Health and Health-Related Behaviors
Minnesota Postsecondary Students
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Introduction

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

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

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

Across the state of Minnesota, 11 two-year and four-year postsecondary schools joined together with Boynton Health Service at the University of Minnesota in spring 2012 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. The data from one school were excluded from the comprehensive data set because of a low response rate and concerns about the representativeness of the data. Of the 19,992 students at the 10 schools included in the comprehensive data set who received a survey, 6,170 students completed the survey, for an overall response rate of 30.9%.

This report highlights the findings of this comprehensive survey and serves as an essential first step in identifying health and health-related behavior issues affecting college students. Boynton Health Service hopes that the information contained in this report will be helpful to college and university leaders as they strive to develop programs and policies that will assure a safe institutional environment, promote access to health care and essential services, encourage responsible student decision making and behavior, and contribute to the health, well-being, and academic success of students enrolled in their schools. The survey results are also intended to raise awareness among state and local policymakers and community leaders concerning the importance of the health of college students to the overall educational, health, and economic status of Minnesota.
Survey

Methodology

Undergraduate and graduate students enrolled in 11 postsecondary institutions in Minnesota completed the 2012 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 (two) and $500 (one) at a variety of stores. In addition, all students who responded to the survey were entered into eight separate drawings for an iPod Touch™ 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

The data from one school were excluded from the comprehensive data set because of a low response rate and concerns about the representativeness of the data. A total of 19,992 undergraduate and graduate students from the 10 colleges and universities in Minnesota included in the comprehensive data set were invited to participate in the 2012 College Student Health Survey (see Appendix 1 for a list of participating schools).

In addition to the 19,992 randomly selected students, an oversample of 1,234 students who attended one of these 10 Minnesota schools and were identified as veterans of the United States Armed Forces were also invited to participate in the survey. The survey results for the oversample of veterans will be treated as a separate report.

2012 College Student Health Survey Methodology Highlights

- 19,992 students from 10 Minnesota colleges and universities were randomly selected to participate in this survey.
- 6,170 completed the survey.
- 30.9% of the students responded.
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 (89.0%) and nationwide (84.4%) report excellent, very good, or good health. At the same time, young adults have relatively low rates of health insurance and preventive care utilization. In Minnesota, 83.1% of 18- to 24-year-olds report some kind of health care insurance, and nationwide the number is 73.7%. More young males (28.8%) than young females (23.8%) lack health insurance coverage. Among all age groups, young adults (73.8%) are least likely to identify a usual place for medical care.
Many health insurance plans allow dependents under the age of 25 to remain covered by their parents’ insurance while attending a postsecondary institution. Therefore, students who attend postsecondary institutions tend to have higher rates of health insurance coverage than those who do not.

Students who completed the 2012 College Student Health Survey report an overall uninsured rate of 8.9%. Males have a higher uninsured rate compared to females (12.5% vs. 7.6%, respectively). International students report an uninsured rate of 31.6%.

Students ages 25–29 report the highest uninsured rate. The lowest uninsured rate is among students ages 18–19. This rate may be a reflection of parental health insurance coverage for 18- and 19-year-old students.

More than one-third (35.7%) of all students report having a spouse, and 15.8% of these students report their spouse is uninsured.

More than one in four (27.1%) students report having dependent children. Of these dependent children, 7.5% 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.1

Among students who completed the 2012 College Student Health Survey, those with health insurance report on average 0.6 fewer sick days in the past 30 days than students without health insurance.

Students with health insurance report higher rates of diagnosed chronic conditions and of diagnosed mental health conditions compared to students without health insurance.

Female students who completed the 2012 College Student Health Survey report obtaining routine medical exams, dental exams and cleanings, cholesterol checks, and blood pressure checks at higher rates than male students.
Health insurance coverage appears to have an impact on whether 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 students who completed the 2012 College Student Health Survey, the primary locations for obtaining many health care services appear to be a community clinic and a private practice.
Students with health insurance obtain hepatitis A, hepatitis B, meningitis, and influenza vaccinations at higher rates than students without health insurance.

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

Compared to male students who completed the 2012 College Student Health Survey, female students 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.

Students who completed the 2012 College Student Health Survey 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 48.5% of all students reporting having this diagnosis. The acute condition diagnosed most frequently within the past 12 months was urinary tract infection, with 8.7% of students reporting having this diagnosis. Overall, 60.7% of students report being diagnosed with at least one acute condition within their lifetime, and 16.1% 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 college students.

The two most common chronic conditions diagnosed in students who completed the 2012 College Student Health Survey are allergies (40.5% lifetime) and asthma (17.5% lifetime). Nearly three in five (58.7%) students report being diagnosed with at least one chronic condition within their lifetime, and nearly one in four (22.3%) report being diagnosed with at least one chronic condition within the past 12 months.
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, 35.7% are minorities, 56.8% are female, and 33.1% are age 25 or older. In addition, approximately 671,616 foreign students are studying at U.S. colleges and universities. This diversity presents a myriad of counseling concerns related to multicultural and gender issues, life transition, stress, career and developmental needs, violence, interpersonal relationships, and serious emotional and psychological problems. This array of mental health problems represents ever-increasing challenges as postsecondary institutions strive to meet the needs of their students.

National Comparison

This section examines areas related to the mental and emotional status of college and university students. Recent research shows that young adults in the United States have relatively high rates of mental health problems compared to other age groups. 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 Statistic Manual of Mental Disorders-IV, (29.9%); and serious mental illness, i.e., mental illness that results in functional impairment, (7.7%), major depressive episode (8.2%), and having serious thoughts of suicide (6.6%). More than one in 10 (10.9%) young adults between the ages of 18 and 25 have received treatment for a mental health problem in the previous year.
For students who completed the 2012 College Student Health Survey, depression and anxiety are the two most frequently reported mental health diagnoses for both lifetime and the past 12 months.

Among all students, 36.9% report being diagnosed with at least one mental health condition within their lifetime. Females report being diagnosed with a mental health condition within their lifetime and within the past 12 months at higher rates than males, which is consistent with gender differences seen in national data.

Additional analysis shows that 23.2% report being diagnosed with two or more mental health conditions within their lifetime.
The most commonly experienced stressors among students who completed the 2012 College Student Health Survey are the death or serious physical illness of someone close to them and roommate/housemate conflict. A total of 43.7% of students report experiencing one or two stressors within the past 12 months, and 22.7% 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, 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.
More than one-fourth (26.4%) of students who completed the 2012 College Student Health Survey report they are unable to manage their stress level. Additional analysis shows that among these students, 18.7% also report they were diagnosed with depression within the past 12 months. Nearly three-fourths (73.6%) of students report they are able to manage their level of stress. Only 5.7% 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 and chronic conditions as well as various mental health conditions. For example, 19.5% of students with unmanaged stress levels report being diagnosed with anxiety within the past year compared to only 6.8% of students with managed stress levels reporting the same diagnosis.

Among students who completed the 2012 College Student Health Survey, depression is the mental health condition most frequently reported within their lifetime. Females report being diagnosed with depression—both lifetime and the past 12 months—at higher rates than males.
Students ages 30–39 report the highest rate of being diagnosed with depression within their lifetime. The proportion of all students who report being diagnosed with depression within the past 12 months increases with age.

Overall, 12.0% of students who completed the 2012 College Student Health Survey 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 students also report a higher rate of medication use for mental health problems other than depression than male students. Overall, 8.6% of students report taking medication for a mental health problem other than depression.
Among students who completed the 2012 College Student Health Survey, 0.4% of males and 3.9% of females report being diagnosed with anorexia and/or bulimia within their lifetime.

In response to a question that asked all students how many of the past seven days they got enough sleep so they felt rested when they woke up in the morning, more than one-half (52.8%) 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 55.4% of students who report receiving zero to one day per week of adequate sleep also report the ability to manage their stress, whereas 90.2% 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 (31.9%) and 21- to 25-year-olds (35.8%) report current cigarette use. More than one in four (28.1%) full-time college students smoked cigarettes at least one time in the previous year; fewer than one in five (16.4%) smoked cigarettes at least one time in the previous 30 days; and fewer than one in 10 (7.6%) smoke cigarettes daily. Among young adults ages 18–25, 6.4% used smokeless tobacco in the previous month. Current cigarette smokers are more likely to use other tobacco products, alcohol, or illicit drugs than nonsmokers. Among all current smokers, 45.3% have stopped smoking for at least one day in the preceding 12 months. Of the 15 million college students in the United States, an estimated 1.7 million will die prematurely due to smoking-related illnesses. Clearly the current level of tobacco use among college students poses a major health risk.
The current tobacco-use rate for students who completed the 2012 College Student Health Survey is 21.4%, with a daily tobacco-use rate of 9.3%. Males report higher rates of both current and daily tobacco use compared to females.

**Definition:**

**Current Tobacco Use**

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

The highest current tobacco use rates are found among students age 22 and older, and the lowest current tobacco-use rates are found among students ages 18–21.

The highest daily tobacco-use rate is found among students age 25 and older. Approximately one in seven (14.3%) students age 25 and older reports using tobacco daily.
Males are the predominant users of smokeless tobacco. Overall, 11.7% of male students report using smokeless tobacco during the past 30 days.

Among students who report using smoking tobacco in the past 30 days, 38.7% do not consider themselves smokers. Among students who do consider themselves smokers, 53.9% made at least one attempt to quit smoking over the past 12 months. These students made an average of 4.2 quit attempts during that same 12-month period.

For students who report using tobacco over the past 30 days, the percentage of those who say they smoke half a pack of cigarettes or more per day increases from 40.7% on a weekday to 43.8% on a weekend day.
The average number of cigarettes smoked by students who are current tobacco users decreases from 12.1 per weekday to 10.9 per weekend day. For daily tobacco users, the average number decreases from 22.6 per weekday to 19.2 per weekend day.

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

Students were asked their opinion regarding a smoke-free policy on their campus. More than one in two (53.5%) non-tobacco users and more than one in five (21.4%) current tobacco users agree to strongly agree that their campus should implement a smoke-free policy prohibiting smoking both indoors and outdoors. Approximately one in three (32.2%) students believe that their campus has a smoke-free policy prohibiting smoking both indoors and outdoors.
## Secondhand Smoke Exposure

**All Students**

<table>
<thead>
<tr>
<th>Location</th>
<th>Nonsmokers</th>
<th>Smokers</th>
<th>All Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>On Campus</td>
<td>1.4</td>
<td>22.8</td>
<td>1.4</td>
</tr>
<tr>
<td>Residence Halls</td>
<td>*</td>
<td>3.1</td>
<td>*</td>
</tr>
<tr>
<td>Fraternity/Sorority</td>
<td>0.2</td>
<td>0.2</td>
<td>0.3</td>
</tr>
<tr>
<td>Bars/Restaurants</td>
<td>* 16.9</td>
<td>32.1</td>
<td>* 19.8</td>
</tr>
<tr>
<td>In a Car</td>
<td>11.6</td>
<td>* 49.5</td>
<td>* 18.9</td>
</tr>
<tr>
<td>Where I Live</td>
<td>3.7</td>
<td>9.9</td>
<td>35.9</td>
</tr>
<tr>
<td>Private Parties</td>
<td>6.6</td>
<td>9.7</td>
<td>18.0</td>
</tr>
<tr>
<td>Worksite</td>
<td>* 8.2</td>
<td>* 22.3</td>
<td>* 11.0</td>
</tr>
<tr>
<td>Parking Ramp/Garage</td>
<td>4.5</td>
<td>* 9.6</td>
<td>* 5.5</td>
</tr>
<tr>
<td>Other</td>
<td>5.7</td>
<td>15.2</td>
<td>24.3</td>
</tr>
<tr>
<td>N/A—Never Exposed</td>
<td>44.7</td>
<td>15.6</td>
<td>39.0</td>
</tr>
</tbody>
</table>

*Location not included in question.

### Secondhand Smoke Exposure—Per Week

**Nonsmokers vs. Current Smokers**

- **Nonsmokers**
  - 0 Hours: 21.9%
  - 2–6 Hours: 14.0%
  - Less Than 30 Minutes–1 Hour: 32.4%
  - 7 or More Hours: 43.9%

- **Current Smokers**
  - 0 Hours: 1.1%
  - 2–6 Hours: 9.7%
  - Less Than 30 Minutes–1 Hour: 14.0%
  - 7 or More Hours: 32.4%

For nonsmokers, 4.5% report being exposed to secondhand smoke two or more hours per week. For current smokers, 23.7% report being exposed to secondhand smoke for two or more hours per week.
Students who use tobacco tend to have a higher rate of high-risk drinking compared to students who are non-tobacco users (47.6% vs. 18.9%, 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 students is higher among tobacco users (18.0%) compared to non-tobacco users (4.0%). This is a more than fourfold increase in the rate.

As with high-risk drinking and marijuana use, the use of other illegal drugs is associated with tobacco use. Tobacco users use illegal drugs, other than marijuana, at nearly four times the rate of non-tobacco users (10.4% vs. 2.7%, 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, more than four in five (82.3%) have consumed alcohol at least one time, nearly four in five (78.6%) have consumed alcohol in the past year, and nearly two in three (65.0%) consume alcohol monthly. The rate of binge drinking (consuming five or more alcoholic beverages in a row in the previous two weeks) peaks between ages 21 and 25 at 45.5% and is 33.3% among 18- to 20-year-olds. Young adults ages 18 to 22 who are enrolled in college full time are more likely than their peers who are not enrolled in college full time to consume alcohol monthly and to binge drink.

Approximately one-half (49.1%) of full-time college students have used an illicit drug at least once in their lifetime, more than one-third (35.0%) of full-time college students have used an illicit drug at least once in the past year, and approximately one in five (19.2%) full-time college students have used an illicit drug in the last month. Marijuana is the illicit drug of choice for full-time college students, with nearly half (46.8%) of students having used the drug at least once in their lifetime and almost one-third (32.7%) having used it in the past year. Among full-time college students, 9.0% have used amphetamines, 3.5% have used cocaine, and 0.2% have used heroin in the previous year.
The rate for use of alcohol in the past 12 months is higher for females than for males who completed the 2012 College Student Health Survey (76.1% vs. 74.5%, respectively). The rate for use of alcohol in the past 30 days is higher among males compared to females (64.4% vs. 62.7%, respectively).

<table>
<thead>
<tr>
<th>Definition:</th>
<th>Past-12-Month Alcohol Use</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Any alcohol use within the past year.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Definition:</th>
<th>Current Alcohol Use</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Any alcohol use within the past 30 days.</td>
</tr>
</tbody>
</table>

The rate of alcohol use increases from **29.5%** among 18-year-old students to **79.1%** among 22-year-old students. The rate of this behavior peaks between the ages of 21 and 22.

Male students who completed the 2012 College Student Health Survey consume a higher average number of drinks per week than female students. The average number of drinks per week may serve as an indicator of overall alcohol use.
Male students report a higher rate of high-risk drinking compared to female students (34.4% vs. 21.8%, respectively).

Among students who completed the 2012 College Student Health Survey, the peak years for engaging in high-risk drinking are between ages 21 and 25.

Students who completed the 2012 College Student Health Survey who have engaged in high-risk drinking tend to overestimate this behavior among their peers (40.6%), while those who have not engaged in high-risk drinking more accurately estimate this behavior among their peers (26.5%). The estimate from all students is 30.0%, and the actual high-risk drinking rate is 25.1%.
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.

The average estimate blood alcohol content for both male and female students who completed the 2012 College Student Health Survey, based on the last time the student partied/socialized, is 0.06.

The average estimated BAC levels for students range from 0.04 to 0.08, with the estimated BAC for all survey respondents averaging 0.06. Students age 22 report an estimated BAC level of 0.08, which meets the legal driving limit for individuals of legal drinking age.
Approximately one in nine (11.3%) students report having driven a car while under the influence of alcohol or drugs. Among all students, 15.4% report missing a class and 15.9% 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 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 students who have engaged in high-risk drinking compared to students who have not engaged in high-risk drinking. More than one in four (28.0%) 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, 69.0% of all students who completed the 2012 College Student Health Survey report they would be “very likely” to call for emergency assistance.

The rate for any marijuana use within the past 12 months is 12.7% for all students who completed the 2012 College Student Health Survey, while the current marijuana use rate is 7.0% for all students. Both the past-12-month and current marijuana use rates are higher for males than for females.
The illicit drugs most commonly used by students are sedatives (2.5%) and cocaine (1.0%). Further analysis shows that among all students, 4.4% report having used at least one of the nine listed illicit drugs. In addition, 3.7% of students report using another person’s prescription drugs.
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. 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.

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. In 2007–2008, 65.6% of all undergraduates received some type of financial aid, and the average amount of aid received was $9,100. Nearly two in five (38.5%) undergraduate students borrowed money through a school loan, and the average loan amount was $7,100. 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. The average credit card debt per U.S. college student is $3,173. More than two-fifths (41.9%) of college students report they participated in some type of gambling activity during the previous school year.
Nearly one in four (23.2%) female students who completed the 2012 College Student Health Survey report experiencing a sexual assault within their lifetime, with 3.6% reporting having been assaulted within the past 12 months. Male students have experienced sexual assault at lower rates, with 5.0% reporting an assault within their lifetime and 1.1% reporting an assault within the past 12 months.

Among female students who completed the 2012 College Student Health Survey, more than one in four (28.6%) report experiencing domestic violence within their lifetime. More than one in seven (15.5%) male students report having had the experience.

Further examination of data shows that about more than one in seven (15.3%) students 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, 42.3% indicate they have been a victim of a sexual assault within their lifetime.
Sexual assault is defined as answering yes to at least one of the following two questions:

- Experienced actual or attempted sexual touching without your consent or against your will?
- Within your lifetime or during the past 12 months, have you:
  - Been hurt by threats, “put-downs,” or yelling by other or spouse/partner?
  - Been hurt by threats, “put-downs,” or yelling by other or spouse/partner?

Within Lifetime Within Past 12 Months

<table>
<thead>
<tr>
<th></th>
<th>Within Lifetime</th>
<th>Within Past 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>15.5</td>
<td>18.5</td>
</tr>
<tr>
<td>Females</td>
<td>28.6</td>
<td>20.1</td>
</tr>
</tbody>
</table>

Students who have not experienced sexual assault or domestic violence should be noted these rates are higher than the lifetime depression rate reported among students who have not experience sexual assault or domestic violence within their lifetime.

For students who report being victims of sexual assault, 46.9% also say they have been diagnosed with depression within their lifetime; 43.0% 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 students who have not experience sexual assault or domestic violence within their lifetime.

Of the students who indicate they have experienced a sexual assault within their lifetime (18.5%), only 34.7% state they reported the incident. Of the students who chose to report the incident, 33.2% reported it to the police and 32.2% reported it to a health care provider.

Nearly one in eight (12.0%) students report they have immediate access to a firearm, 19.8% for males and 9.3% for females. Of those who have access to a firearm, 49.3% report they have access to a handgun.

Further analysis shows that 9.2% of students 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 are more likely to report having engaged in a physical fight over the past 12 months compared to female students (8.1% vs. 2.7%, respectively).

Among students who rode a bicycle, only 23.6% report wearing a helmet always or most of the time while riding the bicycle. Approximately one in two (53.6%) 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 two-thirds (69.4%) of students report texting sometimes, most of the time, or always while driving.

Nearly one in three (30.7%) 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 miscellaneous causes.
More than one in three (36.2%) students report carrying some level of credit card debt over the past month. Of those who carry a monthly credit card balance, 37.6% 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 increases from 8.8% among undergraduate students enrolled one year to 24.4% among undergraduate students enrolled five or more years.

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

The percentage of students who report a student loan balance of $20,000 or more increases from 7.5% among undergraduate students enrolled one year to 44.9% among undergraduate students enrolled five or more years. Nearly one in two (46.6%) students enrolled in a master’s, graduate, or professional program report a student loan balance of $20,000 or more.

**Definition:**
Student Loan Balance
A student loan balance of $20,000 or more.
More than two in five (41.5%) students who completed the 2012 College Student Health Survey report engaging in gambling over the past 12-month period. Fewer than one in 10 (7.1%) students report gambling at least once a month. Of the 41.5% who gambled within the past year, 7.3% report spending $100 or more per month.
Results

Nutrition and Physical Activity

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

National Comparison

Research shows that young adults in the United States generally eat fewer fruits and vegetables but are more physically active compared to older adults. Young adults between the ages of 18 and 24 (20.3%) are slightly less likely than all adults (23.4%) to eat fruits and vegetable five or more times per day. 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. The rate of obesity among young adults ages 18 to 24 is 16.7%.

Nationwide, 83.7% of young adults between the ages of 18 and 24 compared to 76.1% of all adults report participating in at least one physical activity during the last month. 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 49.0%.
Body mass index (BMI) is a common and reliable indicator of body fatness. BMI equals the weight in kilograms divided by the height in meters squared (BMI = kg/m²). This table presents weight categories based on BMI ranges.

Approximately one in two (49.6%) students who completed the 2012 College Student Health Survey 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 survey respondents is 27.1, and the average BMI for female survey respondents is 26.2. For both male and female students, these averages fall within the overweight category. Nearly three in five (58.5%) males and nearly one in two (46.5%) females fall within the overweight or obese/extremely obese category.

Survey respondents were asked to report their engagement in any of the following activities in an attempt to control their weight: laxative use, diet pill use, and induced vomiting. Compared to males, females engage in these behaviors at higher rates.

### Table: BMI Category

<table>
<thead>
<tr>
<th>BMI Range</th>
<th>Weight Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Than 18.5</td>
<td>Underweight</td>
</tr>
<tr>
<td>18.5–24.9</td>
<td>Normal Weight</td>
</tr>
<tr>
<td>25.0–29.9</td>
<td>Overweight</td>
</tr>
<tr>
<td>30.0–39.9</td>
<td>Obese</td>
</tr>
<tr>
<td>40.0 and Greater</td>
<td>Extremely Obese</td>
</tr>
</tbody>
</table>

### Table: Weight-Related Behaviors

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Laxatives</td>
<td>3.4</td>
</tr>
<tr>
<td>Use Diet Pills</td>
<td>6.4</td>
</tr>
<tr>
<td>Induce Vomiting</td>
<td>2.5</td>
</tr>
</tbody>
</table>

### Diagram: BMI Category All Students

- Underweight: 22.2%
- Normal Weight: 47.4%
- Overweight: 27.4%
- Obese/Extremely Obese: 3.0%

### Diagram: BMI Category All Students by Gender

- Underweight
  - Males: 1.8%
  - Females: 3.5%
- Normal Weight
  - Males: 39.7%
  - Females: 50.0%
- Overweight
  - Males: 25.0%
  - Females: 24.4%
- Obese/Extremely Obese
  - Males: 21.5%
  - Females: 21.5%

### Diagram: Weight-Related Behaviors All Students by Gender

- Use Laxatives
  - All Students: 3.4%
  - Males: 1.9%
  - Females: 3.9%
- Use Diet Pills
  - All Students: 6.4%
  - Males: 4.1%
  - Females: 7.2%
- Induce Vomiting
  - All Students: 2.5%
  - Males: 0.9%
  - Females: 3.1%
Weight-Related Behaviors
All Students by BMI Category

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Laxatives</td>
<td>4.9</td>
</tr>
<tr>
<td>Use Diet Pills</td>
<td>2.7</td>
</tr>
<tr>
<td>Induce Vomiting</td>
<td>5.4</td>
</tr>
</tbody>
</table>

Underweight students 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.

Binge-Eating Behavior—Past 12 Months
All Students by Gender

As with other weight-related behaviors, females who completed the 2012 College Student Health Survey engage in binge eating at a higher rate than males. More than one in seven (15.1%) females report they engaged in binge eating over the past 12 months.

Binge-Eating Behavior—Past 12 Months
All Students by BMI Category

As BMI increases, the rate of reported binge eating behavior among students also increases.
Underweight students report the highest rate of never eating breakfast within the past seven days. The highest rates of fast-food consumption once a week or more and of eating at a restaurant once a week or more within the past 12 months are for students classified as obese/extremely obese.

A majority of students who completed the 2012 College Student Health Survey consume fruits and vegetables one to four times per day. Only 18.4% 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 3.2 times per day.

Across all BMI categories, the majority of students eat less than the recommended amount of fruits and vegetables per day. Only 15.8% 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. Students report higher rates of daily consumption of regular soda (14.6%) and coffee drinks with sugar (15.9%) than sports drinks (4.7%) and other sweetened beverages including energy drinks (4.5%).

Underweight students report a higher level of daily consumption of regular soda compared to normal weight, overweight, and obese/extremely obese 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 two in three (64.0%) 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 students, average BMI decreases as physical activity level increases.

Students classified as obese/extremely obese report a higher rate of moderate to high screen time than underweight, normal weight, and overweight students. Additional data analysis shows that nearly nine in 10 (88.2%) 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, 0.3% report zero screen time, 11.5% report a low level of screen time, 32.2% report a moderate level of screen time, and 56.0% 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 disease and infertility, and increasing educational attainment, career opportunities, and financial stability.¹⁸

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.¹⁹ 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.¹⁹ 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.²⁰

Due to a combination of behavioral, biological, and cultural reasons, sexually active young adults are at increased risk for acquiring sexually transmitted infections (STIs).²¹ 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.²¹ Among all males, 20- to 24-year-olds have the highest rate of chlamydia (1,187.0 cases per 100,000 people), gonorrhea (421.05 cases per 100,000 people), and syphilis (21.9 cases per 100,000).²¹ Among all females, 20- to 24-year-olds have the highest rates of syphilis (4.5 cases per 100,000 people) and chlamydia (3,407.9 cases per 100,000 people), while 15- to 19-year-olds have the highest rate of gonorrhea (570.9 cases per 100,000).²¹
Female students who completed the 2012 College Student Health Survey report higher rates of sexual activity, both within their lifetime and within the past 12 months, compared to male students.

On average, students had 2.2 sexual partners over the past 12-month period. This average is based on the experience of all students, both those who were sexually active and those who were not sexually active. More than four out of five (82.5%) students report that they had zero or one partner within the past 12 months.

Among students who were sexually active within the past 12 months, more than four out of five (86.0%) report that their most recent sexual partner was either a fiancé(e)/spouse or an exclusive dating partner.
Among students sexually active within their lifetime, 52.0% used a condom the last time they engaged in vaginal intercourse, 22.6% used a condom during the last time they had anal intercourse, and 8.8% 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 79.4% of students who report being sexually active within their lifetime, 93.9% engaged in vaginal intercourse, 86.5% engaged in oral sex, and 29.1% engaged in anal intercourse.

The two most common methods that students report using to prevent pregnancy the last time they engaged in vaginal intercourse are birth control pills (33.6%) and condoms (33.6%). The withdrawal method is reported by 11.3% of students. Other methods of pregnancy prevention reported by students are identified in the table below.

Among students who completed the 2012 College Student Health Survey, 11.9% report not using any method of pregnancy prevention the last time they engaged in vaginal intercourse.
A total of 5.5% of students who completed the 2012 College Student Health Survey has been involved in a pregnancy within the past 12 months. Of those involved in a pregnancy, 42.6% state it was unintentional. Among the unintentional pregnancies, 39.7% resulted in birth and parenting, 17.0% resulted in miscarriage, 17.0% resulted in abortion, and 0.7% resulted in birth and adoption.

Analysis shows that within the past 12 months, 13.8% of sexually active female students have used emergency contraception. Among those who used emergency contraception, 61.8% have used it once, 22.7% have used it twice, and 15.5% have used it three or more times within the past 12 months.

Among students who have been sexually active within their lifetime, 13.7% report being diagnosed with a sexually transmitted infection (STI) within their lifetime and 2.8% report being diagnosed with an STI within the past 12 months. Genital warts/HPV is the STI most commonly diagnosed within students’ lifetimes and within the past 12 months.

### Unintended Pregnancy Outcome—Past 12 Months
All Students

<table>
<thead>
<tr>
<th>Result</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involved in Pregnancy</td>
<td>5.5%</td>
</tr>
<tr>
<td>Not Involved in Pregnancy</td>
<td>94.3%</td>
</tr>
<tr>
<td>Intentional</td>
<td>0.2%</td>
</tr>
<tr>
<td>Unintentional</td>
<td>0.7%</td>
</tr>
<tr>
<td>Birth and Parenting</td>
<td>24.9%</td>
</tr>
<tr>
<td>Birth and Adoption</td>
<td>39.7%</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>17.0%</td>
</tr>
<tr>
<td>Abortion</td>
<td>0.7%</td>
</tr>
<tr>
<td>Still Pregnant</td>
<td>0.2%</td>
</tr>
<tr>
<td>Don't Know</td>
<td>3.2%</td>
</tr>
</tbody>
</table>

### Emergency Contraception Use—Past 12 Months
Sexually Active Female Students

<table>
<thead>
<tr>
<th>Result</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Used Emergency Contraception</td>
<td>13.8%</td>
</tr>
<tr>
<td>Did Not Use Emergency Contraception</td>
<td>86.0%</td>
</tr>
<tr>
<td>1 Time</td>
<td>9.1%</td>
</tr>
<tr>
<td>2 Times</td>
<td>61.8%</td>
</tr>
<tr>
<td>3 Times</td>
<td>22.7%</td>
</tr>
<tr>
<td>4 Times</td>
<td>0.7%</td>
</tr>
<tr>
<td>5+ Times</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

### Sexually Transmitted Infection Diagnosis—Lifetime and Past 12 Months
All Students

<table>
<thead>
<tr>
<th>Sexually Transmitted Infection</th>
<th>Percent Who Report Being Diagnosed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia</td>
<td>5.6</td>
</tr>
<tr>
<td>Genital Herpes</td>
<td>1.6</td>
</tr>
<tr>
<td>Genital Warts/HPV</td>
<td>6.4</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>1.0</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>0.2</td>
</tr>
<tr>
<td>Pubic Lice</td>
<td>2.4</td>
</tr>
<tr>
<td>Syphilis</td>
<td>0.2</td>
</tr>
</tbody>
</table>

At Least One of the Above Sexually Transmitted Infections: 13.7% (Within Lifetime) 2.8% (Within Past 12 Months)
Implications

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

Results from the 2012 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 2012 College Student Health Survey

<table>
<thead>
<tr>
<th>School</th>
<th>Location</th>
<th>Enrollment—Spring 2012*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bemidji State University</td>
<td>Bemidji, MN</td>
<td>6,870^2</td>
</tr>
<tr>
<td>Century College</td>
<td>White Bear Lake, MN</td>
<td>15,219^2</td>
</tr>
<tr>
<td>Concordia University</td>
<td>St. Paul, MN</td>
<td>2,800^3</td>
</tr>
<tr>
<td>Martin Luther College</td>
<td>New Ulm, MN</td>
<td>655^4</td>
</tr>
<tr>
<td>Minnesota West Community and Technical College</td>
<td>Canby, MN</td>
<td>5,068^2</td>
</tr>
<tr>
<td></td>
<td>Granite Falls, MN</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jackson, MN</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pipestone, MN</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Worthington, MN</td>
<td></td>
</tr>
<tr>
<td>Rochester Community and Technical College</td>
<td>Rochester, MN</td>
<td>8,206^2</td>
</tr>
<tr>
<td>Southwest Minnesota State University</td>
<td>Marshall, MN</td>
<td>7,732^2</td>
</tr>
<tr>
<td>St. Catherine University</td>
<td>Minneapolis, MN</td>
<td>5,227^5</td>
</tr>
<tr>
<td>St. Cloud State University</td>
<td>St. Cloud, MN</td>
<td>22,024^2</td>
</tr>
<tr>
<td>St. Cloud Technical and Community College</td>
<td>St. Cloud, MN</td>
<td>6,300^2</td>
</tr>
<tr>
<td>Winona State University</td>
<td>Winona, MN</td>
<td>9,691^2</td>
</tr>
</tbody>
</table>

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

### 2012 College Student Health Survey Demographics Based on Student Response

<table>
<thead>
<tr>
<th></th>
<th>All Students</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average Age (Years)</strong></td>
<td>27.1</td>
</tr>
<tr>
<td><strong>Age Range (Years)</strong></td>
<td></td>
</tr>
<tr>
<td>18–24 Years</td>
<td>56.8%</td>
</tr>
<tr>
<td>25 Years or Older</td>
<td>43.2%</td>
</tr>
<tr>
<td><strong>Average GPA</strong></td>
<td>3.37</td>
</tr>
<tr>
<td><strong>Class Status</strong></td>
<td></td>
</tr>
<tr>
<td>Undergraduate—Enrolled One Year</td>
<td>20.9%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Two Years</td>
<td>19.9%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Three Years</td>
<td>16.6%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Four Years</td>
<td>12.8%</td>
</tr>
<tr>
<td>Undergraduate—Enrolled Five or More Years</td>
<td>14.8%</td>
</tr>
<tr>
<td>Master’s, Graduate, or Professional Program</td>
<td>10.0%</td>
</tr>
<tr>
<td>Non-Degree Seeking</td>
<td>4.7%</td>
</tr>
<tr>
<td>Unspecified</td>
<td>0.3%</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>25.8%</td>
</tr>
<tr>
<td>Female</td>
<td>73.8%</td>
</tr>
<tr>
<td>Transgender</td>
<td>0.1%</td>
</tr>
<tr>
<td>Other</td>
<td>0.1%</td>
</tr>
<tr>
<td>Unspecified</td>
<td>0.2%</td>
</tr>
<tr>
<td><strong>Ethnic Origin</strong></td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>2.1%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>6.6%</td>
</tr>
<tr>
<td>Black—Not Hispanic</td>
<td>4.4%</td>
</tr>
<tr>
<td>Latino/Hispanic</td>
<td>2.8%</td>
</tr>
<tr>
<td>White—Not Hispanic (Includes Middle Eastern)</td>
<td>85.8%</td>
</tr>
<tr>
<td>Other</td>
<td>1.9%</td>
</tr>
<tr>
<td><strong>Current Residence</strong></td>
<td></td>
</tr>
<tr>
<td>Residence Hall or Fraternity/Sorority</td>
<td>20.1%</td>
</tr>
<tr>
<td>Other</td>
<td>79.9%</td>
</tr>
<tr>
<td><strong>Enrollment in Online Classes This Term</strong></td>
<td></td>
</tr>
<tr>
<td>No Online Classes</td>
<td>66.5%</td>
</tr>
<tr>
<td>Some Online Classes</td>
<td>22.7%</td>
</tr>
<tr>
<td>All Online Classes</td>
<td>10.8%</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.
References


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