

Substance Abuse Prevention and Treatment Agency

2017 Epidemiologic Profile, Rural Region

*(Elko, Eureka, Humboldt, Lander, Lincoln,
Pershing and White Pine Counties)*

September 2018



*Office of Analytics
Department of Health and Human Services*

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Data Sources/Limitations

Age-Adjusted Rates

A rate is a measure of the frequency of a specific event over a given period of time, divided by the total number of people within the population over the same period of time. An age-adjusted rate is a rate that has been adjusted, or weighted, to the same age distribution as a “standard” population. Throughout this report, rates are adjusted to the 11 standard age groups of the U.S. population in the year 2000 (Census table P25-1130). Rates are age-adjusted in order to eliminate any potential confounding effects, or biases, that may be a result of health factors that are associated with specific ages.

Avatar

Avatar is a database containing demographic, treatment, billing, and financial information for Nevada mental health facilities throughout the state of Nevada. This data are representative of Nevada state-operated mental health facilities and is not generalizable to the rest of the population.

Behavioral Risk Factor Surveillance System (BRFSS)

BRFSS is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, chronic health conditions, and use of preventive services. More than 350,000 adults are interviewed each year, making the BRFSS the largest telephone health survey in the world. For many states, the BRFSS is the only available source of timely and, accurate data on health-related behaviors. The survey consists of a set of federally grant funded core questions and the states may include and pay for their own questions in the survey. While the surveys focus is chronic disease and injury, topics covered by the survey include car safety, obesity, and exercise among many others. Since state added questions are not asked nationwide, these questions are not comparable.

Hospital Emergency Department Billing (HEDB)

The Hospital Emergency Department Billing data provides health billing data for emergency room patients for Nevada’s non-federal hospitals. NRS 449.485 mandates all hospitals in Nevada to report information as prescribed by the director of the Department of Health and Human Services. The data are collected using a standard universal billing form. The data are for patients who were seen in the emergency room setting. The data includes demographics such as age, gender, race/ethnicity and uses International Classification of Diseases-9-Clinical Modification (ICD-9-CM) diagnoses codes and International Classification of Diseases-10-Clinical Modification (ICD-10-CM) diagnoses. ICD-10-CM diagnoses codes replaced ICD-9-CM diagnoses codes in the last quarter of 2015. Therefore, data prior to last quarter in 2015 may not be directly comparable to data thereafter. In addition, the data includes billed hospital charges, procedure codes, discharge status, and external cause of injury codes. The billing information is for billed charges and not the actual payment received by the hospital.

Hospital Inpatient Billing (HIB)

The Hospital Inpatient Billing data provides health billing data for patients discharged from Nevada’s non-federal hospitals. NRS 449.485 mandates all hospitals in Nevada to report information as prescribed by the director of the Department of Health and Human Services. The data are collected using a standard universal billing form. The data are for patients who were admitted for at least 24 hours as an inpatient, but do not include patients who were discharged from the emergency room. The data includes demographics such as age, gender, race/ethnicity and uses International Classification of Diseases-9-Clinical Modification (ICD-9-CM) diagnoses codes and International Classification of Diseases-10-Clinical

Modification (ICD-10-CM) diagnoses (up to 33 diagnoses respectively). ICD-10-CM diagnoses codes replaced ICD-9-CM diagnoses codes in the last quarter of 2015. Therefore, data prior to last quarter of 2015 may not be directly comparable to data thereafter. In addition, the data includes billed hospital charges, procedure codes, length of hospital stay, discharge status, and external cause of injury codes. The billing data information is for billed charges and not the actual payment received by the hospital.

Nevada Report Card

The Nevada Report Card is the accountability reporting website of the Nevada Department of Education. In compliance with federal and state law, it assists community members (parents, educators, researchers, lawmakers, etc.) in locating a wealth of detailed information pertaining to K-12 public education in Nevada. Through the interactive Nevada Report Card website, you may access state, district and school level reports in three categories: “school and district information,” “assessment and accountability” and “fiscal and technology.”

Nevada State Demographer

The Nevada State Demographer’s office is funded by the Nevada Department of Taxation and is part of the Nevada Small Business Development Center. It is responsible for conducting annual population estimates for Nevada’s counties, cities, and towns.

United States Census Bureau

Federal government agency responsible for the United States Census; the official decennial (10-year period) count of people living in the United States of America. Collected data is disseminated through web browser-based tools like the American Community Survey which provides quick facts on frequently requested data collected from population estimates, census counts and surveys of population and housing for the nation, states, counties, and large cities. The Bureau also offers the American Fact Finder, which profiles the American population and economy every five years.

Web-Enabled Vital Records Registry Systems (WEVRRS)

Statewide births and deaths are collected by the Office of Vital Records, in the Division of Public and Behavioral Health. WEVRRS is a software utilized by physicians, registered nurses, midwives, informants or funeral directors, and other individuals to collect and consolidate birth and death related information.

Youth Risk Behavior Survey (YRBS)

The purpose of the YRBS is to provide Nevada data to assess trends in priority health-risk behaviors among high school students; measure progress toward achieving national health objectives for Healthy People 2020 and other program and policy indicators; and evaluate the impact of broad school and community interventions at the national, state, and local level. The YRBS is a biennial, anonymous, and voluntary survey of students in 9th through 12th grade in traditional, public high schools that monitors the prevalence of health risk behaviors among youth. The survey asks students to self-report their behaviors in six major areas of health that directly lead to morbidity and mortality, these include: (1) Behaviors that contribute to unintentional injuries and violence; (2) Sexual behaviors that contribute to human immunodeficiency virus (HIV) infection, other sexually transmitted diseases, and unintended pregnancy; (3) Tobacco use; (4) Alcohol and other drug use; (5) Unhealthy dietary behaviors; and (6) Physical inactivity.

Executive Summary

This report is intended to provide an overview of behavioral health in Elko, Eureka, Humboldt, Lander, Lincoln, Pershing, and White Pine, also known as Rural Region Nevada. The analysis can be used to identify issues of concern and areas that may need to be addressed.

Key Findings:

- Rural Region's population has grown by an estimated 6% since 2010.
- Mental health utilization decreased between 2011-2013. Utilization has since consistently increased between 2013-2017. Hospital visits to both the emergency department and inpatient admissions have increased since 2009, especially for depression and anxiety.
- From 2011-2017, White non-Hispanic population has had a higher rate of utilization of state-funded mental health clinics than other races/ethnicities.
- The most common method of attempted suicides from 2009-2017 is from substance and drug overdose.
- Between 2009 and 2017, Nevada had its highest age-adjusted suicide rate in 2016, which was 36.0 per 100,000 population while the lowest rate was in 2017, with 17.4 per 100,000 population.
- The age-adjusted suicide rates for White non-Hispanics were significantly higher than other races between 2009-2010 and 2016-2017. Black non-Hispanic had the highest rate in 2011, which was 199.2 per 100,000. Between 2012-2015, non-Hispanic American Indian or Eskimo had the highest age-adjusted suicide rates.
- In 2017, no adult Rural Region resident seriously considered suicide as compared to 3.3% in 2016.
- Between 2009-2017, the highest rate of mental health-related deaths was reported for age 74+.
- Among rural region high school students, 34% have reported using marijuana, 4% have reported using heroin and 6% have reported using cocaine. Among rural region middle school students, 9% reported using marijuana and 3% have reported using cocaine in 2017 respectively.
- In Rural Region Nevada for 2017, 64% of high school students and 29% of middle school students reported having ever drank alcohol.
- In 2017, 168 deaths were related to alcohol and/or drugs use in Rural Region Nevada.
- Among high school students for 2017 in rural region Nevada, 31% have reported that they are currently having sex and 43% have ever had sex.
- Self-report marijuana/cannabis use in pregnant women has not changed from 3.1 per 1,000 live births in 2010 as compared to 2017.
- Self-report meth/amphetamines use in pregnant women has increased from 0.8 per 1,000 live births in 2010, to 3.1 per 1,000 live births in 2017.
- The Lesbian/Gay/Bisexual population have higher responses to health risk behaviors including binge drinking, depressive disorder, and more days of poor mental health for 2015 and 2017.

Demographic Snapshot

Figure 1. Selected Demographics for Nevada.

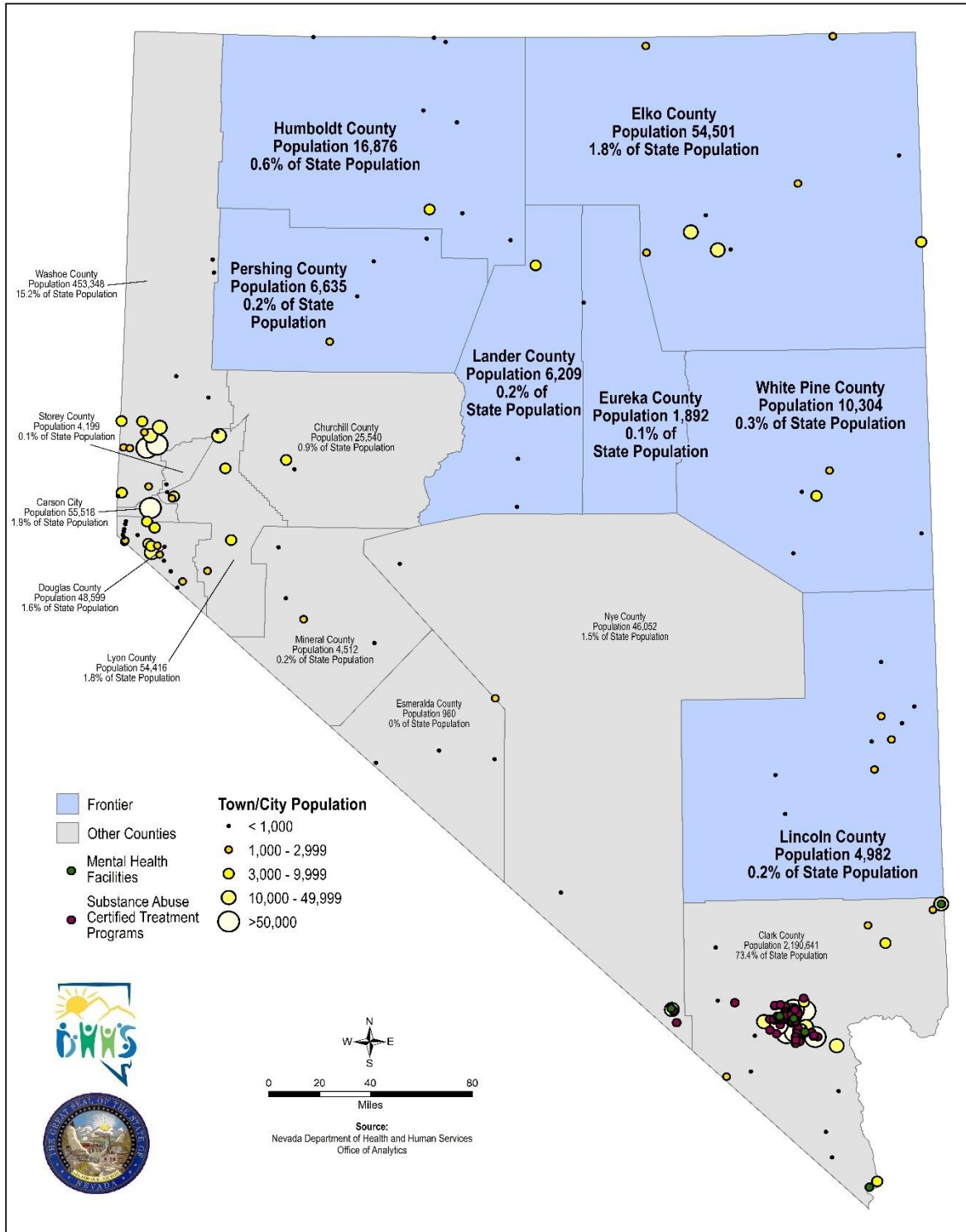
	Rural Region
Population, 2017 estimate* - Rural Region	101,399
Population, 2010 estimate* - Rural Region	95,577
Population, percentage change* - Rural Region	6.1%
Male persons, 2017 estimate* - Rural Region	53,614 (52.9%)
Female Persons, 2017 estimate* - Rural Region	47,785 (47.1%)
Median household income (in 2016), 2012-2016** - Elko	\$74,672
Persons in poverty, Elko, percent (2016) ** - Elko	8.9%
With a disability, under the age 65 years, percent, 2012-2016** - Elko	7.8%
Median household income (in 2016), 2012-2016** - Eureka	\$70,000
Persons in poverty, Elko, percent (2016) ** - Eureka	7.8%
With a disability, under the age 65 years, percent, 2012-2016** - Eureka	8.1%
Median household income (in 2016), 2012-2016** - Humboldt	\$67,295
Persons in poverty, Elko, percent (2016) ** - Humboldt	10.1%
With a disability, under the age 65 years, percent, 2012-2016** - Humboldt	7.0%
Median household income (in 2016), 2012-2016** - Lincoln	\$49,406
Persons in poverty, Elko, percent (2016) ** - Lincoln	9.7%
With a disability, under the age 65 years, percent, 2012-2016** - Lincoln	8.7%
Median household income (in 2016), 2012-2016** - Lander	\$78,077
Persons in poverty, Elko, percent (2016) ** - Lander	8.6%
With a disability, under the age 65 years, percent, 2012-2016** - Lander	5.8%
Median household income (in 2016), 2012-2016** - Pershing	\$45,192
Persons in poverty, Elko, percent (2016) ** - Pershing	12.4%
With a disability, under the age 65 years, percent, 2012-2016** - Pershing	8.2%
Median household income (in 2016), 2012-2016** - White Pine	\$58,156
Persons in poverty, Elko, percent (2016) ** - White Pine	9.7%
With a disability, under the age 65 years, percent, 2012-2016** - White Pine	13.1%
Land area (square miles), 2016** - Rural Region	62,044
Land area (square miles), 2016**	109,806

Source: *Nevada State Demographer, Vintage 2017 and **US Census Bureau.



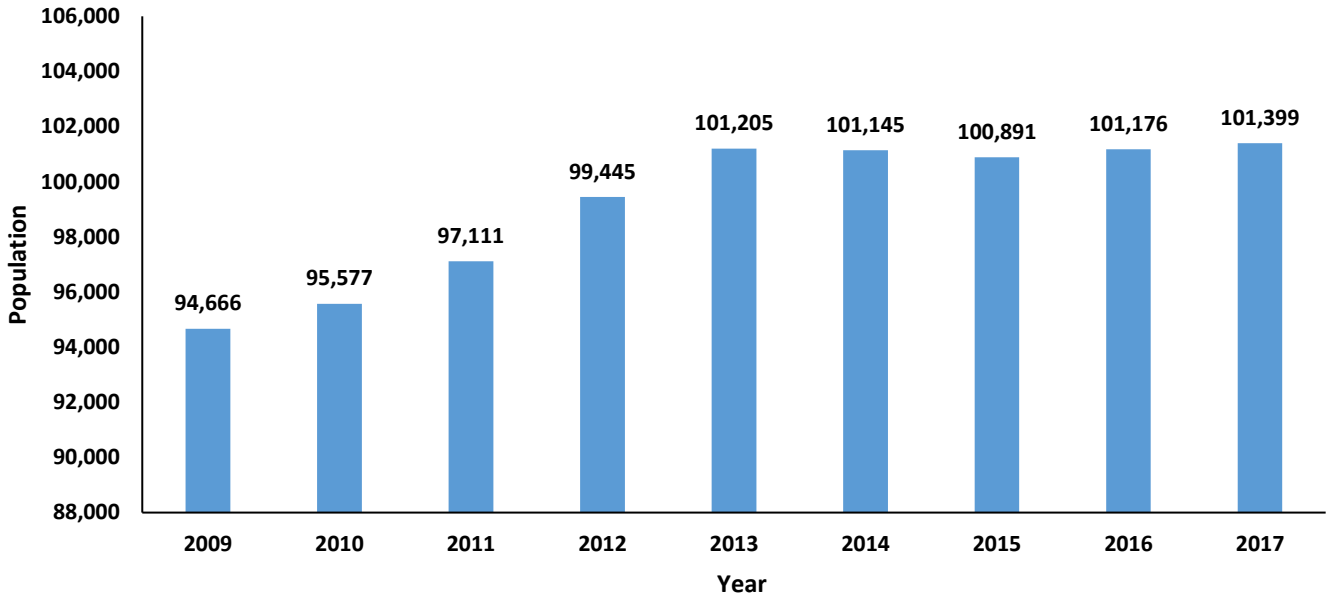
In 2017, the estimated population for the Rural Region, Nevada was 101,399, a 6.1% increase from the 2010 estimated population. The population is made up of approximately 47% of females and 53% males.

Figure 2. Rural Region Population Distribution by County, 2017.



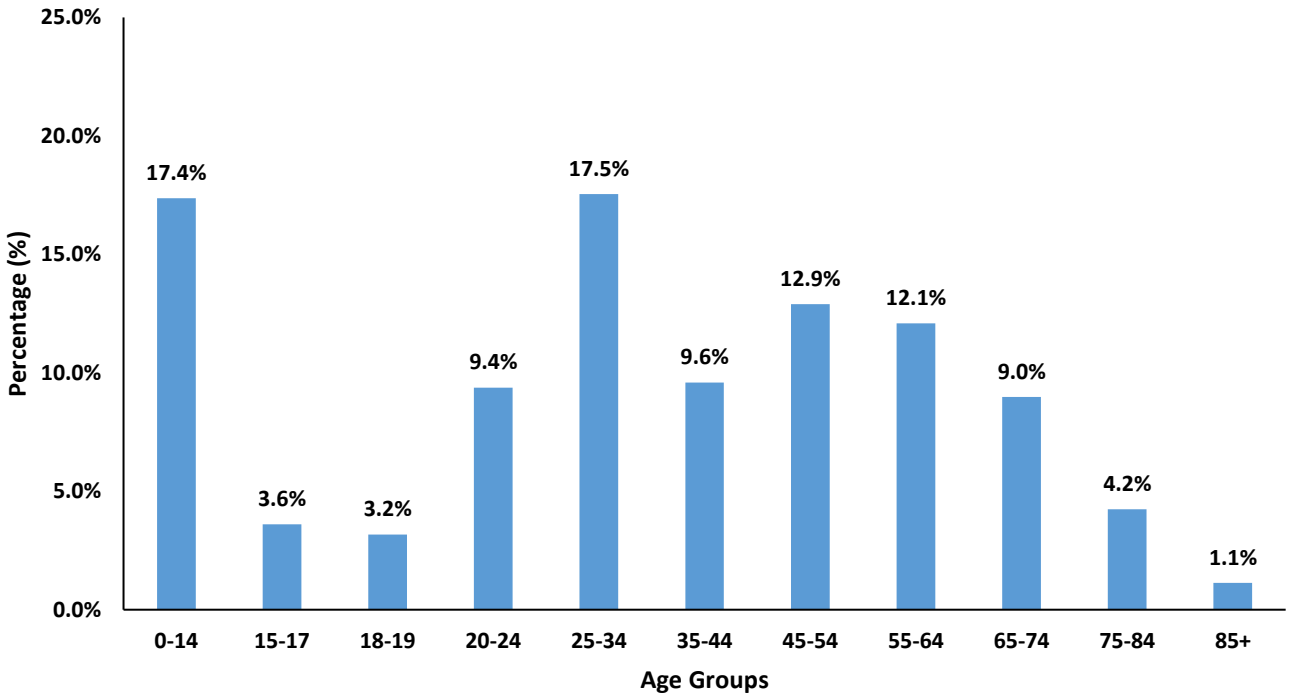
Source: Nevada State Demographer.
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 3. Rural Region Population, 2009-2017.



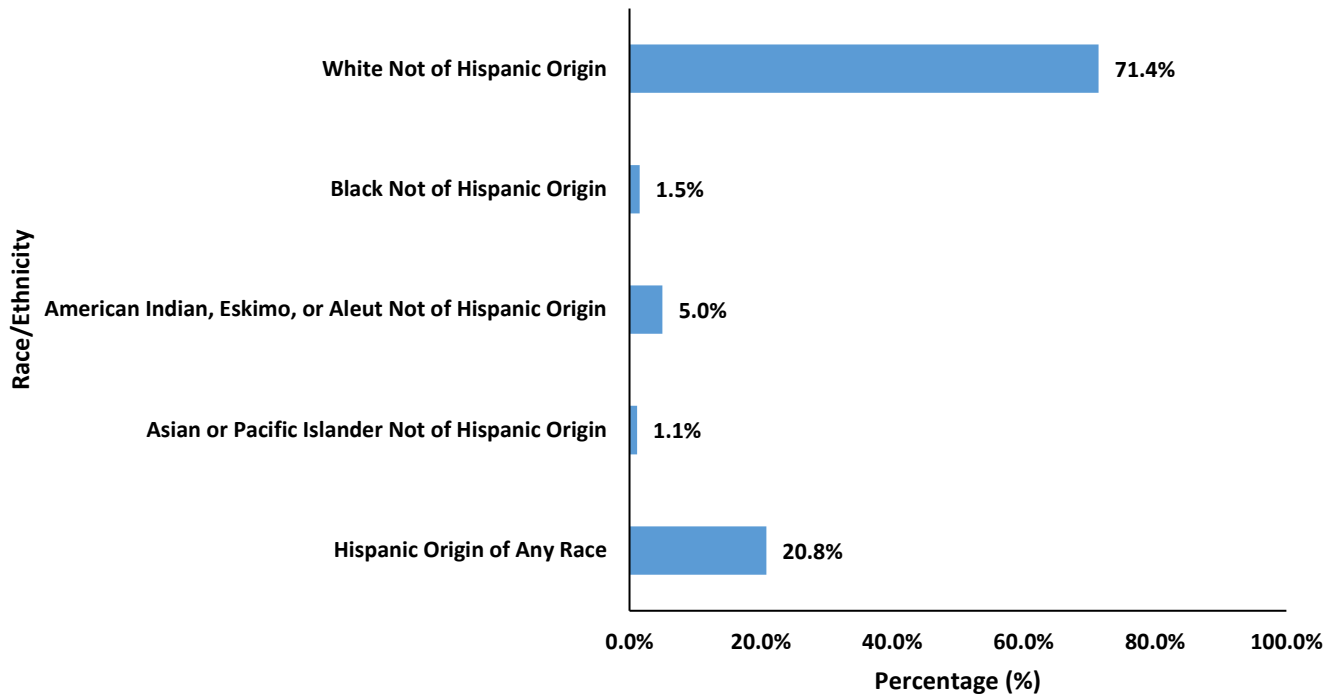
Source: Nevada State Demographer, Vintage 2017.
 Chart scaled to display differences among years.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 4. Rural Region Population by Age Group, 2017.



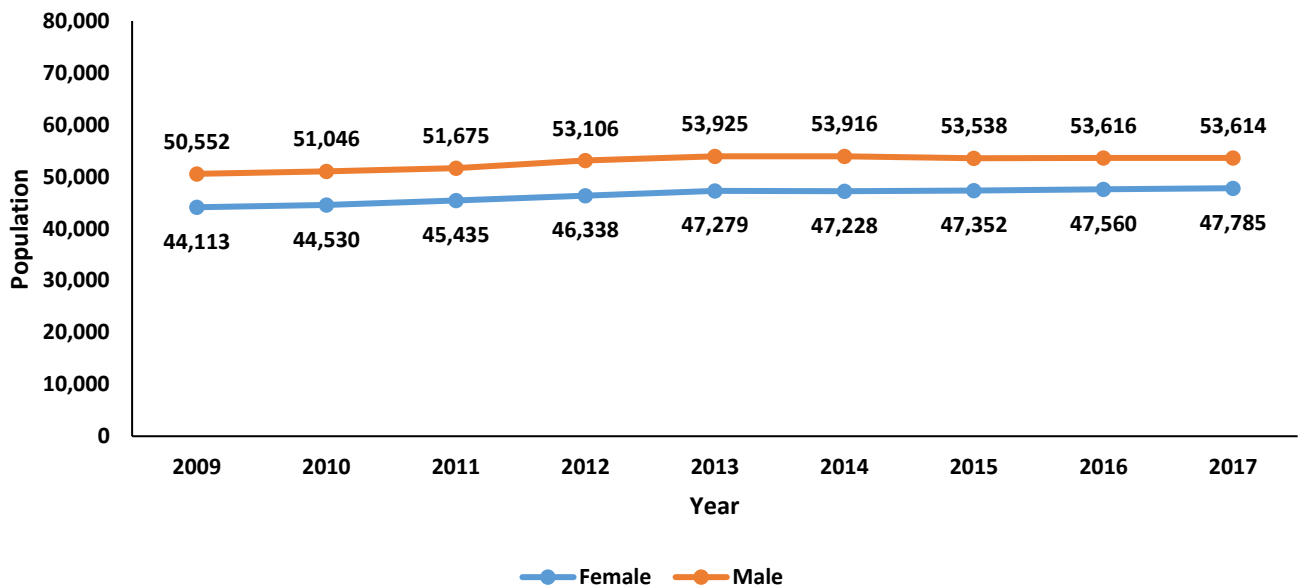
Source: Nevada State Demographer, Vintage 2017.
 Chart scaled to 25% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 5. Rural Region Population by Race/Ethnicity, 2017.



Source: Nevada State Demographer, Vintage 2017.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 6. Rural Region Population Distribution by Sex, 2009-2017.



Source: Nevada State Demographer, Vintage 2017.
 Chart scaled to display differences among sex.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

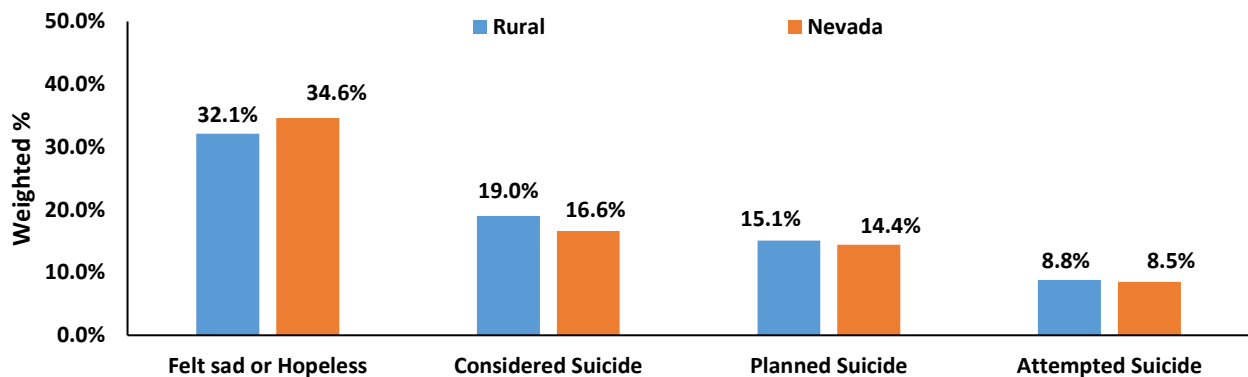
Mental Health

Mental health data is collected by numerous data sources in Nevada. This include YRBS, BRFSS, Hospital billing data, State Funded Mental Facilities and vital records data.

Youth Risk Behavior Survey (YRBS)

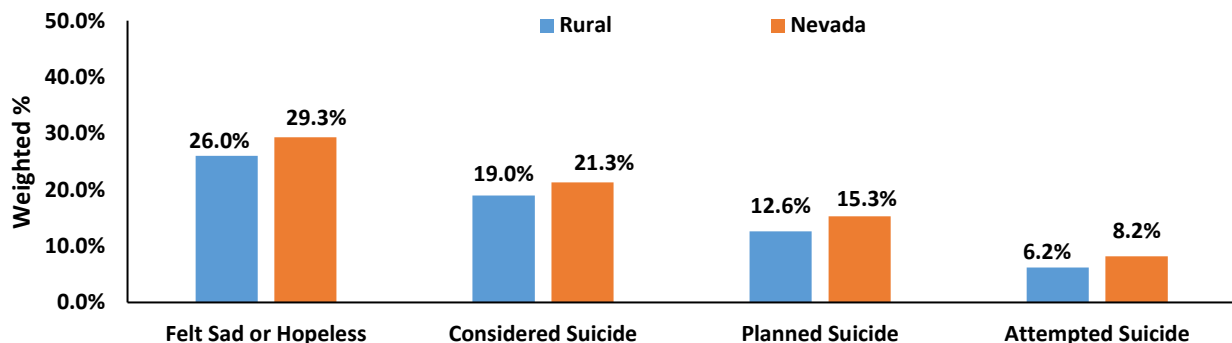
The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years. In Nevada for 2017, 5,336 high school, and 5,464 middle school students participated in the YRBS, of these 858 in 2017 where in the Rural Region.

Figure 7. Mental Health Risk Behaviors, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 8. Mental Health Risk Behaviors, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

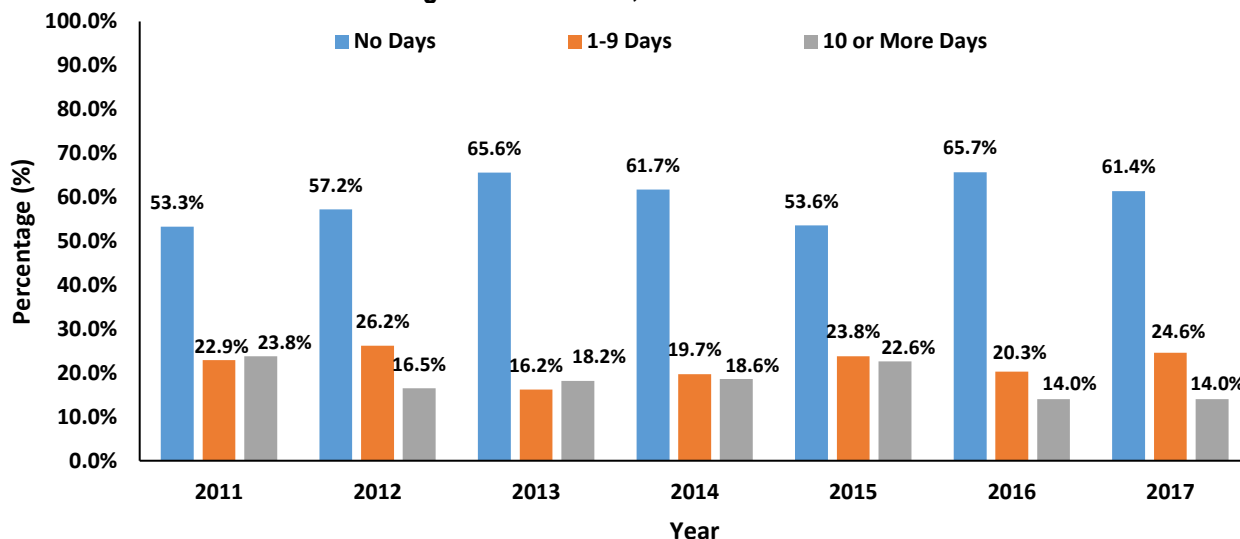
Approximately 32.1% of rural high school students and 26.0% of rural middle school students have felt sad or hopeless in the last 12 months. About 19.0% of high school and middle school students have considered suicide, while 15.1% of high school students have planned to commit suicide in the past 12 months. About 8.8% of rural high school students have attempted suicide in the past 12 months.

Behavioral Risk Factor Surveillance System (BRFSS)

BRFSS collects information on adult health-related risk behaviors. According to the Centers for Disease Control and Prevention, BRFSS is a powerful tool for targeting and building health promotion activities.

Rural Region residents were asked how many days, if any, did a mental health condition or emotional problem keep them from doing their work duties or other usual activities.

Figure 9. Percentages of Number of Days Adult Rural Residents Experienced Poor Mental or Physical Health that Prevented them from Doing Usual Activities, 2011-2017.



Source: Behavioral Risk Factor Surveillance System (BRFSS).

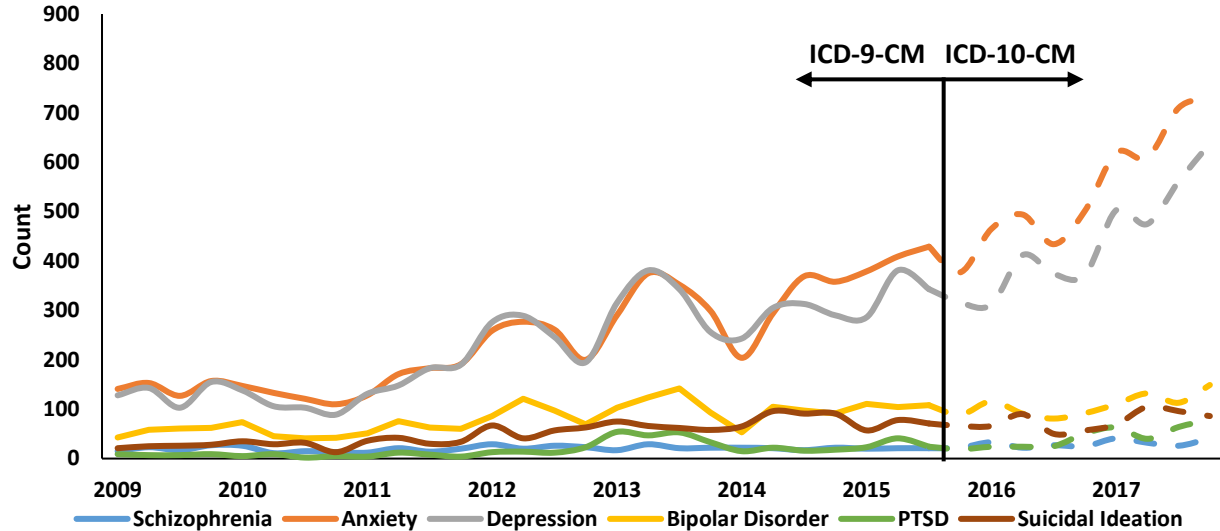
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In 2016, 65.7% rural residents reported missing no days of work or activities, 20.3% missed 1-9 days, and 14.0% missed 10 or more days of work or usual activities. In 2017, 61.4% reported missing no days of work or activities, 24.6% missed 1-9 days, and 14.0% missed 10 or more days of work or usual activities, which is similar to Nevada.

Hospital Emergency Department Encounters

The Hospital Emergency Department Billing data includes data for emergency room patients for Nevada's non-federal hospitals. There were 6,090 visits related to mental health disorders among rural residents in 2017. Since an individual can have more than one diagnosis during a single emergency room visit, the following numbers reflect the number of times a diagnosis in each of these categories was given, and therefore the following numbers are not mutually exclusive.

Figure 10. Mental Health-Related Emergency Department Encounters, by Quarter and Year, Rural Region, 2009-2017.



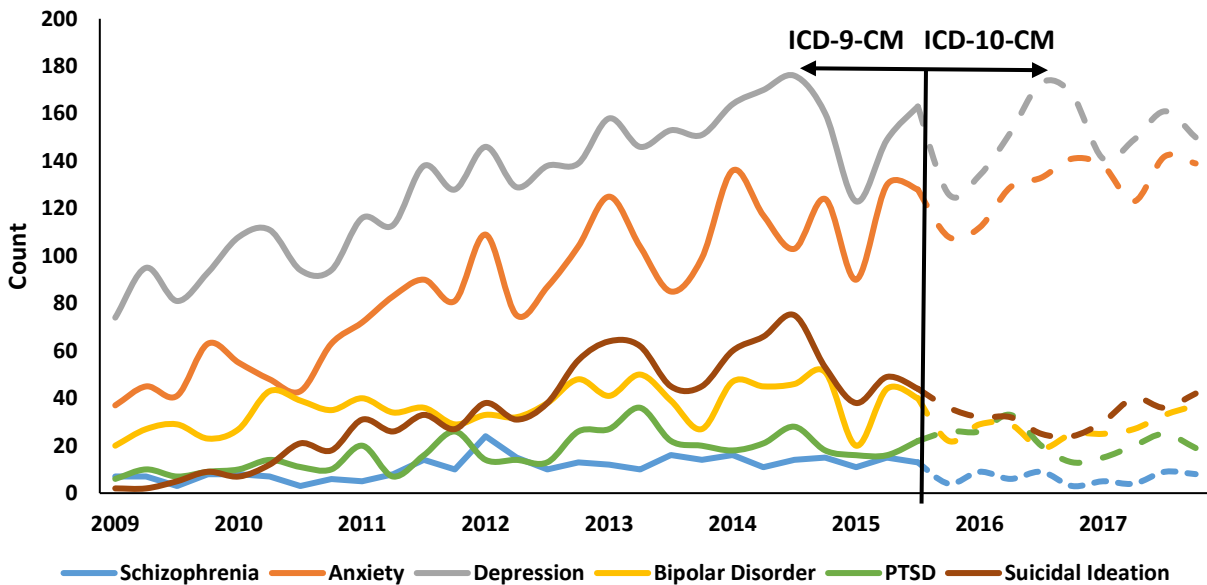
Source: Hospital Emergency Department Billing.
 ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Anxiety has been the leading mental health-related diagnosis since 2014 in emergency department encounters. Anxiety-related encounters increased significantly from 2009 to 2017 in both counts and rates. When adjusted for population growth, 2009 had 578 (610.6 per 100,000 rural residents) emergency department encounters and 2017 had 2,668 (2,631.2 per 100,000 rural residents) encounters. Emergency department encounters related to depression also increased from 2009 to 2017 significantly, from 529 (558.8 per 100,000 rural residents) to 2,177 (2,147.0 per 100,000 rural residents).

Hospital Inpatient Admissions

Hospital Inpatient Billing data includes data for patients discharged from Nevada’s non-federal hospitals. There were 1,518 inpatient admissions related to mental health disorders among rural residents in 2017. Since an individual can have more than one diagnosis during a single inpatient admission, the following numbers reflect the number of times a diagnosis was given and therefore the following numbers are not mutually exclusive.

Figure 11. Mental Health-Related Inpatient Admissions, by Quarter and Year, Rural Region, 2009-2017.



Source: Hospital Inpatient Billing.

ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

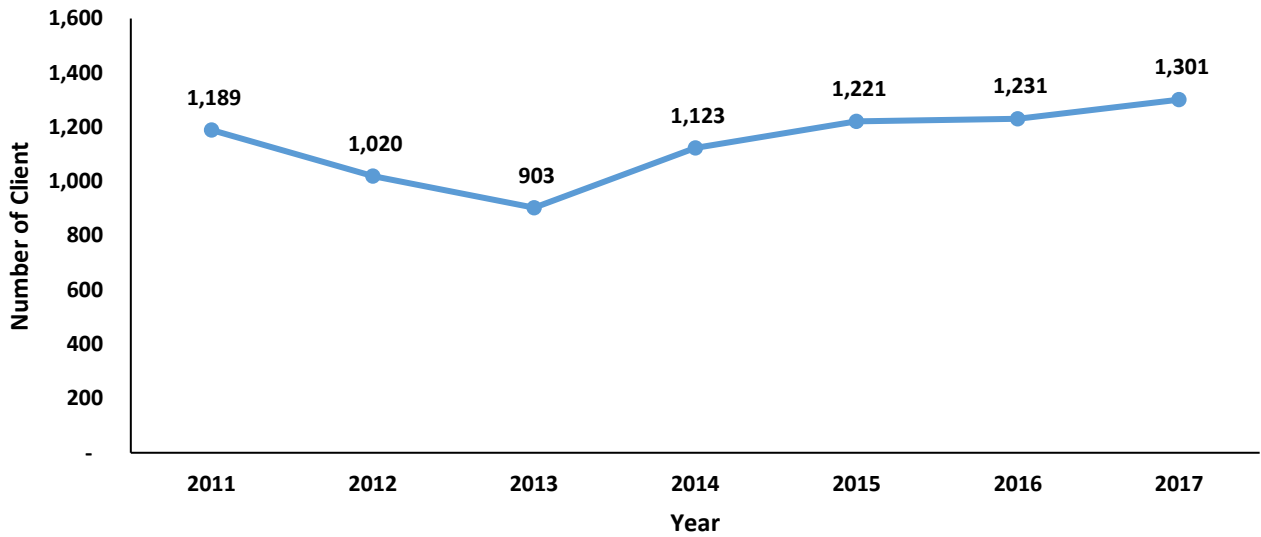
Unlike emergency department encounters, depression is the leading diagnosis for mental health-related inpatient admissions. Depression has increased significantly from 2009 to 2017 both in counts and rates. When adjusted for population growth, 2009 had 343 (362.3 per 100,000 rural residents) inpatient admissions and 2017 had 601 (592.3 per 100,000 rural residents) inpatient admissions. Inpatient admissions related to anxiety increased significantly from 2009 to 2017 from 186 (196.5 per 100,000 rural residents) to 542 (534.5 per 100,000 rural residents).

State Funded Mental Health Services (Avatar)

State-funded mental health facilities are divided into Northern Nevada Adult Mental Health Services (NNAMHS), Southern Nevada Adult Mental Health Services (SNAMHS) and Rural Clinic and Community Health Services. Different services that mental health facilities provide include inpatient acute psychiatric, mobile crisis, outpatient counseling, service coordination, and case management.

Of the total Nevada residents access to DPBH mental health services, 9.5% are from the Rural Region. Of the total rural residents (9.5% of the state total), accessing DPBH mental health services in 2017, 32% lived in Elko County, 32% lived in White Pine County, 19% lived in Humboldt county, 7% in Lander County, 5% in Pershing County, 4% in Lincoln County and 1% lived in Eureka County. White Pine County had the highest rate of adults accessing state funded mental health services at 3,795.0 per 100,00 county specific population.

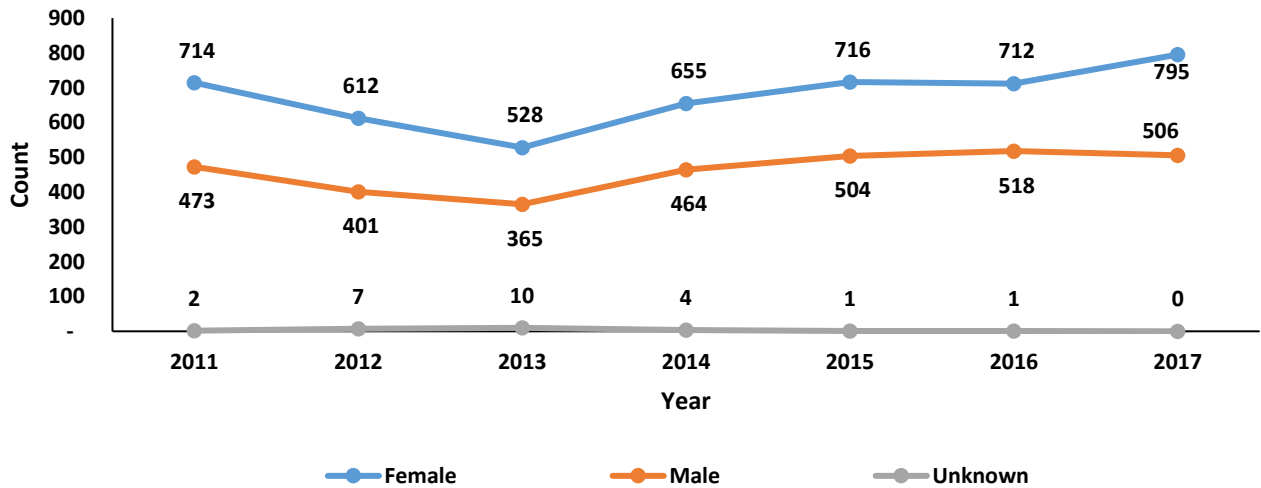
Figure 12. Unique Clients* Served at State Funded Mental Health Clinics, Rural Region, 2011-2017.



Source: Avatar.
 *A client is counted only once per year. Clients may be counted more than once across years.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The number of unique clients served* by State Funded Mental Health facilities in the Rural Region decreased between 2011 to 2013, then increase from 903 in 2013 to 1,301 in 2017.

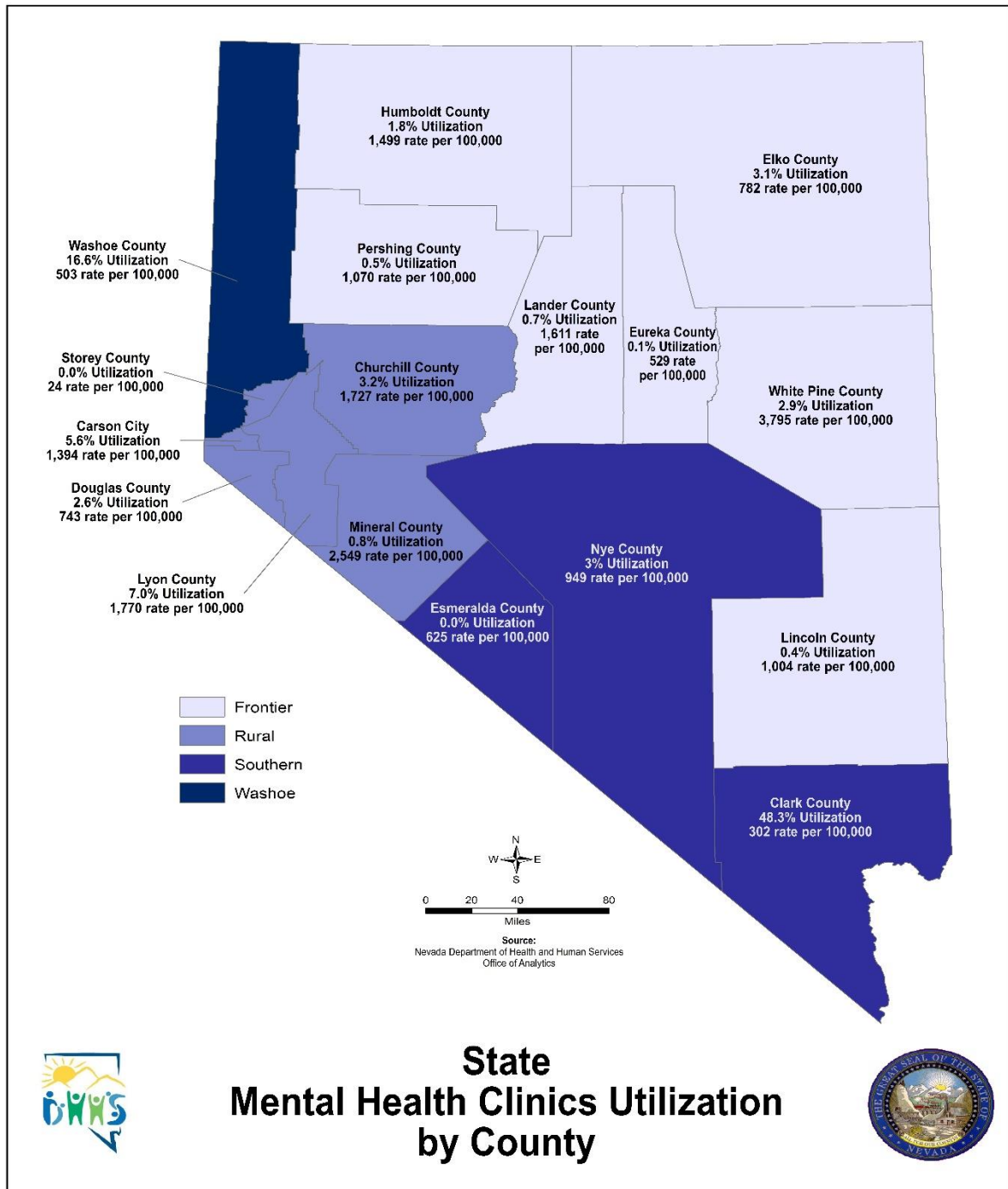
Figure 13. State Funded Mental Health Clinics Utilization* by Gender, Rural Region, 2011-2017.



Source: Avatar.
 *A client is counted only once per year. Clients may be counted more than once across years.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

From 2011 to 2017, females have significantly utilized the state-funded mental health clinics more than males. In 2017, 943.8 per 100,000 male population utilized the state-funded mental health clinics, whereas females were at 1,663.7 per 100,000 female population.

Figure 14. State Funded Mental Health Clinics Utilization by County, 2017



Source: Avatar.

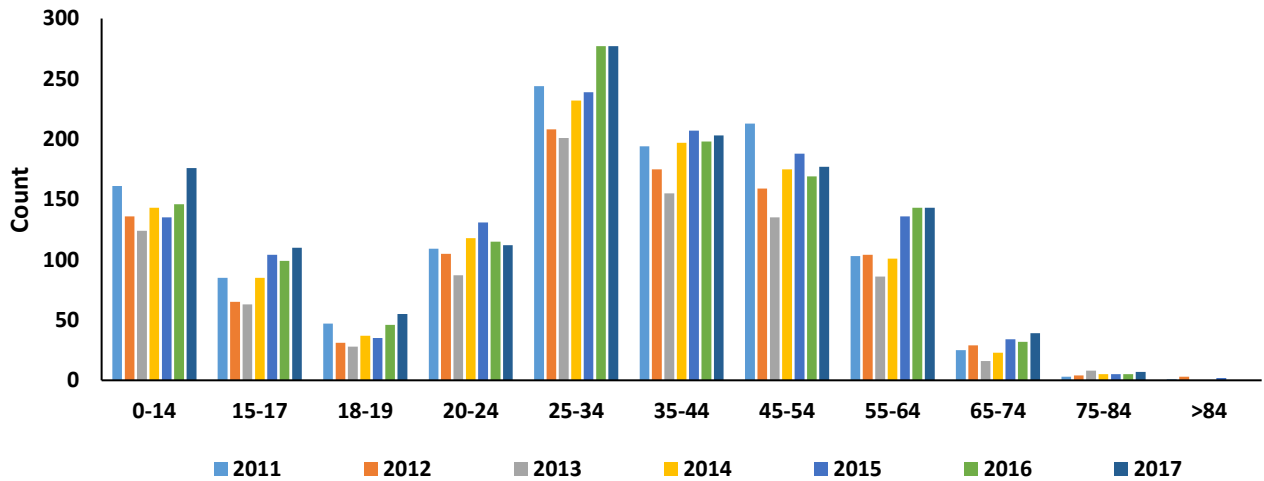
*A client is counted only once per year. Clients may be counted more than once across years.

Utilization: Clients who received mental health services by patient county.

Percent (%): Number of clients who utilize mental health service in that county divided by total utilization.

Rate: Number of clients who utilize service in that county divided by county population per 100,000 people.

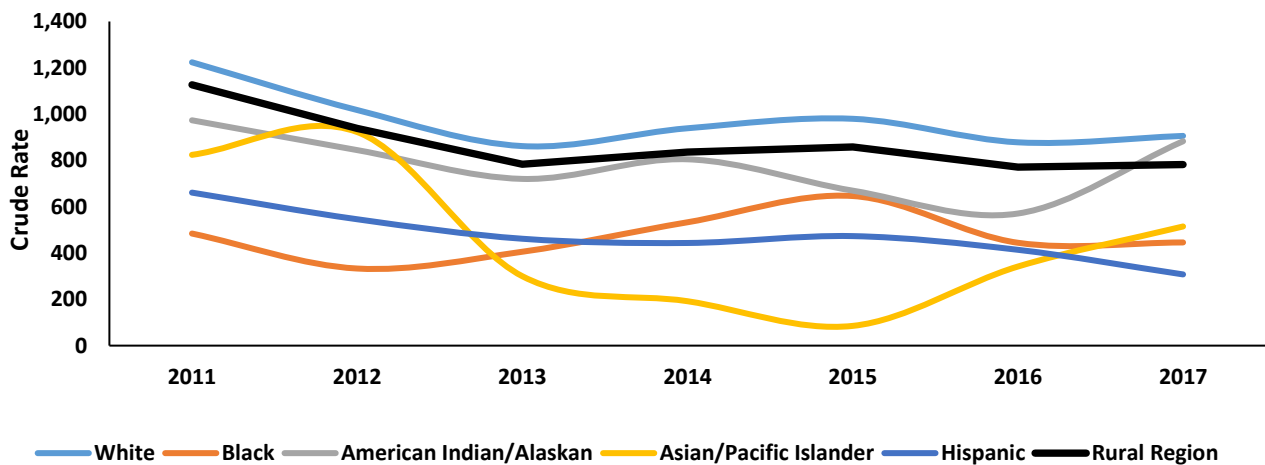
Figure 15. State Funded Mental Health Clinics Utilization* by Age-Group, Rural Region, 2011-2017.



Source: Avatar.
 Age "Unknown" not included in analysis.
 *A client is counted only once per year. Clients may be counted more than once across years.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the rural residents that were patients who utilized state-funded mental health clinics, the most common age group was 25-34-year old's, on average, accounting for about 21% of the patients. Unlike in Nevada as a whole, the most common age group is 45-54.

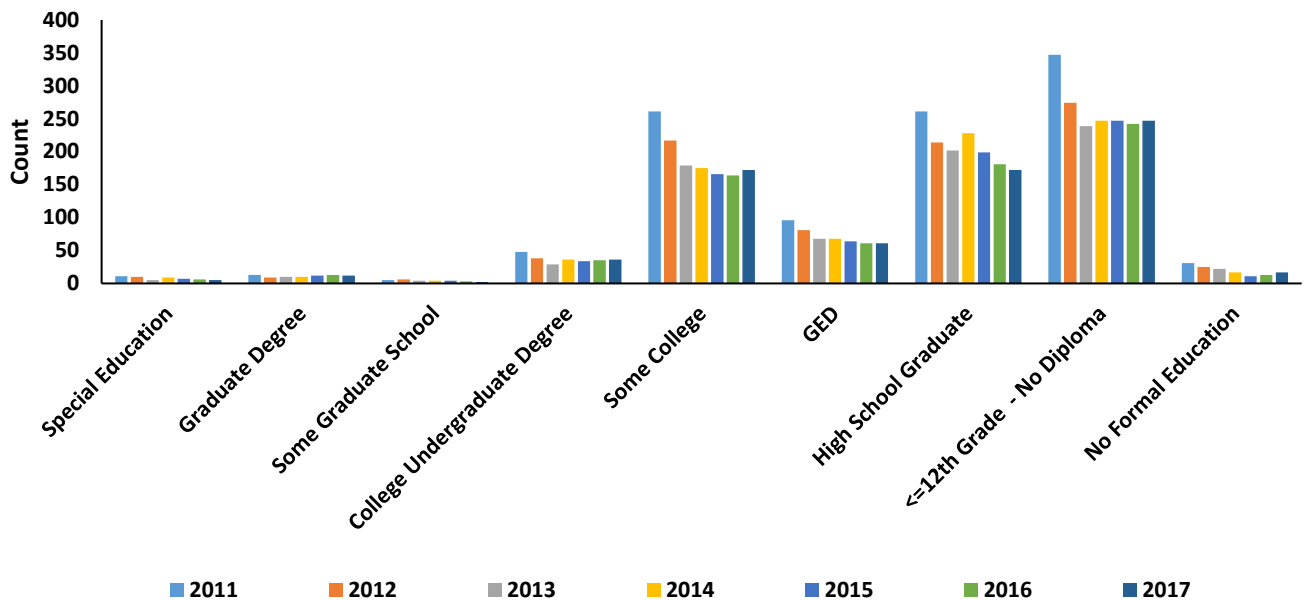
Figure 16. State Funded Mental Health Clinics Utilization* by Race/Ethnicity Crude Rates, Rural Region, 2011-2017.



Source: Avatar.
 Race "Unknown" not included in analysis.
 *A client is counted only once per year. Clients may be counted more than once across years.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The crude rate for patient utilization has remained steady across all races from 2011 to 2017. The White non-Hispanic population has had the highest rate over the seven-year period.

Figure 17. State Mental Health Clinics Utilization* by Education, Rural Region, 2010-2017.



Source: Avatar.

Education "Unknown" not included in analysis.

*A client is counted only once per year. Clients may be counted more than once across years.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Less than 12th grade education accounted for 34% of the patients, followed by high school graduates and some college at 24% respectively in 2017.

Figure 18. Top Mental Health Clinic Services by Number of Patients Served*, Rural Region, 2011-2017.

Program	Year						
	2011	2012	2013	2014	2015	2016	2017
Ely Outpatient Counseling	144	121	120	166	173	251	292
Elko Outpatient Screening	42	21	10	91	176	172	204
Elko Medication Clinic	84	109	110	102	134	165	158
Elko Outpatient Counseling	236	221	172	153	147	155	146
Winnemucca Outpatient Screening	18	2	16	39	38	57	135
Winnemucca Medication Clinic	118	89	52	57	71	92	117
Elko Service Coordination	67	30	45	67	84	109	107
Winnemucca Outpatient Counseling	200	169	87	90	77	80	107

Source: Avatar.

~Program no longer active.

*A client is counted only once per year. Clients may be counted more than once across years.

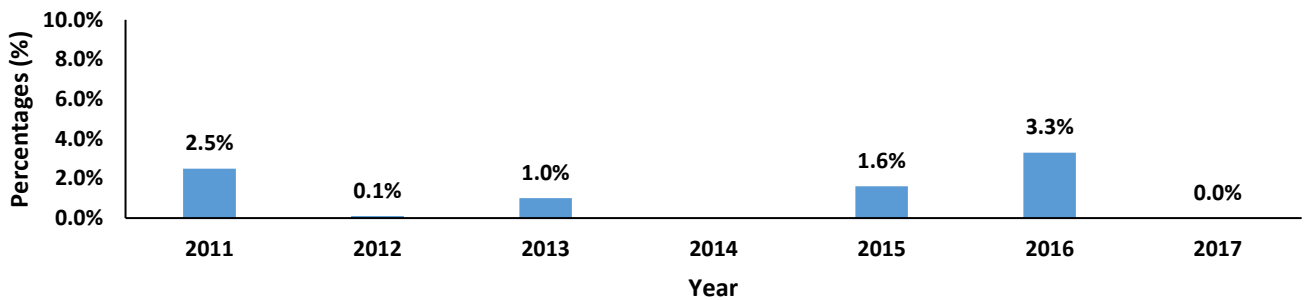
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Patients were counted only once per program per year. Since a patient can receive services in more than one program the counts above are not mutually exclusive.

Suicide

While suicide is not a mental illness, one of the most common causes of suicide is mental illness. Risk factors for suicide include depression, bipolar disorder and personality disorders. Of those who attempt or die from suicide many have a diagnosis mental illness.

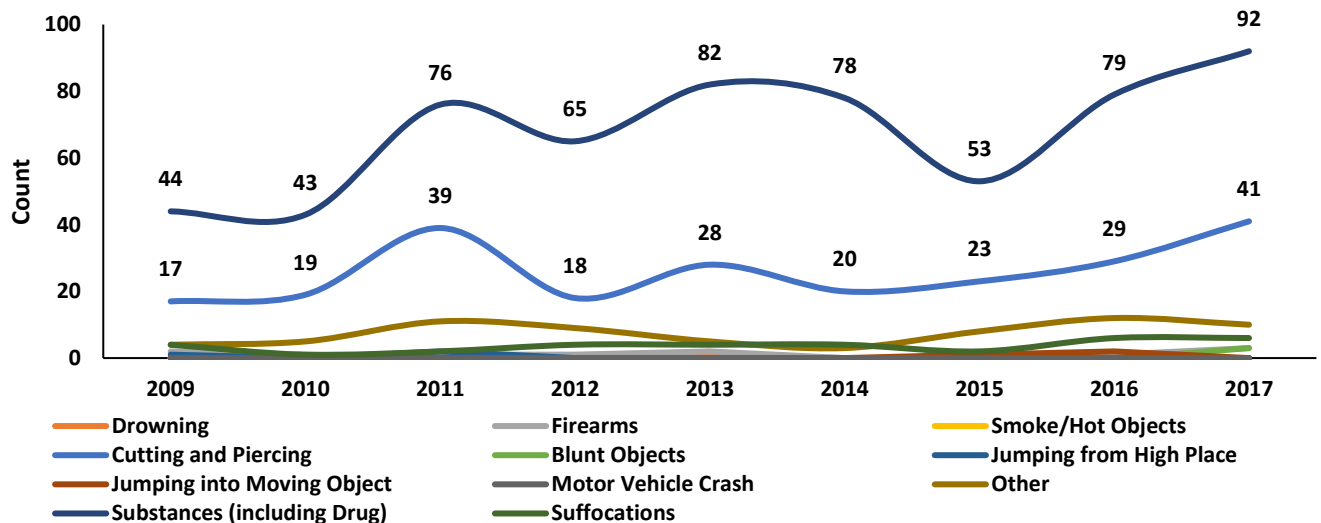
Figure 19. Percentage of Adult Rural Region Residents Who Have Seriously Considered Attempting Suicide, 2011 – 2016.



Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Charts scaled to 10% to display differences among groups.
 Indicator was not measured in 2014.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

When asked “have you seriously considered attempting suicide during the past 12 months,” 3.3% of Rural Region residents said yes in 2016. This indicator was not measured in 2014. Between 2011 and 2016, the highest prevalence for suicide occurred in 2016. No one in the rural region seriously considered suicide in 2017.

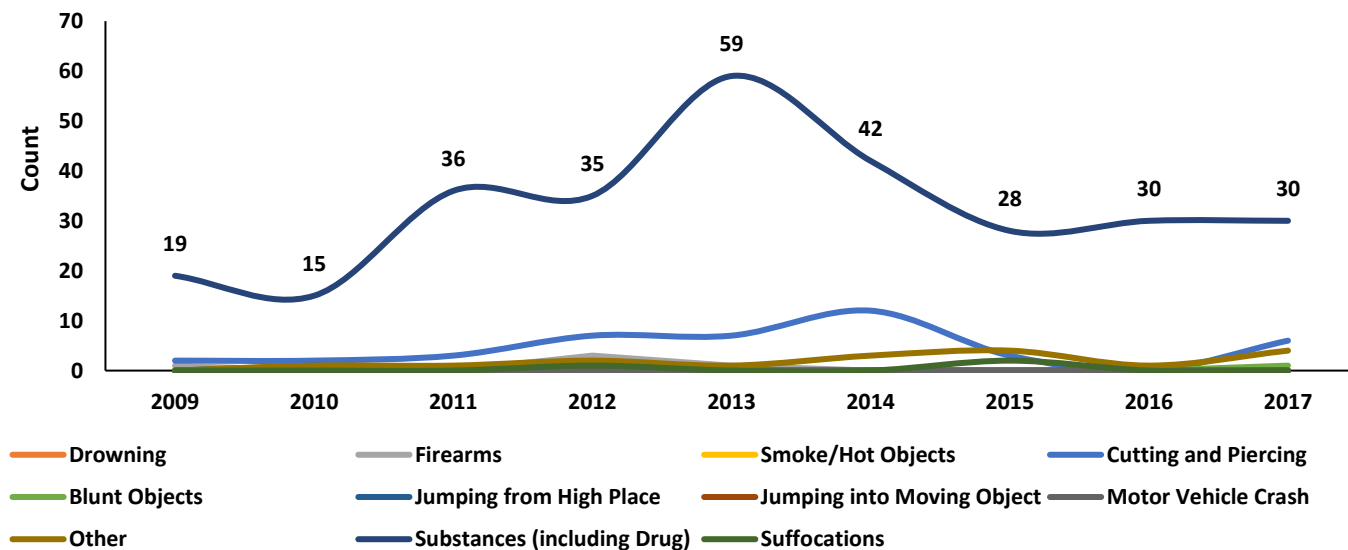
Figure 20. Suicide Attempt-Related Emergency Department Encounters by Method, Rural Region Residents, 2009-2017.



Source: Hospital Emergency Department Billing.
 ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.
 A person can be included in more than one category and therefore the counts above are not mutually exclusive.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Emergency department encounters for attempted suicides, where the patient did not expire at the hospital, have remain steady from 2009-2017. The most common method for attempted suicides is a substance or drug overdose attempt. During 2017, 155 emergency encounters were for suicide attempts, of those 92 (59%) were for substance/drug overdose.

Figure 21. Suicide Attempt-Related Inpatient Admissions by Method, Rural Region Residents, 2009-2017.



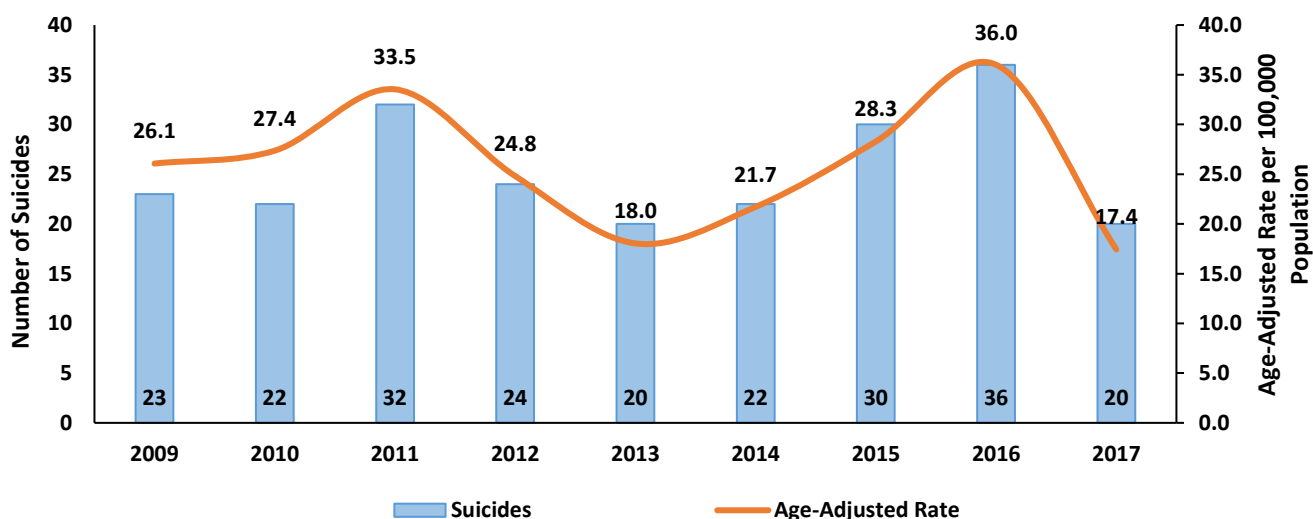
Source: Hospital Inpatient Billing.

ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In 2017, there were 41 inpatient admissions for attempted suicides where the patient was admitted and did not expire at the hospital. Of those, 30 (73%) were for substance and drugs overdoses.

Figure 22. Number of Suicides and Age-Adjusted Rates, Rural Region Residents, 2009-2017.



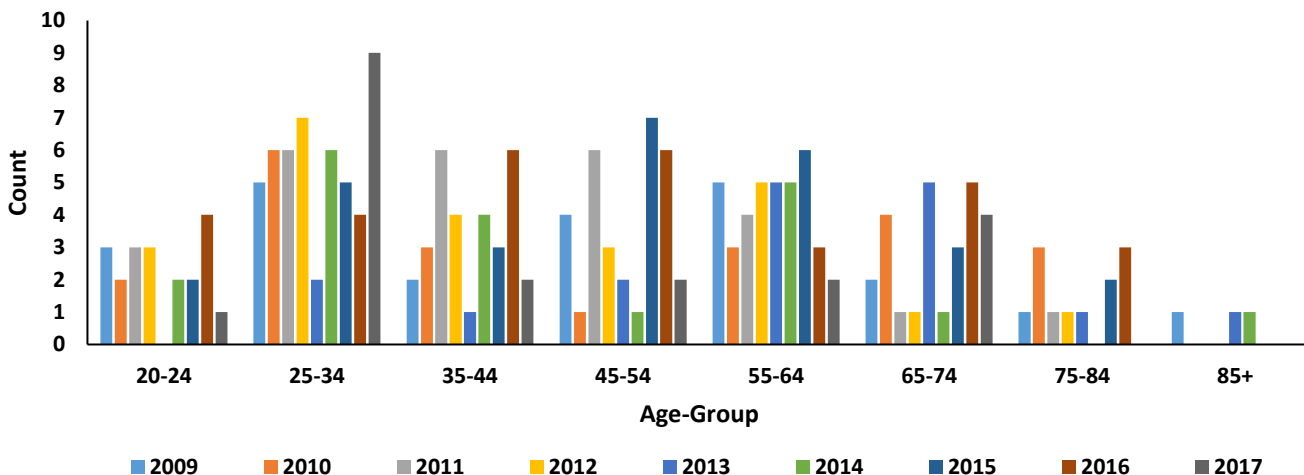
Source: Nevada Electronic Death Registry System.

Charts scaled to display differences among years.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The age-adjusted suicide rate for 2017 was 17.4 per 100,000 population. Between 2009 and 2017, the Rural Region had its highest age-adjusted suicide rate in 2016, which was 36.0 per 100,000 age-specific population and lowest rate in 2017, with 17.4 per 100,000 population. From 2009 to 2017 there have been 229 suicides in the Rural Region, on average 25 suicides occur each year.

Figure 23. Suicides by Age Group, Rural Region Residents, 2009-2017.



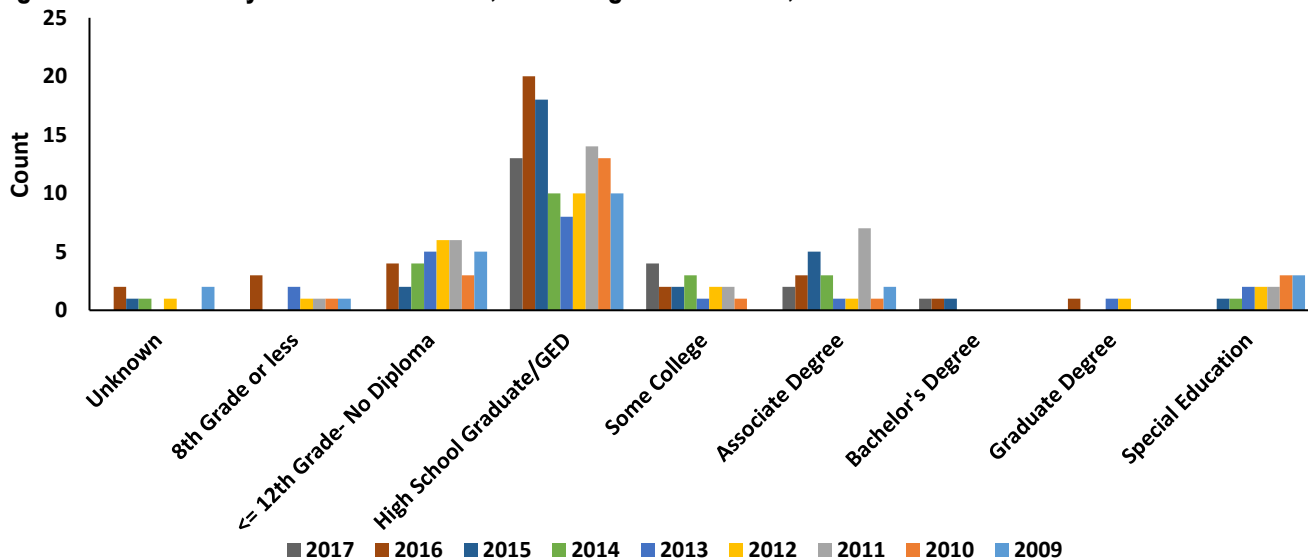
Source: Nevada Electronic Death Registry System.

Charts scaled to display differences among age groups.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Suicides in the Rural Region are most common for the 25-34 age group with 9 suicides in 2017. There were 17 suicides for the age 0-19 from 2009-2017.

Figure 24. Suicides by Level of Education, Rural Region Residents, 2009-2017.

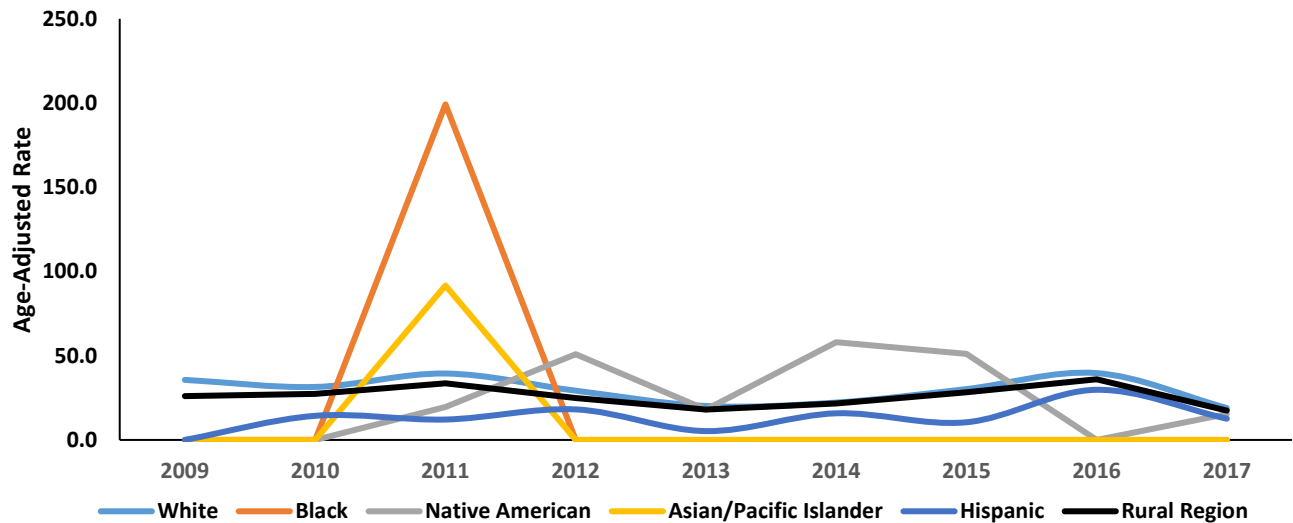


Source: Nevada Electronic Death Registry System.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Suicides were most common among high school graduates or GED, with 13 suicides in 2017.

Figure 25. Age-Adjusted Suicides Rates by Race/Ethnicity, Rural Region Residents, 2009-2017.



Source: Nevada Electronic Death Registry System.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

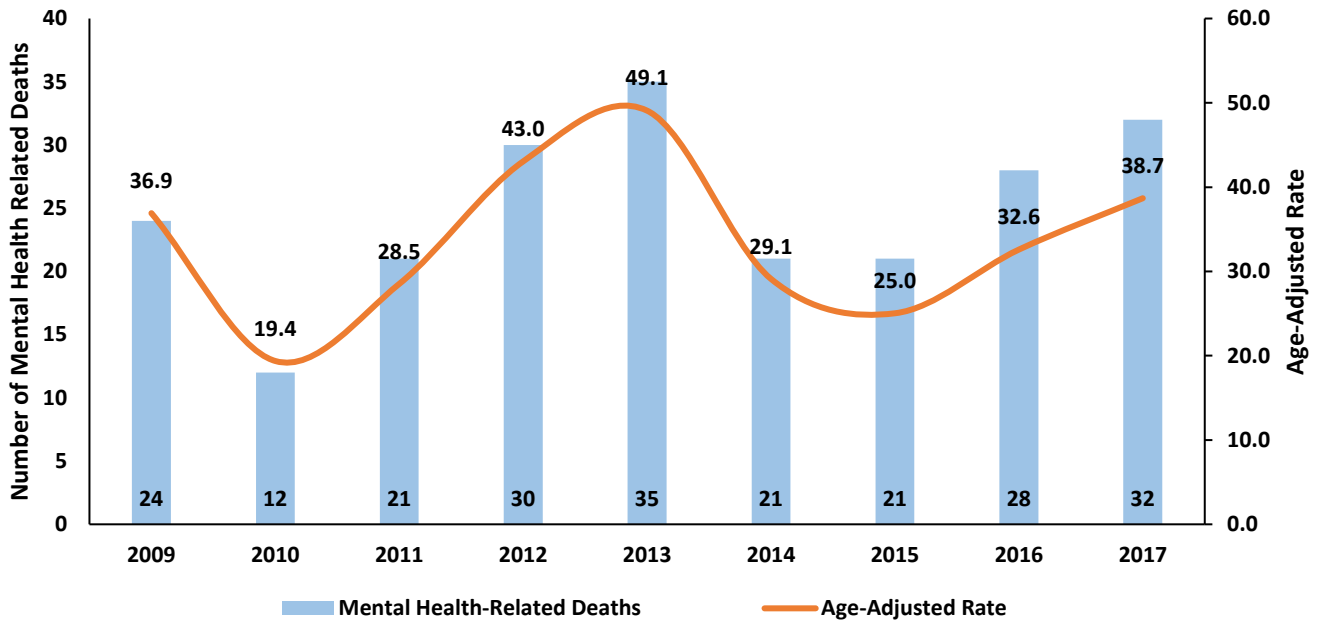
The age-adjusted suicide rates for White non-Hispanics were slightly higher than the total Rural Region for each year from 2009 to 2017, with 19.0 per 100,000 population in 2017. The age-adjusted suicide rate for American Indian/Alaskan Native was above the total region rate (2012, 2013, 2014 and 2015), but was not significantly higher based on 95% confidence intervals. Rates among Hispanics are lower than Rural Region overall years. The age-adjusted rate in 2011 for Black non-Hispanics was 199.2 per 100,000 age and race-specific population, this is due to a small Black non-Hispanic population in the rural areas (n=1).

Mental Health-Related Deaths

Mental health-related deaths are deaths with the following ICD-10 codes groups listed as a contributing cause of death (F00-F99 excluding F10-F19):

- Organic, including symptomatic, mental disorders
- Schizophrenia, schizotypal and delusional disorders
- Mood [affective] disorders;
- Neurotic, stress-related and somatoform disorders
- Behavioral syndromes associated with physiological disturbances and physical factors
- Disorders of adult personality and behavior
- Mental retardation; Disorders of psychological development
- Behavioral and emotional disorders with onset usually occurring in childhood and adolescence
- Unspecified mental disorder

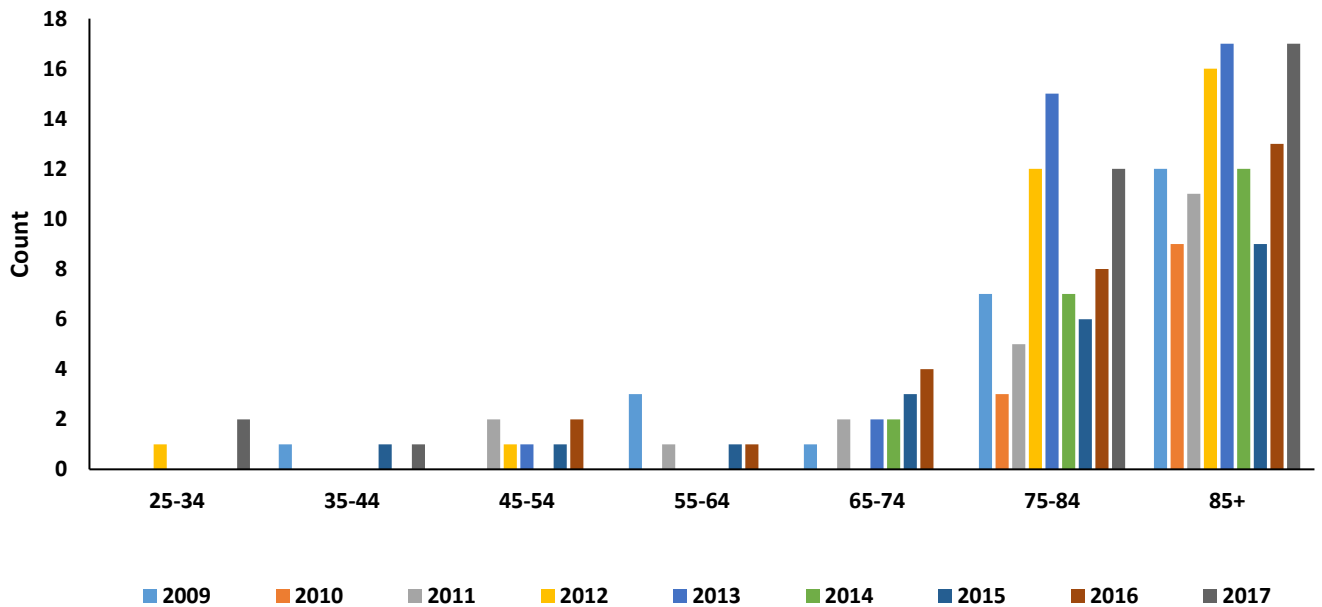
Figure 26. Mental Health-Related Deaths and Age-Adjusted Rates, Rural Region Residents, 2009-2017.



Source: Nevada Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

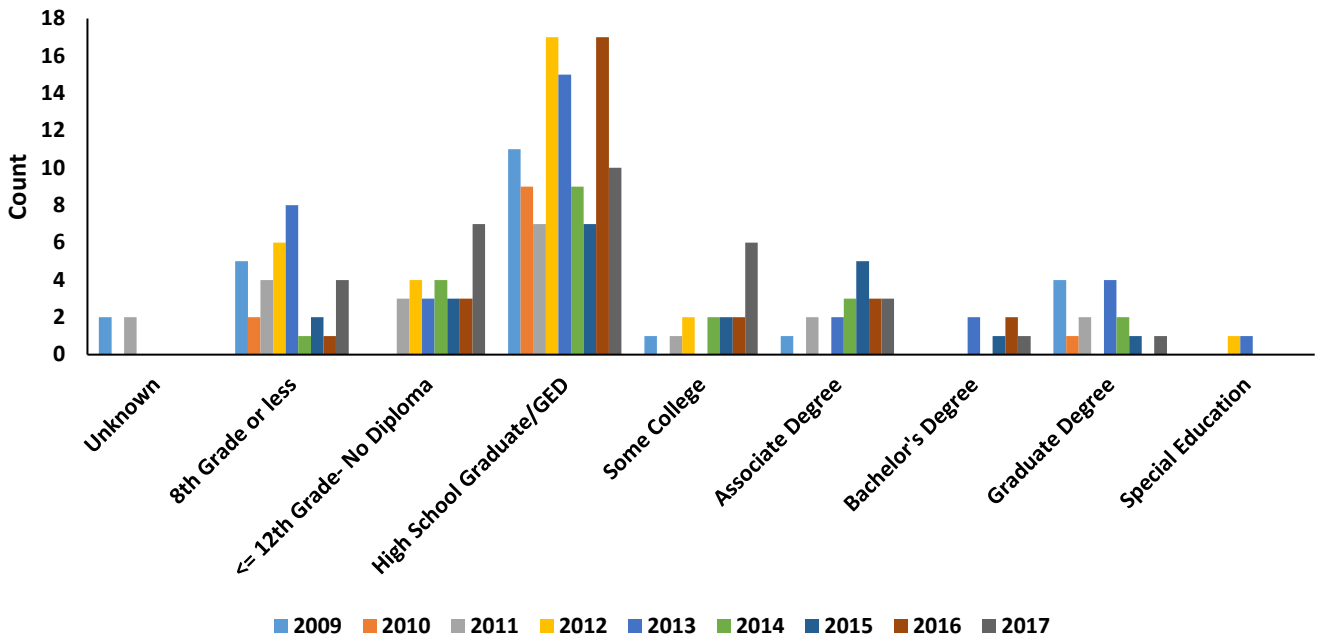
In 2010, the number of mental health-related deaths dropped to 12 (age-adjusted rate of 19.4 per 100,000 age-specific population), which was a significant decrease (95% confidence interval). In 2017, there were 32 mental health-related deaths (38.7 per 100,000 age-specific population).

Figure 27. Mental Health-Related Deaths by Age Group, Rural Region Residents, 2009-2017.



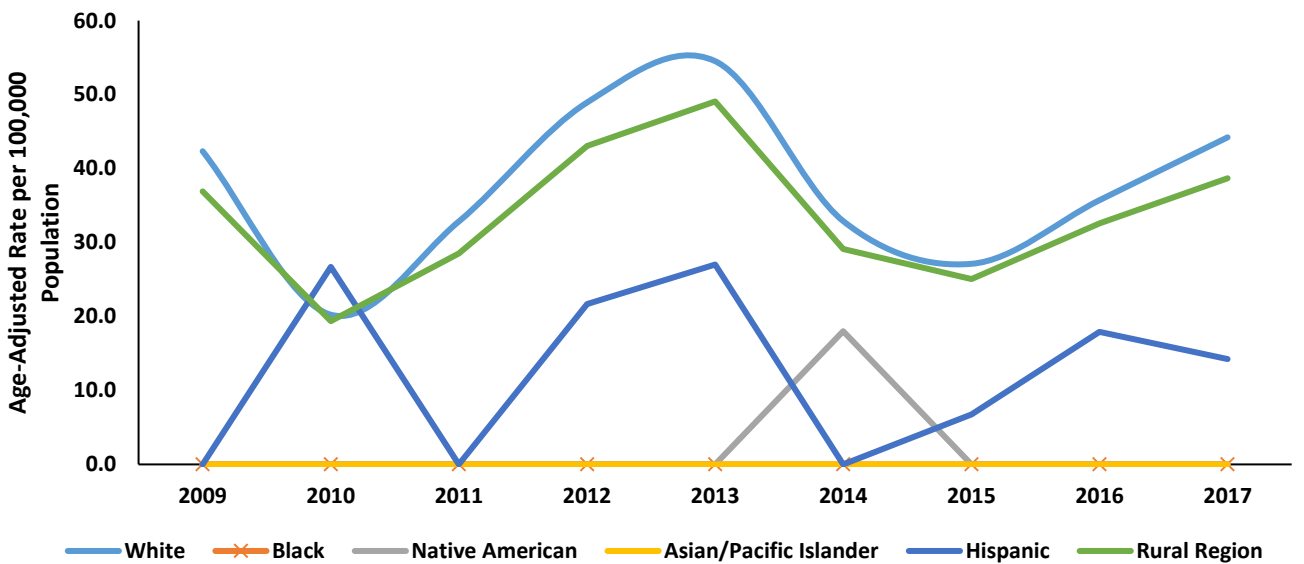
Source: Nevada Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 28. Mental Health-Related Deaths by Education, Rural Region Residents, 2009-2017.



Source: Nevada Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 29. Mental Health-Related Deaths by Race/Ethnicity, Rural Region Residents, 2009-2017.



Source: Nevada Electronic Death Registry System.
 Charts scaled to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The age-adjusted rates show white population are slightly higher than other groups.

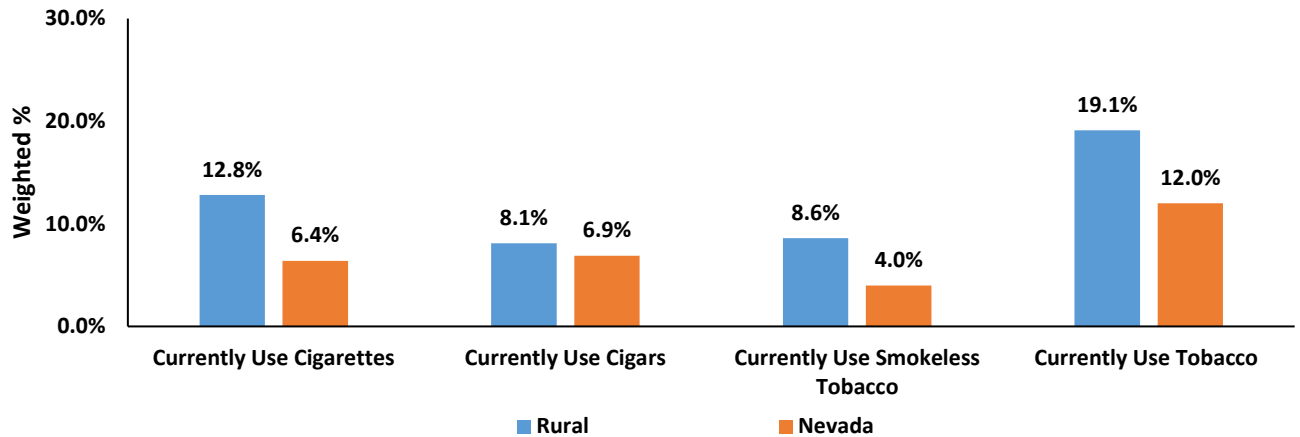
Substance Abuse

Substance use data are collected from hospital billing data, vital records data, and through national survey data including BRFSS and YRBS.

Youth Risk Behavior Surveillance System (YRBSS)

The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years.

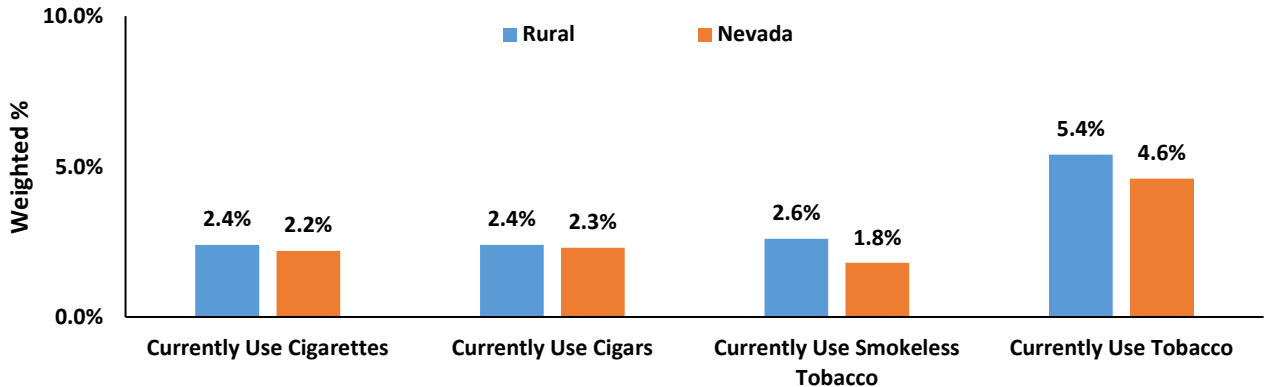
Figure 30. Current Tobacco Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 30% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the Rural Region high school students, 12.8% reported using cigarettes in the past 30 days and 19.1% currently use tobacco, this is higher than the Nevada at 12% in 2017.

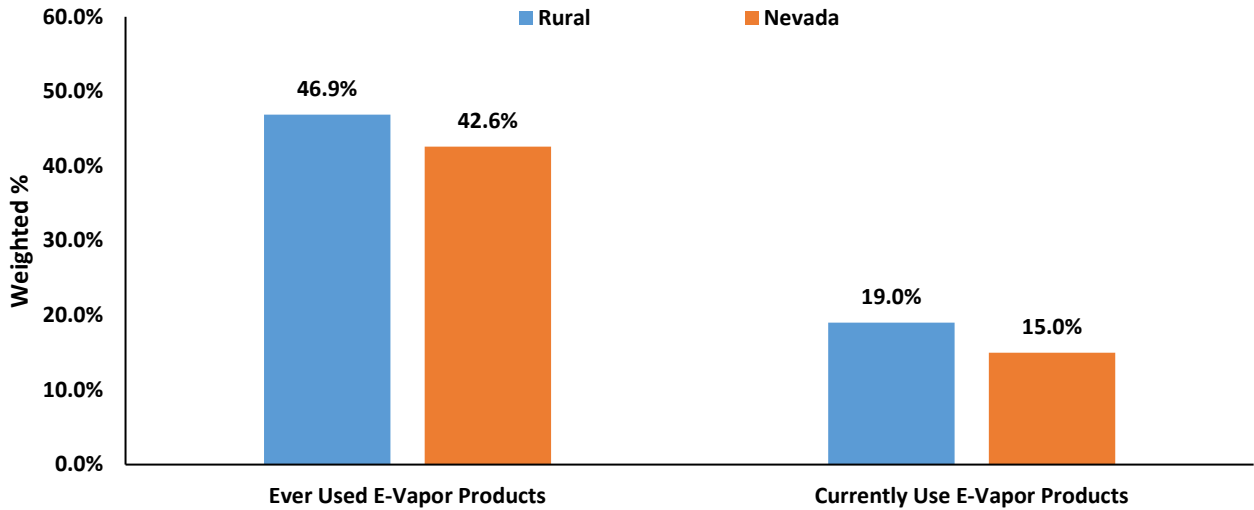
Figure 31. Current Tobacco Use Summary, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 10% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the Rural Region middle school students, 5.4% reported use of tobacco in the past 30 days; 2.4% reported using cigarettes in the past 30 days and used cigars in the past 30 days which is similar to Nevada.

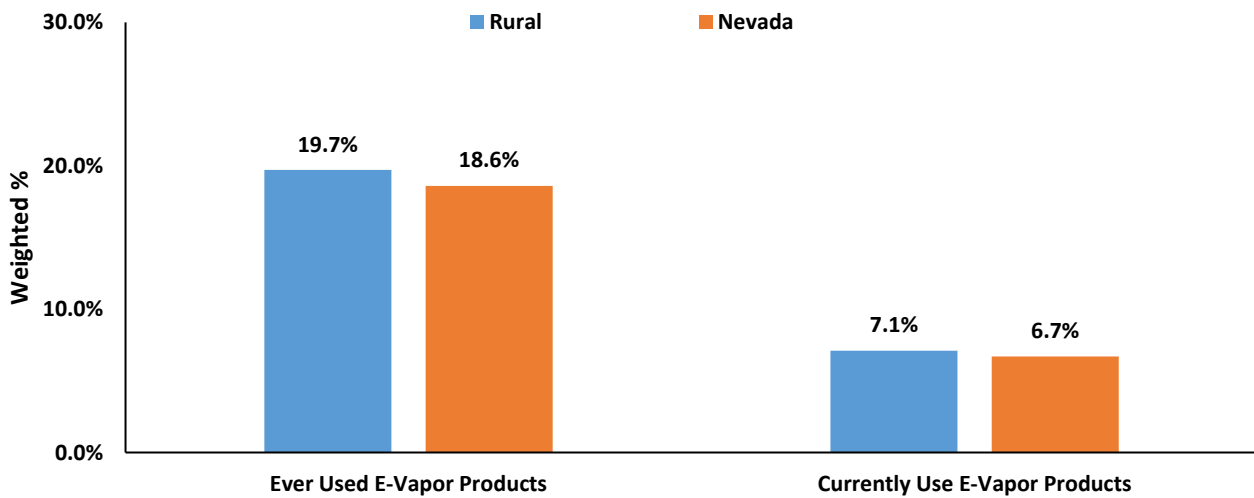
Figure 32. Electronic Vapor Product Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 60% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, about 47% high school students have used electronic vapor (E-vapor) products and 19% are currently using E-vapor products, which is higher than the Nevada (15%) for high school students.

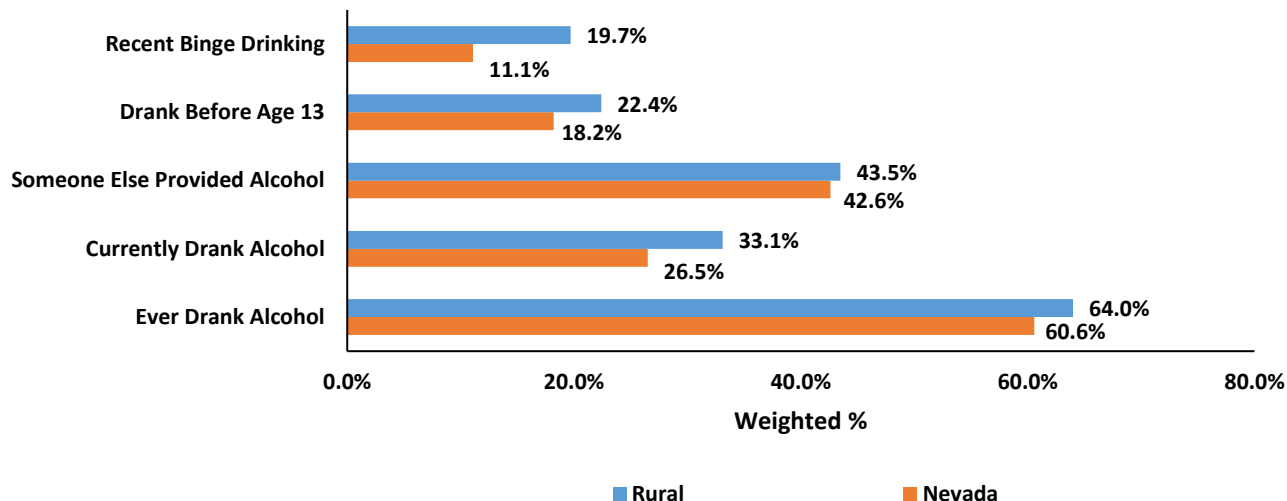
Figure 33. Electronic Vapor Product Use Summary, Rural Region Middle School Students, 2017



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 30% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, 19.7% of middle school students have used E-vapor products and 7.1% are currently using E-vapor products which is slightly higher than Nevada.

Figure 34. Alcohol Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).

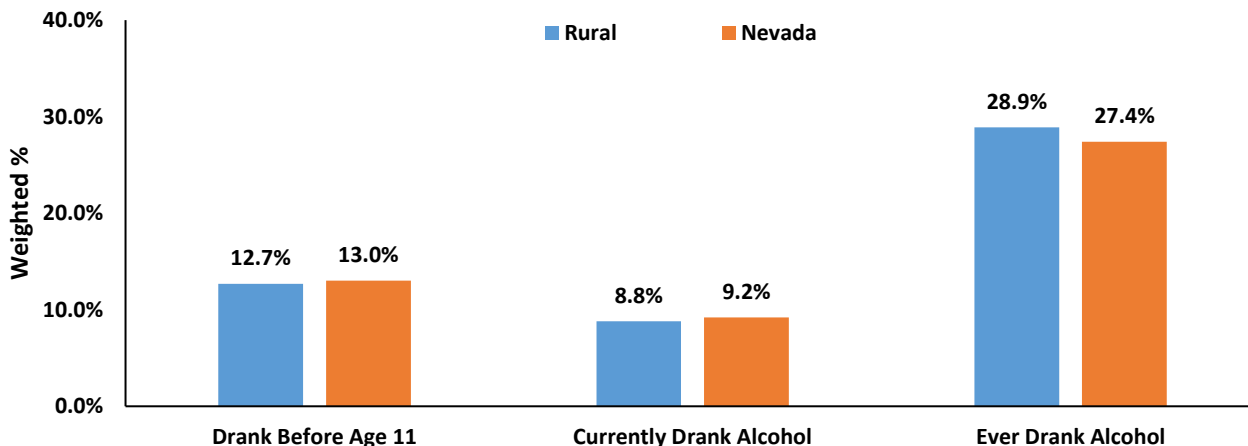
Binge Drinking: Had five or more drinks of alcohol in a row for males, four or more for females within a couple of hours.

Chart scaled to 80% to display differences among groups.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

At least 6 out of 10 high school students have ever had a drink of alcohol (64%). Approximately 33.1% currently drink alcohol and 43.5% have had alcohol provided to them by someone else. Of Rural Region high school students, 22.4% had alcohol before the age of 13 years and 19.7% had a recent binge drinking experience.

Figure 35. Alcohol Use Summary, Rural Region Middle School Students, 2017.



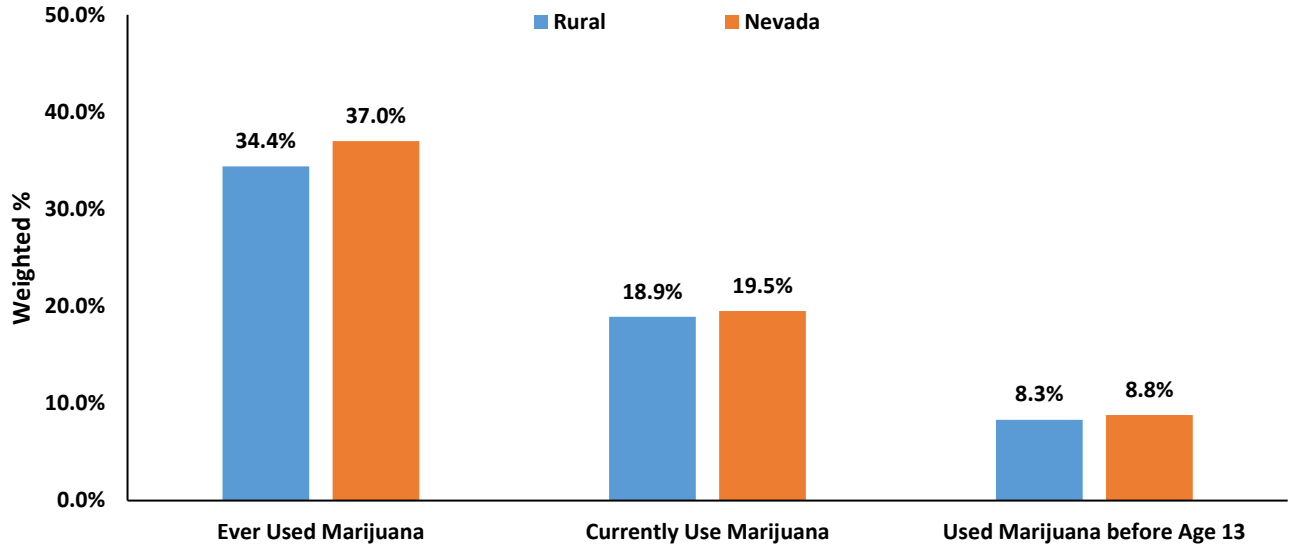
Source: Nevada Youth Risk Behavior Survey (YRBS).

Chart scaled to 40% to display differences among groups.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

At least one out of ten middle school students drank alcohol before age 11 in the Rural Region of Nevada. Also, 8.8% currently drink alcohol and three out of ten had drank alcohol before (28.9%) which is slightly higher than Nevada.

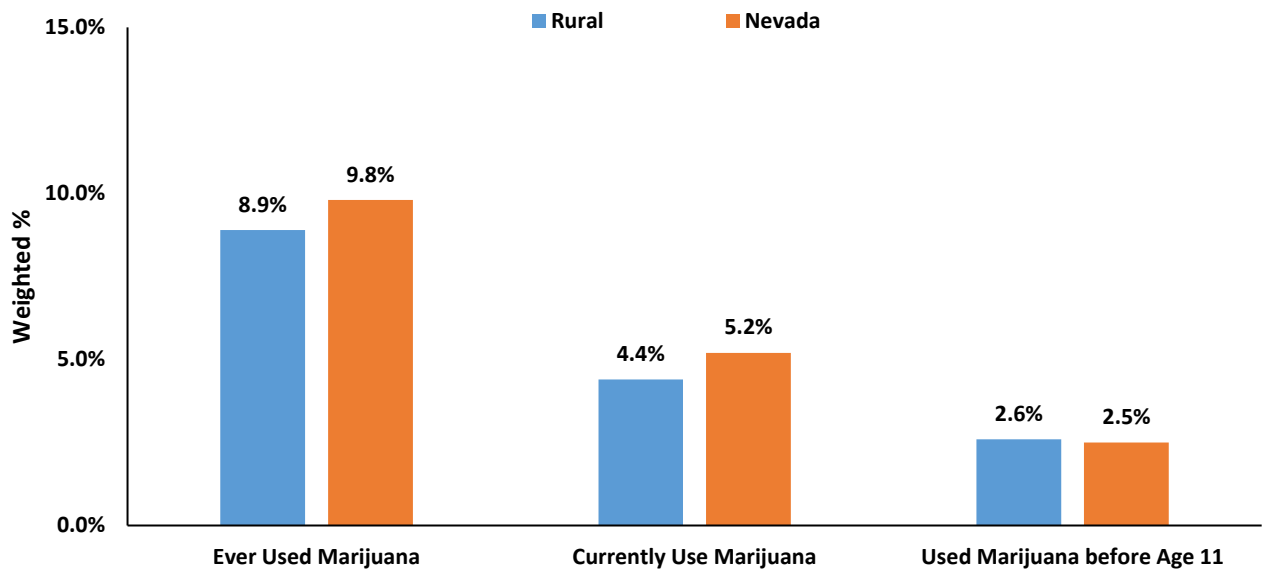
Figure 36. Marijuana Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, 34.4% of high school students reported trying marijuana, and 18.9% currently use marijuana. Nevada is like the nation for marijuana use.

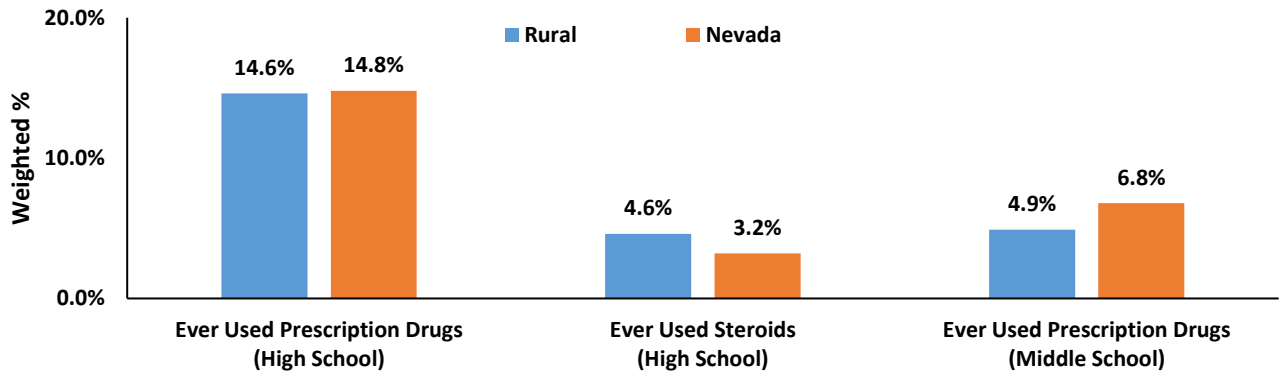
Figure 37. Marijuana Use Summary, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 15% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

About 3% of the Rural Region middle school students, had tried marijuana before they turned 11 years old, 8.9% have ever tried marijuana before, and 4.4% currently use marijuana.

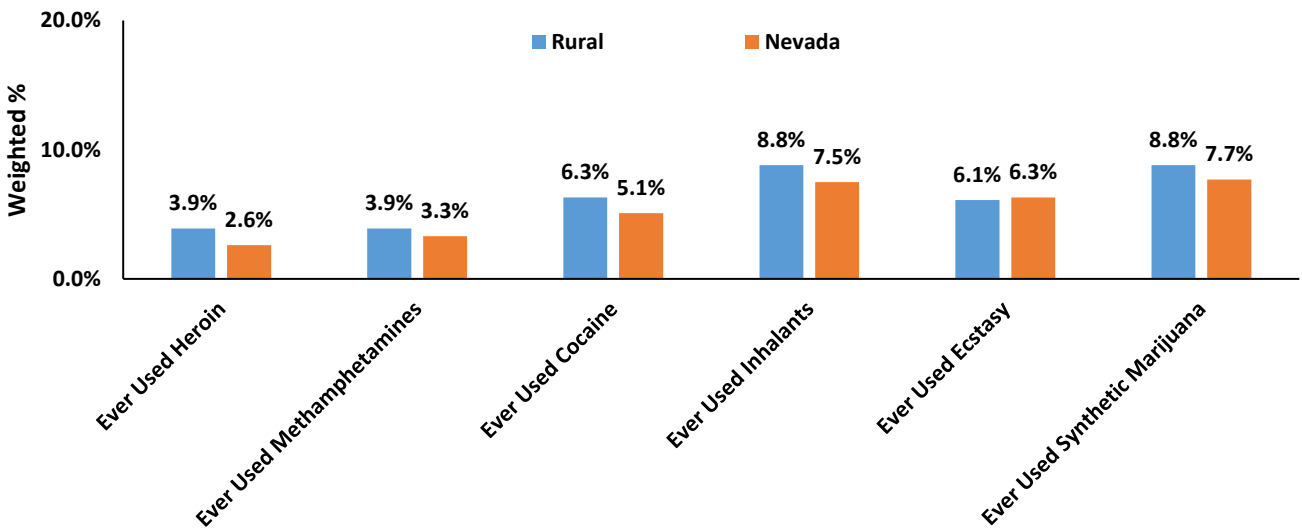
Figure 38. Nonprescription Substance Use Summary, Rural Region Middle and High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 20% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Approximately 15% of the Rural Region high school students, have used prescription drugs that were not prescribed to them in their lifetime, while about 5% of middle school students have ever taken a prescription drugs that were not prescribed to them. Of the Rural Region’s high school students, 4.6% have tried non-prescribed steroids.

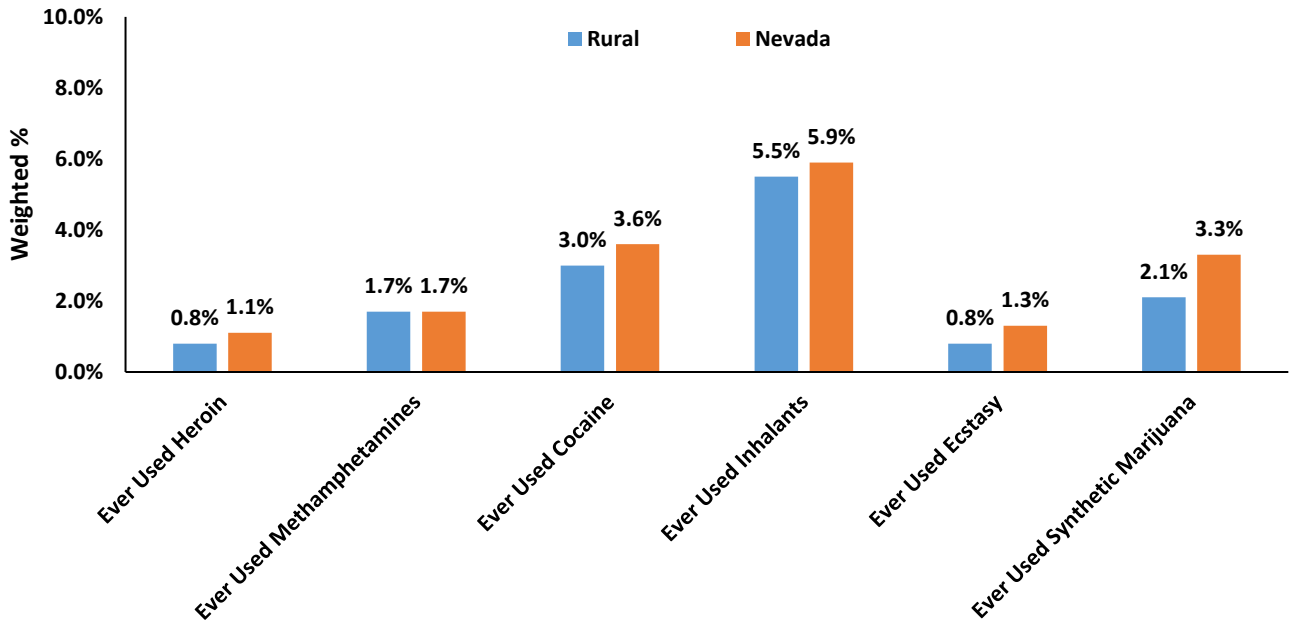
Figure 39. Lifetime Drug Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 20% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Drug use among high school students is slightly higher in the Rural Region than in Nevada. Of the Rural Region high school students 8.8% have use inhalants and ever using synthetic marijuana, while 6.3% have reported the use of cocaine.

Figure 40. Lifetime Drug Use Summary, Rural Region Middle School Students, 2017.



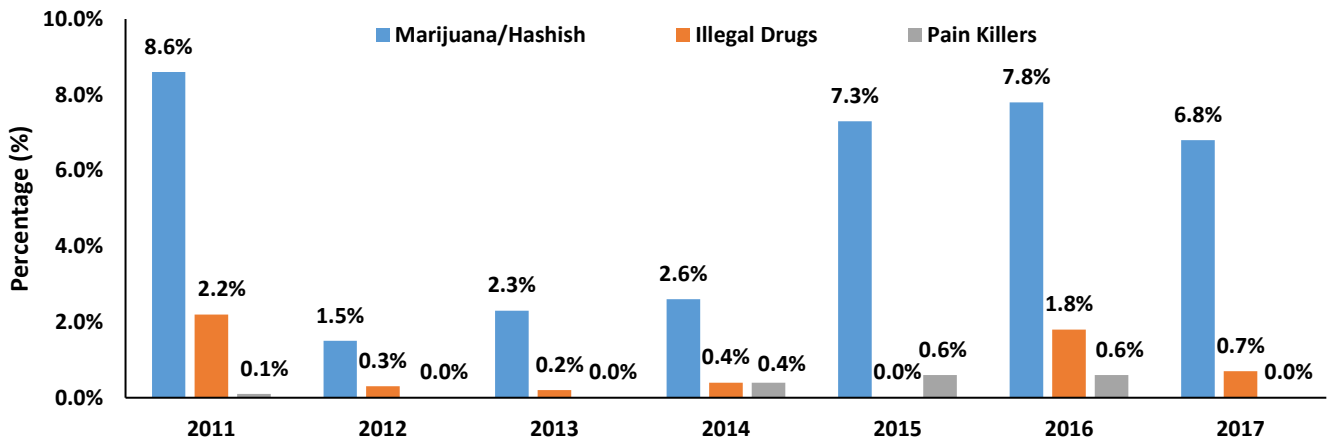
Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 10% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Middle school students in the rural region have the same percent of ever using methamphetamines 1.7%.

Behavioral Risk Factor Surveillance System

The Behavioral Risk Factors Surveillance System (BRFSS) is a state based system that collects information through telephone and mobile phone surveys on adult health risk behaviors.

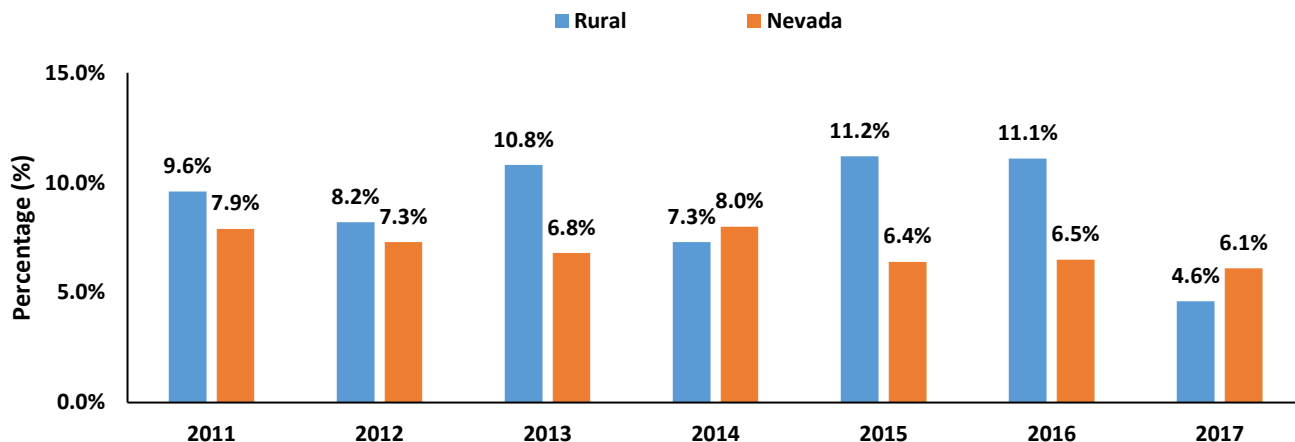
Figure 41. Adult Rural Region Residents Who Used Illegal Substances or Marijuana/Hashish or Pain Killers to Get High in the Last 30 days, 2011-2017.



Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Chart scaled to 10% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Between 2011 and 2016, on average, 5% of Rural Region Nevada adults used marijuana or hashish in the last 30 days. Marijuana use has increased consistently since 2014 and is expected to increase as marijuana was legalized in Nevada in 2017.

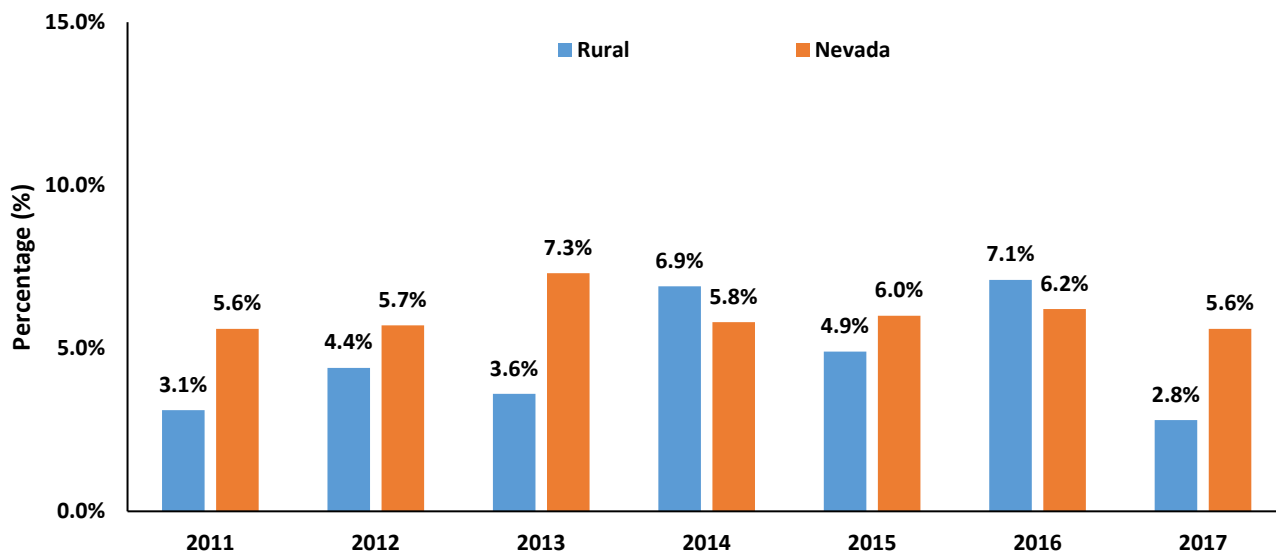
Figure 42. Percentage of Adult Men Who are Considered Heavy Drinkers, 2011-2017.



Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Chart scaled to 15% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Men who considered themselves heavy drinkers continue to decrease in the Rural Region and is lower than Nevada. For men, heavy drinking consists of consuming more than two alcoholic beverages a day.

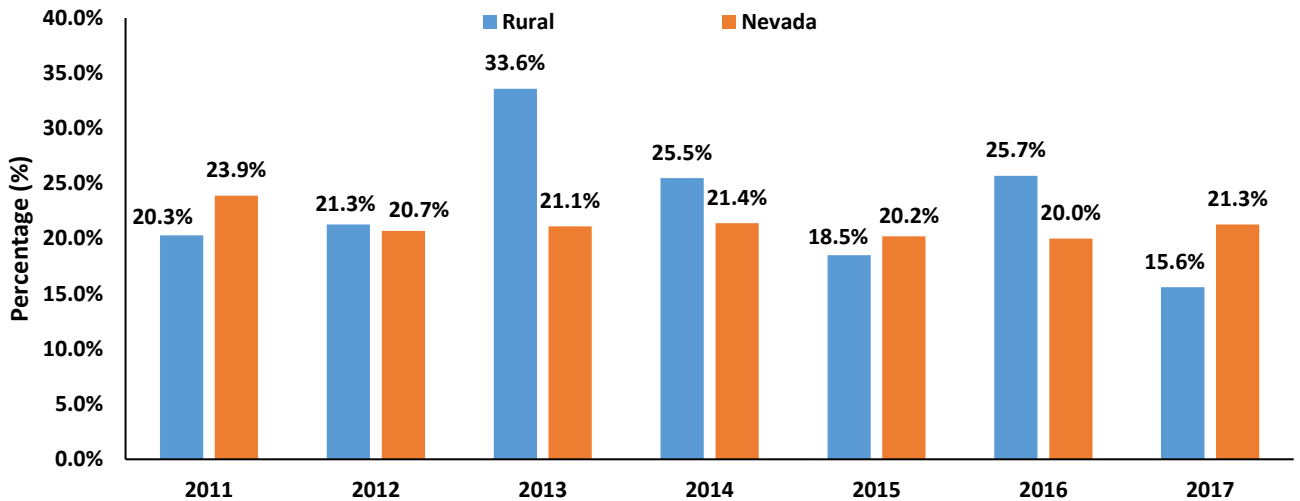
Figure 43. Percentage of Adult Women Who are Considered Heavy Drinkers, 2011-2017.



Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Chart scaled to 15% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Women who considered themselves heavy drinkers has relatively remain steady from 2011 to 2017, at 2.8% in 2017 which is less than Nevada at 5.6%. For women, heavy drinking consists of consuming more than one alcoholic beverage a day.

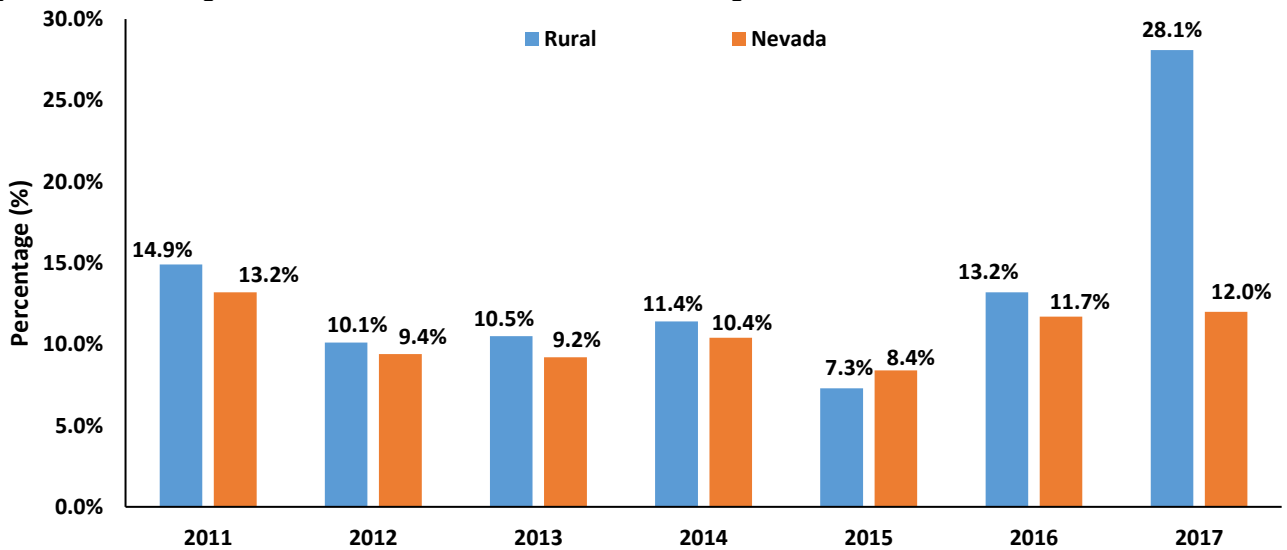
Figure 44. Percentage of Adult Men Who are Considered Binge Drinkers, 2011-2017.



Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Chart scaled to 40% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Binge drinking is defined in men as having five or more alcoholic beverages on an occasion. Binge drinking percentages continue to fluctuate between 15.6% (2017) and 33.6% (2013). Men in the Rural Region reported the lowest binge drinking percentage in 2017 which was 15.6%.

Figure 45. Percentage of Adult Women Who are Considered Binge Drinkers, 2011-2017.



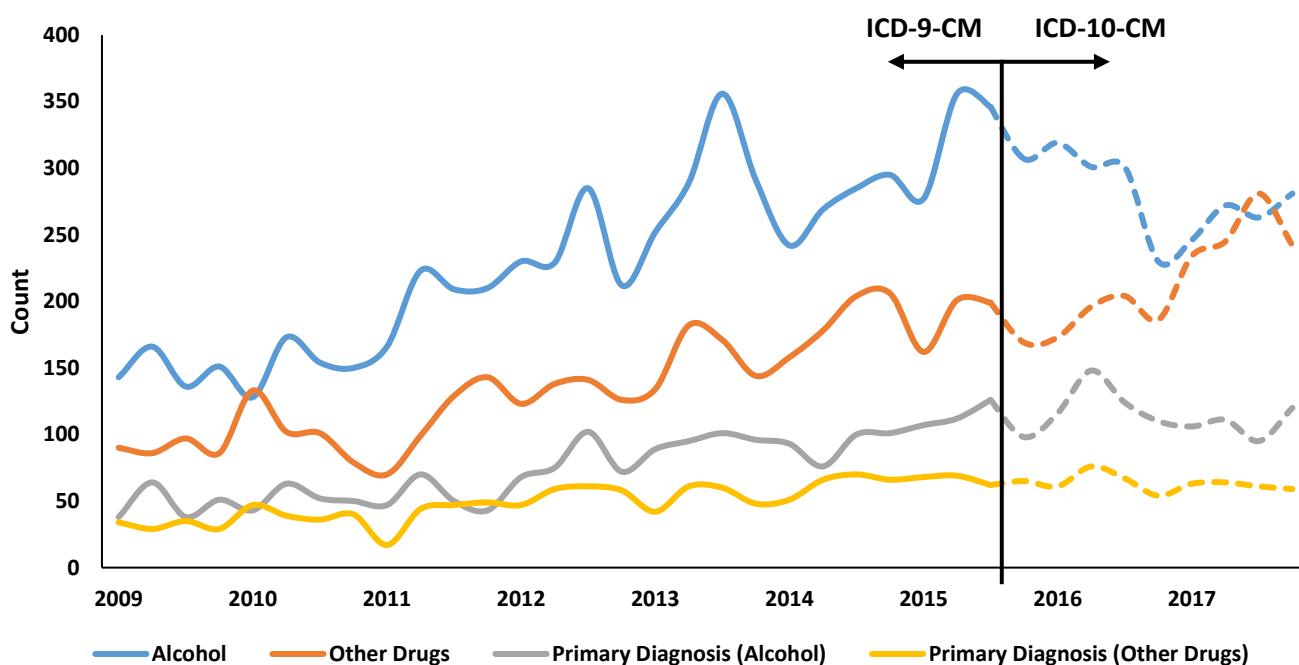
Source: Behavioral Risk Factor Surveillance System (BRFSS).
 Chart scaled to 30% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Binge drinking is defined in women as having four or more alcoholic beverages on an occasion. Women in the Rural Region reported the highest binge drinking percentage in 2017, which was 28.1%. The lowest reported binge drinking was in 2015 at 7.3%.

Hospital Emergency Department Encounters

The hospital emergency department billing data provides health billing data for emergency departments patients for Nevada’s non-federal hospitals. Since an individual can have more than one diagnosis during a single emergency department visit, the following numbers are not mutually exclusive.

Figure 46. Alcohol and Drug-Related Emergency Department Encounters by Quarter and Year, Rural Region Residents, 2009-2017.



Source: Hospital Emergency Department Billing.

Categories are not mutually exclusive.

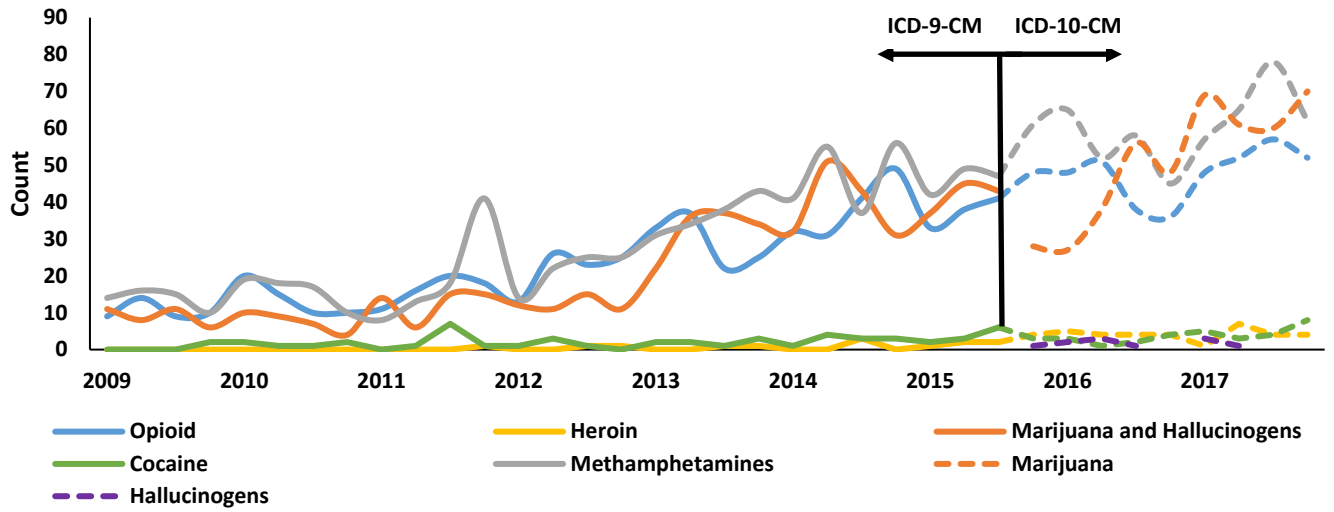
ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The “primary diagnosis” is the condition established to be chiefly responsible for the emergency department visit. The “alcohol” and “drug” categories are for any visits where alcohol/drugs were listed in any of the diagnoses.

Alcohol visits were more common than drug visits to the emergency department. In 2017, there was a total of 2,064 alcohol and drug-related emergency department encounters. Out of this number, 432 were related to alcohol (primary diagnosis) and 247 were drug-related (primary diagnosis).

Figure 47. Drug-Related Emergency Department Encounters by Drug Type and Quarter and Year, Rural Region Residents, 2009-2017.



Source: Hospital Emergency Department Billing.
 Categories are not mutually exclusive.

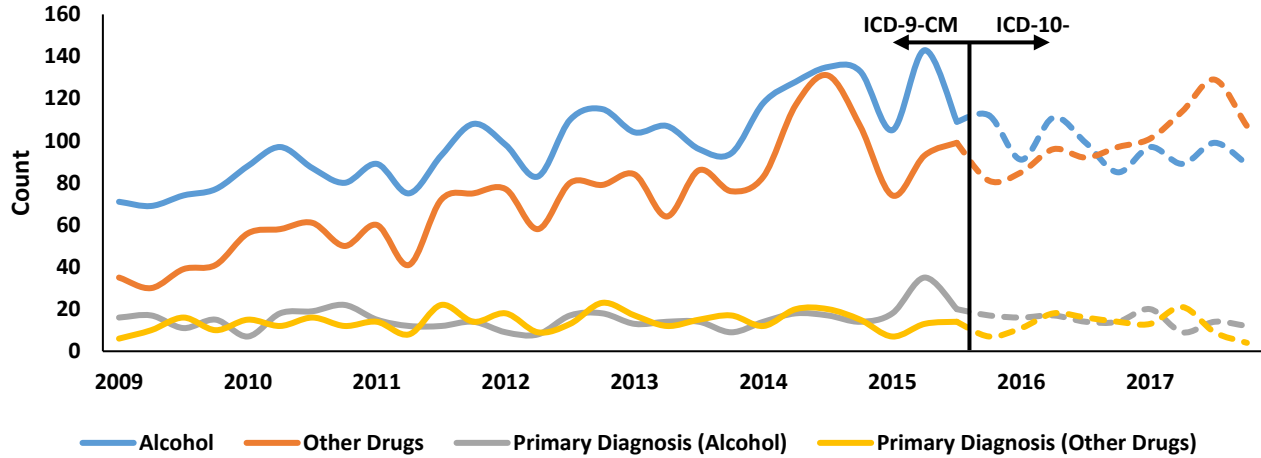
ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Hallucinogens and marijuana were grouped together for ICD-9-CM, but in 2015, the ICD-10-CM were separated into their own group. This includes all diagnoses and much of marijuana visits are for marijuana/cannabis-related disorders and not for overdose or poisonings.

Hospital Inpatient Admissions

The inpatient billing data provided health billing data for patients admitted to hospital for longer than a 24-hour period. In 2017, more people were admitted into Nevada hospitals for drug-related issues than alcohol-related issues. Out of the 825 alcohol and drug-related admissions, 374 were alcohol-related and 451 were drug-related.

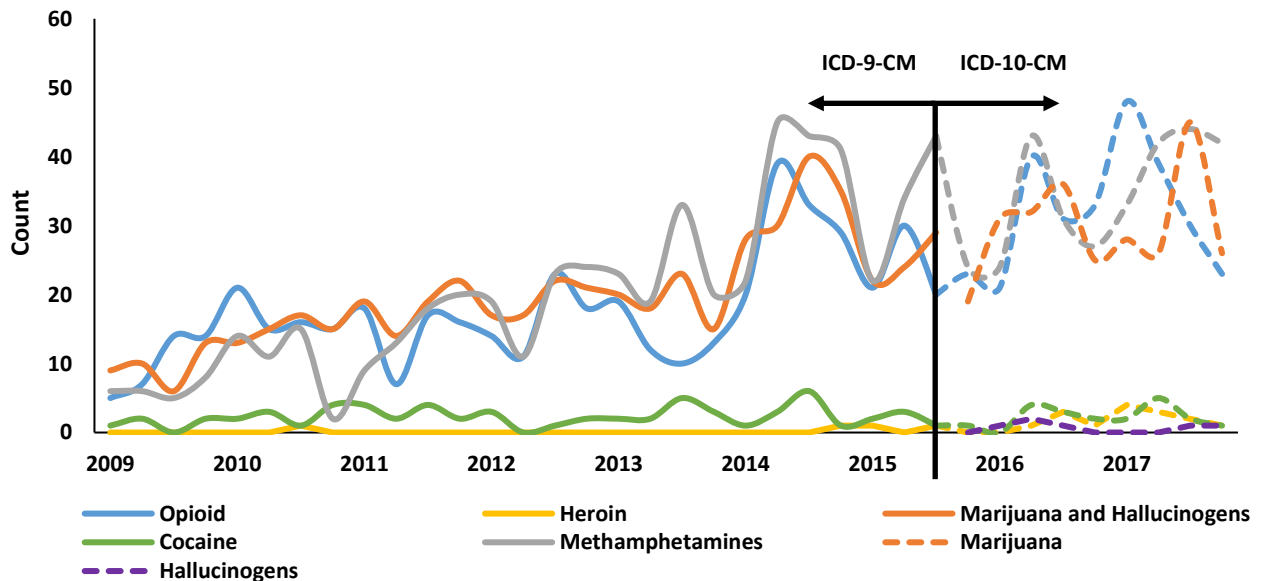
Figure 48. Alcohol and Drug-Related Inpatient Admissions by Quarter and Year, Rural Region Residents, 2009-2017.



Source: Hospital Inpatient Billing.
 Categories are not mutually exclusive.
 ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Alcohol-related admissions were more common than drug visits until 2016 where drug-related admissions surpassed alcohol for the Rural Region. In 2017, there was a total of 1,777 alcohol and/or drug-related inpatient admissions. Out of this number, 55 admissions were related to alcohol (primary diagnosis) and 47 were drug-related (primary diagnosis).

Figure 49. Drug-Related Inpatient Admissions by Quarter and Year, Rural Region Residents, 2009-2017.



Source: Hospital Inpatient Billing.
 Categories are not mutually exclusive.
 ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

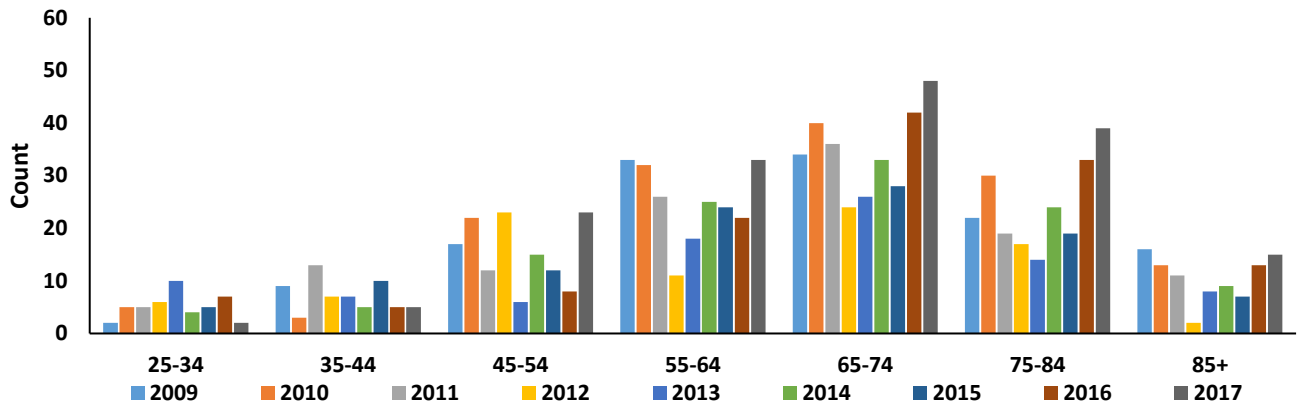
Inpatient admissions for drug use have risen significantly since 2009. In 2017, there were 125 inpatient admission where marijuana/cannabis-related disorders were listed on the diagnosis, which includes all

diagnoses and much of marijuana visits are for marijuana/cannabis-related disorders and not for overdose or poisonings.

Alcohol and/or Substance-Related Deaths

Alcohol and/or drug-related deaths include deaths where alcohol/drugs are listed as either the cause of death or as a contributing cause of death; therefore, the main cause of death may not be due to alcohol or drugs but contributing to the cause of death. In 2017, 4,909 deaths were related to alcohol and drugs of which 168 (3%) were to Rural Region residents.

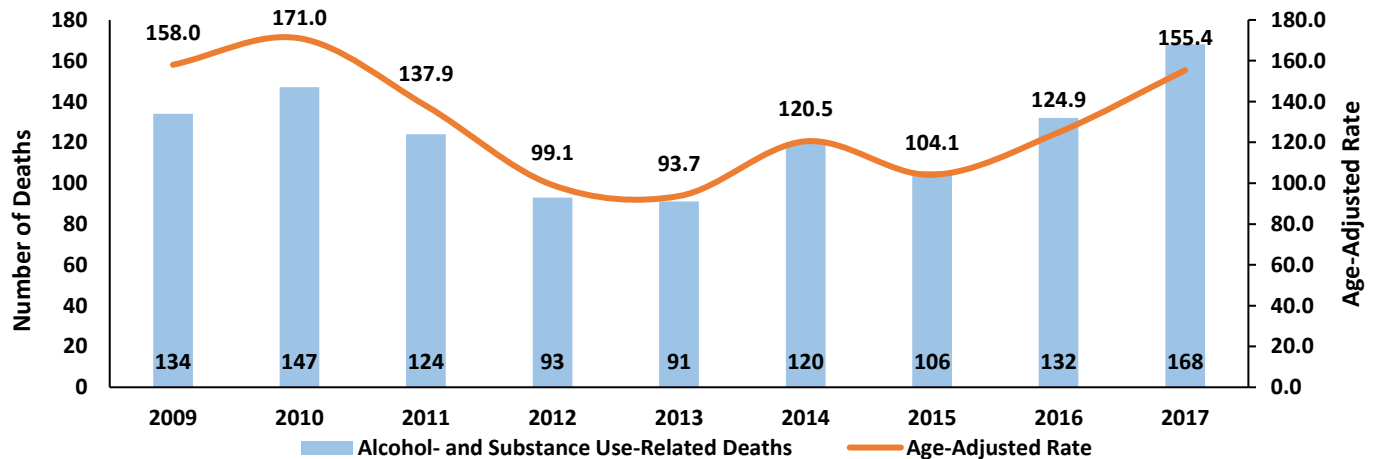
Figure 50. Alcohol and/or Drug-Related Deaths by Age Group, Rural Region Residents, 2009-2017.



Source: Electronic Death Registry System.
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In 2016, the 65-74 age group had a significant increase in alcohol and drug-related deaths. In 2017, years 65-74 age group had the most alcohol and drug-related deaths with 48 deaths reported. This was followed by 75-84 age group with 39 drug and alcohol-related deaths.

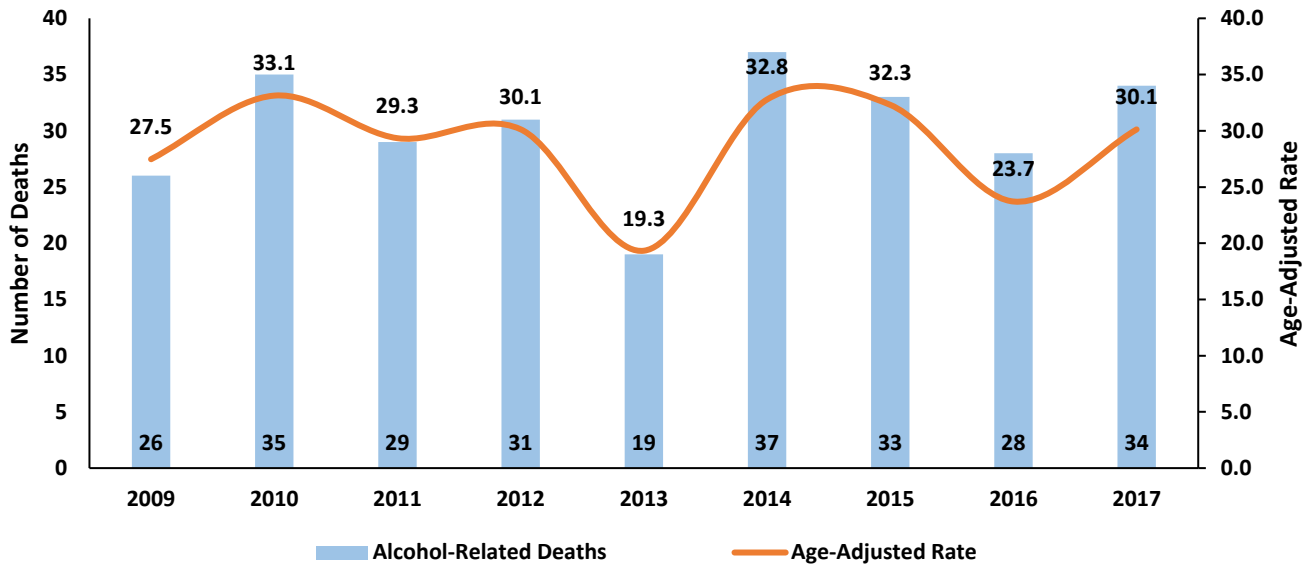
Figure 51. Alcohol and Drug-Related Deaths and Age-Adjusted Rates, Rural Region Residents, 2009-2017.



Source: Electronic Death Registry System.
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

The age-adjusted rate increased significantly in 2010 and has remain relatively high since for alcohol and/or drug-related deaths. In 2017, 168 deaths in the Rural Region were due to alcohol and/or drug use.

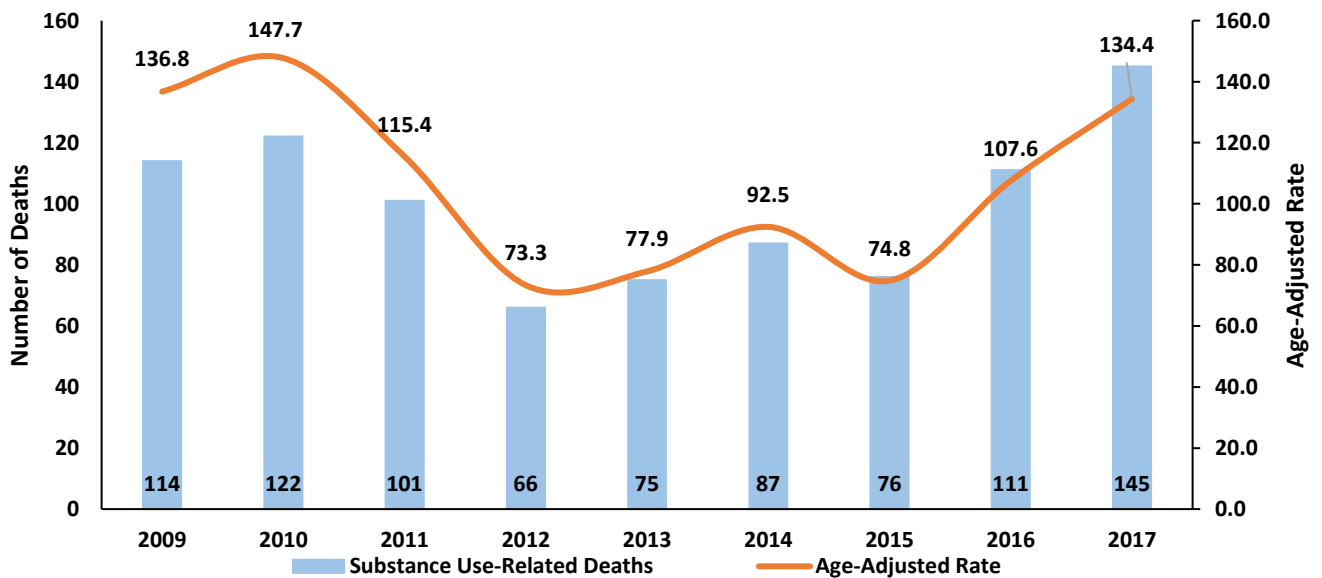
Figure 52. Alcohol-Related Deaths and Age-Adjusted Rates, Rural Region Residents, 2009-2017.



Source: Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Alcohol-related deaths have not increased significantly between 2009 to 2017. The alcohol-related deaths make up 20% of the alcohol and/or drug-related deaths. In 2017, there were 34 alcohol-related deaths (30.1 age-adjusted rate per 100,000 age-specific population).

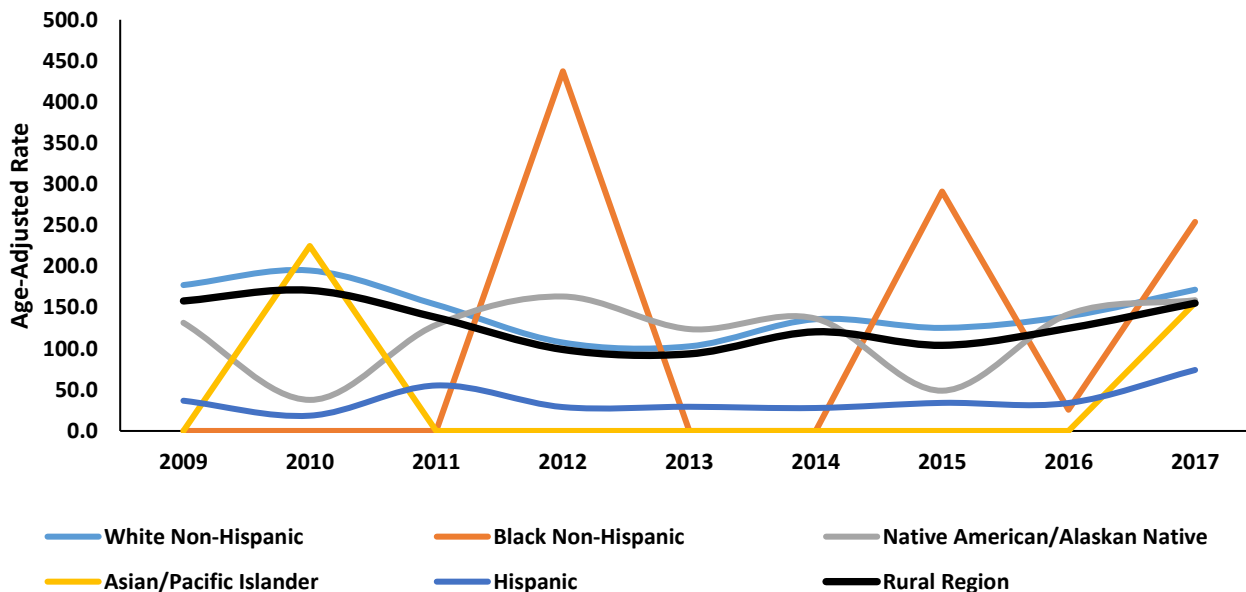
Figure 53. Drug-Related Deaths and Age-Adjusted Rates, Rural Region Residents, 2009-2017.



Source: Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Drug-related deaths have increased significantly since 2015 (95% confidence interval). The increase in 2017, 134.4 age-adjusted rate per 100,000 age-specific population, is significantly higher than 2015 and 2016.

Figure 54. Alcohol and/or Drug-Related Deaths by Race, Rural Region Residents, 2009-2017.



Source: Electronic Death Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

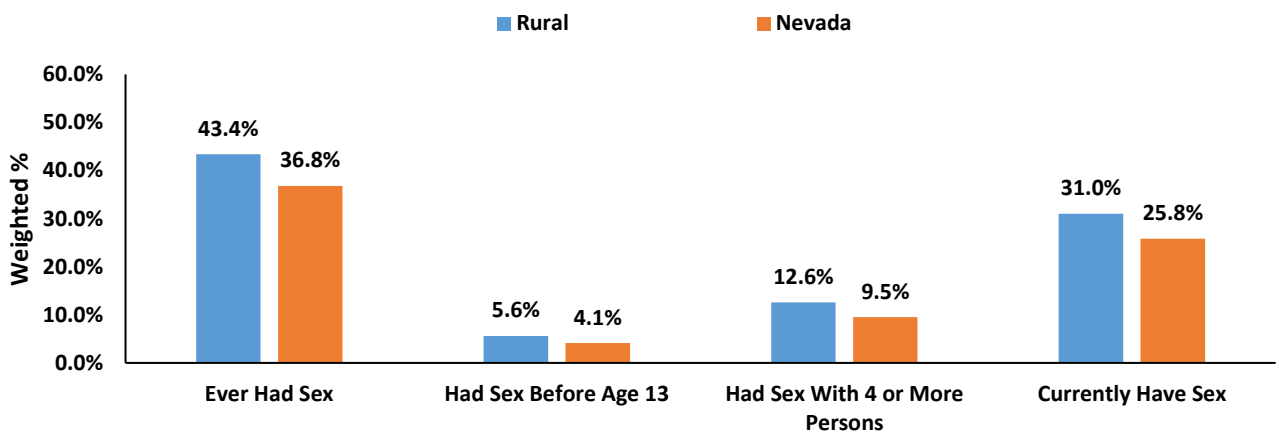
White non-Hispanic have had a relatively stable rate of alcohol and/or drug-related deaths. While Black non-Hispanic deaths increased in 2012 and 2015, these deaths are statistically significant (95% confidence interval) due to the population size.

Special Population: Youth

Youth Risk Behavior Survey (YRBS)

The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years. In Nevada for 2017, 5,336 high school, and 5,464 middle school students participated in the YRBS, of these 858 in 2017 where in the Rural Region.

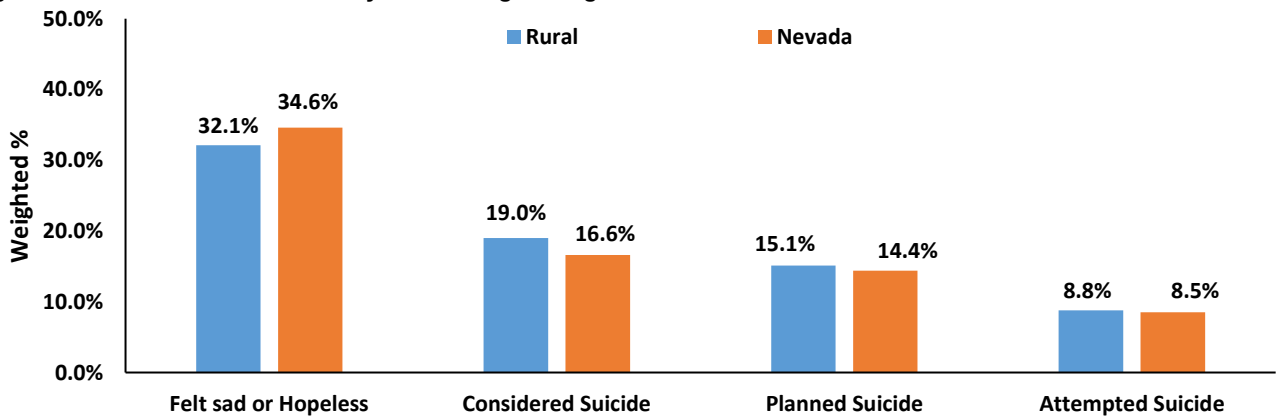
Figure 55. Sexual Intercourse Among Students, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 60% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

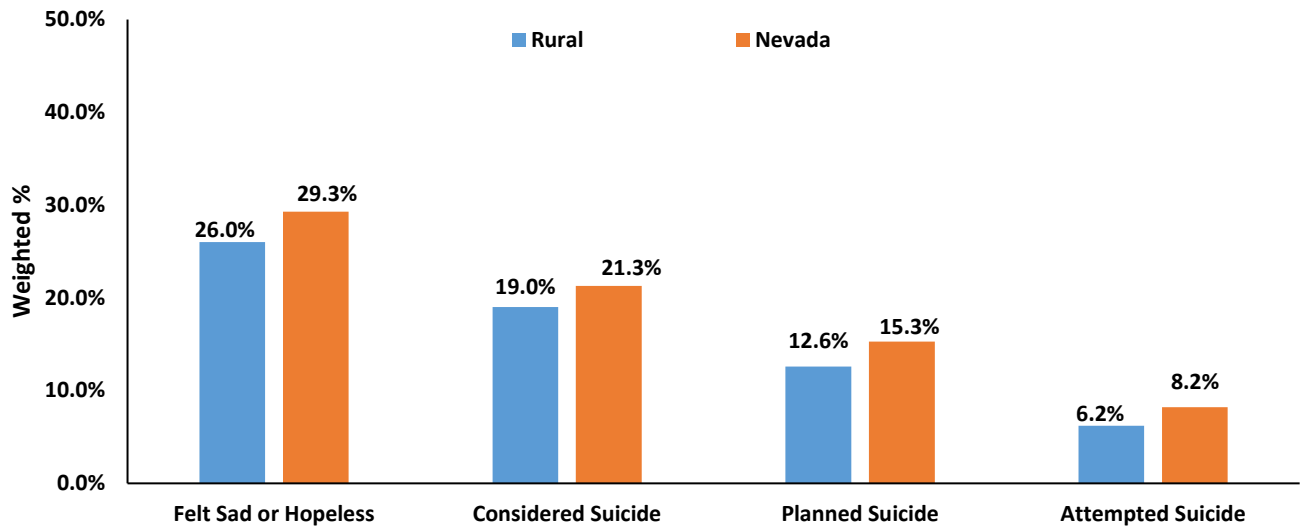
Among Rural Region high school students, 43.4% have reported ever having had sex, and 5.6% had sex before the age 13. Nearly 13% of Rural Region high school students have had sex with more than 3 partners and 31% of Rural Region high school students currently have sex.

Figure 56. Mental Health Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

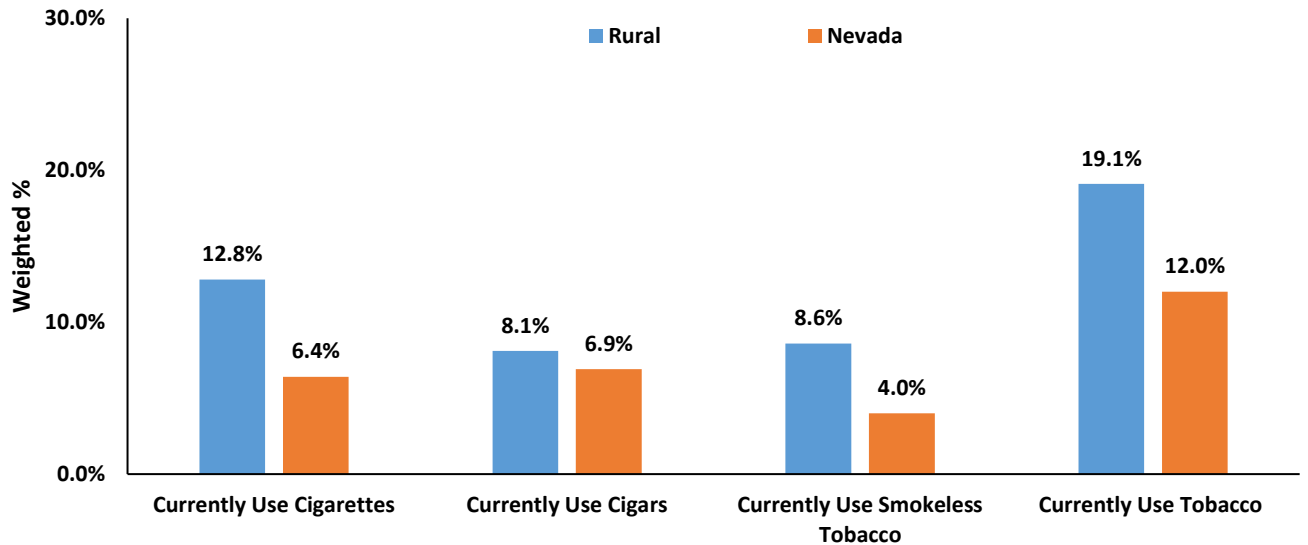
Figure 57. Mental Health Risk Behaviors, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Approximately 32.1% of rural high school students and 26.0% of rural middle school students have felt sad or hopeless in the last 12 months. About 19.0% of high school and middle school students have considered suicide, while 15.1% of high school students have planned to commit suicide in the past 12 months. About 8.8% of rural high school students have attempted suicide in the past 12 months.

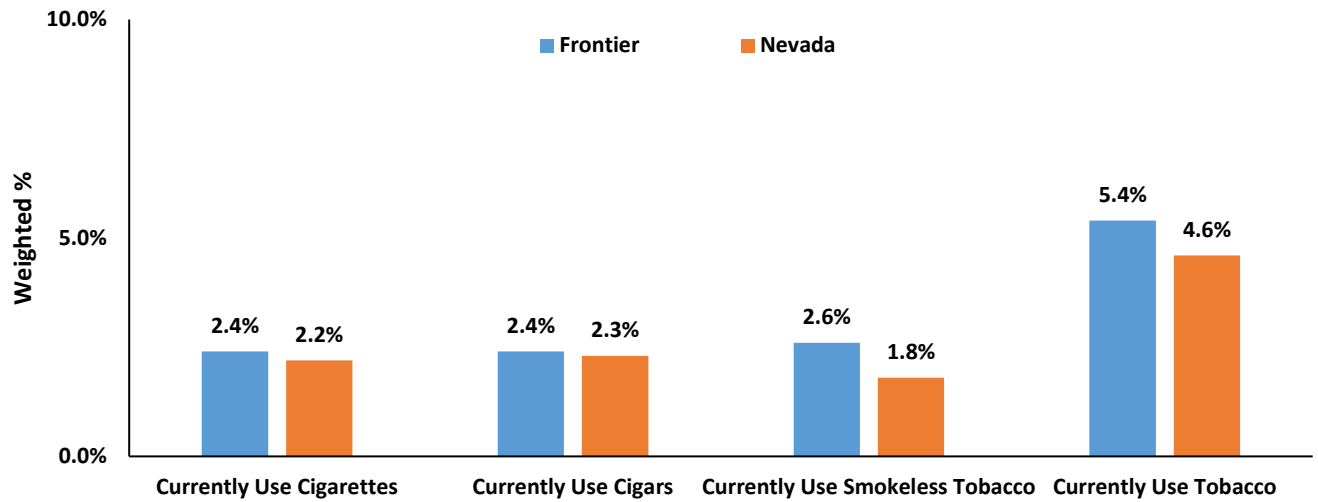
Figure 58. Current Tobacco Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 30% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the Rural Region high school students, 12.8% reported using cigarettes in the past 30 days and 19.1% currently use tobacco, this is higher than the Nevada at 12% in 2017.

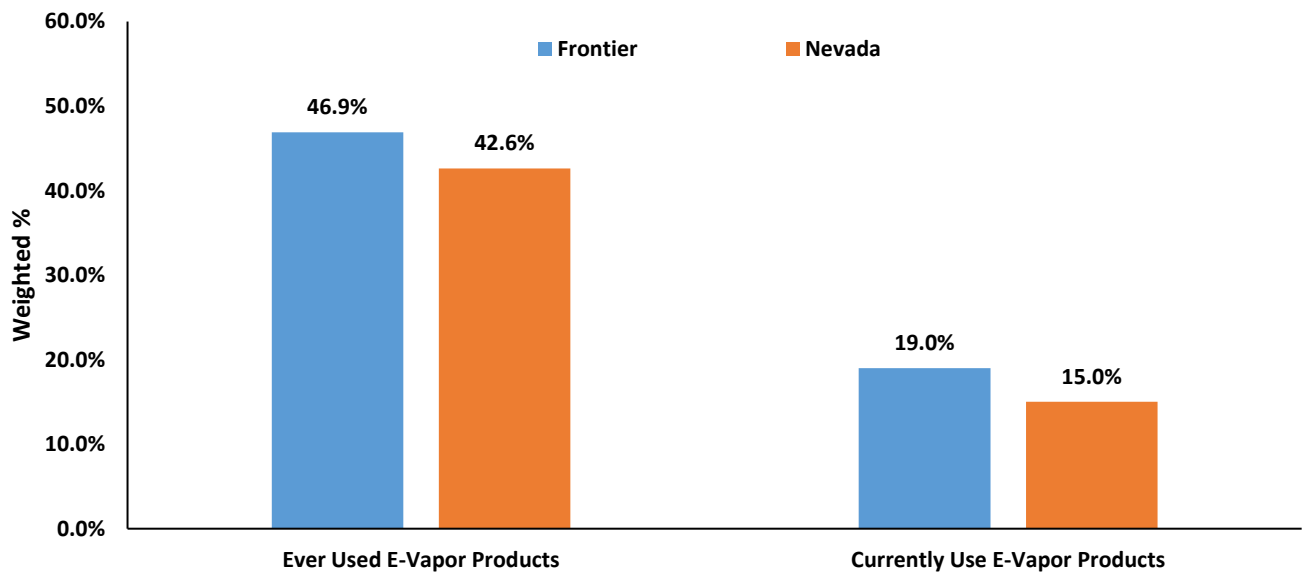
Figure 59. Current Tobacco Use Summary, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 10% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the Rural Region middle school students, 5.4% reported use of tobacco in the past 30 days; 2.4% reported using cigarettes in the past 30 days and used cigars in the past 30 days which is similar to Nevada.

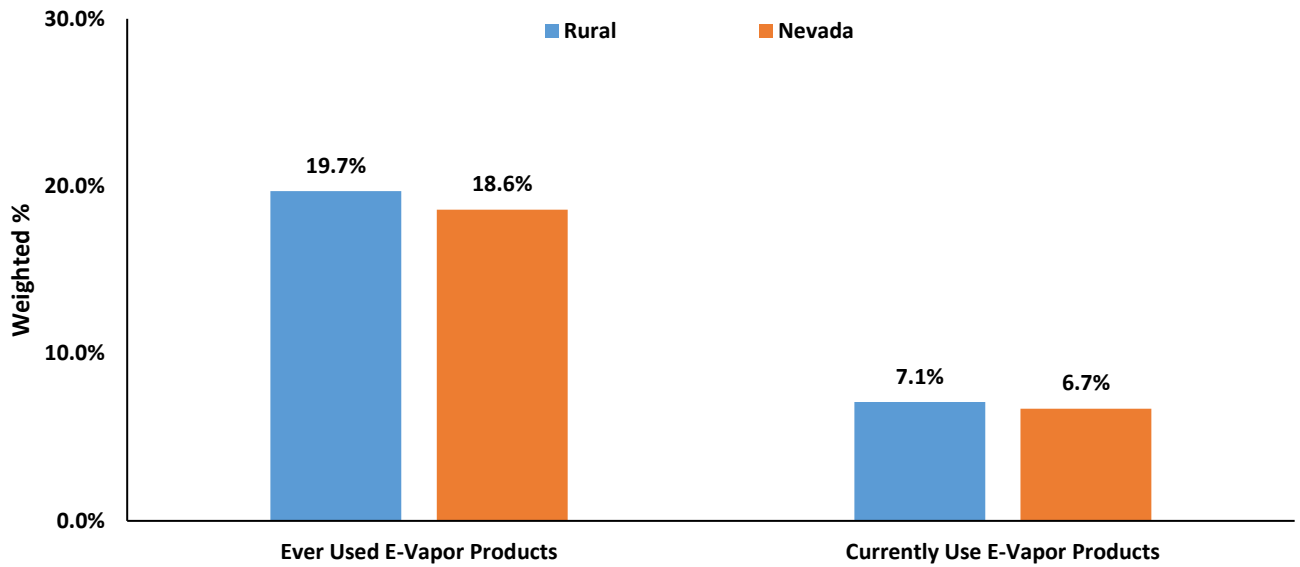
Figure 60. Electronic Vapor Product Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 60% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, about 47% high school students have used electronic vapor (E-vapor) products and 19% are currently using E-vapor products, which is higher than the Nevada (15%) for high school students.

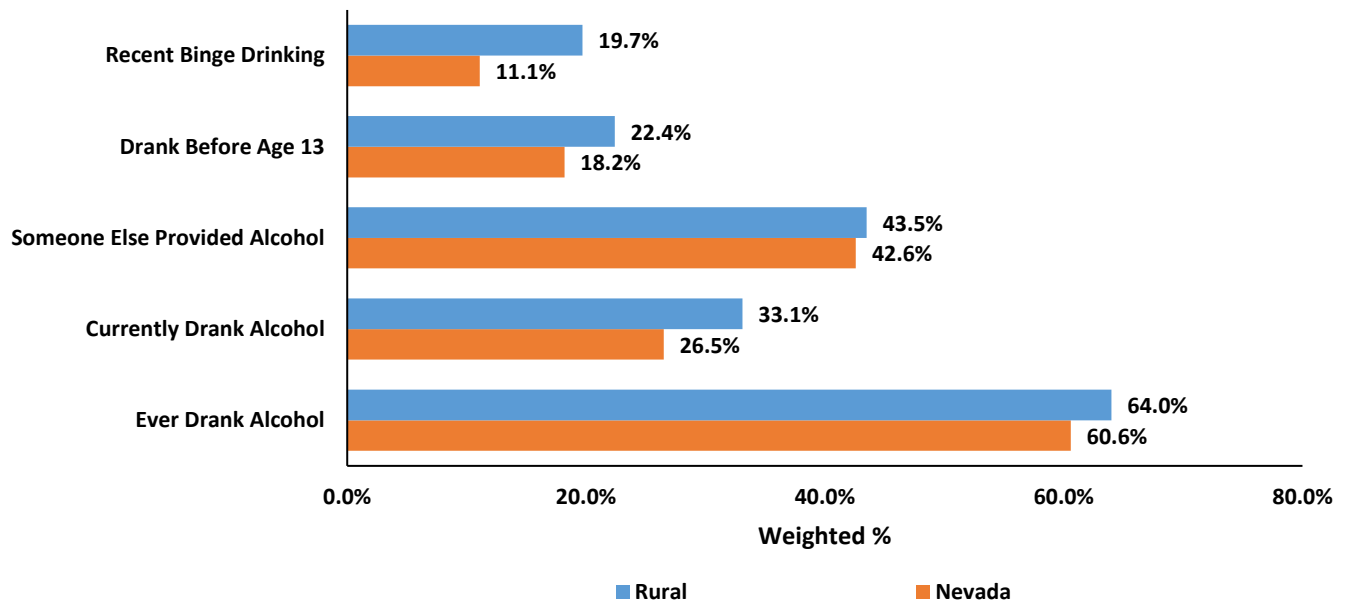
Figure 61. Electronic Vapor Product Use Summary, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 30% to display differences among groups.
 Indicator “tried e-vapor products before age 11” not measured in 2015.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, 19.7% of middle school students have used E-vapor products and 7.1% are currently using E-vapor products which is slightly higher than Nevada.

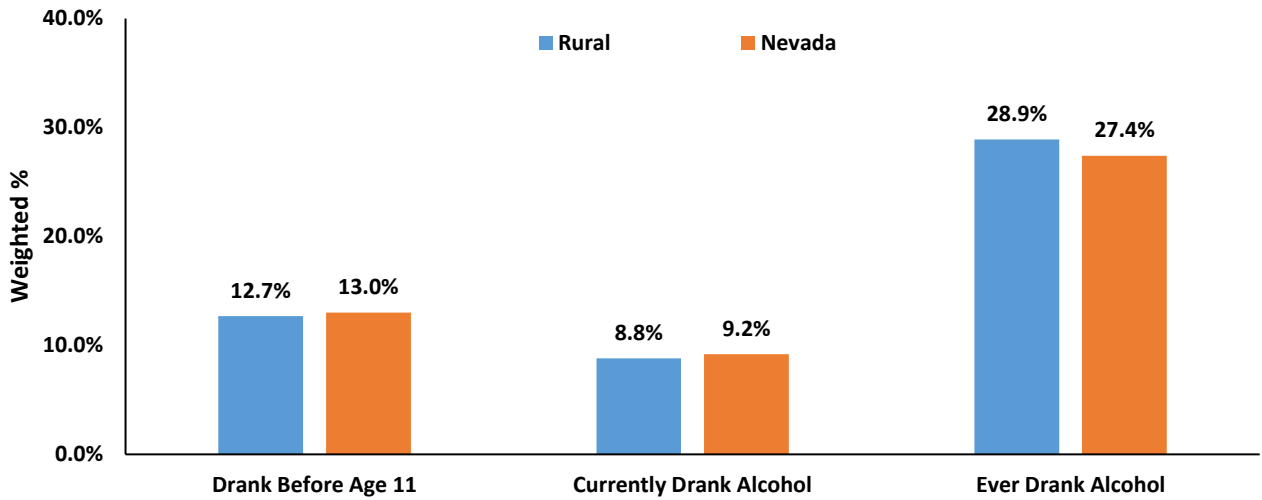
Figure 62. Alcohol Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Binge Drinking: Had five or more drinks of alcohol in a row for males, four or more for females within a couple of hours.
 Chart scaled to 80% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

At least 6 out of 10 high school students have ever had a drink of alcohol (64%). Approximately 33.1% currently drink alcohol and 43.5% have had alcohol provided to them by someone else. Of Rural Region high school students, 22.4% had alcohol before the age of 13 years and 19.7% had a recent binge drinking experience.

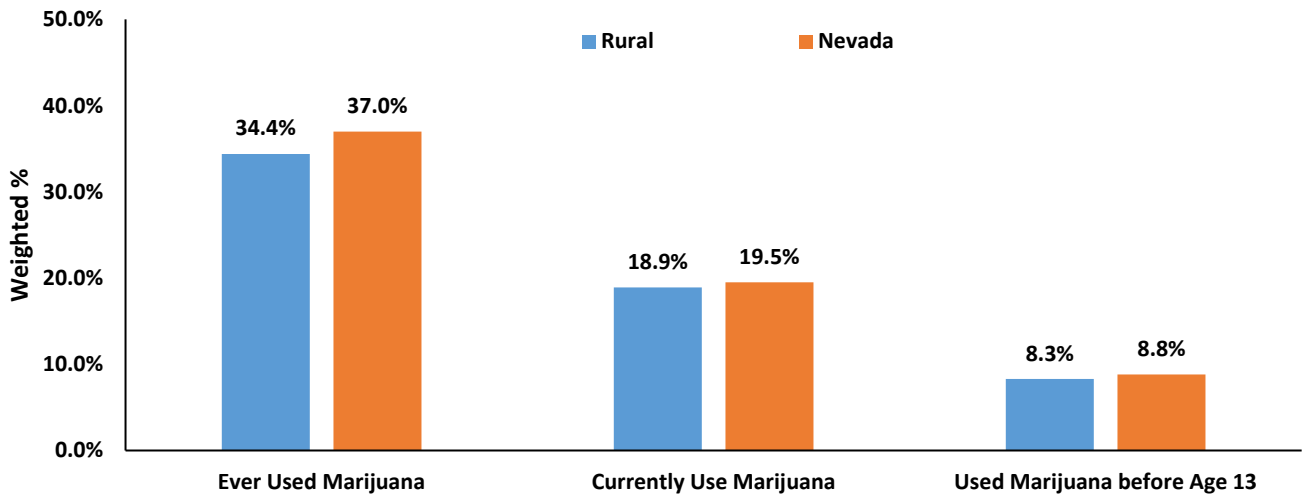
Figure 63. Alcohol Use Summary, Rural Region Middle School Students, 2015 and 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 40% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

At least one out of ten middle school students drank alcohol before age 11 in the Rural Region of Nevada. Also, 8.8% currently drink alcohol and three out of ten had drank alcohol before (28.9%) which is slightly higher than Nevada.

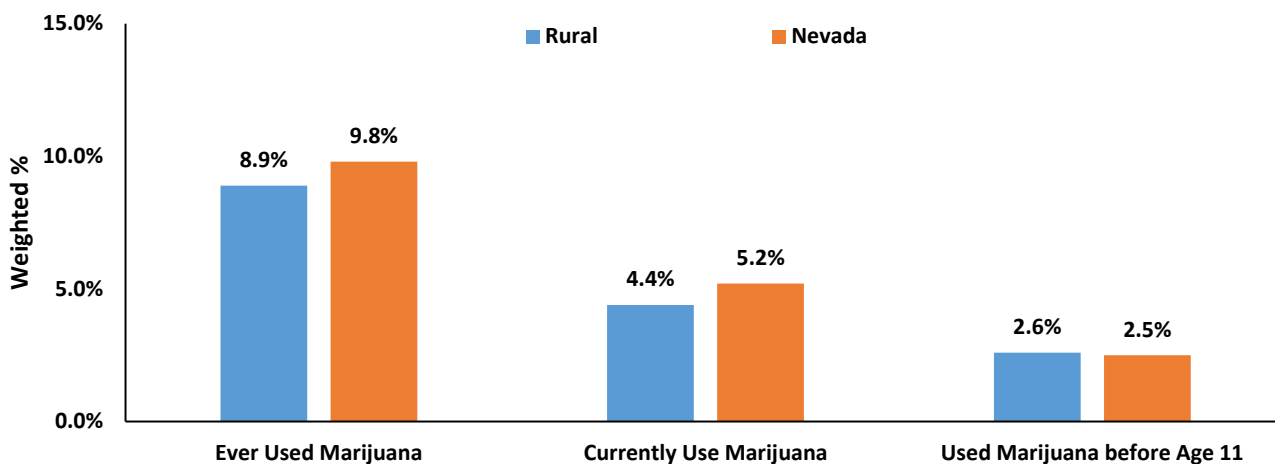
Figure 64. Marijuana Use Summary, Rural Region High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 50% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

In the Rural Region, 34.4% of high school students reported trying marijuana, and 18.9% currently use marijuana. Nevada is like the nation for marijuana use.

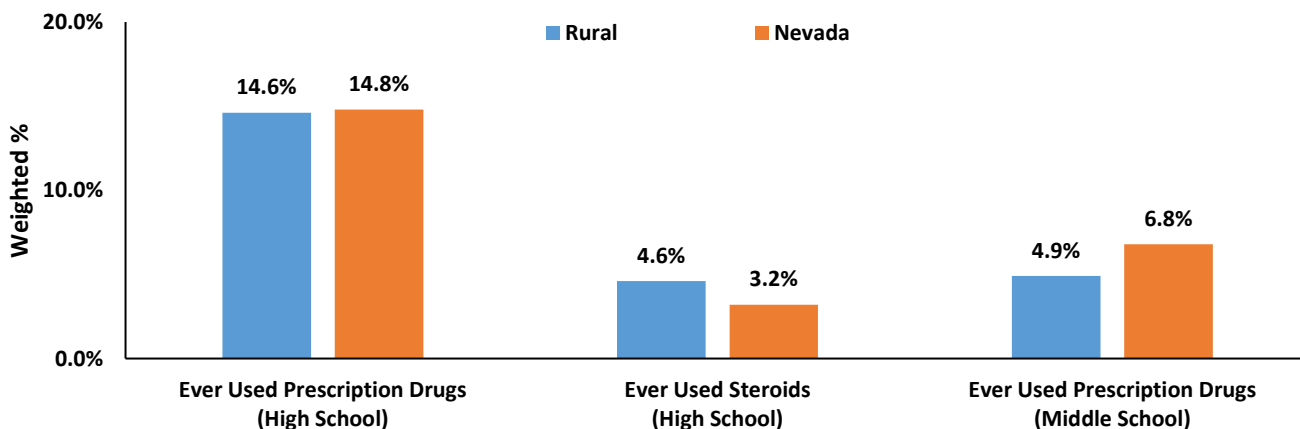
Figure 65. Marijuana Use Summary, Nevada Middle School Students, Rural Region, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 15% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

About 3% of the Rural Region middle school students, had tried marijuana before they turned 11 years old, 8.9% have ever tried marijuana before, and 4.4% currently use marijuana.

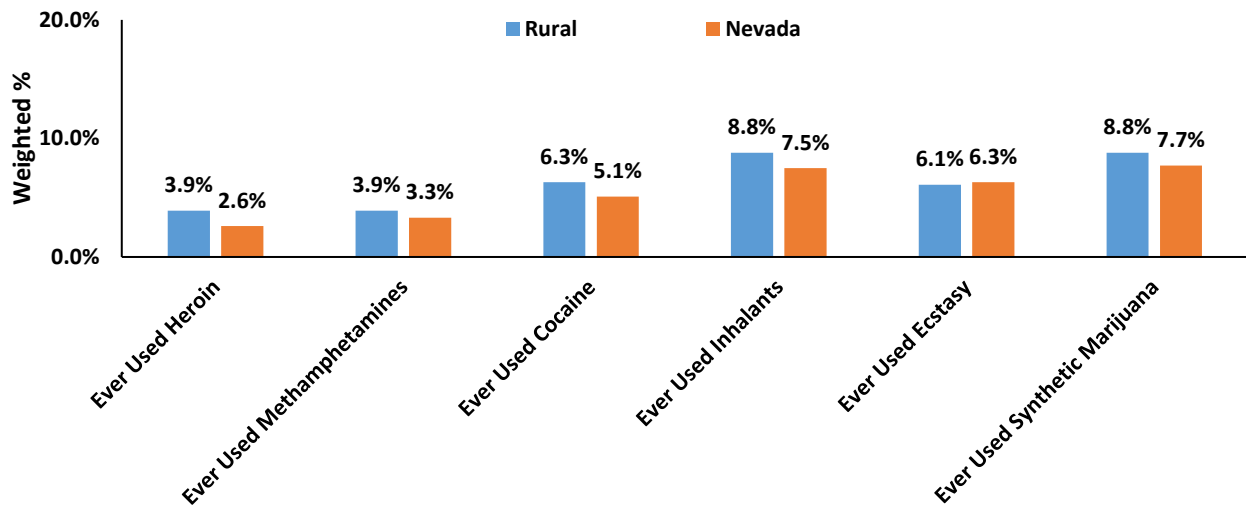
Figure 66. Nonprescription Substance Use Summary, Rural Region Middle and High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 20% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Approximately 15% of the Rural Region high school students, have used prescription drugs that were not prescribed to them in their lifetime, while about 5% of middle school students have ever taken a prescription drugs that were not prescribed to them. Of the Rural Region’s high school students, 4.6% have tried non-prescribed steroids.

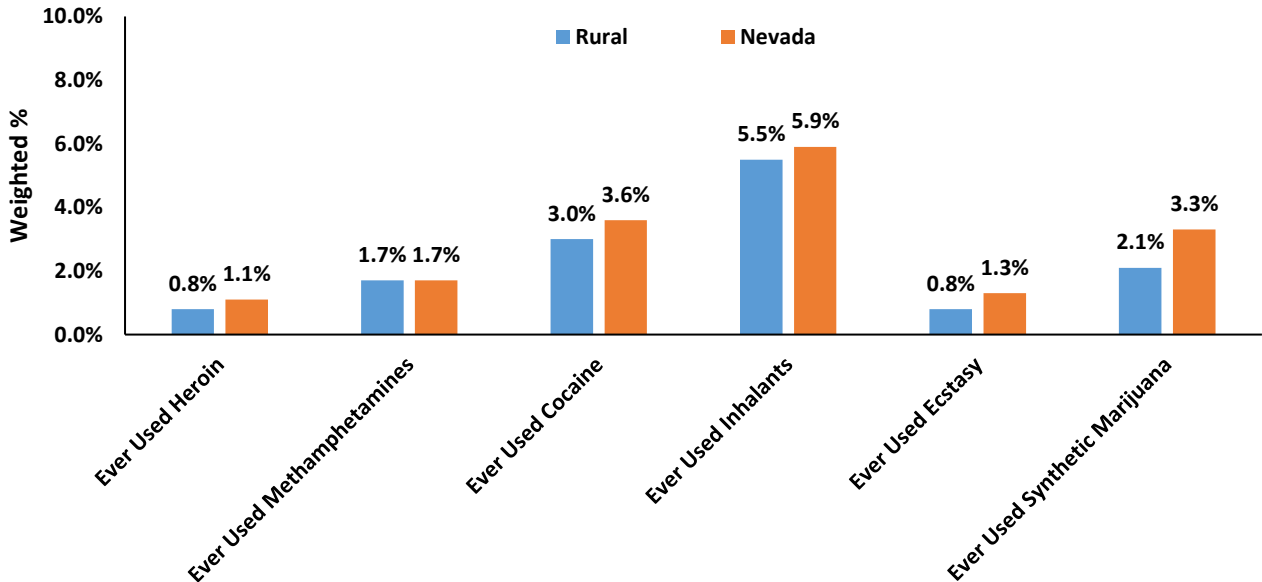
Figure 67. Lifetime Drug Use Summary, Rural Region, High School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 20% to display differences among groups.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Drug use among high school students is slightly higher in the Rural Region than in Nevada. Of the Rural Region high school students 8.8% have use inhalants and ever using synthetic marijuana, while 6.3% have reported the use of cocaine.

Figure 68. Lifetime Drug Use Summary, Rural Region Middle School Students, 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
 Chart scaled to 10% to display differences among groups.
 Indicator for "heroin" and "ecstasy" not measured in 2015.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

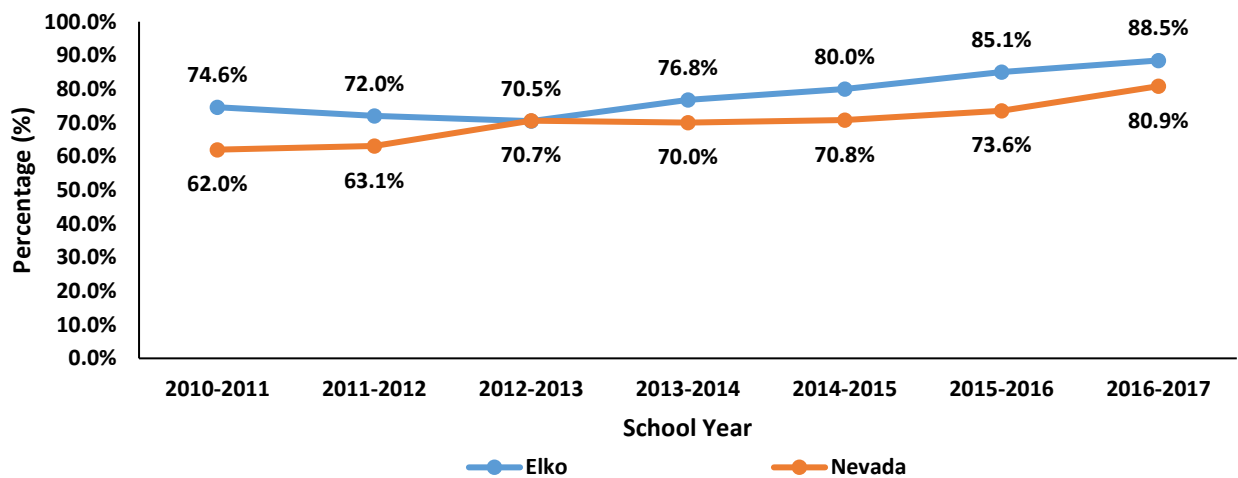
Middle school students in the Rural Region have the same percent of ever using methamphetamines 1.7%.

Nevada Report Card (School Success)

The Nevada Report Card is the accountability reporting website of the Nevada Department of Education. In compliance with federal and state law, it assists community members (parents, educators, researchers, lawmakers, etc.) in locating a wealth of detailed information pertaining to K-12 public education in Nevada. The web site has three categories: “school and district information,” “assessment and accountability” and “fiscal and technology.”

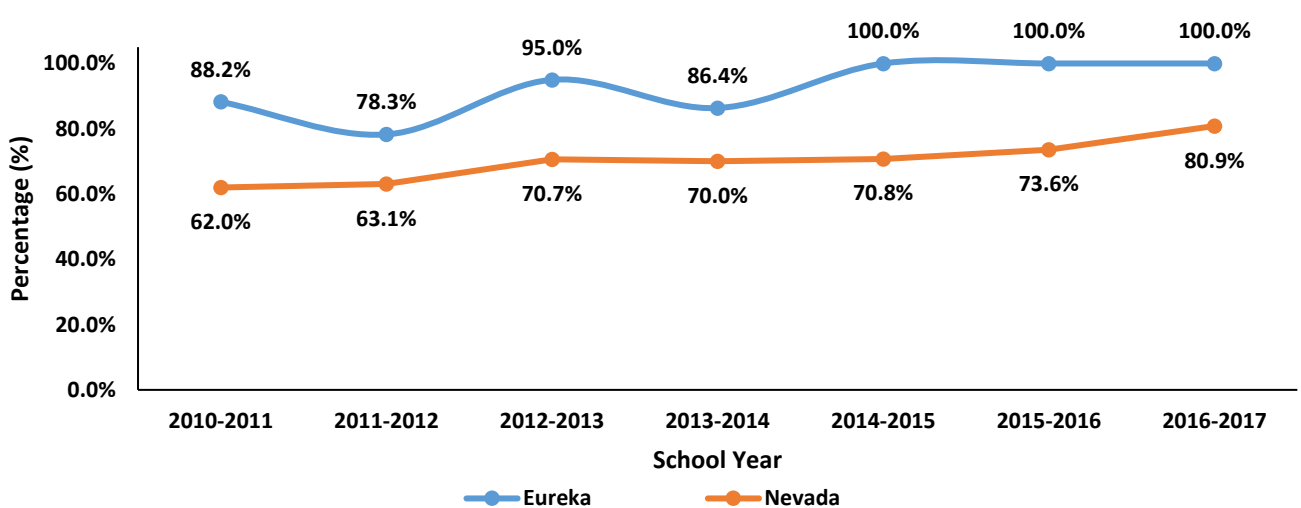
When student behavioral health needs are not identified or not provided with the necessary attention, they are more likely to experience difficulties in school. These include higher rates of suspensions, expulsions, dropouts, and truancy, as well as lower grades. Nationally, 50% of students age 14 and older who are living with a mental illness drop out of high school. This is the highest dropout rate of any disability group.

Figure 69a. High School Graduation Percentage, Elko County, Class Cohorts 2010–2017.



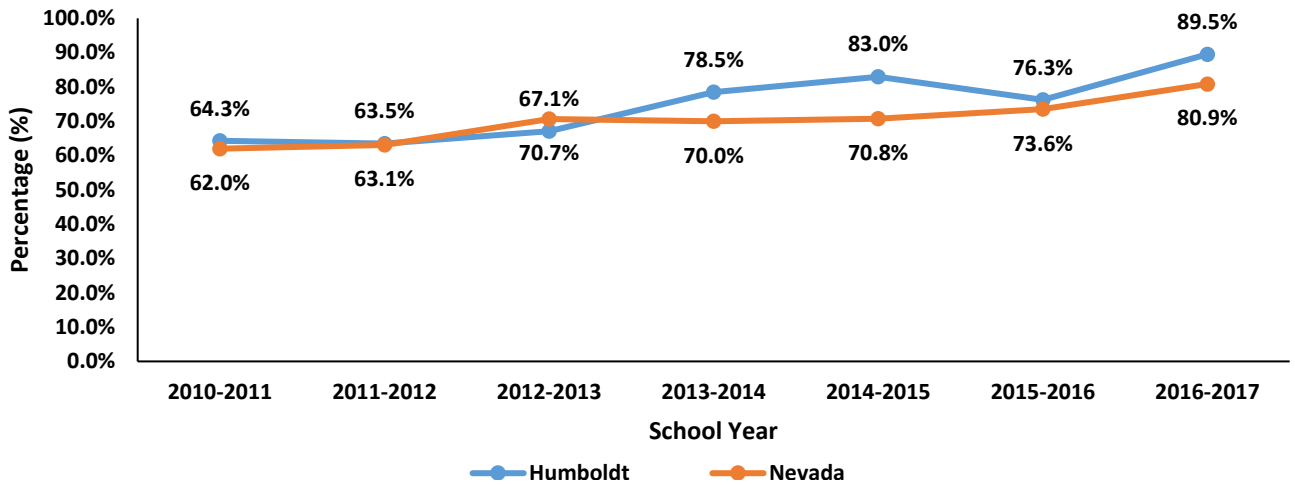
Source: Nevada Department of Education, Report Card.

Figure 69b. High School Graduation Percentage, Eureka County, Class Cohorts 2010–2017.



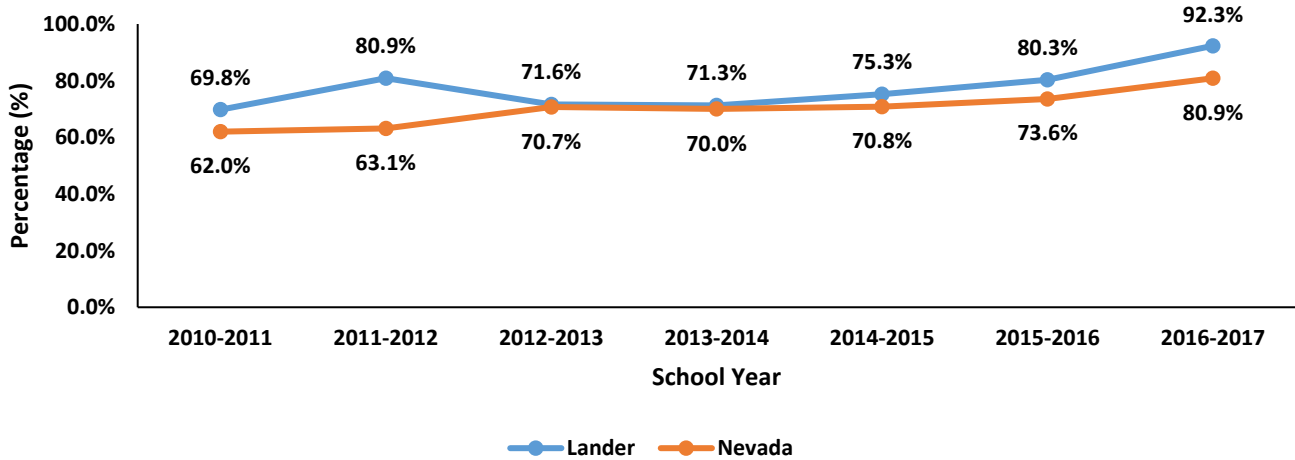
Source: Nevada Department of Education, Report Card.

Figure 69c. High School Graduation Percentage, Humboldt County, Class Cohorts 2010–2017.



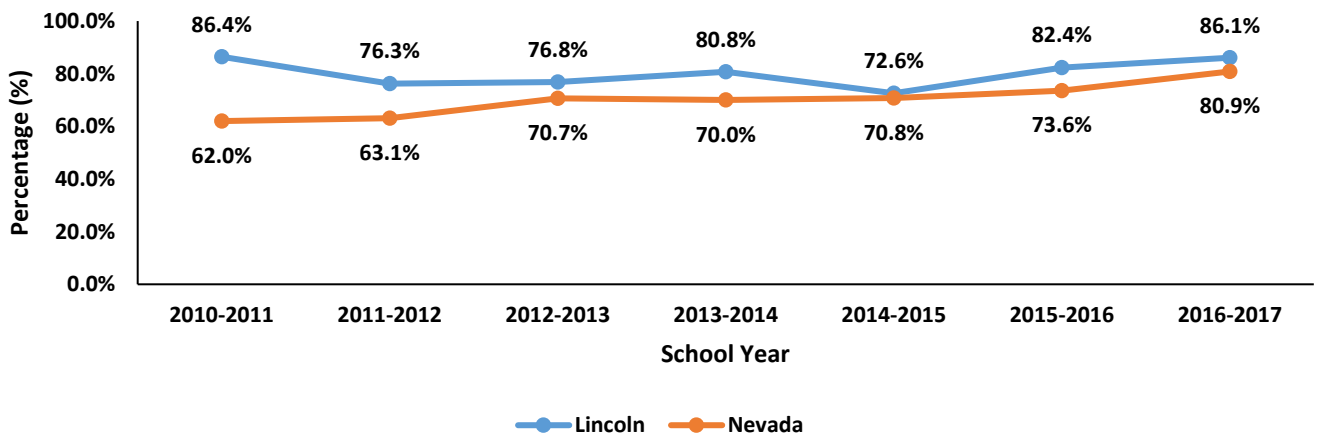
Source: Nevada Department of Education, Report Card.

Figure 69d. High School Graduation Percentage, Lander County, Class Cohorts 2010–2017.



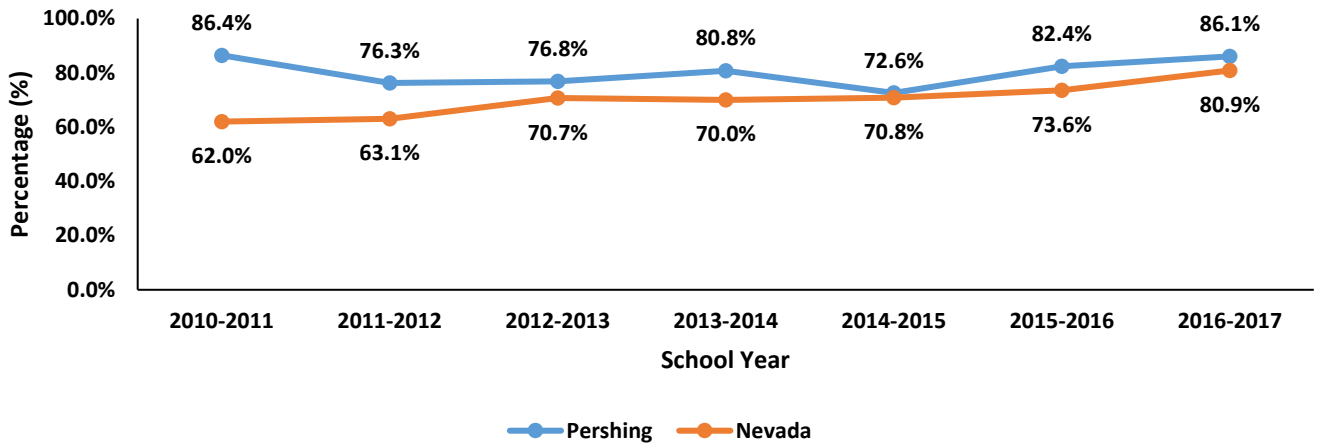
Source: Nevada Department of Education, Report Card.

Figure 69e. High School Graduation Percentage, Lincoln County, Class Cohorts 2010–2017.



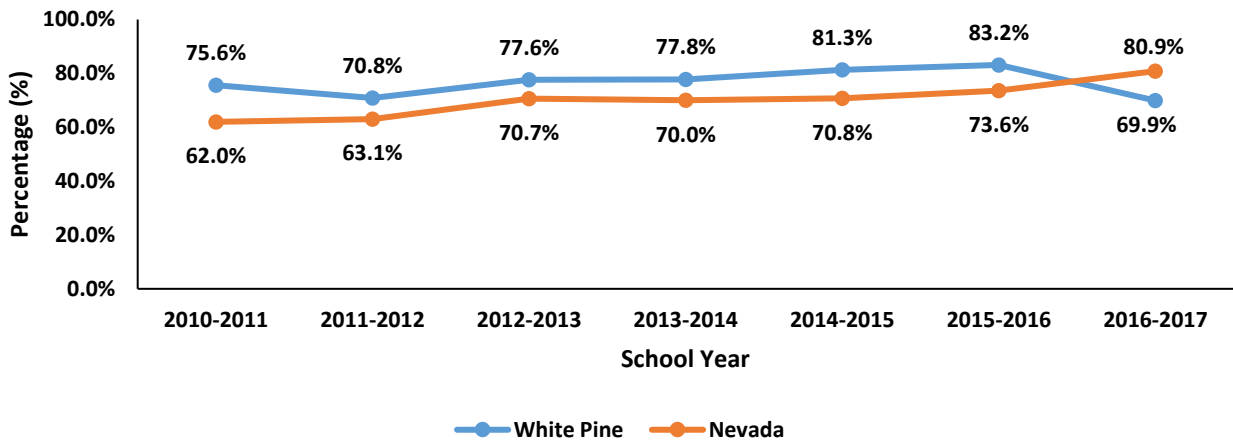
Source: Nevada Department of Education, Report Card.

Figure 69f. High School Graduation Percentage, Pershing County, Class Cohorts 2010–2017.



Source: Nevada Department of Education, Report Card.

Figure 69g. High School Graduation Percentage, White Pine County, Class Cohorts 2010–2017.



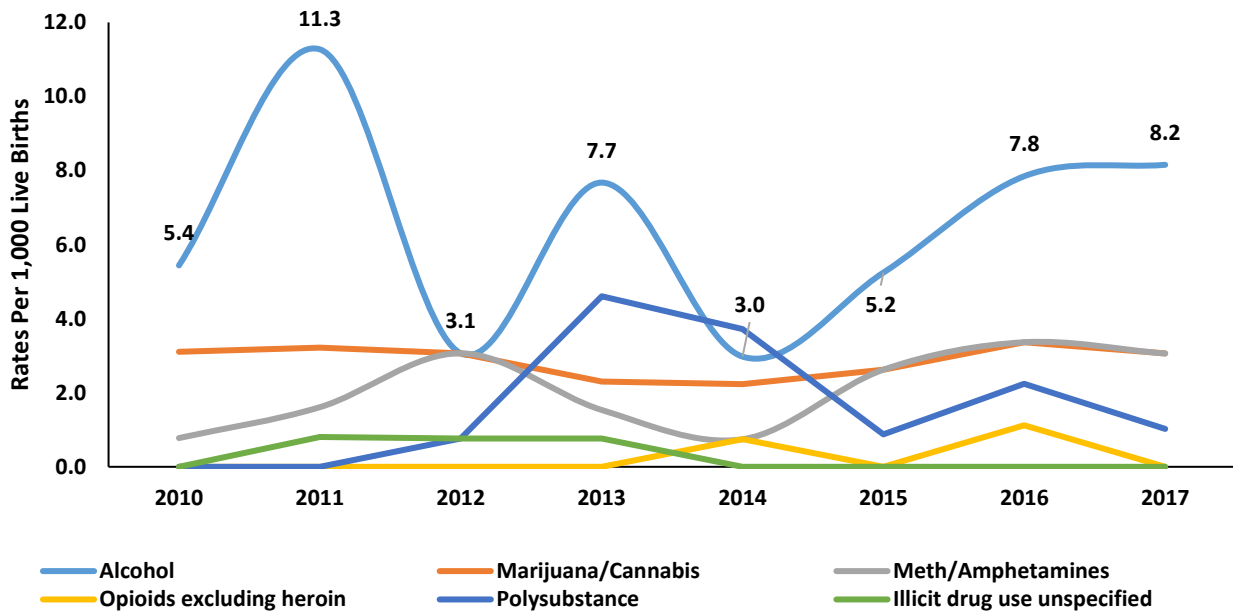
Source: Nevada Department of Education, Report Card.

Graduation rate is defined as the rate at which 9th graders graduate by the end of the 12th grade (number of students who graduate in four years with a regular high school diploma divided by the number of students who from the adjusted cohort for the graduation class). Eureka has consistently had a perfect graduation rate since school year 2014-2015.

Special Population: Newborns

The data in this section is reflective of self-reported information provided by the mother on the birth record. On average, there are 35,740 live births per year to Nevada residents between 2010-2017 and 9,498 too mothers in the Rural Region. From 2015 to 2017 in the Rural Region there were 60 reports of alcohol use indicated on the birth certificate and 27 indicated marijuana use, 19 indicated meth/amphetamine use, 2 indicated opiate use, and 1 indicated heroin use during pregnancy.

Figure 70. Prenatal Substance Abuse Birth Rates (self-reported) for Select Substances, Rural Region 2010-2017.

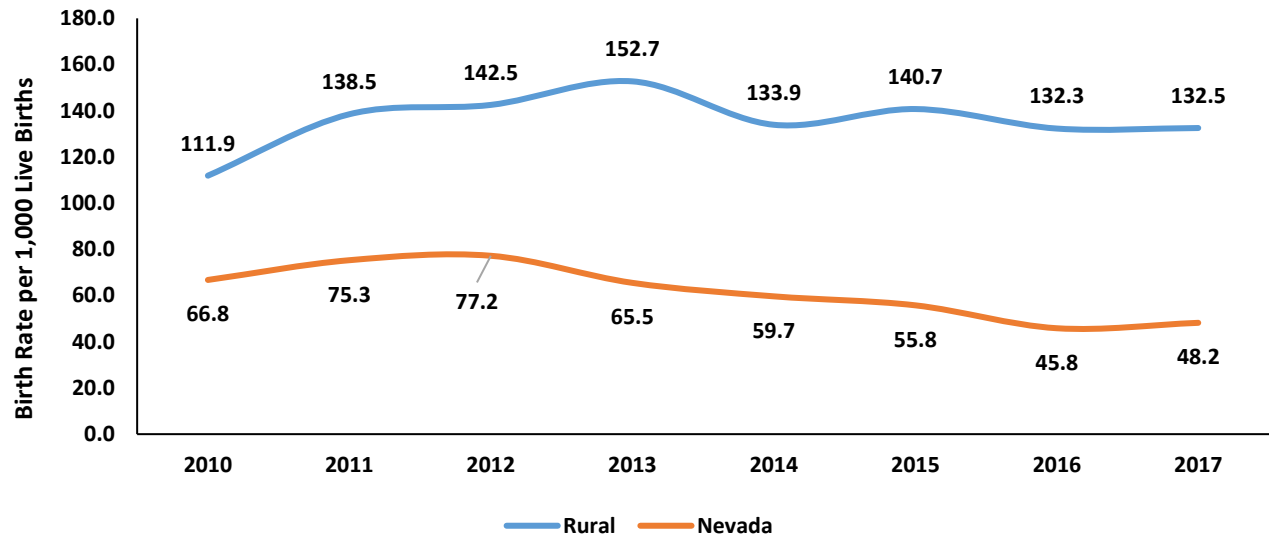


Source: Nevada Electronic Birth Registry System.
 Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine.

Of the Rural Region mothers who gave birth between 2010 and 2017 that self-reported using substances while pregnant, alcohol and marijuana has the highest prenatal substance abuse birth rate, at 8.2 per 1,000 births in 2017 respectively. A rate of 3.1 per 1,000 was reported for meth/amphetamines, and 1.0 per 1,000 births reported for polysubstance use.

Because alcohol and substance use during pregnancy is self-reported by the mothers, rates are likely lower than actual rates due to underreporting, and expectant mothers may be reluctant to be forthcoming on the birth record for a variety of reasons.

Figure 71. Tobacco Abuse Birth Rates (self-reported), Rural Region 2010-2017.



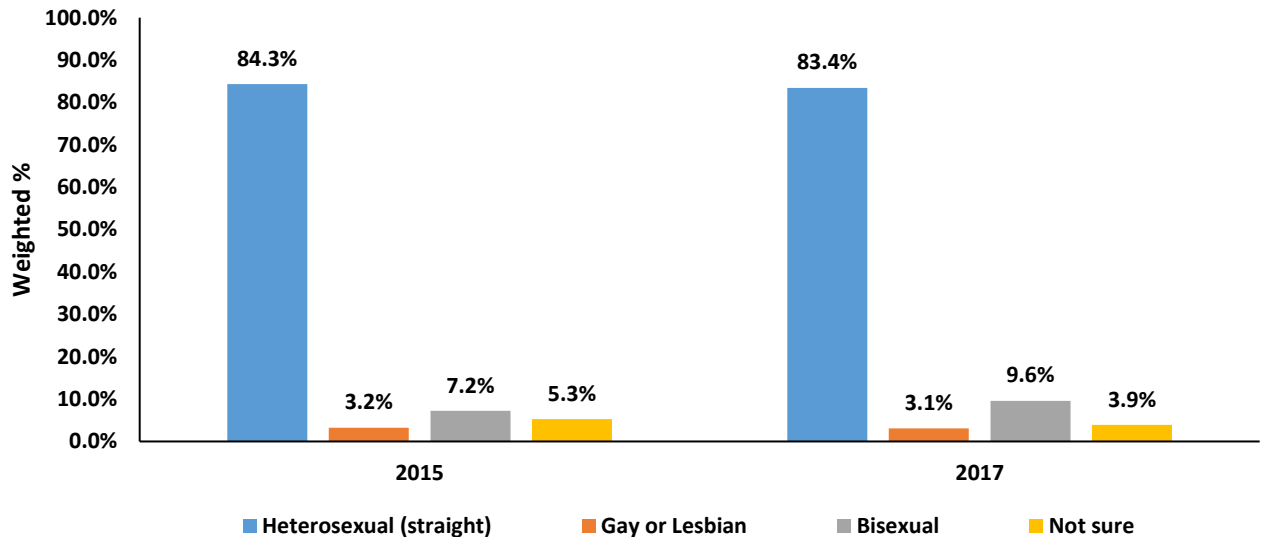
Source: Nevada Electronic Birth Registry System.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Mothers who self-reported tobacco use, has increased from 111.9 to 132.5 per 1,000 live births in the Rural Region.

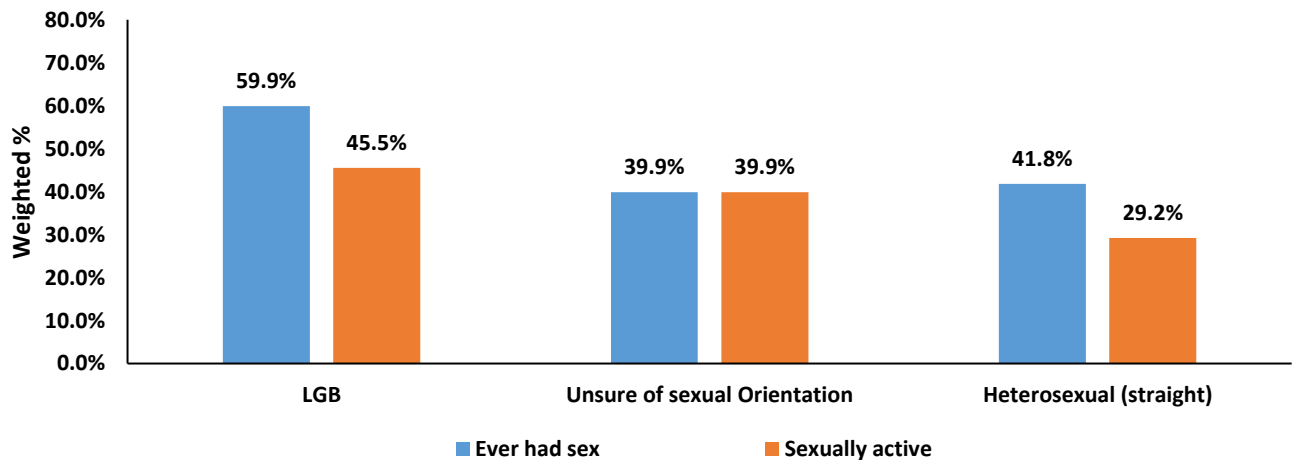
Special Population: Lesbian, Gay, and Bisexual

Figure 72. Sexual Orientation, Rural Region High School Population, 2015 and 2017.



Source: Nevada Youth Risk Behavior Survey (YRBS).
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Figure 73. Prevalence Estimates of Health Risk Behaviors, by LGB – Rural Region Youths, 2015.



Source: Nevada Youth Risk Behavior Survey (YRBS).
Chart scaled to 80% to display differences among groups.
Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Of the Rural Region high school students who participated in the youth risk behavior survey in 2017, 83.4% were heterosexual (straight), 3.1% were gay or lesbian, 9.6% were bisexuals and 3.9% were not sure about their sexual orientation. In 2015, 45.5% of LGB Rural Region high school students were sexually active and 59.9% had ever had sex respectively.

Appendix

Hospital billing data (emergency department and Inpatient admissions) and mortality data both utilize International Classification of Diseases codes (ICD). Hospital billing uses ICD-CM which is a 7-digit code versus death where the ICD codes are 4-digit. In hospital billing data, the ICD codes are provided in the diagnosis fields, while death data the ICD codes are coded from the literal causes of death provided on the death certificate.

In October 2015, ICD-10-CM codes were implemented nationwide. Before October 2015, ICD-9-CM codes were used for medical billing. Therefore, 2015 data consists of two distinct coding schemes, ICD-9-CM and ICD-10-CM respectively. Due to this change in coding schemes, hospital billing data from October 2015 forward may not be directly comparable to previous data.

The following ICD-CM codes were used for mental health-related hospital encounters and admissions:

Anxiety: 300.0 (9); F41 (10)
Bi-Polar: 296.40-296.89 (9); F32.89, F31 (10)
Depression: 296.20-296.36 (9); F32.0-F32.5, F33.0-F33.4, F32.9 (10)
Post-Traumatic Stress Disorder: 309.81 (9); F43.10, F43.12 (10)
Schizophrenia: 300.0 (9); F20, Z65.8 (10)
Suicidal Ideation: V62.84 (9); R45.851 (10)
Suicide Attempts: E95.0-E95.9 (9); X71-X83, T36-T50, T71 (10)

The following ICD-10-CM codes were used for substance-related hospital encounters and admissions:

Alcohol: 291, 303, 980, 305.0, 357.5, 425.5, 535.3, 571.0, 571.1, 571.2, 571.3, 790.3 (9); F10, K70, G62.1, I42.6, K29.2, R78.0, T51 (10)
Drug: 292, 304, 965, 967, 968, 969, 970, 305.2, 305.3, 305.4, 305.5, 305.6, 305.7, 305.8, 305.9 (9); F11- F16, T39, T40, T43, F18, F19 T410, T41.1, T41.2, T41.3, T41.4, T42.3, T43.4, T42.6, T42.7, T42.8 (10)

The following ICD-10 codes were used for suicide-related deaths:

Suicide: X60-X84

The following ICD-10 codes were used for mental health-related deaths:

Mental and Behavioral Disorders: F00-F09, and F20-F99.

The following ICD-10 codes were used for alcohol and drug-related deaths:

Alcohol: F10, K70, Y90, Y91, X45, X65, Y15, T51, K73, K74, G31.2, G62.1, I42.6, K29.2, K86.0, K85.0, R78.0, E24.4, O35.4, Q86.0, and Z72.1.
Drug: F11-F19, X40-X44, X60-S64, X85, Y10-Y14, Y40-Y59, G72.0', 'K85.3, R78.1, R78.2, R78.3, R78.4, R78.5, R78.6, E24.2, O35.5, P04.4, P96.1, P96.2, K71.1, N14.1, N14.0, N14.2, D52.1, T96, Z72.2, and T36-T50.

Table 1. Population Distribution, Rural Region, 2009-2017.

Sex	2009	2010	2011	2012	2013	2014	2015	2016	2017
Female	44,113	44,530	45,435	46,338	47,279	47,228	47,352	47,560	47,785
Male	50,552	51,046	51,675	53,106	53,925	53,916	53,538	53,616	53,614
Race									
White	69,592	70,010	71,258	73,112	74,505	74,028	72,372	72,320	72,426
Black	1,235	1,232	1,446	1,502	1,480	1,502	1,548	1,576	1,571
Native American	4,386	4,437	4,521	4,618	4,722	4,722	5,080	5,083	5,098
Asian/Pacific	895	921	971	976	1,001	1,043	1,174	1,171	1,166
Hispanic	18,558	18,978	18,915	19,237	19,498	19,851	20,718	21,026	21,138
Age									
0-14	19,883	19,765	18,998	18,330	18,228	18,305	17,776	17,696	17,608
15-17	4,956	5,045	5,066	5,033	4,807	4,430	4,354	3,942	3,661
18-19	3,263	3,171	4,077	4,622	4,753	3,425	3,064	3,134	3,223
20-24	9,047	9,384	9,644	10,347	11,002	11,940	10,820	10,526	9,500
25-34	8,314	8,564	9,788	11,194	12,190	13,090	15,126	16,225	17,795
35-44	13,534	12,934	12,456	12,044	11,463	10,803	10,313	9,921	9,725
45-54	14,679	14,930	14,703	14,531	14,003	13,861	13,539	13,273	13,081
55-64	11,123	11,629	11,829	12,085	12,623	12,410	12,056	12,257	12,253
65-74	6,537	6,669	6,683	7,257	8,095	8,762	9,173	9,225	9,101
75-84	2,348	2,486	2,798	2,890	2,913	3,043	3,497	3,833	4,305
85+	981	1,000	1,069	1,113	1,127	1,077	1,174	1,144	1,147
Total	94,666	95,577	97,111	99,445	101,205	101,145	100,891	101,176	101,399

Source: Nevada State Demographer, Vintage 2017.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 2. Middle School and High School Indicators, Rural Region, 2017.

Indicator	Middle School		High School	
	Percent (%)	Confidence Interval (95%)	Percent (%)	Confidence Interval (95%)
Felt sad or hopeless	26.0%	(22.2-29.8)	32.1%	(27.7-36.5)
Considered committing suicide	19.0%	(15.5-22.6)	19.0%	(16.1-21.9)
Planned suicide	12.6%	(9.4-15.7)	15.1%	(11.8-18.3)
Attempted suicide	6.2%	(3.6-8.9)	8.8%	(6.0-11.6)
Cut or burn themselves**	16.7%	(13.6-19.8)	**	-
Currently smoke cigarettes	2.4%	(1.2-3.7)	12.8%	(8.9-16.7)
Currently smoke cigars	2.4%	(1.0-3.7)	8.1%	(4.1-12.1)
Currently use smokeless tobacco	2.6%	(1.2-4.1)	8.6%	(5.5-11.6)
Currently use tobacco	5.4%	(2.9-7.9)	19.1%	(13.7-24.4)
Ever used E-vapor products	19.7%	(14.2-25.2)	46.9%	(41.2-52.6)
Currently use E-vapor products	7.1%	(3.5-10.8)	19.0%	(14.3-23.7)
Tried E-vapor products before age 11	7.4%	(3.8-11.0)	**	-
Drank alcohol before age 11 (MS) / age 13 (HS)	12.7%	(10.1-15.4)	21.9%	(17.9-25.9)
Someone else provided alcohol	*	-	43.5%	(36.7-50.2)
Recent binge drinking	*	-	19.7%	(14.5-24.8)
Currently drank alcohol	8.8%	(5.8-11.8)	33.1%	(27.5-38.7)
Ever drank alcohol	28.9%	(22.4-35.4)	64.0%	(59.1-69.0)
Ever used marijuana	8.9%	(5.2-12.5)	34.4%	(29.1-39.7)
Currently use marijuana	4.4%	(2.0-6.9)	18.9%	(15.0-22.8)
Used marijuana before age 11 (MS)/ age 13 (HS)	2.6%	(1.2-4.1)	8.3%	(5.9-10.7)
Ever used prescription drugs	4.9%	(3.3-6.6)	14.6%	(11.6-17.6)
Ever used steroids (in HS)*	*	-	4.6%	(2.5-6.7)
Ever used heroin	0.8%	(0.2-1.5)	3.9%	(2.1-5.7)
Ever used methamphetamines	1.7%	(0.4-3.1)	3.9%	(1.8-6.1)
Ever used cocaine	3.0%	(1.2-4.7)	6.3%	(3.7-9.0)
Ever used inhalants	5.5%	(3.3-7.7)	8.8%	(6.4-11.1)
Ever used ecstasy	0.8%	(0.2-1.5)	6.1%	(4.0-8.2)
Ever used synthetic marijuana	2.1%	(0.8-3.3)	8.8%	(6.0-11.5)
Ever had sex*	*	-	43.4%	(38.2-48.5)
Had sex before age 13*	*	-	5.6%	(3.8-7.5)
Had sex with 4 or more persons*	*	-	12.6%	(8.8-16.3)
Currently have Sex*	*	-	31.0%	(26.4-35.6)

Source: Nevada Youth Risk Behavior Survey (YRBS).

*Data not collected from Middle School Students

**Data not collect from High School Students

Table 3. Prevalence Estimates of Health Risk Behaviors, Rural Region (Adults), 2011-2017.

Indicator	Percent & Confidence Interval (95%)						
	2011	2012	2013	2014	2015	2016	2017
Currently use marijuana/hashish	8.6% (3.3-13.8)	1.5% (0.0-4.1)	2.3% (0.5-4.1)	2.6% (0.7-4.5)	7.3% (1.7-12.9)	7.8% (3.6-12.1)	*
Use other illegal drugs	2.2% (0.0-5.3)	0.3% (0.0-0.9)	0.2% (0.0-0.5)	0.4% (0.0-1.3)	-	1.8% (0.0-4.4)	*
Currently use pain killer to get high	0.1% (0.0-0.3)	-	-	0.4% (1)	0.6% (0.0-1.9)	0.6% (0.0-1.8)	*
Seriously considering suicide	2.5% (0.0-5.4)	0.1% (0.0-0.2)	1.0% (0.0-2.0)	~	1.6% (0.0-3.2)	3.3% (1.1-5.5)	*
No days of poor mental or physical health that prevented them from doing usual activities	53.3% (42.9-63.7)	57.2% (45.9-68.5)	65.6% (58.2-73.0)	61.7% (53.1-70.2)	53.6% (43.2-63.9)	65.7% (57.9-73.5)	61.4% (51.9-70.8)
1-9 days of poor mental or physical health that prevented them from doing usual activities	22.9% (15.0-30.7)	26.2% (15.2-37.3)	16.2% (11.1-21.3)	19.7% (13.1-26.4)	23.8% (15.0-32.7)	20.3% (13.5-27.1)	24.6% (15.8-33.5)
10 or more days of poor mental or physical health that prevented them from doing usual activities	23.8% (14.6-33.1)	16.5% (8.8-24.2)	18.2% (12.2-24.3)	18.6% (11.8-25.4)	22.6% (14.1-31.0)	14.0% (8.4-19.5)	14.0% (7.8-20.2)

Source: Behavioral Risk Factor Surveillance System (BRFSS).

~Indicator not measured.

*Data currently not available.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 4. Counts and Crude Rates of Selected Behavioral Health-Related Emergency Room Encounters by Gender, Rural Region Residents, 2009-2017.

2009		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	407	922.6 (833.0-1,012.3)	170	336.3 (285.7-386.8)	578	610.6 (560.8-660.3)	
Depression	364	825.2 (740.4-909.9)	165	326.4 (276.6-376.2)	529	558.8 (511.2-606.4)	
Bipolar Disorder	161	365.0 (308.6-421.3)	63	124.6 (93.8-155.4)	224	236.6 (205.6-267.6)	
PTSD	20	45.3 (25.5-65.2)	12	23.7 (10.3-37.2)	32	33.8 (22.1-45.5)	
Schizophrenia	29	65.7 (41.8-89.7)	53	104.8 (76.6-133.1)	82	86.6 (67.9-105.4)	
Suicidal Ideation	55	124.7 (91.7-157.6)	45	89.0 (63.0-115.0)	100	105.6 (84.9-126.3)	
2010		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	360	808.4 (724.9-891.9)	151	295.8 (248.6-343.0)	511	534.6 (488.3-581.0)	
Depression	290	651.2 (576.3-726.2)	146	286.0 (239.6-332.4)	436	456.2 (413.4-499.0)	
Bipolar Disorder	137	307.7 (256.1-359.2)	65	127.3 (96.4-158.3)	202	211.3 (182.2-240.5)	
PTSD	14	31.4 (15.0-47.9)	7	13.7 (3.6-23.9)	21	22.0 (12.6-31.4)	
Schizophrenia	21	47.2 (27.0-67.3)	44	86.2 (60.7-111.7)	65	68.0 (51.5-84.5)	
Suicidal Ideation	61	137.0 (102.6-171.4)	48	94.0 (67.4-120.6)	109	114.0 (92.6-135.5)	
2011		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	467	1,027.8 (934.6-1,121.1)	206	398.6 (344.2-453.1)	673	693.0 (640.7-745.4)	
Depression	451	992.6 (901.0-1,084.2)	201	389.0 (335.2-442.7)	652	671.4 (619.9-722.9)	
Bipolar Disorder	166	365.4 (309.8-420.9)	84	162.6 (127.8-197.3)	250	257.4 (225.5-289.3)	
PTSD	21	46.2 (26.5-66.0)	7	13.5 (3.5-23.6)	28	28.8 (18.2-39.5)	
Schizophrenia	29	63.8 (40.6-87.1)	38	73.5 (50.2-96.9)	67	69.0 (52.5-85.5)	
Suicidal Ideation	84	184.9 (145.3-224.4)	58	112.2 (83.4-141.1)	142	146.2 (122.2-170.3)	
2012		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	670	1,445.9 (1,336.4-1,555.4)	327	646.8 (576.7-717.0)	997	1,002.6 (940.3-1,064.8)	
Depression	674	1,454.5 (1,344.7-1,564.3)	332	656.7 (586.1-727.4)	1,006	1,011.6 (949.1-1,074.1)	
Bipolar Disorder	232	500.7 (436.2-565.1)	140	276.9 (231.1-322.8)	373	375.1 (337.0-413.1)	
PTSD	30	64.7 (41.6-87.9)	32	63.3 (41.4-85.2)	62	62.3 (46.8-77.9)	
Schizophrenia	30	64.7 (41.6-87.9)	68	134.5 (102.5-166.5)	98	98.5 (79.0-118.1)	
Suicidal Ideation	107	230.9 (187.2-274.7)	121	239.4 (196.7-282.0)	228	229.3 (199.5-259.0)	
2013		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	885	1,871.9 (1,748.5-1,995.2)	431	799.2 (723.8-874.7)	1,316	1,300.3 (1,230.1-1,370.6)	
Depression	948	2,005.1 (1,877.5-2,132.7)	347	643.5 (575.8-711.2)	1,295	1,279.6 (1,209.9-1,349.3)	
Bipolar Disorder	323	683.2 (608.7-757.7)	139	257.8 (214.9-300.6)	462	456.5 (414.9-498.1)	
PTSD	127	268.6 (221.9-315.3)	60	111.3 (83.1-139.4)	187	184.8 (158.3-211.3)	
Schizophrenia	32	67.7 (44.2-91.1)	57	105.7 (78.3-133.1)	89	87.9 (69.7-106.2)	
Suicidal Ideation	151	319.4 (268.4-370.3)	110	204.0 (165.9-242.1)	261	257.9 (226.6-289.2)	
2014		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	Rate
Anxiety	851	1,801.9 (1,680.8-1,923.0)	374	693.7 (623.4-764.0)	1,225	1,211.1 (1,143.3-1,279.0)	
Depression	836	1,770.1 (1,650.1-1,890.1)	315	584.2 (519.7-648.8)	1,151	1,138.0 (1,072.2-1,203.7)	
Bipolar Disorder	255	539.9 (473.7-606.2)	91	168.8 (134.1-203.5)	346	342.1 (306.0-378.1)	
PTSD	38	80.5 (54.9-106.0)	33	61.2 (40.3-82.1)	71	70.2 (53.9-86.5)	
Schizophrenia	33	69.9 (46.0-93.7)	49	90.9 (65.4-116.3)	82	81.1 (63.5-98.6)	
Suicidal Ideation	194	410.8 (353.0-468.6)	149	276.4 (232.0-320.7)	343	339.1 (303.2-375.0)	

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

2015		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	1,104	2,331.5 (2,193.9-2,469.0)	490	915.2 (834.2-996.3)	1,594	1,579.9 (1,502.4-1,657.5)	
Depression	928	1,959.8 (1,833.7-2,085.9)	398	743.4 (670.3-816.4)	1,326	1,314.3 (1,243.5-1,385.0)	
Bipolar Disorder	267	563.9 (496.2-631.5)	145	270.8 (226.7-314.9)	412	408.4 (368.9-447.8)	
PTSD	78	164.7 (128.2-201.3)	29	54.2 (34.5-73.9)	107	106.1 (86.0-126.2)	
Schizophrenia	28	59.1 (37.2-81.0)	56	104.6 (77.2-132.0)	84	83.3 (65.5-101.1)	
Suicidal Ideation	144	304.1 (254.4-353.8)	128	239.1 (197.7-280.5)	272	269.6 (237.6-301.6)	

2016		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	1,337	2,811.2 (2,660.5-2,961.9)	558	1,040.7 (954.4-1,127.1)	1,895	1,873.0 (1,788.6-1,957.3)	
Depression	1,040	2,186.7 (2,053.8-2,319.6)	430	802.0 (726.2-877.8)	1,470	1,452.9 (1,378.6-1,527.2)	
Bipolar Disorder	250	525.7 (460.5-590.8)	130	242.5 (200.8-284.1)	380	375.6 (337.8-413.3)	
PTSD	75	157.7 (122.0-193.4)	49	91.4 (65.8-117.0)	124	122.6 (101.0-144.1)	
Schizophrenia	49	103.0 (74.2-131.9)	58	108.2 (80.3-136.0)	107	105.8 (85.7-125.8)	
Suicidal Ideation	141	296.5 (247.5-345.4)	122	227.5 (187.2-267.9)	263	259.9 (228.5-291.4)	

2017		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	1,965	4,112.2 (3,930.3-4,294.0)	702	1,309.4 (1,212.5-1,406.2)	2,668	2,631.2 (2,531.3-2,731.0)	
Depression	1,607	3,363.0 (3,198.6-3,527.4)	570	1,063.2 (975.9-1,150.4)	2,177	2,147.0 (2,056.8-2,237.2)	
Bipolar Disorder	348	728.3 (651.7-804.8)	156	291.0 (245.3-336.6)	504	497.0 (453.7-540.4)	
PTSD	165	345.3 (292.6-398.0)	80	149.2 (116.5-181.9)	245	241.6 (211.4-271.9)	
Schizophrenia	47	98.4 (70.2-126.5)	93	173.5 (138.2-208.7)	140	138.1 (115.2-160.9)	
Suicidal Ideation	190	397.6 (341.1-454.2)	166	309.6 (262.5-356.7)	356	351.1 (314.6-387.6)	

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 5. Counts and Crude Rates of Selected Behavioral Health-Related Inpatient Admissions by Gender, Nevada Residents, 2009-2017.

2009		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	119	269.8 (221.3-318.2)	67	132.5 (100.8-164.3)	186	196.5 (168.2-224.7)	
Depression	222	503.3 (437.0-569.5)	121	239.4 (196.7-282.0)	343	362.3 (324.0-400.7)	
Bipolar Disorder	72	163.2 (125.5-200.9)	27	53.4 (33.3-73.6)	99	104.6 (84.0-125.2)	
PTSD	23	52.1 (30.8-73.4)	9	17.8 (6.2-29.4)	32	33.8 (22.1-45.5)	
Schizophrenia	14	31.7 (15.1-48.4)	11	21.8 (8.9-34.6)	25	26.4 (16.1-36.8)	
Suicidal Ideation	12	27.2 (11.8-42.6)	6	11.9 (2.4-21.4)	18	19.0 (10.2-27.8)	

2010		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	151	339.1 (285.0-393.2)	58	113.6 (84.4-142.9)	209	218.7 (189.0-248.3)	
Depression	289	649.0 (574.2-723.8)	118	231.2 (189.5-272.9)	407	425.8 (384.5-467.2)	
Bipolar Disorder	101	226.8 (182.6-271.0)	43	84.2 (59.1-109.4)	144	150.7 (126.1-175.3)	
PTSD	36	80.8 (54.4-107.3)	9	17.6 (6.1-29.2)	45	47.1 (33.3-60.8)	
Schizophrenia	18	40.4 (21.7-59.1)	6	11.8 (2.3-21.2)	24	25.1 (15.1-35.2)	
Suicidal Ideation	39	87.6 (60.1-115.1)	19	37.2 (20.5-54.0)	58	60.7 (45.1-76.3)	

2011		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	233	512.8 (447.0-578.7)	93	180.0 (143.4-216.5)	326	335.7 (299.3-372.1)	
Depression	342	752.7 (672.9-832.5)	153	296.1 (249.2-343.0)	495	509.7 (464.8-554.6)	
Bipolar Disorder	88	193.7 (153.2-234.1)	51	98.7 (71.6-125.8)	139	143.1 (119.3-166.9)	
PTSD	50	110.0 (79.5-140.5)	19	36.8 (20.2-53.3)	69	71.1 (54.3-87.8)	
Schizophrenia	19	41.8 (23.0-60.6)	18	34.8 (18.7-50.9)	37	38.1 (25.8-50.4)	
Suicidal Ideation	77	169.5 (131.6-207.3)	40	77.4 (53.4-101.4)	117	120.5 (98.6-142.3)	

2012		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	235	507.1 (442.3-572.0)	140	276.9 (231.1-322.8)	375	377.1 (338.9-415.3)	
Depression	360	776.9 (696.6-857.1)	192	379.8 (326.1-433.5)	552	555.1 (508.8-601.4)	
Bipolar Disorder	93	200.7 (159.9-241.5)	58	114.7 (85.2-144.3)	151	151.8 (127.6-176.1)	
PTSD	41	88.5 (61.4-115.6)	26	51.4 (31.7-71.2)	67	67.4 (51.2-83.5)	
Schizophrenia	29	62.6 (39.8-85.4)	33	65.3 (43.0-87.6)	62	62.3 (46.8-77.9)	
Suicidal Ideation	82	177.0 (138.7-215.3)	81	160.2 (125.3-195.1)	163	163.9 (138.7-189.1)	

2013		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	287	607.0 (536.8-677.3)	126	233.7 (192.9-274.5)	413	408.1 (368.7-447.4)	
Depression	420	888.3 (803.4-973.3)	188	348.6 (298.8-398.5)	608	600.8 (553.0-648.5)	
Bipolar Disorder	110	232.7 (189.2-276.1)	47	87.2 (62.2-112.1)	157	155.1 (130.9-179.4)	
PTSD	78	165.0 (128.4-201.6)	27	50.1 (31.2-69.0)	105	103.7 (83.9-123.6)	
Schizophrenia	22	46.5 (27.1-66.0)	30	55.6 (35.7-75.5)	52	51.4 (37.4-65.3)	
Suicidal Ideation	148	313.0 (262.6-363.5)	68	126.1 (96.1-156.1)	216	213.4 (185.0-241.9)	

2014		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	314	664.9 (591.3-738.4)	166	307.9 (261.0-354.7)	480	474.6 (432.1-517.0)	
Depression	451	954.9 (866.8-1,043.1)	219	406.2 (352.4-460.0)	670	662.4 (612.3-712.6)	
Bipolar Disorder	128	271.0 (224.1-318.0)	61	113.1 (84.7-141.5)	189	186.9 (160.2-213.5)	
PTSD	62	131.3 (98.6-164.0)	23	42.7 (25.2-60.1)	85	84.0 (66.2-101.9)	
Schizophrenia	22	46.6 (27.1-66.0)	34	63.1 (41.9-84.3)	56	55.4 (40.9-69.9)	
Suicidal Ideation	150	317.6 (266.8-368.4)	104	192.9 (155.8-230.0)	254	251.1 (220.2-282.0)	

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

2015		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	304	642.0 (569.8-714.2)	152	283.9 (238.8-329.0)	456	452.0 (410.5-493.5)	
Depression	363	766.6 (687.7-845.5)	198	369.8 (318.3-421.3)	561	556.0 (510.0-602.1)	
Bipolar Disorder	93	196.4 (156.5-236.3)	33	61.6 (40.6-82.7)	126	124.9 (103.1-146.7)	
PTSD	48	101.4 (72.7-130.0)	32	59.8 (39.1-80.5)	80	79.3 (61.9-96.7)	
Schizophrenia	21	44.3 (25.4-63.3)	22	41.1 (23.9-58.3)	43	42.6 (29.9-55.4)	
Suicidal Ideation	99	209.1 (167.9-250.3)	68	127.0 (96.8-157.2)	167	165.5 (140.4-190.6)	

2016		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	343	721.2 (644.9-797.5)	172	320.8 (272.9-368.7)	515	509.0 (465.1-553.0)	
Depression	427	897.8 (812.7-983.0)	200	373.0 (321.3-424.7)	627	619.7 (571.2-668.2)	
Bipolar Disorder	72	151.4 (116.4-186.4)	30	56.0 (35.9-76.0)	102	100.8 (81.2-120.4)	
PTSD	55	115.6 (85.1-146.2)	37	69.0 (46.8-91.2)	92	90.9 (72.3-109.5)	
Schizophrenia	11	23.1 (9.5-36.8)	16	29.8 (15.2-44.5)	27	26.7 (16.6-36.8)	
Suicidal Ideation	71	149.3 (114.6-184.0)	42	78.3 (54.6-102.0)	113	111.7 (91.1-132.3)	

2017		Female		Male		Total	
Condition	N.	Rate	N.	Rate	N.	Rate	
Anxiety	345	722.0 (645.8-798.2)	197	367.4 (316.1-418.8)	542	534.5 (489.5-579.5)	
Depression	404	845.5 (763.0-927.9)	197	367.4 (316.1-418.8)	601	592.7 (545.3-640.1)	
Bipolar Disorder	76	159.0 (123.3-194.8)	46	85.8 (61.0-110.6)	122	120.3 (99.0-141.7)	
PTSD	61	127.7 (95.6-159.7)	18	33.6 (18.1-49.1)	79	77.9 (60.7-95.1)	
Schizophrenia	12	25.1 (10.9-39.3)	14	26.1 (12.4-39.8)	26	25.6 (15.8-35.5)	
Suicidal Ideation	80	167.4 (130.7-204.1)	68	126.8 (96.7-157.0)	148	146.0 (122.4-169.5)	

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 6. Demographics of State Funded Mental Health Clinics Utilization*, 2011-2017.

	2011	2012	2013	2014	2015	2016	2017
Female	714	612	528	655	716	712	795
Male	473	401	365	464	504	518	506
Unknown	2	7	10	4	1	1	0
White	872	744	642	695	709	635	656
Black	7	5	6	8	10	7	7
Hispanic	125	105	90	88	98	87	65
Asian	7	5	2	2	1	3	5
American Indian/Alaskan	44	39	34	38	34	29	45
Native Hawaiian/Pacific Islander	1	4	1	0	0	1	1
More than 1 race reported	30	22	15	12	13	14	8
0-14	161	136	124	143	135	146	176
15-17	85	65	63	85	104	99	110
18-19	47	31	28	37	35	46	55
20-24	109	105	87	118	131	115	112
25-34	244	208	201	232	239	277	277
35-44	194	175	155	197	207	198	203
45-54	213	159	135	175	188	169	177
55-64	103	104	86	101	136	143	143
65-74	25	29	16	23	34	32	39
75-84	3	4	8	5	5	5	7
>84	1	3	0	0	2	0	0
Unknown	4	1	0	7	5	1	2
Total	1,189	1,020	903	1,123	1,221	1,231	1,301

Source: Division of Public and Behavioral Health, Avatar.

*Clients are counted once per year.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7a. Alcohol and Drug-Related Emergency Department Encounters by Year, 2009.

2009						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	193	32%	437.5 (375.8-499.2)	200	56%	453.4 (390.5-516.2)
Male	402	68%	795.2 (717.5-872.9)	159	44%	314.5 (265.6-363.4)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	437	73%	627.9 (569.1-686.8)	299	83%	429.6 (380.9-478.3)
Black	2	0%	162.0 (0.0-386.5)	3	1%	243.0 (0.0-518.0)
Native American	85	14%	1,938.1 (1,526.1-2,350.2)	21	6%	478.8 (274.0-683.6)
Asian/Pacific	1	0%	111.7 (0.0-330.7)	0	0%	-
Hispanic	56	9%	301.8 (222.7-380.8)	30	8%	161.7 (103.8-219.5)
Other/Unknown	15	3%		6	2%	
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	4	1%	20.1 (0.4-39.8)	33	9%	166.0 (109.3-222.6)
15-17	18	3%	363.2 (195.4-531.0)	15	4%	302.7 (149.5-455.8)
18-19	14	2%	429.1 (204.3-653.9)	14	4%	429.1 (204.3-653.9)
20-24	70	12%	773.7 (592.4-955.0)	39	11%	431.1 (295.8-566.4)
25-34	110	18%	1,323.0 (1,075.8-1,570.3)	74	21%	890.0 (687.2-1,092.8)
35-44	130	22%	960.6 (795.5-1,125.7)	60	17%	443.3 (331.2-555.5)
45-54	139	23%	946.9 (789.5-1,104.4)	66	18%	449.6 (341.1-558.1)
55-64	80	13%	719.2 (561.6-876.8)	38	11%	341.6 (233.0-450.2)
65-74	25	4%	382.4 (232.5-532.3)	13	4%	198.9 (90.8-307.0)
75-84	6	1%	255.5 (51.1-459.9)	5	1%	212.9 (26.3-399.5)
85+	0	0%	-	2	1%	204.0 (0.0-486.6)
Total	596		629.6 (579.0-680.1)	359		379.2 (340.0-418.5)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7b. Alcohol and Drug-Related Emergency Department Encounters by Year, 2010.

2010						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	187	31%	419.9 (359.7-480.1)	242	58%	543.4 (475.0-611.9)
Male	417	69%	816.9 (738.5-895.3)	172	41%	336.9 (286.6-387.3)
Unknown	1	0%	-	1	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	475	79%	678.5 (617.5-739.5)	351	85%	501.4 (448.9-553.8)
Black	1	0%	81.2 (0.0-240.4)	4	1%	324.8 (6.5-643.1)
Native American	70	12%	1,577.7 (1,208.1-1,947.3)	23	6%	518.4 (306.5-730.2)
Asian/Pacific	0	0%	-	0	0%	-
Hispanic	46	8%	242.4 (172.3-312.4)	31	7%	163.3 (105.8-220.8)
Other/Unknown	13	2%	-	6	1%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	4	1%	20.2 (0.4-40.1)	40	10%	202.4 (139.7-265.1)
15-17	14	2%	277.5 (132.1-422.9)	16	4%	317.2 (161.7-472.6)
18-19	17	3%	536.1 (281.2-790.9)	11	3%	346.9 (141.9-551.8)
20-24	66	11%	703.4 (533.7-873.0)	37	9%	394.3 (267.3-521.4)
25-34	107	18%	1,249.3 (1,012.6-1,486.1)	125	30%	1,459.5 (1,203.7-1,715.4)
35-44	141	23%	1,090.1 (910.2-1,270.1)	63	15%	487.1 (366.8-607.4)
45-54	145	24%	971.2 (813.1-1,129.3)	64	15%	428.7 (323.7-533.7)
55-64	64	11%	550.4 (415.5-685.2)	46	11%	395.6 (281.3-509.9)
65-74	39	6%	584.8 (401.2-768.3)	7	2%	105.0 (27.2-182.7)
75-84	6	1%	241.3 (48.2-434.4)	4	1%	160.9 (3.2-318.5)
85+	2	0%	200.1 (0.0-477.3)	2	0%	200.1 (0.0-477.3)
Total	605		633.0 (582.6-683.4)	415		434.2 (392.4-476.0)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7c. Alcohol and Drug-Related Emergency Department Encounters by Year, 2011.

2011						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	269	33%	592.0 (521.3-662.8)	257	58%	565.6 (496.5-634.8)
Male	539	67%	1,043.0 (955.0-1,131.1)	184	42%	356.1 (304.6-407.5)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	590	73%	828.0 (761.2-894.8)	370	84%	519.2 (466.3-572.1)
Black	5	1%	345.8 (42.7-648.9)	1	0%	69.2 (0.0-204.7)
Native American	111	14%	2,455.1 (1,998.4-2,911.9)	25	6%	553.0 (336.2-769.7)
Asian/Pacific	0	0%	-	1	0%	103.0 (0.0-304.9)
Hispanic	85	11%	449.4 (353.8-544.9)	33	7%	174.5 (114.9-234.0)
Other/Unknown	17	2%	-	11	2%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	2	0%	10.5 (0.0-25.1)	43	10%	226.3 (158.7-294.0)
15-17	14	2%	276.3 (131.6-421.1)	16	4%	315.8 (161.1-470.6)
18-19	21	3%	515.1 (294.8-735.4)	15	3%	367.9 (181.7-554.1)
20-24	82	10%	850.2 (666.2-1,034.3)	55	12%	570.3 (419.6-721.0)
25-34	205	25%	2,094.4 (1,807.7-2,381.1)	119	27%	1,215.8 (997.3-1,434.2)
35-44	143	18%	1,148.0 (959.9-1,336.2)	64	15%	513.8 (387.9-639.7)
45-54	193	24%	1,312.7 (1,127.5-1,497.9)	67	15%	455.7 (346.6-564.8)
55-64	90	11%	760.8 (603.6-918.0)	39	9%	329.7 (226.2-433.2)
65-74	48	6%	718.3 (515.1-921.5)	11	2%	164.6 (67.3-261.9)
75-84	10	1%	357.4 (135.9-579.0)	11	2%	393.2 (160.8-625.5)
85+	0	0%	-	1	0%	93.5 (0.0-276.9)
Total	808		832.0 (774.7-889.4)	441		454.1 (411.7-496.5)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7d. Alcohol and Drug-Related Emergency Department Encounters by Year, 2012.

2012						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	333	35%	718.6 (641.4-795.8)	296	56%	638.8 (566.0-711.5)
Male	623	65%	1,173.1 (1,081.0-1,265.2)	232	44%	436.9 (380.6-493.1)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	701	73%	958.8 (887.8-1,029.8)	442	84%	604.5 (548.2-660.9)
Black	7	1%		4	1%	
Native American	94	10%	2,035.5 (1,624.0-2,446.9)	30	6%	649.6 (417.2-882.1)
Asian/Pacific	1	0%	102.5 (0.0-303.4)	1	0%	102.5 (0.0-303.4)
Hispanic	75	8%	389.9 (301.6-478.1)	27	5%	140.4 (87.4-193.3)
Other/Unknown	77	8%	-	23	4%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	5	1%	27.3 (3.4-51.2)	49	9%	267.3 (192.5-342.2)
15-17	21	2%	417.2 (238.8-595.7)	25	5%	496.7 (302.0-691.4)
18-19	18	2%	389.4 (209.5-569.3)	22	4%	476.0 (277.1-674.8)
20-24	76	8%	734.5 (569.4-899.7)	52	10%	502.6 (366.0-639.2)
25-34	242	25%	2,162.0 (1,889.6-2,434.4)	155	29%	1,384.7 (1,166.7-1,602.7)
35-44	201	21%	1,668.9 (1,438.2-1,899.6)	75	14%	622.7 (481.8-763.7)
45-54	214	22%	1,472.7 (1,275.4-1,670.1)	85	16%	585.0 (460.6-709.3)
55-64	110	12%	910.3 (740.1-1,080.4)	42	8%	347.6 (242.4-452.7)
65-74	53	6%	730.3 (533.7-926.9)	18	3%	248.0 (133.4-362.6)
75-84	13	1%	449.8 (205.3-694.3)	4	1%	138.4 (2.8-274.0)
85+	3	0%	269.5 (0.0-574.5)	1	0%	89.8 (0.0-265.9)
Total	955		960.3 (899.4-1,021.2)	527		529.9 (484.7-575.2)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7e. Alcohol and Drug-Related Emergency Department Encounters by Year, 2013.

2013						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	414	35%	875.6 (791.3-960.0)	349	55%	738.2 (660.7-815.6)
Male	774	65%	1,435.3 (1,334.2-1,536.4)	281	45%	521.1 (460.2-582.0)
Unknown	0	0%	-	1	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	892	75%	1,197.2 (1,118.7-1,275.8)	508	81%	681.8 (622.5-741.1)
Black	14	1%	946.2 (450.6-1,441.9)	11	2%	743.4 (304.1-1,182.8)
Native American	145	12%	3,070.8 (2,570.9-3,570.6)	63	10%	1,334.2 (1,004.7-1,663.7)
Asian/Pacific	1	0%	99.9 (0.0-295.7)	3	0%	299.7 (0.0-638.9)
Hispanic	22	2%	112.8 (65.7-160.0)	12	2%	61.5 (26.7-96.4)
Other/Unknown	114	10%	-	34	5%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	1	0%	5.5 (0.0-16.2)	33	5%	181.0 (119.3-242.8)
15-17	11	1%	228.8 (93.6-364.1)	20	3%	416.1 (233.7-598.4)
18-19	16	1%	336.6 (171.7-501.5)	26	4%	547.0 (336.7-757.2)
20-24	89	7%	808.9 (640.9-977.0)	72	11%	654.4 (503.2-805.6)
25-34	319	27%	2,617.0 (2,329.8-2,904.2)	195	31%	1,599.7 (1,375.2-1,824.2)
35-44	184	15%	1,605.2 (1,373.2-1,837.1)	121	19%	1,055.6 (867.5-1,243.6)
45-54	296	25%	2,113.8 (1,873.0-2,354.6)	76	12%	542.7 (420.7-664.8)
55-64	161	14%	1,275.4 (1,078.4-1,472.5)	53	8%	419.9 (306.8-532.9)
65-74	87	7%	1,074.8 (848.9-1,300.6)	25	4%	308.8 (187.8-429.9)
75-84	18	2%	617.9 (332.4-903.3)	8	1%	274.6 (84.3-464.9)
85+	6	1%	532.2 (106.4-958.1)	2	0%	177.4 (0.0-423.3)
Total	1,188		1,173.9 (1,107.1-1,240.6)	631		623.5 (574.8-672.1)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7f. Alcohol and Drug-Related Emergency Department Encounters by Year, 2014.

2014						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	331	30%	700.9 (625.3-776.4)	424	57%	897.8 (812.3-983.2)
Male	760	70%	1,409.6 (1,309.4-1,509.8)	322	43%	680.0 (605.7-754.3)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	786	72%	1,061.8 (987.5-1,136.0)	588	79%	794.3 (730.1-858.5)
Black	9	1%	599.4 (207.8-991.0)	7	1%	466.2 (120.8-811.6)
Native American	149	14%	3,155.5 (2,648.8-3,662.2)	81	11%	1,715.4 (1,341.8-2,089.0)
Asian/Pacific	1	0%	95.9 (0.0-283.8)	3	0%	287.6 (0.0-613.1)
Hispanic	8	1%	40.3 (12.4-68.2)	14	2%	70.5 (33.6-107.5)
Other/Unknown	138	13%	-	53	7%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	3	0%	16.4 (0.0-34.9)	43	6%	234.9 (164.7-305.1)
15-17	16	1%	361.1 (184.2-538.1)	31	4%	699.7 (453.4-946.0)
18-19	15	1%	438.0 (216.3-659.6)	24	3%	700.7 (420.4-981.1)
20-24	78	7%	653.3 (508.3-798.3)	107	14%	896.2 (726.4-1,066.0)
25-34	233	21%	1,780.0 (1,551.4-2,008.5)	201	27%	1,535.5 (1,323.2-1,747.8)
35-44	230	21%	2,129.1 (1,854.0-2,404.3)	128	17%	1,184.9 (979.6-1,390.2)
45-54	236	22%	1,702.6 (1,485.4-1,919.8)	93	12%	670.9 (534.6-807.3)
55-64	190	17%	1,531.1 (1,313.3-1,748.8)	82	11%	660.8 (517.7-803.8)
65-74	73	7%	833.2 (642.0-1,024.3)	25	3%	285.3 (173.5-397.2)
75-84	12	1%	394.4 (171.2-617.6)	8	1%	262.9 (80.7-445.1)
85+	5	0%	464.4 (57.3-871.5)	4	1%	371.6 (7.4-735.7)
Total	1,091		1,078.6 (1,014.6-1,142.7)	746		737.6 (684.6-790.5)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7g. Alcohol and Drug-Related Emergency Department Encounters by Year, 2015.

2015						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	470	37%	992.6 (902.8-1,082.3)	397	54%	838.4 (755.9-920.9)
Male	816	63%	1,524.1 (1,419.5-1,628.7)	334	46%	623.8 (556.9-690.7)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	946	74%	1,307.1 (1,223.8-1,390.4)	599	82%	827.7 (761.4-894.0)
Black	11	1%	710.7 (290.7-1,130.7)	10	1%	646.1 (245.6-1,046.5)
Native American	191	15%	3,760.1 (3,226.9-4,293.4)	62	8%	1,220.6 (916.7-1,524.4)
Asian/Pacific	1	0%	85.2 (0.0-252.2)	2	0%	170.4 (0.0-406.5)
Hispanic	10	1%	48.3 (18.4-78.2)	14	2%	67.6 (32.2-103.0)
Other/Unknown	127	10%	-	44	6%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	2	0%	11.3 (0.0-26.8)	35	5%	196.9 (131.7-262.1)
15-17	9	1%	206.7 (71.7-341.8)	23	3%	528.3 (312.4-744.2)
18-19	13	1%	424.2 (193.6-654.8)	20	3%	652.6 (366.6-938.7)
20-24	80	6%	739.4 (577.3-901.4)	108	15%	998.1 (809.9-1,186.4)
25-34	287	22%	1,897.4 (1,677.9-2,117.0)	206	28%	1,361.9 (1,175.9-1,547.9)
35-44	223	17%	2,162.4 (1,878.6-2,446.2)	125	17%	1,212.1 (999.6-1,424.6)
45-54	342	27%	2,526.1 (2,258.3-2,793.8)	122	17%	901.1 (741.2-1,061.0)
55-64	221	17%	1,833.1 (1,591.5-2,074.8)	60	8%	497.7 (371.8-623.6)
65-74	82	6%	894.0 (700.5-1,087.4)	22	3%	239.8 (139.6-340.1)
75-84	21	2%	600.6 (343.7-857.4)	7	1%	200.2 (51.9-348.5)
85+	6	0%	510.9 (102.1-919.8)	3	0%	255.5 (0.0-544.6)
Total	1,286		1,274.6 (1,205.0-1,344.3)	731		724.5 (672.0-777.1)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7h. Alcohol and Drug-Related Emergency Department Encounters by Year, 2016.

2016						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	380	33%	799.0 (718.7-879.3)	434	57%	912.5 (826.7-998.4)
Male	771	67%	1,438.0 (1,336.5-1,539.5)	325	43%	606.2 (540.3-672.1)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	869	75%	1,201.6 (1,121.7-1,281.5)	593	78%	820.0 (754.0-886.0)
Black	6	1%	380.7 (76.1-685.3)	12	2%	761.4 (330.6-1,192.2)
Native American	153	13%	3,010.0 (2,533.1-3,487.0)	70	9%	1,377.1 (1,054.5-1,699.8)
Asian/Pacific	3	0%	256.2 (0.0-546.1)	1	0%	85.4 (0.0-252.8)
Hispanic	16	1%	76.1 (38.8-113.4)	18	2%	85.6 (46.1-125.2)
Other/Unknown	104	9%	-	65	9%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	8	1%	45.2 (13.9-76.5)	24	3%	135.6 (81.4-189.9)
15-17	12	1%	304.4 (132.2-476.7)	39	5%	989.3 (678.8-1,299.9)
18-19	13	1%	414.8 (189.3-640.3)	34	4%	1,084.9 (720.2-1,449.5)
20-24	68	6%	646.0 (492.5-799.6)	84	11%	798.0 (627.4-968.7)
25-34	223	19%	1,374.4 (1,194.0-1,554.8)	223	29%	1,374.4 (1,194.0-1,554.8)
35-44	200	17%	2,015.9 (1,736.5-2,295.3)	137	18%	1,380.9 (1,149.7-1,612.1)
45-54	275	24%	2,071.9 (1,827.0-2,316.8)	97	13%	730.8 (585.4-876.2)
55-64	240	21%	1,958.1 (1,710.3-2,205.8)	82	11%	669.0 (524.2-813.8)
65-74	93	8%	1,008.1 (803.2-1,213.0)	23	3%	249.3 (147.4-351.2)
75-84	16	1%	417.4 (212.9-622.0)	12	2%	313.1 (135.9-490.2)
85+	3	0%	262.2 (0.0-559.0)	4	1%	349.7 (7.0-692.3)
Total	1,151		1,137.6 (1,071.9-1,203.3)	759		750.2 (696.8-803.5)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 7i. Alcohol and Drug-Related Emergency Department Encounters by Year, 2017.

2017						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	435	41%	910.3 (824.8-995.9)	545	54%	1,140.5 (1,044.8-1,236.3)
Male	627	59%	1,169.5 (1,077.9-1,261.0)	457	46%	852.4 (774.2-930.5)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	813	77%	1,122.5 (1,045.4-1,199.7)	826	82%	1,140.5 (1,062.7-1,218.3)
Black	6	1%	381.9 (76.3-687.5)	19	2%	1,209.4 (665.6-1,753.2)
Native American	153	14%	3,001.2 (2,525.6-3,476.7)	64	6%	1,255.4 (947.8-1,563.0)
Asian/Pacific	1	0%	85.8 (0.0-253.9)	3	0%	257.3 (0.0-548.4)
Hispanic	8	1%	37.8 (11.6-64.1)	24	2%	113.5 (68.1-159.0)
Other/Unknown	81	8%	-	66	7%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	7	1%	39.8 (10.3-69.2)	29	3%	164.7 (104.8-224.6)
15-17	16	2%	437.0 (222.9-651.2)	34	3%	928.7 (616.5-1,240.9)
18-19	20	2%	620.5 (348.6-892.5)	32	3%	992.9 (648.9-1,336.9)
20-24	52	5%	547.4 (398.6-696.1)	122	12%	1,284.2 (1,056.3-1,512.1)
25-34	216	20%	1,213.8 (1,051.9-1,375.7)	307	31%	1,725.2 (1,532.2-1,918.2)
35-44	168	16%	1,727.5 (1,466.3-1,988.7)	160	16%	1,645.2 (1,390.3-1,900.2)
45-54	240	23%	1,834.7 (1,602.6-2,066.8)	164	16%	1,253.7 (1,061.8-1,445.6)
55-64	218	21%	1,779.2 (1,543.0-2,015.3)	95	9%	775.3 (619.4-931.2)
65-74	95	9%	1,043.8 (833.9-1,253.7)	41	4%	450.5 (312.6-588.4)
75-84	26	2%	603.9 (371.8-836.1)	13	1%	302.0 (137.8-466.1)
85+	3	0%	261.6 (0.0-557.5)	5	0%	435.9 (53.8-818.0)
Total	1,062		1,047.3 (984.4-1,110.3)	1,002		988.2 (927.0-1,049.4)

Source: Hospital Emergency Department Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8a. Alcohol and Drug-Related Inpatient Admissions by Year, 2009.

2009						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	94	32%	213.1 (170.0-256.2)	89	61%	201.8 (159.8-243.7)
Male	197	68%	389.7 (335.3-444.1)	56	39%	110.8 (81.8-139.8)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	437	73%	627.9 (569.1-686.8)	299	83%	429.6 (380.9-478.3)
Black	2	0%	162.0 (0.0-386.5)	3	1%	243.0 (0.0-518.0)
Native American	85	14%	1,938.1 (1,526.1-2,350.2)	21	6%	478.8 (274.0-683.6)
Asian/Pacific	1	0%	111.7 (0.0-330.7)	0	0%	-
Hispanic	56	9%	301.8 (222.7-380.8)	30	8%	161.7 (103.8-219.5)
Other/Unknown	15	3%	-	6	2%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	4	1%	20.1 (0.4-39.8)	33	9%	166.0 (109.3-222.6)
15-17	18	3%	363.2 (195.4-531.0)	15	4%	302.7 (149.5-455.8)
18-19	14	2%	429.1 (204.3-653.9)	14	4%	429.1 (204.3-653.9)
20-24	70	12%	773.7 (592.4-955.0)	39	11%	431.1 (295.8-566.4)
25-34	110	18%	1,323.0 (1,075.8-1,570.3)	74	21%	890.0 (687.2-1,092.8)
35-44	130	22%	960.6 (795.5-1,125.7)	60	17%	443.3 (331.2-555.5)
45-54	139	23%	946.9 (789.5-1,104.4)	66	18%	449.6 (341.1-558.1)
55-64	80	13%	719.2 (561.6-876.8)	38	11%	341.6 (233.0-450.2)
65-74	25	4%	382.4 (232.5-532.3)	13	4%	198.9 (90.8-307.0)
75-84	6	1%	255.5 (51.1-459.9)	5	1%	212.9 (26.3-399.5)
85+	0	0%	-	2	1%	204.0 (0.0-486.6)
Total	596		629.6 (579.0-680.1)	359		379.2 (340.0-418.5)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8b. Alcohol and Drug-Related Inpatient Admissions by Year, 2010.

2010						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	129	37%	289.7 (239.7-339.7)	142	63%	318.9 (266.4-371.3)
Male	223	63%	436.9 (379.5-494.2)	83	37%	162.6 (127.6-197.6)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	475	79%	678.5 (617.5-739.5)	31	7%	44.3 (28.7-59.9)
Black	1	0%	81.2 (0.0-240.4)	351	85%	28,501.1 (25,519.4-31,482.8)
Native American	70	12%	1,577.7 (1,208.1-1,947.3)	23	6%	518.4 (306.5-730.2)
Asian/Pacific	0	0%	-	4	1%	434.5 (8.7-860.3)
Hispanic	46	8%	242.4 (172.3-312.4)	5	1%	26.3 (3.3-49.4)
Other/Unknown	13	2%	-	1	0%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	4	1%	20.2 (0.4-40.1)	40	10%	202.4 (139.7-265.1)
15-17	14	2%	277.5 (132.1-422.9)	16	4%	317.2 (161.7-472.6)
18-19	17	3%	536.1 (281.2-790.9)	11	3%	346.9 (141.9-551.8)
20-24	66	11%	703.4 (533.7-873.0)	37	9%	394.3 (267.3-521.4)
25-34	107	18%	1,249.3 (1,012.6-1,486.1)	125	30%	1,459.5 (1,203.7-1,715.4)
35-44	141	23%	1,090.1 (910.2-1,270.1)	63	15%	487.1 (366.8-607.4)
45-54	145	24%	971.2 (813.1-1,129.3)	64	15%	428.7 (323.7-533.7)
55-64	64	11%	550.4 (415.5-685.2)	46	11%	395.6 (281.3-509.9)
65-74	39	6%	584.8 (401.2-768.3)	7	2%	105.0 (27.2-182.7)
75-84	6	1%	241.3 (48.2-434.4)	4	1%	160.9 (3.2-318.5)
85+	2	0%	200.1 (0.0-477.3)	2	0%	200.1 (0.0-477.3)
Total	605		639.1 (588.2-0.0)	415		434.2 (392.4-476.0)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8c. Alcohol and Drug-Related Inpatient Admissions by Year, 2011.

2011						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	162	44%	356.5 (301.6-411.5)	144	58%	316.9 (265.2-368.7)
Male	203	56%	392.8 (338.8-446.9)	104	42%	201.3 (162.6-239.9)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	590	73%	828.0 (761.2-894.8)	370	84%	519.2 (466.3-572.1)
Black	5	1%	345.8 (42.7-648.9)	1	0%	69.2 (0.0-204.7)
Native American	111	14%	2,455.1 (1,998.4-2,911.9)	25	6%	553.0 (336.2-769.7)
Asian/Pacific	0	0%	-	1	0%	103.0 (0.0-304.9)
Hispanic	85	11%	449.4 (353.8-544.9)	33	7%	174.5 (114.9-234.0)
Other/Unknown	17	2%	-	11	2%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	2	0%	10.5 (0.0-25.1)	43	10%	226.3 (158.7-294.0)
15-17	14	2%	276.3 (131.6-421.1)	16	4%	315.8 (161.1-470.6)
18-19	21	3%	515.1 (294.8-735.4)	15	3%	367.9 (181.7-554.1)
20-24	82	10%	850.2 (666.2-1,034.3)	55	12%	570.3 (419.6-721.0)
25-34	205	25%	2,094.4 (1,807.7-2,381.1)	119	27%	1,215.8 (997.3-1,434.2)
35-44	143	18%	1,148.0 (959.9-1,336.2)	64	15%	513.8 (387.9-639.7)
45-54	193	24%	1,312.7 (1,127.5-1,497.9)	67	15%	455.7 (346.6-564.8)
55-64	90	11%	760.8 (603.6-918.0)	39	9%	329.7 (226.2-433.2)
65-74	48	6%	718.3 (515.1-921.5)	11	2%	164.6 (67.3-261.9)
75-84	10	1%	357.4 (135.9-579.0)	11	2%	393.2 (160.8-625.5)
85+	0	0%	-	1	0%	93.5 (0.0-276.9)
Total	808		832.0 (774.7-889.4)	441		454.1 (411.7-496.5)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8d. Alcohol and Drug-Related Inpatient Admissions by Year, 2012.

2012						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	143	35%	308.6 (258.0-359.2)	160	54%	345.3 (291.8-398.8)
Male	263	65%	495.2 (435.4-555.1)	134	46%	252.3 (209.6-295.0)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	701	73%	958.8 (887.8-1,029.8)	442	84%	604.5 (548.2-660.9)
Black	7	1%	466.1 (120.8-811.4)	4	1%	266.4 (5.3-527.4)
Native American	94	10%	2,035.5 (1,624.0-2,446.9)	30	6%	649.6 (417.2-882.1)
Asian/Pacific	1	0%	102.5 (0.0-303.4)	1	0%	102.5 (0.0-303.4)
Hispanic	75	8%	389.9 (301.6-478.1)	27	5%	140.4 (87.4-193.3)
Other/Unknown	77	8%	-	23	4%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	5	1%	27.3 (3.4-51.2)	49	9%	267.3 (192.5-342.2)
15-17	21	2%	417.2 (238.8-595.7)	25	5%	496.7 (302.0-691.4)
18-19	18	2%	389.4 (209.5-569.3)	22	4%	476.0 (277.1-674.8)
20-24	76	8%	734.5 (569.4-899.7)	52	10%	502.6 (366.0-639.2)
25-34	242	25%	2,162.0 (1,889.6-2,434.4)	155	29%	1,384.7 (1,166.7-1,602.7)
35-44	201	21%	1,668.9 (1,438.2-1,899.6)	75	14%	622.7 (481.8-763.7)
45-54	214	22%	1,472.7 (1,275.4-1,670.1)	85	16%	585.0 (460.6-709.3)
55-64	110	12%	910.3 (740.1-1,080.4)	42	8%	347.6 (242.4-452.7)
65-74	53	6%	730.3 (533.7-926.9)	18	3%	248.0 (133.4-362.6)
75-84	13	1%	449.8 (205.3-694.3)	4	1%	138.4 (2.8-274.0)
85+	3	0%	269.5 (0.0-574.5)	1	0%	89.8 (0.0-265.9)
Total	956		961.3 (900.4-1,022.3)	528		530.9 (485.7-576.2)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8e. Alcohol and Drug-Related Inpatient Admissions by Year, 2013.

2013						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	156	39%	330.0 (278.2-381.7)	208	67%	439.9 (380.2-499.7)
Male	245	61%	454.3 (397.4-511.2)	102	33%	189.1 (152.4-225.9)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	892	75%	1,197.2 (1,118.7-1,275.8)	508	81%	681.8 (622.5-741.1)
Black	14	1%	946.2 (450.6-1,441.9)	11	2%	743.4 (304.1-1,182.8)
Native American	145	12%	3,070.8 (2,570.9-3,570.6)	63	10%	1,334.2 (1,004.7-1,663.7)
Asian/Pacific	1	0%	99.9 (0.0-295.7)	3	0%	299.7 (0.0-638.9)
Hispanic	22	2%	112.8 (65.7-160.0)	12	2%	61.5 (26.7-96.4)
Other/Unknown	114	10%	-	34	5%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	1	0%	5.5 (0.0-16.2)	33	5%	181.0 (119.3-242.8)
15-17	11	1%	228.8 (93.6-364.1)	20	3%	416.1 (233.7-598.4)
18-19	16	1%	336.6 (171.7-501.5)	26	4%	547.0 (336.7-757.2)
20-24	89	7%	808.9 (640.9-977.0)	72	11%	654.4 (503.2-805.6)
25-34	319	27%	2,617.0 (2,329.8-2,904.2)	195	31%	1,599.7 (1,375.2-1,824.2)
35-44	184	15%	1,605.2 (1,373.2-1,837.1)	121	19%	1,055.6 (867.5-1,243.6)
45-54	296	25%	2,113.8 (1,873.0-2,354.6)	76	12%	542.7 (420.7-664.8)
55-64	161	14%	1,275.4 (1,078.4-1,472.5)	53	8%	419.9 (306.8-532.9)
65-74	87	7%	1,074.8 (848.9-1,300.6)	25	4%	308.8 (187.8-429.9)
75-84	18	2%	617.9 (332.4-903.3)	8	1%	274.6 (84.3-464.9)
85+	6	1%	532.2 (106.4-958.1)	2	0%	177.4 (0.0-423.3)
Total	1,188		1,173.9 (1,107.1-1,240.6)	631		623.5 (574.8-672.1)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8f. Alcohol and Drug-Related Inpatient Admissions by Year, 2014.

2014						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	192	37%	406.5 (349.0-464.0)	246	56%	520.9 (455.8-586.0)
Male	322	63%	597.2 (532.0-662.4)	192	44%	405.5 (348.1-462.8)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	786	72%	1,061.8 (987.5-1,136.0)	588	79%	794.3 (730.1-858.5)
Black	9	1%	599.4 (207.8-991.0)	7	1%	466.2 (120.8-811.6)
Native American	149	14%	3,155.5 (2,648.8-3,662.2)	81	11%	1,715.4 (1,341.8-2,089.0)
Asian/Pacific	1	0%	95.9 (0.0-283.8)	3	0%	287.6 (0.0-613.1)
Hispanic	8	1%	40.3 (12.4-68.2)	14	2%	70.5 (33.6-107.5)
Other/Unknown	138	13%	-	53	7%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	3	0%	16.4 (0.0-34.9)	43	6%	234.9 (164.7-305.1)
15-17	16	1%	361.1 (184.2-538.1)	31	4%	699.7 (453.4-946.0)
18-19	15	1%	438.0 (216.3-659.6)	24	3%	700.7 (420.4-981.1)
20-24	78	7%	653.3 (508.3-798.3)	107	14%	896.2 (726.4-1,066.0)
25-34	233	21%	1,780.0 (1,551.4-2,008.5)	201	27%	1,535.5 (1,323.2-1,747.8)
35-44	230	21%	2,129.1 (1,854.0-2,404.3)	128	17%	1,184.9 (979.6-1,390.2)
45-54	236	22%	1,702.6 (1,485.4-1,919.8)	93	12%	670.9 (534.6-807.3)
55-64	190	17%	1,531.1 (1,313.3-1,748.8)	82	11%	660.8 (517.7-803.8)
65-74	73	7%	833.2 (642.0-1,024.3)	25	3%	285.3 (173.5-397.2)
75-84	12	1%	394.4 (171.2-617.6)	8	1%	262.9 (80.7-445.1)
85+	5	0%	464.4 (57.3-871.5)	4	1%	371.6 (7.4-735.7)
Total	1,091		1,078.6 (1,014.6-1,142.7)	746		737.6 (684.6-790.5)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8g. Alcohol and Drug-Related Inpatient Admissions by Year, 2015.

2015						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	152	32%	321.0 (270.0-372.0)	215	62%	454.0 (393.4-514.7)
Male	317	68%	592.1 (526.9-657.3)	132	38%	246.5 (204.5-288.6)
Unknown	0	0%	0.0 (0.0-0.0)	0	0%	
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	946	74%	1,307.1 (1,223.8-1,390.4)	599	82%	827.7 (761.4-894.0)
Black	11	1%	710.7 (290.7-1,130.7)	10	1%	646.1 (245.6-1,046.5)
Native American	191	15%	3,760.1 (3,226.9-4,293.4)	62	8%	1,220.6 (916.7-1,524.4)
Asian/Pacific	1	0%	85.2 (0.0-252.2)	2	0%	170.4 (0.0-406.5)
Hispanic	10	1%	48.3 (18.4-78.2)	14	2%	67.6 (32.2-103.0)
Other/Unknown	127	10%	-	44	6%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	2	0%	11.3 (0.0-26.8)	35	5%	196.9 (131.7-262.1)
15-17	9	1%	206.7 (71.7-341.8)	23	3%	528.3 (312.4-744.2)
18-19	13	1%	424.2 (193.6-654.8)	20	3%	652.6 (366.6-938.7)
20-24	80	6%	739.4 (577.3-901.4)	108	15%	998.1 (809.9-1,186.4)
25-34	287	22%	1,897.4 (1,677.9-2,117.0)	206	28%	1,361.9 (1,175.9-1,547.9)
35-44	223	17%	2,162.4 (1,878.6-2,446.2)	125	17%	1,212.1 (999.6-1,424.6)
45-54	342	27%	2,526.1 (2,258.3-2,793.8)	122	17%	901.1 (741.2-1,061.0)
55-64	221	17%	1,833.1 (1,591.5-2,074.8)	60	8%	497.7 (371.8-623.6)
65-74	82	6%	894.0 (700.5-1,087.4)	22	3%	239.8 (139.6-340.1)
75-84	21	2%	600.6 (343.7-857.4)	7	1%	200.2 (51.9-348.5)
85+	6	0%	510.9 (102.1-919.8)	3	0%	255.5 (0.0-544.6)
Total	1,286		1,274.6 (1,205.0-1,344.3)	731		724.5 (672.0-777.1)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8h. Alcohol and Drug-Related Inpatient Admissions by Year, 2016.

2016						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	133	34%	279.6 (232.1-327.2)	222	60%	466.8 (405.4-528.2)
Male	253	66%	471.9 (413.7-530.0)	148	40%	276.0 (231.6-320.5)
Unknown	0	0%	0.0 (0.0-0.0)	0	0%	
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	869	75%	1,201.6 (1,121.7-1,281.5)	593	78%	820.0 (754.0-886.0)
Black	6	1%	380.7 (76.1-685.3)	12	2%	761.4 (330.6-1,192.2)
Native American	153	13%	3,010.0 (2,533.1-3,487.0)	70	9%	1,377.1 (1,054.5-1,699.8)
Asian/Pacific	3	0%	256.2 (0.0-546.1)	1	0%	85.4 (0.0-252.8)
Hispanic	16	1%	76.1 (38.8-113.4)	18	2%	85.6 (46.1-125.2)
Other/Unknown	104	9%	-	65	9%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	8	1%	45.2 (13.9-76.5)	24	3%	135.6 (81.4-189.9)
15-17	12	1%	304.4 (132.2-476.7)	39	5%	989.3 (678.8-1,299.9)
18-19	13	1%	414.8 (189.3-640.3)	34	4%	1,084.9 (720.2-1,449.5)
20-24	68	6%	646.0 (492.5-799.6)	84	11%	798.0 (627.4-968.7)
25-34	223	19%	1,374.4 (1,194.0-1,554.8)	223	29%	1,374.4 (1,194.0-1,554.8)
35-44	200	17%	2,015.9 (1,736.5-2,295.3)	137	18%	1,380.9 (1,149.7-1,612.1)
45-54	275	24%	2,071.9 (1,827.0-2,316.8)	97	13%	730.8 (585.4-876.2)
55-64	240	21%	1,958.1 (1,710.3-2,205.8)	82	11%	669.0 (524.2-813.8)
65-74	93	8%	1,008.1 (803.2-1,213.0)	23	3%	249.3 (147.4-351.2)
75-84	16	1%	417.4 (212.9-622.0)	12	2%	313.1 (135.9-490.2)
85+	3	0%	262.2 (0.0-559.0)	4	1%	349.7 (7.0-692.3)
Total	1,151		1,137.6 (1,071.9-1,203.3)	759		750.2 (696.8-803.5)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.

Table 8i. Alcohol and Drug-Related Inpatient Admissions by Year, 2017.

2017						
Sex	Alcohol			Drug Use		
	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
Female	123	33%	257.4 (211.9-302.9)	256	57%	535.7 (470.1-601.4)
Male	251	67%	468.2 (410.2-526.1)	195	43%	363.7 (312.7-414.8)
Unknown	0	0%	-	0	0%	-
Race	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
White	813	77%	1,122.5 (1,045.4-1,199.7)	826	82%	1,140.5 (1,062.7-1,218.3)
Black	6	1%	381.9 (76.3-687.5)	19	2%	1,209.4 (665.6-1,753.2)
Native American	153	14%	3,001.2 (2,525.6-3,476.7)	64	6%	1,255.4 (947.8-1,563.0)
Asian/Pacific	1	0%	85.8 (0.0-253.9)	3	0%	257.3 (0.0-548.4)
Hispanic	8	1%	37.8 (11.6-64.1)	24	2%	113.5 (68.1-159.0)
Other/Unknown	81	8%	-	66	7%	-
Age	N	%	Crude Rate (CI)	N	%	Crude Rate (CI)
0-14	7	1%	39.8 (10.3-69.2)	29	3%	164.7 (104.8-224.6)
15-17	16	2%	437.0 (222.9-651.2)	34	3%	928.7 (616.5-1,240.9)
18-19	20	2%	620.5 (348.6-892.5)	32	3%	992.9 (648.9-1,336.9)
20-24	52	5%	547.4 (398.6-696.1)	122	12%	1,284.2 (1,056.3-1,512.1)
25-34	216	20%	1,213.8 (1,051.9-1,375.7)	307	31%	1,725.2 (1,532.2-1,918.2)
35-44	168	16%	1,727.5 (1,466.3-1,988.7)	160	16%	1,645.2 (1,390.3-1,900.2)
45-54	240	23%	1,834.7 (1,602.6-2,066.8)	164	16%	1,253.7 (1,061.8-1,445.6)
55-64	218	21%	1,779.2 (1,543.0-2,015.3)	95	9%	775.3 (619.4-931.2)
65-74	95	9%	1,043.8 (833.9-1,253.7)	41	4%	450.5 (312.6-588.4)
75-84	26	2%	603.9 (371.8-836.1)	13	1%	302.0 (137.8-466.1)
85+	3	0%	261.6 (0.0-557.5)	5	0%	435.9 (53.8-818.0)
Total	1,061		1,046.4 (983.4-1,109.3)	1,002		988.2 (927.0-1,049.4)

Source: Hospital Inpatient Billing.

ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.

Categories are not mutually exclusive.

Rural Region: Elko, Eureka, Humboldt, Lincoln, Lander, Pershing, and White Pine Counties.