

# **2013 SEOW**

## **State Epidemiological Overview**

**Presented By Tim Diomede**

**August 2013**



Hornby Zeller Associates, Inc.

# Agenda

- ❖ **SEOW Purpose and Updates**
- ❖ **Present Key Findings of 2013 SEOW Report**
- ❖ **Focus on Marijuana**
- ❖ **Update on Resources and MJ Workgroup**

# Purposes of State Epidemiological Outcomes Workgroup (SEOW)

## Data Driven Decision-making

- ❖ **P**romote systematic, data-driven decision-making
- ❖ **G**uide effective and efficient use of prevention resources

## Populations and Trends

- ❖ **I**dentify substance abuse patterns
- ❖ **E**stablish and track substance abuse trends
- ❖ **D**etect emerging substances and trends

# Updated Sources



Updates

- ✓ Behavioral Risk Factor Surveillance System (**BRFSS**)
- ✓ Maine Department of Public Safety (**DPS**), Bureau of Highway Safety (**BHS**),  
Maine Department of Transportation (**MDOT**)
- ✓ Maine Department of Public Safety (**DPS**), Uniform Crime Reports (**UCR**)
- ✓ Maine Office of the Chief Medical Examiner (**OCME**)
- ✓ National Survey on Substance Use and Health (**NSDUH**)
- ✓ Northern New England Poison Center (**NNEPC**)
- ✓ Pregnancy Risk Assessment Monitoring System (**PRAMS**)
- ✓ Prescription Monitoring Program (**PMP**)
- ✓ Treatment Data System (**TDS**)
- ✓ Maine Department of Public Safety (**DPS**), Uniform Crime Reports (**UCR**)

# New Sources



**Maine Drug Enforcement Agency  
(MDEA)**



**Maine Emergency Medical Services  
(EMS)**



**Maine Homeless Youth Survey (New  
Beginnings)**



# **Key Findings**

# Consumption

❖ In 2011, **three in five** adults indicated they had consumed **alcohol** within the past month (BRFSS, 2010).



❖ In 2011, **one in ten** 18 to 25 year reported that they consumed at least one alcoholic drink per day in the past month (BRFSS, 2010).



# Consumption

❖ **16%** of Maine adults **18+** reported **binge** drinking at least once in past 30 days (BRFSS, 2011).



❖ **A**lmost **one in three 18 to 25** year olds reported **binge** drinking within the past month (BRFSS, 2011).



**Binge Drinking** is defined as consuming five or more drinks in a row.



# Consumption (cont.)

❖ In 2011, nearly **one in five** Mainers **18+** reported smoking **cigarettes daily**. (BRFSS, 2011)



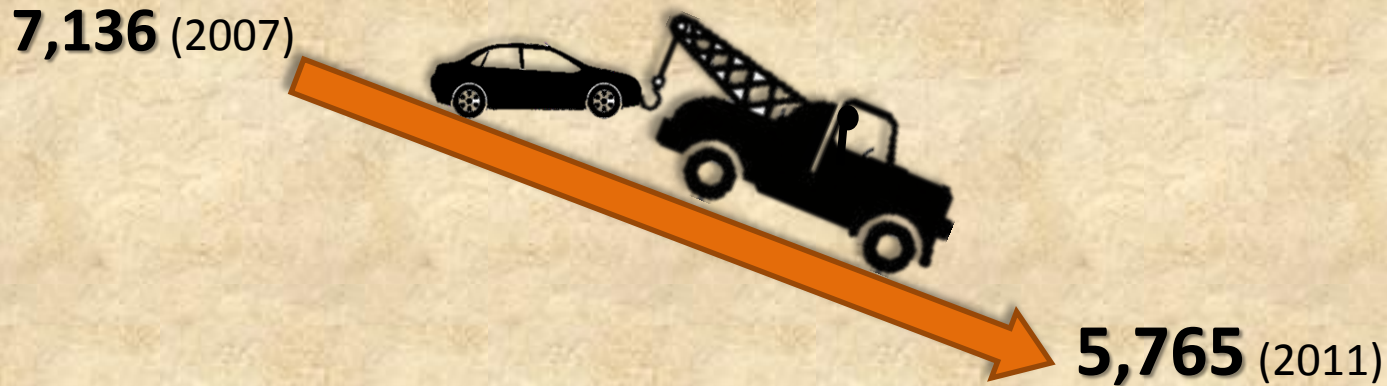
❖ In 2011, the highest rate of lifetime **Rx misuse** was observed among adults **26 to 35** years old (**10%**). (NSDUH, 2009-10)

❖ Almost **one in ten homeless youth** in Maine have used **heroin** during their lifetime (MHYS/New Beginnings).



# Criminal Justice

❖ **O.U.I.** offenses have been **decreasing** since 2007.



❖ In 2011, **21 to 29** year olds had the most OUIs (**1,849**).

❖ **Juvenile liquor law** violations decreased from 2009 (**1,204**) to 2011 (**893**).



# Criminal Justice

- ❖ Most drug related offenses in 2011 were for **possession** rather than **sale and manufacturing** (DPS-UCR, 2011).



Vs.



- ❖ Since 2009, **two out of five** (40%) arrests by Maine **DEA** involved **pharmaceutical narcotics** (DEA-UCR).



# Drinking and Driving

❖ About **one in twenty** (~5%) of all crashes in Maine involved alcohol (MDOT, BHS, 2012).



❖ In 2012, more than **one in three fatal** crashes involved alcohol (MDOT, BHS, 2012).



❖ **Fatal** alcohol-related car crashes among **16 to 20** year olds *increased* from **7** crashes per 100,000 licensees in 2011 to **19** crashes per 100,000 licensees in 2012 (MDOT, BHS, 2012).

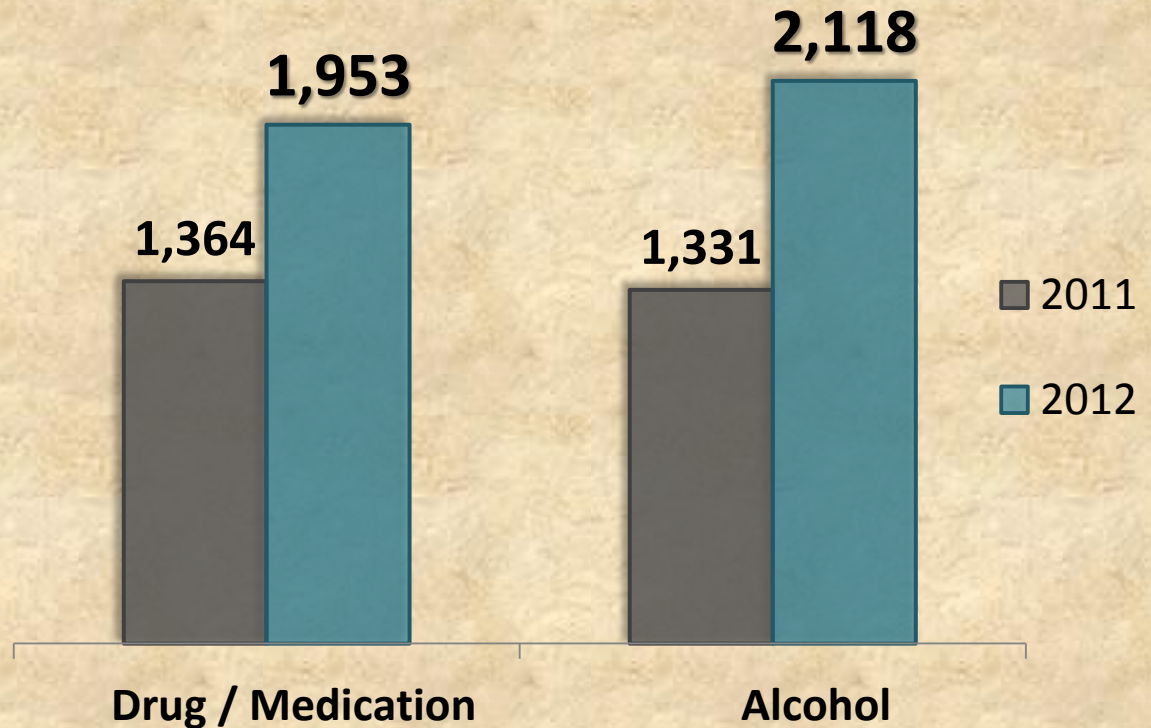


# Emergency Medical Services



In 2012, **EMS** helped **5,206** individuals experiencing an overdose. Incidents were mostly related to **alcohol** (2,118) and **drugs/medication** (1,953) (EMS).

❖ **60%** increase in alcohol overdoses and **48%** rise in medication or drug overdoses since 2011 (EMS, 2012).





# Poisonings and Deaths



**4%** (589) of all **poisoning calls** received in 2012 were substance abuse cases (NNEPC).



In 2012, there were **154 overdose deaths** (OCME).

- Overdoses were most likely to involve **oxycodone, benzodiazepines**, and **methadone** (OCME, 2012).
- Overdoses related to **Methadone** have decreased from 30% in 2010 to 20% in 2012 (OCME, 2012).
- **Heroin** overdoses are on the **rise** (4% in 2010 to **14% in 2012**) (OCME, 2012).

# Rx Drugs Availability



The number of prescriptions involving **narcotics** has decreased from **1.4 million** in 2010 to **1.1 million** in 2012 (PMP).



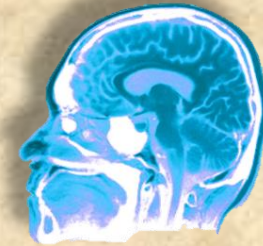
The number of pills per capita for **narcotics** has decreased from **64** pills per person in 2010 to **61** per person in 2012 (PMP).



In 2012, **two out of five** (9,108) NNEPC calls *requesting verification* were identified as **opioids** (a decline of 54% since 2010).



# Mental Health



❖ In 2011, **one in four** adults reported having ever been diagnosed with **depression** (BRFSS).



❖ **One in five** adults reported having ever been diagnosed with **anxiety** (BRFSS).



❖ Adults ages **26 to 35** reported the **highest** rates in **both** depression (28%) and anxiety (31%) (BRFSS).

# Treatment and Mental Health

❖ In 2012, **over half** of all substance abuse treatment admissions also had a diagnosed **mental health disorder** (TDS).



❖ Almost **one in three** (30%) of all substance abuse treatment admissions had received **outpatient mental health services** in the past year (TDS, 2012).

❖ **One in ten** of substance abuse treatment admissions in 2012 reported a **psychiatric admission** (within **past 2 years**) (TDS).

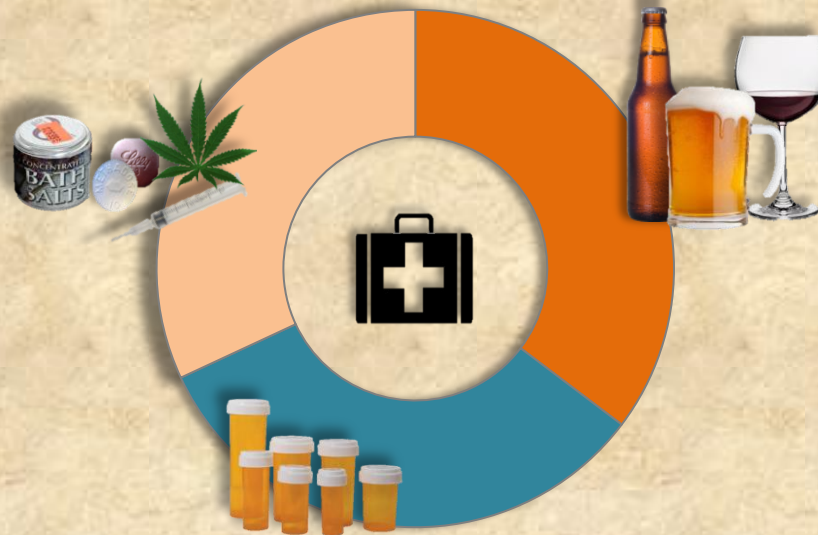




# Treatment Admissions

❖ Overall treatment admissions decreased from **14,843** (2007) to **11,688** (2012) (TDS).

❖ **More** than **one in three** (35%) of all primary admissions are due to **alcohol** (TDS, 2012)

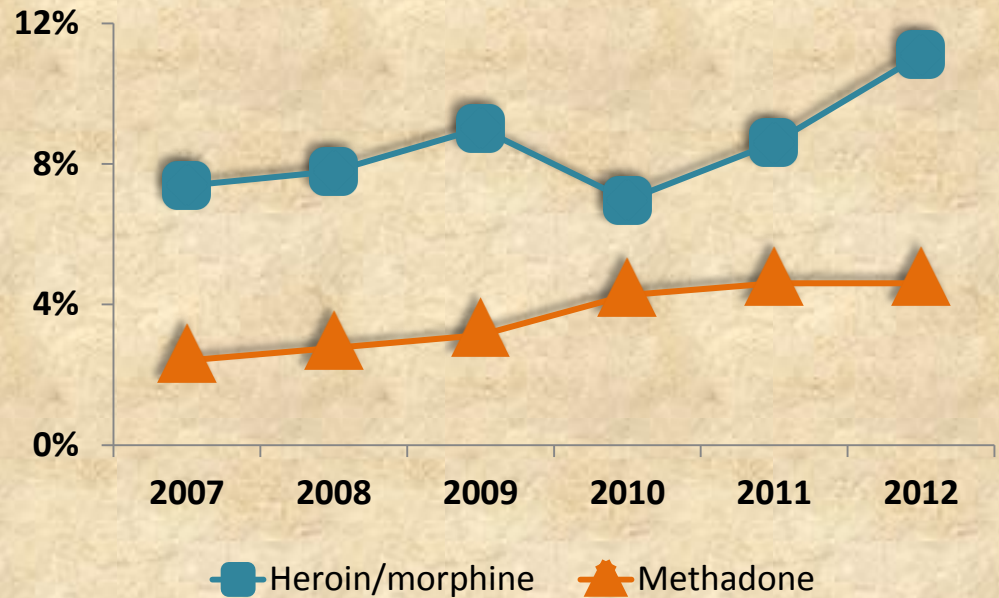


❖ **One in three** of all primary admissions are due to **synthetic opiates** (TDS, 2012).



# Treatment Admissions

■ The proportion of **heroin or morphine** primary admissions has been **steadily increasing** since 2010.



▲ Admissions for **methadone** as a primary substance increased from **2.4%** in 2007 to **4.6%** in 2012.



In 2012, there were **42** primary treatment admissions for **bath salts**, **19** secondary admissions and **21** tertiary admissions.

**A closer look at**

**Marijuana**

A magnifying glass with a black handle and a silver rim is positioned over the word 'Marijuana'. The lens of the magnifying glass is centered over the letter 'M', making it appear larger and more prominent. The background is a textured, light brown surface.

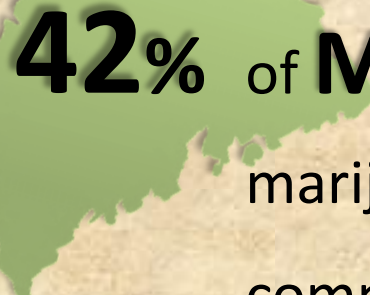
# Youth and Young Adults

- ❖ **One in five** high school students reported using marijuana within the past month (MIYHS, 2011).

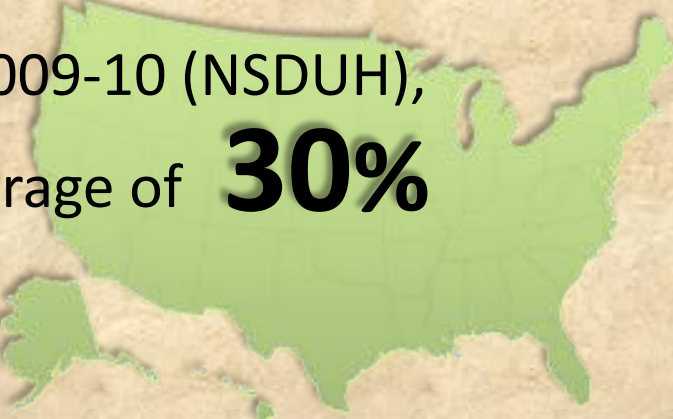


- **Similar rates** are seen within the young adult (18-25) population (BRFSS, 2011).

# National Comparison



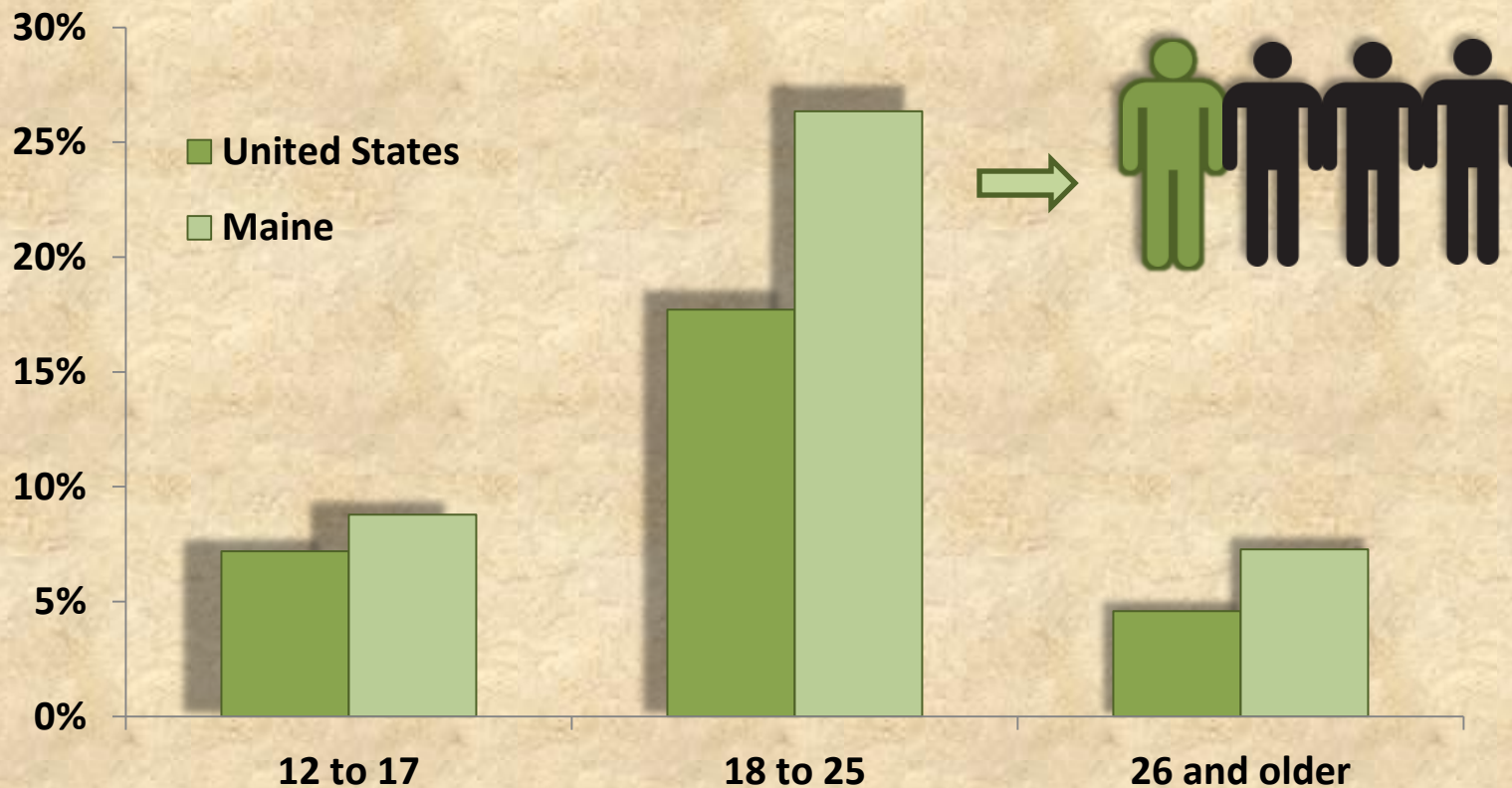
**42%** of **Maine** residents between **18 and 25** used marijuana in the **past year** in 2009-10 (NSDUH), compared to the **National** average of **30%**



❖ In 2009-10, **11%** of residents ages **26+** had used marijuana in the past year, compared to **8%** nationally (NSDUH, 2009-10).

# Consumption

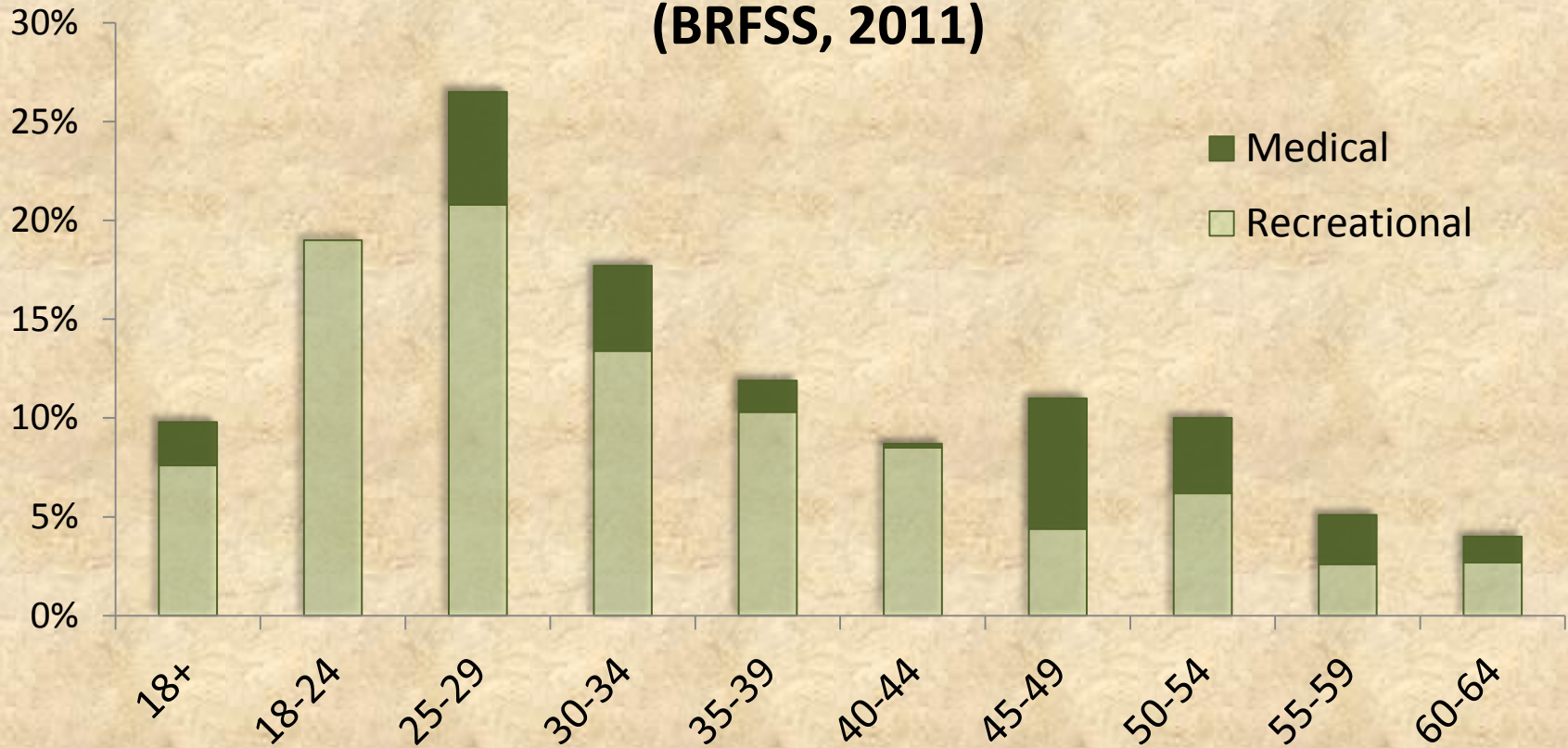
❖ **One in four** Maine 18 to 25 year olds had used marijuana in the **past month** (NSDUH, 2008-10).



➤ Rates are expected to increase with the inception of medical marijuana.



## Past 30 Day Marijuana Use by Age Group (BRFSS, 2011)

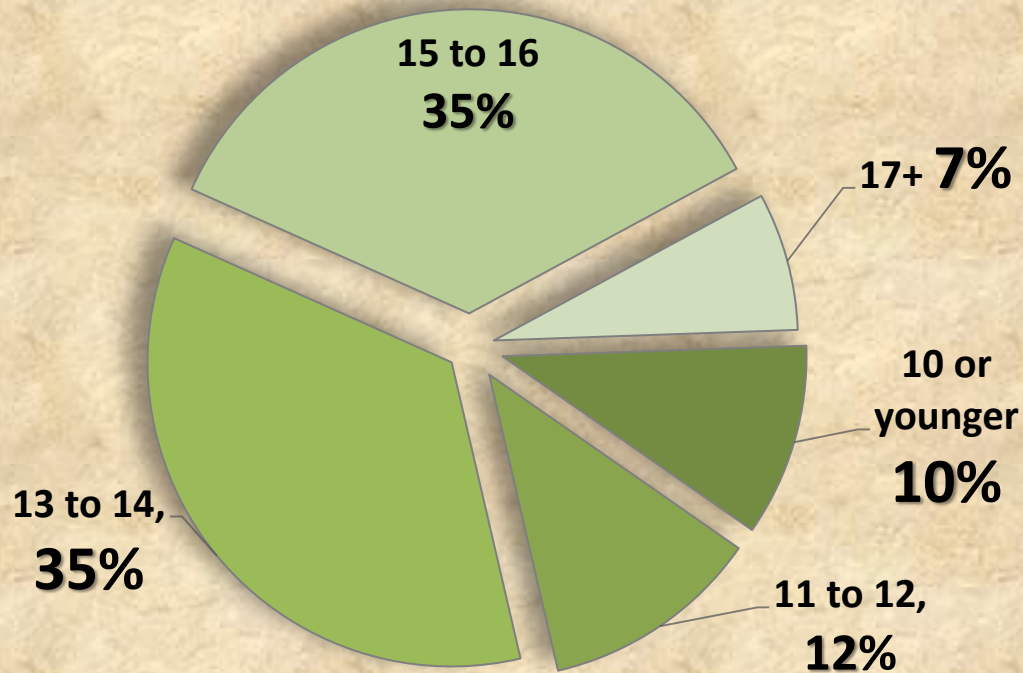


❖ **8%** of Maine adults (**18+**) reported using marijuana recreationally within the past 30 days.

❖ **2%** reported using marijuana for **medical** purposes.

# Initiation of Use

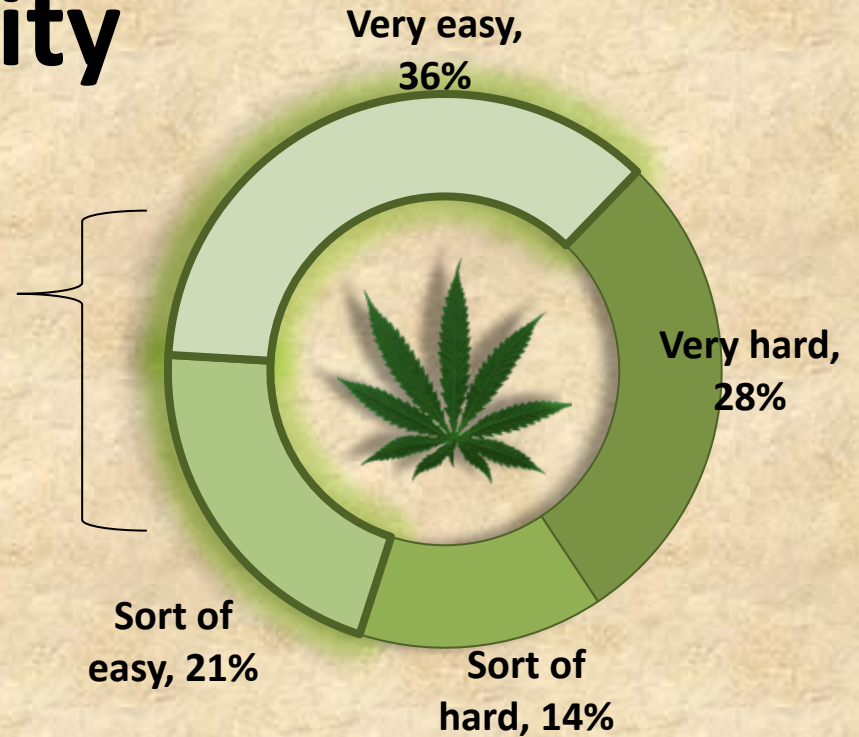
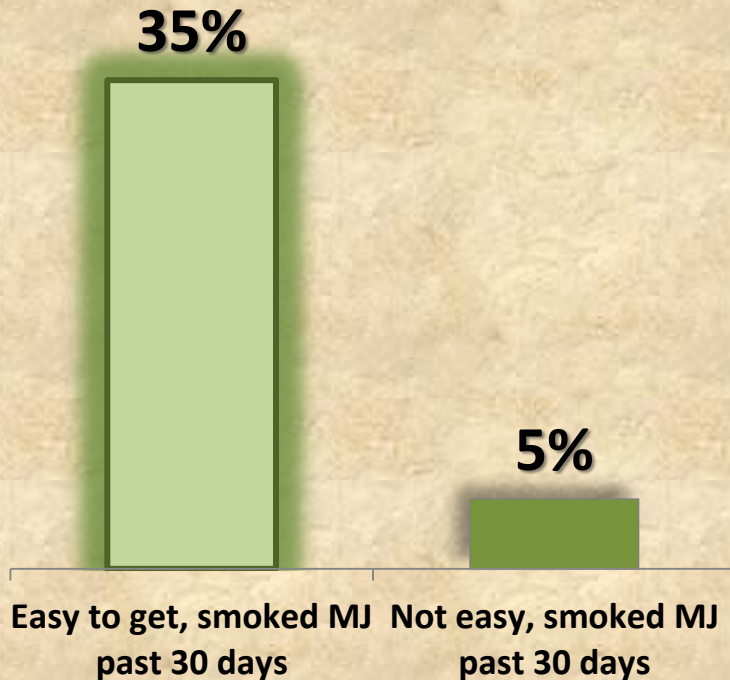
- ❖ In 2011, **70%** of high school students who had ever used marijuana first did so when they were between the ages **13 and 16** (MIYHS).



- ❖ **One in five** tried marijuana for the first time **before** the age of **13**.

# Availability

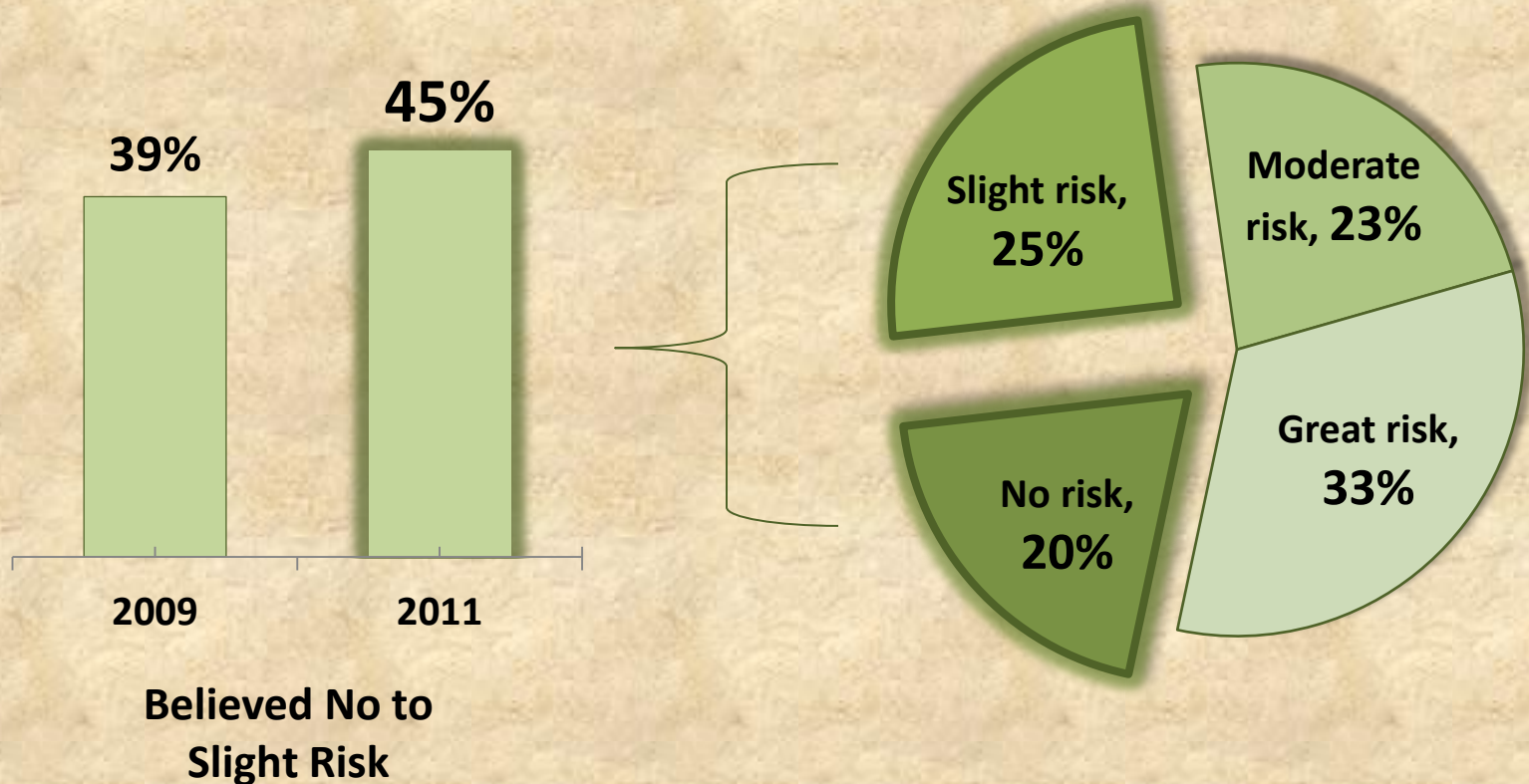
❖ In 2011, **over half (57%)** of high school students felt it would be **easy to get**.



❖ Students who thought marijuana was **easy to obtain** were **7x** as likely to use (MIYHS, 2011).

# Perception of Harm

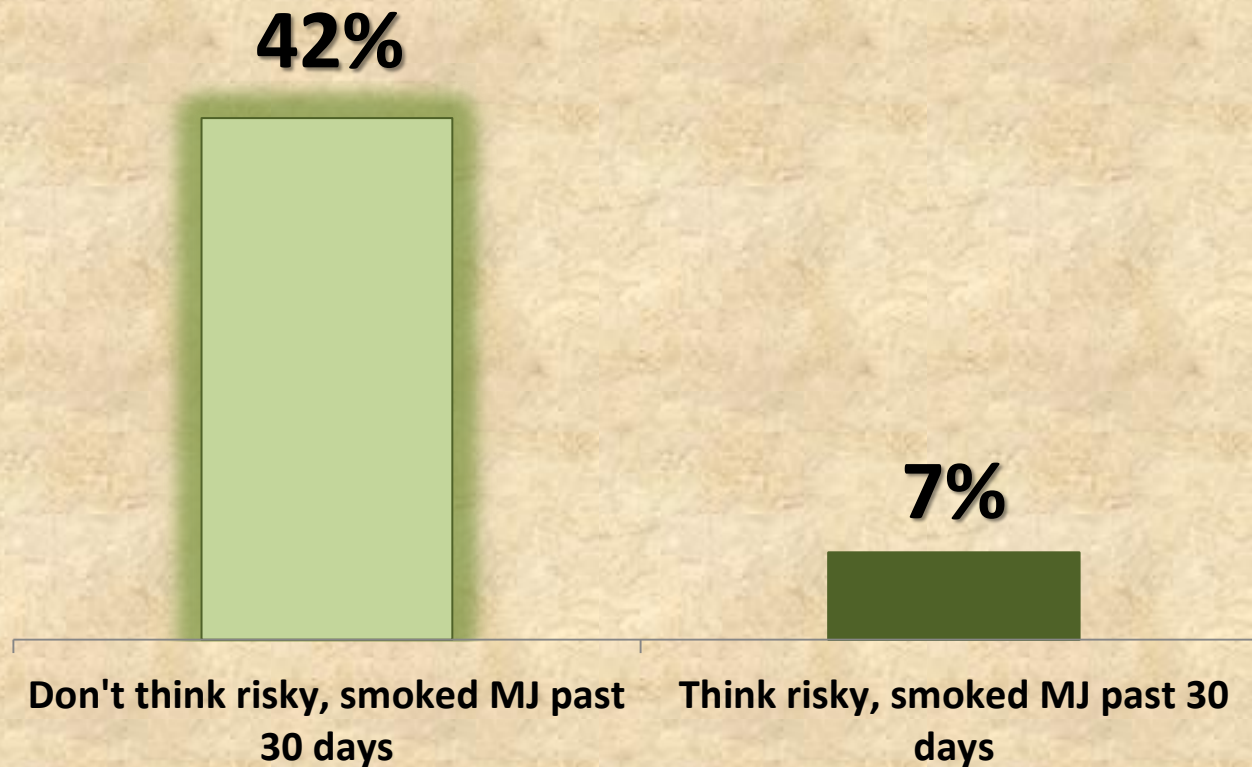
❖ Students who thought smoking marijuana regularly was **not risky** increased from **39%** in 2009 to **45%** in 2011 (MIYHS).





# Perception of Harm

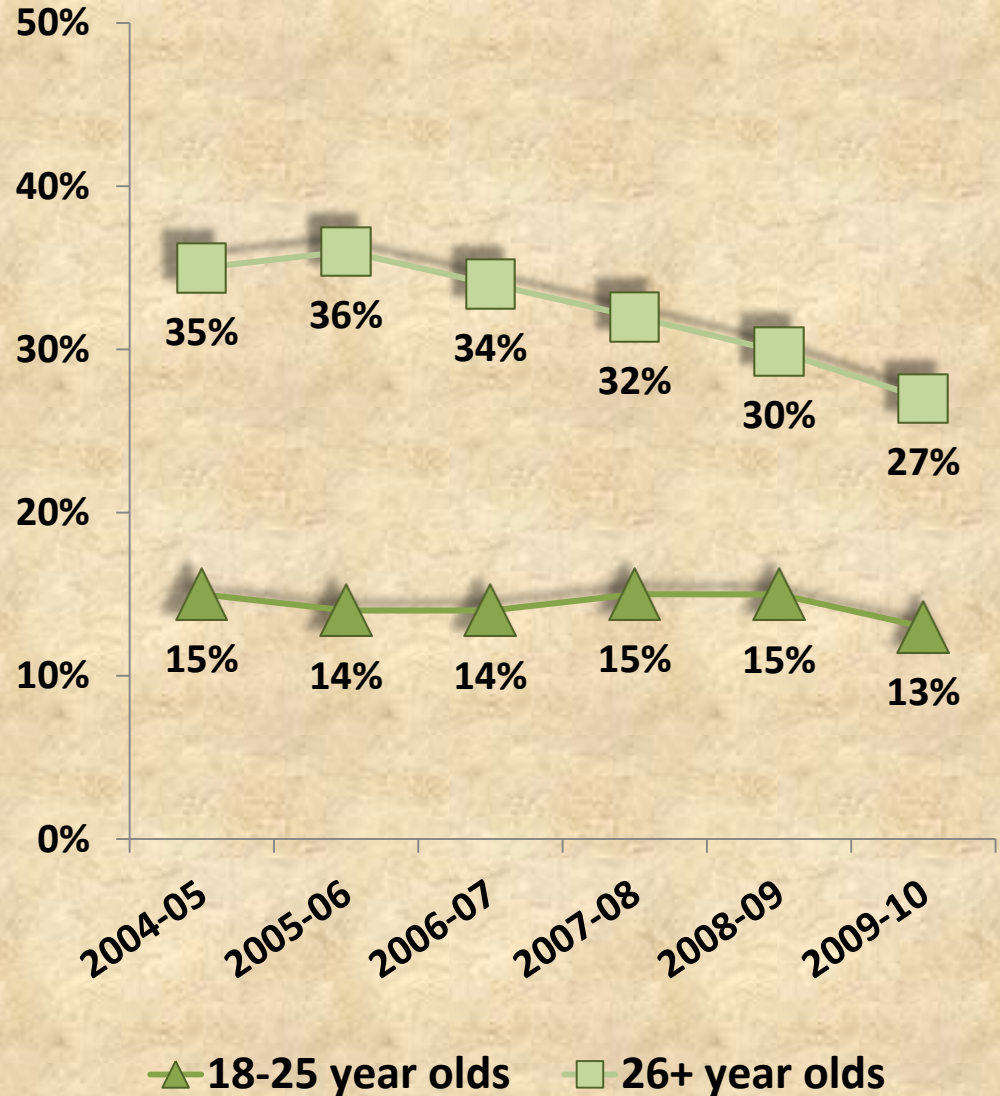
❖ High school students who think there is **no** to **slight risk** in smoking marijuana regularly are **6.5X** as likely to smoke marijuana (MIYHS, 2011).



# Perception of Harm

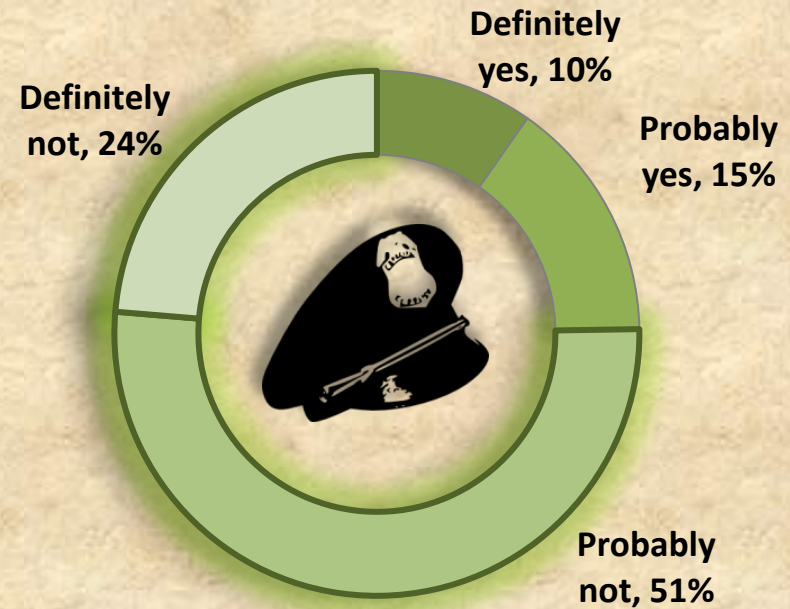
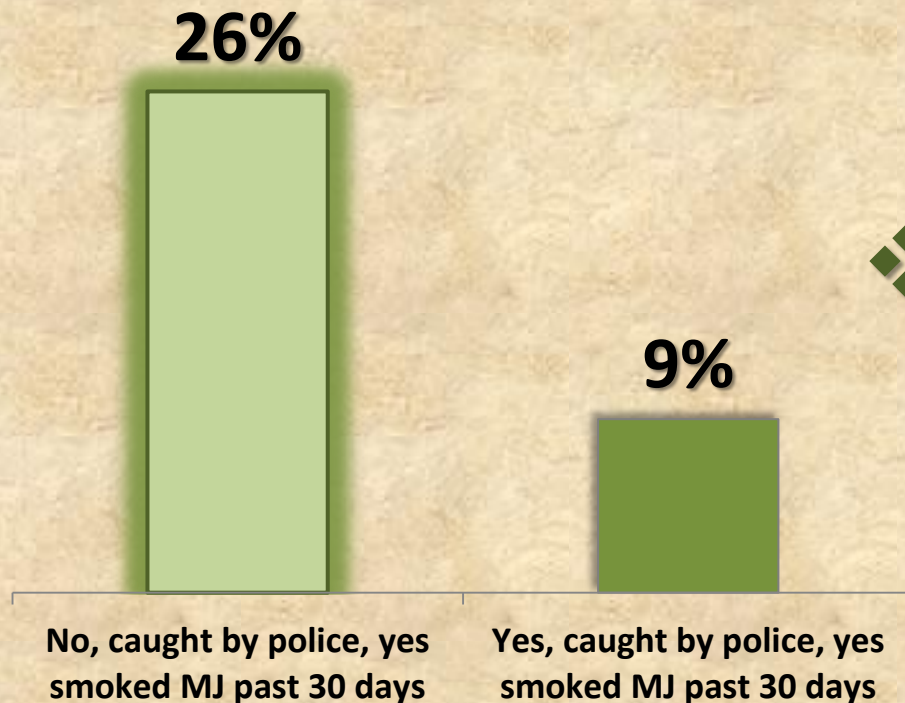
▲ In the 2009-10, **13%** of adults ages **18 to 25** perceived a **great risk** in smoking marijuana once per month (NSDUH).

■ Among adults ages **26+**, perceptions of **risk** have decreased by eight percentage points since 2004-05.



# Perception of enforcement

❖ In 2011, **75%** of students felt kids in the community would **not** be **caught by police** for smoking marijuana (MIYHS).

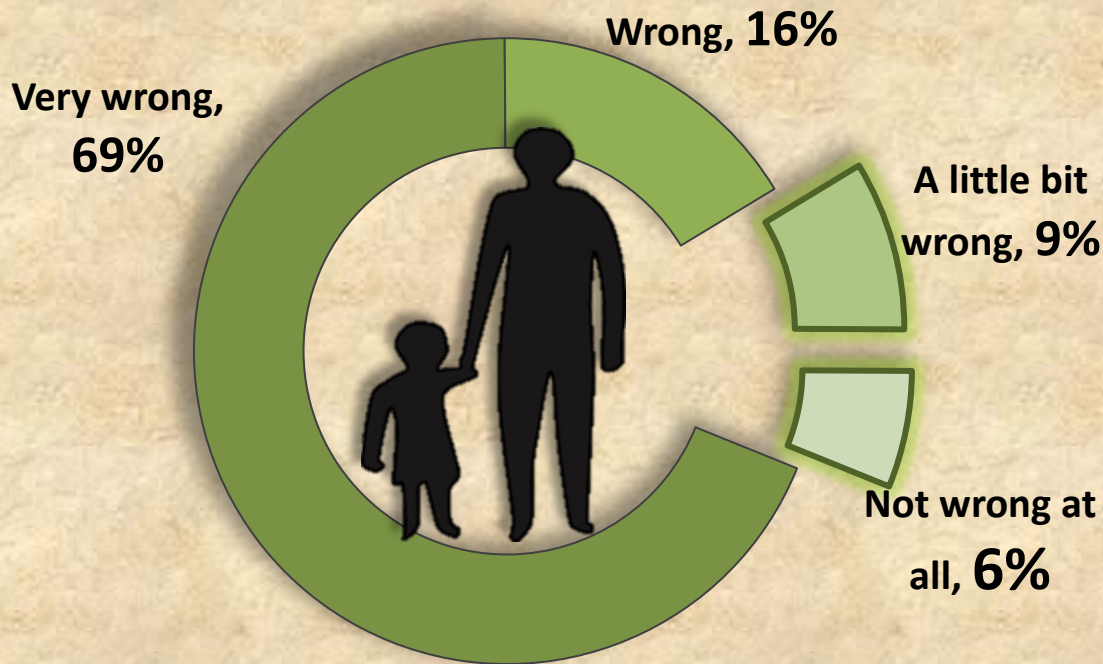


❖ Students who did **not** think that they would be **caught by the police** were almost **3x** as likely to smoke marijuana.

# Community and Social Norms



❖ In 2011, **39%** of students thought they would be seen as **“cool”** if they smoked marijuana (MIYHS).

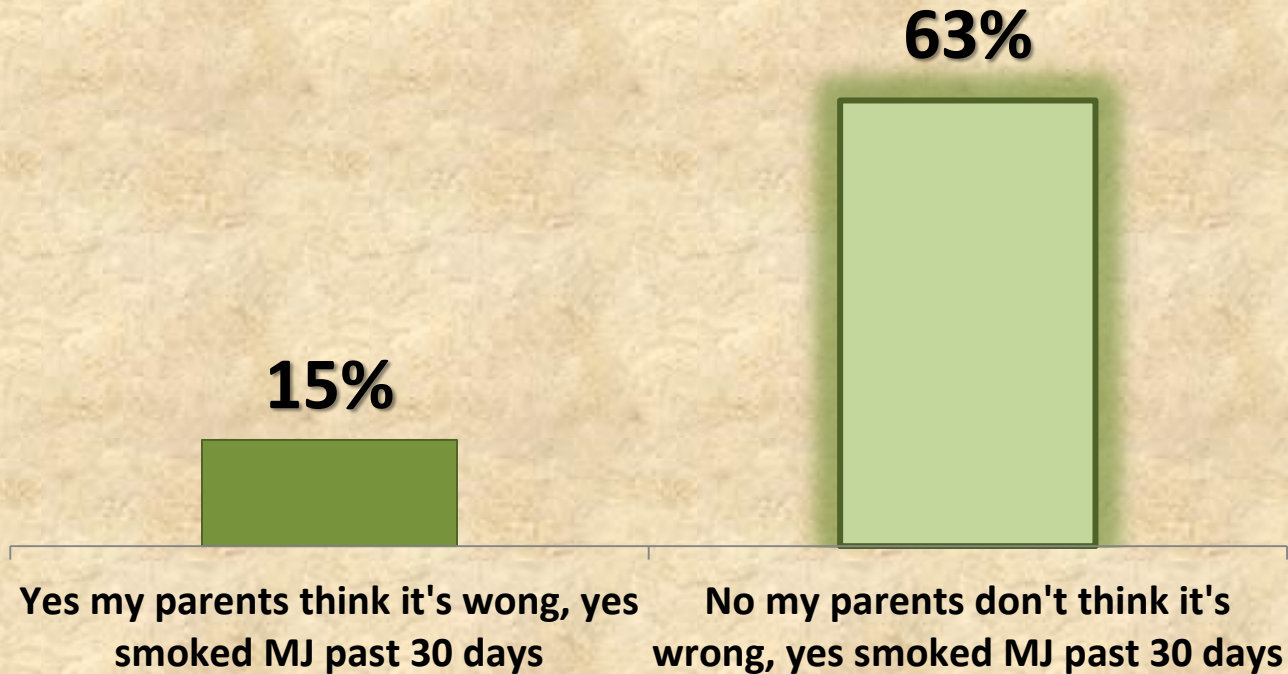


❖ In 2011, **15%** of students reported that their **parents** would **not** feel it would **be wrong** for them to smoke marijuana (MIYHS).



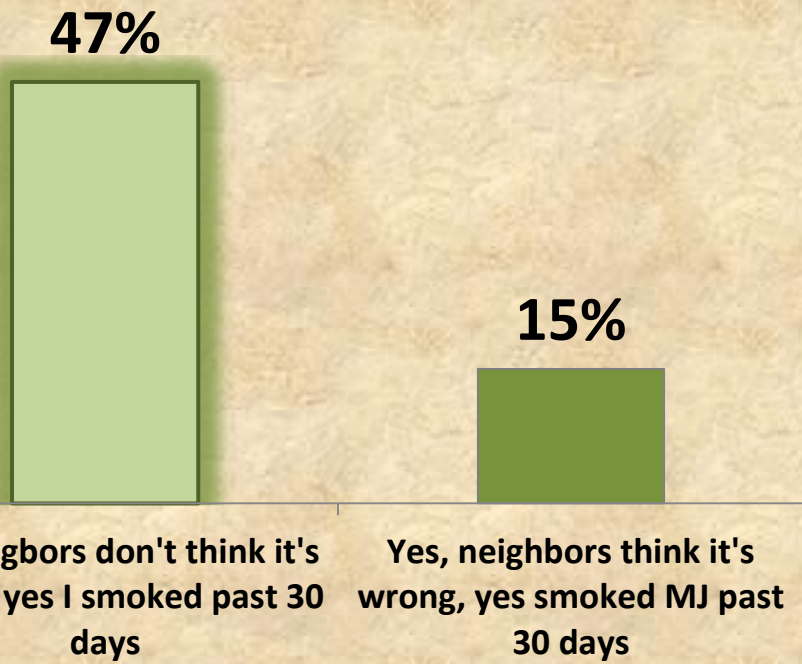
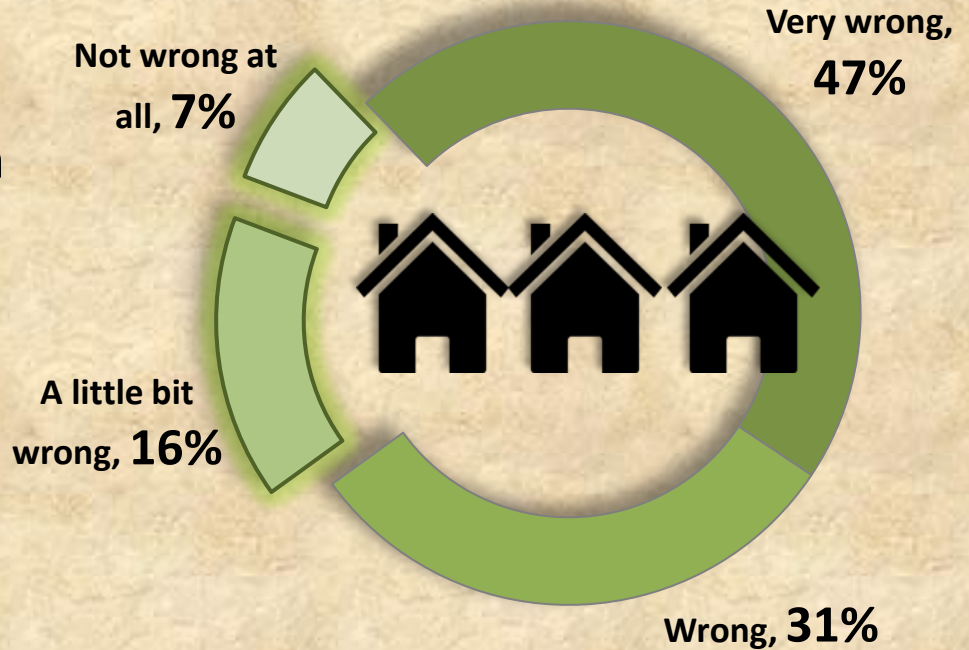
# Community and Social Norms

- ❖ High school students who believe their parents **don't** feel it is wrong for them to smoke marijuana were **4x** as likely to use (MIYHS, 2011).



# Community and Social Norms

❖ **Almost one in four** students thought that **adults in their community would not feel it would be wrong to smoke marijuana (MIYHS).**

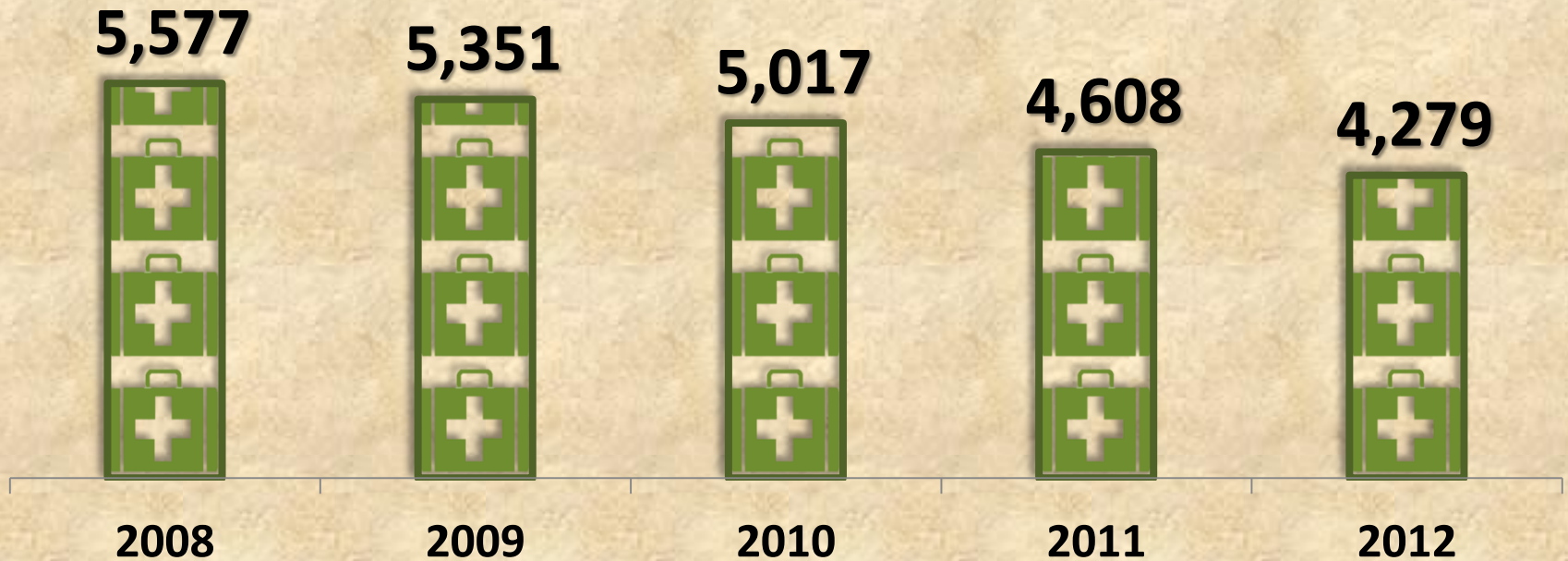


❖ Students who think adults in their **neighborhood do not think it is wrong** for kids to use marijuana are **3x** as likely to use it as their peers.

# Treatment



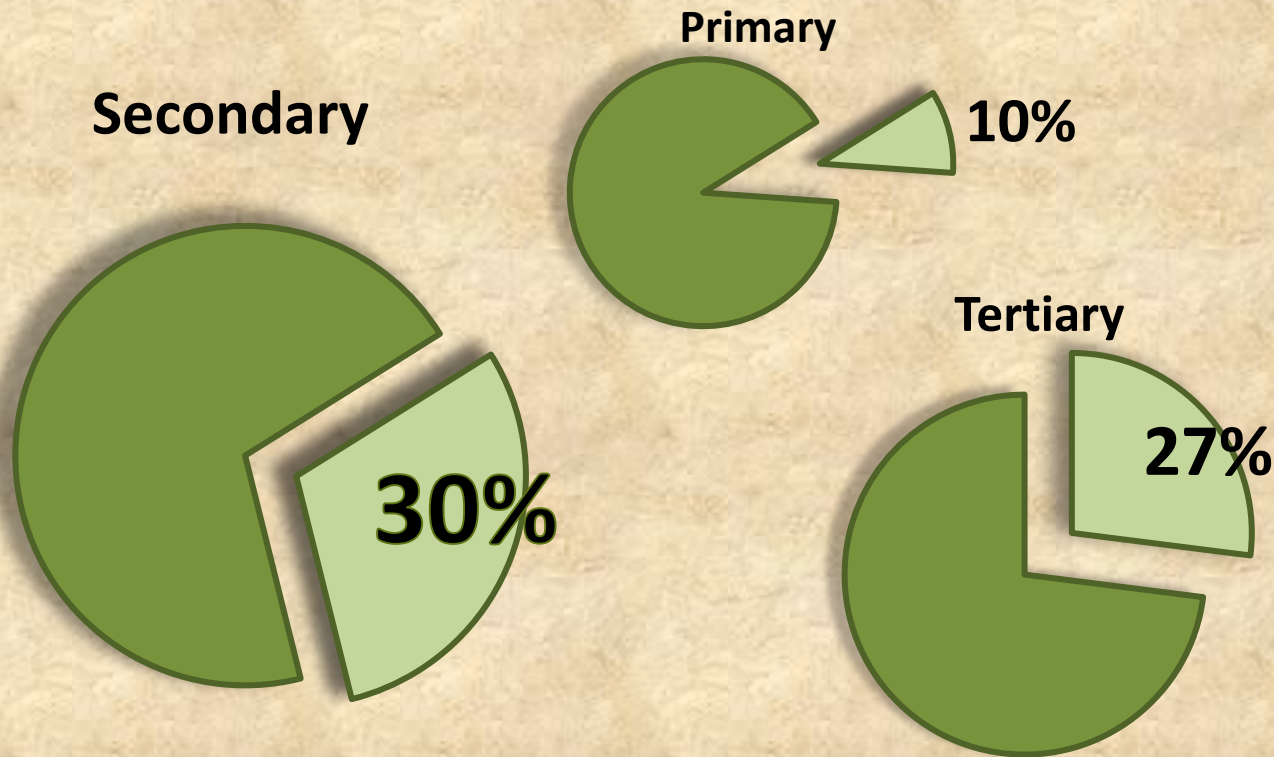
❖ Overall **treatment admissions** for Marijuana have **decreased** since 2008 (TDS).



❖ In 2012, there were **2,190** **secondary** marijuana admissions compared to **1,024** **primary** admissions.

# Treatment

❖ In 2012, marijuana accounted for **10%** of **primary** treatment admissions, but accounted for **30%** of **secondary** admissions, and **27%** of **tertiary** admissions (TDS).





# Marijuana Resources

**Brochures:** From the “Find Out More, Do More” parent media campaign. Available from the SAMHS, Information & Resource Center and online at: <http://maineparents.net/Media/Materials.htm>

Additionally, on <http://MaineParents.net> there is a “**Your Teen and Marijuana**” fact page as well as the “**Teen Room**” an interactive page with information from the paraphernalia brochure.

## Fact Sheets:

<http://www.maine.gov/dhhs/samhs/osa/irc/drugfactsheets.htm>

[Adolescent Risk with Marijuana Use](#) (pdf)

[Marijuana and Driving](#) (pdf)

[Marijuana Use in Maine](#) --CESN, 2012 (pdf)

## Data:

- [Community Epidemiology Surveillance Network \(CESN\)](#) This page provides reports on substance abuse trends in Maine for each public health district, including MIYHS and TDS data.
- [Maine Integrated Youth Health Survey \(MIYHS\)](#) Maine youth survey data on marijuana use and perception of harm.
- [Treatment Data System \(TDS\)](#) De-identified admission and discharge data submitted by treatment agencies statewide used to monitor and track trends in substance use.

# Marijuana Workgroup Update

## Resources Under Development:

### ❖ Five Key Messages

- (safe, healthy, and successful)

### ❖ Presentation for coalitions and communities

- Marijuana and teens (effects on bodies, brains, impairment, addiction, mental health, education, and life success)

## Contact Information

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# Question and Comments

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Link to CESN page:

<http://www.maine.gov/dhhs/samhs/osa/data/cesn/index.htm>