



Other Illegal Drugs

The 2022 Delaware Epidemiological Profile

Substance Use, Mental Health, and Related Issues

prepared for

*Director Joanna Champney and the
Delaware Division of Substance Abuse
and Mental Health*

&

*The Delaware State Epidemiological
Outcomes Workgroup*



The annual Delaware Epidemiological Profile is a publication of the Delaware State Epidemiological Outcomes Workgroup (SEOW) project. Funding for the SEOW has been provided by the Department of Health and Social Services, Division of Substance Abuse and Mental Health through funding from the Substance Abuse and Mental Health Services Administration (SAMHSA). Please address all inquiries to M.J. Scales, MPH, CPS, University of Delaware Center for Drug and Health Studies, Department of Sociology and Criminal Justice: mjscales@udel.edu.



The Role of the Delaware State Epidemiological Outcomes Workgroup and the Purpose of the Epidemiological Profile

All states, including Delaware, received support from the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) to establish a Statewide Epidemiological Outcomes Workgroup (SEOW). The Division of Substance Abuse and Mental Health (DSAMH) in the Department of Health and Social Services initially supported the SEOW through SAMHSA Strategic Prevention Framework grants and continues to sponsor the SEOW with SAMHSA funding. The SEOW is facilitated by a team at the Center for Drug and Health Studies at the University of Delaware that convenes a network of representatives from approximately 55 State and nonprofit agencies, community organizations, advocacy groups, and other entities. Formerly known as the Delaware Drug and Alcohol Tracking Alliance (DDATA), the SEOW's mission is to bring data on behavioral health and associated issues to the forefront of prevention and treatment efforts by pursuing the following goals:

- To build monitoring and surveillance systems to identify, analyze, and profile data from state and local sources;
- To provide current benchmarks, trends, and patterns of substance abuse consumption and consequences;
- To create data-guided products that inform prevention and treatment planning and policies;
- To train agencies and communities in understanding, using, and presenting data effectively.

The annual Delaware State Epidemiological Profile is a valuable data resource for strategic planning, decision-making, and evaluation. Using data that are available on an ongoing basis, the report highlights indicators of mental health and wellbeing, patterns of substance use and its consequences, and risk and protective factors for people in Delaware. The report also highlights crosscutting issues that warrant attention as well as populations that may experience disproportionate risk for these concerns.

This chapter provides an overview of drug use among substances other than tobacco, alcohol, marijuana, and opioids. To review the complete report, slides, infographics, and other SEOW data products, please visit the UD Center for Drug and Health Studies [Delaware Epidemiological Reports](#) page. Video recordings of select SEOW presentations referenced in this report are also [available online](#).

SEOW Collaborators

Thank you for your participation and commitment to data-driven prevention planning, practice, and evaluation! We are especially grateful to the team at the Delaware Division of Substance Abuse and Mental Health for their guidance and collaboration.

atTAcK Addiction
Bellevue Community Center
Beebe Healthcare
Children and Families First
Christiana Care Health System
Colonial School District
Delaware Academy of Medicine/Delaware Public Health Association
Delaware Afterschool Network
Delaware Center for Justice
Delaware Coalition Against Domestic Violence
Delaware Council on Gambling Problems
Delaware Courts - Office of the Child Advocate
Delaware Criminal Justice Council
Delaware Criminal Justice Information System
Delaware Department of Corrections
Delaware Department of Education
Delaware Department of Services for Children, Youth and their Families
 Division of Prevention and Behavioral Health Services
Delaware Department of Health and Social Services
 Division of Medicaid and Medical Assistance
 Division of Public Health
 Division of Services for Aging and Adults with Physical Disabilities
 Division of Substance Abuse and Mental Health
Delaware Department of Safety and Homeland Security
 Delaware State Police
 Division of Alcohol and Tobacco Enforcement
 Division of Forensic Science
Delaware Department of State
 Delaware Office of Controlled Substances
 Division of Professional Regulation, Prescription Monitoring Program
Delaware Domestic Violence Coordinating Council
Delaware Guidance Services
Delaware Information and Analysis Center
Delaware Multicultural and Civic Organization

Delaware Overdose System of Care
Delaware Prevention Coalition
Delaware State Board of Education
Holcomb BHS/Open Door, Inc.
KIDS COUNT in Delaware, University of Delaware Center for Community Research & Service
La Esperanza Community Center
Latin American Community Center
Mental Health Association in Delaware
Milford School District
NAMI Delaware
Nemours Health and Prevention Services
Network Connect
New Castle County Behavioral Health Unit
New Castle County Police Department
Planned Parenthood of Delaware
Red Clay Consolidated School District
Sun Behavioral Delaware
Sussex County Health Coalition
Transitions Delaware
Trauma Matters Delaware
United States Department of Justice
United Way of Delaware
University of Delaware
 College of Health Sciences
 College of Arts and Sciences
 Partnership for Healthy Communities
 Student Health & Wellness Promotion
Wesley College
West End Neighborhood House
Wilmington University

We would like acknowledge the SEOW Facilitator Team and others from the University of Delaware Center for Drug and Health Studies and for their contributions to the 2022 Epidemiological Profile:

Jessica Arnold, Rochelle Brittingham, David Borton, Darryl Chambers, Bill Gratton, Stephanie Ha, James Highberger, Dana Holz, Sharon Merriman-Nai, Dan O’Connell, Laura Rapp, Rachel Ryding, Meisje Scales, Rachael Schilling, Eileen Sparling, and Madeline Stenger.

If your organization is interested in becoming an SEOW Collaborator, please contact Meisje Scales at: mjscales@udel.edu.

Table of Contents

Table of Figures	v
Notes: Data Reporting and Interpretation	vi
1. Other Illegal Drugs	1-1
National Overview	1-1
Delaware Overview	1-2
2. References	2-1
Other Illegal Drugs	2-1
Data Sources	2-2

Table of Figures

Figure 1: Selected drug use, Delaware, by age group	1-4
Figure 2: Other illegal drug use, 8 th grade	1-5
Figure 3: Other illegal drug use, 11 th grade	1-6
Figure 4: National trends in annual prevalence of any illicit drug use (other than marijuana), 8 th , 10 th , and 12 th grade.....	1-7
Figure 5: Illicit drug use other than marijuana, past month, by age group and state	1-8
Figure 6: Illicit drug use, past month, by age and state.....	1-9
Figure 7: National trends in annual prevalence of inhalant use, 8 th , 10 th , and 12 th grade.....	1-10
Figure 8: Synthetic marijuana use, 8 th grade	1-11
Figure 9: Synthetic marijuana use, 11 th grade	1-12
Figure 10: National trends in annual prevalence of synthetic marijuana use, 8 th , 10 th , and 12 th grade	1-13
Figure 11: Medication Misuse and Perceptions of Great Risk, 8 th grade	1-14
Figure 12: Medication Misuse and Perceptions of Great Risk, 11 th grade	1-15
Figure 13: National trends in past month prevalence of prescription misuse, 12 th grade.....	1-16
Figure 14: Over-the-Counter Drug Misuse, 8 th grade.....	1-17
Figure 15: Over-the-Counter Drug Misuse, 11 th grade	1-18
Figure 16: Delaware treatment admissions by primary substance	1-19
Figure 17: Delaware treatment admissions by primary substance and sex.....	1-20
Figure 18: Delaware treatment admissions by primary substance and age group.....	1-21
Figure 19: Delaware treatment admissions by primary substance and race and ethnicity Back to table of figures.....	1-22
Figure 20: Drug overdose deaths in Delaware by demographic	1-24
Figure 21: Map of drug overdose deaths in Delaware by census tracts	1-25

Notes: Data Reporting and Interpretation

In order to protect the anonymity of respondents and to ensure that the data reported meet certain statistical standards, the Center for Drug and Health Studies (CDHS) at the University of Delaware has established a set of guidelines for reporting and interpreting data from surveys that it administers to students across the state. As a result, in the Delaware State Epidemiological Profile, data in some tables and figures may be aggregated or otherwise reported differently than in years prior. The following notes summarize the guidelines for interpreting data presented in this report and provide an overview of changes relevant to this year:

- **Reporting small numbers:** For any estimate where the raw number of responses is less than 30, no statistical estimates are reported. Statistics computed from such a small proportion of the total number of students may be unreliable, inflating the significance of existing relationships in the data, and among some special populations, may put individuals at risk of being identified. In some data products such as our heat maps, multiple years of data have been combined in order to increase the sample sizes to a reportable figure (i.e., 30 or above).
- **Rounding:** All figures from Delaware School Survey (DSS) are rounded to the *nearest whole percent*. As such, in some cases the cells in a table may add up to slightly more or less than 100%.
- **Missing Observations:** In our analysis, any missing observations (responses) are not calculated into the total percentages. Because different questions have varying numbers of missing responses, the total sample size and percent missing may fluctuate slightly from question to question. This is due to a few factors:
 - Students may not answer all questions on a survey, particularly those towards the end if they run out of time or they tire of answering questions.
 - Students may also skip or decide not to respond to certain questions for various reasons (e.g., if they fear their responses will not be kept confidential; if they consider the question too personal or sensitive; if they do not understand the question; etc.)
- **Discrepancies in Reporting:** In some instances, there may be slight differences in estimates reported by the Center for Drug and Health Studies compared to those reported by other state or federal entities for the same data source. In most cases this is due to differing practices in rounding or handling missing observations in the data and does not substantially impact the overall prevalence estimates, trends, and relationships among these data points.
- **Statistical Significance:** Unless otherwise indicated, all reported correlations between variables are statistically significant at the $p < .05$ level. Null hypothesis testing, used to estimate statistical significance, provides an estimate of the likelihood that the relationship between two indicators is not due to random chance. If the p-value for a

given crosstab is less than .05, this suggests that in 95% of cases, the correlation between the relevant variables is because there is a relationship between them.

- Weighted Data: Weighting data is a correction technique that compensates for nonresponses, helps correct for unequal probabilities of being selected within the sample, and helps ensure that the sample drawn is representative of the Delaware student population. If data is weighted, there will be a notation indicating the data is weighted for the specific fact, figure, or table.
 - A note about 2019 Youth Risk Behavior Survey (YRBS) Data: In previous years, Delaware received weighted Delaware YRBS survey data from the CDC for both middle and high school samples. However, during the 2019 administration, participation rates for the Delaware high school survey did not meet the required threshold for weighting the data. Therefore, this report only includes 2019 middle school findings from the YRBS. Whenever available, trend data from the CDC Youth Online Data Portal is also reported. Additional high school YRBS data from previous years may be requested by following the [Delaware Division of Public Data Information & Request Process](#).
- The 2021 Delaware School Survey (DSS) is administered annually to students in 5th, 8th, and 11th grades of participating public schools. There is one version designed for 5th graders and a secondary version for 8th and 11th graders. These data are important for monitoring behavioral health among youth and are included throughout the report. The sample sizes for the 2021 DSS are:
 - 5th grade: 2,601
 - 8th grade: 2,896
 - 11th grade: 1,597
- Pandemic Impacts on Data Collection: Since 2020, the COVID-19 pandemic has greatly affected data collection of all kinds. This report compiles the most recently accessible state and national data available to provide a comprehensive profile of behavioral health in Delaware. Given that the timing and methods of various data survey administrations may have changed within the past several years, it will be important to consider this when interpreting trends.
 - Prior to the onset of the COVID-19 pandemic, the Delaware School Survey was administered at participating schools in person and using paper and pencil copies. To accommodate the new pandemic-related protocols that were put in place when in person learning resumed, in 2021, the survey was administered to students using an online format. Data from the 2021 survey should be interpreted with this in mind, especially when comparing trends against previous years, as changes in the survey format may impact student participation in unknown ways.

A Note on Word Choice Used in this Report:

Language frames how we collectively think about behavioral health and is continuously evolving. The SEOW Facilitator Team strives to use word choices that are accurate, respectful, free of stigma, strength-based, trauma-informed, and inclusive and culturally sensitive in our data products. However, much of the data and information we report are drawn from other sources. To preserve accuracy, whenever possible, we use the words, phrases, and data labels that are used in the original sources even if these terms are not necessarily the terms we would use as researchers, practitioners, or prevention specialists. When it is necessary to edit an SEOW product in a way that uses different terminology from the original data source, we include the original phrasing in the accompanying notes.

1. Other Illegal Drugs

National Overview

The substance use rates examined in this report focus primarily on the four most commonly used substances in Delaware today (tobacco, alcohol, marijuana, and opioids). However, many other illicit and prescription drugs are also misused. This list of examples is not exhaustive:

- Depressants: barbiturates, benzodiazepines, gamma hydroxybutyrate (GHB), Rohypnol
- Stimulants: cocaine, methamphetamine, Adderall, Ritalin
- Hallucinogens: lysergic acid diethylamide (LSD), mescaline, salvia, “mushrooms”
- New psychoactive substances (NPS): synthetic cannabinoids
- Other drugs: ecstasy, ketamine, bath salts, dextromethorphan (DXM), steroids, inhalants

Although these are not used as commonly as alcohol, marijuana, and opioids and consequently do not receive as much attention, use of these substances comes with steep risks, including the potential for: overdose; addiction; mixing with other dangerous products (such as fentanyl in cocaine); drug interactions; and serious mental impairment that may lead to the increased likelihood of victimization, physical altercations, dangerous accidents, and/or criminal behavior.

Crack/cocaine has particularly troubling health implications. Cocaine is very addictive and may lead to various long-term health concerns as well as possible overdose. According to the U.S. Centers for Disease Control and Prevention (CDC), the age-adjusted rate of overdose deaths involving cocaine and are on the rise in the U.S., from 1.4 per 100,000 people in 2012 to 6.0 per 100,000 in 2020 (Hedegaard, Minino, Spencer & Warner, 2022). In 2019, more than three out of four drug overdose deaths involving cocaine also involved one or more opioid (Hedegaard, Minino & Warner, 2021). In addition to cocaine, overdoses involving other psychostimulants, such as methamphetamines and amphetamines, are also increasing. (Heedegaard, Minino, Spencer & Warner, 2022).

As noted in the Opioids Chapter of this report, xylazine is an animal tranquilizer that is being increasingly identified in illicit drugs and overdoses (Friedman et al., 2022).

3.5% of Delawareans aged 12 and over report using an illicit drug other than marijuana in the past month, and 1.75% report using cocaine in the past year.

7% of Delaware 8th and 11th grade students reported misusing a prescription medication and 3% reported misusing an over-the-counter drug in the past year.

In 2021, 221 overdose deaths in Delaware involved cocaine.

Frequently identified with fentanyl, it is sometimes combined as an adulterant with heroin and cocaine to create “speedballs” but is used on its own as well (McAward, 2021).

Synthetic cannabinoids, referred to as synthetic marijuana or “fake weed,” are human-made chemicals that are similar to those found in the marijuana plant. Although they are sometimes mistakenly considered safe alternatives to marijuana, they are unsafe and may have more powerful, unpredictable, and possibly life-threatening effects. Synthetic cannabinoids can be sprayed on dried plant material to be smoked, mixed with marijuana, or brewed as tea, or sold as liquid that can be vaporized and used in electronic cigarettes or similar devices (National Institute on Drug Abuse, 2020).

Delaware Overview

The National Survey on Drug Use and Health (NSDUH, 2019-2020) estimates that approximately 3.5% of all people in Delaware aged 12 and older have ever used an illicit drug, not including marijuana, in the past month. Broken down by age, 1.9% of Delaware youth ages 12 to 17, 6.30% of adults ages 18 to 25, and 3.28% of adults aged 26 and over reported using an illicit drug (misuse of prescription psychotherapeutics, cocaine, including crack, heroin, hallucinogens, inhalants, or methamphetamine) in the past month. The 2021 Delaware School Survey (DSS) indicates that 2% of 8th grade students reported use of an illicit drug other than marijuana in the past year and 4% at some time in their life. Seven percent reported misuse of prescription medication (including pain medication) within the previous year. Concurrently, only half of 8th graders perceived a great risk in misusing prescription medication. Among 11th graders, 57% perceived great risk of misusing prescription medication and 7% reported past year prescription drug misuse. Eleventh graders also reported 9% lifetime and 5% past year rates of illicit drug use other than marijuana in 2021. Three percent of both 8th and 11th grade students reported misusing an over-the-counter drug in the previous year.

The 2019-2020 NSDUH estimates that approximately 1.75% of Delaware adults age 12 and older used cocaine in the past year, with adults aged 18 to 25 reporting the highest rate of use (6.30%). Cocaine has been increasingly identified in overdose deaths in Delaware since 2016. In 2021, 221 overdose deaths involved cocaine compared to 152 reported in 2020 and was found in more than one in five postmortem cases (Division of Forensic Science, 2022). Approximately 5% of all drug treatment admissions to publicly funded treatment programs in the state were primarily due to cocaine use (Treatment Episode Data Set [TEDS], 2019).

Three percent of 8th grade students reported using synthetic marijuana at least once in their lifetime and 2% in the past year on the 2021 Delaware School Survey. Among 11th

graders, 6% reported using the substance at least once in their lifetime while 4% indicated use in the past year.

**National Survey on Drug Use and Health
Selected Drug Use in Delaware, by Age Group
Annual Averages Based on 2019-2020
(in percentages)^a**

Measure	Total 12 or Older	AGE GROUP		
		12-17	18-25	26 or Older
ILLICIT DRUGS				
Past Month Illicit Drug Use^b	12.20	6.67	24.12	11.13
Past Month Use of Illicit Drugs Other Than Marijuana	3.50	1.90	6.30	3.28
Past Year Cocaine Use	1.75	0.12	4.28	1.57

Figure 1: Selected drug use, Delaware, by age group

Notes:

^a Estimates are based on a survey-weighted hierarchical Bayes estimation approach and generated by Markov Chain Monte Carlo techniques.

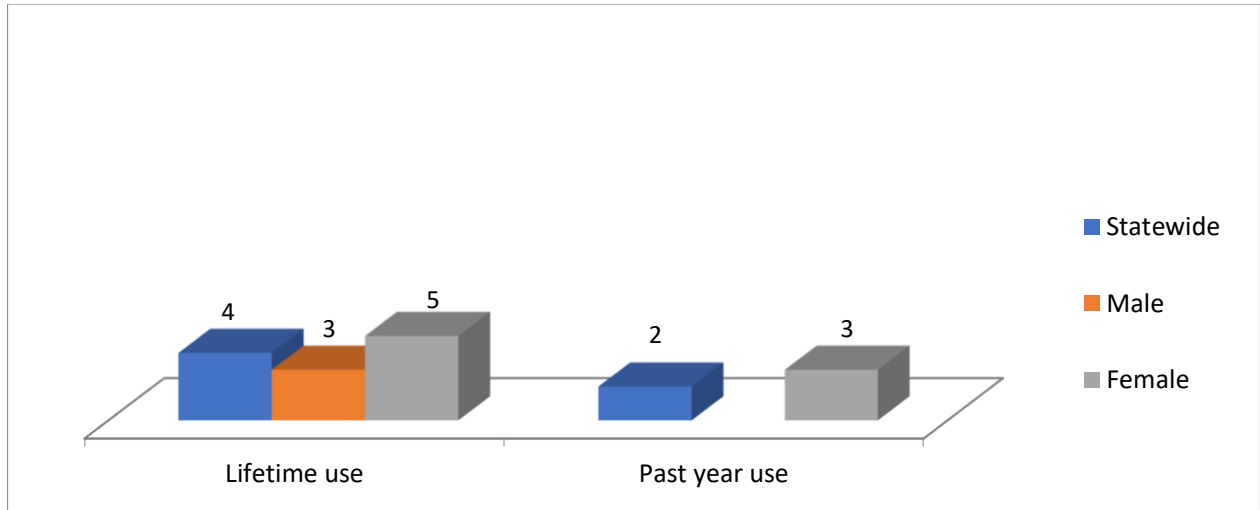
^b “Illicit Drug Use” includes the misuse of prescription psychotherapeutics or the use of marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, or methamphetamine. Misuse of prescription psychotherapeutics is defined as use in any way not directed by a doctor, including use without a prescription of one's own; use in greater amounts, more often, or longer than told; or use in any other way not directed by a doctor. Prescription psychotherapeutics do not include over-the-counter drugs.

Source: [“2019-2020 National Survey on Drug Use and Health: Model-Based Prevalence Estimates \(50 States and the District of Columbia\).” Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.](#)

[Back to table of figures](#)

2021 Delaware School Survey

Other Illegal Drug^a Use among Delaware 8th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	4	2	-
Male	3	-	-
Female	5	3	-

Figure 2: Other illegal drug use, 8th grade

Notes:

"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

^a "Other illegal drugs" includes ecstasy, hallucinogens, street uppers, inhalants, cocaine, crack, heroin, and synthetic marijuana used to get high.

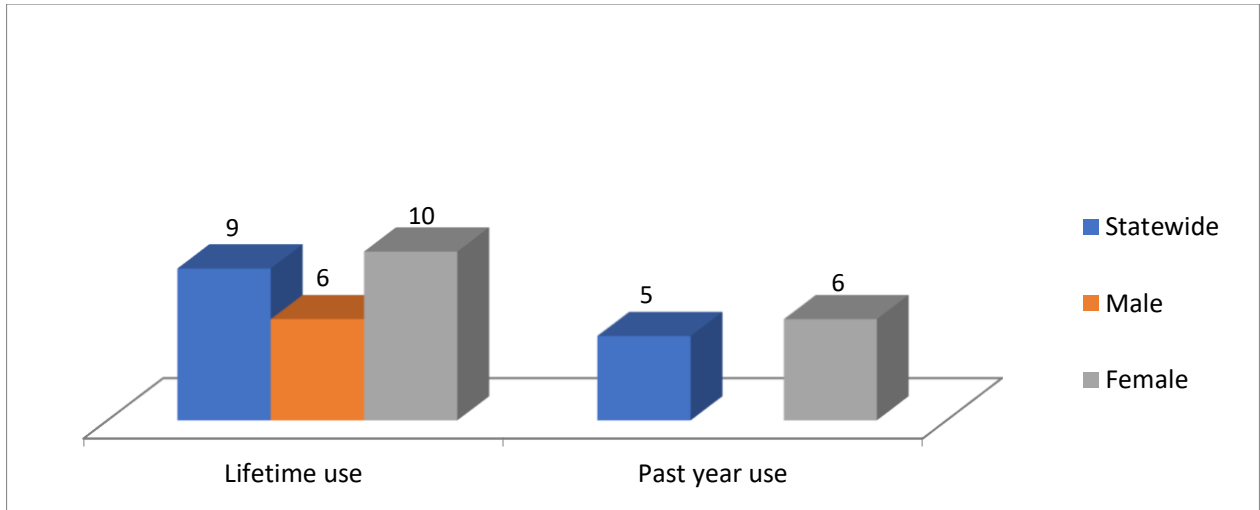
*The relationship between sex and other illegal drug use was not statistically significant at the $p < .05$ level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

2021 Delaware School Survey

Other Illegal Drug^a Use among Delaware 11th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	9	5	-
Male	6	-	-
Female	10	6	-

Figure 3: Other illegal drug use, 11th grade

Notes:

"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

^a "Other illegal drugs" includes ecstasy, hallucinogens, street uppers, inhalants, cocaine, crack, heroin, and synthetic marijuana used to get high.

*Unless otherwise noted, estimates are statistically significant at the p<.05 level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

Monitoring the Future

National Trends in Annual Prevalence: Any Illicit Drug (other than marijuana) 8th, 10th, and 12th Grade (in percentages)

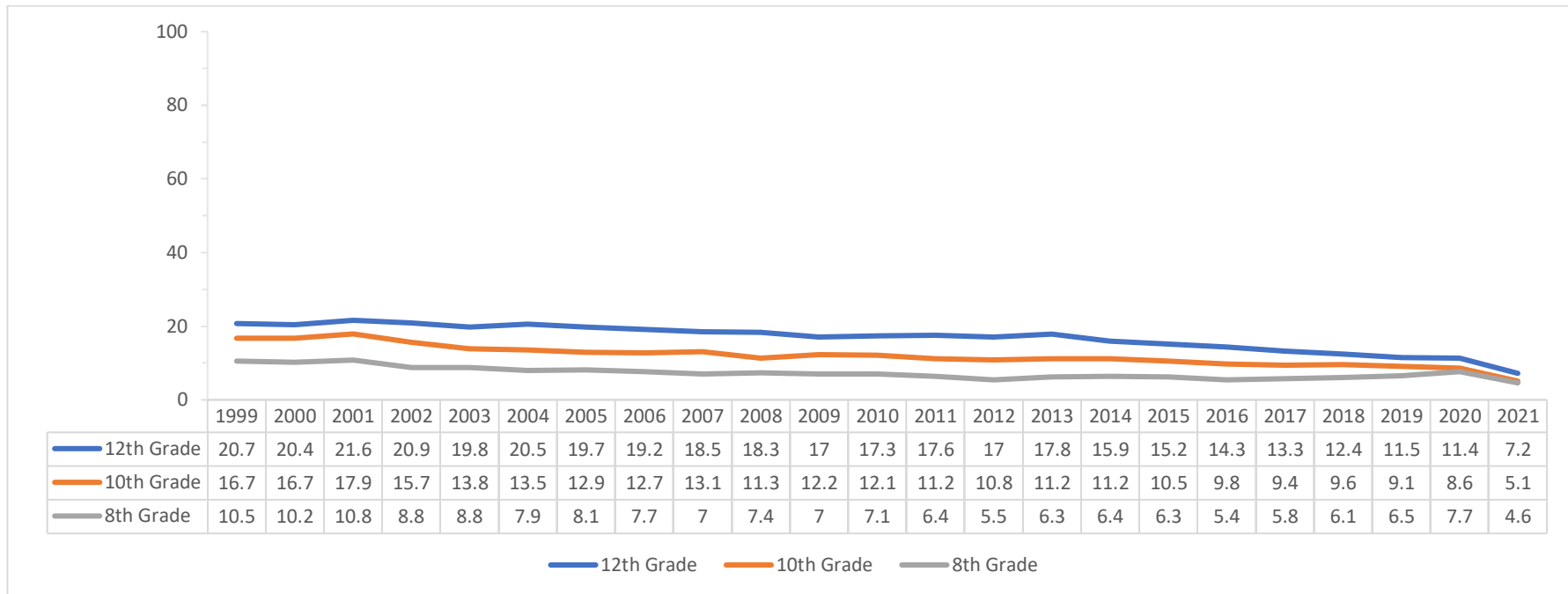


Figure 4: National trends in annual prevalence of any illicit drug use (other than marijuana), 8th, 10th, and 12th grade

Note: Any illicit drug is defined by the Monitoring the Future study as LSD, other hallucinogens, crack, cocaine, heroin, or any use of other narcotics, amphetamines, sedatives, or tranquilizers not under a doctor's orders.

Source: ["National Survey Results on Drug Use, 1975-2021." Monitoring the Future \(MTF\). University of Michigan.](#)

[Back to table of figures](#)

National Survey of Drug Use and Health
Illicit Drug Use Other than Marijuana in Past Month, by Age Group and State
2018-2019 and 2019-2020
(in percentages)^a

State	AGE GROUP (Years)											
	12 or Older			12-17			18-25			26 or Older		
	2018-2019	2019-2020	<i>p</i> value ^b	2018-2019	2019-2020	<i>p</i> value ^b	2018-2019	2019-2020	<i>p</i> value ^b	2018-2019	2019-2020	<i>p</i> value ^b
Total U.S.	3.31	3.38	-	2.37	1.81	-	6.07	5.44	-	2.99	3.24	-
Northeast	3.14	3.49	-	2.12	1.73	-	6.26	5.88	-	2.77	3.32	-
Delaware	4.00	3.50	-	2.44	1.90	-	6.67	6.30	-	3.79	3.28	-

Figure 5: Illicit drug use other than marijuana, past month, by age group and state

Notes:

^a Estimates are based on a survey-weighted hierarchical Bayes estimation approach and generated by Markov Chain Monte Carlo techniques.

^b *p* value: Bayes significance levels for the null hypothesis of no change between the 2018-2019 and 2019-2020 population percentages. P values for this data were unavailable at the time of this report writing.

“Illicit Drug Use Other Than Marijuana” includes the misuse of prescription psychotherapeutics or the use of cocaine (including crack), heroin, hallucinogens, inhalants, or methamphetamine. Misuse of prescription psychotherapeutics is defined as use in any way not directed by a doctor, including use without a prescription of one’s own; use in greater amounts, more often, or longer than told; or use in any other way not directed by a doctor. Prescription psychotherapeutics do not include over-the-counter drugs.

Source: [“2019-2020 National Survey on Drug Use and Health: Model-Based Prevalence Estimates \(50 States and the District of Columbia\).” Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.](#)

[Back to table of figures](#)

National Survey of Drug Use and Health
Illicit Drug Use in Past Month, by Age Group and State
2018-2019 and 2019-2020
(in percentages)^a

State	AGE GROUP (Years)											
	12 or Older			12-17			18-25			26 or Older		
	2018-2019	2019-2020	p value ^b	2018-2019	2019-2020	p value ^b	2018-2019	2019-2020	p value ^b	2018-2019	2019-2020	p value ^b
Total U.S.	12.34	13.24	-	8.37	7.71	-	24.40	24.43	-	10.90	12.15	-
Northeast	12.86	13.83	-	8.56	9.18	-	26.58	27.33	-	11.21	12.28	-
Delaware	14.32	12.20	-	9.94	6.67	-	29.73	24.12	-	12.62	11.13	-

Figure 6: Illicit drug use, past month, by age and state

Notes:

^a Estimates are based on a survey-weighted hierarchical Bayes estimation approach and generated by Markov Chain Monte Carlo techniques.

^b p value: Bayes significance levels for the null hypothesis of no change between the 2018-2019 and 2019-2020 population percentages. P values for this data were unavailable at the time of this report writing.

“Illicit Drug Use” includes the misuse of prescription psychotherapeutics or the use of marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, or methamphetamine. Misuse of prescription psychotherapeutics is defined as use in any way not directed by a doctor, including use without a prescription of one’s own; use in greater amounts, more often, or longer than told; or use in any other way not directed by a doctor. Prescription psychotherapeutics do not include over-the-counter drugs.

Source: [“2019-2020 National Survey on Drug Use and Health: Model-Based Prevalence Estimates \(50 States and the District of Columbia\).” Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.](#)

[Back to table of figures](#)

Monitoring the Future

National Trends in Annual Prevalence: Inhalants 8th, 10th, and 12th Grade (in percentages)

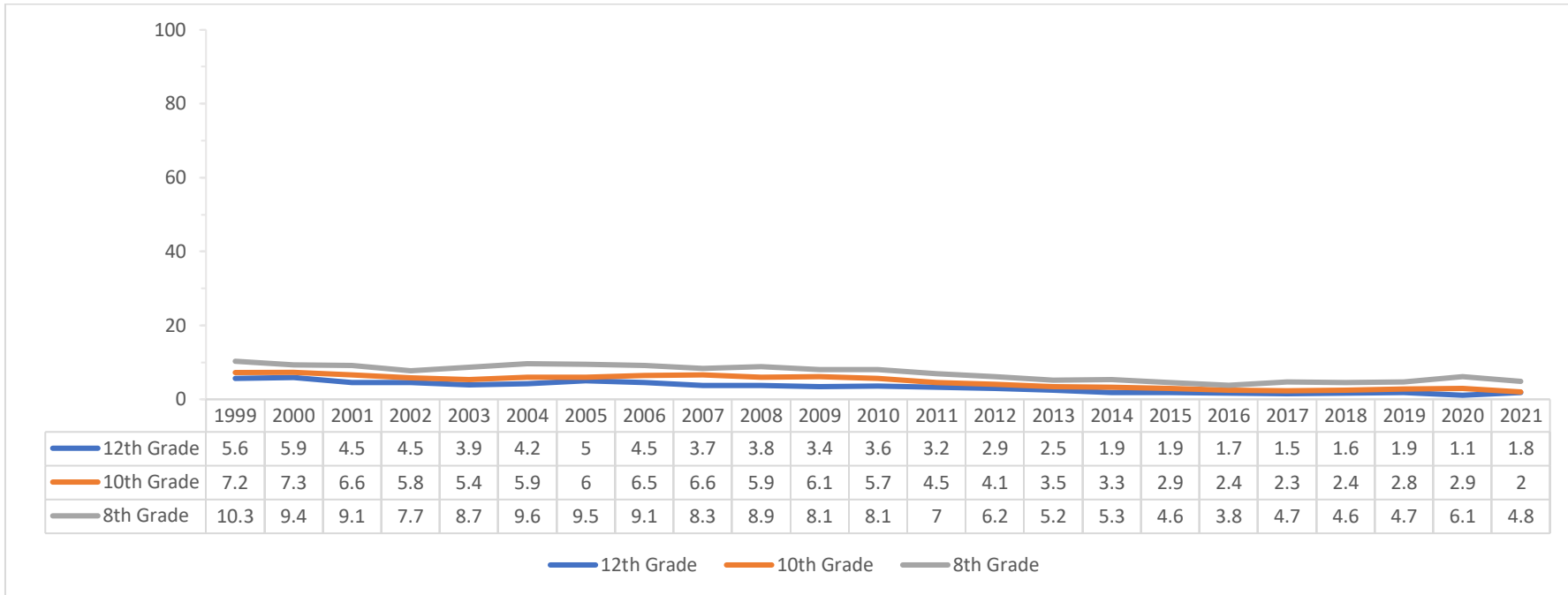
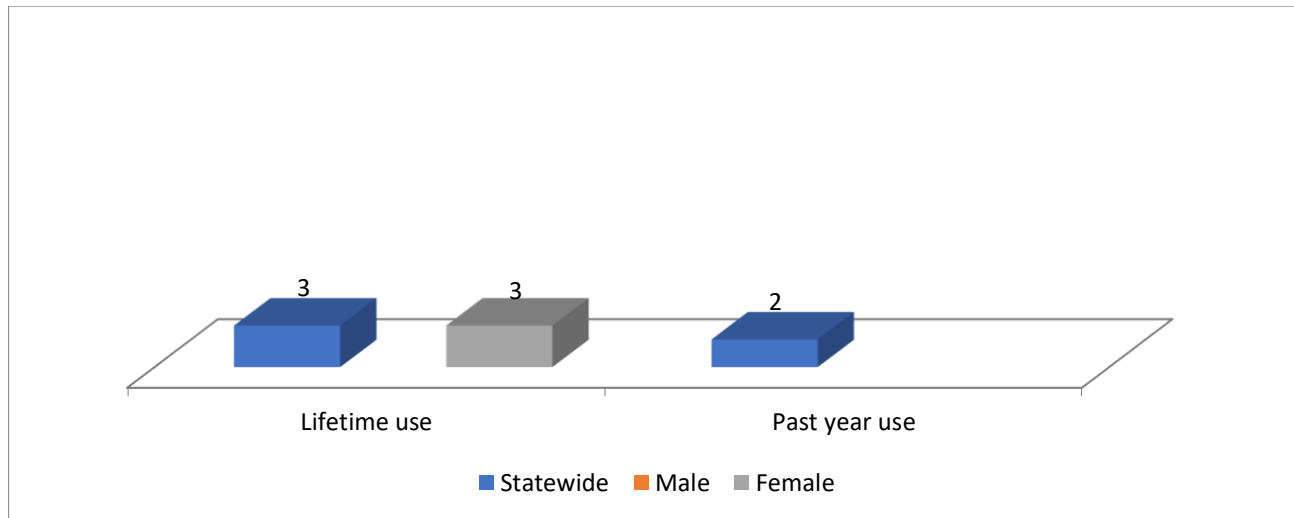


Figure 7: National trends in annual prevalence of inhalant use, 8th, 10th, and 12th grade

Source: ["National Survey Results on Drug Use, 1975-2021." Monitoring the Future \(MTF\). University of Michigan.](#)

[Back to table of figures](#)

2021 Delaware School Survey Synthetic Marijuana Use among Delaware 8th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	3	2	-
Male	-	-	-
Female	3	-	-

Figure 8: Synthetic marijuana use, 8th grade

Notes:

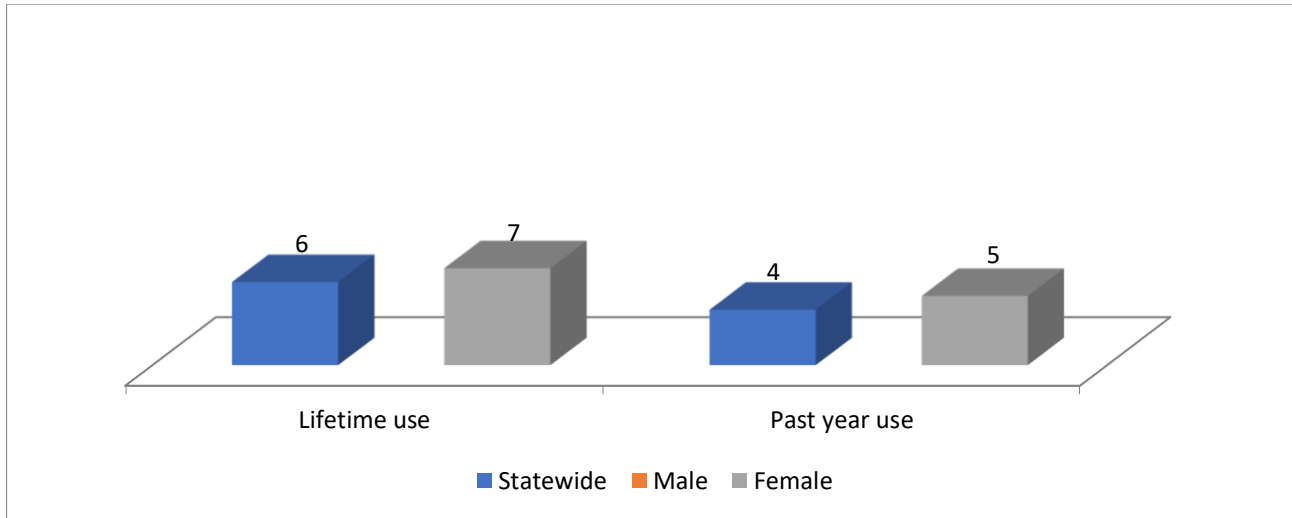
"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

*The relationship between sex and synthetic marijuana use was not statistically significant at the $p < .05$ level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

2021 Delaware School Survey Synthetic Marijuana Use among Delaware 11th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	6	4	-
Male	-	-	-
Female	7	5	-

Figure 9: Synthetic marijuana use, 11th grade

Notes:

"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

*Unless otherwise noted, all estimates are statistically significant at the p<.05 level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

Monitoring the Future

National Trends in Annual Prevalence: Synthetic Marijuana 8th, 10th, and 12th Grade (in percentages)

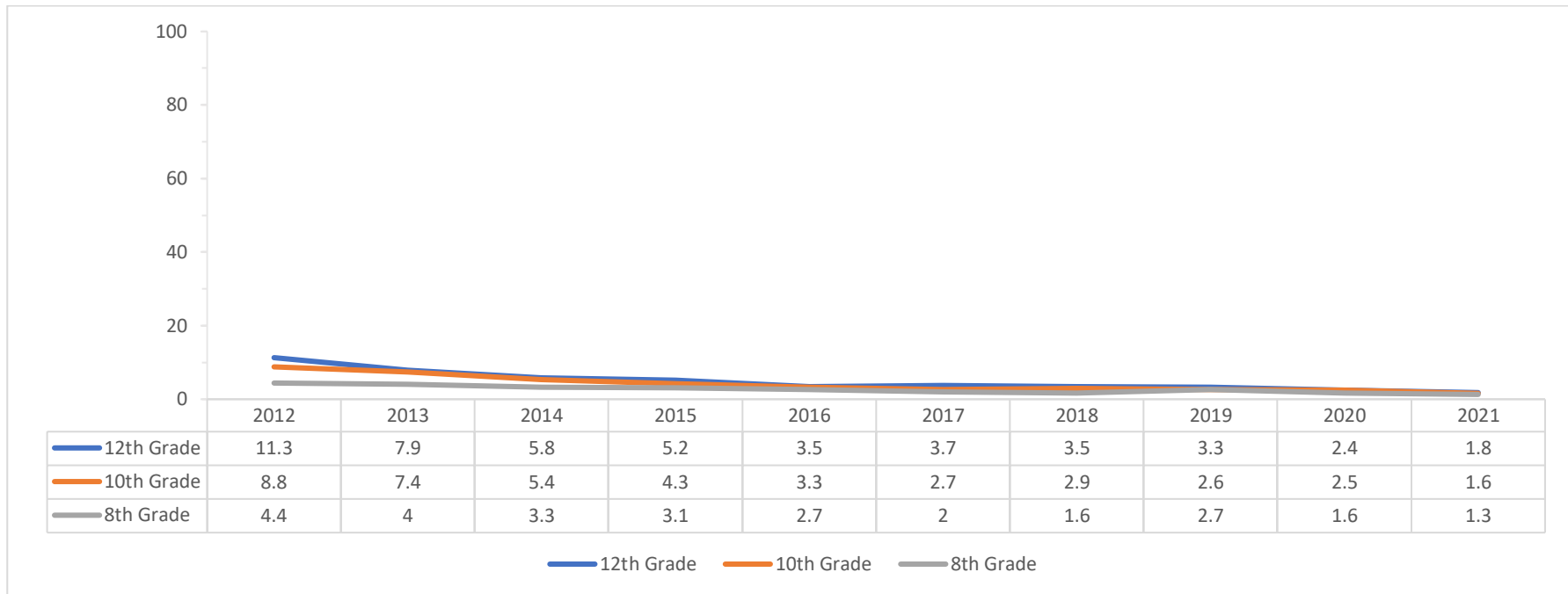
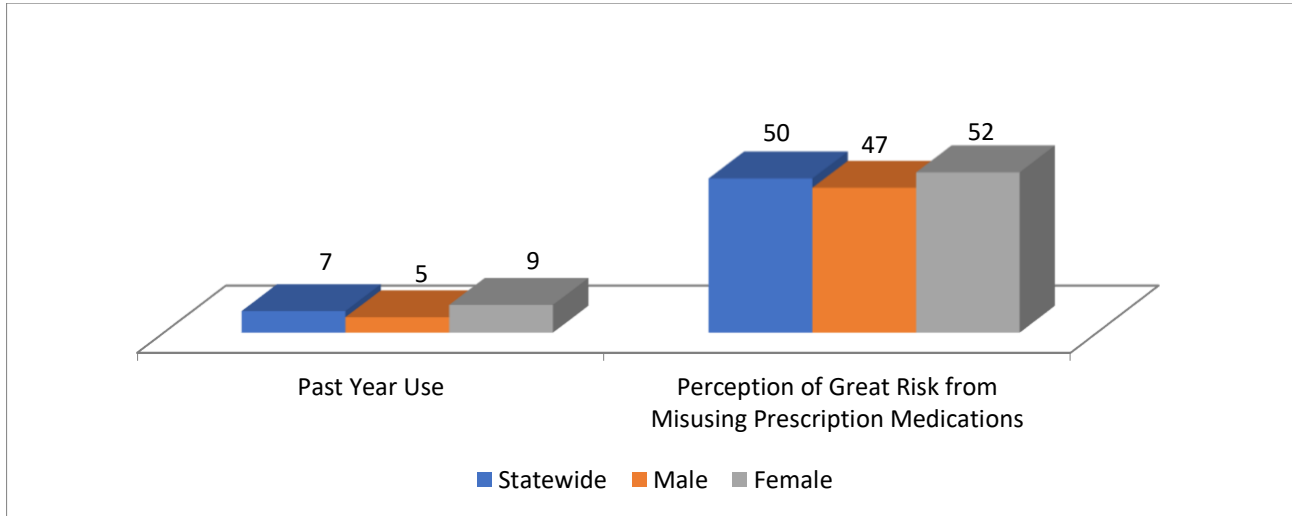


Figure 10: National trends in annual prevalence of synthetic marijuana use, 8th, 10th, and 12th grade

Source: ["National Survey Results on Drug Use, 1975-2021." Monitoring the Future \(MTF\). University of Michigan.](#)

[Back to table of figures](#)

2021 Delaware School Survey Prescription Misuse^a among 8th Grade Students (in percentages)



	Past Year Use	Perception of Great Risk from Prescription Misuse
Statewide	7	50
Male	5	47
Female	9	52

Figure 11: Medication Misuse and Perceptions of Great Risk, 8th grade

Notes:

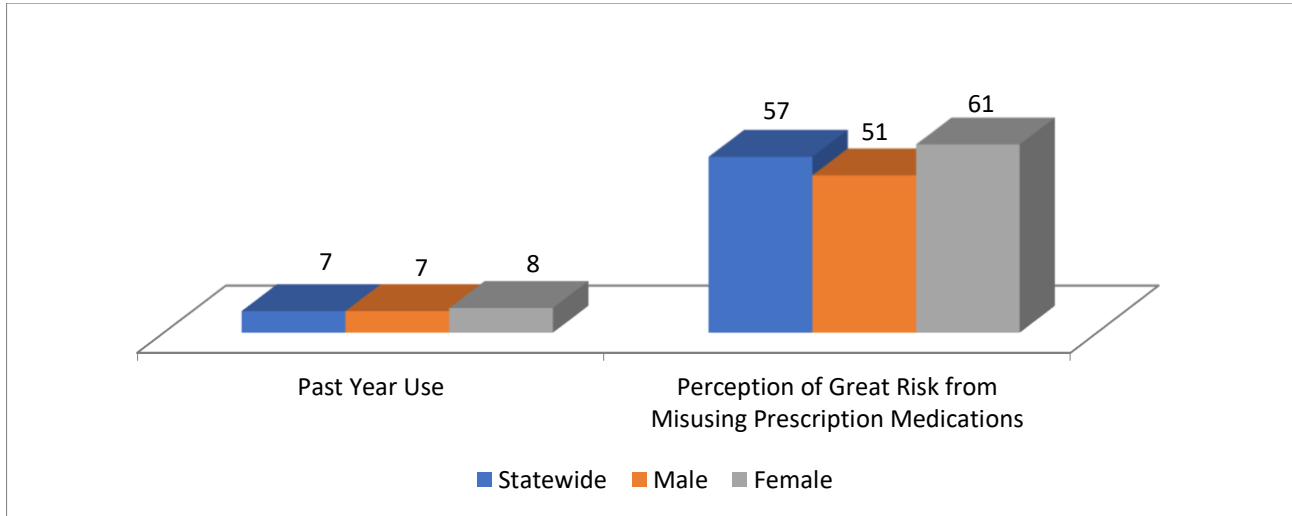
^a Prescription misuse is defined as the use of any prescription medications such as painkillers, stimulants (ADHD medications and diet pills), tranquilizers, sleeping pills in a way other than prescribed.

* Unless otherwise noted, all estimates are statistically significant at the p<.05 level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

2021 Delaware School Survey Prescription Misuse^a among 11th Grade Students (in percentages)



	Past Year Use	Perception of Great Risk from Prescription Misuse
Statewide	7	57
Male	7	51
Female	8	61

Figure 12: Medication Misuse and Perceptions of Great Risk, 11th grade

Notes:

^a Prescription misuse is defined as the use of any prescription medications such as painkillers, stimulants (ADHD medications and diet pills), tranquilizers, sleeping pills in a way other than prescribed.

* Unless otherwise noted, all estimates are statistically significant at the p<.05 level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

Monitoring the Future

National Trends in Past Month Prevalence: Prescription Misuse among 12th Grade Students (in percentages)

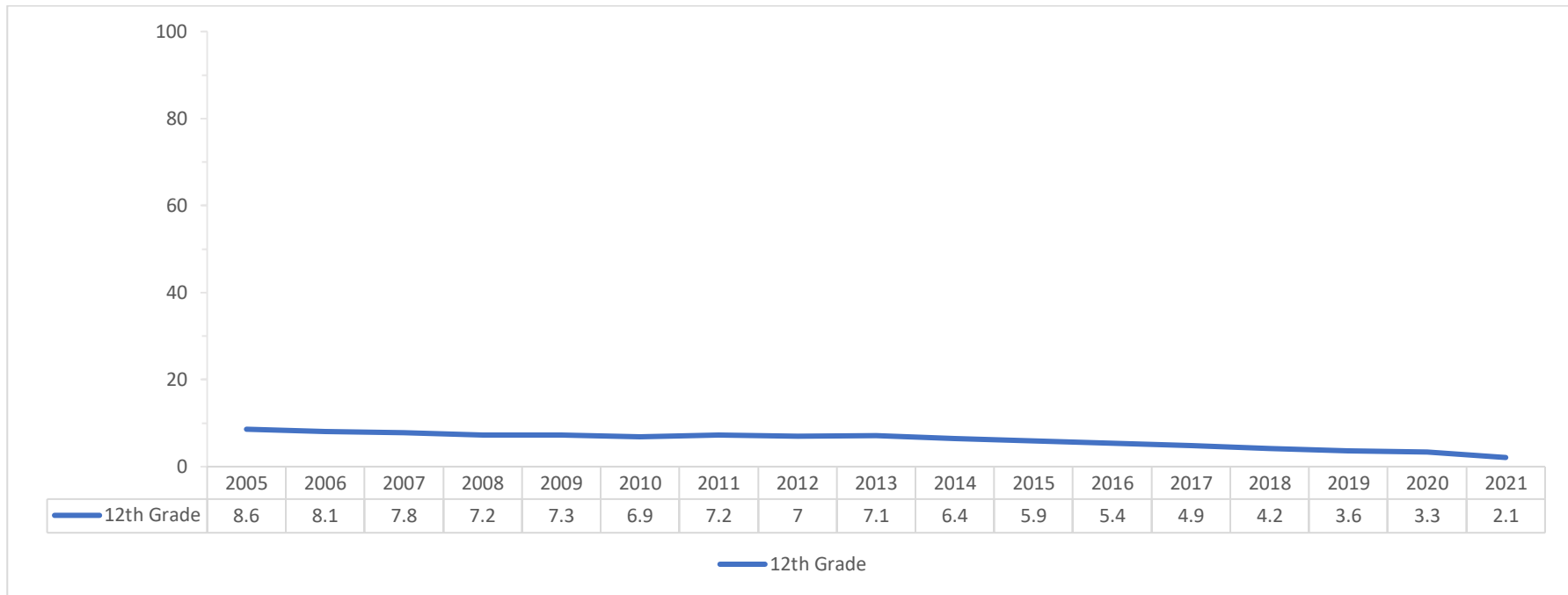


Figure 13: National trends in past month prevalence of prescription misuse, 12th grade

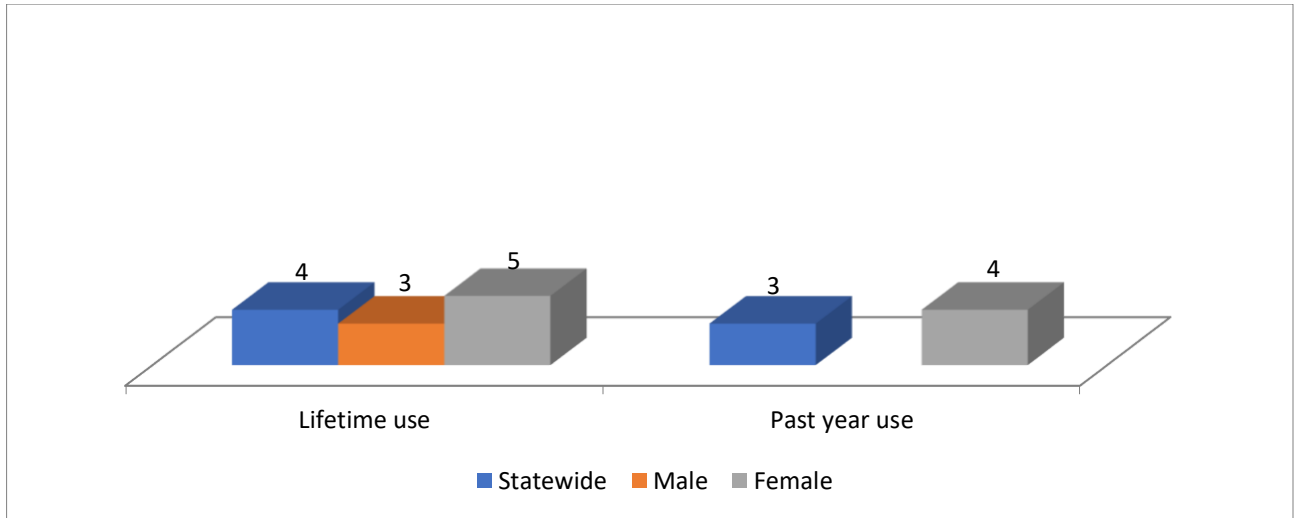
Note: According to the Monitoring the Future survey, prescription misuse includes use of any of the following: amphetamines, sedatives (barbiturates), narcotics other than heroin, or tranquilizers "...without a doctor telling you to use them."

Source: ["National Survey Results on Drug Use, 1975-2021." Monitoring the Future \(MTF\). University of Michigan.](#)

[Back to table of figures](#)

2021 Delaware School Survey

Over-the-Counter Drug Misuse among Delaware 8th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	4	3	-
Male	3	-	-
Female	5	4	-

Figure 14: Over-the-Counter Drug Misuse, 8th grade

Notes:

"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

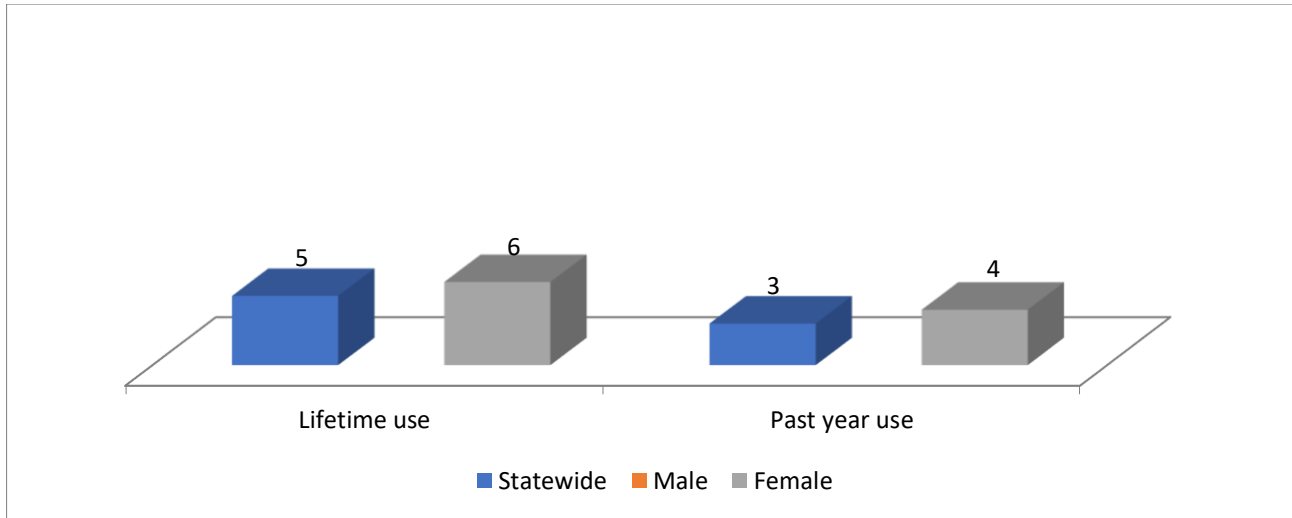
*Unless otherwise noted, all estimates are statistically significant at the p<.05 level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

2021 Delaware School Survey

Over-the-Counter Drug Misuse among Delaware 11th Graders (in percentages)



	Lifetime Use	Past Year Use	Past Month Use
Statewide	5	3	-
Male	-	-	-
Female	6	4	-

Figure 15: Over-the-Counter Drug Misuse, 11th grade

Notes:

"-" indicates that the prevalence estimate was not reported because the unweighted sample size represented fewer than 30 students.

*The relationship between sex and over the counter drug misuse was not statistically significant at the $p < .05$ level.

Source: [Center for Drug & Health Studies. \(2021\). Delaware School Survey: Secondary \[Annual Survey\]. University of Delaware.](#)

[Back to table of figures](#)

Delaware Treatment Episode Dataset (TEDS), Admissions, 2019

Treatment Admissions by Primary Substance at Admission*

Primary Substance at Admission	% of Admissions
Alcohol Only	10.7
Alcohol with Secondary Drug	8.2
Heroin	48.8
Other Opiates	7.1
Cocaine (smoked)	3.2
Cocaine (other route)	1.9
Marijuana	8.1
Amphetamines	0.7
Other Stimulants	0.0
Tranquilizers	0.4
Sedatives	0.1
Hallucinogens	0.3
PCP	0.3
Inhalants	0.0
Other/Unknown	10.2

Figure 16: Delaware treatment admissions by primary substance

*Source (Figures 106 – 109): [“Delaware TEDS admissions aged 12 years and older, by primary substance use and gender, age at admission, race, and ethnicity: Percent, 2019.”](#) Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by states to TEDS through July 1, 2020.

[Back to table of figures](#)

Delaware Treatment Episode Dataset (TEDS), Admissions, 2019

Primary Substance at Admission by Sex*

Primary Substance at Admission	% Male	% Female
All Admissions	64.1	35.9
Alcohol Only	73.4	26.6
Alcohol with Secondary Drug	73.2	26.8
Heroin	62.5	37.5
Other Opiates	54.7	45.3
Cocaine (smoked)	58.4	41.6
Cocaine (other route)	65.0	35.0
Marijuana	69.5	30.5
Amphetamines	63.6	36.4
Other Stimulants	100.0	0.0
Tranquilizers	46.6	53.4
Sedatives	33.3	66.7
Hallucinogens	77.1	22.9
PCP	70.4	29.6
Inhalants	80.0	20.0
Other/Unknown	59.1	40.6

Figure 17: Delaware treatment admissions by primary substance and sex

[Back to table of figures](#)

Delaware Treatment Episode Dataset (TEDS), Admissions, 2019

Primary Substance at Admission by Age Group (in percentages*)

Primary Substance at Admission	12-17	18-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66 ≥
All Admissions	0.5	2.4	10.5	20.8	18.1	14.6	8.4	8.1	7.6	5.3	2.3	1.3
Alcohol Only	0.0	0.3	4.5	7.4	11.1	11.3	9.7	13.8	17.1	13.7	6.5	4.7
Alcohol with Secondary Drug	0.1	1.6	7.6	12.8	13.2	14.5	11.4	14.3	13.5	7.0	3.2	0.8
Heroin	0.0	1.1	9.9	25.8	21.9	15.9	8.4	6.8	5.1	3.3	1.2	0.5
Other Opiates	0.0	1.0	100.1	22.1	23.5	15.8	6.9	5.3	6.6	4.8	1.9	1.9
Cocaine (smoked)	0.0	0.4	5.6	14.1	14.7	12.7	8.4	12.7	14.5	11.4	5.0	0.4
Cocaine (other route)	0.0	0.7	8.6	15.8	12.2	21.8	11.2	9.6	10.9	5.3	3.3	0.7
Marijuana	4.3	12.2	22.9	22.0	12.4	11.3	4.3	3.4	3.2	2.2	1.2	0.4
Amphetamines	0.0	3.4	7.6	14.4	23.7	13.6	8.5	15.3	5.9	5.9	1.7	0.0
Other Stimulants	0.0	0.0	0.0	0.0	0.0	0.0	50.0	50.0	0.0	0.0	0.0	0.0
Tranquilizers	0.0	5.2	12.1	31.0	12.1	13.8	6.9	8.6	3.4	5.2	1.7	0.0
Sedatives	0.0	0.0	22.2	33.3	0.0	22.2	22.2	0.0	0.0	0.0	0.0	0.0
Hallucinogens	0.0	0.0	12.5	31.3	16.7	20.8	6.3	8.3	2.1	2.1	0.0	0.0
PCP	0.0	0.0	1.9	18.5	37.0	27.8	5.6	5.6	1.9	0.0	1.9	0.0
Inhalants	0.0	0.0	0.0	0.0	20.0	80.0	0.0	0.0	0.0	0.0	0.0	0.0
Other/Unknown	1.4	5.3	14.4	18.6	13.8	11.9	8.8	7.2	6.8	6.1	3.1	2.7

Figure 18: Delaware treatment admissions by primary substance and age group

Primary Substance at Admission by Race and Ethnicity (in percentages)*

Primary Substance at Admission	White	Black or African-American	American Indian or Alaskan Native	Asian or Native Hawaiian or Other Pacific Islander	Unknown		Hispanic or Latino	Not Hispanic or Latino
All Admissions	67.2	26.6	0.6	2.0	3.6		6.0	92.2
Alcohol Only	72.4	21.8	0.8	2.2	2.8		6.9	92.7
Alcohol with Secondary Drug	61.8	31.1	0.9	1.6	4.5		4.0	94.4
Heroin	78.0	17.7	0.3	1.7	2.3		5.9	93.6
Other Opiates	65.8	29.3	0.4	2.0	2.5		5.6	93.5
Cocaine (smoked)	45.8	50.6	0.4	0.6	2.6		4.6	93.0
Cocaine (other route)	53.8	38.9	0.3	2.0	5.0		5.6	90.1
Marijuana	36.8	52.1	1.5	3.7	5.9		8.2	89.4
Amphetamines	86.4	10.2	0.8	0.0	2.5		0.0	98.3
Other Stimulants	100.0	0.0	0.0	0.0	0.0		0.0	100.0
Tranquilizers	62.1	27.6	0.0	5.9	3.4		6.9	89.7
Sedatives	77.8	11.1	0.0	0.0	11.1		0.0	100.0
Hallucinogens	62.5	31.3	2.1	2.1	2.1		6.3	93.8
PCP	3.7	85.2	3.7	5.6	1.9		9.3	90.7
Inhalants	100.0	0.0	0.0	0.0	0.0		0.0	100.0
Other/Unknown	49.5	38.1	1.0	2.9	8.5		6.7	84.6

Figure 19: Delaware treatment admissions by primary substance and race and ethnicity [Back to table of figures](#)

Drug Overdose Deaths in Delaware by County and Select Demographic Characteristics

2020 Drug Overdose Deaths by County (count)	
Kent	123
New Castle	50
Sussex	274
Total	447

	2016	2017	2018	2019	2020
	N=308	N=345	N=400	N=431	N=447
SEX:					
MALE	69%	69%	71%	72%	68%
FEMALE	31%	31%	29%	28%	32%
RACE:					
WHITE	87%	75%	81%	77%	77%
BLACK	13%	19%	15%	17%	19%

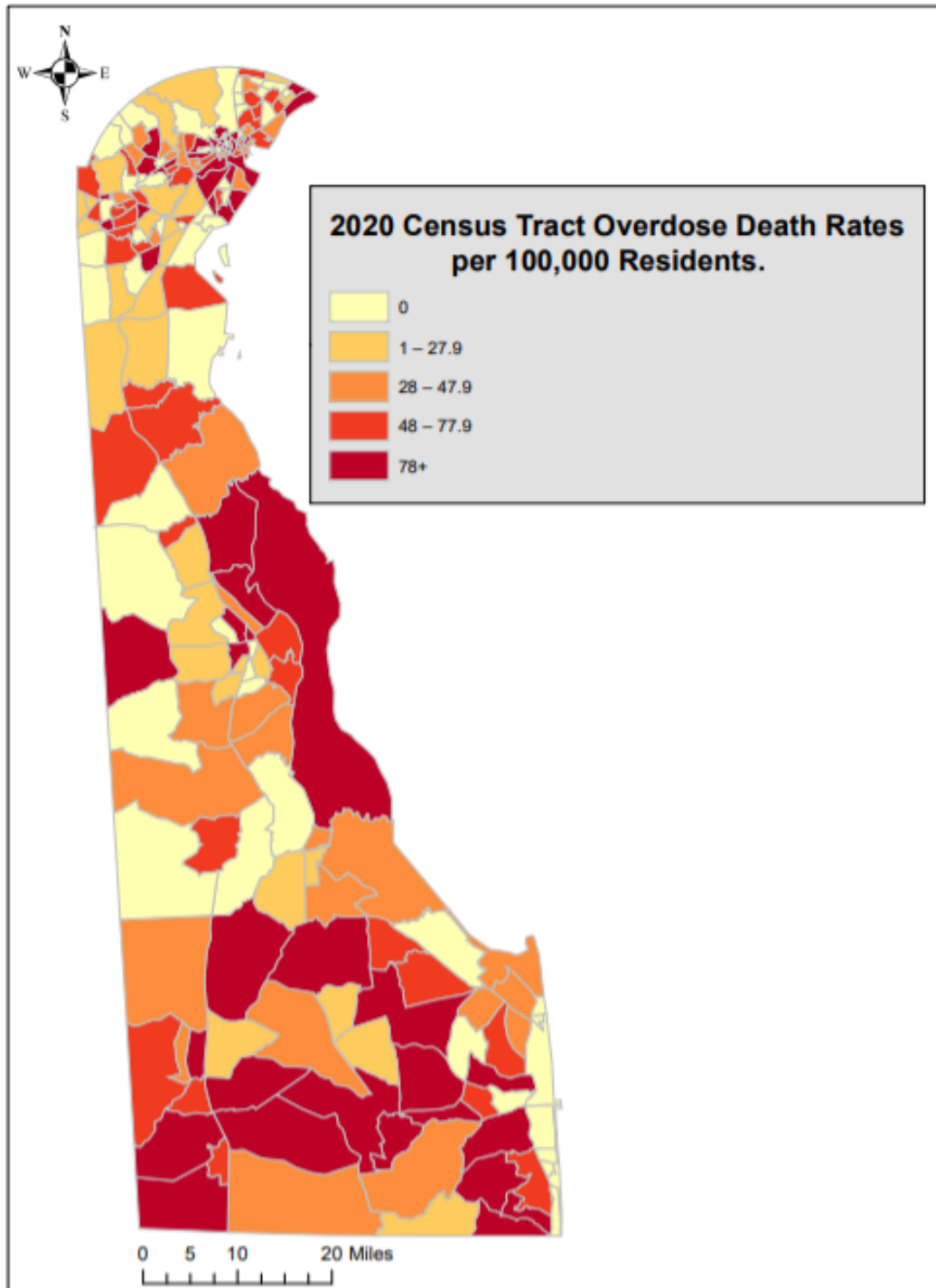
	2016	2017	2018	2019	2020
	N=308	N=345	N=400	N=431	N=447
HISPANIC	-	5%	4%	6%	4%
OTHER	-	1%	-	-	-
AGE:					
40 OR YOUNGER	42%	50%	51%	54%	46%
41-50	n/a	23%	22%	22%	23%
51 AND OLDER	n/a	27%	27%	24%	31%

Figure 20: Drug overdose deaths in Delaware by demographic

Source: Office of the Chief Medical Examiner, Division of Forensic Medicine, Department of Safety and Homeland Security, State of Delaware
Includes overdose deaths for opioids and other drugs.

[Back to table of figures](#)

2020 Delaware Census Tract Overdose Death Rates



Overdose death data was provided by the Delaware Department of Forensic Science.
2010 data from the US Census Bureau was used for age adjustments.
The Delaware Opioid Metric Intelligence Project (DOMIP) is funded by the NIJ.

Figure 21: Map of drug overdose deaths in Delaware by census tracts

Source: [Delaware Opioid Metric Intelligence Project \(DOMIP\)](#)

[Back to table of figures](#)

2. References

Other Illegal Drugs

- Delaware Department of Safety and Homeland Security, Division of Forensic Science. (2022). Division of Forensic Science 2021 annual report. Retrieved on September 5, 2022 from <https://forensics.delaware.gov/resources/contentFolder/pdfs/2021%20DFS%20Annual%20Report.pdf?cache=1654718076322>
- Friedman, J., Montero, F., Bourgois, P., Wahbi, R., Dye, D., Goodman-Meza, D. & Shover, C. (2022). Xylazine spreads across the US: A growing component of the increasingly synthetic and polysubstance overdose crisis. *Drug and Alcohol Dependence*, 233, April 2022.
- Hedegaard, H., Minino, AM., Spencer, M., & Warner, M. (2021). Drug overdose deaths in the United States, 1999-2020. NCHS Data Brief, no 428. Hyattsville, MD: National Center for Health Statistics. Retrieved on September 7, 2022 from https://www.cdc.gov/nchs/products/databriefs/db428.htm?utm_source=miragenews&utm_medium=miragenews&utm_campaign=news
- Hedegaard, H., Minino, AM., & Warner, M. (2021). Co-involvement of opioids in drug overdose deaths involving cocaine and psychostimulants. NCHS Data Brief, no 406. Hyattsville, MD: National Center for Health Statistics. Retrieved on September 7, 2022 from <https://www.cdc.gov/nchs/products/databriefs/db406.htm>
- McAward, A. (2021). Xylazine, an emerging adulterant. *American College of Emergency Physicians*. Retrieved on September 8, 2022 from <https://www.acep.org/tacticalem/newsroom/oct-2021/xylazine-an-emerging-adulterant/>
- National Institute on Drug Abuse. (2020). Synthetic Cannabinoids (K2/Spice) Drug Facts. Retrieved on September 2, 2022 from <https://nida.nih.gov/publications/drugfacts/synthetic-cannabinoids-k2spice>
- Substance Abuse and Mental Health Services Administration. (n.d.) [Table]. *Treatment Episode Data Set. Delaware TEDS admissions aged 12 years and older, by primary substance use and gender, age at admission, race, and ethnicity: Percent, 2019*. Retrieved September 22, 2022 from <https://www.dasis.samhsa.gov/webt/newmapv1.htm#>

Data Sources

Data Instrument	Most Recent Data	Trend Range
Delaware's Annual Traffic Statistical Report	2021	-
Delaware Behavioral Risk Factor Surveillance System (BRFSS)	2020	-
Delaware Division of Forensic Science Annual Report	2021	2019 - 2021
Delaware Online/NewsJournal Gun Violence Database	2022	2017 - 2022
Delaware Prescription Monitoring Program (PMP)	2020	2012- 2020
Delaware School Survey (DSS) – 5 th grade	2021	1999 - 2021
8 th and 11 th grades	2021	1999 - 2021
Delaware Youth Risk Behavior Survey (YRBS) – High School	2017	1999 - 2017
Delaware Youth Risk Behavior Survey (YRBS) – Middle School	2019	1999 - 2019
DOMIP (Delaware Opioid Metric Intelligence Program)	2020	-
Household Pulse Survey	2022	2021 - 2022
Monitoring the Future – 8 th , 10 th , and 12 th grades	2021	1999 - 2021
National Youth Risk Behavior Survey (YRBS) – National	2019	1999 - 2019
National Survey of Children's Health (NSCH)	2020	2016 - 2020

Data Instrument	Most Recent Data	Trend Range
National Survey on Drug Use and Health (NSDUH)	2019-2020	2002 - 2020
Delaware Infants with Prenatal Substance Exposure	2020	2015-2020
Treatment Admissions Data	2019	-

In addition to the data sources for the figures and tables in the 2022 report, the following data sources are also cited throughout the narrative:

- America’s Health Rankings
- American Psychological Association
- Bureau of Labor Statistics
- Center for Drug and Health Studies, University of Delaware
- Crisis Text Line
- Delaware Department of Education
- Delaware Department of Health and Social Services, Division of Public Health, My Healthy Community
- Delaware Drug Monitoring Initiative
- Delaware Household Health Survey
- Drug Enforcement Administration
- Gallup
- KIDS COUNT in Delaware
- KFF
- National Academies of Sciences, Engineering, and Medicine
- National Center for Health Statistics
- National Conference of State Legislatures
- National Institute on Alcohol Abuse and Alcoholism
- National Institute on Drug Abuse
- National Institutes of Health
- National Institute on Mental Health
- Rapid Assessment of Pandemic Impact on Development – Early Childhood
- State of Delaware Economic Development Office
- The Trevor Project
- The Williams Institute
- U.S. Bureau of Labor Statistics
- U.S. Census Bureau
- U.S. Centers for Disease Control and Prevention (Alcohol-Related Disease Impact [ARDI] Dashboard; Death Rate Maps & Graphs; State Overdose Death Reporting System [SUDORS])
- U.S. Health Resources and Services Administration