Health and Health-Related Behaviors
University of Minnesota–Twin Cities Students
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## Glossary

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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, 29 two-year and four-year postsecondary schools joined together with Boynton Health Service at the University of Minnesota in spring 2013 to collect information from 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 44,688 students who received a survey, 13,589 students completed the survey, for an overall response rate of 30.4%.

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.
Undergraduate and graduate students enrolled in 29 postsecondary institutions in Minnesota completed the 2013 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 $1,000 (one), $500 (one), and $250 (one) at a variety of stores. In addition, all students who responded to the survey were entered into six separate drawings for an iPad mini™ and one drawing for a $100 Amazon gift card that included just students from their school.

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 44,688 undergraduate and graduate students from 29 colleges and universities in Minnesota were invited to participate in the 2013 College Student Health Survey (see Appendix 1 for a list of participating schools). Of the 44,688 students who received a survey, 13,589 students completed the survey, for an overall response rate of 30.4%.
Survey

Analysis Summary

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 (87.9%) and nationwide (82.9%) report excellent, very good, or good health (CDC, 2011). At the same time, young adults have relatively low rates of health insurance and preventive care utilization. In Minnesota, 77.6% of 18- to 24-year-olds report some kind of health care insurance, and nationwide the number is 75.2% (CDC, 2011). More young males (32.3%) than young females (23.9%) lack health insurance coverage (Ward et al, 2013). Among all age groups, young adults (70.8%) are least likely to identify a usual place for medical care (Ward et al, 2013).
Students attending the University of Minnesota–Twin Cities (U of M) report an overall uninsured rate of 8.3%. Males have a higher uninsured rate compared to females (9.6% vs. 7.5%, respectively).

University of Minnesota–Twin Cities students ages 30–39 report the highest uninsured rate. The lowest uninsured rate is among U of M students ages 18–19.

Less than one-fourth (23.6%) of University of Minnesota–Twin Cities students report having a spouse, and 13.1% of these students report that their spouse is uninsured.

More than one in twenty (6.4%) U of M students report having dependent children. Of these dependent children, 4.5% 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 (USDHHS, 2000).

U of M students without health insurance report on average 0.3 more sick days in the past 30 days than U of M students with health insurance.

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

Female students attending the University of Minnesota—Twin Cities report obtaining routine medical exams, dental exams and cleanings, cholesterol checks, and blood pressure checks at higher rates than male students attending the university.

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

Among University of Minnesota–Twin Cities students, the primary location for obtaining many health care services appears to be Boynton Health Service, the school health service.
U of M students with health insurance obtain hepatitis A, hepatitis B, meningitis, influenza, and human papillomavirus (HPV) vaccinations at higher rates than students at the university without health insurance. Additionally, among U of M students, 20.9% of males and 51.1% of females report obtaining HPV vaccination.

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 students at the University of Minnesota—Twin Cities, female students 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.

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

The acute condition diagnosed most frequently within students’ lifetimes was strep throat, with 43.9% of U of M students reporting having this diagnosis. The acute condition diagnosed most frequently within the past 12 months was urinary tract infections, with 7.3% of students reporting having this diagnosis. Overall, 55.5% of U of M students report being diagnosed with at least one acute condition within their lifetime, and 12.4% 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 the U of M.

The two most common chronic conditions diagnosed in U of M students are allergies (38.5% lifetime) and asthma (15.3% lifetime). More than one-half (51.5%) of students report being diagnosed with at least one chronic condition within their lifetime, and more than one-seventh (15.0%) report being diagnosed with at least one chronic condition within the 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>1.3 0.2</td>
</tr>
<tr>
<td>Allergies</td>
<td>39.5 8.6</td>
</tr>
<tr>
<td>Asthma</td>
<td>15.3 1.9</td>
</tr>
<tr>
<td>Cancer</td>
<td>1.0 0.2</td>
</tr>
<tr>
<td>Diabetes Type I</td>
<td>0.4 0.0</td>
</tr>
<tr>
<td>Diabetes Type II</td>
<td>0.3 0.2</td>
</tr>
<tr>
<td>Drug Problems (Other Than Alcohol)</td>
<td>0.8 0.3</td>
</tr>
<tr>
<td>Genital Herpes</td>
<td>0.7 0.1</td>
</tr>
<tr>
<td>Genital Warts/ Human Papillomavirus</td>
<td>2.2 0.5</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>0.3 0.1</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>0.1 0.1</td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td>3.1 1.1</td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>4.0 1.9</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>0.1 0.0</td>
</tr>
<tr>
<td>Obesity</td>
<td>4.7 2.3</td>
</tr>
<tr>
<td>Repetitive Stress Injury</td>
<td>2.4 0.7</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>0.5 0.1</td>
</tr>
<tr>
<td>At Least One of the Above Chronic Conditions</td>
<td>51.5 15.0</td>
</tr>
</tbody>
</table>
Results

Mental Health

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, 37.5% are minorities, 56.8% are female, and 32.8% are age 25 or older (Snyder & Dillow, 2012). In addition, approximately 690,923 foreign students are studying at U.S. colleges and universities (Snyder & Dillow, 2012). 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. Among all age groups, 18- to 25-year-olds have the highest past-year prevalence of any mental illness, i.e., a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the Diagnostic and Statistical Manual of Mental Disorders-IV, (29.8%); and serious mental illness, i.e., mental illness that results in functional impairment, (7.6%), major depressive episode (8.3%), and having serious thoughts of suicide (6.6%) (SAMHSA, 2012a). More than one in 10 (11.4%) young adults between the ages of 18 and 25 have received treatment for a mental health problem in the previous year (SAMHSA, 2012a).
For University of Minnesota–Twin Cities students, anxiety and depression are the two most frequently reported mental health diagnoses for both lifetime and the past 12 months.

Among University of Minnesota–Twin Cities students, 29.9% report being diagnosed with at least one mental health condition within their lifetime, and 14.3% report being diagnosed with at least one mental health condition within the past 12 months. Females report being diagnosed with a mental health condition within their lifetime and within the past 12 months at higher rates than males.

Additional analysis shows that 18.0% of students report being diagnosed with two or more mental health conditions within their lifetime.
The most commonly experienced stressors among University of Minnesota–Twin Cities students are roommate/housemate conflict, the termination of a personal relationship, and the death or serious illness of someone close to them. A total of 43.3% of students report experiencing one or two stressors within the past 12 months, and 18.6% 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, U of M 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.

### Mental Health Stressors

<table>
<thead>
<tr>
<th>Stressor</th>
<th>Percent Who Report Experiencing Within Past 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Getting Married</td>
<td>2.6</td>
</tr>
<tr>
<td>Failing a Class</td>
<td>7.2</td>
</tr>
<tr>
<td>Serious Physical Illness of Someone Close to You</td>
<td>14.4</td>
</tr>
<tr>
<td>Death of Someone Close to You</td>
<td>15.5</td>
</tr>
<tr>
<td>Being Diagnosed With a Serious Physical Illness</td>
<td>2.3</td>
</tr>
<tr>
<td>Being Diagnosed With a Serious Mental Illness</td>
<td>6.0</td>
</tr>
<tr>
<td>Divorce or Separation From Your Spouse</td>
<td>4.6</td>
</tr>
<tr>
<td>Termination of Personal Relationship (Not Including Marriage)</td>
<td>17.1</td>
</tr>
<tr>
<td>Attempted Suicide</td>
<td>0.6</td>
</tr>
<tr>
<td>Being Put on Academic Probation</td>
<td>5.4</td>
</tr>
<tr>
<td>Excessive Credit Card Debt</td>
<td>6.7</td>
</tr>
<tr>
<td>Excessive Debt Other Than Credit Card</td>
<td>9.7</td>
</tr>
<tr>
<td>Being Arrested</td>
<td>0.5</td>
</tr>
<tr>
<td>Being Fired or Laid Off From a Job</td>
<td>2.0</td>
</tr>
<tr>
<td>Roommate/Housemate Conflict</td>
<td>19.3</td>
</tr>
<tr>
<td>Parental Conflict</td>
<td>11.5</td>
</tr>
<tr>
<td>Lack of Health Care Coverage</td>
<td>4.1</td>
</tr>
<tr>
<td>Issues Related to Sexual Orientation</td>
<td>2.8</td>
</tr>
<tr>
<td>Bankruptcy</td>
<td>0.1</td>
</tr>
<tr>
<td>Zero of the Above Stressors</td>
<td>38.1</td>
</tr>
<tr>
<td>One or Two of the Above Stressors</td>
<td>43.3</td>
</tr>
<tr>
<td>Three or More of the Above Stressors</td>
<td>18.6</td>
</tr>
</tbody>
</table>

### Mental Health Stressors and Risky Behavior

![Bar chart showing the percentage of students reporting stressors and risky behavior](chart.png)
More than one-fourth (29.3%) of U of M students report they are unable to manage their stress level. Additional analysis shows that among these students, 15.6% also report they were diagnosed with depression within the past 12 months. Nearly three-fourths (70.7%) of U of M students report they are able to manage their level of stress. Only 4.7% 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 conditions as well as various mental health conditions. For example, 16.8% of U of M students with unmanaged stress levels report being diagnosed with anxiety within the past year compared to only 6.6% of students with managed stress levels reporting the same diagnosis.

Among U of M students, 19.3% report being diagnosed with depression within their lifetime, and 7.9% report being diagnosed with depression within the past 12 months. Females report being diagnosed with depression at higher rates than males.
University of Minnesota—Twin Cities students age 40 and older report the highest rates of being diagnosed with depression within their lifetime and within the past 12 months.

Overall, 8.2% of U of M students report they currently are taking medication for depression. Females report a higher rate of medication use for depression than males, which correlates with the higher depression diagnosis rates found in females compared to males.

Female U of M students report a higher rate of medication use for mental health problems other than depression compared to male students. Overall, 8.3% of students report taking medication for a mental health problem other than depression.
Among U of M students, 0.4% of males and 4.1% of females report being diagnosed with anorexia and/or bulimia within their lifetime.

In response to a question that asked U of M students how many of the past seven days they got enough sleep so they felt rested when they woke up in the morning, less than one-half (49.2%) of students report they received adequate sleep 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 53.5% of U of M students who report receiving zero to one day per week of adequate sleep also report the ability to manage their stress, whereas 88.0% of students who report six to seven 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 newfound 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 approximately one-third of 18- to 20-year-olds (31.6%) and 21- to 25-year-olds (34.7%) report current cigarette use (SAMHSA, 2012b). Approximately one in four (25.8%) full-time college students smoked cigarettes at least one time in the previous year; fewer than one in six (15.2%) smoked cigarettes at least one time in the previous 30 days; and fewer than one in 10 (7.3%) smoke cigarettes daily (Johnston et al, 2012). Among young adults ages 18–25, 5.4% used smokeless tobacco in the previous month (SAMHSA, 2012b). Current cigarette smokers are more likely to use other tobacco products, alcohol, or illicit drugs than nonsmokers (SAMHSA, 2012b). Among all current smokers, 45.3% have stopped smoking for at least one day in the preceding 12 months (CDC, 2009). Of the 15 million college students in the United States, an estimated 1.7 million will die prematurely due to smoking-related illnesses (Halperin, 2002). Clearly the current level of tobacco use among college students poses a major health risk.
The current tobacco use rate for University of Minnesota–Twin Cities students ages 18–24 has decreased from 41.8% in 1998 to 15.4% in 2013.

**Definition:**

**Current Tobacco Use**

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

The current tobacco use rates for U of M male and female students ages 18–24 have decreased since 1998. Comparing the current tobacco use rate of U of M students ages 18–24 by gender over time shows that females tend to use tobacco at a lower rate than males.

University of Minnesota–Twin Cities students ages 18–24 have a higher rate of current tobacco use compared to students age 25 and older (15.4% vs. 14.0%, respectively). Within each age group, male students report a higher current tobacco use rate than female students.
Current Tobacco Use—Longitudinal
First-Year Students

The current tobacco use rate for first-year students attending the University of Minnesota–Twin Cities decreased from 53.3% in 1998 to 13.2% in 2013.

Daily Tobacco Use—Longitudinal
18- to 24-Year-Old Students

The daily tobacco use rate for University of Minnesota–Twin Cities students ages 18–24 has decreased from 9.8% in 1998 to 1.9% in 2013.

Daily Tobacco Use
All Students by Age Group and Gender

University of Minnesota–Twin Cities students age 25 and older have a higher rate of daily tobacco use compared to students ages 18–24 (3.4% vs. 1.9%, respectively). Within each age group, male students report a higher daily tobacco use rate than female students.
Overall, 6.3% of male U of M students report using smokeless tobacco during the past 30 days.

Among students at the U of M who report using smoking tobacco in the past 30 days, 64.5% do not consider themselves to be smokers. Among University of Minnesota–Twin Cities students who do consider themselves to be smokers, 64.7% made at least one attempt to quit smoking over the past 12 months. These students made an average of 3.9 quit attempts during that same 12-month period.

For U of M students who report smoking over the past 30 days, the percentage of those who say they smoke half a pack of cigarettes or more per day increases from 13.6% on a weekday to 15.7% on a weekend day.
The average number of cigarettes smoked by U of M students who are current smokers increases slightly from 3.8 per weekday to 4.0 per weekend day. For daily smokers, the average number decreases from 15.2 per weekday to 12.7 per weekend day.

U of M students who smoked in the past 30 days report the most common locations of their tobacco use are where they live (outside), at private parties (outside), and on campus (outside).

U of M students were asked their opinion regarding a smoke-free policy on their campus. Nearly three-fourths (71.0%) of nonsmokers and more than one-fourth (25.8%) of current smokers agree to strongly agree that their campus should have a smoke-free policy prohibiting smoking both indoors and outdoors. Additionally, U of M students were asked their opinion regarding a tobacco-free policy on their campus. Nearly three-fifths (58.7%) of nonsmokers and almost one in seven (13.8%) current smokers agree to strongly agree that their campus should have a tobacco-free policy prohibiting all tobacco use both indoors and outdoors.
For U of M students who are nonsmokers, on campus (outside) and at bars and restaurants (outside) are the most commonly cited locations for exposure to secondhand smoke. The most frequently reported locations for exposure to secondhand smoke by students who are current smokers are on campus (outside) and at private parties (outside).

For U of M students who are nonsmokers, 2.4% report being exposed to secondhand smoke two or more hours per week. For current smokers, 13.8% report being exposed to secondhand smoke for two or more hours per week.

University of Minnesota–Twin Cities students who use tobacco tend to have a higher rate of high-risk drinking compared to students who are non-tobacco users (61.9% vs. 24.8%, respectively).

**Definition:**

High-Risk Drinking

Consumption of five or more alcoholic 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 U of M students is higher among tobacco users (40.7%) compared to non-tobacco users (7.9%). This is a more than five-fold increase in the rate.

As with high-risk drinking and marijuana use, the use of other illegal drugs is associated with tobacco use. U of M students who are tobacco users use illegal drugs, other than marijuana, at more than six times the rate of non-tobacco users who attend the university (23.0% vs. 3.5%, respectively).
Results

Alcohol Use and Other Drug Use

For some young adults, college life includes an introduction to 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. Among full-time college students, approximately four in five (80.5%) have consumed alcohol at least one time, more than three in four (77.4%) have consumed alcohol in the past year, and nearly two in three (63.5%) consume alcohol monthly (Johnston et al, 2012). 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 45.4% and is 31.2% among 18- to 20-year-olds (SAMHSA, 2012b). 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 (SAMHSA, 2012b).

Approximately one-half (49.2%) of full-time college students have used an illicit drug at least once in their lifetime, more than one-third (36.3%) of full-time college students have used an illicit drug at least once in the past year, and more than one in five (21.4%) full-time college students have used an illicit drug in the last month (Johnston et al, 2012). Marijuana is the illicit drug of choice for full-time college students, with nearly half (46.6%) of students having used the drug at least once in their lifetime, approximately one-third (33.2%) having used it in the past year, and approximately one in five (19.4%) having used it in the past month (Johnston et al, 2012). Among full-time college students, 9.3% have used amphetamines, 3.3% have used cocaine, and 0.1% have used heroin in the previous year (Johnston et al, 2012).
The past-12-month alcohol use rate for all University of Minnesota–Twin Cities students is 80.9%. U of M students age 25 and older have a higher rate of using alcohol in the past 12 months compared to students ages 18–24 (85.5% vs. 78.6%, respectively). Within each age group, female students report a higher past-12-month alcohol use rate than male students.

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

The current alcohol use rate for University of Minnesota–Twin Cities students ages 18–24 has decreased from 76.9% in 1998 to 70.0% in 2013.

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

The current alcohol use rate for all University of Minnesota–Twin Cities students is 72.2%. U of M students age 25 and older have a higher current alcohol use rate compared to students ages 18–24 (76.8% vs. 70.0%, respectively). Within each age group, females report a higher current alcohol use rate than males.
Current Alcohol Use
All Students by Age

The rate of current alcohol consumption increases from 55.6% of 19-year-old U of M students to 83.0% of 21-year-old U of M students.

Average Number of Drinks per Week—Longitudinal
18- to 24-Year-Old Students

The average number of drinks consumed per week by University of Minnesota–Twin Cities students ages 18–24 has remained fairly constant since 2004. U of M students ages 18–24 report consuming an average of 4.1 drinks per week.

Average Number of Drinks per Week
All Students by Gender

University of Minnesota–Twin Cities students consume an average of 3.9 drinks per week. U of M students ages 18–24 consume a higher average number of drinks per week compared to U of M students age 25 and older (4.1 vs. 3.7, respectively). Within each age group, male students report consuming a higher average number of drinks per week than female students.
The high-risk drinking rate for University of Minnesota–Twin Cities students ages 18–24 has decreased from 43.0% in 2001 to 35.2% in 2013.

Nearly one-third (30.3%) of University of Minnesota–Twin Cities students report engaging in high-risk drinking. U of M students ages 18–24 report a higher high-risk drinking rate compared to U of M students age 25 and older (35.2% vs. 21.3%, respectively). Within each age group, male students report a higher rate of high-risk drinking compared to female students.

Among University of Minnesota–Twin Cities students, the peak years for engaging in high-risk drinking are between ages 21 and 22.
**High-Risk Drinking Rates on Campus—Perceived vs. Actual**

**All Students**

**Question asked:**
In the past two weeks, what percentage of students at your school do you think had five or more drinks at a sitting? (One drink = one shot of alcohol, 12-ounce beer, mixed drink containing 1 or 1.5 ounces of alcohol, 12-ounce wine cooler, or 5-ounce glass of wine.)

<table>
<thead>
<tr>
<th>High-Risk Drinking Status</th>
<th>Students’ Perception of High-Risk Drinking by School Peers</th>
<th>Actual High-Risk Drinking Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Students</td>
<td>34.2%</td>
<td></td>
</tr>
<tr>
<td>High-Risk Drinkers</td>
<td>44.3%</td>
<td>30.3% of All Students</td>
</tr>
<tr>
<td>Non-High-Risk Drinkers</td>
<td>29.7%</td>
<td></td>
</tr>
</tbody>
</table>

**Blood Alcohol Content**

Blood alcohol content (BAC) measures the percentage of alcohol in a person’s blood. The calculation of BAC is based on a simple formula that takes into account the following factors:

- Gender
- Current body weight
- Amount of alcohol consumed (number of drinks)
- Time period of consumption
- Concentration of alcohol in the beverage consumed (based on the alcohol content of one typical can of beer containing 4.5% alcohol)

**Average Estimated Blood Alcohol Content**

**All Students by Gender**

U of M students who have engaged in high-risk drinking tend to overestimate this behavior among their peers (44.3%), while those who have not engaged in high-risk drinking more accurately estimate this behavior among their peers (29.7%). The estimate from all students is 34.2%, which is higher than the actual high-risk drinking rate among students at the university (30.3%).

The blood alcohol content (BAC) 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 students attending the University of Minnesota–Twin Cities, the average estimated blood alcohol content, based on the last time the student partied/socialized, is 0.06. The average estimated BAC for females is slightly higher than the average estimated BAC for males.
The average estimated BAC levels for University of Minnesota–Twin Cities students range from 0.04 to 0.08, with the estimated BAC for all survey respondents averaging 0.06. Students age 21 report an average estimated BAC level of 0.08, which meets the legal driving limit for individuals of legal drinking age.

Nearly one in ten (9.8%) U of M students report having driven a car while under the influence of alcohol or drugs. Among University of Minnesota–Twin Cities students, 19.3% report missing a class and 19.8% 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 U of M 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 U of M students who have engaged in high-risk drinking compared to students who have not engaged in high-risk drinking. Approximately one in five (19.5%) students who have engaged in high-risk drinking has 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, 60.7% of all U of M students report they would be “very likely” to call for emergency assistance.
The rate for any marijuana use within the past 12 months is **22.9%** for all University of Minnesota–Twin Cities students. U of M students ages 18–24 have a higher rate of using marijuana in the past 12 months compared to students age 25 and older (26.3% vs. 16.6%, respectively). Within each age group, male students report a higher past-12-month marijuana use rate than female students.

**Definition:**

**Past-12-Month Marijuana Use**

Any marijuana use within the past year.

The current marijuana use rate for U of M students ages 18–24 has fluctuated slightly since 1998, ranging from a high of **18.7%** in 2001 to a low of **13.5%** in 2007. The current marijuana use rate for U of M students ages 18–24 is **15.5%**.

**Definition:**

**Current Marijuana Use**

Any marijuana use within the past 30 days.

The current marijuana use rate is **12.8%** for all U of M students. U of M students ages 18–24 have a higher current marijuana use rate compared to students age 25 and older (15.5% vs. 8.0%, respectively). Within each age group, male students report a higher current marijuana use rate than female students.
The illicit drugs most commonly used by University of Minnesota–Twin Cities students are sedatives (3.0%) and ecstasy (2.4%). Further analysis shows that among University of Minnesota–Twin Cities students, 6.4% report having used at least one of the nine listed illicit drugs. In addition, 5.7% 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 33 (3.0%) men in the United States have been victims of rape or attempted rape in their lifetime (Tjaden & Thoennes, 2006). 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 (Fischer et al, 2000).

Financial health is another area of concern. According to the U.S. Department of Education, the average price of college attendance was $14,000 for all undergraduates and $22,400 for all full-time, full-year undergraduate students during the 2007–2008 school year (USDE, 2011). In 2007–2008, 65.6% of all undergraduates received some type of financial aid, and the average amount of aid received was $9,100 (USDE, 2011). Nearly two in five (38.5%) undergraduate students borrowed money through a school loan, and the average loan amount was $7,100 (USDE, 2011). 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 (Sallie Mae, 2009). The average credit card debt per U.S. college student is $3,173 (Sallie Mae, 2009). More than two-fifths (41.9%) of college students report they participated in some type of gambling activity during the previous school year (LaBrie et al, 2004).
More than one in five (22.0%) female students at the University of Minnesota–Twin Cities report experiencing a sexual assault within their lifetime, with 6.6% reporting having been assaulted within the past 12 months. Male students at the university have experienced sexual assault at lower rates, with 5.0% reporting an assault within their lifetime and 1.6% reporting an assault within the past 12 months.

Among female students at the University of Minnesota–Twin Cities, approximately one in five (20.9%) report experiencing domestic violence within their lifetime. Nearly one in eight (12.0%) male students report having had the experience.

Further examination of data shows that more than one in twelve (12.3%) 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, 35.0% indicate they have been a victim of a sexual assault within their lifetime.
For students who report being victims of sexual assault, 39.7% also say they have been diagnosed with depression within their lifetime; 35.3% 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 U of M students who have not experienced sexual assault or domestic violence within their lifetime.

Of University of Minnesota–Twin Cities students who indicate they have experienced a sexual assault within their lifetime (15.2%), only 29.1% state they reported the incident. Of students who chose to report the incident, 13.2% reported it to the police and 29.7% reported it to a health care provider.

More than one in twenty (5.5%) U of M students report they have immediate access to a firearm, 7.3% for males and 4.3% for females. Of those who have access to a firearm, 57.9% report they have access to a handgun.

Further analysis shows that 10.0% of students attending the University of Minnesota–Twin Cities 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—Twin Cities are more likely to report having engaged in a physical fight over the past 12 months compared to female students at the university (3.3% vs. 1.5%, respectively).

Among students at the U of M who rode a bicycle, only 39.3% report wearing a helmet always or most of the time while riding the bicycle. More than three in five (62.8%) U of M students who rode a motorized two-wheeled vehicle report they wear a helmet always or most of the time while on the vehicle. More than three in five (61.2%) students report texting sometimes, most of the time, or always while driving.

More than one-third (36.6%) of U of M students report experiencing at least one injury over the past 12 months. The injuries most commonly reported during this period are due to falls and individual sports.
More than one-third (37.4%) of U of M students report carrying some level of credit card debt over the past month. Of those who carry a monthly credit card balance, 30.6% 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 monthly credit card debt of $3,000 or more among U of M students is highest among those enrolled in a master’s, graduate, or professional program (14.6%).

**Definition:**

**Credit Card Debt**

A monthly debt of $3,000 or more.

The percentage of U of M students who report a student loan balance of $20,000 or more increases from 8.9% among students enrolled one year to 51.9% among students enrolled five or more years.

**Definition:**

**Student Loan Balance**

A student loan balance of $20,000 or more.
Nearly one-third (31.9\%) of University of Minnesota–Twin Cities students report engaging in gambling over the past 12-month period. Few (2.7\%) report gambling at least once a month. Of the 31.9\% who gambled within the past year, 5.4\% 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 (CDC, 2011). Young adults between the ages of 18 and 24 (20.3%) are slightly less likely than all adults (23.4%) to eat fruits and vegetables five or more times per day (CDC, 2011). 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 (Niemeier, 2006). The rate of obesity among young adults ages 18 to 24 is 17.7% (CDC, 2011).

Nationwide, 82.1% of young adults between the ages of 18 and 24 compared to 76.2% of all adults report participating in at least one physical activity during the last month (CDC, 2011). Approximately three out of five (61.4%) 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 51.0% (CDC, 2011).
Body mass index (BMI) is a common and reliable indicator of body fatness (CDC, 2007). BMI equals weight in kilograms divided by height in meters squared (BMI = kg/m²). This table presents weight categories based on BMI ranges.

Less than one-third (30.9%) of students at University of Minnesota–Twin Cities 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 U of M students is 24.2, and the average BMI for female U of M students is 23.8. For both male and female students, these averages fall within the normal weight category. More than one in three (35.4%) males and more than one in four (27.8%) females fall within the overweight or obese/extremely obese category.

Students at the University of Minnesota–Twin Cities 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 used laxatives, diet pills, and induced vomiting at higher rates.
University of Minnesota–Twin Cities students within the underweight category report the highest rates of laxative use and induced vomiting. Students within the obese/extremely obese category report the highest rate of diet pill use.

Nearly one out of five (18.0%) U of M students report they engaged in binge eating over the past 12 months.

University of Minnesota–Twin Cities students classified as obese/extremely obese report a higher rate of engaging in binge eating than students classified as underweight, normal weight, or overweight.
Obese/extremely obese U of M students report the highest rates of never eating breakfast within the past seven days, of fast-food consumption once a week or more within the past 12 months, and of eating at a restaurant once a week or more within the past 12 months.

A majority of U of M students consume fruits and vegetables one to four times per day. Only 18.8% 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 3.1 times per day, and females consume them on average 3.4 times per day.

Across all BMI categories, the majority of U of M students eat less than the recommended amount of fruits and vegetables per day. Only 17.5% of obese/extremely obese students eat fruits and vegetables five or more times per day.
Students were asked to report their consumption of sweetened beverages. U of M students report a higher rate of daily consumption of coffee drinks with sugar (14.0%) than of regular soda (5.9%), sports drinks (2.3%), and other sweetened beverages including energy drinks (3.0%).

Among U of M students, the level of daily consumption of regular soda is highest among underweight students. It should be noted that the number of students who consume regular soda on a daily basis does not reflect the actual quantity of soda consumed per day.

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.

Nearly three-fourths (72.4%) of U of M students report levels of physical activity that place them in the moderate or high classification, meeting the CDC’s recommendations.
For both male and female U of M students, average BMI decreases as physical activity level increases. BMI is lowest among female students with high levels of physical activity.

Among U of M students, overweight and obese/extremely obese students report slightly higher rates of moderate to high screen time compared to underweight and normal weight students. Additional data analysis shows that approximately nine in ten (89.9%) University of Minnesota–Twin Cities students report watching TV or using a computer or handheld device (not for work or school) two hours or more per day. Among all students, 0.2% report zero screen time, 9.9% report a low level of screen time, 34.2% report a moderate level of screen time, and 55.7% 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 Healthy People 2020 states that improving sexual health is crucial to eliminating health disparities, reducing rates of infectious diseases and infertility, and increasing educational attainment, career opportunities, and financial stability (USDHHS, 2011).

National Comparison
The majority of young adults in the United States are sexually active. Among males, 60.9% of 18- to 19-year-olds and 70.3% of 20- to 24-year-olds report that they have engaged in vaginal intercourse within their lifetime, 59.4% of 18- to 19-year-olds and 73.5% of 20- to 24-year-olds report that they received oral sex from a partner of the opposite sex within their lifetime, and 9.7% of 18- to 19-year-olds and 23.7% of 20- to 24-year-olds report that they engaged in insertive anal intercourse within their lifetime (Herbenick et al, 2010). Among females, 64.0% of 18- to 19-year-olds and 85.6% of 20- to 24-year-olds report that they have engaged in vaginal intercourse within their lifetime, 62.0% of 18- to 19-year-olds and 79.7% of 20- to 24-year-olds report that they received oral sex from a partner of the opposite sex within their lifetime, and 20.0% of 18- to 19-year-olds and 39.9% of 20- to 24-year-olds report that they engaged in anal intercourse within their lifetime (Herbenick et al, 2010). During their most recent vaginal intercourse event, 42.6% of 18- to 24-year-old males and 36.7% of 18- to 24-year-old females used a condom (Sanders et al, 2010).

Due to a combination of behavioral, biological, and cultural reasons, sexually active young adults are at increased risk for acquiring sexually transmitted infections (STIs) (CDC, 2012). The higher prevalence of STIs among young adults reflects multiple barriers to accessing quality STI prevention services, including lack of health insurance or ability to pay, lack of transportation, and concerns about confidentiality (CDC, 2012). Among all males, 20- to 24-year-olds have the highest rate of chlamydia (1,343.3 cases per 100,000 people), gonorrhea (450.6 cases per 100,000 people), and syphilis (23.4 cases per 100,000 people) (CDC, 2012). Among all females, 20- to 24-year-olds have the highest rates of chlamydia (3,722.5 cases per 100,000 people), gonorrhea (584.2 cases per 100,000 people), and syphilis (3.8 cases per 100,000 people) (CDC, 2012).
Female students attending the University of Minnesota–Twin Cities report higher rates of sexual activity within their lifetime and within the past 12 months compared to male students.

Nearly four in five (78.3%) students report that they had zero or one partner within the past 12 months. On average, U of M students who were sexually active within the past 12 months had 2.2 sexual partners over the past 12-month period.

Among University of Minnesota–Twin Cities students who were sexually active within the past 12 months, more than three in four (77.9%) report that their most recent sexual partner was either a fiancé(e)/spouse or an exclusive dating partner.
Among U of M students sexually active within their lifetime, 61.1% used a condom the last time they engaged in vaginal intercourse, 31.2% used a condom during the last time they had anal intercourse, and 8.0% used a condom during their last oral sex experience. Percents are based solely on those who indicated they engaged in the activity.

Data analysis shows that of the 75.6% of U of M students who report being sexually active within their lifetime, 92.5% engaged in oral sex, 90.1% engaged in vaginal intercourse, and 24.9% engaged in anal intercourse.

The two most common methods that U of M students report using to prevent pregnancy the last time they engaged in vaginal intercourse are condoms (45.6%) and birth control pills (42.4%). The withdrawal method is reported by 14.2% of University of Minnesota–Twin Cities students. Other methods of pregnancy prevention reported by students are identified in the table.

Among U of M students, 5.4% report not using any method of pregnancy prevention the last time they engaged in vaginal intercourse.
A total of 3.2% of University of Minnesota–Twin Cities students has been involved in a pregnancy within the past 12 months. Of those involved in a pregnancy, 40.9% state it was unintentional. Among the unintentional pregnancies, 37.1% resulted in abortion, 22.2% resulted in miscarriage, 14.8% resulted in birth and parenting, and 25.9% are still pregnant.

Analysis shows that within the past 12 months, 19.6% of sexually active female students at University of Minnesota–Twin Cities have used emergency contraception. Among those who used emergency contraception, 67.1% have used it once, 19.7% have used it twice, and 13.2% have used it three or more times.

Among U of M students who have been sexually active within their lifetime, 6.9% report being diagnosed with a sexually transmitted infection (STI) within their lifetime and 1.7% report being diagnosed with an STI within the past 12 months. Chlamydia and genital warts/HPV are the STIs most commonly diagnosed within students’ lifetimes, and genital herpes is the STI most commonly diagnosed within the past 12 months.
Implications

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

Results from the 2013 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 2013 College Student Health Survey

<table>
<thead>
<tr>
<th>School</th>
<th>Location</th>
<th>Enrollment—Spring 2013*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anoka Technical College</td>
<td>Anoka, MN</td>
<td>3,366</td>
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<tr>
<td>Anoka-Ramsey Community College</td>
<td>Cambridge, MN Coon Rapids, MN</td>
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</tr>
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<td>Carleton College</td>
<td>Northfield, MN</td>
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<tr>
<td>Central Lakes College</td>
<td>Brainerd, MN Staples, MN</td>
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<tr>
<td>Concordia University, St. Paul</td>
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</tr>
<tr>
<td>Fond du Lac Tribal and Community College</td>
<td>Cloquet, MN</td>
<td>2,888</td>
</tr>
<tr>
<td>Itasca Community College</td>
<td>Grand Rapids, MN</td>
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<tr>
<td>Lake Superior College</td>
<td>Duluth, MN</td>
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<tr>
<td>M State</td>
<td>Detroit Lakes, MN Moorhead, MN Wadena, MN eCampus</td>
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<td>Mesabi Range Community &amp; Technical College</td>
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<td>Minnesota State University Moorhead</td>
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<tr>
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<td>The College of St. Scholastica</td>
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<td>Vermilion Community College</td>
<td>Ely, MN</td>
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*Includes full-time and part-time students.

### Appendix 1 References


## Appendix 2
### University of Minnesota–Twin Cities Students Survey Demographics Based on Student Response

<table>
<thead>
<tr>
<th></th>
<th>All Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Age (Years)</td>
<td>24.0</td>
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<tr>
<td>Age Range (Years)</td>
<td>18–66</td>
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<tr>
<td>18–24 Years</td>
<td>65.1%</td>
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<tr>
<td>25 Years or Older</td>
<td>34.9%</td>
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<tr>
<td>Average GPA</td>
<td>3.47</td>
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<td><strong>Class Status</strong></td>
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<tr>
<td>Undergraduate—Enrolled One Year</td>
<td>11.5%</td>
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<tr>
<td>Undergraduate—Enrolled Two Years</td>
<td>13.4%</td>
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<tr>
<td>Undergraduate—Enrolled Three Years</td>
<td>15.6%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Four Years</td>
<td>12.3%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Five or More Years</td>
<td>6.5%</td>
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<tr>
<td>Master’s, Graduate, or Professional Program</td>
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<td>Non-Degree Seeking</td>
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<tr>
<td><strong>Gender</strong></td>
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<tr>
<td>Male</td>
<td>39.9%</td>
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<tr>
<td>Female</td>
<td>59.6%</td>
</tr>
<tr>
<td>Transgender</td>
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<tr>
<td>Other</td>
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<tr>
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<tr>
<td><strong>Ethnic Origin</strong></td>
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<tr>
<td>American Indian/Alaska Native</td>
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<tr>
<td>Asian/Pacific Islander</td>
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<td>Black—Not Hispanic</td>
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<tr>
<td>Latino/Hispanic</td>
<td>2.8%</td>
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<tr>
<td>White—Not Hispanic (Includes Middle Eastern)</td>
<td>78.8%</td>
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<tr>
<td>Other</td>
<td>2.1%</td>
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<tr>
<td><strong>Current Residence</strong></td>
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<td>Residence Hall or Fraternity/Sorority</td>
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<tr>
<td>Other</td>
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<tr>
<td><strong>Enrollment in Online Classes This Term</strong></td>
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<tr>
<td>No Online Classes</td>
<td>76.5%</td>
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<tr>
<td>Some Online Classes</td>
<td>22.0%</td>
</tr>
<tr>
<td>All Online Classes</td>
<td>1.5%</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.

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

**High-Risk Drinking**
Consumption of five or more alcoholic 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.

**Student Loan Balance**
A student loan balance of $20,000 or more.


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