National Survey on Drug Use and Health

The NSDUH Report

November 1, 2007

Serious Psychological Distress and Substance Use Disorder among Veterans

very year, thousands of troops depart from military service and rejoin their families and civilian communities. Given the demanding environments of the military and traumatizing experiences of combat, many veterans experience psychological distress that

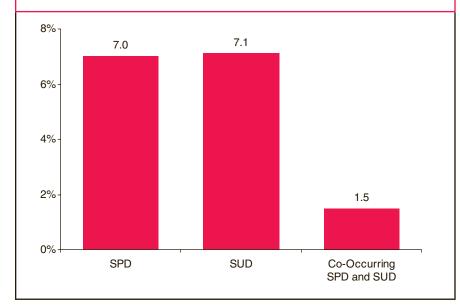
In Brief

- Combined data from 2004 to 2006 indicate that an annual average of 7.0 percent of veterans aged 18 or older experienced past year serious psychological distress (SPD), 7.1 percent met the criteria for a past year substance use disorder (SUD), and 1.5 percent had co-occurring SPD and SUD
- Veterans aged 18 to 25 were more likely than older veterans to have higher rates of past year SPD, SUD, and co-occurring SPD and SUD
- Veterans with family incomes of less than \$20,000 per year were more likely than veterans with higher family incomes to have had SPD, SUD, and co-occurring SPD and SUD in the past year

can be further complicated by substance use and related disorders. Research indicates that male veterans in the general U.S. population are at an elevated risk of suicide. In addition, among veterans of the wars in Iraq and Afghanistan who received care from the Department of Veterans Affairs between 2001 and 2005, nearly one third were diagnosed with mental health and/or psychosocial problems and one fifth were diagnosed with a substance use disorder (SUD).²

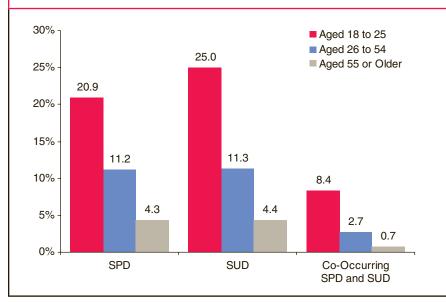
The National Survey on Drug Use and Health (NSDUH) includes questions to assess serious psychological distress (SPD) and substance use disorders. SPD is an overall indicator of nonspecific psychological distress. NSDUH measures past year SPD using the K6 distress questions.^{3,4} The K6 questions measure symptoms of psychological distress during the 1 month in the past 12 months when respondents were at their worst emotionally. NSDUH also asks respondents to report on their use of illicit drugs⁵ and alcohol, as well as symptoms of substance dependence or abuse during the past year. NSDUH defines dependence on or abuse of alcohol or illicit drugs using criteria specified in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental

Figure 1. Prevalence of Serious Psychological Distress (SPD), Substance Use Disorder (SUD), and Co-Occurring SPD and SUD in the Past Year among Veterans: 2004 to 2006



Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

Figure 2. Prevalence of Serious Psychological Distress (SPD), Substance Use Disorder (SUD), and Co-Occurring SPD and SUD in the Past Year among Veterans, by Age: 2004 to 2006



Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

Disorders (DSM-IV).⁶ Substance dependence or abuse includes 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. Individuals who

meet the criteria for either dependence or abuse are said to have an SUD.

NSDUH respondents also are asked about their military veteran status. A veteran is defined as an individual who has served in any of the U.S. Armed Forces but who is not

currently serving in the military.

This report examines past year SPD, SUD, and co-occurring SPD and SUD among veterans aged 18 or older by demographic characteristics. For the purpose of this report, individuals with both SPD and SUD in the past year are said to have co-occurring SPD and SUD. All findings presented in this report are based on combined 2004, 2005, and 2006 NSDUH data. According to NSDUH estimates, 25.9 million military veterans were living in the United States during this 3-year period.

Serious Psychological Distress

Combined data from 2004 to 2006 indicate that an annual average of 7.0 percent of veterans aged 18 or older (an estimated 1.8 million persons annually) experienced SPD in the past year (Figure 1). Veterans aged 18 to 25 were more likely to have had SPD (20.9) percent) than veterans aged 26 to 54 (11.2 percent) or those aged 55 or older (4.3 percent) (Figure 2). Female veterans were twice as likely as male veterans to have had SPD in the past year (14.5 vs. 6.5 percent) (Figure 3). Veterans with family incomes of less than \$20,000 per year were more likely to have had SPD in the past year than veterans with higher family incomes (Figure 4).

Substance Use Disorder

Combined data from 2004 to 2006 indicate that an annual average of 7.1 percent of veterans aged 18 or older (an estimated 1.8 million persons) met the criteria for SUD in the past year (Figure 1). One quarter of veterans aged 18 to 25 met the criteria for SUD in the past year compared with 11.3 percent of veterans aged 26 to 54 and 4.4 percent of veterans aged 55 or older (Figure 2). There was no difference in SUD between male and female veterans (7.2 vs. 5.8 percent) (Figure 3). Veterans with a family income of less than \$20,000 per year (10.8 percent) were more likely to have met the criteria for SUD in the past year than

veterans with a family income of \$20,000 to \$49,999 (6.6 percent), \$50,000 to \$74,999 (6.3 percent), or \$75,000 or more (6.7 percent) (Figure 4).

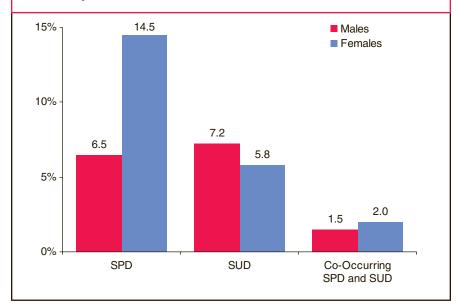
Co-Occurring SPD and SUD

From 2004 to 2006, approximately 1.5 percent of veterans aged 18 or older (an estimated 395,000 persons) had co-occurring SPD and SUD (Figure 1). Increasing age was associated with lower rates of past year co-occurring SPD and SUD, with veterans aged 18 to 25 having the highest rate (8.4 percent) and veterans aged 55 or older having the lowest rate (0.7 percent) (Figure 2). There was no significant difference in co-occurring disorders among males and females (1.5 vs. 2.0 percent, respectively) (Figure 3). Veterans with family incomes of less than \$20,000 per year were more likely to have had co-occurring SPD and SUD in the past year than veterans with higher family incomes (Figure 4).

End Notes

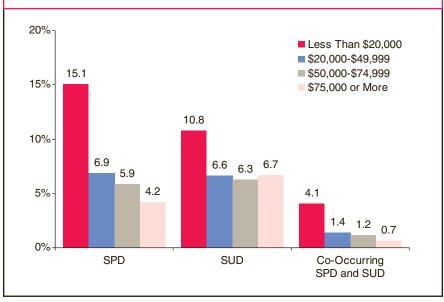
- ¹ Kaplan, M. S., Huguet, N., McFarland, B. H., & Newsom, J. T. (2007). Suicide among male veterans: A prospective population-based study. *Journal of Epidemiology and Community Health*, 61, 619-624.
- ² Seal, K. H., Bertenthal, D., Miner, C. R., Sen, S., & Marmar, C. (2007). Bringing the war back home: Mental health disorders among 103,788 US veterans returning from Iraq and Afghanistan seen at Department of Veterans Affairs facilities. *Archives of Internal Medicine*, 167, 476-482.
- ³ Kessler, R. C., Barker, P. R., Colpe, L. J., Epstein, J. F., Gfroerer, J. C., Hiripi, E., Howes, M. J., Normand, S. L., Manderscheid, R. W., Walters, E. E., & Zaslavsky, A. M. (2003). Screening for serious mental illness in the general population. *Archives* of *General Psychiatry*, 60, 184-189.
- ⁴ The 2004 NSDUH sampling strategy employed a split-sample design in which approximately half of the adult respondents were administered the K6 questions without other mental health symptom questions. In the 2005 and 2006 NSDUHs, all adult respondents were administered only the K6 questions. To ensure comparability across the 3 years of data, the 2004 estimates for SPD and co-occurring SPD and SUD are based on the subsample of adult respondents who were administered only the K6 questions.
- NSDUH defines illicit drugs as marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or any prescription-type drugs used nonmedically.

Figure 3. Prevalence of Serious Psychological Distress (SPD), Substance Use Disorder (SUD), and Co-Occurring SPD and SUD in the Past Year among Veterans, by Gender: 2004 to 2006



Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

Figure 4. Prevalence of Serious Psychological Distress (SPD), Substance Use Disorder (SUD), and Co-Occurring SPD and SUD in the Past Year among Veterans, by Family Income: 2004 to 2006



Source: SAMHSA, 2004, 2005, and 2006 NSDUHs.

- ⁶ American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- Omparisons of veterans' and nonveterans' rates of SUD and SPD would be misleading because veterans, on average, are older and more likely to be male than nonveterans. Multivariate statistical analyses to compare the two groups while controlling for the demographic differences are beyond the scope of this short report.

Suggested Citation

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (November 1, 2007). The NSDUH Report: Serious Psychological Distress and Substance Use Disorder among Veterans. Rockville, MD.

For change of address, corrections, or to be removed from this list, please e-mail: shortreports@samhsa.hhs.gov.

Research findings from the SAMHSA 2004, 2005, and 2006 National Surveys on Drug Use and Health (NSDUHs)

Serious Psychological Distress and Substance Use Disorder among Veterans

- Combined data from 2004 to 2006 indicate that an annual average of 7.0 percent of veterans aged 18 or older experienced past year serious psychological distress (SPD), 7.1 percent met the criteria for a past year substance use disorder (SUD), and 1.5 percent had co-occurring SPD and SUD
- Veterans aged 18 to 25 were more likely than older veterans to have higher rates of past year SPD, SUD, and co-occurring SPD and SUD
- Veterans with family incomes of less than \$20,000 per year were more likely than veterans with higher family incomes to have had SPD, SUD, and co-occurring SPD and SUD in the past year

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 data are based on information obtained from 67,760 persons aged 12 or older, including 45,459 persons aged 18 or older and 2,816 veterans. The 2005 data are based on information obtained from 68,308 persons aged 12 or older, including 45,774 persons aged 18 or older and 2,884 veterans. The 2006 data are based on information obtained from 67,802 persons aged 12 or older, including 44,931 persons aged 18 or older and 2,808 veterans. 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 Office of Applied Studies (OAS), SAMHSA, 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 the following publications:

Office of Applied Studies. (2007). Results from the 2006 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 07-4293, NSDUH Series H-32). Rockville, MD: Substance Abuse and Mental Health Services Administration

Office of Applied Studies. (2006). Results from the 2005 National Survey on Drug Use and Health: National findings (DHHS Publication No. SMA 06-4194, NSDUH Series H-30). Rockville, MD: Substance Abuse and Mental Health Services Administration.

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

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

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002 through 2006 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.

