

## MENTAL AND/OR SUBSTANCE USE DISORDERS

Every September during the **National Recovery Month (Recovery Month)** observance, the Substance Abuse and Mental Health Services Administration (SAMHSA) (<http://www.samhsa.gov>), within the U.S. Department of Health and Human Services (HHS) (<http://www.hhs.gov>), releases the *National Survey on Drug Use and Health (NSDUH)*.

NSDUH is the primary source of information on the prevalence and impact of mental and/or substance use disorders across the country. The survey provides valuable statistics that can add context and credibility to outreach efforts. It also helps individuals and organizations promote **Recovery Month** events. In addition, NSDUH provides concrete data for media coverage of mental and/or substance use disorders as a public health issue.

State-specific statistics (<http://www.samhsa.gov/data/population-data-nsduh>) are also a good way to illustrate the local prevalence of behavioral health conditions.

The following facts from the NSDUH report and other data sources highlight that behavioral health is essential to health, prevention works, treatment is effective, and people recover from mental and/or substance use disorders. Facts and statistics are provided for the following audiences: high school students, college students, family supports, and peer recovery.

This data can also be supplemented by researching local statistics in your city or state.

### Behavioral Health Prevalence in the U.S. in 2013

- Among adults aged 18 or older, 43.8 million (18.5 percent of adults) had any mental illness in the past year.<sup>1</sup>
  - Any mental illness is defined as an individual having any mental, behavioral, or emotional disorder in the past year that met Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) criteria (excluding developmental and substance use disorders).<sup>2</sup>
- Among adults aged 18 or older, 34.6 million (14.6 percent of adults) reported receiving mental health services in the past year.<sup>3</sup>
- Among adults aged 18 or older, 10 million (4.2 percent of adults) had a serious mental illness in the past year.<sup>4</sup>
- Among the 43.8 million adults aged 18 or older with any mental illness, 19.6 million (44.7 percent) received mental health services in the past year. Among the 10 million adults with serious mental illness, 6.9 million (68.5 percent) received mental health services in the past year.<sup>5</sup>
- On average, more than 33,000 Americans died each year between 2001 and 2009 as a result of suicide—more than 1 person every 15 minutes.<sup>6</sup>
- Suicide was the second leading cause of death for two different age groups, individuals aged 15 to 24 and 25 to 34.<sup>7</sup>
- Among people aged 12 or older, 21.6 million people (8.2 percent of this population) were classified with substance dependence or abuse in the past year.<sup>8</sup>
- Among people aged 12 or older, 20.2 million people needed treatment for an illicit drug or alcohol use problem in the past year, but did not receive treatment at a specialty facility in the past year.<sup>9</sup>
- In 2013, adults aged 21 or older who had first used alcohol at age 14 or younger were more likely to be classified with alcohol dependence or abuse in the past year compared to adults who had their first drink at age 21 or older (14.8 percent versus 2.3 percent).<sup>10</sup>
- An estimated 8.7 million, or 22.7 percent, of underage persons (aged 12 to 20) were current drinkers in 2013, including 5.4 million, or 14.2 percent, binge drinkers and 1.4 million, or 3.7 percent, heavy drinkers.<sup>11</sup>

More than seven million U.S. adults reported having co-occurring disorders. This means that in the past year they have had any mental illness and a substance use disorder.<sup>12</sup> The percentage of adults who had co-occurring mental illness and substance use disorder in the past year was highest among adults aged 18 to 25 (6.0 percent).<sup>13</sup>

## Prevention Works, Treatment is Effective, and People Recover

- By 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide.<sup>14</sup>
- The first behavioral health symptoms typically precede a mental and/or substance use disorder by two to four years, offering a window of opportunity to intervene early and often.<sup>15</sup>
- In 2013, 72.6 percent of youth aged 12 to 17 reported having seen or heard drug or alcohol prevention messages from sources outside of school. The prevalence of past month illicit drug use in 2013 was lower among youth who reported having exposure to prevention messages compared with youth who did not have such exposure.<sup>16</sup>
- According to research that tracks individuals in treatment over extended periods, most people who get into and remain in treatment stop using drugs, decrease their criminal activity, and improve their occupational, social, and psychological functioning.<sup>17</sup>
- Two-thirds of Americans believe that treatment and support can help people with mental illnesses lead normal lives.<sup>18</sup>

## Special Populations Affected by Behavioral Health Conditions

- High School Students
  - According to the University of Michigan's 2014 Monitoring the Future study, one in five (19 percent) 12<sup>th</sup> graders reported binge drinking at least once in the prior two weeks.<sup>19</sup>
  - In 2013, 8.8 percent of youth aged 12 to 17 were current illicit drug users<sup>20</sup> and 11.6 percent were current alcohol users.<sup>21</sup> In addition, 5.2 percent of this age group was considered to have a substance use disorder in the past year.<sup>22</sup>
  - In 2013, 10.7 percent of youth aged 12 to 17 experienced a major depressive episode in the past year while 7.7 percent had a major depressive episode with a severe impairment in one or more role domains (e.g., chores at home, school/work, close relationships with family, or social life).<sup>23</sup>
- College Students
  - In 2013, 22.3 percent of full-time college students aged 18 to 22 were currently using illicit drugs,<sup>24</sup> and 59.4 percent were current drinkers.<sup>25</sup>
  - The rate of current nonmedical use of prescription-type drugs amongst college students is 4.8 percent.<sup>26</sup>
  - The mental health of college students is a growing concern—18 percent of college students have seriously considered attempting suicide, and 60.5 percent of students report having severe feelings of sadness.<sup>27, 28</sup>
- Family Supports
  - Research shows that family supports play a major role in helping to prevent mental and/or substance use disorders, identifying when someone has a problem<sup>29</sup>, and connecting those in need with treatment resources and services they need to begin and stay on their recovery journey.<sup>30</sup>
  - In 2013, past month use of illicit drugs, cigarettes, and/or binge alcohol-use were lower among youth aged 12 to 17 who reported that their parents always or sometimes engaged in supportive or monitoring behaviors than among youth whose parents seldom or never engaged in such behaviors.<sup>31</sup>
  - Past month illicit drug use in 2013 was lower among youth who indicated that their parents always or sometimes helped with homework than among youth who indicated that their parents seldom or never helped (7.3 percent compared to 14.7 percent).<sup>32</sup>

- Peer Recovery
  - In studies of clinical populations, completion of addiction treatment, and participation in peer recovery groups are more predictive of long-term recovery than either activity alone.<sup>33</sup>
  - Several studies have concluded that helping others improves one's own prognosis for recovery.<sup>34</sup>
  - By sharing their experiences, peers bring hope to people in recovery, and promote a sense of belonging within the community.<sup>35</sup>

**This list is not exhaustive of all available resources. Inclusion of websites and other resources mentioned in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.**

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<sup>1</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 1.

<sup>2</sup> American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders (DSM-IV)* (4th ed.). Washington, DC: Author.

<sup>3</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 1.

<sup>4</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 1.

<sup>5</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 2.

<sup>6</sup> Surgeon General. *2012 National Strategy for Suicide Prevention: How You Can Play a Role in Preventing Suicide*. Retrieved February 12, 2015, from <http://www.surgeongeneral.gov/library/reports/national-strategy-suicide-prevention/factsheet.pdf>.

<sup>7</sup> Centers for Disease Control and Prevention. (2013). National Center for Health Statistics (NCHS), National Vital Statistics System. *10 Leading Causes of Death*, United States. Retrieved January 26, 2015, from [http://webappa.cdc.gov/sasweb/ncipc/leadcaus10\\_us.html](http://webappa.cdc.gov/sasweb/ncipc/leadcaus10_us.html).

<sup>8</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 7.

<sup>9</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 7.

<sup>10</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 7.

<sup>11</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 3.

<sup>12</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014 p. 49.

<sup>13</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014 p. 52.

<sup>14</sup> Substance Abuse and Mental Health Services Administration, *Prevention of Substance Abuse and Mental Illness*. Retrieved February 12, 2015, from <http://www.samhsa.gov/prevention>.

- <sup>15</sup> National Research Council and Institute of Medicine. (2009). *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities*. Committee on the Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Young Adults: Research Advances and Promising Interventions. Mary Ellen O'Connell, Thomas Boat, and Kenneth E. Warner, Editors. Board on Children, Youth, and Families, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.
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- <sup>17</sup> National Institute on Drug Abuse. Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition), How effective is drug addiction treatment? Retrieved February 12, 2015, from <http://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/frequently-asked-questions/how-effective-drug-addiction-treatment>.
- <sup>18</sup> National Mental Health Anti-Stigma Campaign. *What a Difference a Friend Makes*. The Substance Abuse and Mental Health Services Administration. Retrieved January 29, 2015, from <https://store.samhsa.gov/shin/content/SMA07-4257/SMA07-4257.pdf>, p. 2.
- <sup>19</sup> University of Michigan, Monitoring the Future, *Use of alcohol, cigarettes, and a number of illicit drugs declines among U.S. teens*. Retrieved February 12, 2015, from <http://www.monitoringthefuture.org/pressreleases/14drugpr.pdf>, p. 1.
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- <sup>21</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 3.
- <sup>22</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 7.
- <sup>23</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 37.
- <sup>24</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 27.
- <sup>25</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 27.
- <sup>26</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 2.
- <sup>27</sup> Drum DJ, Brownson C, Denmark AB, Smith SE. (2009). New data on the nature of suicidal crises in college students: Shifting the paradigm. *Professional Psychology*, 40(3): 213-222.
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- <sup>32</sup> Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014, p. 80.
- <sup>33</sup> Great Lakes Addiction Technology Transfer Center and Philadelphia Department of Behavioral Health and Mental Retardation Services. (2009). *Peer-based addiction recovery support: History, theory, practice, and scientific evaluation*. Retrieved February 12, 2015, from [http://www.naadac.org/assets/1959/whitew2009\\_peer-based\\_addiction\\_recovery\\_support.pdf](http://www.naadac.org/assets/1959/whitew2009_peer-based_addiction_recovery_support.pdf), p. 130.
- <sup>34</sup> Great Lakes Addiction Technology Transfer Center and Philadelphia Department of Behavioral Health and Mental Retardation Services. (2009). *Peer-based addiction recovery support: History, theory, practice, and scientific evaluation*. Retrieved February 12, 2015, from [http://www.naadac.org/assets/1959/whitew2009\\_peer-based\\_addiction\\_recovery\\_support.pdf](http://www.naadac.org/assets/1959/whitew2009_peer-based_addiction_recovery_support.pdf), p. 139.
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