The National Survey on Drug Use and Health: 2020

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About This Presentation

- The estimates in these slides have been rounded for the purposes of presentation. Any appearance of estimates not summing exactly to a known total are due to this rounding.
- Some slides present the same analysis across multiple years. The underlying populations from which these estimates are derived change across years since the number of people in the United States changes across years. Thus, a change in proportions does not equal a constant change in the weighted count.



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 covers the civilian, noninstitutionalized population, aged 12 or older:
 - Includes: Households, college dorms, homeless in shelters, civilians on military bases
- Sample includes all 50 states and DC



Who is Not Covered by NSDUH?

- Children under age 12
- Populations with potential serious mental health/substance use issues:
 - Institutionalized populations:
 - » Incarcerated
 - » Hospitalized
 - » Nursing homes
 - Homeless populations not in homeless shelters



How Do We Use NSDUH?

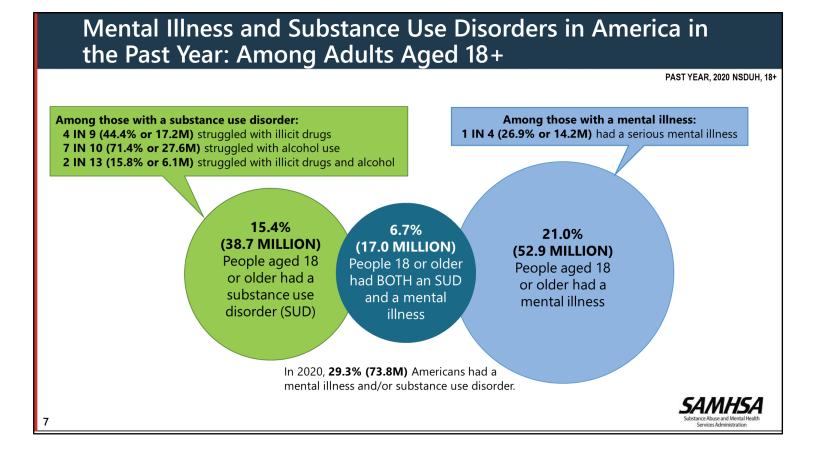
- Provides a window into the state of substance use and mental health issues in the United States
- Provides insights that can be studied in the context of data from other agencies to help in decision-making about what types of resources are needed and where resources should be directed
- Helps to guide policy in addressing:
 - Problematic substance use
 - Prevalence of mental illness
 - The intersection of substance use and mental health issues
 - State-level treatment and prevention needs by providing data at the state level

SAMHSA
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Services Administration

Changes to NSDUH in 2020

- Data typically collected from January to December; collected in Q1 and Q4 only during 2020
- Changed to multi-mode collection in Q4 of 2020: web survey added
- Change from DSM-IV to **DSM-5** impacted SUD estimates
- **New and expanded item content**: nicotine vaping, receipt of telehealth services, adolescent suicide, COVID-19 impacts
- Approximately 67,500 persons are interviewed annually; the final 2020 sample consisted of 36,284 completed interviews

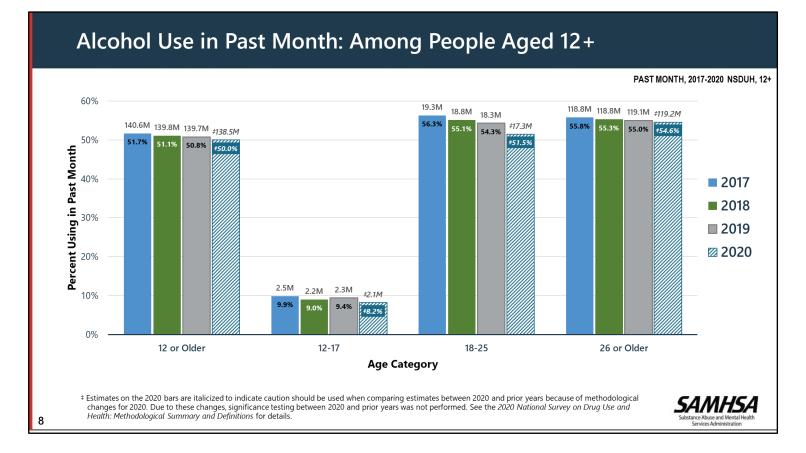




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- Millions of adults struggle with substance use disorder and mental illness.
- Almost three quarters of adults with SUD struggled with alcohol use.
- One in four adults with mental illness experienced serious mental illness.
- 17 million adults had both an SUD and mental illness.



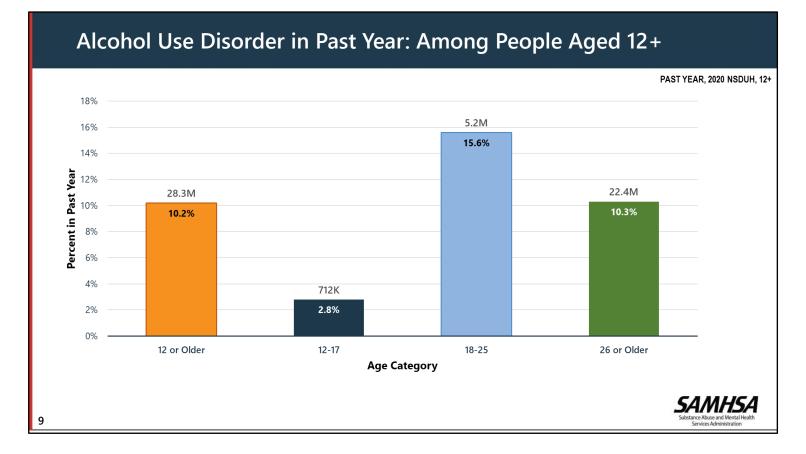
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TALKING POINTS:

- In 2020, half of people aged 12 or older used alcohol during the past month.
- Adults aged 18 to 25 and 26 or older had higher rates of alcohol use than youths aged 12 to 17.

 2020 estimates were not directly compared to estimates from prior years due to methodological changes in 2020.



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TALKING POINTS:

 In NSDUH, alcohol use disorder is measured using questions based on the diagnostic criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders*, also known as DSM. Starting in 2020, NSDUH used the criteria specified in DSM-5, which was published in 2013. In 2020, the percentage of people who had past year alcohol use disorder was highest among young adults aged 18 to 25.

Summary: Alcohol Use in 2020

Among people aged 12 to 17 in 2020:

- 8.2 percent (or 2.1 million people) used alcohol in the past month
- 2.8 percent (or 712,000 people) had an alcohol use disorder

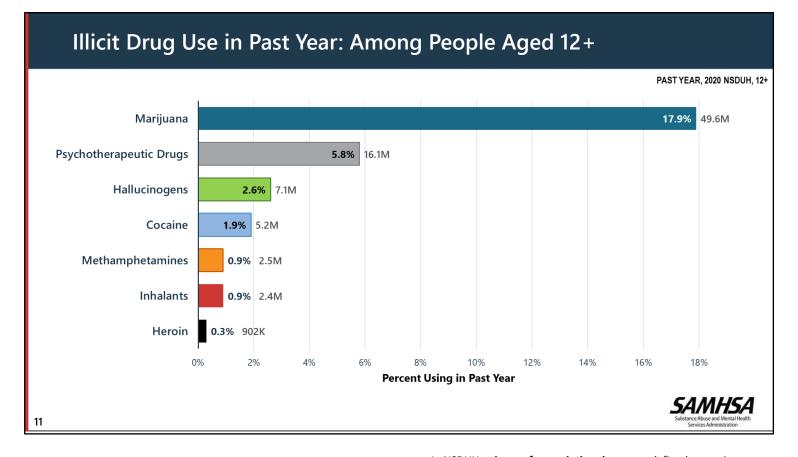
Among people aged 18 to 25 in 2020:

- 51.5 percent (or 17.3 million people) used alcohol in the past month
- 15.6 percent (or 5.2 million people) had an alcohol use disorder

Among people aged 26 or older in 2020:

- 54.6 percent (or 119.2 million people) used alcohol in the past month
- 10.3 percent (or 22.4 million people) had an alcohol use disorder

SAMHSA Substance Abuse and Mental Health Services Administration



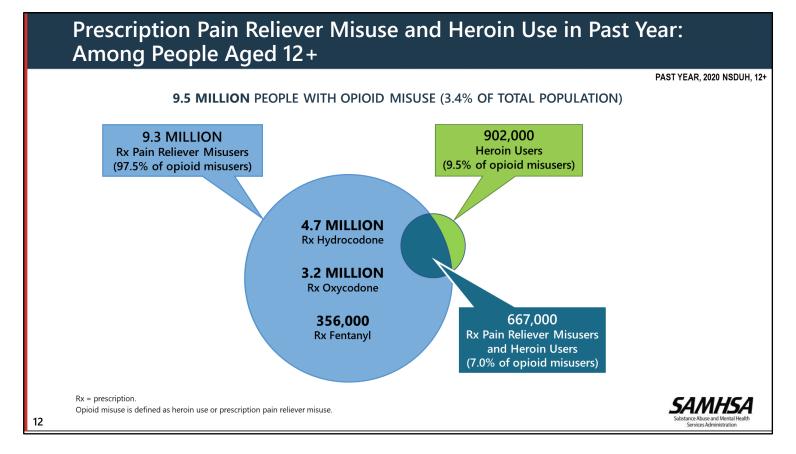
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TALKING POINTS:

 The 2020 NSDUH defines illicit drug use as the use of marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, and methamphetamine, as well as the misuse of prescription stimulants, tranquilizers, sedatives, and pain relievers.

- In NSDUH, misuse of prescription drugs was 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.
- The most commonly used illicit drug in the past year was marijuana followed by the misuse of psychotherapeutic drugs (prescription stimulants, tranquilizers, sedatives, and pain relievers).

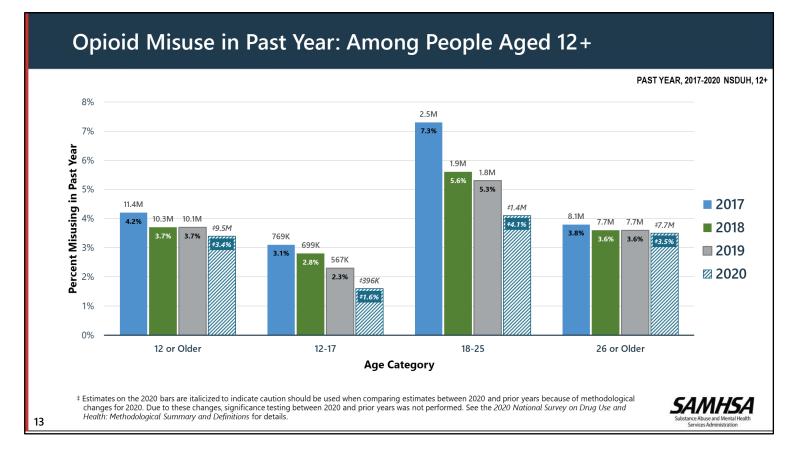


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- Opioids are a group of chemically similar drugs that include heroin and prescription opioids, such as hydrocodone (e.g., Vicodin®), oxycodone (e.g., OxyContin®), and morphine.
- Prescription pain reliever misuse and heroin use fall under the umbrella of opioid misuse.

- Of those who misused opioids, the vast majority were misusers of prescription pain relievers.
- Of those who used heroin, only about 1 in 3 used heroin alone.

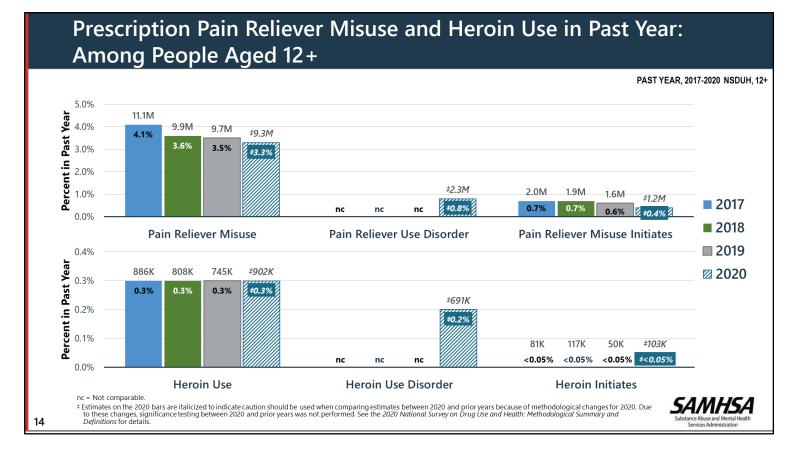


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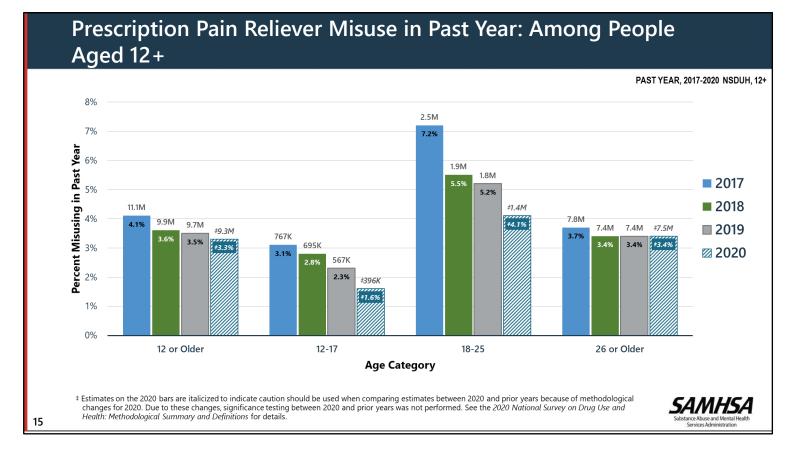
 In 2020, young adults aged 18 to 25 and adults aged 26 or older had higher percentages of opioid misuse in the past year than youths aged 12 to 17.



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- Misuse of prescription pain relievers is much more common than heroin use.
- Likewise, pain reliever use disorder is more common than heroin use disorder.

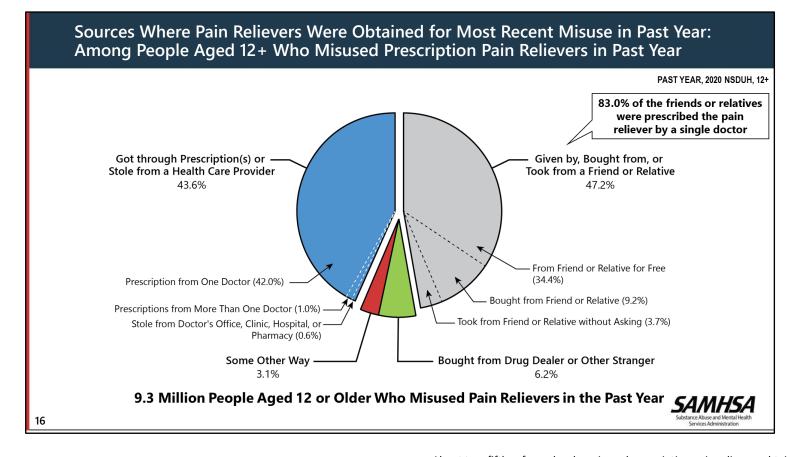


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TALKING POINTS:

 In 2020, young adults aged 18 to 25 and adults aged 26 or older had higher percentages of prescription pain reliever misuse in the past year than youths aged 12 to 17.

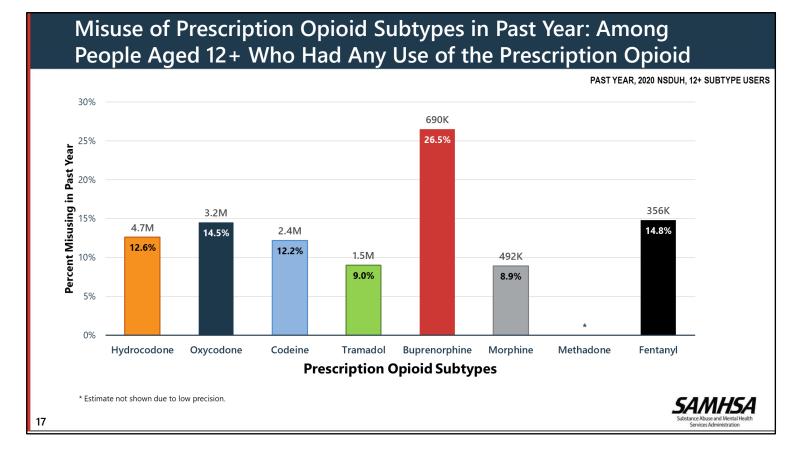


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TALKING POINTS:

 The most common source for the last pain reliever misused was from a friend or relative in some way (i.e., being given them, buying them, or taking them without asking). About two-fifths of people who misused prescription pain relievers obtained the pain relievers through prescription(s) or stole pain relievers from a health care provider.

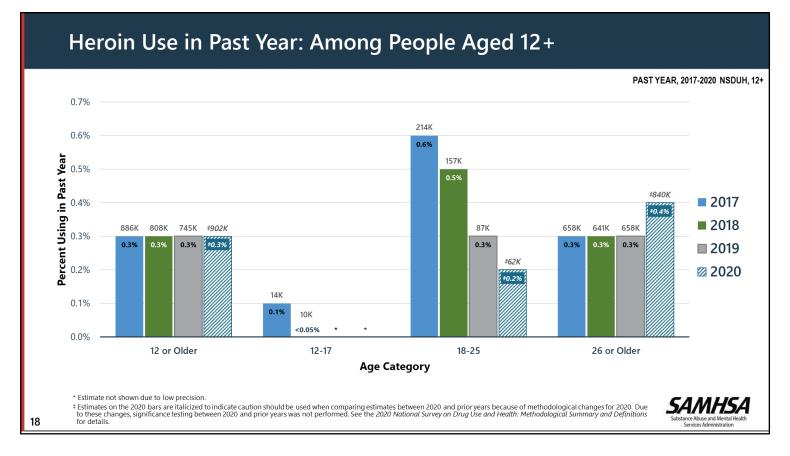


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TALKING POINTS:

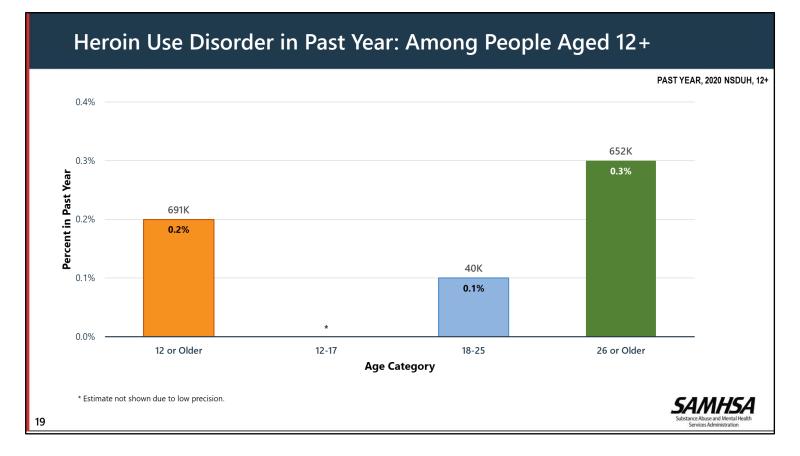
 People who used Buprenorphine during the past year had the highest rate of past year misuse of the drug.



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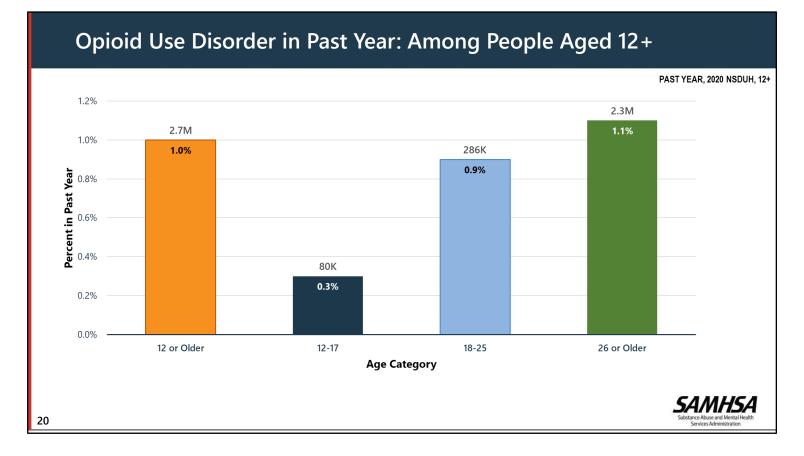
- In 2020, adults aged 26 or older had the highest percentage of heroin use in the past year when compared with other age groups.
- Estimates for youths aged 12 to 17 could not be calculated with sufficient precision.



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- In 2020, adults aged 26 or older had the highest percentage of heroin use disorder in the past year.
- Estimates for youths aged 12 to 17 could not be calculated with sufficient precision.



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TALKING POINTS:

 Respondents were classified as having an opioid use disorder if they met DSM-5 criteria for heroin use disorder or prescription pain reliever use disorder, or both. In 2020, young adults aged 18 to 25 and adults aged 26 or older had higher percentages of opioid use disorder in the past year than youths aged 12 to 17.

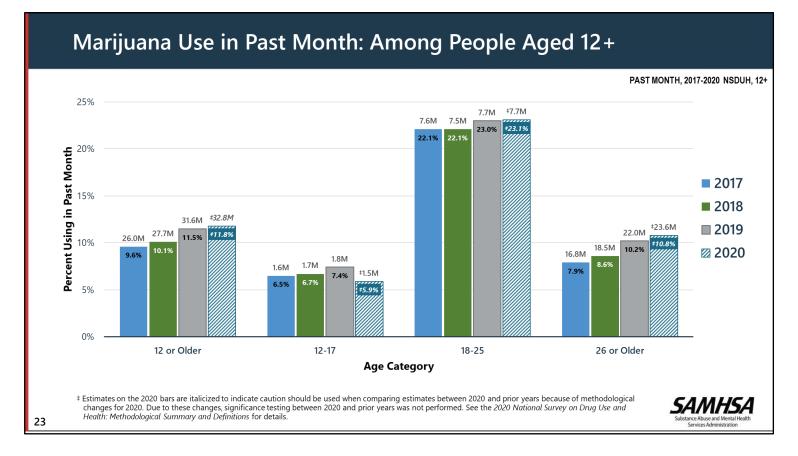
Summary: Opioid Misuse in 2020

- Opioid misuse is primarily driven by prescription pain reliever misuse
- Buprenorphine continues to be the opioid with the highest percentage of users acknowledging misuse of the medication
- Most prescription pain relievers that are misused are obtained from a prescription to the misuser or given to the misuser for free by a friend or relative
- Among people aged 26 or older in 2020:
 - 3.4 percent (or 9.5 million people) misused opioids in the past year
 - 1.0 percent (or 2.7 million people) had an opioid use disorder



Other Illicit Substances

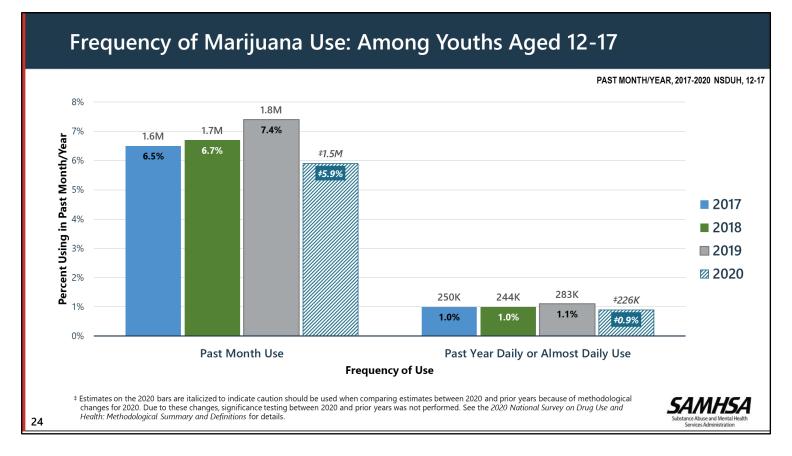




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- In 2020, marijuana was the most commonly used illicit drug.
- The percentage of past month marijuana use was highest among young adults aged 18 to 25, followed by adults aged 26 or older, then by youths aged 12 to 17.

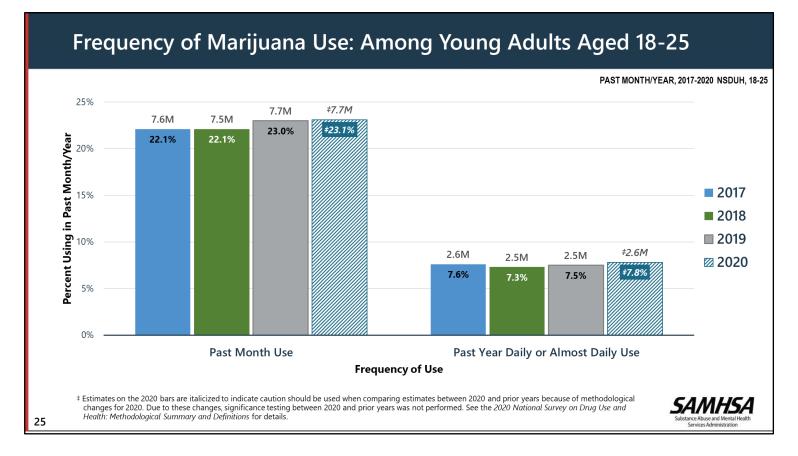


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TALKING POINTS:

 In 2020, less than 1 percent of youths aged 12 to 17 used marijuana daily or almost daily in the past year.

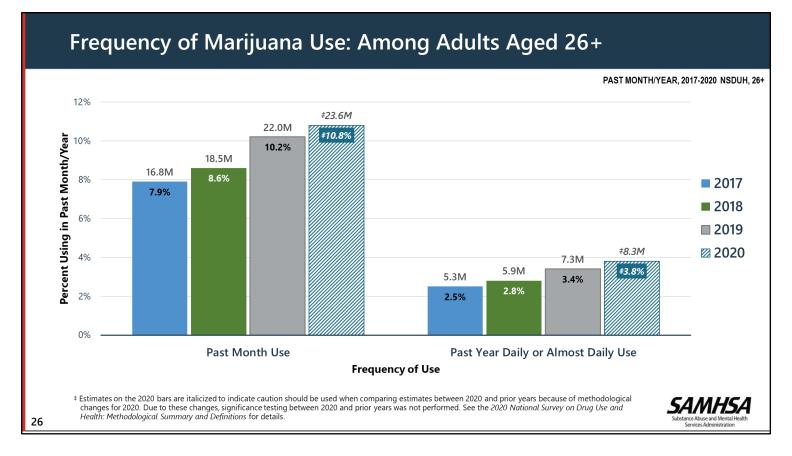


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TALKING POINTS:

 In 2020, young adults aged 18 to 25 had the highest percentage of past year daily or almost daily marijuana use when compared with other age groups.

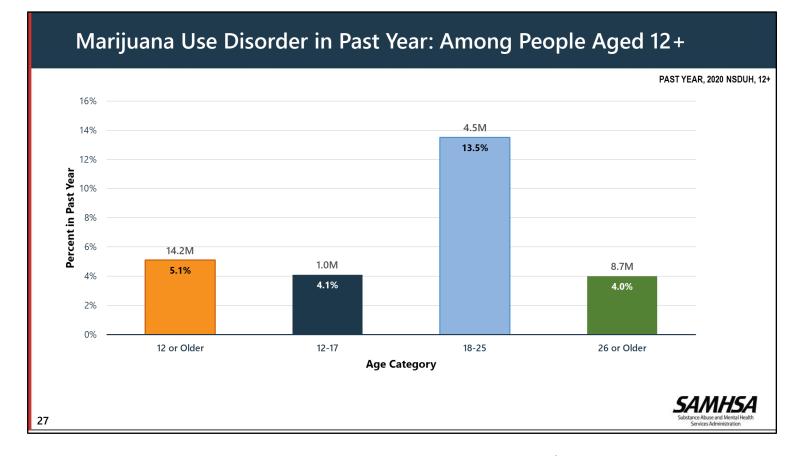


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TALKING POINTS:

 In 2020, adults aged 26 or older had a lower percentage of past month marijuana use and past year daily or almost daily marijuana use than young adults aged 18 to 25.

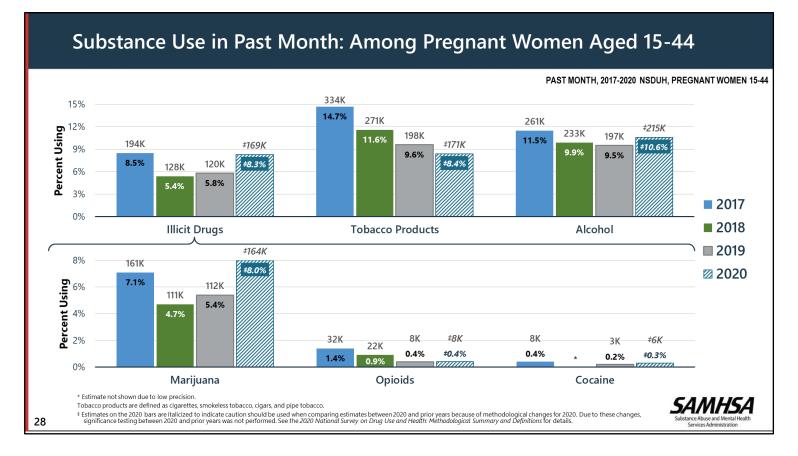


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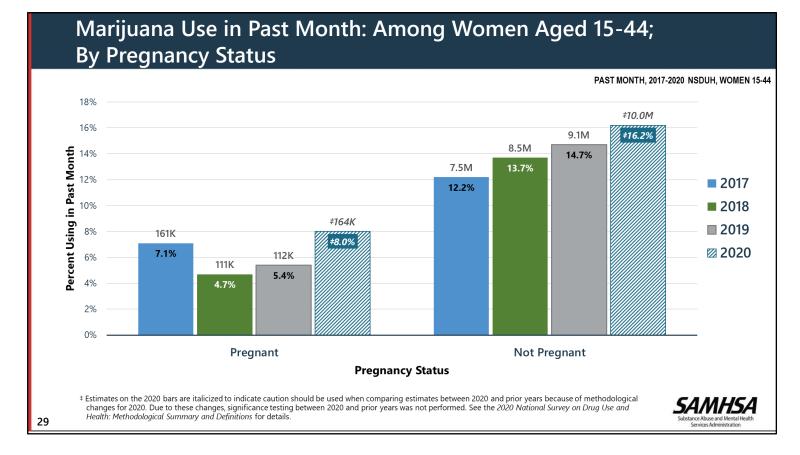
 Young adults aged 18 to 25 had the highest percentage of marijuana use disorder in the past year when compared to youths aged 12 to 17 and adults aged 26 or older. The higher percentage of young adults with a marijuana use disorder was consistent with the higher percentage among this age group for marijuana use in the past month.



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- In 2020, between 8 percent and 11 percent of pregnant women aged 15 to 44 used illicit drugs, tobacco products, or alcohol in the past month.
- The most commonly used illicit drug among pregnant women in this age group was marijuana.

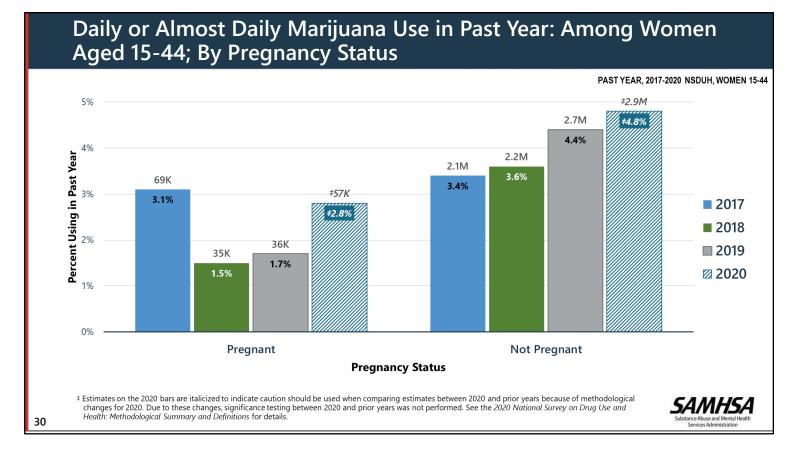


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TALKING POINTS:

• In 2020, pregnant women aged 15 to 44 were less likely to use marijuana in the past month than their non-pregnant counterparts.



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TALKING POINTS:

 In 2020, 2.8 percent of pregnant women used marijuana daily or almost daily during the past year, as did 4.8 percent of their non-pregnant counterparts. These percentages are not significantly different from one another.

Summary: Marijuana Use in 2020

Among people aged 12 to 17 in 2020:

- 5.9 percent (or 1.5 million people) used marijuana in the past month
- 4.1 percent (or 1.0 million people) had a marijuana use disorder

Among people aged 18 to 25 in 2020:

- 23.1 percent (or 7.7 million people) used marijuana in the past month
- 13.5 percent (or 4.5 million people) had a marijuana use disorder

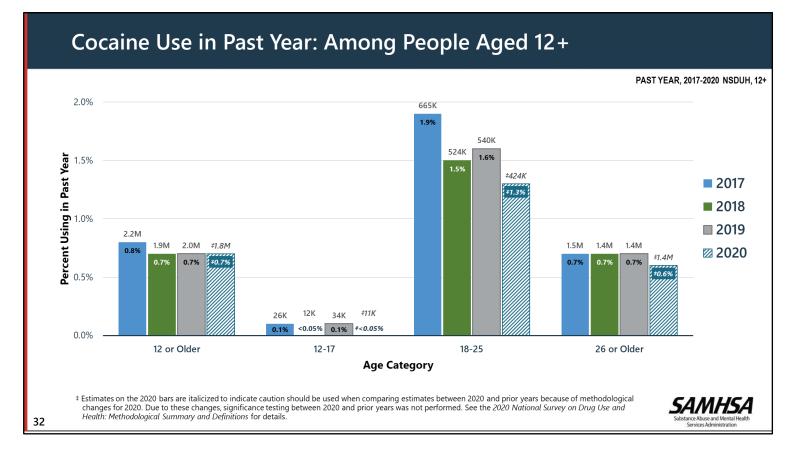
Among people aged 26 or older in 2020:

- 10.8 percent (or 23.6 million people) used marijuana in the past month
- 4.0 percent (or 8.7 million people) had a marijuana use disorder

Among pregnant women aged 15 to 44 in 2020:

- 8.0 percent (or 164,000 women) used marijuana in the past month

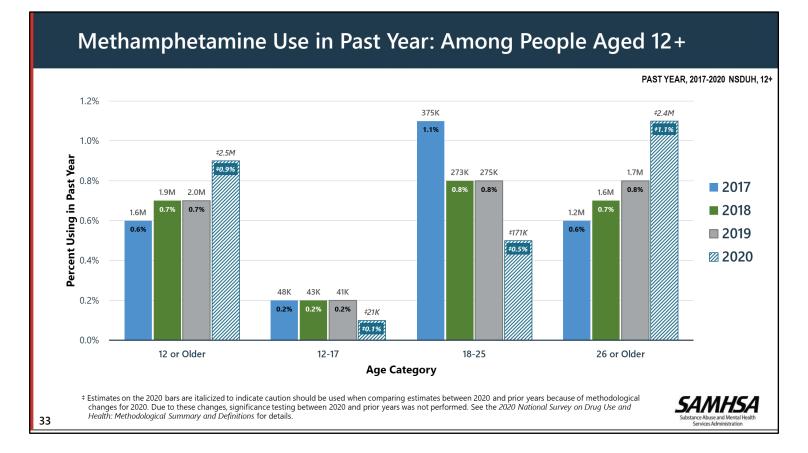
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- Cocaine use includes the use of crack cocaine.
- In 2020, young adults aged 18 to 25 had the highest percentage of cocaine
 use in the past year, followed by adults aged 26 or older, then by youths
 aged 12 to 17.

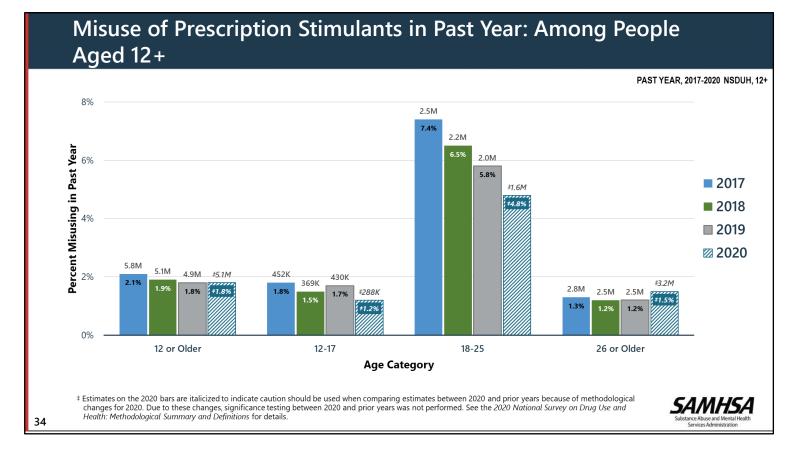


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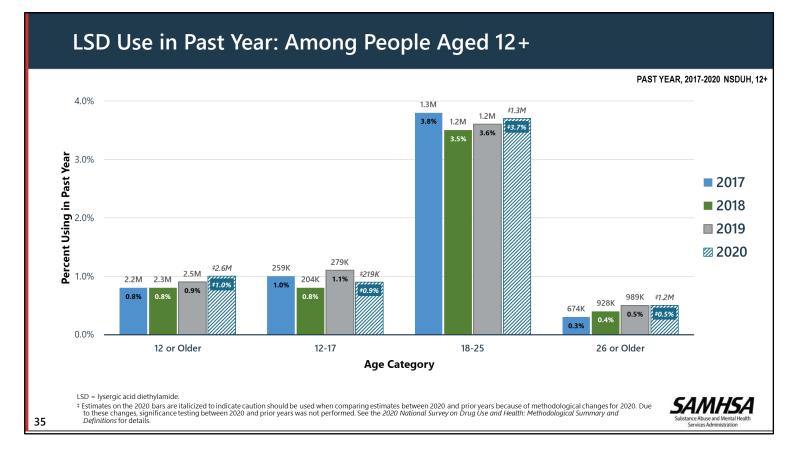
 Although methamphetamine is legally available by prescription (Desoxyn®), most methamphetamine used in the United States is produced and distributed illicitly rather than through the pharmaceutical industry. The misuse of prescription stimulants is covered on the next slide. In 2020, youths aged 12 to 17 had the lowest percentage of past year methamphetamine use, followed by young adults aged 18 to 25, then by adults aged 26 or older.



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- Methamphetamine has not been included as a prescription stimulant, unless respondents specified the prescription form of methamphetamine (Desoxyn®) as some other stimulant they had misused in the past year.
- In 2020, young adults aged 18 to 25 had the highest percentage of prescription stimulant misuse in the past year.



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- Several drugs are grouped under the category of hallucinogens, including LSD.
- In 2020, young adults aged 18 to 25 had the highest percentage of LSD use in the past year, followed by youths aged 12 to 17, then by adults aged 26 or older.

Summary: Other Substance Use in 2020

Among people aged 12 to 17 in 2020:

- Less than 0.05 percent (or 11,000 people) used cocaine in the past year
- 0.1 percent (or 21,000 people) used methamphetamine in the past year
- 1.2 percent (or 288,000 people) misused prescription stimulants in the past year
- 0.9 percent (or 219,000 people) used LSD in the past year

• Among people aged 18 to 25 in 2020:

- 1.3 percent (or 424,000 people) used cocaine in the past year
- 0.5 percent (or 171,000 people) used methamphetamine in the past year
- 4.8 percent (or 1.6 million people) misused prescription stimulants in the past year
- 3.7 percent (or 1.3 million people) used LSD in the past year

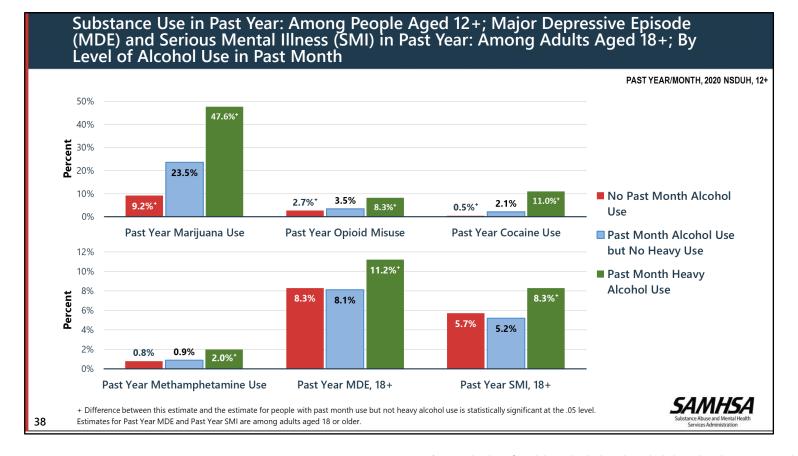
Among people aged 26 or older in 2020:

- 0.6 percent (or 1.4 million people) used cocaine in the past year
- 1.1 percent (or 2.4 million people) used methamphetamine in the past year
- 1.5 percent (or 3.2 million people) misused prescription stimulants in the past year
- 0.5 percent (or 1.2 million people) used LSD in the past year



Polysubstance Use and Mental Illness





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TALKING POINTS:

- Nearly 50 percent of the individuals reporting heavy alcohol use in the past month
 also endorsed marijuana use in the past year. People aged 12 or older engaging in
 heavy alcohol use also reported significantly higher rates of opioid, cocaine, and
 methamphetamine use than people endorsing alcohol use, but had no heavy alcohol
 use.
- These findings are consistent with literature suggesting that having an SUD for one substance significantly increases risk for developing SUDs for additional substances

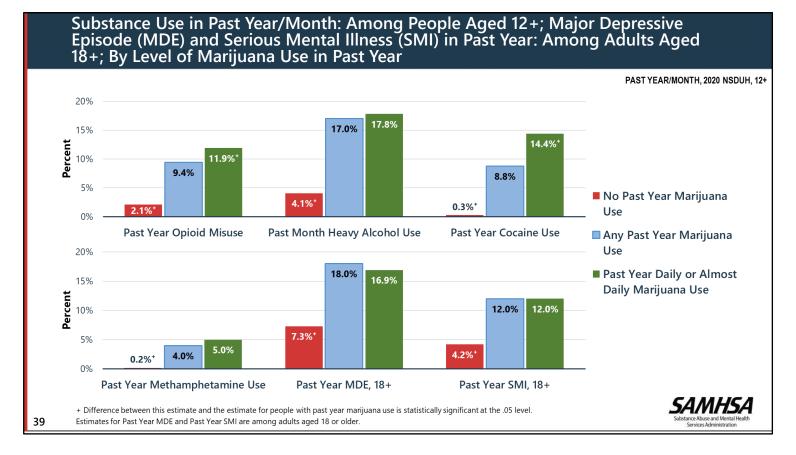
(e.g., studies have found that individuals with an alcohol use disorder are at twice the risk for developing an opioid use disorder) (Crummy et al., 2020).

- NSDUH found that adults aged 18 or older engaging in heavy alcohol use had a higher percentage of an MDE and SMI in the past year than adults who used alcohol, but had no heavy alcohol use in the past month.
- Findings are consistent with literature suggesting depression and alcohol use disorder
 often co-occur. Studies have found that individuals with depression have a three-fold
 risk for developing alcohol use disorder in their lifetime (Schouten et al., 2022).

References

Crummy, E. A., O'Neal, T. J., Baskin, B. M., & Ferguson, S. M. (2020). One is not enough: understanding and modeling polysubstance use. *Frontiers in Neuroscience*, 14, 569.

Schouten, M. J., Christ, C., Dekker, J. J., Riper, H., Goudriaan, A. E., & Blankers, M. (2022). Digital interventions for people with co-occurring depression and problematic alcohol use: A systematic review and meta-analysis. *Alcohol and Alcoholism*, *57*(1), 113-124.



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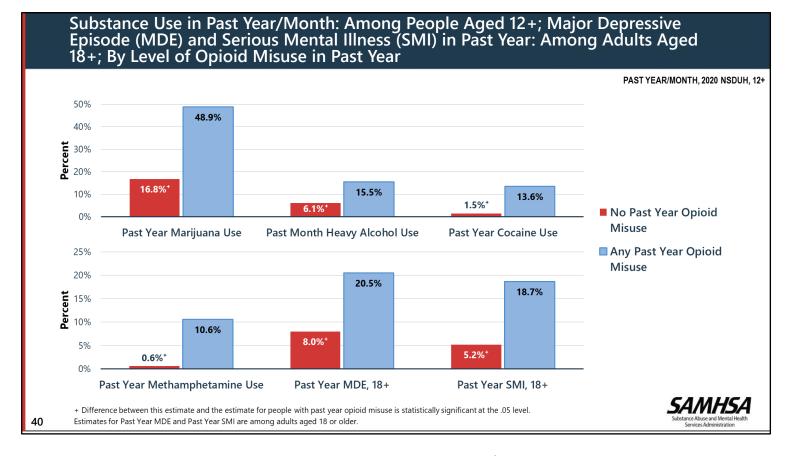
- People aged 12 or older who did not use marijuana in the past year were less likely to have used or misused other substances than people who had used marijuana in the past year. Adults aged 18 or older were also less likely to have an MDE or SMI in the past year.
- People aged 12 or older who used marijuana daily or almost daily in the past

year were more likely to have misused opioids in the past year and used cocaine in the past year than people who had used marijuana in the past year.

Co-occurring substance use and mental illness are common. Mental illness and substance use is often conceptualized as having a bidirectional relationship—in that substance use often leads to and exacerbates mental illness and mental illness can be a precursor for substance misuse. Literature has suggested that substance use (e.g., marijuana, alcohol) may be used as a way of regulating emotions (in the short term)—but exacerbating depression symptom severity in the long-term (Weiss et al., 2022).

Reference

Weiss, N. H., Kiefer, R., Goncharenko, S., Raudales, A. M., Forkus, S. R., Schick, M. R., & Contractor, A. A. (2022). Emotion regulation and substance use: A meta-analysis. *Drug and Alcohol Dependence*, *230*, 109131.



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TALKING POINTS:

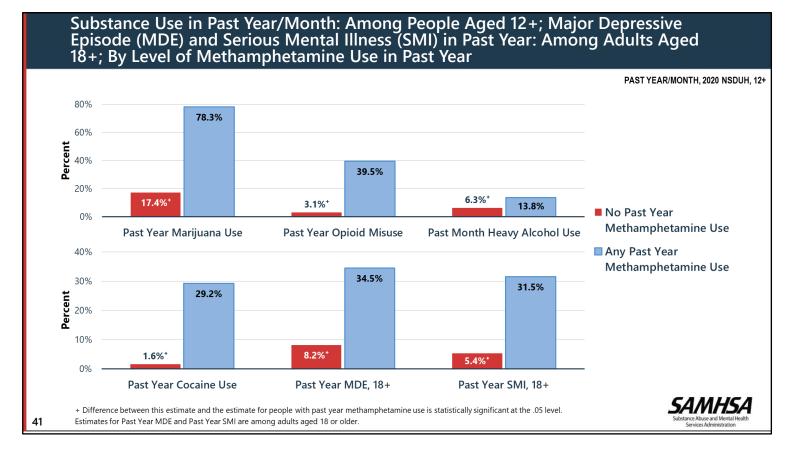
- The opioid epidemic continues to plague the United States. In 2019, more than 70 percent of drug overdose fatalities involved opioids. Opioid use often co-occurs with other substance misuse, including stimulants and cocaine (Mattson et al., 2021).
- People aged 12 or older who misused opioids in the past year had a higher

percentage of past year marijuana use, past month heavy alcohol use, past year cocaine use, and past year methamphetamine use than people who did not misuse opioids in the past year.

- Adults aged 18 or older who misused opioids in the past year had a higher percentage of an MDE or SMI in the past year than adults who did not misuse opioids in the past year.
- Polysubstance use including opioids is particularly dangerous and is associated with increased death rates when compared with death rates of adults who use only one substance (Mattson et al., 2021).

Reference

Mattson, C. L., Tanz, L. J., Quinn, K., Kariisa, M., Patel, P., & Davis, N. L. (2021). Trends and geographic patterns in drug and synthetic opioid overdose deaths—United States, 2013–2019. *Morbidity and Mortality Weekly Report, 70*(6), 202.



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TALKING POINTS:

 People aged 12 or older who did not use methamphetamine in the past year had significantly lower rates of marijuana, opioid, cocaine, and heavy alcohol use in the past month/year.

- Additionally, adults aged 18 or older who did not use methamphetamine in the past year had significantly lower rates of an MDE and SMI in the past year.
- 2020 NSDUH findings are consistent with literature that has established a consistent relationship between methamphetamine use and mental health outcomes including depression and psychosis (Marshall & Werb, 2010).

Reference

Marshall, B. D., & Werb, D. (2010). Health outcomes associated with methamphetamine use among young people: A systematic review. *Addiction*, *105*(6), 991-1002.

Summary

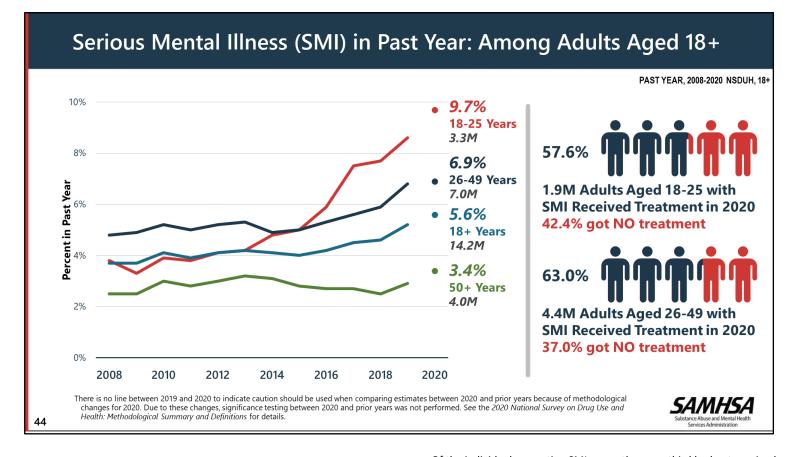
- Polysubstance use is common—if a person is having problems with one substance, they may be having problems with other substances
- Treatment providers must screen for and treat all substance use disorders and problem substance use
- Association of substance misuse and mental illness is clear—we must all do a better job of helping Americans understand these relationships and risks



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Mental Health





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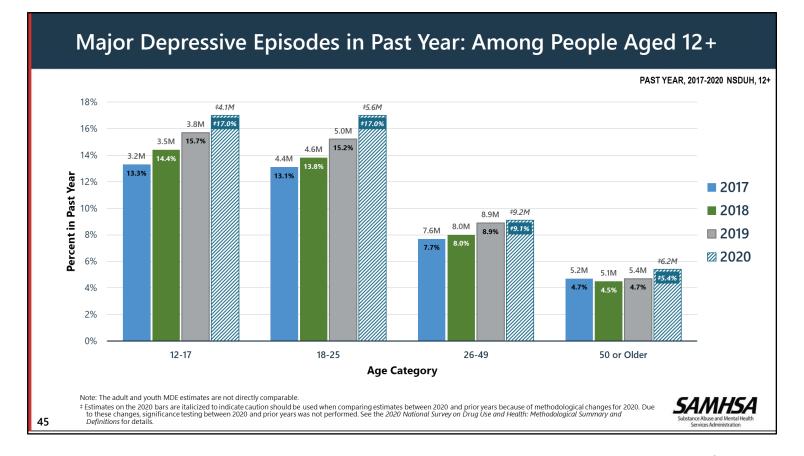
TALKING POINTS:

- In 2020, young adults aged 18 to 25 had the highest percentage of SMI, followed by adults aged 26-49, then by adults aged 50 or older.
- SMI continues to be on the rise, particularly in young adults, which is
 consistent with literature showing mental health concerns in young adults
 have significantly increased over the past decade (Twenge et al., 2019).

 Of the individuals reporting SMI, more than one third had not received mental health treatment of any kind in 2020. This data is evidence to suggest that improving access to mental health treatment remains an important target for improvement and innovation.

Reference

Twenge, J. M., Cooper, A. B., Joiner, T. E., Duffy, M. E., & Binau, S. G. (2019). Age, period, and cohort trends in mood disorder indicators and suicide-related outcomes in a nationally representative dataset, 2005–2017. *Journal of Abnormal Psychology*, 128(3), 185.



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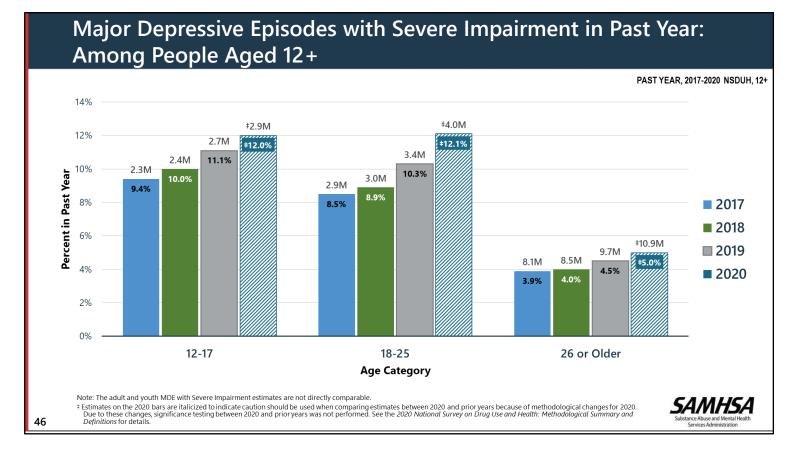
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TALKING POINTS:

 In 2020, the percentage of adults who had an MDE was highest among adults aged 18 to 25, followed by adults aged 26 to 49, then by adults aged 50 or older. Estimates of MDE are not compared between youths aged 12 to 17 and adults aged 18 or older. Youths and young adults continue to report rising rates of MDE, consistent
with recent literature that found rates of depression increased by 52
percent between 2005 and 2017 among adolescents and 63 percent
between 2009 and 2017 in young adults (Twenge et al., 2019).

Reference

Twenge, J. M., Cooper, A. B., Joiner, T. E., Duffy, M. E., & Binau, S. G. (2019). Age, period, and cohort trends in mood disorder indicators and suicide-related outcomes in a nationally representative dataset, 2005–2017. *Journal of Abnormal Psychology*, 128(3), 185.



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TALKING POINTS:

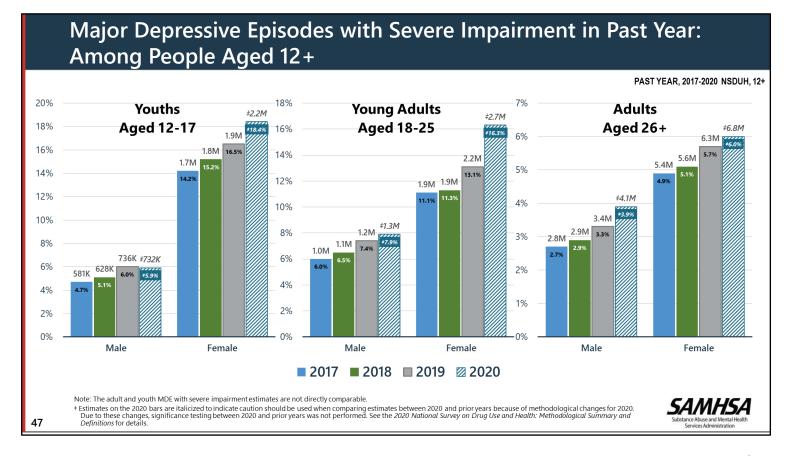
- MDE with severe impairment is defined as those individuals with higher scores on the Sheehan Disability Scale.
- In 2020, young adults aged 18 to 25 were more than twice as likely to experience MDE with Severe Impairment than adults aged 26 or older. Estimates of MDE with Severe Impairment are not compared between

youths aged 12 to 17 and adults aged 18 or older.

 These findings support literature suggesting that rates of mental illness are rising more quickly in adolescents and young adults (Twenge et al., 2019).

Reference

Twenge, J. M., Cooper, A. B., Joiner, T. E., Duffy, M. E., & Binau, S. G. (2019). Age, period, and cohort trends in mood disorder indicators and suicide-related outcomes in a nationally representative dataset, 2005–2017. *Journal of Abnormal Psychology*, 128(3), 185.



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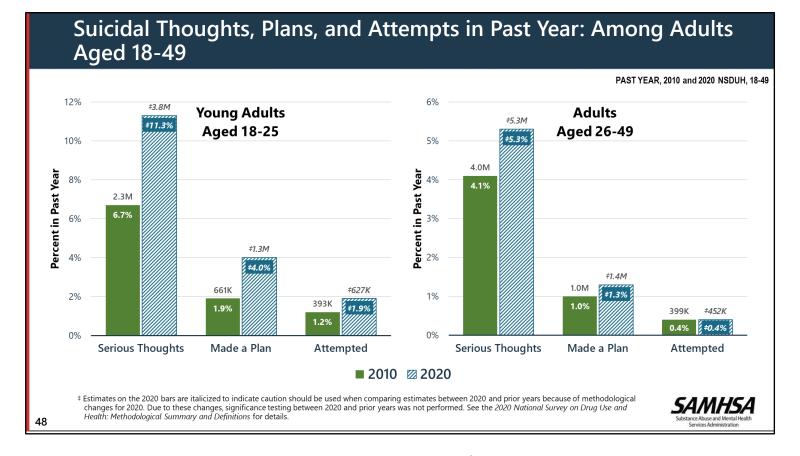
TALKING POINTS:

 In 2020, females aged 18 to 25 reported higher rates of MDE with Severe Impairment than adults aged 26 or older. Estimates of MDE with Severe Impairment are not compared between youths aged 12 to 17 and adults aged 18 or older. This is consistent with recent research suggesting that the rates of severe mood disorders have significantly increased among adolescents and young adults in the past 10 years, especially among females (e.g., Twenge et al., 2019; Yard et al., 2021).

References

Twenge, J. M., Cooper, A. B., Joiner, T. E., Duffy, M. E., & Binau, S. G. (2019). Age, period, and cohort trends in mood disorder indicators and suicide-related outcomes in a nationally representative dataset, 2005–2017. *Journal of Abnormal Psychology*, 128(3), 185.

Yard, E., Radhakrishnan, L., Ballesteros, M. F., Sheppard, M., Gates, A., Stein, Z., ... Stone, D. M. (2021). Emergency department visits for suspected suicide attempts among persons aged 12–25 years before and during the COVID-19 pandemic—United States, January 2019–May 2021. *Morbidity and Mortality Weekly Report*, 70(24), 888.



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TALKING POINTS:

- In 2020, serious thoughts of suicide were reported by more than 10 percent
 of young adults aged 18 to 25—more than double the rate reported by
 adults aged 26 to 49.
- The percentage of young adults aged 18 to 25 who made a suicide plan or attempted suicide was higher than for adults aged 26 to 49.

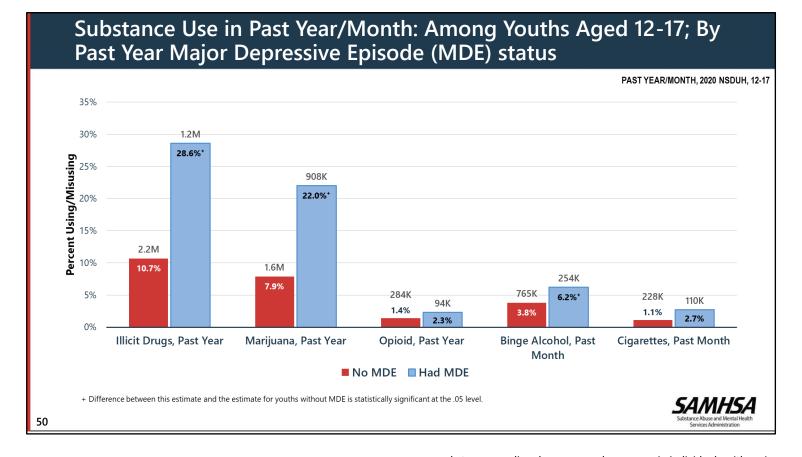
Rates of planning or attempting suicide remain low—and illustrates two important points in the literature: (1) suicidal behaviors remain difficult to study due to low base rates, and (2) suicidal behaviors are underreported (e.g., Tøllefsen et al., 2012).

Reference

Tøllefsen, I. M., Hem, E., & Ekeberg, Ø. (2012). The reliability of suicide statistics: A systematic review. *BMC Psychiatry*, 12(1), 1-11.

Co-Occurring Mental and Substance Use Disorders





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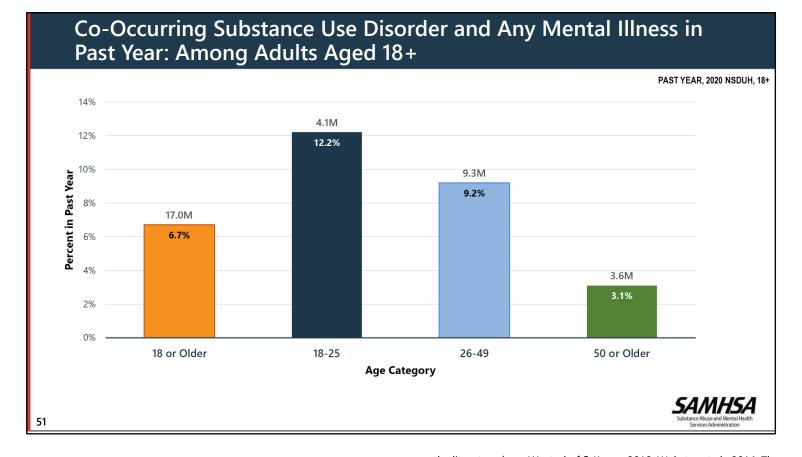
TALKING POINTS:

- Youth mental health has emerged as a major concern, provided the rising rates of mental illness (including depression).
- Youths aged 12 to 17 with an MDE in the past year reported significantly higher rates of illicit drug use, marijuana use, and binge drinking within the past year/month. This is consistent with a recent meta-analysis that found

substance use disorders commonly co-occur in individuals with major depression (Hunt et al., 2020).

Reference

Hunt, G. E., Malhi, G. S., Lai, H. M. X., & Cleary, M. (2020). Prevalence of comorbid substance use in major depressive disorder in community and clinical settings, 1990–2019: Systematic review and meta-analysis. *Journal of Affective Disorders*, 266, 288-304.



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TALKING POINTS:

- Rates of co-occurring substance use disorder and any mental illness in the past year was highest among young adults aged 18 to 25 and lowest among adults aged 50 or older.
- Declining prevalence rates of mental illness across the lifespan, such that older adults report the lowest rates of mental illness, is well established in

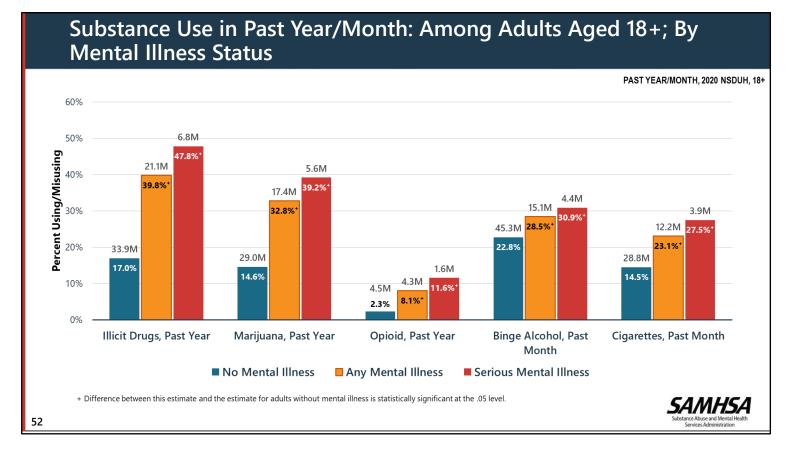
the literature (e.g., Westerhof & Keyes, 2010, Webster et al., 2014; Thomas et al., 2016).

References

Westerhof, G. J., & Keyes, C. L. (2010). Mental illness and mental health: The two continua model across the lifespan. *Journal of Adult Development*, *17*(2), 110-119.

Webster, J. D., Westerhof, G. J., & Bohlmeijer, E. T. (2014). Wisdom and mental health across the lifespan. *Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 69(2), 209-218.

Thomas, M. L., Kaufmann, C. N., Palmer, B. W., Depp, C. A., Martin, A. S., Glorioso, D. K., ... Jeste, D. V. (2016). Paradoxical trend for improvement in mental health with aging: A community-based study of 1,546 adults aged 21-100 years. *The Journal of Clinical Psychiatry*, 77(8), 8771.

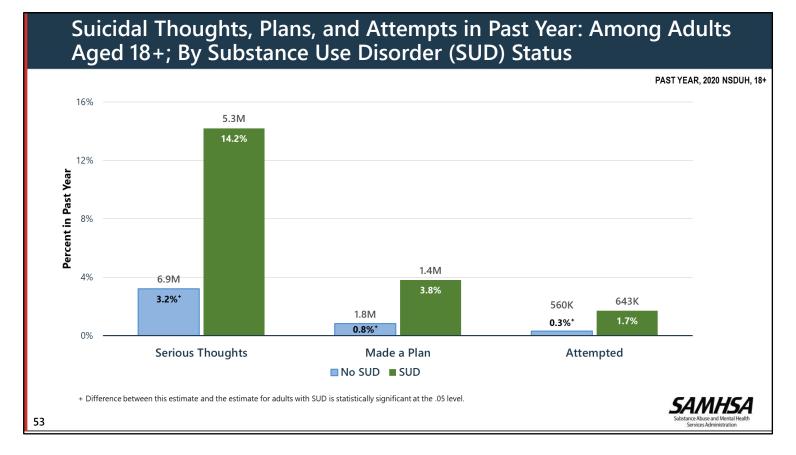


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TALKING POINTS:

- Co-occurrence of mental illness and substance use is common.
- Adults aged 18 or older with serious mental illness or any mental illness had significantly higher rates of illicit drug, marijuana, opioid, binge alcohol, and cigarette use over the past year/month than adults without mental illness.



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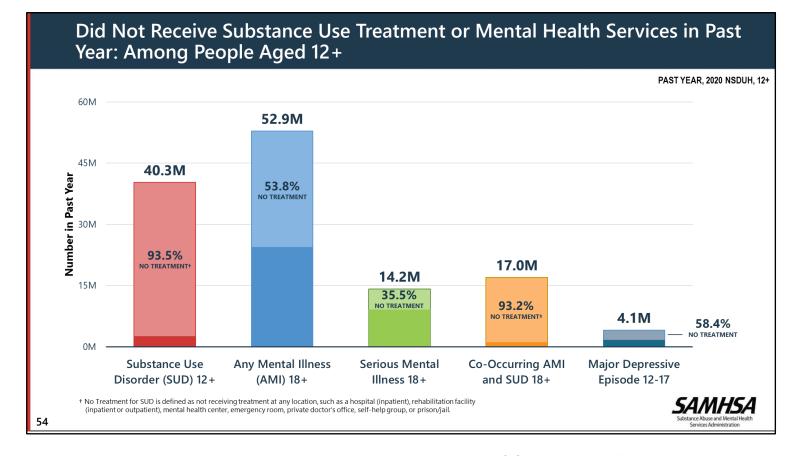
TALKING POINTS:

- Adults aged 18 or older with an SUD had higher rates of serious thoughts of suicide in the past year than adults who did not have an SUD.
- Furthermore, adults without an SUD had significantly lower rates of suicide attempts and planning.

 Literature has found that substance use often co-occurs with suicidal thoughts and behaviors and is a well-established risk factor for suicide attempts and death by suicide (Esang & Ahmed, 2018).

Reference

Esang, M., & Ahmed, S. (2018). A closer look at substance use and suicide. *American Journal of Psychiatry Residents' Journal*, 13(6), 6-8.



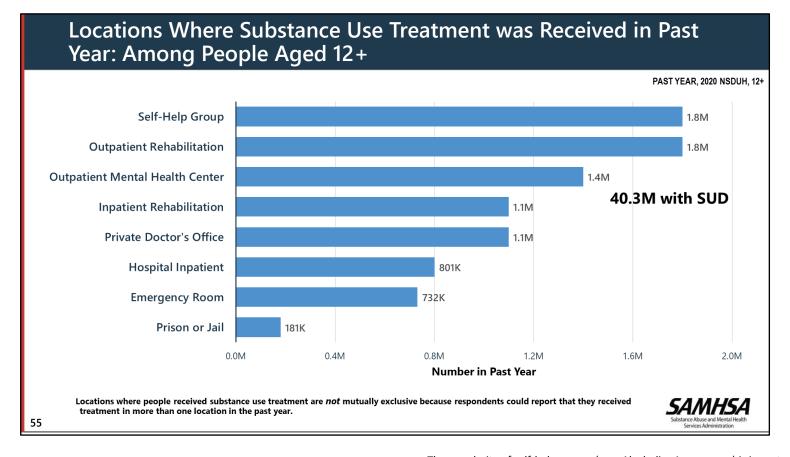
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TALKING POINTS:

- Understanding barriers to and increasing access to SUD and mental health treatment remains a focus for providers and policymakers.
- Well-established barriers to care include lack of insurance/cost, stigmatization of substance use and mental illness, and multicultural factors.

- More than half of adults aged 18 or older with AMI and youths aged 12 to 17 with an MDE did not receive treatment within the past year.
- Far fewer adults sought help for SUD or co-occurring SUD and AMI. More than 90 percent do not receive treatment—highlighting barriers to care including stigmatization of SUD.



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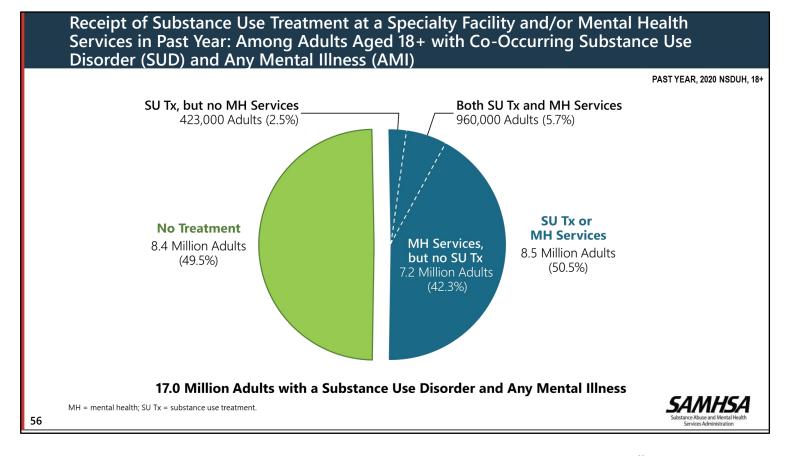
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TALKING POINTS:

 Among people aged 12 or older, self-help groups and outpatient rehabilitation were the most utilized forms of treatment. The popularity of self-help groups (e.g., Alcoholics Anonymous) is in part due to reduced fears of stigmatization (or being misunderstood) because group leaders have shared lived experiences (Moos, 2008). In addition, self-help groups are typically free.

Reference

Moos, R. H. (2008). Active ingredients of substance use-focused self-help groups. *Addiction*, *103*(3), 387-396.



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TALKING POINTS:

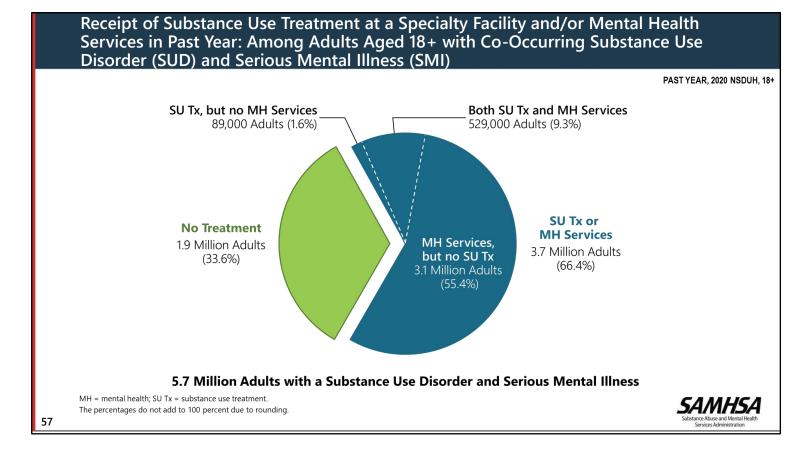
- Nearly half of adults with a SUD and AMI did not receive treatment in the past year.
- A small fraction of adults with co-occurring SUD and AMI received both SUD and MH treatment.

Co-occurring SUD and AMI is particularly difficult to treat, and this
treatment has poorer clinical outcomes than treatment of individuals with a
single diagnosis (Najt et al., 2011). Research has shown that individuals
engaged in integrated treatment for both SUD and AMI have better clinical
outcomes than individuals who do not (Mangrum et al., 2006). 2020 NSDUH
findings highlight the need for increased access to integrated care for SUD
and MH treatment.

References

Najt, P., Fusar-Poli, P., & Brambilla, P. (2011). Co-occurring mental and substance abuse disorders: A review on the potential predictors and clinical outcomes. *Psychiatry Research*, *186*(2-3), 159-164.

Mangrum, L. F., Spence, R. T., & Lopez, M. (2006). Integrated versus parallel treatment of co-occurring psychiatric and substance use disorders. *Journal of Substance Abuse Treatment*, 30(1), 79-84.



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TALKING POINTS:

- Two thirds of adults with SUD and SMI received some form of SUD or MH treatment in the past year.
- Most of these adults received mental health services, but not SUD treatment.

These findings highlight a significant gap in treatment services, which has
also been highlighted in the literature. A recent meta-analysis found there
to be no high-quality evidence to support one treatment over another for
individuals with co-occurring SUD and SMI (Hunt et al., 2019).

Reference

Hunt, G. E., Siegfried, N., Morley, K., Brooke-Sumner, C., & Cleary, M. (2019). Psychosocial interventions for people with both severe mental illness and substance misuse. *Cochrane Database of Systematic Reviews*, 12(12).

Summary: Mental Health/Co-Occurring Issues in the United States in 2020

• Co-occurring substance use and mental disorders are common.

Adolescents:

 Higher rates of substance use in youths who had MDE vs. youths who did not have MDE

Adults:

- Significantly higher rates of substance use among adults with mental illness vs. adults without mental illness
- Significantly higher rates of suicidal thoughts and behaviors than those without a substance use disorder
- Most adults with co-occurring issues do not receive treatment for both issues



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