Hardin County, Iowa Substance Use Epidemiological Profile

Iowa Epidemiological Outcome Workgroup

March 2008

Executive Summary

In 2006, the Iowa Department of Public Health received funding from the federal Department of Health and Human Services, Substance Abuse and Mental Health Administration's Center for Substance Abuse Prevention, for a State Epidemiological Outcome Workgroup (Workgroup) to develop a state epidemiological profile. The Workgroup included representatives from agencies directly involved in preventing substance abuse in the state. In 2007 funding was continued; one of the deliverables was to produce a community level epidemiological profile. The Workgroup defined "community" as a county in Iowa. After a review of data, Hardin County was one of the counties selected for the community profiles.

The following criteria were developed during the writing of the 2006 Iowa Epidemiological Profile and were adapted to guide the data selection process for the 2007 Hardin County Profile:

- Data available at the local (Hardin County, Iowa) level;
- Sample covers age range;
- Data collected at least every two years;
- Measures directly related or strongly associated with ATOD use;
- Data pertain to consumption or consequence; and
- Data sets have adequate sample size.

Approximately forty indicators were included in the 2006 Iowa Epidemiological Profile, many of which could not be included in the Hardin County Epidemiological Profile because of low sample sizes and confidentiality regulations. Many youth consumption indicators were not included because the Iowa Youth Survey results for Hardin County are insufficient to represent the youth of the county as a whole due to two of the four school districts in Hardin County choosing not to participate in the 2005 Iowa Youth Survey. Key indicator findings include:

- **Alcohol** is the most cited substance of use by individuals entering substance abuse treatment in Hardin County.
- **Alcohol** consumption in Hardin County appears to be similar to state consumption, however, only three indicators exist for Hardin County.
- The rate of convictions for **alcohol**-related offenses in Hardin County is about one-third the state rate.
- There were 5 **Operating While Intoxicated** arrests per 1,000 Hardin County residents in 2005. This is similar to previous years and to the state rate.
- The average rate of **alcohol**-related suspensions and expulsions in Hardin County is about one-half the state rate. The average rate of **drug**-related suspensions and expulsions was approximately 34 percent lower than the state average.
- The reported rate of mothers using **tobacco** during pregnancy in Hardin County is approximately 17 percent of all pregnancies since 2005, which is about 1 percent higher than the state rate.

- Approximately 40 **tobacco** compliance checks were completed each fiscal year in Hardin County, with an average compliance rate of 87 percent from July 1, 2002 to June 20, 2007. The success rate in Hardin County is similar to the statewide success rate of tobacco compliance checks.
- Methamphetamine use appears to be higher in Hardin County than across Iowa.

The Hardin County Epidemiological Profile has several limitations due to the lack of available data. National datasets were not useful for Hardin County and probably are not useful for other rural counties in Iowa. Many state datasets were also not useful for Hardin County due to small sample sizes and confidentiality regulations. More than likely, other rural counties in Iowa are faced with the same problem. Finally, Iowa Youth Survey results, which is a near census of 6th-, 8th-, and 11th-graders across Iowa, were not trustworthy for Hardin County because two of the four school districts chose not to participate in 2005. If all school districts in Hardin County participate in the next Iowa Youth Survey in 2008, future Hardin County Epidemiological Profiles will be more comprehensive and useful.

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Introduction

Hardin County, Iowa, is located in north central Iowa and is abundant in both its history and scenery. The county encompasses approximately 570 square miles that include a rural landscape rich with agriculture, friendly communities, and lush wooded areas along the bluffs of the scenic Iowa River. Named after Colonel John J. Hardin, the county became official in 1851. The county seat is Eldora. There are twelve incorporated towns in Hardin County: Ackley, Alden, Buckeye, Eldora, Hubbard, Iowa Falls, New Providence, Owasa, Radcliffe, Steamboat Rock, Union, and Whitten. Estimates based on the 2000 U.S. Census predict that 17,791 people lived in Hardin County in 2006. This estimate is approximately 1,000 people lower than the reported 2000 population, reflecting the population decline experienced by many rural counties in Iowa. Estimates of the percent of young people (ages 19 and under) who lived in Hardin County in 2006 are similar to the state rate, both at 26% of the total population.

Among its assets, Hardin County holds excellent schools, a rapidly growing community college, a variety of health care providers and full-service hospital, employment opportunities, unique shopping districts, and an array of recreational activities and community events. Hardin County embraces progressive thinking while also preserving its rich cultural history. There are twenty-seven featured historic places in Hardin County in addition to its many parks and nature areas.

Background

In 2006, the Iowa Department of Public Health (IDPH) received funding from the federal Department of Health and Human Services, Substance Abuse and Mental Health Administration's Center for Substance Abuse Prevention, for a State Epidemiological Outcome Workgroup (SEOW). IDPH's Division of Behavioral Health is the Single State Agency for Substance Abuse Prevention and Treatment. IDPH administers the funding and activities of the SEOW. The first year of the SEOW process involved forming an epidemiological team to assess, analyze, interpret, and communicate data about Iowa substance consumption patterns and consequences. The two major products resulting from the first year of the SEOW were the state epidemiological profile (State Profile) and plans for a system to accommodate the ongoing collection of data for monitoring prevention outcomes. The State Profile and a shorter version, the Key Findings, can be found on the IDPH Web site www.idph.state.ia.us. In the second year of the project, the group was charged with developing a community level epidemiological profile. The Workgroup defined "community" as a county in Iowa. After a review of data, Hardin and Scott counties were selected for the county profiles.

The following criteria were developed during the writing of the 2006 Iowa Epidemiological Profile and were adapted to guide the data selection process for the Hardin County Profile:

- Data available at the local (Hardin County, Iowa) level;
- Sample covers age range;

- Data collected at least every two years;
- Measures directly related or strongly associated with ATOD use;
- Data pertain to consumption or consequence; and
- Data sets have adequate sample size.

Additional criteria were applied where similar indicators existed:

- Historical data available;
- Data available at the national level;
- Limited redundancy between indicators (some redundancy is acceptable); and
- Closeness to consequence (where applicable).

SEOW staff met with Hardin County representatives on October 29, 2007 in Iowa Falls. Eight people representing the following sectors of the county attended the meeting: law enforcement, treatment and prevention, education, religious organizations, and social services. The meeting was organized by the Hardin County Partnership for Youth. An overview of the State Profile was presented, along with sample figures for the Hardin County Profile. Feedback about data used, alternative data sources, and profile format was offered by the attendees and has been incorporated in the profile whenever applicable.

Results

Alcohol

Alcohol is the substance most frequently used by adults and youth in Hardin County, across Iowa, and across the United States. Alcohol is also the most cited substance of use by individuals from Hardin County on admission to substance abuse treatment services, reinforcing alcohol as the primary substance of use in Hardin County. Methamphetamine is the next most cited substance (Figure 1). These data only reflect the primary substance used at admission to treatment; additional substance use is not reported.

7 Per Capita Treatment Admissions 6 Per 1,000 People 15 and Older 5 4 3 2 1 0 2001 2002 2003 2004 2006 2000 2005 Alcohol 6.1 3.9 5.4 3.7 5.3 5.1 5.2 1.7 Methamphetamine 1.4 1.1 1.6 2.0 2.1 2.4 - Marijuana 1.2 1.6 1.3 1.7 1.0 1.6 1.9 Cocaine 0.2 0.0 0.1 0.1 0.1 0.1 0.3

Figure 1: Primary Substance of Use as Reported upon Entry into Treatment

Source: Substance Abuse Reporting System (SARS)

Consumption Patterns

Alcohol sales in Hardin County (measured as per capita gallon sales) have grown from 1.9 gallons in fiscal year 2003 to 2.3 gallons in fiscal year 2006, which mirrors an increase in alcohol sales for Iowa. Hardin County alcohol sales are approximately one-fifth higher than the state rate (Figure 2).

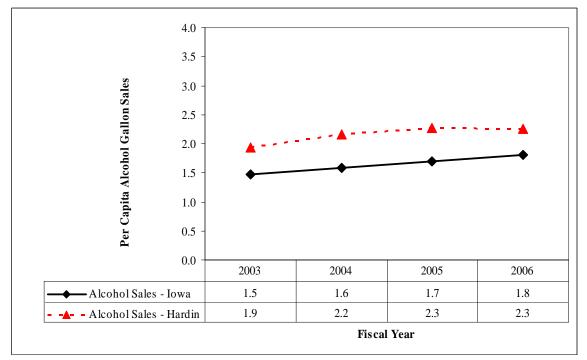
The per capita rate of people receiving treatment who reported alcohol as their primary substance of abuse is lower than the rate for the state as a whole (Figure 3). These data only reflect the primary substance of use at admission; additional substance use is not reported.

Women who use alcohol during pregnancy increase the risk of adverse health effects for their babies. In Hardin County, 0.5 percent of pregnant women who gave birth in 2006 reported they used alcohol. Since 2000, the percent of pregnant women who reported alcohol use during pregnancy in Hardin County has been similar to the percent for the state (Figure 4). This information was collected and reported on birth certificates. This reporting method does not include women who did not have live births because of termination of pregnancy. As a result, the real effect of alcohol on pregnancies cannot be estimated. Some mothers may hesitate to report using alcohol while pregnant because of potential legal or social ramifications, making alcohol usage underreported.

The Iowa Youth Survey (IYS) is a triennial census assessment of Iowa's 6th-, 8th-, and 11th-grade students' attitudes toward substance use and actual usage. The IYS was last completed in 2005 by a total of 98,246 Iowa students representing almost every public school district in Iowa (390 school districts total). Iowa Youth Survey data are reported at the state and county levels, as well as several other sub-state levels.

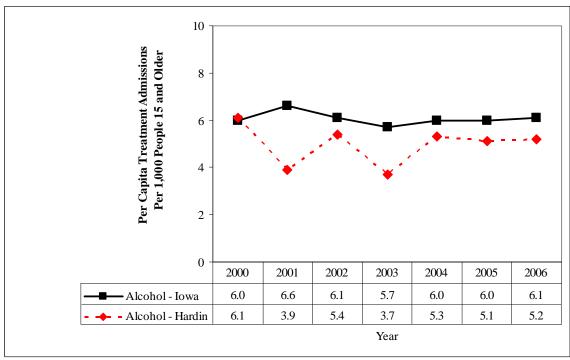
Two of the four school districts in Hardin County did not participate in the 2005 IYS, resulting in approximately 43% fewer students involved in 2005 than in 2002. Unfortunately, there is no way to assess how the two districts that did not participate differ from the two that did participate, making it quite risky to use 2005 Hardin County IYS data in this profile. Thus, all youth consumption indicators based on the IYS have not been included in this profile. Ideally, the school districts of Hardin County will participate in the next IYS, scheduled for the fall of 2008, so that useful youth data will be available. The youth consumption sections of this profile may be updated after the release of the 2008 IYS.

Figure 2: Per Capita Alcohol Gallon Sales



Source: State of Iowa Alcoholic Beverages Division

Figure 3: Alcohol as Primary Substance of Use as Reported upon Entry into Treatment



Source: SARS

10 Percent of Birth Mothers Reporting Alcohol Use During Pregnancy 8 6 4 2 0 2000 2001 2002 2003 2004 2005 2006 0.7 Births - Iowa 1.4 1.1 0.8 0.8 0.7 0.6 0 0.9 0.5 0.5 0.5 1.1 0.5 Births - Hardin Year

Figure 4: Percent of Women Who Had Live Births that Reported Alcohol Use during Pregnancy – All Ages

Source: Vital Records

Alcohol Consequences

The number of liquor law arrests in Hardin County has decreased from 2003 to 2005; the number of drunkenness arrests has increased by approximately the same number as liquor law arrests have fallen. The liquor law arrest rate in Hardin County has consistently been higher than the Iowa rate, whereas the drunkenness arrest rate has been lower (Figure 5). Drunkenness is defined as, "to drink alcoholic beverages to the extent that one's mental faculties and physical coordination are substantially impaired." Drunkenness does not include driving under the influence offenses. A liquor law violation is defined as, "the violation of laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, or use of alcoholic beverages." Liquor law violations do not include driving under the influence or drunkenness offenses.

Hardin County has a rate of convictions for alcohol-related offenses about two-thirds the rate for the state of Iowa. The rate of convictions for alcohol-related offenses in Hardin County and across Iowa remained relatively stable between 2003 and 2005, with an uptick in 2006. This may be due to a 2006 change in the Iowa Code, with underage drinking becoming a scheduled violation (similar to a speeding ticket), rather than a simple misdemeanor (Figure 6).

There were 91 Operating While Intoxicated (OWI) arrests in Hardin County in 2005, corresponding to a rate of 5 OWI arrests per 1,000 Hardin County residents (Figure 7). The terms OWI and DUI (Driving Under the Influence) are often used interchangeably, with jurisdictions across the country using one term or the other. The definition of DUI

found in the FBI Uniform Crime Reports is, "driving or operating a motor vehicle or common carrier while mentally or physically impaired as the result of consuming an alcoholic beverage or using a drug or narcotic." In Iowa, the method used to assess impairment is to test the blood alcohol content (BAC). As of July 1, 2003, the "legal limit" in Iowa is .08 BAC, lowered from .10 BAC. The change in the legal BAC limit may be responsible for the notable increase in the OWI arrest rate per 1,000 Hardin County residents from 2003 to 2004. Other possible reasons for the increase could be improved law enforcement or zero tolerance policies toward motor vehicle related alcohol offenses.

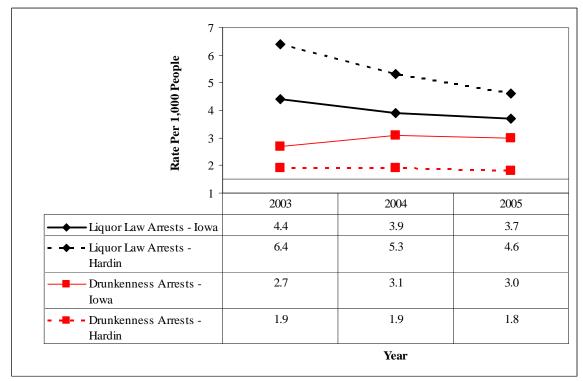
Approximately 3,000 youth were enrolled in Hardin County public schools for the 2005-2006 and 2006-2007 school years (Project EASIER). The alcohol or drug related expulsion and suspension rate for Hardin County was lower than the Iowa rate in both the 2005-2006 and 2006-2007 school years (Figure 8). The mean rate of alcohol-related suspensions and expulsions in Hardin County was lower than the state rate; the same was true for the mean rate of drug-related suspensions and expulsions (Figure 9).

Juvenile adjudications due to alcohol remained stable in Hardin County, whereas the state rate is trending downward. The rate of alcohol-related juvenile adjudications in Hardin County was lower than the state rate for fiscal year 2006 (Figure 10).

A recent study found that, of suicide victims who were tested for alcohol or drugs, approximately 33.3 percent were positive for alcohol and 16.4 percent were positive for opiates (Centers 2006). The number of suicides in Hardin County remained steady from 2000 to 2006, averaging approximately 5 suicides per year during that period. The suicide rate per 1,000 people for Hardin County and Iowa were similar (Figure 11).

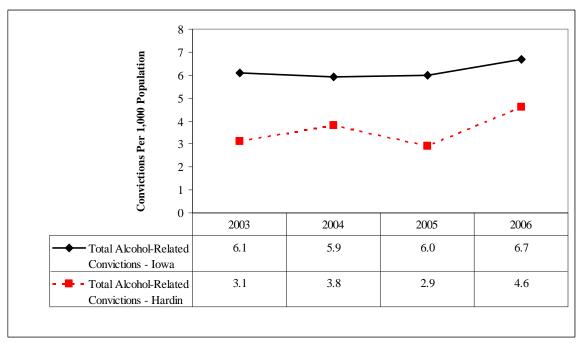
The number of Hardin County domestic violence cases where alcohol was present has remained stable from 2003 to 2005 (Table 1). The number of domestic violence cases with alcohol involvement averaged 22 percent of the total number of domestic violence cases, which is higher than the state average.

Figure 5: Rate of Drunkenness and Liquor Law Arrests per 1,000 Population



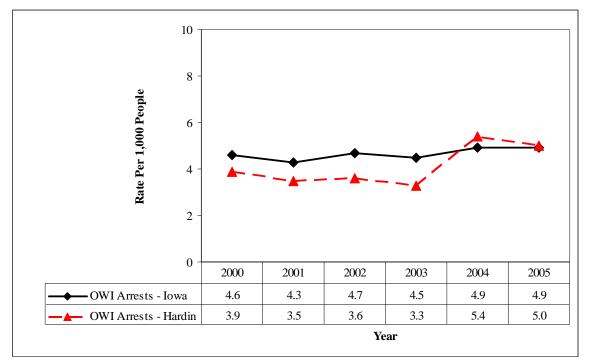
Source: Incident Based Uniform Crime Reporting System

Figure 6: Rate of Convictions for Alcohol-Related Offenses



Source: Iowa Court Information System, Justice Data Warehouse

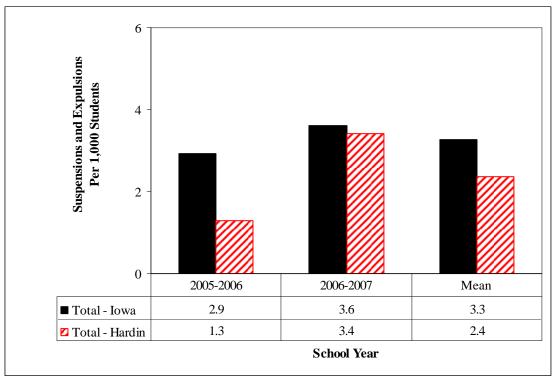
Figure 7: Rate of Operating While Intoxicated Arrests per 1,000 People



Source: Incident Based Uniform Crime Reporting System

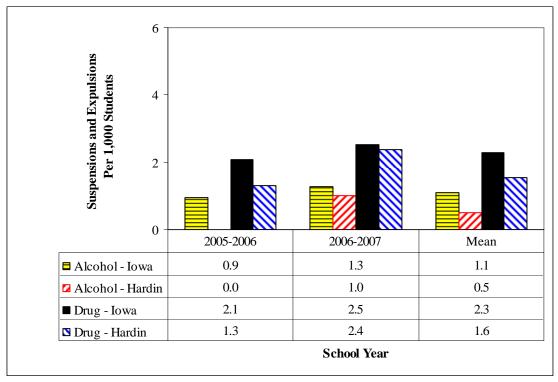
Note: As of July 1, 2003, the "legal limit" in Iowa is .08 BAC, lowered from .10 BAC.

Figure 8: School Suspensions and Expulsions per 1,000 Students – Total Due to Alcohol or Drugs



Source: Project EASIER

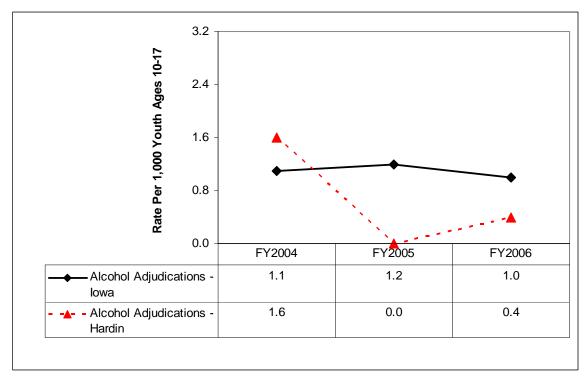
Figure 9: School Suspensions and Expulsions per 1,000 Students Due to Alcohol or Drugs



Source: Project EASIER

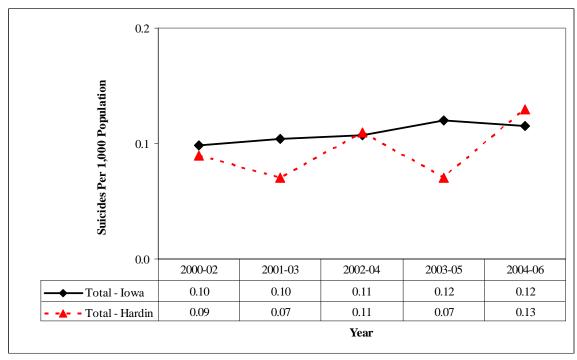
Note: No alcohol suspensions or expulsions recorded for Hardin County in 2005-2006.





Source: Iowa Court Information System, Justice Data Warehouse Note: No juvenile adjudications recorded for Hardin County in 2005.

Figure 11: Suicides per 1,000



Source: Vital Records

Table 1: Alcohol Involvement in Domestic Abuse Incidents

	2003	2004	2005
Number of Domestic Abuse Cases with Alcohol			
Involvement - Iowa	1,219	1,230	1,191
Number of Domestic Abuse Cases with Alcohol			
Involvement - Hardin	6	4	2
Percent of Domestic Abuse Cases with Alcohol			
Involvement out of All Domestic Abuse Cases -			
Iowa	15	18	16
Percent of Domestic Abuse Cases with Alcohol			
Involvement out of All Domestic Abuse Cases -			
Hardin	30	25	12

Source: Incident Based Uniform Crime Reporting System

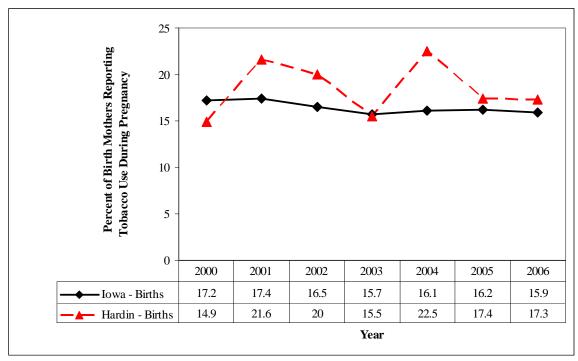
Tobacco

Consumption Patterns

The percent of Hardin County mothers reporting tobacco use during pregnancy has averaged 18.5 since 2000. The Hardin County rate of tobacco use during pregnancy has been higher than the state rate, but only by about 1 percent in 2005 and 2006 (Figure 12). This information was collected and reported on birth certificates and does not include women who did not have live births. This reporting method may underreport tobacco usage, since mothers may hesitate to report using tobacco while pregnant due to potential legal or social ramifications. The rate of tobacco use during pregnancy is approximately 20 times higher than the rate of alcohol use.

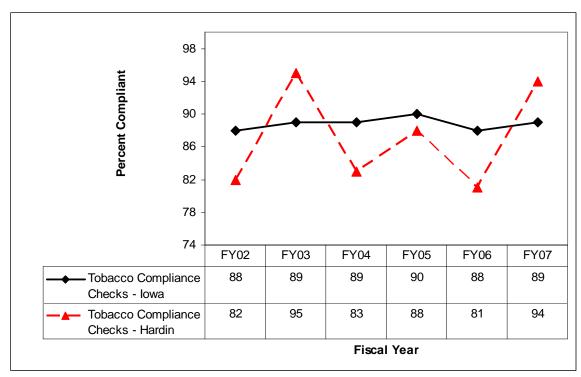
Tobacco compliance check data are compiled by the Iowa Alcoholic Beverages Division. In the last six fiscal years, there were no significant differences between Hardin County and state tobacco compliance check data (Figure 13). Approximately 40 tobacco compliance checks were completed between July 1, 2003 and June 30, 2007 each fiscal year in Hardin County, with an average compliance rate of 87 percent from FY02 to FY07.

Figure 12: Percent of Women Who Had Live Births that Reported Tobacco Use during Pregnancy – All Ages



Source: Vital Records

Figure 13: Tobacco Compliance Check – Percent Compliant

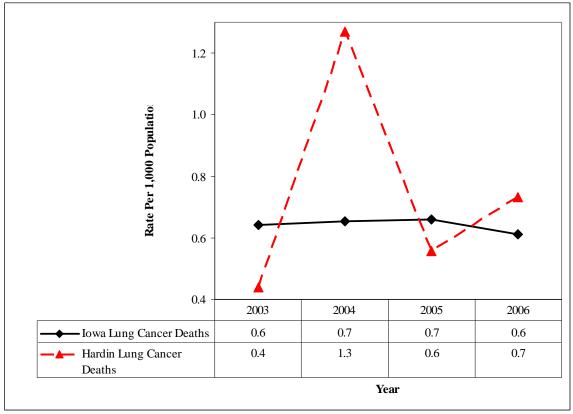


Source: State of Iowa Alcoholic Beverages Division

Tobacco Consequences

There is a lack of tobacco consequence data in Hardin County, as well as for the state of Iowa. Lung cancer death rate is the only indicator that met all requirements for inclusion in the profile. The lung cancer death rate for Hardin County is similar to the state rate when looking at the average from 2003 to 2006 (Figure 28).

Figure 14: Lung Cancer Deaths per 1,000



Source: Vital Records

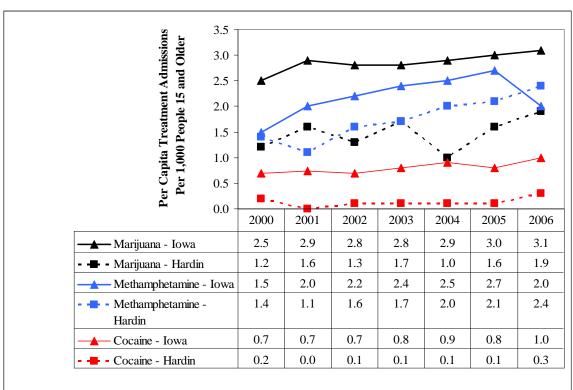
Illicit Drugs

National datasets suggest that illicit drug use in Iowa appears to be holding steady and its prevalence is lower than the national total. Methamphetamine, marijuana, and cocaine follow alcohol as the most cited substances of use by individuals from Hardin County on admission to substance abuse treatment services (Figure 1).

Consumption Patterns

The per capita rate of people receiving treatment who reported methamphetamine as their primary substance of use is higher for Hardin County than the state rate as a whole. However, the rates for marijuana and cocaine are lower in Hardin County than in Iowa (Figure 15). The rate of people entering treatment who reported methamphetamine as their primary substance of use increased from 2000 through 2005 but fell from 2005 to 2006. These data only reflect the primary substance at admission; additional substance use is not reported.

Figure 15: Marijuana, Methamphetamine, and Cocaine as Primary Substance of Use as Reported upon Entry into Treatment



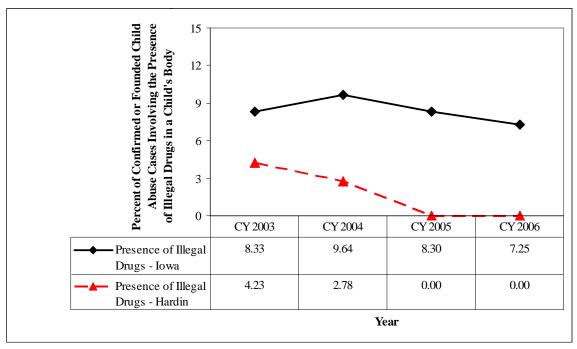
Source: SARS

Illicit Drug Consequences

The percent of confirmed or founded child abuse cases involving the presence of illegal drugs in a child's body, out of all confirmed or founded child abuse cases, has dropped in Hardin County since 2003 and remains lower than the state rate (Figure 16). The number of confirmed or founded child abuse cases involving manufacturing methamphetamine in the presence of a minor has been virtually nonexistent in Hardin County since the end of 2002, with only 7 cases recorded in 2006 (Figure 17). Many circumstances besides a change in the use of illegal substances could influence these numbers, including funding for law enforcement and the Department of Human Services, detection technology advances, changes in the Iowa Code, and public awareness and pressure. The enactment in May of 2005 of the Iowa Pseudoephedrine Control Act, which required selling pseudoephedrine products from behind the counter rather than on store shelves, probably helped to decrease the number of child abuse cases involving manufacturing methamphetamine in the presence of a minor.

These numbers included each confirmed type of abuse on each report of abuse for each child. Each child may be confirmed to have suffered multiple types of abuse on a single report and each child may have multiple reports. Presence of an illegal drug is defined as the presence of an illegal drug in a child's body as a direct and foreseeable consequence of the acts or omissions of the person responsible for the child's care. Illegal drugs used in this definition include cocaine, heroin, amphetamine, methamphetamine, marijuana, other illegal drugs, or combinations or derivatives of illegal drugs not prescribed by a health practitioner. Manufacturing methamphetamine in the presence of a minor is defined in Iowa Code 232.2 subsection 6, paragraph p. It occurs when the person responsible for the care of a child manufactures a dangerous substance or has possession of the methamphetamine precursors, ephedrine or pseudoephedrine, with the intent to use the product as a precursor or intermediary to a dangerous substance in the presence of a child.

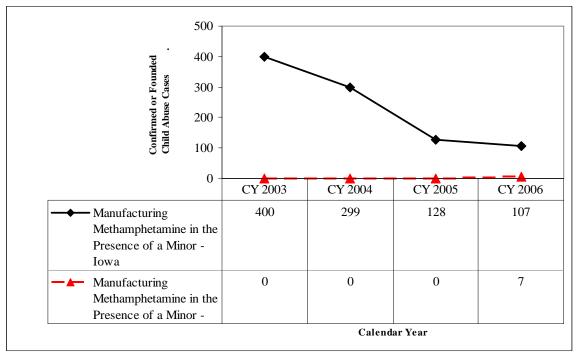
Figure 16: Percent of Confirmed or Founded Child Abuse Cases Involving the Presence of Illegal Drugs in a Child's Body



Source: Iowa Department of Human Services

Note: No juvenile adjudications recorded for Hardin County in 2005.

Figure 17: Number of Confirmed or Founded Child Abuse Cases Involving Manufacturing Methamphetamine in the Presence of a Minor



Source: Iowa Department of Human Services

Note: The Iowa Pseudoephedrine Control Act took effect in May 2005. This Act required that pseudoephedrine products be sold from behind the counter.

Discussion

General Comments

Hardin County, Iowa, is located in north central Iowa; there are twelve incorporated towns in Hardin County: Ackley, Alden, Buckeye, Eldora, Hubbard, Iowa Falls, New Providence, Owasa, Radcliffe, Steamboat Rock, Union, and Whitten. Estimates based on the 2000 U.S. Census predict that 17,791 people lived in Hardin County in 2006. Estimates of the percent of young people (ages 19 and under) who lived in Hardin County in 2006 are similar to the state rate, both at 26% of the total population.

Many indicators included in the 2006 Iowa Epidemiological Profile are not included in the Hardin County Profile because of insufficient numbers, confidentiality regulations, and the lack of participation in the 2005 IYS. These indicators include most adult consumption indicators, most youth consumption indicators, and some consequence data (the full list of indicators that were included in the 2006 Iowa Epidemiological Profile but not included here can be found in Appendix 2 on pages 24-25). Many of these same problems will probably exist for other rural Iowa counties, presenting a difficult barrier in assessing substance use and consequences.

Consumption Patterns of Alcohol, Tobacco, and Other Drugs in Hardin County, Iowa

Alcohol is the most widely used substance in Hardin County. There are only a few alcohol consumption indicators available for Hardin County. The three indicators available suggest that alcohol use in Hardin County is similar to state rates; however, no conclusions may be drawn from these data.

As with alcohol, available tobacco consumption indicators for Hardin County are scarce. The two indicators that are available suggest that tobacco use in Hardin County is similar to state rates.

Methamphetamine use in Hardin County appears to be higher than across the state, with other illicit drug use being lower in Hardin County. As with alcohol and tobacco consumption indicators, available illicit drug indicators are very limited. Therefore, additional data is needed to verify this finding.

Consequences of Substance Use in Hardin County, Iowa

The consequences of alcohol use in Iowa are severe and multi-faceted. They include: loss of life and injury; lost wages and loss of employment; increased insurance rates and hospitalization charges; costs associated with the legal system; incarceration; and property damage.

Legal ramifications of alcohol use in Hardin County are mostly lower than in Iowa, including drunkenness arrests, convictions for alcohol-related offenses, alcohol or drug

related school suspensions or expulsions, and juvenile adjudications. The OWI rate for Hardin County was similar to the state rate. Liquor law arrests was the only alcohol consequence indicator that was higher than the state rate.

There is a lack of quality tobacco consequence data for both Hardin County and for the state of Iowa as a whole. The lung cancer death rate for Hardin County is similar to the state rate over the past four years. In addition to smoking, lung cancer may be caused by exposure to environmental toxins, a particular concern for a rural county with a large farming industry.

The indicators used for illicit drug consequences do not provide enough information to assess. Two indicators that provide data on confirmed or founded child abuse cases and illicit drugs show that these cases are virtually nonexistent in Hardin County.

Conclusions

- Alcohol and tobacco use in Hardin County appears to be similar to the rest of the state.
- Methamphetamine use in Hardin County appears to be higher than in Iowa.
- National datasets are not useful for rural counties in Iowa, due to insufficient sample sizes.
- The Iowa Youth Survey was not administered in two Hardin County school districts in 2005, invalidating results at the county level.
- Many indicators used in the 2006 Iowa Epidemiological Profile were not available for Hardin County because of insufficient numbers and confidentiality regulations. This problem is faced by most rural counties in Iowa.
- Data collected at the county level are difficult to assess for a variety of reasons, including a lack of historical data, unclear or inconsistent collecting and reporting procedures, and small sample sizes or incidence rates.

Appendices

Appendix 1

Indicators Included in Hardin County Profile

Alcohol Consumption:

- Per Capita Alcohol Gallon Sales
- Alcohol as Primary Substance of Use as Reported upon Entry into Treatment
- Women Reporting the Use of Alcohol During Pregnancy

Tobacco Consumption:

- Women Reporting the Use of Cigarettes During Pregnancy
- Tobacco Compliance Checks

Illicit Drug Consumption:

• Primary Substance of Use as Reported upon Entry into Treatment

Alcohol Consequences:

- Drunkenness
- Liquor Law Arrests
- Alcohol-Related Convictions
- DUI Rates
- Juvenile Adjudications for Alcohol
- Suicides
- Alcohol-Related Domestic Violence Arrests

Tobacco Consequences:

• Lung Cancer Deaths

Illicit Drug Consequences:

- Presence of Illegal Drugs in Confirmed or Founded Child Abuse Cases
- Manufacturing Methamphetamine in the Presence of a Minor

Other Indicators:

- ATOD-Related Expulsions and Suspensions
- School Enrollment

Appendix 2

Indicators Included in Iowa Epidemiological Profile but not in Hardin County Profile

These indicators were not included in the Hardin County Profile for a number of reasons. Some indicators were not collected at the county level, others had insufficient sample sizes, and others were suppressed to protect confidentiality.

Alcohol Consumption:

- 30-Day Alcohol Use (both adult and youth)
- Binge Drinking (both adult and youth)
- Heavy Drinking (adult)
- 30-Day Driving After Drinking Alcohol (both adult and youth)
- Perception of Risk (both adult and youth)
- Age of First Use of Alcohol

Tobacco Consumption:

- 30-Day Use of Other Tobacco Products
- Heavy Smoking (youth)
- Perception of Risk (both adult and youth)
- 30-Day Use of Cigarette Use (both adult and youth)
- Age of First Use of Cigarettes

Illicit Drug Consumption:

- 30-Day Marijuana Use (adult)
- 30-Day Any Illicit Drug Use Other Than Marijuana
- Perception of Risk (both adult and youth)
- 30-Day Marijuana Use (youth)
- 30-Day Illicit Drug Use
- Age of First Use of Marijuana

Alcohol Consequences:

- Alcohol Dependence or Abuse
- Alcohol-Involved Drivers Among All Drivers in Fatal Crashes
- Alcoholic Cirrhosis Deaths

Illicit Drug Consequences:

- New AIDS Cases and Annual HIV/AIDS Rates Due to Drug Use
- Illicit Drug Dependence or Abuse
- Juvenile Adjudications for Illegal Drugs

• Drug Possession Arrests

Other Indicators:

• School Attendance

Appendix 3

Data Sources

Data Sources

BRFSS (Behavior Risk Factor Surveillance System) - http://www.cdc.gov/brfss/index.htm

Certified Annual Report – Iowa Department of Education, Certified Annual Report (School attendance data)

Iowa Alcoholic Beverages Division – http://www.iowaabd.com/tobacco/index.jsp

Iowa Court Information System, Justice Data Warehouse

Iowa Department of Public Safety, Incident Based Uniform Crime Reporting System http://www.dps.state.ia.us/commis/ucr/index.shtml

Iowa Vital Records

Iowa Youth Survey -

http://www.state.ia.us/government/dhr/cjjp/iys/YouthSurvey/ythsurvey.html

Project EASIER – Iowa Department of Education, Project EASIER Fall Enrollment File

Project EASIER – Iowa Department of Education, Project EASIER Spring Suspension and Expulsion File

SARS – Iowa Department of Public Health – Substance Abuse Reporting System 2007

Suicides – Iowa Department of Public Health

http://www.idph.state.ia.us/eh/common/pdf/health_statistics/2004/vital_stats_2004.pdf