

The State of the State: Substance Use in Connecticut

A presentation to the
Alcohol and Drug Policy Council
August 20, 2024



DMHAS Center for Prevention Evaluation
and Statistics (CPES)
at UConn Health

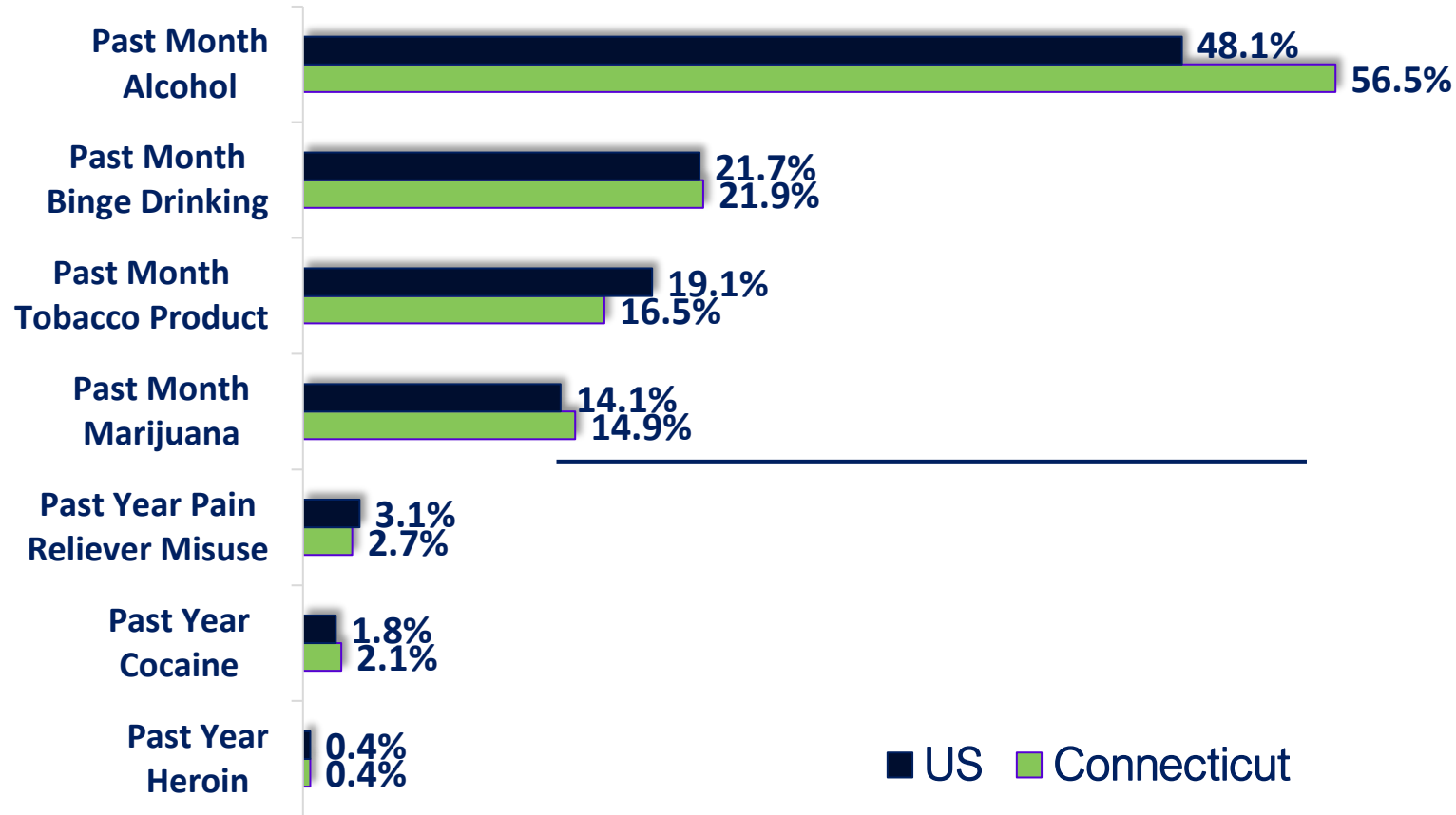


Objectives

- Describe the state of substance use and misuse in Connecticut in terms of:
 - Prevalence of use and misuse;
 - Related perceptions and consequences;
- Explore trends over time;
- Illuminate substance use- and misuse-related concerns, risk groups, and priorities.



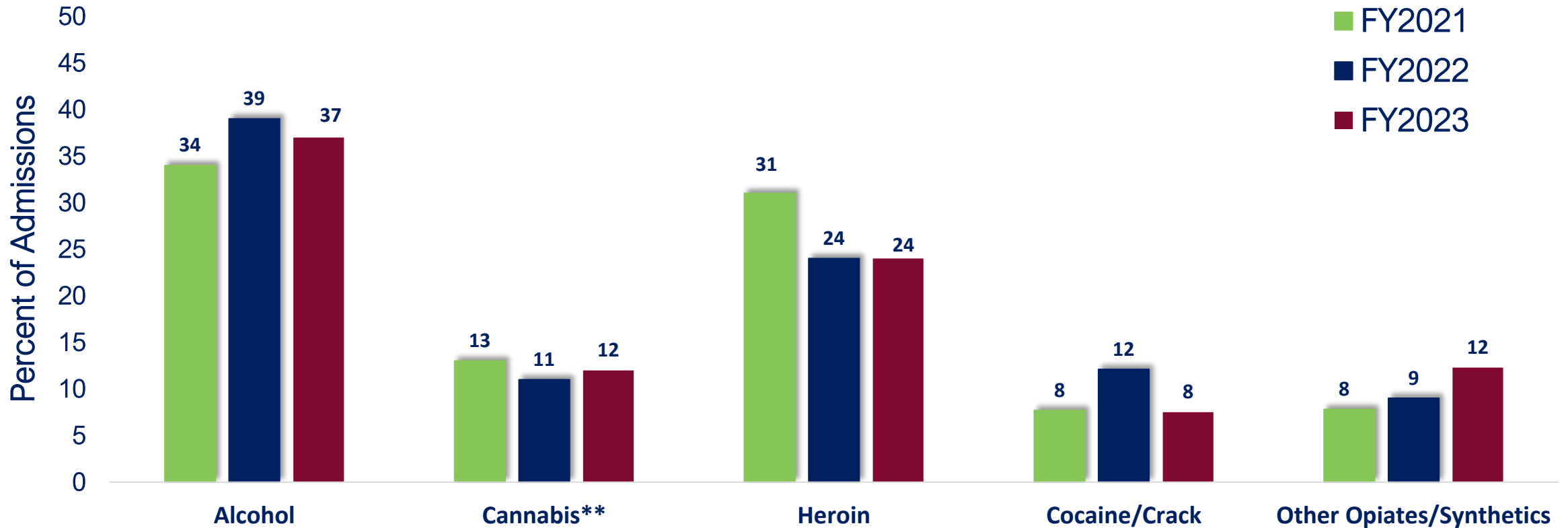
Percent of Individuals (Ages 12+) Reporting Use by Substance, 2021-2022



Reported past month alcohol use was most prevalent among respondents aged 26 and older (61.2%).

Reported past month marijuana/cannabis use was most prevalent in young adults 18-25 (30.0%).

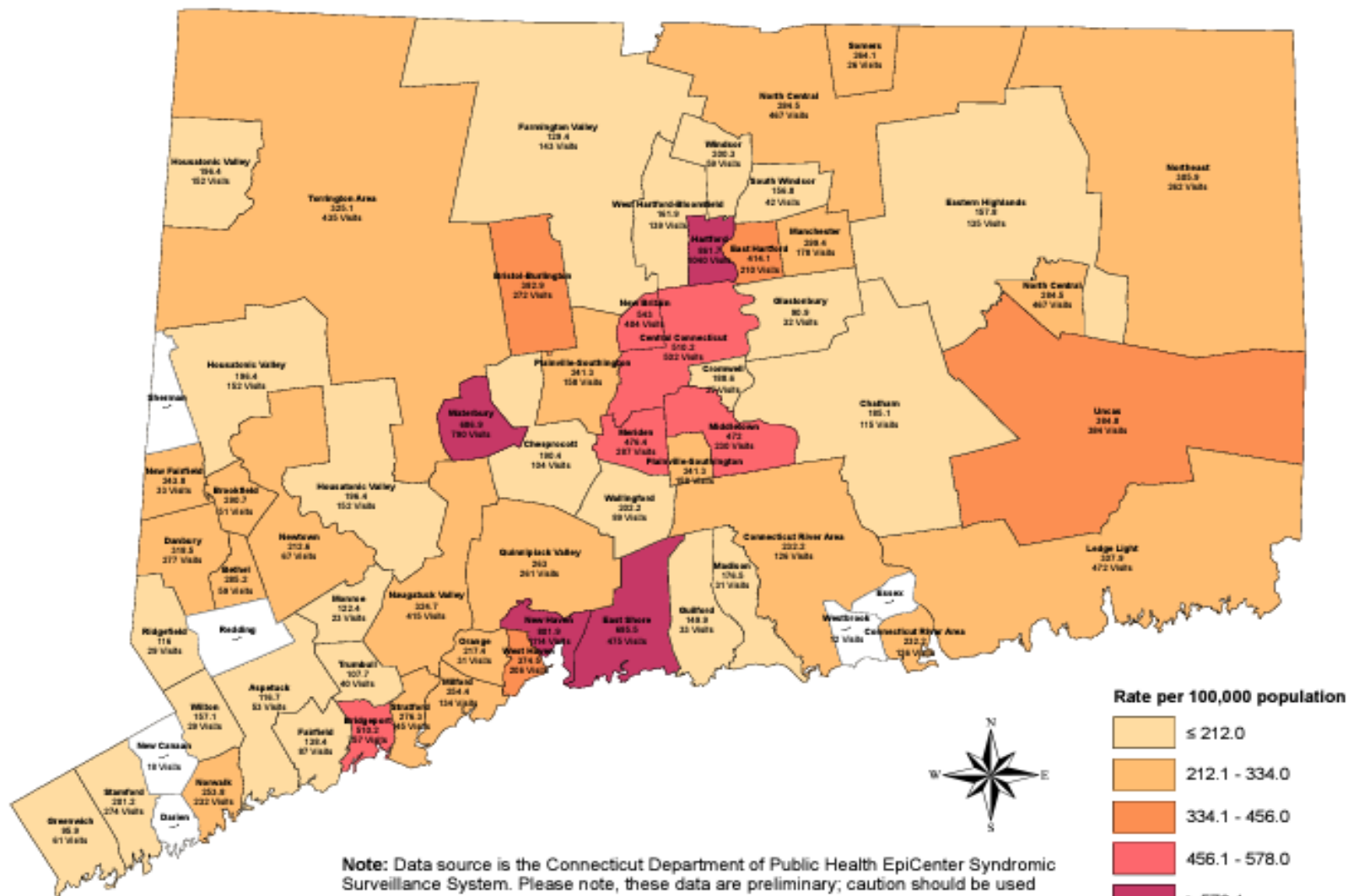
Treatment Admissions* by Primary Substance: FY2021-FY2023



* All program types (SU and MH)

**Marijuana/Hashish/THC

Rate per 100,000 Population and Count of Emergency Department and Urgent Care Center Visits for Suspected All Drug Overdoses Among Connecticut Residents, by Resident Local Health Department/District, 2023

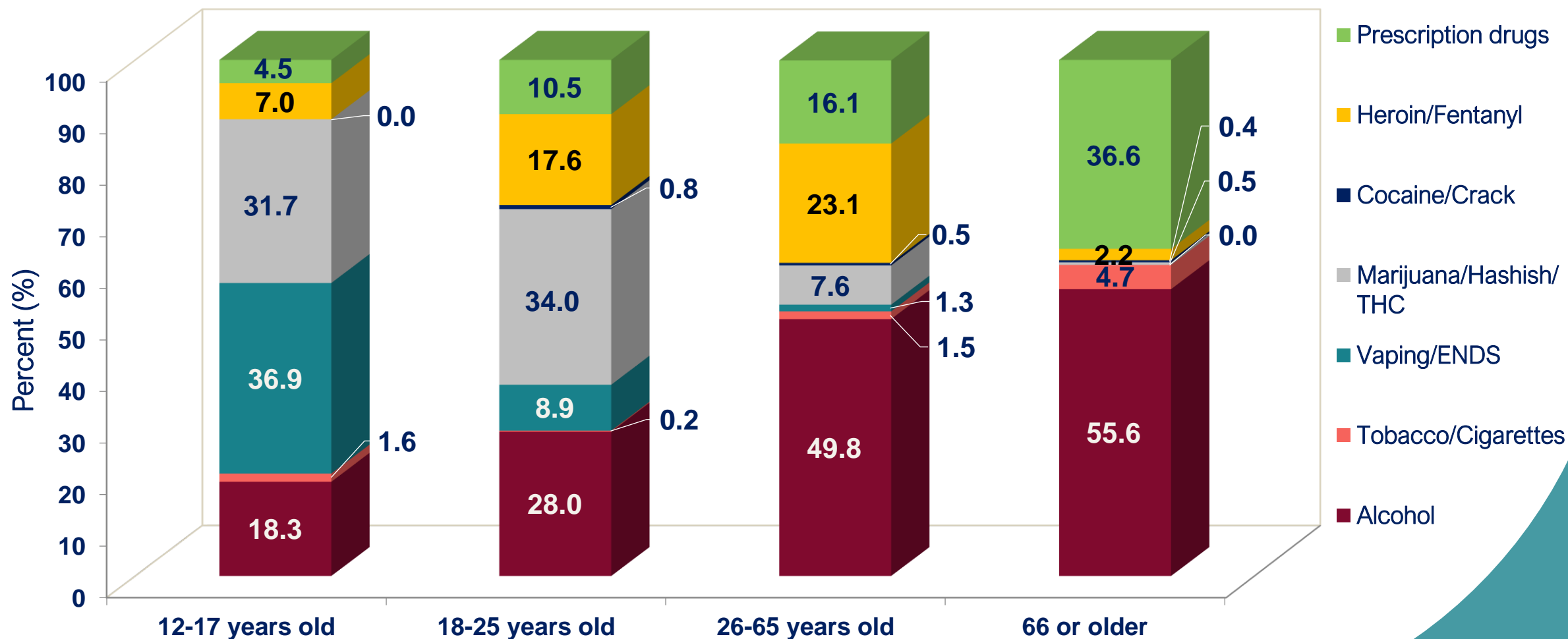


Note: Data source is the Connecticut Department of Public Health EpiCenter Syndromic Surveillance System. Please note, these data are preliminary; caution should be used when interpreting these results.

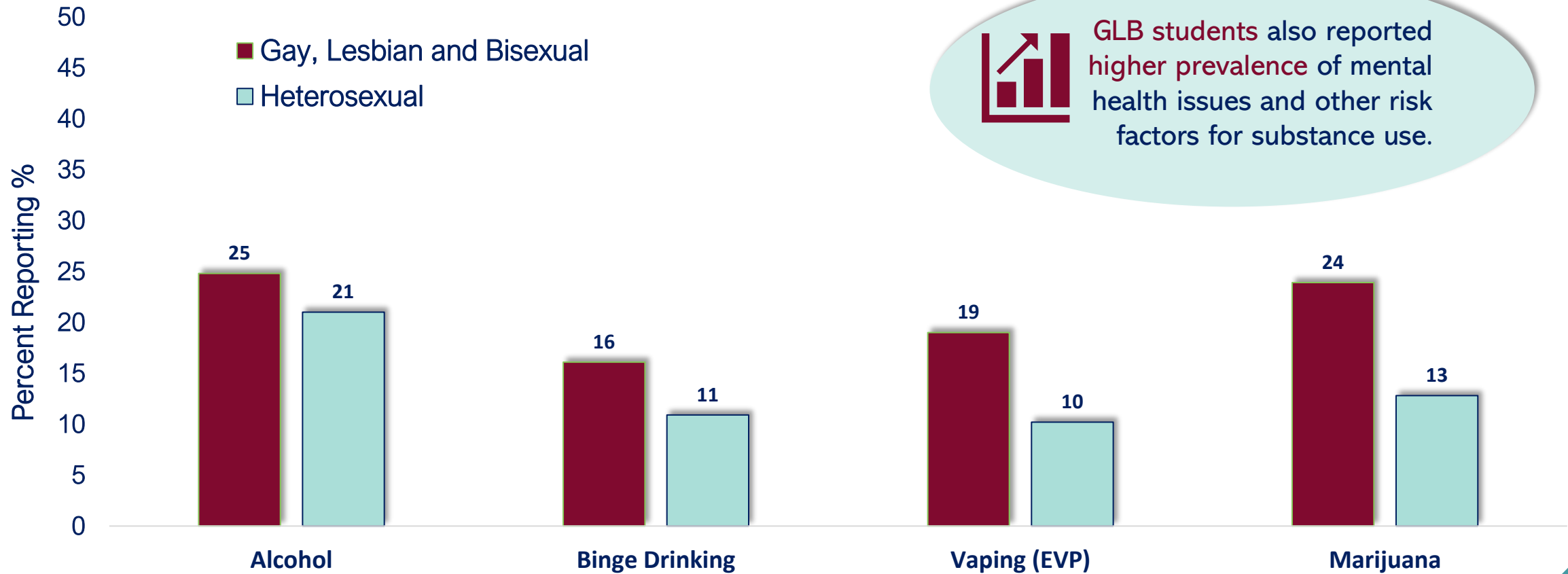
Rates based on counts less than 20 are not displayed. Rates based on counts between 20 and 25 should be interpreted with caution due to the instability of rates based on small numbers. Rates were calculated using 2022 population data.

Rates per 100,000 (visits)
 2021: 377.0 (13594)
 2022: 352.2 (12669)
 2023: 338.1 (12260)

Problem Substances of Greatest Community Concern for Age Groups According to Key Informants in CT, 2022



Reported Past 30-Day Use of Alcohol and Other Substances Among Gay/Lesbian/Bisexual (GLB) vs. Heterosexual High School Students in CT, 2023





Alcohol

Typical Effects:

Some loss of judgement; relaxation, slight altered mood

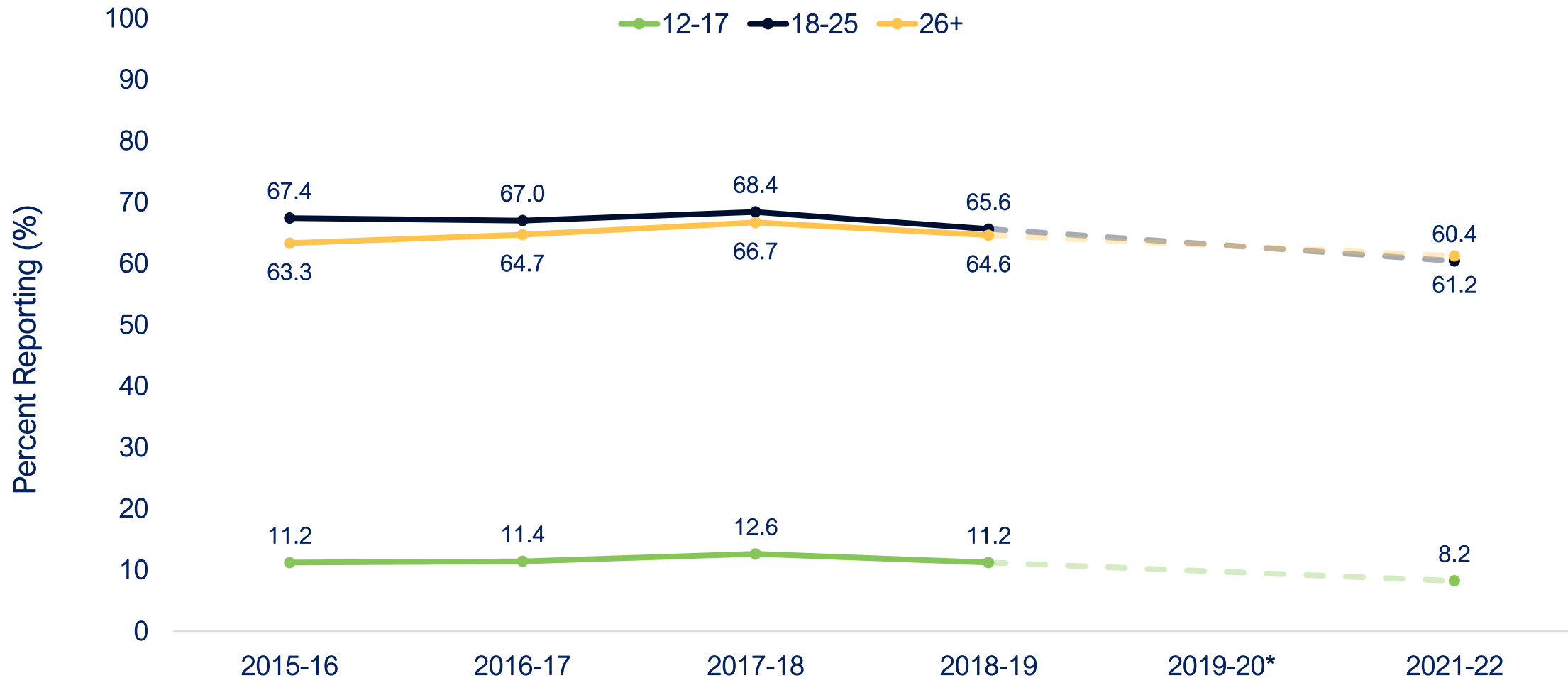
Exaggerated behavior, may have loss of sight (your eyes), impaired judgement and alertness, release of inhibition

Reaction becomes poor (e.g., slower reaction time, and hearing), harder to control, reasoning, and memory

Clear deterioration of reaction time and coordination, speech, poor coordination, and slowed thinking

Far less muscle control than normal, vomiting (unless this level is reached slowly or a person has a tolerance for alcohol), major loss of balance

Past Month Alcohol Use by Age Group in CT, 2015-2022

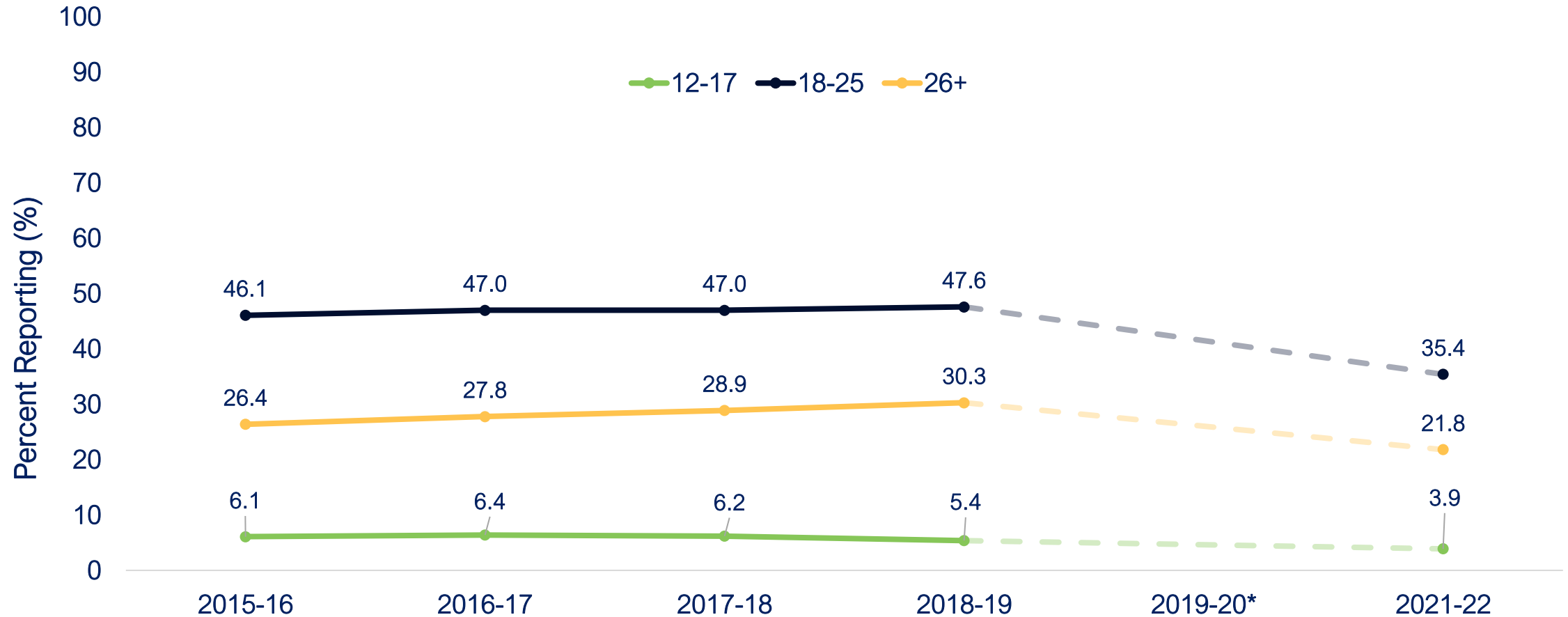


Note: The 2015 NSDUH underwent significant redesigns. In 2015 the threshold for binge drinking changed for women from 5 or more alcoholic drinks to 4 or more alcoholic drinks on the same occasion.

*State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Source: NSDUH 2015-2022

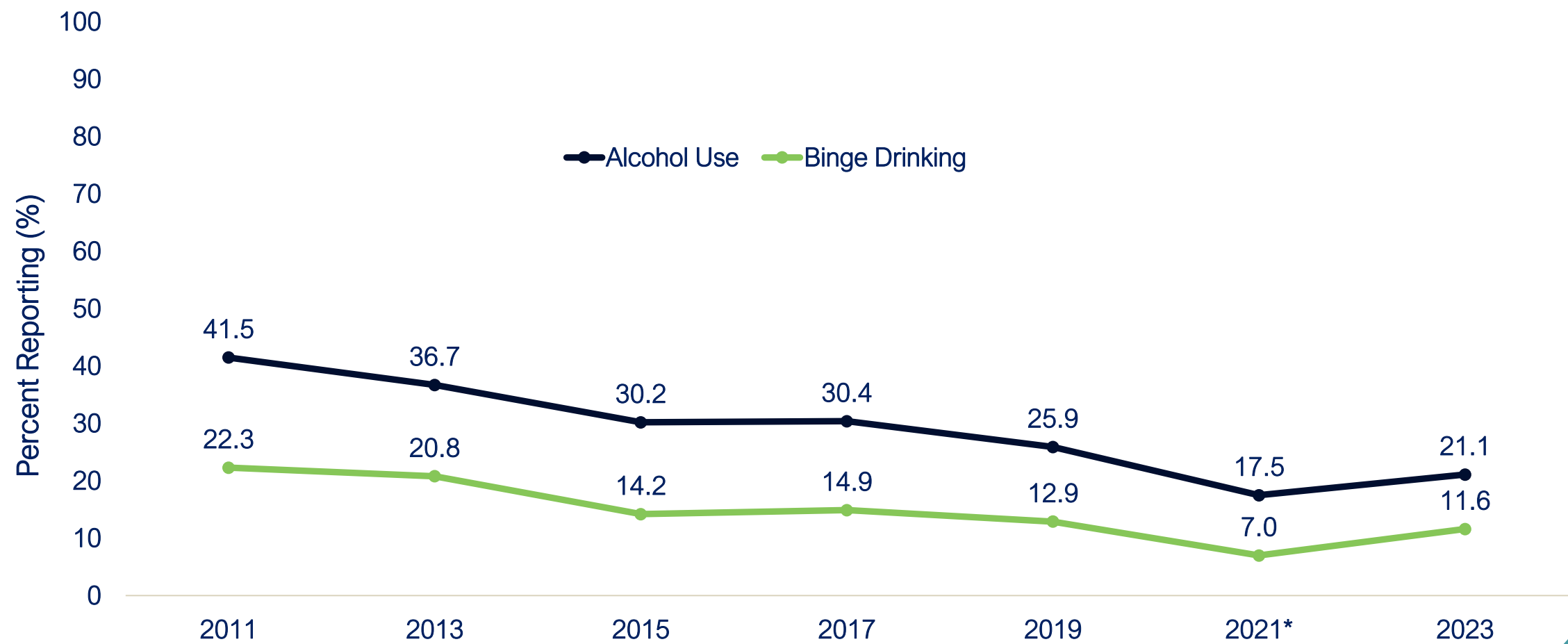
Past Month Heavy Episodic/ Binge Drinking by Age Group in CT, 2015-2022



Note: The 2015 NSDUH underwent significant redesigns. In 2015 the threshold for binge drinking changed for women from 5 or more alcoholic drinks to 4 or more alcoholic drinks on the same occasion.

*State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Percent of High School Students Reporting Past 30-Day Alcohol Use and Binge Drinking in CT, 2011-2023



Note: *Caution should be taken when comparing CSHS 2021 data to that of previous years due to differences in methodology in survey collection.

Source: CSHS (CT YRBS) 2011-2023

Key Points: Alcohol

Alcohol remains the substance of highest use prevalence in Connecticut compared to all other substances.

Connecticut has experienced a steady decline in alcohol use among high school students over the past 12 years. However, the prevalence in the state has been and remains consistently higher than alcohol use nationally.

Reported past month alcohol use was most prevalent among respondents aged 26 and older in 2022.

Heavy episodic drinking is most prevalent among young adults 18-25, both in Connecticut and nationally.

There was a higher reported prevalence of past month alcohol use and past month binge drinking in 2023 among Connecticut's high school students who identify as gay, lesbian, or bisexual (LGB).

LGB students also reported higher prevalence of other substance use and risk factors for substance use, making LGB youth a key risk population of focus.

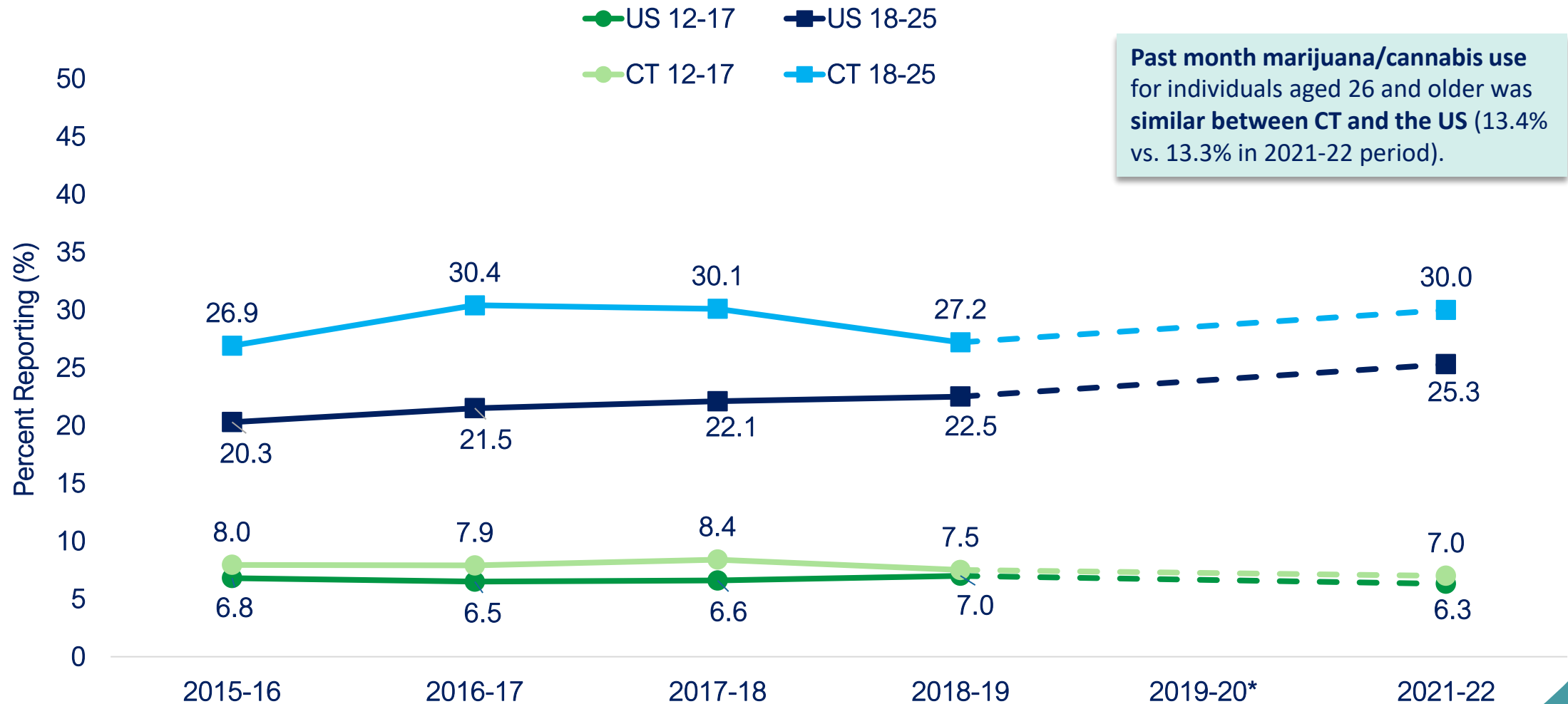


Cannabis and Marijuana

CBD

THC

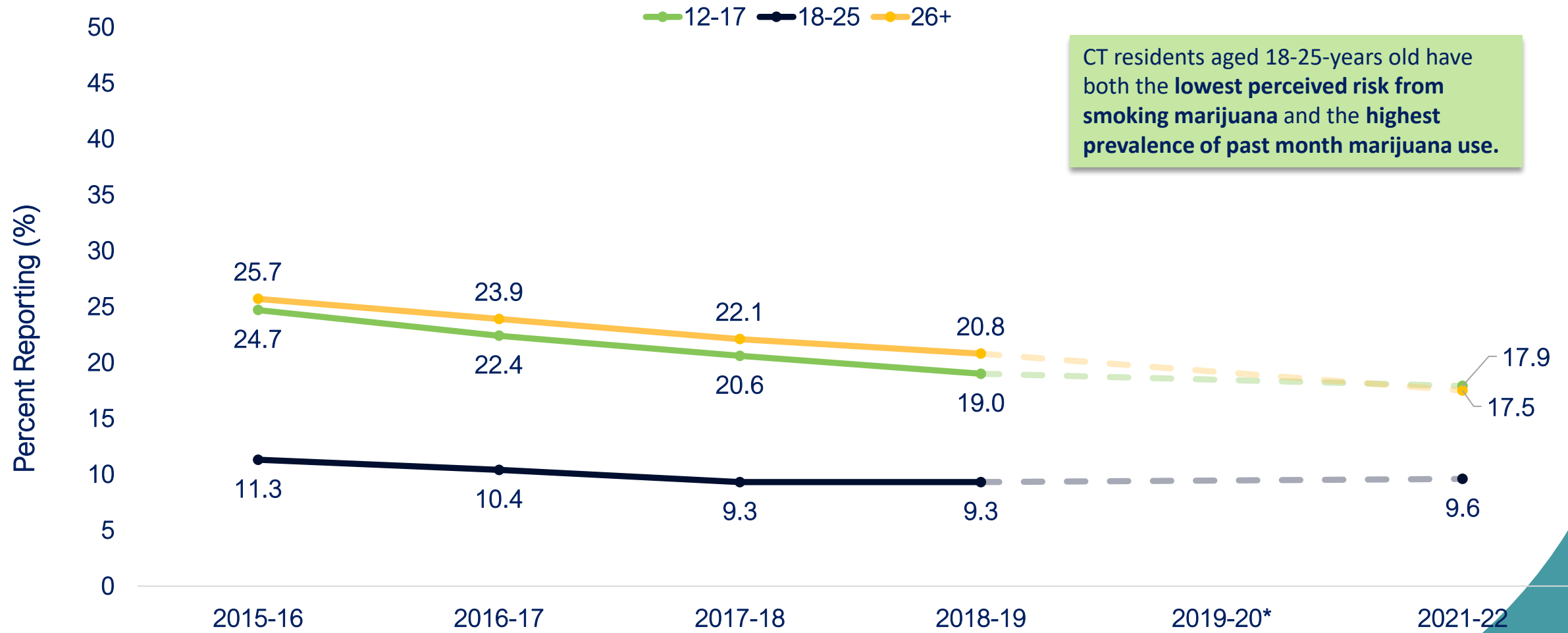
Past Month Marijuana Use by Age Group in CT and the US, 2015-2022



Note: *State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Source: NSDUH

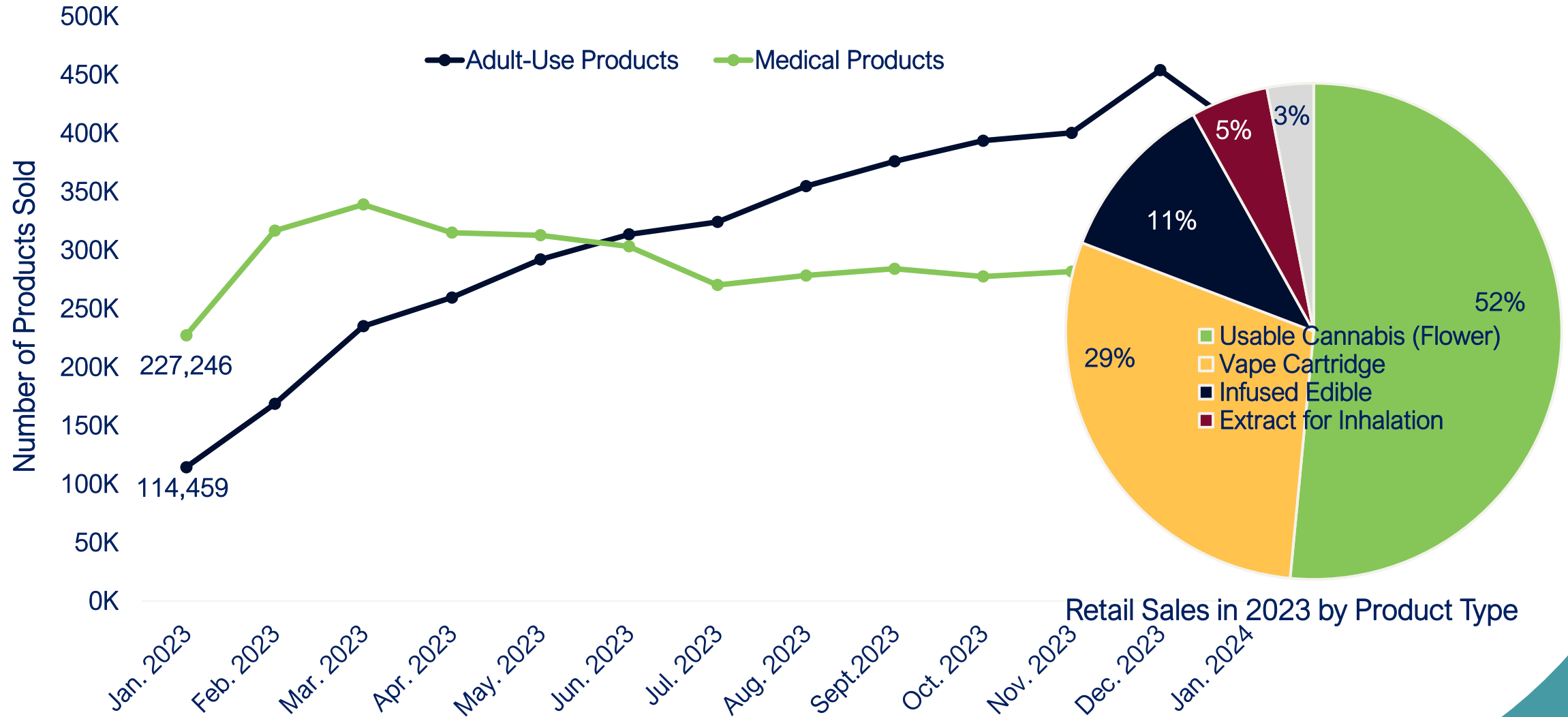
Percent of Individuals in CT Perceiving Great Risk from Smoking Marijuana Once Per Month, 2015-2022



Note: The 2015 NSDUH underwent significant redesigns, including the order of perceived risk questions, affecting comparability.

*State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Number of Adult-Use Cannabis and Medical Marijuana Products Sold in CT by Month, 2023-2024



Note: "Other" products sold include pills, capsules, non-smokable infused extract, tincture, marijuana infused topicals, liquid marijuana Rick Simpson Oil (RSO), marijuana mix infused, and lozenge.

Source: CT Department of Consumer Protection

Key Points: Cannabis and Marijuana

Adult-use cannabis products exceeded the sales of medical-use cannabis in May 2023 and the number of adult-use cannabis products sold continued to increase during the latter months of 2023.

Perception of risk of harm from smoking marijuana is decreasing across all age groups in CT.

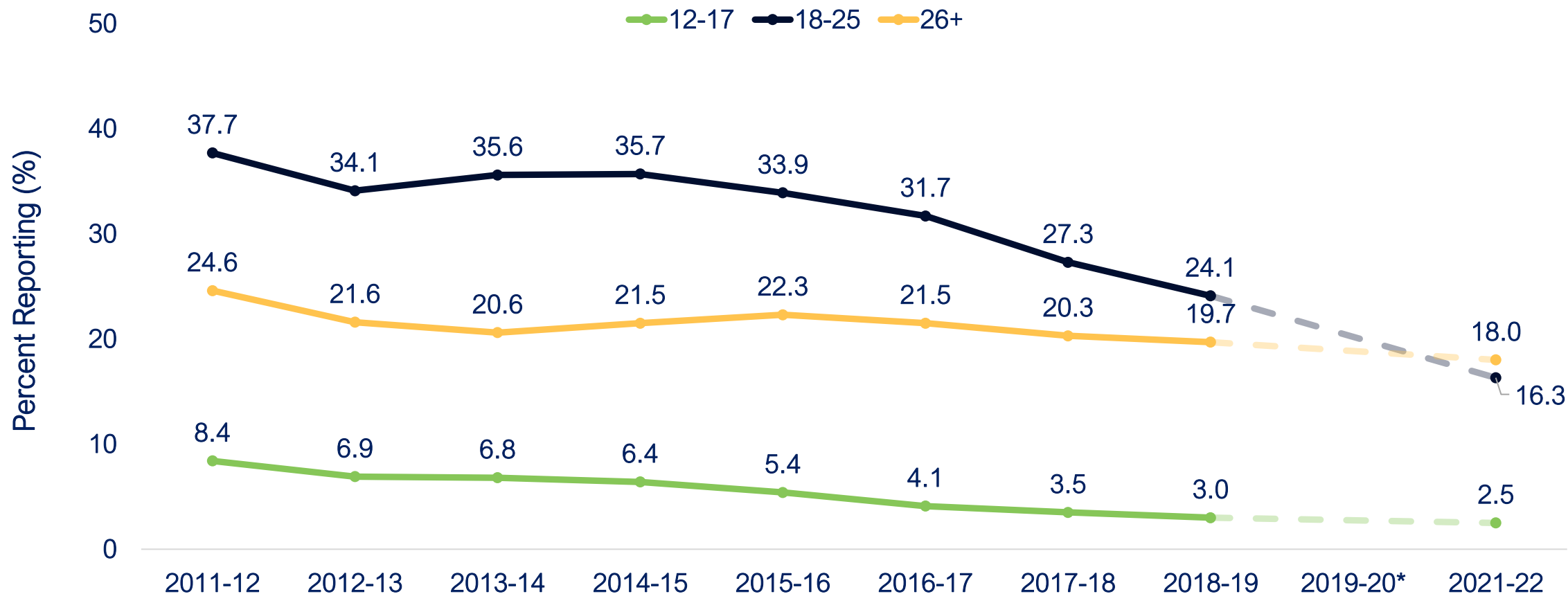
Connecticut's high school students who identify as Gay, Lesbian, or Bisexual (GLB) have a higher reported prevalence of past 30 day use of marijuana than heterosexual students.



Tobacco and Electronic Vapor Products (EVPs)



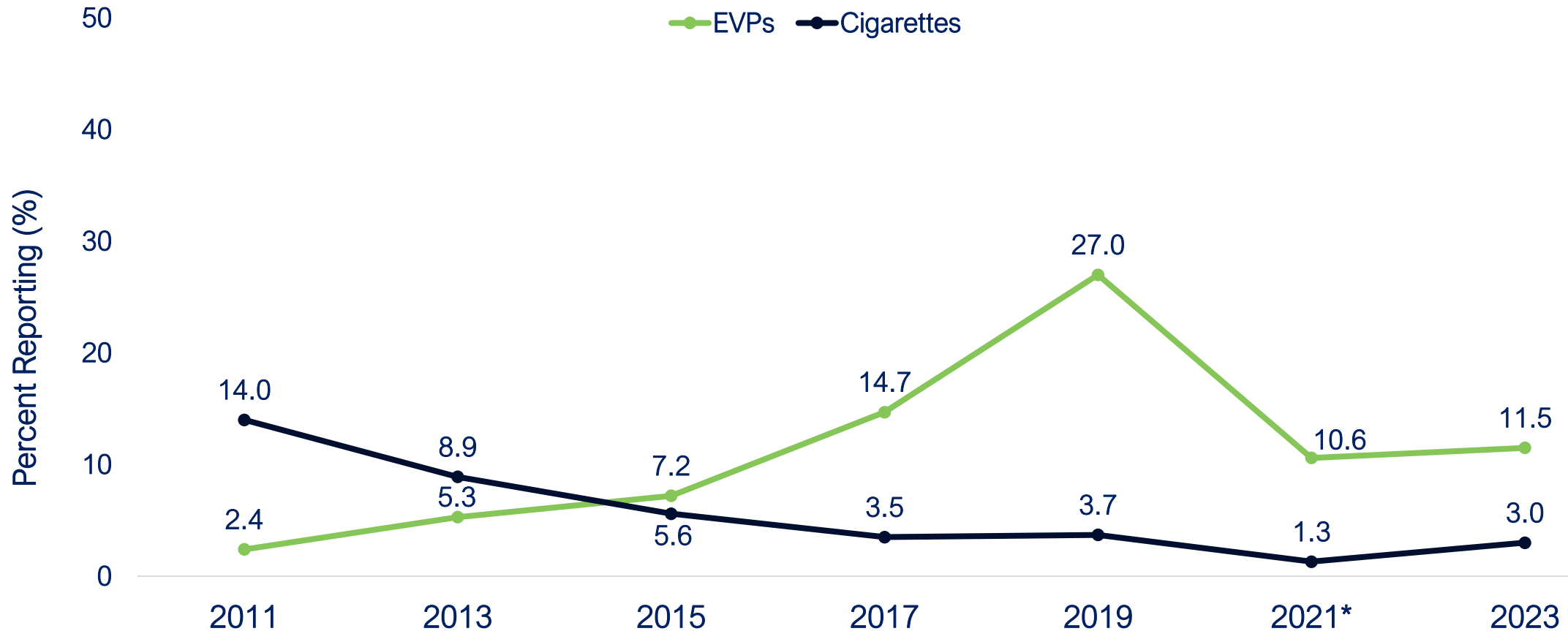
Past Month Tobacco Product Use by Age Group in CT, 2011-2022



Note: Tobacco product use includes cigarettes, smokeless tobacco (i.e., snuff, dip, chewing tobacco, or snus), cigars, or pipe tobacco.

*State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Percent of High School Students Reporting Past 30-Day Use of Electronic Vapor Products (EVPs) vs. Cigarettes in CT, 2011-2023

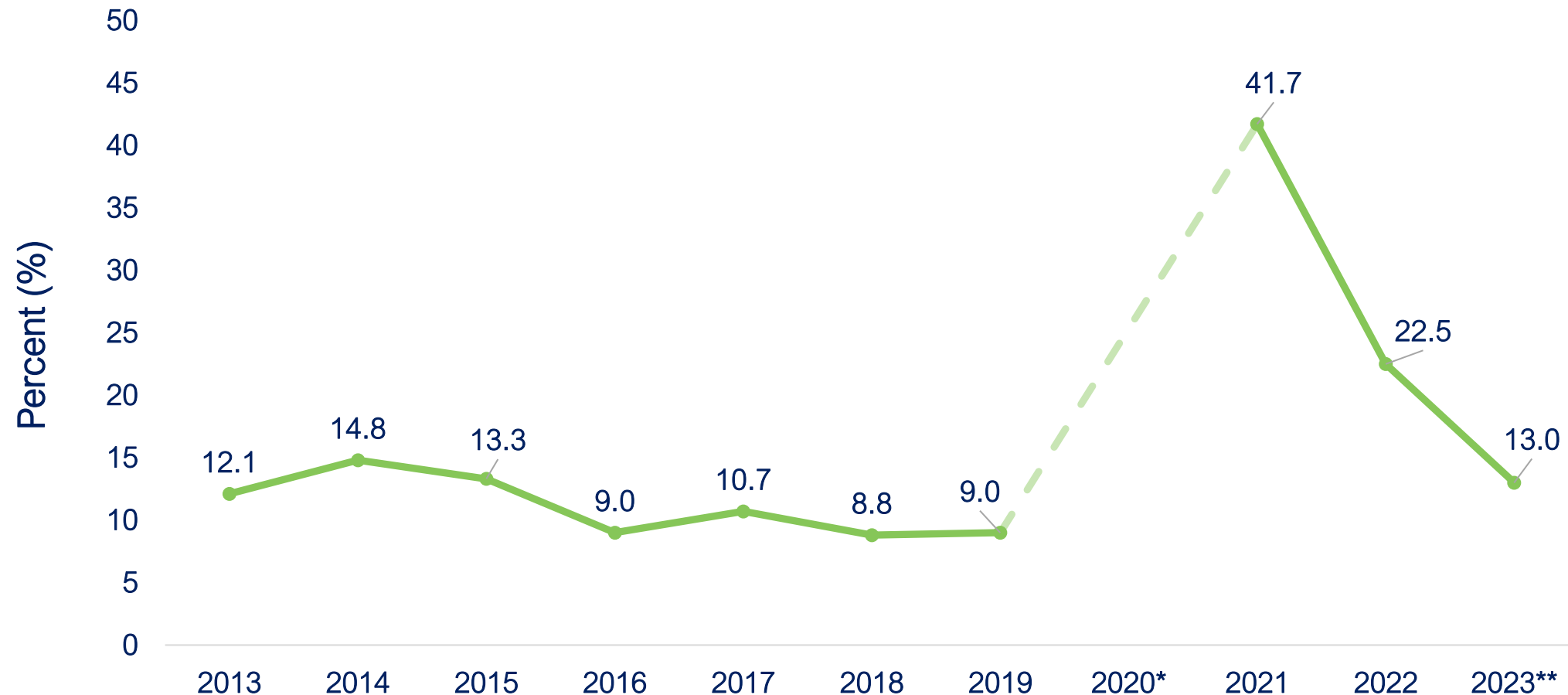


Note: The language around electronic vapor products has changed over the years. In 2017 and earlier, the survey asked about current “e-cigarette” use rather than vapor products.

*Caution should be taken when comparing CSHS 2021 data to that of previous years due to differences in methodology in survey collection.

Source: CSHS (CT YRBS)

Reported Retailer Violations - Tobacco Sales to Individuals Under Legal Age in CT, 2013-2023



Note: TPEP Investigator noted that COVID impacted the rate significantly (e.g., investigations suspended for 2020, masks required in 2021). Implementation of Tobacco21, which raised the age for tobacco sales in October 2019, may also have had an impact.

*Data not available

**Results not final

Sources: SYNAR, CDC, CT DMHAS

Key Points: Tobacco and EVP

The use of tobacco products in CT (excluding EVPs) has been gradually decreasing over the years across all age groups.

The use of EVPs has continuously increased and exceeded the use of tobacco among high school students in Connecticut.

High school students who identified as LGB had a higher prevalence of past 30-day use of EVPs compared to students who identified as heterosexual.

Tobacco sales violations remained stable until 2020, when the violation rate increased markedly post-COVID. Violation rates are trending downward.



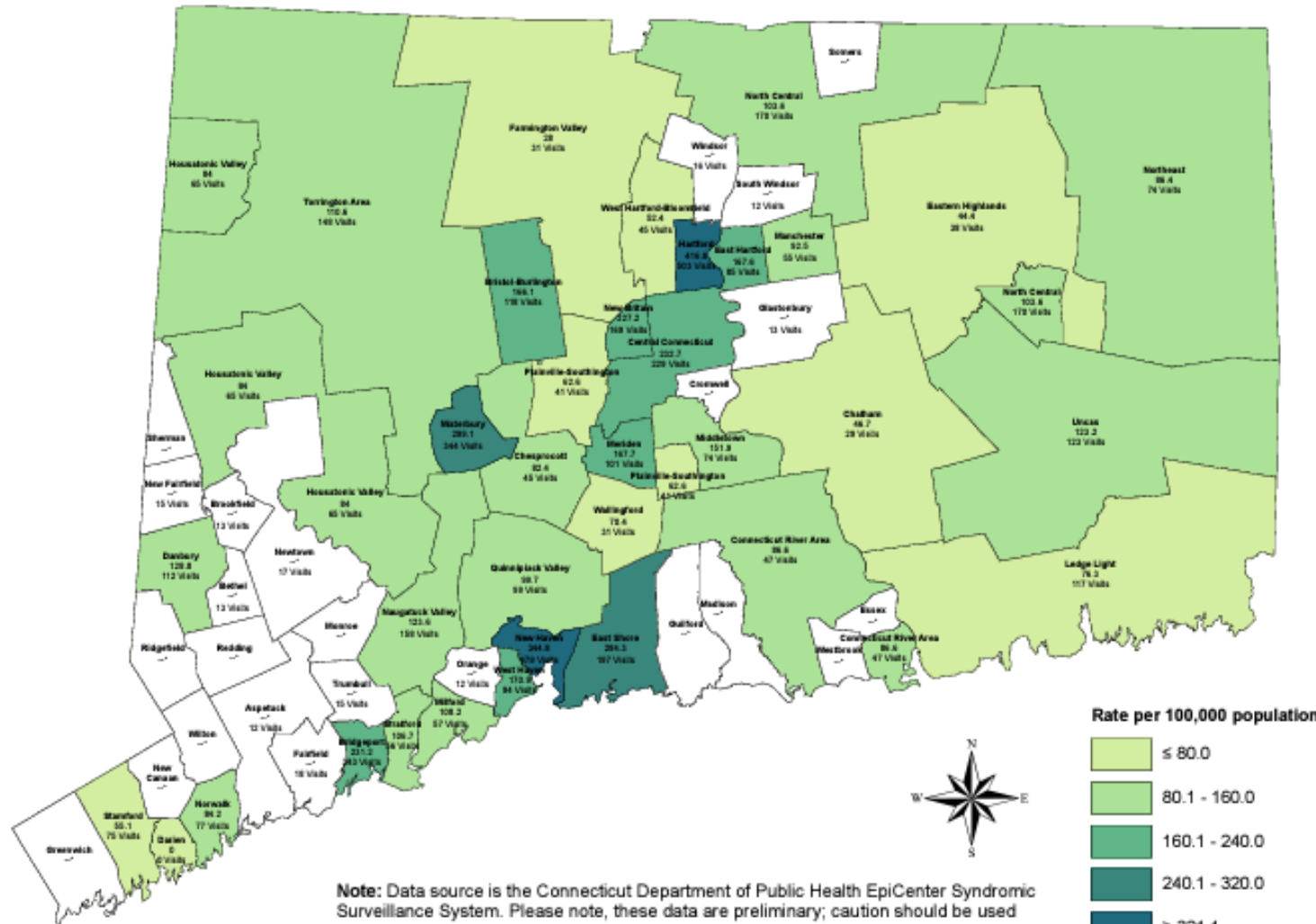
Prescription and Illicit Drugs

Drug

Illicit opioids

Prescription opioids

**Rate per 100,000 Population and Count of Emergency Department and Urgent Care Center Visits
for Suspected Opioid Overdoses Among Connecticut Residents,
by Resident Local Health Department/District, 2023**



Rates per 100,000
(visits)

2021: 162.7 (5865)

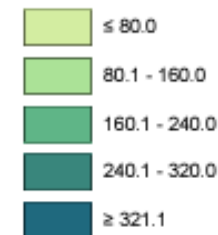
2022: 143.9 (5188)

2023: 128.3 (4654)

Note: Data source is the Connecticut Department of Public Health EpiCenter Syndromic Surveillance System. Please note, these data are preliminary; caution should be used when interpreting these results.

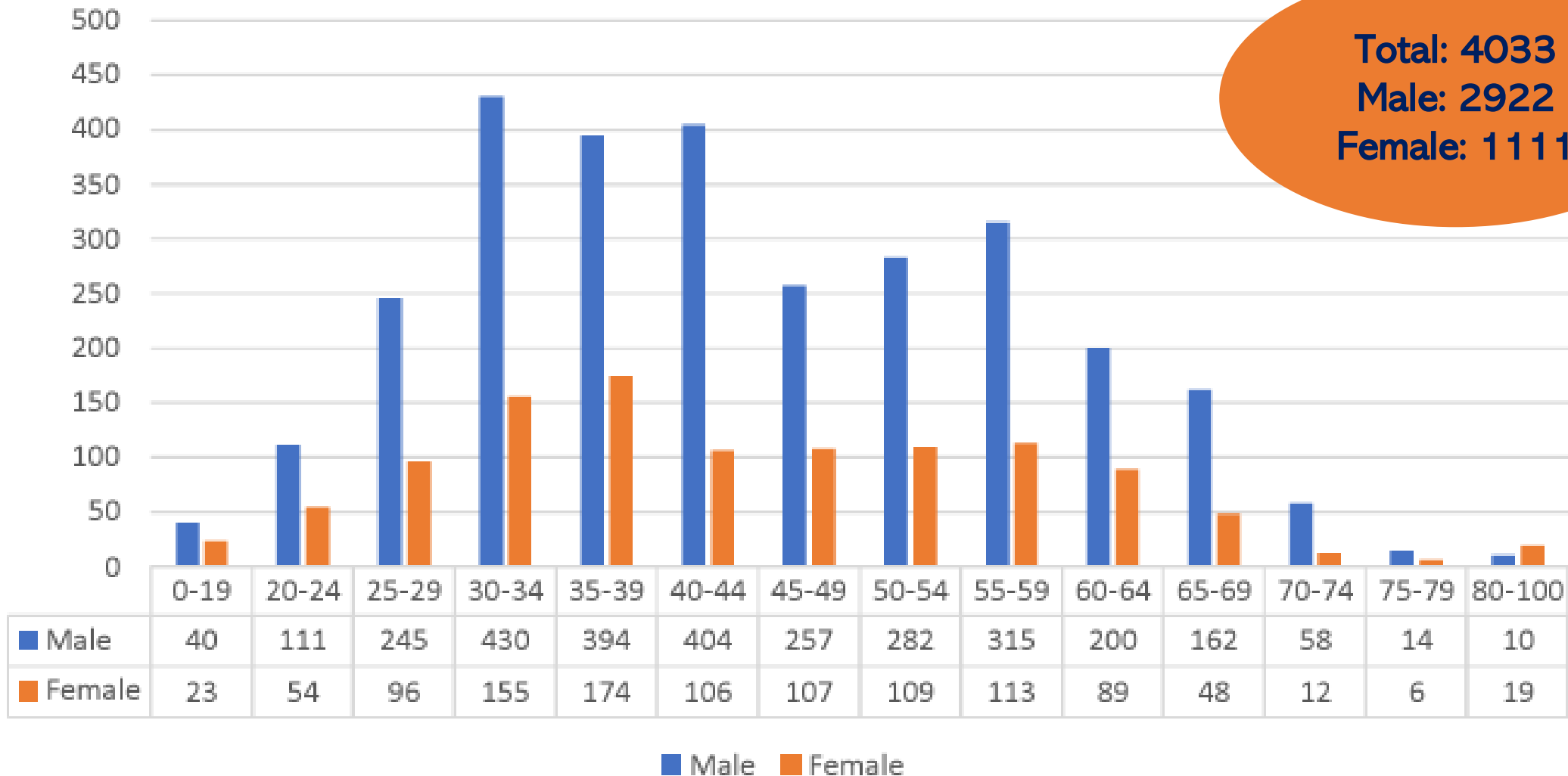
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Rate per 100,000 population

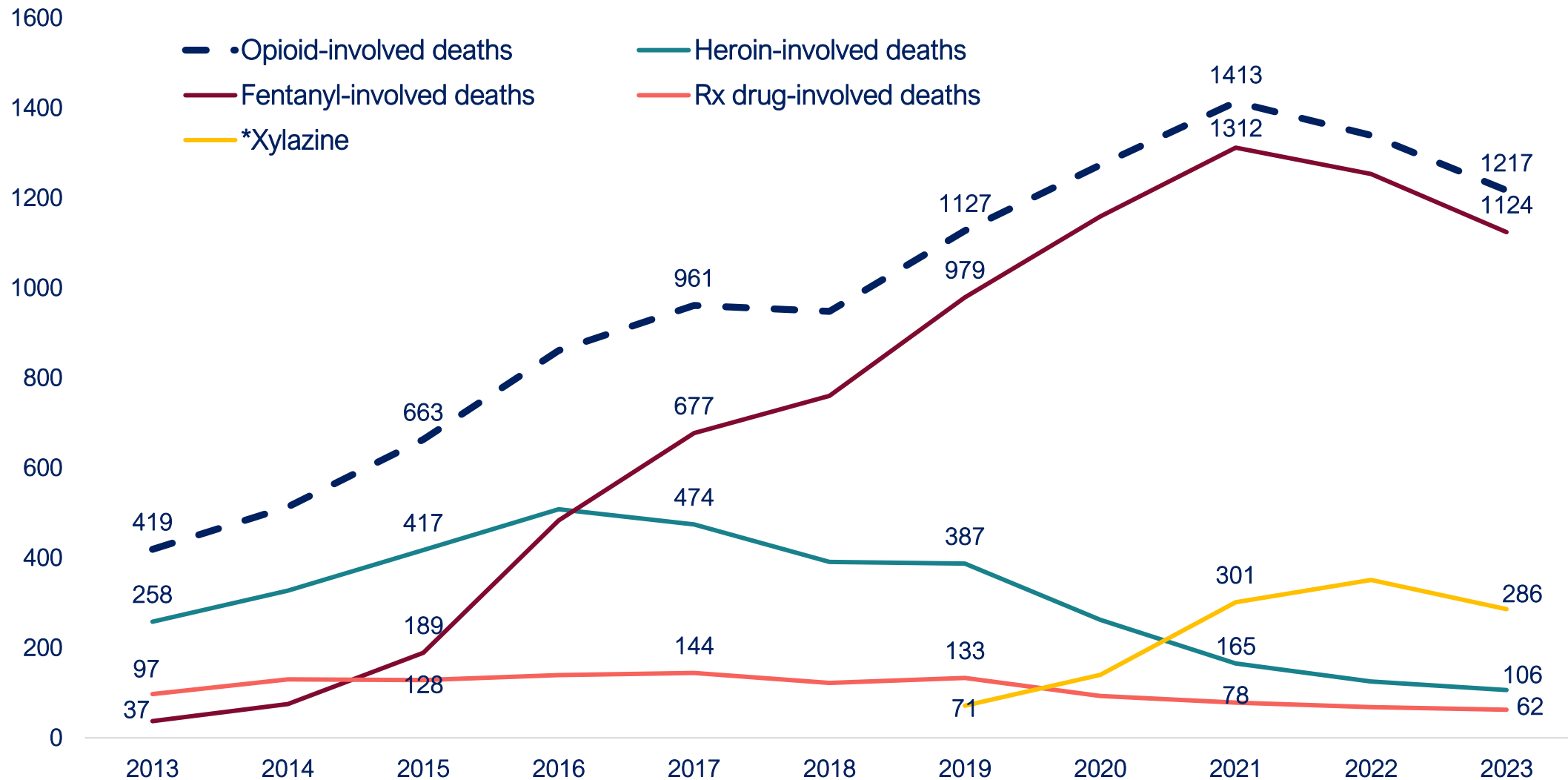


* Rates based on counts less than 20 are not displayed; counts between 1 and 10 are censored

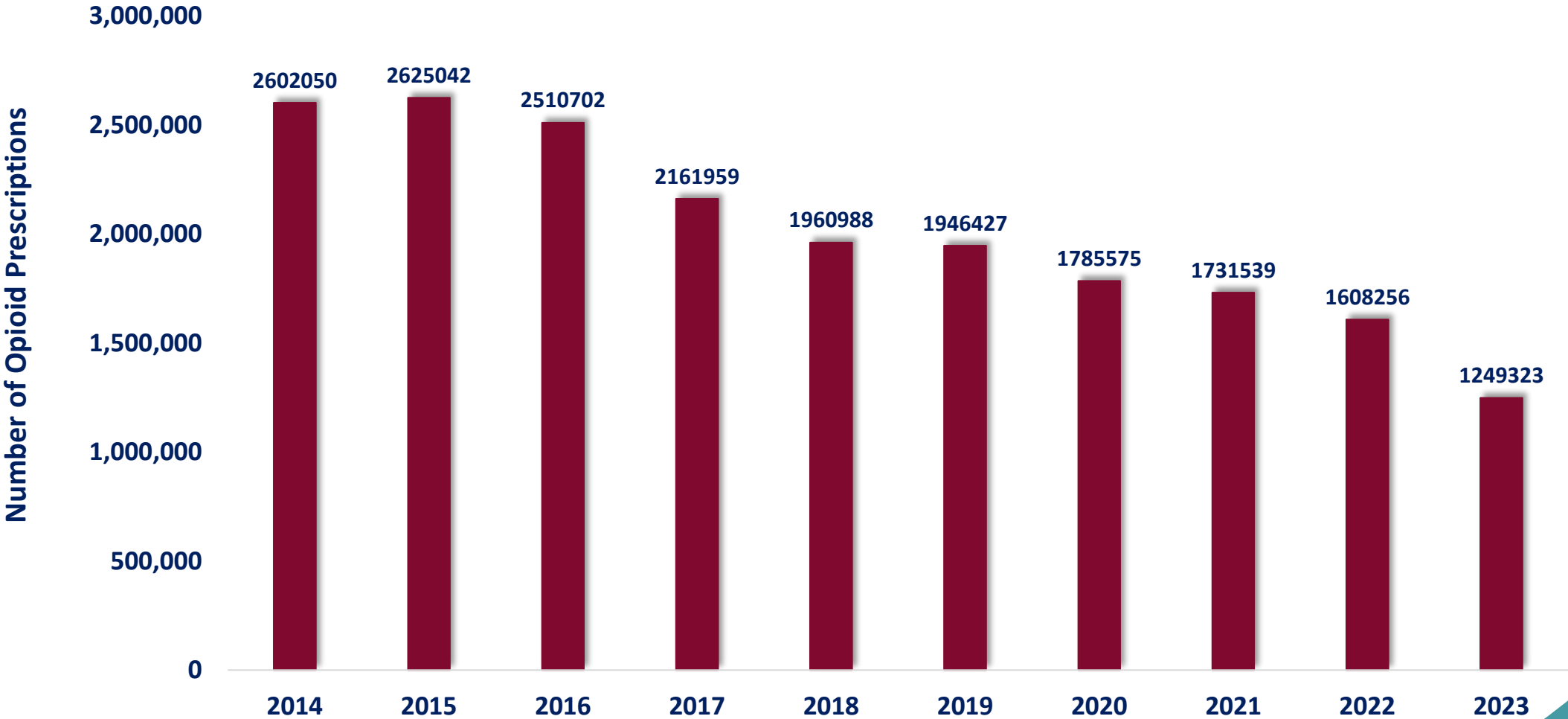
EMS-Reported Opioid Suspected Opioid Overdoses by Age & Gender, June 2022- May 2023



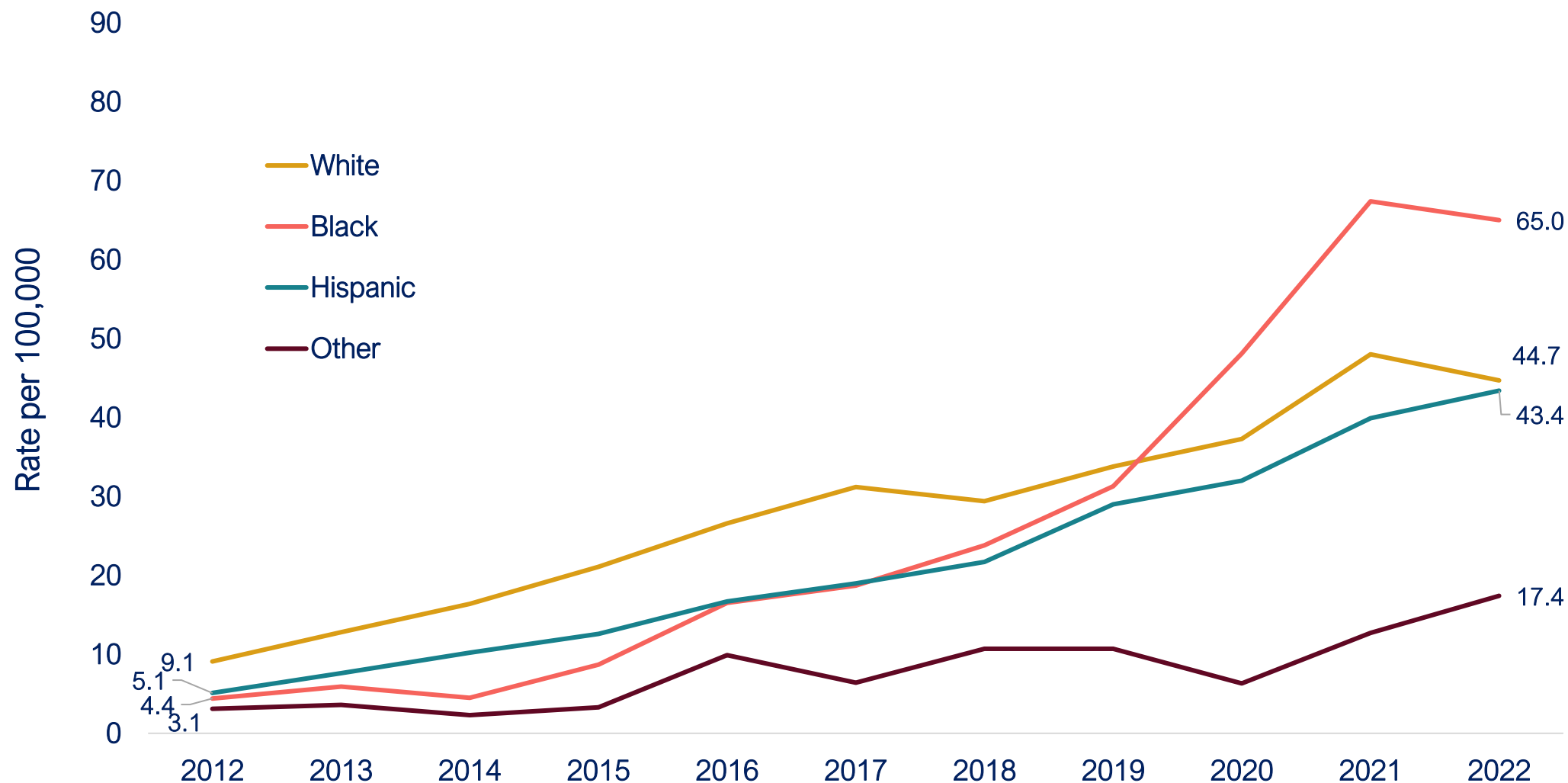
Opioid* Overdose Deaths by Year in CT, 2013-2023



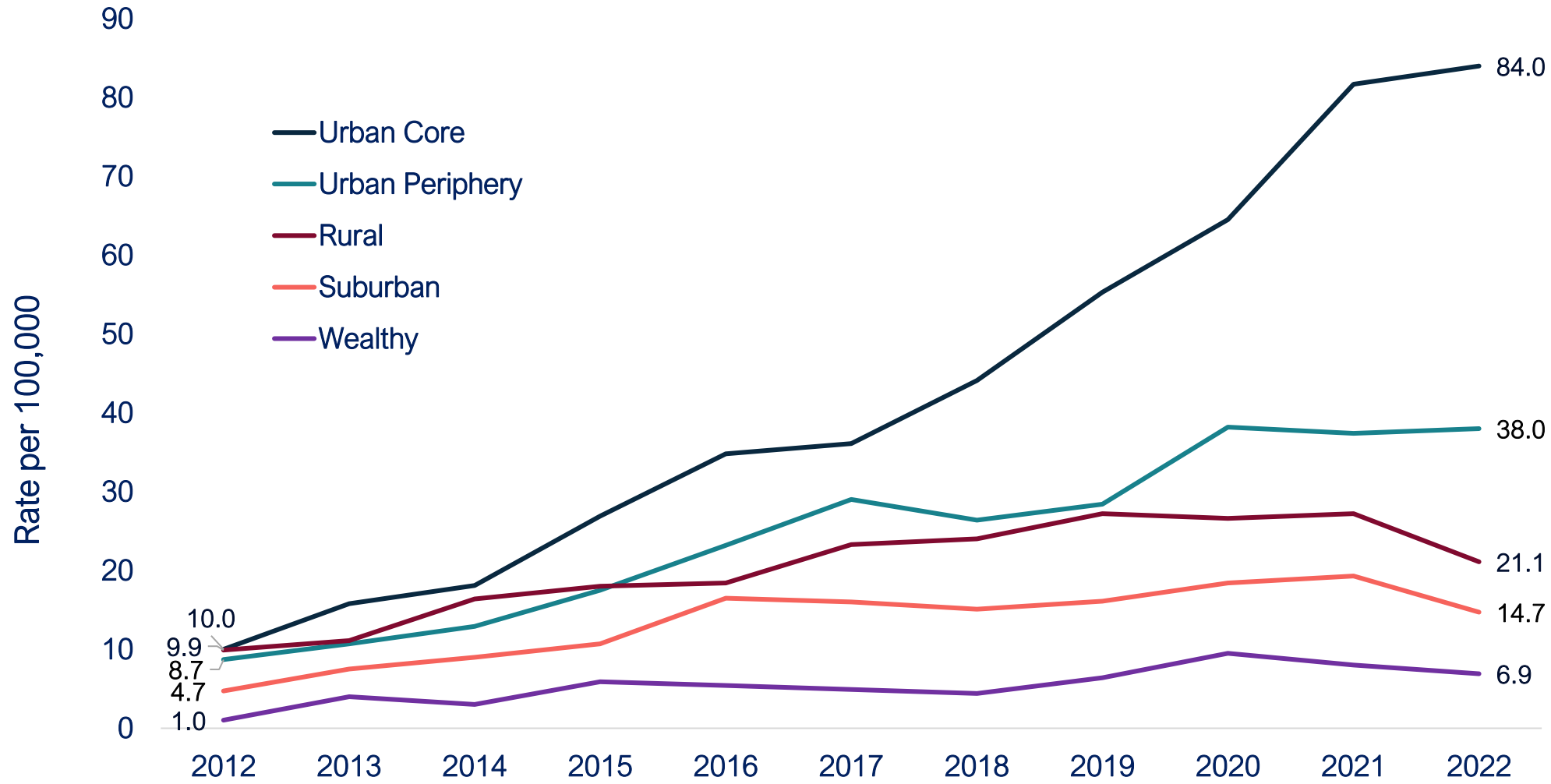
Number of Opioid Prescriptions Per Year in CT, 2014-2023



Opioid Overdose Mortality Rate Per 100,000 by Race/Ethnicity in CT, 2012-2022



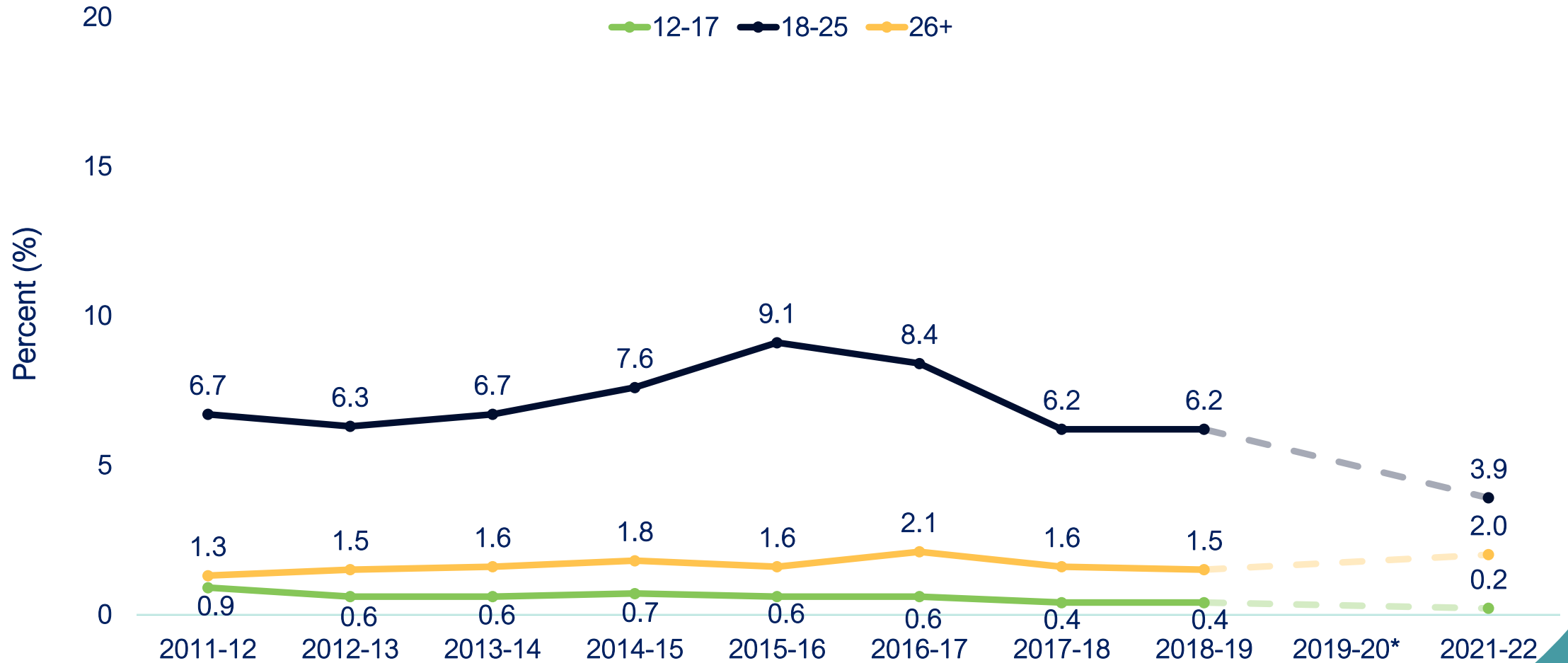
Opioid-Involved Overdose Mortality Rate (per 100,000) by 5 CT Community Types, 2012-2022



Note: Death rate by town of residence

Source: CT Office of the Chief Medical Examiner

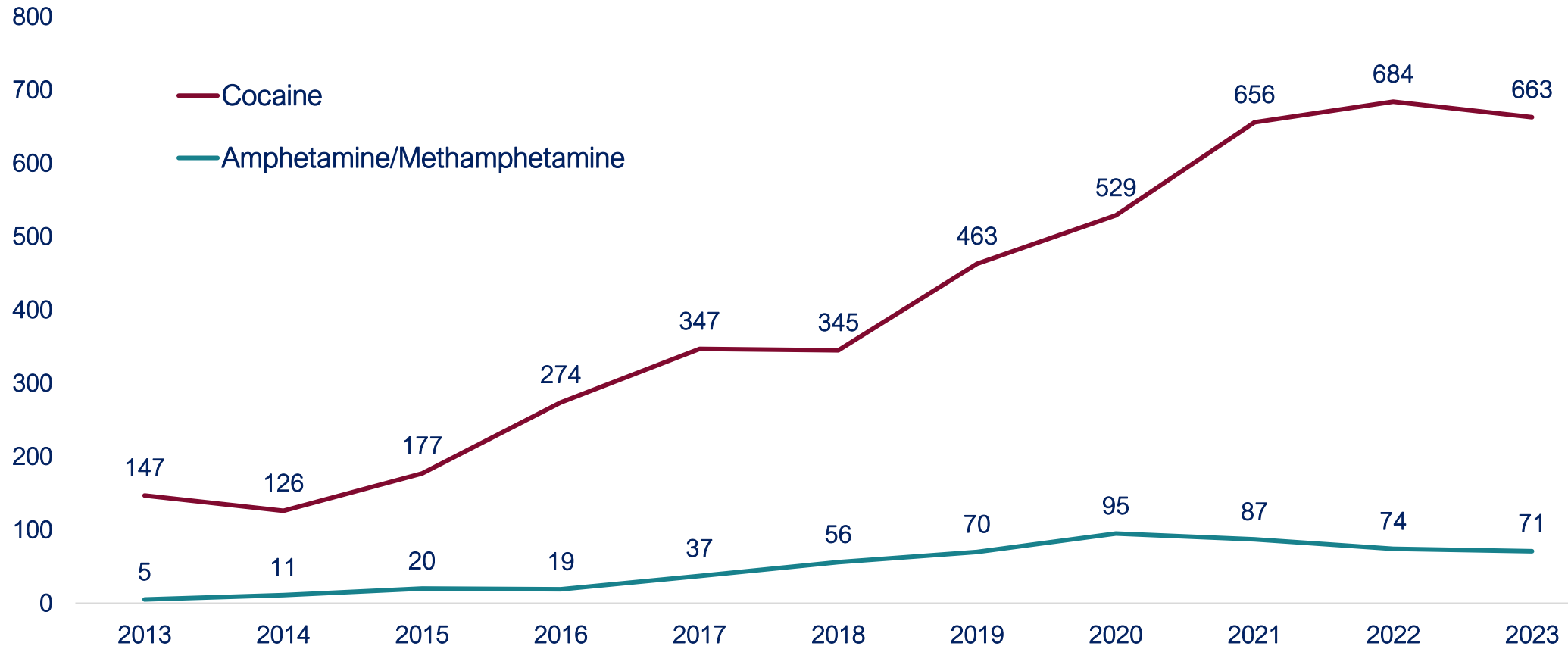
Percent Reporting Past Year Cocaine Use by Age Group in CT, 2011-2022



Note: *State estimates for these years are no longer available due to methodological concerns with combining 2019 and 2020 data.

Source: NSDUH

Number of Stimulant-Involved Overdose Deaths by Year in CT, 2013-2023



Source: CT Office of the Chief Medical Examiner

Key Points: Opioids

The number of opioid prescriptions dispensed per year has been steadily decreasing since 2015.

Fentanyl continues to be involved in the majority of substance overdose mortalities in Connecticut.

Opioid-involved overdose mortalities in Connecticut have been more prevalent among Individuals aged 35-44, the Non-Hispanic Black population, and in urban core communities.

Substance overdose mortalities in Connecticut often involve multiple substances (e.g., no heroin-involved overdose deaths in 2022 involved only heroin and no other substance).

Key Points: Cocaine

Cocaine-involved overdose mortalities in CT have risen over recent years.

The rate of cocaine-involved overdose mortalities is highest, and has increased most markedly, among non-Hispanic Blacks and in urban core communities.

Past year cocaine use in CT was most prevalent in young adults aged 18-25.

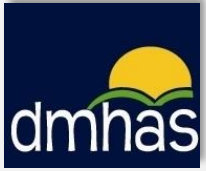
Looking Ahead

Fentanyl-involved overdoses have decreased slightly, but continues to be a public health crisis and needs to be rigorously addressed.

Data on post-legalization cannabis use and effects in CT requires continuous surveillance.

Subpopulation data that highlight health disparities and groups at increased risk/burden are needed to inform prevention planning.

Keep an eye on stimulants (e.g., cocaine, methamphetamine)



For more information, contact:

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Visit the SEOW Prevention Data Portal:
<https://preventionportal.ctdata.org/>

