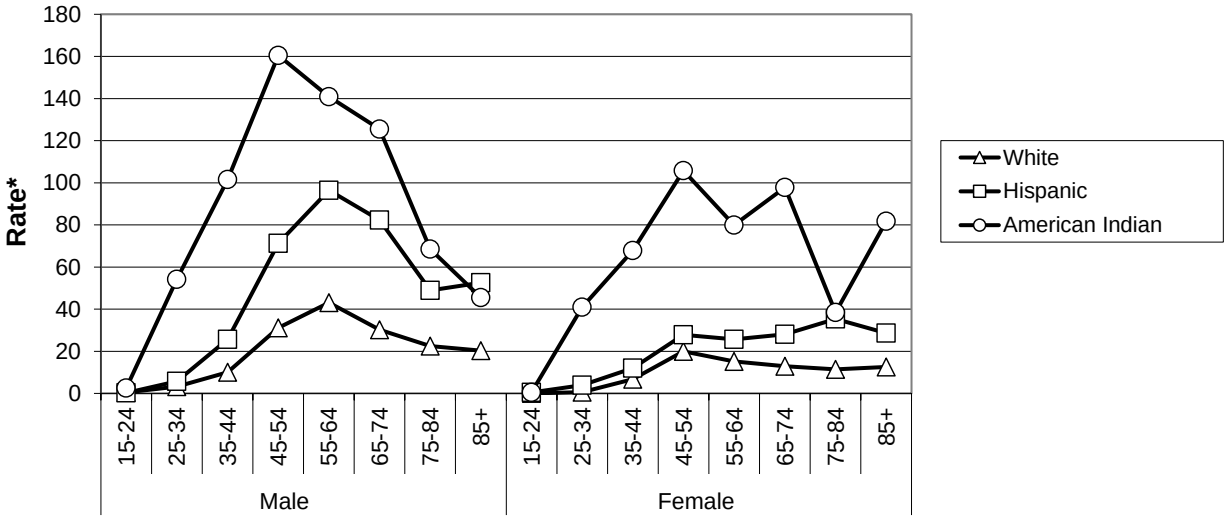
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH

Problem Statement

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

Chart 1: Alcohol-Related CLD Death Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015



* Age-specific rates per 100,000

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

Table 1: Alcohol-Related CLD Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	2	237	34	273	1.0	107.7	102.9	70.2
	Asian/Pacific Islander	0	2	0	3	0.0	5.4	0.0	3.5
	Black	0	5	3	8	0.0	7.5	32.5	7.7
	Hispanic	1	531	153	685	0.1	44.7	69.4	31.4
	White	1	274	116	391	0.2	24.4	26.9	13.4
	Total	4	1,057	306	1,367	0.2	40.0	43.8	24.7
Female	American Indian	0	174	37	212	0.0	71.9	78.0	47.3
	Asian/Pacific Islander	0	1	0	1	0.0	2.5	0.0	1.3
	Black	0	6	1	7	0.0	12.7	7.4	6.5
	Hispanic	2	199	83	283	0.2	16.5	30.4	12.4
	White	0	136	62	198	0.0	11.9	12.4	6.8
	Total	2	517	183	702	0.1	19.2	21.7	12.3
Total	American Indian	2	410	71	484	0.6	88.9	88.2	57.9
	Asian/Pacific Islander	0	4	0	4	0.0	3.8	0.0	2.2
	Black	0	11	4	15	0.0	9.7	19.7	6.8
	Hispanic	3	730	235	968	0.1	30.5	48	21.6
	White	1	410	178	589	0.1	18.1	19.1	10.0
	Total	6	1,574	489	2,069	0.2	29.5	31.7	18.3

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

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

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

Problem Statement (continued)

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

Chart 2 shows that AR-CLD death rates in Rio Arriba and McKinley counties are more than five times the national rate. Almost half of New Mexico's counties have rates more than twice the US rate. A number of counties with rates less than twice the US rate (e.g., Chaves, Dona Ana, Santa Fe) still have high rates compared to the US, and substantial numbers of deaths. The American Indian and/or Hispanic male rates tend to drive the county rates in all counties (data not shown). It is worth noting the relatively lower rates for American Indians in San Juan County and for Hispanics in Dona Ana County (Table 2).

Table 2: Alcohol-Related CLD Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

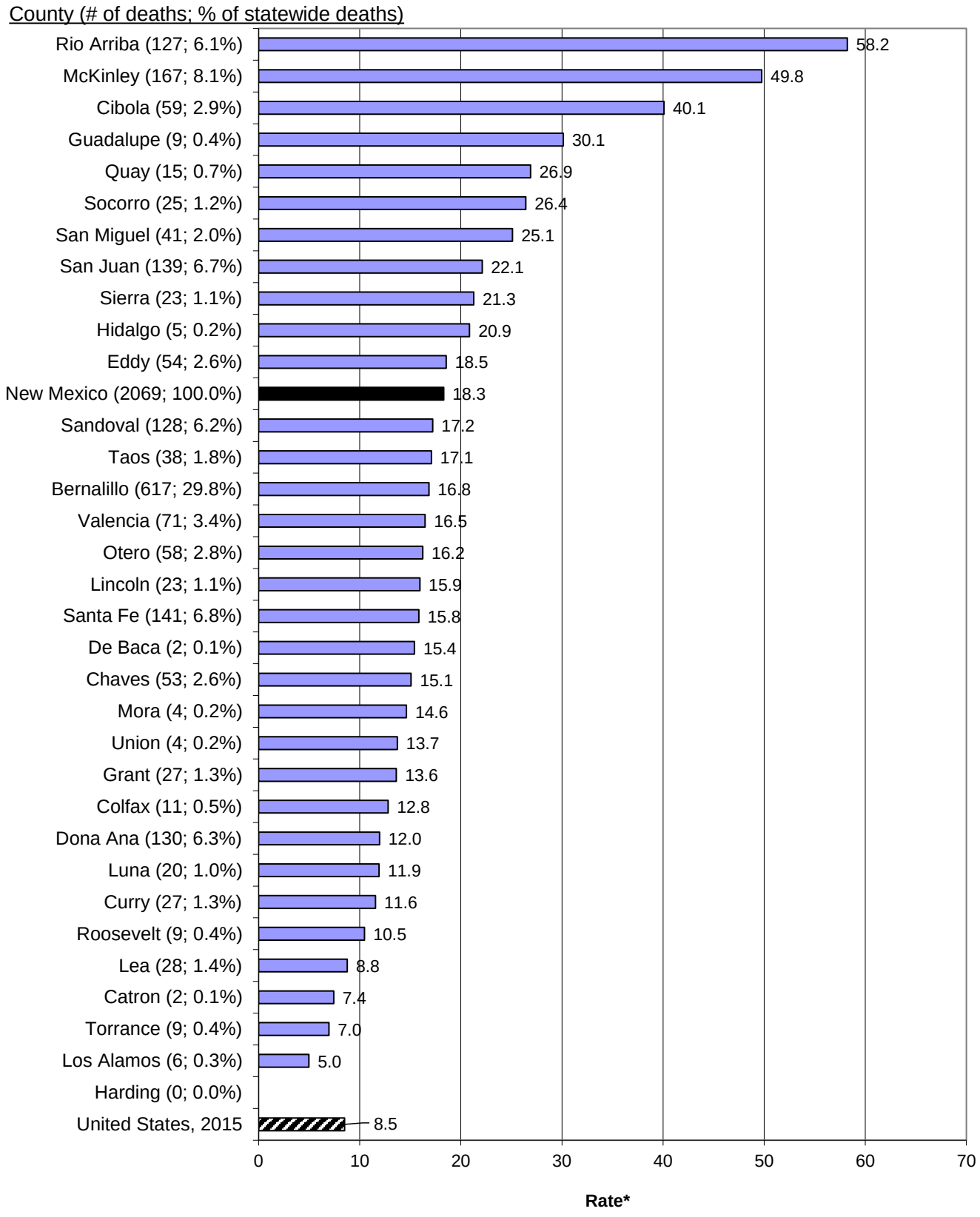
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	77	1	8	323	205	617	61.0	0.8	6.5	22.5	10.6	16.8
Catron	0	0	0	1	1	2	0.0	0.0	0.0	27.7	1.6	7.4
Chaves	0	0	0	29	23	53	0.0	0.0	0.0	20.3	11.4	15.1
Cibola	30	0	0	18	11	59	55.9	0.0	0.0	35.7	31.0	40.1
Colfax	0	0	0	10	1	11	0.0	0.0	0.0	27.1	1.9	12.8
Curry	1	0	2	11	13	27	48.7	0.0	13.3	16.3	8.6	11.6
De Baca	0	0	0	1	0	2	0.0	0.0	0.0	34.7	0.0	15.4
Dona Ana	2	1	1	84	41	130	35.5	6.4	5.2	13.9	9.3	12.0
Eddy	0	0	0	27	27	54	0.0	0.0	0.0	24.7	17.2	18.5
Grant	0	0	0	12	15	27	0.0	0.0	0.0	16.0	12.8	13.6
Guadalupe	0	0	0	9	0	9	0.0	0.0	0.0	36.9	0.0	30.1
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	5	0	5	0.0	0.0	0.0	38.9	0.0	20.9
Lea	0	0	1	12	15	28	0.0	0.0	6.1	9.8	8.8	8.8
Lincoln	2	0	0	2	19	23	93.7	0.0	0.0	6.7	17.1	15.9
Los Alamos	0	0	0	1	4	6	0.0	0.0	0.0	10.4	4.6	5.0
Luna	0	0	0	11	9	20	0.0	0.0	0.0	14.2	10.6	11.9
McKinley	153	0	0	10	3	167	63.6	0.0	0.0	23.3	5.3	49.8
Mora	0	0	0	4	1	4	0.0	0.0	0.0	16.0	6.0	14.6
Otero	19	0	2	16	21	58	110.4	0.0	19.0	16.0	9.3	16.2
Quay	0	0	0	11	3	15	0.0	0.0	0.0	53.2	9.3	26.9
Rio Arriba	31	0	0	87	9	127	113.7	0.0	0.0	55.9	21.2	58.2
Roosevelt	0	0	0	3	6	9	0.0	0.0	0.0	12.4	10.6	10.5
Sandoval	49	0	1	41	35	128	65.2	0.0	7.3	18.4	7.5	17.2
San Juan	90	0	0	19	29	139	42.2	0.0	0.0	20.9	8.6	22.1
San Miguel	0	1	0	37	3	41	0.0	114.7	0.0	30.1	8.9	25.1
Santa Fe	7	1	0	91	40	141	40.0	8.6	0.0	23.9	8.1	15.8
Sierra	0	0	0	5	17	23	0.0	0.0	0.0	25.7	18.1	21.3
Socorro	9	0	0	10	6	25	107.7	0.0	0.0	21.3	13.2	26.4
Taos	7	0	0	21	9	38	61.4	0.0	0.0	20.0	7.6	17.1
Torrance	0	0	0	4	4	9	0.0	0.0	0.0	12.0	4.8	7.0
Union	0	0	0	2	1	4	0.0	0.0	0.0	26.7	8.8	13.7
Valencia	6	0	0	48	17	71	49.8	0.0	0.0	21.9	8.4	16.5
New Mexico	484	4	15	968	589	2,069	57.9	2.2	6.8	21.6	10.0	18.3

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

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

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

Chart 2: Alcohol-Related CLD Death Rates* by County, New Mexico, 2011-2015

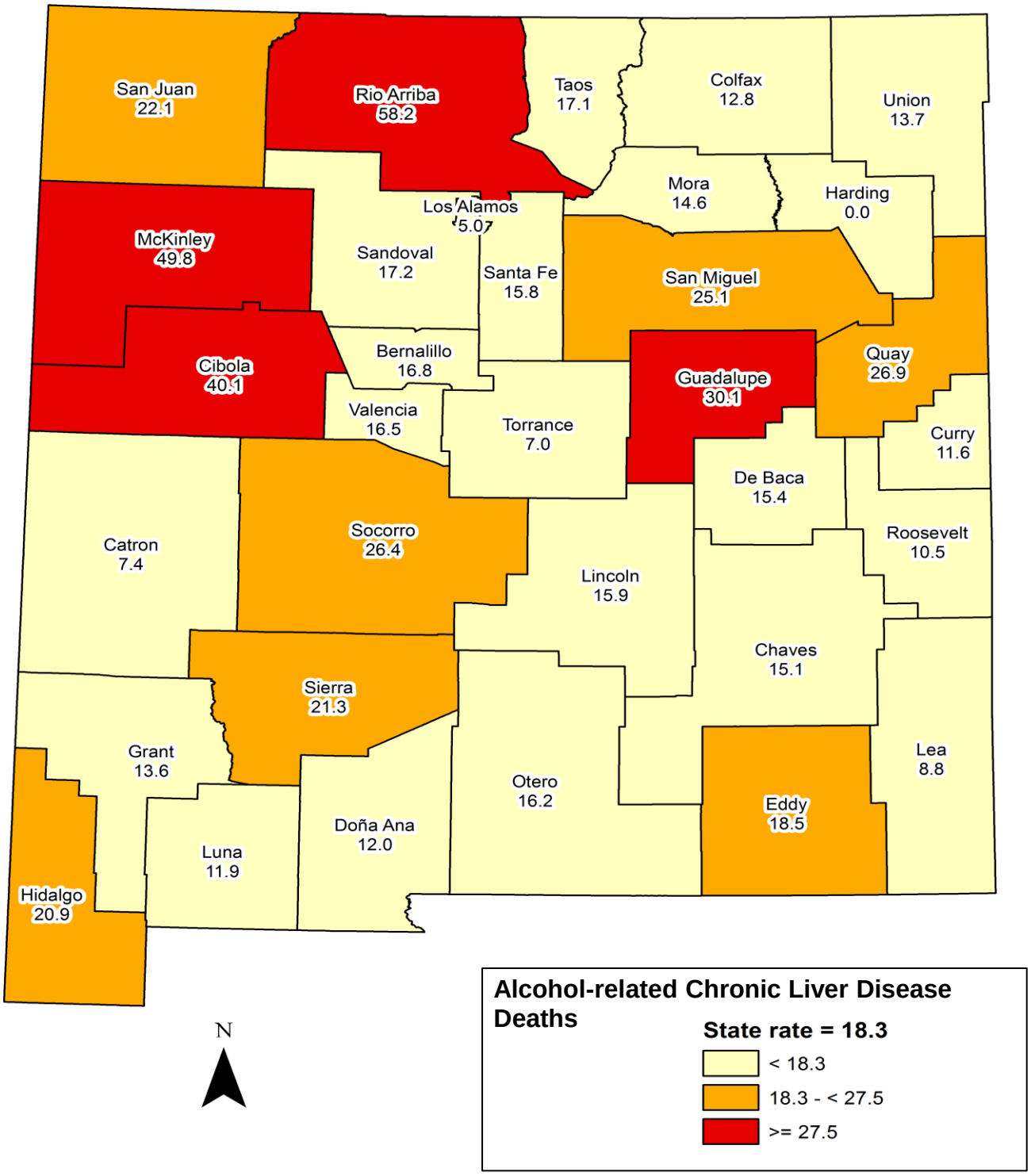


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

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

Chart 3: Alcohol-Related CLD Death Rates* by County, New Mexico, 2011-2015



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

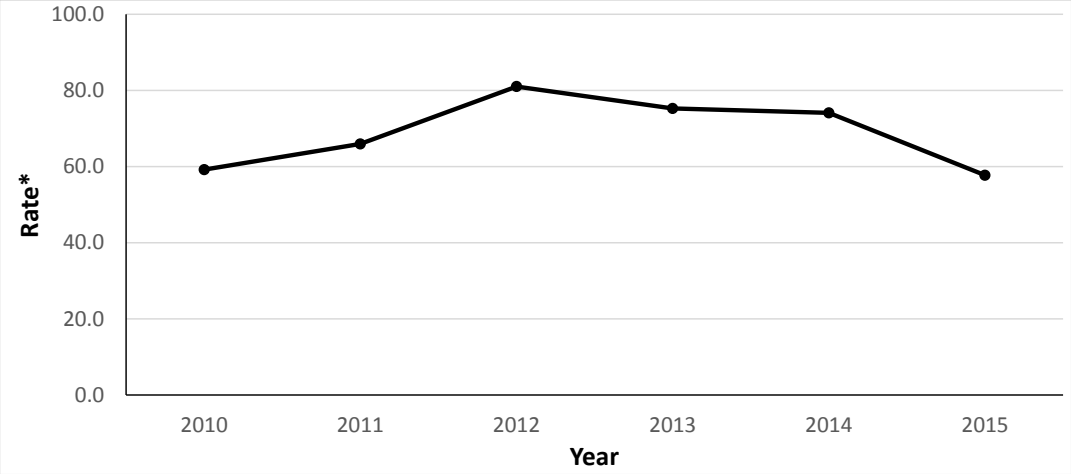
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES

Problem Statement

Excessive alcohol use is the most common cause of CLD. Other causes (e.g. acetaminophen use) are less common. CLD can develop over many years, in some cases 20-30 years, and data on hospitalizations can provide information on CLD risk at an earlier time point in the disease's development than AR-CLD mortality. However CLD hospitalizations are not limited to alcohol-related conditions, and include all hospital stays where the primary diagnosis was determined to be CLD. Additionally, CLD hospitalizations measure number of hospital stays rather than individuals diagnosed with CLD (i.e. a person can be hospitalized more than once). The rate of CLD hospitalizations in 2015 (57.7 hospitalizations per 100,000) was 2.5% lower than that of 2010 (59.2 hospitalizations per 100,000). Women are at lower risk than men. Women who identify as Asian or Pacific Islander have the lowest rates whereas men who identify as American Indian have the highest rates.

Chart 1: Chronic Liver Disease Hospital Discharge Rates*, New Mexico, 2010-2015



* Rates per 100,000

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

Table 1: CLD Hospital Discharges and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Hospital Discharges				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	17	739	83	839	8.9	336.5	251.3	210.0
	Asian/Pacific Islander	0	16	2	18	0.0	36.0	31.4	22.7
	Black	0	27	4	31	0.0	40.7	38.3	26.0
	Hispanic	25	1,440	388	1,853	2.4	121.1	176.3	86.1
	White	15	967	312	1,294	2.9	86.0	72.6	54.9
	Total	68	3,413	871	4,352	3.7	129.1	124.5	84.2
Female	American Indian	4	509	143	656	2.1	210.5	298.1	147.9
	Asian/Pacific Islander	0	9	3	12	0.0	16.1	28.6	12.0
	Black	1	20	3	24	2.4	42.4	27.6	26.4
	Hispanic	27	867	342	1,236	2.7	71.9	126.0	54.3
	White	12	701	322	1,035	2.5	61.5	64.4	41.0
	Total	46	2,261	871	3,178	2.6	84.0	103.6	57.7
Total	American Indian	21	1,248	226	1,495	5.5	270.4	279.0	177.9
	Asian/Pacific Islander	0	25	5	30	0.0	24.9	29.6	16.7
	Black	1	47	7	55	1.1	41.4	32.8	26.1
	Hispanic	52	2,307	730	3,089	2.5	96.3	148.6	69.8
	White	27	1,668	634	2,329	2.7	73.7	68.2	47.9
	Total	114	5,676	1,742	7,532	3.2	106.4	113.1	70.8

* Age-specific rates (e.g., Ages 0-24) are per 100,000; all-ages rate is per 100,000, age-adjusted to the 2000 US standard population.
Race-Ethnicity or Sex was missing for 532 visits.

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

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Problem Statement (continued)

The number of hospitalizations for CLD can be used as a measure of the impact of CLD on the medical system and the need for care. From 2011 to 2015, there were 7,532 hospitalizations reported by non-federal facilities. This equates to approximately four hospitalizations for CLD every day in New Mexico.

For 2011-2015, Mckinley County had the highest rate of CLD hospitalizations (131.3 hospitalizations per 100,000 population), followed by Socorro (114.1 hospitalizations per 100,000 population), Cibola (111.1 hospitalizations per 100,000 population), and Rio Arriba (106.1 hospitalizations per 100,000 population). Harding County had the lowest rate (11.3 hospitalizations per 100,000 population).

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

Table 2: Chronic Liver Disease Hospital Discharges and Rates* by County, New Mexico, 2011-2015

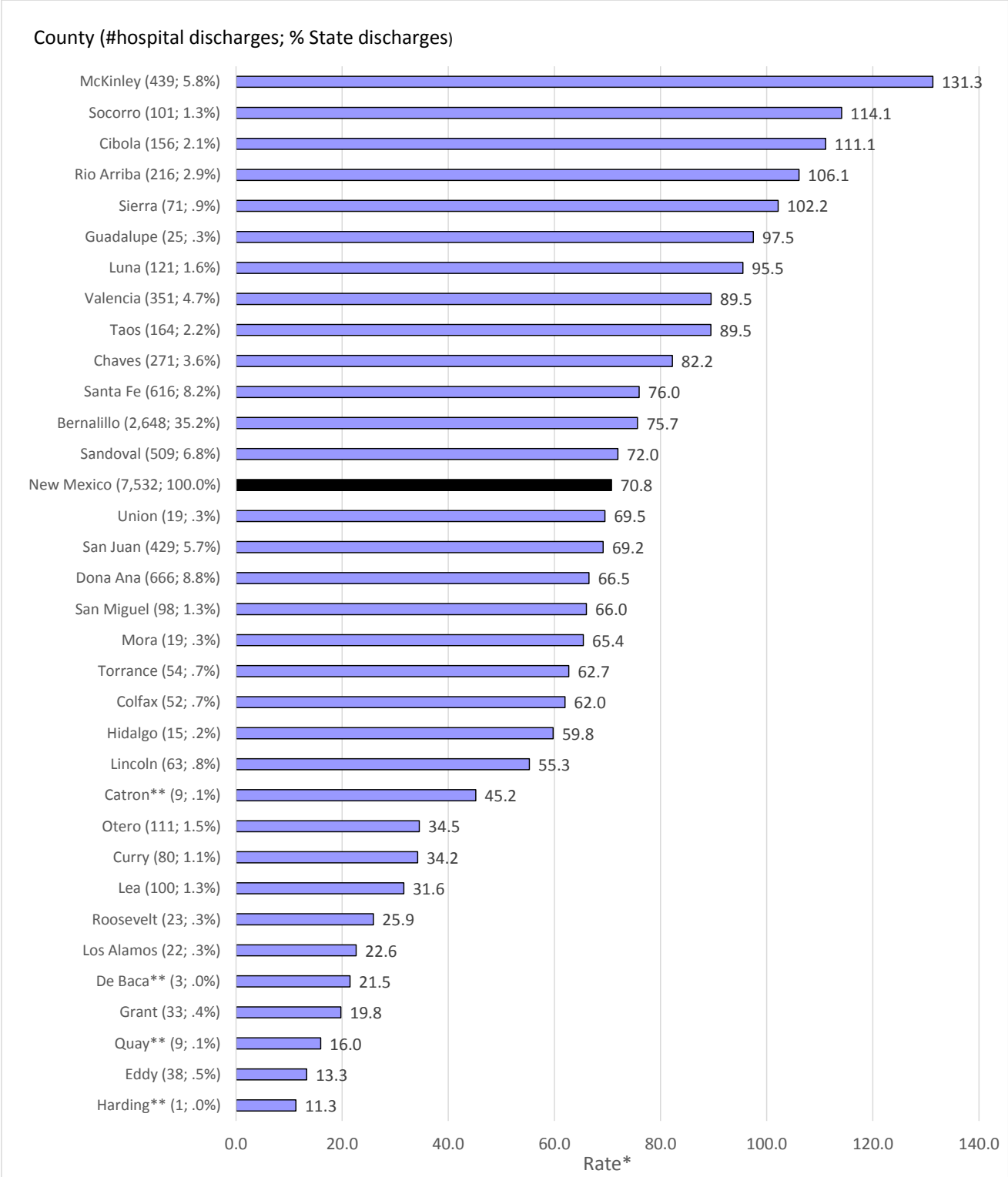
	Hospital Discharges						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	326	15	20	1,159	1,013	2,648	235.0	15.5	20.7	78.3	61.3	75.7
Catron	0	0	0	4	5	9	0.0	0.0	.	106.0	32.9	45.2
Chaves	3	0	1	94	72	271	107.8	0.0	18.5	67.6	45.2	82.2
Cibola	89	2	0	24	27	156	179.1	255.0	0.0	48.0	76.6	111.1
Colfax	0	0	0	38	14	52	0.0	0.0	0.0	105.6	36.2	62.0
Curry	1	0	3	51	20	80	66.3	0.0	21.2	66.7	14.8	34.2
De Baca	0	0	0	2	1	3	0.0	0.0	0.0	36.1	17.6	21.5
Dona Ana	7	0	3	371	230	666	87.7	0.0	16.9	62.4	66.2	66.5
Eddy	0	0	0	11	11	38	0.0	0.0	0.0	10.0	6.5	13.3
Grant	0	0	0	12	18	33	0.0	0.0	0.0	15.5	21.2	19.8
Guadalupe	0	0	0	17	6	25	0.0	0.0	0.0	89.6	113.6	97.5
Harding	0	0	0	1	0	1	.	.	.	26.5	0.0	11.3
Hidalgo	0	0	0	7	7	15	.	0.0	.	54.0	58.0	59.8
Lea	0	0	1	41	54	100	0.0	0.0	9.2	29.1	36.8	31.6
Lincoln	3	1	2	17	37	63	122.6	194.9	267.7	56.7	46.9	55.3
Los Alamos	0	0	0	3	19	22	0.0	0.0	0.0	23.8	25.5	22.6
Luna	0	0	2	71	32	121	0.0	0.0	153.1	102.4	68.7	95.5
McKinley	312	4	3	49	24	439	128.4	100.6	107.7	116.9	58.1	131.3
Mora	0	0	0	16	2	19	0.0	0.0	.	68.4	43.8	65.4
Otero	34	2	0	43	19	111	176.3	38.6	0.0	43.0	9.3	34.5
Quay	0	0	0	7	2	9	0.0	0.0	0.0	33.9	6.3	16.0
Rio Arriba	65	0	0	125	16	216	245.3	0.0	0.0	88.1	50.2	106.1
Roosevelt	0	0	0	12	11	23	0.0	0.0	0.0	36.0	19.7	25.9
Sandoval	257	0	0	40	121	509	279.6	7.6	45.4	58.4	35.1	72.0
San Juan	0	0	1	84	10	429	122.5	0.0	0.0	40.7	41.3	69.2
San Miguel	206	1	7	131	131	98	0.0	0.0	63.3	74.6	35.2	66.0
Santa Fe	42	3	5	344	192	616	226.3	24.6	64.4	94.5	47.4	76.0
Sierra	1	0	4	18	45	71	120.5	0.0	1,152.1	112.6	77.3	102.2
Socorro	45	0	1	28	20	101	553.7	0.0	99.2	65.6	52.5	114.1
Taos	30	0	0	85	35	164	303.8	0.0	0.0	87.4	47.4	89.5
Torrance	0	0	0	17	35	54	0.0	0.0	0.0	55.7	69.4	62.7
Union	0	0	0	14	5	19	0.0	.	0.0	147.0	28.5	69.5
Valencia	74	2	2	153	96	351	561.1	79.5	39.1	73.4	59.8	89.5
New Mexico	1,495	30	55	3,089	2,330	7,532	177.9	16.7	26.1	69.8	47.9	70.8

* All rates are per 100,000, age-adjusted to the 2000 US standard population. County of Residence was missing for 533 visits.

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

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Chart 2: Chronic Liver Disease Hospital Discharges and Rates* by County, New Mexico, 2011-2015

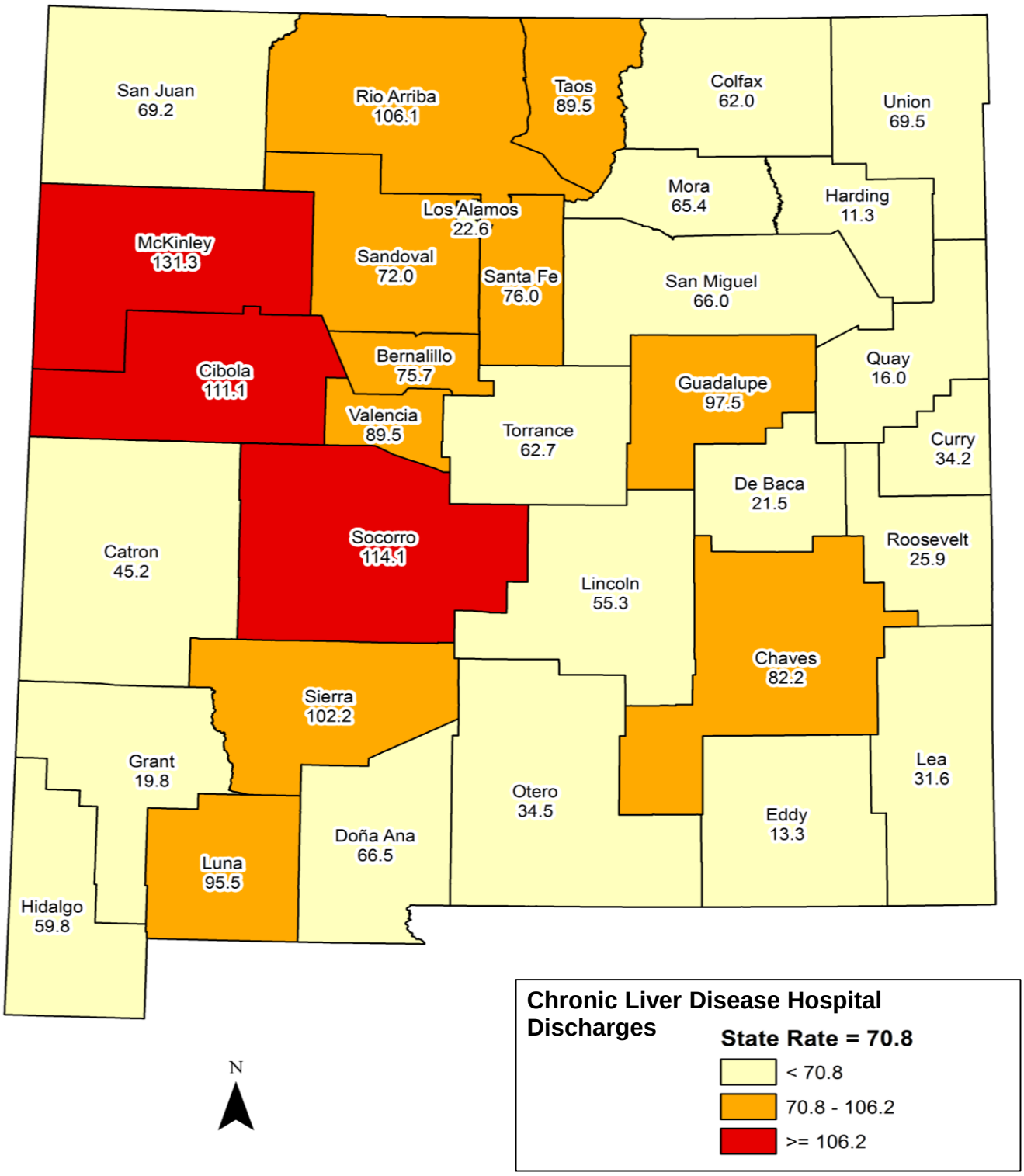


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

CHRONIC LIVER DISEASE (CLD) HOSPITAL DISCHARGES (continued)

Chart 3: Chronic Liver Disease Hospital Discharges Rates* by County, New Mexico, 2011-2015



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

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

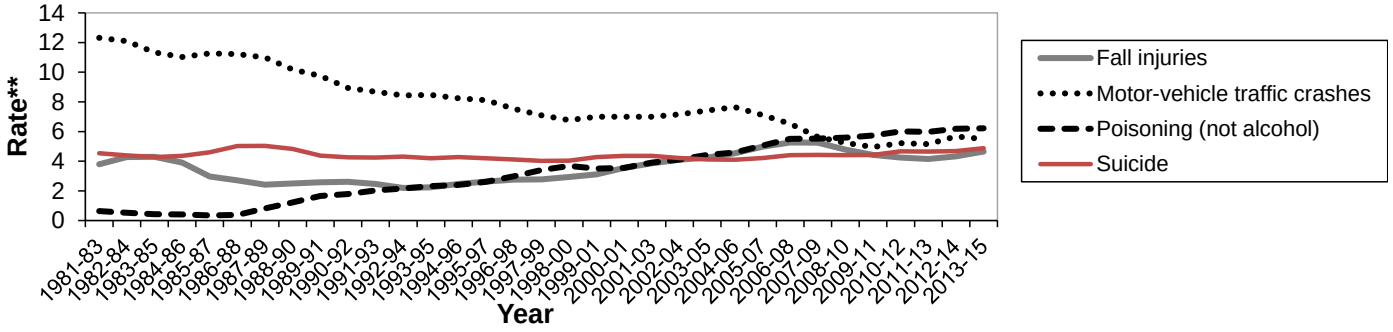
ALCOHOL-RELATED INJURY DEATH

Problem Statement

Binge drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) is a high-risk behavior associated with numerous injury outcomes, including motor vehicle fatalities, homicide, and suicide. Since 1990, New Mexico's death rate for alcohol-related (AR) injury has consistently been among the highest in the nation, ranging from 1.4 to 1.8 times the national rate. While NM's alcohol-impaired motor vehicle crash fatality rates have declined almost 60% during this period, death rates from other AR injuries have increased. Chart 1 shows the substantial increase in AR fall injury and AR poisoning death rates since the early 90s; the AR fall death rate peaked in 2007-09 and has declined since, while AR poisoning has continued to rise. These increases have more than offset the decline in AR motor vehicle crash deaths, as well as a slight increase in AR suicide death rate, to drive an overall 29% increase in New Mexico's AR injury death during the period 1990-2015. During the period 2008-2015, AR poisoning deaths replaced AR motor vehicle crash deaths as the leading cause of alcohol-related injury death in New Mexico.

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

Chart 1: Top 3 Leading Causes of Alcohol-Related Injury Death, New Mexico, 1981-2015



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

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

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

Table 1: Alcohol-Related Injury Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	48	283	28	359	25.1	129.1	83.3	87.4
	Asian/Pacific Islander	1	9	2	11	3.7	19.5	27.9	15.9
	Black	7	32	4	43	14.7	48.1	33.6	34.2
	Hispanic	158	600	92	850	15.1	50.4	41.7	37.6
	White	63	461	223	747	12.1	40.9	51.9	32.8
	Total	278	1,397	352	2,027	15.1	52.8	50.3	40.3
Female	American Indian	20	70	13	104	10.5	29.0	28.0	22.5
	Asian/Pacific Islander	0	2	1	3	0.0	3.0	8.3	3.4
	Black	1	6	2	9	3.0	12.6	18.0	10.1
	Hispanic	47	198	84	330	4.6	16.4	31.1	14.3
	White	20	205	211	437	4.3	18.0	42.2	16.1
	Total	89	484	312	885	5.1	18.0	37.1	16.0
Total	American Indian	68	354	41	463	17.8	76.6	50.5	52.9
	Asian/Pacific Islander	1	10	3	14	2.8	10.3	15.7	8.6
	Black	8	38	5	52	9.3	33.4	25.7	23.9
	Hispanic	206	798	176	1,180	9.9	33.3	35.8	25.9
	White	84	666	434	1,184	8.4	29.4	46.7	24.4
	Total	368	1,880	664	2,912	10.2	35.2	43.1	28.0

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

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

ALCOHOL-RELATED INJURY DEATH (continued)

Problem Statement (continued)

Table 1 shows that males are more at risk of AR injury death than females. Male rates are two to four times higher than female rates, across race/ethnic categories. American Indian males had the highest risk, with a rate more than three times the state rate and more than twice the White male rate. Hispanic males are also at risk, with a rate of 13.6% (1.1 times) higher than the rate for White males.

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

Table 2: Alcohol-Related Injury Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

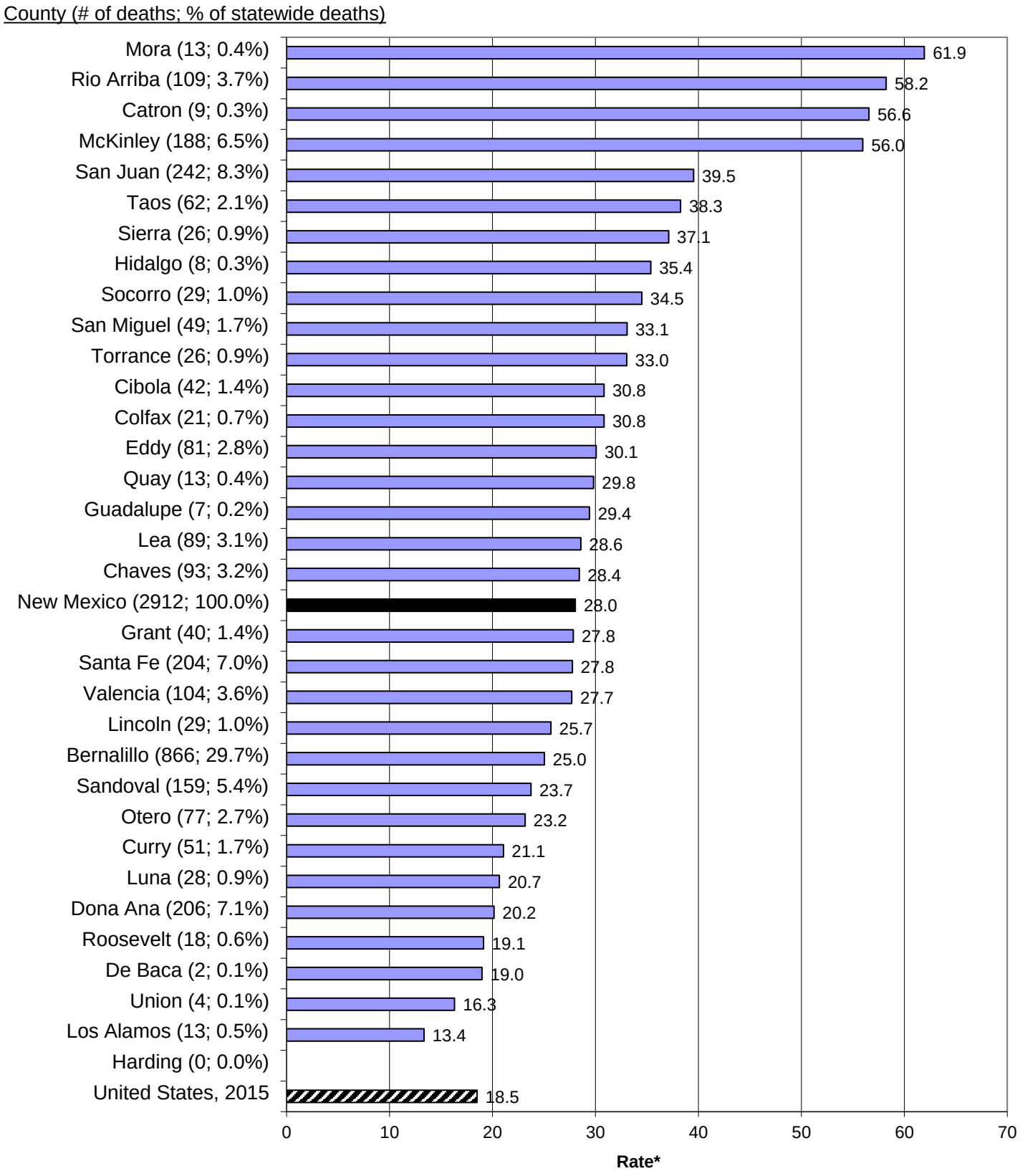
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	42	8	26	394	386	866	29.1	9.2	26.2	25.9	23.2	25.0
Catron	0	0	0	2	7	9	0.0	0	0.0	68.9	52.9	56.6
Chaves	1	0	2	45	45	93	30.0	0.0	31.3	27.7	27.4	28.4
Cibola	20	0	0	12	10	42	40.7	0.0	0.0	23.0	28.6	30.8
Colfax	0	0	0	12	9	21	0.0	0.0	0.0	37.7	22.5	30.8
Curry	1	1	4	21	24	51	23.1	16.3	30.5	25.1	16.8	21.1
De Baca	0	0	0	1	2	2	0.0	0.0	0.0	23.3	14.6	19.0
Dona Ana	1	0	4	110	91	206	8.4	0.0	23.4	17.2	23.2	20.2
Eddy	0	0	1	33	46	81	0.0	0.0	31.4	28.1	31.6	30.1
Grant	0	0	0	17	23	40	0.0	0.0	0.0	25.0	31.5	27.8
Guadalupe	0	0	0	6	0	7	0.0	0.0	0.0	34.9	0.0	29.4
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	4	4	8	0.0	0	0.0	30.0	42.1	35.4
Lea	0	0	6	37	46	89	0.0	0.0	50.5	24.6	32.4	28.6
Lincoln	0	0	0	5	24	29	0.0	0.0	0.0	17.3	31.0	25.7
Los Alamos	0	0	0	1	12	13	0.0	0.0	0.0	5.4	16.3	13.4
Luna	0	0	0	8	19	28	0.0	0.0	0.0	12.1	34.2	20.7
McKinley	166	0	0	11	11	188	66.5	0.0	0.0	24.9	30.7	56.0
Mora	0	0	0	12	0	13	0.0	0.0	0.0	72.1	0.0	61.9
Otero	10	1	3	17	47	77	48.3	15.7	20.5	16.3	24.2	23.2
Quay	0	0	0	6	7	13	0.0	0.0	0.0	32.9	28.1	29.8
Rio Arriba	15	0	0	83	10	109	56.7	0.0	0.0	62.7	32.9	58.2
Roosevelt	0	0	0	6	12	18	0.0	0.0	0.0	17.8	19.9	19.1
Sandoval	37	1	1	43	74	159	47.5	4.7	7.8	18.8	20.9	23.7
San Juan	145	1	2	29	66	242	64.9	25.1	36.1	26.7	22.0	39.5
San Miguel	1	0	0	40	8	49	173.9	0.0	0.0	35.3	22.5	33.1
Santa Fe	5	1	0	111	85	204	27.7	6.0	0.0	31.0	24.0	27.8
Sierra	1	0	0	5	20	26	93.1	0.0	0.0	26.9	40.7	37.1
Socorro	8	0	0	12	9	29	88.1	0.0	0.0	30.8	19.7	34.5
Taos	5	0	0	33	23	62	61.4	0.0	0.0	36.9	39.1	38.3
Torrance	1	0	0	7	18	26	31.2	0.0	0.0	26.8	36.4	33.0
Union	0	0	0	2	3	4	0.0	0.0	0.0	15.6	17.0	16.3
Valencia	2	1	1	56	43	104	16.3	42.7	24.0	26.3	29.6	27.7
New Mexico	463	14	52	1,180	1,184	2,912	52.9	8.6	23.9	25.9	24.4	28.0

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

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

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 2: Alcohol-Related Injury Death Rates* by County, New Mexico, 2011-2015

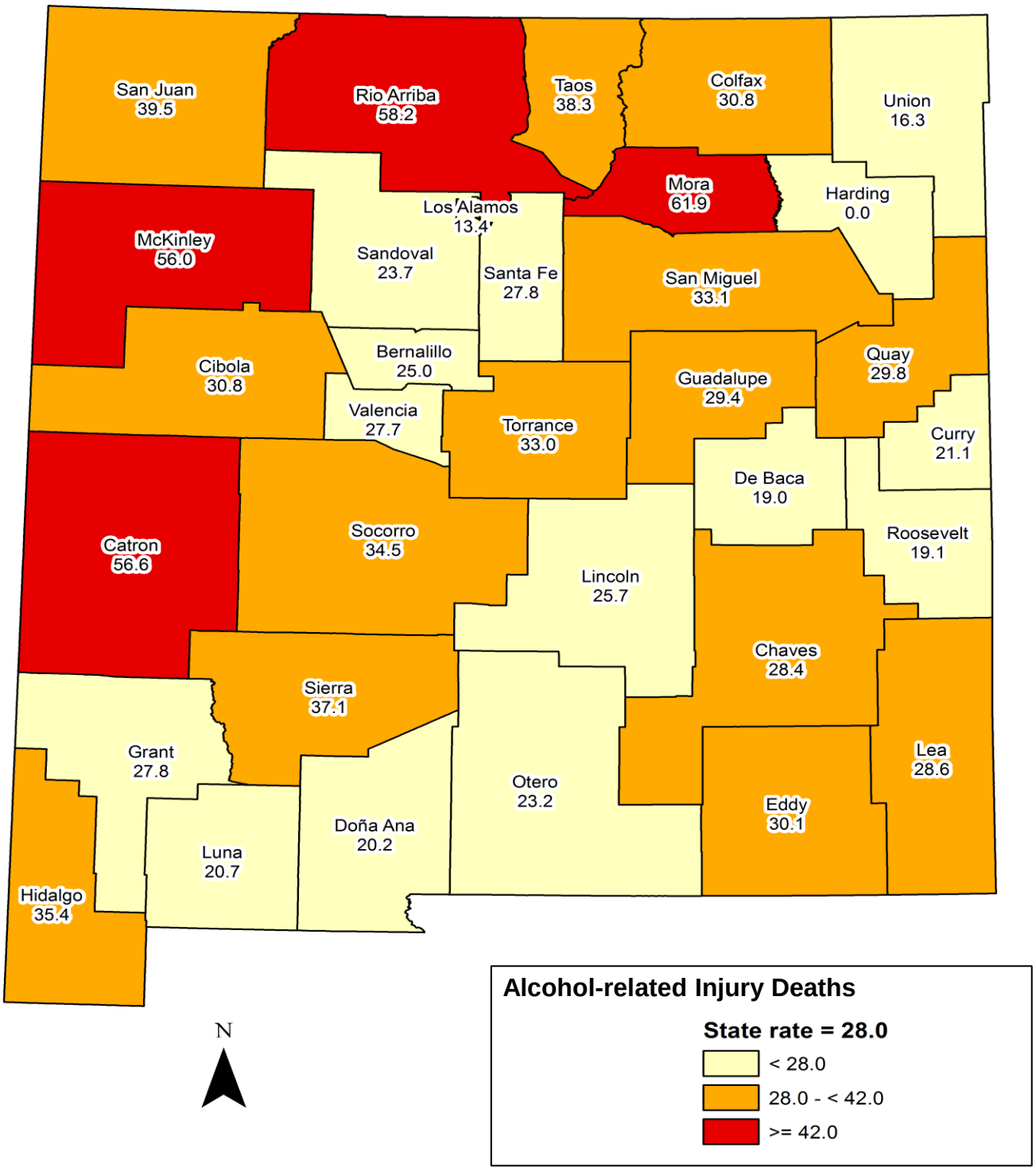


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 3: Alcohol-Related Injury Death Rates* by County, New Mexico, 2011-2015



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

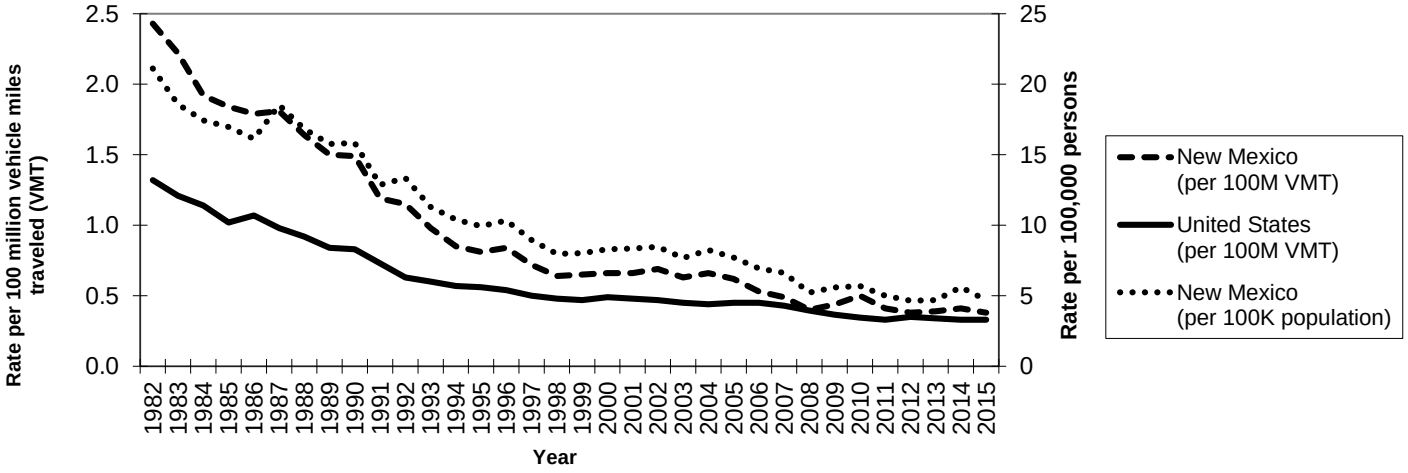
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Problem Statement

Alcohol-related motor vehicle traffic crash (AR-MVTC) death has historically been the leading cause of alcohol-related injury death. Nonetheless, AR-MVTC deaths provide a hopeful example of a substance-related health outcome that has been successfully reduced by using a public health approach, both nationally and in New Mexico. From 1982 through 2010, in response to a wide range of policy and preventive interventions, New Mexico's alcohol-impaired motor vehicle traffic crash (AI-MVTC) fatality rate declined more dramatically than the US rate, decreasing 83% and dropping New Mexico from first to tenth among states in AI-MVTC fatalities per 100,000 population. In terms of deaths per 100 million vehicle miles traveled (VMT), New Mexico's AI-MVTC fatality rate in 2015 (0.38) was one-sixth what it was in 1982 (2.4). Furthermore, a comprehensive AR-MVTC prevention campaign in place from 2005-2009 was successful in reinitiating rate decreases that had been stalled since the late 1990s. From 2004 to 2012 New Mexico's AI-MVTC fatality rate per 100 million VMT dropped 42%. Rates increased slightly in 2014 and dropped back in 2015.

Chart 1: Alcohol-Impaired MVTC Fatality Rates*, New Mexico and United States, 1982-2015



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

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

Table 1: Alcohol-Related MVTC Deaths/Rates[1,2] by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	22	78	1	101	11.6	35.4	3.6	22.5
	Asian/Pacific Islander	0	3	0	3	0.0	5.9	0.0	4.1
	Black	1	7	0	8	2.2	10.1	0.0	6.5
	Hispanic	52	129	6	187	4.9	10.9	2.5	7.7
	White	19	92	11	122	3.7	8.2	2.5	5.9
	Total	94	311	18	423	5.1	11.7	2.6	8.4
Female	American Indian	9	27	1	36	4.5	11.0	2.0	7.5
	Asian/Pacific Islander	0	0	0	0	0.0	0.0	0.0	0.0
	Black	1	1	0	2	1.2	2.5	0.0	2.0
	Hispanic	19	35	2	56	1.9	2.9	0.6	2.3
	White	6	20	3	29	1.3	1.8	0.6	1.5
	Total	34	83	6	123	2.0	3.1	0.7	2.5
Total	American Indian	31	104	2	137	8.1	22.6	2.7	14.8
	Asian/Pacific Islander	0	3	0	3	0.0	2.6	0.0	1.7
	Black	2	8	1	10	1.8	6.9	3.0	4.6
	Hispanic	71	164	7	242	3.4	6.8	1.5	5.0
	White	25	112	14	151	2.5	5.0	1.5	3.7
	Total	129	393	24	546	3.6	7.4	1.6	5.4

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

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

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

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

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 are not readily available from the system of record for motor vehicle crash death (the Fatality Analysis Reporting System [FARS] used for Charts 1-3), death certificate data for alcohol-related motor vehicle crash deaths were used here to provide the demographic descriptions in Tables 1 and 2. Because they are based on different data sources, the total and county-level rates reported in Tables 1 and 2 do not match the rates reported in Charts 1-3. The most pronounced feature of the demographic profile of AR-MVTC deaths is the elevated rates among both male and female American Indians. A finer breakdown by age (not shown) shows that rates are especially high - five to nine times the corresponding White rates - among American Indian males and females ages 25-44. Hispanic and White rates are highest in the age range 15-54, with a slight elevation of Hispanic rates (by a factor of 1.3) relative to White rates across all ages. Chart 2 shows that, among counties for which stable rates can be calculated, Sandoval, McKinley, and Rio Arriba counties have substantial AI-MVTC fatalities and high rates; other counties have high rates but fewer deaths. Table 2 shows that McKinley and San Juan counties 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) and the American Indian rate.

Table 2: Alcohol-Related MVTC Deaths and Rates*[1,2] by Race/Ethnicity and County, New Mexico, 2011-2015

	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	13	1	3	69	35	121	8.0	1.3	2.6	4.2	2.4	3.5
Catron	0	0	0	0	2	2	0.0	0.0	0.0	0.0	16.8	17.2
Chaves	0	0	0	12	6	19	0.0	0.0	0.0	6.8	4.4	5.9
Cibola	8	0	0	4	0	12	17.1	0.0	0.0	6.6	0.0	9.4
Colfax	0	0	0	1	2	4	0.0	0.0	0.0	3.5	7.4	6.0
Curry	0	0	2	7	4	12	0.0	0.0	9.9	6.5	2.7	4.7
De Baca	0	0	0	0	1	1	0.0	0.0	0.0	0.0	4.6	7.1
Dona Ana	0	0	2	26	6	34	0.0	0.0	10.8	3.8	1.9	3.4
Eddy	0	0	1	11	12	24	0.0	0.0	31.4	8.3	9.5	9.2
Grant	0	0	0	2	1	3	0.0	0.0	0.0	2.6	0.6	2.2
Guadalupe	0	0	0	2	0	2	0.0	0.0	0.0	13.6	0.0	11.9
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	0	0	0	0.0	0	0.0	0.0	0.0	0.0
Lea	0	0	1	17	13	31	0.0	0.0	11.2	9.7	10.1	9.8
Lincoln	0	0	0	0	5	5	0.0	0.0	0.0	0.0	7.1	4.6
Los Alamos	0	0	0	0	1	1	0.0	0.0	0.0	0.0	2.1	1.8
Luna	0	0	0	2	1	3	0.0	0.0	0.0	2.3	1.0	2.3
McKinley	51	0	0	2	3	56	19.3	0.0	0.0	6.3	11.1	16.5
Mora	0	0	0	4	0	5	0.0	0.0	0.0	27.7	0.0	24.8
Otero	4	0	1	3	9	18	17.7	0.0	8.7	3.1	5.3	5.4
Quay	0	0	0	1	1	3	0.0	0.0	0.0	7.7	5.6	6.7
Rio Arriba	3	0	0	14	2	18	13.4	0.0	0.0	10.5	6.1	10.4
Roosevelt	0	0	0	2	2	5	0.0	0.0	0.0	4.8	4.6	4.9
Sandoval	7	0	0	7	8	22	8.4	0.0	0.0	2.7	2.6	3.5
San Juan	42	0	0	7	12	60	17.3	0.0	0.0	6.0	4.3	9.8
San Miguel	0	0	0	7	2	10	0.0	0.0	0.0	6.8	6.6	7.2
Santa Fe	1	0	0	14	10	26	3.8	0.0	0.0	3.9	3.2	3.7
Sierra	0	0	0	1	2	3	0.0	0.0	0.0	3.9	5.7	4.9
Socorro	4	0	0	2	1	6	40.4	0.0	0.0	5.4	1.9	8.7
Taos	2	0	0	6	3	11	18.2	0.0	0.0	7.6	7.1	7.5
Torrance	0	0	0	2	3	5	0.0	0.0	0.0	6.7	5.8	6.6
Union	0	0	0	1	1	1	0.0	0.0	0.0	5.9	3.8	5.5
Valencia	1	0	0	14	6	21	5.1	0.0	0.0	6.1	5.3	5.7
New Mexico	137	3	10	242	151	546	14.8	1.7	4.6	5.0	3.7	5.4

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

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

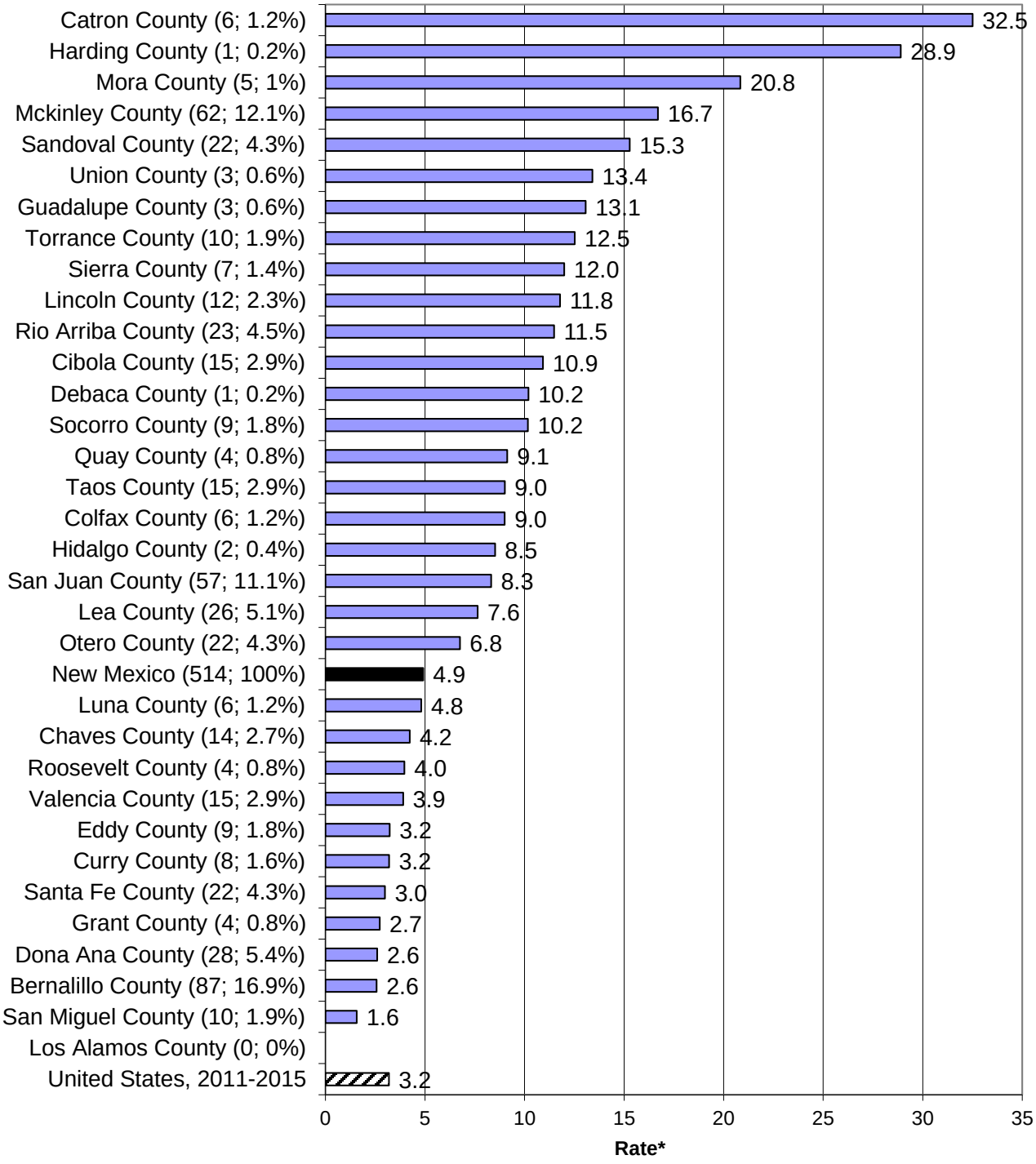
[2] See footnote 2 for Table 1

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

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Chart 2: Alcohol-Impaired MVTC Fatality Rates*,[1,2] by County, New Mexico, 2011-2015

County (# of deaths; % of statewide deaths)



* All rates are crude per 100,000 population

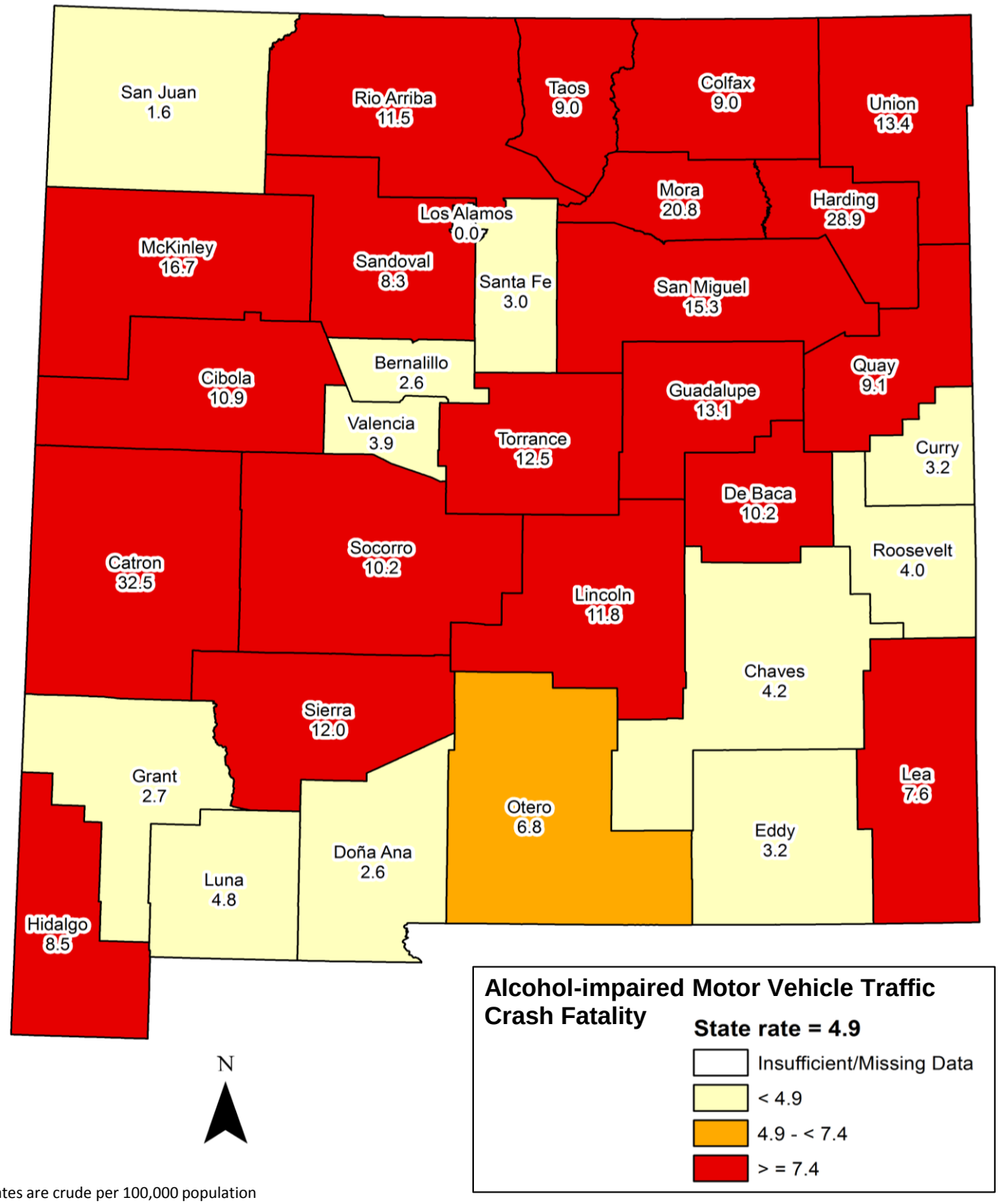
[1] Alcohol-impaired MVTC deaths are from FARS (highest driver BAC >=0.08); NM population from GPS, US population from NCHS

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

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

ALCOHOL-RELATED MOTOR VEHICLE TRAFFIC CRASH (MVTC) DEATH

Chart 3: Alcohol-Impaired MVTC Fatality Rates[1,2] by County, New Mexico, 2011-2015



* All rates are crude per 100,000 population

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

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

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

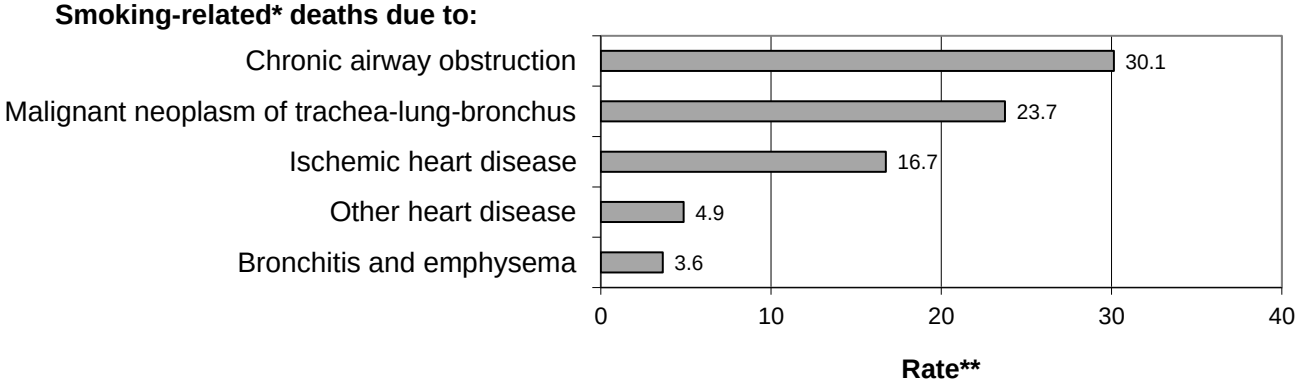
SMOKING-RELATED DEATH

Problem Statement

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

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

Chart 1: Leading Causes of Smoking-Related Death, New Mexico, 2011-2015



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

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

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

Table 1: Smoking-Related Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	0	98	151	248	0.0	44.4	455.8	90.9
	Asian/Pacific Islander	0	21	14	35	0.0	47.0	224.0	62.3
	Black	0	54	83	137	0.0	81.1	794.4	150.1
	Hispanic	0	623	1,407	2,030	0.0	52.4	639.5	115.5
	White	0	1,116	3,461	4,577	0.0	99.2	805.1	145.7
	Total	0	1,934	5,132	7,067	0.0	73.1	733.5	133.1
Female	American Indian	0	46	82	128	0.0	19.1	170.2	32.9
	Asian/Pacific Islander	0	10	22	32	0.0	18.4	207.1	38.5
	Black	0	23	35	58	0.0	49.4	321.3	60.7
	Hispanic	0	270	869	1,139	0.0	22.3	320.3	52.1
	White	0	629	2,550	3,179	0.0	55.1	509.9	82.1
	Total	0	982	3,564	4,546	0.0	36.5	423.9	68.4
Total	American Indian	0	144	232	376	0.0	31.2	286.6	56.1
	Asian/Pacific Islander	0	31	36	67	0.0	31.1	213.5	47.9
	Black	0	77	118	195	0.0	68.0	553.3	104.4
	Hispanic	0	892	2,276	3,169	0.0	37.2	463.2	80.2
	White	0	1,745	6,010	7,755	0.0	77.0	646.3	110.5
	Total	0	2,917	8,697	11,613	0.0	54.7	564.5	97.1

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

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

SMOKING-RELATED DEATH (continued)

Problem Statement (continued)

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

Table 2 and Chart 2 show that the counties with the highest rates are Sierra, Luna, Lea, Quay, and Curry. 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, Sierra, Union, and Curry counties; and, a substantial burden of smoking-related death among Hispanics in several other counties (e.g., Bernalillo, Dona Ana, and Santa Fe). The high rates of smoking-related death among Blacks in Bernalillo, Curry, Dona Ana, Lea, Otero, and Sandoval counties are also notable. The smoking-related death rates among the American Indian and Asian/Pacific Islander populations are relatively low.

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

Table 2: Smoking-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

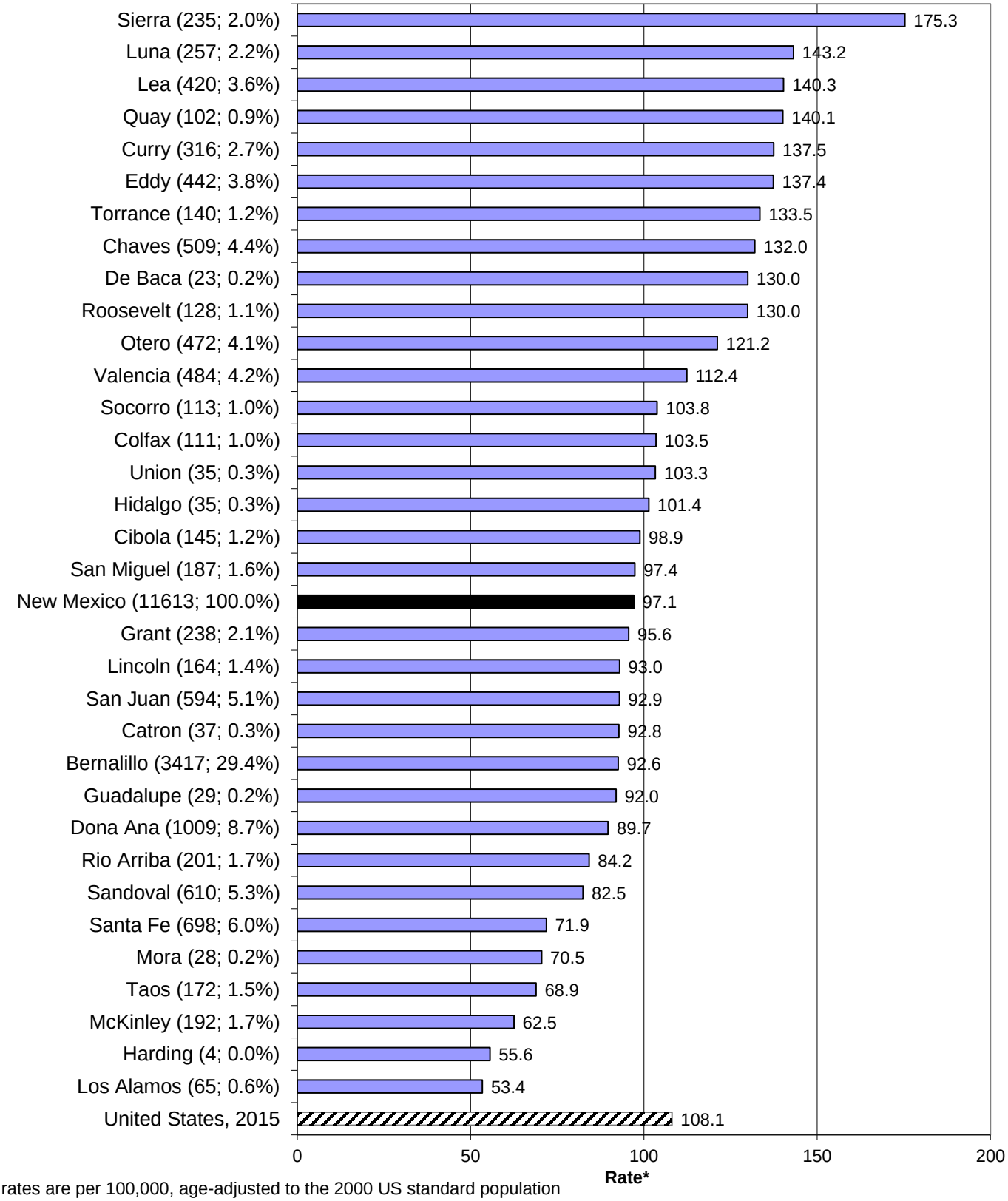
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	54	35	89	991	2,216	3,417	68.3	46.3	107.4	81.0	98.9	92.6
Catron	1	0	0	4	32	37	125.7	0.0	0.0	64.4	93.4	92.8
Chaves	3	1	6	98	401	509	110.9	36.4	85.8	85.2	158.7	132.0
Cibola	28	0	0	36	80	145	54.3	0.0	0.0	80.6	161.3	98.9
Colfax	1	0	0	40	70	111	74.5	0.0	0.0	105.4	96.5	103.5
Curry	1	3	17	57	238	316	76.5	141.5	166.0	109.7	146.0	137.5
De Baca	0	0	0	3	20	23	0.0	0.0	0.0	65.3	162.0	130.0
Dona Ana	3	3	14	368	619	1,009	58.8	41.4	101.3	68.2	113.1	89.7
Eddy	0	3	3	75	359	442	0.0	140.8	78.7	81.9	165.5	137.4
Grant	1	0	1	75	161	238	48.3	0.0	110.3	83.1	103.7	95.6
Guadalupe	0	0	0	17	11	29	0.0	0.0	0.0	71.1	179.5	92.0
Harding	0	0	0	3	2	4	0.0	0.0	0.0	91.4	24.3	55.6
Hidalgo	0	0	0	11	24	35	0.0	0.0	0.0	72.3	127.7	101.4
Lea	2	0	18	72	327	420	58.6	0.0	151.4	83.3	166.8	140.3
Lincoln	2	0	0	23	140	164	141.9	0.0	0.0	75.6	96.7	93.0
Los Alamos	0	1	1	5	58	65	0.0	59.8	46.8	33.8	55.5	53.4
Luna	2	1	2	55	196	257	121.1	50.9	212.3	83.3	194.0	143.2
McKinley	107	0	1	29	55	192	52.7	0.0	30.8	69.0	96.7	62.5
Mora	0	0	0	22	6	28	0.0	0.0	0.0	76.4	48.6	70.5
Otero	13	4	11	67	376	472	101.5	79.5	102.6	77.8	138.6	121.2
Quay	1	1	0	26	74	102	222.9	121.3	0.0	123.8	148.2	140.1
Rio Arriba	16	0	0	137	49	201	68.4	0.0	0.0	84.2	90.7	84.2
Roosevelt	1	0	0	21	105	128	142.7	0.0	0.0	106.2	139.8	130.0
Sandoval	33	4	11	116	444	610	50.1	42.6	71.0	68.3	91.6	82.5
San Juan	80	3	4	65	441	594	48.7	88.4	93.6	88.7	112.4	92.9
San Miguel	0	2	1	127	55	187	0.0	155.6	58.1	96.1	98.6	97.4
Santa Fe	7	4	2	272	410	698	53.7	31.0	34.7	81.2	67.8	71.9
Sierra	1	0	1	26	206	235	89.7	0.0	138.9	117.3	191.2	175.3
Socorro	2	0	1	39	71	113	36.4	0.0	292.1	84.5	127.2	103.8
Taos	5	0	1	92	73	172	48.3	0.0	63.3	76.1	62.8	68.9
Torrance	3	0	2	32	103	140	156.7	0.0	142.6	108.5	144.5	133.5
Union	0	0	0	10	25	35	0.0	0.0	0.0	113.4	101.9	103.3
Valencia	9	0	8	154	310	484	78.9	0.0	160.9	80.9	140.8	112.4
New Mexico	376	67	195	3,169	7,755	11,613	56.1	47.9	104.4	80.2	110.5	97.1

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

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

SMOKING-RELATED DEATH (continued)

Chart 2: Smoking-Related Death Rates* by County, New Mexico, 2011-2015

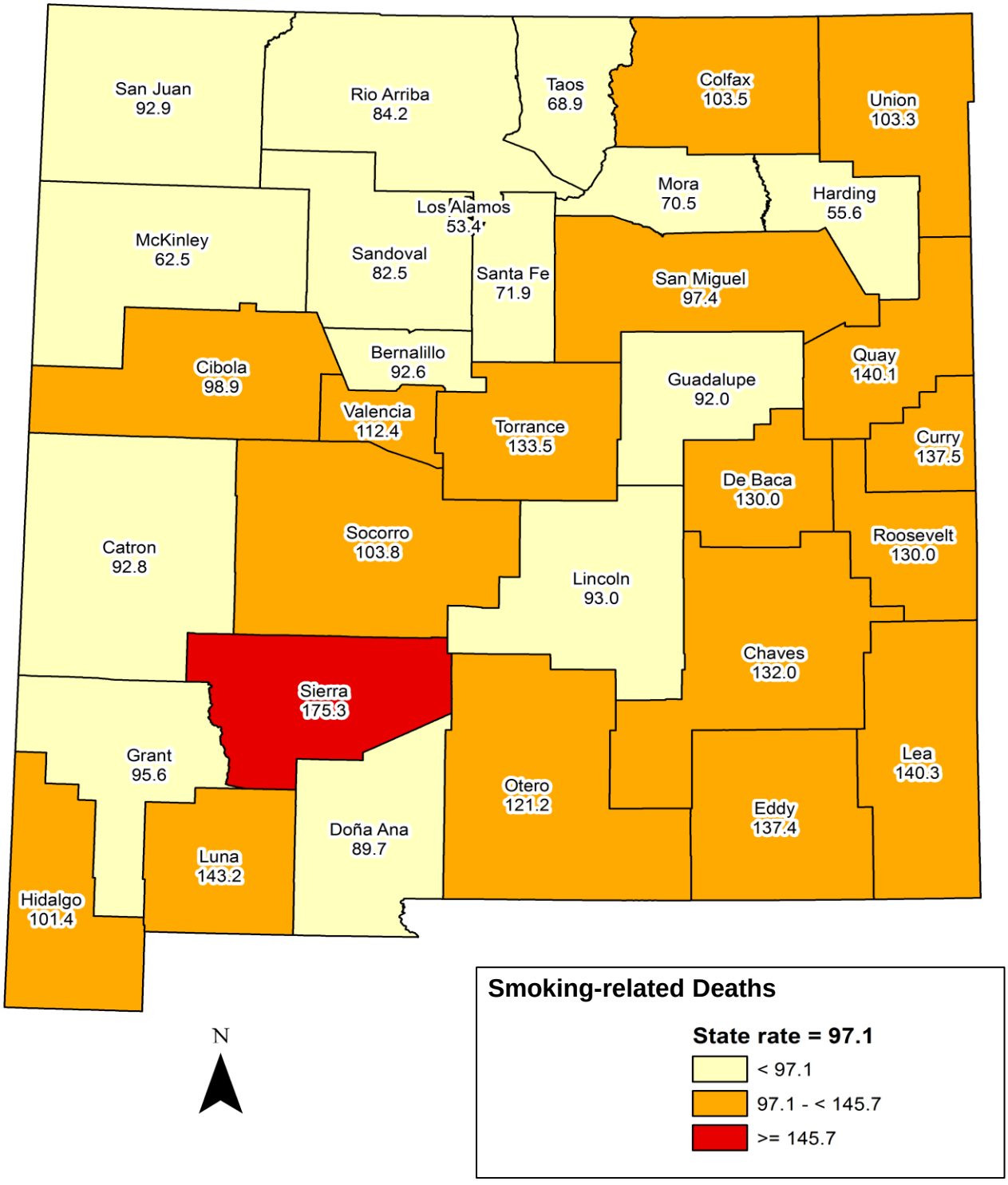


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

SMOKING-RELATED DEATH (continued)

Chart 3: Smoking-Related Death Rates* by County, New Mexico, 2011-2015



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

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

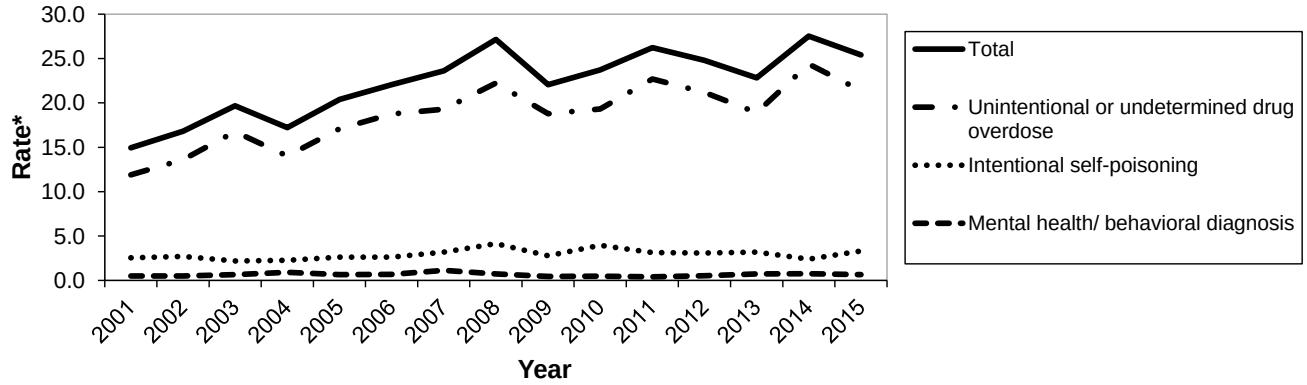
DRUG OVERDOSE DEATH

Problem Statement

In 2015, New Mexico had the eighth highest total drug overdose death rate in the nation. Drug use can result in overdose death and is also associated with other societal problems including crime, violence, homelessness, loss of productivity, and spread of blood-borne disease such as HIV and hepatitis. Unintentional drug overdose is the largest subset of total drug overdose death, accounting for 80-85% of drug overdose deaths in New Mexico (Chart 1). The other substantial cause of drug overdose death is suicide, or intentional self-poisoning, which accounts for the remaining 10-15%. Poisoning has been the leading cause of unintentional injury in New Mexico since 2007, surpassing motor vehicle crash deaths, largely as a result of increased unintentional drug overdose deaths associated with prescription drug use.

Unintentional drug overdoses account for almost 85% of drug overdose deaths during 2011-2015. 45% of unintentional drug overdose deaths were caused by prescription drugs, while 40% were caused by illicit drugs, and 15% involved both types. Medical examiner data indicate that the most common drugs causing unintentional overdose death, for the period covered in this report, were prescription opioids (e.g., methadone, oxycodone, morphine; 47%), heroin (37%), tranquilizers/muscle relaxants (24%), methamphetamine (20%), cocaine (15%), and antidepressants (12%) (not mutually exclusive). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern. Interventions are currently being formulated, implemented, and assessed in New Mexico and in communities across the country, and may be contributing to decreases in death in the most recent data available.

Chart 1: Drug Related Death Rates* by Cause Category, New Mexico, 2001-2015



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

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

Table 1: Drug Overdose Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	6	74	0	80	3.1	33.7	0.0	19.4
	Asian/Pacific Islander	1	6	0	7	3.8	13.5	0.0	7.5
	Black	2	28	1	31	4.1	42.2	9.6	23.9
	Hispanic	87	721	15	823	8.3	60.6	6.8	35.9
	White	43	464	33	540	8.2	41.2	7.7	26.1
	Total	139	1,310	53	1,502	7.6	49.5	7.6	30.2
Female	American Indian	4	44	1	49	2.1	18.2	2.1	10.6
	Asian/Pacific Islander	0	3	0	3	0.0	5.4	0.0	2.7
	Black	2	10	0	12	4.8	21.2	0.0	12.8
	Hispanic	39	358	15	412	3.8	29.7	5.5	17.8
	White	19	430	54	503	4.0	37.7	10.8	23.2
	Total	64	852	71	987	3.7	31.7	8.4	19.3
Total	American Indian	10	118	1	129	2.6	25.6	1.2	14.8
	Asian/Pacific Islander	1	9	0	10	1.9	9.0	0.0	5.1
	Black	4	38	1	43	4.5	33.5	4.7	19.2
	Hispanic	126	1,079	30	1,235	6.1	45.0	6.1	26.8
	White	62	894	87	1,043	6.2	39.5	9.4	24.7
	Total	203	2,162	124	2,489	5.7	40.5	8.0	24.7

* 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-GPS population files; SAES

DRUG OVERDOSE DEATH (continued)

Problem Statement (continued)

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

Rio Arriba County had the highest total drug overdose death rate (85.8 deaths per 100,000) and unintentional drug overdose death rate (77.8 deaths per 100,000; Table 3) among all New Mexico counties during 2011-2015. However, the problem of drug overdose is by no means limited to Rio Arriba County. As expected, Bernalillo County had the largest number of unintentional drug overdose deaths (Table 3). According to Chart 2, close to half of New Mexico counties had total drug overdose death rates one and a half times higher than the US rate (16.3).

The death rate from prescription drugs exceeded the statewide death rate from illicit drugs in more than half (19 of 33) of the counties (Table 3).

Table 2: Drug Overdose Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

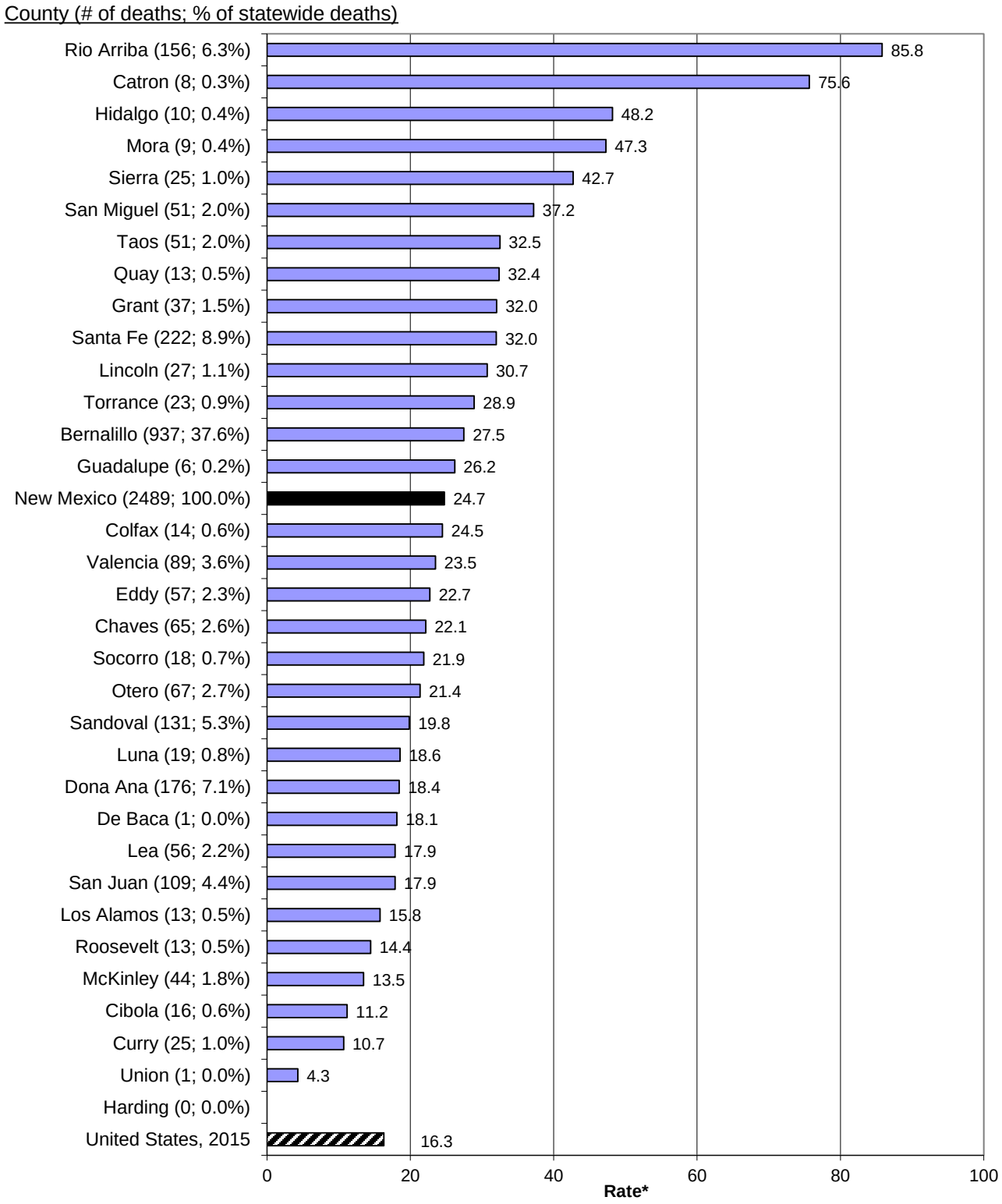
	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	31	8	22	483	381	937	20.0	7.4	21.3	30.5	25.7	27.5
Catron	0	0	0	2	6	8	0.0	0	0.0	86.0	75.6	75.6
Chaves	1	1	3	28	32	65	34.5	39.8	52.0	18.7	24.3	22.1
Cibola	2	0	0	6	8	16	4.6	0.0	0.0	11.6	23.2	11.2
Colfax	0	0	0	9	5	14	0.0	0.0	0.0	32.3	16.1	24.5
Curry	1	0	1	10	13	25	41.1	0.0	6.1	11.4	11.2	10.7
De Baca	0	0	0	1	0	1	0.0	0.0	0.0	46.5	0.0	18.1
Dona Ana	0	0	3	91	79	176	0.0	0.0	15.5	14.4	27.5	18.4
Eddy	0	0	0	18	39	57	0.0	0.0	0.0	15.3	31.0	22.7
Grant	0	0	0	17	20	37	0.0	0.0	0.0	29.6	38.3	32.0
Guadalupe	0	0	0	6	0	6	0.0	0.0	0.0	34.9	0.0	26.2
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	1	2	6	10	0.0	0	1,196.7	19.0	76.6	48.2
Lea	0	0	6	12	38	56	0.0	0.0	42.0	7.3	29.2	17.9
Lincoln	1	0	0	6	20	27	50.7	0.0	0.0	21.1	36.2	30.7
Los Alamos	0	0	0	1	12	13	0.0	0.0	0.0	8.2	20.0	15.8
Luna	0	0	0	4	14	19	0.0	0.0	0.0	5.2	46.3	18.6
McKinley	27	0	1	9	7	44	11.1	0.0	41.1	21.6	19.0	13.5
Mora	0	0	0	9	0	9	0.0	0.0	0.0	55.4	0.0	47.3
Otero	4	0	2	15	45	67	20.0	0.0	20.8	15.0	25.3	21.4
Quay	0	0	0	7	6	13	0.0	0.0	0.0	40.2	30.7	32.4
Rio Arriba	10	0	1	136	9	156	35.4	0.0	105.9	104.8	34.4	85.8
Roosevelt	0	0	0	5	8	13	0.0	0.0	0.0	15.5	14.8	14.4
Sandoval	13	0	1	49	63	131	16.9	0.0	7.5	19.9	20.6	19.8
San Juan	30	0	2	17	59	109	14.0	0.0	43.8	16.5	20.6	17.9
San Miguel	0	0	0	45	6	51	0.0	0.0	0.0	42.4	19.8	37.2
Santa Fe	2	1	0	142	73	222	8.8	8.3	0.0	39.1	24.2	32.0
Sierra	1	0	0	5	19	25	100.6	0.0	0.0	24.7	55.2	42.7
Socorro	2	0	0	11	5	18	21.7	0.0	0.0	28.4	12.5	21.9
Taos	1	0	0	28	22	51	9.2	0.0	0.0	34.2	33.4	32.5
Torrance	1	0	0	11	11	23	46.0	0.0	0.0	37.8	22.3	28.9
Union	0	0	0	1	0	1	0.0	0.0	0.0	12.1	0.0	4.3
Valencia	2	0	0	49	37	89	17.6	0.0	0.0	22.8	24.2	23.5
New Mexico	129	10	43	1,235	1,043	2,489	14.8	5.1	19.2	26.8	24.7	24.7

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

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

DRUG OVERDOSE DEATH (continued)

Chart 2: Drug Overdose Death Rates* by County, New Mexico, 2011-2015

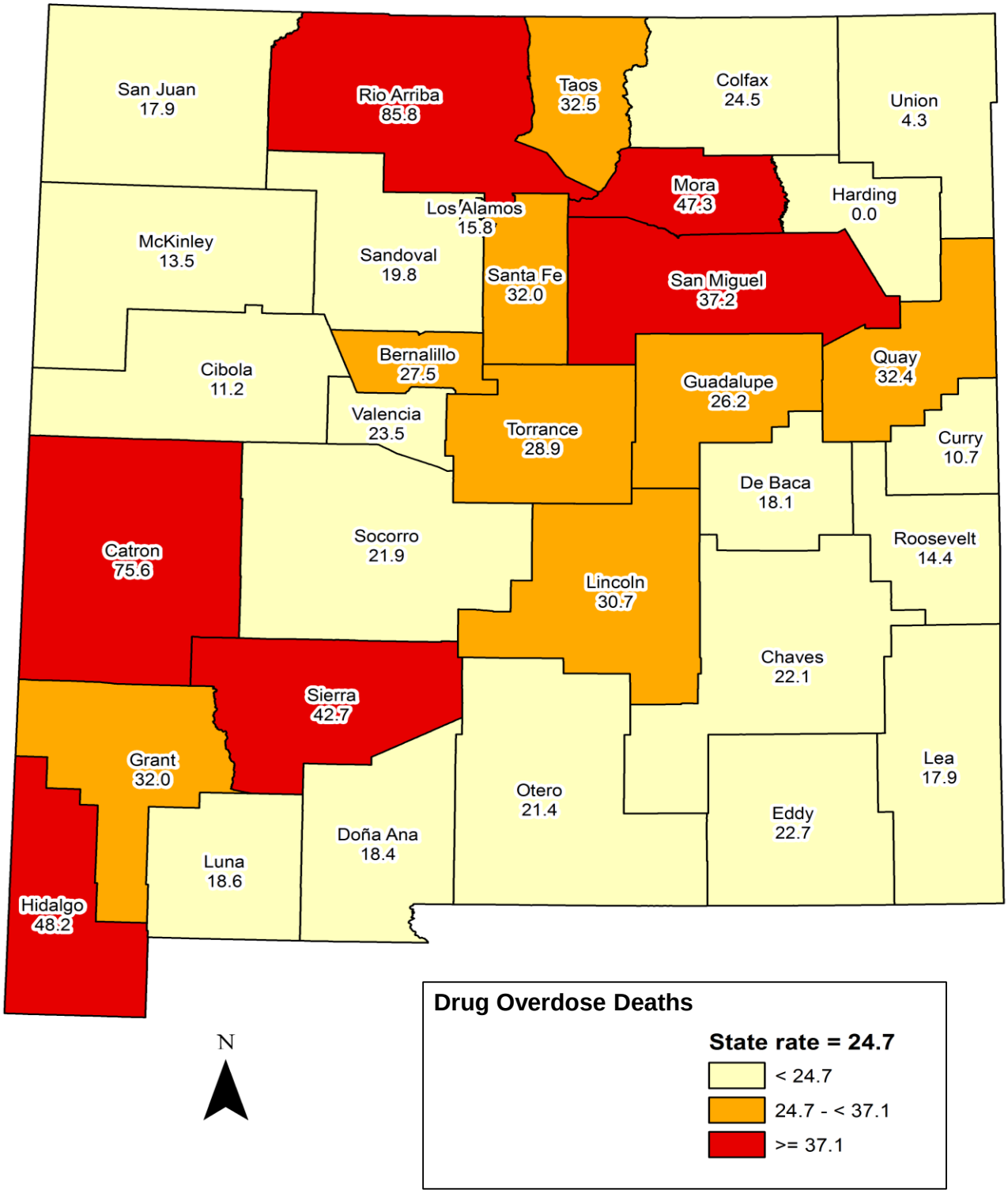


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

DRUG OVERDOSE DEATH (continued)

Chart 3: Drug Overdose Death Rates* by County, New Mexico, 2011-2015

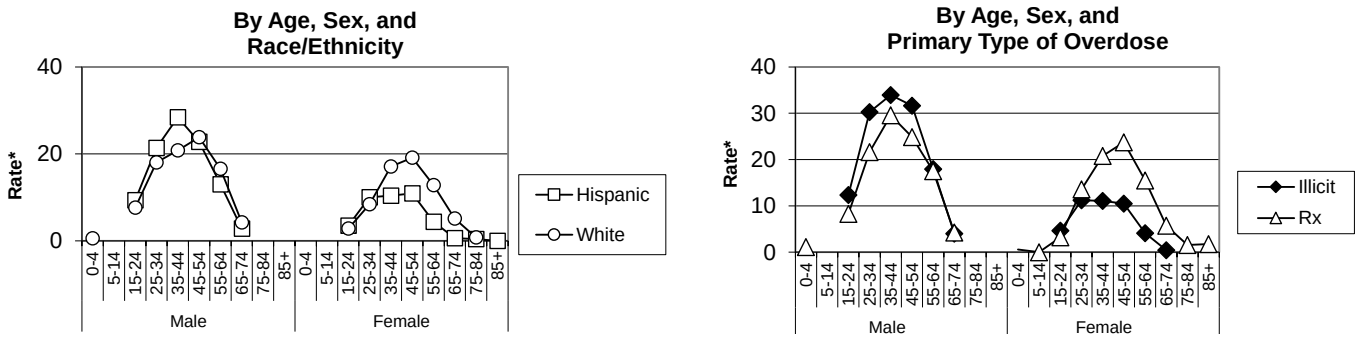


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

DRUG OVERDOSE DEATH (continued)

Chart 4: Unintentional Drug Overdose Death Rates* by Selected Characteristics, New Mexico, 2011-2015



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

Table 3: Uninintentional Drug Overdose Deaths and Rates*, New Mexico, 2011-2015

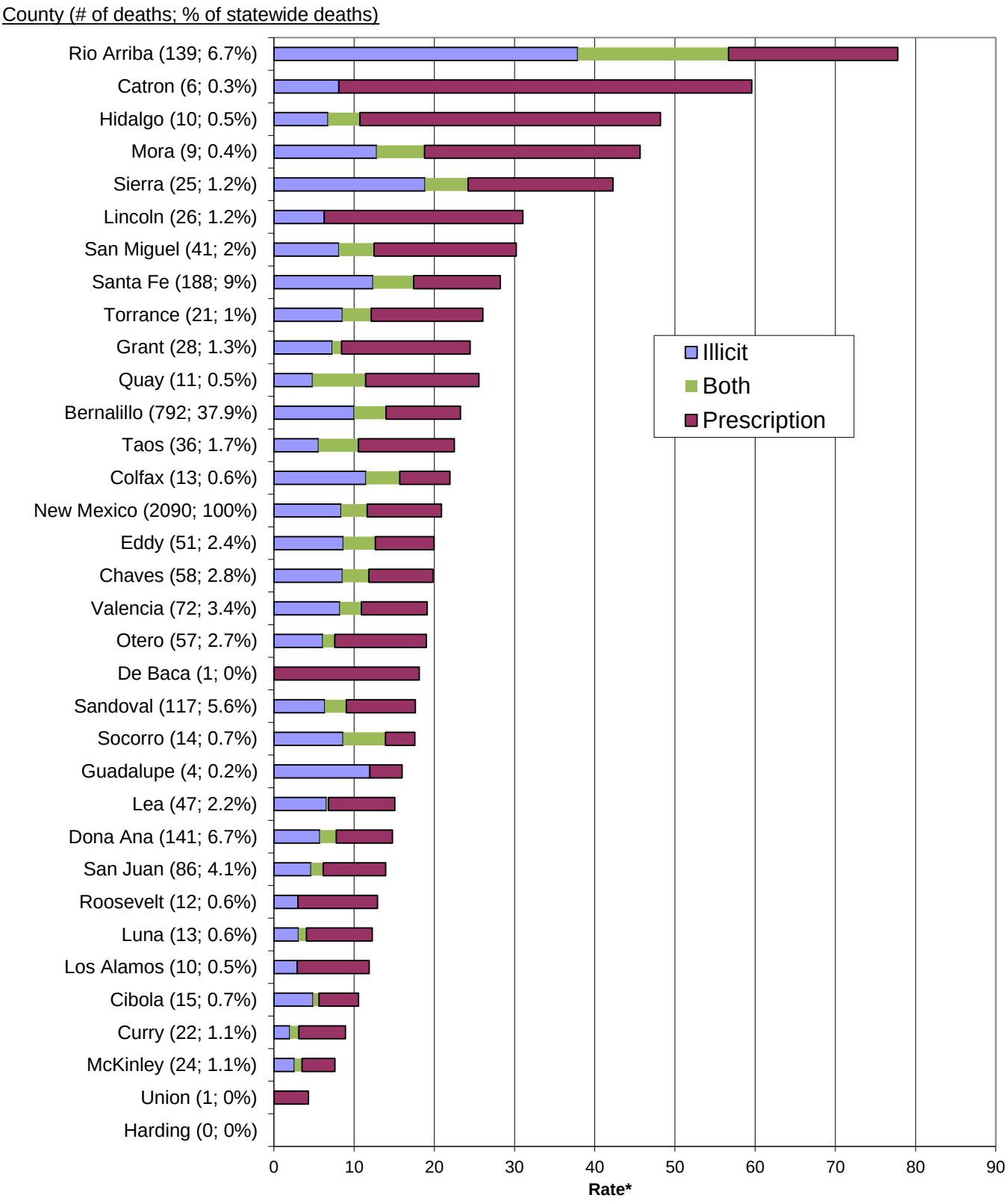
	Deaths						Rates*					
	Sex		Overdose Type			Total	Sex		Overdose Type			Total
County	Male	Female	Illicit	Rx	Both		Male	Female	Illicit	Rx	Both	
Bernalillo	522	270	339	317	135	792	31.0	15.7	10.0	9.3	4.0	23.3
Catron	3	3	2	4	0	6	43.1	79	8.1	51.5	0.0	59.6
Chaves	28	30	26	23	9	58	19.4	20.3	8.5	8.0	3.3	19.8
Cibola	11	4	7	7	1	15	15.2	5.6	4.9	4.9	0.7	10.5
Colfax	10	3	6	4	3	13	31.6	11.5	11.5	6.3	4.2	22.0
Curry	13	9	5	13	3	22	9.7	8.5	2.0	5.8	1.1	9.3
De Baca	1	0	0	1	0	1	37.4	0.0	0.0	18.1	0.0	18.1
Dona Ana	91	50	56	65	19	141	19.5	10.5	5.7	7.0	2.0	14.9
Eddy	30	21	22	19	10	51	23.0	16.7	8.7	7.3	4.0	20.0
Grant	18	10	8	18	1	28	35.2	16.5	7.3	16.0	1.2	25.6
Guadalupe	3	1	3	1	0	4	20.4	9.2	12.0	4.0	0.0	16.0
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	5	5	2	7	1	10	47.5	46	6.7	37.5	4.0	48.2
Lea	23	24	20	26	1	47	13.9	16.3	6.5	8.3	0.3	15.1
Lincoln	12	14	4	22	0	26	28.1	33.6	6.3	24.8	0.0	31.1
Los Alamos	5	5	2	8	0	10	12.9	11.1	2.9	9.0	0.0	11.9
Luna	5	8	3	9	1	13	8.6	16.1	3.1	8.2	1.0	12.3
McKinley	16	8	9	12	3	24	10.9	4.5	2.6	4.1	0.9	7.6
Mora	5	4	3	5	1	9	43.8	48.0	12.8	26.9	6.0	45.7
Otero	34	23	17	35	5	57	22.7	15.1	6.1	11.4	1.5	19.0
Quay	4	7	3	5	3	11	17.9	32.9	4.8	14.1	6.6	25.6
Rio Arriba	108	31	67	39	33	139	121.3	33.8	37.9	21.1	18.8	77.8
Roosevelt	8	4	3	9	0	12	16.6	9.2	3.0	9.9	0.0	12.9
Sandoval	75	42	39	59	17	117	24.0	12.0	6.3	8.6	2.7	18.0
San Juan	54	32	29	48	9	86	17.4	10.4	4.6	7.8	1.5	13.9
San Miguel	23	18	11	24	6	41	32.5	27.9	8.1	17.7	4.4	30.2
Santa Fe	131	57	79	76	33	188	39.5	16.8	12.3	10.8	5.1	28.2
Sierra	15	10	10	12	3	25	55.0	29.9	18.8	18.1	5.4	42.3
Socorro	9	5	7	3	4	14	21.2	13.6	8.6	3.7	5.3	17.6
Taos	23	13	7	21	8	36	31.5	13.5	5.6	12.0	5.0	22.5
Torrance	11	10	6	13	2	21	27.4	25.1	8.5	13.9	3.6	26.1
Union	1	0	0	1	0	1	7.4	0.0	0.0	4.3	0.0	4.3
Valencia	51	21	31	30	11	72	26.6	11.5	8.2	8.2	2.7	19.1
Total	1,348	742	826	936	322	2,090	27.2	14.7	8.4	9.3	3.3	21.0

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

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

DRUG OVERDOSE DEATH (continued)

Chart 5: Uninintentional Drug Overdose Death Rates* by County and Drug Type, New Mexico, 2011-2015



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

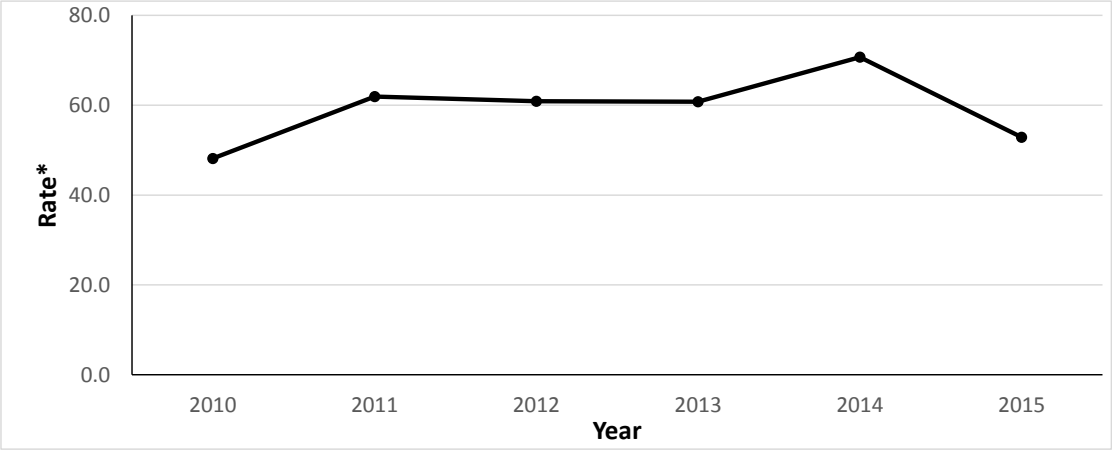
Source: OMI death files; UNM-GPS population files; SAES

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS

Problem Statement

Mortality is just one, and the most extreme, of the health outcomes associated with drug abuse. In the US, between 2005 and 2014, there has been a 99.4% increase in opioid related emergency department (ED) visits (Weiss, A.J., Eixhauser, A., Barrett, M.L., Steiner, C.A., Bailey, M.K., & O'Malley, L. [2016] Opioid-related inpatient stays and emergency department visits by State, 2009–2014. HCUP Statistical Brief #219. December 2016. Agency for Healthcare Research and Quality, Rockville, MD. http://www.hcup-us.ahrq.gov/reports/statbriefs/sb219-Opioid-Hospital-Stays-ED-Visits-by-State.pdf.). In NM, the emergency department dataset (EDD) is collected in accordance with the NM Public Health Act and New Mexico Administrative Code 7.4.3.10. Chart 1 shows that between 2010 and 2015, the rate of opioid overdose related emergency department (OOR-ED) visits increased by almost 10%.

Chart 1: Opioid Overdose Related Emergency Department Visit Rates*, New Mexico, 2011-2015



* Rates per 100,000

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

Table 1: OOR-ED Visits and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

		Emergency Department Visits				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	20	84	3	107	10.4	38.2	9.1	24.7
	Asian/Pacific Islander	6	26	2	34	22.6	58.6	31.4	42.4
	Black	13	45	1	59	26.9	67.8	9.6	46.0
	Hispanic	303	976	44	1,323	28.8	82.1	20.0	55.4
	White	316	931	117	1,364	60.6	82.8	27.2	67.9
	Total	819	2,517	191	3,527	44.5	95.2	27.3	68.7
Female	American Indian	35	75	5	115	18.4	31.0	10.4	23.9
	Asian/Pacific Islander	5	20	3	28	19.7	35.8	28.6	29.2
	Black	9	27	2	38	21.7	57.3	18.4	39.8
	Hispanic	212	549	59	820	20.8	45.5	21.7	33.8
	White	273	876	158	1,307	57.3	76.8	31.6	64.2
	Total	649	1,815	254	2,718	37.0	67.4	30.2	52.0
Total	American Indian	55	159	8	222	14.4	34.5	9.9	24.3
	Asian/Pacific Islander	11	46	5	62	21.2	45.9	29.6	35.1
	Black	22	72	3	97	24.5	63.4	14.1	43.4
	Hispanic	515	1,525	103	2,143	24.9	63.7	21	44.6
	White	589	1,807	275	2,671	59.0	79.8	29.6	66.1
	Total	1,468	4,332	445	6,245	40.9	81.2	28.9	60.3

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

**Race-Ethnicity was missing for 1,050.

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

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Problem Statement (continued)

Between 2011-2015, the rates of opioid-related overdose emergency department visits, among men, were 28% higher than rates among women (Table 1). Among both men and women, Whites had the highest rates compared to all other racial/ethnic groups. Among men, Whites are followed by Hispanics. Blacks followed Whites among women. Table 1 also shows that for both sexes, those in the 25-64 age group had the highest rate (81.2 opioid-related overdose emergency department visits per 100,000 population).

Rio Arriba, San Miguel, and Santa Fe counties had the highest rates of opioid-related overdose emergency department visits during 2011-2015 (Chart 2). Table 2 shows that in Rio Arriba (182.2 per 100,000) and Santa Fe (106.4 per 100,000) counties, the rates were driven by Whites (417.8 and 139.1 opioid-related overdose emergency department visits per 100,000; respectively) whereas in San Miguel (122.8 per 100,000) it is driven by Hispanics (130.6 opioid-related overdose emergency department visits per 100,000). Bernalillo County had the biggest percentage of opioid-related overdose emergency department visits (36.3% of the state total), followed by Santa Fe County (12.2%). It is important to note that federal facilities (e.g. Indian Health Services and Veterans Administration) are not included in these results.

Table 2: OOR-ED Visits and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

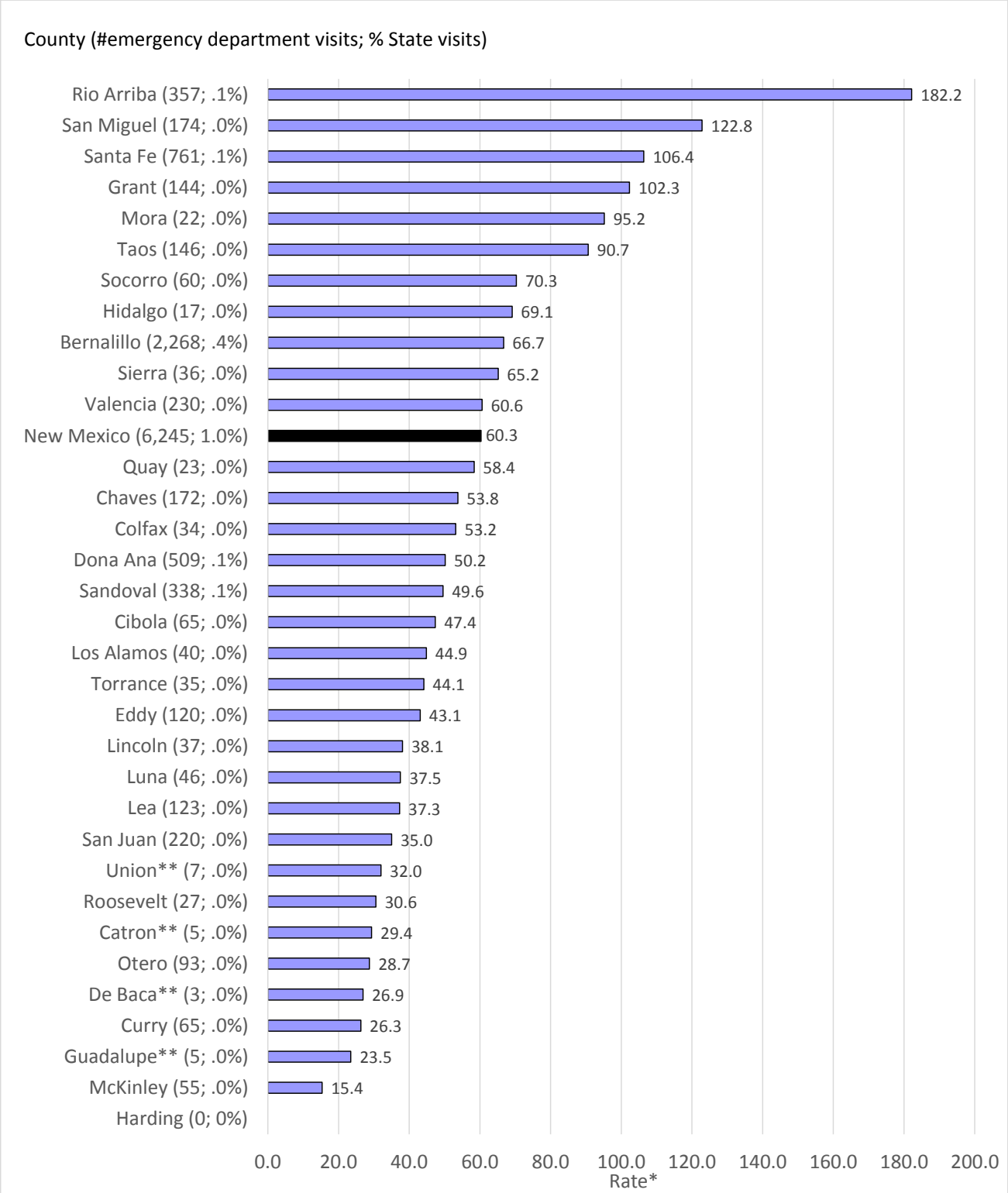
	Emergency Department Visits						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	81	43	54	617	917	2,268	54.9	44.8	52.9	37.9	68.4	66.7
Catron	0	0	0	0	5	5	0.0	0.0	0.0	0.0	38.1	29.4
Chaves	0	2	1	58	103	172	0.0	91.6	14.3	35.8	73.1	53.8
Cibola	4	2	0	40	8	65	7.2	223.2	0.0	77.3	24.5	47.4
Colfax	0	0	0	19	13	34	0.0	0.0	0.0	61.0	40.2	53.2
Curry	0	0	4	11	30	65	0.0	0.0	19.7	13.5	23.3	26.3
De Baca	0	0	0	2	1	3	0.0	0.0	0.0	58.1	7.7	26.9
Dona Ana	0	1	7	211	238	509	0.0	7.0	41.3	31.8	79.0	50.2
Eddy	0	0	1	44	70	120	0.0	0.0	26.7	35.4	49.0	43.1
Grant	0	0	2	53	88	144	0.0	0.0	175.6	78.0	129.9	102.3
Guadalupe	0	0	0	4	0	5	0.0	0.0	0.0	22.9	0.0	23.5
Harding	0	0	0	0	0	0	.	.	.	0.0	0.0	0.0
Hidalgo	0	0	0	9	8	17	0.0	0.0	0.0	67.9	72.3	69.1
Lea	0	0	7	55	58	123	0.0	0.0	57.0	33.4	42.6	37.3
Lincoln	0	0	1	3	25	37	0.0	0.0	113.6	9.6	43.1	38.1
Los Alamos	0	0	0	8	26	40	0.0	0.0	0.0	54.9	39.5	44.9
Luna	0	0	0	16	27	46	0.0	0.0	0.0	20.1	67.7	37.5
McKinley	12	2	1	12	17	55	4.4	81.7	15.1	24.8	43.5	15.4
Mora	0	0	0	18	4	22	0.0	0.0	0.0	91.5	208.7	95.2
Otero	8	0	2	16	55	93	49.2	0.0	18.5	14.4	32.7	28.7
Quay	0	0	0	7	8	23	0.0	0.0	0.0	39.7	45.5	58.4
Rio Arriba	10	1	1	163	91	357	35.2	92.3	92.2	116.3	417.8	182.2
Roosevelt	0	1	1	5	17	27	0.0	109.7	67.0	13.7	34.1	30.6
Sandoval	23	5	3	83	155	338	27.9	40.2	17.9	33.2	52.1	49.6
San Juan	60	0	2	43	115	220	25.3	0.0	23.1	36.4	42.5	35.0
San Miguel	0	0	0	143	28	174	0.0	0.0	0.0	130.6	108.9	122.8
Santa Fe	4	0	7	304	370	761	21.0	0.0	93.5	80.8	139.1	106.4
Sierra	2	0	0	5	26	36	241.0	0.0	0.0	32.2	67.7	65.2
Socorro	4	0	0	20	23	60	44.9	0.0	0.0	46.7	71.8	70.3
Taos	11	0	0	98	31	146	116.0	0.0	0.0	108.1	52.7	90.7
Torrance	0	2	1	7	17	35	0.0	486.6	71.8	22.4	39.2	44.1
Union	0	0	0	4	3	7	0.0	0.0	0.0	42.2	28.2	32.0
Valencia	3	3	2	62	90	230	22.0	119.3	38.0	27.8	67.7	60.6
New Mexico	222	62	97	2,143	2,671	6,245	24.3	35.1	43.4	44.6	66.1	60.3

* All rates are per 100,000, age-adjusted to the 2000 US standard population. County of Residence was missing for 8 visits.

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

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Chart 2: Opioid Overdose Related Emergency Department Visit Rates* by County, New Mexico, 2011-2015



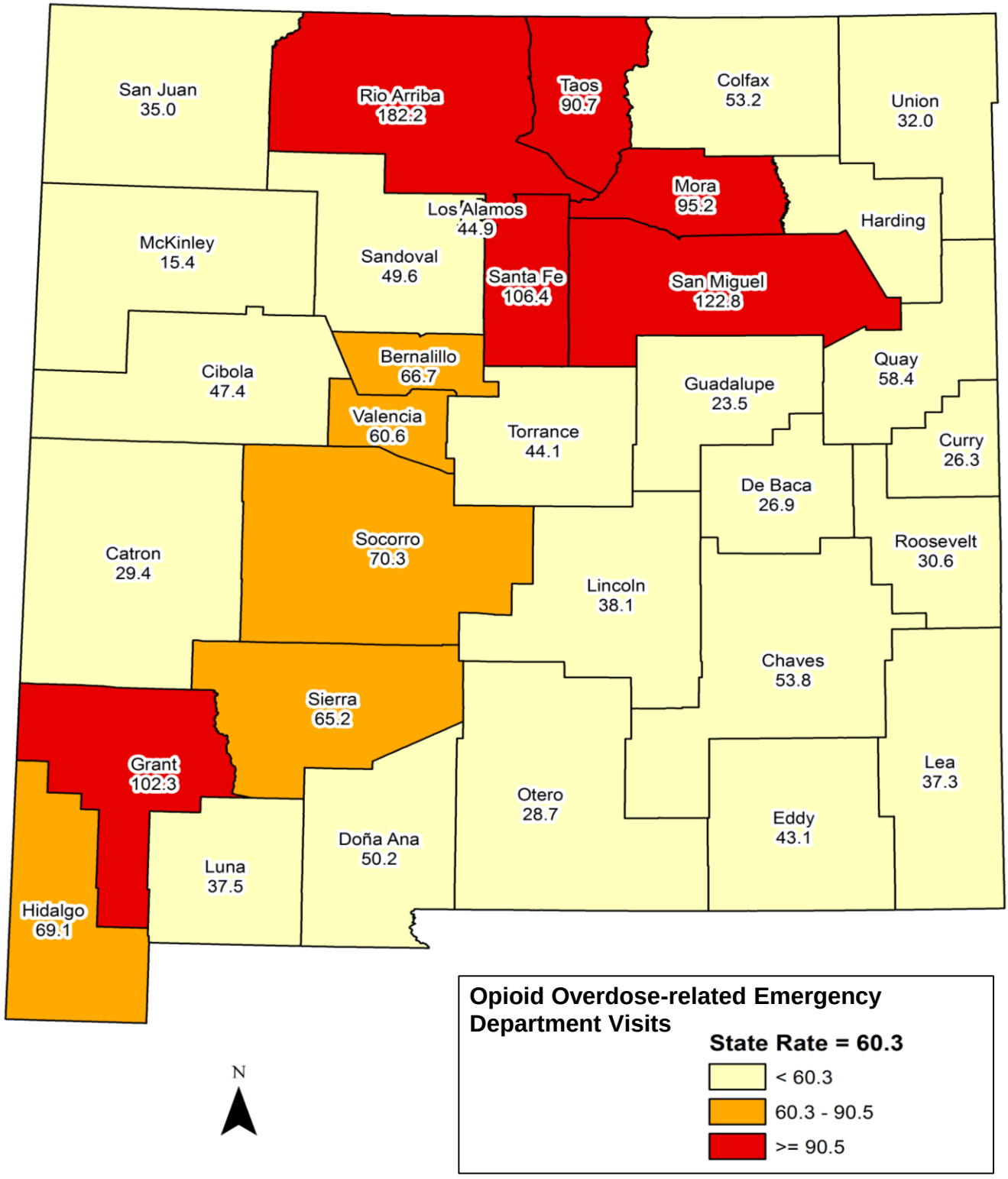
* All rates are per 100,000, age-adjusted to the 2000 US standard population

** Unstable rates

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

OPIOID OVERDOSE RELATED EMERGENCY DEPARTMENT VISITS (continued)

Chart 2: Opioid Overdose Related Emergency Department Visit Rates* by County, New Mexico, 2011-2015



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

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

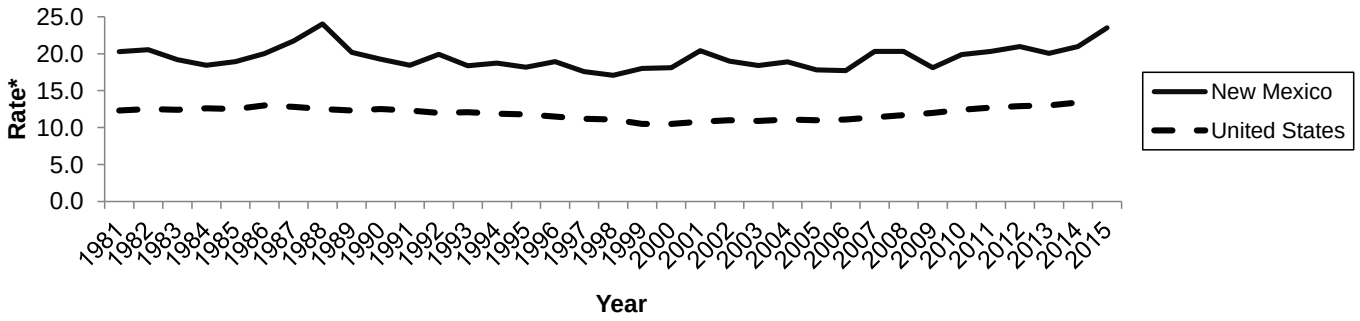
SUICIDE

Problem Statement

Suicide is a serious and persistent public health problem in New Mexico. As shown in Chart 1, over the period from 1981-2015, NM's suicide rate has consistently been 1.5 to 1.9 times the US rate. NM has ranked among the top five states for all but two of those years. While the US rate declined 15% between 1981 and 2000, it increased thereafter for an 28% increase from 2000 to 2015. The NM rate followed a similar pattern. In NM in 2015, suicide was the second leading cause of death (after unintentional injuries) for those residents under age 50 and the eighth leading cause of death overall.

Table 1 and Chart 2 show that male suicide rates were more than three times higher than female rates across all ages and race/ethnic groups. This reflects males' choice of more lethal means, i.e., firearms, when attempting suicide. American Indian males have higher suicide rates for those under age 45; White males have substantially higher rates over age 74. The vast majority (72%) of White male suicides - and an even higher proportion of Hispanic and American Indian male suicides - occur, however, before age 65. Table 2 shows that five counties (Bernalillo, Dona Ana, Santa Fe, Sandoval, and San Juan) had substantial numbers of suicides (more than 25 per year). As Charts 3 and 4 demonstrate, for the time period 2011-2015, all but eight of NM's counties had rates one and a half times higher than the comparable US rate. A number of smaller counties also had very high rates. Note that counts and rates for many counties with small numbers of suicides are unstable, suggesting wide fluctuation across time periods due to random variation (chance), and should be interpreted with caution.

Chart 1: Suicide Rates*, New Mexico and United States, 1981-2015



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

Source: NMDOH BVRHS death files and UNM-GPS population files (NM); CDC Wonder (US)

Table 1: Suicide Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015

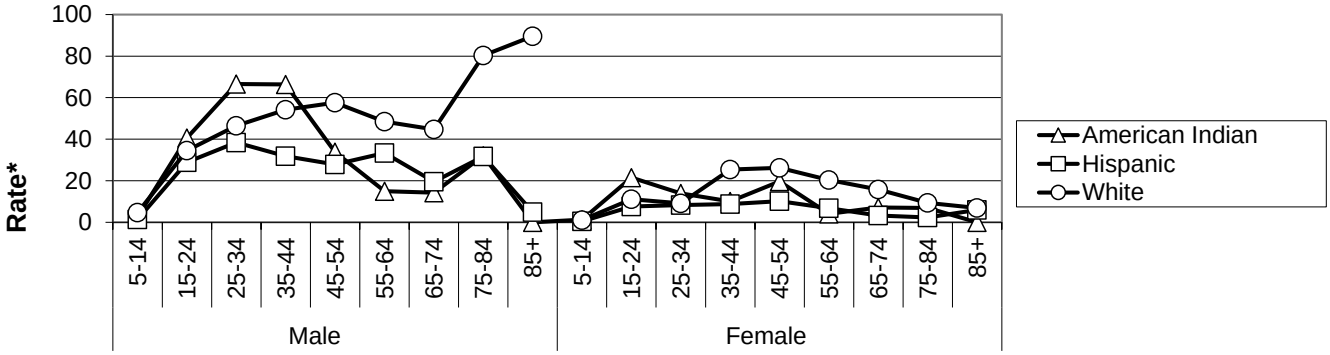
		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	34	108	6	148	17.7	49.2	18.2	34.1
	Asian/Pacific Islander	3	7	2	12	11.3	15.8	31.4	14.0
	Black	7	13	2	22	14.5	19.6	19.1	17.1
	Hispanic	125	394	48	567	11.9	33.1	21.8	24.0
	White	90	580	257	927	17.3	51.6	59.8	40.5
	Total	261	1,110	325	1,696	14.2	42.0	46.4	32.8
Female	American Indian	18	30	3	51	9.4	12.4	6.3	10.5
	Asian/Pacific Islander	2	6	1	9	7.9	10.7	9.5	9.4
	Black	0	4	0	4	0.0	8.5	0.0	5.1
	Hispanic	32	104	9	145	3.1	8.6	3.3	6.1
	White	25	235	63	323	5.2	20.6	12.6	14.0
	Total	77	380	76	533	4.4	14.1	9.0	10.0
Total	American Indian	52	138	9	199	13.6	29.9	11.1	21.8
	Asian/Pacific Islander	5	13	3	21	9.6	13.0	17.8	11.6
	Black	7	17	2	26	7.8	15.0	9.4	11.8
	Hispanic	157	498	57	712	7.6	20.8	11.6	14.9
	White	115	815	320	1,250	11.5	36.0	34.4	27.1
	Total	338	1,490	401	2,229	9.4	27.9	26.0	21.2

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

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

SUICIDE (continued)

Chart 2: Suicide Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2011-2015



* Age-specific rates per 100,000

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

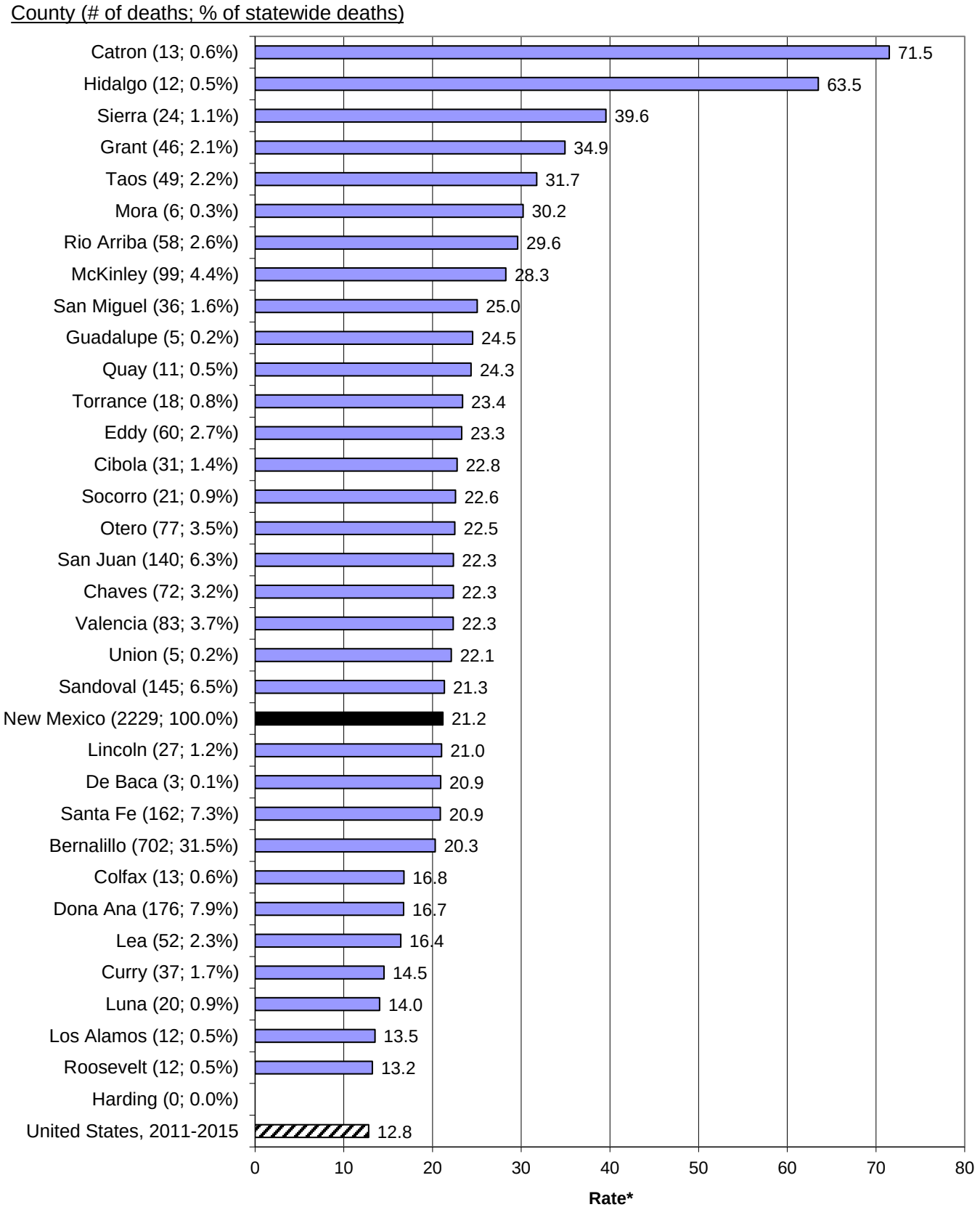
Table 2: Suicide Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2011-2015

	Deaths						Rates*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	21	10	10	239	412	702	15.2	10.1	10.3	15.1	26.1	20.3
Catron	1	0	0	3	9	13	139.9	0.0	0.0	98.8	55.9	71.5
Chaves	2	0	1	16	52	72	69.0	0.0	29.6	10.0	36.5	22.3
Cibola	8	0	0	7	15	31	14.1	0.0	0.0	14.7	46.8	22.8
Colfax	0	0	0	6	6	13	0.0	0.0	0.0	19.9	10.9	16.8
Curry	1	1	4	10	21	37	48.7	13.8	18.6	9.5	15.5	14.5
De Baca	0	0	0	0	3	3	0.0	0.0	0.0	0.0	33.2	20.9
Dona Ana	3	0	4	71	96	176	36.4	0.0	24.3	10.5	26.8	16.7
Eddy	0	0	0	23	37	60	0.0	0.0	0.0	20.8	27.5	23.3
Grant	0	0	0	13	33	46	0.0	0.0	0.0	21.0	52.8	34.9
Guadalupe	0	0	0	4	1	5	0.0	0.0	0.0	24.3	36.8	24.5
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	0	0	7	5	12	0.0	0	0.0	65.0	65.2	63.5
Lea	0	0	1	11	40	52	0.0	0.0	6.1	5.9	29.3	16.4
Lincoln	0	0	0	2	25	27	0.0	0.0	0.0	7.1	26.5	21.0
Los Alamos	0	0	0	1	11	12	0.0	0.0	0.0	6.1	16.5	13.5
Luna	0	0	0	4	15	20	0.0	0.0	0.0	4.7	28.7	14.0
McKinley	80	0	0	9	10	99	30.4	0.0	0.0	18.1	22.3	28.3
Mora	0	0	0	6	0	6	0.0	0.0	0.0	36.4	0.0	30.2
Otero	4	2	1	10	58	77	19.2	40.0	5.9	9.5	28.8	22.5
Quay	0	0	0	3	8	11	0.0	0.0	0.0	14.5	39.4	24.3
Rio Arriba	7	0	0	38	13	58	27.7	0.0	0.0	27.3	46.2	29.6
Roosevelt	0	0	0	3	9	12	0.0	0.0	0.0	8.6	16.3	13.2
Sandoval	21	1	2	42	79	145	25.2	7.3	14.2	16.2	23.5	21.3
San Juan	46	2	1	18	73	140	19.8	94.9	23.4	15.9	25.3	22.3
San Miguel	1	0	0	25	10	36	557.9	0.0	0.0	24.0	25.2	25.0
Santa Fe	0	2	1	66	90	162	0.0	15.5	13.1	17.4	24.8	20.9
Sierra	1	0	0	4	19	24	278.0	0.0	0.0	25.4	38.8	39.6
Socorro	0	0	0	7	14	21	0.0	0.0	0.0	15.9	36.6	22.6
Taos	2	0	0	21	26	49	20.9	0.0	0.0	24.4	47.8	31.7
Torrance	0	0	0	4	14	18	0.0	0.0	0.0	13.9	33.0	23.4
Union	0	0	0	1	4	5	0.0	0.0	0.0	13.5	35.6	22.1
Valencia	1	3	1	37	41	83	6.6	111.7	24.8	17.3	28.9	22.3
New Mexico	199	21	26	712	1,250	2,229	21.8	11.6	11.8	14.9	27.1	21.2

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

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

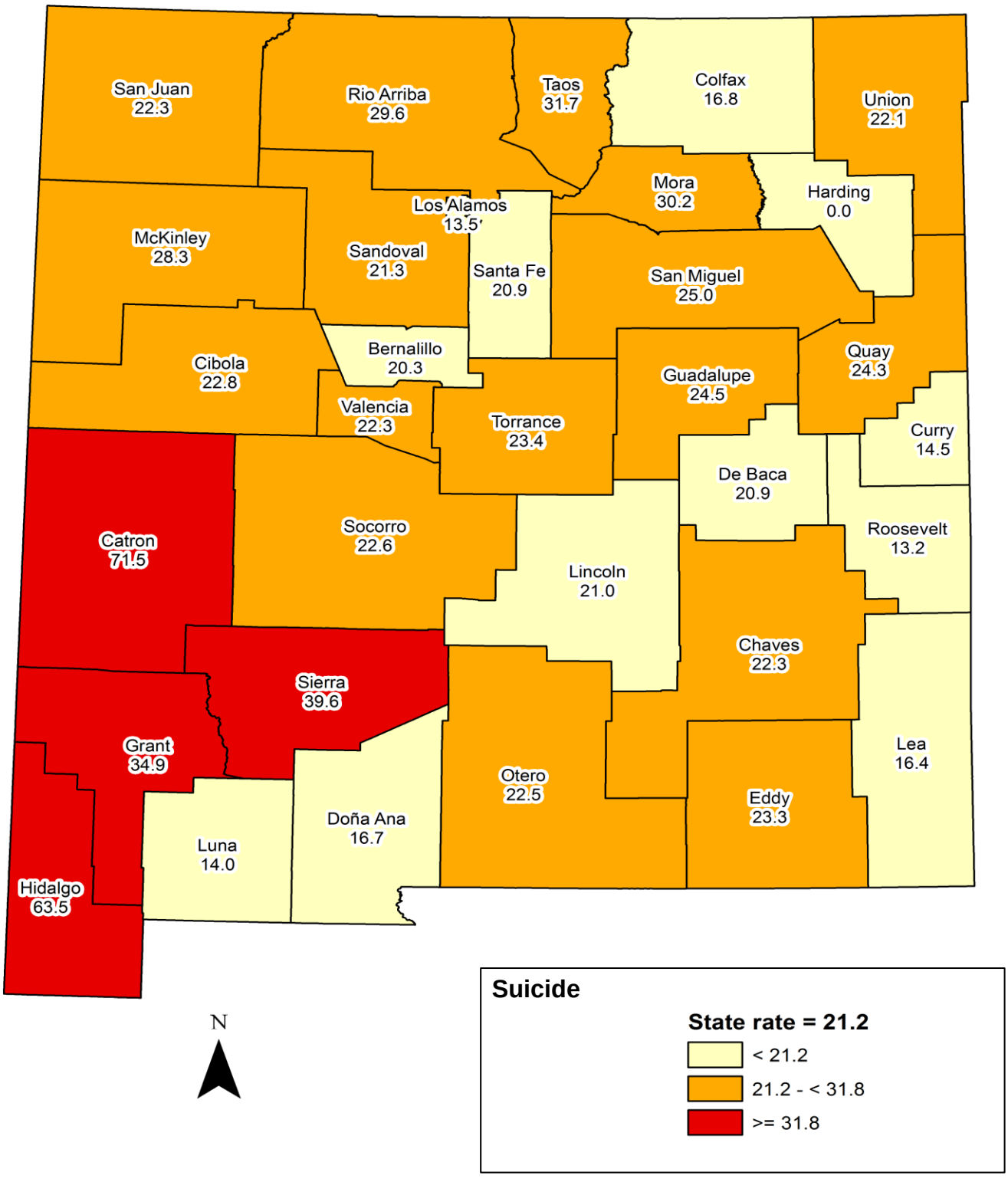
Chart 3: Suicide Rates* by County, New Mexico, 2011-2015



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

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

Chart 4: Suicide Rates* by County, New Mexico, 2011-2015



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

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

Section 2

Mental Health

ADULT MENTAL HEALTH

Problem Statement

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

Among measures that have been suggested by the CDC as potential tools for assessing population well-being and mental health is the frequency with which people experience poor mental health. This measure is based on the single 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 not a clinical diagnosis, evidence suggests that it is associated with a person's mental health status. Chart 1 shows the proportion of people with selected characteristics who experienced FMD. The proportion of the total New Mexico population that experienced FMD was about 12%. As might be expected, people in good health with higher incomes and more education were significantly less likely than the general population to report FMD. People with less education, with chronic health conditions such as obesity, diabetes, or asthma, or with lower income, were significantly more likely to report FMD. Of particular relevance regarding FMD's potential usefulness as a measure of population mental health, FMD was many times more prevalent among respondents who reported more serious psychiatric morbidity, including screening positive for alcohol dependence or abuse (33% reported FMD), ever being diagnosed with an anxiety disorder (37% reported past-month FMD), or receiving a diagnosis of current depression based on the Patient Health Questionaire (65% reported past-month FMD). Among the cohort that reported past-year suicidal ideation with no history of suicide attempt, 48% reported past-month FMD; and among the cohort at high risk for suicide that reported both past-year suicidal ideation and a prior suicide attempt, 62% reported past-month FMD. Meanwhile, almost half (46%) of FMD respondents were diagnosed with current depression (data not shown). These results suggest that this simple question, which is asked annually on the BRFSS, is a useful indicator of population mental health.

Table 1: Frequent Mental Distress (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2013-2015

		Number				Percent*			
Sex	**Race/Ethnicity**	**Ages 18-24**	**Ages 25-64**	**Ages 65+**	**All Ages**	**Ages 18-24**	**Ages 25-64**	**Ages 65+**	**All Ages***
Male	American Indian	1,087	6,501	342	8,227	9.9	14.6	5.0	13.2
	Asian/Pacific Islander	-	774	-	789	-	8.5	-	6.3
	Black	-	1,455	-	2,513	-	10.8	-	12.9
	Hispanic	5,168	30,009	5,098	40,201	8.8	12.5	11.0	11.7
	White	4,876	22,696	4,463	31,927	14.2	10.3	5.0	9.3
	Total	11,683	61,664	10,297	83,801	10.7	11.7	7.1	10.7
Female	American Indian	1,035	5,365	1,437	7,762	9.3	10.9	14.3	11.0
	Asian/Pacific Islander	-	832	-	1,310	-	7.3	-	8.6
	Black	-	1,551	219	1,701	-	16.3	9.7	11.8
	Hispanic	6,388	37,443	4,354	48,534	11.3	15.4	7.7	13.6
	White	4,815	33,867	7,961	46,162	16.7	15.2	7.7	13.0
	Total	12,300	79,468	14,215	105,717	12.2	14.8	8.1	13.0
Total	American Indian	2,120	11,940	1,934	16,002	9.6	12.7	11.4	12.1
	Asian/Pacific Islander	-	1,612	-	2,087	-	7.9	-	7.5
	Black	-	3,017	523	4,194	-	13.1	11.7	12.4
	Hispanic	11,471	67,573	9,455	88,749	10.0	14.0	9.2	12.7
	White	9,703	56,538	12,439	78,139	15.4	12.8	6.5	11.2
	Total	23,978	141,177	24,521	189,578	11.4	13.3	7.6	11.9

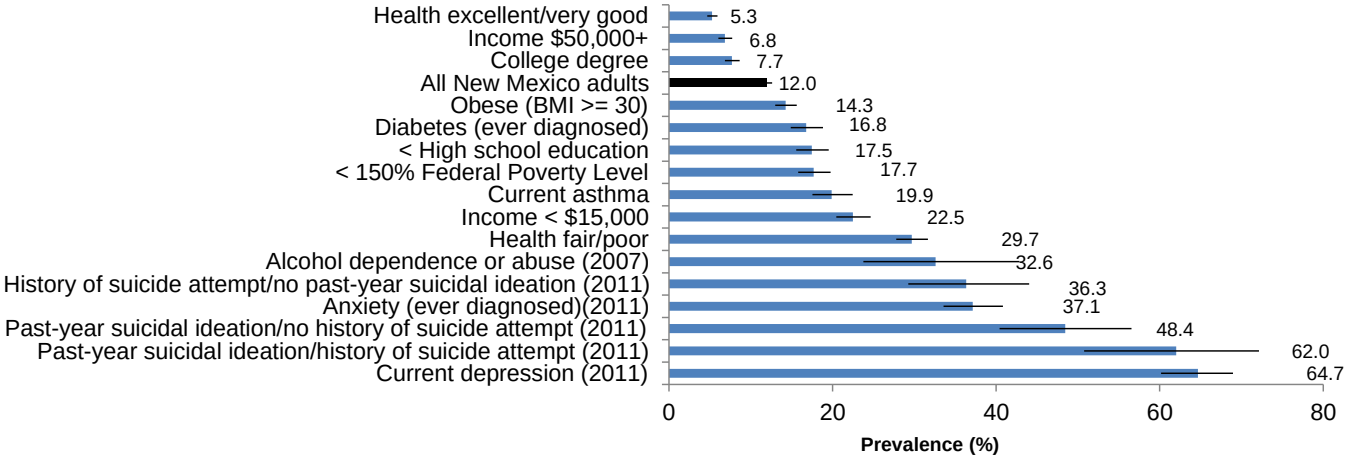
* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 1: Frequent Mental Distress (past 30 days)* by Selected Characteristics, Adults Aged 18+, New Mexico, 2013-2015



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

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

Table 2: Frequent Mental Distress (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2013-2015

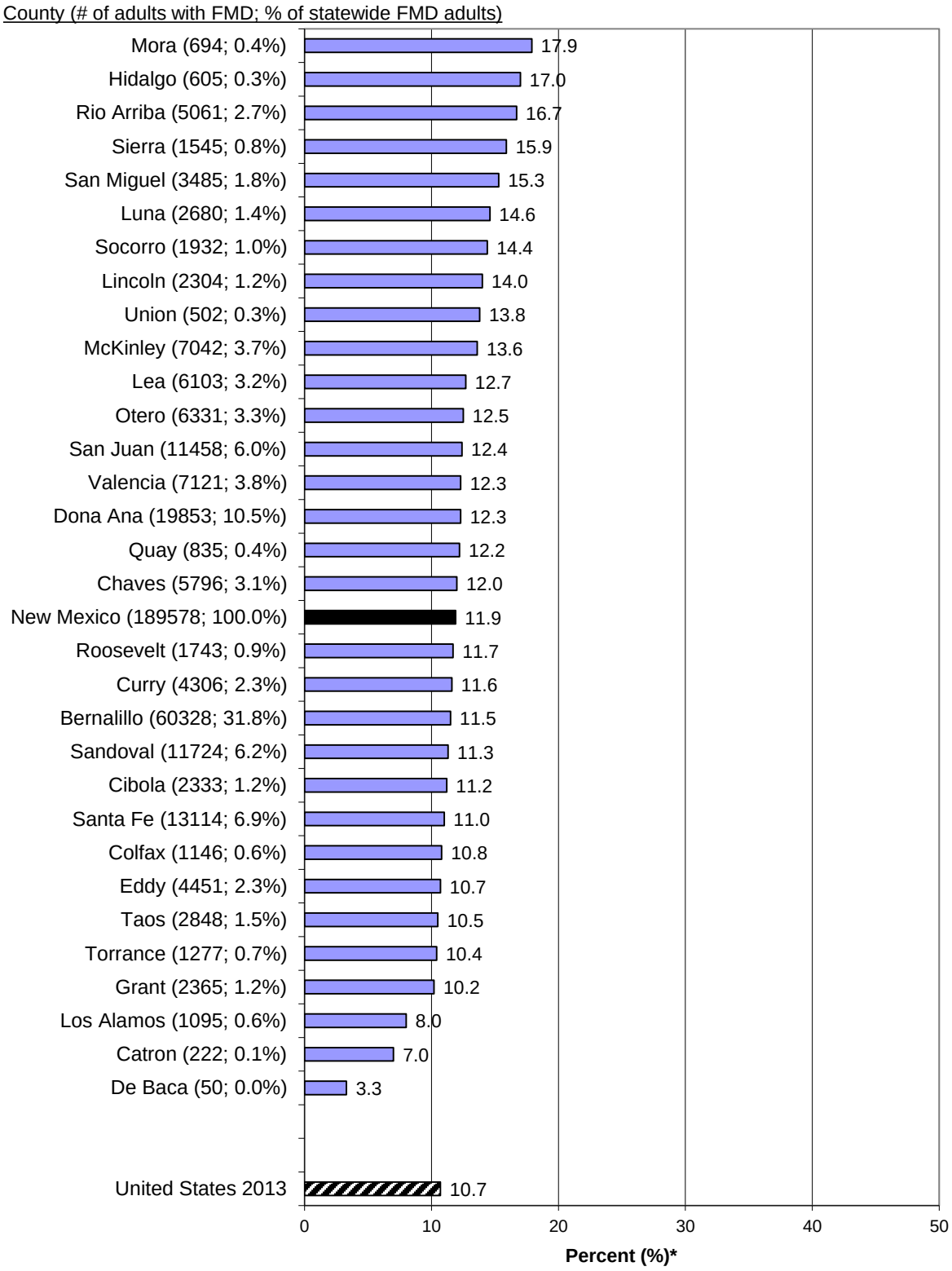
	Number						Percent*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	1,902	322	1,110	29,452	26,992	60,328	8.8	2.1	7.3	12.6	11.4	11.5
Catron	-	-	-	-	141	222	-	-	-	-	5.7	7.0
Chaves	-	-	-	3,136	2,517	5,796	-	-	-	13.1	11.2	12.0
Cibola	414	-	-	1,208	659	2,333	5.4	-	-	15.4	13.4	11.2
Colfax	-	-	-	684	474	1,146	-	-	-	14.1	8.6	10.8
Curry	-	-	-	1,241	2,398	4,306	-	-	-	9.5	11.6	11.6
De Baca	-	-	-	-	-	50	-	-	-	-	-	3.3
Dona Ana	-	-	-	12,641	6,210	19,853	-	-	-	12.6	11.5	12.3
Eddy	-	-	-	1,562	2,635	4,451	-	-	-	8.8	11.7	10.7
Grant	-	-	-	1,365	982	2,365	-	-	-	13.1	8.1	10.2
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	605	-	-	-	-	-	17.0
Lea	-	-	-	2,203	3,433	6,103	-	-	-	9.1	16.2	12.7
Lincoln	-	-	-	884	1,403	2,304	-	-	-	19.5	12.3	14.0
Los Alamos	-	-	-	-	534	1,095	-	-	-	-	5.1	8.0
Luna	-	-	-	1,412	1,313	2,680	-	-	-	13.0	18.7	14.6
McKinley	5,663	-	-	648	761	7,042	14.7	-	-	9.9	13.0	13.6
Mora	-	-	-	693	-	694	-	-	-	22.5	-	17.9
Otero	275	-	-	1,830	3,549	6,331	9.9	-	-	11.1	12.5	12.5
Quay	-	-	-	263	429	835	-	-	-	9.5	11.2	12.2
Rio Arriba	294	-	-	3,951	706	5,061	7.3	-	-	18.6	15.1	16.7
Roosevelt	-	-	-	805	908	1,743	-	-	-	15.0	10.4	11.7
Sandoval	1,242	-	-	5,203	4,593	11,724	10.4	-	-	14.5	8.8	11.3
San Juan	4,133	-	-	1,558	5,625	11,458	12.4	-	-	9.9	13.5	12.4
San Miguel	-	-	-	2,755	452	3,485	-	-	-	16.1	9.4	15.3
Santa Fe	-	-	-	6,239	6,089	13,114	-	-	-	11.3	10.5	11.0
Sierra	-	-	-	-	949	1,545	-	-	-	-	13.6	15.9
Socorro	-	-	-	1,152	548	1,932	-	-	-	18.4	10.0	14.4
Taos	-	-	-	1,626	1,127	2,848	-	-	-	11.3	10.3	10.5
Torrance	-	-	-	-	560	1,277	-	-	-	-	7.9	10.4
Union	-	-	-	-	173	502	-	-	-	-	8.5	13.8
Valencia	-	-	-	4,288	2,619	7,121	-	-	-	13.3	11.8	12.3
New Mexico	16,002	2,087	4,194	88,749	78,139	189,578	12.1	7.5	12.4	12.7	11.2	11.9

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

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

Source: BRFSS; SAES

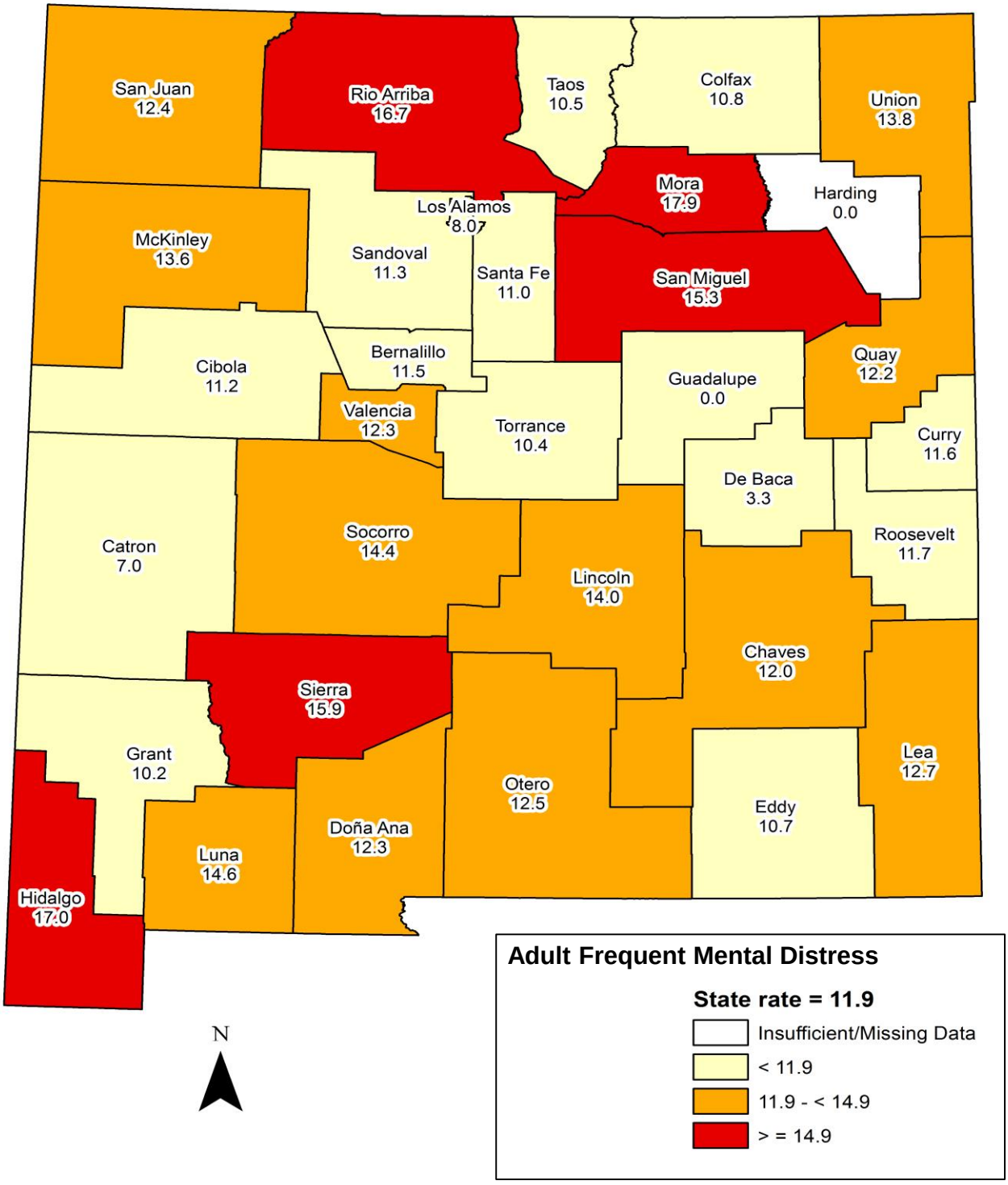
Chart 2: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015



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

ADULT MENTAL HEALTH (continued)

Chart 3: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015



Insufficient data: Rate not reported due to small number of respodents (< 50) in cell

Source: BRFSS; SAES

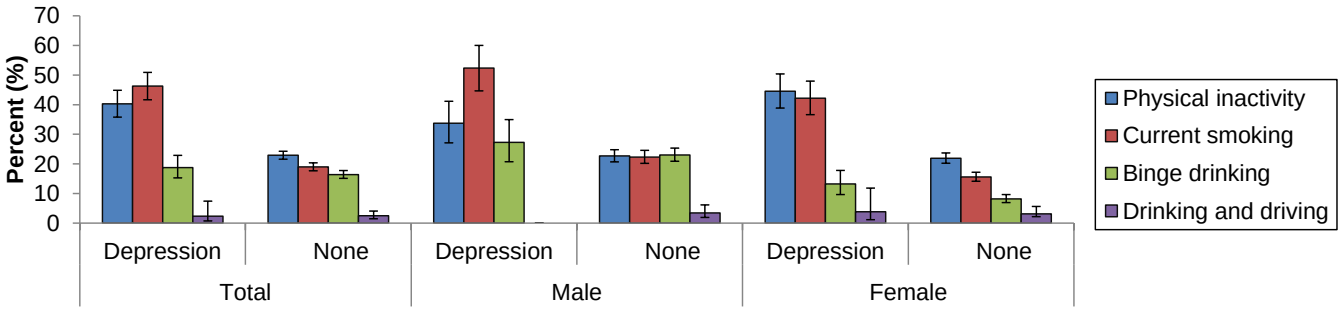
ADULT MENTAL HEALTH - DEPRESSION

Problem Statement (continued)

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

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

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



* Current Depression definition: scored 10 or more on Patient Health Questionaire depression inventory (PHQ-8); this instrument can establish a provisional depressive disorder diagnosis using Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) criteria.

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

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

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

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

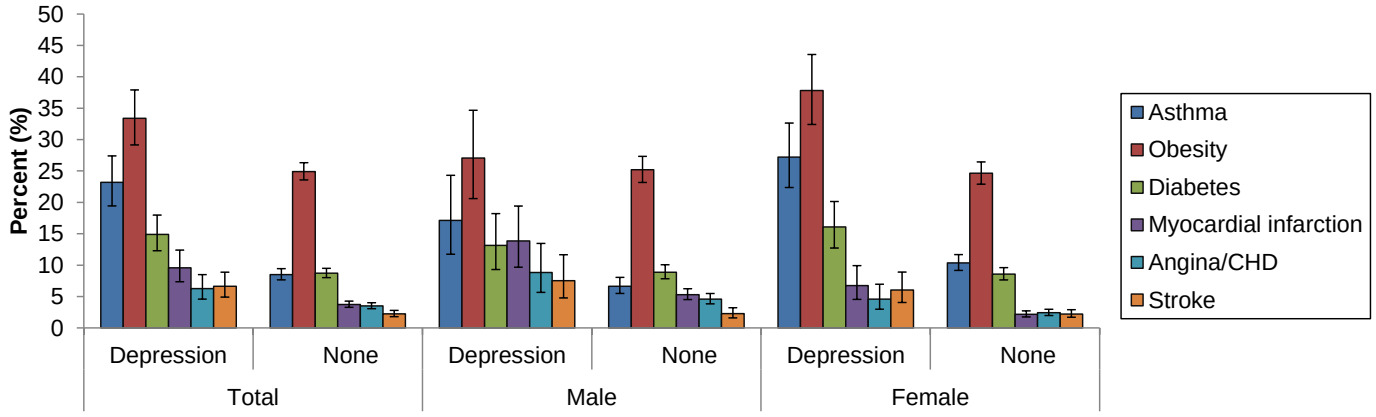
** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH - DEPRESSION (continued)

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



Source: BRFSS; SAES

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

	Number*						Percent**					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	2,617	-	-	17,465	20,696	43,877	13.6	-	-	11.2	9.6	10.4
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	-	-	-	2,605	2,671	5,945	-	-	-	17.4	11.4	14.5
Cibola	-	-	-	-	452	1,609	-	-	-	-	8.0	8.8
Colfax	-	-	-	-	-	1,518	-	-	-	-	-	16.5
Curry	-	-	-	-	1,039	2,117	-	-	-	-	6.3	8.5
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	-	-	-	6,492	3,685	10,778	-	-	-	9.5	8.8	9.3
Eddy	-	-	-	2,315	2,190	4,813	-	-	-	21.9	10.6	14.4
Grant	-	-	-	-	1,040	1,807	-	-	-	-	7.3	8.3
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	-	-	-	533	2,590	3,232	-	-	-	3.5	15.6	9.4
Lincoln	-	-	-	-	939	1,729	-	-	-	-	7.7	9.4
Los Alamos	-	-	-	-	1,567	2,095	-	-	-	-	13.6	15.5
Luna	-	-	-	-	-	1,614	-	-	-	-	-	12.7
McKinley	2,586	-	-	383	466	3,435	9.2	-	-	5.1	8.4	8.2
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	-	-	-	-	3,753	4,928	-	-	-	-	14.2	12.6
Quay	-	-	-	-	-	1,101	-	-	-	-	-	22.2
Rio Arriba	-	-	-	2,406	-	4,325	-	-	-	12.0	-	13.9
Roosevelt	-	-	-	-	849	849	-	-	-	-	13.3	9.1
Sandoval	-	-	-	1,605	4,721	6,586	-	-	-	9.7	9.4	8.3
San Juan	2,258	-	-	93	3,584	5,935	12.2	-	-	0.8	8.8	8.3
San Miguel	-	-	-	2,523	-	3,480	-	-	-	18.2	-	18.5
Santa Fe	-	-	-	4,525	4,314	9,074	-	-	-	11.0	8.6	9.2
Sierra	-	-	-	-	-	2,328	-	-	-	-	-	24.0
Socorro	-	-	-	-	-	1,374	-	-	-	-	-	8.6
Taos	-	-	-	740	287	1,157	-	-	-	6.6	3.6	5.7
Torrance	-	-	-	-	-	1,477	-	-	-	-	-	10.7
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	-	-	-	1,737	1,935	4,110	-	-	-	7.3	8.6	8.3
New Mexico	12,311	1,414	3,188	52,012	62,105	132,737	11.4	7.2	12.1	10.8	9.7	10.3

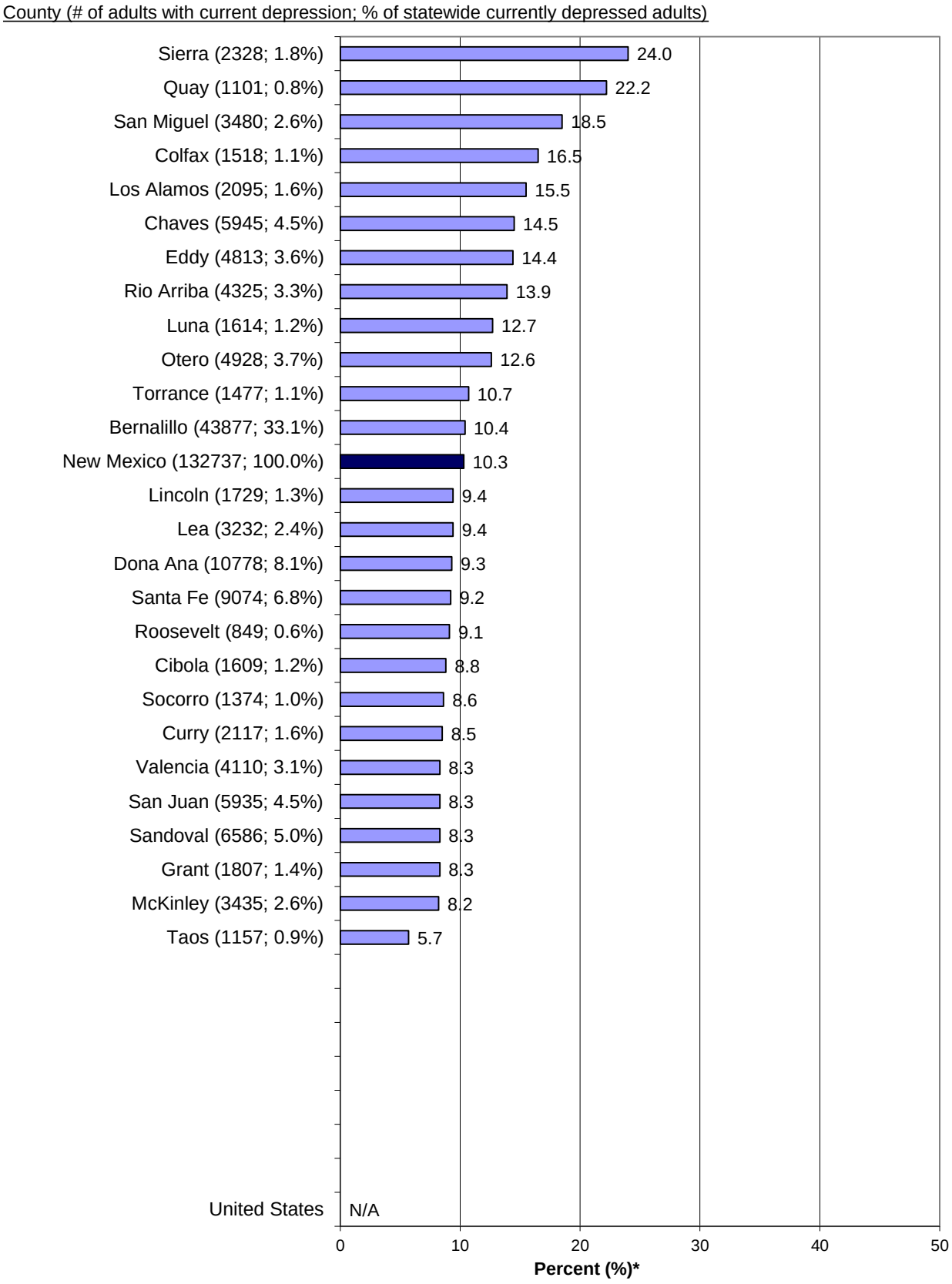
* Estimate of number of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

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

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

Source: BRFSS; SAES

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



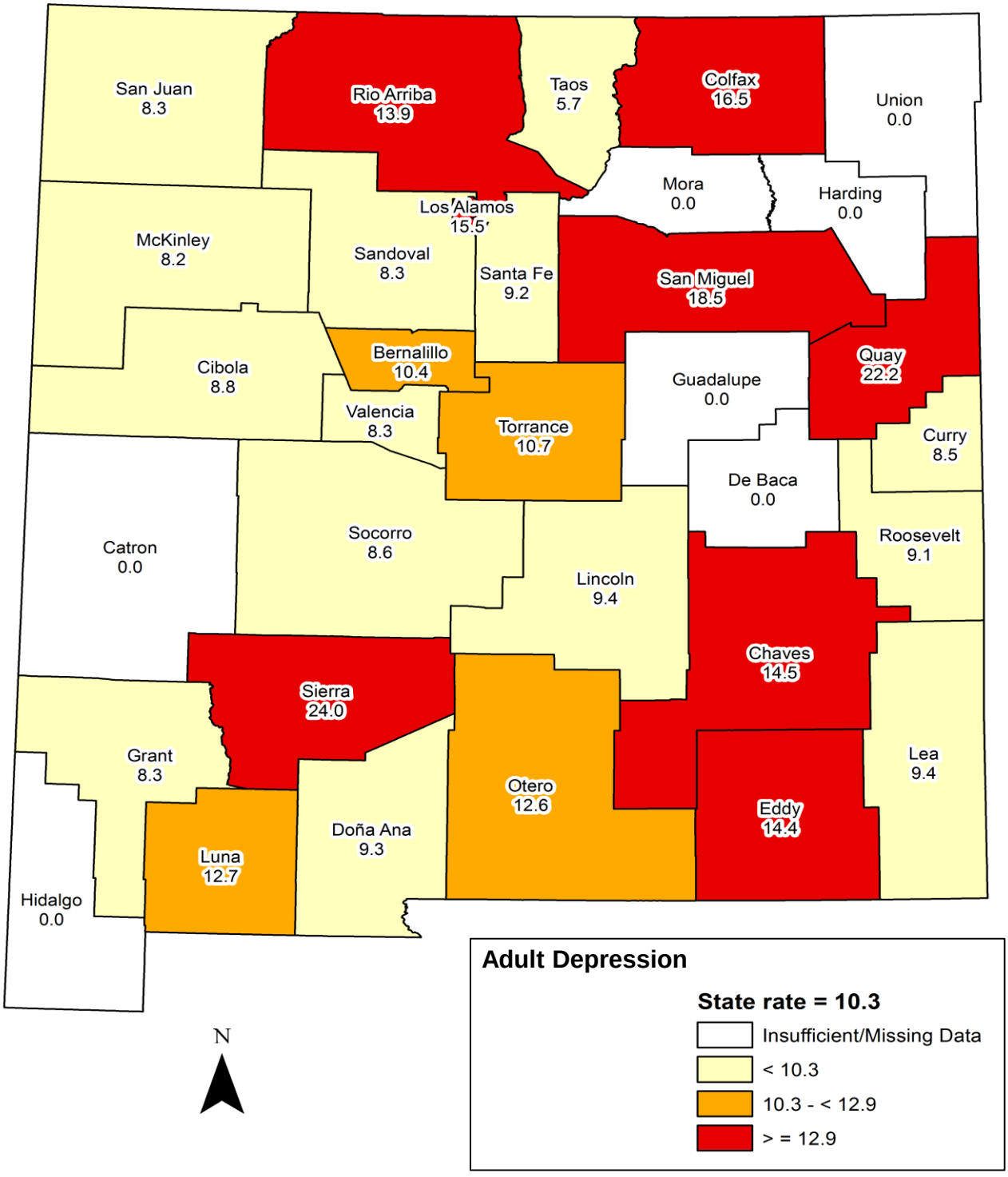
* Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

The following counties were not included due to small number of respondents (< 50) in cell:
Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Union

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

ADULT MENTAL HEALTH - DEPRESSION (continued)

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



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

Source: BRFSS; SAES

YOUTH FEELINGS OF SADNESS OR HOPELESSNESS

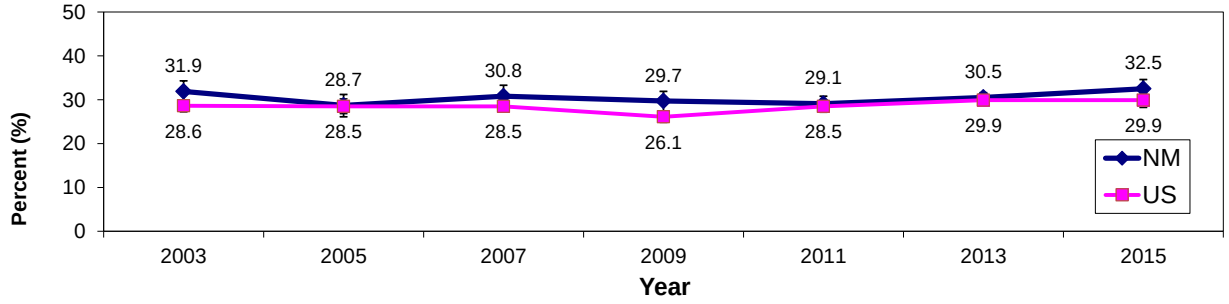
Problem Statement

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

The prevalence of persistent feelings of sadness or hopelessness among NM high school students remained stable from 2003-2015 (Chart 1). There was no statistically significant difference between the US rate (29.9%) and the NM rate (32.5%). In 2015 in NM, girls (42.3%) were nearly twice as likely to report feelings of sadness or hopelessness than boys (23.0%), reflective of a continuing disparity (Chart 2). Boys in the 11th grade reported a significantly higher prevalence of sad or hopeless feelings (27.2%) compared to those in the 9th grade (19.5%) (Table 1). There were no other statistically significant variations by grade level or by race/ethnicity.

As Charts 3 and 4 demonstrate, in 2015, the counties with the highest prevalence of persistent feelings of sadness or hopelessness were Sierra (37.3%), Otero (36.3%), Luna (35.6%), Grant (35.2%), and Eddy (35.1%). The counties with the lowest prevalence were Hidalgo (21.8%), Curry (22.0%) and Socorro (24.3%).

Chart 1: Feelings of Sadness or Hopelessness* by Year, Grades 9 - 12, NM and US, 2003-2015



* Felt so sad or hopeless nearly every day for a period of 2 weeks that they stopped some normal activities, within the past 12 months

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

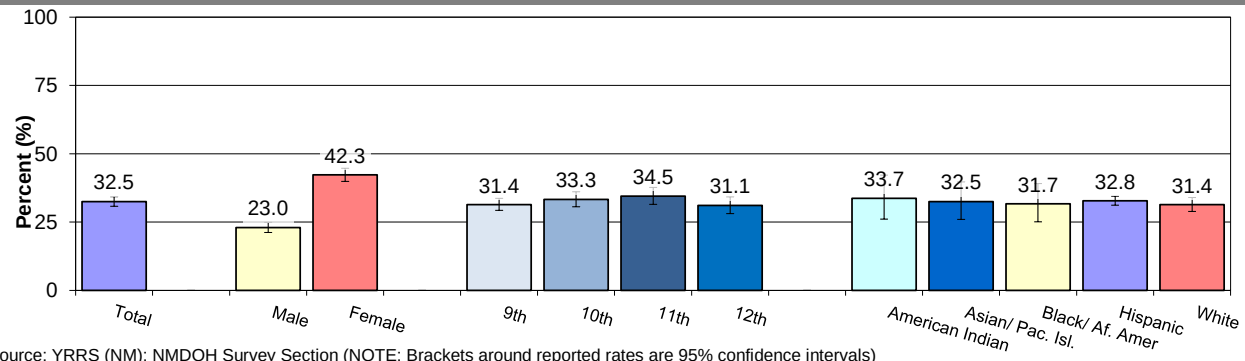
Table 1: Feelings of Sadness or Hopelessness, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	24.5 (16.2-35.4)	25.0 (18.4-33.1)	34.1 (27.6-41.3)	15.3 (5.4-36.2)	25.3 (18.9-32.9)
	Asian/Pacific Islander	--	--	--	--	26.7 (18.5-36.8)
	Black	--	--	--	--	24.9 (17.7-34.0)
	Hispanic	21.2 (17.8-25.1)	22.6 (19.7-25.9)	26.4 (22.6-30.4)	24.7 (20.2-29.9)	23.4 (21.5-25.4)
	White	12.5 (7.8-19.4)	22.3 (18.1-27.2)	26.4 (20.2-33.8)	23.0 (17.4-29.6)	20.9 (18.0-24.0)
	Total	19.5 (16.3-23.2)	23.1 (20.6-25.8)	27.2 (23.8-30.9)	23.2 (19.3-27.6)	23.0 (21.2-24.9)
Female	American Indian	45.2 (39.5-51.0)	47.1 (25.6-69.7)	44.2 (34.4-54.5)	30.3 (23.8-37.8)	41.8 (32.7-51.5)
	Asian/Pacific Islander	--	--	--	--	39.8 (29.8-50.8)
	Black	--	--	--	--	42.0 (32.4-52.1)
	Hispanic	45.0 (40.5-49.6)	42.2 (38.5-46.0)	43.4 (37.8-49.0)	36.3 (31.6-41.2)	42.0 (39.5-44.5)
	White	43.0 (37.2-49.0)	46.8 (40.0-53.8)	37.3 (30.5-44.7)	47.2 (39.5-55.1)	43.6 (40.4-46.9)
	Total	44.4 (41.0-47.8)	43.7 (39.8-47.7)	41.9 (37.8-46.0)	38.7 (35.2-42.4)	42.3 (39.9-44.7)
Total	American Indian	34.5 (28.1-41.6)	36.6 (24.6-50.5)	38.9 (32.0-46.2)	23.3 (15.9-32.9)	33.7 (26.1-42.2)
	Asian/Pacific Islander	--	--	--	--	32.5 (26.0-39.7)
	Black	27.9 (20.3-37.1)	--	--	--	31.7 (25.1-39.1)
	Hispanic	32.7 (30.1-35.4)	32.7 (30.0-35.6)	35.1 (31.3-39.1)	30.8 (27.3-34.6)	32.8 (31.2-34.5)
	White	27.1 (22.8-31.8)	33.3 (28.6-38.3)	31.7 (26.9-36.9)	34.1 (28.7-39.9)	31.4 (28.9-34.0)
	Total	31.4 (29.3-33.7)	33.3 (30.6-36.1)	34.5 (31.5-37.7)	31.1 (28.1-34.2)	32.5 (30.8-34.3)

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

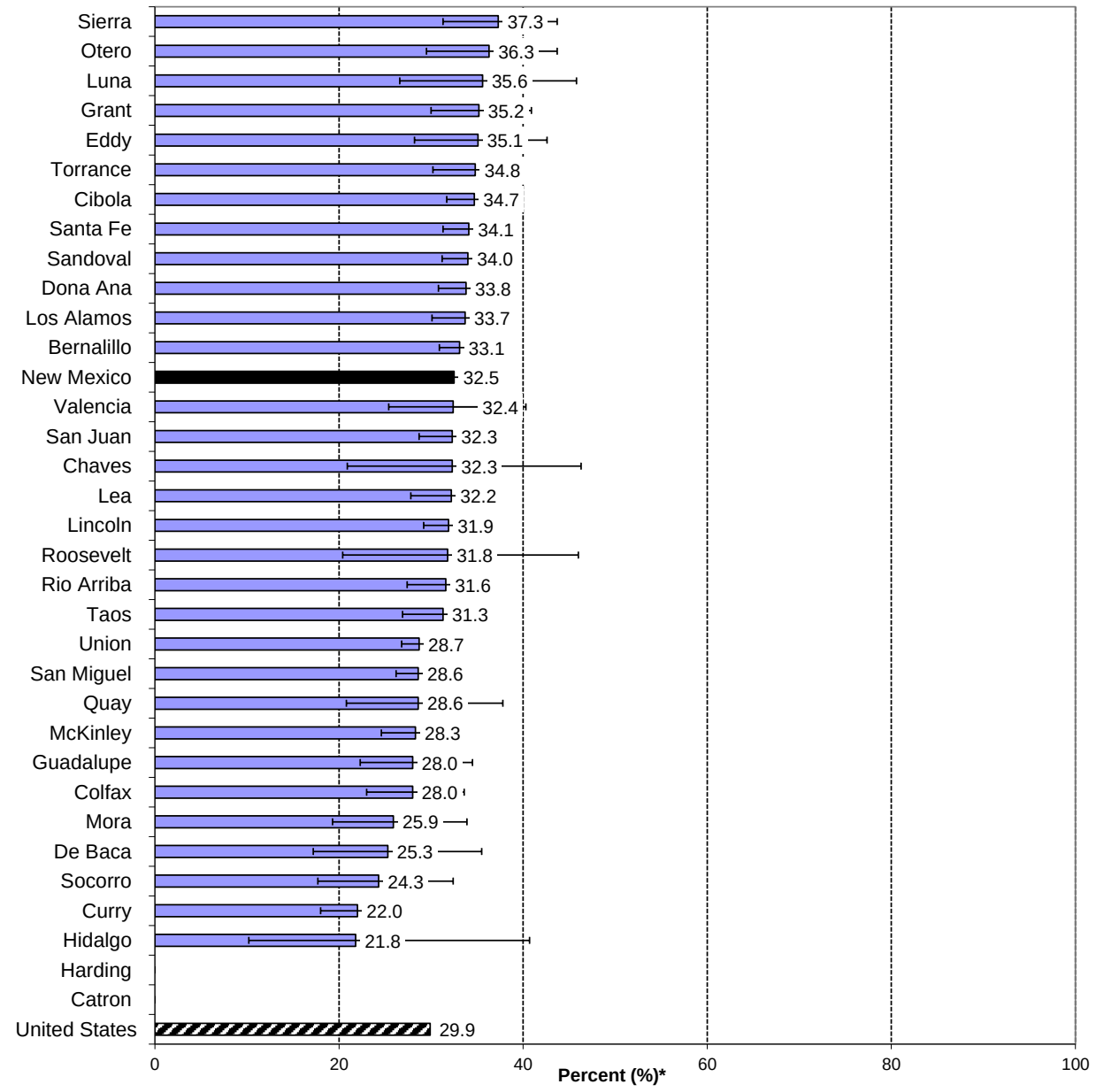
YOUTH FEELINGS OF SADNESS OR HOPELESSNESS (continued)

Chart 2: Feelings of Sadness or Hopelessness, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015



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

Chart 3: Feelings of Sadness or Hopelessness* by County, Grades 9 - 12, NM, 2015



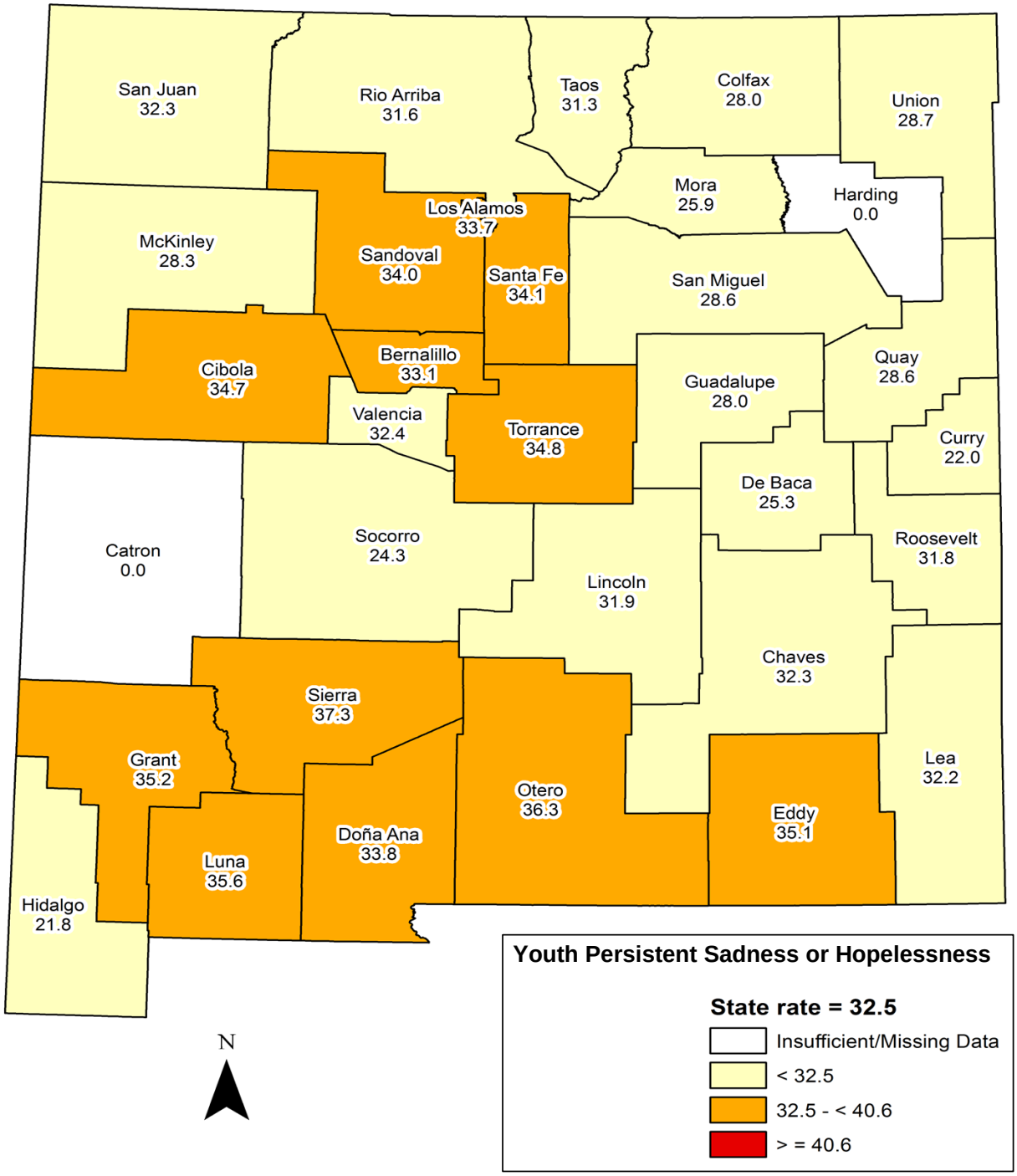
* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months

Catron and Harding County estimates not available because of small numbers and/or low response rates

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

YOUTH FEELINGS OF SADNESS OR HOPELESSNESS (continued)

Chart 4: Feelings of Sadness or Hopelessness* by County, Grades 9 - 12, NM, 2015



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

"No Data": county estimates not available because of small numbers and/or low response rates

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

YOUTH SERIOUSLY CONSIDERED SUICIDE

Problem Statement

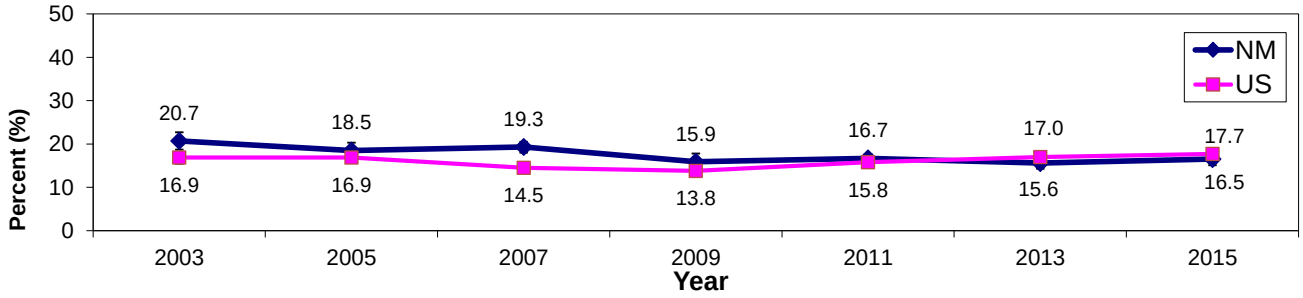
Suicide is a complex behavior, with no single determining cause. Suicidal ideation refers to thoughts of suicide or wanting to take one's own life. Suicidal ideation is a risk factor for suicide attempt/death.

Among NM high school students, the rate of "Seriously considered suicide" decreased significantly from 20.7% in 2003 to 16.5% in 2015 (Chart 1). The difference between rates from 2009 to 2015 was not statistically significant. The US rate decreased from 2003 to 2009 but then increased from 2009 to 2015 (13.8% to 17.7%). There was no statistical difference between the NM and US rates for 2015.

In 2015 (Chart 2), New Mexico girls (21.4%) reported higher rates of having seriously considered suicide than boys (11.6%). This difference between girls and boys was significant across all grades except 11th (Table 1). White girls in the 12th grade seriously considered suicide at a significantly higher rate (30.4%) compared to American Indian (14.2%) and Hispanic (16.1%) 12th grade girls (Table 1).

As Charts 3 and 4 demonstrate, in 2015, the counties with the highest prevalence of youth seriously considering suicide were Otero (22.8%), Sierra (22.7%), Los Alamos (21.5%), Torrance (19.7%), and Roosevelt (19.1%). The counties with the lowest prevalence were De Baca (7.9%) and Hidalgo (9.6%).

Chart 1: Seriously Considered Suicide* by Year, Grades 9 - 12, NM and US, 2003-2015



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

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

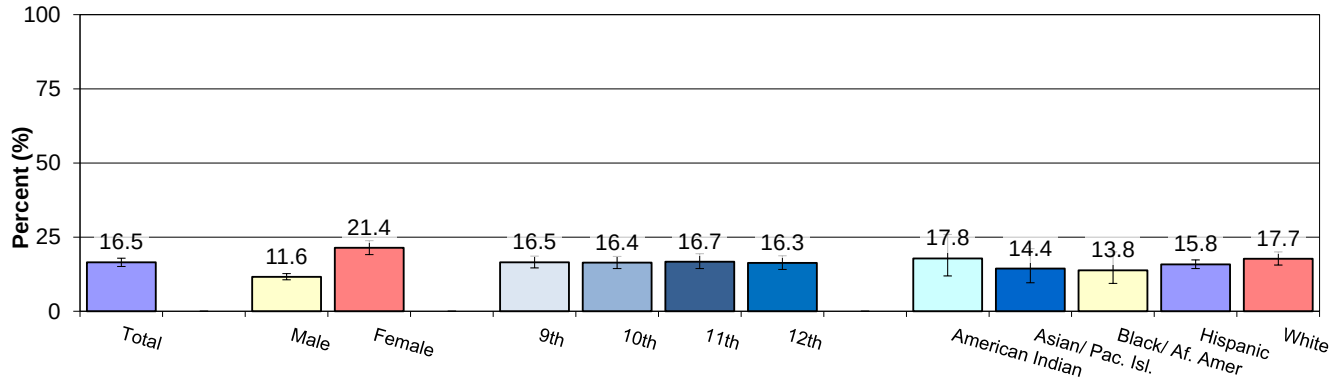
Table 1: Seriously Considered Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	11.2 (6.0-20.0)	8.9 (4.8-15.7)	16.5 (10.8-24.4)	6.3 (2.3-16.6)	11.1 (8.1-15.0)
	Asian/Pacific Islander	--	--	--	--	16.8 (8.9-29.3)
	Black	--	--	--	--	12.4 (7.9-19.0)
	Hispanic	9.3 (7.4-11.6)	10.2 (7.9-13.1)	13.7 (10.7-17.3)	14.5 (11.3-18.4)	11.5 (10.3-12.8)
	White	8.4 (5.1-13.8)	10.1 (6.6-15.2)	14.5 (10.0-20.4)	12.9 (8.5-19.2)	11.3 (9.0-14.2)
	Total	9.6 (7.8-11.8)	10.2 (8.4-12.3)	14.4 (12.1-17.1)	13.0 (10.3-16.4)	11.6 (10.6-12.7)
Female	American Indian	23.3 (16.9-31.3)	32.1 (12.1-62.0)	26.9 (17.7-38.7)	14.2 (10.5-19.0)	24.3 (15.0-36.9)
	Asian/Pacific Islander	--	--	--	--	11.2 (5.7-20.7)
	Black	--	--	--	--	16.0 (8.4-28.2)
	Hispanic	22.9 (19.5-26.7)	19.9 (16.7-23.5)	19.5 (15.3-24.4)	16.1 (13.0-19.7)	19.9 (17.8-22.3)
	White	27.2 (21.6-33.6)	26.8 (20.1-34.8)	14.6 (9.9-20.9)	30.4 (23.2-38.8)	24.9 (22.1-28.1)
	Total	23.8 (20.7-27.2)	22.7 (18.7-27.2)	18.9 (15.6-22.8)	19.3 (16.7-22.1)	21.4 (19.1-23.8)
Total	American Indian	17.1 (11.4-24.9)	21.1 (11.2-36.0)	21.6 (15.1-29.9)	10.5 (7.9-13.9)	17.8 (11.9-25.9)
	Asian/Pacific Islander	--	--	--	--	14.4 (9.6-21.1)
	Black	14.2 (6.5-28.2)	--	--	--	13.8 (9.4-20.0)
	Hispanic	15.9 (13.8-18.2)	15.2 (13.3-17.4)	16.7 (14.0-19.8)	15.4 (12.9-18.2)	15.8 (14.4-17.3)
	White	17.5 (14.1-21.5)	17.4 (13.7-21.9)	14.8 (10.9-19.7)	21.0 (15.9-27.3)	17.7 (15.6-20.0)
	Total	16.5 (14.6-18.6)	16.4 (14.4-18.5)	16.7 (14.4-19.4)	16.3 (14.1-18.7)	16.5 (15.1-17.9)

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

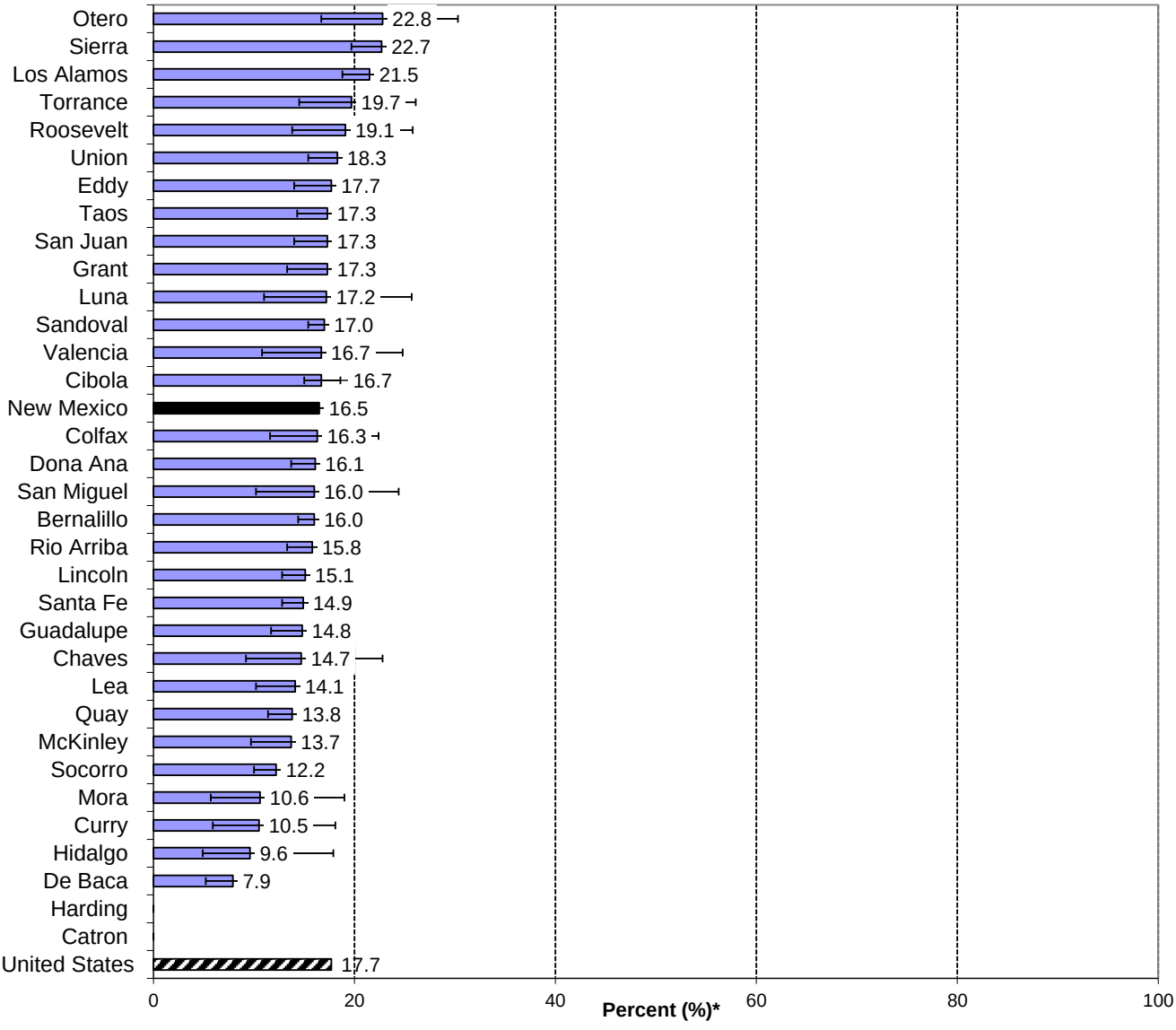
YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

Chart 2: Seriously Considered Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015



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

Chart 3. Seriously Considered Suicide* by County, Grades 9 - 12, NM, 2015



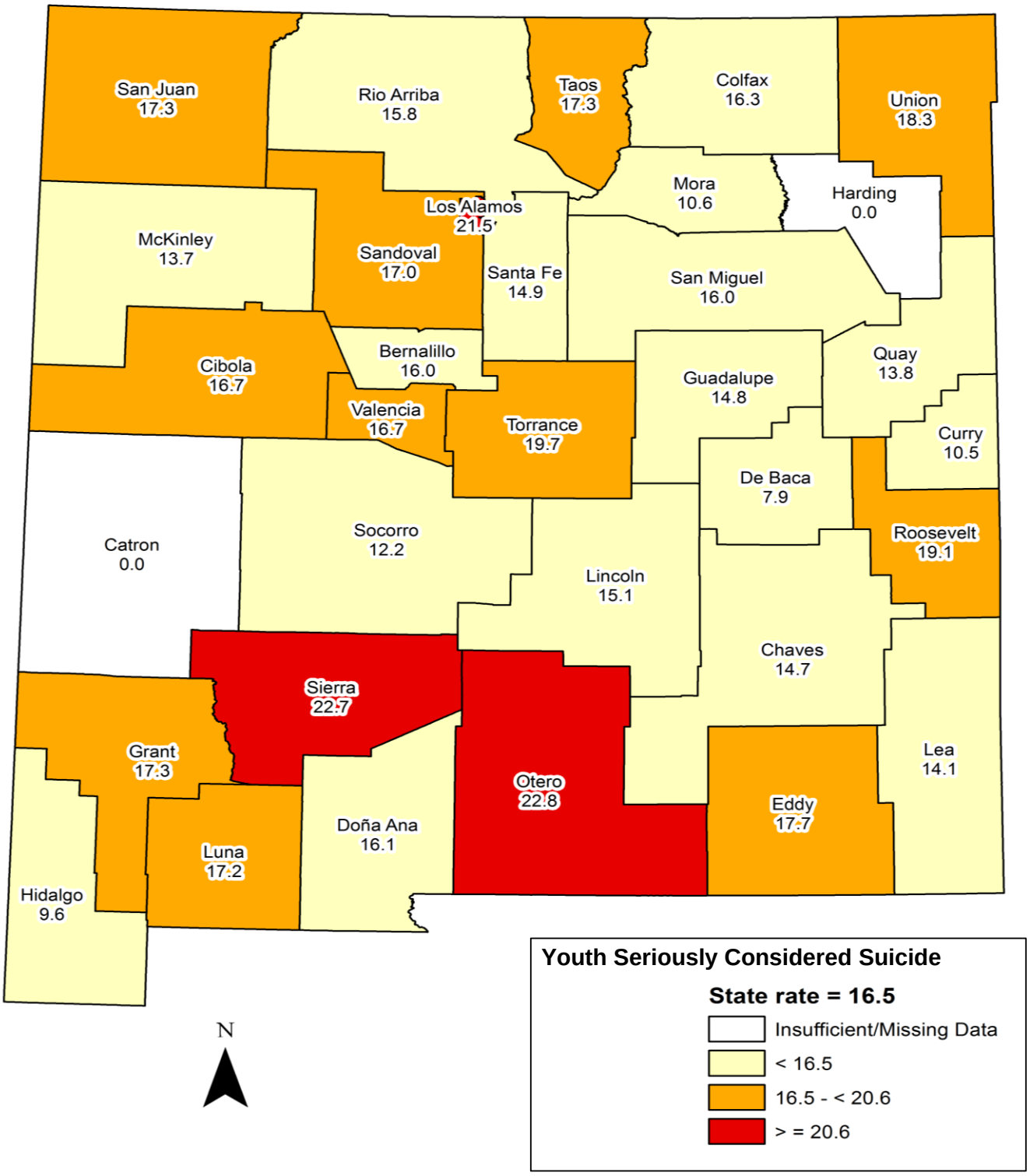
* Estimate of percent of high school students seriously considered suicide at least once in past 12 months

Catron and Harding County estimates not available because of small numbers and/or low response rates

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

YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

Chart 4: Seriously Considered Suicide* by County, Grades 9 - 12, NM, 2015



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

"No Data": county estimates not available because of small numbers and/or low response rates

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

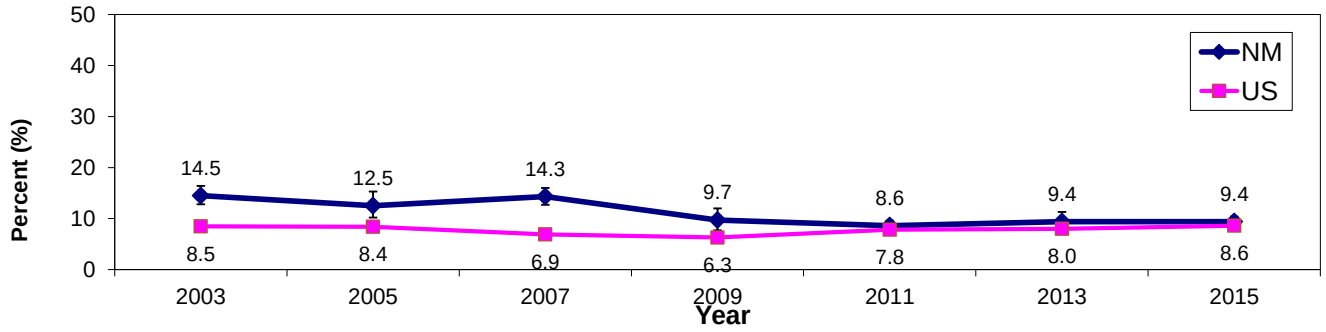
YOUTH ATTEMPTED SUICIDE

Problem Statement

In NM in 2015, suicide was the leading cause of death, tied with unintentional injuries, for youth between the ages of 15 and 19. In the U.S. in 2015, according to the CDC, suicide was the second leading cause of death for this same age group. While girls are more likely than boys to attempt suicide, boys are more likely than girls to die of suicide. A previous suicide attempt is among the stongest risk factors for completed suicide. As seen in Chart 1, the prevalence of past year suicide attempts among NM high school students decreased from 14.5% in 2003 to 9.4% in 2015. While the U.S. prevalence decreased from 2003 to 2009, it increased from 2009 (6.3%) to 2015 (8.6%). In 2015, there was no statistically significant difference between the percentage of high school students making an attempt in NM compared to the U.S.

In NM in 2015, the prevalence of suicide attempts in the past year (Chart 2) was about twice as high for girls (12.4%) compared to boys (6.4%). Table 1 reveals that the percentage of attempts made by girls in the 9th (16.3%) and 10th (12.5%) grades was significantly higher than that for boys (6.6% and 4.6%, respectively). The prevalence of at least one suicide attempt in the past year was significantly greater for American Indian girls (19.0%) compared to Hispanic (11.4%) girls. The percentage of attempts made by American Indian girls in the 10th grade was more than double (25.9%) that of Hispanic girls (10.6%). In 2015, the counties with the highest prevalence of suicide attempts were Sierra (18.4%), Roosevelt (13.1%), Otero (12.8%), Cibola (12.7%), and McKinley (11.9%). The counties with the lowest prevalence of suicide attempts were Colfax (4.9%), Mora (5.7%), Hidalgo (6.2%), and Guadalupe (6.6%).

Chart 1: Attempted Suicide* by Year, Grades 9 - 12, NM and US, 2003-2015



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

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

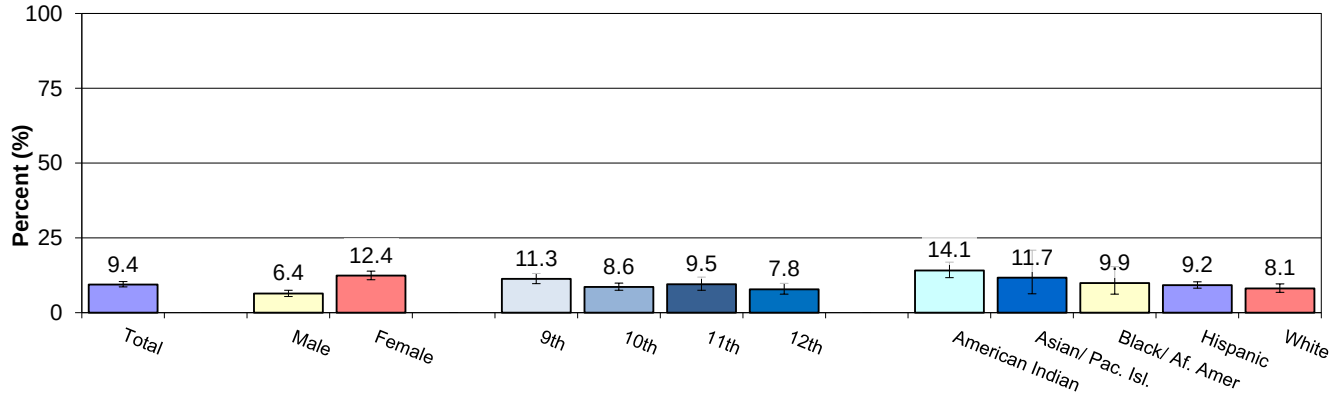
Table 1: Attempted Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	9.1 (4.7-16.7)	4.9 (1.9-12.1)	12.6 (7.1-21.3)	8.7 (3.4-20.2)	8.8 (5.8-13.2)
	Asian/Pacific Islander	--	--	--	--	9.0 (4.0-19.0)
	Black	--	--	--	--	10.5 (5.6-18.9)
	Hispanic	7.1 (4.9-10.1)	4.9 (3.6-6.7)	8.1 (5.9-11.0)	7.7 (5.5-10.5)	6.9 (5.8-8.1)
	White	4.2 (2.1-8.3)	3.9 (1.9-7.7)	4.7 (2.4-9.2)	4.0 (2.0-7.9)	4.2 (3.1-5.6)
	Total	6.6 (4.8-9.0)	4.6 (3.4-6.1)	8.0 (5.9-10.8)	6.5 (4.9-8.4)	6.4 (5.4-7.5)
Female	American Indian	21.5 (13.6-32.4)	25.9 (14.9-41.0)	18.2 (8.4-35.0)	10.2 (6.4-15.8)	19.0 (15.2-23.5)
	Asian/Pacific Islander	--	--	--	--	14.1 (6.0-29.8)
	Black	--	--	--	--	9.0 (4.1-18.7)
	Hispanic	15.4 (13.0-18.3)	10.6 (8.4-13.4)	11.6 (8.3-15.9)	6.5 (4.1-10.2)	11.4 (9.7-13.2)
	White	16.9 (11.9-23.5)	11.3 (7.6-16.6)	6.2 (3.2-11.6)	14.0 (8.3-22.6)	12.3 (9.9-15.2)
	Total	16.3 (13.7-19.1)	12.5 (10.6-14.8)	10.8 (8.3-14.0)	8.8 (6.4-12.0)	12.4 (11.0-13.9)
Total	American Indian	15.0 (10.1-21.9)	15.9 (11.7-21.2)	15.4 (8.5-26.4)	9.5 (6.1-14.7)	14.1 (11.7-16.9)
	Asian/Pacific Islander	--	--	--	--	11.7 (6.3-20.9)
	Black	10.5 (5.0-20.5)	--	--	--	9.9 (6.2-15.4)
	Hispanic	11.1 (9.4-13.1)	7.9 (6.6-9.5)	10.0 (7.8-12.6)	7.1 (5.3-9.4)	9.2 (8.2-10.3)
	White	10.3 (7.7-13.8)	7.3 (5.1-10.4)	5.4 (3.4-8.4)	8.9 (5.6-14.0)	8.1 (6.8-9.6)
	Total	11.3 (9.7-13.1)	8.6 (7.5-9.9)	9.5 (7.5-11.9)	7.8 (6.2-9.8)	9.4 (8.6-10.4)

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

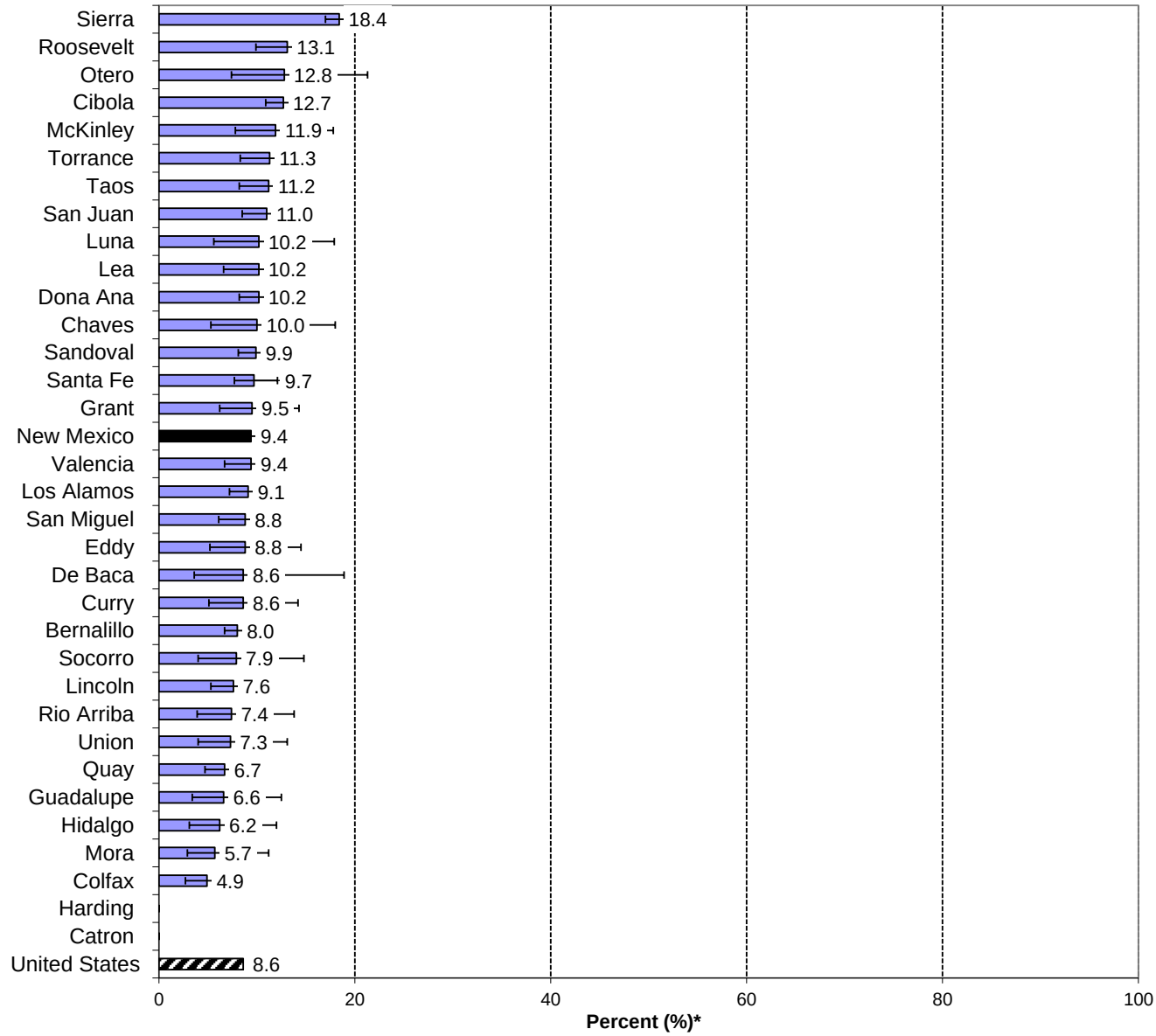
YOUTH ATTEMPTED SUICIDE (continued)

Chart 2: Attempted Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2015



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

Chart 3: Attempted Suicide* by County, Grades 9 - 12, NM, 2015



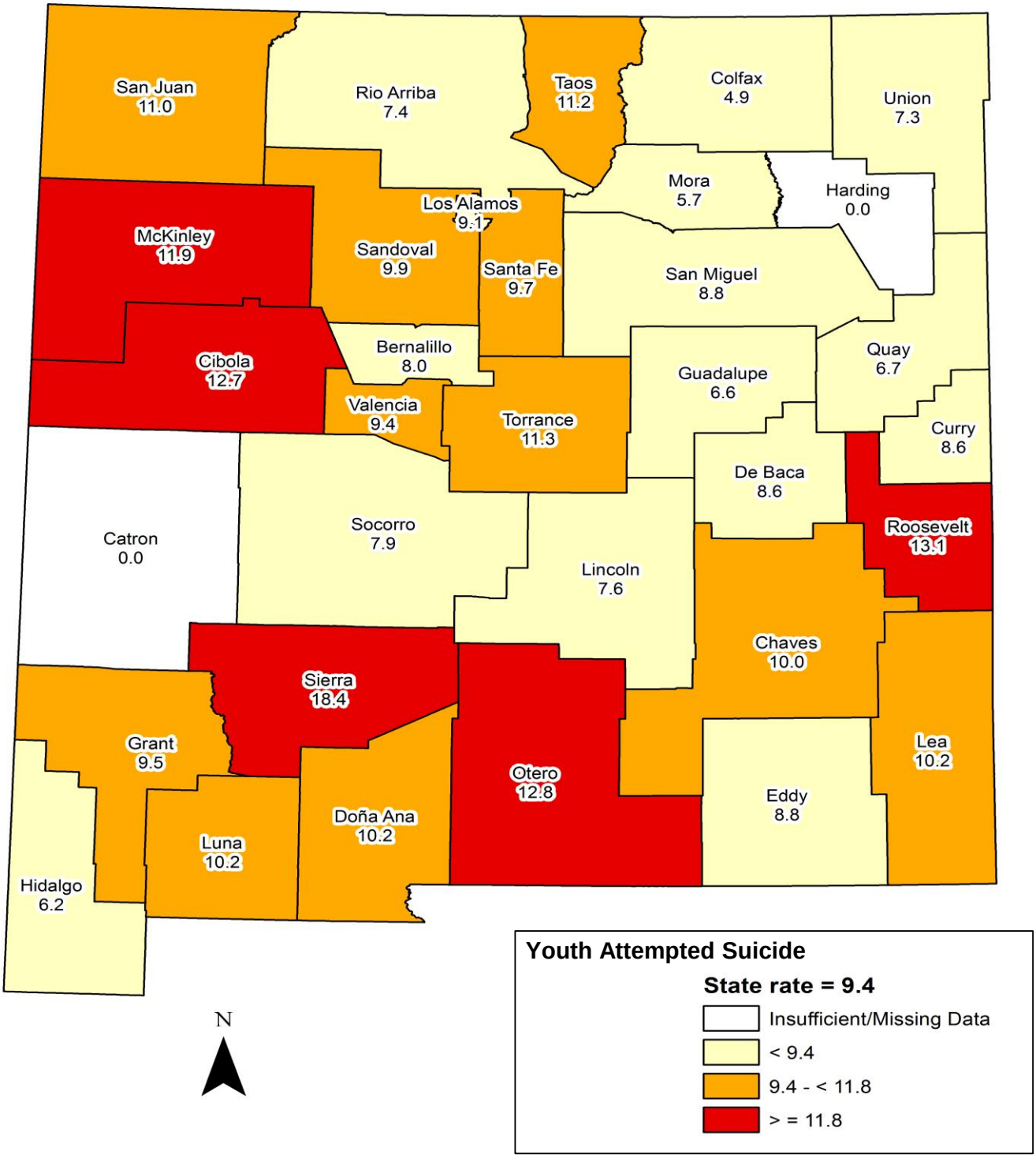
* Estimate of percent of high school students seriously considered suicide at least once in past 12 months

Catron and Harding County estimates not available because of small numbers and/or low response rates

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

YOUTH ATTEMPTED SUICIDE (continued)

Chart 4: Attempted Suicide* by County, Grades 9 - 12, NM, 2015



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

"No Data": county estimates not available because of small numbers and/or low response rates

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

YOUTH RISK AND RESILIENCY

Association Between Risk and Resiliency

Strong relationships with parents, peers, schools, and adults in the community can be protective factors against risk behaviors that endanger the health and well-being of young people. These protective factors, or resiliency factors, are measured by several questions in the NM Youth Risk and Resiliency Survey (YRRS). Results from the 2015 YRRS demonstrate that youth with high levels of these resiliency factors were less likely than other students to engage in binge drinking, drug use, tobacco use, and suicidal ideation and attempts.

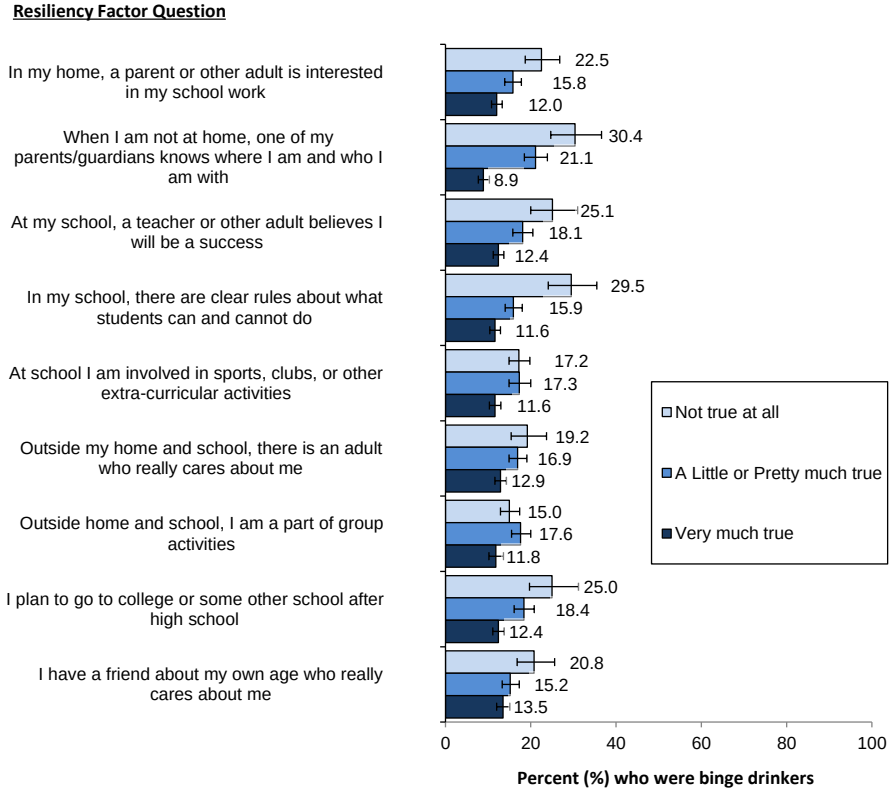
Resiliency factor results presented in the following charts are for:

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

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

Chart 1: Binge Drinking* by Selected Resiliency Factors, Grades 9-12, 2015

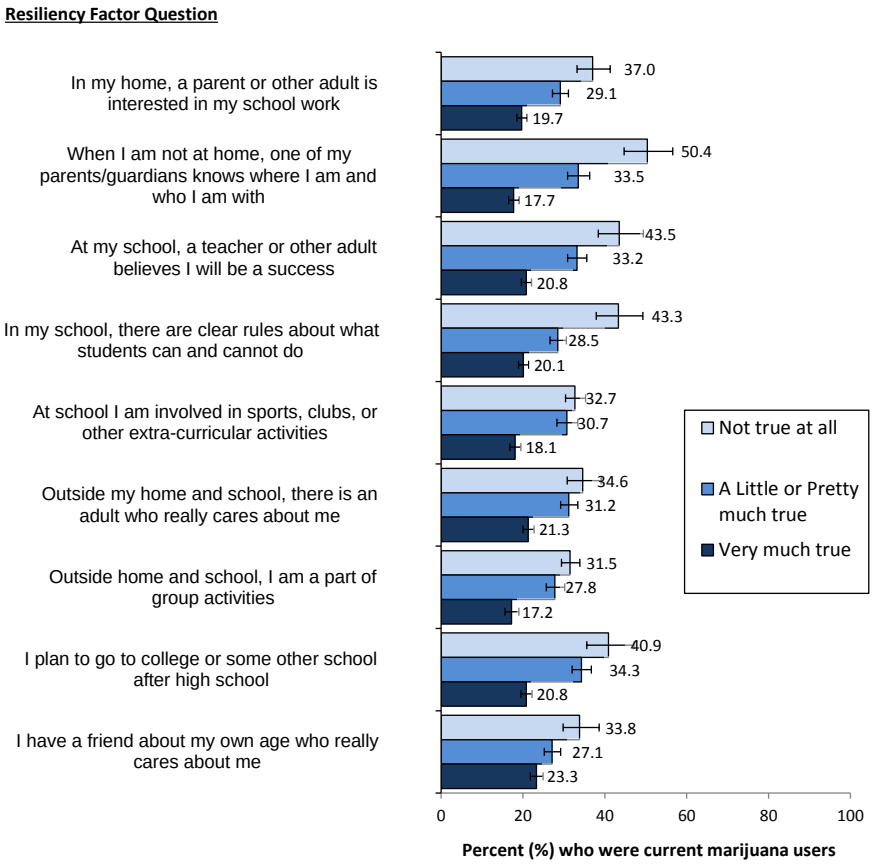
Students were less likely to be binge drinkers if they said "Very much true" to any of the resiliency questions:



** 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*

Chart 2: Current Marijuana Use* by Selected Resiliency Factors, Grades 9-12, 2015

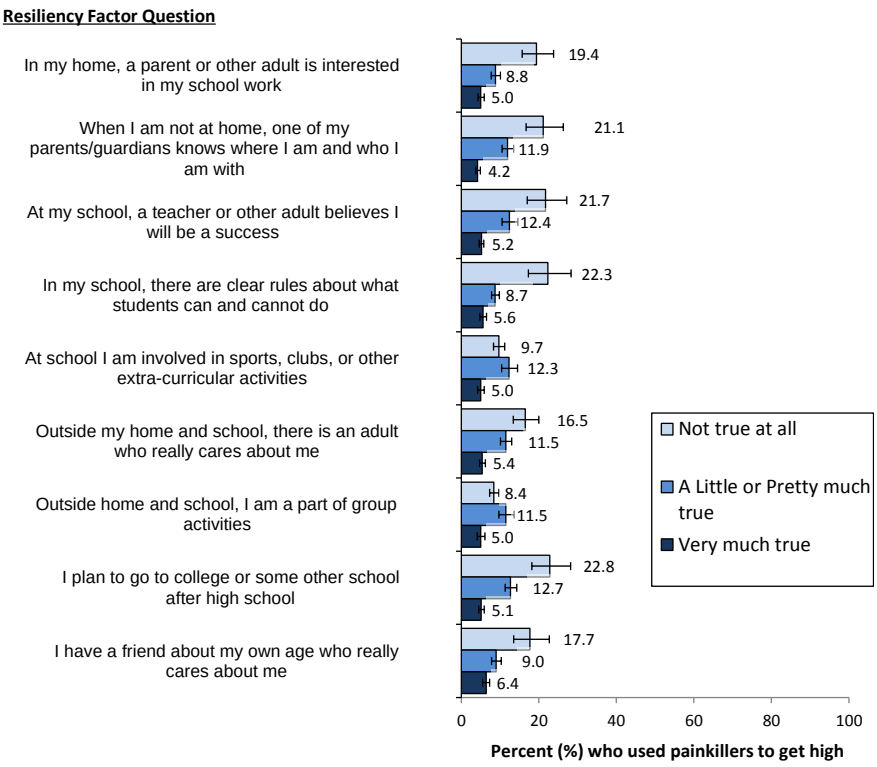
Students were less likely to be current marijuana users if they said "Very much true" to any of the resiliency questions:



** Used marijuana in the past 30 days*

Chart 3: Used Pain Killers to Get High* by Selected Resiliency Factors, Grades 9-12, 2015

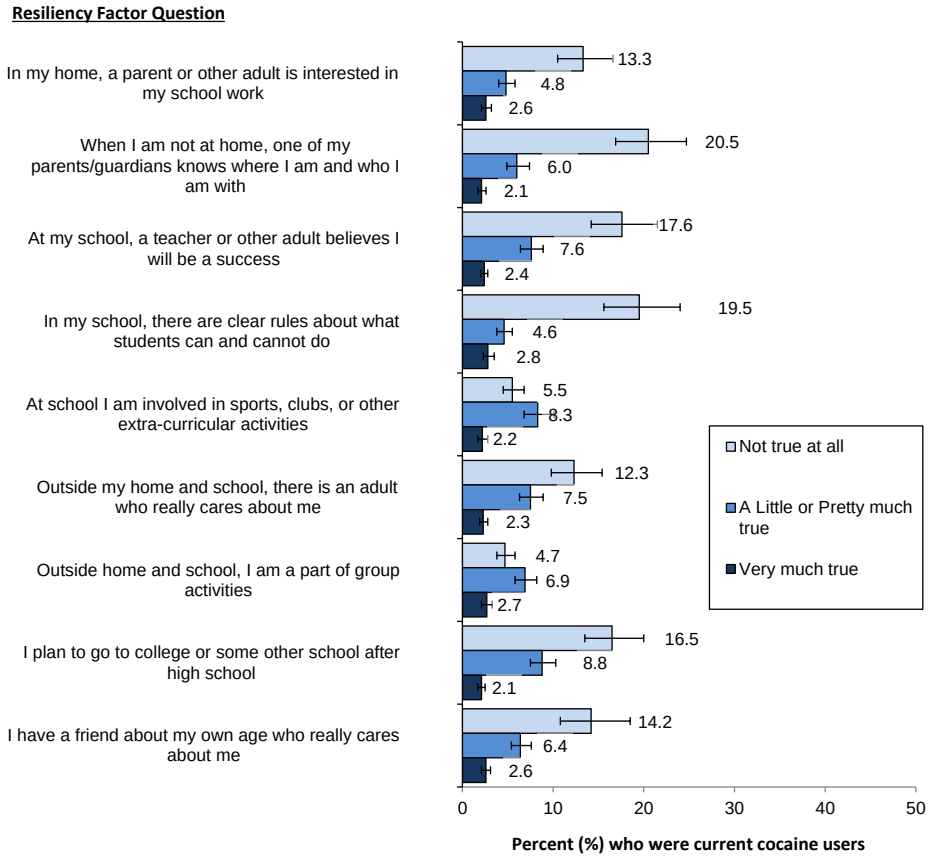
Students were less likely to use pain killers to get high if they said "Very much true" to any of the resiliency questions:



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

Chart 4: Current Cocaine Use* by Selected Resiliency Factors, Grades 9-12, 2015

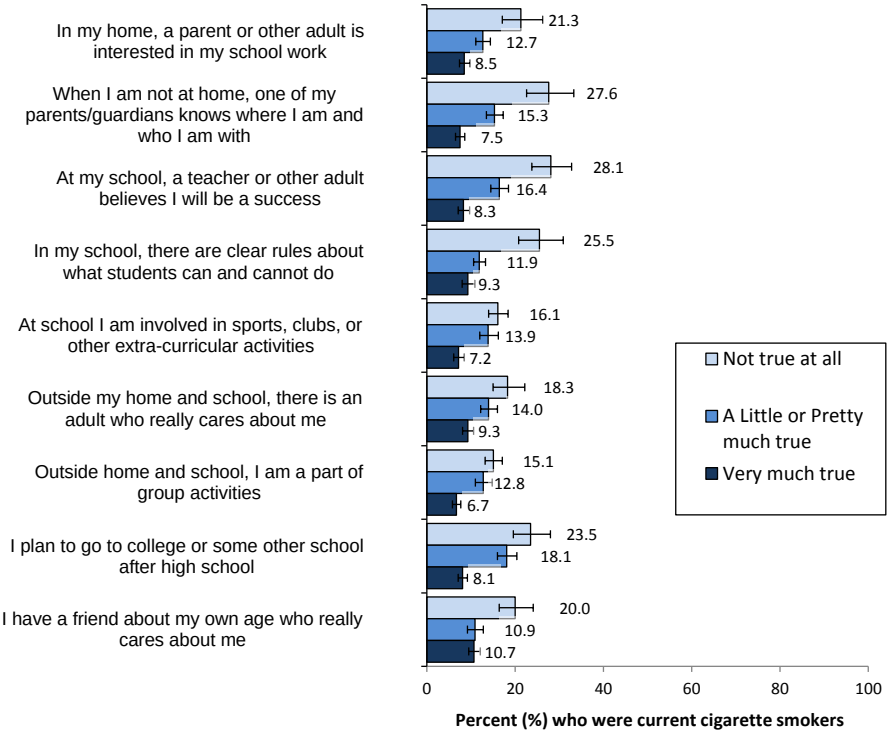
Students were less likely to be current cocaine users if they said "Very much true" to any of the resiliency questions:



** 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, 2015

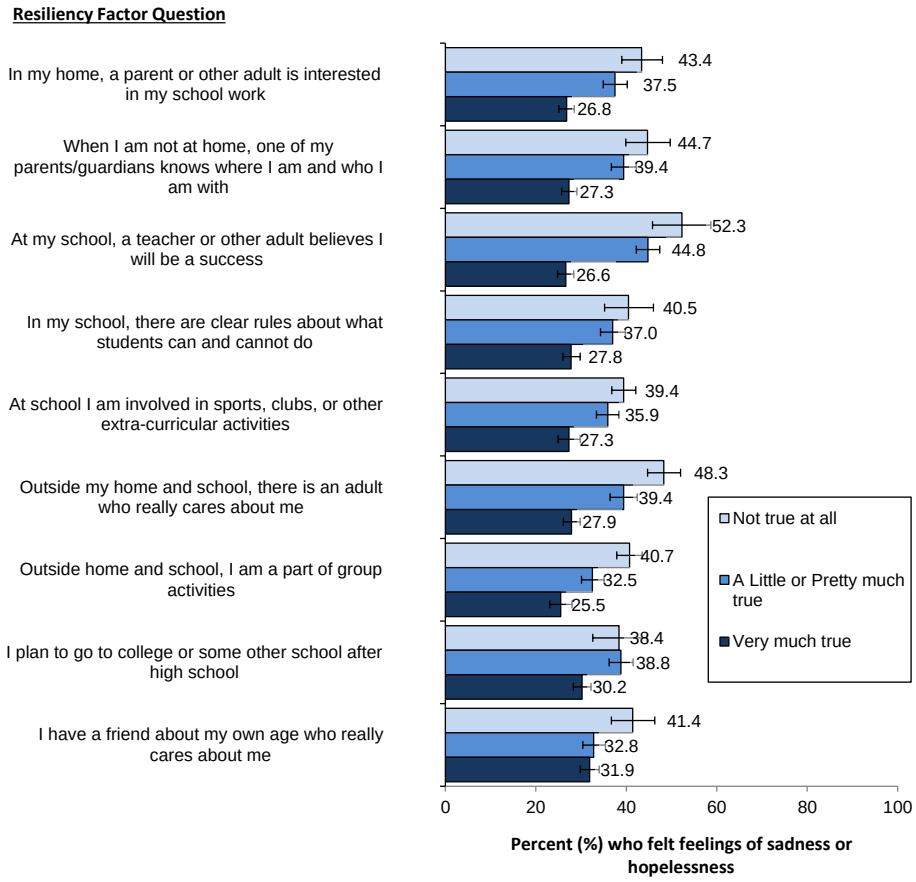
Students were less likely to be current cigarette smokers if they said "Very much true" to any of the resiliency questions:



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

Chart 6: Feelings of Sadness or Hopelessness* by Selected Resiliency Factors, Grades 9-12, 2015

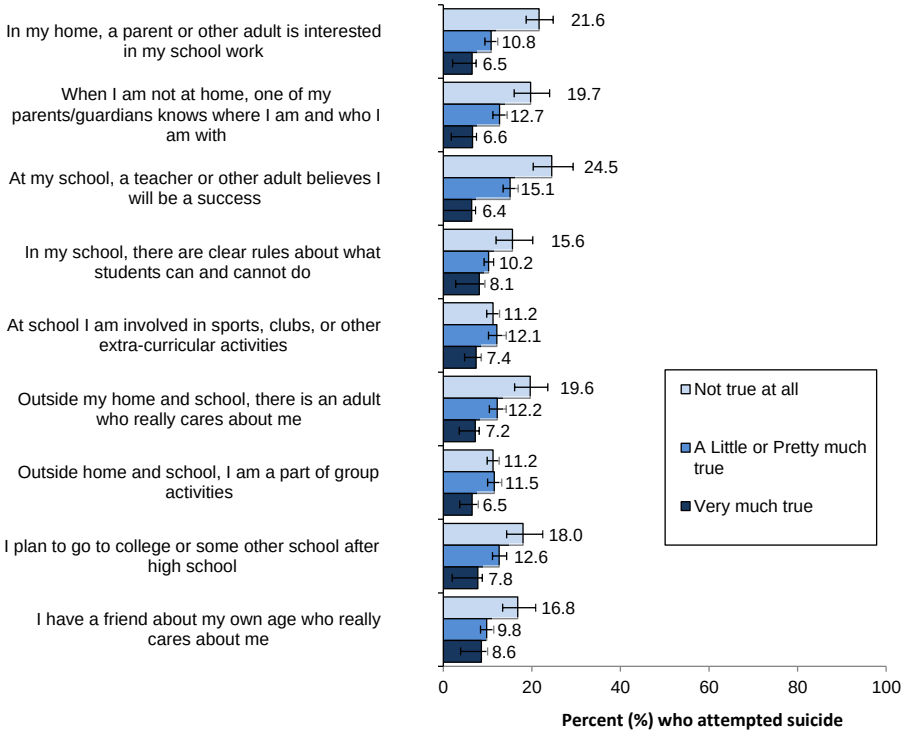
Students were less likely to have feelings of sadness and hopelessness if they said "Very much true" to any of the resiliency questions:



** 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, 2015

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



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

Section 2

Consumption

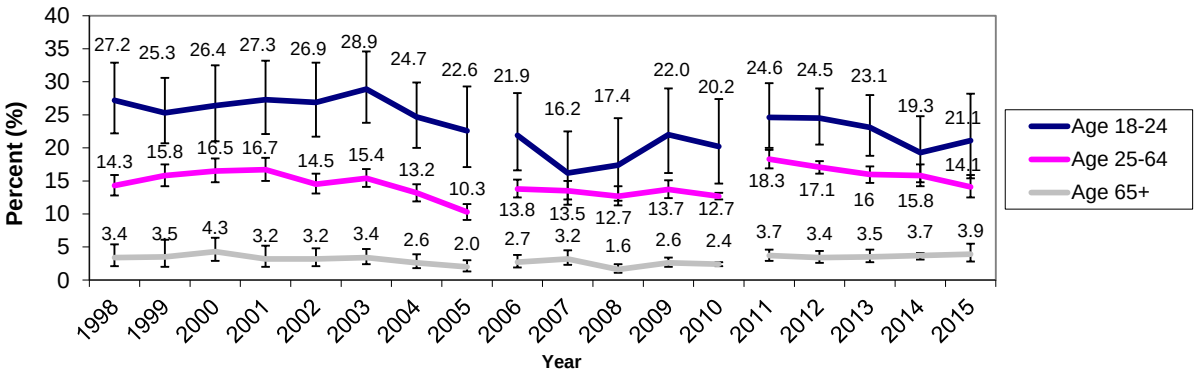
ADULT BINGE DRINKING

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

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

Chart 1: Binge Drinking (past 30 days)* by Age, Adults Aged 18+, New Mexico, 1998-2015



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

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

Table 1: Binge Drinking (past 30 days) by Age, Sex, and Race, Adults Aged 18+, New Mexico, 2013-2015

		Number				Percent*			
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	2,677	9,620	246	13,090	24.4	21.6	3.6	21.0
	Asian/Pacific Islander	-	930	-	989	-	10.2	-	7.9
	Black	-	1,819	-	2,837	-	13.5	-	14.6
	Hispanic	15,825	59,088	3,567	78,965	27.0	24.6	7.7	22.9
	White	10,511	42,987	4,846	57,917	30.7	19.5	5.4	16.8
	Total	30,051	114,837	9,120	154,166	27.4	21.8	6.2	19.7
Female	American Indian	935	3,085	66	4,173	8.4	6.3	0.7	5.9
	Asian/Pacific Islander	-	1,218	-	1,072	-	10.7	-	7.0
	Black	-	1,701	-	1,954	-	17.9	-	13.6
	Hispanic	9,752	19,632	605	29,558	17.3	8.1	1.1	8.3
	White	4,438	24,394	2,044	30,532	15.4	11.0	2.0	8.6
	Total	14,940	49,846	2,947	67,513	14.9	9.3	1.7	8.3
Total	American Indian	3,552	12,939	261	17,272	16.1	13.8	1.5	13.0
	Asian/Pacific Islander	-	2,146	-	2,065	-	10.5	-	7.4
	Black	-	3,542	421	4,771	-	15.4	9.4	14.1
	Hispanic	25,920	77,383	4,105	107,666	22.5	16.0	4.0	15.4
	White	14,824	67,332	6,845	88,188	23.5	15.2	3.6	12.6
	Total	45,011	163,782	11,950	220,506	21.4	15.4	3.7	13.8

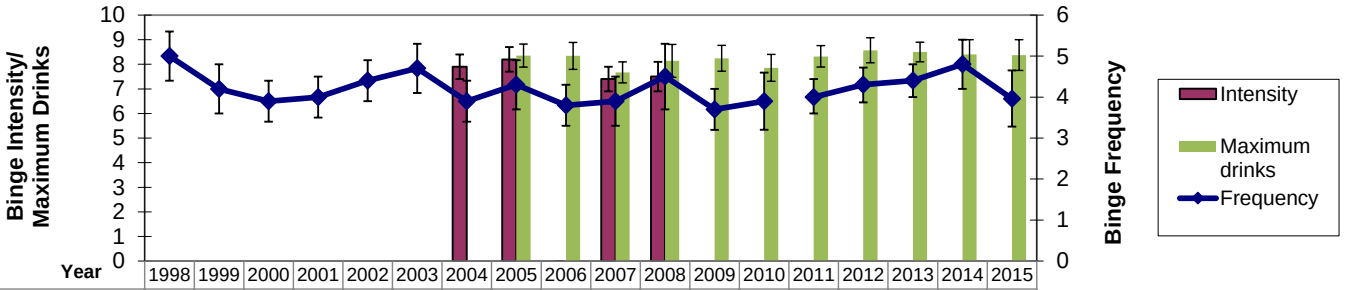
* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAES

ADULT BINGE DRINKING (continued)

Chart 2: Binge Drinking Frequency and Intensity*, Adult Binge Drinkers Aged 18+, New Mexico, 1998-2015



Year	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Intensity							7.9	8.2	0.0	7.4	7.5							
Maximum drinks								8.4	8.3	7.7	8.1	8.2	7.9	8.3	8.6	8.5	8.4	8.4
Frequency	5.0	4.2	3.9	4.0	4.4	4.7	3.9	4.3	3.8	3.9	4.5	3.7	3.9	4.0	4.3	4.4	4.8	4.0

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

Source: BRFSS; SAES

Table 2: Binge Drinking (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2013-2015

	Number						Percent*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	2,192	-	1,438	34,703	31,408	70,954	10.2	-	9.5	14.8	13.3	13.6
Catron	-	-	-	-	238	370	-	-	-	-	9.5	11.7
Chaves	-	-	-	2,675	2,586	5,313	-	-	-	11.2	11.5	11.0
Cibola	1,107	-	-	646	383	2,169	14.4	-	-	8.2	7.8	10.4
Colfax	-	-	-	1,315	438	1,936	-	-	-	27.2	7.9	18.2
Curry	-	-	-	1,730	2,807	5,044	-	-	-	13.2	13.6	13.6
De Baca	-	-	-	-	-	60	-	-	-	-	-	3.9
Dona Ana	-	-	-	19,043	5,743	25,890	-	-	-	18.9	10.7	16.1
Eddy	-	-	-	3,357	2,278	5,627	-	-	-	18.9	10.1	13.5
Grant	-	-	-	2,032	2,103	4,268	-	-	-	19.5	17.3	18.4
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	676	-	-	-	-	-	19.0
Lea	-	-	-	5,303	3,577	8,977	-	-	-	21.9	16.8	18.7
Lincoln	-	-	-	769	1,757	2,556	-	-	-	17.0	15.4	15.5
Los Alamos	-	-	-	-	1,141	1,688	-	-	-	-	10.8	12.3
Luna	-	-	-	1,146	509	1,692	-	-	-	10.6	7.2	9.2
McKinley	4,396	-	-	1,079	426	6,077	11.4	-	-	16.4	7.3	11.7
Mora	-	-	-	631	-	1,040	-	-	-	20.5	-	26.8
Otero	495	-	-	2,159	3,133	6,349	17.9	-	-	13.1	11.0	12.6
Quay	-	-	-	640	578	1,222	-	-	-	23.0	15.1	17.9
Rio Arriba	355	-	-	2,079	304	2,758	8.9	-	-	9.8	6.5	9.1
Roosevelt	-	-	-	1,094	1,155	2,382	-	-	-	20.4	13.2	16.0
Sandoval	2,766	-	-	7,365	6,400	17,068	23.2	-	-	20.6	12.2	16.4
San Juan	3,830	-	-	2,017	4,754	10,686	11.5	-	-	12.8	11.4	11.6
San Miguel	-	-	-	1,623	602	2,329	-	-	-	9.5	12.5	10.2
Santa Fe	-	-	-	5,884	7,720	14,555	-	-	-	10.7	13.4	12.2
Sierra	-	-	-	-	1,204	1,683	-	-	-	-	17.3	17.3
Socorro	-	-	-	1,230	839	2,258	-	-	-	19.6	15.2	16.8
Taos	-	-	-	1,628	1,161	2,839	-	-	-	11.4	10.6	10.5
Torrance	-	-	-	-	656	902	-	-	-	-	9.3	7.3
Union	-	-	-	-	154	301	-	-	-	-	7.6	8.3
Valencia	-	-	-	5,267	2,827	9,050	-	-	-	16.3	12.7	15.7
New Mexico	17,272	2,065	4,771	107,666	88,188	220,506	13.0	7.4	14.1	15.4	12.6	13.8

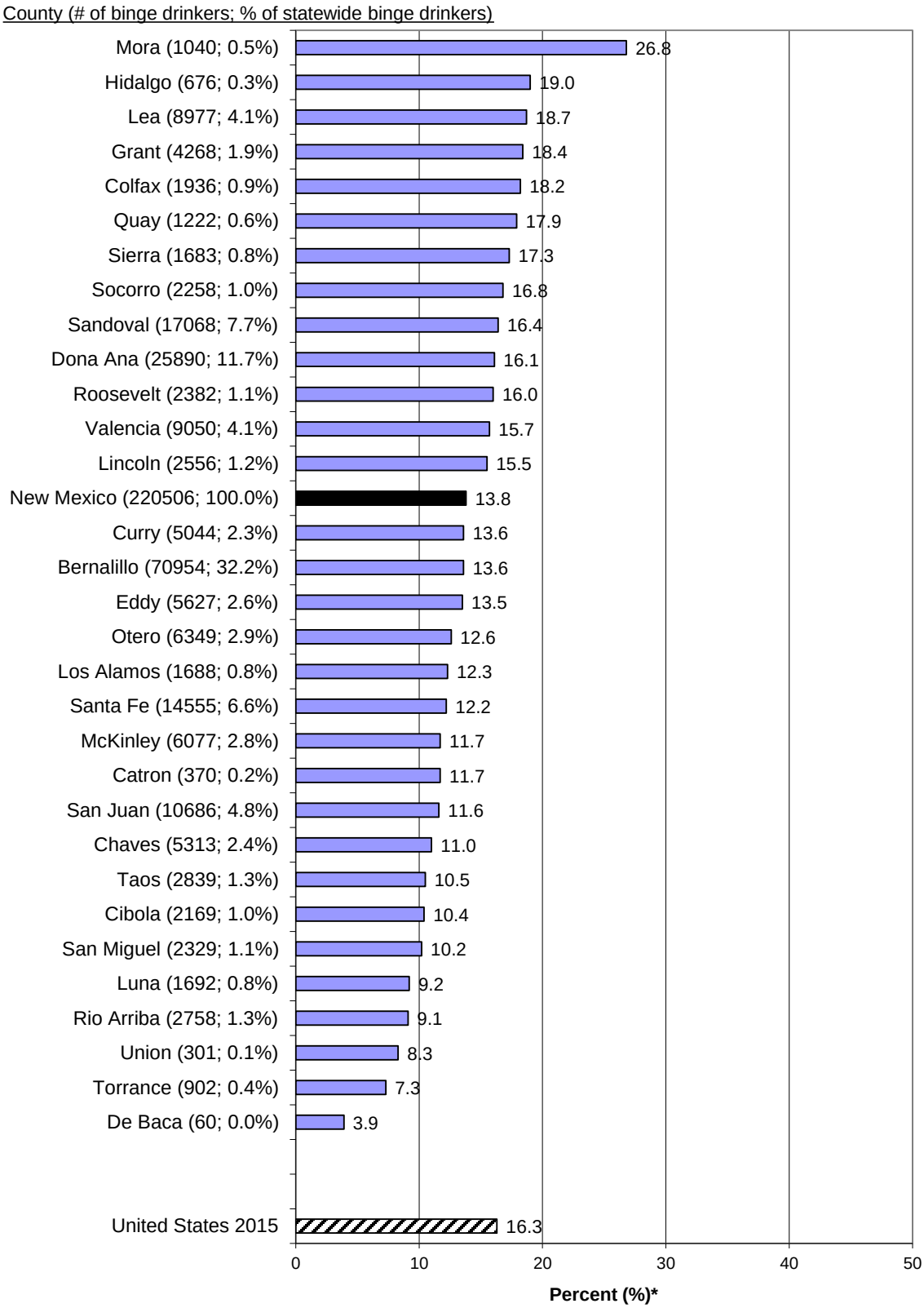
* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAES

ADULT BINGE DRINKING (continued)

Chart 3: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015

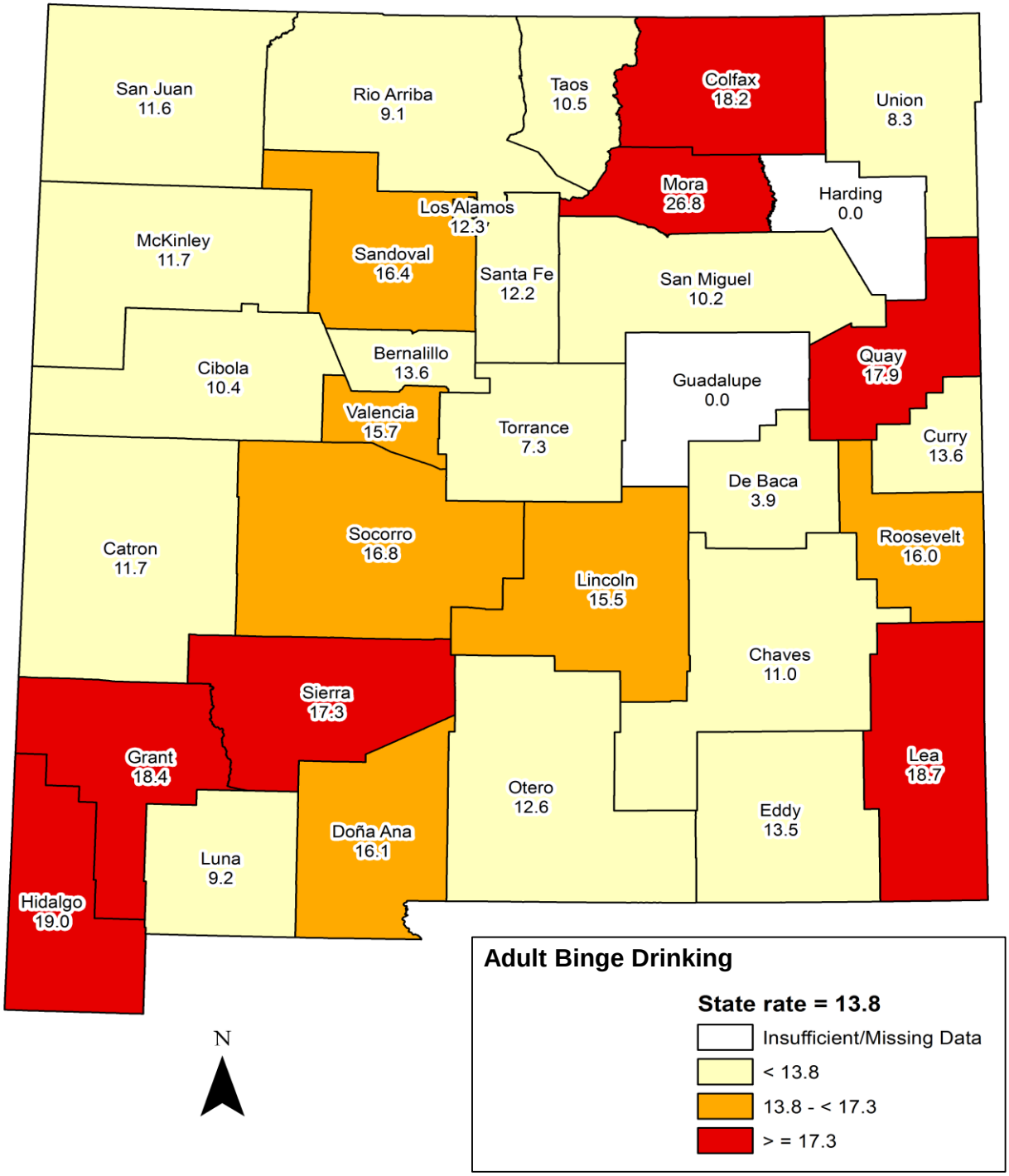


* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

ADULT BINGE DRINKING (continued)

Chart 4: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015



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

Insufficient data: Rate not reported due to small number of respodents (< 50) in cell

Source: BRFSS; SAES

YOUTH CURRENT DRINKING

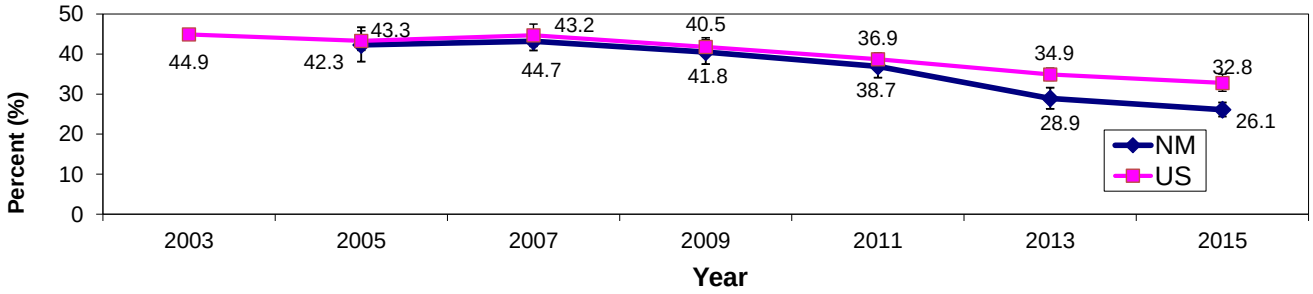
Problem Statement

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

In 2015, 26.1% of high school students reported that they were current drinkers. This is a significant decrease from 43.3% in 2005. Boys and girls are equally likely to be current drinkers and the percent of youth who drink increases with grade level. However, it is important to note that by ninth grade, close to one in five students are already drinking. Students who identify as Hispanic are most likely to currently drink, followed by Black and White students. American Indian students and Asian/Pacific Islander students are the least likely to drink.

Grant County has the highest prevalence of current drinking among high school students (37.6%), followed by Luna (37.1%), and Sierra (35.4%) counties. De Baca has the lowest percent (14.7%).

Chart 1: Current Drinking* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



* “Current drinking” is defined as responding one or more days to the question: “During the past 30 days, on how many days did you have at least one drink of alcohol?”

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

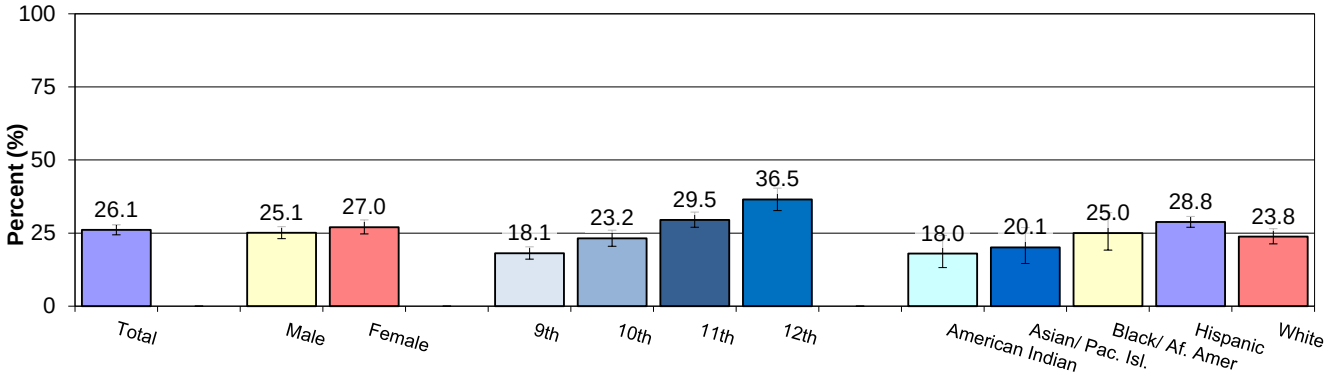
Table 1: Current Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	5.7 (1.8-16.4)	19.8 (10.8-33.4)	28.9 (22.7-36.1)	15.5 (6.5-32.6)	17.3 (14.3-20.8)
	Asian/Pacific Islander	--	--	--	--	22.8 (14.9-33.3)
	Black	--	--	--	--	24.0 (16.5-33.5)
	Hispanic	20.1 (16.6-24.1)	22.8 (19.5-26.4)	32.4 (28.2-37.0)	42.1 (37.3-47.0)	27.8 (25.6-30.1)
	White	14.6 (9.8-21.1)	15.2 (10.4-21.7)	20.5 (13.5-30.0)	41.7 (33.6-50.3)	22.8 (19.6-26.3)
	Total	16.9 (14.4-19.9)	20.2 (17.3-23.4)	28.7 (25.2-32.5)	38.8 (34.4-43.3)	25.1 (23.1-27.2)
Female	American Indian	10.9 (5.7-19.6)	21.5 (9.2-42.5)	19.8 (10.7-33.8)	23.3 (14.3-35.6)	18.8 (11.3-29.7)
	Asian/Pacific Islander	--	--	--	--	16.6 (9.3-27.8)
	Black	--	--	--	--	26.5 (17.8-37.6)
	Hispanic	21.7 (18.4-25.3)	28.5 (23.5-34.0)	33.9 (29.8-38.3)	37.6 (31.7-43.8)	29.6 (26.9-32.6)
	White	17.2 (12.8-22.7)	24.5 (18.3-32.0)	27.0 (20.1-35.3)	32.3 (23.7-42.3)	24.9 (21.6-28.7)
	Total	19.2 (16.9-21.9)	26.2 (21.8-31.0)	30.5 (27.2-34.0)	34.3 (29.3-39.7)	27.0 (24.7-29.5)
Total	American Indian	8.2 (3.9-16.7)	20.7 (15.9-26.4)	24.3 (18.5-31.2)	19.5 (11.3-31.7)	18.0 (13.2-24.2)
	Asian/Pacific Islander	--	--	--	--	20.1 (14.6-26.9)
	Black	10.9 (5.0-22.1)	--	--	--	25.0 (19.2-32.0)
	Hispanic	20.9 (18.2-23.9)	25.7 (22.5-29.3)	33.2 (30.4-36.1)	39.7 (35.5-44.0)	28.8 (27.0-30.7)
	White	15.9 (12.8-19.7)	19.4 (15.3-24.2)	23.6 (18.7-29.5)	37.3 (30.6-44.6)	23.8 (21.3-26.5)
	Total	18.1 (16.1-20.3)	23.2 (20.5-26.0)	29.5 (27.0-32.2)	36.5 (32.7-40.4)	26.1 (24.4-27.9)

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

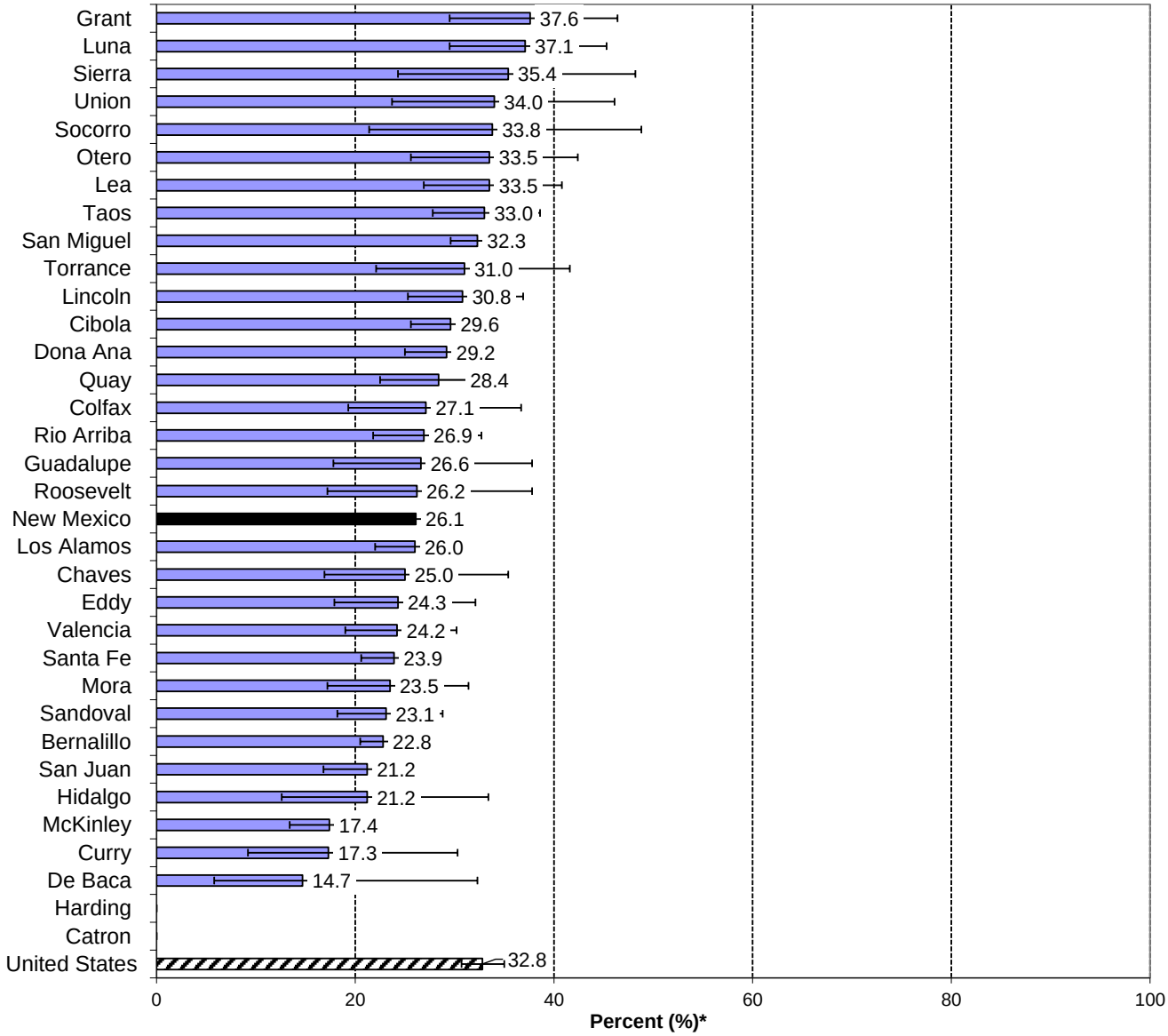
YOUTH CURRENT DRINKING (continued)

Chart 2: Current Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Current Drinking* by County, Grades 9 - 12, New Mexico, 2015



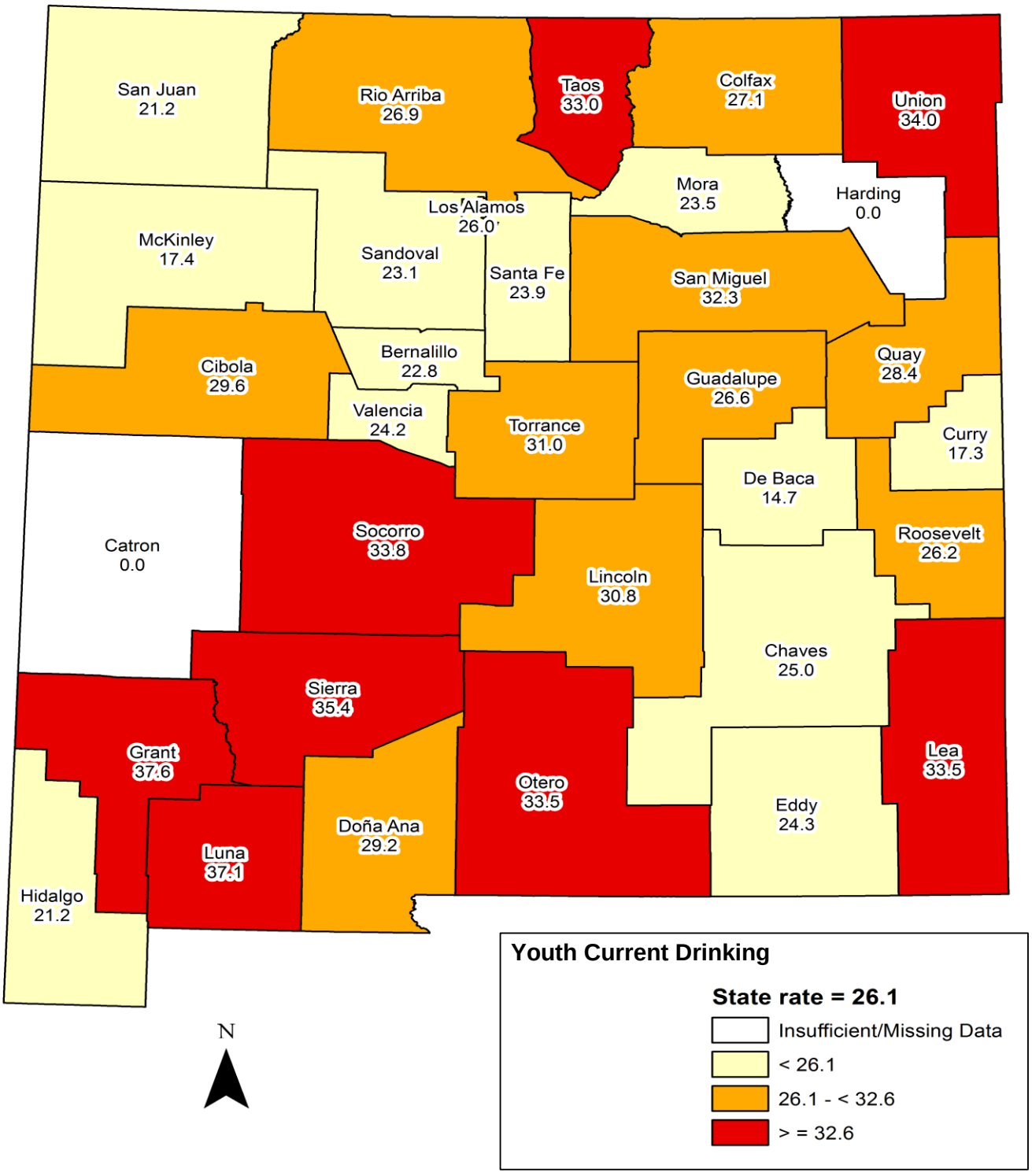
* Estimate of percent of high school students who reported current drinking in past 30 days

Harding and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT DRINKING (continued)

Chart 4: Current Drinking* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH BINGE DRINKING

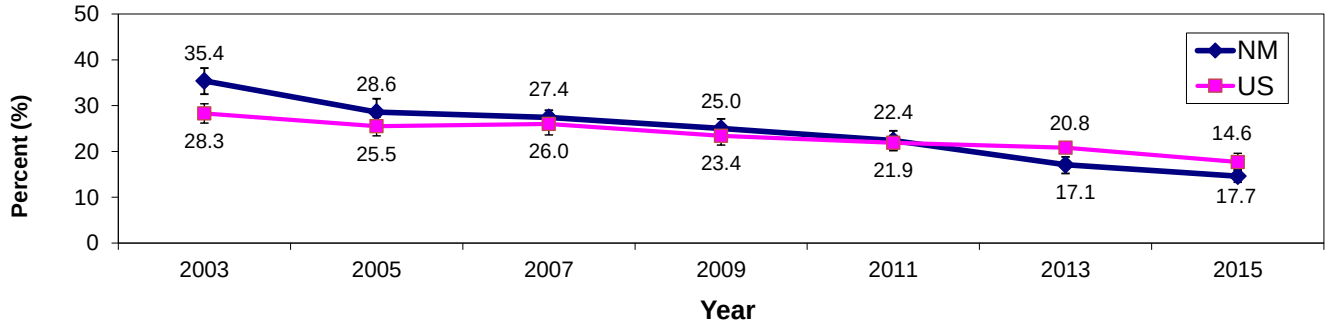
Problem Statement

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

In 2015, 14.6% of New Mexico high school students reported binge drinking at least once in the past month. Binge drinking is the norm among current high school drinkers in New Mexico. In 2015, of the 26.1% of students who were current drinkers, 60.5% were binge drinkers. Chart 1 demonstrates that binge drinking prevalence has been decreasing in New Mexico since 2003, as it has been in the US since at least 2001. In 2015, the difference between the US (17.7) and New Mexico (14.6%, 95%CI [13.3-15.9]) rates for binge drinking was not statistically significant.

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

Chart 1: Binge Drinking* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

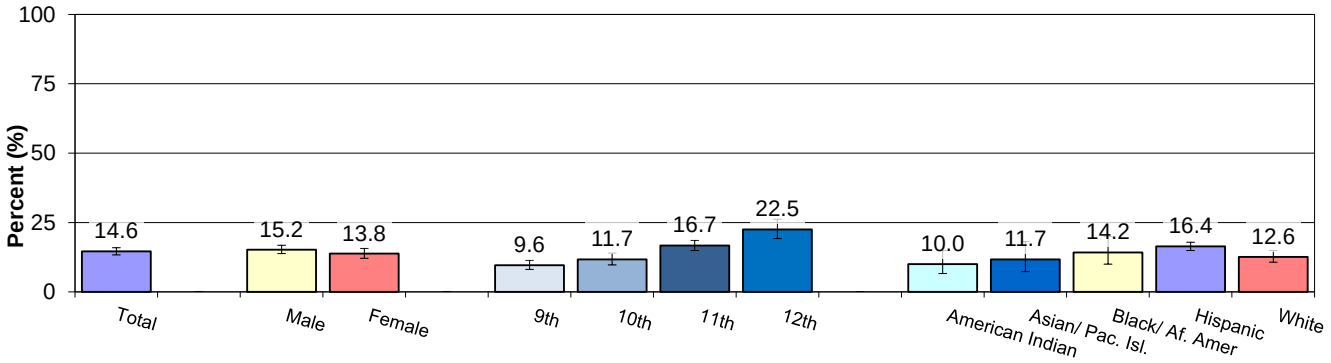
Table 1: Binge Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	3.1 (1.0-9.8)	14.1 (7.1-26.2)	19.1 (13.0-27.1)	7.9 (2.5-22.1)	10.9 (8.4-14.0)
	Asian/Pacific Islander	--	--	--	--	17.0 (9.9-27.6)
	Black	--	--	--	--	12.3 (7.4-19.7)
	Hispanic	11.0 (8.4-14.4)	14.0 (11.3-17.3)	19.1 (15.6-23.2)	29.3 (24.9-34.0)	17.2 (15.3-19.2)
	White	8.6 (5.4-13.4)	5.8 (2.5-12.9)	14.0 (8.5-22.3)	26.1 (18.9-34.7)	13.3 (10.7-16.4)
	Total	9.5 (7.5-11.9)	11.6 (9.2-14.5)	17.6 (14.8-20.9)	25.5 (21.8-29.6)	15.2 (13.8-16.8)
Female	American Indian	5.7 (2.7-11.5)	10.9 (3.7-28.1)	10.2 (5.0-19.8)	10.8 (3.9-26.7)	9.2 (4.3-18.6)
	Asian/Pacific Islander	--	--	--	--	5.3 (1.9-13.9)
	Black	--	--	--	--	17.1 (9.4-29.0)
	Hispanic	11.4 (9.1-14.2)	13.5 (10.5-17.1)	17.6 (14.8-20.9)	21.9 (16.3-28.6)	15.6 (13.8-17.6)
	White	6.2 (3.7-10.4)	9.1 (5.5-14.6)	14.3 (10.0-20.1)	19.0 (12.5-27.8)	11.9 (9.4-14.9)
	Total	9.6 (7.9-11.7)	11.9 (8.9-15.6)	15.8 (13.6-18.2)	19.6 (15.0-25.2)	13.8 (12.1-15.7)
Total	American Indian	4.4 (2.0-9.4)	12.4 (9.6-16.0)	14.6 (10.2-20.3)	9.5 (3.6-23.0)	10.0 (6.6-14.9)
	Asian/Pacific Islander	--	--	--	--	11.7 (7.3-18.1)
	Black	8.0 (3.5-17.2)	--	--	--	14.2 (10.0-20.0)
	Hispanic	11.3 (9.4-13.5)	13.8 (11.5-16.4)	18.3 (16.2-20.6)	25.3 (21.5-29.7)	16.4 (14.9-17.9)
	White	7.5 (5.3-10.4)	7.2 (4.3-11.8)	14.2 (10.6-18.6)	22.8 (17.4-29.2)	12.6 (10.7-14.9)
	Total	9.6 (8.1-11.4)	11.7 (9.7-14.0)	16.7 (14.9-18.6)	22.5 (19.2-26.2)	14.6 (13.3-15.9)

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

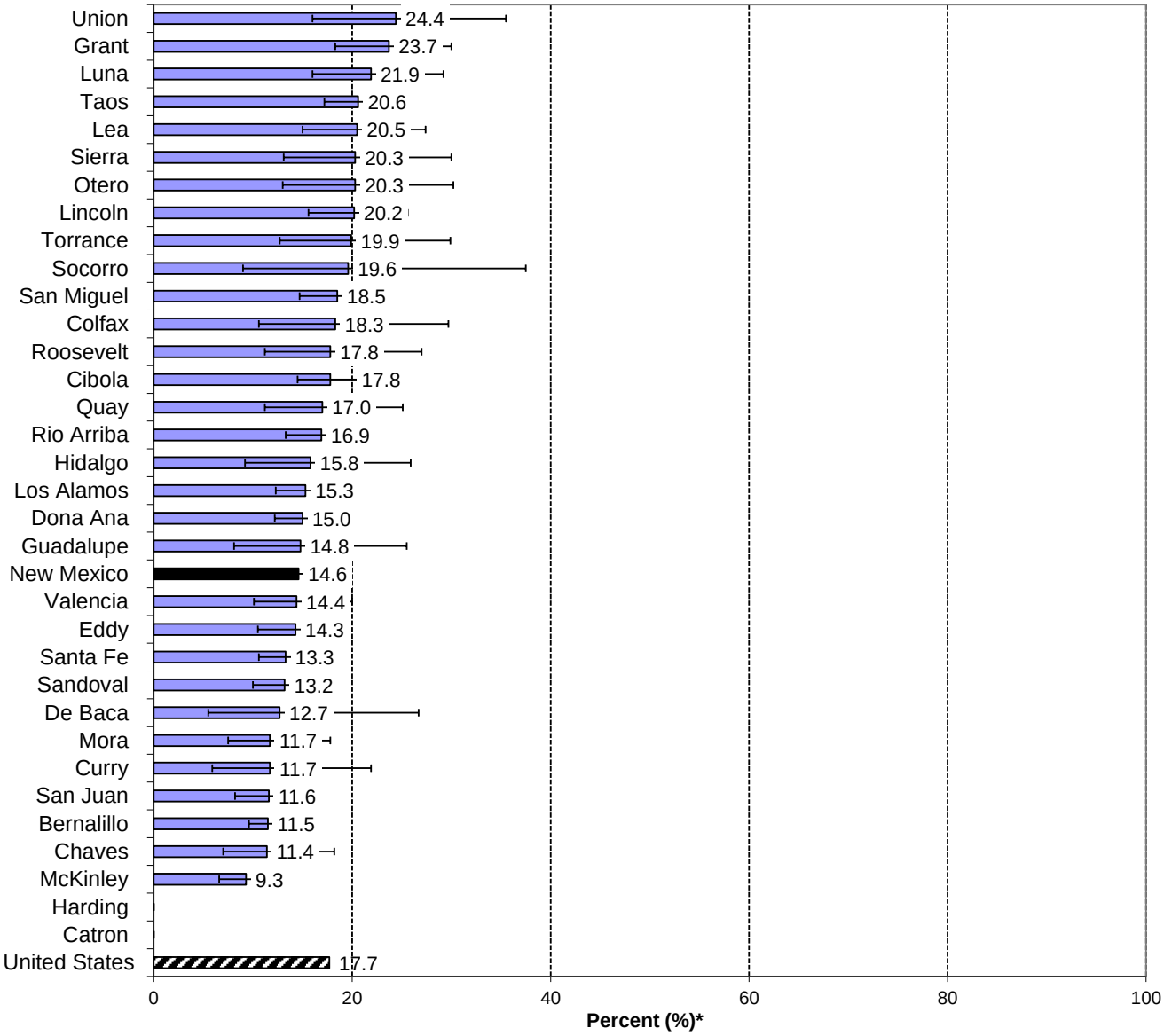
YOUTH BINGE DRINKING (continued)

Chart 2: Binge Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Binge Drinking* by County, Grades 9 - 12, New Mexico, 2015



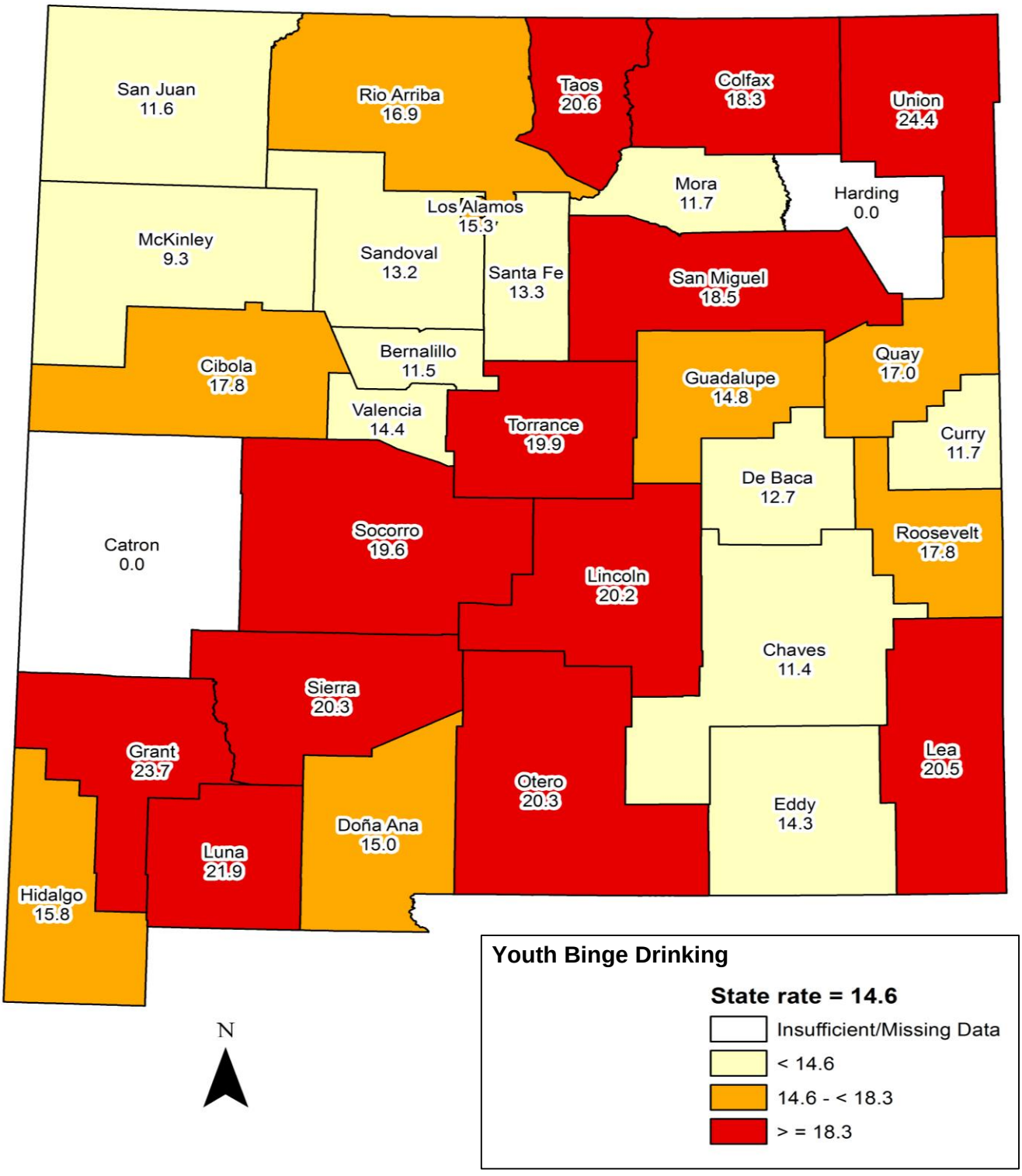
* Estimate of percent of high school students who reported binge drinking at least once in past 30 days

Harding and Catron 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* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH 10 PLUS DRINKS

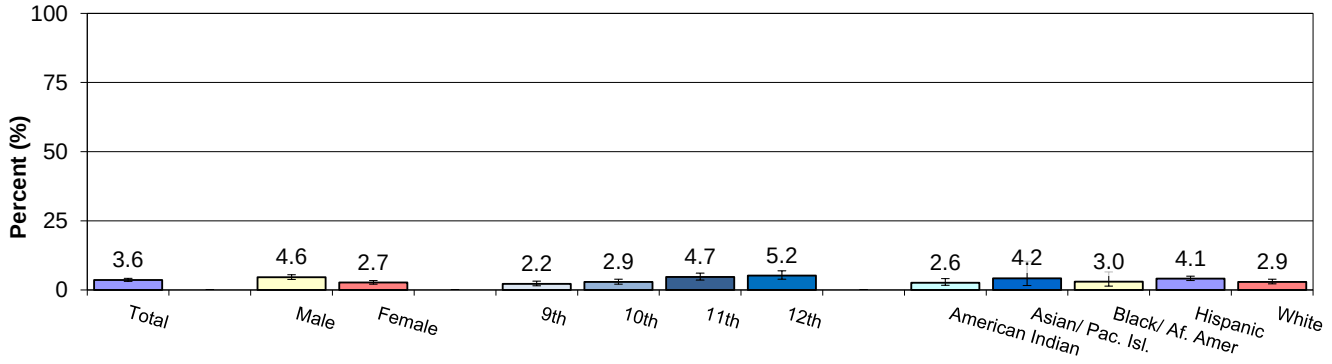
Problem Statement

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

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

Students in the 12th grade are more likely to drink 10 or more drinks on an occasion than ninth grade students. Although boys and girls are equally likely to drink (see current drinking indicator), boys are almost twice as likely to drink ten or more drinks on an occasion than girls. Asian/Pacific Islander students are least likely to consume ten or more drinks. American Indian and White students are significantly less likely to consume ten or more drinks than Hispanic students. Prevalence was fairly similar by county, ranging from 0.8% of students (Mora County) to 11.6% of students (Union Cunty).

Chart 1: 10 Plus Drinks, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

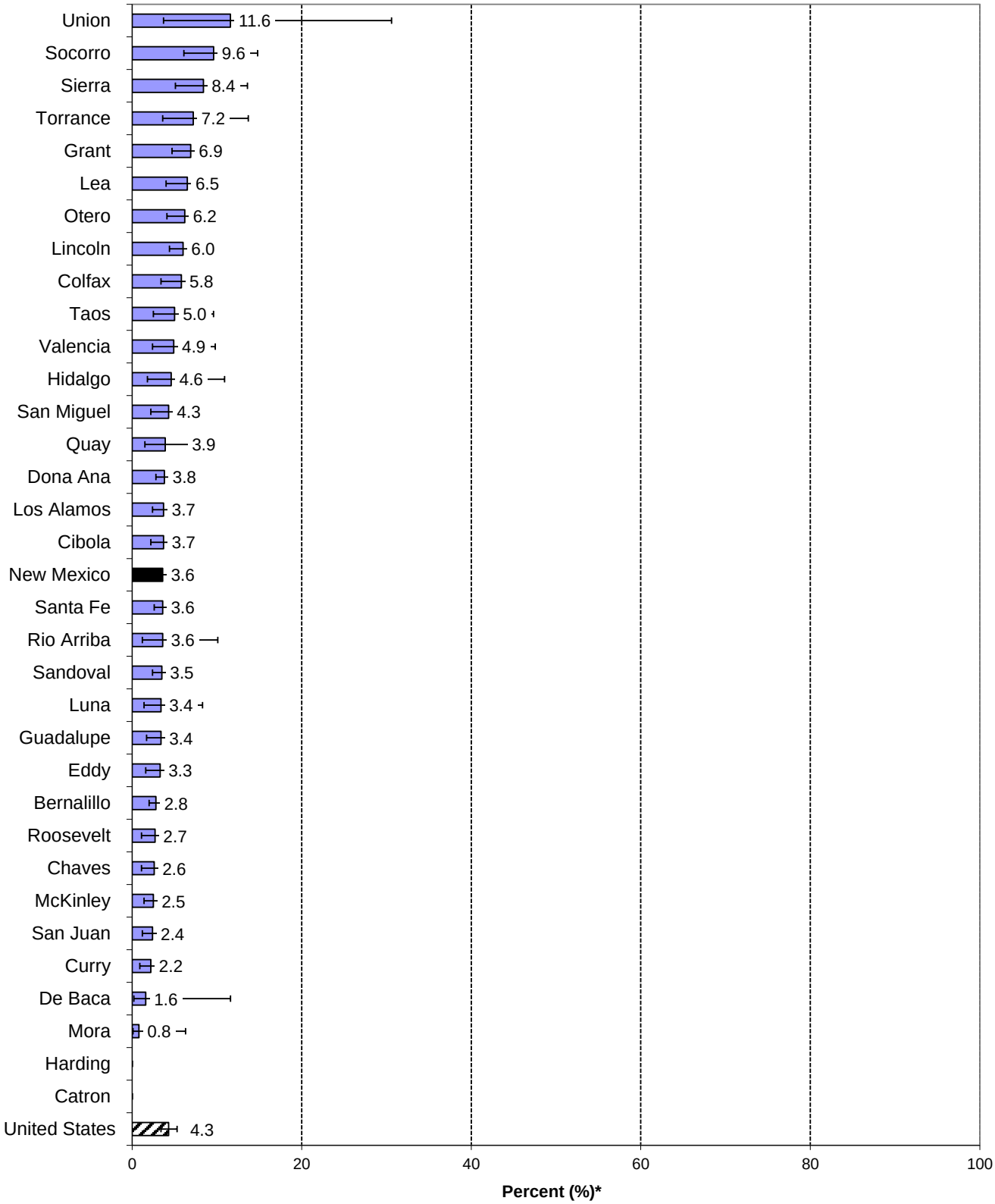
Table 1: 10 Plus Drinks, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	0.6 (0.1-4.3)	3.2 (1.2-8.5)	6.8 (2.5-17.4)	2.4 (0.5-10.5)	3.3 (1.9-5.6)
	Asian/Pacific Islander	--	--	--	--	6.3 (2.4-15.6)
	Black	--	--	--	--	3.6 (1.2-9.9)
	Hispanic	2.6 (1.5-4.5)	4.1 (2.8-5.8)	7.3 (5.1-10.5)	8.5 (5.7-12.5)	5.2 (4.1-6.5)
	White	2.4 (0.7-7.5)	2.8 (1.0-7.3)	3.2 (1.5-6.5)	7.5 (4.6-11.9)	3.9 (2.8-5.4)
	Total	2.5 (1.4-4.2)	3.6 (2.5-5.2)	6.0 (4.3-8.3)	7.3 (5.3-10.0)	4.6 (3.8-5.5)
Female	American Indian	2.5 (0.6-10.3)	4.1 (2.7-6.2)	0.5 (0.1-3.5)	0.6 (0.2-2.6)	2.0 (1.1-3.5)
	Asian/Pacific Islander	--	--	--	--	1.8 (0.2-12.6)
	Black	--	--	--	--	2.3 (0.6-8.5)
	Hispanic	2.2 (1.3-3.6)	1.7 (1.0-3.0)	4.8 (3.0-7.8)	4.2 (2.4-7.4)	3.1 (2.4-4.1)
	White	0.8 (0.2-3.3)	2.9 (1.0-8.4)	2.0 (0.7-5.5)	1.9 (0.5-6.5)	1.9 (1.0-3.3)
	Total	1.9 (1.1-3.0)	2.2 (1.4-3.5)	3.5 (2.2-5.4)	3.2 (1.9-5.2)	2.7 (2.1-3.4)
Total	American Indian	1.5 (0.4-5.2)	3.7 (2.5-5.4)	3.7 (1.6-8.6)	1.5 (0.4-5.7)	2.6 (1.7-4.1)
	Asian/Pacific Islander	--	--	--	--	4.2 (1.6-10.4)
	Black	1.5 (0.3-8.0)	--	--	--	3.0 (1.4-6.5)
	Hispanic	2.4 (1.5-3.7)	2.8 (2.0-3.9)	6.0 (4.5-8.0)	6.2 (4.5-8.6)	4.1 (3.4-5.0)
	White	1.6 (0.8-3.4)	2.8 (1.3-5.9)	2.6 (1.5-4.5)	4.9 (3.1-7.6)	2.9 (2.2-3.9)
	Total	2.2 (1.5-3.2)	2.9 (2.1-3.9)	4.7 (3.6-6.1)	5.2 (3.9-6.9)	3.6 (3.1-4.2)

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

YOUTH 10 PLUS DRINKS (continued)

Chart 2: 10 Plus Drinks* by County, Grades 9 - 12, New Mexico, 2015



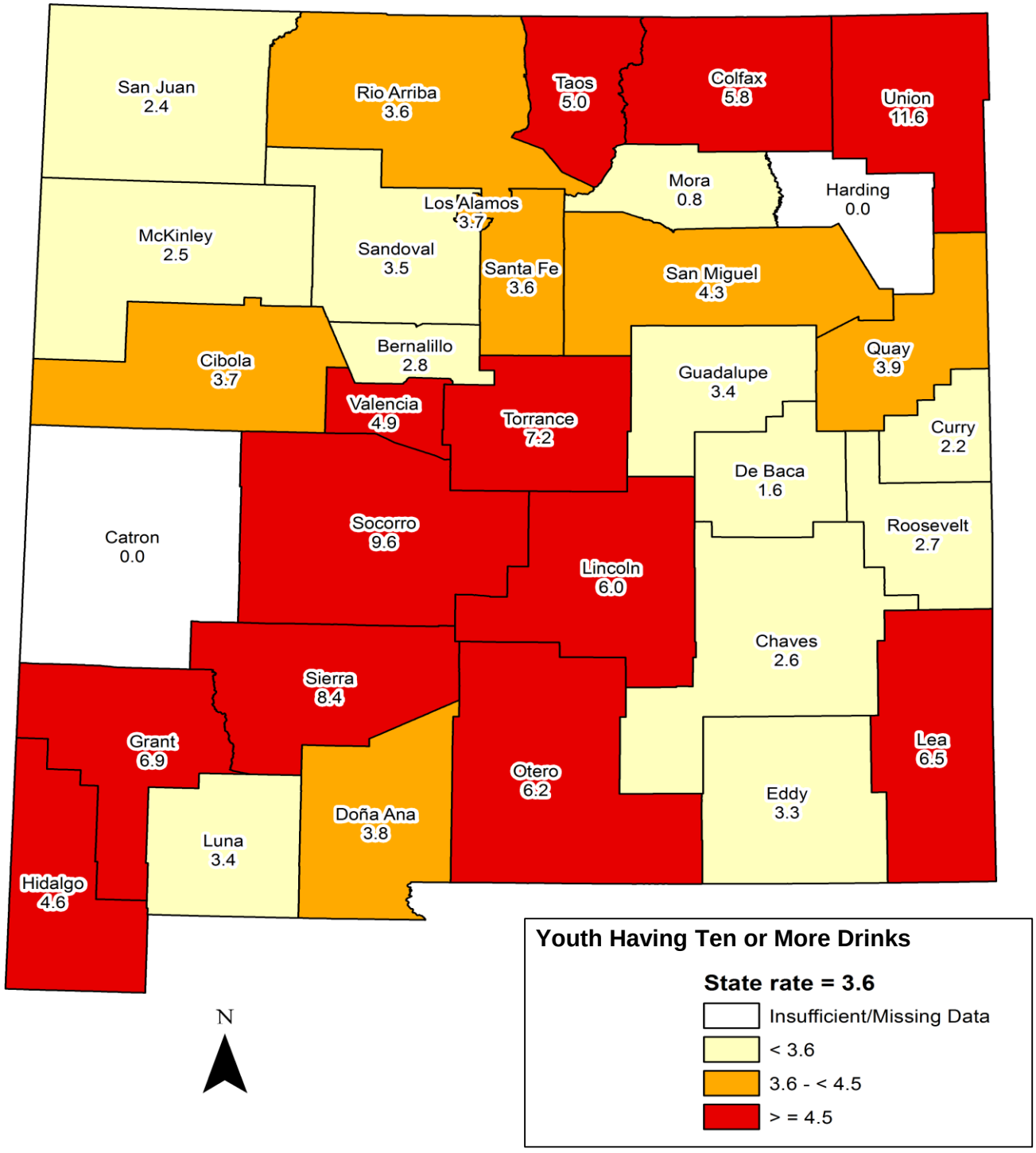
* Estimate of percent of high school students who reported binge drinking at least once in past 30 days

Harding and Catron 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 10 PLUS DRINKS (continued)

Chart 3: 10 Plus Drinks* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

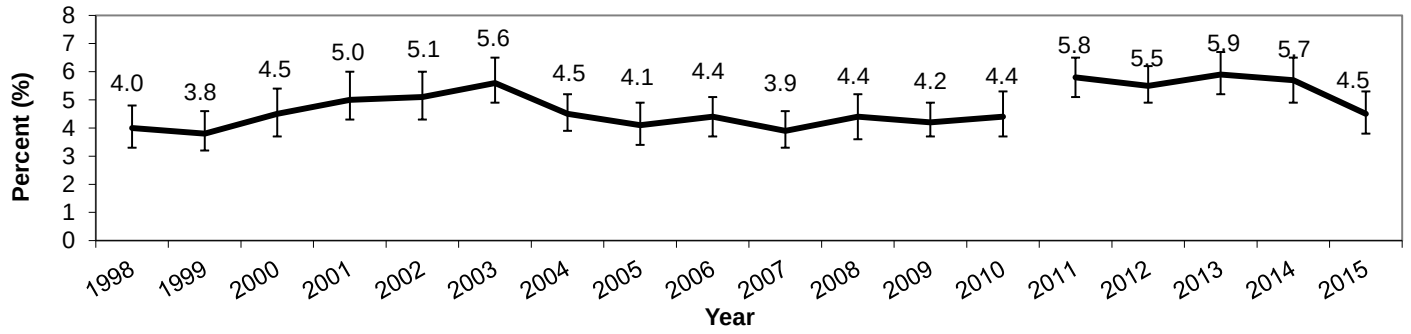
ADULT HEAVY DRINKING

Problem Statement

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

Chart 1 shows that adult heavy drinking prevalence has been, more or less, constant since 2005. Heavy drinking prevalence is lower among adults in New Mexico (5.4%) than in the US overall (5.9%). As shown in Table 1, heavy drinking was most prevalent among adults in the 25-64 age group, with 6.0% reporting past-month heavy drinking. New Mexico men were somewhat more likely to report chronic drinking than women (6.4% v. 4.5%); and White males had the highest reported rate of heavy drinking (6.8%) followed by American Indian males (6.3%). However, among women, Black females had the highest rate (11.6%), followed by White women (6.9%).

Chart 1: Heavy Drinking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2015



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

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

Table 1: Heavy Drinking (past 30 days) by Age, Sex, and Race/Ethnicity, Adults Aged 18+, New Mexico, 2013-2015

		Number				Percent*			
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	815	2,754	271	3,909	7.4	6.2	3.9	6.3
	Asian/Pacific Islander	-	0	-	0	-	0.0	-	0.0
	Black	-	522	-	1,073	-	3.9	-	5.5
	Hispanic	3,340	16,440	2,010	21,805	5.7	6.8	4.4	6.3
	White	2,138	17,416	3,938	23,368	6.2	7.9	4.4	6.8
	Total	6,755	37,281	6,318	50,290	6.2	7.1	4.3	6.4
Female	American Indian	435	716	0	1,216	3.9	1.5	0.0	1.7
	Asian/Pacific Islander	-	213	-	186	-	1.9	-	1.2
	Black	-	1,832	-	1,667	-	19.3	-	11.6
	Hispanic	2,368	6,020	586	8,885	4.2	2.5	1.0	2.5
	White	1,357	18,160	5,128	24,312	4.7	8.2	5.0	6.9
	Total	4,101	26,677	5,870	36,429	4.1	5.0	3.4	4.5
Total	American Indian	1,231	3,545	208	5,127	5.6	3.8	1.2	3.9
	Asian/Pacific Islander	-	201	-	179	-	1.0	-	0.6
	Black	-	2,423	84	2,860	-	10.5	1.9	8.4
	Hispanic	5,757	22,095	2,566	30,445	5.0	4.6	2.5	4.3
	White	3,480	35,576	9,074	47,682	5.5	8.0	4.7	6.8
	Total	10,845	63,818	12,165	86,517	5.2	6.0	3.8	5.4

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

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

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Problem Statement (continued)

White males had the highest heavy drinking rates (6.8%), followed by Hispanics (6.3) and American Indians (6.3). However, American Indian males have the highest rates of alcohol-related chronic disease death (70.2 deaths per 100,000 population), followed by Hispanics (31.4) and Whites (13.4). Among women, Black/African American had the highest rates of heavy drinking (11.6), followed by Whites (6.9). However, American Indian females have the highest rates of alcohol-related chronic disease death (47.3 deaths per 100,000 population), followed by Hispanics (12.4) and Whites (6.8).

Between 2013-2015, as shown in Table 2 and Chart 2, heavy drinking rates were highest in Hidalgo (10.9%), Mora (10.3%), and Catron (9.2%) counties; and, substantially lower in counties that have among the highest rates of alcohol-related chronic disease death rates (e.g., Rio Arriba, McKinley, Cibola). High rates in Catron County are driven by high rates in the White population. In Mora County, high rates are driven by the Hispanic population.

Table 2: Heavy Drinking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2013-2015

	Number						Percent*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	844	-	1,293	9,109	16,158	27,543	3.9	-	8.5	3.9	6.8	5.3
Catron	-	-	-	-	295	292	-	-	-	-	11.8	9.2
Chaves	-	-	-	932	1,441	2,425	-	-	-	3.9	6.4	5.0
Cibola	476	-	-	147	254	832	6.2	-	-	1.9	5.2	4.0
Colfax	-	-	-	223	326	541	-	-	-	4.6	5.9	5.1
Curry	-	-	-	596	1,560	2,317	-	-	-	4.5	7.6	6.3
De Baca	-	-	-	-	-	28	-	-	-	-	-	1.8
Dona Ana	-	-	-	5,518	3,144	9,221	-	-	-	5.5	5.8	5.7
Eddy	-	-	-	747	1,513	2,437	-	-	-	4.2	6.7	5.9
Grant	-	-	-	909	1,065	1,986	-	-	-	8.7	8.8	8.6
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	389	-	-	-	-	-	10.9
Lea	-	-	-	1,354	1,212	2,636	-	-	-	5.6	5.7	5.5
Lincoln	-	-	-	243	874	1,159	-	-	-	5.4	7.7	7.0
Los Alamos	-	-	-	-	332	830	-	-	-	-	3.1	6.1
Luna	-	-	-	862	351	1,248	-	-	-	8.0	5.0	6.8
McKinley	683	-	-	398	70	1,348	1.8	-	-	6.0	1.2	2.6
Mora	-	-	-	413	-	398	-	-	-	13.4	-	10.3
Otero	176	-	-	497	1,275	2,044	6.4	-	-	3.0	4.5	4.1
Quay	-	-	-	77	252	324	-	-	-	2.8	6.6	4.7
Rio Arriba	129	-	-	853	282	1,352	3.2	-	-	4.0	6.0	4.5
Roosevelt	-	-	-	372	275	694	-	-	-	6.9	3.1	4.7
Sandoval	654	-	-	1,696	3,759	6,046	5.5	-	-	4.7	7.2	5.8
San Juan	1,366	-	-	916	2,195	4,523	4.1	-	-	5.8	5.3	4.9
San Miguel	-	-	-	253	399	724	-	-	-	1.5	8.3	3.2
Santa Fe	-	-	-	2,260	6,098	8,984	-	-	-	4.1	10.5	7.6
Sierra	-	-	-	-	480	502	-	-	-	-	6.9	5.2
Socorro	-	-	-	0	624	580	-	-	-	0.0	11.3	4.3
Taos	-	-	-	468	840	1,369	-	-	-	3.3	7.7	5.0
Torrance	-	-	-	-	173	230	-	-	-	-	2.5	1.9
Union	-	-	-	-	113	135	-	-	-	-	5.6	3.7
Valencia	-	-	-	884	1,760	3,162	-	-	-	2.7	7.9	5.5
New Mexico	5,127	179	2,860	30,445	47,682	86,517	3.9	0.6	8.4	4.3	6.8	5.4

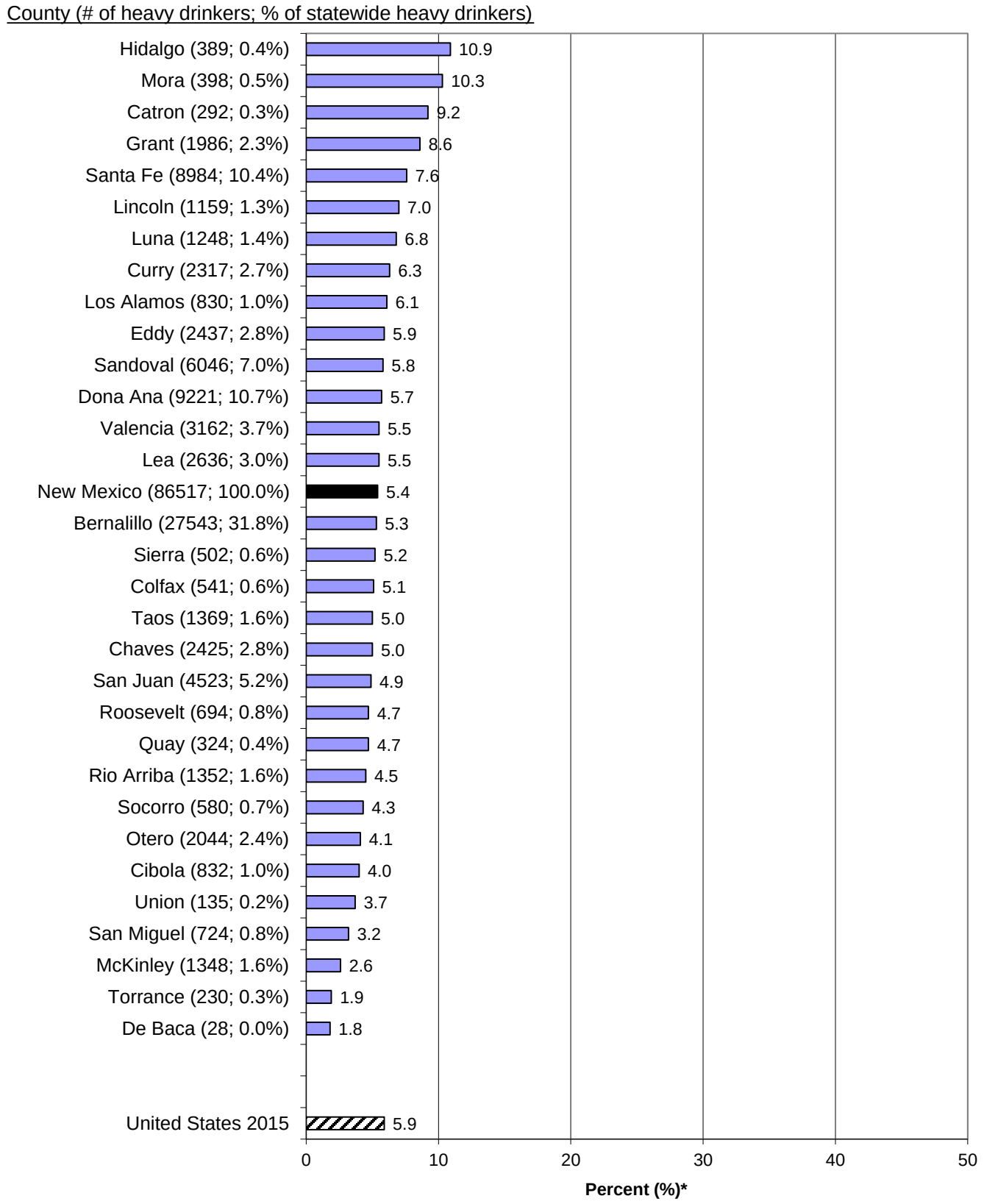
* Estimate of percent of people in population group who reported heavy drinking in past 30 days

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

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Chart 2: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015

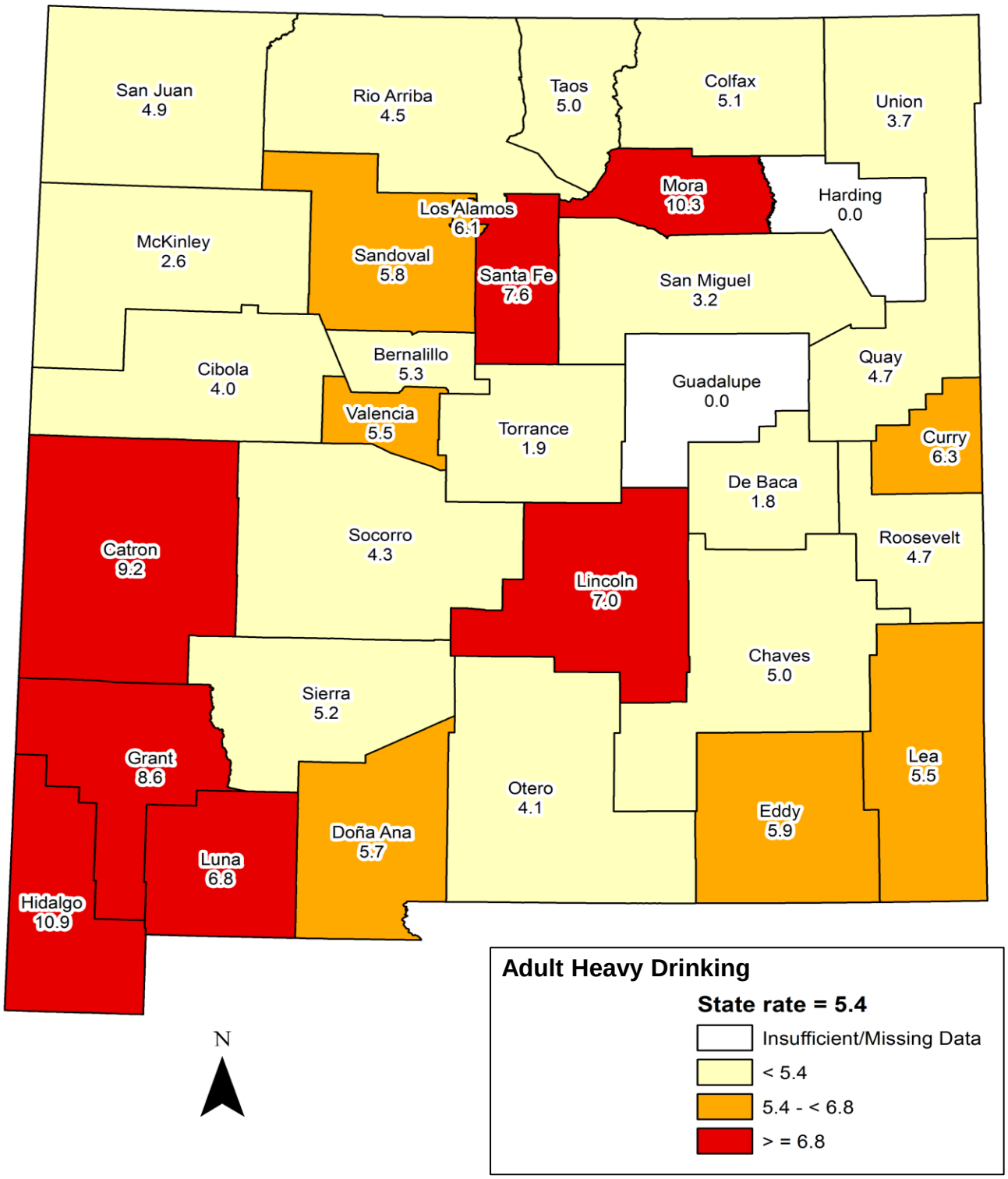


* Estimate of percent of people in population group who reported heavy drinking in past 30 days

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

ADULT HEAVY DRINKING (continued)

Chart 3: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015



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

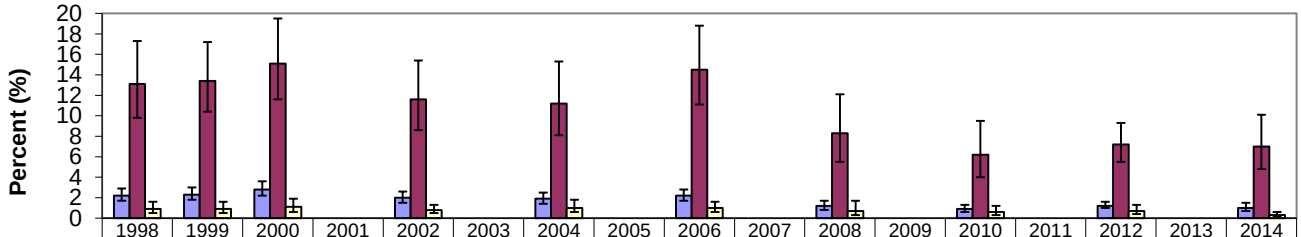
ADULT DRINKING AND DRIVING

Problem Statement

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

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

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



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Total	2.2	2.3	2.8		2.0		1.9		2.2		1.2		0.9		1.2		1
Binge	13.1	13.4	15.1		11.6		11.2		14.5		8.3		6.2		7.2		7
Non-Binge	0.9	0.9	1.1		0.8		1.0		1.0		0.7		0.6		0.7		0.3

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

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

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

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

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

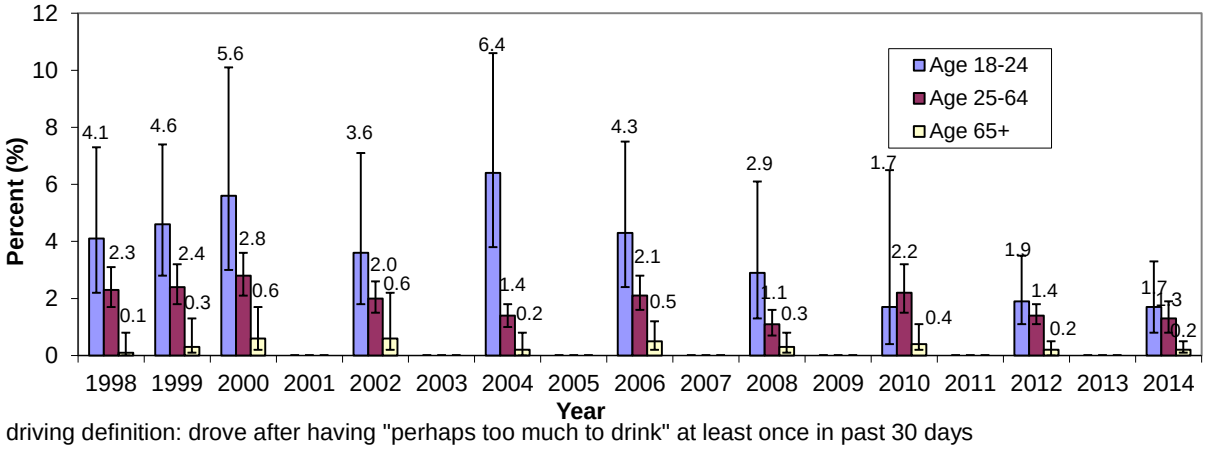
** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

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

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

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



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

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

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

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

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

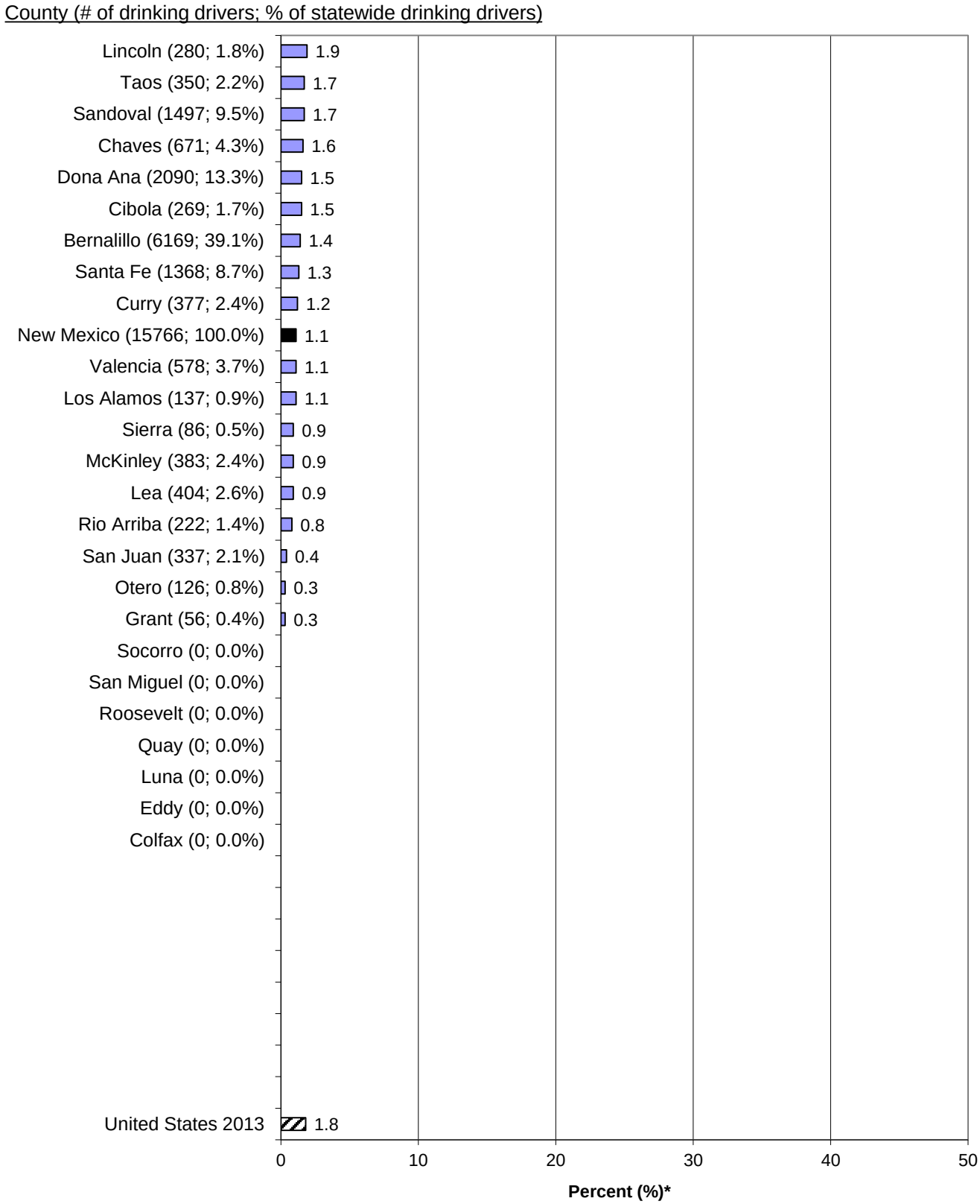
** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

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

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

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



* 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:

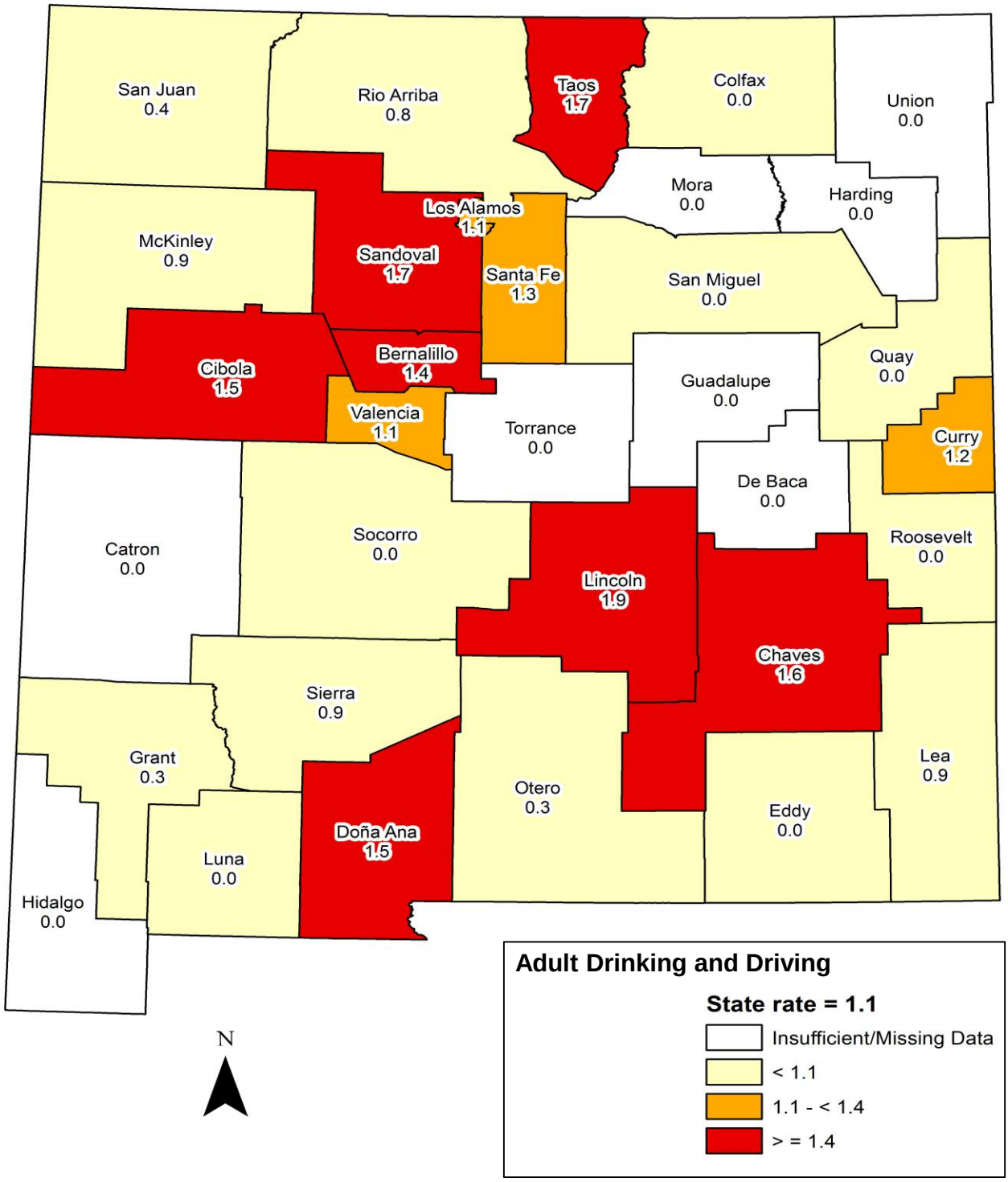
Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Torrance, Union

N/A: United States rate not available

Source: BRFSS; SAES

ADULT DRINKING AND DRIVING (continued)

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



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

YOUTH DRINKING AND DRIVING

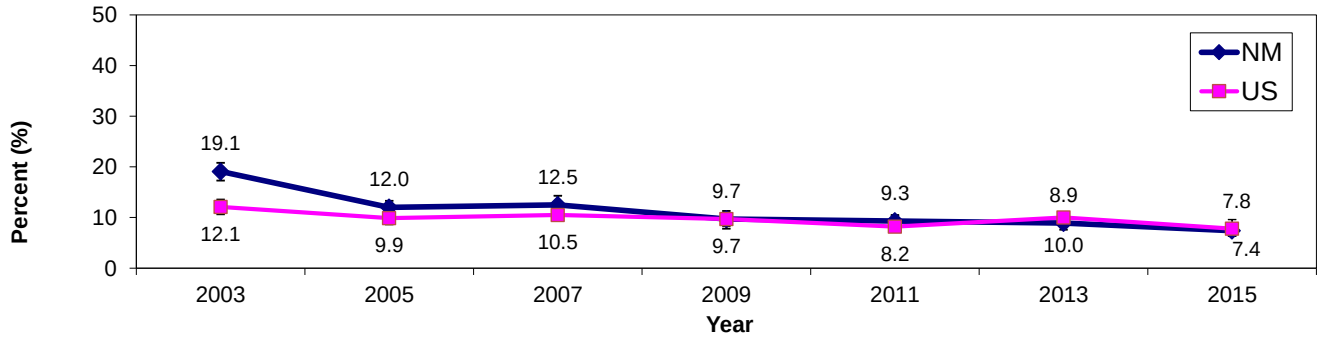
Problem Statement

Drinking and driving is a major risk factor for motor vehicle accidents. Motor vehicle crashes are the leading cause of death for youth aged 15-20 years. According to the National Highway Traffic Safety Administration (NHTSA), alcohol impaired-driving fatalities accounted for 29% of the total motor vehicle traffic fatalities in the US in 2015.* The rate of drinking and driving among New Mexico high school students has been decreasing since 2003, and decreasing among US high school students since at least 2001. In recent years, NM had a higher rate than the US, but since 2009 there has not been a statistical difference between the tworates.

In 2015, the prevalence of past-30-day drinking and driving was 7.4% among NM high school students. Drinking and driving mostly increased in prevalence with increasing grade levels (9th = 6.1%; 10th = 4.6%; 11th = 8.6%; 12th = 9.4%). White (6.0%) and American Indian (6.7%) students had lower rates of drinking and driving than Asian/Pacific Islander (13.8%) students. The difference in rates between boys (8.2%) and girls (6.4%) was not statistically significant. In 2015, the drinking and driving rate was highest in Lea (14.2%), Colfax (13.0%), Roosevelt (12.3%), Socorro (11.7%), and Taos (11.1%) counties. The rate was lowest in Curry (2.6%), Chaves (3.2%), De Baca (3.9%), Guadalupe (5.7%), and San Juan (5.7%) counties.

*https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/812318

Chart 1: Drinking and Driving* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



* Drove a car or other vehicle when they had been drinking, in the past 30 days

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

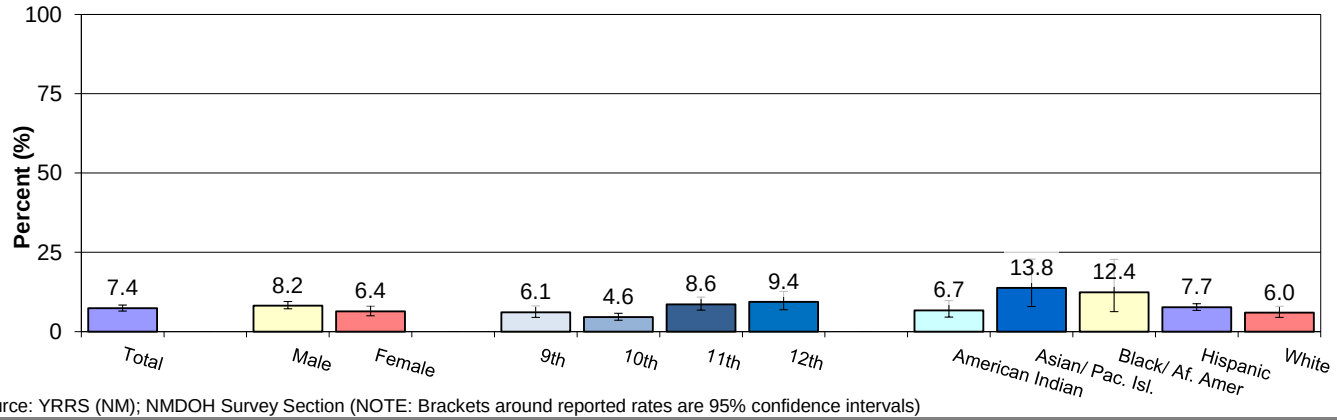
Table 1: Drinking and Driving, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	3.1 (0.5-15.5)	6.3 (1.8-19.9)	20.4 (13.6-29.4)	4.9 (1.9-12.1)	9.1 (5.6-14.3)
	Asian/Pacific Islander	--	--	--	--	19.3 (10.3-33.3)
	Black	--	--	--	--	8.6 (3.5-19.4)
	Hispanic	7.3 (4.8-10.9)	7.4 (5.1-10.6)	9.8 (7.0-13.6)	11.5 (8.0-16.2)	9.0 (7.7-10.6)
	White	3.7 (0.9-14.2)	0.9 (0.2-4.7)	4.6 (2.2-9.4)	10.0 (6.2-15.6)	5.3 (3.6-7.7)
	Total	6.6 (4.6-9.2)	5.4 (3.9-7.4)	9.8 (7.6-12.7)	10.6 (7.9-14.1)	8.2 (7.2-9.5)
Female	American Indian	3.0 (0.5-15.6)	5.1 (1.2-19.4)	6.6 (1.6-23.5)	2.7 (0.7-9.6)	4.3 (1.4-12.0)
	Asian/Pacific Islander	--	--	--	--	--
	Black	--	--	--	--	--
	Hispanic	5.5 (3.2-9.3)	4.3 (2.7-6.7)	6.2 (3.9-9.8)	8.7 (5.3-14.2)	6.3 (4.9-8.1)
	White	3.8 (0.9-15.0)	2.2 (0.7-7.0)	9.7 (4.2-20.6)	9.8 (4.4-20.5)	6.9 (4.3-11.0)
	Total	5.6 (3.5-8.7)	3.7 (2.5-5.5)	7.4 (5.0-10.8)	8.2 (4.9-13.4)	6.4 (5.0-8.1)
Total	American Indian	3.0 (0.8-10.9)	5.8 (3.6-9.2)	14.0 (8.5-22.1)	3.9 (1.9-7.8)	6.7 (4.6-9.8)
	Asian/Pacific Islander	--	--	--	--	13.8 (7.9-22.9)
	Black	--	--	--	--	12.4 (6.3-22.8)
	Hispanic	6.4 (4.5-9.2)	5.9 (4.5-7.7)	8.0 (5.9-10.8)	10.1 (7.4-13.7)	7.7 (6.7-8.8)
	White	3.7 (1.3-10.0)	1.5 (0.5-4.0)	7.0 (3.9-12.2)	9.9 (6.4-15.0)	6.0 (4.5-8.0)
	Total	6.1 (4.5-8.1)	4.6 (3.6-5.8)	8.6 (6.8-10.9)	9.4 (6.9-12.7)	7.4 (6.5-8.4)

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

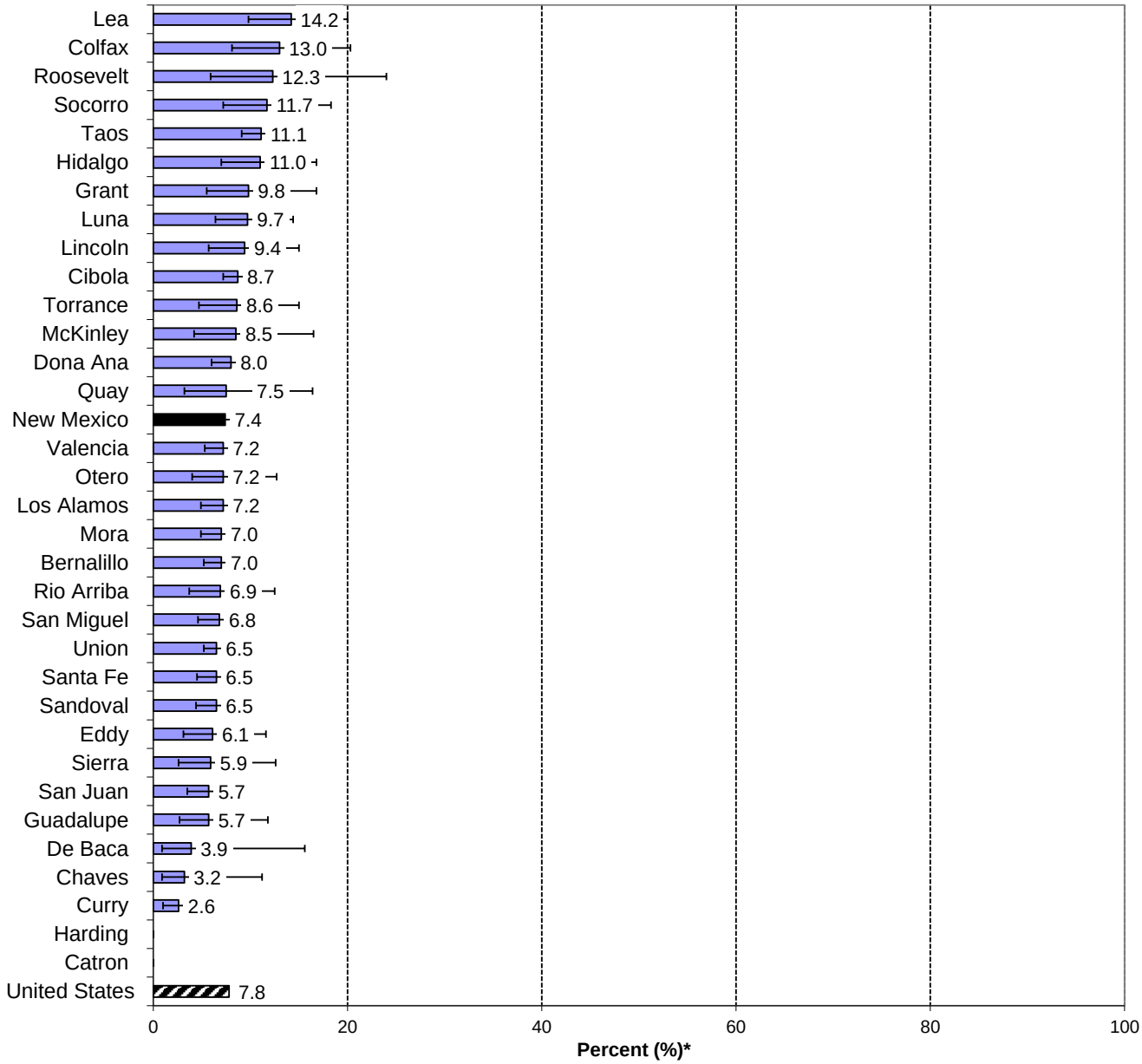
YOUTH DRINKING AND DRIVING (continued)

Chart 2: Drinking and Driving, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Drinking and Driving* by County, Grades 9 - 12, New Mexico, 2015



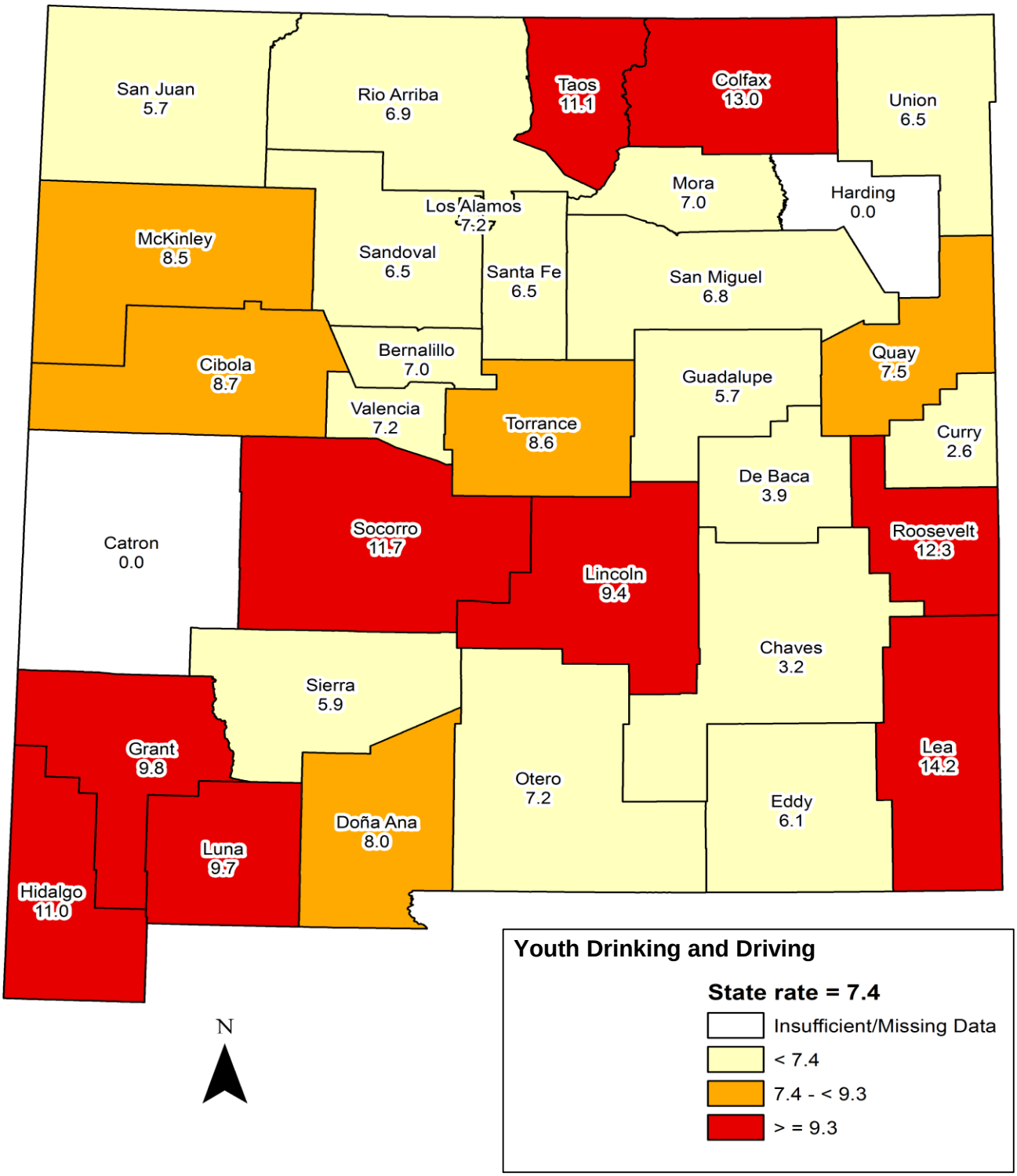
* Estimate of percent of high school students who reported drinking and driving at least once in past 30 days

Harding and Catron 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* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT MARIJUANA USE

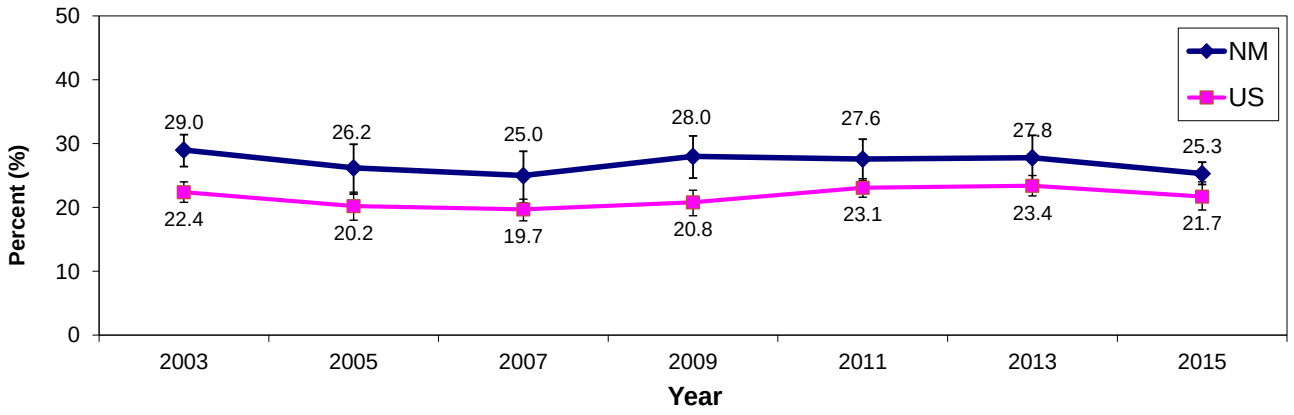
Problem Statement

There has been no apparent trend in the rate of current marijuana use by New Mexico high school students in recent years. While the US rate decreased from 1999 to 2007, it has increased since then. While the NM rate in 2009 (28.0%) was higher than the rate in 2007 (25.0%), the difference was not statistically significant. In 2015, the New Mexico rate (25.3%) was higher than the US rate (21.7%), as it has been consistently higher for several years.

Higher grades show higher rate of current marijuana use. There was no statistically significant variation by gender. The rate among American Indian (34.1%) students was higher than among Black (25.7%), Hispanic (26.3%), Asian/Pacific Islander (20.8%), and White (19.3%) students.

In 2015, the rate of past 30-day marijuana use was highest in Taos (36.6%), Grant (35.5%), and Cibola (34.0%) counties. The rate was lowest in Curry (14.2%), De Baca (14.2%), Eddy (14.4%), and Lea (18.1%) counties.

Chart 1: Current Marijuana Use* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

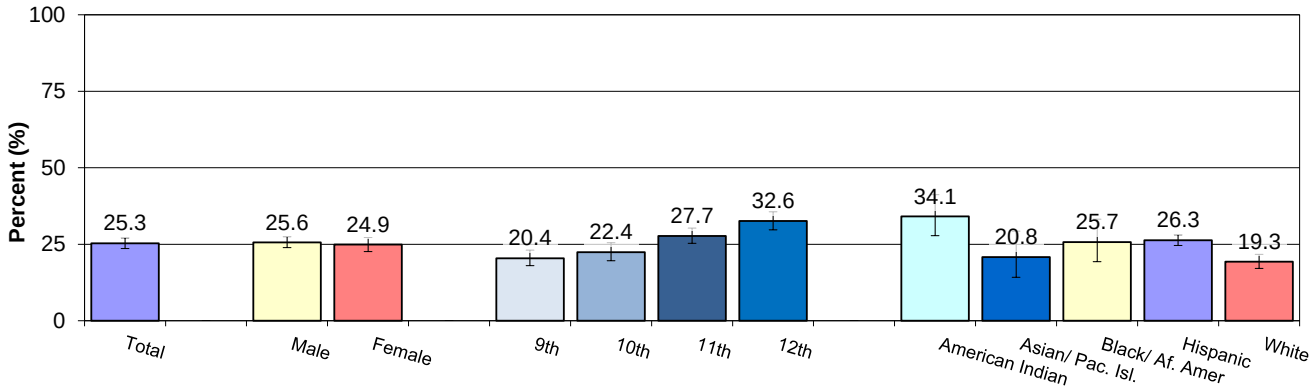
Table 1: Current Marijuana Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	18.9 (13.8-25.4)	34.4 (25.9-44.1)	41.0 (31.1-51.8)	36.3 (23.6-51.2)	31.9 (28.8-35.2)
	Asian/Pacific Islander	--	--	--	--	26.0 (17.6-36.6)
	Black	--	--	--	--	33.6 (24.9-43.4)
	Hispanic	22.8 (19.2-27.0)	23.1 (19.3-27.2)	29.7 (26.1-33.7)	36.4 (31.3-41.8)	27.1 (25.1-29.2)
	White	12.5 (7.5-20.0)	16.0 (10.5-23.8)	17.4 (12.8-23.1)	30.9 (24.3-38.5)	19.1 (16.5-22.1)
	Total	20.0 (16.9-23.4)	22.3 (19.3-25.8)	27.9 (25.0-31.1)	35.1 (31.1-39.4)	25.6 (23.9-27.5)
Female	American Indian	29.2 (18.4-43.1)	36.5 (14.4-66.2)	46.1 (32.6-60.3)	34.1 (25.4-44.0)	36.4 (25.2-49.2)
	Asian/Pacific Islander	--	--	--	--	14.1 (7.0-26.4)
	Black	--	--	--	--	14.0 (7.5-24.6)
	Hispanic	22.8 (19.6-26.4)	22.0 (18.5-26.1)	28.7 (25.1-32.6)	29.7 (25.1-34.6)	25.4 (23.4-27.5)
	White	13.0 (8.7-19.0)	17.2 (12.3-23.7)	17.3 (12.7-23.2)	29.8 (22.3-38.4)	19.2 (16.4-22.4)
	Total	20.8 (17.8-24.0)	22.4 (18.1-27.5)	27.6 (24.2-31.3)	30.0 (26.5-33.8)	24.9 (22.6-27.2)
Total	American Indian	23.9 (17.4-31.8)	35.5 (24.5-48.3)	43.3 (37.5-49.3)	35.1 (27.2-43.9)	34.1 (27.8-41.2)
	Asian/Pacific Islander	--	--	--	--	20.8 (14.2-29.3)
	Black	11.3 (5.7-21.4)	--	--	--	25.7 (19.3-33.2)
	Hispanic	23.0 (20.1-26.1)	22.5 (19.8-25.5)	29.2 (26.6-31.9)	32.8 (29.2-36.7)	26.3 (24.6-28.1)
	White	12.7 (9.1-17.5)	16.7 (12.4-22.2)	17.3 (13.8-21.6)	30.6 (25.4-36.3)	19.3 (17.1-21.7)
	Total	20.4 (18.0-23.1)	22.4 (19.6-25.5)	27.7 (25.3-30.3)	32.6 (29.7-35.6)	25.3 (23.6-27.1)

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

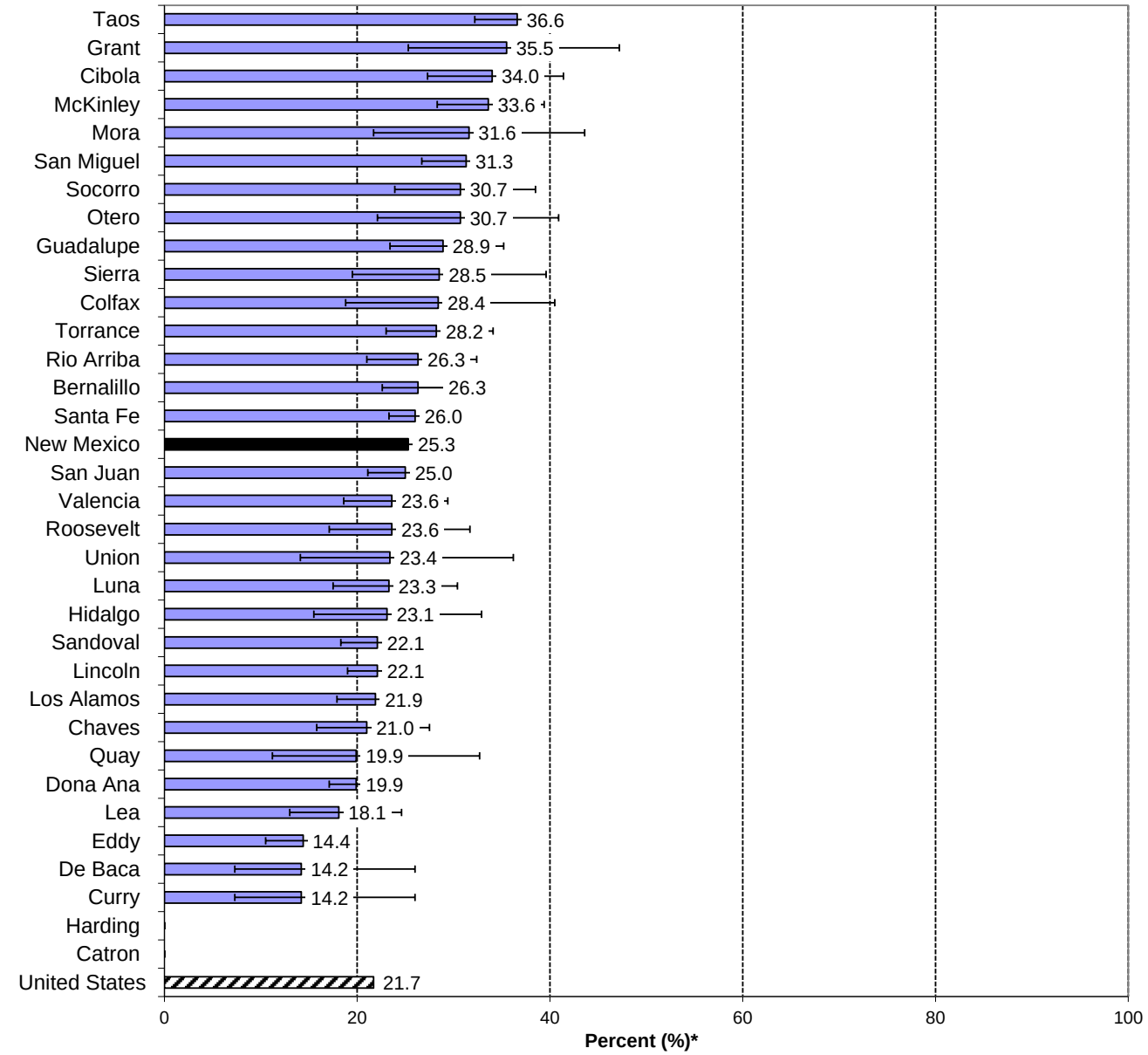
YOUTH CURRENT MARIJUANA USE (continued)

Chart 2: Current Marijuana Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Current Marijuana Use* by County, Grades 9 - 12, New Mexico, 2015



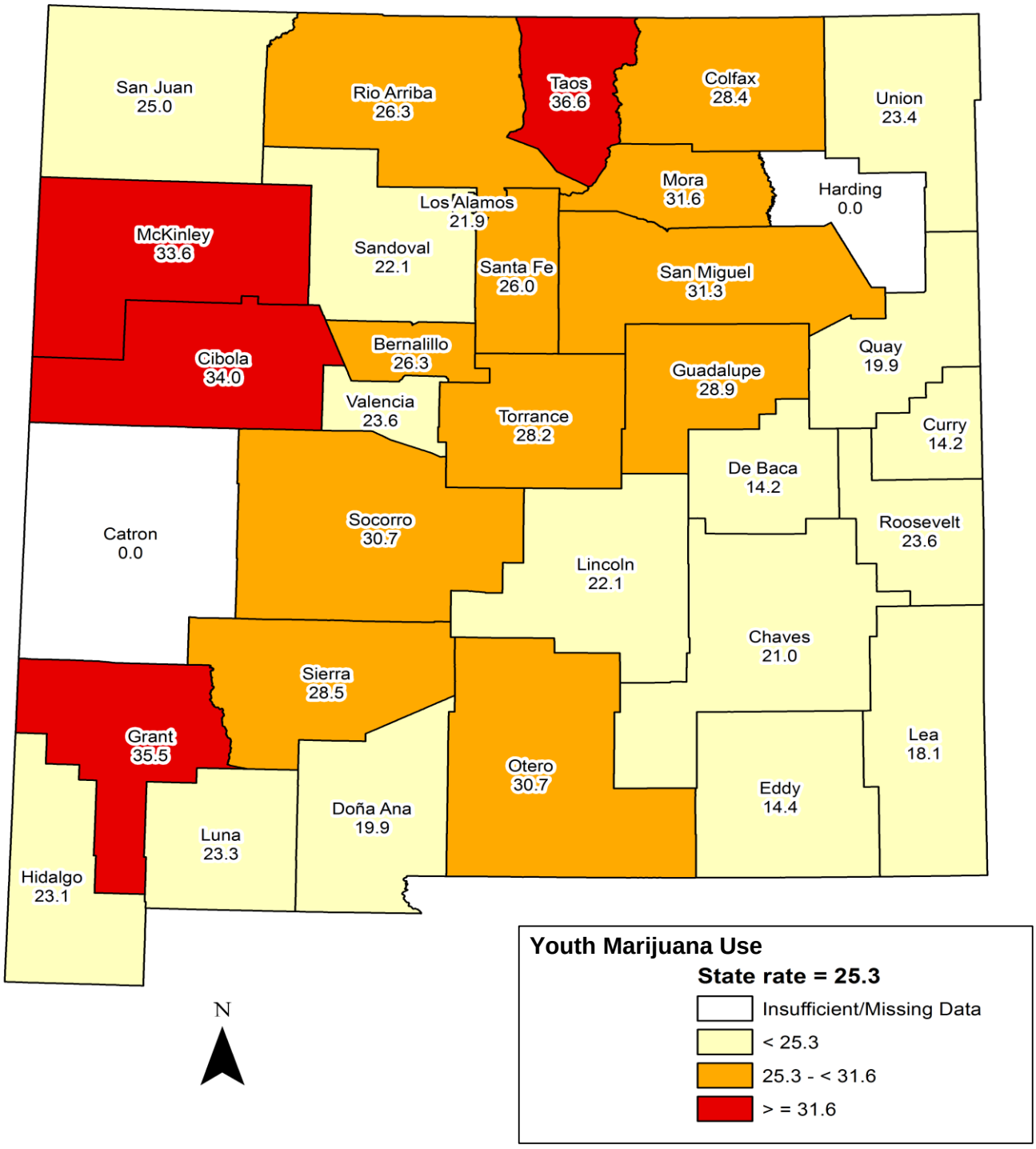
* Estimate of percent of high school students who reported marijuana use at least once in past 30 days

Harding and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT MARIJUANA USE (continued)

Chart 4: Current Marijuana Use* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT COCAINE USE

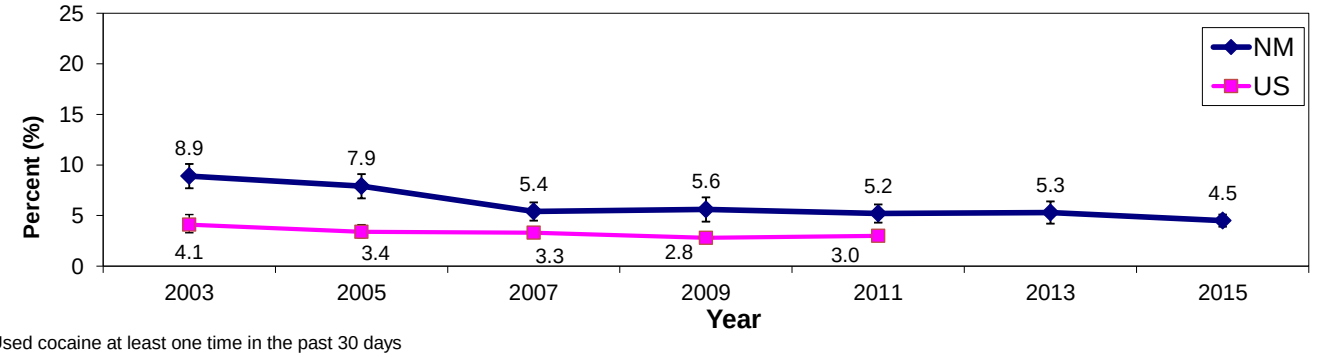
Problem Statement

The New Mexico rate of current cocaine use by youth decreased from 2003 (8.9%) to 2007 (5.4%). The US rate decreased from 4.1% in 2003 to 2.8% in 2009, and has not significantly changed from 2009 to 2011. The New Mexico rate in 2015 (4.5%) was higher than the last available US rate (3.0% in 2011), and has been consistently higher than the US rate since 2003.

The difference in the rate between males (6.3%) and females (2.6%) was statistically significant. The rate of current cocaine use increased in prevalence with increasing grade levels Asian or Pacific Islander (11.8%) and Black (9.6%) students (11.0%) had higher rates of current cocaine use than Hispanic (5.1%), American Indian (3.4%), or White (2.5%) students. Differences between racial/ethnic groups were not statistically significant.

In 2015, the rate of past 30-day cocaine use was highest in Mora (10.5%), Socorro (10.2%), Roosevelt (8.4%), Hidalgo (8.4%), and Otero (7.9%) counties. The rate was lowest in Quay (2.2%), Union (2.2%), Los Alamos (2.3%), De Baca (3.0%), and Eddy (3.0%) counties.

Chart 1: Current Cocaine Use* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

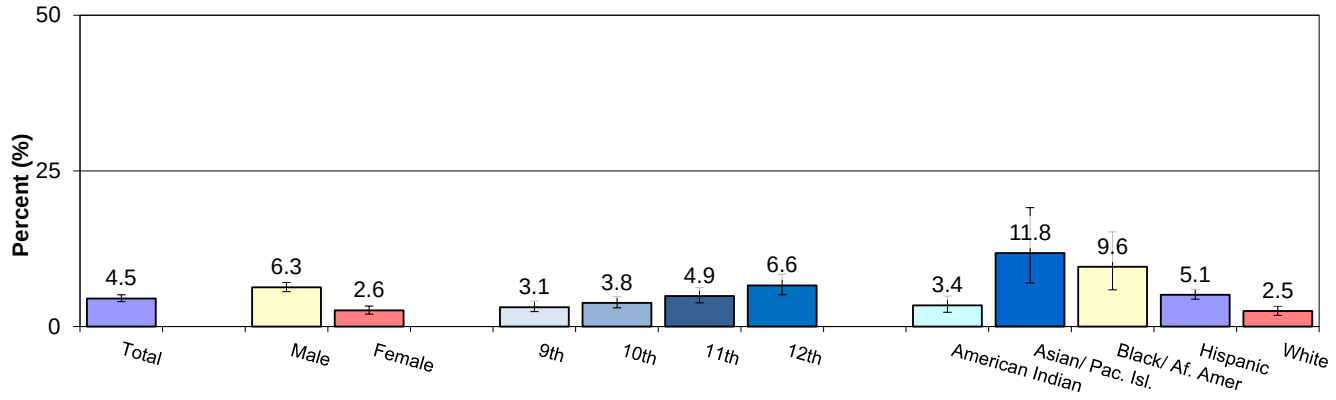
Table 1: Current Cocaine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	4.7 (1.7-12.2)	4.4 (1.3-13.6)	9.2 (5.4-15.2)	4.2 (1.5-11.2)	5.7 (3.8-8.4)
	Asian/Pacific Islander	--	--	--	--	18.4 (10.9-29.4)
	Black	--	--	--	--	12.3 (7.5-19.7)
	Hispanic	4.3 (3.0-6.3)	6.7 (5.3-8.6)	8.4 (5.8-11.9)	11.0 (8.0-14.9)	7.1 (6.2-8.3)
	White	1.9 (0.5-7.2)	2.4 (0.9-5.9)	2.0 (0.7-5.1)	7.5 (4.3-12.7)	3.4 (2.4-4.9)
	Total	4.0 (3.0-5.3)	5.8 (4.5-7.4)	7.5 (5.7-9.7)	9.2 (6.9-12.1)	6.3 (5.6-7.1)
Female	American Indian	0.3 (0.0-2.0)	2.1 (0.4-9.9)	1.4 (0.4-5.2)	1.0 (0.3-4.0)	1.2 (0.5-3.0)
	Asian/Pacific Islander	--	--	--	--	3.5 (0.9-12.4)
	Black	--	--	--	--	5.4 (1.4-19.1)
	Hispanic	2.8 (1.9-4.1)	2.1 (1.1-3.8)	2.8 (1.4-5.5)	5.1 (3.3-7.9)	3.1 (2.3-4.2)
	White	1.1 (0.3-3.8)	0.3 (0.0-2.5)	0.7 (0.2-3.1)	3.1 (1.3-7.1)	1.3 (0.7-2.4)
	Total	2.2 (1.5-3.3)	1.8 (1.0-3.0)	2.4 (1.4-4.1)	4.0 (2.8-5.6)	2.6 (2.0-3.3)
Total	American Indian	2.6 (1.1-6.0)	3.2 (1.4-7.2)	5.2 (3.1-8.5)	2.5 (1.0-6.3)	3.4 (2.3-4.9)
	Asian/Pacific Islander	--	--	--	--	11.8 (7.0-19.1)
	Black	1.8 (0.3-11.9)	--	--	--	9.6 (5.9-15.2)
	Hispanic	3.6 (2.6-4.9)	4.3 (3.3-5.6)	5.5 (3.9-7.6)	7.9 (5.9-10.5)	5.1 (4.4-6.0)
	White	1.5 (0.6-4.0)	1.5 (0.6-3.5)	1.4 (0.6-3.1)	5.5 (3.5-8.6)	2.5 (1.8-3.3)
	Total	3.1 (2.4-4.1)	3.8 (3.0-4.8)	4.9 (3.8-6.3)	6.6 (5.1-8.4)	4.5 (4.0-5.1)

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

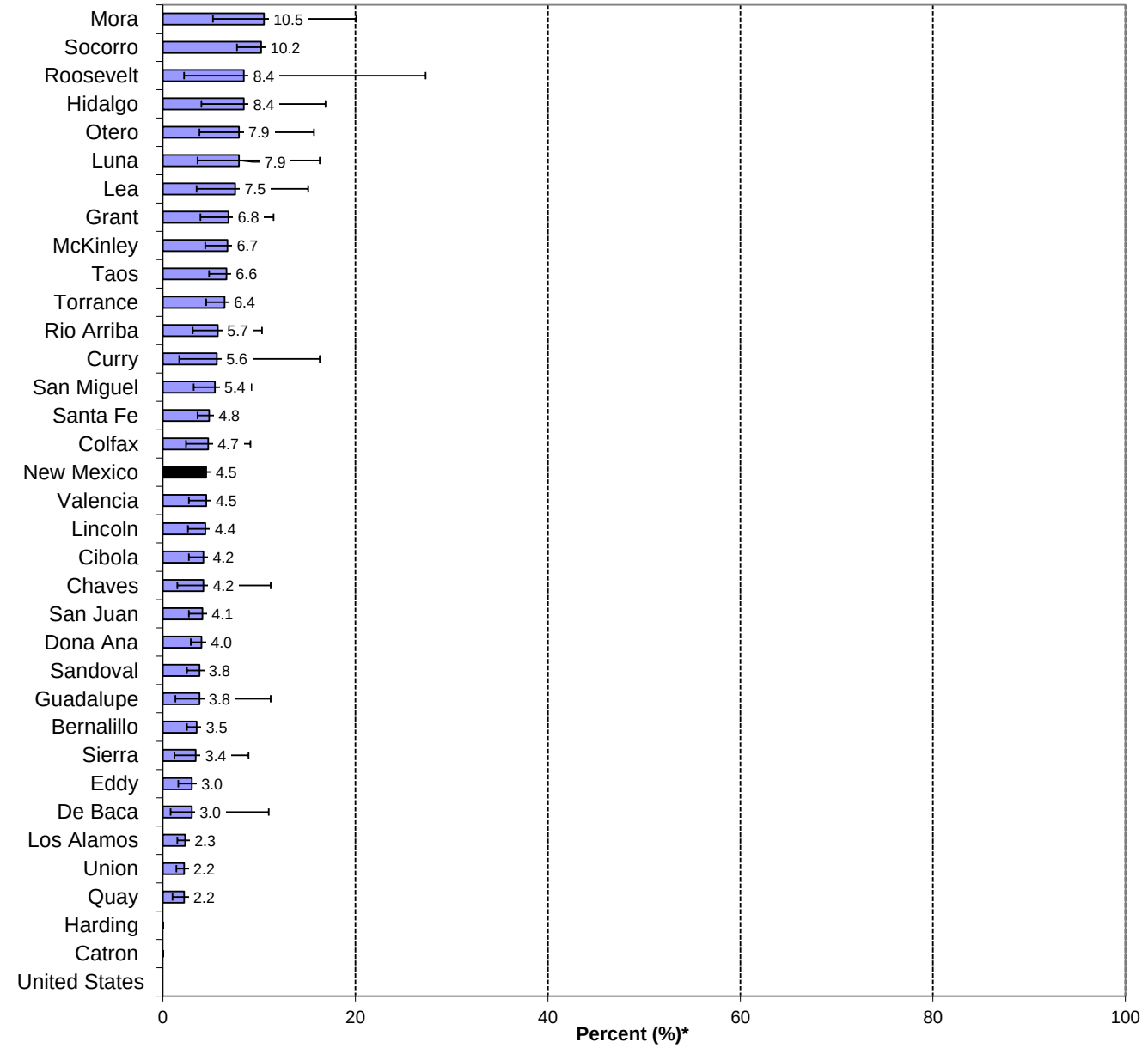
YOUTH CURRENT COCAINE USE (continued)

Chart 2: Current Cocaine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Current Cocaine Use* by County, Grades 9 - 12, New Mexico, 2015



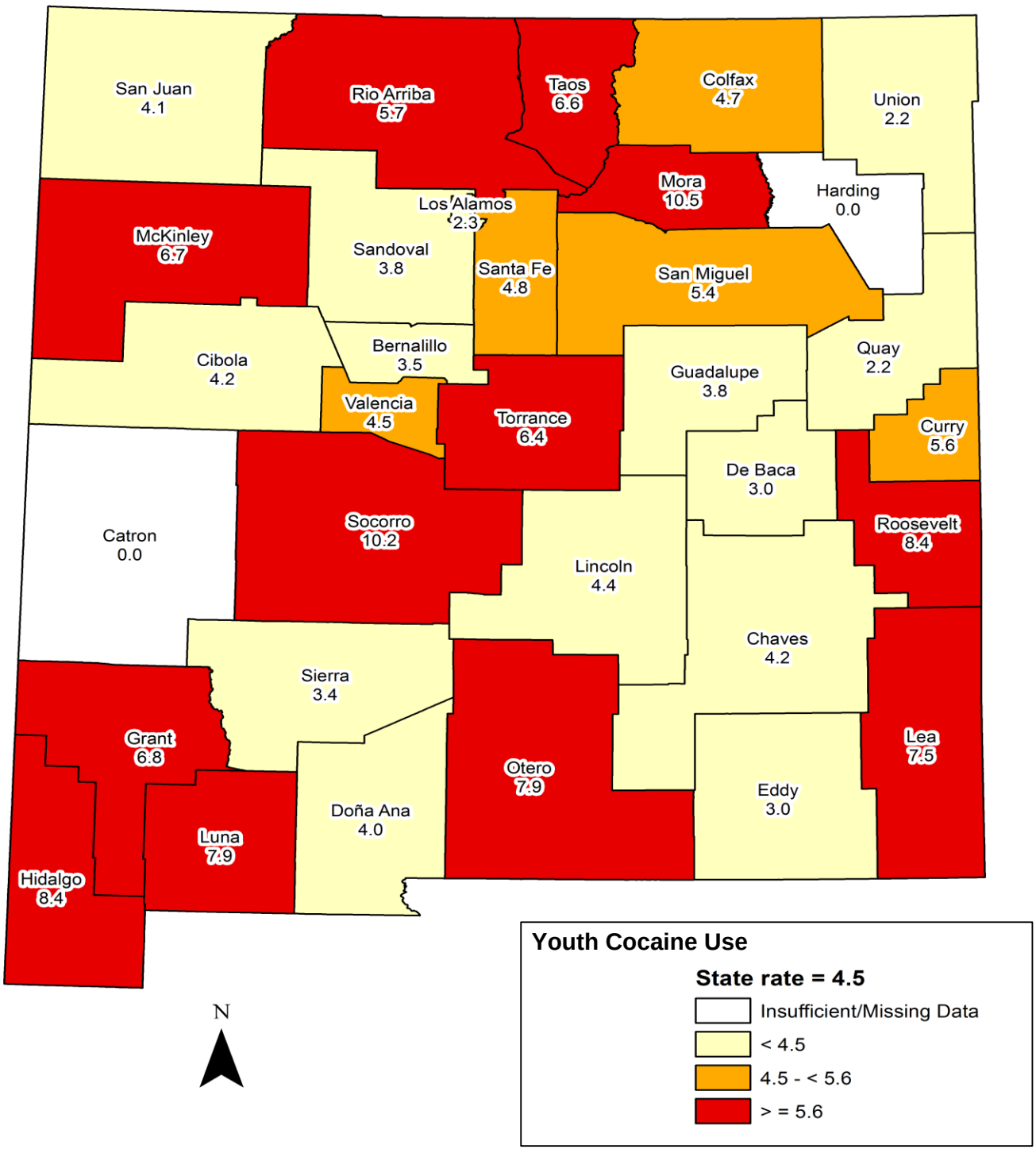
* Estimate of percent of high school students who reported cocaine use at least once in past 30 days

Harding and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT COCAINE USE (continued)

Chart 4: Current Cocaine Use* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH USED PAINKILLER TO GET HIGH

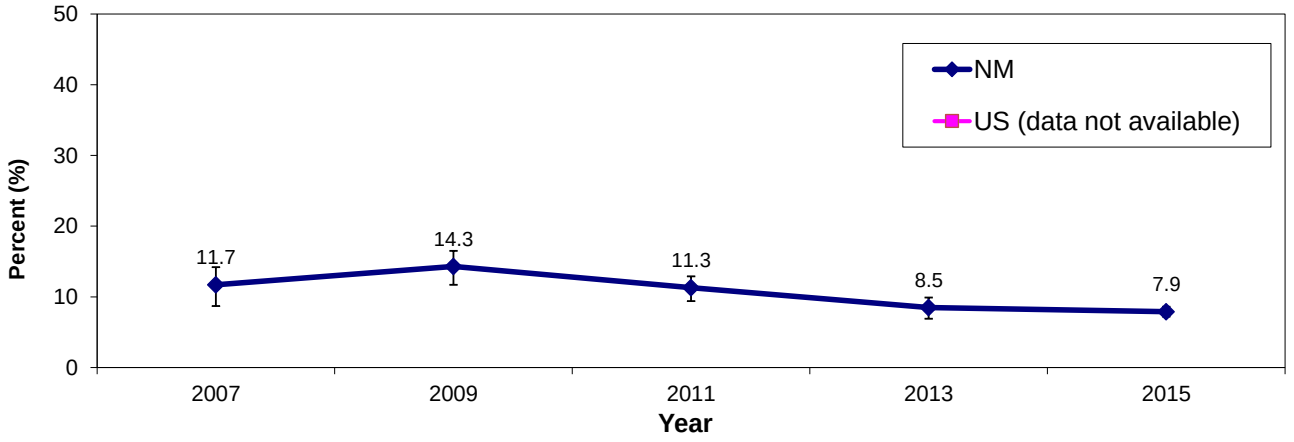
Problem Statement

The rate of current use of painkillers to get high has shown no noticeable trend since the measure was added to the YRRS survey questionnaire in 2007. Painkiller use to get high had the second highest prevalence (7.9%) of all 30-day drug use measures in the 2015 YRRS, behind marijuana 25.3%). The question about the use of painkillers to get high is not on the national YRBS, and there is no national comparison.

The rate of painkiller use to get high was higher among males (8.7%) than females (6.9%), but this difference is not statistically significant. The rate was significantly higher among 12th graders (9.7%) compared to 6th graders (6.1%). The prevalence was higher among Black (12.1%) and American Indian/Alaska Native (11.9%) than among Hispanic (8.0%) and White (5.1%) students.

In 2015, the rate of painkiller use to get high was highest in Mora (14.2%), Grant (13.2%), and McKinley (12.3%) counties. The rate was lowest in De Baca (5.6%), Chaves (5.9%), and San Juan (6.1%) counties.

Chart 1: Used Painkiller to Get High* by Year, Grades 9 - 12, New Mexico, 2007-2015



* Used a painkiller (such as Vicodin, OxyContin, or Percocet) to get high at least one time in the past 30 days

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

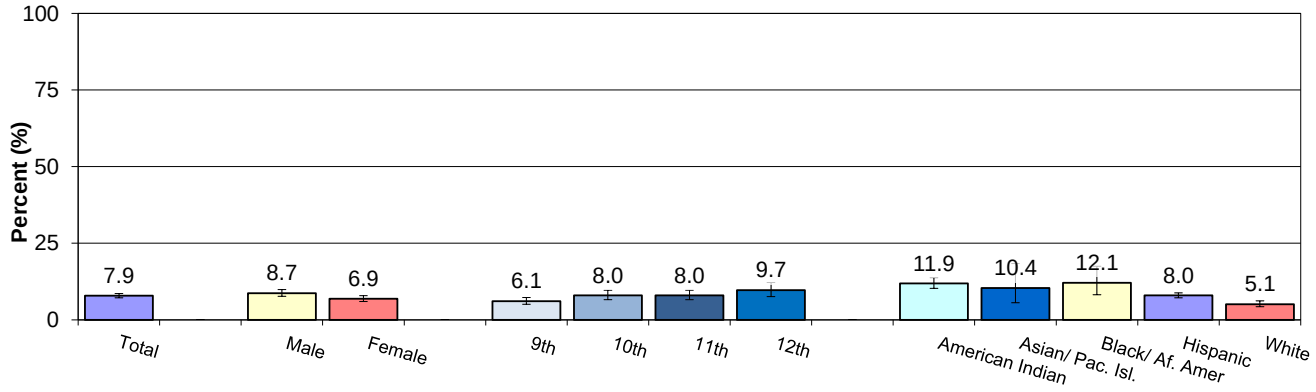
Table 1: Used Painkiller to Get High, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	4.9 (2.8-8.6)	8.6 (5.2-13.9)	19.0 (14.0-25.3)	13.1 (7.2-22.4)	11.0 (8.7-13.8)
	Asian/Pacific Islander	--	--	--	--	16.0 (8.2-28.7)
	Black	--	--	--	--	16.3 (10.6-24.3)
	Hispanic	7.5 (5.8-9.5)	9.6 (6.9-13.2)	8.6 (6.4-11.5)	14.2 (11.0-18.2)	9.6 (8.4-11.0)
	White	3.8 (1.8-7.7)	3.0 (1.4-6.4)	3.6 (1.5-8.3)	9.0 (5.3-14.9)	4.9 (3.6-6.6)
	Total	6.4 (5.1-7.9)	7.8 (6.1-10.0)	9.3 (7.5-11.5)	12.5 (9.7-16.0)	8.7 (7.7-9.9)
Female	American Indian	6.8 (2.2-18.7)	18.3 (9.1-33.5)	11.3 (4.6-25.2)	14.4 (9.2-21.9)	12.9 (9.3-17.5)
	Asian/Pacific Islander	--	--	--	--	3.5 (0.9-12.4)
	Black	--	--	--	--	5.7 (1.7-17.2)
	Hispanic	6.1 (4.5-8.2)	7.1 (5.0-10.0)	6.9 (4.9-9.5)	5.3 (3.5-8.1)	6.4 (5.4-7.7)
	White	4.6 (2.2-9.1)	5.5 (3.0-9.8)	3.8 (1.9-7.3)	7.0 (3.5-13.7)	5.2 (4.1-6.6)
	Total	5.9 (4.3-7.9)	8.1 (6.1-10.6)	6.7 (4.7-9.5)	6.7 (4.7-9.5)	6.9 (6.0-7.9)
Total	American Indian	5.8 (3.0-10.9)	13.7 (8.3-21.8)	15.0 (11.1-20.1)	13.8 (9.7-19.3)	11.9 (10.3-13.8)
	Asian/Pacific Islander	--	--	--	--	10.4 (5.6-18.4)
	Black	3.7 (1.2-11.2)	--	--	--	12.1 (8.2-17.5)
	Hispanic	6.8 (5.6-8.3)	8.3 (6.4-10.7)	7.7 (6.4-9.3)	9.6 (7.4-12.2)	8.0 (7.2-8.8)
	White	4.2 (2.3-7.5)	4.3 (2.6-7.1)	3.7 (2.1-6.3)	8.4 (5.1-13.3)	5.1 (4.3-6.2)
	Total	6.1 (5.1-7.3)	8.0 (6.6-9.7)	8.0 (6.6-9.7)	9.7 (7.6-12.2)	7.9 (7.2-8.6)

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

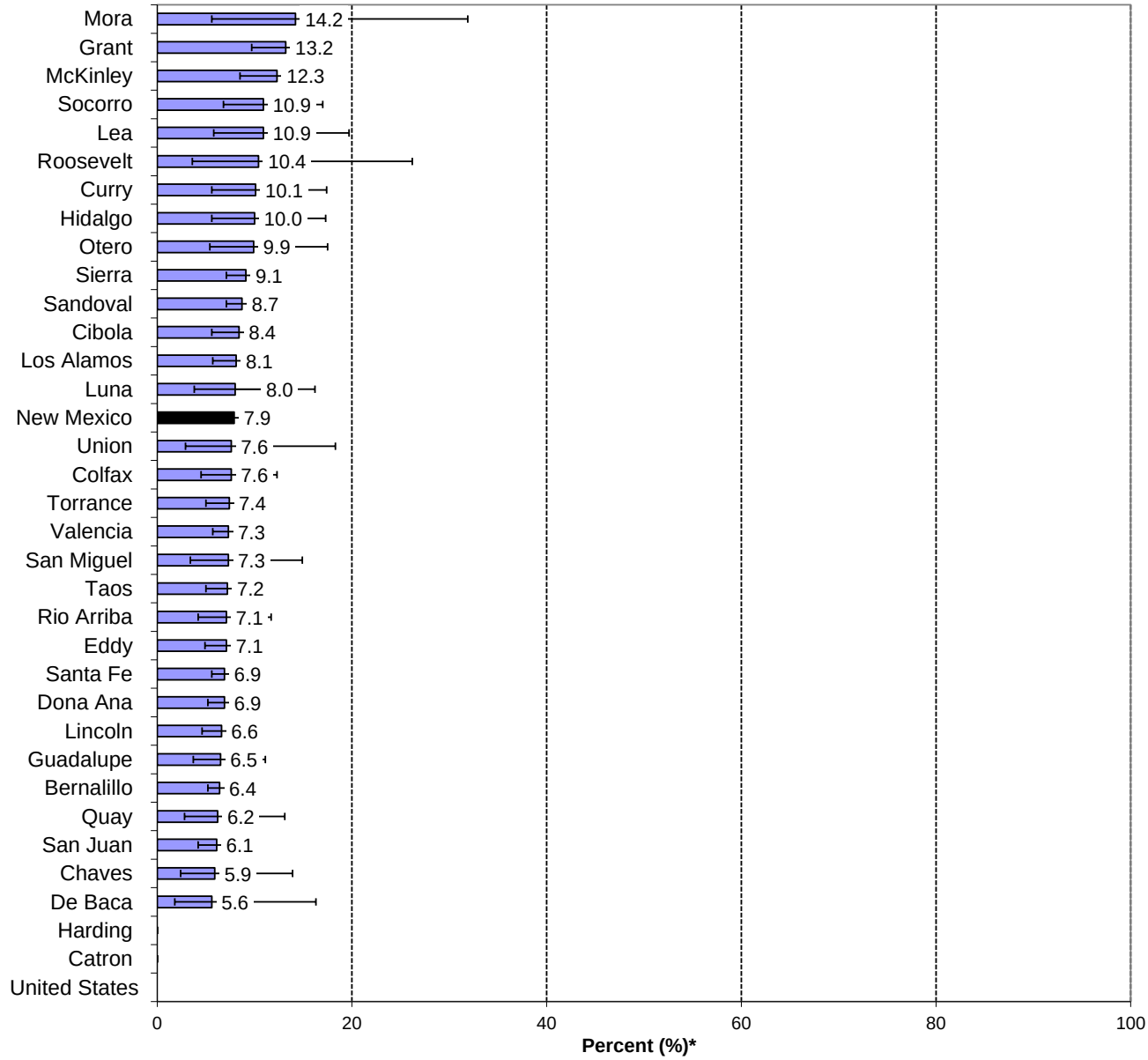
YOUTH USED PAINKILLER TO GET HIGH (continued)

Chart 2: Used Painkiller to Get High, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Used Painkiller to Get High* by County, Grades 9 - 12, New Mexico, 2015



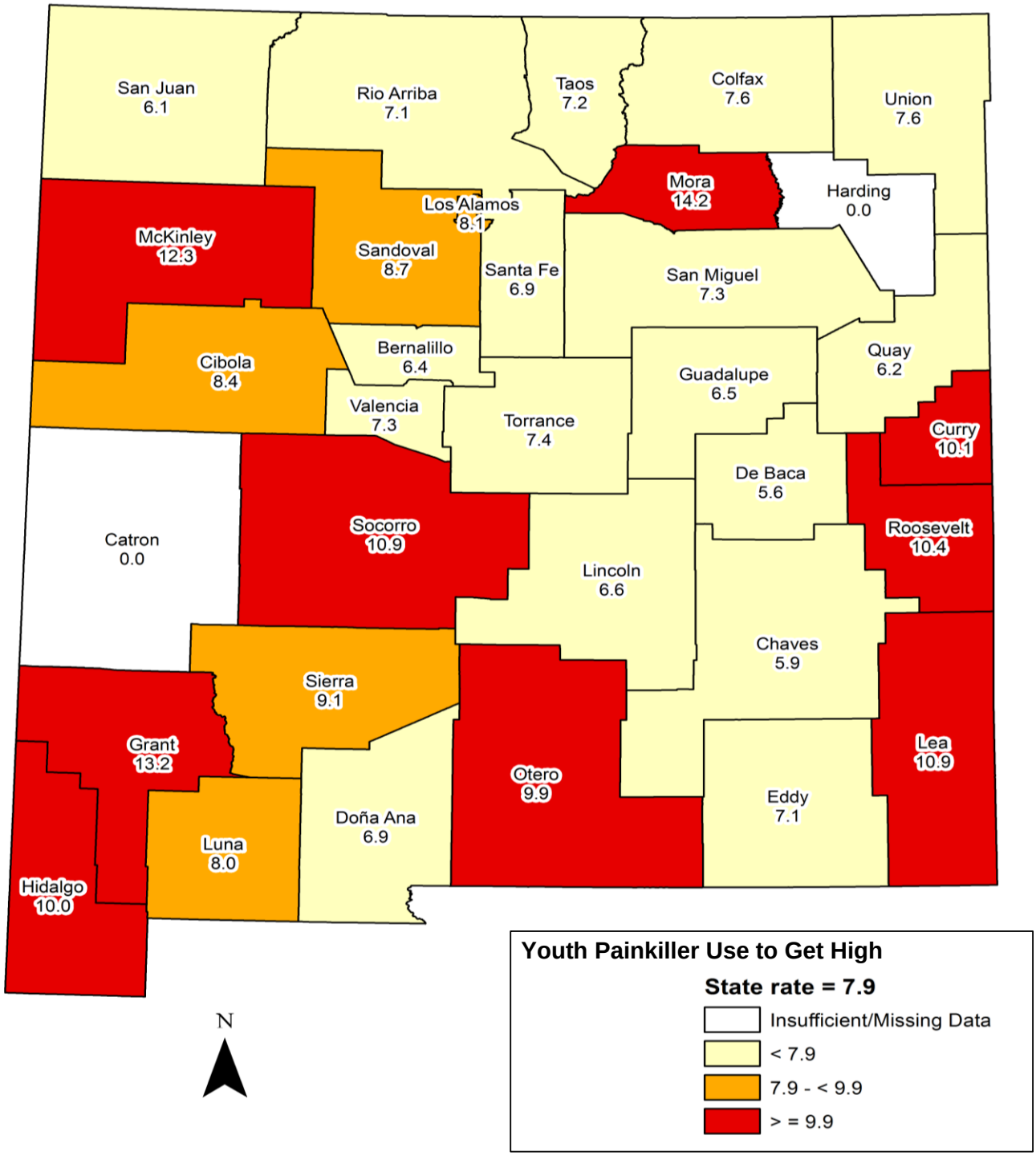
* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days

Harding and Catron 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 USED PAINKILLER TO GET HIGH (continued)

Chart 4: Used Painkiller to Get High* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH HEROIN USE

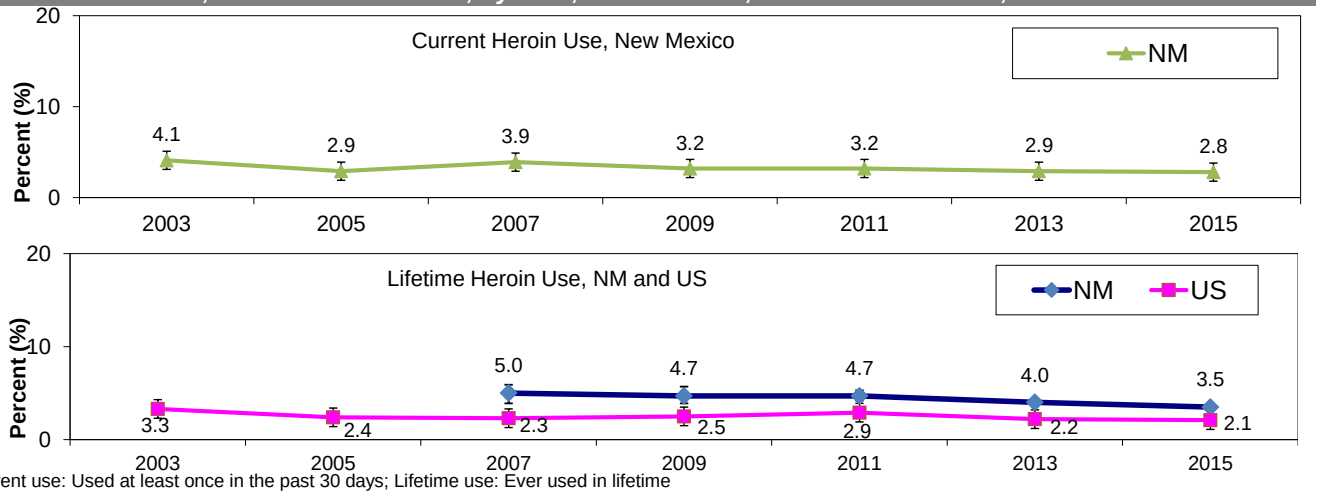
Problem Statement

The rate of lifetime heroin use by youth has not significantly varied in recent years, neither in New Mexico nor the US. The NM rate for lifetime heroin use has been consistently higher than the US rate. This remained true in 2015, with a rate of 3.5% for NM and 2.1% for the US. For current heroin use, there is no apparent trend in the New Mexico rate. There is no national comparison for current heroin use.

Asian or Pacific Islander (9.3%) and Black (8.9%) students were more likely to be current heroin users than Hispanic (3.0%), American Indian (2.1%), or White (1.5%) students. The prevalence of current heroin use was not associated with grade level. Males were more likely to report current heroin use (4.3%) than females (1.2%), this difference was statistically significant.

In 2015, the highest rates for lifetime heroin use were in Mora (9.3%), Roosevelt (6.8%), Luna (6.1%), and Hidalgo (5.7%) counties, and the lowest in Union (0.7%), Eddy (0.9%), and Los Alamos (0.9%) counties.

Chart 1: Heroin Use*, Current and Lifetime, by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

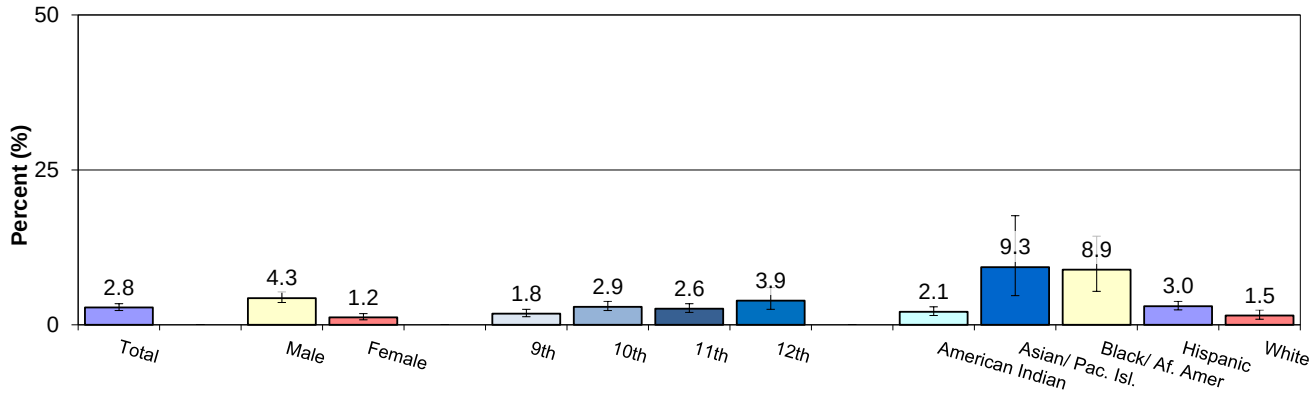
Table 1: Current Heroin Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	1.0 (0.1-7.2)	4.4 (1.9-10.0)	5.9 (2.9-11.6)	4.4 (1.9-9.8)	3.8 (2.6-5.5)
	Asian/Pacific Islander	--	--	--	--	13.9 (6.7-26.7)
	Black	--	--	--	--	12.4 (7.7-19.4)
	Hispanic	3.0 (1.9-4.7)	4.6 (3.2-6.6)	4.0 (2.7-5.9)	8.3 (5.6-12.1)	4.7 (3.7-5.9)
	White	1.6 (0.5-4.7)	3.0 (1.2-6.9)	0.3 (0.0-2.1)	4.5 (1.8-10.6)	2.4 (1.4-4.0)
	Total	2.7 (1.9-3.9)	4.6 (3.6-5.9)	4.1 (3.1-5.4)	6.5 (4.2-9.9)	4.3 (3.6-5.3)
Female	American Indian	0.5 (0.1-3.4)	0.0 (.-.)	0.8 (0.1-5.1)	0.5 (0.1-3.4)	0.4 (0.1-1.3)
	Asian/Pacific Islander	--	--	--	--	3.5 (0.9-12.4)
	Black	--	--	--	--	3.6 (0.6-19.3)
	Hispanic	0.7 (0.3-1.7)	1.7 (0.8-3.4)	1.2 (0.5-3.0)	1.8 (0.6-5.9)	1.4 (0.9-2.2)
	White	0.7 (0.1-3.2)	0.0 (.-.)	0.3 (0.0-1.9)	0.7 (0.2-2.7)	0.4 (0.2-1.1)
	Total	0.8 (0.4-1.7)	1.2 (0.6-2.6)	1.2 (0.6-2.3)	1.3 (0.5-3.6)	1.2 (0.8-1.8)
Total	American Indian	0.8 (0.2-3.4)	2.1 (0.9-4.9)	3.3 (1.9-5.8)	2.3 (1.0-5.1)	2.1 (1.5-2.9)
	Asian/Pacific Islander	--	--	--	--	9.3 (4.7-17.6)
	Black	2.3 (0.4-10.9)	--	--	--	8.9 (5.4-14.3)
	Hispanic	1.9 (1.2-2.8)	3.1 (2.1-4.5)	2.6 (1.8-3.8)	4.9 (3.1-7.7)	3.0 (2.4-3.8)
	White	1.1 (0.4-2.8)	1.7 (0.7-4.1)	0.3 (0.1-1.2)	2.7 (1.2-6.1)	1.5 (0.9-2.4)
	Total	1.8 (1.3-2.5)	2.9 (2.3-3.8)	2.6 (2.0-3.4)	3.9 (2.5-6.0)	2.8 (2.3-3.4)

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

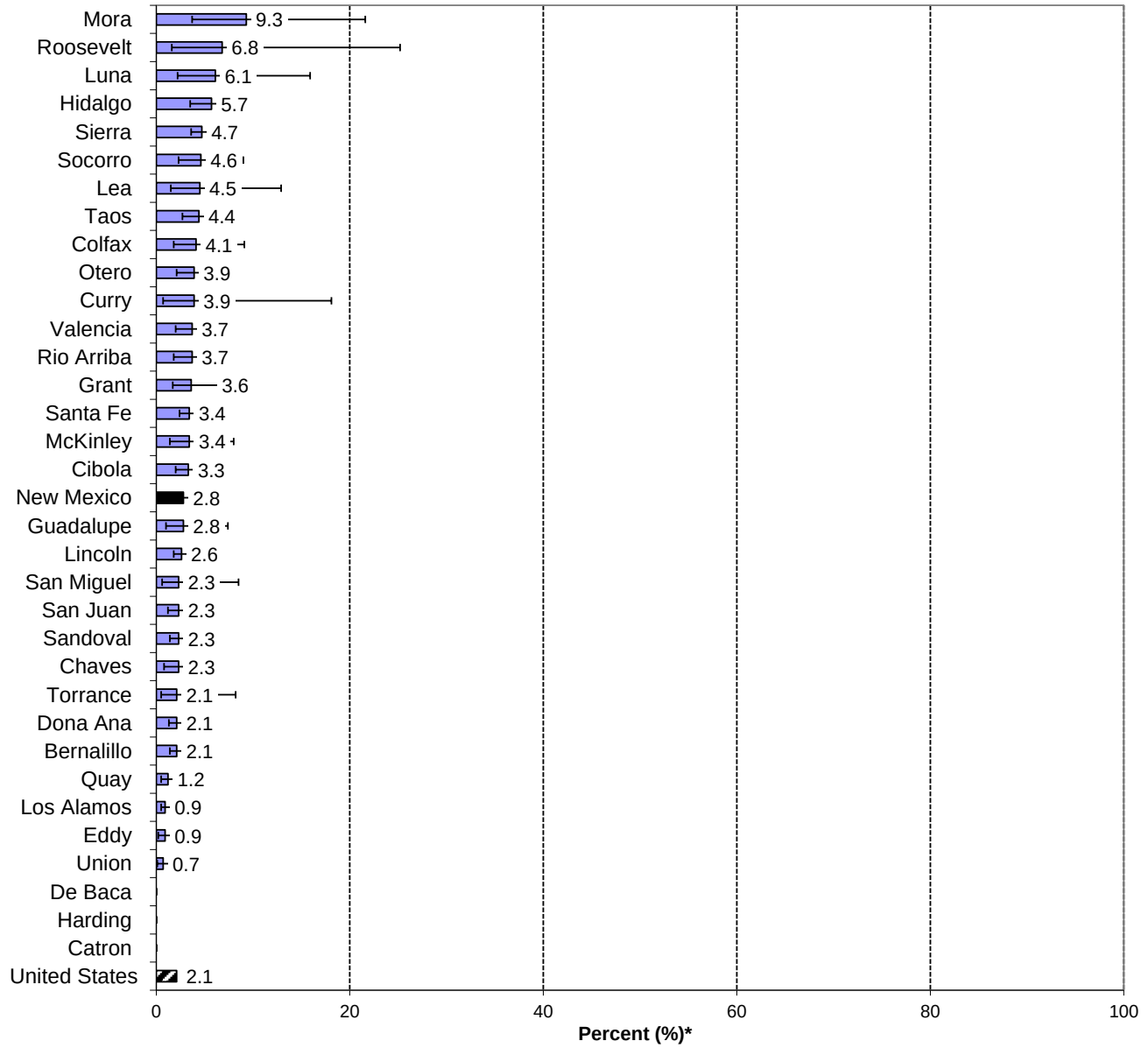
YOUTH HEROIN USE (continued)

Chart 2: Current Heroin Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Lifetime Heroin Use* by County, Grades 9 - 12, New Mexico, 2015



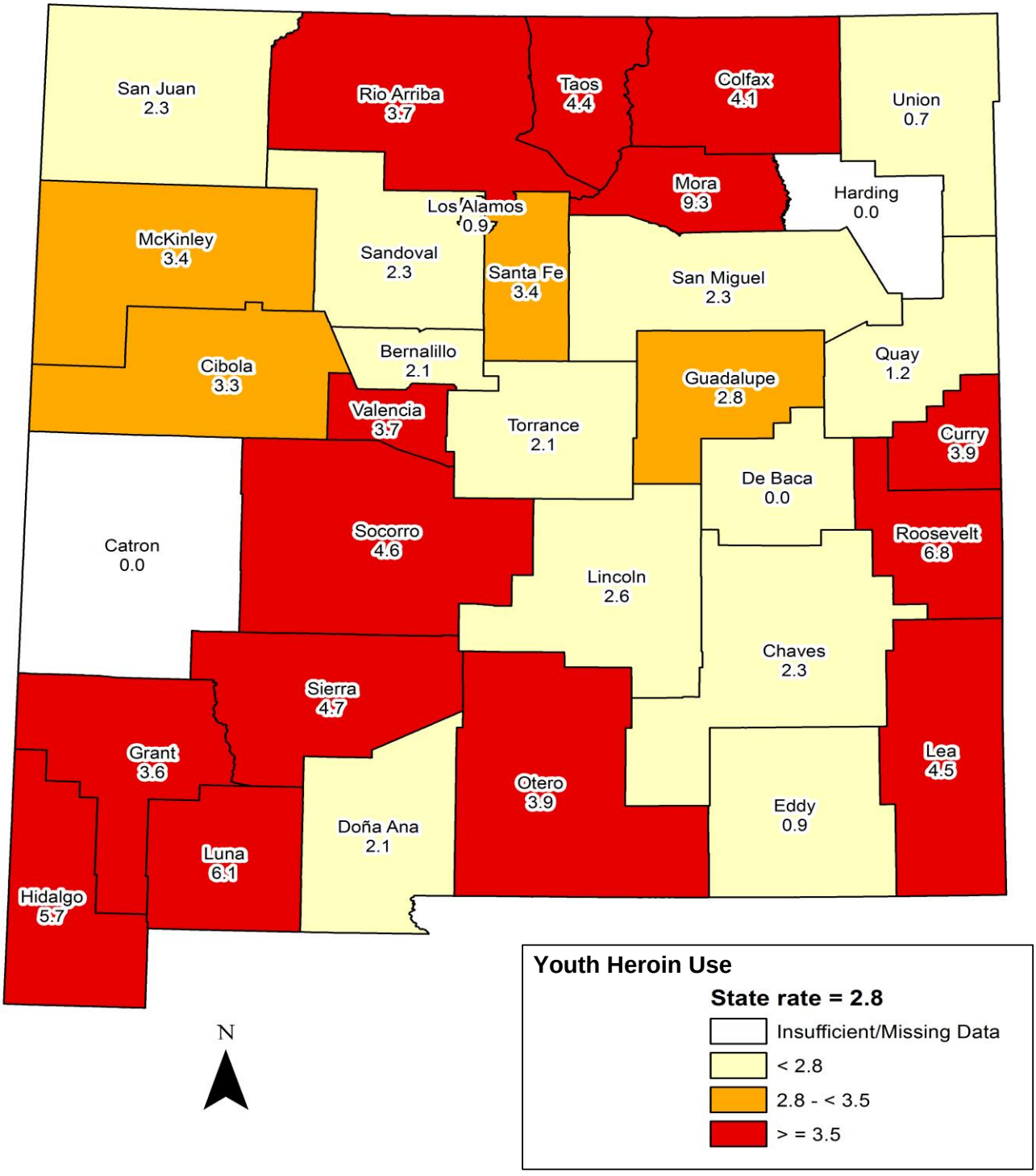
* Estimate of percent of high school students who reported heroin use at least once in their lifetime

De Baca, Harding, and Catron 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 HEROIN USE (continued)

Chart 4: Current Heroin Use* by County, Grades 9 - 12, New Mexico, 2015



* Estimate of percent of high school students who reported heroin use at least once in their lifetime

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH METHAMPHETAMINE USE

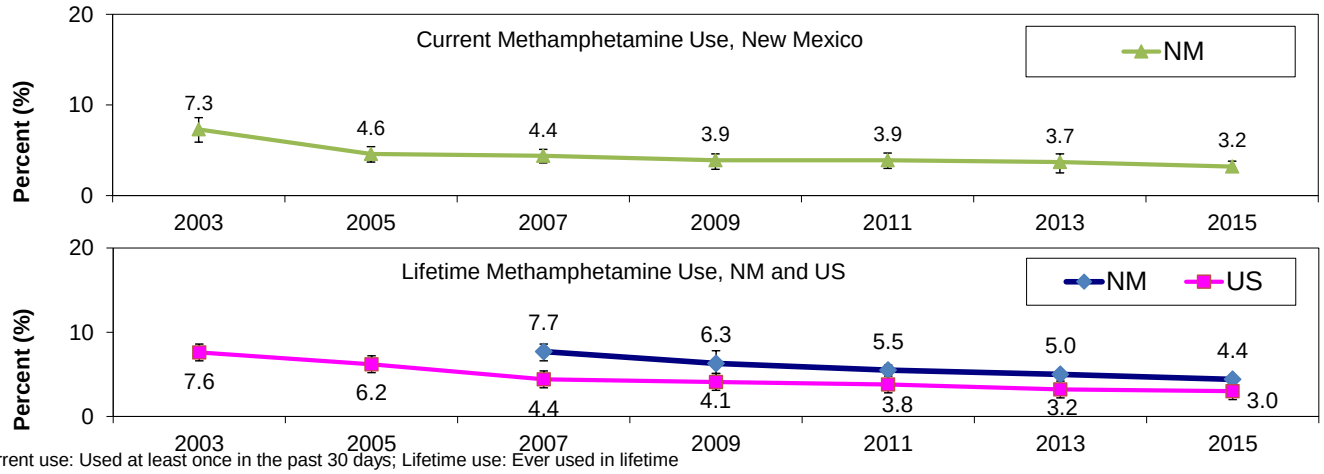
Problem Statement

New Mexico's rate of lifetime methamphetamine use decreased from 7.7% in 2007 to 4.4% in 2015. The US rate decreased from 1999 (9.1%, not shown) to 2015 (3.0%). The New Mexico rate for lifetime methamphetamine use has been consistently higher than the US rate. This remained true in 2015. For current methamphetamine use, NM prevalence decreased from 7.3% in 2003 to 4.6% in 2005, but there has been no significant change since then. There is no national comparison for current methamphetamine use.

Asian or Pacific Islander (9.3%) and Black (8.8%) students were more likely to be current methamphetamine users than Hispanic (3.4%), American Indian (2.8%), or White (1.9%) students. Prevalence of current methamphetamine use was not associated with grade level. Males were more likely to report current methamphetamine use (4.7%) than females (1.6%).

In 2015, the highest rates of current methamphetamine use were in Mora (7.4%), Roosevelt (7.3%), Lea (6.7%), and Hidalgo (6.7%) counties, and the lowest rates were in San Miguel (1.0%), Los Alamos (1.4%), and Dona Ana (1.7%) counties.

Chart 1: Methamphetamine Use*, Current and Lifetime, by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

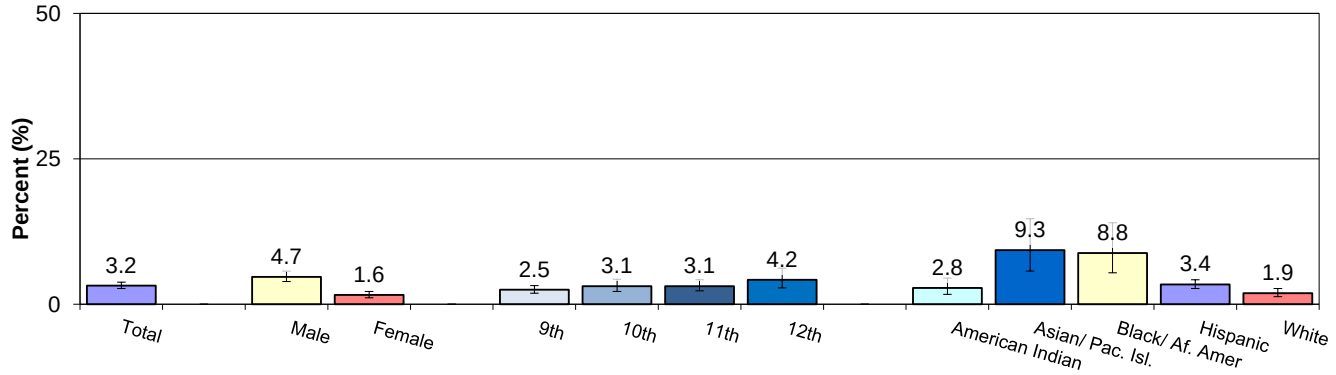
Table 1: Current Methamphetamine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	1.9 (0.6-6.3)	4.4 (1.9-10.0)	9.9 (4.4-20.8)	4.1 (1.6-9.8)	5.0 (2.9-8.4)
	Asian/Pacific Islander	--	--	--	--	13.9 (8.8-21.5)
	Black	--	--	--	--	12.2 (7.7-18.9)
	Hispanic	3.9 (2.7-5.5)	4.6 (2.8-7.4)	4.7 (3.1-6.9)	7.7 (5.1-11.5)	5.0 (4.0-6.3)
	White	0.7 (0.2-2.8)	2.9 (1.2-6.9)	0.8 (0.2-3.3)	5.5 (2.5-11.5)	2.5 (1.5-4.1)
	Total	3.2 (2.3-4.4)	4.5 (3.3-6.0)	5.0 (3.5-7.1)	6.7 (4.3-10.3)	4.7 (3.9-5.7)
Female	American Indian	1.5 (0.3-8.0)	0.0 (.-.)	0.8 (0.1-5.1)	0.5 (0.1-3.4)	0.7 (0.2-2.1)
	Asian/Pacific Islander	--	--	--	--	3.5 (0.9-12.4)
	Black	--	--	--	--	3.6 (0.6-19.3)
	Hispanic	1.8 (1.1-2.9)	1.9 (0.9-4.0)	1.2 (0.5-2.6)	2.2 (0.8-5.9)	1.8 (1.2-2.6)
	White	1.4 (0.5-4.3)	0.6 (0.1-3.7)	0.4 (0.1-1.8)	1.3 (0.4-4.3)	0.9 (0.5-1.8)
	Total	1.8 (1.2-2.7)	1.5 (0.7-3.1)	1.2 (0.7-2.1)	1.7 (0.7-3.8)	1.6 (1.1-2.2)
Total	American Indian	1.7 (0.6-4.7)	2.1 (0.9-4.9)	5.3 (2.5-10.9)	2.2 (0.9-5.0)	2.8 (1.7-4.5)
	Asian/Pacific Islander	--	--	--	--	9.3 (5.7-14.7)
	Black	2.3 (0.5-11.0)	--	--	--	8.8 (5.4-14.0)
	Hispanic	2.9 (2.1-3.9)	3.2 (1.9-5.2)	2.9 (2.1-3.9)	4.8 (3.2-7.3)	3.4 (2.7-4.2)
	White	1.0 (0.4-2.4)	2.1 (1.0-4.5)	0.6 (0.2-1.8)	3.6 (1.8-6.9)	1.9 (1.3-2.7)
	Total	2.5 (1.9-3.2)	3.1 (2.2-4.3)	3.1 (2.3-4.2)	4.2 (2.8-6.2)	3.2 (2.7-3.8)

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

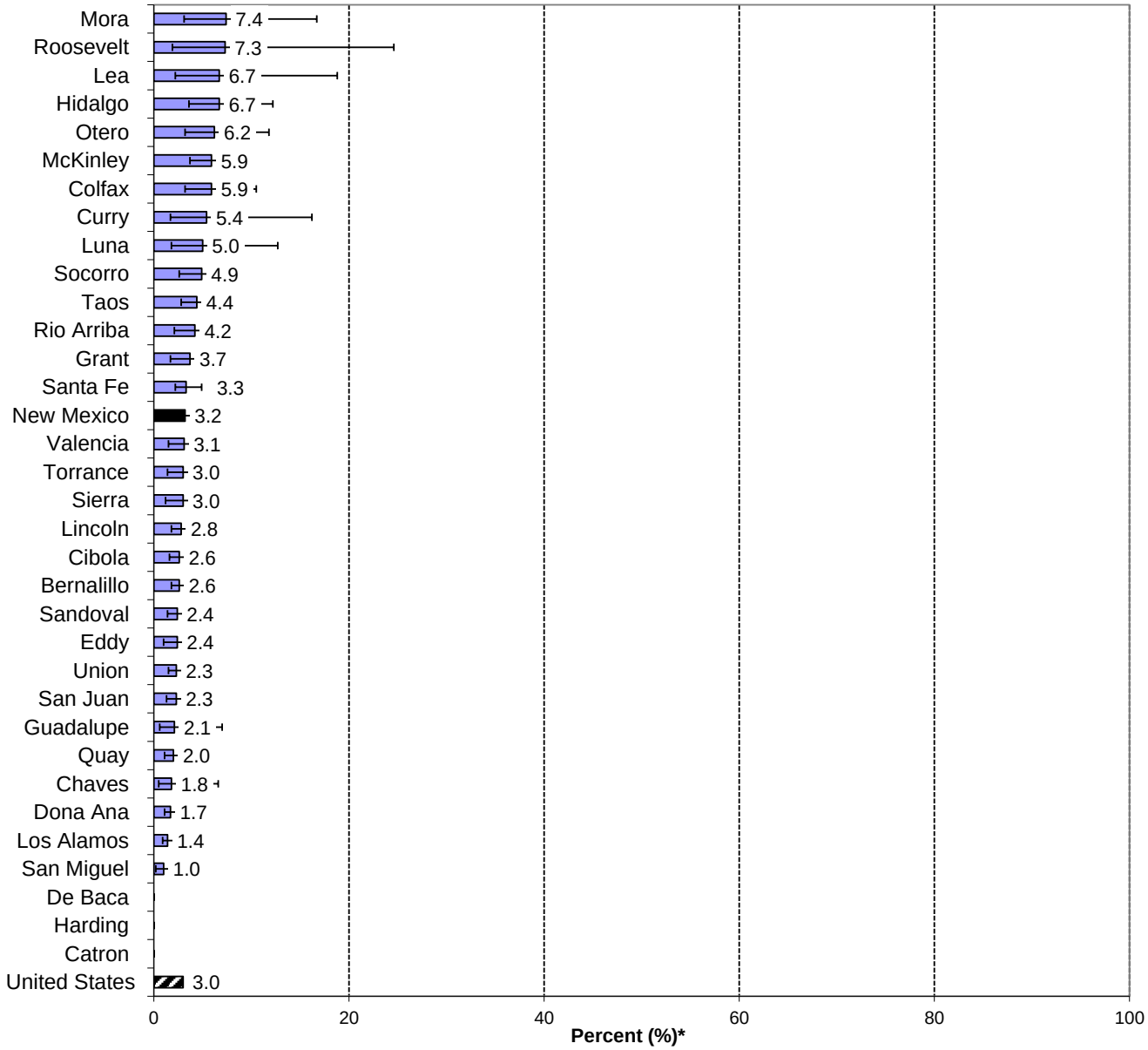
YOUTH METHAMPHETAMINE USE (continued)

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



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

Chart 3: Lifetime Methamphetamine Use* by County, Grades 9 - 12, New Mexico, 2015



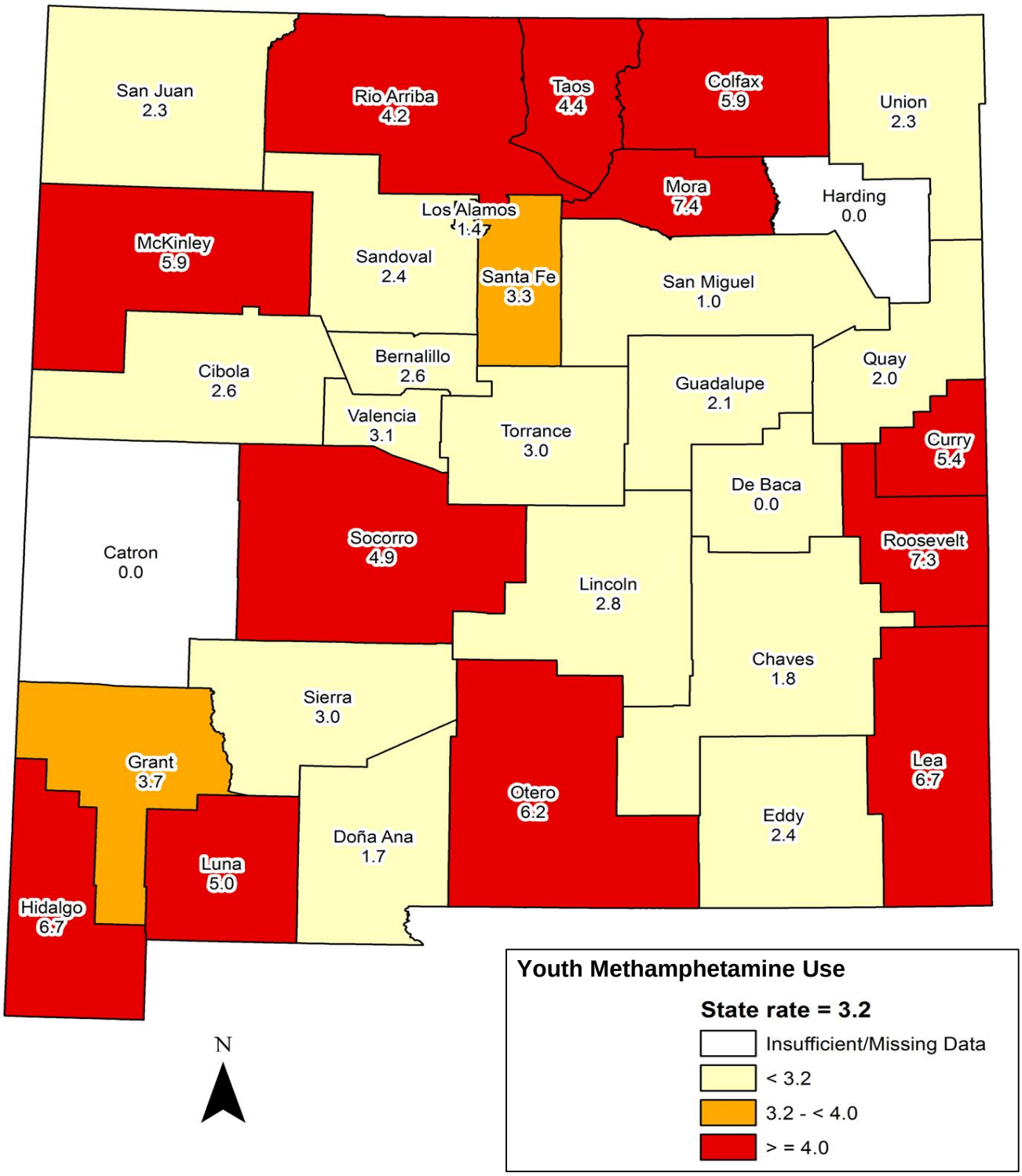
* Estimate of percent of high school students who reported methamphetamine use at least once in their lifetime

De Baca, Harding, and Catron 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 METHAMPHETAMINE USE (continued)

Chart 4: Current Methamphetamine Use* by County, Grades 9 - 12, New Mexico, 2015



* Estimate of percent of high school students who reported methamphetamine use at least once in their lifetime

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT INHALANT USE

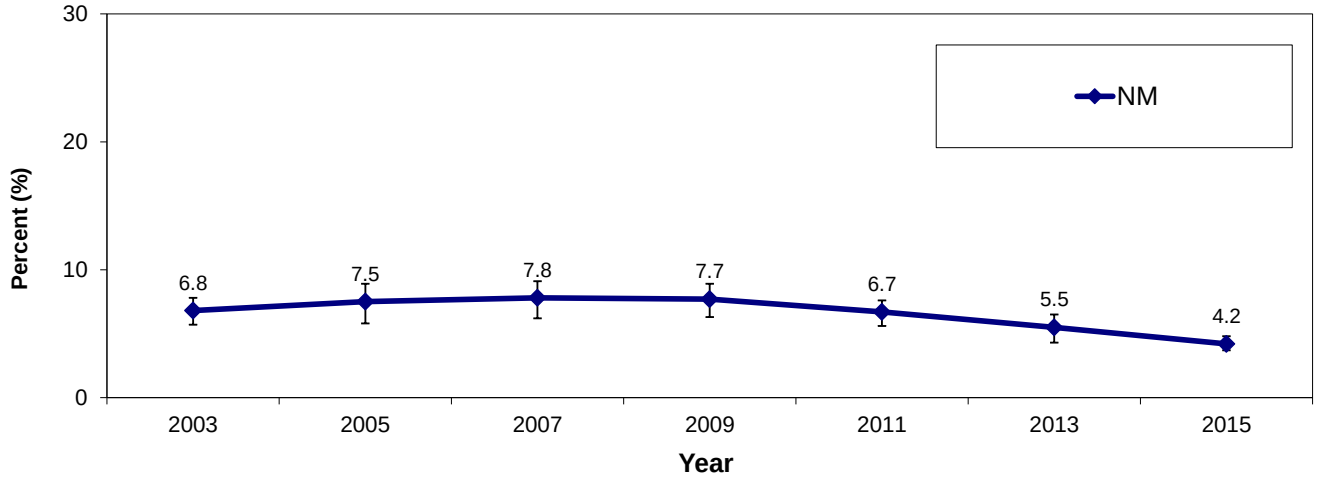
Problem Statement

The rate of current use of inhalants (sniffing glue, breathing the contents of aerosol spray cans, or inhaling paints or sprays) was 4.2% in 2015, and has not varied significantly over recent years. There is no national comparison for current inhalant use.

Asian or Pacific Islander (8.9%) and Black (6.2%) students were more likely to use inhalants than Hispanic (4.7%), American Indian (4.2%), or White (2.4%) students. Prevalence of inhalant use was not associated with grade level. There was no difference in prevalence of inhalant use between males (4.6%) and females (3.8%).

In 2015, the highest rates for current inhalant use were in Mora (12.6%), Curry (8.3%), and Otero (8.2%) counties; and the lowest in Eddy (2.0%), Union (2.3%), and Chaves (2.4%) counties.

Chart 1: Current Inhalant Use* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



* Used inhalants (sniffed glue, breathed contents of aerosol spray cans, or inhaled paints or sprays) at least one time in the past 30 days

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

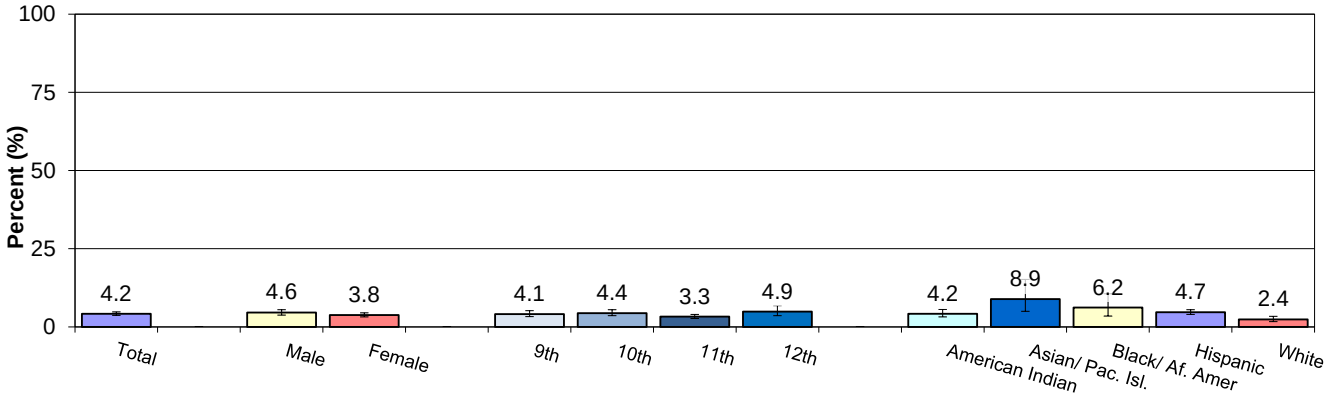
Table 1: Current Inhalant Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	1.3 (0.3-6.3)	1.5 (0.2-9.7)	6.1 (4.9-7.6)	4.4 (1.9-9.8)	3.2 (2.2-4.6)
	Asian/Pacific Islander	--	--	--	--	11.6 (5.8-22.1)
	Black	--	--	--	--	9.6 (5.4-16.6)
	Hispanic	4.5 (3.1-6.5)	5.4 (3.8-7.8)	3.9 (2.7-5.6)	9.1 (6.5-12.6)	5.5 (4.4-6.7)
	White	1.1 (0.3-4.5)	3.3 (1.7-6.3)	1.4 (0.4-4.2)	3.2 (1.3-8.1)	2.3 (1.4-3.7)
	Total	3.5 (2.4-5.0)	4.7 (3.5-6.2)	4.1 (3.2-5.2)	6.8 (4.7-9.8)	4.6 (3.8-5.5)
Female	American Indian	9.2 (4.9-16.9)	3.6 (1.0-12.6)	3.0 (0.6-14.3)	5.1 (1.7-14.3)	5.2 (3.2-8.4)
	Asian/Pacific Islander	--	--	--	--	5.2 (1.8-13.9)
	Black	--	--	--	--	0.8 (0.1-5.7)
	Hispanic	4.0 (2.6-6.0)	5.0 (3.5-6.9)	2.9 (1.6-5.1)	3.1 (1.5-6.4)	3.9 (3.2-4.7)
	White	4.5 (2.6-7.6)	2.0 (0.8-5.2)	1.3 (0.4-4.3)	2.3 (0.9-5.5)	2.6 (1.7-4.0)
	Total	4.9 (3.7-6.4)	4.2 (3.0-5.9)	2.5 (1.6-3.8)	3.0 (1.8-5.1)	3.8 (3.2-4.5)
Total	American Indian	5.1 (2.6-9.7)	2.6 (1.3-5.2)	4.5 (2.6-7.8)	4.8 (2.5-8.9)	4.2 (3.2-5.6)
	Asian/Pacific Islander	--	--	--	--	8.9 (5.0-15.2)
	Black	0.4 (0.1-3.3)	--	--	--	6.2 (3.5-10.6)
	Hispanic	4.3 (3.3-5.5)	5.2 (4.0-6.7)	3.4 (2.4-4.6)	6.0 (4.1-8.6)	4.7 (4.0-5.5)
	White	2.7 (1.6-4.7)	2.7 (1.5-4.8)	1.3 (0.6-3.0)	2.8 (1.4-5.5)	2.4 (1.7-3.4)
	Total	4.1 (3.3-5.2)	4.4 (3.6-5.5)	3.3 (2.7-4.0)	4.9 (3.6-6.8)	4.2 (3.7-4.8)

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

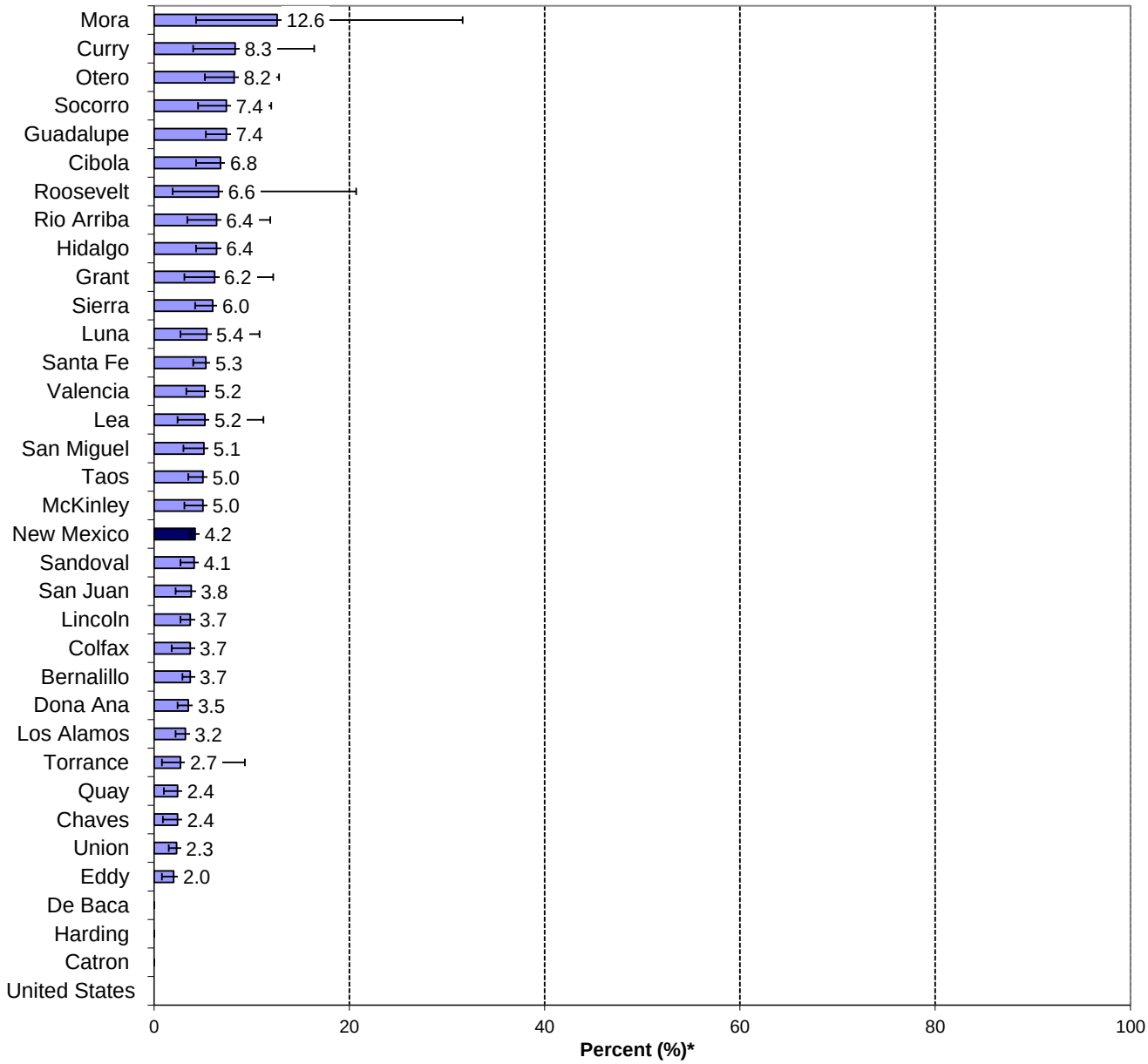
YOUTH CURRENT INHALANT USE (continued)

Chart 2: Current Inhalant Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Current Inhalant Use* by County, Grades 9 - 12, New Mexico, 2015



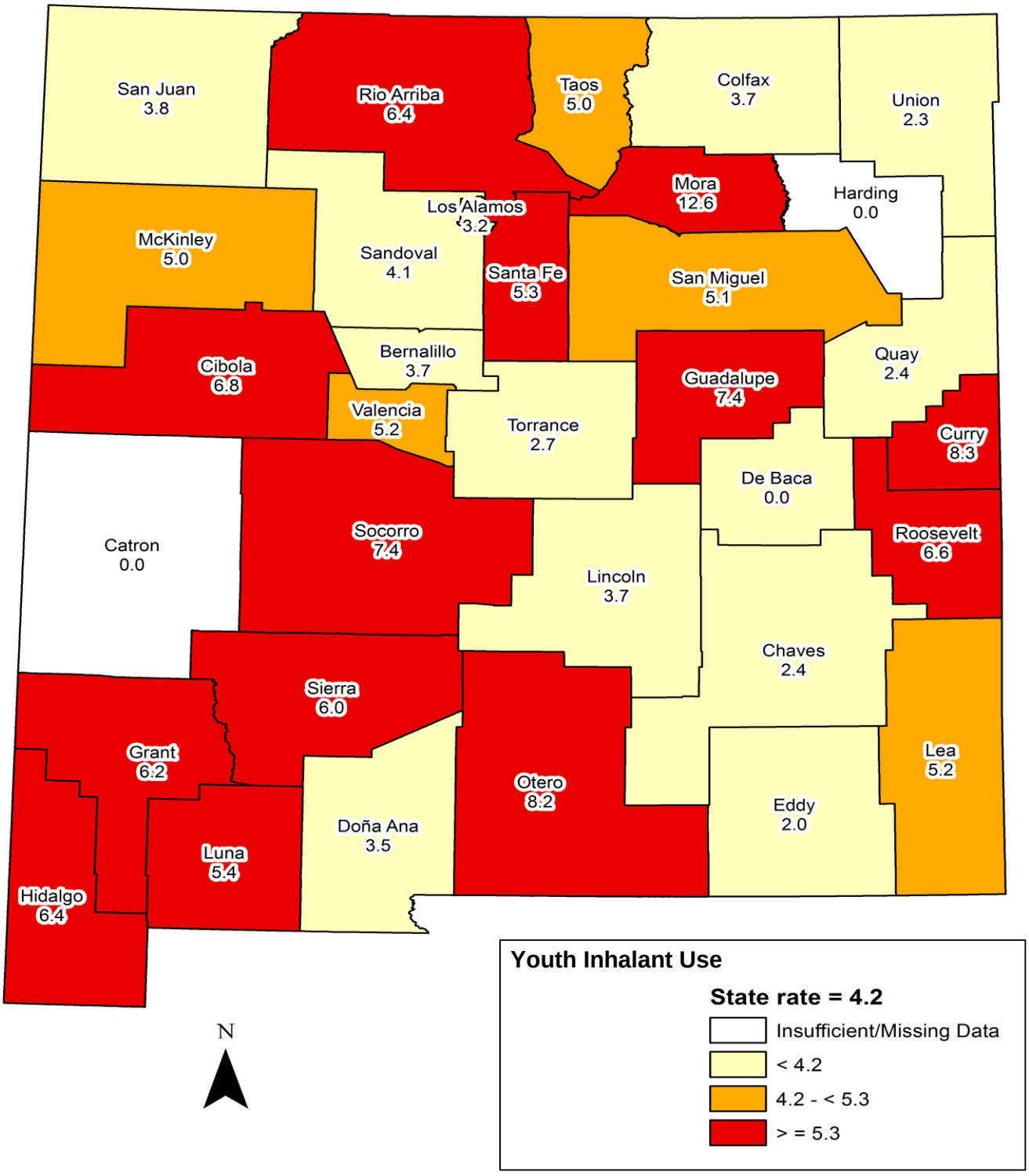
* Estimate of percent of high school students who reported inhalant use at least once in past 30 days

De Baca, Harding, and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT INHALANT USE (continued)

Chart 4: Current Inhalant Use* by County, Grades 9 - 12, New Mexico, 2015



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

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

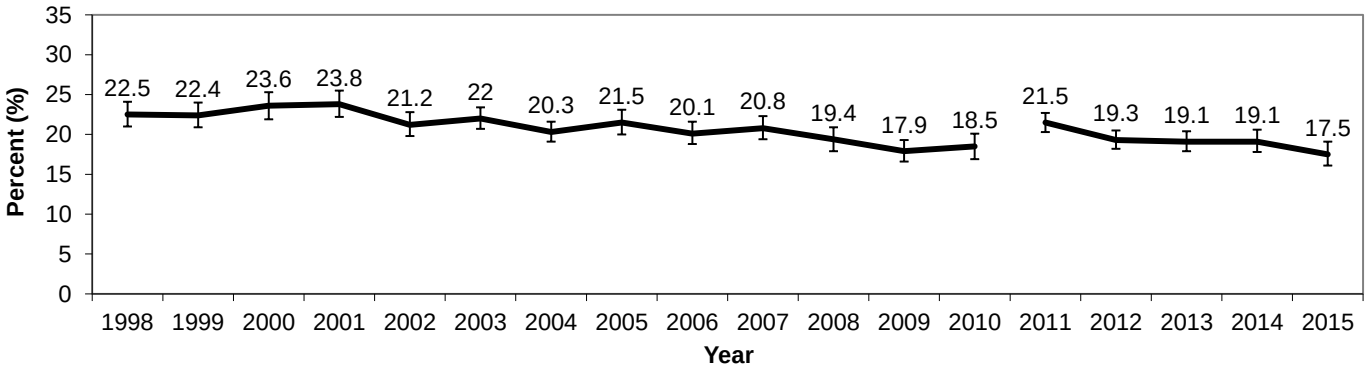
ADULT CIGARETTE SMOKING

Problem Statement

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

In 2015, current smoking rates among adults in New Mexico (17.5%) were the same as in the US overall. As shown in Chart 1, New Mexico's adult smoking prevalence rate has decreased over the past 10 years, with a small increase from 2009 to 2010. In 2014, as shown in Table 1, smoking was more prevalent among adults aged 25-64 (21.3%), than among young adults aged 18-24 (18.2%) or adults aged 65 and over (10.1%). New Mexico men were more likely to smoke than women (21.3% v 16.1%). Among males, Blacks had the highest smoking prevalence (28.3%), followed by Hispanics (23.6%) and Whites (19.3%). Among females, the highest prevalence of smoking was among Blacks (24.0%), followed by Whites (18.1%).

Chart 1: Cigarette Smoking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2015



* Cigarette smoking definition: smoked >= 100 cigarettes in lifetime and smoked cigarettes in past 30 days

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

Table 1: Cigarette Smoking (past 30 days) by Age, Sex, and Race/Ethnicity, Adults Aged 18+, New Mexico, 2013-2015

		Number				Percent*			
Sex	Race/Ethnicity	Ages 18-24	Ages 25-64	Ages 65+	All Ages	Ages 18-24	Ages 25-64	Ages 65+	All Ages*
Male	American Indian	2,709	8,076	802	11,812	24.7	18.1	11.6	18.9
	Asian/Pacific Islander	-	1,544	-	1,572	-	17.0	-	12.6
	Black	-	3,753	-	5,502	-	27.8	-	28.3
	Hispanic	11,171	63,926	5,994	81,293	19.0	26.6	13.0	23.6
	White	8,450	49,784	8,350	66,215	24.7	22.6	9.3	19.3
	Total	23,332	127,271	15,857	166,526	21.3	24.1	10.9	21.3
Female	American Indian	1,127	3,814	556	5,546	10.1	7.8	5.5	7.9
	Asian/Pacific Islander	-	2,018	-	1,937	-	17.7	-	12.6
	Black	-	3,343	241	3,455	-	35.1	10.6	24.0
	Hispanic	6,664	42,143	6,129	55,259	11.8	17.3	10.8	15.5
	White	7,018	48,486	9,463	64,176	24.4	21.8	9.2	18.1
	Total	14,889	99,941	16,608	130,931	14.8	18.7	9.5	16.1
Total	American Indian	3,775	12,096	1,262	17,422	17.1	12.9	7.4	13.1
	Asian/Pacific Islander	-	3,557	-	3,509	-	17.4	-	12.6
	Black	-	7,134	746	8,864	-	31.0	16.7	26.2
	Hispanic	18,072	105,441	12,111	136,194	15.7	21.8	11.8	19.4
	White	15,467	98,267	17,811	130,365	24.5	22.2	9.2	18.7
	Total	38,213	226,928	32,447	297,070	18.2	21.3	10.1	18.6

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

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

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Problem Statement (continued)

Smoking prevalence rates and smoking-related death rates were the highest among Black men (28.3% and 150.1 deaths per 100,000 population, respectively), compared to men and women of all other racial/ethnic groups. Among women, Blacks had the highest smoking prevalence rates (24.0%). However, White women had the highest smoking-related death rates (82.1%), followed by Blacks (60.7%).

As shown in Table 2 and Chart 2, the counties with the highest smoking rates were Valencia (31.9%), Socorro (28.7%), Sierra (27.6%), Curry (26.1%), and Torrance (26.0%). The counties with the lowest rates were Los Alamos (9.1%), Union (10.9%), McKinley (11.7%), Taos (15.1%), and Sandoval (15.4%).

Table 2: Cigarette Smoking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2013-2015

	Number						Percent*					
County	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races	American Indian	Asian/ Pacific Islander	Black	Hispanic	White	All Races
Bernalillo	2,511	-	4,280	43,649	41,106	94,464	11.6	-	28.2	18.6	17.4	18.1
Catron	-	-	-	-	613	704	-	-	-	-	24.6	22.2
Chaves	-	-	-	4,040	4,785	9,051	-	-	-	16.9	21.3	18.8
Cibola	1,235	-	-	2,361	1,082	4,642	16.1	-	-	30.1	22.1	22.3
Colfax	-	-	-	1,377	1,029	2,489	-	-	-	28.5	18.6	23.4
Curry	-	-	-	2,862	5,847	9,670	-	-	-	21.9	28.3	26.1
De Baca	-	-	-	-	-	319	-	-	-	-	-	20.8
Dona Ana	-	-	-	17,016	8,729	26,702	-	-	-	16.9	16.2	16.6
Eddy	-	-	-	3,331	5,638	9,194	-	-	-	18.8	25.1	22.1
Grant	-	-	-	1,564	2,113	3,748	-	-	-	15.0	17.4	16.2
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	728	-	-	-	-	-	20.5
Lea	-	-	-	4,186	5,231	10,146	-	-	-	17.3	24.6	21.1
Lincoln	-	-	-	1,384	2,480	3,952	-	-	-	30.5	21.8	23.9
Los Alamos	-	-	-	-	755	1,242	-	-	-	-	7.2	9.1
Luna	-	-	-	1,488	1,975	3,478	-	-	-	13.8	28.1	19.0
McKinley	3,527	-	-	1,515	728	6,052	9.2	-	-	23.0	12.5	11.7
Mora	-	-	-	635	-	689	-	-	-	20.6	-	17.8
Otero	693	-	-	2,802	6,160	10,209	25.0	-	-	17.1	21.6	20.2
Quay	-	-	-	758	892	1,649	-	-	-	27.2	23.3	24.1
Rio Arriba	535	-	-	4,561	1,005	6,288	13.4	-	-	21.5	21.5	20.8
Roosevelt	-	-	-	1,309	1,521	2,973	-	-	-	24.4	17.4	20.0
Sandoval	1,787	-	-	5,870	7,958	16,045	15.0	-	-	16.4	15.2	15.4
San Juan	3,754	-	-	4,162	9,257	17,593	11.3	-	-	26.4	22.2	19.1
San Miguel	-	-	-	3,100	507	3,694	-	-	-	18.1	10.5	16.2
Santa Fe	-	-	-	10,646	7,252	19,102	-	-	-	19.3	12.5	16.1
Sierra	-	-	-	-	1,965	2,683	-	-	-	-	28.2	27.6
Socorro	-	-	-	2,111	1,500	3,858	-	-	-	33.6	27.3	28.7
Taos	-	-	-	2,215	1,686	4,132	-	-	-	15.5	15.4	15.2
Torrance	-	-	-	-	2,036	3,194	-	-	-	-	28.8	26.0
Union	-	-	-	-	249	396	-	-	-	-	12.2	10.9
Valencia	-	-	-	10,552	6,426	18,387	-	-	-	32.7	28.9	31.9
New Mexico	17,422	3,509	8,864	136,194	130,365	297,070	13.1	12.6	26.2	19.4	18.7	18.6

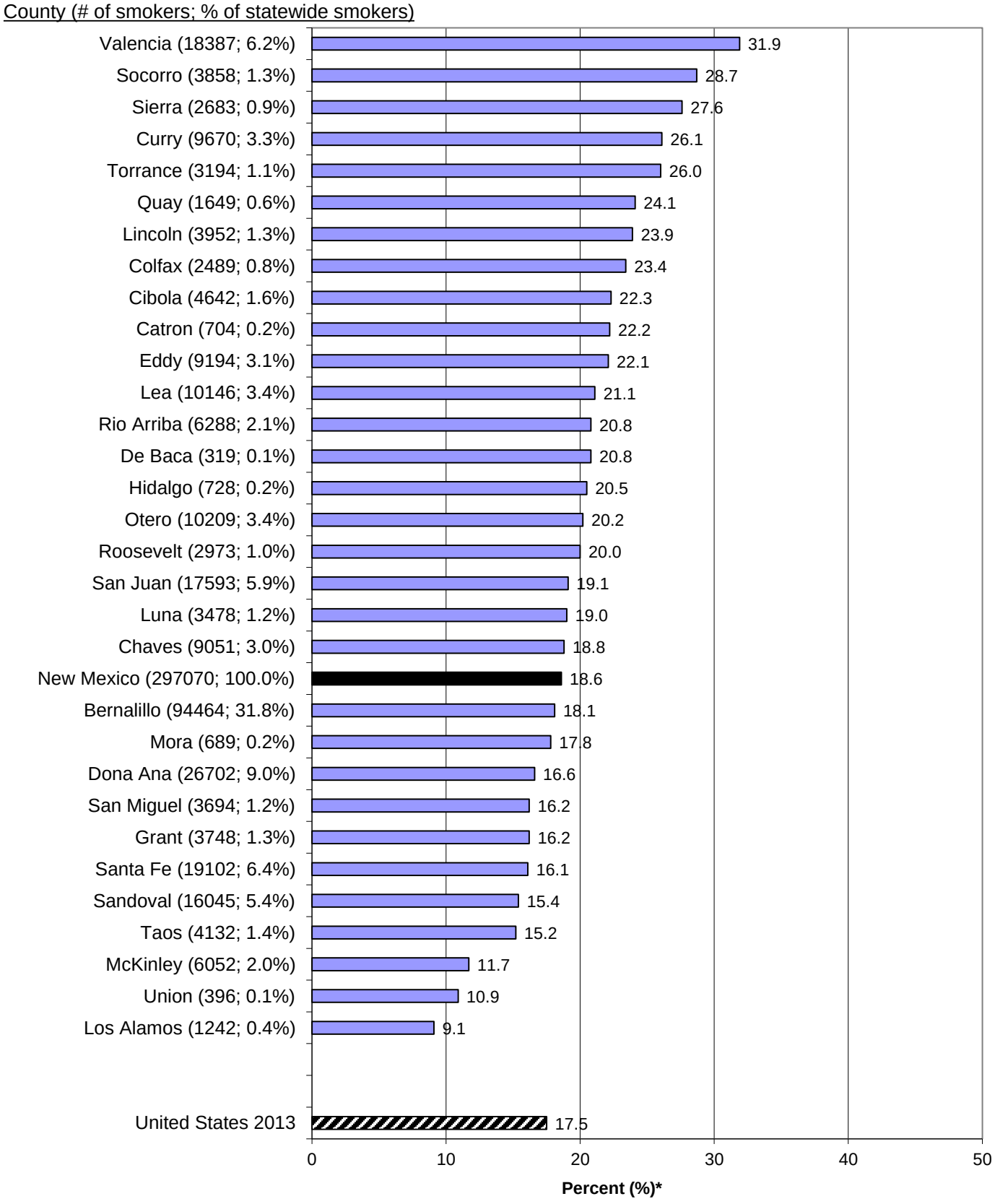
* Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

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

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Chart 2: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015

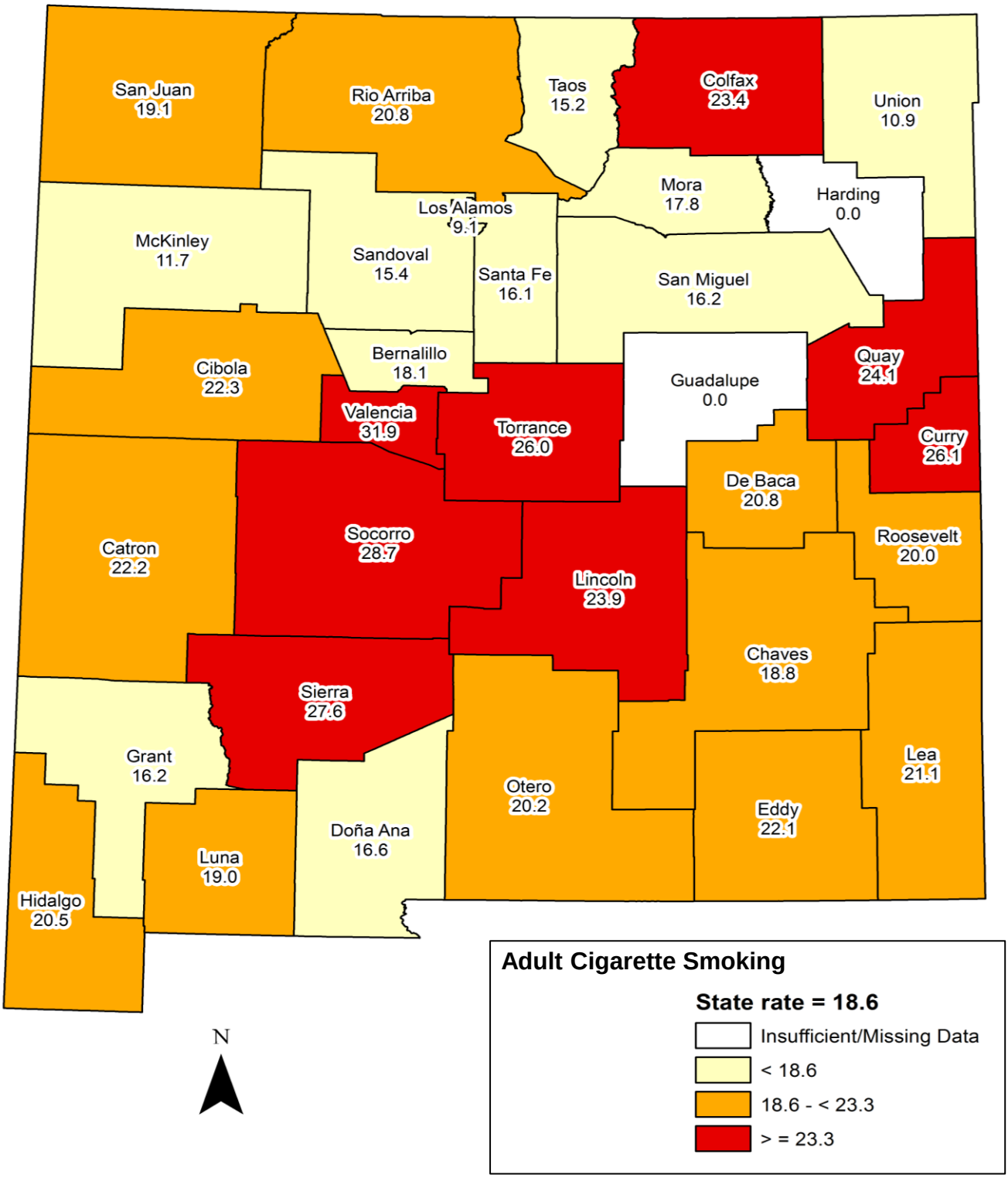


* Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

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

ADULT CIGARETTE SMOKING (continued)

Chart 3: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2013-2015



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

YOUTH CURRENT CIGARETTE SMOKING

Problem Statement*

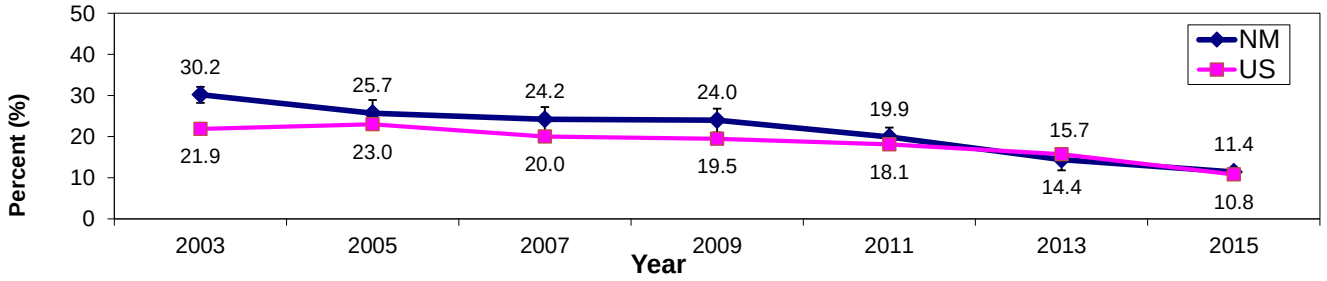
Cigarette smoking is the leading cause of preventable death in the US. Cigarette smoking increases risk for several cancers and other chronic conditions. Smoking is initiated and established primarily during adolescence, with more than 80% of adult smokers first smoking before age 18.**

The prevalence of current cigarette smoking among NM high school students has decreased from 30.2% in 2003 to 11.4% in 2015. This coincides with a decrease in the US rate that has occurred over the past several years. The NM rate was consistently higher than the US rate until 2011. In 2011, NM and US rates were not statistically distinguishable (US=18.1%; NM=19.9%). In 2015, the NM rate (11.4%) was higher than that of the US (10.8%).

Boys (12.8%) were more likely to be current cigarette smokers than girls (9.8%). Black (9.5%), White (10.5%) and Hispanic (10.7%) students had lower rates of current cigarette smoking than American Indian (17.0%) and Asian or Pacific Islander (12.3%) students. Chart 2 shows that prevalence increased significantly with grade level. In 2015, the counties with the highest prevalence of current smoking were Socorro (20.1%), Roosevelt (19.8%), and Sierra (19.3%). The counties with the lowest prevalence of current smoking were Chaves (6.1%), Hidalgo (8.1%), and Bernalillo (8.7%).

* YRRS tobacco questions do not distinguish between ceremonial/traditional and commercial tobacco use.
** Youth and Tobacco Use. Centers for Disease Control and Prevention.
http://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use.

Chart 1: Current Cigarette Smoking* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

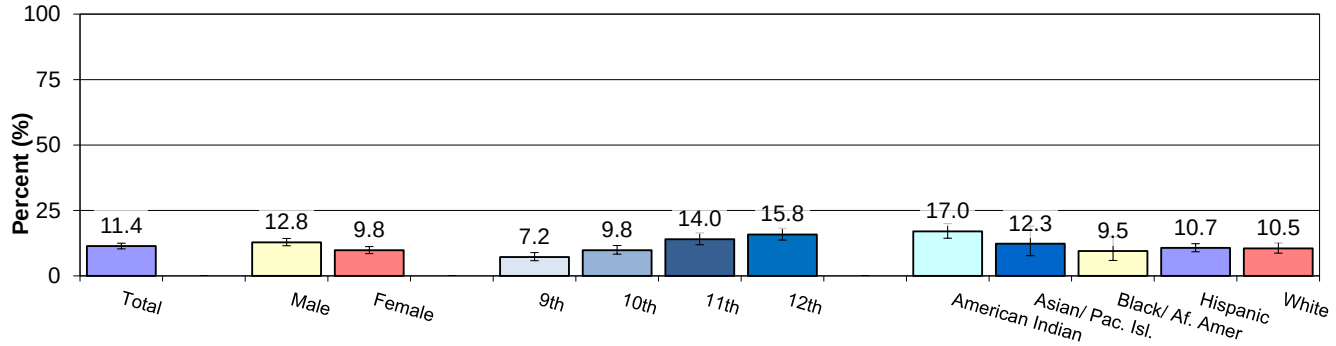
Table 1: Current Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	8.2 (3.1-20.0)	17.1 (8.0-32.9)	32.5 (23.4-43.2)	19.3 (11.8-29.9)	18.7 (15.2-22.9)
	Asian/Pacific Islander	--	--	--	--	19.0 (12.0-28.6)
	Black	--	--	--	--	13.1 (7.9-20.9)
	Hispanic	7.7 (5.5-10.5)	9.3 (7.4-11.6)	14.5 (11.3-18.4)	19.7 (14.8-25.8)	12.0 (10.1-14.2)
	White	5.5 (2.8-10.5)	11.2 (6.3-18.9)	10.7 (6.4-17.3)	19.7 (14.3-26.6)	11.7 (8.9-15.2)
	Total	7.3 (5.5-9.6)	11.2 (9.1-13.6)	15.4 (12.5-18.8)	20.0 (16.5-24.0)	12.8 (11.5-14.3)
Female	American Indian	11.7 (7.0-19.0)	19.0 (8.3-37.8)	15.5 (11.0-21.5)	15.2 (10.7-21.0)	15.4 (11.2-21.0)
	Asian/Pacific Islander	--	--	--	--	4.4 (1.5-12.3)
	Black	--	--	--	--	4.3 (1.1-15.5)
	Hispanic	7.2 (5.3-9.7)	7.3 (5.0-10.6)	13.4 (9.8-18.1)	10.4 (7.9-13.4)	9.4 (7.8-11.2)
	White	4.7 (2.3-9.2)	7.0 (4.3-11.3)	11.0 (7.2-16.5)	14.0 (9.5-20.2)	9.0 (7.0-11.5)
	Total	7.0 (5.4-9.0)	8.4 (6.2-11.2)	12.6 (10.2-15.6)	11.7 (9.7-14.2)	9.8 (8.5-11.2)
Total	American Indian	9.9 (5.3-17.8)	18.1 (13.7-23.5)	23.8 (18.6-30.0)	17.0 (12.4-23.0)	17.0 (14.4-20.0)
	Asian/Pacific Islander	--	--	--	--	12.3 (7.7-19.0)
	Black	6.6 (2.6-15.8)	--	--	--	9.5 (5.9-14.9)
	Hispanic	7.5 (5.9-9.5)	8.3 (6.5-10.5)	13.9 (11.2-17.1)	14.7 (11.6-18.5)	10.7 (9.2-12.3)
	White	5.1 (3.2-8.0)	9.4 (6.0-14.3)	10.8 (7.6-15.2)	17.3 (13.9-21.3)	10.5 (8.7-12.7)
	Total	7.2 (5.8-8.9)	9.8 (8.3-11.6)	14.0 (11.9-16.4)	15.8 (13.7-18.2)	11.4 (10.3-12.5)

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

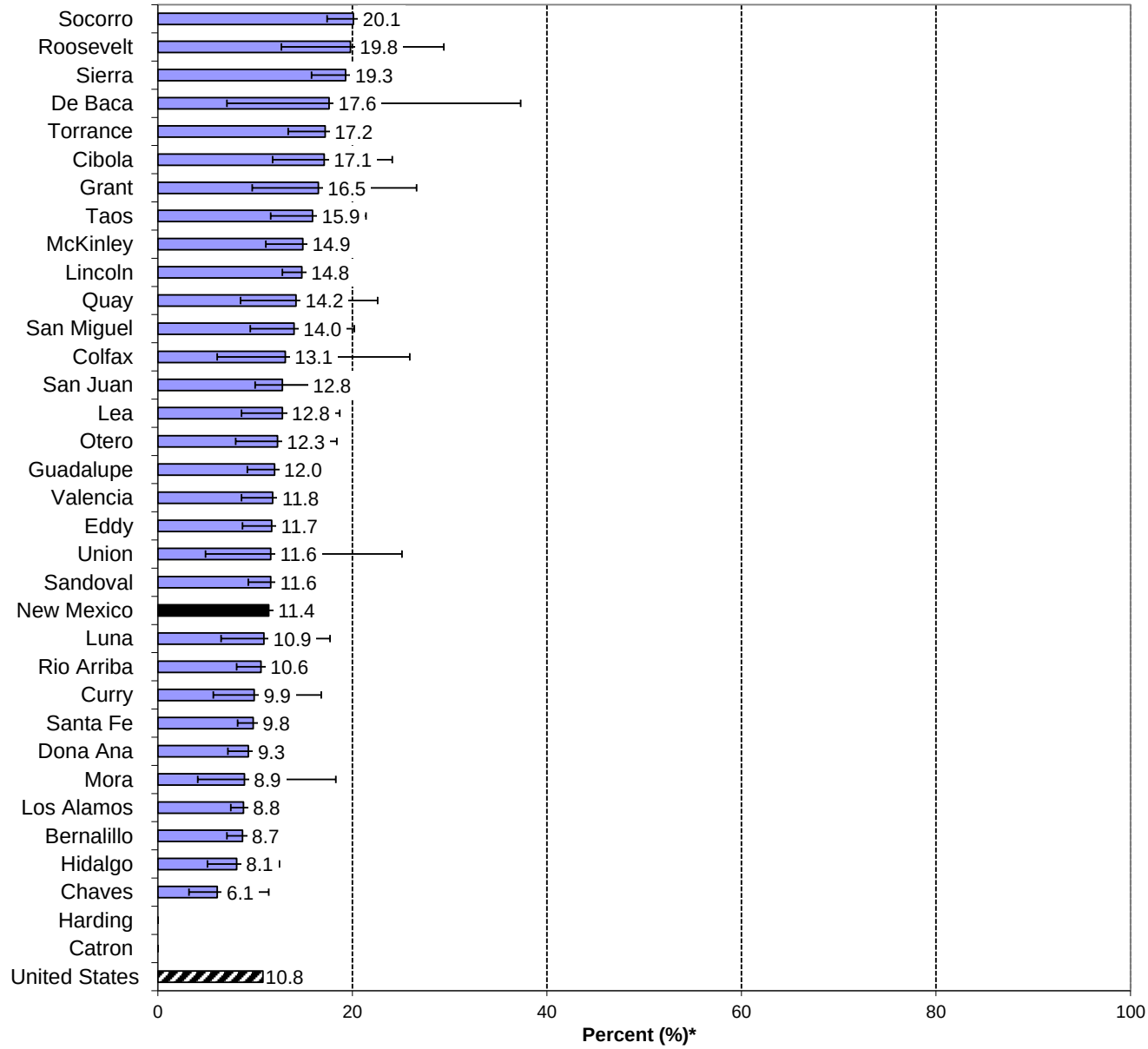
YOUTH CURRENT CIGARETTE SMOKING (continued)

Chart 2: Current Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Current Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2015



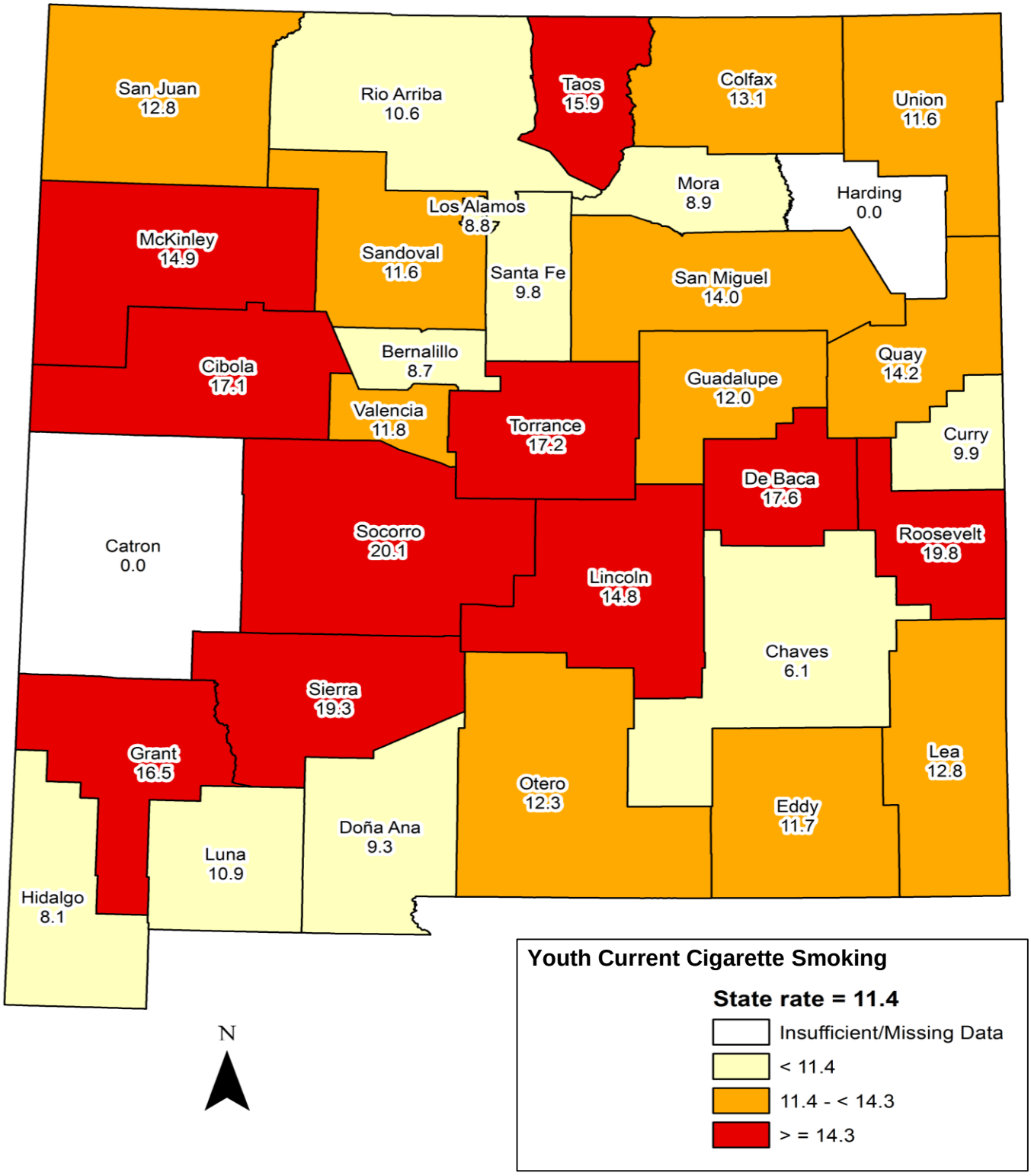
* Estimate of percent of high school students who reported smoking cigarettes on at least one of the past 30 days

Harding and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH CURRENT CIGARETTE SMOKING (continued)

Chart 4: Current Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2015



* Estimate of percent of high school students who reported smoking cigarettes on at least one of the past 30 days

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

YOUTH FREQUENT CIGARETTE SMOKING

Problem Statement*

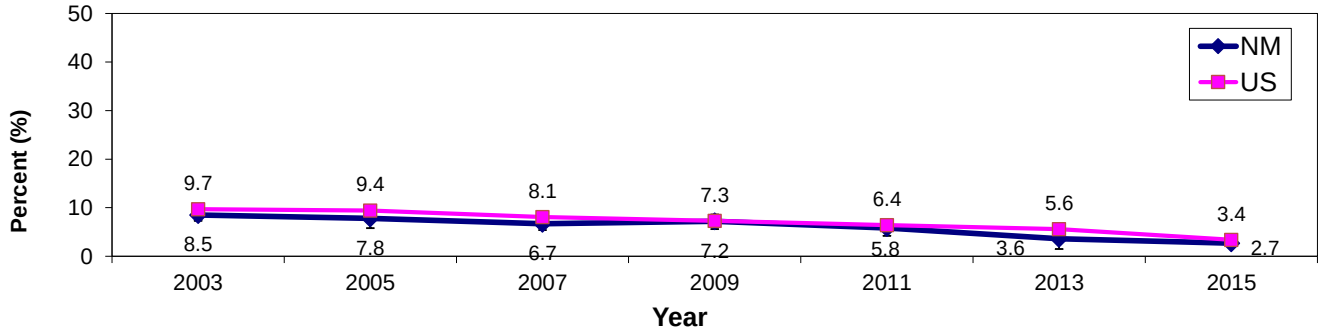
Frequent cigarette smoking means smoking cigarettes on at least 20 of the past 30 days. The prevalence of frequent cigarette smoking among New Mexico high school students has decreased from 8.5% in 2003 to 2.7% in 2015. This coincides with a decrease in the US rate of frequent smoking over the past several years. In 2015, the New Mexico prevalence of frequent smoking was not statistically different from the US rate (3.4%).

Boys (3.4%) were more likely to be frequent smokers than girls (2.0%). White (4.0%), Asian or Pacific Islander (5.1%) and Black (7.9%) students had a higher prevalence of frequent smoking than Hispanic (2.3%) or American Indian students (1.7%) students, but these differences were also not statistically significant. The prevalence of frequent smoking increased with grade level (9th=1.8%; 10th=2.2%; 11th=3.0%; 12th=4.0%), but these rates were also not statistically different.

In 2015, the highest rates for frequent cigarette smoking were in Socorro (9.0%), Torrance (7.7%), and De Baca (7.4%) counties. The lowest rates were in McKinley (1.0%), Bernalillo (1.6%), Chaves (1.7%), and Santa Fe (1.7%) counties.

* YRRS tobacco questions do not distinguish between ceremonial/traditional and commercial tobacco use.

Chart 1: Frequent Cigarette Smoking* by Year, Grades 9 - 12, New Mexico and US, 2003-2015



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

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

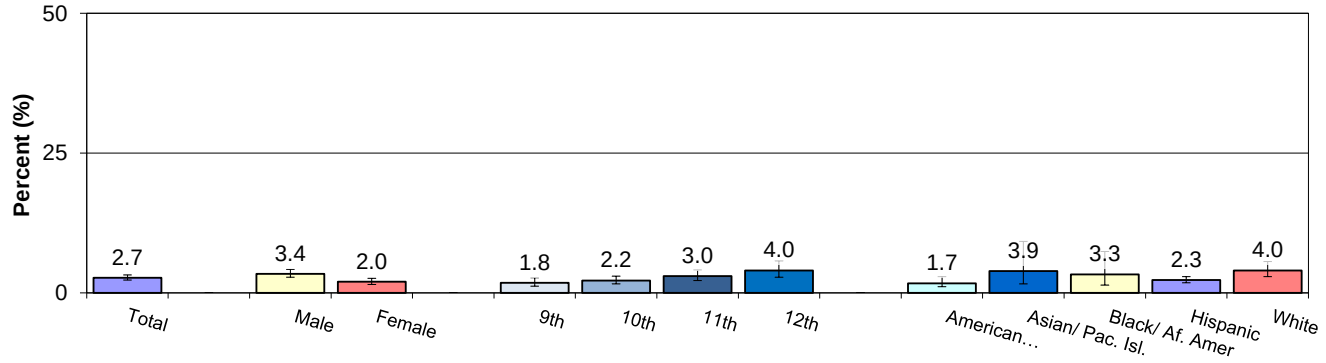
Table 1: Frequent Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015

		9th Grade	10th Grade	11th Grade	12th Grade	All Grades
Sex	**Race/Ethnicity**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**	**Percent [95% CI]**
Male	American Indian	1.0 (0.1-7.4)	4.5 (2.7-7.3)	2.5 (0.6-10.5)	1.4 (0.3-6.7)	2.3 (1.3-4.2)
	Asian/Pacific Islander	--	--	--	--	5.7 (2.2-14.2)
	Black	--	--	--	--	5.5 (2.4-12.3)
	Hispanic	2.4 (1.3-4.4)	2.2 (1.3-3.7)	4.1 (2.8-6.0)	3.6 (2.0-6.6)	3.0 (2.3-3.8)
	White	1.9 (0.6-6.2)	4.5 (2.0-10.2)	4.2 (1.9-9.4)	7.0 (3.8-12.5)	4.5 (2.9-6.8)
	Total	2.1 (1.3-3.4)	3.2 (2.1-4.9)	3.8 (2.5-5.7)	5.0 (3.3-7.5)	3.4 (2.8-4.2)
Female	American Indian	1.0 (0.2-6.3)	1.8 (0.2-13.8)	1.8 (0.3-9.6)	0.0 (.-.)	1.2 (0.4-3.6)
	Asian/Pacific Islander	--	--	--	--	1.8 (0.2-12.5)
	Black	--	--	--	--	0
	Hispanic	1.6 (0.9-3.2)	0.8 (0.3-2.0)	1.4 (0.6-3.2)	2.5 (1.3-5.0)	1.6 (1.1-2.4)
	White	1.6 (0.6-4.5)	1.7 (0.7-4.4)	5.2 (2.5-10.4)	6.1 (3.3-11.0)	3.6 (2.3-5.4)
	Total	1.5 (0.9-2.6)	1.1 (0.5-2.3)	2.3 (1.4-3.8)	3.1 (2.0-4.9)	2.0 (1.5-2.6)
Total	American Indian	1.0 (0.3-4.0)	3.1 (1.7-5.8)	2.1 (0.6-6.7)	0.7 (0.1-3.1)	1.7 (1.1-2.9)
	Asian/Pacific Islander	--	--	--	--	3.9 (1.6-9.2)
	Black	0.0 (.-.)	--	--	--	3.3 (1.4-7.4)
	Hispanic	2.0 (1.2-3.5)	1.5 (1.0-2.3)	2.7 (1.9-3.8)	3.0 (1.8-5.0)	2.3 (1.8-2.9)
	White	1.8 (0.8-4.0)	3.3 (1.8-6.2)	4.7 (2.7-7.8)	6.6 (4.1-10.2)	4.0 (2.9-5.6)
	Total	1.8 (1.2-2.7)	2.2 (1.6-3.0)	3.0 (2.2-4.1)	4.0 (2.8-5.7)	2.7 (2.3-3.2)

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

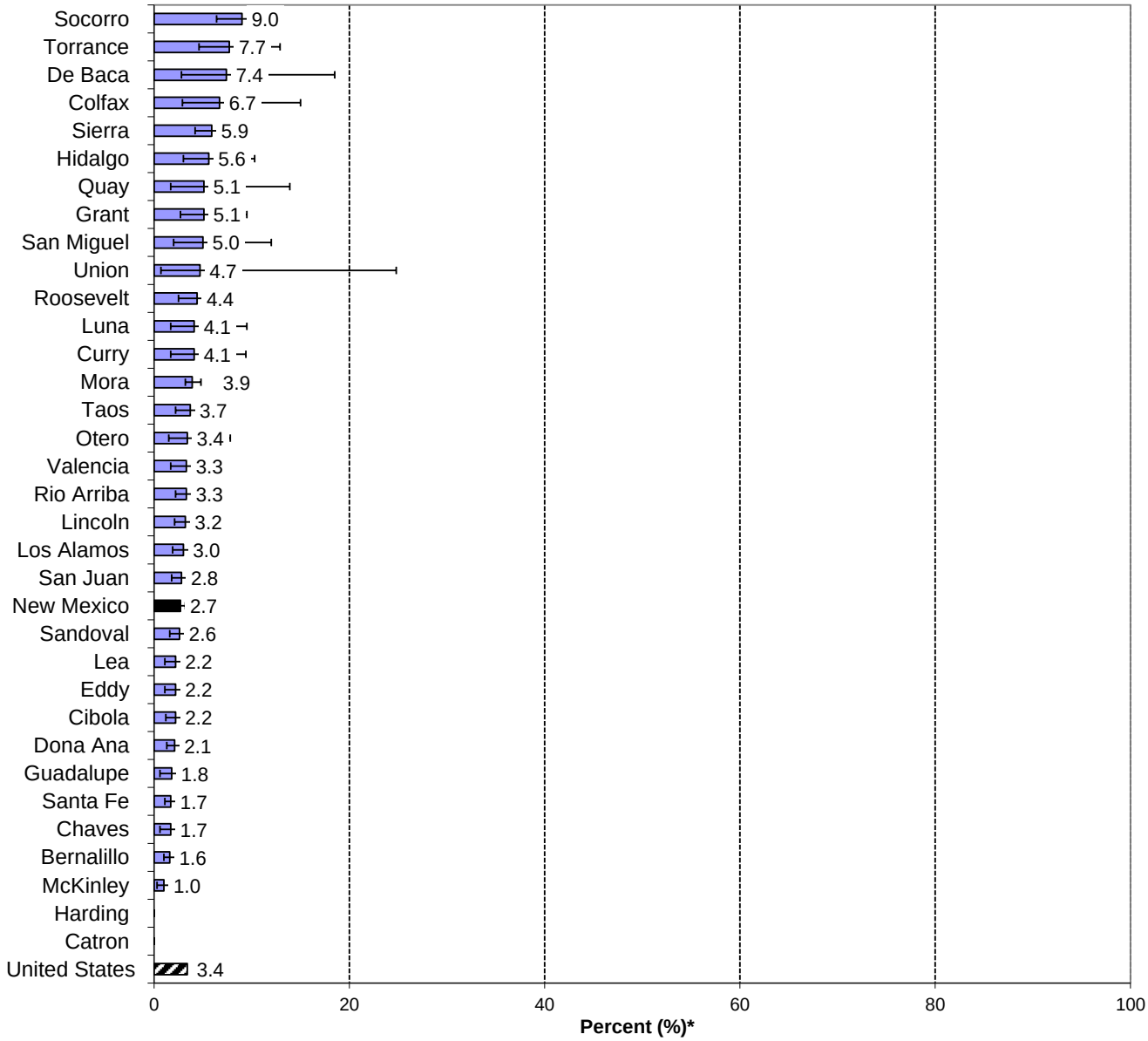
YOUTH FREQUENT CIGARETTE SMOKING (continued)

Chart 2: Frequent Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2015



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

Chart 3: Frequent Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2015



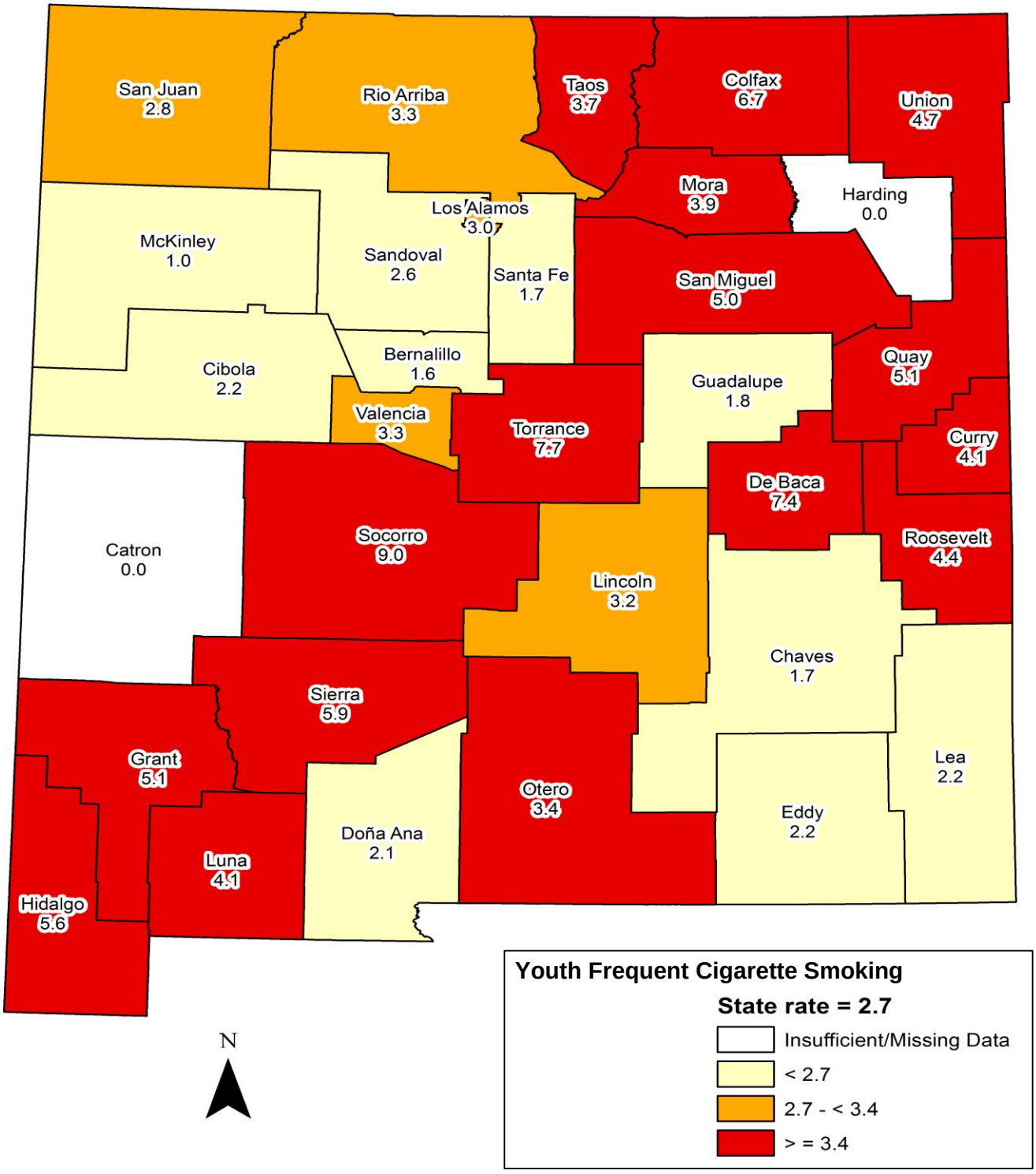
* Estimate of percent of high school students who reported smoking cigarettes on at least 20 of the past 30 days

Harding and Catron County estimates not available because of low numbers and/or low response rates

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

YOUTH FREQUENT CIGARETTE SMOKING (continued)

Chart 4: Frequent Cigarette Smoking* by County, Grades 9 - 12, New Mexico, 2015



* Estimate of percent of high school students who reported smoking cigarettes on at least 20 of the past 30 days

Insufficient data: county estimates not available because of low numbers and/or low response rates

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

Appendix 1

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

Appendix 1: Male Population, New Mexico, 2013*

		Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Male	Bernalillo	33,085	79,630	25,225	137,940	3,996	6,032	928	10,956	68,799	80,088	12,718	161,605	5,454	7,057	711	13,222	2,742	5,084	714	8,540	114,075	177,891	40,296	332,262
	Catron	237	668	570	1,476	3	16	3	22	92	197	107	396	16	17	13	45	0	1	0	1	348	899	692	1,940
	Chaves	3,894	6,942	2,856	13,692	270	313	59	642	8,545	8,087	1,365	17,996	152	156	27	335	156	129	14	300	13,017	15,627	4,321	32,966
	Cibola	687	1,621	653	2,961	57	91	16	164	1,880	3,321	496	5,697	2,153	2,426	501	5,081	30	42	6	78	4,807	7,501	1,673	13,981
	Colfax	651	1,682	939	3,272	20	30	6	56	1,171	1,687	496	3,353	25	70	13	108	13	16	1	31	1,880	3,484	1,455	6,820
	Curry	4,744	6,958	1,828	13,531	835	783	112	1,730	5,078	4,622	567	10,266	101	80	22	203	166	180	16	361	10,923	12,624	2,545	26,091
	De Baca	109	313	147	569	1	2	0	3	135	192	66	394	4	3	3	11	0	0	0	0	250	510	216	976
	Dona Ana	9,508	15,329	7,390	32,227	828	1,050	161	2,040	33,145	30,518	5,882	69,545	445	428	75	949	486	656	88	1,230	44,412	47,981	13,597	105,990
	Eddy	4,116	7,666	2,400	14,182	173	267	39	479	5,695	6,206	1,041	12,943	136	160	24	320	48	116	18	182	10,169	14,414	3,523	28,106
	Grant	1,448	3,347	2,202	6,996	91	75	12	178	2,917	3,113	1,067	7,097	29	67	21	117	47	30	13	90	4,532	6,632	3,315	14,479
	Guadalupe	79	310	65	455	6	55	0	61	633	1,062	321	2,016	7	36	3	46	3	19	0	22	729	1,483	390	2,601
	Harding	31	108	68	207	0	0	0	0	22	78	55	155	0	0	0	0	0	0	0	0	52	187	124	362
	Hidalgo	242	468	263	973	3	5	0	8	531	660	162	1,354	1	4	1	6	3	10	0	13	780	1,148	426	2,355
	Lea	4,031	7,498	2,213	13,742	582	756	110	1,447	9,293	9,125	939	19,357	125	187	26	337	63	103	10	176	14,094	17,668	3,298	35,060
	Lincoln	1,216	3,145	2,137	6,498	28	39	8	75	1,286	1,571	371	3,227	149	110	17	276	14	18	7	40	2,693	4,883	2,541	10,116
	Los Alamos	1,862	3,791	1,272	6,924	43	64	4	111	588	659	102	1,350	23	35	7	65	208	369	38	616	2,725	4,919	1,423	9,067
	Luna	782	1,815	1,563	4,160	43	75	15	134	3,562	3,503	855	7,919	29	39	19	87	15	38	12	65	4,430	5,471	2,464	12,365
	McKinley	1,113	2,017	746	3,876	229	160	29	418	2,525	2,238	496	5,259	11,621	12,346	1,909	25,877	114	169	16	300	15,602	16,930	3,197	35,728
	Mora	64	217	134	414	0	3	0	3	620	1,036	389	2,045	0	5	2	7	1	2	1	4	684	1,264	526	2,474
	Otero	5,182	9,083	3,641	17,907	606	708	129	1,442	5,516	5,294	957	11,766	907	899	118	1,924	195	218	22	435	12,407	16,202	4,866	33,475
	Quay	465	1,098	683	2,247	23	31	7	62	712	896	259	1,867	8	25	6	40	9	20	8	38	1,218	2,071	963	4,252
	Rio Arriba	436	1,459	749	2,644	43	69	7	119	5,062	7,340	1,900	14,302	1,063	1,356	232	2,651	18	40	5	63	6,622	10,264	2,894	19,779
	Roosevelt	2,047	2,606	865	5,518	161	96	10	267	2,092	1,806	239	4,136	55	40	9	105	81	39	3	123	4,436	4,588	1,126	10,150
	San Juan	8,084	17,193	6,110	31,385	650	938	165	1,753	10,544	12,298	1,885	24,728	3,670	4,005	564	8,240	359	537	99	995	23,307	34,971	8,823	67,101
	San Miguel	7,277	14,211	4,336	25,824	321	328	23	671	5,969	5,750	844	12,563	10,025	11,626	1,705	23,356	99	217	21	338	23,691	32,133	6,929	62,752
	Sandoval	596	1,412	721	2,730	116	91	8	215	3,746	5,663	1,575	10,985	47	56	11	114	31	48	9	88	4,538	7,270	2,325	14,132
	Santa Fe	5,301	17,175	8,212	30,689	248	522	77	848	13,952	19,722	3,754	37,428	681	963	161	1,805	267	531	88	887	20,450	38,914	12,292	71,656
	Sierra	578	1,755	1,605	3,938	18	21	13	52	658	771	279	1,708	15	50	11	76	1	13	12	26	1,271	2,611	1,920	5,802
	Socorro	1,057	1,672	763	3,492	55	68	8	131	1,744	2,073	591	4,408	475	438	64	977	46	58	7	110	3,376	4,309	1,433	9,118
	Taos	984	3,204	1,604	5,792	50	46	18	115	3,199	4,772	1,428	9,400	320	491	126	937	14	61	8	83	4,567	8,575	3,185	16,327
	Torrance	1,130	2,396	954	4,479	56	106	18	181	1,354	1,653	388	3,395	80	105	15	200	20	16	6	42	2,641	4,276	1,380	8,297
	Union	327	731	270	1,327	10	69	2	82	351	657	114	1,122	8	28	1	37	2	16	2	20	698	1,501	389	2,588
	Valencia	3,290	7,387	2,859	13,536	166	368	72	606	9,513	11,189	2,243	22,945	528	718	122	1,368	76	109	23	208	13,574	19,770	5,319	38,662
Male Total		104,653	224,907	86,043	415,603	9,731	13,277	2,059	25,071	210,929	237,847	43,951	492,727	38,352	44,026	6,539	88,922	5,327	8,905	1,267	15,505	368,998	528,971	139,866	1,037,830

* 2013 population is reported here because 2012 was the mid-point year for the 2011-2015 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Female Population, New Mexico, 2013*

		Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Female	Bernalillo	30,857	80,014	31,549	142,421	3,510	4,465	949	8,923	66,900	84,200	17,109	168,210	5,641	8,449	1,126	15,216	2,666	6,010	1,063	9,739	109,576	183,138	51,796	344,510
	Catron	258	696	459	1,412	2	7	3	13	75	146	79	300	16	31	5	52	1	2	0	3	351	881	547	1,780
	Chaves	3,404	7,227	3,564	14,195	209	252	85	546	8,185	8,241	1,546	17,973	82	132	47	262	86	155	35	276	11,966	16,007	5,278	33,251
	Cibola	618	1,605	704	2,927	71	85	12	168	1,671	2,268	641	4,580	2,180	2,764	721	5,664	28	57	10	95	4,568	6,779	2,088	13,435
	Colfax	578	1,710	991	3,280	6	9	1	16	1,103	1,476	567	3,147	13	36	7	56	7	23	5	35	1,709	3,255	1,572	6,535
	Curry	3,857	6,314	2,376	12,547	630	660	118	1,407	4,616	4,482	689	9,785	70	125	18	213	135	297	49	481	9,306	11,877	3,249	24,433
	De Baca	133	283	180	596	0	3	0	3	150	175	68	394	0	5	1	6	0	1	0	1	283	468	249	1,000
	Dona Ana	8,646	15,038	8,042	31,726	687	657	148	1,492	32,828	33,728	7,220	73,777	465	386	85	937	482	841	131	1,454	43,109	50,651	15,626	109,386
	Eddy	3,743	7,460	3,002	14,205	139	163	48	350	5,542	5,924	1,214	12,679	113	159	24	297	55	142	31	228	9,591	13,847	4,320	27,759
	Grant	1,285	3,674	2,217	7,175	44	47	14	105	2,664	3,341	1,312	7,318	47	84	23	154	29	52	16	97	4,070	7,198	3,582	14,850
	Guadalupe	62	173	76	311	1	3	0	4	509	787	359	1,655	4	7	1	12	6	14	1	21	583	985	437	2,004
	Harding	22	111	61	194	0	0	0	0	28	66	42	136	0	0	0	0	0	0	0	0	50	177	103	330
	Hidalgo	240	481	236	956	6	6	2	14	460	622	218	1,301	3	5	0	8	5	8	0	13	714	1,122	456	2,292
	Lea	3,786	7,158	2,712	13,655	496	531	147	1,174	8,808	8,015	1,016	17,839	110	128	30	268	48	116	19	183	13,247	15,947	3,924	33,118
	Lincoln	1,056	3,476	2,229	6,762	36	37	6	79	1,224	1,544	399	3,167	104	153	30	287	11	33	5	49	2,432	5,242	2,669	10,343
	Los Alamos	1,766	3,540	1,284	6,590	32	35	8	75	595	758	157	1,509	17	45	6	68	176	361	51	589	2,588	4,739	1,505	8,832
	Luna	722	1,794	1,642	4,158	42	66	14	123	3,436	3,611	948	7,996	25	38	20	83	10	55	16	81	4,235	5,565	2,641	12,442
	McKinley	1,078	2,020	804	3,903	228	125	18	371	2,487	2,116	574	5,177	11,505	14,045	3,001	28,552	78	252	37	367	15,377	18,558	4,435	38,371
	Mora	54	255	134	443	0	8	1	9	554	964	391	1,909	1	6	0	7	0	5	0	5	608	1,239	526	2,373
	Otero	4,184	8,292	3,855	16,330	512	486	134	1,131	5,212	5,449	1,214	11,875	831	1,081	154	2,067	165	394	103	661	10,902	15,702	5,459	32,063
	Quay	463	1,195	699	2,357	33	31	4	69	717	938	342	1,996	8	23	4	35	9	25	7	42	1,231	2,213	1,055	4,500
	Rio Arriba	416	1,494	827	2,736	41	37	13	91	4,923	7,185	2,246	14,355	1,184	1,483	361	3,028	24	76	2	102	6,589	10,275	3,449	20,313
	Roosevelt	2,013	2,610	1,047	5,670	104	58	4	166	2,036	1,657	247	3,939	61	51	11	122	94	59	4	157	4,307	4,433	1,313	10,053
	San Juan	7,399	18,063	7,029	32,490	601	687	219	1,507	10,337	12,973	2,419	25,729	3,598	4,305	898	8,802	381	838	139	1,359	22,317	36,866	10,704	69,887
	San Miguel	7,114	14,160	5,279	26,554	306	206	32	544	5,870	5,361	975	12,207	10,050	11,943	2,368	24,361	123	246	48	417	23,464	31,916	8,703	64,083
	Sandoval	548	1,544	838	2,930	117	71	19	207	3,693	5,621	1,838	11,152	84	84	7	175	47	53	49	149	4,491	7,373	2,751	14,614
	Santa Fe	4,868	19,710	9,671	34,249	200	288	64	552	13,959	19,068	4,737	37,763	706	1,010	201	1,917	262	710	157	1,129	19,996	40,785	14,830	75,611
	Sierra	561	1,826	1,570	3,957	14	22	8	44	588	800	302	1,690	16	37	15	68	0	17	12	29	1,178	2,702	1,907	5,788
	Socorro	660	1,655	744	3,059	47	41	2	89	1,712	2,049	606	4,368	475	481	66	1,022	34	61	7	102	2,930	4,286	1,425	8,641
	Taos	889	3,732	1,877	6,498	50	39	13	103	2,948	4,646	1,719	9,313	285	506	165	956	22	114	16	153	4,194	9,038	3,791	17,023
	Torrance	993	2,278	912	4,183	43	41	7	92	1,186	1,478	394	3,058	54	76	18	148	13	29	9	51	2,289	3,902	1,340	7,532
	Union	280	555	353	1,187	1	3	0	4	226	337	131	694	1	8	2	11	0	2	6	8	508	905	492	1,905
	Valencia	3,027	7,537	3,157	13,720	146	168	51	366	8,958	11,047	2,542	22,547	489	717	137	1,343	85	160	48	293	12,704	19,630	5,935	38,269
Female Total		95,580	227,680	100,120	423,376	8,354	9,337	2,144	19,837	204,200	241,073	54,261	499,538	38,238	48,403	9,552	96,197	5,082	11,208	2,076	18,369	351,463	537,701	168,157	1,057,326

* 2013 population is reported here because 2012 was the mid-point year for the 2011-2015 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Total Population, New Mexico, 2013*

		Race/Ethnicity																							
		White				Black				Hispanic				American Indian				Other				All Race/Ethnicities			
Sex	County Name	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages	0-24	25-64	65+	All Ages
Both	Bernalillo	63,942	159,645	56,775	280,361	7,505	10,497	1,876	19,879	135,700	164,287	29,828	329,815	11,095	15,506	1,837	28,438	5,408	11,094	1,777	18,279	223,651	361,029	92,092	676,772
Sexes	Catron	495	1,364	1,029	2,888	5	23	6	35	167	343	186	696	31	48	18	97	1	3	0	4	700	1,781	1,239	3,720
	Chaves	7,299	14,169	6,420	27,887	478	565	144	1,188	16,730	16,328	2,911	35,969	235	288	74	597	243	284	49	576	24,984	31,634	9,599	66,217
	Cibola	1,306	3,226	1,357	5,889	128	176	28	332	3,551	5,589	1,138	10,278	4,333	5,190	1,223	10,745	58	99	16	173	9,375	14,280	3,761	27,416
	Colfax	1,231	3,392	1,930	6,552	27	39	7	73	2,274	3,163	1,063	6,500	38	106	21	164	20	39	6	66	3,589	6,739	3,027	13,355
	Curry	8,601	13,272	4,204	26,077	1,465	1,443	230	3,137	9,693	9,104	1,255	20,052	171	205	40	415	301	477	65	842	20,230	24,501	5,794	50,524
	De Baca	243	596	326	1,165	1	5	0	6	285	368	134	787	4	9	4	17	0	1	0	1	533	978	465	1,976
	Dona Ana	18,153	30,367	15,433	63,953	1,516	1,708	309	3,532	65,973	64,246	13,103	143,322	912	814	160	1,886	968	1,497	218	2,684	87,521	98,632	29,223	215,376
	Eddy	7,859	15,126	5,403	28,387	311	430	87	829	11,237	12,130	2,256	25,622	249	319	48	616	103	257	49	410	19,760	28,262	7,843	55,865
	Grant	2,732	7,020	4,419	14,171	135	122	26	284	5,582	6,454	2,379	14,415	76	151	44	272	76	82	29	187	8,601	13,830	6,897	29,329
	Guadalupe	143	483	141	766	7	58	0	65	1,142	1,850	680	3,672	11	43	4	58	9	34	1	44	1,312	2,467	826	4,605
	Harding	53	219	129	401	0	0	0	0	49	144	98	291	0	0	0	0	0	0	0	0	102	363	227	692
	Hidalgo	482	949	499	1,929	9	11	2	22	992	1,282	381	2,655	4	9	1	14	8	18	0	27	1,494	2,270	882	4,647
	Lea	7,816	14,655	4,925	27,397	1,079	1,287	257	2,621	18,100	17,140	1,956	37,196	235	314	56	605	111	219	29	358	27,341	33,615	7,222	68,178
	Lincoln	2,272	6,621	4,366	13,260	63	76	14	154	2,510	3,114	769	6,394	253	262	47	562	26	51	12	89	5,125	10,125	5,210	20,459
	Los Alamos	3,628	7,331	2,555	13,514	75	99	12	187	1,184	1,417	259	2,859	40	80	13	133	385	731	89	1,205	5,313	9,658	2,929	17,899
	Luna	1,503	3,609	3,206	8,318	85	142	29	256	6,998	7,114	1,803	15,916	54	77	39	171	25	93	28	147	8,665	11,036	5,105	24,807
	McKinley	2,191	4,036	1,550	7,779	457	285	48	789	5,012	4,354	1,070	10,436	23,126	26,392	4,911	54,429	192	421	54	667	30,978	35,489	7,632	74,099
	Mora	117	472	268	857	0	12	1	13	1,173	2,000	780	3,953	1	12	2	15	1	7	1	9	1,293	2,503	1,052	4,847
	Otero	9,366	17,376	7,496	34,237	1,117	1,194	262	2,573	10,728	10,743	2,170	23,641	1,739	1,980	272	3,991	360	612	125	1,096	23,309	31,904	10,325	65,538
	Quay	929	2,293	1,382	4,604	57	63	11	131	1,429	1,834	600	3,863	16	49	10	75	18	46	15	79	2,448	4,285	2,019	8,752
	Rio Arriba	851	2,953	1,576	5,380	84	106	20	210	9,985	14,525	4,146	28,657	2,248	2,839	593	5,679	42	116	7	165	13,210	20,539	6,342	40,092
	Roosevelt	4,059	5,216	1,912	11,188	264	154	14	433	4,127	3,463	485	8,075	116	91	20	227	175	98	7	280	8,743	9,021	2,439	20,203
	San Juan	15,482	35,255	13,138	63,875	1,251	1,625	383	3,260	20,882	25,271	4,304	50,457	7,269	8,311	1,462	17,041	740	1,375	239	2,354	45,624	71,837	19,527	136,988
	San Miguel	14,391	28,372	9,616	52,378	626	534	55	1,216	11,839	11,112	1,819	24,770	20,076	23,568	4,073	47,717	222	463	69	755	47,155	64,049	15,631	126,835
	Sandoval	1,144	2,956	1,559	5,660	233	162	27	423	7,441	11,283	3,413	22,136	131	140	18	290	78	101	58	237	9,027	14,643	5,075	28,746
	Santa Fe	10,168	36,885	17,884	64,938	448	811	141	1,400	27,910	38,790	8,491	75,191	1,388	1,973	362	3,723	529	1,241	245	2,016	40,445	79,699	27,123	147,267
	Sierra	1,139	3,581	3,176	7,895	32	43	21	97	1,247	1,571	581	3,398	31	88	26	145	1	30	24	55	2,449	5,313	3,828	11,590
	Socorro	1,718	3,327	1,507	6,551	101	108	10	220	3,456	4,122	1,197	8,776	951	919	130	1,999	80	119	14	213	6,307	8,595	2,858	17,759
	Taos	1,872	6,936	3,481	12,290	101	86	31	218	6,147	9,418	3,148	18,713	604	998	291	1,893	36	175	24	236	8,761	17,613	6,976	33,350
	Torrance	2,124	4,673	1,866	8,662	100	147	25	272	2,540	3,131	781	6,452	134	181	33	348	33	45	15	94	4,931	8,178	2,721	15,829
	Union	607	1,286	622	2,515	11	73	2	86	576	994	245	1,816	9	36	3	49	2	18	8	28	1,206	2,407	880	4,493
	Valencia	6,317	14,924	6,016	27,256	312	536	123	972	18,471	22,236	4,784	45,492	1,017	1,434	259	2,710	160	269	72	501	26,278	39,399	11,254	76,931
Both Sexes Total		200,233	452,585	186,166	838,980	18,083	22,620	4,201	44,913	415,130	478,920	98,213	992,265	76,597	92,432	16,094	185,121	10,411	20,115	3,345	33,877	720,460	1,066,674	308,023	2,095,156

* 2013 population is reported here because 2012 was the mid-point year for the 2011-2015 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 2

Substance Abuse and Mental Health by State Regions, Age 12+, 2012-2014

National Survey on Drug Use and Health (NSDUH)

Appendix 2A. Substance Abuse and Mental Health by Region, Age 12+, 2012-2014 (NSDUH)

	Health Region					
INDICATORS[+]	**NW**	**NE**	**Bernalillo County**	**SE**	**SW**	**New Mexico**
ALCOHOL						
Past Month Alcohol Use	45.68% (41.34% - 50.08%)	49.23% (43.25% - 55.24%)	56.38% (52.27% - 60.40%)	47.19% (42.02% - 52.42%)	43.62% (38.62% - 48.75%)	49.46% (46.96% - 51.96%)
Past Month Binge Alcohol Use[1]	23.19% (19.94% - 26.78%)	22.60% (18.76% - 26.96%)	25.82% (22.56% - 29.38%)	25.06% (21.41% - 29.11%)	22.49% (19.16% - 26.22%)	24.06% (21.93% - 26.32%)
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week	45.70% (41.72% - 49.73%)	46.87% (42.13% - 51.66%)	44.19% (40.52% - 47.93%)	43.66% (39.43% - 47.98%)	45.70% (41.59% - 49.86%)	45.70% (41.59% - 49.86%)
ILLICIT DRUGS						
Past Month Illicit Drug Use[2]	11.27% (8.90% - 14.16%)	10.48% (7.95% - 13.70%)	13.76% (11.25% - 16.73%)	9.20% (7.10% - 11.84%)	9.18% (7.23% - 11.59%)	11.29% (9.86% - 12.91%)
Past Year Marijuana Use	14.68% (11.83% - 18.07%)	14.08% (11.01% - 17.83%)	18.02% (15.21% - 21.22%)	12.98% (10.37% - 16.13%)	13.24% (10.66% - 16.32%)	15.18% (13.43% - 17.12%)
Past Month Marijuana Use	8.99% (6.82% - 11.76%)	8.76% (6.44% - 11.81%)	12.00% (9.65% - 14.83%)	7.72% (5.72% - 10.35%)	8.15% (6.16% - 10.70%)	9.61% (8.21% - 11.23%)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	3.51% (2.48% - 4.94%)	3.52% (2.36% - 5.22%)	3.79% (2.72% - 5.26%)	3.67% (2.56% - 5.24%)	3.29% (2.32% - 4.64%)	3.58% (2.81% - 4.55%)
Past Year Cocaine Use	1.79% (1.08% - 2.97%)	1.77% (1.04% - 3.00%)	2.85% (1.93% - 4.19%)	1.67% (1.01% - 2.76%)	2.21% (1.42% - 3.43%)	2.20% (1.63% - 2.96%)
Past Year Nonmedical Pain Reliever Use	4.44% (3.39% - 5.81%)	4.37% (3.23% - 5.89%)	5.07% (3.91% - 6.54%)	4.99% (3.83% - 6.49%)	5.12% (3.92% - 6.66%)	4.84% (3.98% - 5.87%)
Perception of Great Risk of Smoking Marijuana Once a Month	26.45% (22.79% - 30.46%)	30.41% (25.78% - 35.48%)	24.00% (20.60% - 27.77%)	30.55% (26.32% - 35.12%)	29.63% (25.76% - 33.82%)	27.36% (25.01% - 29.85%)
Average Annual Marijuana Initiation Rate[4]	2.26% (1.80% - 2.84%)	2.05% (1.59% - 2.64%)	2.23% (1.80% - 2.76%)	2.04% (1.62% - 2.58%)	1.91% (1.54% - 2.37%)	2.12% (1.85% - 2.43%)
TOBACCO						
Past Month Tobacco Product Use[5]	27.25% (23.68% - 31.13%)	22.85% (19.02% - 27.18%)	27.15% (23.88% - 30.68%)	30.61% (26.77% - 34.73%)	27.20% (23.51% - 31.24%)	26.99% (24.80% - 29.30%)
Past Month Cigarette Use	23.02% (19.59% - 26.84%)	18.86% (15.66% - 22.54%)	22.10% (19.07% - 25.46%)	26.11% (22.51% - 30.07%)	22.90% (19.65% - 26.50%)	22.48% (20.44% - 24.66%)
Perceptions of Great Risk from Smoking One or More Packs of Cigarettes per Day	67.68% (63.79% - 71.35%)	76.07% (72.20% - 79.54%)	73.54% (70.27% - 76.57%)	68.74% (64.84% - 72.39%)	71.25% (67.60% - 74.64%)	71.64% (69.48% - 73.69%)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT						
Illicit Drug Dependence[6]	1.84% (1.32% - 2.55%)	1.67% (1.18% - 2.36%)	2.02% (1.49% - 2.75%)	1.86% (1.33% - 2.59%)	2.06% (1.47% - 2.87%)	1.92% (1.53% - 2.40%)
Illicit Drug Dependence or Abuse	2.86% (2.12% - 3.84%)	2.48% (1.79% - 3.43%)	3.30% (2.49% - 4.38%)	2.89% (2.13% - 3.90%)	3.22% (2.40% - 4.31%)	3.02% (2.47% - 3.71%)
Alcohol Dependence[7]	3.32% (2.40% - 4.58%)	2.99% (2.06% - 4.34%)	3.87% (2.85% - 5.21%)	2.99% (2.09% - 4.26%)	3.61% (2.61% - 4.98%)	3.47% (2.83% - 4.24%)
Alcohol Dependence or Abuse	6.59% (5.26% - 8.23%)	7.02% (5.43% - 9.02%)	7.97% (6.50% - 9.75%)	6.24% (4.97% - 7.81%)	7.05% (5.62% - 8.80%)	7.15% (6.17% - 8.27%)
Alcohol or Illicit Drug Dependence or Abuse	8.33% (6.85% - 10.09%)	8.78% (7.04% - 10.91%)	9.94% (8.28% - 11.89%)	8.33% (6.80% - 10.18%)	8.92% (7.33% - 10.83%)	9.04% (7.98% - 10.22%)
Needing But Not Receiving Treatment for Illicit Drug Use[8]	2.49% (1.85% - 3.35%)	2.05% (1.50% - 2.82%)	2.84% (2.10% - 3.83%)	2.51% (1.87% - 3.38%)	2.70% (2.00% - 3.64%)	2.58% (2.07% - 3.22%)
Needing But Not Receiving Treatment for Alcohol Use[9]	6.12% (4.82% - 7.73%)	6.68% (5.10% - 8.70%)	7.51% (6.04% - 9.30%)	6.41% (5.05% - 8.11%)	6.93% (5.48% - 8.73%)	6.85% (5.87% - 7.97%)
MENTAL HEALTH among persons aged 12 or older						
Any mental illness in past year[10]	19.63% (16.85% - 22.74%)	18.88% (15.90% - 22.27%)	20.24% (17.55% - 23.22%)	19.52% (16.73% - 22.64%)	18.80% (15.93% - 22.04%)	19.54% (17.60% - 21.65%)
Serious mental illness in past year[11]	4.06% (3.04% - 5.40%)	4.15% (3.02% - 5.68%)	4.17% (3.16% - 5.49%)	4.43% (3.30% - 5.91%)	4.43% (3.27% - 5.96%)	4.23% (3.45% - 5.17%)
Had at least one major depressive episode in past year[12]	7.01% (5.51% - 8.88%)	6.90% (5.29% - 8.94%)	6.77% (5.38% - 8.49%)	6.79% (5.36% - 8.57%)	6.54% (5.14% - 8.30%)	6.80% (5.78% - 7.98%)
Had serious thoughts of suicide in past year	3.81% (2.90% - 5.01%)	3.61% (2.62% - 4.95%)	3.88% (2.98% - 5.04%)	3.70% (2.84% - 4.82%)	3.87% (2.93% - 5.09%)	3.80% (3.17% - 4.56%)

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

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Region, Age 12+, 2012-2014 (NSDUH)

INDICATORS[+]	AGE GROUP	Health Region					New Mexico
		NW	NE	Bernalillo County	SE	SW	
ALCOHOL							
Past Month Alcohol Use	Age 12-17	10.45% (8.26% - 13.13%)	10.35% (8.07% - 13.19%)	11.31% (9.02% - 14.08%)	11.76% (9.26% - 14.84%)	10.88% (8.56% - 13.74%)	10.97% (9.41% - 12.74%)
	Age 18-25	49.11% (43.24% - 55.01%)	* (* - *)	65.19% (60.28% - 69.79%)	56.63% (50.43% - 62.63%)	53.82% (47.93% - 59.60%)	57.00% (53.88% - 60.07%)
	Age 26+	50.10% (44.78% - 55.41%)	* (* - *)	60.21% (55.16% - 65.05%)	50.52% (44.09% - 56.94%)	45.94% (39.74% - 52.27%)	53.06% (49.90% - 56.19%)
	Age 18+	49.95% (45.12% - 54.79%)	52.91% (46.36% - 59.36%)	60.94% (56.41% - 65.28%)	51.50% (45.73% - 57.24%)	47.23% (41.68% - 52.84%)	53.64% (50.87% - 56.39%)
Past Month Binge Alcohol Use[1]	Age 12-17	6.28% (4.58% - 8.54%)	6.38% (4.65% - 8.68%)	6.29% (4.67% - 8.43%)	7.46% (5.50% - 10.04%)	6.46% (4.80% - 8.64%)	6.49% (5.34% - 7.88%)
	Age 18-25	36.23% (30.57% - 42.30%)	* (* - *)	42.63% (37.60% - 47.81%)	38.66% (32.70% - 44.98%)	34.63% (29.00% - 40.72%)	37.97% (34.86% - 41.19%)
	Age 26+	23.32% (19.48% - 27.67%)	22.88% (18.49% - 27.96%)	25.26% (21.37% - 29.59%)	25.01% (20.66% - 29.93%)	22.24% (18.32% - 26.71%)	23.89% (21.29% - 26.70%)
	Age 18+	25.24% (21.64% - 29.22%)	24.13% (19.95% - 28.86%)	27.80% (24.23% - 31.68%)	27.20% (23.14% - 31.69%)	24.26% (20.59% - 28.35%)	25.97% (23.61% - 28.47%)
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week	Age 12-17	39.74% (34.77% - 44.93%)	41.42% (36.02% - 47.04%)	39.18% (34.62% - 43.94%)	36.80% (32.06% - 41.82%)	38.19% (33.46% - 43.16%)	39.07% (35.97% - 42.25%)
	Age 18-25	41.55% (35.91% - 47.42%)	42.19% (35.98% - 48.65%)	39.03% (34.31% - 43.96%)	36.56% (31.13% - 42.36%)	38.37% (33.02% - 44.03%)	39.44% (36.36% - 42.61%)
	Age 26+	47.27% (42.44% - 52.16%)	48.08% (42.53% - 53.68%)	45.68% (41.22% - 50.21%)	46.01% (40.85% - 51.27%)	48.12% (43.13% - 53.14%)	46.88% (43.78% - 50.01%)
	Age 18+	46.42% (42.06% - 50.83%)	47.38% (42.31% - 52.51%)	44.70% (40.74% - 48.73%)	44.49% (39.85% - 49.23%)	46.53% (42.08% - 51.02%)	45.78% (43.03% - 48.55%)
ILLICIT DRUGS							
Past Month Illicit Drug Use[2]	Age 12-17	11.07% (8.40% - 14.46%)	11.91% (9.13% - 15.39%)	12.16% (9.56% - 15.35%)	11.22% (8.59% - 14.54%)	10.32% (7.87% - 13.41%)	11.38% (9.60% - 13.44%)
	Age 18-25	22.38% (17.53% - 28.11%)	* (* - *)	27.80% (23.31% - 32.78%)	18.25% (14.03% - 23.39%)	18.19% (13.88% - 23.47%)	22.86% (20.17% - 25.80%)
	Age 26+	9.36% (6.82% - 12.71%)	8.53% (5.95% - 12.07%)	11.54% (8.76% - 15.07%)	7.18% (5.02% - 10.16%)	7.27% (5.26% - 9.97%)	9.28% (7.66% - 11.20%)
	Age 18+	11.29% (8.77% - 14.43%)	10.35% (7.70% - 13.76%)	13.92% (11.24% - 17.12%)	8.96% (6.76% - 11.77%)	9.05% (7.00% - 11.63%)	11.29% (9.75% - 13.03%)
Past Year Marijuana Use	Age 12-17	16.64% (13.00% - 21.06%)	17.42% (13.56% - 22.10%)	17.52% (14.23% - 21.39%)	16.89% (13.30% - 21.20%)	16.07% (12.61% - 20.25%)	16.93% (14.70% - 19.42%)
	Age 18-25	29.60% (24.41% - 35.38%)	32.66% (26.66% - 39.29%)	38.29% (33.33% - 43.50%)	27.58% (22.43% - 33.39%)	27.00% (22.09% - 32.56%)	31.94% (28.97% - 35.06%)
	Age 26+	11.80% (8.76% - 15.71%)	11.25% (8.10% - 15.42%)	14.60% (11.47% - 18.41%)	9.62% (6.94% - 13.18%)	10.18% (7.51% - 13.66%)	12.06% (10.06% - 14.38%)
	Age 18+	14.44% (11.45% - 18.05%)	13.76% (10.59% - 17.69%)	18.07% (15.09% - 21.49%)	12.51% (9.80% - 15.82%)	12.93% (10.25% - 16.18%)	14.99% (13.13% - 17.07%)
Past Month Marijuana Use	Age 12-17	8.42% (6.25% - 11.27%)	8.56% (6.33% - 11.47%)	9.45% (7.27% - 12.19%)	7.74% (5.63% - 10.54%)	7.71% (5.66% - 10.43%)	8.52% (7.03% - 10.28%)
	Age 18-25	18.38% (14.10% - 23.59%)	* (* - *)	25.26% (20.85% - 30.25%)	14.92% (11.08% - 19.79%)	16.78% (12.76% - 21.74%)	20.07% (17.52% - 22.89%)
	Age 26+	7.44% (5.12% - 10.68%)	7.19% (4.78% - 10.68%)	10.03% (7.44% - 13.39%)	6.35% (4.24% - 9.40%)	6.52% (4.44% - 9.47%)	7.94% (6.37% - 9.86%)
	Age 18+	9.06% (6.75% - 12.07%)	8.78% (6.34% - 12.04%)	12.26% (9.75% - 15.31%)	7.72% (5.61% - 10.55%)	8.19% (6.11% - 10.91%)	9.73% (8.23% - 11.47%)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	Age 12-17	3.81% (2.58% - 5.58%)	4.27% (2.83% - 6.40%)	4.05% (2.79% - 5.85%)	4.45% (3.01% - 6.54%)	3.72% (2.51% - 5.50%)	4.01% (3.04% - 5.29%)
	Age 18-25	6.02% (4.07% - 8.82%)	5.98% (3.91% - 9.06%)	6.26% (4.43% - 8.77%)	6.26% (4.21% - 9.21%)	5.40% (3.63% - 7.98%)	5.99% (4.71% - 7.60%)
	Age 26+	3.03% (1.95% - 4.68%)	3.11% (1.91% - 5.04%)	3.34% (2.17% - 5.10%)	3.07% (1.91% - 4.89%)	2.82% (1.79% - 4.40%)	3.11% (2.26% - 4.25%)
	Age 18+	3.47% (2.39% - 5.02%)	3.45% (2.25% - 5.26%)	3.76% (2.64% - 5.35%)	3.58% (2.42% - 5.26%)	3.24% (2.22% - 4.70%)	3.53% (2.73% - 4.56%)
Past Year Cocaine Use	Age 12-17	0.76% (0.40% - 1.45%)	0.90% (0.48% - 1.71%)	1.01% (0.55% - 1.84%)	0.85% (0.44% - 1.61%)	1.01% (0.55% - 1.84%)	0.92% (0.57% - 1.47%)
	Age 18-25	3.57% (2.11% - 5.98%)	5.36% (3.22% - 8.79%)	8.04% (5.55% - 11.51%)	4.20% (2.54% - 6.86%)	5.56% (3.50% - 8.73%)	5.75% (4.40% - 7.49%)
	Age 26+	1.63% (0.86% - 3.06%)	1.39% (0.68% - 2.79%)	2.18% (1.24% - 3.80%)	1.31% (0.66% - 2.58%)	1.71% (0.92% - 3.17%)	1.75% (1.14% - 2.68%)
	Age 18+	1.92% (1.14% - 3.22%)	1.85% (1.07% - 3.19%)	3.04% (2.04% - 4.50%)	1.78% (1.06% - 2.97%)	2.34% (1.48% - 3.68%)	2.34% (1.73% - 3.17%)

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

* Low precision; no estimate reported

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Region, Age 12+, 2012-2014 (NSDUH)

		Health Region					
INDICATORS[+]	**AGE GROUP**	**NW**	**NE**	**Bernalillo County**	**SE**	**SW**	**New Mexico**
ILLICIT DRUGS							
Past Year Nonmedical Pain Reliever Use	Age 12-17	5.59% (3.98% - 7.79%)	6.55% (4.64% - 9.17%)	5.98% (4.33% - 8.22%)	6.32% (4.55% - 8.72%)	6.16% (4.45% - 8.45%)	6.05% (4.82% - 7.56%)
	Age 18-25	8.68% (6.41% - 11.65%)	7.81% (5.66% - 10.69%)	8.81% (6.69% - 11.51%)	8.65% (6.46% - 11.49%)	8.47% (6.35% - 11.22%)	8.57% (7.05% - 10.38%)
	Age 26+	3.54% (2.43% - 5.13%)	3.68% (2.47% - 5.45%)	4.32% (3.06% - 6.06%)	4.10% (2.83% - 5.91%)	4.33% (3.02% - 6.18%)	4.04% (3.11% - 5.23%)
	Age 18+	4.30% (3.18% - 5.80%)	4.16% (2.96% - 5.82%)	4.97% (3.75% - 6.57%)	4.83% (3.59% - 6.48%)	5.01% (3.73% - 6.69%)	4.71% (3.81% - 5.81%)
Perception of Great Risk of Smoking Marijuana Once a Month	Age 12-17	20.36% (16.58% - 24.74%)	23.74% (19.35% - 28.78%)	20.82% (17.24% - 24.92%)	25.22% (20.91% - 30.08%)	22.97% (18.95% - 27.55%)	22.12% (19.68% - 24.77%)
	Age 18-25	16.18% (12.60% - 20.55%)	17.44% (13.33% - 22.47%)	11.10% (8.55% - 14.30%)	19.13% (14.95% - 24.16%)	17.47% (13.65% - 22.10%)	15.36% (13.30% - 17.67%)
	Age 26+	29.13% (24.73% - 33.96%)	32.87% (27.50% - 38.73%)	26.62% (22.51% - 31.19%)	33.54% (28.38% - 39.12%)	32.91% (28.13% - 38.07%)	30.14% (27.20% - 33.25%)
	Age 18+	27.18% (23.27% - 31.49%)	31.04% (26.14% - 36.40%)	24.33% (20.70% - 28.35%)	31.19% (26.66% - 36.12%)	30.36% (26.22% - 34.85%)	27.93% (25.37% - 30.64%)
Average Annual Marijuana Initiation Rate[4]	Age 12-17	6.95% (5.15% - 9.31%)	8.78% (6.54% - 11.68%)	6.84% (5.20% - 8.93%)	7.63% (5.75% - 10.05%)	6.96% (5.26% - 9.17%)	7.24% (6.18% - 8.46%)
	Age 18-25	6.82% (4.61% - 9.97%)	7.12% (4.69% - 10.65%)	8.25% (5.92% - 11.40%)	5.47% (3.66% - 8.10%)	5.77% (3.94% - 8.37%)	6.82% (5.53% - 8.38%)
	Age 26+	0.40% (0.24% - 0.65%)	* (* - *)	0.39% (0.24% - 0.62%)	* (* - *)	0.26% (0.15% - 0.43%)	0.33% (0.22% - 0.50%)
	Age 18+	1.31% (0.97% - 1.76%)	1.01% (0.73% - 1.40%)	1.39% (1.06% - 1.83%)	1.02% (0.74% - 1.40%)	1.07% (0.79% - 1.44%)	1.20% (0.99% - 1.46%)
TOBACCO							
Past Month Tobacco Product Use[5]	Age 12-17	10.01% (7.36% - 13.47%)	8.84% (6.26% - 12.34%)	8.57% (6.41% - 11.36%)	10.49% (7.75% - 14.07%)	9.03% (6.56% - 12.30%)	9.29% (7.71% - 11.16%)
	Age 18-25	39.42% (33.77% - 45.37%)	38.15% (31.95% - 44.76%)	40.61% (35.65% - 45.77%)	45.17% (39.32% - 51.16%)	39.84% (34.33% - 45.63%)	40.53% (37.25% - 43.89%)
	Age 26+	27.58% (23.32% - 32.29%)	22.30% (17.96% - 27.34%)	27.04% (23.10% - 31.38%)	30.74% (26.05% - 35.86%)	27.14% (22.69% - 32.11%)	26.90% (24.23% - 29.75%)
	Age 18+	29.34% (25.43% - 33.57%)	24.17% (20.08% - 28.79%)	29.03% (25.49% - 32.84%)	33.06% (28.86% - 37.54%)	29.21% (25.18% - 33.59%)	28.91% (26.51% - 31.44%)
Past Month Cigarette Use	Age 12-17	7.02% (5.11% - 9.57%)	6.08% (4.30% - 8.52%)	6.67% (4.89% - 9.03%)	7.70% (5.68% - 10.35%)	6.38% (4.67% - 8.66%)	6.76% (5.47% - 8.33%)
	Age 18-25	33.84% (28.13% - 40.06%)	N/A	35.00% (29.93% - 40.43%)	37.11% (31.11% - 43.53%)	32.13% (26.46% - 38.39%)	34.37% (31.11% - 37.79%)
	Age 26+	23.41% (19.30% - 28.10%)	18.12% (14.50% - 22.42%)	21.72% (18.04% - 25.92%)	26.69% (22.27% - 31.63%)	23.28% (19.33% - 27.76%)	22.43% (19.93% - 25.14%)
	Age 18+	24.96% (21.17% - 29.17%)	20.06% (16.61% - 24.03%)	23.66% (20.36% - 27.31%)	28.36% (24.37% - 32.71%)	24.72% (21.16% - 28.66%)	24.19% (21.96% - 26.57%)
Perceptions of Great Risk from Smoking One or More Packs of Cigarettes per Day	Age 12-17	59.99% (54.70% - 65.05%)	64.52% (59.21% - 69.50%)	63.62% (58.88% - 68.10%)	58.89% (53.48% - 64.09%)	61.43% (56.24% - 66.37%)	61.81% (58.58% - 64.93%)
	Age 18-25	60.95% (55.46% - 66.17%)	69.30% (63.57% - 74.49%)	66.21% (61.55% - 70.58%)	64.22% (58.97% - 69.15%)	66.99% (61.75% - 71.83%)	65.38% (62.33% - 68.32%)
	Age 26+	69.95% (65.13% - 74.37%)	78.19% (73.60% - 82.17%)	75.97% (71.95% - 79.57%)	71.03% (66.10% - 75.51%)	73.37% (68.84% - 77.47%)	73.97% (71.34% - 76.43%)
	Age 18+	68.61% (64.28% - 72.64%)	77.15% (72.95% - 80.87%)	74.54% (70.98% - 77.79%)	69.93% (65.60% - 73.94%)	72.33% (68.32% - 76.01%)	72.70% (70.38% - 74.91%)

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

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Region, Age 12+, 2012-2014 (NSDUH)

		Health Region					
INDICATORS[+]	**AGE GROUP**	**NW**	**NE**	**Bernalillo County**	**SE**	**SW**	**New Mexico**
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT							
Illicit Drug Dependence[6]	Age 12-17	1.84% (1.20% - 2.82%)	2.06% (1.32% - 3.21%)	2.13% (1.40% - 3.22%)	2.11% (1.40% - 3.18%)	2.06% (1.31% - 3.24%)	2.04% (1.49% - 2.78%)
	Age 18-25	4.63% (3.07% - 6.91%)	4.45% (2.85% - 6.88%)	4.54% (3.13% - 6.55%)	4.58% (3.02% - 6.89%)	4.72% (3.09% - 7.17%)	4.59% (3.45% - 6.10%)
	Age 26+	1.35% (0.85% - 2.14%)	1.26% (0.78% - 2.03%)	1.58% (1.03% - 2.42%)	1.30% (0.80% - 2.09%)	1.53% (0.97% - 2.42%)	1.44% (1.05% - 1.96%)
	Age 18+	1.84% (1.28% - 2.63%)	1.63% (1.11% - 2.39%)	2.01% (1.44% - 2.81%)	1.82% (1.26% - 2.64%)	2.05% (1.43% - 2.95%)	1.91% (1.50% - 2.42%)
Illicit Drug Dependence or Abuse	Age 12-17	3.86% (2.68% - 5.53%)	4.04% (2.77% - 5.87%)	4.32% (3.06% - 6.07%)	4.41% (3.05% - 6.33%)	4.50% (3.13% - 6.42%)	4.23% (3.27% - 5.45%)
	Age 18-25	6.96% (4.92% - 9.77%)	6.42% (4.46% - 9.15%)	7.15% (5.23% - 9.70%)	6.00% (4.21% - 8.50%)	6.67% (4.72% - 9.34%)	6.77% (5.42% - 8.41%)
	Age 26+	2.00% (1.30% - 3.08%)	1.79% (1.12% - 2.84%)	2.52% (1.68% - 3.78%)	2.07% (1.32% - 3.25%)	2.38% (1.54% - 3.67%)	2.22% (1.65% - 3.00%)
	Age 18+	2.74% (1.96% - 3.82%)	2.33% (1.61% - 3.36%)	3.20% (2.34% - 4.37%)	2.70% (1.91% - 3.82%)	3.08% (2.21% - 4.27%)	2.89% (2.31% - 3.63%)
Alcohol Dependence[7]	Age 12-17	1.12% (0.70% - 1.80%)	1.24% (0.77% - 1.99%)	1.26% (0.80% - 1.98%)	1.16% (0.72% - 1.88%)	1.39% (0.88% - 2.21%)	1.24% (0.90% - 1.71%)
	Age 18-25	5.88% (4.04% - 8.49%)	5.39% (3.61% - 7.97%)	6.94% (5.01% - 9.55%)	5.35% (3.58% - 7.94%)	6.18% (4.34% - 8.72%)	6.16% (4.87% - 7.76%)
	Age 26+	3.19% (2.18% - 4.63%)	2.86% (1.86% - 4.38%)	3.65% (2.53% - 5.23%)	2.80% (1.83% - 4.27%)	3.40% (2.30% - 5.02%)	3.28% (2.56% - 4.20%)
	Age 18+	3.59% (2.57% - 4.98%)	3.16% (2.15% - 4.62%)	4.13% (3.03% - 5.60%)	3.21% (2.22% - 4.62%)	3.86% (2.77% - 5.35%)	3.71% (3.01% - 4.56%)
Alcohol Dependence or Abuse	Age 12-17	3.00% (2.06% - 4.36%)	3.56% (2.44% - 5.18%)	3.29% (2.31% - 4.68%)	3.30% (2.29% - 4.73%)	3.76% (2.60% - 5.42%)	3.36% (2.60% - 4.32%)
	Age 18-25	12.34% (9.36% - 16.11%)	13.34% (9.85% - 17.81%)	15.56% (12.32% - 19.47%)	12.20% (9.22% - 15.98%)	13.42% (10.17% - 17.52%)	13.72% (11.70% - 16.03%)
	Age 26+	6.10% (4.64% - 7.99%)	6.54% (4.83% - 8.81%)	7.23% (5.59% - 9.29%)	5.53% (4.16% - 7.30%)	6.24% (4.73% - 8.18%)	6.49% (5.39% - 7.81%)
	Age 18+	7.03% (5.58% - 8.82%)	7.34% (5.64% - 9.50%)	8.45% (6.85% - 10.37%)	6.60% (5.21% - 8.32%)	7.41% (5.87% - 9.31%)	7.56% (6.50% - 8.78%)
Alcohol or Illicit Drug Dependence or Abuse	Age 12-17	5.60% (4.08% - 7.63%)	6.22% (4.51% - 8.52%)	5.99% (4.44% - 8.04%)	6.18% (4.51% - 8.41%)	6.90% (5.11% - 9.27%)	6.14% (4.97% - 7.56%)
	Age 18-25	17.24% (13.52% - 21.71%)	16.12% (12.21% - 20.98%)	19.54% (15.79% - 23.93%)	15.58% (12.03% - 19.95%)	15.37% (11.90% - 19.61%)	17.23% (14.96% - 19.75%)
	Age 26+	7.17% (5.56% - 9.20%)	8.08% (6.19% - 10.49%)	8.76% (6.95% - 10.99%)	7.26% (5.61% - 9.35%)	7.93% (6.20% - 10.10%)	7.99% (6.78% - 9.38%)
	Age 18+	8.66% (7.08% - 10.56%)	9.03% (7.17% - 11.30%)	10.34% (8.56% - 12.44%)	8.60% (6.95% - 10.59%)	9.15% (7.45% - 11.18%)	9.35% (8.22% - 10.62%)
Needing But Not Receiving Treatment for Illicit Drug Use[8]	Age 12-17	3.56% (2.43% - 5.17%)	3.88% (2.69% - 5.58%)	3.99% (2.78% - 5.69%)	4.14% (2.86% - 5.96%)	4.19% (2.88% - 6.06%)	3.94% (2.99% - 5.16%)
	Age 18-25	6.29% (4.43% - 8.86%)	5.55% (3.81% - 8.02%)	6.48% (4.66% - 8.95%)	5.72% (4.05% - 8.02%)	5.85% (4.12% - 8.23%)	6.09% (4.85% - 7.63%)
	Age 26+	1.68% (1.07% - 2.62%)	1.40% (0.88% - 2.21%)	2.08% (1.33% - 3.22%)	1.66% (1.04% - 2.65%)	1.89% (1.19% - 2.98%)	1.80% (1.29% - 2.53%)
	Age 18+	2.36% (1.70% - 3.27%)	1.88% (1.32% - 2.68%)	2.72% (1.95% - 3.77%)	2.32% (1.66% - 3.23%)	2.54% (1.82% - 3.53%)	2.44% (1.91% - 3.10%)
Needing But Not Receiving Treatment for Alcohol Use[9]	Age 12-17	2.83% (1.96% - 4.08%)	3.44% (2.28% - 5.16%)	3.12% (2.13% - 4.55%)	3.14% (2.14% - 4.57%)	3.64% (2.50% - 5.27%)	3.20% (2.44% - 4.19%)
	Age 18-25	11.68% (8.74% - 15.44%)	12.74% (9.44% - 16.97%)	15.00% (11.90% - 18.73%)	12.25% (9.16% - 16.19%)	12.52% (9.38% - 16.52%)	13.14% (11.21% - 15.34%)
	Age 26+	5.62% (4.21% - 7.46%)	6.22% (4.53% - 8.47%)	6.74% (5.12% - 8.82%)	5.77% (4.28% - 7.73%)	6.27% (4.70% - 8.32%)	6.22% (5.11% - 7.55%)
	Age 18+	6.52% (5.10% - 8.29%)	6.99% (5.30% - 9.16%)	7.95% (6.36% - 9.89%)	6.81% (5.32% - 8.67%)	7.29% (5.72% - 9.26%)	7.24% (6.19% - 8.46%)

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

* Low precision; no estimate reported

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 2B. Substance Abuse and Mental Health by Region, Age 12+, 2012-2014 (NSDUH)

		Health Region					
INDICATORS[+]	**AGE GROUP**	**NW**	**NE**	**Bernalillo County**	**SE**	**SW**	**New Mexico**
MENTAL HEALTH							
Any mental illness in past year[10]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	20.78% (17.40% - 24.61%)	19.34% (15.84% - 23.39%)	21.51% (18.26% - 25.16%)	19.60% (16.31% - 23.36%)	18.65% (15.43% - 22.36%)	20.23% (17.86% - 22.82%)
	Age 26+	19.43% (16.44% - 22.82%)	18.81% (15.65% - 22.45%)	20.02% (17.09% - 23.32%)	19.50% (16.48% - 22.93%)	18.83% (15.72% - 22.39%)	19.42% (17.28% - 21.77%)
	Age 18+	19.63% (16.85% - 22.74%)	18.88% (15.90% - 22.27%)	20.24% (17.55% - 23.22%)	19.52% (16.73% - 22.64%)	18.80% (15.93% - 22.04%)	19.54% (17.60% - 21.65%)
Serious mental illness in past year[11]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	4.61% (3.31% - 6.39%)	4.09% (2.88% - 5.80%)	4.79% (3.51% - 6.50%)	4.37% (3.12% - 6.09%)	4.15% (2.93% - 5.85%)	4.48% (3.57% - 5.60%)
	Age 26+	3.96% (2.83% - 5.53%)	4.15% (2.91% - 5.90%)	4.06% (2.94% - 5.59%)	4.44% (3.17% - 6.17%)	4.48% (3.16% - 6.31%)	4.18% (3.31% - 5.27%)
	Age 18+	4.06% (3.04% - 5.40%)	4.15% (3.02% - 5.68%)	4.17% (3.16% - 5.49%)	4.43% (3.30% - 5.91%)	4.43% (3.27% - 5.96%)	4.23% (3.45% - 5.17%)
Had at least one major depressive episode in past year[12]	Age 12-17	10.16% (7.82% - 13.10%)	10.80% (8.23% - 14.04%)	10.44% (8.17% - 13.25%)	11.39% (8.82% - 14.59%)	10.98% (8.45% - 14.15%)	10.66% (9.04% - 12.53%)
	Age 18-25	9.69% (7.42% - 12.56%)	8.82% (6.66% - 11.59%)	9.55% (7.48% - 12.11%)	8.97% (6.82% - 11.71%)	8.66% (6.56% - 11.34%)	9.22% (7.70% - 11.00%)
	Age 26+	6.55% (4.91% - 8.67%)	6.64% (4.91% - 8.92%)	6.30% (4.78% - 8.26%)	6.38% (4.81% - 8.42%)	6.13% (4.59% - 8.15%)	6.38% (5.27% - 7.70%)
	Age 18+	7.01% (5.51% - 8.88%)	6.90% (5.29% - 8.94%)	6.77% (5.38% - 8.49%)	6.79% (5.36% - 8.57%)	6.54% (5.14% - 8.30%)	6.80% (5.78% - 7.98%)
Had serious thoughts of suicide in past year	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	7.30% (5.57% - 9.51%)	6.97% (5.18% - 9.31%)	7.28% (5.61% - 9.40%)	7.04% (5.32% - 9.26%)	6.54% (4.91% - 8.66%)	7.05% (5.86% - 8.47%)
	Age 26+	3.21% (2.22% - 4.60%)	3.16% (2.12% - 4.69%)	3.30% (2.34% - 4.64%)	3.07% (2.15% - 4.36%)	3.35% (2.32% - 4.82%)	3.24% (2.54% - 4.12%)
	Age 18+	3.81% (2.90% - 5.01%)	3.61% (2.62% - 4.95%)	3.88% (2.98% - 5.04%)	3.70% (2.84% - 4.82%)	3.87% (2.93% - 5.09%)	3.80% (3.17% - 4.56%)

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

* Low precision; no estimate reported

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3

Substance Abuse and Mental Health by National Regions, Age 12+, 2012-2014

National Survey on Drug Use and Health (NSDUH)

Appendix 3A. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2014 (NSDUH)

INDICATORS[+]	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
ALCOHOL						
Past Month Alcohol Use	52.32% (51.88% - 52.76%)	57.75% (56.93% - 58.55%)	55.24% (54.58% - 55.89%)	48.57% (47.96% - 49.18%)	51.41% (50.58% - 52.24%)	49.46% (46.96% - 51.96%)
Past Month Binge Alcohol Use[1]	22.94% (22.61% - 23.28%)	24.14% (23.45% - 24.83%)	25.57% (24.99% - 26.15%)	21.47% (20.98% - 21.96%)	21.96% (21.31% - 22.62%)	24.06% (21.93% - 26.32%)
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week	41.31% (40.91% - 41.70%)	39.66% (38.85% - 40.49%)	37.16% (36.50% - 37.83%)	43.41% (42.79% - 44.03%)	43.03% (42.21% - 43.86%)	45.12% (42.59% - 47.68%)
ILLICIT DRUGS						
Past Month Illicit Drug Use[2]	9.58% (9.36% - 9.79%)	10.08% (9.64% - 10.54%)	8.99% (8.64% - 9.34%)	8.29% (7.98% - 8.62%)	11.77% (11.25% - 12.30%)	11.29% (9.86% - 12.91%)
Past Year Marijuana Use	12.65% (12.40% - 12.89%)	13.74% (13.21% - 14.29%)	12.21% (11.78% - 12.65%)	10.90% (10.51% - 11.30%)	14.98% (14.43% - 15.54%)	15.18% (13.43% - 17.12%)
Past Month Marijuana Use	7.73% (7.54% - 7.92%)	8.36% (7.95% - 8.79%)	7.28% (6.97% - 7.60%)	6.43% (6.15% - 6.73%)	9.70% (9.24% - 10.17%)	9.61% (8.21% - 11.23%)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	3.34% (3.21% - 3.46%)	3.15% (2.91% - 3.41%)	3.07% (2.89% - 3.27%)	3.25% (3.07% - 3.44%)	3.85% (3.57% - 4.15%)	3.58% (2.81% - 4.55%)
Past Year Cocaine Use	1.70% (1.62% - 1.79%)	1.99% (1.80% - 2.21%)	1.40% (1.28% - 1.54%)	1.53% (1.41% - 1.66%)	2.02% (1.82% - 2.24%)	2.20% (1.63% - 2.96%)
Past Year Nonmedical Pain Reliever Use	4.31% (4.17% - 4.45%)	3.82% (3.57% - 4.10%)	4.21% (4.00% - 4.43%)	4.30% (4.09% - 4.51%)	4.78% (4.48% - 5.10%)	4.84% (3.98% - 5.87%)
Perception of Great Risk of Smoking Marijuana Once a Month	28.50% (28.11% - 28.89%)	26.56% (25.77% - 27.38%)	26.11% (25.47% - 26.76%)	32.60% (31.97% - 33.23%)	25.64% (24.89% - 26.42%)	27.36% (25.01% - 29.85%)
Average Annual Marijuana Initiation Rate[4]	1.90% (1.85% - 1.96%)	2.00% (1.90% - 2.12%)	1.93% (1.84% - 2.03%)	1.68% (1.60% - 1.77%)	2.19% (2.07% - 2.32%)	2.12% (1.85% - 2.43%)
TOBACCO						
Past Month Tobacco Product Use[5]	25.81% (25.45% - 26.18%)	24.32% (23.63% - 25.03%)	28.98% (28.40% - 29.56%)	27.30% (26.76% - 27.85%)	21.69% (21.02% - 22.38%)	26.99% (24.80% - 29.30%)
Past Month Cigarette Use	21.40% (21.05% - 21.75%)	20.11% (19.47% - 20.76%)	24.08% (23.51% - 24.66%)	22.65% (22.13% - 23.17%)	17.96% (17.33% - 18.61%)	22.48% (20.44% - 24.66%)
Perceptions of Great Risk from Smoking One or More Packs of Cigarettes per Day	71.24% (70.89% - 71.58%)	73.40% (72.73% - 74.07%)	67.77% (67.16% - 68.37%)	70.69% (70.15% - 71.22%)	73.61% (72.92% - 74.29%)	71.64% (69.48% - 73.69%)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT						
Illicit Drug Dependence[6]	1.90% (1.81% - 1.99%)	2.07% (1.91% - 2.25%)	1.82% (1.70% - 1.95%)	1.81% (1.69% - 1.94%)	1.98% (1.82% - 2.16%)	1.92% (1.53% - 2.40%)
Illicit Drug Dependence or Abuse	2.70% (2.60% - 2.80%)	2.81% (2.61% - 3.02%)	2.58% (2.44% - 2.74%)	2.59% (2.45% - 2.74%)	2.89% (2.68% - 3.10%)	3.02% (2.47% - 3.71%)
Alcohol Dependence[7]	3.13% (3.02% - 3.26%)	3.12% (2.90% - 3.36%)	3.13% (2.94% - 3.32%)	2.97% (2.79% - 3.16%)	3.41% (3.16% - 3.68%)	3.47% (2.83% - 4.24%)
Alcohol Dependence or Abuse	6.60% (6.43% - 6.78%)	6.69% (6.35% - 7.04%)	6.76% (6.48% - 7.05%)	6.23% (5.97% - 6.50%)	6.98% (6.62% - 7.36%)	7.15% (6.17% - 8.27%)
Alcohol or Illicit Drug Dependence or Abuse	8.28% (8.09% - 8.48%)	8.39% (8.04% - 8.77%)	8.41% (8.11% - 8.72%)	7.90% (7.62% - 8.18%)	8.69% (8.32% - 9.09%)	9.04% (7.98% - 10.22%)
Needing But Not Receiving Treatment for Illicit Drug Use[8]	2.40% (2.31% - 2.50%)	2.46% (2.27% - 2.67%)	2.27% (2.13% - 2.42%)	2.33% (2.19% - 2.47%)	2.59% (2.39% - 2.80%)	2.58% (2.07% - 3.22%)
Needing But Not Receiving Treatment for Alcohol Use[9]	6.29% (6.12% - 6.46%)	6.28% (5.96% - 6.62%)	6.47% (6.21% - 6.75%)	6.02% (5.77% - 6.27%)	6.54% (6.21% - 6.89%)	6.85% (5.87% - 7.97%)
MENTAL HEALTH among persons aged 12 or older						
Any mental illness in past year[10]	18.39% (18.07% - 18.72%)	17.95% (17.28% - 18.64%)	18.54% (17.99% - 19.10%)	18.14% (17.60% - 18.69%)	19.00% (18.34% - 19.68%)	19.54% (17.60% - 21.65%)
Serious mental illness in past year[11]	4.13% (3.97% - 4.29%)	3.86% (3.55% - 4.20%)	4.32% (4.03% - 4.62%)	4.16% (3.90% - 4.45%)	4.09% (3.76% - 4.45%)	4.23% (3.45% - 5.17%)
Had at least one major depressive episode in past year[12]	6.71% (6.51% - 6.91%)	6.60% (6.22% - 6.99%)	6.83% (6.53% - 7.14%)	6.62% (6.32% - 6.93%)	6.81% (6.40% - 7.25%)	6.80% (5.78% - 7.98%)
Had serious thoughts of suicide in past year	3.91% (3.76% - 4.06%)	3.83% (3.56% - 4.11%)	4.04% (3.82% - 4.28%)	3.83% (3.61% - 4.05%)	3.99% (3.71% - 4.28%)	3.80% (3.17% - 4.56%)

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

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2014 (NSDUH)

INDICATORS[+]	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
ALCOHOL							
Past Month Alcohol Use	Age 12-17	12.00% (11.66% - 12.35%)	13.82% (13.10% - 14.56%)	11.88% (11.34% - 12.43%)	11.35% (10.89% - 11.83%)	11.86% (11.19% - 12.57%)	10.97% (9.41% - 12.74%)
	Age 18-25	59.80% (59.19% - 60.41%)	64.33% (63.23% - 65.42%)	63.42% (62.58% - 64.25%)	56.78% (56.03% - 57.54%)	57.91% (56.81% - 59.01%)	57.00% (53.88% - 60.07%)
	Age 26+	55.98% (55.45% - 56.52%)	61.63% (60.62% - 62.62%)	59.23% (58.42% - 60.05%)	51.79% (51.03% - 52.55%)	55.26% (54.21% - 56.30%)	53.06% (49.90% - 56.19%)
	Age 18+	56.54% (56.07% - 57.02%)	62.01% (61.12% - 62.89%)	59.84% (59.12% - 60.56%)	52.52% (51.85% - 53.19%)	55.66% (54.75% - 56.57%)	53.64% (50.87% - 56.39%)
Past Month Binge Alcohol Use[1]	Age 12-17	6.52% (6.27% - 6.78%)	7.40% (6.89% - 7.95%)	6.47% (6.07% - 6.89%)	6.15% (5.79% - 6.52%)	6.51% (6.03% - 7.02%)	6.49% (5.34% - 7.88%)
	Age 18-25	38.38% (37.76% - 39.00%)	42.25% (41.15% - 43.35%)	43.07% (42.16% - 43.98%)	35.03% (34.26% - 35.81%)	36.53% (35.47% - 37.61%)	37.97% (34.86% - 41.19%)
	Age 26+	22.31% (21.91% - 22.72%)	23.02% (22.20% - 23.87%)	24.96% (24.25% - 25.68%)	21.06% (20.46% - 21.67%)	21.33% (20.53% - 22.15%)	23.89% (21.29% - 26.70%)
	Age 18+	24.66% (24.30% - 25.03%)	25.76% (25.02% - 26.52%)	27.59% (26.96% - 28.24%)	23.09% (22.56% - 23.64%)	23.62% (22.91% - 24.35%)	25.97% (23.61% - 28.47%)
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week	Age 12-17	39.30% (38.78% - 39.82%)	38.23% (37.22% - 39.26%)	36.81% (35.97% - 37.66%)	41.48% (40.65% - 42.31%)	38.88% (37.85% - 39.92%)	39.07% (35.97% - 42.25%)
	Age 18-25	33.73% (33.21% - 34.26%)	31.19% (30.18% - 32.22%)	29.37% (28.57% - 30.19%)	36.83% (36.01% - 37.65%)	34.70% (33.61% - 35.80%)	39.44% (36.36% - 42.61%)
	Age 26+	42.86% (42.37% - 43.35%)	41.24% (40.22% - 42.27%)	38.54% (37.70% - 39.39%)	44.77% (43.98% - 45.57%)	45.05% (44.01% - 46.09%)	46.88% (43.78% - 50.01%)
	Age 18+	41.52% (41.09% - 41.95%)	39.80% (38.91% - 40.70%)	37.20% (36.47% - 37.93%)	43.61% (42.93% - 44.29%)	43.48% (42.58% - 44.38%)	45.78% (43.03% - 48.55%)
ILLICIT DRUGS							
Past Month Illicit Drug Use[2]	Age 12-17	9.25% (8.95% - 9.56%)	9.31% (8.74% - 9.92%)	8.64% (8.19% - 9.12%)	8.69% (8.27% - 9.13%)	10.64% (9.97% - 11.36%)	11.38% (9.60% - 13.44%)
	Age 18-25	21.62% (21.14% - 22.10%)	24.03% (23.12% - 24.96%)	21.11% (20.41% - 21.84%)	19.32% (18.68% - 19.96%)	23.82% (22.88% - 24.79%)	22.86% (20.17% - 25.80%)
	Age 26+	7.55% (7.31% - 7.80%)	7.85% (7.34% - 8.39%)	6.96% (6.56% - 7.38%)	6.36% (5.99% - 6.76%)	9.77% (9.15% - 10.42%)	9.28% (7.66% - 11.20%)
	Age 18+	9.61% (9.38% - 9.85%)	10.16% (9.68% - 10.65%)	9.02% (8.65% - 9.40%)	8.25% (7.91% - 8.61%)	11.89% (11.33% - 12.47%)	11.29% (9.75% - 13.03%)
Past Year Marijuana Use	Age 12-17	13.35% (13.00% - 13.70%)	14.01% (13.30% - 14.75%)	12.70% (12.15% - 13.28%)	12.24% (11.75% - 12.75%)	15.21% (14.43% - 16.01%)	16.93% (14.70% - 19.42%)
	Age 18-25	31.68% (31.09% - 32.26%)	35.36% (34.26% - 36.47%)	31.79% (30.96% - 32.63%)	28.69% (27.92% - 29.47%)	33.46% (32.39% - 34.55%)	31.94% (28.97% - 35.06%)
	Age 26+	9.30% (9.03% - 9.57%)	10.12% (9.50% - 10.78%)	8.81% (8.31% - 9.33%)	7.70% (7.25% - 8.17%)	11.66% (11.02% - 12.34%)	12.06% (10.06% - 14.38%)
	Age 18+	12.57% (12.31% - 12.84%)	13.72% (13.14% - 14.31%)	12.15% (11.69% - 12.63%)	10.76% (10.34% - 11.19%)	14.95% (14.36% - 15.57%)	14.99% (13.13% - 17.07%)
Past Month Marijuana Use	Age 12-17	7.22% (6.95% - 7.49%)	7.69% (7.18% - 8.24%)	6.77% (6.38% - 7.18%)	6.40% (6.02% - 6.80%)	8.58% (8.02% - 9.18%)	8.52% (7.03% - 10.28%)
	Age 18-25	19.13% (18.67% - 19.61%)	21.40% (20.52% - 22.31%)	18.86% (18.21% - 19.52%)	16.89% (16.30% - 17.49%)	21.16% (20.25% - 22.10%)	20.07% (17.52% - 22.89%)
	Age 26+	5.83% (5.62% - 6.05%)	6.27% (5.80% - 6.79%)	5.37% (5.01% - 5.75%)	4.66% (4.33% - 5.01%)	7.80% (7.26% - 8.38%)	7.94% (6.37% - 9.86%)
	Age 18+	7.78% (7.58% - 7.99%)	8.43% (7.99% - 8.89%)	7.33% (7.00% - 7.68%)	6.44% (6.14% - 6.75%)	9.82% (9.32% - 10.34%)	9.73% (8.23% - 11.47%)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	Age 12-17	3.43% (3.24% - 3.63%)	2.83% (2.51% - 3.18%)	3.13% (2.86% - 3.43%)	3.66% (3.37% - 3.98%)	3.74% (3.36% - 4.16%)	4.01% (3.04% - 5.29%)
	Age 18-25	6.73% (6.46% - 7.02%)	6.94% (6.41% - 7.50%)	6.73% (6.31% - 7.19%)	6.54% (6.15% - 6.94%)	6.88% (6.33% - 7.47%)	5.99% (4.71% - 7.60%)
	Age 26+	2.74% (2.59% - 2.90%)	2.56% (2.28% - 2.87%)	2.44% (2.23% - 2.68%)	2.64% (2.43% - 2.87%)	3.32% (2.99% - 3.69%)	3.11% (2.26% - 4.25%)
	Age 18+	3.33% (3.19% - 3.47%)	3.18% (2.93% - 3.46%)	3.07% (2.87% - 3.28%)	3.21% (3.02% - 3.41%)	3.86% (3.55% - 4.19%)	3.53% (2.73% - 4.56%)
Past Year Cocaine Use	Age 12-17	0.64% (0.56% - 0.74%)	0.59% (0.47% - 0.75%)	0.50% (0.40% - 0.62%)	0.60% (0.50% - 0.72%)	0.86% (0.68% - 1.09%)	0.92% (0.57% - 1.47%)
	Age 18-25	4.55% (4.30% - 4.81%)	5.20% (4.72% - 5.71%)	3.68% (3.36% - 4.02%)	3.90% (3.60% - 4.24%)	5.84% (5.29% - 6.44%)	5.75% (4.40% - 7.49%)
	Age 26+	1.34% (1.25% - 1.45%)	1.62% (1.39% - 1.88%)	1.13% (0.98% - 1.29%)	1.24% (1.10% - 1.40%)	1.49% (1.27% - 1.74%)	1.75% (1.14% - 2.68%)
	Age 18+	1.81% (1.72% - 1.91%)	2.13% (1.91% - 2.37%)	1.50% (1.36% - 1.65%)	1.63% (1.50% - 1.78%)	2.14% (1.93% - 2.38%)	2.34% (1.73% - 3.17%)

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

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2014 (NSDUH)

INDICATORS[+]	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
ILLICIT DRUGS							
Past Year Nonmedical Pain Reliever Use	Age 12-17	4.89% (4.67% - 5.12%)	4.01% (3.65% - 4.41%)	4.64% (4.32% - 4.99%)	5.09% (4.77% - 5.42%)	5.43% (4.97% - 5.92%)	6.05% (4.82% - 7.56%)
	Age 18-25	8.92% (8.61% - 9.24%)	8.40% (7.83% - 9.01%)	9.15% (8.68% - 9.65%)	8.99% (8.54% - 9.46%)	9.01% (8.41% - 9.64%)	8.57% (7.05% - 10.38%)
	Age 26+	3.44% (3.28% - 3.61%)	3.04% (2.75% - 3.36%)	3.31% (3.08% - 3.57%)	3.40% (3.16% - 3.65%)	3.94% (3.59% - 4.33%)	4.04% (3.11% - 5.23%)
	Age 18+	4.24% (4.09% - 4.40%)	3.81% (3.53% - 4.10%)	4.16% (3.94% - 4.40%)	4.21% (3.99% - 4.44%)	4.71% (4.39% - 5.05%)	4.71% (3.81% - 5.81%)
Perceptions of Great Risk of Smoking Marijuana Once a Month	Age 12-17	24.52% (24.06% - 24.98%)	23.13% (22.23% - 24.05%)	24.95% (24.21% - 25.71%)	27.22% (26.49% - 27.96%)	20.85% (19.99% - 21.74%)	22.12% (19.68% - 24.77%)
	Age 18-25	15.05% (14.65% - 15.46%)	12.48% (11.76% - 13.24%)	13.16% (12.62% - 13.72%)	17.85% (17.23% - 18.49%)	14.31% (13.52% - 15.12%)	15.36% (13.30% - 17.67%)
	Age 26+	31.32% (30.83% - 31.81%)	29.32% (28.33% - 30.32%)	28.49% (27.71% - 29.29%)	35.81% (35.03% - 36.59%)	28.30% (27.35% - 29.26%)	30.14% (27.20% - 33.25%)
	Age 18+	28.91% (28.49% - 29.34%)	26.90% (26.03% - 27.78%)	26.24% (25.54% - 26.94%)	33.17% (32.48% - 33.86%)	26.16% (25.33% - 27.01%)	27.93% (25.37% - 30.64%)
First Use of Marijuana[4]	Age 12-17	5.65% (5.48% - 5.84%)	5.90% (5.59% - 6.23%)	5.47% (5.22% - 5.73%)	5.28% (5.05% - 5.53%)	6.25% (5.89% - 6.64%)	7.24% (6.18% - 8.46%)
	Age 18-25	7.65% (7.35% - 7.96%)	8.49% (7.96% - 9.04%)	8.00% (7.57% - 8.45%)	6.75% (6.40% - 7.12%)	8.23% (7.68% - 8.81%)	6.82% (5.53% - 8.38%)
	Age 26+	0.23% (0.20% - 0.27%)	0.25% (0.19% - 0.33%)	0.22% (0.17% - 0.28%)	0.18% (0.14% - 0.25%)	0.31% (0.24% - 0.40%)	0.33% (0.22% - 0.50%)
	Age 18+	1.26% (1.21% - 1.32%)	1.37% (1.26% - 1.48%)	1.30% (1.21% - 1.40%)	1.09% (1.01% - 1.18%)	1.46% (1.34% - 1.59%)	1.20% (0.99% - 1.46%)
TOBACCO							
Past Month Tobacco Product Use[5]	Age 12-17	7.83% (7.55% - 8.11%)	7.53% (7.03% - 8.06%)	8.97% (8.52% - 9.43%)	8.09% (7.71% - 8.49%)	6.58% (6.11% - 7.08%)	9.29% (7.71% - 11.16%)
	Age 18-25	36.71% (36.13% - 37.29%)	35.66% (34.54% - 36.80%)	41.50% (40.48% - 42.52%)	37.81% (36.86% - 38.76%)	31.56% (30.40% - 32.75%)	40.53% (37.25% - 43.89%)
	Age 26+	26.15% (25.70% - 26.60%)	24.34% (23.47% - 25.23%)	29.33% (28.59% - 30.08%)	27.89% (27.19% - 28.61%)	21.85% (20.99% - 22.73%)	26.90% (24.23% - 29.75%)
	Age 18+	27.69% (27.29% - 28.10%)	25.95% (25.20% - 26.72%)	31.10% (30.47% - 31.74%)	29.34% (28.74% - 29.94%)	23.31% (22.58% - 24.07%)	28.91% (26.51% - 31.44%)
Past Month Cigarette Use	Age 12-17	5.68% (5.44% - 5.93%)	5.43% (5.02% - 5.87%)	6.70% (6.32% - 7.10%)	5.75% (5.41% - 6.10%)	4.84% (4.42% - 5.28%)	6.76% (5.47% - 8.33%)
	Age 18-25	30.26% (29.70% - 30.83%)	29.52% (28.44% - 30.63%)	33.54% (32.53% - 34.58%)	31.11% (30.20% - 32.04%)	26.61% (25.51% - 27.75%)	34.37% (31.11% - 37.79%)
	Age 26+	21.81% (21.39% - 22.24%)	20.20% (19.38% - 21.05%)	24.63% (23.88% - 25.38%)	23.30% (22.62% - 24.00%)	18.09% (17.28% - 18.93%)	22.43% (19.93% - 25.14%)
	Age 18+	23.05% (22.67% - 23.43%)	21.53% (20.84% - 22.24%)	25.92% (25.30% - 26.56%)	24.44% (23.88% - 25.01%)	19.37% (18.68% - 20.08%)	24.19% (21.96% - 26.57%)
Perceptions of Great Risk from Smoking One or	Age 12-17	65.41% (64.90% - 65.91%)	66.18% (65.13% - 67.22%)	64.54% (63.71% - 65.36%)	65.42% (64.63% - 66.20%)	65.63% (64.57% - 66.67%)	61.81% (58.58% - 64.93%)
	Age 18-25	66.50% (66.00% - 67.00%)	68.38% (67.40% - 69.35%)	62.92% (62.07% - 63.75%)	66.09% (65.31% - 66.86%)	68.93% (67.89% - 69.95%)	65.38% (62.33% - 68.32%)
	Age 26+	72.76% (72.33% - 73.19%)	75.05% (74.24% - 75.85%)	68.99% (68.24% - 69.74%)	72.12% (71.46% - 72.78%)	75.45% (74.59% - 76.29%)	73.97% (71.34% - 76.43%)
	Age 18+	71.84% (71.46% - 72.22%)	74.10% (73.38% - 74.81%)	68.11% (67.44% - 68.76%)	71.24% (70.66% - 71.82%)	74.46% (73.70% - 75.21%)	72.70% (70.38% - 74.91%)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT							
Illicit Drug Dependence in the Past Year[5]	Age 12-17	1.92% (1.78% - 2.07%)	1.85% (1.62% - 2.10%)	1.84% (1.66% - 2.04%)	1.91% (1.73% - 2.12%)	2.05% (1.80% - 2.33%)	2.04% (1.49% - 2.78%)
	Age 18-25	5.17% (4.93% - 5.42%)	5.67% (5.20% - 6.19%)	4.95% (4.60% - 5.32%)	4.69% (4.37% - 5.03%)	5.72% (5.21% - 6.28%)	4.59% (3.45% - 6.10%)
	Age 26+	1.34% (1.24% - 1.44%)	1.50% (1.32% - 1.71%)	1.28% (1.15% - 1.43%)	1.31% (1.17% - 1.46%)	1.31% (1.14% - 1.51%)	1.44% (1.05% - 1.96%)
	Age 18+	1.90% (1.81% - 2.00%)	2.09% (1.91% - 2.29%)	1.82% (1.69% - 1.95%)	1.80% (1.67% - 1.94%)	1.98% (1.81% - 2.16%)	1.91% (1.50% - 2.42%)
Illicit Drug Dependence or Abuse in the Past Year	Age 12-17	3.67% (3.47% - 3.87%)	3.40% (3.06% - 3.78%)	3.41% (3.14% - 3.69%)	3.57% (3.29% - 3.86%)	4.24% (3.82% - 4.71%)	4.23% (3.27% - 5.45%)
	Age 18-25	7.27% (6.98% - 7.57%)	7.80% (7.24% - 8.40%)	6.99% (6.56% - 7.44%)	6.76% (6.37% - 7.18%)	7.92% (7.33% - 8.55%)	6.77% (5.42% - 8.41%)
	Age 26+	1.79% (1.68% - 1.92%)	1.91% (1.70% - 2.15%)	1.73% (1.57% - 1.91%)	1.76% (1.60% - 1.93%)	1.82% (1.60% - 2.06%)	2.22% (1.65% - 3.00%)
	Age 18+	2.60% (2.49% - 2.71%)	2.75% (2.54% - 2.97%)	2.50% (2.34% - 2.66%)	2.49% (2.33% - 2.65%)	2.74% (2.53% - 2.97%)	2.89% (2.31% - 3.63%)

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

* Low precision; no estimate reported

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2014 (NSDUH)

INDICATORS[+]	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT							
Alcohol Dependence[7]	Age 12-17	1.09% (0.98% - 1.20%)	1.12% (0.96% - 1.29%)	1.06% (0.93% - 1.21%)	1.03% (0.90% - 1.18%)	1.18% (0.99% - 1.40%)	1.24% (0.90% - 1.71%)
	Age 18-25	5.74% (5.50% - 6.00%)	5.78% (5.31% - 6.29%)	5.79% (5.41% - 6.19%)	5.19% (4.85% - 5.56%)	6.53% (5.99% - 7.10%)	6.16% (4.87% - 7.76%)
	Age 26+	2.94% (2.79% - 3.09%)	2.91% (2.65% - 3.19%)	2.93% (2.72% - 3.16%)	2.83% (2.62% - 3.07%)	3.14% (2.84% - 3.46%)	3.28% (2.56% - 4.20%)
	Age 18+	3.35% (3.22% - 3.48%)	3.32% (3.08% - 3.57%)	3.35% (3.15% - 3.56%)	3.18% (2.98% - 3.39%)	3.65% (3.37% - 3.95%)	3.71% (3.01% - 4.56%)
Alcohol Dependence or Abuse	Age 12-17	2.99% (2.81% - 3.17%)	3.10% (2.81% - 3.43%)	2.94% (2.70% - 3.21%)	2.83% (2.61% - 3.07%)	3.19% (2.85% - 3.57%)	3.36% (2.60% - 4.32%)
	Age 18-25	13.20% (12.81% - 13.60%)	13.59% (12.87% - 14.35%)	13.82% (13.21% - 14.45%)	12.29% (11.76% - 12.85%)	13.76% (12.97% - 14.58%)	13.72% (11.70% - 16.03%)
	Age 26+	5.92% (5.71% - 6.13%)	5.95% (5.55% - 6.38%)	6.03% (5.69% - 6.39%)	5.62% (5.31% - 5.95%)	6.26% (5.83% - 6.72%)	6.49% (5.39% - 7.81%)
	Age 18+	6.98% (6.80% - 7.17%)	7.04% (6.67% - 7.42%)	7.16% (6.86% - 7.48%)	6.59% (6.31% - 6.89%)	7.39% (7.00% - 7.80%)	7.56% (6.50% - 8.78%)
Alcohol or Illicit Drug Dependence or Abuse	Age 12-17	5.45% (5.21% - 5.70%)	5.32% (4.91% - 5.76%)	5.21% (4.88% - 5.56%)	5.37% (5.04% - 5.72%)	5.88% (5.41% - 6.38%)	6.14% (4.97% - 7.56%)
	Age 18-25	17.49% (17.05% - 17.94%)	18.41% (17.59% - 19.25%)	17.93% (17.30% - 18.57%)	16.29% (15.69% - 16.90%)	18.28% (17.47% - 19.12%)	17.23% (14.96% - 19.75%)
	Age 26+	7.05% (6.83% - 7.28%)	7.08% (6.65% - 7.53%)	7.18% (6.83% - 7.56%)	6.78% (6.45% - 7.12%)	7.34% (6.89% - 7.83%)	7.99% (6.78% - 9.38%)
	Age 18+	8.58% (8.37% - 8.79%)	8.69% (8.31% - 9.09%)	8.75% (8.42% - 9.08%)	8.16% (7.87% - 8.47%)	9.00% (8.59% - 9.42%)	9.35% (8.22% - 10.62%)
Needing But Not Receiving Treatment for Illicit Drug Use[8]	Age 12-17	3.42% (3.23% - 3.63%)	3.14% (2.82% - 3.50%)	3.13% (2.86% - 3.42%)	3.36% (3.10% - 3.64%)	3.99% (3.59% - 4.44%)	3.94% (2.99% - 5.16%)
	Age 18-25	6.66% (6.38% - 6.94%)	6.89% (6.38% - 7.45%)	6.33% (5.94% - 6.75%)	6.30% (5.93% - 6.68%)	7.32% (6.74% - 7.95%)	6.09% (4.85% - 7.63%)
	Age 26+	1.55% (1.44% - 1.66%)	1.65% (1.44% - 1.88%)	1.47% (1.32% - 1.64%)	1.52% (1.37% - 1.69%)	1.57% (1.36% - 1.80%)	1.80% (1.29% - 2.53%)
	Age 18+	2.29% (2.19% - 2.40%)	2.40% (2.20% - 2.61%)	2.18% (2.03% - 2.34%)	2.22% (2.08% - 2.37%)	2.44% (2.23% - 2.66%)	2.44% (1.91% - 3.10%)
Needing But Not Receiving Treatment for Alcohol Use[9]	Age 12-17	2.84% (2.67% - 3.01%)	2.96% (2.66% - 3.29%)	2.76% (2.53% - 3.02%)	2.69% (2.47% - 2.93%)	3.05% (2.71% - 3.43%)	3.20% (2.44% - 4.19%)
	Age 18-25	12.82% (12.44% - 13.21%)	13.09% (12.32% - 13.91%)	13.29% (12.63% - 13.97%)	12.11% (11.50% - 12.75%)	13.30% (12.50% - 14.14%)	13.14% (11.21% - 15.34%)
	Age 26+	5.59% (5.39% - 5.79%)	5.53% (5.14% - 5.94%)	5.77% (5.45% - 6.12%)	5.39% (5.09% - 5.71%)	5.78% (5.38% - 6.21%)	6.22% (5.11% - 7.55%)
	Age 18+	6.65% (6.46% - 6.83%)	6.61% (6.25% - 6.98%)	6.87% (6.58% - 7.17%)	6.37% (6.10% - 6.65%)	6.92% (6.55% - 7.30%)	7.24% (6.19% - 8.46%)
MENTAL HEALTH among persons aged 18 or older							
Any mental illness in past year[10]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	19.69% (19.28% - 20.12%)	20.44% (19.65% - 21.25%)	20.24% (19.60% - 20.90%)	18.16% (17.55% - 18.79%)	21.01% (20.13% - 21.91%)	20.23% (17.86% - 22.82%)
	Age 26+	18.17% (17.80% - 18.55%)	17.54% (16.78% - 18.33%)	18.25% (17.62% - 18.90%)	18.14% (17.52% - 18.77%)	18.64% (17.88% - 19.43%)	19.42% (17.28% - 21.77%)
	Age 18+	18.39% (18.07% - 18.72%)	17.95% (17.28% - 18.64%)	18.54% (17.99% - 19.10%)	18.14% (17.60% - 18.69%)	19.00% (18.34% - 19.68%)	19.54% (17.60% - 21.65%)
Serious mental illness in past year[11]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	4.38% (4.18% - 4.60%)	4.47% (4.10% - 4.88%)	4.84% (4.51% - 5.18%)	4.03% (3.77% - 4.32%)	4.45% (4.07% - 4.86%)	4.48% (3.57% - 5.60%)
	Age 26+	4.08% (3.90% - 4.27%)	3.76% (3.42% - 4.14%)	4.23% (3.91% - 4.56%)	4.19% (3.89% - 4.51%)	4.03% (3.66% - 4.44%)	4.18% (3.31% - 5.27%)
	Age 18+	4.13% (3.97% - 4.29%)	3.86% (3.55% - 4.20%)	4.32% (4.03% - 4.62%)	4.16% (3.90% - 4.45%)	4.09% (3.76% - 4.45%)	4.23% (3.45% - 5.17%)

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

* Low precision; no estimate reported

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

Appendix 3B. Substance Abuse and Mental Health by Age Group, New Mexico, 2012-2014 (NSDUH)

INDICATORS[+]	AGE GROUP	TOTAL U.S.	NORTHEAST	MIDWEST	SOUTH	WEST	NEW MEXICO
MENTAL HEALTH among persons aged 18 or older							
Had at least one major depressive episode in past year[12]	Age 12-17	10.36% (10.03% - 10.70%)	9.77% (9.21% - 10.37%)	10.10% (9.62% - 10.59%)	10.21% (9.76% - 10.69%)	11.25% (10.59% - 11.93%)	10.66% (9.04% - 12.53%)
	Age 18-25	8.97% (8.66% - 9.28%)	9.19% (8.62% - 9.79%)	9.35% (8.87% - 9.85%)	8.25% (7.84% - 8.68%)	9.58% (8.95% - 10.24%)	9.22% (7.70% - 11.00%)
	Age 26+	6.32% (6.09% - 6.55%)	6.17% (5.75% - 6.62%)	6.40% (6.07% - 6.75%)	6.34% (6.01% - 6.70%)	6.32% (5.86% - 6.81%)	6.38% (5.27% - 7.70%)
	Age 18+	6.71% (6.51% - 6.91%)	6.60% (6.22% - 6.99%)	6.83% (6.53% - 7.14%)	6.62% (6.32% - 6.93%)	6.81% (6.40% - 7.25%)	6.80% (5.78% - 7.98%)
Had serious thoughts of suicide in past year	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	7.37% (7.11% - 7.64%)	7.52% (7.03% - 8.03%)	7.78% (7.37% - 8.22%)	6.82% (6.44% - 7.22%)	7.76% (7.21% - 8.35%)	7.05% (5.86% - 8.47%)
	Age 26+	3.32% (3.15% - 3.49%)	3.21% (2.92% - 3.53%)	3.40% (3.15% - 3.67%)	3.32% (3.08% - 3.58%)	3.32% (3.01% - 3.65%)	3.24% (2.54% - 4.12%)
	Age 18+	3.91% (3.76% - 4.06%)	3.83% (3.56% - 4.11%)	4.04% (3.82% - 4.28%)	3.83% (3.61% - 4.05%)	3.99% (3.71% - 4.28%)	3.80% (3.17% - 4.56%)

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

Source: 2012, 2013, and 2014 National Survey on Drug Use and Health (NSDUH), Substance Abuse and Mental Health Services Administration, Office of Applied Studies

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

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

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

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

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

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

6. 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.

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

8. 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.

9. 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).

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

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

12. 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.

Appendix 4

International Classification of Diseases, Clinical Modification, 9th and 10th Edition

Appendix 4: International Classification of Diseases, Clinical Modification, 9th and 10th Edition

ICD-9-CM		ICD-10-CM	
Description	**Code**	**Code**	**Description**
Opioid Overdose/Poisoning			
Poisoning by opium (alkaloids), unspecified	965.00	T400 [X1-X4]	Poisoning by opium
Poisoning by other opiates and related narcotics	965.09	T402 [X1-X4]	Poisoning by other opioids
Accidental poisoning by other opiates and related narcotics	E850.2		
Poisoning by methadone	965.02	T403 [X1-X4]	Poisoning by methadone
Accidental poisoning by methadone	E850.1		
Poisoning by heroin	96.50	T401 [X1-X4]	Poisoning by heroin
Accidental poisoning by heroin	E850.0		
		T404 [X1-X4]	Poisoning by other synthetic narcotics
Chronic Liver Disease			
Acute and subacute necrosis of liver	570.xx	K70-K77	Diseases of liver
Chronic liver disease and cirrhosis	571.xx		
Liver abscess and sequelae of chronic liver disease	572.xx		
Other disorders of liver	573.xx		