SUBSTANCE ABUSE
Substance Abuse

Substance abuse has been defined as “the overindulgence in and dependence on an addictive substance, especially alcohol or a narcotic drug.” While there are a wide variety of addictive substances, this section is a brief summary of three key forms of substance abuse: smoking tobacco, binge drinking and use of illicit drugs.

Smoking Tobacco
It is estimated that there were 102,000 current smokers in Contra Costa in 2005 and that 12% of the adult population were current smokers. This overall rate is not different from that of the Greater Bay Area or California.

Current Smoking
Table 1. All residents 2005

<table>
<thead>
<tr>
<th></th>
<th>Cases</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra Costa</td>
<td>102,000</td>
<td>12.00%</td>
</tr>
<tr>
<td>Greater Bay Area</td>
<td>735,000</td>
<td>12.60%</td>
</tr>
<tr>
<td>California</td>
<td>4,217,000</td>
<td>14.20%</td>
</tr>
</tbody>
</table>

- 12% of Contra Costa adults are current smokers
- Binge drinking is most common among white men
- Among illicit drugs, marijuana is the most commonly used
American Indians and those with 2 or more races have significantly higher current smoking rates compared to other race/ethnicity groups.

Editor’s Note: Analyses of Contra Costa current smoking by race/ethnicity, gender or age were not possible due to small numbers, but we can look at the Greater San Francisco Bay Area overall for an indication of the prevalence of smoking in these subgroups.

Current Smoking by Race/Ethnicity

Table 2. Greater Bay Area 2005

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Cases</th>
<th>Percent</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>367,000</td>
<td>49.90%</td>
<td>12.40%</td>
</tr>
<tr>
<td>Latino</td>
<td>137,000</td>
<td>18.60%</td>
<td>12.00%</td>
</tr>
<tr>
<td>Asian</td>
<td>138,000</td>
<td>18.80%</td>
<td>11.30%</td>
</tr>
<tr>
<td>African American</td>
<td>51,000</td>
<td>6.90%</td>
<td>13.20%</td>
</tr>
<tr>
<td>2 or more races</td>
<td>23,000</td>
<td>3.10%</td>
<td>*22.4%</td>
</tr>
<tr>
<td>American Indian</td>
<td>8,000</td>
<td>1.10%</td>
<td>**38.7%</td>
</tr>
<tr>
<td>Greater Bay Area</td>
<td>735,000</td>
<td>100.00%</td>
<td>12.60%</td>
</tr>
</tbody>
</table>

*Significantly higher rate compared to the region overall.
The rate of current smoking among men is higher than women and higher than in the Greater Bay Area population overall. On the other hand the rate among women is lower compared to men and to the Greater Bay Area.

Many young people report being current smokers, but adults between 18 and 64 have the highest rates of smoking.
The Center for Disease Control reports, “Cigarette smoking remains the leading preventable cause of death in the United States, accounting for approximately 1 of every 5 deaths (438,000 people) each year.” \(^2\)\(^-\)\(^4\)

Exposure to tobacco smoke has been closely associated with several diseases including lung cancer, cancer of the larynx, chronic bronchitis, emphysema, coronary artery disease and hypertensive heart disease. Tobacco smoke contains respiratory irritants, poisons (including nicotine) and cancer-causing compounds (carcinogens). \(^5\)

Similar to information for the Greater Bay Area, CDC reports the following about smoking nationally: \(^6\)

- Smoking is most common among people 18 to 64 years of age
- Men report smoking more often than women report smoking
- Rates of smoking are highest among American Indians/Alaska natives

In addition CDC reports that nationally:

- An estimated 20.9% of all adults (45.1 million people) smoke in the United States. (State estimates vary significantly. The state estimate for California is 15.2%) \(^6\)

- Twenty-three percent (23%) of high school students smoke are current smokers \(^7\)

- Each day in the United States, approximately 4,000 young people between the ages of 12 and 17 years start cigarette smoking, and an estimated 1,140 young people become daily cigarette smokers. \(^8\)

**Binge drinking**

It is estimated that 53,000 residents of Contra Costa engaged in binge drinking in 2005. This would be 18% of the population older than 12 years. This overall rate is not different from that of the Greater Bay Area or California.

In the Greater Bay Area, Whites had a rate of binge drinking that was higher than the rate of the Greater Bay Area overall. Asians and African Americans had rates which were lower.

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Binge drinking is more drinks on the same occasion than is considered healthy or safe by experts. This report’s tables defines binge drinking for males as having 5 drinks or more on a single occasion and females having 4 or more drinks at a single occasion.
Editor's Note: Analyses of Contra Costa binge drinking by race/ethnicity, gender or age were not possible due to small numbers, but we can look at the Greater San Francisco Bay Area overall for an indication of the prevalence of binge drinking in these subgroups.

**Men and women are different when it comes to binge drinking. Men have a rate of binge drinking that is higher than that of the Greater Bay Area and women have a lower rate when compared to the same region.**

### Binge Drinking

**Table 5. All residents 2005**

<table>
<thead>
<tr>
<th></th>
<th>Cases</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contra Costa</td>
<td>53,000</td>
<td>18.00%</td>
</tr>
<tr>
<td>Greater Bay Area</td>
<td>971,000</td>
<td>16.60%</td>
</tr>
<tr>
<td>California</td>
<td>4,873,000</td>
<td>16.40%</td>
</tr>
</tbody>
</table>

### Binge Drinking by Race/Ethnicity

**Table 6. Greater Bay Area 2005**

<table>
<thead>
<tr>
<th></th>
<th>Cases</th>
<th>Percent</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>594,000</td>
<td>61.20%</td>
<td>*20.1%</td>
</tr>
<tr>
<td>Latino</td>
<td>198,000</td>
<td>20.40%</td>
<td>17.40%</td>
</tr>
<tr>
<td>Asian</td>
<td>104,000</td>
<td>10.70%</td>
<td>**8.5%</td>
</tr>
<tr>
<td>African American</td>
<td>40,000</td>
<td>4.10%</td>
<td>**10.3</td>
</tr>
<tr>
<td>Greater Bay Area&lt;sup&gt;a&lt;/sup&gt;</td>
<td>970,000</td>
<td>100.00%</td>
<td>16.60%</td>
</tr>
</tbody>
</table>

* Significantly higher rate compared to the region overall.
** Significantly lower rate compared to the region overall.
Binge drinking is most frequent among young adults. Adults aged 21 to 40 years have a higher rate of binge drinking than any other age group and higher than the Greater Bay Area overall. Older adults (above the age of 40) have lower rates of binge drinking compared to the Greater Bay Area.

Binge drinking is excessive alcohol use. It is associated with several health problems: unintentional injuries (including car crashes and drowning), intentional injuries (including firearms injuries and domestic violence), alcohol poisoning, sexually transmitted diseases, liver disease, unintended pregnancy and children born with Fetal Alcohol Syndrome.⁹
National surveys indicate:

- The rate of binge drinking among men is 3 times the rate of women.\textsuperscript{10} (This is true despite the fact that men must consume more alcohol than women to be considered binge drinking.)
- About 75\% of the alcohol consumed by adults in the United States is in the form of binge drinks.\textsuperscript{11}
- About 90\% of the alcohol consumed by youth under the age of 21 in the United States is in the form of binge drinks.\textsuperscript{11}
- The proportion of current drinkers that binge is highest in the 18 to 20 year old groups (52.1\%).\textsuperscript{12}
### Illicit Drug Use

Table 9. United States, 2005

<table>
<thead>
<tr>
<th>Drug</th>
<th>Percent of population (aged 12 and above)</th>
<th>Estimated number of users (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>6</td>
<td>14.6</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1</td>
<td>2.4</td>
</tr>
<tr>
<td>Hallucinogens</td>
<td>0.4</td>
<td>1.1</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>2.6</td>
<td>6.4</td>
</tr>
<tr>
<td>Used Non-Medically</td>
<td>0.2</td>
<td>1.4</td>
</tr>
<tr>
<td>All Illicit Drugs</td>
<td>8.1</td>
<td>19.7</td>
</tr>
</tbody>
</table>

### Illicit Drug Use

Nationally, 19.7 million people (8.1%) aged 12 or older reported being current (within the past month) illicit drug users. Of those who use illicit drugs, the vast majority used marijuana or marijuana in combination with other drugs (14.6 million).

The following are key findings of the 2005 National Survey on Drug Use and Health produced by the U.S. Department of Health and Human Services.

- The national average rate of current illicit drug use was 8.1% (an estimated 19.7 million people nationwide) of persons aged 12 or older. Among the 15 largest metropolitan areas, the San Francisco Metropolitan area was found to have the highest rate of illicit drug use and that area’s rate was significantly higher than the national average. (Illicit drugs include marijuana/hashish, cocaine and crack, heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used non-medically.)
- Marijuana, the most commonly used illicit drug, is used by 6.0% of the population aged 12 or older. It is
was currently used by 14.6 million people across the country.

- There were 2.4 million cocaine users nationwide (1.0% of the U.S. population aged 12 and above) and 1.1 million hallucinogen users (0.4%), including 502,000 who had used Ecstasy.

- In addition, 2.6% of the population (6.4 million) used prescription-type psychotherapeutic drugs nonmedically. These drugs include pain relievers, tranquilizers, stimulants and sedatives.

- There were 10.5 million people (4.3% of those 12 and older) who reported driving under the influence of illicit drugs in the past year.

If the national pattern of illicit drug use was applied to Contra Costa County, there would be over 70,000 current users.

Substance abuse treatment admissions suggest that methamphetamine use may be particularly important within Contra Costa County. In 2004 there were 5,220 admissions to licensed or publicly-funded facilities for substance abuse treatment in Contra Costa. More people were
admitted for methamphetamine abuse treatment (2,186) than any other drug group.

Data Sources: Substance Abuse

Text
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5. Encyclopedia and Dictionary of Medicine, Nursing and Allied Health (5th Edition); Miller, Benjamin F. W.B. Saunders Company, 1992.


13. State of California, Department of Alcohol and Drug Programs, Office of Applied Research and Analysis. As reported in: Health Data Summaries for California Counties 2006, Center for Health Statistics, California Department of Health Services. Note: This is the number of persons admitted, listed by primary drug used, regardless of their place of residence, to a licensed or publicly-funded facilities for substance abuse treatment in Contra Costa County during calendar year 2004.

Tables
Tables 1-4: Local data about tobacco use from the California Health Interview Survey's AskCHIS data query system, copyright© 2005 the Regents of the University of California, all rights reserved, available online at: http://www.chis.ucla.edu/ Data analysis performed May 10, 2007. Current smoking prevalence refers to the percent of adults and adolescents who report that they now smoke cigarettes everyday or on some days. In Table 4, data for the following race/ethnicity groups was excluded due to small numbers: American Indian/Alaska Natives, Native Hawaiian/ Pacific Islanders, and Two or More Races. AskCHIS data are generated from a telephone survey
that asks questions to a randomly selected group of residents in Contra Costa and other counties in California. Responses are then weighted to represent the county, region and state as whole. The Greater Bay Area includes the counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano and Sonoma.

Tables 5-8: Local data about binge drinking from the California Health Interview Survey’s AskCHIS data query system, copyright© 2005 the Regents of the University of California, all rights reserved, available online at: http://www.chis.ucla.edu/ Data analysis performed May 10, 2007. In Table 6, data for Native Hawaiian/Pacific Islanders was excluded due to small numbers. Due to unstable estimates, percentages could not be calculated for this group. Small groups however are included in the tables for age, gender and residents overall. AskCHIS data are generated from a telephone survey that asks questions to a randomly selected group of residents in Contra Costa and other counties in California. Responses are then weighted to represent the county, region, and state as whole. The Greater Bay Area includes the counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano and Sonoma.

Table 8–9: These tables were created using information from the National Survey on Drug Use and Health. (PDF–1.41MB) (Office of Applied Studies, NSDUH Series H-27, DHHS Publication No. SMA 05–4061) [cited 2006 Dec 5]. Rockville, MD. Available from: http://oas.samhsa.gov/nsduh/2k5nsduh/2k5results.pdf These tables were created by Community Health Assessment Planning and Evaluation, Contra Costa Health Services, May 2007.