



## 2020 RHODE ISLAND YOUNG ADULT SURVEY

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# 2020 RHODE ISLAND YOUNG ADULT SURVEY

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) Partnerships for Success grant by the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH)

PFS II Project Director, Karen Flora

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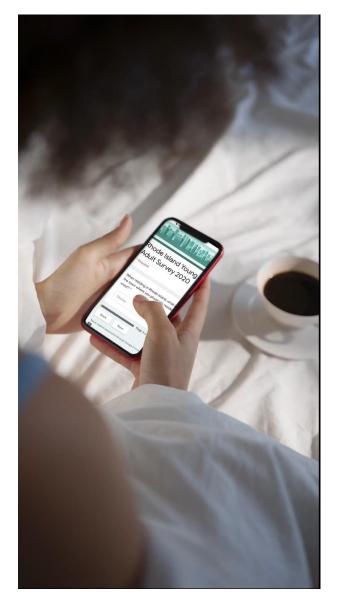




## WHAT IS THE RIYAS?

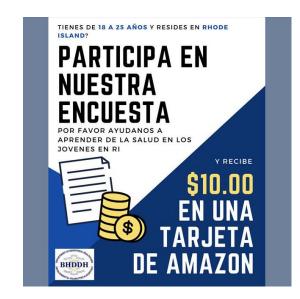
- The Rhode Island Young Adult Survey is a behavioral survey administered to adults aged 18-25 years, residing in RI for at least part of the year
- Recruitment and survey were offered in both English and Spanish
- Recruitment included paid Instagram ads (e.g. images and video) targeted to 18-25 year olds georeferenced in Rhode Island
- Recruitment was supplemented by informal posts to RI community Facebook pages as well as informal e-mail recruitment to three institutions of higher education in RI
- A total of N = 546 surveys were completed for 2020 administration, May through October 2020





## INSTAGRAM ADS











## WHY IS THE RIYAS SPECIAL?

- Young adults aged 18-25 years have some of the riskiest behaviors in terms of substance use, and tend to have high rates of mental illness
- Young adulthood is also a developmental transition period in which long-term health outcomes and long-term behaviors are established
- To our knowledge, the Rhode Island Young Adult Survey is the largest behavioral survey to date for young adults residing in RI for at least part of the year; also includes visiting college students unlike other surveillance systems
- Prior behavioral estimates from this population have used much smaller samples for annual surveillance: Behavioral Risk Factor Surveillance System (BRFSS; N<300) and National Survey on Drug Use and Health (NSDUH; N<100)</li>





## HOW DO WE USE THE RIYAS?

- Provides a snapshot of the state of substance use and mental health issues among young adults residing in Rhode Island
- Helps guide policy and programming related to young adult:
  - Problematic substance use
  - Risk and protective factors for substance use
  - Substance use consequences
  - Mental health burden
  - Adverse childhood experiences
- Findings provide insights that, when combined with context and other data sources, can be used to help in decision-making about types of resources and where resources should be allocated



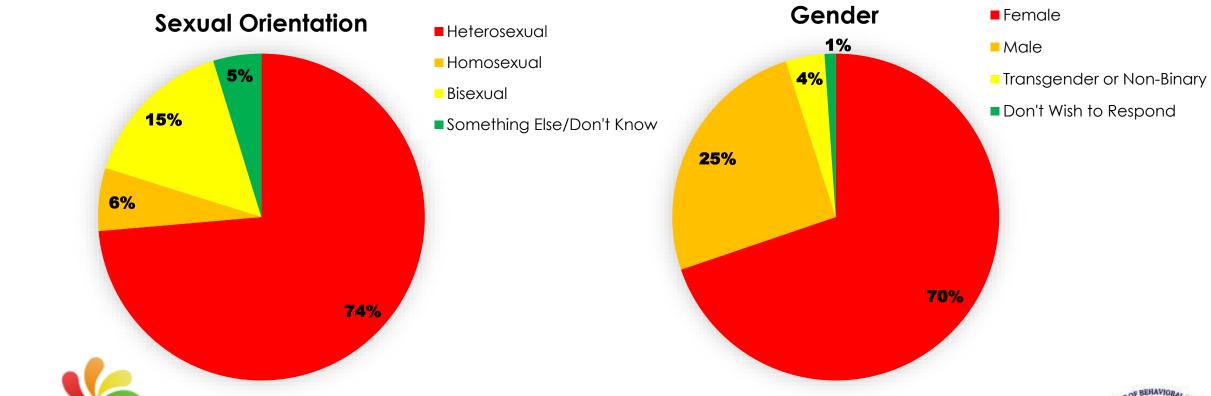
## WHAT DATA DO WE COLLECT?

- **Demographics:** Gender, sexual orientation, region of residence, age, race/ethnicity, social ladder, living situation, employment, Greek life, student status
- Alcohol: Consumption, frequency, binge, problems, source, fake ID, ease of fake ID use, riding or driving, advertising, perception of harm
- Vaping: Consumption, frequency, brand, device, flavor, source, additional nicotine products, perception of harm, consumption in social network
- Marijuana: Consumption, frequency, riding or driving, source, primary mode, device, brand, perception of harm, consumption in social network
- Other Drugs: Heroin, OTC, Rx consumption, perception of harm, consumption in social network
- Mental Health: Anxiety symptoms, depression symptoms, depression diagnosis, social/emotional support, life satisfaction, general health, consider suicide, plan suicide, attempt suicide, adverse childhood experiences

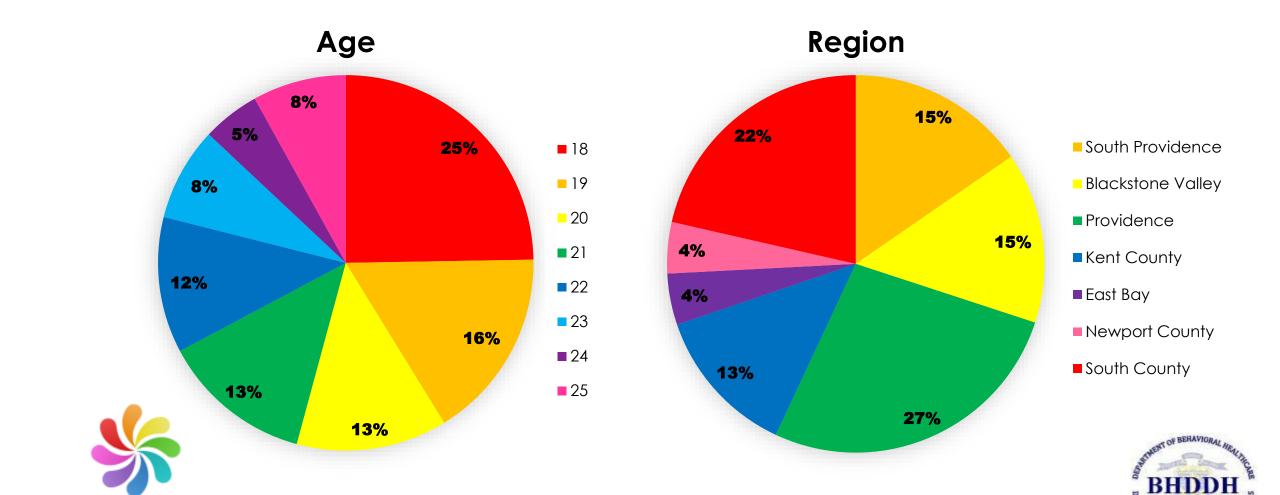
# DEMOGRAPHICS

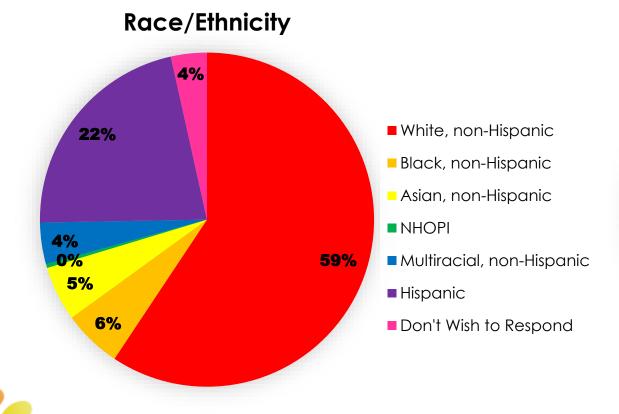




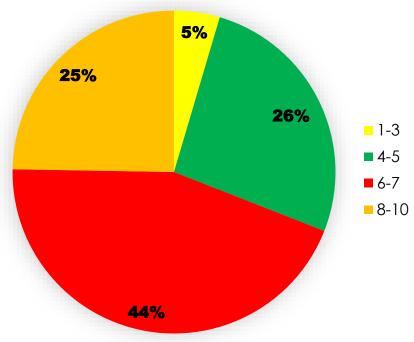






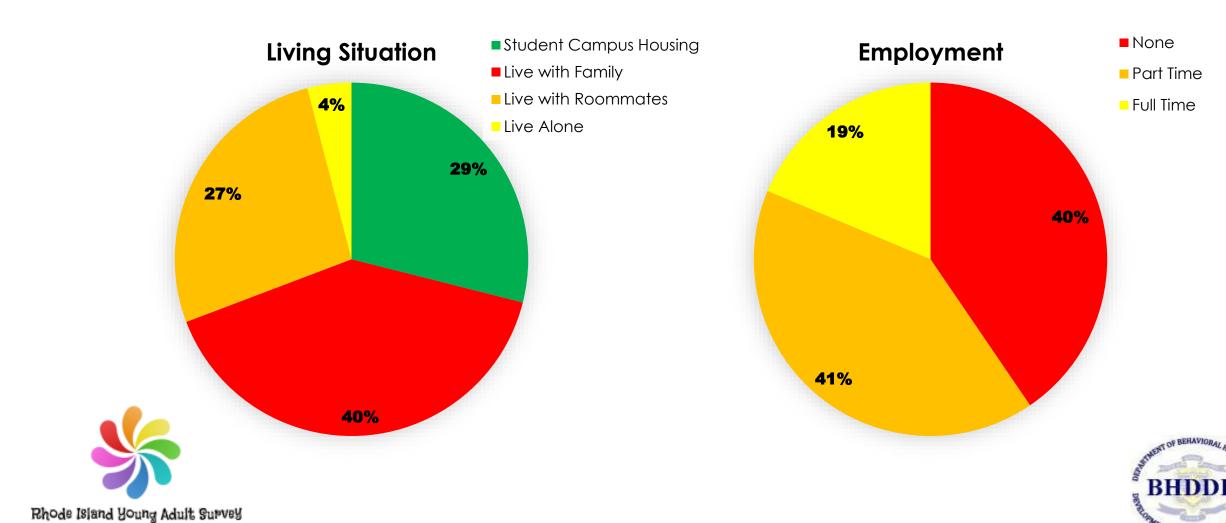


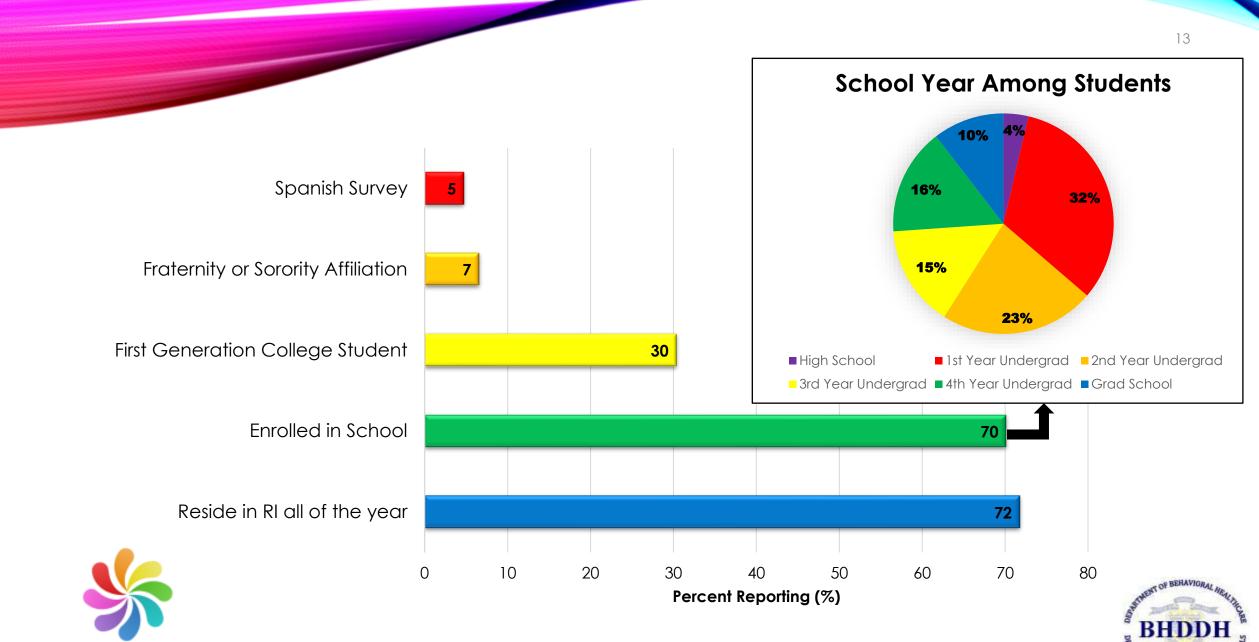
## Social Ladder



**NOTE:** For social ladder, 1 is "Worst off" and 10 is "Best off"





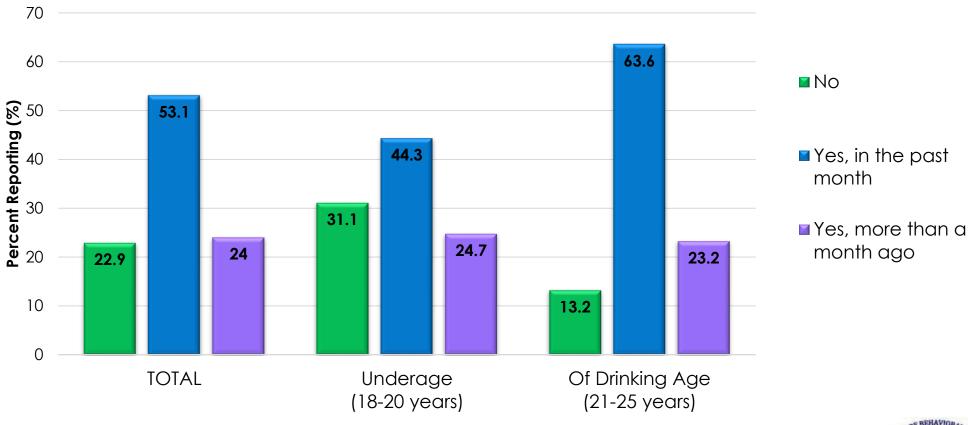


# ALCOHOL





## **Alcohol Consumption**

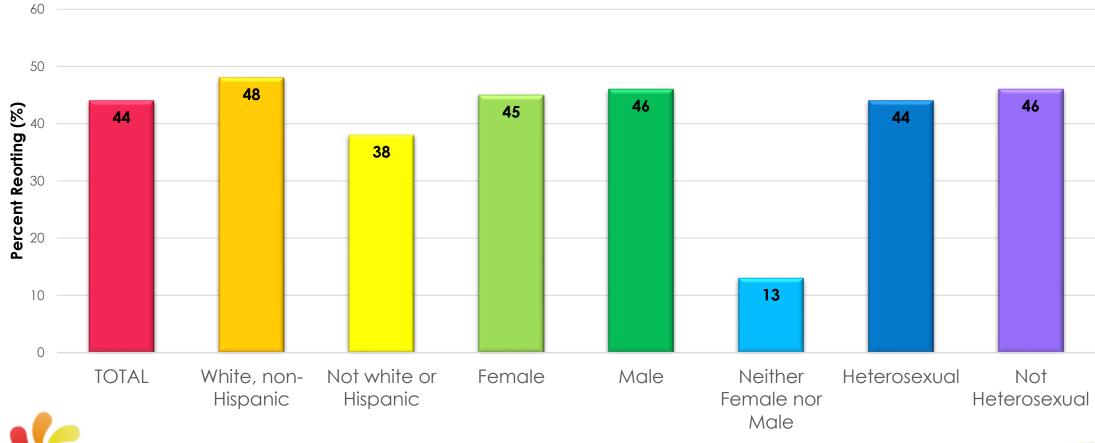




**NOTE:** Underage young adults were less likely to have ever drank alcohol than those of drinking age (P<0.001)



## Current Underage Drinking (18-20 year olds)

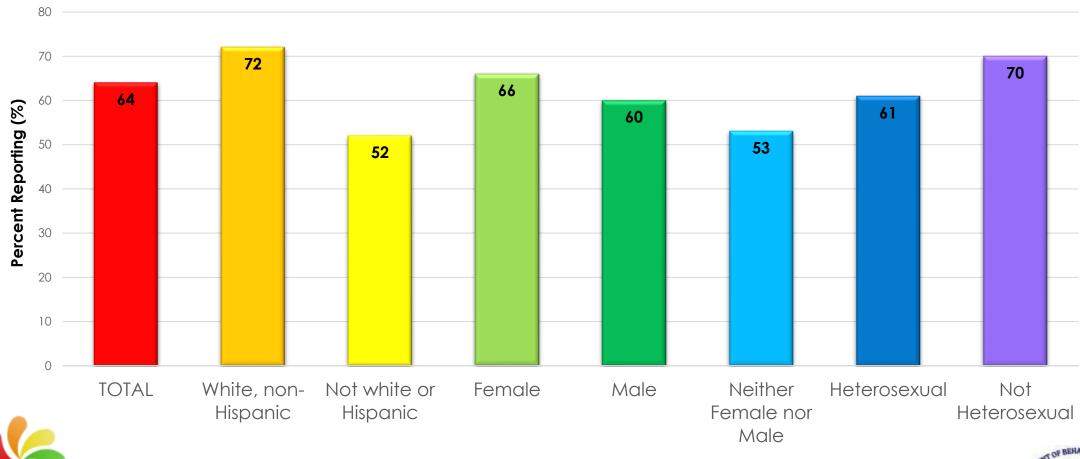




**NOTE:** No significant differences in underage drinking by race/ethnicity, gender, or sexual orientation.



## Current Drinking (21-25 year olds)

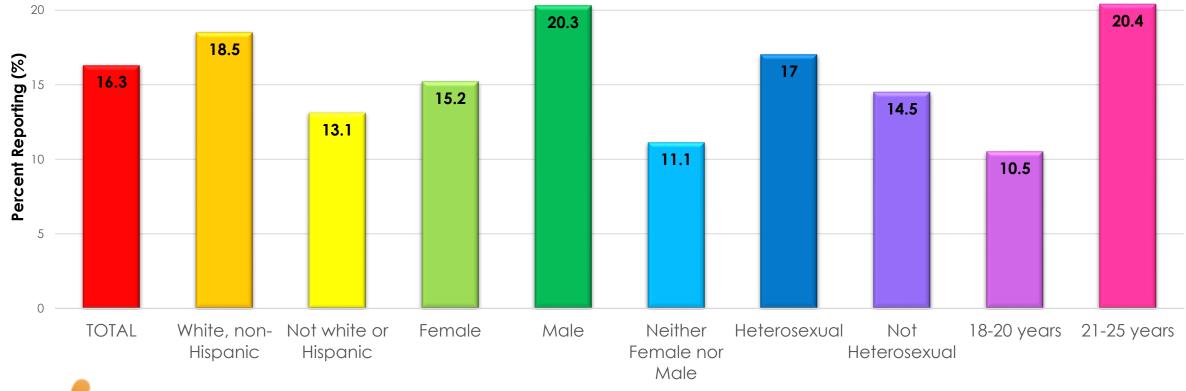




**NOTE:** Current drinking is significantly different by race/ethnicity (p=0.001). No significant differences in current drinking by gender or sexual orientation.



## **Harmful Drinking**

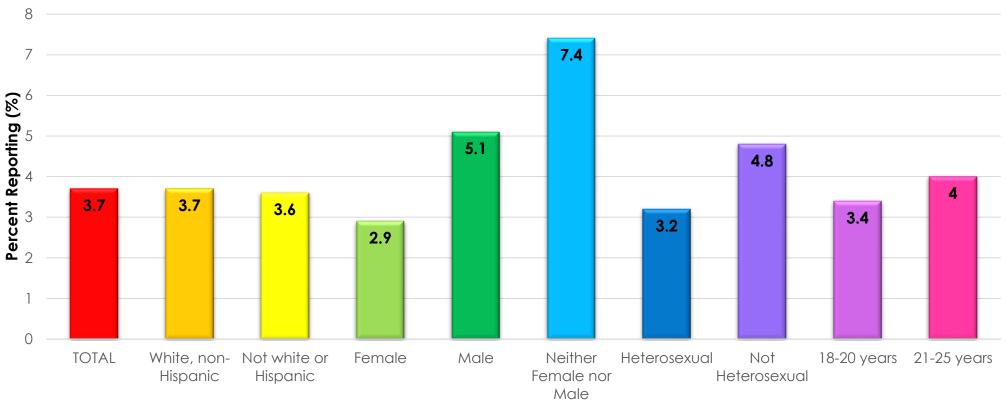




**NOTE:** AUDIT<sup>1</sup> scores of 8+ were used to define harmful drinking. Those of drinking age were more likely to engage in harmful drinking (P=0.017). Differences in harmful drinking by race/ethnicity were marginally significant (p=0.097). There were not significant differences by gender or sexual orientation.



## **Alcohol Dependence**

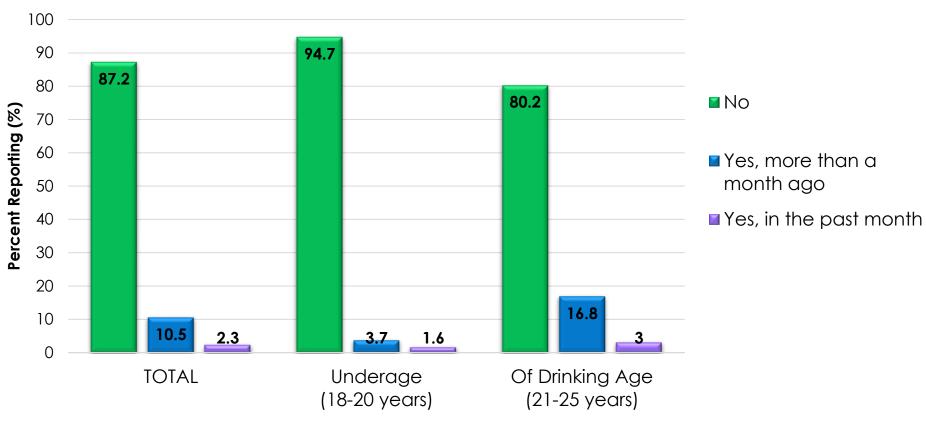




**NOTE:** AUDIT<sup>1</sup> scores 15+ were used to define alcohol dependence which may underestimate prevalence for females. There were no significant differences in alcohol dependence by race/ethnicity, gender, sexual orientation, or underage status.



### Drinking and Driving Among Drinkers, N=421

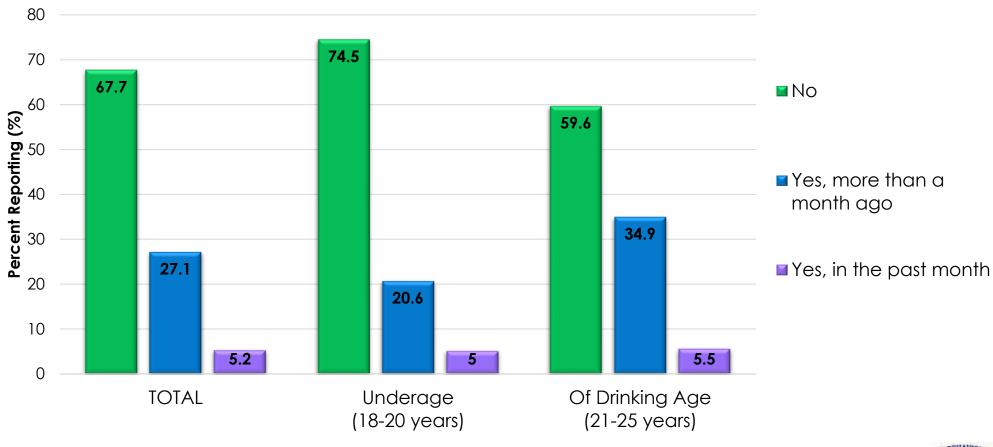




**NOTE:** Underage young adults were less likely to ever drink and drive (P<0.001).



## Riding with a Drinking Driver

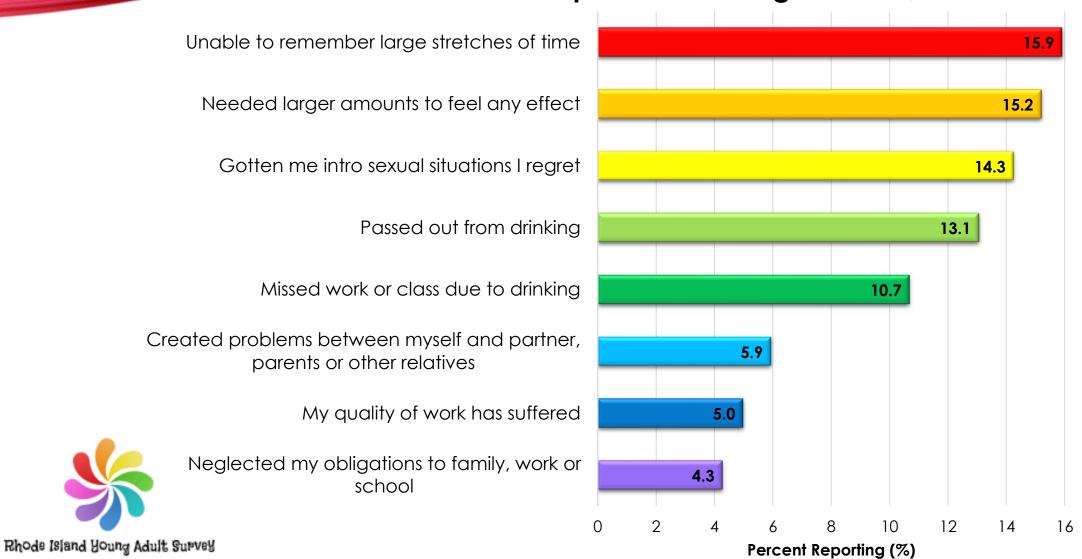




**NOTE:** Underage young adults were less likely to have ever ridden with a drinking driver (P<0.001).

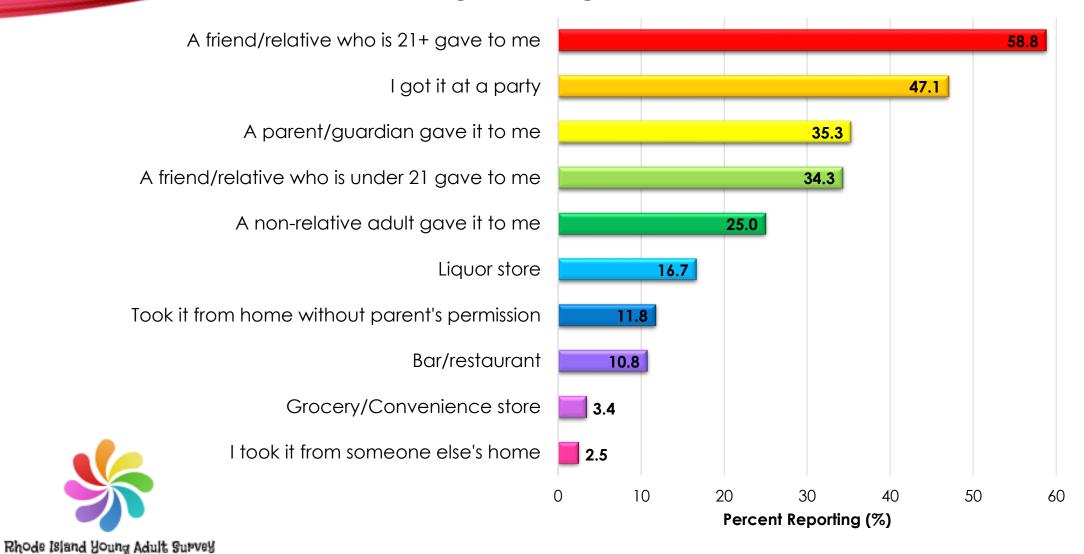


## Alcohol Consequences Among Drinkers, N=421





## Source of Alcohol Among Underage Drinkers, N=204





## Alcohol Marketing Exposure in the Past 30 Days

Seen pictures/videos of friends/family with alcohol on social media

Viewed televised alcohol ad

Noticed sponsorship of events by alcohol companies

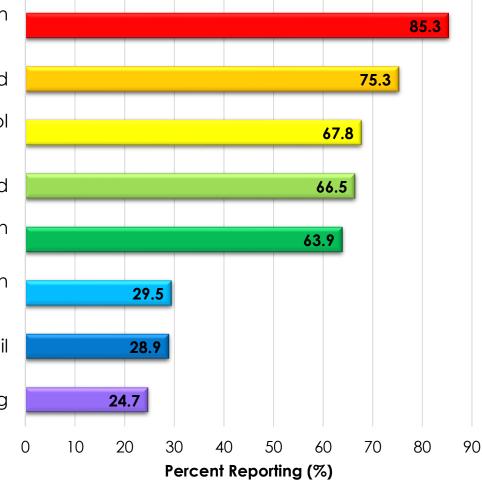
† Viewed website with alcohol ad

Viewed posts/stories by alcohol brand on social media

† Posted videos of yourself with alcohol on social media

†Received promotional mail/email

† Looked at website for alcohol/drinking

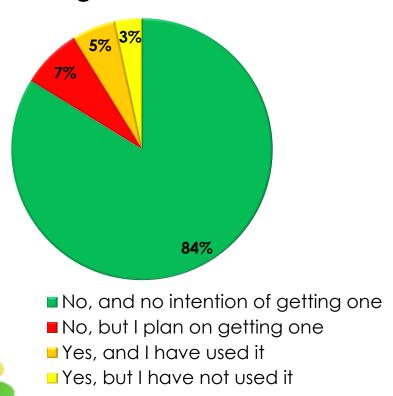




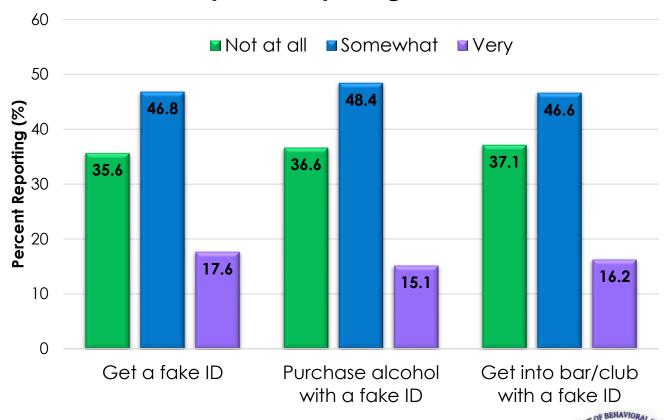
**NOTE:** † Underage young adults were significantly less likely to have these alcohol marketing exposures



## Have a Fake ID Among Underage Young Adults, N=296

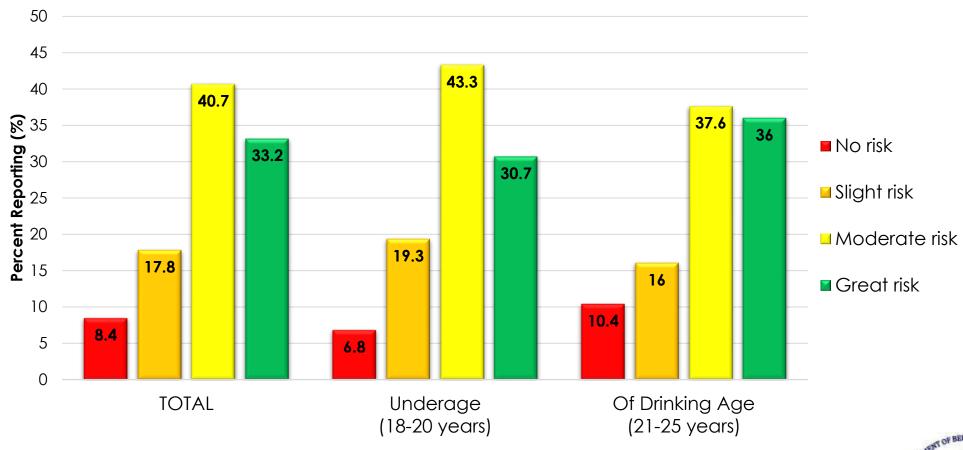


#### How easy is it for young adults to . . .



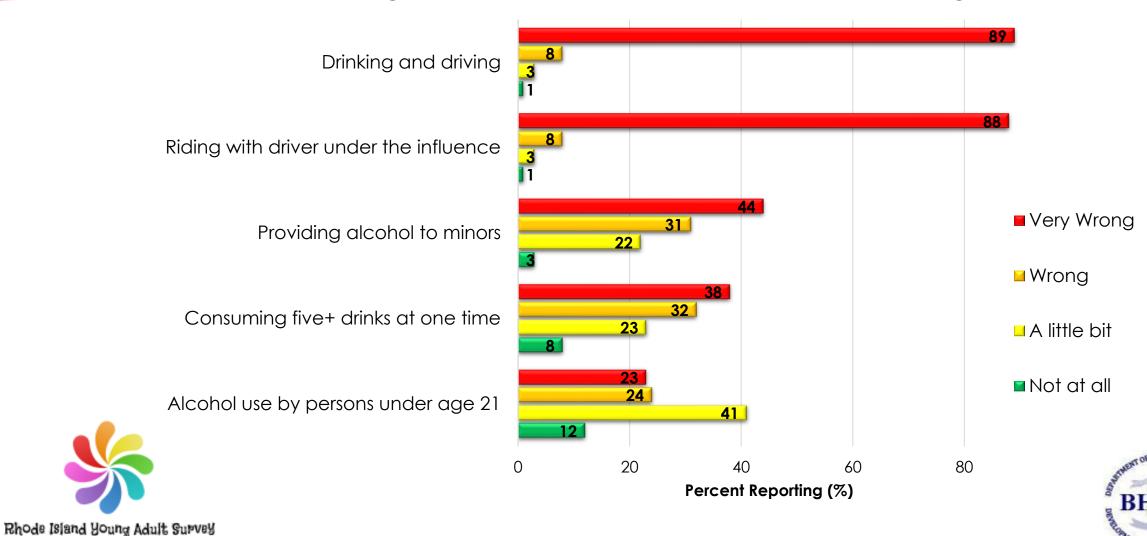


## Perception of Harm from Binge Drinking Once or Twice a Week

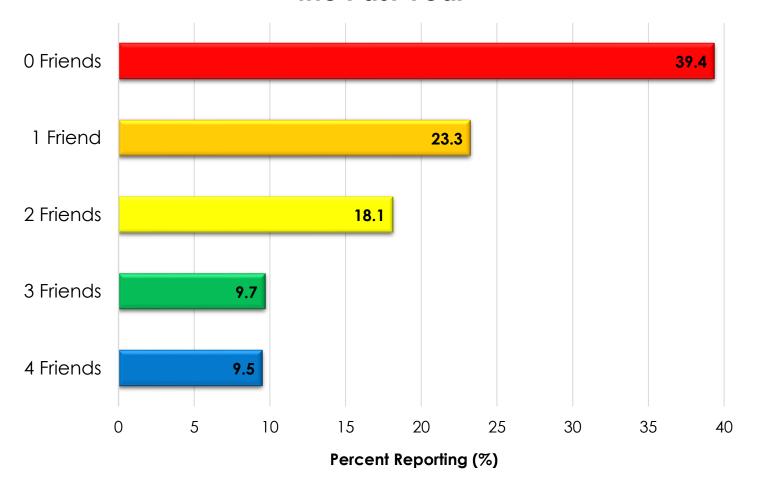




## How Wrong Do Adults in Your Family Think the Following are?



## Number of 4 Best Friends Who Binge Drank in the Past Year





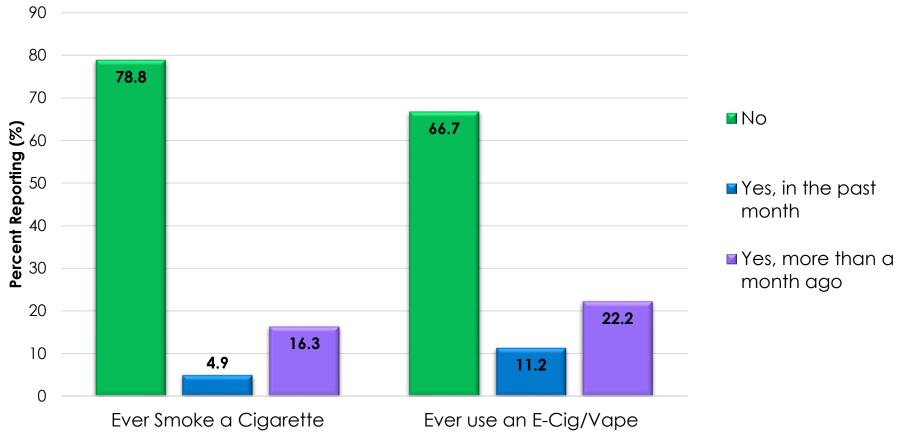


# TOBACCO & VAPING





## **Smoking and Vaping**

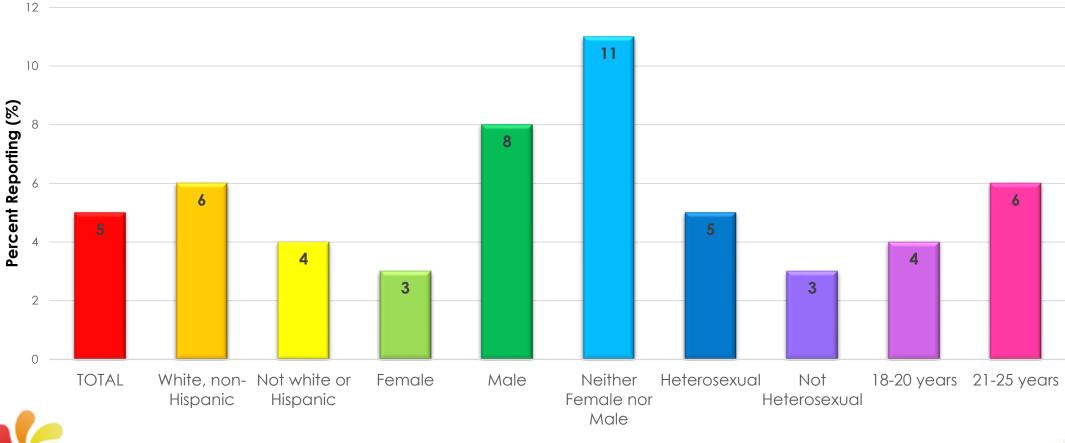




**NOTE:** Underage young adults were less likely to have ever smoked a cigarette (P<0.001).



### **Current Smoking**

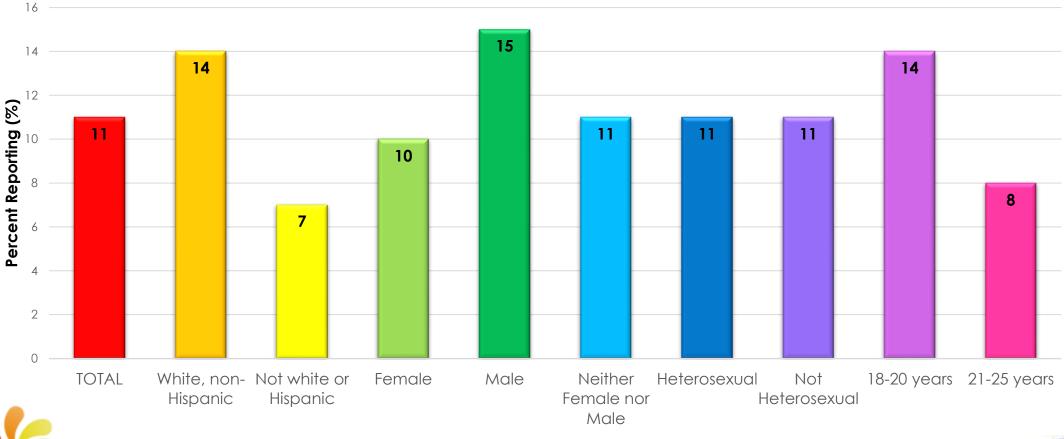




**NOTE:** Current (past month) smoking was significantly different by gender (p=0.034), but there were no significant differences by race/ethnicity, sexual orientation, or underage status.



### **Current Vaping**

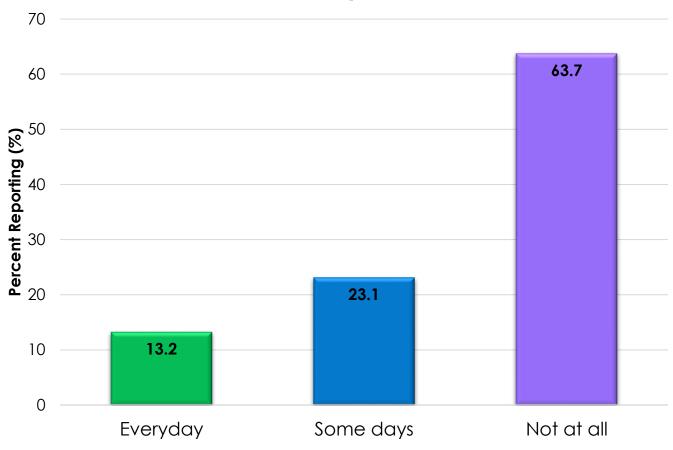




**NOTE:** Current (past month) vaping was significantly different by race/ethnicity (p=0.016) and underage status (p=0.015), but there were no significant differences by gender or sexual orientation.



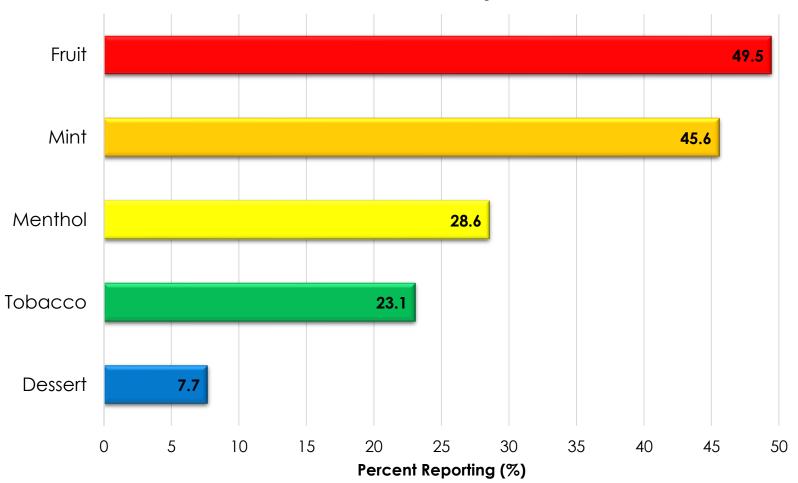
## Frequency of Vaping Among Those Who Have Ever Vaped, N=182







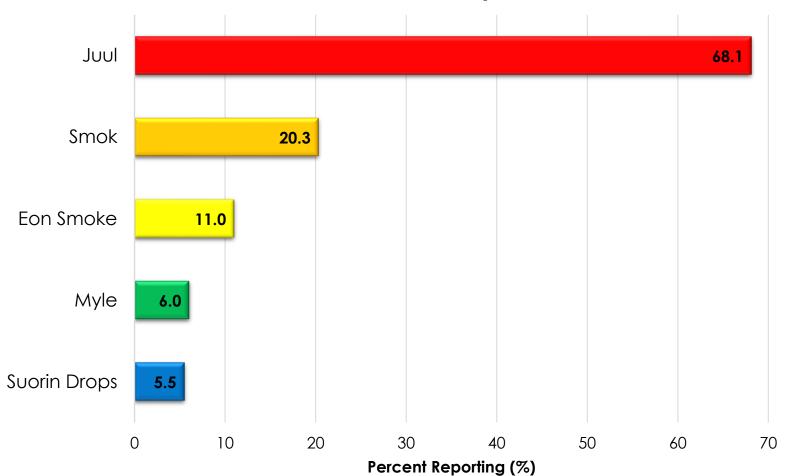
## Vape Flavors Used in Past 6 Months Among Those Who Ever Vaped, N=182







## Vape Brands Used in Past 6 Months Among Those Who Ever Vaped, N=182







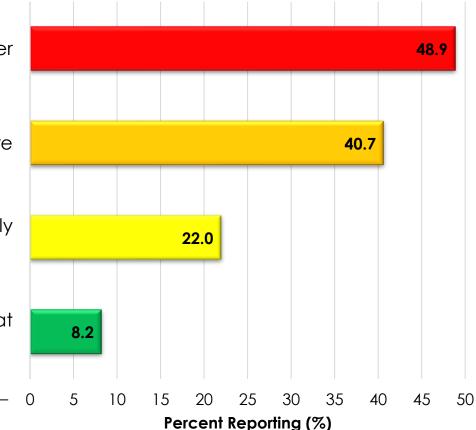
## Source of Vape Products in Past 6 Months Among Those Who Ever Vaped, N=182

†Friend or Family Member

Bought in gas station or convenience store

Bought in vape store or other store that only sells e-cigarettes

+ Purchased from someone selling on Snapchat or other social media

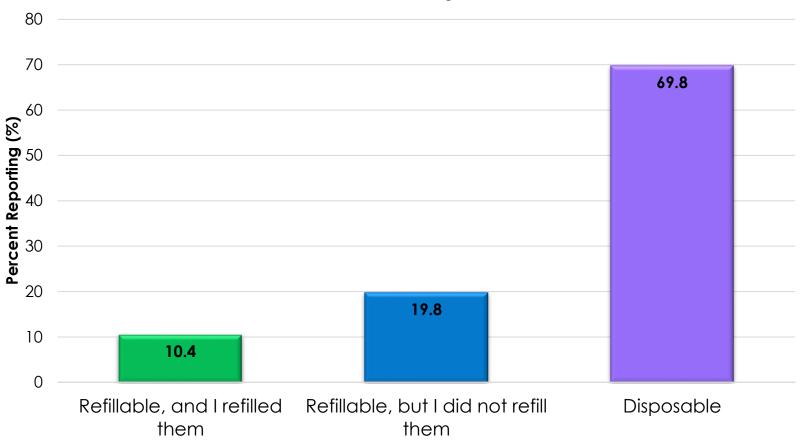




**NOTE:** † Underage young adults were significantly more likely to have these sources of vape products



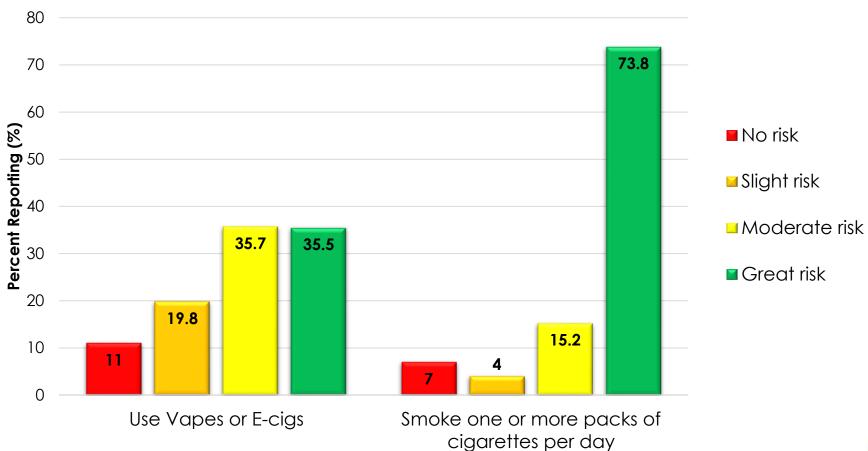
#### Vape Mechanism Used in Past 6 Months Among Those Who Ever Vaped, N=182







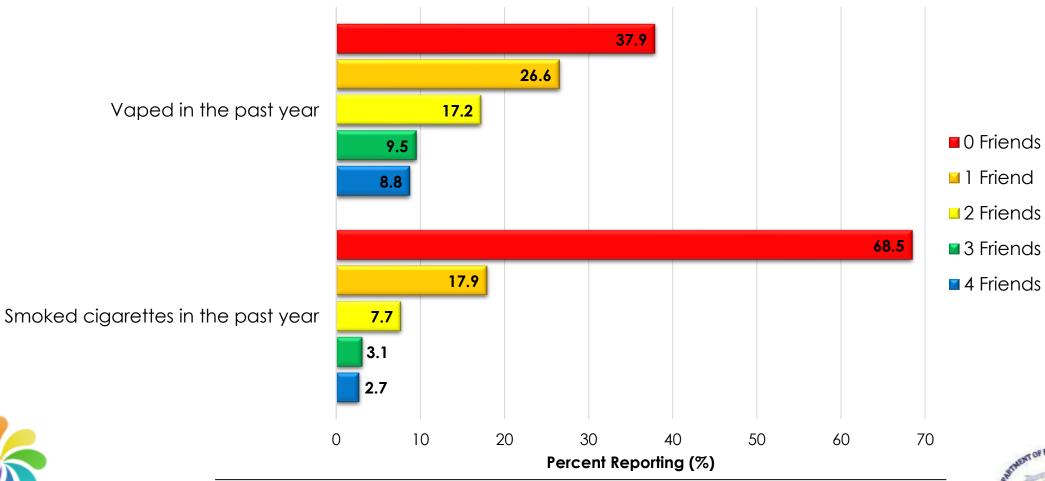
#### Perceptions of Harm from Vaping and Smoking







#### Number of 4 Best Friends Who . . .







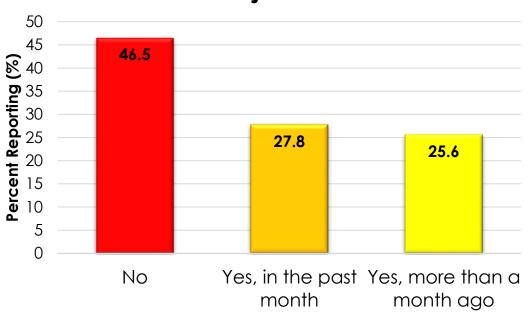


# MARIJUANA

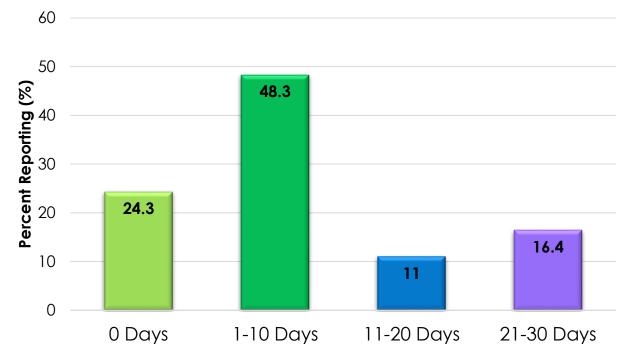




#### Marijuana Use



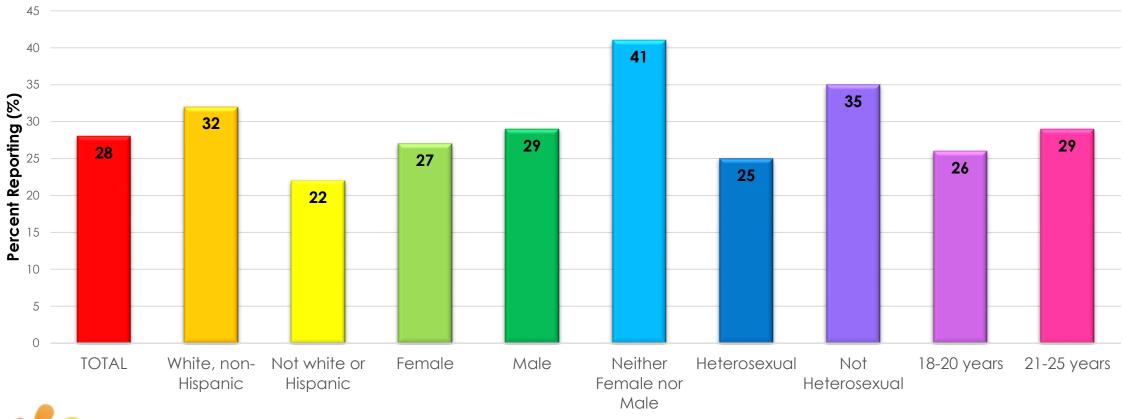
# Number of Days Using Marijuana in an Average Month Among Users, N=292







#### **Current Marijuana Use**

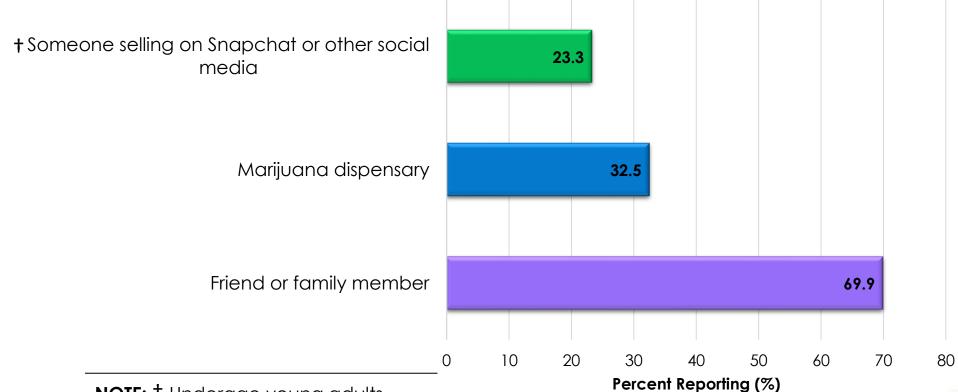




**NOTE:** Current (past month) marijuana use was significantly different by race/ethnicity (p=0.009) and sexual orientation (p=0.022), but there were no significant differences by gender or underage status.



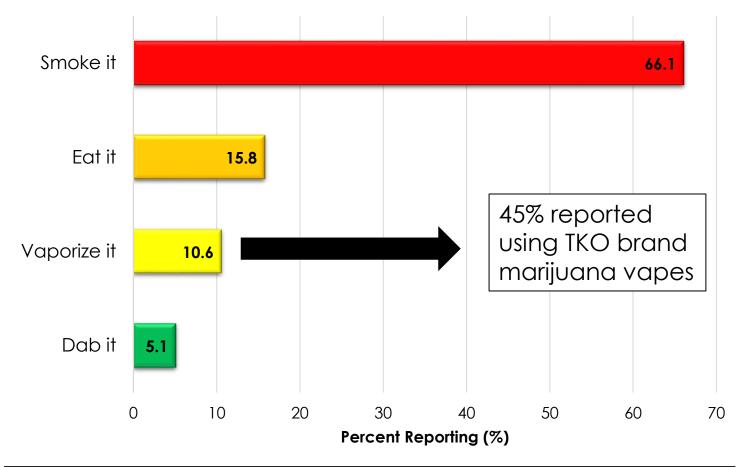
#### Source of Marijuana in Past 6 Months Among Users, N=292





**NOTE:** † Underage young adults were significantly more likely to have this source of marijuana

### Most Recent Mode of Using Marijuana Among Users, N=292

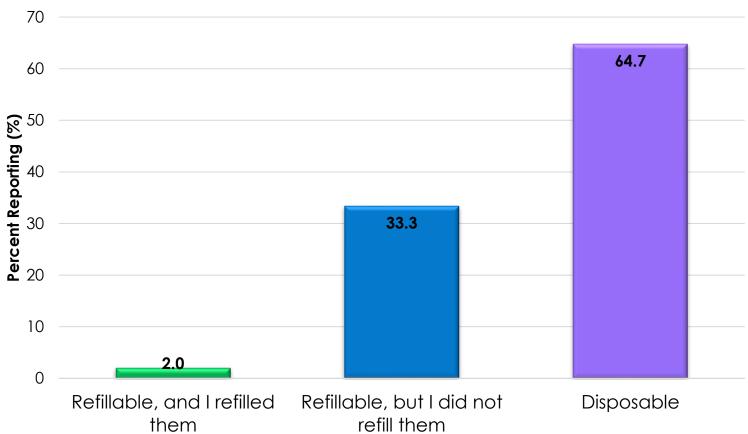




**NOTE:** Underage young adults were significantly more likely to report using TKO brand marijuana vapes (P=0.018).



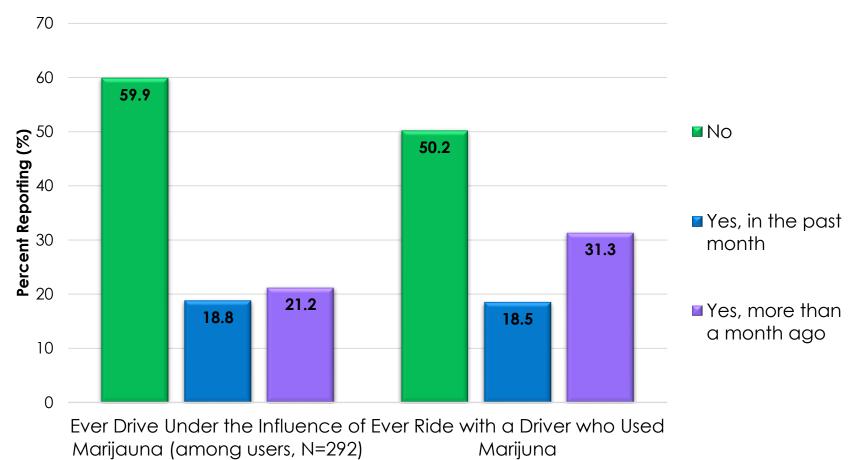
## Marijuana Vape Mechanism Among Those Who Vape Marijuana, N=51







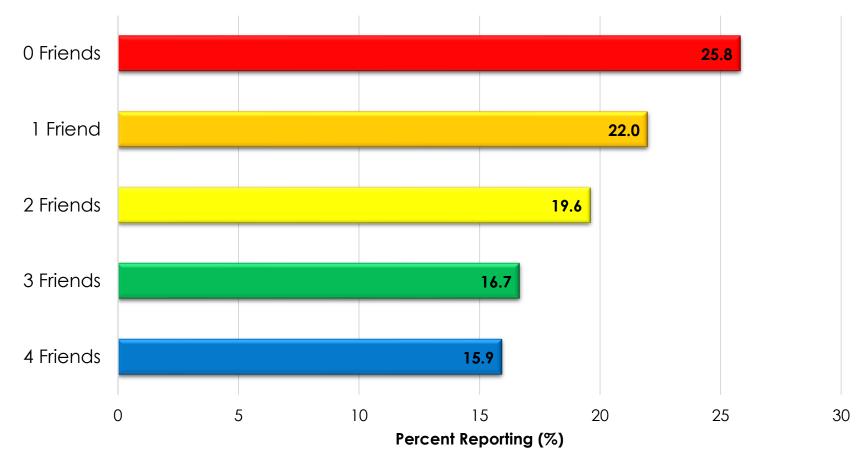
#### Marijuana Use and Driving







# Number of 4 Best Friends Who Used Marijuana in the Past Year

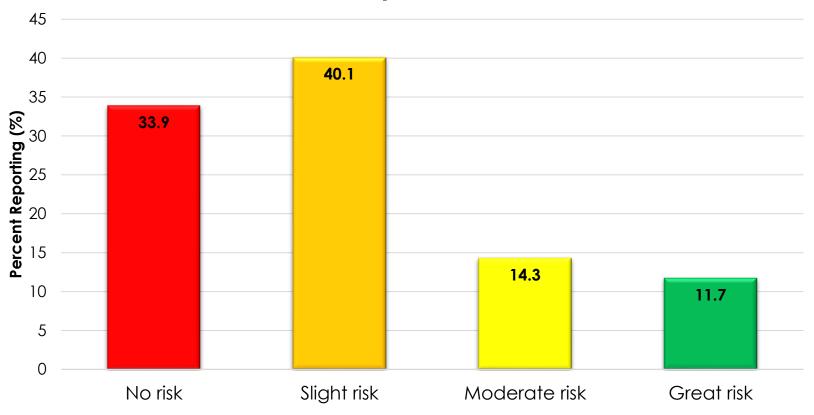




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**NOTE:** Underage young adults had more friends who used marijuana in the past year (P=0.02).

# Perception of Harm from Using Marijuana Once or Twice per Week





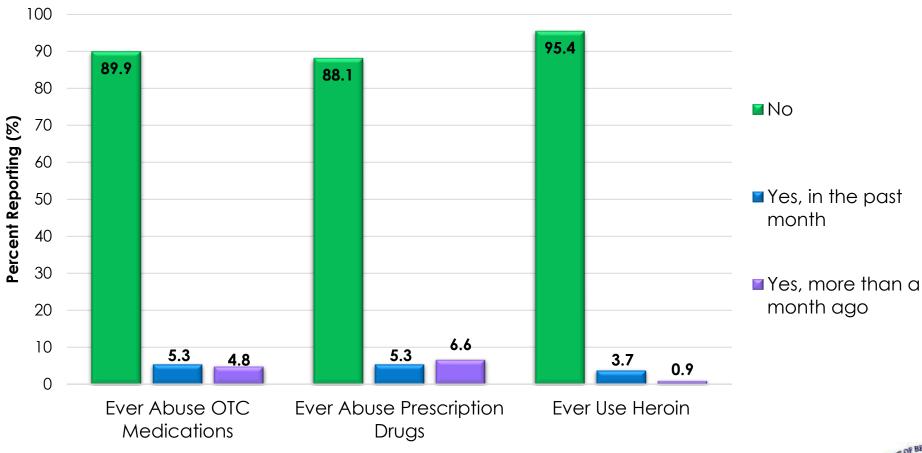


# OTHER DRUGS





## Other Drug Use

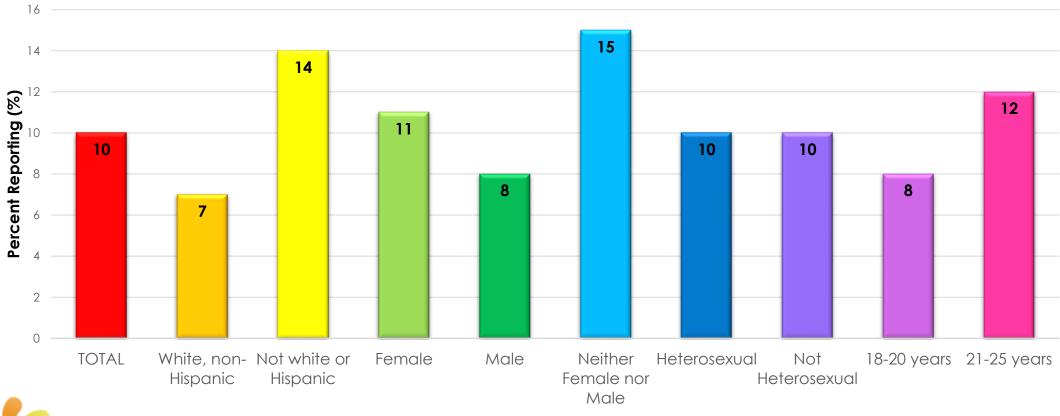




**NOTE:** Underage young adults were less likely to ever abuse prescription drugs (P=0.001).



#### **Ever Abuse OTC Medications**





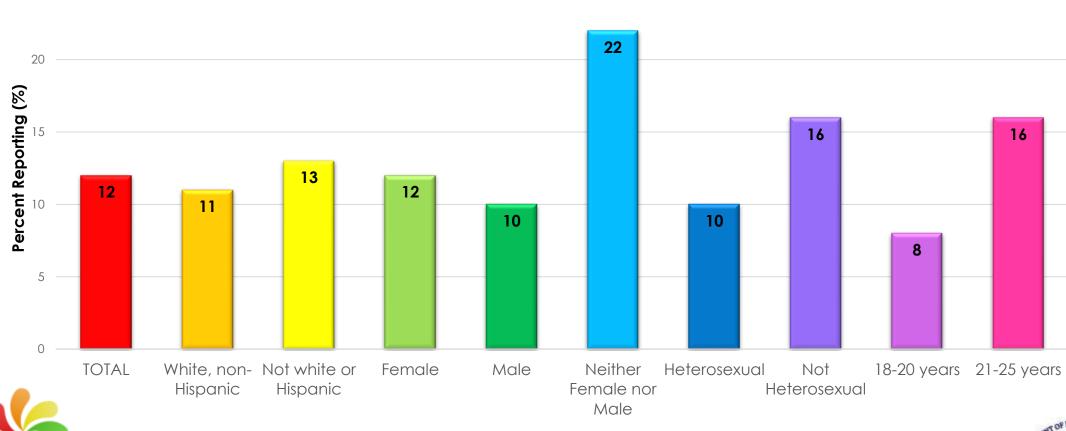
**NOTE:** Over-the-counter (OTC) medication abuse was significantly different by race/ethnicity (p=0.011), but not significantly different by gender, sexual orientation, or underage status.

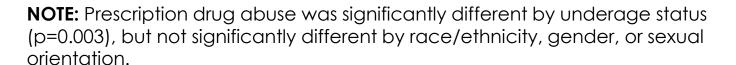


## **Ever Abuse Prescription Drugs**

25

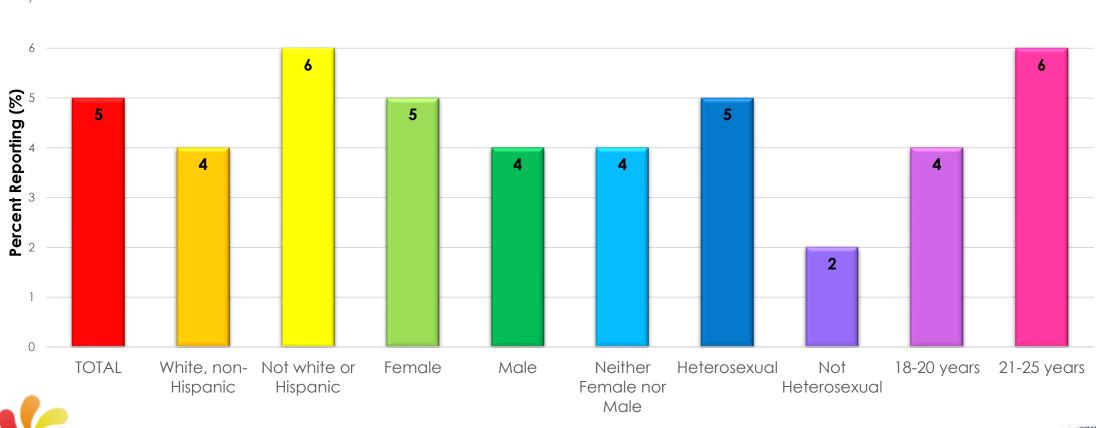
Rhode Island Young Adult Survey

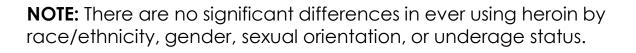






#### **Ever Use Heroin**

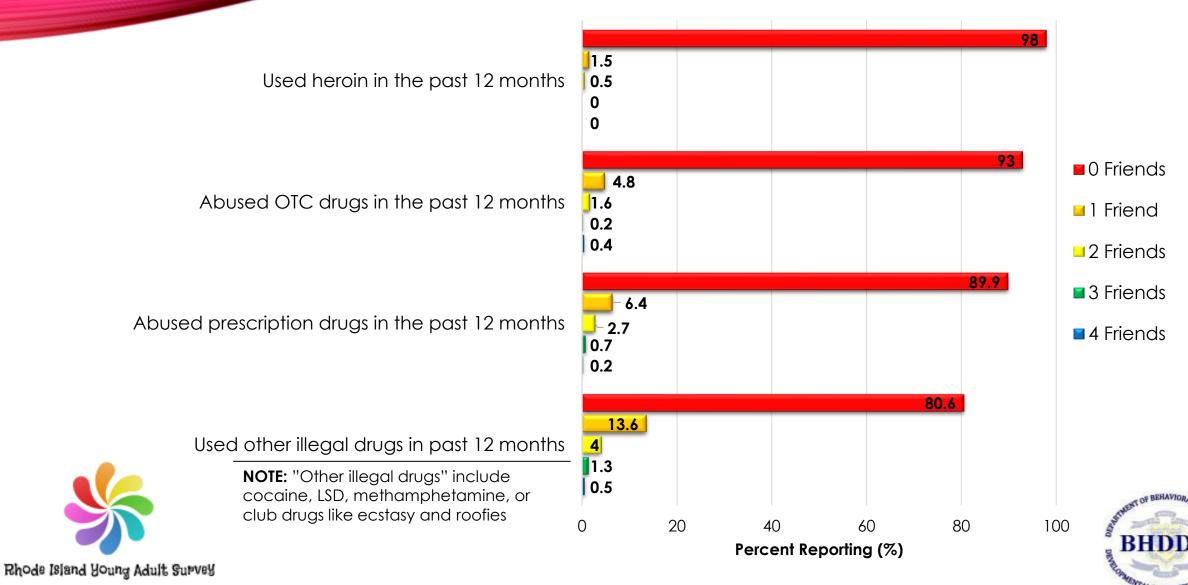




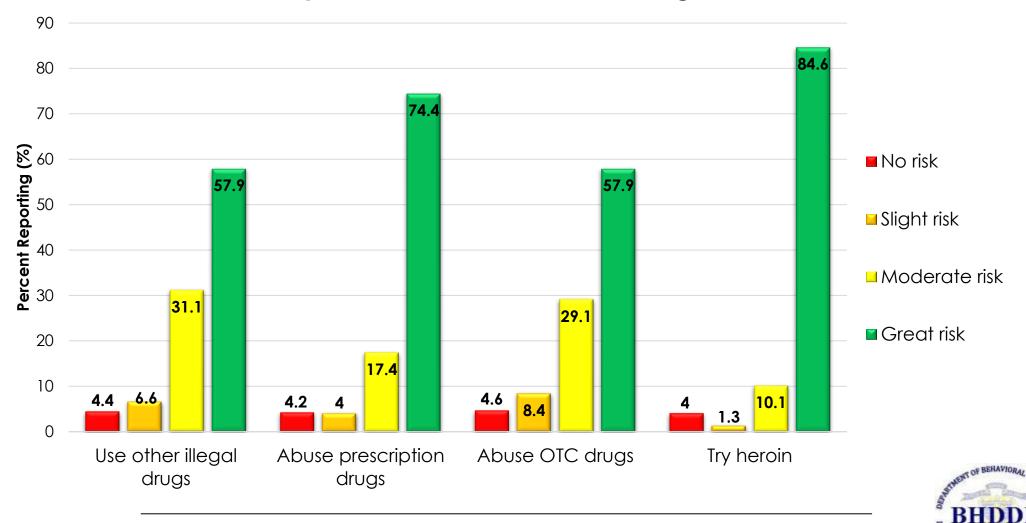
Rhode Island Young Adult Survey



#### Number of 4 Best Friends Who. . .



#### Perception of Harm from Other Drugs





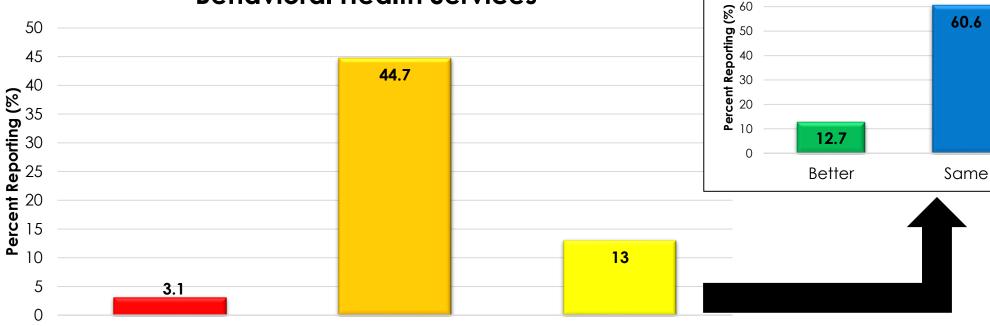
Rhode Island Young Adult Survey

26.8

Worse

How Quality of Telehealth Services Compared to Traditional, N=71

#### **Behavioral Health Services**



Referred to services for Interest in accessing Telehealth services for substance abuse in past telehealth services for substance use or mental 12 months substance use or mental health in past 4 weeks health

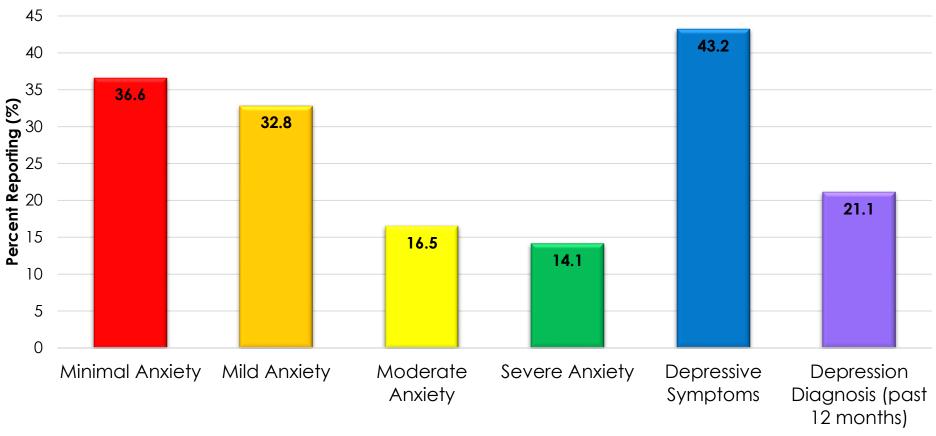


# MENTAL HEALTH





#### **Mental Health Outcomes**

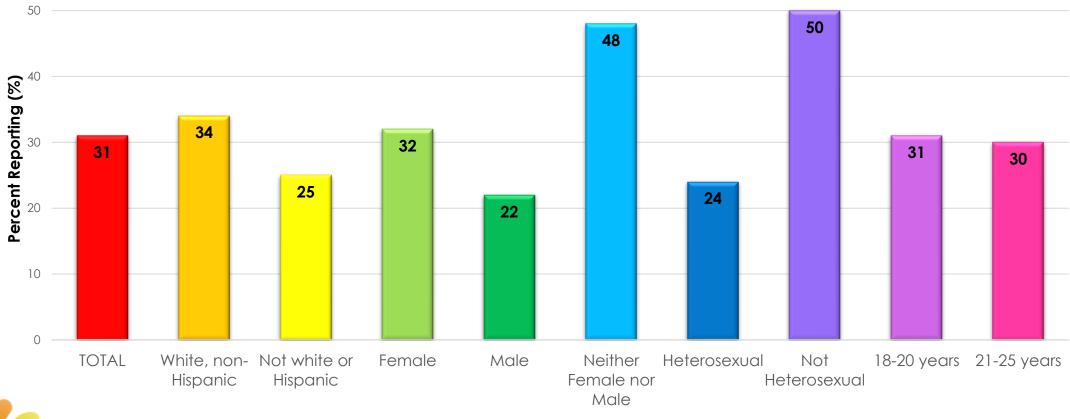




**NOTE:** Anxiety outcomes were assessed with the GAD-7<sup>2</sup> with scores 0-4 for minimal anxiety, 5-9 for mild anxiety, 10-14 for moderate anxiety, and 15-21 for severe anxiety. Depressive symptoms were assessed using the CES-D-10<sup>3</sup>, with a cut-off score of 10+.



## **Anxiety**

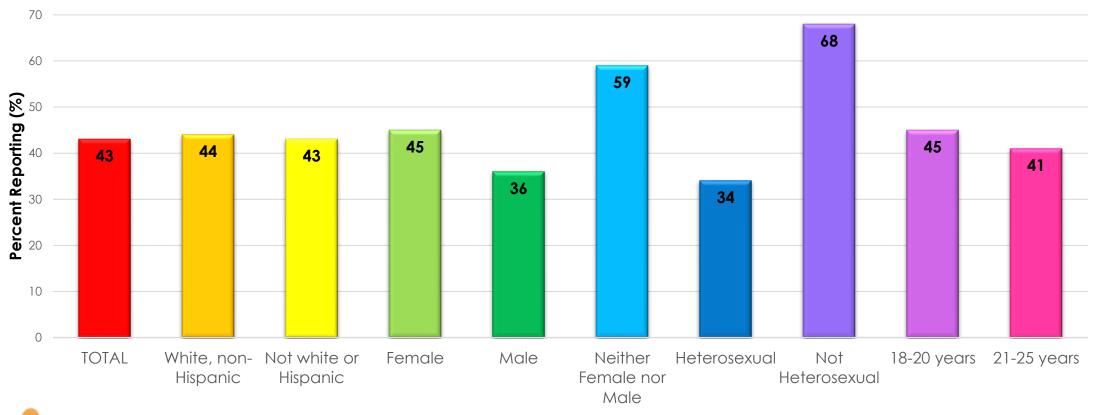




**NOTE:** Anxiety was assessed with the GAD- $7^2$  with a cut-off score of 10+. Anxiety is significantly different by race/ethnicity (p=0.017), gender (p=0.013), sexual orientation (p<0001), but not significantly different by underage status.



### **Depressive Symptoms**

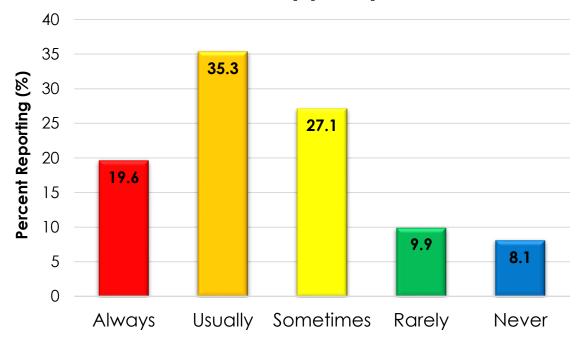




**NOTE:** Depressive symptoms were assessed using the CES-D- $10^3$ , with a cut-off score of 10+. Depressive symptom differences by sexual orientation were significant (p<0.001), and by gender were marginally significant (p=0.053), but no significant differences by race/ethnicity or underage status.



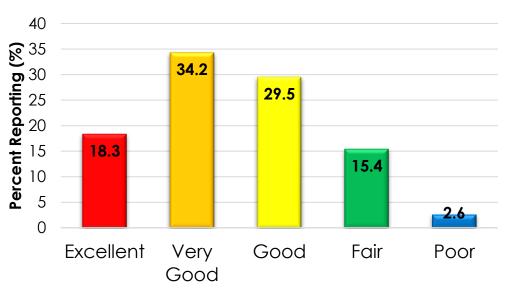
# How often do you get the social and emotional support you need?



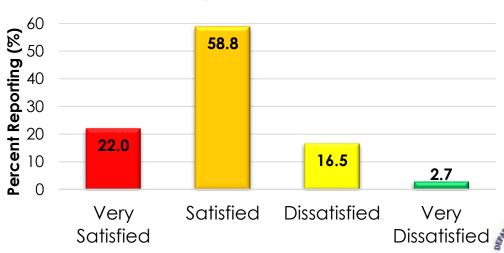


Rhode Island Young Adult Survey

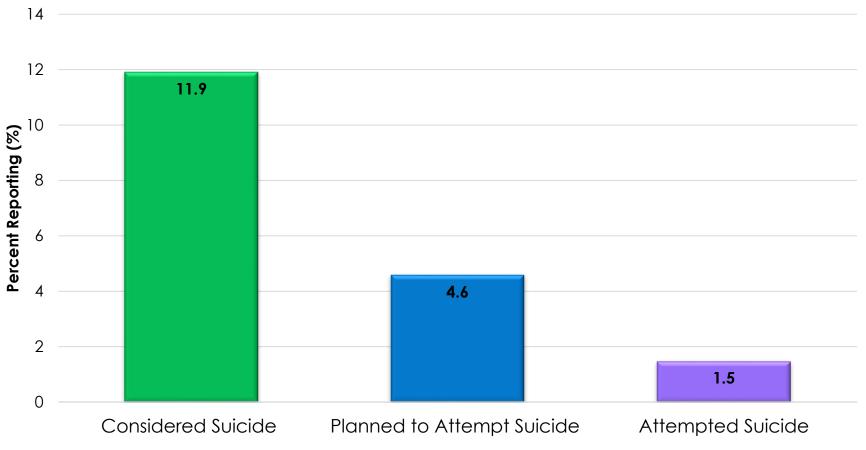
#### **General Health**



#### Life Satisfaction



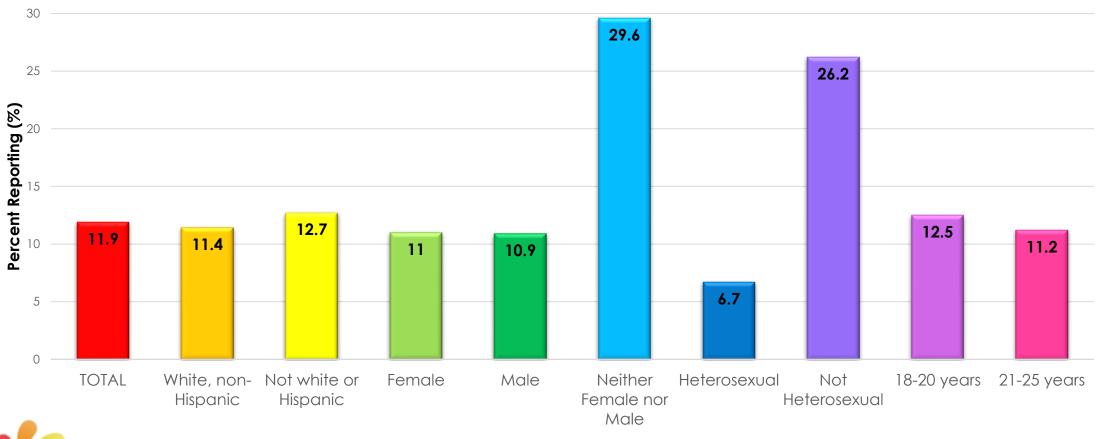
#### Suicide Outcomes in the Past 12 Months







#### Considered Suicide in Past 12 Months

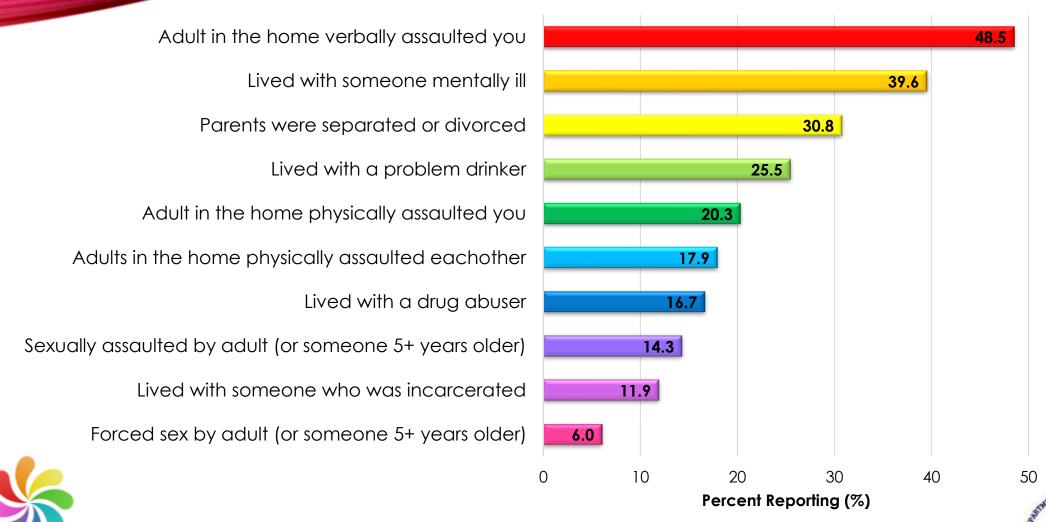




**NOTE:** Having considered suicide was significantly different by gender (p=0.014) and sexual orientation (p<0.001), but not by race/ethnicity or underage status.

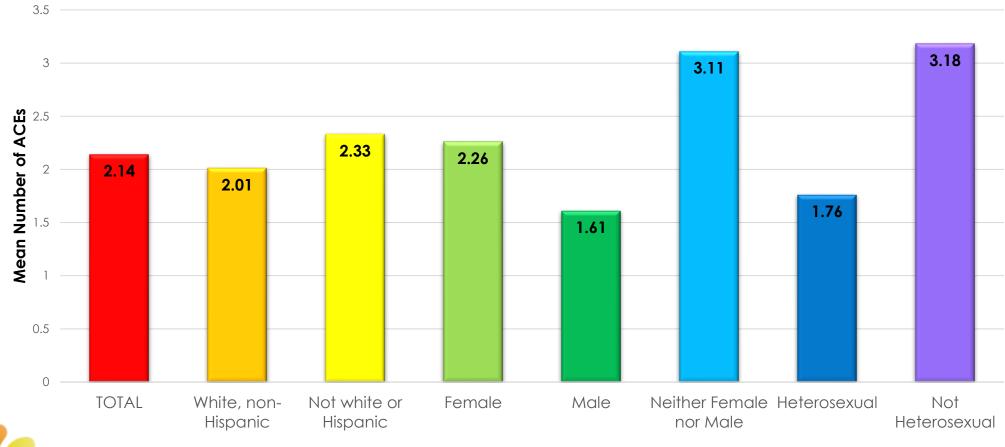


# **Adverse Childhood Experiences**





## **Adverse Childhood Experiences**





**NOTE:** The ACEs module from the BRFSS was used, with a possible 0-8 ACEs score. Mean ACE differences were marginally significant by race/ethnicity (p=0.08), and significantly different by gender (p=0.002) and sexual orientation (p<0.001).



# WHAT'S NEXT?

- The RIYAS will be administered again in 2022, with a goal to sustain the RIYAS moving forward
- We aim to use future administrations to make region-specific estimates and comparisons
- For questions or data requests, please contact srrosenthal@gmail.com





# REFERENCES

- [1] Saunders JB, Aasland OG, Babor TF et al. Development of the alcohol use disorders identification test (AUDIT): WHO collaborative project on early detection of persons with harmful alcohol consumption II. Addiction 1993, 88: 791–803.
- [2] Spitzer RL, Kroenke K, Williams JB, Löwe B. A brief measure for assessing generalized anxiety disorder: the GAD-7. Arch Intern Med. 2006 May 22;166(10):1092-7.
- [3] Andresen EM, Malmgren JA, Carter WB, et al. Screening for depression in well older adults: evaluation of a short form of the CES-D. Am J Prev Med 1994; 10: 77–84



