Heroin Use in Illinois:
A Ten-Year Multiple Indicator Analysis, 1998 to 2008

EXECUTIVE SUMMARY AND FINDINGS

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Executive Summary

Chicago in the National Comparisons
The Chicago metropolitan area ranked among the worst nationally for heroin-related problems in the following:

- First in the number of individuals admitted to the emergency department.
- First in the number and rate of females entering the emergency department.
- First in the number of men admitted to the emergency department.
- First in the number and rate of individuals aged 21 and older admitted to the emergency department.
- First in the number of African Americans admitted to the emergency department.
- First in the percentage of arrestees in the Cook County jail testing positive for heroin.
- First in the percentage of white arrestees testing positive for heroin.
- First in the percentage of arrestees aged 21 and older testing positive for heroin.
- Second in the number of whites and Latinos admitted to the emergency department.

Major Mortality Trends in the Chicago Metropolitan Area
There have been large increases in heroin overdoses in the collar counties:

- In Lake County, deaths increased by 130 percent from 2000 to 2009.
- In just three years, deaths in McHenry County increased by 150 percent.
- In just two years, deaths in Will County have doubled.

Overall, Cook County deaths have decreased by 16 percent over the 10-year period:

- White women were the only demographic group that experienced increasing heroin-related deaths in Cook County from 1998 to 2008 (40 percent increase).

Major Trends in Heroin Use

- Heroin has become the second most common drug after alcohol and the most common illegal substance for which individuals enter treatment in Illinois. In 1998, heroin use was the fourth most common reason Illinoisans entered publicly funded treatment.

Public Treatment Admissions in Illinois by Number and Rank 2008 to 1998 (TEDS)

<table>
<thead>
<tr>
<th>Substance</th>
<th>2008 Rank</th>
<th>2008 Number</th>
<th>1998 Rank</th>
<th>1998 Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>1</td>
<td>20,265</td>
<td>1</td>
<td>16,663</td>
</tr>
<tr>
<td>Heroin</td>
<td>2</td>
<td>17,411</td>
<td>4</td>
<td>4,150</td>
</tr>
<tr>
<td>Marijuana</td>
<td>3</td>
<td>14,064</td>
<td>3</td>
<td>6,893</td>
</tr>
<tr>
<td>Cocaine</td>
<td>4</td>
<td>10,849</td>
<td>2</td>
<td>4,150</td>
</tr>
<tr>
<td>Methamphetamines</td>
<td>5</td>
<td>1,396</td>
<td>5</td>
<td>125</td>
</tr>
<tr>
<td>Opiates</td>
<td>6</td>
<td>745</td>
<td>6</td>
<td>99</td>
</tr>
</tbody>
</table>
Admissions to publicly funded treatment for heroin have increased fourfold (320 percent) from 1998 to 2008.
Injection drug use increased fivefold over the 10-year period.
The majority of whites admitted to treatment in 2008 injected heroin (67 percent), compared to Latinos (42 percent) and African Americans (9.5 percent).
Younger white users were the most likely to inject.

Regional Changes by Age: Chicago and the Suburban Areas
Suburban individuals discharged for heroin tended to be young, as compared to discharges from Chicago:
- Of the teens discharged from hospitals for heroin in 2007, just 12 percent lived in Chicago, 25 percent were from suburban Cook County and 38 percent were from the collar counties.
- From 2008 to 2009, heroin discharges among teens continued to increase in the suburbs, by 27 percent in suburban Cook County and 46 percent in the collar counties. Chicago discharges declined by 1 percent.

Number of Hospital Discharges for Heroin/Opiates among 15 to 19 Year Olds in Illinois and Percent Change by Region: 1998 and 2007

<table>
<thead>
<tr>
<th>Region</th>
<th>1998</th>
<th>2007</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago</td>
<td>161</td>
<td>60</td>
<td>-63%</td>
</tr>
<tr>
<td>Suburban Cook</td>
<td>126</td>
<td>129</td>
<td>2%</td>
</tr>
<tr>
<td>Collar Counties</td>
<td>136</td>
<td>192</td>
<td>41%</td>
</tr>
<tr>
<td>Rest of Illinois</td>
<td>51</td>
<td>125</td>
<td>145%</td>
</tr>
<tr>
<td>Total</td>
<td>474</td>
<td>506</td>
<td>7%</td>
</tr>
</tbody>
</table>

In 2007, among individuals aged 20 to 24 discharged from the hospital for heroin problems, just 16 percent of those were from Chicago, 17 percent were from suburban Cook County, and 33 percent were from the collar counties.
From 2008 to 2009, hospital discharges within the 20 to 24 year old age cohort increased among those living in the suburbs, by 16 percent in suburban Cook County and 8 percent in the collar county suburbs. Discharges among those living in Chicago declined by 11 percent.

Number of Hospital Discharges for Heroin/Opiates among 20 to 24 Year Olds in Illinois and Percent Change by Region: 1998 and 2007

<table>
<thead>
<tr>
<th>Region</th>
<th>1998</th>
<th>2007</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago</td>
<td>642</td>
<td>213</td>
<td>-67%</td>
</tr>
<tr>
<td>Suburban Cook</td>
<td>193</td>
<td>234</td>
<td>21%</td>
</tr>
<tr>
<td>Collar Counties</td>
<td>145</td>
<td>446</td>
<td>208%</td>
</tr>
<tr>
<td>Rest of Illinois</td>
<td>68</td>
<td>471</td>
<td>593%</td>
</tr>
<tr>
<td>Total</td>
<td>1,048</td>
<td>1,364</td>
<td>30%</td>
</tr>
</tbody>
</table>
Among older users discharged from the hospital for heroin, the majority lived in Chicago:
- Within the 40 to 49 year old age cohort, 78 percent lived in Chicago, 10 percent lived in suburban Cook County and just 6 percent lived in the collar counties

Number of Hospital Discharges for Heroin/Opiates among 40 to 49 Year Olds in Illinois and Percent Change by Region: 1998 and 2007

<table>
<thead>
<tr>
<th>Region</th>
<th>1998</th>
<th>2007</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago</td>
<td>6,849</td>
<td>10,327</td>
<td>51%</td>
</tr>
<tr>
<td>Suburban Cook</td>
<td>567</td>
<td>1,324</td>
<td>134%</td>
</tr>
<tr>
<td>Collar Counties</td>
<td>273</td>
<td>817</td>
<td>199%</td>
</tr>
<tr>
<td>Rest of Illinois</td>
<td>287</td>
<td>730</td>
<td>154%</td>
</tr>
<tr>
<td>Total</td>
<td>7,976</td>
<td>13,198</td>
<td>65%</td>
</tr>
</tbody>
</table>

Regional Changes by Race: Chicago and the Suburban Areas

As seen in the publicly funded treatment data, there are also race and region variations in hospital discharges for heroin-related problems.

- Individuals discharged from hospitals living in the suburban areas of the region and the rest of Illinois are overwhelmingly white.

Hospital Discharges for Heroin/Opiates by Area and Race: 2009 (IDPH)
Changes in Heroin Use by Race

- From 1998 to 2008, the number of whites entering publicly funded treatment increased more than six fold and the number of African Americans and Latinos more than tripled.
- Whites now make up more than one quarter (26 percent) of all public treatment admissions compared to just 18 percent in 2008.
- The profile of publicly funded treatment admissions has become increasingly white and decreasingly African American in all of Illinois’s 10 metropolitan areas during the past decade.
Changes in Heroin Use by Race and Age

White users are more likely to be young and African Americans are more likely to be older:
- In publicly funded treatment in 2008, nearly 70 percent of those under age 18 were white.
- Hospital discharges among those aged 15 to 19 were 81 percent white in 2009.
- Of those aged 18 to 24 entering publicly funded treatment facilities in 2008, 83 percent were white.
- Of those aged 20 to 24 released from the hospital for heroin-related problems in 2009, 79 percent were white.

The vast majority of those aged 35 and older treated for heroin were African American:
- Seventy-four percent of those aged 40 to 49 discharged from the hospital for heroin in 2009 were African American.
- In 2008, 86 percent of those aged 45 to 54 entering public treatment facilities were African American.

Percentage of Whites and African Americans Entering Publicly Funded Treatment: 2008 (TEDS)
Overview of Findings

National data, including emergency department and jail monitoring programs, suggests that the Chicago metropolitan area has one of the worst—if not the worst—heroin problems in the country.

Chicago ranks first or second in the nation in emergency department use for heroin-related problems:

- Chicago had the largest number of emergency department mentions for heroin in the nation. The 23,000 mentions are nearly 50 percent higher than New York City’s, the second-ranking metropolitan area.
- In the rate of heroin admissions to the emergency department, Chicago ranked second in the nation behind Boston, though the rates per 100,000 individuals were nearly the same (250 compared to 259).
- Chicago ranked first in the nation for the number of African Americans entering the emergency department for heroin, with more than 14,000 admitted in 2008. This number was nearly three times greater than New York City’s, which had just over 5,000 African Americans admitted to the emergency department for heroin.
- Chicago ranked second behind Boston in the number of whites admitted to the emergency department, but ahead of New York City.
- Chicago ranked first in the number of men admitted to the emergency department for heroin (over 15,000 mentions). Chicago ranked second behind Boston in the rate of males per 100,000 admitted to the emergency department (331 to 363).
- Chicago ranked first in the nation for the number (n=8,265) and the rate of females entering the emergency department for heroin (170 per 100,000). The proportion of women to men entering emergency departments in the Chicago metro area was 2 to 3, the highest proportion of women to men in the country.

Cook County Jail arrestees and detainees rank very high in heroin use:

- Cook County jail had the highest percentage of detainees reporting and testing positive for heroin use (29 percent) in the nation, according to the Arrestee Drug Abuse Monitoring Program. Arrestees in Chicago also reported the most days of heroin use (25.8 out of 30), suggesting that those testing positive for heroin have high rates of dependency.
- Unlike other cities, where black arrestees were more likely than any other race to test positive for drugs at the time of arrest, whites in Chicago were more likely to test

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1 Drug Abuse Warning Network (DAWN), in 2008
2 The Arrestee Drug Abuse Monitoring Program (ADAM) in 2008
positive for heroin (41 percent) compared to African Americans (25.3 percent) or Latinos (24.3 percent).

- Chicago also had the highest percentage of arrestees testing positive for heroin among those aged 21 to 25, 26 to 30, 31 to 35, and among those 36 and older.

Heroin is the now the second most common reason for entering publicly funded drug treatment, after alcohol:

- In 1998, heroin was the fourth most common reason for individuals to enter Illinois’ publicly funded treatment system. In 2008, heroin was the second most common reason to enter treatment, behind alcohol.
- The number of individuals entering publicly funded treatment for heroin increased fourfold (320 percent) from 4,150 admissions in 1998 to more than 17,000 in 2008.

Illinois hospitals are seeing far more users now than ten years ago:

- In 1998, 23,000 individuals were discharged from Illinois’ hospitals for heroin abuse, dependency or poisoning, but in 2007, this number had increased by more than 50 percent to more than 34,000 individuals.
- Hospital discharges from 1998 to 2007 are not comparable to discharges from 2008 and later because of changes in recording procedures. However, hospital discharges for heroin increased 12 percent within one year, from nearly 36,000 in 2008 to over 40,000 in 2009.

Suburban counties have experienced significant increases in heroin deaths:

- Lake County deaths attributable to heroin have increased 130 percent, from 13 in 2000 to 30 in 2009.
- In just three years, heroin deaths in McHenry County increased by 150 percent, from 6 heroin overdoses in 2006 to 15 in 2009.
- In Will County, heroin deaths increased by 93 percent in just two years, from 17 in 2008 to 29 in 2009. Nearly all of those who have died have been male, and 83 percent were white. Nearly 60 percent of the deaths occurred among those aged 34 or younger.

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3 According to our analysis of Illinois’ publicly funded treatment admissions, from the Treatment Episode Data Set (TEDS), collected by the Substance Abuse Mental Health Services Administration (SAMHSA)
4 According to hospital discharge data provided by the Illinois Department of Public Health
5 Mortality data collected from interviews with medical examiners throughout the metro area and analysis of heroin-related mortality in Cook County.
The Cook County heroin mortality profile has changed. Fewer die now, but there are some new patterns evident among those dying from heroin overdose:

- In Cook County, mortality from heroin decreased 16 percent over the previous 10 years, from 394 deaths in 1998 to 329 in 2008. Despite increasing signs of heroin use in other indicators, mortality numbers are likely to have declined significantly because of an overdose prevention program run by a local needle exchange. In 2009, the Illinois State legislature made it possible to expand these programs across the state.

The profile of those who have died in Cook County has changed significantly, becoming whiter and more female since 1998. Medical examiner data demonstrates:

- In 1998, the percentage of African Americans and whites who died from heroin in Cook County was roughly equal (47 percent to 53 percent). In 2008, African Americans made up 39 percent of those who died, while whites made up 61 percent. Therefore, the ratio of black heroin deaths to white heroin deaths in Cook County is 2 to 3.

Whites who died from heroin related causes in Cook County were younger than blacks in both 1998 and 2008:

- More than 97 percent of those decedents under age 25 were white in 2008 compared to 89 percent in 1998. In 2008, 83 percent of heroin related deaths among those aged 25 to 34 were white, but in 1998, whites made up less than 50 percent of deaths among this age group.
- The only demographic group to have an increase in heroin related deaths in Cook County was white women. Heroin related deaths among white women increased by 40 percent, from 31 in 1998 to 43 in 2008.

Regional Changes

Treatment admissions for the Chicago metropolitan area rose 313 percent, from 3,762 in 1998 to over 15,000 in 2008. Treatment admissions also increased substantially in every other metropolitan area in Illinois except for Decatur:

- Publicly funded treatment admissions for heroin increased by 1,500 percent in Bloomington (from 7 admissions in 1998 to 112 in 2008), sevenfold in Peoria (from 24 in 1998 to 174 in 2008) and Rockford (89 in 1998 to 643 in 2008) and fivefold in Springfield (23 in 1998 to 125 in 2008).

Hospital discharges for heroin increased significantly across each Illinois region:

• Hospital discharges for heroin among suburban Cook residents doubled, from about 2,000 in 1998 to over 4,000 in 2007.
• Discharges among people living in the collar counties nearly tripled, from 1,000 discharges in 1998 to more than 3,200 in 2007.
• Discharges among people living in areas outside of Chicago, Cook County and the collar counties—the rest of Illinois—increased by 222 percent, from fewer than 1,000 discharges for heroin/opiates in 1998 to more than 3,100 in 2007.

Hospital discharges from 2008 to 2009 show large one year increases in individuals discharged from the hospital for heroin and other opiates:

• Heroin discharges among people from Chicago increased by 12 percent, from 23,866 to 26,678.
• Individuals from the collar counties discharged from hospitals for heroin increased 11 percent, from 4,033 to 4,466.
• Hospital discharges for heroin among people from suburban Cook County increased by 13 percent, from 4,373 individuals to nearly 5,000.

**Age, Region, and Treatment**

While those entering publicly funded treatment for heroin more than doubled, from just under 500 individuals in 1998 to nearly 1,200 individuals in 2008, the largest increases and numbers occurred among those aged 35 and older:

• Public treatment admissions among people aged 35 to 44 increased fourfold (337 percent) from 1,312 admissions in 1998 to 5,737 in 2008.
• Among those aged 45 to 54, the number of patients entering publicly funded treatment for heroin was 13 times higher in 2008 (n=4,791) than the number of patients entering treatment in 1998 (n=368).
• The largest percentage increase in the Chicago metro area occurred among those aged 55 and older. Admissions among this age cohort increased 2,281 percent, from just 57 individuals in 1998 to 1,357 individuals in 2008.

Most metro areas outside of Chicago had very young users accessing publicly funded treatment in 2008:

• In the Bloomington metropolitan area, those under age 25 comprised 51 percent of publicly funded treatment admissions for heroin, increasing to 88 percent of total treatment admissions when including individuals up to age 34
• Champaign has a similarly young profile of individuals entering public treatment for heroin. Thirty-six percent were under age 25, rising to 72 percent when including individuals up to age 34.
In East St. Louis, individuals aged 24 and younger comprised 31 percent of publicly funded heroin treatment admissions. The largest cohort in this metropolitan area was individuals aged 25 to 34, comprising nearly 50 percent of all treatment admissions.

In Peoria, 38 percent of adults entering public treatment for heroin in 2008 was under age 25 and 77 percent was under age 35.

Rockford had a similarly young public treatment profile in 2008. Forty-one percent of admissions were under age 25 (with 4 percent under age 18) and 74 percent were aged 34 or younger.

In Springfield, the largest age cohorts represented in the public treatment data were the 18 to 24 year olds and the 25 to 34 year olds. Each of those cohorts represented 35 percent of all treatment admissions, for a total of 71 percent of regional treatment admissions among individuals aged 34 and younger.

Age, Region and Hospital Discharges

There has been a decrease in the number of young people living in Chicago that were discharged from hospitals for heroin/opiate abuse, dependency and poisonings, while the number of young people living in the suburbs have increased. This pattern is demonstrated among all of the younger age cohorts, with those living in Chicago making up the minority of hospital discharges and individuals living in the suburbs comprising the majority. The largest numbers of older age discharges are more likely to live in the City of Chicago.

- Among those 15 to 19 year olds living in Chicago, the number of individuals discharged from hospitals decreased by 63 percent and the number of 20 to 24 year olds decreased by 67 percent from 1998 to 2007.
- From 1998 to 2007, the number of 20 to 24 year olds that lived in the suburbs increased significantly, by 21 percent in suburban Cook and 208 percent among those in the collar counties. This pattern continued for 2008 and 2009, increasing 16 percent among individuals in suburban Cook and 13 percent in the collar county suburbs.
- In 2009, among 30 to 39 year olds, 71 percent of those released from the hospital were from Chicago, while just 10 percent lived in suburban Cook and 10 percent lived in the collar counties.

The majority of teens discharged from the hospital for heroin live in the suburbs.

- Of those teens discharged from the hospital for heroin in 2007, just 12 percent were from Chicago, 25 percent were from suburban Cook County, and 38 percent were from the collar counties.
- Increases were apparent in the youngest users in the collar county suburbs in particular. Hospital discharges among 15 to 19 year olds increased 41 percent from 1998 to 2007.
• For the years 2008 and 2009, among teens living in the collar counties, discharges increased nearly 50 percent, from 223 discharges in 2008 to 326 discharges in 2009. This represents the largest increase of any age cohort in the region.

• In suburban Cook, the number of teens discharged from the hospital increased by 27 percent from 2008 (n=138) to 2009 (n=175).

Racial Changes

African Americans still make up the largest racial cohort of those receiving publicly funded treatment in Illinois. However, the number has increased more rapidly among whites—a pattern that we first noticed in 2004. Treatment admissions among whites continued to grow since then, reaching unprecedented levels.

• The number of whites entering publicly funded treatment increased by more than six fold (527 percent) from 1998 to 2008. Whites in 2008 comprised more than one-quarter of treatment admissions (26 percent), compared to just 18 percent of total publicly funded heroin treatment admissions in 1998.

• The number of African Americans and Latinos more than tripled (271 percent increase, and 293 percent increase respectively) from 1998 to 2008.

Hospital discharge data demonstrate the same racial demographic patterns as the public treatment data, with African Americans comprising 62 percent of hospital discharges, whites making up 28 percent, Latinos comprising 7 percent and all other races making up 3 percent of those discharged from hospitals for heroin in 2009.

Race and Treatment in Illinois

In all of the metropolitan areas, the profile of publicly funded treatment admissions has become increasingly white and decreasingly African American from 1998 to 2008. In 1998, whites made up 16 percent of publicly funded treatment admissions for heroin in the Chicago area. By 2008, however, whites increased to 20 percent, representing one out of five publicly funded treatment admissions. While this pattern of whites increasing as a percentage of treatment admissions is quite apparent in Chicago, it is important to note that African Americans still make up the largest percentage of those entering publicly funded treatment in the Chicago metropolitan area.

• In Champaign, white individuals entering public treatment for heroin comprised 27 percent of admissions in 1998 but rose to 70 percent of admissions in 2008.

• In Peoria, blacks were the majority racial group entering publicly funded treatment at 54 percent in 1998, but whites had become the majority of those entering publicly funded treatment in 2008 (77 percent).
In Rockford, the percentage of whites entering public treatment for heroin was 55 percent in 1998, but by 2008, they comprised 80 percent of treatment admissions.

Race and Hospital Discharges: Chicago and the Suburban Areas

- In 2009, the majority of Chicago individuals discharged from hospitals was African American (81 percent), followed by whites (8 percent) and Latinos (8 percent).
- In suburban Cook County, the majority of those discharged from hospitals for heroin were white (48 percent), followed by African Americans (37 percent), Latinos (7 percent) and all other races (10 percent).
- In the collar county suburbs, nearly 70 percent of those discharged from the hospital for heroin were white, followed by blacks (19 percent) and Latinos (8 percent).

Race and Age

Race and age work together to create two separate cohorts. Younger Illinois residents represented in both the public treatment and hospital discharge data tend to be white. Older patients in these data sources tend to become more African American. These differences help to create two distinct cohorts of heroin users in Illinois – a younger, white cohort and an older, African American cohort.

- In publicly funded treatment, nearly 70 percent of those under age 18 were white in 2008.
- Hospital discharges among those aged 15 to 19 were 81 percent white in 2009, increasing from 75 percent white in 2008.
- Of those aged 18-24 entering publicly funded treatment facilities in 2008, 83 percent were white.
- Of those aged 20 to 24 released from the hospital for heroin in 2009, 79 percent were white.
- In 2009, among those aged 25 to 34 admitted into public treatment facilities, 60 percent were white.
- In 2009, among those discharged from the hospital for heroin aged 40 to 49, 74 percent were African American and among those aged 50 and older, 72 percent were African American.
- Publicly funded treatment shows these same patterns: among those aged 45 to 54, 86 percent were black in 2008. Of those over age 55, 87 percent of those admitted to publicly funded treatment facilities were African American.
Data for race, age and geography are not available before 2008, when a change in recording procedures by the Illinois Department of Public Health allowed for race to be collected as a variable. All comparisons by race, age and geography come from the hospital discharges.

**Race, Age and Region: Chicago**

Hospital discharges for heroin/opiates are more likely to occur among older African Americans, with a significant increase in total percentage of discharges occurring among those aged 30 and older.

- Despite these overall patterns, within the youngest cohort discharged from the hospital in 2009 – those aged 15 to 19 – the majority of discharges were white (57 percent), followed by blacks (43 percent).
- Among 20 to 24 year olds, whites comprise 48 percent of the discharges versus 38 percent for blacks and 15 percent are Latino.
- Among those aged 25 to 29, 49 percent of discharges are black, followed by 35 percent white and 11 percent Latino.
- Seventy-three percent of 30 to 39 year olds, 85 percent of 40 to 49 year olds and 84 percent of individuals aged 50 and older are black discharges.

**Race, Age and Region: Suburban Cook County**

In the Suburban Cook region, the youngest discharges, individuals aged 29 and younger, are predominantly white, with the percentage of blacks increasing among older age cohorts.

- Within the youngest age groups, whites comprised 100 percent of the discharges among youth aged 15 to 19 years old
- Whites made up 79 percent of young adults aged 20 to 24 years old, Latinos comprised 10 percent and African Americans 5 percent.
- Of those aged 25 to 29 years old, whites comprised 68 percent of hospital discharges for heroin, blacks made up 18 percent and Latino 8 percent.
- Among those aged 30 to 39, though whites still comprise the majority (49 percent of the total), but African Americans make up 37 percent of this cohort.
- Blacks made up the majority among those aged 40 to 49 (54 percent), while whites comprised 37 percent
- Among the oldest age group (50 and older), African Americans comprised the majority at 50 percent, with whites making up 44 percent.
**Race, Age and Region: Collar Counties**

In the collar counties, as with the suburban Cook region, the youngest discharges are predominantly white, with African Americans increasing among older age groups. Unlike the other regions, however, whites constitute the majority in every age cohort:

- The collar county suburbs have the greatest number of young, white discharges of any of the regions detailed in this report.
- Eighty-four percent of 15-19 year olds discharged from the hospital for heroin were white, while 7 percent were Latino and 9 percent were all other races.
- Of those aged 20 to 24 who lived in the collar counties region, 84 percent were white, 9 percent were Latino and 7 percent were other races.
- Among those aged 25 to 29, whites comprised more than three quarters of hospital discharges for heroin, while African Americans made up just 4 percent and Latinos 12 percent.
- Sixty-five percent of discharges aged 30 to 39 were white, compared to 23 percent African American, and 7 percent Latino.
- Fifty-seven percent of those aged 40 to 49 were white, while nearly one-third (32 percent) were African American and 7 percent were Latino.
- Among the oldest individuals discharged from the hospital, 68 percent were white, 27 percent were black and 5 percent were Latino.

**Gender and Region in Treatment Admissions**

In Illinois, since 1998, the profile of individuals entering treatment for heroin has become more female. This pattern is seen in both the state level and in the metropolitan level data.

- Statewide, the percentage of women entering publicly funded treatment for heroin increased from 35 percent of all treatment admissions in 1998 to more than 40 percent of treatment admissions in 2008.
- Seven of Illinois’ metropolitan areas have experienced an increase in the percentage of females entering publicly funded treatment.
- In Chicago, about 35 percent of those entering public funded treatment in 1998 for heroin were females, but by 2008, 42 percent were female.
- The percentage of females entering Champaign’s publicly funded treatment more than doubled, from 13 percent in 1998 to 28 percent in 2008.
- The Quad cities also experienced a rise in female treatment populations. In 1998, 21 percent of those admitted to treatment were female, compared to 33 percent in 2008.
- Among publicly funded treatment admissions in Rockford, 38 were female in 1998, compared to 44 percent female in 2008.
Injection Drug Use

Injection drug use has increased dramatically over the past ten years by more than 400 percent. In 1998, less than 1,000 individuals who entered Illinois’ publicly funded treatment systems injected drugs. By 2008, however, nearly 5,000 individuals were injection drug users. Whether an individual injects or sniffs heroin is dependent on race and age:

- The majority of whites (67 percent) admitted to treatment in 2008 injected heroin, while 42 percent of Latinos and just 9.5 percent of African Americans injected.

Younger white users are more likely to inject than younger black users. Injection drug use rates declined among older whites and increased among older African Americans. Latinos were more likely than blacks to inject, but generally injected at lower rates than whites:

- Whites are by far the largest group of injection drug users in both total number and as a percentage of all injectors. About 60 percent of whites under the age of 18 indicated that they injected heroin at the time of public treatment admission.
- In 2008, nearly three quarters of whites aged 18-24 injected heroin as compared to 53 percent of blacks and 65 percent of Latinos.
- In 2008, among those aged 25-34, 70 percent of whites, 48 percent of Latinos and just 16 percent of African Americans indicated injection as the primary mode of administration.
- Of those aged 35 to 44, 55 percent of whites, 33 percent of Latinos, and just 5 percent of African Americans injected heroin.
- Of those individuals aged 45-54, 52 percent for Whites were the most likely to inject (52 percent), closely followed by Latinos (51 percent) and African Americans (10 percent).
- Fifty-nine percent of whites in the oldest cohort, people aged 55 and older, used injection as their mode of administration, again closely followed by Latinos at 51 percent. Just 17 percent of older African Americans aged 55 and older injected heroin.

Policy Recommendations

Comprehensive Drug Education

Conversations with youth about heroin and heroin use may not come easy to communities that have little experience with this substance. When developing youth education approaches, including youth as key participants in the development of drug education curriculum and materials is beneficial for developing programs that will resonate with young people. Their participation can be achieved in a number of ways, including:

- Conducting focus groups with youth to assess their existing drug knowledge and what they would like to learn.
• Determining the best methods for delivering the information and whom youth would prefer to lead the drug education sessions.

• Identifying terminology and developing activities and materials that are reflective of their preferences and respectful of the challenges faced during adolescence (e.g. peer influence, distrust of adults/authority, and increasing desire for independence).

**Increase Treatment Funding**

There have been service cuts in all types of alcohol and drug treatment, including both residential, outpatient and detoxification services. Certain treatment modalities are underfunded in Illinois, including medically-assisted treatment (MAT) programs. MAT services include methadone and buprenorphine detoxification and maintenance for opiate dependence. With the increase in heroin use as the second most common reason for entering publicly funded treatment in Illinois, ensuring adequate treatment funding is particularly pertinent now.

**Increase Availability of Syringes and Syringe Exchange Programs**

Increases in injection drug use across the state, particularly in areas that have historically not had a large injection drug use population, should be countered by interventions to prevent individuals from contracting blood-borne pathogens (such as hepatitis or HIV) and experiencing other health problems associated with injection drug use (such as endocarditis and bacterial infections).

**Support Overdose Prevention and Naloxone Administration Efforts**

In 2009, Governor Quinn signed into law Public Act 06-361, an amendment to the Alcoholism and Other Drug Abuse and Dependency Act. Under the amendment (Section 5-23), entitled the Drug Overdose Prevention Program, the Illinois Division of Alcoholism and Substance Abuse (DASA) now has authority to publish reports and educational materials on drug overdose and promote health responses to prevent overdose deaths.

In the Chicago metropolitan area, the Chicago Recovery Alliance has been prescribing naloxone and providing training and education to its participants since 2001. In this time, nearly 2,000 lives have been saved as a result of this intervention. Now is the time to expand overdose prevention beyond Chicago and throughout Illinois.

**Provide Limited Protection for 911 Callers**

Several states have passed laws that have provided partial or full immunity from prosecution for selected drug offenses in the event that an individual calls 911 to report a drug overdose and request emergency assistance. The State of Washington recently passed such a law. To protect Illinois residents from an unnecessary overdose death, the state must create a law that provides protection for those who call 911 to report an overdose event.