

2.20 Drug and other substance use including inhalants

The use of drugs and other substances including inhalants among Aboriginal and Torres Strait Islander people

Data sources

Data for this measure come from the National Aboriginal and Torres Strait Islander Health Survey (NATSIHS), the National Aboriginal and Torres Strait Islander Social Survey (NATSISS), the National Drug Strategy Household Survey (NDSHS), the AIHW Hospital Morbidity Database and the AIC Drug Use Monitoring in Australia (DUMA) survey.

National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

The 2004–05 NATSIHS collected information from 10,439 Indigenous Australians of all ages. This sample was considerably larger than the supplementary Indigenous samples in the 1995 and 2001 National Health Surveys. The survey was conducted in remote and non-remote areas of Australia and collected a range of information from Indigenous Australians about health-related issues including health-related actions, health risk factors, health status, socioeconomic circumstances and women's health. It is planned to repeat the NATSIHS at six-yearly intervals, with the next NATSIHS to be conducted in 2010–11. Selected non-Indigenous comparisons are available through the 2004–05 National Health Survey (NHS).

National Aboriginal and Torres Strait Islander Social Survey (NATSISS)

The 2002 NATSISS collected information from 9,400 Indigenous Australians across all states and territories of Australia. The sample covered persons aged 15 years or over who were usual residents of private dwellings. It collected information on a wide range of subjects including family and culture, health, education, employment, income, financial stress, housing, as well as law and justice. The 2002 NATSISS is the second national social survey of Indigenous Australians conducted by the ABS. Selected non-Indigenous comparisons are available through the 2002 General Social Survey (GSS). The ABS plans to conduct the NATSISS every 6 years. The next survey is planned for 2008.

National Drug Strategy Household Survey (NDSHS)

The National Drug Strategy Household Survey (NDSHS) is conducted by the AIHW every three years and collects information relating to drug use in Australia. The sample size for the 2004 survey was 29,445 persons aged 12 years or older.

The NDSHS does not have an enhanced Indigenous sample. Therefore, only a small number of Indigenous respondents are picked up in this survey. In 2004, 463 Indigenous respondents were included. The sample size for Indigenous Australians is very small and therefore the estimates should be interpreted with caution (ABS & AIHW 2005). This small Indigenous sample size would also limit the reliability of time series analysis.

NDSHS data are reportable by the national level only. Data are not available for remoteness areas, regional areas and state and territory levels.

Drug Use Monitoring in Australia (DUMA)

The DUMA is an annual survey that has been conducted by the Australian Institute of Criminology (AIC) since 1999 at some locations across Australia. Further sites in Victoria and the Northern Territory (Darwin) are being reported from 2006 onwards. The survey reports on drug use among police detainees at seven police stations in metropolitan areas in Australia. The survey is by a voluntary questionnaire and drug use is confirmed by a urine sample provided by the detainee.

The survey is conducted at police stations in selected metropolitan areas and does not provide regional coverage. The number of detainees questioned is quite low and thus includes a very small Indigenous sample.

The Indigenous status of the detainee is established by the following question: 'What is your ethnic background?' (If the respondent mentions 'Australian' but not 'Aboriginal' prompt: 'Do you consider yourself an Aboriginal or Torres Strait Islander?').

Analysis is presented by state/territory as the figures do not permit national coverage.

Hospitalisations

The National Hospital Morbidity Database is a compilation of episode-level records from admitted patient morbidity data collection systems in Australian hospitals in each state and territory. Information on the characteristics, diagnoses and care of admitted patients in public and private hospitals is provided annually to the AIHW by state and territory health departments.

Data are presented for the four jurisdictions that have been assessed as having adequate identification of Indigenous hospitalisations in 2003–04 – Queensland, Western Australia, South Australia and the Northern Territory (AIHW 2005a). These four jurisdictions represent approximately 60% of the Indigenous population of Australia. Data are presented by state/territory of usual residence of the patient.

Hospitalisations for which the Indigenous status of the patient was not reported have been included with hospitalisations data for non-Indigenous people under the 'other' category. This is to enable consistency across jurisdictions as public hospitals in some states and territories do not have a category for the reporting of 'not stated' or inadequately recorded/reported Indigenous status.

Hospitalisation data are presented for the two-year period July 2002 to June 2004. An aggregate of two years of data has been used as the number of hospitalisations for some conditions is likely to be small for a single year.

The principal diagnosis is the diagnosis established to be the problem that was chiefly responsible for the patient's episode of care in hospital. The additional diagnosis is a condition or complaint either coexisting with the principal diagnosis or arising during the episode of care. The term 'hospitalisation' has been used to refer to a separation which is the episode of admitted patient care, which can be a total hospital stay (from admission to discharge, transfer or death) or a change in a type of care (for example, from acute to rehabilitation).

Data analyses

Age-standardised rates and ratios have been used for this indicator as a measure of morbidity in the Indigenous population relative to other Australians. Ratios of this type illustrate differences between the rates of morbidity among Indigenous people and those of other Australians, taking into account differences in age distributions.

Illicit substance use can be divided into two categories: use of substances which are illegal to possess (for example, heroin) and non-medical use of substances that are legally available (for example, petrol inhalation and misuse of prescription drugs).

Self-reported illicit drug use

Self-reported data on illicit substance use among the Aboriginal and Torres Strait Islander population come from the 2002 NATSISS and 2004–05 NATSIHS and the 2004 NDSHS. Data from these surveys are presented below.

Note that equivalent data on substance use for non-Indigenous Australians are not available from the 2002 General Social Survey or the 2004–05 National Health Survey and thus are not presented here.

- In 2004–05, 50% of Indigenous Australians aged 18 years and over and 49% of Indigenous Australians aged 15 years and over reported illicit substance use at least once in their lifetime.
- In 2004–05, approximately 28% of Indigenous Australians aged 18 years and over and 28% of Indigenous Australians aged 15 years and over reported illicit substance use in the last 12 months.

Substance use by age and sex

- In 2004–05, the majority of Indigenous persons who used substances in the last 12 months were aged 15–34 years (61%) (Table 2.20.1).
- In 2004–05, a higher proportion of Indigenous males reported having ever used illicit substances (54%) and substance use in the last 12 months (32%) than Indigenous females (45% and 25% respectively) (Table 2.20.2a).
- Approximately 44% of Indigenous males and 34% of Indigenous females aged 18–24 years reported they had used substances in the last 12 months.

Type of substance use

- Marijuana was the most commonly reported illicit drug used by Aboriginal and Torres Strait Islander people aged 15 years and over in non-remote areas in 2004–05. Around 43% reported having tried marijuana and 23% had used marijuana in the last 12 months. Amphetamines/speed was the next most frequently reported substance either experimented with (15%) or recently used (7%) by Indigenous Australians followed by ecstasy or designer drugs (Table 2.20.2a).
- Marijuana was also the most commonly reported illicit drug used by Indigenous people aged 15 years and over in non-remote areas in 2002 (34% reported having ever used the drug and 19% had used the drug in the last 12 months) (Table 2.20.2b; Figure 2.20.1).

Table 2.20.1: Substance use, by age and sex, Indigenous persons aged 15 years and over, non-remote areas, 2004–05.

Age (years)	Never used substances			Used substances but not in last 12 months			Used substances in last 12 months		
	Males	Females	Persons	Males	Females	Persons	Males	Females	Persons
Proportion of total persons (%)									
15–17 ^(a)	14	10	12	5 ^(c)	4 ^(c)	5 ^(c)	11 ^(c)	10 ^(c)	10
18–24	19	18	18	13	18	16	28	28	28
25–34	17	18	18	29	35	32	34	32	33
35–44	20	19	19	23	30	27	18	16	17
45–54	12	18	16	23	10	16	8	9 ^(c)	9
55+	17	17	17	8 ^(c)	3 ^(c)	5 ^(c)	1 ^(d)	4 ^(d)	3 ^(c)
Total^(b)	100	100	100	100	100	100	100	100	100
Proportion of age group (%)									
15–17 ^(a)	57	61	59	9 ^(c)	10 ^(c)	10 ^(c)	31 ^(c)	28 ^(c)	30
18–24	41	47	44	13	18	16	44	34	39
25–34	31	38	35	24	28	26	45	32	38
35–44	44	49	47	24	29	27	29	19	24
45–54	41	68	56	35	13	23	20	16 ^(c)	18
55+	71	82	77	15 ^(c)	5 ^(c)	9 ^(c)	4 ^(d)	10 ^(d)	7 ^(c)
Total^(b)	44	53	49	21	20	20	32	25	28
Total number	33,468	47,796	81,265	15,894	17,794	33,687	24,560	22,153	46,714

(a) Excludes data obtained through child proxy.

(b) People who accepted the substance use form.

(c) Estimate has a relative standard error of 25% to 50% and should be used with caution.

(d) Estimate has a relative standard error of greater than 50% and is considered too unreliable for general use

Source: ABS and AIHW analysis of 2004–05 NATSIHS.

Table 2.20.2a: Substance use, by type of substance and sex, Indigenous Australians aged 15 years and over, non-remote areas, 2004–05

	Males		Females		Persons	
	No.	%	No.	%	No.	%
Has ever used substances						
Marijuana	38,203	50.2	33,240	37.1	71,442	43.2
Amphetamines or speed	14,293	18.8	11,199	12.5	25,493	15.4
Ecstasy or designer drugs	7,896	10.4	6,729	7.5	14,625	8.8
LSD or synthetic hallucinogens	7,687	10.1	5,360	6.0	13,047	7.9
Painkillers or analgesics for non-medical purposes	3,496	4.6	7,969	8.9	11,465	6.9
Naturally occurring hallucinogens	6,451	8.5	3,403	3.8	9,854	6.0
Cocaine	5,553	7.3	2,344	2.6	7,897	4.8
Other inhalants	4,019	5.3	2,414	2.7	6,433	3.9
Tranquillisers or sleeping pills for non-medical purposes	2,313	3.0	3,630	4.1	5,944	3.6
Heroin	2,771	3.6	1,910	2.1	4,681	2.8
Petrol	3,329	4.4	1,040	1.2	4,369	2.6
Methadone for non-medical purposes	547	0.7	323	0.4	869	0.5
<i>Has used substances</i>	<i>41,088</i>	<i>54.0</i>	<i>40,244</i>	<i>45.0</i>	<i>81,331</i>	<i>49.1</i>
<i>Has not used substances</i>	<i>33,468</i>	<i>44.0</i>	<i>47,796</i>	<i>53.4</i>	<i>81,265</i>	<i>49.1</i>
<i>Not stated</i>	<i>1,507</i>	<i>2.0</i>	<i>1,446</i>	<i>1.6</i>	<i>2,953</i>	<i>1.8</i>
Total form answered	76,064	100.0	89,486	100.0	165,550	100.0
Form not answered	25,807	13.0	22,066	11.5	47,872	12.3
Grand total	198,428	100.0	191,112	100.0	389,541	100.0
Has used substances in the last 12 months						
Marijuana	21,541	28.3	15,938	17.8	37,479	22.6
Amphetamines or speed	7,208	9.5	4,294	4.8	11,502	6.9
Analgesics	2,566	3.4	6,481	7.2	9,047	5.5
Ecstasy or designer drugs	4,761	6.3	2,677	3.0	7,438	4.5
Sedatives and hypnotics	2,383	3.1	1,475	1.6	3,859	2.3
Other stimulants and hallucinogens	1,741	2.3	742	0.8	2,483	1.5
Volatile solvents	419	0.6	67	0.1	486	0.3
<i>Has used substances in last 12 months</i>	<i>24,560</i>	<i>32.3</i>	<i>22,153</i>	<i>24.8</i>	<i>46,714</i>	<i>28.2</i>
<i>Has not used substances in last 12 months</i>	<i>15,894</i>	<i>20.9</i>	<i>17,794</i>	<i>19.9</i>	<i>33,687</i>	<i>20.3</i>
<i>Never used substances</i>	<i>33,468</i>	<i>44.0</i>	<i>47,796</i>	<i>53.4</i>	<i>81,265</i>	<i>49.1</i>
<i>Use in last 12 months not stated</i>	<i>2,141</i>	<i>2.8</i>	<i>1,742</i>	<i>1.9</i>	<i>3,884</i>	<i>2.3</i>
Total form answered	76,064	100.0	89,486	100.0	165,550	100.0
Form not answered	25,807	18.1	22,066	15.4	47,872	16.8
Grand total	142,490	100.0	143,226	100.0	285,715	100.0

Source: AIHW analysis of 2004–05 NATSIHS.

Table 2.20.2b: Substance use, by type of substance and sex, Indigenous persons aged 15 years or over, non-remote areas, 2002

	Males		Females		Persons	
	Number	Per cent	Number	Per cent	Number	Per cent
Has ever used substances						
Marijuana, hashish or cannabis resin	37,700	38.6	31,900	29.7	69,600	33.9
Amphetamines or speed	11,900	12.2	10,400	9.7	22,400	10.9
Painkillers/analgesics ^(a)	6,900	7.1	7,200	6.7	14,100	6.9
LSD or synthetic hallucinogens	7,800	8.0	4,900	4.5	12,700	6.2
Ecstasy or designer drugs	6,200	6.4	4,200	3.9	10,400	5.1
Naturally occurring hallucinogens	7,300	7.4	2,800	2.6	10,000	4.9
Other inhalants	4,600	4.7	2,900	2.7	7,500	3.6
Cocaine	4,100	4.2	3,200	3.0	7,300	3.6
Tranquillisers/sleeping pills ^(a)	2,500	2.6	4,800	4.4	7,300	3.6
Petrol	5,100	5.2	2,200	2.0 ^(c)	7,200	3.5
Heroin	3,500	3.5	3,700	3.4	7,100	3.5
Kava	4,400	4.6	2,500	2.4	7,000	3.4
Total used substances	42,200	43.3	39,500	36.7	81,700	39.8
Has not used substances	47,100	48.3	58,200	54.2	105,400	51.4
Non-response	7,700	7.9	9,500	8.9	17,200	8.4
Total^(b)	97,600	100.0	107,500	100.0	205,100	100.0
Has used substances in last 12 months						
Marijuana, hashish or cannabis resin	22,400	23.0	16,700	15.5	39,100	19.1
Amphetamines or speed	4,800	4.9	4,800	4.5	9,600	4.7
Painkillers/analgesics ^(a)	4,000	4.1	5,000	4.6	9,000	4.4
Ecstasy or designer drugs	2,200	2.2	1,700	1.6	3,800	1.9
Tranquillisers/sleeping pills ^(a)	700	0.7	2,300	2.2 ^(c)	3,000	1.5
Cocaine	500	0.5 ^(c)	900	0.8 ^(c)	1,300	0.6 ^(c)
LSD or synthetic hallucinogens	700	0.7 ^(c)	700	0.6 ^(c)	1,300	0.7 ^(c)
Heroin	500	0.5 ^(c)	600	0.6 ^(c)	1,100	0.5 ^(c)
Kava	500	0.5 ^(c)	600	0.6 ^(c)	1,100	0.6 ^(c)
Other inhalants	500	0.5 ^(c)	400	0.4 ^(c)	900	0.5 ^(c)
Naturally occurring hallucinogens	400	0.5 ^(c)	200	0.2 ^(d)	600	0.3 ^(c)
Petrol	400	0.4 ^(d)	100	0.1 ^(d)	500	0.3 ^(c)
Total used substances in last 12 months	26,000	26.6	22,300	20.7	48,300	23.5

(continued)

Table 2.20.2b (continued): Substance use, by type of substance and sex, Indigenous persons aged 15 years or over, non-remote areas, 2002

	Males		Females		Persons	
	Number	Per cent	Number	Per cent	Number	Per cent
Has not used substances in last 12 months	16,000	16.4	17,000	15.9	33,000	16.1
Never used substances	47,100	48.3	58,200	54.2	105,400	51.4
Non-response	7,700	7.9	9,500	8.9	17,200	8.4
Total^(b)	97,600	100.0	107,500	100.0	205,100	100.0

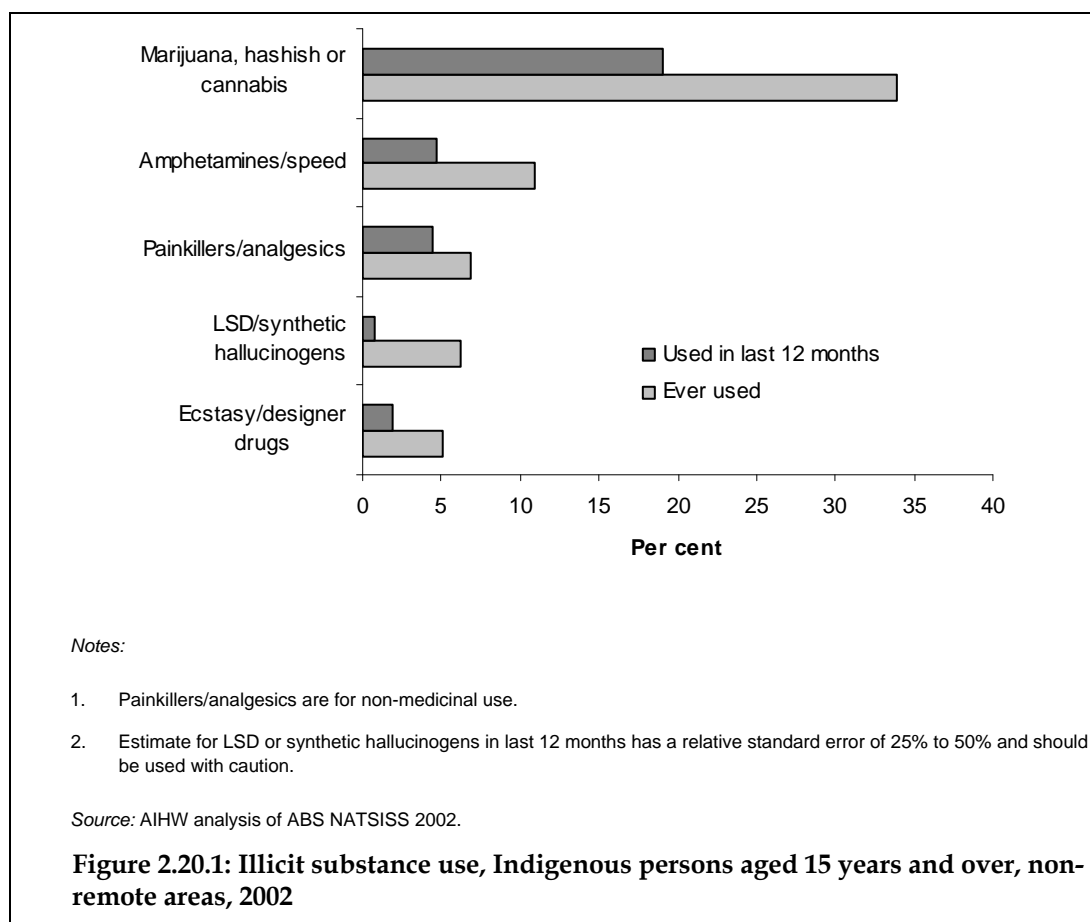
(a) For non-medical use.

(b) Includes not stated responses.

(c) Estimates with a relative standard error of 25% to 50% should be used with caution.

(d) Estimates with a relative standard error greater than 50% are considered too unreliable for general use.

Source: AIHW analysis of ABS NATSISS 2002.



Substance use by Indigenous status

- The 2004 National Drug Strategy Household Survey found that illicit drug use among Aboriginal and Torres Strait Islander people was higher than for other Australians. For example, 27% of Indigenous persons aged 14 years and over had used drugs or other substances in the last 12 months compared to 15% of other Australians and 12% of Indigenous persons aged 14 years and over had used substances other than marijuana/cannabis in the last 12 months compared to 8% of other Australians (Table 2.20.3).

Table 2.20.3: Drugs or other substances including inhalant use status, persons aged 14 years and over, 2004

	Never used	Ex-users	Recent users
	%	%	%
Drugs or other substances, including marijuana/cannabis			
Indigenous	50.1	22.9	26.9
Non-Indigenous	62.1	22.9	15.0
Drugs or other substances, excluding marijuana/cannabis			
Indigenous	74.2	14.2	11.6
Non-Indigenous	81.5	10.3	8.1

Source: AIHW 2005b.

Time series analysis

- For Indigenous people aged 18 years and over who accepted the form on substance use, reported rates of illicit substance use in the 12 months prior to survey were slightly higher in 2004–05 than in 2002 (28% compared to 25%) (Table 2.20.4).
- A higher proportion of Indigenous adults reported having ever used substances in 2004–05 than in 2002 (50% compared to 44%).
- The proportion of Indigenous Australians who reported marijuana use in the last 12 months was higher in 2004–05 than in 2002 (23% compared to 20%).
- The proportion of Indigenous males who reported use of amphetamines/speed in the last 12 months in 2004–05 was twice that reported in 2002 (10% compared to 5%).

Table 2.20.4: Indigenous persons aged 18 years and over in non-remote areas, substance use, by sex, 2002 and 2004–05

Substance use	2002 ^(a)			2004–05		
	Males	Females	Persons	Males	Females	Persons
(per cent)						
Used substances in last 12 months						
Analgesics and sedatives for non-medical use ^(b)	5	7	6	4	8	6
Amphetamines or speed	5	5	5	10	5	7
Marijuana, hashish or cannabis resin	25	16	20	29	17	23
Kava	1 ⁽ⁱ⁾	1 ⁽ⁱ⁾	1 ⁽ⁱ⁾	29 ⁽ⁱ⁾	— ⁽ⁱ⁾	19 ⁽ⁱ⁾
Total used substances in last 12 months^{(c)(d)}	29	22	25	32	24	28
Used substances but not in last 12 months	19	18	19	22	21	22
Total used substances^(e)	48	40	44	56	46	50
Never used substances	51	59	55	42	53	48
Not stated ^(f)	1 ⁽ⁱ⁾	— ⁽ⁱ⁾	— ⁽ⁱ⁾	2 ⁽ⁱ⁾	2 ⁽ⁱ⁾	2
Total^(g)	100	100	100	100	100	100
Substance use form status						
Form accepted	93	92	93	78	83	80
Form non-response ^(h)	7	8	7	9	7	8
Form status not unknown	13	10	12
Total	100	100	100	100	100	100

(a) Data from 2002 NATSIS.

(b) Includes painkillers, tranquilisers and sleeping pills.

(c) Includes heroin, cocaine, petrol, LSD/synthetic hallucinogens, naturally occurring hallucinogens, ecstasy/designer drugs, and other inhalants. Includes methadone in 2004–05.

(d) Sum of components may be more than the total as persons may have reported more than one type of substance used in last 12 months.

(e) Includes 'whether used substances in last 12 months' not known.

(f) Includes 'whether ever used substances' not known.

(g) People who accepted the substance use form.

(h) Includes refusals.

(i) Estimate has a relative standard error of 25% to 50% and should be used with caution.

(j) Estimate has a relative standard error of greater than 50% and is considered too unreliable for general use.

Source: ABS 2006.

Substance use by selected health and population characteristics

- In 2004–05, a higher proportion of Indigenous persons aged 15 years and over who were recent substance users (used in the last 12 months) reported they were currently daily smokers and drank at risky/high-risk levels than Indigenous persons who had never used illicit substances (Table 2.20.5).
- Indigenous persons who were recent substance users were also more likely to be unemployed, renters and have experienced stressors in the last 12 months than persons who had never used illicit substances.

Table 2.20.5: Substance use status, by selected health and population characteristics, persons aged 15 years and over,^{(a)(b)} non-remote areas, 2004–05

	Never used illicit substances	Ever used substances ^(a)	Recent substance use ^(b)
	(per cent)		
Self-assessed health status			
Excellent/very good	46	51	35
Good	31	31	40
Fair/poor	23	18	25
Total	100	100	100
Other substance use^(c)			
Current daily smoker	37	50	69
Risky/high-risk alcohol consumption (3 day)	31	41	56
Risky/high-risk alcohol consumption (7 day)	12	15	27
Gross weekly equivalised income			
1 st quintile	34	31	35
4th and 5th quintile	18	20	17
Financial stress—unable to raise \$2,000 within a week for something important			
	42	37	49
Highest year of school completed^(d)			
Year 12	28	28	24
Year 11	9	16	14
Year 10	29	32	32
Year 9 or below ^(e)	35	24	30
Total^(d)	100	100	100
Whether has non-school qualification^(e)			
Has a non-school qualification	38	41	37
Does not have a non-school qualification	62	59	63
Total^(d)	100	100	100

(continued)

Table 2.20.5 (continued): Substance use status, by selected health and population characteristics, persons aged 15 years and over, non-remote areas, 2004–05.

	Never used illicit substances	Ever used substances ^(a)	Recent substance use ^(b)
	(per cent)		
Employment			
Employed CDEP	4	3	5
Employed non-CDEP	44	58	45
<i>Total employed</i>	<i>49</i>	<i>61</i>	<i>50</i>
Unemployed	9	7	11
Not in the labour force	43	33	39
Total	100	100	100
Housing			
Owner	37	36	24
Renter ^(f)	61	63	73
Stressors in last 12 months^(c)			
Serious illness or disability	27	31	33
Witness to violence	8	11	15
Abuse or violent crime	8	14	14
Other stressors	68	73	81
<i>Total experienced stressors</i>	<i>75</i>	<i>79</i>	<i>86</i>
No stressors	25	20	14
Total^(g)	100	100	100

- (a) People who accepted the substance use form.
 (b) Excludes data obtained through child proxy.
 (c) Persons aged 18 years and over.
 (d) Persons not still at school.
 (e) Includes persons who never attended school.
 (f) Excludes boarders.
 (g) Includes whether experienced stressor not stated and refusals.

Source: ABS and AIHW analysis of 2004–05 NATSIHS.

Multiple drug use

- In 2004–05, approximately 20% of Indigenous males and 17% of Indigenous females aged 15 years and over had used one substance in the last 12 months and 12% of Indigenous males and 7% of Indigenous females had used three or more substances in the last 12 months (Table 2.20.6).

Table 2.20.6: Multiple drug use, by sex: Aboriginal and Torres Strait Islander persons aged 15 years and over, 2004–05^{(a)(b)}

	Did not use substances in last 12 months ^(c)	Used one substance ^(d)	Used 2 or more substances ^(d)
Males	65	20	12
Females	73	17	7
Persons	69	18	10
Total number	114,952	30,592	16,121

(a) Persons who responded to the substance use forms.

(b) Self reported data.

(c) Includes never used a substance and persons who used substances but not in the last 12 months.

(d) Number of substances used in the last 12 months.

Source: ABS & AIHW analysis of 2004–05 National Aboriginal and Torres Strait Islander Health Survey

Detainees and drug use

The AIC Drug Use Monitoring in Australia (DUMA) survey reports on drug use among police detainees at seven police stations in metropolitan areas in South Australia, New South Wales, Queensland and Western Australia. The survey is by a voluntary questionnaire and drug use are confirmed by a urine sample provided by the detainee. Data from the 2005 survey is presented in Table 2.20.7 below.

- In 2005, a higher proportion of Indigenous detainees tested positive to drugs than non-Indigenous detainees in all seven police stations surveyed.
- The proportion of Indigenous detainees testing positive to drugs ranged from 62% and 85% for Indigenous detainees compared to between 47% and 73% for non-Indigenous detainees.
- Cannabis was the most common drug for which both Indigenous and non-Indigenous detainees tested positive. Methylamphetamine was also a common drug to which Indigenous and non-Indigenous detainees tested positive. Multiple drugs were tested positive in between 21% to 43% of Indigenous detainees and 23% to 38% of non-Indigenous detainees.

Table 2.20.7: Detainees at selected police stations, by drug use and Indigenous status, 2005

	Adelaide + Elizabeth (SA)		Bankstown + Parramatta (NSW)		Brisbane + Southport (Qld)		East Perth (WA)	
	Indigenous	Non-Indigenous	Indigenous	Non-Indigenous	Indigenous	Non-Indigenous	Indigenous	Non-Indigenous
	(per cent)							
Tested positive to a drug								
Benzodiazepines	30.3	20.6	33.3	15.8	21.3	19.3	14.2	22.6
Cannabis	80.0	60.5	50.0	34.4	59.8	51.0	73.1	57.2
Cocaine	0.0	0.7	4.2	3.7	0.0	0.6	0.0	0.0
Heroin	9.7	9.3	4.2	15.2	5.5	14.3	6.0	11.1
Methylamphetamine	26.9	35.6	25.0	12.3	28.4	23.1	29.1	33.0
Multiple drugs	42.8	37.5	20.8	22.9	35.4	29.2	32.1	37.6
Subtotal tested positive to a drug^(a)	84.8	72.9	66.7	47.4	66.9	62.2	79.9	69.0
Did not test positive to a drug	15.2	27.1	33.3	52.6	33.1	37.8	20.2	31.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total number	145	734	24	462	127	1,010	134	306

(a) Proportion who tested positive to a least one drug. Sum of components with add to more than the subtotal as detainees can test positive to more than one type of drug.

Source: AIHW analysis of AIC, Drug Use Monitoring in Australia Program (DUMA) 2005.

Hospitalisations

Table 2.20.8 presents hospitalisations related to drug use for the period July 2002 to June 2004 in Queensland, Western Australia, South Australia and the Northern Territory.

- For the period July 2002 to June 2004, in Queensland, Western Australia, South Australia and the Northern Territory, there were 2,525 hospitalisations of Indigenous Australians related to substance use (Table 2.20.8). This represented 0.8% of total hospitalisations of Indigenous Australians in these jurisdictions.
- Indigenous Australians were hospitalised for conditions related to substance use at around twice the rate of other Australians.
- Poisoning due to anti-epileptic, sedative-hypnotic and anti-Parkinson's drugs, poisoning due to antibiotics and hormones, and poisoning due to psychotropic drugs were responsible for 14%, 12% and 10% respectively of all hospitalisations of Indigenous Australians related to substance use over the period June 2003 to July 2004. Indigenous Australians were hospitalised for the first two types of poisoning at twice the rate of other Australians.
- Mental and behavioural disorders due to use of cannabis and use of multiple drug and psychoactive substances were both responsible for 11% of all hospitalisations of Indigenous Australians related to substance use. Indigenous Australians were hospitalised for these disorders at five and three times the rate of other Australians respectively.
- Indigenous Australians were hospitalised for mental and behavioural disorders from use of volatile solvents at around 22 times the rate of other Australians.

Table 2.20.8: Main types of hospitalisations related to drug use in Qld, WA, SA and NT, July 2002 to June 2004^{(a)(b)(c)(d)}

	Indig.		Other ^(e)		Indigenous			Other ^(e)			Rate Ratio ^(f)
	Number	Per cent	Number	Per cent	Rate per 1,000 ^(f)	95% LCL ^(g)	95% UCL ^(h)	Rate per 1,000 ^(f)	95% LCL ^(g)	95% UCL ^(h)	
Poisoning											
Antiepileptic, sedative-hypnotic and anti-Parkinson's drugs (T42)	361	6,608	14.3	19.3	0.7	0.6	0.8	0.5	0.4	0.5	1.5*
Antibiotics and hormones (T36–T39)	293	4,845	11.6	14.1	0.5	0.4	0.6	0.3	0.3	0.3	1.5*
Psychotropic drugs, includes antidepressants (T43)	258	5,722	10.2	16.7	0.4	0.4	0.5	0.4	0.4	0.4	1.1
Narcotics, including opium, heroin, methadone and cocaine (T40)	78	1,424	3.1	4.2	0.1	0.1	0.2	0.1	0.1	0.1	1.3
Toxic effect of organic solvents (T52)	60	220	2.4	0.6	0.1	0.1	0.1	—	—	—	4.5*
Accidental poisoning											
Antidepressants and barbiturates (X41)	220	3,669	8.7	10.7	0.4	0.3	0.4	0.3	0.2	0.3	1.5*
Unspecified (includes glues and paints) (X49)	106	1,846	4.2	5.4	0.2	0.1	0.2	0.1	0.1	0.1	1.4*
Narcotics (includes cannabis, cocaine, heroin, opium and methadone) and hallucinogens (X42)	80	1,267	3.2	3.7	0.1	0.1	0.2	0.1	0.1	0.1	1.5*
Organic solvents, including petroleum derivatives (X46)	63	215	2.5	0.6	0.1	0.1	0.1	—	—	—	4.5*
Mental/behavioural disorders											
from use of cannabinoids (F12)	284	1,246	11.2	3.6	0.4	0.4	0.5	0.1	0.1	0.1	4.8*
from use of multiple drug and psychoactive substances (F19)	269	1,924	10.7	5.6	0.4	0.4	0.5	0.1	0.1	0.1	3.0*
from use of other stimulants (F15)	226	2,575	9.0	7.5	0.4	0.3	0.4	0.2	0.2	0.2	2.0*
from use of volatile solvents (F18)	99	84	3.9	0.2	0.1	0.1	0.2	—	—	—	21.5*
from use of opioids (F11)	60	1,746	2.4	5.1	0.1	0.1	0.1	0.1	0.1	0.1	0.9
from use of sedatives (F13)	15	759	0.6	2.2	—	—	—	0.1	—	0.1	0.5*
from use of cocaine (F14)	n.p.	33	0.1	0.1	n.p.	n.p.	n.p.	—	—	—	n.p.

(continued)

Table 2.20.8 (continued): Main types of hospitalisations related to drug use in Qld, WA, SA and NT, July 2002 to June 2004^{(a)(b)(c)(d)}

	Indig.		Other ^(e)		Indigenous			Other ^(e)			Rate Ratio ⁽ⁱ⁾
	Number	Per cent	Number	Per cent	Rate per 1000 ^(f)	95% LCL ^(g)	95% UCL ^(h)	Rate per 1000 ^(f)	95% LCL ^(g)	95% UCL ^(h)	
Other											
Acute hepatitis C (B17.1)	6	93	0.2	0.3	—	—	—	—	—	—	2.0
Maternal care for suspected damage to foetus by drugs (O35.5)	n.p.	11	0.1	—	n.p.	n.p.	n.p.	—	—	—	n.p.
Neonatal withdrawal symptoms from maternal use of drugs of addiction (P96.1)	43	332	1.7	1.0	—	—	—	—	—	—	1.6*
Total	2,525	34,287	100.0	100.0	4.1	3.9	4.3	2.4	2.4	2.4	1.7*

* Represents results with statistically significant differences in the Indigenous/non-Indigenous comparisons.

(a) Data are from public and most private hospitals. Excludes private hospitals in the Northern Territory.

(b) Categories are based on the ICD-10-AM (National Centre for Classification in Health 2004).

(c) Financial year reporting.

(d) Data are reported by state/territory of usual residence of the patient hospitalised and are for Western Australia, South Australia, the Northern Territory and Queensland only. These four jurisdictions are considered to have adequate levels of Indigenous identification, although the level of accuracy varies by jurisdiction and hospital. Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations. Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in the other jurisdictions.

(e) Other includes hospitalisations of non-Indigenous people and those for whom Indigenous status was not stated.

(f) Directly age standardised using the Australian 2001 Standard population.

(g) LCL = lower confidence limit.

(h) UCL = upper confidence limit.

(i) Rate ratio Indigenous:Other.

Source: AIHW analysis of AIHW National Hospital Morbidity Database.

Data quality issues

National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) and National Aboriginal and Torres Strait Islander Social Survey (NATSISS)

The NATSIHS and NATSISS both use the standard Indigenous status question. The survey samples were specifically designed to select a representative sample of Aboriginal and Torres Strait Islander Australians and thus overcome the problem inherent in most national surveys with small and unrepresentative Indigenous samples. As with other surveys, the NATSIHS and NATSISS are subject to sampling and non-sampling errors. Calculations of standard errors and significance testing help to identify the accuracy of the estimates and differences.

Information recorded in these surveys are essentially 'as reported' by respondents. The ABS makes every effort to collect accurate information from respondents, particularly through careful questionnaire design, pre-testing of questionnaires, use of trained interviewers and assistance from Indigenous facilitators. Nevertheless, some responses may be affected by imperfect recall or individual interpretation of survey questions.

Non-Indigenous comparisons are available through the National Health Survey (NHS) and the 2002 General Social Survey. The NHS was conducted in major cities, regional and remote areas, but very remote areas were excluded from the sample. Time series comparisons are available through the 1995 and 2001 National Health Surveys and the 1994 National Aboriginal and Torres Strait Islander Survey.

In remote communities there were some modifications to the NATSIHS and NATSISS content in order to address language and cultural appropriateness in traditional communities, as well as to assist respondents in understanding the concepts. Some questions were excluded and some reworded. Also, paper forms were used in communities in remote areas and computer-assisted interview (CAI) instruments were used in non-remote areas. The CAI process included built in edit checks and sequencing.

Further information on NATSIHS and NATSISS data quality issues can be found in the national publications (ABS 2004a; 2006).

Substance use data

The sensitive nature of many of the issues surrounding substance use could also influence responses to these questions. Any data that are self-reported are likely to underestimate circumstances that the respondent may feel frightened or ashamed of or be unwilling to admit to the data collector, such as drugs or other substances including inhalant and substance use.

The substance use questions in the 2002 NATSISS were based on the National Drug Strategy Household Survey (NDSHS) questions and had a response rate of over 90%. In non-community areas a voluntary self-enumerated form was used to collect this information whereas in community areas, respondents were required to respond verbally to questions asked by an interviewer. The very low prevalence for substance use reported in community areas was assumed to be the result of the use of direct questioning in community areas leading to a significant adverse effect on both the level of response and the quality of responses to questions on substance use. For this reason, information on substance use in remote areas was considered to be unreliable and was not released.

Data on illicit substance use in the 2004–05 NATSIHS were only collected in non-remote areas using a voluntary self-completed form. This allowed respondents privacy in reporting this information, although this may have been affected by the presence of other household members at interview.

(continued)

Data quality issues (continued)

Where proxies were being used for people aged 15–17 years, permission was requested to provide the form to the child. If permission was not received, the form was not completed. Forms were not provided to proxies.

Items that distinguished between non-medical use and medical use were painkillers, tranquillisers and methadone.

Data may be compared with the 2002 NATSISS (excluding information regarding methadone which was only collected in the 2004–05 survey). Account of the difference in the non-response rate should also be considered, with NATSIHS having a 22% non-response rate compared to 10% for NATSISS.

National Drug Strategy Household Survey (NDSHS)

The National Drug Strategy Household Survey (NDSHS) collects information relating to drug use in Australia. The sample size for the 2004 survey was 29,445 persons aged 12 years or older.

The NDSHS does not have an enhanced Indigenous sample. Therefore, only a small number of Indigenous respondents are picked up in this survey. In 2004, 463 Indigenous respondents were included. The sample size for Indigenous Australians is very small and therefore the estimates should be interpreted with caution (ABS & AIHW 2005). This small Indigenous sample size would also limit the reliability of time series analysis.

NDSHS data are reportable by the national level only. Data are not available for remoteness areas, regional areas and state and territory levels.

AIC Drug Use Monitoring in Australia (DUMA)

The Indigenous status of the detainee is established in the questionnaire by the following question: 'What is your ethnic background?'. (If the respondent mentions 'Australian' but not 'Aboriginal' prompt: 'Do you consider yourself an Aboriginal or Torres Strait Islander?'.)

It is likely that this question will underestimate the number of Indigenous persons being detained through a reluctance on the part of detainees to identify as Indigenous.

This survey is conducted at police stations in selected metropolitan areas and does not provide regional coverage. In addition, the actual number of detainees questioned is quite low, which does not permit great analysis of the Indigenous data. Finally, the figures do not permit national coverage, but instead analysis by state is recommended.

Future reporting of these data will include the Victorian and Northern Territory police station data when these become available from the 2006 calendar year onwards.

Hospital separations data

Separations

The number and pattern of hospitalisations can be affected by differing admission practices among the jurisdictions and from year to year, and differing levels and patterns of service delivery.

Indigenous status question

Some jurisdictions have slightly different approaches to the collection and storage of the standard Indigenous status question and categories in their hospital collections. The not stated category is missing from several collections. It is recommended that the standard wording and categories be used in all jurisdictions (AIHW 2005).

(continued)

Data quality issues (continued)

Under-identification

The incompleteness of Indigenous identification means the number of hospital separations recorded as Indigenous is an underestimate of hospitalisations of Aboriginal and Torres Strait Islander peoples. While the identification of Indigenous people in hospitalisations is incomplete in all states and territories, four jurisdictions (Queensland, Western Australia, South Australia and the Northern Territory) have been assessed as having better identification in 2003–04 (AIHW 2005a). It has therefore been recommended that reporting of Indigenous hospital separations be limited to aggregated information from Queensland, Western Australia, South Australia and the Northern Territory.

The proportion of the Indigenous population covered by these four jurisdictions is 60%. The following caveats have also been recommended:

- *Interpretation of results should take into account the relative quality of the data from the jurisdictions included (currently a degree of Indigenous under-identification in Western Australia and relatively marked Indigenous under-identification in Queensland data).*
- *Data for these four jurisdictions over-represent Indigenous populations in less urbanised and more remote locations.*
- *Hospitalisation data for four jurisdictions should not be assumed to represent the hospitalisation experience in other jurisdictions (ABS & AIHW 2005a).*

Numerator and denominator

Rate and ratio calculations rely on good numerator and denominator data. The changes in the completeness of identification of Indigenous people in hospital records may take place at different rates than changes in the identification of Indigenous people in other administrative collections and population censuses. Denominators used here are sourced from the ABS's Experimental estimates and projections: Aboriginal and Torres Strait Islander Australians 1991 to 2009 (ABS 2004b).

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