National Survey on Drug Use and Health

# The NSDUH Report

October 4, 2011

# Substance Use among Black Adolescents

## In Brief

- Compared with the national average for adolescents aged 12 to 17, black adolescents had lower rates of past month cigarette use (5.8 vs. 10.2 percent), alcohol use (10.5 vs. 16.0 percent), marijuana use (6.5 vs. 6.9 percent), and nonmedical use of prescription-type drugs (2.9 vs. 3.3 percent)
- The rate of marijuana use among black adolescents increased from 5.9 percent in 2008 to 7.5 percent in 2010
- The rates of past month cigarette use and alcohol use among black adolescents living in poverty were lower than the national averages for adolescents living in poverty (6.8 vs. 10.6 percent and 10.7 vs. 13.5 percent, respectively)

lack or African American adolescents have generally been shown to have lower rates of substance use than white adolescents. Researchers have suggested that family attitudes and behaviors that discourage drug use may contribute to the relatively low rates of drug use observed among black youths.1 However, despite the lower drug use rates in adolescence, rates of drug use among black adults closely mirror or exceed those among white adults.<sup>2</sup> Since initiation of drug use typically occurs before the age of 25,3 efforts to prevent, delay, or reduce drug use among black youths, particularly efforts that target the critical period of late adolescence, may have longterm implications for improvements in behavioral and physical health, education, and employment outcomes among this population.

This report examines substance use among non-Hispanic black or African American adolescents (hereafter referred

Figure 1. Trends in Past Month Substance Use among Blacks Aged 12 to 17: 2002 to 2010

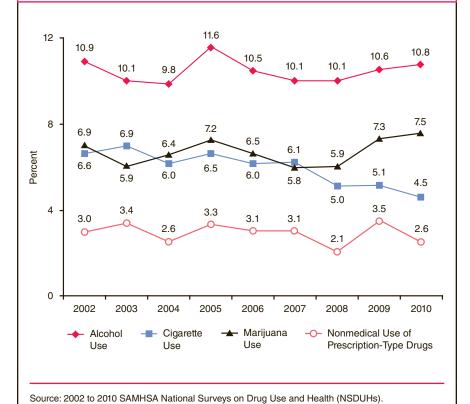
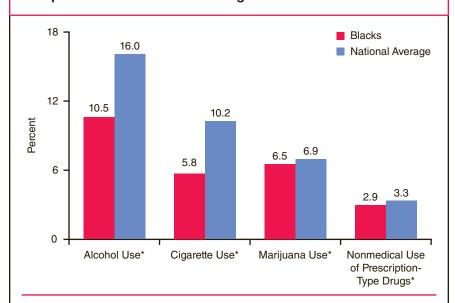


Figure 2. Past Month Substance Use among Blacks Aged 12 to 17 Compared with the National Average: 2004 to 2009



<sup>\*</sup> The difference between blacks and the national average is statistically significant at the .05 level. Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

to as "black adolescents") aged 12 to 17.4 Combined data from the 2004 to 2009 National Surveys of Drug Use and Health (NSDUHs) are used when discussing estimates, while trends are discussed using data from the 2002 to 2010 NSDUHs. The report presented here is one in a series of reports intended to describe adolescent substance use within racial and ethnic subpopulations of the United States.

# **Demographic Characteristics**

Combined 2004 to 2009 NSDUH data indicate that an annual average of 3.8 million persons aged 12 to 17—15.2 percent of the total population in this age group—identified themselves as non-Hispanic blacks of one race. Black adolescents were similar to the national average in terms of age and gender distributions. Compared with the national average, however, black adolescents were nearly twice as likely to be living in poverty (35.4 vs. 18.1 percent) and were more likely to live in large metropolitan areas (65.1 vs. 53.5 percent).<sup>5</sup>

### **Trends in Substance Use**

The rate of past month cigarette use among black adolescents decreased from 6.6 percent in 2002 to 4.5 percent in 2010 (Figure 1). Past month alcohol use was fairly stable from 2002 to

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

	Alcohol Use		Cigarette Use		Nonmedical Use of Prescription-Type Drugs	
Age Group	Blacks (%)	National Average (%)	Blacks (%)	National Average (%)	Blacks (%)	National Average (%)
Aged 12-14	4.5*	6.2	1.9*	3.5	2.9*	2.0
Aged 15-17	16.1*	25.4	9.5*	16.5	3.0*	4.4

<sup>\*</sup> The difference between blacks and the national average is statistically significant at the .05 level. Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

2010. Nonmedical use of prescription type drugs among black adolescents was also relatively stable from 2002 to 2007. However, after a drop to 2.1 percent in 2008, the rate of nonmedical use of prescription-type drugs among black adolescents rose to 3.5 percent in 2009; the difference between the rate in 2009 and 2010 was not statistically significant. Finally, following a steady decline from 7.2 percent in 2005 to 5.9 percent in 2008, the rate of past month marijuana use among black adolescents increased to 7.5 percent in 2010.

#### **Past Month Substance Use**

Rates of substance use among black adolescents were lower than national averages (Figure 2). The greatest differences were for rates of past month alcohol use (10.5 vs. 16.0 percent) and cigarette use (5.8 vs. 10.2 percent). Smaller (but statistically significant) differences were found for marijuana use (6.5 vs. 6.9 percent) and nonmedical use of prescription-type drugs (2.9 vs. 3.3 percent).

## Substance Use, by Age Group

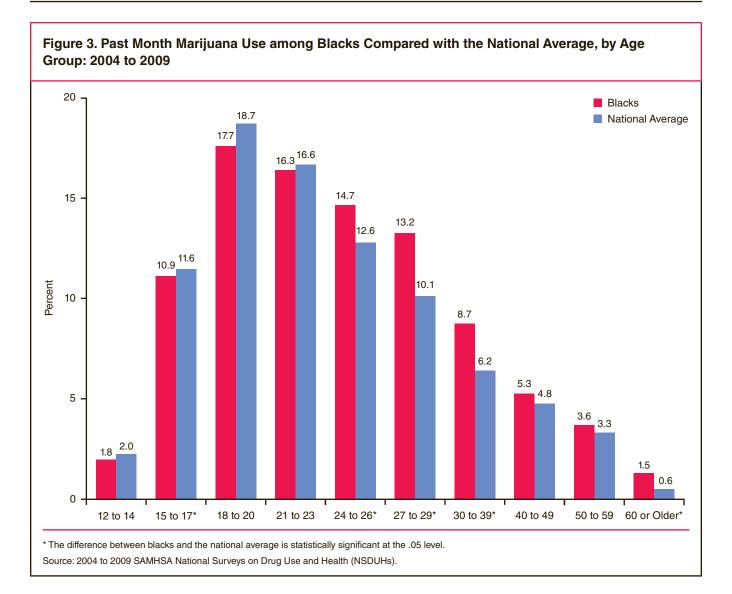
Among younger black adolescents aged 12 to 14, the rates of past month alcohol use and cigarette use were lower than the national averages (Table 1). Similarly, rates of alcohol and cigarette use also were lower among black adolescents aged 15 to 17 than the national averages. The rate

of past month nonmedical use of prescriptiontype drugs among adolescents aged 12 to 14 was higher for blacks than the national average (2.9 vs. 2.0 percent); however, among adolescents aged 15 to 17, rates were lower among black adolescents than the national average (3.0 vs. 4.4 percent).

Figure 3 shows the dynamic interaction taking place between age and race/ethnicity for marijuana use. Black adolescents aged 12 to 14 had a rate of past month marijuana use that was similar to the national average for that age group (1.8 vs. 2.0 percent). The rate was lower among black adolescents aged 15 to 17 than the national average for that age group, and the black and national average rates were similar for young adults aged 18 to 23. However, marijuana use rates among blacks exceeded the national average for adults aged 24 to 26, 27 to 29, and 30 to 39.

## Substance Use, by Gender

Compared with the national averages for adolescent females, adolescent black females had lower rates of past month substance use (Figure 4). Black male adolescents also were less likely than male adolescents in the Nation as a whole to have used alcohol (10.2 vs. 15.8 percent) and cigarettes (6.3 vs. 10.0 percent) in the past month, but differences in rates of marijuana use and nonmedical use of prescription-type drugs were not statistically significant.



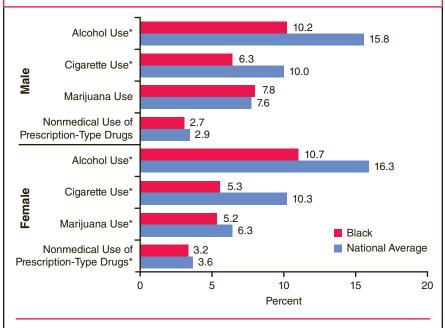
# **Substance Use among Adolescents Living in Poverty**

The rates of past month cigarette use and alcohol use among black adolescents living in poverty were lower than the national averages for adolescents living in poverty (6.8 vs. 10.6 percent and 10.7 vs. 13.5 percent, respectively). Rates of past month marijuana use and nonmedical use of prescription-type drugs, however, did not differ significantly from the national averages for adolescents living in poverty (Figure 5).

### **Discussion**

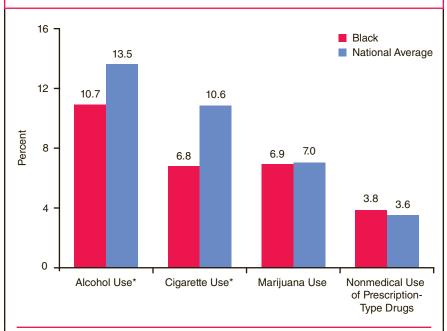
This report confirms that substance use rates are generally lower among black adolescents than national rates for adolescents; however, the recent increases in marijuana use and in the nonmedical use of prescription-type drugs among black adolescents highlight the need for treatment programs and prevention strategies that target black adolescents. Those designing and implementing prevention programs should also be aware of the higher rates of marijuana use among blacks aged 24 or older compared with the national averages, suggesting the need for efforts specifically tailored to the prevention of marijuana initiation for black adolescents.

Figure 4. Past Month Substance Use among Black Adolescents Aged 12 to 17 Compared with the National Average, by Gender: 2004 to 2009



<sup>\*</sup> The difference between blacks and the national average is statistically significant at the .05 level. Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Figure 5. Past Month Substance Use among Blacks Aged 12 to 17 Living in Poverty Compared with the National Average Living in Poverty: 2005 to 2009



<sup>\*</sup> The difference between blacks and the national average is statistically significant at the .05 level. Source: 2005 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

#### **End Notes**

- Vega, W. A., & Gil, A. G. (2009). Substance abuse in minority populations. In Loue, S., & Sajatovic, M. (Eds.), *Determinants of minority mental health and wellness* (pp. 313-334). New York: Springer.
- <sup>2</sup> French, K., Finkbiner, R., & Duhamel, L. (2002). Patterns of substance use among minority youth and adults in the United States: An overview and synthesis of national survey findings. Fairfax, VA: Caliber Associates.
- <sup>3</sup> Vega. W. A., Aguilar-Gaxiola, S., Andrade, L., Bijl, R., Borges, G., Caraveo-Anduaga, J. J., DeWit, D. J., Heeringa, S. G., Kessler, R. C., Kolody, B., Merikangas, K. R., Molnar, B. E., Walters, E. E., Warner, L. A., & Wittchen, H. U. (2002). Prevalence and age of onset for drug use in seven international sites: Results from the International Consortium of Psychiatric Epidemiology. *Drug and Alcohol Dependence*, 68, 285-297.
- <sup>4</sup> NSDUH asks a series of questions about race/ethnicity. First, respondents are asked about their Hispanic or Latino origin; then they are asked to identify which racial grouping best describes them: white, black or African American, American Indian or Alaska Native, Native Hawaiian, Other Pacific Islander, Asian, or other. Respondents may select more than one race. For this report, black or African American refers to persons identifying themselves as black or African American only. Persons identifying themselves as both black or African American and Hispanic or as both black or African American and another racial group are not included.
- <sup>5</sup> NSDUH gathers data on family income, size, and composition (i.e., number of children) and respondent's age. This information is used to determine the respondent's poverty level. The poverty level is calculated as a percentage of the U.S. Census Bureau's poverty threshold by dividing the respondent's reported total family income by the appropriate poverty threshold amount. If a family's total income is less than the family's poverty threshold, then that family and every individual in it is considered to be living in poverty (i.e., less than 100 percent of the U.S. census poverty threshold). The poverty variable is available for the years from 2005 to 2009; therefore, information for this estimate is restricted to combined data from these years.
- <sup>6</sup> Nonmedical use of prescription-type drugs is defined as the use of prescription-type drugs not prescribed for the respondent by a physician or used only for the experience or feeling they caused. Nonmedical use of any prescriptiontype pain reliever, sedative, stimulant, or tranquilizer does not include over-the-counter drugs; nonmedical use of stimulants includes methamphetamine use.

#### Suggested Citation

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

# Substance Use among Black Adolescents

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- The rate of marijuana use among black adolescents increased from 5.9 percent in 2008 to 7.3 percent in 2009; the rate of nonmedical use of prescription-type drugs also increased from 2.1 percent in 2008 to 3.5 percent in 2009
- The rates of past month cigarette use and alcohol use among black adolescents living in poverty were lower than the national averages for adolescents living in poverty (6.8 vs. 10.6 percent and 10.7 vs. 13.5 percent, respectively)

The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2004 to 2009 data used in this report are based on information obtained from 135,311 persons aged 12 to 17, including 18,341 blacks or African Americans. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Center for Behavioral Health Statistics and Quality (CBHSQ), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

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

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

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

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