Health and Health-Related Behaviors
University of Minnesota–Crookston Students
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Introduction

Q: What do the following health conditions and health-related behaviors have in common?

- Health Insurance Status
- Depression
- Ability to Manage Stress
- Tobacco Use
- Alcohol Use
- Engagement in Physical Activity
- Credit Card Debt

A: They all affect the health and academic achievement of college students.

Across the state of Minnesota, seventeen two-year and four-year postsecondary schools joined together with Boynton Health Service at the University of Minnesota in spring 2010 to collect information from 34,097 undergraduate and graduate 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. Of the 34,097 students who received a survey, 13,700 students completed the survey, for an overall response rate of 40.2%.

This report highlights the findings of this comprehensive survey and serves as an essential first step in identifying health and health-related behavior issues affecting college students. Boynton Health Service hopes that the information contained in this report will be helpful to college and 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 students enrolled in their schools. The survey results are also intended to 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.
Survey

Methodology

Over 13,000 undergraduate and graduate students enrolled in seventeen postsecondary institutions in Minnesota completed the 2010 College Student Health Survey, developed by Boynton Health Service. As an incentive, all students who responded to the survey were entered into a drawing for gift certificates valued at $3,000 (one), $1,000 (one), and $500 (one) at a variety of stores and drawings for eleven iPod touches™.

Randomly selected students were contacted through multiple mailings and e-mails:

- Invitation postcard
- Invitation e-mail
- Reminder postcard and multiple reminder e-mails

A total of 34,097 undergraduate and graduate students from seventeen colleges and universities in Minnesota were invited to participate in the 2010 College Student Health Survey (see Appendix 1 for a list of participating schools).

In addition to the 34,097 randomly selected students, an oversample of 2,180 students who attended one of these seventeen Minnesota schools and were identified as veterans of the United States Armed Forces were also invited to participate in the survey. The survey results for the oversample of veterans will be treated as a separate report.
The information presented in this report documents the prevalence of various diseases, health conditions, and health-related behaviors across seven areas:

- Health Insurance and Health Care Utilization
- Mental Health
- Tobacco Use
- Alcohol and Other Drug Use
- Personal Safety and Financial Health
- Nutrition and Physical Activity
- Sexual Health

The prevalence of a disease, health condition, or health-related behavior is defined as the total number of occurrences in a population (in this case, college students) at a given time, or the total number of occurrences in the population divided by the number of individuals in that population.

Prevalence is useful because it is a measure of the commonality of a disease, health condition, or health-related behavior. For example, the College Student Health Survey asked students if they had ever been diagnosed with depression within their lifetime. For the purpose of illustration, if 100 students completed the survey and 10 of them reported they had been diagnosed with depression within their lifetime, then the lifetime prevalence of depression among this population of students is 10.0% (10/100).

The results from this survey are based on a random sample of students from each of the participating colleges and universities. Random sampling is a technique in which a group of subjects (in this case, the sample of college students) is selected for study from a larger group (in this case, the population of students enrolled at each of the participating institutions).

Each individual is chosen entirely by chance, and each member of the population has an equal chance of being included in the sample. Random sampling ensures that the sample chosen is representative of the population and that the statistical conclusions (in this case, the prevalence) will be valid.
Results

Health Insurance and Health Care Utilization

Students’ current health influences their ability to realize their immediate goal of achieving academic success and graduating, and their future health affects their ability to accomplish their longer term goal of finding and sustaining a career. Access to health care has been shown to improve health. Although institutions of higher education differ in scope of services, each institution has a unique opportunity and bears a certain responsibility to address issues related to student health and to reduce barriers to health care access.

National Comparison
This section examines the areas of health insurance, health services utilization, and preventive care. Recent research indicates that most young adults in the United States, ages 18 to 24, report good health. The majority of young adults in Minnesota (92.5%) and nationwide (92.2%) report excellent, very good, or good health.¹ At the same time, young adults have relatively low rates of health insurance and preventive care utilization. Among individuals under age 65, 18- to 24-year-olds report the lowest rate of health insurance coverage: in Minnesota 80.9% report some kind of health care insurance, and nationwide the number is 70.3%.¹ ² More young males (33.9%) than young females (25.4%) lack health insurance coverage.² Among all age groups, young adults (69.8%) are least likely to identify a usual place for medical care.²
Many health insurance plans allow dependents under the age of 25 to remain covered by their parents’ insurance while attending a postsecondary institution. Therefore, students who attend postsecondary institutions tend to have higher rates of health insurance coverage than those who do not.

Students attending the University of Minnesota–Crookston (UMC) report an overall uninsured rate of 4.1%. Males have a slightly higher uninsured rate compared to females (5.3% vs. 2.9%, respectively).

University of Minnesota–Crookston students ages 30-39 report the highest uninsured rate. The lowest uninsured rate is among UMC students ages 18-19. This rate may be a reflection of parental health insurance coverage for 18- and 19-year-old students.

Approximately one-fourth (24.0%) of students who attend the University of Minnesota–Crookston report having a spouse, and 13.3% of these students report that their spouse is uninsured.

Less than one in seven (13.9%) UMC students report having dependent children. Of these dependent children, 6.6% lack health insurance.
Number of sick days is a measure of health-related quality of life. Sick days reflect a personal sense of poor or impaired physical or mental health or the inability to react to factors in the physical and social environments.¹

UMC students with health insurance report on average 1.0 more sick day in the past 30 days than UMC students without health insurance.

UMC students with health insurance report a slightly lower rate of diagnosed chronic conditions and a slightly higher rate of diagnosed mental health conditions compared to UMC students without health insurance.

Female students attending the University of Minnesota–Crookston report obtaining routine medical exams and blood pressure checks at higher rates than male students attending the university. Female and male UMC students report obtaining dental exams and cleanings and cholesterol checks at similar rates.

*Includes medical exam and/or gynecological exam for females.
Health insurance coverage appears to have an impact on whether UMC students obtained routine medical examinations within the past 12 months. Uninsured male and female students report far lower rates of obtaining a routine medical examination than insured students.

Among University of Minnesota–Crookston students, the primary locations for obtaining many health care services appear to be a community clinic and a private practice.
UMC students with health insurance obtain hepatitis A, hepatitis B, meningitis, and H1N1 influenza vaccinations at higher rates than students at the university without health insurance.

Currently these immunizations are not required for students enrolled in postsecondary institutions. Hepatitis B immunization, however, is required for high school students in Minnesota.

Compared to male respondents at the University of Minnesota–Crookston, female respondents at the university report more days of poor physical health, more days of poor mental health, and more days when poor physical and/or mental health affected daily activities.

University of Minnesota–Crookston students were asked to report if they have been diagnosed with selected acute illnesses within the past 12 months and within their lifetime.

The most frequently diagnosed acute condition was strep throat, with 42.4% of UMC students reporting having this diagnosis within their lifetime and 7.9% of UMC students reporting having this diagnosis within the past 12 months. The second most frequent acute condition diagnosis was urinary tract infection. Overall, 53.0% of students report being diagnosed with at least one acute condition within their lifetime, and 15.6% report being diagnosed with at least one acute condition within the past 12 months.
Chronic conditions are ongoing health concerns for students. Surveillance of these conditions provides a picture of longer term health care needs for students at UMC.

The two most common chronic conditions diagnosed in University of Minnesota–Crookston students are allergies (38.8% lifetime) and asthma (14.8% lifetime). More than one-half (52.2%) of students report being diagnosed with at least one chronic condition within their lifetime, and approximately one in five (20.2%) report being diagnosed with at least one chronic condition within the past 12 months.

### Chronic Condition Diagnosis—Lifetime and Past 12 Months

<table>
<thead>
<tr>
<th>Chronic Condition</th>
<th>Percent Who Report Being Diagnosed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Problems</td>
<td>3.0</td>
</tr>
<tr>
<td>Allergies</td>
<td>38.8</td>
</tr>
<tr>
<td>Asthma</td>
<td>14.8</td>
</tr>
<tr>
<td>Cancer</td>
<td>0.5</td>
</tr>
<tr>
<td>Diabetes Type I</td>
<td>0.5</td>
</tr>
<tr>
<td>Diabetes Type II</td>
<td>0.2</td>
</tr>
<tr>
<td>Drug Problems (Other Than Alcohol)</td>
<td>1.8</td>
</tr>
<tr>
<td>Genital Herpes</td>
<td>1.6</td>
</tr>
<tr>
<td>Genital Warts/Human Papilloma Virus</td>
<td>2.1</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>0.2</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>0.0</td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td>6.2</td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>4.1</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>0.0</td>
</tr>
<tr>
<td>Obesity</td>
<td>5.0</td>
</tr>
<tr>
<td>Repetitive Stress Injury</td>
<td>2.1</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>0.5</td>
</tr>
<tr>
<td>At Least One of the Above Chronic Conditions</td>
<td>52.2</td>
</tr>
</tbody>
</table>

- **Within Lifetime**
- **Within Past 12 Months**
Mental health issues can have a profound impact on students’ ability to engage fully in the opportunities presented to them while in college. These issues affect their physical, emotional, and cognitive well-being and can lead to poor academic performance, lower graduation rates, and poor interpersonal relationships.

There is increasing diversity among college students. Among undergraduates nationwide, 32.2% are minorities, 57.2% are female, and 31.0% are age 25 or older. In addition, approximately 335,000 foreign undergraduate students are studying at U.S. colleges and universities. This diversity presents a myriad of counseling concerns related to multicultural and gender issues, life transition, stress, career and developmental needs, violence, interpersonal relationships, and serious emotional and psychological problems. This array of mental health problems represents ever-increasing challenges as postsecondary institutions strive to meet the needs of their students.

National Comparison

This section examines areas related to the mental and emotional status of college and university students. Recent research shows that young adults in the United States have relatively high rates of mental health problems compared to other age groups. Based on the results of the National Comorbidity Survey Replication Study using the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders-IV criteria, 58.7% of 18- to 29-year-olds have been diagnosed with a mental disorder within their lifetime, and 43.8% of 18- to 29-year-olds have been diagnosed with a mental disorder within the previous year. Among all age groups, 18- to 25-year-olds have the highest past-year prevalence of serious mental illness, i.e., mental illness that results in functional impairment, (7.4%) and the highest past-year prevalence of major depressive episode (8.7%). More than one in ten (10.8%) young adults between the ages of 18 and 25 have received treatment for a mental health problem in the previous year.
For University of Minnesota–Crookston students, depression and anxiety are the two most frequently reported mental health diagnoses for both lifetime and the past 12 months.

Among UMC students, **25.6%** report being diagnosed with at least one mental health condition within their lifetime. Females report being diagnosed with a mental health condition within their lifetime and within the past 12 months at higher rates than males, which is consistent with gender differences seen in national data.

Additional analysis shows that **13.9%** report being diagnosed with two or more mental health conditions within their lifetime.
The most commonly experienced stressors among University of Minnesota–Crookston students are roommate/housemate conflict and the death of someone close to them. A total of 43.2% of students report experiencing one or two stressors within the past 12 months, and 26.9% report experiencing three or more stressors over that same time period.

An association appears to exist between reported number of stressors experienced within the past 12 months and various types of risk-taking behavior. Over the same 12-month period, UMC students who experienced three or more stressors tend to have higher rates of current tobacco use, high-risk drinking, current marijuana use, high credit card debt, and gambling compared to students who experienced two or fewer stressors.
Approximately one-fourth (25.1%) of UMC students report they are unable to manage their stress level. Additional analysis shows that among these students, 16.0% also report they were diagnosed with depression within the past 12 months. Nearly three-fourths (74.9%) of UMC students report they are able to manage their level of stress. Only 3.6% of these students report they were diagnosed with depression within the past 12 months.

An association appears to exist between unmanaged stress levels and higher rates of diagnosis for acute and chronic conditions as well as various mental health conditions. For example, 13.2% of UMC students with unmanaged stress levels report being diagnosed with anxiety within the past year compared to only 3.3% of students with managed stress levels reporting the same diagnosis.

Depression is the mental health condition most frequently reported by University of Minnesota–Crookston students, both for lifetime and the past 12 months. Females report being diagnosed with depression—both lifetime and the past 12 months—at higher rates than males.
UMC students ages 30-39 report the highest rates of being diagnosed with depression within their lifetime and within the past 12 months.

Overall, 6.9% of University of Minnesota–Crookston students report they currently are taking medication for depression. Females report a slightly higher rate of medication use for depression than males, which correlates with the higher depression diagnosis rates found in females compared to males.

Female University of Minnesota–Crookston students also report a higher rate of medication use for mental health problems other than depression than the university’s male population. Overall, 6.2% of students report taking medication for a mental health problem other than depression.
Among University of Minnesota–Crookston students, no males and 0.5% of females report being diagnosed with anorexia and/or bulimia within their lifetime.

In response to a question that asked on how many of the past seven days they got enough sleep so they felt rested when they woke up in the morning, more than one-half (57.1%) of UMC students report they received adequate sleep on three or fewer days over the previous seven days.

Receiving adequate sleep in the past seven days appears to have an impact on students’ ability to manage their stress level. Only 50.5% of UMC students who report receiving 0-1 day per week of adequate sleep also report the ability to manage their stress, whereas 90.0% of students who report 4-5 days per week of adequate sleep and 87.7% of students who report 6-7 days per week of adequate sleep also report the ability to manage their stress.
Results

Tobacco Use

Young adults transitioning between high school and college find themselves in an environment with increased opportunities to make personal and lifestyle decisions without supervision or input from their parents. Coupling this new-found freedom with growing academic pressure and an expanding social network can lead to experimentation and risky behaviors such as smoking. Preventing smoking among young adults is critical to reducing long-term use of tobacco products and the subsequent negative health consequences.

National Comparison

Recent research shows that current cigarette use by Americans of all ages peaks among young adults ages 21-25 at 37.1%, while 18- to 20-year-olds are not far behind at 33.5%. Nearly one in three (30.0%) full-time college students smoked cigarettes at least one time in the previous year, less than one in five (17.9%) smoked cigarettes at least one time in the previous 30 days, and approximately one in ten (9.2%) smoke cigarettes daily. Among young adults ages 18-25, 5.4% used smokeless tobacco in the previous month. Current cigarette smokers are more likely to use other tobacco products, alcohol, or illicit drugs than nonsmokers. Among all current smokers, 42.5% have tried to quit and have stopped smoking for at least one day in the preceding 12 months. Of the 15 million college students in the United States, an estimated 1.7 million will die prematurely due to smoking-related illnesses. Clearly the current level of tobacco use among college students poses a major health risk.
The current tobacco use rate for University of Minnesota–Crookston students is 24.4%, with a daily tobacco use rate of 9.6%. Males report higher rates of both current and daily tobacco use compared to females.

**Definition:**

**Current Tobacco Use**

Any tobacco use in the past 30 days. Tobacco use includes both smoking and smokeless tobacco.

University of Minnesota–Crookston students age 24 and older report the highest current tobacco use rate.

Among UMC students, the rate of daily tobacco use increases with age. Approximately one in five (19.1%) UMC students age 24 and older reports using tobacco daily.
Males are the predominant users of smokeless tobacco. Overall, 22.8% of male University of Minnesota–Crookston students report using smokeless tobacco during the past 30 days.

Among students at the University of Minnesota–Crookston who report using smoking tobacco in the past 30 days, 56.2% do not consider themselves smokers. Among UMC students who do consider themselves smokers, 54.8% made at least one attempt to quit smoking over the past 12 months. These students made an average of 2.7 quit attempts during that same 12-month period.

For UMC students who report using tobacco over the past 30 days, the percentage of those who say they smoke half a pack of cigarettes or more per day increases from 30.5% on a weekday to 39.4% on a weekend day.
The average number of cigarettes smoked by UMC students who are current tobacco users decreases from 9.8 per weekday to 8.6 per weekend day. For daily tobacco users, the average number decreases from 25.1 per weekday to 19.5 per weekend day.

University of Minnesota–Crookston students who used tobacco in the past 30 days report the most common locations of their use are in a car, where they live (outside), at private parties (outside), and at bars and restaurants (outside).

Tobacco Use Location
Current Tobacco Users

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent Who Indicate Use at Specified Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>On Campus</td>
<td>20.5</td>
</tr>
<tr>
<td>Residence Halls</td>
<td>*</td>
</tr>
<tr>
<td>Fraternity/Sorority</td>
<td>13.7</td>
</tr>
<tr>
<td>Bars/Restaurants</td>
<td>*</td>
</tr>
<tr>
<td>In a Car</td>
<td>74.0</td>
</tr>
<tr>
<td>Where I Live</td>
<td>35.6</td>
</tr>
<tr>
<td>Private Parties</td>
<td>37.0</td>
</tr>
<tr>
<td>Work Site</td>
<td>*</td>
</tr>
<tr>
<td>Parking Ramp/Garage</td>
<td>16.4</td>
</tr>
<tr>
<td>Other</td>
<td>15.1</td>
</tr>
</tbody>
</table>

*Location not included in question.
### Secondhand Smoke Exposure

#### All Students

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent Who Indicate Exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Nonsmokers</td>
</tr>
<tr>
<td>On Campus</td>
<td>1.4</td>
</tr>
<tr>
<td>Residence Halls</td>
<td>*</td>
</tr>
<tr>
<td>Fraternity/Sorority</td>
<td>1.1</td>
</tr>
<tr>
<td>Bars/Restaurants</td>
<td>*</td>
</tr>
<tr>
<td>In a Car</td>
<td>9.9</td>
</tr>
<tr>
<td>Where I Live</td>
<td>4.1</td>
</tr>
<tr>
<td>Private Parties</td>
<td>12.1</td>
</tr>
<tr>
<td>Work Site</td>
<td>*</td>
</tr>
<tr>
<td>Parking Ramp/Garage</td>
<td>2.2</td>
</tr>
<tr>
<td>Other</td>
<td>5.8</td>
</tr>
<tr>
<td>N/A–Never Exposed</td>
<td>52.9</td>
</tr>
</tbody>
</table>

*Location not included in question.

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### Secondhand Smoke Exposure–Per Week

#### Nonsmokers vs. Current Smokers

For nonsmokers attending the University of Minnesota–Crookston, 3.8% report being exposed to secondhand smoke 2 or more hours per week. For current smokers, 24.0% report being exposed to secondhand smoke for 2 or more hours per week.

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For nonsmokers attending UMC, bars and restaurants (outside) and other (outside) are the most commonly cited locations for exposure to secondhand smoke. In a car and private parties (outside) are the most frequently reported locations for exposure to secondhand smoke by smokers.
University of Minnesota–Crookston students who use tobacco tend to have a higher rate of high-risk drinking compared to UMC students who are non-tobacco users (62.6% vs. 25.7%, respectively).

**Definition:**

**High-Risk Drinking**

Consumption of five or more alcohol drinks at one sitting within the past two weeks for both males and females. A drink is defined as a bottle of beer, wine cooler, glass of wine, shot glass of liquor, or mixed drink.

Similar to the relationship between high-risk drinking and tobacco use, use of marijuana in the past 30 days by UMC students is higher among tobacco users (15.9%) compared to non-tobacco users (2.4%). This is a more than six-fold increase in the rate.

As with high-risk drinking and marijuana use, the use of other illegal drugs is associated with tobacco use. Tobacco users who attend UMC use illegal drugs other than marijuana at more than six times the rate of non-tobacco users who attend the university (12.3% vs. 1.8%, respectively).
Results

Alcohol Use and Other Drug Use

For some young adults, college life includes an introduction or increase in the use of alcohol, marijuana, and various illicit drugs. Whether students are using these substances to signify emergence into adulthood, enhance their social life, or cope with stress, substance abuse can lead to a decline in classroom performance, lower grades, aggressive behavior, property damage, and personal injury.

National Comparison

American college students consume alcohol and other drugs at very high rates. More than four in five (85.3%) full-time college students have consumed alcohol at least one time, and more than two in three (69.0%) full-time college students consume alcohol monthly. The rate of binge drinking (consuming five or more alcoholic beverages in a row in the previous two weeks) peaks between ages 21 and 25 at 46.0% and is 33.7% among 18- to 20-year-olds. 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.

Approximately one-half (49.5%) of full-time college students have used an illicit drug at least once in their lifetime, more than one-third (35.2%) of full-time college students have used an illicit drug at least once in the past year, and nearly one in five (18.9%) full-time college students have used an illicit drug in the last month. Marijuana is the illicit drug of choice for full-time college students, with nearly half (46.8%) of students having used the drug at least once in their lifetime and almost one-third (32.3%) having used it in the past year. Among full-time college students, 5.7% have used amphetamines, 4.4% have used cocaine, and 0.3% have used heroin in the previous year.
Among University of Minnesota–Crookston students, 79.7% report using alcohol in the past 12 months and 68.3% report using alcohol in the past 30 days. Males report slightly higher rates of both past-12-month and current alcohol use compared to females.

More than one-half (55.2%) of UMC students ages 18-20 report consuming alcohol in the past 30 days. Nearly nine out of ten (87.0%) UMC students ages 25-27 report consuming alcohol over the same time period.

Male UMC students consume a higher average number of drinks per week than female students at the university. The average number of drinks per week may serve as an indicator of overall alcohol use.
Male students at the University of Minnesota–Crookston report a higher rate of high-risk drinking compared to female UMC students (43.4% vs. 26.1%, respectively).

Among University of Minnesota–Crookston students, the peak years for engaging in high-risk drinking are between ages 21 and 22 and between ages 25 and 27.

UMC students who have engaged in high-risk drinking tend to overestimate this behavior among their peers (39.9%), while those who have not engaged in high-risk drinking underestimate this behavior among their peers (29.6%). The estimate from all students is 33.1%, and the actual high-risk drinking rate at the university is 34.7%.
The blood alcohol content of a student on the most recent socializing/partying occasion was calculated based on answers to four different survey questions (gender, current body weight, amount of alcohol consumed, and time period of consumption). It should be noted that the BAC calculated in this study is an estimate. This information is self-reported, and students tend to underestimate the actual amount of alcohol they consume.

For male and female students attending the University of Minnesota–Crookston, the average estimated blood alcohol content, based on the last time the student partied/socialized, is 0.07.

The average estimated BAC levels for University of Minnesota–Crookston students range from 0.04 to 0.11, with the estimated BAC for all survey respondents averaging 0.07. Students age 24 report the highest average estimated BAC level but the average estimated BAC levels for students ages 22, 23, 24, and 27 all exceed the legal driving limit of 0.08 for individuals of legal drinking age.
Nearly one in five (18.1%) University of Minnesota–Crookston students report having driven a car while under the influence of alcohol or drugs. Among UMC students, 23.6% report missing a class and 23.8% report performing poorly on a test or project as a result of alcohol/drug use.

A strong association exists between the average number of drinks UMC students consumed per week and the total number of reported negative consequences they experienced over the past 12 months. An association also exists between engaging in high-risk drinking within the past two weeks and reported negative consequences.
The rates for the negative consequences identified generally are two to three times higher among UMC students who have engaged in high-risk drinking compared to UMC students who have not engaged in high-risk drinking. Approximately one in three (33.6%) students who have engaged in high-risk drinking have driven while under the influence of alcohol or drugs one or more times in the past 12 months.

Students were asked if they would call 911 when someone “passes out” due to alcohol/drug use and they are unable to wake the individual. In this example of a situation in which 911 must be called, 54.7% of all University of Minnesota–Crookston students report they would be “very likely” to call for emergency assistance.

The rate for any marijuana use within the past 12 months is 11.9% for all University of Minnesota–Crookston students, while the current marijuana use rate is 5.7% for all UMC students. Both the past-12-month and current marijuana use rates are higher for females than for males.

**Definition:**

- **Past-12-Month Marijuana Use**
  Any marijuana use within the past year.

- **Current Marijuana Use**
  Any marijuana use within the past 30 days.

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### High-Risk Drinking and Selected Consequences*

<table>
<thead>
<tr>
<th>Negative Consequence</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Driven a Car While Under the Influence</td>
<td>18.1 9.9 33.6</td>
</tr>
<tr>
<td>Got Into an Argument or Fight</td>
<td>16.7 9.8 29.6</td>
</tr>
<tr>
<td>Performed Poorly on a Test or Important Project</td>
<td>23.8 16.1 38.2</td>
</tr>
<tr>
<td>Missed a Class</td>
<td>23.6 15.1 39.5</td>
</tr>
<tr>
<td>Have Been Taken Advantage of Sexually (Includes Males and Females)</td>
<td>3.4 2.1 5.9</td>
</tr>
</tbody>
</table>

*The rate for high-risk drinking is based on behavior in the past two weeks while the rate for negative consequences is based on reported experiences within the previous 12-month period.

### Likelihood of Calling 911 in an Alcohol/Drug-Related Situation

<table>
<thead>
<tr>
<th>Response</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Likely</td>
<td>54.7 61.9 51.3</td>
</tr>
<tr>
<td>Somewhat Likely</td>
<td>27.7 28.1 27.5</td>
</tr>
<tr>
<td>Somewhat Unlikely</td>
<td>11.4 5.0 14.4</td>
</tr>
<tr>
<td>Very Unlikely</td>
<td>6.2 5.0 6.7</td>
</tr>
</tbody>
</table>

### Marijuana Use—Past 12 Months and Current

<table>
<thead>
<tr>
<th>Past-12-Month Marijuana Use</th>
<th>Current Marijuana Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Students</td>
<td>Males</td>
</tr>
<tr>
<td>11.9</td>
<td>11.5</td>
</tr>
<tr>
<td>5.7</td>
<td>5.5</td>
</tr>
</tbody>
</table>
The illicit drugs most commonly used by UMC students are sedatives (1.8%), cocaine (1.6%), and ecstasy (1.6%). Further analysis shows that among UMC students, 4.4% report having used at least one of the nine listed illicit drugs. In addition, 5.3% of students report using another person’s prescription drugs.
Results

Personal Safety and Financial Health

The health of students and their subsequent success in academic life depends on a multitude of factors both intrinsic and extrinsic to the individual. Safety and personal finances are natural sources of concern for students, parents, and college personnel. A safe campus offers students the opportunity to pursue learning in an environment free from threats to their physical or emotional well-being. As college populations become more diverse, the challenge of creating a safe environment becomes more complex. Students’ decisions related to finances also affect their academic success. This section concentrates on the areas of personal safety and financial health.

National Comparison

Though many efforts are made to reduce violence and victimization on campus, these unfortunate events still occur. Current data show that almost one in six (17.6%) women and one in thirty-three (3.0%) men in the United States have been victims of rape or attempted rape in their lifetime.\(^{10}\) Based on estimates by the National Institute of Justice, 20.0% of American women experience rape or attempted rape while in college, but fewer than 5.0% of college rape victims report the incident to the police.\(^{11}\)

Financial health is another area of concern. More than four in five (84.0%) college students in the United States have at least one credit card, and one-half (50.0%) have four or more credit cards.\(^{12}\) The average credit card debt per U.S. college student is $3,173.12 More than two-fifths (41.9%) of college students report that they participated in some type of gambling activity during the previous school year.\(^{13}\)
Nearly one in four (23.4%) female students at the University of Minnesota–Crookston report experiencing a sexual assault within their lifetime, with 8.1% reporting having been assaulted within the past 12 months. Male UMC students have experienced sexual assault at lower rates, with 2.8% reporting an assault within their lifetime and 1.0% reporting an assault within the past 12 months.

Among female University of Minnesota–Crookston students, more than one in five (22.5%) report experiencing domestic violence within their lifetime. More than one-tenth (11.9%) of male UMC students report having had the experience.

Further examination of data shows that about one in ten (10.7%) students at the university report either sexually assaulting or inflicting domestic violence on another person within their lifetime. Of those who report being a perpetrator of sexual assault or domestic violence, 44.7% indicate they have been a victim of a sexual assault within their lifetime.
For students who report being victims of sexual assault, 26.3% also say they have been diagnosed with depression within their lifetime; 35.5% of victims of domestic violence say they have had a diagnosis of depression within their lifetime. It should be noted these rates are higher than the lifetime depression rate reported among UMC students who have not experienced sexual assault or domestic violence.

Of the University of Minnesota–Crookston students who indicate they have experienced a sexual assault within their lifetime (13.0%), only 40.4% state they reported the incident. Of the UMC students who chose to report the incident, 39.1% reported it to the police and 26.1% reported it to a health care provider.

More than one in seven (14.6%) University of Minnesota–Crookston students were theft victims within the past 12 months. Of those who report experiencing a theft, 82.8% say the amount of the theft was $499 or less.
Nearly one-fourth (22.7%) of University of Minnesota–Crookston students report they have immediate access to a firearm, 35.6% for males and 9.7% for females. Of those who have access to a firearm, 35.4% report they have access to a handgun.

Further analysis shows that 24.0% of students attending the University of Minnesota–Crookston state they carried a weapon (e.g., gun, knife) within the past 12 months. This does not include carrying a weapon while hunting.

Male students at the University of Minnesota–Crookston are more likely to report having engaged in a physical fight over the past 12 months compared to female UMC students (12.8% vs. 3.7%, respectively).

Among students at UMC who rode a bicycle, only 13.7% report wearing a helmet always or most of the time while riding the bicycle. More than one-half (52.6%) of students who rode a motorized two-wheeled vehicle report they wear a helmet always or most of the time while on the vehicle.
Injuries—Past 12 Months
All Students

<table>
<thead>
<tr>
<th>Type of Injury</th>
<th>Percent Who Report Experiencing Within Past 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assaulted by Another Person (Nonsexual)</td>
<td>1.6</td>
</tr>
<tr>
<td>Burned by Fire or a Hot Substance</td>
<td>5.9</td>
</tr>
<tr>
<td>Motor Vehicle Related</td>
<td>3.7</td>
</tr>
<tr>
<td>Team Sports</td>
<td>17.6</td>
</tr>
<tr>
<td>Individual Sports</td>
<td>7.3</td>
</tr>
<tr>
<td>Bicycle Related</td>
<td>0.9</td>
</tr>
<tr>
<td>In-line Skating</td>
<td>0.9</td>
</tr>
<tr>
<td>Skate Boarding</td>
<td>0.0</td>
</tr>
<tr>
<td>Falls</td>
<td>13.0</td>
</tr>
<tr>
<td>Other</td>
<td>15.1</td>
</tr>
<tr>
<td>Not Applicable—I Was Not Injured</td>
<td>55.7</td>
</tr>
</tbody>
</table>

More than two in five (44.3%) UMC students report experiencing at least one injury over the past 12 months. The injuries most commonly reported during this period are due to team sports and miscellaneous causes.

Current Credit Card Debt
All Students

More than one in four (28.6%) University of Minnesota–Crookston students report carrying some level of credit card debt over the past month. Of those who carry a monthly credit card balance, 30.7% report the debt as $3,000 per month or more.

Definition:
Current Credit Card Debt
Any unpaid balance at the end of the past month.
The rate of high credit card debt increases from 3.5% among UMC undergraduate students enrolled one year to 25.4% among UMC undergraduate students enrolled five or more years.

**Definition:**
**High Credit Card Debt**
A monthly debt of $3,000 or more.

Less than one-half (45.3%) of University of Minnesota–Crookston students report engaging in gambling over the past 12-month period. Less than one in ten (7.8%) report gambling at least once a month. Of the 45.3% who gambled within the past year, 7.3% report spending $100 or more per month.
Results

Nutrition and Physical Activity

For many students, the college years represent a time of new experiences and increased opportunities to make personal health decisions. Some of these decisions encompass the areas of nutrition and physical activity. Students are on their own, free to eat what they want, when they want. Busy academic and social schedules can take priority over eating well and exercising regularly. Class and work schedules vary from day to day and change every semester. Lifestyle changes, peer pressure, and limited finances may lead to an increase in stress, triggering overeating that results in weight gain. In addition, the steady availability of a wide variety of food, both nutritious and not so nutritious, can make wise food choices difficult.

National Comparison
Research shows that young adults in the United States generally eat fewer fruits and vegetables but are more physically active compared to older adults.1 Young adults between the ages of 18 and 24 (23.0%) are slightly less likely than all adults (24.4%) to eat fruits and vegetable five or more times per day.1 Young adults between the ages of 18 and 27 report consuming breakfast an average of 3.1 days per week and consuming fast food an average of 2.5 days per week.14 The rate of obesity among young adults ages 18 to 24 is 16.8%.1

Nationwide, 81.1% of young adults between the ages of 18 and 24 compared to 75.4% of all adults report participating in at least one physical activity during the last month.1 Approximately three out of five (60.9%) 18- to 24-year-olds report engaging in at least 30 minutes of moderate physical activity five or more days per week or at least 20 minutes of vigorous physical activity three or more days per week; for all adults, the rate is 50.5%.1
Body mass index (BMI) is a common and reliable indicator of body fatness. BMI equals the weight in kilograms divided by the height in meters squared (BMI = kg/m²). This table presents weight categories based on BMI ranges.

More than one in two (51.2%) University of Minnesota–Crookston students fall within the overweight or obese/extremely obese category. This is based on self-reported height and weight.

Data analysis shows that the average body mass index for male University of Minnesota–Crookston survey respondents is 27.1, and the average BMI for female UMC survey respondents is 25.0. For both male and female students, these averages fall within the overweight category. Approximately three in five (60.3%) males and more than two in five (41.6%) females fall within the overweight or obese/extremely obese category.

Survey respondents at the University of Minnesota–Crookston were asked to report their engagement in any of the following activities in an attempt to control their weight: laxative use, diet pill use, and induced vomiting. Compared to males, females engage in these behaviors at higher rates.
University of Minnesota–Crookston students within the underweight category report the highest rate of laxative use. UMC students classified as obese/extremely obese report the highest rates of diet pill use and induced vomiting.

As with other weight-related behaviors, females at the University of Minnesota–Crookston engage in binge eating at a higher rate than males at the university. Approximately one out of seven (13.8%) females report they engaged in binge eating over the past 12 months.

University of Minnesota–Crookston students classified as overweight or obese/extremely obese report higher rates of engaging in binge eating than students classified as underweight or normal weight.
UMC underweight students report the highest rates of never eating breakfast within the past seven days and of eating at a restaurant once a week or more within the past 12 months. The highest rate of fast food consumption once a week or more within the past 12 months is for students classified as obese/ extremely obese.

A majority of UMC students consume fruits and vegetables one to four times per day. Only 12.6% of all students consume fruits and vegetables five or more times per day. Based on the reported number of times per day fruits and vegetables are consumed, an average number of times per day can be calculated. Males consume fruits and vegetables on average 3.0 times per day, and females consume them on average 2.8 times per day.

Across all BMI categories, the majority of UMC students eat less than the recommended amount of fruits and vegetables per day. Only 9.7% of overweight students eat fruits and vegetables five or more times per day.
Students were asked several questions related to their physical activity level. The two survey questions that relate to recommendations outlined by the Centers for Disease Control and Prevention (CDC) (see CDC’s recommendations listed at left) 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 response 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.

Approximately two out of three (67.1%) UMC students report levels of physical activity that place them in the moderate or high classification, meeting the CDC’s recommendations.
For male UMC students, average BMI decreases as physical activity level increases. For females at UMC, students who engage in a high or moderate level of physical activity have a lower average BMI than students who engage in a low level of physical activity.

University of Minnesota-Crookston underweight students report a higher level of screen time than normal weight, overweight, and obese/extremely obese students. Additional data analysis shows that approximately three-fourths (75.8%) of UMC students report watching TV or using the computer (not for work or school) two hours or more per day. Among all students, 3.0% report zero screen time, 21.2% report a low level of screen time, 31.7% report a moderate level of screen time, and 44.1% report a high level of screen time.
Results

Sexual Health

College is a time of great transition. With its increase in freedom and decision-making opportunities, this transitional period poses many challenges for students. Some of the most important decisions facing college students concern sexual health. Choices relating to sexual behavior have the potential for significant, and oftentimes long-term, consequences. So important is the issue of sexual health that in 2001 the U.S. Surgeon General listed “responsible sexual behavior” as one of the 10 leading health indicators for the nation.

National Comparison
The 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-year-old 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. 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. Due to a combination of behavioral, biological, and cultural reasons, sexually active young adults are at increased risk for acquiring sexually transmitted infections (STIs). 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. Among 20- to 24-year-olds, 7.1% of males and 13.4% of females report having a sexually transmitted disease other than HIV within their lifetime. Among all 15- to 24-year-olds, approximately 9.1 million cases of STIs and nearly 5,000 cases of HIV/AIDS are diagnosed annually.
Male students attending the University of Minnesota–Crookston report slightly higher rates of sexual activity, both within their lifetime and within the past 12 months, compared to female students attending the university.

On average, UMC students had 2.6 sexual partners over the past 12-month period. This average is based on the experience of all students, both those who were sexually active and those who were not sexually active. More than three out of four (76.5%) students report that they had 0 or 1 partner within the past 12 months.

Among University of Minnesota–Crookston students who were sexually active within the past 12 months, approximately four out of five (79.6%) report that their most recent sexual partner was either a fiancé(e)/spouse or an exclusive dating partner.
Among UMC students sexually active within their lifetime, **65.9%** used a condom the last time they engaged in vaginal intercourse, **26.0%** used a condom during their last anal intercourse, and **5.7%** used a condom during their last oral sex. Percents are based solely on those who indicated they engaged in the activity.

Data analysis shows that of the 80.5% of University of Minnesota–Crookston students who report being sexually active within their lifetime, **95.5%** engaged in vaginal intercourse, **85.2%** engaged in oral sex, and **25.3%** engaged in anal intercourse.

The two most common methods that UMC students report using to prevent pregnancy the last time they engaged in vaginal intercourse are condoms (**52.0%**) and birth control pills (**46.0%**). The withdrawal method is reported by **11.1%** of UMC students. Other methods of pregnancy prevention reported by students are identified in the table below.

Among UMC students, **5.7%** report not using any method of pregnancy prevention the last time they engaged in vaginal intercourse.
A total of 3.6% of University of Minnesota–Crookston students has been involved in a pregnancy within the past 12 months. Of those involved in a pregnancy, 43.7% state it was unintentional. Among the unintentional pregnancies, 57.1% resulted in miscarriage, 14.3% resulted in birth and parenting, and 14.3% resulted in abortion.

Analysis shows that within the past 12 months, 16.3% of sexually active female students at the University of Minnesota–Crookston have used emergency contraception. Among those who used emergency contraception, 62.4% have used it once, 25.0% have used it twice, and 12.6% have used it three or more times within the past 12 months.

Among UMC students who have been sexually active within their lifetime, 7.4% report being diagnosed with a sexually transmitted infection within their lifetime and 1.5% report being diagnosed with a sexually transmitted infection within the past 12 months. Chlamydia is the most commonly diagnosed sexually transmitted infection.
Implications

Healthy individuals make better students, and better students make healthier communities.

Results from the 2010 College Student Health Survey presented in this report document the health and health-related behaviors of students enrolled in the participating institutions. These data, therefore, offer a comprehensive look at the diseases, health conditions, and health-related behaviors that are impacting students attending postsecondary schools in Minnesota. Identification of these health-related issues is critical because the health of college students in Minnesota affects not only their academic achievement but also the overall health of our society.

While it is intuitively obvious that health conditions can affect academic performance, the link to overall societal health is more subtle but no less profound. Given that there are now more students enrolled in postsecondary institutions than in high schools, 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 obtaining 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.
Appendix 1

Colleges and Universities Participating in the 2010 College Student Health Survey

<table>
<thead>
<tr>
<th>Two-Year Schools</th>
<th>Location</th>
<th>Enrollment–Spring 2010*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anoka Technical College</td>
<td>Anoka, MN</td>
<td>3,090</td>
</tr>
<tr>
<td>Century College</td>
<td>White Bear Lake, MN</td>
<td>12,329</td>
</tr>
<tr>
<td>Itasca Community College</td>
<td>Grand Rapids, MN</td>
<td>1,466</td>
</tr>
<tr>
<td>Minnesota State College–Southeast Technical</td>
<td>Winona, MN</td>
<td>2,581</td>
</tr>
<tr>
<td>Rochester Community and Technical College</td>
<td>Rochester, MN</td>
<td>7,490</td>
</tr>
<tr>
<td>St. Cloud Technical and Community College</td>
<td>St. Cloud, MN</td>
<td>5,451</td>
</tr>
<tr>
<td>Schools with Two-Year and Four-Year Programs</td>
<td>Location</td>
<td>Enrollment–Spring 2010*</td>
</tr>
<tr>
<td>Winona State University</td>
<td>Winona, MN</td>
<td>9,388</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Four-Year Schools</th>
<th>Location</th>
<th>Enrollment–Spring 2010*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bemidji State University</td>
<td>Bemidji, MN</td>
<td>6,562</td>
</tr>
<tr>
<td>Carleton College</td>
<td>Northfield, MN</td>
<td>1,936</td>
</tr>
<tr>
<td>Concordia College</td>
<td>Moorhead, MN</td>
<td>2,777</td>
</tr>
<tr>
<td>Minnesota State University, Mankato</td>
<td>Mankato, MN</td>
<td>16,856</td>
</tr>
<tr>
<td>St. Cloud State University</td>
<td>St. Cloud, MN</td>
<td>20,479</td>
</tr>
<tr>
<td>University of Minnesota–Crookston</td>
<td>Crookston, MN</td>
<td>1,264</td>
</tr>
<tr>
<td>University of Minnesota–Duluth</td>
<td>Duluth, MN</td>
<td>9,794</td>
</tr>
<tr>
<td>University of Minnesota–Morris</td>
<td>Morris, MN</td>
<td>1,507</td>
</tr>
<tr>
<td>University of Minnesota–Rochester</td>
<td>Rochester, MN</td>
<td>387</td>
</tr>
<tr>
<td>University of Minnesota–Twin Cities</td>
<td>Minneapolis, MN</td>
<td>45,881</td>
</tr>
</tbody>
</table>

*Includes full-time and part-time students.
## Appendix 2

University of Minnesota–Crookston Survey Demographics Based on Student Response

<table>
<thead>
<tr>
<th>Category</th>
<th>All Students</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average Age (Years)</strong></td>
<td>23.7</td>
</tr>
<tr>
<td><strong>Age Range (Years)</strong></td>
<td>18-89</td>
</tr>
<tr>
<td>18-24 Years</td>
<td>77.4%</td>
</tr>
<tr>
<td>25 Years or Older</td>
<td>22.6%</td>
</tr>
<tr>
<td><strong>Average GPA</strong></td>
<td>3.11</td>
</tr>
<tr>
<td><strong>Class Status</strong></td>
<td></td>
</tr>
<tr>
<td>Undergraduate–Enrolled One Year</td>
<td>19.4%</td>
</tr>
<tr>
<td>Undergraduate–Enrolled Two Years</td>
<td>20.8%</td>
</tr>
<tr>
<td>Undergraduate–Enrolled Three Years</td>
<td>23.3%</td>
</tr>
<tr>
<td>Undergraduate–Enrolled Four Years</td>
<td>18.9%</td>
</tr>
<tr>
<td>Undergraduate–Enrolled Five or More Years</td>
<td>13.5%</td>
</tr>
<tr>
<td>Masters, Graduate, or Professional Program</td>
<td>0.5%</td>
</tr>
<tr>
<td>Unspecified</td>
<td>3.6%</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>50.0%</td>
</tr>
<tr>
<td>Female</td>
<td>49.8%</td>
</tr>
<tr>
<td>Transgender/Other</td>
<td>0.0%</td>
</tr>
<tr>
<td>Unspecified</td>
<td>0.2%</td>
</tr>
<tr>
<td><strong>Ethnic Origin</strong></td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>1.6%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>6.4%</td>
</tr>
<tr>
<td>Black–Not Hispanic</td>
<td>2.5%</td>
</tr>
<tr>
<td>Latino/Hispanic</td>
<td>3.2%</td>
</tr>
<tr>
<td>White–Not Hispanic (Includes Middle Eastern)</td>
<td>88.4%</td>
</tr>
<tr>
<td>Other</td>
<td>1.4%</td>
</tr>
<tr>
<td><strong>Current Residence</strong></td>
<td></td>
</tr>
<tr>
<td>Residence Hall or Fraternity/Sorority</td>
<td>42.0%</td>
</tr>
<tr>
<td>Other</td>
<td>58.0%</td>
</tr>
</tbody>
</table>
Glossary

Current Alcohol Use
Any alcohol use within the past 30 days.

Current Credit Card Debt
Any unpaid balance at the end of the past month.

Current Marijuana Use
Any marijuana use within the past 30 days.

Current Tobacco Use
Any use of tobacco in the past 30 days. Tobacco use includes both smoking and smokeless tobacco.

High Credit Card Debt
A monthly debt of $3,000 or more.

High-Risk Drinking
Consumption of five or more alcohol drinks at one sitting within the past two weeks for both males and females. A drink is defined as a bottle of beer, wine cooler, glass of wine, shot glass of liquor, or mixed drink.

Past-12-Month Alcohol Use
Any alcohol use within the past year.

Past-12-Month Marijuana Use
Any marijuana use within the past year.
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