

2015 NSDUH, Supporting Statement
Attachment F – Question & Answer Brochure

Answers to your questions

If you have more questions
about NSDUH, please call
1-800-848-4079
or visit our Web site at
<http://nsduhweb.rti.org>



For more information on SAMHSA or
RTI International, contact:

NSDUH National Study Director
SAMHSA
1 Choke Cherry Road
Room 2-1113
Rockville, MD 20857
www.samhsa.gov

NSDUH National Field Director
RTI International
3040 Cornwallis Road
Research Triangle Park, NC 27709
www.rti.org

National Survey on Drug Use and Health



Sponsored by the U.S. Department of Health and Human
Services and the Substance Abuse and Mental Health Services
Administration. Conducted by RTI International.

RTI International is a trade name of Research Triangle Institute.

What Is the National Survey on Drug Use and Health?

The National Survey on Drug Use and Health (NSDUH) provides up-to-date information on alcohol, tobacco, and drug use, mental health and other health-related issues in the United States. NSDUH is directed by the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services (DHHS). The study is being conducted by RTI International, a nonprofit research organization.

NSDUH began in 1971 and is conducted every year. This year almost 70,000 people from across the United States will be interviewed for this important study.

Information from NSDUH is used to support prevention and treatment programs, monitor substance use trends, estimate the need for treatment facilities and assist with the creation of government policy.



Answers to Your Important Questions about the National Survey on Drug Use and Health

Why Should I Participate?

You are important! Your household was one of only a few in this area selected for this study, and no other household or person can take your place.

Every person who is chosen and completes the full interview will receive \$30 in cash at the end of the interview in appreciation for their help.

If chosen for an interview, you will represent the residents of your community and help us gather important information that is needed to make sound policy decisions.

Your participation also provides vital information to researchers and local, state and federal agencies to design education, treatment and prevention programs and receive funding to support these efforts.

What if I Do Not Smoke, Drink or Use Drugs?

In order to know the percentage of people who smoke, drink or use drugs, we also need to know how many people do not.

The responses of people who do not use these substances are just as important as the responses of people who do.

While some questions ask about drug knowledge and experience, other questions ask about a number of health-related topics relevant for all people. You do not need to know anything about drugs to answer the questions.

How Was I Chosen?

Household addresses, not specific people, are randomly selected through scientific methods. Once a household has been selected, it cannot be replaced for any reason. This assures that NSDUH accurately represents the many different types of people in the United States.

A professional RTI interviewer will visit your household to ask several general questions that only take a few minutes to answer. Afterwards, one or possibly two members of your household may be asked to complete the full interview. It is possible that no one in your household will be chosen for the interview.



What Will Happen During the Interview?

An interviewer will conduct the interview with each selected person using a laptop computer. No prior computer skills are necessary.

Participants will answer most of the interview questions in private, entering their responses directly into the computer. For other questions, the interviewer will read the questions aloud and enter the participant's responses into the computer.

The interview takes about one hour to complete. Persons who complete the full interview will receive \$30 at the end of the interview as a token of our appreciation.

All information collected for this study will be kept confidential and used only for statistical purposes, as required by federal law – the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA).

What Is the Substance Abuse and Mental Health Services Administration?

SAMHSA is an agency in the U.S. Department of Health and Human Services (DHHS). SAMHSA was created to improve the lives of people with or at risk for mental and substance use disorders.

NSDUH is used to help this mission by gathering data on substance use, problems related to substance use, and mental health problems in the United States. The numbers of people who use various substances, or have problems related to substance use or mental health, are important for planning treatment and prevention services.

SAMHSA selects a qualified survey research organization to administer NSDUH.

RTI International, a nonprofit research organization, is under contract with SAMHSA to conduct NSDUH.

Your household has been chosen at random, but no one else can take your place. Your participation matters!

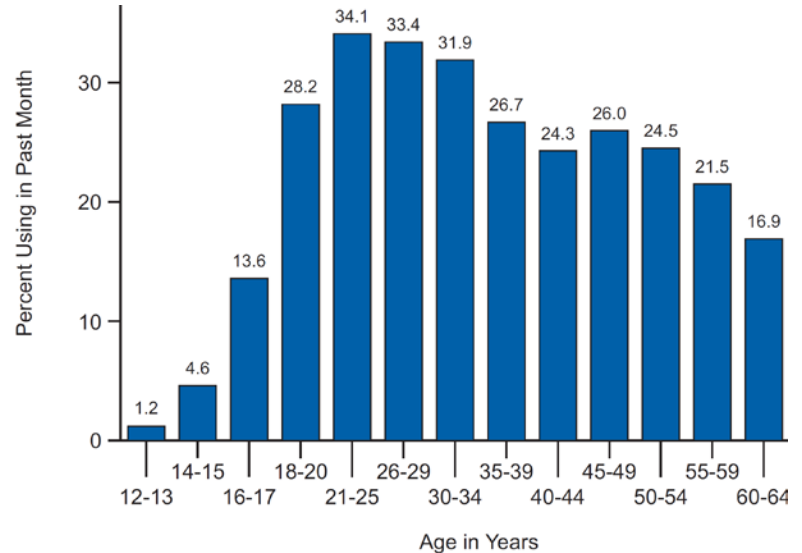
2015 NSDUH, Supporting Statement
Attachment V – NSDUH Highlights and
Newspaper Articles

SELECTED HIGHLIGHTS from the *2012 National Survey on Drug Use and Health*

Past Month Cigarette Use among Persons Aged 12 or Older,
by Age: 2012

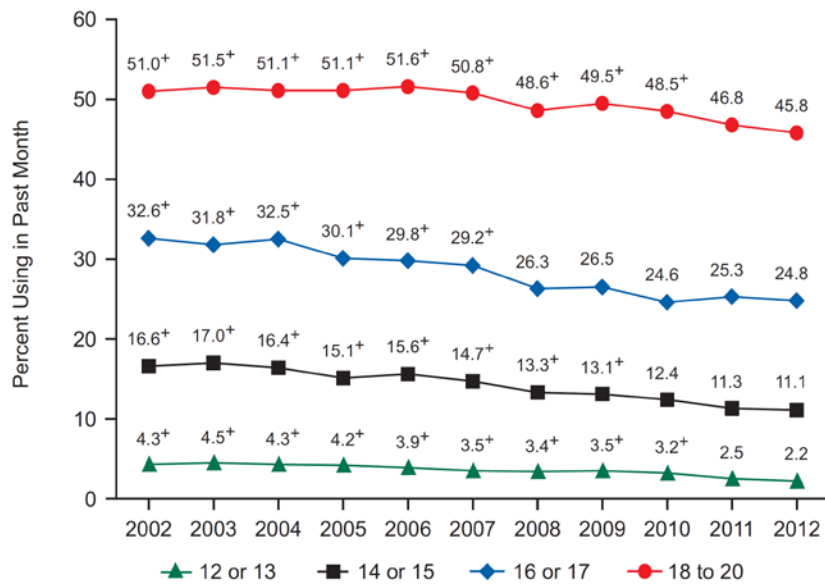
Tobacco Use

- An estimated 69.5 million Americans reported current use (during the past month) of a tobacco product in 2012, which is 26.7 percent of the population aged 12 and older. About 57.5 million (22.1 percent) smoked cigarettes.
- The graph to the right illustrates past month cigarette use among persons age 12 or older.



Alcohol Use

Current Alcohol Use among Persons Aged 12-20,
by Age: 2002-2012



Reference between this estimate and the 2012 estimate is statistically significant at the .05 level.

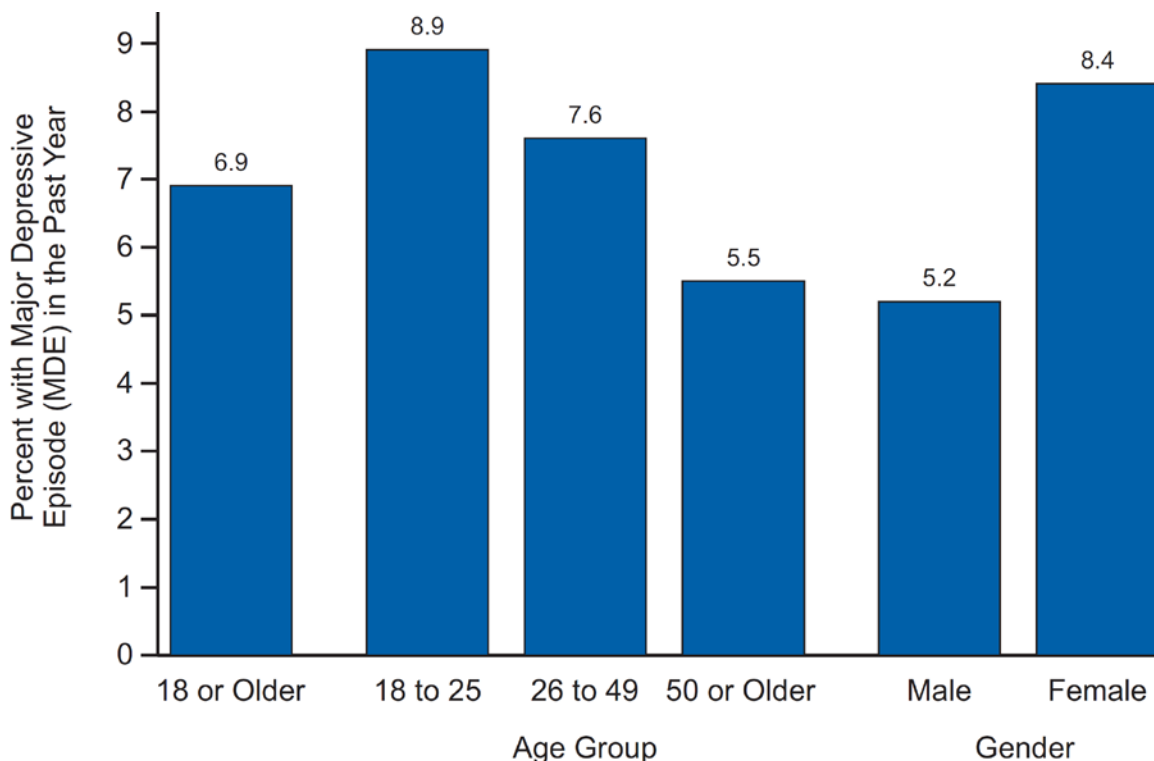
- Slightly more than half of all Americans age 12 or older, 52.1 percent or an estimated 135.5 million persons, were current drinkers in the 2012 survey, which is similar to the 133.4 million persons (51.8 percent) reported in 2011.
- Although consumption of alcoholic beverages is illegal for those under 21 years of age, 24.3 percent of this age group (9.3 million) were current drinkers in 2012. The graph on the left displays the current use of alcohol for 12–20 year olds from 2002 through 2012.

Illicit Drug Use

- An estimated 23.9 million Americans were current users of illicit drugs in 2012, meaning they used an illicit drug at least once during the 30 days prior to the interview. This estimate represents 9.2 percent of the population 12 years old or older.
- Marijuana is the most commonly used illicit drug, with an estimated 18.9 million current users, or 7.3 percent of the population 12 years old or older, similar to the 2011 rate of 7.0 percent. Similar to 2011, an estimated 1.6 million persons were current users of cocaine. In 2012, an estimated 6.8 million (2.6 percent) used prescription-type psychotherapeutic drugs nonmedically in the past month which is similar to the 2011 estimate of 2.4 percent.

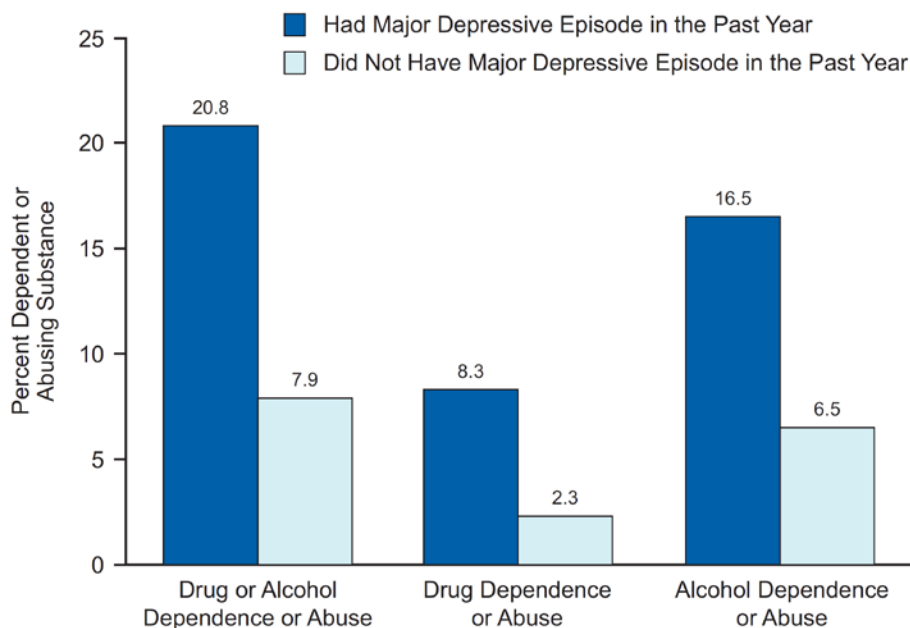
Mental Health

- In 2012, an estimated 16.0 million adults, or 6.9 percent of the population aged 18 or older, had at least one major depressive episode (MDE) in the past 12 months. Among adults, the percentage having MDE in the past year varied by age and gender, as shown in the graph below. Major Depressive Episode in the Past Year among Adults Aged 18 or Older, by Age and Gender: 2012



Substance Dependence or Abuse among Adults Aged 18 or Older, by Major Depressive Episode in the Past Year: 2012

- Persons with past year MDE were more likely than those without MDE to have used an illicit drug in the past year (28.5 vs. 14.8 percent).
- Similarly, substance dependence or abuse was more prevalent among persons with MDE than among those without MDE (20.8 vs. 7.9 percent), as shown in the graph to the right.



Recent articles about the **National Survey on Drug Use and Health**

From THE NEW YORK TIMES, February 5, 2013 (online)

People With Mental Illness More Likely to Be Smokers, Study Finds

By PAM BELLUCK

People with mental illness are 70 percent more likely to smoke cigarettes than people without mental illness, two federal health agencies reported Tuesday.

New data from the Centers for Disease Control and Prevention and the Substance Abuse and Mental Health Services Administration show that one of every three adults with mental illness smokes, compared with one in five adults without mental illness.

Adults with mental illness smoke about a third of all the cigarettes in the United States, and they smoke more cigarettes per month and are significantly less likely to quit than people without mental illness, the report said. There are nearly 46 million adults with mental illness in the United States, about a fifth of the population.

"Many people with mental illness are at greater risk of dying early from smoking than of dying from their mental health conditions," said Dr. Thomas R. Frieden, director of the Centers for Disease Control, during a press briefing.

The report is based on information from the National Survey on Drug Use and Health, which interviewed 138,000 adults in their homes from 2009 to 2011.

People were asked 14 questions to assess psychological distress and disability, and were deemed to have mental illness if their responses indicated they had a mental, behavior or emotional disorder in the past 12 months.

Those with substance abuse or developmental disorders were not considered people with mental illness. The report did not include patients in psychiatric hospitals or individuals serving in the military.

People who reported smoking all or part of a cigarette in the previous 30 days were counted as smokers.

The study found that smoking rates for people with mental illness were generally higher in states where overall smoking rates were high. Utah had the lowest rate of smoking among people with mental illness -- 18.1 percent -- while West Virginia had the highest rate, at 48.7 percent. Smoking among people with mental illness was higher among the poor and less educated, and among American Indians and Alaska Natives, although every ethnic group had significant percentages of smokers.

The study noted several possible reasons that smoking among the mentally ill has been and remains high, including marketing by the tobacco industry and the historical use of cigarettes as an incentive to improve behavior in psychiatric hospitals.

"There are some effects of nicotine which can mask some of the negative effects of mental illness," Dr. Frieden said. The study said that smoking can also make some medications less effective, which may then lead the person with mental illness to smoke more to quell symptoms.

And it said that people with mental illness, many of whom struggle to live a financially and socially stable life, may be less able to cope with withdrawal symptoms from quitting cigarettes.

While the study did not compare trends in smoking among people with mental illness over time, Dr. Frieden and Douglas Tipperman, lead public health adviser on tobacco prevention for the Substance Abuse and Mental Health Services Administration, cited indications that smoking rates for this population have not declined nearly as quickly as smoking in the general population. Dr. Frieden called the situation "a very serious health issue that needs more attention."

Mr. Tipperman said a recent survey in New York showed that smoking rates among people with mental illness had not changed significantly over the past decade.

Still, Mr. Tipperman said that surveys show that many people with mental illness want to quit smoking, and can quit successfully with the right approaches, which may include extra antismoking counseling or longer use of smoking cessation medications. His agency has been working to establish and encourage smoking cessation programs that work.

A version of this article appeared in print on February 6, 2013, on page A15 of the New York edition with the headline: More Smoking Found By Mentally Ill People.

Article available online at:

http://www.nytimes.com/2013/02/06/health/more-smoking-found-by-mentally-ill-people.html?_r=0

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From THE LOS ANGELES TIMES, September 9, 2013 (online)

Marijuana use on the rise among young adults, fifty-somethings

By Emily Alpert

The growing popularity of marijuana has propelled a rise in drug use among Americans, including those in their 50s and 60s, a recently released national survey shows.

Marijuana remains the most common drug, and it increased in popularity from 2007 to 2012, the National Survey on Drug Use and Health found. Rising marijuana use helped drive up drug use among young adults, more than a fifth of whom said they had used "illicit drugs" in the previous month. Almost 19% of adults ages 18 to 25 had recently used marijuana.

Drug use also rose among adults ages 50 to 64, the study found. The surge was especially strong among Americans in their late 50s, whose rates of illicit drug use grew from 1.9% up to 6.6% between 2002 and 2012. Researchers believe the increase is largely because baby boomers, who were more likely to use drugs than earlier generations, are aging into that group.

Marijuana use has increased as legalization wins more support from Americans, with a majority telling the Pew Research Center in a poll this year that the drug should be legal. Though marijuana use was on the rise, many other drugs have dwindled in use or stayed about the same: Cocaine was less common in 2012 than in 2006, when only 1% of Americans said they had used it in the last month. Less than 640,000 people said they had started using it in the last year, compared with 1 million new users a decade earlier.

Methamphetamine use fell slightly, while hallucinogens were used about as frequently as a decade earlier, the study showed. There was also little change in Americans using psychotherapeutic drugs for reasons other than those prescribed.

Continued on next page, *Marijuana use*

Recent articles about the **National Survey on Drug Use and Health**

From *THE LOS ANGELES TIMES*, September 9, 2013 (online)

Marijuana use on the rise among young adults, fifty-somethings

(Continued from front)

The new study also examined alcohol and tobacco use. Underage drinking fell between 2002 and 2012: Last year, less than a quarter of underage people said they drank alcohol in the last month, compared with 28.8% of underage people a decade earlier.

Smoking has also declined among teenagers, though a separate survey recently showed that electronic cigarettes had become increasingly popular with teens.

The annual survey includes about 70,000 teens and adults and is sponsored by the Substance Abuse and Mental Health Services Administration within the U.S. Department of Health and Human Services. Most of the questions are answered privately on a computer; in some instances an interviewer asks a question out loud and enters what the person says.

Article available online at:

<http://articles.latimes.com/2013/sep/09/science/la-sci-sn-drugs-marijuana-survey-20130909>

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From **NATIONAL PAIN** REPORT.COM September 5, 2013 (online)

Most Illegal Pain Meds Gotten from Friends or Relatives

By Richard Lenti

Over half of the prescription pain relievers used illicitly in 2012 were obtained from a friend or relative for free, according to a new federal survey of drug use in the United States. Even the painkillers that were bought were twice as likely to be purchased from a friend or relative than a drug dealer.

The report by the Substance Abuse and Mental Health Services Administration (SAMHSA) also found that binge drinking and the illegal use of prescription drugs by young Americans continues to decline, but the use of marijuana and heroin is increasing.

"These findings show that while we have made progress in preventing some aspects of substance abuse we must redouble our efforts to reduce and eliminate all forms of it throughout our nation," said Pamela Hyde, SAMHSA administrator.

While the rate (5.3%) of nonmedical use of prescription drugs by young adults aged 18 to 25 was similar to rates in 2010 and 2011, it was lower than in 2009 (6.4%). Binge drinking among teens was also down.

Still, the government reports that nearly one in ten teens admitted using an illicit drug during the month prior to being surveyed. And drug diversion remains a serious problem, especially with pain relievers.

Among people aged 12 or older who used pain relievers illicitly in the last 12 months, the survey found:

- 54% obtained them from a friend or relative for free
- 11% bought them from a friend or relative
- 4% bought them from a drug dealer or stranger
- 20% obtained them through a prescription from a doctor

The statistics are no surprise to Charlie Cichon, executive director of the National Association of Drug Diversion Investigators, a non-profit that educates and trains health care providers and law enforcement agencies about drug diversion.

"They get it from a friend. They're not purchasing that product from someone in the bad part of town. And that friend probably got it from the medicine cabinet," Cichon told National Pain Report during PAINWeek, a national conference in Las Vegas attended by 2,000 practitioners in the field of pain management.

Cichon says the diverted pain medication is often leftover from a surgery or illness. Rather than being thrown out or disposed of, the unused drugs could sit in a medicine cabinet for years - becoming a tempting target for friends, family members or neighbors who ask to use the bathroom.

Cichon says physicians need to be more aware of how pain relievers are being diverted. In addition to advising patients how and when to take pain medication, he says doctors should be telling them how to store and dispose of unused pills.

"I really don't think the physicians prescribing it legitimately know that this 30 or 60 count pill bottle has this dollar amount put on it, if it can be used illegally. Some of these bottles can go for anywhere from \$300 to \$2,000," said Cichon.

While the street demand for pain relievers is strong, SAMHSA researchers say marijuana remains the drug of choice, with 7.3% of Americans using pot in 2012. That's an increase of 1.5% in five years. Marijuana use rose in nearly every age group in that same period, but fell slightly in 2012 among those aged 12 to 17.

The use of heroin also shows a resurgence, with the number of people 12 and older taking the drug nearly doubling from 373,000 in 2007 to 669,000 in 2012.

Another recent SAMHSA study found a "strong association" between the abuse of painkillers and heroin. Abusers of pain medication are 19 times more likely to try heroin than non-abusers. About 3.6% of the people who abused pain relievers tried heroin within five years.

The study also found that many Americans who need treatment for a substance abuse are not getting any. An estimated 23 million Americans needed treatment for abusing drugs or alcohol in 2012, but only 2.5 million received it in a specialized treatment setting.

Researchers, however, were able to find in a silver lining in some of the statistics. Tobacco use among teens under 18 years of age fell from 15% in 2002 to 8.6% in 2012. And the number of young people with substance dependence or abuse in the 12 to 17 age group dropped from nearly 9% to about 6% over the same period.

"For the first time in a decade, we are seeing real and significant reductions in the abuse of prescription drugs in America," said Gil Kerlikowske, Director of the Office of National Drug Control Policy. "Expanding prevention, treatment, and support for people in recovery for substance use disorders will be our guide as we work to address other emerging challenges, including the recent uptick in heroin use shown in this survey."

Article available online at:

<http://americannewsreport.com/nationalpainreport/illegal-pain-meds-gotten-friends-relatives-8821554.html>

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