

# SEOW Webinar Series Part 3: Contributing Factors of Substance Use in Maine



By Tim Diomedede, MPPM

November 2<sup>nd</sup> 2016



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

# Agenda

- Introduction/Purpose of the SEOW
- Presentation of Key Findings
- New and Updated Resources
- Questions

# Purpose of SEOW

## (State Epidemiological Outcomes Workgroup)

- Promote systematic, data-driven decision-making
- Guide effective and efficient use of prevention resources
- Identify and track substance abuse trends
- Detect emerging substances/trends
- Serve as a clearing house and facilitator

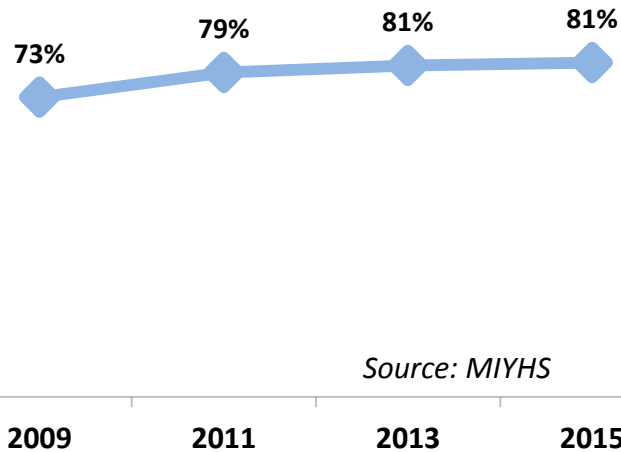
# Contributing Factors

Examples:

- Social Access
- Retail Availability
- Pricing and Promotion
- Social/Community Norms
- Enforcement
- Perceptions of Harm
- Perceived Risk of Being Caught

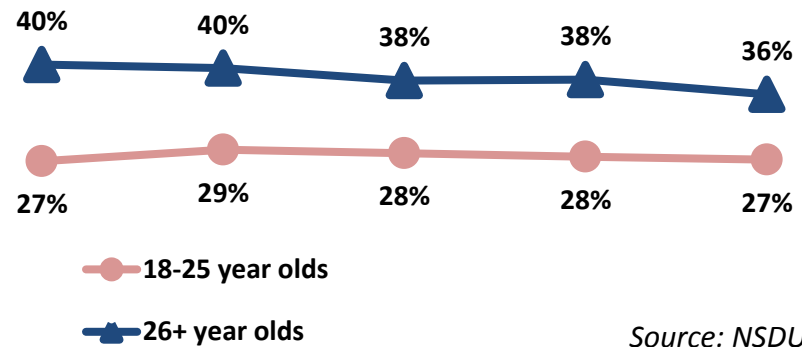
# Perception of harm: binge drinking

High school students perceiving harm from binge drinking weekly



Source: MIYHS

Adults perceiving great risk from binge drinking weekly, by age group



Source: NSDUH

Four out of five high school students think binge drinking once or twice a week is harmful. Perception of harm from binge drinking remains much lower among adults. Only about one in four young adults (18 to 25) thought that binge drinking a few times a week was risky.

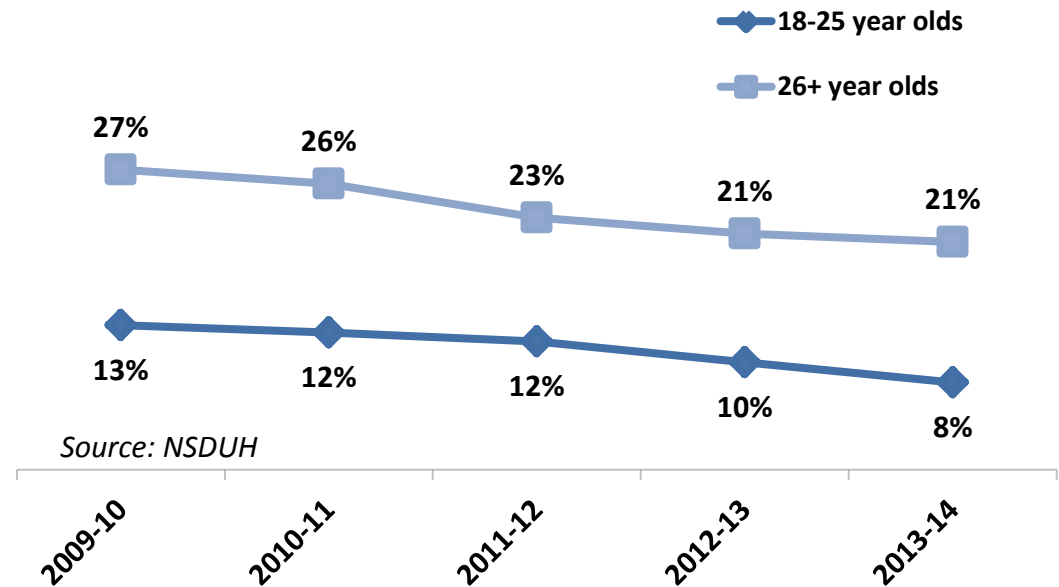
# Perception of harm: marijuana

High school students perceiving risk from smoking marijuana once or twice a week



Source: MIYHS

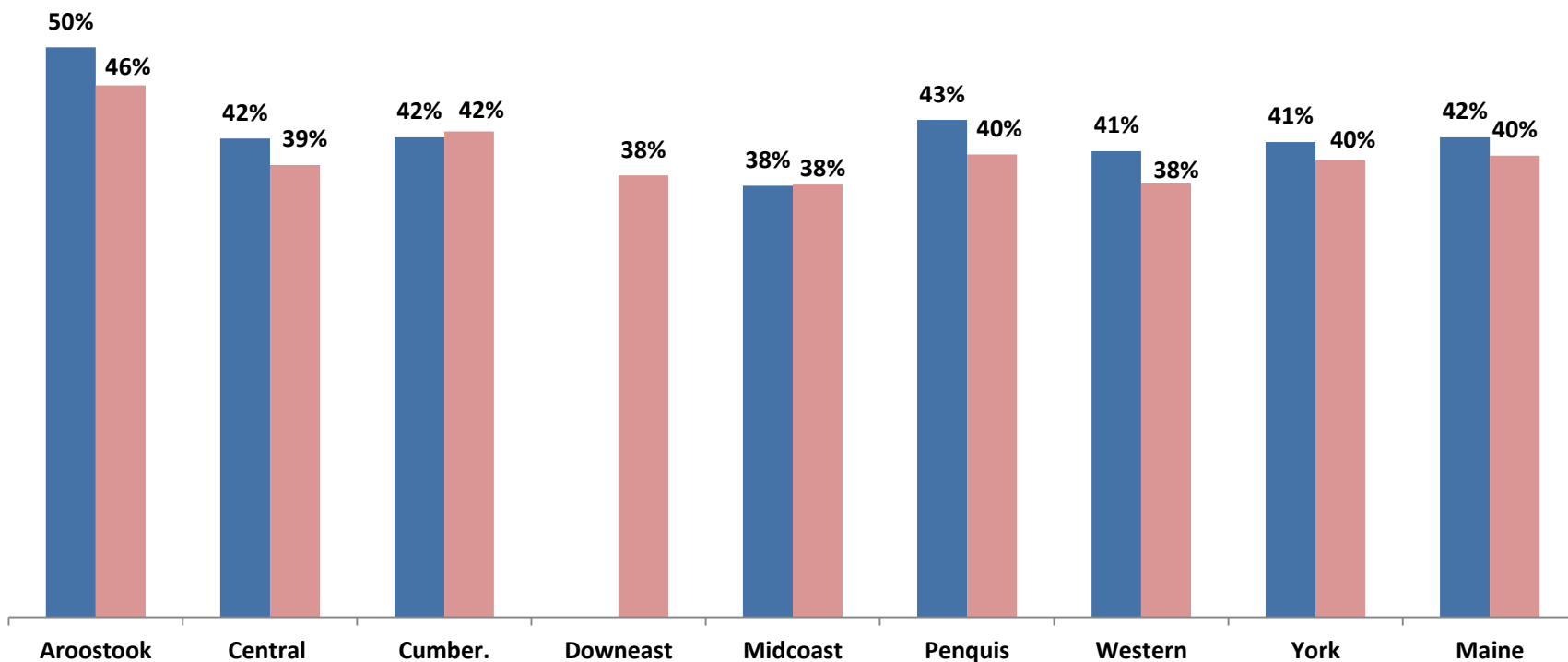
Adults perceiving risk from smoking marijuana at least once per month



Source: NSDUH

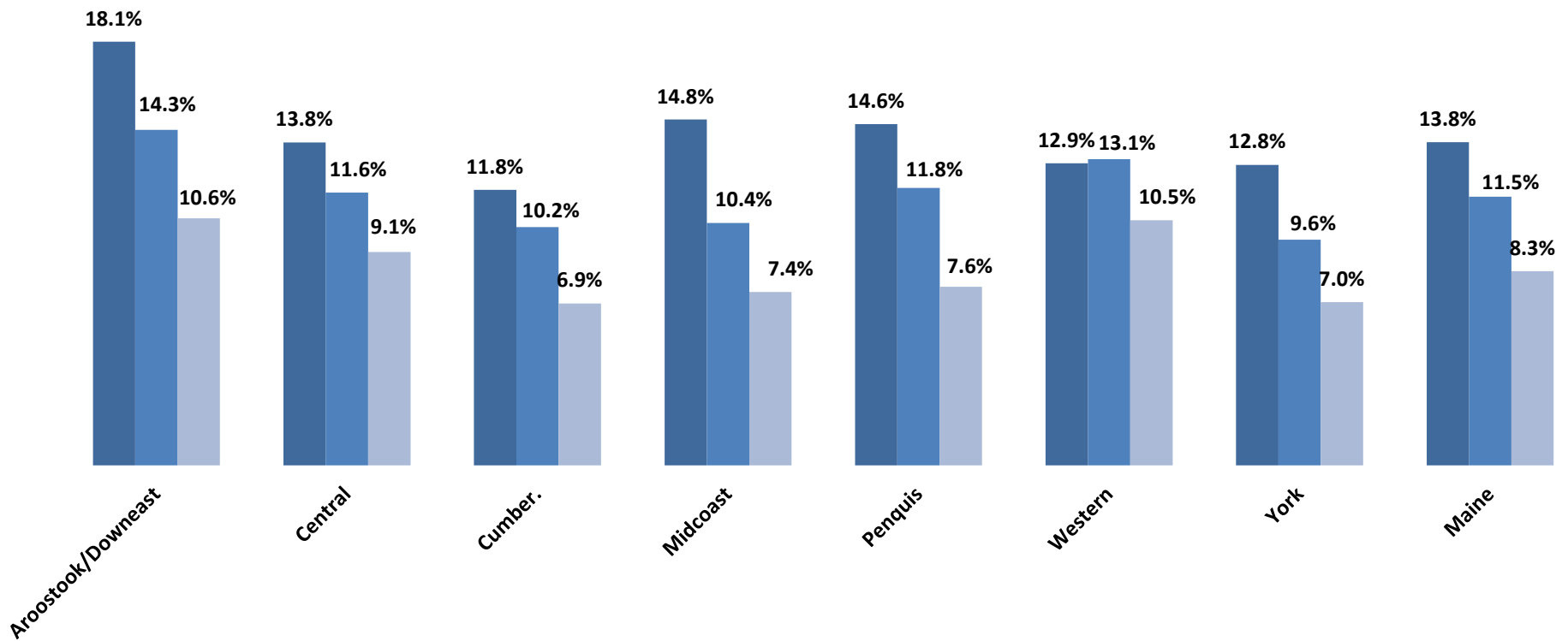
In 2015, only two out of five high school students felt smoking marijuana once or twice a week was risky. In 2013-14, less than one in ten adults between 18 to 25 year olds perceived smoking marijuana at least once per month as risky. Rate have decreased over time.

# Percent of high school students by Public Health District who reported a risk of harm from smoking marijuana once or twice per week: 2013 and 2015



Source: MIYHS

# Percent of 18 to 25 year olds who perceive a great risk from smoking marijuana once a month, Public Health District: 2008-10 to 2012-14\*

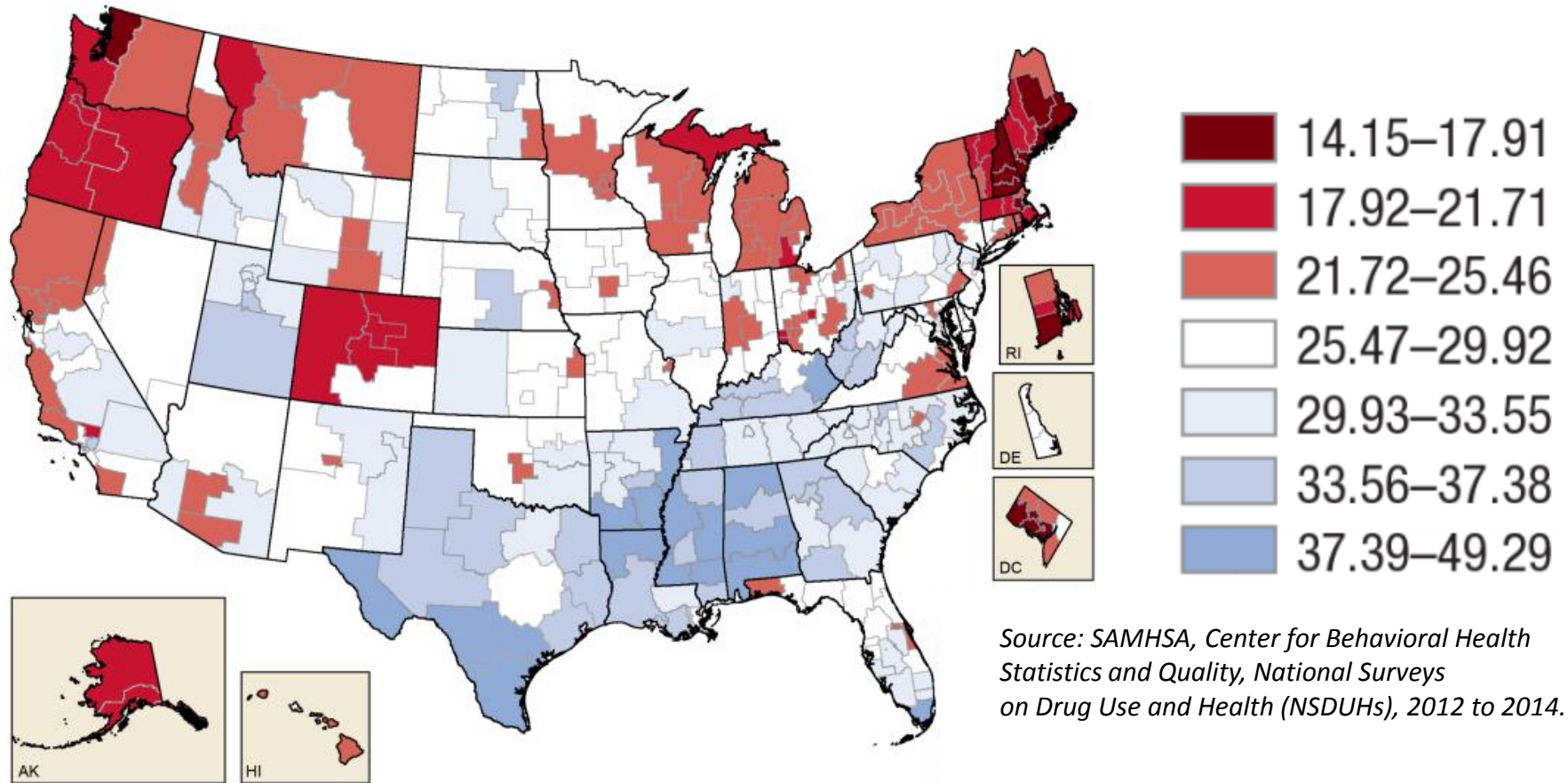


Source: NSDUH

\*Due to small sample sizes estimates for Aroostook and Downeast have been combined.

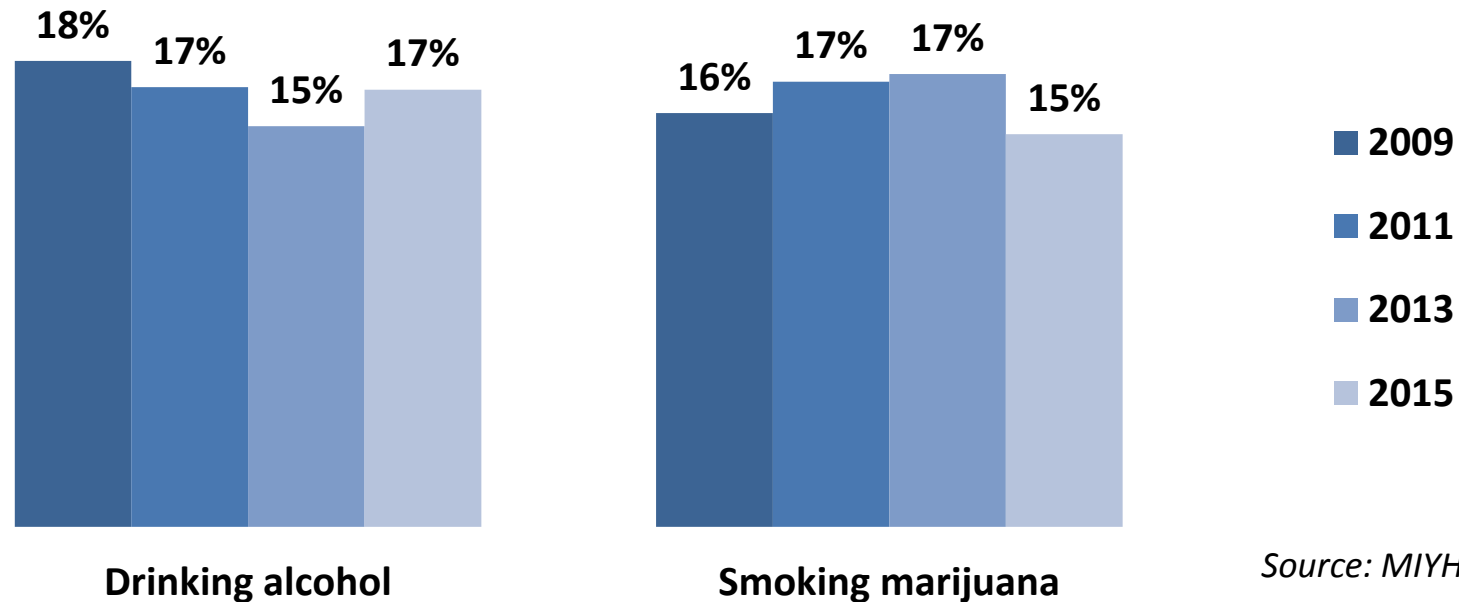


# Perceived great risk of harm from smoking marijuana once a month among people aged 12 or older, by substate region: 2012-14



Sub state regions in Maine had some of the lowest rates of perception of harm of marijuana in the nation.

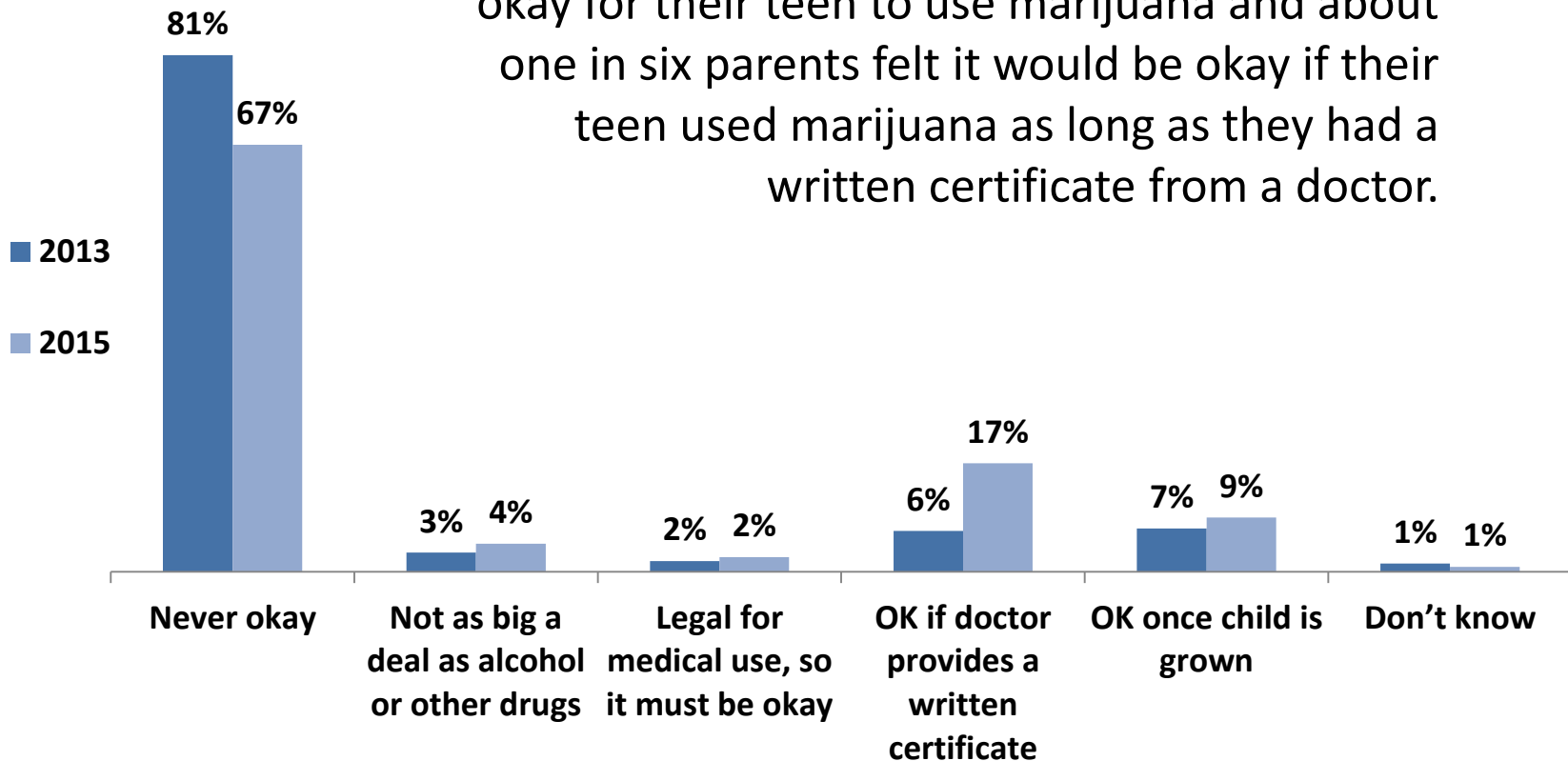
# High school students who reported they would be seen as "cool" for drinking alcohol or smoking marijuana: 2009–2015



In 2015, about one in seven high school students thought they would be seen as “cool” if they drank alcohol or smoked marijuana. Rates have remained relatively stable over the past several years.

# Parental attitudes regarding their teen using marijuana: 2013 and 2015

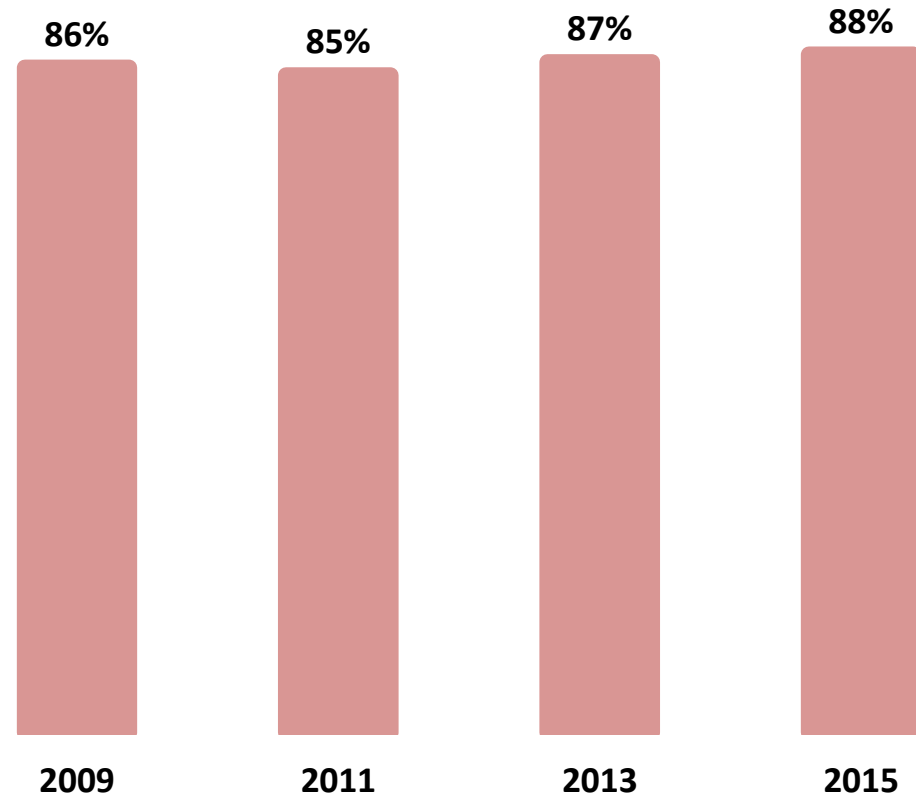
In 2015, two in three parents felt it was never okay for their teen to use marijuana and about one in six parents felt it would be okay if their teen used marijuana as long as they had a written certificate from a doctor.



Source: MIYHS

# High school students who reported their family has clear rules about alcohol and drug use: 2009–2015

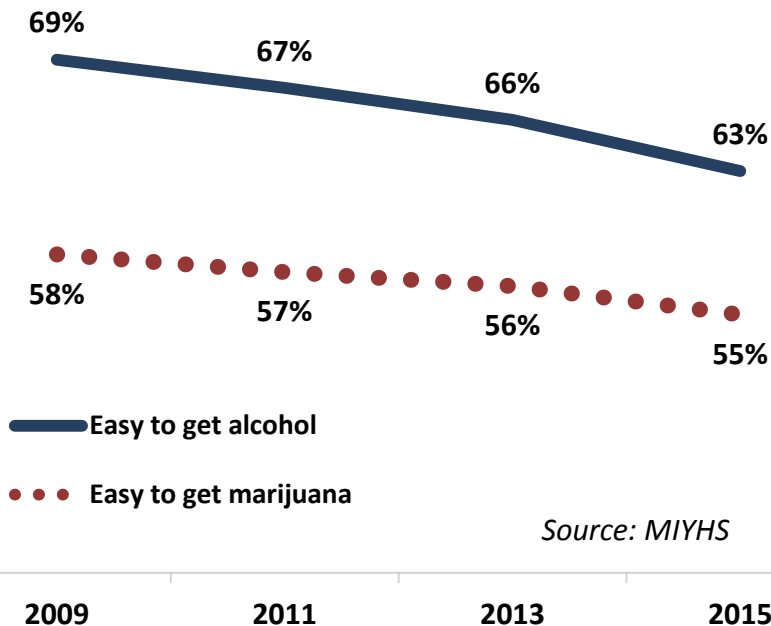
In 2015, almost nine in ten high school students in Maine report that their family has clear rules around alcohol and drug use. In contrast, this means that more than one in ten high school students did not think their family had clear rules about drugs and alcohol.



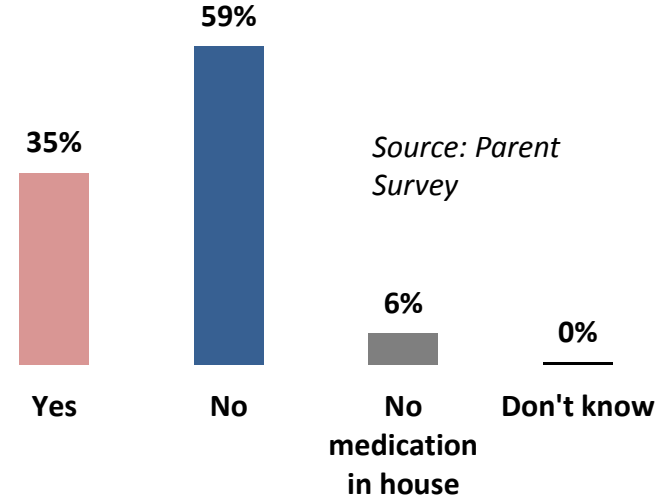
Source: MIYHS

# Perception of access

Perception of access among high school:  
alcohol and marijuana

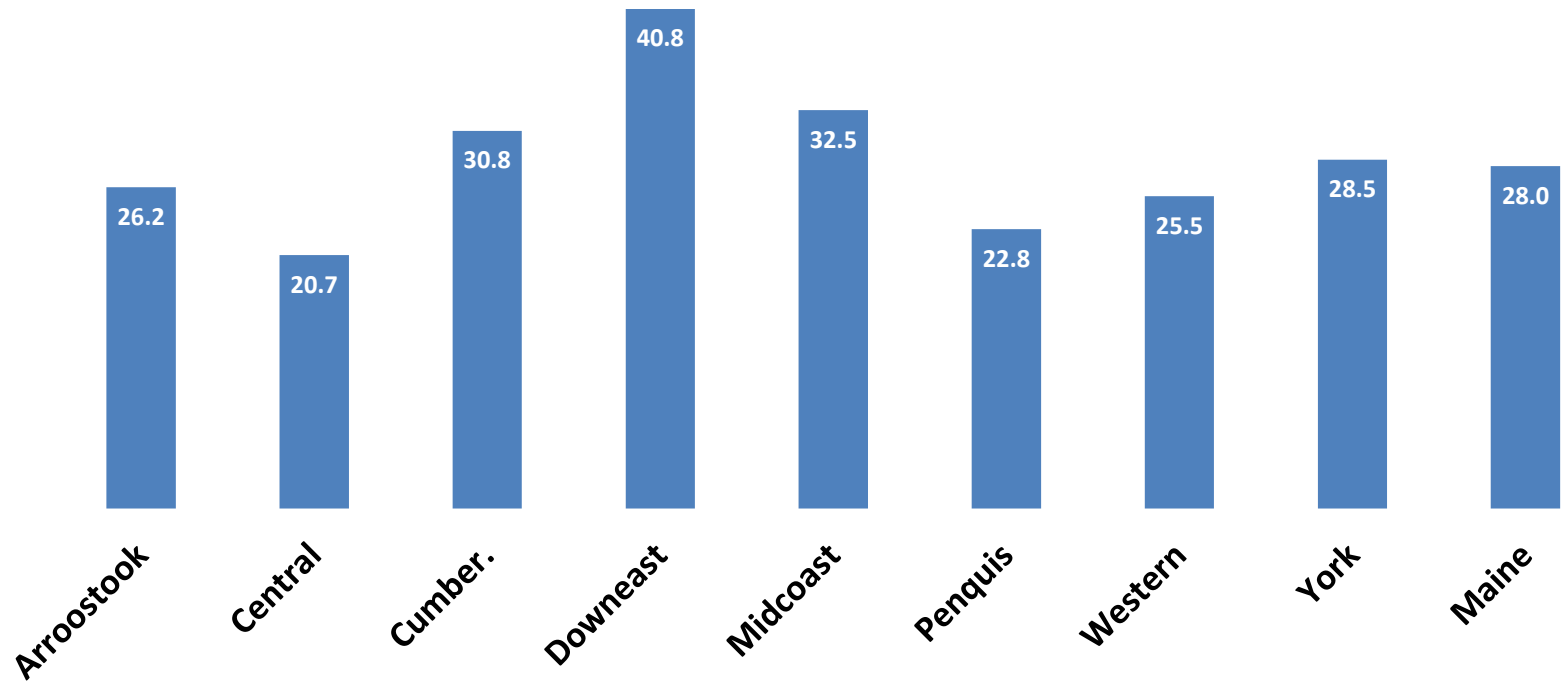


Parent perception of teen accessibility of  
prescription drugs at home without  
parental knowledge: 2015



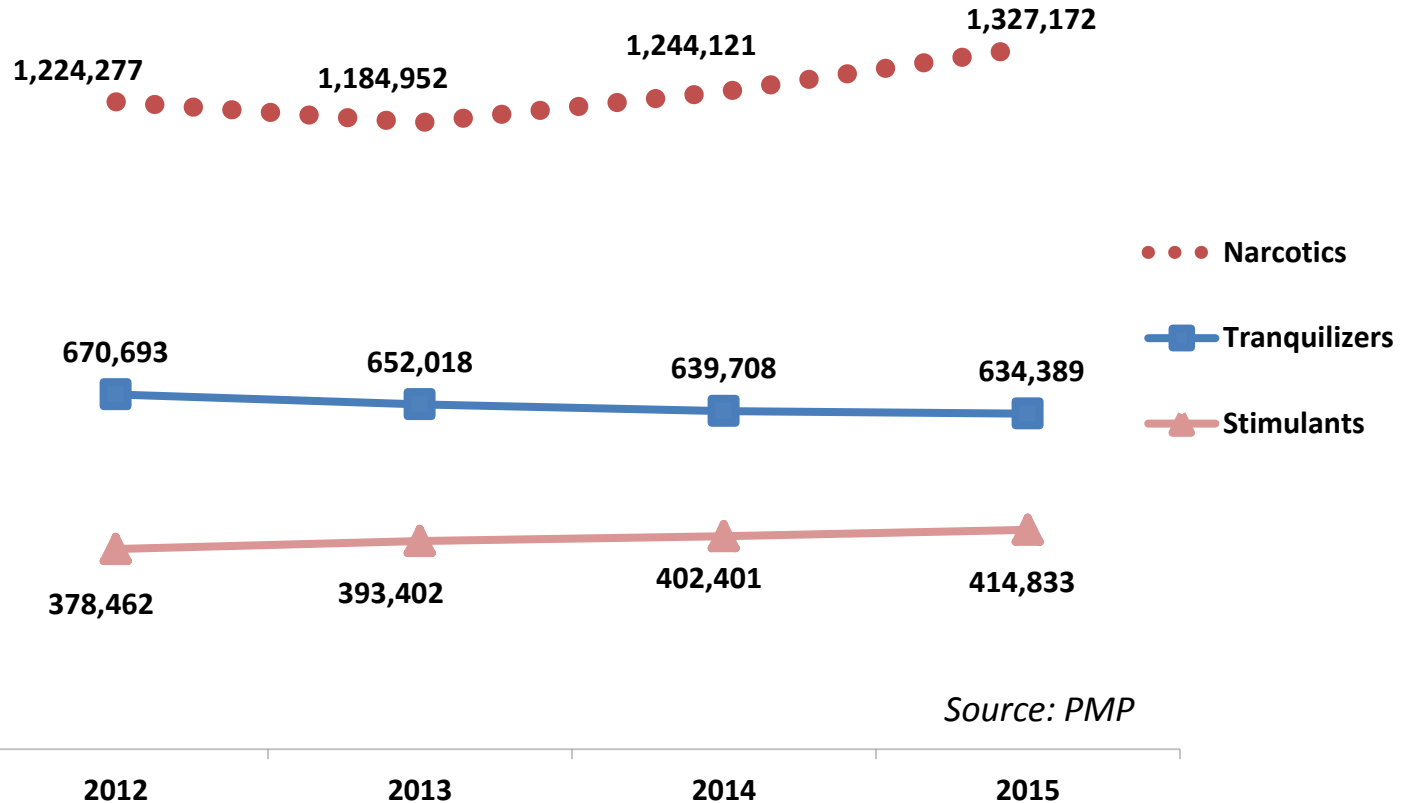
In 2015, over half of high school students believed that alcohol as well as marijuana was easy to obtain. Rates have steadily decreased over time. More than a third (35%) of parents felt that, at home, their teen could access medications without permission.

# Number of liquor licensees per 10,000 residents, by Public Health District: 2016



Source: DPS/U.S. Census

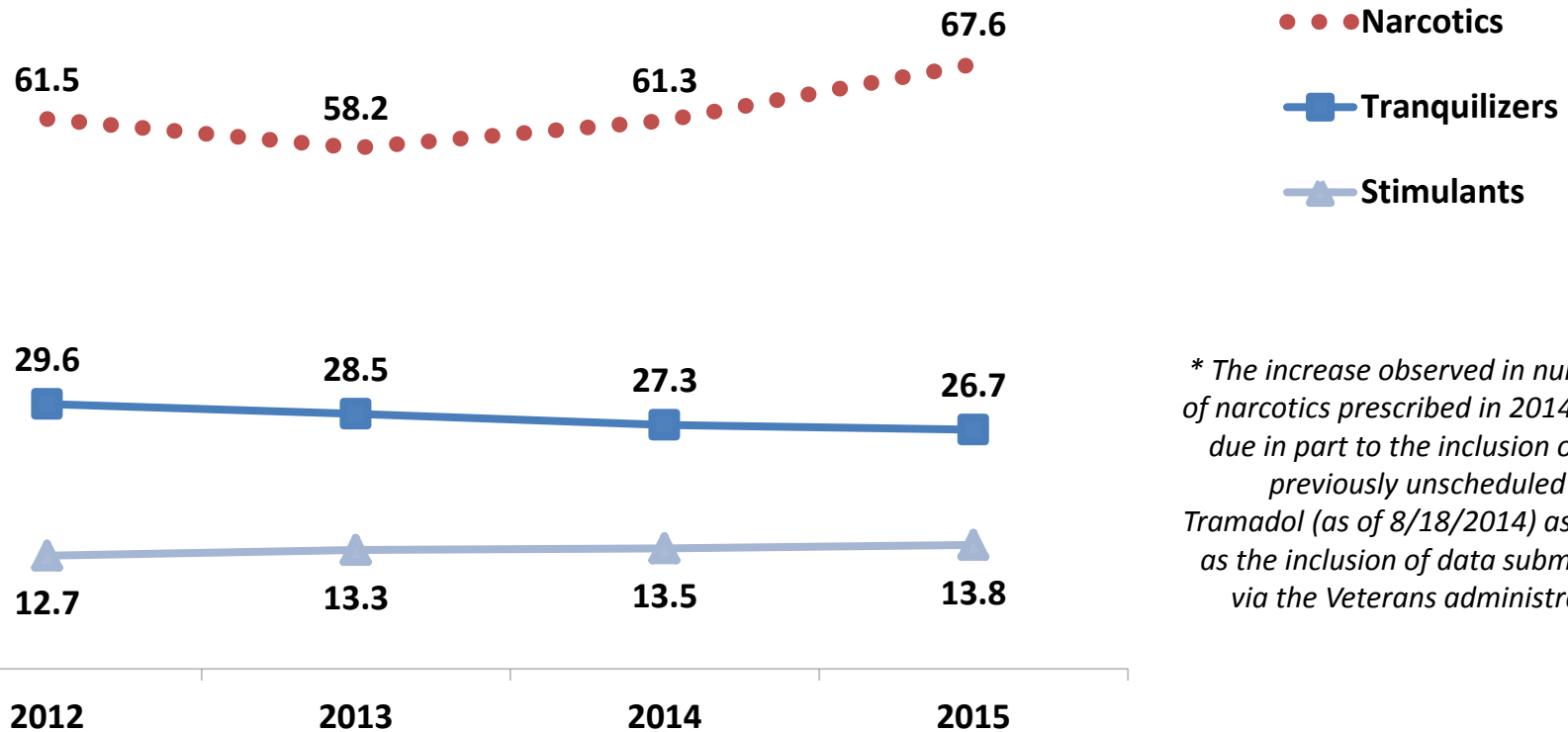
# Number of schedule II-IV prescriptions filled in Maine, by type: 2012-2015\*



\* The increase observed in 2014 in number of narcotics prescribed was due in part to the inclusion of the previously unscheduled drug Tramadol (as of 8/18/2014) as well as the inclusion of data submitted via the Veterans

From 2013 to 2015, the number of prescriptions for narcotics observed a 12 percent increase due in part to some changes in data collection.\*

# Dispensed quantity of schedule II-IV prescriptions per capita in Maine, by type: 2012–2015



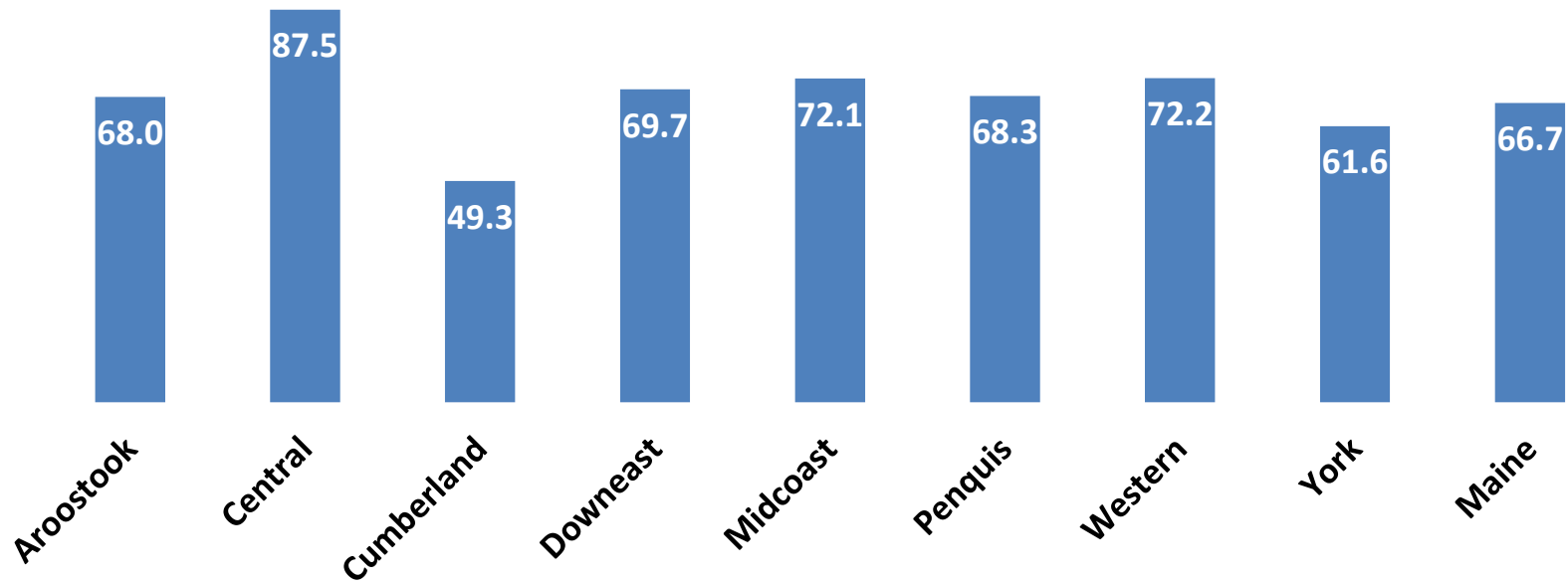
\* The increase observed in number of narcotics prescribed in 2014 was due in part to the inclusion of the previously unscheduled drug Tramadol (as of 8/18/2014) as well as the inclusion of data submitted via the Veterans administration

Source: PMP

The dispensed quantity per capita for narcotics increased from 58 units per person in 2013 to 74 units per person in 2015. Rates for prescriptions related to stimulants and tranquilizers have remained relatively stable.

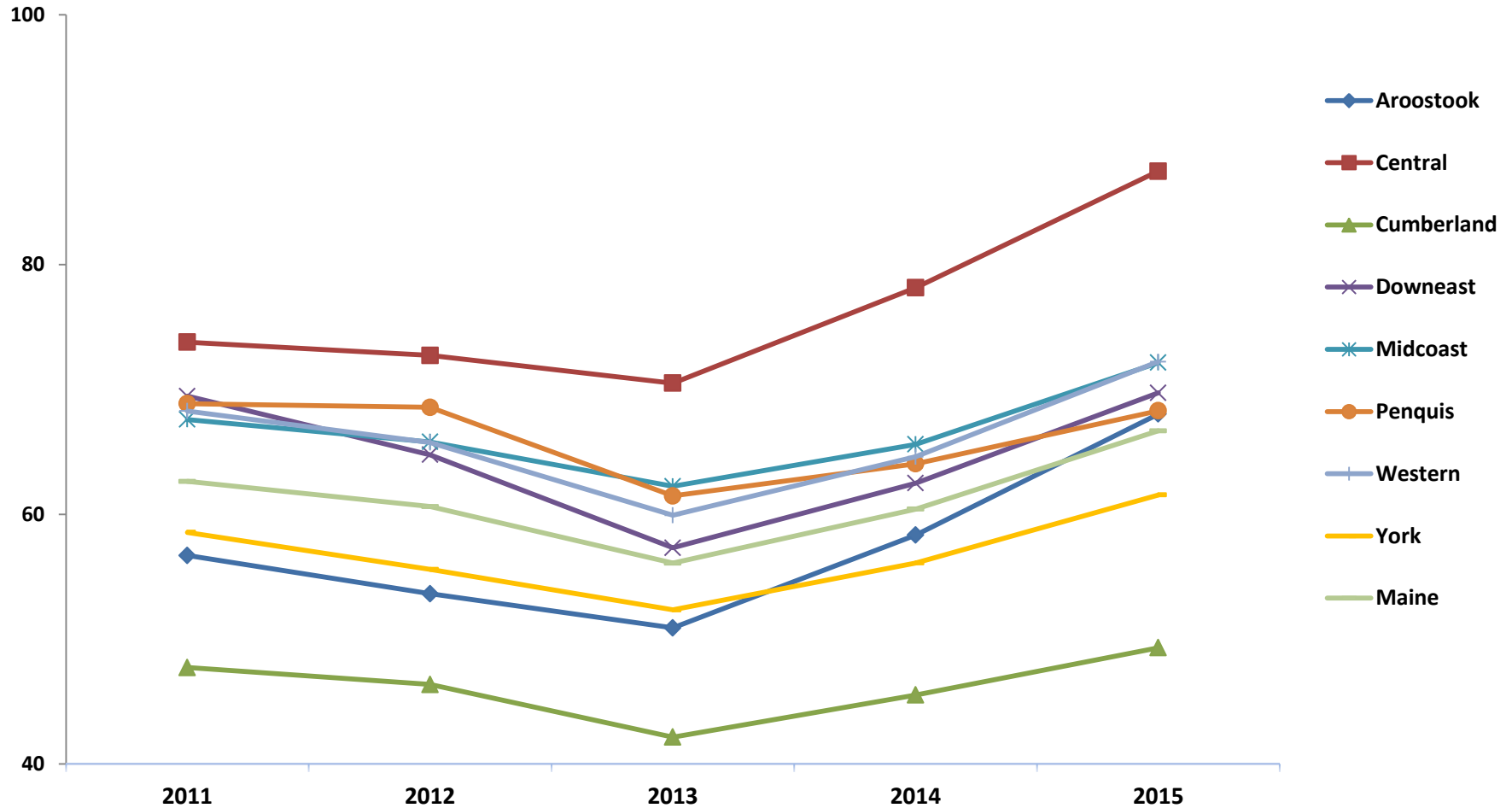


# Dispensed quantity of narcotics per capita, by Public Health District: 2015



Source: PMP

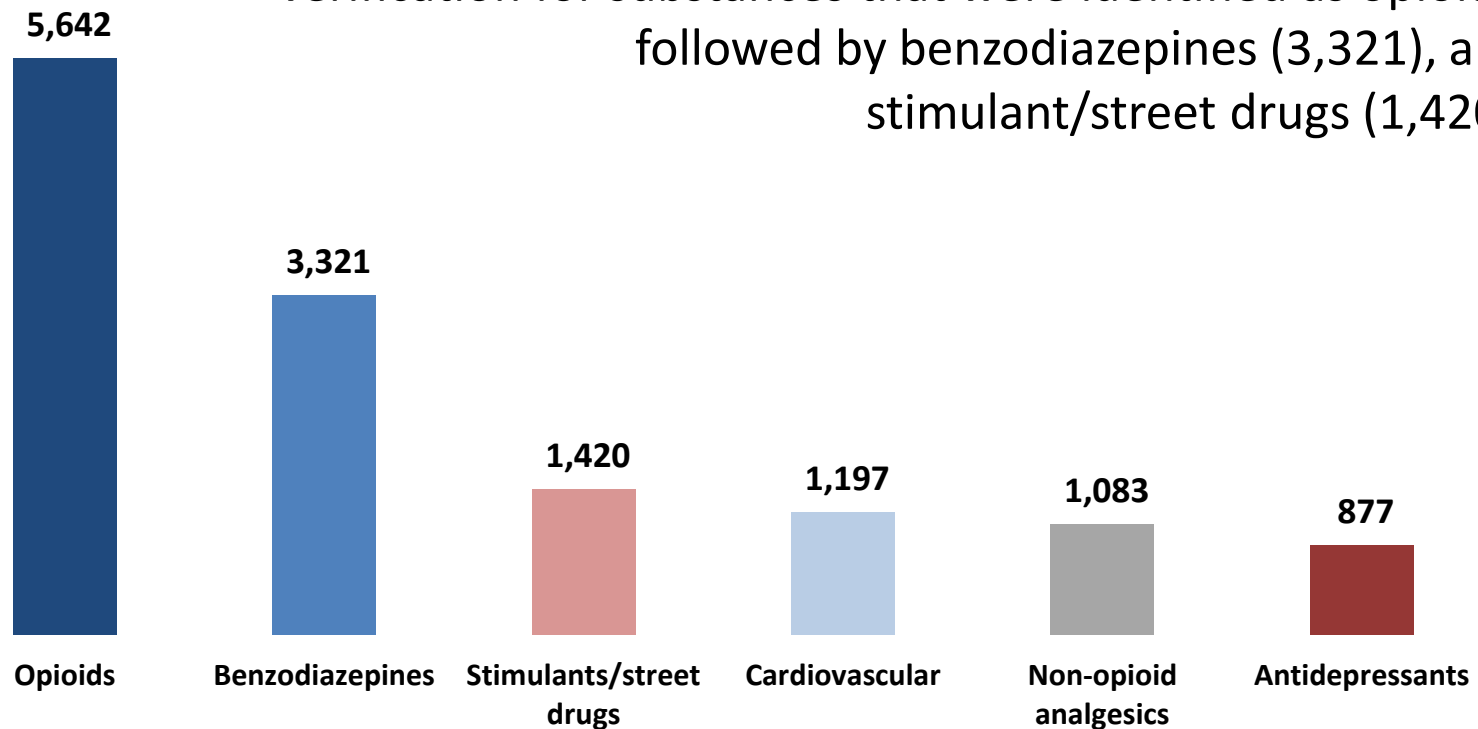
# Dispensed quantity of narcotics per capita, by Public Health District: 2011-2015



Source: PMP

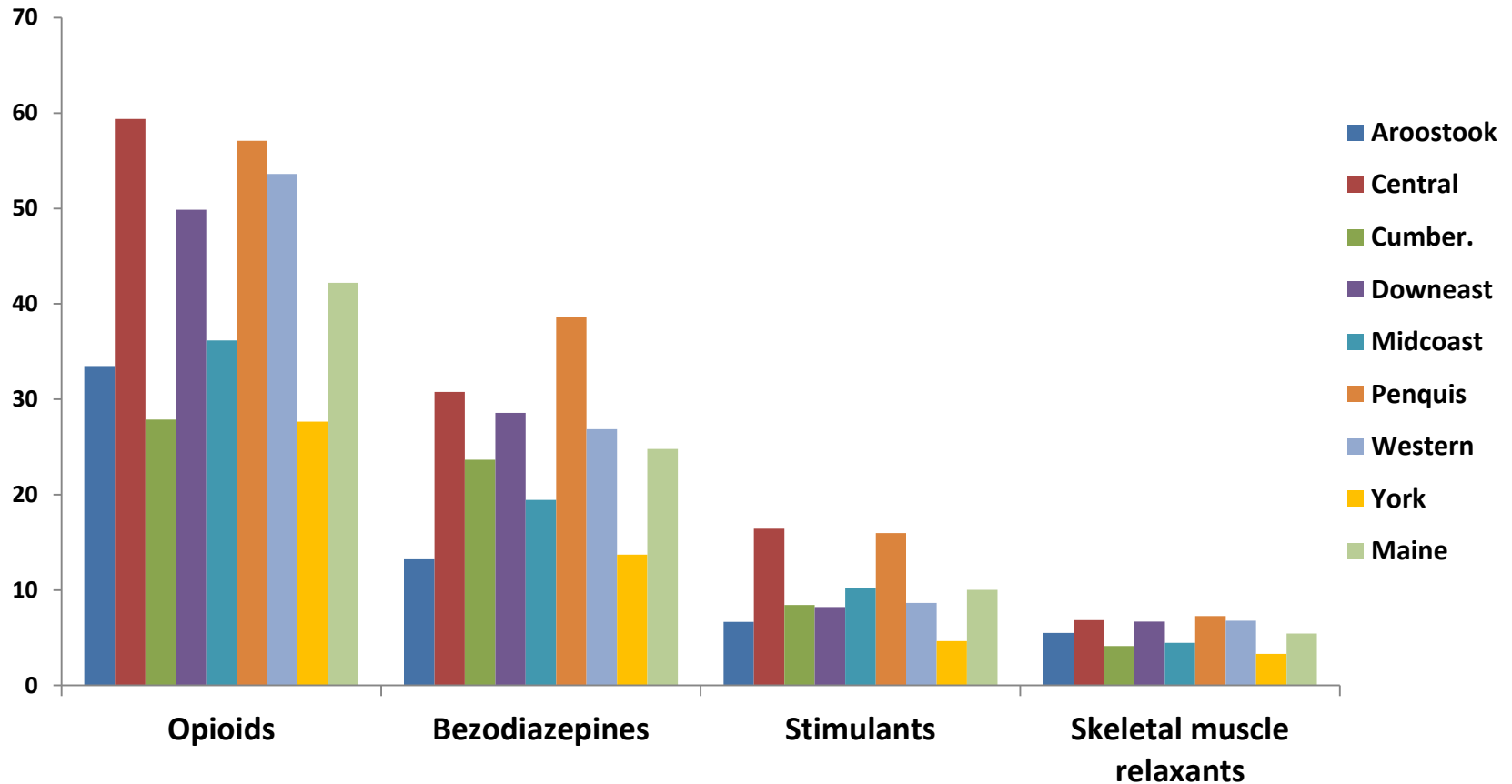
# Substances most frequently requested for medication verification by non-law enforcement, by type: 2013–15

During the three year period 2013-15, the Poison Center received an average of 5,642 calls per year requesting verification for substances that were identified as opioids, followed by benzodiazepines (3,321), and stimulant/street drugs (1,420).

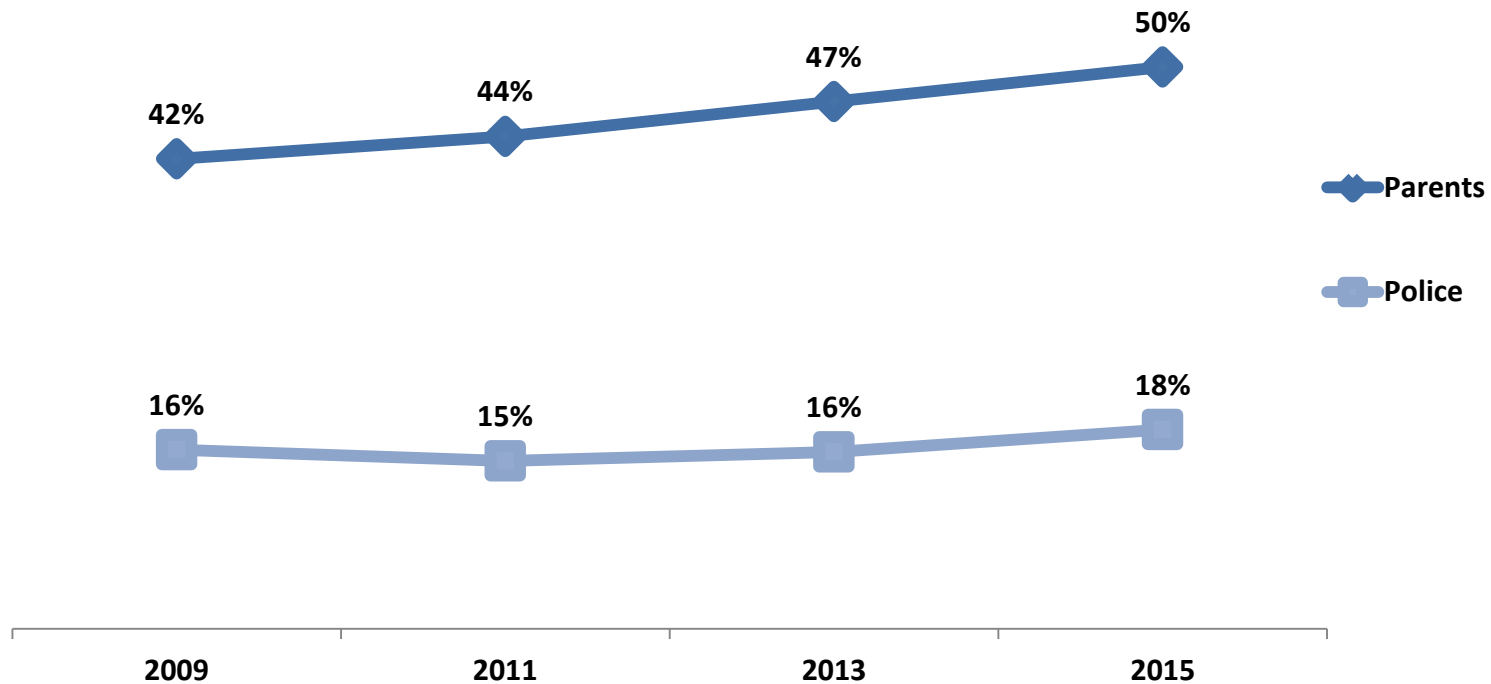


Source: NNEPC

# Number of calls for medication verification reported to New England Poison Center per 10,000 residents, by drug type and Public Health District: 2013-15

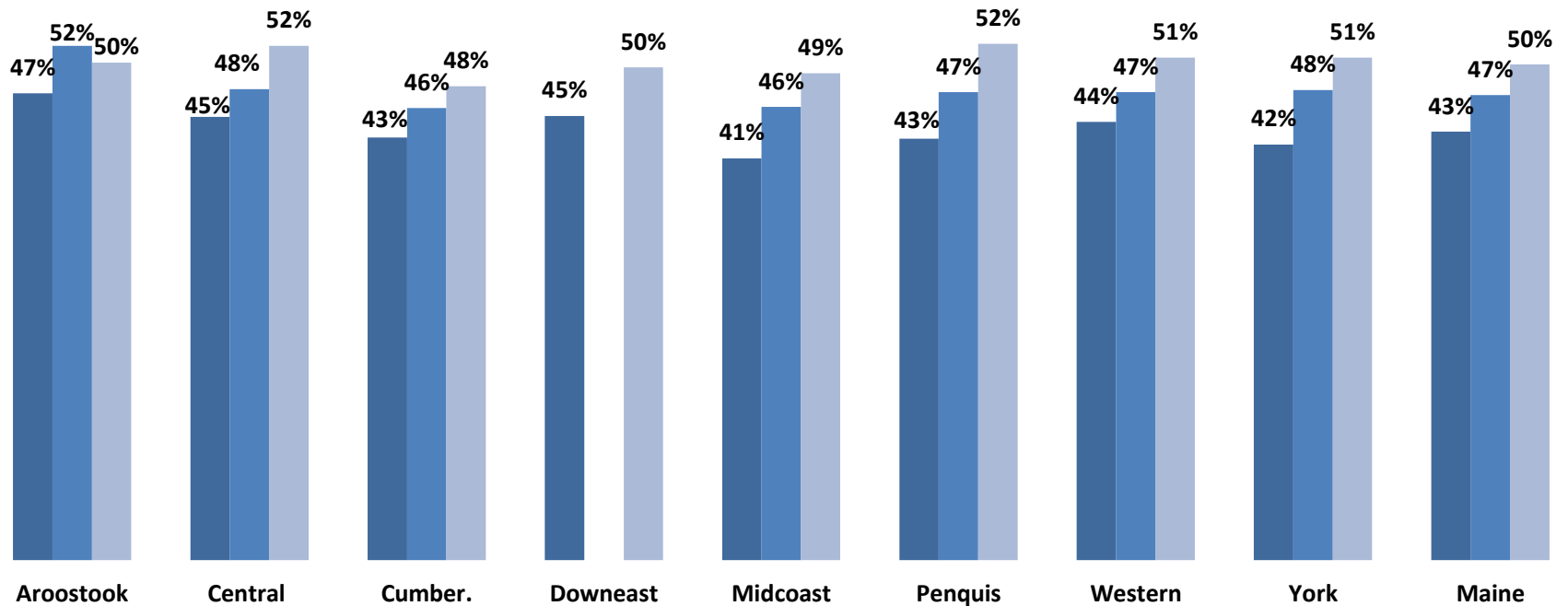


# High school students reporting they would be caught by parents or the police if they drank: 2009–2015



Source: MIYHS

# Perceived risk among high school students in Cumberland of being caught by parents for drinking alcohol: 2011-2015

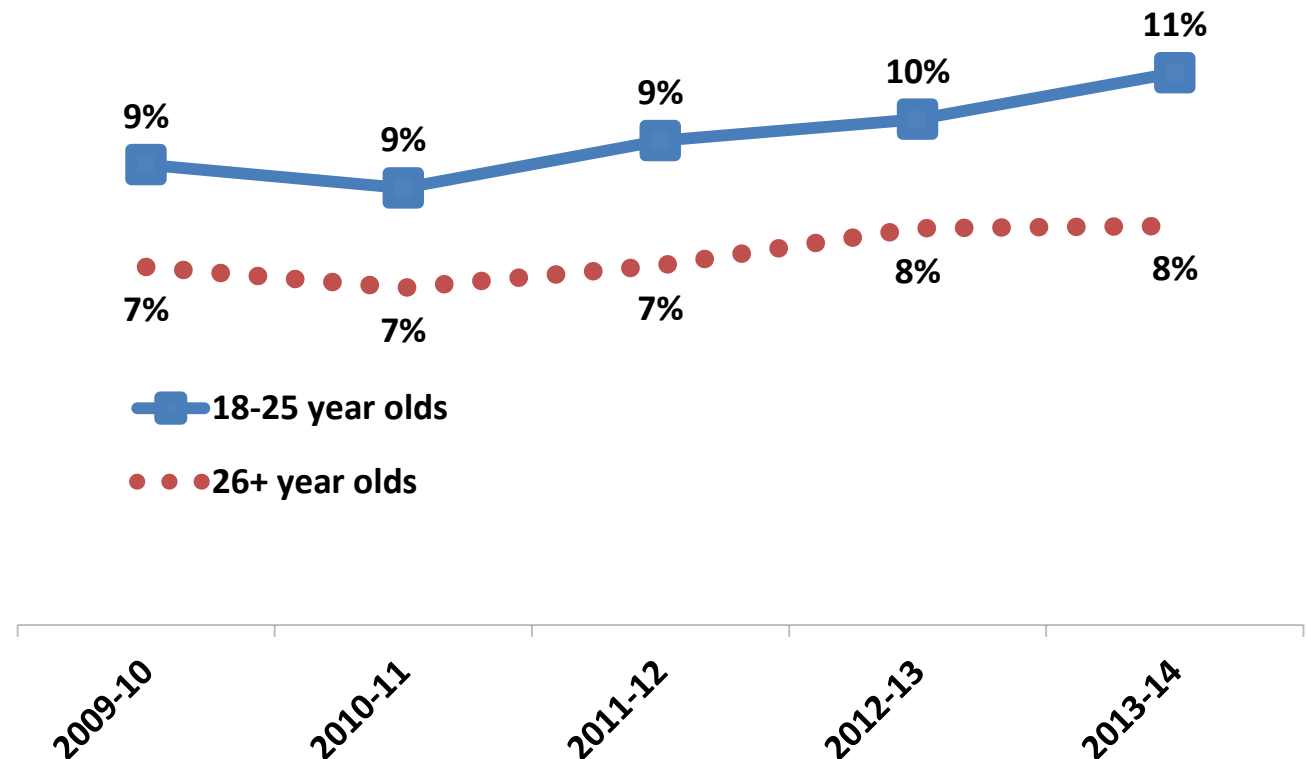


Source: MIYHS

# Mental Health

# Adults experiencing at least one major depressive episode in past year, by age group: 2009–10 through 2013–14

*NOTE: Major depressive episode (MDE) is defined as in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), which specifies a period of **at least 2 weeks when a person experienced a depressed mood or loss of interest or pleasure in daily activities and had a majority of specified depression symptoms.***

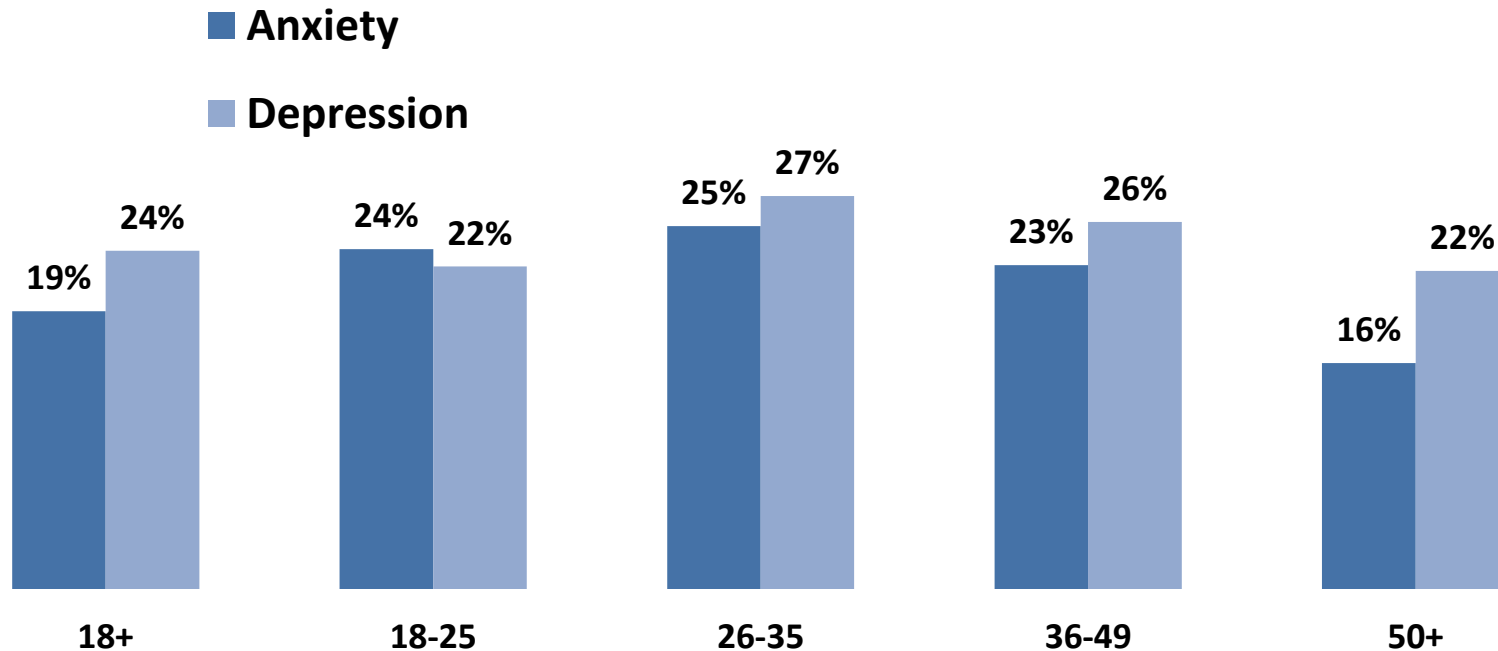


Source: NSDUH

In 2013-14, past year major depressive episodes were more prevalent among young adults ages 18 to 25 (11%) compared to adults 26 and older (8%).



# Adults who have been told they have a depression or anxiety disorder by age group: 2013–14

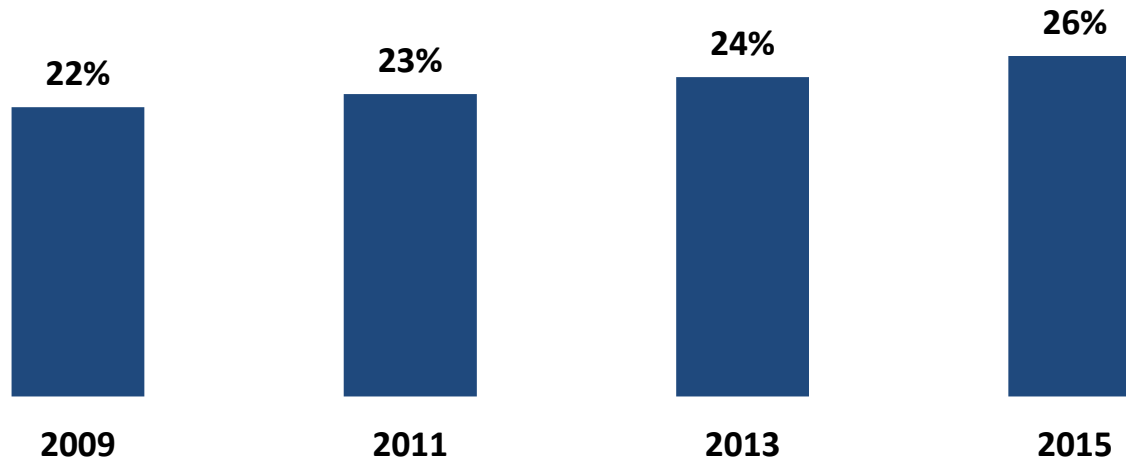


Source: BRFSS

In 2013-14, nearly one in four adults in Maine reported having ever been diagnosed with depression compared to one in five reporting to have been diagnosed with anxiety.

# High school students who reported feeling sad or hopeless in past year: 2009–2015

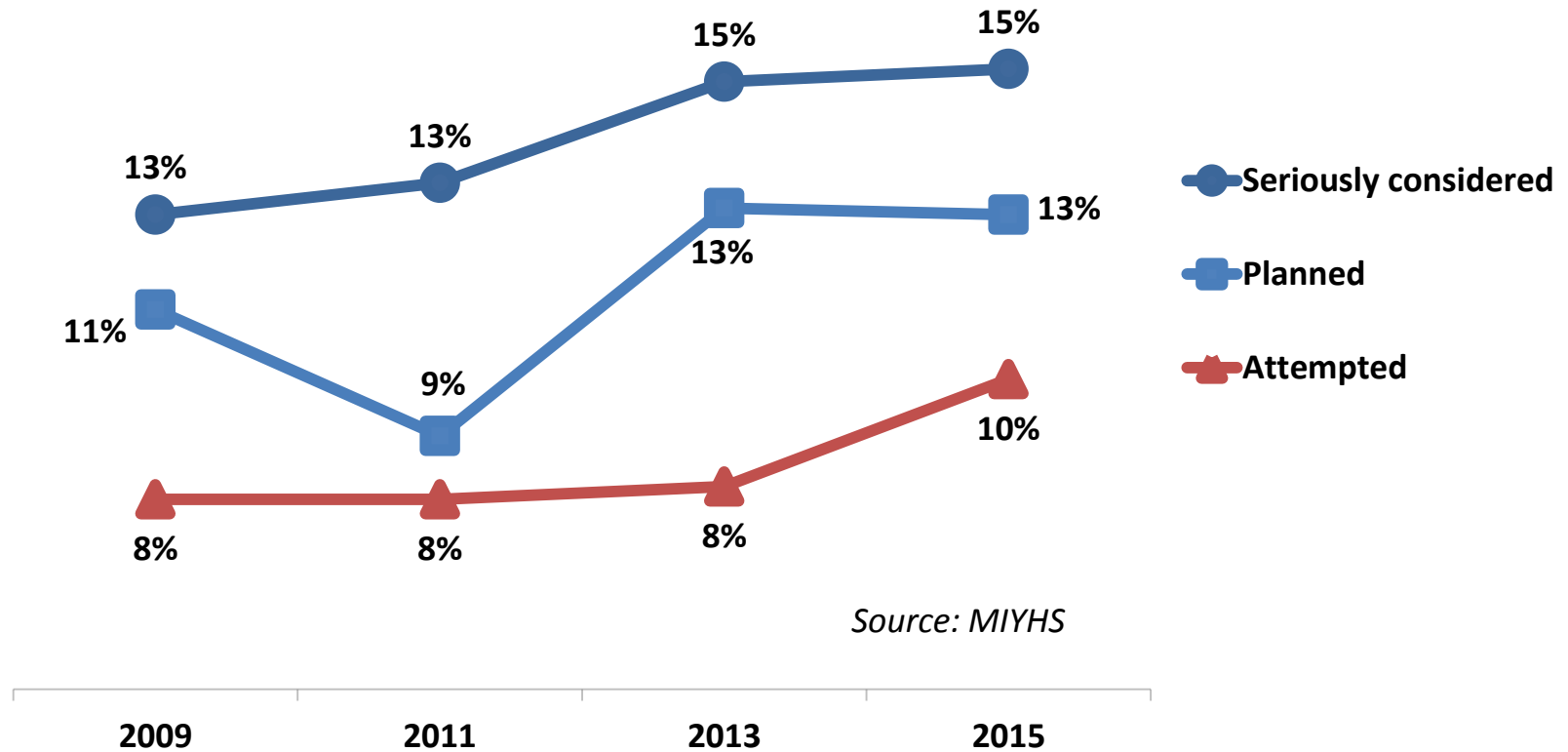
*Actual MIYHS question: In the past year, have you felt so sad or hopeless that you stopped doing your usual activities for at least two weeks?*



Source: MIYHS

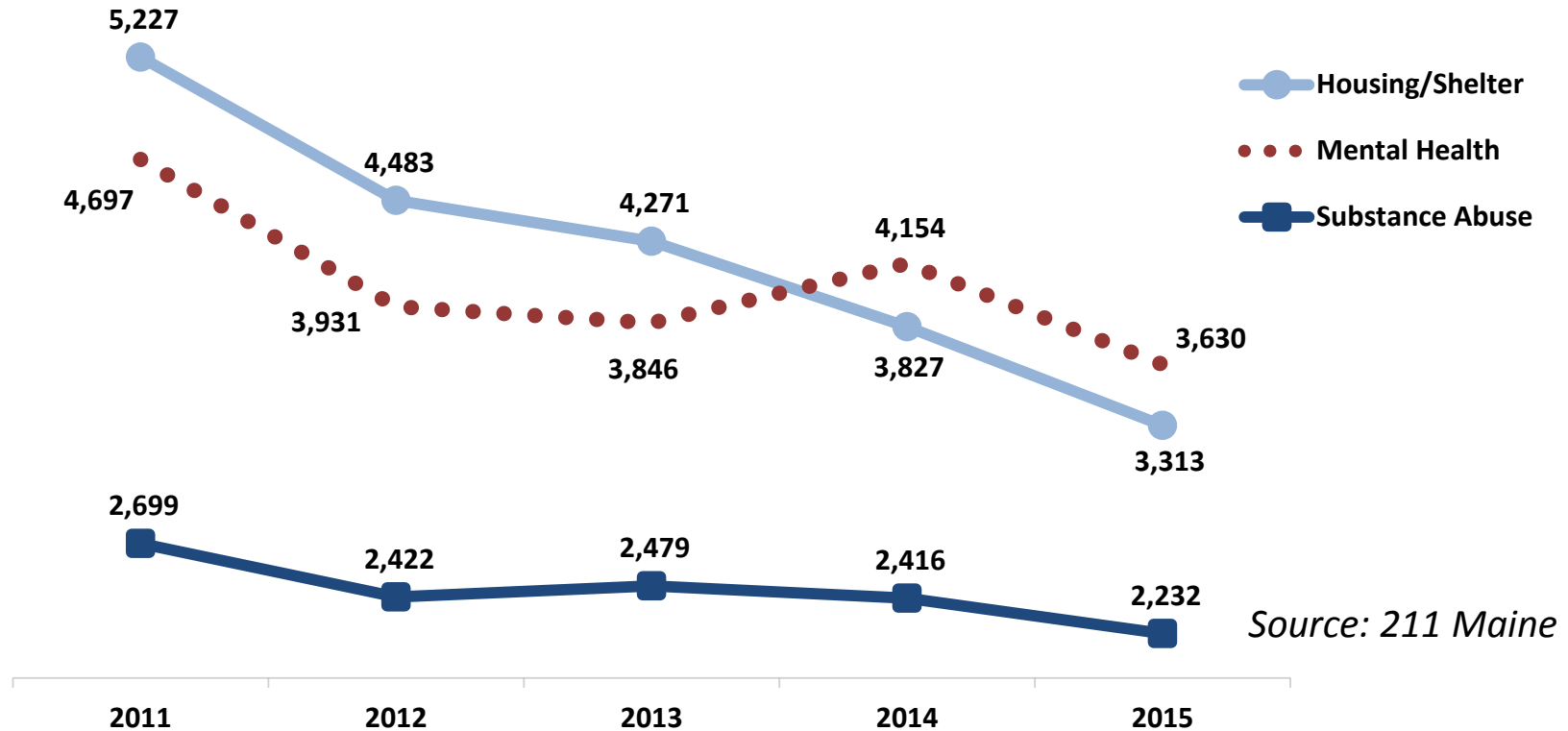
In 2015, more than one in four high school students reported feeling sad or helpless for at least two weeks in the past year. Rates have been steadily increasing for the past several years.

# High school students who considered, planned, or attempted suicide in past year: 2009–2013



In 2015, about one in seven high school students in Maine had either seriously considered suicide or made a plan for suicide. One in ten high school students reported they had actually attempted suicide in the past year.

# Number of 211 referral calls, by service type: 2011–2015



In 2015, Maine 2-1-1 referral calls related to mental health services and housing/shelter calls have decreased in recent years while calls related to substance use as well as gambling have remained relatively stable.

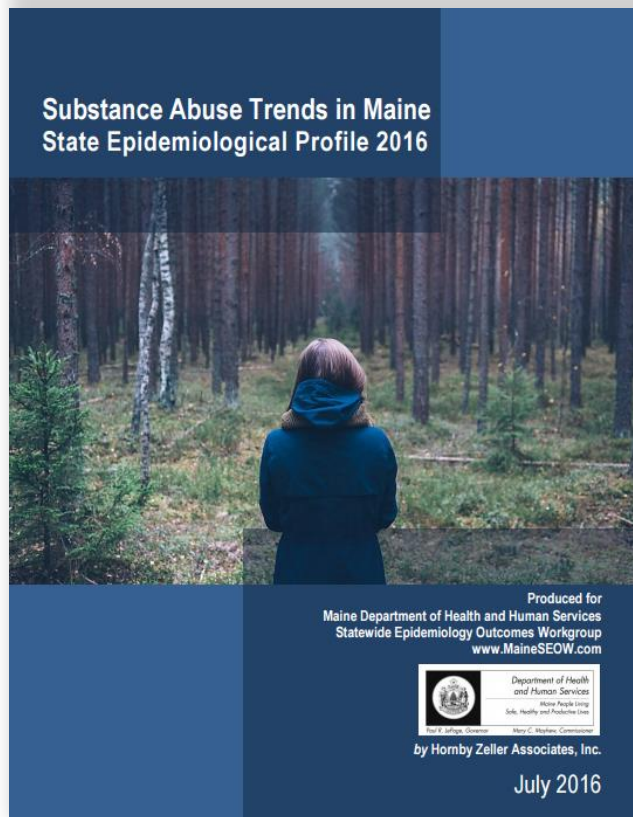
# Summary

- Most high school students perceive regular use of substances pose a risk of harm.
- Young adults (18 to 25) are least likely to perceive risks of harm from using alcohol and marijuana regularly.
- Perceptions of harm from marijuana use has been declining steadily among both youth and adults, reinforcing a more permissive attitude among parents and communities.
- More student feel they'll be caught for drinking by parents. Few Students think they will be caught by the police and most think it is easy to obtain alcohol and marijuana.
- There is still concern over availability and ease of access to prescription drugs.
- The potential for diversion of prescription drugs remains a problem.
- Over a third of parents felt it would be possible for their teen to access prescription drugs at home without their knowledge.
- The relationship between substance use and mental health is well documented. It is important to understand how substance use and mental health interact with one another so that prevention and intervention efforts can better address the needs of both.

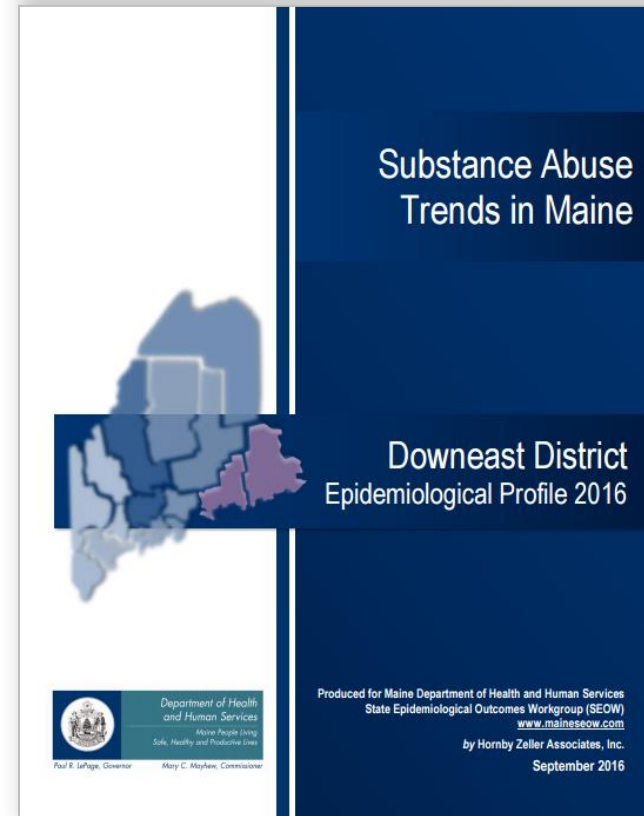
# Additional Resources

## 2016 State and Community Profiles

### State Profile



### Community Profiles



Factsheets and reports can be found [www.maineosew.com](http://www.maineosew.com) within "additional resources"

# Additional Resources: 2016 Factsheets

## Contributing Factors

## Consequences

### SUBSTANCE ABUSE IN MAINE – CONTRIBUTING FACTORS

SEPTEMBER 2016

#### BY THE NUMBERS

Four out of five high school students think binge drinking alcohol once or twice a week is harmful.<sup>1</sup> Only 1 in 4 adults 18-25 feel the same way.<sup>2</sup>

In 2015 only 2 of 5 high school students felt smoking marijuana once or twice a week was harmful.<sup>3</sup> Perception of harm related to marijuana use by both youth and adults has decreased steadily in recent years.<sup>3,2</sup>

1 in 7 Maine high school students thought they'd be seen as "cool" if they drank alcohol or smoked marijuana. Almost 9 in 10 report that their family has clear rules around drug and alcohol use.<sup>1</sup>

Two out of three parents thought it was never okay for their teen to use marijuana. One in six felt it would be okay with medical supervision.<sup>3</sup>

More than half of high school students believed that alcohol and marijuana were easy to obtain.<sup>4</sup> More than a third of parents felt their teen could access prescription medications at home without permission.<sup>5</sup>

The potential for diversion of prescription drugs remains a problem. In 2015 there were 67 narcotic units (e.g., pills) dispensed per person.<sup>6</sup> In 2013-15, the vast majority of calls to the Poison Center involved opioids (5,642/year), benzodiazepines (3,321/year), and stimulants or street drugs (1,420/year).<sup>5</sup>

#### SPOTLIGHT ON: MENTAL HEALTH AND COMORBIDITY

*The relationship between substance use and mental health is well documented. It is important to understand how substance use and mental health interact with one another so that prevention and intervention efforts can better address the needs of both.*

Mental illness is prevalent among Mainers who needed treatment for substance use, with over half of all substance abuse treatment admissions in 2015 involving a mental health disorder and nearly one-quarter receiving outpatient mental health services in the past year.<sup>6</sup>


In 2015, students who felt hopeless or sad for at least two weeks within the past 12 months were twice as likely to have used marijuana or to have engaged in binge drinking and three times as likely to have misused prescription drugs during the past 30 days.<sup>1</sup>


Perceptions of harm, accessibility, cultural norms, and mental health are associated with substance use.

In 2015, more than 1 in 4 high school students reported feeling sad or helpless for at least two weeks in the past year.<sup>1</sup>

Rates have been steadily increasing for the past several years.

**MIYHS Question:** "In the past year, have you felt so sad or hopeless that you stopped doing your usual activities for at least two weeks?"





22%	23%	24%	26%
2009	2011	2013	2015

This fact sheet is a product of the Maine State Epidemiological Outcomes Workgroup (SEOW).  
For more info, visit [www.maineosew.com](http://www.maineosew.com)

<sup>1</sup> Maine Integrated Youth Health Survey


<sup>2</sup> National Survey on Drug Use and Health

<sup>3</sup> SAMHS Parent Survey

<sup>4</sup> Prescription Monitoring Program

<sup>5</sup> Northern New England Poison Center

<sup>6</sup> Web Infrastructure Treatment System



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### SUBSTANCE ABUSE IN MAINE – CONSEQUENCES

SEPTEMBER 2016

#### BY THE NUMBERS

MDA drug trafficking investigations due to heroin have more than doubled from 2013 to 2015. Trafficking investigations due to cocaine observed a 98% increase from 2014 to 2015.<sup>1</sup>

MDA drug manufacturing investigations related to methamphetamine more than tripled from 2013 to 2015.<sup>1</sup>

In 2015, there were a total of 272 overdose deaths due to drug use in Maine, representing a 55 percent increase since 2013. The majority of overdose deaths were related to illicit drugs. Almost 2 in 5 of these deaths involved heroin/morphine, and nearly a third involved non-pharmaceutical fentanyl.<sup>1</sup>

From 2013 to 2015, the number of naloxone administrations given by EMS responders more than doubled. Rates are highest among males 25 to 34 years old.<sup>2</sup>

Drug/medication overdoses EMS responses are most common among those between the ages of 26 and 35, as well as among those 18 to 25.<sup>2</sup>


In 2015 nearly 1 in 3 fatal motor vehicle crashes involved alcohol/drugs. Maimers aged 18-35 years old have the highest rates of alcohol/drug-related crashes and crash fatalities.<sup>3</sup>


#### SPOTLIGHT ON: OPIOIDS

*The shift to more potent and volatile drugs has had a severe impact on the health and safety of Maine.*

In 2015 there were 1,263 notifications to Child Protective Services regarding infants born exposed to substances, representing 8% of live births in Maine. Compared to only 5% of such births in 2011, this represents a 58% increase.<sup>4</sup>

In 2015, primary treatment admission rates related to heroin/morphine have steadily increased since 2011, and have surpassed synthetic opiates as the second most common substance.<sup>5</sup>





155	163	176	208	272
2010	2011	2012	2013	2015

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<sup>1</sup> Maine Drug Enforcement Agency

<sup>2</sup> Dr. Greg O'Neil, Chief Medical Examiner

<sup>3</sup> Bureau of Highway Safety

<sup>4</sup> Bureau of Child and Family Services

<sup>5</sup> Web Infrastructure Treatment System



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### SUBSTANCE USE IN MAINE – CONSUMPTION

SEPTEMBER 2016

#### BY THE NUMBERS

About 1 in 3 18-25 year olds report binge drinking alcohol in the past month. Maimers 26-35 reported a similar rate of binge drinking.

About 1 in 5 Maine high school students drank alcohol in the past month while 1 in 10 binge drank in the past month. Rates have been declining since 2009.<sup>1</sup>

Tobacco use among high school students has decreased steadily since 2009. In 2015, about 1 in 10 students reported smoking cigarettes or cigars in the past 30 days.<sup>2</sup> Tobacco use remains high among adults aged 26-35, with almost 1 in 3 being current smokers.<sup>3</sup>

Prescription drug misuse has steadily decreased among high school students since 2009. In 2015, just over 1 of 10 high school students reported misusing a prescription drug in their lifetime.<sup>4</sup> Maimers between the ages of 18 and 34 continue to have the highest rates of prescription drug and pain reliever misuse.<sup>5</sup>

The most commonly used illicit drug in Maine is Marijuana. The state has one of the highest rates of marijuana use by young adults (18-25) in the nation.<sup>6</sup> Adult use has increased over the past few years, while high school use is stable. In 2015, 1 in 5 high school students used marijuana in the past month.<sup>7</sup>

In general, 18-25 year olds have the highest rates of substance abuse and are the most likely age group to engage in risky behaviors.


#### SPOTLIGHT ON: VAPING


*Electronic vapor products refer to devices used to vaporize nicotine, propylene glycol, flavoring, commonly tobacco, cannabidiol, or herbs for the purpose of inhalation.*

One in three Maine high school students ever used an electronic vapor product, while one in five used one in the past month.<sup>8</sup>

Electronic vapor products are currently unregulated by the U.S. Food and Drug Administration (FDA). In Maine, electronic vapor products are limited to people 18 and older. While youth use of these products has declined substantially from 2013-2014, Maine has not tracked this type of consumption until recently, so tracking data are not yet available.

Maine is making progress, with youth showing steady declines in substance use.





14%	13%	10%	7%	7%	7%	7%	7%
2009	2011	2013	2015	2009	2011	2013	2015

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<sup>1</sup> National Youth Tobacco Survey (NYTS)


<sup>2</sup> Maine Integrated Youth Health Survey (MIYHS)

<sup>3</sup> National Survey on Drug Use and Health (NSDUH)

<sup>4</sup> National Survey on Drug Use and Health (NSDUH)

<sup>5</sup> National Survey on Drug Use and Health (NSDUH)

<sup>6</sup> U.S. Centers for Disease Control and Prevention



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# Additional Resources: Data Dashboard

The screenshot shows the top navigation bar of the Maine SEOW Dashboard with links for Indicators, Data Sources, Additional Resources, How To, About, and Contact. The main banner features the text 'SEOW Dashboard User Guide' and a 'Start Here' button with a hand cursor icon. Below the banner are three sections: Indicators (with a bar chart icon), Data Sources (with a globe icon), and Additional Resources (with a lightbulb icon). Each section includes a brief description and a 'View' button.

Maine SEOW Dashboard   Indicators   Data Sources   Additional Resources   How To ▾   About   Contact

## SEOW Dashboard

### *User Guide*

Start Here

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### Indicators

Sorted into a real-time search, find indicators by Source, Type, Substance, and Population.

[View indicators »](#)

### Data Sources

Read through our sources to find in depth information about where our data comes from.

[View data sources »](#)

### Additional Resources

Navigate through our collection of reports, infographs, and more.

[View additional resources »](#)



# Contact

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