National Institute on Drug Abuse

National Household Survey on Drug Abuse:

Main Findings 1985

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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I. INTRODUCTION AND DESCRIPTION OF STUDY

Presented in this report are the Main Findings of the 1985 National Household Survey on Drug Abuse. This is the eighth in a series of studies whose primary purpose is to measure the prevalence and correlates of drug use in the United States. The first two studies were conducted in 1971 and 1972 under the sponsorship of the National Commission on Marihuana and Drug Abuse. Since 1974, the National Household Survey has been sponsored by the National Institute on Drug Abuse (NIDA). The 1985 Survey was funded by NIDA with additional support provided by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). This study was conducted by researchers from the Institute for Survey Research at Temple University and the Department of Sociology at the University of Kentucky.

OVERVIEW OF PRESENT AND PREVIOUS SURVEY CONTENT

The following drugs or categories of drugs are examined in the National Household Survey: marijuana, cocaine, inhalants, hallucinogens, PCP, heroin, nonmedical use of four classes of psychotherapeutic drugs (stimulants, sedatives, tranquilizers, and analgesics), cigarettes and smokeless tobacco, and alcohol. The principal correlates of drug use presented in this report are age, sex, race/ethnicity, density of population, region of residence, educational attainment among those 18 years old and older, and current employment.

Although the relative amount of attention given to a particular drug or drug class has varied, there has been sufficient continuity in the series to chart trends in drug use over the past decade and a half. A hallmark of the National Household Survey series has been stability regarding core questions about drug use. In each survey, patterns have been assessed in terms of use of each drug or class of drugs in the past month, in the past year, and in the respondent's lifetime. At the same time, the design has been sufficiently flexible to permit examination of special procedures and topics. There was an oversampling of respondents from rural areas in 1979. In 1982, considerable attention was devoted to medical as well as nonmedical use of stimulants, sedatives, tranquilizers, and analgesics. In the 1979 and 1982 surveys, the nominative technique was used to elicit supplementary information about the prevalence of heroin.

Major changes in the 1985 survey include an oversampling of blacks and Hispanics to increase the reliability of the estimates of patterns of drug use in these important groups. There are also significant changes in the way results are reported, both in the categorization of variables and in the presentation of results. First, in previous studies race/ethnicity has generally been dichotomized into categories of white and non-white with Hispanics not classified consistently in either category. In this report three mutually exclusive categories--white non-Hispanic, black non-Hispanic, and Hispanic--are utilized as well as an "other" group when totals are presented. Included in the other category are American Indians, Alaskan natives, Pacific Islanders,

and Asians. Second, in the previous reports age has generally been presented for three groups: 12-17 year-olds, 18-25 year-olds, and persons age 26 and older. This classification is used in the current report only in the presentation of trend data. Otherwise, persons 26 and over are divided into two groups: 26-34 year-olds and persons 35 years old and older. Statistical tests of significance have been computed for each difference reported in the text. All differences reported in the text are significant at the level indicated, unless it is noted that a difference, while of interest, is not significant. In the 1985 survey, additional questions about cigarettes and other tobacco products, such as smokeless tobacco, were included, as were questions about the ways cocaine was used. Also, for the first time since 1977, considerable attention has been devoted to the potential consequences of use of various drugs.

STRENGTHS AND LIMITATIONS OF THE HOUSEHOLD SURVEY

The data provided by the National Household Survey are actual estimates of drug use in the continental United States. The survey is an appropriate technique for estimating prevalence rates of different forms of drug use, only some of which ordinarily come to the attention of administrative, medical, or correctional authorities. Further, when relatively accurate estimates are required for virtually the entire population of the United States, there would seem to be no substitute for in-person interviews with a large national probability sample. The National Household Survey is currently the only study fitting this description.

While the National Household Survey is useful for many purposes, it also has certain limitations. First, the value of self-report data obviously depends upon the truthfulness and memory of the individuals in the sample. While some experimental studies have established the validity of self-report data in similar contexts, and while National Household Survey procedures were designed to encourage honesty and recall, some under and over-reporting may have taken place. The survey is cross-sectional; that is, individuals were interviewed only once and were not followed through time for additional interviews.

The target population is defined as the household population of the continental United States. Thus, a small proportion (less than 2%) of the U.S. population was not included in the study: those in group quarters (military installations, correctional institutions, college dormitories, and hospitals) and those who had no permanent residence (the homeless and residents of single rooms in hotels). To the extent that some of these groups (prisoners or transients, for example) exhibit high prevalence rates, the results of the National Household Survey may be somewhat conservative estimates of drug use in the total population. This may be particularly true for prevalence estimates of rarely used drugs such as heroin.

SAMPLING

For the 1985 National Household Survey on Drug Abuse, the household population of the continental United States, age 12 and over, was sampled using a multistage area probability design with 100 Primary Sampling Units. Because the research design specified an oversampling of blacks and Hispanics, six additional Primary Sampling Units with sizable black populations and six with sizable Hispanic populations were selected. From these 112 Primary Sampling Units, 1,600 secondary sampling units were chosen. Then, housing units were selected in small clusters to produce on average 16 occupied, nonbusiness households in each secondary sampling unit. This produced a total of 25,968 households in which screenings were attempted. Differential sampling rates were used at the household level to select white, black, and Hispanic households in an approximate 2:1:1 ratio. Within households, differential sampling rates were also employed across the four age categories (12-17, 18-25, 26-34, and 35 years old and older) in order to obtain approximately equal numbers of interviews in each group, and thus to oversample those who were 12-34 years old. Weights were used in the analysis of the data to adjust for disproportionate sampling and for interview nonresponse. Selections of sampling locations, households, and eligible respondents within households were specified in the sampling plan, and interviewers were not permitted to make substitutions. In some of the earlier surveys, both a youth and an adult may have been interviewed in the same household. In the 1985 study, only one respondent was interviewed per household, in order to reduce intraclass correlation, and, therefore, sampling error.

THE FIELD EXPERIENCE

Pretests of the interview were conducted in early 1985 in Philadelphia and New York to refine the instrument and the interview. The field work was directed by senior staff members at ISR who were assisted by 22 field coordinators, each of whom supervised 12 to 25 interviewers directly employed by the Institute for Survey Research. Of the 566 persons trained as interviewers, 50% were members of a minority group, 30% were bilingual, and 25% were males.

A completed interview had to contain, at a minimum, data on use of drugs in the respondent's lifetime and basic demographic characteristics. Strategies for insuring the highest possible rate of participation resulted in a response rate of over 83% and a total of 8,038 completed interviews of which slightly less than 9% (n=700) were conducted in Spanish. The interviews were completed between mid-June and mid-December of 1985. Of the 8,038 interviews, 3,949 were with whites, 1,945 were with blacks, 1,996 were with Hispanics, and 148 were with persons from other racial/ethnic groups. Response rates for interviews are at least 80% for all racial/ethnic groups. In fact, the rates are somewhat higher in the black and Hispanic secondary sampling units than among whites. This undoubtedly reflects the extra effort devoted to the oversampled groups.

The importance of confidentiality was consistently stressed to the interviewers. Throughout the course of the study, the respondent's anonymity and the privacy of his or her responses were protected by separating identifying information from survey responses. Respondents were assured that their identity and responses would be handled in the strictest confidence in accordance with Federal law. The questionnaire itself and the interviewing procedures were designed to enhance the privacy of responses, especially during segments of the interview in which questions of a sensitive nature were posed. When questions concerning illicit drug use were asked, show cards were displayed, and respondents were asked to mark on answer sheets their responses to questions read aloud by the interviewer. The interviewer did not see the completed answer sheets.

INTERPRETING THE DATA

The number of persons actually interviewed within each age group and demographic category can be seen in table 1. Attention should be directed to the 148 respondents who were not classified as either white, black, or Hispanic. In all tabular presentations in which race/ethnicity is used as a variable, these "others" were eliminated because there were too few subjects to yield reliable estimates of drug use. Another group that is excluded from analyses is education for those 12-17 year-olds. Since most respondents in this category have not finished their education and would be expected to be at different levels depending on their specific age, educational attainment is not very meaningful. Therefore, the variable is called adult education, and the 12-17 year-olds are excluded from the tables. Another variable for which a category contains a small number of subjects is current employment: relatively few respondents in the age categories of 12-17 years old and 35 years old and older reported that they were unemployed. However, since there is no systematic reason to exclude these categories from the analysis, they are retained in the tables, though care should be taken in interpreting results from these categories.

Shown in table 2 is the estimated number of persons in the population that the respondents represent. All of the numbers in table 2 are in thousands and should be read by adding three zeros. Thus, the 1,129 males 12-17 years old interviewed in this study represent approximately 11,080,000 of their counterparts in the noninstitutionalized household population in the continental United States. More detailed estimates of the number of drug users are available in the National Household Survey on Drug Abuse: Population Estimates 1985.[1]

In table 3 the percentage of respondents in the four age groups and in the total sample are presented in terms of the various demographic characteristics to show that, once weights are applied, the distribution of respondents reflects the distribution in the general population. For example, 80.6% of the weighted sample is white, 10.7% is black, and 6.5% is Hispanic.

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[1]DHHS Publication No. (ADM)87-1539, printed 1987.

Most of the tables presented in subsequent chapters are organized in terms of the categories shown in tables 1, 2, and 3. Where other categories are used, the unweighted N is shown in parentheses. In each chapter, the rates for use of a drug or drug class are shown for lifetime usage and usually for use in the past year and the past month for the four age groups by sex, race/ethnicity, population density, region, educational attainment among those 18 years old and older, and current employment. The prevalence rates for the age groups can be compared in terms of these basic demographic variables.

All such comparisons, as well as the individual rates themselves, are subject to sampling error which is readily quantified (and nonsampling error, which is not).[2] For individual rates, sampling error results from the fact that questions were asked of a sample rather than of everyone in the target population. In such cases, sampling theory provides the basis for calculation of confidence intervals around the estimates and tests of significance in comparing two estimates. The size of the intervals and the algorithm for tests of significance depend on (1) sample size, (2) extent of homogeneity of the sample on the variable in question, that is, the appropriate design effect, (3) the specific type of probability sampling procedure used, and (4) the degree of confidence required in the estimate.

Confidence Intervals are not presented in the Main Findings. However, tables in Section B of the Methods Appendix provide a means for applying conservative confidence limits for various observed estimates at given effective sample sizes at the typical confidence level of 95%.[3] The figures in that table make possible assertions such as "One may be 95% confident that between 10% and 15% of the 12-17 year old population have used marijuana at least once during the previous month." More precisely, if the sampling procedures are infinitely repeated, the population value would lie between the confidence limits 95% of the time.

The tables on trends include an indication of whether a statistically significant change occurred between 1982 and 1985. There is one exception. Because data on use of inhalants were not gathered in 1982, the trends for inhalants involve a comparison of the data obtained in 1979 and 1985. A significant change is operationally defined as one likely to occur fewer than 5 times in 100 by chance alone (.05). Significance is reported at the .05, .01, and .001 levels using a two-tailed test. The reader can use other tables in the Appendix to

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[2]Nonsampling error, which includes nonresponse, misreporting, and miscoding, cannot be measured satisfactorily, although attempts to keep it at a minimum are crucial. These include all of the quality control procedures enumerated in the Methods Appendix associated with study and questionnaire design, field procedures, and data processing.

[3]These figures apply an adjustment to the normal algorithm for calculating an asymmetric confidence interval. This adjustment is necessary because of the stratification and clustering in the sample design that allowed for the oversampling of minorities and younger respondents. This is explained in more detail in the Methods Appendix.

estimate the statistical significance of differences for comparisons not made in the text.

Further description of study procedures may be found in the Methods Appendix to this report which provides information on sample selection, sampling errors, confidence intervals, significance testing, data collection, data editing, coding methods, and the quality of the data.

TABLE 1. NUMBER OF PERSONS INTERVIEWED BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985 (UNWEIGHTED N)

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL SAMPLE	2,246	1,813	2,166	1,813	8,038
SEX					
Male	1,129	800	870	727	3,526
Female	1,117	1,013	1,296	1,086	4,512
RACE/ETHNICITY					
White	993	794	1,082	1,080	3,949
Black	590	461	499	395	1,945
Hispanic	627	528	534	307	1,996
Other	36	30	51	31	148
POPULATION DENSITY[1]					
Large Metro	644	538	642	448	2,272
Small Metro	901	763	874	723	3,261
Nonmetro	701	512	650	642	2,505
REGION					
Northeast	436	327	407	345	1,515
North Central	450	373	473	393	1,689
South	899	667	796	728	3,090
West	461	446	490	347	1,744
ADULT EDUCATION[2]					
Less than high school	N/A	474	459	748	1,681
High school graduate	N/A	801	797	537	2,135
Some college	N/A	391	457	253	1,101
College graduate	N/A	142	447	271	860
CURRENT EMPLOYMENT[3]					
Full-time	118	896	1,364	776	3,154
Part-time	474	291	198	159	1,122
Unemployed	89	271	175	76	611
Other[4]	1,563	354	427	800	3,144

[1]Large metro are incorporated areas of 250,000+, small metro are other incorporated areas, and nonmetro are unincorporated areas.

[2]Data on adult education are not applicable for 12-17 year olds, and are missing for 5 persons 18-25 years old, 6 persons 26-34 years old, and 4 persons 35 or older.

[3]Data on current employment are missing for 2 persons 12-17 years old, 1 person 18-25, 2 persons 26-34, and 2 persons 35 or older.

[4]Retired, disabled, homemaker, student, or "other."

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 2. ESTIMATED NUMBER OF PERSONS IN THE U.S. HOUSEHOLD POPULATION[1] BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985 (IN THOUSANDS)

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	21,640	32,490	36,210	100,450	190,790
SEX					
Male	11,080	16,160	17,780	46,370	91,390
Female	10,560	16,330	18,430	54,080	99,400
RACE/ETHNICITY					
White	16,120	25,100	28,520	83,970	153,710
Black	3,130	4,050	4,010	9,250	20,440
Hispanic	1,880	2,530	2,630	5,410	12,450
Other	510	810	1,050	1,820	4,190
POPULATION DENSITY					
Large Metro	4,020	6,360	7,300	16,220	33,900
Small Metro	9,470	14,750	15,870	45,730	85,820
Nonmetro	8,150	11,380	13,040	38,500	71,070
REGION					
Northeast	5,310	7,920	9,170	25,130	47,530
North Central	4,400	7,550	8,030	21,410	41,390
South	7,550	10,400	11,830	34,760	64,540
West	4,380	6,620	7,180	19,150	37,330
ADULT EDUCATION					
Less than high school	N/A	6,120	4,960	30,030	41,110
High school graduate	N/A	14,620	13,510	34,770	62,900
Some college	N/A	8,040	8,430	16,710	33,180
College graduate	N/A	3,710	9,310	18,940	31,960
CURRENT EMPLOYMENT					
Full-time	1,320	18,130	24,410	48,290	92,150
Part-time	5,810	5,650	3,710	8,850	24,020
Unemployed	900	3,810	1,960	3,570	10,240
Other[2]	13,610	4,900	6,130	39,740	64,380

[1]These estimates result from applying the MFFWGT weight variable in the data set to produce population estimates. Missing data are interpolated by distributions within age group.

[2]Retired, disabled, homemaker, student, or "other."

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 3. ESTIMATED PERCENT OF THE U.S. HOUSEHOLD POPULATION BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985[1]

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	11.3	17.0	19.0	52.6	100.0
SEX					
Male	51.2	49.8	49.1	46.2	47.9
Female	48.8	50.2	50.9	53.8	52.1
RACE/ETHNICITY					
White	74.5	77.2	78.8	83.6	80.6
Black	14.5	12.5	11.1	9.2	10.7
Hispanic	8.7	7.8	7.3	5.4	6.5
Other	2.4	2.5	2.9	1.8	2.2
POPULATION DENSITY					
Large Metro	18.6	19.6	20.2	16.1	17.8
Small Metro	43.8	45.4	43.8	45.5	45.0
Nonmetro	37.7	35.0	36.0	38.3	37.2
REGION					
Northeast	24.5	24.4	25.3	25.0	24.9
North Central	20.3	23.2	22.2	21.3	21.7
South	34.9	32.0	32.7	34.6	33.8
West	20.2	20.4	19.8	19.1	19.6
ADULT EDUCATION					
Less than high school	N/A	18.8	13.7	29.9	24.2
High school graduate	N/A	45.0	37.3	34.6	37.1
Some college	N/A	24.8	23.3	16.6	19.7
College graduate	N/A	11.4	25.7	18.9	19.0
CURRENT EMPLOYMENT					
Full-time	6.1	55.8	67.4	48.1	48.3
Part-time	26.8	17.4	10.3	8.8	12.6
Unemployed	4.2	11.7	5.4	3.6	5.4
Other[2]	62.9	15.1	16.9	39.6	33.7

[1]These percentages and the percentages in all subsequent tables are derived by applying the MFFWGT variable in the data set. Column percents for each characteristic may not total 100.0 due to rounding.

[2]Retired, disabled, homemaker, student, or "other."

Source: NIDA, National Household Survey on Drug Abuse, 1985.

II. SUMMARY OF FINDINGS

The 1982 and 1985 studies show a reversal of the upward trends in drug use observed in the earlier national studies conducted in the decade of the seventies. Levels of drug use increased from the early to the late 1970s and, according to the household surveys, peaked around 1979. Between 1979 and 1982 there was a slight decline in the percentage of 12-17 year-olds who had ever used marijuana, as well as a significant decline in the percentage of persons who were current users of marijuana, alcohol, and several other drugs. This pattern has continued between 1982 and 1985, but not for all age groups or for all drugs. This chapter is an overview of the 1985 drug use rates, trends in drug use from 1972 to 1985, and some summary measures on 1985 drug use and opportunities to use drugs. Data on drug use are presented without explicit regard for differences between subgroups of the population other than age group.

PREVALENCE OF DRUG USE: 1985

Presented in Tables 4 and 5 are overall prevalence rates and the estimated number of users for each of thirteen classes of drugs, as reported in the 1985 National Household Survey. The population estimates have been rounded to the nearest 10,000. It should be recalled that these estimated numbers of users do not include those members of the U.S. population who do not fall into the household sampling frame as defined in Chapter 1.

TRENDS: 1972 TO 1985

Trends for 1972 to 1985 are shown, but only the changes between 1982 and 1985 were tested. Significant changes between 1982 and 1985 are presented for all of the major drugs on lifetime, past year, and past month prevalence. For inhalants, the rates for 1979 and 1985 are compared because questions about use of inhalants were not asked in the 1982 survey.

The trend data are displayed in three sets of tables in which rates for lifetime, the past year, and the past month are provided for persons 12-17 years old, 18-25 years old, and 26 years old and older. This classification is utilized because it was used in the previous National Household Surveys on Drug Abuse. Because the data presented in most parts of this report will classify respondents into four age groups (12-17, 18-25, 26-34, and 35 or older), a fourth table in each set shows the rates for persons 26 and older, grouped into age 26-34 and age 35 years old and older.

The differences between the proportion reporting use of a drug in 1982 and the proportion reporting use of that drug in 1985 are tested using a differences in proportions test. Statistical significance is reported for the .05, the .01, and the .001 levels. It should be noted

that an adjustment, taking into account design effects for each of the 1982 and 1985 surveys, is included in the calculations to determine whether differences between proportions are statistically significant. The procedure is described in the Methods Appendix.

Trends in Lifetime Use Among Persons 12-17 Years Old

As shown in table 6, among persons 12-17 years old, the only drugs for which there is not a decrease in lifetime prevalence between 1982 and 1985 are heroin, analgesics, and any nonmedical use of a psychotherapeutic. However, only the decreases between 1982 and 1985 in lifetime use of hallucinogens, cigarettes, and alcohol are statistically significant. In 1982, 5.2% of the 12-17 year-olds reported use of hallucinogens in comparison with 3.3% of the 12-17 year-olds in 1985. This decrease is significant at the .05 level. The rate for lifetime use of cigarettes in 1982 was 49.5%, while the rate in 1985 was 45.2%, a change significant at the .05 level. The rate for lifetime use of alcohol drops from 65.2% in 1982 to 55.5% in 1985, and this change is significant at the .001 level.

For persons 12-17 years old, two long-term trends in lifetime use are observed. For marijuana, inhalants, hallucinogens, alcohol, and cigarettes, there is an upward trend through the 1970s with the highest lifetime rates recorded in 1979. Since that time, there has been a continuing decline. There is a slightly different trend for cocaine and three of the four psychotherapeutic drugs because the highest rate for these drugs was observed in the 1982 survey, and for analgesics, the highest recorded rate occurred in 1985.

Trends in Lifetime Use Among Persons 18-25 Years Old

With the exception of heroin, which stabilized at 1.2%, the lifetime rate for each drug or drug class among persons 18-25 years old is lower in 1985 than in 1982 (table 7). Three of the decreases in lifetime rates are statistically significant. For inhalants, the decrease from 1979 is significant at the .01 level, whereas the decreases for hallucinogens and sedatives are significant at the .001 level. For hallucinogens the decrease is from 21.1% in 1982 to 11.3% in 1985, while the decrease for sedatives from 18.7% in 1982 to 11.0% in 1985 is almost as large.

In terms of long-term trends, the highest rates among the 18-25 year-olds occurred in 1979 for marijuana, inhalants, hallucinogens, tranquilizers, alcohol, and cigarettes. The highest rate for heroin was recorded in 1972 and for stimulants in 1977, and the lifetime rates for cocaine, sedatives and analgesics peaked in 1982.

Trends in Lifetime Use Among Persons 26 and Older

The data in table 8 show an increase between 1982 and 1985 in the lifetime rates of use for all drugs except hallucinogens and heroin for persons 26 years old and older. For five of the drug classes, the increase is statistically significant. The increase for marijuana, from 23.0% to 27.2%, is significant at the .01 level. The increases in lifetime nonmedical use of any psychotherapeutic drug, tranquilizers, and analgesics are significant at the .001 level. The rate for any nonmedical use of a psychotherapeutic increased from 8.8% in 1982 to 13.8% in 1985. Also, the lifetime rates for tranquilizers and analgesics in 1985 are almost double the rates in 1982.

Although there is a significant increase in lifetime marijuana use among persons age 26 and older between 1982 and 1985, an examination of the results in table 9 reveals that the increase is statistically significant only for the older adults age 35 and older and not for those 26-34 years old. Because relatively few people begin to use marijuana after the age of 25, the increase in lifetime rates observed in tables 8 and 9 reflects the movement of birth cohorts with substantial experience with marijuana into the older age groups, rather than an increase in the number of new users in these older age groups.

For tranquilizers, analgesics, and any nonmedical use of a psychotherapeutic, there is a statistically significant increase in the lifetime rate for these drugs among both persons 26-34 years of age and individuals 35 and older. For cigarettes, there is a statistically significant decrease among 26-34 year-olds, but a statistically significant increase for persons 35 years old and older.

Trends in Drug Use in the Past Year Among Persons 12-17 Years Old

As may be noted in table 10, the rates for use of drugs in the past year by persons aged 12-17 are almost identical in 1982 and 1985. In fact, the only drug for which the rates differ by more than one percent is stimulants, from 5.6% to 4.3%. None of the changes are statistically significant.

Among persons 12-17 years old, the highest rates of use in the past year occurred in 1979 for marijuana, hallucinogens, and alcohol. The year 1982 yielded the highest rates for the past year for stimulants and sedatives, while the highest rates for inhalants, tranquilizers, analgesics, and cigarettes occurred in 1985. For cocaine, the rates in 1979, 1982, and 1985 are essentially the same, 4.0% to 4.2%.

Trends in Drug Use in the Past Year Among Persons 18-25 Years Old

In the previous National Household Surveys, the highest rates of drug use have been found among the 18-25 year-olds. The use of inhalants in the past year declined significantly from 1979 to 1985 from 3.8% to 2.1%. The rates for the past year show a decline in use of hallucinogens, from 6.9% to 4.0%, from 1982 to 1985, and this change was significant at the .01 level (table 11). There also was a significant

decrease (.01 level) in use of sedatives, from 8.7% to 5.0%. Even use of cocaine in the past year decreased, from 18.8% to 16.3%, though this decrease was not significant. On the other hand, the rate for nonmedical use of analgesics in the past year increased significantly from 4.4% to 6.6%. The peak year for use of marijuana, inhalants, hallucinogens, and cocaine in the past year was 1979. Peak use of stimulants, sedatives, and cigarettes occurred in 1982, while the peak year for analgesics and alcohol was 1985.

Trends in Drug Use in the Past Year Among Persons 26 and Older

For persons 26 years of age and older, the data in table 12 show statistically significant increases from 1982 to 1985 in use of tranquilizers in the past year (from 1.1% to 2.8%), analgesics (from 1.0% to 2.9%), and any nonmedical use of psychotherapeutics during the past year (from 3.1% to 6.2%). Each of these changes is significant at the .001 level. With the exception of marijuana, inhalants, and cigarettes, the highest rate of use in the past year of all drugs among persons 26 years old and older occurred in 1985.

Division of persons 26 years of age and older into two groups reveals substantial differences between the groups, as may be seen in table 13. For each drug class, the rates are higher for persons 26-34 years of age than for persons 35 years of age or older. For example, in 1985, for marijuana the rate for 26-34 year-olds is six times as high as the rate for persons 35 and older.

The significant change in tranquilizer use for those 26 and older reflects an increase among 26-34 year-olds, from 3.1% to 5.7% (significant at the .01 level) and an increase from less than one-half of one percent to 1.7% among those 35 years old and older (significant at the .05 level). The increases in use of analgesics and of any psychotherapeutic reflect increases in the rates both among the 26-34 year-olds and persons 35 years of age and older. In both age categories the increases for these drugs are statistically significant. For cigarettes, the decline in the rate for persons 26-34 years of age is statistically significant, although the difference in rates for persons 26 and older is not.

Trends in Drug Use in the Past Month Among Persons 12-17 Years Old

There is one statistically significant change from 1982 to 1985 in drug use in the past month among the 12-17 year-olds, as use of inhalants increased from 2.0% in 1979 to 3.4% in 1985 (table 14). Use of cocaine in the past month peaked in 1982, but the rate of 1.5% for 1985 is similar to the rate of 1.6% in 1982. Use of analgesics in the past month was also at its highest in 1985. The highest rate for tranquilizers occurred in 1976. For marijuana, hallucinogens, and alcohol, the highest rates occurred in 1979. For two of the four classes of psychotherapeutic drugs, stimulants and sedatives, the highest rates occurred in 1982.

Trends in Drug Use in the Past Month Among Persons 18-25 Years Old

As shown in table 15, there is only one statistically significant change in use of drugs in the past month among persons 18-25 years old, and this involves a decrease from 27.4% to 21.8% in the rate for marijuana. Otherwise, there are only minimal changes from 1982 to 1985.

For most drugs, the highest rates of use in the past month among 18-25 year-olds were recorded in 1979. For stimulants and any psychotherapeutic the highest rates were recorded in 1982, for analgesics in 1985, and for tranquilizers and cigarettes in 1976.

Trends in Drug Use in the Past Month Among Persons 26 and Older

The data in table 16 show that the only statistically significant changes in use of drugs in the past month among persons 26 years old and older occurred for the overall measure of any nonmedical psychotherapeutic use and for tranquilizers and analgesics. The increase in use of cocaine in the past month among individuals 26 and older from 1.2% to 2.0% is not statistically significant. However, as seen in table 17, the increase for persons 26-34 years of age is significant at the .01 level.

SPECTRUM OF ILLICIT DRUG USE

The data in table 18 reflect a measure of the spectrum of illicit drug use. The respondents were divided into those who had never used any illicit drug and those who had. Persons who had ever used an illicit drug were classified as: 1) used only marijuana; 2) used only one or more of the psychotherapeutic drugs nonmedically; and 3) used "more" illicit drugs, that is, a) used both marijuana and a psychotherapeutic drug or b) used one of the other illicit drugs (cocaine, hallucinogens, PCP, inhalants, heroin) irrespective of whether marijuana or psychotherapeutics were used. A comparable measure with mutually exclusive categories was created for use of these drugs in the past month.

Illicit drug use is more extensive among those 18-25 and 26-34 years old than among their younger or older counterparts. In each group, the pattern involving only nonmedical use of one or more of the psychotherapeutic drugs is the least common. Marijuana is the only illicit drug ever used by 10.6% of the 12-17 year-olds, 26.0% and 25.0% of the 18-25 and 26-34 year-olds, and 7.2% of the persons 35 years old and older. Further, the largest percentage figures for illicit drug use in the top part of table 18 occur for use of "more" illicit drugs. Over one-third of the 18-25 and 26-34 year-olds reported having used "more" illicit drugs during their lifetime, as did 16.3% of the 12-17 year old respondents. The rates for past month use of a spectrum of illicit drugs are considerably lower. For example, 7.8% of 12-17 year-olds reported using only marijuana during the previous month, and 5.4% reported using "more" illicit drugs. These rates are only slightly lower than those reported by persons 18-25 and 26-34 years old.

OPPORTUNITIES TO USE DRUGS AND ACTUAL USE

The data in table 19 show the percentages of persons in the four age groups who reported having had opportunities to use marijuana, hallucinogens, cocaine, and heroin, and the actual percentage who reported having used them. The figures for opportunity indicate that substantial proportions of the population have had a chance to use these drugs, including heroin, but particularly cocaine and marijuana. Not all who had an opportunity to use marijuana or cocaine did so. However, substantial percentages of the 18-34 year-olds who had the opportunity to try marijuana, cocaine, and hallucinogens did try them.

TABLE 4. LIFETIME, PAST YEAR, AND PAST MONTH PREVALENCE FOR SELECTED ILLICIT DRUG USE: PERCENT AND ESTIMATED NUMBER OF USERS IN THE U.S. HOUSEHOLD POPULATION, AGE 12 AND OLDER: 1985

	Percent	Estimated Number of Users
MARIJUANA AND HASHISH		
Lifetime	32.4	61,940,000
Past Year	15.3	29,350,000
Past Month	9.4	18,190,000
COCAINE		
Lifetime	11.6	22,240,000
Past Year	6.3	12,200,000
Past Month	2.9	5,750,000
INHALANTS		
Lifetime	6.8	12,940,000
Past Year	1.5	3,170,000
Past Month	0.9	1,940,000
HALLUCINOGENS		
Lifetime	6.7	12,880,000
Past Year	1.7	3,180,000
Past Month	0.8	1,460,000
PCP		
Lifetime	2.8	5,310,000
Past Year	0.6	1,210,000
Past Month	*	700,000
HEROIN		
Lifetime	1.0	1,930,000
Past Year	*	340,000
Past Month	*	160,000

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 5. LIFETIME, PAST YEAR, AND PAST MONTH PREVALENCE FOR NONMEDICAL USE OF PSYCHOTHERAPEUTICS, CIGARETTES, AND ALCOHOL: PERCENT AND ESTIMATED NUMBER OF USERS IN THE U.S. HOUSEHOLD POPULATION, AGE 12 AND OLDER: 1985

	Percent	Estimated Number of Users
NONMEDICAL USE OF ANY PSYCHOTHERAPEUTIC[1]		
Lifetime	15.7	29,910,000
Past Year	8.0	15,380,000
Past Month	3.2	6,180,000
STIMULANTS		
Lifetime	9.2	17,610,000
Past Year	4.1	8,060,000
Past Month	1.3	2,690,000
SEDATIVES		
Lifetime	6.0	11,540,000
Past Year	2.6	5,230,000
Past Month	0.8	1,710,000
TRANQUILIZERS		
Lifetime	7.7	14,750,000
Past Year	3.5	7,000,000
Past Month	1.1	2,180,000
ANALGESICS		
Lifetime	6.6	12,620,000
Past Year	3.6	7,590,000
Past Month	1.1	2,450,000
CIGARETTES		
Lifetime	75.7	144,510,000
Past Year	36.2	69,310,000
Past Month	31.5	60,280,000
ALCOHOL		
Lifetime	86.1	164,360,000
Past Year	73.4	140,290,000
Past Month	59.1	113,070,000

[1]Includes the nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic and does not include over-the-counter drugs.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 6. TRENDS IN PERCENT OF PERSONS 12-17 YEARS OLD REPORTING DRUG USE IN LIFETIME: 1972-1985

DRUG (Unweighted N)	1972 (880)	1974 (952)	1976 (986)	1977 (1,272)	1979 (2,165)	1982 (1,581)	1985[1] (2,246)
Marijuana & Hashish	14.0	23.0	22.4	28.0	30.9	26.7	23.6
Inhalants	6.4	8.5	8.1	9.0	9.8	--	9.2
Hallucinogens	4.8	6.0	5.1	4.6	7.1	5.2	3.3+
Cocaine	1.5	3.6	3.4	4.0	5.4	6.5	4.9
Heroin	0.6	1.0	0.5	1.1	0.5	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	7.3	10.3	12.1
Stimulants	4.0	5.0	4.4	5.2	3.4	6.7	5.6
Sedatives	3.0	5.0	2.8	3.1	3.2	5.8	4.1
Tranquilizers	3.0	3.0	3.3	3.8	4.1	4.9	4.8
Analgesics	--	--	--	--	3.2	4.2	5.8
Cigarettes	--	52.0	45.5	47.3	54.1	49.5	45.2+
Alcohol	--	54.0	53.6	52.6	70.3	65.2	55.5+++

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

+Difference between 1982 and 1985 statistically significant at the .05 level.

+++Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 7. TRENDS IN PERCENT OF PERSONS 18-25 YEARS OLD REPORTING DRUG USE IN LIFETIME: 1972-1985

DRUG (Unweighted N)	1972 (772)	1974 (849)	1976 (882)	1977 (1,500)	1979 (2,044)	1982 (1,283)	1985[1] (1,813)
Marijuana & Hashish	47.9	52.7	52.9	59.9	68.2	64.1	60.3
Inhalants	--	9.2	9.0	11.2	16.5	--	12.4++
Hallucinogens	--	16.6	17.3	19.8	25.1	21.1	11.3+++
Cocaine	5.1	12.7	13.4	19.1	27.5	28.3	25.2
Heroin	4.6	4.5	3.9	3.6	3.5	1.2	1.2
Nonmedical use of Any Psychotherapeutic	--	--	--	--	29.5	28.4	26.0
Stimulants	12.0	17.0	16.6	21.2	18.2	18.0	17.1
Sedatives	10.0	15.0	11.9	18.4	17.0	18.7	11.0+++
Tranquilizers	7.0	10.0	9.1	13.4	15.8	15.1	12.0
Analgesics	--	--	--	--	11.8	12.1	11.3
Cigarettes	--	68.8	70.1	67.6	82.8	76.9	75.6
Alcohol	--	81.6	83.6	84.2	95.3	94.6	92.6

-- Estimate not available.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

++Difference between 1979 and 1985 statistically significant at the .01 level.

+++Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 8. TRENDS IN PERCENT OF PERSONS AGE 26 AND OLDER REPORTING DRUG USE IN LIFETIME: 1972-1985

DRUG (Unweighted N)	1972 (1,613)	1974 (2,221)	1976 (1,708)	1977 (1,822)	1979 (3,015)	1982 (2,760)	1985[1] (3,979)
Marijuana & Hashish	7.4	9.9	12.9	15.3	19.6	23.0	27.2++
Inhalants	--	1.2	1.9	1.8	3.9	--	5.0
Hallucinogens	--	1.3	1.6	2.6	4.5	6.4	6.2
Cocaine	1.6	0.9	1.6	2.6	4.3	8.5	9.5
Heroin	*	0.5	0.5	0.8	1.0	1.1	1.1
Nonmedical use of Any Psychotherapeutic	--	--	--	--	9.2	8.8	13.8+++
Stimulants	3.0	3.0	5.6	4.7	5.8	6.2	7.9+
Sedatives	2.0	2.0	2.4	2.8	3.5	4.8	5.2
Tranquilizers	5.0	2.0	2.7	2.6	3.1	3.6	7.2+++
Analgesics	--	--	--	--	2.7	3.2	5.6+++
Cigarettes	--	65.4	64.5	67.0	83.0	78.7	80.5
Alcohol	--	73.2	74.7	77.9	91.5	88.2	89.4

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

+Difference between 1982 and 1985 statistically significant at the .05 level.

++Difference between 1982 and 1985 statistically significant at the .01 level.

+++Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 9. TRENDS IN PERCENT OF PERSONS AGE 26 AND OLDER BY AGE GROUP REPORTING DRUG USE IN LIFETIME: 1982-1985[1]

DRUG	26-34 YEARS		35 Years +		TOTAL 26 YEARS +	
	1982	1985	1982	1985	1982	1985
(Unweighted N)	(1,571)	(2,166)	(1,189)	(1,813)	(2,760)	(3,979)
Marijuana & Hashish	55.7	58.5	11.7	15.9+	23.0	27.2++
Hallucinogens	19.2	16.9	2.0	2.4	6.4	6.2
Cocaine	21.7	24.1	4.0	4.2	8.5	9.5
Heroin	3.5	2.6	*	0.5	1.1	1.1
Nonmedical use of Any Psychotherapeutic	21.1	27.2++	4.5	9.0+++	8.8	13.8+++
Stimulants	15.2	18.3	3.0	4.2	6.2	7.9+
Sedatives	13.0	12.4	2.0	2.6	4.8	5.2
Tranquilizers	9.8	13.9++	1.4	4.7+++	3.6	7.2+++
Analgesics	8.6	13.3+++	1.4	2.8+	3.2	5.6+++
Cigarettes	85.4	80.7++	76.3	80.4+	78.7	80.5
Alcohol	95.8	93.1++	85.6	88.0	88.2	89.4

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

+Difference between 1982 and 1985 statistically significant at the .05 level.

++Difference between 1982 and 1985 statistically significant at the .01 level.

+++Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 10. TRENDS IN PERCENT OF PERSONS 12-17 YEARS OLD REPORTING DRUG USE IN PAST YEAR: 1972-1985

DRUG (Unweighted N)	1972 (880)	1974 (952)	1976 (986)	1977 (1,272)	1979 (2,165)	1982 (1,581)	1985[1] (2,246)
Marijuana & Hashish	--	18.5	18.4	22.3	24.1	20.6	19.7
Inhalants	2.9	2.4	2.9	2.2	4.6	--	5.1
Hallucinogens	3.6	4.3	2.8	3.1	4.7	3.6	2.7
Cocaine	1.5	2.7	2.3	2.6	4.2	4.1	4.0
Heroin	*	*	*	0.6	*	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	5.6	8.3	8.5
Stimulants	--	3.0	2.2	3.7	2.9	5.6	4.3
Sedatives	--	2.0	1.2	2.0	2.2	3.7	2.9
Tranquilizers	--	2.0	1.8	2.9	2.7	3.3	3.4
Analgesics	--	--	--	--	2.2	3.7	3.8
Cigarettes[2]	--	--	--	--	13.3	24.8	25.8
Alcohol	--	51.0	49.3	47.5	53.6	52.4 (47.3)[3]	51.7

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]In Main Findings 1985, if it was not possible to ascertain recency of use for a respondent, the case was excluded from the analysis and percents. In previous surveys, if recency of use was not determined, the case was treated as a nonuser in the past year or month. Therefore, previous surveys may have underestimated past year and past month drug use. In making tests of significance of differences between 1982 and 1985, only the estimates for alcohol (6% missing data in 1982) are appreciably affected. The 1982 estimates for alcohol were recalculated excluding cases with missing data. This new estimate is used to assess the significance of changes from 1982 to 1985. The original estimate from Main Findings 1982 is shown in parentheses. See Methods Appendix Section C for more detail.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 11. TRENDS IN PERCENT OF PERSONS 18-25 YEARS OLD REPORTING DRUG USE IN PAST YEAR: 1972-1985

DRUG (Unweighted N)	1972 (772)	1974 (849)	1976 (882)	1977 (1,500)	1979 (2,044)	1982 (1,283)	1985[1] (1,813)
Marijuana & Hashish	--	34.2	35.0	38.7	46.9	40.4	36.9
Inhalants	--	1.2	1.4	1.7	3.8	--	2.1+
Hallucinogens	--	6.1	6.0	6.4	9.9	6.9	4.0++
Cocaine	--	8.1	7.0	10.2	19.6	18.8	16.3
Heroin	--	0.8	0.6	1.2	0.8	*	0.6
Nonmedical use of Any Psychotherapeutic	--	--	--	--	16.3	16.1	15.6
Stimulants	--	8.0	8.8	10.4	10.1	10.8	9.9
Sedatives	--	4.2	5.7	8.2	7.3	8.7	5.0++
Tranquilizers	--	4.6	6.2	7.8	7.1	5.9	6.4
Analgesics	--	--	--	--	5.2	4.4	6.6+
Cigarettes[2]	--	--	--	--	46.7	47.2	44.3
Alcohol	--	77.1	77.9	79.8	86.6	87.1 (83.4)[3]	87.2

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]The number in parentheses is the estimate from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

+Difference between 1982 and 1985 statistically significant at the .05 level.

++Difference between 1982 and 1985 statistically significant at the .01 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 12. TRENDS IN PERCENT OF PERSONS AGE 26 AND OLDER REPORTING DRUG USE IN PAST YEAR: 1972-1985

DRUG (Unweighted N)	1972 (1,613)	1974 (2,221)	1976 (1,708)	1977 (1,822)	1979 (3,015)	1982 (2,760)	1985[1] (3,979)
Marijuana & Hashish	--	3.8	5.4	6.4	9.0	10.6	9.5
Inhalants	--	*	*	*	1.0	--	0.8
Hallucinogens	--	*	*	*	0.5	0.8	1.0
Cocaine	--	*	0.6	0.9	2.0	3.8	4.2
Heroin	--	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	2.3	3.1	6.2+++
Stimulants	--	*	0.8	0.8	1.3	1.7	2.6
Sedatives	--	*	0.6	*	0.8	1.4	2.0
Tranquilizers	--	*	1.2	1.1	0.9	1.1	2.8+++
Analgesics	--	--	--	--	0.5	1.0	2.9+++
Cigarettes[2]	--	--	--	--	39.7	38.2	36.0
Alcohol	--	62.7	64.2	65.8	72.4	72.0 (68.3)[3]	73.6

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]The number in parentheses is the estimate from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

+++Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 13. TRENDS IN PERCENT OF PERSONS AGE 26 AND OLDER BY AGE GROUP REPORTING DRUG USE IN PAST YEAR: 1982-1985[1]

DRUG	26-34 YEARS		35 YEARS +		TOTAL 26 YEARS +	
(Unweighted N)	1982 (1,571)	1985 (2,166)	1982 (1,189)	1985 (1,813)	1982 (2,760)	1985 (3,979)
Marijuana & Hashish	26.6	25.2	5.1	3.9	10.6	9.5
Hallucinogens	2.0	3.4	*	*	0.8	1.0
Cocaine	10.8	12.6	1.4	1.2	3.8	4.2
Heroin	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	9.2	14.2^{+++}	1.0	3.3^{++}	3.1	6.2^{+++}
Stimulants	5.4	7.2	0.5	1.0	1.7	2.6
Sedatives	3.7	4.9	0.6	0.9	1.4	2.0
Tranquilizers	3.1	5.7^{++}	*	1.7^{+}	1.1	2.8^{+++}
Analgesics	3.1	7.4^{+++}	*	1.3^{+}	1.0	2.9^{+++}
Cigarettes	49.5	44.3^{+}	34.3	33.0	38.2	36.0
Alcohol	86.0 (83.3)[2]	84.0	67.0 (63.1)	69.9	72.0 (68.3)	73.6

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]The numbers in parentheses are the estimates from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

$^{+}$Difference between 1982 and 1985 statistically significant at the .05 level.

$^{++}$Difference between 1982 and 1985 statistically significant at the .01 level.

$^{+++}$Difference between 1982 and 1985 statistically significant at the .001 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 14. TRENDS IN PERCENT OF PERSONS 12-17 YEARS OLD REPORTING DRUG USE IN PAST MONTH: 1972-1985

DRUG (Unweighted N)	1972 (880)	1974 (952)	1976 (986)	1977 (1,272)	1979 (2,165)	1982 (1,581)	1985[1] (2,246)
Marijuana & Hashish	7.0	12.0	12.3	16.6	16.7	11.5	12.0
Inhalants	1.0	0.7	0.9	0.7	2.0	--	3.4+
Hallucinogens	1.4	1.3	0.9	1.6	2.2	1.4	1.2
Cocaine	0.6	1.0	1.0	0.8	1.4	1.6	1.5
Heroin	*	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	2.3	3.8	3.0
Stimulants	--	1.0	1.2	1.3	1.2	2.6	1.6
Sedatives	--	1.0	*	0.8	1.1	1.3	1.0
Tranquilizers	--	1.0	1.1	0.7	0.6	0.9	0.6
Analgesics	--	--	--	--	0.6	0.7	1.6
Cigarettes[2]	--	25.0	23.4	22.3	12.1	14.7	15.3
Alcohol	--	34.0	32.4	31.2	37.2	30.2 (26.9)[3]	31.0

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]The number in parentheses is the estimate from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

+Difference between 1979 and 1985 statistically significant at the .05 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 15. TRENDS IN PERCENT OF PERSONS 18-25 YEARS OLD REPORTING DRUG USE IN PAST MONTH: 1972-1985

DRUG (Unweighted N)	1972 (772)	1974 (849)	1976 (882)	1977 (1,500)	1979 (2,044)	1982 (1,283)	1985[1] (1,813)
Marijuana & Hashish	27.8	25.2	25.0	27.4	35.4	27.4	21.8++
Inhalants	--	*	0.5	*	1.2	--	0.8
Hallucinogens	--	2.5	1.1	2.0	4.4	1.7	1.9
Cocaine	--	3.1	2.0	3.7	9.3	6.8	7.6
Heroin	--	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	6.2	7.0	6.3
Stimulants	--	3.7	4.7	2.5	3.5	4.7	3.7
Sedatives	--	1.6	2.3	2.8	2.8	2.6	1.6
Tranquilizers	--	1.2	2.6	2.4	2.1	1.6	1.6
Analgesics	--	--	--	--	1.0	1.0	1.8
Cigarettes[2]	--	48.8	49.4	47.3	42.6	39.5	36.8
Alcohol	--	69.3	69.0	70.0	75.9	70.9 (67.9)[3]	71.4

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]The number in parentheses is the estimate from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

++Difference between 1982 and 1985 statistically significant at the .01 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 16. TRENDS IN PERCENT OF PERSONS 26 YEARS AND OLDER REPORTING DRUG USE IN PAST MONTH: 1972-1985

DRUG (Unweighted N)	1972 (1,613)	1974 (2,221)	1976 (1,708)	1977 (1,822)	1979 (3,015)	1982 (2,760)	1985[1] (3,979)
Marijuana & Hashish	2.5	2.0	3.5	3.3	6.0	6.6	6.1
Inhalants	--	*	*	*	0.5	--	0.5
Hallucinogens	--	*	*	*	*	*	*
Cocaine	--	*	*	*	0.9	1.2	2.0
Heroin	--	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	--	--	--	--	1.1	1.2	2.5++
Stimulants	--	*	*	0.6	0.5	0.6	0.7
Sedatives	--	*	0.5	*	*	*	0.6
Tranquilizers	--	*	*	*	*	*	1.0++
Analgesics	--	--	--	--	*	*	0.9+
Cigarettes[2]	--	39.1	38.4	38.7	36.9	34.6	32.8
Alcohol	--	54.5	56.0	54.9	61.3	59.8 (56.7)[3]	60.6

-- Estimate not available.

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 (1979 and 1985 for inhalants) were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]For 1979, includes only persons who ever smoked at least 5 packs.

[3]The number in parentheses is the estimate from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

+Difference between 1982 and 1985 statistically significant at the .05 level.

++Difference between 1982 and 1985 statistically significant at the .01 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 17. TRENDS IN PERCENT OF PERSONS AGE 26 AND OLDER BY AGE GROUPS REPORTING DRUG USE IN PAST MONTH: 1982-1985[1]

DRUG	26-34 YEARS		35 YEARS +		TOTAL 26 YEARS +	
(Unweighted N)	1982 (1,571)	1985 (2,166)	1982 (1,189)	1985 (1,813)	1982 (2,760)	1985 (3,979)
Marijuana & Hashish	16.9	16.9	3.0	2.3	6.6	6.1
Hallucinogens	*	1.5+	*	*	*	*
Cocaine	3.3	6.1++	0.5	0.5	1.2	2.0
Heroin	*	*	*	*	*	*
Nonmedical use of Any Psychotherapeutic	4.2	5.3	*	1.5+	1.2	2.5++
Stimulants	1.8	2.2	*	*	0.6	0.7
Sedatives	1.3	1.2	*	*	*	0.6
Tranquilizers	1.0	1.7	*	0.8+	*	1.0++
Analgesics	1.3	2.2	*	*	*	0.9+
Cigarettes	43.9	40.3	31.4	30.1	34.6	32.8
Alcohol	73.0 (70.6)[2]	70.0	55.2 (51.8)	57.3	59.8 (56.7)	60.6

* Less than one-half of one percent.

[1]Changes between 1982 and 1985 were tested using the algorithm described in the Methods Appendix, Section B on Statistical Significance of Differences.

[2]The numbers in parentheses are the estimates from Main Findings 1982 for alcohol use. See explanation in Footnote 3 to Table 10.

+Difference between 1982 and 1985 statistically significant at the .05 level.

++Difference between 1982 and 1985 statistically significant at the .01 level.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 18. PERCENT REPORTING USE OF MARIJUANA, NONMEDICAL USE OF ANY PSYCHOTHERAPEUTIC, AND OTHER ILLICIT DRUGS BY AGE GROUP IN LIFETIME AND PAST MONTH: 1985[1]

	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
A. LIFETIME					
NEVER USED ILLICIT DRUGS	70.5	35.7	37.8	79.6	63.2
USED ILLICIT DRUGS:					
Marijuana only	10.6	26.0	25.0	7.2	14.2
Nonmedical Psychotherapeutics only	2.6	2.3	2.5	3.9	3.2
Used "more" illicit drugs[2]	16.3	36.0	34.6	9.3	19.4
B. USE WITHIN THE PAST MONTH					
DID NOT USE ANY ILLICIT DRUGS PAST MONTH	86.1	75.9	80.0	96.6	88.8
USED IN PAST MONTH:					
Only marijuana[3]	7.8	11.9	9.1	1.2	5.3
Only Nonmedical Psychotherapeutics	0.6	1.3	1.8	1.3	1.3
Used "more" illicit drugs[2]	5.4	10.9	9.1	0.9	4.7

[1]Due to rounding, column percents may not total 100.0.

[2]The term "more" means that the respondent's use was not restricted to only marijuana or only the nonmedical use of psychotherapeutics.

[3]Includes persons who had used other drugs in their lifetime. In contrast, past month "marijuana only" user estimates in the Population Estimates were restricted to those who had used only marijuana in their lifetime.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 19. PERCENT REPORTING OPPORTUNITY AND USE[1] IN LIFETIME OF SELECTED DRUGS BY AGE GROUP: 1985

AGE GROUP (YEARS)	MARIJUANA		COCAINE	
	Chance to Use	Ever Used	Chance to Use	Ever Used
12-17	44.9	23.6	13.2	4.9
18-25	78.8	60.3	40.3	25.2
26-34	76.8	58.5	36.5	24.1
35 +	29.5	15.9	8.3	4.2

AGE GROUP (YEARS)	HALLUCINOGENS		HEROIN	
	Chance to Use	Ever Used	Chance to Use	Ever Used
12-17	9.0	3.3	3.8	*
18-25	21.7	11.3	6.4	1.2
26-34	30.5	16.9	12.4	2.6
35 +	7.0	2.4	4.1	0.5

* Less than one-half of one percent.

[1]Ever used in total population is not just among those with the chance to use.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

III. MARIJUANA

Since it was established, the National Institute on Drug Abuse has given considerable attention to marijuana in its epidemiological studies measuring the incidence, prevalence, correlates, and consequences of drug use and abuse. Marijuana has been and continues to be the most widely used illicit drug in this country.

PREVALENCE

As may be seen in table 20, almost one-third of Americans (32.4%) 12 years old and older have used marijuana at least once. The lifetime rates for use of marijuana are approximately 60% among 18-25 year-olds and 26-34 year-olds. Even 23.6% of the 12-17 year-olds have used marijuana; in contrast, the lifetime rate for use of marijuana among persons 35 years old and older is 15.9%, a difference significant at the .001 level. The data in table 21 reveal that almost twenty percent of the 12-17 year-olds used marijuana during the past year, a figure almost as high as the lifetime rate (23.6%). Among the 18-25 year-olds, 36.9% used marijuana during the year preceding the interview, while 25.2% of the 26-34 year-olds used marijuana in the past year. Marijuana was used during the past year by 3.9% of the persons 35 years old and older. Current use of marijuana, as shown in table 22, is limited among persons 35 years old and older (2.3%), whereas it is significantly ($p < .001$) higher among the 12-17 year-olds (12.0%). More 18-25 year-olds (21.8%) than 26-34 year-olds (16.9%) used marijuana in the past month ($p < .001$).

Sex and Race/Ethnicity

Overall, more males than females have tried marijuana ($p < .001$), and there is a similar difference for use in the past month ($p < .001$). The differences by sex are substantially greater in the two older age groups than among the 12-17 and 18-25 year-olds. In the two younger age groups, the rate is not significantly higher for males than females for lifetime use of marijuana. However, among the 18-25 year-olds, the difference by sex for use in the past month (26.5% and 17.1%) is significant at the .001 level, as is the difference among the 26-34 year-olds. Among persons 35 years old and older, males (21.8%) are twice as likely as females (10.9%) to have used marijuana in their lifetime ($p < .001$). While the numbers are smaller among persons 35 years old and older, the ratio (3 to 1) is wider for the past year (males, 6.1%; females, 2.0%; $p < .001$), and the past month (males, 3.3%; females, 1.4%; $p < .05$).

For lifetime use, in each age group, the rates for blacks are significantly lower ($p < .05$) than the rates for whites. This is also the case for Hispanics except in the oldest age category. When comparing blacks with Hispanics, in each case the rate is significantly higher for blacks ($p < .05$) except for the youngest age group.

Region and Adult Education

In each age group, the lifetime rate for use of marijuana is lowest among residents of the South. Among the 12-17 year-olds residing in the South, 18.3% have tried marijuana; the comparable figure in this age group in the West is 29.6% ($p < .001$). Among 18-25 year-olds there is a similar difference; 55.1% of the Southerners have tried marijuana, whereas 65.2% of the residents of the Northeast have done so ($p < .05$). Similarly, use of marijuana in the past month among 12-17 year-olds from the West (16.3%) is almost twice as high as for their counterparts in the South (8.9%), and this difference is significant at the .01 level.

Among the 18-25 year-olds, there are no significant differences in the lifetime rates of marijuana use by educational attainment (table 20). However, this is not the case for use of marijuana in the past month, as the rate of 27.0% for persons who did not complete high school is significantly ($p < .05$) higher than the rate of 14.2% for college graduates. Among persons 35 years old or older, college graduates have significantly ($p < .01$) higher rates of use of marijuana in the past month than do persons who did not complete high school.

MARIJUANA USE BY AGE

As shown in table 23, the lifetime rates for use of marijuana in the age group 12-17 differ rather markedly when the age group is divided into three cohorts ages 12 to 13 (5.8%), 14 to 15 (23.4%), and 16 to 17 (40.4%). The lifetime rates continue to climb for 18-21 year-olds (52.9%) and 22-25 year-olds (66.7%). For persons 35 years old and older, the rates decline and are lower than for persons 18-25 and 26-34 years of age. The escalating pattern of use of marijuana in one's lifetime is not reflected in current use of marijuana for those between 16 and 29 years of age. For the four groups in this age range shown in table 23 the rates are quite similar (between 20.0% and 23.7%).

MARIJUANA USE BY SEX, AGE GROUP, AND RACE/ETHNICITY

The data in table 24 show the relationship of sex, age group, and race/ethnicity to marijuana use. Among 12-17 year old males, although the rates for whites are higher in each instance, the differences in marijuana use for the past year and past month are not significant. For the females in this age group, the rates for the past year and past month are significantly ($p < .05$) higher for whites than for blacks or Hispanics.

Among 18-25 year old males, the lifetime rate for use of marijuana is higher ($p < .01$) among whites than among blacks or Hispanics. Perhaps the most striking pattern among 18-25 year old females is that the three rates of marijuana use are twice as high among whites as among Hispanics ($p < .01$). For 26-34 year old males, the lifetime rate of marijuana use is higher among whites than among blacks or Hispanics ($p < .01$). For use of marijuana during the past month, the rate for black males who are 35 years old or older (11.2%), is significantly higher than the rate for whites (2.5%) ($p < .001$).

FREQUENCY OF LIFETIME USE

The respondents were asked to estimate the number of times they have ever used marijuana (table 25). Perhaps the most interesting figures are in the rows labeled 100 or more times. Approximately one-fifth of the 18-25 (18.8%) and the 26-34 year-olds (19.6%) indicated that they had used marijuana 100 or more times. Many of the people who have tried marijuana have used the drug extensively. Of the 12-17 year-olds who have ever used marijuana, 17.5% have used it 100 times or more. Slightly over 3 in 10 (31.4%) of the 18-25 year-olds who ever used marijuana reported having used it 100 or more times as have one-third (33.5%) of the 26-34 year-olds.

FREQUENCY OF USE DURING THE PAST MONTH

Daily use of marijuana is defined as use of the drug on 20 or more days in the previous month. The data presented in table 26 show that relatively few individuals in the household population of the United States are daily users of marijuana. Among the 12-17 year-olds, 2.1% reported use of marijuana on 20 or more days in the past month. The highest percentage is found among 18-25 year-olds; 4.7% of them used marijuana on 20 or more of the previous 30 days. The comparable figure for 26-34 year-olds is 3.6%, and less than one-half of one percent of persons 35 years old and older reported daily use of the drug. Nevertheless, a substantial proportion of the current users reported smoking marijuana on a daily basis. In each age group, approximately 20% to 23% of the current users used marijuana on 20 or more days in the previous month.

USE IN PAST MONTH OF MARIJUANA AND OTHER DRUGS

Because only 51 persons 35 years old or older were current users of marijuana, attention is focused on the younger age groups. Table 27 reveals a strong relationship between current use of marijuana and use of other drugs. Almost twice as many persons 18-25 years old who were current marijuana users smoked cigarettes (59.7%) in the past month than did nonusers (30.2%). For marijuana and cocaine, the relationship is also striking. Again, among 18-25 year-olds, 27.4% of the current users of marijuana were current users of cocaine in comparison with only 2.2% of the persons in this age group who did not use marijuana in the past month. This pattern is found in each of the other age groups. Current users of marijuana are considerably more likely to be current users of other drugs, both licit and illicit, than persons not currently using marijuana.

TABLE 20. PERCENT REPORTING MARIJUANA USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	23.6	60.3	58.5	15.9	32.4
SEX					
Male	25.4	62.7	67.3	21.8	38.3
Female	21.6	57.8	50.1	10.9	27.0
RACE/ETHNICITY[1]					
White	24.8	64.7	62.7	15.9	33.5
Black	19.4	49.9	53.9	21.1	33.0
Hispanic	19.6	41.5	32.5	12.0	23.5
POPULATION DENSITY					
Large Metro	26.8	60.2	59.9	21.0	37.4
Small Metro	25.1	63.3	61.6	16.7	34.0
Nonmetro	20.2	56.3	54.1	12.8	28.2
REGION					
Northeast	28.3	65.2	60.0	18.9	35.6
North Central	20.8	62.6	62.7	14.9	33.5
South	18.3	55.1	51.8	11.3	26.6
West	29.6	59.7	63.2	21.6	37.3
ADULT EDUCATION					
Less than high school	N/A	61.8	48.9	7.3	20.4
High school graduate	N/A	61.6	56.9	14.0	34.3
Some college	N/A	55.4	58.4	19.0	37.9
College graduate	N/A	63.0	66.2	30.4	44.6
CURRENT EMPLOYMENT					
Full-time	51.8	62.5	62.8	25.4	43.0
Part-time	24.5	48.7	55.3	16.4	32.0
Unemployed	49.0	70.3	58.8	16.3	47.4
Other	18.7	57.7	43.6	4.3	15.2

[1]In this table and in subsequent tables the category "Other" for RACE/ETHNICITY is not included.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 21. PERCENT REPORTING MARIJUANA USE IN THE PAST YEAR BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	19.7	36.9	25.2	3.9	15.3
SEX					
Male	20.7	42.3	33.0	6.1	19.5
Female	18.7	31.5	17.7	2.0	11.5
RACE/ETHNICITY					
White	21.1	39.3	26.2	3.5	15.4
Black	15.2	33.1	27.7	7.9	17.9
Hispanic	15.6	23.6	14.1	3.2	11.5
POPULATION DENSITY					
Large Metro	23.2	38.9	32.1	6.4	20.0
Small Metro	21.3	38.7	26.1	3.7	15.8
Nonmetro	16.2	33.3	20.3	3.0	12.5
REGION					
Northeast	23.8	36.9	26.3	5.1	16.6
North Central	16.9	37.6	26.1	3.3	15.5
South	15.3	35.9	21.0	3.1	13.1
West	25.3	37.4	29.9	4.2	17.5
ADULT EDUCATION					
Less than high school	N/A	41.2	21.8	1.6	9.9
High school graduate	N/A	35.0	25.2	2.9	15.2
Some college	N/A	39.4	27.6	5.0	19.0
College graduate	N/A	32.2	24.9	8.1	15.8
CURRENT EMPLOYMENT					
Full-time	48.6	37.0	27.1	6.6	18.6
Part-time	22.2	29.8	21.4	2.4	16.6
Unemployed	33.9	52.1	38.1	4.8	31.4
Other	15.0	32.9	15.8	0.8	7.6

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 22. PERCENT REPORTING MARIJUANA USE IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	12.0	21.8	16.9	2.3	9.4
SEX					
Male	13.3	26.5	22.4	3.3	12.3
Female	10.6	17.1	11.5	1.4	6.8
RACE/ETHNICITY					
White	13.0	22.2	17.0	1.8	9.1
Black	8.2	23.9	22.5	6.0	13.1
Hispanic	9.1	15.0	10.3	1.9	7.4
POPULATION DENSITY					
Large Metro	14.4	22.1	20.6	4.1	12.3
Small Metro	14.0	23.9	17.6	2.0	10.0
Nonmetro	8.3	18.8	13.9	1.8	7.4
REGION					
Northeast	13.0	19.9	18.0	3.8	10.2
North Central	11.4	22.7	17.3	1.4	9.4
South	8.9	21.4	15.2	1.4	8.0
West	16.3	23.4	17.7	2.8	10.9
ADULT EDUCATION					
Less than high school	N/A	27.0	14.9	0.9	6.4
High school graduate	N/A	21.3	18.2	1.8	9.9
Some college	N/A	22.2	17.2	3.2	11.3
College graduate	N/A	14.2	15.7	4.5	8.9
CURRENT EMPLOYMENT					
Full-time	34.4	23.5	17.7	3.7	11.7
Part-time	11.0	15.2	19.5	2.4	10.2
Unemployed	25.6	33.2	27.3	4.8	21.5
Other	9.3	14.3	8.4	*	4.0

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 23. PERCENT REPORTING MARIJUANA USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE: 1985

AGE	(Unweighted N)	Lifetime	Past Year	Past Month
TOTAL	(8,038)	32.4	15.3	9.4
12-17 YEARS OLD		23.6	19.7	12.0
12-13	(686)	5.8	4.8	3.5
14-15	(811)	23.4	20.4	11.0
16-17	(749)	40.4	33.1	21.0
18-25 YEARS OLD		60.3	36.9	21.8
18-21	(844)	52.9	38.6	23.7
22-25	(969)	66.7	35.3	20.0
26-34 YEARS OLD		58.5	25.2	16.9
26-29	(990)	62.0	29.4	20.6
30-34	(1,176)	55.8	21.9	13.9
35 YEARS AND OLDER		15.9	3.9	2.3
35-39	(324)	40.2	11.7	7.8
40-44	(208)	26.3	4.0	1.9
45-49	(178)	16.4	6.5	3.5
50 +	(1,103)	5.6	0.7	*

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 24. PERCENT REPORTING MARIJUANA USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE GROUP, RACE/ETHNICITY, AND SEX: 1985

RACE/ETHNICITY AND SEX	AGE GROUP (YEARS) 12-17	18-25	26-34	35+	Total
		(UNWEIGHTED N's)			
White Male	(523)	(368)	(458)	(453)	(1,802)
Black Male	(271)	(184)	(183)	(135)	(773)
Hispanic Male	(317)	(236)	(206)	(125)	(884)
White Female	(470)	(426)	(624)	(627)	(2,147)
Black Female	(319)	(277)	(316)	(260)	(1,172)
Hispanic Female	(310)	(292)	(328)	(182)	(1,112)
		A. USED MARIJUANA IN LIFETIME			
White Male	25.4	65.2	71.8	21.4	38.9
Black Male	24.3	56.9	57.9	30.1	40.1
Hispanic Male	22.0	52.4	45.2	20.3	32.8
White Female	24.2	64.2	53.9	11.1	28.4
Black Female	14.5	43.8	50.5	14.1	27.1
Hispanic Female	17.3	30.0	19.7	4.8	14.6
		B. USED MARIJUANA IN PAST YEAR			
White Male	21.1	44.0	34.0	5.2	19.1
Black Male	18.1	40.1	34.7	14.6	24.4
Hispanic Male	17.9	30.3	23.0	5.4	16.4
White Female	21.2	34.7	18.5	2.0	12.0
Black Female	12.3	27.0	21.7	2.8	12.5
Hispanic Female	13.2	16.6	5.1	1.2	6.8
		C. USE OF MARIJUANA IN PAST MONTH			
White Male	13.7	26.1	22.1	2.5	11.5
Black Male	10.9	31.7	28.6	11.2	18.7
Hispanic Male	11.2	20.2	18.2	2.6	11.0
White Female	12.2	18.3	11.9	1.3	6.9
Black Female	5.5	17.2	17.2	2.0	8.4
Hispanic Female	7.0	9.6	2.5	1.2	3.9

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 25. PERCENT DISTRIBUTION OF FREQUENCY OF MARIJUANA USE IN LIFETIME BY AGE GROUP FOR TOTAL SAMPLE AND FOR MARIJUANA USERS: 1985[1]

LIFETIME FREQUENCY OF MARIJUANA USE	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
		A. TOTAL SAMPLE			
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
None	76.6	39.9	41.5	84.2	67.7
1-2 times	6.5	11.1	10.6	6.2	7.9
3-10 times	7.2	15.6	13.6	4.9	8.7
11-99 times	5.6	14.5	14.7	2.1	7.0
100 times or more	4.1	18.8	19.6	2.6	8.8
		B. USED MARIJUANA AT LEAST ONCE[2]			
(Unweighted N)	(491)	(967)	(1,111)	(276)	(2,845)
1-2 times	27.8	18.4	18.1	39.3	24.5
3-10 times	31.0	26.0	23.2	31.2	26.8
11-99 times	23.8	24.2	25.2	13.1	21.6
100 times or more	17.5	31.4	33.5	16.4	27.1

[1]Due to rounding, column percents may not total 100.0. The percents for "None" differ slightly from those that may be inferred from table 20 because of missing data for some users on number of times used. See Section C of the Methods Appendix.

[2]Includes only those who report using marijuana at some time in their lifetime.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 26. PERCENT DISTRIBUTION OF DAYS OF MARIJUANA USE IN PAST MONTH BY AGE GROUP FOR TOTAL SAMPLE AND FOR PAST MONTH MARIJUANA USERS: 1985[1]

DAYS OF MARIJUANA USE IN PAST MONTH	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
		A. TOTAL SAMPLE			
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
None	89.7	79.8	83.9	97.9	91.2
1-2 days	4.3	7.0	4.9	0.7	2.9
3-4 days	1.5	2.6	2.2	*	1.2
5-19 days	2.4	6.0	5.4	0.7	2.7
20-30 days	2.1	4.7	3.6	*	1.9
		B. USED MARIJUANA IN PAST MONTH[2]			
(Unweighted N)	(237)	(361)	(335)	(51)	(984)
1-2 days	41.7	34.5	30.4	30.8	33.6
3-4 days	14.5	12.8	14.0	17.1	14.0
5-19 days	23.4	29.5	33.6	31.8	30.4
20-30 days	20.4	23.2	22.0	20.4	22.0

* Less than one-half of one percent.

[1]Due to rounding, column percents may not total 100.0. The percents for "None" differ slightly from those that may be inferred from table 22 because of missing data for some past month users on number of days used. See Section C of the Methods Appendix.

[2]Includes only those who report using marijuana in the past month.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 27. PERCENT REPORTING USE OF SELECTED DRUGS IN PAST MONTH BY AGE GROUP AND MARIJUANA USE IN PAST MONTH: 1985

DRUGS USED IN PAST MONTH	MARIJUANA USE IN PAST MONTH		
	No	Yes	Total
TOTAL	90.6	9.4	
12-17 YEARS OLD	88.0	12.0	
Alcohol	23.9	83.8	31.0
Cigarettes	9.1	61.0	15.3
Nonmedical Use of Any Psychotherapeutic	1.3	15.8	3.0
Cocaine	*	10.5	1.5
18-25 YEARS OLD	78.2	21.8	
Alcohol	65.3	93.3	71.4
Cigarettes	30.2	59.7	36.8
Nonmedical Use of Any Psychotherapeutic	2.2	21.7	6.3
Cocaine	2.2	27.4	7.6
26-34 YEARS OLD	83.1	16.9	
Alcohol	65.1	94.1	70.0
Cigarettes	35.8	62.4	40.3
Nonmedical Use of Any Psychotherapeutic	2.7	18.5	5.3
Cocaine	1.3	29.7	6.1
35 YEARS AND OLDER	97.7	2.3	
Alcohol	56.7	76.6	57.3
Cigarettes	29.8	46.4	30.1
Nonmedical Use of Any Psychotherapeutic	1.3	12.6	1.5
Cocaine	*	20.6	0.5

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

IV. COCAINE

Although use of cocaine is not a new phenomenon in the United States, its use became more widespread in the late 1970s and early 1980s. As larger and larger quantities of cocaine are seized and the role of cocaine in drug-related medical emergencies increases, general concern about cocaine has reached new heights.

PREVALENCE

Of all U.S. residents 12 years old and older, some 11.6% have tried cocaine, 6.3% used it one or more times in the past year, and 2.9% used cocaine in the month preceding the interview. As may be seen in tables 28, 29, and 30, the findings are consistent for the three measures of cocaine use. Whether one considers use of cocaine in one's lifetime, the past year, or the past month, the rates are higher among the 18-25 and the 26-34 year-olds than among persons in the youngest or oldest age categories. Some 25.2% of the 18-25 year-olds and 24.1% of the 26-34 year-olds have tried cocaine; in comparison, 4.9% of the 12-17 year-olds and 4.2% of those 35 years old and older have used cocaine. The difference between the 18-25 and 26-34 year-olds is not significant, but the other differences are significant at the .001 level.

Use of cocaine in the past year was reported by 16.3% of the 18-25 and 12.6% of the 26-34 year-olds ($p < .05$). Further, some 7.6% and 6.1% respectively of the persons in these age groups used cocaine in the past month, although this difference is not statistically significant. The rates of use of cocaine in the past year and the past month for the 12-17 year-olds and for persons 35 years old and older are not nearly as high. A total of 4.0% of the 12-17 year-olds reported that they used cocaine during the preceding year, and 1.5% of them reported use during the preceding month. Only one-half of one percent of the persons 35 and older used cocaine in the past month.

Sex

Among 12-17 year-olds, significantly more males than females have tried cocaine ($p < .05$). Among 18-25 year-olds, 28.7% of the males in comparison with 21.6% of the females have tried cocaine ($p < .01$). Similarly, the lifetime rates among the 26-34 year-olds are 30.0% for males and 18.4% for females ($p < .001$) and among persons 35 years old and older the comparable rates are 7.2% and 1.7% ($p < .001$).

Race/Ethnicity

Differences by race/ethnicity in the use of cocaine are not as clear as the differences between males and females. Among the 18-25 year-olds, the use of cocaine in one's lifetime is higher among whites (28.3%) than among either Hispanics (15.0%) or blacks (13.4%) ($p <.001$). In this age group the rates for blacks and Hispanics are quite similar.

Among the 26-34 year old respondents, the lifetime rates for cocaine are higher for whites (27.0%) than for blacks (17.2%) or Hispanics (9.8%), $p < .001$ for each of the two comparisons.

Region

There is a tendency for those from the South to have lower rates for lifetime cocaine use. However, in most instances, the rates for the South and the North Central states are similar. The lifetime, past year, and past month rates for use of cocaine are highest in the West (though not always significantly higher) for persons under 35 years of age. For lifetime and past month use among persons 35 years of age and older, rates are higher in the Northeast, though not significantly.

Adult Education

There is no clear relationship between educational attainment and use of cocaine. The lowest rate for lifetime use of cocaine among 26-34 year-olds is found among those with less than a high school education (14.5%), and this rate is significantly ($p < .05$) lower than the rate for persons who completed high school (23.0%) or college (25.4%) and for persons with some college training (30.1%).

COCAINE USE BY AGE

The data in table 31 show that the highest rates of use of cocaine are reported by persons 18 to 34 years old. There is almost a doubling in the percentage reporting lifetime, past year, or past month use of cocaine between the 14-15 and 16-17 age groupings and between the 16-17 and the 18-21 age groupings.

COCAINE USE BY SEX, AGE GROUP, AND RACE/ETHNICITY

Table 32 shows that the lifetime rates of cocaine use among 18-25 year old blacks and Hispanics, male or female, are consistently lower than the rate for whites ($p < .001$). The lifetime rate of cocaine use for 26-34 year old white males (33.3%) is twice as high as the rate (13.4%) for Hispanic males ($p < .001$) and is also significantly higher than the rate (23.5%) for black males ($p < .05$). A similar pattern exists among females, and the lifetime rate of cocaine use for 26-34 year old white females is three times as high as the comparable rate for Hispanic females ($p < .001$).

FREQUENCY OF LIFETIME USE

The figures in Section A of table 33 show that 4.0% of the total sample have used cocaine more than 10 times, while 7.4% have used it 10 times or less. Use of cocaine more than 10 times is concentrated among the 18-25 year-olds (7.7%) and 26-34 year-olds (10.3%). Approximately 1% of the 12-17 year-olds and those 35 years old and older reported use

of cocaine more than 10 times. Some 35.0% (see totals column) of the more than 22 million Americans who have ever used cocaine reported having used it more than 10 times. Among the 26-34 year-olds who have ever used cocaine, 30.6% have used it between 11 and 99 times, and 12.3% have used it 100 or more times. In each age group, at least 20% of all respondents who have used cocaine reported using it more than 10 times.

ROUTES OF ADMINISTRATION OF COCAINE

In the 1985 survey, data were obtained about the ways cocaine is used (sniffing, swallowing, smoking/freebasing, or injecting). Freebasing involves processing of cocaine to eliminate impurities and to free the more potent cocaine base, which is then smoked. In table 34 the data show that almost all (94.7%) users have snorted cocaine. The most striking finding is that 45.9% of the 12-17 year-old users of cocaine have freebased in comparison with approximately 20% of the cocaine users in the other age groups. Injection of cocaine is somewhat higher among users in the oldest age group.

TABLE 28. PERCENT REPORTING COCAINE USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	4.9	25.2	24.1	4.2	11.6
SEX					
Male	6.2	28.7	30.0	7.2	15.3
Female	3.5	21.6	18.4	1.7	8.2
RACE/ETHNICITY					
White	5.1	28.3	27.0	4.0	12.4
Black	2.9	13.4	17.2	7.6	9.9
Hispanic	6.3	15.0	9.8	2.9	7.3
POPULATION DENSITY					
Large Metro	5.6	26.8	30.1	6.0	15.0
Small Metro	5.7	27.2	24.7	4.3	12.2
Nonmetro	3.6	21.6	20.0	3.4	9.4
REGION					
Northeast	5.9	26.2	23.5	6.7	13.1
North Central	3.7	22.8	21.6	2.8	10.2
South	2.7	22.2	20.0	3.4	9.4
West	8.6	31.2	34.4	4.1	15.3
ADULT EDUCATION					
Less than high school	N/A	28.0	14.5	1.3	6.9
High school graduate	N/A	24.3	23.0	2.7	12.1
Some college	N/A	24.8	30.1	6.4	16.9
College graduate	N/A	25.0	25.4	9.7	16.1
CURRENT EMPLOYMENT					
Full-time	12.3	27.5	26.2	7.1	16.2
Part-time	3.6	17.5	23.6	2.6	9.6
Unemployed	13.4	32.1	26.9	5.0	20.0
Other	4.2	20.0	15.3	1.0	4.5

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 29. PERCENT REPORTING COCAINE USE IN THE PAST YEAR BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	4.0	16.3	12.6	1.2	6.3
SEX					
Male	5.2	20.2	17.1	1.6	8.4
Female	2.9	12.5	8.3	0.8	4.4
RACE/ETHNICITY					
White	4.2	17.7	13.8	0.9	6.4
Black	2.4	10.6	10.4	3.7	6.2
Hispanic	5.8	12.4	6.2	1.0	5.1
POPULATION DENSITY					
Large Metro	5.5	17.2	17.8	3.2	9.2
Small Metro	4.8	17.9	12.9	1.0	6.5
Nonmetro	2.5	13.8	9.4	0.5	4.5
REGION					
Northeast	5.0	18.8	16.0	1.8	7.7
North Central	2.8	13.2	9.9	0.6	4.9
South	2.1	12.5	8.7	0.7	4.2
West	7.4	23.0	17.8	2.0	9.4
ADULT EDUCATION					
Less than high school	N/A	16.8	7.5	*	3.7
High school graduate	N/A	16.1	11.1	0.8	6.6
Some college	N/A	18.4	16.6	2.1	9.8
College graduate	N/A	12.0	14.0	2.3	6.9
CURRENT EMPLOYMENT					
Full-time	9.9	18.3	13.6	2.1	8.5
Part-time	3.5	9.6	13.3	*	5.3
Unemployed	11.3	22.2	14.6	0.7	12.4
Other	3.2	12.3	7.4	*	2.5

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 30. PERCENT REPORTING COCAINE USE IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.5	7.6	6.1	0.5	2.9
SEX					
Male	2.0	9.0	8.6	0.7	3.9
Female	1.0	6.3	3.8	*	2.0
RACE/ETHNICITY					
White	1.5	8.1	6.7	*	3.0
Black	1.0	6.4	5.2	1.6	3.2
Hispanic	2.5	6.6	2.7	*	2.4
POPULATION DENSITY					
Large Metro	1.6	5.6	11.2	1.9	4.6
Small Metro	1.8	8.9	5.3	*	2.8
Nonmetro	1.1	7.2	4.3	*	2.3
REGION					
Northeast	2.2	7.8	6.6	1.2	3.5
North Central	0.8	8.0	4.8	*	2.6
South	0.5	3.9	3.4	*	1.4
West	3.0	12.9	11.3	0.7	5.2
ADULT EDUCATION					
Less than high school	N/A	9.5	4.2	*	2.1
High school graduate	N/A	8.0	5.6	0.7	3.4
Some college	N/A	7.8	7.8	0.8	4.3
College graduate	N/A	3.2	6.4	*	2.4
CURRENT EMPLOYMENT					
Full-time	8.0	7.6	6.8	1.0	4.0
Part-time	0.8	3.9	6.9	*	2.2
Unemployed	0.8	13.6	3.1	0.7	6.0
Other	1.2	7.4	3.8	*	1.2

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 31. PERCENT REPORTING COCAINE USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE: 1985

AGE	(Unweighted N)	Lifetime	Past Year	Past Month
TOTAL	(8,038)	11.6	6.3	2.9
12-17 YEARS OLD		4.9	4.0	1.5
12-13	(686)	0.5	0.5	*
14-15	(811)	4.6	4.1	1.0
16-17	(749)	9.4	7.4	3.2
18-25 YEARS OLD		25.2	16.3	7.6
18-21	(844)	22.4	17.0	9.2
22-25	(969)	27.5	15.7	6.3
26-34 YEARS OLD		24.1	12.6	6.1
26-29	(990)	26.7	15.2	8.4
30-34	(1,176)	22.1	10.5	4.3
35 YEARS AND OLDER		4.2	1.2	0.5
35-39	(324)	13.1	4.4	1.4
40-44	(208)	3.2	0.7	*
45-49	(178)	3.2	1.6	1.4
50 +	(1,103)	1.8	*	*

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 32. PERCENT REPORTING COCAINE USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE GROUP, RACE/ETHNICITY, AND SEX: 1985

RACE/ETHNICITY AND SEX	AGE GROUP (YEARS) 12-17	18-25	26-34	35+	Total
			(UNWEIGHTED N's)		
White Male	(523)	(368)	(458)	(453)	(1,802)
Black Male	(271)	(184)	(183)	(135)	(773)
Hispanic Male	(317)	(236)	(206)	(125)	(884)
White Female	(470)	(426)	(624)	(627)	(2,147)
Black Female	(319)	(277)	(316)	(260)	(1,172)
Hispanic Female	(310)	(292)	(328)	(182)	(1,112)
	A. USED COCAINE IN LIFETIME				
White Male	6.2	31.8	33.3	6.8	16.0
Black Male	4.5	16.3	23.5	14.1	14.8
Hispanic Male	8.5	18.3	13.4	4.8	10.1
White Female	4.0	24.8	20.9	1.6	9.0
Black Female	1.2	11.0	11.7	2.4	5.7
Hispanic Female	4.1	11.5	6.2	1.2	4.6
	B. USED COCAINE IN PAST YEAR				
White Male	5.2	21.7	18.4	1.2	8.4
Black Male	3.8	14.3	14.9	5.5	8.9
Hispanic Male	7.8	15.2	9.5	1.9	7.3
White Female	3.2	13.8	9.3	0.8	4.6
Black Female	1.0	7.4	6.4	2.2	3.9
Hispanic Female	3.8	9.3	2.8	*	3.1
	C. USED COCAINE IN PAST MONTH				
White Male	2.0	9.4	9.2	0.6	3.9
Black Male	1.3	7.7	7.7	2.2	4.2
Hispanic Male	2.7	7.8	4.5	*	3.2
White Female	1.0	6.8	4.2	*	2.1
Black Female	0.7	5.3	3.0	1.2	2.3
Hispanic Female	2.2	5.4	1.0	*	1.6

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 33. PERCENT DISTRIBUTION OF FREQUENCY OF COCAINE USE IN LIFETIME BY AGE GROUP FOR TOTAL SAMPLE AND FOR COCAINE USERS: 1985[1]

LIFETIME FREQUENCY OF COCAINE USE	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
		A. TOTAL SAMPLE			
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
None	95.2	75.1	76.0	96.1	88.6
1-2 times	1.9	7.3	6.3	1.8	3.6
3-10 times	1.8	9.9	7.4	0.9	3.8
11-99 times	0.8	6.0	7.3	1.0	3.1
100 times or more	*	1.7	3.0	*	0.9
		B. USED COCAINE AT LEAST ONCE[2]			
(Unweighted N)	(107)	(373)	(425)	(76)	(981)
1-2 times	38.9	29.4	26.3	46.8	31.8
3-10 times	37.2	39.7	30.8	24.1	33.2
11-99 times	17.6	24.2	30.6	26.6	26.8
100 times or more	6.3	6.6	12.3	2.6	8.2

[1]Due to rounding, column percents may not total 100.0. The percents for "None" differ slightly from those that may be inferred from table 28 because of missing data for some users on number of times used See Section C of the Methods Appendix.

[2]Includes only those who report using cocaine at some time in their lifetime.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 34. PERCENT REPORTING COCAINE ROUTES OF ADMINISTRATION EVER USED BY AGE GROUP FOR TOTAL SAMPLE, USERS ONLY, AND THOSE WHO HAVE USED ELEVEN OR MORE TIMES: 1985[1]

ROUTE OF ADMINISTRATION	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
A. TOTAL SAMPLE					
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
Sniff/Snort	4.1	22.5	22.2	2.6	9.9
Freebase/Smoke	2.1	5.0	4.4	0.6	2.2
Swallow/Oral	0.9	3.0	3.4	*	1.3
IV/Inject	*	1.3	1.8	*	0.8
Other	*	*	*	*	*
B. USED COCAINE AT LEAST ONCE					
(Unweighted N)	(107)	(373)	(425)	(76)	(981)
Sniff/Snort	87.9	95.3	95.8	92.4	94.7
Freebase/Smoke	45.9	21.0	18.9	19.9	21.2
Swallow/Oral	18.8	12.5	14.6	1.0	12.1
IV/Inject	3.1	5.6	8.0	12.7	7.5
Other	1.2	1.0	1.0	*	0.9
C. USED COCAINE ELEVEN OR MORE TIMES					
(Unweighted N)	(18)	(125)	(162)	(19)	(324)
Sniff/Snort	100.0	98.9	96.6	75.8	94.9
Freebase/Smoke	88.8	43.8	29.5	55.7	39.4
Swallow/Oral	39.9	16.8	24.5	*	19.5
IV/Inject	12.6	13.1	16.0	32.5	17.0
Other	*	1.9	1.2	*	1.2

* Less than one-half of one percent.

[1]Some column percents total more than 100.0 because multiple routes of administration could be indicated by the same respondent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

V. INHALANTS, HALLUCINOGENS, PCP, AND HEROIN

INHALANTS

The respondents were asked to identify each of the substances they had ever sniffed or inhaled for "kicks" or to "get high" and which ones they had used during the preceding month for these purposes. Amyl nitrites are the most widely used inhalants, particularly among those 18-25 and 26-34 years old (table 35). Shown in table 36 are the lifetime prevalence rates for the four most widely used inhalants by age group and race/ethnicity. The four most widely used inhalants are amyl nitrites, nitrous oxide, gasoline, and glue. Hispanics have the highest rate only for use of glue among 12-17 year-olds. Blacks have the highest rate only for gasoline and glue among the 26-34 year-olds and for amyl nitrites among persons 35 years old and older. For amyl nitrites and nitrous oxide among those 18-25 and 26-34 years old, the rates for whites are substantially higher than those for blacks and Hispanics ($p < .001$).

Prevalence of Use of Inhalants

Some 9.2% of the 12-17 year-olds, 12.4% of the 18-25 year-olds, 10.1% of the 26-34 year-olds, and 3.2% of those 35 years of age and older have used inhalants at some time during their life (table 37). While more males than females have used inhalants, the difference is not significant among the 12-17 year-olds. However, almost twice as many males as females in the 18-25 and 26-34 year old age groups have used inhalants ($p < .01$). Among persons 35 years old and older, the numbers are not large, but the rates of 4.8% for males and 1.8% for females are significantly different at the .01 level. Among the 18-25 year-olds, significantly ($p < .001$) more whites than blacks used inhalants in their lifetime. Similar differences are observed among the 26-34 year-olds ($p < .05$).

HALLUCINOGENS

Lifetime prevalence rates for LSD, peyote, mescaline, psilocybin, and phencyclidine or PCP by age group are shown in table 38. In each age group, LSD is the most widely used hallucinogen; second in prevalence is mescaline in the two older age groups and psilocybin and PCP in the two younger age groups. Tables 39, 40, and 41 show the lifetime, past year, and past month prevalence of use of any hallucinogens. For the lifetime rates, there is a clear sex difference in use of hallucinogens: males are more likely than females to have used them ($p < .001$). With the exception of persons 35 years old or older, more whites than blacks or Hispanics have ever used hallucinogens ($p < .05$).

USE OF PCP

For PCP (table 42), the lifetime rates are significantly ($p < .001$) higher among the 18-25 and 26-34 year-olds than among the youngest and oldest respondents, and there are sizable sex differences in these age groups ($p < .01$). Also, in these age groups, whites are substantially ($p < .05$) more likely to have used PCP than blacks or Hispanics. Perhaps the most striking finding is that 12.0% of the 18-25 year-olds who did not complete high school reported use of PCP, a figure much higher than the rates for persons with more education ($p < .01$).

HEROIN

While there are some differences shown in table 43 for the use of heroin, they should be viewed cautiously because they are based on a restricted number of users. The lifetime rate for use of heroin among 18-25 year-olds is 1.2%, while it is 2.6% among 26-34 year-olds. The highest lifetime rate of heroin use among 18-25 year-olds is found among persons who did not finish high school (3.8%), and this is significantly ($p < .01$) higher than the rates of 0.9% for high school graduates and less than one-half of one percent for respondents who attended college.

TABLE 35. PERCENT REPORTING INHALANT USE IN LIFETIME BY INHALANT TYPE AND AGE GROUP: 1985

	AGE GROUP (YEARS)				
INHALANT TYPE	12-17	18-25	26-34	35 +	Total
Gasoline	3.6	2.4	1.9	*	1.3
Spray paints	1.4	0.6	0.5	*	*
Aerosol sprays	0.8	0.8	0.7	0.5	0.6
Glue	2.9	1.3	1.7	0.5	1.1
Lacquer thinners	1.0	0.8	0.5	*	0.5
Amyl Nitrites	2.5	7.0	5.0	1.1	3.0
Ether	*	*	*	*	*
Nitrous oxide	1.0	3.3	3.4	*	1.4
Correction fluids	0.8	*	*	*	*

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 36. PERCENT REPORTING USE OF SELECTED INHALANTS IN LIFETIME BY AGE GROUP AND RACE/ETHNICITY: 1985

	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
Gasoline	3.6	2.4	1.9	*	1.3
White	4.2	2.6	1.9	*	1.4
Black	1.9	1.6	2.0	*	1.0
Hispanic	1.5	1.5	0.7	*	0.7
Glue	2.9	1.3	1.7	0.5	1.1
White	3.1	1.4	1.7	0.5	1.2
Black	1.6	1.0	2.8	*	1.1
Hispanic	3.7	1.4	0.6	*	1.0
Amyl nitrites	2.5	7.0	5.0	1.1	3.0
White	2.9	8.1	5.9	1.1	3.3
Black	1.6	1.1	1.8	1.7	1.6
Hispanic	1.5	3.0	0.7	0.8	1.3
Nitrous oxide	1.0	3.3	3.4	*	1.4
White	1.3	4.2	4.1	*	1.7
Black	*	*	*	*	*
Hispanic	*	*	*	*	*

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 37. PERCENT REPORTING INHALANT USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	9.2	12.4	10.1	3.2	6.8
SEX					
Male	10.0	15.8	13.2	4.8	9.0
Female	8.4	9.1	7.1	1.8	4.7
RACE/ETHNICITY					
White	10.1	14.1	11.3	3.2	7.2
Black	5.6	4.9	6.8	3.8	4.9
Hispanic	7.7	7.1	2.8	3.2	4.6
POPULATION DENSITY					
Large Metro	9.7	14.9	10.2	6.8	9.4
Small Metro	10.3	14.0	11.8	3.2	7.4
Nonmetro	7.8	9.0	8.1	1.6	4.7
REGION					
Northeast	8.2	12.4	8.8	5.6	7.6
North Central	7.6	15.7	10.5	2.9	7.2
South	9.4	11.0	8.9	1.9	5.5
West	12.0	10.8	13.4	2.8	7.4
ADULT EDUCATION					
Less than high school	N/A	13.9	7.0	0.9	3.6
High school graduate	N/A	13.3	9.5	3.1	6.8
Some college	N/A	10.2	10.8	4.8	7.6
College graduate	N/A	11.3	12.1	5.6	8.2
CURRENT EMPLOYMENT					
Full-time	12.1	12.7	9.6	5.6	8.2
Part-time	11.5	11.5	11.3	2.2	8.0
Unemployed	8.9	16.3	15.2	2.1	10.5
Other	8.0	9.4	10.0	0.6	3.7

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 38. PERCENT REPORTING USE OF SELECTED HALLUCINOGENS AND ANY HALLUCINOGEN USE IN LIFETIME BY AGE GROUP: 1985

	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
Any Hallucinogen	3.3	11.3	16.9	2.4	6.7
LSD	2.0	8.0	11.9	1.1	4.4
Peyote	0.6	1.8	5.5	*	1.6
Mescaline	0.6	3.8	10.5	0.7	3.0
Psilocybin	1.3	5.2	7.5	*	2.7
PCP	1.1	5.6	7.3	0.6	2.8

*Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 39. PERCENT REPORTING USE OF ANY HALLUCINOGENS[1] IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	3.3	11.3	16.9	2.4	6.7
SEX					
Male	4.3	13.9	21.4	3.7	9.0
Female	2.2	8.6	12.5	1.2	4.6
RACE/ETHNICITY					
White	3.9	12.8	20.1	2.5	7.6
Black	0.9	2.4	4.8	1.9	2.4
Hispanic	1.8	6.3	4.9	1.4	3.2
POPULATION DENSITY					
Large Metro	3.4	13.8	17.7	3.7	8.6
Small Metro	4.5	11.8	18.2	2.4	7.1
Nonmetro	1.8	9.1	14.9	1.8	5.3
REGION					
Northeast	4.4	7.4	15.2	4.1	6.8
North Central	2.2	14.2	16.0	2.0	7.0
South	1.3	9.3	15.0	0.9	4.9
West	6.3	15.6	23.2	3.0	9.5
ADULT EDUCATION					
Less than high school	N/A	18.0	10.0	0.5	4.3
High school graduate	N/A	9.3	14.0	0.9	5.7
Some college	N/A	11.7	21.9	5.2	11.0
College graduate	N/A	7.0	20.2	5.3	9.8
CURRENT EMPLOYMENT					
Full-time	13.2	10.8	18.1	4.1	9.3
Part-time	2.4	10.1	18.3	3.0	6.9
Unemployed	8.6	18.6	14.6	*	10.5
Other	2.3	8.5	11.9	*	2.5

* Less than one-half of one percent.

[1] Main Findings 1985 measure of HALLUCINOGENS differs slightly from that used in Population Estimates 1985. See Key Definitions 1985.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 40. PERCENT REPORTING USE OF ANY HALLUCINOGENS[1] IN THE PAST YEAR BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	2.7	4.0	3.4	*	1.7
SEX					
Male	3.5	6.4	5.3	*	2.6
Female	1.8	1.5	1.6	*	0.8
RACE/ETHNICITY					
White	3.4	4.5	4.0	*	1.9
Black	*	1.4	1.0	*	0.5
Hispanic	1.3	2.3	*	0.5	1.0
POPULATION DENSITY					
Large Metro	3.0	3.7	5.1	0.5	2.4
Small Metro	3.7	4.0	3.2	*	1.7
Nonmetro	1.4	4.0	2.6	*	1.3
REGION					
Northeast	3.9	2.5	3.4	*	1.7
North Central	1.9	5.4	2.3	*	1.6
South	0.9	3.7	2.7	*	1.2
West	5.3	4.5	5.7	*	2.5
ADULT EDUCATION					
Less than high school	N/A	8.8	1.4	*	1.5
High school graduate	N/A	2.7	1.8	*	1.0
Some college	N/A	3.6	6.2	*	2.5
College graduate	N/A	1.7	4.2	*	1.7
CURRENT EMPLOYMENT					
Full-time	8.2	3.0	3.7	*	1.8
Part-time	2.3	3.1	3.7	*	1.9
Unemployed	7.0	11.6	2.2	*	5.4
Other	2.1	2.5	2.4	*	0.8

* Less than one-half of one percent.

[1] Main Findings 1985 measure of HALLUCINOGENS differs slightly from that used in Population Estimates 1985. See Key Definitions 1985.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 41. PERCENT REPORTING USE OF ANY HALLUCINOGENS[1] IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.2	1.9	1.5	*	0.8
SEX					
Male	1.5	3.1	2.1	*	1.1
Female	1.0	0.6	1.0	*	*
RACE/ETHNICITY					
White	1.6	2.2	1.9	*	0.9
Black	*	0.8	*	*	*
Hispanic	0.6	*	*	0.5	0.5
POPULATION DENSITY					
Large Metro	1.2	2.0	0.5	*	0.7
Small Metro	1.8	1.7	1.9	*	0.8
Nonmetro	0.7	2.0	1.7	*	0.7
REGION					
Northeast	1.2	1.0	*	*	*
North Central	1.0	2.4	1.5	*	0.8
South	*	1.9	1.8	*	0.7
West	3.2	2.2	2.5	*	1.2
ADULT EDUCATION					
Less than high school	N/A	3.8	1.0	*	0.7
High school graduate	N/A	1.6	1.3	*	0.6
Some college	N/A	1.8	3.2	*	1.2
College graduate	N/A	*	0.7	*	0.5
CURRENT EMPLOYMENT					
Full-time	5.1	1.1	1.4	*	0.7
Part-time	0.7	2.0	2.3	*	1.0
Unemployed	*	5.7	2.0	*	2.5
Other	1.2	1.4	1.3	*	*

* Less than one-half of one percent.

[1] Main Findings 1985 measure of HALLUCINOGENS differs slightly from that used in Population Estimates 1985. See Key Definitions 1985.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 42. PERCENT REPORTING PCP USE[1] IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.1	5.6	7.3	0.6	2.8
SEX					
Male	1.5	7.4	10.6	0.8	4.0
Female	0.6	3.7	4.2	*	1.7
RACE/ETHNICITY					
White	1.3	6.2	8.6	0.6	3.1
Black	*	1.2	3.3	0.6	1.2
Hispanic	0.8	3.3	1.6	0.5	1.4
POPULATION DENSITY					
Large Metro	1.0	6.9	6.2	1.4	3.4
Small Metro	1.0	5.8	8.3	*	2.9
Nonmetro	1.2	4.5	6.8	*	2.3
REGION					
Northeast	2.1	3.4	5.0	1.2	2.4
North Central	*	7.4	8.2	*	3.0
South	0.9	5.9	7.8	*	2.7
West	0.8	5.6	8.6	0.8	3.2
ADULT EDUCATION					
Less than high school	N/A	12.0	5.0	*	2.5
High school graduate	N/A	5.1	7.1	*	2.8
Some college	N/A	3.8	10.4	0.9	4.0
College graduate	N/A	0.7	6.2	1.6	2.8
CURRENT EMPLOYMENT					
Full-time	5.3	4.7	8.3	1.0	3.7
Part-time	0.7	4.7	5.6	1.0	2.5
Unemployed	3.0	10.8	7.8	*	5.8
Other	0.7	5.8	4.6	*	1.1

* Less than one-half of one percent.

[1] Main Findings 1985 measure of PCP differs slightly from that used in Population Estimates 1985. See Key Definitions 1985.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 43. PERCENT REPORTING HEROIN USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	*	1.2	2.6	0.5	1.0
SEX					
Male	*	1.6	3.6	1.0	1.6
Female	*	0.7	1.5	*	0.5
RACE/ETHNICITY					
White	*	1.1	2.8	*	1.0
Black	*	1.5	1.6	1.6	1.4
Hispanic	*	1.4	2.1	*	0.8
POPULATION DENSITY					
Large Metro	*	2.2	2.4	*	1.2
Small Metro	*	0.6	2.7	1.0	1.1
Nonmetro	*	1.3	2.4	*	0.8
REGION					
Northeast	*	1.1	2.3	0.8	1.1
North Central	*	0.7	2.4	0.7	1.0
South	0.7	1.8	2.9	*	1.1
West	*	0.8	2.6	*	0.8
ADULT EDUCATION					
Less than high school	N/A	3.8	3.1	*	1.1
High school graduate	N/A	0.9	2.1	*	0.9
Some college	N/A	*	4.4	0.5	1.4
College graduate	N/A	*	1.3	1.2	1.1
CURRENT EMPLOYMENT					
Full-time	0.7	0.7	2.2	1.0	1.2
Part-time	*	1.5	3.9	*	1.0
Unemployed	*	2.2	7.6	*	2.3
Other	*	1.6	1.6	*	0.5

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

VI. NONMEDICAL USE OF PSYCHOTHERAPEUTIC DRUGS

Measurement of the nonmedical use of psychotherapeutic drugs poses problems not encountered with the other classes of drugs. Since these drugs are often prescribed for the treatment of a medical condition, to differentiate between medical and nonmedical use, respondents had to interpret their own behavior. In the 1985 survey, respondents used private answer sheets for the questions regarding the nonmedical use of four categories of psychotherapeutic drugs: stimulants, sedatives, tranquilizers, and analgesics. This technique is similar to the one used in 1982; however, the instructions were expanded in 1985 as shown below. In the surveys prior to 1982, respondents verbally answered questions pertaining to the nonmedical use of psychotherapeutic drugs. In the 1985 Survey, the respondent was given a card, and the interviewer stated:

> The next questions will be about prescription-type drugs. There will be separate questions for sedatives, tranquilizers, stimulants, and analgesics. As you can see on this card, sedatives include downers, barbiturates, and Seconal. Tranquilizers include antianxiety drugs like Librium, Valium, Ativan, and Meprobamate. Stimulants include uppers, amphetamines, speed, and Preludin. Analgesics include pain killers like Darvon, Demerol, Percodan, and Tylenol with codeine.
>
> Now, read with me below the line on the card because this is very important. We are interested in the nonmedical use of these prescription-type drugs. <u>Nonmedical use of these drugs is any use on your own, that is, either:</u>
>
> 1. without a doctor's prescription, or
> 2. in greater amounts, or
> 3. more often, or
> 4. for any reasons other than a doctor said that you should take them--such as for kicks, to get high, to feel good, or curiosity about the pill's effect.

This detailed introduction was designed to impress on respondents the intended meaning of nonmedical use of these drugs.

PREVALENCE OF NONMEDICAL USE OF PSYCHOTHERAPEUTIC DRUGS

The nonmedical use of psychotherapeutic drugs is not as common as use of drugs such as marijuana and cocaine. The lifetime rates for the entire sample are: stimulants (9.2%), sedatives (6.0%), tranquilizers (7.7%), and analgesics (6.6%). A composite measure was constructed to assess use of any of the drugs in the four classes of psychotherapeutic drugs. At some time, 15.7% of the respondents have used one or more of these drugs nonmedically. Within each of the four classes of drugs, the rate for the past month is approximately 1% (stimulants, 1.3%;

sedatives, 0.8%; tranquilizers, 1.1%; analgesics, 1.1%), and, according to the composite measure, 3.2% of the respondents used one or more of these drugs in the past month. Clearly, the nonmedical use of psychotherapeutic drugs is most extensive among 18-25 year-olds and 26-34 year-olds (tables 44-53).

While more men than women in each of the three older age groups have used psychotherapeutic drugs for nonmedical reasons, most of the differences are not statistically significant. Among the 12-17 year-olds, the lifetime rates for nonmedical use are similar for males and females for each class of psychotherapeutic drugs. For the composite measure, the only statistically significant difference in lifetime use between males and females is found among the 26-34 year-olds ($p < .05$). Among the 18-25 and 26-34 year olds, significantly more whites reported the nonmedical use of psychotherapeutics in their lifetime than did blacks or Hispanics ($p < .001$). The racial/ethnic differential is substantial, as the rate for whites among the 26-34 year-olds is 30.5% in comparison with a rate of 14.1% for blacks and 15.0% for Hispanics ($p < .001$).

TABLE 44. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE STIMULANTS IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	5.6	17.1	18.3	4.2	9.2
SEX					
Male	5.4	18.6	22.2	5.6	11.1
Female	5.7	15.6	14.5	3.1	7.5
RACE/ETHNICITY					
White	6.5	19.5	21.1	4.5	10.2
Black	2.1	7.2	7.8	3.1	4.7
Hispanic	4.5	7.2	5.7	2.8	4.6
POPULATION DENSITY					
Large Metro	5.1	16.5	20.7	6.7	11.4
Small Metro	6.4	18.7	18.2	4.6	9.8
Nonmetro	4.8	15.3	16.9	2.6	7.5
REGION					
Northeast	8.7	12.0	14.7	4.1	8.0
North Central	3.5	20.6	18.9	3.1	9.4
South	4.1	14.0	16.1	2.0	6.8
West	6.4	24.0	25.6	9.6	14.9
ADULT EDUCATION					
Less than high school	N/A	20.3	13.8	2.3	6.4
High school graduate	N/A	18.0	18.3	2.4	9.4
Some college	N/A	15.8	20.6	4.8	11.4
College graduate	N/A	11.4	18.5	10.1	12.7
CURRENT EMPLOYMENT					
Full-time	7.4	19.1	18.8	6.7	12.3
Part-time	6.8	13.8	18.4	6.1	10.0
Unemployed	17.7	20.1	16.9	2.9	13.3
Other	4.0	11.0	16.7	0.9	3.8

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 45. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE STIMULANTS IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.6	3.7	2.2	*	1.3
SEX					
Male	2.0	5.6	2.9	*	1.9
Female	1.3	1.8	1.6	*	0.8
RACE/ETHNICITY					
White	2.0	4.2	2.6	*	1.4
Black	*	*	0.6	*	*
Hispanic	0.7	1.5	0.9	*	0.6
POPULATION DENSITY					
Large Metro	1.8	1.5	3.6	*	1.3
Small Metro	2.0	5.6	2.0	*	1.6
Nonmetro	1.2	2.6	1.8	*	1.0
REGION					
Northeast	2.3	3.2	0.9	*	1.0
North Central	0.9	5.8	2.3	*	1.8
South	1.2	2.2	2.0	*	0.9
West	2.4	4.3	4.3	*	2.0
ADULT EDUCATION					
Less than high school	N/A	3.9	3.5	*	1.0
High school graduate	N/A	3.7	2.3	*	1.5
Some college	N/A	4.7	1.8	*	1.7
College graduate	N/A	1.0	1.9	*	0.6
CURRENT EMPLOYMENT					
Full-time	4.4	3.8	2.4	*	1.6
Part-time	2.6	2.7	*	*	1.4
Unemployed	3.3	6.3	3.9	*	3.4
Other	0.9	2.7	2.0	*	0.6

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 46. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE SEDATIVES IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	4.1	11.0	12.4	2.6	6.0
SEX					
Male	4.9	14.2	14.0	3.8	7.8
Female	3.2	7.8	10.9	1.5	4.5
RACE/ETHNICITY					
White	4.5	12.1	14.4	2.6	6.6
Black	2.6	4.4	5.1	3.1	3.7
Hispanic	4.0	6.7	4.3	2.2	3.8
POPULATION DENSITY					
Large Metro	4.3	15.1	13.3	3.9	8.1
Small Metro	4.8	10.8	11.8	3.1	6.2
Nonmetro	3.2	8.8	12.6	1.5	4.9
REGION					
Northeast	5.3	7.4	11.5	4.3	6.3
North Central	3.9	12.3	11.3	1.8	5.8
South	3.0	12.4	12.4	2.0	5.7
West	4.7	11.4	14.8	2.3	6.6
ADULT EDUCATION					
Less than high school	N/A	19.3	10.2	1.1	4.9
High school graduate	N/A	7.6	11.1	1.8	5.2
Some college	N/A	11.2	15.6	3.5	8.4
College graduate	N/A	10.0	12.6	5.4	8.1
CURRENT EMPLOYMENT					
Full-time	9.5	11.2	12.8	4.4	8.0
Part-time	4.2	10.1	11.4	*	5.2
Unemployed	11.8	13.6	12.7	3.1	9.6
Other	3.0	8.8	11.6	0.9	3.0

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 47. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE SEDATIVES IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.0	1.6	1.2	*	0.8
SEX					
Male	0.9	2.4	1.6	0.7	1.2
Female	1.1	0.7	0.7	*	0.5
RACE/ETHNICITY					
White	1.0	1.8	1.2	*	0.8
Black	1.0	0.6	0.6	1.0	0.8
Hispanic	0.6	1.1	1.2	*	0.6
POPULATION DENSITY					
Large Metro	0.6	2.0	3.3	2.1	2.1
Small Metro	1.5	1.7	0.9	*	0.6
Nonmetro	0.7	1.2	*	*	0.5
REGION					
Northeast	0.6	1.4	*	0.7	0.7
North Central	1.3	1.7	1.6	*	1.0
South	0.8	1.9	1.2	0.5	0.9
West	1.6	1.2	1.7	*	0.8
ADULT EDUCATION					
Less than high school	N/A	3.7	2.0	*	0.9
High school graduate	N/A	1.3	0.6	0.8	0.9
Some college	N/A	0.5	1.3	*	0.5
College graduate	N/A	1.7	1.4	0.6	1.0
CURRENT EMPLOYMENT					
Full-time	4.6	1.5	1.3	0.8	1.1
Part-time	0.7	*	0.9	*	*
Unemployed	3.1	4.4	1.7	*	2.4
Other	0.6	1.7	*	*	*

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 48. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE TRANQUILIZERS IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	4.8	12.0	13.9	4.7	7.7
SEX					
Male	4.4	13.4	17.1	5.3	8.9
Female	5.4	10.7	10.8	4.2	6.6
RACE/ETHNICITY					
White	5.5	13.7	15.6	5.0	8.4
Black	2.5	5.0	7.0	3.6	4.4
Hispanic	3.8	4.5	7.1	2.7	4.2
POPULATION DENSITY					
Large Metro	3.9	13.7	15.0	6.0	9.1
Small Metro	5.8	12.2	14.1	5.0	8.0
Nonmetro	4.1	11.0	13.0	3.8	6.7
REGION					
Northeast	3.5	9.0	10.2	5.0	6.5
North Central	3.8	12.5	13.6	2.8	6.8
South	5.7	13.5	15.2	3.7	7.6
West	6.1	12.9	16.7	8.3	10.5
ADULT EDUCATION					
Less than high school	N/A	18.6	11.1	2.3	5.8
High school graduate	N/A	11.0	14.0	3.8	7.7
Some college	N/A	11.6	17.0	7.3	10.8
College graduate	N/A	6.4	12.3	8.0	9.1
CURRENT EMPLOYMENT					
Full-time	10.5	11.6	13.6	6.8	9.6
Part-time	5.8	11.4	16.3	4.8	8.4
Unemployed	7.5	19.1	16.8	3.7	12.3
Other	3.7	8.9	12.7	2.3	4.1

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 49. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE TRANQUILIZERS IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	0.6	1.6	1.7	0.8	1.1
SEX					
Male	*	2.1	1.8	0.8	1.2
Female	0.8	1.1	1.6	0.8	1.0
RACE/ETHNICITY					
White	0.7	1.8	2.0	0.8	1.2
Black	*	0.8	0.6	0.6	0.6
Hispanic	*	*	1.0	0.6	0.5
POPULATION DENSITY					
Large Metro	*	2.3	3.3	1.4	1.8
Small Metro	*	1.5	1.3	0.8	1.0
Nonmetro	0.8	1.4	1.3	0.6	0.8
REGION					
Northeast	*	0.5	0.5	1.4	1.0
North Central	0.6	2.8	1.6	*	0.9
South	0.7	1.6	2.5	*	0.9
West	1.0	1.5	2.0	1.8	1.7
ADULT EDUCATION					
Less than high school	N/A	2.5	1.7	*	0.7
High school graduate	N/A	1.4	1.7	1.3	1.4
Some college	N/A	1.7	1.6	0.8	1.2
College graduate	N/A	0.7	1.8	0.8	1.1
CURRENT EMPLOYMENT					
Full-time	2.4	1.4	1.7	1.0	1.3
Part-time	0.6	1.2	1.8	*	0.8
Unemployed	*	2.2	2.0	*	1.2
Other	*	2.3	1.6	0.7	0.8

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 50. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE ANALGESICS IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	5.8	11.3	13.3	2.8	6.6
SEX					
Male	5.1	12.7	15.6	3.5	7.7
Female	6.5	9.9	11.1	2.3	5.6
RACE/ETHNICITY					
White	6.2	11.9	14.8	2.6	6.8
Black	3.9	8.0	7.4	4.4	5.6
Hispanic	5.9	8.8	8.7	3.5	6.1
POPULATION DENSITY					
Large Metro	4.4	14.8	13.5	5.1	8.7
Small Metro	7.9	10.5	13.9	2.6	6.6
Nonmetro	4.0	10.4	12.4	2.2	5.6
REGION					
Northeast	3.9	8.8	9.2	1.9	4.7
North Central	6.2	9.8	13.0	2.2	6.1
South	5.1	12.6	13.2	2.4	6.4
West	8.8	13.9	19.0	5.7	10.1
ADULT EDUCATION					
Less than high school	N/A	19.1	13.8	1.6	5.7
High school graduate	N/A	11.5	13.3	2.1	6.7
Some college	N/A	8.9	15.2	3.2	7.6
College graduate	N/A	2.9	11.3	5.7	7.0
CURRENT EMPLOYMENT					
Full-time	5.6	11.3	13.1	4.8	8.3
Part-time	7.8	10.1	14.8	0.6	6.8
Unemployed	11.7	13.9	19.9	1.6	10.6
Other	4.6	10.6	11.2	1.2	3.6

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 51. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE ANALGESICS IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	1.6	1.8	2.2	*	1.1
SEX					
Male	1.6	2.4	2.3	*	1.1
Female	1.6	1.2	2.0	0.7	1.1
RACE/ETHNICITY					
White	1.8	1.5	2.3	*	1.0
Black	1.1	2.3	1.3	1.9	1.8
Hispanic	1.5	2.7	2.3	1.0	1.7
POPULATION DENSITY					
Large Metro	2.0	2.2	3.2	1.0	1.8
Small Metro	1.9	1.7	2.0	0.5	1.1
Nonmetro	1.1	1.6	1.7	*	0.8
REGION					
Northeast	1.6	*	1.5	0.7	0.9
North Central	1.1	2.8	2.7	*	1.3
South	1.4	2.4	2.3	*	1.1
West	2.3	1.4	2.1	0.7	1.3
ADULT EDUCATION					
Less than high school	N/A	2.4	2.4	0.6	1.1
High school graduate	N/A	1.8	1.9	*	0.9
Some college	N/A	1.4	1.7	*	0.9
College graduate	N/A	1.6	2.9	0.8	1.5
CURRENT EMPLOYMENT					
Full-time	2.6	1.7	1.9	0.5	1.2
Part-time	1.9	1.2	1.9	*	1.2
Unemployed	*	3.0	4.2	1.6	2.4
Other	1.4	1.7	2.7	*	0.9

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 52. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE PSYCHOTHERAPEUTICS IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	12.1	26.0	27.2	9.0	15.7
SEX					
Male	11.2	26.7	30.2	10.7	17.4
Female	13.1	25.4	24.3	7.5	14.1
RACE/ETHNICITY					
White	13.7	28.6	30.5	9.2	16.8
Black	5.6	15.4	14.1	8.1	10.3
Hispanic	10.7	17.5	15.0	7.4	11.6
POPULATION DENSITY					
Large Metro	9.5	28.7	29.1	12.2	18.6
Small Metro	14.7	27.3	28.4	9.8	16.8
Nonmetro	10.3	22.8	24.7	6.6	12.9
REGION					
Northeast	13.2	20.8	22.8	8.4	13.8
North Central	10.5	25.4	27.6	6.8	14.6
South	9.8	25.2	25.4	6.4	13.3
West	16.3	34.2	35.2	16.6	23.3
ADULT EDUCATION					
Less than high school	N/A	31.6	22.5	4.8	10.9
High school graduate	N/A	25.9	26.8	6.2	15.2
Some college	N/A	24.8	31.9	12.4	20.4
College graduate	N/A	19.9	26.0	17.6	20.3
CURRENT EMPLOYMENT					
Full-time	18.7	27.7	27.2	13.3	19.9
Part-time	15.0	24.1	27.1	9.8	17.1
Unemployed	26.5	27.6	28.5	5.1	19.8
Other	9.3	20.8	26.8	3.8	8.5

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 53. PERCENT REPORTING NONMEDICAL USE OF ANY PRESCRIPTION-TYPE PSYCHOTHERAPEUTICS IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	3.0	6.3	5.3	1.5	3.2
SEX					
Male	3.3	8.9	5.7	1.5	3.8
Female	2.7	3.7	4.9	1.6	2.6
RACE/ETHNICITY					
White	3.2	6.6	5.9	1.4	3.2
Black	1.8	3.7	2.5	2.2	2.5
Hispanic	2.7	4.8	4.1	1.5	2.9
POPULATION DENSITY					
Large Metro	3.6	5.0	7.2	3.0	4.3
Small Metro	3.4	7.7	5.1	1.5	3.4
Nonmetro	2.3	5.2	4.5	1.0	2.4
REGION					
Northeast	3.6	4.0	2.5	2.1	2.6
North Central	2.1	8.9	5.7	0.9	3.4
South	2.6	5.8	6.5	0.8	2.8
West	3.9	6.9	6.7	2.8	4.4
ADULT EDUCATION					
Less than high school	N/A	9.1	6.2	0.9	2.7
High school graduate	N/A	5.5	5.9	2.0	3.6
Some college	N/A	7.4	3.9	0.9	3.2
College graduate	N/A	2.3	5.2	2.3	3.1
CURRENT EMPLOYMENT					
Full-time	7.0	6.1	4.9	2.2	3.7
Part-time	3.8	5.2	4.4	*	2.9
Unemployed	3.4	10.3	8.9	1.6	6.3
Other	2.2	5.0	6.3	1.0	2.1

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

VII. ALCOHOL

PREVALENCE OF USE OF ALCOHOL

The data in table 54 reveal that more than one-half (55.5%) of the 12-17 year-olds have tried an alcoholic beverage at some time in their life. The figures for the adults are substantially higher. More than 90% of the 18-25 year-olds (92.6%) and 26-34 year-olds (93.1%) have tried alcohol, as have 88.0% of those 35 years old or older. In view of the high rates for lifetime prevalence, the salient findings are that the rates are consistently but not greatly higher for males than for females and are higher for whites than for blacks or Hispanics in each age group. The rates for use of alcohol during the past year are also high, as seen in table 55; in fact, the rates for lifetime and the past year are quite similar. The rates for the past month are somewhat lower, but drinkers are a statistical minority only among 12-17 year-olds, among whom 31.0% had a drink in the past month (table 56).

Sex and Race/Ethnicity

Except for the 12-17 year-olds, significantly more males than females reported using alcohol in the past month ($p < .001$). The rates for use of alcoholic beverages in the past month are considerably higher among whites than among blacks and Hispanics in each of the four age groups ($p < .05$). This is most striking among persons 35 years old and older as 59.3% of the whites in comparison with 44.0% of the blacks ($p < .001$) and 49.6% of the Hispanics ($p < .05$) used alcoholic beverages at least once during the past month.

Region and Adult Education

Only one consistent pattern is observed between region of residence and use of alcohol in the past month: the lowest rate of use is found among residents of the South in each age group ($p < .05$). The one exception is that the difference in alcohol use in the past month is not significant for 18-25 year-olds who live in the South or West. In each age group, the rate for use of alcohol in the past month is significantly ($p < .05$) higher among college graduates than among persons who did not attend college. However, the differences between those with some college education and the college graduates are not significant.

ALCOHOL USE BY AGE

The data in table 57 show that 10.8% of the 12-13 year-olds used alcohol in the past month in comparison with 34.7% of the 14-15 year-olds. Another substantial increase in the rate for use in the past month is found between 16-17 and 18-21. The rate for the 16-17 year-olds is 45.9%, while the comparable rate for the 18-21 year-olds is 65.6%.

ALCOHOL USE BY SEX, AGE GROUP, AND RACE/ETHNICITY

Among 12-17 and 18-25 year-olds, significantly more whites than blacks or Hispanics reported use of alcohol in their lifetime, the past year, and the past month ($p < .01$). In most cases, the lowest rates are found among blacks (table 58). Among females in the two older age groups, more whites than blacks or Hispanics used alcohol in their lifetime and the past year ($p < .05$). The patterns are not as consistent among males in these age groups.

DAYS OF ALCOHOL USE

The data in table 59 show that daily drinking is more likely ($p < .001$) to occur among the 26-34 year-olds or persons 35 years old and older than among younger persons. Males are almost three times more likely than females to report drinking on at least 20 days during the past month ($p < .001$). Whites are almost twice as likely as blacks or Hispanics to report drinking on 20 or more days in the previous month ($p < .001$). The rate of daily drinking is lowest among residents of the South and highest among those who live in the Northeast and the West ($p < .01$). Those with the least amount of education are less likely to drink daily than those with higher levels of education ($p < .001$). Persons who are employed full-time are more likely than the part-time employed to drink daily ($p < .01$).

FIVE OR MORE DRINKS ON THE SAME OCCASION

The measure of daily drinking does not take into account the quantity of alcohol consumed. The respondents were asked to indicate on how many days during the month they had five or more drinks on the same occasion. Overall, 6.5% of the sample had five or more drinks on five or more days in the previous month. As may be seen in table 60, persons 18-25 years old or 26-34 years old are more likely to consume five or more drinks on five or more days than are their younger or older counterparts ($p < .001$). In the total sample, males (10.6%) are more likely ($p < .001$) than females (2.7%) to have five or more drinks on the same occasion on five or more days in the month.

USE IN THE PAST MONTH OF ALCOHOL AND OTHER DRUGS

The data in table 61 show the relationship of current use of alcoholic beverages to current use of other drugs. Regardless of age group, current use of alcoholic beverages is strongly related to current use of cigarettes, marijuana, nonmedical use of psychotherapeutics, and cocaine. For example, among 18-25 year-olds, 28.4% of the current users of alcohol reported current use of marijuana in comparison with 5.1% of those who did not use alcohol during the past month.

TABLE 54. PERCENT REPORTING ALCOHOL USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	55.5	92.6	93.1	88.0	86.1
SEX					
Male	57.8	94.1	96.1	95.3	90.7
Female	53.1	91.1	90.3	81.7	81.8
RACE/ETHNICITY					
White	60.7	96.2	95.4	89.9	88.9
Black	38.8	79.8	86.5	79.5	74.7
Hispanic	44.1	81.3	85.2	73.6	73.2
POPULATION DENSITY					
Large Metro	52.8	89.8	90.8	85.8	83.7
Small Metro	54.1	94.6	95.2	91.1	88.4
Nonmetro	58.4	91.6	91.9	85.2	84.4
REGION					
Northeast	60.8	97.1	96.1	91.8	90.1
North Central	57.0	96.1	95.4	89.9	88.6
South	49.2	88.0	89.7	82.7	80.9
West	58.5	90.3	92.4	90.4	87.0
ADULT EDUCATION					
Less than high school	N/A	87.6	90.4	76.8	80.1
High school graduate	N/A	92.8	93.1	89.9	91.3
Some college	N/A	94.4	94.4	94.2	94.3
College graduate	N/A	96.1	93.6	96.7	95.7
CURRENT EMPLOYMENT					
Full-time	82.3	95.1	95.0	93.5	94.0
Part-time	64.0	90.6	94.6	86.6	83.3
Unemployed	70.4	91.4	88.6	84.3	86.6
Other	48.2	86.6	86.2	82.0	75.6

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 55. PERCENT REPORTING ALCOHOL USE IN THE PAST YEAR BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	51.7	87.2	84.0	69.9	73.4
SEX					
Male	52.9	90.3	88.6	76.7	78.6
Female	50.5	84.1	79.7	64.0	68.8
RACE/ETHNICITY					
White	57.1	91.2	86.0	72.2	76.3
Black	33.7	73.1	77.6	53.3	59.0
Hispanic	40.8	76.0	77.8	59.7	64.0
POPULATION DENSITY					
Large Metro	49.3	86.1	86.0	67.2	72.7
Small Metro	50.7	90.2	88.6	74.5	77.2
Nonmetro	54.1	84.0	77.5	65.5	69.3
REGION					
Northeast	58.1	91.5	91.1	79.2	81.2
North Central	52.0	92.4	88.6	74.5	78.2
South	44.5	81.7	76.3	56.0	62.5
West	56.1	84.6	82.8	77.5	77.3
ADULT EDUCATION					
Less than high school	N/A	79.3	78.3	49.0	57.1
High school graduate	N/A	87.6	82.8	73.3	78.7
Some college	N/A	90.6	85.4	83.8	85.9
College graduate	N/A	91.6	87.9	84.2	86.2
CURRENT EMPLOYMENT					
Full-time	81.1	90.6	87.7	80.1	84.2
Part-time	60.3	83.5	82.8	74.3	74.4
Unemployed	66.4	85.7	77.0	67.0	75.8
Other	44.2	80.0	72.6	56.5	57.2

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 56. PERCENT REPORTING ALCOHOL USE IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	31.0	71.4	70.0	57.3	59.1
SEX					
Male	33.5	78.3	79.6	67.9	67.8
Female	28.4	64.4	60.7	48.3	51.1
RACE/ETHNICITY					
White	34.3	75.7	72.2	59.3	61.8
Black	20.9	57.4	65.9	44.0	47.5
Hispanic	21.7	58.4	65.1	49.6	50.5
POPULATION DENSITY					
Large Metro	28.3	67.0	76.2	56.6	59.4
Small Metro	32.4	74.3	73.9	60.5	62.3
Nonmetro	30.7	70.0	61.7	53.7	55.2
REGION					
Northeast	33.5	76.1	78.9	65.0	66.0
North Central	33.4	78.2	74.8	62.6	64.8
South	25.7	64.3	58.3	42.8	47.1
West	34.6	68.9	72.4	67.6	64.9
ADULT EDUCATION					
Less than high school	N/A	61.1	62.9	34.0	41.5
High school graduate	N/A	71.1	65.9	60.7	64.2
Some college	N/A	74.9	75.8	71.0	73.2
College graduate	N/A	82.6	74.7	76.0	76.4
CURRENT EMPLOYMENT					
Full-time	63.0	76.3	74.2	69.9	72.2
Part-time	38.7	66.0	71.3	60.6	58.2
Unemployed	53.4	70.8	62.8	54.4	62.0
Other	23.2	59.8	54.7	41.4	40.2

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 57. PERCENT REPORTING ALCOHOL USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE: 1985

AGE	(Unweighted N)	Lifetime	Past Year	Past Month
TOTAL	(8,038)	86.1	73.4	59.1
12-17 YEARS OLD		55.5	51.7	31.0
12-13	(686)	27.5	24.2	10.8
14-15	(811)	61.0	57.0	34.7
16-17	(749)	75.8	71.8	45.9
18-25 YEARS OLD		92.6	87.2	71.4
18-21	(844)	90.6	84.9	65.6
22-25	(969)	94.3	89.2	76.4
26-34 YEARS OLD		93.1	84.0	70.0
26-29	(990)	94.8	86.3	70.5
30-34	(1,176)	91.8	82.2	69.6
35 YEARS AND OLDER		88.0	69.9	57.3
35-39	(324)	93.4	82.8	70.1
40-44	(208)	90.8	77.3	66.6
45-49	(178)	95.7	81.4	70.9
50 +	(1,103)	84.0	61.5	48.0

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 58. PERCENT REPORTING ALCOHOL USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE GROUP, RACE/ETHNICITY, AND SEX: 1985

RACE/ETHNICITY AND SEX	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
	(UNWEIGHTED N's)				
White Male	(523)	(368)	(458)	(453)	(1,802)
Black Male	(271)	(184)	(183)	(135)	(773)
Hispanic Male	(317)	(236)	(206)	(125)	(884)
White Female	(470)	(426)	(624)	(627)	(2,147)
Black Female	(319)	(277)	(316)	(260)	(1,172)
Hispanic Female	(310)	(292)	(328)	(182)	(1,112)
	A. USED ALCOHOL IN LIFETIME				
White Male	61.6	96.4	97.5	96.0	92.5
Black Male	44.1	81.5	88.6	92.4	81.3
Hispanic Male	49.8	87.7	92.2	90.5	84.0
White Female	59.6	95.9	93.3	84.6	85.5
Black Female	33.5	78.3	84.6	69.5	69.1
Hispanic Female	38.5	74.4	78.2	58.8	62.8
	B. USED ALCOHOL IN PAST YEAR				
White Male	57.1	92.8	89.5	77.7	80.2
Black Male	37.7	76.2	82.3	67.1	67.0
Hispanic Male	45.4	84.8	87.8	75.9	75.7
White Female	57.1	89.6	82.6	67.4	72.6
Black Female	29.6	70.4	73.5	42.7	52.3
Hispanic Female	36.3	66.6	67.7	45.5	52.8
	C. USED ALCOHOL IN PAST MONTH				
White Male	36.1	81.0	80.1	69.0	69.5
Black Male	23.8	66.8	77.3	56.5	57.3
Hispanic Male	26.0	73.8	82.0	67.1	65.6
White Female	32.3	70.3	64.4	51.1	54.7
Black Female	17.9	49.2	55.9	34.4	39.2
Hispanic Female	17.6	42.1	48.1	34.2	36.1

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 59. PERCENT DISTRIBUTION OF DAYS OF ALCOHOL USE IN PAST MONTH BY DEMOGRAPHIC CHARACTERISTICS: 1985[1]

DEMOGRAPHIC CHARACTERISTIC	None	1-4 Days	5-19 Days	20-30 Days
TOTAL	41.8	30.3	18.3	9.5
AGE GROUP				
12-17 Years	70.7	21.4	7.0	1.0
18-25 Years	29.3	39.9	25.1	5.6
26-34 Years	30.5	35.4	22.8	11.2
35 Years +	43.8	27.3	16.9	12.0
SEX				
Male	33.0	29.4	23.1	14.5
Female	49.9	31.1	13.9	5.0
RACE/ETHNICITY				
White	39.0	30.6	19.8	10.6
Black	54.6	27.9	12.0	5.5
Hispanic	51.7	30.5	13.3	4.5
POPULATION DENSITY				
Large Metro	42.0	33.7	15.6	8.7
Small Metro	38.6	30.7	20.0	10.7
Nonmetro	45.5	28.4	17.5	8.6
REGION				
Northeast	34.9	31.9	21.1	12.1
North Central	36.0	34.3	20.2	9.5
South	54.0	26.0	13.7	6.2
West	35.8	31.4	20.6	12.1
ADULT EDUCATION[2]				
Less than high school	60.2	24.2	11.0	4.6
High school graduate	36.6	35.3	17.8	10.2
Some college	27.4	37.1	21.4	14.0
College graduate	23.9	27.4	33.0	15.6
CURRENT EMPLOYMENT				
Full-time	28.5	34.1	24.9	12.5
Part-time	42.2	32.2	18.2	7.3
Unemployed	39.4	35.2	16.5	8.9
Other	61.1	23.4	9.2	6.3

[1]Due to rounding, row percents may not total 100.0. The percents for "None" differ slightly from those that may be inferred from table 56 because of missing data for some past month users on number of days used. See Section C of the Methods Appendix.

[2]Respondents age 12-17 are not included in ADULT EDUCATION.

Source: NIDA, National Household Survey on Drug Abuse, 1985

TABLE 60. PERCENT DISTRIBUTION OF NUMBER OF DAYS DURING PAST MONTH RESPONDENT CONSUMED 5 OR MORE DRINKS ON THE SAME OCCASION BY DEMOGRAPHIC CHARACTERISTICS: 1985[1]

DEMOGRAPHIC CHARACTERISTIC	None	1-4 Days	5-30 Days
TOTAL	79.5	14.1	6.5
AGE GROUP			
12-17 Years	88.4	7.8	3.8
18-25 Years	65.1	24.4	10.5
26-34 Years	70.2	19.9	9.9
35 Years +	85.6	9.9	4.5
SEX			
Male	68.4	21.1	10.6
Female	89.6	7.7	2.7
RACE/ETHNICITY			
White	78.5	14.8	6.8
Black	85.3	9.8	4.9
Hispanic	78.5	15.0	6.5
POPULATION DENSITY			
Large Metro	78.2	15.4	6.4
Small Metro	78.5	14.9	6.6
Nonmetro	81.2	12.4	6.4
REGION			
Northeast	73.9	18.9	7.2
North Central	77.4	14.3	8.3
South	85.3	10.2	4.5
West	78.8	14.4	6.8
ADULT EDUCATION			
Less than high school	84.3	10.6	5.2
High school graduate	77.0	15.1	7.9
Some college	76.3	15.5	8.3
College graduate	75.2	19.4	5.4
CURRENT EMPLOYMENT			
Full-time	71.0	20.1	8.9
Part-time	82.5	11.9	5.6
Unemployed	71.4	19.9	8.7
Other	91.6	5.4	3.0

[1]Due to rounding, row percents may not total 100.0.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 61. PERCENT REPORTING USE OF SELECTED DRUGS IN PAST MONTH BY AGE GROUP AND ALCOHOL USE IN PAST MONTH: 1985

DRUGS USED IN PAST MONTH	ALCOHOL USE IN PAST MONTH		
	No	Yes	Total
TOTAL	40.9	59.1	
12-17 YEARS OLD	69.0	31.0	
Cigarettes	5.9	36.4	15.3
Marijuana	2.3	32.3	12.0
Nonmedical Use of Any Psychotherapeutic	0.7	8.3	3.0
Cocaine	*	4.7	1.5
18-25 YEARS OLD	28.6	71.4	
Cigarettes	22.1	42.8	36.8
Marijuana	5.1	28.4	21.8
Nonmedical Use of Any Psychotherapeutic	1.3	8.3	6.3
Cocaine	2.0	9.9	7.6
26-34 YEARS OLD	30.0	70.0	
Cigarettes	25.3	46.8	40.3
Marijuana	3.3	22.7	16.9
Nonmedical Use of Any Psychotherapeutic	1.2	7.1	5.3
Cocaine	*	8.7	6.1
35 YEARS AND OLDER	42.7	57.3	
Cigarettes	22.3	36.0	30.1
Marijuana	1.2	3.1	2.3
Nonmedical Use of Any Psychotherapeutic	1.2	1.8	1.5
Cocaine	*	0.9	0.5

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

VIII. CIGARETTES AND SMOKELESS TOBACCO

PREVALENCE OF CIGARETTE USE

More than three-fourths of all adults and nearly one-half (45.2%) of the 12-17 year-olds have tried cigarettes (table 62). Persons who have smoked only a few cigarettes are counted as having smoked cigarettes. Data pertaining to use of cigarettes in the past year are shown in table 63. Some 36.2% of all persons 12 years old and older reported having used cigarettes at least once during the previous year. Among the 12-17 year-olds, 15.3% are current smokers, that is have used cigarettes in the past month (table 64). The comparable figures for the other age groups are 36.8% for the 18-25 year-olds, 40.3% for the 26-34 year-olds, and 30.1% for persons 35 and older. Overall, 31.5% of the U.S. population 12 years old and older are classified as current smokers.

Sex and Race/Ethnicity

In the two older age groups, significantly ($p < .001$) more males than females smoked cigarettes in the past month. Among the 12-17 year-olds, current smoking is more prevalent among whites than among blacks and Hispanics ($p < .01$). Among 26-34 year-olds, the rate for current smoking is significantly ($p < .05$) higher among blacks (47.0%) than whites (40.0%) or Hispanics (35.8%). Blacks also have the highest rate among those 35 years old and older, with the rate of current smoking for blacks (36.8%) significantly higher than among whites (29.4%, $p < .05$).

Adult Education and Current Employment

Among the 18-25 and the 26-34 year-olds, 2 to 3 times as many persons who had not completed high school in comparison with college graduates are current smokers ($p < .001$). For example, 19.9% of the 26-34 year-olds who were college graduates are current smokers compared to 60.2% of those with less than a high school education. Among the 18-25 and 26-34 year-olds, the persons who were unemployed have higher rates of current smoking than those who were employed full-time or part-time and those who were students, housewives, or disabled ($p < .01$).

CIGARETTE USE BY AGE

As shown in the data in table 65, some 27.8% of the 12-13 year-olds have tried cigarettes. The rate jumps to 47.1% among those 14-15 and to 59.4% for those 16-17 years old. The rate for use of cigarettes in the past month is 5.9% among the 12 and 13 year-olds, 14.3% among the 14 and 15 year-olds, and 25.3% for the 16 and 17 year-olds.

CIGARETTE USE BY SEX, AGE GROUP, AND RACE/ETHNICITY

For the 12-17 and 18-25 year-olds, white males and females have significantly ($p < .01$) higher lifetime rates of cigarette use than do blacks or Hispanics (table 66). Further, among the 12-17 year old females, significantly more whites smoked cigarettes in the past month than did blacks or Hispanics ($p < .001$). For males who are 35 years old or older, the rate of cigarette use in the past month is similar for blacks and Hispanics and considerably higher than the rate for white males ($p < .05$).

AMOUNT OF PAST MONTH CIGARETTE USE

Some 3.1% of the 12-17 year-olds reported smoking about a pack or more a day (table 67). The rate of 24.6% for the 26-34 year-olds is significantly ($p < .001$) higher than the rate of 18.6% for the 18-25 year-olds. The use of about a pack or more of cigarettes per day is more common among males, 22.7%, than among females, 15.2%, and this difference is significant at the .001 level. Whites are significantly ($p < .001$) more likely to smoke about a pack or more a day (20.6%) than blacks (12.3%) or Hispanics (8.6%). Significantly ($p < .01$) fewer of the college graduates (12.1%) reported smoking about a pack or more per day than did those with some college education (20.5%) or the high school graduates (24.4%) or those with less than a high school education (22.5%).

USE IN THE PAST MONTH OF CIGARETTES AND OTHER DRUGS

The relationship of current use of cigarettes to current use of other drugs is quite strong and consistent regardless of age group (table 68). However, the findings for the 12-17 year-olds are most striking. For example, 47.7% of the 12-17 year-olds who are current cigarette smokers reported current use of marijuana in comparison with only 5.5% of those who are not current cigarette smokers. The rates for current use of cocaine among 12-17 year-olds are 8.2% for current cigarette smokers and less than one-half of one percent for those who are not current cigarette smokers.

PATTERNS OF SMOKELESS TOBACCO USE

Table 69 shows that significantly ($p < .001$) more 18-25 year-olds (5.9%) used smokeless tobacco at least weekly than did older persons (2.6%). The rates of weekly use for the other two age groups fall in between. Addition of the first two columns provides a prevalence rate for use during the past year. These rates are 11.1% for both the 12-17 year-olds (3.3% plus 7.8%) and the 18-25 year-olds (5.9% plus 5.2%). These rates are significantly ($p < .001$) higher than the comparable rates for the 26-34 year-olds (5.7%) and persons 35 years old and older (4.2%). Many more males (20.3%) than females (2.8%) have used smokeless tobacco, and 12.2% of the males and 1.2% of the females used smokeless tobacco in the past year ($p < .001$). The rate of use of smokeless tobacco in the past year for whites was 7.2% and this is significantly

($p < .01$) higher than the rate for blacks (4.3%) and for Hispanics (2.0%). More residents of nonmetropolitan areas (9.1%) than residents of small (5.5%) or large (3.5%) metropolitan areas used smokeless tobacco in the past year ($p < .001$).

USE OF CIGARETTES AND SMOKELESS TOBACCO BY AGE GROUP, ETHNICITY, AND SEX

The data in table 70 show that concurrent use of both cigarettes and smokeless tobacco is not uncommon, especially among younger males. The 12-17 year-old white males and females illustrate this point. Adding across the rows, if only the rates for current smoking are compared, 17.1% of the white males and 17.5% of the white females who are 12-17 years old are current smokers, and this difference is not statistically significant. However, 18.4% of the 12-17 year old white males, who are not current smokers, used smokeless tobacco during the past year in comparison with 0.9% of the females; this difference is significant at the .001 level. Overall, 35.6% of the 12-17 year old white males used tobacco in comparison with 18.3% of their female counterparts ($p < .001$).

The rates of concurrent use of cigarettes and smokeless tobacco are even higher among 18-25 year old white males than among their younger counterparts ($p < .01$). Some 10.9% report current smoking and some use of smokeless tobacco during the past year; 28.2% are current smokers who did not use smokeless tobacco during the past year, and 14.2% used smokeless tobacco, but are not current smokers. The overall rate for use of tobacco among 18-25 year old white males is 53.3% in comparison with a composite rate of 37.6% for 18-25 year old white females ($p < .001$).

TABLE 62. PERCENT REPORTING CIGARETTE USE IN LIFETIME BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	45.2	75.6	80.7	80.4	75.7
SEX					
Male	48.9	78.0	87.1	89.9	82.3
Female	41.2	73.2	74.6	72.3	69.6
RACE/ETHNICITY					
White	49.3	79.8	83.9	83.1	79.2
Black	33.0	64.8	79.0	72.0	66.0
Hispanic	32.8	56.2	60.9	57.4	54.2
POPULATION DENSITY					
Large Metro	45.8	73.0	77.4	75.7	72.0
Small Metro	46.4	75.9	81.7	82.0	77.0
Nonmetro	43.4	76.7	81.3	80.5	75.8
REGION					
Northeast	48.8	74.7	84.5	80.3	76.6
North Central	44.9	80.6	83.4	83.1	78.6
South	42.0	75.2	76.8	78.9	73.6
West	46.6	71.6	79.3	80.4	74.7
ADULT EDUCATION					
Less than high school	N/A	81.1	80.4	68.9	72.1
High school graduate	N/A	77.9	83.4	85.0	83.0
Some college	N/A	69.6	83.3	87.3	82.0
College graduate	N/A	70.8	74.4	84.4	79.9
CURRENT EMPLOYMENT					
Full-time	72.2	78.6	82.4	87.8	84.3
Part-time	50.6	67.5	81.6	76.9	69.0
Unemployed	67.8	80.0	85.6	76.4	78.7
Other	38.7	70.7	72.0	72.6	65.2

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 63. PERCENT REPORTING CIGARETTE USE IN THE PAST YEAR BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	25.8	44.3	44.3	33.0	36.2
SEX					
Male	27.6	46.6	49.5	38.0	40.5
Female	23.8	42.0	39.3	28.7	32.3
RACE/ETHNICITY					
White	28.3	46.5	44.2	32.2	36.3
Black	17.5	39.1	49.3	39.8	38.1
Hispanic	20.1	36.9	41.8	35.3	34.7
POPULATION DENSITY					
Large Metro	26.1	43.0	43.6	33.1	36.4
Small Metro	26.0	44.5	46.3	30.8	35.5
Nonmetro	25.4	44.9	42.2	35.4	37.0
REGION					
Northeast	28.5	39.9	44.7	32.0	35.4
North Central	25.3	46.6	45.3	33.2	37.2
South	23.0	46.0	44.0	32.8	35.9
West	27.7	44.2	43.1	34.1	36.9
ADULT EDUCATION					
Less than high school	N/A	59.1	64.0	31.7	39.7
High school graduate	N/A	46.1	52.2	34.7	41.2
Some college	N/A	36.1	43.4	38.8	39.3
College graduate	N/A	31.0	23.1	26.6	26.1
CURRENT EMPLOYMENT					
Full-time	54.4	47.1	43.8	38.9	42.0
Part-time	24.8	30.0	39.6	28.3	29.6
Unemployed	50.1	58.9	73.1	43.6	55.5
Other	21.7	39.1	39.9	25.8	27.3

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 64. PERCENT REPORTING CIGARETTE USE IN THE PAST MONTH BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
TOTAL	15.3	36.8	40.3	30.1	31.5
SEX					
Male	16.0	38.3	45.5	34.9	35.3
Female	14.5	35.2	35.2	26.0	28.0
RACE/ETHNICITY					
White	17.2	38.4	40.0	29.4	31.5
Black	9.0	34.3	47.0	36.8	34.0
Hispanic	10.8	29.8	35.8	32.4	29.3
POPULATION DENSITY					
Large Metro	14.5	38.1	39.4	29.5	31.5
Small Metro	16.5	36.4	42.4	29.0	31.4
Nonmetro	14.2	36.5	38.1	31.7	31.6
REGION					
Northeast	16.8	30.6	40.4	29.3	30.3
North Central	17.9	38.7	43.2	31.4	33.6
South	12.2	40.0	40.3	30.0	31.4
West	16.0	36.8	36.7	30.0	30.9
ADULT EDUCATION					
Less than high school	N/A	55.4	60.2	29.8	37.3
High school graduate	N/A	38.6	48.0	32.1	37.0
Some college	N/A	24.9	38.8	33.2	32.6
College graduate	N/A	24.6	19.9	24.1	23.0
CURRENT EMPLOYMENT					
Full-time	40.5	38.3	39.4	34.4	36.6
Part-time	15.8	25.4	35.9	22.6	23.7
Unemployed	32.9	52.5	71.3	43.2	51.1
Other	11.4	32.1	36.6	25.3	24.0

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 65. PERCENT REPORTING CIGARETTE USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE: 1985

AGE	(Unweighted N)	Lifetime	Past Year	Past Month
TOTAL	(8,038)	75.7	36.2	31.5
12-17 YEARS OLD		45.2	25.8	15.3
12-13	(686)	27.8	13.8	5.9
14-15	(811)	47.1	26.0	14.3
16-17	(749)	59.4	36.8	25.3
18-25 YEARS OLD		75.6	44.3	36.8
18-21	(844)	69.8	38.8	30.0
22-25	(969)	80.6	49.2	42.7
26-34 YEARS OLD		80.7	44.3	40.3
26-29	(990)	82.1	46.5	41.8
30-34	(1,176)	79.6	42.5	39.0
35 YEARS AND OLDER		80.4	33.0	30.1
35-39	(324)	84.5	42.5	37.3
40-44	(208)	87.7	41.2	38.6
45-49	(178)	82.6	36.1	33.7
50 +	(1,103)	77.0	27.3	25.0

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 66. PERCENT REPORTING CIGARETTE USE IN LIFETIME, PAST YEAR, AND PAST MONTH BY AGE GROUP, RACE/ETHNICITY, AND SEX: 1985

RACE/ETHNICITY AND SEX	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
	(UNWEIGHTED N's)				
White Male	(523)	(368)	(458)	(453)	(1,802)
Black Male	(271)	(184)	(183)	(135)	(773)
Hispanic Male	(317)	(236)	(206)	(125)	(884)
White Female	(470)	(426)	(624)	(627)	(2,147)
Black Female	(319)	(277)	(316)	(260)	(1,172)
Hispanic Female	(310)	(292)	(328)	(182)	(1,112)
	A. USED CIGARETTES IN LIFETIME				
White Male	52.1	80.8	89.8	91.2	84.7
Black Male	40.0	68.2	83.6	88.8	75.4
Hispanic Male	36.4	63.6	73.6	78.1	67.6
White Female	46.2	78.8	78.1	76.1	74.0
Black Female	26.0	61.8	74.9	59.0	58.0
Hispanic Female	29.4	48.4	48.1	39.3	41.4
	B. USED CIGARETTES IN PAST YEAR				
White Male	29.1	48.0	49.3	35.9	39.7
Black Male	22.4	42.1	50.6	54.0	45.6
Hispanic Male	22.8	41.6	54.3	50.0	45.0
White Female	27.4	45.1	39.2	29.0	33.2
Black Female	12.6	36.5	48.2	29.0	31.9
Hispanic Female	17.5	31.9	29.3	22.6	25.0
	C. USED CIGARETTES IN PAST MONTH				
White Male	17.1	39.0	45.1	33.1	34.6
Black Male	11.3	36.6	47.9	49.3	40.0
Hispanic Male	14.3	35.4	48.8	45.9	39.4
White Female	17.4	37.8	35.1	26.1	28.7
Black Female	6.8	32.3	46.2	27.2	29.0
Hispanic Female	7.3	24.0	22.8	20.7	19.8

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 67. PERCENT DISTRIBUTION OF AMOUNT OF PAST MONTH CIGARETTE USE BY DEMOGRAPHIC CHARACTERISTICS: 1985[1]

	NONE PAST MONTH	CURRENTLY SMOKE LESS THAN A PACK PER DAY[2]	CURRENTLY SMOKE ABOUT A PACK OR MORE PER DAY[3]
TOTAL	68.6	12.7	18.8
AGE GROUP			
12-17 Years	84.8	12.1	3.1
18-25 Years	63.3	18.1	18.6
26-34 Years	59.8	15.6	24.6
35 Years +	69.9	10.0	20.1
SEX			
Male	64.8	12.6	22.7
Female	72.0	12.8	15.2
RACE-ETHNICITY			
White	68.5	10.9	20.6
Black	66.1	21.6	12.3
Hispanic	70.7	20.7	8.6
POPULATION DENSITY			
Large Metro	68.6	17.1	14.4
Small Metro	68.6	12.6	18.7
Nonmetro	68.4	10.6	21.0
REGION			
Northeast	69.7	11.1	19.2
North Central	66.6	12.2	21.2
South	68.6	13.3	18.2
West	69.2	14.0	16.8
ADULT EDUCATION[4]			
Less than high school	62.7	14.8	22.5
High school graduate	63.0	12.7	24.4
Some college	67.5	12.0	20.5
College graduate	77.1	10.9	12.1
CURRENT EMPLOYMENT			
Full-time	63.4	13.1	23.4
Part-time	76.3	12.6	11.0
Unemployed	48.9	24.3	26.7
Other	76.1	10.2	13.8

[1]Due to rounding, row percents may not total 100.0. The percents for "None" differ slightly from those that may be inferred from table 64 because of missing data for some past month users on number of cigarettes smoked in past 30 days. See Section C of the Methods Appendix.

[2]Averages 15 cigarettes or less per day in past month.

[3]Averages 16 or more cigarettes per day in past month.

[4]Respondents aged 12-17 are not included in ADULT EDUCATION.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 68. PERCENT REPORTING USE OF SELECTED DRUGS IN PAST MONTH BY AGE GROUP AND CIGARETTE USE IN PAST MONTH: 1985

DRUGS USED IN PAST MONTH	CIGARETTE USE IN PAST MONTH		
	No	Yes	Total
TOTAL	68.5	31.5	
12-17 YEARS OLD	84.7	15.3	
Alcohol	23.3	73.5	31.0
Marijuana	5.5	47.7	12.0
Nonmedical Use of Any Psychotherapeutic	1.4	12.4	3.0
Cocaine	*	8.2	1.5
18-25 YEARS OLD	63.2	36.8	
Alcohol	64.5	82.8	71.4
Marijuana	13.8	35.4	21.8
Nonmedical Use of Any Psychotherapeutic	3.2	11.8	6.3
Cocaine	4.0	14.0	7.6
26-34 YEARS OLD	59.7	40.3	
Alcohol	62.4	81.2	70.0
Marijuana	10.6	26.1	16.9
Nonmedical Use of Any Psychotherapeutic	3.2	8.5	5.3
Cocaine	4.0	9.2	6.1
35 YEARS AND OLDER	69.9	30.1	
Alcohol	52.6	68.6	57.3
Marijuana	1.8	3.5	2.3
Nonmedical Use of Any Psychotherapeutic	1.9	0.7	1.5
Cocaine	*	0.7	0.5

* Less than one-half of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 69. PERCENT DISTRIBUTION OF LIFETIME USE AND FREQUENCY OF SMOKELESS TOBACCO USE IN PAST YEAR BY DEMOGRAPHIC CHARACTERISTICS: 1985[1]

DEMOGRAPHIC CHARACTERISTIC	At Least Once Per Week Last Year	Less Than Once Per Week Last Year	Did Not Use in Past Year	Never Used
TOTAL	3.4	3.1	4.7	88.8
AGE GROUP				
12-17 Years	3.3	7.8	3.2	85.7
18-25 Years	5.9	5.2	6.2	82.8
26-34 Years	3.4	2.3	4.3	90.1
35 Years and Older	2.6	1.6	4.7	91.0
SEX				
Males	6.2	6.0	8.1	79.7
Females	0.8	*	1.6	97.2
RACE-ETHNICITY				
White	3.7	3.5	4.8	88.0
Black	3.2	1.1	5.2	90.6
Hispanic	0.8	1.2	2.8	95.3
POPULATION DENSITY				
Large Metro	1.6	1.9	5.1	91.4
Small Metro	2.7	2.8	4.4	90.1
Nonmetro	5.1	4.0	4.8	86.1
REGION				
Northeast	1.8	2.0	2.8	93.4
North Central	2.8	3.9	6.3	87.0
South	5.1	3.3	4.5	87.1
West	3.1	3.3	5.5	88.1
ADULT EDUCATION[2]				
Less than high school	4.4	3.0	6.4	86.2
High school graduate	3.5	2.3	4.5	89.7
Some college	2.3	3.1	4.9	89.7
College graduate	2.9	1.4	3.8	91.8
CURRENT EMPLOYMENT				
Full-time	4.4	3.6	5.2	86.8
Part-time	2.5	2.9	5.0	89.6
Unemployed	2.6	4.6	5.4	87.4
Other	2.5	2.1	3.7	91.8

* Less than one-half of one percent.

[1]Due to rounding, row percents may not total 100.0.

[2]Respondents age 12-17 are not included in ADULT EDUCATION.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 70. PERCENT DISTRIBUTION OF CURRENT CIGARETTE SMOKING STATUS AND SMOKELESS TOBACCO USE BY DEMOGRAPHIC CHARACTERISTICS: 1985[1]

	CURRENT SMOKER[2]			NOT CURRENT SMOKER	
	Regular Smokeless	Occasional Smokeless	No Smokeless This Year	Only Smokeless This Year	No Smokeless This Year
ALL MALES	2.2	3.4	29.8	6.6	58.1
WHITE MALES					
12-17 Years	2.4	4.0	10.7	18.4	64.4
18-25 Years	4.8	6.1	28.2	14.2	46.7
26-34 Years	2.8	3.0	39.4	5.2	49.6
35 Years +	1.6	3.3	28.1	4.0	62.9
BLACK MALES					
12-17 Years	*	*	11.0	4.1	84.5
18-25 Years	1.3	2.6	32.7	1.2	62.1
26-34 Years	2.2	2.5	43.5	2.2	49.7
35 Years +	*	*	48.6	4.0	46.7
HISPANIC MALES					
12-17 Years	*	2.3	11.9	3.2	82.4
18-25 Years	1.4	0.7	33.5	1.8	62.5
26-34 Years	0.8	1.5	46.8	*	50.7
35 Years +	*	1.1	44.7	0.8	53.4
ALL FEMALES	*	*	27.5	0.6	71.3
WHITE FEMALES					
12-17 Years	*	0.7	16.5	0.9	81.7
18-25 Years	0.5	0.6	36.6	*	62.4
26-34 Years	0.9	0.7	33.7	0.6	64.1
35 Years +	*	*	26.0	*	73.7
BLACK FEMALES					
12-17 Years	0.6	*	6.1	*	93.1
18-25 Years	*	*	32.1	1.9	66.0
26-34 Years	*	*	46.3	1.1	52.6
35 Years +	*	*	27.0	5.3	67.5
HISPANIC FEMALES					
12-17 Years	0.5	*	7.0	*	92.3
18-25 Years	0.5	*	23.6	0.6	75.2
26-34 Years	*	*	23.0	*	77.0
35 Years +	1.2	*	19.5	*	79.2

* Less than one-half of one percent.

[1]Due to rounding, row percents may not total 100.0.

[2]CURRENT SMOKER is use of cigarettes in past 30 days; Regular Smokeless is use of smokeless tobacco at least once a week in past year; Occasional Smokeless is use in past year but less than once a week.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

IX. PROBLEMS ASSOCIATED WITH DRUG USE

The interview instrument for the 1985 National Household Survey contained a number of questions designed to measure problems or consequences that may result from drug use and abuse. In general these questions asked the respondent to evaluate if he or she had certain problems and if the problems could be attributed to use of particular drugs. Three series of problems questions in the 1985 survey are considered in this chapter. They come from the questions presented on answer sheets 13, 11, and 12 respectively. These answer sheets are included at the end of the report.

PROBLEMS ATTRIBUTED TO USE OF ALCOHOL OR OTHER DRUGS IN THE PAST YEAR

On answer sheet 13 respondents were asked if they had experienced each of seventeen problems in the past year as a result of their alcohol or drug use and then asked to attribute these problems to use of one or more drugs.[1] The frequency of problems experienced in the past year range from less than one percent (0.8%) for respondents who had to get emergency medical help to 7.9% for those who found it difficult to think clearly because of their alcohol or drug use (totals, table 71). Other problems most often experienced during the past year include arguments with family or friends (6.7%), unsafe driving (7.4%), depression (5.8%), loss of memory of events that occurred while one was drunk or high (5.8%), and anxiety (5.6%).

Each of the seventeen problems was reported most frequently by 18-25 year-olds. This is not surprising because this group reported the highest levels of use of alcohol and illicit drugs in the past year. With three exceptions, fewer persons 35 years of age and older reported each problem than was the case in the other age groups. Fewer 12-17 year-olds reported having problems with their health, seeking emergency

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[1]Respondents who had never used alcohol or drugs were instructed to skip these questions (17.9% of the unweighted sample). However, an additional 28.0% of the unweighted sample who had used cigarettes, alcohol, or drugs did not answer the questions about problems. Most of these respondents were smokers or drinkers who used alcohol less than once a week in the past year, and who did not use any illicit drugs in the previous year. Some persons who had used illicit drugs in the past year also failed to answer these questions; for example, 12.0% of the users of marijuana and 7.2% of users of cocaine did not complete this answer sheet. In general, these individuals had not used illicit drugs as extensively in the past year as had those who completed the questions about problems. Therefore, respondents who skipped the questions about problems were treated as not having problems as the result of their use of alcohol or other drugs. Thus, the figures in tables 71 and 72 are conservative estimates of the extent of problems resulting from use of alcohol or other drugs. The biggest change if these respondents were excluded would be to raise "found it difficult to think clearly" from 7.9% to 11.1%.

medical help, or driving in a way that was not safe than was the case in the other age groups.

For each problem, the respondents were asked to identify which substance or substances caused the problem. Problems associated with cigarettes, alcohol, marijuana, and cocaine are shown in table 72. Of the respondents who smoked during the past year, few noted problems resulting from their use of cigarettes; the most frequently mentioned problems were: health, 2.8%; anxiety, 2.7%; and irritability, 2.0%. In contrast, users of alcohol were more likely than smokers to identify problems resulting from their drinking. The problems most frequently attributed to use of alcohol were: unsafe driving, 8.6%; difficulty thinking clearly, 7.6%; arguing and fighting with family and friends, 6.5%; being unable to remember events that occurred while the person was drunk, 6.4%; and depression, 4.9%. The problems users of marijuana most frequently attributed to that drug were: difficulty thinking clearly, 10.6%; depression, 6.4%; anxiety, 5.6%; and lower productivity at school or on the job, 5.6%. The problems that users of cocaine most frequently perceived to be a consequence of their use of cocaine are: anxiety, 9.8%; irritability, 5.3%; and depression, 5.0%. Some 5.1% of the users of cocaine said they skipped four or more meals in a row because of their use of the drug. Only 3.4% said the drug caused them to have serious financial problems, and only 0.8% said they had trouble with the police because of their use of cocaine. It should be noted that more users of these drugs may have experienced each of these problems than is reflected in table 72 because a cocaine user, for example, could have experienced a problem that he or she attributed to a substance other than cocaine. Also, some users reported problems, but they did not indicate which substance or substances caused the problem. This ranged from about 8% of those who became depressed or who drove unsafely to about 30% of those who had serious money problems or who needed emergency medical help.

COMPONENTS OF DEPENDENCE

Problems resulting from drug use were also assessed in terms of the basic components of drug dependence which include: (1) attempts to cut down on use of a drug, (2) tolerance or using larger amounts of the drug in order to experience the same effect, (3) daily use of the drug, (4) dependence on the drug, and (5) withdrawal symptoms such as sickness when a person cuts down or stops use. To assess the extent to which these components of dependence are experienced in the general population, the respondents were presented with a series of questions about marijuana, cocaine, cigarettes, and alcohol (tables 73-76).

Marijuana and Dependence

Reports of these components of dependence on marijuana by age group are shown in table 73 and parallel the difference by age group in rates of marijuana use, with higher rates for the 18-25 and 26-34 year-olds, followed by the 12-17 year-olds, and persons 35 years old and older. When only users of marijuana are considered, the rates are noticeably higher. Of those who have ever use marijuana, 21.0% reported trying to

cut down on their consumption, and 17.4% of the users reported daily use at some time.

When the sample is limited to those who have used marijuana 11 or more times in their life, the rates for components of dependence become more striking. Over one-third (37.2%) of those who used marijuana 11 or more times reported having tried to cut down on their use of the drug, and 34.8% of these users reported daily use at some time. Perhaps the most interesting finding is that 13.1% of all persons who have used marijuana 11 or more times reported feeling a need for marijuana or dependence on it. It is especially important to note that 23.8% of the 12-17 year-olds who had used marijuana 11 or more times reported a sense of being dependent on it.

Cocaine and Dependence

Of those who have ever used cocaine, 15.0% reported trying to cut down on their use, 8.1% reported using larger amounts to get the same effect, and 7.7% reported daily use at some time. About 3 out of 10 (31.2%) of those who have used cocaine 11 or more times reported trying to cut down. About 1 in 5 (20.8%) who have used cocaine 11 or more times reported using larger amounts to get the same effect, and 18.0% reported daily use of cocaine at some time.

Cigarettes and Dependence

The data in table 75 show that persons who smoke cigarettes often reported symptoms of dependence. Among those who currently smoked a pack or more of cigarettes a day, 84.3% have tried to cut down, 23.9% have used larger amounts to get the same effect, and 79.2% reported a need for or dependence on cigarettes (i.e., nicotine). One-third of the persons who currently smoke a pack or more of cigarettes a day felt sick when they stopped or cut down on their use.

Alcohol and Dependence

Some 51.6% of the respondents who reported having five or more drinks on the same occasion on five or more of the past 30 days have tried to cut down on their consumption of alcohol, 29.8% reported using larger amounts of alcohol to get the same effect, and 51.3% reported using alcohol daily for at least two weeks at some point in their lives.

NEGATIVE DRINKING EXPERIENCES

The extent to which past year drinkers in the four age groups had each of 18 negative drinking experiences in the past year is shown in table 77. Among the 12-17 year-olds, the most widely reported results of drinking during the past year are tossing down drinks fast to get an effect (29.2%) and being unable to remember what happened while drinking or intoxicated (24.7%). Among the 18-25 year-olds, the most widely reported experiences are aggressiveness (28.4%) and being unable to remember what happened (26.1%). The same two items are the most common negative experiences for the 26-34 year-olds. Finally, among those 35 years old and older, the items checked most often are aggressiveness (14.3%) and advice from a partner that he or she should cut down on use of alcohol (10.7%). It is important to note that 12.7% of the 12-17 year-olds, 8.7% of the 18-25 year-olds, 10.6% of the 26-34 year-olds, and 6.1% of those 35 and older who drank alcohol in the past year indicated a fear that they "might be or become" an alcoholic.

In table 78, persons who drank in the past year are categorized according to frequency of intoxication, and there is a clear monotonic relationship between frequency of intoxication and the 18 negative drinking experiences. Among the persons who indicated that they were never intoxicated in the past year, 7.0% stated that they were aggressive while drinking. The comparable figure for persons who were intoxicated about once a month is 32.7%, while 49.3% of the individuals who were intoxicated at least twice a month said they were aggressive while drinking. Approximately 4 in 10 of the respondents who reported being intoxicated at least twice a month reported heated arguments while drinking (41.4%) and tossing down drinks to obtain an effect (39.9%). Some 3.0% of the respondents who were never intoxicated in the past year indicated that they were unable to remember what happened while they were drinking; in comparison, this experience was reported by 54.1% of those who were intoxicated at least twice a month.

TABLE 71. PERCENT OF ALL RESPONDENTS WHO REPORT PAST YEAR PROBLEMS RESULTING FROM THEIR ALCOHOL OR DRUG USE BY AGE GROUP: 1985

PROBLEMS ASSOCIATED WITH DRUGS OR DRINKING DURING PAST YEAR[1]	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
Became depressed or lost interest in things.	6.2	10.6	8.4	3.2	5.8
Had arguments and fights with family or friends.	7.0	13.4	9.5	3.4	6.7
Had trouble at school or on the job.	3.2	4.0	2.1	1.0	2.0
Drove unsafely.	3.1	15.8	12.9	3.6	7.4
At times, I could not remember what happened to me.	7.0	13.6	7.7	2.3	5.8
Felt completely alone and isolated.	3.3	6.1	3.6	1.8	3.0
Felt very nervous and anxious.	7.0	11.1	7.1	3.0	5.6
Had health problems.	2.4	3.6	3.3	3.1	3.1
Found it difficult to think clearly.	9.5	16.7	10.3	3.9	7.9
Had serious money problems.	1.8	4.0	2.7	1.3	2.1
Felt irritable and upset.	4.6	9.0	8.0	2.9	5.1
Got less work done than usual at school or on the job.	4.4	7.8	5.3	1.5	3.6
Felt suspicious and mistrustful of people.	2.7	5.5	3.2	1.4	2.6
Had trouble with the police.	2.4	5.7	2.1	1.0	2.1
Skipped four or more regular meals in a row.	1.5	5.9	3.0	1.2	2.4
Found it harder to handle my problems.	2.3	4.4	3.3	1.3	2.3
Had to get emergency medical help.	*	1.5	1.1	0.7	0.8

* Less than one-half of one percent.

[1] Respondents who did not use alcohol or drugs are coded as not having problems. Respondents who skipped the problems questions even though they used one or more substances in the past year are also coded as not having problems. The majority of past year users who failed to answer the problems questions were smokers or occasional (less than weekly) drinkers who most likely did not consider themselves to have any drug problems. These figures, therefore, slightly underestimate the prevalence of perceived problems. The largest percentage difference between the two methods of calculating problem rates is 3.2 for "Found it difficult to think clearly" (11.1% vs. 7.9%).

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 72. PERCENT OF PAST YEAR USERS OF CIGARETTES, ALCOHOL, MARIJUANA, AND COCAINE WHO ATTRIBUTE PAST YEAR PROBLEMS TO THOSE SUBSTANCES: 1985

PROBLEMS ASSOCIATED WITH DRUGS OR DRINKING DURING PAST YEAR[1]	DRUG USED IN PAST YEAR			
	Cigarettes	Alcohol	Marijuana	Cocaine
(Unweighted N)	(2,810)	(5,351)	(1,553)	(596)
Became depressed or lost interest in things.	1.4	4.9	6.4	5.0
Had arguments and fights with family or friends.	1.6	6.5	4.2	3.4
Had trouble at school or on the job.	0.6	1.4	2.6	0.6
Drove unsafely.	*	8.6	3.4	2.3
At times, I could not remember what happened to me.	*	6.4	2.7	1.2
Felt completely alone and isolated.	*	2.5	2.8	1.6
Felt very nervous and anxious.	2.7	2.4	5.6	9.8
Had health problems.	2.8	1.5	1.3	1.5
Found it difficult to think clearly.	*	7.6	10.6	2.2
Had serious money problems.	0.7	1.2	1.5	3.4
Felt irritable and upset.	2.0	3.9	2.5	5.3
Got less work done than usual at school or on the job.	0.6	2.6	5.6	1.3
Felt suspicious and mistrustful of people.	*	1.7	4.4	1.9
Had trouble with the police.	*	2.0	1.2	0.8
Skipped four or more regular meals in a row.	*	1.5	1.1	5.1
Found it harder to handle my problems.	*	2.0	2.3	2.2
Had to get emergency medical help.	*	0.6	*	0.5

* Less than one-half of one percent.

[1]Respondents who did not complete the problems answer sheet are coded as not experiencing any past year problems. The majority of past year users who failed to answer the problems questions were smokers or occasional (less than weekly) drinkers who most likely did not consider themselves to have any drug problems. These figures slightly underestimate the prevalence of perceived problems. The largest percentage difference between the two methods of calculating problems is 2.9 for the percent of drinkers who report they drove unsafely as a result of their alcohol use (8.6% vs. 11.5%).

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 73. PERCENT REPORTING PROBLEMS IN LIFETIME ATTRIBUTED TO USE OF MARIJUANA BY AGE GROUP FOR THE TOTAL SAMPLE, USERS ONLY, AND THOSE WHO HAVE USED ELEVEN OR MORE TIMES: 1985

PROBLEMS IN LIFETIME ATTRIBUTED TO MARIJUANA USE	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
		A. TOTAL SAMPLE			
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
Tried to cut down	9.0	15.8	13.0	1.4	6.9
Larger amounts	3.8	7.6	4.5	*	2.8
Every day	4.1	12.2	12.3	1.5	5.7
Needed, dependent	2.4	4.4	4.0	0.6	2.1
Withdrawal symptoms	1.0	1.6	1.7	*	0.8
		B. USED MARIJUANA AT LEAST ONCE			
(Unweighted N)	(491)	(967)	(1,111)	(276)	(2,845)
Tried to cut down	38.0	25.9	21.9	8.6	21.0
Larger amounts	16.1	12.6	7.7	2.2	8.5
Every day	17.6	20.2	20.9	9.4	17.4
Needed, dependent	10.2	7.3	6.7	3.8	6.4
Withdrawal symptoms	4.2	2.7	3.0	1.5	2.6
		C. USED MARIJUANA 11 OR MORE TIMES			
(Unweighted N)	(183)	(490)	(607)	(94)	(1,374)
Tried to cut down	61.0	40.9	34.7	25.0	37.2
Larger amounts	35.8	21.9	13.2	7.4	17.0
Every day	41.1	35.1	35.4	29.2	34.8
Needed, dependent	23.8	13.0	11.4	13.0	13.1
Withdrawal symptoms	9.7	4.7	5.0	5.1	5.2

* Less than one-half of one percent.

Questions: (1) Have you ever tried to cut down on your use of any of these drugs? (2) Circle the number next to each drug for which you have needed larger amounts to get the same effect or that you could no longer get high on the amount you used to use. (3) Circle the number next to each drug you have ever used every day or almost daily for two or more weeks in a row. (4) Circle the number next to each drug you felt you needed or were dependent on. (5) Circle the number next to each drug for which you've had withdrawal symptoms, that is, you felt sick because you stopped or cut down on your use of it.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 74. PERCENT REPORTING PROBLEMS IN LIFETIME ATTRIBUTED TO USE OF COCAINE BY AGE GROUP FOR THE TOTAL SAMPLE, USERS ONLY, AND THOSE WHO HAVE USED ELEVEN OR MORE TIMES: 1985

PROBLEMS IN LIFETIME ATTRIBUTED TO COCAINE USE	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
A. TOTAL SAMPLE					
(Unweighted N)	(2,286)	(1,813)	(2,166)	(1,813)	(8,038)
Tried to cut down	1.2	3.6	4.5	0.5	1.9
Larger amounts	0.7	1.7	2.7	*	0.9
Every day	0.7	1.2	2.1	*	0.9
Needed, dependent	*	0.6	1.3	*	*
Withdrawal symptoms	*	0.5	0.9	*	*
B. USED COCAINE AT LEAST ONCE					
(Unweighted N)	(107)	(373)	(425)	(76)	(981)
Tried to cut down	24.8	14.0	17.1	10.1	15.0
Larger amounts	13.7	6.8	11.2	2.8	8.1
Every day	13.7	4.7	8.6	10.2	7.7
Needed, dependent	5.8	2.6	5.4	1.4	3.7
Withdrawal symptoms	7.9	2.1	3.6	4.3	3.4
C. USED COCAINE 11 OR MORE TIMES					
(Unweighted N)	(18)	(125)	(162)	(19)	(324)
Tried to cut down	48.5	33.0	32.3	20.0	31.2
Larger amounts	35.8	20.7	24.5	5.7	20.8
Every day	38.0	12.4	19.3	21.7	18.0
Needed, dependent	14.6	5.7	12.3	4.6	9.1
Withdrawal symptoms	14.0	4.4	8.2	4.6	6.7

* Less than one-half of one percent.

Questions: (1) Have you ever tried to cut down on your use of any of these drugs? (2) Circle the number next to each drug for which you have needed larger amounts to get the same effect or that you could no longer get high on the amount you used to use. (3) Circle the number next to each drug you have ever used every day or almost daily for two or more weeks in a row. (4) Circle the number next to each drug you felt you needed or were dependent on. (5) Circle the number next to each drug for which you've had withdrawal symptoms, that is, you felt sick because you stopped or cut down on your use of it.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 75. PERCENT REPORTING PROBLEMS IN LIFETIME ATTRIBUTED TO USE OF CIGARETTES BY AGE GROUP FOR THE TOTAL SAMPLE, USERS ONLY, AND THOSE WHO CURRENTLY SMOKE ABOUT A PACK OR MORE A DAY: 1985

PROBLEMS IN LIFETIME ATTRIBUTED TO CIGARETTE USE	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
A. TOTAL SAMPLE					
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
Tried to cut down	16.5	37.9	44.6	46.2	41.1
Larger amounts	4.2	8.7	10.4	9.3	8.8
Every day	12.7	35.4	42.4	44.0	38.6
Needed, dependent	9.1	25.1	31.5	33.0	28.6
Withdrawal symptoms	3.6	10.0	13.6	14.7	12.4
B. USED CIGARETTES AT LEAST ONCE					
(Unweighted N)	(892)	(1,255)	(1,633)	(1,325)	(5,105)
Tried to cut down	36.6	49.9	54.7	57.4	54.2
Larger amounts	9.1	11.6	12.9	11.6	11.7
Every day	27.7	46.8	52.4	54.8	51.1
Needed, dependent	20.2	33.4	38.9	41.1	37.9
Withdrawal symptoms	7.7	13.3	16.8	18.4	16.5
C. CURRENTLY SMOKE ABOUT A PACK OR MORE PER DAY					
(Unweighted N)	(48)	(241)	(419)	(302)	(1,010)
Tried to cut down	77.0	84.8	86.2	83.6	84.3
Larger amounts	38.4	26.2	27.8	21.0	23.9
Every day	94.1	89.9	91.8	91.2	91.2
Needed, dependent	84.4	76.6	75.9	81.2	79.2
Withdrawal symptoms	28.9	33.2	34.0	33.2	33.3

Questions: (1) Have you ever tried to cut down on your use of any of these drugs? (2) Circle the number next to each drug for which you have needed larger amounts to get the same effect or that you could no longer get high on the amount you used to use. (3) Circle the number next to each drug you have ever used every day or almost daily for two or more weeks in a row. (4) Circle the number next to each drug you felt you needed or were dependent on. (5) Circle the number next to each drug for which you've had withdrawal symptoms, that is, you felt sick because you stopped or cut down on your use of it.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 76. PERCENT REPORTING PROBLEMS IN LIFETIME ATTRIBUTED TO USE OF ALCOHOL BY AGE GROUP FOR THE TOTAL SAMPLE, USERS ONLY, AND THOSE WHO HAD 5 OR MORE DRINKS ON THE SAME OCCASION ON 5 OR MORE OF THE PAST 30 DAYS: 1985

PROBLEMS IN LIFETIME ATTRIBUTED TO ALCOHOL USE	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
		A. TOTAL SAMPLE			
(Unweighted N)	(2,246)	(1,813)	(2,166)	(1,813)	(8,038)
Tried to cut down	11.8	28.8	26.5	19.1	21.3
Larger amounts	6.7	13.8	10.7	4.1	7.3
Every day	3.1	13.5	17.8	15.0	13.9
Needed, dependent	2.5	5.0	7.7	4.4	4.9
Withdrawal symptoms	1.4	3.0	4.1	2.0	2.5
		B. USED ALCOHOL AT LEAST ONCE			
(Unweighted N)	(1,116)	(1,578)	(1,942)	(1,486)	(6,122)
Tried to cut down	21.5	31.1	28.4	21.8	24.8
Larger amounts	12.2	14.9	11.5	4.7	8.6
Every day	5.6	14.6	19.2	17.1	16.2
Needed, dependent	4.5	5.4	8.3	5.0	5.7
Withdrawal symptoms	2.6	3.2	4.4	2.3	2.9
		C. FIVE OR MORE DRINKS ON SAME OCCASION ON FIVE OR MORE DAYS IN PAST 30 DAYS			
(Unweighted N)	(62)	(154)	(171)	(87)	(474)
Tried to cut down	34.2	50.1	52.9	54.7	51.6
Larger amounts	50.5	39.7	31.3	16.5	29.8
Every day	32.6	46.1	41.9	66.1	51.3
Needed, dependent	10.4	14.8	21.9	22.7	19.4
Withdrawal symptoms	4.1	7.2	14.5	15.9	12.2

Questions: (1) Have you ever tried to cut down on your use of any of these drugs? (2) Circle the number next to each drug for which you have needed larger amounts to get the same effect or that you could no longer get high on the amount you used to use. (3) Circle the number next to each drug you have ever used every day or almost daily for two or more weeks in a row. (4) Circle the number next to each drug you felt you needed or were dependent on. (5) Circle the number next to each drug for which you've had withdrawal symptoms, that is, you felt sick because you stopped or cut down on your use of it.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 77. PERCENT OF PAST YEAR DRINKERS REPORTING PROBLEMS IN THE PAST YEAR ASSOCIATED WITH THEIR ALCOHOL USE BY AGE GROUP: 1985

PROBLEMS ASSOCIATED WITH DRINKING DURING PAST YEAR[1]	AGE GROUP (YEARS)				
	12-17	18-25	26-34	35 +	Total
(Unweighted N)	(1,017)	(1,469)	(1,744)	(1,121)	(5,351)
Aggressive or cross while drinking.	21.2	28.4	23.6	14.3	19.8
Heated argument while drinking.	11.1	18.8	13.8	7.5	11.5
Stayed away from work or school.	4.8	11.2	6.8	1.3	4.8
High or tight on job or at school.	9.5	9.1	4.9	1.6	4.4
Lost or nearly lost job.	0.9	1.2	1.8	1.1	1.3
Partner told me I should cut down.	11.3	10.4	12.4	10.7	11.0
Relative told me I should cut down.	6.0	8.5	7.4	5.6	6.6
Friend told me I should cut down.	5.8	5.2	4.2	3.2	4.0
Tossed down drinks fast to get effect.	29.2	21.6	14.0	4.4	11.9
Afraid I might be or become alcoholic.	12.7	8.7	10.6	6.1	8.1
Stayed drunk for more than one day.	6.8	7.0	4.6	2.0	4.0
Difficult for me to stop drinking.	9.5	10.6	10.0	3.7	7.0
Unable to remember what happened.	24.7	26.1	16.6	7.5	14.6
Quick drink when no one was looking.	17.7	4.0	4.5	2.1	4.2
Drink first thing in morning.	1.6	1.9	1.9	1.9	1.9
Hands shook after drinking day before.	3.9	7.9	4.3	2.6	4.2
Got high or tight while drinking alone.	9.0	8.0	12.0	8.4	9.1
Keep on drinking after promising myself not to.	8.3	7.9	8.6	5.1	6.7

[1]Only respondents who report having had at least one drink in the past 12 months are included.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 78. PERCENT OF PAST YEAR DRINKERS REPORTING PROBLEMS IN THE PAST YEAR ASSOCIATED WITH THEIR ALCOHOL USE BY FREQUENCY OF BEING DRUNK: 1985

PROBLEMS ASSOCIATED WITH DRINKING DURING PAST YEAR[2]	FREQUENCY DRUNK IN PAST YEAR[1]		
	At Least Twice a Month	About Once a Month or Less Often	None in Past Year
(Unweighted N)	(560)	(1,942)	(2,821)
Aggressive or cross while drinking.	49.3	32.7	7.0
Heated argument while drinking.	41.4	16.1	3.8
Stayed away from work or school.	17.8	8.2	0.6
High or tight on job or at school.	22.2	5.6	0.8
Lost or nearly lost job.	6.6	1.7	*
Partner told me I should cut down.	36.9	15.2	4.3
Relative told me I should cut down.	27.1	8.3	2.3
Friend told me I should cut down.	20.1	4.9	0.9
Tossed down drinks fast to get effect.	39.9	20.2	2.2
Afraid I might be or become alcoholic.	26.2	11.6	3.0
Stayed drunk for more than one day.	23.5	4.2	0.8
Difficult for me to stop drinking.	28.7	10.7	1.2
Unable to remember what happened.	54.1	23.0	3.0
Quick drink when no one was looking.	16.0	4.8	1.9
Drink first thing in morning.	11.3	1.6	0.6
Hands shook after drinking day before.	15.1	6.7	0.8
Got high or tight while drinking alone.	30.0	15.3	2.0
Keep on drinking after promising myself not to.	25.1	9.6	1.9

* Less than one-half of one percent.

[1]At Least Twice a Month includes respondents who reported getting "very high or drunk on alcohol" in the past 12 months at least "several times a month or about 25 to 51 days a year." About Once a Month or Less Often includes respondents who reported getting "very high or drunk on alcohol" at least once but no more than 24 days in the past 12 months.

[2]Only respondents who report having at least one drink in the past 12 months are included.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

METHODS APPENDIX

SECTION A: DEFINITION OF THE SAMPLE AND WEIGHTING PROCEDURES

SECTION B: SAMPLING AND STATISTICAL INFERENCE

SECTION C: QUALITY OF THE DATA

METHODS APPENDIX

SECTION A: DEFINITION OF THE SAMPLE AND WEIGHTING PROCEDURES

Three race/ethnicity groups (whites/others, blacks, and Hispanics) and four age groups (12-17, 18-25, 26-34, and 35 and over) comprised the major sampling domains of the 1985 National Household Survey on Drug Abuse. The household population of the continental United States age 12 and over was sampled via a stratified multi-stage area probability design featuring an oversampling of blacks, Hispanics, and the three younger age groups. Selection of sampling locations, households, and eligible persons within households was designated by the sampling plan. Listers and interviewers were not permitted to make substitutions.

Sample Design

A number of study requirements were merged in the sample design. These include three major elements. First, ISR's 100 Primary Sampling Unit (PSU) National Sampling Frame was adapted to the requirements of the present National Household Survey. Utilizing data from the 1980 Census, the sampling frame provides the basis for accurate samples drawn for the period 1982-1992.[1] Second, the ISR National Sampling Frame was supplemented with 12 additional PSUs to reduce the average cluster sizes of the PSUs with significant minority populations. Third, blacks, Hispanics, and the three younger age groups (12-34) were oversampled. Probability procedures were employed to set selection rates for these groups at a higher level than those for whites and persons 35 and over. This was done in order to provide a larger base for the study analysis, because of the presumed higher incidence of drug use in these groups.

Development of the sample proceeded in a series of steps. First, the 100 PSU sampling frame was supplemented with an additional six "black" PSUs and six "Hispanic" PSUs yielding a 112 PSU national sample. These primary areas consist of counties or groups of counties stratified by geographic region, metropolitan status, race/ethnicity, and other population characteristics.

Second, 1,600 Secondary Sampling Units (SSUs) were selected from a pool of 5,200 in the national sample. SSUs are defined as Census enumeration districts or block groups which contained a minimum of 44 housing units in 1980.

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[1]All measures of size used in constructing the sampling frame were based on 1985 population projections. Using results from the 1970 and 1980 Census of the United States, the projection was a simple extrapolation of growth from that observed from 1970 to 1980. The actual calculation was: MOS=1980 population + 1/2 (1980 population - 1970 population).

Third, one tertiary unit called a Listing Area (LA) was selected from each SSU. Each LA contained an average of 44 housing units. Housing unit addresses in all LAs selected for the study were prelisted.

Fourth, a standard procedure for sampling within housing units was followed. Specific housing unit addresses to be contacted for the survey were selected and sent an advance mailing of a letter urging cooperation. Each sample household was screened by an interviewer to obtain the household composition and to determine eligibility of residents. Finally, a random selection among eligible household members was made to determine who to interview. A specific selection scheme was assigned to each sample household and one eligible was chosen per household. This differs from previous surveys when more than one member of a household could be selected.

Selection of primary sampling units

In developing ISR's 100 PSU National Sample, the coterminous United States was first divided into primary sampling units of approximately the same population size. Each unit is a well-defined geographic area, usually a county or a group of counties, with a minimum population of 150,000. Primary sampling units are of two general types: (1) metropolitan and (2) nonmetropolitan areas.

Metropolitan PSUs. In most cases, metropolitan primary sampling units are Standard Metropolitan Statistical Areas (SMSAs) or Standard Consolidated Areas (SCAs). In the 1980 Census definition, each SMSA is a county or group of counties with a minimum population of 50,000. In addition to the county or counties containing a central city or cities, contiguous counties are included in an SMSA if, according to certain criteria, they are essentially metropolitan in character and are socially and economically integrated with the central city. SCAs are groups of two or more adjoining SMSAs in which metropolitan development has progressed to the point that the entire area is economically and socially interrelated.

In the ISR sample, exceptions to the SMSA definitions were of two general types:

In New England, SMSAs consist of towns and cities, rather than counties. In the ISR sample, the county was retained as the basic level for formation of primary sampling units. Thus, the primary sampling units may include all or part of two or more SMSAs.

Metropolitan PSUs did not cross Census region boundaries. Whenever an SMSA contained counties in more than one region, it was split into regional components and, if necessary, combined with other counties to achieve the minimum population standard.

Nonmetropolitan PSUs. Nonmetropolitan primary sampling units consist of one or more counties with a minimum projected population of 150,000. This minimum size was intended to create PSUs of sufficient population size to serve diverse survey needs, including sampling of special populations, over a long period of time.

A number of criteria were used in combining counties to form primary sampling units to meet the minimum size requirement:

1. Whenever possible, a city or large town was the central point for the PSU.
2. Convenience of travel to different parts of the PSU from the central point.
3. Heterogeneity of population characteristics.

When defining PSUs, counties were first subdivided into two groups: (1) those which would be included as "self-representing" areas and (2) the rest of the country.

Self-representing areas. When an SCA or an SMSA contained sufficient numbers of people living in one location to constitute at least 1% of the projected national population for 1985, it was designated as "self-representing." There were 18 self-representing areas and they collectively included a total projected population of 84.6 million, 36% of the national total. Thus, the 18 self-representing PSUs contained 36 PSU equivalents in the ISR 100 PSU National Sampling Frame.

The rest of the country. When an SMSA or county had a population of 150,00 or more, it was defined to be a PSU; when an SMSA or county had a smaller population, it was combined with adjacent counties or a nearby SMSA to form PSUs which were clusters of counties having populations of 100,000 or more. A total of 32 strata, each with total projected population of 4.2 to 5.2 million were thus created. They collectively included a projected population of 150.4 million, or 64% of the national total.

By specifying the self-representing areas, strata of the largest SMSAs were already created. For the rest of the country, criteria for creating strata were established with the aim of increasing their homogeneity. Actual criteria used in the stratification and the order of priority assigned to them were:

Geographic region. Within a stratum, all PSUs are in the same Census geographic region (Northeast, North Central, South, or West). For a listing of states included within each division see the Key Definitions section of this volume.

Metropolitan status. Except for two instances, all non-self-representing PSUs were stratified into metropolitan or nonmetropolitan strata. A PSU was metropolitan if all of its constituent counties were part of an SMSA.

Within these categories further strata were defined using one or more of the following measures: population or degree of urban density, economic growth rates, racial composition, the proportion of the population that was Spanish Origin, percent of manufacturing jobs, per

capita income, proximity to large SMSAs, and geographic location within a region.[2]

A total of 32 non-self-representing strata that included two or more PSUs were created using the above criteria. From each stratum, two PSUs were selected independently (i.e., with replacement) and with probability proportional to size (pps). Together with the 36 self-representing PSU equivalents, the ISR national sample includes a total of 100 primary areas.

As previously mentioned, the 100 PSU National Frame was supplemented with 12 additional PSUs in order to reduce the average cluster sizes of those PSUs with significant minority pcpulations. Six PSUs were targeted for the black oversample, and six were designated for the Hispanic sample. Black and Hispanic supplemental PSUs were determined independently. Naturally, their selection necessitated changes in the structure and specification of the national sampling frame.

The self-representing PSUs in the ISR frame contain about 45% of the total black population according to the 1980 Census data. Roughly three quarters of the remaining black population resides in the South. Thus, black supplemental PSUs were confined to the Southern states. Three of thirteen Southern non-self-representing PSU strata in the ISR frame were constructed on the basis of high black population density (25% or more). One of these strata comprised rural PSUs while the remaining two contained metropolitan areas. In addition to the two PSUs already selected from each of these strata into the 100 PSU National Frame, two selections were drawn with pps from each, yielding six supplemental PSUs. Thus four PSUs represent each of the three black strata.

Hispanic supplemental PSUs were determined differently. About 88% of the Spanish Origin population resided within SMSAs in 1980. PSU supplementation was, therefore, restricted to metropolitan areas. All SCAs and SMSAs were ranked according to 1980 Spanish Origin population, and those with Spanish Origin populations exceeding 150,000 were designated as self-representing. All SCAs and two SMSAs were already self-representing and thus had no effect on the ISR frame. Three SMSAs had already been selected into the ISR National Sample as non-self-representing.

Six previously unselected PSUs were added to the national sample as self-representing Hispanic supplements. In total, the self-representing areas in the sample contained roughly two-thirds of the total population of persons of Spanish Origin in the United States.

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[2]Not every measure was applied to every region or type of PSU and not every attempted measure provided enough information to define a stratum.

The ISR National Frame was altered to reflect the fact that non-self-representing PSUs were now self-representing. The net effect on the ISR frame was that nine PSUs were deleted from five strata. Stratum population totals were adjusted to their new sizes, and in one case, two strata were collapsed to preserve the paired selections design.

Selection of secondary sampling units

The second stage of selection was accomplished in three steps: (1) creation of SSUs; (2) stratification of SSUs; and (3) selection of SSUs. SSUs were defined as enumeration districts (EDs) or block groups (BGs) which contained a minimum of 44 housing units in 1980. Whenever an ED or BG did not meet the minimum, it was combined with neighboring units until this criterion was satisfied. Within each PSU, SSUs were assembled into three strata:

- an Hispanic stratum, consisting of all SSUs with 15% or more Spanish Origin population in 1980;
- a black stratum, composed of all non-Hispanic SSUs with 10% or more black population;
- a balance stratum of all remaining SSUs.

Relative to the balance stratum, Hispanic SSUs were oversampled by a factor of 8.7, while black SSUs were oversampled by a factor of 3.68.

A total of 1,600 SSUs were drawn, of which 500 were Hispanic, 500 were black, and 600 were from the balance stratum. This large number of SSUs was drawn in order to curb the ill effects of intraclass correlations associated with sampling within PSUs.

Selection of tertiary sampling units

In the third stage of selection, a single sampling unit called a Listing Area (LA) was selected from each SSU. The selection was made with pps using 1980 Census data and the SSU selection probability. Each LA contained about 44 housing units on average. The resultant sample of LAs comprised an equal probability sample within the black, Hispanic, and balance strata. The overall equation may be written as follows: For an LA in non-self-representing PSU_i, in SSU $stratum_j$:

$$f_j = \frac{(2)\ PSU_i}{\text{Stratum total}} \times \frac{(K_j)\ NUMLA}{TOTLA_i} \times \frac{1}{NUMLA}$$

where stratum total is the 1985 projected population total within the PSU stratum, PSU_i is the 1985 projected population total for PSU_i; K_j represents the relative rates of oversampling in the minority SSU strata, $TOTLA_i$ represents the number of Listing Areas in PSU_i (based on 1980 Census data), and NUMLA is the number of Listing Area equivalents in the SSU. The last factor, (1/NUMLA), illustrates the selection of a single LA from each SSU with pps. For self-representing PSUs, the "first" stage selection probability is one, and the "second" stage fraction is adjusted slightly.

To make segment and housing unit assignments once the listing areas were selected, trained listers were sent to the field for the prelisting or enumeration of households. LAs were clearly defined geographic units bounded by streets, railroads, streams, or other landmarks. Census maps, detailed sketches, instructions and enumeration sheets were provided for these assignments. The prelistings provided close central office control over selection of the final sample of households and permitted the mailing of a letter in advance of the interviewer visits to sample households (except in certain areas, primarily rural where specific addresses were unobtainable).

Returned listings were systematically checked in ISR's Sampling Department. If no corrections were needed, segments were formed and sample households were randomly selected in small clusters of housing units. A total of 6,400 segments of about four or five households were sampled at a constant rate of 1/2.78 within each LA. (However, households were selected at a 20% higher rate for LAs in the Hispanic SSU stratum.)

Probability procedures used for the selection of sample areas, interviewing locations, segments, and housing units were such that white households in the coterminous United States had an equal overall probability of selection. Black households had an equal chance of selection in the black and Hispanic SSU strata, but were undersampled in the balance stratum. Hispanic households had three separate selection rates, depending on their SSU stratum membership.

Sampling within housing units

A combined Screening/Call Report Form for each sample housing unit provided the interviewer with a prescribed series of steps for obtaining a listing of residents of the household and for selecting respondents within eligible age/ethnicity ranges. On the first page of the Screening/Call Report Form, the interviewer recorded the date, time, and result of each contact with the household. Pages 2 and 3 contained questions that were asked when listing residents of a household and were color-coded as an aid to determining eligibility based on ethnicity and age.

Minorities and younger household members were oversampled by restricting the eligibility of potential respondents to specific age groups and races/ethnicities. Eligible members were identified by simply following the instructions on the Screening Form. Nine versions of the Screening Form were employed, combining three age group eligibility rules (12-17, 12-34, 12 and over) with three race/ethnicity rules (Hispanic only, black and Hispanic only, no race/ethnicity restriction). The Screening Forms were allocated randomly to households in prespecified proportions.

The eligibility rule and allocation rate are presented below. The relative rates of oversampling households by the race/ethnicity of the household head are presented in table 79 in the following section on Weighting Procedures.

Eligibility Rule	Allocation Rate
12-17	1 / 3.45
12-34	1 / 2.22
12 and over	1 / 3.85

If only one person in the age/ethnicity group designated on the Screening Form resided in the household, that person was the designated respondent. If there were two or more household members in the designated age/ethnicity group, one was randomly chosen using selection tables developed by Kish (1949).[3] Selection tables are set up so that respondents are selected half of the time when there are two eligible members in a household, a third of the time when there are three eligible persons, and so forth.[4]

Probabilities of selection thus varied with the composition of the household for different age/ethnicity groups and with the number of residents within the selected age group. Weighting procedures were used to compensate for differences in selection rates. In general, the weights were inversely proportional to the probabilities of selection.

Weighting Procedures

Adjustments were utilized in the processing of survey results to compensate for unequal probabilities of selection and differential levels of nonresponse across demographic subgroups. In addition, a poststratification adjustment was employed to yield demographic totals that match estimates developed from the July 1985 Current Population Survey (CPS) and the 1980 Census. Consequently, the "final weight" assigned to each respondent was the product of the basic sampling weight and two adjustment factors, each of which will be discussed below.

Basic sampling weight

The basic sampling weight is defined as the reciprocal of a respondent's probability of selection. A separate weight factor is required for each step of the sampling process in which differing probabilities are used. In accordance with the sampling plan, four such weight factors were required:

(1) A weight factor compensating for disproportionate stratified sampling of households in three Secondary Sampling Unit (SSU) strata (balance, black, and Hispanic).

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[3]Leslie Kish, (1949) "A procedure for objective respondent selection within the household." Journal of the American Statistical Association 44:380-387.

[4]There is a negligible bias in selection for households with five eligible persons and in households with more than six eligible persons. See Kish (1949) for details.

(2) A weight factor compensating for unequal probability sampling based on the race/ethnicity of households. In order to reduce weighting effects, nonminority households were subselected in the minority strata to yield an equal probability sample of "white" (i.e., non-black, non-Hispanic) households. The unequal sampling rates for "white," black, and Hispanic households are shown in table 79.

(3) A weight factor compensating for unequal probability sampling of younger persons. Within selected households, members ages 12 to 17 years-old were selected at 3.85 times the rate of adults over 34; persons ages 18 to 34 years-old were oversampled by a factor of 2.73.

(4) A weight factor compensating for the random selection of a respondent when multiple members were eligible to be interviewed. Here, the probability is simply equal to one divided by the total number of eligible persons.

Adjustments

The final weight also incorporates two adjustment factors. The first factor compensates for differential response rates across demographic subgroups. These weights were created by calculating response rates separately within cells of a classification of the following demographic variables: race/ethnicity, age groups, region, and population density. The adjustment is equal to the inverse of the response rate in a given cell which was then allocated to respondents in their respective cells.

A second adjustment factor compensates for residual deviation of selected demographic characteristics of the sample from parameter data, based on the 1985 Current Population Survey and the 1980 Census. This adjustment, called poststratification, was designed to make the survey data approximately match 1985 CPS population distributions. To accomplish this the adjustment was based on the most recent data from a variety of sources.[5] Population controls were created using a 32-cell crosstabulation of sex (2 groups) by race/ethnicity (4 groups) by age groups (4 groups). In addition, regional controls were also imposed.

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[5]U.S. Bureau of the Census:
-Unpublished CPS counts of the civilian noninstitutionalized population, as of July 1, 1985;
-Current Population Reports, Series p-20, No. 398, issued April, 1985;
-1980 Public Use Micro Sample (PUMS) data tapes, Files A and C;
-Current Population Reports, Series p-20, No. 403, issued December, 1985.

TABLE 79. RELATIVE RATES OF OVERSAMPLING HOUSEHOLDS BY RACE/ETHNICITY OF HOUSEHOLD HEAD AND SECONDARY SAMPLING UNIT (SSU) STRATUM: 1985

	SSU STRATUM		
	Balance	Black	Hispanic
RACE OF HOUSEHOLD HEAD			
Black	1	3.68	3.68
Hispanic	1	3.68	8.70
All Others	1	1	1

Source: NIDA, National Household Survey on Drug Abuse, 1985.

METHODS APPENDIX

SECTION B: SAMPLING AND STATISTICAL INFERENCE

Sampling Error and Confidence Intervals

Estimates which are based on survey data may differ from true population values because of two sources of error: sampling error and nonsampling error. Sampling error denotes the natural variability associated with using a portion of the population (i.e., a sample) to make inferences about the total population. Nonsampling error refers to error due to nonresponse, misreporting, miscoding, and so forth. Estimates of nonsampling error are typically incalculable. However, sampling theory permits the estimation of sampling error when measurable probability sample designs are employed.

The question of how close the estimates are to the population values can be answered in terms of "confidence limits" that describe the relationship between sample estimates and population values--not with certainty but probabilistically. Thus, it is possible to state the probability that a percentage based on a sample will fall within a calculable distance from the population value it is designed to estimate. For example, in the reporting of sample results, it is not uncommon to use expressions like:

1. $p = 60\% \pm 3\%$ (95% confidence)

where p is the estimate based on the sample, and the rest of the expression indicates that the 95% confidence limits are 57% and 63%. This implies that, apart from the effects of nonsampling errors, one may be 95% confident that the true population value lies in the interval between 57% and 63%, with the best point estimate from the sample being 60%.

A more general interpretation involving the 95% confidence level, confidence limits, and confidence intervals would be as follows: If repeated samples of identical design were drawn from the population, and the sample estimate and corresponding upper and lower limits were calculated, then the confidence intervals would contain the true parameter in 95 of 100 samples.[6]

The size of the confidence interval around a percentage is influenced by the sample design (i.e., the method used to select respondents), the sample size (or, in this case, the number of interviews), and by the proportion of survey respondents giving a particular reply. For example, for a multi-stage clustered sample in which respondents are interviewed within primary areas (or clusters),

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[6]Conventionally, confidence limits are computed for the 95% confidence level (as above). Other confidence levels sometimes used are 90% (yielding narrower limits) or 99% or 99.9% (yielding broader limits).

the confidence interval is typically larger than that of a similar sized sample based on simple random sampling. Moreover, the confidence interval is wider for small samples than it is for large samples. For any given sample design and sample size, the confidence interval is also larger when 50% of the respondents express a view than it is when either 10% or 90% do so.

Frequently the confidence interval is estimated by the expression:

$$2.\quad p \pm K\sqrt{p(1-p)/n}$$

where n is the sample size and K is a constant selected to provide the desired level of confidence. This formula yields the kind of symmetric confidence interval shown in expression 1 above. While this approximation is useful and satisfactory for most purposes, it is inappropriate when applied to extreme percentages, especially when based on small samples. For example, the expression:

$$3.\quad p = 1\% \pm 3\% \text{ (95\% confidence)}$$

defines the lower limit of the confidence interval as -2%, which is not possible. In such situations, more precise asymmetric confidence intervals are necessary, in which lower limits and upper limits of the intervals are separately estimated.[7]

Since one is often dealing with small percentages in the National Household Survey, the asymmetric approach was used to calculate each set of confidence limits presented in the National Household Survey on Drug Abuse: Population Estimates 1985. They are also most appropriate to use in calculating a confidence interval around estimates presented in the Main Findings.

To illustrate the formulae used to calculate asymmetric confidence intervals, let p* be the percentage p expressed as a proportion (p* = p/100) and let q* = (1-p*). The lower and upper limits of p* are defined as follows:

$$4.\quad \text{lower limit } (p^*) = \frac{(2np^* + K^2 - 1) - K\sqrt{K^2 - (2 + 1/n) + 4p^*(nq^* + 1)}}{2(n + K^2)}$$

$$5.\quad \text{upper limit } (p^*) = \frac{(2np^* + K^2 + 1) + K\sqrt{K^2 + (2 - 1/n) + 4p^*(nq^* - 1)}}{2(n + K^2)}$$

K is the constant chosen to yield the proper level of confidence (e.g., K = 1.96 for 95 percent confidence limits). The lower and upper limits of the percentage p are obtained by simply multiplying the lower and upper limits of p* by 100.

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[7]The formulas for these calculations are presented in J. L. Fleiss, Statistical Methods for Rates and Proportions. (New York: John Wiley & Sons, Inc., 1981).

Sample Design Effects

In accordance with formula 2 above and the preceding discussion, the variance of the statistic p is expressed by $p(1-p)/n$ under the assumption of an unrestricted simple random sample design. This formula is not appropriate when complex sample designs, like the National Household Survey, are employed. Certain design features affect the variance of survey estimates. These include:

a. Stratification at various stages of the sampling process. Stratification introduces control over the number of respondents obtained in specified subpopulations. Proportionate stratification can be expected to decrease the variance of estimates; disproportionate stratification (oversampling of certain subpopulations and undersampling of others) can either increase or decrease the variance.

b. Clustering in the selection of primary sampling units and in the selection of blocks or segments for interviewing. In general, because of homogeneity within clusters and heterogeneity among clusters, clustering can be expected to increase the variance of estimates.

c. Weighting to compensate for disproportionate stratified sampling and to compensate for unequal probability in the selection of a single individual per household. Variation in weights is likely to increase the variance of estimates.

Because of these factors, sampling error calculations based on a simple random sample will virtually always understate the actual variability of estimates from complex survey designs.

Design effects (DEFF) are calculated to measure the increase in sampling error over that obtained through a simple random sample. For a given survey estimate, the design effect is defined as the ratio of the variance of the estimate based on the actual sample design to that obtained under a simple random sample design (srs) of the same sample size:

$$6. \quad DEFF = V\,(\text{actual}) \;/\; V\,(\text{srs})$$

For instance, a DEFF of 1.80 represents an 80% increase in variance. To calculate a 95% confidence interval where the design effect is 1.80, the square root of the DEFF, 1.34, would be multiplied by the upper and lower limits in expression 2 above, thus widening the confidence limits to $\pm\,(2.62)\,\sqrt{p(1-p)/n}$ rather than $\pm\,(1.96)\,\sqrt{p(1-p)/n}$. Alternately, one can achieve the same result by substituting the effective sample size (n/DEFF) for n in expression 2. This procedure is described later.

For the 1985 National Household Survey, design effects were calculated for percentage prevalence estimates of drug use from three survey variables: drug use in the respondent's lifetime, in the past year, and in the past month. Sixteen specific drugs and drug patterns were utilized:

Cigarettes; Alcohol; Marijuana only; Marijuana; Hallucinogens; PCP; nonmedical use of Psychotherapeutics only; nonmedical use

of Stimulants; nonmedical use of Sedatives; nonmedical use of Tranquilizers; nonmedical use of Analgesics; Cocaine; Inhalants; Heroin; Other illicit drugs; Any illicit drug.

Thus, design effects were calculated for 48 percentage estimates (3x16). This was done separately for each cell (including marginal groups) in a 60 cell cross-classification of sex, age group and race/ethnicity. Averages among the 48 DEFFs in each cell were taken, and these appear in table 80.

Table 80 presents average design effects by sex, age group and race/ethnicity. Average design effects range from 1.001 to 2.250, representing black males at ages 12 to 17 and the total population, respectively. To assess the stability of DEFFs across the three variable types and sixteen drugs, coefficients of variation of the average DEFFs were ascertained for each of the 60 demographic cells. The coefficient of variation (CV) of the average DEFF is defined by ste(DEFF)/DEFF, expressed in percentage points. Ste (DEFF) is the "standard error" of the design effect as measured over the 48 DEFFs in the averaging process.

Table 81 presents the CVs for each demographic cell. If the 48 DEFFs in a cell were all identical, the CV would be zero. On the other hand, if systematic differences occurred by variable or drug type, CVs would be large. All CVs in table 81 are 10 percent or less, and half are under 5 percent. This suggests that the average DEFFs in table 80 are suitable for producing generalized sampling errors across variable type and drugs.

Effective Sample Sizes

One common method of assessing the impact of sample designs on the precision of survey estimates is the use of effective sample sizes. An effective sample size is simply the ratio of the actual sample size to the design effect.

A complex sample of size n has the same precision as that of a simple random sample of size n/DEFF. Hence, n/DEFF is the "effective size" of the complex sample. For instance, the total sample of 8,038 cases in the National Household Survey has an overall design effect of 2.25, and thus attains the same degree of precision as a simple random sample of size 3,572 (i.e., 8,038/2.25 = 3,572).

Naturally, effective sample sizes depend on the subgroup of inference and the statistic used. Since it is not feasible to calculate design effects separately for all variables and subgroups, average design effects like those presented in table 80 are used for all percentage estimates and for the specified subgroups. The DEFFs in table 80 may be used to produce effective sample sizes by demographic subgroups, as shown in tables 82A and 82B.

Table 82A provides effective sample sizes for subgroups of sex, age group, and race/ethnicity. The values are rounded to the nearest hundred for Ns over 1,000 and to the nearest ten when Ns are under 1,000. Effective Ns range from 100 to 3,600, representing Hispanic males at ages 35 and over, and the total sample, respectively. Table 82B provides effective sample sizes by age group and other selected demographic characteristics.

Procedures for Obtaining Confidence Intervals

Confidence limits for percentage estimates are easily obtained by using a step-by-step procedure, as outlined in table 83. In the first step, the effective sample size for the subgroup of inference is extracted from table 82A or 82B. For example, the effective N for all males in the National Household Survey is 1,600 (i.e., the entry in the last column, fifth row of table 82A). The second step involves reference to a table of sampling error ranges using the effective N (extracted from tables 82A,B) and the value of the estimated percentage.

Table 84 provides the range of sampling error, using the asymmetric 95% confidence limits for various levels of observed percentages for samples of certain sizes. The table is arranged with effective sample sizes arrayed in a column on the left-hand side. Across the top are observed percentages from 1% to 50%; across the bottom are percentages from 50% to 99%. To find the confidence interval around an observed percentage, first locate the effective sample size in the left-hand column. Then look to the corresponding negative (-) value, which must be subtracted from the observed percentage to calculate the lower confidence limit. Similarly, the corresponding + value must be added to the observed percentage to calculate the upper limit. For example, if the effective sample size is 1,600 and the observed percentage is 1%:

the lower limit is (1% - 0.4%), or 0.6%;
the upper limit is (1% + 0.7%), or 1.7%.

Table 83 provides these step-by-step guidelines in detail for calculating 95% confidence intervals around percentage estimates, using the information contained in tables 82A,B and table 84. More precise estimates of the confidence interval upper and lower limits can be calculated by substituting n/DEFF for n in expressions 4 and 5.

Statistical Significance of Differences

In comparing two prevalence estimates, each of which is based on a sample or sample subgroup, it must be remembered that both are subject to sampling fluctuations. The fluctuations are quantified in terms of sampling errors, including the design effects discussed previously. Indeed, it would be possible to construct a confidence interval around the observed difference between two percentage estimates. Customarily, however, the observed difference between estimates is evaluated in terms of its statistical significance. "Statistical significance" refers to the probability that a difference as large as that observed would occur by chance if there were no difference in prevalence for the population groups from which the samples were drawn.

In twelve trend tables presented earlier in this volume (tables 6-17) and in explicit comparisons of subgroup differences made in the text, the significance of observed differences is reported at the .05, .01, and .001 levels. The reader may also wish to compare prevalance estimates from two groups for which the significance of the difference is not reported. Table 85 provides step-by-step guidelines for determining significance between two percentages.

For example, if one wishes to test for significance of a difference between a 1982 estimate and a 1985 estimate, one may use table 86 to determine the effective sample sizes for age groups in the 1982 and 1985 National Household Surveys. Then, following the guidelines for the best estimates of effective sample sizes, table 87 shows the minimal difference required for significance at the .05 level. The size of the differences required depends upon the size of the percentage estimates being compared and upon the effective sample size of each subgroup. In table 87, column headings refer to the approximate size of <u>both</u> percentage estimates; row headings refer to the effective sample size of the two different subgroups. Entries in the cells of the table refer to the minimum difference between estimates required for significance. For instance, if the effective subgroup sizes are 760 and 1,000 (as they are for those 35 and older) and both estimates were near 30%, the row for effective sample sizes of 1000 and 800 shows a difference of 4.3% would be required for significance. Thus, an estimate of 28% based on a subgroup of effective sample size 1,000 would not be significantly lower than an estimate of 32% based on an effective sample of 760 respondents.

Table 87 may also be used to determine significantly different percentages between two subgroups in the 1985 National Household Survey. In this case reference must be made to table 82A or 82B to determine the effective sample sizes of the subgroups in question.

More precise estimates of whether a particular difference is significant can be calculated using the standard difference of proportions test while substituting the appropriate effective sample size (n/DEFF) for n in the formula. The general formula is:

$$7. \quad (K)\sqrt{P(1-P)(1/n_1 + 1/n_2)}$$

where n_1 and n_2 are the respective group sample sizes (here represented by the appropriate effective sample sizes) and P is a pooled proportion such that

$$8. \quad P = \frac{(p_1 n_1) + (p_2 n_2)}{(n_1 + n_2)}$$

with p representing the reported proportion for each group. For more complex multivariate analyses using the actual data, users may want to use srs procedures and the best effective sample size.

TABLE 80. AVERAGE DESIGN EFFECTS BY SEX, AGE GROUP, AND RACE/ETHNICITY: 1985[1]

SEX/AGE	RACE/ETHNICITY			
	White	Black	Hispanic	Total
Male				
12-17	1.398	1.001	1.175	1.993
18-25	1.263	1.234	1.163	1.721
26-34	1.254	1.174	1.053	1.705
35+	1.426	1.155	1.261	1.649
All Males	1.607	1.742	1.576	2.192
Female				
12-17	1.318	1.463	1.017	1.903
18-25	1.175	1.212	1.047	1.810
26-34	1.427	1.284	1.227	1.982
35+	1.329	1.096	1.269	1.704
All Females	1.238	1.507	1.317	1.898
Total				
12-17	1.400	1.276	1.114	2.057
18-25	1.211	1.443	1.168	1.772
26-34	1.562	1.371	1.411	2.197
35+	1.523	1.301	1.511	1.796
Grand Total	1.555	1.882	1.622	2.250

[1]For groups not shown, a design effect of 2.250 should be used. If the analysis concerns a subgroup of one of the groups shown (e.g., 12-13 year-olds as shown in table 31), one can take the unweighted sample size and divide by the design effect shown for the group to calculate the appropriate effective sample size (in this example, 686/2.057 yields an effective sample size of approximately 330).

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 81. COEFFICIENTS OF VARIATION[1] OF AVERAGE DESIGN EFFECTS (DEFFs) TO ASSESS THE VARIABILITY OF DEFFs ACROSS VARIABLE TYPES AND DRUGS BY SEX, AGE GROUP, AND RACE/ETHNICITY: 1985

SEX/AGE	RACE/ETHNICITY			
	White	Black	Hispanic	Total
Male				
12-17	3.4%	2.7%	5.7%	4.1%
18-25	4.6	5.5	4.9	4.7
26-34	3.3	5.7	8.3	4.1
35+	4.8	3.4	7.4	4.8
All Males	4.9	4.9	7.3	5.1
Female				
12-17	4.4%	6.0%	9.1%	5.0%
18-25	3.6	5.0	8.4	3.9
26-34	4.8	4.0	6.5	5.3
35+	6.9	5.8	7.5	7.6
All Females	10.0	4.5	7.8	9.3
Total				
12-17	3.4%	6.2%	6.7%	3.5%
18-25	3.9	5.6	6.5	3.2
26-34	3.6	4.7	5.9	4.3
35+	5.8	4.2	7.3	5.6
Grand Total	8.0	4.3	6.8	7.5

[1]The coefficient of variation of the average design effect is defined as ste (DEFF)/DEFF, expressed in percentage points. Ste (DEFF) is the "standard error" of the design effect as measured over the 48 DEFFs in the averaging process.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 82A. EFFECTIVE SAMPLE SIZES FOR SUBGROUPS OF SEX, AGE GROUP, AND RACE/ETHNICITY: 1985

SEX/AGE	RACE/ETHNICITY			
	White	Black	Hispanic	Total
Male				
12-17	370	270	270	570
18-25	290	150	200	460
26-34	370	160	200	510
35+	320	120	100	440
All Males	1100	440	560	1600
Female				
12-17	360	220	300	590
18-25	360	230	280	560
26-34	440	250	270	650
35+	470	240	140	640
All Females	1700	780	840	2400
Total				
12-17	710	460	560	1100
18-25	660	320	450	1000
26-34	690	360	380	990
35+	710	300	200	1000
Grand Total	2500	1000	1200	3600

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 82B. EFFECTIVE SAMPLE SIZES BY AGE GROUP AND DEMOGRAPHIC CHARACTERISTICS: 1985

DEMOGRAPHIC CHARACTERISTIC	AGE GROUP (YEARS) 12-17	18-25	26-34	35+	Total
POPULATION DENSITY					
Large Metro	310	300	290	250	1,000
Small Metro	440	430	400	400	1,400
Nonmetro	340	290	300	360	1,100
REGION					
Northeast	210	180	190	190	670
North Central	220	210	220	220	750
South	440	380	360	400	1,400
West	220	250	220	190	780
ADULT EDUCATION					
Less than high school	N/A	270	210	420	740
High school graduate	N/A	450	360	300	940
Some college	N/A	220	210	140	490
College graduate	N/A	80	200	150	380
CURRENT EMPLOYMENT					
Full-time	60	510	620	430	1,400
Part-time	230	160	90	90	500
Unemployed	40	150	80	40	270
Other[1]	760	200	200	450	1,400

[1]Retired, disabled, homemaker, student or "other."

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 83. GUIDELINES FOR CALCULATING CONFIDENCE INTERVALS AT THE 95% CONFIDENCE LEVEL FOR PERCENTAGE ESTIMATES IN THE 1985 NATIONAL HOUSEHOLD SURVEY

Step 1. Use table 82A or 82B to obtain the effective sample size for the desired demographic subgroup of interest.

Step 2. Using table 84, locate the effective N in column 1 which is closest to the effective sample size extracted (from tables 82A,B) in step 1. (e.g., if the effective sample size is 140, use the row of table 84 marked 150).

Step 3. Locate the appropriate column of table 84 by choosing the "OBSERVED PERCENTAGE" value closest to the actual estimated percentage of interest (e.g., if the estimated percentage is 38.7, use the column marked 40% at the top and 60% at the bottom).

Step 4. Identify the two entries in table 84 which correspond to the effective N row (from step 2) and the OBSERVED PERCENTAGE column (from step 3) (e.g., if the effective N row is 150 and the observed percentage column is 40, then the two entries are 7.8 and 8.3).

Step 5. If the OBSERVED PERCENTAGE chosen in step 3 appears at the top of table 84, i.e. those between 1% and 50%, then the lower confidence limit is obtained by subtracting the left-hand entry from the actual estimated percentage (e.g., 38.7 - 7.8 = 30.9%). The upper confidence limit is the sum of the actual estimated percentage and the right-hand entry (e.g., 38.7 + 8.3 = 47.0%). (In our example, a 95% confidence interval around 38.7% ranges from 30.9% to 47.0%.)

Step 6. If the OBSERVED PERCENTAGE chosen in step 3 appears at the bottom of table 84, i.e. those between 50% and 99%, the order of the calculations is reversed: the right-hand entry is subtracted from the estimated percentage to get the lower limit, while the left-hand entry is summed with the estimated percentage to get the upper limit. For instance, if the effective sample size is 150 and the estimated percentage is 58.1%, then the appropriate entries in table 84 are still 7.8 and 8.3. However, the lower limit is 58.1 - 8.3 = 49.8%, and the upper confidence limit is 58.1 + 7.8 = 65.9%. Thus, a 95% confidence interval around 58.1% ranges from 49.8% to 65.9%.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 84

RANGE OF SAMPLING ERROR AROUND OBSERVED PERCENTAGE ESTIMATES FOR COMPUTING THE 95% CONFIDENCE INTERVALS*

EFFECTIVE SAMPLE SIZE	FOR OBSERVED PERCENTAGES FROM 1% TO 50%, READ DOWN THE APPROPRIATE COLUMN																	
	1%		2%		3%		5%		10%		20%		30%		40%		50%	
	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+
50	1.0	9.5	1.9	10.0	2.6	10.5	3.9	11.2	6.3	12.6	9.5	14.1	11.7	14.8	13.3	14.8	14.3	14.3
100	0.9	5.2	1.7	5.7	2.2	6.2	3.1	6.8	4.8	8.0	7.1	9.4	8.5	10.1	9.5	10.3	10.1	10.1
150	0.9	3.7	1.5	4.2	2.0	4.6	2.7	5.2	4.1	6.2	5.9	7.5	7.1	8.1	7.8	8.3	8.2	8.2
200	0.8	2.9	1.4	3.4	1.8	3.7	2.4	4.3	3.6	5.2	5.2	6.4	6.2	6.9	6.8	7.2	7.1	7.1
300	0.7	2.1	1.2	2.5	1.5	2.8	2.1	3.3	3.0	4.1	4.3	5.1	5.1	5.6	5.5	5.8	5.8	5.8
400	0.7	1.7	1.1	2.1	1.4	2.3	1.8	2.7	2.7	3.5	3.7	4.3	4.4	4.8	4.8	5.0	5.0	5.0
500	0.6	1.5	1.0	1.8	1.2	2.0	1.7	2.4	2.4	3.1	3.4	3.8	3.9	4.3	4.3	4.5	4.5	4.5
600	0.6	1.3	0.9	1.6	1.2	1.8	1.5	2.1	2.2	2.8	3.1	3.5	3.6	3.9	3.9	4.1	4.1	4.1
800	0.5	1.0	0.8	1.3	1.0	1.5	1.4	1.8	1.9	2.3	2.7	3.0	3.1	3.3	3.4	3.5	3.5	3.5
1,000	0.5	0.9	0.7	1.1	0.9	1.3	1.2	1.6	1.8	2.1	2.4	2.6	2.8	3.0	3.0	3.1	3.1	3.1
	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-
	99%		98%		97%		95%		90%		80%		70%		60%		50%	
	FOR OBSERVED PERCENTAGES FROM 50% TO 99%, READ UP THE APPROPRIATE COLUMN																	

* The lower and upper limits of a percentage are obtained as follows. Let p be a proportion and let q = (1-p). Then the lower limit, p_L, and the upper limit, p_U, are defined by:

$$p_L = \frac{(2np + K^2 - 1) - (K)\ \mathrm{SQRT}\ [K^2 - (2 + 1/n) + 4p(nq + 1)]}{2(n + K^2)}$$

$$p_U = \frac{(2np + K^2 + 1) + (K)\ \mathrm{SQRT}\ [K^2 + (2 - 1/n) + 4p(nq - 1)]}{2(n + K^2)}$$

K is the constant chosen to yield the proper level of confidence, i.e., K = 1.96 at the 95% level of confidence. The lower and upper limits of a PERCENTAGE are obtained by simply multiplying those of the proportion p by 100.

This table assumes a simple random sample design. Use effective sample sizes from Tables 82A, B when entering this table.

TABLE 84 (Continued)

RANGE OF SAMPLING ERROR AROUND OBSERVED PERCENTAGE ESTIMATES FOR COMPUTING THE 95% CONFIDENCE INTERVALS*

EFFECTIVE SAMPLE SIZE	FOR OBSERVED PERCENTAGES FROM 1% TO 50%, READ DOWN THE APPROPRIATE COLUMN																	
	1%		2%		3%		5%		10%		20%		30%		40%		50%	
	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+
1,200	0.5	0.8	0.7	1.0	0.9	1.2	1.1	1.4	1.6	1.9	2.2	2.4	2.6	2.7	2.8	2.8	2.9	2.9
1,400	0.4	0.7	0.6	0.9	0.8	1.1	1.1	1.3	1.5	1.7	2.0	2.2	2.4	2.5	2.6	2.6	2.7	2.7
1,600	0.4	0.7	0.6	0.8	0.8	1.0	1.0	1.2	1.4	1.6	1.9	2.1	2.2	2.3	2.4	2.5	2.5	2.5
1,800	0.4	0.6	0.6	0.8	0.7	0.9	0.9	1.1	1.3	1.5	1.8	1.9	2.1	2.2	2.3	2.3	2.3	2.3
2,000	0.4	0.6	0.5	0.7	0.7	0.9	0.9	1.1	1.3	1.4	1.7	1.8	2.0	2.1	2.2	2.2	2.2	2.2
2,200	0.4	0.5	0.5	0.7	0.7	0.8	0.9	1.0	1.2	1.3	1.6	1.7	1.9	2.0	2.1	2.1	2.1	2.1
2,500	0.3	0.5	0.5	0.6	0.6	0.8	0.8	0.9	1.1	1.3	1.5	1.6	1.8	1.8	1.9	2.0	2.0	2.0
3,000	0.3	0.4	0.5	0.6	0.6	0.7	0.7	0.9	1.0	1.1	1.4	1.5	1.6	1.7	1.8	1.8	1.8	1.8
3,500	0.3	0.4	0.4	0.5	0.5	0.6	0.7	0.8	1.0	1.1	1.3	1.4	1.5	1.6	1.6	1.6	1.7	1.7
4,000	0.3	0.4	0.4	0.5	0.5	0.6	0.6	0.7	0.9	1.0	1.2	1.3	1.4	1.5	1.5	1.5	1.6	1.6
	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-
	99%		98%		97%		95%		90%		80%		70%		60%		50%	
	FOR OBSERVED PERCENTAGES FROM 50% TO 99%, READ UP THE APPROPRIATE COLUMN																	

TABLE 85. GUIDELINES FOR ESTABLISHING THE SIGNIFICANCE AT THE .05 LEVEL BETWEEN TWO OBSERVED PERCENTAGES

Step 1. For trends between 1982 and 1985, use table 86 to obtain the effective sample sizes for the demographic subgroups of interest. For contrasting two subgroups in the 1985 survey, use table 82A or 82B.

Step 2. Using table 87, locate the effective sample sizes in column 1 which are closest to those obtained from step 1. (e.g., if the effective sample sizes are 2,400 and 1,600, use the row of table 87 marked 2,500 and 1,600).

Step 3. Locate the appropriate columns of table 87 by choosing the percentage which is closest to the two observed percentages being contrasted (e.g., if the percentages 34.3 and 37.0 are being compared, use the column of table 87 labelled 35% or 65%).

Step 4. Using the row and column identified in steps 2 and 3, respectively, extract the corresponding entry in table 87 (e.g., in this example for effective sample sizes 2,500 and 1,600 and observed percentages 35% or 65%, the entry is 3.0).

Step 5. Subtract the smaller observed percentage from the larger one, and compare this difference to the entry from table 87 (extracted in step 4). If the table entry is smaller than (or equal to) the difference between the two observed percentages, then that difference is significant at the .05 level. If the table entry is larger than the difference, then the two observed percentages are not significantly different. (e.g. 37.0% - 34.3% = 2.7% compared to the table entry of 3.0% suggests that the difference is not significant, since 3.0 is larger than 2.7).

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 86. EFFECTIVE SAMPLE SIZES FOR 1982-1985 TRENDS ANALYSIS BY AGE GROUP

AGE GROUP	EFFECTIVE N 1982	1985
12-17	1,000	1,100
18-25	820	1,000
26+	1,800	1,800
26-34	1,000	990
35+	760	1,000
TOTAL	3,600	3,600

Source: NIDA, National Household Surveys on Drug Abuse, 1982, 1985.

TABLE 87

DIFFERENCES* BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE** OF SAMPLES COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
4000	4000	1.0	1.3	1.6	1.8	1.9	2.0	2.1	2.1	2.2	2.2
4000	3500	1.0	1.4	1.6	1.8	2.0	2.1	2.2	2.2	2.3	2.3
4000	3000	1.0	1.4	1.7	1.9	2.0	2.2	2.3	2.3	2.4	2.4
4000	2500	1.1	1.5	1.8	2.0	2.2	2.3	2.4	2.4	2.5	2.5
4000	2200	1.1	1.6	1.9	2.1	2.3	2.4	2.5	2.5	2.6	2.6
4000	2000	1.2	1.6	1.9	2.1	2.3	2.5	2.6	2.6	2.7	2.7
4000	1800	1.2	1.7	2.0	2.2	2.4	2.5	2.7	2.7	2.8	2.8
4000	1600	1.3	1.7	2.1	2.3	2.5	2.7	2.8	2.8	2.9	2.9
4000	1400	1.3	1.8	2.2	2.4	2.6	2.8	2.9	3.0	3.0	3.0
4000	1200	1.4	1.9	2.3	2.6	2.8	3.0	3.1	3.2	3.2	3.2
4000	1000	1.5	2.1	2.5	2.8	3.0	3.2	3.3	3.4	3.4	3.5
4000	800	1.7	2.3	2.7	3.0	3.3	3.5	3.6	3.7	3.8	3.8
4000	600	1.9	2.6	3.1	3.4	3.7	3.9	4.1	4.2	4.3	4.3
4000	500	2.0	2.8	3.3	3.7	4.0	4.3	4.4	4.6	4.6	4.6
4000	400	2.2	3.1	3.7	4.1	4.5	4.7	4.9	5.0	5.1	5.1
4000	300	2.6	3.5	4.2	4.7	5.1	5.4	5.6	5.7	5.8	5.9
4000	200	3.1	4.3	5.1	5.7	6.1	6.5	6.8	7.0	7.1	7.1
4000	150	3.6	4.9	5.8	6.5	7.1	7.5	7.8	8.0	8.1	8.2
4000	100	4.3	6.0	7.1	7.9	8.6	9.1	9.5	9.7	9.9	9.9
4000	50	6.1	8.4	10.0	11.2	12.1	12.8	13.3	13.7	13.9	13.9
3500	3500	1.0	1.4	1.7	1.9	2.0	2.1	2.2	2.3	2.3	2.3
3500	3000	1.1	1.5	1.7	2.0	2.1	2.2	2.3	2.4	2.4	2.4
3500	2500	1.1	1.5	1.8	2.1	2.2	2.4	2.4	2.5	2.6	2.6
3500	2200	1.2	1.6	1.9	2.1	2.3	2.4	2.5	2.6	2.7	2.7
3500	2000	1.2	1.6	2.0	2.2	2.4	2.5	2.6	2.7	2.7	2.7
3500	1800	1.2	1.7	2.0	2.3	2.5	2.6	2.7	2.8	2.8	2.8
3500	1600	1.3	1.8	2.1	2.4	2.6	2.7	2.8	2.9	2.9	3.0
3500	1400	1.4	1.9	2.2	2.5	2.7	2.8	3.0	3.0	3.1	3.1
3500	1200	1.4	2.0	2.3	2.6	2.8	3.0	3.1	3.2	3.3	3.3
3500	1000	1.5	2.1	2.5	2.8	3.0	3.2	3.4	3.4	3.5	3.5
3500	800	1.7	2.3	2.7	3.1	3.3	3.5	3.7	3.8	3.8	3.8
3500	600	1.9	2.6	3.1	3.5	3.8	4.0	4.1	4.2	4.3	4.3
3500	500	2.0	2.8	3.3	3.7	4.1	4.3	4.5	4.6	4.7	4.7
3500	400	2.3	3.1	3.7	4.1	4.5	4.7	4.9	5.1	5.1	5.2
3500	300	2.6	3.5	4.2	4.7	5.1	5.4	5.6	5.8	5.9	5.9
3500	200	3.1	4.3	5.1	5.7	6.2	6.5	6.8	7.0	7.1	7.1
3500	150	3.6	4.9	5.8	6.5	7.1	7.5	7.8	8.0	8.1	8.2
3500	100	4.3	6.0	7.1	8.0	8.6	9.1	9.5	9.7	9.9	9.9
3500	50	6.1	8.4	10.0	11.2	12.1	12.8	13.3	13.7	13.9	14.0

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES* BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
3000	3000	1.1	1.5	1.8	2.0	2.2	2.3	2.4	2.5	2.5	2.5
3000	2500	1.2	1.6	1.9	2.1	2.3	2.4	2.5	2.6	2.6	2.7
3000	2200	1.2	1.7	2.0	2.2	2.4	2.5	2.6	2.7	2.7	2.8
3000	2000	1.2	1.7	2.0	2.3	2.5	2.6	2.7	2.8	2.8	2.8
3000	1800	1.3	1.8	2.1	2.3	2.5	2.7	2.8	2.9	2.9	2.9
3000	1600	1.3	1.8	2.2	2.4	2.6	2.8	2.9	3.0	3.0	3.0
3000	1400	1.4	1.9	2.3	2.5	2.7	2.9	3.0	3.1	3.2	3.2
3000	1200	1.5	2.0	2.4	2.7	2.9	3.1	3.2	3.3	3.3	3.3
3000	1000	1.6	2.1	2.6	2.9	3.1	3.3	3.4	3.5	3.6	3.6
3000	800	1.7	2.3	2.8	3.1	3.4	3.6	3.7	3.8	3.9	3.9
3000	600	1.9	2.6	3.1	3.5	3.8	4.0	4.2	4.3	4.4	4.4
3000	500	2.1	2.8	3.4	3.8	4.1	4.3	4.5	4.6	4.7	4.7
3000	400	2.3	3.1	3.7	4.2	4.5	4.8	5.0	5.1	5.2	5.2
3000	300	2.6	3.6	4.2	4.7	5.1	5.4	5.7	5.8	5.9	5.9
3000	200	3.1	4.3	5.1	5.7	6.2	6.6	6.8	7.0	7.1	7.2
3000	150	3.6	4.9	5.9	6.6	7.1	7.5	7.8	8.0	8.2	8.2
3000	100	4.3	6.0	7.1	8.0	8.6	9.1	9.5	9.8	9.9	10.0
3000	50	6.1	8.4	10.0	11.2	12.1	12.8	13.3	13.7	13.9	14.0
2500	2500	1.2	1.7	2.0	2.2	2.4	2.5	2.6	2.7	2.8	2.8
2500	2200	1.2	1.7	2.0	2.3	2.5	2.6	2.7	2.8	2.9	2.9
2500	2000	1.3	1.8	2.1	2.4	2.5	2.7	2.8	2.9	2.9	2.9
2500	1800	1.3	1.8	2.2	2.4	2.6	2.8	2.9	3.0	3.0	3.0
2500	1600	1.4	1.9	2.2	2.5	2.7	2.9	3.0	3.1	3.1	3.1
2500	1400	1.4	2.0	2.3	2.6	2.8	3.0	3.1	3.2	3.3	3.3
2500	1200	1.5	2.1	2.5	2.8	3.0	3.2	3.3	3.4	3.4	3.4
2500	1000	1.6	2.2	2.6	2.9	3.2	3.4	3.5	3.6	3.6	3.7
2500	800	1.7	2.4	2.8	3.2	3.4	3.6	3.8	3.9	4.0	4.0
2500	600	1.9	2.7	3.2	3.6	3.9	4.1	4.2	4.4	4.4	4.5
2500	500	2.1	2.9	3.4	3.8	4.2	4.4	4.6	4.7	4.8	4.8
2500	400	2.3	3.2	3.8	4.2	4.6	4.8	5.0	5.2	5.3	5.3
2500	300	2.6	3.6	4.3	4.8	5.2	5.5	5.7	5.9	6.0	6.0
2500	200	3.1	4.3	5.1	5.8	6.2	6.6	6.9	7.1	7.2	7.2
2500	150	3.6	4.9	5.9	6.6	7.1	7.6	7.9	8.1	8.2	8.2
2500	100	4.4	6.0	7.1	8.0	8.7	9.2	9.5	9.8	9.9	10.0
2500	50	6.1	8.4	10.0	11.2	12.1	12.8	13.4	13.7	13.9	14.0

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES*BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
2200	2200	1.3	1.8	2.1	2.4	2.6	2.7	2.8	2.9	2.9	3.0
2200	2000	1.3	1.8	2.2	2.4	2.6	2.8	2.9	3.0	3.0	3.0
2200	1800	1.4	1.9	2.2	2.5	2.7	2.9	3.0	3.1	3.1	3.1
2200	1600	1.4	1.9	2.3	2.6	2.8	3.0	3.1	3.2	3.2	3.2
2200	1400	1.5	2.0	2.4	2.7	2.9	3.1	3.2	3.3	3.3	3.4
2200	1200	1.5	2.1	2.5	2.8	3.0	3.2	3.4	3.4	3.5	3.5
2200	1000	1.6	2.2	2.7	3.0	3.2	3.4	3.6	3.7	3.7	3.7
2200	800	1.8	2.4	2.9	3.2	3.5	3.7	3.9	4.0	4.0	4.0
2200	600	2.0	2.7	3.2	3.6	3.9	4.1	4.3	4.4	4.5	4.5
2200	500	2.1	2.9	3.5	3.9	4.2	4.4	4.6	4.8	4.8	4.9
2200	400	2.3	3.2	3.8	4.3	4.6	4.9	5.1	5.2	5.3	5.3
2200	300	2.6	3.6	4.3	4.8	5.2	5.5	5.8	5.9	6.0	6.0
2200	200	3.2	4.3	5.2	5.8	6.3	6.6	6.9	7.1	7.2	7.2
2200	150	3.6	5.0	5.9	6.6	7.2	7.6	7.9	8.1	8.2	8.3
2200	100	4.4	6.0	7.2	8.0	8.7	9.2	9.6	9.8	10.0	10.0
2200	50	6.1	8.4	10.0	11.2	12.1	12.8	13.4	13.7	13.9	14.0
2000	2000	1.4	1.9	2.2	2.5	2.7	2.8	3.0	3.0	3.1	3.1
2000	1800	1.4	1.9	2.3	2.5	2.8	2.9	3.0	3.1	3.2	3.2
2000	1600	1.4	2.0	2.3	2.6	2.8	3.0	3.1	3.2	3.3	3.3
2000	1400	1.5	2.0	2.4	2.7	3.0	3.1	3.3	3.3	3.4	3.4
2000	1200	1.6	2.1	2.6	2.9	3.1	3.3	3.4	3.5	3.6	3.6
2000	1000	1.7	2.3	2.7	3.0	3.3	3.5	3.6	3.7	3.8	3.8
2000	800	1.8	2.5	2.9	3.3	3.6	3.8	3.9	4.0	4.1	4.1
2000	600	2.0	2.7	3.3	3.6	4.0	4.2	4.4	4.5	4.5	4.6
2000	500	2.1	2.9	3.5	3.9	4.2	4.5	4.7	4.8	4.9	4.9
2000	400	2.3	3.2	3.8	4.3	4.6	4.9	5.1	5.3	5.3	5.4
2000	300	2.6	3.6	4.3	4.9	5.3	5.6	5.8	5.9	6.0	6.1
2000	200	3.2	4.4	5.2	5.8	6.3	6.7	6.9	7.1	7.2	7.3
2000	150	3.6	5.0	5.9	6.6	7.2	7.6	7.9	8.1	8.3	8.3
2000	100	4.4	6.0	7.2	8.0	8.7	9.2	9.6	9.8	10.0	10.0
2000	50	6.1	8.4	10.0	11.2	12.2	12.9	13.4	13.7	14.0	14.0

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES*BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
1800	1800	1.4	2.0	2.3	2.6	2.8	3.0	3.1	3.2	3.3	3.3
1800	1600	1.5	2.0	2.4	2.7	2.9	3.1	3.2	3.3	3.4	3.4
1800	1400	1.5	2.1	2.5	2.8	3.0	3.2	3.3	3.4	3.5	3.5
1800	1200	1.6	2.2	2.6	2.9	3.2	3.3	3.5	3.6	3.6	3.7
1800	1000	1.7	2.3	2.8	3.1	3.3	3.5	3.7	3.8	3.8	3.9
1800	800	1.8	2.5	3.0	3.3	3.6	3.8	4.0	4.1	4.1	4.2
1800	600	2.0	2.8	3.3	3.7	4.0	4.2	4.4	4.5	4.6	4.6
1800	500	2.2	3.0	3.5	4.0	4.3	4.5	4.7	4.9	4.9	5.0
1800	400	2.4	3.3	3.9	4.3	4.7	5.0	5.2	5.3	5.4	5.4
1800	300	2.7	3.7	4.4	4.9	5.3	5.6	5.8	6.0	6.1	6.1
1800	200	3.2	4.4	5.2	5.8	6.3	6.7	7.0	7.2	7.3	7.3
1800	150	3.6	5.0	5.9	6.7	7.2	7.6	7.9	8.2	8.3	8.3
1800	100	4.4	6.0	7.2	8.1	8.7	9.2	9.6	9.9	10.0	10.1
1800	50	6.1	8.4	10.0	11.2	12.2	12.9	13.4	13.8	14.0	14.1
1600	1600	1.5	2.1	2.5	2.8	3.0	3.2	3.3	3.4	3.4	3.5
1600	1400	1.6	2.2	2.6	2.9	3.1	3.3	3.4	3.5	3.6	3.6
1600	1200	1.6	2.2	2.7	3.0	3.2	3.4	3.6	3.7	3.7	3.7
1600	1000	1.7	2.4	2.8	3.2	3.4	3.6	3.8	3.9	3.9	4.0
1600	800	1.8	2.5	3.0	3.4	3.7	3.9	4.0	4.2	4.2	4.2
1600	600	2.0	2.8	3.4	3.8	4.1	4.3	4.5	4.6	4.7	4.7
1600	500	2.2	3.0	3.6	4.0	4.3	4.6	4.8	4.9	5.0	5.0
1600	400	2.4	3.3	3.9	4.4	4.7	5.0	5.2	5.4	5.5	5.5
1600	300	2.7	3.7	4.4	4.9	5.3	5.7	5.9	6.0	6.1	6.2
1600	200	3.2	4.4	5.2	5.9	6.4	6.7	7.0	7.2	7.3	7.3
1600	150	3.6	5.0	6.0	6.7	7.2	7.7	8.0	8.2	8.3	8.4
1600	100	4.4	6.1	7.2	8.1	8.7	9.3	9.6	9.9	10.1	10.1
1600	50	6.1	8.4	10.1	11.3	12.2	12.9	13.4	13.8	14.0	14.1

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES*BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
1400	1400	1.6	2.2	2.6	3.0	3.2	3.4	3.5	3.6	3.7	3.7
1400	1200	1.7	2.3	2.8	3.1	3.3	3.5	3.7	3.8	3.8	3.9
1400	1000	1.8	2.4	2.9	3.2	3.5	3.7	3.9	4.0	4.0	4.1
1400	800	1.9	2.6	3.1	3.5	3.8	4.0	4.1	4.3	4.3	4.3
1400	600	2.1	2.9	3.4	3.8	4.1	4.4	4.6	4.7	4.8	4.8
1400	500	2.2	3.1	3.6	4.1	4.4	4.7	4.9	5.0	5.1	5.1
1400	400	2.4	3.3	4.0	4.4	4.8	5.1	5.3	5.4	5.5	5.6
1400	300	2.7	3.7	4.5	5.0	5.4	5.7	5.9	6.1	6.2	6.2
1400	200	3.2	4.4	5.3	5.9	6.4	6.8	7.1	7.3	7.4	7.4
1400	150	3.7	5.1	6.0	6.7	7.3	7.7	8.0	8.2	8.4	8.4
1400	100	4.4	6.1	7.2	8.1	8.8	9.3	9.7	9.9	10.1	10.1
1400	50	6.1	8.5	10.1	11.3	12.2	12.9	13.5	13.8	14.0	14.1
1200	1200	1.7	2.4	2.9	3.2	3.5	3.7	3.8	3.9	4.0	4.0
1200	1000	1.8	2.5	3.0	3.4	3.6	3.8	4.0	4.1	4.2	4.2
1200	800	1.9	2.7	3.2	3.6	3.9	4.1	4.3	4.4	4.5	4.5
1200	600	2.1	2.9	3.5	3.9	4.2	4.5	4.7	4.8	4.9	4.9
1200	500	2.3	3.1	3.7	4.2	4.5	4.8	5.0	5.1	5.2	5.2
1200	400	2.5	3.4	4.0	4.5	4.9	5.2	5.4	5.5	5.6	5.7
1200	300	2.8	3.8	4.5	5.1	5.5	5.8	6.0	6.2	6.3	6.3
1200	200	3.3	4.5	5.3	6.0	6.5	6.9	7.1	7.3	7.4	7.5
1200	150	3.7	5.1	6.1	6.8	7.4	7.8	8.1	8.3	8.4	8.5
1200	100	4.4	6.1	7.3	8.2	8.8	9.3	9.7	10.0	10.1	10.2
1200	50	6.2	8.5	10.1	11.3	12.2	13.0	13.5	13.9	14.1	14.1
1000	1000	1.9	2.6	3.1	3.5	3.8	4.0	4.2	4.3	4.4	4.4
1000	800	2.0	2.8	3.3	3.7	4.0	4.3	4.4	4.6	4.6	4.6
1000	600	2.2	3.0	3.6	4.0	4.4	4.6	4.8	5.0	5.0	5.1
1000	500	2.3	3.2	3.8	4.3	4.6	4.9	5.1	5.3	5.3	5.4
1000	400	2.5	3.5	4.1	4.6	5.0	5.3	5.5	5.7	5.8	5.8
1000	300	2.8	3.9	4.6	5.2	5.6	5.9	6.2	6.3	6.4	6.5
1000	200	3.3	4.6	5.4	6.1	6.6	7.0	7.2	7.4	7.6	7.6
1000	150	3.7	5.1	6.1	6.9	7.4	7.9	8.2	8.4	8.5	8.6
1000	100	4.5	6.2	7.3	8.2	8.9	9.4	9.8	10.1	10.2	10.3
1000	50	6.2	8.5	10.1	11.4	12.3	13.0	13.5	13.9	14.1	14.2

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES*BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
800	800	2.1	2.9	3.5	3.9	4.2	4.5	4.7	4.8	4.9	4.9
800	600	2.3	3.2	3.8	4.2	4.6	4.9	5.0	5.2	5.3	5.3
800	500	2.4	3.4	4.0	4.5	4.8	5.1	5.3	5.5	5.6	5.6
800	400	2.6	3.6	4.3	4.8	5.2	5.5	5.7	5.9	6.0	6.0
800	300	2.9	4.0	4.7	5.3	5.7	6.1	6.3	6.5	6.6	6.6
800	200	3.4	4.6	5.5	6.2	6.7	7.1	7.4	7.6	7.7	7.7
800	150	3.8	5.2	6.2	7.0	7.6	8.0	8.3	8.5	8.7	8.7
800	100	4.5	6.2	7.4	8.3	9.0	9.5	9.9	10.2	10.3	10.4
800	50	6.2	8.6	10.2	11.4	12.4	13.1	13.6	14.0	14.2	14.3
600	600	2.5	3.4	4.0	4.5	4.9	5.2	5.4	5.5	5.6	5.7
600	500	2.6	3.6	4.2	4.7	5.1	5.4	5.7	5.8	5.9	5.9
600	400	2.8	3.8	4.5	5.1	5.5	5.8	6.0	6.2	6.3	6.3
600	300	3.0	4.2	4.9	5.5	6.0	6.4	6.6	6.8	6.9	6.9
600	200	3.5	4.8	5.7	6.4	6.9	7.3	7.6	7.8	8.0	8.0
600	150	3.9	5.4	6.4	7.2	7.7	8.2	8.5	8.8	8.9	8.9
600	100	4.6	6.4	7.6	8.5	9.2	9.7	10.1	10.4	10.5	10.6
600	50	6.3	8.7	10.3	11.5	12.5	13.2	13.8	14.1	14.4	14.4
500	500	2.7	3.7	4.4	5.0	5.4	5.7	5.9	6.1	6.2	6.2
500	400	2.9	3.9	4.7	5.3	5.7	6.0	6.3	6.4	6.5	6.6
500	300	3.1	4.3	5.1	5.7	6.2	6.6	6.8	7.0	7.1	7.2
500	200	3.6	4.9	5.9	6.6	7.1	7.5	7.8	8.0	8.2	8.2
500	150	4.0	5.5	6.5	7.3	7.9	8.4	8.7	8.9	9.1	9.1
500	100	4.7	6.4	7.7	8.6	9.3	9.8	10.2	10.5	10.7	10.7
500	50	6.3	8.7	10.4	11.6	12.6	13.3	13.9	14.2	14.5	14.5
400	400	3.0	4.2	4.9	5.5	6.0	6.4	6.6	6.8	6.9	6.9
400	300	3.3	4.5	5.3	6.0	6.5	6.9	7.1	7.3	7.4	7.5
400	200	3.7	5.1	6.1	6.8	7.3	7.8	8.1	8.3	8.4	8.5
400	150	4.1	5.6	6.7	7.5	8.1	8.6	9.0	9.2	9.3	9.4
400	100	4.8	6.6	7.8	8.8	9.5	10.0	10.5	10.7	10.9	11.0
400	50	6.4	8.8	10.5	11.8	12.7	13.5	14.0	14.4	14.6	14.7

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

TABLE 87 (Continued)

DIFFERENCES*BETWEEN TWO OBSERVED PERCENTAGES REQUIRED FOR SIGNIFICANCE AT THE .05 LEVEL CONTROLLING FOR APPROXIMATE SIZE OF BOTH ESTIMATES

EFFECTIVE SIZE OF SAMPLES** COMPARED		5% OR 95%	10% OR 90%	15% OR 85%	20% OR 80%	25% OR 75%	30% OR 70%	35% OR 65%	40% OR 60%	45% OR 55%	50%
300	300	3.5	4.8	5.7	6.4	6.9	7.3	7.6	7.8	8.0	8.0
300	200	3.9	5.4	6.4	7.2	7.7	8.2	8.5	8.8	8.9	8.9
300	150	4.3	5.9	7.0	7.8	8.5	9.0	9.3	9.6	9.8	9.8
300	100	4.9	6.8	8.1	9.1	9.8	10.4	10.8	11.1	11.3	11.3
300	50	6.5	9.0	10.7	12.0	13.0	13.7	14.3	14.7	14.9	15.0
200	200	4.3	5.9	7.0	7.8	8.5	9.0	9.3	9.6	9.8	9.8
200	150	4.6	6.4	7.6	8.5	9.2	9.7	10.1	10.4	10.5	10.6
200	100	5.2	7.2	8.6	9.6	10.4	11.0	11.4	11.8	11.9	12.0
200	50	6.8	9.3	11.1	12.4	13.4	14.2	14.8	15.2	15.4	15.5
150	150	4.9	6.8	8.1	9.1	9.8	10.4	10.8	11.1	11.3	11.3
150	100	5.5	7.6	9.0	10.1	11.0	11.6	12.1	12.4	12.6	12.7
150	50	7.0	9.6	11.4	12.8	13.9	14.7	15.3	15.7	15.9	16.0
100	100	6.0	8.3	9.9	11.1	12.0	12.7	13.2	13.6	13.8	13.9
100	50	7.4	10.2	12.1	13.6	14.7	15.6	16.2	16.6	16.9	17.0
50	50	8.5	11.8	14.0	15.7	17.0	18.0	18.7	19.2	19.5	19.6

* - Table entries are based on the following formula: $(1.96)\ \mathrm{SQRT}\ [p(1-p)(1/N_1 + 1/N_2)]$

- Multiply table entries by (1.314) to obtain differences required for significance at the .01 level

- Multiply table entries by (1.679) to obtain differences required for significance at the .001 level

** This table assumes a simple random sample design. Effective sample size values must be used to determine the table entry. See Tables 82A, 82B and 86 for effective sample sizes.

METHODS APPENDIX

SECTION C: QUALITY OF DATA

All aspects of survey design and execution affect data quality. In this section, those procedures which might be expected to have the most effect on quality in the National Household Survey and the Main Findings are discussed. Quality control efforts in the survey are evaluated in terms of respondent cooperation, response rates for the various subsamples, and the results of verification and data cleaning. Data recodes, assessment of missing data on key drug variables, and procedures for dealing with missing data in the analyses are considered where they affect the analyses and presentation of data in the Main Findings.

Field Period and Data Preparation

Pretests and revisions of questionnaires

Five rounds of pretesting were conducted. The first three rounds interviewed blacks and whites to determine clarity of interviewer instructions and question wording. Substantial changes were made after each round. For pretests 4 and 5, conducted among Hispanics only, all materials were translated into Spanish (and back translated) by a team of Hispanic social scientists with special attention to possible differences in usage and understanding among specific Hispanic subgroups.

Interviewer recruitment, selection, and training

Temple's Institute for Survey Research (ISR) national field force of over 1,000 interviewers was used to supply interviewers; no field services were used. The interviewing staff was trained and directed by in-house senior staff at ISR, assisted by 22 Regional Field coordinators. The great majority of the 566 interviewers employed in the study were experienced, had recently worked on similar ISR projects, and were highly rated by ISR's Field and Data Reduction departments in previous efforts. Demographically, about 50% were Hispanic or black, 30% were bilingual, and 25% were males. All interviewers were trained in person at two day training conferences held in ten sites throughout the U.S. during June of 1985. Two-thirds of the interviews were collected during the summer of 1985, but it was necessary to continue the field period until the end of the year to achieve the final total of 8,038 completed interviews.

Field work -- preliminary steps

Following the selection of secondary sampling units and listing areas (as described in Section A above), interviewers were assigned to "prelist" the addresses of housing units within each listing area. Prelisting is an essential element of quality control since it permits central office sampling personnel (rather than the interviewers) to draw the final sample of households. It also allows an introductory letter to be sent in advance of field work. In the case of the 1985 National Household Survey, a letter was indeed sent to establish the study's credentials and to serve as a basis for informed consent. The letter explained the purpose of the survey, the voluntary nature of participation, and assured confidentiality.

Field work -- interviewing

The initial survey tasks for interviewers received emphasis in the national training conferences. These steps included introducing themselves and the study to respondents, answering questions, soliciting cooperation, listing all household members 12 years of age and older, and selecting one respondent randomly from the appropriate age-racial/ethnic stratum. The screening procedure was followed immediately by interviewing when the chosen respondent was available and cooperative. At times, however, respondents were not available, and callbacks had to be made. An unlimited call back rule was followed in which interviewers tried until the end of the study period to find persons who were not at home, sometimes with the help of ISR central staff and/or field coordinators. Similarly, respondent refusals were not simply accepted but assigned to other interviewers and ultimately ISR staff or regional coordinators.

Throughout the field period coordinators maintained continuous contact with their assigned interviewers to ensure that problems were detected and resolved as they arose. A computerized data managerial system (CDMS), a blend of both computerized and manual record maintenance, also guaranteed a constant monitoring of the field and data processing efforts by providing daily status reports.

Verification of interviews was carried out first through mailings to all respondents following the study. The mailing requested information on the topics and length of the interview, and on personal objective data difficult or impossible for interviews to construct on their own. One-third of the respondents returned the information, and a 10% random sample of the remainder were then contacted by telephone or in person to verify that they had been interviewed for this study. Overall, more than 40% of all interviews and at least 10% of each interviewer's work were checked to verify that the interview had been conducted.

Editing, coding, and data cleaning

Following mail verification, but prior to coding, each interview underwent a detailed edit by staff in ISR's Data Processing Department. Major consideration was given to inconsistencies, ambiguities, missing information, illegibility, and skip patterns. When warranted, problems were brought to the attention of the interviewer who then recontacted the respondent for resolution.

Interviewer evaluation and monitoring was an integral part of the editing process. Editors assigned ratings to all interviewers, which were used in the final evaluation of an interviewer's work and in monitoring the interviewer's performance during the study. Editors themselves were monitored; all of their work was checked daily by a second editor until proficiency was demonstrated. At this point, the check editing was carried out on a sampling basis. Codes for open-end questions were developed by assigning codes to a sample of interviews received during the first two weeks of field work, which were then tested by coding a second sample.

The first assignment of interviews completed by a coder was checked and, if needed, additional instruction was given. Check coding continued throughout the study on a minimum of 20% of each coder's work. Acceptable coding error was set as one error in every five cards of data coded. Any coder who did not meet the acceptable standard after coding the first 10 interviews was given additional training; all performed adequately thereafter.

Survey data were entered by two senior key-entry operators on a key-to-disk system and transferred from the disk to magnetic tape, with 100% of all key-entered data verified by a second operator.

Following data entry and verification, data were cleaned via update, valid code check, and logical consistency check programs. Further checks were also run of any cases with special problems; in particular, cases in which the respondent had trouble following the instructions on the answer sheets when inconsistencies were revealed on usage questions. Then interviews were reviewed by professional staff who resolved problems according to pre-established criteria. Once a batch of data passed successfully through all the cleaning routines, it was merged with other data on the cleaned data file. All cleaning and data entry into final form contained less than a 0.1% error rate.

Evaluation of the 1985 National Household Survey

In the tables and discussion that follow, an assessment of the National Household Survey is presented in terms of interviewers' perceptions of respondents' cooperation; number of interviews targeted and achieved; response rates; and number of visits necessary to achieve the interviews.

Respondent cooperation

The data in table 88 indicate that interviewers saw respondents as very cooperative. In particular, about 92% of whites, 87% of blacks, and 85% of Hispanics were perceived that way. Most of the remaining respondents were fairly cooperative. Respondent understanding was also perceived as good. No difficulty or just a little difficulty in understanding was reported for 95% of whites and about 90% of blacks and Hispanics. Given the potential difficulties in use of the confidential answer sheets, the lack of apparent misunderstanding by respondents is encouraging.

Number of interviews

The number of targeted interviews for the study was 8,000, including roughly 4,000 from whites, and 2,000 each from blacks and Hispanics. The data in table 89 show that these goals were realized. Because of the requirements of oversamples of blacks and Hispanics, it was necessary to screen 23,633 households to find enough eligible respondents.

The completion status of the attempts to interview elgible respondents is shown by age group in table 90. The lowest respondent refusal rate was for the 12-17 year-olds (4%), and the highest was for the 26-34 year-olds (11.7%). Parental permission, however, was not obtained for 6.4% of the eligible youth.

Interview response rates

In general, interview response rates were quite adequate and averaged almost 84% across the entire sample. However, as table 91 indicates, there were substantial variations in the rates when classified by ethnicity and population density. Although extra screenings were required to find sufficient eligible blacks and Hispanics, the response rates for black and Hispanic eligibles were higher than for whites. Rates were also higher for the more rural, rather than the urbanized areas. The extremes of this variation are represented on the low end by a 66% response rate among whites who live in large metropolitan areas, and the high end by a 94% rate for rural blacks and Hispanics. There is also a tendency for higher response rates among younger people, except for rural areas where there are no clear differences by age.

Number of visits and response rates

Shown in table 92 are the results of initial and repeated attempts (i.e., household visits) to obtain interviews. While about two-thirds of the interviews were garnered by the end of the fourth attempt, substantial improvement in the response rates was achieved by repeated callbacks. This was more true of those under 35, possibly because they are less likely than older persons to be home on a given visit.

Missing Data

The presence of any sizeable amount of missing data on the prevalence measures for drug use would seriously undermine the reliability of the results in the important national indicator series that the National Household Surveys have become. Tables 93 and 94 report the percent of missing data based on the unweighted sample for each of the drug use measures.

There are no missing data for any of the lifetime measures except use of PCP. Missing data on the past year use and past month use variables are under 1.0% in most cases. Missing data only exceed 2.0% in some age categories for past year and past month nonmedical use of any psychotherapeutic. This occurs because in combining responses for each of the four categories of psychotherapeutics, the missing data for each of the four categories are combined as well. Besides the nonmedical psychotherapeutics measures, missing data only exceed 1.0% in some age categories for use of inhalants and analgesics. These levels of missing data compare favorably with reports from previous National Household Surveys.

Procedures for handling missing data in analyses

When there are no missing data, a decision rule is not required. When there are few cases with missing data, the results are not likely to be greatly affected by how missing data are treated. When missing data are substantial, results can be appreciably affected by decisions on the treatment of missing data. Both the cases of a little missing data and substantial missing data need to be considered in documenting how results were produced for the Main Findings.

In some cases, a small amount of missing data may seem to create inconsistencies in comparing numbers across tables. There are a few tables in the Main Findings where a percentage reported may differ slightly from one that may be reported or inferred from one of the basic prevalence tables (see, for example tables 25, 26, 33, 67). In these cases where respondents report the number of times they used a particular drug or the number of days used, sometimes a respondent who is known to have used a drug does not report the number of times or days. By excluding these cases from the analysis, the percent of nonusers is increased since the total is decreased while the number of nonusers remains the same. This difference seldom exceeds 0.2%.

There are two instances where decisions about the treatment of missing data can affect the interpretation of results. The first instance occurs in the comparisons made in the trend data between 1982 and 1985 rates of use. There is no problem in interpreting differences in lifetime trends between 1982 and 1985 because there are no missing data on the lifetime measures in either the 1982 or 1985 data. However, as noted in footnote 3 to table 10, different treatment of missing data can suggest a different pattern of changes over time. In previous surveys, if recency of use of a drug could not be determined, the respondent was effectively treated as a nonuser in the past year or past month; this occurred because users were reported as the percent of all

respondents, i.e., users vs. nonusers and missing data. Treating those who used the drug at some time but who did not report if it was in the past year or month as nonusers in the past year or month appears unwarranted. In Main Findings 1985 if, after checking all source questions, it was not possible to assign recency of use for a respondent, the case was excluded from the calculation of percentages. Therefore, previous surveys may have underestimated past year and past month drug use. In practice, underestimation is negligible when there is little missing data and/or when the percentage of users of a given substance is low. In rechecking the data for 1979 and 1982, there were little missing data on any drug except for alcohol use in 1982, where 6.0% of the data were missing. Since percentages of alcohol use are sizeable for all age groups, the inclusion of the missing as "nonusers" created a blip of lower alcohol use in 1982, as seen in the figures in parentheses in tables 10-17. The actual pattern of past year and past month use in 1982 and 1985 is quite stable.

The second instance where assumptions have been made in treating missing data in the 1985 analyses occurs in Chapter IX in the analyses reporting problems that respondents attributed to their use of alcohol or drugs. Twenty-eight percent of respondents who had used some drug and who should have answered the problems answer sheet did not do so. Most of these, however, smoked cigarettes or drank less than weekly and had used no illicit drug in the past year. The decision was made to treat these respondents as not having problems rather than exclude them from the analyses. This decision was documented in both the text and the tables and represents a conservative strategy of erring in the direction of underestimating the prevalence of perceived problems. The presence of appreciable levels of problems reported even using this conservative approach is an important result.

TABLE 88. INTERVIEWER ASSESSMENT OF RESPONDENT'S LEVEL OF COOPERATION AND UNDERSTANDING BY AGE GROUP AND RACE/ETHNICITY OF RESPONDENT: 1985

INTERVIEWER ASSESSMENT	AGE GROUP (YEARS) 12-17	18-25	26-34	35 +	Total
		A. WHITES			
Level of Cooperation					
Very cooperative	93.4	93.9	92.9	87.7	91.8
Fairly cooperative	4.6	3.7	4.4	7.8	5.2
Not very cooperative	*	*	0.9	1.2	0.7
Openly hostile	*	*	*	*	*
No response	1.7	2.0	1.7	2.9	2.1
Level of Understanding					
No difficulty	84.4	90.4	91.9	79.7	86.4
Just a little difficulty	12.0	5.7	5.5	12.2	9.0
A fair amount of difficulty	1.4	2.5	0.7	4.1	2.2
A lot of difficulty	0.6	0.5	0.5	2.3	1.0
No response	1.6	0.9	1.4	1.7	1.4
		B. BLACKS			
Level of Cooperation					
Very cooperative	90.0	88.9	84.2	81.3	86.5
Fairly cooperative	7.2	8.5	11.1	14.1	9.9
Not very cooperative	0.7	1.1	2.0	2.0	1.4
Openly hostile	*	*	*	0.8	*
No response	2.2	1.1	2.4	1.8	1.9
Level of Understanding					
No difficulty	70.4	80.6	82.0	54.0	72.4
Just a little difficulty	21.1	13.9	11.3	17.6	16.2
A fair amount of difficulty	5.2	3.9	3.0	15.3	6.4
A lot of difficulty	1.5	*	1.0	11.5	3.1
No response	1.8	1.1	2.6	1.5	1.8
		C. HISPANICS			
Level of Cooperation					
Very cooperative	87.5	84.2	83.5	82.1	84.8
Fairly cooperative	9.7	11.0	11.2	13.9	11.1
Not very cooperative	1.6	3.2	2.5	2.0	2.3
Openly hostile	*	*	0.6	*	*
No response	1.2	1.5	2.3	1.7	1.7
Level of Understanding					
No difficulty	70.1	77.3	71.3	62.6	71.2
Just a little difficulty	21.3	17.0	20.1	23.5	20.2
A fair amount of difficulty	5.0	3.2	3.2	8.6	4.6
A lot of difficulty	1.6	1.1	3.2	4.3	2.3
No response	2.0	1.3	2.1	1.0	1.7

* Less than one-half of one percent.

Source, NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 89. FIELD EXPERIENCE BY RACE/ETHNICITY OF HOUSEHOLD HEAD (HH), NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE: 1985[1]

HOUSEHOLD AND INTERVIEW STATUS	RACE/ETHNICITY (HH)				
	White	Black	Hispanic	Other	Total
Total screened housing units	14,872	4,434	3,702	625	23,633
Eligible respondents	4,872	2,289	2,384	85	9,630
Interviewed	3,979	1,949	2,034	76	8,038
Not interviewed	893	340	350	9	1,592
Ineligible	10,000	2,145	1,318	540	14,003

[1]Data are based on RACE/ETHNICITY of household head. This differs from the number of interviews completed reported in table 1 where the distributions are based on respondent self-classification.

Source, NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 90. RESULTS OF INTERVIEW ATTEMPTS BY AGE GROUP OF ELIGIBLE RESPONDENTS: 1985

	AGE GROUPS (YEARS)				
INTERVIEW STATUS	12-17	18-25	26-34	35 +	Total
Total HU's in Sample	#	#	#	#	25968
Total Screened HU's	#	#	#	#	23633
No Eligible Respondent	#	#	#	#	14003
Eligible Respondents	2610	2145	2623	2252	9630
Interview completed	2246	1813	2166	1813	8038
Respondent not at home	69	118	131	87	405
Respondent refused	107	191	306	260	864
Parental permission not obtained	166	--	--	--	166
Other	22	23	20	92	157

Data by AGE GROUP were only obtained when an eligible respondent was present in the housing unit (HU).

Source, NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 91. PERCENT INTERVIEW RESPONSE RATES BY AGE GROUP, RACE/ETHNICITY, AND POPULATION DENSITY: 1985

RACE/ETHNICITY[1]	AGE GROUPS (YEARS)				
	12-17	18-25	26-34	35 +	Total
A. AREA POPULATION ONE MILLION OR MORE					
White	72.0	72.2	64.3	60.0	66.3
Black	86.8	87.0	81.7	73.1	82.4
Hispanic	90.7	88.8	84.1	77.9	86.2
B. AREA POPULATION 50,000 -- 999,999					
White	80.5	82.1	76.9	77.2	78.8
Black	85.3	80.6	85.2	82.3	83.5
Hispanic	87.5	83.1	82.7	77.9	83.5
C. METROPOLITAN AREAS OF LESS THAN 50,000					
White	84.4	80.9	77.6	75.4	79.4
Black	81.7	84.2	83.1	85.9	83.4
Hispanic	90.4	88.0	84.9	82.1	87.1
B. NON METROPOLITAN AREAS					
White	88.7	90.4	90.8	90.6	90.1
Black	94.6	91.3	92.7	96.8	93.9
Hispanic	100.0	92.3	100.0	81.8	94.3

[1]Based on race/ethnicity of the head of household.

Source, NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 92. PERCENT COMPLETION EXPERIENCE AFTER RETURN VISITS AND TOTAL RESPONSE RATES BY AGE GROUP: 1985

VISITS TO ELIGIBLE RESPONDENTS	AGE GROUPS (YEARS) 12-17	18-25	26-34	35 +	Total
Initial Visit	22.4	22.4	22.1	25.8	23.1
2nd Visit	21.5	19.9	19.2	20.6	20.3
3rd Visit	17.2	13.6	14.1	13.9	14.8
4th Visit	9.1	9.0	9.0	7.7	8.7
5th Visit	6.2	6.4	5.7	4.5	5.7
6th Visit	3.7	4.0	4.5	2.7	3.8
7th Visit	2.0	2.9	2.6	1.9	2.3
8th Visit	1.7	2.2	1.9	1.4	1.8
9th Visit	1.4	1.9	1.0	0.6	1.2
10th Visit	*	0.8	0.7	*	0.6
11th Visit	*	0.5	*	*	*
12th Visit or More	*	0.6	1.3	0.7	0.8
TOTAL COMPLETED INTERVIEWS	2,246	1,813	2,166	1,813	8,038
RESPONSE RATE	86.0	84.5	82.6	80.5	83.5

* Less than one-half of one percent.

Source, NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 93. PERCENT OF MISSING DATA IN UNWEIGHTED SAMPLE ON SELECTED DRUG USE MEASURES FOR LIFETIME, PAST YEAR, AND PAST MONTH USAGE BY AGE GROUP: 1985

DRUG	AGE GROUP (YEARS)				
(Unweighted N)	12-17 (2,246)	18-25 (1,813)	26-34 (2,166)	35 + (1,813)	Total (8,038)
MARIJUANA					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.1	0.4	0.1	0.2	0.2
Past Month	0.3	0.8	0.3	0.2	0.4
COCAINE					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.1	0.4	0.1	0.5	0.3
Past Month	0.2	0.6	0.4	0.7	0.4
INHALANTS					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.6	1.1	0.9	1.9	1.1
Past Month	0.6	1.1	0.9	1.9	1.1
HALLUCINOGENS					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.0	0.3	0.3	0.6	0.3
Past Month	0.1	0.3	0.4	0.6	0.3
PCP					
Lifetime	0.2	0.3	0.6	0.6	0.4
Past Year	0.3	0.5	0.6	0.6	0.5
Past Month	0.3	0.5	0.6	0.6	0.5
HEROIN					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	*	0.1	*	0.1	0.1
Past Month	*	0.1	*	0.1	0.1

* Less than one-half of one-tenth of one percent.

Source: NIDA, National Household Survey on Drug Abuse, 1985.

TABLE 94. PERCENT OF MISSING DATA IN UNWEIGHTED SAMPLE ON NONMEDICAL USE OF PSYCHOTHERAPEUTICS, CIGARETTES, AND ALCOHOL MEASURES FOR LIFETIME, PAST YEAR, AND PAST MONTHUSAGE BY AGE GROUP: 1985

DRUG	AGE GROUP (YEARS)				
(Unweighted N)	12-17 (2,246)	18-25 (1,813)	26-34 (2,166)	35 + (1,813)	Total (8,038)
NONMEDICAL USE OF ANY PSYCHOTHERAPEUTIC					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	1.5	2.0	1.8	0.8	1.5
Past Month	2.0	2.5	2.3	0.9	1.9
STIMULANTS					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.3	0.8	0.7	0.2	0.5
Past Month	0.4	1.0	0.8	0.2	0.6
SEDATIVES					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.6	0.6	0.3	0.3	0.5
Past Month	0.6	0.7	0.3	0.3	0.5
TRANQUILIZERS					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.5	0.8	0.6	0.3	0.5
Past Month	0.6	0.8	0.8	0.3	0.6
ANALGESICS					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	1.0	1.1	1.2	0.2	0.9
Past Month	1.3	1.3	1.3	0.2	1.0
CIGARETTES					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.5	0.8	0.1	0.8	0.5
Past Month	0.5	0.8	0.1	0.8	0.5
ALCOHOL					
Lifetime	0.0	0.0	0.0	0.0	0.0
Past Year	0.4	0.2	0.2	0.4	0.3
Past Month	0.8	0.5	0.3	0.6	0.5

Source: NIDA, National Household Survey on Drug Abuse, 1985.

KEY DEFINITIONS

KEY DEFINITIONS 1971-1982 SURVEYS

KEY DEFINITIONS 1985 SURVEY

KEY DEFINITIONS

KEY DEFINITIONS: 1971-1982 SURVEYS

Alcohol	1982:	"Beer, wine, and liquor, like whiskey or gin."
	1979:	"Alcoholic beverages -- beer, wine, and whiskey, gin, other 'hard' liquors."
	1977, 1976, 1974:	"Alcoholic beverages -- beer, wine, and whiskey, or anything else to drink with alcohol in it."
	1972:	"Beer; wine; hard liquor like cocktails or highballs, or on the rocks, or straight shots."
	NOTE:	The 1979 and 1982 questions on alcohol are not comparable with earlier years because of a different procedure. In 1979 and 1982, the responses to the alcohol questions were marked on a private answer sheet rather than being spoken to the interviewer as in the earlier surveys. The new design was implemented to (1) provide respondent training on the answer sheet procedure prior to its use for illicit substances, and (2) provide the same conditions of privacy for this drug as for the illicit drugs to encourage full disclosure.
Analgesics (Nonmedical Experience)	1982:	Respondents were told that this pill class includes painkilling pills that, unlike aspirin, are usually available only with a doctor's prescription. Respondents were also shown the pill card of analgesic pills.
	1979:	"Sometimes doctors prescribe these pills to relieve pain. But besides the medical uses, people sometimes take these pills on their own to see how they work or just to feel good."
Answer Sheets	1982:	Answer sheets were used to ensure privacy of responses for questions on alcohol, marijuana, cocaine, hallucinogens, and heroin, as well as for questions on the nonmedical use of psychotherapeutics. These forms were filled out by the respondent while the interviewer read the questions aloud. On certain later answer sheets, interviewers used their judgment on whether or not to offer respondents the option of reading silently and filling the sheets out entirely on their own.

Black and Other Races

1982: Those individuals who stated that they were Black, American Indian or Alaskan Native, Asian or Pacific Islander, or who volunteered Black/Hispanic or some other combination.

1979, 1977: Those individuals who state that their family origin is American Indian, Alaskan Native, Asian, black, Pacific Islander, or some other race (other than white).

1976, 1974: Those individuals whose racial background, according to interviewer observation, was determined to be American Indian, black, Oriental, or some other category (other than white).

1972, 1971: Those individuals whose category, according to interviewer observation, was determined to be Negro, Puerto Rican or other Latin American group, or some other category (other than white).

NOTE: Due to changes in Federal reporting options for race and ethnicity as well as frequent changes in the administration and content of such items over time, Hispanics have appeared in two racial categories ("White" and "Black and other races"). In 1979 and 1982, Hispanics were included in the "White" category; in 1977, they appeared in one or the other category depending on how they identified themselves; in 1976 and 1974, they were included in one or the other category depending on how the interviewer identified them; and in 1972 and 1971, all Hispanics appeared in the "Black and other races" category.

Cigarettes

1982: Lifetime prevalence was based on the question, "About how old were you when you first tried a cigarette?": All respondents were asked about current use which was defined as smoked in the past 30 days.

1979: Lifetime prevalence was based on the question, "About how old were you when you first tried a cigarette?": Current use was defined as smoked in past 30 days; only those respondents who had smoked as many as five packs of cigarettes during their lifetimes were asked about current use.

1977, 1976, 1974: Lifetime prevalence was based on the question, "Have you ever smoked cigarettes?" Current use was defined as smoked within past month; all respondents were asked about current use.

1972: No data provided on lifetime prevalence. Current use was defined as smoke at "the present time"; all respondents were asked about current use.

1971: No data provided on lifetime prevalence. Current use was defined as smoke at "the present time"; only those respondents who ever smoked were asked about current use.

NOTE: The 1979 questions on recency of cigarette use are not comparable with other years because a different operational definition was employed in 1979; i.e., in 1979, only respondents who had smoked five or more packs in their lifetime were asked about recency of use.

Current Drinker

1982: Reported use of alcohol in the month prior to the interview.

1979, 1977, 1976, 1974: Drank in past month.

1972: Drank in the past seven days.

NOTE: The 1979 questions on alcohol are not comparable with earlier years because a different procedure was employed in 1979. The responses to the 1979 alcohol questions were marked on a private answer sheet rather than being spoken to the interviewer as in the earlier surveys. The new design was implemented to (1) provide respondent training on the answer sheet procedure prior to its use for illicit substances, and (2) provide the same conditions of privacy for this drug as for the illicit drugs to encourage full disclosure.

Current Smoker

1982: Reported use of cigarettes during the month prior to interview.

1979: Smoked in past thirty days, and have smoked as many as five packs of cigarettes during their lifetimes.

1977, 1976, 1974: Smoked within past month.

1972, 1971: Smoke at "the present time."

NOTE: The 1979 questions on cigarettes are not comparable with other years because a different operational definition was employed in 1979.

First Use in Past Year

1982: Respondents who report using the drug in question for the first time during year prior to interview. The percentage of new users is calculated on a base that includes all respondents in the age group.

NOTE: This is not a conventional incidence measure.

1979, 1977, 1976, 1974: Respondents who reported using drug "X" for the first time during the past year. The percentage of new users is calculated on a base that includes all respondents in the age group.

NOTE: This is not a conventional incidence measure.

Hallucinogens

1982: "LSD and other hallucinogens, such as PCP or phencyclidine, mescaline, peyote, psilocybin, DMT."

1979: "LSD and other hallucinogens such as PCP or phencyclidine, mescaline, peyote, psilocybin, DMT." Data for PCP are included within general data on hallucinogens and also provided separately.

1977, 1976: "LSD and other hallucinogens like mescaline, peyote, psilocybin, and DMT." Separate data are provided for PCP.

1974: "LSD or other hallucinogens."

1972: "LSD or something like it, such as mescaline, psilocybin, MSA, STP."

Lifetime Prevalence (Ever Used)

1982: Percent who ever used the drug one or more times in lifetime.

Marijuana

1982: "Marijuana and Hashish"

1979: "Marijuana and (or) Hashish"

NOTE: Although the data in 1979 and 1982 pertain to use of either of these substances, experience in the earlier surveys indicates that most respondents who report using hashish have also used marijuana.

1977, 1976, 1974, 1972, 1971: Data reported are for marijuana only.

Nonmedical Use of Any Psychotherapeutic Drugs

1982: Use of a pill or other drug(s) from any of the four psychotherapeutic drug categories in order to get high or to enjoy the feeling or just for kicks or curiosity or for any other nonmedical purpose. The four categories are sedatives, tranquilizers, stimulants, and analgesics.

In the 1982 survey, private answer sheets were used to record answers to questions on nonmedical use of psychotherapeutics. This was the first survey in which answer sheets were used for this type of drug use. From 1972 through

1979, questions on nonmedical use were asked in the "open interview" (answer aloud) fashion.

1979, 1977, 1976, 1974: A "yes" or "not sure" response to any one (or more) of the following three items: "(1) Did you ever take any of these kinds of pills just to see what it was like and how it would work? (2) Did you ever take any of these kinds of pills just to enjoy the feeling they give you? (3) Did you ever take any of the pills for some other nonmedical reason, and not because you needed it?"

NOTE: In 1977 only, questions about nonmedical experience were assigned to a random half of the households in which interviews were conducted.

1972: A "yes" response to any one (or more) of the following five items: "(1) Have you ever taken these pills to help you get along with your family or other people? (2) Have you ever taken any of these pills to help you accomplish something? (3) Did you ever take any of these kinds of pills just to see what it was like and how it would work? (4) Have you ever taken any of these pills before going out, so that you could enjoy yourself more with other people? (5) Did you ever take these kinds of pills just to enjoy the feeling they give you?"

Sedatives (Nonmedical Experience)

1982: Barbiturates and other sedatives (often referred to as sleeping pills). Respondents were told that doctors sometimes prescribe these pills to help people go to sleep or to help them calm down during the day or for some other medical purpose. Respondents were also shown the pill card of sedative pills.

1979: "These pills are barbiturates and other sedatives. Sometimes doctors prescribe these pills to calm people down during the day or to help them sleep at night. But besides medical use, people sometimes take these pills on their own, to help them relax, or just to feel good."

1977, 1976, 1974: "Doctors sometimes prescribe these to help relax during the day and to get a better night's sleep. People also use these on their own, to help relax and just feel good. These are barbiturates or sedatives and are sometimes called 'downs' or 'downers.'"

NOTE: In 1977 only, questions about sedatives were assigned to a random half of the households

in which interviews were conducted.

1972: "Doctors prescribe these to help relax and to get a better night's sleep. People also use these on their own--to help relax and just feel good. These are barbiturates and are sometimes called 'downs' or downers.'"

Stimulants (Nonmedical Experience) 1982: Amphetamines or other stimulants. Respondents were told that these pills are sometimes used to help people lose weight and they are usually available only with a doctor's prescription, Respondents were also shown the pill card of stimulant pills.

1979: "These pills are amphetamines and other stimulants. Doctors sometimes prescribe these for losing weight. But besides medical uses, people sometimes take them on their own to make them feel more wide-awake, peppy, and alert."

1977, 1976, 1974: "Doctors sometimes prescribe these for losing weight. But besides medical uses, people sometimes take them on their own to make them feel more wide-awake, peppy, and alert." They are sometimes called 'ups' or 'uppers,' 'speed,' or 'bennies.'"

NOTE: In 1977 only, questions aboutstimulants were assigned to a random half of the households in which interviews were conducted.

1972: "Doctors prescribe these mostly for losing weight, and sometimes to give people more energy. People also use these on their own, just to feel good. These are amphetamines. They are sometimes called 'ups' or 'uppers,' speed,' or 'bennies.'"

Tran-quilizers (Nonmedical Experience) 1982: Respondents were told that the tranquilizer pill class includes pills that are usually available only with a doctor's prescription and are prescribed to help people calm down or to relax their muscles, etc. Respondents were also shown the pill card of tranquilizer pills.

1979: "These pills are tranquilizers. Doctors sometimes prescribe them to calm people down, quiet their nerves, or relax their muscles. But besides the medical uses, people sometimes take these pills on their own to help them relax, or just feel good."

1977, 1976, 1974: "Doctors sometimes prescribe these to calm people down, or quiet their nerves, or relax their muscles. People also take them

on their own to help them feel better. These are tranquilizers."

NOTE: In 1977 only, questions about tranquilizers were assigned to a random half of the households in which interviews were conducted.

1972: These help people to calm down, and to quiet their nerves. Doctors sometimes prescribe them. People also take them on their own to help them feel better. These are tranquilizers."

Use in Past Month

1982: Respondent reports use within the month (30 days) prior to the interview date.

NOTE: In 1982, respondents who did not check "within the past month (30 days)" on the recency question or did not answer the question were defined as non-users.

1979, 1977, 1976: Reports use within "past week," "past month," or one or more days within the past 30 days.

1974: Has used within past month.

1972, 1971: Marijuana only--self designated current users who reported usage "once a month or less," as well as those who reported more frequent use Other drugs--has used within past month.

Use in Past Year

1982: Respondent reports use one or more times during year prior to interview date. Includes persons reporting that their most recent use occurred in the past month or past year, as well as those persons who (though categorized as "not sure" of most recent use) indicated that their first use of the drug occurred during the past year.

NOTE: In 1982, respondents who did not check use within the past year on the recency question or did not answer the question were defined as non-users.

1979: Respondent reports use one or more times during year prior to interview date.

1977: Respondent reports use one or more times within past calender year.

White

1982: Those individuals who chose the category White or Hispanic as the category that best describes them.

1979: Those individuals who state that their family origin is white or that they are of Spanish-American origin.

1977: Those individuals who state that their family origin is white.

1976, 1974, 1972, 1971: Those individuals whose racial background, according to interviewer observation, was determined to be white.

KEY DEFINITIONS

KEY DEFINITIONS: 1985 SURVEY

In this section, definitions of substances, the categories used in tables, and other terms used in the report are provided. Also included are decision rules with regard to rounding and other information concerning interpretation of the data. The definitions used in earlier studies are presented in the section entitled "Key Definitions 1971-1982."

Age	Age of respondents is defined as age at time of interview. This corresponds to the definition used in previous Main Findings, but differs slightly from the definition used in the report of the 1985 Population Estimates, where age is defined as age as of July 1, 1985.
Age Group	For most of the reported analyses, respondents are divided into four age groups for those: 12-17, 18-25, 26-34, and 35 +. The term age group is used for these groupings.
Alcohol	"The next questions are about alcohol, that is, beer, wine and liquor, like whiskey, gin or mixed alcoholic drinks like gin and tonic." Responses to the questions about alcohol were marked on an answer sheet.
Analgesics	"The next questions are about the use of analgesics. People sometimes take analgesics as painkillers or for some other reason. We're interested in non-medical use -- using analgesics or painkillers on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them."
NOTE:	The section of the interview instrument concerning nonmedical use of prescription-type drugs was introduced with the following statement by the interview. "The next questions will be about prescription-type drugs. There will be separate questions for sedatives,

tranquilizers, stimulants, and analgesics. As you can see on this card, sedatives include downers, barbiturates, and Seconal. Tranquilizers include antianxiety drugs like Librium, Valium, Ativan, and Meprobamate. Stimulants include uppers, amphetamines, speed, and Preludin. Analgesics include pain killers like Darvon, Demerol, Percodan, and Tylenol with codeine.

Now, read with me below the line on the card because this is very important. We are interested in the nonmedical use of these prescription-type drugs. Nonmedical use of these drugs is any use on your own, that is, either: without a doctor's prescription, or in greater amounts, or more often, or for any reasons other than a doctor said that you should take them--such as for kicks, to get high, to feel good, or curiosity about the pill's effect."

See: Nonmedical use of any psychotherapeutic, Sedatives, Stimulants, Tranquilizers.

Answer Sheets Answer sheets were used to ensure privacy of responses for questions on alcohol, marijuana, cocaine, hallucinogens, inhalants, heroin, and four classes of psychotherapeutics (analgesics, sedatives, stimulants, tranquilizers). In addition, answer sheets were used to assess consequences directly attributed by the respondent to use of different drugs. These answer sheets were filled out by the respondent while the interviewer read the questions aloud.

Base The base number or actual number of respondents in each age group by demographic characteristic (i.e., unweighted n's) are found in table 1 of this report. The percentages shown in the tables are based on weighted numbers of respondents.

Black The respondents were asked: "Which of the groups on this card best describes you? Just give me the number." Number 3 on that card was: "Black, not of Hispanic origin."

Chance to Use See Opportunity to Use.

Cigarettes Measures of use of cigarettes in the respondent's lifetime, the past year, and the past month were developed from responses to the question about recency of use: "When was the most recent time you had a cigarette?" The response alternatives were: (1) in the past 30 days; (2) within the past 6 months; (3) within the past year; (4) one to 3 years ago; (5) more than 3 years ago; and (6) not sure." An answer of 1 was classified as use in the past 30 days or month; an answer of 1, 2, or 3 was

classified as use within the past year; and persons who selected any of the answers, including "not sure" were classified as using cigarettes in their lifetime. This question was asked of all respondents who had answered a prior question about the age at which they had first tried a cigarette. If a person indicated that he or she had "never tried a cigarette," this question was not asked.

Cocaine — Estimates for prevalence of use of cocaine come from the recency of use question on the cocaine answer sheet.

See: Recency of use.

Confidence Limits — The upper and lower limits cited in this report provide the boundaries for the observed estimate of use of particular drugs. These limits suggest that if this study had been conducted 100 times, the observed prevalence rate would have been between the lower and upper confidence limits in 95 of the 100 studies. In other words, a statement that the real value for use of a particular drug lies within those limits would be correct 95% of the time.

Current Drinker — Reported use of alcohol during the month prior to the interview.

See: Recency of use.

Current Smoker — Reported use of cigarettes during the month prior to the interview.

See: Recency of use.

Current Use — See: Recency of use.

Days of Marijuana Use — Number of days respondent reported using marijuana in past 30 days. Those who never used marijuana, or did not use it in the past year or past month are coded "none."

Education — This is the measure of educational attainment among respondents who are 18 years old or over. It contains the respondents' reports of their highest level of education completed: less than high school; high school graduate; some college; college graduate. Persons who completed post-graduate work are classified as college graduates.

Ethnicity — Ethnicity refers to the respondent's self classification as to origin and identification. The question was: "Which of the groups on this card best describes you? Just give me the number." The categories included on the

card were: (1) American Indian or Alaskan Native; (2) Asian or Pacific Islander; (3) Black, not of Hispanic origin; (4) White, not of Hispanic origin; (5) Hispanic; (6) Other (specify). Tabular data are presented separately throughout this report for the three largest ethnic categories: white, black, and Hispanic. Because the number of persons not classified in one of these categories was so small and there were several different ethnic groups represented, the "others" were not shown separately in the tables but were included in the calculation of prevalence rates for the total sample.

See: White, black, Hispanic.

Ever Used — See: Lifetime prevalence

Hallucinogens — "The next questions are about LSD and other hallucinogens like PCP, peyote, and mescaline." In the Main Findings, PCP use is always included as an hallucinogen. This leads to slight differences with Population Estimates 1985 where PCP use was included only if the respondent chose to identify PCP as an hallucinogen when answering the recency question for hallucinogens. Specific types of hallucinogens come from the questions on the hallucinogens answer sheets with "other" responses coded to specific types as appropriate (e.g., acid to LSD).

Heroin — Responses for heroin prevalence come from responses to the heroin recency question on the heroin answer sheet.

See: Recency of use.

Hispanic — Question 36 was: "Which of the following groups on this card best describes you? Just give the number." One of the responses was Hispanic. The respondents who answered Hispanic to Question 36 were then asked: "Which of these Spanish-American groups best describes you: Puerto Rican, Mexican, Cuban, Central American/Caribbean, South American, Some other group (specify)."

Illicit Drugs — Marijuana, cocaine, inhalants, hallucinogens, PCP, heroin, or nonmedical psychotherapeutics.

Inhalants — General prevalence measures come from the inhalants recency question on the inhalants answer sheet. Specific types of inhalants come from the questions on the inhalants answer sheets with "other" responses coded to specific types as appropriate.

See: Recency of use.

Large Metropolitan Area

Includes Standard Metropolitan Statistical Areas (SMSAs) with a population of 250,000 or more in 1980. Large metropolitan areas include central cities and surrounding areas as defined by the U.S. Bureau of the Census. Other population density areas defined are Small Metropolitan and Nonmetropolitan.

Less than 0.5%

Percentages that are less than one-half of one percent are shown as an asterisk (*) in the tables.

Lifetime Frequency

Respondents were asked: "About how many times in your life have you used X drug: 1-2 times, 3-5 times, 6-10 times, 11-49 times, 59-99 times, 100-199 times, 200 or more times, never."

Lifetime Prevalence

The percent who have "ever" used the drug regardless of the number of times it was used.

Main Source

In previous household surveys, answers to several questions were scanned to determine a respondent's use of a particular drug. In the 1985 national survey, the same procedure was followed, but the results were coded into the responses for each question pertaining to recency of use. See Section C of the Methods Appendix for more detail.

Marijuana

Marijuana or hashish. Prevalence responses come from the recency question on the marijuana answer sheet.

See: Recency of use.

Nonmedical use of any psychotherapeutic.

The section of the interview instrument and the answer sheets dealing with nonmedical use of the four classes of psychotherapeutics was introduced as follows:

"The next questions will be about prescription-type drugs. There will be separate questions for sedatives, tranquilizers, stimulants, and analgesics. As you can see on this card, sedatives include downers, barbiturates, and Seconal. Tranquilizers include antianxiety drugs like Librium, Valium, Ativan, and Meprobamate. Stimulants include uppers, amphetamines, speed, and Preludin. Analgesics include pain killers like Darvon, Demerol, Percodan, and Tylenol with codeine.

Now, read with me below the line on the card because this is very important. We are interested in the nonmedical use of these prescription-type drugs. <u>Nonmedical use of these drugs is any use on your own, that is, either</u>:

without a doctor's prescription, or in greater amounts, or more often, or for any reasons other than a doctor said that you should take them--such as for kicks, to get high, to feel good, or curiosity about the pill's effect."

NOTE: The pill card contained pictures and names of specific drugs within each psychotherapeutic category. For example, pictures and the names of Valium, Librium, and 13 other tranquilizers were shown when the section on tranquilizers was introduced.

See: Analgesics, Sedatives, Stimulants, and Tranquilizers.

Non-Metropolitan — Those areas of the continental United States that were not part of a Standard Metropolitan Statistical Area (SMSA) as of 1980, according to the U.S. Bureau of the Census. In general, this includes small communities, rural non-farm areas, and rural farm areas. Other population density areas defined are Large Metropolitan or Small Metropolitan.

North Central — The states included are the East North Central states--Illinois, Indiana, Michigan, Ohio, and Wisconsin--and the West North Central states--Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, and South Dakota.

Northeast — The states included are the New England states of Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont and Middle Atlantic states--New Jersey, New York, Pennsylvania.

Opportunity to Use — Respondents reported how old they were when they first had a chance to try a particular drug.

PCP — Prevalence measures come from the "recency of use" of PCP question. In the Main Findings, the measure of PCP differs slightly from that reported earlier in the Population Estimates 1985 because of a difference in the treatment of missing data.

Percentages — The percentages presented in the tables are based on weighted data, and they are presented to one digit beyond the decimal point. Except for tables in the appendix on sampling and response, all the tables contain percentages based on weighted data.

See: Rounding

Population Density — See: Large Metropolitan, Small Metropolitan, and Nonmetropolitan.

Prevalence — General term used to describe the estimates for lifetime, past year, and past month usage.

Psychotherapeutics — See: Nonmedical use of any psychotherapeutic, analgesics, sedatives, stimulants, tranquilizers.

Race/Ethnicity — In the 1985 Survey, data are presented separately for whites, not of Hispanic origin; blacks, not of Hispanic origin; and Hispanics. In previous versions of this survey the racial categories were "white," and "black and other races."

See: Black, Ethnicity, Hispanic, White.

Recency of Use — The recency question for each drug is the source for the lifetime, past year, and past month prevalence rates.

Classification as having used a drug during the past month was essentially the same for all classes of drugs. The question was: "When was the most recent time /that you used/you took/ [drug name]?" For the four classes of psychotherapeutics, the phrase "for nonmedical reasons" was added after the name of the drug. The response alternatives were the same with the exception of marijuana and inhalants. The response alternatives were: (1) Within the past month (30 days); (2) Within the past six months but more than a month ago; (3) Six months to a year ago; (4) More than a year to three years ago; and (5) More than three years ago. For marijuana and inhalants the first response alternative was "Within the past week" and the second alternative was "Within the past month (30 days) but more than a week ago."

The recency questions were recoded to contain the best available information on each drug. See Section C of the Methods Appendix for more detail.

Region — Region was grouped in this study into four categories: Northeast, North Central, South, and West.

See: Northeast, North Central, South, West, for a more detailed definition of the states included in each region. These are based on classifications developed by the U.S. Bureau of the Census.

Rounding — The decision rules for rounding of percentages were as follows. If the second number to the right of the decimal point was greater than 5, the first number to the right of the decimal point was rounded up to the next highest number. If

the second number to the right of the decimal point was less than 5, the first number to the right of the decimal point remained the same. If the second number to the right of the decimal point was equal to 5, the first number to the right of the decimal point was rounded to the nearest even number. Thus, a prevalence rate of 16.55 percent would be rounded to 16.6%, while a rate of 16.45 percent would be rounded to 16.4%.

While the percentages generally total 100%, the use of rounding sometimes produces a total of slightly less than or more than 100%.

See: Percentages

Sedatives

"We'll start by talking about nonmedical use of barbiturates and other sedatives. People sometimes take barbiturates and other sedatives to help them go to sleep or to help them calm down during the day or for some other reason. We're interested in the use of sedatives, also called downers, on your own. First, circle the number next to each sedative you ever took for nonmedical reasons, that is, on your own, either without a doctor's prescription or in greater amounts or more often or for any reason other than a doctor said you should take it."

See: Analgesics, Nonmedical use of any psychotherapeutics, Stimulants, Tranquilizers.

Significance

In the tables in which trends are shown, the level of significance for the changes between 1982 and 1985 are noted as follows: .05, .01, .001. These same levels are used in comparing two rates in the text for subgroups of the 1985 sample.

Small Metropolitan

Standard Metropolitan Statistical Areas with a population under 250,000 in 1980 constitute Small Metropolitan areas. Other population density areas defined are Large Metropolitan and Nonmetropolitan.

Smokeless Tobacco Use

Assessed by the following question: "On the average, in the past 12 months, how often, if ever, have you used chewing tobacco or snuff or other smokeless tobacco?" The response alternatives were: (1) daily; (2) almost daily (3-6 days a week); (3) 1 or 2 days a week; (4) several times a month (25-51 days a year); (5) 1-2 times a month (12-24 days a year); (6) every other month or so (6-11 days a year); (7) 3-5 days this past year; (8) 1 or 2 days this past year; (9) never in the past year; (10) never used it.

South — This census classification contains the South Atlantic states--Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, and West Virginia; the East South Central states of Alabama, Kentucky, Mississippi, and Tennessee, and the West South Central states of Arkansas, Louisiana, Texas, and Oklahoma.

Stimulants — "The next questions are about the use of amphetamines or other stimulants. People sometimes take stimulants to help them lose weight or for some other reason. We're interested in nonmedical use -- taking stimulants, also called uppers, on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them."

See: Analgesics, Nonmedical use of any psychotherapeutic, Sedatives, Tranquilizers.

Tranquilizers — "The next questions are about the use of tranquilizers on your own. People sometimes take tranquilizers to help them calm down or to relax their muscles or for some other reason.... Circle the number next to each tranquilizer you ever took for nonmedical reasons-- on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them."

See: Analgesics, Nonmedical use of any psychotherapeutic, Sedatives, Stimulants.

Use in Past Year — See: Recency of use.

Weight — A weight variable was used to adjust percentage estimates to represent the approximate age group by sex by race/ethnicity distribution in the U.S. household population. See Methods Appendix Section A for more detail.

West — This census classification includes the states of Arizona, California, Colorado, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

White — Those individuals who described themselves as "White, not of Hispanic origin" in response to the question: "Which of the groups on this card best describes you? Just give me the number."

DRUG PAGES FROM QUESTIONNAIRE
DRUG ANSWER SHEETS

01/

CIGARETTES

The first question is about smoking tobacco.

C-1. About how old were you when you first tried a cigarette?

32-33

_____ (AGE)	(SKIP TO Q. C-9)	Never tried a cigarette	97

C-2. Have you smoked as many as five packs of cigarettes, that is, at least 100 cigarettes, in your life?

34

Yes	1
No	2
Not sure	3

C-3. When was the most recent time you had a cigarette?

35

	In the past 30 days	1
	Within the past 6 months	2
(SKIP	Within the past year	3
TO	One to 3 years ago	4
Q. C-6)	More than 3 years ago	5
	Not sure	6

C-4. How many cigarettes have you smoked, on the average, during the past 30 days? Give me the average number per day.

36

Less than one cigarette a day	1
One to five cigarettes a day	2
About ½ pack a day (6-15 cigarettes)	3
About a pack a day (16-25 cigarettes)	4
About 1½ packs a day (26-35 cigarettes)	5
About two packs or more a day (over 35 cigarettes)	6
Not sure	7

C-5. For about how many years have you smoked (ANSWER FROM Q. C-4)?

_____ (YEARS) OR _____ (MONTHS) OR _____ (WEEKS)

37-39

Not sure	998

C-6. About how old were you when you first started smoking daily? 01/

40-41

_____ (AGE)

(SKIP TO Q. C-9) Never smoked daily	97

C-7. For how many years did you smoke daily?

42-43

_____ (YEARS)

C-8. On the average, during most of this period when you smoked daily, about how many cigarettes did you smoke a day?

44

One to five cigarettes a day	1
About ½ pack a day (6-15 cigarettes)	2
About a pack a day (16-25 cigarettes)	3
About 1½ packs a day (26-35 cigarettes)	4
About two packs or more a day (over 35 cigarettes)	5

C-9. On the average, in the past 12 months, how often, if ever, have you used chewing tobacco or snuff or other smokeless tobacco?

45-46

Daily	01
Almost daily (3-6 days a week)	02
1 or 2 days a week	03
Several times a month (25-51 days a year)	04
More than once a month (13-24 days a year)	05
Every other month or so (6-12 days a year)	06
3-5 days this past year	07
1 or 2 days this past year	08
Never in the past year	09
Never used it	10

ALCOHOL (BEER, WINE, LIQUOR, MIXED DRINKS) ANSWER SHEET #1

A-1. About how old were you the first time you had a glass of beer or wine or a drink of liquor, such as whiskey, gin, scotch, etc.? Do not include childhood sips that you might have had from an older person's drink

7

Age: _____	
Never had a drink of beer, wine, or liquor	X

A-2. When was the most recent time that you had an alcohol drink, that is, of beer, wine, or liquor or mixed alcoholic drinks?

9

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never had a drink of beer, wine, or liquor	X

A-3. On those occasions when you drink alcohol, is it usually beer, wine, or liquor?

10

Beer	1
Wine	2
Liquor	3
It varies	4
Never had a drink of beer, wine, or liquor	X

A-4. If you used alcohol during the past 30 days, on how many different days did you have one or more drinks? (IF NONE IN THE PAST 30 DAYS, WRITE IN ZERO.)

11

Total number of days: _____	
Never had a drink of beer, wine, or liquor	X

A-5. On the days that you drank during the past 30 days, about how many drinks did you usually have a day?

13

Usual number of drinks: _____	
Never had a drink of beer, wine, or liquor	X

(PLEASE TURN THE ANSWER SHEET OVER.)

A-6. During the past 30 days, what is the most you had to drink on any one day?

15

Most number of drinks: _____	
Never had a drink of beer, wine, or liquor	X

A-7. On how many days in the past 30 days did you have this number of drinks? (The amount you wrote in question A-6.)

17

Number of days you drank amount in A-6: _____	
Never had a drink of beer, wine, or liquor	X

A-8. During the past 30 days, about how many days did you have five or more drinks on the same occasion? By occasion we mean at the same time or within a couple of hours of each other.

19

Number of days you drank five or more drinks: _____	
Never had a drink of beer, wine, or liquor	X

A-9. About how old were you when you first began to use alcohol once a month or more?

21

Age: _____	
Never used alcohol once a month or more	1
Never had a drink of beer, wine, or liquor	X

A-10. On the average, how often in the last 12 months have you had any alcoholic beverage, that is, beer, wine, or liquor?

23

Daily	1
Almost daily or 3 to 6 days a week	2
About 1 or 2 days a week	3
Several times a month or about 25 to 51 days a year	4
1 to 2 times a month or 12 to 24 days a year	5
Every other month or so or 6 to 11 days a year	6
3 to 5 days in the past 12 months	7
1 or 2 days in the past 12 months	8
None	0

(PLEASE GO TO THE NEXT PAGE.)

A-11. How many times in the past 12 months have you gotten very high or drunk on alcohol?

24

Daily	1
Almost daily or 3 to 6 days a week	2
About 1 or 2 days a week	3
Several times a month or about 25 to 51 days a year	4
1 to 2 times a month or 12 to 24 days a year	5
Every other month or so or 6 to 11 days a year	6
3 to 5 days in the past 12 months	7
1 or 2 days in the past 12 months	8
None	0

A-12. In the past 12 months, did you ever drink beer, wine, or liquor and also use some other drug on the same occasion, that is, at the same time or within a couple of hours of using alcohol? (CIRCLE THE NUMBER OF EACH OF THOSE DRUGS THAT YOU HAVE USED ON THE SAME OCCASION AS ALCOHOL)

Sedatives--downers, barbiturates, sleeping pills, and Seconal	1	25
Tranquilizers--antianxiety drugs like Librium and Valium	2	
Stimulants--uppers, amphetamines, and speed	3	27
Analgesics--pain killers like Darvon, Demerol, and Percodan	4	
Marijuana	5	29
Inhalants	6	
Cocaine	7	31
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like hercin, morphine	9	33
None	0	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

SEDATIVES ANSWER SHEET #2

S-1. Circle the number next to each sedative you ever took for nonmedical reasons--on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them. 35

BUTISOL	01 [36]	PLACIDYL	10 [45]	NEMBUTAL	19 [54]
BUTICAPS	02	DORIDEN	11	CARBRITAL	20
AMYTAL	03 [38]	NOLUDAR	12 [47]	SECONAL	21 [56]
ESKABARB	04	SOPOR	13	TUINAL	22
LUMINAL	05 [40]	QUAALUDE	14 [49]	PENTOBARBITAL	23 [58]
MEBARAL	06	PAREST	15	SECOBARBITAL	24
AMOBARBITAL	07 [42]	NOCTEC	16 [51]	DALMANE	25 [60]
PHENOBARBITAL	08	METHAQUALONE	17	NOT SURE	26
ALURATE	09	CHLORAL HYDRATE	18	OTHER (SPECIFY): _____	62-65 27

If you never took any sedative for nonmedical reasons, circle the X here and tell the interviewer that you are finished. Otherwise, answer every question. X

S-2. About how old were you the first time you took a sedative for any nonmedical reason? 66-67

Age: _____

S-3. Altogether, about how many times in your life have you taken sedatives for any nonmedical reason? 68

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7

(PLEASE TURN THE ANSWER SHEET OVER.)

S-4. When was the most recent time you took any sedative for nonmedical reasons?

69

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5

S-5. In the past 12 months, which of the substances listed, if any, did you use on the same occasion as a sedative, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	70
Tranquilizers--antianxiety drugs like Librium and Valium	2	
Stimulants--uppers, amphetamines, and speed	3	72
Analgesics--pain killers like Darvon, Demerol, and Percodan	4	
Marijuana	5	74
Inhalants	6	
Cocaine	7	76
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like heroin, morphine	9	78
None in the past 12 months on the same occasion	0	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

TRANQUILIZERS ANSWER SHEET #3

T-1. Circle the number next to each tranquilizer you ever took for nonmedical reasons--on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them.

7-8

VALIUM	01	9	MILTOWN	10	18
LIBRIUM	02		EQUANIL	11	
LIBRITABS	03	11	MEPROBAMATE	12	20
SK-LYGEN	04		VISTARIL	13	
SERAX	05	13	ATARAX	14	22
TRANXENE	06		BENADRYL	15	
ATIVAN	07	15	XANAX	16	24
VERSTRAN	08		NOT SURE	17	
MEPROSPAN	09		OTHER (SPECIFY): _____		26-29 18

If you never took any tranquilizer for nonmedical reasons, circle the X here and tell the interviewer that you are finished. Otherwise, answer every question. X

T-2. About how old were you the first time you took a tranquilizer for any nonmedical reason?

30-31

Age: _____

T-3. Altogether, about how many times in your life have you taken tranquilizers for any nonmedical reason?

32

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7

(PLEASE TURN THE ANSWER SHEET OVER.)

T-4. When was the most recent time you took any tranquilizer for nonmedical reasons?

33

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5

T-5. In the past 12 months, which of the substances listed, if any, did you use on the same occasion as a tranquilizer, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	34
Sedatives--downers, barbiturates, sleeping pills, and Seconal	2	
Stimulants--uppers, amphetamines, and speed	3	36
Analgesics--pain killers like Darvon, Demerol, and Percodan	4	
Marijuana	5	38
Inhalants	6	
Cocaine	7	40
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like heroin, morphine	9	42
None in the past 12 months on the same occasion	0	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

44-45

STIMULANTS ANSWER SHEET #4

ST-1. Circle the number next to each stimulant you ever took for nonmedical reasons--on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them.

DEXEDRINE	01 [46]	OBEDRIN-L.A.	09 [54]	PONDIMIN	17 [62]
DEXAMYL	02	TENUATE	10	VORANIL	18
ESKATROL	03 [48]	TEPANIL	11 [56]	SANOREX	19 [64]
BENZEDRINE	04	DIDREX	12	RITALIN	20
BIPHETAMINE	05 [50]	PLEGINE	13 [58]	CYLERT	21 [66]
DESOXYN	06	PRELUDIN	14	NOT SURE	22
DETROAMPHETAMINE	07 [52]	PRE-SATE	15 [60]	OTHER (SPECIFY): _____	[68-71] 23
METHEDRINE	08	IONAMIN	16	_____	

If you never took any stimulant for nonmedical reasons, circle the X here and tell the interviewer that you are finished. Otherwise, answer every question. X

ST-2. About how old were you the first time you took amphetamines or other stimulants for any nonmedical reason?

[72-73]

Age: _____

ST-3. Altogether, about how many times in your life have you taken amphetamines or other stimulants for any nonmedical reason?

[74]

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7

(PLEASE TURN THE ANSWER SHEET OVER.)

ST-4. When was the most recent time you took any amphetamine or other stimulant for nonmedical reasons?

	75
Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5

ST-5. In the past 12 months, which of the substances listed, if any, did you use on the same occasion as a stimulant, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	76
Sedatives--downers, barbiturates, sleeping pills, and Seconal	2	
Tranquilizers--antianxiety drugs like Librium and Valium	3	78
Analgesics--pain killers like Darvon, Demerol, and Percodan	4	
Marijuana	5	
Inhalants	6	07/ 7
Cocaine	7	
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	9
Opiates like heroin, morphine	9	
None in the past 12 months on the same occasion	0	11

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

ANALGESICS ANSWER SHEET #5

AN-1. Circle the number next to each analgesic you ever took for nonmedical reasons--on your own, either without a doctor's prescription or in greater amounts or more often or for a reason other than a doctor said you should take them.

12-13

DARVON	01 [14]	TYLENOL WITH CODEINE	10 [23]
DOLENE	02	CODEINE	11
SK-65	03 [16]	DOLOPHINE	12 [25]
PROPOXYPHENE	04	WESTODONE	13
LERITINE	05 [18]	METHADONE	14 [27]
LEVO-DROMORAN	06	TALWIN	15
PERCODAN	07 [20]	NOT SURE	16
DEMEROL	08	OTHER (SPECIFY):_____	30-33 17
DILAUDID	09	_____	

If you never took any analgesic for nonmedical reasons, circle the X here and tell the interviewer that you are finished. Otherwise, answer every question. | X

AN-2. About how old were you the first time you took an analgesic for any nonmedical reason?

34-35

Age: _____

AN-3. Altogether, about how many times in your life have you taken analgesics for any nonmedical reason?

36

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7

(PLEASE TURN THE ANSWER SHEET OVER.)

AN-4. When was the most recent time you took any analgesic for nonmedical reasons?

37

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never took any analgesic for nonmedical reasons	X

AN-5. In the past 12 months, which of the substances listed, if any, did you use on the same occasion an an analgesic, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	38
Sedatives--downers, barbiturates, sleeping pills, and Seconal	2	
Tranquilizers--antianxiety drugs like Librium and Valium	3	40
Stimulants--uppers, amphetamines, and speed	4	
Marijuana	5	42
Inhalants	6	
Cocaine	7	44
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like heroin, morphine	9	46
None in the past 12 months on the same occasion	0	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

MARIJUANA AND HASHISH ANSWER SHEET #6

M-1. About how old were you when you first had a chance to try marijuana or hash if you wanted to?

48-49

Age: _____	
Never had a chance to try marijuana or hashish	X

M-2. About how old were you the first time you actually used marijuana or hash?

50-51

Age: _____	
Never used marijuana or hashish	X

M-3. About how many times in your life have you used marijuana or hash?

52

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7
Never used marijuana or hashish	X

M-4. When was the most recent time that you used marijuana or hash?

53

Within the past week	1
Within the past month (30 days) but more than a week ago	2
Within the past six months but more than a month ago	3
Six months to a year ago	4
More than a year to three years	5
More than three years ago	6
Never used marijuana or hashish	X

(PLEASE GO TO THE NEXT PAGE.)

M-5. On about how many different days did you use marijuana or hash during the past 30 days?

54-55

Number of days: _____	
Never used marijuana or hashish	X

M-6. About how many marijuana cigarettes, joints or reefers did you smoke per day on the average during the past 30 days?

56-57

Average number per day: _____	
Never used marijuana	X

M-7. What is the total amount of marijuana that you used in all during the past 30 days?

58

Less than 10 joints in the past 30 days	1	5 to 6 ounces in the past 30 days	6
10 to 20 joints in the past 30 days	2	7 or more ounces in the past 30 days	7
About 1 ounce in the past 30 days	3	None in the past 30 days	0
About 2 ounces in the past 30 days	4	Never used marijuana	X
3 to 4 ounces in the past 30 days	5		

M-8. About how much money in all did the marijuana you used in the past 30 days cost you? Do not include any which you sold or gave away.

59-62

Total cost of marijuana used during the past 30 days $_____	
Most of the marijuana used in the past 30 days didn't cost me anything	1
Never spent money on marijuana for my own use	2
Never used marijuana	X

M-9. During the past 30 days, when you have used marijuana, how often did you also drink alcohol on the same occasion, that is, at the same time or within a couple of hours of each other?

63

Always drank alcohol with marijuana	1
More than half the times	2
About half the times	3
Less than half the times	4
One or two times	5
Never drank alcohol with marijuana or didn't use marijuana in the past 30 days	0
Never used marijuana	X

(PLEASE GO TO THE NEXT PAGE.)

M-10. On the average, how often in the last 12 months have you used marijuana?

64-65

Several times a day	01
Daily	02
Almost daily, 3 to 6 days a week	03
1 or 2 days a week	04
Several times a month, about 25 to 51 days a year	05
1 to 2 times a month, 12 to 24 days a year	06
Every other month or so, 6 to 11 days a year	07
3 to 5 days in the past 12 months	08
1 or 2 days in the past 12 months	09
Did not use marijuana in the past 12 months	00
Never used marijuana	X

M-11. In the past 12 months, which of the substances listed, if any, did you use with marijuana on the same occasion, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	66
Sedatives--downers, barbiturates, sleeping pills, and Seconal	2	
Tranquilizers--antianxiety drugs like Librium and Valium	3	68
Stimulants--uppers, amphetamines, and speed	4	
Analgesics--pain killers like Darvon, Demerol, and Percodan	5	70
Inhalants	6	
Cocaine	7	72
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like heroin, morphine	9	74
None in the past 12 months on the same occasion	0	
Never used marijuana	X	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

7

INHALANTS ANSWER SHEET #7

IN-1. About how old were you the first time you sniffed or inhaled or huffed one of these inhalants, even once, for kicks or to get high? 8-9

Age: _____	
Never used an inhalant to get high	X

IN-2. Circle the number next to each substance that you have ever sniffed or inhaled for kicks or to get high.

Gasoline or lighter fluids	01
Spray paints	02
Other aerosol sprays	03
Shoe shine, glue or toluene	04
Lacquer thinner or other paint solvents	05
Amyl nitrite, "Poppers," locker room odorizer, "Rush"	06
Halothane, ether, or other anesthetics	07
Nitrous oxide, whippets	08
Correction fluids, degreasers, cleaning fluids	09
Other substances used as inhalants (SPECIFY):_____ _____	10
Never used an inhalant to get high	X

10 12 14 16 18 19 21-22

IN-3. Circle the number next to each substance that you have sniffed or inhaled for kicks or to get high during the past 30 days.

Gasoline or lighter fluids	01
Spray paints	02
Other aerosol sprays	03
Shoe shine, glue or toluene	04
Lacquer thinner or other paint solvents	05
Amyl nitrite, "Poppers," locker room odorizer, "Rush"	06
Halothane, ether, or other anesthetics	07
Nitrous oxide, whippets	08
Correction fluids, degreasers, cleaning fluids	09
Other substances used as inhalants (SPECIFY):_____ _____	10
Did not use an inhalant during the past 30 days to get high	0
Never used an inhalant to get high	X

23 25 27 29 31 32 34 35-36

(PLEASE TURN THE ANSWER SHEET OVER.)

IN-4. About how many times in your life have you used an inhalant to get high or for kicks? 37

1 or 2 times	1	50 to 99 times	5
3 to 5 times	2	100 to 199 times	6
6 to 10 times	3	200 or more times	7
11 to 49 times	4	Never used an inhalant to get high	X

IN-5. When was the most recent time that you used an inhalant, that is, sniffed or inhaled something to get high or for kicks? 38

Within the past week	1
Within the past month (30 days) but more than a week ago	2
Within the past six months but more than a month ago	3
Six months to a year ago	4
More than a year to three years ago	5
More than three years ago	6
Never used an inhalant to get high	X

IN-6. During the past 30 days, on about how many different days did you use an inhalant for kicks or to get high? 39-40

Number of days: _____	
Never used an inhalant to get high	X

IN-7. Thinking of all the times you used any of these inhalants, how much did you usually use? 41

Enough to feel it a little	1
Enough to feel it a lot	2
Enough to get high	3
Enough until you staggered or dropped things	4
Enough to feel you were going to pass out or come close to it	5
Something else (SPECIFY): _____ _____	6
Never used an inhalant to get high	X

IN-8. Have you ever passed out from using any of these inhalants for kicks or to get high? 42

Yes	1
No	2
Never used an inhalant to get high	X

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.) 43-44

COCAINE ANSWER SHEET #8 45

CN-1. About how old were you when you first had a chance to try cocaine if you wanted to?

46-47

Age: _____	
Never had a chance to try cocaine	X

CN-2. About how old were you the first time you actually used cocaine?

48-49

Age: _____	
Never used cocaine	X

CN-3. About how many times in your life have you used cocaine?

50

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7
Never used cocaine	X

CN-4. When was the most recent time that you used cocaine?

51

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never used cocaine	X

CN-5. During the past 30 days, on about how many different days did you use cocaine?

52-53

Number of days: _____	
Never used cocaine	X

(PLEASE GO TO THE NEXT PAGE.)

CN-6. How many grams of cocaine in all have you used <u>in the past 30 days</u> regardless of how it was consumed?

54

Less than ¼ gram--about 4 big lines in the past 30 days	1
¼ to ½ gram in the past 30 days	2
½ to 1 gram in the past 30 days	3
More than 1 gram in the past 30 days--Specify number of grams _____ or ounces _____	4
Did not use cocaine in the past 30 days	0
Never used cocaine	X

55-56

CN-7. About how much money in all did the cocaine you used <u>in the past 30 days</u> cost you? Do not include any which you sold or gave away.

57-60

Total cost of cocaine used during the past 30 days: $_____	
Never spent money on cocaine for my own use	1
Never used cocaine	X

CN-8. <u>During the past 30 days</u>, when you have used cocaine, how often did you also drink alcohol on the same occasion, that is, at the same time or within a couple of hours of each other?

61

Always drank alcohol with cocaine	1
More than half the times	2
About half the times	3
Less than half the times	4
One or two times	5
Never drank alcohol with cocaine or didn't use cocaine in the past 30 days	0
Never used cocaine	X

(PLEASE GO TO THE NEXT PAGE.)

CN-9. On the average, how often in the last 12 months have you used cocaine?

62

Daily	1
Almost daily, 3 to 6 days a week	2
1 or 2 days a week	3
Several times a month, about 25 to 51 days a year	4
1 to 2 times a month, 12 to 24 days a year	5
Every other month or so, 6 to 11 days a year	6
3 to 5 days in the past 12 months	7
1 or 2 days in the past 12 months	8
Did not use cocaine in the past 12 months	0
Never used cocaine	X

CN-10. In the past 12 months, which of the substances listed, if any, did you use on the same occasion as cocaine, that is, at the same time or within a couple of hours? (CIRCLE THE NUMBER OF EACH OF THOSE SUBSTANCES)

Alcohol	1	63
Sedatives--downers, barbiturates, sleeping pills, and Seconal	2	
Tranquilizers--antianxiety drugs like Librium and Valium	3	65
Stimulants--uppers, amphetamines, and speed	4	
Analgesics--pain killers like Darvon, Demerol, and Percodan	5	67
Marijuana	6	
Inhalants	7	69
Hallucinogens like LSD, PCP, Peyote, Mescaline, etc.	8	
Opiates like heroin, morphine	9	71
None in the past 12 months on the same occasion	0	
Never used cocaine	X	

CN-11. Circle the numbers of all the ways you have ever used cocaine.

74

Sniffing or snorting--intranasally	1
Swallowing or drinking	2
Injecting or IV route	3
Smoking or free basing	4
Other (SPECIFY):_____	5
Never used cocaine	X

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

HALLUCINOGENS (LSD, PCP OR PHENCYCLIDINE, MESCALINE, PEYOTE, PSILOCYBIN, DMT, ETC.) ANSWER SHEET

7-8 #9

L-1. About how old were you when you first had a chance to try LSD or another hallucinogen, if you wanted to?

9-10

Age: _____	
Never had a chance to try LSD or another hallucinogen	X

L-2. About how old were you the first time you actually used LSD or another hallucinogen?

11-12

Age: _____	
Never used LSD or another hallucinogen	X

L-3. About how many times in your life have you used LSD or another hallucinogen?

13

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7
Never used LSD or another hallucinogen	X

L-4. When was the most recent time that you used LSD or another hallucinogen?

14

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never used LSD or another hallucinogen	X

L-5. During the past 30 days, on about how many different days did you use LSD or another hallucinogen?

15-16

Number of days: _____	
Never used LSD or another hallucinogen	X

(PLEASE TURN THE ANSWER SHEET OVER.)

L-6. Which of the following hallucinogens have you ever tried? (CIRCLE THE NUMBER OF EACH HALLUCINOGEN YOU HAVE EVER TRIED)

LSD	1	17
Peyote	2	
Mescaline	3	19
Psilocybin (Mushrooms)	4	
PCP (Angel Dust)	5	21
Other (SPECIFY):_____	6	
Never used any hallucinogen	X	

24-27

L-7. When was the most recent time that you used PCP?

28

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never used PCP	X

L-8. Circle the number of each reaction you ever had, or were ever told you had, when you used PCP.

Had flashbacks	1	29
Had trouble seeing or hearing	2	
Felt violent	3	31
Did something violent or aggressive	4	
Other (SPECIFY):_____	5	33
No reaction	6	
Never used PCP	X	

36-39

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

40

HEROIN ANSWER SHEET #10

H-1. About how old were you when you first had a chance to try heroin, if you wanted to?

41-42

Age: _____	
Never had a chance to try heroin	X

H-2. About how old were you the first time you actually used heroin?

43-44

Age: _____	
Never used heroin	X

H-3. About how many times in your life have you used heroin?

45

1 or 2 times	1
3 to 5 times	2
6 to 10 times	3
11 to 49 times	4
50 to 99 times	5
100 to 199 times	6
200 or more times	7
Never used heroin	X

H-4. When was the most recent time that you used heroin?

46

Within the past month (30 days)	1
Within the past six months but more than a month ago	2
Six months to a year ago	3
More than a year to three years ago	4
More than three years ago	5
Never used heroin	X

H-5. During the past 30 days, on about how many different days did you use heroin?

47-48

Number of days: _____	
Never used heroin	X

H-6. Have you ever used heroin with a needle?

49

Yes	1
No	2
Never used heroin	X

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

DRUGS ANSWER SHEET #11 50-51

DR-1. Have you ever tried to cut down on your use of any of these drugs? (CIRCLE THE NUMBER OF EACH OF THOSE DRUGS)

Cigarettes	01 [52]	Inhalants	08 [59]
Alcohol	02	Cocaine	09
Sedatives	03 [54]	Hallucinogens	10 [61]
Tranquilizers	04	Heroin	11
Stimulants	05 [56]	Other opiates, morphine, codeine	12 [63]
Analgesics	06	Never tried to cut down use of any drug	13
Marijuana	07	If you never used cigarettes, alcohol, or any of these other drugs, circle the X here and tell the interviewer that you are finished. Otherwise, answer every question.	X

DR-2. Circle the number next to each drug for which you have <u>needed larger amounts to get the same effect</u> or that you could no longer get high on the amount you used to use.

Cigarettes	01 [65]	Inhalants	08 [72]
Alcohol	02	Cocaine	09
Sedatives	03 [67]	Hallucinogens	10 [74]
Tranquilizers	04	Heroin	11
Stimulants	05 [69]	Other opiates, morphine, codeine	12 [76]
Analgesics	06	Never needed larger amounts of any drug	13
Marijuana	07 [71]		

DR-3. Circle the number next to each drug you have <u>ever used every day</u> or almost daily for two or more weeks in a row.

10/

Cigarettes	01 [7]	Inhalants	08 [14]
Alcohol	02	Cocaine	09
Sedatives	03 [9]	Hallucinogens	10 [16]
Tranquilizers	04	Heroin	11
Stimulants	05 [11]	Other opiates, morphine, codeine	12 [18]
Analgesics	06	Never used any drug that often	13
Marijuana	07		

(PLEASE TURN THE ANSWER SHEET OVER.)

DR-4. Circle the number of each drug you felt that you needed or were dependent on.

Cigarettes	01 [20]	Inhalants	08 [27]
Alcohol	02	Cocaine	09
Sedatives	03 [22]	Hallucinogens	10 [29]
Tranquilizers	04	Heroin	11
Stimulants	05 [24]	Other opiates, morphine, codeine	12 [31]
Analgesics	06	Never felt I needed any drug	13
Marijuana	07		

DR-5. Circle the number next to each drug for which you've had withdrawal symptoms, that is, you felt sick because you stopped or cut down on your use of it.

Cigarettes	01 [33]	Inhalants	08 [40]
Alcohol	02	Cocaine	09
Sedatives	03 [35]	Hallucinogens	10 [42]
Tranquilizers	04	Heroin	11
Stimulants	05 [37]	Other opiates, morphine, codeine	12 [44]
Analgesics	06	Never had withdrawal symptoms	13
Marijuana	07		

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

DRINKING EXPERIENCES ANSWER SHEET #12

DE-1. For each statement, circle the 1 if you have had this experience in the past 12 months, or circle the 2 if you have not had this experience in the past 12 months.

46

If you never had a drink of beer, wine, or liquor in the past 12 months, circle the X here and tell the interviewer that you are finished. Otherwise, answer every statement.	X

	YES	NO	
a. I felt aggressive or cross while drinking.	1	2	47
b. I got into a heated argument while drinking.	1	2	
c. I stayed away from work or school because of a hangover.	1	2	49
d. I was high or tight when on the job or at school.	1	2	
e. I lost a job, or nearly lost one, because of drinking.	1	2	51
f. My wife/husband or girl/boyfriend told me that I should cut down on drinking.	1	2	
g. A relative (other than my wife/husband) told me I should cut down on my drinking.	1	2	53
h. Friends told me that I should cut down on drinking.	1	2	
i. I tossed down several drinks pretty fast to get a quicker effect.	1	2	55
j. I was afraid I might be an alcoholic or that I might become one.	1	2	
k. I stayed drunk for more than one day at a time.	1	2	57
l. Once I started drinking, it was difficult for me to stop before I became completely intoxicated.	1	2	
m. I have awakened unable to remember some of the things I had done while drinking the day before.	1	2	59
n. I had a quick drink or so when no one was looking.	1	2	
o. I often took a drink the first thing when I got up in the morning.	1	2	61
p. My hands shook a lot after drinking the day before.	1	2	
q. Sometimes I got high or tight when drinking by myself.	1	2	63
r. Sometimes I kept on drinking after promising myself not to.	1	2	

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

DRUG PROBLEMS ANSWER SHEET #13

10/

DP-1. Have you had any of these problems in the past 12 months from your use of any of the substances on this card? If yes, circle 1 and write in which substances you think probably caused the problem. If you did not have the problem in the past 12 months, circle the 2. If you never used any substance on this card, circle the X at the top of the page. Otherwise, please answer every statement.

65

If you never used any of these substances, circle the X here and tell the interviewer that you are finished. Otherwise, answer every statement.	X

	YES	(WRITE IN THE DRUGS):	NO	
a. Became depressed or lost interest in things.	1		2	66-78
b. Had arguments and fights with family or friends.	1		2	11/ 7-19
c. Had trouble at school or on the job.	1		2	20-32
d. Drove unsafely.	1		2	33-45
e. At times, I could not remember what happened to me.	1		2	46-58
f. Felt completely alone and isolated.	1		2	59-71
g. Felt very nervous and anxious.	1		2	12/ 7-19
h. Had health problems.	1		2	20-32
i. Found it difficult to think clearly.	1		2	33-45
j. Had serious money problems.	1		2	46-58
k. Felt irritable and upset.	1		2	59-71
l. Got less work done than usual at school or on the job.	1		2	13/ 7-19
m. Felt suspicious and distrustful of people.	1		2	20-32
n. Had trouble with the police.	1		2	33-45
o. Skipped four or more regular meals in a row.	1		2	46-58
p. Found it harder to handle my problems.	1		2	59-71
q. Had to get emergency medical help.	1		2	14/ 7-19

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

20

TREATMENT ANSWER SHEET #14

TR-1. Have you ever gone to a clinic, self-help group, counselor, doctor or other professional to get help to stop smoking?

21

Yes	1
No	2

TR-2. Have you ever gotten any treatment for your drinking--such as from a clinic, self-help group, counselor, doctor or other professional?

22

Yes	1
No	2

Now we are interested in treatment you may have gotten for your other drug use, that is, other than cigarettes or alcohol.

TR-3. Have you ever gotten treatment for your other drug use, not counting cigarettes or alcohol?

23

Yes	1
No	2

TR-4. In which of the places listed have you ever received treatment for your other drug use? (CIRCLE THE NUMBER OF EACH OF THOSE PLACES)

Emergency room	1
Hospital as an inpatient	2
Private doctor's office	3
Drug treatment or rehabilitation facility	4
Mental health center or facility	5
Self-help group	6
Other (SPECIFY):_____	7
Never received treatment for other drug use	X

24 26 28 30

32-35

(PLEASE TURN THE ANSWER SHEET OVER.)

TR-5. Have you ever called a drug treatment program, crisis center, telephone hotline, or other information service for your own or someone else's drug use?

36

Yes	1
No	2

TR-6. Now for your own drug use, did you call a drug telephone hotline for information or help in the past 12 months? If you never used any drugs, circle 2.

37

Yes	1
No	2

TR-7. Have you received treatment in the past 12 months for your drug use (not counting cigarettes or alcohol)?

38

Yes	1
No	2

TR-8. In the past 12 months, have you received medical treatment for any illness, injury, or other problem that you think happened because of your use of drugs? Do not include alcohol or cigarettes.

39

Yes	1
No	2

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

RISK ANSWER SHEET #15

R-1. How much do you think people risk harming themselves physically and in other ways if they do the following? If you're not sure, circle the number that comes closest to what you think might be the amount of risk.

	NO RISK	SLIGHT RISK	MODERATE RISK	GREAT RISK	
a. Smoke one or more packs of cigarettes per day?	1	2	3	4	40
b. Smoke marijuana occasionally?	1	2	3	4	
c. Smoke marijuana regularly?	1	2	3	4	42
d. Try PCP once or twice?	1	2	3	4	
e. Use PCP regularly?	1	2	3	4	44
f. Try heroin once or twice?	1	2	3	4	
g. Use heroin regularly?	1	2	3	4	46
h. Try cocaine once or twice?	1	2	3	4	
i. Use cocaine occasionally?	1	2	3	4	48
j. Use cocaine regularly?	1	2	3	4	
k. Take one or two drinks nearly every day?	1	2	3	4	50
l. Take four or five drinks nearly every day?	1	2	3	4	
m. Have five or more drinks once or twice a week?	1	2	3	4	52

(PLEASE TELL THE INTERVIEWER WHEN YOU ARE FINISHED.)

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