National Survey on Drug Use and Health (NSDUH)

- NSDUH is a comprehensive household interview survey of substance use, substance use disorders, mental health, and the receipt of treatment services for these disorders in the United States.
- NSDUH is collected face-to-face by field interviewers who read less sensitive questions to respondents and transition respondents to audio computer assisted self-interviewing for sensitive items.
- NSDUH covers the civilian, noninstitutionalized population, aged 12 or older:
  - Includes: Households, college dorms, homeless in shelters, civilians on military bases
  - Excludes: Active military, long-term hospital residents, prison populations, homeless not in shelters
- Sample includes all 50 states and DC
- Approximately 67,500 persons are interviewed annually
- Data collected from January to December
How Do We Use NSDUH?

• Provides a window into the state of substance use and mental health issues in the United States

• Helps to guide policy directions in addressing:
  • problem substances
  • prevalence of mental illness
  • intersection of substance use and mental health issues
  • provides insights that can be studied in the context of data from other agencies to help in decision-making about what types of resources are needed and where resources should be directed
Mental Illness and Substance Use Disorders in America among AI/AN Adults (≥18 y.o.)

- **10.2% (142,000)** People aged 18 or older had a substance use disorder (SUD)
- **3.8% (52,000)** People 18 or older had BOTH an SUD and a mental illness
- **18.7% (260,000)** People aged 18 or older had a mental illness

In 2019, **350,000** AI/AN adults had a mental illness and/or substance use disorder.
Alcohol Use among AI/ANs

PAST MONTH, 2016-2019 NSDUH, AI/AN 12+

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17</td>
<td>12K</td>
<td>12K</td>
<td>8K</td>
<td>12K</td>
</tr>
<tr>
<td></td>
<td>7.9%</td>
<td>7.8%</td>
<td>5.0%</td>
<td>6.7%</td>
</tr>
<tr>
<td>18-25</td>
<td>104K</td>
<td>106K</td>
<td>97K</td>
<td></td>
</tr>
<tr>
<td></td>
<td>48.1%</td>
<td>48.0%</td>
<td>44.7%</td>
<td></td>
</tr>
<tr>
<td>26 or Older</td>
<td>413K</td>
<td>475K</td>
<td>484K</td>
<td></td>
</tr>
<tr>
<td></td>
<td>36.4%</td>
<td>43.9%</td>
<td>37.6%</td>
<td>33.5%</td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Alcohol Use Disorder among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Summary: Alcohol Use in 2019

• Past month alcohol use and alcohol use disorder among the AI/AN population is increasing in ages 12-17.
• Alcohol Use Disorder in the AI/AN population slightly increased for ages 18-25.
• SAMHSA will continue its prevention programs:
  • SAMHSA Prevention Technology Transfer Centers produce resources and materials related to alcohol misuse prevention
  • CSAP ‘Talk They Hear You’ focuses on underage drinking
  • CSAP requires Partnerships for Success grantees to emphasize underage drinking prevention
  • CSAT has promoted SBIRT for alcohol use in all programs including CJ, PPW, adolescent treatment, HIV and homeless programs
  • CSAT has funded SBIRT training in medical residencies and other healthcare practitioner programs which screen for hazardous alcohol use and use disorders
Illicit Drug Use among AI/ANs: Major Concerns: Opioids, Marijuana, Methamphetamines

<table>
<thead>
<tr>
<th>Drug Type</th>
<th>%</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>20.1%</td>
<td>314K</td>
</tr>
<tr>
<td>Psychotherapeutic Drugs</td>
<td>6.3%</td>
<td>98K</td>
</tr>
<tr>
<td>Hallucinogens</td>
<td>3.9%</td>
<td>61K</td>
</tr>
<tr>
<td>Inhalants</td>
<td>2.0%</td>
<td>31K</td>
</tr>
<tr>
<td>Methamphetamines</td>
<td>1.9%</td>
<td>29K</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1.4%</td>
<td>22K</td>
</tr>
<tr>
<td>Heroin</td>
<td>0.2%</td>
<td>3K</td>
</tr>
</tbody>
</table>
Progress on the Opioid Epidemic: Prescription Pain Reliever Misuse among AI/AN

80,000 AI/ANs WITH OPIOID MISUSE (5.1% OF TOTAL POPULATION)

- 79,000 Rx Pain Reliever Misusers
- 31,000 Rx Hydrocodone
- 25,000 Rx Oxycodone
- 3,000 Heroin Users
- 1,000 Rx Pain Reliever Misusers and Heroin Users

* Estimate not shown due to low precision.
Rx = prescription.
Opioid misuse is defined as heroin use or prescription pain reliever misuse.
Opioid Misuse among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Prescription Pain Reliever Misuse and Heroin Use among AI/ANs

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Prescription Pain Reliever Misuse among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Misuse of Prescription Opioid Subtypes among AI/ANs

Past Year, 2019 NSDUH, AI/AN 12+ Subtype Users

- Hydrocodone: 10.0% (31K)
- Oxycodone
- Codeine
- Tramadol
- Buprenorphine
- Morphine
- Methadone
- Fentanyl

* Estimate not shown due to low precision.
Heroin Use among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Heroin-Related Opioid Use Disorder among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Opioid Use Disorder among AI/ANs

PAST YEAR, 2016-2019, AI/AN 12+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Treatment Gains: Number of Individuals Receiving Pharmacotherapy for Opioid Use Disorder (MAT)

Total Number receiving MAT (all types)

Summary: Opioid Misuse in the United States in 2019 Compared to 2018

- Among the AI/AN population aged 12-17, opioid misuse and prescription pain reliever misuse has increased slightly from 2018 but is decreased in all other ages.

- Heroin use and heroin-related opioid use disorder has remained stable across all age groups in the AI/AN population, including ages 18-25 after a slight increase in 2017.

- Opioid use disorder remains stable across all ages in the AI/AN population.

- Access to MAT continues to increase.
Other Illicit Substances
Past Month Marijuana Use for All Age Groups among AI/ANs

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Marijuana Use among AI/AN Young Adults (18-25 y.o.)

Past Month Use
- 2016: 20.4% (52K)
- 2017: 26.0% (56K)
- 2018: 19.8% (44K)
- 2019: 20.8% (45K)

Past Year Daily or Almost Daily Use
- 2016: 8.4% (21K)
- 2017: 10.5% (23K)
- 2018: 9.0% (20K)
- 2019: 11.4% (25K)

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Marijuana Use among AI/AN Adults 26+

Past Month Use
- 144K (12.6%)
- 146K (13.5%)
- 184K (14.3%)

Past Year Daily or Almost Daily Use
- 124K (10.5%)
- 46K (4.3%)
- 58K (4.6%)
- 30K (2.6%)

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Marijuana Use Disorder among AI/AN

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Marijuana Use among AI/AN Women by Pregnancy Status

PAST MONTH, 2016-2019 NSDUH, AI/AN 15-44

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not Pregnant</td>
<td>53K</td>
<td>73K</td>
<td>82K</td>
<td>60K</td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Daily or Almost Daily Marijuana Use among AI/AN Women by Pregnancy Status

PAST YEAR, 2016-2019 NSDUH, AI/AN 15-44

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Marijuana Use: Health Concerns

• Past month marijuana use and past year daily or almost daily use among the AI/AN populations has declined among ages 26 and older after a slight increase in 2018.

• Marijuana use disorder in the AI/AN population has increased in ages 12-17 after remaining stable in 2017 and 2018.

• There was a decrease in marijuana use disorder for ages 18-25 in the AI/AN population compared to 2018.
Cocaine Use among AI/ANs

PAST MONTH, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Methamphetamine Use among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17</td>
<td>1K</td>
<td>1K</td>
<td>0.4%</td>
<td>0.7%</td>
</tr>
<tr>
<td>18-25</td>
<td>8K</td>
<td>12K</td>
<td>5.6%+</td>
<td>3.2%</td>
</tr>
<tr>
<td>26 or Older</td>
<td>6K</td>
<td>1K</td>
<td>2.5%</td>
<td>1.3%</td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Misuse of Prescription Stimulants among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
LSD Use among AI/ANs for All Age Groups

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.
Estimates represent past year use of LSD (lysergic acid diethylamide), a type of hallucinogen.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Summary: Other Substance Use in the United States in 2019 Compared to 2018

• There was a significant decrease in cocaine use for ages 18-25 of the AI/AN population as compared to 2017.

• Methamphetamine use for 18 and older for the AI/AN population continues to decline.

• Prescription stimulant misuse has slightly increased for ages 12-17 and 18-25 of the AI/AN population.
Polysubstance Use and Mental Illness
Alcohol Use Related to Other Substance Use, MDE and SMI among AI/ANs

- Past Year Marijuana Use: 34.1% (142K; 116K) vs. 10.9% (10.9K; 116K)
- Past Year Opioid Misuse: 4.6% (49K; 24K) vs. 5.7% (15K; <500)
- Past Year Cocaine Use: 3.7% (15K; <0.05K)
- Past Year Methamphetamine Use: 3.6% (15K; 10K) vs. 1.0% (10K; 10K)

*M: Difference between this estimate and the estimate for people with past month use but not heavy alcohol use is statistically significant at the .05 level.

*Estimate not shown due to low precision.
Marijuana Use Related to Other Substance Use, MDE and SMI among AI/ANs

Past Year Opioid Misuse
- 50K (15.9%) with No Past Year Marijuana Use
- 30K (2.4%) with Any Past Year Marijuana Use

Past Month Heavy Alcohol Use
- 29K (2.3%) with No Past Year Marijuana Use
- * (estimate not shown due to low precision)

Past Year Cocaine Use
- 5K (0.4%) with No Past Year Marijuana Use
- 17K (5.4%) with Any Past Year Marijuana Use

Past Year Methamphetamine Use
- 29K (9.1%) with No Past Year Marijuana Use
- * (estimate not shown due to low precision)

Past Year MDE, 12+
- 113K (11.6%) with No Past Year Marijuana Use
- * (estimate not shown due to low precision)

Past Year SMI, 18+
- 73K (6.6%) with No Past Year Marijuana Use
- 20K (7.1%) with Any Past Year Marijuana Use

* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for people with past year marijuana use is statistically significant at the .05 level.
Comparison of Rates of Mental/Substance Use Disorders Associated with Marijuana Use among AI/ANs: National vs. Colorado Data from the National Survey on Drug Use and Health (2019)

<table>
<thead>
<tr>
<th>Disorder Description</th>
<th>National (%)</th>
<th>Colorado (%)</th>
<th>National vs. Colorado P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past Month Marijuana Use (18-25 y)</td>
<td>20.8</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Past Year Daily Marijuana Use (18-25y)</td>
<td>11.4</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Past Month Marijuana Use (&gt; 26y)</td>
<td>10.5</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Substance Use Disorder (SUD) (18+)</td>
<td>10.2</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Co-occurring SUD and SMI (18+)</td>
<td>1.5</td>
<td>*</td>
<td>*</td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

Estimates for Colorado are direct single-year estimates for 2019 and will differ from model-based estimates using data from 2018 and 2019.
Opioid Misuse Related to Other Substance Use, MDE and SMI among AI/ANs

PAST YEAR/MONTH, 2019 NSDUH, AI/AN 12+

- **Past Year Marijuana Use**: 264K (17.8%)
- **Past Month Heavy Alcohol Use**: 77K (5.2%)
- **Past Year Cocaine Use**: 11K (0.8%)
- **Past Year Methamphetamine Use**: 13K (0.9%)
- **Past Year MDE, 12+**: 136K (9.3%)
- **Past Year SMI, 18+**: 85K (6.5%)

* Estimate not shown due to low precision.

No differences between estimates and the estimate for people with past year opioid misuse are statistically significant at the .05 level.
Methamphetamine Use Related to Other Substance Use, MDE and SMI among AI/ANs

Past Year Marijuana Use: 286K (18.6%)
Past Year Opioid Misuse: 64K (4.1%)
Past Month Heavy Alcohol Use: 81K (5.3%)
Past Year Cocaine Use: 21K (1.3%)
Past Year MDE, 12+: 145K (9.6%)
Past Year SMI, 18+: 91K (6.7%)

* Estimate not shown due to low precision.

No differences between estimates and the estimate for people with past year methamphetamine use are statistically significant at the .05 level.
Summary

- Polysubstance use is common—if a person is having problems with one substance, they are likely using and may be having problems with other substances.
- Treatment providers must screen for and treat all substance use disorders and problem substance use.
- Association of substance misuse and mental illness is clear—we must all do a better job of helping Americans understand these relationships and risks.
Mental Health
Serious Mental Illness (SMI) among AI/AN

Estimates are not shown for certain years due to suppression. + Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Major Depressive Episodes among AI/ANs

PAST YEAR, 2016-2019 NSDUH, AI/AN 12+

* Estimate not shown due to low precision.
Note: The adult and youth MDE estimates are not directly comparable.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Major Depressive Episodes with Severe Impairment among AI/ANs

AI/AN Youths 12-17 y.o.

AI/AN Young Adults 18-25 y.o.

AI/AN Adults >26 y.o.

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Suicidal Thoughts, Plans, and Attempts among AI/AN Young Adults (18-25 y.o.) and AI/AN Adults (26-49 y.o.)

AI/AN Young Adults 18-25 y.o.

- Serious Thoughts: 11.1% in 2009, 11.4% in 2019
- Made a Plan: 6.0% in 2009, 4.6% in 2019
- Attempted: 3.4% in 2009, 1.8% in 2019

AI/AN Adults 26-49 y.o.

- Serious Thoughts: 6.6% in 2009, 5.0% in 2019
- Made a Plan: 2.8% in 2009, 1.0% in 2019
- Attempted: * Estimate not shown due to low precision.

No differences between 2009 estimates and the 2019 estimates are statistically significant at the .05 level.
Co-Occurring Mental and Substance Use Disorders
Substance Use among AI/AN Youths (12-17 y.o.) by Past Year Major Depressive Episode (MDE) status

- Illicit Drugs, Past Year: 24.6% Had MDE, 0% No MDE
- Marijuana, Past Year: 15.1% Had MDE, 0% No MDE
- Opioid, Past Year: 3.0% Had MDE, 0% No MDE
- Binge Alcohol, Past Month: 4.8% Had MDE, 0% No MDE
- Cigarettes, Past Month: 2.2% Had MDE, 0% No MDE

* Estimate not shown due to low precision.

No differences between estimates for youths without MDE and estimates for youths with MDE are statistically significant at the .05 level.
Co-Occurring Substance Use Disorder and Any Mental Illness in AI/AN Adults

PAST YEAR 2016-2019, AI/AN 18+

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Co-Occurring Issues: Substance Use and Mental Illness among AI/AN Adults

PAST YEAR/MONTH, 2019 NSDUH, AI/AN 18+

<table>
<thead>
<tr>
<th></th>
<th>No Mental Illness</th>
<th>Any Mental Illness</th>
<th>Serious Mental Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illicit Drugs, Past Year</td>
<td>256K (22.6%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana, Past Year</td>
<td></td>
<td>204K (18.0%)</td>
<td></td>
</tr>
<tr>
<td>Opioid, Past Year</td>
<td>51K (4.5%)</td>
<td>24K (9.2%)</td>
<td></td>
</tr>
<tr>
<td>Binge Alcohol, Past Month</td>
<td>241K (21.3%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cigarettes, Past Month</td>
<td>286K (25.3%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

No differences between mental illness estimates and the no mental illness estimates are statistically significant at the .05 level.
Substance Use Disorder (SUD) is Associated with Suicidal Thoughts, Plans, and Attempts among AI/AN Adults ≥18 y.o.
Locations Where Substance Use Treatment was Received among AI/ANs

- Outpatient Rehabilitation: 21K
- Self-Help Group: 19K
- Inpatient Rehabilitation: 14K
- Outpatient Mental Health Center: 12K
- Prison or Jail: 7K
- Private Doctor's Office: 4K
- Hospital Inpatient: 1K
- Emergency Room: <500

Total: 158,000 with SUD

Locations where people received substance use treatment are not mutually exclusive because respondents could report that they received treatment in more than one location in the past year.
Summary: Mental Health/Co-Occurring Issues in the United States in 2019

• Major Depressive Episodes among AI/AN ages 18-25 significantly increased compared to 2016.

• Substance use disorder significantly increased suicidality among AI/AN adults ages 18 and older.

• Progress is being made, as co-occurring substance use disorder and any mental illness in AI/AN adults ages 18-25 and 26-49 is declining. There is a slight increase for ages 50 and older.

• Outpatient rehabilitation centers are the main location where substance use treatment was received.
What Can We Do Now?

- SAMHSA must use its resources to benefit as many as possible:
  - Community based treatment and recovery services
  - Build on the Certified Community Behavioral Health Clinic model
    - Crisis intervention services/suicide prevention resources
    - Integrated mental health, substance use, general medical services
    - Children’s mental health services-linkages with schools
  - Keep telemedicine/telehealth in place including use of telephone where audio/visual is not possible and pay for these services at same rate as face-to-face—no reduction in reimbursement because it is telemedicine
  - Continue and expand as possible technical assistance and training to behavioral health providers—clinicians and peers
It’s Up to Us Now

• Let’s work as hard as we can to make decision-makers understand mental health and substance use needs in America—pre and post-COVID-19

• Let’s keep the virus in mind in planning and implementing our services so that we can safely deliver care, but we cannot ignore the overall health needs of the American people—that is not an option

• Let’s work to meet the mental health/substance use needs of our people:
  • Restore our systems—mental health and substance use disorder services are ‘essential services’
  • Expand our treatment and community recovery support systems permanently
  • Every American life is precious and every American death—regardless of the cause is a terrible loss