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Sexual Orientation and Estimates of Adult Substance Use and Mental Health: Results from the 2015 National Survey on Drug Use and Health

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Abstract

Background. Research suggests that sexual minorities (e.g., people who identify as lesbian, gay, or bisexual) are at greater risk for substance use and mental health issues compared with the sexual majority population that identifies as being heterosexual. Although sexual orientation is not a new construct, many federally funded surveys have only recently begun to identify sexual minorities in their data collections. In 2015, the National Survey on Drug Use and Health (NSDUH) added two questions on sexual orientation, one for sexual identity and one for sexual attraction, making it the first nationally representative, comprehensive source of federally collected information on substance use and mental health issues among sexual minority adults.

Methods. To assess the validity of the data, NSDUH estimates of sexual attraction and sexual identity were compared with estimates from three other national surveys: the National Survey of Family Growth, the National Health Interview Survey, and the General Social Survey. Adults who self-identified in a question on sexual identity as being heterosexual or straight were defined as being in the sexual majority group. Adults who self-identified as being gay, lesbian, or bisexual in the same question were defined as being in the sexual minority group. This report presents estimates for substance use and mental health issues from the 2015 NSDUH for adults aged 18 or older by sexual identity. Additionally, NSDUH estimates for substance use and mental health issues were compared for sexual minorities and sexual majority members among all adults and within subgroups defined by sex and by age group. For comparisons of substance use and mental health estimates, statistically significant differences are noted between the sexual majority and sexual minority groups.

Results. Estimates from NSDUH for sexual attraction and sexual identity were comparable with estimates from other national surveys. Based on the 2015 NSDUH, 4.3 percent of adults aged 18 or older identified as a sexual minority, including 1.8 percent who identified as being lesbian or gay and 2.5 percent who identified as being bisexual.

Sexual minorities were more likely than their sexual majority counterparts to have substance use and mental health issues. The greater likelihood of sexual minority adults to have substance use and mental health issues compared with their sexual majority counterparts was observed across subgroups of adults defined by sex and by age group. In particular, sexual minorities were more likely to use illicit drugs in the past year, to be current cigarette smokers, and to be current alcohol drinkers compared with their sexual majority counterparts. Sexual minority adults were also more likely than sexual majority adults to have substance use disorders in the past year, including disorders related to their use of alcohol, illicit drugs, marijuana, or misuse of pain relievers. Sexual minority adults were more likely than their sexual majority counterparts to need substance use treatment. Among adults who needed substance use treatment, sexual minority adults were more likely than their sexual majority counterparts to receive substance use treatment at a specialty facility.

Sexual minority adults were also more likely than sexual majority adults to have any mental illness (AMI), serious mental illness (SMI), and AMI excluding SMI in the past year. Sexual minority adults were also more likely than their sexual majority counterparts to have a major depressive episode (MDE) or to have had an MDE with severe impairment in the past year. Sexual minority adults with AMI were more likely than sexual majority adults with AMI to receive mental health services during the past 12 months.

Conclusions. This first set of findings from NSDUH on substance use and mental health issues for adults by sexual identity is important to the Substance Abuse and Mental Health Services Administration for understanding the health issues faced by sexual minorities in the United States. Additional years of data will allow changes to be tracked over time for substance use, substance use treatment, mental health issues, and the use of mental health services among sexual minority adults and will enable researchers to examine issues in greater depth for specific sexual minority subgroups. Future research involving NSDUH and other data sources also will be useful for understanding factors associated with substance use or mental health issues among sexual minorities.

Introduction

Understanding how health disparities affect different facets of society has long been a goal of public health researchers and policymakers. Research suggests that sexual minorities, such as people who identify as being lesbian, gay, or bisexual, are at greater risk for substance use and mental health issues compared with the majority population that identifies as being heterosexual or “straight.”¹ Sexual minorities face multiple challenges in coming to terms with their sexuality and handling social reactions that are not faced by the majority population that identifies as being heterosexual or straight.^{2,3} Sexual minorities also are at greater risk of experiencing harassment or violence compared with the sexual majority population.^{4,5} These types of stressors can place sexual minorities at increased risk for substance use and mental disorders.^{3,5,6}

Although sexual orientation is not a new social construct, many federally funded surveys only recently have begun to identify sexual minorities in their data collections. The U.S. Department of Health and Human Services’ (HHS’s) Healthy People 2020 objectives include increasing the number of population-based data systems that ask questions that identify lesbian, gay, and bisexual populations in the United States.⁷ The Substance Abuse and Mental Health Services Administration (SAMHSA) aligned with the Healthy People 2020 initiative by adding questions to the National Survey on Drug Use and Health (NSDUH) that would identify sexual minorities. The addition of these

questions to the 2015 NSDUH provides the first nationally representative, federally collected comprehensive information on substance use and mental health of adults by sexual orientation.⁸ Appendix A includes further background information on NSDUH and some of the other surveys that collect information on sexual attraction and sexual identity.

Sexual orientation has three main components:⁹

- *sexual attraction* refers to an individual’s sexual interest in others, according to whether an individual is attracted to men, women, or both men and women;
- *sexual identity* refers to how an individual thinks of himself or herself; and
- *sexual behavior* refers to whether an individual has sex partners who are of the same sex, the opposite sex, or both.

Each of these components may have a different association with substance use and mental health. For the 2015 NSDUH, two questions were added for adults: one for sexual attraction and one for sexual identity (Table 1).

Because this was the first time NSDUH collected sexual orientation data, this report assesses the quality of the new NSDUH data by comparing NSDUH estimates for sexual attraction and sexual identity with estimates from other surveys that collect data for these measures. The report also presents substance use and mental health estimates according to the sexual identity of adults.

Table 1. Sexual Orientation Questions in the 2015 National Survey on Drug Use and Health

Sexual Attraction ¹	Sexual Identity
<p><i>People are different in their sexual attraction to other people. Which statement best describes your feelings?</i></p> <ul style="list-style-type: none"> - I am only attracted to males - I am mostly attracted to males - I am equally attracted to males and females - I am mostly attracted to females - I am only attracted to females - I am not sure 	<p><i>Which one of the following do you consider yourself to be?</i></p> <ul style="list-style-type: none"> - Heterosexual, that is, straight - (If female respondent) Lesbian or Gay - (If male respondent) Gay - Bisexual

¹ The table shows the response options for the sexual attraction question for female respondents. For male respondents, the response options were presented in reverse order (i.e., from “I am only attracted to females” to “I am only attracted to males”), except for “I am not sure.”

Survey Background

NSDUH is an annual survey of the civilian, noninstitutionalized population of the United States aged 12 years old or older.¹⁰ The survey is sponsored by SAMHSA within HHS. The survey covers residents of households and individuals in noninstitutional group quarters (e.g., shelters, boarding houses, college dormitories, migratory workers' camps, halfway houses). The survey excludes people with no fixed address (e.g., homeless people not in shelters), military personnel on active duty, and residents of institutional group quarters, such as jails, nursing homes, mental institutions, and long-term care hospitals.

NSDUH employs a stratified multistage area probability sample that is designed to be representative of both the nation as a whole and for each of the 50 states and the District of Columbia. The 2015 NSDUH annual target sample size of 67,500 interviews was distributed across three age groups, with 25 percent allocated to adolescents aged 12 to 17, 25 percent allocated to young adults aged 18 to 25, and 50 percent allocated to adults aged 26 or older.¹¹

NSDUH is a face-to-face household interview survey that is conducted in two phases: the screening phase and the interview phase. The interviewer conducts a screening of the eligible household with an adult resident (aged 18 or older) in order to determine whether zero, one, or two residents aged 12 or older should be selected for the interview.¹²

NSDUH collects data using audio computer-assisted self-interviewing (ACASI), in which respondents read or listen to the questions on headphones and then enter their answers directly into a NSDUH laptop computer. ACASI is designed for accurate reporting of information by providing respondents with a highly private and confidential mode for responding to questions about illicit drug use, mental health, and other sensitive behaviors. NSDUH also uses computer-assisted personal interviewing (CAPI), in which interviewers read less sensitive questions to respondents and enter the respondents' answers into a laptop computer.

In 2015, screening was completed at 132,210 addresses, and 68,073 completed interviews were obtained, including 51,118 interviews from adults aged 18 or older. There were approximately 3,000 completed interviews from adult respondents aged 18 and older who self-identified as a sexual minority (i.e., gay, lesbian, or bisexual). Weighted response rates for household screening and for interviewing were 79.7 and 69.3 percent, respectively, for an overall response rate of 55.2 percent for people aged 12 or older. The weighted

interview response rate was 68.4 percent for adults.¹³ Further details about the 2015 NSDUH design and methods can be found on the web at <http://www.samhsa.gov/data/>.¹⁴

Notable 2015 NSDUH Questionnaire Changes

The NSDUH questionnaire underwent a partial redesign in 2015 to improve the quality of the NSDUH data and to address the changing needs of policymakers and researchers with regard to substance use and mental health issues. Adding the sexual attraction and sexual identity questions was part of the 2015 NSDUH partial redesign. Details on the 2015 NSDUH questionnaire changes, reasons for the changes, and implications of the changes for NSDUH data users are included in a brief report on these questionnaire changes, in a report on the design changes for the 2014 and 2015 NSDUHs, and in the methodological summary and definitions report for 2015.^{15,16,17}

Data Presentation and Interpretation

This report presents estimates for adults aged 18 or older based on their sexual attraction and sexual identity. Because 2015 is the first year that NSDUH collected these data, the estimates for sexual attraction and identity are compared with estimates from other surveys that have collected these data to assess the quality of these data.

Estimates for substance use and mental health issues are presented by adults' sexual identity. Adults who self-identified in the sexual identity question as being heterosexual or straight were defined as being in the sexual majority group. Adults who self-identified as being lesbian, gay, or bisexual were defined as being in the sexual minority group. The sexual minority group was further subdivided into (a) gay or lesbian or (b) bisexual. Due to the smaller sample sizes and associated loss of precision when the data are further subdivided into sexual minority subgroups, data for these sexual minority subgroups are not compared and discussed in this report; however, the estimates for these subgroups are included in the supplemental tables in Appendix B. Combining the 2015 data with data from future years would improve the precision of estimates for subgroups of sexual minorities.

All estimates presented in this report are derived from NSDUH survey data that are subject to sampling errors. The estimates have met the criteria for statistical reliability. Estimates that do not meet these criteria for reliability have been suppressed and are not shown.¹⁸ Statistical tests also have been conducted for any comparisons that appear in

the text of the report. Statistically significant differences are described using terms such as “higher” or “lower.” Estimates are described as “similar” when a difference is not statistically significant. Graphics and tables contain estimates that support the statements in this report, and supplemental tables of estimates (including standard errors) are provided in Appendix B.

However, comparisons between sexual majority and sexual minority subpopulations for all adults aged 18 or older should be interpreted with caution because there are demographic differences in the groups being compared that are associated with substance use and mental health outcomes. In particular, a higher percentage of sexual minority adults are young adults aged 18 to 25 compared with the percentage among sexual majority adults (Table B.3). In these situations, apparent differences between sexual minority and sexual majority adults could be attributable to demographic differences between the subpopulations rather than differences based on sexual identity. For example, young adults historically have been more likely than people in other age groups to be substance users.¹⁹ Thus, higher estimates of substance use among sexual minority adults than among those in the sexual majority could be attributable to the disproportionate representation of young adults in the sexual minority subpopulation. However, to account for some of these differences, this report does examine substance use and mental health issues within specific subgroups (i.e., by sex and by age group).

Comparison of Estimates for Sexual Attraction and Sexual Orientation

To assess the quality of the sexual attraction and sexual identity data collected for the first time in the 2015 NSDUH, comparisons are presented for NSDUH estimates for sexual attraction and sexual identity with estimates from other surveys that collect data for these measures. Table A.1 in Appendix A provides methodological information on characteristics related to the recency of the data, populations covered, sample design, response rates, and other relevant characteristics for NSDUH and the other sources of data on sexual attraction and identity. The other sources of data include the General Social Survey (GSS), National Health Interview Survey (NHIS), and National Survey of Family Growth (NSFG).

Even when surveys cover similar topics, comparisons of the corresponding estimates can be difficult because the surveys can often produce different results for the same measures. These differing results often reflect variations in

study purpose and methodologies rather than incorrect results. Therefore, precise agreement among the data sources is not expected. Despite any differences among surveys, comparisons can be useful in assessing data quality. For example, consistency across surveys can confirm or support conclusions about trends and patterns of use, and inconsistent results can point to areas for further study. When surveys have large sample sizes, differences across surveys that are *statistically* significant also may present the same basic information from a *practical* standpoint.

No single source of data can fully cover all issues associated with sexual orientation, substance use, and mental health issues in the United States. Rather, each data source can contribute to a broader understanding of the health issues of sexual minorities.

Sexual Attraction

According to the 2015 NSDUH data, the large majority of adults aged 18 to 44 were only or mostly attracted to the opposite sex (93.8 percent of males and 90.5 percent of females in this age group) (Table B.1 in Appendix B). The sexual attraction question in the 2015 NSDUH was based on corresponding questions in and is virtually identical to questions for males and females from the 2011-2013 NSFG (see Table 1). Because NSFG respondents are aged 15 to 44 and the sexual attraction question in NSDUH is asked only of adults, NSDUH and NSFG estimates for sexual attraction were produced only for adults aged 18 to 44. NSDUH and NSFG estimates for sexual attraction also were compared separately for males and females in this age group.

Overall, the 2015 NSDUH and the 2011-2013 NSFG sexual attraction data were comparable, with the large majority of adults in both surveys reporting that they were only or mostly attracted to the opposite sex. As noted previously, the 2015 NSDUH data indicated that 93.8 percent of males aged 18 to 44 were only or mostly attracted to females, and 90.5 percent of females in this age group were only or mostly attracted to males (Table B.1 in Appendix B). Corresponding estimates from the 2011-2013 NSFG were 95.3 percent of adult males aged 18 to 44 who were only or mostly attracted to females and 93.4 percent of females in this age group who were only or mostly attracted to males. The NSDUH estimates for males aged 18 to 44 for (a) being equally attracted to males or females and (b) being only or mostly attracted to males were greater than the NSFG estimates, but the differences between the estimates

from the two surveys were not significant. Thus, the lower percentage of males in NSDUH who reported opposite-sex attraction was not explained by males in NSDUH being more likely to report same-sex attraction. Rather, the lower percentage of males reporting opposite-sex attraction was partly offset by a higher percentage of males in NSDUH who were not sure of their attraction. Unlike the pattern for males, women in NSDUH were more likely than those in the NSFG to report that they were equally attracted to males or females (4.3 vs. 3.2 percent) or that they were only or mostly attracted to females (2.5 vs. 1.6 percent).

Although estimated percentages for missing data are another indicator of data quality, several percentages for various types of missing data (i.e., “don’t know,” “refused,” or “blank”) did not have sufficient precision to be published.²⁰ However, females aged 18 to 44 in NSDUH were more likely than females in this age group in the NSFG to refuse to report their sexual attraction (1.0 vs. 0.4 percent). In addition, 0.6 percent of males aged 18 to 44 in the 2015 NSDUH refused to report their sexual attraction.

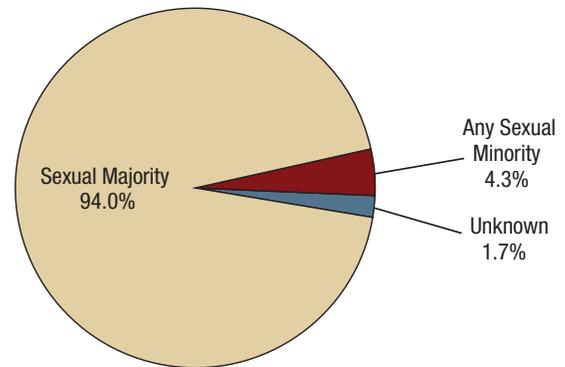
Sexual Identity

Based on the 2015 NSDUH data, 4.3 percent of adults aged 18 or older in 2015 identified as a sexual minority, including 1.8 percent who identified as being lesbian or gay and 2.5 percent who identified as being bisexual (Figure 1

and Table B.2 in Appendix B). An estimated 94.0 percent of adults identified as being heterosexual.

In addition to the 2015 NSDUH, the 2014 NHIS, 2014 GSS, and 2011-2013 NSFG include questions about sexual identity (Table 2). Although the questions are relatively similar across all four surveys, there is notable variation in the response options and response option order. Despite these differences, comparison across all four surveys is still useful for assessing data quality.

Figure 1. Sexual Identity among Adults Aged 18 or Older: Percentages, 2015



Note: Any Sexual Minority includes adults who identified as being lesbian or gay (1.8 percent) or bisexual (2.5 percent). Sexual Majority includes adults who identified as being heterosexual or straight. Unknown includes adults who did not know or refused to report their sexual identity (0.6 and 1.0 percent, respectively) or who had other missing data (0.1 percent).

Table 2. Sexual Identity Questions in the National Survey on Drug Use and Health (NSDUH), National Health Interview Survey (NHIS), General Social Survey (GSS), and National Survey of Family Growth (NSFG)

NSDUH, 2015	NHIS, 2014	GSS, 2014	NSFG, 2011-2013
<p><i>Which one of the following do you consider yourself to be?</i></p> <ul style="list-style-type: none"> - Heterosexual, that is, straight - (If female respondent) Lesbian or Gay - (If male respondent) Gay - Bisexual 	<p><i>Which of the following best represents how you think of yourself?</i></p> <ul style="list-style-type: none"> - (If male) Gay - (If female) Lesbian or gay - (If male) Straight, that is, not gay - (If female) Straight, that is, not lesbian or gay - Bisexual - Something else¹ 	<p><i>Which of the following best describes you?</i></p> <ul style="list-style-type: none"> - Gay, lesbian, or homosexual - Bisexual - Heterosexual or straight 	<p><i>Do you think of yourself as...</i></p> <ul style="list-style-type: none"> - Heterosexual or straight - (If female) Homosexual, gay, or lesbian - (If male) Homosexual or gay - Bisexual

¹ NHIS respondents who answered “Something else” were asked a follow-up question to clarify what they meant by “something else.” Response choices in this question (in addition to “Refused” or “Don’t know”) were (1) You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual; (2) You are transgender, transsexual or gender variant; (3) You have not figured out or are in the process of figuring out your sexuality; (4) You do not think of yourself as having sexuality; (5) You do not use labels to identify yourself; or (6) You mean something else.

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2002-2015. Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Health Interview Survey, 2014. NORC at the University of Chicago, General Social Survey, 1972-2014. CDC, NCHS, National Survey of Family Growth, 2011-2013.

As was the case for sexual attraction, the sexual identity data from NSDUH are reasonably comparable with the data from other surveys (Table B.2). Among all adults aged 18 or older, the percentage that identified as being heterosexual ranged from 87.2 percent in the 2014 GSS to 94.5 percent in the 2014 NHIS. Among adults aged 18 to 44, 92.1 percent of those in NSDUH and 93.6 percent of those in the 2011-2013 NSFG identified as heterosexual.

Overall, the percentages of adults aged 18 or older in the GSS who reported being heterosexual were lower than the percentages in NSDUH for all adults and for males and females. In contrast, estimates for specific sexual minority groups (i.e., lesbian or gay, bisexual) were not significantly different between NSDUH and the GSS for all adults and among males and females. However, the estimates for the “blank” category were higher in the GSS than in NSDUH.²¹ When responses for “blank,” “don’t know,” and “refused” were not included in the percentages for the GSS, 95.5 percent of all adults in the GSS were estimated to be heterosexual, which was similar to the NSDUH estimate in Table B.2. The estimated percentage of adult males in the GSS who were heterosexual when missing data were excluded (95.8 percent) also was similar to the NSDUH estimate for males. An estimated 95.2 percent of adult females in the GSS were heterosexual when missing data were excluded. Excluding missing data in the GSS changed the GSS estimate for heterosexual females from being lower than the NSDUH estimate to being greater than the NSDUH estimate.

Both adult males and adult females in the 2015 NSDUH were more likely to report that they were bisexual compared with their counterparts in the 2014 NHIS. For example, 3.5 percent of adult females in NSDUH and 1.0 percent of adult females in the NHIS reported that they were bisexual. Adult females in NSDUH were also somewhat less likely than their counterparts in the NHIS to report that they were heterosexual (92.9 vs. 94.3 percent). The inclusion of the “Something Else” category in the NHIS but not in NSDUH does not appear to explain these differences.

Across all surveys, estimates of adults not knowing or refusing to report their sexual identity were low but were somewhat higher in NSDUH than in other surveys (Table B.2). For example, 0.6 percent of adults in the 2015 NSDUH did not know their sexual identity compared with 0.4 percent of those in the 2014 NHIS. An estimated 1.0 percent of adults in NSDUH refused to report their sexual identity compared with 0.6 percent of those in the

NHIS. A small number of respondents in the 2014 GSS answered the sexual identity question as “don’t know” or “refused,” such that the corresponding percentages for the GSS rounded to less than 0.1 percent.

Summary of Estimates for Sexual Attraction and Identity in NSDUH and Other Data Sources

The goal of comparing estimates of sexual attraction and sexual identity from NSDUH with estimates from other national data sources is to aid policymakers, researchers, and other users of NSDUH data to better understand the quality of the data that are produced by national studies. Substantial methodological differences across the data sources make it difficult to designate a particular survey’s estimates as being the “best.” Each study that was reviewed in the previous sections was designed for a different purpose (see Table A.1 in Appendix A) and therefore has different strengths. Although there are methodological differences between NSDUH and the other data sources, the estimates of sexual attraction and sexual identity all indicate that the large majority of adults identifies themselves as being only or mostly attracted to the opposite sex and being heterosexual. Where statistically significant differences were found, the small differences in the estimates do not raise questions about the validity of the estimates in these surveys.

The remainder of this report focuses on NSDUH data and presents substance use and mental health estimates for sexual minority and sexual majority members as defined by the responses to the 2015 NSDUH sexual identity questions. Given the high proportion of adults in NSDUH who identified as part of the sexual majority (94.0 percent), the estimates of substance use and mental health issues for adults who identified as part of the sexual majority are typically similar to those for all adults as a whole. National estimates of substance use and mental health issues among all adults can be found in a separate report²² and in the 2015 detailed tables that are available at <http://www.samhsa.gov/data/>.

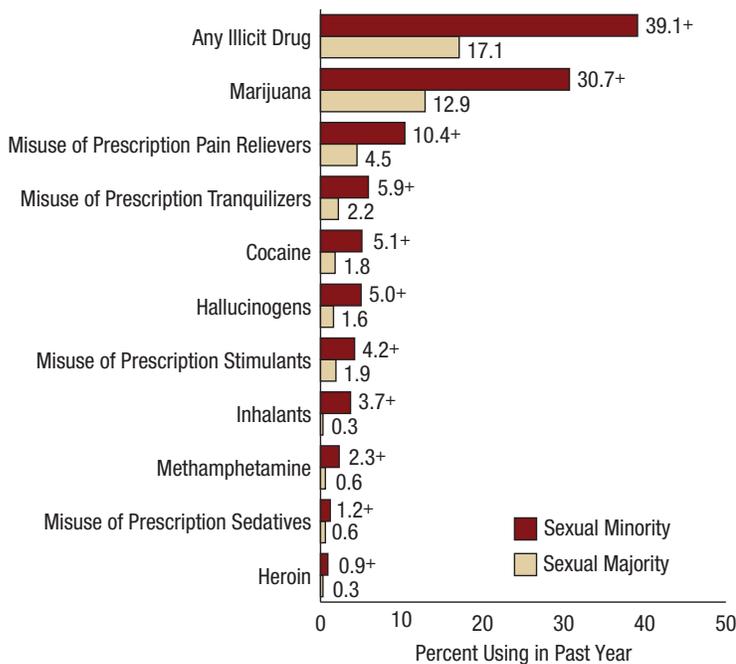
Illicit Drug Use

NSDUH obtains information on 10 categories of illicit drugs: marijuana; cocaine in any form, including crack; heroin; hallucinogens; inhalants; methamphetamine; and the misuse of prescription pain relievers, tranquilizers, stimulants, and sedatives. Misuse of prescription drugs is defined as use in any way not directed by a doctor, including use without a prescription of one’s own; use in greater

amounts, more often, or longer than told to take a drug; or use in any other way not directed by a doctor. Estimates of “any” illicit drug use reported from NSDUH reflect the data from these 10 drug categories. NSDUH produces estimates of lifetime, past year, and past month (also referred to as “current”) illicit drug use. This section focuses on the use of illicit drugs in the past year (i.e., within 12 months of the interview date).

In 2015, sexual minority adults were more likely than sexual majority adults to be past year users of any illicit drug (Figures 2 and 3) and to be past year users of each of the 10 categories of illicit drugs in NSDUH (Figure 2). Among sexual minority adults, 39.1 percent used illicit drugs in the past year, or nearly 2 out of 5. Nearly one third of sexual minority adults (30.7 percent) used marijuana in the past year (Figure 4), and about 1 in 10 (10.4 percent) misused prescription pain relievers (Figure 5). In comparison, among sexual majority adults, 17.1 percent used illicit drugs in the past year, 12.9 percent used marijuana, and 4.5 percent misused prescription pain relievers.

Figure 2. Past Year Illicit Drug Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Drug Type: Percentages, 2015



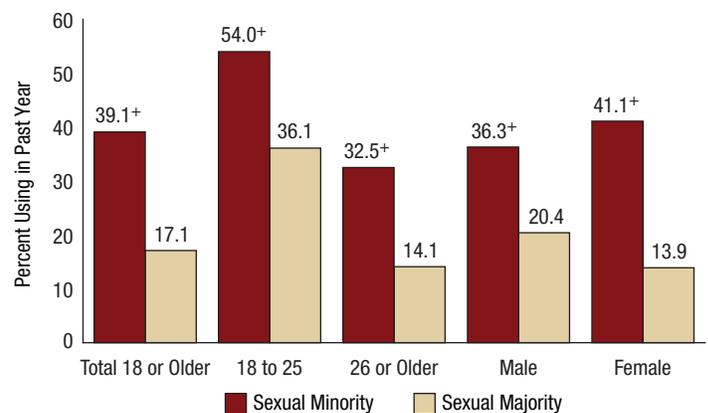
+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

In the past year, sexual minority adults were also more likely than sexual majority adults to have engaged in the following in the past year (Figure 2 and Table B.4 in Appendix B):

- cocaine use (5.1 vs. 1.8 percent);
- heroin use (0.9 vs. 0.3 percent);
- use of hallucinogens (5.0 vs. 1.6 percent), including use of lysergic acid diethylamide (LSD) (1.7 vs. 0.5 percent) and Ecstasy (3.2 vs. 0.9 percent);

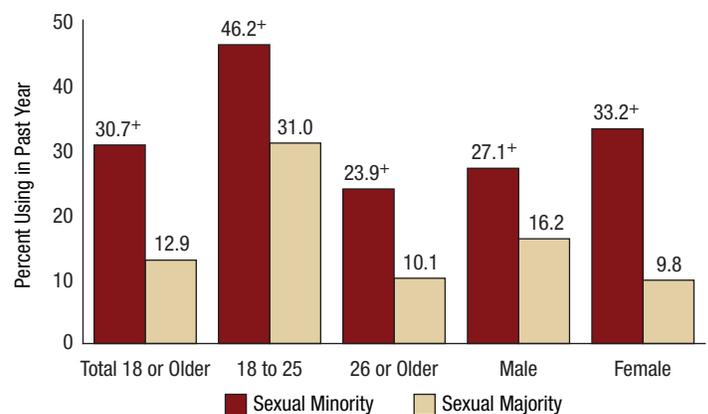
Figure 3. Past Year Illicit Drug Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

Figure 4. Past Year Marijuana Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



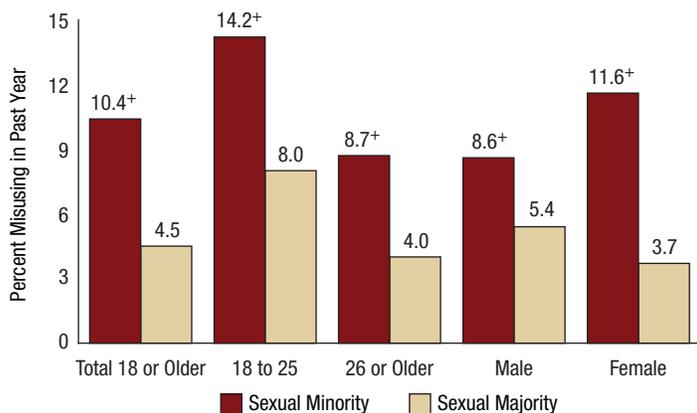
+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

- use of inhalants (3.7 vs. 0.3 percent);
- methamphetamine use (2.3 vs. 0.6 percent);
- misuse of prescription tranquilizers (5.9 vs. 2.2 percent);
- misuse of prescription stimulants (4.2 vs. 1.9 percent); and
- misuse of prescription sedatives (1.2 vs. 0.6 percent).

These data consistently indicate higher estimates of substance use among sexual minority adults in comparison with those in the sexual majority. The consistency of these results is underscored in the following sections where comparisons are made by sex and age group for any past year illicit drug use, marijuana use, and the misuse of prescription pain relievers among sexual minority and sexual majority adults (Tables B.5 to B.8 in Appendix B).

Figure 5. Past Year Misuse of Prescription Pain Relievers among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



⁺ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

By Sex

Both adult males and females who were sexual minorities were more likely than their sexual majority counterparts to be illicit drug users in the past year (Tables B.5 and B.6 in Appendix B). An estimated 36.3 percent of sexual minority males and 41.1 percent of sexual minority females used illicit drugs in the past year (Figure 3). Corresponding percentages for sexual majority adults were 20.4 percent for males and 13.9 percent for females.

For sexual minority males, 27.1 percent used marijuana in the past year (Figure 4), and 8.6 percent misused

prescription pain relievers in that period (Figure 5). In comparison, among sexual majority males, 16.2 percent used marijuana in the past year, and 5.4 percent misused prescription pain relievers. Sexual minority men were also more likely than sexual majority males to be past year users of cocaine, hallucinogens, LSD, Ecstasy, inhalants, and methamphetamine and to have misused prescription tranquilizers in the past year.

In particular, 7.5 percent of sexual minority males used inhalants in the past year compared with 0.3 percent of sexual majority males (Table B.5). This finding for the use of inhalants in the past year among sexual minority males is noteworthy because the use of inhalants in the general population is more likely to occur among adolescents than adults.^{1,22} Estimates of heroin use in the past year and the misuse of prescription stimulants and sedatives in the past year were similar for sexual minority and sexual majority males.

For sexual minority females, 33.2 percent used marijuana in the past year (Figure 4), and 11.6 percent misused prescription pain relievers in that period (Figure 5). In comparison, among sexual majority females, 9.8 percent used marijuana in the past year, and 3.7 percent misused prescription pain relievers. Sexual minority females were also more likely than sexual majority females to be past year users of cocaine, heroin, hallucinogens, LSD, Ecstasy, inhalants, and methamphetamine and to have misused prescription tranquilizers, stimulants, and sedatives in the past year (Table B.6).

By Age Group

Young adults aged 18 to 25 and adults aged 26 or older who were sexual minorities were more likely than their sexual majority counterparts to be past year users of most illicit drugs (Tables B.7 and B.8 in Appendix B). An estimated 54.0 percent of sexual minority young adults and 36.1 percent of sexual majority young adults used illicit drugs in the past year (Figure 3). Among adults aged 26 or older, about 1 in 3 of those who were sexual minorities (32.5 percent) used illicit drugs in the past year compared with about 1 in 7 sexual majority adults (14.1 percent).

Sexual minority young adults aged 18 to 25 were more likely than their sexual majority counterparts to be past year users of marijuana (46.2 vs. 31.0 percent) and to have misused prescription pain relievers in the past year (14.2 vs. 8.0 percent) (Figures 4 and 5, respectively). Young adults who were sexual minorities were also more likely than their sexual majority counterparts to be past year

users of cocaine, hallucinogens, LSD, Ecstasy, inhalants, and methamphetamine and to have misused prescription tranquilizers and sedatives in the past year. The estimates for sexual minority and sexual majority young adults were not significantly different for heroin use in the past year or for the misuse of prescription stimulants in the past year.

Sexual minority adults aged 26 or older were more likely than their sexual majority counterparts to be past year users of marijuana (23.9 vs. 10.1 percent) and to have misused prescription pain relievers in the past year (8.7 vs. 4.0 percent) (Figures 4 and 5, respectively). In addition, adults aged 26 or older who were sexual minorities were more likely than sexual majority adults in the same age group to be past year users of cocaine, heroin, hallucinogens, Ecstasy, inhalants, and methamphetamine and to have misused prescription tranquilizers and stimulants in the past year. The estimates for sexual minority and sexual majority adults aged 26 or older were not significantly different for the past year use of LSD or the misuse of prescription sedatives in the past year.

Cigarette Smoking

NSDUH asks respondents about their tobacco use in the 30 days before the interview (i.e., current use). Although NSDUH collects information on a variety of tobacco products, including cigarettes, smokeless tobacco (i.e., snuff, chewing tobacco, and “snus”), cigars, and pipe tobacco, this report focuses only on cigarette use because cigarettes are the most commonly used form of tobacco.²² Cigarette use in NSDUH is defined as smoking “part or all of a cigarette.” This section focuses on any current cigarette smoking. The next section discusses daily smoking among current smokers and smoking a pack or more of cigarettes per day among daily smokers in the past month. Appendix B also includes estimates for the current use of other forms of tobacco among sexual minority and majority adults.

In 2015, adults who were sexual minorities were more likely than sexual majority adults to be current cigarette smokers. Specifically, 32.2 percent of sexual minority adults were current cigarette smokers compared with 20.6 percent of sexual majority adults (Figure 6).

By Sex

For both males and females, higher percentages of sexual minority adults were current cigarette smokers compared with the percentages of sexual majority adults. An estimated

29.3 percent of sexual minority males and 34.2 percent of sexual minority females were current cigarette smokers (Figure 6). Corresponding percentages for sexual majority adults were 23.6 percent for males and 17.8 percent for females.

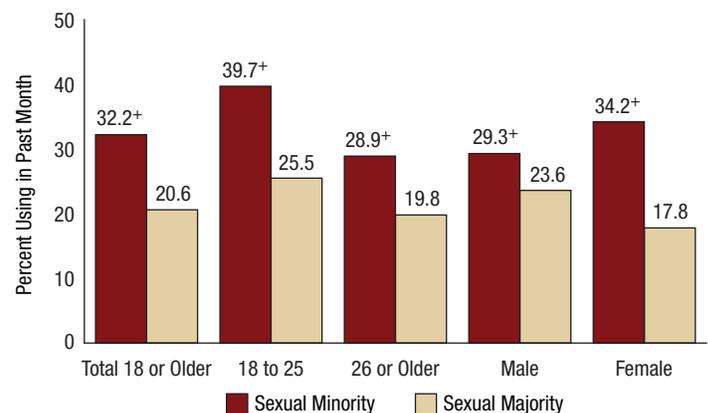
By Age Group

In 2015, young adults aged 18 to 25 and adults aged 26 or older who were sexual minorities were more likely to be current cigarette smokers compared with their sexual majority counterparts. An estimated 39.7 percent of sexual minority young adults and 25.5 percent of sexual majority young adults were current cigarette smokers (Figure 6). Among adults aged 26 or older, 28.9 percent of those who were sexual minorities were current cigarette smokers compared with 19.8 percent of those who were part of the sexual majority.

Daily Cigarette Smoking

Compared with their sexual majority counterparts, sexual minority current smokers aged 18 or older were *less* likely to be daily cigarette smokers in the past month or to be daily cigarette smokers who smoked a pack or more of cigarettes per day. This pattern is in contrast to the pattern for current cigarette smoking, where sexual minority adults were more likely than those in the sexual majority to be current smokers. Among adults who were current cigarette smokers, 59.6 percent of sexual majority adults were daily cigarette

Figure 6. Past Month Cigarette Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



⁺ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

smokers compared with 51.6 percent of sexual minority adults who were daily cigarette smokers (Figure 7).

In 2015, an estimated 41.8 percent of sexual majority adults who were daily cigarette smokers smoked a pack or more of cigarettes per day (Table B.9 in Appendix B). In comparison, 32.5 percent of sexual minority adults who were daily cigarette smokers reported that they smoked a pack or more of cigarettes per day.

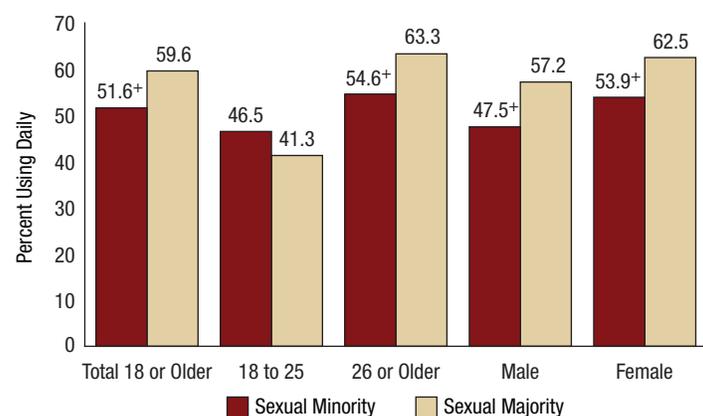
By Sex

Among current cigarette smokers, lower percentages of sexual minority males and females were daily cigarette smokers compared with sexual majority males and females. An estimated 47.5 percent of sexual minority males and 53.9 percent of sexual minority females who were current smokers reported daily cigarette smoking (Figure 7). Corresponding percentages for sexual majority adults who were current smokers were 57.2 percent for males and 62.5 percent for females. Because there was not adequate precision to report some estimates, comparisons are not made for smoking a pack or more of cigarettes per day among males and females for sexual majority and sexual minority adults who were daily smokers.

By Age Group

Among current cigarette smokers, a lower percentage of sexual minority adults aged 26 or older were daily cigarette smokers compared with their sexual majority counterparts.

Figure 7. Daily Cigarette Use among Sexual Minority and Sexual Majority Past Month Cigarette Smokers Aged 18 or Older, by Age Group and Sex: Percentages, 2015



⁺ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

In 2015, an estimated 46.5 percent of sexual minority young adults who smoked cigarettes in the past month and 41.3 percent of their sexual majority counterparts were daily cigarette smokers (Figure 7). Among adults aged 26 or older who were current smokers, 54.6 percent of those who were sexual minorities and 63.3 percent of those who were part of the sexual majority were daily cigarette smokers.

Among current daily cigarette smokers, a lower percentage of sexual minority young adults aged 18 to 25 smoked a pack or more of cigarettes per day compared with their sexual majority counterparts. In 2015, sexual minority young adults who were daily smokers in the past month were less likely to smoke a pack or more of cigarettes per day compared with their sexual majority counterparts (13.3 vs. 23.7 percent) (Table B.12 in Appendix B). Among adults aged 26 or older who were daily smokers in the past month, 42.5 percent of sexual minority adults and 44.2 percent of sexual majority adults smoked a pack or more of cigarettes per day (Table B.13).

Alcohol Use

NSDUH asks respondents about their alcohol use in the 30 days before the interview (i.e., current use). NSDUH also collects information on binge alcohol use and heavy alcohol use in the past 30 days.²³ Binge drinking is defined for males as drinking five or more drinks on an occasion on at least 1 day in the past 30 days and for females as drinking four or more drinks on an occasion on at least 1 day in that period. Heavy alcohol use is defined as binge drinking on 5 or more days in the past 30 days. Any alcohol use, binge drinking, and heavy drinking are not mutually exclusive categories of use: heavy use is included in estimates of binge and current use, and binge use is included in estimates of current use. This section focuses on current alcohol use and on binge and heavy alcohol use in the past month.

In 2015, sexual minority adults aged 18 or older were more likely than sexual majority adults to be current alcohol drinkers or binge drinkers in the past month. However, similar percentages of sexual minority and sexual majority adults were heavy alcohol users in the past month. Among sexual minority adults, 63.6 percent were current alcohol drinkers (Figure 8), and 36.1 percent were binge alcohol drinkers (Figure 9). In contrast, among sexual majority adults, 56.2 percent were current alcohol drinkers, and 26.7 percent were binge alcohol drinkers. An estimated 8.2 percent of sexual minority adults

and 7.1 percent of sexual majority adults were heavy alcohol drinkers (Figure 10).

By Sex

Similar percentages of sexual minority males and sexual majority males were current alcohol users, binge alcohol users, and heavy alcohol users (Figures 8, 9, and 10). However, sexual minority females were more likely than their sexual majority counterparts to be current alcohol users, binge drinkers, and heavy drinkers. Among sexual minority females, 64.1 percent were current alcohol drinkers, 38.1 percent were binge drinkers, and 8.0 percent were heavy drinkers. Corresponding percentages for sexual majority females were 51.0 percent for current alcohol use, 21.3 percent for binge alcohol use, and 4.4 percent for heavy alcohol use.

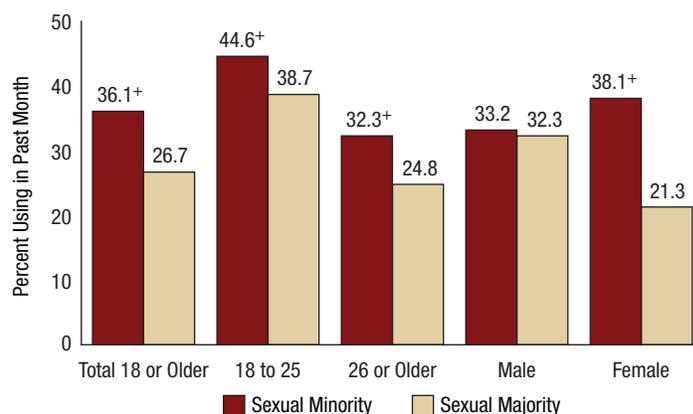
By Age Group

In 2015, young adults aged 18 to 25 and adults aged 26 or older who were sexual minorities were more likely to be current alcohol drinkers and binge drinkers compared with their sexual majority counterparts (Figures 8 and 9). The percentages of young adults or adults aged 26 and older who were heavy alcohol users did not differ significantly between sexual minority and sexual majority adults (Figure 10).

An estimated 64.1 percent of sexual minority young adults and 58.1 percent of sexual majority young adults were current alcohol drinkers. An estimated 44.6 percent sexual

minority young adults were binge drinkers compared with 38.7 percent sexual majority adults. Among adults aged 26 or older, 63.4 percent of those who were sexual minorities were current alcohol drinkers compared with 55.9 percent of sexual majority adults in this age group. An estimated 32.3 percent of sexual minority adults and 24.8 percent of sexual majority adults aged 26 or older were binge drinkers.

Figure 9. Past Month Binge Alcohol Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015

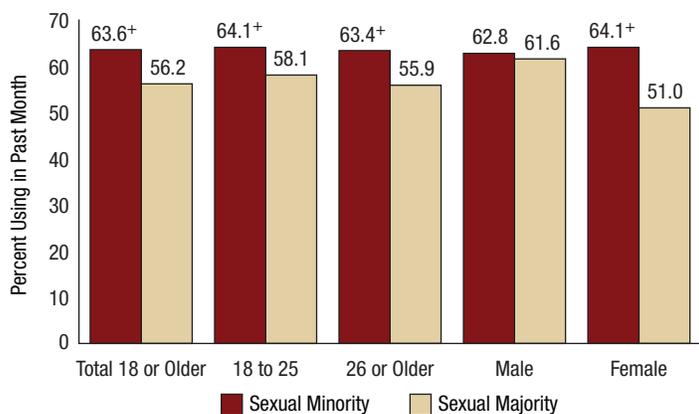


+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: In 2015, the threshold for determining binge alcohol use for females changed from five or more drinks on an occasion to four or more drinks on an occasion.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

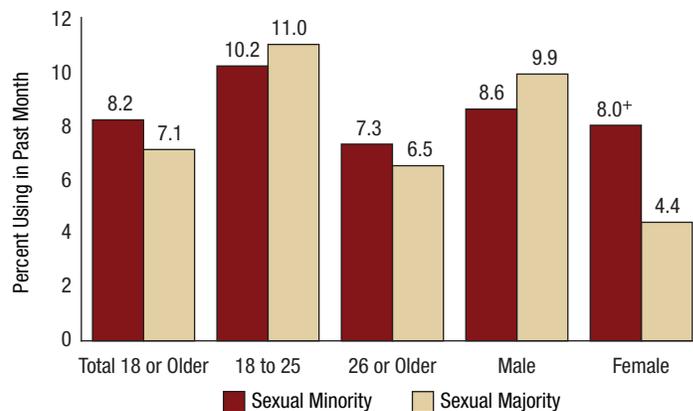
Figure 8. Past Month Alcohol Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

Figure 10. Past Month Heavy Alcohol Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: In 2015, the threshold for determining binge alcohol use for females changed from five or more drinks on an occasion to four or more drinks on an occasion. By definition, heavy alcohol users are binge alcohol users.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

Substance Use Disorders

Substance use disorders (SUDs) represent clinically significant impairment caused by the recurrent use of alcohol or other drugs (or both), including health problems, disability, and failure to meet major responsibilities at work, school, or home. NSDUH includes a series of questions to estimate the percentage of the population aged 12 or older who had SUDs in the past 12 months. Respondents were asked questions about SUDs if they previously reported use in the past 12 months of alcohol or illicit drugs (i.e., marijuana, cocaine, heroin, hallucinogens, inhalants, methamphetamine, and the misuse of prescription pain relievers, tranquilizers, stimulants, and sedatives). These SUD questions classify people as having an SUD in the past 12 months and are based on criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders*, 4th edition (DSM-IV).^{24,25}

This section focuses on any SUD, alcohol use disorder, overall illicit drug use disorder (including marijuana use disorder, pain reliever use disorder, and disorders for the other illicit drugs mentioned in the previous paragraph), and the occurrence of both alcohol and illicit drug use disorders in the past year. SUD estimates are presented for sexual minority and sexual majority adults aged 18 or older and by sex and by age group.

Sexual minority adults were more likely than sexual majority adults to have SUDs in the past year. In 2015, an estimated 15.1 percent of sexual minority adults had an alcohol or illicit drug use disorder in the past year (Figure 11) compared with 7.8 percent of sexual majority adults.

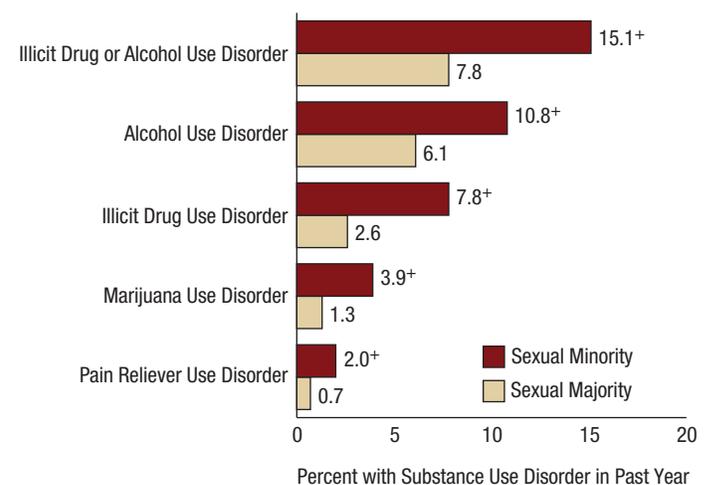
Sexual minority adults were more likely than sexual majority adults to have disorders related to their use of alcohol, use or misuse of illicit drugs, use of marijuana, or misuse of pain relievers (Figure 11). About 1 in 10 sexual minority adults had an alcohol use disorder in the past year (10.8 percent) compared with about 1 in 16 sexual majority adults (6.1 percent). An estimated 7.8 percent of sexual minority adults had an illicit drug use disorder compared with 2.6 percent of sexual majority adults. Sexual minority adults were also more likely than sexual majority adults to have a marijuana use disorder (3.9 vs. 1.3 percent) or a pain reliever use disorder in the past year (2.0 vs. 0.7 percent). In addition, sexual minority adults were more likely than their sexual majority counterparts to have both an alcohol use disorder and an illicit drug use disorder in the past year (3.5 vs. 0.9 percent) (Table B.16).

By Sex

Similar to the pattern for all adults aged 18 or older, adult males and females who were sexual minorities were more likely than their sexual majority counterparts to have an SUD in the past year. An estimated 16.7 percent of sexual minority males and 14.0 percent of sexual minority females had an SUD in the past year (Tables B.17 and B.18 in Appendix B). Corresponding percentages for sexual majority adults were 10.6 percent for males and 5.1 percent for females.

Sexual minority males and females were also more likely than their sexual majority counterparts to have disorders related to their use of alcohol, use or misuse of illicit drugs, use of marijuana, or misuse of pain relievers (Tables B.17 and B.18). An estimated 10.8 percent of sexual minority males and females had an alcohol use disorder in the past year compared with 8.3 percent of sexual majority males and 3.9 percent of sexual majority females. Sexual minority males and females were also more likely than sexual majority males and females to have had an illicit drug use disorder in the past year (9.6 and 6.6 percent for sexual minority males and females, respectively, vs. 3.7 and 1.6 percent for sexual majority males and females, respectively). An estimated 4.5 percent of sexual minority males and 3.5 percent of sexual minority females had a marijuana use disorder in the past year. In comparison, 1.9 percent of sexual majority males

Figure 11. Substance Use Disorder in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: The estimated percentages of people with substance use disorders are not mutually exclusive because people could have use disorders for more than one substance.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

and 0.7 percent of sexual majority females had a marijuana use disorder. Similarly, the 2.5 percent of sexual minority males and 1.7 percent of sexual minority females who had a pain reliever use disorder in the past year were higher than the corresponding percentages for sexual majority males and females (1.0 and 0.5 percent, respectively).

In addition, sexual minority males and females were more likely than their sexual majority counterparts to have both an alcohol use disorder and an illicit drug use disorder in the past year. For males, 3.7 percent of sexual minority males and 1.4 percent of sexual majority males had both alcohol and illicit drug use disorders in the past year. An estimated 3.4 percent of sexual minority females and 0.4 percent of sexual majority females had both alcohol and illicit drug use disorders in the past year.

By Age Group

In 2015, both young adults aged 18 to 25 and adults aged 26 and older who were sexual minorities were more likely to have an SUD compared with their sexual majority counterparts. An estimated 20.1 percent of sexual minority young adults had an SUD in the past year compared with 14.8 percent of sexual majority young adults (Table B.19). Among adults aged 26 or older, 12.8 percent of sexual minority adults had an SUD compared with 6.7 percent among adults in this age group who were part of the sexual majority (Table B.20).

Among young adults aged 18 to 25 and among adults aged 26 or older, those who were sexual minorities were also more likely than their sexual majority counterparts to have disorders related to their use of alcohol, use or misuse of illicit drugs, use of marijuana, or misuse of pain relievers (Tables B.19 and B.20). An estimated 14.7 percent of sexual minority young adults had an alcohol use disorder in the past year compared with 10.6 percent of sexual majority young adults. Among adults aged 26 or older, 9.1 percent of sexual minority adults had an alcohol use disorder compared with 5.3 percent of sexual majority adults in this age group. An estimated 11.7 percent of sexual minority young adults and 6.8 percent of sexual majority young adults had an illicit drug use disorder in the past year. Among adults aged 26 or older, 6.0 percent of those who were sexual minorities had an illicit drug use disorder compared with 2.0 percent of those who were part of the sexual majority.

The percentages of sexual minority young adults aged 18 to 25 and adults aged 26 or older who had a marijuana use

disorder in the past year (7.4 and 2.3 percent, respectively) were greater than the percentages among their sexual majority counterparts (4.9 and 0.7 percent, respectively). An estimated 2.2 percent of sexual minority young adults and 1.1 percent of sexual majority young adults had a pain reliever use disorder in the past year. Among adults aged 26 or older, 2.0 percent of those who were sexual minorities had a pain reliever use disorder compared with 0.7 percent of those who were part of the sexual majority. In 2015, young adults and adults aged 26 and older who were sexual minorities were also more likely to have both an alcohol use disorder and illicit drug use disorder compared with their sexual majority counterparts (Tables B.19 and B.20).

Need for Substance Use Treatment

NSDUH includes questions that are used to identify people who needed substance use treatment in the past year (i.e., treatment for problems related to the use of alcohol or illicit drugs). People are defined as needing substance use treatment if they had an SUD in the past year or if they received substance use treatment at a specialty facility²⁶ in the past year.²⁷ This section focuses on the need for substance use treatment for either alcohol or illicit drug use, alcohol use only, and illicit drug use only in the past year. For brevity, the need for treatment for the use of alcohol or illicit drugs is subsequently referred to as the need for “substance use treatment.”

Most people who needed substance use treatment in the past year had past year SUDs regardless of their sexual identity.²⁸ For example, 15.1 percent of sexual minority adults had an SUD in the past year (Figure 11), and 15.9 percent needed substance use treatment (Table B.21 in Appendix B). Among sexual majority adults, 7.8 percent had an SUD, and 8.1 percent needed substance use treatment.

This section presents percentages and estimated numbers of sexual minority adults who needed substance use treatment. Presenting estimated numbers can be useful to policymakers and program planners for assessing the need for substance use treatment services among sexual minorities. Statistical comparisons are made between the percentages of sexual minority and sexual majority adults who needed substance use treatment.

In 2015, 1.7 million sexual minority adults aged 18 or older needed substance use treatment, including 1.2 million sexual minority adults who needed treatment for their use of alcohol and 0.9 million who needed treatment for their use

of illicit drugs. The number of sexual minority adults who needed treatment for their use of alcohol or for their use of illicit drugs includes adults who needed treatment for their use of both types of substances. As shown in [Table B.21](#) in Appendix B, higher percentages of sexual minority adults than sexual majority adults needed substance use treatment (15.9 vs. 8.1 percent), alcohol use treatment (11.5 vs. 6.3 percent), and illicit drug use treatment (8.4 vs. 2.9 percent).

By Sex

The 1.7 million sexual minority adults aged 18 or older who needed substance use treatment included 734,000 males and 927,000 females. The 734,000 sexual minority males who needed substance use treatment included 500,000 who needed treatment for their use of alcohol and 428,000 who needed treatment for their illicit drug use. As shown in [Table B.21](#) in Appendix B, higher percentages of sexual minority males than sexual majority males needed substance use treatment (17.5 vs. 11.0 percent), treatment for alcohol use (11.9 vs. 8.6 percent), and treatment for illicit drug use (10.2 vs. 4.0 percent).

Among the 927,000 sexual minority females who needed substance use treatment, 703,000 needed treatment for their use of alcohol, and 453,000 needed treatment for their use of illicit drugs. As shown in [Table B.21](#) in Appendix B, higher percentages of sexual minority females than sexual majority females needed substance use treatment (14.8 vs. 5.3 percent), treatment for alcohol use (11.2 vs. 4.1 percent), and treatment for illicit drug use (7.2 vs. 1.8 percent).

By Age Group

The 1.7 million sexual minority adults aged 18 or older who needed substance use treatment included 659,000 young adults aged 18 to 25 and 1.0 million adults aged 26 or older. The 659,000 sexual minority young adults who needed substance use treatment included 486,000 who needed treatment for their use of alcohol and 389,000 who needed treatment for their illicit drug use. As shown in [Table B.21](#) in Appendix B, higher percentages of sexual minority young adults than sexual majority young adults needed substance use treatment (20.4 vs. 15.1 percent), treatment for alcohol use (15.1 vs. 10.8 percent), and treatment for illicit drug use (12.1 vs. 7.1 percent).

Among the 1.0 million sexual minority adults aged 26 or older who needed substance use treatment, 717,000 needed treatment for their use of alcohol, and 492,000 needed treatment for their use of illicit drugs. As shown

in [Table B.21](#) in Appendix B, higher percentages of sexual minority adults aged 26 or older than sexual majority adults in this age group needed substance use treatment (13.9 vs. 7.0 percent), treatment for alcohol use (9.9 vs. 5.6 percent), and treatment for illicit drug use (6.8 vs. 2.2 percent).

Receipt of Substance Use Treatment

NSDUH respondents who used alcohol or illicit drugs in their lifetime are asked whether they received treatment for their use of alcohol or illicit drugs in the 12 months prior to the interview date (i.e., the past year). Substance use treatment refers to treatment or counseling that was received for illicit drug or alcohol use or for medical problems associated with the use of illicit drugs or alcohol. NSDUH collects information on the receipt of any substance use treatment and receipt of substance use treatment at a specialty facility. Receipt of any substance use treatment includes treatment that was received in the past year at any location, such as a hospital (inpatient), rehabilitation facility (outpatient or inpatient), mental health center, emergency room, private doctor's office, prison or jail, or a self-help group (e.g., such as Alcoholics Anonymous or Narcotics Anonymous). Receipt of substance use treatment at a specialty facility is defined as substance use treatment that an individual received at a hospital (only as an inpatient), a drug or alcohol rehabilitation facility (as an inpatient or outpatient), or a mental health center. The categories of any substance use treatment and treatment at a specialty facility are not mutually exclusive; substance use treatment at a specialty facility is included in estimates of any substance use treatment. People could report receiving treatment at more than one location.

This section focuses on adults who received any substance use treatment and treatment at specialty facilities. The section presents percentages and estimated numbers of sexual minority adults who received substance use treatment. Statistical comparisons are made between the percentages of sexual minority and sexual majority adults who received substance use treatment.

In 2015, approximately 340,000 sexual minority adults aged 18 or older received any substance use treatment in the past year for their use of alcohol or illicit drugs, and 254,000 received substance use treatment at a specialty facility. These numbers correspond to 3.3 percent of sexual minority adults who received any substance use treatment in the past year and 2.4 percent who received substance use treatment at a specialty facility ([Table B.22](#) in Appendix B).

As previously noted, sexual minority adults were more likely than sexual majority adults to need substance use treatment. Sexual minority adults in 2015 were more likely than their sexual majority counterparts to receive any substance use treatment in the past year (3.3 vs. 1.3 percent) or to receive substance use treatment at a specialty facility (2.4 vs. 0.9 percent) (Table B.22). This pattern held among most subgroups by sex and age group. The one exception was that there was no significant difference for young adults aged 18 to 25 in the percentages of sexual minority and sexual majority adults who received any substance use treatment in the past year.

Receipt of Substance Use Treatment at a Specialty Facility among Adults Who Needed Treatment

Although sexual minority adults aged 18 or older were more likely than sexual majority adults to need substance use treatment, sexual minority adults who needed substance use treatment were more likely than their sexual majority counterparts to have received substance use treatment at a specialty facility in the past year.²⁹ An estimated 15.3 percent of sexual minority adults who needed substance use treatment received treatment at a specialty facility compared with 10.6 percent of sexual majority adults who needed treatment (Figure 12). This higher percentage of sexual minority adults who received treatment at a specialty facility among those who needed treatment was driven by

the receipt of treatment at a specialty facility among sexual minority adults aged 26 or older who needed treatment. An estimated 18.7 percent of sexual minority adults aged 26 or older who needed substance use treatment received treatment at a specialty facility compared with 11.7 percent of their sexual majority counterparts (Table B.23 in Appendix B). Nevertheless, most adults who needed substance use treatment did not receive treatment at a specialty facility regardless of their sexual identity.

Mental Health Issues and Mental Health Service Use

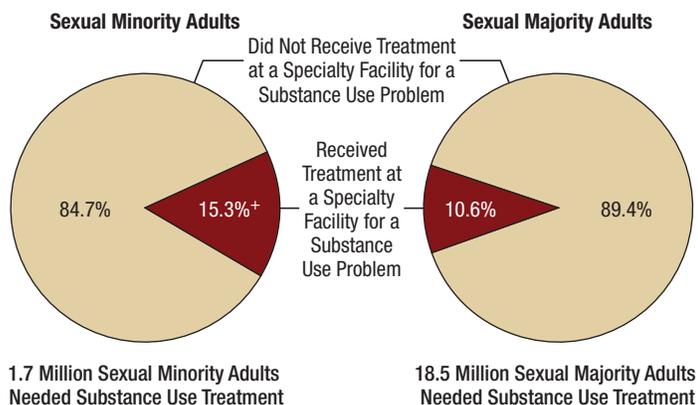
Mental disorders are generally characterized by changes in mood, thought, or behavior. They can make carrying out daily activities difficult and can impair an individual's ability to work or function in school, interact with family, and fulfill other major life functions. This section focuses on past year mental illness and mental health service use among adults.

Past Year Mental Illness among Adults

NSDUH provides estimates of any mental illness (AMI) and serious mental illness (SMI) for adults aged 18 or older.³⁰ Adults were defined as having AMI if they had any mental, behavioral, or emotional disorder in the past year that met DSM-IV criteria (excluding developmental disorders and SUDs). Adults with AMI were defined as having SMI if they had any mental, behavioral, or emotional disorder in the past year that substantially interfered with or limited one or more major life activities. AMI and SMI are not mutually exclusive categories; adults with SMI are included in estimates of adults with AMI. Adults with AMI who do not meet the criteria for having SMI are categorized as having AMI excluding SMI. This section includes past year estimates of adults with AMI, SMI, and AMI excluding SMI.³¹

Among sexual minority adults aged 18 or older in 2015, 3.9 million had AMI, 1.4 million had SMI, and 2.5 million had AMI excluding SMI. These numbers correspond to 37.4 percent of sexual minority adults who had AMI (Figure 13), 13.1 percent who had SMI (Figure 14), and 24.3 percent who had AMI excluding SMI (Figure 15). The percentages of sexual minority adults who had AMI, SMI, and AMI excluding SMI were greater than the corresponding percentages among sexual majority adults (17.1 percent who had AMI, 3.6 percent who had SMI, and 13.5 percent who had AMI without SMI).

Figure 12. Receipt of Specialty Treatment in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older Who Needed Substance Use Treatment: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: The circles for sexual minority adults and sexual majority adults are not drawn to scale.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

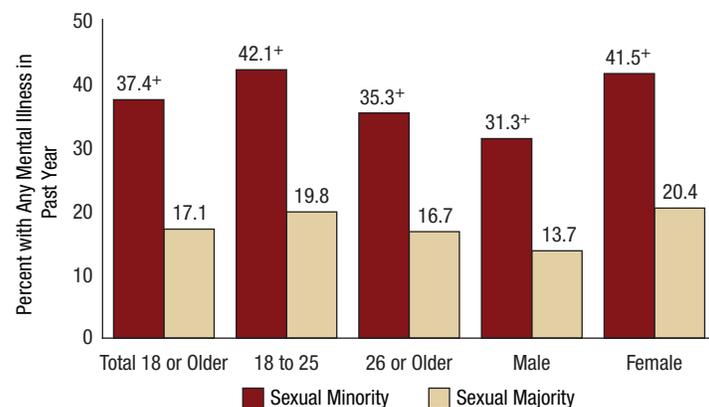
By Sex

The 3.9 million sexual minority adults in 2015 who had AMI included 1.3 million males and 2.6 million females. These numbers correspond to 31.3 percent of sexual minority males and 41.5 percent of sexual minority females who had AMI in the past year (Figure 13). The percentages of sexual minority males and females who had AMI in the past year were greater than the corresponding percentages for sexual majority adults (13.7 percent for males and 20.4 percent for females).

The 1.4 million sexual minority adults in 2015 who had SMI included 441,000 males and 928,000 females. These numbers correspond to 10.5 percent of sexual minority males and 14.8 percent of sexual minority females who had SMI (Figure 14). The percentages of sexual minority males and females who had SMI in the past year were greater than the corresponding percentages for sexual majority adults (2.7 percent for males and 4.5 percent for females).

Among the 2.5 million sexual minority adults in 2015 who had AMI excluding SMI, 874,000 were male, and 1.7 million were female. These numbers correspond to 20.8 percent of sexual minority males and 26.7 percent of sexual minority females who had AMI without SMI (Figure 15). The percentages of sexual minority males and females who had AMI excluding SMI were greater than the corresponding percentages for sexual majority adults (11.0 percent for males and 15.9 percent for females).

Figure 13. Any Mental Illness in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



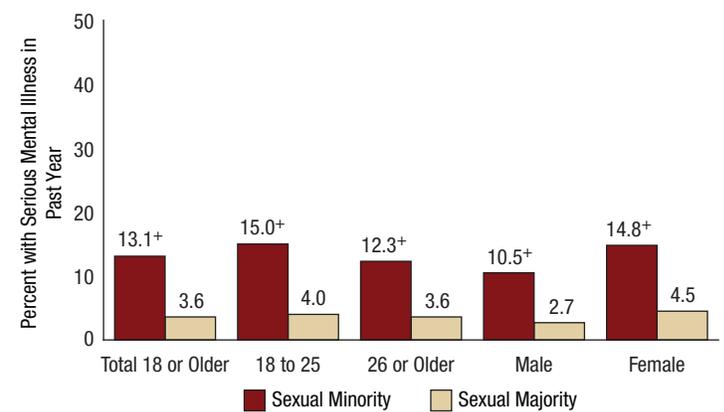
+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

By Age Group

The 3.9 million sexual minority adults in 2015 who had AMI included 1.4 million young adults aged 18 to 25 and 2.6 million adults aged 26 or older. These numbers correspond to 42.1 percent of sexual minority young adults and 35.3 percent of sexual minority adults aged 26 or older who had AMI (Figure 13). The percentages of sexual minorities who had AMI were greater than the corresponding percentages for sexual majority adults. An estimated 19.8 percent of sexual majority young adults

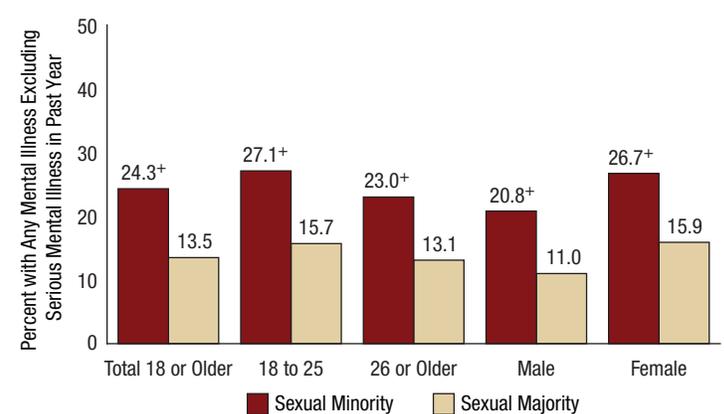
Figure 14. Serious Mental Illness in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

Figure 15. Any Mental Illness Excluding Serious Mental Illness in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

and 16.7 percent of sexual majority adults aged 26 or older had AMI.

The 1.4 million sexual minority adults in 2015 who had SMI included 484,000 young adults aged 18 to 25 and 886,000 adults aged 26 or older. These numbers correspond to 15.0 percent of sexual minority young adults and 12.3 percent of sexual minority adults aged 26 or older who had SMI (Figure 14). The percentages of sexual minorities who had SMI were greater than the corresponding percentages for sexual majority adults (4.0 percent of sexual majority young adults and 3.6 percent of sexual majority adults aged 26 or older).

Among the 2.5 million sexual minority adults in 2015 who had AMI excluding SMI, 875,000 were young adults aged 18 to 25, and 1.7 million were adults aged 26 or older. These numbers correspond to 27.1 percent of sexual minority young adults and 23.0 percent of sexual minority adults aged 26 or older who had AMI without SMI (Figure 15). The percentages of sexual minorities who had AMI excluding SMI were greater than the corresponding percentages for sexual majority adults (15.7 percent for young adults and 13.1 percent for adults aged 26 or older).

Mental Health Service Use among Adults

In NSDUH, all adults are asked whether they received treatment or counseling for any problem with emotions, “nerves,” or mental health in the past year in any inpatient or outpatient setting or if they used prescription medication in the past year for a mental or emotional condition. Respondents are asked not to include treatment for their use of alcohol or illicit drugs. The questions about the receipt of treatment or counseling for mental health issues do not ask specifically about treatment for a particular mental disorder. Consequently, references to treatment or counseling for any problem with emotions, nerves, or mental health are described broadly as “mental health service use.”

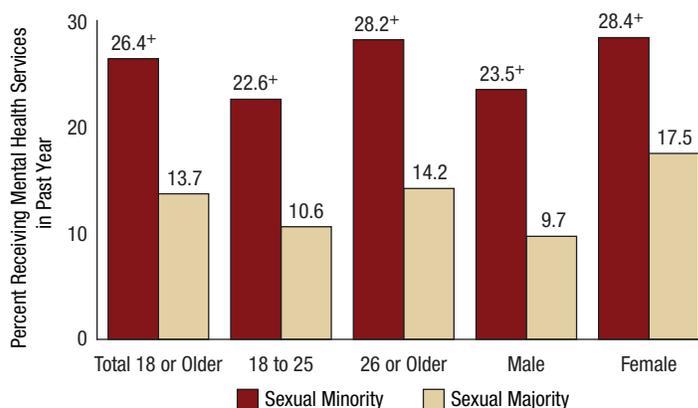
This section presents percentages and estimated numbers of sexual minority adults who received mental health services. Statistical comparisons are made between the percentages of sexual minority and sexual majority adults who received mental health services.

In 2015, an estimated 2.7 million sexual minority adults aged 18 or older received mental health services in the past year. A higher percentage of sexual minority adults than

sexual majority adults received mental health services in the past year (26.4 vs. 13.7 percent) (Figure 16).

The 3.9 million sexual minority adults aged 18 or older in 2015 who had AMI in the past year included 1.9 million adults who received mental health services in the past year, or 48.5 percent of sexual minority adults with AMI (Figure 17). Among adults with AMI, a higher percentage

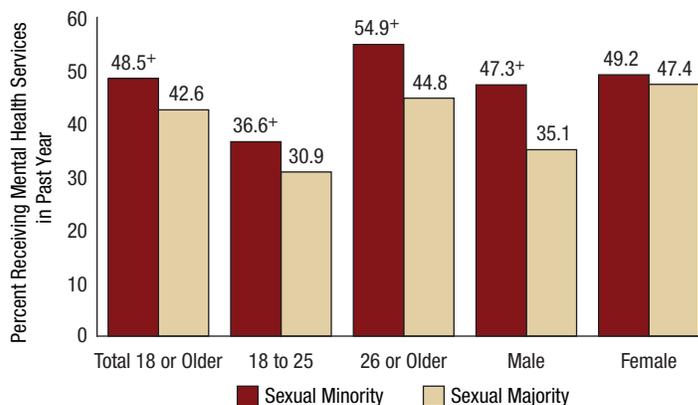
Figure 16. Received Mental Health Services in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



⁺ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

Figure 17. Received Mental Health Services in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older with Any Mental Illness in the Past Year, by Age Group and Sex: Percentages, 2015



⁺ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

of sexual minority adults than sexual majority adults received mental health services in the past year (48.5 vs. 42.6 percent). Taken together, about half or more of adults who had AMI did *not* receive mental health services in the past year, regardless of their sexual identity.

By Sex

Sexual minority males and females were more likely than their sexual majority counterparts to have disorders related to having received mental health care in the past year. An estimated 23.5 percent of sexual minority males and 28.4 percent sexual minority females received mental health care in the past year (Figure 16). Corresponding percentages for sexual majority adults were 9.7 percent for males and 17.5 percent for females.

Sexual minority males with AMI were also more likely than their sexual majority counterparts to have received mental health services in the past year (47.3 vs. 35.1 percent) (Figure 17). Among females with AMI, similar percentages of sexual minority females and sexual majority females received mental health services in the past year.

By Age Group

Sexual minority young adults aged 18 to 25 and adults aged 26 or older were more likely than their sexual majority counterparts to have received mental health care in the past year. An estimated 22.6 percent of sexual minority young adults received mental health care in the past year (Figure 16) compared with 10.6 percent of sexual majority young adults. Among adults aged 26 or older, 28.2 percent of those who were sexual minorities received mental health care compared with 14.2 percent of sexual majority adults.

Similarly, among adults with AMI, higher percentages of sexual minority young adults and adults aged 26 or older received mental health services compared with their sexual majority counterparts. An estimated 36.6 percent of sexual minority young adults aged 18 to 25 with AMI received mental health care in the past year (Figure 17) compared with 30.9 percent of sexual majority young adults with AMI. However, the majority of young adults who had AMI did not receive mental health care in the past year, regardless of their sexual identity. Among adults aged 26 or older with AMI, 54.9 percent of those who were sexual minorities received mental health care compared with 44.8 percent of sexual majority adults.

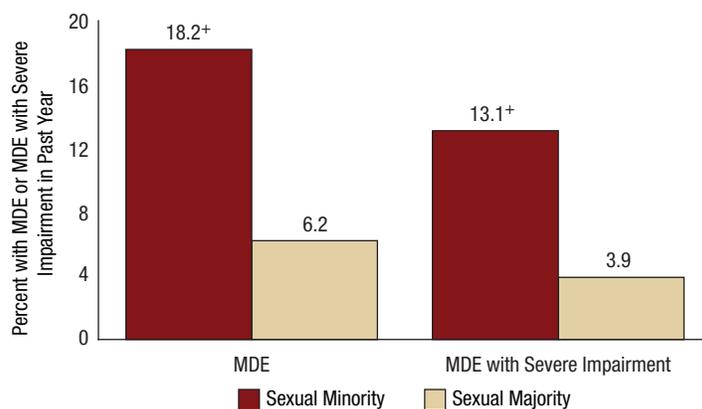
Past Year Major Depressive Episode (MDE) and MDE with Severe Impairment

NSDUH also provides estimates of having a past year major depressive episode (MDE) among adults. MDE is defined using the diagnostic criteria from the DSM-IV.²⁴ Adults were defined as having an MDE if they had a period of 2 weeks or longer in the past 12 months when they experienced a depressed mood or loss of interest or pleasure in daily activities and if they had at least some additional symptoms, such as problems with sleep, eating, energy, concentration, and self-worth.³² Adults were defined as having an MDE with severe impairment if their depression caused severe problems with their ability to manage at home, manage well at work, have relationships with others, or have a social life.³³

This section presents percentages and estimated numbers of sexual minority adults who had a past year MDE. Statistical comparisons are made between the percentages of sexual minority and sexual majority adults who had a past year MDE.

In 2015, 1.9 million sexual minority adults aged 18 or older had an MDE in the past year, including 1.4 million who had an MDE with severe impairment in the past year. These numbers correspond to 18.2 percent of sexual minority adults who had an MDE in the past year and to 13.1 percent who had an MDE with severe impairment (Figure 18). Sexual minority adults were more likely than their sexual majority counterparts to have an MDE (18.2 vs.

Figure 18. Major Depressive Episode (MDE) and MDE with Severe Impairment in the Past Year among Sexual Minority and Sexual Majority Adults Aged 18 or Older: Percentages, 2015



* Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.

Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

6.2 percent) or to have had an MDE with severe impairment in the past year (13.1 vs. 3.9 percent).

By Sex

The 1.9 million sexual minority adults in 2015 who had an MDE in the past year included 621,000 males and 1.3 million females. These numbers correspond to 14.8 percent of sexual minority males and 20.4 percent of sexual minority females who had an MDE in the past year (Table B.14 in Appendix B). The percentages of sexual minority males and females who had an MDE in the past year were greater than the corresponding percentages for their sexual majority counterparts (4.3 percent for males and 8.0 percent for females).

The 1.4 million sexual minority adults in 2015 who had an MDE with severe impairment included 438,000 males and 922,000 females. These numbers correspond to 10.5 percent of sexual minority males and 14.9 percent sexual minority females who had an MDE with severe impairment in the past year (Table B.14). The percentages of sexual minority males and females who had an MDE with severe impairment in the past year were greater than the corresponding percentages for sexual majority adults (2.7 percent for males and 5.0 percent for females).

By Age Group

The 1.9 million sexual minority adults in 2015 who had an MDE in the past year included 733,000 young adults aged 18 to 25 and 1.2 million adults aged 26 or older. These numbers correspond to 23.0 percent of sexual minority young adults and 16.0 percent of sexual minority adults aged 26 or older who had an MDE in the past year (Table B.14). These percentages for having an MDE in the past year were greater than the percentages for their sexual majority counterparts (9.0 percent of young adults and 5.8 percent of adults aged 26 or older).

The 1.4 million sexual minority adults in 2015 who had an MDE with severe impairment in the past year included 462,000 young adults aged 18 to 25 and 898,000 adults aged 26 or older. These numbers correspond to 14.6 percent of sexual minority young adults and 12.5 percent of sexual minority adults aged 26 or older who had an MDE with severe impairment in the past year (Table B.14). These percentages for having an MDE with severe impairment in the past year were greater than the percentages for their sexual majority counterparts (5.7 percent of young adults and 3.6 percent of adults aged 26 or older).

Discussion

Findings from the 2015 NSDUH on substance use and mental health issues for adults by sexual orientation are useful for understanding the health issues faced by sexual minorities in the United States. These findings contribute to that understanding by providing the first nationally representative, federally collected comprehensive information on substance use and mental health issues among adults by sexual identity. However, this report provides only the first set of findings from a single year of NSDUH data on sexual identity. Additional years of data will allow for the analysis of a broader range of substance use and mental health topics, more detailed analysis across sexual minority subgroups, and a better understanding of the explanatory factors that underlie the descriptive information presented in this report.

As the survey continues to collect these data, a wider variety of analyses will be possible. In particular, additional years of data will allow changes to be tracked over time for substance use, SUDs, the need for and receipt of substance use treatment, mental health issues, and mental health service use for sexual minority subgroups. Trend data will also allow for the examination of underlying patterns of behaviors and issues faced by sexual minority groups over time. In addition, trends can be examined across subgroups of sexual minority adults and can be compared with corresponding trends for sexual majority adults. Ultimately, trend data will provide insight into the changing needs of sexual minority adults and will allow researchers and policymakers to make decisions accordingly.

In addition, the availability of NSDUH data from multiple survey years will help to deepen the understanding of issues that affect subgroups of sexual minority adults. In many situations, the differences discussed in this report between sexual majority (i.e., heterosexual) adults and sexual minority adults as a whole also were observed for subgroups of sexual minority adults. In other situations, however, the sample of approximately 3,000 sexual minority adults did not allow sufficient precision to make meaningful comparisons when data for sexual minority adults were further subdivided into sexual minority subgroups defined by sex or age group. With multiple years of data, the improved precision of estimates for sexual minority subgroups will aid in making valid comparisons of substance use and mental health issues among sexual minority subgroups and with corresponding groups within the sexual majority. Future investigations also will be useful for better understanding the issues that may affect lesbians, bisexual women, gay men, and bisexual men differently.

A further consideration for future analysis of NSDUH data on sexual orientation concerns demographic differences among sexual minority subgroups. For example, NSDUH data have shown adult females to be more likely than adult males to have had an MDE in the past year.³⁴ According to the 2015 NSDUH data, however, nearly three fourths of bisexual adults were women (Table B.3 in Appendix B). Therefore, if the percentage of bisexual adults who had a past year MDE is greater than the percentage among heterosexual adults, then analysts need to rule out that this difference is not explained by the disproportionate representation of women among bisexual adults. Where subgroups of sexual minorities (e.g., sexual minority young adults, sexual minority women) are more likely than their sexual majority counterparts to be substance users or to experience mental health issues, however, readers can have greater confidence that differences between sexual minority and sexual majority adults are not completely explained by demographic differences. Nevertheless, analyses with additional years of data can allow statistical adjustments to be made to take into account demographic differences across sexual identity subgroups.

Finally, the NSDUH estimates in this report *describe* differences in substance use and mental health issues between sexual minority adults and those who identified as part of the heterosexual majority. However, the findings presented in this report do not *explain* the reasons for these differences, such as the influence of stressors that are faced by sexual minorities but not by their sexual majority counterparts.^{2,3,4,5,6} An important topic for future research will be further study of the factors that are associated with an increased likelihood of substance use or mental health issues among sexual minorities (i.e., risk factors) and factors among sexual minorities that are associated with a decreased likelihood of substance use or mental health issues (i.e., protective factors).

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10. In this report, the terms “sexual minorities,” “sexual majority,” or similar terms are used broadly to refer to adults in the civilian, noninstitutionalized population that is covered by NSDUH. Although some people in the general population of the United States are outside of the civilian, noninstitutionalized population, information from the 2010 census suggests that the civilian, noninstitutionalized population includes at least 97 percent of the total U.S. population. See the following reference: Lofquist, D., Lugaila, T., O’Connell, M., & Feliz, S. (2012, April). *Households and families: 2010* (C2010BR-14, 2010 Census Briefs). Retrieved from <https://www.census.gov/prod/cen2010/briefs/c2010br-14.pdf>
11. Details about the sample design, weighting, and interviewing results for the 2015 NSDUH are provided in Sections A.1, A.3.3, and B.3.1 of CBHSQ (2016). In particular, Tables A.1 and A.2 in CBHSQ (2016) provide sample design information on the targeted numbers of completed interviews by state and by age group, respectively. See the following reference: Center for Behavioral Health Statistics and Quality. (2016). *2015 National Survey on Drug Use and Health: Methodological summary and definitions*. Retrieved from <http://www.samhsa.gov/data/>
12. The screening procedure involves listing all household members in order to determine whether zero, one, or two individuals aged 12 or older should be selected for the interview.
13. An overall response rate is not calculated for adults because the screening response rate is not specific to age groups.
14. See the CBHSQ (2016) reference in endnote 11.
15. Center for Behavioral Health Statistics and Quality. (2016). *2015 National Survey on Drug Use and Health: Summary of the effects of the 2015 NSDUH questionnaire redesign: Implications for data users*. Retrieved from <http://www.samhsa.gov/data/>
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17. See Section C in CBHSQ (2016). See endnote 11 for the reference.
18. For a discussion of the criteria for suppressing (i.e., not publishing) unreliable estimates in NSDUH, see Section B.2.2 in CBHSQ (2016). See endnote 11 for the reference.
19. Center for Behavioral Health Statistics and Quality. (2014). *Results from the 2013 National Survey on Drug Use and Health: Summary of national findings* (HHS Publication No. SMA 14-4863, NSDUH Series H-48). Rockville, MD: Substance Abuse and Mental Health Services Administration.
20. The NSFG does not report percentages that are based on fewer than 100 respondents in the denominator or fewer than 5 respondents in the numerator. See the following reference: Copen, C. E., Chandra, A., & Febo-Vazquez, I. (2016). *Sexual behavior, sexual attraction, and sexual orientation among adults aged 18-44 in the United States: Data from the 2011-2013 National Survey of Family Growth* (National Health Statistics Reports No. 88). Hyattsville, MD: National Center for Health Statistics. Retrieved from <http://www.cdc.gov/nchs/data/nhsr/nhsr088.pdf>
21. If the majority of the GSS respondents who were coded as “blank” were actually heterosexual, then the estimates for heterosexuality in the GSS would be more in line with the NSDUH estimates.
22. Center for Behavioral Health Statistics and Quality. (2016). *Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health* (HHS Publication No. SMA 16-4984, NSDUH Series H-51). Retrieved from <http://www.samhsa.gov/data/>
23. In NSDUH, a “drink” is defined as a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it. Times when respondents only had a sip or two from a drink are not considered to be alcohol consumption.
24. American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (DSM-IV) (4th ed.). Washington, DC: Author.

25. The DSM-IV criteria for SUDs include separate criteria for dependence or abuse. Individuals who met the criteria for abuse for a given substance (e.g., alcohol) did not meet the criteria for dependence for that substance. For more information, see Section B.4.3 and the definitions for abuse and dependence in Section D of CBHSQ (2016). See endnote 11 for the reference.
26. Specialty treatment refers to substance use treatment at a hospital (only as an inpatient), a drug or alcohol rehabilitation facility (as an inpatient or outpatient), or a mental health center. This NSDUH definition historically has not considered emergency rooms, private doctors' offices, prisons or jails, and self-help groups to be specialty substance use treatment facilities.
27. The NSDUH definition of the need for treatment does not explicitly indicate the need for treatment at a specialty facility. People who had an SUD in the past year can be considered to need some form of assistance for their problems with substance use. However, individuals who met DSM-IV criteria for abuse but not dependence may not necessarily need treatment at a specialty facility. For more information about the DSM-IV criteria for having an SUD, see Section B.4.3 and the definitions for abuse and dependence in Section D of CBHSQ (2016). See endnote 11 for the reference.
28. Because there were 20.8 million people aged 12 or older in 2015 with an SUD in the past year, about 96 percent of the people in 2015 who needed treatment for a substance use problem were defined as such because they had an SUD in the past year, regardless of whether they received substance use treatment at a specialty facility.
29. Estimates are not presented in this report for the receipt of any substance use treatment among sexual minority and sexual majority adults who needed substance use treatment because the detailed tables for the 2015 NSDUH do not present the corresponding estimates for all adults who needed treatment. However, the 2015 detailed tables present estimates for the receipt of substance use treatment at a specialty facility among all adults who needed treatment. The estimates of the receipt of substance use treatment at a specialty facility for adults in the sexual majority who needed treatment correspond closely to the corresponding estimates in the 2015 detailed tables for all adults who needed treatment.
30. In order to generate estimates of AMI and SMI in the United States, SAMHSA designed and implemented the Mental Health Surveillance Study (MHSS). Over the 5-year period from 2008 to 2012, a subsample of adults was selected from the main study to participate in a follow-up telephone interview that obtained a detailed mental health assessment administered by trained mental health clinicians. The MHSS interview used the Structured Clinical Interview for DSM-IV-TR Axis I Disorders, Research Version, Non-patient Edition (SCID-I/NP). A prediction model created from clinical interview data that were collected from 2008 to 2012 was applied to data from the 2008 to 2014 NSDUHs to produce estimates of AMI for the entire NSDUH adult sample in these years. See the following reference: First, M. B., Spitzer, R. L., Gibbon, M., & Williams, J. B. W. (2002). *Structured Clinical Interview for DSM-IV-TR Axis I Disorders, Research Version, Non-patient Edition (SCID-I/NP)*. New York, NY: New York State Psychiatric Institute, Biometrics Research.
31. Details about the definitions and estimation methods for mental illness estimates are provided in Section B.4.7 and Section D of CBHSQ (2016). See endnote 11 for the reference.
32. The specific questions used to measure MDE and a discussion of measurement issues are included in Section B.4.8 of CBHSQ (2016). See endnote 11 for the reference.
33. Adults were first asked whether they ever had a period in their lifetime lasting several days or longer when any of the following was true for most of the day: (a) feeling sad, empty or depressed; (b) feeling discouraged about how things were going in their lives; or (c) losing interest in most things they usually enjoy. Adults who reported any of these problems were asked further questions about having an MDE in their lifetime, including whether they had at least five of nine symptoms in the same 2-week period in their lifetime; at least one of the symptoms needed to be having a depressed mood or loss of interest or pleasure in daily activities. Those who had lifetime MDE were asked if they had a period of time in the past 12 months when they felt depressed or lost interest or pleasure in daily activities for 2 weeks or longer, and they reported that they had some of their other lifetime MDE symptoms in the past 12 months. These adults were defined as having past year MDE. Data on MDE in the past year for adults have been available in NSDUH since 2005. Data on MDE with severe impairment for adults are available since 2009.
34. Center for Behavioral Statistics and Quality. (2014). *Results from the 2013 National Survey on Drug Use and Health: Mental health findings* (HHS Publication No. SMA 14-4887, NSDUH Series H-49). Rockville, MD: Substance Abuse and Mental Health Services Administration. Retrieved from <http://www.samhsa.gov/data/>

Appendix A:

Comparison of Data Sources for Sexual Attraction and Sexual Identity

This appendix presents information for the National Survey on Drug Use and Health (NSDUH) and three other surveys that collect data on sexual attraction and sexual identity among adults. Other surveys that collect information on sexual attraction and sexual identity include the following:

- General Social Survey (GSS),¹
- National Health Interview Survey (NHIS),² and
- National Survey of Family Growth (NSFG).³

Table A.1 summarizes information about these surveys, including the scope and purpose of each survey; the target population and sample characteristics; whether the survey collects data on sexual attraction, sexual identity, or both; the mode for collecting data on sexual attraction and sexual identity; and other relevant characteristics (e.g., where interviews are conducted, languages in which interviews can be conducted). Differences in these survey characteristics can affect estimates of sexual attraction and sexual identity.

In particular, the context in which the questions are presented can affect how respondents answer these questions. In all four surveys, the sexual attraction and sexual identity questions appear relatively late in the interview. Nevertheless, the context in which questions about sexual attraction and sexual identity are presented depends on the focus of a given survey. How respondents think about and answer questions about sexual attraction and sexual identity can depend on the general topics they have been thinking about before being asked these questions. Respondents might think about sexual attraction or sexual identity differently, depending on whether they are answering these questions in the broad context of questions about medical conditions and the use of health services (as in the NHIS), in the context of questions about reproductive health issues (as in the NSFG), or in the context of questions about substance use and mental health issues (as in NSDUH).

Also, data collection modes that allow respondents to answer questions themselves (i.e., self-administration) typically yield higher estimates for topics that could be considered sensitive compared with data collection modes that require respondents to report their answers to an interviewer.⁴ Respondents are more likely to report that sensitive topics apply to them (e.g., being a sexual minority) if they can answer the questions without having to give their answer to an interviewer. Conversely, respondents may give answers to an interviewer that they think are socially desirable rather than reporting an applicable trait or behavior that they perceive to be less socially desirable. Also, the added privacy provided by self-administration can be important for encouraging truthful answers in household interview settings where other family members might be present.

Another issue that can affect estimates is who is asked the question and how missing data are handled. For example, the GSS design for administering questions results in some

respondents not being asked the sexual identity question. Consequently, 8.7 percent of adults were coded as "not applicable" for sexual identity based on the data on the 2014 GSS public use file and were coded as "blank" in the GSS estimates in [Table B.2](#) in Appendix B. If most of these blanks were for adults who were heterosexual, then the percentage of adults who were classified as heterosexual based on the GSS data would be closer to the percentages from the other surveys.

In addition, [Table 2](#) in the main body of the report shows the sexual identity questions in these data sources, including NSDUH. The types of response options, the wording of response options, and the order in which response options are presented to respondents also can help to explain differences in estimates among surveys. For example, the NHIS includes a response option for "something else" that is not offered to respondents in the other surveys. Respondents in the other surveys could have chosen this "something else" category instead of the other categories if given the opportunity.

Additional methodological details for NSDUH can be found in a separate report on the web at <http://www.samhsa.gov/data/>.⁵ Additional information about the methods for the other surveys in this appendix can be obtained from their respective websites and the references that were cited previously:^{1,2,3}

- GSS: <http://gss.norc.org>;
- NHIS: <http://www.cdc.gov/nchs/nhis.htm>; and
- NSFG: <http://www.cdc.gov/nchs/nsfg/index.htm>.

Table A.1 Summary of Study Characteristics for the National Survey on Drug Use and Health (NSDUH), National Health Interview Survey (NHIS), General Social Survey (GSS), and National Survey of Family Growth (NSFG)

Characteristic	NSDUH	NHIS	GSS	NSFG
Sponsor	Substance Abuse and Mental Health Services Administration (SAMHSA)	Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS)	NORC at the University of Chicago	CDC, NCHS
Most Recent Data	2015	2014	2014	2011-2013
Purpose and Scope	Provides estimates of substance use (tobacco, alcohol, illicit drugs), substance use disorders, mental health issues, and use of services for substance use or mental health issues.	Provides estimates for health status, access to care and insurance, health service utilization, and health behaviors.	Provides information about Americans' attitudes, beliefs, and behaviors for a variety of social issues, such as civil liberties, crime and violence, intergroup tolerance, morality, national spending priorities, psychological well-being, social mobility, stress, and traumatic events.	Initially designed to be the national fertility survey of the United States, with a focus on factors to explain trends and group differences in birth rates (e.g., contraception, infertility, sexual activity, and marriage).
Population	<ul style="list-style-type: none"> • Civilian noninstitutionalized population aged 12 or older. • Excludes active-duty military personnel, people in institutions (e.g., prisons, nursing homes), homeless people not in shelters. • Sexual attraction/identity questions are asked of adults aged 18 or older. 	<ul style="list-style-type: none"> • Civilian noninstitutionalized population (no age limits). • Includes institutional group quarters (e.g., dormitories). • Family Core questionnaire collects information about all family members; completed by a family member of legal majority age in the state. • Sample Adult Core collects information from one adult aged 18 or older. • Sexual identity questions are included in the Sample Adult Core. • Sample Child Core collects information for a sampled child (if applicable), completed by a knowledgeable family member (e.g., a parent). 	<ul style="list-style-type: none"> • Adult noninstitutionalized population in the continental United States. 	<ul style="list-style-type: none"> • Noninstitutionalized population aged 15 to 44. • Active-duty military personnel who are living off base are eligible, but the number of active-duty military personnel in the NSFG is small. • Excludes people in institutions and those living on military bases.

(continued)

Table A.1 Summary of Study Characteristics for the National Survey on Drug Use and Health (NSDUH), National Health Interview Survey (NHIS), General Social Survey (GSS), and National Survey of Family Growth (NSFG) (continued)

Characteristic	NSDUH	NHIS	GSS	NSFG
Sample Characteristics and Estimates	<ul style="list-style-type: none"> • Sample in all 50 states and the District of Columbia. • Allows estimates at the national, regional, state, and substate levels. • Sample in 2015 was designed to yield about 25 percent of interviews from 12 to 17 year olds, 25 percent from 18 to 25 year olds, and 50 percent from adults aged 26 or older, including 15 percent from adults aged 26 to 34, 20 percent from adults aged 35 to 49, and 15 percent from adults aged 50 or older. • Final 2015 sample included 68,073 respondents aged 12 or older, including 51,118 adults aged 18 or older. 	<ul style="list-style-type: none"> • Allows estimates at the national and regional levels and within regions by metropolitan and nonmetropolitan area status. • Adults aged 65 or older, blacks, and Hispanics have an increased probability of being selected as the sample adult. • The 2014 NHIS included data for 112,053 individuals for the Family Core, 36,697 adults for the Sample Adult Core, and 13,380 children for the Sample Child Core. 	<ul style="list-style-type: none"> • Two parallel subsamples of approximately 1,500 respondents each per survey year, and each sample is further subdivided into three "ballots." • The total sample for 2014 was 3,464 adults. • Excludes Alaska and Hawaii. • Sexual identity questions are not administered to all respondents in a given survey year. 	<ul style="list-style-type: none"> • National design, including Alaska and Hawaii. • Designed to yield about 20 percent of interviews from adolescents aged 15 to 19 and 55 percent of interviews from females. • The 2011-2013 NSFG had a sample size of 4,815 males and 5,601 females.
Response Rates	<ul style="list-style-type: none"> • Screening response rate of 79.7 percent in 2015 for dwelling units. • Interview response rate of 69.3 percent in 2015 for individuals aged 12 or older. • Overall response rate of 55.2 percent in 2015 for individuals aged 12 or older. • Interview response rate of 68.4 percent in 2015 for adults aged 18 or older. • An overall response rate is not calculated for adults because the screening response rate is not specific to age groups. 	<ul style="list-style-type: none"> • Final Family Component response rate of 73.8 percent for 2014. • Final Sample Adult Component response rate of 58.9 percent for 2014. • Final Sample Child component response rate of 66.6 percent for 2014. 	<ul style="list-style-type: none"> • Eligibility rate of 81.6 percent for 2014, defined as the net eligible sample among the original sample. • Response rate of 69.2 percent for 2014, defined as completed interviews among the net eligible sample. 	<ul style="list-style-type: none"> • Overall response rate for 2011-2013 of 72.8 percent. • Sex-specific response rates of 73.4 percent for females and 72.1 percent for males in 2011-2013.

(continued)

Table A.1 Summary of Study Characteristics for the National Survey on Drug Use and Health (NSDUH), National Health Interview Survey (NHIS), General Social Survey (GSS), and National Survey of Family Growth (NSFG) (continued)

Characteristic	NSDUH	NHIS	GSS	NSFG
Frequency	Continuous since 1992.	Continuous since 1957.	Interviews conducted in February, March, and April and in even-numbered years since 1994.	Continuous since 2006.
Year in Which Sexual Attraction/Identity Questions Were Added	2015	2013	2008	2002
Interview Location	Respondents' place of residence.	Respondents' place of residence.	Respondents' place of residence.	Respondents' place of residence.
Languages	English or Spanish	English or Spanish	English or Spanish	English or Spanish
Includes Sexual Attraction Questions	Yes	No	No	Yes
Includes Sexual Identity Questions	Yes	Yes	Yes	Yes
Data Collection Mode for Sexual Attraction or Identity	ACASI; respondents enter their answers into a laptop computer after reading the questions on the computer screen or listening to the questions on headphones.	CAPI; interviewer reads questions to a respondent and then enters the respondent's answers into a laptop computer.	CASI; respondents enter their answers into a laptop computer after reading the questions on the computer screen.	ACASI; respondents enter their answers into a laptop computer after reading the questions on the computer screen or listening to the questions on headphones.
Other Issues	Since 2002, respondents who complete the interview receive a \$30 incentive.	No monetary incentives to respondents to complete the interview.	No indication of monetary incentives to respondents to complete the interview.	<ul style="list-style-type: none"> • Since 2002, respondents who complete the interview receive a \$40 incentive. • The category of "something else" was an available option for the sexual identity question in the 2002 and the 2006 to 2008 NSFGs, until it was dropped in July 2008.

ACASI = audio computer-assisted self-interviewing; CAPI = computer-assisted personal interviewing; CASI = computer-assisted self-interviewing.

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health.

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Health Interview Survey.

NORC at the University of Chicago, General Social Survey.

CDC, NCHS, National Survey of Family Growth.

Endnotes

¹ NORC, University of Chicago. (2015). *General Social Surveys, 1972-2014: Cumulative codebook*. Retrieved from [http://gss.norc.org/documents/codebook/](http://gss.norc.uchicago.edu/documents/codebook/)

² National Center for Health Statistics. (2015, June). *2014 National Health Interview Survey (NHIS) public use data release: Survey description*. Retrieved from ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHIS/2014/srvydesc.pdf

³ National Center for Health Statistics. (2014, December). *Public use data file documentation: 2011-2013 National Survey of Family Growth. User's guide*. Retrieved from http://www.cdc.gov/nchs/data/nsfg/nsfg_2011-2013_userguide_maintext.pdf

⁴ Tourangeau, R., & Yan, T. (2007). Sensitive questions in surveys. *Psychological Bulletin*, *133*, 859-883. doi:10.1037/0033-2909.133.5.859

⁵ Center for Behavioral Health Statistics and Quality. (2016). *2015 National Survey on Drug Use and Health: Methodological summary and definitions*. Retrieved from <http://www.samhsa.gov/data/>

**Appendix B:
Supplemental Tables of Estimates for Sexual Attraction, Sexual
Identity, and Substance Use and Mental Health Issues among
Sexual Minority and Sexual Majority Adults**

Table B.1 Sexual Attraction among Adults Aged 18 to 44, by Age Group and Gender: Percentages, 2015 NSDUH and 2011-2013 National Survey of Family Growth (NSFG)

Gender/Sexual Attraction	NSDUH, 2015	NSFG,¹ 2011-2013
MALE AGED 18 TO 44		
Only or Mostly Attracted to Females	93.8 (0.26)	95.3* (0.45)
Equally Attracted to Females or Males	1.1 (0.11)	0.8 (0.21)
Only or Mostly Attracted to Males	2.8 (0.19)	2.3 (0.32)
Not Sure	1.3 (0.13)	0.7* (0.17)
Don't Know	0.4 (0.07)	**
Refused	0.6 (0.07)	**
Blank	0.0 (0.02)	**
FEMALE AGED 18 TO 44		
Only or Mostly Attracted to Males	90.5 (0.29)	93.4* (0.58)
Equally Attracted to Males or Females	4.3 (0.18)	3.2* (0.32)
Only or Mostly Attracted to Females	2.5 (0.14)	1.6* (0.22)
Not Sure	1.4 (0.11)	1.2 (0.25)
Don't Know	0.4 (0.07)	**
Refused	1.0 (0.10)	0.4* (0.11)
Blank	**	**

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

*Difference between this estimate and the NSDUH estimate is statistically significant at the .05 level.

¹"Not ascertained" responses collected in the NSFG are erroneously skipped items and are shown in this table as blanks.

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Family Growth (NSFG), 2011-2013.

Table B.2 Sexual Identity among Adults Aged 18 or Older, by Age Group and Gender: Percentages, 2015 NSDUH, 2014 National Health Interview Survey (NHIS), 2014 General Social Survey (GSS), and 2011-2013 National Survey of Family Growth (NSFG)

Gender/Sexual Identity	NSDUH, 2015, Aged 18 or Older	NHIS, 2014, Aged 18 or Older	GSS, ¹ 2014, Aged 18 or Older	NSDUH, 2015, Aged 18-44	NSFG, ² 2011-2013, Aged 18-44
TOTAL					
Heterosexual	94.0 (0.15)	94.5* (0.18)	87.2* (0.80)	92.1 (0.21)	93.6* (0.39)
Lesbian or Gay	1.8 (0.09)	1.6 (0.10)	1.6 (0.22)	2.1 (0.11)	1.6* (0.18)
Bisexual	2.5 (0.08)	0.7* (0.06)	2.5 (0.36)	4.0 (0.13)	3.7 (0.27)
Something Else ³	N/A	0.2 (0.03)	N/A	N/A	N/A
Don't Know	0.6 (0.05)	0.4* (0.04)	0.0* (0.00)	0.6 (0.06)	0.2* (0.05)
Refused	1.0 (0.07)	0.6* (0.06)	0.0* (0.00)	1.2 (0.08)	**
Blank	0.1 (0.02)	2.1* (0.11)	8.7* (0.75)	0.0 (0.01)	0.1* (0.03)
MALE					
Heterosexual	95.1 (0.21)	94.6 (0.25)	88.7* (1.02)	94.5 (0.27)	95.0 (0.51)
Lesbian or Gay	2.2 (0.14)	1.8 (0.15)	2.1 (0.45)	2.3 (0.18)	1.9 (0.29)
Bisexual	1.4 (0.11)	0.4* (0.06)	1.7 (0.47)	1.8 (0.14)	2.0 (0.28)
Something Else ³	N/A	0.2 (0.05)	N/A	N/A	N/A
Don't Know	0.4 (0.07)	0.3 (0.05)	0.0* (0.00)	0.5 (0.08)	**
Refused	0.8 (0.09)	0.5* (0.08)	0.0* (0.00)	0.9 (0.11)	**
Blank	0.1 (0.02)	2.2* (0.17)	7.5* (0.85)	0.0 (0.02)	**
FEMALE					
Heterosexual	92.9 (0.22)	94.3* (0.24)	86.0* (1.06)	89.6 (0.29)	92.2* (0.54)
Lesbian or Gay	1.5 (0.11)	1.3 (0.11)	1.1 (0.26)	1.8 (0.12)	1.3 (0.23)
Bisexual	3.5 (0.13)	1.0* (0.10)	3.2 (0.48)	6.3 (0.22)	5.5 (0.44)
Something Else ³	N/A	0.2 (0.03)	N/A	N/A	N/A
Don't Know	0.8 (0.08)	0.4* (0.06)	0.0* (0.00)	0.8 (0.10)	**
Refused	1.2 (0.10)	0.6* (0.09)	0.0* (0.00)	1.5 (0.13)	0.7* (0.20)
Blank	0.1 (0.04)	2.1* (0.13)	9.6* (1.00)	**	**

**Low precision; no estimate reported.

N/A: Not applicable.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

*Difference between this estimate and the NSDUH estimate is statistically significant at the .05 level. The NSFG aged 18-44 estimate is compared with the NSDUH aged 18-44 estimate.

¹ Respondents to this item who did not complete a supplemental set of questions were coded as "Not applicable" and are not distinguishable from the other missing responses in the public use data, so they were all coded as blank.

² "Not ascertained" responses collected in the NSFG are erroneously skipped items and are shown in this table as blanks.

³ NHIS respondents who answered "Something else" were asked a follow-up question to clarify what they meant by "something else." Response choices in this question (in addition to "Refused" or "Don't know") were (1) You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual; (2) You are transgender, transsexual or gender variant; (3) You have not figured out or are in the process of figuring out your sexuality; (4) You do not think of yourself as having sexuality; (5) You do not use labels to identify yourself; or (6) You mean something else.

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Health and Nutrition Examination Study (NHIS), 2014.

NORC at the University of Chicago, General Social Survey (GSS), 2014.

CDC, NCHS, National Survey of Family Growth (NSFG), 2011-2013.

Table B.3 Demographic Characteristics among Adults Aged 18 or Older, by Sexual Orientation: Weighted Percentages, 2015

Demographic Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
TOTAL	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)
AGE GROUP				
18-25	13.7 (0.20)	30.8* (1.11)	20.1* (1.39)	38.7* (1.55)
26 or Older	86.3 (0.20)	69.2* (1.11)	79.9* (1.39)	61.3* (1.55)
GENDER				
Male	48.8 (0.34)	40.2* (1.43)	57.9* (2.36)	27.2* (1.68)
Female	51.2 (0.34)	59.8* (1.43)	42.1* (2.36)	72.8* (1.68)
HISPANIC ORIGIN AND RACE				
Not Hispanic or Latino	84.8 (0.33)	81.8* (1.22)	80.8 (2.06)	82.5 (1.40)
White	65.5 (0.48)	60.4* (1.50)	62.5 (2.41)	58.9* (1.76)
Black or African American	11.7 (0.31)	12.8 (0.88)	12.4 (1.28)	13.2 (1.10)
American Indian or Alaska Native	0.5 (0.05)	0.8 (0.22)	0.7 (0.20)	0.9 (0.35)
Native Hawaiian or Other Pacific Islander	0.2 (0.03)	0.3 (0.10)	0.5 (0.22)	0.1 (0.06)
Asian	5.3 (0.25)	4.2 (0.67)	3.2* (0.73)	4.9 (1.02)
Two or More Races	1.5 (0.08)	3.2* (0.37)	1.6 (0.35)	4.4* (0.59)
Hispanic or Latino	15.2 (0.33)	18.2* (1.22)	19.2 (2.06)	17.5 (1.40)
EDUCATION				
< High School	13.7 (0.26)	14.1 (0.97)	10.9* (1.38)	16.4* (1.33)
High School Graduate	25.5 (0.33)	21.9* (1.03)	16.3* (1.56)	26.0 (1.37)
Some College or Associate's Degree	30.7 (0.34)	32.7 (1.35)	31.2 (2.27)	33.8 (1.54)
College Graduate	30.1 (0.43)	31.3 (1.40)	41.6* (2.39)	23.8* (1.61)
CURRENT EMPLOYMENT				
Full-Time	49.2 (0.37)	45.2* (1.40)	50.1 (2.32)	41.7* (1.66)
Part-Time	13.3 (0.22)	16.6* (0.91)	13.9 (1.43)	18.6* (1.15)
Unemployed	4.5 (0.13)	9.0* (0.77)	7.2* (1.07)	10.3* (1.08)
Other ¹	33.0 (0.38)	29.2* (1.43)	28.7 (2.47)	29.5* (1.65)

NOTE: Estimates shown are percentages with standard errors included in parentheses. Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹ The Other Employment category includes students, adults keeping house or caring for children full time, retired or disabled adults, or other persons not in the labor force.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.4 Types of Illicit Drugs Used in the Past Year among Adults Aged 18 or Older, by Sexual Identity

Drug	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLICIT DRUGS	17.1 (0.25)	39.1* (1.28)	34.7* (2.12)	42.4* (1.61)
Marijuana	12.9 (0.22)	30.7* (1.22)	26.1* (1.97)	34.1* (1.55)
Cocaine	1.8 (0.08)	5.1* (0.52)	4.3* (0.77)	5.8* (0.70)
Crack	0.3 (0.04)	0.6 (0.21)	0.5 (0.25)	0.7 (0.31)
Heroin	0.3 (0.03)	0.9* (0.19)	0.5 (0.23)	1.2* (0.29)
Hallucinogens	1.6 (0.07)	5.0* (0.50)	3.7* (0.75)	6.0* (0.64)
LSD	0.5 (0.03)	1.7* (0.27)	0.8 (0.25)	2.2* (0.43)
PCP	0.0 (0.01)	0.0 (0.01)	**	0.0 (0.02)
Ecstasy	0.9 (0.05)	3.2* (0.39)	2.5* (0.55)	3.8* (0.54)
Inhalants	0.3 (0.03)	3.7* (0.54)	5.8* (1.16)	2.1* (0.41)
Methamphetamine	0.6 (0.05)	2.3* (0.43)	2.6* (0.86)	2.1* (0.41)
Misuse of Psychotherapeutics	6.9 (0.15)	14.6* (0.87)	11.8* (1.30)	16.7* (1.15)
Pain Relievers	4.5 (0.12)	10.4* (0.74)	8.0* (1.17)	12.1* (0.98)
Tranquilizers	2.2 (0.08)	5.9* (0.59)	4.9* (0.90)	6.7* (0.76)
Stimulants	1.9 (0.07)	4.2* (0.43)	2.9 (0.55)	5.2* (0.60)
Sedatives	0.6 (0.05)	1.2* (0.23)	0.7 (0.26)	1.5* (0.35)

LSD = lysergic acid diethylamide; PCP = phencyclidine.

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.5 Types of Illicit Drugs Used in the Past Year among Males Aged 18 or Older, by Sexual Identity

Drug	Heterosexual/Straight	Any Sexual Minority	Gay	Bisexual
ILLICIT DRUGS	20.4 (0.39)	36.3* (2.22)	38.5* (2.86)	32.8* (3.33)
Marijuana	16.2 (0.35)	27.1* (2.00)	27.7* (2.68)	26.1* (2.96)
Cocaine	2.5 (0.13)	4.8* (0.87)	5.6* (1.18)	3.4 (1.25)
Crack	0.5 (0.07)	0.8 (0.33)	0.8 (0.43)	0.7 (0.53)
Heroin	0.4 (0.05)	0.8 (0.31)	0.8 (0.40)	0.9 (0.50)
Hallucinogens	2.2 (0.11)	5.3* (0.93)	4.8* (1.16)	6.0* (1.51)
LSD	0.7 (0.06)	1.9* (0.52)	1.1 (0.39)	3.0 (1.17)
PCP	0.0 (0.02)	0.0 (0.01)	**	0.0 (0.02)
Ecstasy	1.3 (0.09)	3.4* (0.72)	3.4* (0.81)	3.4 (1.29)
Inhalants	0.3 (0.04)	7.5* (1.29)	9.7* (1.97)	4.2* (1.18)
Methamphetamine	0.9 (0.08)	3.4* (0.96)	4.1* (1.46)	2.2 (0.90)
Misuse of Psychotherapeutics	7.9 (0.24)	12.5* (1.44)	12.6* (1.88)	12.4* (2.24)
Pain Relievers	5.4 (0.20)	8.6* (1.24)	8.9* (1.75)	8.1 (1.64)
Tranquilizers	2.4 (0.13)	5.2* (1.05)	5.0* (1.20)	5.5 (1.84)
Stimulants	2.3 (0.11)	3.5 (0.69)	3.4 (0.84)	3.6 (1.05)
Sedatives	0.5 (0.06)	0.9 (0.32)	0.9 (0.36)	1.0 (0.59)

LSD = lysergic acid diethylamide; PCP = phencyclidine.

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.6 Types of Illicit Drugs Used in the Past Year among Females Aged 18 or Older, by Sexual Identity

Drug	Heterosexual/Straight	Any Sexual Minority	Lesbian	Bisexual
ILLCIT DRUGS	13.9 (0.28)	41.1* (1.65)	29.6* (3.08)	45.9* (1.85)
Marijuana	9.8 (0.24)	33.2* (1.50)	24.0* (2.80)	37.1* (1.79)
Cocaine	1.1 (0.08)	5.4* (0.64)	2.4 (0.81)	6.7* (0.85)
Crack	0.2 (0.03)	0.6 (0.27)	0.1 (0.10)	0.8 (0.38)
Heroin	0.2 (0.03)	1.0* (0.25)	0.0* (0.03)	1.4* (0.35)
Hallucinogens	0.9 (0.07)	4.9* (0.54)	2.2 (0.77)	6.0* (0.69)
LSD	0.2 (0.03)	1.5* (0.28)	0.4 (0.23)	2.0* (0.38)
PCP	0.0 (0.02)	0.0 (0.02)	**	0.1 (0.03)
Ecstasy	0.5 (0.04)	3.2* (0.44)	1.4 (0.67)	3.9* (0.56)
Inhalants	0.2 (0.03)	1.1* (0.24)	0.5 (0.27)	1.3* (0.34)
Methamphetamine	0.3 (0.04)	1.6* (0.32)	0.4 (0.21)	2.1* (0.44)
Misuse of Psychotherapeutics	6.0 (0.19)	16.1* (1.13)	10.7* (1.85)	18.4* (1.34)
Pain Relievers	3.7 (0.15)	11.6* (1.01)	6.8* (1.52)	13.6* (1.23)
Tranquilizers	1.9 (0.10)	6.5* (0.71)	4.8 (1.49)	7.2* (0.78)
Stimulants	1.4 (0.08)	4.7* (0.54)	2.2 (0.60)	5.8* (0.70)
Sedatives	0.7 (0.07)	1.4* (0.31)	0.6 (0.30)	1.7* (0.42)

LSD = lysergic acid diethylamide; PCP = phencyclidine.

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.7 Types of Illicit Drugs Used in the Past Year among Adults Aged 18 to 25, by Sexual Identity

Drug	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLCIT DRUGS	36.1 (0.52)	54.0* (1.68)	57.3* (3.20)	52.8* (1.89)
Marijuana	31.0 (0.49)	46.2* (1.71)	49.3* (3.29)	45.0* (1.91)
Cocaine	5.0 (0.26)	8.9* (1.00)	10.6* (2.07)	8.3* (1.12)
Crack	0.3 (0.06)	0.2 (0.13)	0.3 (0.21)	0.2 (0.16)
Heroin	0.6 (0.08)	1.2 (0.39)	0.9 (0.66)	1.3 (0.48)
Hallucinogens	6.5 (0.29)	12.1* (1.22)	14.4* (3.04)	11.2* (1.17)
LSD	2.6 (0.18)	4.5* (0.68)	4.0 (1.16)	4.6* (0.82)
PCP	0.1 (0.04)	0.1 (0.05)	**	0.1 (0.06)
Ecstasy	3.8 (0.20)	7.1* (0.91)	9.3* (2.16)	6.3* (0.96)
Inhalants	1.2 (0.12)	3.5* (0.67)	6.5* (1.68)	2.3 (0.67)
Methamphetamine	0.8 (0.10)	2.0* (0.52)	1.6 (0.70)	2.2* (0.66)
Misuse of Psychotherapeutics	14.8 (0.38)	20.8* (1.31)	23.2* (2.44)	19.8* (1.48)
Pain Relievers	8.0 (0.27)	14.2* (1.10)	15.1* (2.16)	13.9* (1.29)
Tranquilizers	5.0 (0.22)	9.0* (1.00)	10.8* (2.13)	8.3* (1.06)
Stimulants	7.2 (0.29)	7.9 (0.86)	8.0 (1.48)	7.9 (1.04)
Sedatives	0.7 (0.08)	1.4* (0.31)	1.6 (0.54)	1.3 (0.38)

LSD = lysergic acid diethylamide; PCP = phencyclidine.

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.8 Types of Illicit Drugs Used in the Past Year among Adults Aged 26 or Older, by Sexual Identity

Drug	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLCIT DRUGS	14.1 (0.26)	32.5* (1.62)	29.1* (2.43)	35.7* (2.24)
Marijuana	10.1 (0.22)	23.9* (1.49)	20.3* (2.18)	27.3* (2.11)
Cocaine	1.3 (0.08)	3.4* (0.58)	2.7 (0.77)	4.2* (0.89)
Crack	0.3 (0.05)	0.8 (0.30)	0.6 (0.31)	1.1 (0.50)
Heroin	0.3 (0.04)	0.8* (0.22)	0.4 (0.23)	1.2* (0.36)
Hallucinogens	0.8 (0.06)	1.9* (0.39)	1.0 (0.38)	2.7* (0.68)
LSD	0.1 (0.02)	0.4 (0.23)	0.0 (0.05)	0.7 (0.45)
PCP	0.0 (0.01)	**	**	**
Ecstasy	0.4 (0.04)	1.5* (0.36)	0.9 (0.34)	2.2* (0.62)
Inhalants	0.1 (0.02)	3.7* (0.72)	5.6* (1.38)	2.0* (0.51)
Methamphetamine	0.6 (0.05)	2.4* (0.58)	2.8* (1.06)	2.1* (0.50)
Misuse of Psychotherapeutics	5.7 (0.16)	11.9* (1.08)	8.9* (1.46)	14.8* (1.60)
Pain Relievers	4.0 (0.14)	8.7* (0.95)	6.2 (1.33)	11.0* (1.37)
Tranquilizers	1.7 (0.09)	4.6* (0.71)	3.4 (0.93)	5.7* (1.07)
Stimulants	1.0 (0.06)	2.6* (0.46)	1.6 (0.55)	3.4* (0.69)
Sedatives	0.5 (0.05)	1.1 (0.28)	0.5 (0.25)	1.6* (0.49)

LSD = lysergic acid diethylamide; PCP = phencyclidine.

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.9 Tobacco Product and Alcohol Use in the Past Month among Adults Aged 18 or Older, by Sexual Identity

Substance	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
TOBACCO PRODUCTS	25.5 (0.29)	35.4* (1.27)	33.9* (2.08)	36.4* (1.58)
Cigarettes	20.6 (0.28)	32.2* (1.23)	30.9* (2.04)	33.2* (1.53)
Daily Cigarette Smoking ¹	59.6 (0.68)	51.6* (2.21)	51.1* (3.80)	51.8* (2.60)
Smoked 1+ Packs of Cigarettes per Day ²	41.8 (0.90)	32.5* (2.96)	44.3 (5.39)	24.6* (3.08)
Smokeless Tobacco	3.7 (0.12)	1.3* (0.25)	1.4* (0.45)	1.3* (0.29)
Cigars	4.9 (0.14)	7.1* (0.61)	6.5 (1.07)	7.5* (0.74)
Pipe Tobacco	0.9 (0.06)	1.6* (0.30)	1.5 (0.51)	1.7* (0.36)
ALCOHOL	56.2 (0.35)	63.6* (1.46)	65.6* (2.36)	62.1* (1.79)
Binge Alcohol Use	26.7 (0.30)	36.1* (1.30)	35.2* (2.07)	36.8* (1.62)
Heavy Alcohol Use	7.1 (0.16)	8.2 (0.63)	8.8 (1.11)	7.8 (0.76)

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹Percentages for daily cigarette smoking are among past month cigarette smokers.

²Percentages for smoking one or more packs of cigarettes per day are among daily cigarette smokers in the past month. Respondents with missing data for number of cigarettes smoked per day were excluded from the analysis.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.10 Tobacco Product and Alcohol Use in the Past Month among Males Aged 18 or Older, by Sexual Identity

Substance	Heterosexual/Straight	Any Sexual Minority	Gay	Bisexual
TOBACCO PRODUCTS	32.2 (0.43)	32.6 (2.11)	32.8 (2.91)	32.2 (3.30)
Cigarettes	23.6 (0.39)	29.3* (2.08)	30.2* (2.85)	28.0 (3.12)
Daily Cigarette Smoking ¹	57.2 (0.96)	47.5* (4.33)	49.2 (5.74)	**
Smoked 1+ Packs of Cigarettes per Day ²	46.9 (1.23)	**	**	**
Smokeless Tobacco	7.0 (0.23)	1.4* (0.41)	1.0* (0.53)	2.0* (0.66)
Cigars	8.2 (0.26)	7.4 (1.15)	7.2 (1.68)	7.7 (1.82)
Pipe Tobacco	1.5 (0.10)	2.0 (0.58)	2.1 (0.85)	1.9 (0.66)
ALCOHOL	61.6 (0.49)	62.8 (2.40)	66.0 (3.04)	57.8 (3.69)
Binge Alcohol Use	32.3 (0.46)	33.2 (2.25)	36.2 (2.94)	28.4 (3.34)
Heavy Alcohol Use	9.9 (0.27)	8.6 (1.19)	9.2 (1.63)	7.6 (1.74)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹Percentages for daily cigarette smoking are among past month cigarette smokers.

²Percentages for smoking one or more packs of cigarettes per day are among daily cigarette smokers in the past month. Respondents with missing data for number of cigarettes smoked per day were excluded from the analysis.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.11 Tobacco Product and Alcohol Use in the Past Month among Females Aged 18 or Older, by Sexual Identity

Substance	Heterosexual/Straight	Any Sexual Minority	Lesbian	Bisexual
TOBACCO PRODUCTS	19.1 (0.36)	37.2* (1.57)	35.4* (2.88)	38.0* (1.80)
Cigarettes	17.8 (0.35)	34.2* (1.51)	31.8* (2.74)	35.2* (1.77)
Daily Cigarette Smoking ¹	62.5 (0.99)	53.9* (2.56)	53.6 (4.90)	54.0* (2.83)
Smoked 1+ Packs of Cigarettes per Day ²	36.0 (1.28)	25.7* (2.81)	**	22.2* (3.16)
Smokeless Tobacco	0.6 (0.07)	1.3* (0.32)	2.0 (0.78)	1.0 (0.32)
Cigars	1.8 (0.09)	6.8* (0.69)	5.5* (1.09)	7.4* (0.80)
Pipe Tobacco	0.3 (0.05)	1.3* (0.32)	0.7 (0.29)	1.6* (0.43)
ALCOHOL	51.0 (0.47)	64.1* (1.81)	65.1* (3.48)	63.7* (1.98)
Binge Alcohol Use	21.3 (0.37)	38.1* (1.62)	33.7* (2.83)	39.9* (1.90)
Heavy Alcohol Use	4.4 (0.18)	8.0* (0.69)	8.2* (1.38)	7.9* (0.81)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹Percentages for daily cigarette smoking are among past month cigarette smokers.

²Percentages for smoking one or more packs of cigarettes per day are among daily cigarette smokers in the past month. Respondents with missing data for number of cigarettes smoked per day were excluded from the analysis.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.12 Tobacco Product and Alcohol Use in the Past Month among Adults Aged 18 to 25, by Sexual Identity

Substance	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
TOBACCO PRODUCTS	31.9 (0.50)	44.2* (1.55)	47.8* (2.95)	42.8* (1.84)
Cigarettes	25.5 (0.48)	39.7* (1.49)	44.5* (2.95)	37.9* (1.76)
Daily Cigarette Smoking ¹	41.3 (1.06)	46.5 (2.60)	41.1 (4.58)	49.0* (3.16)
Smoked 1+ Packs of Cigarettes per Day ²	23.7 (1.24)	13.3* (2.41)	**	11.3* (2.63)
Smokeless Tobacco	5.9 (0.24)	1.4* (0.32)	1.7* (0.62)	1.3* (0.38)
Cigars	8.7 (0.28)	11.1* (1.06)	10.8 (2.10)	11.1* (1.20)
Pipe Tobacco	1.7 (0.13)	1.8 (0.38)	1.6 (0.63)	1.9 (0.47)
ALCOHOL	58.1 (0.55)	64.1* (1.64)	73.4* (2.68)	60.6 (1.91)
Binge Alcohol Use	38.7 (0.54)	44.6* (1.67)	53.0* (3.14)	41.4 (1.96)
Heavy Alcohol Use	11.0 (0.36)	10.2 (0.93)	11.9 (1.93)	9.6 (1.04)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹Percentages for daily cigarette smoking are among past month cigarette smokers.

²Percentages for smoking one or more packs of cigarettes per day are among daily cigarette smokers in the past month. Respondents with missing data for number of cigarettes smoked per day were excluded from the analysis.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.13 Tobacco Product and Alcohol Use in the Past Month among Adults Aged 26 or Older, by Sexual Identity

Substance	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
TOBACCO PRODUCTS	24.5 (0.33)	31.4* (1.63)	30.4* (2.46)	32.4* (2.16)
Cigarettes	19.8 (0.32)	28.9* (1.60)	27.5* (2.40)	30.3* (2.12)
Daily Cigarette Smoking ¹	63.3 (0.78)	54.6* (3.13)	55.2 (5.01)	54.1* (3.82)
Smoked 1+ Packs of Cigarettes per Day ²	44.2 (0.99)	42.5 (4.11)	**	34.0* (4.80)
Smokeless Tobacco	3.4 (0.13)	1.3* (0.34)	1.3* (0.54)	1.3* (0.41)
Cigars	4.3 (0.15)	5.3 (0.74)	5.4 (1.24)	5.2 (1.00)
Pipe Tobacco	0.7 (0.07)	1.5* (0.40)	1.5 (0.62)	1.6 (0.52)
ALCOHOL	55.9 (0.39)	63.4* (1.90)	63.7* (2.82)	63.1* (2.52)
Binge Alcohol Use	24.8 (0.32)	32.3* (1.70)	30.7* (2.42)	33.9* (2.32)
Heavy Alcohol Use	6.5 (0.18)	7.3 (0.83)	8.0 (1.30)	6.7 (1.05)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

¹Percentages for daily cigarette smoking are among past month cigarette smokers.

²Percentages for smoking one or more packs of cigarettes per day are among daily cigarette smokers in the past month. Respondents with missing data for number of cigarettes smoked per day were excluded from the analysis.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.14 Major Depressive Episode (MDE) and MDE with Severe Impairment in the Past Year among Adults Aged 18 or Older, by Sexual Identity, Age Group, and Gender

Mental Illness/Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
MDE	6.2 (0.15)	18.2* (0.97)	11.4* (1.28)	23.2* (1.36)
18-25	9.0 (0.28)	23.0* (1.36)	15.8* (2.05)	25.8* (1.68)
26 or Older	5.8 (0.17)	16.0* (1.26)	10.3* (1.51)	21.5* (1.95)
Male	4.3 (0.18)	14.8* (1.60)	11.1* (1.81)	20.7* (2.89)
Female	8.0 (0.24)	20.4* (1.24)	11.8* (1.79)	24.1* (1.52)
MDE WITH SEVERE IMPAIRMENT	3.9 (0.12)	13.1* (0.89)	9.3* (1.22)	15.9* (1.22)
18-25	5.7 (0.23)	14.6* (1.14)	11.4* (1.89)	15.8* (1.34)
26 or Older	3.6 (0.14)	12.5* (1.18)	8.8* (1.45)	16.0* (1.79)
Male	2.7 (0.14)	10.5* (1.43)	8.7* (1.74)	13.2* (2.44)
Female	5.0 (0.19)	14.9* (1.12)	10.0* (1.69)	17.0* (1.36)

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.15 Level of Mental Illness in the Past Year among Adults Aged 18 or Older, by Sexual Identity, Age Group, and Gender

Mental Illness/Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
AMI	17.1 (0.25)	37.4* (1.28)	27.1* (1.84)	44.9* (1.63)
18-25	19.8 (0.39)	42.1* (1.54)	31.4* (2.75)	46.2* (1.79)
26 or Older	16.7 (0.28)	35.3* (1.70)	26.1* (2.24)	44.1* (2.43)
Male	13.7 (0.32)	31.3* (2.08)	27.0* (2.56)	38.0* (3.46)
Female	20.4 (0.36)	41.5* (1.62)	27.3* (2.71)	47.5* (1.85)
SMI	3.6 (0.12)	13.1* (0.85)	9.6* (1.28)	15.7* (1.14)
18-25	4.0 (0.20)	15.0* (1.13)	10.0* (1.78)	16.9* (1.44)
26 or Older	3.6 (0.13)	12.3* (1.11)	9.5* (1.53)	14.9* (1.59)
Male	2.7 (0.14)	10.5* (1.37)	9.6* (1.83)	11.8* (2.08)
Female	4.5 (0.18)	14.8* (1.09)	9.5* (1.71)	17.1* (1.34)
AMI EXCLUDING SMI	13.5 (0.22)	24.3* (1.13)	17.5* (1.55)	29.3* (1.53)
18-25	15.7 (0.37)	27.1* (1.37)	21.4* (2.31)	29.3* (1.75)
26 or Older	13.1 (0.24)	23.0* (1.49)	16.6 (1.85)	29.2* (2.20)
Male	11.0 (0.29)	20.8* (1.80)	17.3* (2.19)	26.2* (3.09)
Female	15.9 (0.31)	26.7* (1.41)	17.8 (2.25)	30.4* (1.67)

AMI = any mental illness; SMI = serious mental illness.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.16 Substance Use Disorder for Specific Substances in the Past Year among Adults Aged 18 or Older, by Sexual Identity

Past Year Use Disorder	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLCIT DRUGS	2.6 (0.09)	7.8* (0.70)	8.1* (1.27)	7.5* (0.72)
Marijuana	1.3 (0.06)	3.9* (0.45)	3.8* (0.79)	3.9* (0.48)
Cocaine	0.3 (0.03)	1.0* (0.24)	0.8 (0.30)	1.1* (0.35)
Heroin	0.2 (0.02)	0.6* (0.16)	0.3 (0.17)	0.8* (0.25)
Hallucinogens	0.1 (0.01)	0.4* (0.13)	0.4 (0.21)	0.4* (0.18)
Inhalants	0.0 (0.01)	0.1 (0.08)	0.3 (0.19)	**
Methamphetamine	0.3 (0.03)	1.0* (0.31)	1.6 (0.68)	0.6 (0.20)
Misuse of Psychotherapeutics	1.0 (0.05)	2.8* (0.43)	2.5* (0.72)	3.0* (0.49)
Pain Relievers	0.7 (0.05)	2.0* (0.36)	1.7 (0.63)	2.3* (0.43)
Tranquilizers	0.2 (0.02)	0.9* (0.28)	1.0 (0.55)	0.8* (0.24)
Stimulants	0.1 (0.02)	0.5* (0.17)	0.3 (0.28)	0.7* (0.20)
Sedatives	0.1 (0.01)	0.0 (0.02)	**	0.0 (0.03)
ALCOHOL	6.1 (0.14)	10.8* (0.77)	9.5* (1.18)	11.8* (0.97)
BOTH ILLICIT DRUGS AND ALCOHOL	0.9 (0.05)	3.5* (0.47)	3.1* (0.77)	3.8* (0.55)
ILLCIT DRUGS OR ALCOHOL	7.8 (0.16)	15.1* (0.96)	14.5* (1.55)	15.5* (1.07)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.17 Substance Use Disorder for Specific Substances in the Past Year among Males Aged 18 or Older, by Sexual Identity

Past Year Use Disorder	Heterosexual/Straight	Any Sexual Minority	Gay	Bisexual
ILLCIT DRUGS	3.7 (0.15)	9.6* (1.40)	11.1* (2.04)	7.3* (1.51)
Marijuana	1.9 (0.10)	4.5* (0.87)	4.7* (1.23)	4.1* (1.09)
Cocaine	0.5 (0.06)	1.1 (0.39)	1.0 (0.46)	1.2 (0.68)
Heroin	0.3 (0.04)	0.6 (0.26)	0.5 (0.30)	0.7 (0.49)
Hallucinogens	0.1 (0.02)	0.6 (0.30)	0.6 (0.36)	**
Inhalants	0.0 (0.02)	0.3 (0.20)	0.5 (0.32)	**
Methamphetamine	0.5 (0.06)	1.8 (0.73)	2.6 (1.16)	0.5 (0.42)
Misuse of Psychotherapeutics	1.2 (0.08)	3.2* (0.84)	3.5 (1.20)	2.9 (1.06)
Pain Relievers	1.0 (0.07)	2.5* (0.76)	2.4 (1.06)	2.6 (1.04)
Tranquilizers	0.3 (0.04)	1.0 (0.57)	1.5 (0.93)	0.2 (0.18)
Stimulants	0.2 (0.03)	0.4 (0.31)	**	0.3 (0.21)
Sedatives	0.1 (0.02)	0.0* (0.01)	**	0.0 (0.02)
ALCOHOL	8.3 (0.25)	10.8* (1.26)	11.5 (1.74)	9.8 (1.84)
BOTH ILLICIT DRUGS AND ALCOHOL	1.4 (0.09)	3.7* (0.84)	4.4* (1.25)	2.6 (0.88)
ILLCIT DRUGS OR ALCOHOL	10.6 (0.27)	16.7* (1.69)	18.2* (2.37)	14.5 (2.17)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.18 Substance Use Disorder for Specific Substances in the Past Year among Females Aged 18 or Older, by Sexual Identity

Past Year Use Disorder	Heterosexual/Straight	Any Sexual Minority	Lesbian	Bisexual
ILLICIT DRUGS	1.6 (0.09)	6.6* (0.67)	4.1* (0.93)	7.6* (0.85)
Marijuana	0.7 (0.06)	3.5* (0.45)	2.6* (0.75)	3.9* (0.55)
Cocaine	0.2 (0.04)	0.9* (0.30)	0.4 (0.33)	1.1* (0.40)
Heroin	0.1 (0.02)	0.6* (0.20)	0.0* (0.03)	0.9* (0.29)
Hallucinogens	0.0 (0.01)	0.3* (0.11)	0.1 (0.08)	0.4* (0.15)
Inhalants	0.0 (0.00)	**	**	0.0 (0.01)
Methamphetamine	0.2 (0.03)	0.5 (0.16)	0.1 (0.10)	0.7* (0.22)
Misuse of Psychotherapeutics	0.7 (0.07)	2.5* (0.41)	1.2 (0.45)	3.1* (0.53)
Pain Relievers	0.5 (0.06)	1.7* (0.32)	0.8 (0.35)	2.2* (0.43)
Tranquilizers	0.2 (0.03)	0.8* (0.24)	0.3 (0.25)	1.0* (0.32)
Stimulants	0.1 (0.02)	0.6* (0.19)	0.1 (0.11)	0.8* (0.26)
Sedatives	0.1 (0.02)	0.0 (0.03)	**	0.0 (0.04)
ALCOHOL	3.9 (0.15)	10.8* (0.91)	6.8* (1.29)	12.5* (1.13)
BOTH ILLICIT DRUGS AND ALCOHOL	0.4 (0.05)	3.4* (0.51)	1.4* (0.44)	4.3* (0.69)
ILLICIT DRUGS OR ALCOHOL	5.1 (0.17)	14.0* (1.02)	9.5* (1.55)	15.8* (1.23)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.19 Substance Use Disorder for Specific Substances in the Past Year among Adults Aged 18 to 25, by Sexual Identity

Past Year Use Disorder	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLCIT DRUGS	6.8 (0.26)	11.7* (1.12)	14.2* (2.24)	10.8* (1.23)
Marijuana	4.9 (0.22)	7.4* (0.86)	8.9* (1.81)	6.8 (0.95)
Cocaine	0.6 (0.09)	1.2 (0.37)	1.2 (0.78)	1.1 (0.41)
Heroin	0.4 (0.06)	1.1 (0.38)	0.9 (0.66)	1.1 (0.46)
Hallucinogens	0.3 (0.05)	0.9* (0.32)	1.4 (0.87)	0.8 (0.28)
Inhalants	0.0 (0.02)	0.2 (0.10)	0.5 (0.36)	0.0 (0.01)
Methamphetamine	0.4 (0.07)	0.8 (0.29)	0.6 (0.36)	0.9 (0.37)
Misuse of Psychotherapeutics	1.9 (0.14)	3.2* (0.57)	1.9 (0.75)	3.7* (0.74)
Pain Relievers	1.1 (0.11)	2.2* (0.49)	1.2 (0.63)	2.6* (0.64)
Tranquilizers	0.6 (0.09)	1.0 (0.32)	0.5 (0.35)	1.2 (0.43)
Stimulants	0.4 (0.06)	0.6 (0.19)	0.2 (0.23)	0.7 (0.24)
Sedatives	0.1 (0.02)	0.0 (0.02)	**	0.0 (0.02)
ALCOHOL	10.6 (0.33)	14.7* (1.21)	15.2* (2.07)	14.5* (1.37)
BOTH ILLICIT DRUGS AND ALCOHOL	2.6 (0.16)	6.2* (0.86)	6.3* (1.46)	6.2* (1.00)
ILLCIT DRUGS OR ALCOHOL	14.8 (0.38)	20.1* (1.37)	23.1* (2.52)	19.0* (1.52)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.20 Substance Use Disorder for Specific Substances in the Past Year among Adults Aged 26 or Older, by Sexual Identity

Past Year Use Disorder	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
ILLCIT DRUGS	2.0 (0.09)	6.0* (0.85)	6.6* (1.48)	5.5* (0.87)
Marijuana	0.7 (0.05)	2.3* (0.49)	2.6* (0.86)	2.1* (0.52)
Cocaine	0.3 (0.04)	0.9* (0.30)	0.6 (0.32)	1.2 (0.50)
Heroin	0.2 (0.03)	0.4 (0.16)	0.2 (0.14)	0.7 (0.28)
Hallucinogens	0.0 (0.01)	0.2 (0.14)	0.1 (0.14)	0.2 (0.23)
Inhalants	0.0 (0.01)	0.1 (0.11)	0.2 (0.22)	**
Methamphetamine	0.3 (0.04)	1.1 (0.43)	1.8 (0.84)	0.4 (0.22)
Misuse of Psychotherapeutics	0.8 (0.06)	2.6* (0.54)	2.7* (0.88)	2.6* (0.63)
Pain Relievers	0.7 (0.05)	2.0* (0.48)	1.8 (0.77)	2.1* (0.56)
Tranquilizers	0.2 (0.02)	0.8 (0.36)	1.1 (0.68)	0.5 (0.28)
Stimulants	0.1 (0.02)	0.5 (0.23)	**	0.7* (0.29)
Sedatives	0.1 (0.01)	0.0 (0.02)	**	0.0 (0.04)
ALCOHOL	5.3 (0.16)	9.1* (0.94)	8.1* (1.35)	10.0* (1.31)
BOTH ILLICIT DRUGS AND ALCOHOL	0.6 (0.05)	2.3* (0.54)	2.3 (0.88)	2.3* (0.64)
ILLCIT DRUGS OR ALCOHOL	6.7 (0.17)	12.8* (1.19)	12.4* (1.80)	13.3* (1.46)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.21 Need for Treatment for Substance Use in the Past Year among Adults Aged 18 or Older, by Sexual Identity

Treatment Type/Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Need for Treatment for Illicit Drug or Alcohol Use	8.1 (0.16)	15.9* (0.98)	14.9* (1.55)	16.6* (1.12)
18-25	15.1 (0.38)	20.4* (1.37)	23.6* (2.53)	19.2* (1.52)
26 or Older	7.0 (0.17)	13.9* (1.22)	12.7* (1.80)	15.0* (1.55)
Male	11.0 (0.27)	17.5* (1.76)	18.5* (2.37)	15.9* (2.42)
Female	5.3 (0.18)	14.8* (1.05)	9.9* (1.57)	16.9* (1.28)
Need for Treatment for Illicit Drug Use	2.9 (0.10)	8.4* (0.74)	8.3* (1.27)	8.5* (0.81)
18-25	7.1 (0.26)	12.1* (1.12)	14.7* (2.25)	11.1* (1.23)
26 or Older	2.2 (0.10)	6.8* (0.91)	6.7* (1.48)	6.9* (1.08)
Male	4.0 (0.16)	10.2* (1.48)	11.2* (2.05)	8.6* (1.91)
Female	1.8 (0.10)	7.2* (0.70)	4.3* (0.94)	8.5* (0.90)
Need for Treatment for Alcohol Use	6.3 (0.15)	11.5* (0.82)	10.1* (1.20)	12.5* (1.01)
18-25	10.8 (0.34)	15.1* (1.22)	15.8* (2.10)	14.8* (1.39)
26 or Older	5.6 (0.16)	9.9* (1.02)	8.7* (1.39)	11.1* (1.39)
Male	8.6 (0.25)	11.9* (1.39)	12.2* (1.79)	11.5 (2.17)
Female	4.1 (0.16)	11.2* (0.93)	7.3* (1.31)	12.9* (1.16)

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

NOTE: Respondents were classified as needing treatment for an illicit drug use problem if they met the criteria for an illicit drug use disorder as defined in the *Diagnostic and Statistical Manual of Mental Disorders*, 4th edition (DSM-IV), or received treatment for illicit drug use at a specialty facility (i.e., drug and alcohol rehabilitation facility [inpatient or outpatient], hospital [inpatient only], or mental health center).

NOTE: Respondents were classified as needing treatment for an alcohol use problem if they met at least one of three criteria during the past year: (1) dependent on alcohol, (2) abuse of alcohol, or (3) received treatment for alcohol use at a specialty facility (i.e., drug and alcohol rehabilitation facility [inpatient or outpatient], hospital [inpatient only], or mental health center).

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.22 Receipt of Any Treatment and Receipt of Treatment at a Specialty Facility for an Illicit Drug or Alcohol Use Problem in the Past Year among Adults Aged 18 or Older, by Sexual Identity

Treatment Type/Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Any Treatment	1.3 (0.07)	3.3* (0.48)	2.9* (0.73)	3.5* (0.63)
18-25	1.9 (0.14)	2.7 (0.46)	3.2 (1.01)	2.5 (0.54)
26 or Older	1.3 (0.08)	3.5* (0.65)	2.8 (0.88)	4.2* (0.96)
Male	1.8 (0.11)	3.8* (0.98)	4.2 (1.26)	3.1 (1.48)
Female	0.9 (0.08)	2.9* (0.46)	1.0 (0.33)	3.7* (0.66)
Treatment at a Specialty Facility	0.9 (0.05)	2.4* (0.40)	1.9* (0.50)	2.8* (0.58)
18-25	1.1 (0.11)	2.1* (0.43)	2.4 (0.85)	2.0 (0.50)
26 or Older	0.8 (0.06)	2.6* (0.54)	1.7 (0.58)	3.4* (0.89)
Male	1.2 (0.09)	2.8* (0.78)	2.5 (0.82)	3.1 (1.48)
Female	0.5 (0.06)	2.2* (0.41)	0.9 (0.31)	2.7* (0.57)

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.23 Receipt of Treatment at a Specialty Facility for an Illicit Drug or Alcohol Use Problem in the Past Year among Adults Aged 18 or Older Who Needed Treatment, by Sexual Identity

Characteristic	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Total	10.6 (0.62)	15.3* (2.21)	12.5 (3.04)	17.1* (3.13)
18-25	7.3 (0.70)	10.2 (2.02)	10.1 (3.45)	10.2 (2.50)
26 or Older	11.7 (0.78)	18.7* (3.36)	**	**
Male	10.8 (0.78)	15.8 (3.91)	13.7 (4.03)	**
Female	10.2 (1.02)	14.9 (2.51)	**	16.3 (3.03)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity were excluded.

NOTE: Respondents were classified as needing treatment for an illicit drug or alcohol use problem if they met the criteria for a substance use disorder as defined in the *Diagnostic and Statistical Manual of Mental Disorders*, 4th edition (DSM-IV), or received treatment for illicit drug or alcohol use at a specialty facility (i.e., drug and alcohol rehabilitation facility [inpatient or outpatient], hospital [inpatient only], or mental health center).

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.24 Received Mental Health Services in the Past Year among Adults Aged 18 or Older, by Sexual Identity

Mental Health Services	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Any Mental Health Service Use	13.7 (0.23)	26.4* (1.20)	25.4* (2.07)	27.2* (1.48)
18-25	10.6 (0.31)	22.6* (1.32)	19.0* (2.35)	23.9* (1.61)
26 or Older	14.2 (0.26)	28.2* (1.61)	27.0* (2.49)	29.3* (2.21)
Male	9.7 (0.28)	23.5* (2.14)	25.5* (2.84)	20.5* (2.91)
Female	17.5 (0.35)	28.4* (1.54)	25.2* (3.05)	29.7* (1.77)
Inpatient	0.8 (0.06)	3.2* (0.54)	3.4* (0.98)	3.0* (0.59)
18-25	1.2 (0.12)	3.1* (0.55)	4.2* (1.33)	2.6* (0.57)
26 or Older	0.7 (0.07)	3.2* (0.73)	3.2* (1.18)	3.2* (0.89)
Male	0.8 (0.08)	3.2* (0.96)	4.2* (1.51)	1.5* (0.61)
Female	0.8 (0.08)	3.2* (0.63)	2.3* (1.03)	3.6* (0.77)
Outpatient	6.7 (0.17)	16.2* (1.02)	16.3* (1.87)	16.2* (1.16)
18-25	5.8 (0.24)	14.2* (1.12)	11.1* (1.84)	15.4* (1.34)
26 or Older	6.8 (0.19)	17.2* (1.36)	17.6* (2.27)	16.8* (1.64)
Male	4.8 (0.19)	14.2* (1.83)	15.9* (2.59)	11.6 (2.23)
Female	8.5 (0.26)	17.6* (1.25)	16.8 (2.68)	18.0* (1.42)
Prescription Medication	11.5 (0.22)	20.9* (1.10)	19.7* (1.82)	21.7* (1.37)
18-25	7.8 (0.26)	17.5* (1.18)	14.7* (2.08)	18.5* (1.40)
26 or Older	12.0 (0.25)	22.4* (1.50)	21.0* (2.20)	23.8* (2.11)
Male	7.8 (0.25)	18.4* (1.87)	20.7* (2.57)	14.9* (2.44)
Female	14.9 (0.33)	22.5* (1.39)	18.2 (2.51)	24.3* (1.63)

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity or mental health service information were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.25 Received Mental Health Services in the Past Year among Adults Aged 18 or Older with Any Mental Illness, by Sexual Identity

Mental Health Services	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Any Mental Health Service Use	42.6 (0.77)	48.5* (2.06)	55.0* (3.99)	45.7 (2.34)
18-25	30.9 (1.00)	36.6* (2.35)	37.1 (5.02)	36.5 (2.70)
26 or Older	44.8 (0.89)	54.9* (2.76)	60.5* (4.75)	51.9* (3.42)
Male	35.1 (1.19)	47.3* (4.22)	55.8* (5.61)	37.9 (5.73)
Female	47.4 (1.00)	49.2 (2.33)	53.8 (5.29)	48.1 (2.58)
Inpatient	3.1 (0.26)	6.9* (1.19)	9.8* (2.70)	5.6* (1.23)
18-25	4.0 (0.45)	5.5* (1.08)	10.9 (3.71)	4.2* (0.94)
26 or Older	2.9 (0.30)	7.6* (1.72)	9.4* (3.34)	6.6 (1.92)
Male	3.5 (0.48)	7.4* (2.17)	11.5* (3.84)	2.9 (1.40)
Female	2.9 (0.30)	6.6* (1.42)	**	6.4 (1.53)
Outpatient	24.7 (0.67)	32.6* (2.01)	40.0* (4.08)	29.4* (2.15)
18-25	19.5 (0.88)	25.7 (2.14)	25.1 (4.44)	25.8 (2.36)
26 or Older	25.7 (0.78)	36.3* (2.70)	44.6 (4.99)	31.7 (3.07)
Male	20.9 (1.02)	31.8 (4.00)	42.0* (5.68)	20.4 (4.75)
Female	27.2 (0.87)	33.0* (2.26)	37.2 (5.23)	32.1* (2.47)
Prescription Medication	36.5 (0.75)	39.4 (2.08)	44.1 (4.07)	37.4 (2.25)
18-25	23.3 (0.94)	28.6* (2.14)	29.7 (4.78)	28.3* (2.36)
26 or Older	38.9 (0.88)	45.2* (2.90)	48.6 (5.00)	43.4 (3.48)
Male	29.2 (1.14)	39.2* (4.16)	47.5* (5.73)	30.2 (5.39)
Female	41.1 (0.99)	39.5 (2.26)	39.3 (5.12)	39.6 (2.44)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity or mental health service information were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.

Table B.26 Received Mental Health Services in the Past Year among Adults Aged 18 or Older with Serious Mental Illness, by Sexual Identity

Mental Health Services	Heterosexual/Straight	Any Sexual Minority	Lesbian or Gay	Bisexual
Any Mental Health Service Use	65.8 (1.46)	63.6 (3.27)	**	59.0 (3.85)
18-25	48.0 (2.38)	58.0* (4.30)	**	56.8 (4.78)
26 or Older	68.9 (1.68)	66.7 (4.37)	**	60.6 (5.65)
Male	57.5 (2.64)	**	**	**
Female	70.4 (1.74)	64.4 (3.60)	**	61.3* (4.10)
Inpatient	6.2 (0.70)	12.6 (2.59)	**	8.9 (2.20)
18-25	7.9 (1.31)	11.7* (2.61)	**	7.3 (1.89)
26 or Older	5.9 (0.79)	13.0 (3.70)	**	10.0* (3.44)
Male	6.7 (1.31)	**	**	**
Female	5.9 (0.85)	10.3 (2.66)	**	9.3 (2.56)
Outpatient	44.0 (1.60)	42.3* (3.55)	**	36.6 (3.64)
18-25	33.3 (2.33)	42.8 (4.27)	**	42.3 (4.56)
26 or Older	46.0 (1.85)	42.1 (4.87)	**	32.6 (5.13)
Male	38.6 (2.57)	**	**	**
Female	47.1 (1.97)	42.9 (3.89)	**	39.8 (4.06)
Prescription Medication	58.2 (1.57)	52.6 (3.48)	**	50.1 (3.80)
18-25	37.4 (2.30)	46.8* (4.14)	**	45.5 (4.36)
26 or Older	61.9 (1.82)	55.8 (4.83)	**	53.4 (5.78)
Male	49.8 (2.82)	**	**	**
Female	62.9 (1.89)	52.6* (3.81)	**	51.0* (4.03)

**Low precision; no estimate reported.

NOTE: Estimates shown are percentages with standard errors included in parentheses.

NOTE: Respondents with missing data for their sexual identity or mental health service information were excluded.

*Difference between this estimate and the estimate for heterosexual/straight adults is statistically significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2015.