2018 DELAWARE STATE EPIDEMIOLOGICAL PROFILE: SUBSTANCE USE AND RELATED ISSUES

Prepared by the

University of Delaware Center for Drug and Health Studies
&
Its State Partners
for

The Delaware SPF-PFS Program,
The Delaware Division of Substance Abuse and Mental Health,
&
The State Epidemiological Outcomes Workgroup
(SEOW, formerly the Delaware Drug and Alcohol Tracking Alliance/DDDATA)

Sponsored by Award SP020704 to the Division of Substance Abuse and Mental Health, Delaware Health and Social Services, from the Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration. Please address all inquiries to: Laura Rapp, PhD, University of Delaware Center for Drug and Health Studies, Department of Sociology and Criminal Justice: lrapp@udel.edu.
Introduction:
The Role of the Delaware SEOW and the Purpose of the Epidemiological Profile

All States, including Delaware, have received support from the Substance Abuse and Mental Health Services Administration's (SAMHSA’s) Center for Substance Abuse Prevention (CSAP) to establish a statewide epidemiological workgroup or SEOW. In Delaware, the Division of Substance Abuse and Mental Health (DSAMH) in the Delaware Department of Health and Social Services is the recipient of a Strategic Prevention Framework-Partnerships for Success Grant (SPF-PFS) and the SEOW is part of this initiative. The SEOW (formerly known as the Delaware Drug and Alcohol Tracking Alliance, or DDATA) is a group of stakeholders representing organizations that collect and use data on substance use, associated behaviors, and their consequences in order to establish and monitor indicators related to substance abuse prevention. The SEOW’s mission is to bring this data to the forefront of the prevention planning process. Its goals are:

- 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 consumption and its consequences;
- To create data-guided products that inform prevention planning and policies;
- To train agencies and communities in understanding, using, and presenting data effectively in order to support prevention efforts.

This annual report highlights the most recently available data on substance use and related issues in Delaware. It also includes special topics, such as populations that experience disproportionate risk for substance use or related behaviors. The information is intended to help decision makers and stakeholders throughout Delaware accomplish their goals related to needs assessments, strategic planning, and evaluation. The 2018 report consists of twelve sections: a state demographic background; tobacco and electronic cigarettes; alcohol; marijuana; opioid use; other illegal drugs; substance exposed infants; gambling; mental health; substance use and adverse childhood experiences (ACEs); substance use among the LGBQ population and new data on Transgender youth in Delaware; and protective factors.

The 2018 Delaware Epidemiological Profile is available, along with all SEOW data products, from the Center on Drug and Health Studies at the University of Delaware website.
Thank You, SEOW Collaborators

for your participation and commitment to data-driven prevention planning, practice, and evaluation!

atTAcK Addiction
Christiana Care Health Systems
Delaware Academy of Medicine
Delaware Criminal Justice Council
Delaware Coalition Against Domestic Violence
Delaware Council on Gambling Problems
Delaware Criminal Justice Information System (DELJIS)
Delaware Afterschool Network
Delaware Courts – Office of the Child Advocate
Delaware Department of Education
Delaware Department of Health and Social Services
 Division of Medicaid and Medical Assistance
 Division of Public Health
 Division of Services for the Aging and Persons with Disabilities
 Division of Substance Abuse and Mental Health
Delaware Department of Homeland Security
 Division of Alcohol and Tobacco Enforcement
Division of Forensic Medicine
Delaware Department of Services for Children, Youth and their Families
 Division of Prevention and Behavioral Health
 Trauma Informed Care
Delaware Information and Analysis Center
Delaware Office of Controlled Substance Division of Professional Regulation, Prescription Monitoring Program
Mental Health Association of Delaware
Delaware Prevention Coalition
Delaware State Police
DEMCO
La Esperanza
KIDS COUNT in Delaware, University of Delaware
Delaware Center for Community Research & Service
Latin American Community Center
Nemours Health and Prevention Services
Open Door, Inc.
Wesley College
West End Neighborhood House
University of Delaware
 Student Health and Wellness Promotion

SEOW Facilitator Team, University of Delaware Center for Drug and Health Studies: Laura Rapp, Sharon Merriman-Nai, James Hightberger, Dana Holz, David Borton, Brandie Pugh, Kai Lin, Luye Li, Lin Liu, Meisje Scales, Rachel Ryding, Roberta Gealt, Dan O’Connell, and Steve Martin
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Delaware Data: 
State Demographic Background

Delaware is the second smallest state in the United States, with total landmass equaling 1,949 square miles (US Census Bureau, n.d.). There are three counties in the state: New Castle County, the most populated county, and Sussex and Kent Counties, which are primarily rural. According to the most recent data available from the United States Census, the state population is estimated at 961,939. The 2012-2016 American Community Survey Estimates indicates that the median age in Delaware is 39.6 years. Individuals under the age of 18 comprise 23% of the State’s overall population. Delawareans aged 65 and older comprise 17% of the total population (US Census Bureau, n.d.). The demographic snapshot for this period indicates that approximately 69% of the state population reported their race as White, 22% as Black or African American, 4% as Asian, 3% as two or more races, and the remaining population of the state identified as Pacific Islander/Native Hawaiian, American Indian/Alaska Native or Other. Nine percent of the population reported their ethnicity as Hispanic or Latino. The 2012-2016 American Community Survey estimates that 13% of Delawareans spoke a language other than English at home (US Census Bureau, American Fact Finder, n.d.).

The median household income from 2012 through 2016 was $61,017. In March 2018, the unemployment rate was 4.3% with over 20,700 people currently unemployed (US Bureau of Labor Statistics, n.d.). In 2016, 9% of the Delaware population was uninsured. 22% of the population was enrolled in Medicaid, and 16% was enrolled in Medicare (Kaiser Foundation, n.d.). From 2014 – 2016, 18.5% of children in the state lived below the federal poverty line. More than 1 in 3 children, during this time period, were raised in one-parent families. In 2016, 71,324

1 All numbers are rounded to the nearest whole number.
families were enrolled in the Supplemental Nutrition Assistance Program, and 5,081 families received Temporary Assistance for Needy Families (Center for Community Research and Service, 2017).

Due to unique tax and corporate policies and access to the Delaware Court of Chancery, Delaware has attracted more than half of all U.S. publicly traded companies to incorporate in the state. For this reason, Delaware is often named as the “corporate capital of the world.” One of Delaware’s major industries is corporate financing and banking. Additionally, Delaware’s economy is also driven by chemical manufacturing, aviation, health services, tourism, and agriculture. In Kent and Sussex County, agriculture has greater predominance. The state’s largest agricultural output is broiler chickens, followed by soybeans and corn. Many thousands of people, from across the country, visit Delaware’s beach resort towns every year, making tourism a great driver of economic development in Sussex County (State of Delaware Office of Economic Development, n.d.).

**New Castle County**

The northernmost and most densely populated county, New Castle County had an estimated population of 551,997, according to the 2012-2016 American Community Survey. Delaware’s largest city, Wilmington, is located in the county, with an estimated 71,502 people living in the city during this time period (US Census Bureau, n.d.). There is an upsurge in the number of people in the downtown business district during the day, with much of that population leaving the city for homes in the suburban outlying areas at night. Recent residential and business developments along the waterfront in the city were designed, in part, to attract more working professionals to the city to live, and for dining and entertainment. Efforts to motivate locals to dine and entertain in the city are hampered by concerns over high crime rates. In 2014, Newsweek featured an article on the troubling homicide rate within the city, entitled, *Murder Town USA* (Jones, 2014). Attention to increasing homicide rates led local residents and policymakers to call gun violence a public health epidemic, and epidemiologists from the CDC treated it as such and spent several
months in 2015 identifying risk factors that lead to gun violence within the city (Sumner et al., 2015).  

Newark, the state’s third largest city, with an estimated 32,941 people in 2016, is also located in New Castle County (US Census Bureau, n.d.). Delaware’s flagship university, the University of Delaware, is located in the city. Towns in lower New Castle County have seen explosive growth in the past two decades. Between the 2000 and 2010 Census reporting periods, Middletown grew by 206%, and Townsend by 492%.

**Kent County**

Dover, the capital and the state’s second largest city, is located in Kent County. An estimated 37,351 people lived in Dover in 2016 (US Census Bureau, n.d.). The city is home to the Dover Air Force Base, and the Dover Downs International Speedway. Delaware State University and Wesley College are based in Dover, and Delaware Technical and Community College and Wilmington University also have locations in the city. Recent residential developments have attracted more people to Kent County. Two towns saw large increases in populations from 2000-2010; Cheswold increased by 341% during this time period, and Clayton by 129%. Kent County had an overall 28% increase in population between 2000-2010, when the US Census Bureau estimated the population at 162,349.

**Sussex County**

Sussex County, the southernmost of the three, is home to several beach resort towns that support a large influx of people during the warmer months, but do not host a large year-round population. During the tourist season, tremendous congestion and traffic is evident in these coastal towns. Milford, Georgetown, and Seaford are the three largest cities in the county, all of which are inland from the coast and have primarily year-round populations. Poultry processing is
a major industry in Sussex County, and a significant immigrant and migrant worker population is associated with the industry. From 2000-2010, Sussex County experienced a 26% increase in its population when the US Census reported 197,110 residents. These official numbers may not actually reflect local realities, as some of the population growth is likely due to migrant and immigrant workers that may not be counted on the Census.

**Medically Underserved Areas**

The Health Resources and Services Administration (HRSA) uses existing data to determine areas of the country that are medically underserved, and lack access to primary care doctors. Occasionally, areas do not fit official criteria for being medically underserved, but local stakeholders, aware of local context and realities, can petition to designate the area as medically underserved if additional data shows that the population does have difficulty in accessing primary care. This is considered the Governor’s Exception Criteria by the HRSA. In Delaware, much of the southern and eastern communities in New Castle County are currently considered a Medically Underserved Area (MUA), under the Governor’s Exception Criteria, with several census tracts within the city of Wilmington considered a MUA using the HRSA coding criteria. All of Kent County is considered an MUA, under the Governor’s Exception Criteria. Sussex County is considered a MUA, under the HRSA coding criteria (Health Resource and Services Administration, n.d.).

In addition to physical health concerns, nearly 30% of adults reported poor mental health status in 2016 (Kaiser Family Foundation, n.d.). These factors, coupled with under-resourced service areas, amplify the need for preventative health services, including strategies to bolster behavioral health. (For an interactive map of areas of need within the state, visit the Delaware Health Tracker 2018 SocioNeeds Index).
An Overview of the 2018 Delaware State Epidemiological Profile Report

The 2018 Delaware State Epidemiological Profile Report highlights the most recently available data on substance use among various populations. It is intended to provide decision-makers with information to support needs assessment, strategic planning, and evaluation. The report begins with an overview of consumption patterns of select substances. Following the overview, individual chapters present narrative summaries for each substance category which highlight select findings followed by graphs and charts detailing reported trends and use. The report also features special topics, including overviews of mental health issues, substance exposed infant births, LGBQ youth, Transgender youth, and adverse childhood experiences (ACES) and their association with substance use. Finally, the report includes data related to protective factors, which are key to prevention efforts. References are included at the end of the report, alphabetized within chapter groups.
Overview: Statewide Consumption Patterns of Select Substances
2017 Delaware School Survey

Percent of Delaware 8th and 11th grade students reporting use of selected substances in the past year

Notes:
Medication used not as prescribed includes steroids, over the counter medication, prescription uppers (diet pills, Ritalin, Concerta, Adderall), downers (Xanax and other benzodiazepines), and painkillers.
Other illegal drugs include ecstasy, hallucinogens, street uppers, inhalants, cocaine, crack, heroin and synthetic marijuana used to get high.

Source: “2017 Delaware School Survey.” Center for Drug and Health Studies, University of Delaware.
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2017 Delaware School Survey

Percent of Delaware 8th and 11th grade students reporting use of selected substances in the past 30 days

Figure 2 Reported use of selected substances in the past 30 days among Delaware 8th and 11th graders

Notes:
Medication used not as prescribed includes steroids, over the counter medication, prescription uppers (diet pills, Ritalin, Concerta, Adderall), downers (Xanax and other benzodiazepines), and painkillers.
Other illegal drugs includes ecstasy, hallucinogens, street uppers, inhalants, cocaine, crack, heroin and synthetic marijuana used to get high.

Source: “2017 Delaware School Survey.” Center for Drug and Health Studies, University of Delaware.
Figure 3 Past month cigarette use map, 8th grade

Source:
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Figure 4 Past month cigarette use map, 11th grade

Source:

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Figure 5 Past month alcohol use map, 8th grade

Source:
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Figure 6 Past month alcohol use map, 11th grade

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Figure 7 Binge drinking map, 8th grade

Figure 8 Binge drinking ap, 11th grade

Source:
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Figure 9 Past month marijuana use map, 8th grade

Figure 10 Past month marijuana use map, 11th grade


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Figure 11 Past month painkiller use map, 8th grade

Reported Past Year Prescription Pain Killer Use Without a Prescription Among Delaware 11th Grade Public School Students: 2016-2017

Legend
- New Castle County
- Kent County
- Sussex County
- PO Box/Company Zip Codes
- Too Few to Estimate (N<30)

Rate of Pain Killer Misuse
- Less than 3%
- 3-3.9%
- 4-4.9%
- 5-7%

Figure 12 Past month painkiller use map, 11th grade

Source:
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Figure 13 Past month Rx use map, 8th grade

Reported Past Year Prescription Drug Use Without a Prescription Among Delaware 11th Grade Public School Students: 2016-2017


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References
About Delaware


Tobacco


**Alcohol**


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm


Marijuana


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from [https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm](https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm)


**Opioids**


Anderson, Tammy L., Martin, Steve, Fang, Yiqian and Jiamin Li. (2016). *Report to the Delaware PDAC on Criteria of High Risk Prescribing for RIPAID* [Centers for Disease Control Grant].


Neuman, W. (May 3, 2018). De Blasio moves to bring safe injection sites to New York City. *New York Times*. Retrieved from Figure 8 Percentage of high school students who reported smoking in the past 30 days, by sexual orientation


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm


Other Illicit Drugs


Substance Abuse and Mental Health Services Administration. (n.d.). [Table of data from the Treatment Episode Data Set]. *Substance Abuse Treatment Admissions by Primary Substance of Abuse, According to Sex, Age Group, Race, and Ethnicity among Admissions Aged 12 and Older, Year = 2017*. Retrieved May 14, 2018 from https://wwwdasis.samhsa.gov/webt/quicklink/DE17.htm
Gambling


2018 Delaware State Epidemiological Profile – prepared for the SEOW by the Center for Drug and Health Studies

Mental Health


Adverse Childhood Experiences


**Lesbian, Gay, Bisexual and Questioning Youth**


**Transgender Youth**


**Risk and Protective Factors**


## 2018 Data Sources

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<th>Data Instrument</th>
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<td>Delaware Courts</td>
<td>Office of the Child Advocate</td>
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<td>-</td>
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<td>Delaware Department of Health and Social Services</td>
<td>DE Division of Substance Abuse and Mental Health</td>
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<td>Delaware Department of Safety and Homeland Security</td>
<td>Medical Examiner, Division of Forensic Medicine</td>
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<td>Delaware Household Health Survey</td>
<td>Delaware Public Health Institute</td>
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<td>Delaware Prescription Monitoring Program (PMP)</td>
<td>Delaware Office of Controlled Substance, Division of Professional Regulation</td>
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<td>Delaware School Survey (DSS) – 5th, 8th, and 11th grades</td>
<td>Center for Drug and Health Studies, UD</td>
<td>2017</td>
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<td>Delaware Youth Risk Behavior Survey (YRBS) – High School</td>
<td>Center for Drug and Health Studies, UD (sponsored by DE Division of Public Health and the CDC)</td>
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<td>Delaware Youth Tobacco Survey (YTS) – 6th = 12th grades</td>
<td>Center for Drug and Health Studies, UD (sponsored by the DE Division of Public Health and the CDC)</td>
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<td>Department of Public Instruction Monitoring the Future</td>
<td>University of Michigan</td>
<td>1994</td>
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<td>National Poison Data System</td>
<td>American Association of Poison Control Centers</td>
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<td>Treatment Admissions Data</td>
<td>US Substance Abuse and Mental Health Services Administration, DE Division of Substance Abuse and Mental Health</td>
<td>2017</td>
<td>2003 – 2017</td>
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In addition to the data sources for the figures and tables in the 2018 report, the following data sources are also cited throughout the narrative:

- America’s Health Rankings
- Bureau of Labor Statistics
- Centers for Disease Control and Prevention
- Delaware Health Tracker
- Delaware State Police/Delaware Statistical and Analysis Center
- Health Resources and Services Administration
- Kaiser Family Foundation
- KIDS COUNT in Delaware
- PolicyMap
- Prescription Behavior Surveillance System at Brandeis University
- Tobacco21.org
- U.S. Department of Health and Human Services
- U.S. Census Bureau