National Household Survey on Drug Abuse

The NHSDA Report

Availability of Illicit Drugs to Females Aged 12 to 17

In Brief

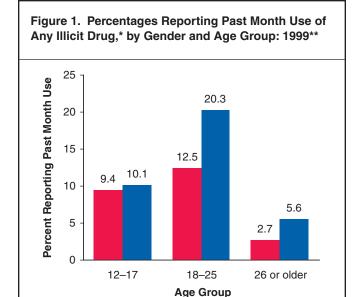
- Although adult females reported lower rates of past month illicit drug use than did adult males, use was comparable between females and males aged 12 to 17
- Females aged 12 to 17 were more likely than their male peers to report that cocaine, crack, LSD, and heroin were fairly or very easy to obtain
- Females aged 16 or 17 were more likely than females aged 12 to 15 to report that illicit drugs were fairly or very easy to obtain

he 1999 National Household Survey on Drug Abuse (NHSDA) asked male and female respondents aged 12 or older to report use of any illicit drug during the past month. "Any illicit drug" refers to the use of marijuana/hashish, cocaine (including crack), inhalants, hallucinogens (including LSD and PCP), heroin, or any prescription-type psychotherapeutic used nonmedically during the 30 days prior to the interview. Respondents were also asked to report how easy it was to obtain illicit drugs. The response categories were:

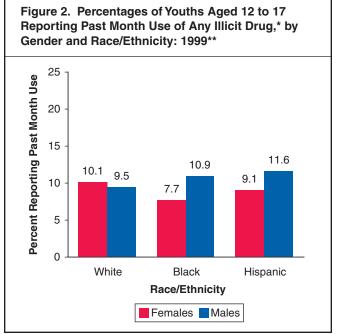
- Probably impossible
- Very difficult
- Fairly difficult
- Fairly easy
- Very easy

Gender Differences in Illicit Drug Use

Females aged 18 to 25 and 26 or older were less likely than their male peers to report use of any illicit drug during the



Females Males



past month (Figure 1). However, females aged 12 to 17 (9 percent) were almost as likely as their male peers (10 percent) to report past month illicit drug use. Black and Hispanic males aged 12 to 17 were more likely than their female counterparts to report use, but rates of use were similar between white males and females in this age group (Figure 2).

Among females aged 12 to 17:

- 755,000 reported using marijuana and hashish during the past month
- 83,000 reported using LSD
- 66,000 reported using cocaine
- 19,000 reported using heroin
- 13,000 reported using crack Females aged 16 or 17 were

more likely than females aged 12 to 15 to report using marijuana/ hashish, LSD, cocaine, and heroin during the past month. Small sample sizes prevented comparisons of past-month use of illicit drugs across racial/ethnic groups.

Availability of Illicit Drugs Among Females Aged 12 to 17

Females aged 12 to 17 were more likely than their male peers to report that LSD, cocaine, heroin, and crack were fairly or very easy to obtain and were equally as likely as their male peers to report that marijuana was fairly or very easy to obtain (Figure 3). Females aged 16 or 17 more often reported that illicit drugs were fairly or very easy to obtain than females aged 12 to 15 (Figure 4). White females were more likely than females from other racial/ethnic groups to report that LSD was fairly or very easy to obtain. Small sample sizes prevented comparisons of ease of obtaining other illicit drugs across racial/ethnic groups.

Link Between Availability and Use

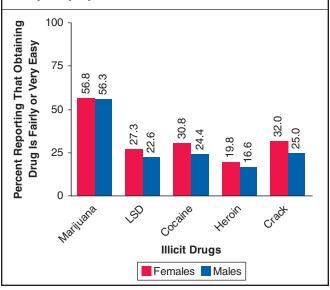
Youths who reported illicit drugs were fairly or very easy to obtain were more likely to use drugs (Figure 5). For example, almost 12 percent of youths aged 12 to 17 who reported that marijuana was fairly or very easy to obtain also reported using marijuana/hashish during the past month compared to 1 percent of those reporting that marijuana was difficult to obtain.

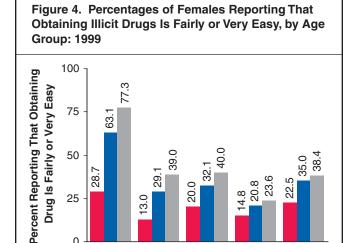
Approximately 7 percent of those reporting that marijuana was fairly or very easy to obtain also reported using other illicit drugs compared to 2 percent of those reporting that marijuana was difficult to obtain.

Summary

Females aged 12 to 17 were as likely to report past month illicit drug use as their male peers and were more likely than their male peers to report that LSD, cocaine, heroin, and crack were fairly or very easy to obtain. Easy availability of drugs may be related to increased risk for drug use.

Figure 3. Percentages of Youths Aged 12 to 17 Reporting That Obtaining Illicit Drugs Is Fairly or Very Easy, by Gender: 1999





Cocaine

Illicit Drugs

■ Age 12–13 ■ Age 14–15 ■ Age 16–17

Heroin

Clack

The National Household Survey on Drug Abuse (NHSDA) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 1999 data are based on information obtained from nearly 70,000 persons aged 12 or older. 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:

Substance Abuse and Mental Health Services Administration. (2000). Summary of findings from the 1999 National Household Survey on Drug Abuse (DHHS Publication No. SMA 00-3466). Rockville, MD: Author.

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

Additional tables: 1.15A; 1.27B; 1.28B; 1.29B from http://www.samhsa.gov/oas/nhsda/2kdetailedtabs/Vol_1_Part_1/V1P1.htm

 $Additional\ tables: 3.13B; 3.14B; 3.15B; 3.16B; 3.17B\ from $$http://www.samhsa.gov/oas/nhsda/2kdetailedtabs/Vol_1_Part_3/V1P3.htm$

Additional tables available upon request

Figure 5. Percentages of Youths Aged 12 to 17 Reporting Past Month Use of Illicit Drugs, by Ease of Obtaining Marijuana: 1999**

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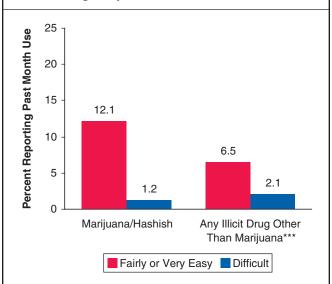


Figure Notes

- *Any Illicit Drug indicates use at least once of marijuana/hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically.
- ** Data presented may differ from previously published data from the 1999 NHSDA because of corrections made to imputation procedures.
- ***Any Illicit Drug Other Than Marijuana indicates use at least once of cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically; marijuana/ hashish users who also have used any of the other drugs listed are included.

Source (all figures): SAMHSA 1999 NHSDA.