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 Asian/NHOPI Adults (≥18 y.o.)

Among Asian/NHOPIs with a substance use disorder: 1 IN 7 (14.2% or 106K) struggled with illicit drugs and alcohol

4.8% (745,000) People aged 18 or older had a substance use disorder (SUD)

2.1% (325,000) People 18 or older had BOTH an SUD and a mental illness

14.5% (2.3 MILLION) People aged 18 or older had a mental illness

Among Asian/NHOPIs with a mental illness: 1 IN 5 (21.3% or 482K) had a serious mental illness

In 2019, 2.7M Asian/NHOPI adults had a mental illness and/or substance use disorder.
Alcohol Use Disorder among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Summary: Alcohol Use in 2019

• Past month alcohol use remained stable in all age groups for the Asian/NHOPI populations during 2018-2019.

• Alcohol use disorder significantly declined for Asian/NHOPI populations ages 12-17 from 2017 to 2019.

• 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 Asian/NHOPIs: Major Concerns: Opioids, Marijuana, Methamphetamines

- Marijuana: 8.1% (1.4M)
- Psychotherapeutic Drugs: 3.1% (526K)
- Hallucinogens: 1.7% (283K)
- Cocaine: 1.2% (205K)
- Inhalants: 1.0% (171K)
- Methamphetamines: 0.2% (35K)
- Heroin: <0.05% (7K)
Progress on the Opioid Epidemic: Prescription Pain Reliever Misuse among Asian/NHOPIs

292,000 ASIAN/NHOPI WITH OPIOID MISUSE (1.7% OF TOTAL POPULATION)

285,000 Rx Pain Reliever Misusers

78,000 Rx Hydrocodone

31,000 Rx Oxycodone

15,000 Rx Fentanyl

7,000 Heroin Users

* 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 Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Prescription Pain Reliever Misuse and Heroin Use among Asian/NHOPIs

**Past Year, 2016-2019 NSDUH, Asian/NHOPI 12+**

### Pain Reliever Misuse
- 2016: 319K
- 2017: 298K
- 2018: 303K
- 2019: 285K

### Pain Reliever Use Disorder
- 2016: 22K
- 2017: 42K
- 2018: 24K
- 2019: 52K

### Pain Reliever Misuse Initiates
- 2016: 82K
- 2017: 74K
- 2018: 99K
- 2019: 78K

### Heroin Use
- 2016: 2K
- 2017: 26K
- 2018: 7K
- 2019: 7K

### Heroin Use Disorder
- 2016: *
- 2017: *
- 2018: *
- 2019: *

### Heroin Initiates
- 2016: *
- 2017: *
- 2018: *
- 2019: *

* Estimate not shown due to low precision.

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

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI+12

- Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Misuse of Prescription Opioid Subtypes among Asian/NHOPIs

PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+ SUBTYPE USERS

Hydrocodone: 78K, 7.8%
Oxycodone: 31K, 5.1%

* Estimate not shown due to low precision.
Heroin Use among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 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 Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 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 Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Treatment Gains: Number of Individuals Receiving Pharmacotherapy for Opioid Use Disorder (MAT)

- **Methadone**
  - 2016: 345,443
  - 2017: 382,867
  - 2018: 450,247
  - 2019: 637,157

- **Buprenorphine**
  - 2016: 520,398
  - 2017: 599,551
  - 2018: 668,029
  - 2019: 746,866

- **Naltrexone**
  - 2016: 46,860
  - 2017: 64,020
  - 2018: 73,260
  - 2019: 77,872

**Total Number receiving MAT (all types)**
- 2016: 912,701
- 2017: 1,046,438
- 2018: 1,191,536
- 2019: 1,461,895
Summary: Opioid Misuse in the United States in 2019

• Opioid misuse and prescription pain reliever misuse among Asian/NHOPI populations ages 12-17 significantly declined since 2018.

• Opioid use disorder for ages 12-17 has significantly declined compared to 2017.

• Access to medication-assisted treatment is increasing.
Other Illicit Substances
Past Month Marijuana Use for All Age Groups among Asian/NHOPIs

PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 12+

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

PAST MONTH/YEAR, 2016-2019 NSDUH, Asian/NHOPI 18-25

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

PAST MONTH/YEAR, 2016-2019 NSDUH, Asian/NHOPI 26+

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

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.
Marijuana Use among Asian/NHOPI Women by Pregnancy Status

PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 15-44

- Pregnant:
  - 2016: 4.2%+
  - 2017: 5.6%
  - 2018: 6.9%
  - 2019: 7.1%

- Not Pregnant:
  - 2016: 340K
  - 2017: 266K
  - 2018: 326K

* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level
Daily or Almost Daily Marijuana Use among Asian/NHOPI Women by Pregnancy Status

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 15-44

Pregnant

Not Pregnant

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant</td>
<td>0.8%</td>
<td>0.7%</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Not Pregnant</td>
<td>1.1%</td>
<td>32K</td>
<td>54K</td>
<td>76K</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.
Marijuana Use: Health Concerns

• Past month marijuana use has remained stable for all age groups among Asian/NHOPIs.

• Marijuana use disorder has significantly increased since 2017 for the Asian/NHOPI population ages 26 and older.

• Past month marijuana use for non-pregnant Asian/NHOPI women ages 15-44 has significantly increased since 2016.
Cocaine Use among Asian/NHOPIs

PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 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 Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

- 12-17: 0.1% (2K) in 2016, 0.1% (2K) in 2017
- 18-25: 0.4% (9K) in 2019
- 26 or Older: 0.3% (35K) in 2019

* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Misuse of Prescription Stimulants among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

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

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

Estimates represent past year use of LSD (lysergic acid diethylamide), a type of hallucinogen.
Summary: Other Substance Use in the United States in 2019

- Cocaine use among the Asian/NHOPIs population has significantly increased in ages 18-25 since 2017.

- Methamphetamine use and prescription stimulant misuse among Asian/NHOPI populations has remained stable.

- LSD use among Asian/NHOPI adults ages 18-25 has slightly declined since 2018.
Polysubstance Use and Mental Illness
Alcohol Use Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

**Past Year Marijuana Use**
- No Past Month Alcohol Use: 2.4% (250K)
- Past Month Alcohol Use but No Heavy Use: 1.2% (131K)
- Past Month Heavy Alcohol Use: 15.8% (951K)

**Past Year Opioid Misuse**
- No Past Month Alcohol Use: 2.6% (155K)
- Past Month Alcohol Use but No Heavy Use: 0.3% (30K)
- Past Month Heavy Alcohol Use: 2.4% (146K)

**Past Year Cocaine Use**
- No Past Month Alcohol Use: 5.1% (519K)
- Past Month Alcohol Use but No Heavy Use: 5.7% (339K)
- Past Month Heavy Alcohol Use: 4.1% (246K)

**Past Year Methamphetamine Use**
- No Past Month Alcohol Use: 0.2% (24K)
- Past Month Alcohol Use but No Heavy Use: 0.1% (8K)
- Past Month Heavy Alcohol Use: * Estimate not shown due to low precision.

**Past Year MDE, 12+**
- No Past Month Alcohol Use: * Estimate not shown due to low precision.
- Past Month Alcohol Use but No Heavy Use: * Estimate not shown due to low precision.
- Past Month Heavy Alcohol Use: * Estimate not shown due to low precision.

**Past Year SMI, 18+**
- No Past Month Alcohol Use: * Estimate not shown due to low precision.
- Past Month Alcohol Use but No Heavy Use: * Estimate not shown due to low precision.
- Past Month Heavy Alcohol Use: * Estimate not shown due to low precision.

* 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.
Marijuana Use Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

**Past Year Opioid Misuse**
- 199K cases (1.3%)
- 94K cases (6.8%)
- 250K cases (1.6%)
- 29K cases (0.2%)

**Past Month Heavy Alcohol Use**
- 168K cases (12.3%)
- 175K cases (12.8%)

**Past Year Cocaine Use**
- 197K cases (14.5%)

**Past Year Methamphetamine Use**
- 13K cases (0.1%)
- 21K cases (1.6%)
- 711K cases (4.7%)
- 353K cases (2.5%)

**Past Year MDE, 12+**
- 10.0% cases

**Past Year SMI, 18+**
- Difference between this estimate and the estimate for people with past year marijuana use is statistically significant at the .05 level

* Estimate not shown due to low precision.
Comparison of Rates of Mental/Substance Use Disorders Associated with Marijuana Use among Asian/NHOPIs: National vs. Colorado Data from the National Survey on Drug Use and Health (2019)

<table>
<thead>
<tr>
<th>Measure/Age Group</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>12.4</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Past Year Daily Marijuana Use (18-25y)</td>
<td>2.1</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Past Month Marijuana Use (≥ 26y)</td>
<td>3.8</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Substance Use Disorder (SUD) (18+)</td>
<td>4.8</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Co-occurring SUD and SMI (18+)</td>
<td>0.9</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 Asian/NHOPIs

- Past Year Marijuana Use: 1.3M (7.6%)
- Past Month Heavy Alcohol Use: 412K (2.5%)
- Past Year Cocaine Use: 157K (0.9%)
- Past Year Methamphetamine Use: 22K (0.1%)
- Past Year MDE, 12+: 839K (5.2%)
- Past Year SMI, 18+: 407K (2.7%)

* Estimate not shown due to low precision.

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

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12+

- Past Year Marijuana Use: 1.3M (8.0%)
- Past Year Opioid Misuse: 280K (1.7%)
- Past Month Heavy Alcohol Use: 417K (2.5%)
- Past Year Cocaine Use: 194K (1.1%)
- Past Year MDE, 12+: * Estimate not shown due to low precision.
- Past Year SMI, 18+: * Estimate not shown due to low precision.

No differences between estimates for people with no past year use and the estimates for people with past year use are statistically significant at the .05 level.
• 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 Asian/NHOPI

- 2.9% (47K) in 2008
- 2.2% (229K) in 2010
- 1.6% (95K) in 2012
- 1.5% (55K) in 2014
- 3.1% (482K) in 18+ years
- 3.5% (270K) in 26-49 years
- 6.2% (139K) in 18-25 years
- 1.3% (74K) in 50+ years

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 Asian/NHOPIs

Note: The adult and youth MDE estimates are not directly comparable.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.
Major Depressive Episodes with Severe Impairment among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

- **Asian/NHOPI Youths, 12-17 y.o.**
  - Female: 67K, 14.3% (2016), 16.8% (2019)
  - Male: 43K, 9.7% (2016), 12.0% (2019)

- **Asian/NHOPI Young Adults, 18-25 y.o.**
  - Female: 115K, 11.1% (2016), 12.5% (2019)
  - Male: 67K, 9.6% (2016), 10.0% (2019)

- **Asian/NHOPI Adults, ≥26 y.o.**
  - Female: 184K, 2.7% (2016), 2.6% (2017), 2.4% (2018), 2.3% (2019)
  - Male: 149K, 1.0% (2016), 1.2% (2017), 1.5% (2018), 2.4% (2019)

*Difference between this estimate and the 2019 estimate is statistically significant at the .05 level*
Suicidal Thoughts, Plans, and Attempts Increase for Asian/NHOPI Young Adults (18-25 y.o.) and Asian/NHOPI Adults (26-49 y.o.)

**Asian/NHOPI Young Adults (18-25 y.o.)**

- Serious Thoughts: 201K (201,000) in 2019 (9.1%) compared to 98K (98,000) in 2009 (6.1%). Increase from 2009 to 2019 is statistically significant.
- Made a Plan: 34K (34,000) in 2019 (3.5%) compared to 12K (12,000) in 2009 (2.1%). Increase from 2009 to 2019 is statistically significant.
- Attempted: 43K (43,000) in 2019 (1.9%) compared to 12K (12,000) in 2009 (0.7%). Increase from 2009 to 2019 is statistically significant.

**Asian/NHOPI Adults (26-49 y.o.)**

- Serious Thoughts: 258K (258,000) in 2019 (3.3%) compared to 121K (121,000) in 2009 (2.1%). Increase from 2009 to 2019 is statistically significant.
- Made a Plan: 64K (64,000) in 2019 (0.8%) compared to 3K (3,000) in 2009 (<0.05%). Increase from 2009 to 2019 is statistically significant.
- Attempted: 23K (23,000) in 2019 (0.4%) compared to 15K (15,000) in 2009 (0.2%). Increase from 2009 to 2019 is statistically significant.

*Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.*
Co-Occurring Mental and Substance Use Disorders
Substance Use among Asian/NHOPI Youths (12-17 y.o.) by Past Year Major Depressive Episode (MDE) status

<table>
<thead>
<tr>
<th>Substance</th>
<th>MDE status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illicit Drugs, Past Year</td>
<td>5.1%</td>
</tr>
<tr>
<td>Marijuana, Past Year</td>
<td>4.2%</td>
</tr>
<tr>
<td>Opioid, Past Year</td>
<td>0.3%</td>
</tr>
<tr>
<td>Binge Alcohol, Past Month</td>
<td>1.1%</td>
</tr>
<tr>
<td>Cigarettes, Past Month</td>
<td>&lt;0.05%</td>
</tr>
</tbody>
</table>

* 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 Asian/NHOPI Adults

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 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 Asian/NHOPI Adults

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 18+

<table>
<thead>
<tr>
<th>Substance</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>1.0M, 7.7%</td>
<td>628K, 27.8%+</td>
<td>784K, 5.9%</td>
</tr>
<tr>
<td>Marijuana, Past Year</td>
<td>7.7%</td>
<td>2.2%</td>
<td>515K, 22.7%+</td>
</tr>
<tr>
<td>Opioid, Past Year</td>
<td>1.1%</td>
<td>153K, 6.0%+</td>
<td>136K, 1.1%</td>
</tr>
<tr>
<td>Binge Alcohol, Past Month</td>
<td>1.8M, 13.4%</td>
<td>584K, 25.8%+</td>
<td>1.0M, 7.5%</td>
</tr>
<tr>
<td>Cigarettes, Past Month</td>
<td></td>
<td>329K, 14.6%+</td>
<td></td>
</tr>
</tbody>
</table>

* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for adults without mental illness is statistically significant at the .05 level.
Substance Use Disorder (SUD) is Associated with Suicidal Thoughts, Plans, and Attempts among Asian/NHOPI Adults ≥18 y.o.

PAST YEAR, 2019 NSDUH, Asian/NHOPI 18+
Mental and Substance Use Disorders among Asian/NHOPIs: High Prevalence/Huge Treatment Gaps

But treatment gaps aren’t the only problem!

* No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor’s office, self-help group, or prison/jail.
• Since 2009, the number of Asian/NHOPI adults ages 26-49 who made a suicide plan has significantly increased.

• Substance use disorder significantly increased suicidality among Asian/NHOPI adults ages 18 and older.

• There were significant increases in past year substance use for Asian/NHOPI adults ages 18 and older with any mental illness.

• Self-help groups ranked higher than outpatient rehabilitation facilities for the locations 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