National Survey on Drug Use and Health

The NSDUH Report

October 7, 2005

Substance Abuse or Dependence in Metropolitan and Non-Metropolitan Areas: 2004 Update

In Brief

- In 2004, persons aged 12 or older who lived in metropolitan areas were more likely to abuse or be dependent on alcohol or an illicit drug during the past year than those living in non-metropolitan areas
- Males living in metropolitan areas were more likely to abuse or be dependent on alcohol or an illicit drug than males living in nonmetropolitan areas
- Rates of past year substance abuse or dependence changed little between 2002, 2003, and 2004 in either metropolitan or non-metropolitan areas

he National Survey on Drug Use and Health (NSDUH) asks persons aged 12 or older to report on their use of alcohol and illicit drugs, as well as their symptoms of substance abuse or dependence during the past year. Any illicit drug refers to marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically.¹ NSDUH defines dependence on or abuse of alcohol or illicit drugs using criteria specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV),2 including such symptoms as withdrawal, tolerance, use in dangerous situations, trouble with the law, and interference in major obligations at work, school, or home during the past year. Responses were analyzed by the type of county in which the respondents lived at the time of the interview. Metropolitan areas include counties that are inside metropolitan statistical areas (MSAs), as defined by the Office of Management and Budget.^{3,4} Nonmetropolitan areas include counties that are not inside MSAs.

Figure 1. Percentages of Persons Aged 12 or Older Meeting Criteria for Past Year Alcohol or Illicit Drug Abuse or Dependence, by County Type and Age Group: 2004

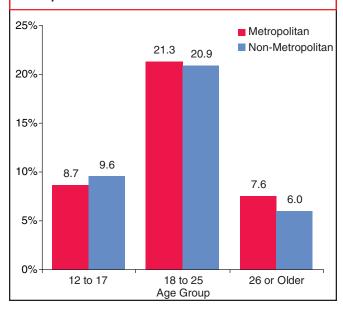
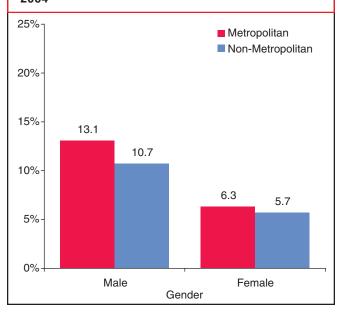


Figure 2. Percentages of Persons Aged 12 or Older Meeting Criteria for Past Year Alcohol or Illicit Drug Abuse or Dependence, by County Type and Gender: 2004



Metropolitan and Non-Metropolitan Areas

According to the 2004 NSDUH, 200 million persons aged 12 or older (83.1 percent) lived in counties that were in metropolitan areas, and 40.5 million (16.9 percent) lived in counties that were in non-metropolitan areas.

Prevalence of Abuse or Dependence

In 2004, 22.5 million persons aged 12 or older (9.4 percent) abused or were dependent on alcohol or illicit drugs during the year before the survey. Persons who lived in metropolitan areas were more likely to abuse or be dependent on alcohol or illicit drugs during the past year than those living in non-metropolitan areas (9.6 vs. 8.2 percent).

Demographic Differences

Among youths (aged 12 to 17) and young adults (aged 18 to 25), rates of past year abuse or dependence were similar for those who lived in metropolitan areas and those who lived in nonmetropolitan areas (Figure 1). However, among adults aged 26 or older, the rate of past year abuse or dependence was higher among those in metropolitan areas (7.6 percent) than in nonmetropolitan areas (6.0 percent).

Among males aged 12 or older, those living in metropolitan areas (13.1 percent) were more likely to abuse or be dependent on alcohol or illicit drugs during the past year than those living in non-metropolitan areas (10.7 percent) (Figure 2). However, rates of past year abuse or dependence were similar among females in metropolitan and non-

metropolitan areas. Among whites and Asians aged 12 or older, those living in metropolitan areas were more likely to abuse or be dependent on alcohol or illicit drugs than those living in non-metropolitan areas (Table 1). Among blacks and Hispanics aged 12 or older, rates of past year substance dependence or abuse were similar for those living in metropolitan areas and those living in non-metropolitan areas.

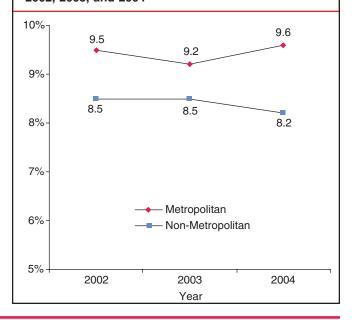
Changes from 2002 to 2004

The rates of alcohol or illicit drugs abuse or dependence among persons aged 12 or older were 9.4 percent in 2002, 9.1 percent in 2003, and 9.4 percent in 2004. There were no significant differences between the rates of substance abuse or dependence between 2002, 2003, or 2004 for those who

Table 1. Percentages of Persons Aged 12 or Older Meeting Criteria for Past Year Alcohol or Illicit Drug Abuse or Dependence, by County Type and Race/ Ethnicity: 2004

Race/Ethnicity*	Percent	Standard Error
Non-Hispanic white		
Metropolitan	10.0	0.26
Non-metropolitan	7.8	0.37
Non-Hispanic black		
Metropolitan	8.3	0.51
Non-metropolitan	8.2	1.26
Asian		
Metropolitan	4.8	0.80
Non-metropolitan	1.7	1.10
Hispanic		
Metropolitan	9.8	0.50
Non-metropolitan	9.6	1.85

Figure 3. Percentages of Persons Aged 12 or Older Meeting Criteria for Past Year Alcohol or Illicit Drug Abuse or Dependence, by County Type and Year: 2002, 2003, and 2004



lived in metropolitan areas or for those who lived in non-metropolitan areas (Figure 3). The rates of substance abuse or dependence were significantly higher for those who lived in metropolitan areas compared with those who lived in non-metropolitan areas in both 2002 (9.5 vs. 8.5 percent) and 2004 (9.6 vs. 8.2 percent). In 2003, however, there was no significant difference between the rates of

substance abuse or dependence between metropolitan (9.2 percent) and non-metropolitan areas (8.5 percent).

End Notes

- Nonmedical use is defined as use of prescription-type drugs not prescribed for the respondent by a physician or used only for the experience or feeling they caused.
- American Psychiatric Association. (1994).
 Diagnostic and statistical manual of mental disorders (4th ed.). Washington, DC: Author.
- Office of Management and Budget. (2003, June
 Revised definitions of metropolitan

statistical areas, new definitions of micropolitan statistical areas and combined statistical areas, and guidance on uses of the statistical definitions of these areas (OMB Bulletin No. 03-04). Retrieved August 17, 2005, from http://www.whitehouse.gov/omb/bulletins/b03-04.html

 U.S. Census Bureau. (2005, June 7). About metropolitan and micropolitan statistical areas. Retrieved August 17, 2005, from http://www.census.gov/population/www/ estimates/aboutmetro.html

Table and Figure Notes

* Estimates for American Indian or Alaska Native and Native Hawaiian or Other Pacific Islander respondents are not shown due to small sample sizes.

Source: SAMHSA, 2002, 2003, and 2004 NSDUH.

The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). Prior to 2002, this survey was called the National Household Survey on Drug Abuse (NHSDA). The 2002 data are based on information obtained from 68,126 persons aged 12 or older; the 2003 data are based on information obtained from 67,784 persons aged 12 or older; and the 2004 data are based on information obtained from 67,760 persons aged 12 or older. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

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Information and data for this issue are based on the following publications:

Office of Applied Studies. (2005). Results from the 2004 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 05-4062, NSDUH Series H-28). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2004). Results from the 2003 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 04-3964, NSDUH Series H-25). Rockville, MD: Substance Abuse and Mental Health Services Administration

Office of Applied Studies. (2003). Results from the 2002 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 03-3836, NSDUH Series H-22). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available online: http://www.oas.samhsa.gov

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002, 2003, and 2004 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.

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