National Household Survey on Drug Abuse

The NHSDA Report

May 16, 2003

In Brief

- From 1999 to 2001, American Indians or Alaska Natives were more likely to have used cigarettes or an illicit drug in the past month compared with persons from other racial/ethnic groups and more likely than blacks or Asians to have engaged in binge or heavy drinking
- Among youths aged 12 to 17, the rates of past month cigarette use, binge drinking, and illicit drug use were higher among American Indians or Alaska Natives than among those from other racial/ethnic groups
- In 2001, American Indians or Alaska Natives had a higher rate of past year dependence or abuse on illicit drugs or alcohol than persons from other racial/ethnic groups

Substance Use among American Indians or Alaska Natives

The National Household Survey on Drug Abuse (NHSDA) asks persons aged 12 or older about their use of cigarettes, alcohol, or an illicit drug during the past month. Binge alcohol use is defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past 30 days. Heavy alcohol use is defined as drinking five or more drinks on the same occasion on each of 5 or more days in the past 30 days; all heavy alcohol users are also binge alcohol users. Illicit drugs include marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically.

Respondents were also asked to report on their symptoms of abuse of or dependence on alcohol or illicit drugs. In the NHSDA, abuse and dependence are defined using criteria specified in the American

Figure 1. Percentages of Persons Aged 12 or Older Reporting Past Month Substance Use, by Race/ Ethnicity: Annual Averages Based on 1999, 2000, and 2001 NHSDAs

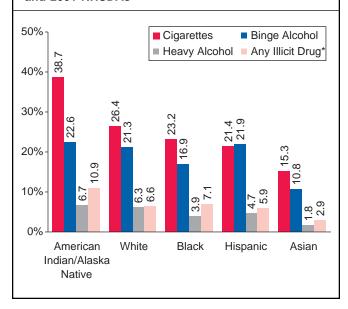
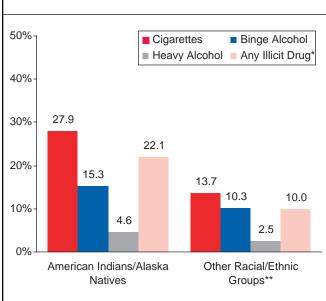


Figure 2. Percentages of Youths Aged 12 to 17 Reporting Substance Use, by Race/Ethnicity: Annual Averages Based on 1999, 2000, and 2001 NHSDAs



Psychiatric Association's *Diagnostic* and *Statistical Manual of Mental Disorders* (DSM-IV), which includes such symptoms as physical danger, trouble with the law due to substance use, increased tolerance, and interference with everyday life during the past year.²

Responses were analyzed for comparative purposes by racial/ethnic subgroups and the type of county in which the respondents lived at the time of the interview.³ Except for data on dependence or abuse, all findings in this report are annual averages based on combined data from the 1999, 2000, and 2001 NHSDAs.

Prevalence of Substance Use

American Indians or Alaska Natives aged 12 or older were more likely to have used cigarettes or an illicit drug in the past month compared with persons from other racial/ethnic groups (Figure 1). Rates of

binge and heavy alcohol use were higher for American Indians or Alaska Natives than for blacks or Asians, but rates were similar for American Indians or Alaska Natives, whites, and Hispanics.

Age Differences

Among youths aged 12 to 17, the rates of past month cigarette use, binge drinking, and past month illicit drug use were higher among American Indians or Alaska Natives than among youths from other racial/ethnic groups (Figure 2). However, the rate of heavy drinking was similar among the two groups. Among young adults aged 18 to 25, American Indians or Alaska Natives were more likely than young adults from other racial/ethnic groups to have smoked cigarettes in the past month, but the rates of past month illicit drug use, binge drinking, and heavy drinking were similar. American Indian or Alaska Native adults aged 26 or older had higher

rates of past month cigarette and illicit drug use than adults aged 26 or older from other racial/ethnic groups, but the rates of binge and heavy drinking were similar.

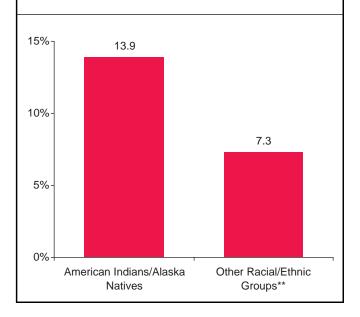
Substance Use in Metropolitan and Non-Metropolitan Areas

Among persons aged 12 or older in large and small metropolitan areas, the rate of past month illicit drug use was similar among American Indians or Alaska Natives and persons from other racial/ethnic groups (Table 1). However, among persons in non-metropolitan areas, American Indians or Alaska Natives were more likely to have used an illicit drug in the past month than were persons from other racial/ ethnic groups. In both small metropolitan and non-metropolitan areas, past month cigarette use was higher among American Indians or Alaska Natives compared with persons from other racial/ethnic groups but

Table 1. Percentages of Persons Aged 12 or Older Reporting Past Month Any Illicit Drug Use,* by Race/Ethnicity and County Type: 1999-2001

	%	SE
merican Indian/Alaska Native		
Large Metropolitan	8.5	3.19
Small Metropolitan	11.9	2.80
Non-Metropolitan	11.2	1.58
ther Racial/Ethnic Groups**		
Large Metropolitan	6.9	0.16
Small Metropolitan	6.7	0.17
Non-Metropolitan	5.2	0.15

Figure 3. Percentages of Persons Aged 12 or Older Reporting Past Year Dependence on or Abuse of Any Illicit Drug* or Alcohol, by Race/Ethnicity: 2001



in large metropolitan areas the rates were similar. The rates of binge and heavy drinking were similar for American Indians or Alaska Natives compared with persons from other racial/ethnic groups in all county types.

Dependence and Abuse

According to the 2001 NHSDA, American Indians or Alaska Natives were more likely than persons from other racial/ethnic groups to abuse or be dependent on alcohol or illicit drugs during the past year (Figure 3).

End Notes

- A "drink" is defined as a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink containing liquor.
- American Psychiatric Association. (1994). Diagnostic and statistical manual of mental disorders (4th ed.). Washington, DC: Author.
- Large metropolitan areas have a population of 1 million or more. Small
 metropolitan areas have a population of less than 1 million. Non-metropolitan areas are outside of metropolitan statistical areas (MSAs), as defined by
 the Office of Management and Budget.

Figure and Table Notes

- * "Any illicit drug" refers to marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically.
- ** Includes white, black, Hispanic, Asian, Native Hawaiian/other Pacific Islander, or more than one race.

Note: Binge alcohol use is defined as drinking five or more *drinks* on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past 30 days. Heavy alcohol use is defined as

drinking five or more drinks on the same occasion on each of 5 or more days in the past 30 days; all heavy alcohol users are also binge alcohol users.

Source (Figures 1 and 2, Table 1): SAMHSA 1999–2001 NHSDAs. Source (Figure 4): 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 1999, 2000, and 2001 data are based on information obtained from 207,470 persons aged 12 or older (about 70,000 each year), including more than 2,300 American Indians or Alaska Natives (about 775 each year). 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 publications and statistics:

Office of Applied Studies. (2000). Summary of findings from the 1999 National Household Survey on Drug Abuse (DHHS Publication No. SMA 00-3466, NHSDA Series H-12). Rockville, MD: Substance Abuse and Mental Health Services Administration

Office of Applied Studies. (2001). Summary of findings from the 2000 National Household Survey on Drug Abuse (DHHS Publication No. SMA 01-3549, NHSDA Series H-13). Rockville, MD: Substance Abuse and Mental Health Services Administration.

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.



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