

Olmsted County, Minnesota  
Community Health Improvement Plan  
2021 – 2023  
August 2021  
Substance Use Data Profile

**A Collaborative Community Effort Led By:  
Olmsted County Public Health Services,  
Olmsted Medical Center, and Mayo Clinic**

Questions regarding the Substance Use Data Profile can be directed to:  
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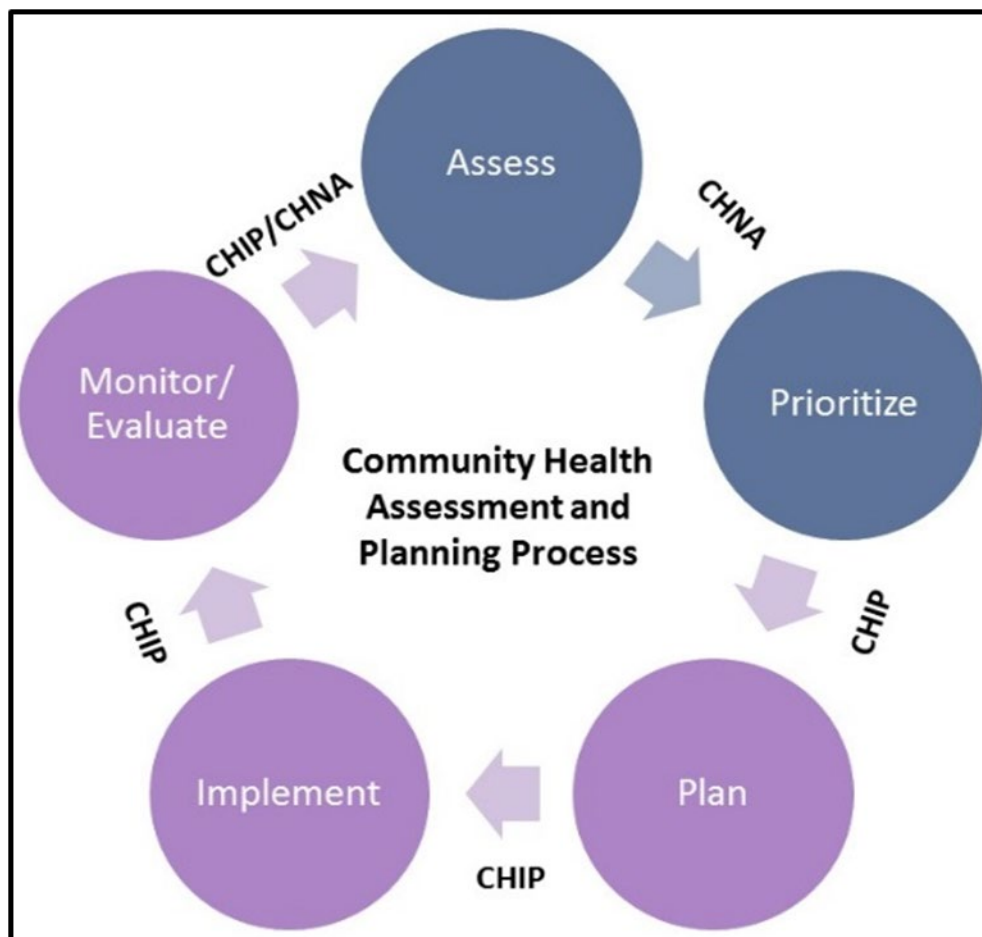
## Introduction

### Community Health Assessment and Planning Process

The Community Health Assessment and Planning (CHAP) process is a collaborative community effort led by Olmsted County Public Health Services, Olmsted Medical Center, and Mayo Clinic, in partnership with multiple community organizations. The process is a continuous, triennial cycle that assesses our community's health, prioritizes our top community health needs, and plans, implements, and monitors/evaluates strategies to improve our community's health.

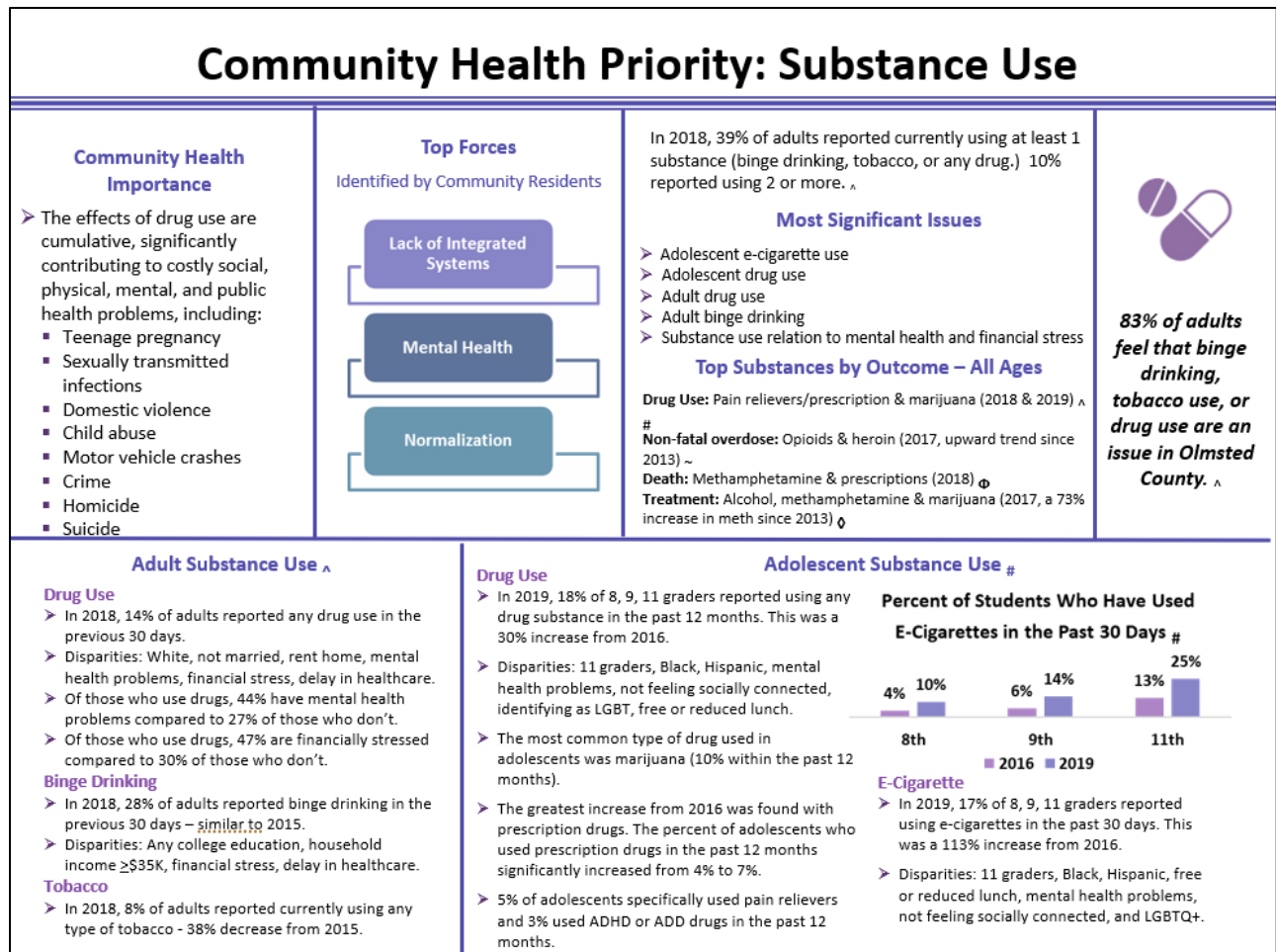
### About the Data Profile

The purpose of this Data Profile is to provide a deeper dive into the Community Health Improvement Plan (CHIP) priority substance use (alcohol, tobacco, and other drugs) to assist with strategy selection and action planning. The profile includes both quantitative and qualitative data that has been collected from various data sources to better examine substance use in Olmsted County, but also contributing factors (local conditions). When possible, disparity tables are included.



## Community Health Priority: Substance Use

- Youth e-cigarette usage continues to be a significant issue, while adult tobacco use has decreased between 2015 and 2018.
- There are clear disparities for youth substance use, which include being a person of color, on the National School Lunch Program (free and reduced school lunches), having mental health issues problems, not feeling socially connected, and being lesbian, gay, bisexual, or transgender (LGBT).
- Nearly one in three adults binge drink, and just over one in ten adults use drugs.



## Summary of Findings

## Substance Use Overall

- 39% of Olmsted County residents report using at least one type of substance.
- 83% of adults feel that binge drinking, tobacco use, or drug use are an issue in Olmsted County.
- There is a clear connection between substance use and the other two community health priorities of financial stress and mental health.

## Tobacco Use

- Tobacco use for Olmsted County adults has decreased from 2015 to 2018.
- E-cigarette use among adolescents has greatly increased between 2016 and 2019.
- Adults who are younger, report a poor or fair overall health status, are financially stressed, have mental health problems, and delay access to healthcare are more likely to use tobacco products.

## Binge Drinking and Alcohol Use

- Alcohol is the most commonly used substance among Olmsted County adults.
- For adults, there are clear disparities among those who binge drink; disparities include financial stress, less healthcare access, feelings of unacceptability and safety in the community, more education, and participate in distracted driving.
- Nearly one in three eleventh grade Olmsted County adolescents binge drink.

## Other Drug Use

- Marijuana and prescription drugs are the most commonly used drugs among Olmsted County adults and adolescents.
- Nearly one in five Olmsted County eleventh graders used marijuana in 2019.
- The percent of Olmsted County adolescents who have abused prescription drugs has increased from 2016 and 2019.

## Substance Use Other Factors

- In 2017, 50% of fatal traffic crashes in Olmsted County involved alcohol.
- Nonfatal drug overdose emergency department visits in Olmsted County have increased steadily from 2013 to 2017.
- Opioid prescribing rates per 1000 population in Olmsted County (303.9) are lower than statewide (438.4) in 2019.

## Definitions

These definitions were developed for the 2018 Community Health Needs Assessment (CHNA) based on CHAP partner input.

### Substance Use

Individuals currently using alcohol, tobacco, or other drugs.

### Tobacco

Individuals currently using cigars, cigarettes, e-cigarettes, chewing tobacco, snuff, or snus.

### Binge Drinking

The practice of consuming 4+ alcoholic beverages in a single session for those who identify as female, and 5+ beverages for those who identify as male.

### Other Drug Use

Individuals currently using marijuana, opioids, stimulants, hallucinogens, inhalants, or any other substance for non-medical purposes.

## Data Sources and Notations

### ^ Community Health Needs Assessment (CHNA)

Mailed Survey: 2013, 2015, 2018

The CHAP Data Subgroup developed the survey instrument with technical assistance from the Minnesota Department of Health (MDH), Center for Health Statistics. Existing questions from previous community surveys, the Behavioral Risk Factor Surveillance System (BRFSS) survey, other national validated health surveys and recent county-level surveys in Minnesota were used to design the questions on the instrument. The survey was formatted by the survey vendor, Survey Systems, Inc. (SSI), as a scannable, self-administered, English questionnaire.

### Convenience Survey: 2018

Using the same survey instrument as the CHNA Mailed Survey in the fourth quarter of 2018, the CHAP process partnered with sixteen sites in Olmsted County to administer convenience surveys. Many of these sites were service providers and developed their own method for administering the survey at their site. In addition to the survey sites, a survey link was shared with community partners to include in their newsletters, on Facebook, and on their websites.

### # Minnesota Student Survey (MSS)

Olmsted County: 2016 & 2019, Minnesota: 2016 & 2019

The MSS has been the most consistent source of data about the health and well-being of Minnesota's students for the past 30 years. This survey asks students in grades five, eight, nine, and eleven about their activities, opinions, behaviors, and experiences. Students respond to questions on school climate, bullying, out-of-school activities, health and nutrition, emotional and mental health, relationships, substance use, and more. All responses are anonymous.

### ◇ Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System (BRFSS), 2018

BRFSS is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury.

### & Centers for Disease Control and Prevention (CDC)

The CDC is the leading governmental health agency in the United States. They provide an extensive amount of data on a variety of topics, including substance use.

### X Minnesota Department of Health (MDH)

MDH is the state-run health agency that serves as the lead organization to protect, maintain, and improve the health of all Minnesotans. The information provided at MDH offers a comparison between local, Olmsted County data, and statewide data. MDH also houses medical examiner data.

### @ Minnesota Department of Human Services (DHS)

Minnesota Department of Human Services serves a variety of Minnesotans through eligibility and resources for programming around food and nutrition, housing, income, healthcare, childcare assistance, and coping with COVID-19. Minnesota DHS also includes data around opioid overdoses and treatment.

### ~ Minnesota Prescription Drug Monitoring Program (PDMP)

The Minnesota Prescription Monitoring Program serves as an integrative software for Minnesota prescribers and pharmacists to enter patient information, including opioid prescribing metrics.

### + Minnesota Youth Tobacco Survey (MYTS), 2020

The MYTS is implemented by the Minnesota Department of Health. The survey measures the use of eight types of commercial tobacco products, along with additional questions focused on the use of e-cigarettes. 100 public schools were randomly selected to participate, with 34 schools and nearly 2,200 students participating in the 2020 survey.

### > Minnesota Department of Public Safety, 2019

The focus of the Minnesota Department of Public Safety is to ensure safety on Minnesota's streets and roads. The Department has specific data around motor vehicle crashes in Minnesota, along with crashes that are associated with substances.

### "Rochester Police Department (RPD), 2019

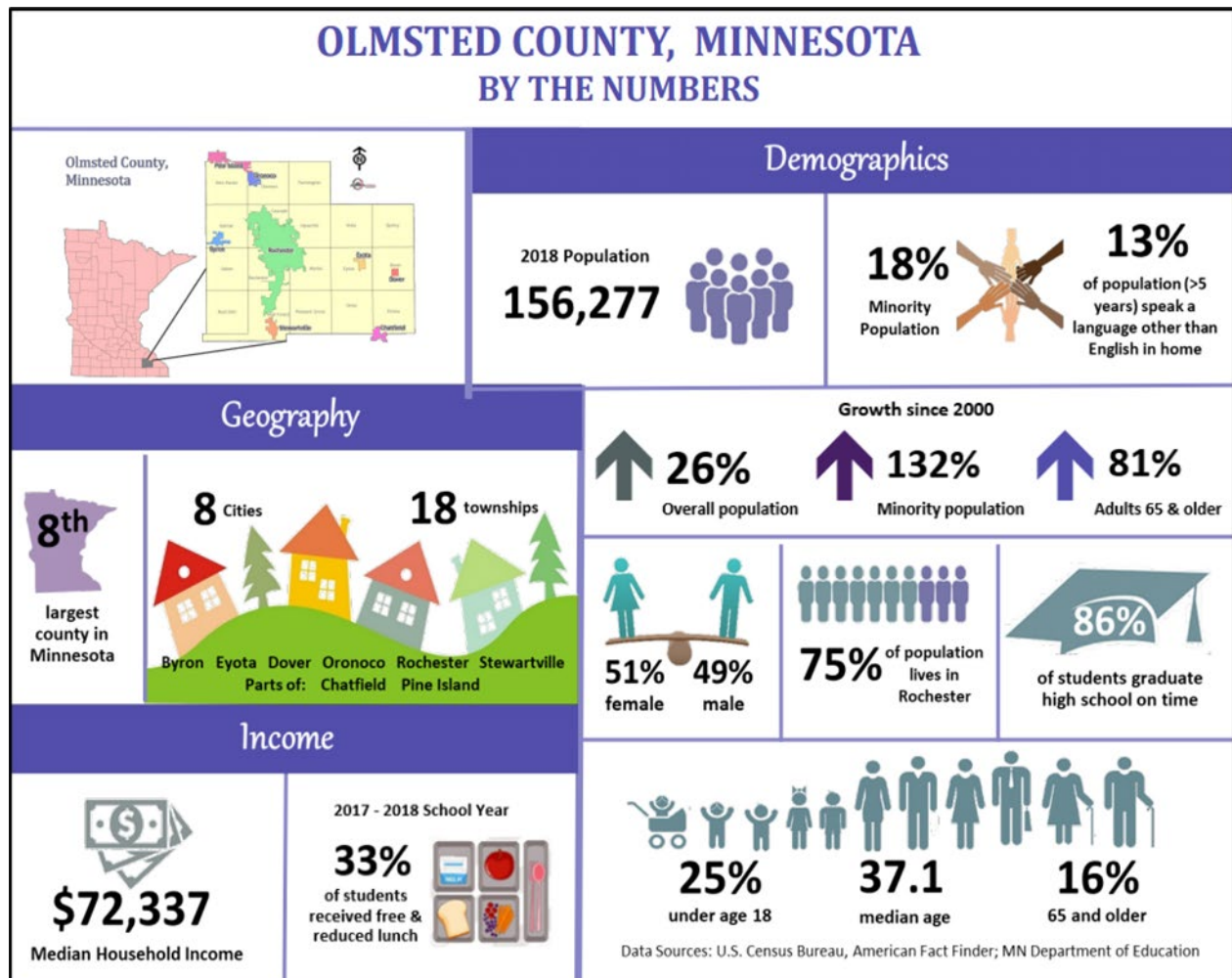
The Rochester Police department (RPD) is dedicated to providing protection to residents through reducing crime and enhancing the quality of life for the community. Over 200 employees serve the department and its many services within the community.

### \* Statistically Significant (Chi-Square: P-value < .05)

Additionally, red font on graphs also indicates statistically significant data.



## Olmsted County, MN Demographics



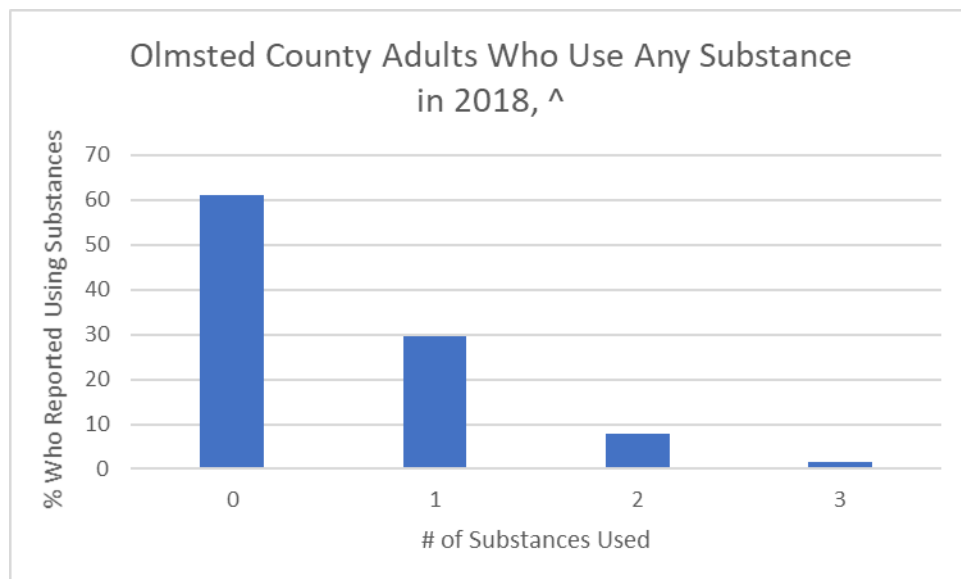
## Substance Use Overall

The use of any substances is cumulative; significantly contributing to costly social, physical, mental, and public health problems including:

- Teen pregnancy
- Sexually transmitted infections
- Domestic violence
- Child abuse
- Motor vehicle crashes
- Crime
- Homicide
- Suicide

The community agrees that substance use is a concern in the community. Of the 2018 Olmsted County Community Survey respondents, 83% of adults in Olmsted County feel that binge drinking, tobacco use, or drug use is an issue in Olmsted County. From a youth perspective, in 2019, according to the Minnesota Student Survey, 87.3% of eighth, ninth, and eleventh grade students in Olmsted County feel that using substances poses a moderate or great risk.

Data from the 2018 Olmsted County Community Survey shows that 39% of mailed survey respondents use at least one substance. Using one substance includes either consuming alcohol, using tobacco products, or using other drugs such as marijuana, hallucinogens, opioids, and more. Of the 39% who reported using at least once substance, 29.5% reported using one, 7.8% reported using two, and 1.7% reported using three or more.



## Health Disparities

According to mailed 2018 CHNA Community Survey data, substance use disparities exist among certain subpopulations throughout Olmsted County, specifically around social determinants of health and the other two CHIP priorities: financial stress and mental health. Specifically, those who are financially

stressed, experience any mental health problems, face any delay in health care, have multiple chronic conditions, participate in distracted driving, and feel unaccepted by the community are more likely to use any substance. All factors, except for multiple chronic conditions, are statistically significant.

2018 Mailed CHNA Community Survey, ^

<b>Financial Stress*</b>	<b>Any Substance Use</b>
No Financial Stress	34.6%
Financial Stress	48.4%
<b>Mental Health*</b>	
No mental health problems	35.2%
Mental health problems	48.8%
<b>Access to Care*</b>	
No delay in care	35.1%
Delay in care	48.7%
<b>Multiple Chronic Conditions</b>	
Do not have multiple chronic conditions	36.9%
Have multiple chronic conditions	42.2%
<b>Distracted Driving*</b>	
Do not participate in distracted driving	31.3%
Participate in distracted driving	42.0%
<b>Community Inclusiveness*</b>	
Do not feel welcome in the community	47.3%
Feel welcome in the community	35.1%

## Tobacco Use

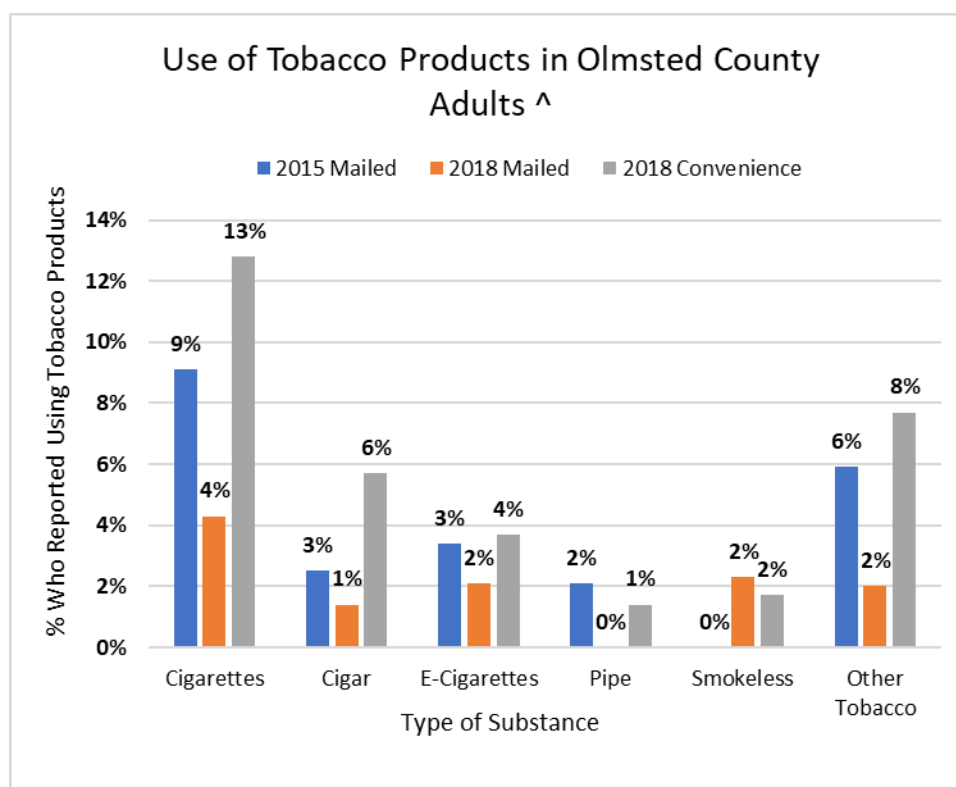
### Overall

Nicotine is an extremely addictive substance. Like most substances, those who use tobacco into adulthood often times began use in their adolescence; in fact, nearly all addicted adult smokers started smoking by the age of 21.

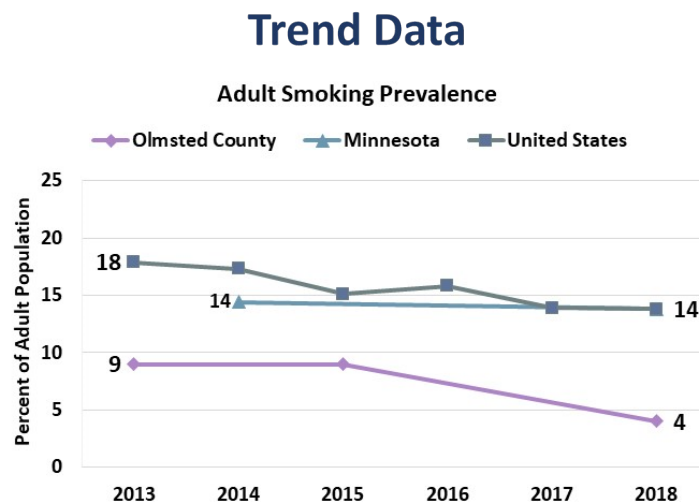
Adults in Olmsted County view tobacco use as a community concern. 92.8% of adults consider tobacco use to be at least a slight concern in the community.

Data from the 2018 Olmsted County Community Survey shows that the use of most tobacco products is declining for adults. In 2018, 8% of adults reported using any type of tobacco; this is a 38% decrease from 2015. Also declining among the 2015 and 2018 mailed surveys were adult cigar, e-cigarette, pipe, and other tobacco use. Smokeless tobacco rates among adults increased from 2015 to 2018.

The 2018 convenience survey showed higher overall rates of tobacco use. With this survey, adult respondents noted 13% cigarette usage, 6% cigar, 4% e-cigarettes, 1% pipe, 2% smokeless, and 8% other tobacco. Overall, 17% of convenience survey respondents noted using any tobacco.



Looking at smoking status, the comparison was used from the Centers for Disease Control Behavioral Risk Factor Surveillance System (BRFSS) use of “smoke every day,” as this metric is most similar to the CHNA tobacco definition of smoking most days. In 2018, 10.6% of Minnesota adults reported smoking every day, compared to 11.7% nationally, and 8% of Olmsted County adults using any type of tobacco. Additionally, Olmsted County saw a reduction of adult smoking prevalence from 2013 at 9% to 2015 at 4%.

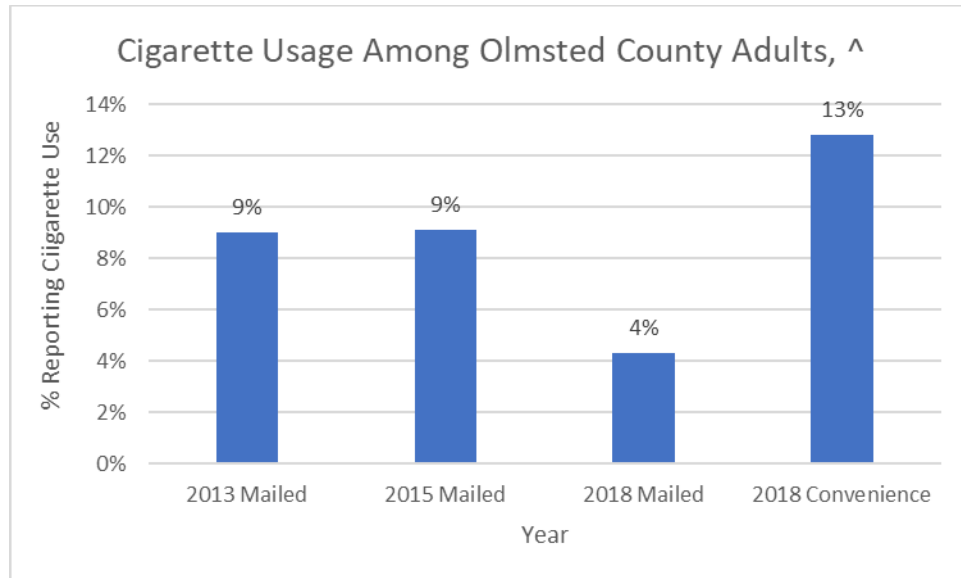


56%
Olmsted County  
change from 2013 to 2018

## Cigarettes

### Adults

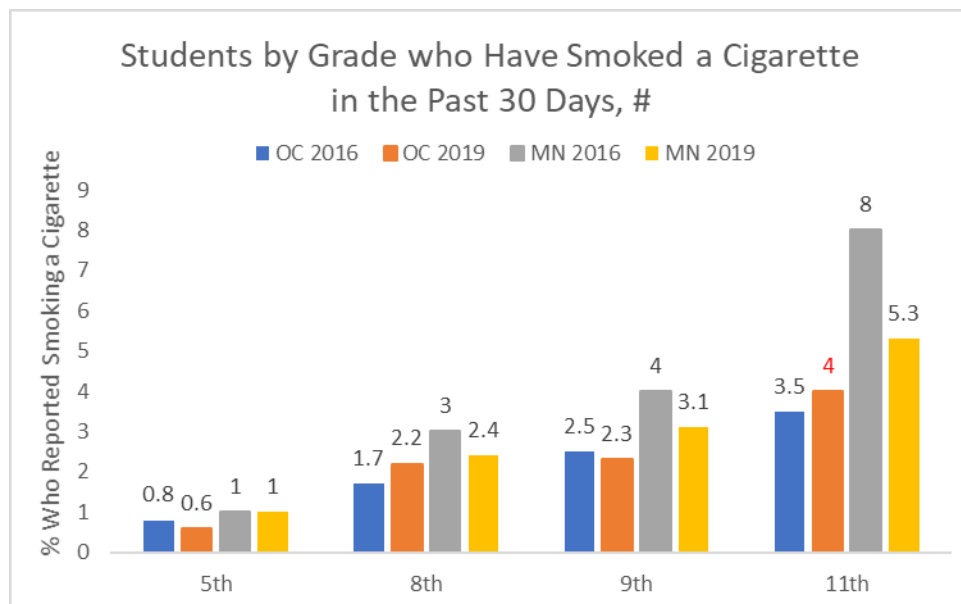
Cigarettes remain among the most frequently used tobacco product, especially among adults. According to the CHNA Community Survey, 9% of residents used cigarettes in 2015, and 4% of residents used the product in 2018. According to the 2018 convenience survey, 13% of residents used cigarettes.



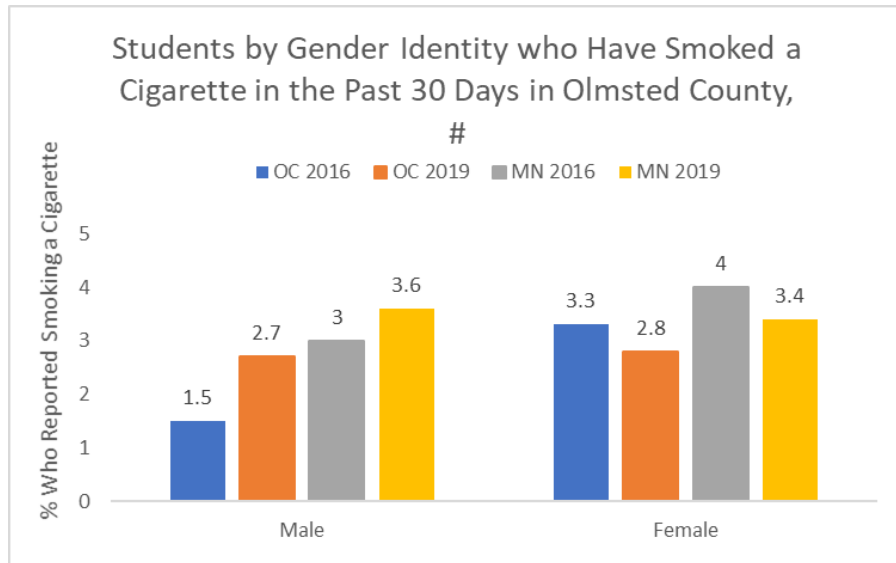
## Adolescents

The Minnesota Student Survey (MSS) shows overall cigarette use rates, and also reviews cigarette use by grade, race, and gender.

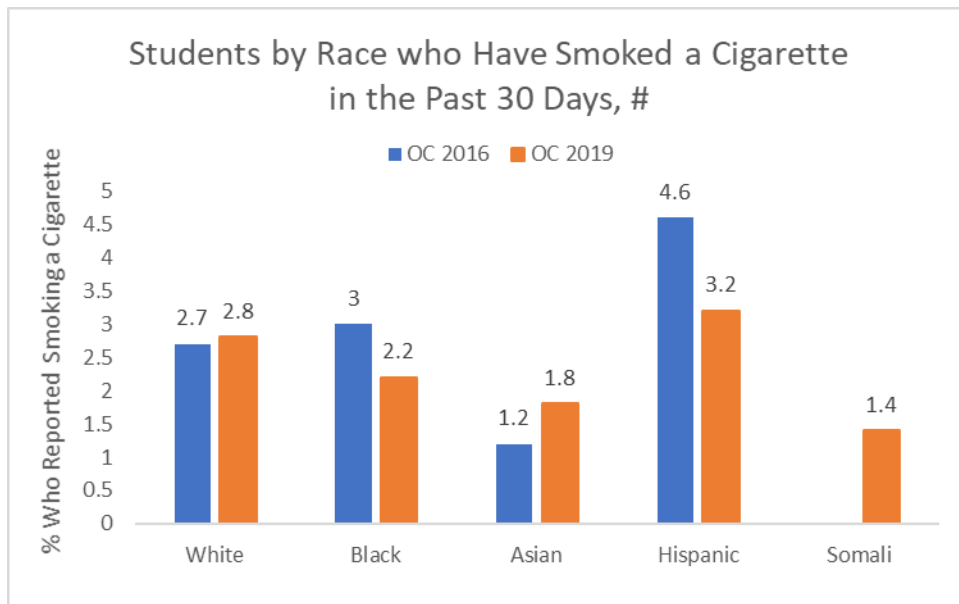
Olmsted County adolescents in the fifth, eighth, ninth, and eleventh grades consistently use cigarettes less than Minnesota adolescents. Additionally, the overall smoking rates tend to climb as adolescents move from middle to high school. In 2019, 2.3% of Olmsted County ninth graders smoked a cigarette in the past 30 days, compared to 4% of eleventh graders. This is slightly lower than Minnesota among those same age groups, at 3.1% and 5.3%, respectively.



The MSS also explores smoking a cigarette by gender identity. In 2019, adolescents who identify as male and female used cigarettes at an almost identical rate. There was a 80% change among adolescents who identify as male and smoked a cigarette between 2016 and 2019. Adolescents who identify as female smoking rates decreased slightly from 2016 to 2019.



The MSS breaks down students by race who have smoked a cigarette in the past 30 days. In 2019, 3.2% of Hispanic adolescents smoked at least one cigarette in the past 30 days, which is the most among all races. This is followed by white, Black, Asian, and Somali adolescents. There is no 2016 comparison for Somali adolescents. Hispanic and Black adolescents saw a reduction in smoking from 2016 to 2019, while white and Asian adolescents saw slight increases from 2016 to 2019.

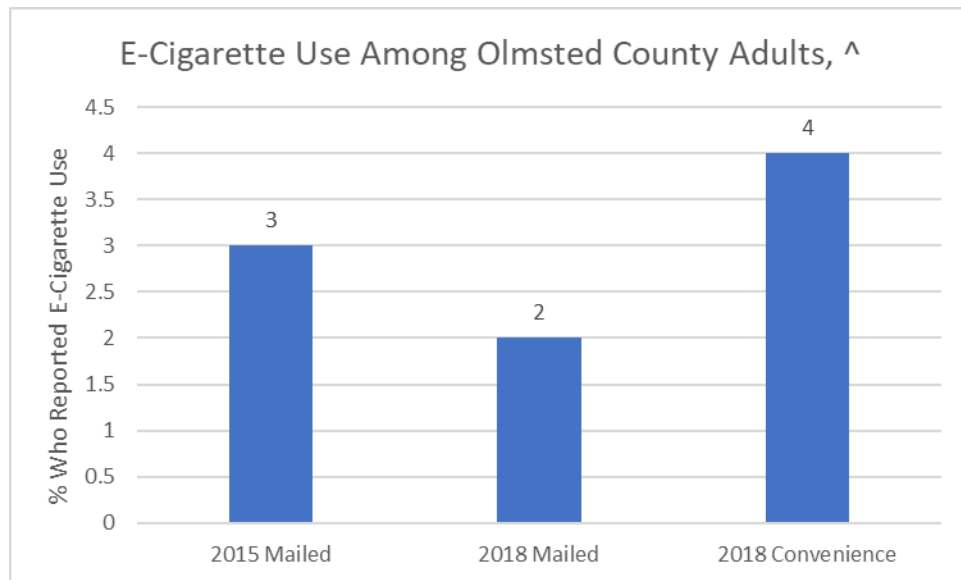


## E-Cigarettes

### Adults

Adults in Olmsted County do not use e-cigarettes as frequently as adolescents. Based on national research, this is due to individuals switching over to substances with more nicotine (such as cigarettes) after initiating e-cigarette use.

According to the CHNA Community Survey, 3% of residents used e-cigarettes in 2015, and 2% of residents used the product in 2018. According to the 2018 convenience survey, 4% of residents used e-cigarettes.



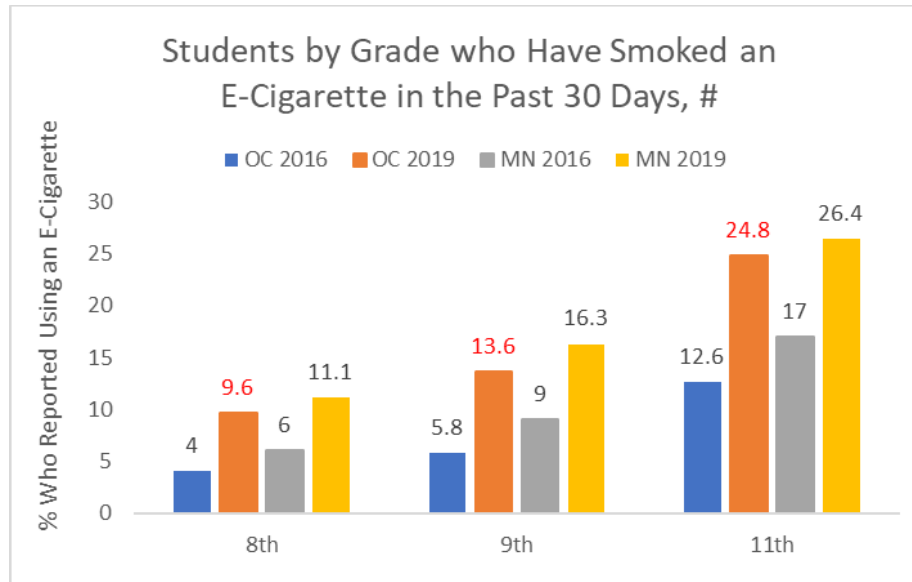
When comparing e-cigarette use among Olmsted County, Minnesota, and U.S. residents, according to the BRFSS, in 2017, 3.7% of Minnesota adult residents used e-cigarettes and 4.6% of U.S. adult residents used e-cigarettes.

### Adolescents

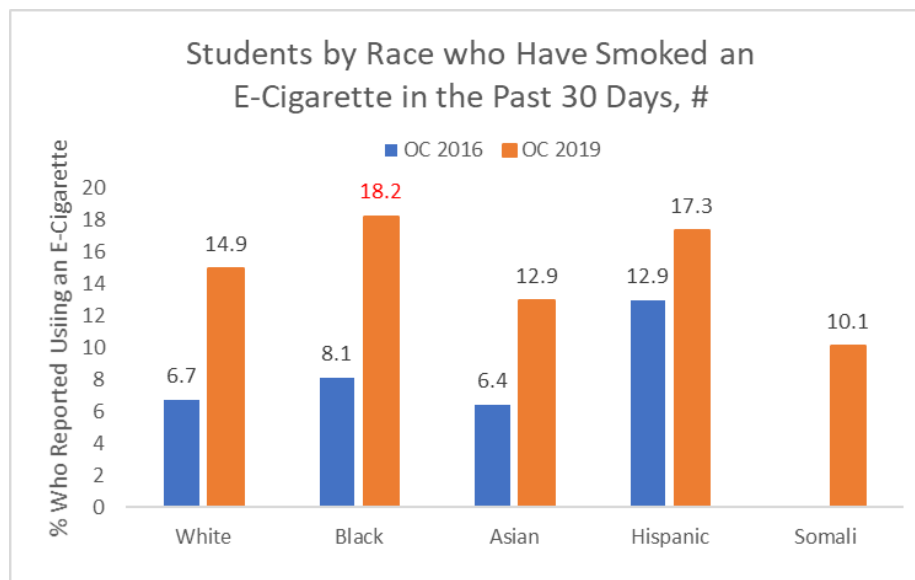
The use of e-cigarettes, or vaping, has been on the rise nationally over the last several years among adolescents.

There was a rise in e-cigarette use among adolescents in both Olmsted County and Minnesota between 2016 and 2019. Additionally, e-cigarette use increases as grade level increases. The 2019 rates of adolescents who have smoked an e-cigarette in the past 30 days locally and statewide are comparable. The 2019 Olmsted County adolescents rates of e-cigarette usage in all three grades shows a statistically significant increase compared to 2016. Also, the percent change of e-cigarette use has more than doubled among eighth, ninth, and eleventh graders in Olmsted County from 2016 to 2019.

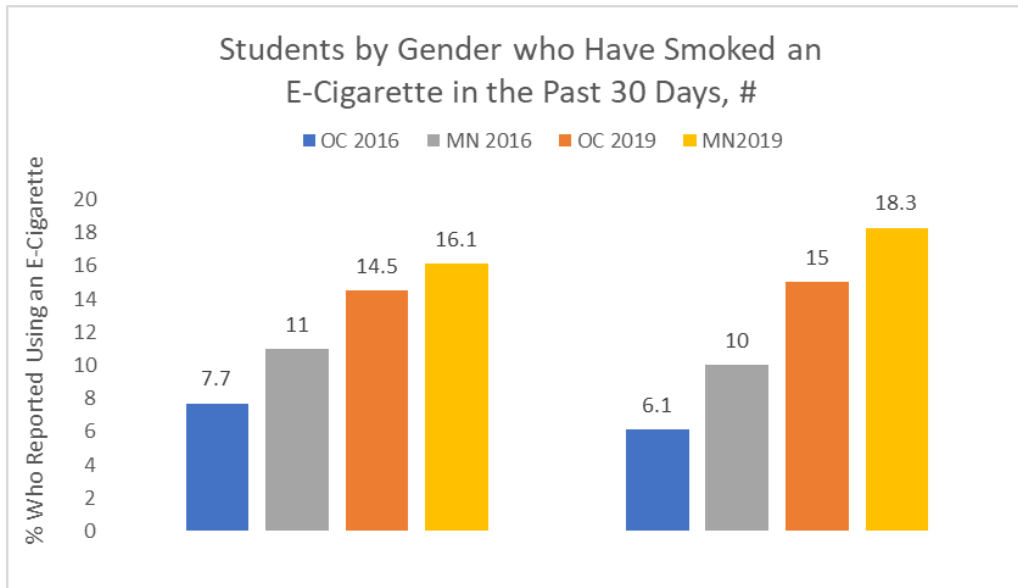




The rates of smoking an e-cigarette in the past 30 days has increased among White, Black, Asian, and Hispanic adolescents from 2016 to 2019. Black adolescents used e-cigarettes the most in 2019, followed by Hispanic, white, Asian, and Somali adolescents. Black adolescents' use in 2019 showed a statistically significant increase compared to 2016. There is no 2016 comparison for Somali adolescents.



Those who identify as male and female in Olmsted County used e-cigarettes almost identically in 2019. Minnesota adolescents who identify as male and female tend to use e-cigarettes slightly more frequently than in Olmsted County. As seen in the other tobacco use data, there was a large percent change in Olmsted County e-cigarette use by adolescents between 2016 and 2019. There is no 2016 comparison for Minnesota adolescents.

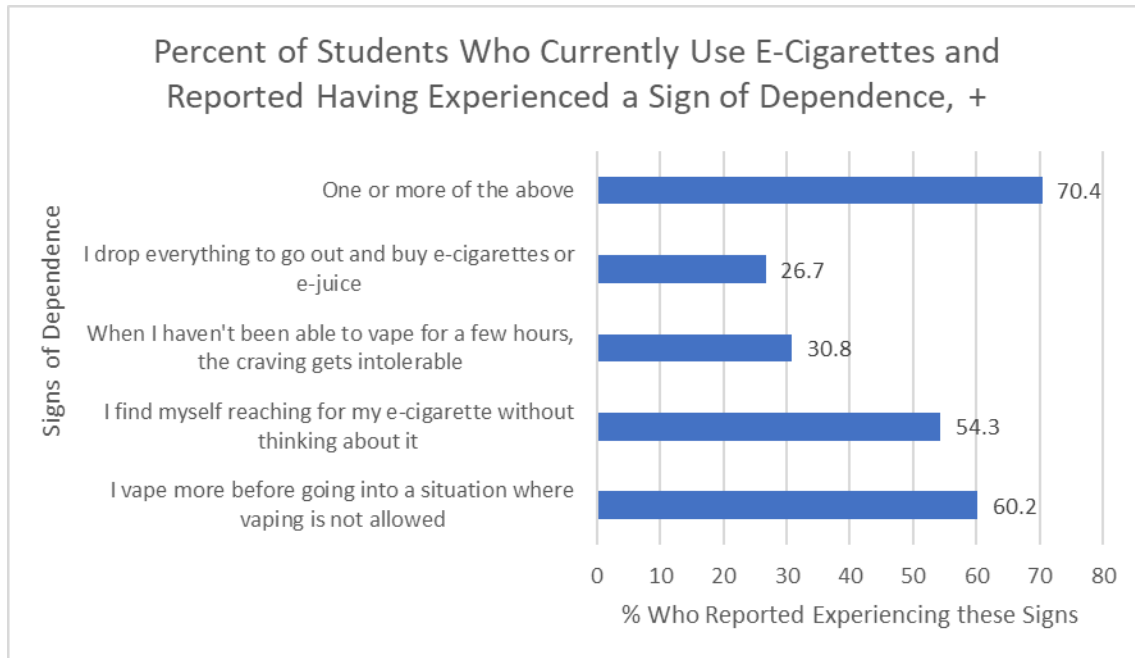


For those who have used an e-cigarette in the last 30 days, the most common ways of getting their product was through friends, followed by getting someone else to buy it for them and/or through the internet. Survey respondents were able to check multiple options.

*For Those Who Have Used an E-Cigarette in the Past 30 Days, How Did You Get It? +*

Reason	Percent Who Reported Getting E-Cigarettes This Way
Gas station or convenience store	4.7
Grocery, discount, or drug store	3.1
Internet	13.1
Vape shops or other stores that sell only e-cigs	9.6
Got from a friend	66.3
Got from my parents	44.3
Got from other family members	10.6
Got from someone I didn't know	5.5
Got from someone else to buy it for me	21.0
Took it from home	2.2
Took it from a friend's home	4.7
Took it from stores	1.8
Got it some other way	14.1

The Minnesota Department of Health's (MDH) Minnesota Youth Tobacco Survey (MYTS) asks students in Minnesota who currently use e-cigarettes if they have experienced dependence. Of these respondents, 70.4% of Minnesota students reported one or more of the responses relating to dependence.



## Health Disparities

### Adults

According to mailed 2018 Olmsted County Community Survey data, tobacco use disparities exist among certain subpopulations throughout Olmsted County. Specifically, those who are between 18 and 49 years old, are White, Non-Hispanic, identify as male, do not have children in the household, are born in the U.S., are not married, have no college education, report poor or fair overall health, own their home, and are financially stressed are significantly more likely to report any tobacco usage.

### *Tobacco Use, ^*

Age Group*	Percent Who Use Tobacco
18-34*	10.43
35-49*	9.93
50-64	6.12
65+	4.50
<b>Race*</b>	
White, NH	8.46
All Others	0.00
<b>Gender*</b>	
Male	12.36
Female	3.74
<b>Children HH*</b>	
Children	4.88
No	9.89
<b>US*</b>	
U.S. Born	8.38
Foreign Born	0.00
<b>Marital Status*</b>	
Married	6.28

Not Married	12.41
<b>Education*</b>	
No College	16.00
Any College	7.24
<b>Residence</b>	
Rochester	7.69
Non-Rochester (County)	9.47
<b>HH Income</b>	
<35K	8.33
35K+	8.40
<b>Health Status*</b>	
Poor-Fair	21.74
Good-Excellent	7.71
<b>Home Ownership*</b>	
Rent	4.05
Own	8.70
<b>Fin Stressed*</b>	
Financially Stressed	14.13
Not	4.79
<b>Retirement</b>	
Not Retired	9.11
Not	7.50

Examining tobacco use around the social determinants of health and the other two CHIP priorities indicates several connections. Specifically, those who are financially stressed, have any mental health problems, delay mental healthcare, and delay any healthcare are more likely to use tobacco.

*2018 Mailed Olmsted County Community Survey, ^*

<b>Financial Stress*</b>	<b>Any Tobacco Use</b>
No financial stress	30.6%
Financial stress	59.1%
<b>Mental Health*</b>	
No mental health problems	7.0%
Mental health problems	10.5%
<b>Access to Mental Healthcare*</b>	
Delay in care	13.5%
No delay in care	7.6%
<b>Access to Care</b>	
Delay in care	10.4%
No delay in care	7.2%

## Adolescents

For those who have smoked a cigarette in the past 30 days, Olmsted County adolescents who are not socially connected and who have mental health problems are statistically significantly more likely to use cigarettes.

*Minnesota Student Survey, #*

<b>Any Cigarette Use</b>	<b>Not Socially Connected*</b>
Use cigarettes	38.9%
Do not use cigarettes	10.1%
<b>Any Cigarette Use</b>	<b>Mental Health Problems*</b>
Use cigarettes	55.1%
Do not use cigarettes	22.2%

Looking specifically at e-cigarette usage, Olmsted County adolescents who are not socially connected, have mental health problems, and are on the National School Lunch Program are statistically significantly more likely to use e-cigarettes.

*Minnesota Student Survey, #*

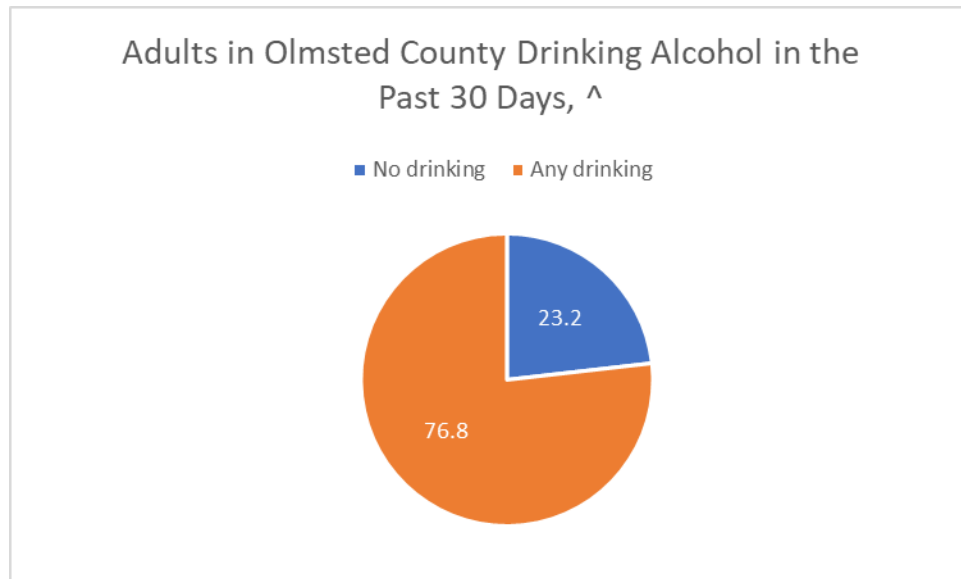
<b>Any E-Cigarette Use</b>	<b>Not Socially Connected*</b>
Use e-cigarettes	21.6%
Do not use e-cigarettes	9.0%
<b>Any E-Cigarette Use</b>	<b>Mental Health Problems*</b>
Use e-cigarettes	41.2%
Do not use e-cigarettes	20.0%
<b>Any E-Cigarette Use</b>	<b>National School Lunch Program*</b>
Use e-cigarettes	31.6%
Do not use e-cigarettes	21.6%

## Binge Drinking and Alcohol Use

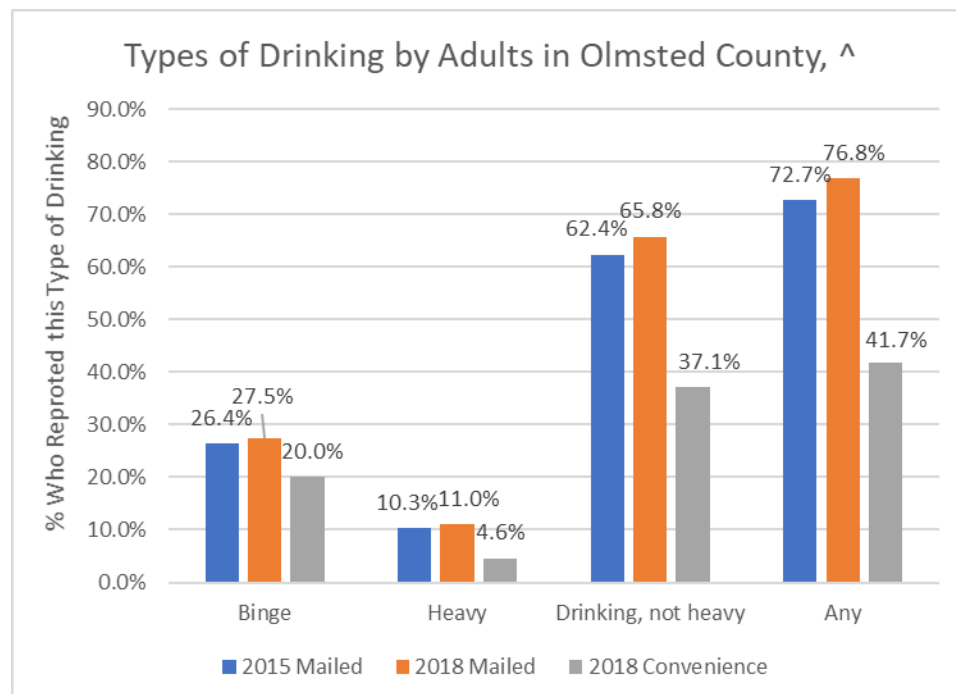
### Alcohol Use

Alcohol is the most frequently used substance among Olmsted County residents and adolescents.

According to the 2018 Olmsted County Community Survey, 76.8% of adults in Olmsted County drank any alcohol in the past 30 days.



The 2015 and 2018 Olmsted County Community Surveys dig deeper into alcohol use by looking at binge drinking, heavy drinking, drinking that is not considered heavy drinking, and any drinking. Any drinking occurs most often in Olmsted County, and heavy drinking occurs least often. The mean number of drinks consumed in the past 30 days was 20.27.

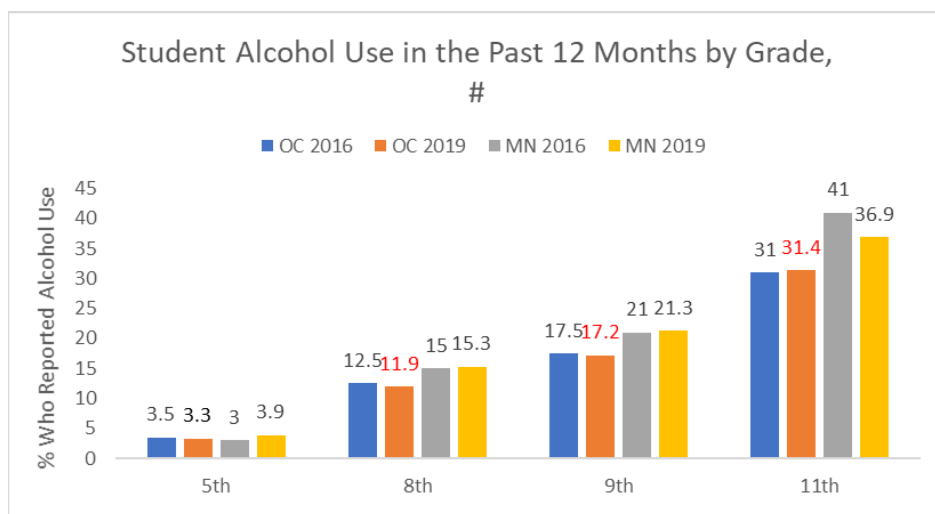


The MSS studies alcohol consumption among adolescents in a variety of ways, including any drinking in the past 30 days. The percent change for adolescents who drank alcohol in the past 30 days in Olmsted County increased from 2016 to 2019.

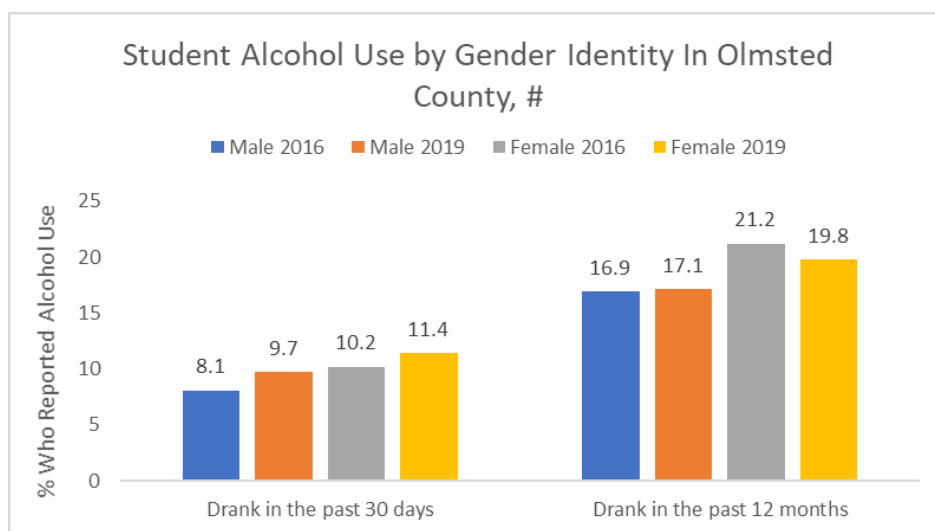
Also, the MSS looks at drinking in the past 12 months. The percent change of adolescents in Olmsted County who drank alcohol in the past 12 months decreased from 19.1% to 18.5%

The MSS further breaks down alcohol use by grade level, gender identity, and race.

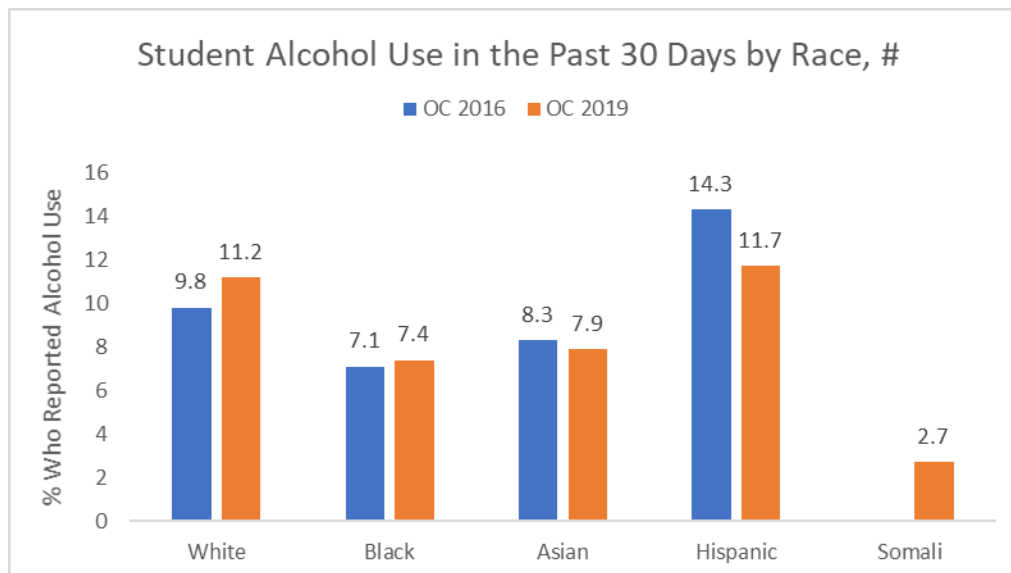
In Olmsted County and in Minnesota, alcohol use tends to increase with age. Olmsted County fifth graders use alcohol at a similar rate as Minnesota fifth graders. Eighth, ninth, and eleventh graders in Olmsted County consume alcohol at a rate that is consistently lower than the comparison group in Minnesota. However, by eleventh grade, nearly one in three Olmsted County adolescents have consumed alcohol in the past 12 months. 2019 rates in Olmsted County for eighth, ninth, and eleventh graders showed a statistically significant increase compared to 2016 rates.



In Olmsted County, adolescents who identify as female tend to consume alcohol more than those who identify as male.



By race, white and Hispanic adolescents tend to drink alcohol more frequently than Black, Asian, and Somali adolescents.



The MSS looks at how adolescents acquired alcohol. In 2019, Olmsted County adolescents report friends, parents, and parties as the most frequent ways of acquiring alcohol.

*For Those Who Have Used Alcohol in the Past 12 Months, How Did You Get It? +*

Reason	Percent Who Reported Getting Alcohol This Way
Gas station	2.0
Bar or restaurant	1.7
Store	3.1
Internet	2.8
Friends	35.1
Parents	22.4
Other family	12.7
Someone else bought it	18.7
My home	30.0
Friend's home	8.8
Took from store	3.0
Other	15.9

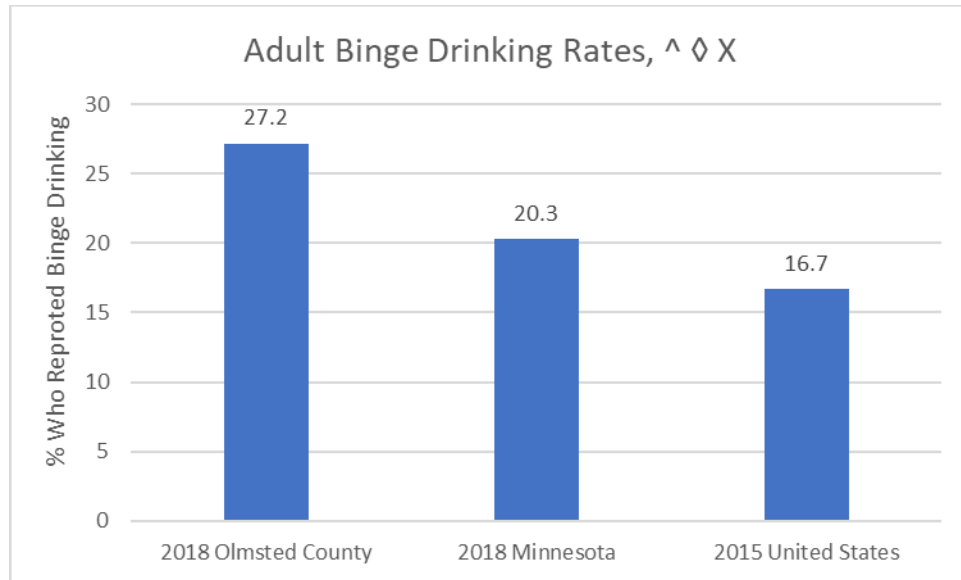
## Binge Drinking

### Adults

According to the 2018 Olmsted County Community Survey, binge drinking was defined as those who identify as female consuming four or more drinks of alcohol in a short period of time. For those who identify as male, it was five or more drinks of alcohol in a short period of time. In 2018, 27.2% of Olmsted County adults reported any binge drinking.

When comparing this rate to Minnesota, in 2018, according to MDH, 20.3% of adults reported binge drinking. Nationally, in 2015, 16.7% of adults reported binge drinking, according to the CDC.





## Adolescents

The MSS looks at youth binge drinking rates as well. In 2019, 4.1% of Olmsted County adolescents reported binge drinking, compared to 5.3% of Minnesota adolescents.

Similar to overall alcohol consumption rates, binge drinking rates increase by age. In 2019, 2% of eighth graders, 4.2% of ninth graders, and 7.7% of eleventh graders in Olmsted County reported binge drinking. This compared to 2.3% of eighth graders, 4.2% of ninth graders, and 10.6% of eleventh graders in Minnesota.

By race in 2019, White and Black adolescents binge drank most frequently at 4.3% and 4.0%, respectively. They are followed by Hispanic (3.2%), Asian (2.1%), and Somali (1.4%) adolescents.

Adolescents in Olmsted County who identify as male binge drank more often (4.6%) than those who identify as female (3.7%) in 2019. This is opposite of adolescents in Minnesota where those who identify as female (5.6%) binge drank more frequently than those who identify as male (4.9%).

## Health Disparities

### Adults

According to 2018 Olmsted County Community Survey data, binge drinking disparities exist among certain subpopulations throughout Olmsted County. Specifically, those who are between 18 and 49 years old, are White, Non-Hispanic, identify as male, are not married, have any college education, have a household income of \$35,000 or above, report good or excellent overall health, rent their home, are financially stressed, and are not retired are more likely to report any binge drinking.

### Binge Drinking, ^

Age Group	Any Binge Drinking
18-34	44.32
35-49	25.47
50-64	19.46
65+	8.11
Race	

White, NH	28.49
All Others	15.38
<b>Gender</b>	
Male	31.00
Female	24.41
<b>Children HH</b>	
Children	27.54
No	27.61
<b>US</b>	
U.S. Born	27.74
Foreign Born	25.00
<b>Marital Status</b>	
Married	25.60
Not Married	32.88
<b>Education</b>	
No College	16.00
Any College	28.74
<b>Residence</b>	
Rochester	27.18
Non-Rochester (County)	29.79
<b>HH Income</b>	
<35K	13.56
35K+	29.79
<b>Health Status</b>	
Poor-Fair	17.39
Good-Excellent	27.83
<b>Home Ownership</b>	
Rent	33.33
Own	26.53
<b>Fin Stressed</b>	
Financially Stressed	33.15
Not	25.07
<b>Retirement</b>	
Not Retired	31.40
Not	10.00

Examining binge drinking around the social determinants of health and the other two CHIP priorities indicates several connections. Specifically, those who are financially stressed, have some college education, feel safe, delay mental healthcare, delay any healthcare, participate in distracted driving, and feel unaccepted are more likely to binge drink. Financial stress, education, distracted driving, and feeling unaccepted showed a statistical significance.

*2018 Mailed Olmsted County Community Survey, ^*

<b>Financial Stress*</b>	<b>Any Binge Drinking</b>
No financial stress	33.2%
Financial stress	25.1%
<b>Education*</b>	

No college	16.0%
Any college	28.7%
<b>Safety</b>	
Do not feel safe	23.1%
Feel safe	30.8%
<b>Access to Mental Healthcare</b>	
Delay in care	39.5%
No delay in care	26.6%
<b>Access to Care</b>	
Delay in care	36.1%
No delay in care	24.3%
<b>Distracted Driving*</b>	
Participate in distracted driving	31.1%
Do not participate	17.5%
<b>Unaccepted*</b>	
Feel unaccepted	33.5%
Do not feel unaccepted	22.1%

### Adolescents

The MSS also points out disparities among alcohol consumption and binge drinking among adolescents. Adolescents who do not feel socially connected and are not socially connected were statistically significantly more likely to drink any alcohol.

#### *Minnesota Student Survey, #*

<b>Any Drinking</b>	<b>Not Socially Connected*</b>
Any drinking in the last 30 days	26.4%
Did not drink in the last 30 days	9.1%
<b>Any Drinking</b>	<b>Mental Health Problems*</b>
Any drinking in the last 30 days	44.3%
Did not drink in the last 30 days	20.7%

The same disparities are seen among Olmsted County adolescent binge drinking rates as well.

#### *Minnesota Student Survey, #*

<b>Binge Drinking</b>	<b>Not Socially Connected*</b>
Any binge drinking	34.3%
Do not binge drink	9.9%
<b>Any Binge Drinking</b>	<b>Mental Health Problems*</b>
Any binge drinking	44.5%
Do not binge drink	22.1%

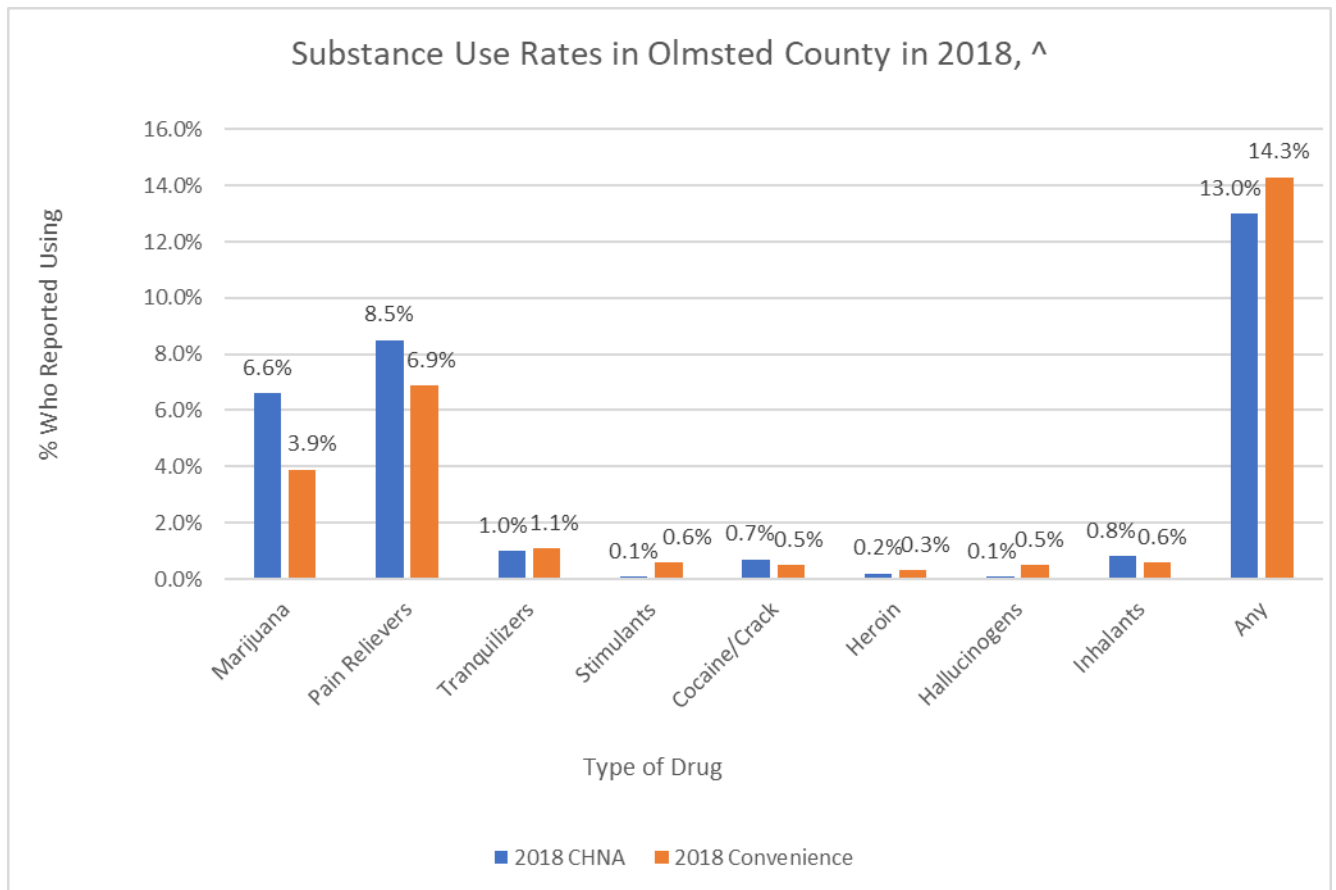
## Other Drug Use

### Overall

#### Adults

A variety of substances are included in drug use: marijuana/hashish, inhalants, LSD, PCP, or other psychedelics, Ecstasy/MDMA, GHB, Ketamine, crack/coke/cocaine, heroin, methamphetamine, over-the-counter drugs, synthetic marijuana, synthetic drugs, prescription drugs, and opioids. This section summarizes those in Minnesota and in Olmsted County who have used any of the aforementioned substances.

The 2018 Olmsted County Community Survey asks respondents specifically about drug use other than alcohol and tobacco, including marijuana, pain relievers, tranquilizers, stimulants, cocaine/crack, heroin, hallucinogens, and inhalants. 14% of respondents reported using some type of drug, 12% reported a single type, and 2% reported more than one type. The most commonly used substances were prescription opioids and marijuana.

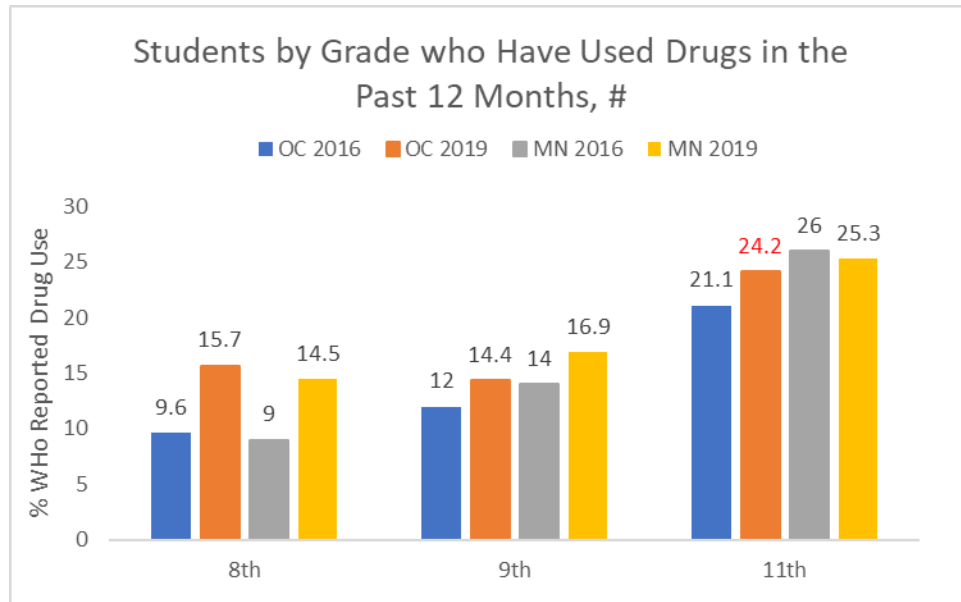


When comparing nationally, according to the CDC, in 2018, 11.7% of citizens 12 and older reported using illicit substances.

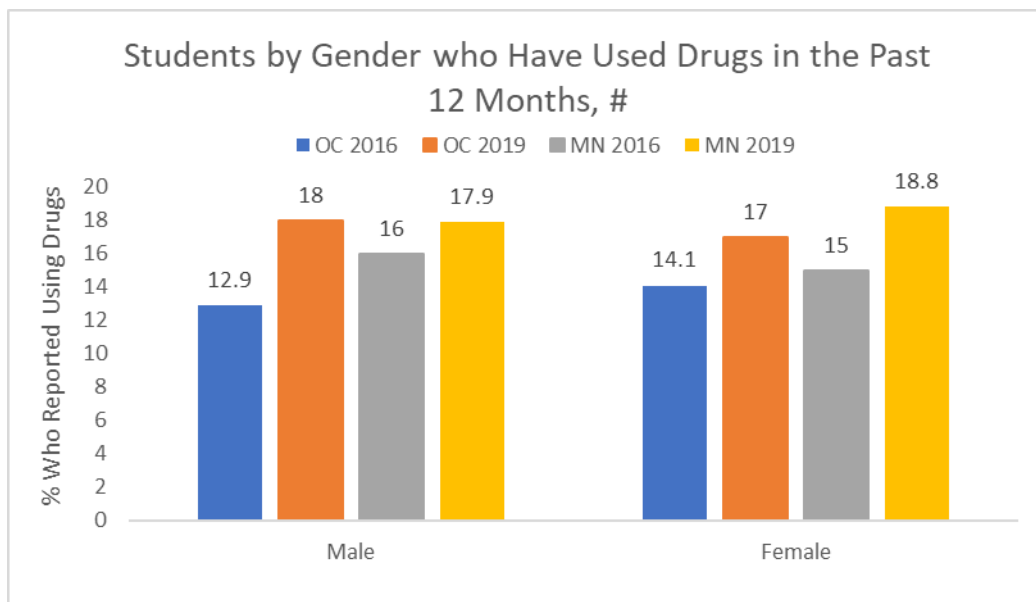
According to Minnesota DHS, statewide, in 2015, 4.8% of Minnesota adults reported using any marijuana in the past 30 days. In 2010, the most recent state data, 2.4% of adults reported using prescription pain relievers not prescribed for them by their doctor within the past 12 months.

## Adolescents

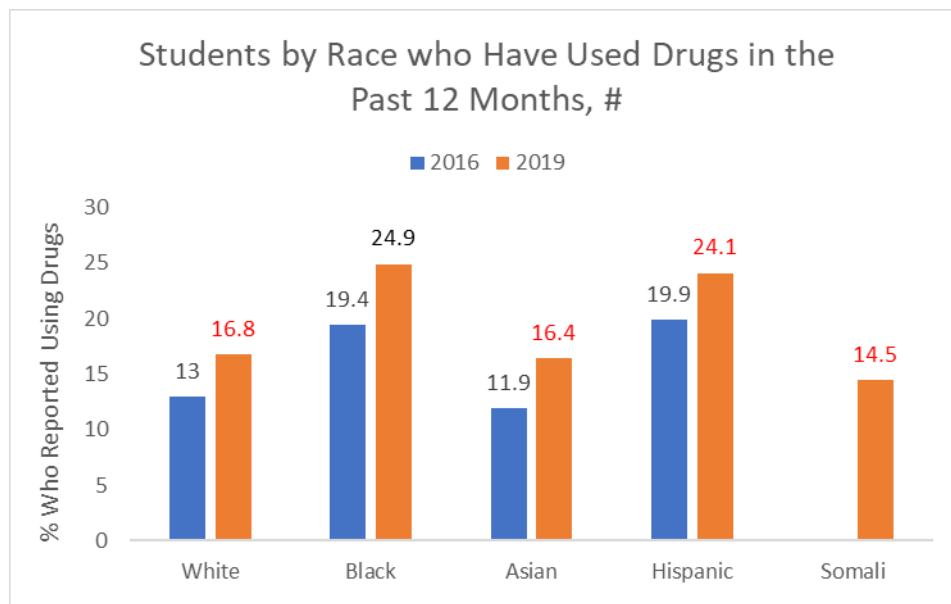
Drug use rates tend to increase with age. In 2019, 15.7% of eighth graders, 14.4% of ninth graders, and 24.2% of eleventh graders in Olmsted County used drugs in the past 12 months. This compared to 14.5% of eighth graders, 16.9% of ninth graders, and 25.3% of eleventh graders in Minnesota. 2016 Minnesota data is not available.



The rate of drug years varies by gender identity. In 2016, those who identify as female used drugs more often than those who identify as male and this switched in 2019.



Drug use rates by race has increased among Olmsted County adolescents between 2016 and 2019. In 2019, black adolescents used drugs the most, followed by Hispanic, white, Asian, and Somali adolescents. 2019 rates for White, Asian, Hispanic, and Somali adolescents showed a statistically significant increase compared to 2016.



The MSS looks at how alcohol or drugs have impacted adolescents' lives. In 2016, 3.1% of Olmsted County adolescents say that alcohol or drug use has impacted their relationships social activities, school, or work in the past 12 months. In 2019, this rate rose slightly among Olmsted County adolescents (4.6%) and compared with Minnesota adolescents (4.7%).

In 2016, 3.2% of Olmsted County adolescents report that alcohol or drugs have left them feeling depressed. This rate rose in 2019 to 4.6%, and was slightly less than the Minnesota rate (5.1%).

## Marijuana

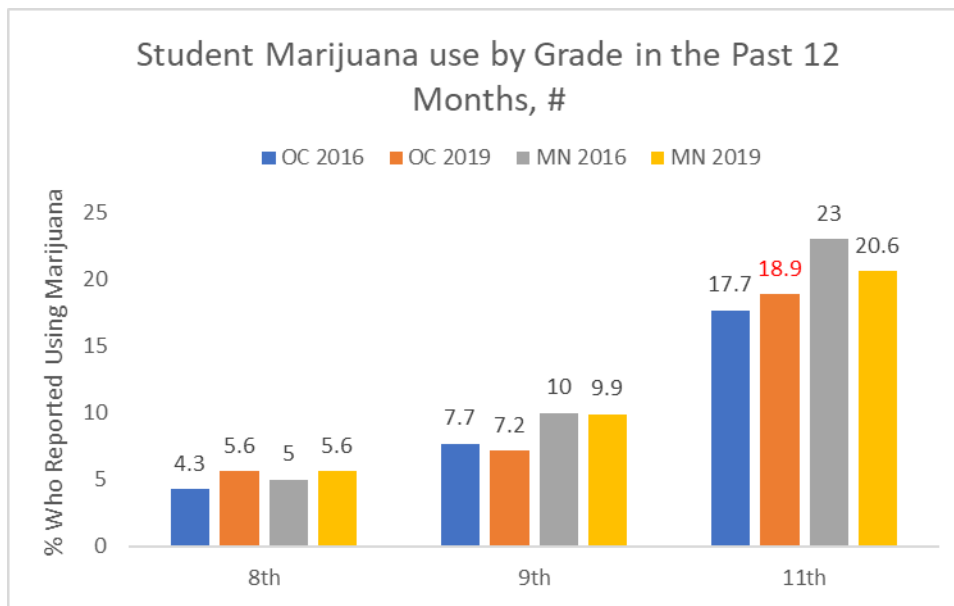
### Adults

The 2018 Olmsted County Community Survey shows that marijuana is the second most commonly used drug among adults in Olmsted County. 6.6% of respondents reported using marijuana at least one time in the past 30 days. According to the 2018 Olmsted County Convenience Survey, 3.9% of respondents reported using marijuana in the past 30 days.

### Adolescents

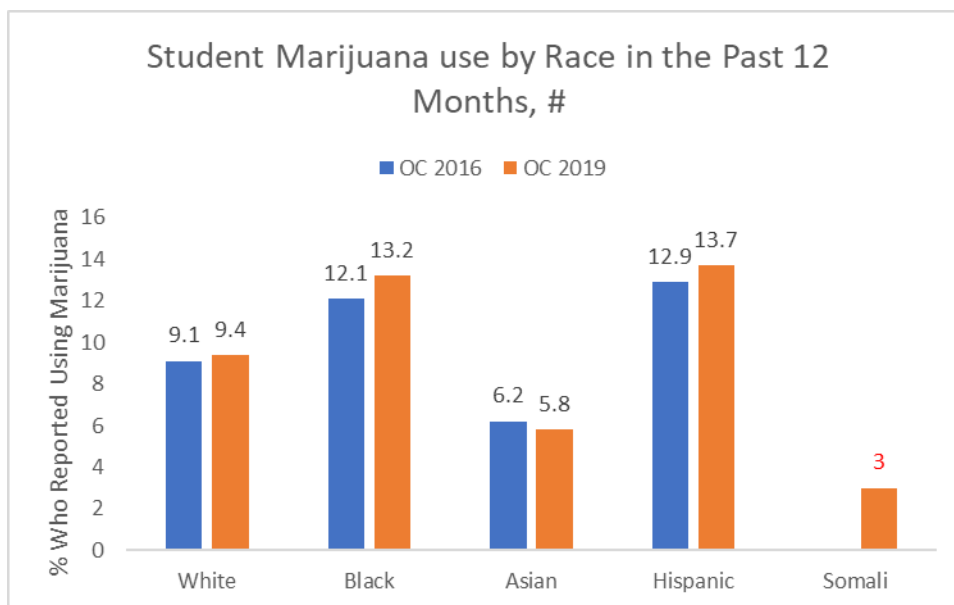
Marijuana was the most common type of drug used for Olmsted County adolescents. In 2016, 9% of Olmsted County adolescents reported using marijuana in the past 12 months. In 2019, 9.5% of adolescents reported using marijuana, compared to Minnesota's 2019 rate of 11.6%.

Similar to other substances described previously, marijuana use increases with grade level and age. The rates for Olmsted County adolescents are similar to Minnesota adolescents in both 2016 and 2019.



Olmsted County adolescents who identify as male and female use marijuana at a nearly identical rate. In 2016, 8.6% of those who identify as male used marijuana, compared to 9.5% of those who identify as female. In 2019, 9.8% of those who identify as male used marijuana in the past 12 months, compared to 9.2% of those who identify as female.

Adolescents that are Black or Hispanic use marijuana more frequently than other races. In 2019, Olmsted County Hispanic adolescents used marijuana the most at 13.7%, followed by Black (13.2%), white (9.4%), Asian (5.8%), and Somali (3%) adolescents. Marijuana use increased by all races, except for Asian, between 2016 and 2019.



The MYTS also asked youth around vaping marijuana/THC, in lieu of the substances and chemicals included in e-cigarette vape. Vaping marijuana and THC has risen nationally, and Minnesota is no exception. In 2017, 15.5% of middle schoolers and 33.4% of high schoolers in Minnesota who use e-cigarettes reported using an e-cigarette device to vape marijuana/THC. In 2020, the numbers increased to 71.7% of middle schoolers and 65.1% of high schoolers.

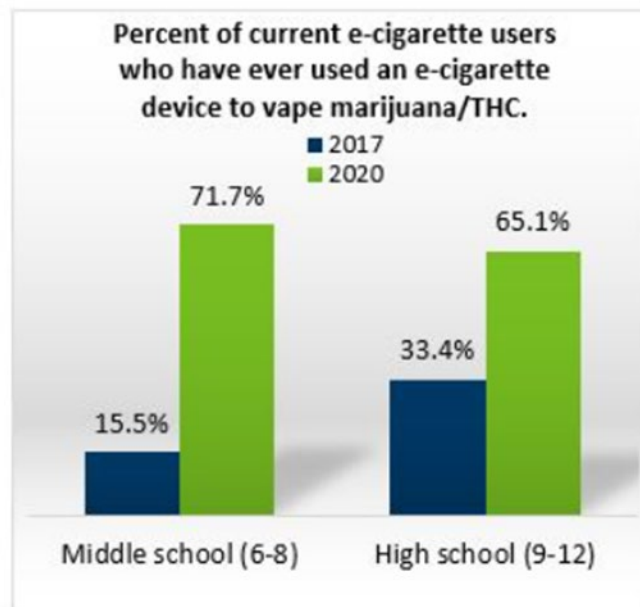


Figure 2 source: Minnesota Youth Tobacco Survey, 2017-2020.

*Minnesota Youth Tobacco Survey, 2021, +*

## Opioids

### Adults

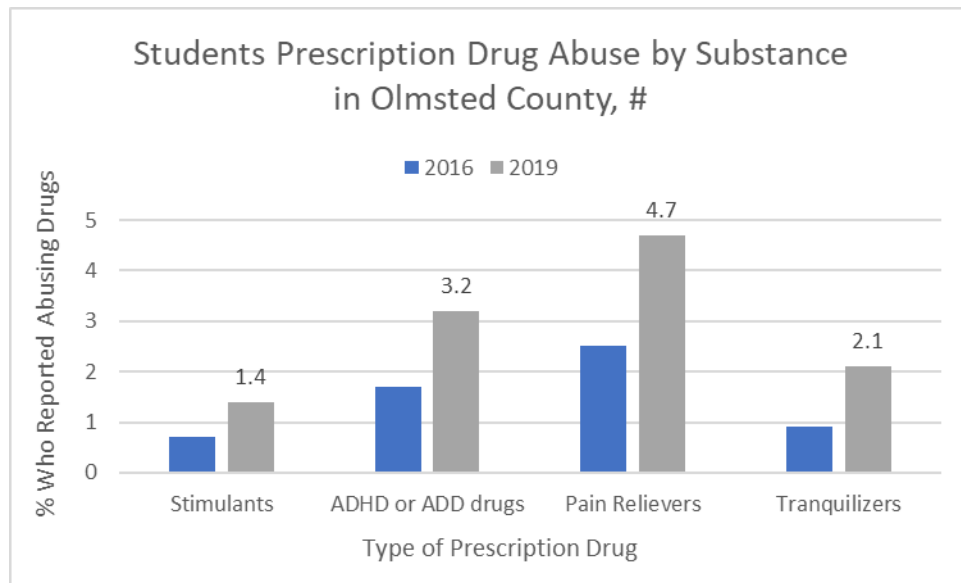
The CHNA looks at two opioids: pain relievers and heroin. For pain relievers, the survey specifically asks about misusing the drug other than what their doctor had directed them for use. According to the 2018 Olmsted County Community Survey, 8.5% of adult respondents reported misusing pain relievers, and 0.2% used heroin. The 2018 Olmsted County Convenience Survey shows that 6.9% of respondents reported misusing pain relievers, and 0.3% used heroin.



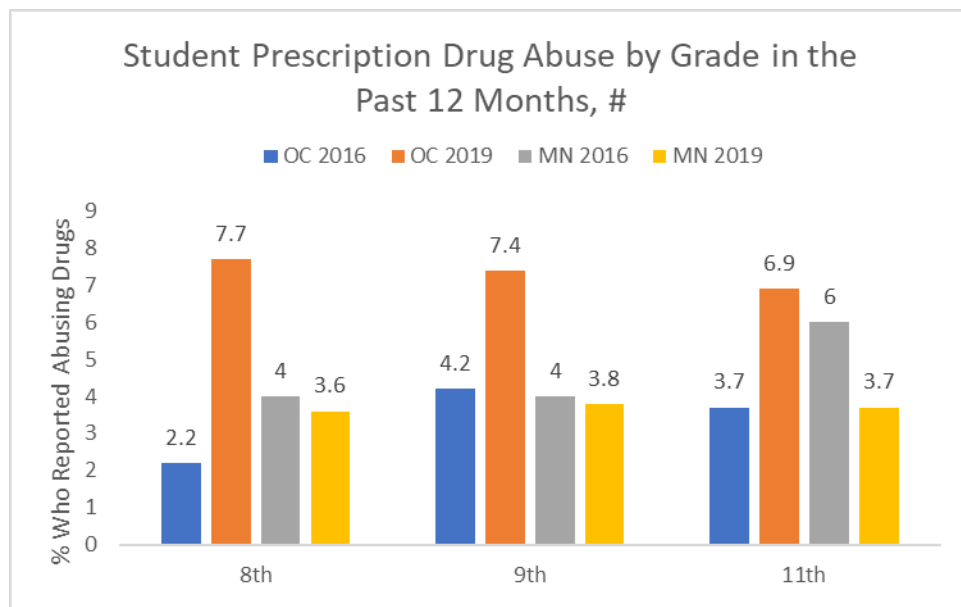
## Adolescents

For a youth perspective, according to the MSS, in 2019, 7.2% of Olmsted County adolescents reported abusing a prescription drug in the past 12 months, compared to 6.1% of Minnesota adolescents. Pain relievers were the second most used substance, behind marijuana, in Olmsted County, followed by ADHD/ADD drugs, tranquilizers, and stimulants. All of these rates increased from 2016 to 2019.

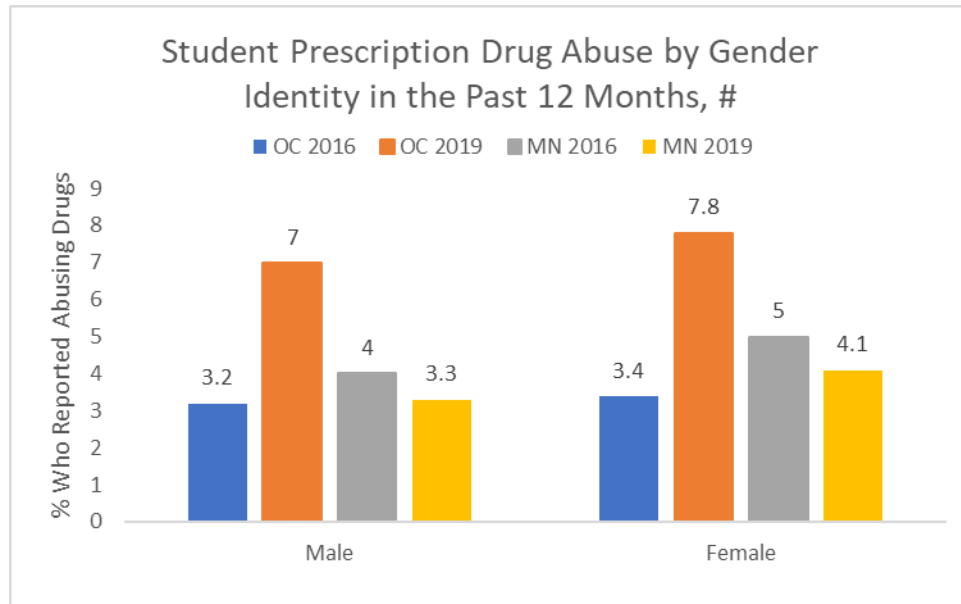
The rates are comparable with Minnesota adolescents' rates of abusing ADHD/ADD drugs (3%), tranquilizers (2%), and stimulants (1%)



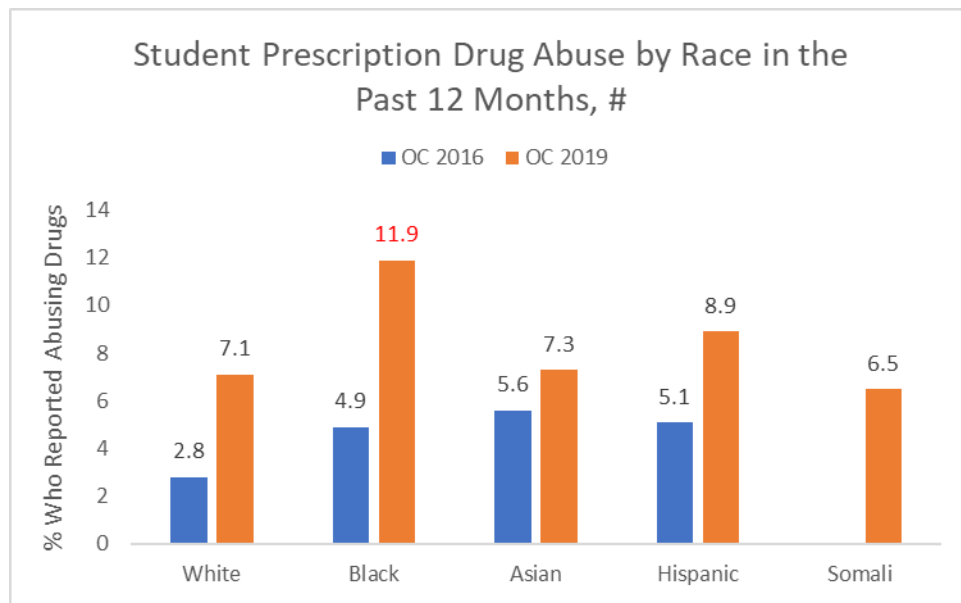
There was a large increase in prescription drug abuse between 2016 and 2019 among adolescents in Olmsted County. This rise was consistent among all grades surveyed. All of the 2019 Olmsted County adolescent rates were higher than Minnesota adolescents' 2019 rates.



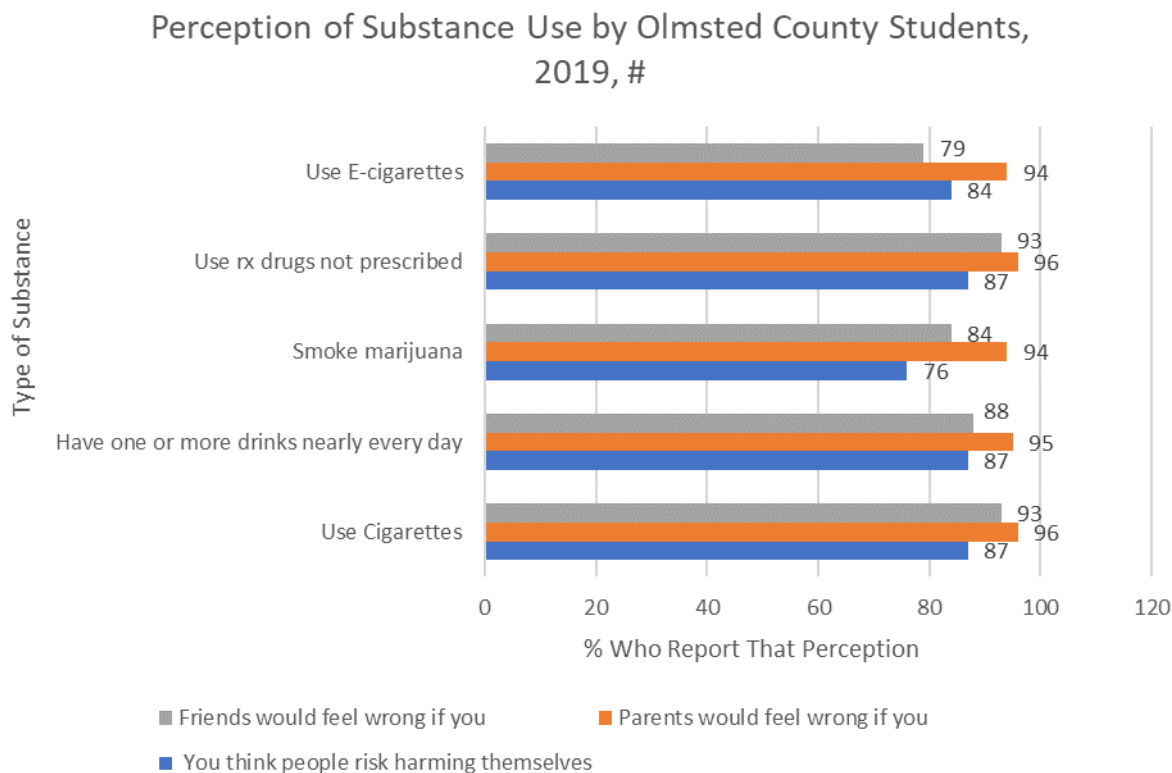
In Olmsted County, there is not much difference in prescription drug abuse rates by gender identity. In 2016, 3.2% of Olmsted County adolescents who identify as male reported abusing a prescription drug in the past 12 months, compared to 3.4% of adolescents who identify as female. In 2019, these Olmsted County numbers increased; 7% of those who identify as male reported abusing a prescription drug in the past 12 months, compared to 7.8% of adolescents who identify as female.



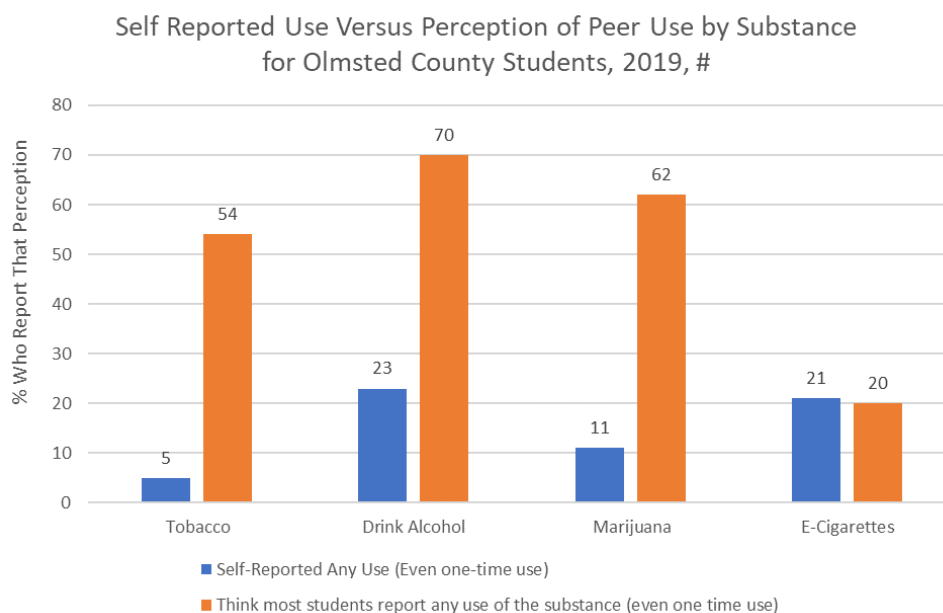
There are disparities among prescription drug abuse by race. Black and Hispanic adolescents tend to abuse prescription drugs at a higher rate, followed by Asian, white, and Somali adolescents. Black adolescents' rate in 2019 showed a statistically significant increase compared to 2016.



The Minnesota Student Survey looks at adolescents' perception of substance use. It considers how wrong their friends or parents feel substance use is and the risks associated with using. A majority of Olmsted County adolescents reported a high risk and wrongness for each substance.

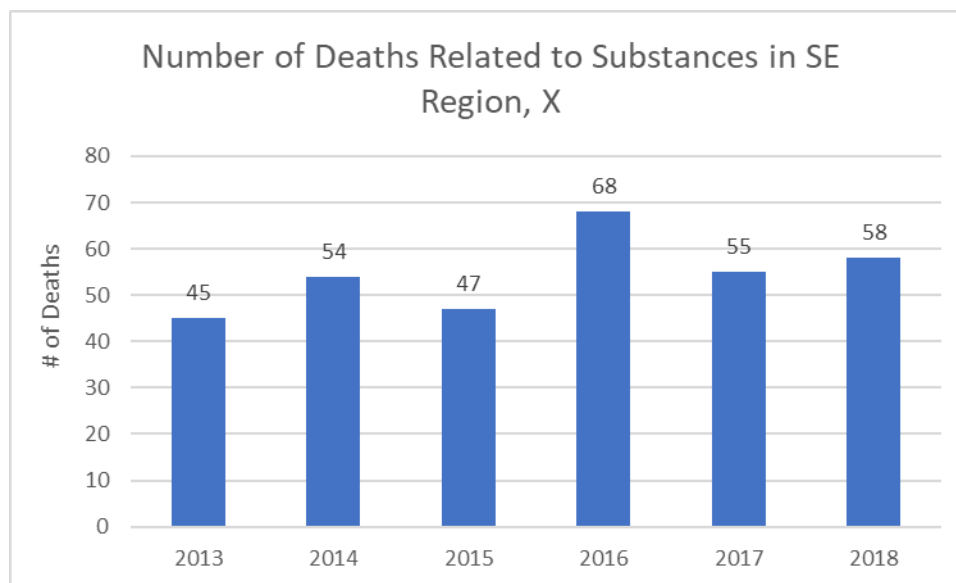


When comparing these perceptions with actual use, adolescents still use substances. Additionally, according to the MSS, adolescents feel their peers use substances more than they report.

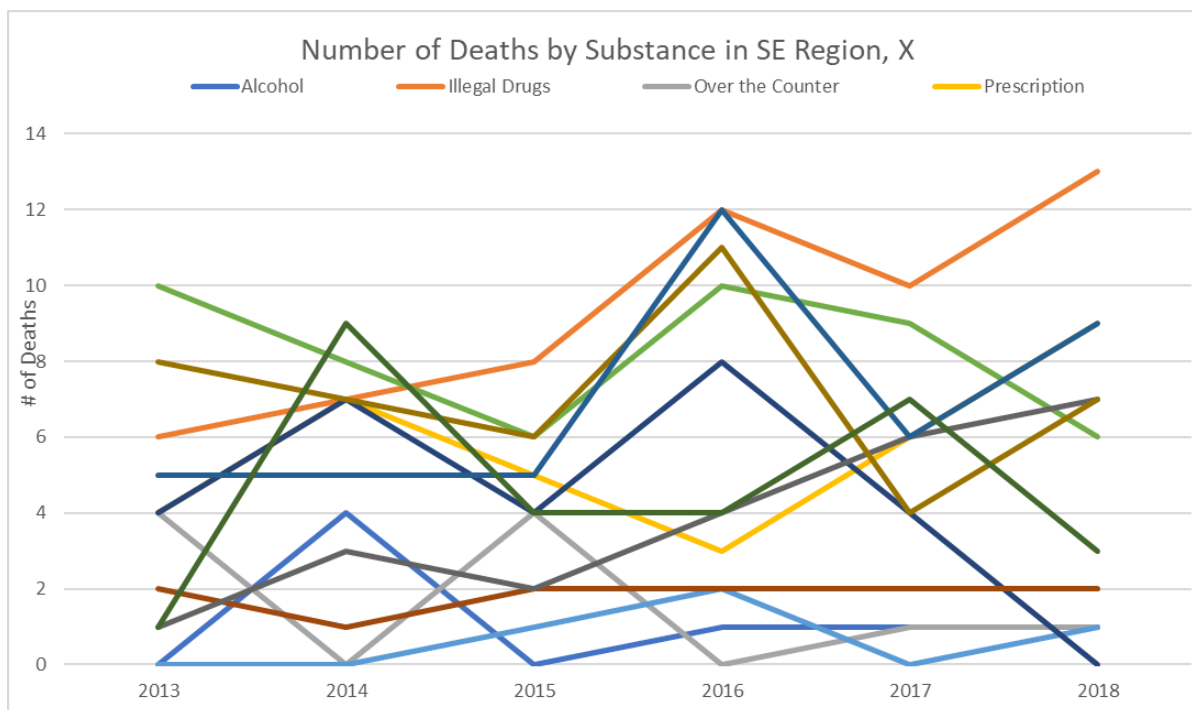


## Deaths Associated with Drugs

MDH medical examiner data reviews deaths associated with various drugs in Southeastern Minnesota. Looking at deaths by suicide in the SE Minnesota region in 2018, 15% of those who died by suicide were by poison or drugs. The rates from 2013 to 2017 varied: 2013 (29%), 2014 (5%), 2015 (27%), 2016 (12%), and 2017 (13%).



The Medical Examiner data looks at specific substances associated with these deaths. Illegal drugs, prescriptions, mixed substances, benzo, fentanyl, heroin, meth, and opioids are among the most frequent substances associated with deaths regionally.



## Health Disparities

### Adults

According to the 2018 Olmsted County Community Survey data, drug use disparities exist among certain subpopulations throughout Olmsted County. Specifically, those who are between 18 and 34 years old, are White, Non-Hispanic, identify as male, are not married, have no college education, have a household income of \$35,000 or less, report poor or fair overall health, rent their home, and are financially stressed are more likely to report any drug use. Of these factors, race, gender identity, marital status, education, household income, poor health status, renting, and financial stress were statistically significant.

### *Drug Use, ^*

Age Group	Any Drug Use
18-34	19.33
35-49	12.67
50-64	12.08
65+	14.16
<b>Race*</b>	
White, NH	15.21
All Others	2.50
<b>Gender*</b>	
Male	16.91
Female	12.12
<b>Children HH</b>	
Children	14.35
No	14.57
<b>US</b>	
U.S. Born	14.47
Foreign Born	11.43
<b>Marital Status*</b>	
Married	12.35
Not Married	20.41
<b>Education*</b>	
No College	18.00
Any College	14.12
<b>Residence</b>	
Rochester	14.14
Non-Rochester (County)	14.74
<b>HH Income*</b>	
<35K	18.64
35K+	13.87
<b>Health Status*</b>	
Poor-Fair	17.39
Good-Excellent	14.29
<b>Home Ownership*</b>	
Rent	18.67
Own	13.24
<b>Fin Stressed*</b>	
Financially Stressed	20.65

Not	11.29
<b>Retirement</b>	
Not Retired	15.84
Not	14.13

Examining drug use around the social determinants of health and the other two CHIP priorities indicates several connections. Specifically, those who are financially stressed, have mental health problems, delay mental healthcare, delay healthcare, and feel unaccepted are statistically significantly more likely to use drugs.

*2018 Mailed CHNA Community Survey, ^*

<b>Financial Stress*</b>	<b>Any Drug Use</b>
No financial stress	11.3%
Financial stress	20.7%
No mental health problems	11.4%
Mental health problems	21.6%
<b>Access to Mental Healthcare*</b>	
Delay in care	26.3%
No delay in care	13.4%
<b>Access to Care*</b>	
Delay in care	20.0%
No delay in care	11.8%
<b>Unaccepted*</b>	
Feel unaccepted	21.7%
Do not feel unaccepted	10.8%

## Adolescents

The MSS also points out disparities for adolescents who use any drugs. Adolescents who are not socially connected, have mental health problems, participate in the National School Lunch Program, and identify as LGBT are statistically significantly more likely to use drugs.

*Minnesota Student Survey, #*

<b>Drug Use</b>	<b>Not Socially Connected*</b>
Use any drugs	23.5%
Do not use any drugs	8.2%
<b>Drug Use</b>	<b>Mental Health Problems*</b>
Use any drugs	41.3%
Do not use any drugs	19.6%
<b>Drug Use</b>	<b>National School Lunch Program*</b>
Use any drugs	31.9%
Do not use any drugs	20.7%
<b>Drug Use</b>	<b>Identify as LGBT</b>
Use any drugs	23.2%
Do not use any drugs	18.1%

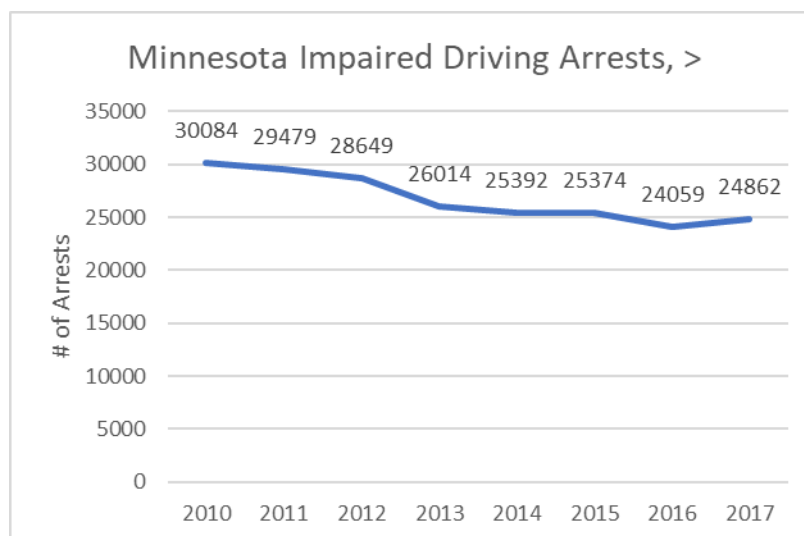
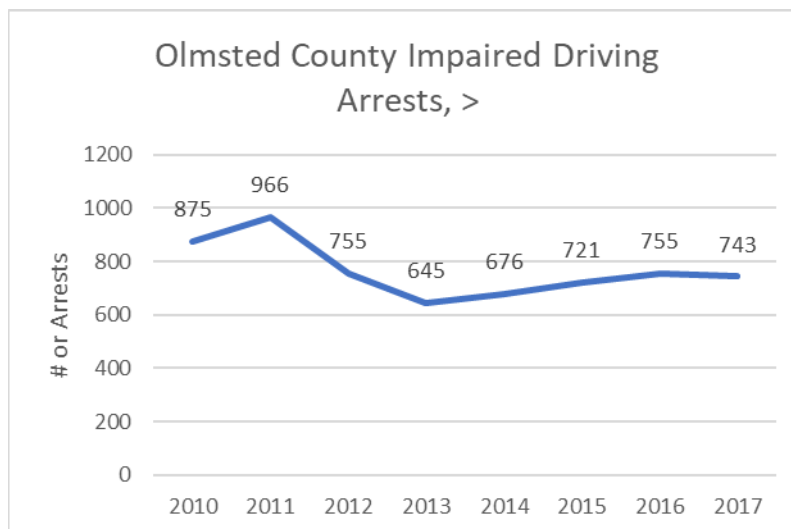
## Substance Use Other Factors

There are a variety of other influencers, beyond usage rates, that tell the story around substance use. This section highlights those other factors, which include alcohol impaired driving, overdoses, treatment, prescribing trends, law enforcement involvement and crime rates, and the pandemic's impact on substance use.

### Alcohol Impaired Driving

Impaired driving is when an individual's ability to drive is reduced due to the use of a substance. Specifically, the Minnesota Department of Public Safety explores data related to alcohol consumption.

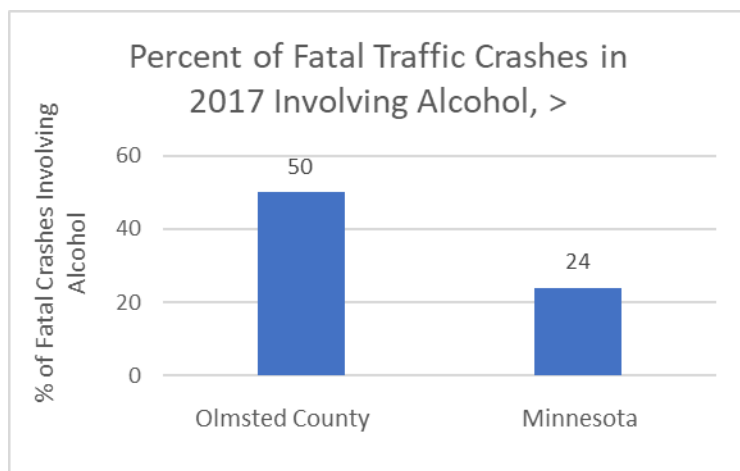
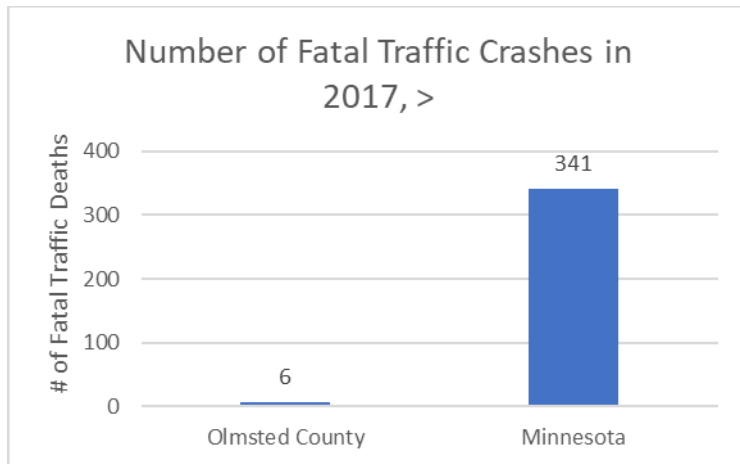
The arrests associated with impaired driving has decreased both statewide and in Olmsted County. According to the Minnesota Department of Public Safety, between 2010 and 2017, the number of impaired driving arrests in Olmsted County decreased from 875 to 743. This is a 17.8% change. Statewide, there were 30,084 arrests in 2010 and 24,862 in 2017: a 21% change.



The Minnesota Department of Public Safety also looks at motor vehicle accident deaths related to alcohol use. Between 2014 and 2018, motor vehicle accidents caused 208 serious injuries in Olmsted County. Among these serious injuries, 39 involved any alcohol. This means that 18.8% of serious injuries from car accidents in Olmsted County between 2014 and 2018 were alcohol related. This is slightly less than Minnesota, where 21.6% of serious injuries involved alcohol.

According to the Minnesota Department of Public Safety, between 2014 and 2018, there were 47 fatalities associated with motor vehicle accidents in Olmsted County. Of these fatalities, seven involved blood alcohol content (BAC) at 0.08 or above, meaning 14.9% of car accident fatalities in Olmsted County between 2014 and 2018 involved BAC of 0.08 or above. This is less than Minnesota, whereas 24.6% of car accident fatalities in Olmsted County between 2014 and 2018 involved BAC at 0.08 plus.

Additionally, there were six fatal traffic crashes in Olmsted County in 2017; 50% of these crashes involved alcohol. Of the total crashes in Olmsted County in 2017, 5% involved alcohol. Compared to the entire state, 24% of these crashes involved alcohol. Of the total crashes in Minnesota, 5.6% involved alcohol.



The Minnesota Department of Public Safety records DWIs, driving while intoxicated. In 2018, in Olmsted County, there was 848 DWI offenses. In Minnesota as a whole, there were 26,315 offenses.

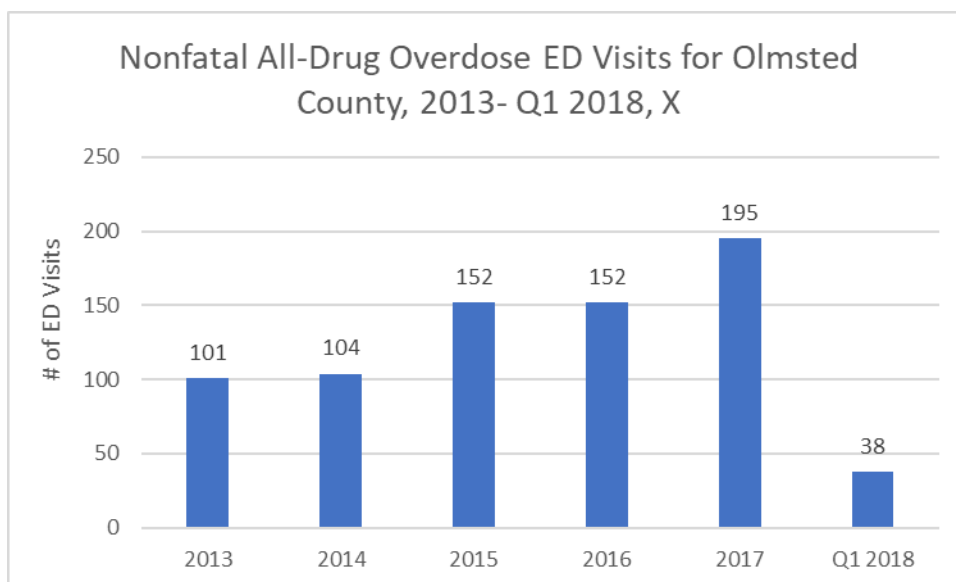


The MSS asks about drinking and driving rates among adolescents. In 2016, 3.6% of adolescents in Olmsted County reported drinking and driving in the past 12 months; this rate increased slightly to 3.9% in 2019. Compared to Minnesota, 3.7% of adolescents reported drinking and driving in the past 12 months in 2019. The 2016 Minnesota adolescent drinking and driving rate is unavailable.

## Overdoses

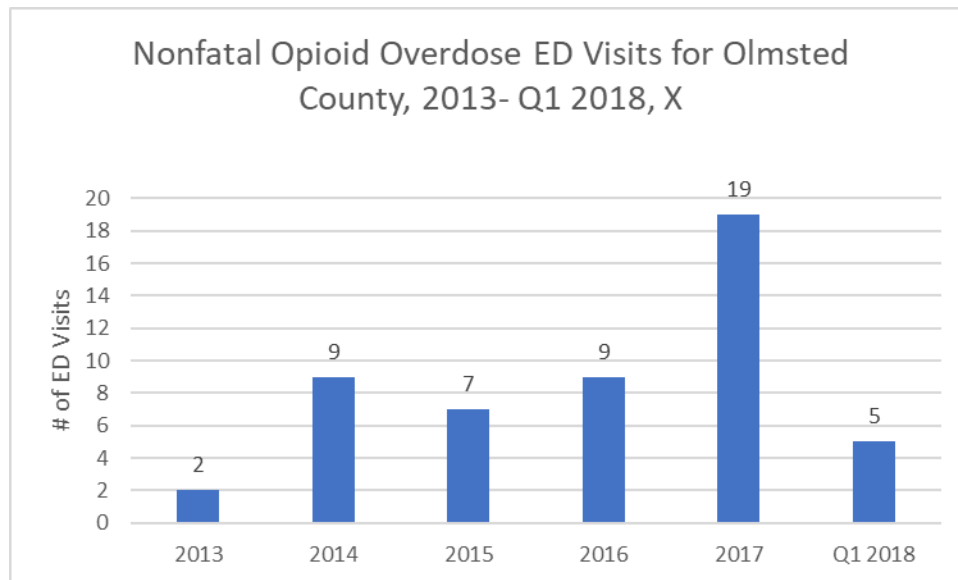
According to MDH Medical Examiner data, the all drug overdose rate (per 100,000 population) for Olmsted County was 10.8. This is less than Minnesota in that same timeframe, where the rate was 12.1.

According to MDH, between 2013 and Quarter 1 2018, there were 742 nonfatal all-drug overdose emergency department (ED) visits for Olmsted County. The largest number of nonfatal all-drug overdose ED visits occurred in 2017, when there were nearly 200 ED visits. According to 2017 MDH data, where the most recent county-specific data is available, those who identify as male and those who identify as female experienced 104 and 91 nonfatal all-drug overdose ED visits respectively.



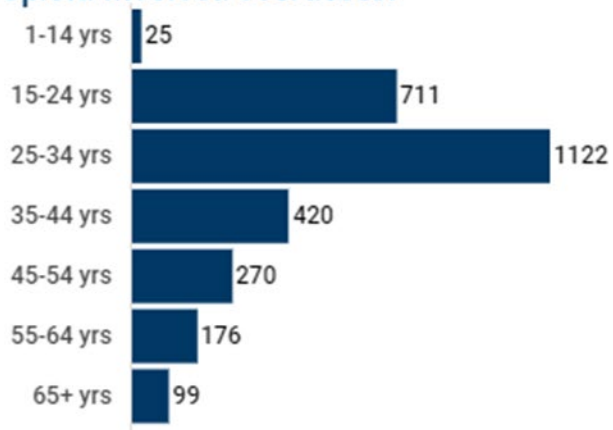
Per MDH, the overall drug overdose rate per 1,000 in Olmsted County between 2016 and 2018 was 1.9.

MDH reviewed opioids and heroin specifically as two drugs and their number of nonfatal overdose ED visits they cased. Opioid overdose ED visits have been on the rise since 2013, with incomplete data from 2018 still demonstrating this rise.

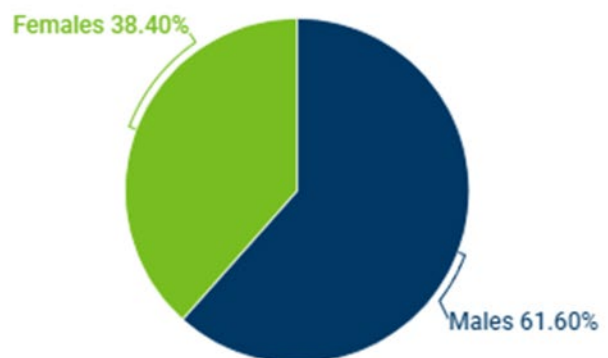


According to MDH's 2019 data, those who were 15-34 years old and identify as male were more likely, in Minnesota, to visit the ER for opioid-involved overdoses.

**In 2019, ages 15-34 years had the greatest number of ER visits for opioid-involved overdoses.**

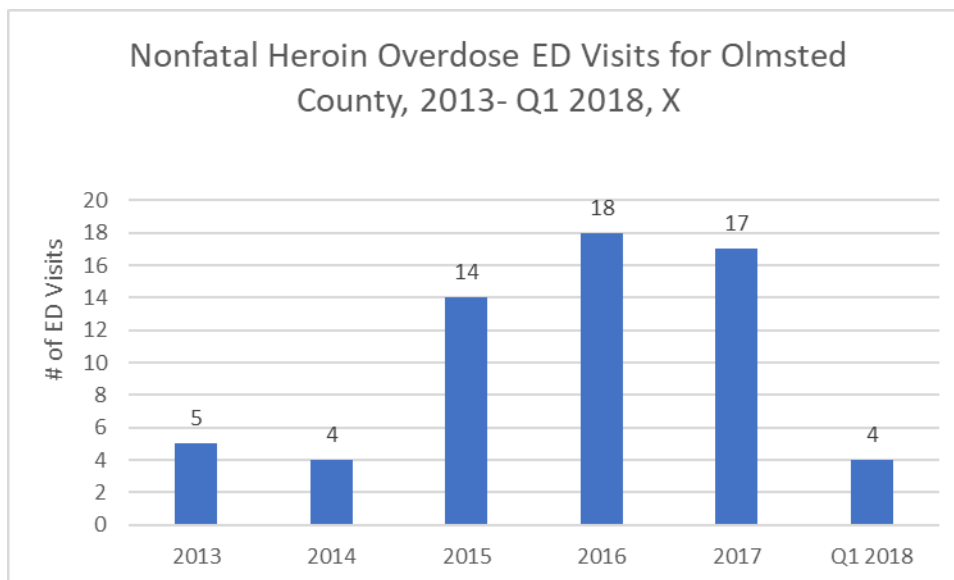


**Males had more ER visits for opioid-involved overdoses in 2019.**



MDH, 2021, X

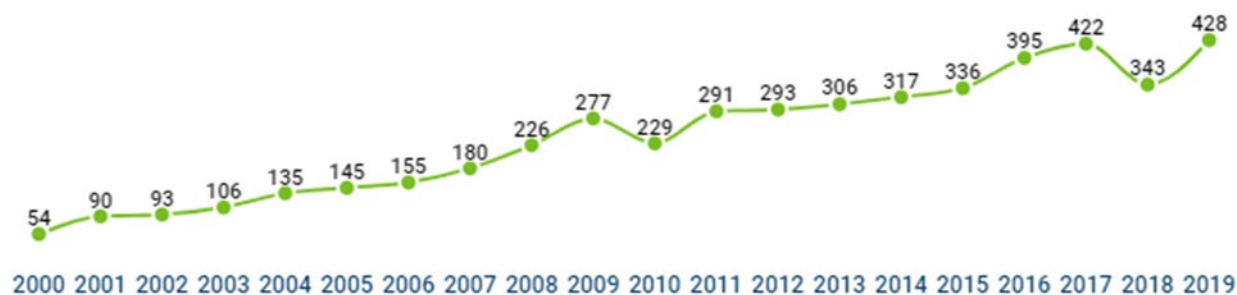
Additionally, heroin overdose ED visits in Olmsted County have increased, and then remained relevantly similar between 2015 and 2017. According to MDH Medical Examiner data, the number of deaths associated with heroin overdose in Olmsted County was less than 20 from 2016 to 2019.



Opioid overdoses deaths have increased in Minnesota since 2000. In 2019, deaths were at an all-time high of 428.

## Opioid Overdose Deaths

**Opioid-involved overdose deaths have increased in Minnesota since 2000.**



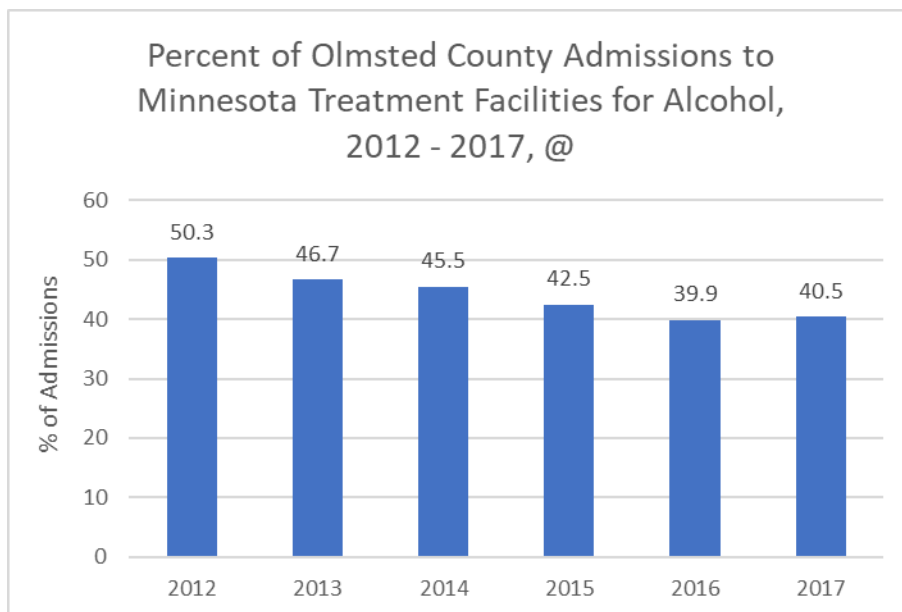
*MDH, 2021, X*

Although it is not complete, 2020 preliminary MDH data shows an increase in overdose deaths compared to 2019. This data is not unique to Minnesota and mirrors a nationwide trend. MDH notes potential causes for this data as less opportunity to revive individuals who are using alone with naloxone, decreased access to treatment opportunities due to COVID-19, poorer mental health due to COVID-19, and a change in environment to more synthetic opioids.

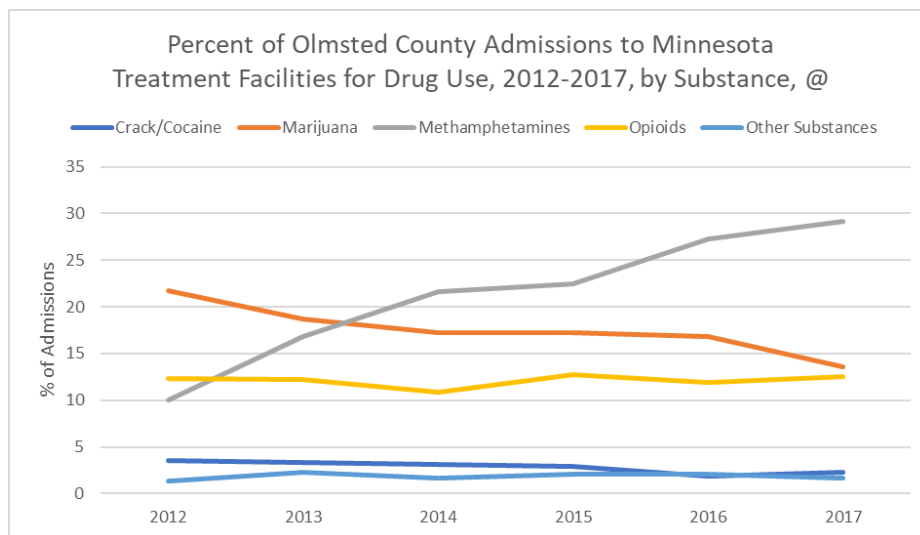
### Treatment

The Minnesota Department of Human Services provides a variety of data around alcohol, and drug treatment in Minnesota and by county. One specific treatment indicator is the percentage of Olmsted

County residents admitted to treatment facilities in Minnesota out of the total of admissions to treatment facilities in Minnesota. In Olmsted County, alcohol treatment admissions have decreased from 2012 to 2017.



Using this same indicator, treatments admissions for various substances in Olmsted County have varied since 2012. Treatment admissions for residents in Olmsted County that increased from 2012 to 2017 include methamphetamines and sedatives, hypnotics, and anxiolytics. Treatment admissions for residents in Olmsted County that have decreased from 2012 to 2017 were amphetamines, crack/cocaine, marijuana, and opioids. Other substances admission rates have remained consistent since 2013. Marijuana, methamphetamines, and opioids are among the most frequent substances causing admissions to treatment facilities for Olmsted County residents.



## Prescribing

Since the rise in the opioid epidemic, there has been a nationwide trend toward prescribing fewer prescription medications. The Minnesota Prescription Monitoring Program (PMP) gathers data from

providers and tracks opioid prescription trends by county in Minnesota. According to the Minnesota PMP, Olmsted County prescribed the 10<sup>th</sup> most prescriptions in 2019 in Minnesota.

With that being said, Olmsted County saw a lower prescription rate than Minnesota. In 2019, the prescribing rate per 1,000 population in Olmsted County was 303.9; in comparison, Minnesota's rate was 438.4.

Geography	Prescription Count					Rate Per 1,000 Population				
	Count 2015	Count 2016	Count 2017	Count 2018	Count 2019	Rate 2015	Rate 2016	Rate 2017	Rate 2018	Rate 2019
MINNESOTA	3,714,365	3,400,302	3,062,960	2,704,445	2,472,684	677.5	615.6	550.1	482.0	438.4
OLMSTED	71,410	64,499	57,942	50,920	48,101	471.9	421.2	375	325.8	303.9

*Minnesota PMP, 2019, ~*

When looking at specific substances, Olmsted County also tends to have a lower prescribing rate than statewide. Olmsted County has a lower prescribing rate for hydrocodone, oxycodone, codeine, morphine, and fentanyl. Olmsted County providers do prescribe tramadol and hydromorphone at higher rates than the providers in the state.

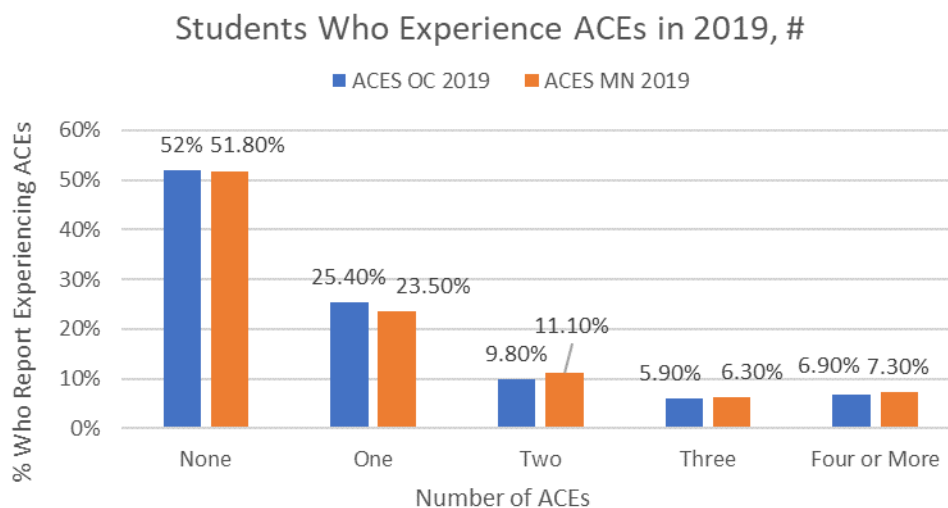
COUNTY	All Opioid Rate	Hydrocodone Rate	Oxycodone Rate	Tramadol Rate	Codeine Rate	Morphine Rate	Fentanyl Rate	Hydromorphone Rate
STATEWIDE	438.4	119.5	159.4	84.2	18.9	24.7	8.5	15.9
OLMSTED	303.9	48.9	109.8	88.5	8.6	14.1	6.5	25.2

*Minnesota PMP, 2019, ~*

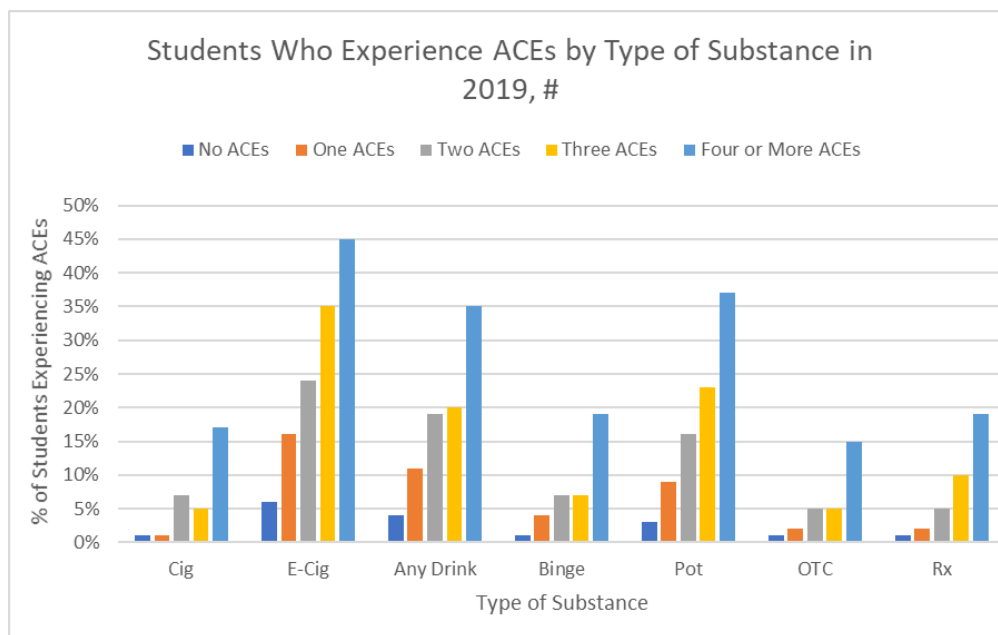
## Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs), are events that have an impact on lifelong health. According to the CDC, ACEs include experiencing violence or neglect, having a family member die by suicide, growing up in a household with someone with mental health or substance use problems, and having a family member jailed.

In 2019, according to the Minnesota Student Survey, about 48% of Olmsted County adolescents have experienced at least once ACE.



Youth who use substances have a higher number of ACEs. Those who use e-cigarettes, participate in any drinking, and use marijuana have the highest percent of four or more ACEs.



## Law Enforcement

The Rochester Police Department (RPD) releases an annual report. The most up-to-date report available is from 2019. This report compiles a variety of figures involving substance use.

One of RPD's units, the Criminal Interdiction Unit (CIU), investigates a variety of problems. One of these problems is seizing various drugs. In 2019, the CIU seized 37.33 pounds of methamphetamine, 99 grams of heroin, 206 grams of cocaine, and 564 grams of K-2.

## Criminal Interdiction Unit (CIU)

**Two teams of Investigators led by one Lieutenant and two Sergeants. The CIU works in conjunction with other investigative and patrol resources to proactively address problems related to: Wanted Persons, Gang Crimes, Prolific Offenders, Weapons offenses, Sex trafficking & Prostitution, Narcotics, Prolific offenders**

In 2019 CIU was involved directly indicting 17 people in federal court. Cases involve armed career criminals to narcotic conspiracies. The hard work and dedication on these cases have made Rochester a safer community.

Members of the CIU conducted 37 presentations to the community in 2019. During these presentations, CIU spoke to over 1300 community members.

*In 2019, the CIU seized the items listed in the table below:*

Methamphetamine	37.33 Pounds
Heroin	99 Grams
Cocaine	206 Grams
K-2	564 Grams
N Bomb Synthetic Hallucinogen	531 Units
Guns	51

*RPD, 2019, #*

According to RPD's 2019 annual report, there were 315 crimes associated with narcotics, 156 crimes associated with driving under the influence (DUI), and 29 crimes associated with liquor law.

2019 Part I and Part II Crime Statistics	
<b>PART I</b>	
Murder	1
Rape	61
Robbery	34
Assault	130
Burglary	274
Larceny	1827
Auto Theft	132
Arson	3
Human Trafficking - Commercial Sex Acts	0
Human Trafficking - Involuntary Servitude	0
<b>Part I Sub-total</b>	<b>2464</b>
<b>PART II</b>	
Assaults (other)	275
Forgery	92
Fraud	466
Embezzlement	0
Stolen Property	26
Vandalism	498
Weapons	47
Prostitution	4
Sex Offenses	57
Narcotics	315
Gambling	0
Family	5
DUI	156
Liquor Law	29
Disorderly	404
Other	935
<b>Part II Sub-total</b>	<b>3309</b>
<b>MN OTHER</b>	
Curfew/Loitering (under 18)	0
Runaways (under 18)	19
<b>PART I &amp; II TOTALS</b>	<b>5792</b>

*RPD, 2019, #*

The RPD Canine (K-9) unit participated in 6,463 calls for service, which included 128 drug searches.

<u>2019 Canine (K-9) Unit Statistics</u>
• NCAA March Madness Menn's Final Four Basketball Tournament in MPLS
• 6,463 Calls for Service
• 524 K-9 Deployments
• 49 Building Searches
• 9 Evidence/Article Searches
• 128 Drug Searches
• 146 Custodial Arrests
• 209 Citations
• 343 Explosive Sweeps
• 52 K-9 Demonstrations
1st Place USPCA Region 18 Patrol Trial
5th Place USPCA National Patrol Trial

*RPD, 2019, #*



## Forces of Change Assessment

Forces of Change is one of the four assessments in the National Association of County and City Health Officials (NACCHO) framework Mobilizing for Action Through Planning and Partnership (MAPP). According to NACCHO, “The forces of change survey assesses the impact of a variety of trends affecting change in a community.” In Olmsted County, we modeled our forces of change events after the Center for Community model that integrated the forces of change assessment along with the wave analysis framework from the Technology of Participation (Top).



In preparation for the 2021 Community Health Improvement Plan (CHIP), the Olmsted County CHAP process hosted three Forces of Change events. Each event focused on one of the identified community priorities: financial stress, mental health, and substance use. The purpose of these events was to bring subject matter experts from Olmsted County (both professional and lived experience) together to better understand the current community context for each of the priorities and to identify community assets.

### Top Identified Forces

- Lack of Integrated Systems
- Mental Health
- Normalization

## Substance Use Wave

On the Horizon	Emerging	Established	Disappearing
Positive childhood experiences	Misconceptions of risk	Poverty	Predominance of prescribing mood-altering chemicals
Lack of adolescent recovery community	Confusion over medicinal use and legality	Financial and life stress = rebound behaviors	Stigmatization of marijuana use
Marijuana legalization	Trending of CBD	Tobacco 21	Social acceptance
Fentanyl	Alternatives to incarceration for addictive behavior	Adult recovery community	Meth labs
ACE awareness	Increase of IV drug use in SE MN	Meth use	“Crack” cocaine use
MAT Clinic (Medication assisted treatment)	Destigmatizing addiction	Co-occurring mental health and substance use disorders	
Prescription monitoring program at a national level	SUD reform	Family disruption and dysfunction	
Misconceptions of risk	Community corrections and law enforcement shifts toward treatment and diversion	Established family patterns of use passed down to children	
Understanding of biochemistry of the brain and addiction	Increased access to substances	Lack of systems communication and integration	
Youth advocacy for mental health	Increased awareness of historical trauma/ACES	IV drug use -> immediate feeling	
Mental healthcare parity	IV to use drugs	Multi-generational drug use/abuse	
Positive community norm messaging	Acknowledgement of co-occurring mental health and chemical health needs	Lack of accessible, diverse, culturally responsive treatment options	
Data driven perception of use	Provider decreased opioid prescriptions	Work force lack of pay/staff turnover	
	Legalizations of marijuana	Stigma	
	Medical and pharmaceutical community	Misconceptions of risk	
	Identify root cause	Trauma experiences/events	
	Prescribing methods- more informed medical professions	Criminalization of addiction	
	Social acceptance (vaping)	Cartel-drug trafficking	
	Increased awareness for mental healthcare	Appropriate SUD’s education starting early in schools	
	Raising tobacco age to 21	Prescription Monitoring Program (PMP)	
		Lack of access to services, coverages, and knowledge	
		Midwest perception of drinking, Normalized substance use	
		Vaping/opioid deaths	
		Society is less connected on a human level	

		Drug take back events	
		High access to prescriptions (medical community)	
		Prescription misuse	
		Drug courts	
		Recovery community supports human connection	
		Lack of rural SUD's treatment resources	

### Substance Use Community Assets

Alcohol Anonymous	Narcotics Anonymous	CHNA
SPF-SIG	Rural Co	NuWay
Nystrom	Blue Stem	Drug Court
Data Sources	Olmsted County Public Health Services	Doc's Recovery House
Empower CTC	Silver Creek Corners	Correction and Suicide Services
New Beginnings	Policy-assisted Recovery	Medical Assisted Treatment
School Based Services	Fountain Centers	PFS- Partnership for Success
Rochester Police Department	Student Groups	Docs Recovery House
Cronan House	Common Ground	Olmsted County
Olmsted County DFO	The Pride Institute	P&I State Grant

### Assets for Two or More CHIP priorities

Olmsted County Sheriff	Rochester Police Department	Rochester Public Schools
School Districts	Mayo Clinic	Olmsted Medical Center
Zumbro Valley Health Center	Community Schools	State of Minnesota
Cradle to Career	Pathways to Prosperity	IMAA