



Addiction Risk Among Israeli Adults: Findings from a 2024 National Epidemiological Survey

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Abstract

Background

Addiction is defined as physical and mental dependence on psychoactive substances or compulsive behavior. In 2022, the Ministry of Health began to transfer the provision of key services in the field of addiction from the Ministry of Health to the HMOs. As part of this process, the Department of Addiction Treatment at the Ministry of Health asked the Myers-JDC-Brookdale Institute to estimate the prevalence among Israeli adults of: (1) psychoactive substance use, (2) addictive behaviors related to gaming and sexual activity, and (3) individuals at risk of developing addiction. The survey was also intended to provide information on the extent of the population at risk of addiction in each of the HMOs, and to inform adapting the services provided to the needs of the insured.

Goals

1. Assess the extent of psychoactive substance use and the extent of risk of addiction to substances, gaming and sex in the adult population in Israel
2. Validate the ASSIST (WHO ASSIST 3.1) questionnaire for assessing the risk of addiction to gaming or sex in order to develop an accessible and valid tool for use by physicians in the HMOs for initial screening of addiction risk.
3. Identify characteristics of populations at risk for addiction and examine the relationship between demographic factors and addiction vulnerability.
4. Examine the extent of the services received by those at risk of addiction and their satisfaction with them.

Method

Online survey of the adult population in Israel – aged 18-70. The questionnaire was answered by 2,401 Jews and 524 Arabs. The survey included questions from the ASSIST screening tool for risk of addiction to various substances (such as alcohol, cannabis, cocaine). The ASSIST tool also included new questions regarding the risk of addiction to gaming and sex, which were also measured using the SSBA questionnaire for the purpose of validating the ASSIST questionnaire. The survey also included questions regarding services received for the treatment of addiction.

Key findings

Rates of risk for substance addiction. Among Jews, the highest rates of risk for addiction to substances were for alcohol (15.6%), cannabis (12.0%), and for sleep medications and sedatives (8.6%). Among Arabs, the highest risk rates were found for sedatives and sleep medications (12.6%), alcohol (11.9%), and inhalants (9.8%).

29.1% of Jews are at risk of addiction to one or more substances, of which 3.8% are at high risk. Among Arabs, 27.4% are at risk of addiction to one or more substances, of which 7.7% are at high risk. In both population groups, 1.1% of respondents reported substance use by injection in the past three months.

Validation of the ASSIST Questionnaire for Assessing the Risk of Addiction to Gaming and Sex and Establishing Thresholds for Relevant Indices. The ASSIST questionnaire, which was adapted to assess the risk of gaming or sex addiction, was found to be suitable for use in the survey since moderate to high correlations were obtained between ASSIST and the validated SSBA questionnaire. 8.3% of the Jewish respondents are at risk of gaming addiction and 9.0% are at risk for sex addiction. Among the Arab respondents, 19.3% are at risk of addiction to gaming and 18.0% are at risk for addiction to sex. The higher risk prevalence among Arabs may stem from cultural differences, particularly the negative self-perception of those who engage in behaviors that are perceived as unacceptable in Arab society.

Correlations between demographic characteristics and the risk of addiction. The chances of being at risk of addiction to most substances, to gaming and to sex are higher among men, young people, the non-religious, and those who are not married. In contrast, adults and women are more likely to be at risk of addiction to sleep medications and sedatives. Among Arabs, the risk of addiction to some substances and behaviors also varies according to education and district of residence.

Other characteristics related to the risk of addiction:

- 7.3% of Jewish respondents and 8.6% of Arab respondents are at risk of addiction to substances, gaming or sex also reported having a mental illness. These findings may indicate the rate of dual morbidity in the population (a combination of addiction and mental disorders). For all substances and behaviors examined, the risk of addiction is consistent with a higher probability of mental illness.
- The effect of the Israel-Hamas War – Respondents at risk of addiction were more likely to report a change in their behavior patterns since the outbreak of the war. A significant proportion of them increased their use of substances or gaming or sexually addictive behavior, whereas respondents who were not at risk were less likely to report a change.

Services received by those at risk of addiction. Most of the respondents at risk of addiction did not discuss the issue with a professional; those who did were most likely to discuss it with their family doctor. Most of the respondents at risk for addiction did not receive any assistance or services; those who did were most likely to receive help from a family doctor, a social worker at the department of social services or their HMO, or from the mental health services. Only about 50% of the Jewish respondents who received services were satisfied with them. The respondents felt that they would benefit mainly from support groups, social activities, counseling or mental health treatment, ongoing counseling, and financial assistance during the treatment period. Among the Arab respondents, assistance was also needed in entering employment. Among Jewish women alternative treatments were seen as potentially beneficial.

Recommendations

1. Use of the ASSIST questionnaire by HMOs as a digital tool for initial screening for the risk of addiction. Physicians should be trained to use it, while pointing out cultural differences between population groups.
2. Provision of services by HMOs, based on support groups and social activities, as well as designated comprehensive models for treating those with a dual diagnosis.
3. Follow-up studies including periodic surveys to monitor addiction risk rates, validate the ASSIST questionnaire, and examine the risk of gaming and sex addiction vis a vis a clinical diagnosis, as well as incorporating other addictive behaviors, such as gambling, into the ASSIST questionnaire, and an in-depth examination of the use of inhalants in the Arab population.