

The NHSDA Report

August 15, 2003

Racial and Ethnic Differences in Youth Hallucinogen Use

In Brief

- In 2001, almost 1.4 million youths aged 12 to 17 had used hallucinogens at least once in their lifetime
- Among youths, blacks were less likely than whites, Asians, or Hispanics to have used any hallucinogen in their lifetime
- Blacks and Hispanics were more likely than whites and Asians to perceive great risk in trying LSD once or twice

The National Household Survey on Drug Abuse (NHSDA) asks respondents aged 12 or older to report their lifetime use of hallucinogens, as well as their age of first use. Hallucinogens include LSD, PCP, MDMA (Ecstasy), peyote, mescaline, and psilocybin (mushrooms). Hallucinogens can have substantial side effects, including decreased motivation, prolonged depression, anxiety, increased delusions and panic, and psychosis.^{1,2}

Respondents aged 12 to 17 also were asked how much they thought people risk harming themselves physically and in other ways when they try LSD once or twice and use it once or twice a week, as well as how difficult or easy it would be to get some LSD if they wanted some.^{3,4} Respondents were analyzed by racial and ethnic subgroups for comparative purposes.

Lifetime Prevalence of Hallucinogen Use

According to the 2001 NHSDA, almost 1.4 million youths aged 12 to 17 (6 percent) had used hallucinogens at least once in their lifetime. Ecstasy and LSD (3 percent each) were the most commonly used hallucinogens (Figure 1).

Past research has shown that substance use, and in particular hallucinogen use, varies by race and ethnicity.⁵ According to the 2001 NHSDA, black youths were less likely to have used any hallucinogen in their lifetime compared with white, Asian, or Hispanic youths (Table 1). White and Asian youths had similar rates of hallucinogen use, except that whites were much more likely than Asians to have used PCP or psilocybin at least once in their lifetime.

Differences in Perceived Risk and Availability of LSD

Substance use is generally lower among those who perceive great risk associated with use of a particular drug.⁶ Among youths, blacks and Hispanics were more likely than whites and Asians to perceive great risk in trying LSD once or twice (Figure 2).

However, white youths were more likely than Hispanic, Asian, and black youths to perceive great risk in using LSD once or twice a week.

Perceived availability of LSD also varied by race and ethnicity. White youths were more likely than all other youths to think that

Figure 1. Percentages of Youths Aged 12 to 17 Reporting Lifetime Use of Specific Hallucinogens: 2001

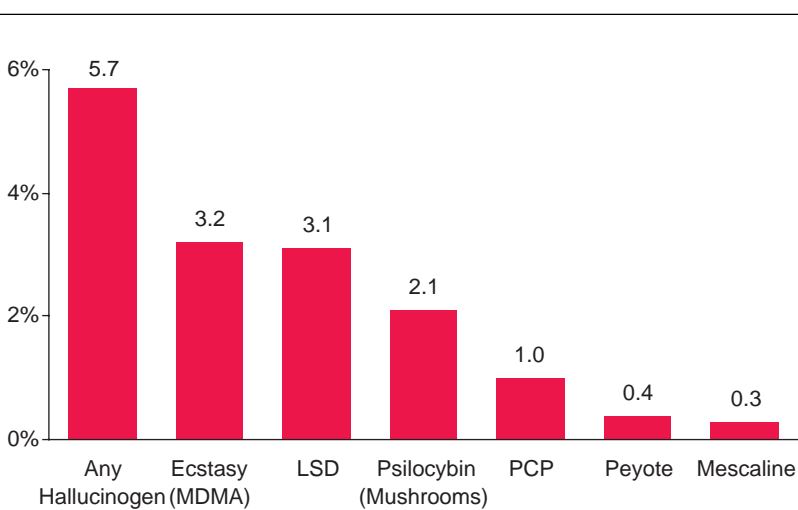


Table 1. Percentages and Standard Errors of Youths Aged 12 to 17 Reporting Lifetime Use of Specific Hallucinogens, by Race/Ethnicity*: 2001

Hallucinogen	White		Black		Asian		Hispanic	
	%	SE	%	SE	%	SE	%	SE
Any Hallucinogen	6.8	0.26	1.7	0.28	5.2	1.33	4.1	0.48
PCP	1.2	0.11	0.2	0.07	0.2	0.24	0.6	0.18
LSD	3.9	0.22	0.5	0.16	2.3	0.91	2.1	0.38
Peyote	0.4	0.06	>0.1	0.03	0.2	0.21	0.3	0.11
Mescaline	0.4	0.05	0.1	0.05	0.6	0.34	0.3	0.15
Psilocybin (Mushrooms)	2.7	0.17	0.4	0.14	0.7	0.48	1.4	0.28
Ecstasy (MDMA)	3.8	0.20	1.1	0.22	4.2	1.28	2.1	0.31

LSD is fairly or very easy to obtain, and Hispanic youths were more likely than black or Asian youths to think that LSD is fairly or very easy to obtain (Figure 3).

End Notes

1. Response options for the risk questions were (1) no risk, (2) slight risk, (3) moderate risk, or (4) great risk.
2. Response options for the availability question were (1) probably impossible, (2) very difficult, (3) fairly difficult, (4) fairly easy, or (5) very easy.

Figure 2. Percentages of Youths Aged 12 to 17 Reporting Perceived Great Risk of Trying LSD Once or Twice and Using LSD Once or Twice a Week, by Race/Ethnicity*: 2001

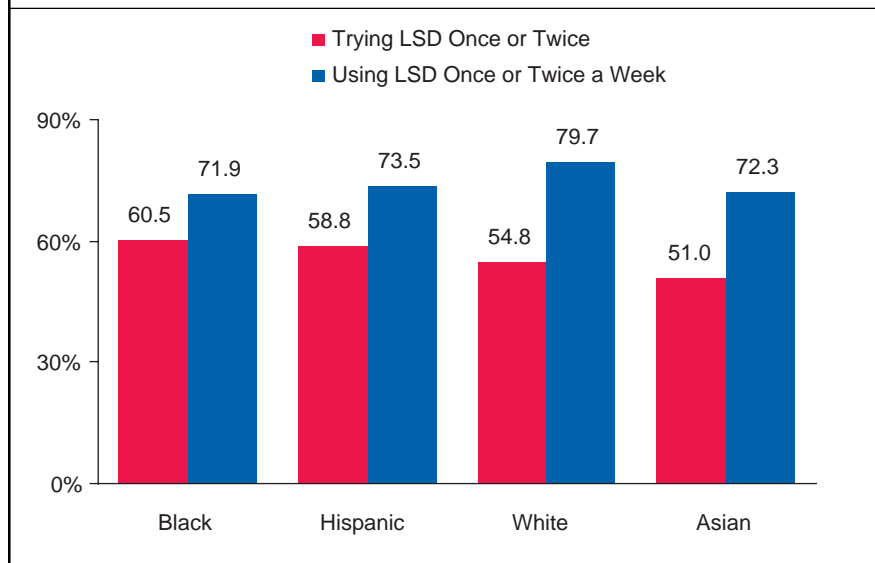


Figure 3. Percentages of Youths Aged 12 to 17 Reporting it Would Be Fairly or Very Easy to Obtain LSD, by Race/Ethnicity*: 2001

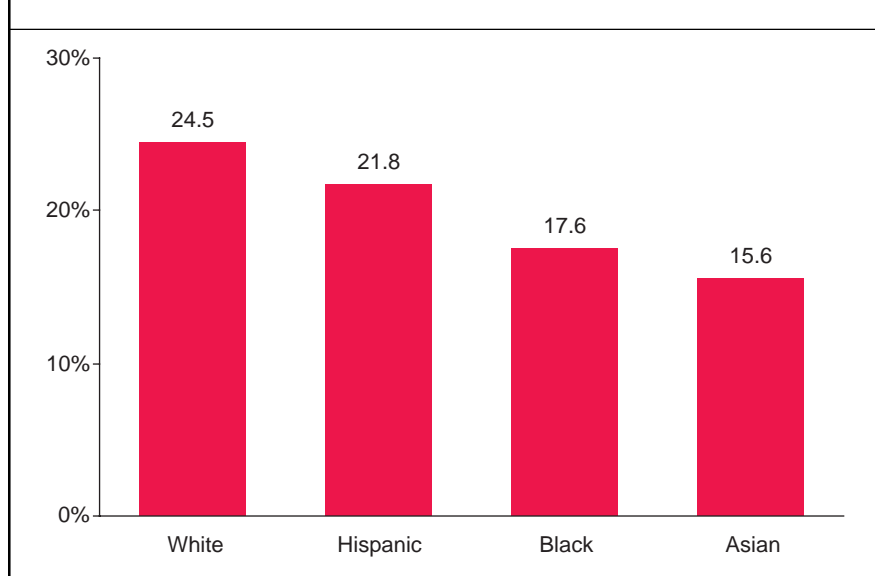


Figure and Table Notes

* American Indian/Alaska Native and Native Hawaiian or other Pacific Islander youths were excluded from analyses due to small sample sizes.

Source (all figures and table 1): SAMHSA 2001 NHSDA

The National Household Survey on Drug Abuse (NHSDA) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2001 data are based on information obtained from 69,000 persons aged 12 or older, including approximately 23,000 youths aged 12 to 17. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NHSDA Report is prepared by the Office of Applied Studies (OAS), SAMHSA, and by RTI in Research Triangle Park, North Carolina.

Information and data for this issue are based on the following publication and statistics:

Office of Applied Studies. (2002). *Results from the 2001 National Household Survey on Drug Abuse: Volume I. Summary of national findings* (DHHS Publication No. SMA 02-3758, NHSDA Series H-17). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available on-line: <http://www.DrugAbuseStatistics.samhsa.gov>.

Additional tables available upon request.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
Substance Abuse & Mental Health Services Administration
Office of Applied Studies
www.samhsa.gov



3. National Clearinghouse for Alcohol and Drug Information. (2002). *Tips for teens: The truth about hallucinogens*. Retrieved July 29, 2003, from <http://www.health.org/govpubs/phd642/>

4. National Institute on Drug Abuse. (2002, October 18). *NIDA InfoFacts: PCP (Phencyclidine)*. Retrieved July 29, 2003, from <http://165.112.78.61/Infobox/pcp.html>

5. Wallace, J. M., Bachman, J. G., O'Malley, P. M., Johnston, L. D., Schulenberg, J. E., & Cooper, S. M. (2002). Tobacco, alcohol, and

illicit drug use: racial and ethnic differences among U.S. high school seniors, 1976-2000. *Public Health Reports*, 117(Suppl. 1), 67-75.

6. Office of Applied Studies. (1998). *Prevalence of substance use among racial and ethnic subgroups in the United States, 1991-1993* (DHHS Publication No. SMA 98-3202, NHSDA Series A-6; available at <http://www.samhsa.gov/oas/analytic.htm>). Rockville, MD: Substance Abuse and Mental Health Services Administration.