

# 26

## Substance Abuse

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### **Adverse Consequences of Substance Use and Abuse**

- 26-1 Motor vehicle crash deaths and injuries
  - 26-1a Alcohol-related deaths
  - 26-1b Alcohol-related injuries
  - 26-1c Drug-related deaths
  - 26-1d Drug-related injuries
- 26-2 Cirrhosis deaths
- 26-3 Drug-induced deaths
- 26-4 Drug-related hospital emergency department visits
- 26-5 Alcohol-related hospital emergency department visits
- 26-6 Adolescents riding with a driver who has been drinking
- 26-7 Alcohol- and drug-related violence
- 26-8 Lost productivity

### **Substance Use and Abuse**

- 26-9 Substance-free youth
  - 26-9a Average age at first use, alcohol
  - 26-9b Average age at first use, marijuana
  - 26-9c High school seniors never using substances - Alcohol
  - 26-9d High school seniors never using substances - Illicit drugs
- 26-10 Adolescent and adult use of illicit substances
  - 26-10a Youth using no alcohol or illicit drugs in past 30 days
  - 26-10b Youth using marijuana in past 30 days
  - 26-10c Adults using any illicit drug in past 30 days
- 26-11 Binge drinking
  - 26-11a High school seniors
  - 26-11b College students
  - 26-11c Adults aged 18 years and older
  - 26-11d Adolescents aged 12 to 17 years
- 26-12 Average annual alcohol consumption

- 26-13 Low-risk drinking among adults
- 26-13a Females
- 26-13b Males
- 26-14 Steroid use among adolescents
- 26-14a 8th graders
- 26-14b 10th graders
- 26-14c 12th graders
- 26-15 Inhalant use among adolescents

### **Risk of Substance Use and Abuse**

- 26-16 Peer disapproval of substance abuse
  - One or two alcoholic drinks
  - 26-16a 8th graders
  - 26-16b 10th graders
  - 26-16c 12th graders
  - Trying marijuana or hashish
- 26-16d 8th graders
- 26-16e 10th graders
- 26-16f 12th graders
- 26-17 Perception of risk associated with substance abuse
  - 26-17a Alcohol
  - 26-17b Marijuana
  - 26-17c Cocaine

### **Treatment for Substance Abuse**

- 26-18 Treatment gap for illicit drugs
- 26-19 Treatment in correctional institutions
- 26-20 Treatment for injection drug use
- 26-21 Treatment gap for problem alcohol use

### **State and Local Efforts**

- 26-22 Hospital emergency department referrals
- 26-23 Community partnerships and coalitions
- 26-24 Administrative license revocation laws
- 26-25 Blood alcohol concentration (BAC) levels for motor vehicle drivers

## Adverse Consequences of Substance Use and Abuse

### 26-1. Reduce deaths and injuries caused by alcohol- and drug-related motor vehicle crashes.

#### 26-1a. Alcohol-related deaths.

<b>National Data Source</b>	Fatality Analysis Reporting System (FARS), DOT, NHTSA.
<b>State Data Sources</b>	Police Accident Reports (PARs) (account for 90 percent of the data) and State Traffic Record Systems.
<b>Healthy People 2000 Objective</b>	4.1 (Substance Abuse: Alcohol and Other Drugs) (also 9.23).
<b>Measure</b>	Rate per 100,000 population.
<b>Baseline</b>	5.9 (1998).
<b>Numerator</b>	Number of alcohol-related motor vehicle crash deaths.
<b>Denominator</b>	Number of persons.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>NHTSA defines a fatal crash as alcohol related if either a driver or a nonmotorist has a measurable or estimated blood alcohol concentration (BAC) of 0.01 g/dL or above.</p> <p>BAC is measured as a percentage by weight of alcohol in the blood (expressed as grams per deciliter). A positive BAC level (0.01 g/dL and higher) indicates that alcohol was consumed by the person tested. A BAC of 0.10 g/dL or more indicates that the person was intoxicated.</p> <p>Only deaths that occur within 30 days of the motor vehicle crash are included (less than 2 percent of the total number of deaths occur after 30 days).</p>

FARS data are obtained solely from a State's existing documents, including police crash reports, death certificates (coded to ICD-9 E810-E819), vehicle registration files, and hospital medical reports.

A description of the FARS data set has been published by NHTSA.<sup>1</sup>

See Appendix A for focus area contact information.



### **26-1b. Alcohol-related injuries.**

<b>National Data Source</b>	General Estimates System (GES), DOT, NHTSA.
<b>State Data Sources</b>	Police Accident Reports (PARs) (account for 90 percent of the data) and State Traffic Record Systems.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Rate per 100,000 population.
<b>Baseline</b>	113 (1998).
<b>Numerator</b>	Number of alcohol-related motor vehicle injuries.
<b>Denominator</b>	Number of persons.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>NHTSA defines a nonfatal crash as alcohol related if police indicated on the police accident report that there was evidence of alcohol present. The code does not necessarily mean that a driver or occupant was tested for alcohol.</p> <p>The national estimates produced from GES data may differ from the true values because they are based on a probability sample of crashes and not a census of all crashes. The size of these differences may also vary depending on which sample of crashes is selected.</p>

A description of the GES data set has been published by NHTSA.<sup>1</sup>

See Appendix A for focus area contact information.



### **26-1c. (Developmental) Drug-related deaths.**

**Comments** An operational definition could not be specified at the time of publication.

See Appendix A for focus area contact information.



### **26-1d. (Developmental) Drug-related injuries.**

**Comments** An operational definition could not be specified at the time of publication.

See Appendix A for focus area contact information.



## **26-2. Reduce cirrhosis deaths.**

**National Data Source** National Vital Statistics System (NVSS), CDC, NCHS.

**State Data Source** National Vital Statistics System (NVSS), CDC, NCHS.

**Healthy People 2000 Objective** 4.2 (Substance Abuse: Alcohol and Other Drugs), age adjusted to the 2000 standard population.

**Measure** Rate per 100,000 population (age adjusted—see Comments).

**Baseline** 9.5 (1998).

**Numerator** Number of deaths due to cirrhosis (ICD-9 code 571).

**Denominator** Number of persons.

**Population Targeted** U.S. resident population.

<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment, see Part A, section 5.</p> <p>This objective differs from Healthy People 2000 objective 4.2, which age adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.</p> <p>See Part C for a description of NVSS and Appendix A for focus area contact information.</p>



### **26-3. Reduce drug-induced deaths.**

<b>National Data Source</b>	National Vital Statistics System (NVSS), CDC, NCHS.
<b>State Data Source</b>	National Vital Statistics System (NVSS), CDC, NCHS.
<b>Healthy People 2000 Objective</b>	4.3 (Substance Abuse: Alcohol and Other Drugs), age adjusted to the 2000 standard population.
<b>Measure</b>	Rate per 100,000 population (age adjusted—see Comments).
<b>Baseline</b>	6.3 (1998).
<b>Numerator</b>	Number of deaths due to drug-induced causes (ICD-9 codes 292, 304, 305.2-305.9, E850-E858, E950.0-E950.5, E962.0, E980.0-E980.5).
<b>Denominator</b>	Number of persons.
<b>Population Targeted</b>	U.S. resident population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.

**Comments**

Drug-induced causes of death include not only deaths from dependent and nondependent use of drugs (legal and illegal use), but also poisoning from medically prescribed and other drugs. It excludes accidents, homicides, and other causes indirectly related to drug use. An indepth description of the “drug-induced causes” classification was published by NCHS.<sup>2</sup>

Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment, see Part A, section 5.

This objective differs from Healthy People 2000 objective 4.3, which age adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.

**26-4. Reduce drug-related hospital emergency department visits.**

<b>National Data Source</b>	Drug Abuse Warning Network (DAWN), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.4 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Number.
<b>Baseline</b>	542,544 (1998).
<b>Numerator</b>	Number of emergency department (ED) visits by patients aged 6 to 97 years that were due to the use of illegal drugs or the nonmedical use of legal drugs.
<b>Denominator</b>	Not applicable.
<b>Population Targeted</b>	U.S. resident population.

**Questions Used To Obtain the National Data**

From the 1998 Drug Abuse Warning Network-Emergency Department Report Form:

- (Item 5): Age - Must be 06-97 yrs.
- (Item 9): Reason for taking substance(s) - Mark 'X' one response.
  - Dependence*
  - Suicide attempt or gesture*
  - Psychic effects: "Recreational use" (e.g., to get high, kicks)*
  - Other psychic effects*
  - Unknown*
  - Other (Specify)*
- (Item 12): Alcohol involved - Mark 'X' one response.
- (Item 13): List each drug/substance separately in one of the spaces below - Do NOT list alcohol [Four spaces are provided].
- (Item 16): Source of substance - For each non-alcohol substance listed above, mark 'X' one response.
  - Patient's own legal Rx*
  - Street buy*
  - Other unauthorized procurement (e.g., stolen, gift, etc.)*
  - Other (includes over-the-counter (OTC))*
  - Unknown*

**Expected Periodicity**

Annual.

**Comments**

Nonmedical use is the use of a drug or substance for the purpose of dependence, suicide attempt or gesture, or psychic effect. All prescription drugs, over-the-counter drugs, and substances (heroin/morphine, marijuana/hashish, peyote, glue, aerosols, etc.) are considered.

Alcohol is included only if it is combined with other substances.

The Drug Abuse Warning Network (DAWN) monitors drug-related hospital ED episodes in 21 metropolitan areas and a national sample of hospitals outside the metropolitan areas. Episodes are abstracted from medical records by hospital staff or hired clerks. DAWN gathers data from a nationally representative sample of 508 non-Federal, short-stay hospitals with 24-hour EDs. Data are weighted to produce national estimates.



DAWN reflects drug use among those who use the emergency departments but is not an indication of the overall prevalence of drug use. Changes in the trends can occur due to changes in ED access, drug use prevalence, severity of problems associated with the drugs used, or access to other settings of care.

Information on DAWN can be obtained from the SAMHSA Web site: <http://www.samhsa.gov>.

This objective is adapted from Healthy People 2000 objective 4.4 which measured ED visits as a rate per 100,000 population.

See Appendix A for focus area contact information.



## **26-5. (Developmental) Reduce alcohol-related hospital emergency department visits.**

### **Comments**

An operational definition could not be specified at the time of publication.

The proposed data source is the National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS.

See Part C for a description of NHAMCS and Appendix A for focus area contact information.



## **26-6. Reduce the proportion of adolescents who report that they rode, during the previous 30 days, with a driver who had been drinking alcohol.**

<b>National Data Source</b>	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
<b>State Data Source</b>	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.

<b>Baseline</b>	33 (1999).
<b>Numerator</b>	Number of students in grades 9 through 12 who reported riding, at least once during the 30 days preceding the survey, with a driver who had been drinking alcohol.
<b>Denominator</b>	Number of students in grades 9 through 12.
<b>Population Targeted</b>	Students in grades 9 through 12.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1999 Youth Risk Behavior Surveillance System:</p> <ul style="list-style-type: none"> <li>➤ <i>During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?</i></li> </ul> <p style="margin-left: 40px;"> <i>zero times</i>  <i>1 time</i>  <i>2 or 3 times</i>  <i>4 or 5 times</i>  <i>6 or more times</i> </p>
<b>Expected Periodicity</b>	Biennial.
<b>Comments</b>	See Part C for a description of YRBSS and Appendix A for focus area contact information.



**26-7. (Developmental) Reduce intentional injuries resulting from alcohol- and illicit drug-related violence.**

**Comments**                      An operational definition could not be specified at the time of publication.

A proposed source of data for this objective is the National Crime Victimization Survey (NCVS), U.S. Department of Justice, Bureau of Justice Statistics.

See Appendix A for focus area contact information.



**26-8. (Developmental) Reduce the cost of lost productivity in the workplace due to alcohol and drug use.**

**Comments**                      An operational definition could not be specified at the time of publication.

Proposed sources of data for this objective are the periodic estimates of economic costs of alcohol and drug use, NIH, NIAAA and NIDA.

See Appendix A for focus area contact information.



## Substance Use and Abuse

### **26-9. Increase the age and proportion of adolescents who remain alcohol and drug free.**

#### **Average age at first use**

##### **26-9a. Alcohol.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	4.5 (Substance Abuse: Alcohol and Other Drugs (also 3.19).
<b>Measure</b>	Mean.
<b>Baseline</b>	13.1 (1998).
<b>Numerator</b>	Sum of reported ages at first use of alcohol by adolescents aged 12 to 17 years.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	From the 1998 National Household Survey on Drug Abuse:  ➤ <i>How old were you the first time you had a drink of any alcoholic beverage? Do not include sips from another person's drink. If you can't remember exactly how old you were, make your best guess of (the) one specific age.</i>
<b>Expected Periodicity</b>	Annual.

**Comments** Baseline data are collected from respondents who complete anonymous, confidential answer sheets. Since 1999, the respondents have provided answers on laptop computers rather than using paper and pencil answer sheets. This change in methodology may result in some differences in response rates, which will be analyzed and adjusted.

See Part C for a description of NHSDA and Appendix A for focus area contact information.



**26-9b. Marijuana.**

**National Data Source** National Household Survey on Drug Abuse (NHSDA), SAMHSA.

**State Data Source** Not identified.

**Healthy People 2000 Objective** 4.5 (Substance Abuse: Alcohol and Other Drugs) (also 3.19).

**Measure** Mean.

**Baseline** 13.7 (1998).

**Numerator** Sum of reported ages at first use of marijuana by adolescents aged 12 to 17 years.

**Denominator** Number of adolescents aged 12 to 17 years.

**Population Targeted** U.S. civilian, noninstitutionalized population.

**Questions Used To Obtain the National Data** From the 1998 National Household Survey on Drug Abuse:

➤ *How old were you the first time you used marijuana or hashish? If you're not sure how old you were, make your best guess.*

**Expected Periodicity** Annual.

**Comments** See Comments provided with objective 26-9a for more information



## High school seniors never using substances

### 26-9c. Alcoholic beverages.

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA (see Comments).
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	19 (1998).
<b>Numerator</b>	Number of 12th grade students who report never using alcohol.
<b>Denominator</b>	Number of 12th grade students.
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1998 Monitoring the Future Study:</p> <p>➤ <i>On how many occasions (if any) have you had alcohol to drink - more than just a few sips... ... in your lifetime? ... during the last 12 months? ... during the last 30 days?</i></p> <p>[Mark one circle for each line. Response categories include:]</p> <p><i>0 occasions</i> <i>1-2 occasions</i> <i>3-5 occasions</i> <i>6-9 occasions</i> <i>10-19 occasions</i> <i>20-39 occasions</i> <i>40 or more</i></p>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Students are considered to have never used alcohol if they respond they drank alcohol on 0 occasions in their lifetime. Data are based on students in attendance on the day of the survey administration.</p> <p>Once data from the expanded NHSDA are available in the year 2001, the data source for this objective will be reexamined.</p>

See Part C for a description of MTF and Appendix A for focus area contact information.



**26-9d. Illicit drugs.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	46 (1998).
<b>Numerator</b>	Number of 12th grade students who report never using illicit drugs.
<b>Denominator</b>	Number of 12th grade students
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	From the 1998 Monitoring the Future Study: <ul style="list-style-type: none"><li>➤ <i>On how many occasions (if any) have you used marijuana (weed, pot) or hashish?</i></li><li>➤ <i>On how many occasions (if any) have you used LSD (“acid”)?</i></li><li>➤ <i>On how many occasions (if any) have you used psychedelics other than LSD (like mescaline, peyote, psilocybin, PCP)?</i></li><li>➤ <i>On how many occasions (if any) have you taken amphetamines on your own—that is, without a doctor telling you to take them?</i></li><li>➤ <i>On how many occasions (if any) have you used cocaine (sometimes called “coke,” “crack,” “rock”)?</i></li><li>➤ <i>On how many occasions (if any) have you used heroin?</i></li><li>➤ <i>On how many occasions (if any) have you taken narcotics other than heroin on your own—that is, without a doctor telling you to take them?</i></li><li>➤ <i>On how many occasions (if any) have you taken tranquilizers on your own—that is, without a doctor telling you to take them?</i></li></ul>

<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	Use of any illicit drug includes <u>any</u> use of marijuana, LSD, other hallucinogens, crack, other forms of cocaine, or heroin or any use of other opiates, stimulants, barbiturates, or tranquilizers not under a doctor's orders.  See Comments provided with objective 26-9c for more information.



**26-10. Reduce past-month use of illicit substances.**

**26-10a. Increase the proportion of adolescents not using alcohol or any illicit drugs during the past 30 days.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Leading Health Indicator</b>	Substance Abuse.
<b>Healthy People 2000 Objective</b>	4.5 (Substance Abuse: Alcohol and Other Drugs) (also 3.19).
<b>Measure</b>	Percent.
<b>Baseline</b>	79 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who reported not using any alcohol or illicit drugs during the past 30 days.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	From the 1998 National Household Survey on Drug Abuse:

- *Think about the last time you drank any type of alcoholic beverage. How long has it been since you last drank an alcoholic beverage?*

*If you last drank an alcoholic beverage within the past 30 days, mark the first box.*

*If it has been more than 30 days ago but within the past 12 months that you last drank an alcoholic beverage, mark the second box.*

*If it was more than 12 months ago but within the past 3 years, mark the third box.*

*If it has been more than 3 years since you last drank an alcoholic beverage, mark the fourth box.*

*If you have never drunk an alcoholic beverage in your life, mark the last box.*

[The following question is asked separately for each illicit drug: marijuana or hashish, cocaine, "crack," heroin, hallucinogens, and inhalants:]

- *How long has it been since you last used [marijuana or hashish]?*

*If your answer is within the past 30 days, mark the first box.*

*If your answer is more than 30 days ago but within the past 12 months, mark the second box.*

*If your answer is more than 12 months ago but within the past 3 years, mark the third box.*

*If your answer is more than 3 years ago, mark the next-to-last box.*

*If you have never used [marijuana/hashish] in your life, mark the last box.*

[The following questions are asked separately for non-medical use of the following: analgesics (prescription pain killers), tranquilizers, stimulants, and sedatives:]

- *As you read the following list of [analgesics (prescription pain killers)/tranquilizers/stimulants/sedatives], please mark one box beside each [analgesic (prescription pain killer)/tranquilizer/stimulant/sedative] to indicate whether you have ever used that [analgesic (prescription pain killer)/tranquilizer/stimulant/sedative] when it was not prescribed for you, or that you took only for the experience or feeling it caused. Again, we are interested in all kinds of [analgesics (prescription pain killers)/tranquilizers/stimulants/sedatives], in pill or non-pill form.*

[This question is followed by a list of common drugs specific to each of the following categories: analgesics (prescription pain killers), tranquilizers, stimulants, and sedatives.]



- *Have you ever used a [analgesic (prescription pain killer)/tranquilizer/stimulant/sedative] whose name you don't know that was not prescribed for you, or that you took only for the experience or feeling it caused? If "YES," mark the first box, if "NO," mark the second box.*
- *Have you ever used an other [analgesic (prescription pain killer)/tranquilizer/stimulant/sedative] besides the ones listed above, that was not prescribed for you, or that you took only for the experience or feeling it caused? PLEASE PRINT NAME(S) OF OTHER [ANALGESICS (PRESCRIPTION PAIN KILLERS)/TRANQUILIZERS/STIMULANTS/ SEDATIVES] BELOW. If "YES," mark the first box, if "NO," mark the second box.*

[If the respondent reported use of any [analgesic (prescription pain killer)/tranquilizer/stimulant/ sedative] they are asked:]

- *How long has it been since you last used [an analgesic (prescription pain killer)/ tranquilizer/stimulant/sedative] that was not prescribed for you, or that you took only for the experience or feeling it caused?*

*If your answer is within the past 30 days, mark the first box.*

*If your answer is more than 30 days ago but within the past 12 months, mark the second box.*

*If your answer is more than 12 months ago but within the past 3 years, mark the third box.*

*If your answer is more than 3 years ago, mark the next-to-last box.*

**Expected Periodicity**

Annual.

**Comments**

Alcohol or illicit drug use by adolescents aged 12 to 17 years is defined as using at least one of the following substances in the past month: alcohol, marijuana or hashish, cocaine (including "crack"), inhalants, hallucinogens (including PCP and LSD), heroin, or any nonmedical use of analgesics, tranquilizers, stimulants, or sedatives.

The answers for each of the substances are examined for each respondent. Persons are considered to have not used alcohol or illicit drugs if they report no use in the past 30 days of any one of the substances.

This objective is one of the measures used to track the Substance Abuse Leading Health Indicator. See Appendix H for a complete listing.

See Part C for a description of NHSDA and Appendix A for focus area contact information.



**26-10b. Reduce the proportion of adolescents reporting use of marijuana during the past 30 days.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	4.6 (Substance Abuse: Alcohol and Other Drugs) (also 3.20).
<b>Measure</b>	Percent.
<b>Baseline</b>	8.3 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who report using marijuana during past 30 days.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-10a.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	Respondents are considered to have used marijuana or hashish if they report use of either substance in the past 30 days.  See Part C for a description of NHSDA and Appendix A for focus area contact information.



**26-10c. Reduce the proportion of adults using any illicit drug during the past 30 days.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.

<b>Leading Health Indicator</b>	Substance Abuse.
<b>Healthy People 2000 Objective</b>	4.5 (Substance Abuse: Alcohol and Other Drugs) (also 3.19).
<b>Measure</b>	Percent.
<b>Baseline</b>	5.8 (1998).
<b>Numerator</b>	Number of adults aged 18 years and older who report use of any illicit drugs during the past 30 days.
<b>Denominator</b>	Number of adults aged 18 years and older.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-10a.
<b>Comments</b>	<p>Illicit drug use is defined as using <u>at least one</u> of the following substances in the past month: marijuana or hashish, cocaine (including “crack”), inhalants, hallucinogens (including PCP and LSD), heroin, or any nonmedical use of analgesics, tranquilizers, stimulants, or sedatives.</p> <p>Respondents are considered to have used illicit drugs if they report use in the past 30 days of any of the listed substances.</p> <p>This objective is one of the measures used to track the Substance Abuse Leading Health Indicator. See Appendix H for a complete listing.</p> <p>See Part C for a description of NHSDA and Appendix A for focus area contact information.</p>



**26-11. Reduce the proportion of persons engaging in binge drinking of alcoholic beverages.**

**26-11a. High school seniors.**

**National Data Source**      Monitoring the Future Study (MTF), NIH, NIDA.

**State Data Source**        Not identified.

<b>Healthy People 2000 Objective</b>	4.7 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	32 (1998).
<b>Numerator</b>	Number of 12th grade students who report drinking five or more alcoholic beverages in a row during the 2 weeks prior to the survey.
<b>Denominator</b>	Number of 12th grade students.
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1998 Monitoring the Future Study:</p> <p>➤ <i>Think back over the LAST TWO WEEKS. How many times have you had five or more drinks in a row? (A “drink” is a glass of wine, a bottle of beer, a wine cooler, a shot glass of liquor, or a mixed drink).</i></p> <p><i>None</i>  <i>Once</i>  <i>Twice</i>  <i>Three to five times</i>  <i>Six to nine times</i>  <i>Ten or more times</i></p>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Data are based on students in attendance on the day of the survey administration.</p> <p>This objective uses the same measurement protocol as the comparable Healthy People 2000 objective (4.7). The only difference is that “five or more drinks” was called “heavy drinking” and is now considered “binge drinking.”</p> <p>See Part C for a description of MTF and Appendix A for focus area contact information.</p>



**26-11b. College students.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.

<b>Healthy People 2000 Objective</b>	4.7 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	39 (1998).
<b>Numerator</b>	Number of college students who report drinking five or more alcoholic beverages in a row during the 2 weeks prior to the survey.
<b>Denominator</b>	Number of college students.
<b>Population Targeted</b>	Students in public and private colleges and universities in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	From the 1998 Monitoring the Future Study:  ➤ <i>Think back over the LAST TWO WEEKS. How many times have you had five or more drinks in a row? (A "drink" is a glass of wine, a bottle of beer, a wine cooler, a shot glass of liquor, or a mixed drink).</i>  <i>None</i> <i>Once</i> <i>Twice</i> <i>Three to five times</i> <i>Six to nine times</i> <i>Ten or more times</i>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	See Comments provided with objective 26-11a for more information.



**26-11c. Adults aged 18 years and older.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Leading Health Indicator</b>	Substance Abuse.
<b>Healthy People 2000 Objective</b>	Adapted from 4.7 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	16.6 (1998).

<b>Numerator</b>	Number of adults aged 18 years and older who report having five or more drinks at the same time or within a couple of hours of each other during the 30 days prior to the survey.
<b>Denominator</b>	Number of adults aged 18 years and older.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1998 National Household Survey on Drug Abuse:</p> <p>➤ <i>During the past 30 days, on how many days did you have 5 or more drinks on the same occasion? By "occasion," we mean at the same time or within a couple of hours of each other.</i></p> <p><i>On the solid line, write the number of days in the past 30 days when you drank 5 or more drinks of an alcoholic beverage on the same occasion.</i></p> <p><i>If you never had 5 or more drinks on the same occasion on any day when you drank during the past 30 days, mark the first box.</i></p> <p><i>If you have drunk alcoholic beverages, but not during the past 30 days, mark the second box.</i></p> <p><i>If you have never drunk an alcoholic beverage in your life, mark the last box.</i></p>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Binge drinking is defined as drinking five or more alcoholic beverages at the same time or within a couple hours of each other during the past 30 days.</p> <p>For the 1998 baseline, there are two ways of handling missing values to calculate binge drinking rates: (1) eliminating persons who drink but have missing values on this item from the calculation of binge drinkers and, (2) counting persons who drink but have missing values on this item as a person who does NOT binge. In the future, missing values for drinkers will be imputed.</p> <p>This objective differs from Healthy People 2000 objective 4.7 in four ways: (1) the tracking of adults aged 18 years and older is new to Healthy People 2010, (2) "five or more drinks" was called "heavy drinking" and is now considered "binge drinking," (3) this measure is tracked by the NHSDA, rather than the MFT survey, and (4) the time frame is 30 days rather than 2 weeks.</p>

This objective is one of the measures used to track the Substance Abuse Leading Health Indicator. See Appendix H for a complete listing.

See Part C for a description of NHSDA and Appendix A for focus area contact information.



#### **26-11d. Adolescents aged 12 to 17 years.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.7 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	7.7 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who report having five or more drinks at the same time or within a couple of hours of each other during the 30 days prior to the survey.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-11c.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>This objective differs from Healthy People 2000 objective 4.7 in four ways: (1) the tracking of adolescents aged 12 to 17 years is new to Healthy People 2010, (2) “five or more drinks” was called “heavy drinking” and is now considered “binge drinking,” (3) this measure is tracked by the NHSDA, rather than the MTF survey, and (4) the time frame is 30 days rather than 2 weeks.</p> <p>See Comments provided with objective 26-11c for more information.</p>



## 26-12. Reduce average annual alcohol consumption.

<b>National Data Source</b>	Alcohol Epidemiologic Data System (AEDS), NIH, NIAAA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	4.8 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Rate per person.
<b>Baseline</b>	2.18 (1997).
<b>Numerator</b>	Number of gallons of ethanol sold in the United States.
<b>Denominator</b>	Number of persons aged 14 years and older.
<b>Population Targeted</b>	U.S. noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>The number of gallons of ethanol (pure alcohol) sold in the U.S. is used as a proxy for annual consumption of alcoholic beverages.</p> <p>AEDS received beverage sales and/or tax receipts reports for 1997 from 19 States. For the remaining States and the District of Columbia, shipment data from major beverage industry sources were used for the numerator to calculate per capita consumption.</p> <p>AEDS uses an estimate of average ethanol content in the alcoholic beverages to convert the gallons of sold or shipped beer, wine, and spirits into gallons of ethanol before calculating per capita estimates.</p> <p>A description of AEDS was published by NIAAA.<sup>3</sup></p> <p>See Appendix A for focus area contact information.</p>





## 26-13. Reduce the proportion of adults who exceed guidelines for low-risk drinking.

### 26-13a. Females.

<b>National Data Source</b>	National Longitudinal Alcohol Epidemiologic Survey (NLAES), NIH, NIAAA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	72 (1992).
<b>Numerator</b>	Number of females aged 21 years and older who reported drinking more than seven drinks per week or more than three drinks on any day in the past 12 months.
<b>Denominator</b>	Number of female current drinkers aged 21 years and older.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1992 National Longitudinal Alcohol Epidemiologic Survey:</p> <ul style="list-style-type: none"><li>➤ <i>Over the past 12 months, did you have at least 12 drinks of any kind of alcohol?</i></li><li>➤ <i>During the last 12 months, did you drink any beer?</i><ul style="list-style-type: none"><li>[If yes:]</li><li>○ <i>During the last 12 months, about how often did you drink any beer?</i></li><li>○ <i>Now I'd like to know the size of the can, bottle, or glass of beer that you USUALLY drank. What was the size of the TYPICAL can, bottle, or glass of beer that you drank during the last 12 months?</i></li><li>○ <i>On the days when you drank beer in the last 12 months, about how many (cans/bottles/glasses) of beer did you USUALLY drink in a single day?</i></li><li>○ <i>During the last 12 months, what was the LARGEST number of (cans/bottles/glasses) of beer that you drank in a single day?</i></li></ul></li></ul>

- *About how often did you drink (largest number) (cans/bottles/glasses) of beer in a single day?*
- *During the last 12 months, did you drink any wine, wine coolers, champagne or sparkling wine?*
  - [If yes:]
  - *During the last 12 months, about how often did you drink any wine, wine coolers, champagne or sparkling wine?*
  - *Now I'd like to know the size of the glass or bottle of wine or wine cooler that you USUALLY drank. What was the size of the TYPICAL bottle or glass of wine that you drank during the last 12 months?*
  - *On the days when you drank wine in the last 12 months, about how many (glasses/bottles/carafes) of wine did you USUALLY drink in a single day?*
  - *During the last 12 months, what was the LARGEST number of (glasses/bottles/carafes) of wine that you drank in a single day?*
  - *About how often did you drink (largest number) (glasses/bottles/carafes) of wine in a single day?*
- *During the last 12 months, did you drink any liquor, including mixed drinks and liqueurs?*
  - [If yes:]
  - *During the last 12 months, about how often did you drink any liquor?*
  - *Now I'd like to know how much liquor was in a TYPICAL drink you had. How many ounces or shots of liquor did you USUALLY have in a drink? Please do not include the amount of any soda, water, ice, cola or juice that may have been added to your drink.*
  - *On the days when you drank liquor in the last 12 months, about how many drinks did you USUALLY have in a single day?*
  - *During the last 12 months, what was the LARGEST number of drinks of liquor that you drank in a single day?*
  - *About how often did you drink (largest number) drinks of liquor in a single day?*
- *During the last 12 months, about how often did you have five or more drinks of any type of alcohol in a single day?*

**Expected Periodicity**

Periodic.

**Comments**

Current drinkers were defined as those who answered “yes” to the question asking whether they drank 12 or more drinks in the last year.

The number of drinks consumed per week was calculated as follows:

(1) The responses to all frequency questions (“About how often...”) were converted to days per year, using the midpoints of the categorical response options (for example, 1 to 2 days a week was converted to  $1.5 \times 52 = 78$  days per year).

(2) For each type of beverage (beer, wine, and liquor), the annual volume of intake was calculated as  $[(\text{total frequency} - \text{frequency of drinking largest amount}) \times (\text{usual quantity of drinks}) \times (\text{size of drink in ounces}) \times (\text{ethanol content by volume})] + [(\text{frequency of drinking largest amount}) \times (\text{largest quantity of drinks}) \times (\text{size of drink in ounces}) \times (\text{ethanol content by volume})]$ , where the ethanol content by volume was estimated at .045 for beer, .121 for wine and .409 for liquor.

(3) The three beverage-specific volumes were summed to yield the overall annual volume of intake in ounces, which was divided by 52 to yield the average weekly ethanol intake in ounces.

(4) The average weekly ethanol intake was converted to a number of standard drinks by dividing by 0.54 ounces, the amount of ethanol assumed to be contained in a standard drink. A value of greater than 14 was excessive for men, and a value of greater than 7 was excessive for women.

In assessing the number of standard drinks consumed on any day, the usual and largest quantities of beer, wine, and liquor were each converted to standard drinks as follows: [(quantity of drinks) x (drink size in ounces) x (ethanol content by volume)]/0.54. A value of greater than 4 for any of the usual or largest quantities was considered excessive for men, and a value of greater than 3 for any of the usual or largest quantities was considered excessive for women. In addition, any non-zero response to the question on frequency of drinking five or more drinks was considered excessive for men and women.

Missing values for the question that asked about drinking at least 12 drinks in the past year were imputed on the basis of whether the subsequent questions were filled in or left blank. If no more than three of the questions concerning beer, wine, and liquor were missing, they were imputed using modal responses to those items. Frequency of drinking five or more drinks was not imputed. After imputation, cases that still had missing data for any of the questions used in the calculations were removed from both the numerator and denominator of the percent.

A description of the 1992 NLAES was published in a peer-reviewed journal.<sup>4</sup>

See Appendix A for focus area contact information.



**26-13b. Males.**

<b>National Data Source</b>	National Longitudinal Alcohol Epidemiologic Survey (NLAES), NIH, NIAAA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	74 (1992).

<b>Numerator</b>	Number of males aged 21 years and older who reported drinking more than 14 drinks per week and/or more than 4 drinks on any day in the past 12 months.
<b>Denominator</b>	Number of male current drinkers aged 21 years and older.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-13a.
<b>Expected Periodicity</b>	Periodic.
<b>Comments</b>	See Comments provided with objective 26-13a for more information.



## **26-14. Reduce steroid use among adolescents.**

### **26-14a. 8th graders.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.11 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	1.2 (1998).
<b>Numerator</b>	Number of 8th grade students who reported using steroids in the past year.
<b>Denominator</b>	Number of 8th grade students.
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	From the 1998 Monitoring the Future Study:

➤ *Steroids, or anabolic steroids, are sometimes prescribed by doctors to promote healing from certain types of injuries. Some athletes, and others, have used them to try to increase muscle development. On how many occasions (if any) have you taken steroids on your own--that is, without a doctor telling you to take them?*

*... in your lifetime?"*

*... during the last 12 months?*

*... during the last 30 days?*

[Mark one circle for each line. Response categories include:]

*0 Occasions*

*1-2 Occasions*

*3-5 Occasions*

*6-9 Occasions*

*10-19 Occasions*

*20-39 Occasions*

*40 or More*

**Expected Periodicity**

Annual.

**Comments**

Students are considered to have used steroids if they respond that they used steroids on one or more occasions during the last 12 months or during the last 30 days.

Data are based on students in attendance on the day of the survey administration.

This objective differs from Healthy People 2000 objective 4.11, which was limited to male high school seniors.

See Part C for a description of MTF and Appendix A for focus area contact information.



**26-14b. 10th graders.**

**National Data Source**

Monitoring the Future Study (MTF), NIH, NIDA.

**State Data Source**

Not identified.

**Healthy People 2000 Objective**

Adapted from 4.11 (Substance Abuse: Alcohol and Other Drugs).

**Measure**

Percent.

**Baseline**

1.2 (1998).

<b>Numerator</b>	Number of 10th grade students who reported using steroids in the past year.
<b>Denominator</b>	Number of 10th grade students.
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-14a.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	This objective differs from Healthy People 2000 objective 4.11, which was limited to males and did not track 10th grade students.  See Comments provided with objective 26-14a for more information.



**26-14c. 12th graders.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.11 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Percent.
<b>Baseline</b>	1.7 (1998).
<b>Numerator</b>	Number of 12th grade students who reported using steroids in the past year.
<b>Denominator</b>	Number of 12th grade students.
<b>Population Targeted</b>	Students in public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-14a.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	This objective differs from Healthy People 2000 objective 4.11, which was limited to tracking males.

See Part C for a description of MTF and Appendix A for focus area contact information.



## 26-15. Reduce the proportion of adolescents who use inhalants.

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Measure</b>	Percent.
<b>Baseline</b>	2.9 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who reported using inhalants during the past year.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1998 National Household Survey on Drug Abuse:</p> <ul style="list-style-type: none"><li>➤ <i>Please mark one box beside each type of inhalant to indicate whether you have <u>ever</u> used that kind of inhalant, even once, for kicks or to get high. On each line, mark the box on the left for "YES" if you have <u>ever</u> used that kind of inhalant, even once. Mark the box on the right for "NO" if you have never used any inhalant of that kind.</i></li><li>➤ <i>Have you ever, even once, inhaled amyl nitrite, "popper," locker room odorizers, or "rush" for kicks or to get high?</i></li><li>➤ <i>Have you ever, even once, inhaled correction fluid, degreaser, or cleaning fluid for kicks or to get high?...</i><ul style="list-style-type: none"><li><i>Gasoline or lighter fluid?...</i></li><li><i>Glue, shoe polish, or toluene?...</i></li><li><i>Halothane, ether, or other anesthetics?...</i></li><li><i>Lacquer thinner or other paint solvents?...</i></li><li><i>Lighter gases, such as butane or propane?...</i></li><li><i>Nitrous oxide or "whippets"?...</i></li><li><i>Spray paints?</i></li></ul></li><li>➤ <i>Have you ever, even once, inhaled some other aerosol spray for kicks or to get high?</i></li></ul>



- *Have you ever used any inhalant whose name you don't know, for kicks or to get high?*
- *Have you ever used any other inhalants for kicks or to get high besides the ones I've named from this list?*

[If yes:]

- *Now think about the past 12 months. On how many days in the past 12 months did you use an inhalant for kicks or to get high?*

Mark the first box for more than 300 days (which is every day or almost every day).

Mark the second for at least 201 but not more than 300 days (5 to 6 days a week).

Mark the next for at least 101 but not more than 200 days (3 to 4 days a week).

Mark the next for at least 51 but not more than 100 days (1 to 2 days a week).

Mark the next for at least 25 but not more than 50 days (3 to 4 days a month).

Mark the next for at least 12 but not more than 24 days (1 to 2 days a month).

Mark the next for at least 6 but not more than 11 days (less than one day a month).

Mark the next for at least 3 but not more than 5 days in the past 12 months.

And mark the third from the last for at least 1 but not more than 2 days in the past 12 months.

If you have used inhalants for kicks or to get high, but not during the past 12 months, mark the next-to-last box.

If you have never used any inhalant for kicks or to get high in your life, mark the last box.

**Expected Periodicity**

Annual.

**Comments**

Use of inhalants within the past year was defined by an affirmative response to ever using any kind of inhalant “for kicks or to get high” combined with a response of “at least one, but not more than 2 days in the past 12 months” or more frequently.

Specific inhalants that have been identified as used “for kicks or to get high” are listed to help the respondent remember and to let the respondent know the kinds of substances of interest. In addition, probes are added for other substances. These two approaches tend to increase the probability that inhalant users will report their use

See Part C for a description of NHSDA and Appendix A for focus area contact information.



## Risk of Substance Use and Abuse

### 26-16. Increase the proportion of adolescents who disapprove of substance abuse.

#### One or two alcoholic drinks nearly every day

##### 26-16a. 8th graders.

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).
<b>Measure</b>	Percent.
<b>Baseline</b>	77 (1998).
<b>Numerator</b>	Number of 8th grade students who report their disapproval of people who take one or two drinks nearly every day.
<b>Denominator</b>	Number of 8th grade students.
<b>Population Targeted</b>	Public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	<p>From the 1998 Monitoring the Future Study:</p> <p>➤ <i>Individuals differ in whether or not they disapprove of people doing certain things. Do YOU disapprove of people doing each of the following?</i></p> <p>[Response categories "a" through "p" include:]</p> <p><i>j. Taking one or two drinks nearly every day....</i></p> <p><i>Don't disapprove</i> <i>Disapprove</i> <i>Strongly disapprove</i> <i>Can't say, Drug Unfamiliar</i></p>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>Disapproval is defined as those who report that they "disapprove" or "strongly disapprove."</p> <p>Data are based on students in attendance on the day of the survey administration.</p>

This objective differs from Healthy People 2000 objective 4.9, which measures perception of disapproval by others and is limited to tracking 12th grade students.

See Part C for a description of MTF and Appendix A for focus area contact information.



**26-16b. 10th graders.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).
<b>Measure</b>	Percent.
<b>Baseline</b>	75 (1998).
<b>Numerator</b>	Number of 10th grade students who report their disapproval of people who take one or two drinks nearly every day.
<b>Denominator</b>	Number of 10th grade students.
<b>Population Targeted</b>	Public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-16a.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	See Comments provided with objective 26-16a for more information.



**26-16c. 12th graders.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).

<b>Measure</b>	Percent.
<b>Baseline</b>	69 (1998).
<b>Numerator</b>	Number of 12th grade students who report their disapproval of people who take one or two drinks nearly every day.
<b>Denominator</b>	Number of 12th grade students.
<b>Population Targeted</b>	Public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	See Questions Used To Obtain the National Data provided with objective 26-16a.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	See Comments provided with objective 26-16a for more information.



### **Trying marijuana or hashish once or twice**

#### **26-16d. 8th graders.**

<b>National Data Source</b>	Monitoring the Future Study (MTF), NIH, NIDA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).
<b>Measure</b>	Percent.
<b>Baseline</b>	69 (1998).
<b>Numerator</b>	Number of 8th grade students who report their disapproval of people who try marijuana once or twice.
<b>Denominator</b>	Number of 8th grade students.
<b>Population Targeted</b>	Public and private schools in the coterminous United States.
<b>Questions Used To Obtain the National Data</b>	From the 1998 Monitoring the Future Study:

- *Individuals differ in whether or not they disapprove of people doing certain things. Do YOU disapprove of people doing each of the following?*

[Response categories “a” through “p” include:]

*c. Trying marijuana once or twice....*

*Don't disapprove*

*Disapprove*

*Strongly disapprove*

*Can't say, Drug Unfamiliar*

**Expected Periodicity**

Annual.

**Comments**

Disapproval is defined as those who report they “disapprove” or “strongly disapprove.”

Data are based on students in attendance on the day of the survey administration.

This objective differs from Healthy People 2000 objective 4.9, which measures perception of disapproval by others.

See Part C for a description of MTF and Appendix A for focus area contact information.



**26-16e. 10th graders.**

**National Data Source**

Monitoring the Future Study (MTF), NIH, NIDA.

**State Data Source**

Not identified.

**Healthy People 2000 Objective**

Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).

**Measure**

Percent.

**Baseline**

56 (1998).

**Numerator**

Number of 10th grade students who report their disapproval of people who try marijuana once or twice.

**Denominator**

Number of 10th grade students.

**Population Targeted**

Public and private schools in the coterminous United States.

**Questions Used To Obtain the National Data**

See Questions Used To Obtain the National Data provided with objective 26-16d.

**Expected Periodicity** Annual.  
**Comments** See Comments provided with objective 26-16d for more information.



**26-16f. 12th graders.**

**National Data Source** Monitoring the Future Study (MTF), NIH, NIDA.  
**State Data Source** Not identified.  
**Healthy People 2000 Objective** Adapted from 4.9 (Substance Abuse: Alcohol and Other Drugs) (also 3.21).  
**Measure** Percent.  
**Baseline** 52 (1998).  
**Numerator** Number of 12th grade students who report their disapproval of people who try marijuana once or twice.  
**Denominator** Number of 12th grade students.  
**Population Targeted** Public and private schools in the coterminous United States.  
**Questions Used To Obtain the National Data** See Questions Used To Obtain the National Data provided with objective 26-16d.  
**Expected Periodicity** Annual.  
**Comments** See Comments provided with objective 26-16d for more information.



**26-17. Increase the proportion of adolescents who perceive great risk associated with substance abuse.**

**26-17a. Consuming five or more drinks at a single occasion once or twice a week.**

**National Data Source** National Household Survey on Drug Abuse (NHSDA), SAMHSA.  
**State Data Source** Not identified.

<b>Healthy People 2000 Objective</b>	4.10 (Substance Abuse: Alcohol and Other Drugs) (also 3.22).
<b>Measure</b>	Percent.
<b>Baseline</b>	47 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who report that they perceive great risk from consuming five or more drinks on a single occasion once or twice a week.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	From the 1998 National Household Survey on Drug Abuse:  ➤ <i>How much do people risk harming themselves physically and in other ways when they have five or more drinks once or twice a week? Is there:</i>  <i>No risk?</i> <i>Slight risk?</i> <i>Moderate risk?</i> <i>Great risk?</i>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	While the question used to obtain baseline data takes into account all kinds of harm, some respondents may focus on physical harm only. Consequently the measure is a very conservative estimate of the perceived harm.  This objective uses the same measurement protocol as the comparable Healthy People 2000 objective (4.10). The only difference is that “five or more drinks” was called “heavy use of alcohol” in the Healthy People 2000 objective.  See Part C for a description of NHSDA and Appendix A for focus area contact information.



**26-17b. Smoking marijuana once per month.**

<b>National Data Source</b>	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
<b>State Data Source</b>	Not identified.

<b>Healthy People 2000 Objective</b>	4.10 (Substance Abuse: Alcohol and Other Drugs) (also 3.22).
<b>Measure</b>	Percent.
<b>Baseline</b>	31 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who report they perceive great risk from smoking marijuana once a month.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	From the 1998 National Household Survey on Drug Abuse:

- *How much do people risk harming themselves physically and in other ways when they smoke marijuana once a month?*
- Mark the first box if you think there is no risk.*
- Mark the second box if you think there is slight risk.*
- Mark the third box if you think there is moderate risk.*
- Mark the fourth box if you think there is great risk.*

**Expected Periodicity** Annual.

**Comments** While the question used to obtain baseline data takes into account all kinds of harm, some respondents may focus on physical harm only. Consequently the measure is a very conservative estimate of the perceived harm.

This objective uses the same measurement protocol as the comparable Healthy People 2000 objective (4.10). The only difference is that “smoking marijuana once a month” was called “regular use of marijuana” in the Healthy People 2000 objective.

See Part C for a description of NHSDA and Appendix A for focus area contact information.



**26-17c. Using cocaine once per month.**

**National Data Source** National Household Survey on Drug Abuse (NHSDA), SAMHSA.

**State Data Source** Not identified.



<b>Healthy People 2000 Objective</b>	Adapted from 4.10 (Substance Abuse: Alcohol and Other Drugs) (also 3.22).
<b>Measure</b>	Percent.
<b>Baseline</b>	54 (1998).
<b>Numerator</b>	Number of adolescents aged 12 to 17 years who report they perceive great risk from using cocaine once a month.
<b>Denominator</b>	Number of adolescents aged 12 to 17 years.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Data</b>	From the 1998 National Household Survey on Drug Abuse:  <ul style="list-style-type: none"> <li>➤ <i>How much do people risk harming themselves physically and in other ways when they use cocaine once a month? Is there:</i>   <ul style="list-style-type: none"> <li><i>No risk?</i></li> <li><i>Slight risk?</i></li> <li><i>Moderate risk?</i></li> <li><i>Great risk?</i></li> </ul> </li> </ul>
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	While the question used to obtain baseline data takes into account all kinds of harm, some respondents may focus on physical harm only. Consequently the measure is a very conservative estimate of the perceived harm.  This objective differs from Healthy People 2000 objective 4.10, which measured perceived harm from trying cocaine once or twice.  See Part C for a description of NHSDA and Appendix A for focus area contact information.



## Treatment for Substance Abuse

### **26-18. (Developmental) Reduce the treatment gap for illicit drugs in the general population.**

**Comments**                      An operational definition could not be specified at the time of publication.

A proposed data source for this objective is the National Household Survey on Drug Abuse (NHSDA), SAMHSA.

The treatment gap is the difference between the number of persons who need treatment for the use of illicit drugs and the number of persons who are receiving treatment in a given year. There are ongoing discussions among Federal agencies and organizations in the drug abuse field, including SAMHSA, the Office of National Drug Control Policy, and the National Association of State Alcohol and Drug Abuse Directors, to develop an accurate measure.

See Part C for a description of MTF and Appendix A for focus area contact information.



**26-19. (Developmental) Increase the proportion of inmates receiving substance abuse treatment in correctional institutions.**

**Comments**

An operational definition could not be specified at the time of publication.

A proposed data source for this objective is the Uniform Facilities Data Set Survey of Correctional Facilities, SAMHSA, OAS.

See Appendix A for focus area contact information.



**26-20. Increase the number of admissions to substance abuse treatment for injection drug use.**

**National Data Source** Treatment Episodes Data System (TEDS), SAMHSA, OAS.

**State Data Source** State administrative data.

**Healthy People 2000 Objective** Not applicable.

**Measure** Number.

**Baseline** 167,960 (1997).

<b>Numerator</b>	Number of admissions for injection drug use in substance abuse treatment programs.
<b>Denominator</b>	Not applicable.
<b>Population Targeted</b>	Public and private nonprofit substance abuse treatment program population.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>TEDS data are not based on a statistical data collection system. TEDS data are continuously submitted to SAMHSA by States from their administrative data systems. The States collect data from substance abuse treatment providers, primarily from publicly-funded treatment programs. Each State uses its own form for collecting information on substance abuse admissions. When data are submitted to SAMHSA, data are matched to the core variables contained in TEDS. There is a considerable time lag between the date of admission and when SAMHSA receives data from each State.</p> <p>SAMHSA publishes data in tabular form in an annual report.</p> <p>See Appendix A for focus area contact information.</p>



**26-21. (Developmental) Reduce the treatment gap for alcohol problems.**

<b>Comments</b>	<p>An operational definition could not be specified at the time of publication.</p> <p>A proposed data source for this objective is the National Household Survey on Drug Abuse (NHSDA), SAMHSA.</p>
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The measure will focus on problem drinking derived from an 11-item scale. The exact size of the gap between services available and services needed has not yet been determined. Depending on the jurisdiction, there is wide variability in treatment capacity and how that capacity is distributed among settings and modalities.

See Part C for a description of NHSDA and Appendix A for focus area contact information.



## State and Local Efforts

### **26-22. (Developmental) Increase the proportion of patients who are referred for followup care for alcohol problems, drug problems, or suicide attempts after diagnosis or treatment for one of these conditions in a hospital emergency department.**

#### **Comments**

An operational definition could not be specified at the time of publication.

A proposed data source for this objective is the National Hospital Ambulatory Medical Care Survey, (NHAMCS), CDC, NCHS.

See Part C for a description of NHAMCS and Appendix A for focus area contact information.



### **26-23. (Developmental) Increase the number of communities using partnerships or coalition models to conduct comprehensive substance abuse prevention efforts.**

#### **Comments**

An operational definition could not be specified at the time of publication.

A proposed data source for this objective is the Community Partnerships Data, SAMHSA.

See Appendix A for focus area contact information.



**26-24. Extend administrative license revocation laws, or programs of equal effectiveness, for persons who drive under the influence of intoxicants.**

<b>National Data Source</b>	DOT, NHTSA.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	4.15 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Number.
<b>Baseline</b>	41 States and the District of Columbia (1998).
<b>Numerator</b>	Number of States, including the District of Columbia, that have passed administrative license revocation (ALR) legislation or equivalent programs.
<b>Denominator</b>	Not applicable.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	A complete operational definition was not specified at the time of publication.  See Appendix A for focus area contact information.



**26-25. Extend legal requirements for maximum blood alcohol concentration levels of 0.08 percent for motor vehicle drivers aged 21 years and older.**

<b>National Data Source</b>	DOT, NHTSA.
<b>State Data Source</b>	Police Accident Reports (PARs).
<b>Healthy People 2000 Objective</b>	4.18 (Substance Abuse: Alcohol and Other Drugs).
<b>Measure</b>	Number.
<b>Baseline</b>	16 (1998).

<b>Numerator</b>	Number of States, including the District of Columbia, with maximum blood alcohol concentration (BAC) levels of 0.08 percent for motor vehicle drivers aged 21 years and older.
<b>Denominator</b>	Not applicable.
<b>Questions Used To Obtain the National Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	<p>A complete operational definition was not specified at the time of publication.</p> <p>BAC is measured as a percentage by weight of alcohol in the blood (grams per deciliter). A positive BAC level (0.01 g/dL and higher) indicates that alcohol was consumed by the person tested. A BAC of 0.10 g/dL or more indicates that the person was intoxicated.</p> <p>One of the major differences among States is in the degree of testing for driver and non-occupant BACs.</p> <p>See Appendix A for focus area contact information.</p>



## References

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