

June 2013



INDIANA

For questions and additional information, please contact:

Julia Olsen

DMHA Bureau Chief
Mental Health Promotion
and Addiction Prevention
(317) 232-7894
Julia.Olsen@fssa.in.gov

Prepared for:

Indiana Family and Social Services
Administration
Division of Mental Health and
Addiction

Prepared by:

The Center for Health Policy
IU Richard M. Fairbanks
School of Public Health
Indiana University-Purdue
University Indianapolis
714 N. Senate Avenue, Ste. 220
Indianapolis, IN 46202



**RICHARD M. FAIRBANKS
SCHOOL OF PUBLIC HEALTH**
INDIANA UNIVERSITY
IUPUI



Substance Abuse in Indiana

A quick summary on the use of alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, nonmedical prescription drugs, and polysubstances in Indiana

Introduction

In 2005, the State Epidemiology and Outcomes Workgroup (SEOW) was established as part of the Center for Substance Abuse Prevention's (CSAP) Strategic Prevention Framework State Incentive Grant (SPF SIG) Program to collect and analyze epidemiological data and facilitate data-based decision-making regarding substance abuse prevention across Indiana. Though the grant funding has ended, the Division of Mental Health and Addiction continues to support the work of the SEOW.

As of this date, the Indiana SEOW has published seven annual comprehensive state epidemiological profiles on substance use. The complete reports are available at the Center for Health Policy website at www.health-policy.iupui.edu/SEOW/epi.

This issue brief provides a concise but comprehensive overview of alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, nonmedical prescription drug, and polysubstance use in Indiana. For a more detailed analysis, refer to *The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2012*.

OUR VISION

Healthy, safe, and drug-free environments
that nurture and assist all Indiana citizens to thrive.

OUR MISSION

To reduce substance use and abuse
across the lifespan of Indiana citizens.



ALCOHOL

Prevalence

- Alcohol is the most frequently used drug in Indiana and the United States.
- Among Hoosiers ages 12 and older, 51.0% drank alcohol in the past month, and 22.7% engaged in binge drinking.¹
- Young adults ages 18 to 25 had the highest rates of alcohol use in Indiana: 61.1% reported current alcohol use and 41.8% reported binge drinking.¹
- Rates for heavy drinking were significantly lower in Indiana than in the United States (IN: 6.0%; U.S.: 6.6%).²
- Among Indiana college students, 67.1% reported current (past-month) use of alcohol.³

Youth Consumption—Underage Drinking

- Among Hoosiers 12 to 20 years old, 24.5% reported current alcohol use and 16.4% engaged in binge drinking.¹
- 11.6% of Indiana youth ages 12 to 17 drank alcohol in the past month, and 6.6% engaged in binge drinking.¹
- 33.4% of Indiana high school students (grades 9 through 12) used alcohol in the past month, and 19.8% engaged in binge drinking.⁴
- 16.5% of 8th graders, 27.4% of 10th graders, and 37.6% of 12th graders consumed alcohol in the past 30 days.⁵



Impact: Health

- The annual rate for alcohol abuse and dependence in Indiana was 6.9%, with the highest rate among 18- to 25-year-olds (15.8%).¹
- Most admissions to substance abuse treatment were due to alcohol abuse, and for the first time in the past 11 years the percentage of admissions for alcohol dependence was significantly lower in Indiana (37.6%) than in the U.S. (40.9%).⁶
- The percentage of treatment episodes in Indiana in which alcohol dependence was indicated was lowest among blacks (36.3%), followed by whites (37.8%). Other races (44.0%) had the highest percentage.⁶
- From 2000 through 2009, a total of 3,646 Hoosiers died from alcohol-induced causes.⁷ The age-adjusted alcohol-attributable mortality rate in 2009 was 5.4 per 100,000 Indiana residents.⁸
- Alcohol is a common factor in drowning accidents (34%) and suicides (23%).⁹

Impact: Criminal Justice

- In 2011, a total of 8,355 alcohol-related collisions occurred in Indiana; 185 of these were fatal.¹⁰
- In 2010, Indiana arrest rates per 1,000 population were 4.2 for driving under the influence (27,100 arrests), 3.0 for public intoxication (20,000 arrests), and 2.2 for liquor law violations (14,000 arrests).¹¹
- Alcohol use is a major factor in homicides (47%).⁷

TOBACCO

Prevalence

- One-third of Hoosiers ages 12 and older used a tobacco product in the past month. This was similar to the U.S. rate of 27.0%.¹
- The highest tobacco use rate in the state was among 18- to 25-year-olds (44.1%).¹
- 25.3% of Hoosiers ages 12 and older smoked cigarettes in the past month. This was statistically similar to the U.S. smoking rate of 22.5%.¹
- The highest rate for current cigarette use in the state was among 18- to 25-year-olds (41.0%).¹
- Indiana's adult smoking prevalence (25.6%) is the 7th highest in the nation. It is also significantly higher than the U.S. prevalence of 21.2%.²
- 19.4% of Hoosiers ages 18 and older use cigarettes every day.²
- Smoking prevalence was generally higher among younger individuals and persons with less educational attainment and lower income levels.²
- Among Indiana college students, 15.7% reported current (past-month) use of cigarettes.³

Youth Consumption

- Among 12- to 17-year-olds in Indiana, 10.7% reported current use of a tobacco product and 8.1% indicated that they currently smoke cigarettes.¹
- 4.4% of middle school students and 17.5% of high school students in Indiana smoked cigarettes in the past month.¹²
- White high school students had significantly higher smoking rates than black students (19.8% and 6.6%, respectively).¹²

Impact: Health

- An estimated 9,700 Hoosiers die annually from smoking-attributable causes.⁷
- On average, smoking reduces adult life expectancy by about 14 years.¹³
- Tobacco causes serious health consequences, including heart disease, cancer, and respiratory illnesses.¹³
- The average annual age-adjusted smoking-attributable mortality rate in Indiana was 308.9 per 100,000 population.¹⁴
- Secondhand smoke is also detrimental to health and can cause many illnesses, especially in children.¹



MARIJUANA

Prevalence

- Marijuana is the most commonly used illicit substance in Indiana and the nation.
- Among Hoosiers ages 12 and older, 6.5% used marijuana in the past month and 10.3% used it in the past year; U.S. rates were comparable.¹
- Highest rate of current (past month) use was among 18- to 25-year-olds (18.2%).¹
- Among Indiana college students, 18.7% reported current (past-month) marijuana use.³



Youth Consumption

- 5.2% of Indiana youth ages 12 to 17 used marijuana for the first time during the past year, and 6.5% currently use marijuana.¹
- 20.0% of Indiana high school students currently use marijuana.⁴
- In Indiana, 8.0% of 8th grade students, 15.4% of 10th grade students, and 17.8% of 12th grade students currently use marijuana.⁵

Impact: Health

- Harmful effects include respiratory illnesses, a weakened immune system, and an increased risk of heart attack and cancer. Marijuana use is correlated with risky sexual behaviors and higher rates of “harder” drug use.¹⁶
- In 21.4% of Indiana treatment admissions, marijuana dependence was reported at treatment admission, a significantly higher percentage compared to the nation’s 18.4%.⁶
- Marijuana users in treatment were more likely to be male, black, and under 18 years old.⁶

Impact: Criminal Justice

- In 2010, over 14,000 arrests were made in Indiana for possession and over 2,300 arrests for sale/manufacture of marijuana, representing arrest rates of 2.2 and 0.4 per 1,000 population, respectively.¹¹

COCAINE

Prevalence

- Among Hoosiers ages 12 and older, 0.7% reported current cocaine use (past-month use), 1.0% used it in the past year, and 11.1% used it at least once in their life.¹
- Highest rate of past-year use in Indiana was among 18- to 25-year-olds (3.1%).¹
- Among Indiana college students, 1.2% reported current (past-month) cocaine use.³

Youth Consumption

- 0.7% of Indiana youth ages 12 to 17 used cocaine in the past year.¹
- 5.6% of Indiana high school students have used a form of cocaine at least once in their life and 2.3% currently use it.⁴
- 1.6% of 12th grade students in Indiana reported current cocaine use, and 0.9% indicated current crack use.⁵



Impact: Health

- Cocaine use can lead to cardiovascular problems, respiratory difficulties, neurological effects, and gastrointestinal complications. Users may even suffer sudden death with first-time use.¹⁷
- Babies born to mothers who abuse cocaine during pregnancy are often prematurely delivered, have low birth weight and smaller head circumference, and are shorter in length.¹⁷
- In 6.1% of treatment episodes in Indiana, cocaine dependence was reported at treatment admission, a rate significantly lower than the national rate of 8.2%.⁶
- Admissions for cocaine dependence decreased significantly in Indiana's treatment population, from 13.6% in 2000 to 6.1% in 2010.⁶
- Cocaine users in treatment were more likely to be female, black, and between the ages of 25 and 54 years old.⁶

Impact: Criminal Justice

- In 2010, almost 2,400 arrests were made in Indiana for possession of cocaine/opiates and over 2,000 for sale/manufacture of the substance, representing arrest rates of 0.4 and 0.3 per 1,000 population, respectively. The arrest rate for cocaine/opiates possession was significantly higher in the nation, at 0.7 per 1,000 population.¹¹

HEROIN

Prevalence

- Among Hoosiers age 12 and older, less than 0.1% currently use heroin (past-month use), 0.2% used it in the past year, and 1.1% have used it at least once in their life.¹
- Among Indiana college students, 0.2% had used heroin in the past month (current use).³

Youth Consumption

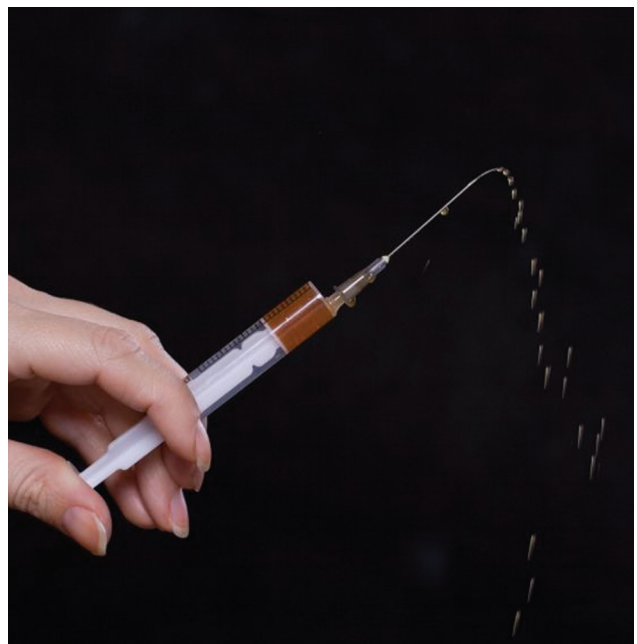
- 2.8% of Indiana high school students have used heroin at least once in their life.⁴
- Among 12th grade students in Indiana, 2.1% have tried heroin at least once in their life and 1.0% used it in the past 30 days.⁵

Impact: Health

- Heroin abuse can cause fatal overdose, spontaneous abortion, collapsed veins, and if injected, the contraction of infectious diseases such as HIV/AIDS and hepatitis B and C.¹⁸
- 5.3% of Indiana treatment admissions reported heroin dependence, significantly less than the U.S. percentage of 14.2%. However, while the nation's percentage slightly decreased from 15.5% in 2001, Indiana's percentage nearly tripled during that time period.⁶
- Among Indiana's treatment admissions, women, whites, and individuals between the ages of 25 to 34 had the highest rates of heroin dependence.⁶
- By the end of 2011, a total of 10,225 Hoosiers were living with HIV disease; 845 (or 8.3%) of these cases can be attributed to injection drug use.¹⁹

Impact: Criminal Justice

- In 2010, almost 2,400 arrests were made in Indiana for possession of cocaine/opiates; over 2,000 arrests were made for sale/manufacture of the substance. This represents arrest rates of 0.4 and 0.3 per 1,000 population, respectively. The arrest rate for cocaine/opiates possession was statistically significantly higher in the nation, at 0.7 per 1,000 population.¹¹



METHAMPHETAMINE (METH)

Prevalence

- Among Hoosiers 12 and older, 0.2% used meth in the past month, 0.8% used it in the past year, and 4.5% used it at least once in their life.¹
- Among Indiana college students, 0.2% reported current (past-month) use of meth.³

Youth Consumption

- 3.9% of Indiana high school students have tried meth at least once in their life.⁴
- In Indiana, 0.5% of 8th grade students, 0.9% of 10th grade students, and 1.1% of 12th grade students reported current (past-month) meth use.⁵



Impact: Health

- Health consequences of meth use include cardiovascular problems; stroke; brain, liver, and kidney damage; severe tooth decay ("meth mouth"); increased risk of STD/HIV transmission and hepatitis; mental illness; and death.²⁰
- The percentage of treatment admissions listing meth as their primary drug increased significantly from 1.5% in 2000 to 4.7% in 2010 (the 2010 U.S. rate of 5.7% was statistically higher).⁶
- Meth users in treatment were primarily female, white, and between 35 and 44 years of age.⁶

Impact: Criminal Justice

- From January 1 to December 31, 2011, a total of 1,363 clandestine meth labs were seized by the Indiana State Police.²¹
- The number of children located at meth labs by the Indiana State Police fell from 172 in 2004 to 124 in 2007, but increased to a new high of 362 children in 2011.²¹
- In 2010, over 2,000 arrests were made in Indiana for possession of meth and other synthetic drugs and over 900 arrests for sale/manufacture of the drugs, representing arrest rates of 0.3 and 0.1 per 1,000 population, respectively.¹¹

PRESCRIPTION DRUG ABUSE

Prevalence

- The three most commonly abused types of prescription medicine are pain relievers (opioids), central nervous system depressants (sedatives, tranquilizers, hypnotics), and stimulants (used to treat attention deficit disorders, narcolepsy, and weight loss).²²
- In 2011, 12.7 million prescription drugs (controlled substances), primarily pain relievers (5.8 million), were dispensed to Indiana residents.²³
- Among Hoosiers age 12 and older, 2.7% reported current (past-month) abuse of psychotherapeutics, 7.6% abused them in the past year, and 20.7% abused them at least once in their life.¹
- Past-year prevalence for nonmedical pain reliever use in Indiana residents ages 12 and older was 5.7%. Young Hoosiers ages 18 to 25 had the highest rate of past-year use (14.4%).¹
- Among Indiana college students, 5.3% reported current (past-month) use of prescription medication not prescribed to them, and 1.3% of students reported current (past-month) misuse of their own prescription medication.³

Youth Consumption

- 7.0% of young Hoosiers ages 12 to 17 abused pain relievers in the past year.¹
- In Indiana, 2.7% of 8th grade students, 5.2% of 10th grade students, and 5.9% of 12th grade students indicated current (past-month) misuse of prescription drugs.⁵

Impact: Health

- 10.8% of treatment admissions reported prescription drug dependence, significantly higher than the U.S. rate of 10.2%.⁶
- Admissions for pain reliever and sedative/tranquilizer dependence increased significantly from 2000 to 2010 in Indiana, while admissions for stimulant abuse remained stable.⁶
- Prescription drug abusers in treatment were primarily female and white.⁶

Impact: Criminal Justice

- In Indiana, almost 3,500 arrests were made in 2010 for possession of barbiturates (sedatives) and Benzedrine (a stimulant); 931 arrests were made for sale/manufacture of these substances. This represents arrest rates of 0.5 and 0.1 per 1,000 population, respectively. Indiana's arrest rate for possession was statistically lower than the national rate of 0.8, and the arrest rate for sale/manufacture was similar to the national rate of 0.2.¹¹

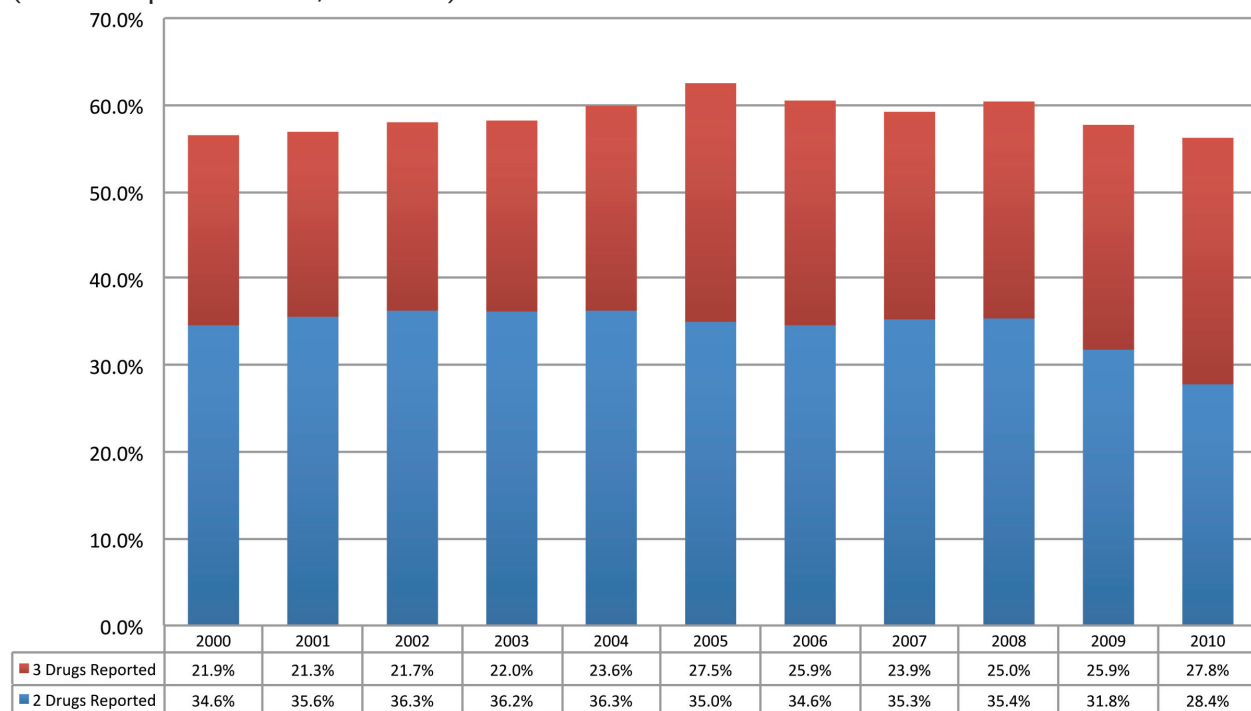


POLYSUBSTANCE ABUSE

Prevalence

- Polysubstance abuse is a serious pattern of drug use that involves the consumption of two or more drugs at a time.
- Among the Indiana treatment population, 56.2% reported use of two or more drugs; the percentage was statistically significantly higher in Indiana compared to the nation (55.1%).⁶
- The percentage of treatment admissions with polysubstance abuse has remained stable in Indiana since 2000. For the percentages of Indiana treatment admissions with reported use of two substances and three substances, see Figure 1.⁶
- Much of the substance use in Indiana involves using two or more substances, most frequently alcohol together with another drug.⁶
- The most common drug clusters identified in Indiana were (a) alcohol and marijuana; (b) alcohol, cocaine, and marijuana; and (c) alcohol, marijuana, and a drug in the “other drug” category.⁶

Figure 1. Percentage of Indiana Treatment Episodes with Reported Use of Two Substances and Three Substances (Treatment Episode Data Set, 2000-2010)



Source: Substance Abuse and Mental Health Data Archive, 2010

References

- 1 Substance Abuse and Mental Health Services Administration. (2012). *National Survey on Drug Use and Health*. Retrieved December 12, 2012, from <http://www.samhsa.gov/data/NSDUH.aspx>
- 2 Centers for Disease Control and Prevention. (2011). *Behavioral Risk Factor Surveillance System Survey Data*. Retrieved December 12, 2012, from <http://apps.nccd.cdc.gov/brfss/>
- 3 Indiana Collegiate Action Network. (2012). *Indiana College Substance Use Survey, 2012*. Retrieved December 12, 2012, from http://www.drugs.indiana.edu/publications/icsus/ICSUS_Survey_2012.pdf
- 4 Centers for Disease Control and Prevention. (1991-2011). *High School Youth Risk Behavior Survey Data*. Retrieved December 12, 2012, from <http://apps.nccd.cdc.gov/youthonline>
- 5 Gassman, R., Jun, M. K., Samuel, S., Agley, J. D., Lee, J., Agley, B. D., Oi, S. E., Pardue, N. L., Pardue, S. E., Quiroz, J. E., Shuffle, L. A., Smith, J. N., & Smith, M. D. (2012). *Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents*. Bloomington, IN: Indiana Prevention Resource Center.
- 6 Substance Abuse and Mental Health Data Archive. (2010). *Treatment Episode Data Set - Admissions (TEDS-A), 2010*. Available at <http://www.icpsr.umich.edu/icpsrweb/SAMHDA/browse>
- 7 Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team. (2012). *Alcohol-related deaths in Indiana by county, 2000-2010*. Dataset made available to the Center for Health Policy at IUPUI (December 14, 2012).
- 8 Centers for Disease Control and Prevention. (2012a). *CDC WONDER underlying cause of death (detailed mortality)*. Retrieved December 12, 2012, from <http://wonder.cdc.gov/>
- 9 Centers for Disease Control and Prevention. (2001-2005). *Alcohol-related disease impact (ARDI)*. Retrieved January 11, 2012, from <http://apps.nccd.cdc.gov/ardi/Homepage.aspx>
- 10 Indiana State Police. (2012). *Automated Reporting Information Exchange System (ARIES), Vehicle Crash Records System*. Database maintained by the Indiana State Police and made available to the Center for Criminal Justice Research, Public Policy Institute, School of Public and Environmental Affairs, Indiana University–Purdue University Indianapolis (March 1, 2012).
- 11 National Archive of Criminal Justice Data, Inter-university Consortium for Political and Social Research, University of Michigan. (2010). *Uniform Crime Reporting Program*. Available at <http://www.icpsr.umich.edu/NACJD/>
- 12 Indiana State Department of Health, Tobacco Prevention and Cessation Commission. (2011). *Indiana Youth Tobacco Survey, 2000-2010*. Dataset made available to the Center for Health Policy at IUPUI (September 27, 2011).
- 13 Centers for Disease Control and Prevention. (2012b). *Smoking and tobacco use: Fact sheets*. Retrieved December 12, 2012, from http://www.cdc.gov/tobacco/data_statistics/fact_sheets/index.htm
- 14 Centers for Disease Control and Prevention. (2004). *Smoking-attributable mortality, morbidity, and economic costs (SAMMEC)*. Retrieved March 28, 2012, from <http://apps.nccd.cdc.gov/sammec/index.asp>
- 15 Centers for Disease Control and Prevention. (2012). *Health effects of secondhand smoke*. Retrieved April 2, 2013, from http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/health_effects/index.htm
- 16 National Institute on Drug Abuse. (2012). *NIDA InfoFacts: Marijuana*. Retrieved January 10, 2013, from <http://www.nida.nih.gov/Infofacts/marijuana.html>
- 17 National Institute on Drug Abuse. (2010-a). *Cocaine: Abuse and addiction*. Retrieved January 25, 2013, from <http://www.drugabuse.gov/publications/research-reports/cocaine-abuse-addiction>
- 18 National Institute on Drug Abuse. (2005). *Heroin: Abuse and addiction*. Retrieved January 24, 2013, from <http://www.drugabuse.gov/publications/research-reports/heroin-abuse-addiction>

- 19 Indiana State Department of Health. (2011). *Spotlight on HIV/STD/viral hepatitis – December 2010*. Retrieved January 31, 2013, from <http://www.in.gov/isdh/25337.htm>
- 20 National Institute on Drug Abuse. (2010-b). *NIDA InfoFacts: Methamphetamine*. Retrieved February 11, 2013, from <http://www.drugabuse.gov/publications/infofacts/methamphetamine>
- 21 Indiana State Police. (2013). *Final 2010 ISP lab stats*. Received February 6, 2013, from Niki Crawford, First Sergeant Commander, Methamphetamine Suppression Section, in an e-mail to the Center for Health Policy, University Richard M. Fairbanks School of Public Health at IUPUI.
- 22 National Institute on Drug Abuse. (2011). *Research report series: Prescription drugs abuse and addiction*. Retrieved March 6, 2012, from <http://www.nida.nih.gov/ResearchReports/Prescription/Prescription.html>
- 23 Indiana Board of Pharmacy. (2012). *INSPECT datasets for 2011*. Received May 26, 2012, from the Indiana Board of Pharmacy, Indiana Professional Licensing Agency.

About Substance Abuse in Indiana

This issue brief provides a concise overview of alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, non-medical prescription drug abuse, and polysubstance abuse in Indiana.

For detailed analysis of substance abuse in Indiana, see *The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2012*, a comprehensive epidemiologic profile created by the Indiana University Center for Health Policy for the State Epidemiology and Outcomes Workgroup (SEOW). This and other reports are available at the Indiana University Center for Health Policy Web site (<http://www.healthpolicy.iupui.edu/SEOW>) or through the Indiana Prevention Resource Center's SPF SIG website (<http://www.drugs.indiana.edu/consult-spf.html>).

Funding for these reports was provided by the Indiana Family and Social Services Administration/Division of Mental Health and Addiction (DMHA) through the Substance Abuse Prevention and Treatment (SAPT) Block Grant CFDA 93.959 from the Substance Abuse and Mental Health Services Administration (SAMHSA).

For questions and additional information, please contact Julia Olsen, DMHA Bureau Chief for Mental Health Promotion and Addiction Prevention (phone: 317-232-7894; e-mail: Julia.Olsen@fssa.in.gov).

ADDRESS SERVICE REQUESTED



**RICHARD M. FAIRBANKS
SCHOOL OF PUBLIC HEALTH**

INDIANA UNIVERSITY
IUPUI

714 N. Senate Ave., Ste. 220
Indianapolis, IN 46202
www.healthpolicy.iupui.edu

