

The DASIS Report

March 29, 2002

Treatment Referral Sources for Adolescent Marijuana Users

In Brief

- By 1999, more than half of all adolescent marijuana admissions were through the criminal justice system
- Adolescent marijuana admissions through the criminal justice system increased at a higher rate than admissions through other sources

Marijuana was the most common drug of abuse among admissions of adolescents aged 12 to 17 reported to the Treatment Episode Data Set (TEDS) in 1999. The number of adolescent marijuana admissions increased 260 percent between 1992 and 1999. TEDS collects data on national admissions to primarily publicly funded substance abuse treatment facilities. "Admissions" represent annual treatment episodes rather than the number of individuals entering treatment.

Generally, adolescents entered treatment through the intervention of another person or agency. The Treatment Episode Data Set (TEDS) collects information on the referral source for people entering substance abuse treatment in the public sector. TEDS defines the primary referral sources as follows:

Court/criminal justice referral/DWI/DUI—police official, judge, prosecutor, probation officer or other person affiliated with a Federal, State, or county judicial system; court referral for DWI/DUI; referrals in lieu of or for deferred prosecution, during pretrial release, or before or after adjudication, pre-parole, pre-release, work or home furlough, TASC, or civil commitment

Self- or individual referral—self-referral; family member, friend, or other individual

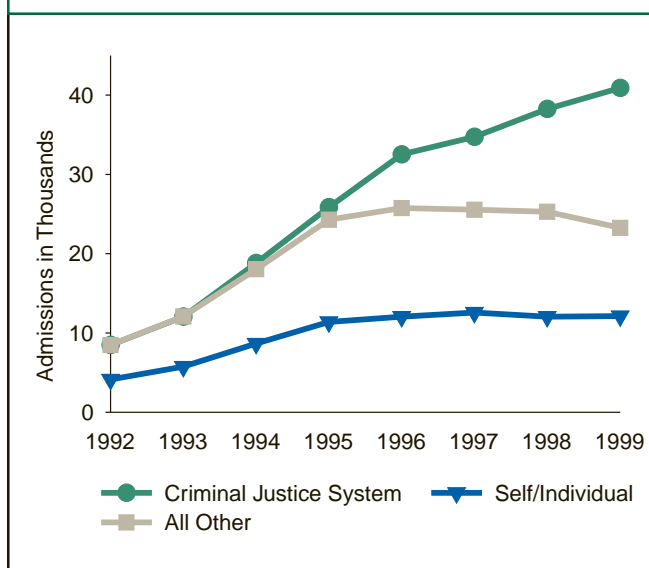
School—school principal, counselor, or teacher; student assistance program, school system, or educational agency

Table 1. Percent Distribution of Adolescent Marijuana Admissions, by Referral Source: 1992-1999*

	1992	1994	1996	1997	1998	1999
<i>No. of Admissions (Thousands)</i>	22	47	73	76	81	79
<i>Percent Distribution</i>						
Criminal Justice	40.2	41.3	46.2	47.7	50.6	53.6
Self/Individual	19.6	19.0	17.1	17.2	15.9	15.9
School	16.3	16.0	13.2	12.1	11.3	10.5
SA/HC Provider	13.9	14.1	14.0	13.6	12.8	11.7
Other	10.0	9.5	9.4	9.3	9.3	8.3
Total	100.0	100.0	100.0	100.0	100.0	100.0

*1993 and 1995 not shown.
SA=Substance Abuse; HC=Health Care.

Figure 1. Number of Adolescent Marijuana Admissions, by Referral Source: 1992-1999



Source: 1999 SAMHSA Treatment Episode Data Set (TEDS).

Other referral sources—substance abuse or health care providers; community, religious, or governmental organizations or agencies providing social services

Trends in Referral Source

In 1999, there were about 79,000 admissions for marijuana/hashish treatment among adolescents aged 12 to 17 (Table 1). This represented an increase from 22,000 admissions in 1992 and 47,000 in 1994. The most common referral source for adolescent marijuana admissions was the criminal justice system. Together with self- or individual referral, these sources account for 60 to 70 percent of all adolescent marijuana admissions in all years.*

In 1999, over half (54 percent) of all adolescent marijuana admissions were through the criminal justice system. This represented a significant increase from the 40 percent referred

through the criminal justice system in 1992. The proportions of admissions from other referral sources declined. For example, from 1992 to 1999, self- or individual referrals declined from 20 percent to 16 percent, and referrals through schools declined from 16 percent to 11 percent.

The number of adolescent marijuana admissions increased from 1992 to 1995 for all referral sources (Figure 1). However, while the number of admissions from other referral sources stabilized after 1995, those from the criminal justice system continued to increase.

Referral Source by Sex

There was an overall increase in marijuana admissions for male adolescents from 1994 to 1999 attributable primarily to increased criminal justice referrals (Figure 2). While admissions for marijuana abuse increased by 67 percent from 1994 to 1999 among males,

the percentage of those admissions due to criminal justice referrals increased by 108 percent. For females, marijuana admissions between 1994 and 1996 increased 67 percent and criminal justice referrals increased 111 percent. Between 1996 and 1999, however, there was only a 2 percent increase in female marijuana admissions but a 29 percent increase in criminal justice referrals.

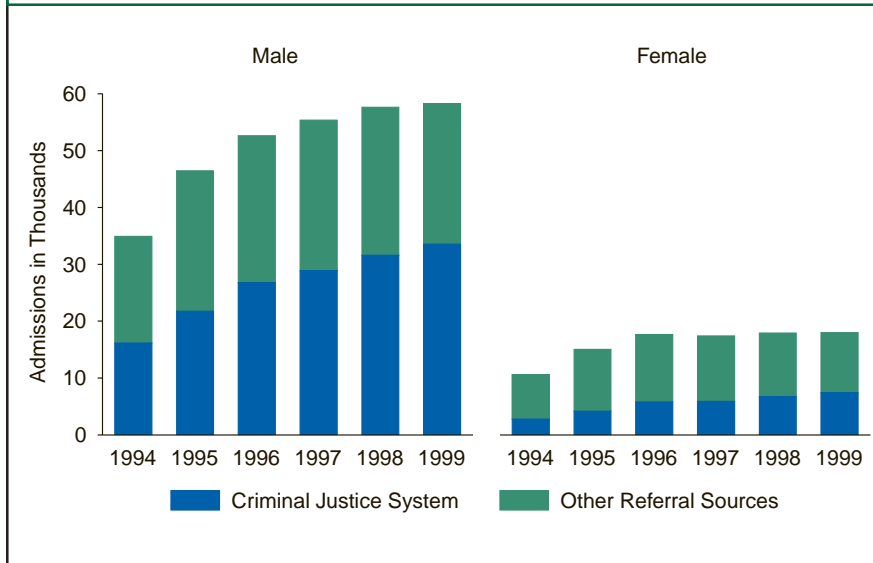
Among all adolescent marijuana admissions, there were three males for every female from 1994 to 1999. Among criminal justice referrals for marijuana abuse, the ratio was six males for every female in 1994. The ratio had declined to 4.5 to 1 by 1999 as more females were referred to treatment for marijuana abuse through the criminal justice system.

Referral Source by Age

Marijuana admissions for 12 to 14 year olds increased 56 percent

*Self-referral is the most common source for adolescent heroin admissions.

Figure 2. Number of Adolescent Marijuana Admissions, by Sex and Referral Source: 1994-1999



The Drug and Alcohol Services Information System (DASIS) is an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). One component of DASIS is the Treatment Episode Data Set (TEDS). TEDS is a compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. Information on treatment admissions are routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. Approximately 1.6 million records are included in TEDS each year. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

The DASIS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and RTI, Research Triangle Park, North Carolina.

Information and data for this issue are based on data reported to TEDS through April 16, 2001.

Access the latest TEDS reports at: www.DrugAbuseStatistics.SAMHSA.gov
 Access the latest TEDS public use files at: www.icpsr.umich.edu/SAMHDA/teds.html

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between 1994 and 1996, but decreased slightly (2 percent) from 1996 to 1999 (Figure 3). Marijuana admissions for 15 to 17 year olds increased by 54 percent between 1994 and 1996 but slowed to an 11 percent increase between 1996 and 1999. Criminal justice referrals among marijuana admissions for 12 to 14 year olds and 15 to 17 year olds have increased 21 and 27 percent, respectively, from 1996 to 1999.

The numbers of Hispanic and Black adolescent marijuana admissions increased by 73 percent each, while the number of White admissions increased by 60 percent. Criminal justice referrals among Hispanic adolescents increased by 129 percent compared with 26 percent for referrals from other sources. Among White adoles-

cents, criminal justice referrals increased by 119 percent compared with 26 percent from other sources. Black adolescents had the lowest percentage increase in criminal justice referrals for marijuana, 91 percent, while referrals from other sources for Black adolescents increased by 50 percent.

Referral Source by Race/Ethnicity

Adolescent marijuana admissions averaged 66 percent White, 21 percent Black, and 13 percent Hispanic between 1994 and 1999 (data not shown). Each racial/ethnic group exhibited the same pattern over that time period—increased numbers of marijuana admissions driven by an increase in treatment referrals through the criminal justice system.

Figure 3. Number of Adolescent Marijuana Admissions, by Age Group and Referral Source: 1994-1999

