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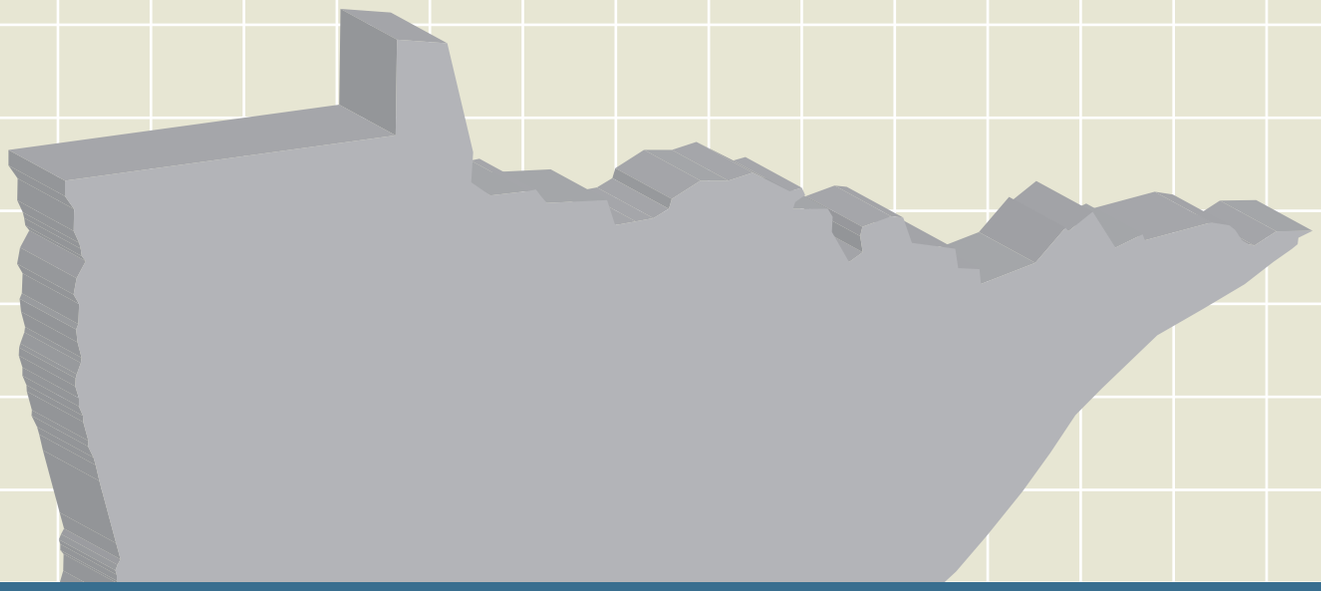
2021 College Student Health Survey Report



Health and Health-Related Behaviors

University of Minnesota–Duluth Students

Boynton Health
University of Minnesota

2021 College Student Health Survey Report

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University of Minnesota–Duluth Students

UNIVERSITY OF MINNESOTA
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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.

In the spring of 2021, thirteen postsecondary institutions in Minnesota joined with Boynton Health at the University of Minnesota 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.

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 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 thirteen postsecondary institutions in Minnesota completed the 2021 College Student Health Survey, developed by Boynton Health. As an incentive, all students who responded to the survey were entered into a drawing for Amazon gift cards valued at $1,000 (one), $500 (one), $250 (one), and $50 (five), and for an iPad Pro ($560). In addition, one student from each participating school was randomly selected to win a $100 Amazon gift card.

Randomly selected students were contacted through multiple mailings and emails:

- Invitational flier
- Invitation email
- Reminder flier and multiple reminder emails

University of Minnesota–Duluth Methodology Highlights

- **3,099** students from University of Minnesota–Duluth (UMD) were selected to participate in this survey.
- **1,130** students completed the survey.
- **36.5%** of the students responded.

2021 College Student Health Survey Flier

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 measures 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 complete the survey and 10 of them report a diagnosis of depression within their lifetime, the lifetime prevalence of depression in 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

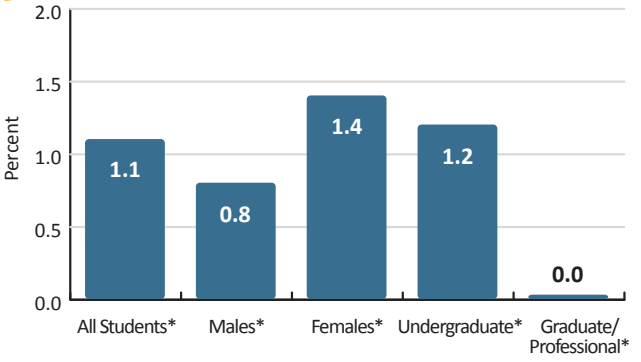
A student's current health influences his or her ability to realize immediate goals of academic success and graduation, while future health affects the ability to accomplish longer-term goals of finding and sustaining a career. Access to health care has been shown to improve health. Although institutions 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 aged 18–24 in the United States report good health. The majority of young adults in Minnesota (91.2%) report excellent, very good, or good health (CDC, 2019). At the same time, there are still young adults who report having no or inadequate healthcare coverage. In Minnesota, 89.4% of 18- to 24-year-olds and 86.6% of 25- to 34-year-olds report some kind of health care insurance (CDC, 2019). More young males (15.6%) than young females (11.8%) lack health insurance coverage (Schiller et al., 2018). Among all age groups, young adults (77.3%) are least likely to identify a usual place for medical care (Schiller et al., 2018).

Students attending the University of Minnesota–Duluth report an overall uninsured rate of **1.1%**. Females have a higher uninsured rate than females (**1.4%** vs. **0.8%**, respectively). Additional analysis shows that international students attending UMD report an overall uninsured rate of **0.0%**.

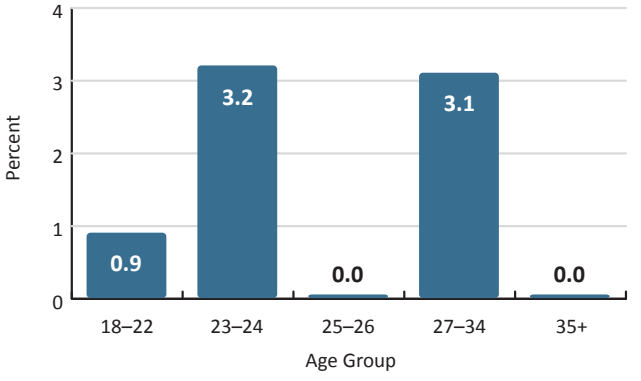
Health Insurance Status—Uninsured
All Students



*Does not include international students.

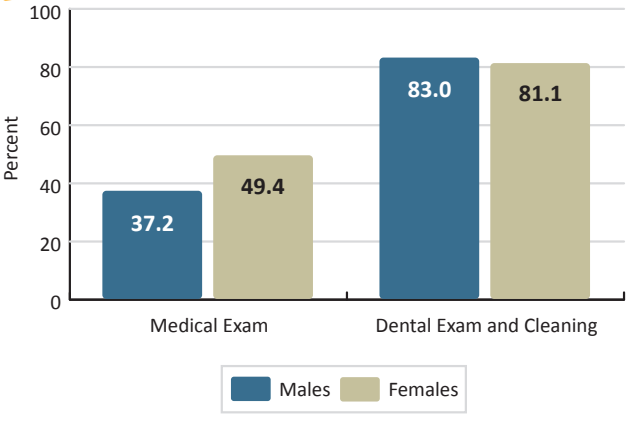
UMD students ages 23–24 report the highest uninsured rate (**3.2%**).

Health Insurance Status—Uninsured
All Students by Age Group



Compared to male UMD students, female students report obtaining routine medical exams at higher rates and routine dental exams at slightly lower rates.

Preventive Health Care—Past 12 Months
All Students by Gender



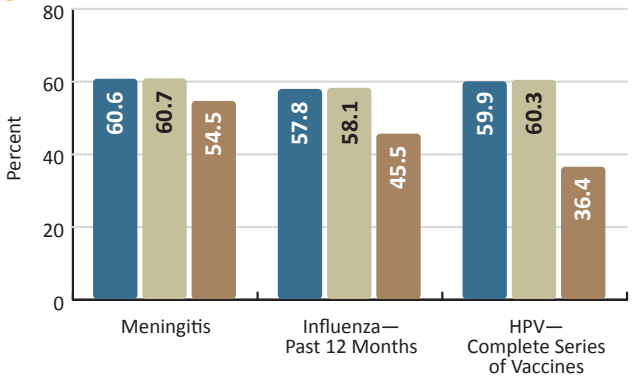
Health Care Service Utilization
All Students

Health Care Service	Percent	
Dental Care	91.6	0.4
Emergency Care (Physical Condition)	62.2	11.0
Mental Health Service (Emergency/Crisis)	35.3	7.8
Mental Health Service (Non-emergency)	52.8	27.6
Routine Doctor's Visit	85.9	7.1
Testing for Sexually Transmitted Infections (Includes HIV)	43.9	13.1
Treatment for Sexually Transmitted Infections (Includes HIV)	27.7	9.9

Obtained Service While in School
Received Service at School (Among Those That Received the Service)

Among University of Minnesota–Duluth students who have obtained non-emergency mental health service, **27.6%** received that care at the university.

Vaccination Status
All Students by Insurance Status



University of Minnesota–Duluth students with health insurance obtain meningitis, influenza, and HPV vaccinations at higher rates than students at the university without health insurance. Additionally, **52.2%** of males and **66.7%** of females at the university report obtaining a complete series of HPV vaccinations.

These immunizations are not currently required for students enrolled in postsecondary institutions.

Average Number of Days Affected by Illness—Past 30 Days
All Students by Gender

Illness	Average Number of Days Affected	
Poor Mental Health	7.7	10.8
Poor Physical Health	2.6	3.1

Males
Females

Compared to male students, female students at the University of Minnesota–Duluth report more days of poor mental health and of poor physical health.

Results

Mental Health

Mental health issues can have a profound impact on the ability of college and university students to engage fully in the opportunities presented to them. 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 and university students. Among undergraduates nationwide, 46.2% describe their race/ethnicity as other than white, 56.0% are female, and 28.7% are age 25 or older (USDOE, 2017). In addition, more than one million international students are studying at U.S. colleges and universities (USDOE, 2016). 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 issues 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 health 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 18- to 25-year-olds, 29.4% have had a 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) in the past year, 8.6% have had a serious mental illness (i.e., a mental illness that results in functional impairment), 15.2% have had a major depressive episode, and 11.8% have had serious thoughts of suicide (CBHSQ, 2019). More than one in six (17.2%) young adults ages 18–25 have received treatment for a mental health problem in the previous year (CBHSQ, 2019).

A relatively new area of study is the relationship between cumulative effects of childhood abuse (i.e., physical, sexual, and psychological or emotional abuse), commonly referred to as adverse childhood experiences (ACEs), and subsequent development of chronic physical and mental health conditions (CDC, 2014; Chapman, 2003; Edwards, 2003). Findings from the Minnesota Behavioral Risk Factor Surveillance System (BRFSS) survey, which includes ACEs, show that 60% of adults report two or more ACEs, while 15% report five or more. In the Minnesota study, 36% of adults with an ACE score of 5 or more report being diagnosed with depression, compared to 8% among adults with an ACE score of 0 (MDH, 2013).

Among University of Minnesota–Duluth students, anxiety and depression are the two most frequently reported mental health diagnoses for both lifetime and the past 12 months.

Mental Health Condition Diagnosis—Lifetime and Past 12 Months

All Students

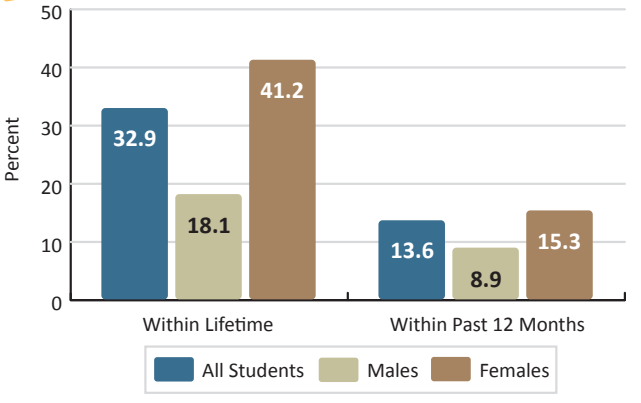
Mental Health Condition	Percent Who Report Being Diagnosed	
Anorexia	3.8	0.7
Anxiety	41.3	20.0
Attention Deficit Disorder	9.5	4.1
Bipolar Disorder	2.4	1.1
Bulimia	1.8	0.4
Depression	32.9	13.6
Obsessive-Compulsive Disorder	5.7	2.1
Panic Attacks	25.0	11.6
Post-Traumatic Stress Disorder	7.0	3.6
Seasonal Affective Disorder	13.1	7.2
Social Phobia/ Performance Anxiety	14.4	8.5

Within Lifetime | Within Past 12 Months

Among UMD students, **32.9%** report being diagnosed with depression within their lifetime, and **13.6%** report being diagnosed with depression within the past 12 months. Females report being diagnosed with depression at higher rates than males.

Depression Diagnosis—Lifetime and Past 12 Months

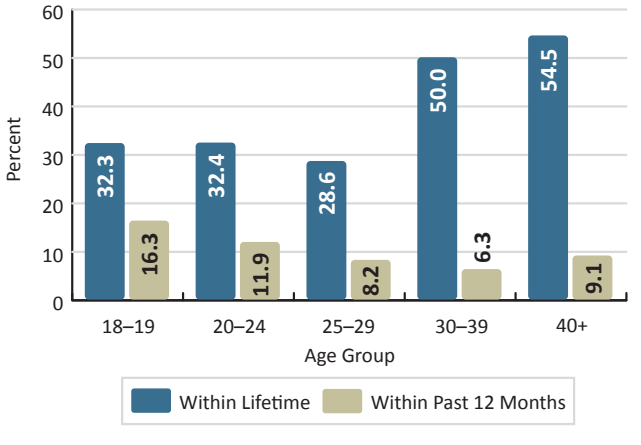
All Students by Gender



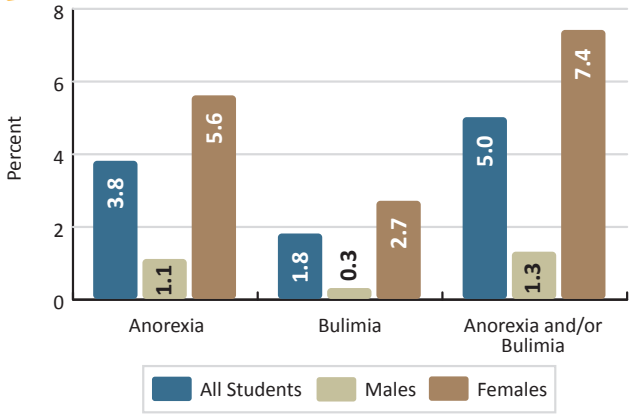
UMD students ages 40 and older report the highest rate of a depression diagnosis within their lifetime while students ages 18–19 report the highest rate of a depression diagnosis within the past 12 months.

Depression Diagnosis—Lifetime and Past 12 Months

All Students by Age Group

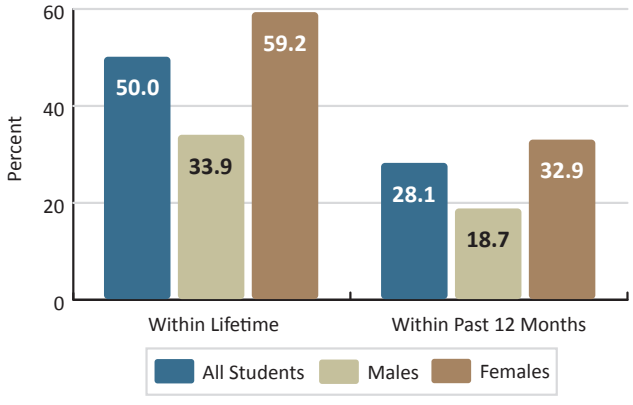


Eating Disorder Diagnosis—Lifetime
All Students by Gender



Among UMD students, **1.3%** of males and **7.4%** of females report being diagnosed with anorexia and/or bulimia within their lifetime.

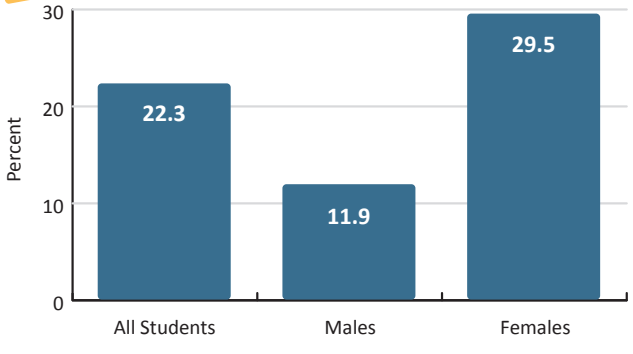
Any Mental Health Condition Diagnosis—Lifetime and Past 12 Months
All Students by Gender



Among UMD students, **50.0%** report being diagnosed with at least one mental health condition within their lifetime, and **28.1%** 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 **39.3%** of students report being diagnosed with two or more mental health conditions within their lifetime.

Currently Taking Medication for a Mental Health Condition
All Students by Gender

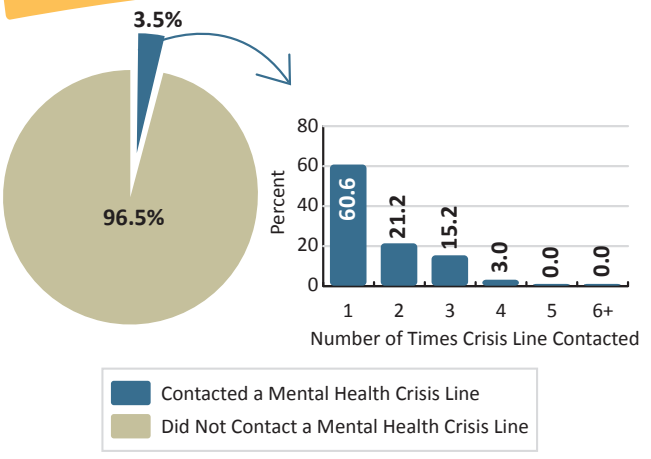


Overall, **22.3%** of UMD students report that they currently are taking medication for a mental health condition. Compared to males, females report a higher rate of this medication use, which correlates with their higher diagnosis rates for any mental health condition.

Among UMD students, **3.5%** report contacting a mental health crisis line within the past 12 months. Among these students, **60.6%** report contacting a crisis line one time within the past 12 months.

Mental Health Crisis Line Contacted—Past 12 Months

All Students



The most commonly experienced stressors among University of Minnesota–Duluth students were roommate/housemate conflict and the death or serious physical illness of someone close to them. A total of **39.5%** of students report experiencing one or two stressors within the past 12 months, and **28.2%** report experiencing three or more stressors over that same time period.

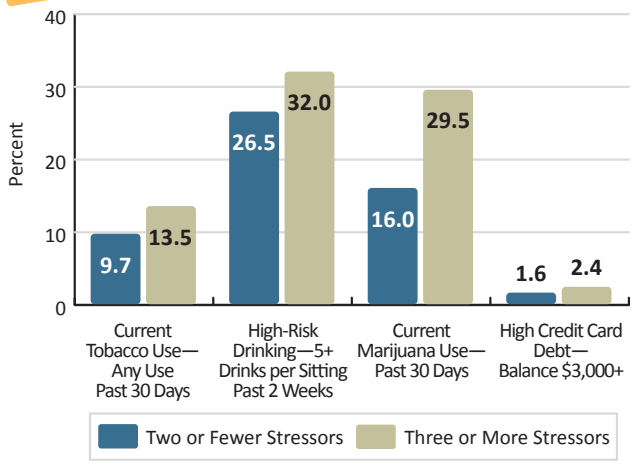
Mental Health Stressors—Past 12 Months

All Students

Stressor	Percent Who Report Experiencing Within Past 12 Months
Arrested	0.1
Attempted Suicide	1.4
Bankruptcy	0.4
Death of Someone Close to You	22.6
Diagnosed With a Serious Mental Illness	11.0
Diagnosed With a Serious Physical Illness	4.8
Excessive Credit Card Debt	3.1
Excessive Debt Other Than Credit Card	8.9
Failing a Class	9.0
Fired or Laid Off From a Job	7.5
Getting Married	0.8
Issues Related to Sexual Orientation	5.8
Lack of Health Care Coverage	3.8
Parental Conflict	20.4
Put on Academic Probation	2.7
Roommate/Housemate Conflict	30.1
Serious Physical Illness of Someone Close to You	22.2
Spouse/Partner Conflict (Includes Divorce or Separation)	4.9
Termination of Personal Relationship (Not Including Marriage)	17.9
Zero of the Above Stressors	32.3
One or Two of the Above Stressors	39.5
Three or More of the Above Stressors	28.2

Note: Items found in this table are based on the Holmes and Rahe Stress Scale (Homes and Rahe, 1967). The items included in the stress scale were adapted to college students.

Mental Health Stressors and Risky Behavior*
All Students

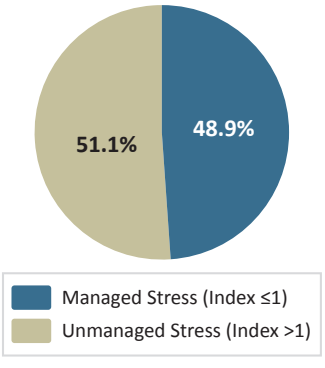


*Number of stressors is based on reported experiences within the past 12 months.

An association appears to exist between the reported number of stressors experienced within the past 12 months and various types of risk-taking behavior. UMD students experiencing three or more stressors within those 12 months have higher rates of high-risk drinking, current marijuana and tobacco use, and high credit card debt compared to students experiencing two or fewer stressors.

Ability to Manage Stress—Past 12 Months
All Students

In an attempt to measure effectiveness in managing stress, students are asked to rate their stress level and their ability to manage stress, each on a scale of 1 to 10. The reported stress level is then divided by the reported ability to manage stress. Any result greater than 1 means a student is not effectively managing his or her stress.



More than one-half (**51.1%**) of UMD students report that they are unable to manage their stress level. Additional analysis shows that, among these students, **20.4%** report a diagnosis of depression within the past 12 months. Nearly one-half (**48.9%**) of UMD students report that they are able to manage their level of stress; of these, **6.3%** report a diagnosis of depression within the past 12 months.

Stress and Diagnosis of Mental Health, Acute, and Chronic Conditions—Past 12 Months
All Students

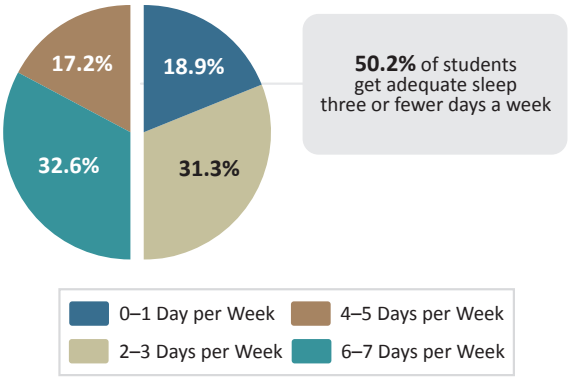
Condition	Percent Who Report Being Diagnosed Within the Past 12 Months	
Anxiety	13.9	25.5
Depression	6.3	20.4
Obsessive-Compulsive Disorder	1.5	2.7
Panic Attacks	6.9	16.1
Social Phobia/Performance Anxiety	4.8	12.1

Managed Stress (Index ≤1) Unmanaged Stress (Index >1)

An association appears to exist between unmanaged stress levels and higher rates of diagnosis for various mental health conditions. For example, **25.5%** of UMD students with unmanaged stress levels report being diagnosed with anxiety within the past year, compared to **13.9%** of students with managed stress levels reporting the same diagnosis.

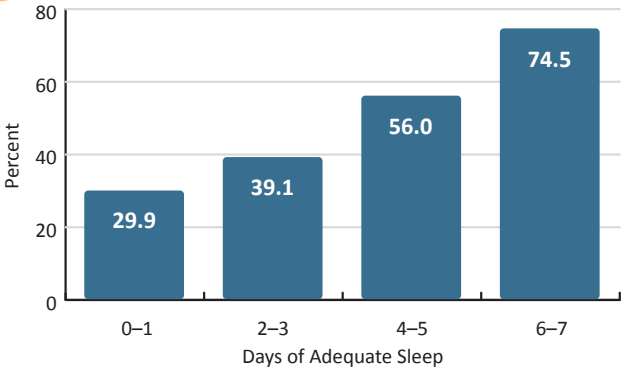
In response to a question asking UMD students how often in the past seven days they got enough sleep to feel rested when they woke up in the morning, one-half (**50.2%**) report receiving adequate sleep on three or fewer of the previous seven days.

Number of Days of Adequate Sleep—Past Seven Days
All Students



Receiving adequate sleep appears to have an impact on students' ability to manage stress. Only **29.9%** of UMD students who report receiving 0–1 day of adequate sleep in the past week report that they are able to manage their stress, compared to **74.5%** of students who report 6–7 days of adequate sleep in that period.

Adequate Sleep and Ability to Manage Stress*
All Students



*Days of adequate sleep is based on reported experiences in the past seven days and ability to manage stress is based on reported experiences within the past 12 months.

Impact of Health and Personal Issues on Academic Performance—Past 12 Months
All Students

Students were asked to respond to the following question:

During the past 12 months, how have the following affected your academic performance?

The response options were:

- I do not have this issue/not applicable
- I have this issue—my academics have not been affected
- I have this issue—my academics have been affected

Health or Personal Issue	Percent	
Alcohol Use	20.4	9.1
Any Disability (Learning, ADD/ADHA, Physical, etc.)	14.5	65.2
Chronic Health Condition	15.2	20.4
Concern for Family Member or Friend	42.8	33.9
Eating Disorder	9.9	23.6
Excessive Computer/Internet Use	56.8	45.7
Financial Difficulties	36.9	28.2
Food Insecurity	6.5	38.6
Homelessness	0.5	60.0
Marijuana Use	13.0	14.4
Mental Health Issue (Depression, Anxiety, etc.)	52.8	62.3
Pregnancy	0.6	33.3
Relationship Issue with Roommate/Housemate	26.8	29.4
Relationship Issue with Someone Other Than Roommate/Housemate	24.9	36.1
Serious Injury	3.8	43.9
Sexual Assault	4.9	42.3
Sexually Transmitted Infection	1.3	42.9
Sleep Difficulties	55.7	53.2
Stress	83.1	57.6
Upper Respiratory Infection (Cold/Flu, Sinus, Strep, etc.)	15.3	32.9

Report Having the Issue

Report the Issue Impacted Academics (Among Those Who Report Having the Issue)

The four most commonly reported issues among students at the University of Minnesota–Duluth are stress (**83.1%**), excessive computer/internet use (**56.8%**), sleep difficulties (**55.7%**), and any mental health issue (**52.8%**). Among students who report a particular issue, the issues with the greatest impact on academic performance are any disability (**65.2%**), any mental health issue (**62.3%**), homelessness (**60.0%**), and stress (**57.6%**).

Answering questions about events occurring before age 18, **48.9%** of UMD students report that a parent or adult in their home swore at them, insulted them, or put them down, and **40.3%** report living with someone who was depressed, mentally ill, or suicidal.

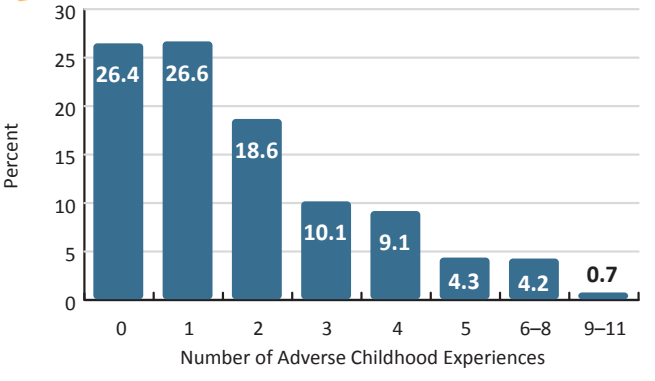
Adverse Childhood Experiences
All Students

Questions on adverse childhood experiences (ACEs) were developed in 2008 by the Centers for Disease Control and Prevention (CDC), with the goal of studying associations between childhood maltreatment and issues of health and well-being that appear later in life (CDC, 2014). A growing body of research supports the idea that childhood experiences of abuse, neglect, and family dysfunction are connected to adverse health outcomes in adulthood, including chronic disease, lower educational achievement, poor physical and mental health, lower economic success, and social problems.

ACEs Question (Questions pertain to events happening before age 18)	**Percent Who Responded Yes, Once, or More Than Once**
Did you live with anyone who was depressed, mentally ill, or suicidal?	40.3
Did you live with anyone who was a problem drinker or alcoholic?	20.1
Did you live with anyone who used illegal street drugs or who abused prescription medications?	13.0
Did you live with anyone who served time or was sentenced to serve time in prison, jail, or other correctional facility?	5.6
Were your parents separated or divorced?	23.7
How often did your parents or adults in your home ever slap, hit, kick, punch, or beat each other up?	11.7
How often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? (Do not include spanking.)	11.5
How often did a parent or adult in your home ever swear at you, insult you, or put you down?	48.9
How often did anyone at least 5 years older than you or an adult, ever touch you sexually?	6.7
How often did anyone at least 5 years older than you or an adult, try to make you touch them sexually?	3.9
How often did anyone at least 5 years older than you or an adult, force you to have sex?	1.2

Nearly three-fourths (**73.6%**) of UMD students report experiencing at least one adverse childhood experience.

Number of Adverse Childhood Experiences—Lifetime
All Students



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. This newfound freedom, coupled 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 both the long-term use of tobacco products and their subsequent negative health consequences.

National Comparison

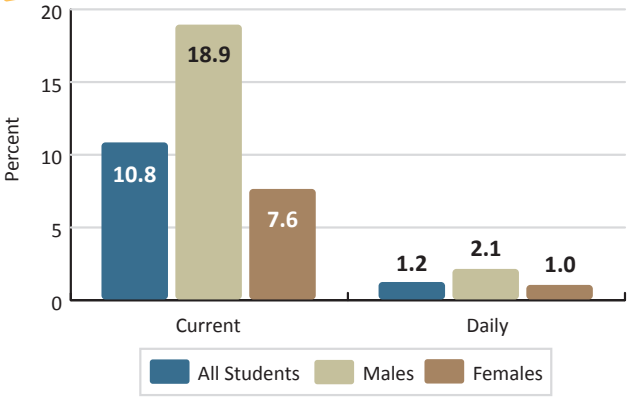
The use of cigarettes within the past 30 days among 18- to 25-year-olds declined from 40.8% in 2002 to 17.5% in 2019 (CBHSQ, 2020). The 30-day use among adults 26 and older was 18.2% in 2019 (CBHSQ, 2020). Among full-time college students, 16.0% smoked cigarettes at least one time in the previous year, about one in thirteen (7.9%) smoked cigarettes at least one time in the previous 30 days, and about one in 35 (2.5%) smoke cigarettes daily (Schulenberg et al., 2019). Approximately one-third (35.3%) of full-time college students vaped nicotine at least one time in the previous year (Schulenberg et al., 2019). Current cigarette smokers are more likely to use other tobacco products, alcohol, or illicit drugs than nonsmokers (CBHSQ, 2015). Among all current smokers, 68.0% want to completely stop smoking, 55.4% made an attempt to quit in the past year, and 7.4% successfully quit within the past year (CDC, 2017b). The current level of tobacco use among college students clearly poses a major health risk as this use can become a lifelong habit (USDHHS, 2020).

The current rate of tobacco use for students at the University of Minnesota–Duluth is **10.8%**, with a daily rate of **1.2%**. Compared to females, males report higher rates of current and daily tobacco use.

Definition:
Current Tobacco Use

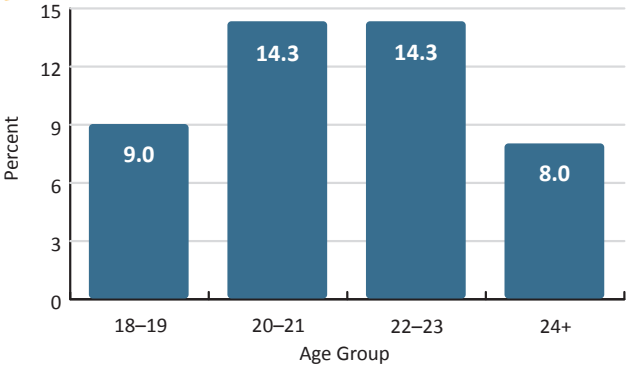
Any tobacco use within the past 30 days. Tobacco use includes both smoking and smokeless tobacco.

Current and Daily Tobacco Use
All Students by Gender



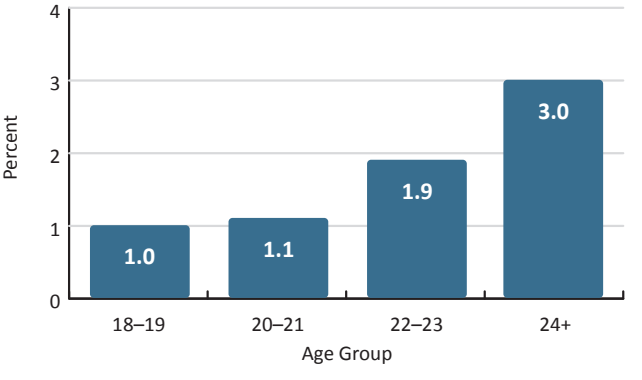
The highest rates of current tobacco use are found among UMD students ages 20–23 (**14.3%**).

Current Tobacco Use
All Students by Age Group



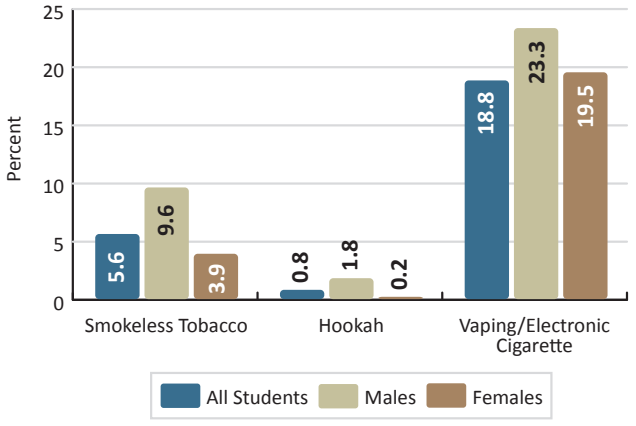
The highest rate of daily tobacco use is found among UMD students ages 24 and over (**3.0%**).

Daily Tobacco Use
All Students by Age Group



Current Smokeless Tobacco, Hookah, and Vaping/Electronic Cigarette Use

All Students by Gender



Overall, **5.6%** of UMD students report using smokeless tobacco, **0.8%** report using a hookah, and **18.8%** report vaping or using an electronic cigarette during the past 30 days.

Definition:
Current Smokeless Tobacco Use

Any smokeless tobacco use within the past 30 days.

Definition:
Current Hookah Use

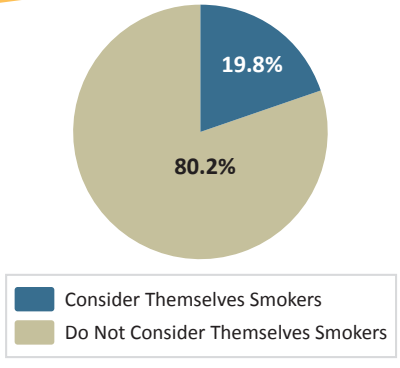
Any use of tobacco from a water pipe (hookah) within the past 30 days.

Definition:
Current Vaping/Electronic Cigarette Use

Any vaping/electronic cigarette use within the past 30 days.

Consider Themselves Smokers

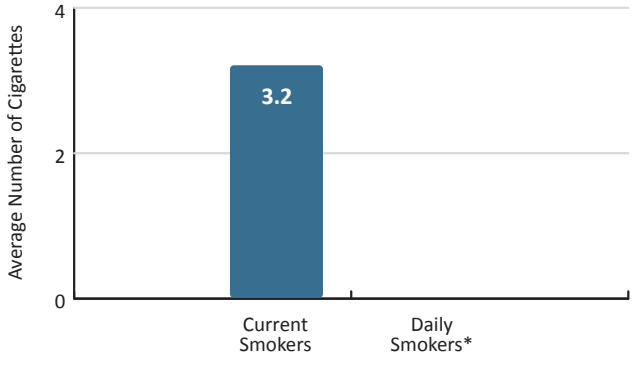
Current Smokers



Among students at the University of Minnesota–Duluth who report smoking tobacco in the past 30 days, **80.2%** do not consider themselves smokers.

Average Number of Cigarettes Smoked Per Week—Past 30 Days

Current vs. Daily Smokers



*Insufficient data.

The average number of cigarettes smoked per week over the past 30 days by UMD students is **3.2** among current smokers.

Among UMD students, **5.3%** of nonsmokers and **1.2%** of smokers report being exposed to secondhand smoke on campus (outside) in an average week.

Secondhand Smoke Exposure
All Students

Location	Percent Who Indicate Exposure					
	Nonsmokers		Current Smokers		All Students	
In a Car	11.6	N/A	24.7	N/A	12.6	N/A
Off Campus	11.6	21.8	11.1	24.7	11.6	22.0
On Campus	3.5	5.3	1.2	1.2	3.4	5.0
Where I Live	8.3	8.0	16.0	23.5	8.8	9.1
Other	4.7	13.6	8.6	18.5	5.0	14.0
N/A—Never Exposed	44.1		33.3		43.4	

Inside Outside

Results

Alcohol Use and Other Drug Use

For some young adults, college life includes an introduction to or an 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, four in five (79.2%) have consumed alcohol at least one time, nearly four in five (77.6%) have consumed alcohol in the past year, and about three in five (62.2%) consume alcohol monthly (Schulenberg et al., 2019). The rate of binge drinking (consuming five or more alcoholic beverages in a row in the previous two weeks) is highest for those ages 18–25, at 34.3%, and is 24.5% among adults age 26 and older (CBHSQ, 2020). Compared to those not enrolled in college full-time, young adults who are enrolled full-time are more likely to consume alcohol monthly and to binge drink (CBHSQ, 2020).

Approximately three in five (58.9%) full-time college students have used an illicit drug at least once in their lifetime, more than four in ten (46.8%) have used an illicit drug at least once in the past year, and nearly three in ten (29.7%) have used an illicit drug in the last month (Schulenberg et al., 2019). Marijuana is the illicit drug of choice for full-time college students, with more than half (54.7%) having used the drug at least once in their lifetime, more than two in five (43.0%) having used it in the past year, and approximately one-fourth (26.3%) having used it in the past month (Schulenberg et al., 2019). Among full-time college students, 13.5% have used amphetamines, 8.8% have used cocaine, and 6.9% have used hallucinogens in the previous year (Schulenberg et al., 2019). More than one in eight college students report vaping marijuana within the past 30 days (Schulenberg et al., 2019).

Among University of Minnesota–Duluth students, **81.2%** report using alcohol in the past 12 months, and **61.4%** report using alcohol in the past 30 days. Male students report higher rates of alcohol use compared to female students at the university.

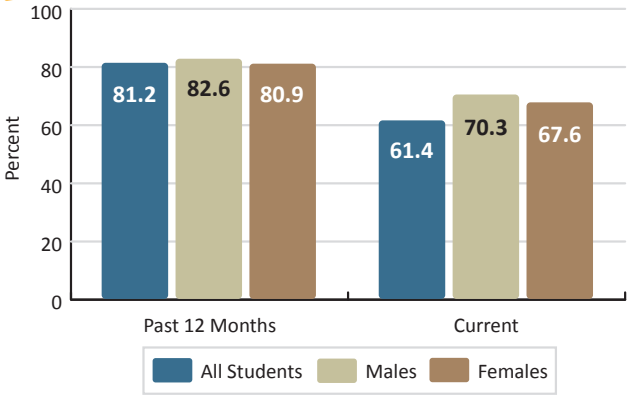
Definition:
Past 12-Month Alcohol Use

Any alcohol use within the past year.

Definition:
Current Alcohol Use

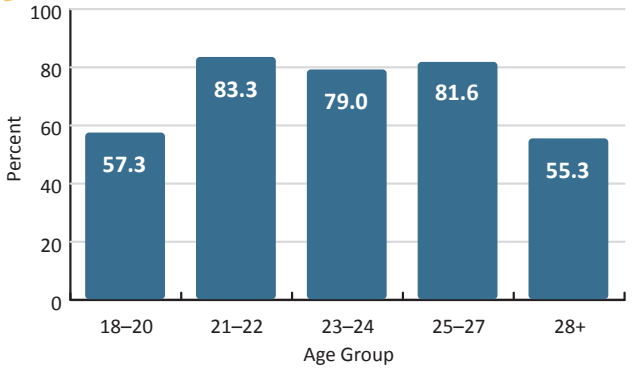
Any alcohol use within the past 30 days.

Alcohol Use—Past 12 Months and Current
All Students by Gender



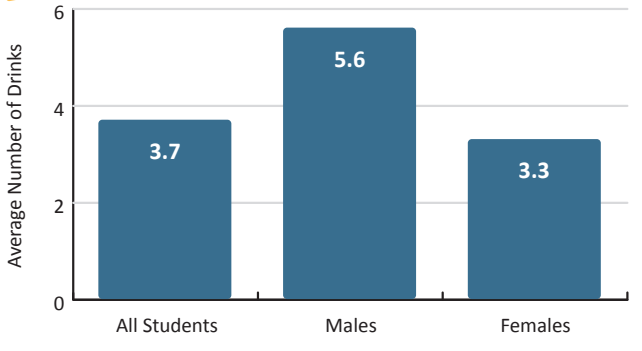
UMD students ages 21–22 report the highest rate of consuming alcohol in the past 30 days (**83.3%**).

Current Alcohol Use
All Students by Age Group

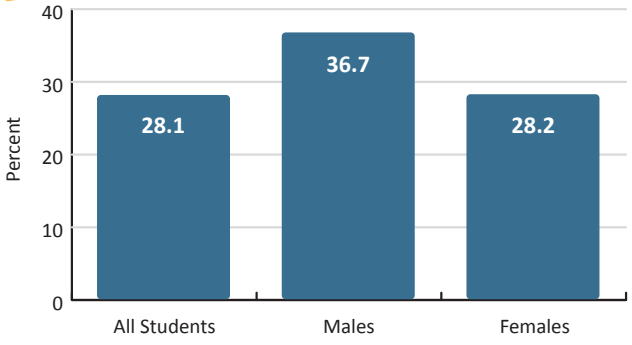


Male UMD students report consuming a higher average number of drinks per week than female students at the university. The average number of drinks per week may serve as an indicator of overall alcohol use.

Average Number of Drinks per Week—Past 30 Days
All Students by Gender



High-Risk Drinking
All Students by Gender

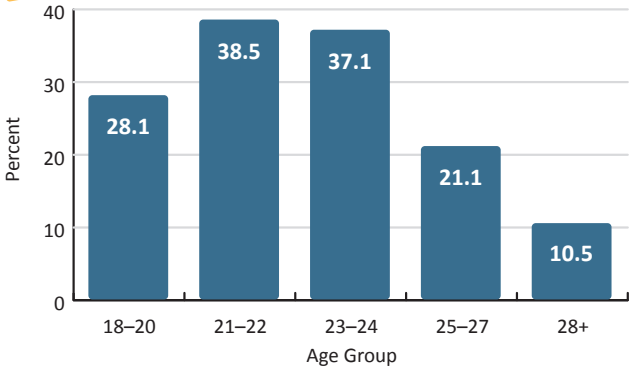


Compared to female UMD students, male students report higher rates of high-risk drinking (**36.7%** vs. **28.2%**, respectively).

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 one shot of alcohol, a 12-ounce beer, a mixed drink containing 1 or 1.5 ounces of alcohol, a 12-ounce wine cooler, or a 5-ounce glass of wine.

High-Risk Drinking
All Students by Age Group



Among UMD students, the peak years for engaging in high-risk drinking are ages 21–22.

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, a 12-ounce beer, a mixed drink containing 1 or 1.5 ounces of alcohol, a 12-ounce wine cooler, or a 5-ounce glass of wine.)

High-Risk Drinking Status	Students' Perception of High-Risk Drinking by School Peers	Actual High-Risk Drinking Rate
All Students	**41.8%**	**28.1%** of All Students
High-Risk Drinkers	**51.4%**	
Non-High-Risk Drinkers	**37.4%**	

Students attending the University of Minnesota–Duluth overestimate the rate of high-risk drinking on their campus. The estimate from all students is **41.8%**, while the actual rate is **28.1%**.

The 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 legal driving limit for individuals of legal drinking age is 0.08.

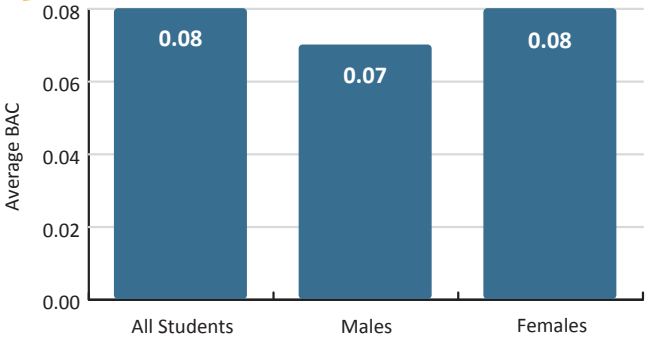
Blood Alcohol Content

Blood alcohol content (BAC) measures the percentage of alcohol in a person's blood. The calculation of BAC is based on a 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)

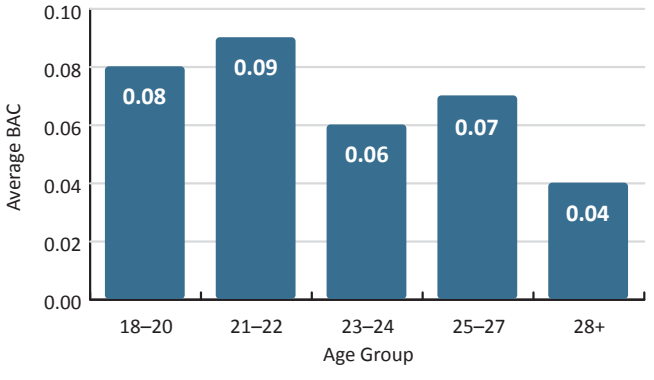
The average estimated BAC among students at the University of Minnesota–Duluth, based on the last time the student partied/socialized, is **0.08**. The average is higher for female compared to male students.

Average Estimated Blood Alcohol Content
All Students by Gender



Among UMD students, the average BAC levels at the most recent socializing/partying occasion range from **0.04** to **0.09**, with an average of **0.08**. Students ages 21–22 report an average estimated level of **0.09**, which exceeds the legal driving limit for individuals of legal drinking age.

Average Estimated Blood Alcohol Content
All Students by Age Group



Negative Consequences of Alcohol Use—Past 12 Months

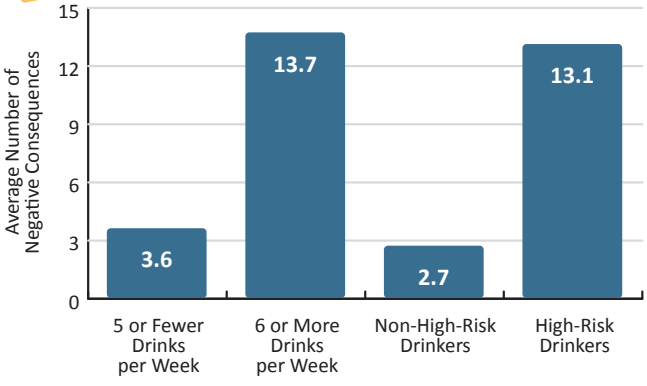
All Students

Negative Consequence Due to Alcohol Use	Percent Who Report Experiencing Within Past 12 Months
Arrested for a DWI/DUI	0.0
Criticized by Someone I Know	12.9
Damaged Property, Pulled Fire Alarm, etc.	1.2
Done Something I Later Regretted	19.2
Driven a Car While Under the Influence	4.2
Got Into an Agrument or Fight	11.1
Got Nauseated or Vomited	40.7
Had a Hangover	50.4
Had a Memory Loss	19.5
Have Been Taken Advantage of Sexually	2.8
Have Taken Advantage of Another Sexually	0.3
Hurt or Injured	7.3
Missed a Class	10.4
Performed Poorly on a Test or Important Project	8.8
Seriously Thought About Suicide	3.8
Seriously Tried to Commit Suicide	0.7
Thought I Might Have a Drinking Problem	7.3
Tried Unsuccessfully to Stop Using	1.5
Trouble with Police, Residence Hall, or Other University/College Authorities	3.2

More than one in 20 (**4.2%**) UMD students report having driven a car within the past 12 months while under the influence of alcohol; for the same period, **10.4%** report missing a class and **8.8%** report performing poorly on a test or project as a result of alcohol use.

Average Number of Alcohol-Related Negative Consequences*

All Students by Average Number of Drinks and High-Risk Drinking



*The average number of drinks is based on behavior in the past 30 days, high-risk drinking is based on behavior in the past two weeks, and the average number of negative consequences is based on reported experiences in the past 12 months.

A strong association exists between the average number of drinks UMD students consume per week and the total number of reported alcohol-related negative consequences 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.

Rates for most alcohol-related negative consequences are three or more times higher among UMD students who engaged in high-risk drinking in the previous two weeks compared to those who did not. More than in 12 (**8.8%**) students who have engaged in high-risk drinking in the past two weeks report driving while under the influence of alcohol one or more times in the past 12 months.

High-Risk Drinking and Selected Consequences*
All Students

Negative Consequence Due to Alcohol Use	Percent		
Driven a Car While Under the Influence	4.2	2.3	8.8
Got into an Argument or Fight	11.1	4.9	26.8
Have Been Taken Advantage of Sexually (Includes Males and Females)	2.8	2.5	3.8
Missed a Class	10.4	4.9	24.3
Performed Poorly on a Test or Important Project	8.8	4.3	20.2

All Students | Non-High-Risk Drinkers | High-Risk Drinkers

*High-risk drinking is based on behavior in the past two weeks while the rate for negative consequences is based on reported experiences in the past 12 months.

Asked if they would call 911 if someone passes out due to alcohol/drug use and couldn't be awakened, **69.1%** of all UMD students report they would be "very likely" to call for emergency assistance.

Likelihood of Calling 911 in an Alcohol- or Drug-Related Situation
All Students

Response	Percent		
Very Likely	69.1	75.7	66.1
Somewhat Likely	25.0	21.1	26.8
Somewhat Unlikely	4.6	1.9	5.8
Very Unlikely	1.3	1.3	1.3

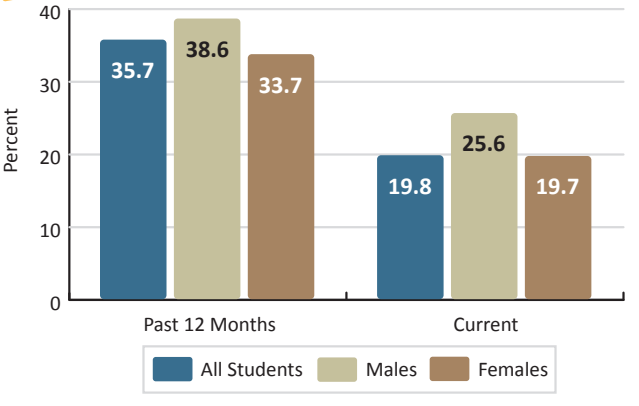
All Students | Students Who Did Not Use Alcohol Within the Past 30 Days | Students Who Did Use Alcohol Within the Past 30 Days

Among all UMD students, the rate for any marijuana/cannabis use within the past 12 months is **35.7%**, while the rate of current use is **19.8%**. Rates of marijuana/cannabis use are higher for male compared to female students at the university.

Definition:
Past 12-Month Marijuana/Cannabis Use
Any marijuana use within the past year.

Definition:
Current Marijuana/Cannabis Use
Any marijuana use within the past 30 days.

Marijuana/Cannabis Use—Past 12 Months and Current
All Students by Gender



Negative Consequences of Marijuana/Cannabis Use—Past 12 Months
All Students

Negative Consequence Due to Marijuana/Cannabis Use	Percent Who Report Experiencing Within Past 12 Months
Arrested for a DWI/DUI	0.0
Criticized by Someone I Know	4.4
Damaged Property, Pulled Fire Alarm, etc.	0.0
Done Something I Later Regretted	2.3
Driven a Car While Under the Influence	6.1
Got Into an Argument or Fight	0.4
Got Nauseated or Vomited	4.0
Had a Hangover	2.5
Had a Memory Loss	5.1
Have Been Taken Advantage of Sexually	0.2
Have Taken Advantage of Another Sexually	0.0
Hurt or Injured	0.4
Missed a Class	3.0
Performed Poorly on a Test or Important Project	2.1
Seriously Thought About Suicide	1.3
Seriously Tried to Commit Suicide	0.3
Thought I Might Have a Drug Problem	4.2
Tried Unsuccessfully to Stop Using	1.6
Trouble with Police, Residence Hall, or Other University/College Authorities	0.5

Approximately one in 16 (**6.1%**) UMD students report having driven a car within the past 12 months while under the influence of marijuana/cannabis, **3.0%** report missing a class due to marijuana/cannabis use, and **4.2%** report thinking they might have a drug problem.

Selected Drug Use—Past 12 Months
All Students

Drug	Percent Who Report Use Within Past 12 Months
Amphetamines	0.4
Cocaine	2.3
Ecstasy	1.5
GHB/Rohypnol	0.1
Hallucinogens	5.2
Inhalants	0.5
Opiates	0.4
Sedatives	0.8
Use of at Least One of the Above Listed Drugs	7.7
Use of Another Person's ADHD Medication	4.8
Use of Another Person's Medication Other Than ADHD	1.1

Among UMD students, **7.7%** report having used at least one of the eight listed illicit drugs within the past 12 months, **4.8%** report using another person's ADHD medication, and **1.1%** indicate that they used another person's prescription medication (other than ADHD medication).

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. Nearly one in five (19.1%) women and one in 67 (1.5%) men in the United States have been victims of rape or attempted rape in their lifetime (Smith et al., 2017). Based on estimates by the National Institute of Justice, 20.0% of American women experience rape or attempted rape while in college, and more than one in nine (12.0%) student victims state the victimization was not important enough to report (Sinozich and Langton, 2014). Sexual harassment is a more prevalent occurrence for college students, with 62% reporting that they have experienced some form of sexual harassment (Hill and Silva, 2006).

Financial health is another area of concern. According to the U.S. Department of Education, the average total cost of attendance (including tuition, fees, room, and board) for full-time students is $19,488 at four-year public institutions, $44,702 at four-year private non-profit institutions, and $10,091 at two-year public institutions (USDE, 2017). In 2015–2016, the average amount of grant and scholarship aid for first-year, full-time students was $7,190 at four-year public institutions, $20,920 at four-year private non-profit institutions, and $5,080 at two-year public institutions (USDE, 2017). About three in five (61.6%) first-year students attending a four-year public institution, 66.7% attending a nonprofit private school, and 27.5% attending a two-year public institution borrowed money through a school loan (USDE, 2015).

Nearly seven in eight undergraduate students (85.0%) carry debit cards, while nearly five in eight carry credit cards (60.0%) (Sallie Mae, 2019). More than three in five (62%) undergraduate students pay off all cards each month (Sallie Mae, 2019). The average monthly credit card balance for an undergraduate student is $1,423 (Sallie Mae, 2019). Among those with a credit card, the average number of cards owned is 5.2 cards; only 19% own just one credit card (Sallie Mae, 2019).

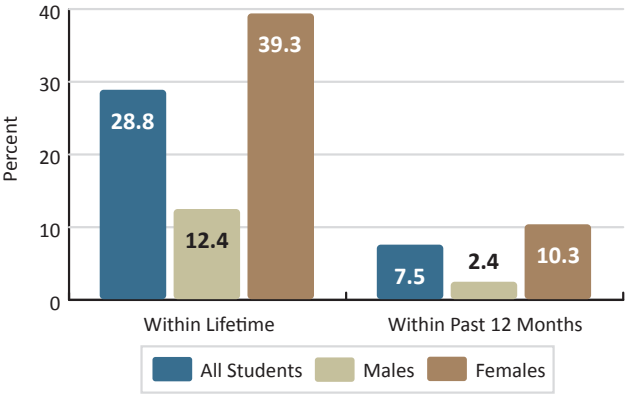
Nearly two in five (**39.3%**) female students at the University of Minnesota–Duluth indicate that they have experienced a sexual assault within their lifetime, with **10.3%** experiencing an assault within the past 12 months. Male students at the university experienced lower sexual assault rates in their lifetime (**12.4%**) and within the past 12 months (**2.4%**).

Sexual Assault—Lifetime and Past 12 Months
All Students by Gender

Sexual assault is defined as answering yes to at least one of the following two questions:

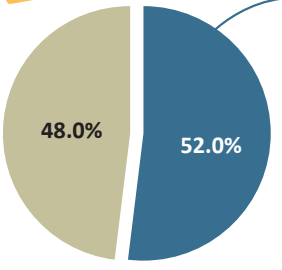
Within your lifetime or during the past 12 months, have you:

- Experienced actual or attempted sexual intercourse without your consent or against your will?
- Experienced actual or attempted sexual touching without your consent or against your will?



Of University of Minnesota–Duluth students who indicate they have experienced a sexual assault within their lifetime (28.8%), more than one in two (**52.0%**) state that they reported the incident. Of these students, **24.8%** reported it to a health care provider, **3.3%** reported it to the police, and **5.2%** reported it to a campus authority.

Sexual Assault Reporting by Victims—Lifetime
Sexual Assault Victims



Reported the Assault to*	Percent Among Sexual Assault Victims Who Reported Assault
Campus Authority	5.2
Family	41.2
Friend or Intimate Partner	85.0
Health Care Provider	24.8
Police	3.3
Someone Else	11.8

Reported Sexual Assault
Did Not Report Sexual Assault

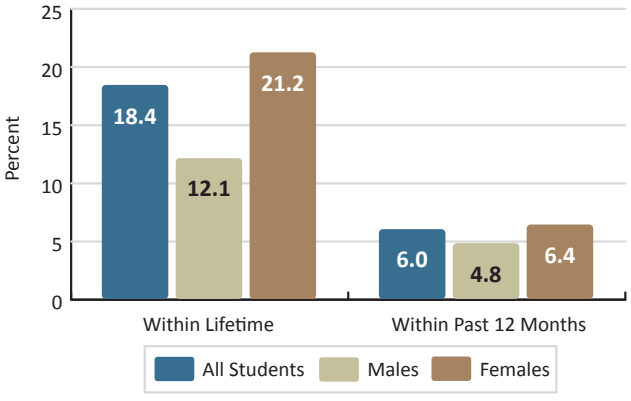
*Students may have reported incident to individuals in more than one category.

Domestic Violence—Lifetime and Past 12 Months
All Students by Gender

Domestic violence is defined as answering yes to at least one of the following two questions:

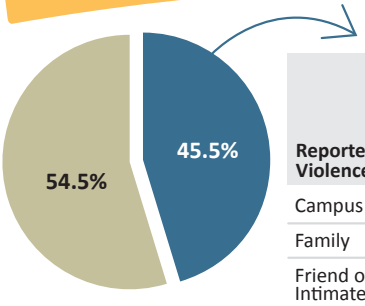
Within your lifetime or during the past 12 months, have you:

- Been slapped, kicked, or pushed by your significant other or spouse/partner?
- Been hurt by threats, "put-downs," or yelling by your significant other or spouse/partner?



More than one in five (**21.2%**) female students at the University of Minnesota–Duluth, and approximately one in eight (**12.1%**) male students, indicate that they have experienced domestic violence within their lifetime.

Domestic Violence Reporting by Victims—Lifetime
Domestic Violence Victims



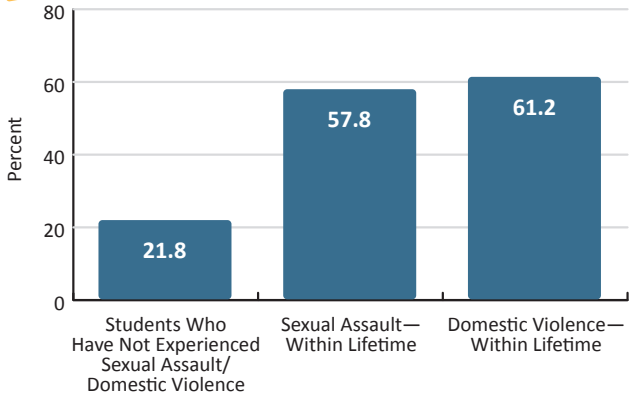
Reported the Violence to*	Percent Among Domestic Violence Victims Who Reported Assault
Campus Authority	3.5
Family	43.5
Friend or Intimate Partner	89.4
Health Care Provider	29.4
Police	8.2
Someone Else	12.9

Reported Domestic Violence
Did Not Report Domestic Violence

*Students may have reported incident to individuals in more than one category.

Of UMD students who indicate that they have experienced domestic violence within their lifetime (18.4%), more than two-fifths (**45.5%**) state that they reported the incident. Of these students, **29.4%** reported it to a health care provider, **8.2%** reported it to the police, and **3.5%** reported it to a campus authority.

Depression Diagnosis—Lifetime
All Students by Sexual Assault/Domestic Violence



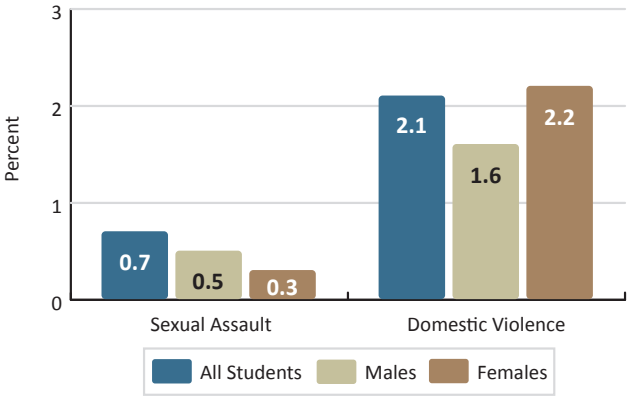
Among UMD students, **57.8%** of those who report being victims of sexual assault, and **61.2%** of those who report being victims of domestic violence, say they have been diagnosed with depression within their lifetime. These rates are higher than the lifetime depression rate (**21.8%**) reported among UMD students who have not experienced sexual assault or domestic violence within their lifetime.

Among UMD students, **0.7%** report being a perpetrator of sexual assault within the past 12 months. Approximately one in 50 (**2.1%**) students at the university report having been a perpetrator of domestic violence within that same time period.

Further examination of data shows that one in 14 (**7.5%**) UMD students at the university report either sexually assaulting or inflicting domestic violence on another person within their lifetime. Of these students, **64.9%** indicate that they have been a victim of a sexual assault within their lifetime.

Sexual Assault and Domestic Violence Perpetrator—Past 12 Months

All Students by Gender



Overall, three in four students at the University of Minnesota–Duluth report having experienced any sort of sexual harassment (**74.9%**). Sexual harassment is more commonly reported by female than by male students at the university (**81.5%** vs. **63.2%**, respectively). The most common type of sexual harassment reported was that someone made offensive sexist remarks (**44.3%**).

Sexual Harassment

All Students by Gender

Students were asked to indicate whether they experienced any of the types of sexual harassment provided in the table. Student response options were: Not applicable, did not happen to me, occurred by a peer at my college/university; occurred by faculty/staff at my college/university; occurred by someone not at my college/university. Students were able to select all response options that applied.

Type of Harassment	Percent		
Someone told sexual joke/story	44.2	33.5	49.6
Someone attempted to draw you into a discussion of sexual matters	39.7	37.2	40.7
Someone made offensive comments about your appearance	37.3	25.0	43.9
Someone used body language of a sexual nature	24.0	14.1	29.6
Someone attempted to establish a sexual relationship	26.9	16.0	33.1
Someone continued to ask for dates	21.4	8.9	29.5
Someone touched you in a way that made you feel uncomfortable	22.2	11.2	28.7
Someone appeared to bribe you with a reward or special tickets	6.0	4.4	6.3
Someone made you feel threatened through retaliation	5.8	2.6	7.0
Someone treated you badly for refusing to have sex	14.6	6.3	19.6
Someone referred to people of your gender in offensive terms	37.6	20.1	47.4
Someone treated you “differently” because of your gender	38.7	18.5	50.8
Someone made offensive sexist remarks	44.3	22.9	57.5
Someone acted condescendingly to you because of your gender	39.5	19.2	51.7
Any Experience of Sexual Harassment	74.9	63.2	81.5

All Students Males Females

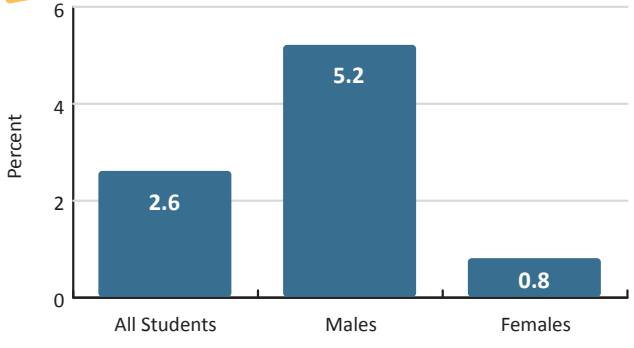
Sexual Harassment—Perpetrator
All Students by Gender

Type of Harassment	Percent								
	Perpetrated by a peer at my college/university			Perpetrated by faculty/staff at my college/university			Perpetrated by someone not at my college/university		
Someone told sexual joke/story	29.1	25.5	30.8	1.5	1.3	1.4	25.9	16.1	31.0
Someone attempted to draw you into a discussion of sexual matters	25.8	25.5	25.5	0.6	0.5	0.5	21.9	17.7	24.1
Someone made offensive comments about your appearance	19.3	14.8	21.4	1.0	0.5	1.2	24.8	12.8	31.0
Someone used body language of a sexual nature	11.0	7.8	12.9	0.7	0.5	0.7	15.8	7.3	20.5
Someone attempted to establish a sexual relationship	14.9	9.7	18.1	0.5	0.3	0.5	15.9	8.6	19.6
Someone continued to ask for dates	11.4	4.7	16.1	0.2	0.3	0.2	13.0	4.4	18.2
Someone touched you in a way that made you feel uncomfortable	9.0	5.2	11.3	0.4	0.5	0.2	15.3	6.3	21.0
Someone appeared to bribe you with a reward or special tickets	2.2	2.3	2.1	0.3	0.3	0.3	3.9	1.8	4.6
Someone made you feel threatened through retaliation	2.4	1.8	2.6	0.1	0.3	0.0	3.4	0.5	4.8
Someone treated you badly for refusing to have sex	6.0	2.9	7.9	0.1	0.3	0.0	9.2	3.4	12.7
Someone referred to people of your gender in offensive terms	21.2	13.6	25.3	2.2	1.3	2.4	27.9	12.3	36.6
Someone treated you "differently" because of your gender	20.0	11.5	25.0	4.7	3.1	5.3	28.9	11.7	39.1
Someone made offensive sexist remarks	23.6	16.1	28.1	3.7	3.2	4.1	33.2	13.4	45.1
Someone acted condescendingly to you because of your gender	18.6	11.6	23.0	3.5	1.6	4.7	30.7	11.9	42.0
Any Experience of Sexual Harassment	55.8	48.9	59.6	9.3	5.5	11.2	54.2	37.2	64.0

All Students Males Females

Compared to male students at the University of Minnesota–Duluth, female students were more likely to have experienced sexual harassment from a peer at the school, from a faculty/staff member at the university, and from someone not at school. Overall, the most common sexual harassment experienced from a peer was that someone told a sexual joke/story (**29.1%**). The most common sexual harassment experienced from a faculty or staff member was that someone treated the student "differently" because of their gender (**4.7%**). The most common sexual harassment experienced from someone not at school was someone made offensive sexist remarks (**33.2%**).

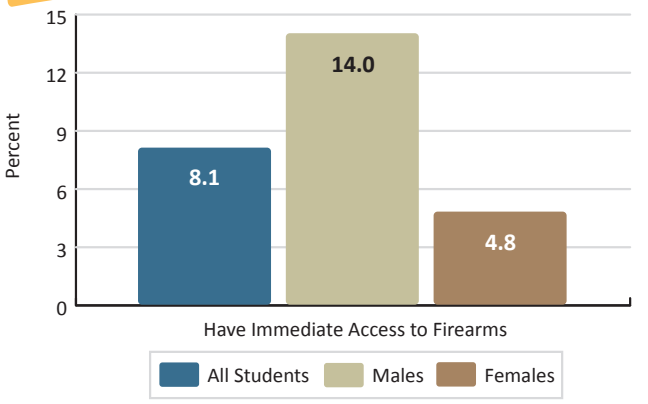
Physical Fight—Past 12 Months
All Students by Gender



Male UMD students are more likely than female students to report having engaged in a physical fight over the past 12 months (**5.2%** vs. **0.8%**, respectively).

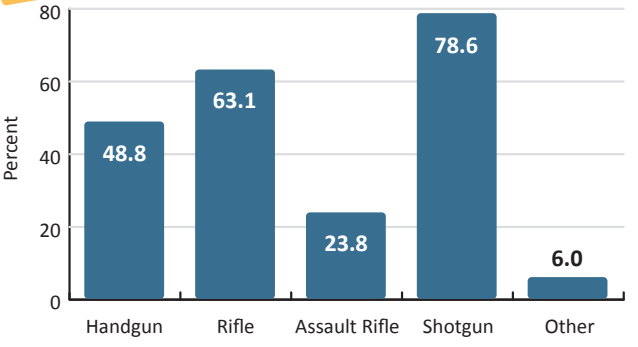
Male students at the University of Minnesota–Duluth were more likely to report having immediate access to a firearm than female students (**14.0%** vs. **4.8%**, respectively).

Immediate Firearm Access
All Students by Gender



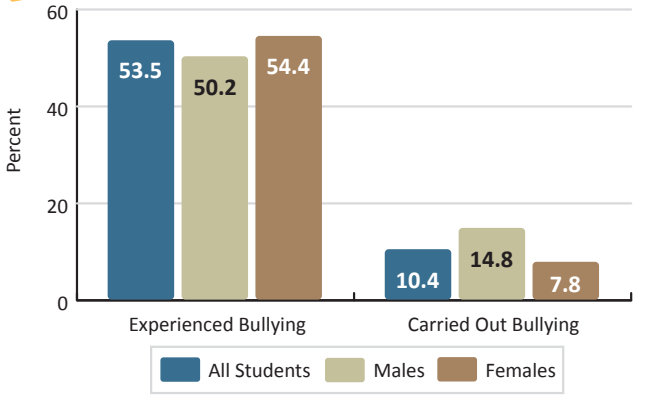
Among students with immediate access to firearms, the most common type of firearm is a shotgun (**78.6%**). Of those with immediate access to firearms, **19.0%** reported that they have a license for concealed carry (CCW permit).

Firearm Access—Type of Firearm
Those with Immediate Access to Firearms



One in two (**50.2%**) male and more than one in two (**54.4%**) female students at the University of Minnesota–Duluth report experiencing bullying sometimes or frequently within their lifetime. More than one in seven (**14.8%**) male students and one in 14 (**7.8%**) female students report carrying out bullying sometimes or frequently within their lifetime.

Bullying—Lifetime
All Students by Gender



Discrimination Experience—Lifetime
All Students by Gender

Type of Discrimination	Percent		
People Act as if They Are Afraid of You	32.5	38.1	29.1
People Act as if They Think You Are Not Smart	68.6	60.6	73.3
Received Poorer Service Than Other People at Restaurants or Stores	30.3	29.3	31.9
Treated with Less Courtesy or Respect Than Other People	70.7	66.1	72.7
You Are Threatened or Harassed	35.6	31.2	38.7

All Students | Males | Females

Note: Items found in this table are based on an everyday discrimination measure (Sternthal et al, 2011).

More than seven in ten (**70.7%**) UMD students report being treated with less courtesy or respect than other people within their lifetime, and more than one in three (**35.6%**) report being threatened or harassed.

Discrimination Type/Reason—Lifetime
All Students by Gender

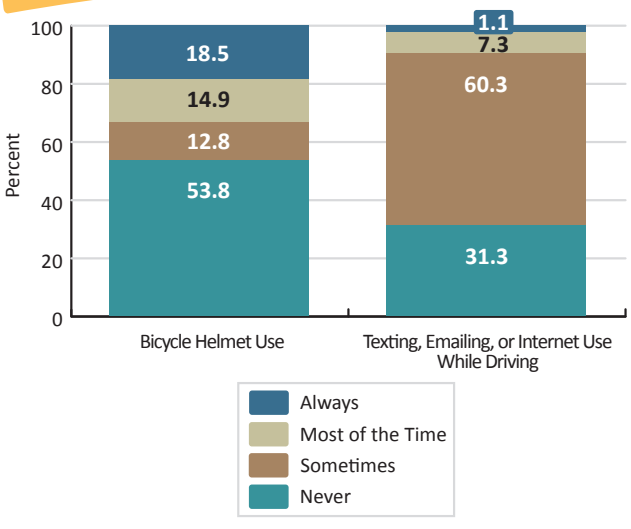
Reason for Discrimination	Percent		
Age	52.1	34.3	63.9
Ancestry or National Origin	8.2	9.5	7.5
Education/Income Level	18.9	23.6	16.5
Gender	61.0	28.5	79.0
Height	22.2	25.6	21.5
HIV Status	0.4	0.0	0.7
Physical Disability	1.9	2.9	1.4
Race	14.7	21.1	11.8
Religion	7.5	7.0	8.3
Sexual Orientation	10.6	7.0	9.7
Shade of Skin Color	7.8	9.1	7.3
Weight	24.9	22.7	26.2
Other Aspect of Physical Appearance	32.8	38.4	29.2
Other	11.4	14.5	8.7

All Students | Males | Females

Note: Items found in this table are adapted from Williams et al. (1997).

For male UMD students, some aspect of their physical appearance is the most common reason for discrimination within their lifetime. For female UMD students, gender is the most common reason for discrimination within their lifetime.

Transportation Safety—Past 12 Months
All Students



Among students at the University of Minnesota–Duluth who ride a bicycle, more than one-half (**53.8%**) report never wearing a helmet while riding in the past 12 months. During the same period, more than two in three (**68.7%**) report texting, emailing, or using the internet sometimes, most of the time, or always while driving.

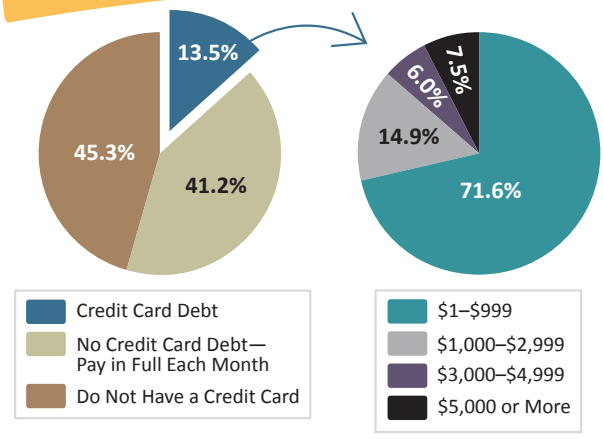
Additionally, one in nine (**11.0%**) UMD students report riding in a vehicle during the past 12 months with a driver who was impaired due to alcohol consumption.

More than one in eight (**13.5%**) UMD students report carrying some level of credit card debt over the past month. Of these students, **13.5%** 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.

Current Credit Card Debt
All Students

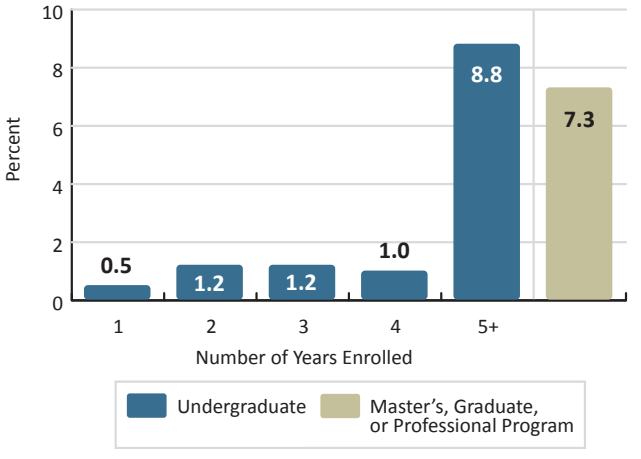


The percentage of University of Minnesota–Duluth students with a monthly credit card debt of $3,000 or more is highest among undergraduate students enrolled for five or more years (**8.8%**).

Definition:
Credit Card Debt

A monthly debt of $3,000 or more.

Credit Card Debt and Class Status
All Students

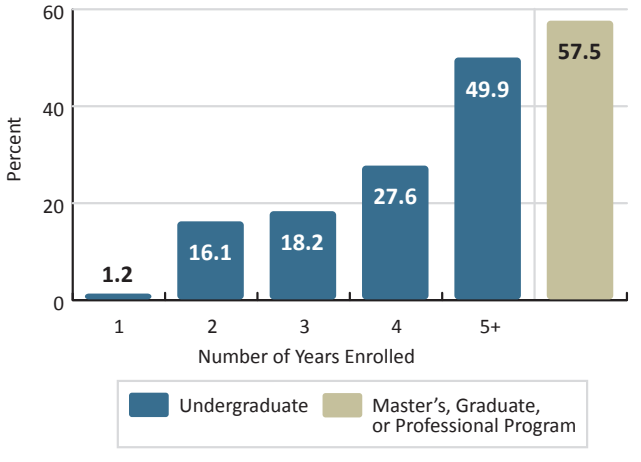


The percentage of UMD students who report a student loan balance of more than $25,000 increases from **1.2%** among first-year undergraduate students to **49.9%** among undergraduate students enrolled for five or more years.

Definition:
Student Loan Balance

A student loan balance of $25,000 or more.

Student Loan Balance and Class Status
All Students



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. Limited finances may also translate into budget challenges, pitting dollars for tuition, textbooks, and housing against dollars for food.

National Comparison

Research shows that, compared to older adults, young adults in the United States generally eat fewer fruits and vegetables but are more physically active (CDC, 2019). Young adults ages 18–27 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 18–24 in Minnesota is 19.5%, and Minnesota's overall obesity rate is 30.1% (CDC, 2019).

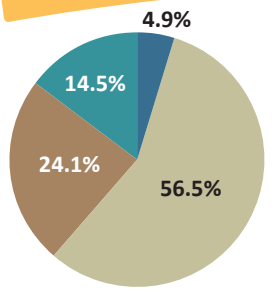
Though research examining food insecurity (see definition on page 34) among young adults is limited, the prevalence of food insecurity and its negative outcomes are issues of increasing concern. Survey results document 48.0% of students at two-year institutions and 41.0% of students attending four-year postsecondary institutions report experiencing food insecurity (Goldrick-Rab, 2019).

In Minnesota, 83.2% of young adults ages 18–24, compared to 80.1% of all adults, report participating in at least one physical activity during the last month (CDC, 2019). More than one-half (55.2%) of 18- to 24-year-olds report participating in 150 minutes or more of aerobic physical activity per week; for all adults, the rate is 57.9% (CDC, 2019).

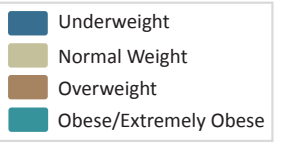
Body mass index (BMI) is a common and reliable indicator of body fat (CDC, 2015a). BMI equals weight in kilograms divided by height in meters squared (BMI = kg/m^2). This table presents weight categories based on BMI ranges.

Nearly two in five (**38.6%**) students at the University of Minnesota–Duluth fall within the overweight or obese/extremely obese category. This is based on self-reported height and weight.

BMI Category
All Students

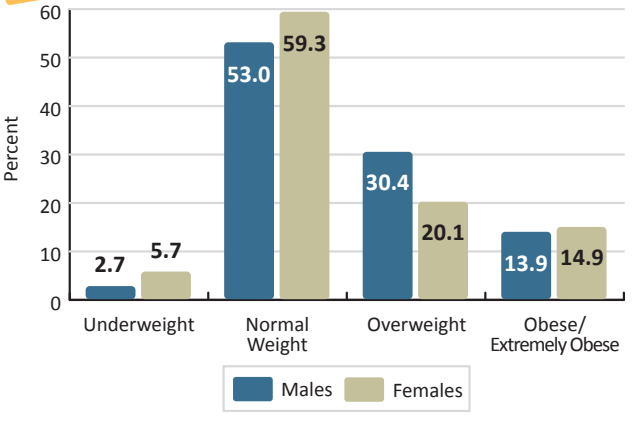


BMI Range	Weight Category
Less Than 18.5	Underweight
18.5–24.9	Normal Weight
25.0–29.9	Overweight
30.0–39.9	Obese
40.0 and Greater	Extremely Obese



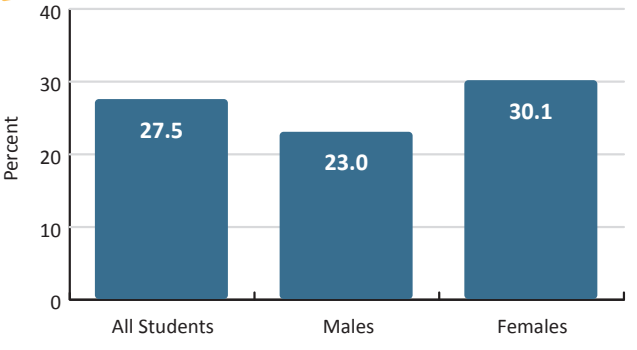
More than two-fifths (**44.3%**) of male and **35.0%** of female UMD students at fall within the overweight or obese/extremely obese category. Additional analysis shows that the average BMI for male UMD students is **25.2**, and the average BMI for female students is **24.5**. For male students, this average falls within the overweight category, and for female students this average falls within the normal weight category.

BMI Category
All Students by Gender



More than one in four (**27.5%**) UMD students report engaging in binge eating over the past 12 months.

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



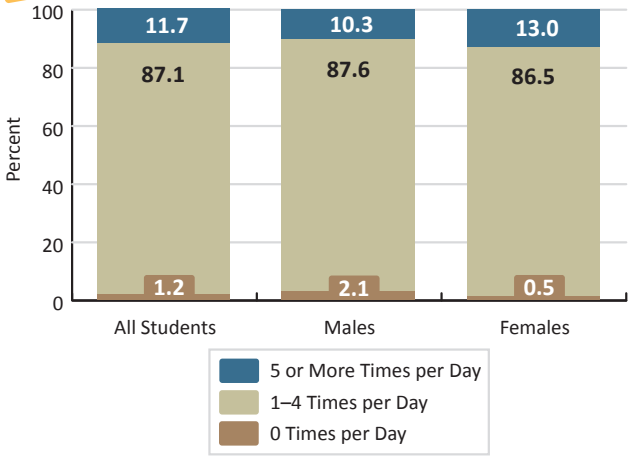
Meal Patterns
All Students by BMI Category

Behavior	Percent			
Breakfast Consumption (Past 7 Days)				
0 Days per Week	12.8	11.3	12.0	11.0
1–3 Days per Week	34.0	25.2	28.0	30.9
4–7 Days per Week	53.2	63.5	60.0	58.1
Fast-Food Consumption (Past 12 Months)				
1–2 Times per Month or Less	61.7	61.5	57.3	46.0
Once per Week or More	38.3	38.5	42.7	54.0

Underweight | Overweight | Normal Weight | Obese/Extremely Obese

Underweight UMD students report the highest rate of never eating breakfast (**12.8%**) within the past seven days. Obese/extremely obese UMD students report the highest rate of fast-food consumption once per week or more within the past 12 months (**54.0%**).

Fruit and Vegetable Consumption—Past Seven Days
All Students by Gender



A majority of UMD students report consuming fruits and vegetables 1–4 times per day in the past seven days, with only **11.7%** consuming fruits and vegetables five or more times per day. On average, male students consume fruits and vegetables **2.4** times per day and female students consume fruits and vegetables **2.8** times per day.

Food Insecurity—Past 12 Months
All Students

In the 1990s, the United States Department of Agriculture (USDA) developed a series of questions designed to measure food insecurity. The 18-item Household Food Security Survey (HFSS) serves as the standard for assessing household food security (Bickel et al., 2000). In order to gain some insight into food insecurity among the college population, a validated two-question screening based on the HFSS was selected to appear within the College Student Health Survey (Hager et al., 2010). These two questions inquire whether a household has been worried about having money to buy food, and whether there have been times when members of the household went without food.

Food security is a necessary component to household and personal well-being. Food insecurity, though it is conceptual, measures something different from nutritional deprivation, and can be a precursor to nutritional, health, and developmental problems (Bickel et al., 2000). Mental and physical changes accompanying inadequate food intake have a bearing on learning, productivity, and physical and psychological health (Sharkey et al., 2011; McLaughlin et al., 2012).

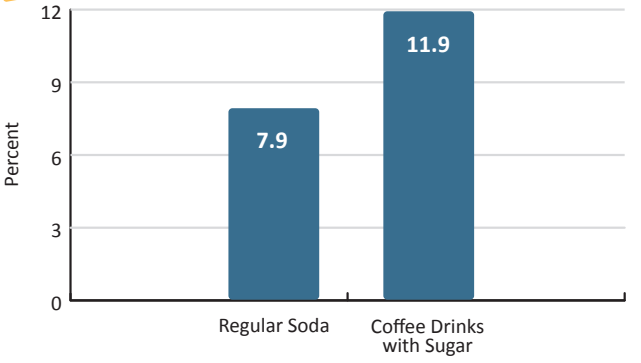
Question	Percent			
Within the past 12 months, I worried whether my food would run out before I got money to buy more.	2.7	15.6	78.8	2.9
Within the past 12 months, the food I bought just didn't last and I didn't have money to get more.	1.9	10.5	84.7	2.9

Often True | Never True | Sometimes True | Don't Know

More than one in six (**18.3%**) UMD students report worrying about whether their food would run out before they had money to buy more. One in eight (**12.4%**) report experiencing a food shortage and lacking money to buy more within the past 12 months.

Asked to report their consumption of sweetened beverages, **11.9%** of UMD students report consuming coffee drinks with sugar every day in the past seven days.

Daily Sweetened Beverage Consumpton —Past 30 Days
All Students



Based on their responses, students were classified into one of three physical activity levels (none/limited, moderate, or high). The high classification meets the CDC's recommended level of physical activity for moderate- and vigorous-intensity physical activity.

Nearly one in two (**47.2%**) UMD students report levels of physical activity that place them in the high classification, meeting the CDC's recommendations.

Physical Activity Level—Past Seven Days
All Students

Students were asked several questions related to their physical activity level. The survey questions that relate to recommendations outlined by the Centers for Disease Control and Prevention (CDC) are:

In the past seven days, how many minutes did you spend doing the following activities?

- Strenuous exercise (heart beats rapidly)
- Moderate exercise (not exhausting)
- Exercises to strengthen or tone your muscles

The CDC recommends that adults:

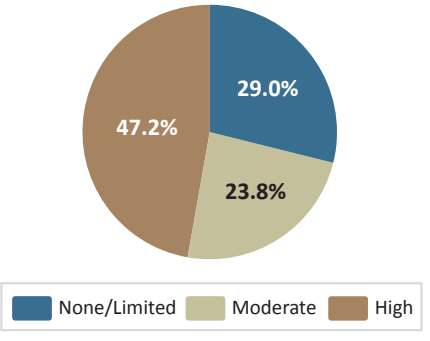
- Engage in 150 minutes of moderate-intensity physical activity every week, and engage in muscle-strengthening activities two or more days a week (CDC, 2015c).

Or

- Engage in 75 minutes of vigorous-intensity physical activity every week, and engage in muscle-strengthening activities two or more days a week (CDC, 2015c).

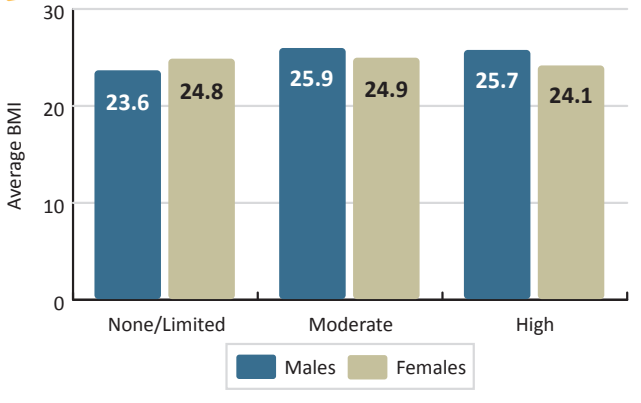
Or

- Engage in an equivalent mix of moderate- and vigorous-intensity aerobic activity and muscle-strengthening activities two or more days a week (CDC, 2015c).



Body mass index is lowest among male UMD students who report none/limited physical activity in the past seven days and female students who report high levels of physical activity in the past seven days.

Average BMI
All Students by Physical Activity Level and Gender



Results

Sexual Health

Some of the most important decisions facing college students concern sexual health. Choices relating to sexual behavior have the potential for significant, and often long-term, consequences. Healthy People 2020, a science-based, 10-year agenda for improving the health of all Americans, 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, 2016).

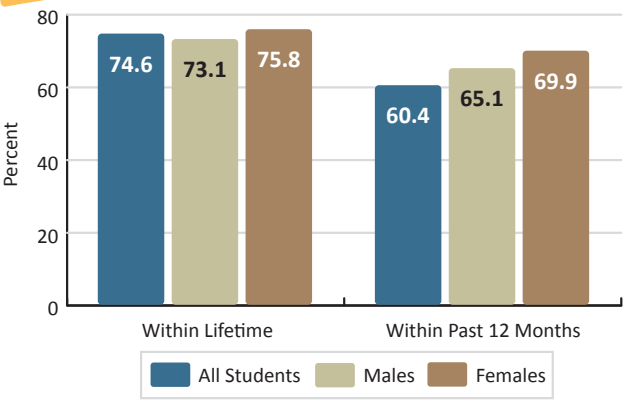
National Comparison

The majority of young adults in the United States are sexually active. Among males ages 18–19 and 20–24, respectively, 60.9% and 70.3% report that they have engaged in vaginal intercourse within their lifetime, 59.4% and 73.5% report that they have received oral sex from a partner of the opposite sex, and 9.7% and 23.7% report that they have engaged in insertive anal intercourse (Herbenick et al., 2010). Among females ages 18–19 and 20–24, respectively, 64.0% and 85.6% report that they have engaged in vaginal intercourse within their lifetime, 62.0% and 79.7% report that they have received oral sex from a partner of the opposite sex, and 20.0% and 39.9% report that they have engaged in anal intercourse (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, 2018). The higher prevalence of STIs among young adults reflects multiple barriers to accessing quality STI prevention services: ability to pay, lack of transportation, and concerns about confidentiality (CDC, 2018). Among all males, 20- to 24-year-olds have the highest rate of chlamydia (1,784.5 cases per 100,000 people) and gonorrhea (720.9 cases per 100,000 people) and the second highest rate of syphilis (44.6 cases per 100,000 people) (CDC, 2018). Among all females, 20- to 24-year-olds have the highest rates of chlamydia (4,064.6 cases per 100,000 people), gonorrhea (702.66 cases per 100,000 people), and syphilis (10.0 cases per 100,000 people) (CDC, 2018). Young adults (15–24) represent 50% of all new STIs diagnosed in the United States (CDC, 2018).

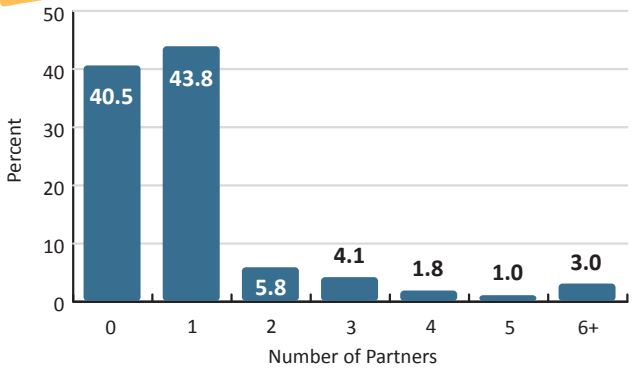
Compared to male students, female students attending the University of Minnesota–Duluth report higher rates of sexual activity within their lifetime and within the past 12 months.

Sexually Active—Lifetime and Past 12 Months
All Students by Gender



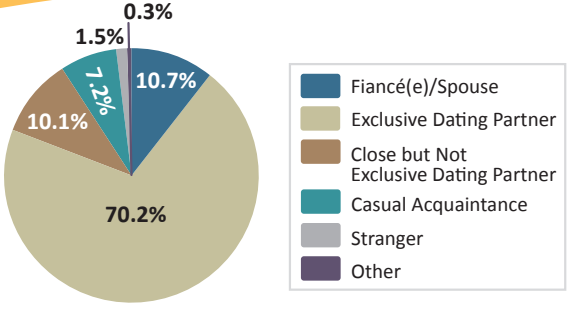
More than eight in ten (**84.3%**) UMD students report having 0–1 sexual partners within the past 12 months. On average, UMD students who were sexually active in the past 12 months had **1.9** sexual partners in that period.

Number of Sexual Partners—Past 12 Months
All Students



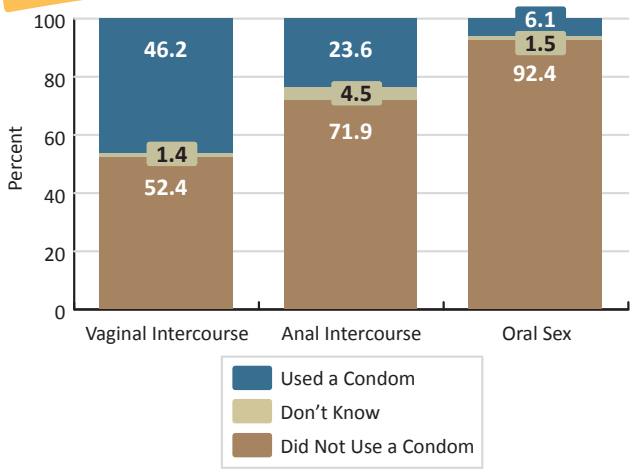
Among UMD students who report being sexually active within the past 12 months, eight in ten (**80.9%**) report that their most recent sexual partner was either a fiancé(e)/spouse or an exclusive dating partner.

Most Recent Sexual Partner—Past 12 Months
Sexually Active Students



Condom Use

Sexually Active Students Within Lifetime
(Does Not Include Those Who Are Married or With a Domestic Partner)



Among UMD students who report being sexually active within their lifetime, **46.2%** used a condom the last time they engaged in vaginal intercourse, **23.6%** used a condom during the last time they had anal intercourse, and **6.1%** used a condom during their last oral sex experience.

Additional analysis shows that of the 74.6% of UMD students who report being sexually active within their lifetime, **94.9%** have engaged in vaginal intercourse, **93.6%** have engaged in oral sex, and **28.4%** have engaged in anal intercourse.

Pregnancy Prevention Methods

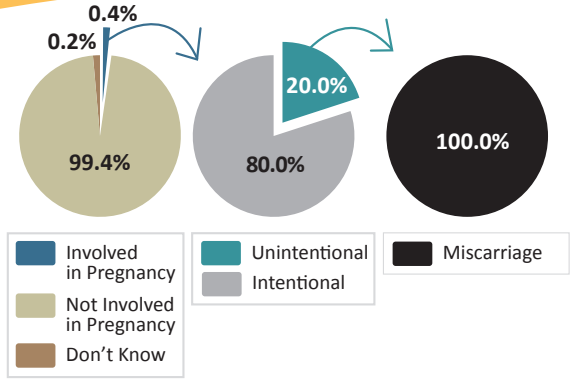
Sexually Active Students Within Lifetime

Type of Method	Percent Who Report Using Method
Birth Control Pills	50.7
Condoms	41.1
Depo-Provera (Shots)	1.6
Diaphragm and Spermicide	0.1
Emergency Contraception	2.1
Fertility Awareness	3.2
Implanon (Hormone Implant)	6.5
Intrauterine Device	15.7
NuvaRing	1.7
Patch	0.0
Sterilization (Hysterectomy, Vasectomy)	0.9
Withdrawal	24.4
Other	1.5
Don't Know/Can't Remember	0.5
Report Not Using any Method of Pregnancy Prevention	3.7

The two methods that UMD students report using most commonly to prevent pregnancy the last time they engaged in vaginal intercourse are birth control pills (**50.7%**) and condoms (**41.1%**).

Unintended Pregnancy Outcome—Past 12 Months

All Students

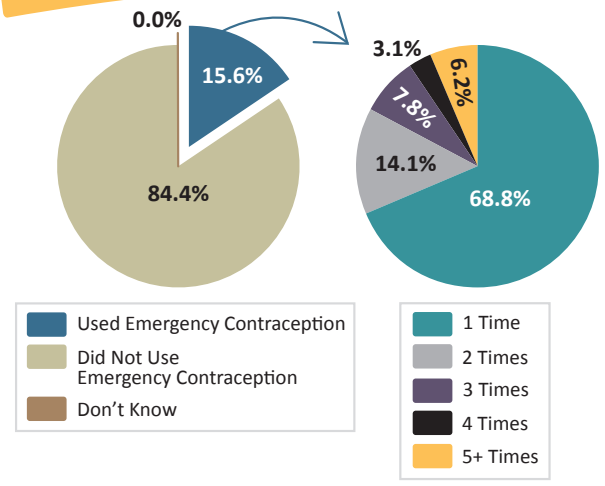


A total of **0.4%** of UMD students report being involved in a pregnancy within the past 12 months. Of these students, **20.0%** state the pregnancy was unintentional. Among the unintentional pregnancies, **100.0%** resulted in miscarriage.

Among sexually active female students at the University of Minnesota–Duluth, **15.6%** report using emergency contraception within the past 12 months. Among these students, **31.2%** have used it two or more times.

Emergency Contraception Use—Past 12 Months

Sexually Active Female Students



Among University of Minnesota–Duluth students who have been sexually active within their lifetime, **5.9%** report being diagnosed with a sexually transmitted infection (STI) within their lifetime, and **1.9%** report being diagnosed with an STI within the past 12 months. Chlamydia is the most commonly diagnosed STI within students' lifetimes and within the past 12 months.

Sexually Transmitted Infection Diagnosis—Lifetime and Past 12 Months

All Students

Sexually Transmitted Infection	Percent Who Report Being Diagnosed	
Chlamydia	3.9	0.9
Genital Herpes	0.9	0.4
Genital Warts/HPV	1.3	0.7
Gonorrhea	0.3	0.1
HIV/AIDS	0.1	0.1
Pubic Lice	0.0	0.0
Syphilis	0.1	0.1
At Least One of the Above Sexually Transmitted Infections	5.9	1.9

Within Lifetime Within Past 12 Months

Implications

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

Results from the 2021 College Student Health Survey presented in this report offer a comprehensive look at the diseases, health conditions, and health-related behaviors 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.

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 impact of the health of college students on our society becomes evident.

Appendix 1

Colleges and Universities Participating in the 2021 College Student Health Survey

School	Location	Enrollment
Augsburg University	Minneapolis, MN	**3,318**
Central Lakes College	Brainerd, MN	**5,331**
The College of St. Scholastica	Duluth, MN	**3,712**
Hennepin Technical College	Brooklyn Park, MN	**7,008**
Minneapolis College	Minneapolis, MN	**10,032**
Minnesota State University–Moorhead	Moorhead, MN	**7,534**
Rochester Community & Technical College	Rochester, MN	**6,983**
St. Catherine University	St. Paul, MN	**4,277**
University of Minnesota–Crookston	Crookston, MN	**2,135**
University of Minnesota–Duluth	Duluth, MN	**9,072**
University of Minnesota–Morris	Morris, MN	**1,202**
University of Minnesota–Rochester	Rochester, MN	**568**
University of Minnesota–Twin Cities	Minneapolis, MN St. Paul, MN	**47,556**

Appendix 1 References

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Appendix 2

University of Minnesota–Duluth Students Survey Demographics Based on Student Response

	All Students
Average Age (Years)	21.1
Age Range (Years)	18–54
18–24 Years	92.3%
25 Years or Older	7.7%
Average GPA	3.46
Class Status	
Undergraduate—Enrolled One Year	19.2%
Undergraduate—Enrolled Two Years	16.0%
Undergraduate—Enrolled Three Years	22.1%
Undergraduate—Enrolled Four Years	19.0%
Undergraduate—Enrolled Five or More Years	3.1%
Master's, Graduate, or Professional Program	8.5%
Non-Degree Seeking	0.1%
Unspecified	11.9%
Gender	
Male	34.2%
Female	52.2%
TransMale, TransFemale, Genderqueer, Preferred Another Descriptor (Write-in)	2.2%
Preferred to Not Answer	11.4%
Racial Identity	
American Indian/Alaska Native	2.7%
Asian/Pacific Islander	5.0%
Black or African American	2.4%
Middle Eastern	0.6%
Native Hawaiian/Other Pacific Islander	0.4%
White	80.4%
Preferred Another Descriptor (Write-in)	0.8%
Ethnic Identity	
Hispanic or Latino	2.2%
Hmong	1.1%
Somali	0.1%
None of the Above	83.7%
Preferred to Not Answer	1.1%
Sexual Identity	
Heterosexual or Straight	78.9%
Gay or Lesbian	3.0%
Bisexual	12.3%
Not Sure Yet	3.4%
Not Sure What Question Means	0.1%
Preferred Another Descriptor (Write-in)	2.3%
Current Residence	
Residence Hall or Fraternity/Sorority	22.4%
Homeless	0.0%
Other	77.6%
Other Status	
International Student	1.6%
Veteran of United States Armed Forces	1.4%
Reported at Least One Disability	20.6%

Glossary

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

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 Vaping/Electronic Cigarette Use
Any use of a vaping device/electronic cigarette within the past 30 days.

Current Hookah Use
Any use of tobacco from a water pipe (hookah) within the past 30 days.

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

Current Smokeless Tobacco Use
Any smokeless tobacco use within the past 30 days.

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

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 one shot of alcohol, a 12-ounce beer, a mixed drink containing 1 or 1.5 ounces of alcohol, a 12-ounce wine cooler, or a 5-ounce glass of wine.

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

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

Student Loan Balance
A student loan balance of $25,000 or more.

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