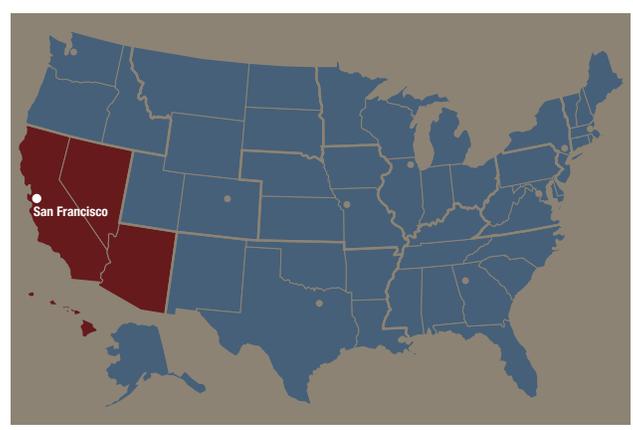




Behavioral Health Barometer

EXECUTIVE SUMMARY

Region IX, 2014



Substance Abuse and Mental Health Services Administration

SAMHSA

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Acknowledgments

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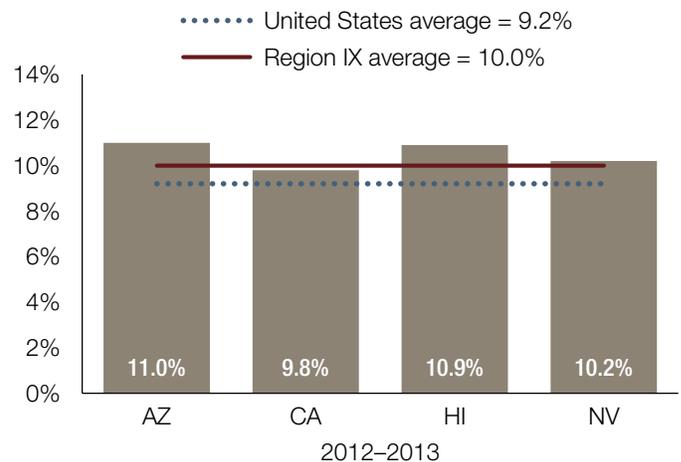
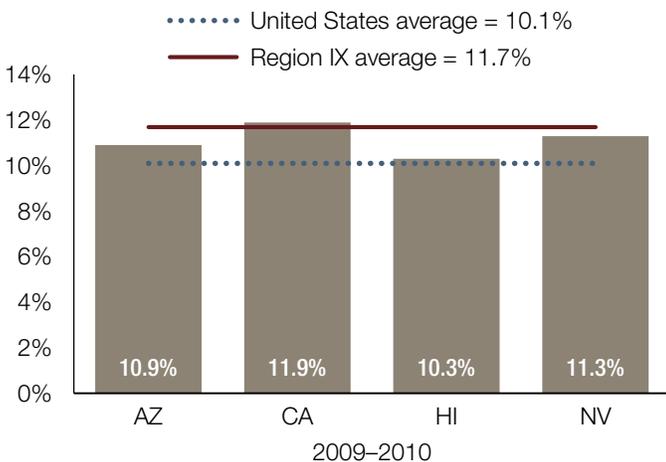
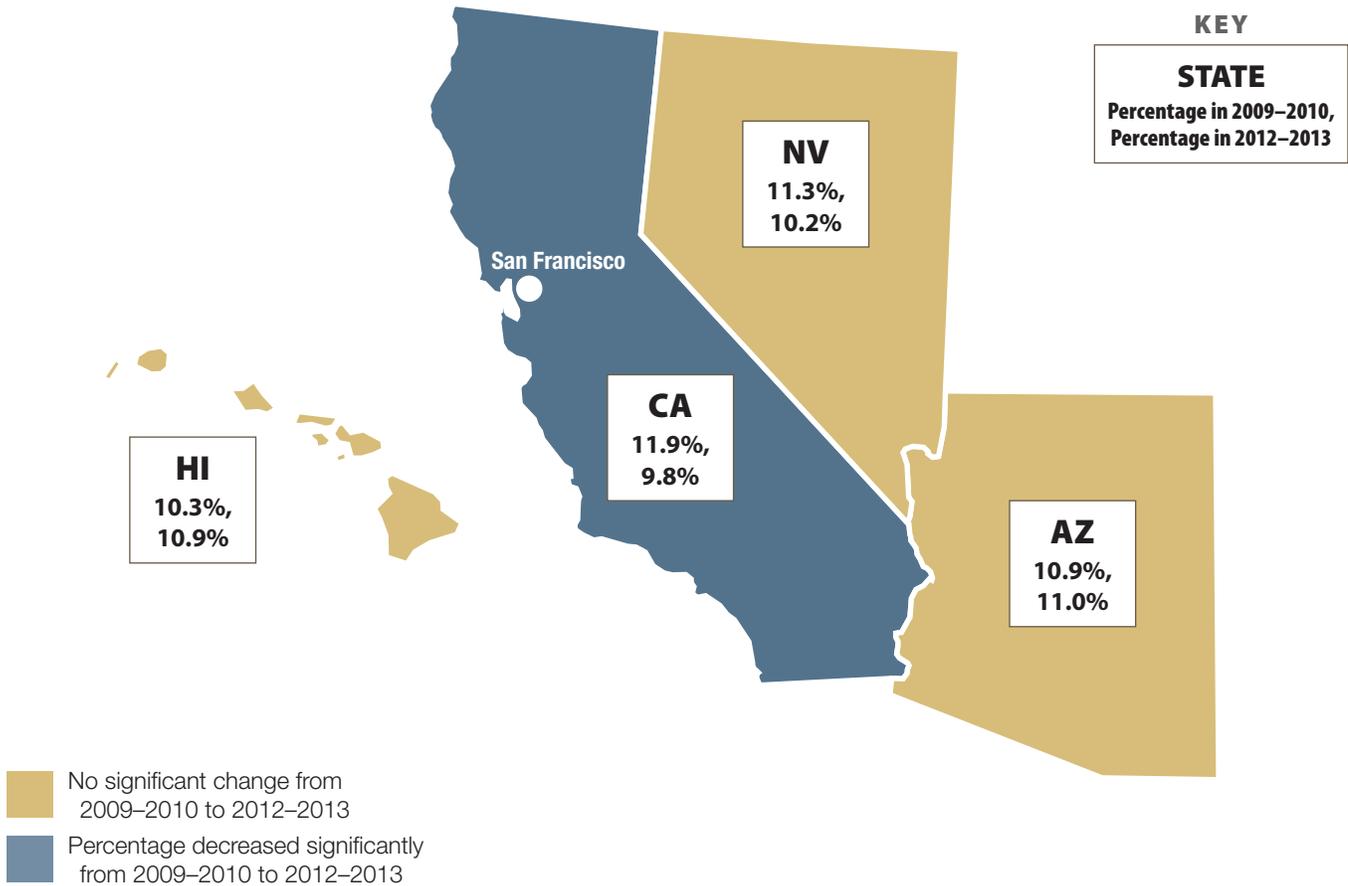
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YOUTH SUBSTANCE USE

ILLICIT DRUG USE



Past-Month Illicit Drug Use Among Adolescents Aged 12–17 in Region IX (2009–2010, 2012–2013)¹



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2009–2010 and 2012–2013.

YOUTH SUBSTANCE USE

ILLICIT DRUG USE



Past-Month Illicit Drug Use Among Adolescents Aged 12–17 in Region IX (2009–2010, 2012–2013)¹

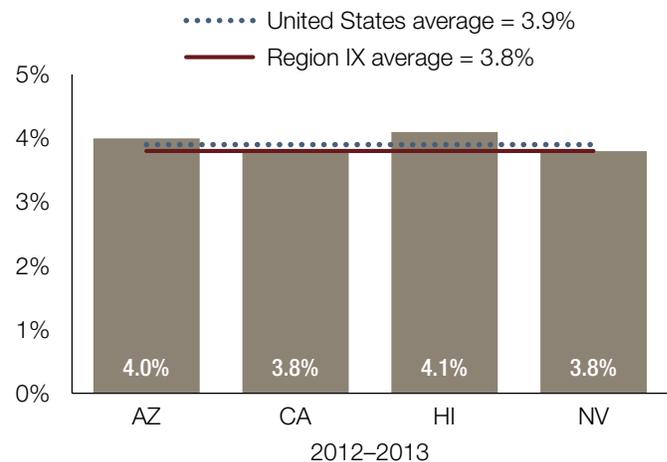
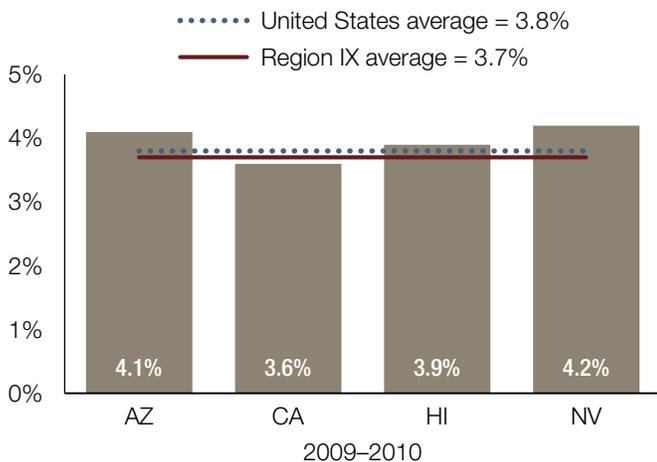
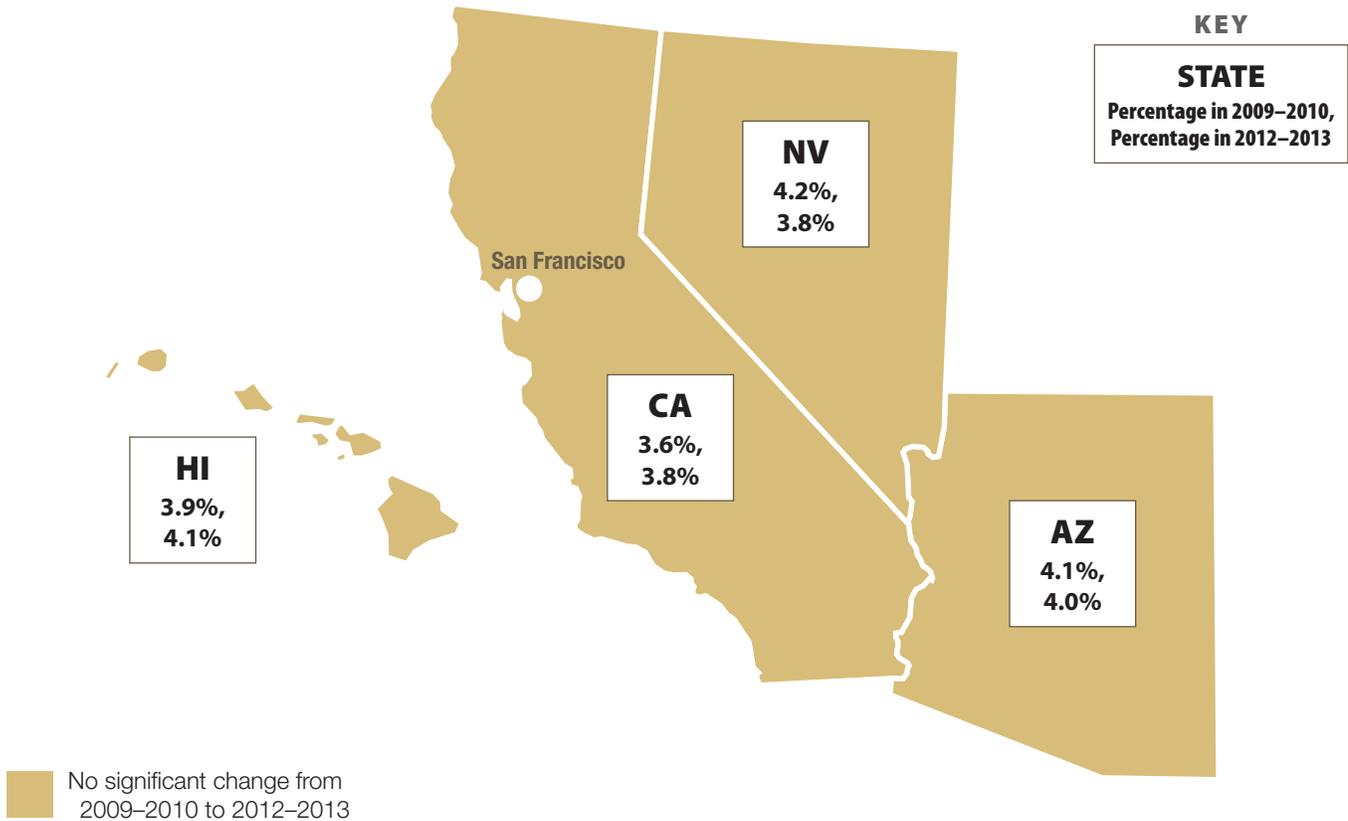
- In 2009–2010, 11.7% of adolescents aged 12–17 in Region IX used illicit drugs within the month prior to being surveyed. The percentages of past-month illicit drug use among adolescents aged 12–17 across the states in Region IX ranged from 10.3% to 11.9%.
- In 2012–2013, 1 in 10 (10.0%) adolescents aged 12–17 in Region IX used illicit drugs within the month prior to being surveyed. The percentages of past-month illicit drug use among adolescents aged 12–17 across the states in Region IX ranged from 9.8% to 11.0%.
- The percentage of past-month illicit drug use among adolescents aged 12–17 decreased significantly in California from 11.9% in 2009–2010 to 9.8% in 2012–2013. There were no significant changes in the percentages of past-month illicit drug use among adolescents aged 12–17 in Arizona, Hawaii, or Nevada.
- In 2009–2010, the percentage of past-month illicit drug use among adolescents aged 12–17 in California (11.9%) was significantly higher than the U.S. (10.1%) average.
- In 2012–2013, the percentages of past-month illicit drug use among adolescents aged 12–17 for each state in the region were not significantly different from the Region IX (10.0%) or U.S. (9.2%) averages.

ADULT MENTAL HEALTH AND TREATMENT

THOUGHTS OF SUICIDE



Past-Year Serious Thoughts of Suicide Among Adults Aged 18 or Older in Region IX (2009–2010, 2012–2013)^{1,2}



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2009–2010 and 2012–2013.

ADULT MENTAL HEALTH AND TREATMENT

THOUGHTS OF SUICIDE



Past-Year Serious Thoughts of Suicide Among Adults Aged 18 or Older in Region IX (2009–2010, 2012–2013)^{1,2}

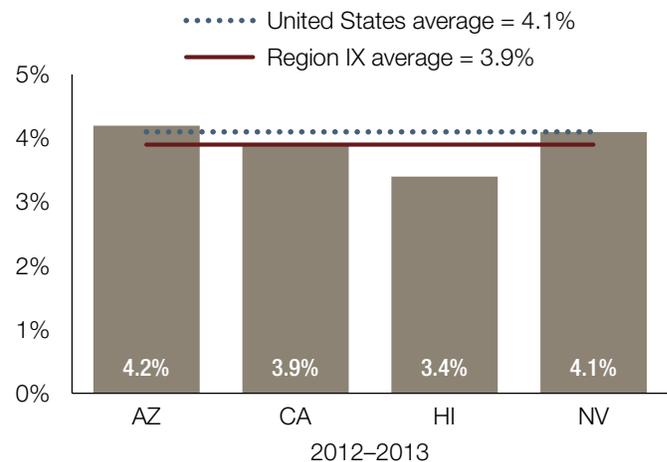
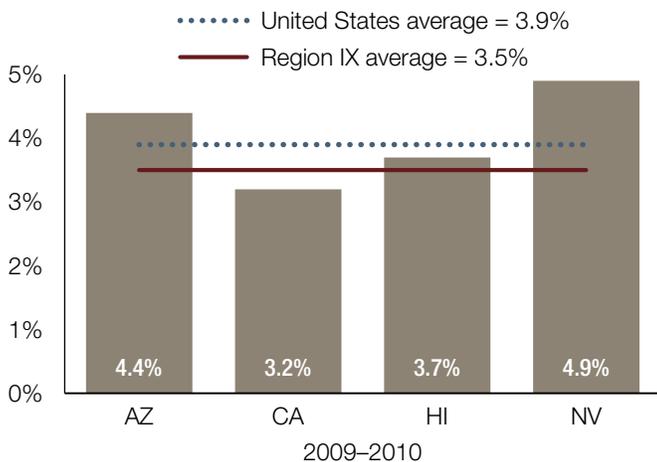
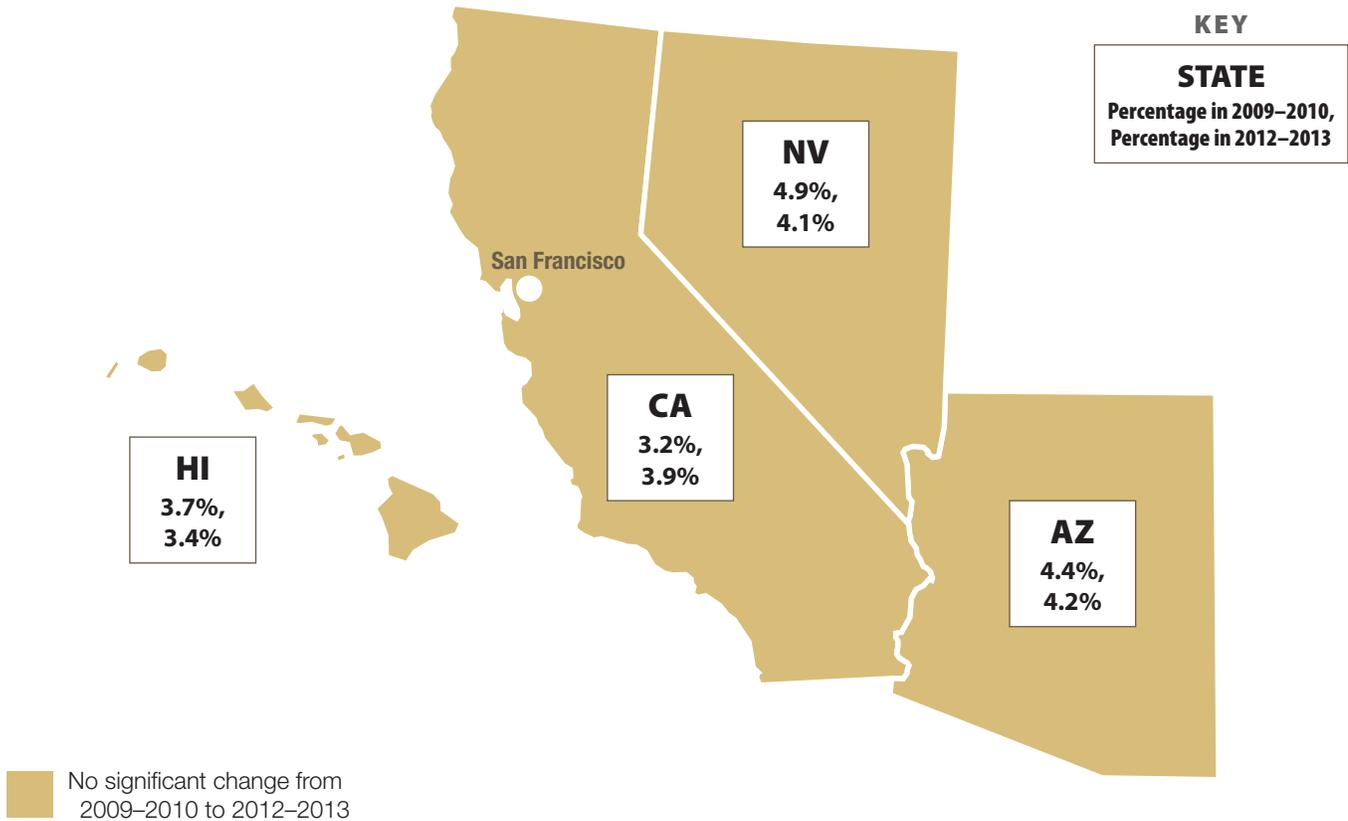
- In 2009–2010, 3.7% of adults aged 18 or older in Region IX had serious thoughts of suicide within the year prior to being surveyed. The percentages of past-year serious thoughts of suicide among adults aged 18 or older across the states in Region IX ranged from 3.6% to 4.2%.
- In 2012–2013, 3.8% of adults aged 18 or older in Region IX had serious thoughts of suicide within the year prior to being surveyed. The percentages of past-year serious thoughts of suicide among adults aged 18 or older across the states in Region IX ranged from 3.8% to 4.1%.
- For all states in Region IX, there were no significant changes in the percentages of past-year serious thoughts of suicide among adults aged 18 or older from 2009–2010 to 2012–2013.
- In 2009–2010, the percentages of past-year serious thoughts of suicide among adults aged 18 or older for each state in the region were not significantly different from the Region IX (3.7%) or U.S. (3.8%) averages.
- In 2012–2013, the percentages of past-year serious thoughts of suicide among adults aged 18 or older for each state in the region were not significantly different from the Region IX (3.8%) or U.S. (3.9%) averages.

ADULT MENTAL HEALTH AND TREATMENT

SERIOUS MENTAL ILLNESS



Past-Year Serious Mental Illness (SMI) Among Adults Aged 18 or Older in Region IX (2009–2010, 2012–2013)^{1,3}



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2009–2010 and 2012–2013.

ADULT MENTAL HEALTH AND TREATMENT SERIOUS MENTAL ILLNESS



Past-Year Serious Mental Illness (SMI) Among Adults Aged 18 or Older in Region IX (2009–2010, 2012–2013)^{1,3}

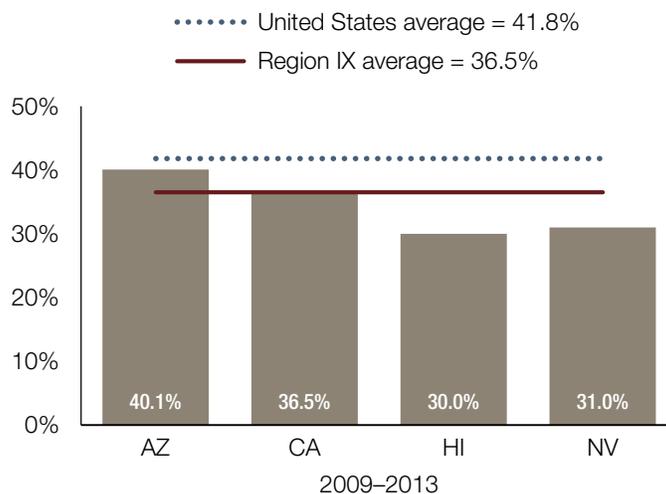
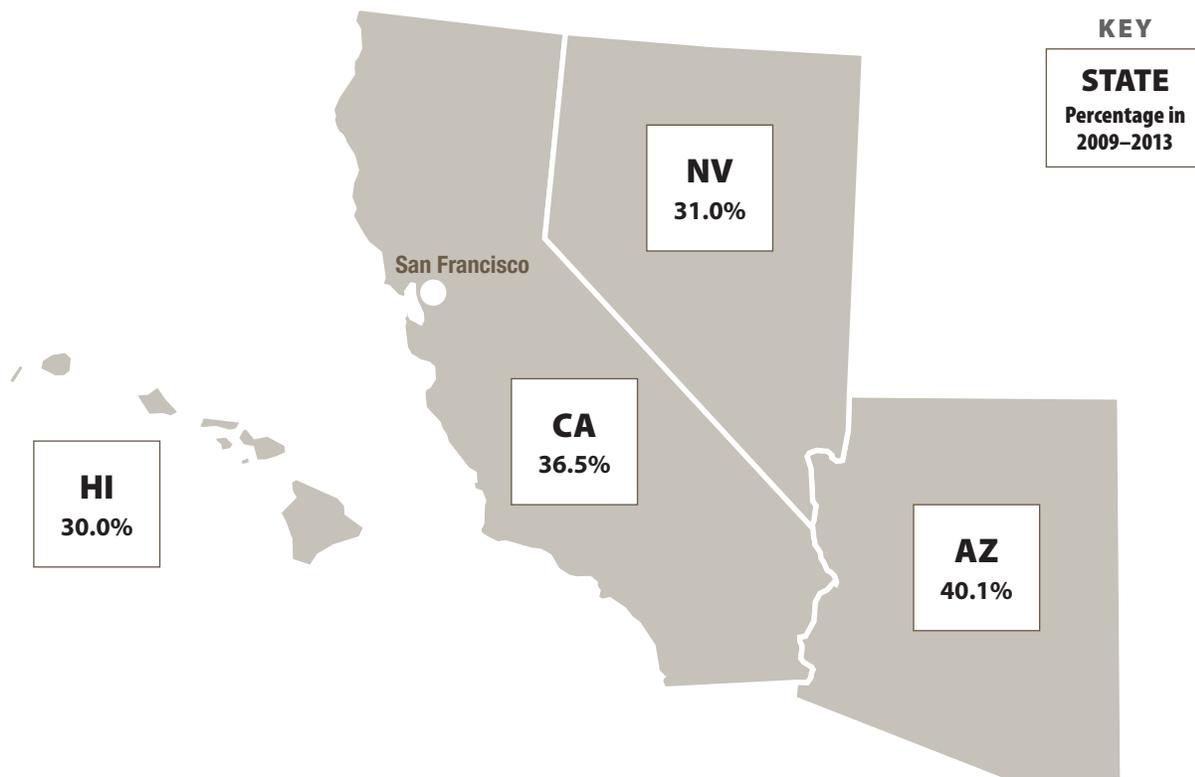
- In 2009–2010, 3.5% of adults aged 18 or older in Region IX had SMI within the year prior to being surveyed. The percentages of past-year SMI among adults aged 18 or older across the states in Region IX ranged from 3.2% to 4.9%.
- In 2012–2013, 3.9% of adults aged 18 or older in Region IX had SMI within the year prior to being surveyed. The percentages of past-year SMI among adults aged 18 or older across the states in Region IX ranged from 3.4% to 4.2%.
- For all states in Region IX, there were no significant changes in the percentages of past-year SMI among adults aged 18 or older from 2009–2010 to 2012–2013.
- In 2009–2010, the percentage of past-year SMI among adults aged 18 or older in California (3.2%) was significantly lower than the Region IX (3.5%) and U.S. (3.9%) averages, whereas the percentage in Nevada (4.9%) was significantly higher than the regional average.
- In 2012–2013, the percentages of past-year SMI among adults aged 18 or older for each state in the region were not significantly different from the Region IX (3.9%) or U.S. (4.1%) averages.

ADULT MENTAL HEALTH AND TREATMENT

TREATMENT FOR ANY MENTAL ILLNESS



Past-Year Mental Health Treatment/Counseling Among Adults Aged 18 or Older with Any Mental Illness (AMI) in Region IX (2009–2013)⁴



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2009–2013.

ADULT MENTAL HEALTH AND TREATMENT

TREATMENT FOR ANY MENTAL ILLNESS



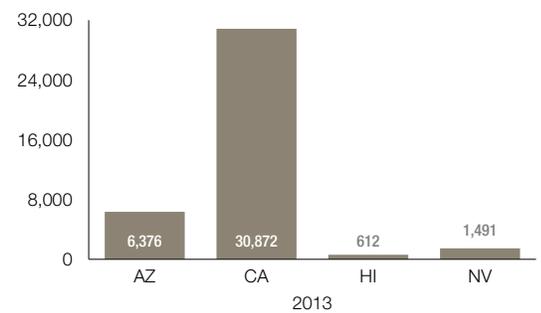
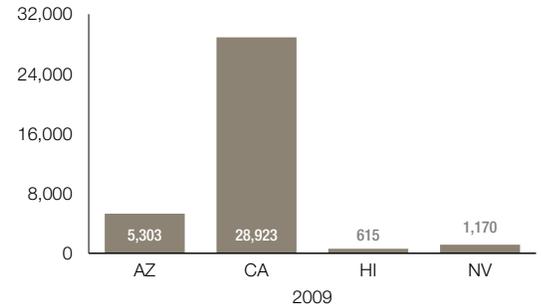
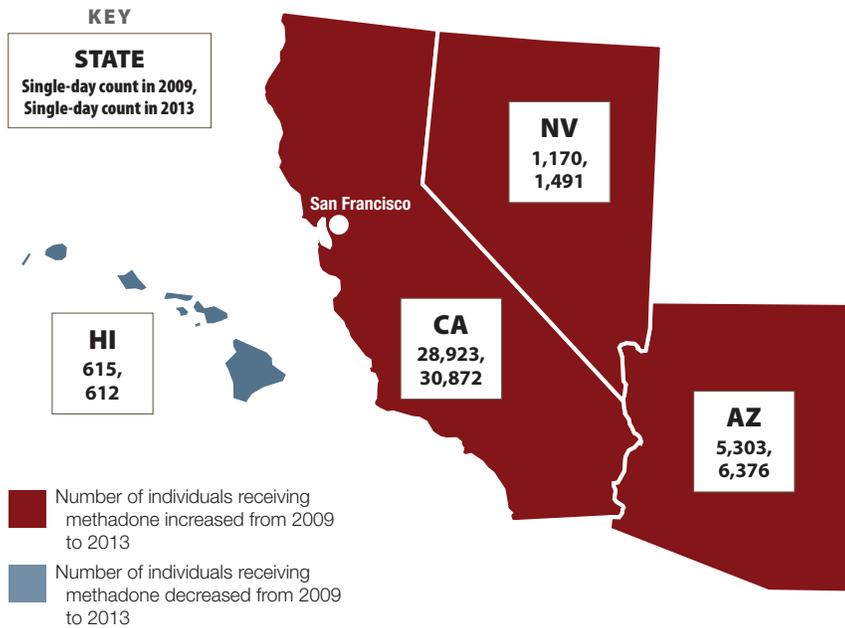
Past-Year Mental Health Treatment/Counseling Among Adults Aged 18 or Older with Any Mental Illness (AMI) in Region IX (2009–2013)⁴

- From 2009 to 2013, an annual average of nearly 4 in 10 (36.5%) adults aged 18 or older with AMI in Region IX received mental health treatment/counseling within the year prior to being surveyed.
- From 2009 to 2013, the annual averages of past-year mental health treatment/counseling among adults aged 18 or older with AMI across the states in Region IX ranged from 30.0% to 40.1%.
- From 2009 to 2013, the annual averages of past-year mental health treatment/counseling among adults aged 18 or older with AMI in California (36.5%), Hawaii (30.0%), and Nevada (31.0%) were significantly lower than the U.S. (41.8%) annual average.
- From 2009 to 2013, the annual averages of past-year mental health treatment/counseling among adults aged 18 or older with AMI in Hawaii (30.0%) and Nevada (31.0%) were significantly lower than the Region IX (36.5%) annual average.

SUBSTANCE USE TREATMENT OPIOIDS (MEDICATION-ASSISTED THERAPY)

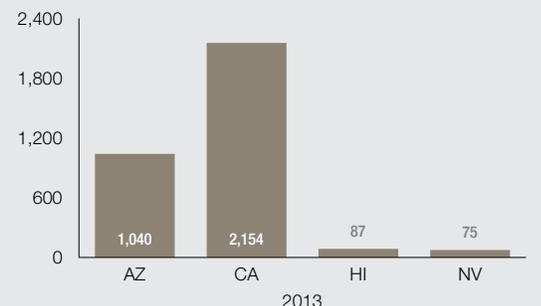
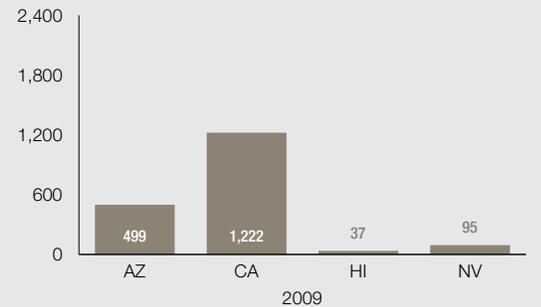
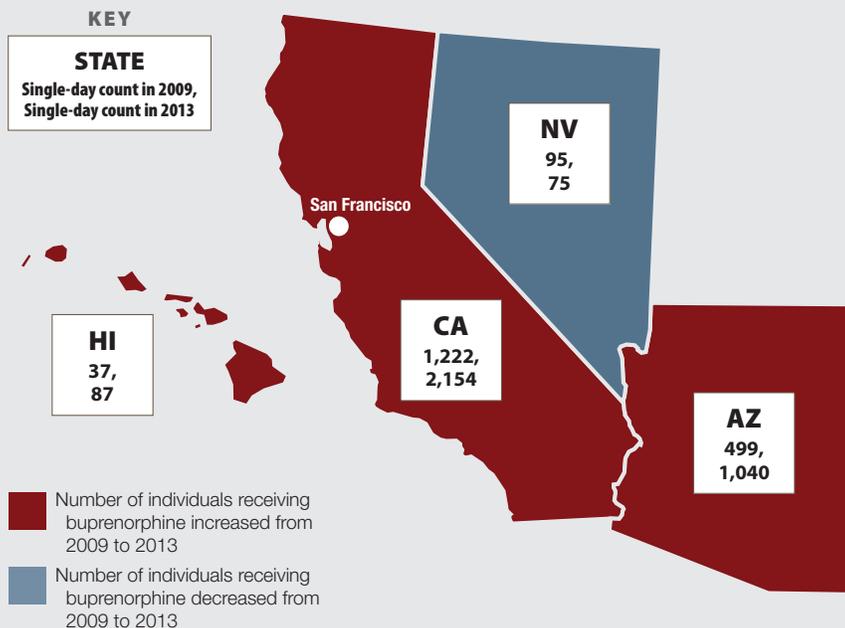


Individuals Enrolled in Opioid Treatment Programs (OTPs) in Region IX Receiving Methadone: Single-Day Counts (2009, 2013)⁵



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey of Substance Abuse Treatment Services, 2009 and 2013.

Individuals Enrolled in Substance Use Treatment in Region IX Receiving Buprenorphine: Single-Day Counts (2009, 2013)^{5,6}



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey of Substance Abuse Treatment Services, 2009 and 2013.

SUBSTANCE USE TREATMENT

OPIOIDS (MEDICATION-ASSISTED THERAPY)



Individuals Enrolled in Opioid Treatment Programs (OTPs) in Region IX Receiving Methadone: Single-Day Counts (2009, 2013)⁵

- In 2009, the numbers of individuals in OTPs receiving methadone on a single day across the states in Region IX ranged from 615 to 28,923 individuals.
- In 2013, the numbers of individuals enrolled in OTPs receiving methadone on a single day across the states in Region IX ranged from 612 to 30,872 individuals.
- From 2009 to 2013, single-day counts of individuals enrolled in OTPs receiving methadone increased in Arizona, California, and Nevada, while single-day counts decreased in Hawaii.

Individuals Enrolled in Substance Use Treatment in Region IX Receiving Buprenorphine: Single-Day Counts (2009, 2013)^{5,6}

- In 2009, the numbers of individuals enrolled in substance use treatment receiving buprenorphine on a single day across the states in Region IX ranged from 37 to 1,222 individuals.
- In 2013, the numbers of individuals enrolled in substance use treatment receiving buprenorphine on a single day across the states in Region IX ranged from 75 to 2,154 individuals.
- From 2009 to 2013, single-day counts of individuals enrolled in substance use treatment receiving buprenorphine increased in Arizona, California, and Hawaii, while single-day counts decreased in Nevada.
- From 2009 to 2013, single-day counts of individuals enrolled in substance use treatment receiving buprenorphine increased approximately 135% in Hawaii, 108% in Arizona and 76% in California, while single-day counts decreased 21% in Nevada during the same time period.

FIGURE NOTES



- ¹ State estimates are based on a small area estimation procedure in which state-level National Survey on Drug Use and Health (NSDUH) data from 2 consecutive survey years are combined with local-area county and census block group/tract-level data from the state. This model-based methodology provides more precise estimates of substance use at the state level than those based solely on the sample, particularly for states with smaller sample sizes.
- ² Estimates were based only on responses to suicide items in the NSDUH Mental Health module. Respondents with unknown suicide information were excluded.
- ³ Estimates of serious mental illness (SMI) presented in this publication may differ from estimates in other publications as a result of revisions made to the NSDUH mental illness estimation models in 2012. Other NSDUH mental health measures presented were not affected. Please note that 2013 Barometer reports include the revised SMI estimates. For further information, see *Revised Estimates of Mental Illness from the National Survey on Drug Use and Health*, which is available on the SAMHSA Web site at <http://www.samhsa.gov/data/sites/default/files/NSDUH148/NSDUH148/sr148-mental-illness-estimates.pdf>.
- ⁴ Estimates are annual averages based on combined 2009–2013 NSDUH data. These estimates are based solely on the sample, unlike estimates based on the small area estimation procedure as stated above.
- ⁵ Single-day counts reflect the number of persons who were enrolled in substance use treatment on March 31, 2009, and March 29, 2013.
- ⁶ Physicians who obtain specialized training may prescribe buprenorphine. Some physicians are in private, office-based practices; others are affiliated with substance abuse treatment facilities or programs and may prescribe buprenorphine to clients at those facilities. Additionally, opioid treatment programs (OTPs) may also prescribe and/or dispense buprenorphine. The buprenorphine single-day counts include only those clients who received/were prescribed buprenorphine by physicians affiliated with substance abuse treatment facilities or OTPs; they do not include clients from private practice physicians.

DEFINITIONS



Any mental illness (AMI) among adults aged 18 or older is defined as currently or at any time in the past year having had a diagnosable mental health, behavioral, or emotional disorder (excluding developmental and substance use disorders) of sufficient duration to meet diagnostic criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*. Adults who had a diagnosable mental health, behavioral, or emotional disorder in the past year, regardless of their level of functional impairment, were defined as having AMI.

Illicit drugs is defined as marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically, based on data from original National Survey on Drug Use and Health (NSDUH) questions, not including methamphetamine use items added in 2005 and 2006.

Mental health treatment/counseling is defined as having received inpatient or outpatient care or having used prescription medication for problems with emotions, nerves, or mental health.

Serious mental illness (SMI) is defined as having a diagnosable mental health, behavioral, or emotional disorder, other than a substance use disorder, that met DSM-IV criteria and resulted in serious functional impairment.

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