

The NSDUH Report

October 4, 2011

Substance Use among American Indian or Alaska Native Adolescents

In Brief

- Compared with the national average for adolescents aged 12 to 17, American Indian or Alaska Native adolescents had higher rates of past month cigarette use (16.8 vs. 10.2 percent), marijuana use (13.8 vs. 6.9 percent), and nonmedical use of prescription-type drugs (6.1 vs. 3.3 percent)
- The higher rates of substance use among American Indian or Alaska Native adolescents compared with national averages also were generally found among males, females, and across age groups
- Among adolescents aged 15 to 17, the rate of nonmedical use of prescription-type drugs in the past month among American Indians or Alaska Natives was higher than the national average (8.5 vs. 4.4 percent)

Although the American Indian or Alaska Native population is relatively small compared with other racial/ethnic groups in the United States, this population is disproportionately affected by a variety of health problems, including substance abuse. Significant research has been aimed toward the American Indian or Alaska Native population by health providers and researchers to better understand and address their health needs. Particular interest has been focused on adolescents in an effort to help curb and prevent substance use among American Indian or Alaska Native youth. Monitoring substance use among American Indian or Alaska Native youth is important for informing prevention and treatment efforts and in reducing the substantial short- and long-term health, social, and economic costs that substance use imposes on these youth, and on their families and communities.¹

This report examines substance use among non-Hispanic American Indian or Alaska Native adolescents (hereafter referred to as “American Indian or Alaska Native adolescents”) aged 12 to 17, using combined data from the 2004 to 2009 National Surveys on Drug Use and Health (NSDUHs).² The report presented here is one in a series of reports intended to describe adolescent substance use within racial and ethnic subpopulations of the United States.

Demographic Characteristics

Combined 2004 to 2009 NSDUH data indicate that an annual average of about 150,000 persons aged 12 to 17—0.6 percent of the total population in this age group—identified themselves as non-Hispanic American Indian or

Figure 1. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Compared with the National Average: 2004 to 2009

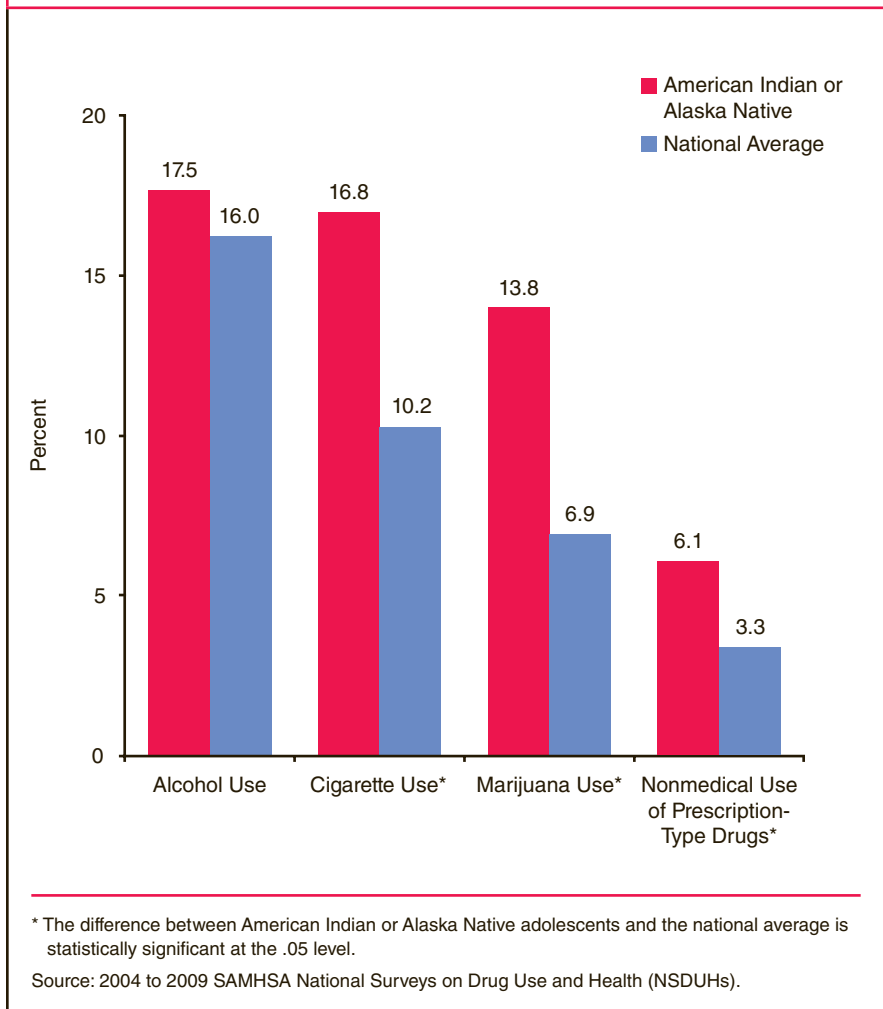
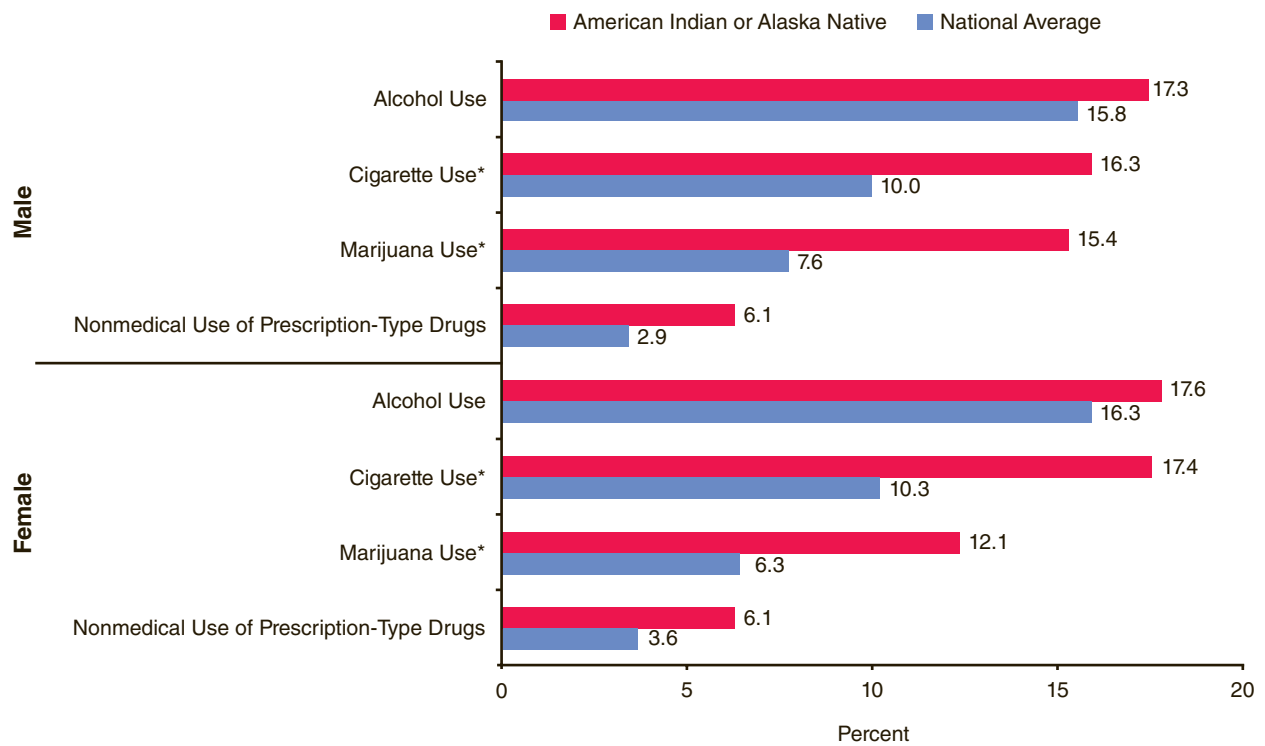


Table 1. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Compared with the National Average, by Age Group: 2004 to 2009

Age Group	Alcohol Use		Cigarette Use		Marijuana Use		Nonmedical Use of Prescription-Type Drugs	
	American Indians or Alaska Natives (%)	National Average (%)	American Indians or Alaska Natives (%)	National Average (%)	American Indians or Alaska Natives (%)	National Average (%)	American Indians or Alaska Natives (%)	National Average (%)
Aged 12-14	10.2	6.2	7.7*	3.5	5.6*	2.0	3.8	2.0
Aged 15-17	24.9	25.4	26.2*	16.5	22.2*	11.6	8.5*	4.4

* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.
Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Figure 2. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Compared with the National Average, by Gender: 2004 to 2009



* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.
 Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Alaska Natives, with no other race reported. American Indian or Alaska Native adolescents were similar to the national average in terms of age and gender distributions. Compared with the national average, however, American Indian or Alaska Native adolescents were twice as likely to be living in poverty³ (37.2 vs. 18.1 percent) and were more likely to live in non-metropolitan areas (50.1 vs. 16.5 percent).

Past Month Substance Use

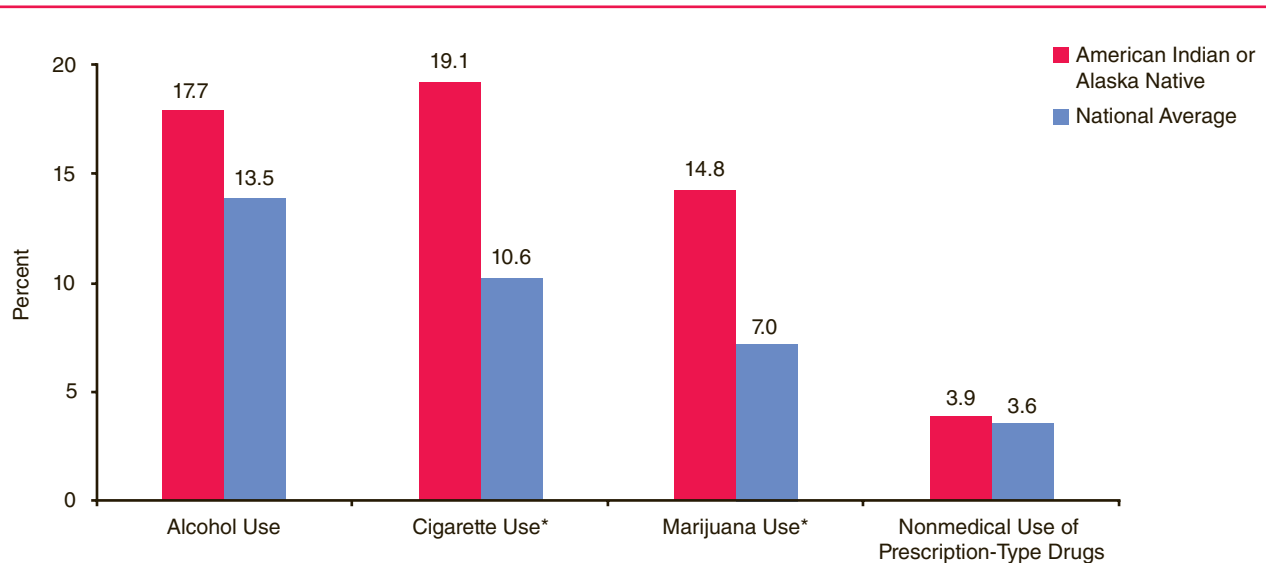
Substance use rates were generally higher among American Indian or Alaska Native adolescents compared with national averages (Figure 1).⁴ The greatest differences were found for cigarette use (16.8 vs. 10.2 percent) and marijuana use (13.8 vs. 6.9 percent). The

rate of nonmedical use of prescription-type drugs among American Indian or Alaska Native adolescents was almost twice that of the national rate (6.1 vs. 3.3 percent). The rate of past month alcohol use among American Indian or Alaska Native youths was similar to the national rate.

Substance Use by Age Group

Compared with the national averages for 12 to 14 year olds, American Indians or Alaska Natives in this age group had higher rates of past month cigarette use (7.7 vs. 3.5 percent) and marijuana use (5.6 vs. 2.0 percent) (Table 1). Rates of past month alcohol use and nonmedical use of prescription-type drugs among American Indian or Alaska

Figure 3. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Living in Poverty Compared with the National Average Living in Poverty: 2005 to 2009



* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.

Source: 2005 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Native adolescents in this age group were not statistically different than those for same-aged adolescents in the Nation.

Compared with the national averages for 15 to 17 year olds, American Indians or Alaska Natives in this age group had higher rates of past month cigarette use (26.2 vs. 16.5 percent), marijuana use (22.2 vs. 11.6 percent), and nonmedical use of prescription-type drugs (8.5 vs. 4.4 percent). However, rates of past month alcohol use among American Indian or Alaska Native adolescents in this age group were similar to those for same-aged adolescents in the Nation as a whole.

Substance Use by Gender

Compared with the national averages for adolescent females, adolescent American Indian or Alaska Native females had higher rates of past month cigarette use (17.4 vs. 10.3 percent) and marijuana use (12.1 vs. 6.3 percent); rates of past month alcohol use and

nonmedical use of prescription-type drugs were similar (Figure 2). Similar patterns were found among adolescent males, with 16.3 percent of American Indian or Alaska Native males smoking cigarettes compared with 10.0 percent of males in the Nation and with 15.4 percent of American Indian or Alaska Native males using marijuana compared with 7.6 percent of males in the Nation as a whole.

Substance Use among Adolescents Living in Poverty

The rate of past month cigarette use among American Indian or Alaska Native adolescents living in poverty was higher than the national average for adolescents living in poverty (19.1 vs. 10.6 percent) as was the rate of past month use of marijuana (14.8 vs. 7.0 percent) (Figure 3). Rates of past month alcohol use and nonmedical use of prescription-type drugs did not differ significantly from the national averages for adolescents living in poverty.

Discussion

These data highlight the need for ongoing efforts to develop and implement behavioral health services for American Indian or Alaska Native adolescents. Furthermore, with 562 federally recognized tribal nations and Alaska Native villages where more than 200 tribal languages are spoken, prevention and treatment efforts aimed at American Indian or Alaska Native adolescents should be appropriately sensitive to the rich diversity of cultures among this population.¹ For example, effective prevention approaches may include those that incorporate American Indian or Alaska Native values, are provided in non-stigmatized settings, and involve the development of behavioral health systems that support traditional practices and teachings.⁵

End Notes

- ¹ Hawkins, E. H., Cummins, L. H., & Marlatt, G. A. (2004). Preventing substance abuse in American Indian and Alaska Native youth: Promising strategies for healthier communities. *Psychological Bulletin*, 130(2), 304-323.
- ² NSDUH asks a series of questions about race/ethnicity. First, respondents are asked about their Hispanic origin; then, they are asked to identify which racial grouping best describes them: White, Black or African American, American Indian or Alaska Native, Native Hawaiian, Other Pacific Islander, Asian, or other. Respondents may select more than one race. For this report, American Indian or Alaska Native refers to persons identifying themselves as American Indian or Alaska Native only. Persons identifying as both American Indian or Alaska Native and Hispanic or as both American Indian or Alaska Native and another racial group are not included.
- ³ NSDUH gathers data on family income, size, and composition (i.e., number of children) and respondent's age. This information is used to determine the respondent's poverty level. The poverty level is calculated as a percentage of the U.S. Census Bureau's poverty threshold by dividing the respondent's reported total family income by the appropriate poverty threshold amount. If a family's total income is less than the family's poverty threshold, then that family and every individual in it is considered to be living in poverty (i.e., less than 100 percent of the U.S. census poverty threshold). The poverty variable is available for the years from 2005 to 2009; therefore, information for this estimate is restricted to combined data from these years.
- ⁴ Nonmedical use of prescription type drugs is defined as the use of prescription-type drugs not prescribed for the respondent by a physician or used only for the experience or feeling they caused. Nonmedical use of any prescription-type pain reliever, sedative, stimulant, or tranquilizer does not include over-the-counter drugs; nonmedical use of stimulants includes methamphetamine use.
- ⁵ Goodkind, J. R., Ross-Toledo, K., John, S., Hall, J. L., Ross, L., Freeland, L., Coletta, E., Becenti-Fundark, T., Poola, C., Begay-Roanhorse, R., & Lee, C. (2010). Promoting healing and restoring trust: Policy recommendations for improving behavioral health care for American Indian/Alaska Native adolescents. *American Journal of Community Psychology*, 46, 386-394.

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Findings from SAMHSA's 2004 to 2009 National Surveys on Drug Use and Health (NSDUHs)

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The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2004 to 2009 data used in this report are based on information obtained from 135,311 persons aged 12 to 17, including 1,907 American Indians or Alaska Natives. 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 NSDUH Report is prepared by the Center for Behavioral Health Statistics and Quality (CBHSQ), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information on the most recent NSDUH is available in the following two-volume publication:

Office of Applied Studies. (2010). *Results from the 2009 National Survey on Drug Use and Health: Volume I. Summary of national findings* (HHS Publication No. SMA 10-4586Findings, NSDUH Series H-38A). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2010). *Results from the 2009 National Survey on Drug Use and Health: Volume II. Technical appendices and selected prevalence tables* (HHS Publication No. SMA 10-4586Appendices, NSDUH Series H-38B). Rockville, MD: Substance Abuse and Mental Health Services Administration.

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