

Carlsbad Community Anti-Drug and Gang Coalition

New Mexico Community Survey Highlights 2022

New Mexico Community Surveys (NMCS) were collected electronically from March to early-May 2022 by the Carlsbad Community Anti-Drug and Gang Coalition. Due to COVID-19 concerns, no paper surveys were collected. A total of **407 eligible surveys** were collected from Eddy County residents online, using promotion on Facebook and other websites, email blasts, and by distributing postcards with the survey link/QR code at various local businesses. The NMCS asks about alcohol and prescription drug use, community attitudes towards substance use and enforcement, and sources of alcohol and prescription painkillers. Data are used to plan and evaluate initiatives funded by the Office of Substance Abuse Prevention, other funding sources, and are used by other community agencies.

2022 Highlights for Carlsbad

Positive Outcomes for Carlsbad

- + Perceived risk of harm associated with misusing painkillers remains high and increased slightly compared to last year.
- + There was an increase among the entire sample, and among parents for locking of prescription painkillers.
- + Slight decreases occurred for current use of prescription painkillers for any reason, larger decreases occurred among older adults (age 61+).
- + Slight decreases occurred for current drinking and binge drinking across the entire sample and among current drinkers.
- + Decreases occurred for adults and parents providing alcohol to minors.
- + Slight increases occurred for the belief that drinking hurts the community financially.

Unfavorable Outcomes for Carlsbad NMCS 2022

- Increases occurred for receiving painkillers in the past year and painkiller misuse.
- Decreases occurred for pharmacy staff talking to patients about safe storage and about the risks of Rx painkiller use.
- Increases occurred among the entire sample and among parents for sharing medications with others.
- Some respondents report improper handling of unused or expired medication by keeping them for future use or flushing them down the toilet.
- Decreases occurred in the likelihood that police will arrest someone for giving alcohol to a minor, and for breaking up underage drinking parties.

Data Limitations

Compared to census data, survey respondents are more likely to be female and have a higher education than Eddy County residents in general. Collection online may skew the data to people with a higher socio-economic status who possess computers and/or reliable Internet. It is also slightly swayed toward middle aged women, perhaps because this demographic is the most likely to be on Facebook, where much of the promotion took place. Additionally, the survey was collected during COVID-19 restrictions and community disruptions, which may have influenced the data in numerous ways.

Opioid Measures

Eddy County’s drug overdose rate has decreased to 25.4 deaths per 100,000 in 2020 compared with 28.9 deaths per 100,000 in 2019. Eddy has a *lower* drug overdose rate than the rest of the state and the United States. From 2016-2020, New Mexico ranked 11th in the country for state overdose death rates per 100,000 people. According to the CDC, the age adjusted rate of overdose deaths in the U.S. increased by 31% from 21.6 per 100,000 in 2019 to 28.3 per 100,000 in 2020. The rates of drug overdose among men were more than 1.5 times that of women. Prescription drugs were more common in overdose deaths among women and illicit drugs were more commonly the cause of overdose death among males. The *illicit drug overdose* rate is higher in Eddy than the *prescription drug overdose* rate and Eddy County’s opioid emergency visit rate increased from 32.1 in 2019 to 35.3 in 2020 but is still lower than the state rate of 54.6 per 100,000.

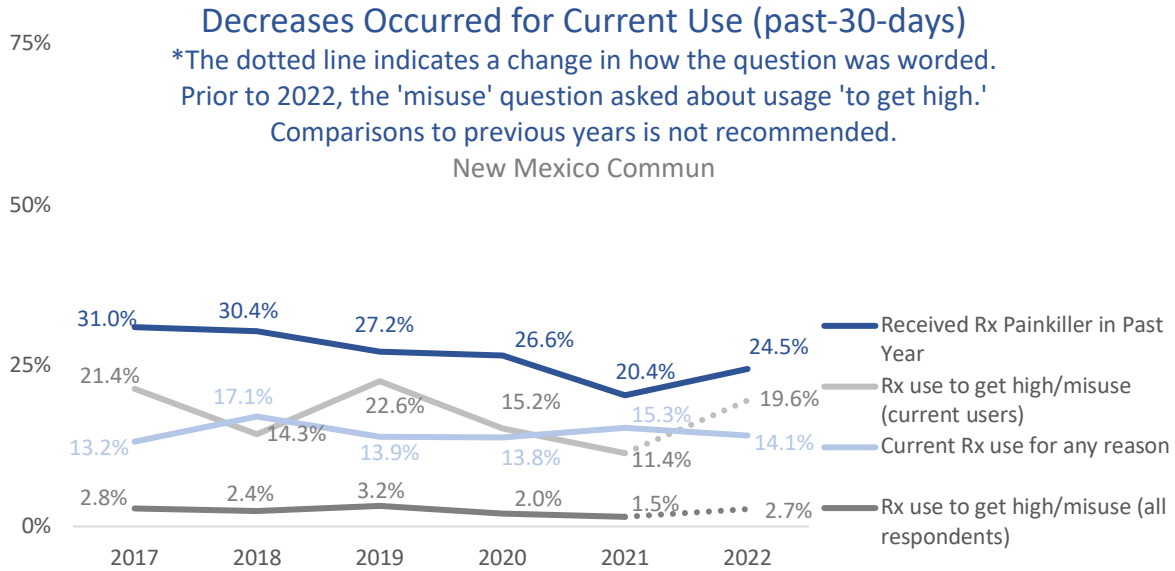
Drug overdose deaths are complex and most involve more than one type of substance, and most overdoses are unintentional.

Death Rate per 100,000	United States 2020	New Mexico 2020	Eddy 2016-2020	Eddy 2015-2019
Total Drug Overdose	28.3	29.2	25.4	28.6
Rx Overdose	--	7.3	5.9	7.0
Illicit Drug Overdose	--	10.3	10.6	12.2
Opioid Overdose Related Emergency Visits	--	54.6	35.3	32.1

SOURCE: 2022 NM Substance Abuse Epi Profile (DOH)

Current Opioid Strategies Include:

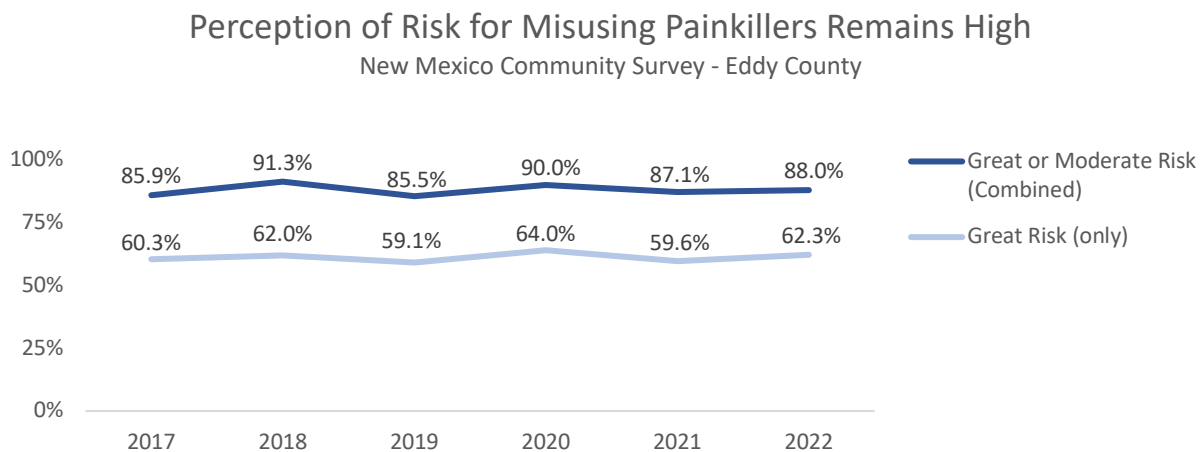
- Campaigns designed to raise awareness of the risks associated with opioids, safe storage and disposal options, and not sharing prescription painkillers (or other medication) with anyone to whom it was not prescribed.
- Educating parents and senior centers about how to properly dispose of their medications, safely store medications, and the dangers of sharing.
- Working with local pharmacies and medical providers to educate patients on safe storage and disposal. Providing pharmacy bag tags and disseminating information on opioids, safe storage, and disposal information.
- Supporting and promoting drug take back events each year and promoting permanent drop boxes for unwanted medications.

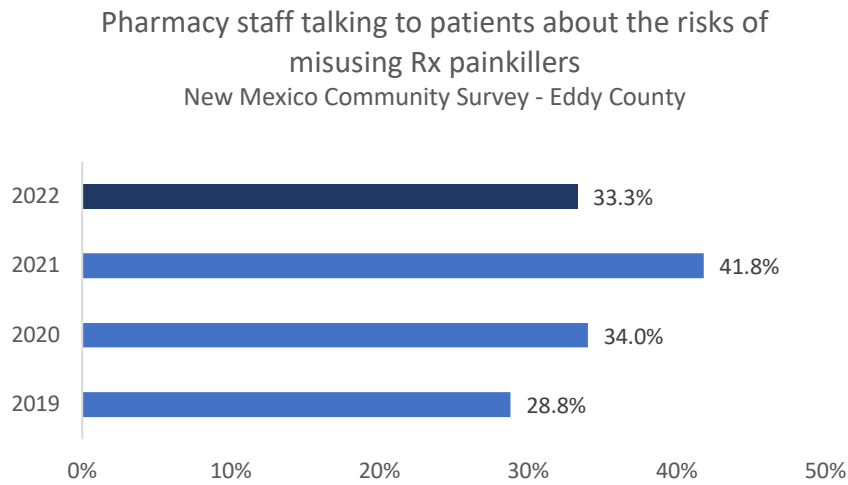


- **Nearly one in every four (1/4) adults received prescription painkillers in 2022 (24.5%).**
- **Older adults age 70+ were most likely to report receiving a prescription painkiller in the past year (38.5%) and to report past 30-day-use for any reason (23.1%).**
- **Older adults 51-60 had the highest reported misuse of painkillers at 7.3%.**

Perception of Risk for Misusing Rx Painkillers

The perceived risk of harm for misusing prescription painkillers increased slightly this year but has remained high for several years. The age with **highest perception** of harm for misusing Rx painkillers were the 61+-year-olds (94.6%) and 51-60-year-olds (92.7%), and 18-25-year-olds had the **lowest perceived risk** (84%).





The Carlsbad Coalition has worked hard to build relationships with pharmacies and have been seeing positive change, however, in 2022 this change was in the undesired direction.

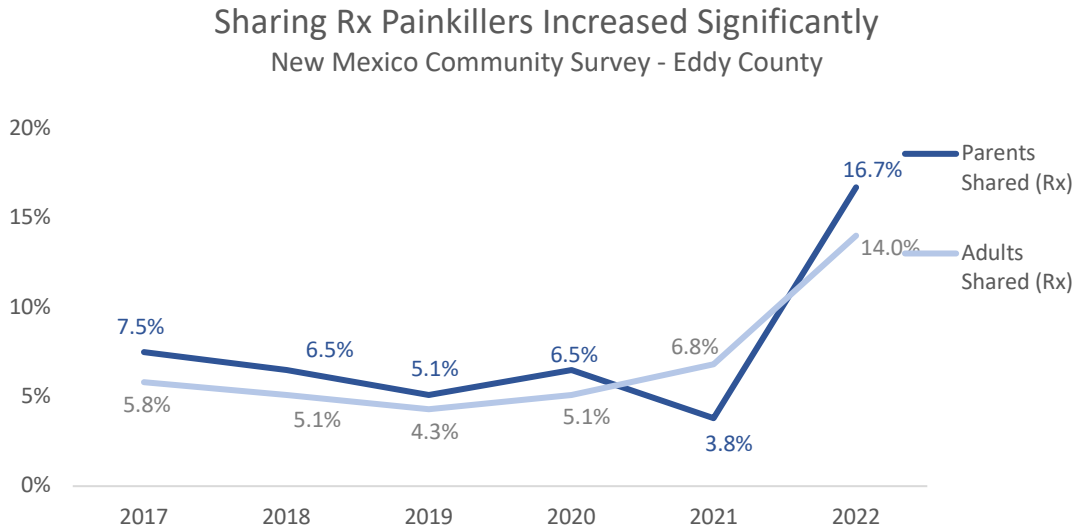
48.4% of respondents said a **healthcare provider** talked to respondents about the risks of misusing prescription pain medications. This is a slight decrease from 2021 (56.4%) but still an improvement over 2020 (46.4%) and 2019 (43.3%).

It is also important to try and understand the other reasons (besides pain) that might cause someone to use a prescription painkiller. In 2022, the main other reasons were for pain not identified by a doctor, to cope with stress/anxiety, and to sleep.

Reasons for Rx Painkiller Use (Among current users)	2018 (n=65)	2019 (n=53)	2020 (n=50)	2021 (n=35)	2022 (n=44)
Pain identified by a doctor	73.8%	67.9%	72.0%	63.7%	93.2%
Pain NOT identified by a doctor	13.8%	18.9%	10.0%	8.8%	9.1%
To help me sleep	10.8%	7.5%	0%	6.6%	4.6%
To Cope with anxiety or stress	4.6%	11.3%	0%	4.4%	6.8%

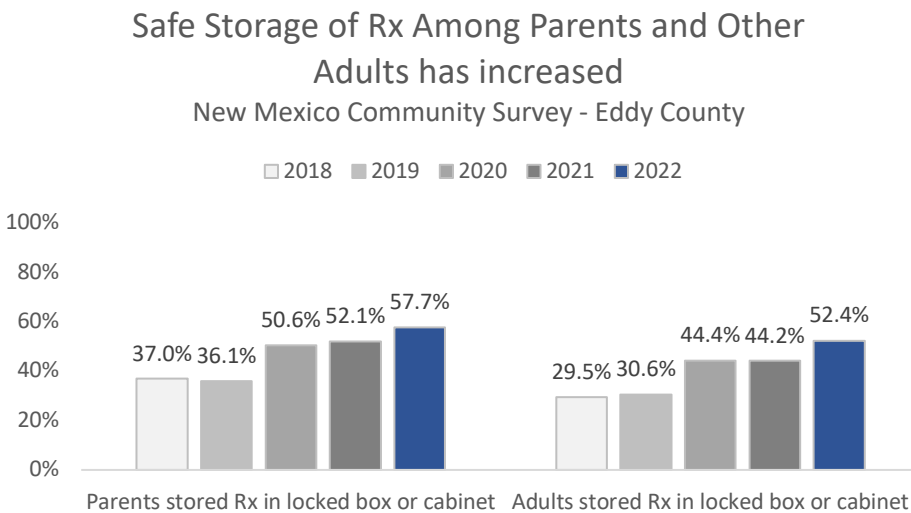
Sharing Behaviors for Painkillers

Sharing prescription painkillers **significantly increased among adults and parents in 2022.**
This is a change in the undesired direction!



Safe Storage of Painkillers

Social access of prescription painkillers can be reduced if people safely store medications in locked boxes or cabinets and do not share them with others who were not prescribed the medication. The Coalition works to educate parents, senior citizens, and the public on safe storage and disposal, and the dangers of sharing prescription painkillers.



Results for parents and adults moved in the **desired direction!**

Fewer respondents reported that pharmacy staff and healthcare providers talked to them about safe storage. This is the undesired direction.

% Of current users who said "yes" to the following:	2019 (n=53)	2020 (n=50)	2021 (n=35)	2022 (n=53)
Pharmacy staff talked to me about safe storage	21.2%	24.7%	40.0%	26.9%
Healthcare provider talked to me about safe storage	25.0%	28.9%	40.0%	30.1%

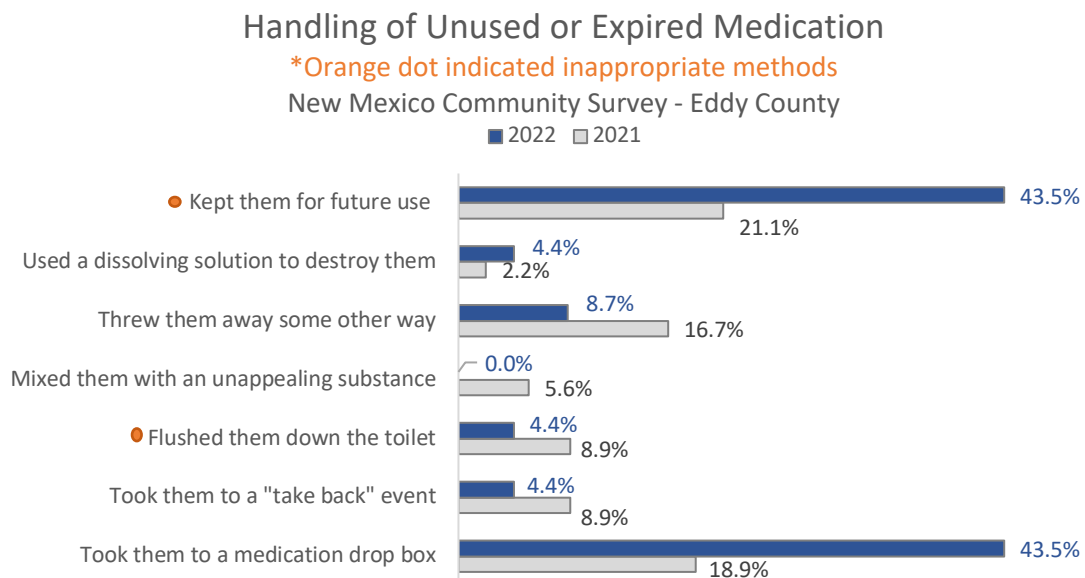
Sources of Prescription Painkillers

The most common source of Rx painkillers across all years is from a doctor or dentist.

Sources for Rx Painkiller Use (among current users)	2019 (n=53)	2020 (n=50)	2021 (n=35)	2022 (n=53)
Doctor or Dentist	79.2%	82.0%	77.1%	84.9%
Family Member	7.5%	4.0%	5.7%	1.9%
Friend	7.5%	0%	0%	1.9%
Taken without asking	1.9%	0%	0%	1.9%

Disposal of Painkillers

In 2021 a question was added to the NMCS to capture methods of disposal for unused or expired prescription drugs. The Coalition provides education on proper disposal, but 2022 results reveal that more work is still needed.



Alcohol Measures

Due to increasing concern in the community about rising alcohol use and consequences, the Carlsbad Community Anti-Drug and Gang Coalition added alcohol prevention strategies in 2018.

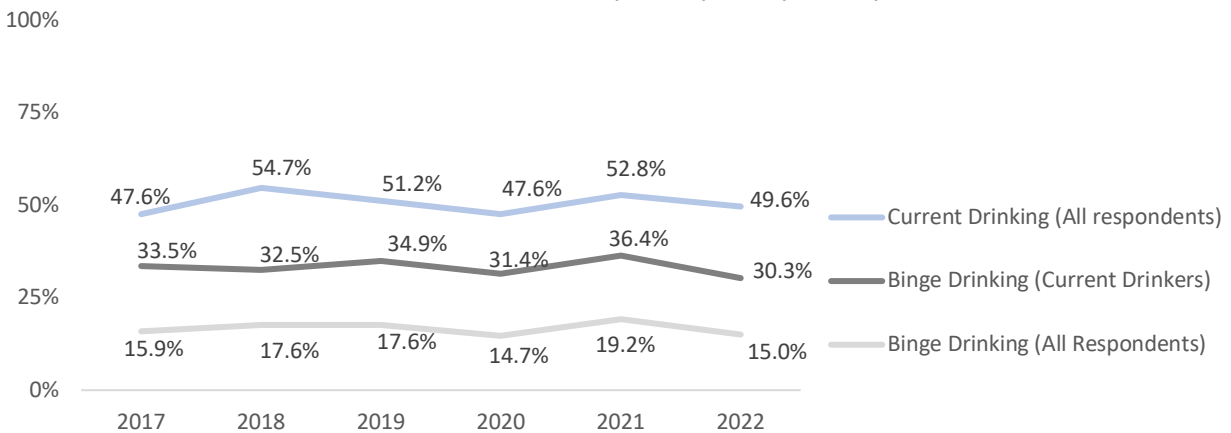
Alcohol-Related Death Rate per 100,000	United States 2020	New Mexico 2020	Eddy 2015-2019	Eddy 2016-2020
Alcohol-Related Death	41.5	71.9	69.8	66.3
Alcohol-Related Chronic Liver Disease Death	10.8	23.3	18.1	16.9
Alcohol-Related Injury Death	14.1	32.1	37.8	35.3

SOURCE: 2022 NM Substance Abuse Epi Profile, NM deaths from 2016-2020

Injury deaths include motor vehicle crashes, poisonings, suicides, and homicides.

Current Drinking and Binge Drinking Decreases in 2022

New Mexico Community Survey - Eddy County

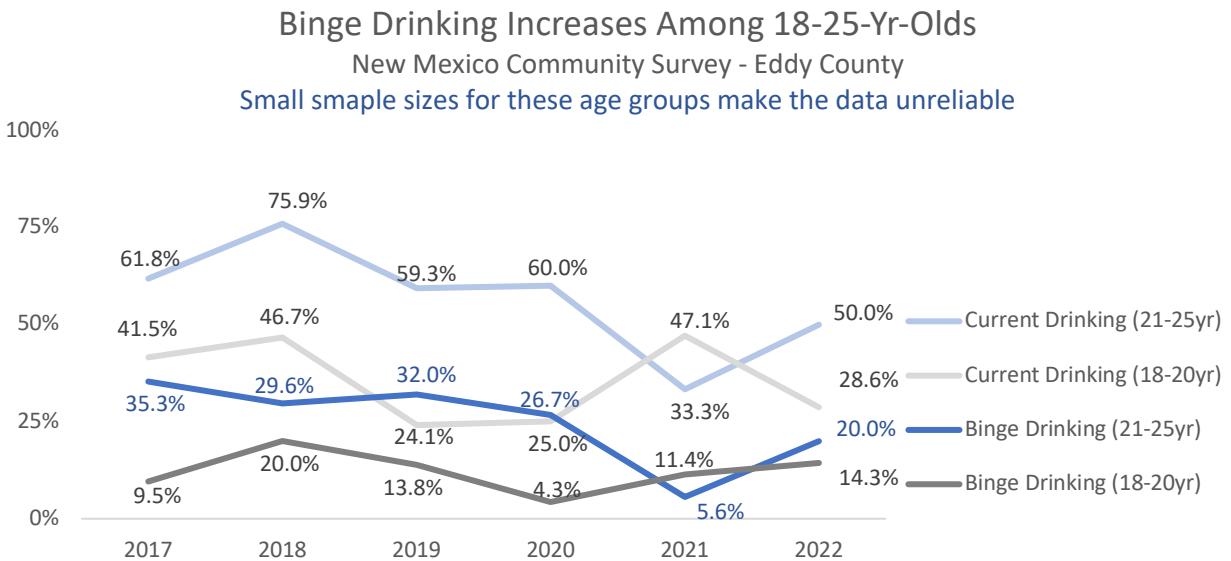


Strategies Designed to Reduce Alcohol-Related Problems and Underage Drinking:

- Promotion and coordination with various law enforcement agencies to increase law enforcement efforts, especially around underage drinking and providing alcohol to minors.
- School policy reform to address substance use issues at school while keeping students in school.
- Media and education on the costs and consequences of heavy alcohol use and underage drinking, including the 4th degree felony charge and related consequences for providing alcohol to minors.

Alcohol Use Among Young Adults

Current drinking is used to describe consuming alcohol in the past 30-days. Binge drinking is defined as having 5+ drinks (males) or 4+ drinks (females) in one sitting. Binge drinking is associated with negative consequences including alcohol-related motor vehicle crashes, injuries, assaults, and other crimes. It is also linked with long-term health consequences such as liver disease and cancers.



Sample sizes for 18-20-yr-olds are small n=7 (2022), n=8 (2021), and for 21-25-yr-olds n=21 (2022), n=6 (2021).

Sources of Alcohol Among 18-20-Year-Old Survey Respondents

Keep or remove?? Only 2 of the 7 total 18–20-year-old respondents reported drinking alcohol in the past month (28.6%). Among those respondents, the top sources for alcohol were adult family members, parties, or they bought it themselves (small sample size makes these numbers less reliable).

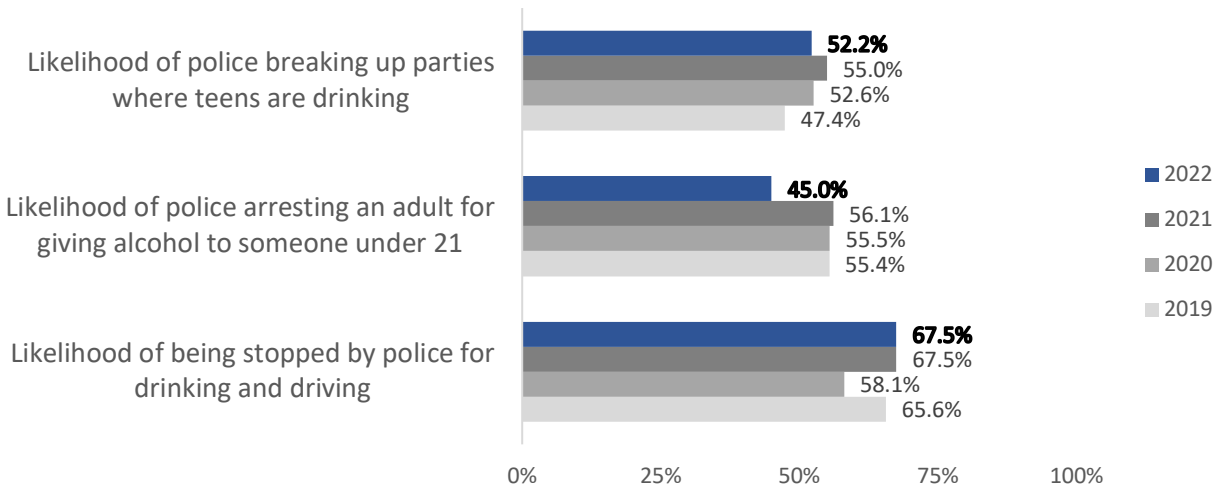
Eddy County – NMCS	2018	2019	2020	2021	2022
Adults provided alcohol to a minor (in past year)	3.6%	2.2%	1.9%	3.7%	2.1%
Parents provided alcohol to a minor (in past year)	3.3%	2.9%	2.9%	3.7%	1.2%

Youth and other community members tell us that minors usually access alcohol from social sources. Therefore, prevention initiatives aim to raise awareness of the laws regarding providing alcohol to minors, harms and dangers of underage drinking, and encouraging adults never to provide alcohol to minors.

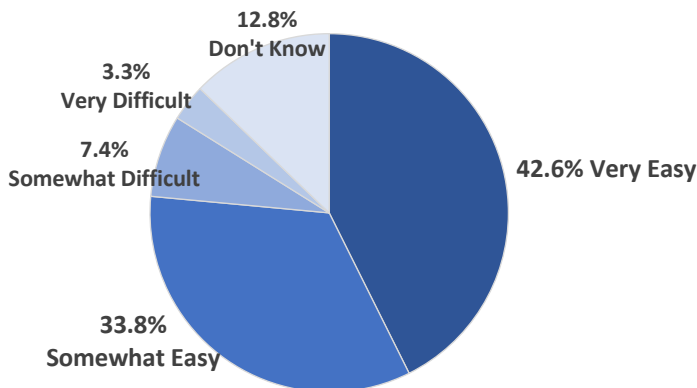
Enforcement of Underage Drinking and Other Alcohol Laws

An increased perception of risk of getting caught has been linked with a decrease in problem behavior, like underage drinking and driving after drinking. Strategies aiming to increase the perception of risk include publicizing enforcement efforts and education on existing laws.

Perception of Enforcement of Alcohol Laws Decreased in 2022
 % who said "Very Likely" or "Likely"
 New Mexico Community Survey - Eddy County



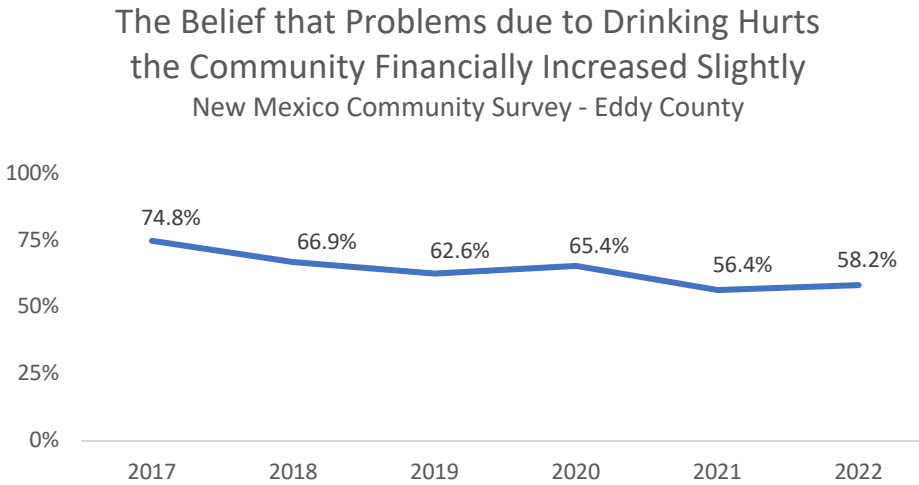
Most People Think Access to Alcohol by Teens is "Very Easy" or "Somewhat Easy"
 New Mexico Community Survey - Eddy County 2022



76.4% of respondents think it is very/somewhat easy for teens to access alcohol in the Eddy community, which is a slight decrease from 2021 (78.6%) and represents a change in the *desired direction*.

Only 10.7% of people think it is difficult for teens to obtain alcohol.

The heavy toll drinking takes on the community is high. An epidemiology study done over a decade ago revealed the economic costs associated with alcohol misuse in New Mexico for a single year (2006) was \$2.5 billion.¹ It is likely even higher today.



After several years of a decrease in the community's belief that alcohol hurts the community financially, this year's slight increase represents change in the desired direction.

Studies consistently find increasing price or tax levels reduces sales, especially to high-risk groups such as underage and heavy drinkers,² and also contributes to reductions in traffic crashes.^{3,4,5}



Many public health issues are related to binge and heavy drinking.

In addition to reductions in traffic crashes and alcohol consumption, increases in alcohol excise tax rates have been associated with immediate and sustained reductions in alcohol-related disease and death.⁶

¹ New Mexico DOH, Epidemiology and Response Division, (2009). The human and economic Cost of alcohol abuse in New Mexico, 2006, Jim Roeber. Volume 2009, Number 10. <https://www.nmhealth.org/data/view/report/257/>

² Babor, et al., (2003). Alcohol: No Ordinary Commodity. New York, NY. Oxford University Press.

³ Adrian M, Ferguson BS, Her M. (2001). Can alcohol price policies be used to reduce drunk driving? Evidence from Canada. Subst Use Misuse. 2001;36:1923–1957.

⁴ Chaloupka FJ, Saffer H, Grossman M. Alcohol control policies and motor-vehicle fatalities. J Legal Stud. 1993;22:161–186.

⁵ Dee TS. State alcohol policies, teen drinking and traffic fatalities. J Public Econ. 1999;72:289–315.

⁶ Wagenaar, A., Maldonado-Molina, M., Wagenaar, B. (2009). Effects of Alcohol Tax Increases on Alcohol-Related Disease Mortality in Alaska: Time-Series Analyses from 1976 to 2004. Research and Practice. American Journal of Public Health. August 2009, Vol 99, No.8.

2022 Demographic Characteristics for Eddy County NMCS Respondents

Number of eligible respondents (N = 407)			
Age	n	%	
18-20	7	1.7%	
21-25	21	5.2%	
26-30	55	13.5%	
31-40	156	38.3%	
41-50	86	21.1%	
51-60	45	11.1%	
61-70	24	5.9%	
71 or older	13	3.2%	
Gender	n	%	
Female	301	74%	
Male	102	25.1%	
Transgender Man	0	0%	
Transgender Woman	0	0%	
Gender nonconforming	3	0.7%	
Two-spirit	0	0%	
Additional gender category	2	0.5%	
Prefer not to answer	1	0.2%	
Gender	n	%	
CIS-Female	299	73.6%	
CIS-Male	101	24.9%	
Non-CIS gender	6	1.5%	
Sexual Orientation	n	%	
Straight/heterosexual	368	90.4%	
Lesbian/gay	6	1.5%	
Bisexual	13	3.2%	
Queer/pansexual/questioning	3	0.7%	
Different identity	3	0.7%	
Prefer not to answer	15	3.7%	
Race/Ethnicity	n	%	
Alaska Native	0	0%	
Asian	11	2.7%	
Black or African American	13	3.2%	
Hispanic or Latino	182	44.7%	

Native American or American Indian	9	2.2%
Native Hawaiian or Other Pacific Islander	2	0.5%
White	223	54.8%
Other	14	3.4%

Number of eligible respondents (N = 407)

Education Level	n	%
Less than high school	17	4.2%
High school or GED	113	28%
Currently an undergraduate	17	4.2%
Some college	104	25.7%
College or above	153	37.9%
Military Service Status	n	%
Active Duty	0	0%
Veteran	3	4.1%
Parent/Caretaker of Someone under 21 Living in the household (n =273)	273	67.4%
Children's age	n	%
Under age 5	91	33.3%
5-11	175	64.1%
12-17	151	55.3%
18-20	26	9.5%
Past 30-day Housing Stable	396	97.8%
Spanish Paper Surveys	6	1.5%

Note that the n column represents the numerator or those falling into the listed category.

Employment Status

Number of eligible respondents (N = 407)

Employment Status (respondents could select more than one)	n	%
Employed - working full-time	264	64.9%
Employed - working part-time	29	7.1%
Temporary or seasonally employed	6	1.5%
Self-employed (artists, gig work, consultants)	21	5.2%
Not employed - looking for work	25	6.1%
Not employed - not looking	63	15.5%

Updated October 11th, 2022

Reasons of not looking for work	n	%
Retired	12	75%
Disabled	4	25%
Full-time student	0	0%
Homemaker	0	0%
Other reason	0	0%

Note that the n column represents the numerator or those falling into the listed category.