New Mexico Substance Abuse Epidemiology Profile

Substance Abuse Epidemiology Section
Injury and Behavioral Epidemiology Bureau
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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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SPF-SIG Statewide Epidemiology Outcomes Workgroup (SEOW)

The State Epidemiological Outcomes Workgroup (SEOW) is a core component funded by the State Epidemiological Outcomes Workgroup grant. Its focus is the development of assessment data and indicators for use in planning and evaluation. The workgroup includes the following individuals: Jim Roeber, Brad Whorton, and Jim Davis, NMDOH-ERD Substance Abuse Epidemiology Section; Karen Cheman, NMHSD-BHSD Office of Substance Abuse Prevention; Edna Ortiz and Sharon Ebert, NMHSD-BHSD Data Quality Unit; Letty Rutledge, NMHSD-BHSD Block Grant Coordinator; Brenda Martinez, Optum Health; Ann DelVecchio, local evaluator; Sindy Sacoman, local evaluator; Pam Drake, SJCP Prevention Provider; Paula Feathers, New Mexico ATODA Prevention Training System; Martha Waller and Liz Lilliott, PIRE (under contract to the OSAP); and is coordinated and staffed by Michael Coop and Natalie Skogerboe, Coop Consulting, Inc. (under contract to the OSAP).

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

Important Notes about Comparability to Previous Reports

This report is the fourth in a series that began with the New Mexico State Epidemiology Profile published in 2005, and continued with the publication of updates in 2010 and 2011. These reports are available at: http://nmhealth.org/ERD/HealthData/substance_abuse.shtml#substance.

Each report has reflected important methodological changes from the previous reports in this series. As a result, this report is not comparable to previous reports in the series in several important ways. The following categories should not be compared between the reports in this series:

- Death counts and/or rates for any alcohol-related death indicators should not be compared between the 2005 report and any later reports
- Race/ethnicity reporting for indicators based on deaths or the Behavioral Risk Factor Surveillance Survey (BRFSS) should not be compared between the 2005 report and any later reports
- Race/ethnicity reporting for indicators based on the Youth Risk and Resiliency Survey (YRRS) should not be compared between the 2005 or 2010 reports and any later reports

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

Also, prior reports (the 2005, 2010, and 2011 reports) reflected a special "small numbers" rule that was specific to this report, This rule, devised by the SEOW during the design of the original 2005 report, suppressed the reporting of death rates for table cells based on fewer than 2 deaths per year. Beginning with this report, this special rule will no longer be used in this report. Instead, this report uses the standard "NMDOH small numbers rule" used in other NMDOH publications, i.e.: mortality reporting is suppressed only for table cellls based on 3 or fewer deaths coming from a population of fewer than 20 people.

How to Use this Report

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

A combined five-year period is used when presenting death rates. Combining deaths over multiple years is necessary because in many of New Mexico's small counties there may be very few deaths due to a given cause in any given year. Combining deaths over multiple years allows the calculation of rates that are more stable and therefore more meaningful than rates calculated based on very few cases. In this report, death rates were calculated and reported for 2007-2011, 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 to 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 deaths and death rates by sex, age group, and race/ethnicity. In sections that report on causes of death, these tables include the numbers of deaths on the left side of the table, and age-adjusted death rates per 100,000 population on the right side of the table. In sections that report on adult risk behaviors, these tables include an estimate of the number of persons engaging in or experiencing the risk behavior on the left side of the table; and the prevalence rate of the behavior in the population on the right side of the table. In sections that report on youth risk behaviors Table 1 includes only prevalence rates. These tables are very useful in determining the most important risk groups at the statewide level.

Table 2 for each outcome indicator presents results for each New Mexico county by race/ethnicity. Once again, the numbers of deaths (or the estimated number of persons engaging in or experiencing a risk behavior) are presented on the left side of the table and the age-adjusted death rates (or the weighted behavior prevalence rates) are presented on the right side of the table. These tables are useful in determining which counties have the most severe substance use problems, and which race/ethnic groups are at the highest risk within each county.

The discussion of each indicator also includes a county bar chart that graphically presents age-adjusted death rates (or weighted behavior prevalence rates) for each New Mexico county in descending order. Adjacent to each county name on the left side of the chart, the number of deaths occurring (or the estimated number of persons engaging in or experiencing the behavior) in the county and the percent of New Mexico deaths 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 of the chart. The state rate is depicted with a darker colored bar, and for most indicators the most recent available United States rate is also included, depicted with a cross-hatched bar, making it easy to compare the county rate to the state and national rate in each instance.

Finally, maps showing rates by county have been included for each indicator. The counties have been categorized and shaded in these maps according to the severity of the problem in the county. The map shading categories have been chosen to identify counties that have rates lower than the state rate, counties that have rates somewhat higher than the state rate, and counties that have rates substantially higher than the state rate. The latter category (corresponding to the darkest-shaded counties on each map) represents rates that are higher than the state rate by a selected amount. For most of the maps based on death rates this threshold is rates that are 50% or higher than the state rate; for most of the maps based on behavioral data from either the adult Behavioral Risk Factor Surveillance Survey (BRFSS) or the high-school Youth Risk and Resiliency Survey (YRRS), this threshold is rates that are 15-25% higher than the state rate.

Use of this Report: Rates and Numbers

Both death rates and the numbers of deaths are presented in the tables and charts of the Epidemiology Profile. While the rates are very important for indicating the severity of a problem 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 (112.2 per 100,000 population) more than twice that of Bernalillo County (49.4 per 100,000). However, the number of alcohol-related deaths in Bernalillo County (1,649) is more than seven times the number in Rio Arriba County (225). While problems are more severe in Rio Arriba County (reflected in higher rates), Bernalillo County bears a larger proportion of the statewide budren (30.8% of all alcohol-related deaths in the state compared to 4.2% 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.

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

For survey-based measures of adult risk behaviors, 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.

Please note that the suppression of death rate reporting for table cells based on fewer than 2 deaths per year, which was a feature of the previous reports in this series, has been discontinued in this report. This change has been implemented to make this report consistent with other NMDOH reports, which suppress mortality reporting only for table cellls which violate the NMDOH small numbers rule (i.e., cells with 3 or fewer deaths coming from a population of fewer than 20 people are suppressed).

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, Epidemiology and Response Division (ERD), NMDOH.
  Available online at:
  http://nmhealth.org/ERD/HealthData/substance_abuse.shtml.

- **New Mexico Behavioral Risk Factor Surveillance System (BRFSS) reports**, produced by the Survey Section, Injury and Behavioral Epidemiology Bureau, Epidemiology and Response Division (ERD), NMDOH.
  Available online at:
  http://nmhealth.org/ERD/HealthData/health_behaviors.shtml.

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

INTRODUCTION (continued)

Technical Note: Methodological Changes since Previous Reports

This 2012 report and the previous 2011 and 2010 reports in this series reflect several important methodological changes implemented since the original New Mexico State Epidemiology Profile (the first report in this series) was published in 2005. These methodological changes and their impact on this report are described in more detail below:

- Changes to the definition of alcohol-related death. The Center for Disease Control's (CDC's) revised Alcohol-Related Disease Impact (ARDI) alcohol attributable fractions (AAFs) were implemented in the 2010 and subsequent reports. AAFs are the proportion of a given cause of death that can be attributed to excessive alcohol use. These AAFs are central to the estimation of alcohol-related deaths and alcohol-related death rates in this report. The revised CDC ARDI AAFs are the standard AAFs recommended for use by the CDC. These AAFs were first reported in the publication Alcohol-Attributable Deaths and Years of Potential Life Lost --- United States, 2001 (Centers for Disease Control and Prevention. MMWR. 2004:53(37);866-870). The revised ARDI AAFs are further described on the CDC website https://apps.nccd.cdc.gov/ardi/Homepage.aspx.

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

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

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

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

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

These changes in the race/ethnicity categories make the 2010 through 2012 reports' counts and rates by race/ethnicity comparable to each other, and not comparable to the 2005 report, for all indicators except those based on the Youth Risk and Resiliency Survey (YRRS). For indicators based on YRRS, the 2005 and 2010 reports' rates by race/ethnicity are comparable to each other, but are not comparable to the 2011 and 2012 reports.

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 2011, the ten leading causes of death in New Mexico were diseases of the heart, malignant neoplasms, unintentional injuries, chronic lower respiratory disease, cerebrovascular disease, diabetes, chronic liver disease, 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 disease and influenza and pneumonia are associated with tobacco use; heart disease, malignant neoplasms, and cerebrovascular disease are associated with both alcohol and tobacco use; and unintentional injuries and suicide are associated with the use of other drugs.

Alcohol-Related Death

Over the past 30 years, New Mexico has consistently had among the highest alcohol-related death rates in the United States, and it has had the highest alcohol-related death rate since 1997. The negative consequences of excessive alcohol use in New Mexico are not limited to death, but also include domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and other injuries, mental illness, and a variety of other medical problems. In 2006, the economic cost of alcohol abuse in New Mexico was more than $2.5 billion, or $1,250 per person.

Death rates from alcohol-related causes increase with age. Male rates are substantially higher than female rates. American Indians have higher alcohol-related death rates than other race/ethnicities. McKinley and Rio Arriba counties have extremely high alcohol-related death rates, driven by high rates in the American Indian and Hispanic male populations, respectively. The counties with the most deaths for the five-year period 2007-2011 are Bernalillo, San Juan, Santa Fe, Doña 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. New Mexico's rate of death due to alcohol-related chronic diseases is roughly twice the national rate. Death rates increase with age. American Indians, both male and female, and Hispanic males have extremely high rates. As with total alcohol-related death, McKinley and Rio Arriba counties have the highest rates in the state.

Alcohol-related chronic liver disease (AR-CLD) is the disease that accounts for the most deaths due to alcohol-related chronic disease. AR-CLD death rates are extremely high among American Indians, both male and female, and Hispanic males. The high rates among American Indians and Hispanic males between the ages of 35 and 64 represent a tremendous burden in terms of years of potential life lost. While Bernalillo County has the highest number of deaths due to AR-CLD (508 for the years 2007-2011), two counties that stand out for their very high rates are Rio Arriba and McKinley counties, which have rates 6 times the national rate.

- Alcohol-Related Injury Death. New Mexico's rate of alcohol-related injury death is 1.7 times the national rate. In the current reporting period (2007-2011) alcohol-attributable non-alcohol poisoning (e.g., drug overdose) surpassed alcohol-related motor vehicle traffic crashes and falls as the leading cause of alcohol-related injury death; and numerous other types of injury death are also associated with excessive alcohol use (particularly binge drinking, see below). Deaths from drug overdose, a sizeable portion of which are partially attributable to alcohol, have increased substantially in recent years. Males are more at risk for alcohol-related injury death than females, with American Indian males at particularly elevated risk.

New Mexico's alcohol-related motor vehicle traffic crash (AR-MVTC) death rate has decreased dramatically over the past 30 years. After substantial declines during the 1980's and 1990's, New Mexico's rate stagnated for almost ten years. However, a comprehensive program to prevent driving while intoxicated (DWI), initiated in 2004, resulted in substantial rate declines, particulalry during the period 2005-2008. Nonetheless, rate disparities remain: both male and female American Indians have elevated rates, especially among younger males (age 15-44). McKinley and Rio Arriba counties had rates almost five times the national rate for the period covered by this report (2007-2011). The McKinley County rate was driven by the high American Indian rate, while the Rio Arriba County rate was driven by the high Hispanic and American Indian rates.

Consequences of Substance Abuse (continued)

Smoking-Related Death

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

Drug-Induced Death

New Mexico has the highest drug-induced death rate in the nation, and the consequences of drug use continue to burden New Mexico communities. Drug-induced death rates remained higher for males than for females. The highest drug-induced death rate was among Hispanic males, followed by White males. Rio Arriba County had the highest drug-induced death rate in the state. Bernalillo County continued to bear the highest burden of drug-induced death in terms of total numbers of deaths. Unintentional drug overdoses account for more than 80% of drug-induced deaths. The most common drugs causing unintentional overdose death for the period covered in this report were prescription opioids (i.e., methadone, oxycodone, morphine; 50%), heroin (33%), tranquilizers/muscle relaxants (27%), cocaine (25%), and antidepressants (16%). In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available.

Suicide and Mental Health

Suicide is a serious and persistent public health problem in New Mexico. Over the period 1981 through 2009 New Mexico's suicide rate has consistently been among the highest in the nation -- 1.5 to 1.9 times the U.S. rate. Male suicide rates are more than three times female rates across the age range, and among all race/ethnic groups. Fifteen counties had suicide rates in 2007-2011 that were more than twice the most recent available U.S. rates.

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

Alcohol, Tobacco, and Other Drug Consumption Behavior

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

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

- Adult Binge Drinking. Binge drinking (defined as drinking 5+ drinks on a single occasion, for men, or 4+ drinks on a single occasion, for women) is associated with numerous types of injury death, including motor vehicle traffic crash fatalities, drug overdose, falls, suicide, and homicide. Among adults (age 18 or over) of all ethnicities, binge drinking was more commonly reported by males than females, mirroring higher rates of alcohol-related injury death among males. Among males, 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 Binge Drinking. In 2011, New Mexico public high school students were slightly more likely to report binge drinking than U.S. high school students. Among New Mexico high school students, binge drinking was more commonly reported by upper grade students than lower grade students. There was no significant difference in the binge drinking rate between male and female high school students. Binge drinking rates were lower among White youth than other racial/ethnic groups.

EXECUTIVE SUMMARY (continued)

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

- Adult Heavy Drinking. In 2010, adult heavy drinking (defined as drinking more than two drinks per day, on average, for men, or more than one drink per day, on average, for women) was less commonly reported in New Mexico (4.5%) than in the rest of the nation (5.0%). Heavy drinking was more prevalent among younger (age 18-24) and middle-aged (age 25-64) adults, with 4.0% and 4.9% of these age groups, respectively, reporting past-month heavy drinking. New Mexico men were 1.4 times more likely to report chronic drinking than women (5.2% vs. 3.7%).

- Adult Drinking and Driving. In 2010, adult past-30-day drinking and driving was reported in New Mexico by 0.9% of adults aged 18 and over. Past-30-day drinking and driving was more prevalent among middle-aged adults (age 25-64) than among other age groups. New Mexico men were almost three times more likely to report drinking and driving than women (1.4% vs 0.5%). Hispanic males (1.9%) were more likely to report drinking and driving than White (1.1%) and American Indian (1.1%) males.

- Youth Drinking and Driving. In 2011, New Mexico high school students were slightly more likely to report driving after drinking alcohol than other U.S. students. Driving after drinking was more slightly more common among boys than girls, and was less common among White and Hispanic youth than among other race/ethnic groups. Twelfth grade students were more likely to report drinking and driving than 9th and 10th grade students.

- Youth Drug Use. In 2011, past-30-day marijuana and cocaine use were more prevalent among New Mexico students than among U.S. students. The use of marijuana, cocaine, other illicit drugs (heroin, methamphetamine, inhalants, or ecstasy), and pain-killers was less commonly reported by White and Hispanic students than by students in other race/ethnic groups.

- Adult Tobacco Use. In 2010, the prevalence of adult smoking was slightly higher in New Mexico than in the nation overall (18.5% vs 17.3%). Smoking was most prevalent among younger age groups, and was more common among men than women for the age categories 18-24 and 25-64.

-Youth Tobacco Use. In 2011, smoking was slightly more prevalent among New Mexico high school students (19.9%) than in the nation overall (18.1%). New Mexico boys were more likely than girls to report current smoking (23.2% vs. 16.5%). American Indian high school students (26.7%) were more likely to report current cigarette smoking than White (16.1%) and Hispanic (19.0%) students.

Data Sources

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National death data: National Center for Health Statistics. Multiple Cause-of-Death files, 1981-2009, machine readable data files and documentation. National Center for Health Statistics, Hyattsville, Maryland. Available from: http://www.cdc.gov/nchs/data_access/VitalStatsOnline.htm#Mortality_Multiple. Death rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program.

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

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

(1) VMT reporting: Fatalities, Fatalities in Crashes by Driver Alcohol Inolvement, Vehicle Miles Traveled (VMT), and Fatality Rate per 100 Million VMT, by State, 1982-2007. Report provided by NHTSA National Center for Statistics and Analysis, Information Services Team. 2008-2010 death rates per 100M VMT calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program.

(2) Per 100,00 population reporting: Persons Killed, by STATE and Highest Driver Blood Alcohol Concentration (BAC) in Crash - State : USA, Year. Available from: http://www-fars.nhtsa.dot.gov/States/StatesAlcohol.aspx. Death rates were calculated by the New Mexico Department of Health, Epidemiology and Response Division, Injury and Behavioral Epidemiology Bureau, Substance Abuse Epidemiology Program.

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Section 1

Consequences

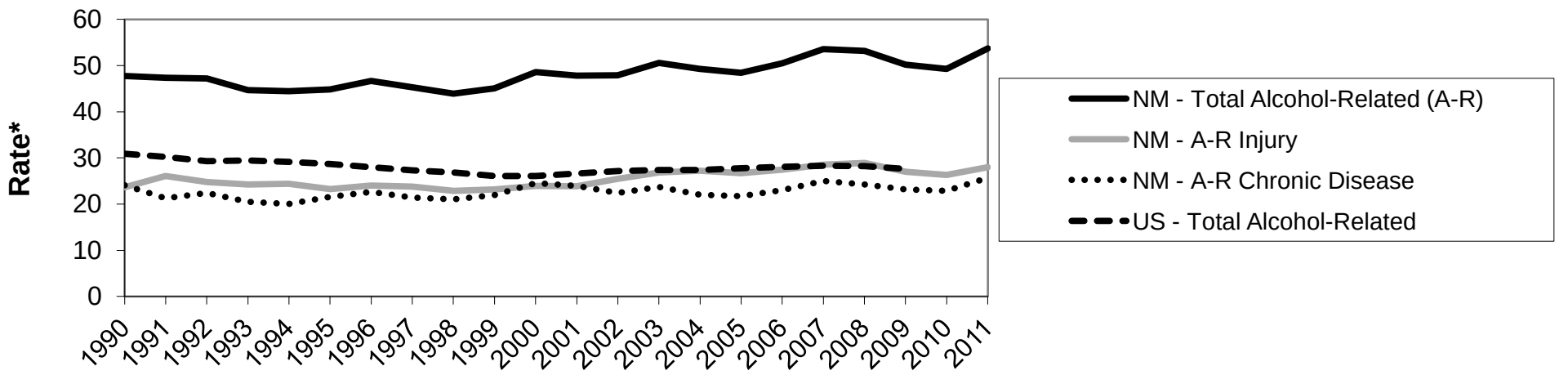
ALCOHOL-RELATED DEATH

Problem Statement

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

Chart 1 shows the two principal components of alcohol-related death: deaths due to chronic diseases (such as chronic liver disease), which are strongly associated with chronic heavy drinking; and deaths due to alcohol-related injuries, which are strongly associated with binge drinking. Each of these categories will be considered in more detail in a later section of this report. Chart 1 shows that while New Mexico's alcohol-related chronic disease death rates were relatively unchanged over the past 22 years, its alcohol-related injury death rate has been increasing since 2001. New Mexico's total alcohol-related death rate increased 12% from 1990 through 2011, driven by a 17% increase in alcohol-related injury death rates from 2001 through 2011. By contrast, the U.S. alcohol-related death rate decreased 11% from 1990 through 2009 (15% for alcohol-related chronic disease; 7% for alcohol-related injury), although US alcohol-related injury death rates also increased 11% from 2001 through 2009 (data not shown).

Chart 1: Alcohol-Related Death Rates*, New Mexico and United States, 1990-2011



* 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, 2007-2011

		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	White	80	880	425	1,385	13.3	73.0	115.9	54.7
	Hispanic	165	1,175	282	1,622	18.6	114.7	153.8	87.3
	American Indian	70	501	72	644	28.5	202.2	208.1	143.8
	Black	12	42	6	59	18.7	59.0	64.2	47.0
	Asian/Pacific Islander	2	10	3	16	5.7	23.8	68.9	25.5
	Total	329	2,608	788	3,726	18.0	100.6	131.6	75.1
Female	White	27	405	312	745	4.8	32.6	70.3	25.7
	Hispanic	36	352	157	545	4.2	34.1	70.6	28.7
	American Indian	25	228	52	306	10.0	85.6	110.9	63.2
	Black	1	14	4	19	2.4	23.0	32.5	17.6
	Asian/Pacific Islander	2	4	3	9	6.5	8.2	35.1	11.4
	Total	92	1,004	527	1,623	5.2	37.8	72.1	30.1
Total	White	107	1,285	738	2,130	9.2	52.5	90.9	39.7
	Hispanic	202	1,526	438	2,167	11.6	74.3	108.2	57.4
	American Indian	95	730	124	949	19.2	141.7	152.0	101.4
	Black	13	56	10	79	10.7	42.2	46.8	32.6
	Asian/Pacific Islander	4	15	6	25	6.1	15.3	48.2	17.2
	Total	421	3,612	1,316	5,349	11.7	68.9	98.9	52.0

* 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 DEATH (continued)

Problem Statement (continued)

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

Table 2 shows that Rio Arriba and McKinley counties have the highest rates of alcohol-related death, with rates more than twice the state rate and almost 4 times the national rate (see Chart 2). Several other counties (Cibola, San Miguel, San Juan, and Taos) have a substantial burden (20 or more alcohol-related deaths per year) and rates more than twice the U.S. rate (see Chart 2). High rates among American Indian males and females drive the rates in McKinley, Cibola, and San Juan counties; Rio Arriba has high rates among both Hispanic and American Indian males and females; deaths among Hispanic males drive the high rates in San Miguel and Taos counties (data by gender not shown).

Table 2: Alcohol-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

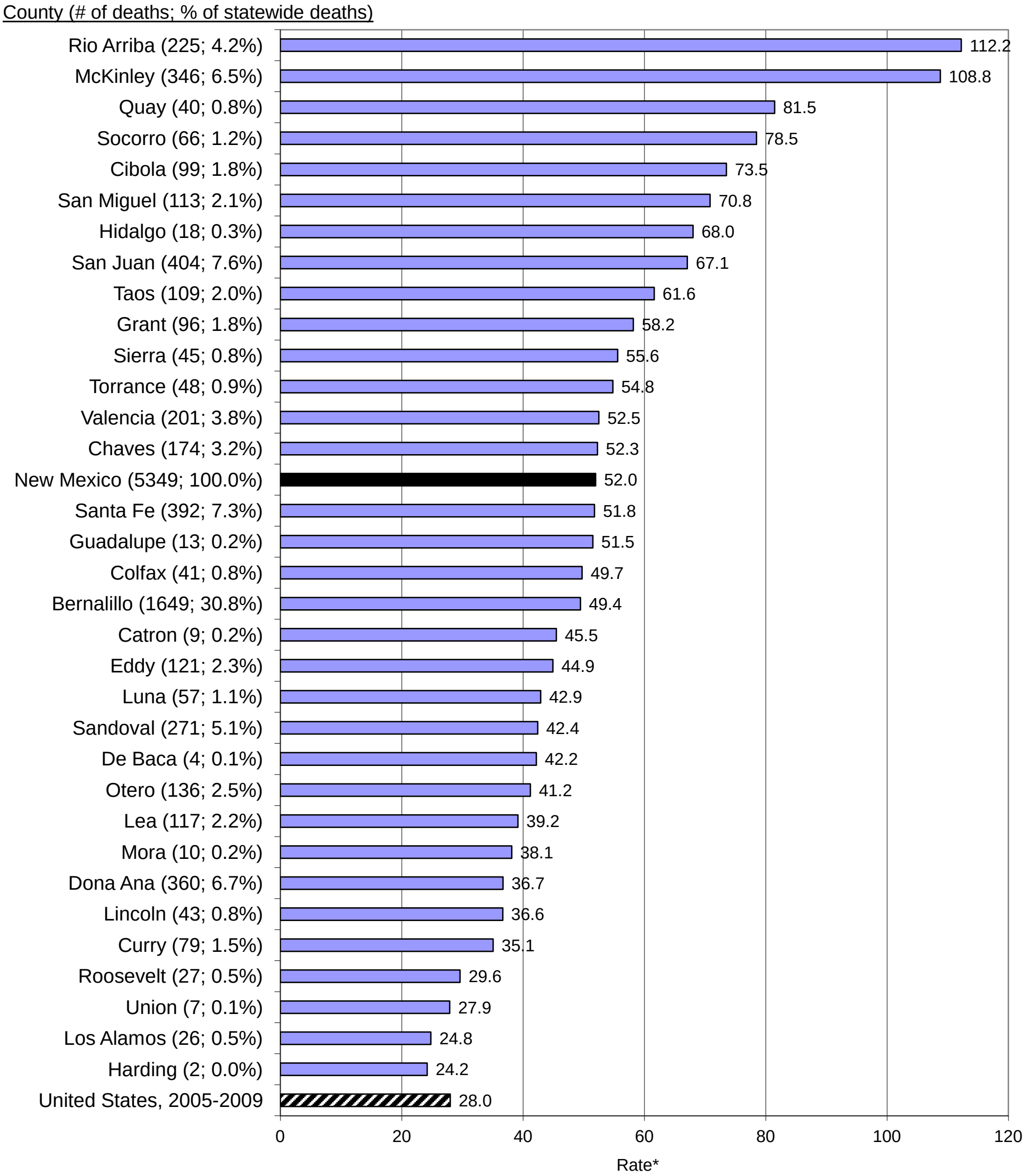
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	734	722	140	41	12	1,649	40.2	60.1	85.2	38.7	17.9	49.4
Catron	6	3	1	0	0	9	31.8	82	185.9	0.0	0.0	45.5
Chaves	100	69	2	3	0	174	50.0	56.4	30.2	32.1	0.0	52.3
Cibola	16	26	56	0	0	99	34.8	65.1	114.4	0.0	0.0	73.5
Colfax	19	22	0	0	0	41	36.2	69.0	0.0	0.0	0.0	49.7
Curry	39	34	1	4	1	79	27.1	59.5	27.9	26.8	11.6	35.1
De Baca	3	1	0	0	0	4	54.6	24.7	0.0	0.0	0.0	42.2
Dona Ana	157	193	4	4	2	360	37.2	37.1	17.7	21.9	30.3	36.7
Eddy	77	42	1	1	0	121	48.7	45.5	14.2	22.9	0.0	44.9
Grant	46	46	1	0	1	96	45.1	70.9	57.3	0.0	166.7	58.2
Guadalupe	2	11	0	0	0	13	38.2	60.1	0.0	0.0	0.0	51.5
Harding	1	1	0	0	0	2	31.2	15.2	0.0	0.0	0.0	24.2
Hidalgo	7	10	0	0	0	18	59.7	81	0.0	0.0	0.0	68.0
Lea	68	40	1	6	1	117	40.7	44.6	23.3	38.5	45.2	39.2
Lincoln	30	11	2	0	0	43	34.9	43.2	67.7	0.0	0.0	36.6
Los Alamos	22	4	0	0	0	26	25.3	32.2	0.0	0.0	0.0	24.8
Luna	32	24	0	1	0	57	51.3	41.5	0.0	63.3	0.0	42.9
McKinley	22	13	308	2	0	346	41.5	39.5	133.6	93.0	0.0	108.8
Mora	1	9	0	0	0	10	11.2	45.1	0.0	0.0	0.0	38.1
Otero	74	32	24	4	1	136	35.4	36.8	127.1	32.4	18.5	41.2
Quay	22	17	0	1	0	40	73.0	104.9	0.0	141.2	0.0	81.5
Rio Arriba	21	153	51	0	0	225	61.9	111.4	174.8	0.0	0.0	112.2
Roosevelt	17	10	0	0	0	27	26.7	35.2	0.0	0.0	0.0	29.6
Sandoval	121	78	67	2	3	271	32.5	47.5	76.3	14.6	26.9	42.4
San Juan	116	45	241	2	0	404	38.9	58.1	107.9	36.2	0.0	67.1
San Miguel	21	91	0	0	0	113	51.3	81.3	0.0	0.0	0.0	70.8
Santa Fe	153	221	14	2	1	392	39.3	68.5	52.3	17.9	14.1	51.8
Sierra	38	6	0	0	0	45	62.8	38.8	0.0	0.0	0.0	55.6
Socorro	18	30	17	1	0	66	45.7	74.3	181.2	144.6	0.0	78.5
Taos	33	70	6	0	1	109	41.4	79.7	48.9	0.0	33.5	61.6
Torrance	27	20	1	0	0	48	48.4	69.5	40.4	0.0	0.0	54.8
Union	3	2	1	0	0	7	17.3	28.1	205.6	0.0	0.0	27.9
Valencia	81	110	7	3	1	201	45.9	59.8	41.8	36.2	12.4	52.5
New Mexico	2,130	2,167	949	79	25	5,349	39.7	57.4	101.4	32.6	17.2	52.0

* 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 DEATH (continued)

Chart 2: Alcohol-Related Death Rates* by County, New Mexico, 2007-2011

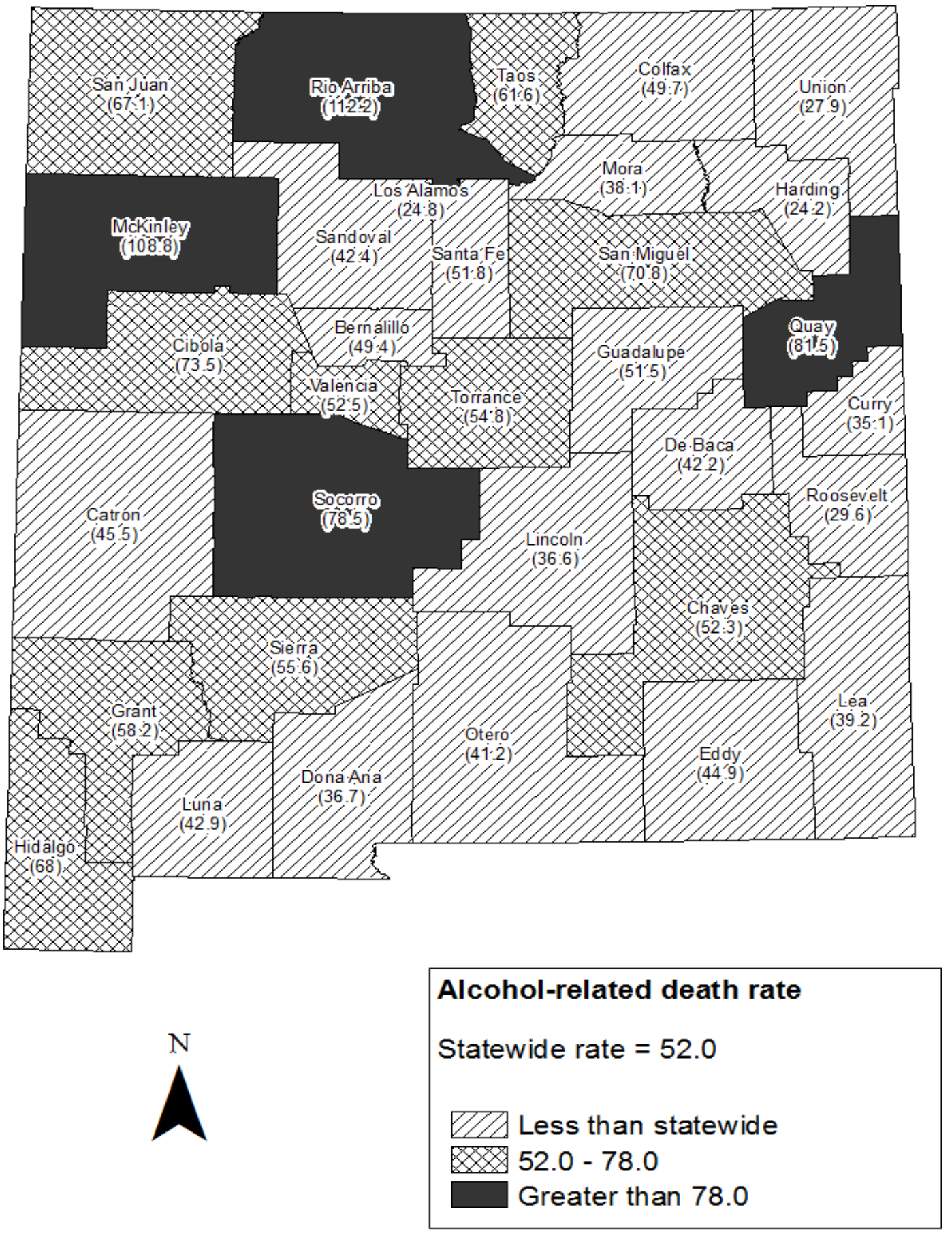


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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, 2007-2011



* 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

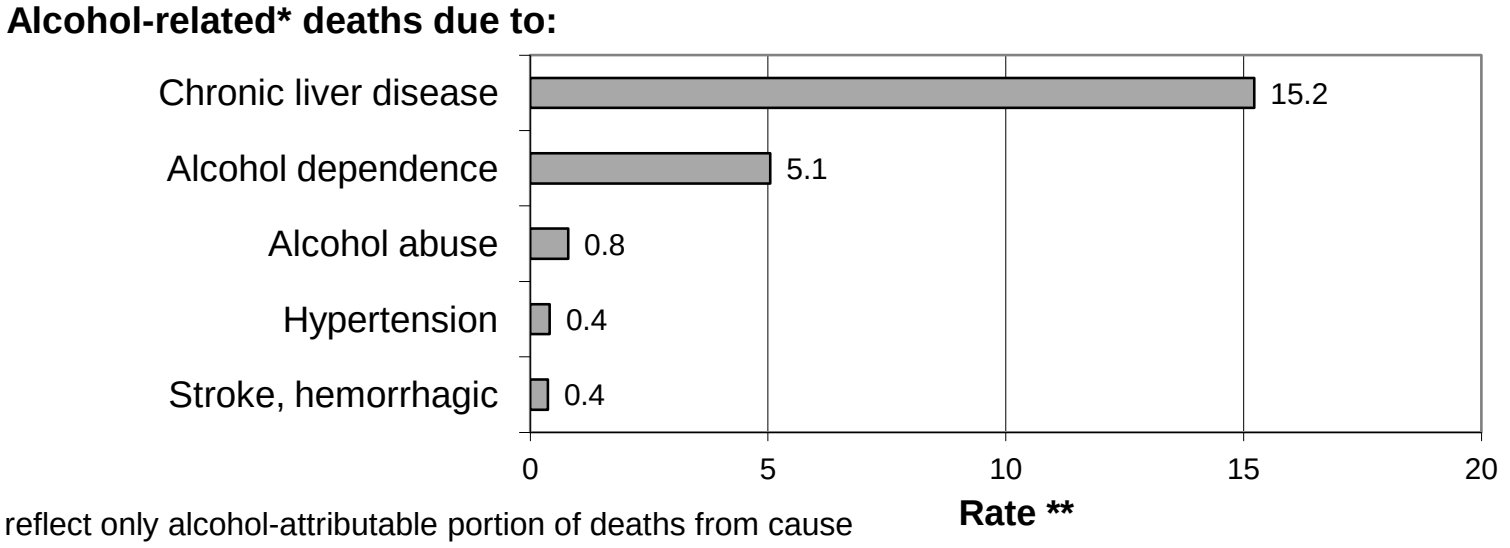
Problem Statement

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 2 times the national rate. Furthermore, while the national death rate from alcohol-related chronic disease decreased 15% from 1990-2009, New Mexico's rate increased 7% from 1990 to 2011.

Chart 1 shows the five leading causes of alcohol-related chronic disease death in New Mexico during 2007-2011. Alcohol-related chronic liver disease (AR-CLD) was the leading cause of alcohol-related death overall, and of alcohol-related chronic disease death during this period. This cause of death will be discussed in more detail in a later section of this report. New Mexico also had the highest rate of alcohol dependence death in the U.S. for the period 1999 through 2007 (the most recent year for which state comparison data is available).

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

Chart 1: Leading Causes of Alcohol-Related Chronic Disease Death, New Mexico, 2007-2011



* 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, 2007-2011

		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	White	2	427	216	645	0.3	35.4	58.9	22.6
	Hispanic	3	612	195	810	0.3	59.8	106.3	45.1
	American Indian	3	268	46	318	1.4	108.1	134.1	74.9
	Black	0	13	4	17	0.0	18.2	44.5	16.2
	Asian/Pacific Islander	0	1	1	2	0.0	2.6	23.4	4.9
	Total	9	1,321	463	1,792	0.5	51.0	77.3	34.8
Female	White	1	200	104	304	0.1	16.1	23.3	9.9
	Hispanic	2	188	86	277	0.3	18.3	39.0	14.8
	American Indian	1	163	37	201	0.4	61.1	79.3	42.9
	Black	0	8	2	9	0.0	12.2	15.3	8.8
	Asian/Pacific Islander	0	2	2	4	0.0	3.9	20.3	4.8
	Total	4	561	231	796	0.2	21.1	31.5	14.5
Total	White	2	627	320	949	0.2	25.6	39.4	15.9
	Hispanic	5	801	281	1,087	0.3	39.0	69.4	29.4
	American Indian	5	431	84	519	0.9	83.7	102.5	57.9
	Black	0	20	6	26	0.0	15.4	28.4	12.2
	Asian/Pacific Islander	0	3	3	6	0.0	3.3	21.5	4.8
	Total	13	1,882	693	2,589	0.4	35.9	52.1	24.2

* 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 2-3 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 both total rates and male and female rates more than twice the corresponding state rates. As mentioned earlier, Hispanic males are also at elevated risk, with rates 1.3 times the state rate for males (45.1 vs. 34.8), and almost twice the total state rate (45.1 vs. 24.2).

Table 2 shows that Rio Arriba, and McKinley counties have the highest death rates for diseases associated with chronic heavy drinking. In these counties, the rates are 5 times the national rate of 11.8 (see Chart 2). The high rates in McKinley county is 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, 2007-2011

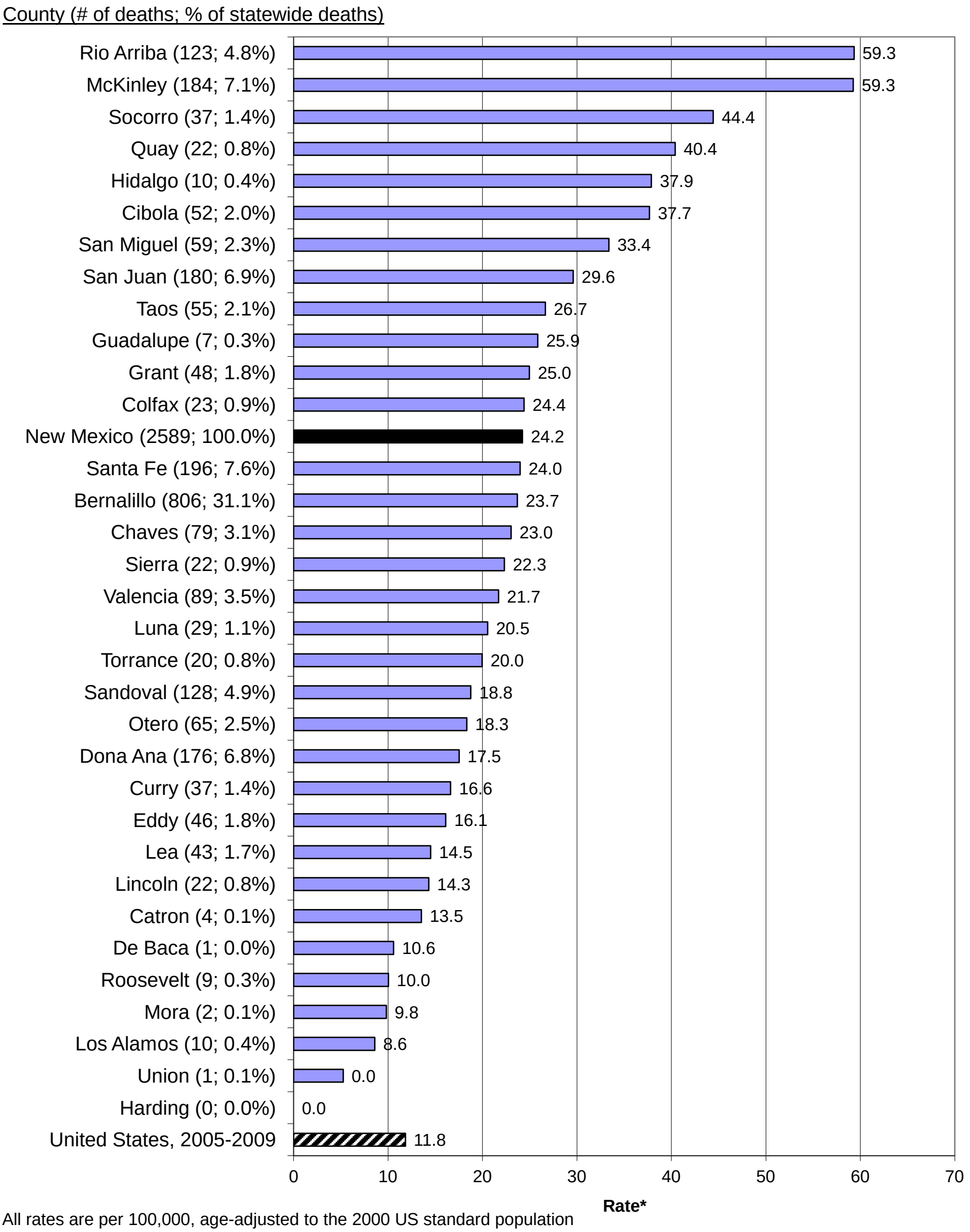
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	343	361	85	15	2	806	17.8	31.3	55.3	15.0	3.7	23.7
Catron	2	1	0	0	0	4	8.4	39	0.0	0.0	0.0	13.5
Chaves	47	30	1	1	0	79	21.7	26.7	13.8	19.1	0.0	23.0
Cibola	7	13	31	0	0	52	13.3	34.0	65.2	0.0	0.0	37.7
Colfax	11	12	0	0	0	23	17.1	36.2	0.0	0.0	0.0	24.4
Curry	15	19	1	2	0	37	10.5	37.3	27.9	11.7	0.0	16.6
De Baca	1	0	0	0	0	1	14.5	0.0	0.0	0.0	0.0	10.6
Dona Ana	67	103	3	2	1	176	13.7	20.4	14.2	14.1	13.8	17.5
Eddy	27	19	0	0	0	46	15.8	21.2	0.0	0.0	0.0	16.1
Grant	22	25	0	0	1	48	16.2	35.9	0.0	0.0	166.7	25.0
Guadalupe	1	6	0	0	0	7	16.4	30.1	0.0	0.0	0.0	25.9
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	4	7	0	0	0	10	28.7	52	0.0	0.0	0.0	37.9
Lea	27	14	1	1	1	43	13.7	18.9	16.9	4.5	29.5	14.5
Lincoln	16	5	1	0	0	22	14.7	17.5	27.6	0.0	0.0	14.3
Los Alamos	8	2	0	0	0	10	8.3	13.7	0.0	0.0	0.0	8.6
Luna	16	12	0	1	0	29	20.5	22.7	0.0	63.3	0.0	20.5
McKinley	9	7	168	0	0	184	14.4	20.0	76.5	0.0	0.0	59.3
Mora	0	2	0	0	0	2	0.0	11.9	0.0	0.0	0.0	9.8
Otero	37	17	10	2	0	65	15.5	18.8	58.3	20.6	0.0	18.3
Quay	12	9	0	0	0	22	36.5	53.7	0.0	0.0	0.0	40.4
Rio Arriba	8	79	36	0	0	123	23.2	55.2	123.3	0.0	0.0	59.3
Roosevelt	6	3	0	0	0	9	8.7	12.1	0.0	0.0	0.0	10.0
Sandoval	48	42	37	0	0	128	11.1	26.6	42.4	0.0	0.0	18.8
San Juan	41	22	116	1	0	180	12.1	31.1	54.9	11.9	0.0	29.6
San Miguel	13	46	0	0	0	59	28.1	37.0	0.0	0.0	0.0	33.4
Santa Fe	66	122	8	0	0	196	14.4	36.8	30.5	0.0	0.0	24.0
Sierra	21	2	0	0	0	22	25.6	11.4	0.0	0.0	0.0	22.3
Socorro	10	16	11	0	0	37	24.2	39.5	116.0	0.0	0.0	44.4
Taos	15	37	3	0	0	55	13.3	38.2	23.0	0.0	0.0	26.7
Torrance	10	9	1	0	0	20	14.8	30.6	40.4	0.0	0.0	20.0
Union	0	0	1	0	0	1	0.0	0.0	205.6	0.0	0.0	5.3
Valencia	38	46	4	1	0	89	19.4	25.0	27.5	12.6	0.0	21.7
New Mexico	949	1,087	519	26	6	2,589	15.9	29.4	57.9	12.2	4.8	24.2

* 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, 2007-2011

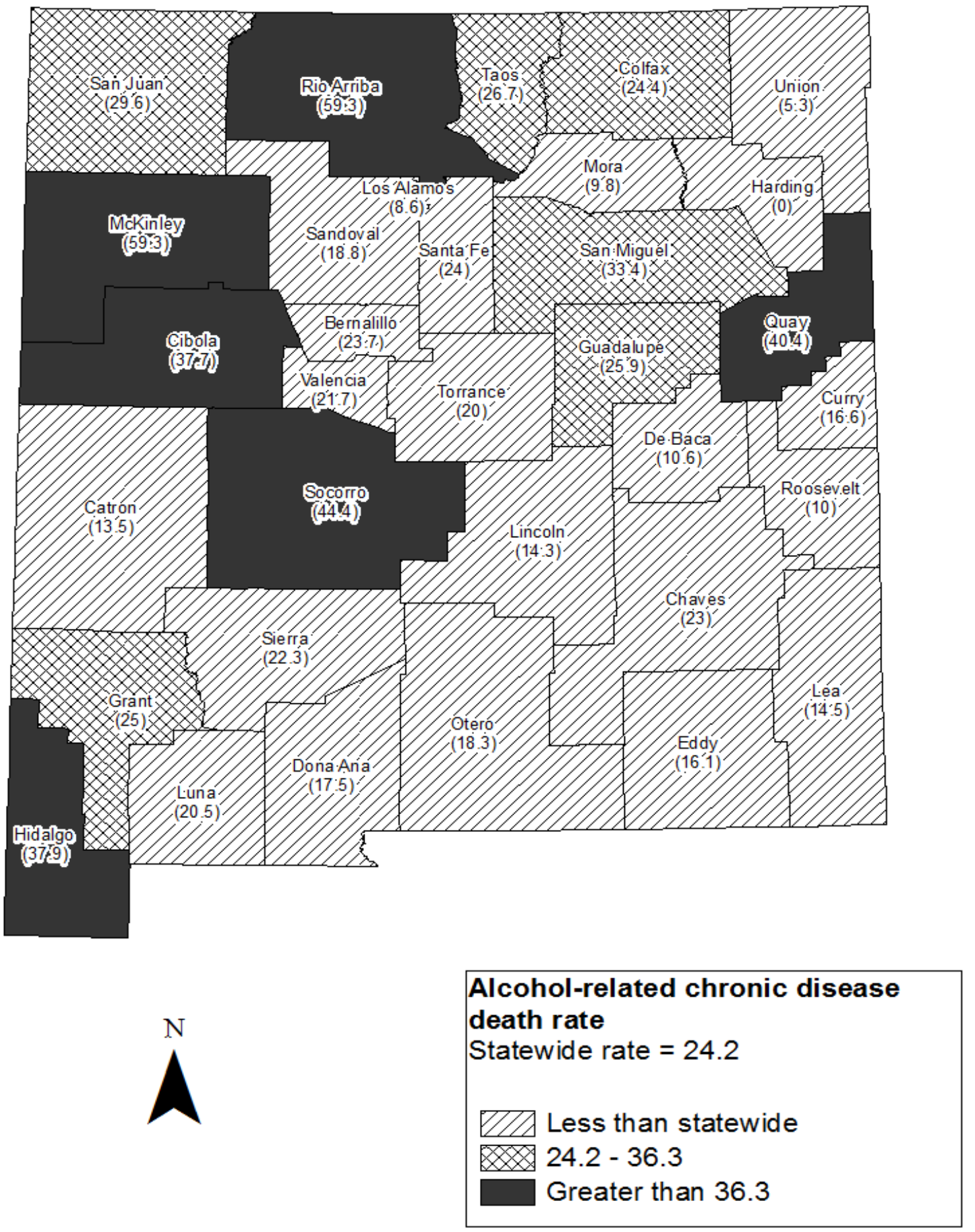


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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, 2007-2011



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

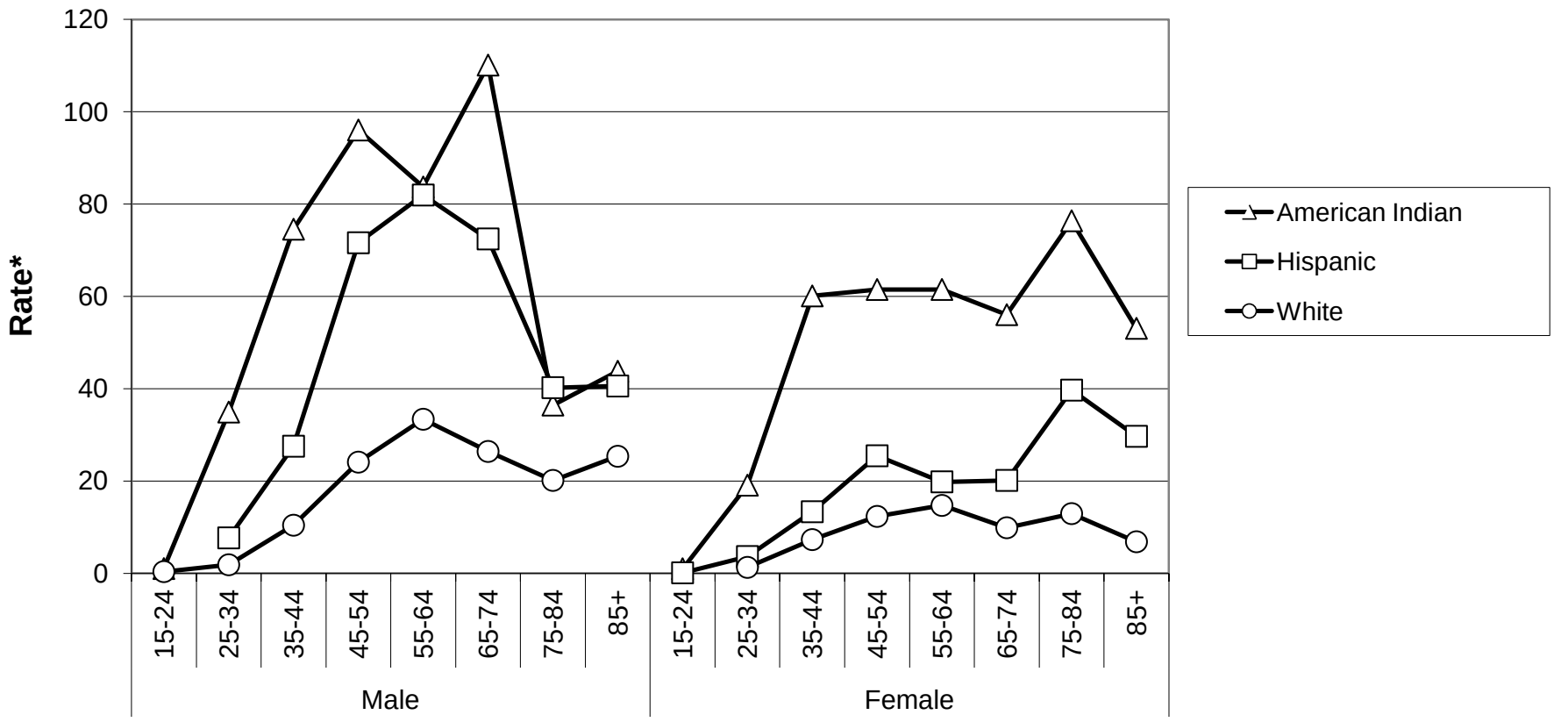
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

ALCOHOL-RELATED CHRONIC LIVER DISEASE (CLD) DEATH

Problem Statement

Alcohol-related chronic liver disease (AR-CLD) is a progressive chronic disease caused by chronic alcohol abuse. It imposes a heavy burden of morbidity and mortality in New Mexico, and is the principal driver of New Mexico's consistently high alcohol-related chronic disease death rate. Over the past 30 years, New Mexico's AR-CLD rate has trended upward, while the national rate has decreased 20%. New Mexico has had the highest AR-CLD death rate in the U.S. for most of this period, including every year from 1999 through 2007 (the most recent year for which state comparison data is available). In 1993, AR-CLD surpassed alcohol-related motor vehicle crash death as the leading cause of alcohol-related death in New Mexico. Since 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, 2007-2011



* 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, 2007-2011

		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	White	1	235	89	325	0.2	19.5	24.3	11.2
	Hispanic	0	432	110	542	0.0	42.2	59.9	29.6
	American Indian	1	170	29	200	0.4	68.7	82.7	46.9
	Black	0	5	2	8	0.0	7.4	26.1	7.5
	Asian/Pacific Islander	0	0	0	0	0.0	0.0	0.0	0.0
	Total	2	843	230	1,075	0.1	32.5	38.4	20.6
Female	White	0	123	46	170	0.0	9.9	10.4	5.7
	Hispanic	0	153	61	214	0.0	14.8	27.3	11.4
	American Indian	1	129	29	160	0.4	48.5	61.8	34.1
	Black	0	5	0	5	0.0	8.4	0.0	4.8
	Asian/Pacific Islander	0	0	1	2	0.0	0.0	16.0	2.3
	Total	1	411	137	550	0.1	15.5	18.8	10.2
Total	White	1	358	136	495	0.1	14.6	16.7	8.3
	Hispanic	0	584	170	755	0.0	28.4	42.1	20.2
	American Indian	2	300	58	360	0.4	58.2	70.6	40.2
	Black	0	10	2	13	0.0	7.8	11.8	5.9
	Asian/Pacific Islander	0	1	1	2	0.0	0.8	9.8	1.6
	Total	3	1,254	367	1,624	0.1	23.9	27.6	15.2

* 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 LIVER DISEASE (CLD) DEATH (continued)

Problem Statement (continued)

As Table 1 shows, more than 75% of AR-CLD deaths occur before age 65. Chart 1 shows the demographic distribution of AR-CLD death rates, and graphically illustrates the extremely high burden of premature mortality this disease places on the American Indian population (both male and female), as well as on the Hispanic male population. The high death rates among American Indians and Hispanic males in the age 35-64 range represent a tremendous burden in terms of years of potential life lost (YPLLs, which estimate the average years a person would have lived if he or she had not died prematurely). For the period 2007-2011, New Mexico AR-CLD decedents lost an average of 26 years of potential life (25 years among males, 28 years among females, data not shown).

Chart 2 shows that AR-CLD death rates in Rio Arriba and McKinley counties are roughly 6 times the national rate; almost half of New Mexico's counties have rates more than twice the U.S. rate; and a number of counties with rates below the state average (e.g., Bernalillo, Doña Ana, Santa Fe) still have high rates compared to the U.S., and substantial numbers of deaths. The American Indian and/or Hispanic male rates tend to drive the county rates in all counties (data not shown). It's worth noting the relatively lower rates for American Indians in San Juan County and for Hispanics in Doña Ana County (Table 2).

Table 2: Alcohol-Related CLD Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

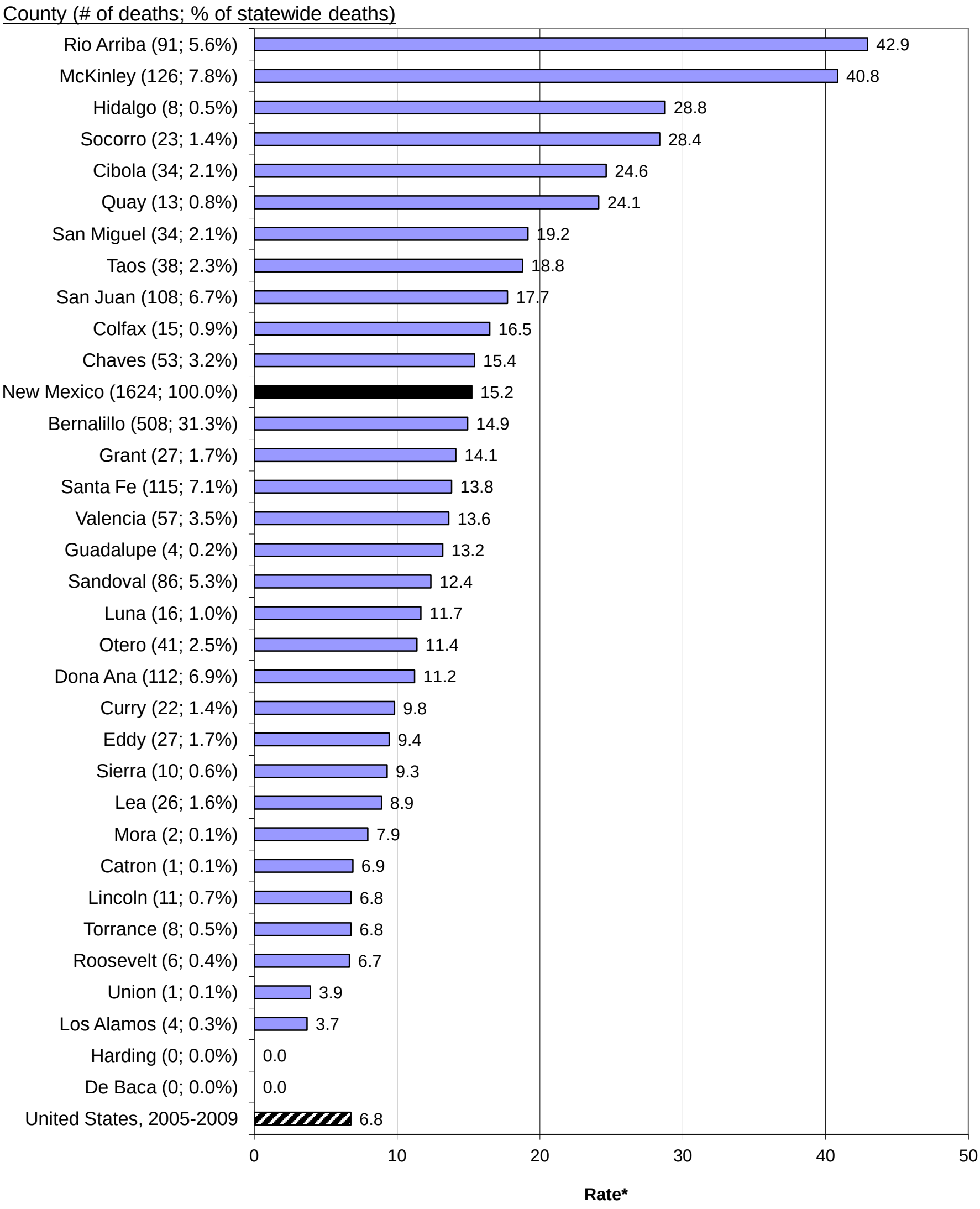
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	189	258	54	6	1	508	9.8	22.2	35.5	6.2	1.2	14.9
Catron	0	1	0	0	0	1	0.0	37	0.0	0.0	0.0	6.9
Chaves	26	24	1	1	0	53	12.6	21.6	13.8	18.9	0.0	15.4
Cibola	3	10	21	0	0	34	6.0	25.6	42.9	0.0	0.0	24.6
Colfax	6	9	0	0	0	15	10.6	27.4	0.0	0.0	0.0	16.5
Curry	9	12	1	0	0	22	5.9	23.5	27.9	0.0	0.0	9.8
De Baca	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Dona Ana	32	76	2	1	0	112	6.9	14.9	10.3	6.0	0.0	11.2
Eddy	13	14	0	0	0	27	7.9	15.9	0.0	0.0	0.0	9.4
Grant	13	14	0	0	0	27	10.0	20.4	0.0	0.0	0.0	14.1
Guadalupe	0	4	0	0	0	4	0.0	17.4	0.0	0.0	0.0	13.2
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	3	5	0	0	0	8	27.6	33	0.0	0.0	0.0	28.8
Lea	14	11	0	0	0	26	7.5	14.0	0.0	0.0	0.0	8.9
Lincoln	9	1	0	0	0	11	7.8	3.9	0.0	0.0	0.0	6.8
Los Alamos	4	0	0	0	0	4	3.9	0.0	0.0	0.0	0.0	3.7
Luna	8	6	0	1	0	16	12.0	10.9	0.0	62.9	0.0	11.7
McKinley	3	5	118	0	0	126	5.3	14.6	53.9	0.0	0.0	40.8
Mora	0	2	0	0	0	2	0.0	10.1	0.0	0.0	0.0	7.9
Otero	18	14	8	1	0	41	7.3	15.0	49.8	11.7	0.0	11.4
Quay	6	7	0	0	0	13	17.2	40.6	0.0	0.0	0.0	24.1
Rio Arriba	6	57	28	0	0	91	16.9	38.9	95.7	0.0	0.0	42.9
Roosevelt	3	3	0	0	0	6	4.8	10.5	0.0	0.0	0.0	6.7
Sandoval	25	33	28	0	0	86	5.5	20.4	31.4	0.0	0.0	12.4
San Juan	19	15	74	0	0	108	5.5	21.7	34.5	0.0	0.0	17.7
San Miguel	5	29	0	0	0	34	10.3	23.4	0.0	0.0	0.0	19.2
Santa Fe	32	75	8	0	0	115	5.9	22.6	29.7	0.0	0.0	13.8
Sierra	9	0	0	0	0	10	11.5	0.0	0.0	0.0	0.0	9.3
Socorro	3	10	10	0	0	23	6.6	25.1	102.5	0.0	0.0	28.4
Taos	9	26	3	0	0	38	7.9	27.6	22.7	0.0	0.0	18.8
Torrance	5	3	0	0	0	8	5.3	10.6	0.0	0.0	0.0	6.8
Union	0	0	1	0	0	1	0.0	0.0	205.6	0.0	0.0	3.9
Valencia	21	31	4	1	0	57	10.8	16.6	24.6	11.4	0.0	13.6
New Mexico	495	755	360	13	2	1,624	8.3	20.2	40.2	5.9	1.6	15.2

* 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 LIVER DISEASE (CLD) DEATH (continued)

Chart 2: Alcohol-Related CLD Death Rates* by County, New Mexico, 2007-2011

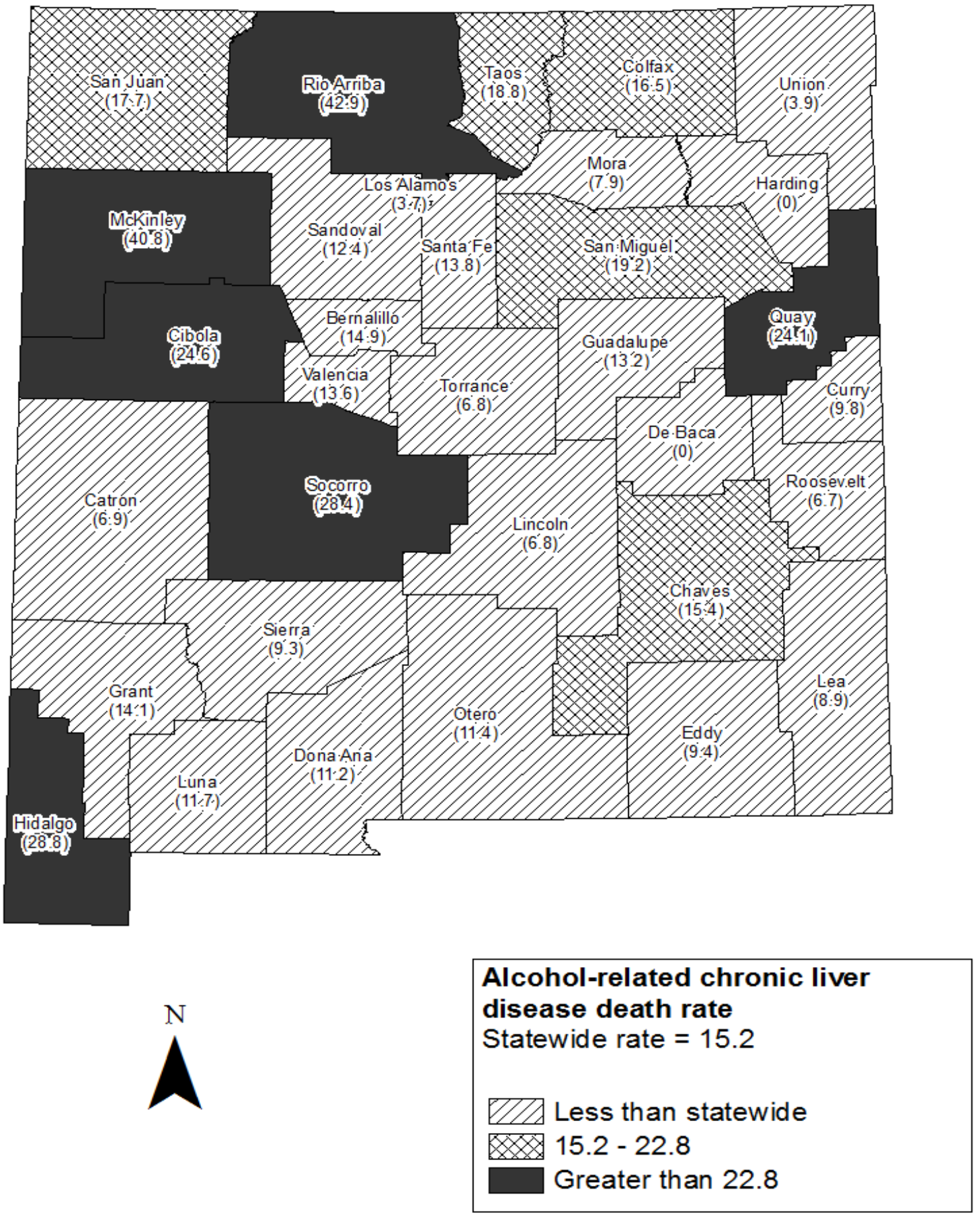


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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, 2007-2011



* 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

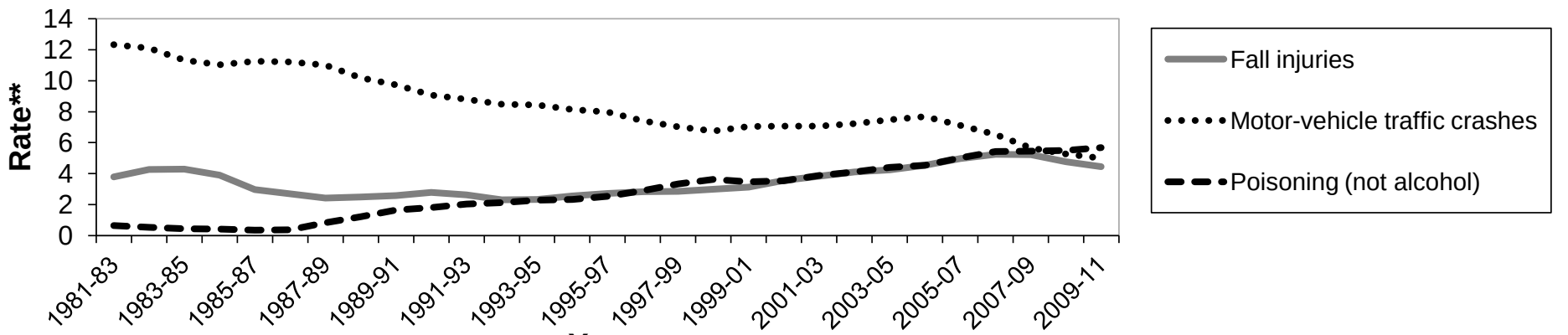
ALCOHOL-RELATED INJURY DEATH

Problem Statement

Binge drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) is a high-risk behavior associated with numerous injury outcomes, including motor vehicle fatalities, homicide, and suicide. Since 1990, New Mexico's death rate for alcohol-related (AR) injury has consistently been among the highest in the nation, ranging from 1.4 to 1.8 times the national rate. While New Mexico's alcohol-impaired motor vehicle crash fatality rates have declined more than 60% during this period, death rates from other AR injuries have increased. Chart 1 shows the substantial increase in AR fall injury and AR drug overdose death rates since the early 1990s. These increases have more than offset the decline in AR motor vehicle crash deaths, as well as slight decreases in AR homicide and suicide death rates, to drive an overall 18.3% increase in New Mexico's AR injury death during the period 1990 through 2011. During the period 2007-2011, AR drug overdose deaths replaced AR motor vehicle crash deaths as the leading cause of alcohol-related injury death in New Mexico.

Table 1 shows that total death rates from AR injuries increase with age. However, there were substantially high numbers and rates of AR injury death in the lowest age category (age 0-24), with especially high rates among American Indian and Hispanic males. Deaths in this age category represent a very large burden of premature mortality (years of potential life lost). During the period 2007-2011, New Mexico AR injury decedents (and their families and communities) lost an average of 33 years of potential life (34 years among males, 30 years among females, data not shown).

Chart 1: Top 3 Leading Causes of Alcohol-Related Injury Death (from 2007-2011), New Mexico, 1981-2011



* 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, 2007-2011

		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	White	78	453	209	740	13.0	37.6	57.0	32.1
	Hispanic	162	563	87	812	18.3	54.9	47.5	42.1
	American Indian	67	233	26	326	27.1	94.0	74.0	68.9
	Black	11	29	2	42	18.4	40.8	19.7	30.8
	Asian/Pacific Islander	2	9	2	13	5.4	21.2	45.5	20.6
	Total	321	1,287	326	1,933	17.5	49.6	54.4	40.3
Female	White	27	205	209	440	4.7	16.5	47.0	15.8
	Hispanic	34	163	70	267	4.0	15.8	31.6	13.9
	American Indian	24	65	15	104	9.6	24.5	31.6	20.3
	Black	1	7	2	10	2.3	10.9	17.3	8.8
	Asian/Pacific Islander	2	2	1	5	5.9	4.3	14.8	6.6
	Total	88	443	297	827	5.0	16.7	40.5	15.6
Total	White	105	658	418	1,181	9.0	26.9	51.5	23.7
	Hispanic	196	726	157	1,079	11.3	35.3	38.8	27.9
	American Indian	91	299	41	430	18.3	58.0	49.5	43.5
	Black	13	36	4	52	10.5	26.8	18.4	20.3
	Asian/Pacific Islander	4	12	3	19	5.6	12.0	26.7	12.4
	Total	408	1,730	622	2,760	11.4	33.0	46.8	27.7

* 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; CDC ARDI; SAES

ALCOHOL-RELATED INJURY DEATH (continued)

Problem Statement (continued)

Table 1 shows that males are more at risk of AR injury death than females, with male rates 2-4 times higher than female rates across the race/ethnic categories. American Indian males are the most at-risk, with a rate more than twice the state rate and twice the White male rate. Hispanic males are also at risk, with a rate 30% (1.3 times) higher than the rate for White males.

Table 2 shows that AR injury is a serious issue in many New Mexico counties. Rio Arriba and McKinley counties have the most serious problems, with rates more than 3 times the U.S. rate. A third of New Mexico counties have rates more than twice the U.S. rate (see Chart 2); and more than two-thirds have rates more than 1.5 times the U.S. rate. A number of counties have both high rates and a relatively heavy burden (e.g., 20 or more alcohol-related injury deaths per year). Rio Arriba County's high rate is driven by high rates in both the Hispanic and American Indian population; but most of the burden of deaths falls on the Hispanic population. In McKinley and San Juan counties, elevated rates are driven by high rates in the American Indian male population. Valencia County's high rate is driven by elevated rates in the Hispanic male population.

Table 2: Alcohol-Related Injury Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

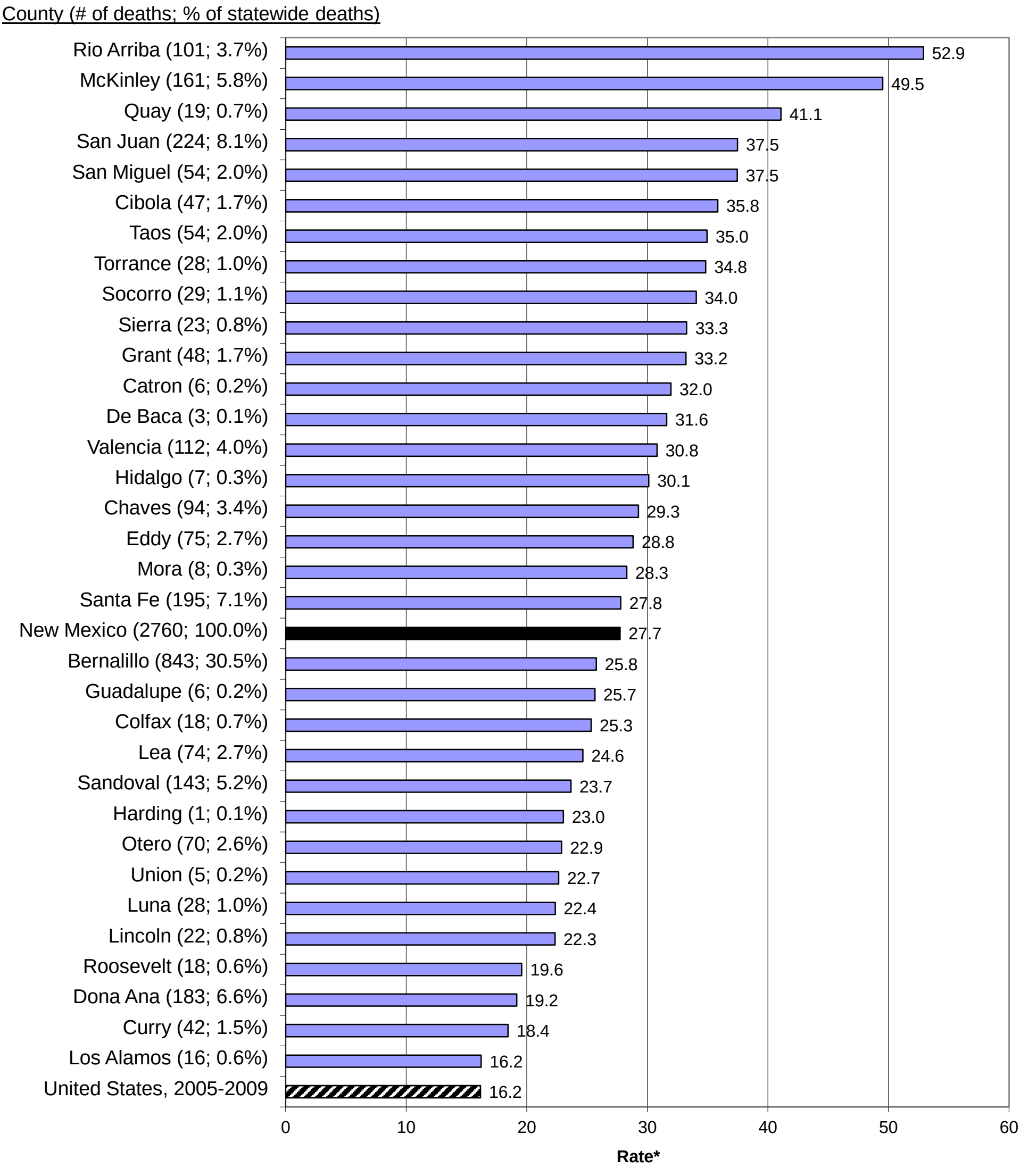
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	391	361	55	26	10	843	22.4	28.8	30.0	23.7	14.2	25.8
Catron	3	1	1	0	0	6	23.4	43	185.9	0.0	0.0	32.0
Chaves	53	39	1	1	0	94	28.3	29.7	16.4	13.0	0.0	29.3
Cibola	9	13	25	0	0	47	21.4	31.1	49.2	0.0	0.0	35.8
Colfax	9	10	0	0	0	18	19.0	32.8	0.0	0.0	0.0	25.3
Curry	24	15	0	2	1	42	16.6	22.2	0.0	15.1	9.8	18.4
De Baca	2	1	0	0	0	3	40.0	21.4	0.0	0.0	0.0	31.6
Dona Ana	89	90	1	2	1	183	23.4	16.7	3.5	7.8	16.5	19.2
Eddy	50	23	1	1	0	75	32.9	24.2	14.1	17.1	0.0	28.8
Grant	25	22	1	0	0	48	28.9	34.9	56.8	0.0	0.0	33.2
Guadalupe	1	5	0	0	0	6	21.8	30.0	0.0	0.0	0.0	25.7
Harding	1	1	0	0	0	1	30.4	13.6	0.0	0.0	0.0	23.0
Hidalgo	4	3	0	0	0	7	31.0	29	0.0	0.0	0.0	30.1
Lea	41	26	0	5	0	74	27.1	25.7	0.0	34.0	0.0	24.6
Lincoln	14	6	1	0	0	22	20.1	25.7	40.1	0.0	0.0	22.3
Los Alamos	14	2	0	0	0	16	17.0	18.5	0.0	0.0	0.0	16.2
Luna	16	12	0	0	0	28	30.8	18.8	0.0	0.0	0.0	22.4
McKinley	13	6	140	2	0	161	27.1	19.5	57.2	90.3	0.0	49.5
Mora	1	6	0	0	0	8	9.3	33.2	0.0	0.0	0.0	28.3
Otero	38	16	14	2	1	70	19.9	18.0	68.8	11.8	18.2	22.9
Quay	10	8	0	1	0	19	36.5	51.2	0.0	129.1	0.0	41.1
Rio Arriba	13	73	15	0	0	101	38.7	56.2	51.5	0.0	0.0	52.9
Roosevelt	11	7	0	0	0	18	18.1	23.2	0.0	0.0	0.0	19.6
Sandoval	73	36	30	2	2	143	21.4	20.9	33.9	12.3	21.8	23.7
San Juan	75	23	125	2	0	224	26.8	27.0	52.9	24.3	0.0	37.5
San Miguel	8	46	0	0	0	54	23.2	44.4	0.0	0.0	0.0	37.5
Santa Fe	87	99	6	2	1	195	24.9	31.7	21.7	16.7	11.9	27.8
Sierra	18	4	0	0	0	23	37.2	27.4	0.0	0.0	0.0	33.3
Socorro	8	14	6	1	0	29	21.5	34.8	65.2	144.6	0.0	34.0
Taos	18	33	3	0	1	54	28.0	41.5	25.9	0.0	31.7	35.0
Torrance	17	11	0	0	0	28	33.6	38.9	0.0	0.0	0.0	34.8
Union	3	2	0	0	0	5	16.3	25.8	0.0	0.0	0.0	22.7
Valencia	43	64	3	2	0	112	26.5	34.8	14.3	23.6	0.0	30.8
New Mexico	1,181	1,079	430	52	19	2,760	23.7	27.9	43.5	20.3	12.4	27.7

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

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

ALCOHOL-RELATED INJURY DEATH (continued)

Chart 2: Alcohol-Related Injury Death Rates* by County, New Mexico, 2007-2011

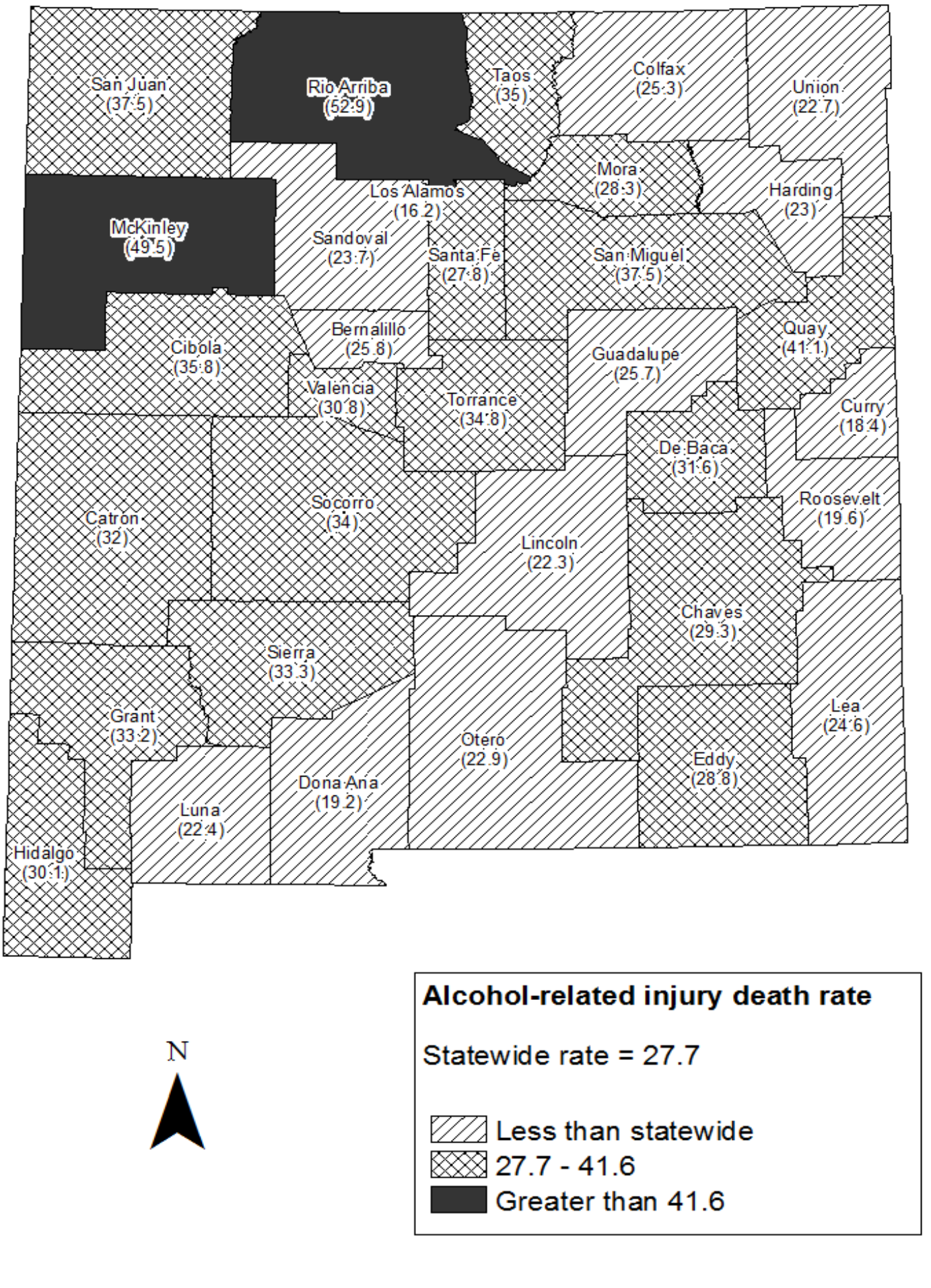


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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, 2007-2011



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

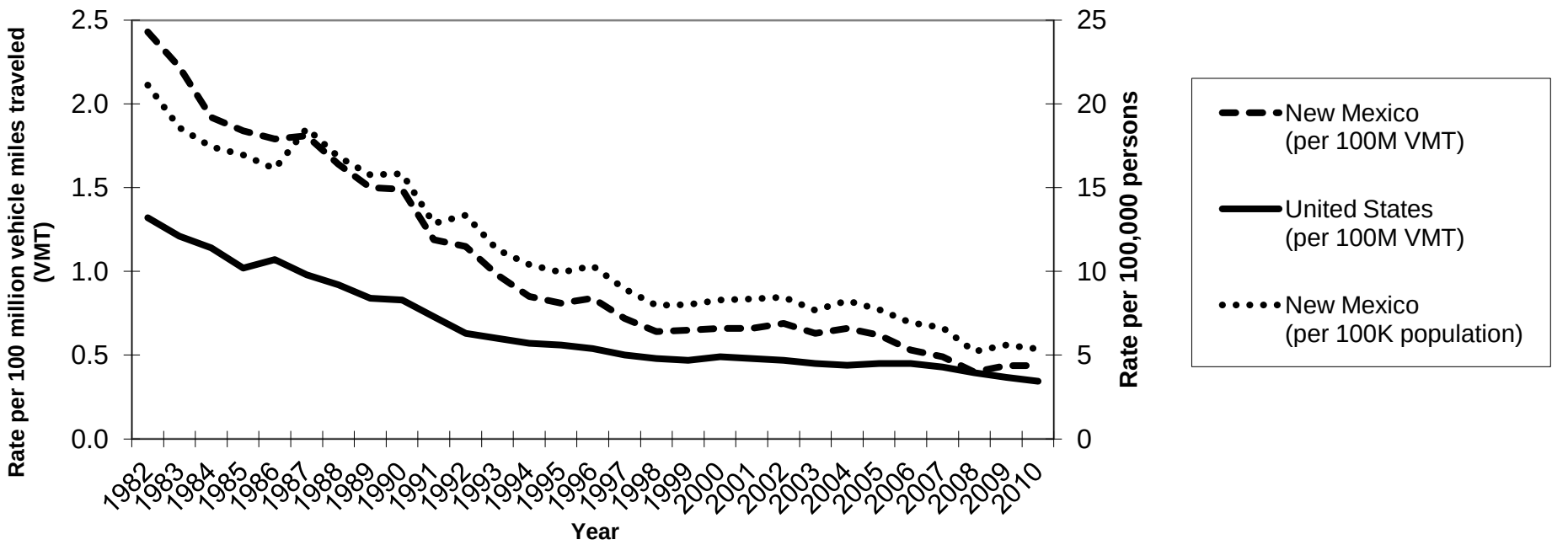
Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES

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 using a public health approach, both nationally and in New Mexico. From 1982 through 2010, in response to a wide range of policy and preventive interventions, New Mexico's alcohol-impaired motor vehicle traffic crash (AI-MVTC) fatality rate declined more dramatically than the U.S. rate, decreasing 83% and dropping New Mexico from 1st to 10th 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 2010 was one-sixth what it was in 1982. Furthermore, a comprehensive AR-MVTC prevention campaign in place from 2005-2009 was successful in reinitiating rate decreases that had been stalled since the late 1990s: from 2004 to 2010 (the most recent year for which VMT estimates are available) New Mexico's AI-MVTC fatality rate per 100 million VMT dropped 34%.

Chart 1: Alcohol-Impaired MVTC Fatality Rates*, New Mexico and United States, 1982-2010



* 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, 2007-2011

		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	White	29	95	11	134	4.8	7.8	2.9	6.3
	Hispanic	58	122	5	185	6.6	11.9	2.8	8.9
	American Indian	23	58	1	82	9.2	23.4	2.6	15.6
	Black	2	6	0	8	2.7	8.4	0.0	6.0
	Asian/Pacific Islander	0	4	0	4	0.0	8.4	0.0	5.2
	Total	112	284	17	413	6.1	11.0	2.9	8.4
Female	White	8	21	4	33	1.4	1.7	0.9	1.5
	Hispanic	14	29	2	45	1.6	2.8	0.9	2.2
	American Indian	12	19	1	32	4.7	7.1	1.8	5.6
	Black	0	1	0	2	0.0	2.1	0.0	1.4
	Asian/Pacific Islander	1	0	0	1	3.2	0.0	0.0	1.5
	Total	35	70	7	113	2.0	2.6	1.0	2.3
Total	White	37	115	15	167	3.2	4.7	1.8	3.9
	Hispanic	72	151	7	230	4.1	7.3	1.8	5.5
	American Indian	34	77	2	113	6.9	15.0	2.1	10.5
	Black	2	7	0	10	1.6	5.4	0.0	3.8
	Asian/Pacific Islander	1	4	0	6	2.2	4.2	0.0	3.1
	Total	147	354	24	526	4.1	6.8	1.8	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 is not readily available from the system of record for motor vehicle crash death (the Fatality Analysis Reporting System used for Charts 1-3), death certificate data for alcohol-related motor vehicle crash deaths were used here to provide the demographic descriptions in Tables 1 and 2. Because they are based on different data sources, the total and county-level rates reported in Tables 1 and 2 do not match the rates reported in Charts 1-3. The most pronounced feature of the demographic profile of AR-MVTC deaths is the elevated rates among both male and female American Indians. A finer breakdown by age (not shown) shows that rates are especially high -- 2 to 3.5 times the corresponding White rates -- among American Indian males and females ages 15-54. Hispanic and White male rates are highest in the age range 15-54, with a slight elevation of Hispanic rates relative to White rates. There are no meaningful differences between White and Hispanic female rates across the age range. Chart 2 shows that Rio Arriba, McKinley and San Juan counties have both substantial AI-MVTC fatalities and high rates; other counties have high rates but fewer deaths. Table 2 shows that the McKinley and San Juan county rates are driven by the American Indian rates (both male and female rates are high, data not shown); and that the Rio Arriba County rate is driven by the Hispanic rate (the male rate is high, data not shown) and the American Indian rate.

Table 2: Alcohol-Related MVTC Deaths and Rates*[1,2] by Race/Ethnicity and County, New Mexico, 2007-2011

	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	37	56	12	6	2	113	2.4	4.1	5.9	4.7	2.7	3.5
Catron	0	0	0	0	0	0	0.0	0	0.0	0.0	0.0	0.0
Chaves	8	11	0	0	0	19	5.6	7.9	0.0	0.0	0.0	6.3
Cibola	2	4	6	0	0	12	4.3	10.2	10.0	0.0	0.0	8.9
Colfax	2	1	0	0	0	3	5.7	3.3	0.0	0.0	0.0	4.5
Curry	5	6	0	1	0	12	4.0	7.3	0.0	3.2	0.0	4.9
De Baca	1	0	0	0	0	1	17.9	0.0	0.0	0.0	0.0	13.7
Dona Ana	9	20	0	0	0	29	2.7	3.1	0.0	0.0	0.0	2.8
Eddy	11	7	0	0	0	18	8.5	6.8	0.0	0.0	0.0	7.2
Grant	3	6	0	0	0	9	5.1	9.9	0.0	0.0	0.0	7.4
Guadalupe	1	1	0	0	0	1	18.3	5.0	0.0	0.0	0.0	6.3
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	0	1	0	0	0	1	0.0	8	0.0	0.0	0.0	4.3
Lea	13	10	0	0	0	23	9.1	7.8	0.0	0.0	0.0	7.6
Lincoln	3	1	0	0	0	4	5.7	4.4	0.0	0.0	0.0	5.1
Los Alamos	1	0	0	0	0	1	1.1	0.0	0.0	0.0	0.0	1.4
Luna	2	5	0	0	0	7	5.2	5.8	0.0	0.0	0.0	5.4
McKinley	3	0	33	1	0	38	7.2	0.0	12.6	57.8	0.0	11.2
Mora	0	1	0	0	0	1	0.0	5.7	0.0	0.0	0.0	4.6
Otero	4	2	3	0	0	10	2.9	2.4	14.2	0.0	0.0	3.5
Quay	4	1	0	0	0	5	18.5	5.7	0.0	0.0	0.0	11.8
Rio Arriba	2	17	5	0	0	24	7.3	13.3	16.3	0.0	0.0	13.1
Roosevelt	2	3	0	0	0	5	3.0	10.6	0.0	0.0	0.0	5.6
Sandoval	9	6	10	0	1	26	2.9	3.1	10.6	0.0	11.7	4.4
San Juan	13	5	37	0	0	55	5.1	5.6	14.5	0.0	0.0	9.1
San Miguel	2	10	0	0	0	12	6.0	10.0	0.0	0.0	0.0	8.9
Santa Fe	14	15	2	0	0	33	4.8	4.7	7.0	0.0	0.0	4.9
Sierra	2	1	0	0	0	3	8.0	5.6	0.0	0.0	0.0	7.2
Socorro	2	4	1	0	0	8	5.2	11.7	13.2	0.0	0.0	9.3
Taos	4	11	2	0	0	16	6.9	14.1	16.9	0.0	0.0	11.7
Torrance	4	3	0	0	0	7	9.2	9.8	0.0	0.0	0.0	8.8
Union	0	1	0	0	0	2	0.0	12.8	0.0	0.0	0.0	9.9
Valencia	5	20	1	0	0	26	3.1	10.5	6.9	0.0	0.0	7.2
New Mexico	167	230	113	10	6	526	3.9	5.5	10.5	3.8	3.1	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)

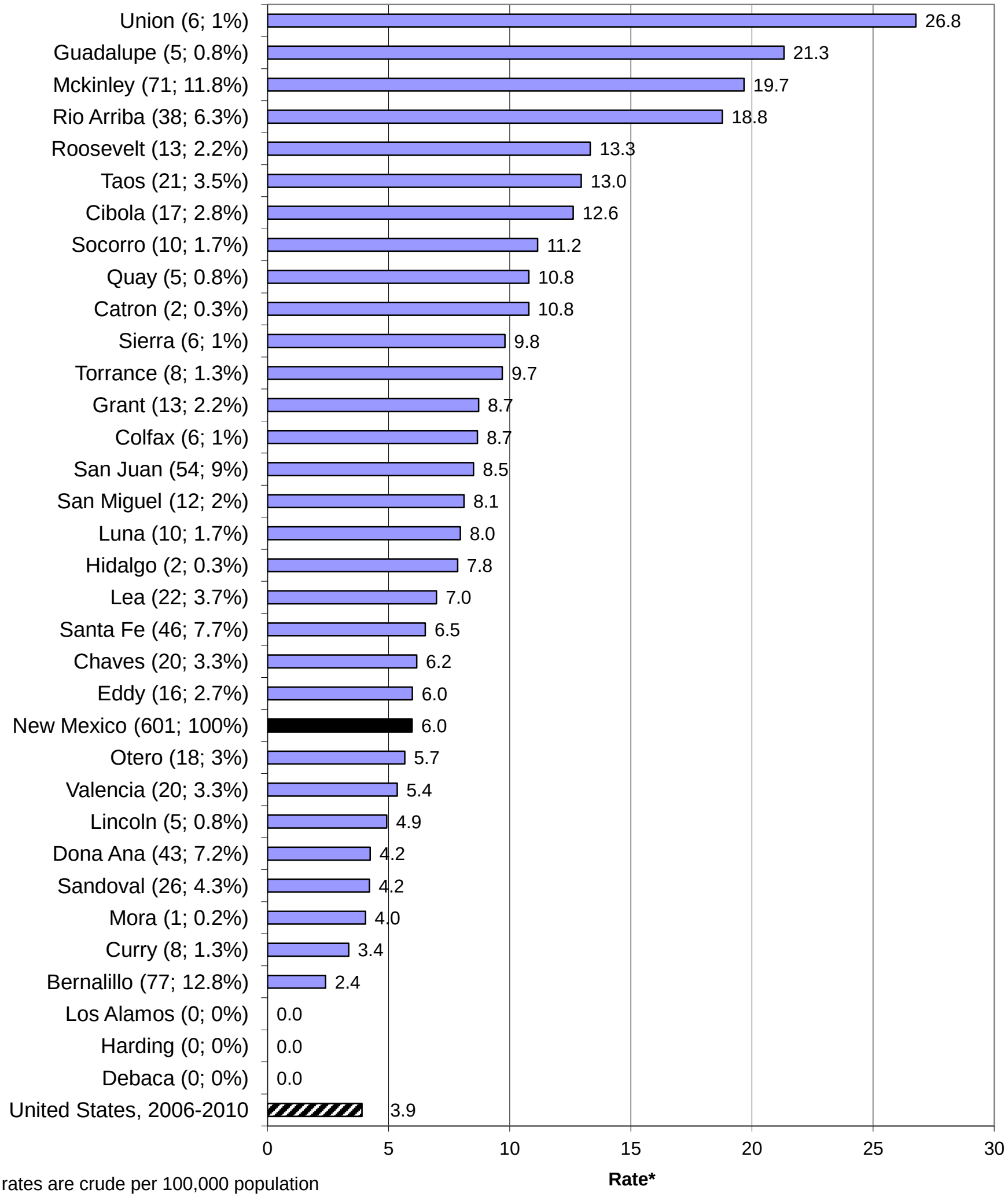
[2] See footnote 2 for Table 1

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, 2006-2010

County (# of deaths; % of statewide deaths)



* All rates are crude per 100,000 population

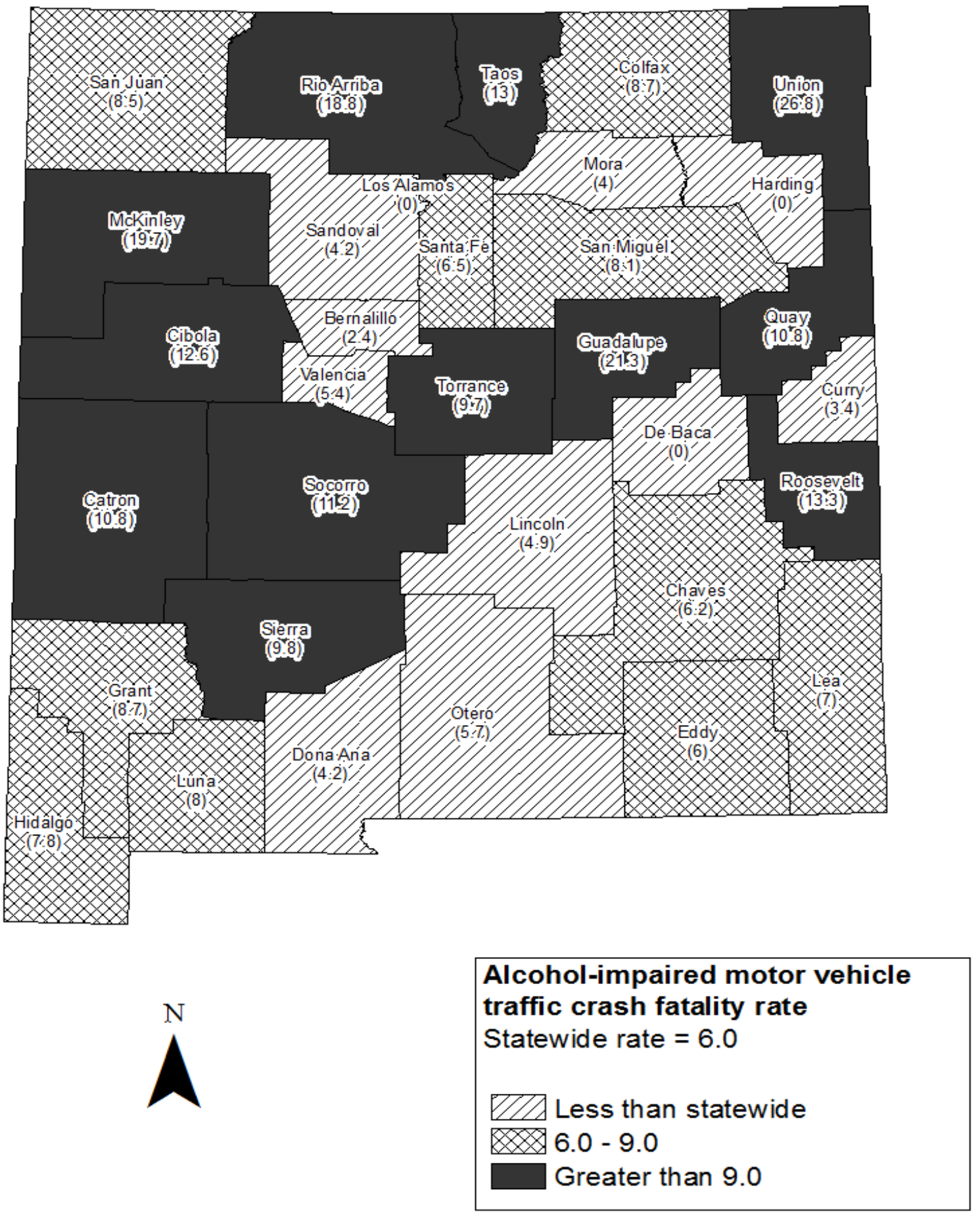
[1] Alcohol-impaired MVTC deaths are from FARS (highest driver BAC >=0.08); NM population from GPS, US population from NCHS

[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, 2006-2010



* 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)

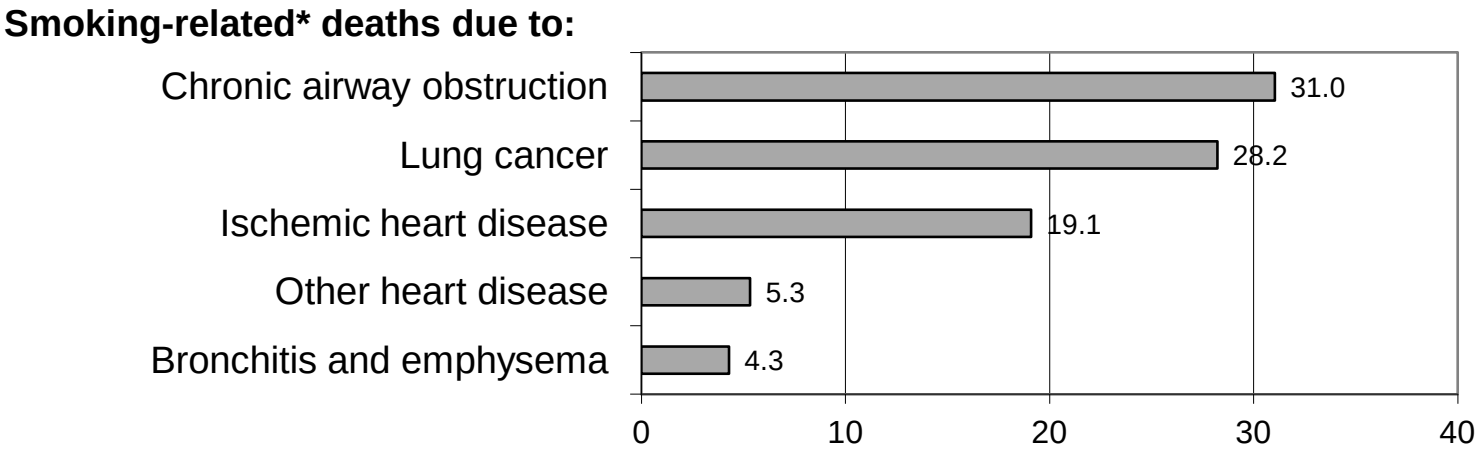
SMOKING-RELATED DEATH

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. New Mexico's smoking-related death rate is actually lower than the national rate. Historically, New Mexico's rates for smoking-related causes such as lung cancer have been among the lowest in the nation. Nonetheless, a comparison of New Mexico's smoking-related death rates to its alcohol and drug-related death rates shows that the burden of death associated with smoking is still considerably greater than the burden associated with these other substances. This speaks to the public health importance of smoking prevention efforts, even in a state with low rates relative to the rest of the nation.

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

Chart 1: Leading Causes of Smoking-Related Death, New Mexico, 2007-2011



* 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, 2007-2011

		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	White	0	1,156	3,331	4,488	0.0	95.9	907.4	157.2
	Hispanic	0	588	1,233	1,821	0.0	57.4	672.9	127.2
	American Indian	0	100	136	236	0.0	40.2	393.9	80.5
	Black	0	53	86	140	0.0	75.7	938.8	177.7
	Asian/Pacific Islander	0	14	18	33	0.0	32.6	382.4	77.4
	Total	0	1,912	4,805	6,717	0.0	73.8	802.3	143.4
Female	White	0	590	2,468	3,058	0.0	47.5	555.8	84.0
	Hispanic	0	259	789	1,049	0.0	25.2	355.8	59.6
	American Indian	0	49	76	125	0.0	18.4	160.6	31.5
	Black	0	21	35	56	0.0	34.5	309.4	58.8
	Asian/Pacific Islander	0	8	17	25	0.0	15.2	223.2	41.5
	Total	0	928	3,385	4,313	0.0	35.0	462.5	72.4
Total	White	0	1,747	5,799	7,546	0.0	71.3	714.9	116.1
	Hispanic	0	847	2,022	2,870	0.0	41.2	499.2	89.5
	American Indian	0	149	212	361	0.0	28.9	259.2	51.6
	Black	0	75	121	196	0.0	56.5	593.4	111.5
	Asian/Pacific Islander	0	22	35	57	0.0	23.1	284.8	55.4
	Total	0	2,840	8,190	11,030	0.0	54.1	615.4	103.5

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

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

SMOKING-RELATED DEATH (continued)

Problem Statement (continued)

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

Table 2 and Chart 2 show that the counties with the highest rates and relatively heavy burdens of smoking-related death (i.e., 20 or more deaths a year) are Sierra, Quay, Torrance, Chaves, and Lea counties. The high rates in most of these counties (and in the state overall) are driven by high rates among Whites. However, there are notably elevated rates among Hispanics in Quay and Curry counties; and a substantial burden of smoking-related death among Hispanics in several other counties (e.g., Bernalillo, Dona Ana, Santa Fe). The high rates of smoking-related death among Blacks in Curry and Lea counties are also notable. The smoking-related death rates among the American Indian and Asian/Pacific Islander population are relatively low.

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

Table 2: Smoking-Related Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

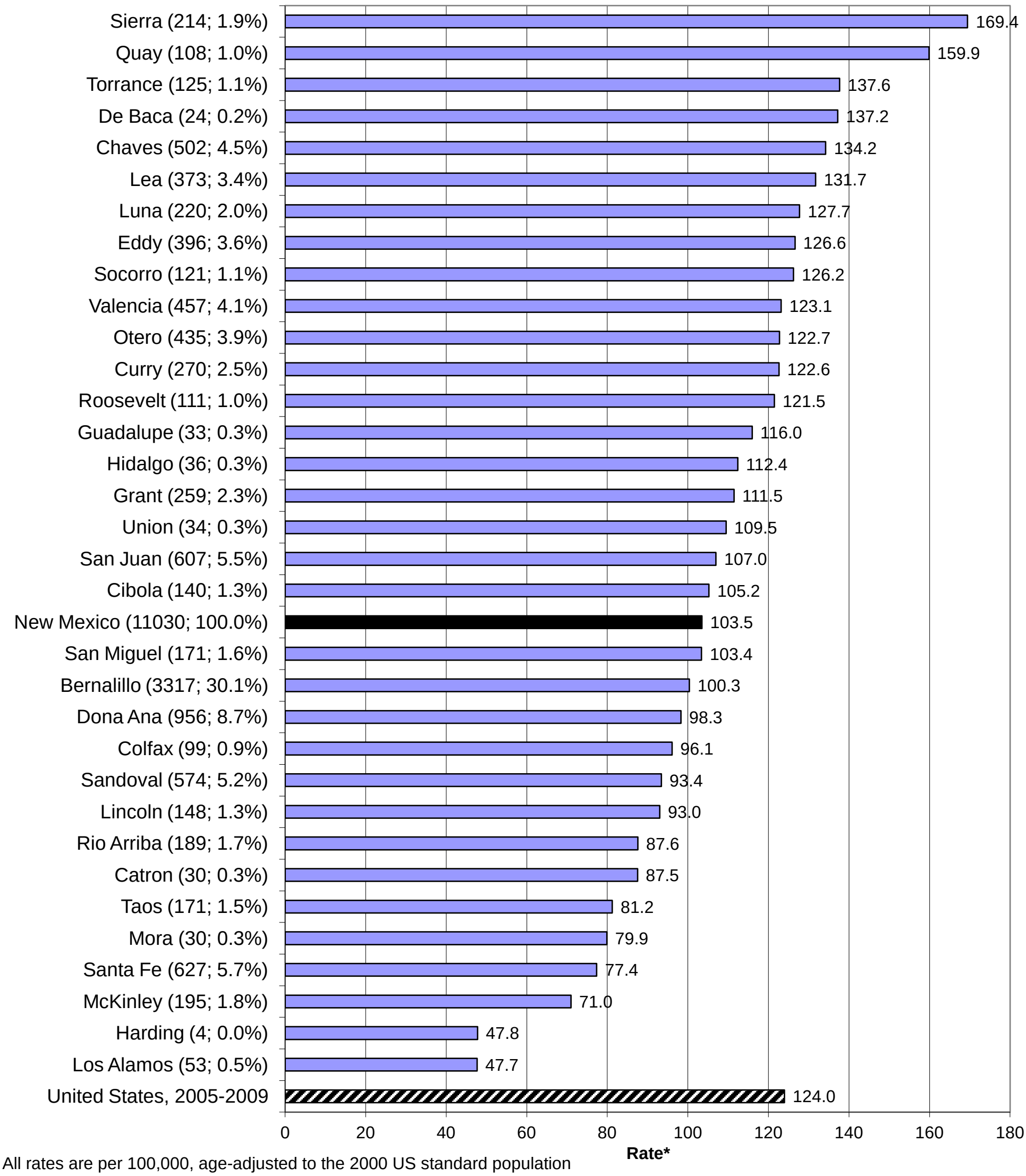
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	2,262	882	53	88	31	3,317	106.3	91.4	51.2	120.1	60.1	100.3
Catron	24	4	1	1	0	30	85.8	79	0.0	299.8	0.0	87.5
Chaves	412	84	1	5	0	502	150.4	100.3	14.7	71.1	0.0	134.2
Cibola	78	35	24	1	2	140	148.2	96.7	58.2	70.7	992.2	105.2
Colfax	63	36	0	0	0	99	96.2	100.8	0.0	0.0	0.0	96.1
Curry	200	50	2	16	2	270	120.5	146.2	77.1	135.8	64.7	122.6
De Baca	18	6	0	0	0	24	153.9	119.1	0.0	0.0	0.0	137.2
Dona Ana	606	331	3	13	3	956	121.2	76.7	15.1	82.0	47.5	98.3
Eddy	314	72	1	8	1	396	138.7	96.8	23.9	151.6	36.0	126.6
Grant	183	75	0	0	0	259	129.4	87.2	0.0	0.0	0.0	111.5
Guadalupe	10	22	0	1	0	33	161.4	102.1	0.0	847.1	0.0	116.0
Harding	3	2	0	0	0	4	49.6	42.2	0.0	0.0	0.0	47.8
Hidalgo	22	13	0	0	0	36	125.6	104	0.0	0.0	0.0	112.4
Lea	298	55	2	17	1	373	140.2	111.7	51.2	132.0	102.7	131.7
Lincoln	124	23	1	0	0	148	95.5	84.1	21.4	0.0	0.0	93.0
Los Alamos	48	4	0	0	0	53	48.0	52.9	0.0	0.0	0.0	47.7
Luna	167	49	0	2	0	220	150.2	110.8	0.0	111.8	0.0	127.7
McKinley	65	21	104	4	1	195	116.6	63.6	57.0	153.5	28.5	71.0
Mora	8	22	0	0	0	30	71.0	82.3	0.0	0.0	0.0	79.9
Otero	347	64	9	13	1	435	138.0	84.0	74.5	119.1	17.6	122.7
Quay	83	24	0	2	0	108	161.6	163.2	0.0	461.5	0.0	159.9
Rio Arriba	42	130	15	1	2	189	93.0	87.2	70.0	58.6	267.9	87.6
Roosevelt	98	11	1	1	0	111	138.9	62.4	225.3	164.9	0.0	121.5
Sandoval	409	108	41	12	4	574	99.5	90.4	62.1	107.5	69.3	93.4
San Juan	458	63	81	3	2	607	132.9	113.7	49.3	65.3	67.9	107.0
San Miguel	49	121	1	0	1	171	109.2	103.8	16.1	0.0	84.2	103.4
Santa Fe	381	236	5	2	3	627	79.7	77.6	25.0	46.4	44.0	77.4
Sierra	194	18	1	1	0	214	186.9	98.6	33.9	350.4	0.0	169.4
Socorro	78	40	3	0	0	121	163.8	95.4	47.0	0.0	0.0	126.2
Taos	69	97	4	0	0	171	86.1	86.1	30.2	0.0	0.0	81.2
Torrance	100	22	2	0	1	125	162.7	88.8	52.4	0.0	92.7	137.6
Union	29	6	0	0	0	34	127.6	68.6	0.0	0.0	0.0	109.5
Valencia	301	144	5	5	2	457	147.9	99.8	42.6	98.5	71.8	123.1
New Mexico	7,546	2,870	361	196	57	11,030	116.1	89.5	51.6	111.5	55.4	103.5

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

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

SMOKING-RELATED DEATH (continued)

Chart 2: Smoking-Related Death Rates* by County, New Mexico, 2007-2011

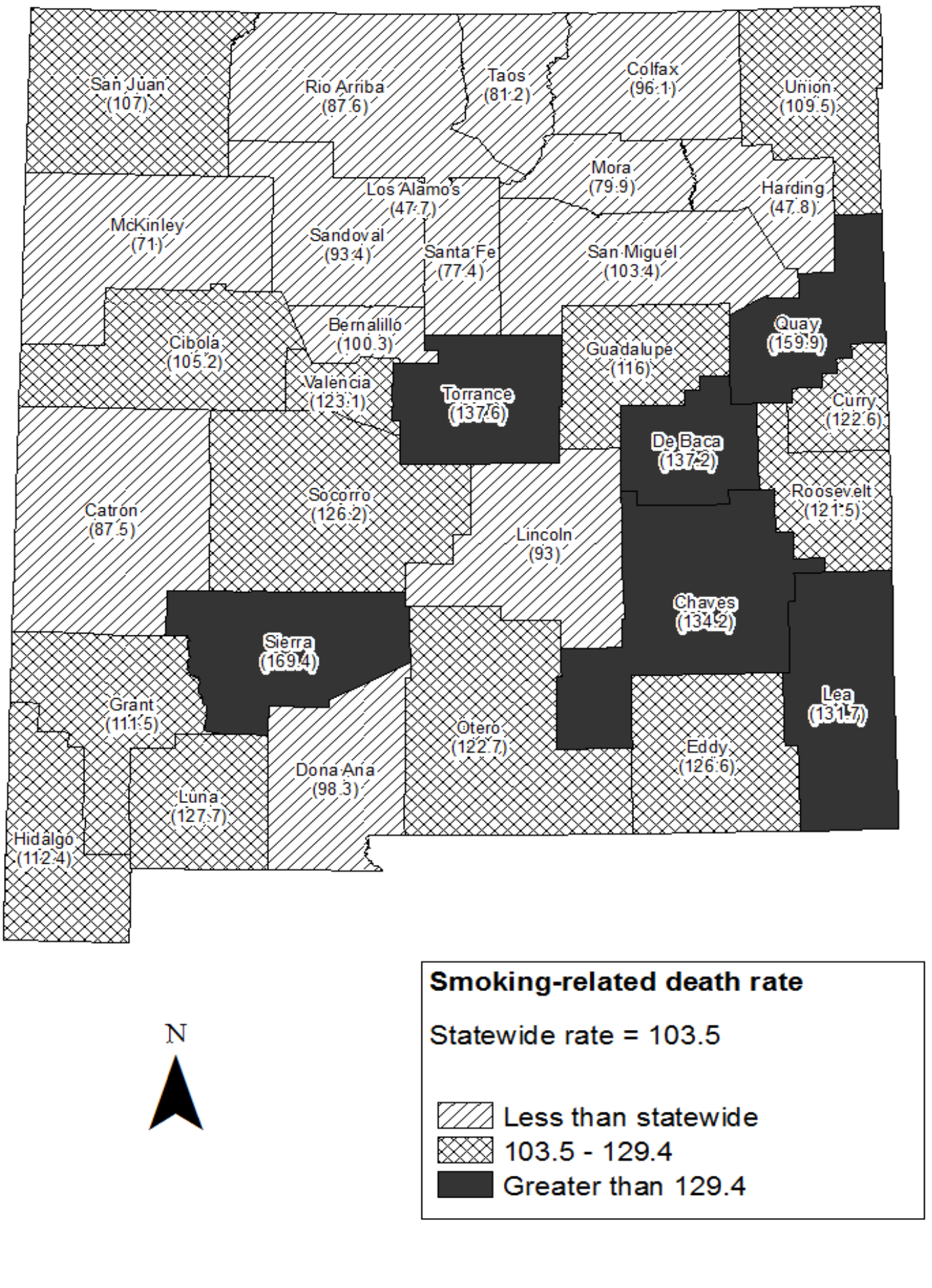


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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, 2007-2011



* 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

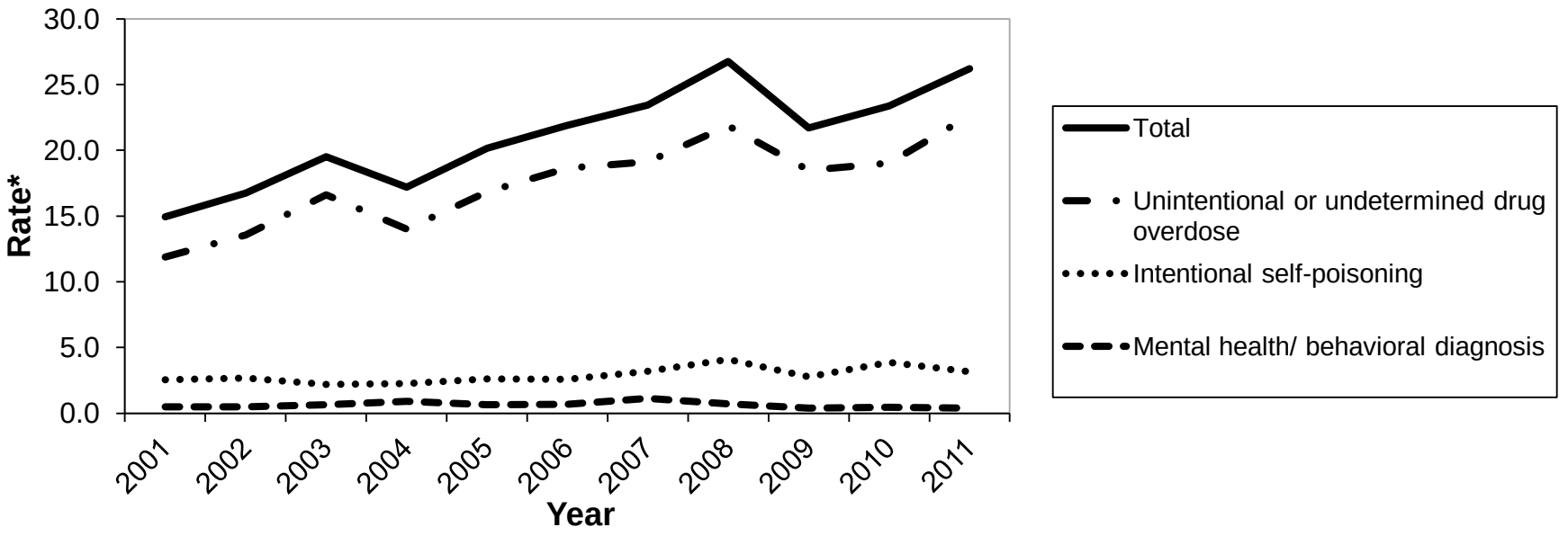
DRUG-INDUCED DEATH

Problem Statement

In 2009, New Mexico had the highest drug-induced death rate in the nation and the consequences of drug use continue to burden New Mexico communities. Drug use can result in overdose death, and is also associated with other societal problems including crime, violence, homelessness, loss of productivity and spread of blood-borne disease such as HIV and hepatitis. Unintentional drug overdose is the largest subset of drug-induced death, accounting for 80-85% of drug-induced deaths in New Mexico (Chart 1). The other substantial cause of drug-induced death is suicide, or intentional self-poisoning, which accounts for 10-15% of all drug-induced death in New Mexico. Poisoning has been the leading cause of unintentional injury in New Mexico since 2007, surpassing motor vehicle crash, largely as a result of increased unintentional drug overdose deaths associated with prescription drug use..

During 2007-2011, 51% of unintentional drug overdose deaths were caused primarily by illicit drugs, while 49% were caused primarily by prescription drugs. Medical examiner data indicate that the most common drugs causing unintentional overdose death for the period covered in this report were prescription opioids (i.e., methadone, oxycodone, morphine; 50%), heroin (33%), tranquilizers/muscle relaxants (27%), cocaine (25%), and antidepressants (16%) (not mutually exclusive). The median age of unintentional drug overdose decedents was 43.2 years. In New Mexico and nationally, overdose death from prescription opioids has become an issue of enormous concern as these potent drugs are widely available. Interventions are currently being formulated, assessed and implemented in New Mexico and in communities across the country.

Chart 1: Drug-Induced Death Rates* by Cause Category, New Mexico, 2001-2011



* 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-Induced Deaths and Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2007-2011

		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	White	61	478	29	568	10.1	39.7	7.9	25.8
	Hispanic	95	690	12	797	10.7	67.4	6.5	40.2
	American Indian	17	60	0	77	6.9	24.2	0.0	15.2
	Black	4	29	0	33	6.4	41.1	0.0	23.5
	Asian/Pacific Islander	1	7	0	8	2.9	15.9	0.0	9.5
	Total	178	1,264	41	1,483	9.7	48.8	6.8	30.3
Female	White	25	440	49	514	4.4	35.4	11.0	21.9
	Hispanic	31	299	10	340	3.6	29.0	4.5	17.2
	American Indian	6	39	0	45	2.4	14.6	0.0	8.5
	Black	2	14	0	16	3.3	22.6	0.0	13.4
	Asian/Pacific Islander	0	3	0	3	0.0	5.7	0.0	3.3
	Total	64	795	59	918	3.6	30.0	8.1	18.3
Total	White	86	918	78	1,082	7.4	37.5	9.6	23.9
	Hispanic	126	989	22	1,137	7.2	48.1	5.4	28.7
	American Indian	23	99	0	122	4.6	19.2	0.0	11.8
	Black	6	43	0	49	4.9	32.4	0.0	18.7
	Asian/Pacific Islander	1	10	0	11	1.5	10.3	0.0	6.2
	Total	242	2,059	100	2,401	6.7	39.2	7.5	24.3

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

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

DRUG-INDUCED DEATH (continued)

Problem Statement (continued)

Table 1 shows that Hispanics had the highest drug-induced death rate during 2007-2011. Hispanics had higher unintentional drug overdose death rates than Whites across the age range (Chart 4). The rates of drug-induced death (Table 1) and unintentional drug overdose death (Table 3) among males were roughly two times that of females. Among females, drug overdose death from prescription drugs was more common than from illicit drugs across the age range (Chart 4). 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 drug-induced death rate (62.0 deaths per 100,000; Chart 2) and unintentional drug overdose death rate (58.4 deaths per 100,000; Table 3) among all New Mexico counties during 2007-2011. However, the problem of drug overdose is by no means limited to Rio Arriba County. As expected, Bernalillo County had the largest number of unintentional drug overdose deaths (Table 3); and more than a third of New Mexico counties had drug-induced death rates more than twice the U.S. rate (Chart 2). The death rate from prescription drugs exceeded the death rate from illicit drugs in more than half (19 of 33) New Mexico counties (Table 3).

Table 2: Drug-Induced Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

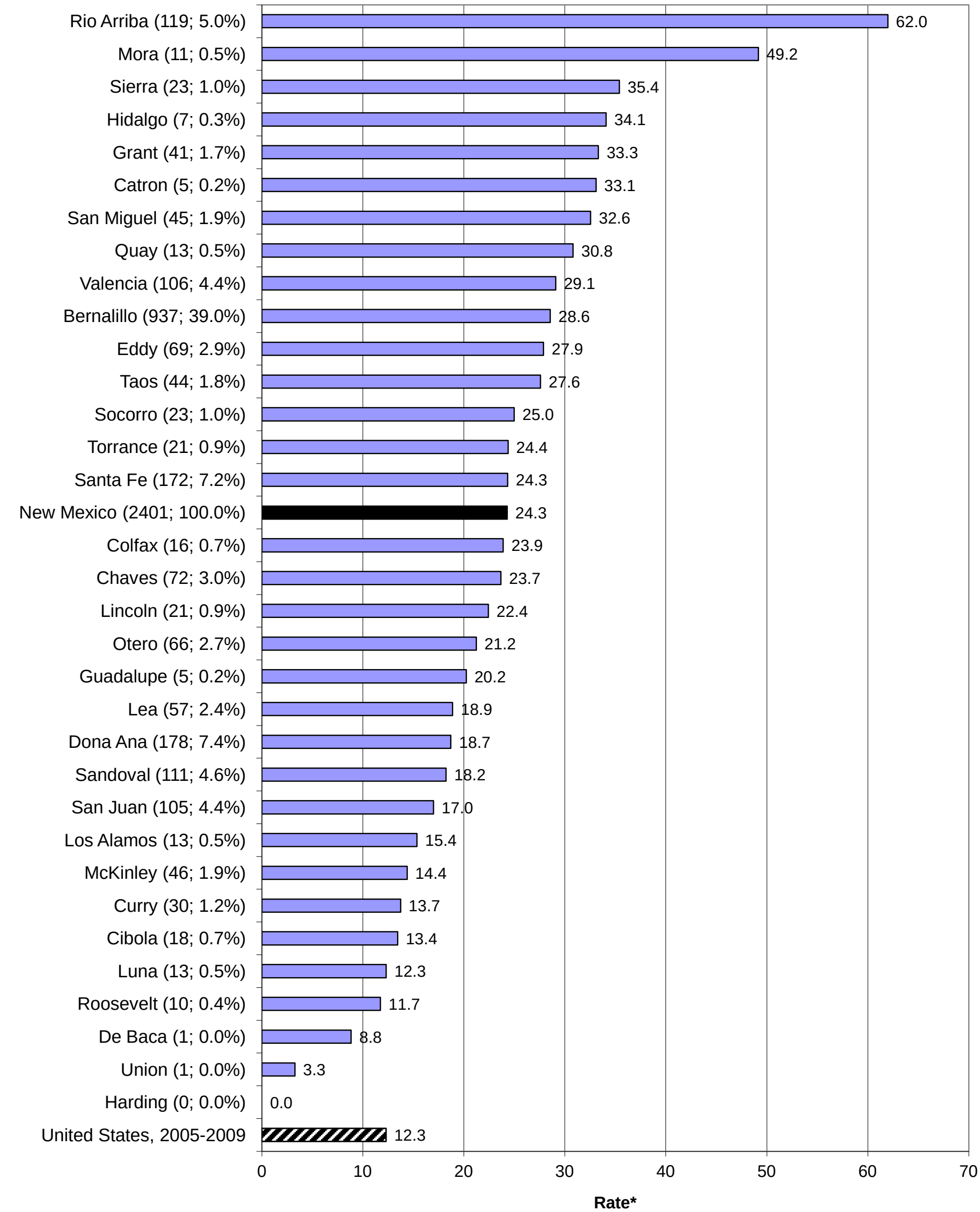
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	412	467	30	22	6	937	25.9	35.5	14.8	20.2	6.2	28.6
Catron	3	2	0	0	0	5	21.1	92	0.0	0.0	0.0	33.1
Chaves	36	34	1	1	0	72	24.1	26.2	17.0	16.8	0.0	23.7
Cibola	6	9	3	0	0	18	14.4	20.8	5.7	0.0	0.0	13.4
Colfax	5	11	0	0	0	16	13.9	38.0	0.0	0.0	0.0	23.9
Curry	19	9	0	2	0	30	14.2	13.6	0.0	13.9	0.0	13.7
De Baca	1	0	0	0	0	1	13.6	0.0	0.0	0.0	0.0	8.8
Dona Ana	87	86	2	3	0	178	27.1	15.2	8.6	11.2	0.0	18.7
Eddy	47	21	1	0	0	69	34.3	21.2	16.4	0.0	0.0	27.9
Grant	22	18	0	1	0	41	39.4	29.8	0.0	34.2	0.0	33.3
Guadalupe	0	5	0	0	0	5	0.0	27.0	0.0	0.0	0.0	20.2
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	4	2	0	1	0	7	48.6	19	0.0	810.7	0.0	34.1
Lea	38	12	0	6	1	57	25.0	9.3	0.0	38.8	54.5	18.9
Lincoln	17	4	0	0	0	21	25.7	17.2	0.0	0.0	0.0	22.4
Los Alamos	12	1	0	0	0	13	18.3	11.1	0.0	0.0	0.0	15.4
Luna	11	2	0	0	0	13	33.2	2.8	0.0	0.0	0.0	12.3
McKinley	9	6	30	1	0	46	16.9	21.4	12.2	36.5	0.0	14.4
Mora	1	10	0	0	0	11	10.5	59.9	0.0	0.0	0.0	49.2
Otero	36	22	6	2	0	66	20.1	24.1	27.2	16.5	0.0	21.2
Quay	4	9	0	0	0	13	13.9	57.3	0.0	0.0	0.0	30.8
Rio Arriba	18	91	8	2	0	119	55.6	70.4	25.4	124.8	0.0	62.0
Roosevelt	5	4	0	1	0	10	11.9	12.2	0.0	19.0	0.0	11.7
Sandoval	56	45	8	1	1	111	18.2	24.1	8.8	6.9	9.8	18.2
San Juan	68	15	20	2	0	105	23.9	17.3	8.0	29.3	0.0	17.0
San Miguel	7	38	0	0	0	45	28.0	39.3	0.0	0.0	0.0	32.6
Santa Fe	61	103	6	2	0	172	18.5	32.4	20.7	15.8	0.0	24.3
Sierra	19	4	0	0	0	23	45.5	22.0	0.0	0.0	0.0	35.4
Socorro	6	15	2	0	0	23	12.2	37.3	22.6	0.0	0.0	25.0
Taos	16	25	1	0	2	44	21.8	33.3	8.7	0.0	121.8	27.6
Torrance	16	5	0	0	0	21	30.3	17.6	0.0	0.0	0.0	24.4
Union	0	1	0	0	0	1	0.0	11.2	0.0	0.0	0.0	3.3
Valencia	38	61	4	2	1	106	24.3	32.6	21.9	27.7	29.0	29.1
New Mexico	1,082	1,137	122	49	11	2,401	23.9	28.7	11.8	18.7	6.2	24.3

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

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

DRUG-INDUCED DEATH (continued)

Chart 2: Drug-Induced Death Rates* by County, New Mexico, 2007-2011

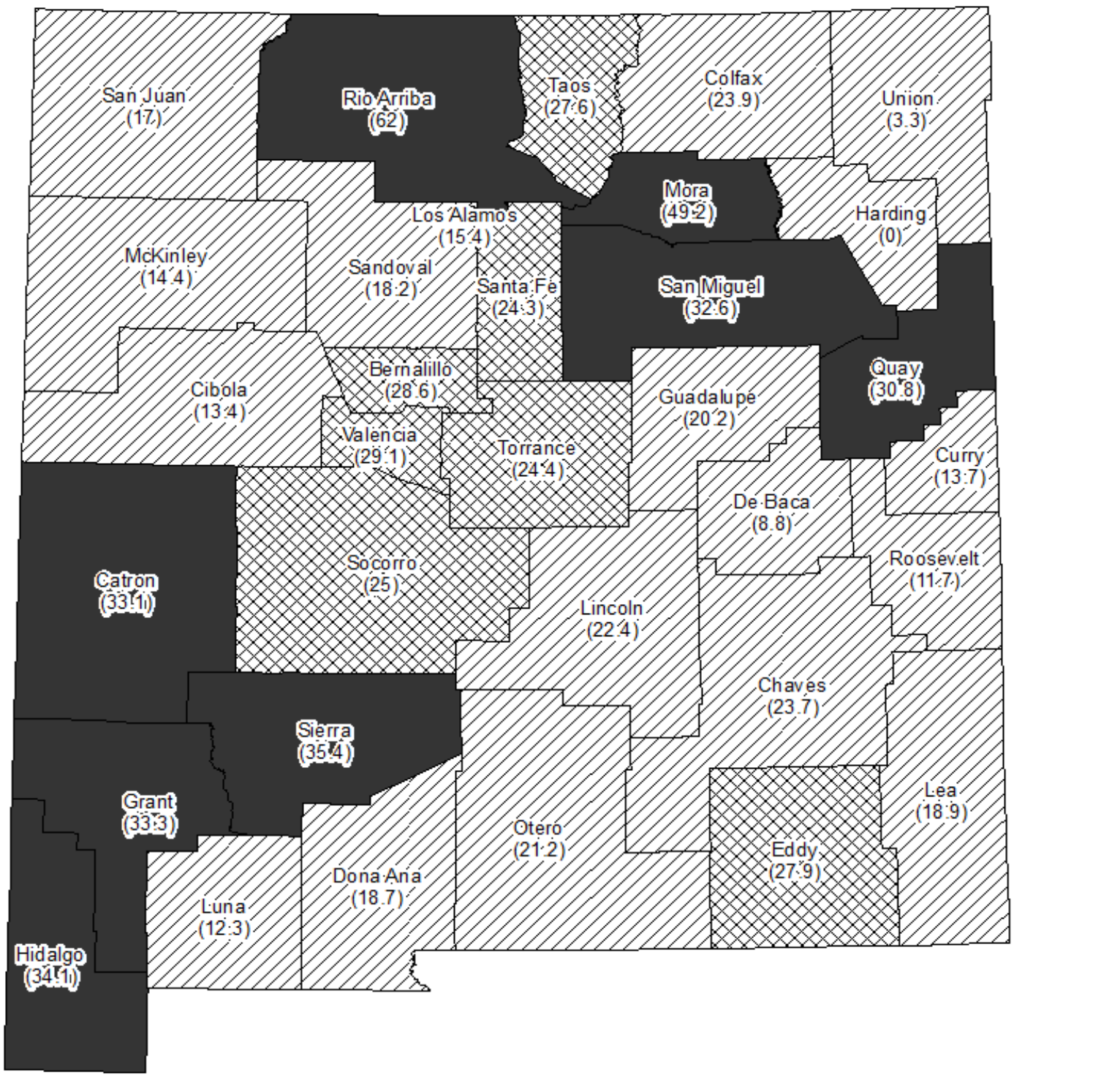


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

DRUG-INDUCED DEATH (continued)

Chart 3: Drug-Induced Death Rates* by County, New Mexico, 2007-2011

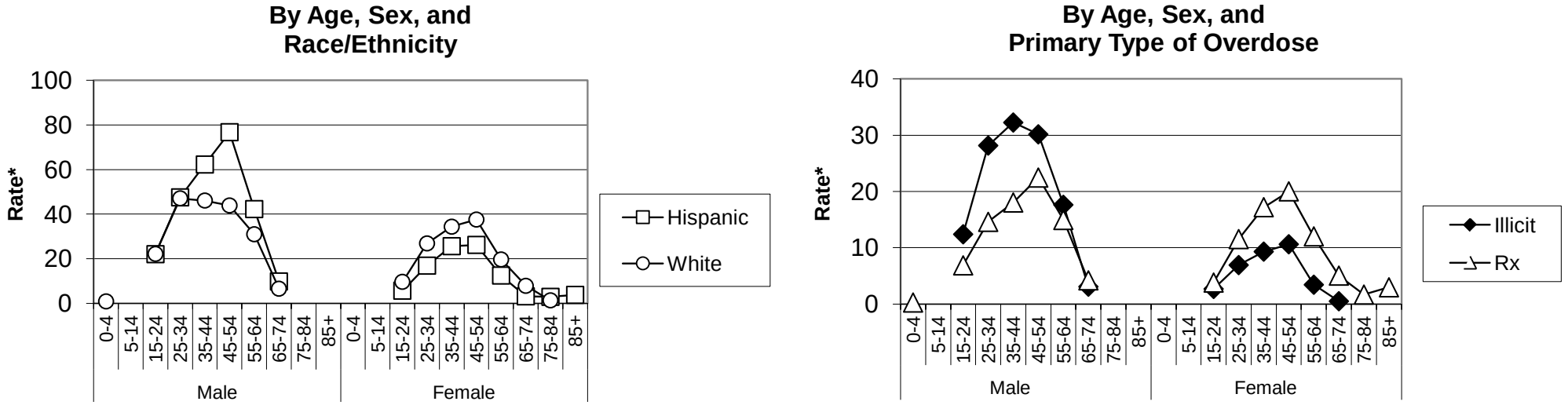


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

DRUG-INDUCED DEATH (continued)

Chart 4: Unintentional Drug Overdose Death Rates* by Selected Characteristics, New Mexico, 2007-2011



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

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

Table 3: Uninintentional Drug Overdose Deaths and Rates*, New Mexico, 2007-2011

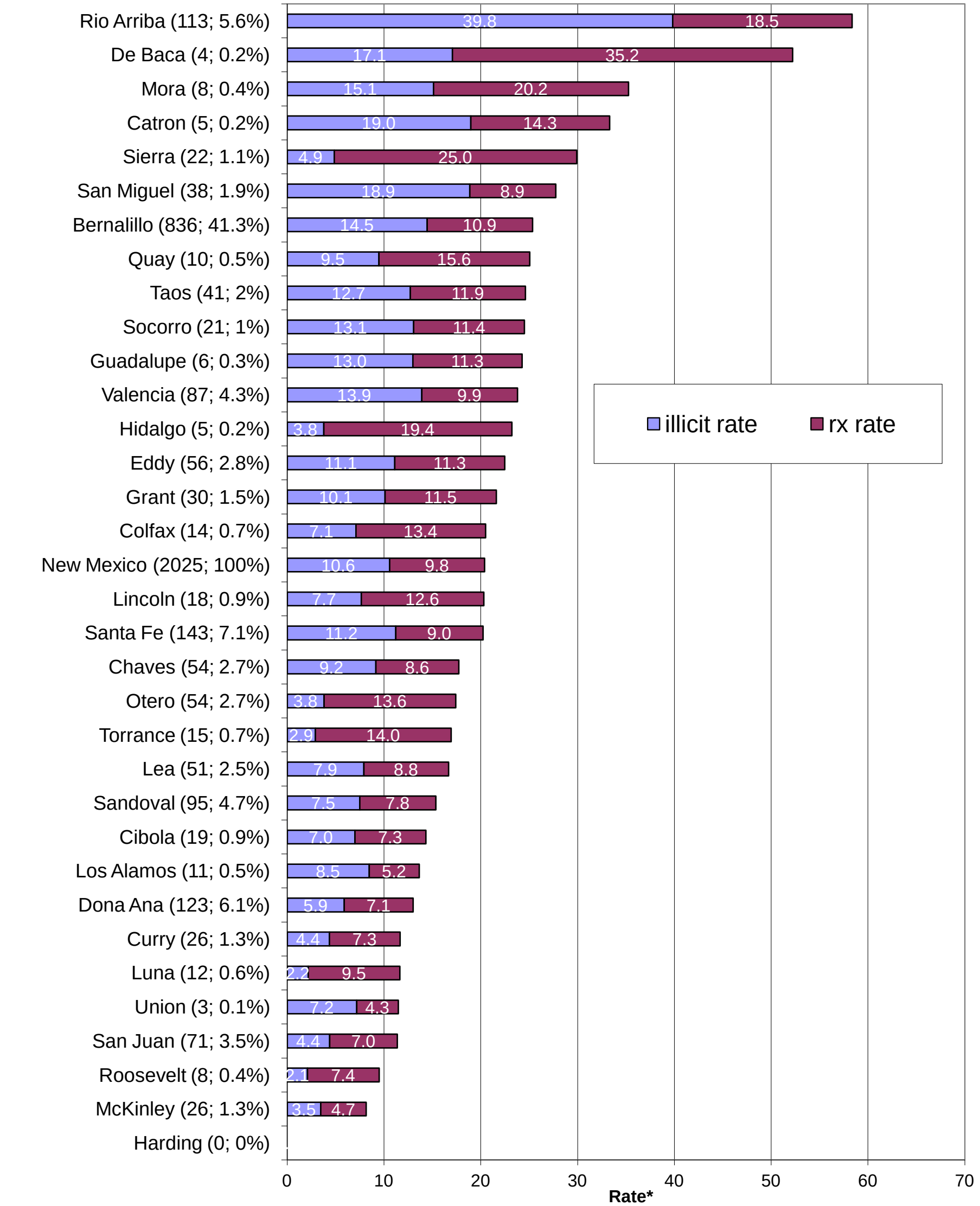
	Deaths					Rates*				
	Sex		Primary Type			Sex		Primary Type		
County	Male	Female	Illicit	Rx	Total	Male	Female	Illicit	Rx	Total
Bernalillo	572	264	473	363	836	35.2	15.7	14.5	10.9	25.4
Catron	5	0	3	2	5	63.9	0	19.0	14.3	33.3
Chaves	28	26	28	26	54	18.0	17.5	9.2	8.6	17.7
Cibola	14	5	9	10	19	20.4	7.6	7.0	7.3	14.3
Colfax	7	7	4	10	14	20.6	19.8	7.1	13.4	20.5
Curry	18	8	10	16	26	15.9	7.3	4.4	7.3	11.7
De Baca	2	2	1	3	4	52.0	51.3	17.1	35.2	52.2
Dona Ana	80	43	56	67	123	17.2	9.1	5.9	7.1	13.0
Eddy	32	24	28	28	56	24.2	20.6	11.1	11.3	22.5
Grant	17	13	14	16	30	25.8	17.7	10.1	11.5	21.6
Guadalupe	5	1	3	3	6	35.0	8.1	13.0	11.3	24.3
Harding	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0
Hidalgo	1	4	1	4	5	10.8	35	3.8	19.4	23.2
Lea	28	23	24	27	51	17.9	15.4	7.9	8.8	16.7
Lincoln	11	7	6	12	18	26.1	14.7	7.7	12.6	20.3
Los Alamos	6	5	6	5	11	16.6	10.5	8.5	5.2	13.6
Luna	5	7	3	9	12	8.7	14.4	2.2	9.5	11.6
McKinley	20	6	11	15	26	13.2	3.3	3.5	4.7	8.2
Mora	6	2	3	5	8	53.9	16.5	15.1	20.2	35.3
Otero	32	22	11	43	54	20.3	14.5	3.8	13.6	17.4
Quay	6	4	4	6	10	27.9	22.7	9.5	15.6	25.1
Rio Arriba	86	27	77	36	113	89.0	27.1	39.8	18.5	58.4
Roosevelt	7	1	2	6	8	15.6	3.1	2.1	7.4	9.5
Sandoval	59	36	44	51	95	19.6	11.2	7.5	7.8	15.3
San Juan	39	32	27	44	71	12.5	10.2	4.4	7.0	11.4
San Miguel	26	12	25	13	38	38.5	17.0	18.9	8.9	27.7
Santa Fe	102	41	76	67	143	29.1	11.4	11.2	9.0	20.2
Sierra	13	9	3	19	22	36.5	23.6	4.9	25.0	29.9
Socorro	15	6	11	10	21	34.8	14.0	13.1	11.4	24.5
Taos	27	14	20	21	41	35.2	13.5	12.7	11.9	24.6
Torrance	8	7	2	13	15	17.5	16.6	2.9	14.0	16.9
Union	3	0	2	1	3	19.2	0.0	7.2	4.3	11.5
Valencia	56	31	51	36	87	30.3	17.2	13.9	9.9	23.8
Total	1,336	689	1,038	987	2,025	27.1	13.7	10.6	9.8	20.4

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

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

DRUG-INDUCED DEATH (continued)

Chart 5: Unintentional Drug Overdose Death Rates* by County and Drug Type, New Mexico, 2007-2011



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

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

SUICIDE

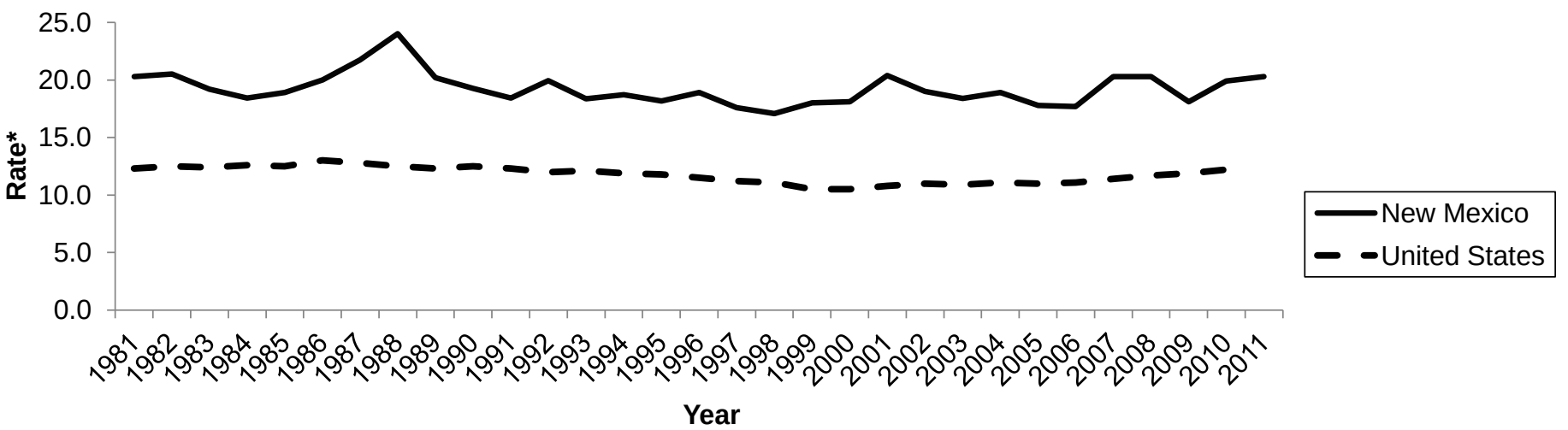
Problem Statement

Suicide is a serious and persistent public health problem in New Mexico. As shown in Chart 1, over the period 1981 through 2011 New Mexico's suicide rate has consistently been 1.5 to 1.9 times the U.S. rate. New Mexico has ranked among the top 5 states for all but two of those years. While the U.S. rate declined 15% between 1981 and 2000, it increased thereafter for an overall 1% decline from 1981 to 2010. The New Mexico rate followed a similar pattern. In New Mexico in 2010, suicide was the second leading cause of death (after unintentional injuries) for persons aged 15-44; and the seventh leading cause of death overall.

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

Chart 3 shows that six counties (Grant, Rio Arriba, Otero, McKinley, Taos, and San Juan) had substantial numbers of suicides (more than five per year) and rates in 2007-2011 that were more than twice the most recent available U.S. rates. A number of smaller counties also had very high rates. Suicide remains a problem throughout the state.

Chart 1: Suicide Rates*, New Mexico and United States, 1981-2011



* 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, 2007-2011

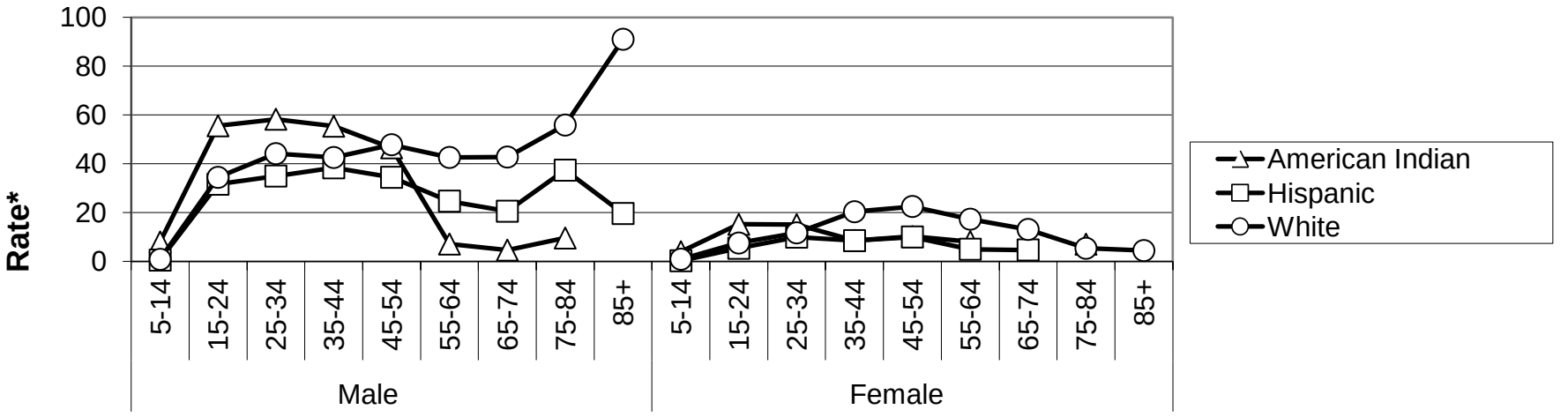
		Deaths				Rates*			
Sex	Race/Ethnicity	Ages 0-24	Ages 25-64	Ages 65+	All Ages	Ages 0-24	Ages 25-64	Ages 65+	All Ages*
Male	White	92	536	190	818	15.3	44.5	51.7	34.7
	Hispanic	111	347	47	505	12.5	33.9	25.7	25.6
	American Indian	61	114	2	177	24.8	46.0	5.8	33.4
	Black	11	10	2	23	17.6	14.2	21.8	16.6
	Asian/Pacific Islander	3	8	0	11	8.8	18.2	0.0	12.8
	Total	278	1,015	241	1,534	15.2	39.2	40.2	31.1
Female	White	20	230	41	291	3.6	18.5	9.2	11.8
	Hispanic	19	89	6	114	2.2	8.6	2.7	5.6
	American Indian	19	29	1	49	7.6	10.9	2.1	8.5
	Black	2	1	1	4	3.3	1.6	8.9	2.9
	Asian/Pacific Islander	1	5	0	6	3.1	9.5	0.0	6.7
	Total	61	354	49	464	3.5	13.3	6.7	9.0
Total	White	112	766	231	1,109	9.6	31.3	28.5	22.9
	Hispanic	130	436	53	619	7.5	21.2	13.1	15.5
	American Indian	80	143	3	226	16.2	27.8	3.7	20.7
	Black	13	11	3	27	10.6	8.3	14.7	9.7
	Asian/Pacific Islander	4	13	0	17	6.1	13.4	0.0	9.6
	Total	339	1,369	290	1,998	9.4	26.1	21.8	19.7

* 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; CDC ARDI; SAES

SUICIDE (continued)

Chart 2: Suicide Rates* by Age, Sex, and Race/Ethnicity, New Mexico, 2007-2011



* Age-specific rates per 100,000

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

Table 2: Suicide Deaths and Rates* by Race/Ethnicity and County, New Mexico, 2007-2011

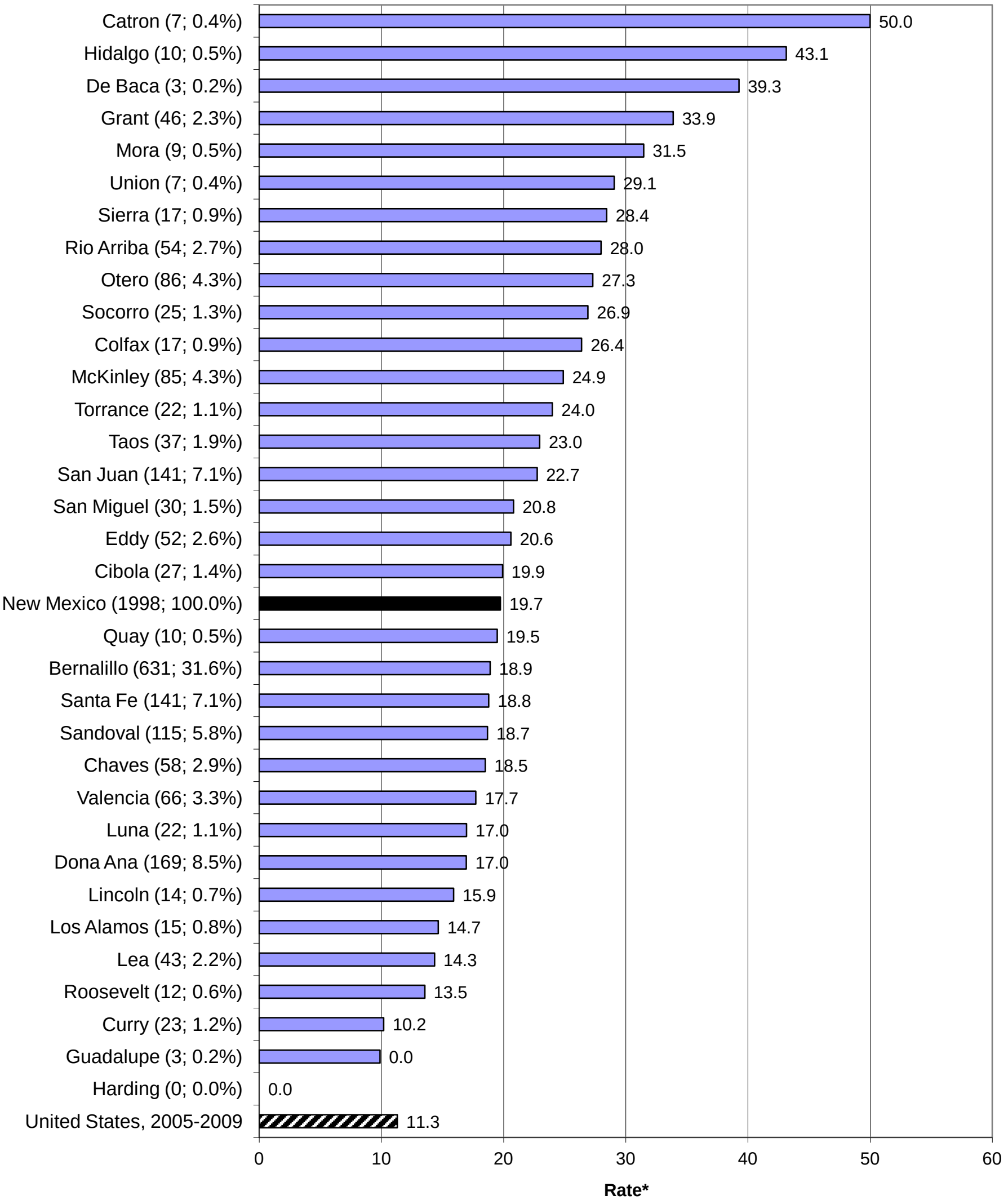
	Deaths						Rates*					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	365	214	33	11	8	631	21.6	16.2	16.2	8.3	8.4	18.9
Catron	6	1	0	0	0	7	56.4	38	0.0	0.0	0.0	50.0
Chaves	38	17	3	0	0	58	24.1	12.9	49.8	0.0	0.0	18.5
Cibola	4	3	20	0	0	27	8.0	7.1	35.6	0.0	0.0	19.9
Colfax	5	12	0	0	0	17	11.3	43.1	0.0	0.0	0.0	26.4
Curry	14	8	0	1	0	23	10.6	11.0	0.0	10.1	0.0	10.2
De Baca	2	1	0	0	0	3	36.7	44.5	0.0	0.0	0.0	39.3
Dona Ana	97	67	1	3	1	169	26.3	11.5	4.4	10.9	8.5	17.0
Eddy	41	7	3	1	0	52	27.5	8.0	61.3	14.9	0.0	20.6
Grant	27	18	0	1	0	46	32.0	33.0	0.0	34.2	0.0	33.9
Guadalupe	1	2	0	0	0	3	15.1	9.1	0.0	0.0	0.0	9.9
Harding	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0
Hidalgo	3	7	0	0	0	10	32.0	55	0.0	0.0	0.0	43.1
Lea	27	14	1	1	0	43	17.8	10.6	27.8	4.8	0.0	14.3
Lincoln	8	5	1	0	0	14	11.4	21.8	38.8	0.0	0.0	15.9
Los Alamos	12	3	0	0	0	15	14.7	28.1	0.0	0.0	0.0	14.7
Luna	15	7	0	0	0	22	24.4	10.0	0.0	0.0	0.0	17.0
McKinley	9	4	71	1	0	85	18.5	12.6	25.8	35.8	0.0	24.9
Mora	0	8	1	0	0	9	0.0	39.1	186.0	0.0	0.0	31.5
Otero	58	11	13	1	3	86	30.6	12.2	59.1	5.8	52.1	27.3
Quay	6	3	0	1	0	10	16.2	18.4	0.0	278.3	0.0	19.5
Rio Arriba	9	32	13	0	0	54	33.4	24.2	39.5	0.0	0.0	28.0
Roosevelt	10	2	0	0	0	12	17.2	12.3	0.0	0.0	0.0	13.5
Sandoval	75	24	12	3	1	115	22.7	13.1	12.8	23.1	9.3	18.7
San Juan	72	19	48	1	1	141	26.8	19.4	18.0	11.2	25.5	22.7
San Miguel	11	19	0	0	0	30	31.1	19.6	0.0	0.0	0.0	20.8
Santa Fe	86	51	2	2	0	141	23.1	15.8	7.2	19.6	0.0	18.8
Sierra	14	2	1	0	0	17	31.5	15.5	92.9	0.0	0.0	28.4
Socorro	18	6	1	0	0	25	47.7	13.0	5.5	0.0	0.0	26.9
Taos	20	16	0	0	1	37	29.0	21.0	0.0	0.0	60.9	23.0
Torrance	15	7	0	0	0	22	29.7	21.7	0.0	0.0	0.0	24.0
Union	5	2	0	0	0	7	30.1	26.9	0.0	0.0	0.0	29.1
Valencia	35	27	2	0	2	66	22.1	14.5	10.6	0.0	44.2	17.7
New Mexico	1,109	619	226	27	17	1,998	22.9	15.5	20.7	9.7	9.6	19.7

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

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

SUICIDE (continued)

Chart 3: Suicide Rates* by County, New Mexico, 2007-2011

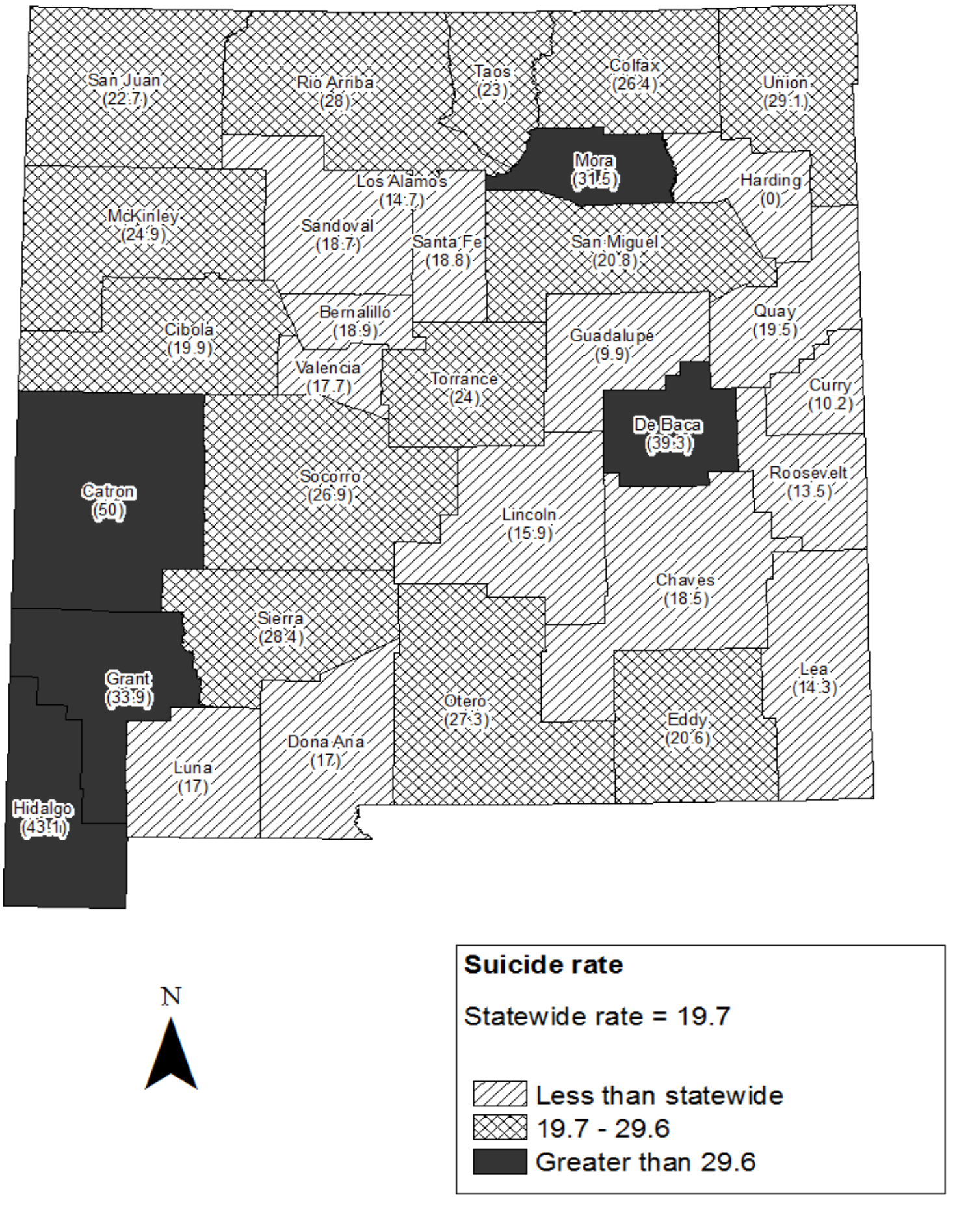


* All rates are per 100,000, age-adjusted to the 2000 US standard population

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

SUICIDE (continued)

Chart 4: Suicide Rates* by County, New Mexico, 2007-2011



* 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

ADULT MENTAL HEALTH

Problem Statement

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

Among measures that have been suggested by the CDC as potential tools for assessing population well-being and mental health is a measure of the frequency with which people experience poor mental health. This measure is based on the single simple question "How many days during the past 30 days was your mental health not good?". Respondents who report that they experienced 14 or more days when their mental health was "not good" are classified as experiencing Frequent Mental Distress (FMD). Although FMD is certainly not a clincal diagnosis, there is evidence to suggest that it is indeed associated with a person's mental health status. In 2010, the New Mexico Behavioral Risk Factor Surveillance Survey (BRFSS) asked the FMD question as well as questions about anxiety and depression, experience of various chronic health conditions, and experience of suicidal ideation and/or suicide attempt. Chart 1 shows the proportion of people in various response categories who also experienced FMD. The proportion of the total New Mexico population that experienced FMD was about 13%. 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 (43% reported past-month FMD), or receiving a diagnosis of current depression based on the Patient Health Questionaire (64% reported past-month FMD). Among the cohort that reported past-year suicidal ideation with no history of suicide attempt, 51% 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, 61% 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, 2010

		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	White	-	32,608	3,966	42,019	-	12.4	5.0	11.2
	Hispanic	-	28,164	3,586	40,637	-	15.9	12.2	15.3
	Americn Indian	-	4,965	-	6,058	-	14.2	-	12.7
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	15,100	68,062	8,053	91,215	14.6	13.6	6.8	12.6
Female	White	-	29,864	7,607	40,082	-	12.6	7.7	11.1
	Hispanic	-	32,329	4,353	52,025	-	15.3	11.2	17.4
	Americn Indian	-	7,423	639	8,340	-	17.3	15.9	14.5
	Black	-	-	-	983	-	-	-	6.2
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	19,347	72,252	13,019	104,617	20.1	14.0	8.8	13.8
Total	White	8,055	62,472	11,573	82,100	13.7	12.5	6.5	11.2
	Hispanic	24,230	60,493	7,940	92,662	22.4	15.6	11.6	16.4
	Americn Indian	-	12,389	963	14,397	-	15.9	12.3	13.7
	Black	-	1,161	-	1,524	-	6.7	-	5.9
	Asian/Pacific Islander	-	-	-	1,167	-	-	-	5.6
	Total	34,447	140,313	21,072	195,833	17.3	13.8	7.9	13.2

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

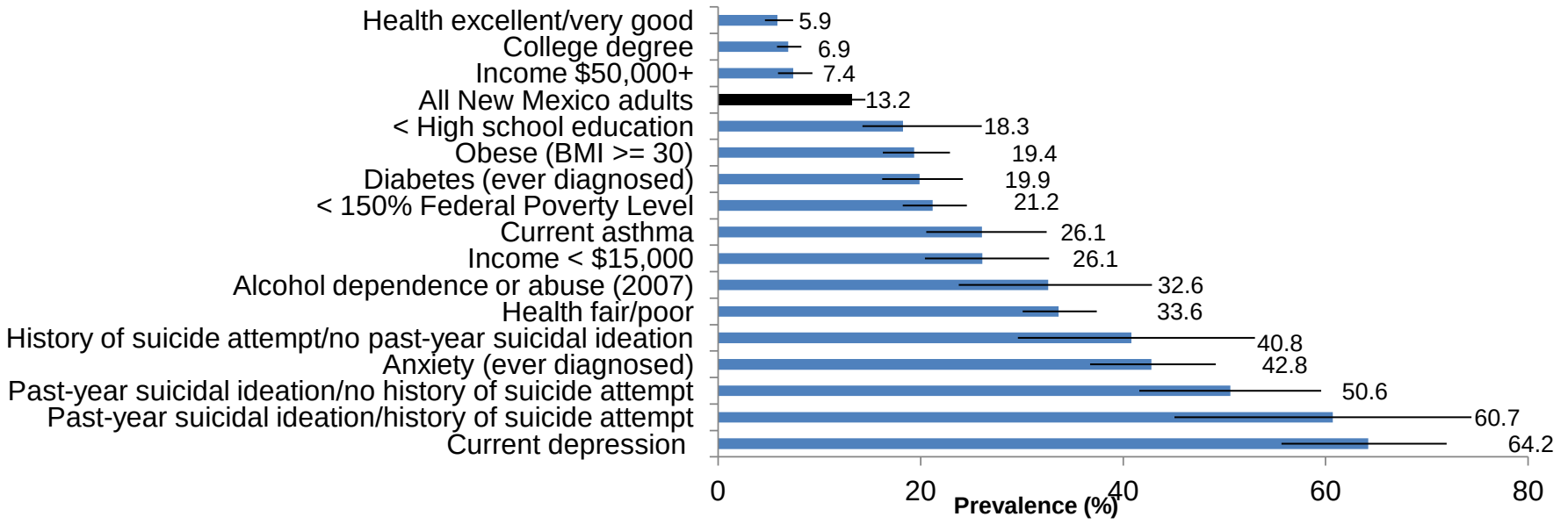
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 1: Frequent Mental Distress (past 30 days)* by Selected Characteristics, Adults Aged 18+, New Mexico, 2010



* 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, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	27,001	26,465	-	-	-	57,448	10.8	14.9	-	-	-	12.0
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	4,219	3,338	-	-	-	8,598	18.5	15.1	-	-	-	17.6
Cibola	2,382	-	753	-	-	5,134	26.2	-	14.1	-	-	23.7
Colfax	-	-	-	-	-	1,651	-	-	-	-	-	16.9
Curry	2,752	4,628	-	-	-	7,380	13.3	38.5	-	-	-	20.8
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	6,388	10,827	-	-	-	17,324	14.4	14.2	-	-	-	13.6
Eddy	3,109	1,787	-	-	-	5,189	15.1	16.8	-	-	-	15.4
Grant	2,220	-	-	-	-	4,790	12.7	-	-	-	-	17.3
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	1,448	3,330	-	-	-	5,138	7.8	19.3	-	-	-	12.7
Lincoln	582	-	-	-	-	645	5.8	-	-	-	-	3.7
Los Alamos	911	-	-	-	-	911	7.0	-	-	-	-	5.6
Luna	-	-	-	-	-	3,441	-	-	-	-	-	19.4
McKinley	621	679	2,486	-	-	3,830	7.2	11.6	11.7	-	-	10.4
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	1,854	-	-	-	-	3,405	7.5	-	-	-	-	7.0
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	3,227	-	-	-	4,536	-	12.4	-	-	-	12.4
Roosevelt	-	-	-	-	-	560	-	-	-	-	-	6.0
Sandoval	6,926	3,214	-	-	-	12,578	11.5	10.6	-	-	-	12.1
San Juan	4,765	2,679	1,388	-	-	9,404	9.2	18.0	8.6	-	-	10.8
San Miguel	-	1,683	-	-	-	2,019	-	11.4	-	-	-	8.7
Santa Fe	3,186	9,989	-	-	-	13,810	6.4	24.6	-	-	-	14.2
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	3,097	-	-	-	-	-	20.3
Taos	925	3,189	-	-	-	4,300	9.1	20.8	-	-	-	15.2
Torrance	-	-	-	-	-	3,940	-	-	-	-	-	21.3
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	4,809	6,822	-	-	-	12,158	18.4	27.1	-	-	-	21.8
New Mexico	82,100	92,662	14,397	1,524	1,167	195,833	11.2	16.4	13.7	5.9	5.6	13.2

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

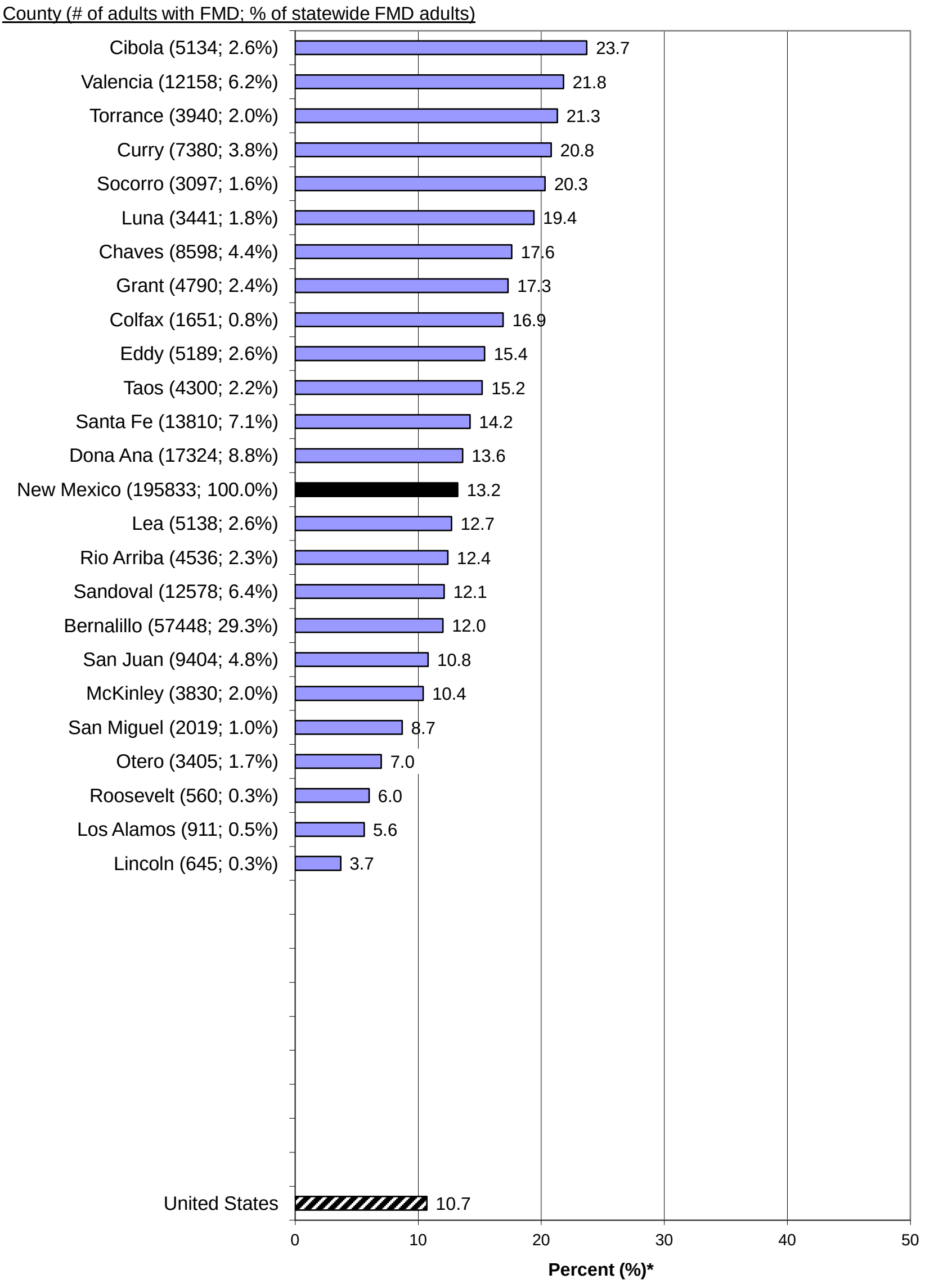
** Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 2: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



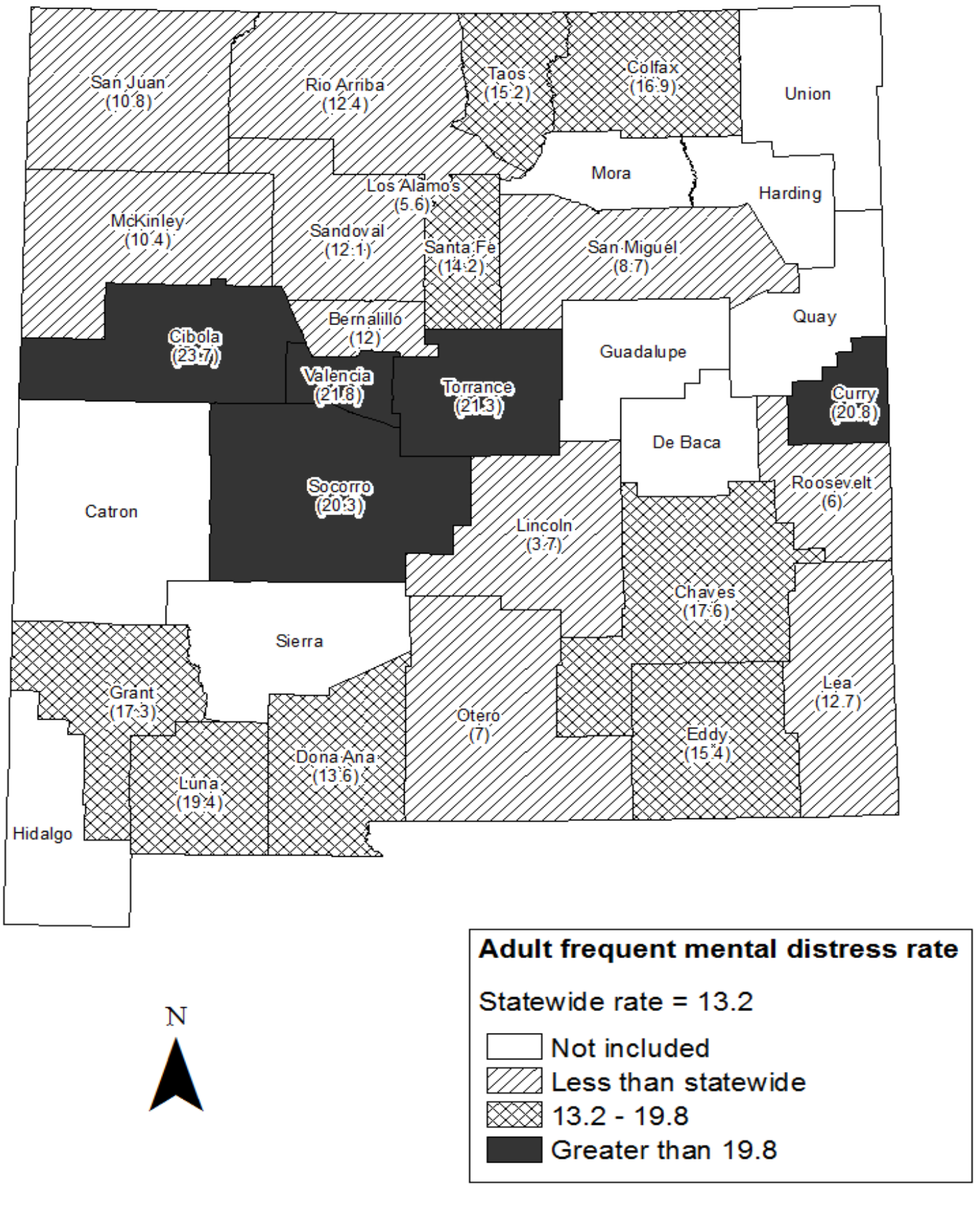
* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days

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

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

ADULT MENTAL HEALTH (continued)

Chart 3: Frequent Mental Distress (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



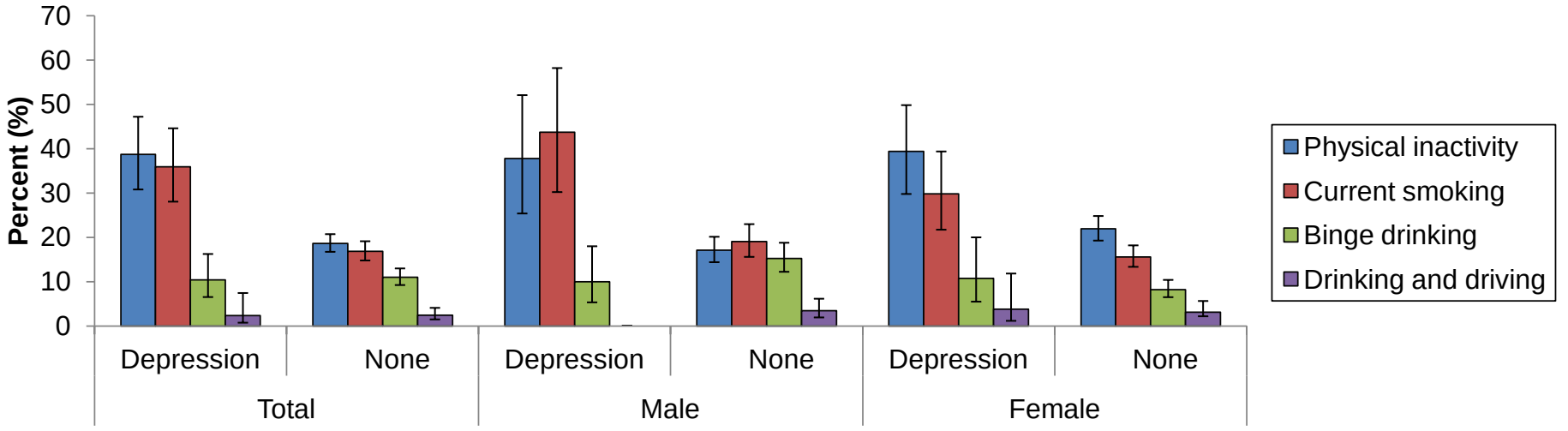
* Estimate of percent of people in population group who reported Frequent Mental Distress in past 30 days
Not included: Rate not reported due to small number of respodents (< 50) in cell
Source: BRFSS; SAES

Problem Statement (continued)

Depression is one of the most prevalent and treatable mental disorders. Major depression is usually associated with co-morbid mental disorders, such as anxiety and substance use disorders, and impairment of a person's ability to function in work, home, relationship, and social roles. Depression is also a risk factor for suicide and attempted suicide. In addition, depressive disorders have been associated with an increased prevalence of chronic medical conditions, such as heart disease, stroke, asthma, arthritis, cancer, diabetes, and obesity. In 2010, the BRFSS assessed current depression using Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria.

Table 1 shows the prevalence of current depression was highest among young adults 18-24 years (11.4%), slightly higher among females than males across the age range, and higher among American Inidian adults (15.4%) and Hispanic adults (9.9%) than White adults (7.7%). Depression was more common among American Indian females (16.6%) and Hispanic females (11.1%) than among White females (7.8%). 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, obesity, diabetes, and heart disease among males, and asthma, obesity, and diabetes among females.

Chart 4: Unhealthy Behaviors by Depression Status and Sex, New Mexico, 2010



* 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, 2010

		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	White	-	25,190	2,668	28,525	-	9.8	3.0	7.7
	Hispanic	-	15,921	1,357	20,865	-	10.1	4.3	8.5
	Americn Indian	-	2,927	-	6,192	-	9.1	-	13.8
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	-	47,138	4,631	60,902	-	9.8	3.6	8.7
Female	White	-	26,352	4,124	31,030	-	9.9	3.9	7.8
	Hispanic	-	23,848	2,878	33,493	-	11.0	7.5	11.1
	Americn Indian	-	7,320	-	9,967	-	16.4	-	16.6
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	-	58,545	8,203	78,165	-	10.4	5.2	9.7
Total	White	-	51,542	6,791	59,556	-	9.9	3.5	7.7
	Hispanic	-	39,769	4,235	54,358	-	10.6	6.0	9.9
	Americn Indian	-	10,247	-	16,159	-	13.3	-	15.4
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	20,549	105,683	12,834	139,067	11.4	10.2	4.5	9.2

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

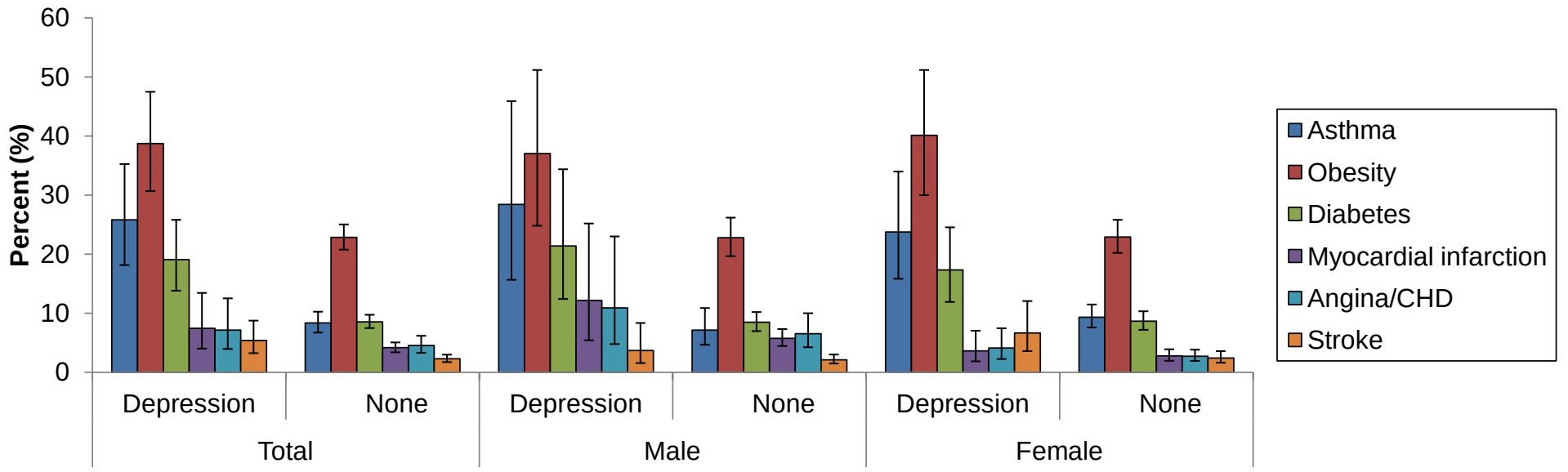
** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 5: Chronic Health Conditions by Depression Status and Sex, New Mexico, 2010



Source: BRFSS; SAES

Table 4: Current Depression (past 2 weeks) by Race and County, Adults Aged 18+, New Mexico, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	17,768	14,488	-	-	-	35,779	6.8	7.8	-	-	-	7.1
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	1,587	-	-	-	-	4,836	6.2	-	-	-	-	9.9
Cibola	-	-	-	-	-	2,040	-	-	-	-	-	9.6
Colfax	-	-	-	-	-	-	-	-	-	-	-	-
Curry	1,532	-	-	-	-	2,950	7.1	-	-	-	-	9.0
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	2,401	7,581	-	-	-	10,118	5.8	9.5	-	-	-	7.9
Eddy	1,678	-	-	-	-	3,483	7.3	-	-	-	-	9.4
Grant	-	-	-	-	-	3,409	-	-	-	-	-	11.8
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	1,588	-	-	-	-	5,175	8.5	-	-	-	-	15.0
Lincoln	-	-	-	-	-	-	-	-	-	-	-	-
Los Alamos	-	-	-	-	-	235	-	-	-	-	-	1.4
Luna	-	-	-	-	-	-	-	-	-	-	-	-
McKinley	443	-	4,934	-	-	6,217	4.3	-	19.0	-	-	14.2
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	2,998	-	-	-	-	5,743	11.0	-	-	-	-	12.4
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	1,476	-	-	-	2,707	-	6.0	-	-	-	7.3
Roosevelt	-	-	-	-	-	-	-	-	-	-	-	-
Sandoval	5,829	3,517	-	-	-	12,256	9.9	13.0	-	-	-	12.2
San Juan	4,011	3,737	-	-	-	9,673	7.7	23.0	-	-	-	11.1
San Miguel	-	-	-	-	-	3,889	-	-	-	-	-	18.5
Santa Fe	3,063	3,911	-	-	-	6,974	5.7	9.4	-	-	-	6.7
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	-	-	-	-	-	-	-
Taos	-	-	-	-	-	1,444	-	-	-	-	-	4.6
Torrance	-	-	-	-	-	-	-	-	-	-	-	-
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	3,602	3,363	-	-	-	7,499	14.7	17.0	-	-	-	15.4
New Mexico	59,556	54,358	16,159	-	-	139,067	7.7	9.9	15.4	-	-	9.2

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

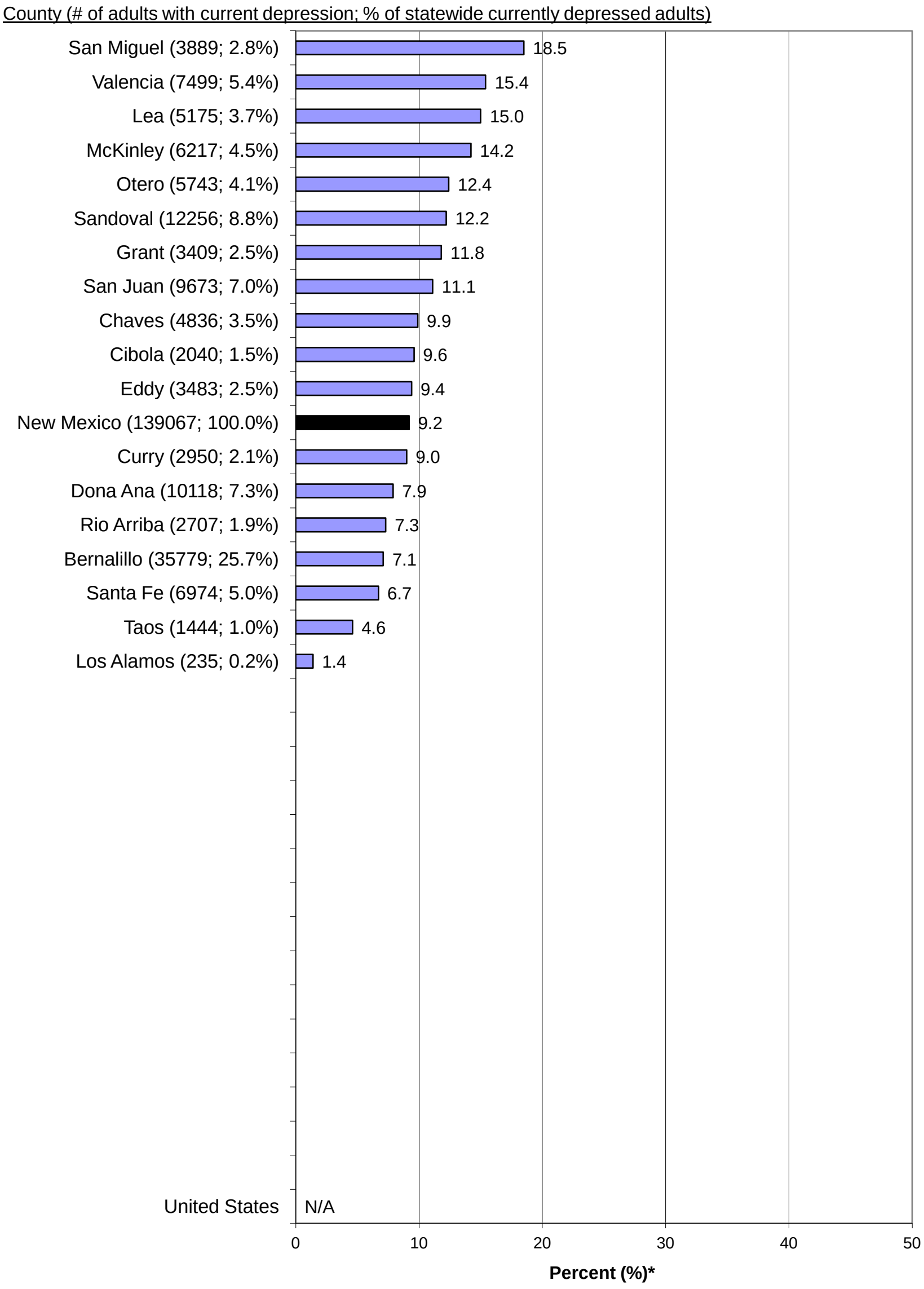
** Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

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

Source: BRFSS; SAES

ADULT MENTAL HEALTH (continued)

Chart 6: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2010



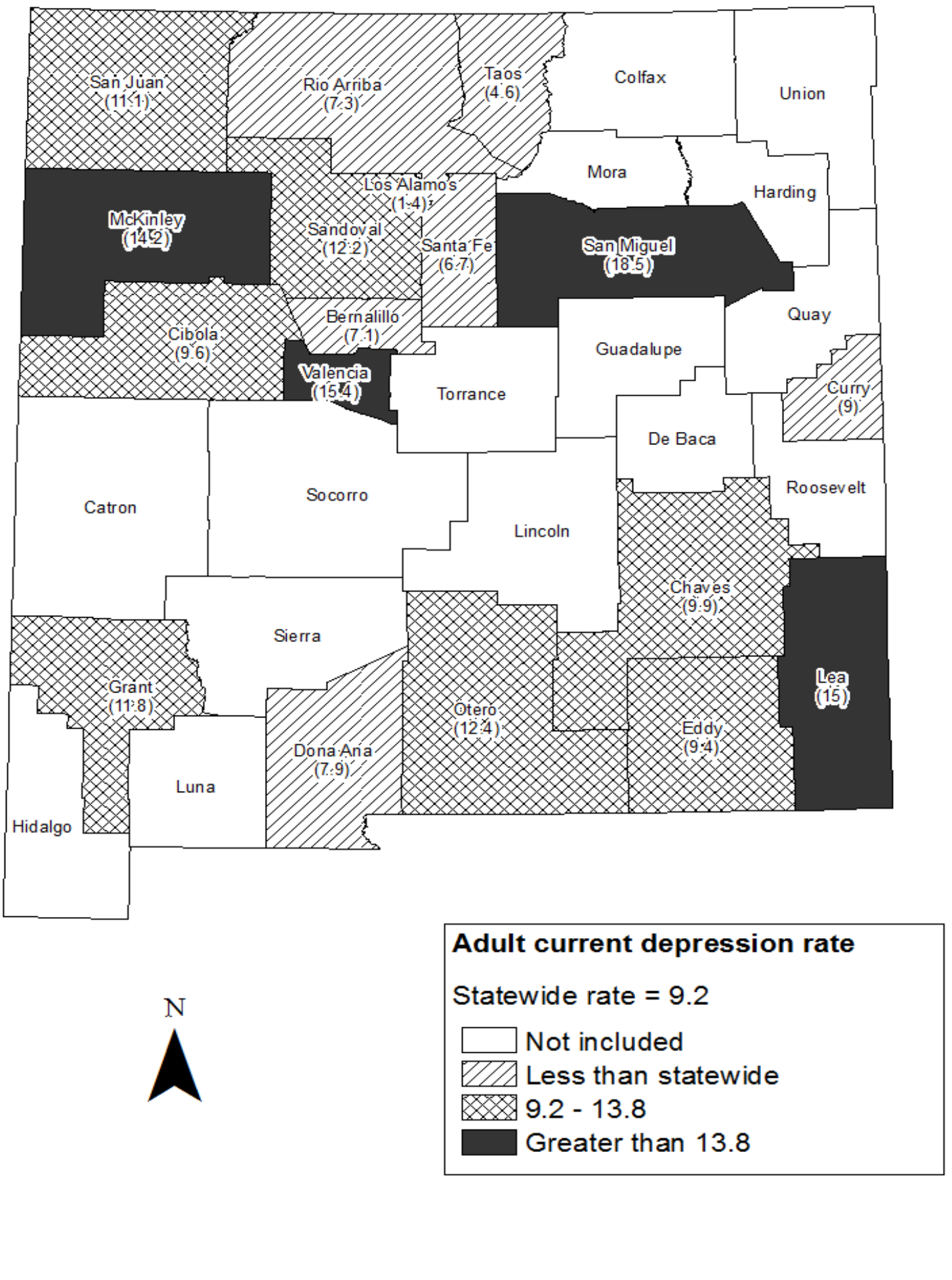
* Estimate of percent of people in population group who reported current (past 2-week) depression based on DSM-IV criteria

The following counties were not included due to small number of respondents (< 50) in cell:
Catron, Colfax, De Baca, Guadalupe, Harding, Hidalgo, Lincoln, Luna, Mora, Quay, Roosevelt, Sierra, Socorro, Torrance, Union

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

ADULT MENTAL HEALTH (continued)

Chart 7: Current Depression (past 2 weeks)* by County, Adults Aged 18+, New Mexico, 2010



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

YOUTH FEELINGS OF SADNESS OR HOPELESSNESS

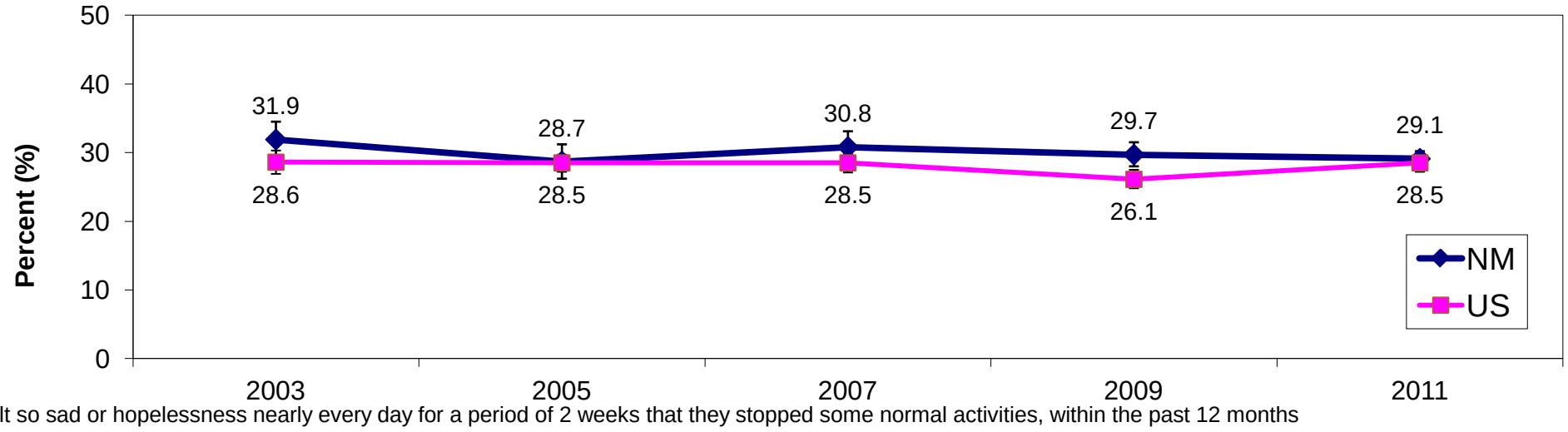
Problem Statement

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 than adults. Persistent sadness in youth has also been linked with suicidal behavior, drug and alcohol abuse, unsafe sex, and academic and social deficits. Feelings of sadness or loneliness not only affect teens but those around them, often causing problems in relationships with peers and family members.

The prevalence of persistent feelings of sadness or hopelessness among NM high school students showed no trend from 2003-2011. There was not a statistically significant difference between the US rate (28.5%) and the NM rate (29.1%) for feelings of sadness or hopelessness. Girls (37.3%) were far more likely to report feelings of sadness or hopelessness than boys (21.2%). There were no statistically significant variations by grade level or race/ethnicity.

In 2011, the counties with the highest prevalence of prevalence of persistent feelings of sadness or hopelessness were Torrance (35.9%), Grant (34.8%), Luna (34.5%), Sierra (33.7%) and Dona Ana (33.7%). The counties with the lowest prevalence were Catron (19.9%), Valencia (23.9%), and De Baca (24.1%).

Chart 1: Feelings of Sadness or Hopelessness* by Year, Grades 9 - 12, NM and US, 2011



* Felt so sad or hopelessness 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)

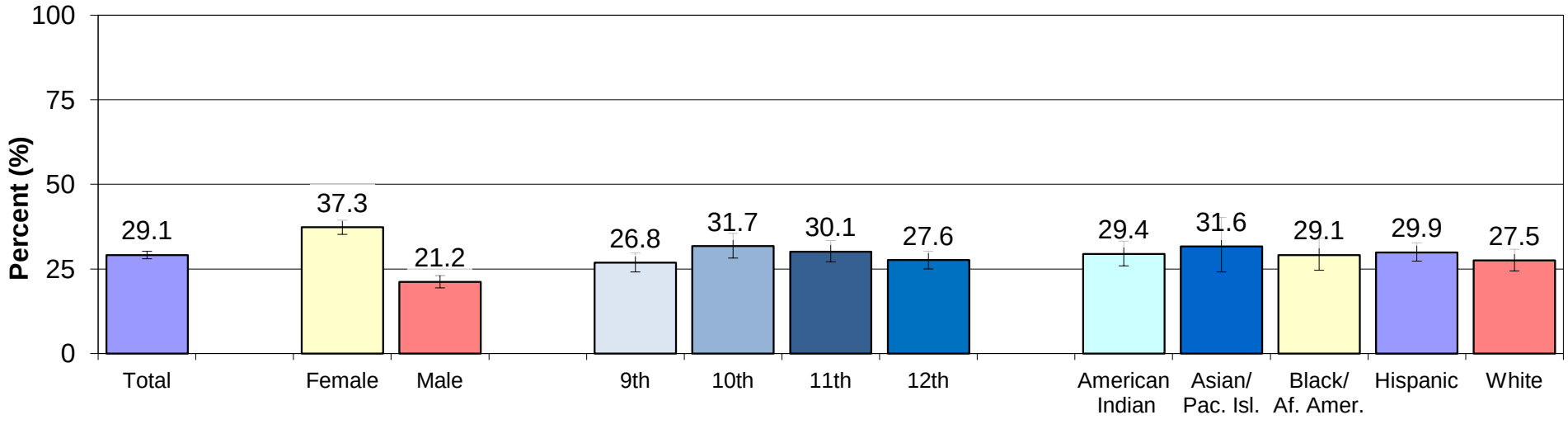
Table 1: Feelings of Sadness or Hopelessness, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2011

		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	19.2 (15.2-23.9)	24.8 (17.0-34.7)	22.0 (14.7-31.4)	18.1 (11.7-27.0)	21.3 (17.8-25.1)
	Asian/Pacific Islander	--	--	--	--	27.5 (19.4-37.5)
	Black/African American	22.7 (14.4-33.9)	--	--	--	25.1 (18.9-32.5)
	Hispanic	17.8 (13.2-23.6)	19.4 (15.0-24.8)	18.3 (13.1-25.0)	24.0 (18.1-31.1)	19.8 (17.1-22.9)
	White	20.2 (12.4-31.1)	21.4 (14.5-30.4)	16.4 (12.6-21.1)	25.2 (18.9-32.7)	20.7 (16.6-25.7)
	Total	19.8 (16.6-23.6)	21.6 (17.8-26.0)	19.7 (17.5-22.2)	23.9 (20.3-27.9)	21.2 (19.4-23.1)
Female	American Indian	39.5 (28.7-51.4)	48.0 (41.0-55.1)	42.3 (33.1-52.2)	26.5 (20.9-33.0)	39.8 (35.1-44.7)
	Asian/Pacific Islander	--	--	--	--	37.1 (27.0-48.6)
	Black/African American	--	--	--	--	34.4 (24.8-45.5)
	Hispanic	35.1 (30.4-40.1)	44.4 (37.9-51.0)	40.9 (34.7-47.4)	32.5 (29.4-35.8)	38.3 (35.0-41.7)
	White	32.0 (24.9-40.1)	36.8 (28.5-45.9)	41.0 (31.4-51.3)	33.4 (26.5-41.0)	35.2 (30.9-39.7)
	Total	34.6 (31.0-38.4)	42.2 (38.1-46.3)	40.6 (35.4-46.0)	31.3 (28.1-34.6)	37.3 (35.2-39.4)
Total	American Indian	27.5 (22.7-32.8)	35.3 (27.7-43.7)	31.4 (24.9-38.7)	22.0 (17.0-28.0)	29.4 (25.9-33.2)
	Asian/Pacific Islander	28.8 (14.3-49.7)	26.8 (17.4-38.8)	34.5 (23.8-47.1)	36.2 (20.8-55.0)	31.6 (24.1-40.2)
	Black/African American	26.0 (19.8-33.3)	33.2 (20.4-49.1)	29.9 (22.9-38.0)	25.4 (16.6-36.8)	29.1 (24.6-34.1)
	Hispanic	27.1 (23.6-31.0)	32.7 (27.5-38.5)	31.0 (25.8-36.8)	28.7 (25.2-32.5)	29.9 (27.3-32.7)
	White	25.8 (20.9-31.5)	28.6 (22.5-35.6)	27.7 (24.1-31.7)	28.8 (24.4-33.7)	27.5 (24.4-30.8)
	Total	26.8 (24.1-29.7)	31.7 (28.2-35.5)	30.1 (27.1-33.4)	27.6 (25.0-30.2)	29.1 (28.0-30.2)

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

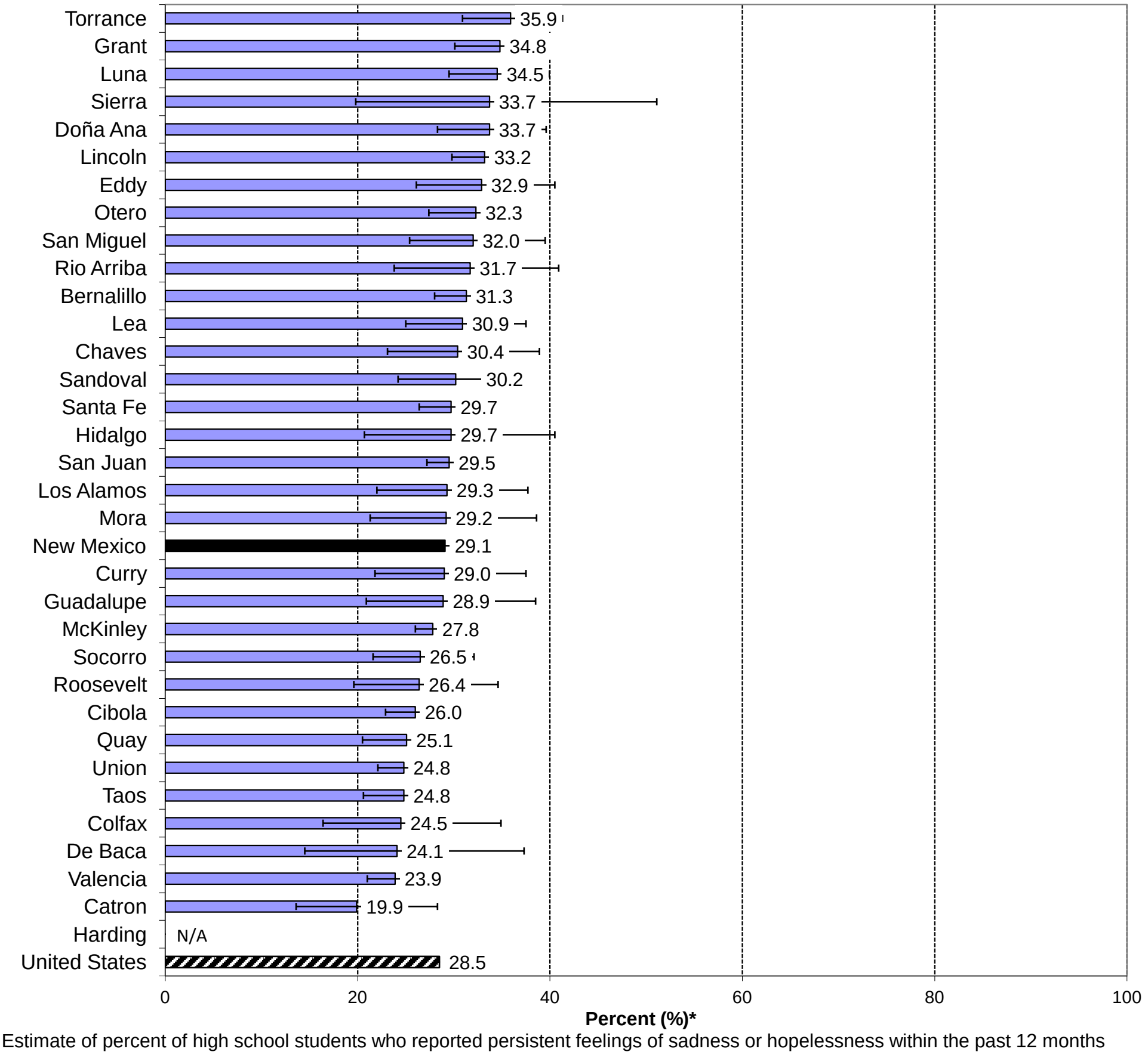
YOUTH FEELINGS OF SADNESS OR HOPELESSNESS (continued)

Chart 2: Feelings of Sadness or Hopelessness, by Grade Level and Gender, Grades 9 - 12, NM, 2011



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, 2011



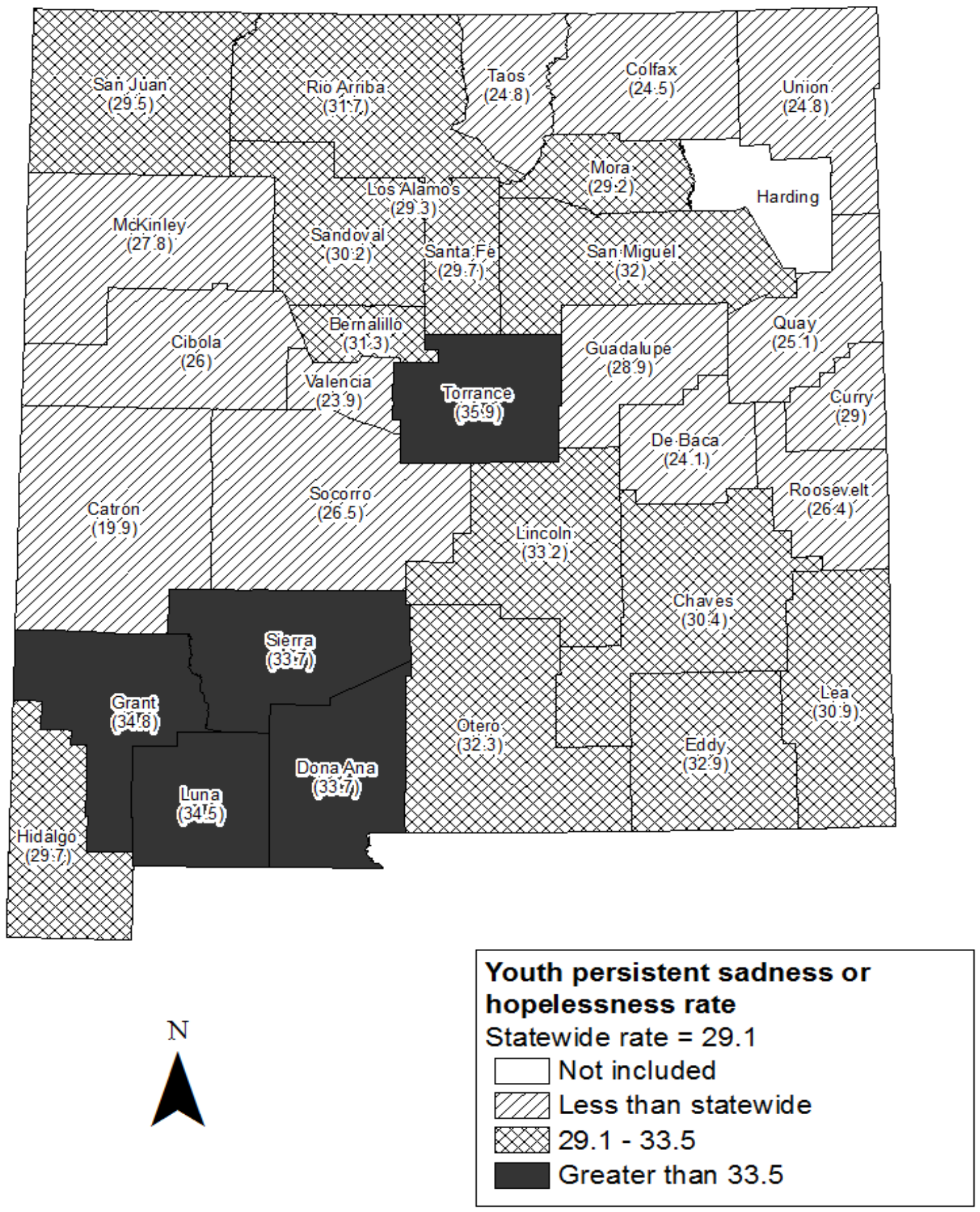
* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH SERIOUSLY CONSIDERED SUICIDE

Problem Statement

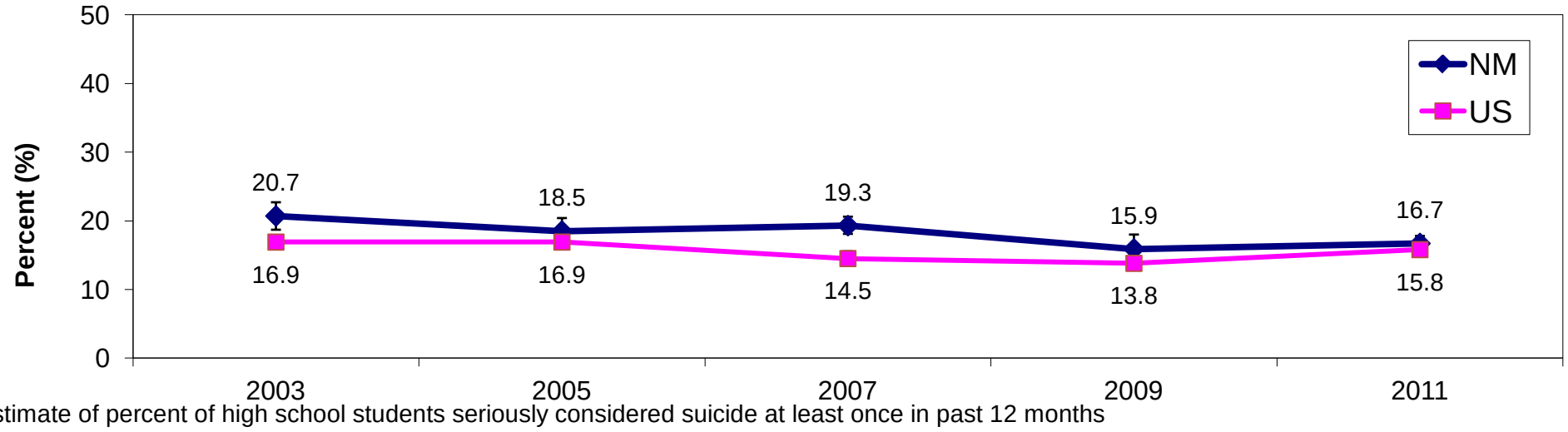
Suicide is a complex behavior, with no single determining cause. Suicidal ideation refers to thoughts of suicide or wanting to take one's own life. Suicidal ideation is a risk factors for attempted/completed suicide.

Among NM high school students, the rate of "Seriously considered suicide" decreased from 20.7% in 2003 to 15.9% in 2009 and 16.7% in 2011. The difference between the 2009 and 2011 rates was not statistically significant. The US rate decreased until 2009, but increased from 2009 to 2011 (13.8% to 15.8%). There was no statistical difference between the NM and US rates for 2011.

NM girls (20.8%) had a higher rate than boys (12.8%) in 2011. Twelfth graders (13.6%) had a lower rate than 9th (18.1%) or 10th graders (18.6%). Asian or Pacific Islander students (22.7%) had a higher rate than Hispanic (15.6%) or White students (16.4%).

In 2011, the counties with the highest prevalence of seriously considering suicide were Los Alamos (22.5%), Hidalgo (21.6%), Torrance (20.9%), Grant (19.8%), and San Juan (19.4%). The counties with the lowest prevalence were Roosevelt (7.2%) and De Baca (8.0%).

Chart 1: Seriously Considered Suicide* by Year, Grades 9 - 12, NM and US, 2011



* 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)

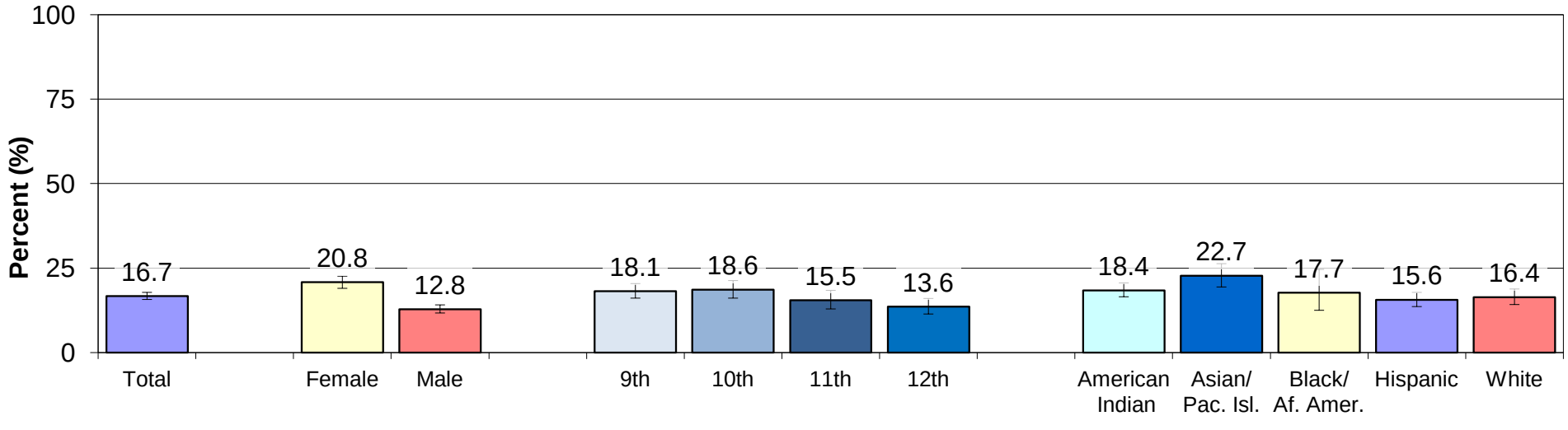
Table 1: Seriously Considered Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2011

		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	7.7 (6.0-9.7)	17.0 (10.8-25.6)	10.9 (6.7-17.4)	16.5 (11.5-23.1)	12.9 (10.4-15.7)
	Asian/Pacific Islander	--	--	--	--	18.3 (12.2-26.5)
	Black/African American	17.0 (10.1-27.3)	--	--	--	14.2 (10.6-18.7)
	Hispanic	10.6 (6.9-15.9)	11.9 (7.7-18.0)	11.6 (8.0-16.4)	11.5 (7.9-16.5)	11.5 (9.5-13.8)
	White	16.4 (9.9-25.8)	10.1 (5.8-17.3)	13.7 (9.2-20.1)	15.9 (11.3-21.9)	13.8 (10.5-17.9)
	Total	12.5 (10.3-15.1)	12.3 (9.1-16.4)	12.7 (10.8-14.9)	14.0 (11.4-17.1)	12.8 (11.7-14.1)
Female	American Indian	30.8 (24.0-38.6)	27.8 (19.1-38.5)	23.5 (14.8-35.2)	17.6 (11.6-25.8)	25.5 (22.5-28.9)
	Asian/Pacific Islander	--	--	--	--	29.7 (22.0-38.9)
	Black/African American	--	--	--	--	22.5 (10.8-41.2)
	Hispanic	23.8 (19.6-28.6)	25.8 (21.7-30.3)	13.4 (9.3-18.9)	12.6 (8.3-18.8)	19.0 (16.6-21.8)
	White	20.9 (15.8-27.0)	21.4 (17.4-26.1)	22.1 (14.2-32.8)	11.9 (6.8-20.1)	19.4 (16.0-23.3)
	Total	24.4 (21.8-27.1)	25.1 (22.1-28.3)	18.2 (14.6-22.6)	13.1 (9.4-18.1)	20.8 (19.0-22.6)
Total	American Indian	17.2 (14.2-20.6)	21.8 (18.6-25.4)	16.8 (12.5-22.2)	17.0 (12.7-22.4)	18.4 (16.5-20.6)
	Asian/Pacific Islander	25.4 (17.5-35.3)	18.9 (11.2-30.1)	26.5 (18.8-35.8)	17.2 (11.6-24.8)	22.7 (19.4-26.3)
	Black/African American	18.4 (10.1-31.1)	17.1 (8.0-33.1)	17.5 (9.8-29.4)	11.1 (4.6-24.6)	17.7 (12.5-24.6)
	Hispanic	17.7 (14.1-22.0)	19.3 (15.8-23.4)	12.6 (9.7-16.1)	12.1 (9.0-16.2)	15.6 (13.6-17.8)
	White	18.5 (14.6-23.3)	15.5 (12.0-19.8)	17.6 (12.0-25.0)	14.1 (11.5-17.3)	16.4 (14.2-18.8)
	Total	18.1 (16.1-20.4)	18.6 (16.1-21.3)	15.5 (12.9-18.4)	13.6 (11.4-16.0)	16.7 (15.7-17.8)

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

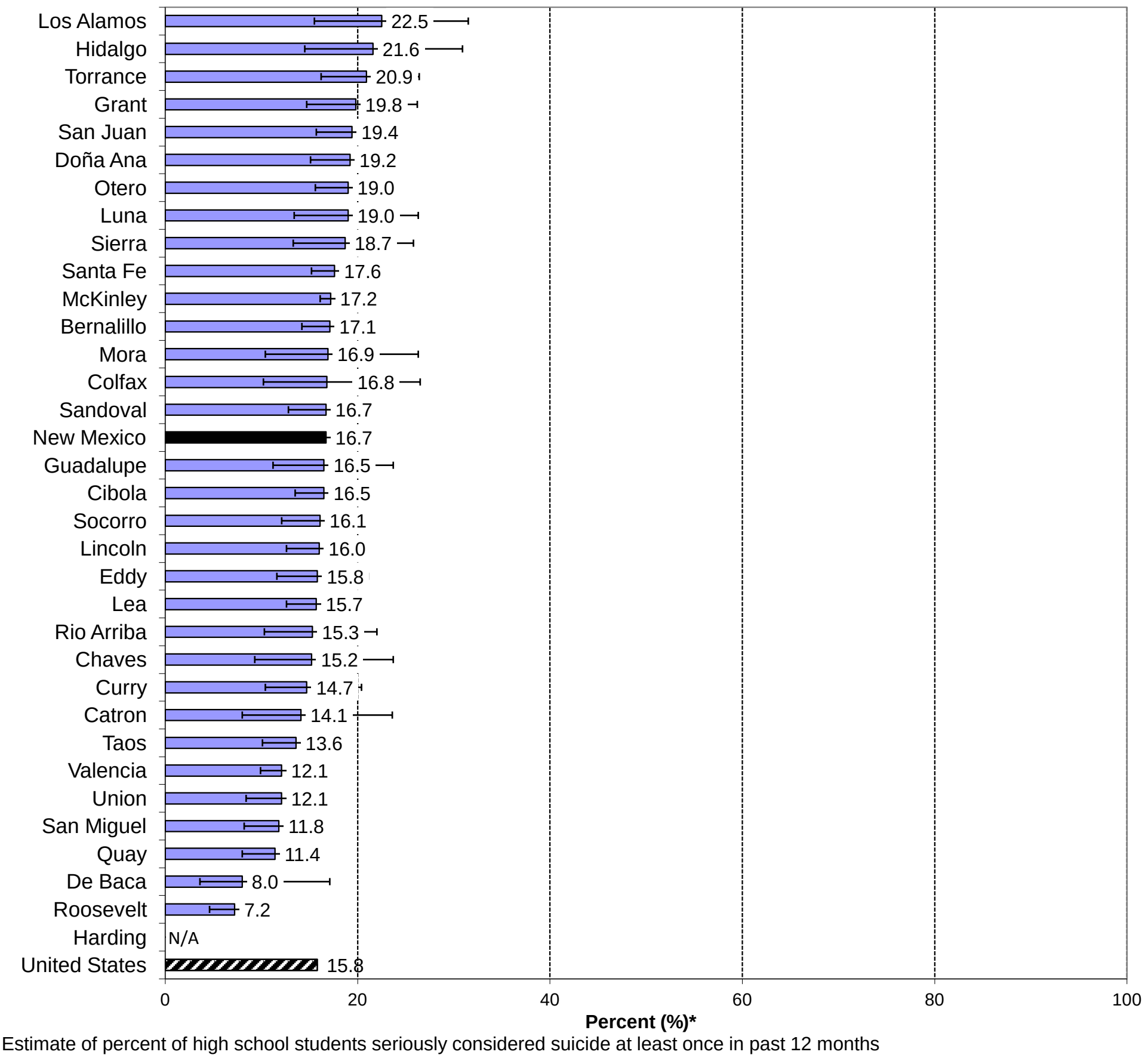
YOUTH SERIOUSLY CONSIDERED SUICIDE (continued)

Chart 2: Seriously Considered Suicide, by Grade Level and Gender, Grades 9 - 12, NM, 2011



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, 2011



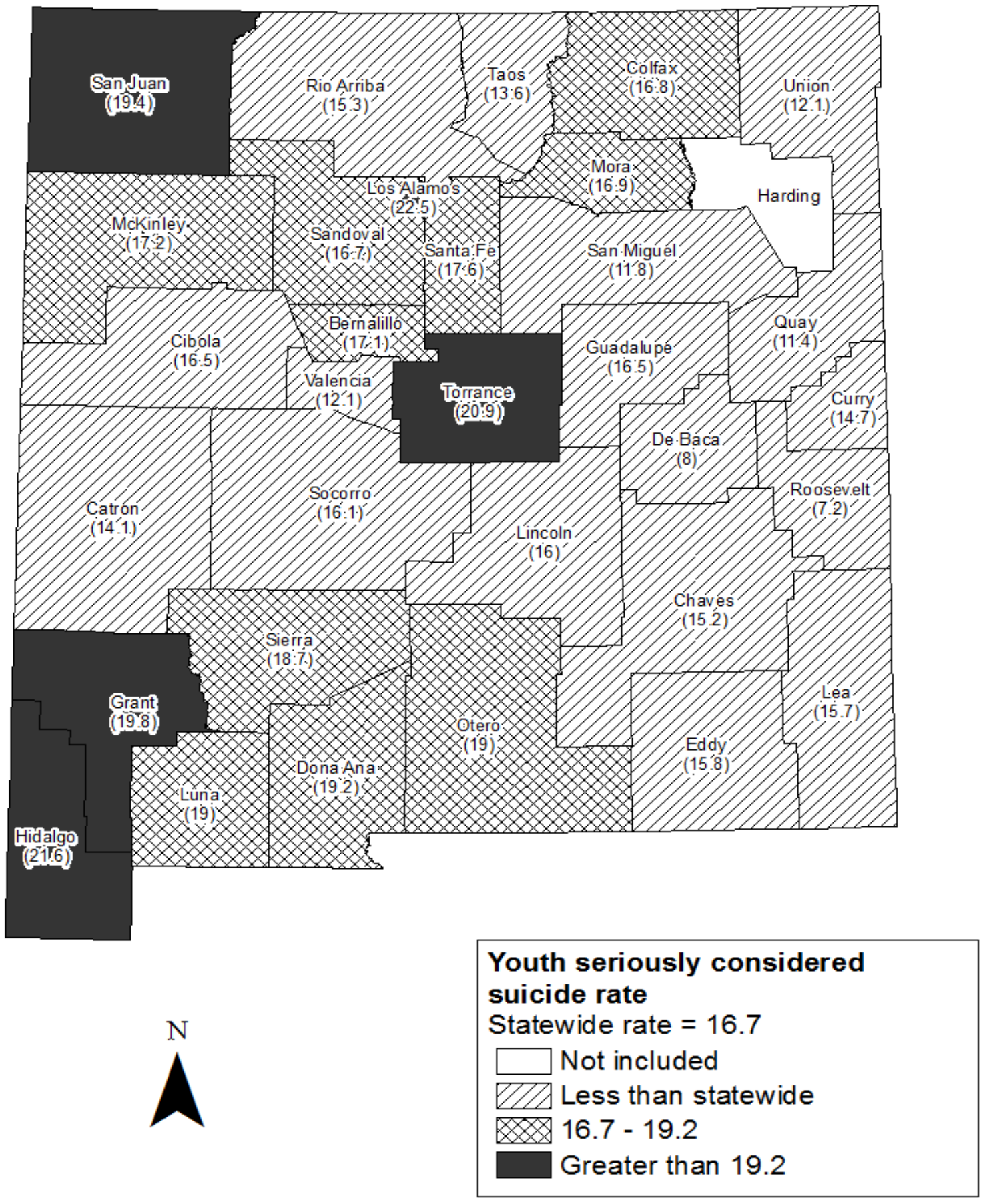
* Estimate of percent of high school students seriously considered suicide at least once in past 12 months

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH ATTEMPTED SUICIDE

Problem Statement

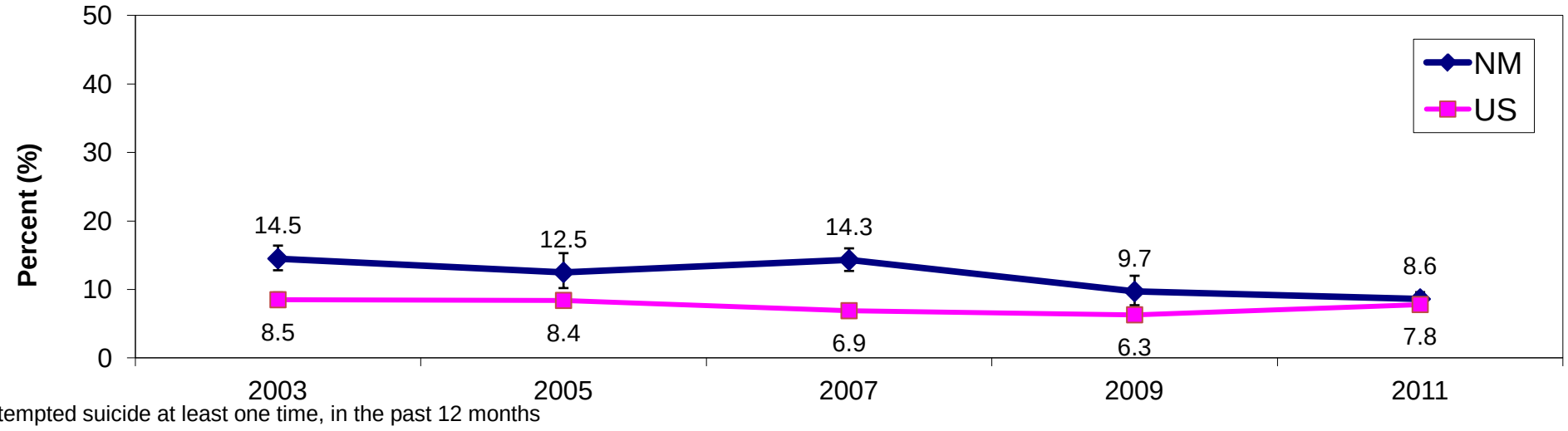
In 2010, suicide was the second leading cause of death in NM and the third leading cause of death in the United States, for youth between the ages of 15 and 24. While girls are more likely than boys to attempt suicide, boys are more likely than girls to die of suicide. Cultural variations in suicide rates also exist, with American Indian/Alaskan Native youth having the highest rates of suicide-related fatalities in New Mexico. A previous suicide attempt is among the stongest risk factors for completed suicide.

The prevalence of past year suicide attempts among NM high school students decreased from 14.5% in 2003 to 8.6.% in 2011. While the US rate decreased from 2003 to 2009, it increased from 2009 to 2011 (6.3% to 7.8%). In 2011, there was no statistical difference between US (7.8%) and NM (8.6%) students for the rate of suicide attempts.

Girls (12.3%) had a higher rate of attempted suicide than boys (5.0%). White students (6.4%) had a lower rate of suicide attempts than American Indian students (10.5%) or Asian/Pacific Islander students (13.5%). The difference by grade level was not statistically significant.

In 2011, the counties with the highest prevalence of suicide attempts were Rio Arriba (20.2%), Mora (17.6%), McKinley (14.2%), Luna (13.2%), and Sierra (12.7%). The counties with the lowest prevalence of suicide attempts were De Baca (4.5%), Curry (5.3%), Roosevelt (5.6%), Quay (5.8%), and Taos (5.9%).

Chart 1: Attempted Suicide* by Year, Grades 9 - 12, NM and US, 2011



* 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)

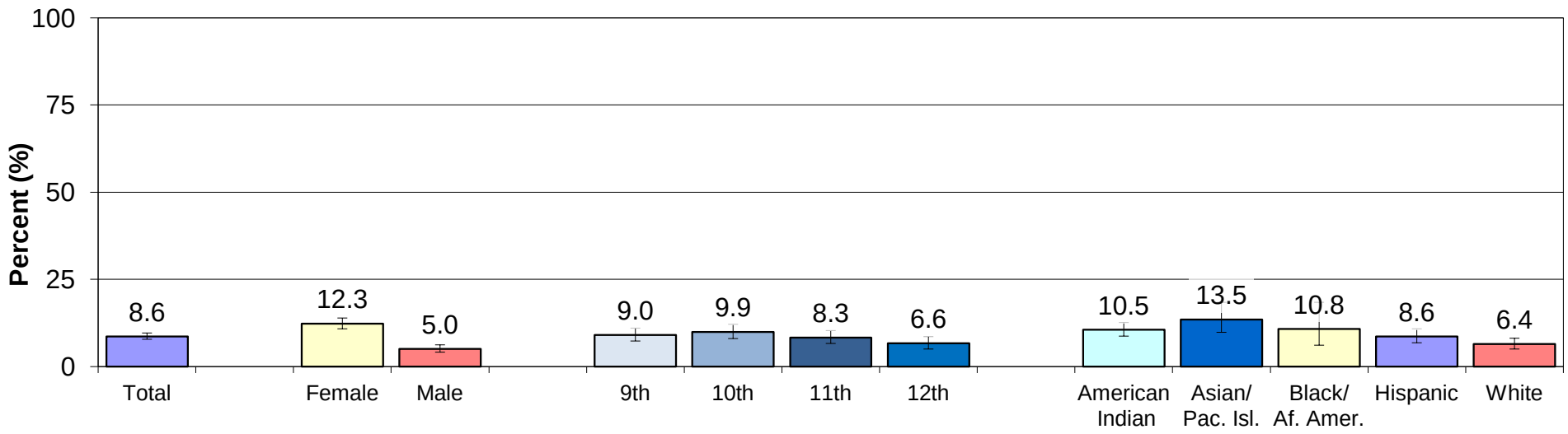
Table 1: Attempted Suicide, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, NM, 2011

		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	4.3 (2.4-7.6)	8.0 (3.4-17.6)	4.6 (1.7-11.4)	2.5 (1.1-5.9)	5.3 (3.4-8.1)
	Asian/Pacific Islander	--	--	--	--	8.8 (4.9-15.2)
	Black/African American	1.2 (0.1-9.9)	--	--	--	6.3 (3.3-11.6)
	Hispanic	7.2 (3.6-13.8)	4.9 (2.5-9.2)	5.7 (3.1-10.5)	3.4 (1.5-7.7)	5.4 (3.8-7.5)
	White	2.1 (0.7-6.5)	3.8 (2.2-6.5)	5.6 (3.0-10.5)	3.8 (1.6-8.5)	3.6 (2.3-5.4)
	Total	4.2 (2.8-6.3)	5.1 (3.4-7.6)	6.0 (4.0-8.8)	4.7 (3.1-7.0)	5.0 (4.1-6.2)
Female	American Indian	20.3 (14.4-27.9)	19.3 (11.2-31.2)	14.1 (7.6-24.7)	8.8 (6.1-12.5)	16.5 (13.5-20.0)
	Asian/Pacific Islander	--	--	--	--	21.0 (13.5-31.3)
	Black/African American	--	--	--	--	17.4 (6.7-38.3)
	Hispanic	14.1 (10.3-19.1)	15.0 (10.9-20.2)	7.6 (4.8-11.9)	7.9 (4.9-12.5)	11.2 (9.0-13.9)
	White	11.0 (7.0-17.0)	10.2 (6.1-16.5)	9.8 (6.0-15.6)	6.3 (3.2-11.9)	9.5 (7.2-12.5)
	Total	14.0 (11.4-17.0)	14.7 (11.8-18.1)	10.4 (7.9-13.6)	8.4 (5.9-11.8)	12.3 (10.8-13.9)
Total	American Indian	11.4 (8.7-14.8)	13.4 (9.8-18.1)	9.2 (4.8-16.9)	5.5 (3.8-8.1)	10.5 (8.7-12.6)
	Asian/Pacific Islander	9.9 (4.0-22.6)	10.4 (4.7-21.5)	14.9 (8.4-24.9)	20.6 (13.7-29.7)	13.5 (9.8-18.4)
	Black/African American	2.9 (0.6-12.3)	12.6 (5.0-28.3)	16.2 (8.5-28.8)	--	10.8 (6.1-18.4)
	Hispanic	11.0 (7.7-15.6)	10.4 (7.5-14.2)	6.8 (4.5-10.2)	5.9 (3.5-9.8)	8.6 (6.8-10.8)
	White	6.4 (4.5-9.0)	6.8 (4.2-10.8)	7.6 (4.9-11.6)	4.9 (3.0-8.1)	6.4 (5.0-8.1)
	Total	9.0 (7.3-11.0)	9.9 (8.0-12.1)	8.3 (6.6-10.3)	6.6 (5.0-8.6)	8.6 (7.8-9.6)

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

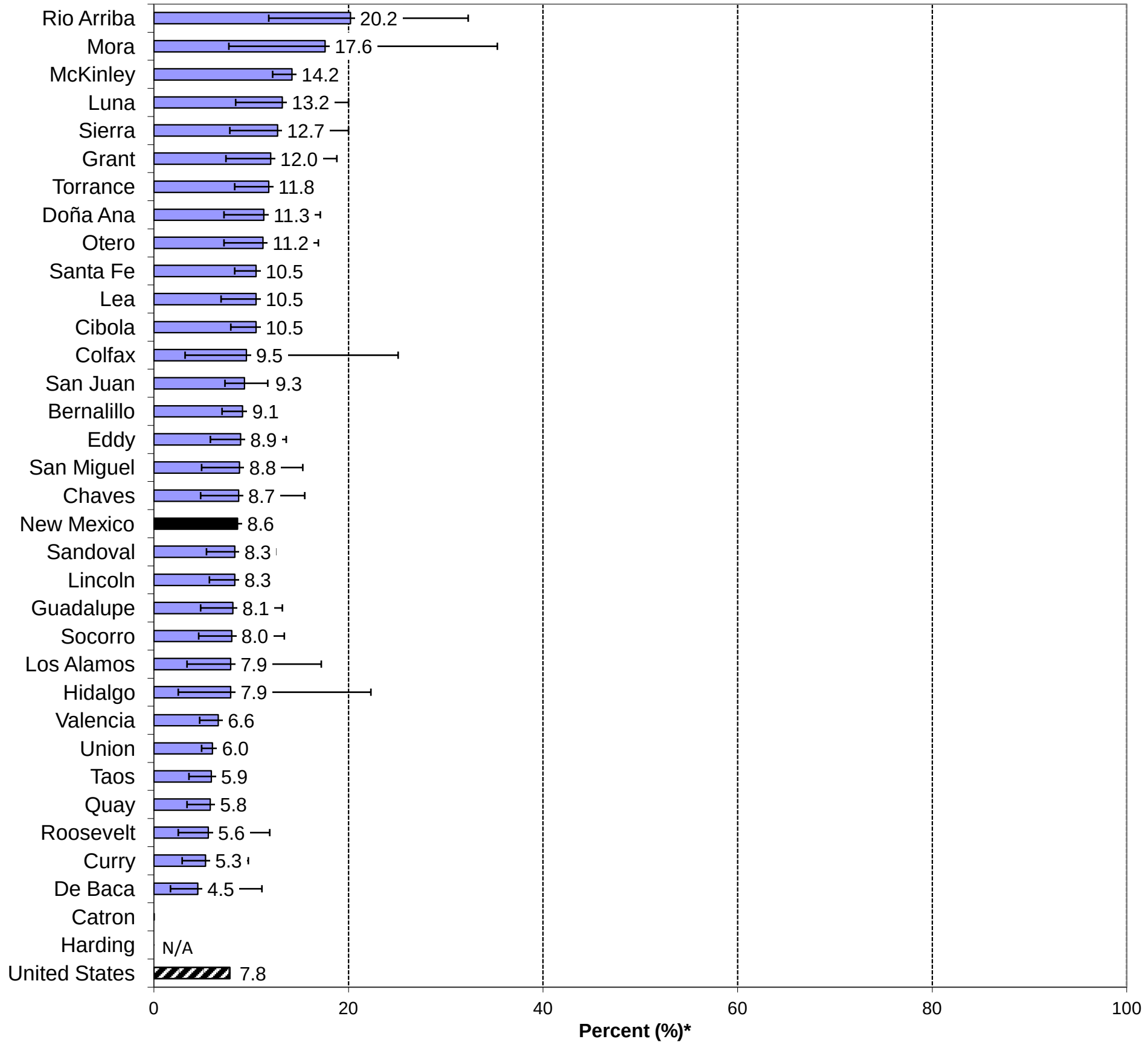
YOUTH ATTEMPTED SUICIDE (continued)

Chart 2: Attempted Suicide, by Grade Level and Gender, Grades 9 - 12, NM, 2011



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, 2011



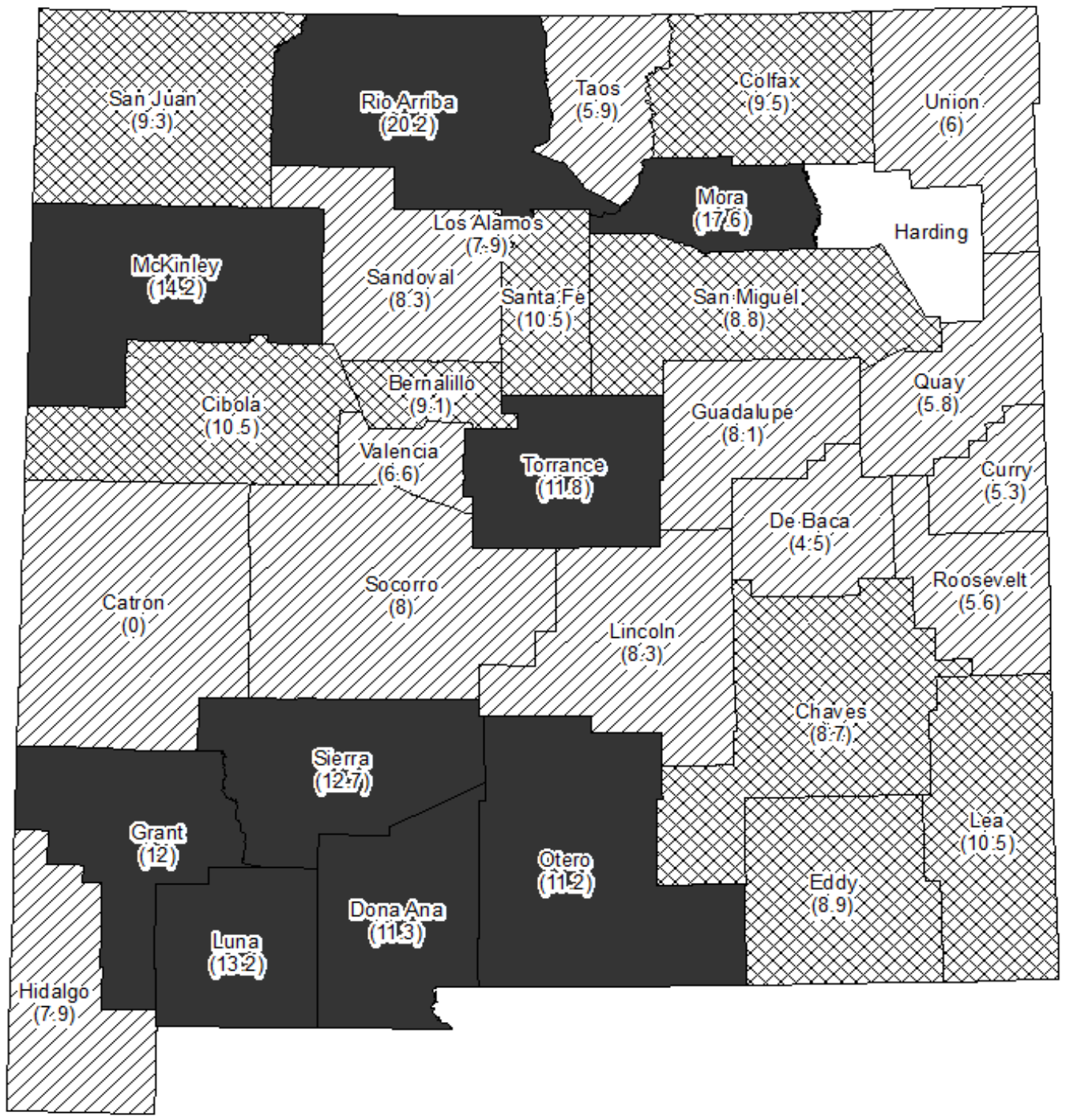
* Estimate of percent of high school students who attempted suicide at least once in past 12 months

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH RISK AND RESILIENCY

Association Between Risk and Resilincy

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. Results from the 2011 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.

Resilency factor results presented in the following charts are for:

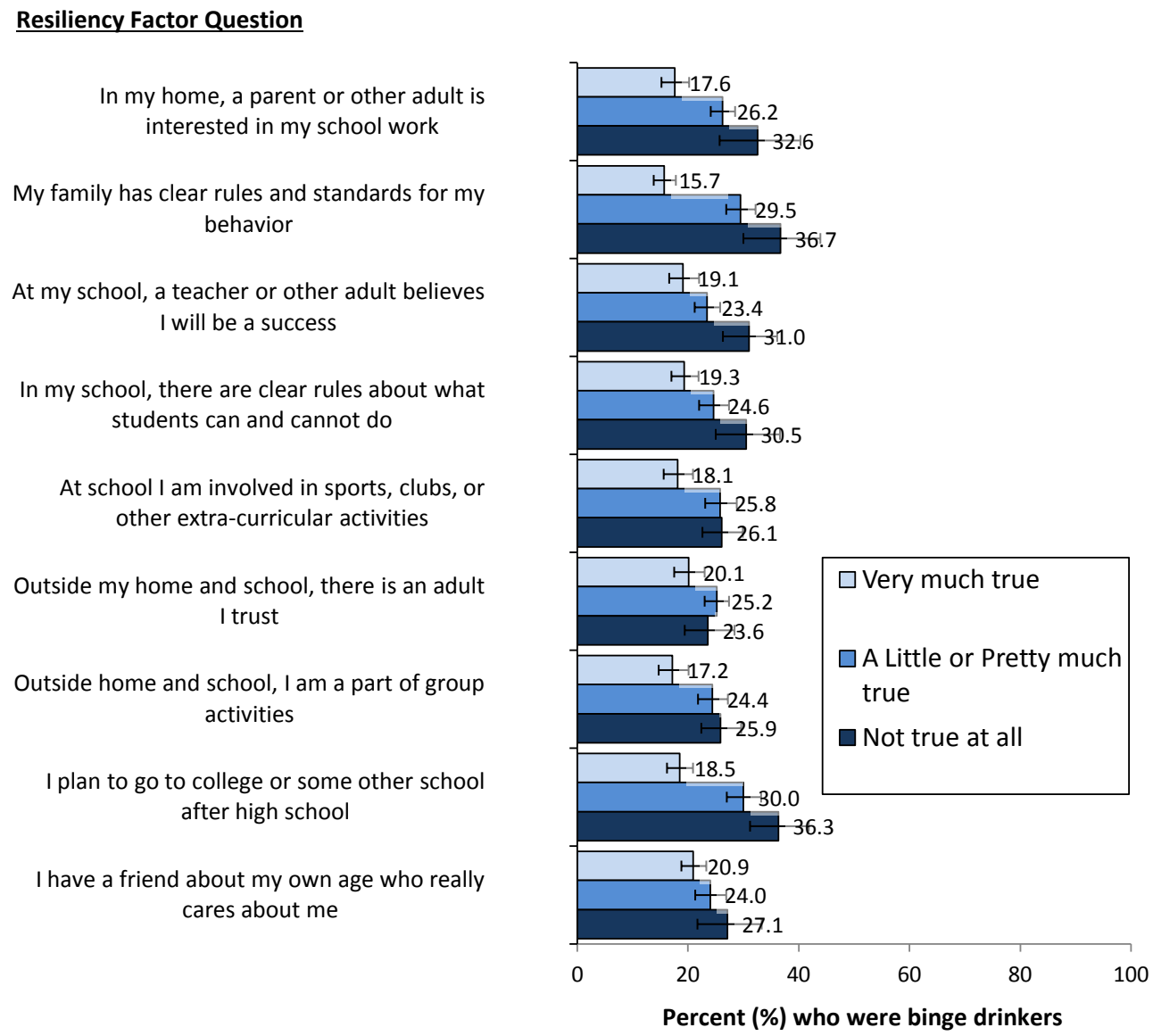
- In my home, a parent or other adult is interested in my school work
- My family has clear rules and standards for my behavior
- At my school, a teacher or other adult believes I will be a success
- In my school, there are clear rules about what students can and cannot do
- At school I am involved in sports, clubs, or other extra-curricular activities
- Outside my home and school, there is an adult I trust
- 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 lengh 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 (light colored bars) had a lower prevalence of risk behaviors than other students, and students who said "Not true at all" (dark colored bars) had higher rates of risk behaviors.

Chart 1: Binge Drinking* by Selected Resiliency Factors, Grades 9-12, 2011

Students were less likely to be binge drinkers if they said "Very much true" to:

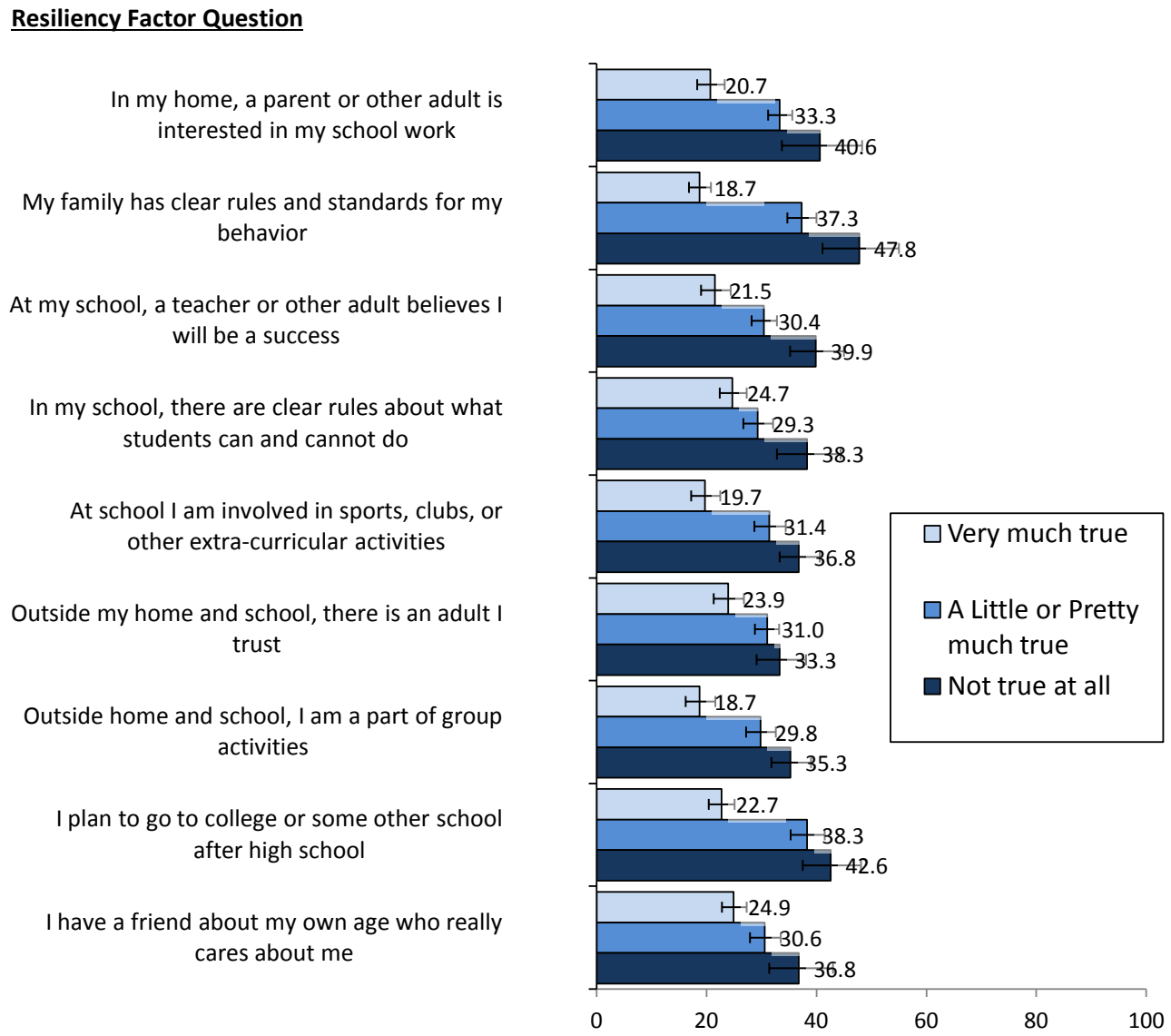
- In my home, a parent or other adult is interested in my school work
- My family has clear rules and standards for my behavior
- At my school, a teacher or other adult believes I will be a success
- In my school, there are clear rules about what students can and cannot do
- At school I am involved in sports, clubs, or other extra-curricular activities
- I plan to go to college or some other school after high school



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

Chart 2: Current Marijuana Use* by Selected Resiliency Factors, Grades 9-12, 2011

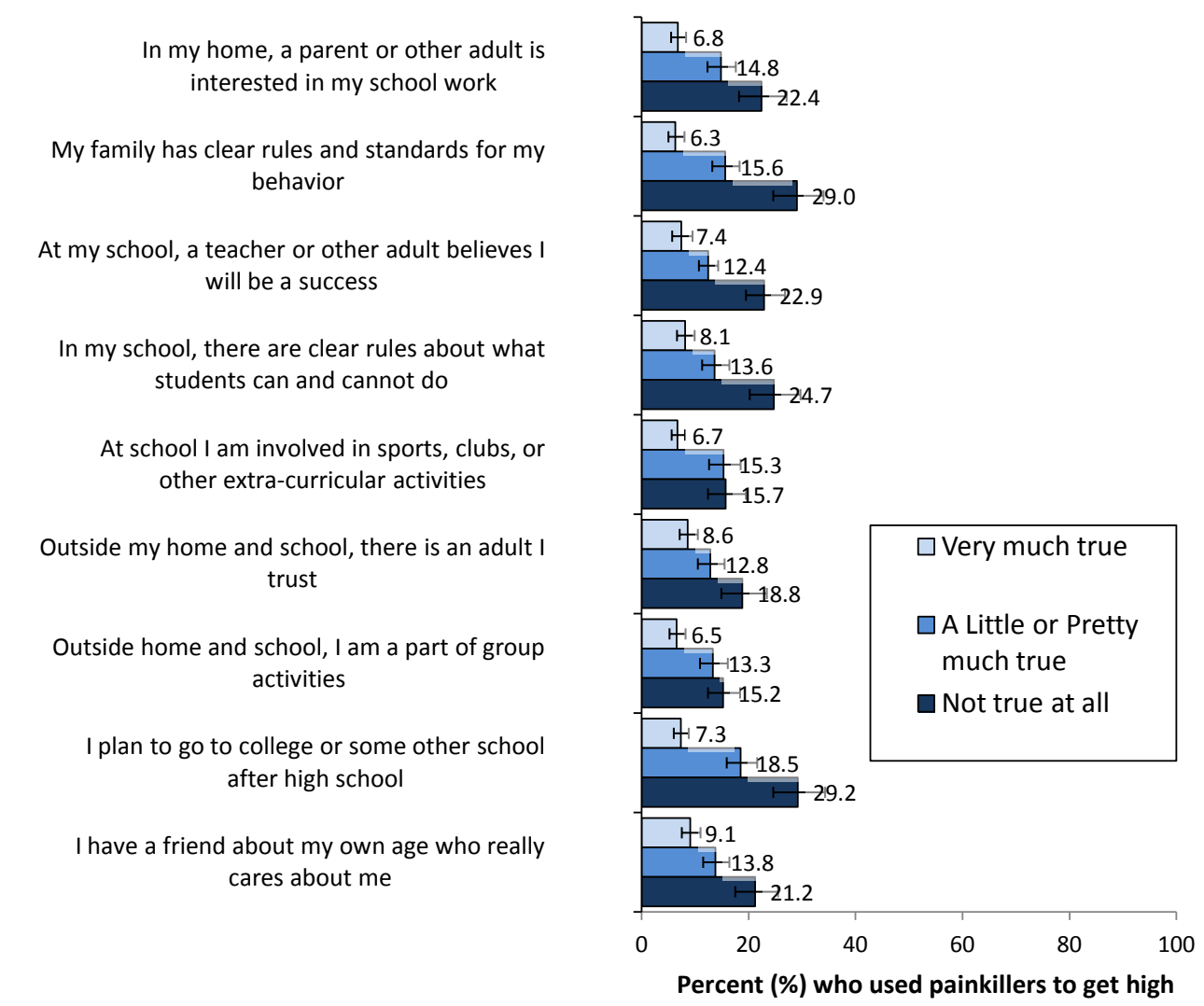
Students were less likely to be current marijuana users if they said "Very much true" to any of the resiliency questions.



** Used marijuana in the past 30 days*

Chart 3: Used Pain Killers to Get High* by Selected Resiliency Factors, Grades 9-12, 2011

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

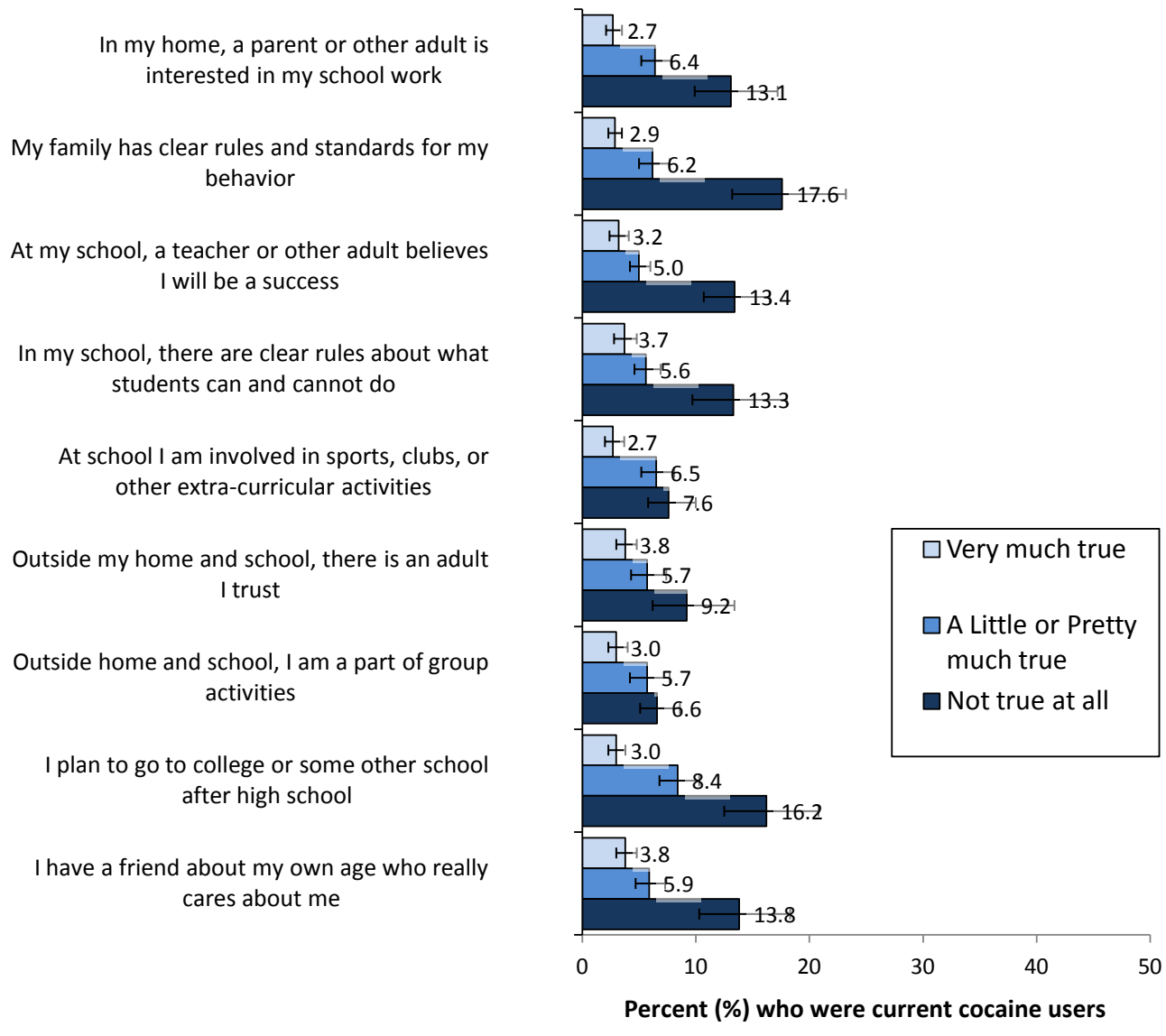


** Used a pain killer, like Vicodin, OxyContin, or Percocet, to get high in the past 30 days*

YOUTH RISK AND RESILIENCY (continued)

Chart 4: Current Cocaine Use* by Selected Resiliency Factors, Grades 9-12, 2011

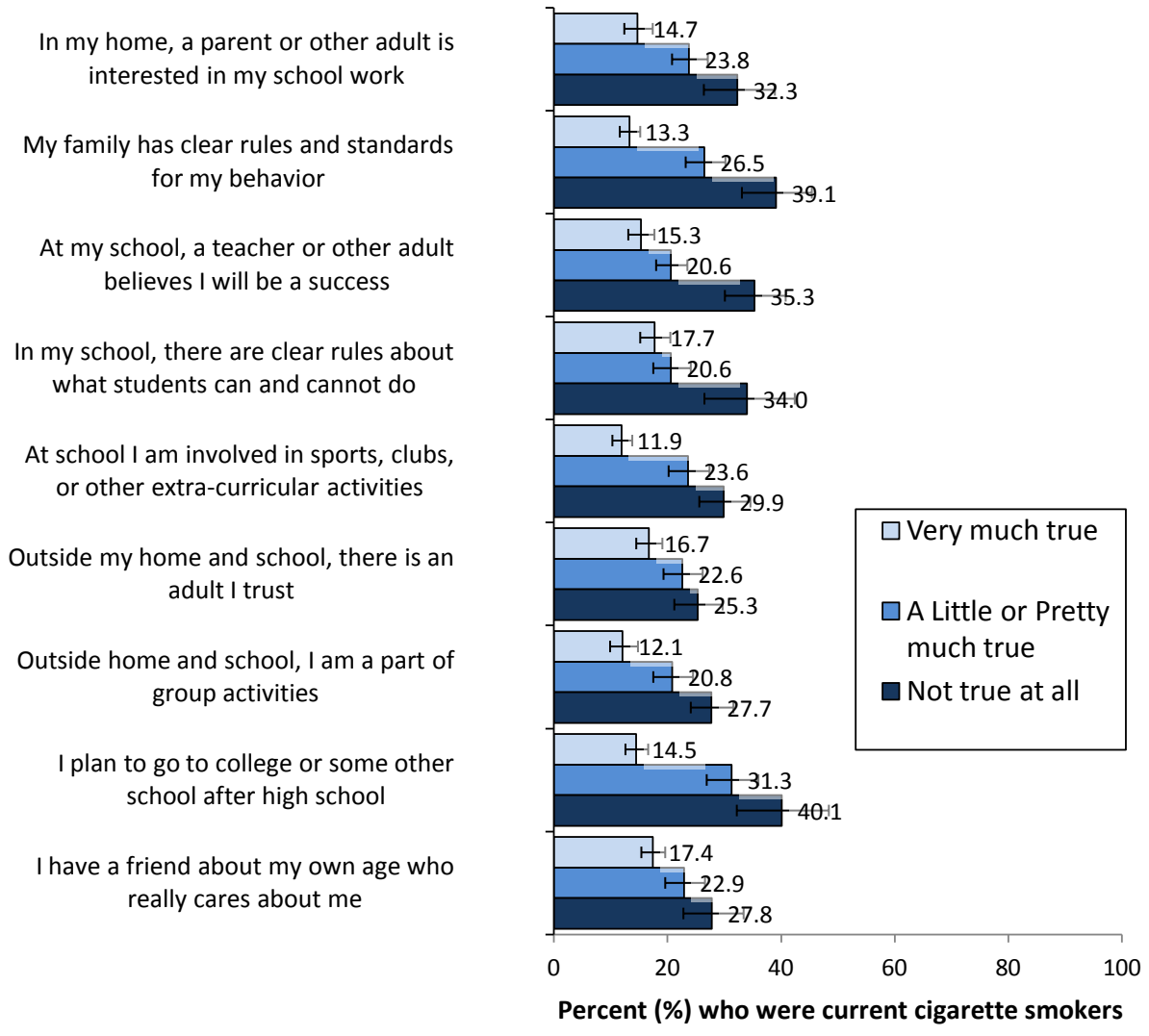
Students were less likely to be current cocaine users if they said "Very much true" to any of the resiliency questions.



** 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, 2011

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*

YOUTH RISK AND RESILIENCY (continued)

Chart 6: Feelings of Sadness or Hopelessness* by Selected Resiliency Factors, Grades 9-12, 2011

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

- In my home, a parent or other adult is interested in my school work
- My family has clear rules and standards for my behavior
- At my school, a teacher or other adult believes I will be a success
- At school I am involved in sports, clubs, or other extra-curricular activities
- Outside my home and school, there is an adult I trust
- Outside home and school, I am a part of group activities
- I plan to go to college or some other school after high school

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

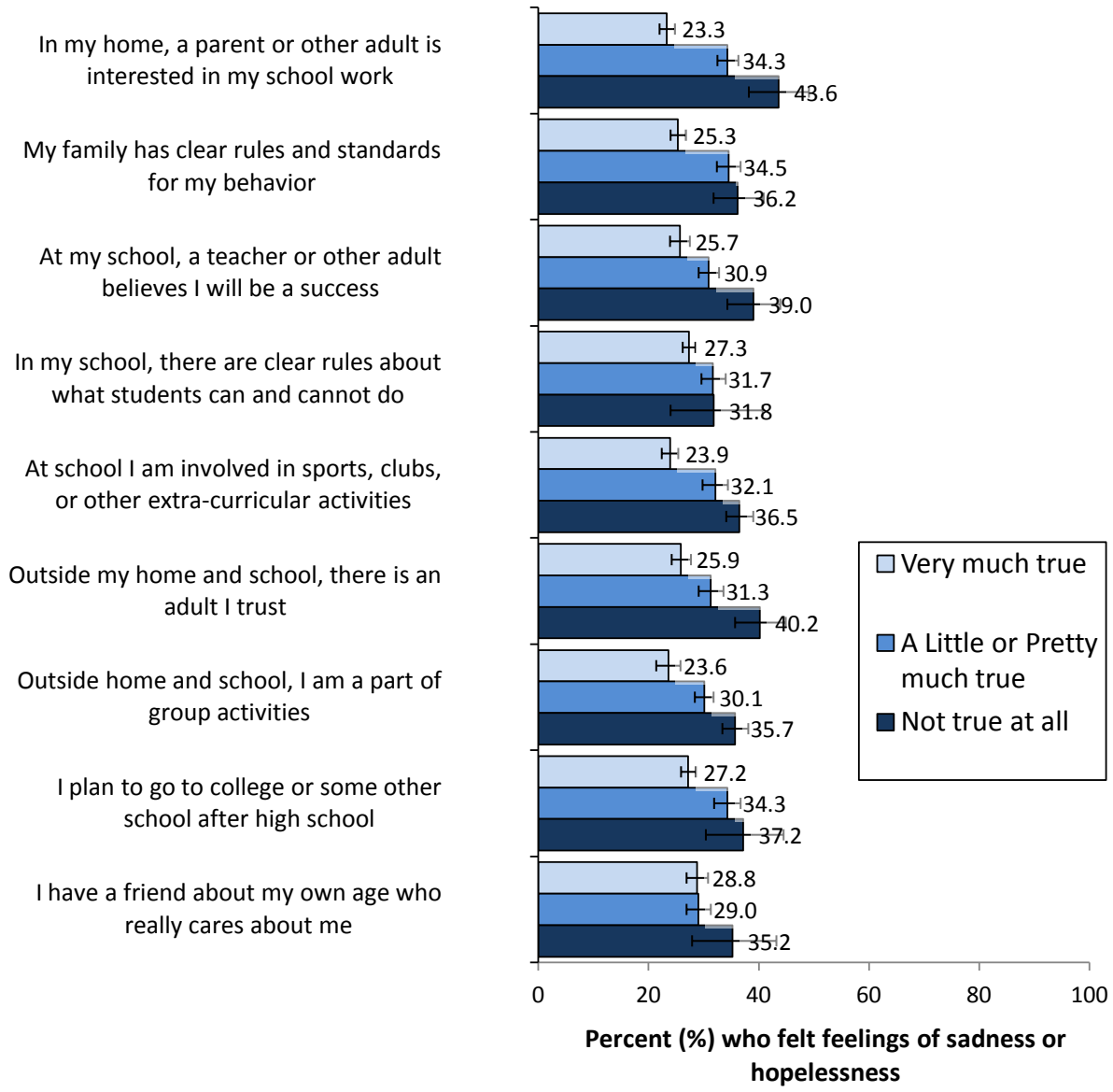
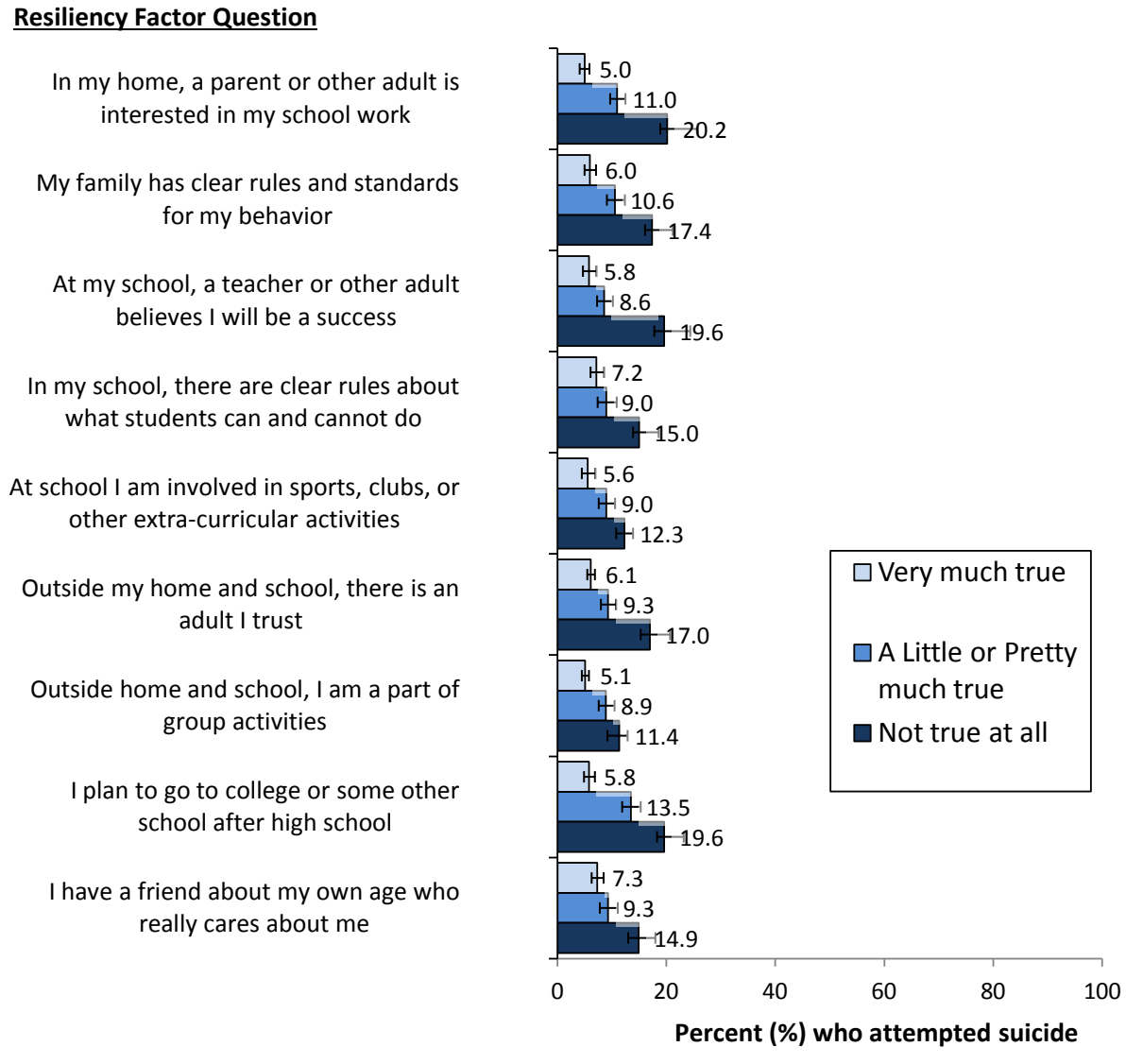


Chart 7: Suicide Attempts* by Selected Resiliency Factors, Grades 9-12, 2011

Students were less likely to attempt suicide if they said "Very much true" to

- In my home, a parent or other adult is interested in my school work
- My family has clear rules and standards for my behavior
- At my school, a teacher or other adult believes I will be a success
- At school I am involved in sports, clubs, or other extra-curricular activities
- Outside my home and school, there is an adult I trust
- 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

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



Section 2

Consumption

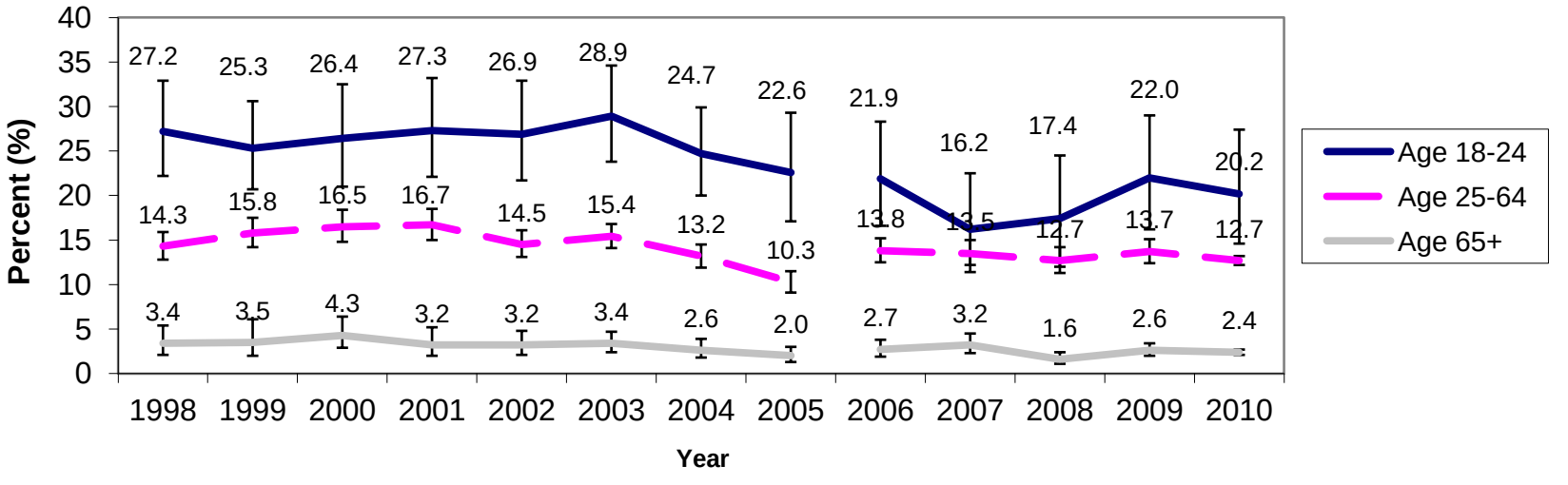
ADULT BINGE DRINKING

Problem Statement

Binge drinking is defined as a pattern of alcohol consumption that brings the blood alcohol concentration (BAC) level to 0.08% or above. This pattern of drinking usually corresponds to 5 or more drinks on a single occasion for men or 4 or more drinks on a single occasion for women, generally within about 2 hours. According to the latest estimates from the Centers for Disease Control and Prevention, about 47% of homicides, 32% of falls injury deaths, 29% of drug overdose deaths, and 23% of suicide deaths are alcohol attributable. Likewise, alcohol consumption is the primary causal factor in roughly 45% of motor vehicle crash deaths among males aged 20-44, and in more than a third of motor vehicle crash deaths among females aged 20-44. Binge drinking is also associated with a wide range of other social problems, including domestic and sexual violence, crime, and risky sexual behavior.

Table 1 shows that binge drinking rates decrease with age and are higher among males. Chart 1 shows that binge drinking prevalence among younger adults, after decreasing for several years in a row, appears to have increased from 2008 to 2010. Chart 2 shows that adults who do binge drink continue to do so on average four times per month; and to drink well above the binge drinking threshold when they do. County-level results are shown in Table 2 and Charts 3-4. Survey-related issues (e.g., poor landline telephone coverage) may be affecting reported binge drinking rates in some counties (e.g., McKinley County).

Chart 1: Binge Drinking (past 30 days)* by Age, Adults Aged 18+, New Mexico, 1998-2010



* Binge drinking definition: 1998-2005, drinking five or more drinks on an occasion at least once in past 30 days; 2006-2010, drinking five or more drinks (for men) or four or more drinks (for women) on an occasion at least once in past 30 days

Source: BRFSS; 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, 2010

		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	White	-	39,812	2,102	53,624	-	15.2	2.6	14.4
	Hispanic	-	35,526	1,179	53,442	-	20.4	4.0	20.6
	Americn Indian	-	2,601	-	3,769	-	7.6	-	8.1
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	29,386	81,326	3,509	114,221	29.2	16.4	3.0	16.0
Female	White	-	16,257	1,442	19,607	-	6.9	1.4	5.4
	Hispanic	-	16,601	568	22,177	-	7.9	1.4	7.4
	Americn Indian	-	3,212	88	6,592	-	7.4	2.2	11.2
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	10,645	36,609	2,098	49,351	11.0	7.1	1.4	6.5
Total	White	13,618	56,069	3,544	73,232	22.9	11.3	2.0	9.9
	Hispanic	21,745	52,127	1,747	75,619	20.6	13.6	2.5	13.5
	Americn Indian	-	5,814	316	10,361	-	7.5	4.0	9.9
	Black	-	678	-	1,114	-	4.0	-	4.4
	Asian/Pacific Islander	-	-	-	475	-	-	-	2.2
	Total	40,031	117,934	5,607	163,572	20.2	11.7	2.1	11.1

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

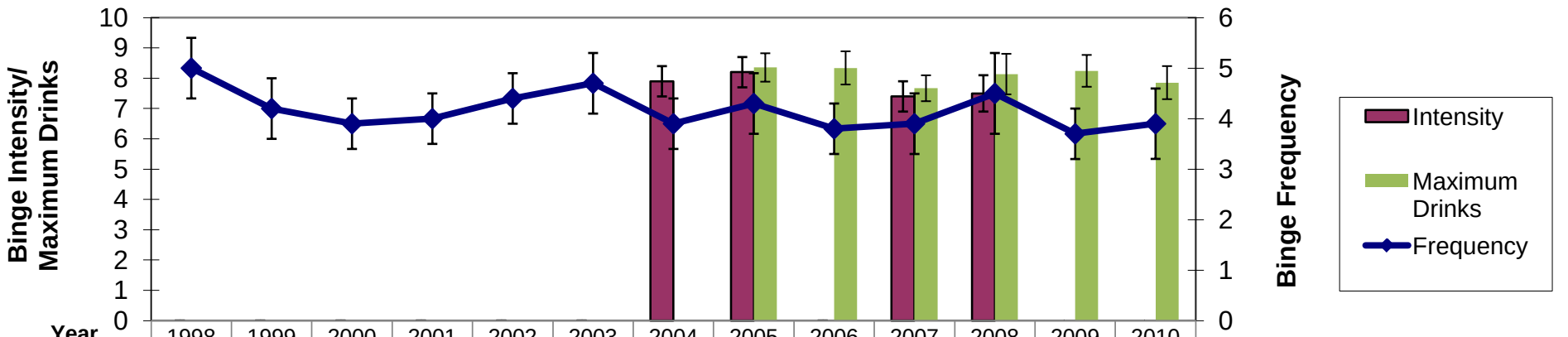
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAES

ADULT BINGE DRINKING (continued)

Chart 2: Binge Drinking Frequency and Intensity*, Adult Binge Drinkers Aged 18+, New Mexico, 1998-2010



Year	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Intensity	0.0	0.0	0.0	0.0	0.0	0.0	7.9	8.2	0.0	7.4	7.5	0	0.0
Maximum Drinks								8.4	8.3	7.7	8.1	8.2	7.9
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

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

Source: BRFSS; SAES

Table 2: Binge Drinking (past 30 days) by Race and County, Adults Aged 18+, New Mexico, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	26,438	21,069	-	-	-	49,392	10.6	12.1	-	-	-	10.3
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	2,018	3,777	-	-	-	5,795	8.7	17.1	-	-	-	11.7
Cibola	1,025	-	711	-	-	2,054	11.2	-	13.5	-	-	9.9
Colfax	-	-	-	-	-	496	-	-	-	-	-	5.0
Curry	2,185	4,114	-	-	-	6,298	10.7	34.2	-	-	-	17.9
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	3,991	6,325	-	-	-	10,578	9.1	8.4	-	-	-	8.3
Eddy	2,433	4,153	-	-	-	6,774	11.5	37.8	-	-	-	19.7
Grant	1,627	-	-	-	-	3,905	9.4	-	-	-	-	14.1
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	1,735	1,453	-	-	-	3,624	9.2	8.4	-	-	-	9.0
Lincoln	955	-	-	-	-	1,135	9.5	-	-	-	-	6.6
Los Alamos	1,731	-	-	-	-	2,173	13.7	-	-	-	-	13.6
Luna	-	-	-	-	-	2,530	-	-	-	-	-	14.3
McKinley	443	212	2,505	-	-	3,160	5.1	3.9	12.0	-	-	8.7
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	3,725	-	-	-	-	7,858	14.9	-	-	-	-	16.1
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	5,551	-	-	-	6,169	-	21.1	-	-	-	16.7
Roosevelt	485	-	-	-	-	1,217	6.7	-	-	-	-	12.9
Sandoval	3,248	2,903	-	-	-	6,852	5.4	9.8	-	-	-	6.7
San Juan	7,060	2,428	238	-	-	10,085	13.7	16.5	1.5	-	-	11.7
San Miguel	-	2,807	-	-	-	4,502	-	18.8	-	-	-	19.2
Santa Fe	7,285	4,082	-	-	-	12,036	14.4	10.1	-	-	-	12.4
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	644	-	-	-	-	-	4.3
Taos	539	2,336	-	-	-	3,782	5.3	15.5	-	-	-	13.0
Torrance	-	-	-	-	-	2,600	-	-	-	-	-	14.1
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	1,408	4,503	-	-	-	6,052	5.4	18.7	-	-	-	11.1
New Mexico	73,232	75,619	10,361	1,114	475	163,572	9.9	13.5	9.9	4.4	2.2	11.1

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

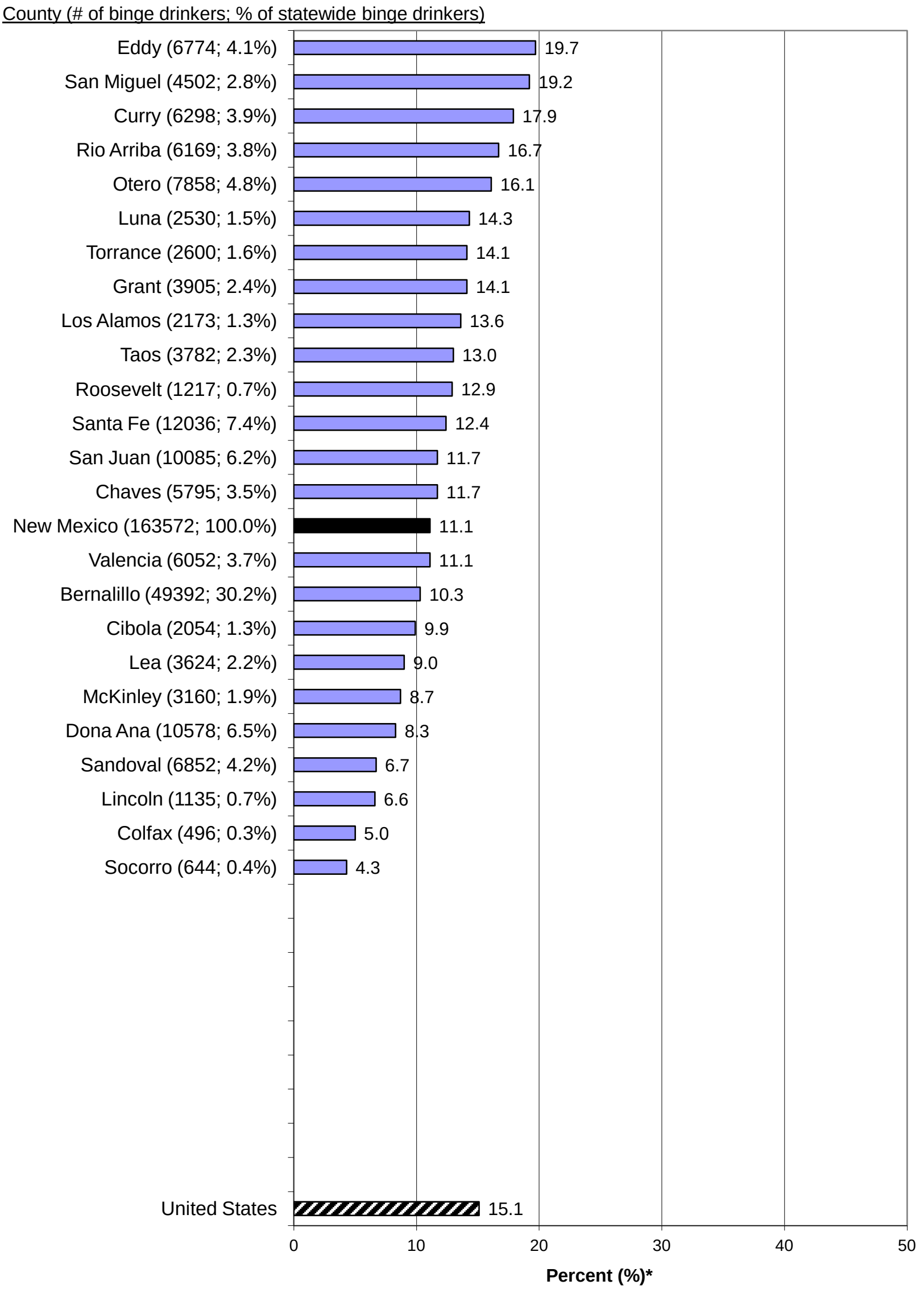
** Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

Source: BRFSS; SAES

ADULT BINGE DRINKING (continued)

Chart 3: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



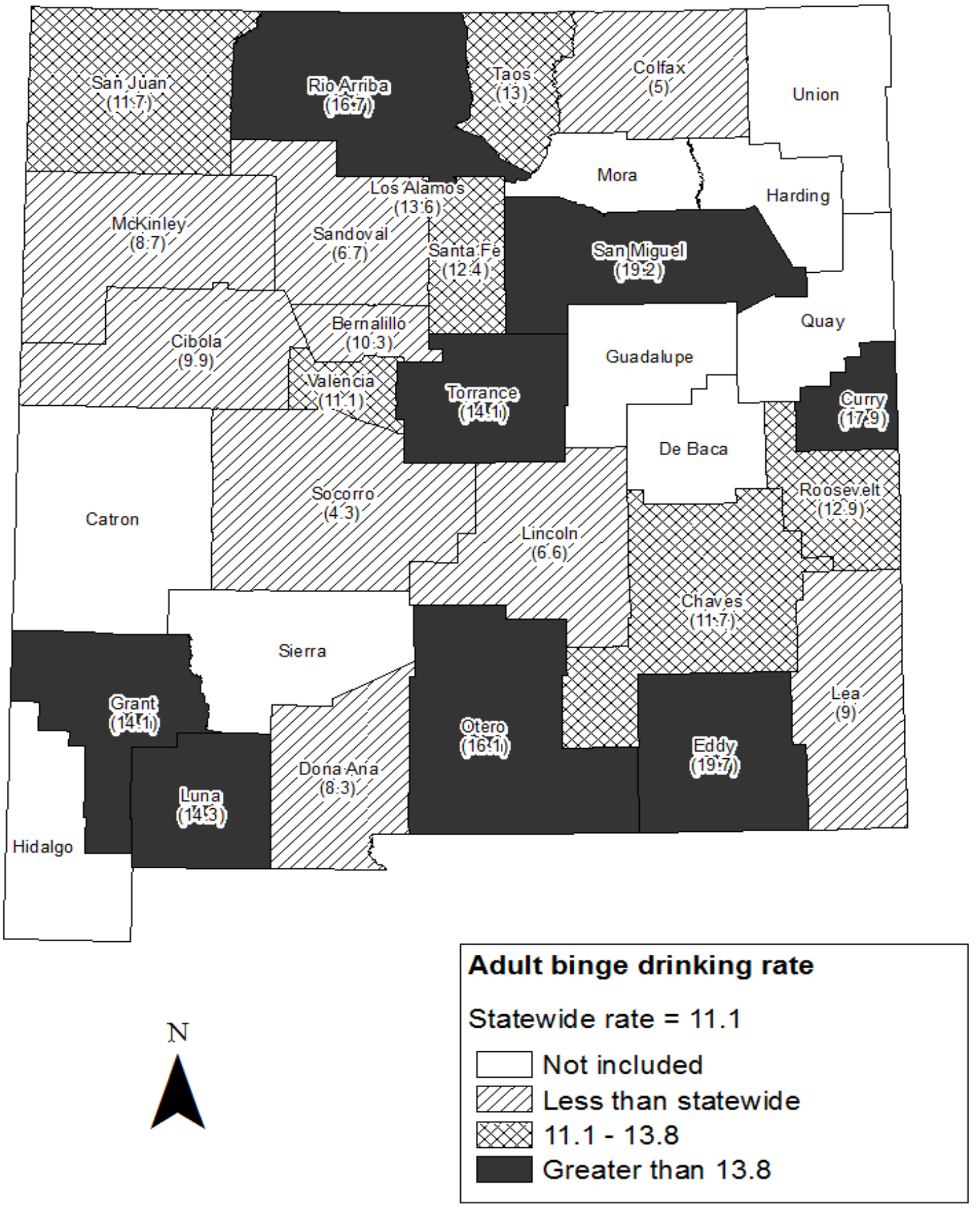
* Estimate of percent of people in population group who reported binge drinking at least once in past 30 days

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

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

ADULT BINGE DRINKING (continued)

Chart 4: Binge Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



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

Source: BRFSS; SAES

YOUTH BINGE DRINKING

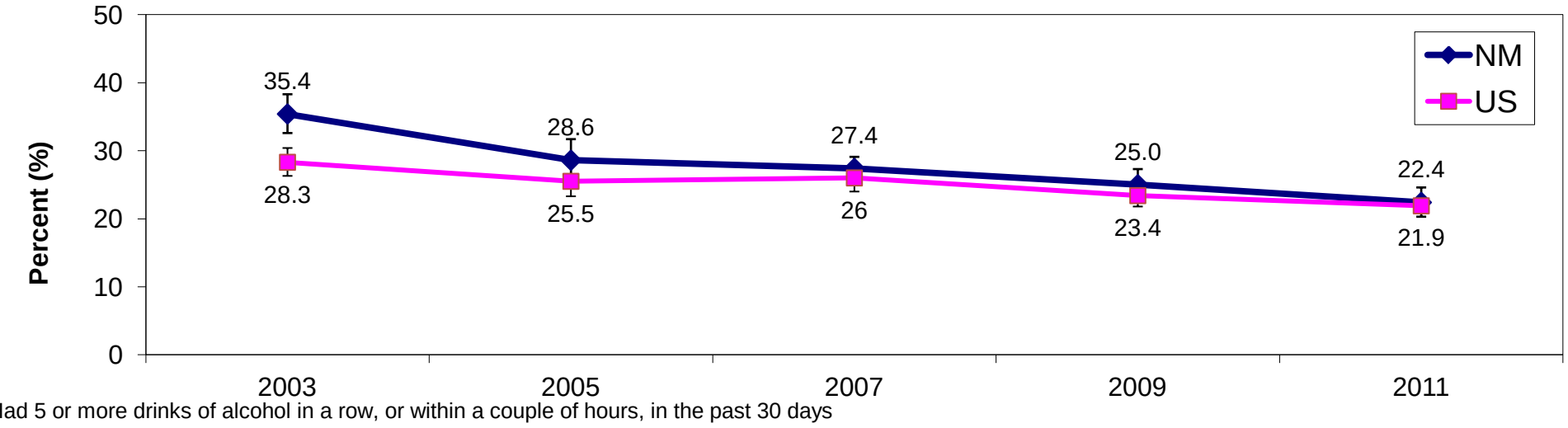
Problem Statement

Binge drinking (defined as having 5 or more drinks of alcohol in a row within a couple of hours) is a major risk factor for the three leading causes of death among youth (motor vehicle crashes, suicide, and homicide), as well as being associated with poor academic performance and risk behaviors such as impaired driving, riding with a drinking driver, physical fighting, increased number of sexual partners, and other substance use.

In 2011, 27.4% 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 2011, of the 36.9% of students who were current drinkers, 63.9% were binge drinkers, while only 37.1% did not binge drink. Chart 1 demonstrates that binge drinking prevalence has been decreasing in New Mexico since 2003, as it has been in the US since 2001 or earlier. There was no statistically significant difference between the US and New Mexico rates for binge drinking in 2011.

As shown in Chart 2, while binge drinking prevalence jumped significantly from 9th grade to 11th and 12th grades, there was no significant difference in prevalence between grades 10 and 12. There was also no difference in the prevalence of binge drinking between boys and girls, or between different racial/ethnic groups.

Chart 1: Binge Drinking* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

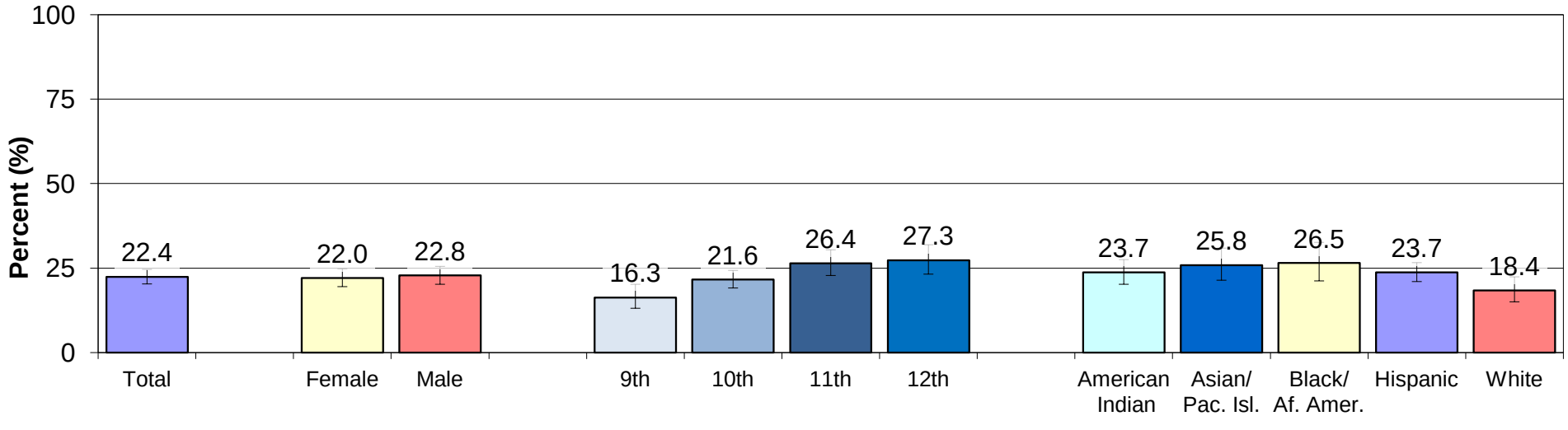
Table 1: Binge Drinking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	19.1 (12.2-28.6)	22.0 (12.5-35.8)	30.8 (20.3-43.8)	25.5 (20.1-31.7)	24.0 (18.5-30.4)
	Asian/Pacific Islander	--	--	--	--	26.8 (20.6-34.0)
	Black/African American	18.1 (11.6-27.0)	--	--	--	29.8 (21.4-39.9)
	Hispanic	15.7 (10.1-23.7)	21.6 (17.0-27.0)	26.0 (20.8-31.9)	34.5 (26.8-43.1)	24.0 (20.8-27.4)
	White	11.0 (6.9-17.2)	17.2 (10.4-27.2)	23.2 (18.2-29.1)	25.4 (17.7-35.0)	18.1 (14.0-23.0)
	Total	15.4 (12.1-19.5)	20.0 (16.1-24.6)	28.0 (23.5-32.9)	31.4 (25.8-37.6)	22.8 (20.2-25.5)
Female	American Indian	18.2 (13.6-23.8)	23.3 (17.8-29.9)	32.4 (23.0-43.4)	21.2 (14.6-29.6)	23.3 (20.3-26.6)
	Asian/Pacific Islander	--	--	--	--	25.2 (18.4-33.4)
	Black/African American	--	--	--	--	21.2 (15.3-28.7)
	Hispanic	19.4 (14.0-26.2)	24.7 (21.5-28.2)	26.1 (18.3-35.9)	23.8 (18.1-30.6)	23.5 (20.1-27.2)
	White	12.9 (8.6-18.8)	20.7 (16.2-26.1)	19.8 (12.2-30.5)	25.3 (17.7-34.8)	18.9 (14.7-23.9)
	Total	17.3 (13.4-22.1)	23.2 (21.0-25.6)	25.0 (20.1-30.5)	23.2 (18.8-28.2)	22.0 (19.5-24.8)
Total	American Indian	18.7 (13.8-24.7)	22.6 (16.2-30.6)	31.5 (24.3-39.8)	23.5 (20.3-27.0)	23.7 (20.2-27.5)
	Asian/Pacific Islander	19.1 (11.2-30.5)	12.8 (6.5-23.6)	39.0 (27.0-52.5)	36.5 (25.5-49.2)	25.8 (21.4-30.9)
	Black/African American	18.7 (12.5-27.1)	28.8 (21.3-37.7)	31.7 (15.6-53.8)	31.1 (20.9-43.4)	26.5 (21.2-32.6)
	Hispanic	17.7 (12.9-23.8)	23.3 (20.2-26.6)	26.1 (21.2-31.6)	28.6 (23.1-34.8)	23.7 (21.0-26.6)
	White	11.9 (8.2-17.0)	18.8 (14.1-24.6)	21.5 (16.4-27.8)	25.4 (19.2-32.7)	18.4 (15.0-22.4)
	Total	16.3 (13.1-20.2)	21.6 (19.1-24.3)	26.4 (22.8-30.4)	27.3 (23.2-31.9)	22.4 (20.3-24.6)

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

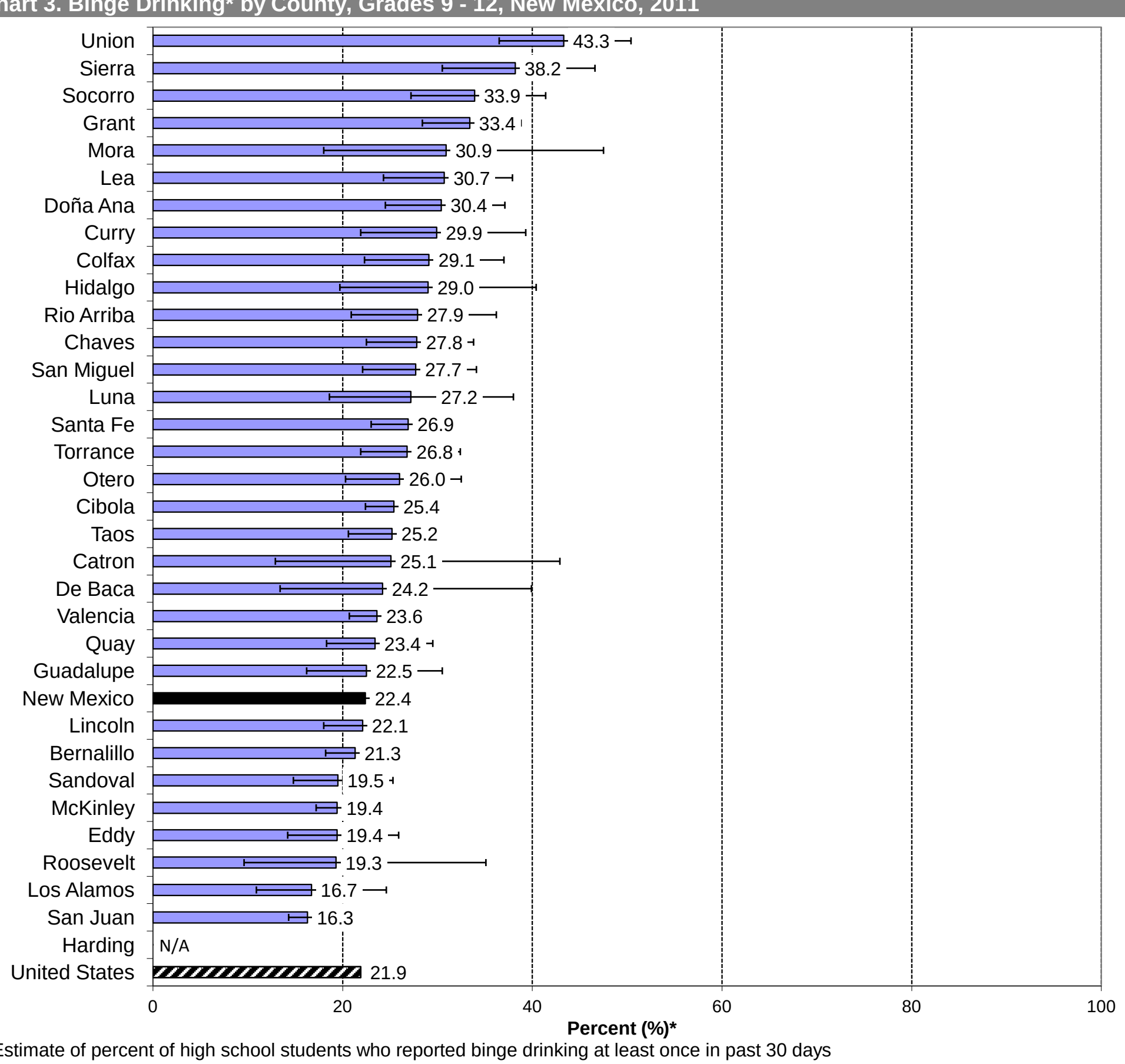
YOUTH BINGE DRINKING (continued)

Chart 2: Binge Drinking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



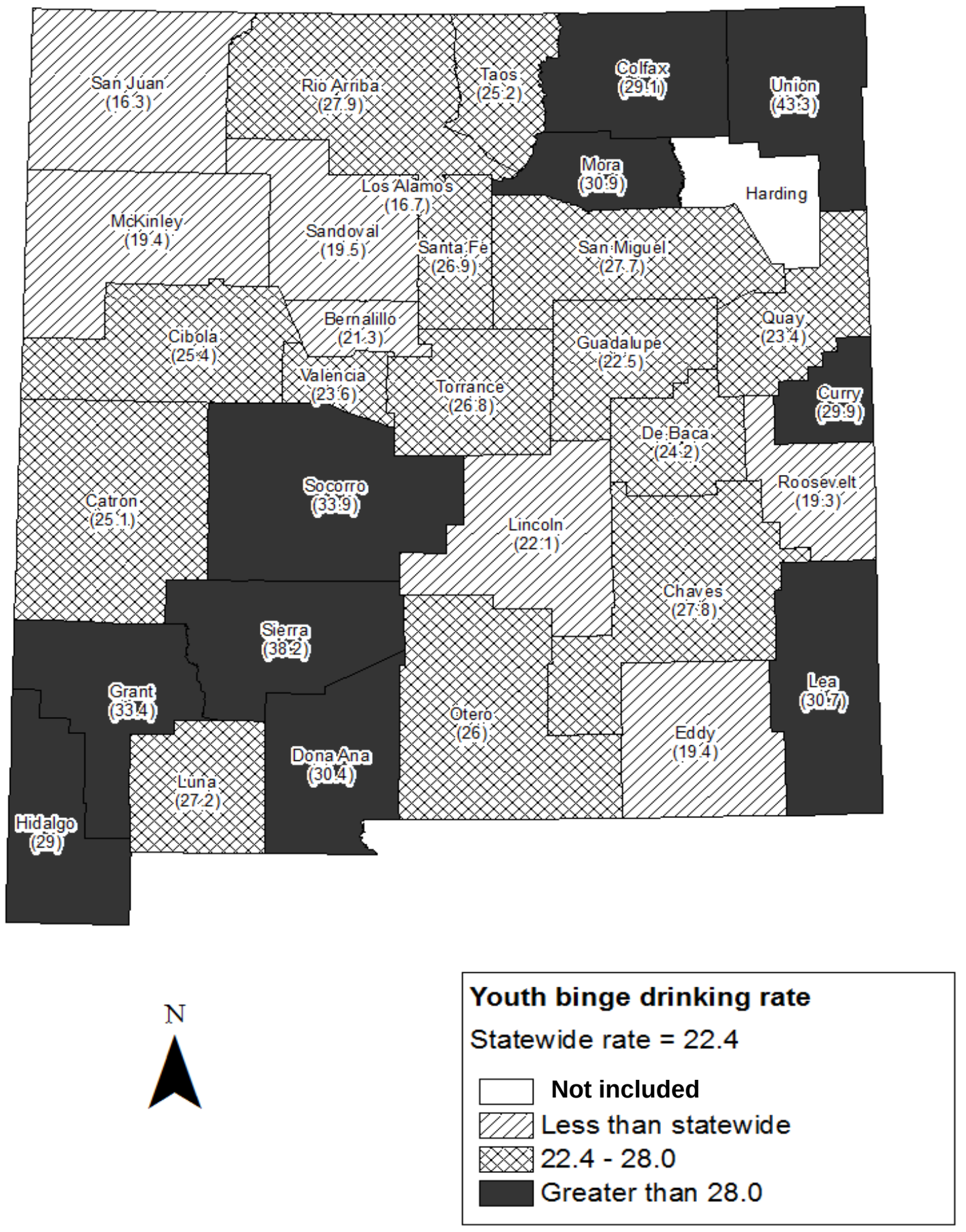
* Estimate of percent of high school students who reported binge drinking at least once in past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

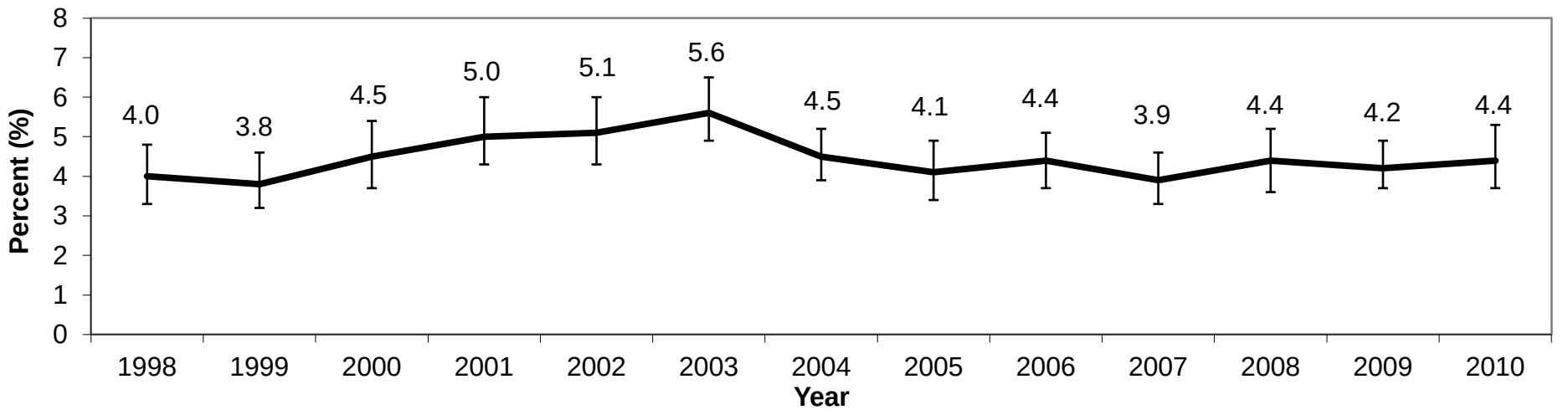
ADULT HEAVY DRINKING

Problem Statement

Heavy drinking (defined as having more than 2 drinks/day, for males; and more than 1 drink/day, for females) is a pattern of excessive alcohol consumption that can lead to alcohol-related chronic disease and death. According to the latest estimates from the CDC, 100% of numerous chronic disease conditions (e.g., alcoholic liver disease, alcohol dependence syndrome), and a significant proportion of many other conditions (e.g., unspecified liver cirrhosis, pancreatitis) are alcohol-related. For each of these causes, it is chronic heavy drinking (as opposed to acute episodic, or binge drinking) that is considered primarily responsible for the incidence and progression of alcohol-related chronic disease. Heavy drinking is also associated with a wide range of other social problems, including alcoholism (also known as alcohol dependence), domestic violence and family disruption.

Chart 1 shows that adult heavy drinking prevalence has been more-or-less constant since 2005. Heavy drinking prevalence is still lower among adults in New Mexico (4.4%) than in the U.S. overall (5.0%). As shown in Table 1, heavy drinking was most prevalent among adults in the 25-64 year age group, with 4.9% of adults in this group reporting past-month heavy drinking. New Mexico men were somewhat more likely to report chronic drinking than women (5.2% vs 3.7%); and American Indian females had the highest reported rate of heavy drinking (5.6%) followed by White and Hispanic males (5.2%) and White females (4.9%).

Chart 1: Heavy Drinking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2010



* 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, 2010

		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	White	-	16,722	2,181	19,288	-	6.4	2.8	5.2
	Hispanic	-	7,686	1,057	13,233	-	4.5	3.7	5.2
	Americn Indian	-	1,375	-	1,664	-	4.1	-	3.6
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	5,164	28,048	3,238	36,450	5.2	5.7	2.8	5.2
Female	White	-	13,611	3,902	17,513	-	5.8	3.9	4.9
	Hispanic	-	4,943	568	7,319	-	2.4	1.4	2.5
	Americn Indian	-	2,271	88	3,266	-	5.3	2.2	5.6
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	2,715	20,907	4,630	28,252	2.8	4.1	3.1	3.7
Total	White	385	30,333	6,083	36,801	0.7	6.2	3.4	5.0
	Hispanic	6,298	12,629	1,625	20,553	6.0	3.3	2.4	3.7
	Americn Indian	-	3,646	88	4,930	-	4.7	1.1	4.7
	Black	-	82	-	82	-	0.5	-	0.3
	Asian/Pacific Islander	-	-	-	0	-	-	-	0.0
	Total	7,879	48,955	7,868	64,702	4.0	4.9	3.0	4.4

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

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

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

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Problem Statement (continued)

Meanwhile, it is notable that American Indian males, who have the highest rates of alcohol-related chronic disease death, once again, as in past years, have the lowest reported heavy drinking rates. The lack of congruence between heavy drinking rates and chronic disease death rates raises important questions. Is this result accurate? If so, it might suggest differences in the patterns of heavy drinking between different population groups. Perhaps, for example, the smaller proportion of the American Indian population that drinks heavily tends to drink more heavily (hence with more lethal effect) than heavy drinkers in other race/ethnic groups. On the other hand, it is also possible that this low heavy drinking rate is an artifact of survey methods. Ongoing efforts are being made to improve American Indian representation in the Behavioral Risk Factor Surveillace Survey (BRFSS). American Indian male binge drinking rates were lower than the binge drinking rates for males in other race/ethnic groups in 2010.

In 2010, as shown in Table 2 and Chart 2, heavy drinking rates were highest in Curry, Torrance and Luna counties; and substantially lower in counties that have among the highest rates of alcohol-related chronic disease death rates (e.g., McKinley, Rio Arriba, Cibola), once again raising the types of questions mentioned above.

Table 2: Heavy Drinking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	13,023	4,222	-	-	-	19,646	5.3	2.4	-	-	-	4.2
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	1,447	1,138	-	-	-	2,585	6.3	5.2	-	-	-	5.3
Cibola	350	-	341	-	-	691	3.8	-	6.6	-	-	3.2
Colfax	-	-	-	-	-	377	-	-	-	-	-	3.9
Curry	1,650	-	-	-	-	3,973	8.1	-	-	-	-	11.4
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	2,438	1,625	-	-	-	4,063	5.6	2.3	-	-	-	3.3
Eddy	425	216	-	-	-	641	2.0	2.0	-	-	-	1.9
Grant	288	-	-	-	-	1,947	1.7	-	-	-	-	7.1
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	905	594	-	-	-	1,499	4.8	3.4	-	-	-	3.7
Lincoln	989	-	-	-	-	1,169	10.0	-	-	-	-	6.8
Los Alamos	64	-	-	-	-	506	0.5	-	-	-	-	3.1
Luna	-	-	-	-	-	1,499	-	-	-	-	-	8.6
McKinley	133	609	984	-	-	1,726	1.5	10.7	4.7	-	-	4.7
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	1,295	-	-	-	-	2,466	5.3	-	-	-	-	5.1
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	1,041	-	-	-	1,062	-	4.1	-	-	-	2.9
Roosevelt	390	-	-	-	-	390	5.4	-	-	-	-	4.1
Sandoval	1,631	783	-	-	-	2,719	2.7	2.7	-	-	-	2.7
San Juan	1,552	1,460	455	-	-	3,539	3.0	10.0	2.9	-	-	4.1
San Miguel	-	578	-	-	-	702	-	3.9	-	-	-	3.0
Santa Fe	5,428	1,104	-	-	-	6,968	10.8	2.7	-	-	-	7.1
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	54	-	-	-	-	-	0.4
Taos	593	159	-	-	-	1,659	5.8	1.1	-	-	-	5.8
Torrance	-	-	-	-	-	1,648	-	-	-	-	-	8.9
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	1,232	1,078	-	-	-	2,311	4.8	4.5	-	-	-	4.3
New Mexico	36,801	20,553	4,930	82	0	64,702	5.0	3.7	4.7	0.3	0.0	4.4

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

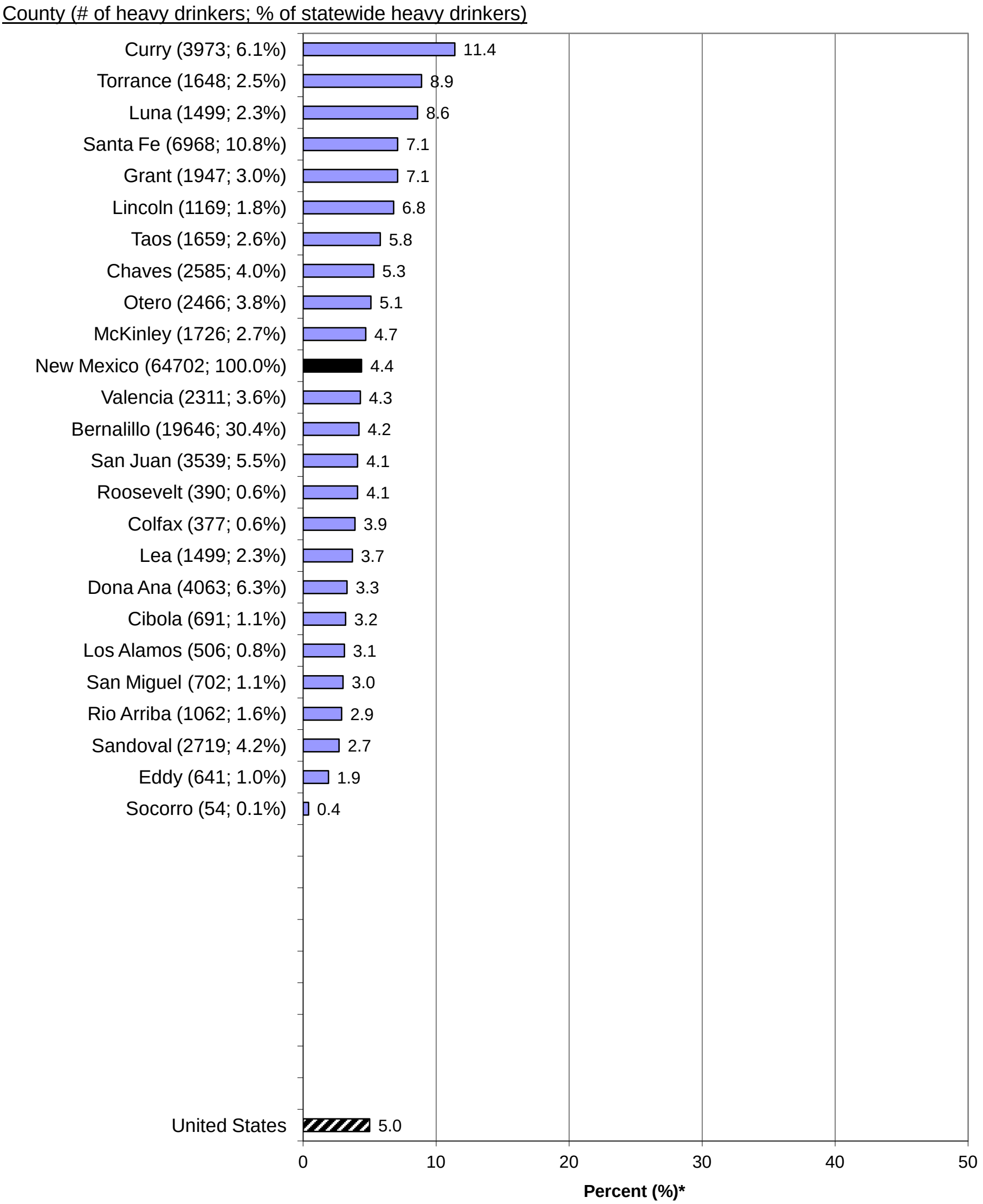
** Estimate of percent of people in population group who reported heavy drinking in past 30 days

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

Source: BRFSS; SAES

ADULT HEAVY DRINKING (continued)

Chart 2: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



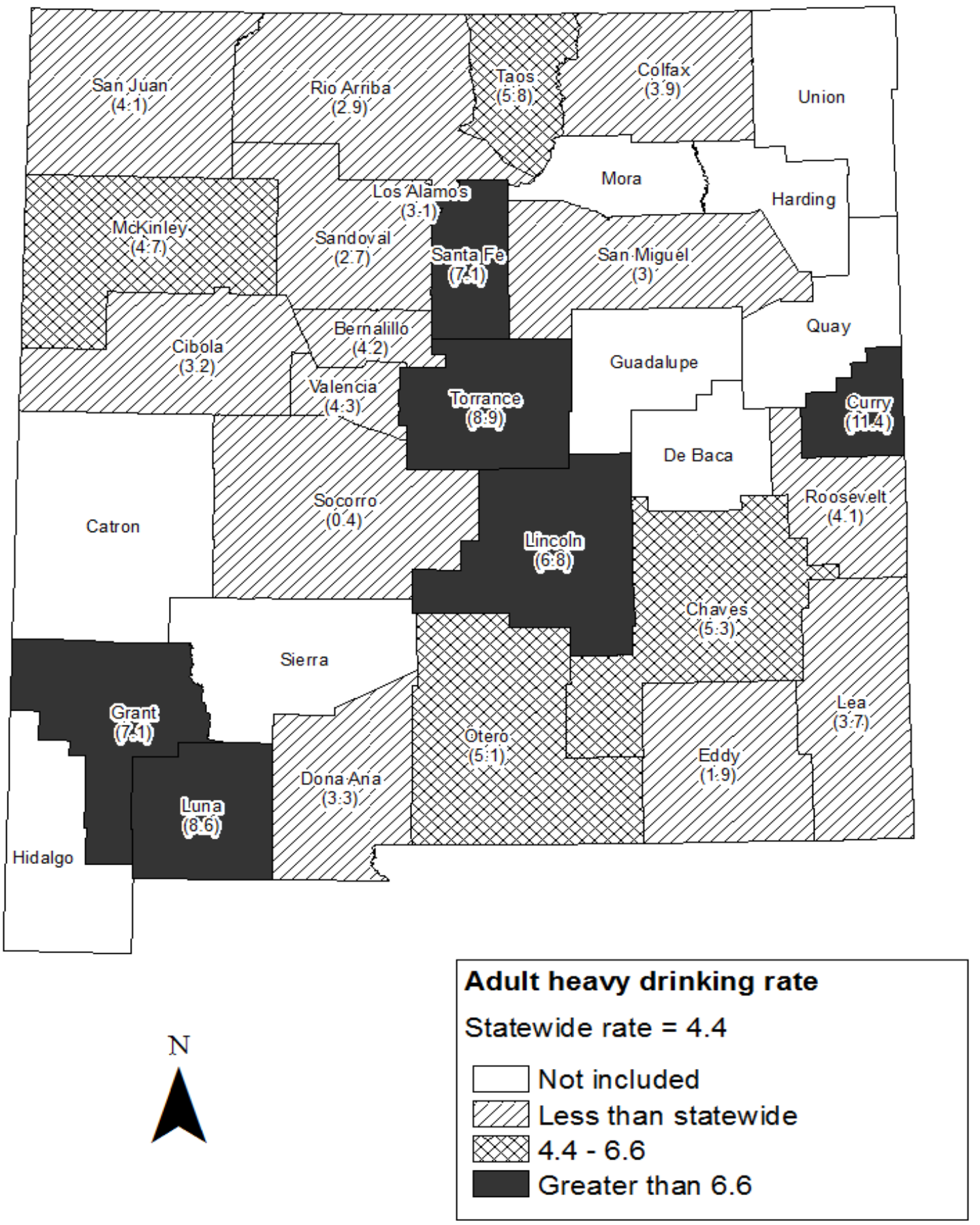
* Estimate of percent of people in population group who reported heavy drinking in past 30 days

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

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

ADULT HEAVY DRINKING (continued)

Chart 3: Heavy Drinking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



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

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

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

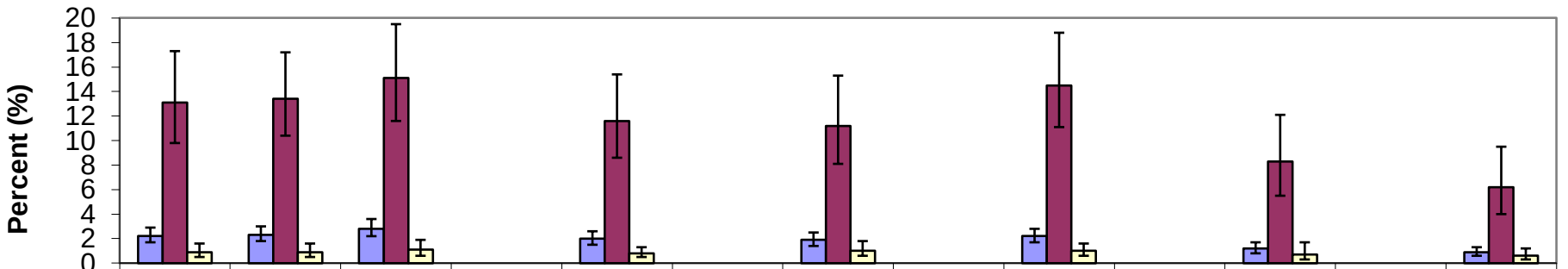
ADULT DRINKING AND DRIVING

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 2010, only 0.9% of the general population reported driving after drinking; but 6.2% of binge drinkers reported engaging in this risky behavior in the past 30 days, compared to only 0.6% 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 Table 1 and Chart 2, in 2010 driving after drinking was most prevalent among the middle aged, with 2.2% of those aged 25-64 reporting past-month drinking and driving in 2010, compared to lower rates in other age groups. This reflects a steady (but not statistically significant) decline in drinking and driving by young adults (age 18-24) and a fluctuating pattern among those aged 25-64. New Mexico men continued to be more than twice as likely to report drinking and driving as women (1.4% vs 0.5%). Hispanic males (1.9%) were more likely to report drinking and driving than White (1.1%) and American Indian (1.1%) males. On the plus side, rates among all these groups were substantially reduced from 2006. Table 2 and Chart 3 show drinking and driving rates by county.

Chart 1: Drinking and Driving (past 30 days)* by Drinking Status, Adults Aged 18+, New Mexico, 1998-2010



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

* 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, 2010

		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	White	-	3,717	244	3,961	-	1.4	0.3	1.1
	Hispanic	-	3,702	252	4,888	-	2.1	0.9	1.9
	Americn Indian	-	325	-	519	-	1.0	-	1.1
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	933	8,061	690	9,684	0.9	1.6	0.6	1.4
Female	White	-	1,417	0	1,417	-	0.6	0.0	0.4
	Hispanic	-	987	0	987	-	0.5	0.0	0.3
	Americn Indian	-	481	0	1,388	-	1.1	0.0	2.4
	Black	-	-	-	0	-	-	-	0.0
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	907	2,884	0	3,791	0.9	0.6	0.0	0.5
Total	White	0	5,133	244	5,377	0.0	1.0	0.1	0.7
	Hispanic	933	4,689	252	5,875	0.9	1.2	0.4	1.1
	Americn Indian	-	805	194	1,906	-	1.1	2.5	1.8
	Black	-	240	-	240	-	1.4	-	1.0
	Asian/Pacific Islander	-	-	-	0	-	-	-	0.0
	Total	1,840	10,946	690	13,476	0.9	1.1	0.3	0.9

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

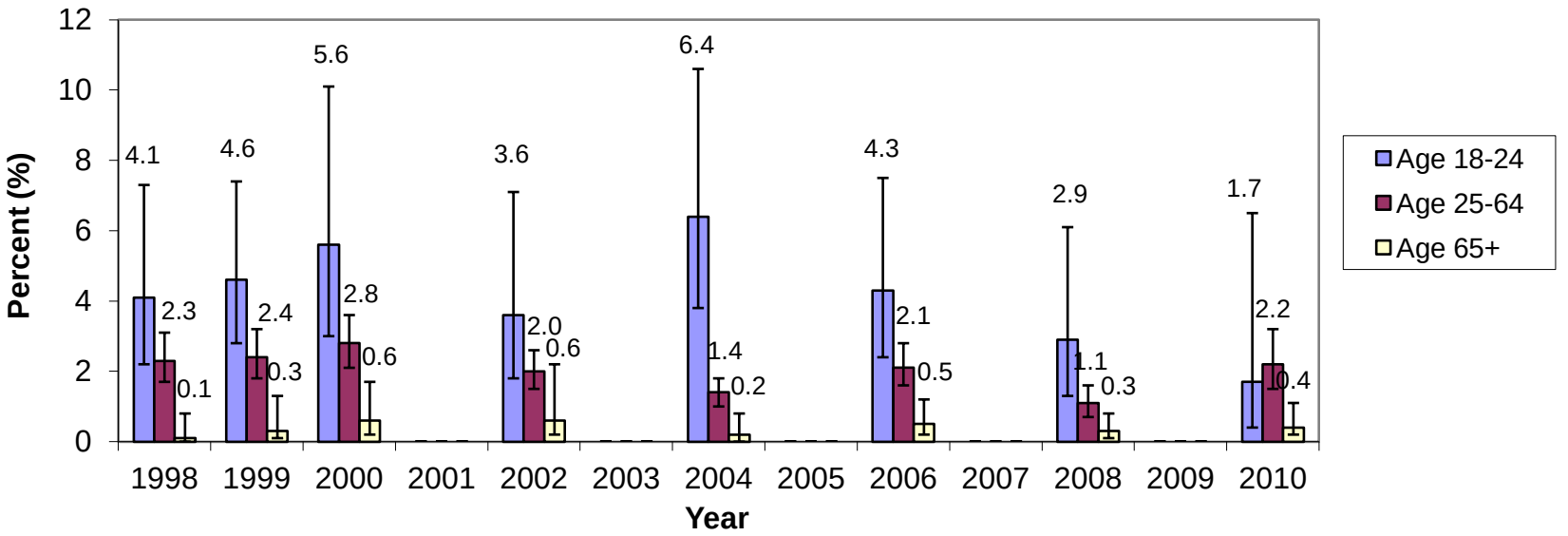
** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

- 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, 1998-2010



* 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, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	1,769	1,101	-	-	-	2,870	0.7	0.6	-	-	-	0.6
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	273	292	-	-	-	564	1.2	1.3	-	-	-	1.1
Cibola	0	-	0	-	-	0	0.0	-	0.0	-	-	0.0
Colfax	-	-	-	-	-	0	-	-	-	-	-	0.0
Curry	0	90	-	-	-	90	0.0	0.7	-	-	-	0.3
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	360	933	-	-	-	1,468	0.8	1.3	-	-	-	1.2
Eddy	127	216	-	-	-	343	0.6	2.0	-	-	-	1.0
Grant	204	-	-	-	-	282	1.2	-	-	-	-	1.0
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	127	0	-	-	-	127	0.7	0.0	-	-	-	0.3
Lincoln	0	-	-	-	-	240	0.0	-	-	-	-	1.4
Los Alamos	0	-	-	-	-	0	0.0	-	-	-	-	0.0
Luna	-	-	-	-	-	1,674	-	-	-	-	-	9.4
McKinley	0	95	205	-	-	300	0.0	1.7	1.0	-	-	0.8
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	0	-	-	-	-	240	0.0	-	-	-	-	0.5
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	332	-	-	-	332	-	1.3	-	-	-	0.9
Roosevelt	0	-	-	-	-	0	0.0	-	-	-	-	0.0
Sandoval	104	110	-	-	-	714	0.2	0.4	-	-	-	0.7
San Juan	206	0	0	-	-	206	0.4	0.0	0.0	-	-	0.2
San Miguel	-	88	-	-	-	88	-	0.6	-	-	-	0.4
Santa Fe	1,672	297	-	-	-	1,969	3.3	0.7	-	-	-	2.0
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	0	-	-	-	-	-	0.0
Taos	0	233	-	-	-	1,140	0.0	1.5	-	-	-	3.9
Torrance	-	-	-	-	-	223	-	-	-	-	-	1.2
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	0	471	-	-	-	471	0.0	1.9	-	-	-	0.9
New Mexico	5,377	5,875	1,906	240	0	13,476	0.7	1.1	1.8	1.0	0.0	0.9

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

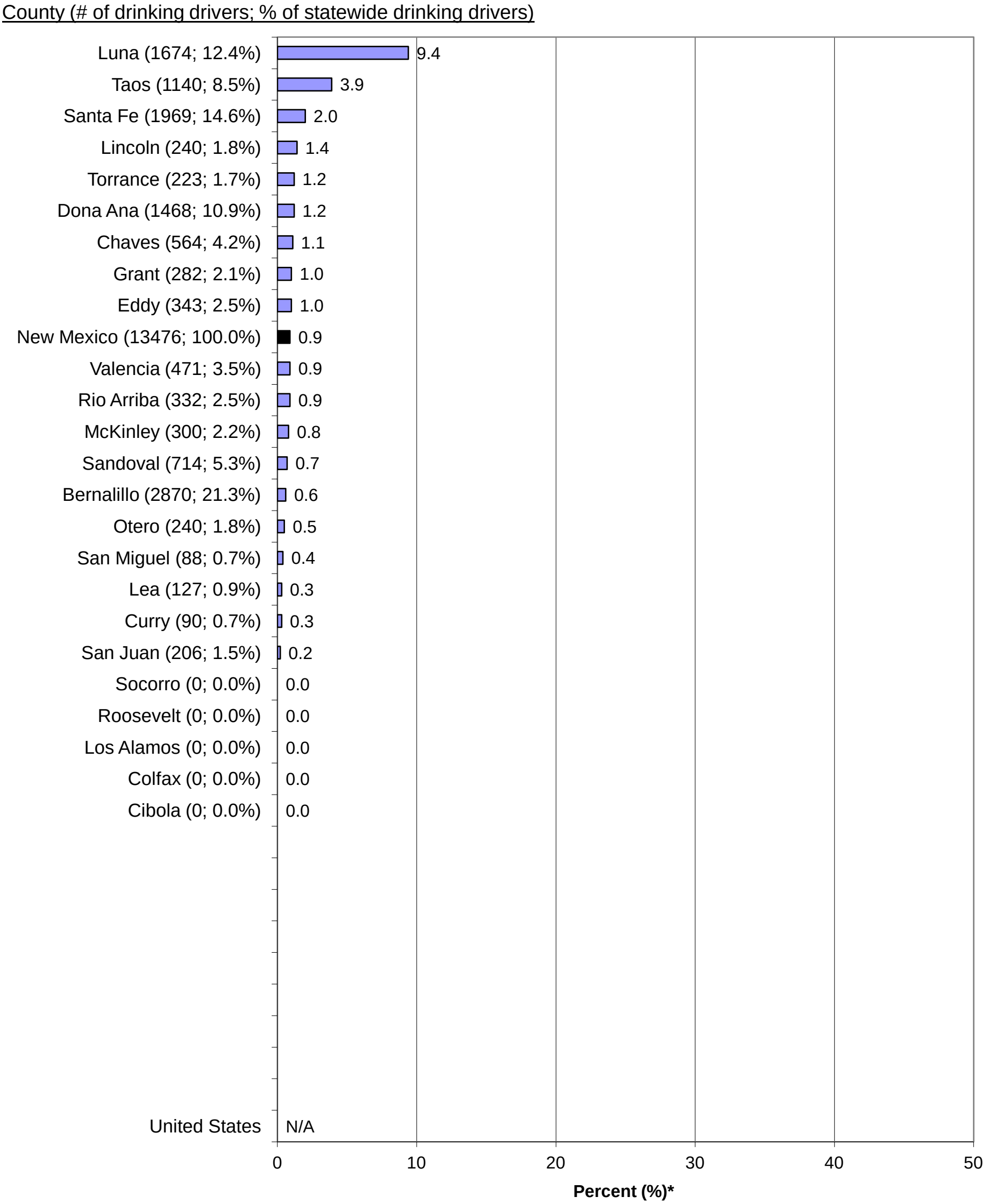
** Estimate of percent of people in population group who drove after "perhaps too much to drink" at least once in past 30 days

- 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, 2010



* 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:

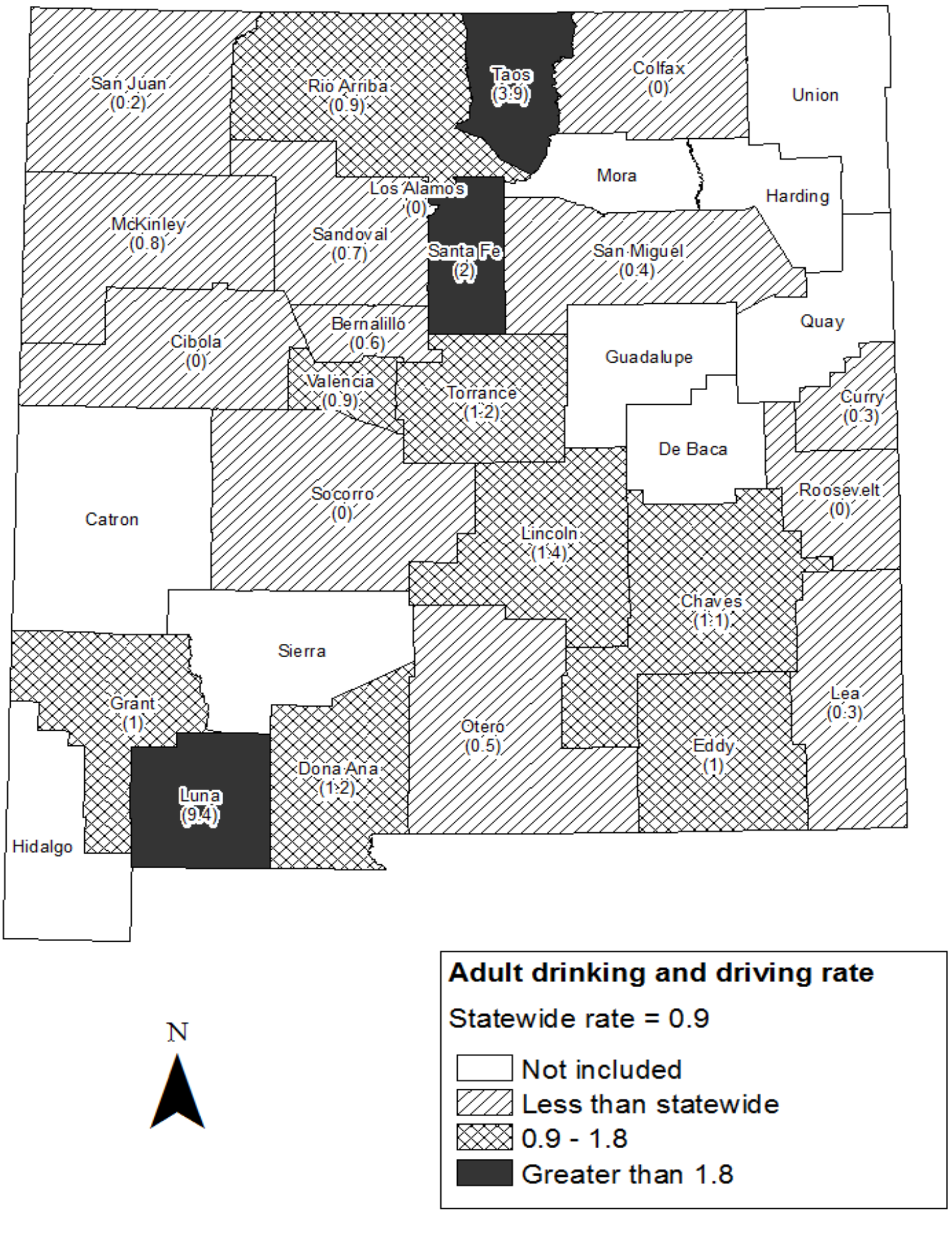
Catron, De Baca, Guadalupe, Harding, Hidalgo, Mora, Quay, Sierra, Union

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, 2010



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

YOUTH DRINKING AND DRIVING

Problem Statement

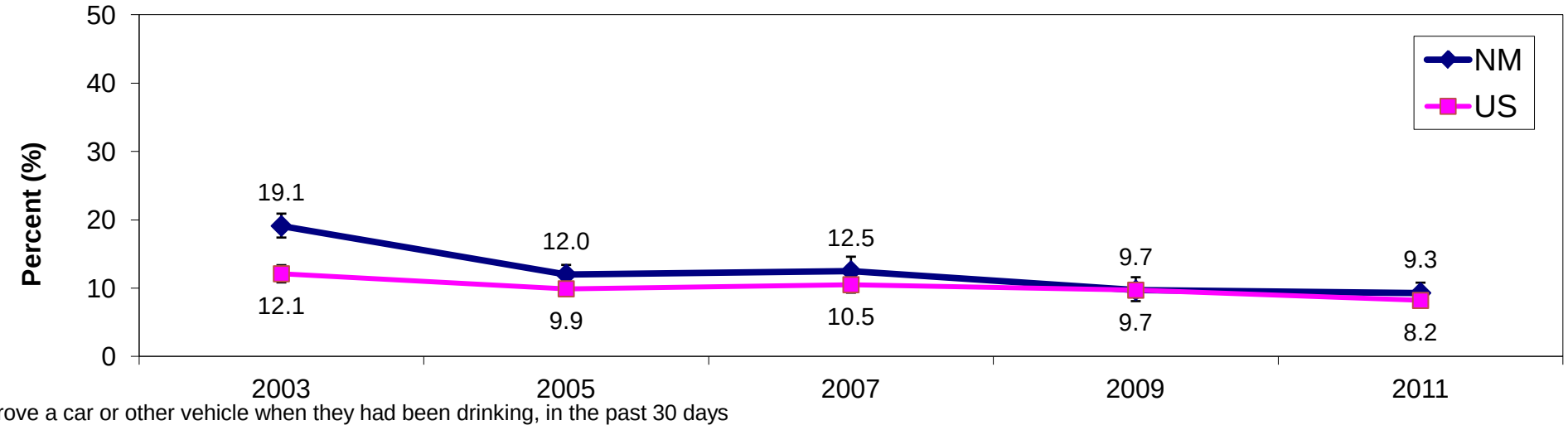
Drinking and driving is a major risk factor for motor vehicle accidents. Motor vehicle crashes are the leading cause of death for youth aged 15 to 20 years. In the United States, 12.8% of all fatal traffic crashes were alcohol-related, and 40% of these involved teens driving while drinking alcohol.*

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

In 2011, the prevalence of past-30-day drinking and driving was 9.3% among New Mexico high school students. Drinking and driving increased in prevalence with increasing grade levels (9th = 6.9%; 10th = 8.7%; 11th = 9.4%; 12th = 12.9%). White (7.4%) and Hispanic (8.4%) students had lower rates of drinking and driving than Asian or Pacific Islander (16.3%) or African American (15.4%) students. There was no statistically significant difference between boys (10.4%) and girls (8.2%) for drinking and driving.

In 2011, the drinking and driving rate was highest in Union (22.9%), Mora (17.2%), Sierra (16.9%), and Grant counties (16.8%). The rate was lowest in Bernalillo (5.8%), San Juan (6.8%), and Sandoval counties (7.1%).

Chart 1: Drinking and Driving* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

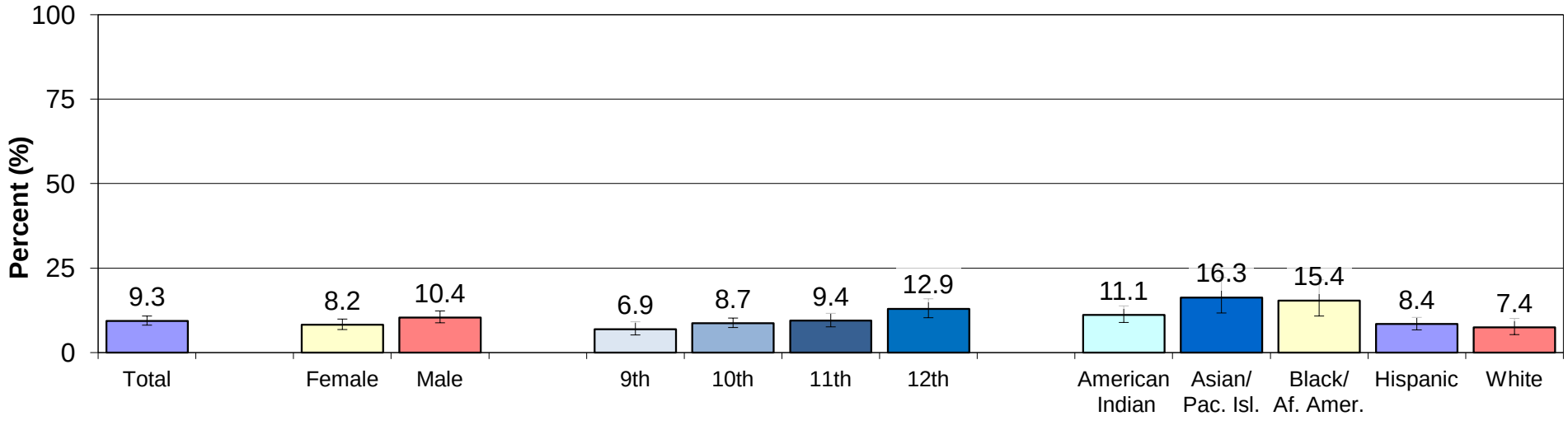
Table 1: Drinking and Driving, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	11.6 (7.2-18.2)	11.6 (5.9-21.5)	17.7 (10.7-27.7)	12.0 (6.0-22.3)	13.2 (9.6-17.8)
	Asian/Pacific Islander	--	--	--	--	15.9 (10.7-22.9)
	Black/African American	13.3 (6.5-25.2)	--	--	--	16.8 (10.8-25.2)
	Hispanic	7.0 (3.8-12.7)	7.9 (4.9-12.5)	10.5 (7.2-15.0)	12.0 (8.5-16.7)	9.2 (7.2-11.7)
	White	3.2 (1.7-5.8)	6.5 (3.8-11.0)	8.4 (3.9-17.0)	15.0 (9.4-22.9)	7.7 (5.3-11.0)
	Total	7.3 (5.3-10.0)	8.8 (6.9-11.2)	12.1 (8.8-16.3)	14.8 (11.6-18.6)	10.4 (8.8-12.3)
Female	American Indian	9.9 (6.0-15.8)	9.8 (6.0-15.5)	6.3 (3.8-10.2)	8.1 (4.6-13.9)	8.6 (6.9-10.7)
	Asian/Pacific Islander	--	--	--	--	16.9 (11.5-24.2)
	Black/African American	--	--	--	--	12.9 (7.1-22.4)
	Hispanic	5.8 (3.0-10.9)	7.2 (5.1-10.1)	5.8 (3.8-8.9)	12.6 (8.6-17.9)	7.7 (5.8-10.3)
	White	4.2 (2.0-8.4)	9.1 (4.8-16.6)	8.3 (3.8-17.2)	7.8 (4.2-14.1)	7.0 (4.4-11.1)
	Total	6.5 (4.4-9.4)	8.6 (7.0-10.6)	6.8 (5.0-9.2)	11.0 (8.6-14.1)	8.2 (6.8-9.9)
Total	American Indian	10.9 (8.1-14.4)	10.8 (6.6-17.1)	12.4 (8.7-17.5)	10.2 (5.8-17.2)	11.1 (8.9-13.8)
	Asian/Pacific Islander	8.2 (3.7-17.2)	9.8 (4.5-20.2)	20.7 (12.3-32.7)	29.3 (17.0-45.5)	16.3 (11.7-22.2)
	Black/African American	10.8 (5.1-21.3)	18.4 (11.6-27.9)	12.5 (8.6-17.8)	17.8 (11.0-27.7)	15.4 (10.8-21.5)
	Hispanic	6.4 (3.9-10.2)	7.5 (5.6-10.1)	7.9 (5.8-10.7)	12.3 (9.1-16.5)	8.4 (6.7-10.4)
	White	3.7 (2.2-6.0)	7.7 (5.1-11.4)	8.3 (5.1-13.4)	11.8 (7.7-17.6)	7.4 (5.3-10.1)
	Total	6.9 (5.2-9.1)	8.7 (7.4-10.2)	9.4 (7.6-11.6)	12.9 (10.3-15.9)	9.3 (8.1-10.8)

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

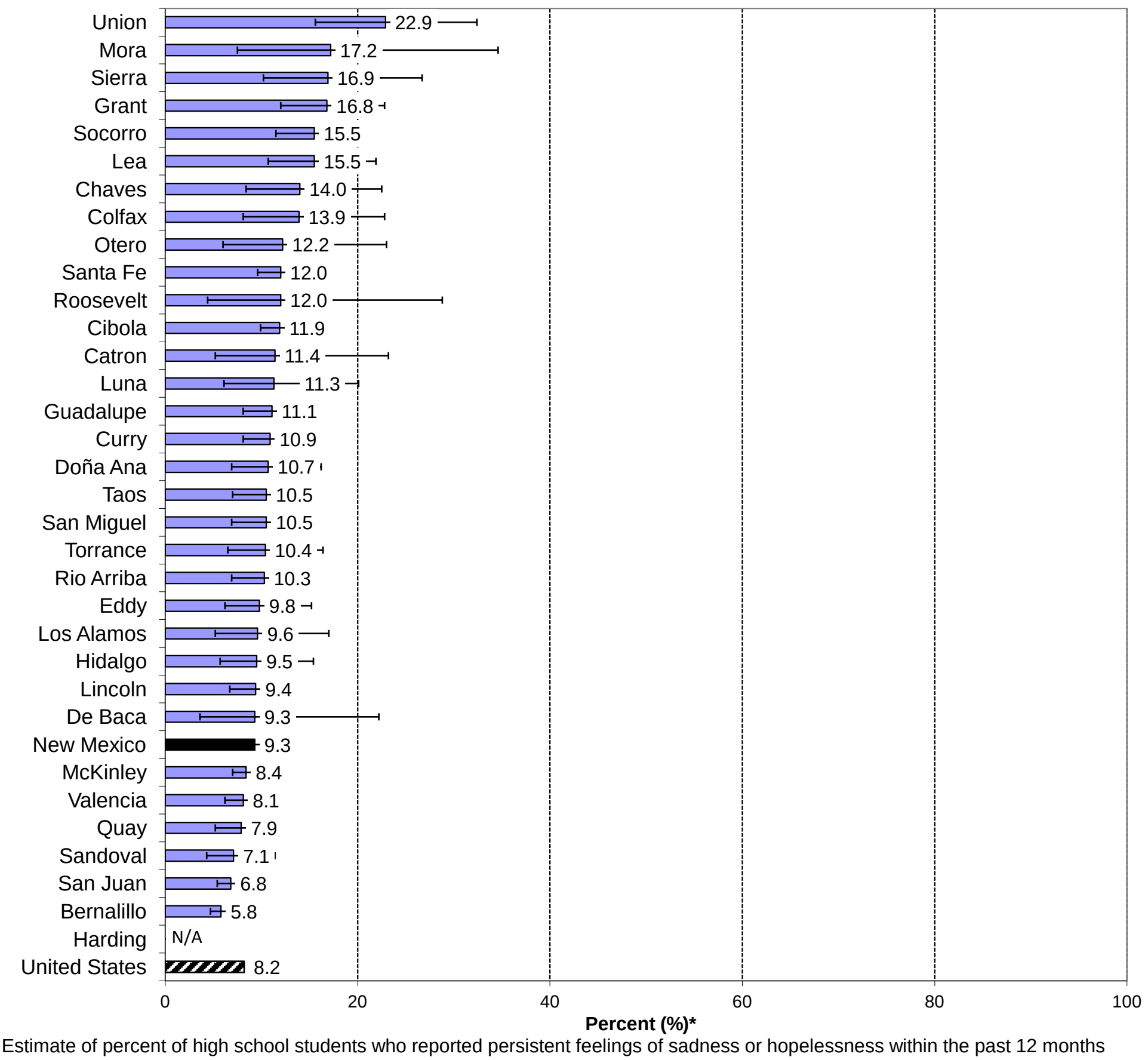
YOUTH DRINKING AND DRIVING (continued)

Chart 2: Drinking and Driving, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



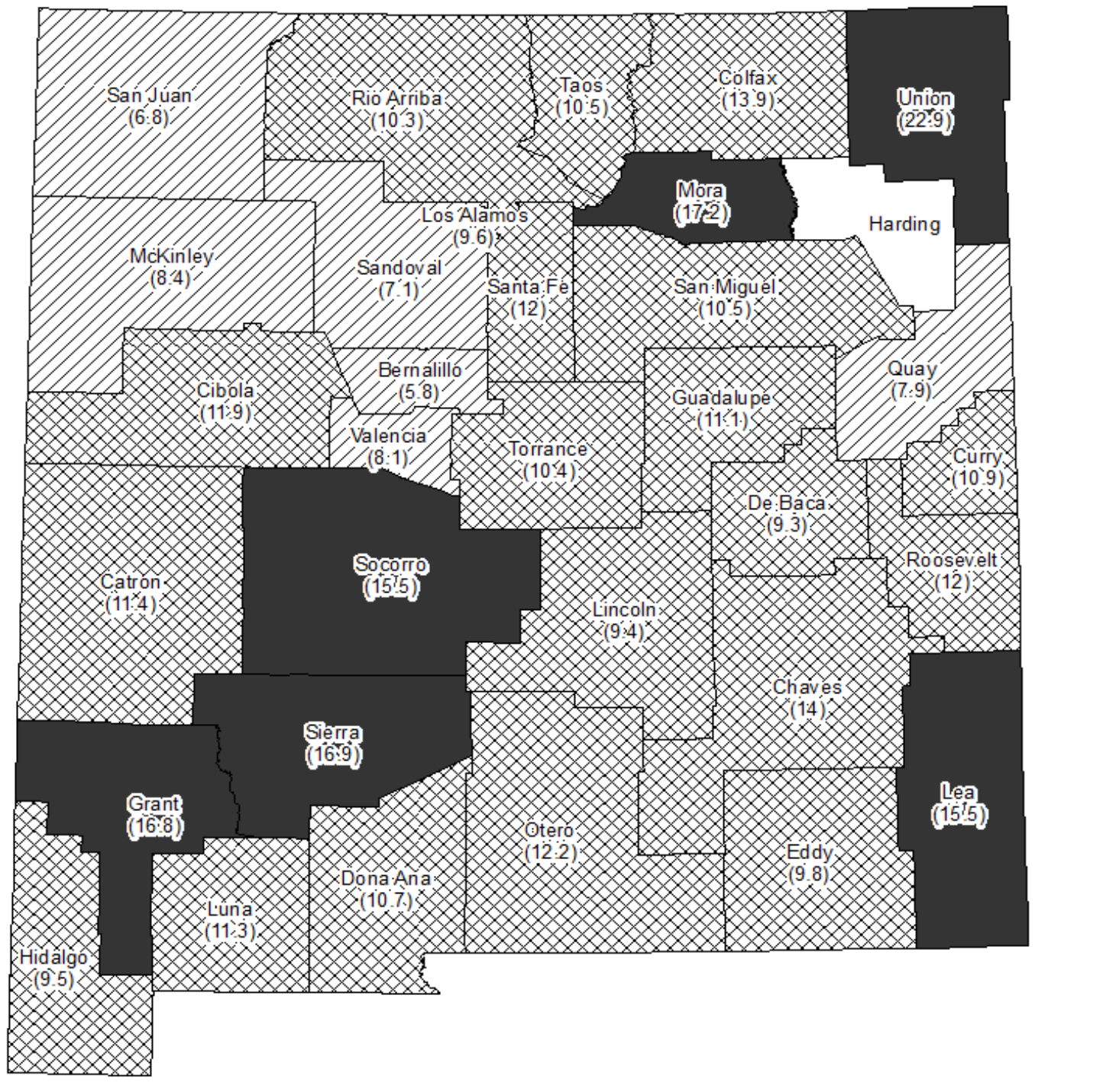
* Estimate of percent of high school students who reported persistent feelings of sadness or hopelessness within the past 12 months

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH CURRENT MARIJUANA USE

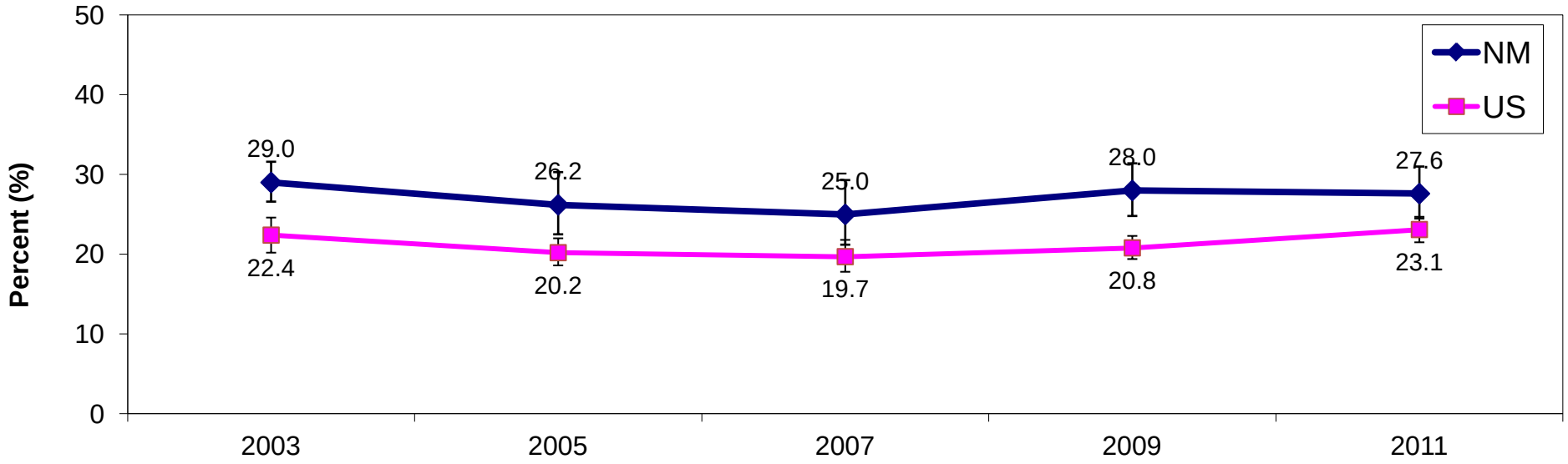
Problem Statement

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 rate in 2009 (28.0%) was higher than the rate in 2007 (25.0%), the difference is not statistically significant. In 2011, the New Mexico rate (27.6%) was higher than the US rate (23.1%), as it has been consistently been for several years.

There was no statistically significant variation in the rate of current marijuana use by grade level or gender. The rate among American Indian students (38.7%) was higher than among White (22.0%) and Hispanic (25.1%) students. This was true for both males and females.

In 2011, the rate of past 30-day marijuana use was highest in Rio Arriba (40.2%), Mora (37.1%), and Cibola counties (36.0%). The rate was lowest in Roosevelt (15.4%), Quay (18.1%), and De Baca counties (18.2%).

Chart 1: Current Marijuana Use* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

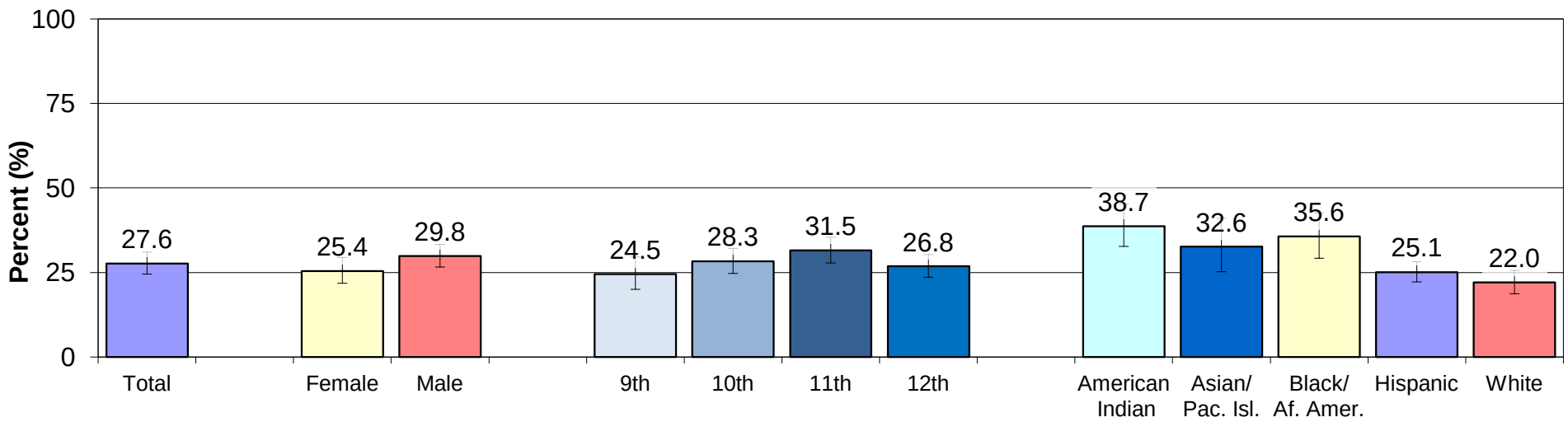
Table 1: Current Marijuana Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	36.1 (25.5-48.1)	41.5 (32.7-51.0)	39.3 (30.9-48.3)	34.9 (28.4-42.0)	38.6 (32.8-44.7)
	Asian/Pacific Islander	--	--	--	--	35.7 (25.4-47.4)
	Black/African American	37.2 (24.2-52.3)	--	--	--	38.9 (29.7-48.9)
	Hispanic	21.6 (14.5-30.9)	26.6 (20.4-33.9)	28.4 (22.3-35.4)	32.6 (26.8-39.0)	27.1 (23.4-31.1)
	White	17.7 (12.1-25.0)	27.1 (19.7-36.1)	29.9 (23.8-36.9)	26.1 (19.9-33.4)	24.2 (20.7-28.1)
	Total	25.8 (20.5-31.8)	29.5 (24.7-34.8)	32.8 (29.2-36.7)	32.8 (29.1-36.8)	29.8 (26.6-33.3)
Female	American Indian	37.1 (25.8-50.0)	41.7 (31.7-52.5)	45.1 (33.6-57.2)	31.0 (22.5-41.1)	38.9 (31.5-47.0)
	Asian/Pacific Islander	--	--	--	--	29.0 (20.0-40.0)
	Black/African American	--	--	--	--	30.8 (20.7-43.1)
	Hispanic	22.9 (18.9-27.3)	23.5 (19.5-28.1)	28.5 (23.1-34.5)	18.8 (14.0-24.9)	23.4 (20.2-27.0)
	White	15.0 (8.8-24.5)	21.4 (14.6-30.4)	23.9 (16.5-33.4)	19.6 (12.0-30.3)	19.5 (14.9-25.0)
	Total	23.1 (18.5-28.6)	27.1 (22.8-31.9)	30.2 (25.5-35.4)	20.8 (16.3-26.1)	25.4 (21.8-29.4)
Total	American Indian	36.5 (26.8-47.5)	41.6 (33.6-50.1)	42.0 (34.3-50.0)	33.1 (27.1-39.6)	38.7 (32.7-45.2)
	Asian/Pacific Islander	31.7 (19.7-46.8)	23.2 (13.4-37.1)	40.6 (29.2-53.1)	37.4 (26.0-50.5)	32.6 (25.2-41.0)
	Black/African American	32.5 (24.8-41.3)	38.1 (27.7-49.7)	37.3 (24.5-52.1)	--	35.6 (29.2-42.6)
	Hispanic	22.3 (18.5-26.6)	25.0 (21.7-28.6)	28.4 (24.0-33.3)	25.0 (21.0-29.4)	25.1 (22.2-28.2)
	White	16.4 (11.1-23.5)	24.4 (19.7-29.9)	27.0 (20.9-34.2)	23.2 (18.1-29.2)	22.0 (18.7-25.6)
	Total	24.5 (20.0-29.6)	28.3 (24.7-32.1)	31.5 (27.8-35.4)	26.8 (23.6-30.3)	27.6 (24.5-31.0)

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

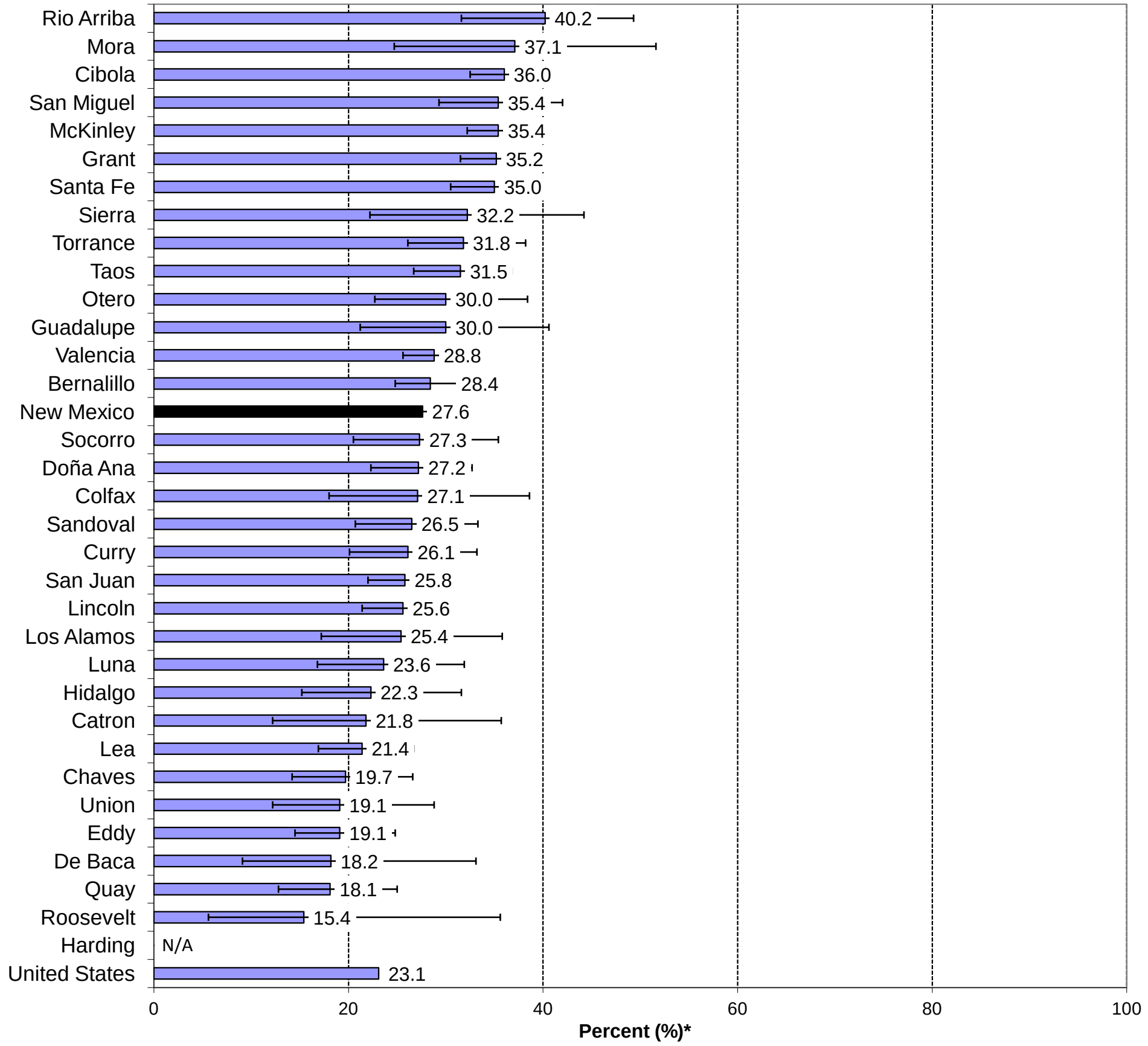
YOUTH CURRENT MARIJUANA USE (continued)

Chart 2: Current Marijuana Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



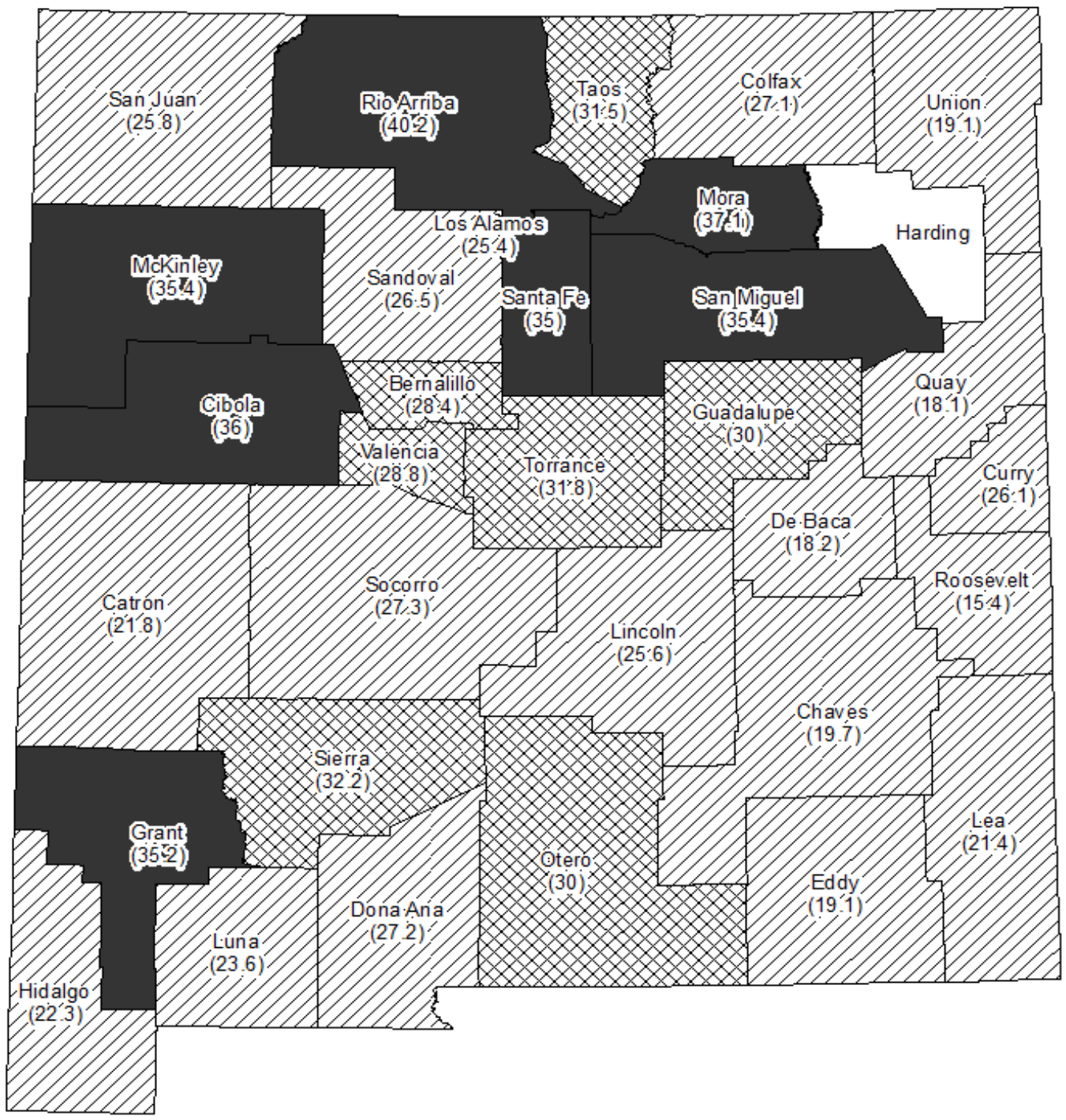
* Estimate of percent of high school students who reported marijuana use at least once in past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH CURRENT COCAINE USE

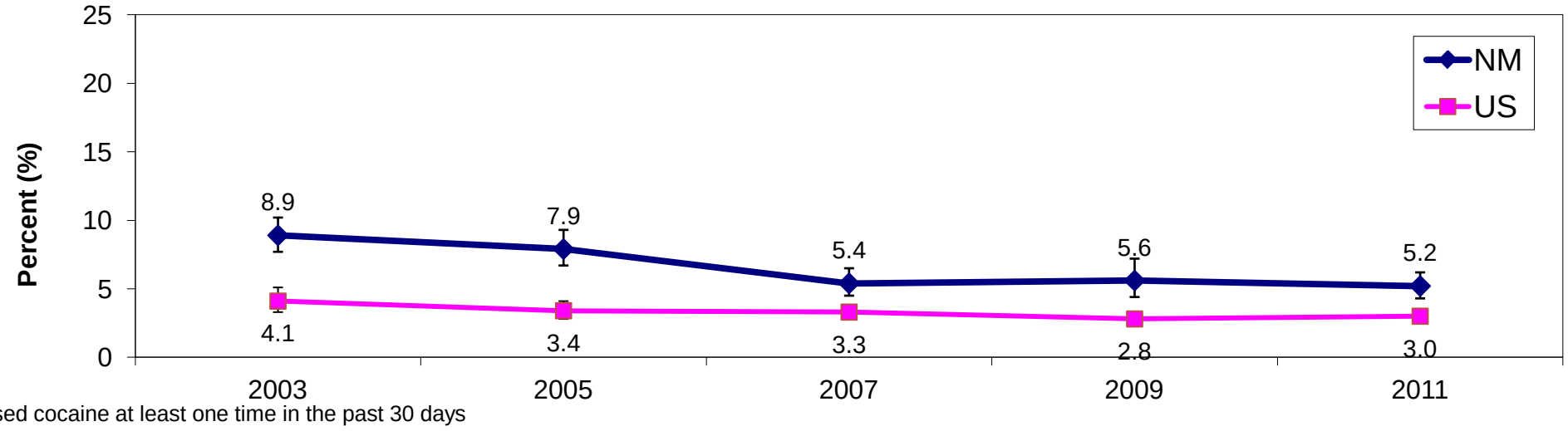
Problem Statement

The New Mexico rate of current cocaine use decreased from 2003 (8.9%) to 2007 (5.4%) and has not shown significant change since then. The 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 (5.2%) was higher than the US rate (3.0%) in 2011, and has been consistenly higher than the US rate since 2003.

The difference in the rate between males (5.6%) and females (4.7%) was not statistically significant. The rate among 11th graders (6.7%) was higher than that among 9th graders (3.9%). African American (11.5%) and Asian or Pacific Islander students (8.6%) had higher rates of current cocaine use than Hispanic (4.5%) or White (3.2%) students. Other differences between racial/ethnic groups were not statistically significant.

In 2011, the rate of past 30-day cocaine use was highest in Grant (11.0%), Rio Arriba (9.8%), Mora (9.3%), Otero (8.5%), and Hidalgo counties (8.0%). The rate was lowest in De Baca (1.0%), Catron (1.2%), QUay (2.0%), Curry (2.7%), and Sandoval counties (3.1%).

Chart 1: Current Cocaine Use* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

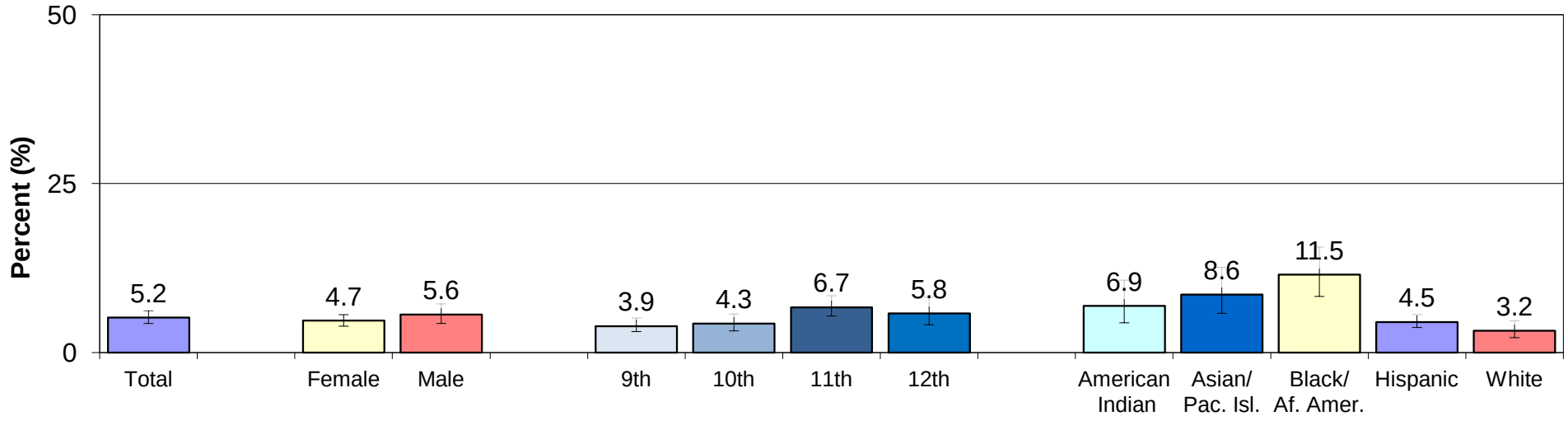
Table 1: Current Cocaine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	5.4 (2.2-12.5)	5.6 (2.3-13.1)	10.1 (5.3-18.4)	12.3 (5.5-25.2)	8.0 (4.7-13.4)
	Asian/Pacific Islander	--	--	--	--	10.4 (6.4-16.6)
	Black/African American	6.4 (2.3-16.2)	--	--	--	12.5 (8.4-18.2)
	Hispanic	4.7 (2.1-10.3)	2.3 (1.0-5.2)	5.3 (3.0-9.4)	6.5 (3.8-10.7)	4.6 (3.3-6.4)
	White	1.6 (0.4-7.1)	2.1 (0.8-5.2)	7.5 (4.1-13.2)	2.5 (1.1-5.8)	3.1 (1.9-5.1)
	Total	4.3 (3.0-6.2)	3.3 (2.0-5.3)	7.9 (5.5-11.2)	7.8 (5.1-11.6)	5.6 (4.3-7.2)
Female	American Indian	7.5 (3.8-14.2)	7.4 (3.9-13.8)	5.0 (1.9-12.5)	1.3 (0.4-4.1)	5.6 (3.5-8.6)
	Asian/Pacific Islander	--	--	--	--	6.1 (3.3-11.1)
	Black/African American	--	--	--	--	9.6 (5.2-17.0)
	Hispanic	2.8 (1.6-4.7)	5.4 (3.7-8.0)	5.4 (3.4-8.5)	4.4 (2.2-8.6)	4.5 (3.4-5.9)
	White	2.8 (1.2-6.3)	3.5 (1.6-7.2)	5.5 (2.6-11.0)	1.8 (0.2-11.6)	3.3 (2.1-5.2)
	Total	3.6 (2.7-4.7)	5.3 (3.8-7.3)	5.6 (4.4-7.1)	3.9 (2.2-7.0)	4.7 (3.9-5.6)
Total	American Indian	6.3 (3.5-11.0)	6.5 (3.9-10.5)	7.7 (4.2-13.7)	7.1 (3.4-14.4)	6.9 (4.4-10.7)
	Asian/Pacific Islander	5.5 (2.2-13.4)	3.3 (1.0-10.1)	9.7 (4.0-21.5)	18.4 (9.0-33.9)	8.6 (5.8-12.6)
	Black/African American	5.1 (2.3-11.2)	6.8 (2.3-18.3)	17.5 (9.4-30.3)	--	11.5 (8.3-15.6)
	Hispanic	3.6 (2.0-6.5)	4.0 (2.7-5.7)	5.4 (3.4-8.4)	5.3 (3.5-8.0)	4.5 (3.7-5.6)
	White	2.2 (1.0-4.8)	2.7 (1.4-5.2)	6.5 (4.5-9.4)	2.2 (0.8-5.9)	3.2 (2.2-4.7)
	Total	3.9 (3.1-5.1)	4.3 (3.2-5.7)	6.7 (5.4-8.4)	5.8 (4.1-8.2)	5.2 (4.3-6.2)

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

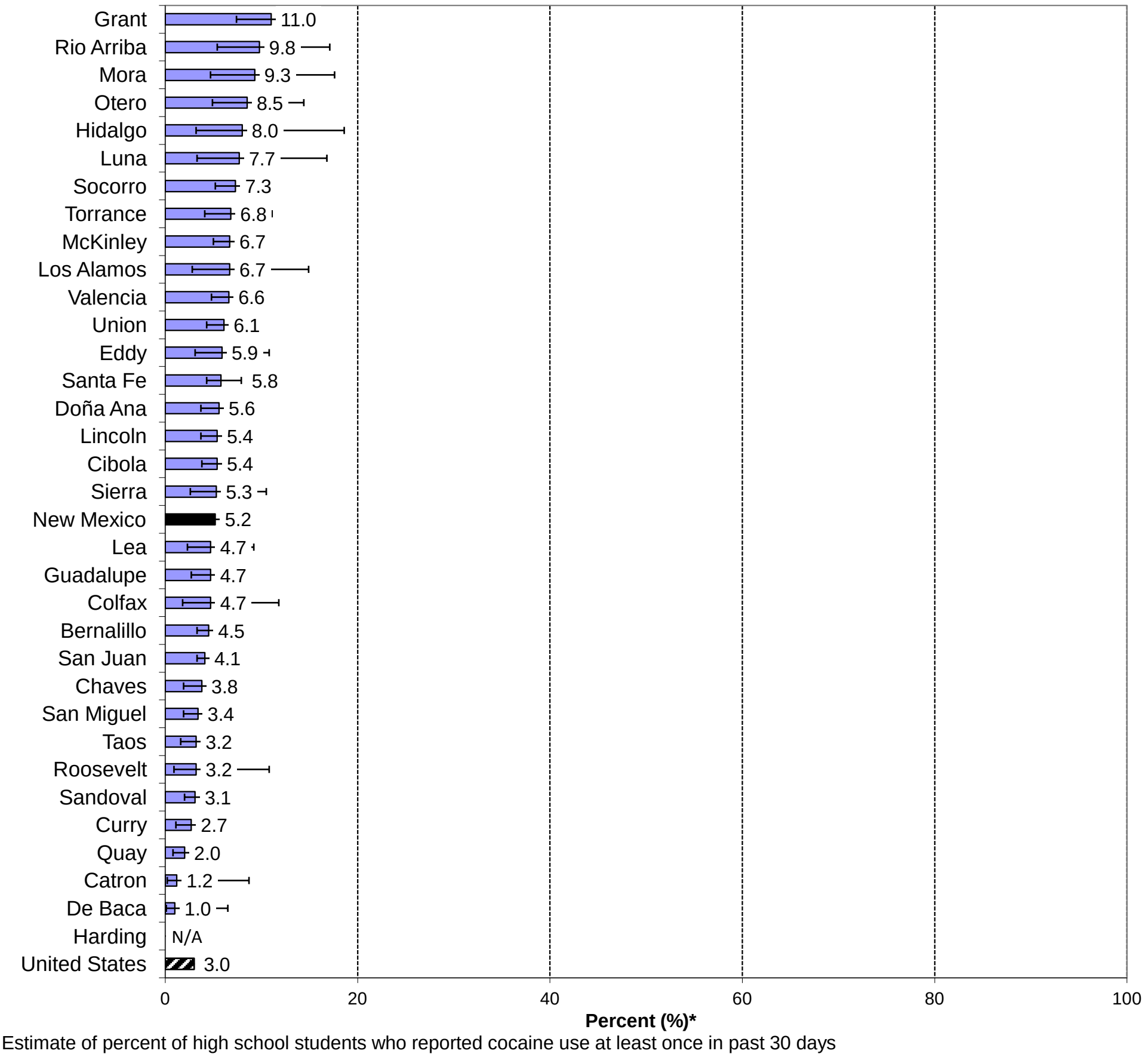
YOUTH CURRENT COCAINE USE (continued)

Chart 2: Current Cocaine Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



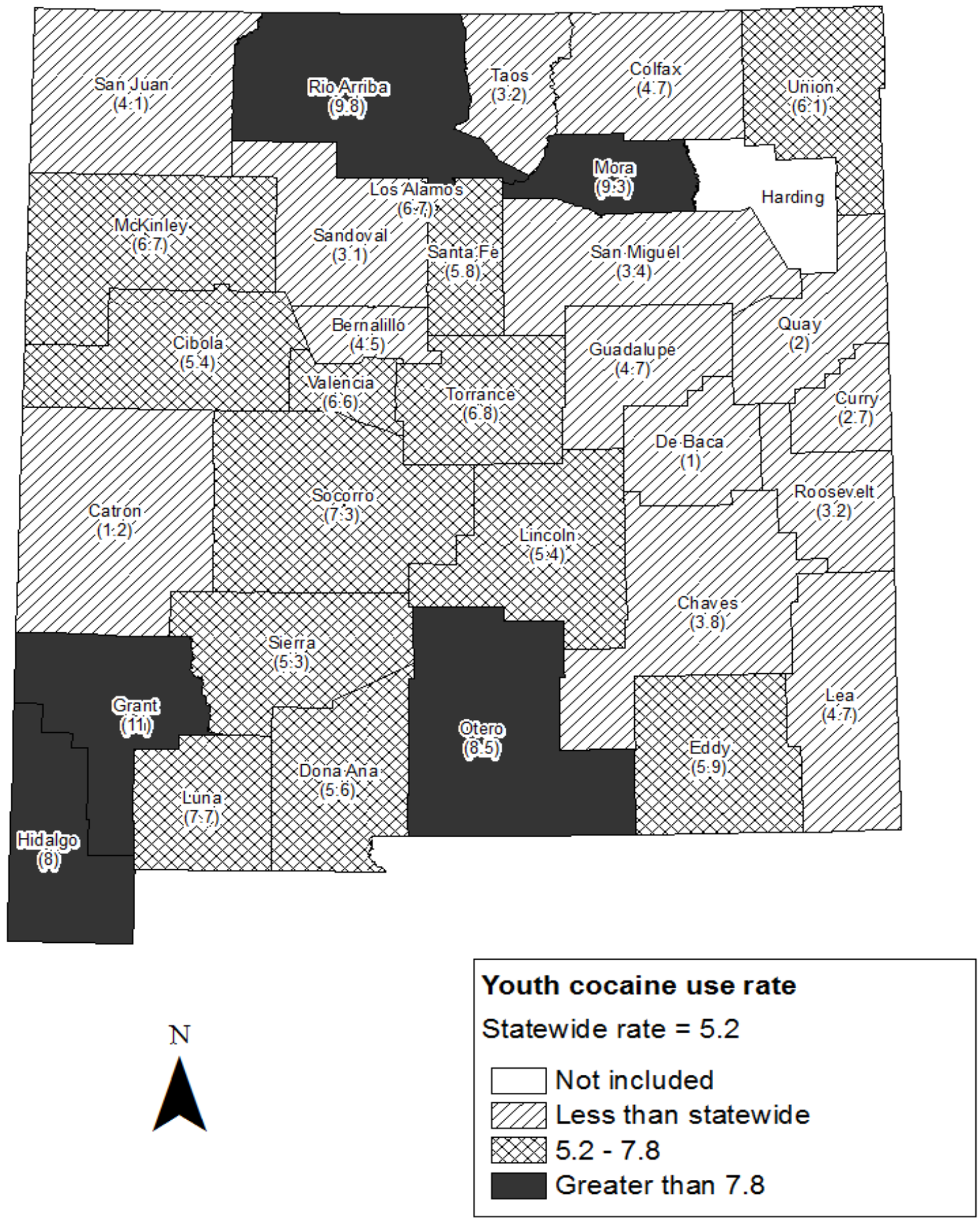
* Estimate of percent of high school students who reported cocaine use at least once in past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH USED PAINKILLER TO GET HIGH

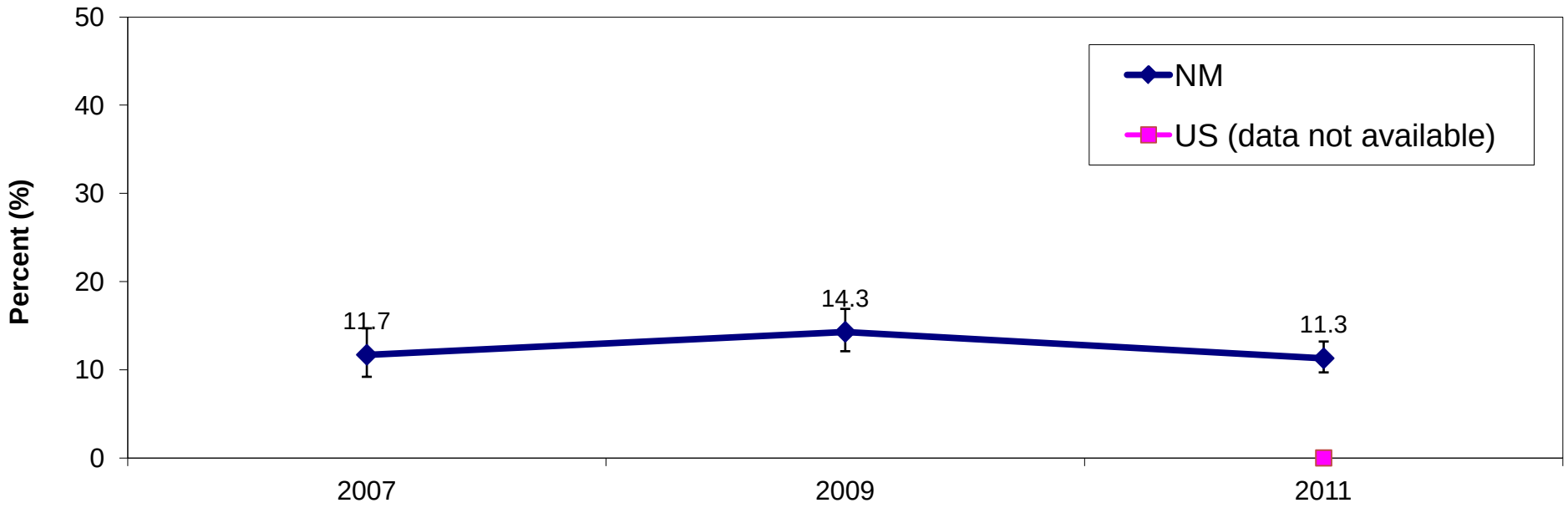
Problem Statement

The rate of current use of pain killers to get high has shown no noticeable trend since the measure was added to the YRRS survey questionnaire in 2007. Pain killer use to get high had the second highest prevalence of all 30-day drug use measures in the 2011 YRRS, behind marijuana (27.6%). The question about the use of pain killers to get high is not on the national Youth Risk Behavior Survey, and there is no national comparison.

The rate of pain killer use to get high did not vary significantly by gender, and the difference by grade level was not statistically significant. The prevalence was higher among Black/African Americans (18.9%) than among Hispanic (10.4%) and White (9.1%) students.

In 2011, the rate of pain killer use to get high was highest in Grant (22.9%), Rio Arriba (21.0%), Otero (18.8%), Mora (18.4%), and Lincoln counties (17.1%). The rate was lowest in Sandoval (7.1%), Dona Ana (8.1%), De Baca (8.2%), Catron (8.3%), and Guadalupe counties (8.6%).

Chart 1: Used Painkiller to Get High* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

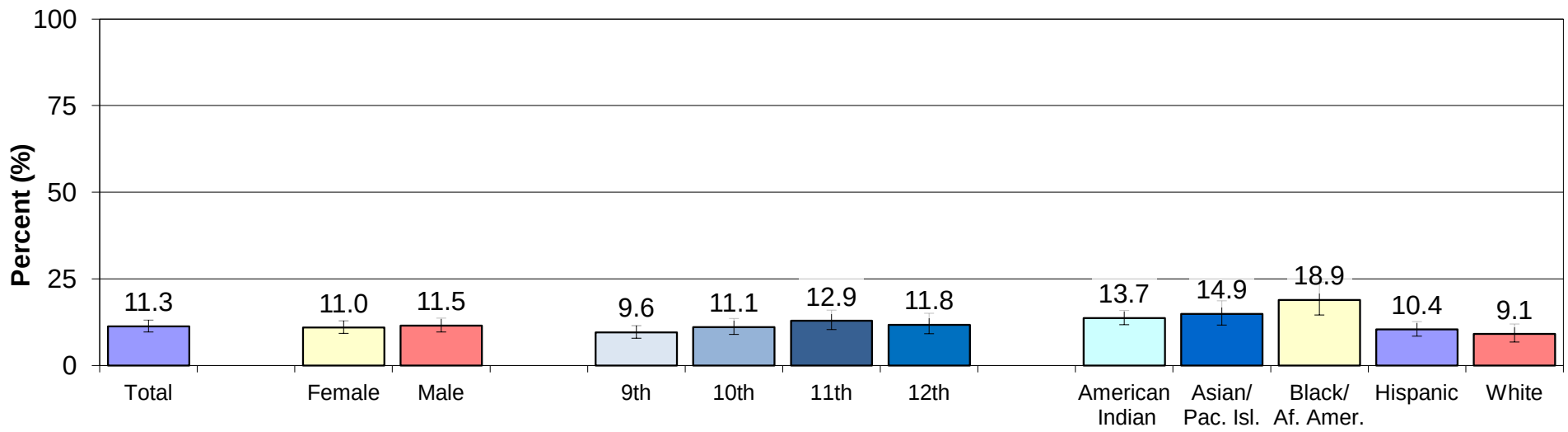
Table 1: Used Painkiller to Get High, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	12.7 (8.6-18.3)	15.2 (10.1-22.3)	15.6 (10.0-23.4)	11.5 (7.6-17.0)	14.0 (11.6-16.7)
	Asian/Pacific Islander	--	--	--	--	17.3 (13.0-22.7)
	Black/African American	15.3 (8.1-27.2)	--	--	--	20.6 (16.0-26.0)
	Hispanic	10.7 (6.7-16.6)	9.1 (5.7-14.2)	8.3 (6.1-11.2)	12.6 (8.8-17.6)	10.1 (7.6-13.2)
	White	5.6 (3.2-9.9)	9.2 (5.1-16.0)	12.8 (7.7-20.7)	10.6 (5.9-18.2)	9.2 (6.2-13.3)
	Total	9.9 (7.5-12.9)	10.6 (7.8-14.2)	13.2 (10.5-16.5)	13.4 (10.5-16.9)	11.5 (9.7-13.7)
Female	American Indian	12.4 (7.0-21.1)	13.7 (8.2-21.9)	19.4 (14.2-25.9)	8.4 (4.5-15.3)	13.4 (10.6-16.8)
	Asian/Pacific Islander	--	--	--	--	11.7 (6.4-20.4)
	Black/African American	--	--	--	--	16.0 (9.6-25.6)
	Hispanic	10.3 (7.4-14.3)	11.2 (8.6-14.4)	10.5 (6.3-16.9)	10.8 (6.4-17.7)	10.7 (8.5-13.3)
	White	6.5 (4.1-10.0)	10.2 (6.7-15.1)	12.9 (7.8-20.4)	7.9 (4.2-14.3)	9.0 (6.8-11.9)
	Total	9.3 (7.4-11.5)	11.6 (9.6-14.0)	12.7 (9.6-16.6)	10.3 (7.1-14.6)	11.0 (9.3-13.0)
Total	American Indian	12.6 (8.6-18.0)	14.5 (10.9-19.0)	17.3 (13.1-22.6)	10.1 (6.7-14.9)	13.7 (11.8-15.9)
	Asian/Pacific Islander	7.8 (3.7-15.8)	5.8 (1.8-17.2)	28.4 (19.8-38.9)	20.9 (12.0-33.9)	14.9 (11.7-18.7)
	Black/African American	14.1 (8.6-22.1)	18.1 (9.1-32.8)	16.8 (8.4-30.6)	28.2 (17.4-42.2)	18.9 (14.6-24.1)
	Hispanic	10.5 (8.2-13.3)	10.2 (7.7-13.4)	9.6 (6.8-13.3)	11.6 (8.0-16.6)	10.4 (8.5-12.7)
	White	6.0 (4.3-8.5)	9.6 (6.2-14.6)	12.8 (8.7-18.6)	9.4 (5.9-14.5)	9.1 (6.8-12.0)
	Total	9.6 (7.9-11.6)	11.1 (9.0-13.6)	12.9 (10.4-16.0)	11.8 (9.2-15.1)	11.3 (9.7-13.2)

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

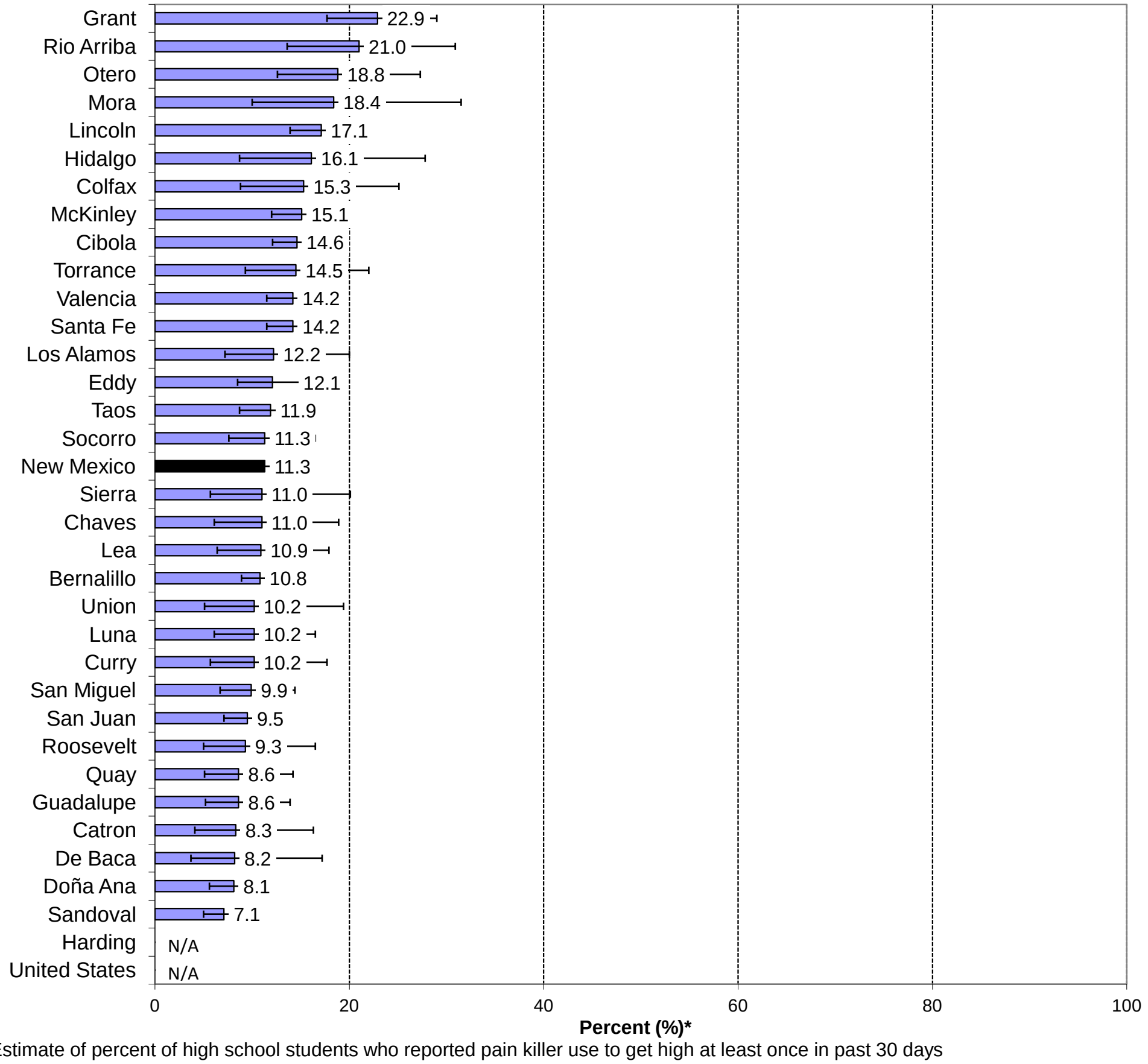
YOUTH USED PAINKILLER TO GET HIGH (continued)

Chart 2: Used Painkiller to Get High, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



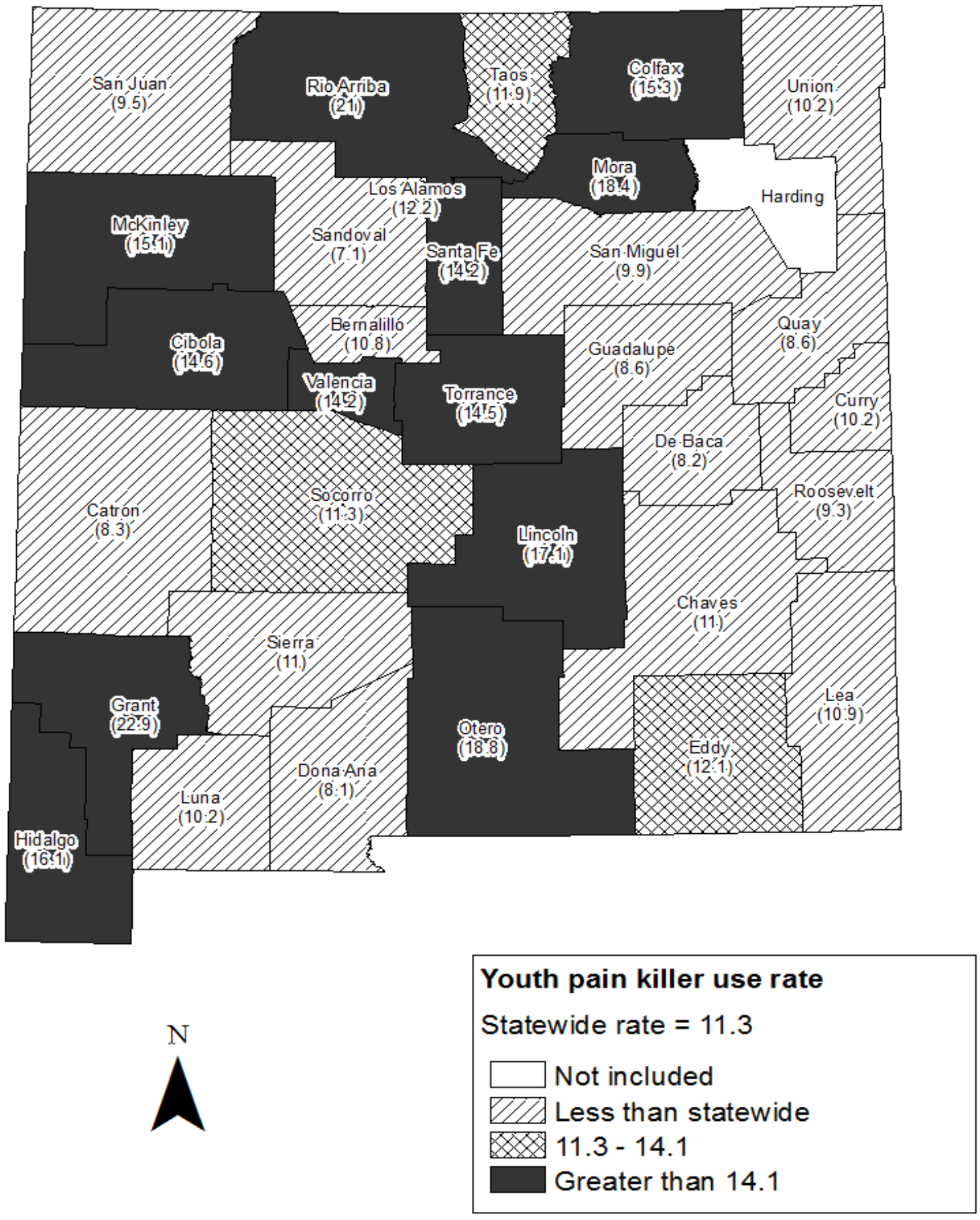
* Estimate of percent of high school students who reported pain killer use to get high at least once in past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH HEROIN USE

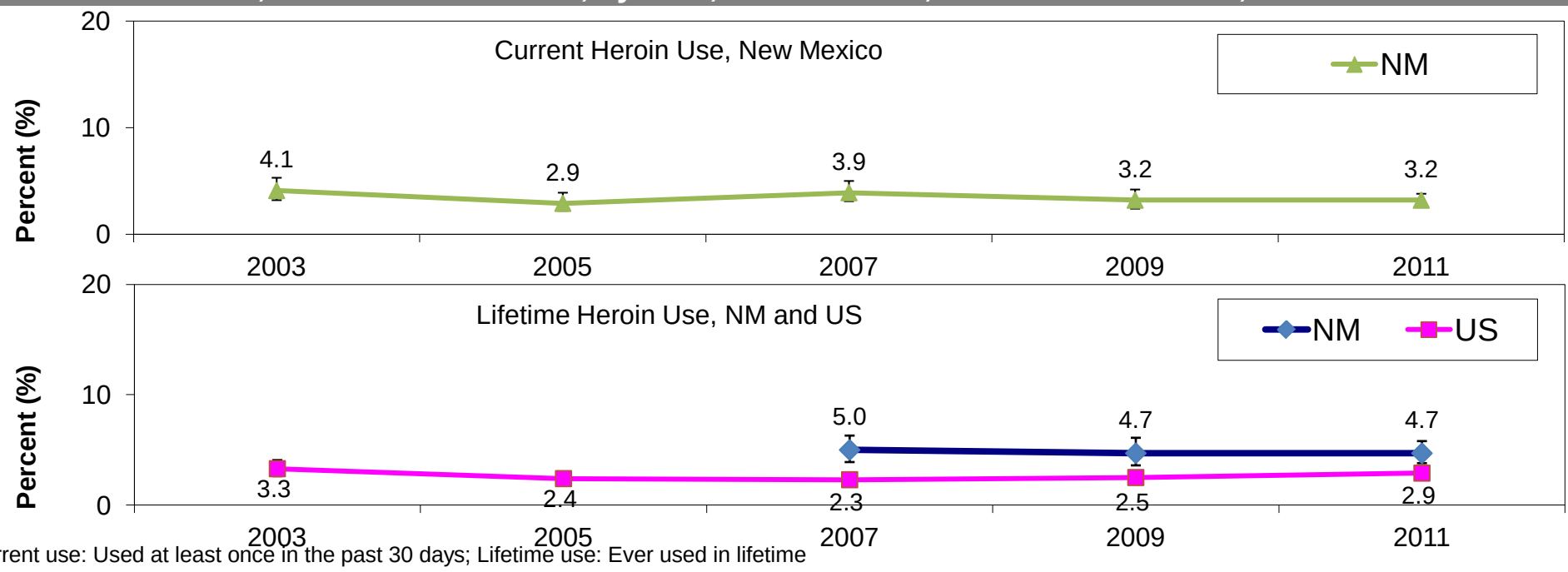
Problem Statement

The rate of lifetime heroin use has not significantly varied in recent years in either New Mexico or the US. The New Mexico rate for lifetime heroin use has been consistently higher than the US rate, and in 2011, the New Mexico rate (4.7%) was also higher than the US rate (2.9%). For current heroin use, there is no apparent trend in the New Mexico rate. There is no national comparison for current heroin use.

Black/African American (11.2%) and Asian or Pacific Islander (11.1%) students were more likely to be current heroin users than American Indian (2.5%), Hispanic (2.1%), or White (2.1%) students. The prevalence of current heroin use was not associated with grade level. Males were significantly more likely to report current heroin use (4.3%) than females (2.0%).

In 2011, the highest rates for lifetime heroin use were in Hidalgo (12.4%), Rio Arriba (11.5%) and Mora counties (10.3%), and the lowest rates were in De Baca (1.0%), Quay (1.2%), and Sandoval counties (1.8%).

Chart 1: Heroin Use*, Current and Lifetime, by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

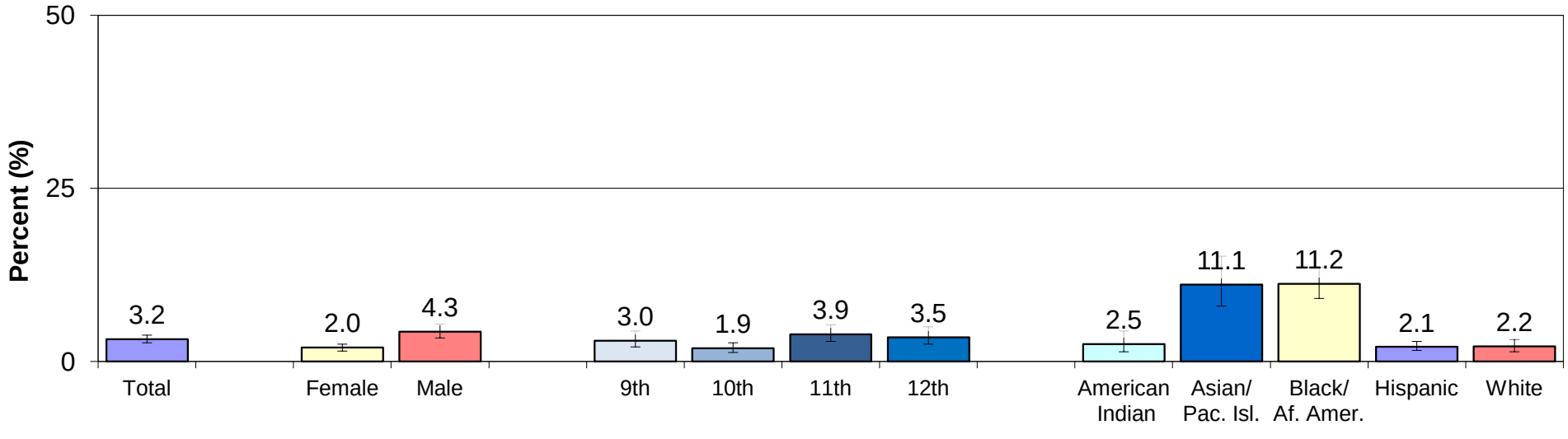
Table 1: Current Heroin Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	4.2 (2.4-7.1)	4.1 (1.3-12.0)	2.8 (1.0-7.7)	3.1 (0.8-11.0)	3.6 (1.8-7.0)
	Asian/Pacific Islander	--	--	--	--	13.7 (9.1-20.0)
	Black/African American	8.7 (3.8-18.6)	--	--	--	14.0 (10.6-18.1)
	Hispanic	3.4 (1.4-8.1)	1.6 (0.8-3.1)	3.3 (1.7-6.1)	2.4 (1.0-5.7)	2.7 (1.7-4.2)
	White	2.6 (1.0-6.5)	1.2 (0.4-3.9)	4.9 (2.1-11.3)	4.2 (1.8-9.6)	3.0 (1.9-4.9)
	Total	4.1 (2.6-6.2)	2.7 (1.7-4.3)	5.4 (3.8-7.7)	5.3 (3.5-7.9)	4.3 (3.4-5.4)
Female	American Indian	1.5 (0.5-5.0)	1.8 (0.6-4.7)	1.3 (0.4-4.8)	0.0 (.-.)	1.2 (0.6-2.4)
	Asian/Pacific Islander	--	--	--	--	7.5 (5.1-10.9)
	Black/African American	--	--	--	--	6.5 (2.8-14.5)
	Hispanic	1.8 (0.8-4.3)	1.0 (0.4-2.3)	2.5 (1.0-6.2)	1.3 (0.4-4.2)	1.7 (1.0-2.6)
	White	1.6 (0.4-5.5)	0.6 (0.1-4.6)	2.5 (1.1-5.6)	0.0 (.-.)	1.2 (0.5-2.5)
	Total	1.9 (1.1-3.5)	1.0 (0.7-1.5)	2.5 (1.5-4.1)	1.8 (0.8-3.6)	2.0 (1.5-2.5)
Total	American Indian	3.1 (1.9-4.8)	3.0 (1.2-7.4)	2.1 (1.0-4.4)	1.6 (0.4-6.1)	2.5 (1.4-4.4)
	Asian/Pacific Islander	8.2 (4.0-15.9)	3.0 (0.9-9.9)	15.2 (8.4-26.0)	18.9 (10.1-32.7)	11.1 (8.0-15.2)
	Black/African American	6.3 (2.9-12.9)	6.9 (2.6-16.9)	11.0 (5.3-21.5)	18.9 (10.8-30.8)	11.2 (9.1-13.6)
	Hispanic	2.5 (1.3-4.9)	1.3 (0.8-2.2)	2.8 (1.7-4.6)	1.8 (0.9-3.5)	2.1 (1.6-2.9)
	White	2.1 (0.9-4.7)	0.9 (0.5-1.8)	3.8 (2.0-7.0)	2.3 (1.0-5.4)	2.2 (1.4-3.2)
	Total	3.0 (2.1-4.4)	1.9 (1.3-2.7)	3.9 (2.9-5.3)	3.5 (2.5-5.0)	3.2 (2.7-3.8)

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

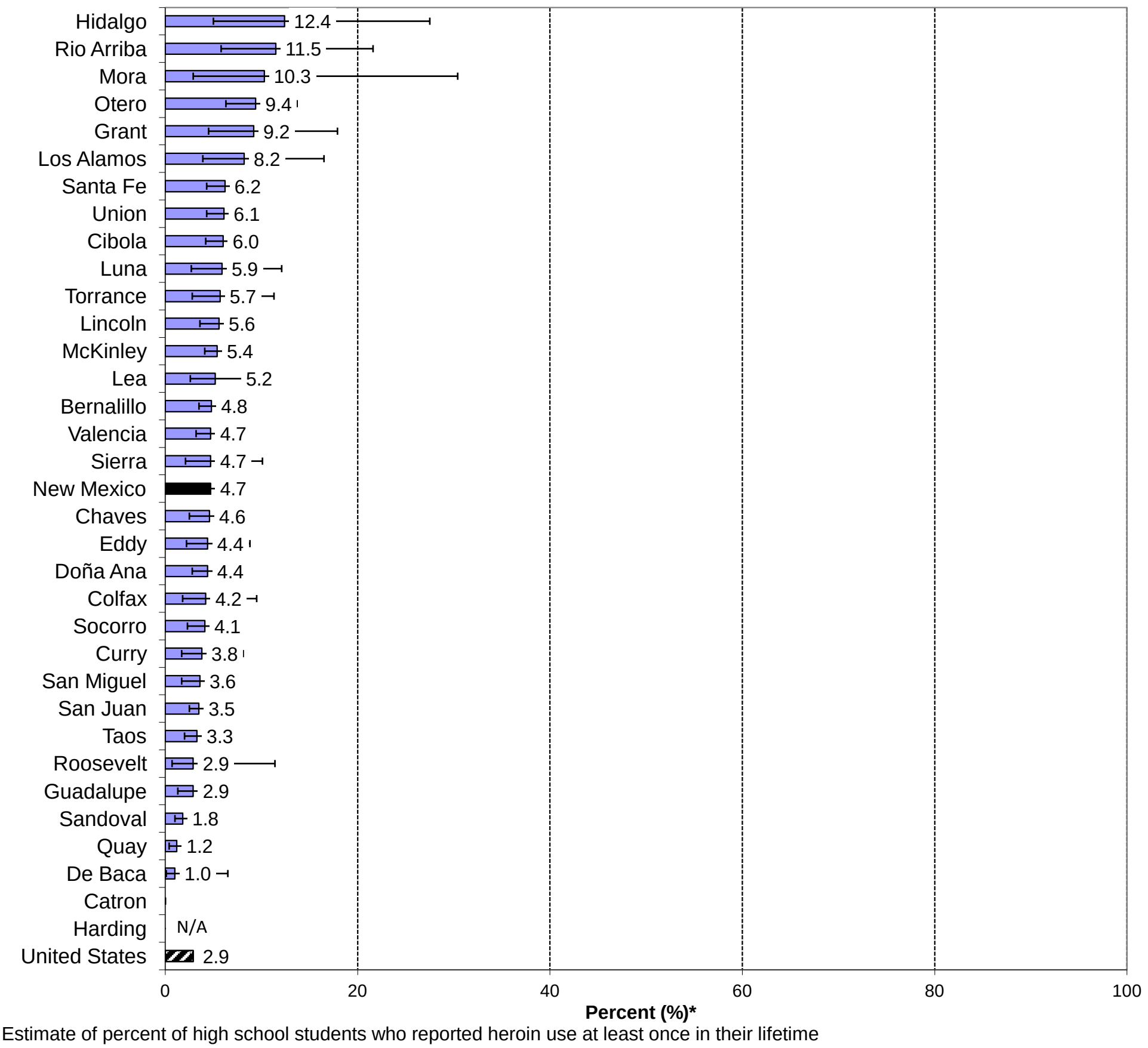
YOUTH HEROIN USE (continued)

Chart 2: Current Heroin Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



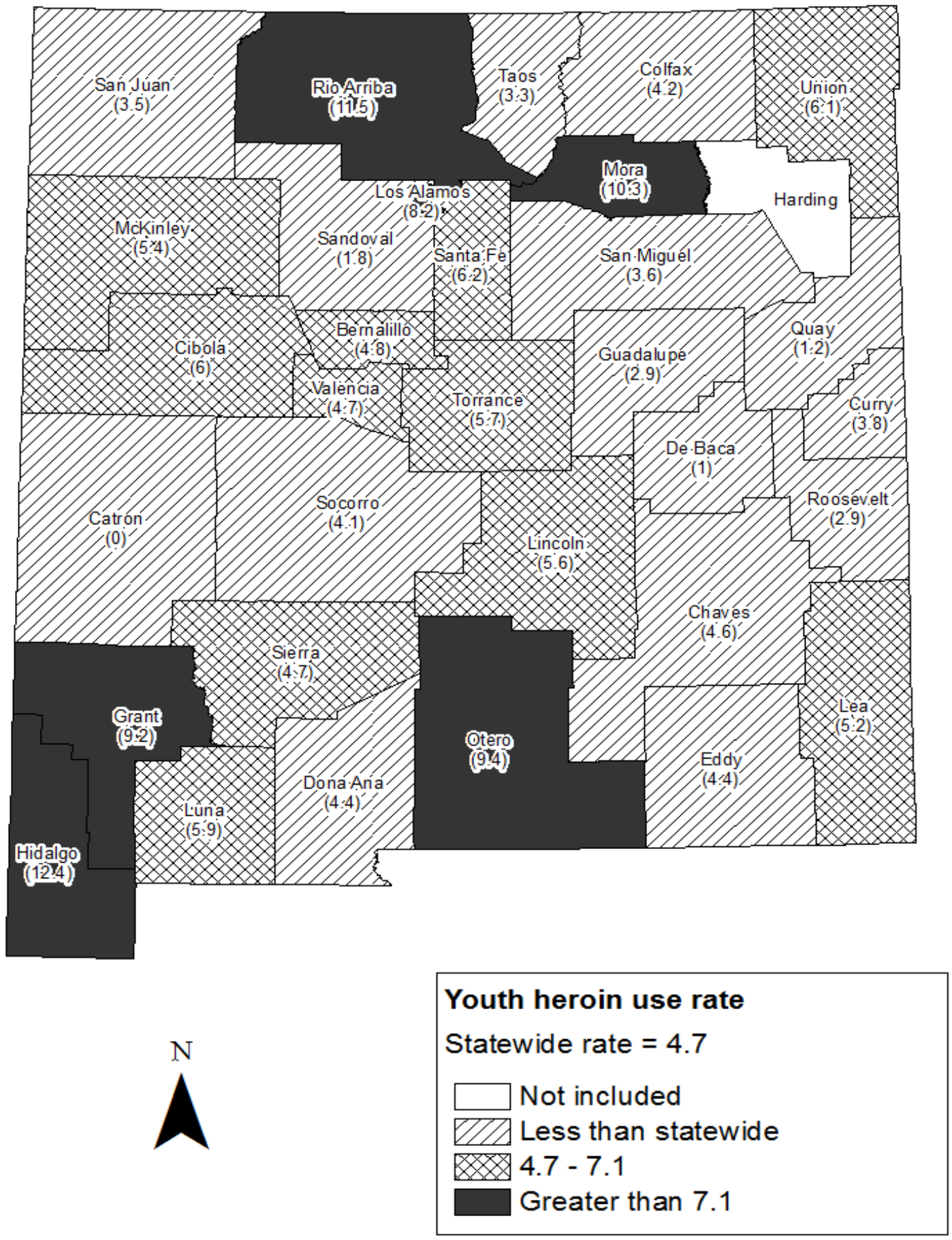
* Estimate of percent of high school students who reported heroin use at least once in their lifetime

Harding County estimates not available because of low numbers.

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

YOUTH HEROIN USE (continued)

Chart 4. Lifetime Heroin Use* by County, Grades 9 - 12, New Mexico, 2011



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

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

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

YOUTH METHAMPHETAMINE USE

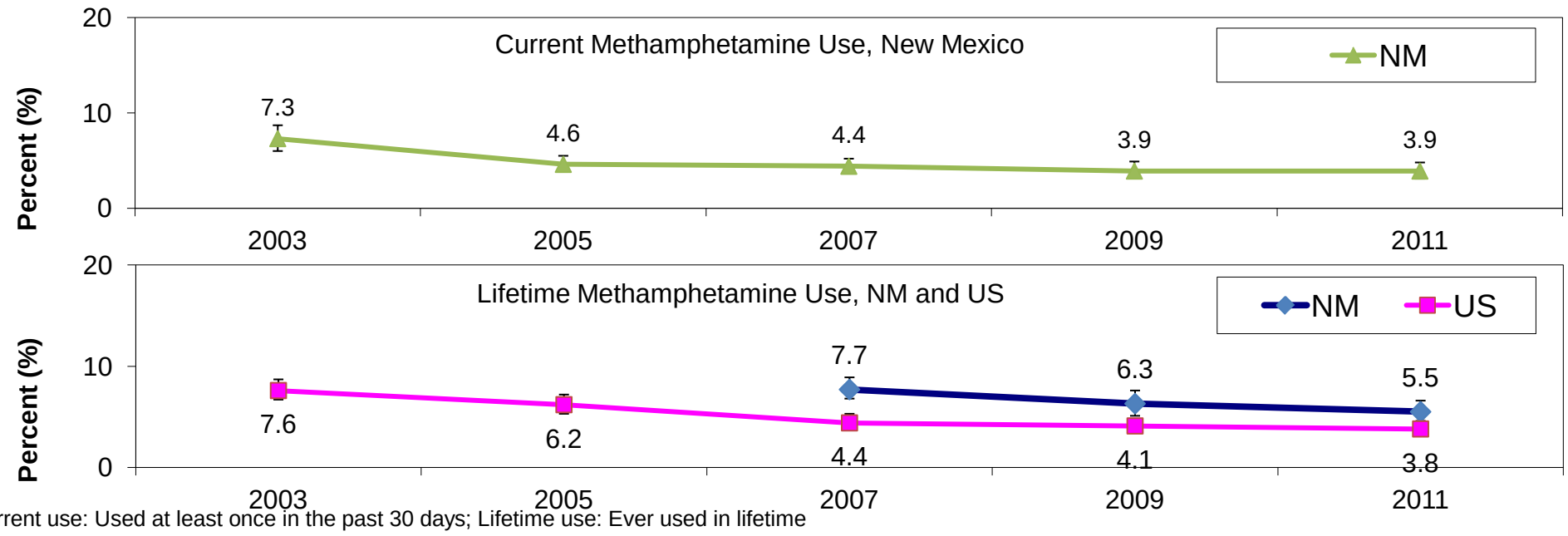
Problem Statement

The New Mexico rate of lifetime methamphetmine use decreased from 7.7% in 2007 to 5.5% in 2011. The US rate decreased from 1999 (9.1%, not shown) to 2011 (3.8%). The New Mexico rate for lifetime methamphetamine use has been consistently higher than the US rate, and in 2011, the New Mexico rate (5.5%) was higher than the US rate (3.8%). For current methamphetamine use, the prevalence decreased from 7.3% in 2003 to 4.6% in 2005, but there has been no apparent change since then. There is no national comparison for current methamphetamine use.

Black/African American (11.6%) and Asian or Pacific Islander (13.0%) students were more likely to be current methamphetamine users than American Indian (3.3%), Hispanic (2.8%), or White (2.9%) students. The prevalence of current heroin use was not associated with grade level. Males were more likely to report current methamphetamine use (4.8%) than females (4.0%), but the differences were not statistically significant.

In 2011, the highest rates of current methamphetamine use were in Rio Arriba (13.7%) and Luna counties (13.4%), and the lowest rates were in De Baca (1.0%), Catron (1.2%), and Roosevelt counties (1.5%).

Chart 1: Methamphetamine Use*, Current and Lifetime, by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

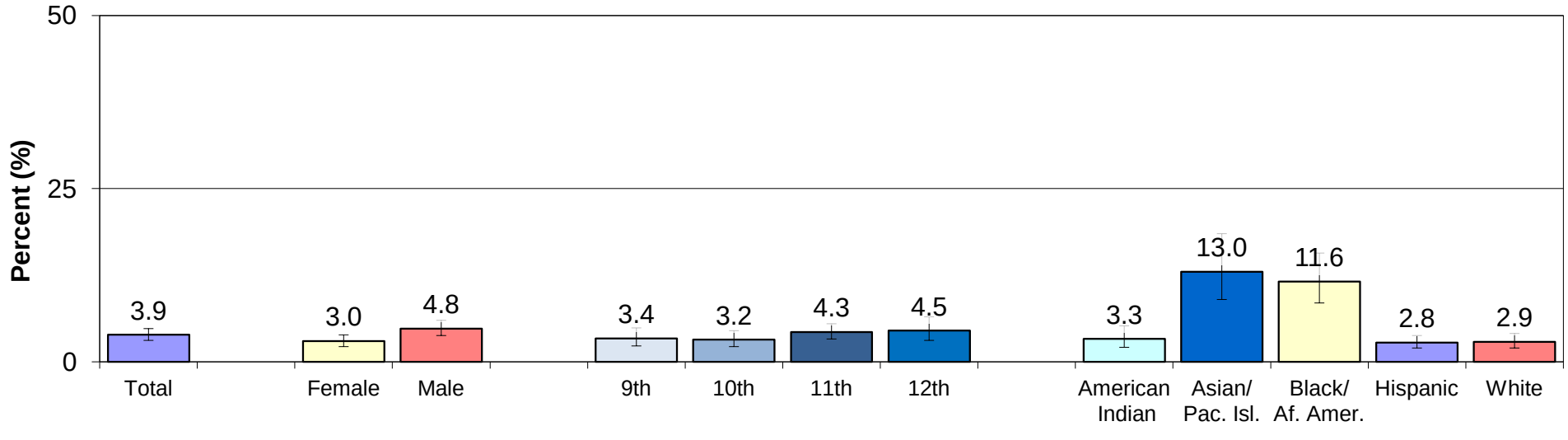
Table 1: Current Methamphetamine Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	4.4 (2.6-7.5)	5.7 (2.4-12.9)	2.0 (0.6-6.0)	3.3 (1.0-9.7)	4.2 (2.4-7.2)
	Asian/Pacific Islander	--	--	--	--	17.0 (11.4-24.6)
	Black/African American	9.4 (3.8-21.5)	--	--	--	13.6 (10.0-18.2)
	Hispanic	3.6 (1.8-7.3)	1.9 (1.0-3.7)	4.2 (1.7-9.7)	2.4 (1.0-5.7)	3.1 (2.1-4.5)
	White	1.9 (0.7-4.9)	3.2 (1.5-6.5)	3.2 (1.4-7.1)	5.5 (2.9-10.3)	3.3 (2.1-5.1)
	Total	4.3 (2.6-6.8)	4.0 (2.5-6.2)	5.2 (3.6-7.5)	5.7 (4.1-8.0)	4.8 (3.8-6.0)
Female	American Indian	3.1 (1.4-6.8)	3.0 (1.2-7.4)	1.3 (0.4-4.8)	0.9 (0.1-5.5)	2.2 (1.4-3.4)
	Asian/Pacific Islander	--	--	--	--	7.4 (4.3-12.6)
	Black/African American	--	--	--	--	8.2 (3.4-18.3)
	Hispanic	1.8 (0.7-4.6)	2.9 (1.8-4.6)	2.9 (1.2-6.8)	2.7 (1.1-6.4)	2.5 (1.6-3.9)
	White	2.0 (0.8-4.9)	1.3 (0.8-2.0)	4.5 (1.9-10.0)	2.8 (1.8-4.5)	2.5 (1.6-3.8)
	Total	2.4 (1.5-4.0)	2.4 (1.6-3.4)	3.4 (1.9-5.9)	3.3 (1.8-6.0)	3.0 (2.2-3.9)
Total	American Indian	3.9 (2.7-5.6)	4.5 (2.0-9.5)	1.7 (0.7-3.7)	2.2 (0.9-4.9)	3.3 (2.1-5.2)
	Asian/Pacific Islander	10.6 (5.3-20.1)	5.3 (1.4-18.5)	21.0 (13.2-31.6)	15.8 (8.1-28.6)	13.0 (9.0-18.5)
	Black/African American	7.2 (3.1-15.7)	9.3 (4.1-19.4)	7.8 (4.8-12.6)	22.8 (13.9-35.0)	11.6 (8.5-15.7)
	Hispanic	2.6 (1.4-5.0)	2.4 (1.5-3.9)	3.5 (2.2-5.5)	2.5 (1.2-5.3)	2.8 (2.0-3.8)
	White	1.9 (1.0-3.9)	2.3 (1.3-3.9)	3.8 (2.0-6.9)	4.3 (2.6-7.1)	2.9 (2.0-4.1)
	Total	3.4 (2.3-4.9)	3.2 (2.2-4.5)	4.3 (3.3-5.5)	4.5 (3.1-6.5)	3.9 (3.1-4.8)

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

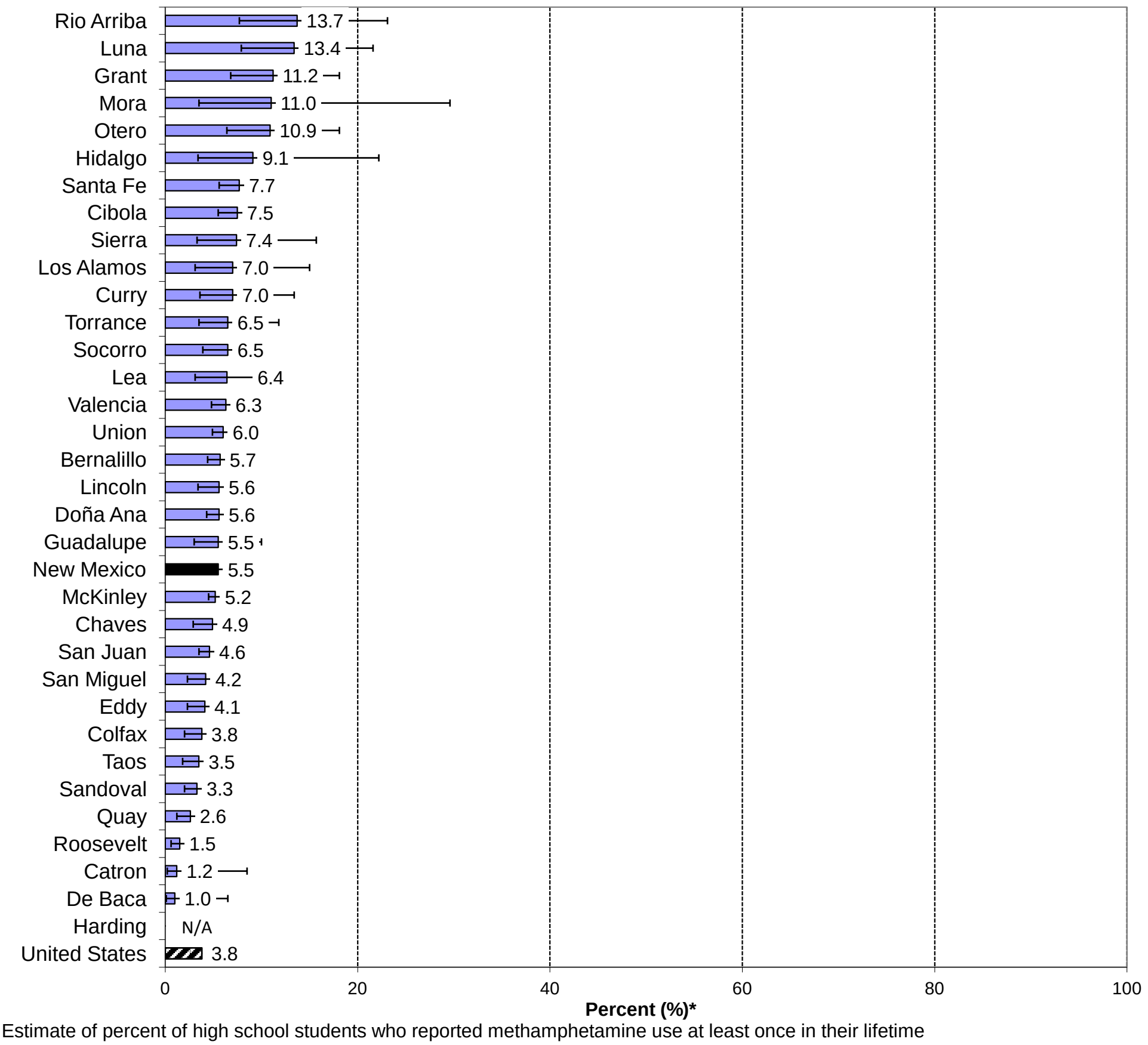
YOUTH METHAMPHETAMINE USE (continued)

Chart 2: Current Methamphetamine Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



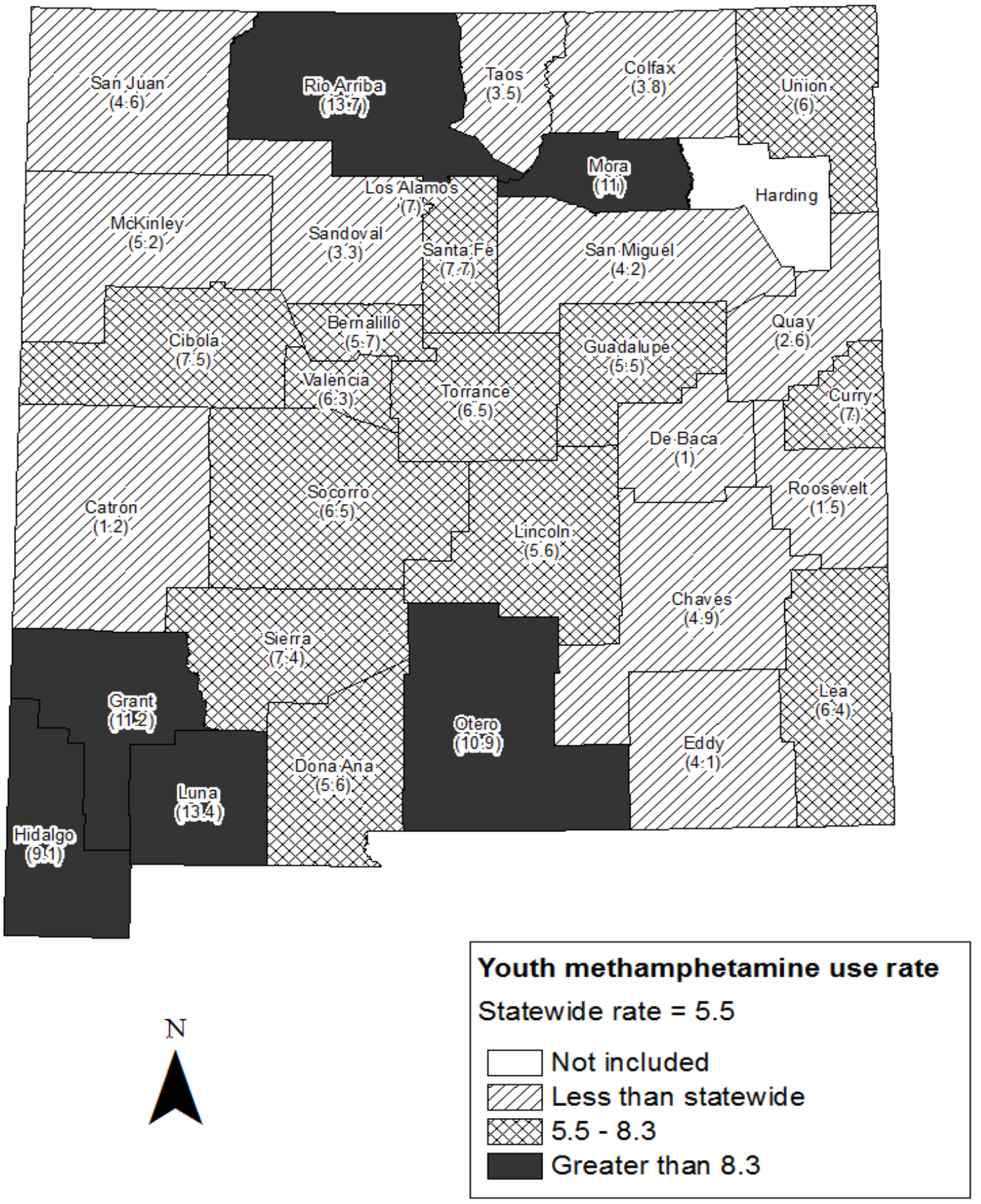
* Estimate of percent of high school students who reported methamphetamine use at least once in their lifetime

Harding County estimates not available because of low numbers.

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

YOUTH METHAMPHETAMINE USE (continued)

Chart 4. Lifetime Methamphetamine Use* by County, Grades 9 - 12, New Mexico, 2011



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

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

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

YOUTH CURRENT INHALANT USE

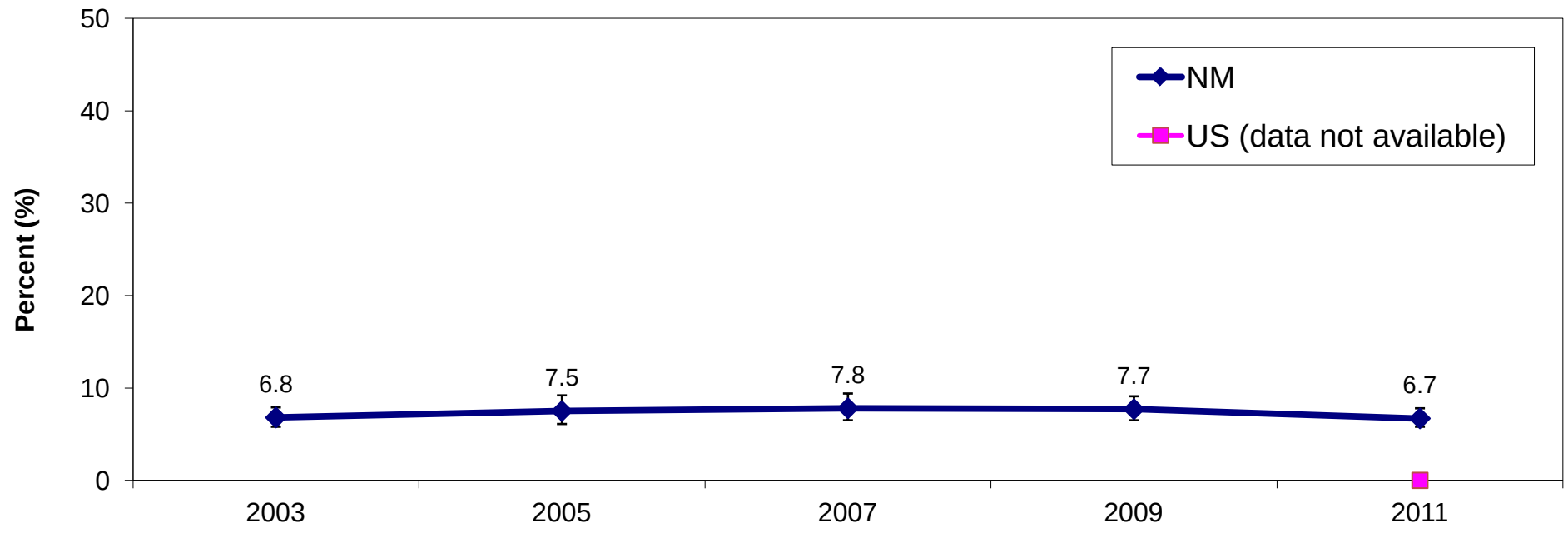
Problem Statement

The rate of current use of inhalants (sniffing glue, breathing the contents of aerosol spray cans, or inhaling paints or sprays) was 6.7% in 2011, and has not varied over recent years. There is no national comparison for current inhalant use.

Black/African American (15.0%) and Asian or Pacific Islander (13.0%) students were more likely to use inhalants than American Indian (6.9%), Hispanic (6.2%), or White (4.7%) students. The prevalence of inhalant use decreased with increasing grade level, from 8.6% among 9th graders to 5.1% among 12th graders. There was no difference in prevalence of inhalant use between males and females.

In 2011, the highes rates for current inhalant use were in Rio Arriba (19.3%), Hidalgo (15.7%), and Mora counties (15.3%); and the lowest rates were in San Juan (3.7%), Roosevelt (3.9%), and Curry counties (4.2%).

Chart 1: Current Inhalant Use* by Year, Grades 9 - 12, New Mexico and US, 2011



* 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)

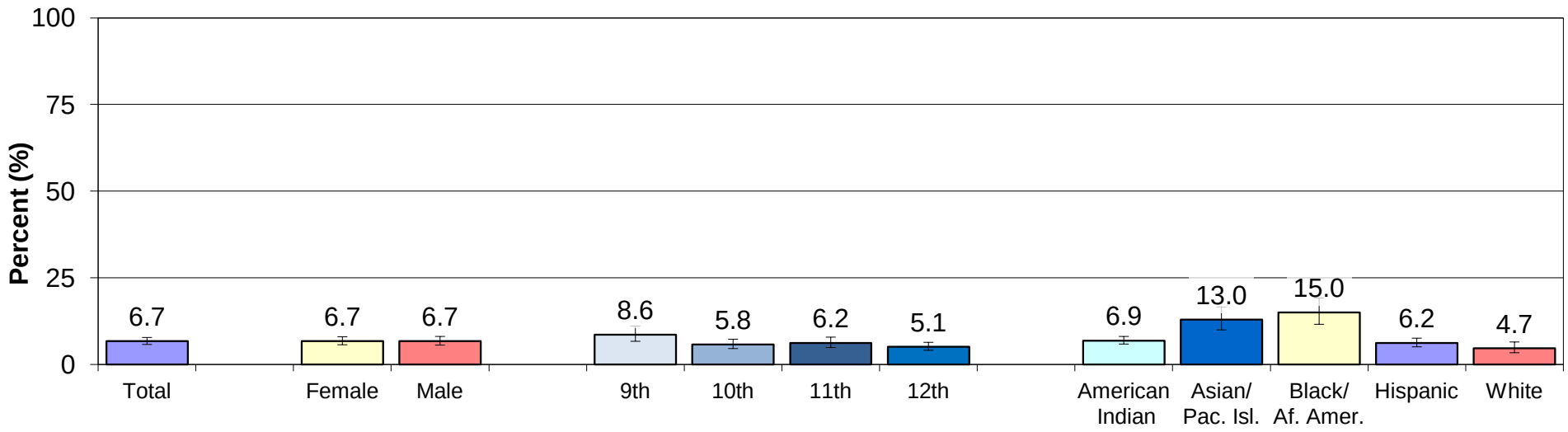
Table 1: Current Inhalant Use, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	7.5 (4.8-11.5)	7.2 (4.1-12.3)	4.8 (2.6-8.8)	5.7 (2.9-10.8)	6.8 (5.7-8.1)
	Asian/Pacific Islander	--	--	--	--	13.5 (9.1-19.5)
	Black/African American	12.7 (6.5-23.3)	--	--	--	15.5 (11.3-20.9)
	Hispanic	7.8 (4.0-14.8)	4.4 (2.5-7.6)	6.2 (3.7-10.2)	5.1 (2.7-9.6)	5.9 (4.3-8.2)
	White	6.3 (3.8-10.6)	3.1 (1.6-6.1)	4.6 (1.6-12.6)	4.6 (2.2-9.4)	4.8 (3.3-7.0)
	Total	7.6 (5.7-10.2)	5.2 (3.8-7.1)	6.8 (4.5-10.2)	6.7 (5.3-8.6)	6.7 (5.6-8.1)
Female	American Indian	12.0 (7.5-18.8)	7.8 (5.2-11.6)	5.0 (2.6-9.4)	2.2 (1.0-4.8)	7.1 (5.8-8.7)
	Asian/Pacific Islander	--	--	--	--	12.6 (7.4-20.5)
	Black/African American	--	--	--	--	13.7 (7.8-22.9)
	Hispanic	10.8 (7.3-15.8)	6.4 (4.8-8.4)	5.3 (3.1-8.7)	3.3 (1.8-5.8)	6.5 (5.2-8.1)
	White	6.6 (3.8-11.2)	4.9 (1.9-12.4)	5.1 (2.2-11.1)	0.8 (0.2-2.9)	4.6 (3.0-7.1)
	Total	9.7 (7.5-12.6)	6.3 (5.1-7.8)	5.7 (3.9-8.2)	3.5 (2.2-5.4)	6.7 (5.7-8.0)
Total	American Indian	9.3 (6.9-12.5)	7.5 (5.0-11.1)	4.9 (3.3-7.1)	4.1 (2.4-6.9)	6.9 (5.9-8.1)
	Asian/Pacific Islander	9.5 (5.0-17.3)	5.3 (1.8-14.5)	19.7 (13.7-27.5)	17.5 (9.7-29.7)	13.0 (10.0-16.6)
	Black/African American	11.2 (6.0-20.0)	13.7 (6.6-26.4)	11.8 (6.5-20.6)	21.5 (12.3-34.9)	15.0 (11.6-19.2)
	Hispanic	9.5 (6.0-14.5)	5.4 (4.1-7.2)	5.7 (4.3-7.5)	4.1 (2.8-5.9)	6.2 (5.1-7.6)
	White	6.5 (4.2-9.9)	4.0 (2.2-6.9)	4.8 (2.5-8.9)	2.9 (1.5-5.6)	4.7 (3.4-6.5)
	Total	8.6 (6.7-11.1)	5.8 (4.6-7.3)	6.2 (4.9-7.9)	5.1 (4.1-6.4)	6.7 (5.8-7.8)

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

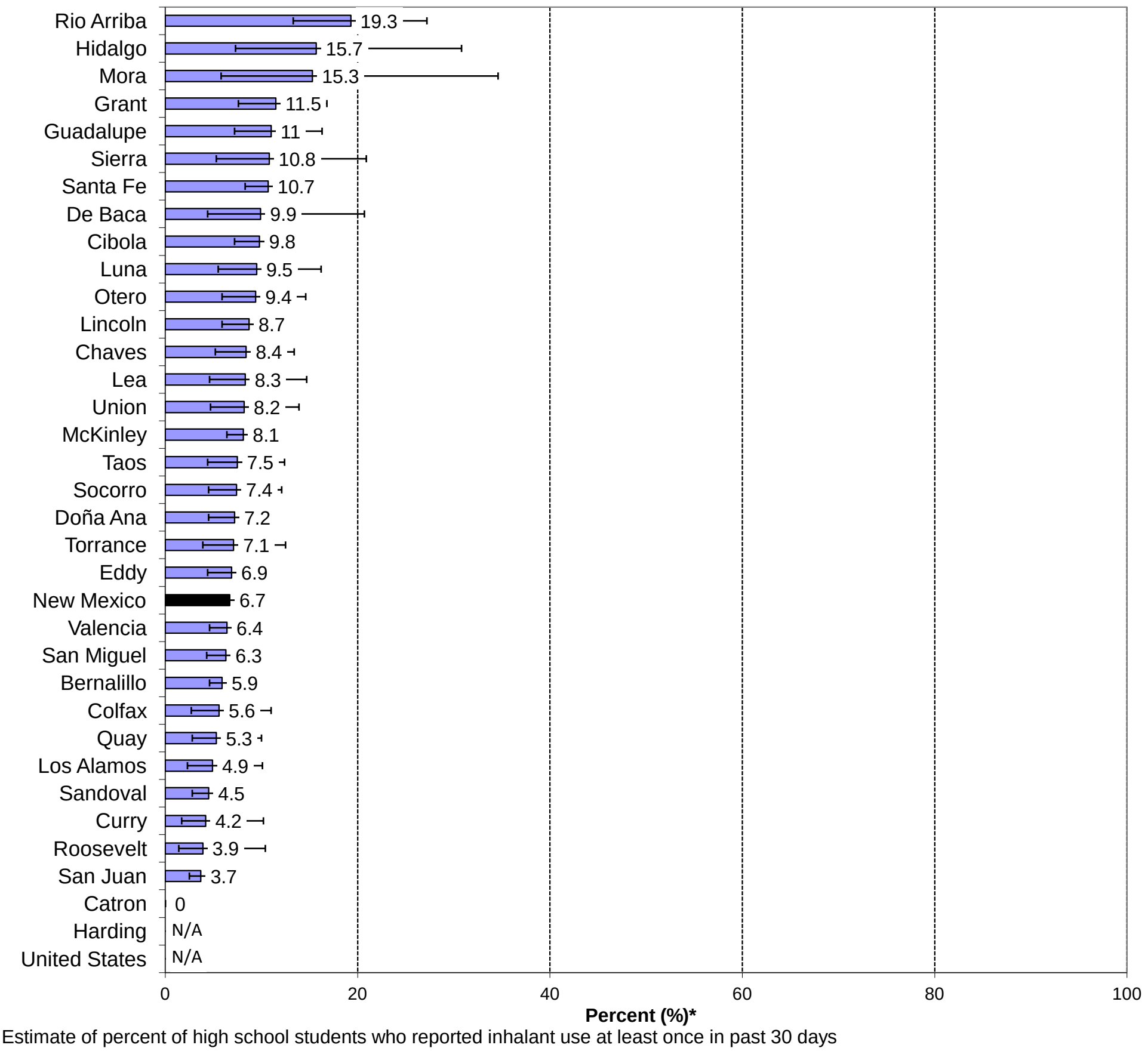
YOUTH CURRENT INHALANT USE (continued)

Chart 2: Current Inhalant Use, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



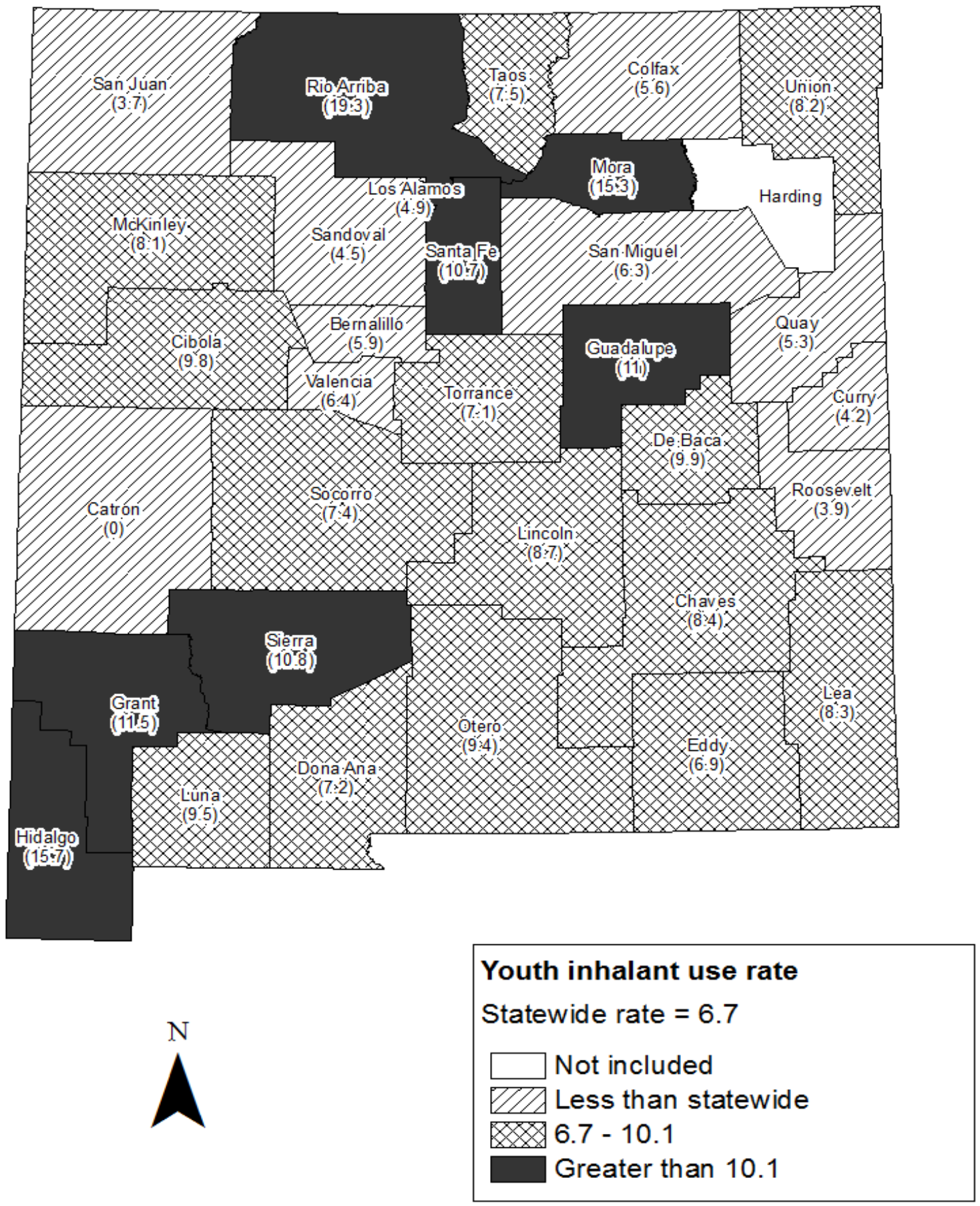
* Estimate of percent of high school students who reported inhalant use at least once in past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

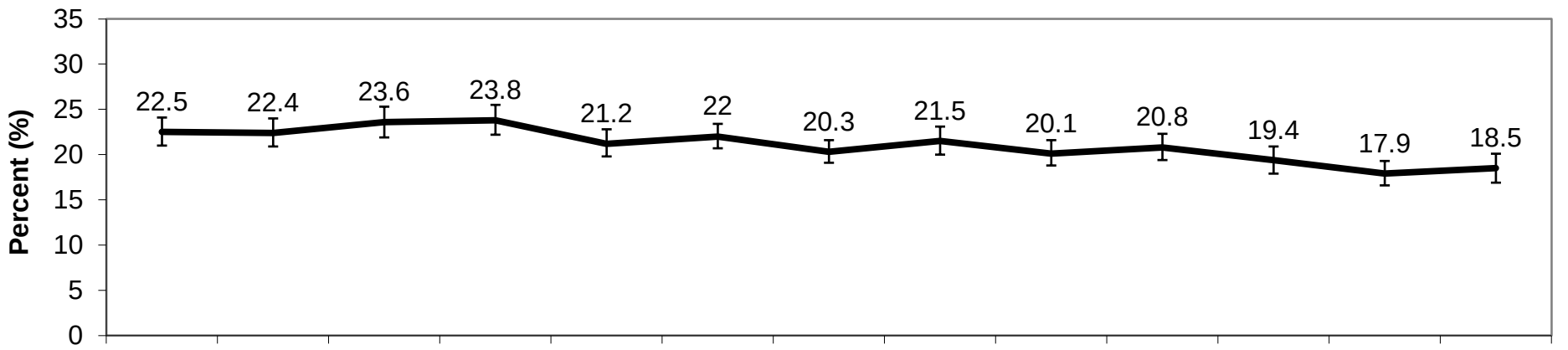
ADULT CIGARETTE SMOKING

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 SAMMEC (Smoking Attributable Mortality, Morbidity, and Economic Costs) website, smoking is responsible for a significant proportion of the deaths from numerous types of malignant neoplasms (e.g., lung, esophageal, and laryngeal cancers); from numerous cardiovascular diseases (e.g., ischemic heart disease, cerebrovascular disease); and from several respiratory diseases (e.g., bronchitis, emphysema, chronic airway obstruction). Combined, these smoking-related deaths make smoking the leading behavioral cause of death in the United States.

In 2010, adults in New Mexico reported current smoking at higher rates (18.5%) than in the U.S. overall (17.3%). 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 2010, as shown in Table 1, smoking was more prevalent among young adults aged 18-24 (26.3%), than among adults aged 25-64 (19.4%) or adults aged 65 and over (9.6%). New Mexico men were more likely to smoke than women (21.9% vs 15.3%). Among males, American Indian males had the highest smoking prevalence (31.4%), followed by Hispanic males (26.3%) and White males (17.2%). Among females, the highest prevalence of smoking was among Black females (37.9%), followed by Hispanic females (15.5%).

Chart 1: Cigarette Smoking (past 30 days)*, Adults Aged 18+, New Mexico, 1998-2010



* 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, 2010

		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	White	-	54,069	6,981	64,863	-	20.5	8.7	17.2
	Hispanic	-	44,587	3,850	70,262	-	24.9	12.8	26.3
	Americn Indian	-	10,183	-	15,080	-	28.9	-	31.4
	Black	-	-	-	-	-	-	-	-
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	33,924	113,904	11,494	159,322	32.9	22.6	9.6	21.9
Female	White	-	41,939	9,209	54,946	-	17.7	9.2	15.0
	Hispanic	-	33,345	4,408	46,625	-	15.7	11.2	15.5
	Americn Indian	-	5,057	159	7,554	-	11.8	3.9	12.9
	Black	-	-	-	6,046	-	-	-	37.9
	Asian/Pacific Islander	-	-	-	-	-	-	-	-
	Total	18,875	83,724	14,295	116,894	19.3	16.2	9.5	15.3
Total	White	7,611	96,008	16,190	119,809	12.8	19.1	9.0	16.2
	Hispanic	30,696	77,932	8,258	116,886	28.4	20.0	11.9	20.6
	Americn Indian	-	15,239	632	22,634	-	19.5	7.9	21.3
	Black	-	4,346	-	7,621	-	25.2	-	29.7
	Asian/Pacific Islander	-	-	-	3,096	-	-	-	14.5
	Total	52,799	197,628	25,789	276,216	26.3	19.4	9.6	18.5

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

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

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

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Problem Statement (continued)

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

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

Table 2: Cigarette Smoking (past 30 days) by Race/Ethnicity and County, Adults Aged 18+, New Mexico, 2010

	Number*						Percent**					
County	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races	White	His-panic	Ameri-can Indian	Black	Asian PI	All Races
Bernalillo	32,148	43,357	-	-	-	89,454	12.8	24.4	-	-	-	18.6
Catron	-	-	-	-	-	-	-	-	-	-	-	-
Chaves	5,045	3,852	-	-	-	10,381	21.8	17.4	-	-	-	21.0
Cibola	1,104	-	1,122	-	-	3,134	12.1	-	21.0	-	-	14.3
Colfax	-	-	-	-	-	2,686	-	-	-	-	-	27.3
Curry	4,898	1,573	-	-	-	7,118	23.9	13.1	-	-	-	20.2
De Baca	-	-	-	-	-	-	-	-	-	-	-	-
Dona Ana	5,680	7,949	-	-	-	14,744	12.7	10.5	-	-	-	11.5
Eddy	2,587	1,887	-	-	-	4,837	12.2	17.0	-	-	-	14.0
Grant	4,071	-	-	-	-	4,842	23.2	-	-	-	-	17.2
Guadalupe	-	-	-	-	-	-	-	-	-	-	-	-
Harding	-	-	-	-	-	-	-	-	-	-	-	-
Hidalgo	-	-	-	-	-	-	-	-	-	-	-	-
Lea	3,691	4,055	-	-	-	9,881	19.6	23.5	-	-	-	24.3
Lincoln	778	-	-	-	-	1,231	7.7	-	-	-	-	7.0
Los Alamos	1,722	-	-	-	-	2,164	13.2	-	-	-	-	13.2
Luna	-	-	-	-	-	2,797	-	-	-	-	-	15.8
McKinley	1,066	1,231	2,719	-	-	5,057	12.1	20.9	13.0	-	-	13.7
Mora	-	-	-	-	-	-	-	-	-	-	-	-
Otero	4,094	-	-	-	-	12,437	16.4	-	-	-	-	25.4
Quay	-	-	-	-	-	-	-	-	-	-	-	-
Rio Arriba	-	6,885	-	-	-	9,599	-	26.4	-	-	-	26.0
Roosevelt	756	-	-	-	-	1,424	10.5	-	-	-	-	15.0
Sandoval	8,244	2,651	-	-	-	13,207	13.6	8.7	-	-	-	12.6
San Juan	9,647	5,405	2,212	-	-	17,915	18.5	37.3	13.3	-	-	20.6
San Miguel	-	3,792	-	-	-	6,112	-	25.5	-	-	-	26.0
Santa Fe	7,704	8,421	-	-	-	17,467	15.2	20.2	-	-	-	17.7
Sierra	-	-	-	-	-	-	-	-	-	-	-	-
Socorro	-	-	-	-	-	1,819	-	-	-	-	-	11.8
Taos	1,452	2,058	-	-	-	3,779	14.0	13.5	-	-	-	12.9
Torrance	-	-	-	-	-	6,852	-	-	-	-	-	36.9
Union	-	-	-	-	-	-	-	-	-	-	-	-
Valencia	8,446	6,602	-	-	-	16,178	32.4	26.2	-	-	-	29.0
New Mexico	119,809	116,886	22,634	7,621	3,096	276,216	16.2	20.6	21.3	29.7	14.5	18.5

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

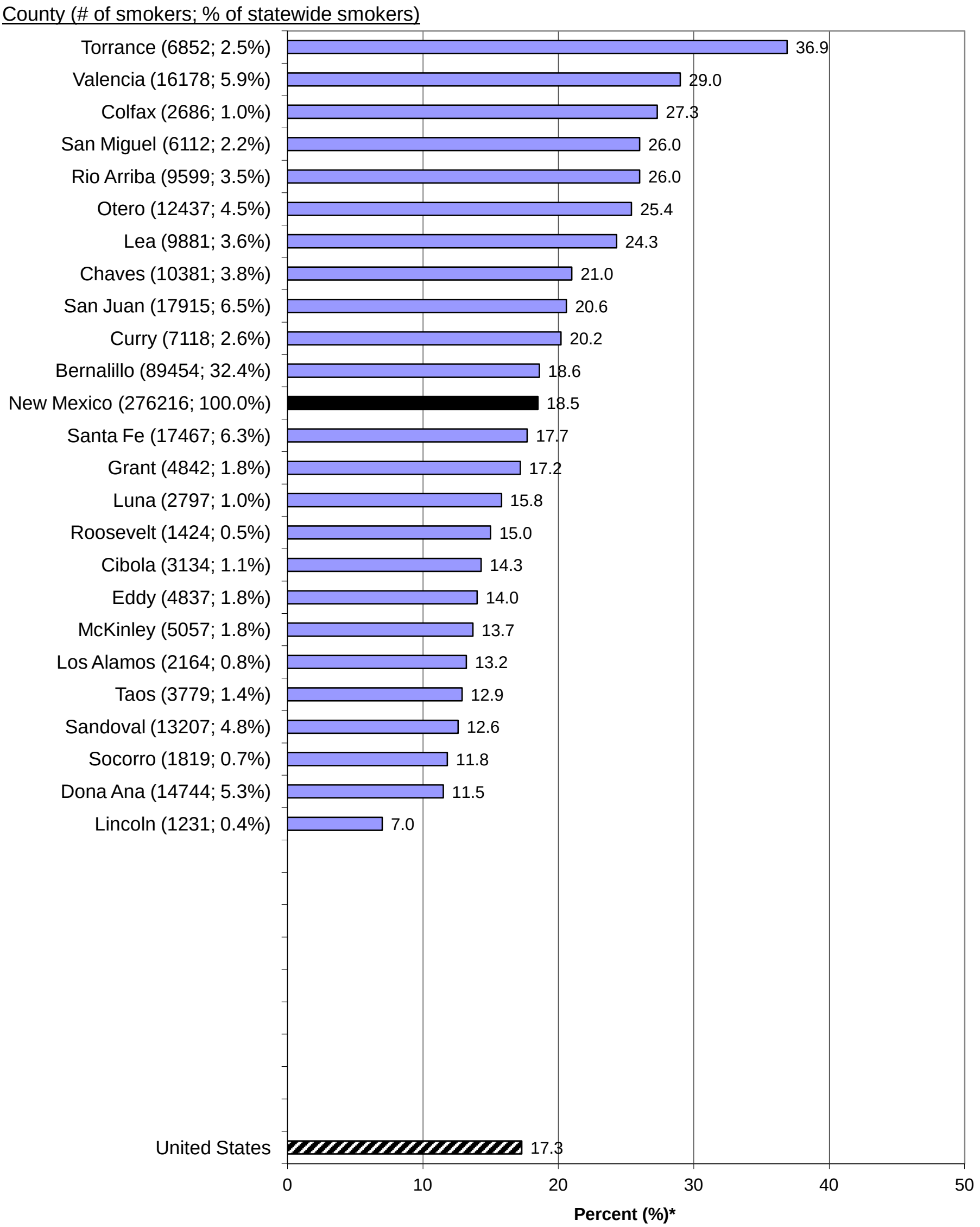
** Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

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

Source: BRFSS; SAES

ADULT CIGARETTE SMOKING (continued)

Chart 2: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



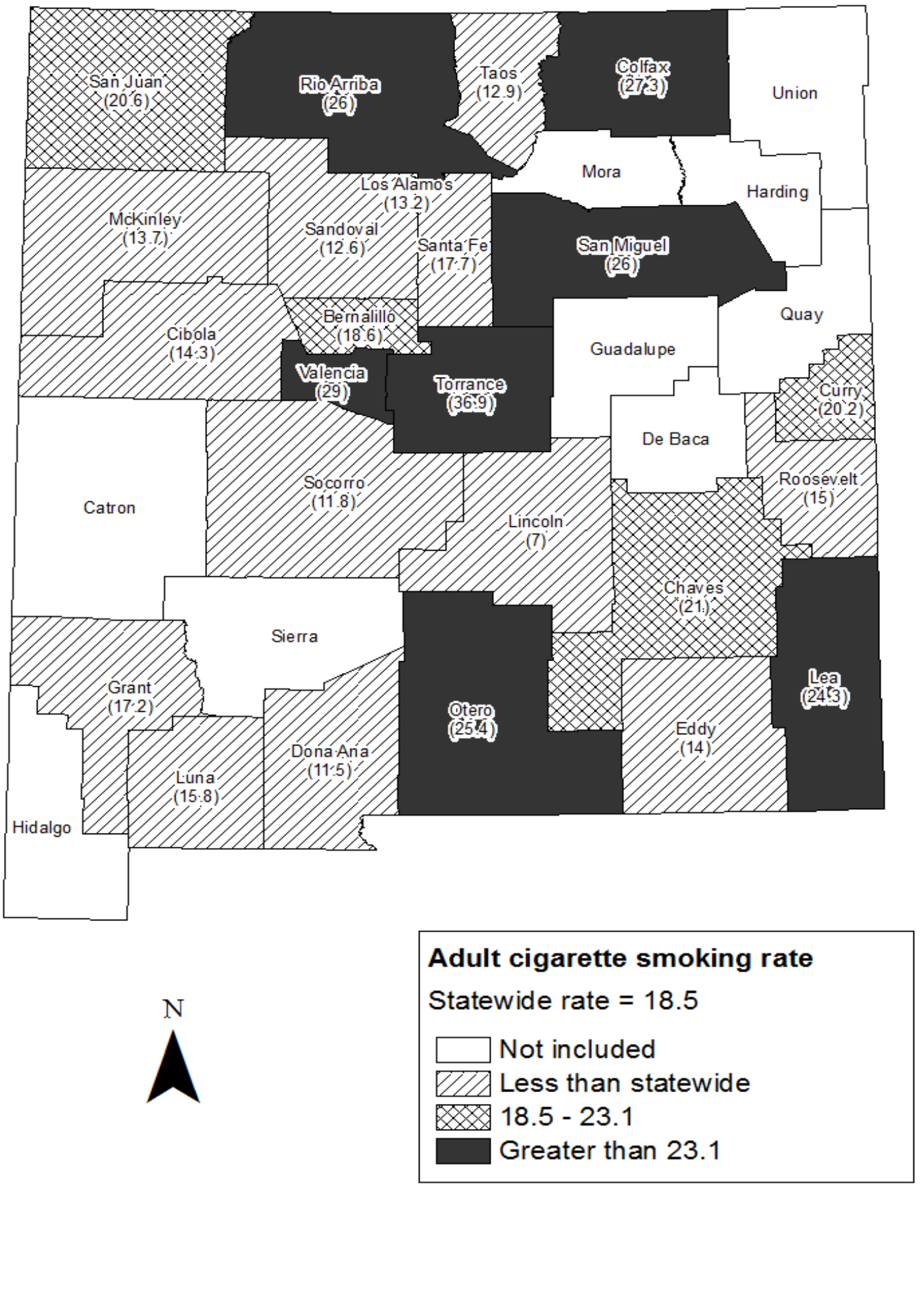
* Estimate of percent of people in population group who have smoked >= 100 cigarettes in lifetime and who smoked cigarettes in past 30 days

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

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

ADULT CIGARETTE SMOKING (continued)

Chart 3: Cigarette Smoking (past 30 days)* by County, Adults Aged 18+, New Mexico, 2010



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

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

Source: BRFSS; SAES

YOUTH CURRENT CIGARETTE SMOKING

Problem Statement*

Cigarette smoking is the leading cause of preventable death in the United States. Cigarette smoking increases risk of several cancers and other chronic conditions. Smoking is initiated and established primarily during adolescence, with more than 80% of adult smokers first smoking before age18.**

The prevalence of current cigarette smoking among New Mexico high school students has decreased from 30.2% in 2003 to 19.9% in 2011. This coincides with a decrease in the US rate that has occurred over the past several years. The New Mexico rate was consistently higher than the US rate until 2011. In 2011, the New Mexico and US rates were not statistically distinguishable (US=18.1%; NM=19..9%).

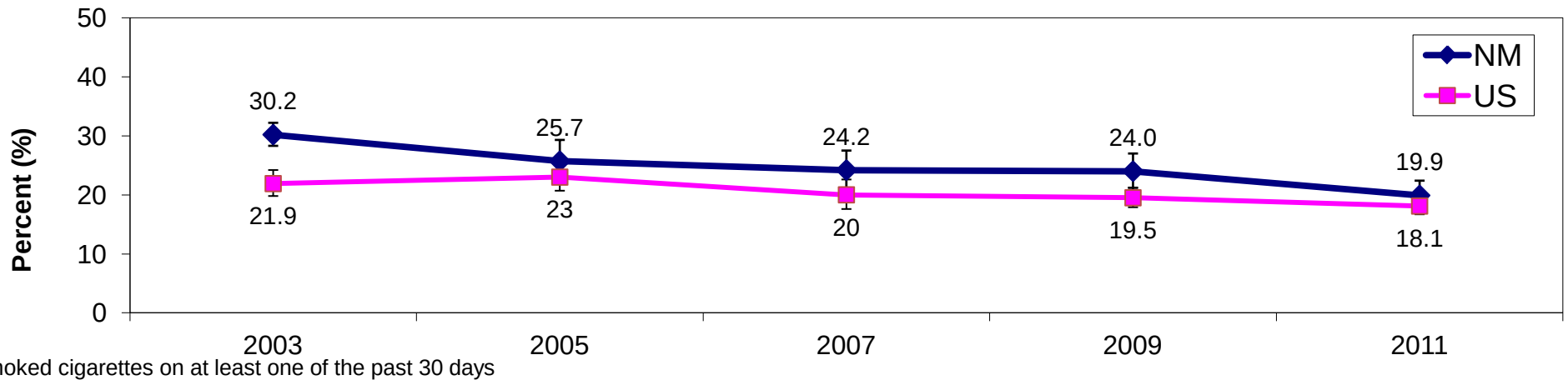
Boys (23.2%) were more likely to be current cigarette smokers than girls (16.5%). White (16.1%) and Hispanic students (19.0%) had a lower rate of current cigarette smoking than American Indian students (26.7%). While the rate for 12th graders appears to be higher than the rates for other grades, the difference is not statistically significant.

In 2011, the counties with the highest prevalence of current smoking were Catron (37.4%), Socorro (29.7%), Grant (29.2%), Rio Arriba (29.1%), and Mora counties (28.4%). The counties with the lowest prevalence of current smoking were De Baca (11.7%), Roosevelt (15.0%), Sandoval (15.0%), Los Alamos (17.9%), and Lincoln counties (18.2%).

* 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, 2011



* 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)

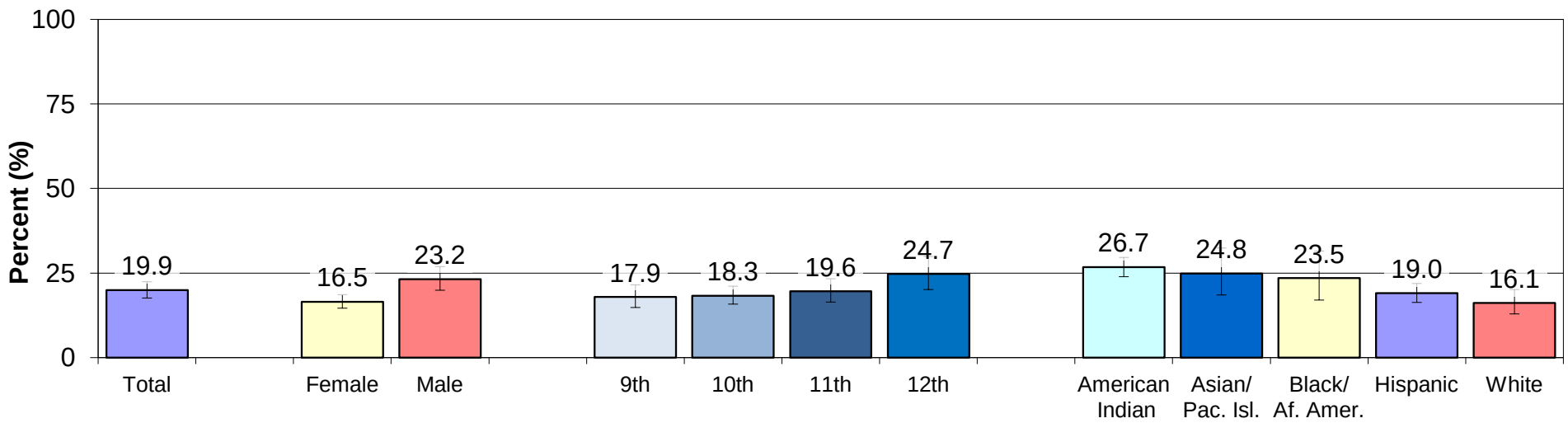
Table 1: Current Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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	30.5 (21.6-41.2)	28.3 (19.2-39.7)	30.1 (22.1-39.5)	35.8 (27.7-44.8)	31.3 (27.0-36.0)
	Asian/Pacific Islander	--	--	--	--	29.5 (21.6-38.9)
	Black/African American	31.1 (23.8-39.5)	--	--	--	28.5 (21.7-36.4)
	Hispanic	19.4 (12.7-28.7)	17.9 (12.9-24.2)	19.7 (14.6-26.1)	33.4 (25.7-42.2)	22.1 (18.2-26.7)
	White	15.3 (9.9-22.9)	16.2 (10.1-24.9)	15.3 (9.0-24.7)	24.6 (16.1-35.7)	17.4 (12.9-23.1)
	Total	21.9 (17.8-26.7)	19.4 (14.8-25.1)	21.4 (17.4-26.1)	31.8 (25.7-38.5)	23.2 (19.9-26.9)
Female	American Indian	20.3 (15.1-26.7)	18.5 (11.6-28.4)	24.0 (18.5-30.6)	21.9 (12.5-35.3)	20.9 (17.4-24.8)
	Asian/Pacific Islander	--	--	--	--	18.1 (11.0-28.2)
	Black/African American	--	--	--	--	16.2 (9.4-26.3)
	Hispanic	14.5 (10.0-20.5)	17.7 (14.0-22.1)	15.9 (11.5-21.6)	17.4 (13.9-21.5)	16.3 (14.0-18.9)
	White	9.8 (6.6-14.5)	15.9 (9.9-24.4)	19.0 (14.1-25.2)	17.3 (10.7-26.9)	14.8 (11.7-18.6)
	Total	13.6 (10.4-17.6)	17.2 (14.6-20.1)	17.9 (14.8-21.6)	17.6 (13.8-22.2)	16.5 (14.6-18.6)
Total	American Indian	26.3 (20.3-33.3)	23.9 (18.2-30.7)	27.1 (22.0-33.0)	29.2 (23.2-36.0)	26.7 (23.9-29.6)
	Asian/Pacific Islander	18.7 (9.7-33.0)	16.1 (10.6-23.7)	31.5 (18.5-48.1)	35.7 (23.1-50.6)	24.8 (18.5-32.4)
	Black/African American	24.7 (17.5-33.6)	20.1 (10.5-35.0)	21.0 (11.1-36.2)	--	23.5 (17.0-31.5)
	Hispanic	16.8 (12.3-22.6)	17.8 (14.6-21.5)	17.6 (13.7-22.4)	24.5 (19.8-29.9)	19.0 (16.3-21.9)
	White	12.7 (8.7-18.2)	16.0 (12.3-20.5)	17.0 (12.3-23.0)	21.4 (14.5-30.5)	16.1 (12.9-20.1)
	Total	17.9 (14.8-21.5)	18.3 (15.8-21.1)	19.6 (16.4-23.3)	24.7 (20.1-29.9)	19.9 (17.6-22.4)

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

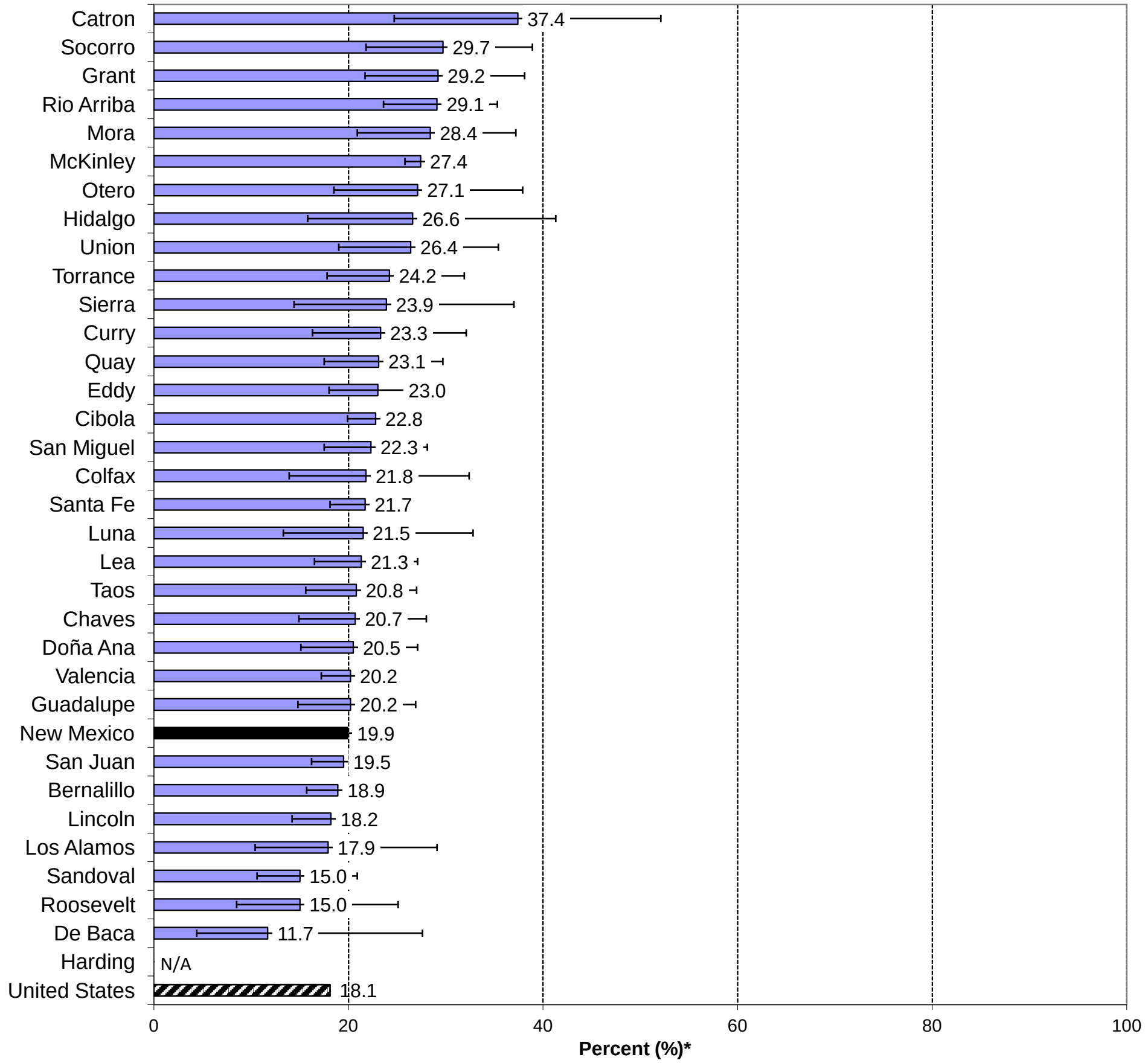
YOUTH CURRENT CIGARETTE SMOKING (continued)

Chart 2: Current Cigarette Smoking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



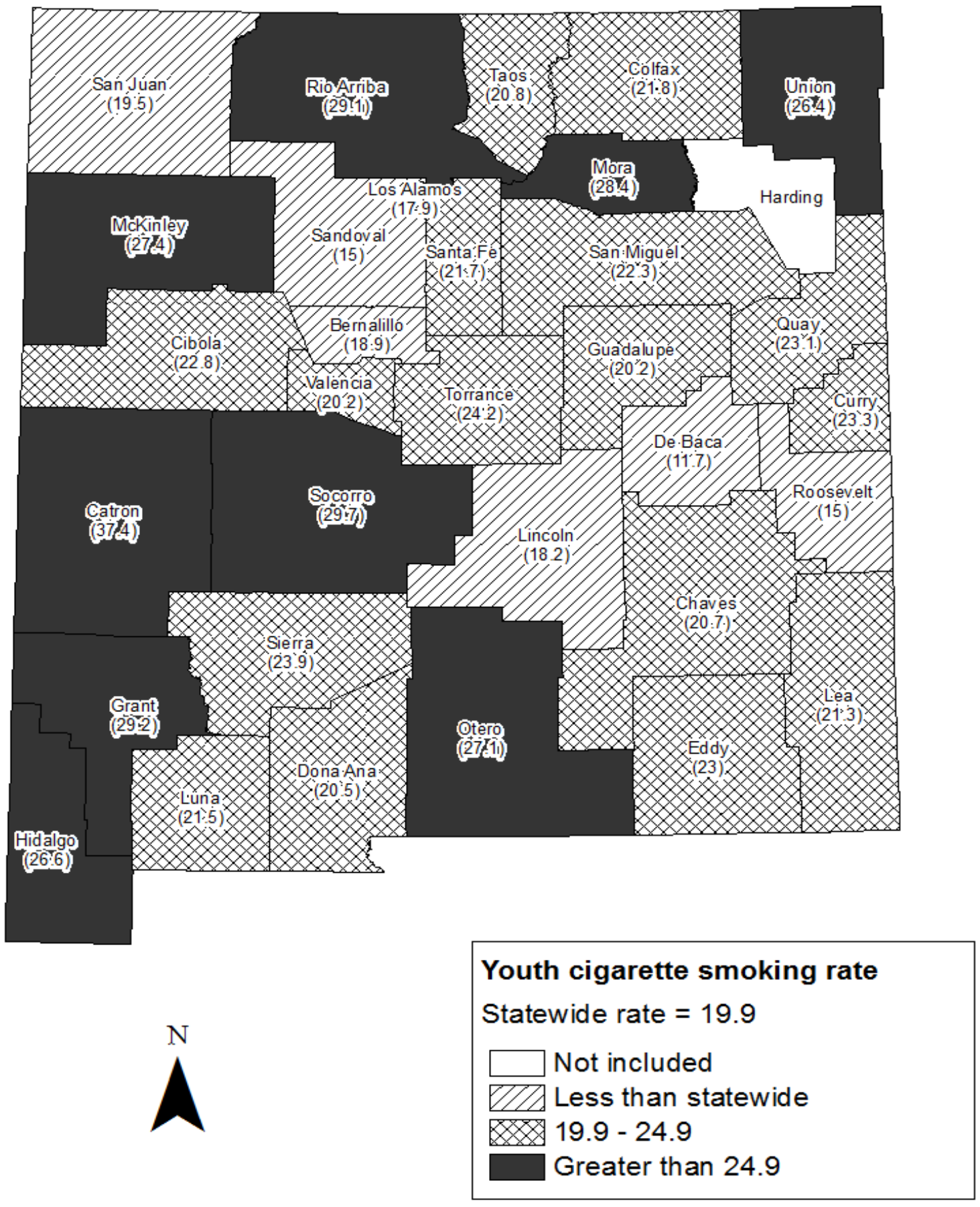
* Estimate of percent of high school students who reported smoking cigarettes on at least one of the past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

YOUTH FREQUENT CIGARETTE SMOKING

Problem Statement

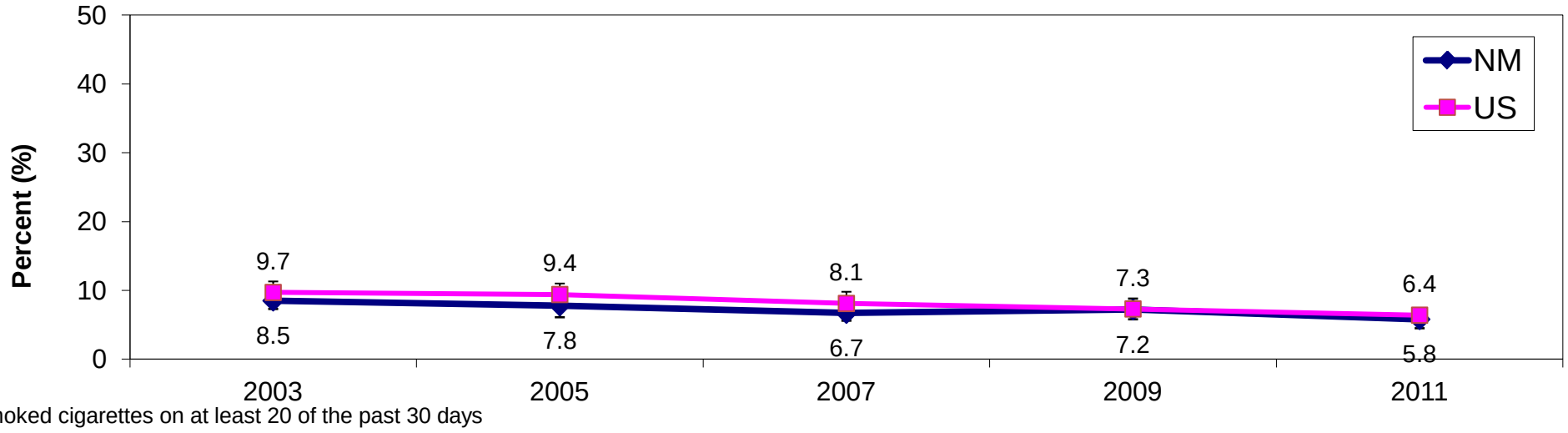
Frequent cigarette smoking means smoking cigarettes on at least 20 of the past 30 days. The prevalence of frequent cigarette smoking among New Mexico high school students has decreased from 8.5% in 2003 to 5.8% in 2009. This coincides with a decrease in the US rate of frequent smoking over the past several years. In 2011, the New Mexico prevalence of frequent smoking was not statistically different from the US rate (5.8% vs. 6.4%).

The difference in the prevalence of frequent smoking between boys (7.3%) and girls (4.2%) was not statistically significant. American Indian students (4.0%) had a lower prevalence of frequent smoking than African American (10.5%) or Asian or Pacific Islander (9.4%) students. The difference between American Indian students and Hispanic (5.7%) or White (5.8%) students was not statistically significant. The prevalence of frequent smoking increased with grade level (9th=3.4%; 10th=4.8%; 11th=7.0%; 12th=8.7%).

In 2011, the highest rates for frequent cigarette smoking were in Otero (13,8%), Torrance (12.7%), Catron (11.0%), Hidalgo (10.6%), and Grant counties (10.0%). The lowest rates were in Taos (2.9%), McKinley (3.6%), Roosevelt (3.8%), Sandoval (3.8%), and San Juan counties (3.9%).

* 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, 2011



* 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)

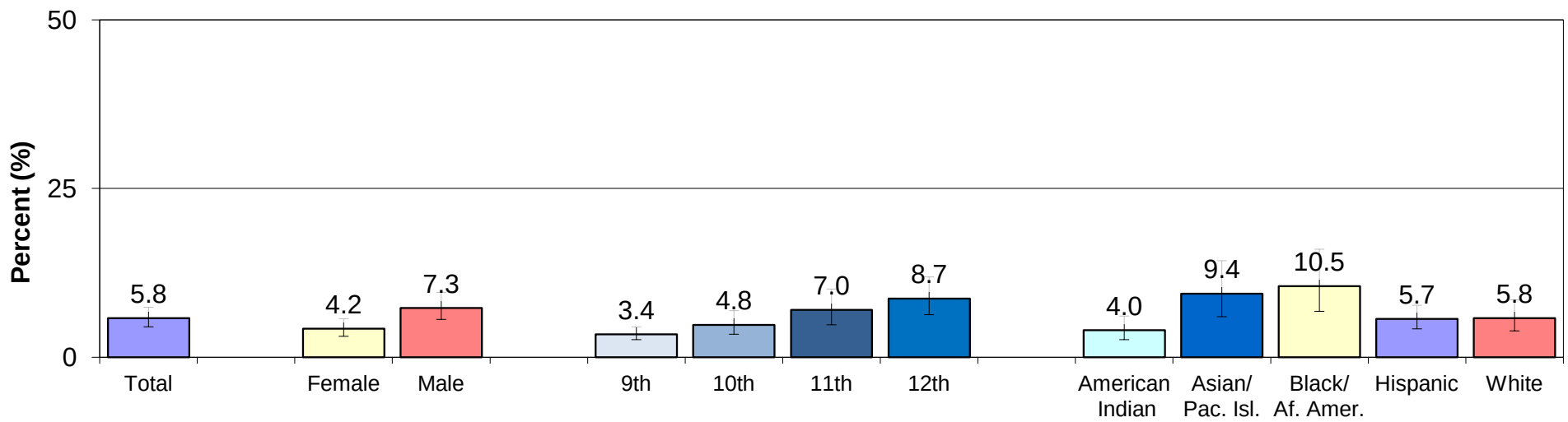
Table 1: Frequent Cigarette Smoking, by Grade Level, Gender, and Race/Ethnicity, Grades 9 - 12, New Mexico, 2011

		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 (2.1-10.2)	3.7 (1.1-11.2)	6.2 (2.6-13.9)	5.7 (2.8-11.2)	5.2 (3.2-8.2)
	Asian/Pacific Islander	--	--	--	--	13.4 (8.2-21.2)
	Black/African American	13.4 (6.6-25.2)	--	--	--	12.3 (7.8-18.8)
	Hispanic	3.2 (1.1-8.8)	6.9 (3.7-12.5)	7.3 (4.3-12.0)	13.1 (9.2-18.4)	7.3 (5.4-9.9)
	White	2.8 (1.1-6.9)	7.0 (3.4-14.1)	8.1 (3.2-18.7)	11.1 (6.8-17.8)	6.7 (4.0-11.2)
	Total	4.5 (3.1-6.7)	6.1 (3.8-9.6)	8.2 (5.4-12.2)	12.2 (9.2-15.9)	7.3 (5.6-9.6)
Female	American Indian	1.6 (0.5-5.4)	2.1 (1.1-4.1)	4.1 (1.5-10.4)	3.0 (1.0-8.5)	2.6 (1.4-4.8)
	Asian/Pacific Islander	--	--	--	--	3.4 (1.5-7.5)
	Black/African American	--	--	--	--	7.6 (3.6-15.4)
	Hispanic	2.3 (1.1-4.6)	3.3 (1.6-6.6)	5.7 (3.4-9.4)	6.3 (3.2-12.0)	4.3 (2.9-6.4)
	White	2.3 (1.1-4.9)	4.5 (2.3-8.6)	8.3 (4.2-15.8)	5.2 (2.7-9.9)	4.7 (3.1-7.2)
	Total	2.3 (1.5-3.4)	3.6 (2.5-5.2)	5.9 (3.7-9.2)	5.2 (2.9-9.1)	4.2 (3.1-5.7)
Total	American Indian	3.4 (1.8-6.3)	3.0 (1.2-6.9)	5.2 (2.7-9.5)	4.4 (2.3-8.5)	4.0 (2.6-6.1)
	Asian/Pacific Islander	4.9 (2.1-11.0)	5.6 (2.3-13.3)	9.0 (3.3-22.4)	20.4 (9.6-38.2)	9.4 (6.0-14.3)
	Black/African American	9.8 (4.7-19.4)	6.2 (1.8-19.3)	13.5 (6.4-26.2)	--	10.5 (6.8-16.0)
	Hispanic	2.7 (1.3-5.4)	5.0 (2.8-8.7)	6.4 (4.2-9.7)	9.3 (6.2-13.6)	5.7 (4.2-7.7)
	White	2.5 (1.4-4.6)	5.8 (3.6-9.4)	8.2 (4.1-15.6)	8.5 (5.6-12.7)	5.8 (3.9-8.5)
	Total	3.4 (2.6-4.5)	4.8 (3.4-6.9)	7.0 (4.8-10.1)	8.7 (6.3-11.9)	5.8 (4.5-7.4)

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

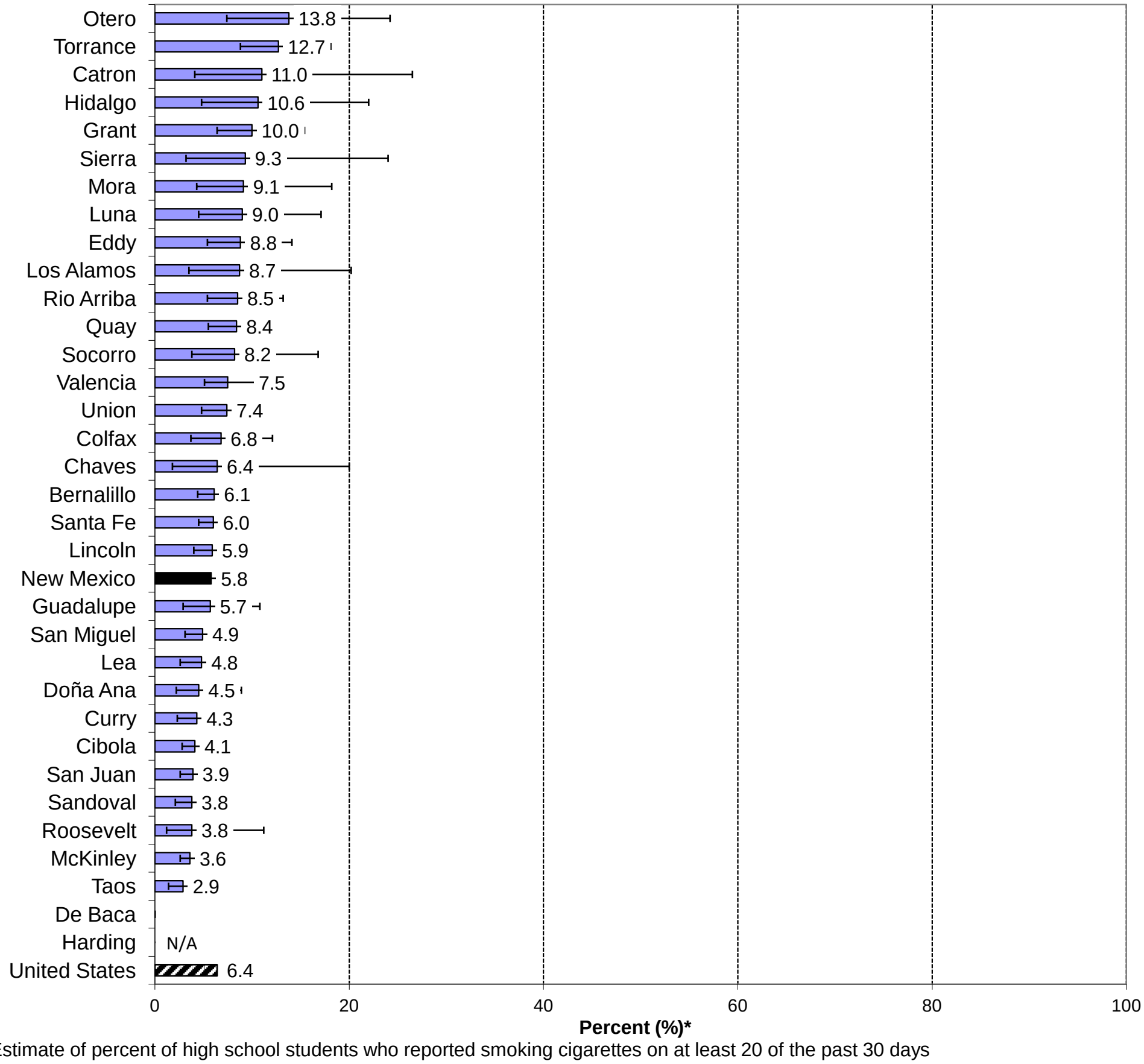
YOUTH FREQUENT CIGARETTE SMOKING (continued)

Chart 2: Frequent Cigarette Smoking, by Grade Level and Gender, Grades 9 - 12, New Mexico, 2011



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, 2011



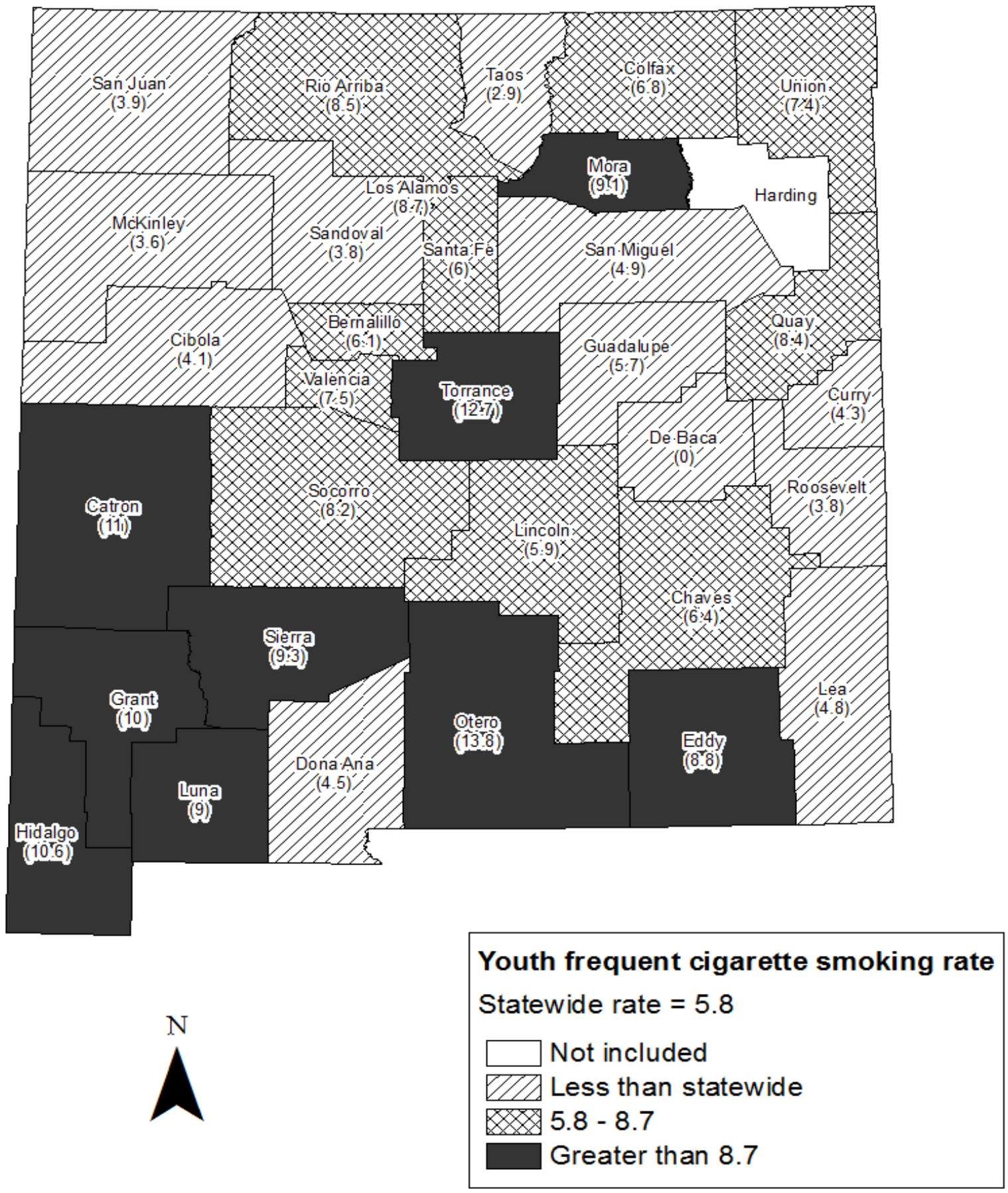
* Estimate of percent of high school students who reported smoking cigarettes on at least 20 of the past 30 days

Harding County estimates not available because of low numbers.

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, 2011



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

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

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

Appendix 1

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

Appendix 1: Male Population, New Mexico, 2009*

		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	37,184	77,882	21,984	137,051	5,779	6,877	824	13,480	58,904	72,161	10,106	141,171	8,737	9,038	781	18,555	3,513	5,036	618	9,167	114,118	170,994	34,313	319,425
	Catron	256	773	450	1,479	8	13	0	21	89	198	80	367	38	19	10	67	1	2	0	3	391	1,006	540	1,937
	Chaves	4,261	7,176	2,919	14,356	485	386	66	938	7,589	7,240	1,078	15,907	379	332	43	754	163	150	23	336	12,877	15,284	4,130	32,291
	Cibola	709	1,673	627	3,009	66	108	19	194	1,586	2,851	401	4,838	2,372	2,686	472	5,530	43	40	5	89	4,776	7,358	1,525	13,659
	Colfax	733	1,887	848	3,469	38	38	6	81	1,175	1,648	429	3,252	69	111	15	194	16	12	1	29	2,031	3,696	1,298	7,025
	Curry	4,446	6,442	1,778	12,666	966	877	108	1,951	4,107	4,039	446	8,592	222	253	29	504	197	189	15	401	9,937	11,799	2,377	24,113
	De Baca	134	294	151	579	8	4	2	14	121	213	62	397	2	7	3	12	1	0	0	1	267	518	218	1,003
	Dona Ana	9,831	15,808	6,347	31,986	1,276	1,169	153	2,598	28,939	28,795	4,866	62,600	1,067	1,162	160	2,390	713	658	80	1,451	41,826	47,592	11,606	101,025
	Eddy	4,219	7,573	2,374	14,166	255	293	44	592	4,792	5,474	865	11,131	301	316	45	662	71	116	16	203	9,638	13,772	3,343	26,752
	Grant	1,629	3,588	1,934	7,151	142	85	13	240	2,709	3,125	951	6,786	122	133	38	293	42	36	10	88	4,644	6,967	2,946	14,558
	Guadalupe	95	295	67	457	19	70	0	89	618	1,089	271	1,977	27	52	7	85	6	25	1	32	765	1,531	345	2,641
	Harding	27	120	56	204	0	1	0	1	32	78	48	159	3	3	1	7	0	0	0	0	63	202	106	371
	Hidalgo	284	513	235	1,031	18	8	1	27	567	684	153	1,404	9	11	8	27	8	8	0	16	886	1,224	396	2,506
	Lea	4,241	7,635	2,203	14,079	751	790	127	1,668	7,561	7,648	760	15,969	278	325	34	637	94	121	10	225	12,925	16,519	3,135	32,578
	Lincoln	1,364	3,509	1,830	6,703	51	54	5	110	1,107	1,456	298	2,861	126	139	16	281	22	32	5	60	2,670	5,190	2,155	10,016
	Los Alamos	1,894	4,122	1,123	7,138	45	56	4	105	498	621	89	1,208	44	40	7	90	164	314	30	508	2,645	5,152	1,253	9,050
	Luna	953	2,073	1,615	4,640	92	96	18	206	3,314	3,238	718	7,270	115	112	30	257	30	44	13	87	4,503	5,564	2,394	12,460
	McKinley	1,033	2,282	628	3,944	162	178	25	365	1,233	1,611	356	3,200	13,155	12,081	1,770	27,005	117	160	26	304	15,700	16,313	2,805	34,818
	Mora	81	238	107	426	10	17	0	27	629	1,017	339	1,985	19	32	10	62	4	5	2	11	744	1,309	458	2,511
	Otero	5,427	9,072	3,318	17,817	707	700	118	1,525	4,385	4,731	827	9,943	1,118	1,121	104	2,343	232	214	12	458	11,869	15,838	4,378	32,085
	Quay	580	1,243	637	2,460	35	45	6	85	703	881	223	1,807	35	55	10	100	24	23	4	52	1,377	2,248	879	4,504
	Rio Arriba	473	1,600	609	2,682	88	89	14	191	4,704	7,001	1,644	13,349	1,568	1,784	240	3,592	53	79	11	143	6,886	10,554	2,518	19,957
	Roosevelt	2,095	2,591	837	5,522	187	81	5	273	1,909	1,690	185	3,784	95	97	13	205	64	41	4	109	4,350	4,500	1,044	9,894
	San Juan	8,735	15,088	3,843	27,665	355	345	25	724	4,852	5,124	627	10,602	11,411	11,450	1,578	24,439	142	188	16	346	25,494	32,194	6,089	63,777
	San Miguel	650	1,588	607	2,845	191	110	13	314	3,906	5,647	1,369	10,921	195	207	36	438	84	73	12	169	5,025	7,624	2,038	14,688
	Sandoval	8,470	17,116	4,737	30,323	807	924	133	1,864	8,587	10,082	1,339	20,008	4,306	4,173	567	9,046	423	612	65	1,100	22,593	32,907	6,841	62,341
	Santa Fe	5,710	18,098	6,071	29,879	388	531	59	978	13,118	18,382	3,047	34,546	1,276	1,646	177	3,099	344	622	61	1,027	20,835	39,279	9,414	69,529
	Sierra	680	1,936	1,583	4,199	26	21	8	56	616	781	240	1,636	63	86	18	167	3	12	11	27	1,388	2,837	1,860	6,085
	Socorro	1,217	1,780	639	3,636	84	67	7	158	1,590	2,031	502	4,123	501	530	69	1,100	83	71	6	160	3,475	4,480	1,223	9,178
	Taos	1,120	3,439	1,134	5,692	68	92	11	171	2,969	4,568	1,198	8,735	534	697	117	1,349	52	67	8	127	4,744	8,863	2,467	16,075
	Torrance	1,332	2,695	766	4,793	84	126	12	223	1,196	1,548	316	3,060	160	168	25	353	18	27	5	50	2,790	4,564	1,124	8,478
	Union	329	784	258	1,371	24	50	1	75	341	583	91	1,015	21	37	7	65	5	10	1	16	720	1,463	358	2,542
	Valencia	3,750	7,668	2,451	13,869	325	485	65	874	8,750	10,526	1,788	21,064	858	984	125	1,967	138	156	22	316	13,820	19,819	4,450	38,090
Male Total		113,944	228,579	74,764	417,287	13,541	14,787	1,891	30,219	183,193	216,763	35,713	435,669	49,226	49,888	6,560	105,674	6,870	9,146	1,095	17,111	366,772	519,163	120,024	1,005,960

* 2009 population is reported here because 2009 was the mid-point year for the 2007-2011 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Female Population, New Mexico, 2009*

		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	35,475	79,142	28,241	142,858	5,200	6,012	956	12,169	57,734	75,359	14,046	147,140	9,008	10,076	1,155	20,239	3,486	5,941	895	10,321	110,904	176,530	45,293	332,727
	Catron	234	774	374	1,382	12	8	3	22	79	143	79	301	25	30	9	64	2	7	2	10	351	962	466	1,780
	Chaves	3,945	7,474	3,725	15,143	438	359	87	884	7,230	7,482	1,233	15,946	304	306	70	680	129	179	36	343	12,045	15,800	5,151	32,995
	Cibola	680	1,652	682	3,014	86	100	9	195	1,402	2,058	517	3,977	2,504	2,940	676	6,120	35	64	7	105	4,707	6,814	1,891	13,412
	Colfax	700	1,875	894	3,469	18	31	3	52	1,058	1,521	512	3,092	43	69	11	124	10	26	5	42	1,830	3,522	1,426	6,778
	Curry	4,042	6,215	2,374	12,631	865	803	126	1,794	3,865	4,098	547	8,510	229	266	34	529	170	273	40	483	9,171	11,655	3,121	23,947
	De Baca	146	314	182	643	6	6	1	13	131	172	72	375	2	6	0	8	0	3	0	3	284	502	256	1,042
	Dona Ana	9,098	15,661	7,096	31,855	1,018	944	163	2,125	28,849	32,041	5,889	66,778	1,134	1,116	181	2,432	674	878	112	1,664	40,772	50,640	13,442	104,854
	Eddy	3,896	7,461	3,034	14,391	196	215	60	472	4,705	5,400	1,042	11,146	278	306	48	632	87	146	27	259	9,162	13,527	4,211	26,901
	Grant	1,487	3,905	2,028	7,420	76	64	11	151	2,584	3,390	1,158	7,132	119	178	29	326	33	49	14	95	4,299	7,586	3,239	15,124
	Guadalupe	64	161	70	295	7	9	0	16	551	812	300	1,663	17	19	4	40	15	17	2	34	654	1,018	376	2,048
	Harding	31	98	59	188	1	2	0	3	30	68	40	139	2	3	0	5	0	0	0	0	64	171	100	335
	Hidalgo	297	544	214	1,054	20	11	3	34	529	640	196	1,366	3	14	5	23	6	8	1	14	855	1,217	419	2,491
	Lea	4,166	7,326	2,862	14,354	593	664	157	1,414	7,311	6,728	776	14,814	227	246	31	505	73	119	18	210	12,369	15,084	3,845	31,298
	Lincoln	1,214	3,823	1,901	6,938	48	57	6	110	1,091	1,554	318	2,962	130	166	19	315	19	38	5	61	2,501	5,638	2,248	10,387
	Los Alamos	1,735	3,948	1,201	6,884	27	37	5	70	541	664	145	1,349	35	47	4	86	172	347	35	554	2,511	5,043	1,390	8,943
	Luna	843	2,093	1,656	4,592	91	97	21	209	3,315	3,403	763	7,481	108	133	29	269	29	55	13	96	4,385	5,781	2,481	12,647
	McKinley	1,036	2,239	727	4,001	151	157	17	326	1,205	1,573	451	3,228	12,881	13,599	2,617	29,097	114	225	41	379	15,386	17,793	3,853	37,032
	Mora	75	265	108	448	9	20	2	31	556	972	327	1,855	21	32	7	60	1	7	2	10	662	1,295	446	2,403
	Otero	4,564	8,511	3,622	16,697	624	572	129	1,325	4,346	5,028	1,020	10,394	1,086	1,232	159	2,476	215	390	84	689	10,836	15,732	5,014	31,581
	Quay	508	1,339	694	2,542	39	33	8	80	665	948	273	1,886	32	46	12	91	11	38	5	54	1,255	2,404	992	4,652
	Rio Arriba	429	1,691	626	2,746	77	81	16	174	4,644	6,816	1,995	13,454	1,610	1,903	383	3,896	54	73	11	137	6,813	10,563	3,031	20,407
	Roosevelt	2,048	2,594	1,037	5,680	135	62	4	201	1,780	1,623	188	3,590	98	85	16	199	69	44	4	117	4,130	4,408	1,249	9,787
	San Juan	8,482	15,018	4,741	28,241	305	212	20	537	4,679	4,917	750	10,347	11,094	11,926	2,127	25,147	120	238	29	387	24,680	32,312	7,668	64,660
	San Miguel	631	1,710	679	3,020	165	84	9	258	3,717	5,545	1,597	10,860	225	214	45	484	79	85	12	177	4,817	7,639	2,341	14,797
	Sandoval	7,810	18,039	5,620	31,469	732	834	174	1,740	8,405	10,807	1,702	20,914	4,186	4,618	802	9,606	485	853	106	1,444	21,618	35,151	8,403	65,173
	Santa Fe	5,616	20,585	7,223	33,424	310	412	52	774	12,534	17,957	4,057	34,547	1,299	1,630	220	3,149	403	762	81	1,245	20,161	41,346	11,633	73,140
	Sierra	662	2,004	1,513	4,180	17	26	9	53	567	796	253	1,615	51	78	28	157	4	17	8	30	1,302	2,922	1,812	6,035
	Socorro	845	1,684	664	3,192	55	38	6	98	1,585	2,010	550	4,145	549	548	72	1,169	48	61	5	113	3,081	4,341	1,297	8,718
	Taos	995	3,869	1,330	6,194	55	74	17	147	2,776	4,507	1,443	8,726	476	707	167	1,350	48	118	16	181	4,350	9,275	2,973	16,598
	Torrance	1,198	2,578	770	4,546	78	70	7	155	1,145	1,439	319	2,902	117	143	34	294	20	42	7	69	2,557	4,273	1,137	7,967
	Union	293	602	328	1,223	3	10	1	14	256	313	110	680	19	20	7	46	1	7	2	11	572	953	449	1,974
	Valencia	3,491	7,887	2,726	14,103	275	299	52	625	8,270	10,217	2,027	20,513	779	953	148	1,880	150	199	49	397	12,964	19,555	5,002	37,520
Female Total		106,734	233,083	89,002	428,818	11,735	12,402	2,135	26,271	178,131	221,001	44,696	443,828	48,690	53,660	9,149	111,499	6,759	11,306	1,671	19,736	352,049	531,451	146,653	1,030,153

* 2009 population is reported here because 2009 was the mid-point year for the 2007-2011 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 1: Total Population, New Mexico, 2009*

		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	72,660	157,024	50,225	279,909	10,980	12,889	1,780	25,649	116,638	147,521	24,152	288,311	17,745	19,114	1,936	38,795	6,998	10,977	1,513	19,488	225,022	347,524	79,606	652,152
	Catron	490	1,548	824	2,861	20	20	3	43	168	341	159	668	62	50	18	130	3	9	2	14	743	1,968	1,006	3,717
	Chaves	8,205	14,650	6,644	29,499	923	745	153	1,821	14,818	14,723	2,312	31,853	683	638	113	1,434	292	328	59	679	24,922	31,084	9,281	65,286
	Cibola	1,389	3,325	1,310	6,023	153	208	28	389	2,988	4,909	918	8,815	4,876	5,626	1,148	11,650	78	104	12	194	9,484	14,172	3,415	27,071
	Colfax	1,433	3,762	1,742	6,938	56	68	9	133	2,234	3,169	942	6,344	112	180	26	317	26	38	6	71	3,861	7,218	2,724	13,803
	Curry	8,487	12,657	4,152	25,297	1,831	1,680	234	3,744	7,972	8,136	994	17,102	451	519	63	1,033	367	462	55	884	19,108	23,454	5,498	48,060
	De Baca	280	608	333	1,222	14	10	3	27	252	385	134	772	4	13	3	20	1	3	0	4	552	1,020	473	2,045
	Dona Ana	18,929	31,469	13,443	63,841	2,293	2,113	316	4,723	57,788	60,836	10,755	129,379	2,201	2,279	341	4,821	1,387	1,536	192	3,115	82,599	98,232	25,048	205,878
	Eddy	8,115	15,034	5,407	28,556	451	508	104	1,063	9,497	10,874	1,907	22,277	579	622	93	1,294	157	262	43	462	18,800	27,299	7,554	53,653
	Grant	3,116	7,494	3,962	14,571	218	149	24	391	5,293	6,515	2,109	13,917	242	310	67	619	75	85	24	183	8,943	14,553	6,185	29,681
	Guadalupe	159	456	137	752	26	79	0	105	1,168	1,901	571	3,640	44	71	10	126	22	42	3	66	1,419	2,549	721	4,689
	Harding	59	218	116	392	1	3	0	4	63	147	89	299	5	6	1	12	0	0	0	0	127	374	206	706
	Hidalgo	581	1,057	448	2,086	38	19	4	61	1,095	1,325	349	2,770	12	25	13	50	14	16	1	31	1,741	2,442	815	4,997
	Lea	8,407	14,961	5,065	28,433	1,343	1,455	284	3,082	14,871	14,376	1,536	30,783	506	571	66	1,142	167	240	29	435	25,294	31,602	6,980	63,876
	Lincoln	2,578	7,332	3,731	13,641	98	111	11	221	2,198	3,010	616	5,823	256	305	35	597	41	71	10	121	5,172	10,828	4,403	20,403
	Los Alamos	3,629	8,070	2,324	14,023	72	93	9	175	1,039	1,284	235	2,558	79	87	11	176	337	661	64	1,062	5,156	10,195	2,643	17,993
	Luna	1,795	4,166	3,270	9,232	183	193	39	415	6,628	6,642	1,481	14,751	222	245	58	526	58	99	26	183	8,887	11,345	4,875	25,107
	McKinley	2,069	4,521	1,355	7,945	313	336	43	691	2,438	3,184	806	6,428	26,036	25,680	4,387	56,102	231	386	66	683	31,086	34,106	6,657	71,849
	Mora	156	503	215	874	20	37	2	58	1,185	1,989	666	3,839	40	64	18	122	5	12	4	20	1,405	2,605	904	4,914
	Otero	9,992	17,583	6,939	34,514	1,331	1,271	248	2,850	8,731	9,759	1,847	20,337	2,204	2,353	262	4,819	447	604	96	1,146	22,705	31,570	9,392	63,666
	Quay	1,088	2,582	1,331	5,002	75	77	14	165	1,368	1,829	496	3,693	67	102	22	191	35	62	9	106	2,632	4,652	1,872	9,156
	Rio Arriba	902	3,291	1,235	5,428	165	170	30	365	9,347	13,817	3,639	26,803	3,177	3,688	623	7,488	107	152	22	280	13,698	21,117	5,549	40,364
	Roosevelt	4,143	5,185	1,874	11,203	322	144	9	475	3,689	3,312	373	7,374	193	182	29	403	133	85	8	226	8,480	8,907	2,293	19,681
	San Juan	17,217	30,106	8,584	55,907	660	557	45	1,262	9,531	10,041	1,377	20,949	22,505	23,376	3,705	49,586	262	426	46	733	50,174	64,506	13,757	128,437
	San Miguel	1,280	3,298	1,286	5,864	357	194	22	572	7,623	11,192	2,966	21,781	419	421	81	922	163	158	25	346	9,842	15,264	4,379	29,485
	Sandoval	16,280	35,155	10,357	61,792	1,539	1,758	307	3,604	16,992	20,889	3,042	40,922	8,492	8,791	1,369	18,652	908	1,465	171	2,544	44,211	68,058	15,245	127,513
	Santa Fe	11,325	38,683	13,294	63,303	698	943	111	1,752	25,651	36,339	7,103	69,094	2,575	3,277	396	6,248	746	1,384	142	2,272	40,996	80,626	21,047	142,669
	Sierra	1,342	3,941	3,096	8,379	44	47	18	109	1,182	1,576	492	3,251	115	164	46	325	7	30	20	57	2,689	5,758	3,672	12,120
	Socorro	2,062	3,463	1,302	6,828	139	105	12	256	3,174	4,042	1,052	8,268	1,050	1,079	141	2,269	130	132	11	273	6,555	8,821	2,519	17,896
	Taos	2,114	7,308	2,464	11,886	123	166	28	318	5,745	9,075	2,641	17,461	1,010	1,404	284	2,699	100	184	24	308	9,093	18,138	5,441	32,672
	Torrance	2,530	5,274	1,535	9,339	162	197	19	378	2,340	2,987	635	5,962	277	311	59	647	39	68	12	119	5,348	8,837	2,261	16,445
	Union	622	1,386	586	2,594	27	60	2	89	597	896	202	1,695	40	57	14	111	6	18	3	27	1,293	2,416	807	4,516
	Valencia	7,241	15,555	5,176	27,972	600	783	117	1,500	17,019	20,743	3,816	41,577	1,637	1,938	273	3,848	287	356	70	713	26,784	39,374	9,452	75,610
Both Sexes		220,677	461,662	163,766	846,105	25,275	27,188	4,026	56,490	361,324	437,763	80,410	879,497	97,916	103,548	15,709	217,173	13,629	20,452	2,766	36,847	718,822	1,050,614	266,677	2,036,112

* 2009 population is reported here because 2009 was the mid-point year for the 2007-2011 timeframe used in this report

SOURCE: University of New Mexico Geospatial and Population Studies

Appendix 2

Substance Abuse and Mental Health by Region, Age 12+, 2008-2010

National Survey on Drug Use and Health (NSDUH)

Appendix 2A. Substance Abuse and Mental Health by Region, Age 12+, 2008-2010 (NSDUH)

INDICATORS+	Health Region: NW	NE	Bernalillo County	SE	SW	New Mexico
ALCOHOL						
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week[1]	45.88 (41.87 - 49.95)	48.46 (43.58 - 53.38)	48.80 (44.98 - 52.63)	45.17 (40.58 - 49.85)	45.48 (41.16 - 49.87)	47.04 (44.34 - 49.75)
ILLICIT DRUGS						
Past Month Illicit Drug Use[2]	9.61 (7.41 - 12.37)	10.15 (7.55 - 13.51)	10.99 (8.91 - 13.49)	6.85 (4.95 - 9.42)	8.12 (6.26 - 10.46)	9.50 (8.20 - 10.98)
Past Year Marijuana Use	11.92 (9.80 - 14.43)	11.35 (8.89 - 14.39)	12.70 (10.63 - 15.11)	9.41 (7.14 - 12.30)	10.04 (8.06 - 12.43)	11.40 (10.06 - 12.90)
Past Month Marijuana Use	7.10 (5.48 - 9.15)	7.50 (5.52 - 10.11)	7.71 (6.14 - 9.65)	5.11 (3.63 - 7.14)	5.79 (4.38 - 7.62)	6.85 (5.82 - 8.05)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	3.57 (2.44 - 5.18)	3.63 (2.30 - 5.67)	4.45 (3.18 - 6.21)	3.64 (2.42 - 5.43)	4.01 (2.71 - 5.90)	3.96 (3.17 - 4.92)
Past Year Cocaine Use	1.82 (1.23 - 2.68)	2.18 (1.42 - 3.35)	2.66 (1.90 - 3.72)	1.99 (1.31 - 3.03)	2.13 (1.42 - 3.18)	2.23 (1.71 - 2.90)
Past Year Nonmedical Pain Reliever Use	5.25 (4.02 - 6.82)	5.38 (3.99 - 7.23)	6.41 (4.96 - 8.24)	5.60 (4.15 - 7.51)	5.65 (4.28 - 7.43)	5.76 (4.81 - 6.89)
Perception of Great Risk of Smoking Marijuana Once a Month	37.03 (32.54 - 41.76)	33.10 (28.12 - 38.49)	35.72 (31.62 - 40.04)	41.99 (36.58 - 47.60)	42.42 (37.59 - 47.40)	37.70 (35.16 - 40.31)
Average Annual Marijuana Initiation Rate[4]	2.30 (1.90 - 2.80)	2.14 (1.71 - 2.68)	2.14 (1.77 - 2.59)	2.14 (1.66 - 2.76)	1.79 (1.44 - 2.21)	2.09 (1.85 - 2.37)
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT						
Illicit Drug Dependence[5]	2.17 (1.53 - 3.06)	1.66 (1.12 - 2.48)	2.23 (1.58 - 3.13)	1.89 (1.28 - 2.80)	1.89 (1.32 - 2.69)	2.02 (1.61 - 2.54)
Illicit Drug Dependence or Abuse[5]	3.49 (2.60 - 4.67)	2.43 (1.69 - 3.47)	3.43 (2.55 - 4.60)	2.77 (1.95 - 3.92)	2.75 (1.96 - 3.83)	3.07 (2.54 - 3.72)
Alcohol Dependence[6]	4.06 (3.09 - 5.31)	3.91 (2.89 - 5.27)	4.36 (3.37 - 5.62)	3.76 (2.86 - 4.93)	4.18 (3.19 - 5.47)	4.12 (3.39 - 5.00)
Alcohol Dependence or Abuse[6]	7.73 (6.27 - 9.50)	7.7 (6.07 - 9.72)	8.3 (6.85 - 10.01)	7.51 (5.91 - 9.49)	7.93 (6.39 - 9.81)	7.92 (6.85 - 9.14)
Alcohol or Illicit Drug Dependence or Abuse[5]	9.81 (8.07 - 11.88)	9.03 (7.08 - 11.45)	10.73 (8.86 - 12.94)	9.32 (7.36 - 11.74)	9.26 (7.41 - 11.52)	9.82 (8.59 - 11.20)
Needing But Not Receiving Treatment for Illicit Drug Use[7]	3.35 (2.48 - 4.51)	2.24 (1.57 - 3.20)	3.02 (2.25 - 4.04)	2.72 (1.87 - 3.94)	2.64 (1.86 - 3.73)	2.86 (2.33 - 3.50)
Needing But Not Receiving Treatment for Alcohol Use[8]	7.35 (5.87 - 9.16)	7.18 (5.62 - 9.14)	7.76 (6.31 - 9.52)	7.08 (5.57 - 8.95)	7.57 (6.05 - 9.42)	7.47 (6.43 - 8.65)
MENTAL HEALTH among persons aged 12 or older						
Any mental illness in past year[9]	18.47 (15.64 - 21.67)	19.02 (15.89 - 22.59)	19.17 (16.31 - 22.39)	19.91 (16.74 - 23.51)	18.27 (15.46 - 21.46)	18.91 (16.84 - 21.18)
Serious mental illness in past year[10]	4.61 (3.49 - 6.05)	4.17 (3.04 - 5.68)	4.37 (3.35 - 5.69)	4.61 (3.39 - 6.24)	4.72 (3.52 - 6.30)	4.49 (3.68 - 5.46)
Had at least one major depressive episode in past year[11]	6.16 (4.78 - 7.92)	5.9 (4.49 - 7.72)	5.94 (4.63 - 7.60)	6.07 (4.67 - 7.85)	5.8 (4.50 - 7.43)	5.97 (5.04 - 7.06)
Had serious thoughts of suicide in past year	4.03 (3.03 - 5.35)	3.53 (2.57 - 4.83)	3.82 (2.87 - 5.07)	3.72 (2.77 - 4.98)	3.83 (2.89 - 5.06)	3.81 (3.11 - 4.67)

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

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

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2008-2010 (NSDUH)

INDICATORS+	AGE GROUP	Health Region: NW	NE	Bernalillo County	SE	SW	New Mexico
ALCOHOL							
Perceptions of Great Risk of Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week[1]	Age 12-17	40.67 (36.18 - 45.33)	39.35 (34.16 - 44.79)	41.92 (37.21 - 46.78)	38.36 (32.91 - 44.13)	38.99 (34.18 - 44.02)	40.20 (37.23 - 43.24)
	Age 18-25	38.08 (33.24 - 43.16)	38.07 (32.64 - 43.81)	36.63 (32.23 - 41.27)	35.81 (30.35 - 41.66)	34.79 (29.91 - 40.01)	36.62 (33.72 - 39.61)
	Age 26+	48.16 (43.10 - 53.25)	51.07 (45.21 - 56.91)	51.68 (47.00 - 56.34)	48.07 (42.37 - 53.81)	48.60 (43.23 - 53.99)	49.84 (46.50 - 53.18)
	Age 18+	46.52 (42.15 - 50.94)	49.36 (44.16 - 54.59)	49.50 (45.41 - 53.59)	46.00 (41.08 - 51.00)	46.23 (41.58 - 50.94)	47.79 (44.87 - 50.73)
ILLICIT DRUGS							
Past Month Illicit Drug Use[2]	Age 12-17	11.90 (9.25 - 15.18)	14.00 (10.61 - 18.27)	13.06 (10.21 - 16.57)	10.14 (7.39 - 13.77)	10.83 (8.27 - 14.08)	12.07 (10.31 - 14.09)
	Age 18-25	19.89 (15.85 - 24.65)	23.20 (17.94 - 29.44)	24.51 (20.48 - 29.04)	* (* - *)	18.80 (14.57 - 23.92)	21.08 (18.46 - 23.96)
	Age 26+	7.28 (4.98 - 10.53)	7.73 (5.18 - 11.39)	8.45 (6.23 - 11.37)	4.36 (2.74 - 6.85)	5.54 (3.80 - 8.01)	7.05 (5.61 - 8.82)
	Age 18+	9.33 (7.00 - 12.32)	9.77 (7.08 - 13.32)	10.79 (8.60 - 13.44)	6.45 (4.51 - 9.15)	7.80 (5.88 - 10.29)	9.21 (7.83 - 10.82)
Past Year Marijuana Use	Age 12-17	18.09 (14.50 - 22.35)	18.82 (14.57 - 23.96)	18.43 (14.69 - 22.87)	14.70 (10.85 - 19.62)	14.61 (11.43 - 18.49)	17.11 (14.88 - 19.61)
	Age 18-25	31.24 (26.14 - 36.84)	* (* - *)	34.18 (29.42 - 39.28)	* (* - *)	26.19 (21.16 - 31.93)	30.15 (27.15 - 33.33)
	Age 26+	7.27 (5.20 - 10.09)	7.42 (5.11 - 10.65)	8.37 (6.29 - 11.07)	5.66 (3.77 - 8.42)	6.06 (4.25 - 8.58)	7.23 (5.80 - 8.98)
	Age 18+	11.17 (8.94 - 13.88)	10.62 (8.09 - 13.81)	12.13 (9.97 - 14.68)	8.77 (6.47 - 11.77)	9.51 (7.46 - 12.05)	10.77 (9.35 - 12.39)
Past Month Marijuana Use	Age 12-17	9.18 (6.81 - 12.26)	11.27 (8.07 - 15.53)	9.09 (6.66 - 12.28)	7.42 (5.02 - 10.84)	7.93 (5.68 - 10.97)	8.94 (7.36 - 10.83)
	Age 18-25	16.47 (12.86 - 20.85)	18.90 (14.31 - 24.53)	20.52 (16.73 - 24.90)	13.71 (9.72 - 18.99)	15.76 (12.06 - 20.33)	17.49 (15.12 - 20.14)
	Age 26+	4.98 (3.40 - 7.23)	5.34 (3.48 - 8.10)	5.37 (3.81 - 7.52)	3.04 (1.86 - 4.92)	3.44 (2.22 - 5.29)	4.63 (3.56 - 6.00)
	Age 18+	6.84 (5.17 - 9.01)	7.12 (5.11 - 9.85)	7.57 (5.93 - 9.62)	4.83 (3.35 - 6.92)	5.54 (4.10 - 7.46)	6.62 (5.53 - 7.91)
Past Month Use of Illicit Drugs Other Than Marijuana[3]	Age 12-17	5.20 (3.76 - 7.14)	5.42 (3.81 - 7.65)	6.07 (4.39 - 8.32)	5.40 (3.79 - 7.63)	5.33 (3.78 - 7.46)	5.54 (4.45 - 6.88)
	Age 18-25	7.63 (5.56 - 10.38)	8.68 (6.21 - 12.00)	8.83 (6.68 - 11.60)	8.07 (5.68 - 11.35)	7.96 (5.78 - 10.88)	8.26 (6.74 - 10.08)
	Age 26+	2.54 (1.38 - 4.63)	2.66 (1.31 - 5.32)	3.52 (2.13 - 5.76)	2.48 (1.28 - 4.78)	3.01 (1.63 - 5.48)	2.96 (2.11 - 4.15)
	Age 18+	3.37 (2.19 - 5.15)	3.45 (2.07 - 5.70)	4.29 (2.94 - 6.21)	3.42 (2.15 - 5.42)	3.86 (2.47 - 5.96)	3.78 (2.95 - 4.84)
Past Year Cocaine Use	Age 12-17	1.16 (0.69 - 1.94)	1.48 (0.87 - 2.52)	1.53 (0.94 - 2.48)	1.16 (0.70 - 1.93)	1.17 (0.69 - 1.97)	1.31 (0.95 - 1.82)
	Age 18-25	5.24 (3.56 - 7.65)	6.46 (4.21 - 9.79)	7.96 (5.78 - 10.86)	6.06 (3.92 - 9.24)	5.99 (4.02 - 8.85)	6.49 (5.12 - 8.20)
	Age 26+	1.25 (0.70 - 2.23)	1.61 (0.89 - 2.91)	1.89 (1.14 - 3.13)	1.30 (0.70 - 2.39)	1.47 (0.81 - 2.63)	1.57 (1.05 - 2.33)
	Age 18+	1.90 (1.26 - 2.85)	2.25 (1.44 - 3.52)	2.78 (1.95 - 3.93)	2.10 (1.35 - 3.24)	2.24 (1.47 - 3.40)	2.33 (1.76 - 3.07)
Past Year Nonmedical Pain Reliever Use	Age 12-17	8.38 (6.22 - 11.21)	8.18 (5.87 - 11.29)	9.39 (7.00 - 12.49)	8.67 (6.19 - 12.03)	8.39 (6.23 - 11.21)	8.69 (7.18 - 10.48)
	Age 18-25	10.45 (8.11 - 13.38)	11.31 (8.55 - 14.83)	12.05 (9.51 - 15.15)	11.48 (8.60 - 15.16)	10.67 (8.11 - 13.90)	11.23 (9.47 - 13.27)
	Age 26+	3.78 (2.50 - 5.67)	4.16 (2.73 - 6.29)	5.10 (3.55 - 7.28)	3.96 (2.56 - 6.08)	4.24 (2.82 - 6.31)	4.38 (3.35 - 5.70)
	Age 18+	4.86 (3.59 - 6.56)	5.10 (3.67 - 7.06)	6.11 (4.60 - 8.08)	5.23 (3.75 - 7.24)	5.34 (3.91 - 7.25)	5.44 (4.43 - 6.66)
Perception of Great Risk of Smoking Marijuana Once a Month	Age 12-17	28.61 (24.38 - 33.25)	22.77 (18.48 - 27.72)	27.50 (23.31 - 32.13)	32.67 (26.92 - 38.99)	32.49 (27.69 - 37.68)	28.83 (25.99 - 31.85)
	Age 18-25	20.79 (16.89 - 25.32)	18.71 (14.66 - 23.58)	19.11 (15.74 - 23.00)	23.52 (18.41 - 29.54)	24.07 (19.70 - 29.06)	21.09 (18.78 - 23.60)
	Age 26+	41.42 (35.84 - 47.22)	36.45 (30.52 - 42.83)	39.51 (34.52 - 44.74)	47.09 (40.56 - 53.72)	47.61 (41.58 - 53.71)	41.90 (38.69 - 45.17)
	Age 18+	38.06 (33.20 - 43.17)	34.12 (28.80 - 39.87)	36.55 (32.18 - 41.15)	43.12 (37.35 - 49.09)	43.57 (38.37 - 48.92)	38.68 (35.92 - 41.51)

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

* Low precision; no estimate reported

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

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2008-2010 (NSDUH)

INDICATORS+	AGE GROUP	Health Region					
		NW	NE	Bernalillo County	SE	SW	New Mexico
PAST YEAR DEPENDENCE, ABUSE, AND TREATMENT							
Illicit Drug Dependence[5]	Age 12-17	3.82 (2.36 - 6.14)	3.35 (1.94 - 5.71)	4.22 (2.58 - 6.83)	2.89 (1.65 - 4.99)	3.16 (1.91 - 5.19)	3.61 (2.69 - 4.83)
	Age 18-25	6.08 (4.22 - 8.67)	5.48 (3.70 - 8.06)	5.99 (4.30 - 8.29)	5.38 (3.60 - 7.96)	5.26 (3.59 - 7.64)	5.70 (4.44 - 7.30)
	Age 26+	1.17 (0.67 - 2.04)	0.89 (0.48 - 1.67)	1.35 (0.79 - 2.29)	1.05 (0.57 - 1.90)	1.01 (0.57 - 1.79)	1.14 (0.77 - 1.67)
	Age 18+	1.97 (1.34 - 2.88)	1.50 (0.97 - 2.30)	2.02 (1.39 - 2.94)	1.77 (1.17 - 2.69)	1.74 (1.17 - 2.57)	1.85 (1.41 - 2.41)
Illicit Drug Dependence or Abuse[5]	Age 12-17	7.31 (5.30 - 10.02)	5.71 (3.75 - 8.60)	7.73 (5.44 - 10.88)	5.70 (3.71 - 8.68)	5.66 (3.82 - 8.32)	6.66 (5.37 - 8.23)
	Age 18-25	9.13 (6.85 - 12.07)	7.62 (5.47 - 10.52)	8.79 (6.65 - 11.54)	7.09 (5.04 - 9.90)	7.11 (5.10 - 9.83)	8.12 (6.69 - 9.83)
	Age 26+	1.83 (1.06 - 3.16)	1.26 (0.68 - 2.34)	2.02 (1.22 - 3.30)	1.47 (0.83 - 2.58)	1.44 (0.81 - 2.54)	1.68 (1.17 - 2.42)
	Age 18+	3.02 (2.14 - 4.25)	2.10 (1.39 - 3.16)	3.00 (2.14 - 4.20)	2.41 (1.64 - 3.54)	2.41 (1.64 - 3.52)	2.68 (2.12 - 3.39)
Alcohol Dependence[6]	Age 12-17	2.20 (1.42 - 3.40)	2.35 (1.47 - 3.75)	2.17 (1.37 - 3.44)	2.43 (1.51 - 3.88)	2.30 (1.46 - 3.59)	2.26 (1.66 - 3.08)
	Age 18-25	9.03 (6.70 - 12.08)	8.03 (5.82 - 10.97)	8.83 (6.70 - 11.55)	8.15 (5.81 - 11.31)	8.47 (6.18 - 11.51)	8.60 (7.01 - 10.51)
	Age 26+	3.36 (2.29 - 4.91)	3.46 (2.32 - 5.14)	3.86 (2.72 - 5.44)	3.07 (2.10 - 4.47)	3.56 (2.44 - 5.18)	3.54 (2.70 - 4.64)
	Age 18+	4.28 (3.22 - 5.68)	4.06 (2.95 - 5.57)	4.58 (3.50 - 5.96)	3.93 (2.94 - 5.23)	4.40 (3.31 - 5.84)	4.33 (3.53 - 5.29)
Alcohol Dependence or Abuse[6]	Age 12-17	5.44 (3.94 - 7.46)	5.93 (4.19 - 8.35)	5.82 (4.22 - 7.98)	6.00 (4.17 - 8.57)	5.36 (3.78 - 7.55)	5.68 (4.53 - 7.10)
	Age 18-25	18.34 (14.85 - 22.43)	18.48 (14.52 - 23.22)	18.62 (15.43 - 22.29)	15.50 (11.94 - 19.87)	16.91 (13.45 - 21.04)	17.75 (15.50 - 20.26)
	Age 26+	6.01 (4.42 - 8.11)	6.27 (4.54 - 8.59)	6.83 (5.22 - 8.90)	6.12 (4.40 - 8.44)	6.44 (4.77 - 8.64)	6.41 (5.22 - 7.86)
	Age 18+	8.01 (6.42 - 9.95)	7.88 (6.14 - 10.05)	8.55 (6.99 - 10.40)	7.69 (5.97 - 9.85)	8.23 (6.56 - 10.28)	8.17 (7.02 - 9.48)
Alcohol or Illicit Drug Dependence or Abuse[5]	Age 12-17	9.90 (7.47 - 13.01)	9.79 (7.10 - 13.36)	11.69 (8.80 - 15.37)	9.68 (6.85 - 13.51)	8.66 (6.25 - 11.89)	10.13 (8.42 - 12.13)
	Age 18-25	22.80 (18.79 - 27.38)	20.29 (16.23 - 25.07)	23.13 (19.43 - 27.31)	19.81 (15.51 - 24.97)	19.76 (16.06 - 24.08)	21.52 (19.11 - 24.13)
	Age 26+	7.27 (5.42 - 9.70)	7.24 (5.19 - 10.01)	8.51 (6.46 - 11.13)	7.15 (5.11 - 9.90)	7.17 (5.23 - 9.77)	7.64 (6.26 - 9.29)
	Age 18+	9.80 (7.94 - 12.03)	8.95 (6.93 - 11.50)	10.64 (8.67 - 12.99)	9.27 (7.21 - 11.86)	9.33 (7.38 - 11.73)	9.78 (8.48 - 11.27)
Needing But Not Receiving Treatment for Illicit Drug Use[7]	Age 12-17	6.85 (4.85 - 9.59)	5.51 (3.63 - 8.27)	7.04 (4.95 - 9.93)	5.39 (3.53 - 8.15)	5.42 (3.66 - 7.95)	6.23 (4.95 - 7.82)
	Age 18-25	8.95 (6.54 - 12.14)	7.17 (4.95 - 10.27)	7.98 (5.96 - 10.61)	6.64 (4.54 - 9.61)	6.62 (4.68 - 9.27)	7.61 (6.20 - 9.31)
	Age 26+	1.75 (1.03 - 2.94)	1.13 (0.64 - 1.99)	1.70 (1.04 - 2.76)	1.54 (0.86 - 2.74)	1.43 (0.82 - 2.49)	1.55 (1.06 - 2.25)
	Age 18+	2.92 (2.07 - 4.11)	1.92 (1.28 - 2.86)	2.61 (1.86 - 3.66)	2.40 (1.58 - 3.63)	2.32 (1.57 - 3.42)	2.49 (1.94 - 3.17)
Needing But Not Receiving Treatment for Alcohol Use[8]	Age 12-17	5.25 (3.80 - 7.20)	5.64 (3.99 - 7.93)	5.48 (4.00 - 7.47)	5.65 (3.96 - 8.01)	5.15 (3.66 - 7.21)	5.41 (4.32 - 6.75)
	Age 18-25	17.35 (13.88 - 21.47)	16.50 (12.86 - 20.91)	17.86 (14.61 - 21.65)	14.79 (11.31 - 19.10)	16.38 (12.90 - 20.57)	16.84 (14.68 - 19.26)
	Age 26+	5.71 (4.13 - 7.85)	5.94 (4.29 - 8.18)	6.32 (4.73 - 8.39)	5.72 (4.11 - 7.91)	6.08 (4.44 - 8.29)	6.02 (4.88 - 7.39)
	Age 18+	7.60 (6.00 - 9.59)	7.33 (5.67 - 9.44)	7.99 (6.43 - 9.90)	7.25 (5.62 - 9.30)	7.85 (6.20 - 9.87)	7.69 (6.59 - 8.96)

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

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

Appendix 2B. Substance Abuse and Mental Health by Age Group and Region, 2008-2010 (NSDUH)

INDICATORS+	AGE GROUP	Health Region					
		NW	NE	Bernalillo County	SE	SW	New Mexico
MENTAL HEALTH							
Any mental illness in past year[9]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	31.32 (26.44 - 36.66)	30.24 (25.07 - 35.97)	29.03 (24.85 - 33.59)	28.19 (23.34 - 33.62)	27.09 (22.64 - 32.04)	29.15 (26.15 - 32.33)
	Age 26+	15.97 (12.86 - 19.66)	17.32 (13.93 - 21.32)	17.49 (14.36 - 21.14)	18.24 (14.69 - 22.42)	16.45 (13.33 - 20.13)	17.04 (14.73 - 19.63)
	Age 18+	18.47 (15.64 - 21.67)	19.02 (15.89 - 22.59)	19.17 (16.31 - 22.39)	19.91 (16.74 - 23.51)	18.27 (15.46 - 21.46)	18.91 (16.84 - 21.18)
Serious mental illness in past year[10]	Age 12-17	N/A	N/A	N/A	N/A	N/A	N/A
	Age 18-25	7.87 (5.96 - 10.33)	7.13 (5.21 - 9.68)	7.65 (5.87 - 9.91)	6.65 (4.82 - 9.10)	6.92 (5.12 - 9.30)	7.34 (6.12 - 8.77)
	Age 26+	3.97 (2.81 - 5.58)	3.72 (2.56 - 5.36)	3.82 (2.76 - 5.25)	4.20 (2.91 - 6.02)	4.26 (2.97 - 6.06)	3.96 (3.10 - 5.05)
	Age 18+	4.61 (3.49 - 6.05)	4.17 (3.04 - 5.68)	4.37 (3.35 - 5.69)	4.61 (3.39 - 6.24)	4.72 (3.52 - 6.30)	4.49 (3.68 - 5.46)
Had at least one major depressive episode in past year[11]	Age 12-17	8.29 (6.50 - 10.52)	8.55 (6.52 - 11.15)	9.44 (7.36 - 12.02)	8.95 (6.89 - 11.55)	8.82 (6.86 - 11.27)	8.86 (7.46 - 10.50)
	Age 18-25	8.35 (6.27 - 11.04)	8.77 (6.45 - 11.83)	7.82 (5.89 - 10.30)	8.02 (5.76 - 11.07)	7.37 (5.37 - 10.03)	7.99 (6.63 - 9.59)
	Age 26+	5.74 (4.26 - 7.68)	5.47 (4.01 - 7.42)	5.63 (4.23 - 7.44)	5.68 (4.19 - 7.64)	5.47 (4.11 - 7.25)	5.60 (4.59 - 6.82)
	Age 18+	6.16 (4.78 - 7.92)	5.90 (4.49 - 7.72)	5.94 (4.63 - 7.60)	6.07 (4.67 - 7.85)	5.80 (4.50 - 7.43)	5.97 (5.04 - 7.06)
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	7.38 (5.43 - 9.95)	6.79 (4.86 - 9.40)	6.37 (4.74 - 8.51)	6.54 (4.68 - 9.07)	6.45 (4.70 - 8.80)	6.68 (5.48 - 8.13)
	Age 26+	3.38 (2.36 - 4.83)	3.04 (2.08 - 4.43)	3.39 (2.40 - 4.78)	3.15 (2.19 - 4.52)	3.29 (2.31 - 4.66)	3.29 (2.55 - 4.23)
	Age 18+	4.03 (3.03 - 5.35)	3.53 (2.57 - 4.83)	3.82 (2.87 - 5.07)	3.72 (2.77 - 4.98)	3.83 (2.89 - 5.06)	3.81 (3.11 - 4.67)

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

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

Appendix 2A/2B. Substance Abuse and Mental Health by Region, Age 12+, 2008-2010 (NSDUH)

FOOTNOTES:

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

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

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

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

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

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

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

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

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

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

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