



Drug Abuse Warning Network (DAWN), 1997: [United States]

Bibliographic Description

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Principal Investigator(s): United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Office of Applied Studies
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Scope of Study

Summary: The Drug Abuse Warning Network (DAWN) survey is designed to capture data on emergency department (ED) episodes that are induced by or related to the use of an illicit, prescription, or over-the-counter drug. For purposes of this collection, a drug "episode" is an ED visit that was induced by or related to the use of an illegal drug or the nonmedical use of a legal drug for patients aged six years and older. A drug "mention" refers to a substance that was mentioned during a drug-related ED episode. Because up to four drugs can be reported for each drug abuse episode, there are more mentions than episodes in the data. Individual persons may also be included more than once in the data. Within each facility participating in DAWN, a designated reporter, usually a member of the emergency department or medical records staff, was responsible for identifying drug-related episodes and recording and submitting data on each case. An episode report was submitted for each patient visiting a DAWN emergency department whose presenting problem(s) was/were related to their own drug use. DAWN produces estimates of drug-related emergency department visits for 50 specific drugs, drug categories, or combinations of drugs, including the following: acetaminophen, alcohol in combination with other drugs, alprazolam, amitriptyline, amphetamines, aspirin, cocaine, codeine, diazepam, diphenhydramine, fluoxetine, heroin/morphine, inhalants/solvents/aerosols, LSD, lorazepam, marijuana/hashish, methadone, methamphetamine, and PCP/PCP in combination with other drugs. The use of alcohol alone is not reported. The route of administration and form of drug used (e.g., powder, tablet, liquid) are included for each drug. Data collected for DAWN also include drug use motive and total drug mentions in the episode, as well as race, age, patient disposition, reason for ED visit, and day of the week, quarter, and year of episode.

Subject Term(s): demographic characteristics, drug abuse, drug dependence, drug overdose, drug use, emergencies, emergency services, health behavior, hospitalization, substance abuse
Geographic Coverage: United States
Time Period: 1997
Date(s) of Collection: 1997
Unit of Observation: -
Universe: Patients treated during 1997 in the emergency department of nonfederal, short-stay general hospitals that had a 24-hour emergency department. Eligible respondents were those patients who met the following criteria: (1) they were aged 6 years or older, (2) their presenting problem(s) was/were induced by or related to drug use, regardless of when the drug ingestion occurred, (3) the case involved the nonmedical use of a legal drug or any use of an illegal drug, (4) the patient's reason for taking the substance(s) included one of the following: (a) dependence, (b) suicide attempt or gesture, or (c) psychic effects.
Data Type: administrative records data, clinical data, survey data

Data Collection Notes: Because data are abstracted from medical records completed by hospital staff who treat the patients, the accuracy of these reports depends on their careful recording of these conditions. It is also important to recognize that DAWN does not provide a complete picture of problems associated with drug use, but rather focuses on the impact that these problems have on hospital emergency departments in the United States. If a person is admitted to another part of the hospital for treatment, or treated in a physician's office or at a drug treatment center, the episode would not be included in DAWN.

To protect the privacy of respondents, all variables that could be used to identify individuals have been encrypted or collapsed in the public use file. These modifications should not affect analytic uses of the public use file.

In May 1995, following a comprehensive review, changes were implemented in the computer programs that produce the DAWN estimates. The 1997 estimates are based on these corrected programs. Most of the errors were due to a miscalculation of the weights for hospitals that had undergone organizational changes after they were selected into the sample. Because the impact of these changes on the preliminary 1995 estimates was found to be small, 1994 estimates were not revised. The new DAWN estimation system was fully implemented for the 1995 year. Estimates for 1995 and subsequent years reflect those changes.

The data were collected and cleaned by Johnson, Bassin, and Shaw, Inc. Westat, Inc. created the weights and analytic files, and the National Opinion Research Center (NORC) created the public use file and codebook.

For more information, visit the DAWN Web site .

Methodology

Sample: More than 500 EDs that were part of a scientifically- selected sample of general hospitals in the country provided data for DAWN. The DAWN sample is constructed to produce estimates of substance abuse visits to emergency departments across the nation and to 21 oversampled metropolitan areas. The sample design of DAWN does not permit state-level estimates. Hospitals in the frame were stratified according to size, with hospitals reporting 80,000 or more annual emergency department visits assigned to a single stratum and selected with certainty. Additional strata were defined according to whether the hospital had an organized outpatient department or a chemical/alcohol inpatient unit. The 21 oversampled metropolitan areas include: Atlanta, GA, Baltimore, MD, Boston, MA, Buffalo, NY, Chicago, IL, Dallas, TX, Denver, CO, Detroit, MI, Los Angeles, CA, Miami, FL, Minneapolis, MN, New Orleans, LA, New York, NY, Newark, NJ, Philadelphia, PA, Phoenix, AZ, San Diego, CA, San Francisco, CA, Seattle, WA, St. Louis, MO, and Washington, DC.

Mode of Data collection: hospital medical records

Extent of Processing: Performed consistency checks. Created online analysis version with question text. Checked for undocumented or out-of-range codes.

Access and Availability

Note: -

Restrictions: Users are reminded by the Substance Abuse and Mental Health Services Administration that these data are to be used solely for statistical analysis and reporting of aggregated information, and not for the investigation of specific individuals or organizations.

Original Release: 1999-11-19

Version History: The last update of this study occurred on 2014-08-13.

2014-08-13 - Edited question text in ddi.xml file.

2008-03-04 - New files were added. These files included one or more of the following: Stata setup, SAS transport (CPORT), SPSS system, Stata system, SAS supplemental syntax, and Stata supplemental syntax files, and tab-delimited ASCII data file.

Dataset(s): DS1: Drug Abuse Warning Network (DAWN), 1997: [United States]