Introduction

In 2005, the State Epidemiology and Outcomes Workgroup (SEOW) was established as part of the Center for Substance Abuse Prevention’s (CSAP) Strategic Prevention Framework State Incentive Grant (SPF SIG) Program to collect and analyze epidemiological data and facilitate data-based decision-making regarding substance abuse prevention across Indiana. Though the grant funding has ended, the Division of Mental Health and Addiction continues to support the work of the SEOW.

As of this date, the Indiana SEOW has published 11 annual comprehensive state epidemiological profiles on substance use. This issue brief provides a concise but comprehensive overview of alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, nonmedical prescription drugs, and polysubstance use in Indiana. For a more detailed analysis, refer to *The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2016.*

Substance Abuse in Indiana

A quick summary on alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, nonmedical prescription drugs, and polysubstance use in Indiana

For questions and additional information, please contact:

Julie Gries
Bureau Chief
Division of Mental Health & Addiction
(317) 232-7894
julie.gries@fssa.in.gov

Prepared for:
Indiana Family and Social Services Administration
Division of Mental Health and Addiction

Prepared by:
The Center for Health Policy
IU Richard M. Fairbanks School of Public Health
Indiana University-Purdue University Indianapolis
1050 Wishard Blvd.
Indianapolis, IN 46202

Our Vision
Healthy, safe, and drug-free environments that nurture and assist all Indiana citizens to thrive.

Our Mission
To reduce substance use and abuse across the lifespan of Indiana citizens.
Prevalence

- Alcohol is the most frequently used drug in Indiana and the United States.
- Among Hoosiers ages 12 and older, 50.4% drank alcohol in the past month.\(^1\)
- Young adults ages 18 to 25 had the highest rates of alcohol use in Indiana: 59.7% reported current alcohol use.\(^1\)
- Rates for heavy drinking were slightly lower in Indiana than in the United States (IN: 5.3%; U.S.: 5.9%), although this difference was not statically significant.\(^2\)
- Among Indiana college students, 62.7% reported current (past-month) use of alcohol.\(^3\)

Impact: Health

- An estimated 5.9% of Hoosiers had an alcohol use disorder in the past year; the highest rate was found among 18- to 25-year-olds (12.5%).\(^1\)
- Most admissions to substance abuse treatment were due to alcohol; more than one-third of treatment admissions among Hoosiers (35.0%) were for alcohol dependence (U.S.: 36.3%).\(^6\)
- Alcohol abuse in the treatment population differed by race: 34.1% of whites, 39.0% of blacks, and 37.9% of other races indicated alcohol dependence.\(^6\)
- From 2000 through 2015, a total of 6,571 Hoosiers died from alcohol-induced causes.\(^7\) The age-adjusted alcohol-attributable mortality rate in 2015 was 9.4 per 100,000 Indiana residents.\(^7\)

Youth Consumption—Underage Drinking

- Among Hoosiers 12 to 20 years old, 21.0% reported current alcohol use.\(^1\)
- 10.6% of Indiana youth ages 12 to 17 drank alcohol in the past month.\(^1\)
- 30.5% of Indiana high school students (grades 9 through 12) used alcohol in the past month, and 17.4% engaged in binge drinking.\(^4\)
- 13.2% of 8th graders, 22.9% of 10th graders, and 34.6% of 12th graders consumed alcohol in the past 30 days in Indiana.\(^5\)

Impact: Criminal Justice

- In 2015, a total of 8,642 alcohol-related collisions occurred in Indiana; 152 of these were fatal.\(^8\)
- In 2014, Indiana arrest rates per 1,000 population were 3.2 for driving under the influence (20,810 arrests), 1.1 for public intoxication (7,107 arrests), and 1.2 for liquor law violations (8,245 arrests).\(^9\)
Prevalence

- Just under one-third of Hoosiers ages 12 and older used a tobacco product in the past month (30.8%). This was significantly higher than the U.S. rate of 24.6%.

- The highest tobacco use rate in the state was among 18- to 25-year-olds (42.7%).

- One-fourth (25.9%) of Hoosiers ages 12 and older smoked cigarettes in the past month. This was statistically higher than the U.S. smoking rate of 20.1%.

- The highest rate for current cigarette use in the state was among 18- to 25-year-olds (35.1%).

- Indiana’s adult smoking prevalence (20.6%) is the 12th highest in the nation. It is also significantly higher than the U.S. median of 17.5%.

- 14.7% of Hoosiers ages 18 and older use cigarettes every day.

- Smoking prevalence was generally higher among younger individuals and persons with less educational attainment and lower income levels.

- Among Indiana college students, 13.0% reported current use of cigarettes.

Youth Consumption

- Among 12- to 17-year-olds in Indiana, 9.1% reported current use of a tobacco product, and 6.7% indicated that they currently smoke cigarettes.

- 2.9% of middle school students and 12.0% of high school students in Indiana smoked cigarettes in the past month.

- The use of e-cigarettes is on the rise. Past-month prevalence increased significantly from 2012 to 2014 for students in middle school (from 1.3% to 5.2%) and high school (from 3.9% to 15.6%).

- White high school students had significantly higher smoking rates than black students (12.1% and 7.1%, respectively).

Impact: Health

- An estimated 11,100 Hoosiers die annually from smoking-attributable causes.

- On average, smoking reduces adult life expectancy by at least 10 years.

- Tobacco causes serious health consequences, including heart disease, cancer, and respiratory illnesses.

- The average annual age-adjusted smoking-attributable mortality rate per 100,000 population was higher among Hoosiers (323.3) than the U.S. median (288.1).

- Secondhand smoke is also detrimental to health and can cause many illnesses, especially in children.
**MARIJUANA**

**Prevalence**
- Marijuana is the most commonly used illicit substance in Indiana and the nation.¹
- Among Hoosiers ages 12 and older, 8.7% used marijuana in the past month, and 13.9% used it in the past year; U.S. rates were comparable.¹
- Highest rate of current use was among 18- to 25-year-olds (20.7%).¹
- Among Indiana college students, 19.6% reported current marijuana use.³

**Youth Consumption**
- 6.0% of Indiana youth ages 12 to 17 used marijuana for the first time during the past year, and 8.1% currently use marijuana.¹
- 16.4% of Indiana high school students currently use marijuana.⁴
- In Indiana, 6.6% of 8th grade students, 13.7% of 10th grade students, and 20.3% of 12th grade students currently use marijuana.⁵

**Impact: Health**
- Harmful effects include respiratory illnesses, a weakened immune system, and an increased risk of heart attack and cancer.¹⁴
- In 20.8% of Indiana treatment admissions, marijuana dependence was reported at treatment admission, a significantly higher percentage compared to the nation’s 15.2%.⁶
- Marijuana users in treatment were more likely to be male, black, and under 18 years old.⁶

**Impact: Criminal Justice**
- In 2014, Indiana had more than 10,000 arrests for possession and 1,903 arrests for sale/manufacture of marijuana, representing arrest rates of 1.6 and 0.3 per 1,000 population, respectively.⁷
COCaine

Prevalence

- Among Hoosiers ages 12 and older, 1.2% used cocaine in the past year.¹
- Highest rate of past-year use in Indiana was among 18- to 25-year-olds (3.9%).¹
- Among Indiana college students, 1.9% reported past-month cocaine use.³

Youth Consumption

- 0.5% of Indiana youth ages 12 to 17 used cocaine in the past year.¹
- 4.0% of Indiana high school students have used a form of cocaine at least once in their life.⁴
- 1.4% of 12th grade students in Indiana reported current cocaine or crack use.⁵

Impact: Health

- Cocaine use can lead to cardiovascular problems, respiratory difficulties, neurological effects, and gastrointestinal complications. Users may even suffer sudden death with first-time use.¹⁵
- Babies born to mothers who abuse cocaine during pregnancy are often prematurely delivered, have low birth weight and smaller head circumference, and are shorter in length.¹⁵
- Substance abuse treatment admissions in which cocaine use was reported decreased significantly in Indiana from 25.5% in 2000 to 10.9% in 2014 with dependence in 3.8% of treatment episodes.⁶
- Cocaine users in treatment were more likely to be female, black, and 35 years or older.⁶

Impact: Criminal Justice

- In 2014, Indiana had 1,649 arrests for possession of cocaine/opiates and more than 1,500 for sale/manufacture of the substance, representing arrest rates of 0.2 and 0.2 per 1,000 population, respectively.³
HEROIN

Prevalence

- Among Hoosiers age 12 and older, an estimated 0.3% used heroin in the past month (U.S.: 0.3%).
- Among Indiana college students, 0.2% had used heroin in the past month.

Youth Consumption

- 2.4% of Indiana high school students have used heroin at least once in their life.
- Among 12th grade students in Indiana, 0.5% used heroin in the past 30 days.

Impact: Health

- Heroin abuse can cause fatal overdose, spontaneous abortion, collapsed veins, and if injected, the contraction of infectious diseases such as HIV/AIDS and hepatitis B and C.
- In 2014, 15.9% of Indiana treatment admissions reported heroin use, which is significantly less than the U.S. percentage of 25.8%. Heroin use in the treatment population has been rising consistently in the past years; however, Indiana’s increase has been steeper compared to the nation’s.
- Among Indiana’s substance abuse treatment population, women, whites, and individuals under the age of 35 had the highest rates of heroin use. Furthermore, the percentage of youth less than 18 years old in the treatment population seeking treatment for heroin saw a sharp increase from 1.1% in 2010 to 11.5% in 2012, but then decreased significantly and remained low at 1.7% in 2014.
- At the end of 2015, a total of 11,698 Hoosiers were living with HIV or AIDS. Among the 543 newly diagnosed HIV cases in 2015, 32% were transmitted via injection drug use.
- Over the past 10 years there has been a steady increase in overdose deaths with heroin identified as a contributing factor, rising from 7 deaths in 2005 to 239 deaths in 2015.

Impact: Criminal Justice

- In 2014, Indiana had 1,649 arrests for possession of cocaine/opiates and more than 1,500 for sale/manufacture of the substance, representing arrest rates of 0.2 and 0.2 per 1,000 population, respectively.
METHAMPHETAMINE (METH)

Prevalence

- No state estimates for methamphetamine use are available for the general population; however, in 2015, U.S. lifetime use among individuals ages 12 and over was an estimated 5.4%, past-year use 0.6%, and past-month use 0.3%.

- Among Indiana college students, 0.2% reported current (past-month) use of meth.

Youth Consumption

- The rates of Indiana high school students reporting having tried meth at least once in their life has steadily declined from 8.2% in 2003 to 2.9% in 2015.

- In 2016, 0.1% of 8th grade students, 0.3% of 10th grade students, and 0.7% of 12th grade students reported past-month meth use in Indiana.

Impact: Health

- Health consequences of meth use include cardiovascular problems; stroke; brain, liver, and kidney damage; severe tooth decay ("meth mouth"); increased risk of STD/HIV transmission and hepatitis; mental illness; and death.

- The percentage of treatment episodes with meth use reported has increased significantly from 10.9% in 2005 (U.S.: 11.8%) to 15.9% in 2014 (U.S.: 13.5%).

- Meth users in treatment were primarily female, white, and between 25 and 44 years of age.

Impact: Criminal Justice

- The number of clandestine meth labs seized and arrests made at these labs by the Indiana State Police decreased from an all-time high in 2013 (1,721 lab seizures and 1,507 arrests) to 943 lab seizures and 622 arrests in 2016.

- After exceeding 440 in 2013, the number of children taken from meth lab homes has decreased in subsequent years to 153 in 2016.

- In 2014, there were 1,895 arrests for synthetic drug possession (including meth) and 909 for sale, corresponding to arrest rates of 0.3 and 0.1 per 1,000 population respectively.
PRESCRIPTION DRUG ABUSE

Prevalence

- The three most commonly abused types of prescription medicine are pain relievers (opioids), central nervous system depressants (sedatives, tranquilizers, hypnotics), and stimulants (used to treat attention deficit disorders, narcolepsy, and weight loss).20

- Over 11 million prescription drugs (controlled substances) were dispensed in Indiana in 2016. Of these, more than half were opioids.21

- Past-year prevalence for nonmedical pain reliever use in Indiana residents ages 12 and older was 4.4% in 2014; young Hoosiers ages 18 to 25 had the highest rate (9.5%).1

- Among Indiana college students, prescription stimulants were the most commonly reported prescription drug, with 5.2% of students reporting misuse in the past month. Past-month prevalence of prescription painkiller and sedative misuse were 2.3% and 2.2% respectively.3

Youth Consumption

- 4.9% of young Hoosiers ages 12 to 17 misused pain relievers in the past year.1

- In Indiana, 1.8% of 8th grade students, 3.7% of 10th grade students, and 5.8% of 12th grade students indicated current misuse of prescription drugs.3

Impact: Health

- Prescription drug misuse was reported in 28.5% of substance use treatment admissions in Indiana; dependence was indicated in 14.4% (U.S.: 20.2% and 9.8% respectively).6

- Pain reliever misuse was the leading category of prescription drug misuse reported at treatment admissions in 2014 (22.8%) followed by sedatives/tranquilizers (8.1%).6

- Prescription drug abusers in treatment were primarily female and white.6

Impact: Criminal Justice

- In Indiana, 2,805 arrests were made in 2014 for possession of barbiturates (sedatives) and Benzedrine (a stimulant); 1,495 arrests were made for sale/manufacture of these substances. Indiana’s arrest rate of 0.4 per 1,000 population for possession was significantly lower than the national rate (0.8 per 1,000 population); however, arrest rates for sale/manufacture were the same (0.2 per 1,000 population).9
Prevalence

- Polysubstance abuse is a serious pattern of drug use that involves the consumption of two or more drugs at a time.

- Among the Indiana treatment population, 62.8% reported use of two or more drugs; the percentage was statistically significantly higher in Indiana compared to the nation (54.3%).

- The percentage of treatment admissions with polysubstance abuse has remained relatively stable in Indiana since 2005. (For the percentages of Indiana treatment admissions with reported use of two substances and three substances, see Figure 1).

- Much of the substance use in Indiana involves using two or more substances, most frequently alcohol together with another drug.

- Alcohol and marijuana were the substances most commonly reported at treatment admission. The most common drug clusters identified in Indiana were (a) alcohol and marijuana; (b) alcohol, marijuana, and some other drug; and (c) marijuana and some other drug.

Figure 1. Percentage of Indiana Treatment Episodes with Reported Use of Two Substances and Three Substances (Treatment Episode Data Set, 2005-2014)
References


About Substance Abuse in Indiana

This issue brief provides a concise overview of alcohol, tobacco, marijuana, cocaine, heroin, methamphetamine, non-medical prescription drug abuse, and polysubstance abuse in Indiana.

For detailed analysis of substance abuse in Indiana, see *The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2016*, a comprehensive epidemiologic profile created by the Indiana University Center for Health Policy for the State Epidemiology and Outcomes Workgroup (SEOW).

Funding for these reports was provided by the Indiana Family and Social Services Administration/Division of Mental Health and Addiction (DMHA) through the Substance Abuse Prevention and Treatment (SAPT) Block Grant CFDA 93.959 from the Substance Abuse and Mental Health Services Administration (SAMHSA).

For questions and additional information, please contact Julie Gries at the Division of Mental Health and Addiction (phone: 317-232-7894; e-mail: julie.gries@fssa.in.gov).