

The DASIS Report

August 19, 2005

Hispanic Substance Abuse Treatment Admissions: 2003

Hispanics are a large and growing segment of the U.S. population. In 2003, Hispanics made up 14 percent of the U.S. population.¹

In Brief

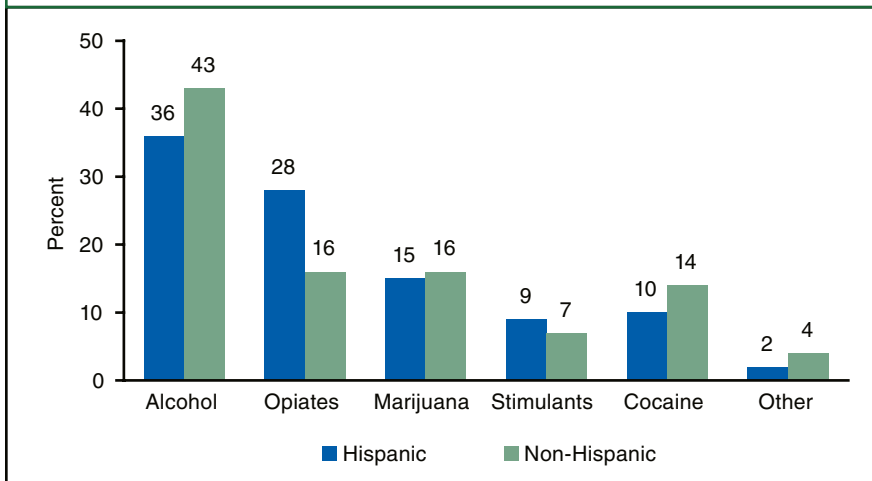
- Hispanic admissions were more likely to report opiate abuse than non-Hispanic admissions (28 vs. 16 percent)
- A greater proportion of Hispanic admissions were male (78 percent) than non-Hispanic admissions (68 percent)
- Puerto Rican admissions most frequently reported opiates as the primary substance of abuse, while other Hispanic admissions most frequently reported alcohol

Similarly, 13 percent of substance abuse treatment admissions reported to the Treatment Episode Data Set (TEDS) for 2003 involved Hispanics. The Treatment Episode Data Set (TEDS) is an annual compilation of data on the demographic characteristics and substance abuse problems of substance abuse treatment admissions.

The term “Hispanic” describes a population that includes several ethnic subgroups representing different countries of origin. TEDS data permit separate analysis of some of these ethnic subgroups, specifically, Mexican, Puerto Rican, Cuban, and Other Hispanic.² In 2003, about 238,000 TEDS admissions were Hispanic. Of these, 41 percent were Mexican, 34 percent were Puerto Rican, 3 percent were Cuban, and 22 percent were Other Hispanic.

This report compares the characteristics of Hispanic admissions to those of

Figure 1. Admissions to Substance Abuse Treatment, by Ethnicity and Primary Substance of Abuse: 2003



Source: 2003 SAMHSA Treatment Episode Data Set (TEDS).

non-Hispanic admissions of known race/ethnicity and compares subgroups within Hispanic admissions.

Primary Substance of Abuse

In 2003, the most common primary substances of abuse³ among Hispanic admissions were alcohol (36 percent), opiates (28 percent), and marijuana (15 percent) (Figure 1). Hispanic admissions were more likely to report primary opiate abuse than non-Hispanic admissions (28 vs. 16 percent), and less likely to report primary alcohol abuse (36 vs. 43 percent).

Hispanic subgroups reported different patterns of primary substance abuse admissions (Figure 2). Among Puerto Rican admissions, opiates were the most common primary substance of abuse (48 percent), followed by alcohol (28 percent). In contrast, Mexican admissions most often reported alcohol as the primary substance of abuse (38 percent), followed by stimulants, opiates, and marijuana (18, 17, and 17

percent, respectively). For Cuban admissions, alcohol was also the most common primary substance of abuse (34 percent), and cocaine was the second most common substance (23 percent).

Primary stimulant abuse increased from 4 percent of all Hispanic admissions in 1999⁴ to 9 percent in 2003, and varied widely among ethnic subgroups. Mexican admissions were the subgroup most likely to report primary stimulant abuse (18 percent)—a sharp increase from 1999, when this figure was only 7 percent.⁵ By contrast, in 2003, stimulants accounted for only 1 percent of Puerto Rican admissions.

Frequency of Use

Daily use of the primary substance in the month prior to admission was reported by 46 percent of Hispanic admissions compared with 42 percent of non-Hispanic admissions. Accordingly, Hispanic admissions were less likely to report no use in the past month (23 vs. 27 percent), and equally likely to report intermediate⁶ frequencies of use (31 percent each).

Sex Differences

Hispanic admissions were 78 percent male and 22 percent female compared with 68 percent male and 32 percent female among non-Hispanic admissions.

Among Hispanic male admissions, abuse of alcohol was the most common primary substance abuse problem (39 percent), followed by opiates (29 percent) and marijuana (15 percent). However, among Hispanic female admissions, opiates and alcohol were equally likely to be reported as the primary substance of abuse (26 percent each), followed by stimulants (17 percent).

Age

On average, Hispanic admissions in 2003 were slightly younger than non-Hispanics at admission (33 vs. 34 years of age). The age distribution of Hispanic admissions varied among ethnic subgroups. Among Mexicans and Other Hispanics, the largest percentage of admissions was between the ages of 25 and 34 (27 and 29 percent, respectively). The largest percentage of Cuban and Puerto Rican admissions, on the other hand, was between the ages of 35 and 44 (31 and 35 percent, respectively).

Age by Primary Substance of Abuse

Among Hispanic admissions, the distribution of the primary substance of abuse varied by age group (Figure 3). Marijuana was the most common primary substance of abuse for Hispanic admissions younger than age 18 (64 percent); this was also the case for non-Hispanic admissions in this age group (63 percent). Alcohol

Figure 2. Hispanic Admissions, by Primary Substance of Abuse and Ethnic Subgroup: 2003

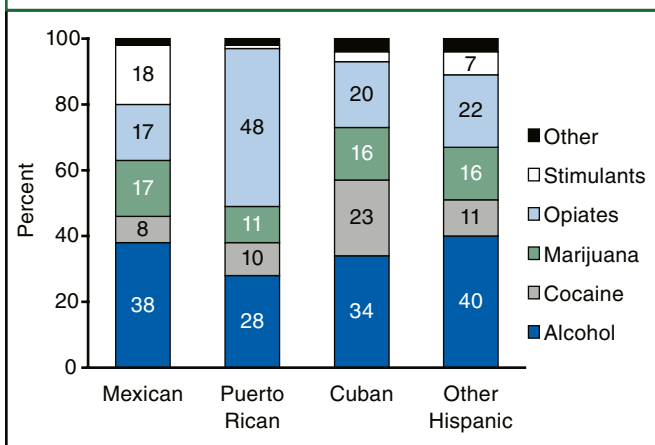
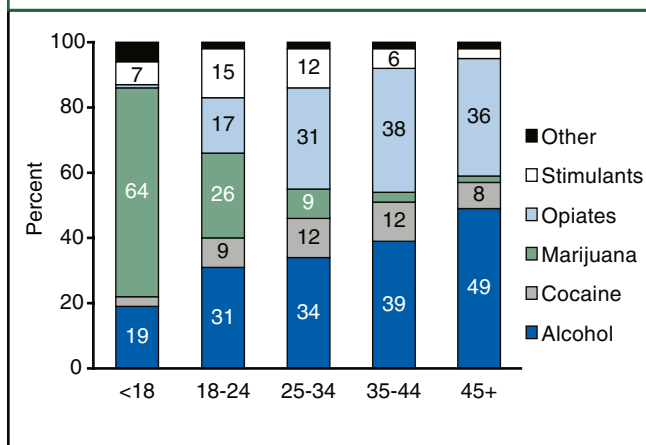


Figure 3. Hispanic Admissions, by Primary Substance of Abuse and Age Group: 2003



was the most common primary substance of abuse for Hispanic admissions age 45 and older (49 percent). However, among Hispanics aged 25 to 44, opiates and alcohol were reported as the primary substance of abuse in nearly equal proportions. Among Hispanic admissions aged 25 to 34, 31 percent reported opiates and 34 percent reported alcohol as the primary substance of abuse. Among Hispanic admissions aged 35 to 44, 38 percent reported opiates and 39 percent reported alcohol as the primary substance of abuse.

End Notes

- ¹ U.S. Bureau of the Census. (2004, June). *Annual Estimates of the Population by Sex, Race and Hispanic or Latino Origin for the United States: April 1, 2000 to July 1, 2003 (NC-EST2003-03)*. Retrieved May 10, 2005, from <http://www.census.gov/popest/national/asrh/NC-EST2003/NC-EST2003-03.xls>.
- ² The category "Other Hispanic" includes both those identified as being from other Spanish-speaking countries and those who were identified as Hispanic with the country of origin not identified. In 2003, some States (AZ, LA, NH, NV, OK, WI, and WV) reported only "Other Hispanic" subgroup admissions.
- ³ The *primary substance of abuse* is the main substance reported at the time of admission.
- ⁴ Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (September 20, 2002). *The DASIS report: Hispanics in substance abuse treatment: 1999*. Rockville, MD.
- ⁵ The percentage of stimulant admissions of Mexican ethnicity was reported as 8 percent, but it was recalculated as 7 percent for this report using updated 1999 data.
- ⁶ Respondents may also report using a substance 3-6 times in the past week, 1-2 times in the past week, or 1-3 times in the past month.

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 is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once. State admission data are reported to TEDS by the Single State Agencies (SSAs) for substance abuse treatment. There are significant differences among State data collection systems. Sources of State variation include completeness of reporting, facilities reporting TEDS data, clients included, and treatment resources available. See the annual TEDS reports for details. Approximately 1.8 million records are included in TEDS each year.

The DASIS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and by RTI International in Research Triangle Park, North Carolina (RTI International is a trade name of Research Triangle Institute).

Information and data for this issue are based on data reported to TEDS through April 11, 2005.

Access the latest TEDS reports at: <http://www.oas.samhsa.gov/dasis.htm>
 Access the latest TEDS public use files at: <http://www.oas.samhsa.gov/SAMHDA.htm>
 Other substance abuse reports are available at: <http://www.oas.samhsa.gov>



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