

2018 National Survey on Drug Use and Health: Veterans

Elinore F. McCance-Katz, MD, PhD

Assistant Secretary for Mental Health and Substance Use
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services



SAMHSA
Substance Abuse and Mental Health
Services Administration

National Survey on Drug Use and Health (NSDUH)

- NSDUH is a comprehensive household interview survey of substance use, substance use disorders, mental health, and the receipt of treatment services for these disorders in the United States.
- NSDUH is collected face-to-face by field interviewers who read less sensitive questions to respondents and transition respondents to audio computer assisted self-interviewing for sensitive items.
- NSDUH covers the civilian, noninstitutionalized population, aged 12 or older:
 - Includes: Households, college dorms, homeless in shelters, civilians on military bases
 - Excludes: Active military, long-term hospital residents, prison populations, homeless not in shelters
- Sample includes all 50 states and DC
- Approximately 67,500 persons are interviewed annually
- Data collected from January to December

How Do We Use NSDUH?

- Provides a window into the state of substance use and mental health issues in the United States
- Helps to guide policy directions:
 - problem substances
 - prevalence of mental illness
 - intersection of substance use and mental health issues
 - provides insights that can be studied in the context of data from other agencies to help in decision-making about what types of resources are needed and where resources should be directed

NSDUH 2017 Highlights

- Opioids epidemic:
 - New users of heroin significantly decreased relative to 2016
 - Significant decreases in pain reliever misuse were observed for all ages
 - Downward trend in heroin users
 - Estimated 2.1M with opioid use disorder
- Marijuana:
 - Significant increases in use by young adults (18-25 y.o.): past month and daily/near daily use; with significant increases in use by young adult women
 - Pregnant women using substances in greater numbers including significant increases in daily or near daily marijuana use
 - Frequent marijuana use was associated with opioid misuse, heavy alcohol use, and depression in youth 12-17 and young adults 18-25
- Young adults had increasing rates of serious mental illness, major depression, and suicidality
- Co-occurring substance use and mental disorders are common
- Major gaps in treatment received by affected individuals

SAMHSA's Response to 2016-17 NSDUH Findings

- **2018: Launch of new approach to technical assistance and training**
- **Previous focus on technical assistance to grantees expanded to national approach**
 - ***Establishment of Clinical Support System for Serious Mental Illness***
 - National practitioner training efforts
 - Focus on appropriate use and monitoring of psychotropic medications
 - Use of clozapine in treatment refractory schizophrenia
 - Assisted outpatient treatment
 - ***Establishment of a regional system of Technology Transfer Centers throughout the U.S.***
 - Substance Abuse Prevention Technology Transfer Centers
 - Addiction Technology Transfer Centers
 - Mental Health Technology Transfer Centers with supplements for school-based services
 - Training and technical assistance tailored to needs of HHS regions
 - Native American/Alaska Native, Hispanic/Latino focus centers
 - ***Establishment of new national training/technical assistance programs***
 - State Targeted Response/State Opioid Response TA/T Program-over 1000 requests met
 - Privacy Technology Transfer Center addressing confidentiality and information sharing related to HIPAA and 42CFR
 - Eating Disorders Technology Transfer Center

SAMHSA's Response to NSDUH Findings

- Established PCSS-Universities to embed DATA waiver training in pre-graduate education for physicians, nurse practitioners and physician assistants
- Expanded training and technical assistance on opioids issues in rural America through supplements to USDA Cooperative Extension programs
- Re-established the Drug Abuse Warning Network (DAWN)
- Expanded the Suicide Prevention Lifeline network
- Public targeted messaging based on areas of concern identified in NSDUH: marijuana, methamphetamine, suicide prevention

Mental Illness and Substance Use Disorders among Veterans

PAST YEAR, 2018 NSDUH, Veteran 18+

Among Veterans with a substance use disorder:

- 1 IN 4 (26.7% or 300,000)** struggled with illicit drugs
- 4 IN 5 (80.2% or 899,000)** struggled with alcohol use
- 1 IN 13 (7.0% or 78,000)** struggled with illicit drugs and alcohol

Among Veterans with a mental illness:

1 IN 4 (24.7% or 750,000) had a serious mental illness

5.3%
(1.1 MILLION)
People aged 18
or older had a
substance use
disorder (SUD)

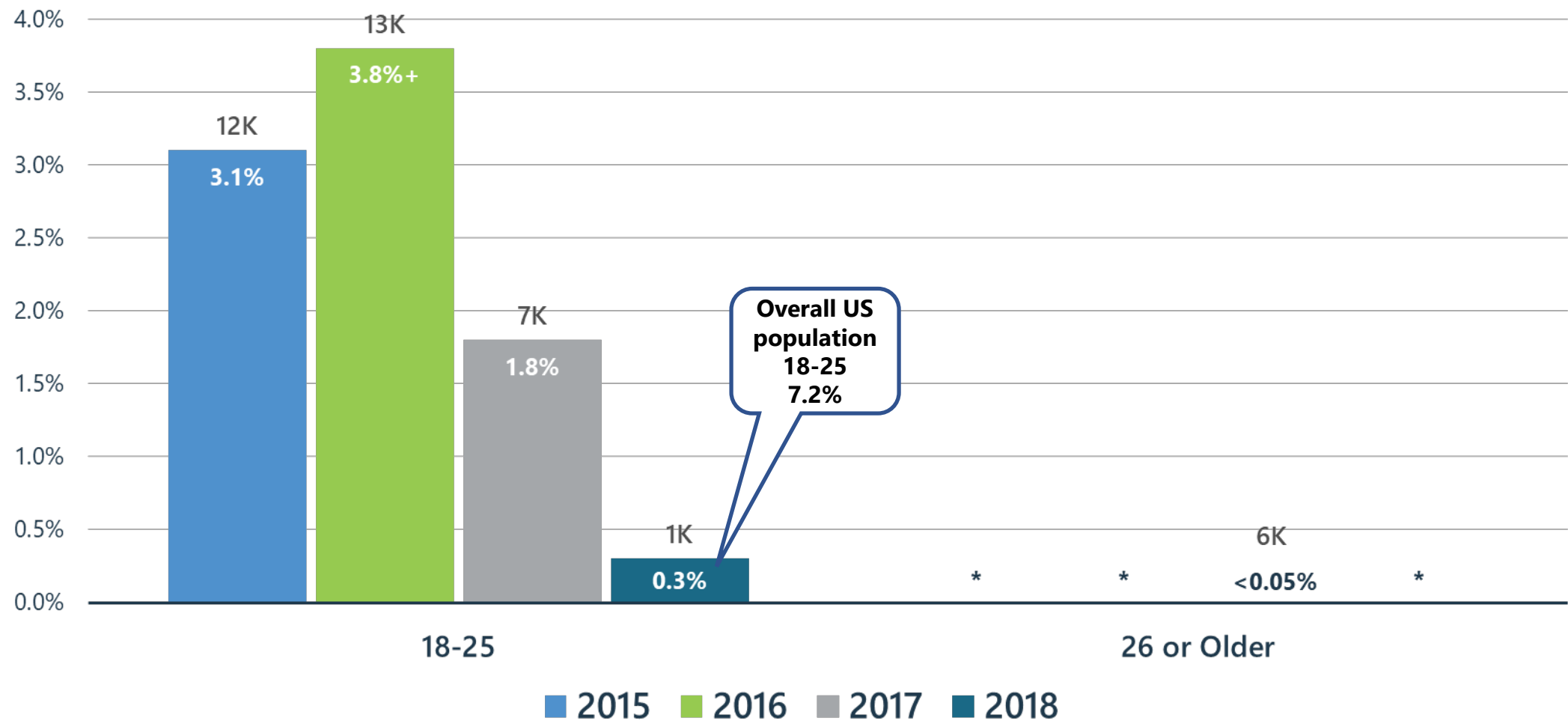
2.2%
(468,000)
People 18+ had
BOTH an SUD and
a mental illness

14.4%
(3.0 MILLION)
People aged 18
or older had a
mental illness

In 2018, **3.7M** Veterans had a mental and/or substance use disorder.

Alcohol Initiates among Veterans

PAST YEAR, 2015-2018 NSDUH, Veteran 18+

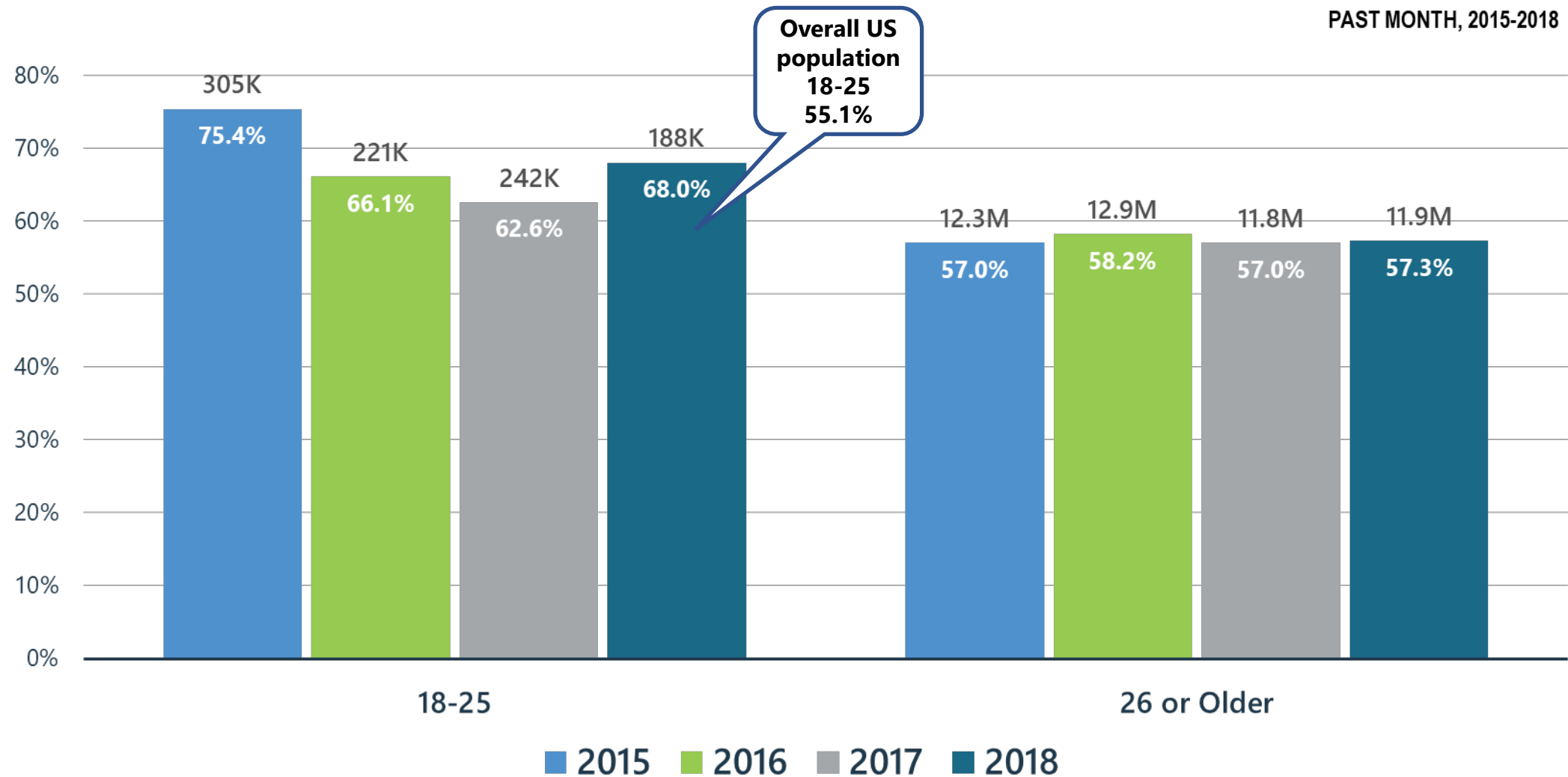


* Estimate not shown due to low precision.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Alcohol Use among Veterans

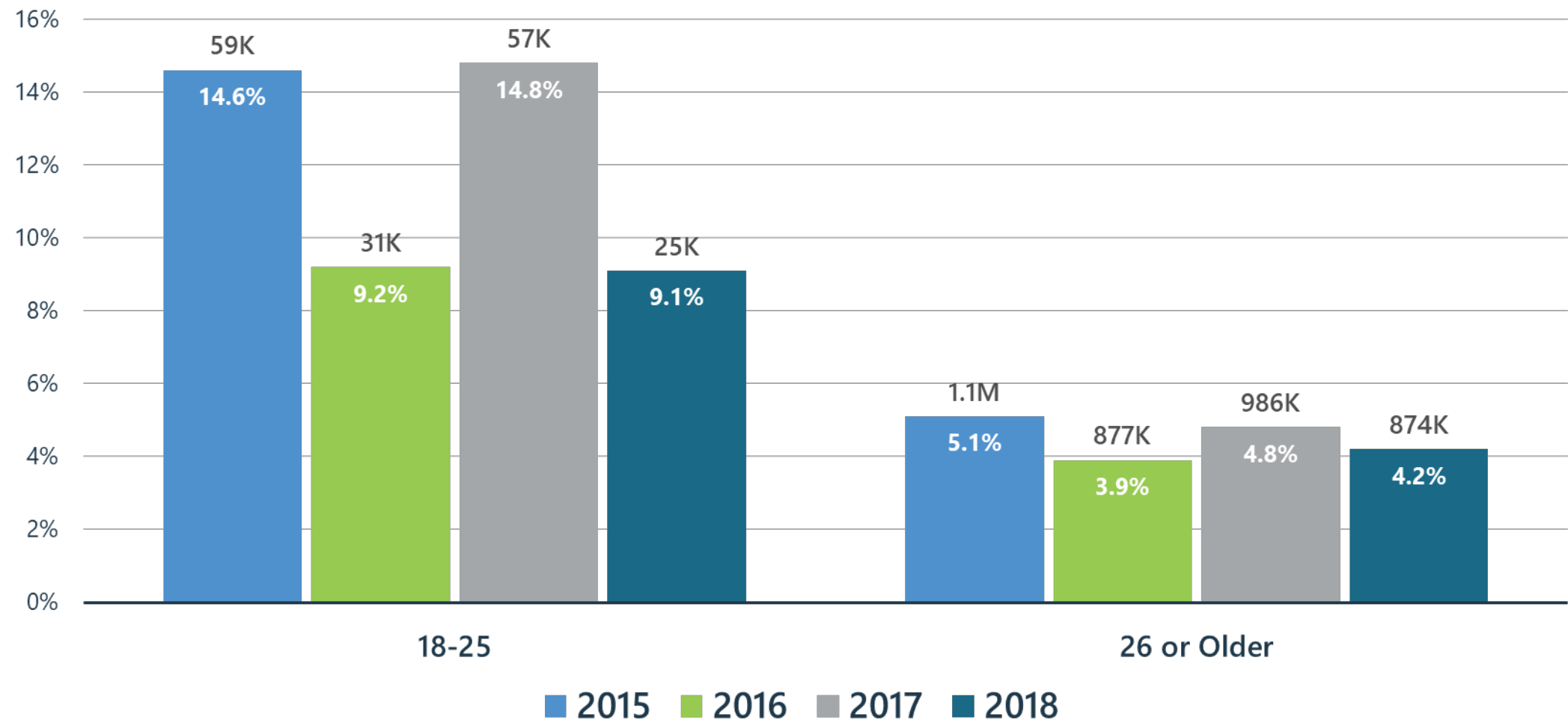
PAST MONTH, 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Alcohol Use Disorder among Veterans

PAST YEAR, 2015-2018 NSDUH, Veteran 18+

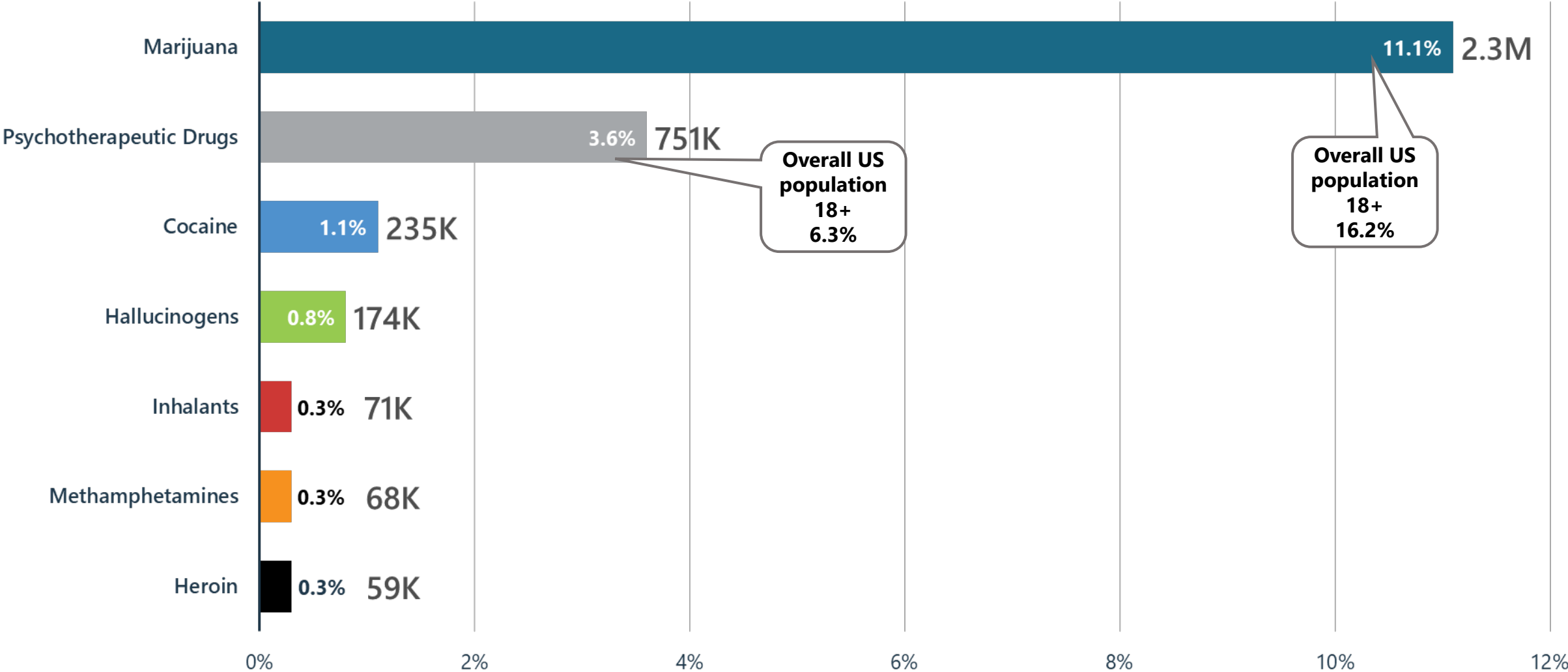


No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Summary: Alcohol Use in 2018

- Significant decrease in initiation of alcohol use among veteran adults aged 18-25 between 2016 and 2018
- No significant changes in alcohol use and use disorder among veterans between 2015 and 2018
- **SAMHSA efforts on reductions in alcohol use in children/youth/transition age youth:**
- CSAP DFC program prioritizes alcohol use and has reported a 27% reduction in use in middle-school and a 23% reduction in use by high school students
- SAMHSA Prevention Technology Transfer Centers produce resources and materials related to alcohol misuse prevention
- CSAP 'Talk They Hear You' focuses on underage drinking
- CSAP requires Partnerships for Success grantees to emphasize underage drinking prevention
- CSAT has promoted SBIRT for alcohol use in all programs including CJ, PPW, adolescent treatment, HIV and homeless programs
- CSAT has funded SBIRT training in medical residencies and other healthcare practitioner programs which screen for hazardous alcohol use and use disorders

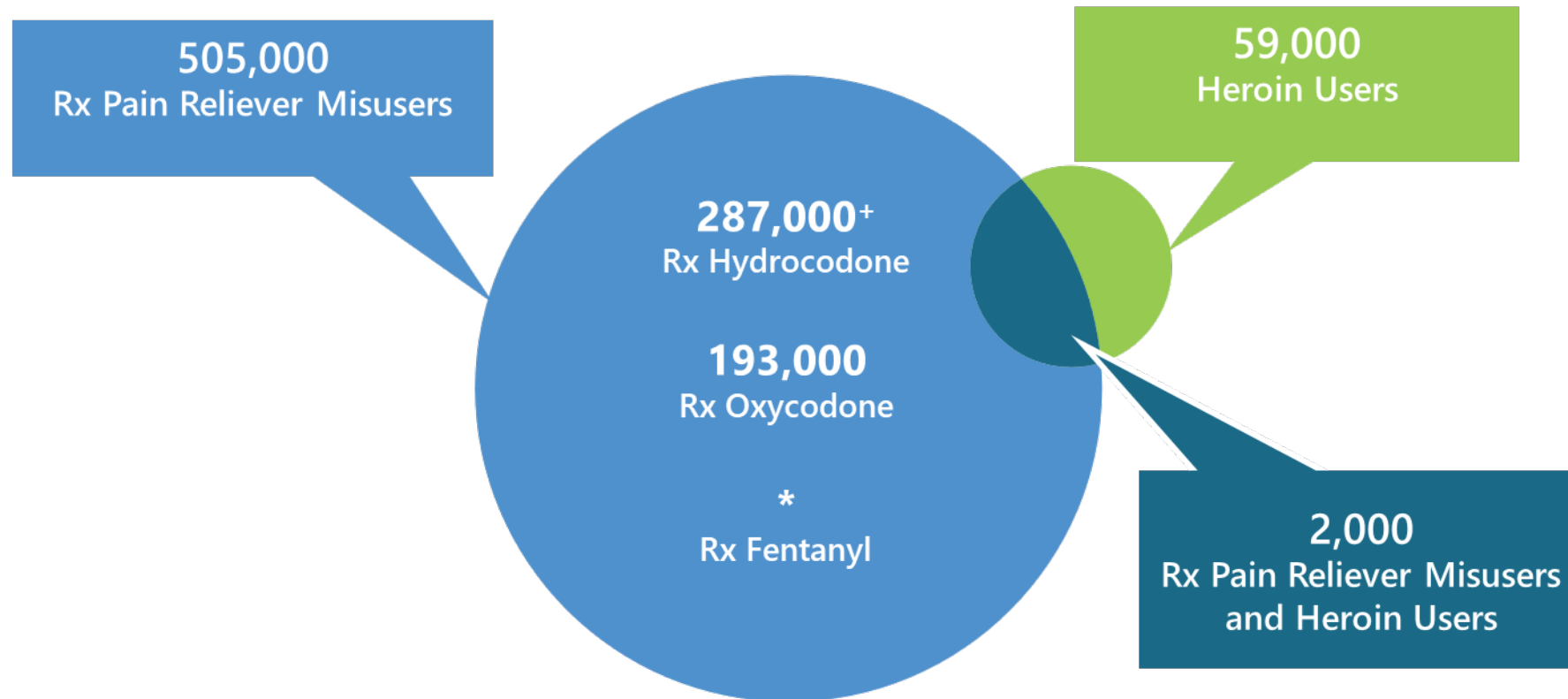
Illicit Drug Use among Veterans: Marijuana Most Used Drug



Prescription Pain Reliever Misuse among Veterans

PAST YEAR, 2018 NSDUH, Veteran 18+

562,000 VETERANS WITH OPIOID MISUSE (2.7% OF TOTAL POPULATION)



* Estimate not shown due to low precision.

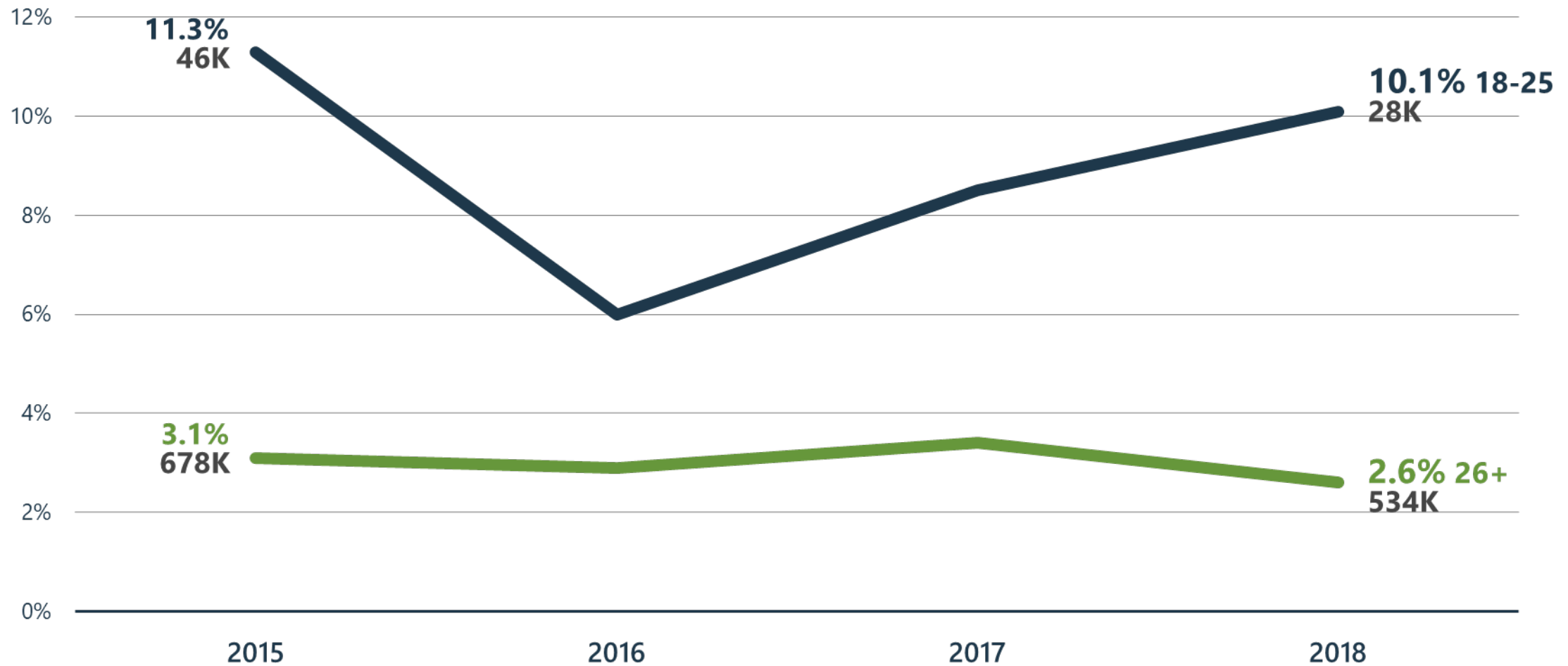
Rx = prescription.

Opioid misuse is defined as heroin use or prescription pain reliever misuse.

+ Difference between this estimate and the 2017 estimate is statistically significant at the .05 level.

Opioid Misuse among Veterans

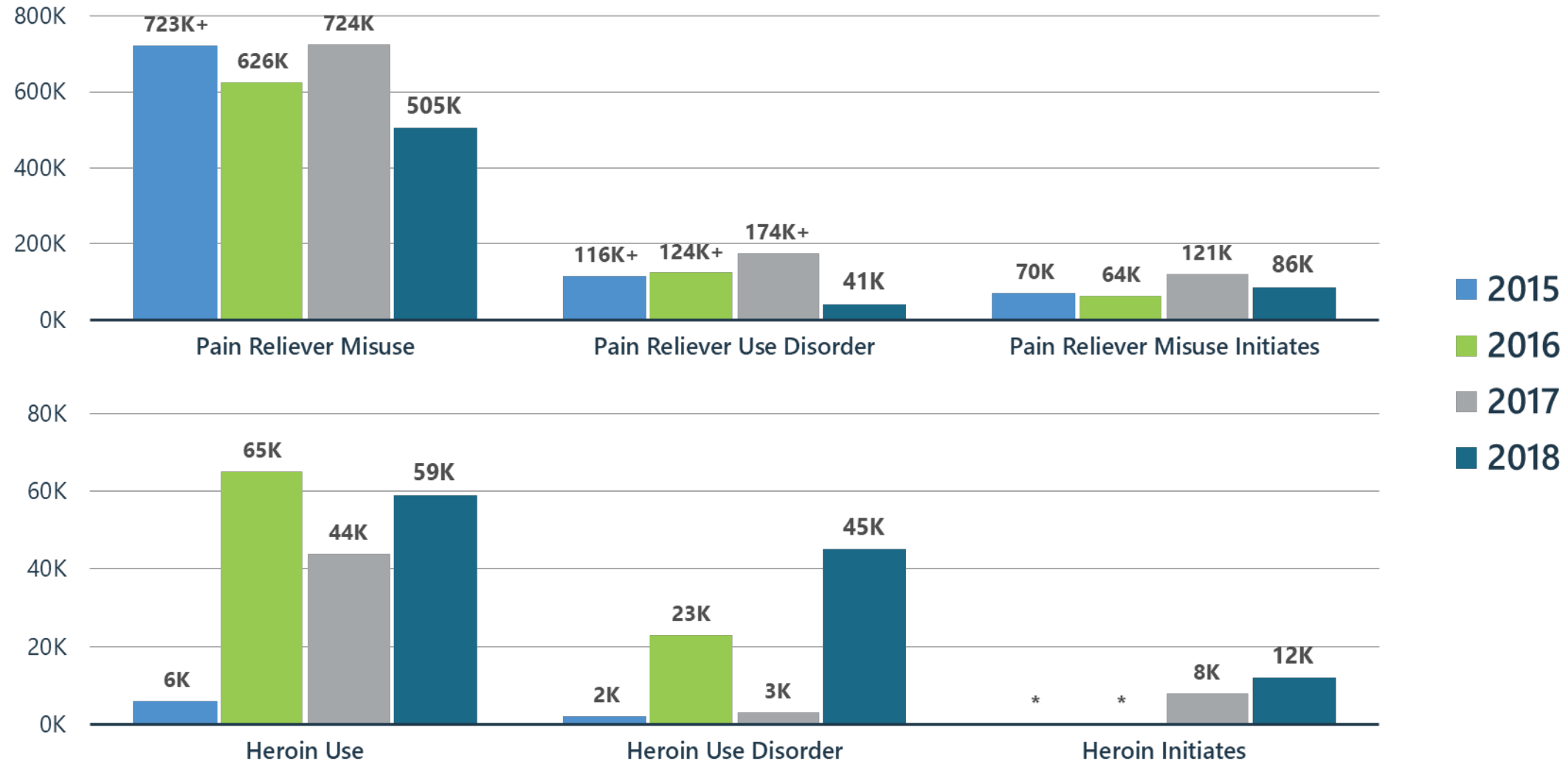
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Prescription Pain Reliever Misuse and Heroin Use among Veterans

PAST YEAR, 2015-2018 NSDUH, Veteran 18+

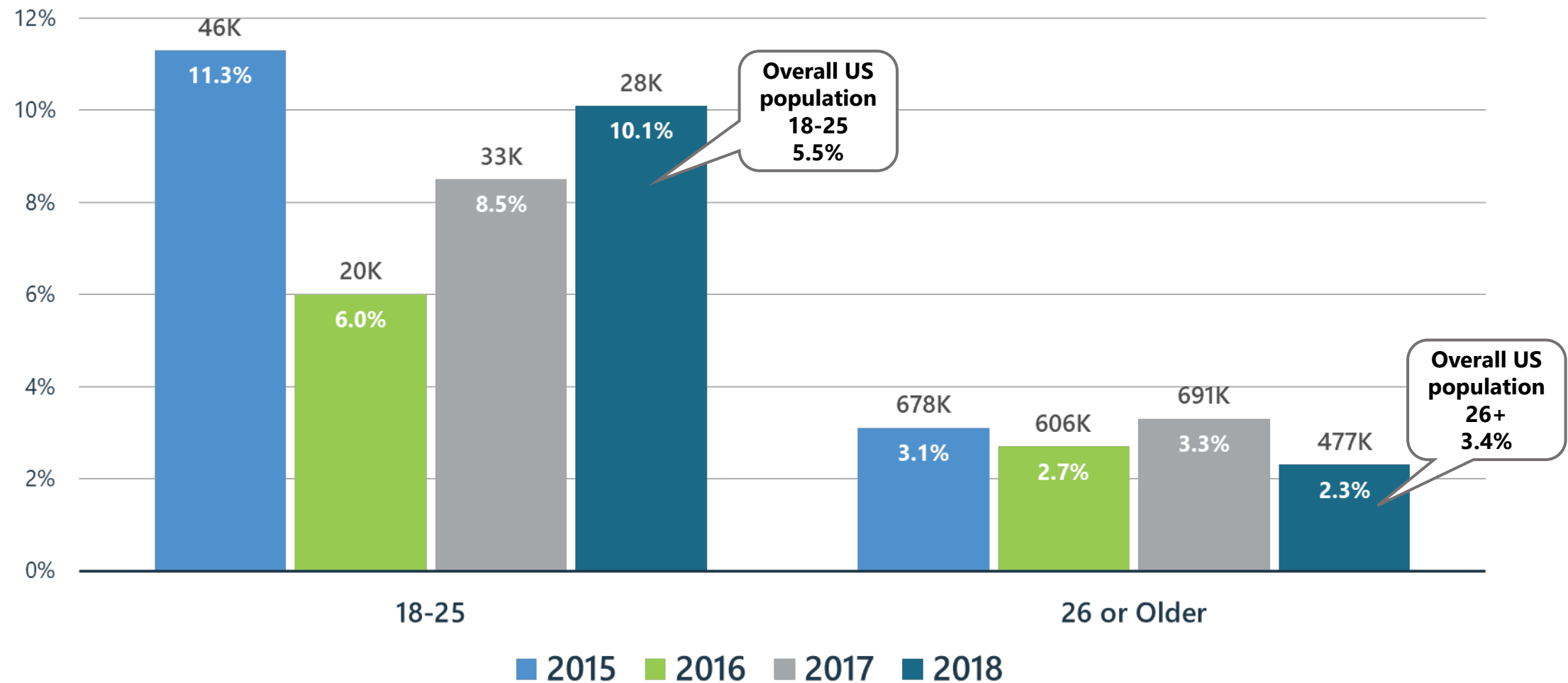


* Estimate not shown due to low precision.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Prescription Pain Reliever Misuse among Veterans

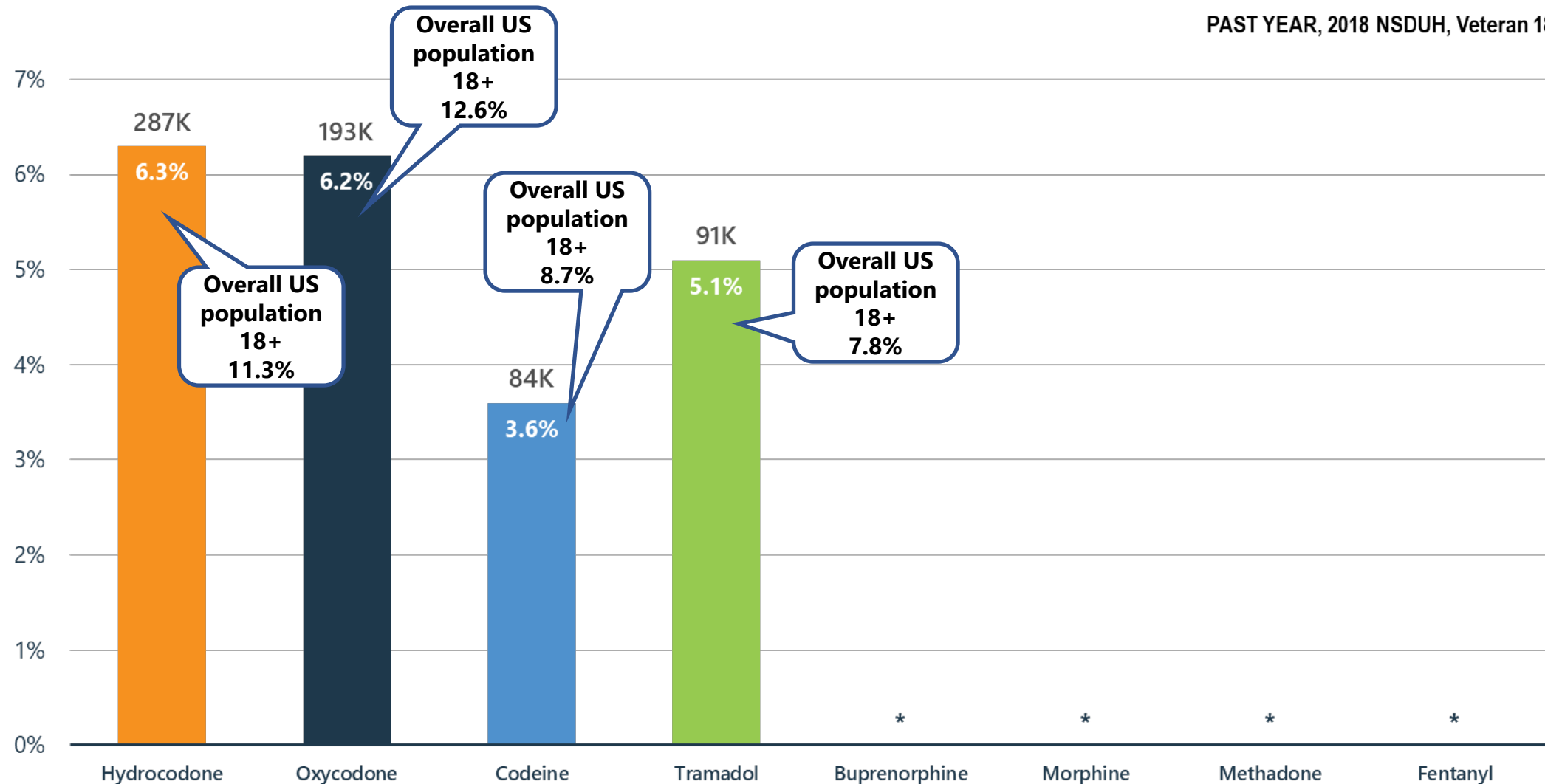
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Misuse of Prescription Opioid Subtypes among Veterans

PAST YEAR, 2018 NSDUH, Veteran 18+ SUBTYPE USERS

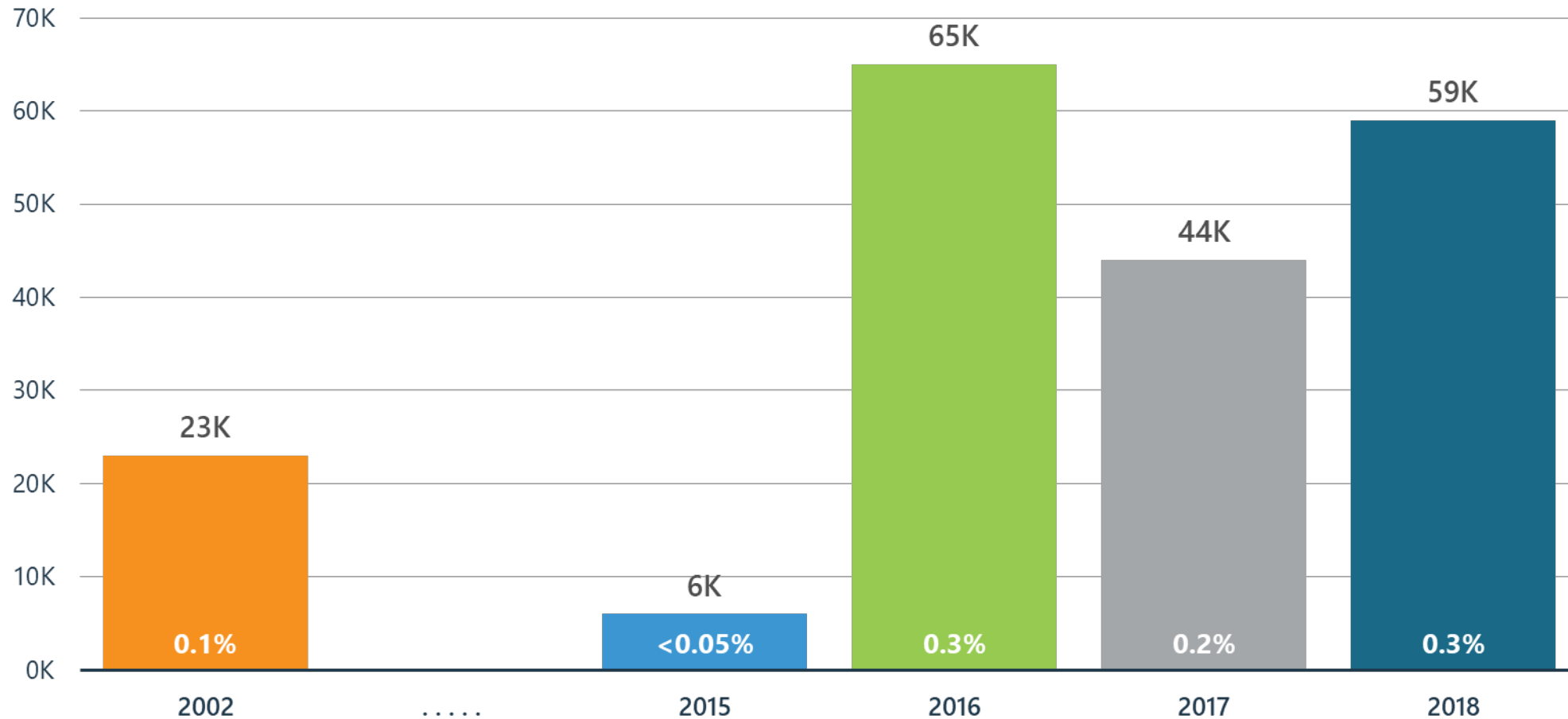


* Estimate not shown due to low precision.

Note: This table shows misuse among users. For example, 6.3 percent of veteran hydrocodone past year users have misused hydrocodone in the past year.

Heroin Use among Veterans

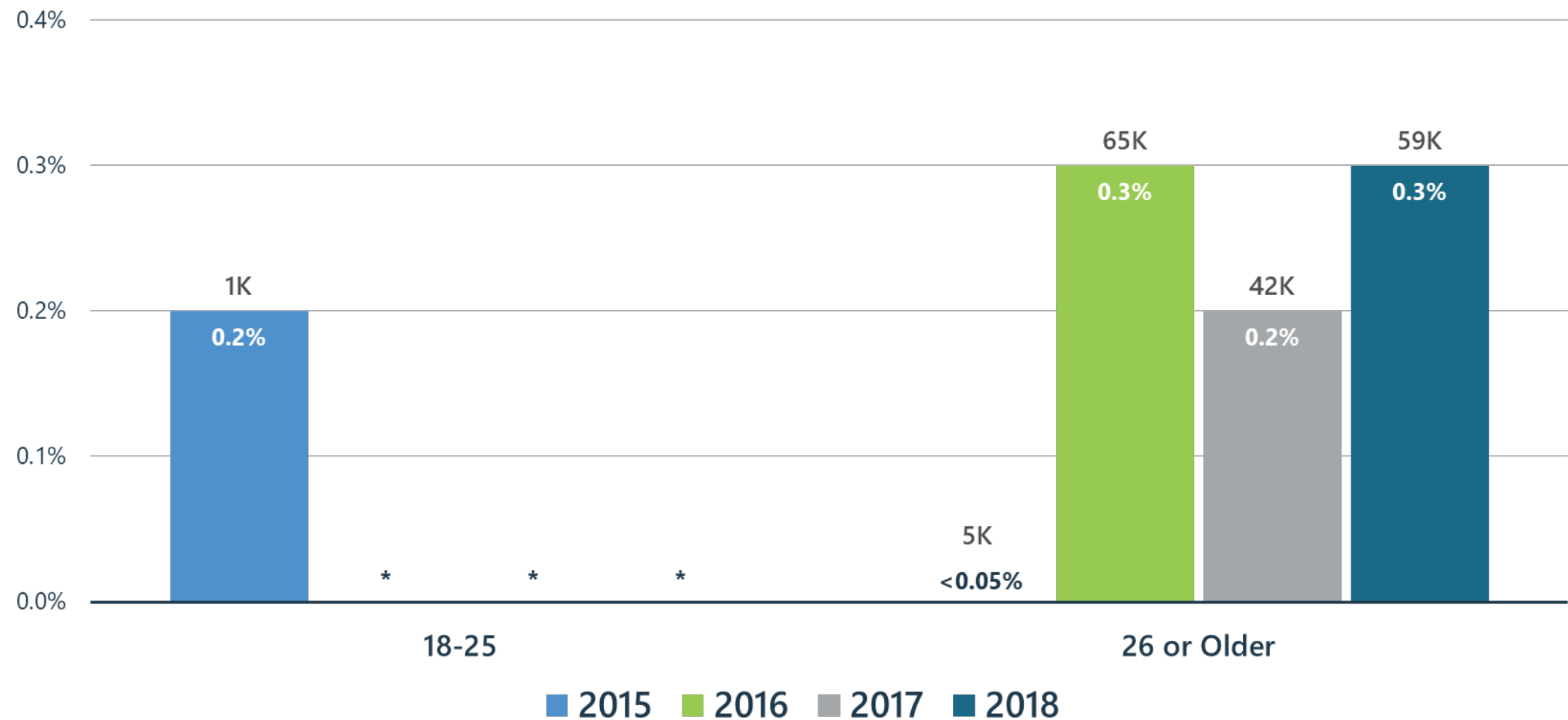
PAST YEAR, 2002 AND 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Heroin Use among Veterans

PAST YEAR, 2015-2018 NSDUH, Veteran 18+

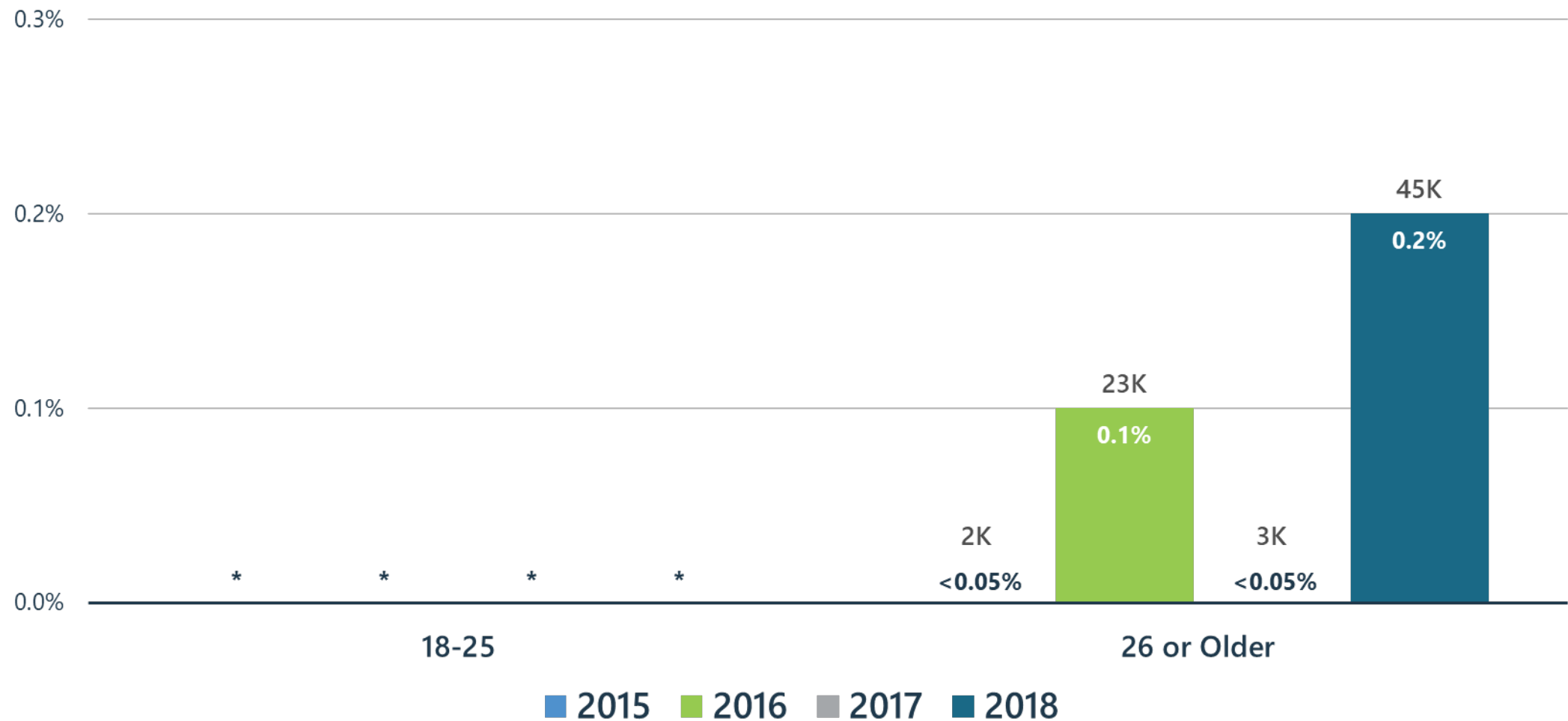


* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Heroin-Related Opioid Use Disorder among Veterans

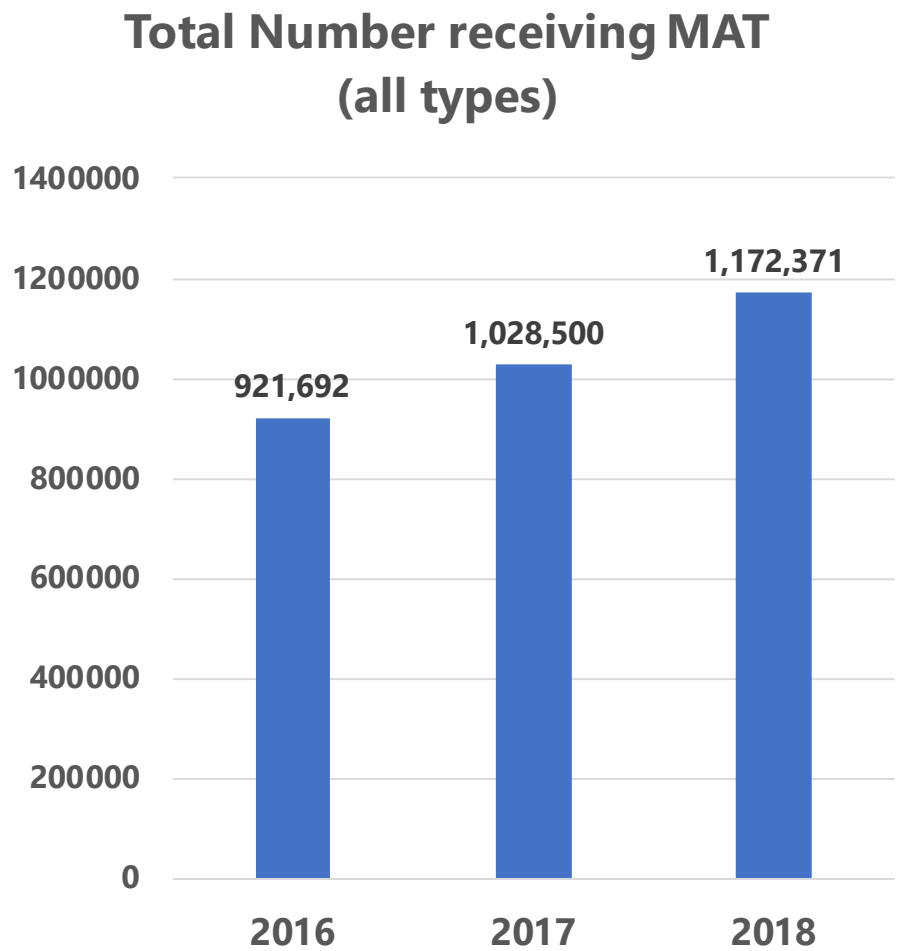
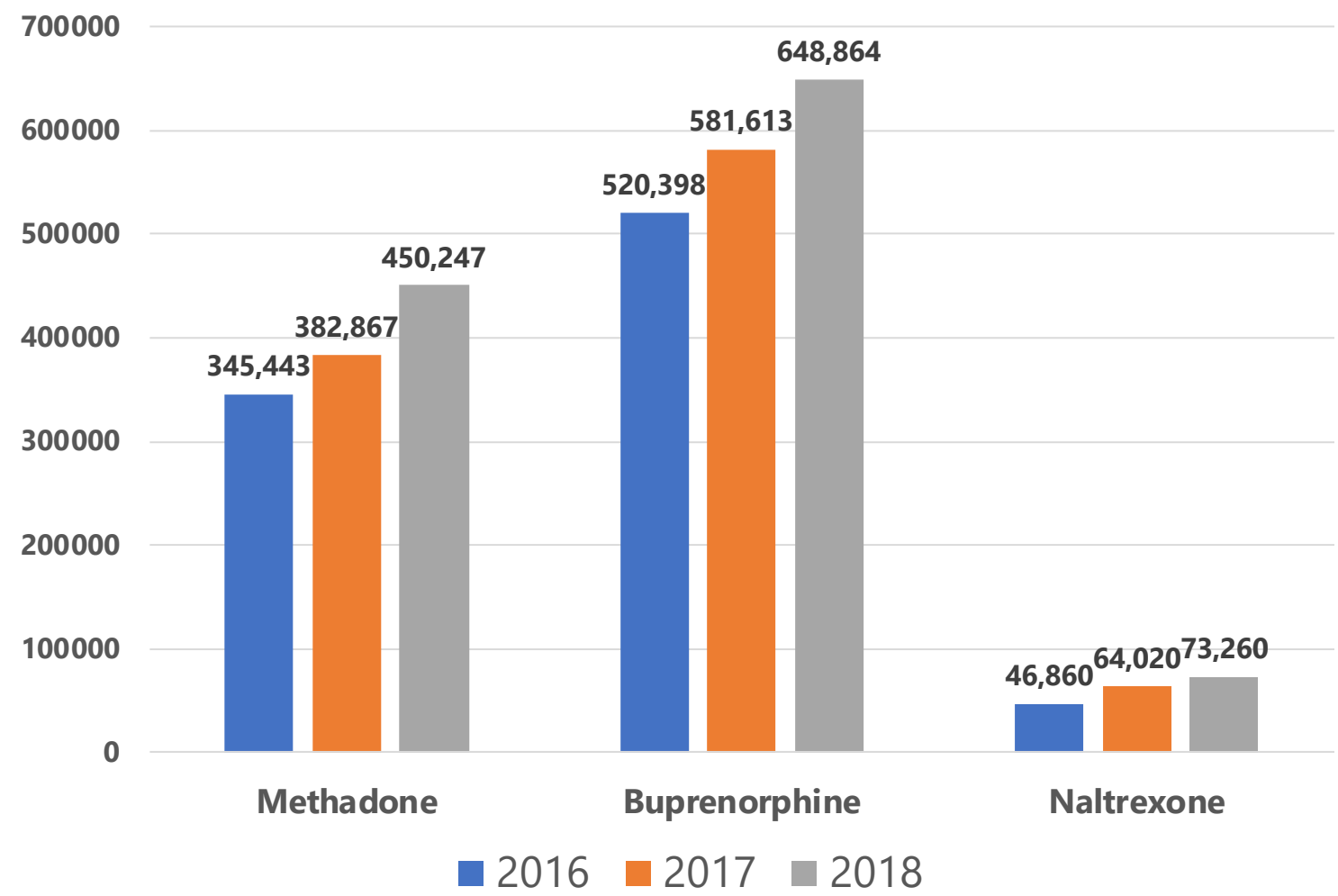
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Treatment Gains: Number of Individuals Receiving Pharmacotherapy for Opioid Use Disorder (MAT)



Note: Estimates do not represent Veterans and are not based on NSDUH.

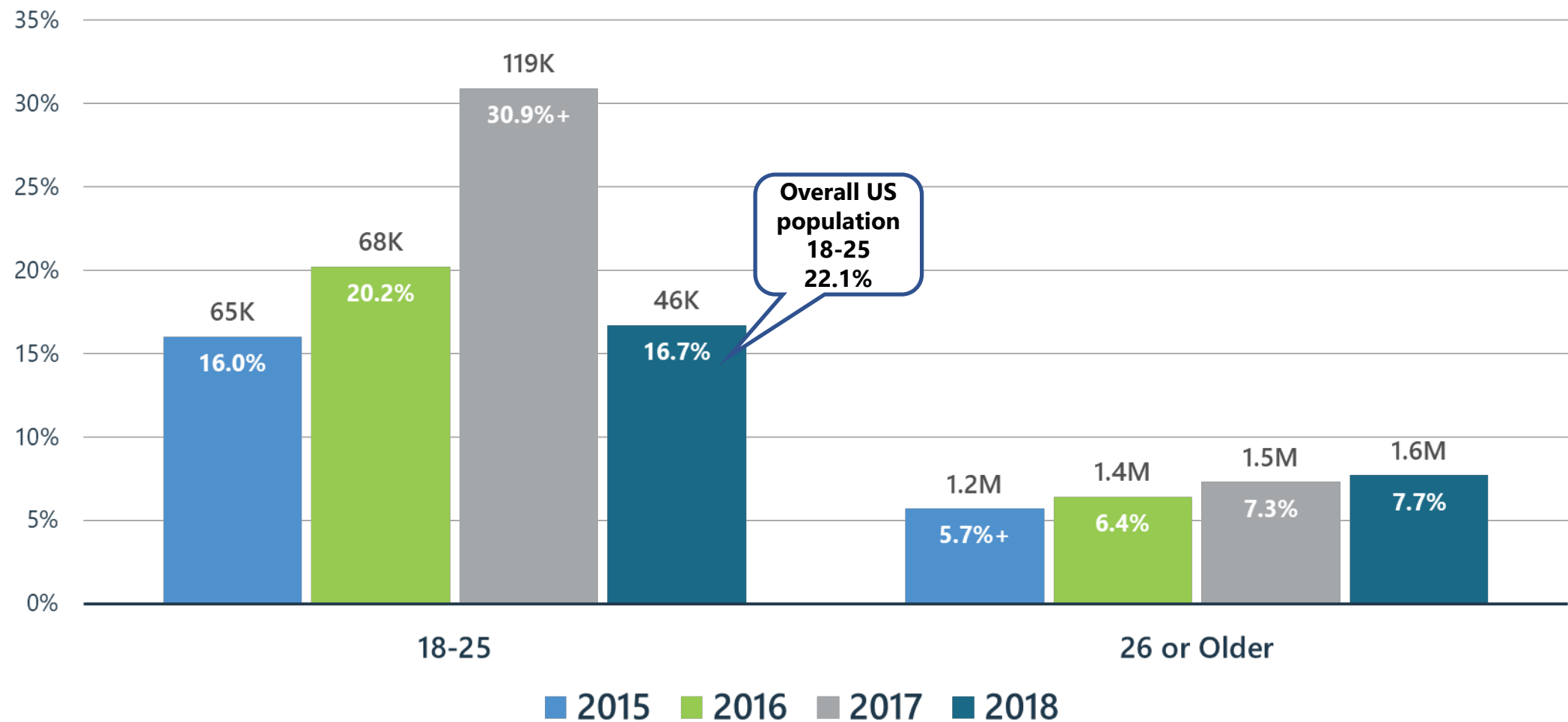
Summary: Opioid Misuse and Use Disorder in the United States in 2018

- Significant decreases in prescription opioid misuse and use disorder among veterans aged 18+ between 2015 and 2018.
- Among veterans using prescription opioids, hydrocodone was the subtype that was most likely to be misused in 2018.

Other Illicit Substances

Marijuana Use among Veterans

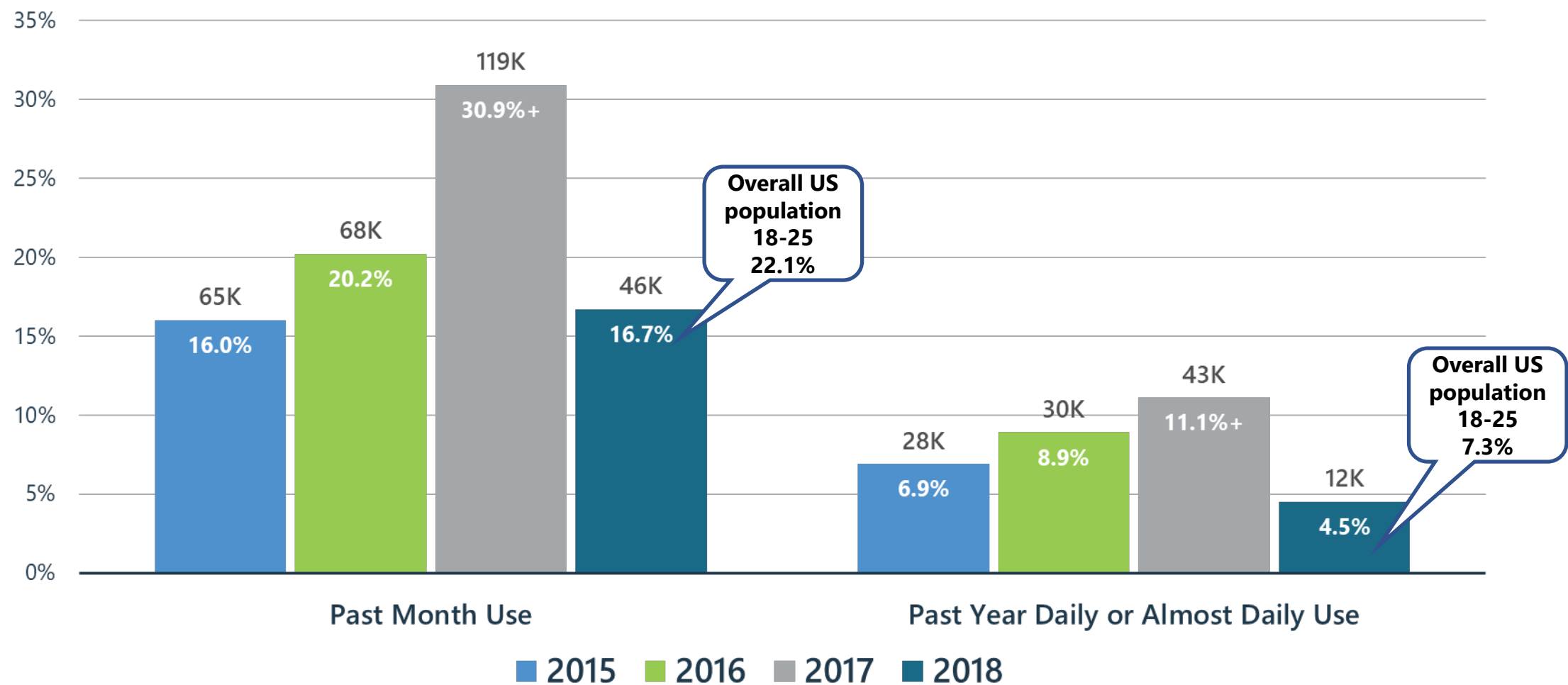
PAST MONTH, 2015-2018 NSDUH, Veteran 18+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Marijuana Use among Young Adult Veterans (18-25 y.o.)

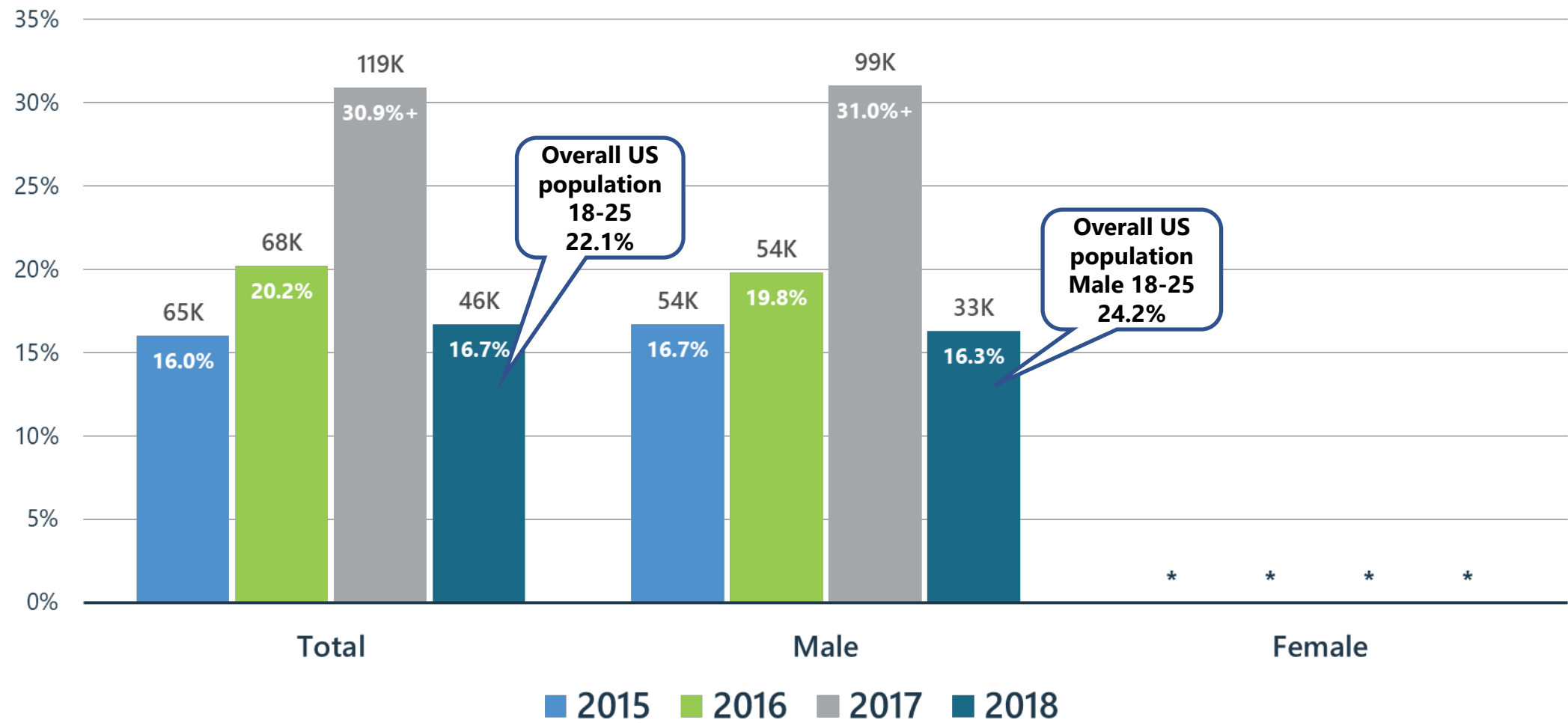
PAST MONTH/YEAR, 2015-2018 NSDUH, Veteran 18-25



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Marijuana Use among Young Adult Veteran Men and Women (18-25 y.o.)

PAST MONTH, 2015-2018 NSDUH, Veteran 18-25

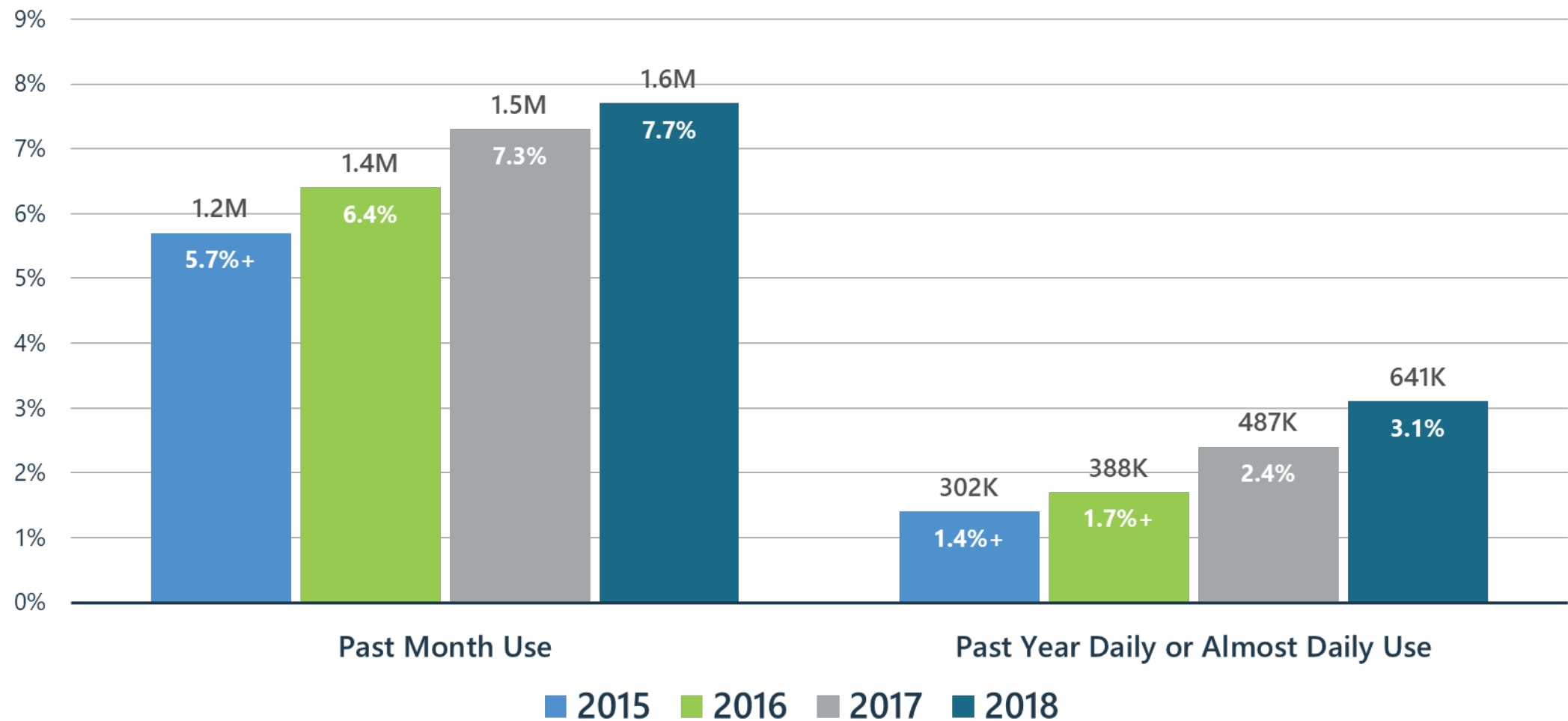


* Estimate not shown due to low precision.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Significant Increase in Marijuana Use among Veterans Age 26+

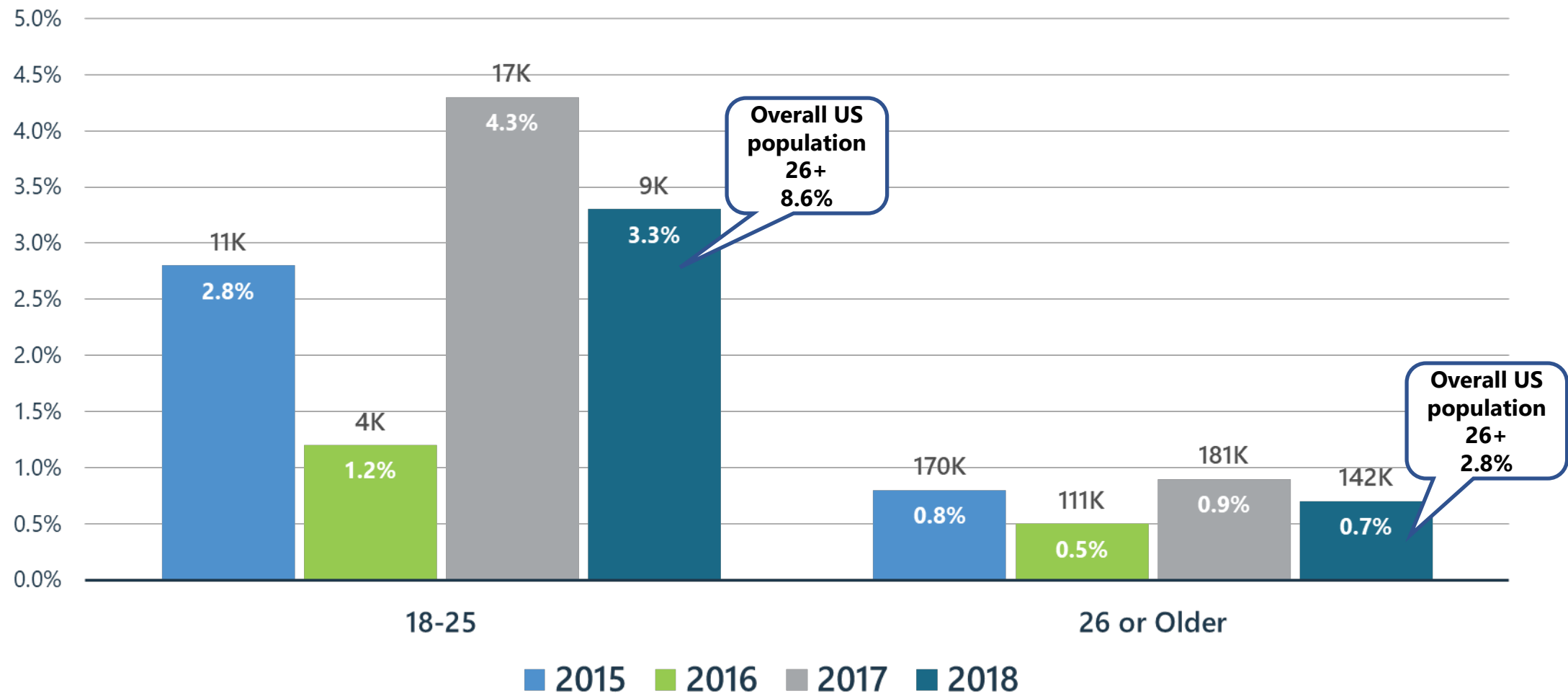
PAST MONTH/YEAR, 2015-2018 NSDUH, Veteran 26+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Marijuana Use Disorder among Veterans

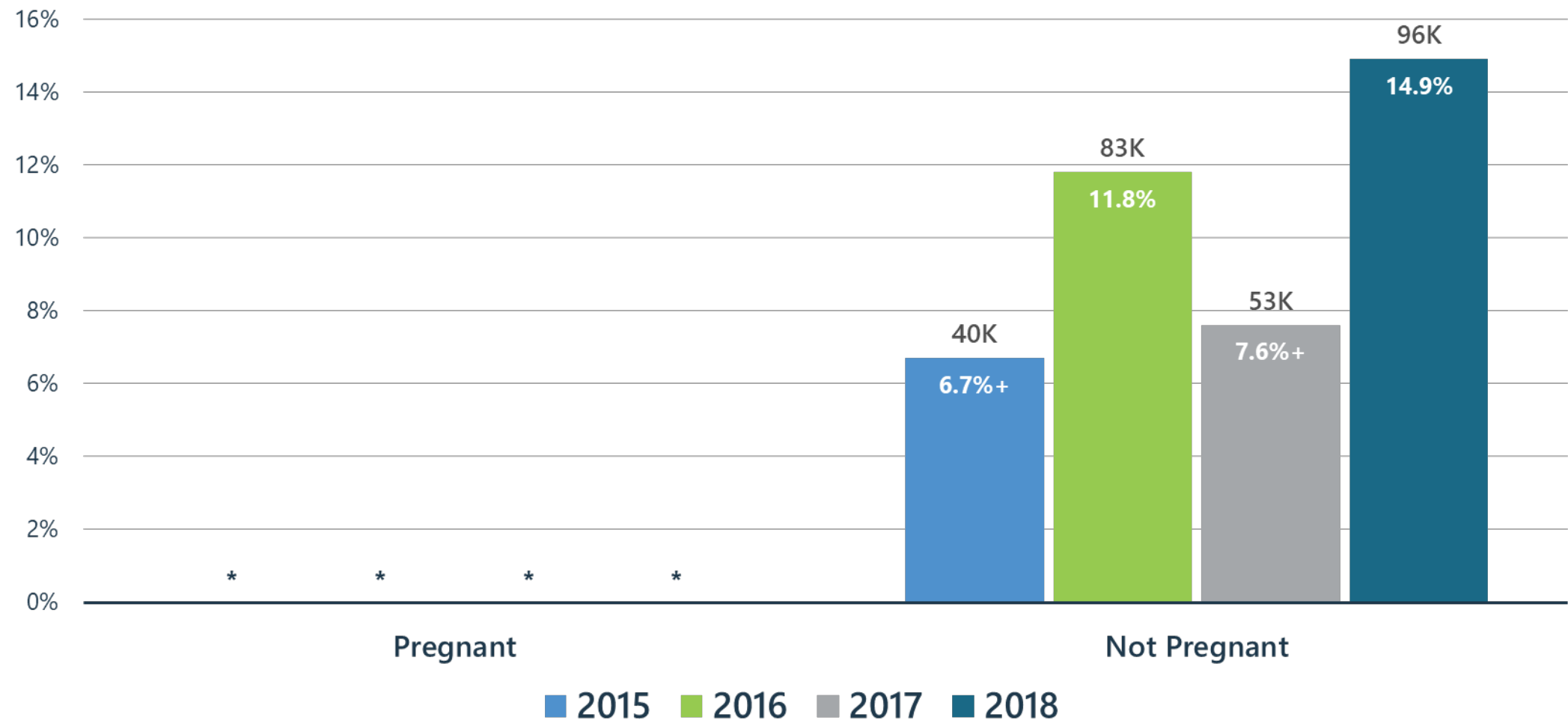
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Marijuana Use among Women Veterans by Pregnancy Status

PAST MONTH, 2015-2018 NSDUH, Veteran 18-44

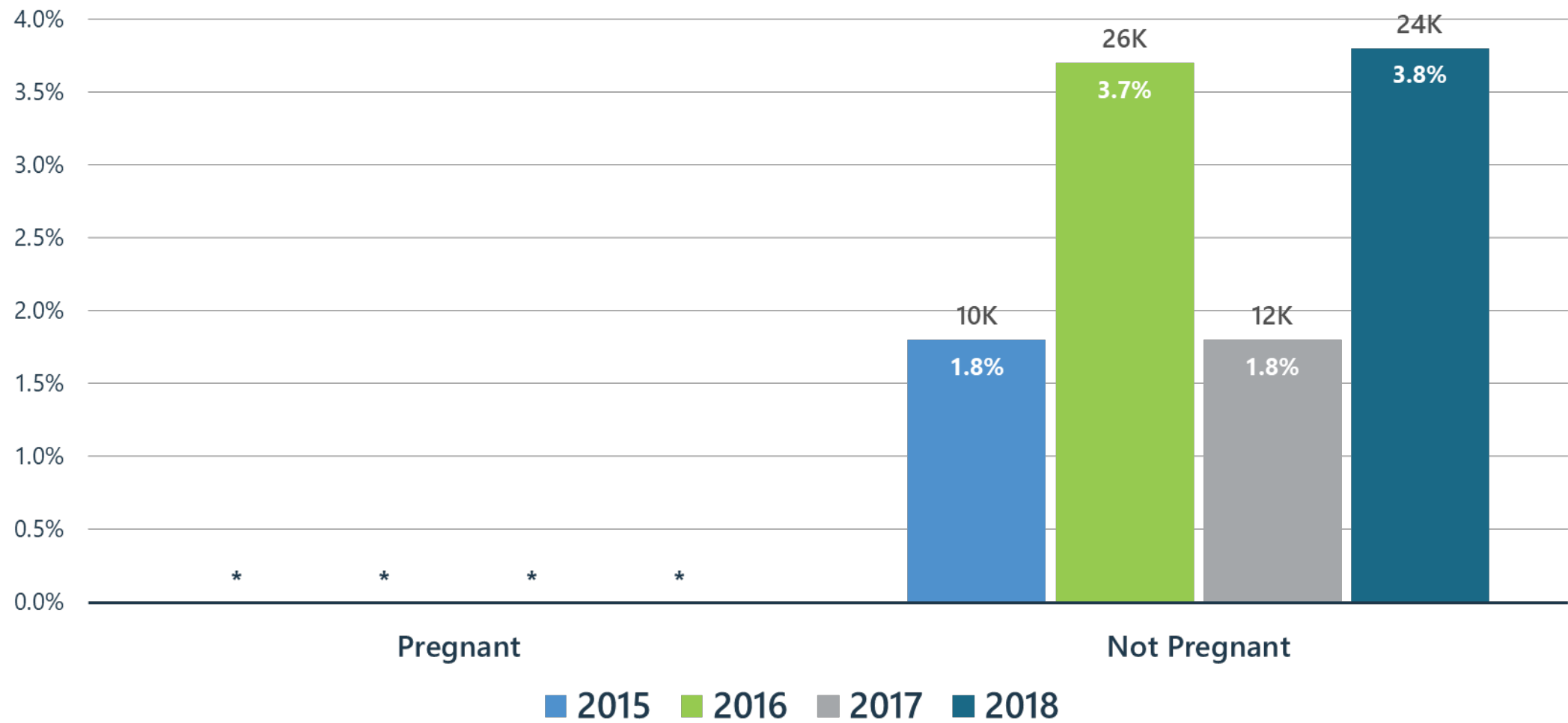


* Estimate not shown due to low precision.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Daily or Almost Daily Marijuana Use among Women Veterans by Pregnancy Status

PAST YEAR, 2015-2018 NSDUH, Veteran 18-44



* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

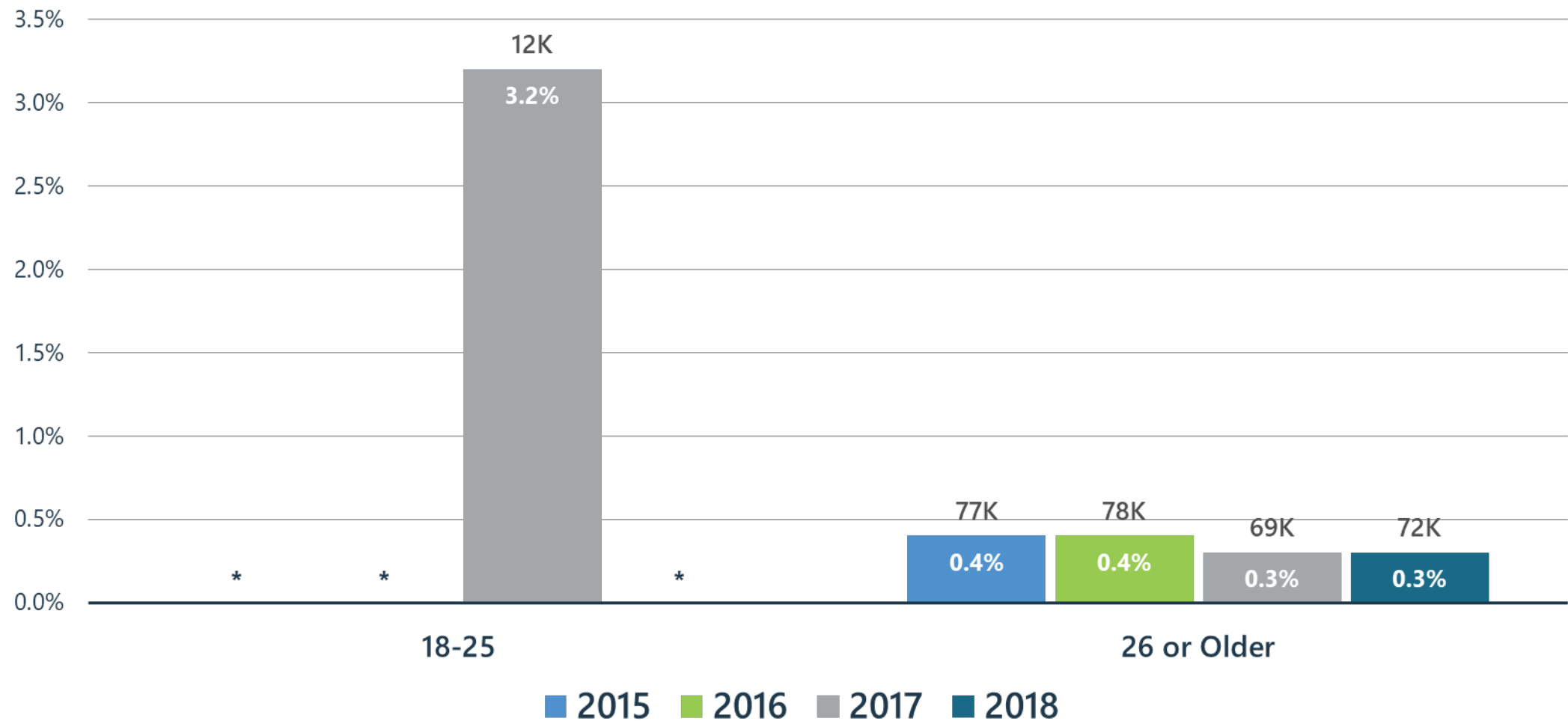
Substance Use in Pregnancy: Trends in the Right Direction

U.S. women aged 18-44 in 2017: Showed a startling increase in substance use and particularly marijuana use in pregnancy: may be associated with fetal growth restriction, stillbirth, and preterm birth; may cause problems with neurological development, resulting in hyperactivity, poor cognitive function (*Metz TD and Stickrath EH, 2015*)

- SAMHSA/HHS made strong efforts to address this situation in an effort to improve the health and mothers and their babies:
- Public awareness efforts: information sharing with stakeholders and the public
- Launch of SAMHSA.gov/marijuana
- Launch of Substance Abuse Prevention Technology Transfer Centers with a focus on marijuana and other substance use in pregnancy
- Expansion of treatment programs for pregnant/post partum parenting women: both residential and outpatient through CARA
- Publication of Clinical Guidance for Treating Pregnant and Parenting Women with Opioid Use Disorder
- Publication of Healthy Pregnancy/Healthy Baby Factsheets for women and their families
- Use of STR and SOR funding for opioid use disorder in pregnancy and prevention interventions
- Joint article from Assistant Secretary for Mental Health and Substance Use and Surgeon General addressing treatment of opioid use disorder in pregnancy

Cocaine Use among Veterans

PAST MONTH, 2015-2018 NSDUH, Veteran 18+

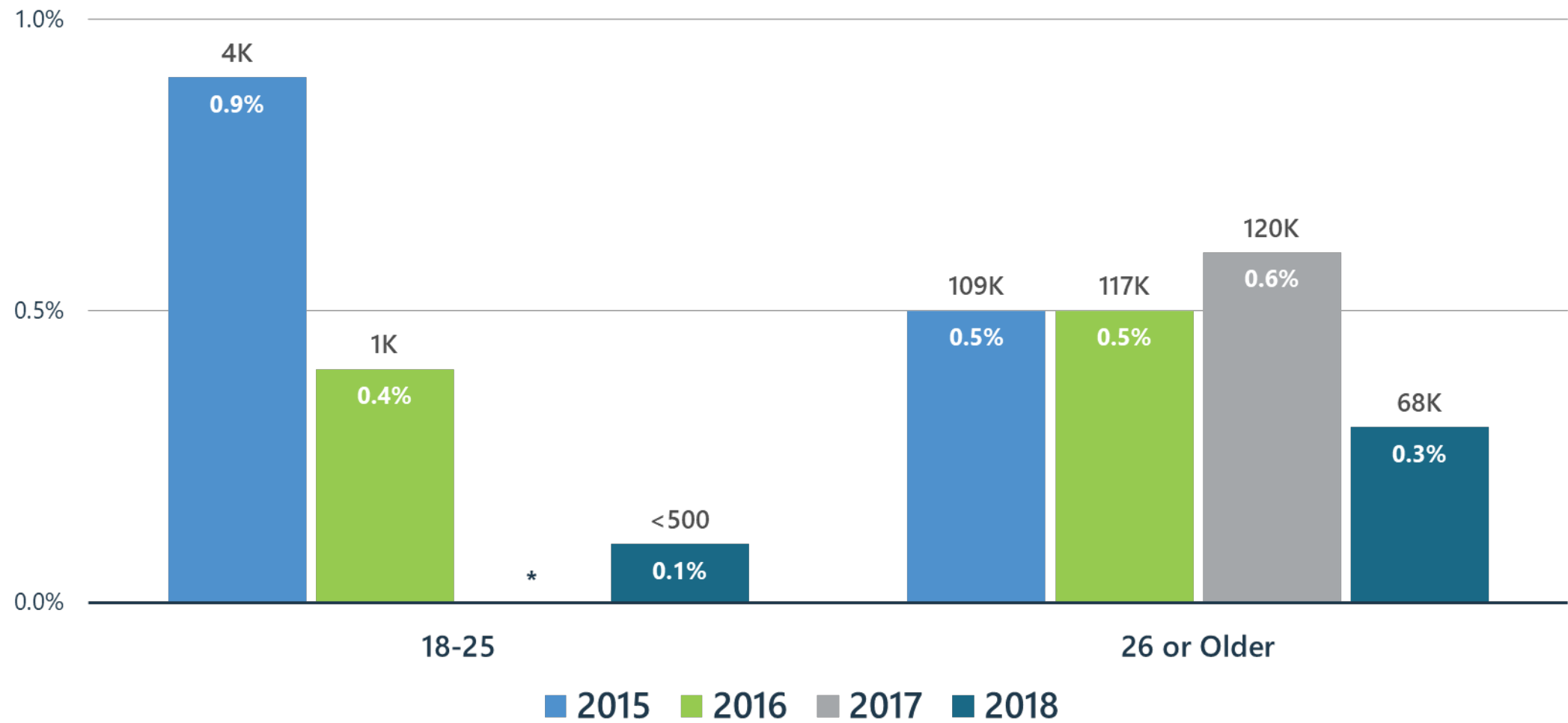


* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Methamphetamine Use among Veterans

PAST YEAR, 2015-2018 NSDUH, Veteran 18+

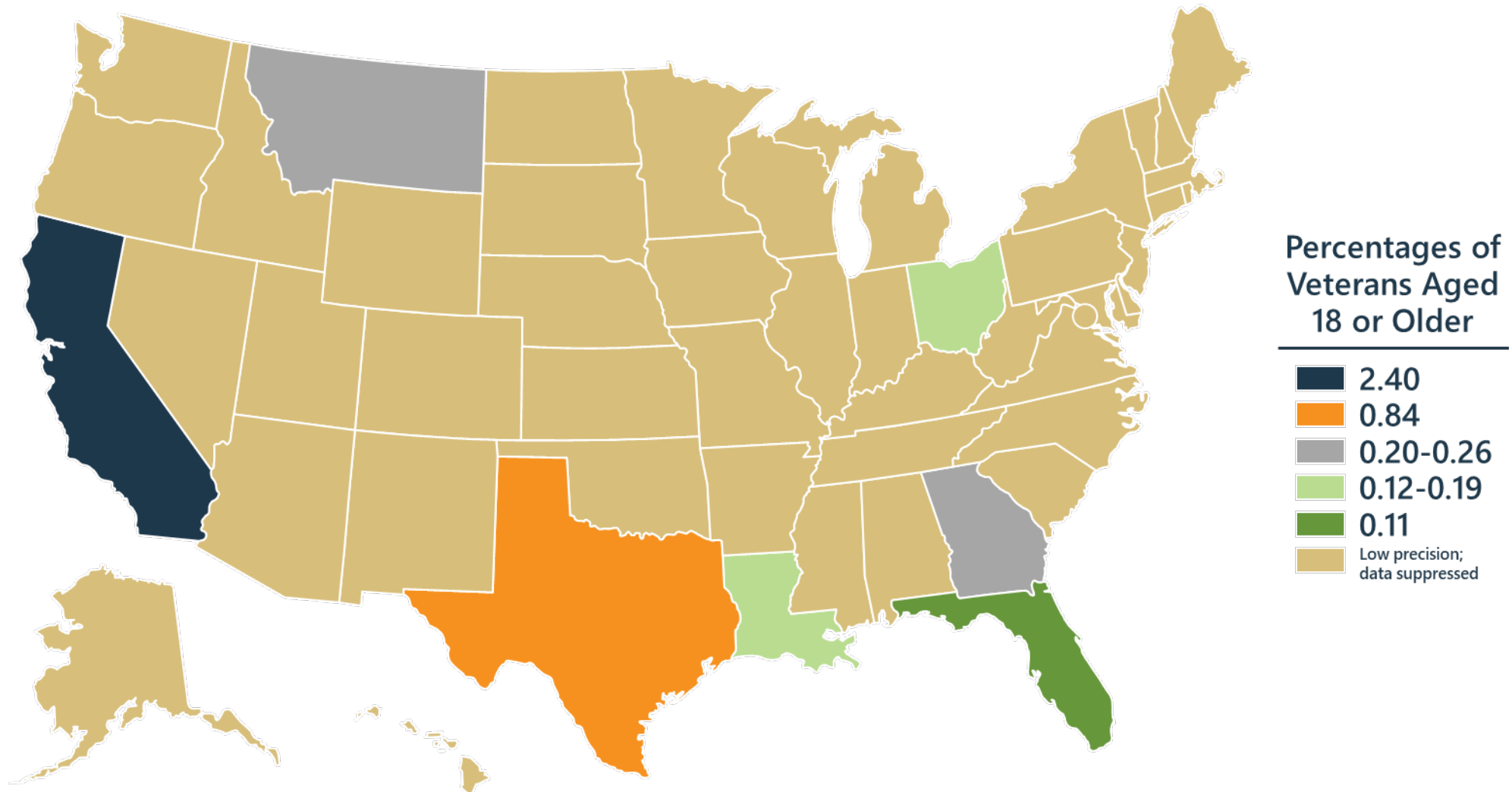


* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Methamphetamine Use among Veterans by State

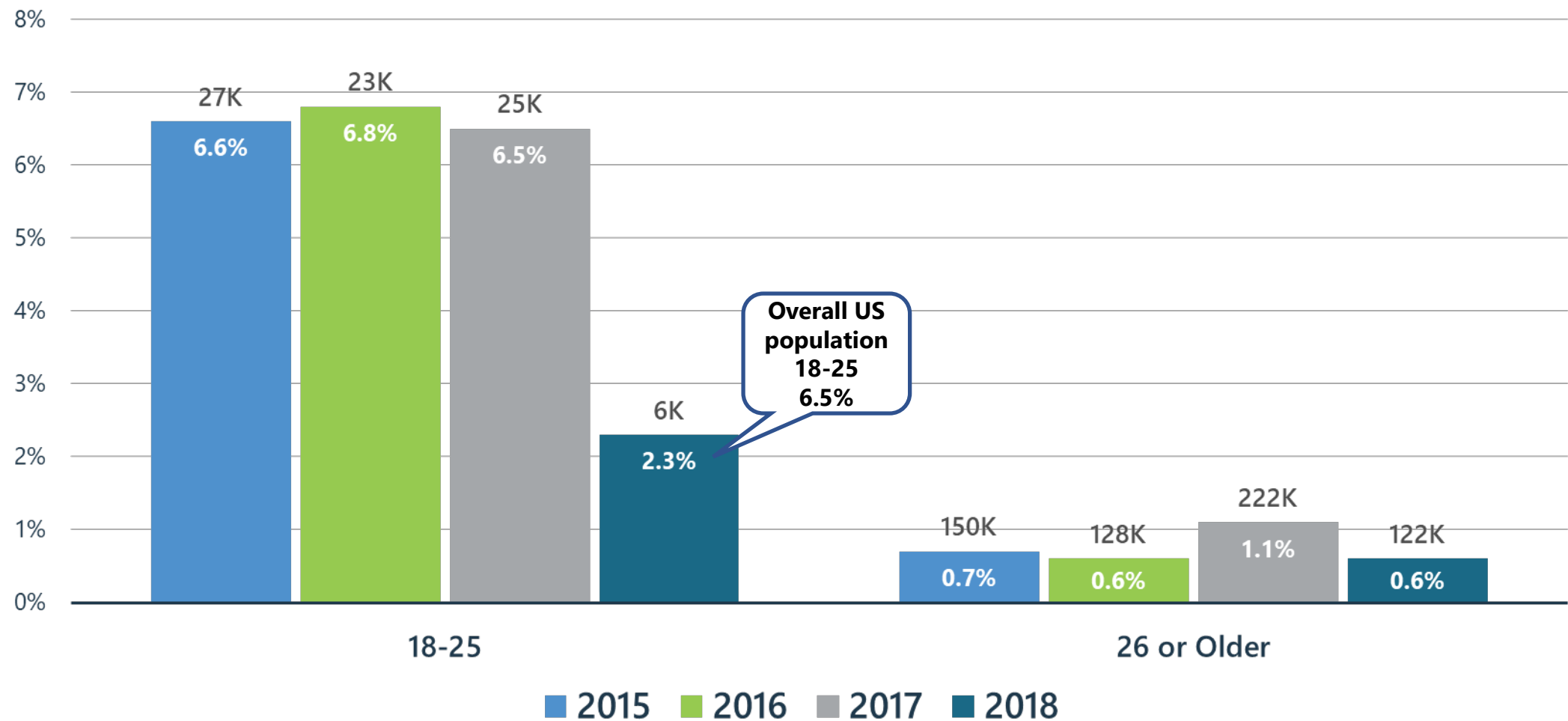
PAST YEAR, 2016-2017, Veteran 18+



Differences in colors across states do not indicate significant differences in estimates.

Misuse of Prescription Stimulants among Veterans

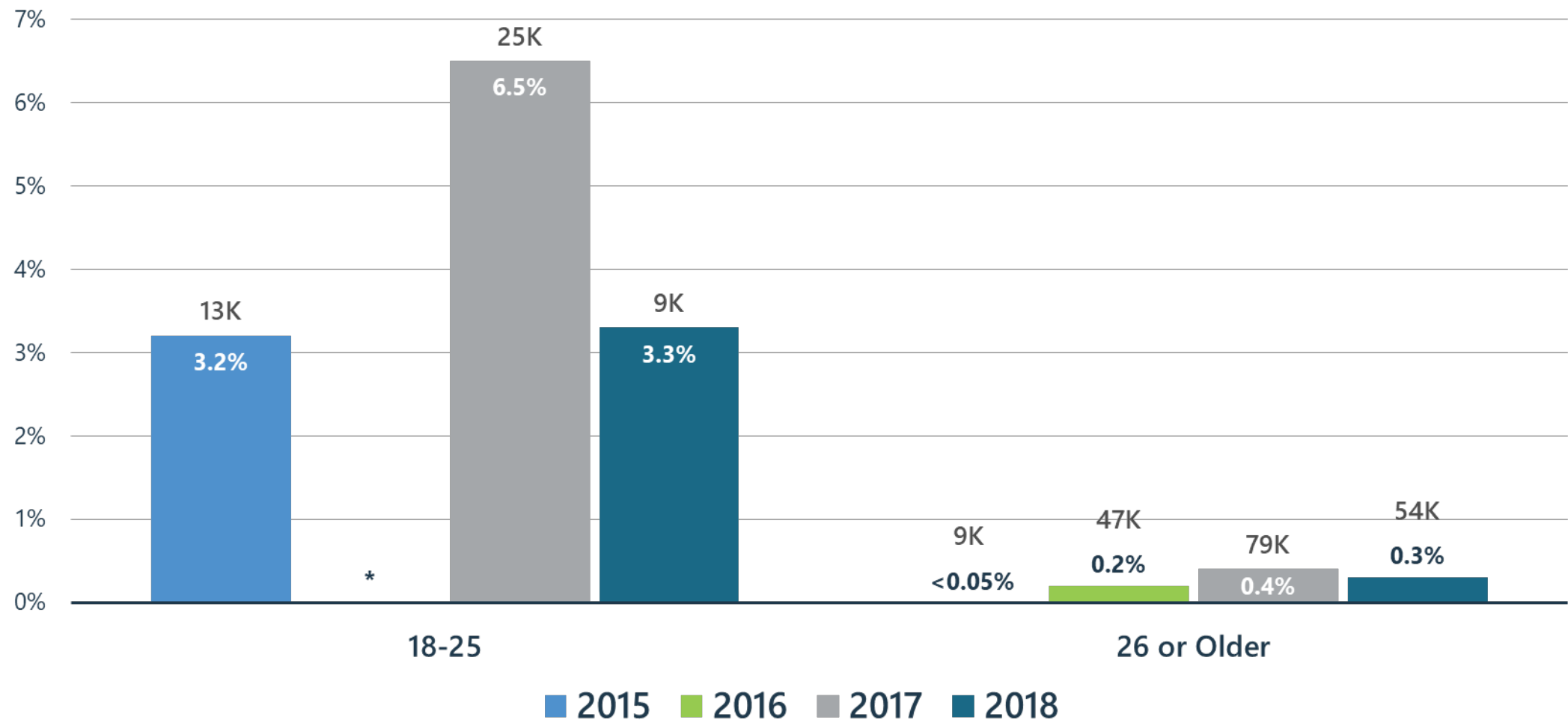
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Veteran Hallucinogen Use: LSD

PAST YEAR, 2015-2018 NSDUH, Veteran 18+



* Estimate not shown due to low precision.
Estimates represent past year use of LSD (lysergic acid diethylamide),
a type of hallucinogen.

No differences between prior year estimates and the 2018
estimates are statistically significant at the .05 level.

Summary: Other Substance Use in the United States in 2018

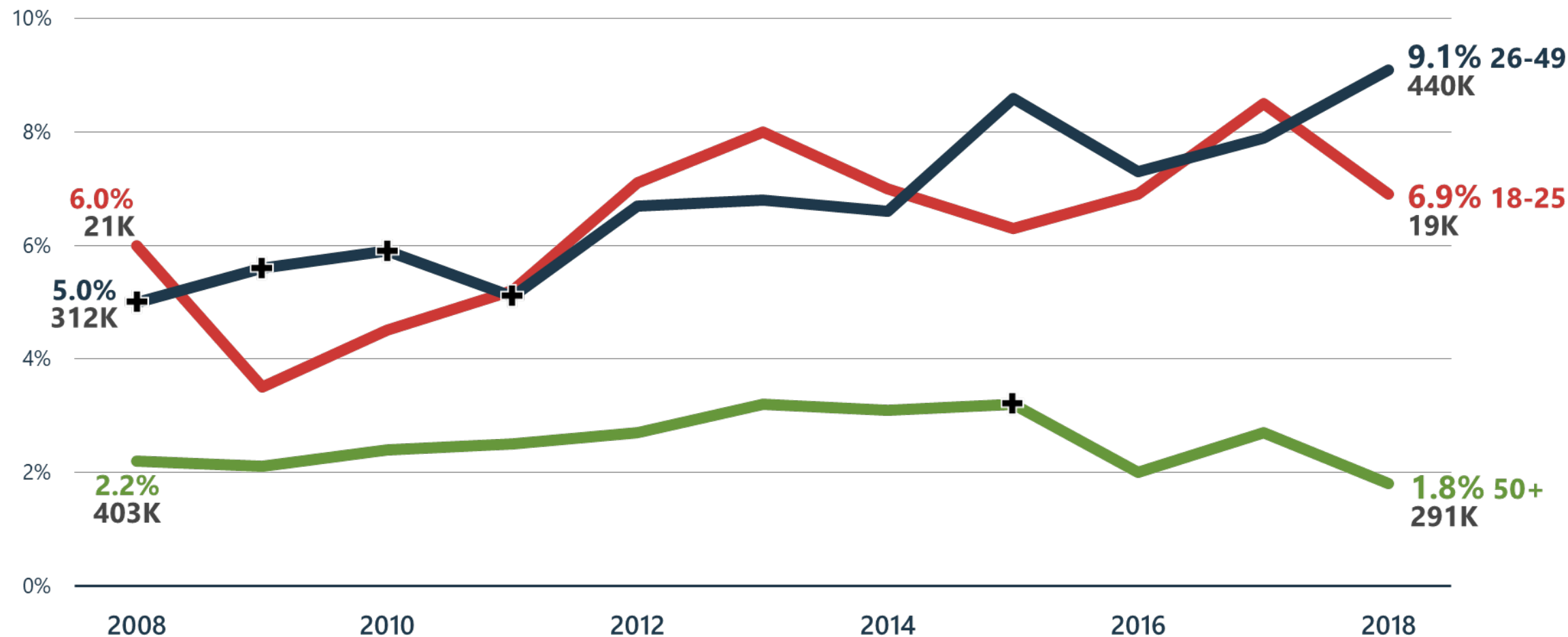
- Marijuana use significantly decreased among veterans aged 18-25 between 2017 and 2018, but significantly increased among veterans aged 26+ between 2015 and 2018
- No significant changes in marijuana use disorder among veterans aged 18-25 and veterans aged 26+ between 2015 and 2018
- No significant changes in methamphetamine use, misuse of prescription stimulants, and LDS use among veterans

PREVENTION WORKS!

Mental Health

Serious Mental Illness (SMI) Rising among Veterans Age 26-49 y.o.

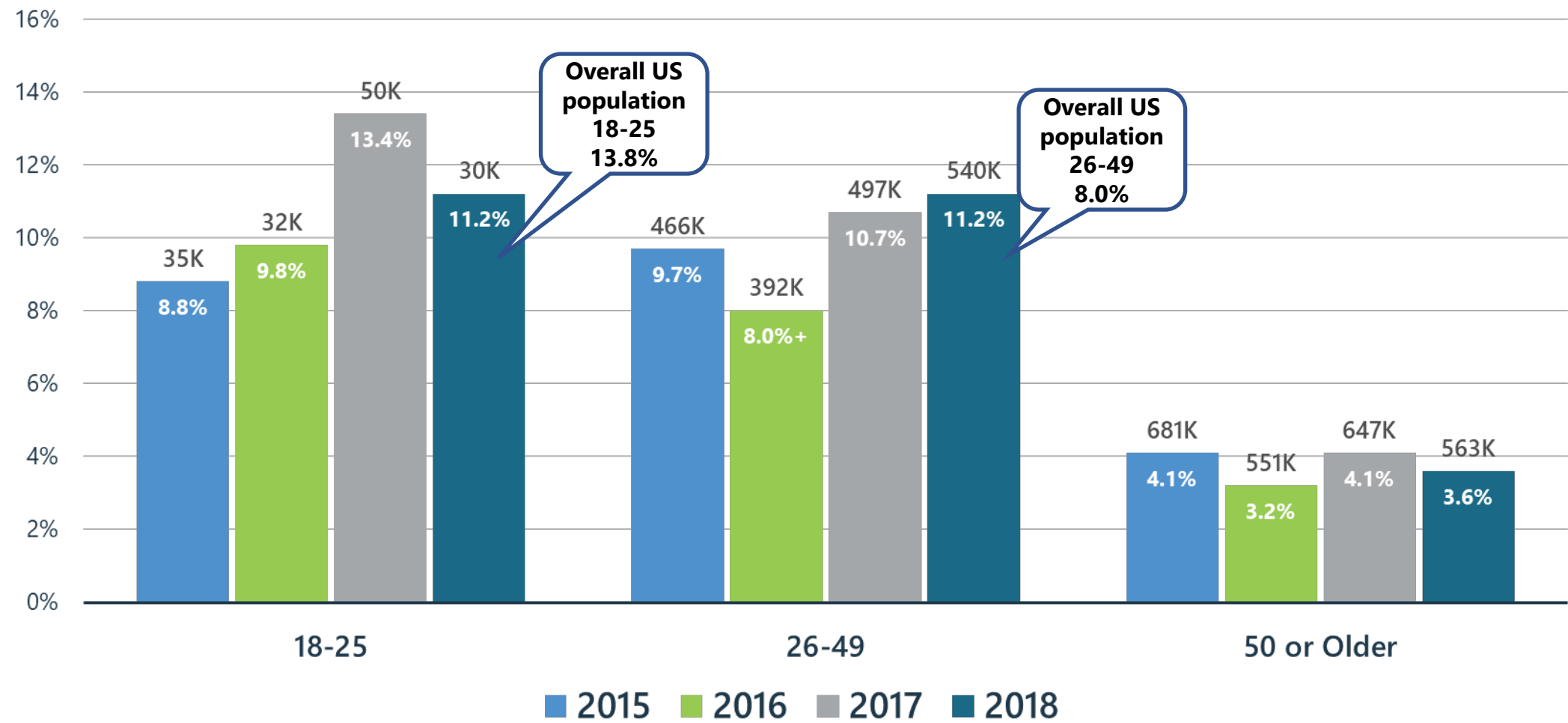
PAST YEAR, 2008-2018 NSDUH, Veteran 18+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Major Depressive Episodes among Veterans

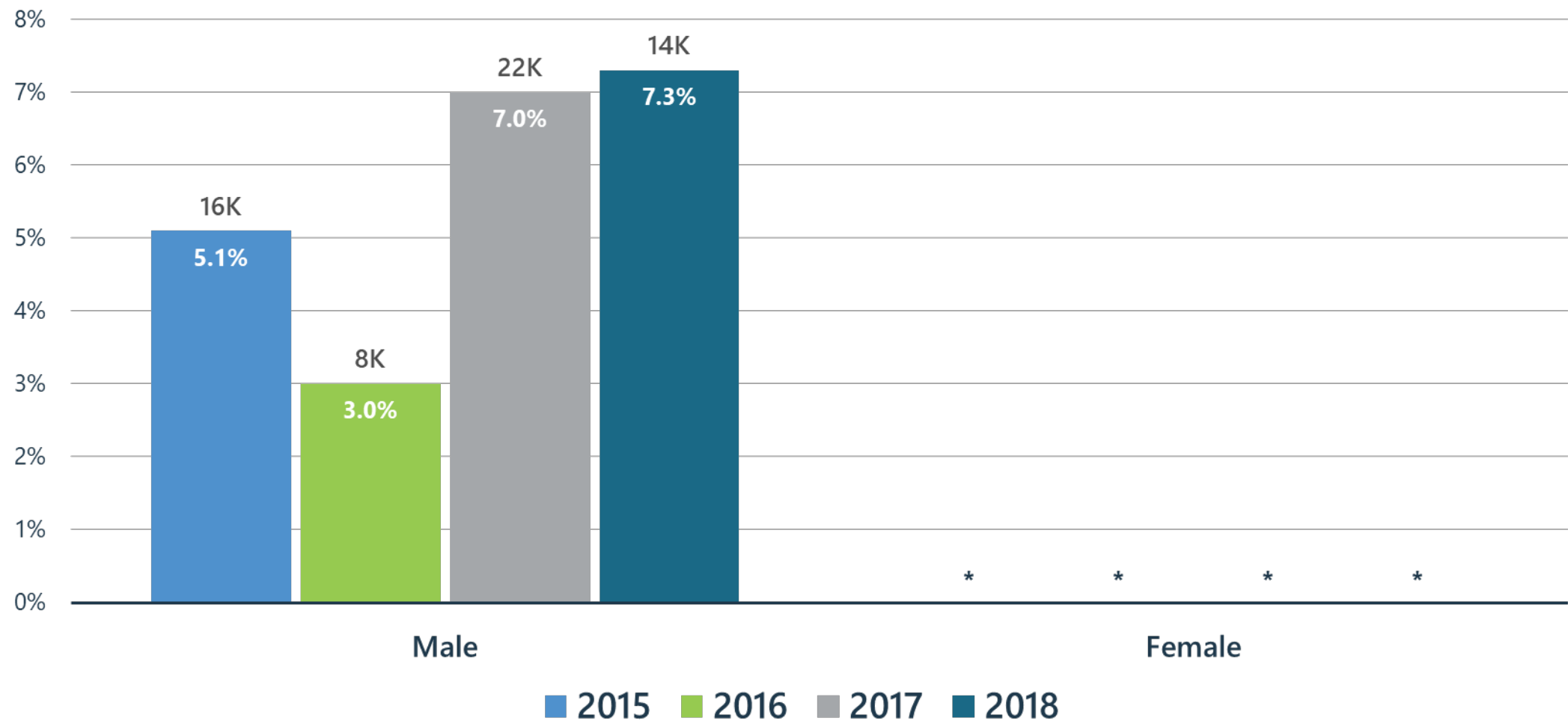
PAST YEAR, 2015-2018 NSDUH, Veteran 18+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Major Depressive Episodes with Severe Impairment among Young Adult Veterans (18-25 y.o.)

PAST YEAR, 2015-2018 NSDUH, Veteran 18-25

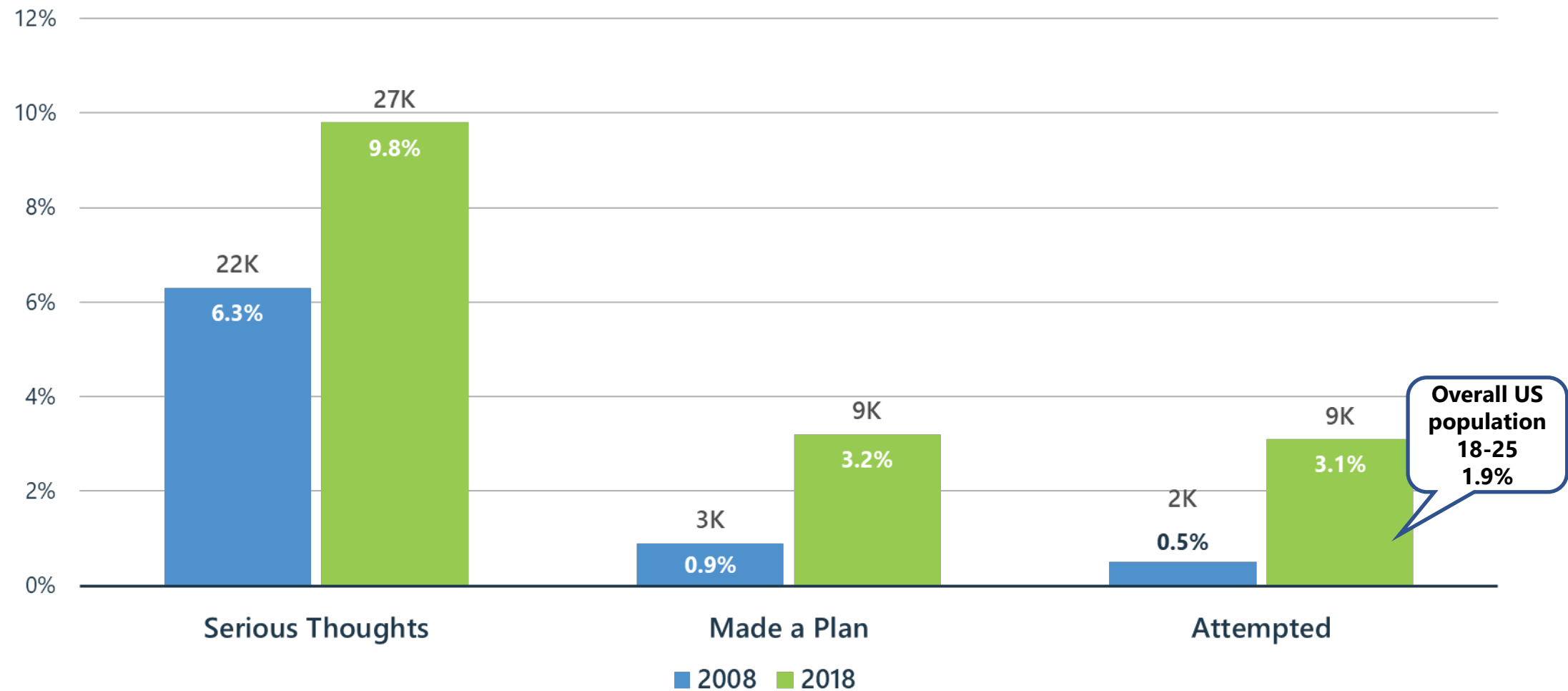


* Estimate not shown due to low precision.

No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Suicidal Thoughts, Plans, and Attempts among Young Adult Veterans (18-25 y.o.)

PAST YEAR, 2008 and 2018 NSDUH, Veteran 18-25

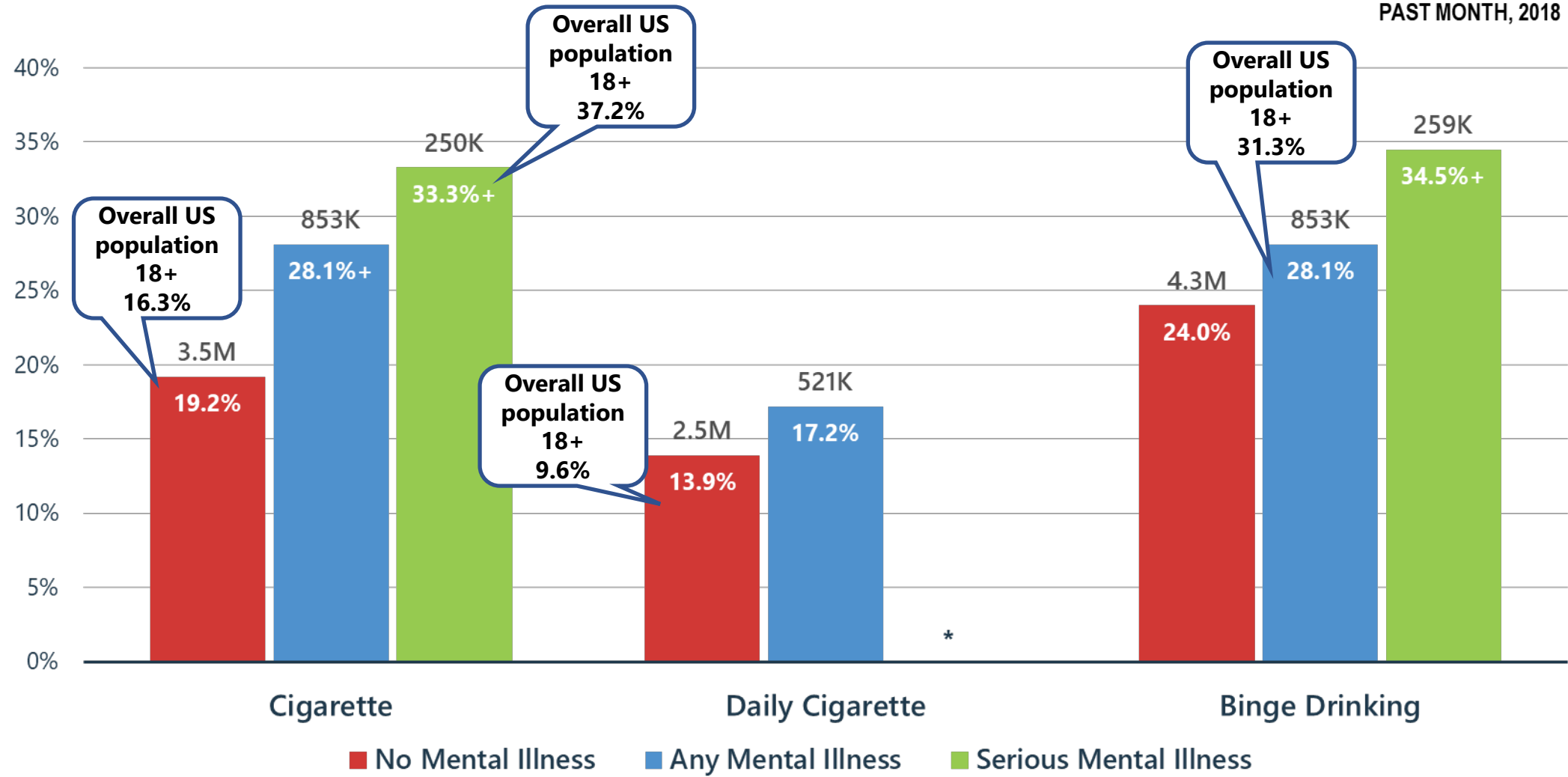


No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Co-Occurring Disorders

Co-Occurring Issues: Substance Use Is More Frequent among Veterans with Mental Illness

PAST MONTH, 2018 NSDUH, Veteran 18+

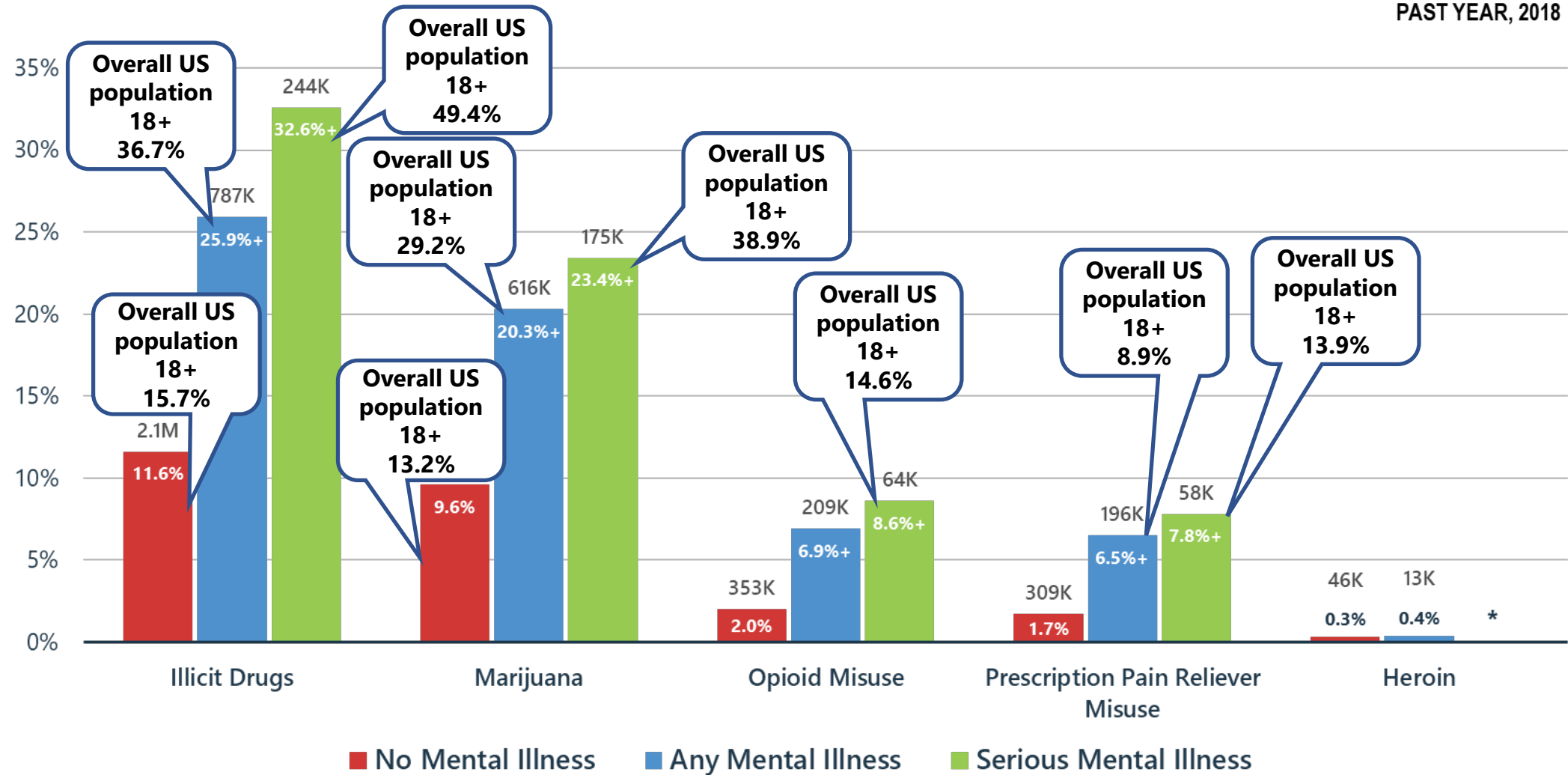


* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for adults without mental illness is statistically significant at the .05 level.

Co-Occurring Issues: Substance Use Is More Frequent among Veterans with Mental Illness

PAST YEAR, 2018 NSDUH, Veteran 18+

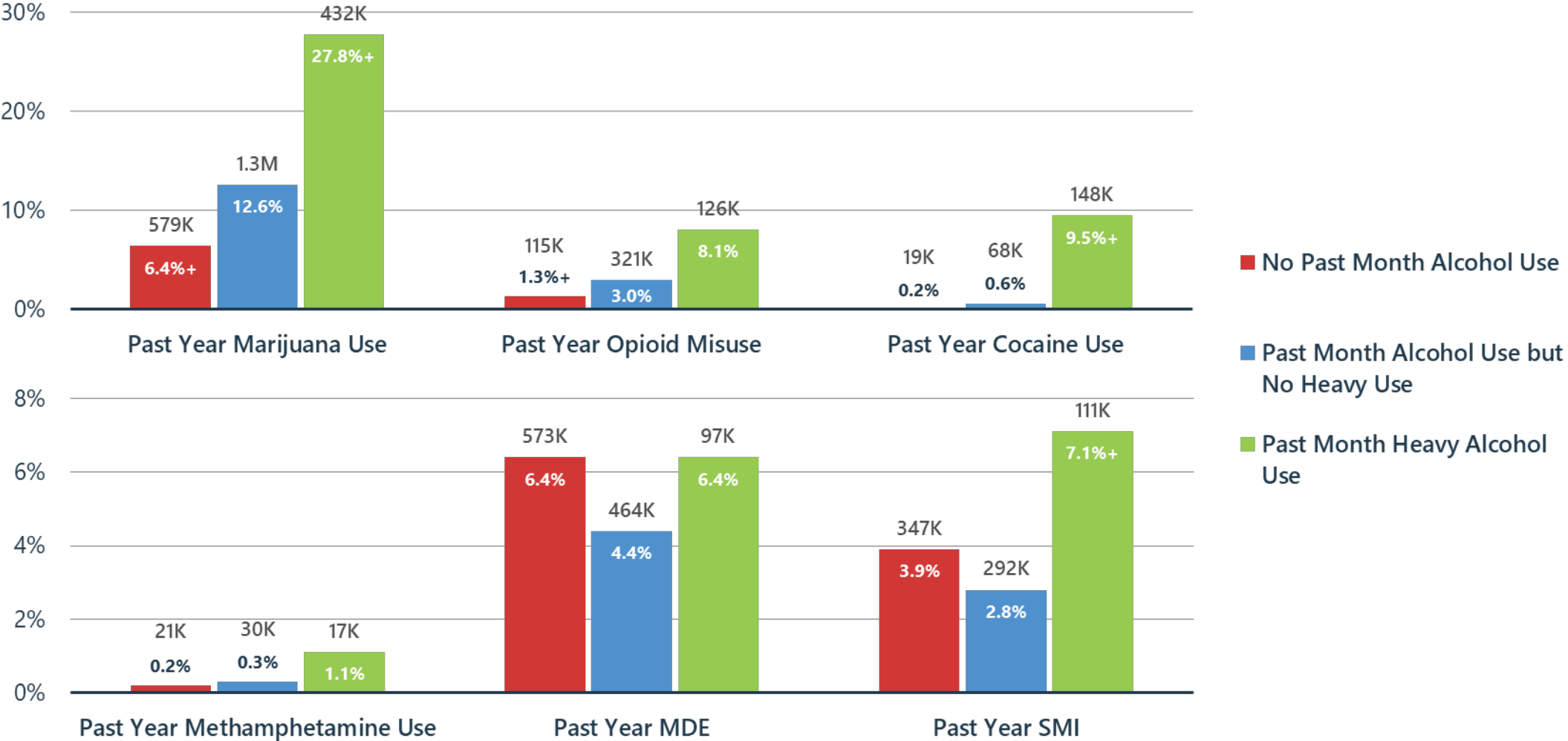


* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for adults without mental illness is statistically significant at the .05 level.

Alcohol Use Related to Other Substance Use, MDE and SMI among Veterans

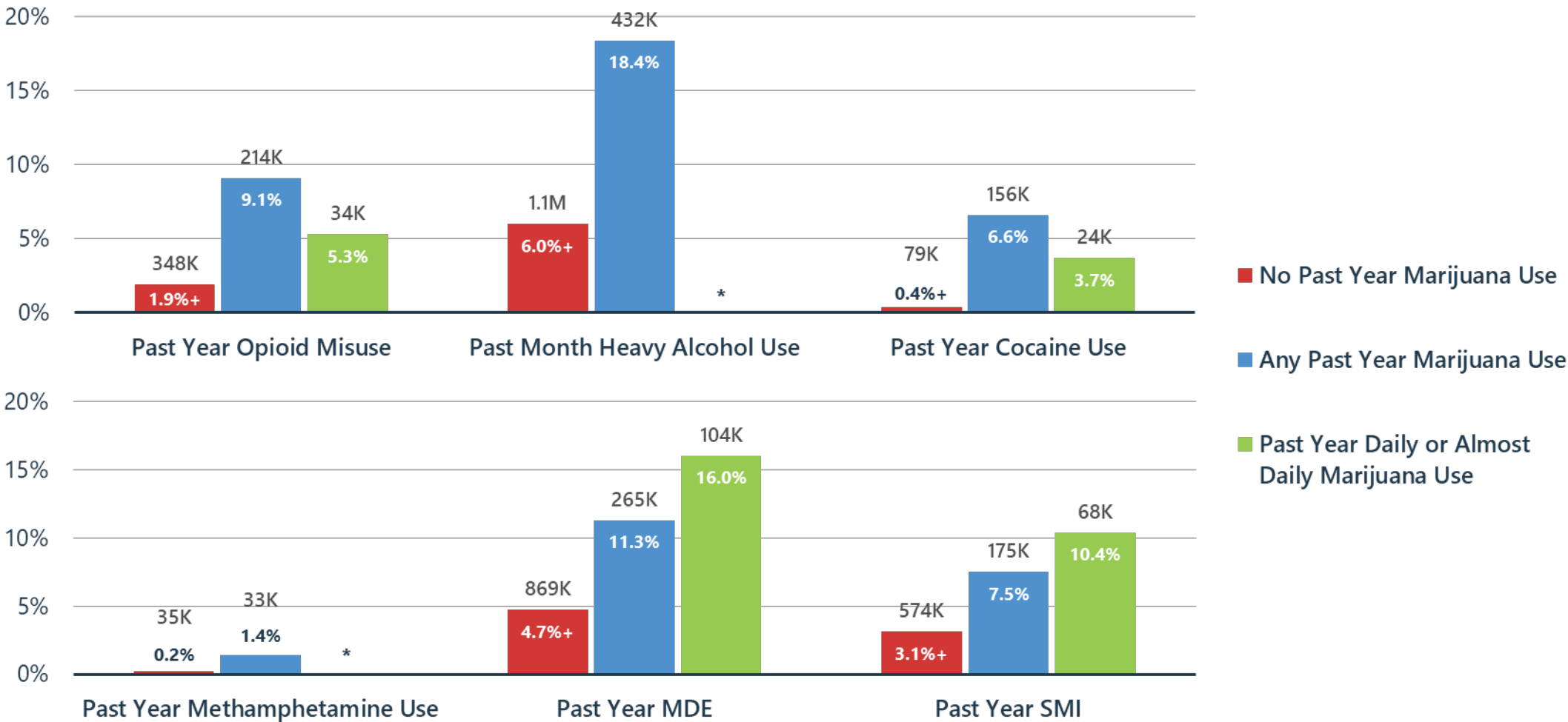
PAST YEAR/MONTH, 2018 NSDUH, Veteran 18+



+ Difference between this estimate and the estimate for people with past month use but not heavy alcohol use is statistically significant at the .05 level.

Marijuana Use Related to Other Substance Use, MDE and SMI among Veterans

PAST YEAR/MONTH, 2018 NSDUH, Veteran 18+

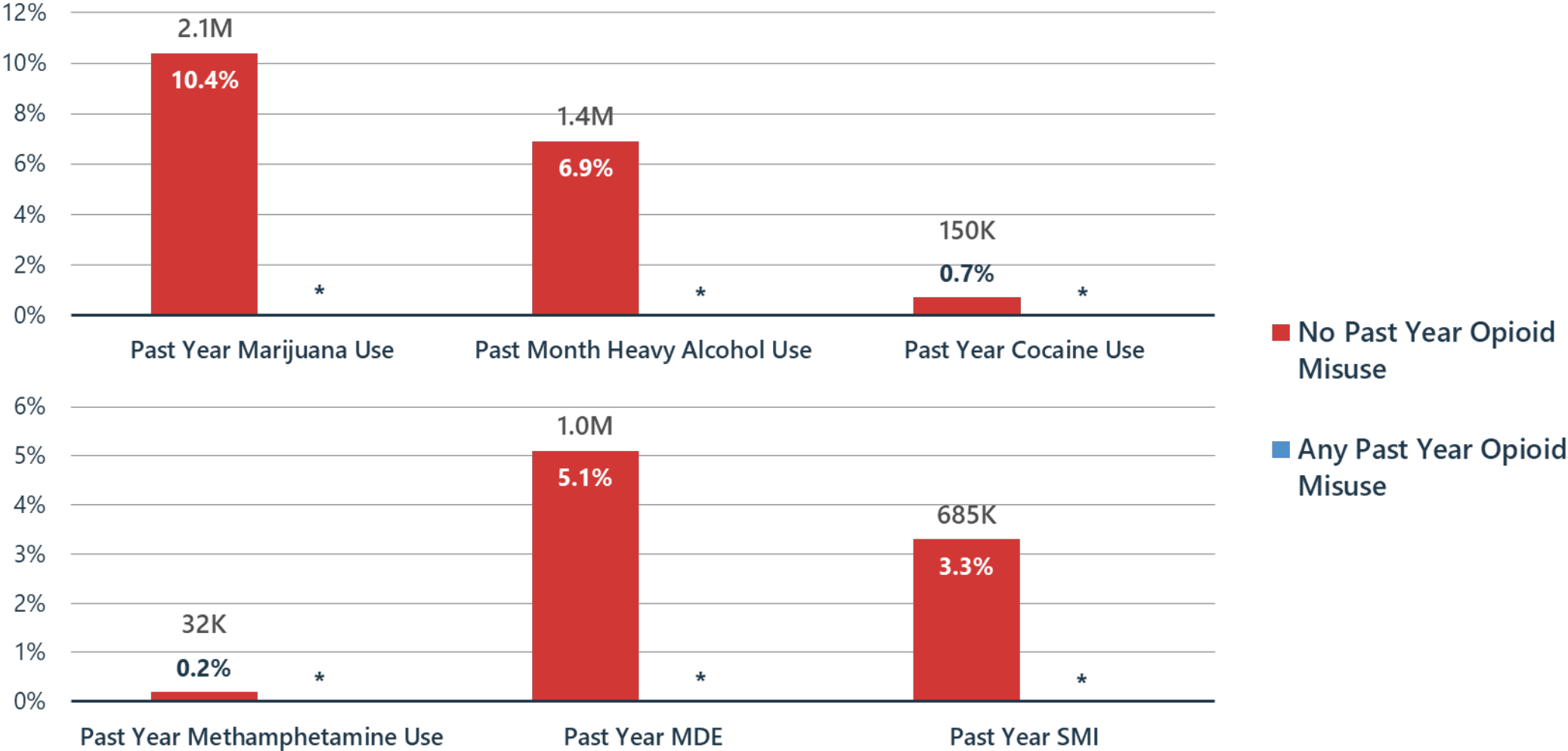


* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for people with past year marijuana use is statistically significant at the .05 level.

Opioid Misuse Related to Other Substance Use, MDE and SMI among Veterans

PAST YEAR/MONTH, 2018 NSDUH, Veteran 18+

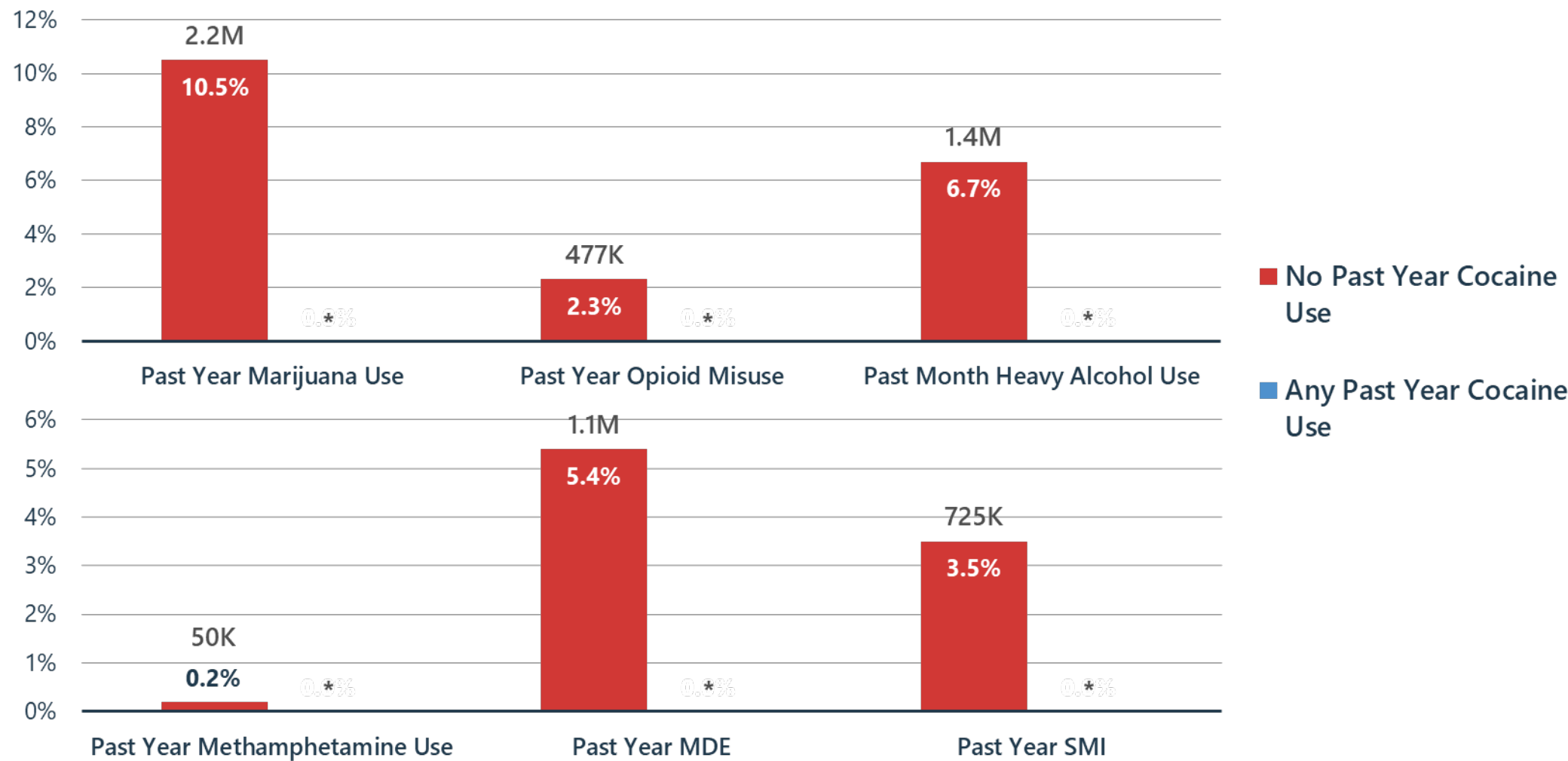


* Estimate not shown due to low precision.

No differences between estimates for people with no past year misuse and the estimates for people with past year misuse are statistically significant at the .05 level.

Cocaine Use Related to Other Substance Use, MDE and SMI among Veterans

PAST YEAR/MONTH, 2018 NSDUH, Veteran 18+

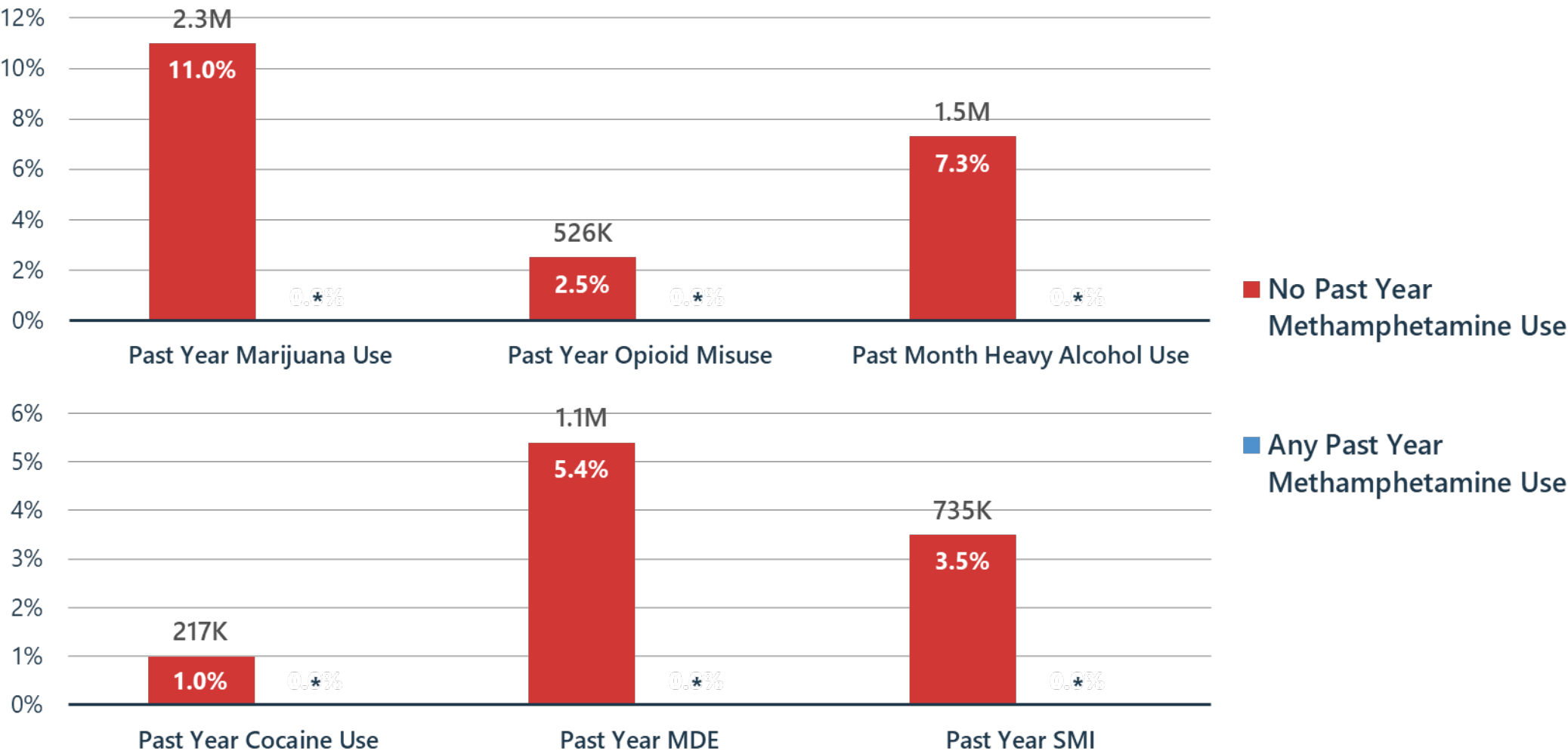


* Estimate not shown due to low precision.

No differences between estimates for people with no past year misuse and the estimates for people with past year misuse are statistically significant at the .05 level.

Methamphetamine Use Related to Other Substance Use, MDE and SMI among Veterans

PAST YEAR/MONTH, 2018 NSDUH, Veteran 18+

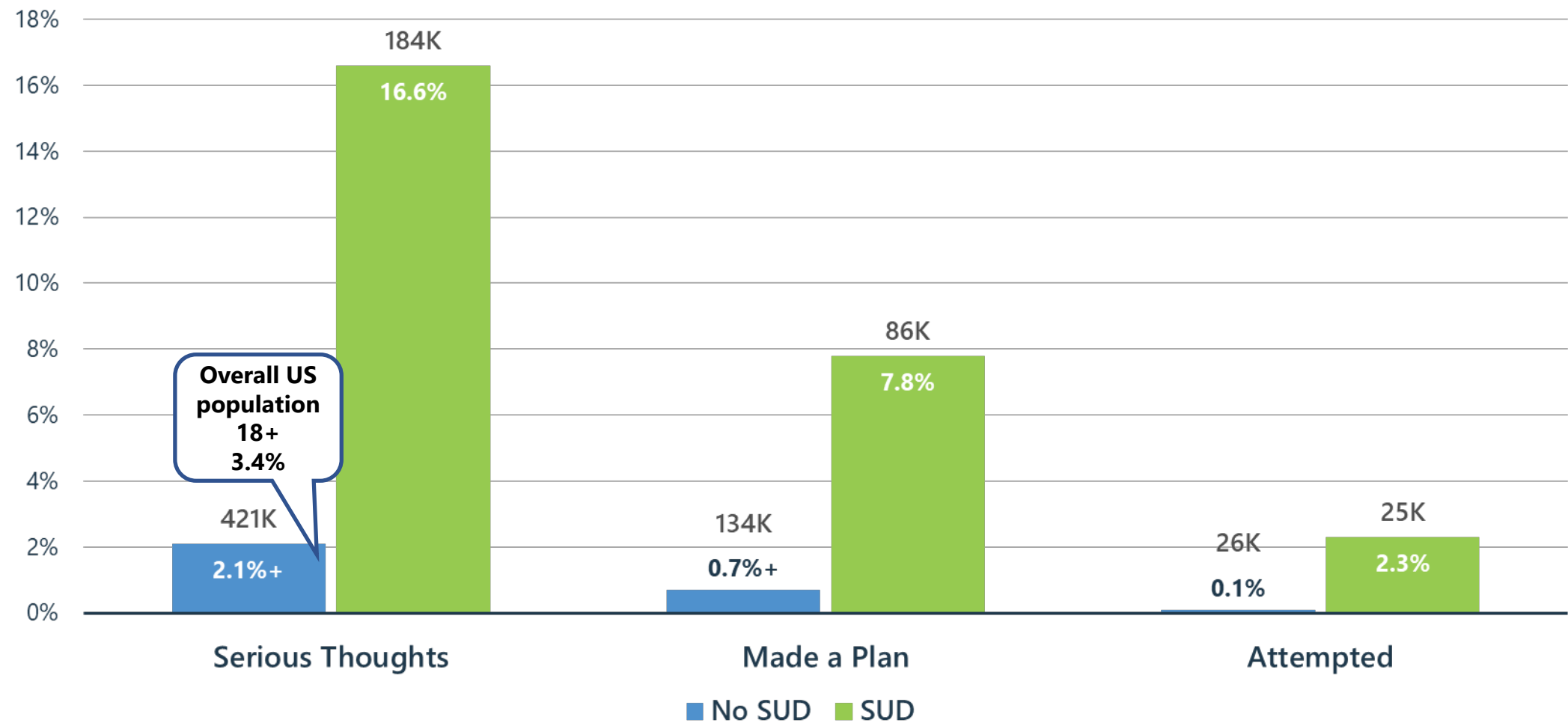


* Estimate not shown due to low precision.

No differences between estimates for people with no past year use and the estimates for people with past year use are statistically significant at the .05 level.

Co-Occurring Substance Use Disorder (SUD) and Suicidal Thoughts, Plans, and Attempts among Veterans

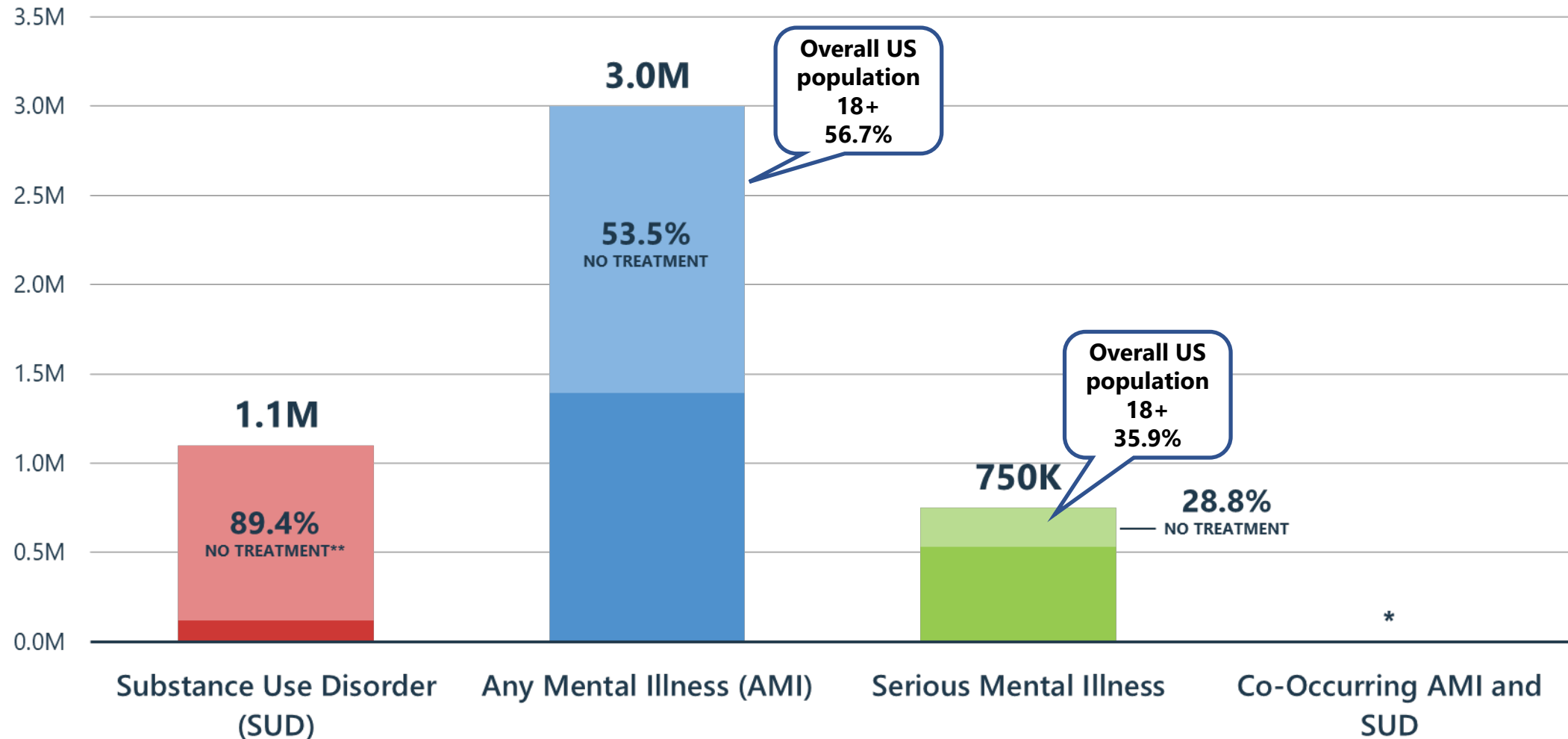
PAST YEAR, 2018 NSDUH, Veteran 18+



+ Difference between this estimate and the estimate for adults with no SUD is statistically significant at the .05 level.

Despite Consequences and Disease Burden, Treatment Gaps among Veterans Remain Vast

PAST YEAR, 2018 NSDUH, Veteran 18+



* Estimate not shown due to low precision.

** No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor's office, self-help group, or prison/jail.

Summary: Mental Health and Substance Use Issues in the United States in 2018

- Serious mental illness significantly increased among veterans aged 26-49 between 2008 and 2018; but significant decreased among veterans age 50+ between 2015 and 2018
- Significant increase in major depressive episode among veterans aged 26-49 between 2016 and 2018
- No significant changes in suicidality among veterans aged 18-25 between 2008 and 2018
- Substance use is more common among veterans with mental illness
- Among Veterans, use of one substance—alcohol or other illicit substances-- is strongly correlated with polysubstance use and with MDE and SMI underscoring the need to screen for all substances as well as mental disorders when evaluating a person identifying a substance problem or a mental health issue, and to treat all co-occurring disorders
- Substance use disorders are associated with increased risk for suicidality among veterans
- The large gap in treatment need continues among veterans

2018: A Year of Some Progress, but Ongoing Need for Americans Living with Substance Use and Mental Health Issues Continues

NSDUH reveals areas where we need to focus resources:

- Continuing need to address the ongoing opioid epidemic
- Significant decrease in marijuana use among veterans aged 18-25 between 2017 and 2018
- Significant increase in marijuana use among veterans aged 26+ between 2015 and 2018
- Significant increase in serious mental illness among veterans aged 26-49 between 2008 and 2018
- Substance use and mental disorders are closely linked among veterans: NSDUH tells us that illicit substance use is associated with increased risk for other hazardous substance use and mental illness, and mental illness is a risk factor for illicit substance use among veterans
- Need for ongoing efforts in prevention of substance use disorders among veterans

SAMHSA's Response

- **Workforce: Continue to address the need for clinicians to be prepared to assess and treat mental health issues and substance issues with national training and technical assistance programs**
- **Opioids**
- Continue work with states to address opioids crisis needs in terms of prevention, treatment, and community recovery resources
 - STR/SOR/TOR grants
 - Discretionary grants: pregnant/post partum parenting women/children/families, drug courts, first responder/prevention grants
 - Collaboration with HHS partners and other federal departments to expand resources to communities
- **Other substances:**
- Encourage use of block grant funds to address prevention/treatment needs
- Provide training and technical assistance on evidence-based psychosocial therapies
- **Connecting with the public: Importance of Prevention, Treatment, Community Supports**
- Public service messaging on substance use and mental health issues with focus on prevention
- <https://www.samhsa.gov/technology-transfer-centers-ttc>
- **Monitoring outcomes:**
- Through continuation of NSDUH, DAWN, and SAMHSA grant program evaluation
- **Making policy modifications as indicated**