

# DEMOGRAPHICS

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# INTRODUCTION



In spring 2023, the Colorado State Epidemiological Outcomes Workgroup (SEOW) published this seven-part document as an overview of opioids, cannabis, alcohol, tobacco, and stimulant use and related harms in Colorado. Each substance is presented in its own profile, with demographics and mental health profiles provided for additional state context. The profiles were designed to be readily usable to all people working in fields related to substance use. They include many data sources and aim to present the most current and actionable findings.

This profile is a snapshot of Colorado demographics, including population estimates, economic data, and general substance use information.

Certain considerations were taken into account in compiling these data, including time frame and the intended audience. First, the profiles contain all publicly available data. This ensures that anyone can access the original source for more information on any data point in the profile. It was also important to use a timespan in which the most complete data could be found within and across substances. Lag-time for data to become publicly available can vary widely. While the profiles were in development during the summer and fall of 2022, the most complete data were found and used for calendar year 2021. Exceptions include figures/charts featuring trend data prior to 2021, data collected biennially for which 2020 was the most recent year, and aggregate data when no single year yields a large enough sample size to make definitive statements.

**All Healthy Kids Colorado Survey (HKCS) data presented are for public high school students, grades 9-12.**

Each page includes data sources and years. For more detailed information on references, please see our [references page](#).

The SEOW compiled the profiles with deliberate attention to our intended audience. They were designed to be practical and useful for all Coloradans who are interested in talking to others in their communities about substance use and related harms. This includes anyone from youth groups and community organizations to school superintendents and state legislators. The eight profiles can be used as stand-alone products or in conjunction with each other, as hard copy hand-outs or as a part of presentations.

**WE STRONGLY RECOMMEND REVIEWING AND USING THE DEMOGRAPHICS AND MENTAL HEALTH PROFILES TO PROVIDE IMPORTANT CONTEXT TO DATA PRESENTED IN THE SUBSTANCE PROFILES.**

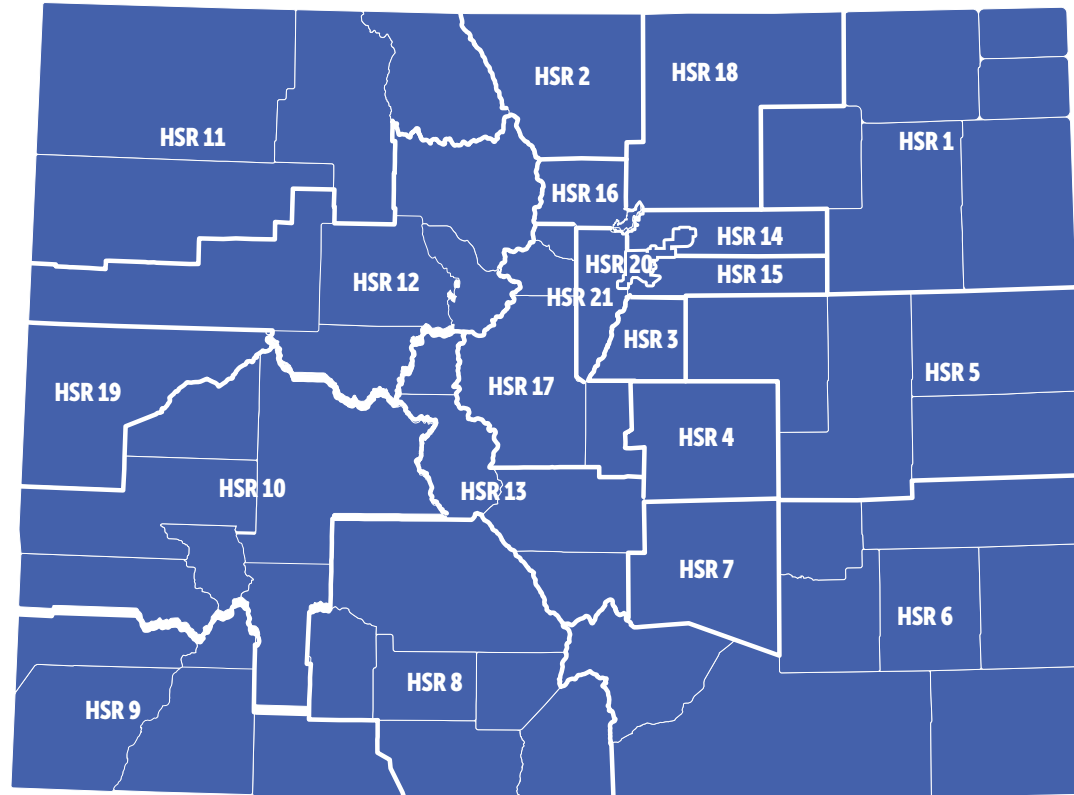
We hope the profiles facilitate conversation among Coloradans about the state of our state. For this reason, the profiles feature data from a variety of sources, include regional data when available, and introduce easily relatable use of benchmarks, such as national comparisons.

The SEOW partnered with The Evaluation Center – University of Colorado Denver on the development of the profiles, including the interpretation and visualization of data.

For more information, contact SEOW representative Sharon Liu ([sharon.liu@state.co.us](mailto:sharon.liu@state.co.us)) at the Colorado Department of Public Health and Environment.

## Colorado is divided into 21 Health Statistics Regions (HSR)

The boundaries of these regions were developed by the Colorado Department of Public Health and Environment and local public health professionals and agencies based on demographic and statistical criteria. Data within Colorado are frequently collected and presented at the HSR level.



**HSR 1:** Logan, Morgan, Phillips, Sedgwick, Washington, Yuma  
**HSR 2:** Larimer  
**HSR 3:** Douglas  
**HSR 4:** El Paso  
**HSR 5:** Cheyenne, Elbert, Kit Carson, Lincoln

**HSR 6:** Baca, Bent, Crowley, Huerfano, Kiowa, Las Animas, Otero, Prowers  
**HSR 7:** Pueblo  
**HSR 8:** Alamosa, Conejos, Costilla, Mineral, Rio Grande, Saguache  
**HSR 9:** Archuleta, Delores, La Plata, Montezuma, San Juan

**HSR 10:** Delta, Gunnison, Hinsdale, Montrose, Ouray, San Miguel  
**HSR 11:** Jackson, Moffat, Rio Blanco, Routt  
**HSR 12:** Eagle, Garfield, Grand, Pitkin, Summit  
**HSR 13:** Chaffee, Custer, Fremont, Lake  
**HSR 14:** Adams  
**HSR 15:** Arapahoe

**HSR 16:** Boulder, Broomfield  
**HSR 17:** Clear Creek, Gilpin, Park, Teller  
**HSR 18:** Weld  
**HSR 19:** Mesa  
**HSR 20:** Denver  
**HSR 21:** Jefferson

**DEMOGRAPHICS**



Colorado is the

**21st**

most populated state with an estimated 2021 population of

**5,814,707.**



POPULATION TRENDS  
.....

Colorado has the **17th highest growth rate** in the U.S., with an increase of 0.5% in 2021, which is the slowest growth rate for the state since 1989.

The state saw an **increase in population** of 30,551 from 2020 to 2021.

**73% of the population growth** from 2020 to 2021 occurred on **the Front Range**. However, growth varied by county with Denver, Jefferson, and Boulder seeing declines. Increases occurred in Douglas, Weld, El Paso, Larimer, and Adams.

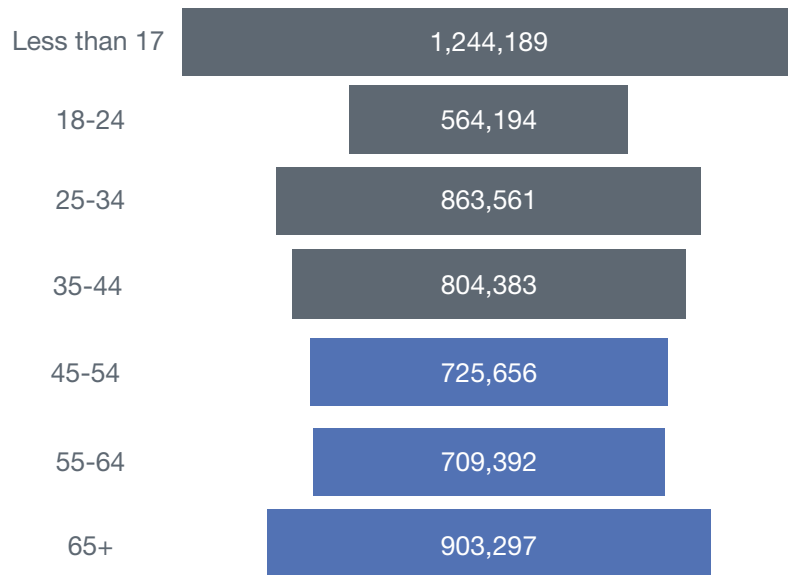
**59%**

**of Colorado counties experienced a natural population decrease** (when there are more deaths than births) in 2021.

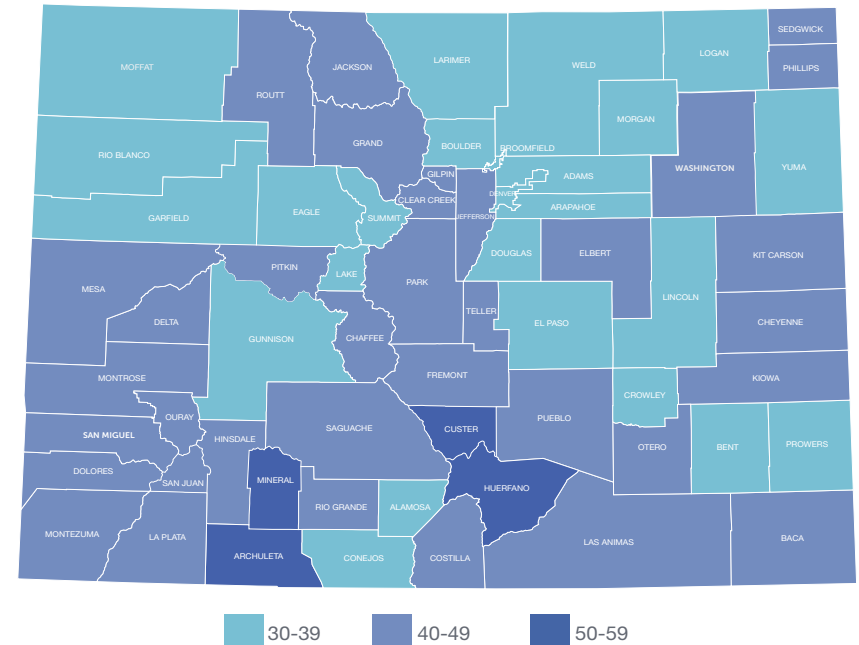
Aging in the nation, increased mortality due to COVID, and few births contributed to this.

In 2021 and 2022, the number of Coloradans **65+** is expected to increase by **133,000**, which will impact the labor force, economy, and housing.

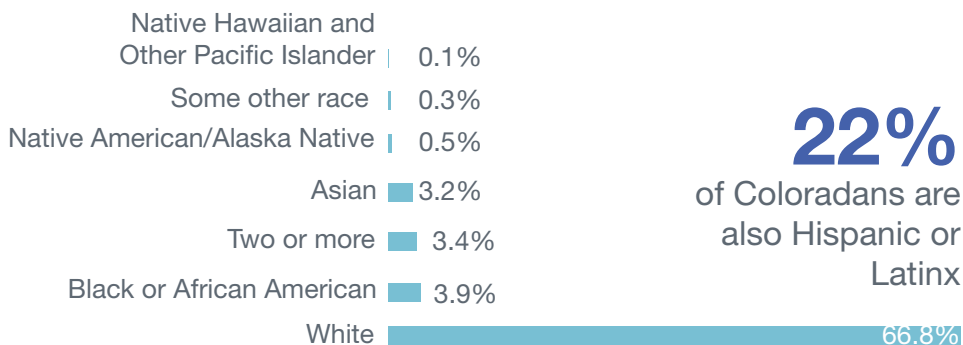
**Population by Age in 2021**



**Median Age Range by County in 2021**



**Race and Origin of Coloradans in 2021 | U.S. Census Bureau**



Nationally, **people of color** make up 20% of the population **65+**.

**By 2050, people of color** will make up nearly 42% of the population **65+**. Our state is projected to see a similar change.

Statewide programs will need tailoring to meet the needs of the diverse aging population and those who are caregivers.

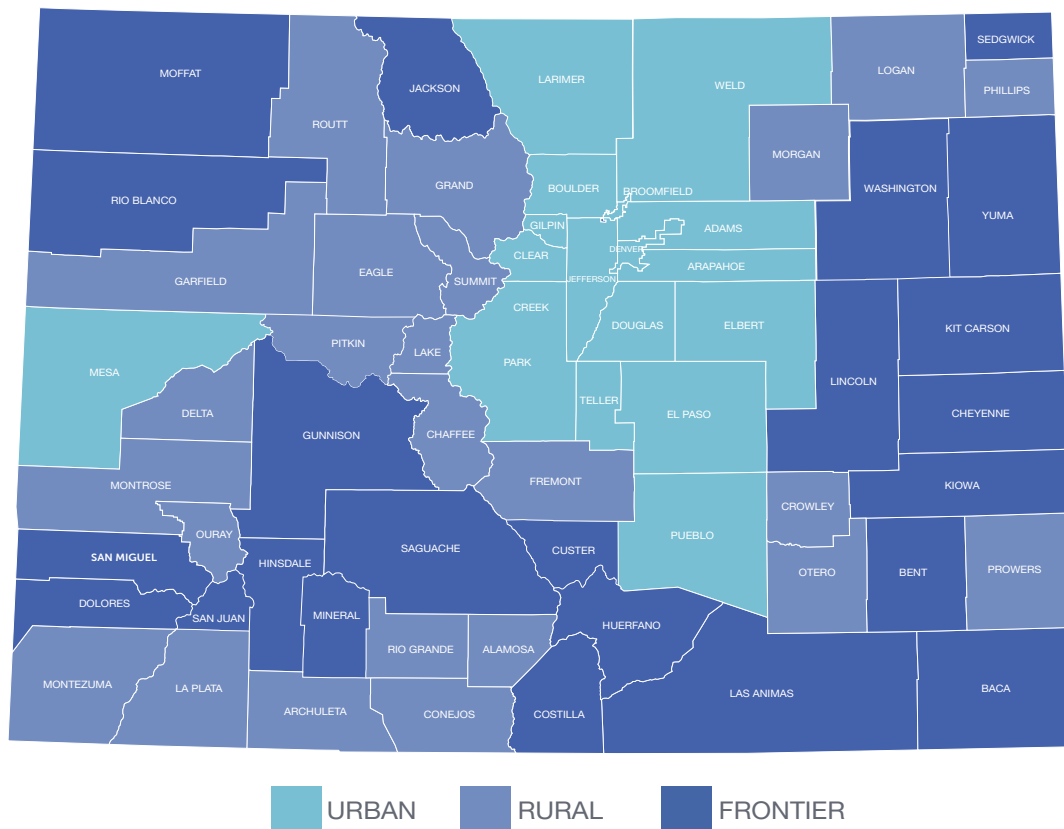
SOURCES: COLORADO HEALTH INSTITUTE, 2019; U.S. CENSUS BUREAU, 2021; COLORADO STATE DEMOGRAPHY OFFICE, 2019



Over **722,419** Coloradans live in **RURAL** or **FRONTIER** areas of the state.

Rural is defined as a non-metropolitan county with no cities over 50,000 residents.

Frontier is defined as a county that has a population density of 6 or fewer residents per square mile.



**73%** of Colorado counties are considered **rural or frontier**.

**26%** of the population in rural communities are **people of color**.

**51%** of all rural and frontier counties **do not have an active, licensed addiction counselor**.

**Poverty and unemployment rates are higher** in rural and frontier counties than urban counties.



ACCORDING TO THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT,  
 “Counties along the Rocky Mountain corridor, often called **rural resort communities**, appear to experience some of the **highest rates of both binge drinking and alcohol outlet density** in Colorado.”

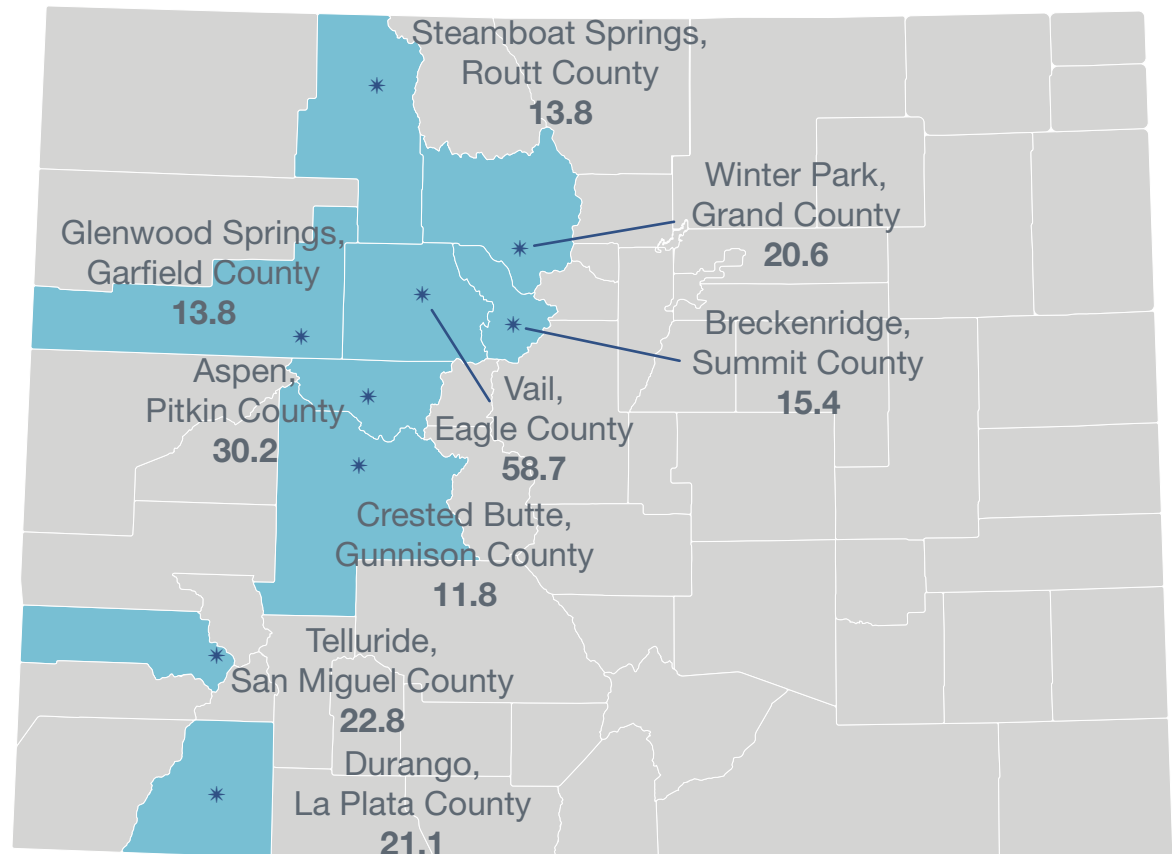
### Economies in Colorado resort towns are driven primarily by the ski and snow sports industry.

These counties have particularly high economic disparities.

Economies and jobs are largely seasonal, housing prices are typically high, and communities are frequently changing. These factors can result in low neighborhood attachment and community disorganization, which is a risk factor for substance use.

All of Colorado’s resort towns are located in rural or frontier counties, meaning they experience the same challenges with poverty, unemployment, high rates of suicide, and access to mental health and addiction resources.

Colorado’s alcohol outlet density in 2020 was 2 outlets per 1,000 residents



\*Alcohol Outlets per 1,000 Residents by Census Tract

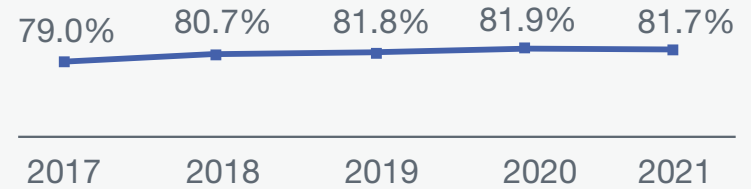
**EDUCATION**



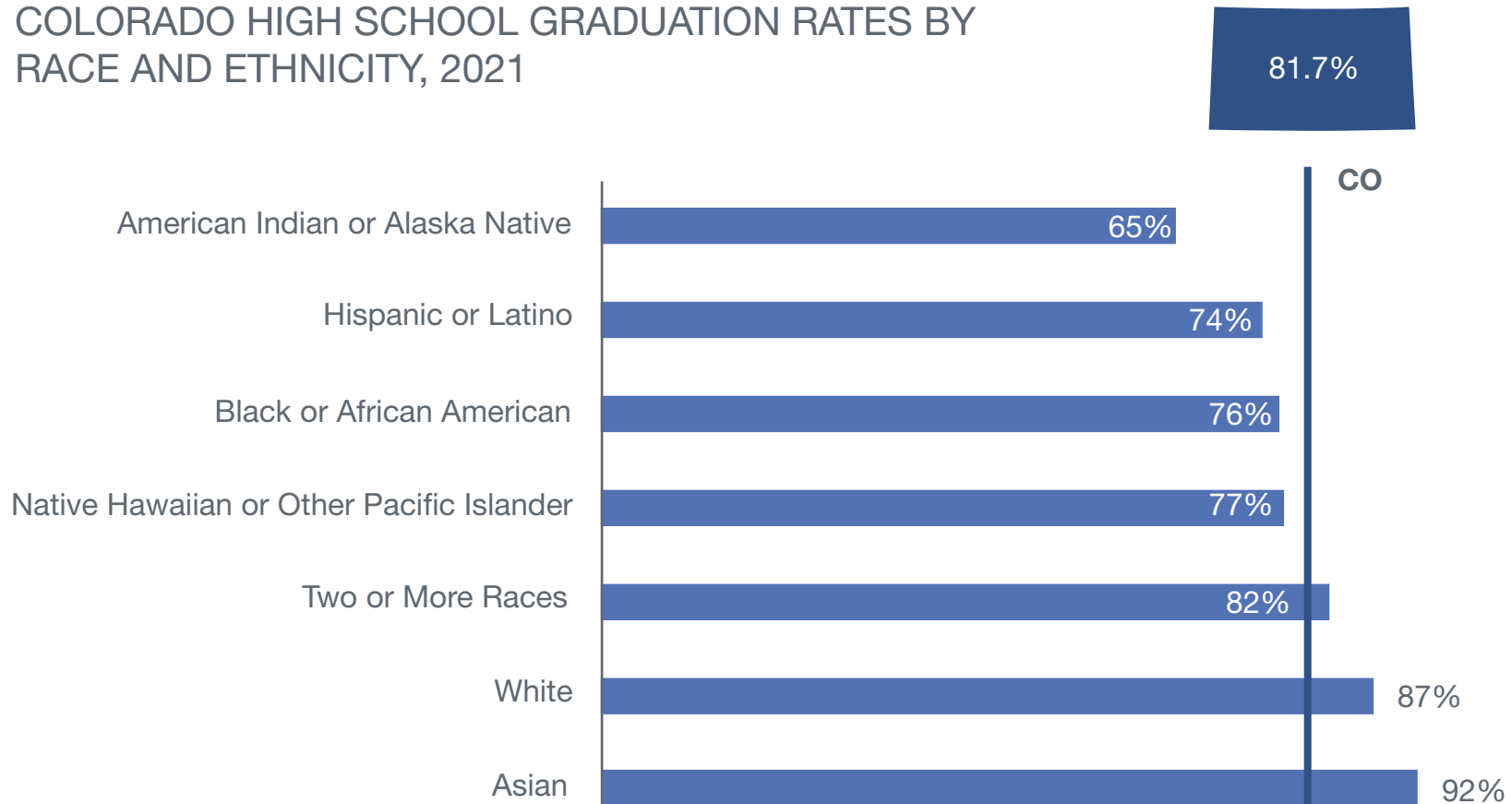
The state high school graduation rate in 2021 was 81.7%.

According to the education nonprofit Chalkbeat, “High school graduation rates dipped in at least 20 states after the first full school year disrupted by the pandemic, suggesting the coronavirus may have ended nearly two decades of nationwide progress toward getting more students diplomas.”

COLORADO PUBLIC HIGH SCHOOL GRADUATION RATES



COLORADO HIGH SCHOOL GRADUATION RATES BY RACE AND ETHNICITY, 2021

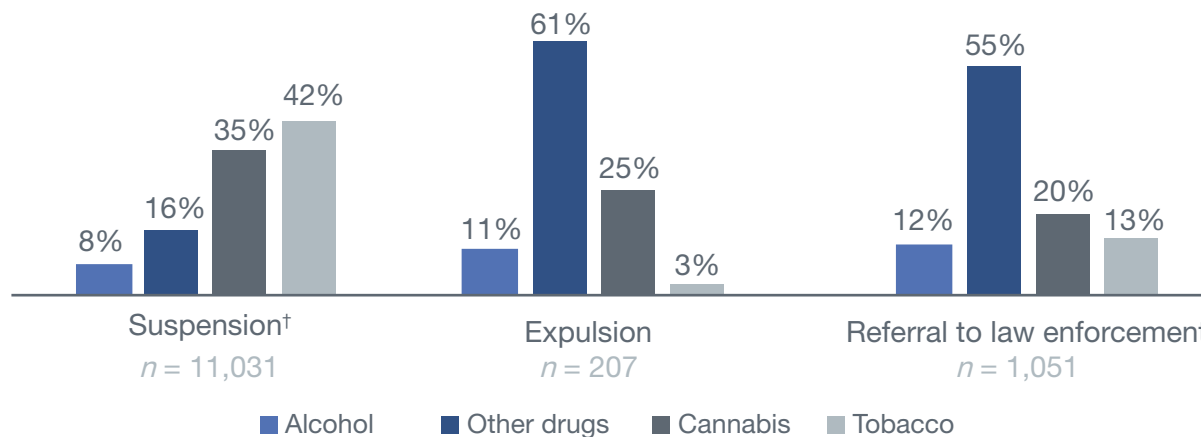


SCHOOL DISCIPLINE

Research shows punitive discipline\* is associated with **negative student outcomes** including decreases in achievement, increases in dropout rates, and continued disciplinary actions. Conversely, alternative discipline methods\*\* are associated with positive outcomes like increased achievement, lower dropout rates, and lower rates of further discipline actions. School connectedness is a protective factor supporting school success and reducing youth substance use. School connectedness is lower in schools with a climate of punitive discipline.

During the 2021-2022 school, **the most common punitive disciplinary action in Colorado public high schools was suspension.**† Among the 11,031 suspensions for substance use, tobacco violations occurred most often, followed by drug violations.

**Punitive discipline methods continue to be used disproportionately for Students of Color.**



Students of Color comprise **48%** of public high school students in Colorado, yet **58%** of disciplinary actions in the 2021-22 school year were taken with Students of Color.

\*Punitive discipline measures include suspension, expulsion, and referral to law enforcement.

\*\*Alternative discipline practices include approaches designed to improve student relationships and engagement with their education. These approaches seek to address the underlying cause of behaviors.

†Total suspensions includes classroom removals, in-class suspensions, and out-of-school suspensions.

**ECONOMY**





Colorado had a

**6.2%**

increase in jobs  
from **December 2020**  
to **December 2021**  
compared to

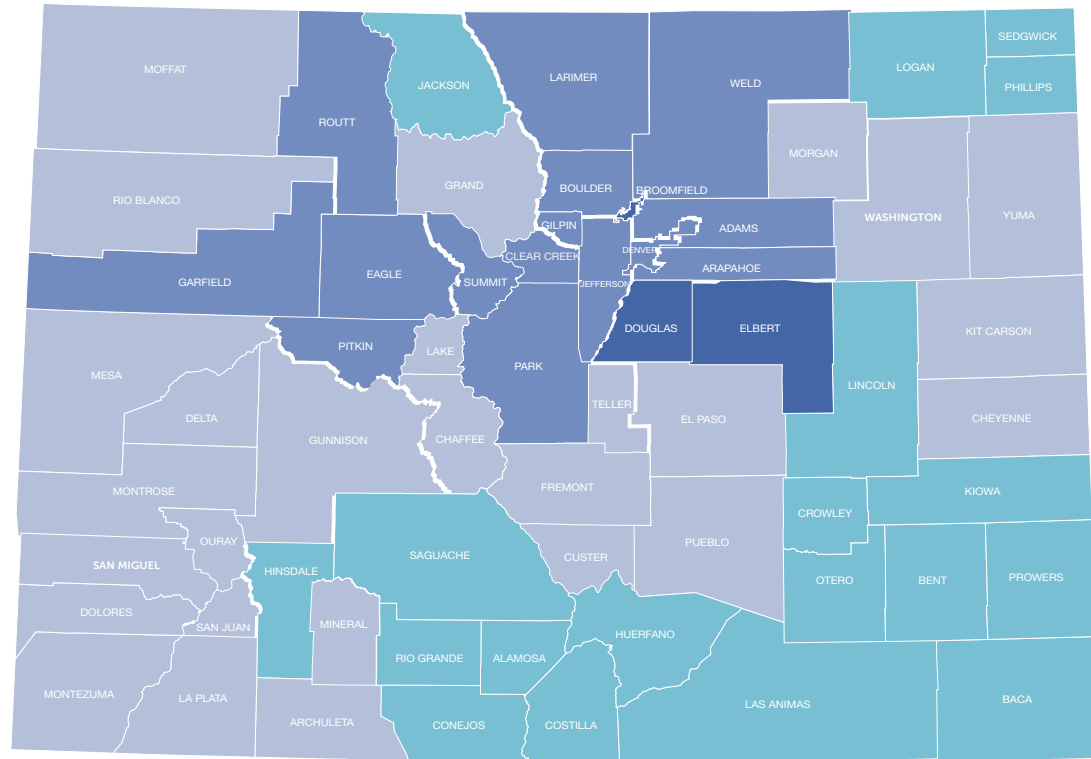
**5.1%** nationally.

From 2012-2021,

**563,593**

jobs have been  
added in Colorado.

Median Household Income by County, 2021



The median household income in Colorado for  
2017-2021 was **\$80,184**.

SOURCES: U.S. BUREAU OF LABOR STATISTICS, 2012-21;  
U.S. CENSUS BUREAU, 2017-21



The median gross rent (monthly, housing) was

**\$1,437**

for Colorado between 2017-2021.

The average Colorado home price increased

**77%**

from 2008 to 2018, while the state's median income only increased

**5%**

Historic and current policies, such as redlining and housing covenants,\* have contributed to **disparities in home ownership.**

**56.2% of White Coloradans** own a home compared to only **28.0% of African Americans.**

Housing instability is when someone is unsure they will have stable housing in the next two months. **African Americans in Colorado experience housing instability at 3x the rate of White Coloradans** (14.5% versus 4.0%).

Housing instability was most common in **Denver and Adams Counties.**

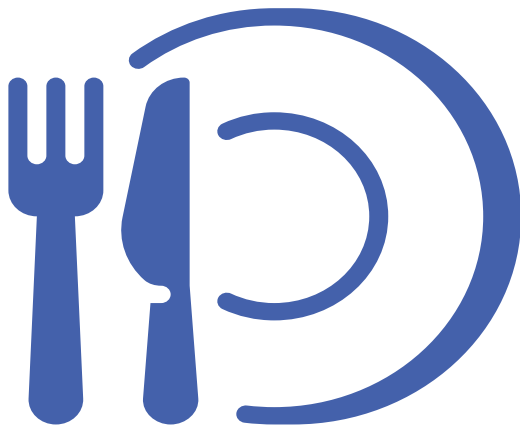
\*Redlining occurred when communities systematically denied housing loans and infrastructure investment along racial lines.

\*Racial housing covenants denied opportunities to purchase land and/or homes within housing associations based on race.

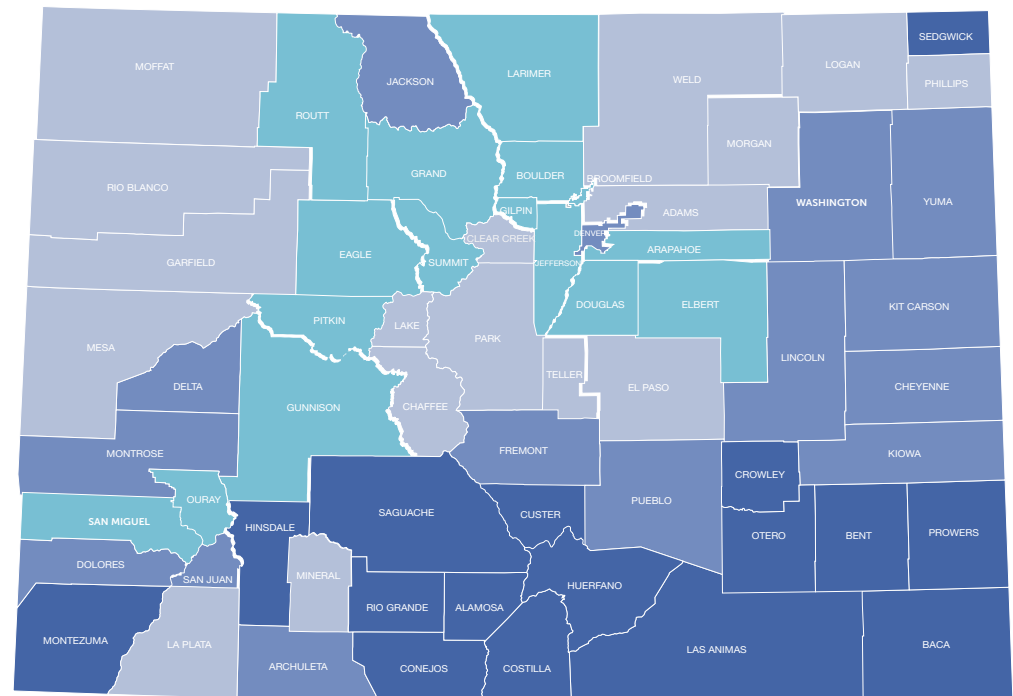
Child poverty refers to the percent of children under age 18 who live in families with incomes below the federal poverty line.

The percent of children living below the poverty line for Colorado in 2021 was

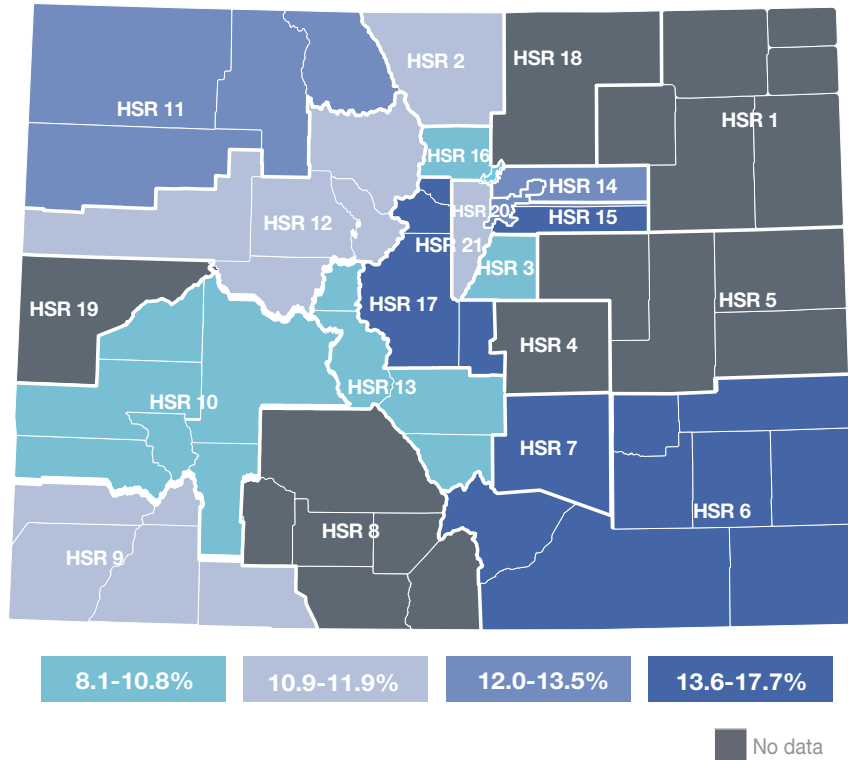
# 11.8%



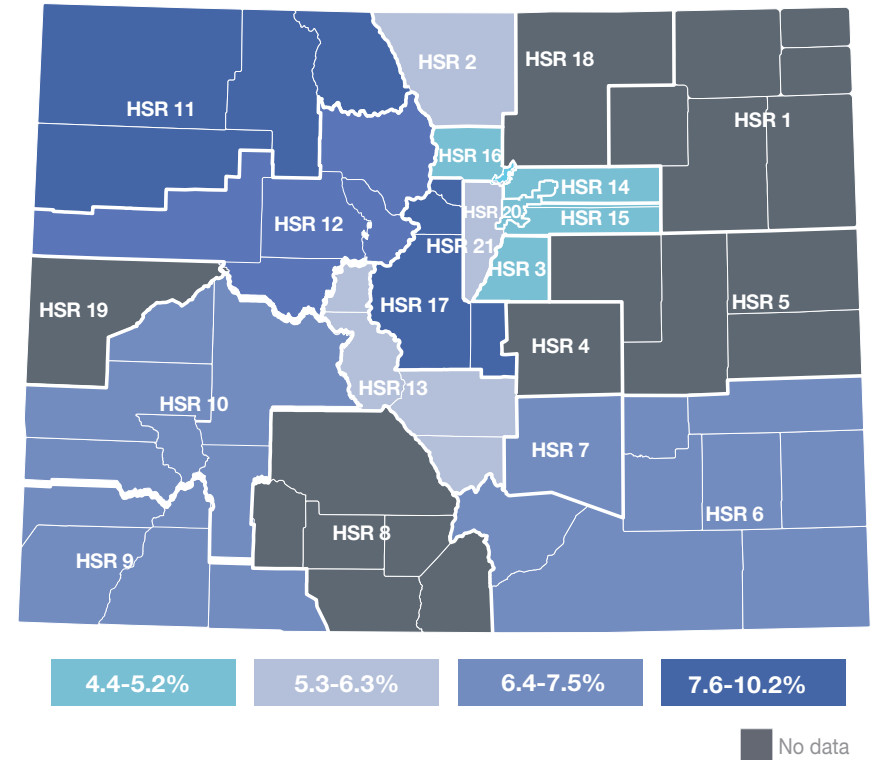
Percent of youth 18 and younger living in poverty by county



Students who went hungry because of lack of food at home



Students who usually slept somewhere other than their home



In the past 30 days in Colorado

# 12.4%

of students went hungry because of a lack of food at home.

Of students in Colorado,

# 5.5%

usually slept somewhere other than their own home in the last 30 days.

**NOTE:** THESE HEALTHY KIDS COLORADO SURVEY RESULTS ARE REPRESENTATIVE OF YOUTH WHO ATTEND PUBLIC HIGH SCHOOLS IN COLORADO  
**SOURCE:** HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021

# **YOUTH RISK AND PROTECTIVE FACTORS**

A faint, light blue gear graphic is positioned in the upper right corner of the slide, partially overlapping the text area. The gear has a complex, multi-toothed design with varying shades of blue.

Protective factors are associated with preventing multiple negative outcomes including poor mental health, unhealthy sexual behaviors, substance use, and violence. Ensuring all youth have equitable access to protective factors can help them thrive.



**82.4%**  
of students  
**HAVE AN ADULT TO GO TO FOR HELP WITH A SERIOUS PROBLEM.**

**78.7%**  
of students  
**WHO HAVE PARENTS OR GUARDIANS WHO ASK IF THEIR HOMEWORK IS DONE.**



**59.6%**  
of students  
**PARTICIPATE IN EXTRACURRICULAR ACTIVITIES AT SCHOOL.**

Participation in extracurricular activities is influenced by social inequities, as some students cannot afford associated costs or have other commitments, such as working after school or caring for family members.



**93.3%**  
of students  
**FEEL THE RULES IN THEIR FAMILY ARE CLEAR.**

**59.2%**  
of students  
**THINK THEIR TEACHER NOTICES WHEN THEY DO A GOOD JOB AND LET THEM KNOW ABOUT IT.**

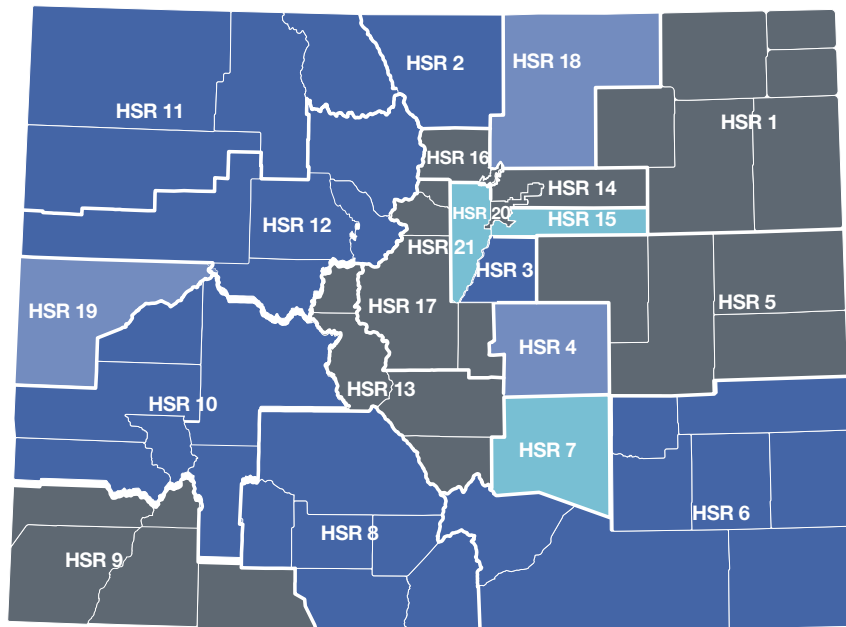


**64.7%**  
of students  
**FEEL THEY BELONG AT SCHOOL.**

**90.0%**  
of students  
**FEEL SAFE AT SCHOOL.**

91.9%

of Colorado high schools that participated in the 2021 Smart Source survey **teach about alcohol, tobacco, and other drug use prevention.**



50.-79.9%      80.0-99.9%      100.0%

No data

% of schools in which health education topics include a focus on alcohol, tobacco, and other drug use prevention

SMART SOURCE SURVEY

- Colorado’s inventory of school health best practices administered in elementary, middle, and high schools
- Aligned with CDC’s Whole Child model which includes physical, emotional, and mental health
- Building-level survey completed once per school by a team of staff members
- Complementary to HKCS to provide meaningful data to communities

91.6%

teach how alcohol and drug use impairs responsible and healthy decision making.

80.2%

have a student-centered discipline approach, which is used in response to substance use, including cigarettes or vape products.

27.4%

screen and refer for tobacco and/or other substance use.

NOTE: THESE SMART SOURCE SURVEY RESULTS ARE REPRESENTATIVE OF PUBLIC HIGH SCHOOLS IN COLORADO  
SOURCE: SMART SOURCE, 2021

According to the National Institute on Drug Abuse, adolescence (at about age 13) is a risky period for drug abuse due to the challenges youth face at this age coupled with greater exposure to drugs. Early initiation of alcohol or drug use is associated with a higher risk of developing problematic substance behaviors later in life.

State  
Average

**% OF STUDENTS WHO BEFORE AGE 13:**



**15%**

FIRST DRANK  
ALCOHOL  
other than a few sips



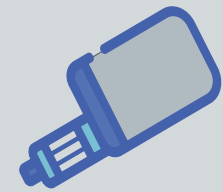
**7%**

SMOKED A  
CIGARETTE  
even one or two puffs



**5%**

TRIED CANNABIS  
for the first time



**22%**

USED VAPOR  
PRODUCTS  
for the first time

**NOTE:** THESE HEALTHY KIDS COLORADO SURVEY RESULTS ARE REPRESENTATIVE OF YOUTH WHO ATTEND PUBLIC HIGH SCHOOLS IN COLORADO

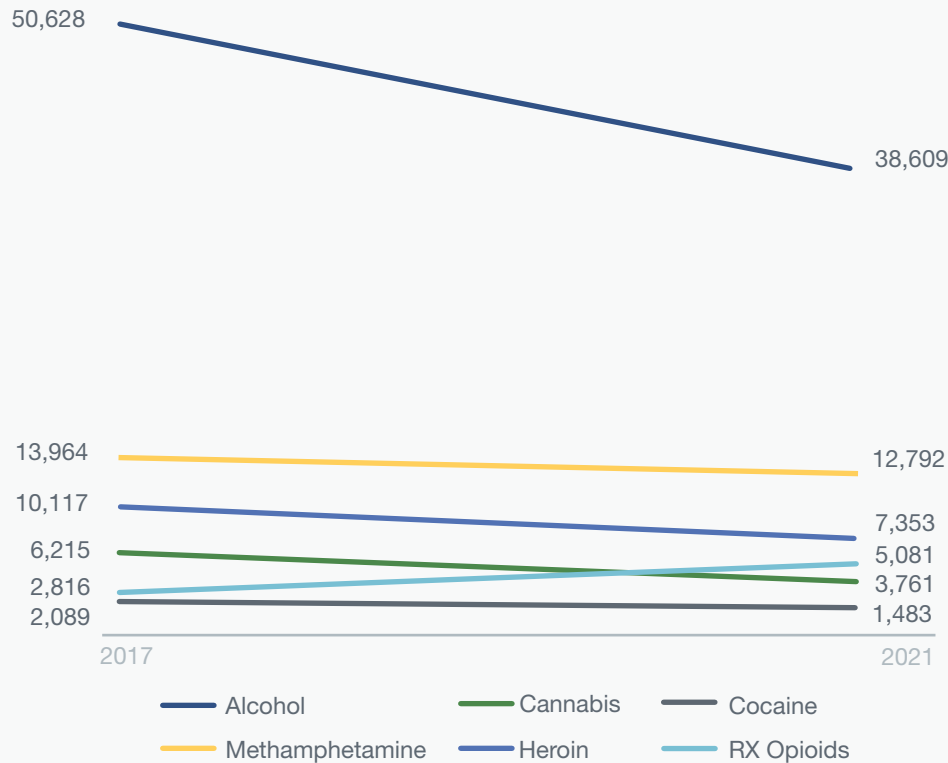
**SOURCES:** NATIONAL INSTITUTE ON DRUG ABUSE, 2014; HEALTHY KIDS COLORADO SURVEY (HKCS), HIGH SCHOOL, 2021



**TREATMENT**



People seeking treatment for **alcohol use consistently had the highest number of treatment admissions** in Colorado.



From 2017 to 2021, there was a

# 19%

decrease in people seeking treatment in Colorado, driven largely by a reduction in treatment admissions for alcohol.

# 55%

of treatment admissions in Colorado were for alcohol in 2021.

Over the last five years, the number of treatment admissions for alcohol, cannabis, methamphetamine, heroin, and cocaine have gone down, **while admissions for prescription opioids have gone up.**

**72%** of treatment admissions are for **White Coloradans.**

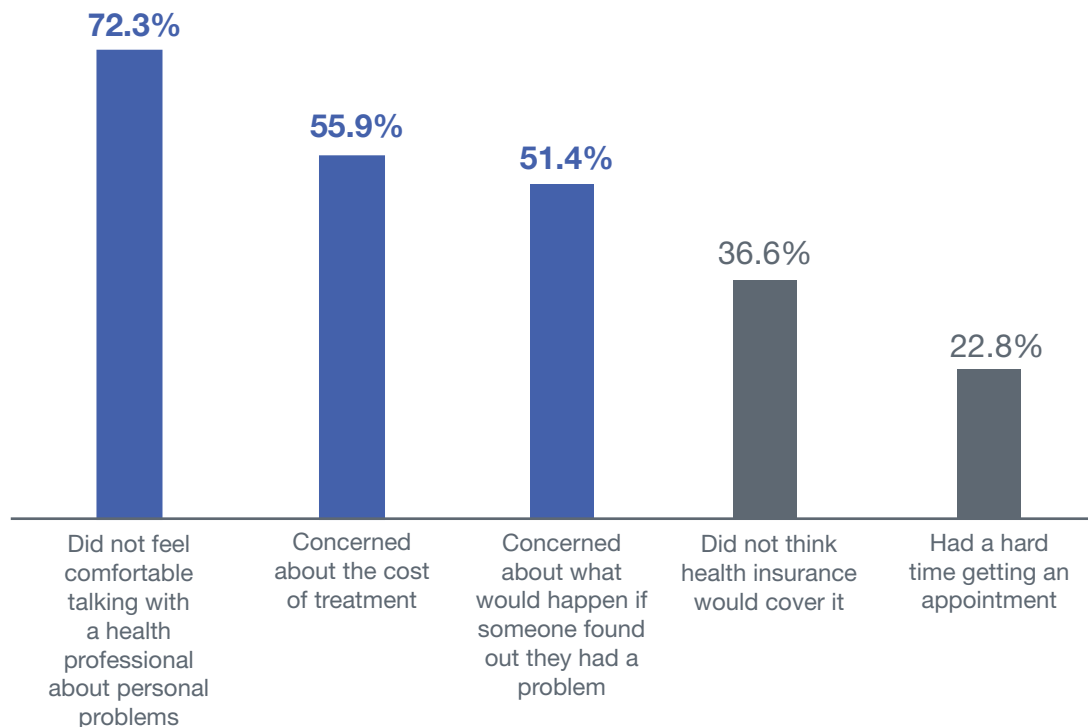
**68%** of treatment admissions are for **men.**

Treatment admissions refer to facilities licensed by the Colorado Behavioral Health Administration and do not include clients who received service through private pay, third party insurance providers, or non-Behavioral Health Administration licensed facilities.

About **80,000** Coloradans 18+ did not receive **needed substance use treatment** in 2021.

When asked why, Coloradans most frequently did not feel comfortable **discussing their personal problems**, were concerned about the **cost of treatment**, and were concerned what would happen if **someone found out they had a problem**.

Coloradans were also concerned that **health insurance would not cover** substance use treatment or they **had a hard time getting an appointment**.





**We appreciate your feedback!**

[Click here](#) or scan above to take a one-minute survey.

**For more information**  
on the Colorado SEOW and additional  
publications, please visit our website:

[www.coloradoseow.org](http://www.coloradoseow.org)