2007

University of Minnesota Systemwide Student Health Report

Prepared for the University of Minnesota Board of Regents

Crookston

Duluth

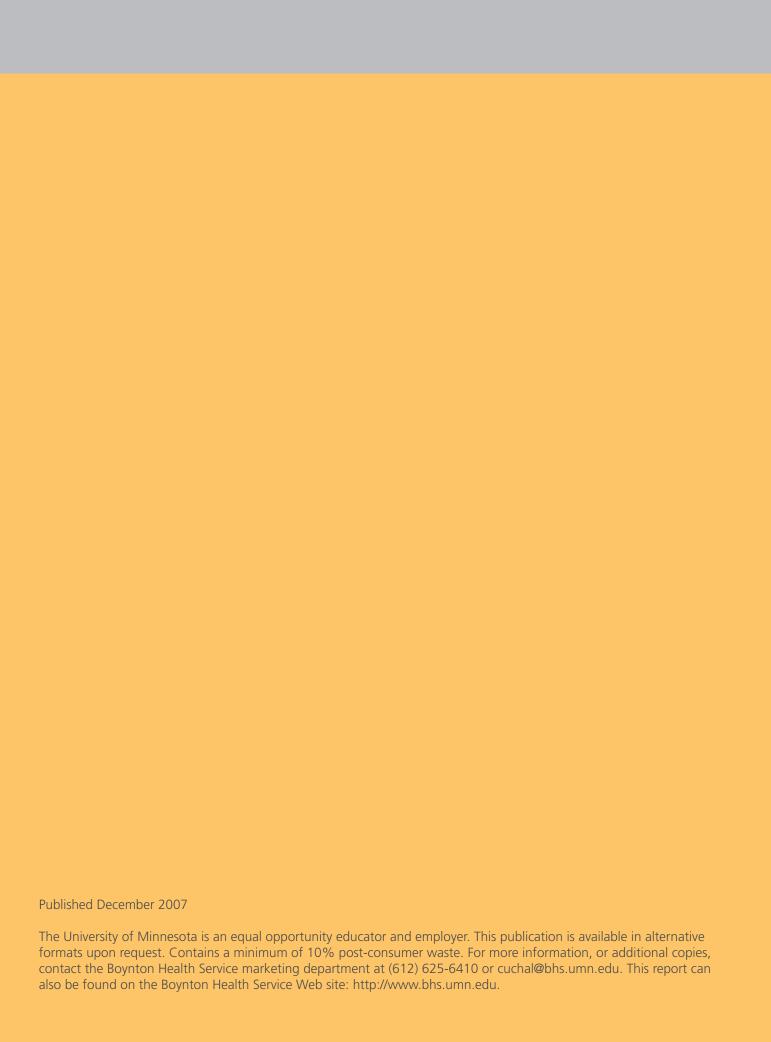
Morris

Rochester

Twin Cities



University of Minnesota



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Introduction

The health of college students greatly affects not only their academic achievement but also the overall health of our society. While intuitively it is obvious that health conditions can affect academic success, the link to overall societal health is more subtle but no less profound. Given that there are now more students in postsecondary education than in high school, that college students help set the norms of behavior for our society and serve as role models for younger students, that college students are establishing and solidifying lifestyles and behaviors that will stay with them for the rest of their lives, and that a college degree is one of the major determinants of future health and economic status, the importance and the impact of the health of college students on our society becomes evident.

Until recently, there was no good data set at the state or national level that provided comprehensive information on the health of college students. The data that did exist focused mostly on alcohol and tobacco use and was limited to individual four-year schools. To address that deficiency, in the spring of 2007 Boynton Health Service conducted a wide-ranging health survey among students at 14 postsecondary educational institutions in Minnesota, including both two-year and four-year schools. This was the first statewide survey of its kind in the country.

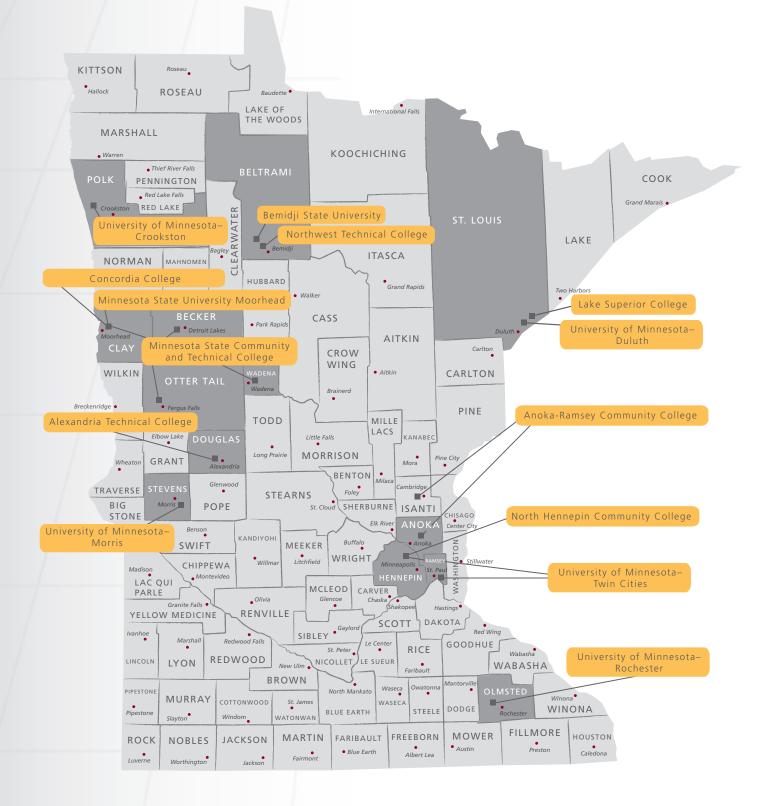
This random sample, Web-based survey collected information from nearly 10,000 Minnesota students about their experiences and behaviors in the areas of health insurance and health care utilization, mental health, tobacco use, alcohol and other drug use, personal safety and financial health, nutrition and physical activity, and sexual health. All five University of Minnesota campuses-Crookston, Duluth, Morris, Rochester, and Twin Cities-participated in the survey. This was the first time health data were collected simultaneously at all five campuses using the same survey instrument and similar methodology. Over 5,600 University of Minnesota students completed the survey for a response rate of 49.4%.

This report highlights the findings of the most comprehensive survey of University of Minnesota student health ever undertaken. Boynton Health Service believes that the valuable information contained in this report will be helpful to University leaders as they strive to develop programs and policies that will assure a safe institutional environment, promote access to health care and essential services, encourage responsible student decision making and behavior, and contribute to the health, well-being, and academic success of all University students. The hope is that the survey results also will raise awareness among state and local policymakers and community leaders concerning the importance of the health of college students to the overall educational, health, and economic status of Minnesota.

Please Note:

These data are presented in a way that will lead to comparisons among the five campuses. Due to the large demographic differences among the campuses, true comparisons of similar populations are not available at this time. This publication was prepared for the University of Minnesota Board of Regents to provide a snapshot of the five campuses in one document.

Map of Participating Colleges and Universities



Methodology

Students completed the 2007 College Student Health Survey, developed by Boynton Health Service at the University of Minnesota. As an incentive, all students who responded to the survey received a \$5 gift card and entry into a drawing for gift certificates valued at \$3,000 (one), \$1,000 (one), and \$500 (two) at a variety of stores.

Participants were contacted through multiple mailings and e-mails:

- Postcards were sent to randomly selected students notifying them of their eligibility to participate in the survey.
- Students at eleven schools were e-mailed a link to an online version of the survey, and students at three schools received a paper survey via U.S. Mail.
- Reminder postcards/multiple e-mails were sent to all students to encourage participation.
- All students received a minimum of two invitations to participate in the survey.

Snapshot: Colleges and Universities Participating in the 2007 College Student Health Survey

Two-Year Schools	Location
Alexandria Technical College	Alexandria, MN
Anoka-Ramsey Community College	Cambridge, MN Coon Rapids, MN
Lake Superior College	Duluth, MN
Minnesota State Community and Technical College	Detroit Lakes, MN Fergus Falls, MN Moorhead, MN Wadena, MN
North Hennepin Community College	Brooklyn Park, MN
Northwest Technical College	Bemidji, MN
Four-Year Schools	Location
	200001011
Bemidji State University	Bemidji, MN
Bemidji State University Concordia College	
	Bemidji, MN
Concordia College	Bemidji, MN Moorhead, MN
Concordia College Minnesota State University Moorhead	Bemidji, MN Moorhead, MN Moorhead, MN
Concordia College Minnesota State University Moorhead University of Minnesota–Crookston	Bemidji, MN Moorhead, MN Moorhead, MN Crookston, MN
Concordia College Minnesota State University Moorhead University of Minnesota–Crookston University of Minnesota–Duluth	Bemidji, MN Moorhead, MN Moorhead, MN Crookston, MN Duluth, MN

2007 University of Minnesota Systemwide Methodology Highlights

	All Campuses	Crookston	Duluth	Morris	Rochester	Twin Cities
Students Randomly Selected to Participate	11,452	882	2,800	1,464	306	6,000
Completed Surveys	5,654	331	1,402	838	163	2,920
Undeliverable Surveys	18	16	0	1	1	0
Response Rate	49.4%	38.2%	50.1%	57.3%	53.4%	48.7%

2007 University of Minnesota Survey Demographics*

	All Campuses	Crookston	Duluth	Morris	Rochester	Twin Cities
Average Age (Years)	22.6	22.6	21.4	20.9	28.8	23.4
Age Range (Years)	18-63	18-52	18-58	18-54	18-56	18-63
18-24 Years	80.4%	81.9%	91.9%	95.7%	37.4%	72.6%
25 Years or Older	19.6%	18.1%	8.1%	4.3%	62.6%	27.4%
Average GPA	3.29	3.11	3.15	3.24	3.58	3.38
Class Status						
First-Year Undergraduate	19.3%	23.0%	25.2%	25.3%	0.0%	15.4%
Second-Year Undergraduate	16.7%	18.4%	18.6%	22.9%	3.7%	14.5%
Third-Year Undergraduate	18.9%	26.6%	20.9%	25.3%	12.3%	15.7%
Fourth-Year Undergraduate	17.3%	22.0%	17.1%	20.4%	19.6%	15.8%
Fifth-Year Undergraduate	7.8%	9.7%	8.1%	6.0%	15.9%	7.6%
Graduate or Professional	20.0%	0.3%	10.1%	0.1%	48.5%	31.0%
Gender						
Male	41.4%	48.6%	45.9%	36.8%	33.7%	40.1%
Female	58.5%	51.4%	53.9%	63.0%	66.3%	59.7%
Transgender/Other	0.1%	0.0%	0.1%	0.2%	0.0%	0.2%
Unspecified	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%
Ethnic Origin						
African American/Black	2.1%	2.1%	0.8%	1.8%	3.7%	2.7%
American Indian/Alaskan Native	2.0%	0.3%	1.2%	6.7%	1.8%	1.2%
Asian/Pacific Islander	8.6%	4.5%	3.6%	4.4%	7.4%	12.7%
Latino/Hispanic	1.8%	1.2%	1.1%	1.8%	1.8%	2.2%
Middle Eastern	0.7%	0.0%	0.5%	0.4%	1.2%	1.0%
Caucasian/White	86.8%	92.4%	94.6%	89.5%	86.5%	81.6%
Other	1.7%	0.9%	0.7%	1.7%	0.0%	2.3%
Current Residence						
Residence Hall or Fraternity/Sorority	27.7%	41.7%	33.1%	45.1%	N/A	20.0%
Other	72.3%	58.3%	66.9%	54.9%	100.0%	80.0%

^{*}Based on student responses.

Health Insurance and Health Care Utilization

Many students do not anticipate they will need health care services while they are enrolled in college, but the risks associated with lacking health insurance are very real. Health care coverage is essential for college students because those who receive preventive health care—such as screening tests, immunizations, and health counseling—enjoy better health overall. Health insurance coverage options for college students include employer-sponsored coverage (i.e., coverage through employment or coverage under a parent's or spouse's employer), other types of dependent coverage, college- or university-sponsored student health insurance programs, private or individual insurance, special programs for the uninsured, and Medicaid, Indian Health Service, insurance for dependents of active duty U.S. military, or other governmental aid programs.

The University of Minnesota requires full-time students to have health insurance as a condition of enrollment. Because of this policy, University of Minnesota students have access to the most comprehensive student health benefit plan in the country. A broad health benefit plan allows students who need health care to remain enrolled in school and is a strong incentive for all students to stay in school to maintain high-quality, low-cost insurance.

By its nature, the college setting brings students into close contact with one another, raising the risk of contracting contagious diseases. Preventive measures, such as immunizations against influenza and meningococcal disease, can decrease college students' susceptibility to these infectious diseases.

The percentage of Americans living without health insurance rose from 15.6% in 2004 to 15.9% in 2005. This equates to 47 million Americans who lack health insurance.¹ Nationally, young adults between the ages of 18 and 24 have the highest uninsured rates. In 2006, approximately one out of three (29.6%) individuals in this age group lacked health insurance.¹ Based on the most recent data released by the U.S. Census Bureau, the uninsured rate among adults in Minnesota is 9.23%, which is up from the 8.5% uninsured rate reported in 2004. The uninsured rate for Minnesotans ages 18 to 24 is 17.3%, which represents the highest uninsured rate among all age groups.²

Despite having an institutional policy requiring insurance coverage, the overall uninsured rate for students attending the five campuses of the University of Minnesota is **8.5%**, with a range from 4.6% at the University of Minnesota-Morris to 11.7%.at the University of Minnesota-Twin Cities. Additional data analysis reveals that students who classify themselves as undergraduates have a lower uninsured rate than those who classify themselves as graduate students. The lower uninsured rate among undergraduates may be a reflection of parental health insurance that allows dependents under the age of 25 to remain eligible for coverage while attending a postsecondary institution. Male students have a higher uninsured rate than female students (12.1% vs. 9.2%, respectively).

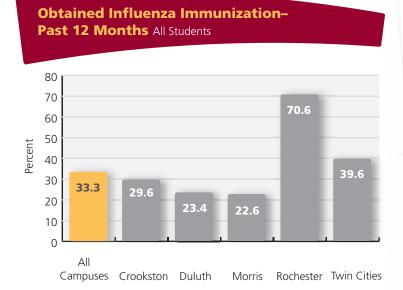
Health Insurance Status-Uninsured* All Students 12 11.7 10 8 8.5 6 5.1 5.0 4 4.6 2 0 Campuses Crookston Duluth Rochester Twin Cities Morris

*Note: Does not include international students.

Influenza (flu) is a contagious viral respiratory illness that can cause mild to severe symptoms and even death. Some individuals, such as older people, young children, and those with certain health conditions, are at high risk for serious flu complications. Vaccination against influenza is the recommended preventive measure and means for reducing the chance of developing a severe illness, especially among groups of people at increased risk for serious complications. Influenza imposes a significant medical, social, and economic burden on our society.

Every year in the United States, on average:

- an estimated 5.0% to 20.0% of the population contract the flu;
- more than 200,000 people require hospitalization because of flu complications; and
- about 36,000 people die from the flu.3



Data from the 2007 College Student Health Survey show that only one-third (33.3%) of all University of Minnesota students obtained an influenza vaccination within the past 12 months. Even though young adults are not targeted to receive the influenza vaccine, the nature of the college environment allows for ready transmission of the influenza virus. Upper respiratory infections can and do impact academic work. Over one-third (37.1%) of students report they had an upper respiratory infection (URI) within the past 12 months, and of those students, **30.5%** indicate the URI affected their academic performance. Among students who experienced a URI, 4.4% report that they received a lower grade in a course, received an incomplete, dropped a course, or took a leave of absence or dropped out of school because of the illness.

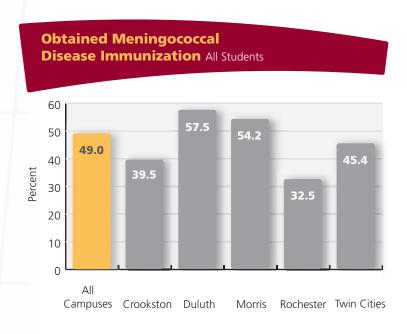
Meningococcal disease is a serious illness caused by a bacterial infection that results in inflammation of the membranes surrounding the brain and the spinal cord. The disease is transmitted through the air via sneezing or coughing and by direct contact with persons infected with the disease.

There are approximately 1,400 to 2,800 cases of meningococcal disease in the United States every year, with a fatality rate of roughly 10.0% to 14.0% (about 300 to 360 fatalities). Among those who survive meningococcal disease, approximately 11.0% to 19.0% suffer long-term consequences, such as brain damage, kidney disease, hearing loss, or limb amputation.⁴

Individuals may be at increased risk for infection due to certain lifestyle factors, including:

- crowded living conditions (such as dormitories, boarding schools, and sleep-away camps);
- sharing beverages or utensils;
- smoking or secondhand smoke exposure; and
- irregular sleeping patterns.^{5,6}

The 2007 College Student Health Survey results show that approximately one-half (49.0%) of all University of Minnesota students report they received a vaccination for meningococcal disease at some point in their lifetime.



Mental Healthand Related Issues

Students' academic success depends in part upon their ability to learn, to negotiate the college environment, and to deal with the complexities of their school and personal lives. Students' mental health affects the success they experience both during their college years and throughout the rest of their lives.

Issues related to relationships, stress and anxiety, depression, eating problems, personality disorders, sexual assault, gambling, credit card debt, financial worries, and alcohol and other drug use all influence students' physical, emotional, and cognitive wellbeing. Often students are dealing with multiple issues, and these can affect not only themselves but also their friends, their families, and the communities in which they live. Addressing these issues involves more than just providing counseling or treatment for the individual. It also requires examination of the culture, environment, and social structures that perpetuate these problems.

Mental Health Diagnosis and Mental Health Stressors-Past 12 Months All Students

	Percentage		
Stressor	Mental Health Diagnosis	No Mental Health Diagnosis	
Failed a Class	16.1	8.7	
Placed on Academic Probation	12.9	6.2	
Excessive Credit Card Debt	16.9	7.5	
Conflict With Parents	24.3	13.3	
Conflict With Housemate/Roommate	35.2	26.5	

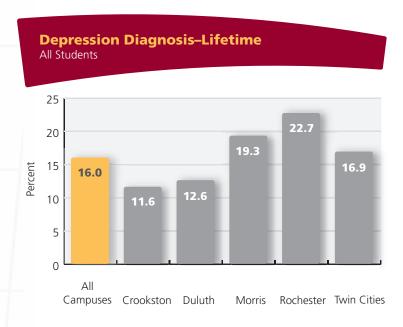
Mental health problems rarely exist in isolation but frequently occur in conjunction with other issues. As the table above shows, University of Minnesota students who report being diagnosed with a mental health issue within the past 12 months experience a higher prevalence of various stressors than students who do not report the diagnosis of a mental health issue.

The 2005 National Survey on Drug Use and Health found a strong association between depression and the initiation of alcohol and illicit drug use among youth ages 12 to 17.7 Although the data collected are not specific to the college population, they document an association between depression and substance use that may have long-term implications for academic success.

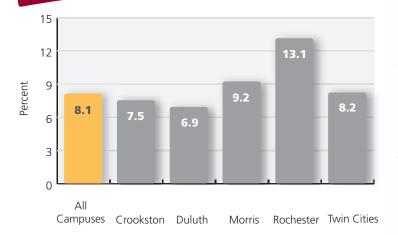
The following series of graphs presents data on depression diagnosis, psychotropic medication use, and behaviors that have a bearing on the overall mental health of students attending the five campuses within the University of Minnesota system. These data lay a foundation for further discussion of the mental health needs of University of Minnesota students. Mental health issues can have a profound impact on all aspects of campus life, affecting students' academic performance and ultimately impacting the mission of the University of Minnesota, which is to provide a culture and an environment where students can achieve academic success.

Data from previous College Student Health Surveys over the past decade reveal a steadily increasing rate in the diagnosis of depression within a lifetime among University of Minnesota-Twin Cities students. In 1998, the rate for Twin Cities campus students diagnosed with depression was 12.3%; in 2001, the rate was 14.2%; in 2004, the rate was 16.2%; and in 2007, the rate was 16.9%. Nationally, a representative sample of youth ages 15 to 24 found that 25.2% of these young adults experienced a depressive episode within their lifetime and 69.0% had at least one recurrent episode of depression.8

Unmanaged depression can create barriers to students' social interaction, personal growth, and academic achievement. Analysis of data from the 2007 College Student Health Survey shows that **16.0%** of all University of Minnesota students have been diagnosed with depression within their lifetime. Students who have been diagnosed with depression within their lifetime report they have experienced an average of 5.6 days within the past 30 days on which their health affected their daily activities; this compares to an average of 2.3 days for University students who have never been diagnosed with depression. In addition, among the **22.0%** of University students who report they have experienced a mental health issue within the past 12 months, **57.2%** indicate the issue affected their academic performance.



Depression Diagnosis-Past 12 MonthsAll Students



Among all University of Minnesota students responding to the 2007 College Student Health Survey, **8.1%** report they have been diagnosed with depression within the past 12 months.

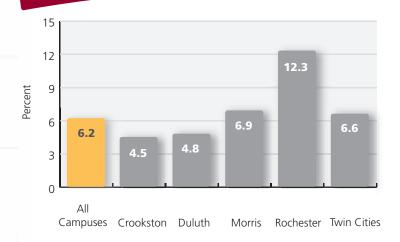
Additional data analysis reveals that among University of Minnesota students ages 18 to 29, **7.7%** were diagnosed with depression within the past 12 months. According to findings of the 2005 National Survey on Drug Use and Health, 9.7% of 18- to 25-year-olds have experienced a major depressive episode in the past year.⁷

Results from the National Comorbidity
Survey Replication (NCS-R), using
criteria from the American Psychiatric
Association's Diagnostic and Statistical
Manual of Mental Disorders-IV, show that
in 2003, 38.0% of 18- to 29-year-olds
were diagnosed with a mental disorder
within the previous year.9

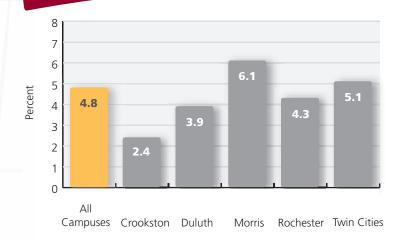
The rates for currently taking medication for depression parallel the lifetime depression diagnosis rates among University of Minnesota survey respondents: University students at campuses with slightly higher depression rates also have slightly higher rates of current medication use. Among University students, the overall rate of current medication use for depression is 6.2%, and the overall rate of current medication use for mental health problems other than depression is 4.8%.

These rates reported by University of Minnesota students are similar to those found among students attending the University of Michigan. Counseling and Psychological Services at the University of Michigan conducted the College Student Mental Health Survey (CSMHS) between November 2004 and January 2005, collecting data from 939 students attending the institution. CSMHS asked questions comparable to those included in the 2007 College Student Health Survey conducted by Boynton Health Service. The CSMHS survey found that 6.8% of University of Michigan students were currently taking psychotropic medication.¹⁰

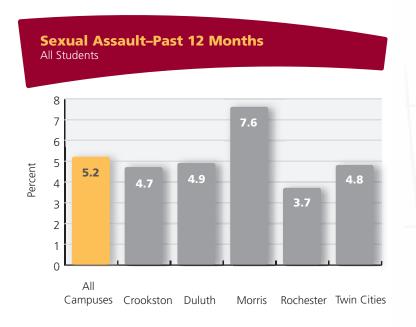
Currently Taking Medication for Depression All Students



Currently Taking Medication for Mental Health Problems Other Than Depression All Students



Both adult males and females can be victims of sexual assault. An estimated one out of six females and one out of thirty-three males in the United States will experience rape within their lifetime.¹¹ The mental health consequences of experiencing a sexual assault are profound. Almost one-third (31.0%) of all rape survivors develop post-traumatic stress disorder at some point during their life.¹² Women who report experiencing a rape as a child are approximately three times more likely to suffer from psychological disorders and over four times more likely to engage in drug and alcohol abuse in adulthood compared to those who do not experience a rape.¹³ Survivors of rape are 13 times more likely than nonvictims to attempt suicide.¹²



According to the 2007 College Student
Health Survey, **5.2%** of all students
attending the University of Minnesota
report they have been sexually assaulted
within the past 12 months. Further
analysis of survey data reveals that **14.2%** of all students report having
experienced a sexual assault within their
lifetime. More than one in five (**21.1%**)
women and nearly one in twenty (**4.6%**)
men who attend the University report
having experienced a sexual assault within
their lifetime.

Definition:

Sexual Assault

Sexual assault is defined as experiencing actual or attempted sexual intercourse or sexual touching without one's consent or against one's will.

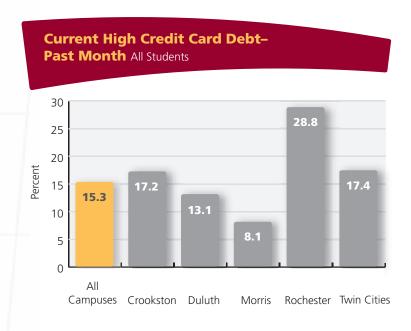
Nearly two-thirds (64.0%) of college students in the United States have at least one credit card, and about one in seven (14.0%) have four or more credit cards. 14 A large majority (82.0%) of students with credit cards who know their account balances report average balances of \$1,000 or less.14 High credit card debt can adversely affect students if they cannot afford the payments. Excessive debt and inability to pay can lead to a poor credit rating, which may impede their ability to buy a car, rent an apartment, obtain a home mortgage, find a job after graduation, or be accepted into a graduate degree program.¹⁵ Excessive debt is correlated with an increase in anxiety and stress levels among college students and an increase in the number of students who drop out of school due to financial difficulties.¹⁵

Among all University of Minnesota students who participated in the 2007 College Student Health Survey, 15.3% report having a credit card balance of \$1,000 or more during the previous month. Further analysis shows that **5.5%** of University students report a credit card balance of \$4,000 or more during the previous month.

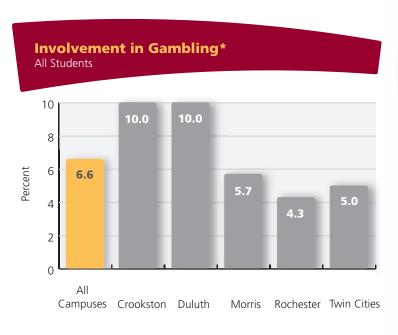
University of Minnesota students who have a credit card balance of \$1,000 or greater in the previous month report working more hours for pay per week than students with lower credit card balances. Close to one-half (46.6%) of University students with high credit card debt work 30 or more hours per week compared to only **21.5%** of students with lower credit card debt.



Current high credit card debt is defined as having a monthly unpaid balance of \$1,000 or more.



Today, 47 of the 50 states have some form of legalized gambling, and 37 states plus the District of Columbia operate a legalized lottery. Minnesota currently has 17 Indian casinos operated by 11 different Indian tribes. According to a September 2004 report by the Minnesota State Lottery, the annual volume of gambling at Minnesota's casinos was estimated as being "in excess of \$10 billion." ¹⁶ For most individuals, gambling is a form of entertainment and has no negative consequences. For others, however, gambling can become problematic and jeopardize their financial well-being, their personal judgment, and their overall health. The rate of problem gambling among the adult population is estimated to be 1.0% to 3.0%, and there is evidence that the rate of problem gambling among young people may be even higher. ^{17,18}



*Note: Refers to students who gamble once per month or more.

Data collected for the 2007 College
Student Health Survey document that
6.6% of all students attending the
University of Minnesota report they have
gambled at least one time per month
over the past 12 months. Further analysis
reveals that among University students
who gamble at least once per month,
16.0% report they spend on average
\$100 per month or more on gambling
and 1.3% report they spend \$1,000 per
month or more.



3 Alcohol and Other Drug Use

Alcohol and other drug use by college students is an area of great concern because of the high correlation of this activity with death and injury.¹⁹ Alcohol use, and in particular high-risk drinking, affect not only the individual student but also create a secondary impact on students who do not engage in these behaviors. Research shows that college students who attend schools with significant high-risk drinking report higher rates of sleep and study disruptions, damage to property, and verbal, physical, and sexual abuse than do their peers who attend schools with lower rates of this behavior.²⁰ Also, communities located near schools with higher rates of high-risk drinking report more noise disruptions, property damage, and calls to the police than communities located near schools with lower high-risk drinking rates.²⁰

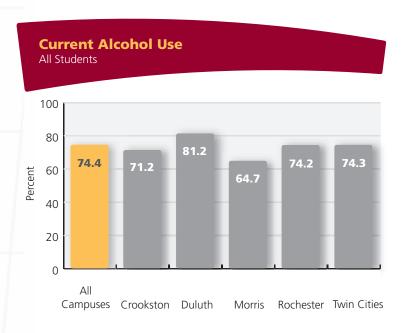
College students consume alcohol for a variety of reasons. They may believe that alcohol use signifies their emergence into adulthood, enhances their interactions at social gatherings, reduces stress, or provides a release from problems. The use of alcohol by students of legal drinking age is generally not problematic. Rather, the reasons for drinking, the amount of alcohol consumed, and the circumstances surrounding the decision to drink determine whether or not the consumption of alcohol becomes problematic. When students consume large amounts of alcohol, there is a dramatic increase in the likelihood that they will experience serious immediate and long-term negative consequences. Underage students who choose to drink are subject to consequences imposed by both the legal system and their institution.

According to national data, 86.6% of college students have consumed alcohol at least once in their life, and 68.0% of college students consume alcohol monthly.²¹ Rates of heavy or "binge" drinking (consuming five or more alcoholic beverages in a row in the previous two weeks) peak between ages 21 and 23 (49.9% at age 21, 46.6% at age 22, and 47.7% at age 23).7 The rate of binge drinking among 18- to 20-year-olds is 36.1% and among 21- to 25-year-olds is 45.7%. Young adults ages 18 to 22 who are enrolled in college full time are more likely than their peers who are not enrolled in college full time to consume alcohol monthly and to binge drink.⁷

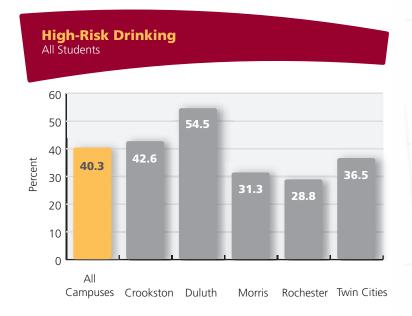
At the University of Minnesota, the current alcohol use rate for all students is **74.4%**.

Current Alcohol Use

Current alcohol use is defined as consuming at least one bottle of beer, glass of wine, wine cooler, shot glass of liquor, or mixed drink within the past 30 days.



The consequences of high-risk drinking affect virtually all college campuses, college communities, and college students, whether or not the individuals choose to drink. In 2001, approximately 1,700 college students ages 18 to 24 died as a result of alcohol-related injuries and another 599,000 were unintentionally injured while under the influence of alcohol. About three out of ten (29.0%) college students who report they consumed alcohol within the past 30 days also indicate they drove a vehicle while under the influence of alcohol.



Among all University of Minnesota students who participated in the 2007 College Student Health Survey, **40.3%** report they have engaged in high-risk drinking (HRD). Further data analysis reveals that, compared to students who do not engage in HRD, students who do engage in HRD report higher rates of various negative consequences as a result of their alcohol use, as shown in the table below.

High-Risk Drinking and Negative ConsequencesAll Students

	Percentage		
Negative Consequences	Engaged in HRD	Did Not Engage in HRD	
Driven a Car While Under the Influence	35.4	8.4	
Damaged Property	5.1	0.9	
Been in Trouble With Police	16.5	3.2	

Definition:High-Risk Drinking

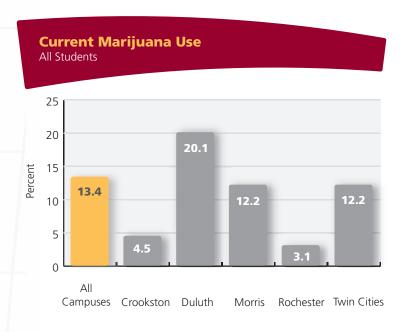
High-risk drinking is defined as consumption of five or more alcohol drinks at one sitting within the past two weeks.

Marijuana is the most frequently used illicit drug in the United States, with over 94 million Americans age 12 and older (approximately 40.0% of the population) reporting having tried marijuana at least once in their lifetime.⁷ During the 1980s, the reported use of marijuana by youth declined.²² However, since the early 1990s, marijuana use among youth has increased.²² Data from the CORE Institute's annual survey of alcohol and drug use among college students reflect this trend, with the rate of marijuana use increasing from 24.2% in 1992 to 34.8% in 2003.²³

About one in seven (13.4%) University of Minnesota survey respondents report using marijuana within the past 30 days. Further data analysis reveals that among those who have used marijuana in the past 30 days, 31.9% also report having used another illicit drug within the past 12 months; by comparison, only **3.4%** of noncurrent marijuana users indicate they have used another illicit drug within the past 12 months.

Current Marijuana Use

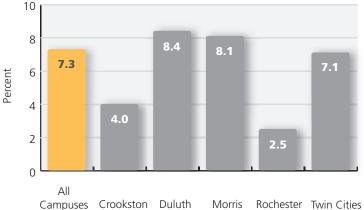
Current marijuana use is defined as any use within the past 30 days.



More than half (52.0%) of college students have used an illicit drug at least once in their lifetime, nearly two in five (37.0%) college students have used an illicit drug at least once in the past year, and more than one in five (21.2%) college students have used an illicit drug in the last month.²¹

Researchers at the Harvard School of Public Health have documented an upward trend in the rate at which college students used illicit drugs (not including marijuana) within the past 12 months, from 11.0% in 1993 to 14.0% in 2001.²⁴ In addition, the Harvard researchers reported that nearly all (98.0%) users of marijuana and other illicit drugs also smoked, binge drank, and/or used other illicit substances.²⁴

Any Other Drug Use–Past 12 Months* All Students



^{*}Note: Any other drug use includes the use of cocaine, amphetamines, sedatives, hallucinogens, opiates, inhalants, ecstasy, steroids, and GHB/Rohypnol.

Among all University of Minnesota students who participated in the 2007 College Student Health Survey, **7.3%** report they used at least one illicit drug within the past 12 months. Survey findings show that illicit drug use among University students ranges from **0.1%** for steroids to **3.3%** for sedatives. The second highest rate for illicit drug use is **3.0%** for cocaine.

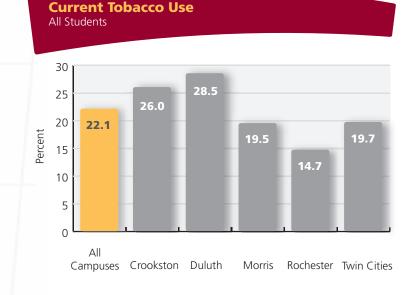


Tobacco Use

College students ages 18 to 24 are prime targets of tobacco industry marketing. 25-28 Youth is a time of experimentation, and the tobacco industry attempts to encourage experimental or occasional smokers in this age group to develop a regular smoking habit.²⁵ Tobacco-related promotional events offering free tobacco products at bars, nightclubs, and college social settings aim to link alcohol use with tobacco use. The goal of the tobacco industry is to make tobacco products an integral part of college students' social lives.^{25,26} The promotional events reinforce brand visibility, encourage nonsmokers to try cigarettes and occasional smokers to use cigarettes regularly, and discourage current smokers from quitting.^{25,26,28}

Recent research shows that current cigarette use by Americans of all ages peaks among young adults ages 21 to 25 at 41.2%, while 18- to 20-year-olds are not far behind at 35.7%.7 Approximately one in three (30.6%) full-time college students smoked cigarettes at least one time in the previous year, one in four (23.8%) smoked cigarettes at least one time in the previous 30 days. Among young adults ages 18 to 25, 5.1% used smokeless tobacco in the previous month. 7 Current cigarette smokers are more likely to use other tobacco products, alcohol, or illicit drugs than nonsmokers.⁷ Among all current smokers, 42.5% have tried to quit and have stopped smoking for at least one day in the preceding 12 months. 29

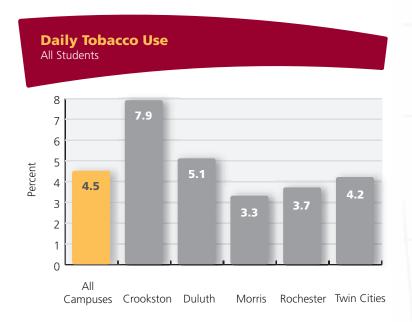
According to the 2007 College Student Health Survey, **22.1%** of all University of Minnesota students report that they have used tobacco within the past 30 days. Other survey data show that the current tobacco use rate for all University students ages 18 to 24 is 23.0%. Data collected since 1992 document that the rate of current tobacco use among Twin Cities campus students ages 18 to 24 has fluctuated from a high of **53.3%** in 1998 to the current low of **20.9%** in 2007.



Current Tobacco Use

Current tobacco use is defined as any use in the past 30 days. Tobacco use includes both smoking and smokeless tobacco.

One in eight (12.0%) smoked cigarettes daily.²¹ There is no significant gender difference in the prevalence of current or daily cigarette smoking among college students.²¹

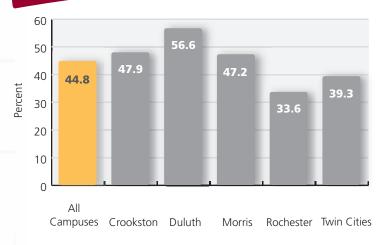


The daily tobacco use rate for all students attending the five University of Minnesota campuses is **4.5%**. In addition, University students ages 18 to 24 report a 4.0% daily tobacco use rate, while students age 25 and older report a slightly higher daily tobacco use rate of **6.5%**. Data collected from Twin Cities campus students ages 18 to 24 reveal a significant decrease in the daily tobacco use rate over the past decade, from a high of 9.8% in 1998 to a low of **3.7%** in 2007.

More than two-fifths (44.8%) of all nonsmokers attending the University of Minnesota report they have been exposed to secondhand smoke on a weekend day. When nonsmokers were asked where they were exposed to secondhand smoke during the weekend, 37.0% report at bars/restaurants and 20.7% report at private parties. Other survey data show that almost one-tenth (9.0%) of nonsmokers are exposed to two or more hours of secondhand smoke on an average weekend day.

Exposure to Secondhand Smoke*

Nonsmokers, Weekend Days



^{*}Includes any secondhand smoke exposure.

5 Nutrition and Physical Activity

College students face many obstacles to eating a healthy, balanced diet and engaging in adequate levels of physical activity. Irregular class schedules, part-time jobs, course work, limited finances, and access to a wide variety of foods that may not always be nutritious contribute to erratic eating habits and lack of participation in physical activity. Unhealthy eating patterns and sedentary habits during the college years may develop into unhealthy lifestyles long term.

Colleges and universities have a unique opportunity to promote healthy practices in the areas of nutrition and physical activity. Encouraging students to eat a healthy diet and engage in appropriate levels of physical activity can play a key role in reducing the long-term morbidity and mortality associated with being overweight or obese and leading an inactive lifestyle.³⁰

Unfortunately, unhealthy eating habits are not uncommon among college students.31 The 1995 National College Health Risk Behavior Survey found that 35.0% of college students were classified as overweight or obese based on a body mass index greater than or equal to 25.0, 73.7% ate less than five servings of fruits and vegetables per day, and only 37.6% engaged in vigorous physical activity on three or more days in the seven days preceding the survey.³² Other research highlights an upward trend in the prevalence of overweight and obesity among U.S. college students.³³

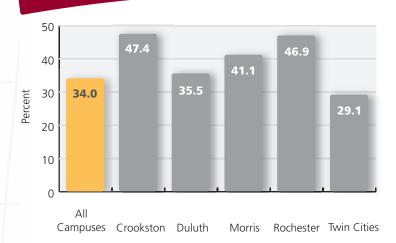
Based on their reported height and weight, more than one-third (**34.0%**) of all University of Minnesota survey respondents have a body mass index that places them in the overweight, obese, or extremely obese category.

Body Mass Index

Body mass index (BMI) is a common and reliable indicator of body fatness.33 BMI is based on a mathematical formula that takes into account both a person's height and weight. BMI equals the weight in kilograms divided by the height in meters squared $(BMI = kg/m^2)$. The table below presents weight categories based on BMI ranges.

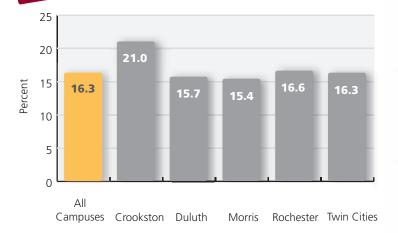
BMI Range	Weight Category
Less Than 18.5	Underweight
18.5 to 24.9	Normal Weight
25.0 to 29.9	Overweight
30.0 to 39.9	Obese
40.0 and Greater	Extremely Obese

Overweight, Obese, and Extremely Obese Weight Categories* All Students



*Students are categorized as overweight, obese, or extremely obese based on their body mass index.

Fruit and Vegetable Consumption Five or More Times Per Day All Students



The vast majority of survey respondents attending the University of Minnesota do not consume adequate quantities of fruits and vegetables. Only 16.3% of all University students report they ate five or more fruits and vegetables per day over the course of the previous seven days.

In other findings related to nutritional patterns, **24.7%** of all University of Minnesota students report they ate breakfast on three or fewer days within the seven days prior to taking the survey, and 35.4% report they ate fast food meals at least once per week over the course of the previous 12 months.

The Centers for Disease Control and Prevention (CDC) recommends that adults:

- Engage in moderate-intensity physical activity for at least 30 minutes on five or more days per week OR
- Engage in vigorous-intensity physical activity for at least 20 minutes on three or more days per week.35

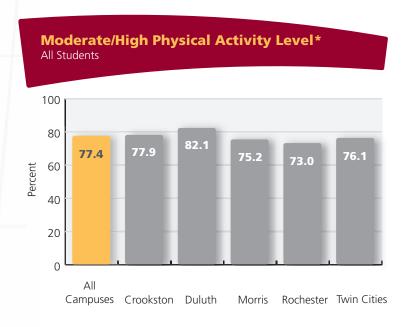
Students were asked several questions regarding their physical activity level. The two survey questions that relate to recommendations outlined by the CDC are:

In the past seven days, how many hours did you spend doing the following activities?

- Strenuous exercise (heart beats rapidly)
- Moderate exercise (not exhausting)

Based on their responses to the two questions, students were classified into one of four physical activity levels (zero, low, moderate, or high). The moderate and high classifications meet the CDC's recommended level of physical activity.

Data from the 2007 College Student Health Survey show that **77.4%** of all University of Minnesota students engage in a level of physical activity that meets the CDC's recommendations.



*Note: Refers to students who meet the recommendations for engaging in a moderate or high level of physical activity during the seven days prior to completeing the survey.

Sexual Health

Young adults make many decisions about their sexuality and sexual practices during college, including whether or not to engage in sexual activity. In addition, students must make decisions regarding matters such as the types of contraception they use and the intensity of their relationships. As with other health behaviors, the college years represent a time of exploration and experimentation in the area of sexual relationships and practices.

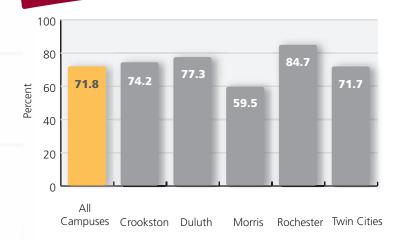
Research documents that a majority of young adults in the United States are sexually active, with 68.1% of 18- to 19-year-old males, 75.2% of 18- to 19-year-old females, 84.4% of 20- to 24-yearold males, and 86.6% of 20- to 24-year-old females reporting they have had at least one sexual partner in the previous 12 months.³⁶ Among 20- to 24-year-olds, 52.7% of males and 30.9% of females who have had sexual contact in the previous year used a condom during their last sexual contact.³⁶ Due to a combination of behavioral, biological, and cultural reasons, sexually active young adults are at increased risk for acquiring a sexually transmitted infection (STI).³⁷ The higher prevalence of STIs among young adults reflects multiple barriers to accessing quality STI prevention services, including lack of health insurance or other ability to pay, lack of transportation, and concerns about confidentiality.³⁷

Data from the 2007 College Student Health Survey show that University of Minnesota students had an average of 1.5 sexual partners within the past 12 months. Among University students who report they have never been sexually active, 68.0% indicate they are intentionally choosing to remain abstinent.

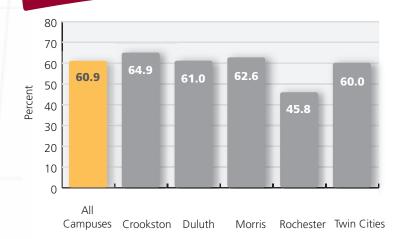
More than seven out of ten (71.8%) University of Minnesota students participating in the 2007 College Student Health Survey report they have been sexually active within the past 12 months. Additional analysis shows that among those students who have been sexually active within the past 12 months, 79.5% indicate their last sexual partner was a fiancé(e), spouse, domestic partner, or exclusive dating partner.

Among University students who are not married and do not have a domestic partner but have been sexually active within their lifetime, 60.9% report they used a condom the last time they engaged in vaginal intercourse.

Sexually Active-Past 12 Months All Students



Condom Use During Last Vaginal Intercourse* All Students, Sexually Active Within Lifetime



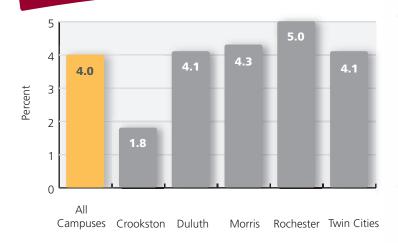
*Note: Does not include students who are married or with a domestic partner.

Pregnancy and Unintended Pregnancy-Past 12 Months All Students

	Percentage			
Campus	Students Involved in a Pregnancy	Pregnancy Unintended		
All Campuses	3.3	53.2		
Crookston	3.9	69.2		
Duluth	2.6	64.9		
Morris	1.6	76.9		
Rochester	11.0	11.1		
Twin Cities	3.6	51.4		

Only 3.3% of all students attending the University of Minnesota report they have been involved in a pregnancy over the past 12 months. Of those students who were involved in a pregnancy, 53.2% report the pregnancy was unintentional.

Sexually Transmitted Infection-Past 12 Months* All Students, Sexually Active



^{*}Note: Sexually transmitted infections include chlamydia, genital herpes, genital warts/HPV, gonorrhea, HIV/AIDS, pubic lice, and syphilis.

The 2007 College Student Health Survey finds that 4.0% of all students attending the University of Minnesota who are sexually active within their lifetime report they have been diagnosed with a sexually transmitted infection within the past 12 months. In addition, **9.1%** of sexually active students report having been diagnosed with an STI at some point within their lifetime, with the two mostly commonly diagnosed STIs within students' lifetimes being genital warts/human papilloma virus (5.0%) and chlamydia (2.5%).



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