NATIONAL COUNCIL ON SUBSTANCE ABUSE

In collaboration with

THE INTER-AMERICAN DRUG ABUSE CONTROL COMMISSION (CICAD)

SIDUC SECONDARY SCHOOL SURVEY

2006

Acknowledgments

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Summary of Key Findings

This report contains indepth results from the 2006 survey of secondary school students in 2nd, 4th and 5th Forms. A total of 2,220 students in 23 schools completed questionnaires. The core section of the survey include questions on smoking, drinking, other drug use, perceptions of harm, attitude towards illegal drug use, access to drugs and various demographic indicators related to the respondents.

Smoking

- Lifetime prevalence of cigarette use was 21.3%. About one-fifth of all students reported having tried cigarettes. The annual prevalence was 7.6% and the current use prevalence was 3.5% (about one in every 29 students were currently smoking). One-year incidence rate was 6.6% and the one-month rate was 2.3%.
- Not many students felt that smoking cigarettes sometimes was very harmful
- For the most part students felt that inhaling second hand cigarette smoke was harmful (87.4%) while 8.1% did not know of the harm and 4.5% felt it was not harmful.
- Current use prevalence for smoking was about the same for both males and females (3.6% and 3.2% respectively).
- Smoking prevalence increased significantly as the frequency of behavioural and discipline problems increased.
- Cigarettes were most often obtained from friends (33.4%). The shop and street vendors accounted for 26.6% and only 9.7% were obtained from parents, brother/sister or other relatives.

Drinking

- More than seven of every ten students (74.7%) reported that they had an alcoholic beverage at some time in their life. The annual prevalence was 54.9% (more than half of all students had an alcoholic beverage in the past year) and 34% (a little more than one-third) were currently consuming alcoholic beverages.

- More than a quarter of the students had used alcoholic beverages for the first time in the one-month period prior to the survey and almost a half had done it for the first time in the one-year period prior to the survey.

- The mean age of first use overall for alcoholic beverages was 10.9 years

- Not many students felt that drinking alcoholic beverages sometimes was very harmful

- A considerable proportion of students felt that it was very harmful to get drunk: more than three-quarters (76.4%) felt it was very harmful

- Lifetime prevalence for females was slightly higher than that of males

- There was a 27 percentage point difference in prevalence between students who frequently had behavioural or discipline problems and those who reported never having these problems (88.5% compared to 61.1%)

- Current use prevalence was however lowest among those who felt that it was "very likely" (34%) and highest among those who felt it was "impossible" (39.3%)

- Overall 15.2% of students indicated binge drinking (16% of males and 14% of females)

Solvents/Inhalants

- The annual prevalence was 9.9% and the current use prevalence was 6.5% (about one in every 15 students were currently using inhalants). One-year incidence rate was 9.9% and the one-month rate was 6.9%

- The mean age of first inhalant use was 10.4 years and the median age 11 years

- Not many students felt that inhaling solvents sometimes was very harmful

- Six of every ten students (60.8%) felt that inhaling solvents frequently was very harmful and only 2.3% felt it was not harmful

- Students who felt that it was "very likely" that they would finish secondary school were as likely to report inhalant as those who felt it was "not very likely" or even "impossible" to finish school

Marijuana

- The mean age of first marijuana use was 12.6 years and the median age 13 years. Seventy-five percent or three-quarters of students who tried marijuana, had used it by age 14 years and 7.6% had used marijuana by age 9 years

- Not many students felt that smoking marijuana sometimes was very harmful

- A little more than half (58.4%) of the students said it was very harmful to inhale second hand marijuana smoke (overall, about 85% said it was harmful), 5.5% said it was not harmful and 9.4% (one in every 11 students) did not know of the harm

- Prevalence increased significantly as the frequency of behavioural and discipline problems increased. More than 6 times as many students who frequently had behavioural or discipline problems reported lifetime prevalence compared to those who never had (52.4% compared to 8.5%)

- Students who felt that it was "very likely" that they would finish secondary school reported notable lower prevalence of marijuana use compared to those who felt it was "not very likely" or even "impossible" to finish school

- The most favourite location where marijuana was most often consumed was "on the block" (15%)

- Marijuana was most often obtained from friends (23.6%)

Other Drugs

- Lifetime prevalence was 34.4%. The annual prevalence was 20.1% and current use prevalence was 12.7%

- Lifetime prevalence for heroin, opium and morphine was just about 1%. Again, very few students indicated use of these opiates

- Interestingly, lifetime prevalence of hallucinogens was 3.4% (probably indicating an interpretation of marijuana use). Hashish was just about 1% lifetime but lifetime prevalence of crack cocaine use was 2% with current use prevalence use decreasing to half of one percent (0.5%)

- Ecstasy use showed the same pattern as crack cocaine (about 2% lifetime prevalence and decreasing to 0.4% current use (very negligible use)

Access to Drugs

- About four in every ten students (45%) felt it was easy to obtain marijuana while 23.2% said it was either difficult (12.3%) or it was impossible to obtain (10.9%)

- 19% or just about one-fifth felt it would be easy to obtain cocaine

- Unlike marijuana and cocaine, about half of the students (51.6%) indicated that they did not know how to access ecstasy. About 16% felt it was easy to access while 16.8% felt it was difficult and a further 16.4% felt it was impossible to access.

Curiosity about Illegal Drugs

- Twenty-six percent said "yes" they had been curious to try an illegal drug while 13.1% were not sure and 61% said "no".

Offer to Buy or Use Drugs

- The vast majority of students indicated that they had never been offered the indicated drugs.

- Overall, 29.5% of students had been offered marijuana at some point, 5.7% cocaine, 3.6% ecstasy, and 3.8% crack.

In summary, results from this survey highlight the problems of substance availability, somewhat low perception of harmfulness of drug use, attitudes towards illegal drug use and low age of first use.

Section 1

1. Introduction

Adolescence is a critical time for developing attitudes and behavioural patterns that influence the use of substances. The health consequences of this use may be felt throughout later life. For instance, tobacco use during adolescence increases the likelihood of continued use as an adult and the risk of developing a tobacco-related illness increases with the length of time smoking (US DH&HS, 1994). The availability of cigarettes to minors has been identified as an indicator of the onset of smoking and a predictor of smoking uptake (Hill and Flay, 1990). In addition, the early use of alcohol among adolescents has been identified as affecting the future consumption of alcohol in adult life (Pederson, 1998). Interventions to reduce alcohol and cigarette use among adolescents include limiting the supply of these substances.

The prevalence rates of alcohol, tobacco and other drug use are matters of concern to policymakers since they are important factors affecting the health and welfare of the population. Substance abuse has been linked to a country's social and economic problems (RAS 2000). These problems include early high school drop out, low academic performance, crime (National task Force on Crime 1997) high risk sexual behaviour (Yearwood 2005) and substance related illnesses resulting in low work place productivity (WHO 2003).

Of particular concern to policy makers is the impact of substance abuse on the country's young population since consumption of psychoactive substances tends to begin when the minor is immersed in the secondary school educational process. Psychologically, this age represents adolescence or the end of childhood where adult personality structures are built (SIDUC Manual 2002).

Addressing drug use behaviours among young people is essential for prevention efforts. It involves being aware, on the one hand, of the magnitude of the problem

of psychoactive substance consumption among minors and its characteristics, and, on the other hand, acquiring more in depth knowledge of the underlying causes of risk and consumption in this group. Therefore, we need greater insight into this group's problems and we need to monitor its behaviour over time (SIDUC Manual 2002).

Information on alcohol and drug use prevalence rates among young populations is usually gathered through school surveys. The advantage of school surveys is that they are cost-effective and relatively easy to conduct (UNODC 2003). Appropriate schools and classes are usually selected and students are available in the classroom during the school day. In addition, students represent age groups in which the onset of different substance use is likely to occur. It is therefore considered important to monitor the prevalence rates of such use over time (UNODC, 2003).

To date the NCSA has published the results of three (3) surveys which looked at the extent of use of legal and illegal substances among the Secondary Schools: the Global Youth Tobacco Surveys (GYTS) 1999 and 2002 and the Inter-American Uniform Drug Use Data System (SIDUC) Secondary School Survey 2002.

The SIDUC Secondary School Survey (2002) was conducted with the assistance of the Inter-American Drug Abuse Control Commission (CICAD) and was recommended by the Multilateral Evaluation Mechanism (MEM). It was noted that the collection of data on a consistent basis will provide benchmarks (SIDUC/CICAD 2003) and facilitate the analysis of trends. SIDUC/CICAD also recommended that such surveys be conducted every 2 years.

However, since 2002 there has not been a survey of drug use among secondary school students. The conduct of the Secondary School Survey 2006 will therefore provide the opportunity to further reduce the gap in the data collection process. In addition, the Secondary School Survey 2006 will allow an analysis of trends and the ability to evaluate the effectiveness of drug education programmes within secondary

schools. The survey also allows for an analysis of the behavioural problems associated with drug use including academic performance and parental relationships with adolescents. Additionally, the survey also examines the average age of first use, ease of access to drugs, perceived risk of drug use and other related variables.

The Barbados Secondary School Survey is a nationally representative survey of secondary schools in Barbados. The survey is a collaborative effort between the NCSA and the Inter-American Drug Abuse Control Commission (CICAD). Major funding for the survey was provided by CICAD, who also provided technical assistance in relation to sample selection and orientation training for field officers. The survey commenced in October, 2006 and the data collection phrase completed on December 05, 2006.

The survey was conducted using the SIDUC[1] methodology. For the SIDUC, and for a series of reasons, the universe population examined includes middle school students in the second, fourth and fifth forms. This general rule was adapted to each country, but these grades tend to include students of 13, 15 and 17 years of age, respectively. This definition means that the information SIDUC wishes to receive from countries should refer to this population segment. Any information related to another definition of the student population, as for example to students of the first cycle of secondary schooling, or primary school students, is considered important. However, it cannot be compared with data obtained using other designs. Therefore, at the SIDUC level, the information must refer to this population, i.e., to the students in the selected age groups.

A CICAD standardized questionnaire was used. To this questionnaire some amendments to questions were made and other questions were added as necessary. Field interviews were conducted with the assistance of sixteen field (16)

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[1] The Inter-American System of Uniform Data on Drug Consumption (SIDUC) of the Inter-American Drug Abuse Control Commission (CICAD-OAS) to gather data on the national and regional situation with regard to demand for psychoactive substances.

interviewers, four (4) of whom performed duties as supervisors. The Survey was coordinated by the NCSA's Research and Information Officer, Mr. Jonathan Yearwood.

2. Methodology

2.1 School Sample Selection

The sampling frame of school surveys refers to all students who have a known (non-zero) probability of being included in the sample. The basic design is a stratified two-stage probability sample, with schools selected at the first stage of sampling and students selected within schools at the second stage of sampling. A sample of twenty – three (23) public and private secondary schools was drawn from a population of 31 secondary schools in Barbados. The target population[2] for the survey was 2nd, 4th and 5th form students ages 11-17.

2.2 Student Sample Selection

The selection of the sample size depends on the precision estimates desired.[3] It should be emphasized that the precision of estimates is, in general, not related to the size of the target population (UNODC 2003). However, regardless of the population size, a correctly drawn sample of 2000 – 3000 students will yield rather precise estimates (UNODC 2003).

2.3 Sample Size

The intended sample for the survey was 2,399 students however the actual sample size was 2,239 students. The reduced sample of one hundred and sixty (160) students was due to the absence of students on the day of the interview. In addition, it was decided by the principal of the lone private institution, not to include the second form students from that school in the survey.

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[2] The target population is defined as students at the time of the survey

[3] The greater the number of schools sampled at the first stage, the greater the precision of estimates will become.

2.4 Questionnaire

The students completed a seven page core questionnaire. Questions in the core survey related to smoking, drinking and the use of illicit substances. Questions on the use of tobacco and alcohol required students to report consumption in the past month, year and lifetime. Questions on other substances also asked students to indicate consumption in the last month, year and lifetime with some exceptions. The substances included the non-medical use of tranquilizers and stimulants, marijuana, non-medical use of opiates, ecstasy, hallucinogens, cocaine and inhalants.

Students also responded to questions covering various demographic indicators, frequency of drug use, social context of drug use, perception of harm associated with various levels of substance use, attitudes towards illicit drug use (curiosity and opportunity to use) and ease of obtaining drugs.

2.5 Coding and Editing of Data

The questionnaires were examined prior to data collection for response patterns that suggest poor data quality and to complete any necessary editing of the questionnaire prior to data entry. A unique identification number was attached to each questionnaire.

2.6 Definitions of Terms

Throughout this report certain terms have been used to describe the prevalence of substance use. These definitions are:

- Lifetime – Proportion of students who have ever used the substance
- Year – Proportion of students who used the substance in the past year
- Current – Proportion of students who used the substance in the previous month (also referred to as one-month prevalence)

2.7   Definitions of Substances

The drug categories used in this report are identical to the categories used in the questionnaire and follow the descriptions and examples provided to students in the questionnaire.

2.8   Data Analyses

To ensure that disproportionate sampling of any school type, grade level and sex grouping did not bias the prevalence estimates, data are weighted to bring the achieved sample into line with the population distribution. The prevalence estimates reported in this report are based on these weighted data. Using 95 percent confidence intervals, the prevalence estimates reported here are within 95 percent or better of the true population values. Despite the fact that the data has been weighted, the description of the demographic indicators was computed from the un-weighted data to give some perspective on the number of students actually responding.

The chi-square test has been used to test for the significance of any given relationship, the strength of the relationships were evaluated using Cramer's V. The T-tests was used to test for differences in mean ages of first drug use between groups, such as male and female students or year level.

Probability (p) values of >0.05 are considered non-significant and p values are reported as p<0.01 or p<0.05. Because of the large sample size, many of the statistical tests of association resulted in low p-values, but for simplicity low p-values are reported as p<0.001 or p<0.05. Percentages were not rounded in the tables.

Section 2

3. Analysis of Findings – Students Demographics

3.1 Age and Gender

Age distribution for the sample showed that half of the students (50.6%) were less than 15 years old while 43.3% were between 15 and 16 years old. Five percent or one in every 20 were 17 years or older. No data was available for about 1.1% of the population (about 25 students).   Slightly more females than males were sampled (52.3% of females compared to 46.6% of males). No data was available for about 25 students.

3.2 Type of School and Grade Level

The majority of students (87.9%) attended schools that were described as "mixed", having both male and female students. A further 6% attended schools that were "all males" or "all females" respectively.   In terms of public versus private schools, the vast majority (97.5%) attended public school and only 2.5% attended private schools. Students were almost equally divided among the three grade levels that were sampled – 31.3% were in the 2nd form, 34.2% were in 4th form and 34.5% were in 5th or 6th form.

Table 1: Demographic Distribution - Age, Gender, Type of School Attended and Grade Level

Indicator	Percent	Indicator	Percent
Gender		**Type of School**	
Males	46.6	All male	6.1
Females	52.3	All female	6.0
No data	1.1	Mixed	87.9
Age Grouping		**Grade Level**	
< 15 years	50.6	2nd Form	31.3
15-16 years	43.3	4th Form	34.2
17+ years	5.0	5th or 6th Form	34.5
No data	1.1		

3.3 Living Arrangements

Students were asked to indicate, "With whom do you live". Most (47%) indicated that they live with either their mother or father. A little more than one third (35.4%) said they lived with both parents (mother and father); 8.6% lived with a parent and step parent; 8.1% lived with other relatives or friends, and no data was available for about 12 students (0.5%).

Table 2: Student's Living Arrangements

	Percent
Father and Mother	35.4
Mother or Father	47.0
Parent and Step-parent	8.6
Other	8.1
No data	0.5

3.4 Parents Marital Status

Most students indicated that their parents were married (30.5% or just under a third). Some 27.5% said their parents were single; 16.8% were separated; 8.5% were living together; 6.4% were divorced and 8.1% indicated that their parents' marital status in relation to each other was categorized as "other".

3.5 Highest Level of Education (Mother and Father)

Students were asked to indicate the highest level of school that their parents had completed. Forty-three percent of mothers had completed secondary school while 25% of students indicated that they were not aware which level was the highest level completed.   About 14% had completed university, 13.8% the tertiary level school, 3.4% primary level school, and less than one percent (0.6%) had not completed any level of schooling.

In relation to fathers, about 38% of students indicated that they were not aware of the highest level that was completed. Some 34.2% had completed secondary school while 13% had completed university. Ten percent had completed tertiary level school, 3.4% primary level school, and less than one percent (0.8%) had not completed any level of schooling.

Comparison showed that notable more students were not aware of their father's educational attainment.   In addition, notable more mothers had completed secondary school compared to fathers and slightly more mothers as well had completed university and tertiary level schooling.

Table 3: Distribution of Parent's Marital Status and Highest Level of Schooling Completed

Parent's Marital Status	Percent	Highest Level of Schooling Completed	Percent Mother	Percent Father
Single	27.5	None	0.6	0.8
Married	30.5	Primary	3.4	3.4
Divorced	6.4	Secondary	42.9	34.2
Separated	16.8	Tertiary	13.8	10.0
Widowed	1.6	University	13.9	13.0
Living together	**8.5**	Not known	**25.0**	**37.9**
Other	8.1	No data	0.4	0.8
No data	0.6			

3.6   Work Status

About three-quarters of students indicated that they do not work (75.9%) while about one fifth (21.2%) said they worked.   No data was available for 2.8% of students.   Students were also asked to indicate the approximate number of hours per week that they engaged in work.   However, about 10% of the range of hours indicated were well above what would normally be considered the total number of hours of a working adult so no further computation was done with this variable.

3.7   Completing Secondary School/College and University

Students were asked – "How likely is it that you will complete secondary school/college …. "How likely is it that you will go to university".   About six of ten students said it was "very likely" that they will complete secondary school/college. Another one-fifth (20.4%) said it was "likely" and 11.7% did not know.   An additional 5.4% felt it was not very likely or impossible that they will complete secondary school/college.

In terms of going to university, 32% felt it was "very likely"; 30.9% "likely"; 14% felt it was not very likely or impossible and 22.7% said they did not know.   Comparison of

likelihood of completing secondary school versus going to university showed that half as many students felt it was "very likely" to go to university while a greater proportion (10 percentage points more) felt it was "likely". Almost three times as many felt it was not very likely or impossible to go to university and twice as many did not know about going to university compared to completing secondary school or college.

Table 4: Probability of Completing Secondary School and Going to University

	Completing Sec/College	Going to University
Very likely	61.7	32.0
Likely	20.4	30.9
Not very likely	4.0	9.9
Impossible	1.4	4.1
Don't know	11.7	22.7
No data	0.8	0.5

3.8   Repeating School Years
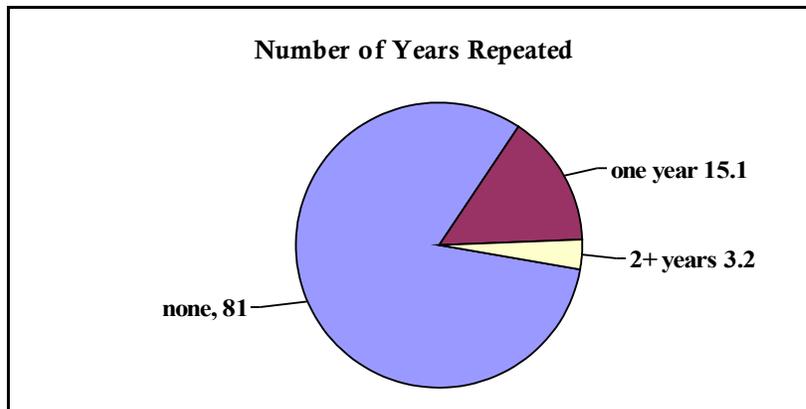
The majority of students (81%) had not repeated any school years during the course of their studies. About 15% had repeated one year and 3.2% had repeated two or more years. No data was available for less than one percent of students.

3.9   Behaviour and Discipline Problems

Students were asked if they ever had 'behavioural and discipline problems during their school years'. A little less than a third indicated that they had never had these problems but a fifth (20.1%) indicated having these problems once, 41.4% a few times and 5.5% frequently. No data was available for 1.6% of students.

Behavioural and Discipline Problems
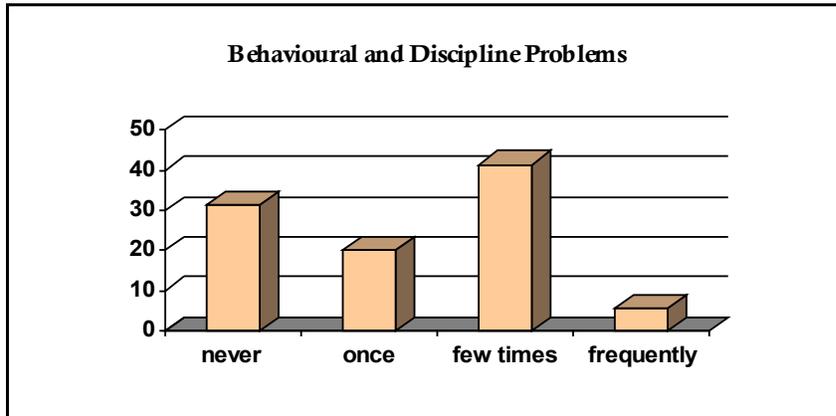
4. Cross-tabulation of Various Demographic Indicators by Gender

There were notable more male students in Form 2 than females. However, more than fifty percent of students in Form 4 and Form 5 were females. Greater than fifty percent of students in each age grouping were females (52.2%, 53.7%, and 54.1% respectively).

More males reported divorced and widowed parents than female students. For all other categories females reported a higher proportion than males. For example, more females reported parents living together, being single and separated.

Table 5: Cross-tabulation of Various Demographic Indicators by Gender

	Percent Males	Percent Females
Grade Level		
2nd Form	53.7	46.3
4th Form	42.5	57.5
5th or 6th Form	45.0	54.1
Age Grouping		
< 15 years	47.8	52.2
15-16 years	46.3	53.7
17+ years	45.9	54.1
Living Arrangement		
Father and Mother	48.8	51.2
Mother or Father	47.6	52.4
Parent/Step-parent	37.6	62.4
Other	47.6	52.4
Parent's Marital Status		
Single	43.6	56.4
Married	49.9	50.1
Divorced	52.1	47.9
Separated	45.5	54.5
Widowed	60.0	40.0
Living together	41.7	58.3
Other	43.9	56.1

5. Specific Results by Drug

In the remainder of this section on analysis of findings, separate sub-sections are provided for each of the many classes of drugs (both licit and illicit). The sub-sections typically covers population estimates of consumption patterns for lifetime (any use), annual (one-year) and one-month (current use) prevalence. The incidence (one-month and one-year) of drug use is also described as well as the age of first use and perceived harmfulness of drug use. Each class of drug is further cross-tabulated by various sub-group variables and the results described.

5.1 Cigarette (table 6a thru 6d)

Prevalence and Incidence

Lifetime prevalence of cigarette use was 21.3%. About one-fifth of all students reported having tried cigarettes. The annual prevalence was 7.6% and the current use prevalence was 3.5% (about one in every 29 students were currently smoking). One-year incidence rate was 6.6% and the one-month rate was 2.3%.

5.2 Age of First Use

The mean age of first cigarette use was 11.7 years and the median age 12 years. Seventy-five percent or three-quarters of students who had used cigarettes, had used them by age 13 years. A notable proportion (14%) had used cigarettes by age 9 years. The mean age among males was slightly lower than that of females (11.3 years versus 12 years) as was the median age (11 years for males and 12 years for females).

5.3 Perceived Harm

Not many students felt that smoking cigarettes sometimes was very harmful. Only four in every ten (39.1%) felt it was very harmful. About a quarter (26.4%) felt it was moderately harmful and an additional 23.3% slightly harmful. One in every 20 students (4.5%) felt it was not harmful and 6.2% did not know of the harm.

Perceived Harm for Cigarette Use

inhaling second hand cigarette smoke	
smoking cigarette frequently	
smoking cigarette sometimes	

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

■ not harmful   ■ slightly harmful   □ moderately harmful   ■ very harmful   ■ don't know
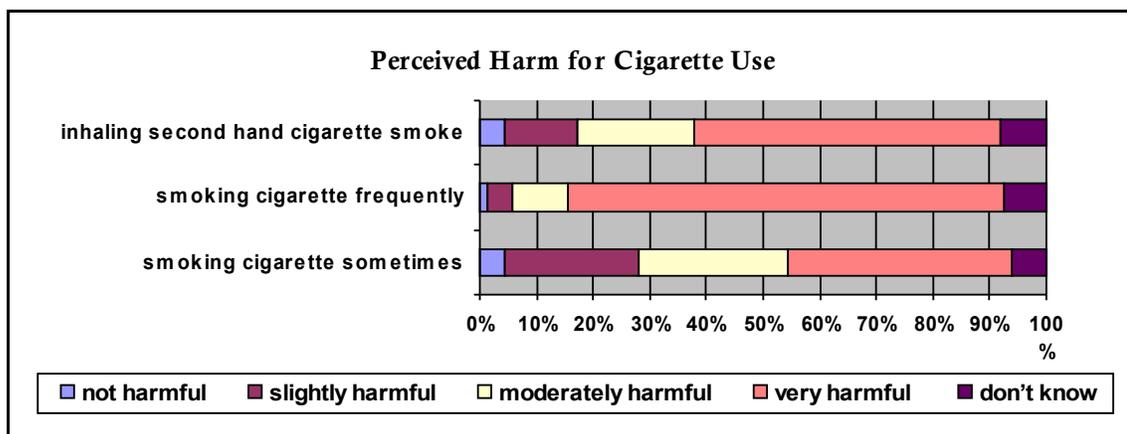
Perceived harm of smoking cigarettes frequently was very different, more than three-quarters of all students (76%) felt that this was very harmful and only 1.3% felt it was not harmful. Interestingly, a slightly higher proportion of students (7.2%) said

they did not know of the harm of smoking frequently. For the most part students felt that inhaling second hand cigarette smoke was harmful (87.4%) while 8.1% did not know of the harm and 4.5% felt it was not harmful.

Table 6a: Percentage of Cigarette Use by Various Sub-grouping

	Cigarette Prevalence		
	Lifetime	**Annual**	**Month**
Overall	**21.3**	**7.6**	**3.5**
Gender			
Males	22.3	6.6	3.6
Females	20.3	8.4	3.2
Age Grouping			
< 15 years	18.2	6.5	3.8
15 - 16 years	23.9	8.1	2.9
17+ years	27.6	13.8	5.6
Grade Level			
2nd Form	15.1	6.3	4.0
4th Form	24.7	8.7	3.9
5th or 6th Form	22.7	7.6	2.5
Type of School			
Public	20.7	7.0	3.1
Private	41.5	28.9	16.3
Behaviour and Discipline Problems			
Never	11.9	3.3	1.0
Once	16.5	7.3	3.1
A few times	28.0	9.8	4.8
Frequently	43.3	18.5	9.9
Repeated School Years			
None	20.2	7.4	3.5
One Year	25.7	8.4	3.3
Two or more Years	21.8	11.3	6.2
Probability of Finishing School			
Very likely	18.9	6.4	2.8
Likely	24.1	8.9	3.8
Not very likely	25.4	9.8	7.1
Impossible	35.5	22.1	12.9
Don't know	25.1	9.1	4.2
Region/Location			
St Michael	22.7	9.3	5.1
Else	20.2	6.4	2.3

Comparisons from Table 6a

5.4 Male/Female Comparisons

Lifetime prevalence for males was slightly higher than females. Slightly more than one-fifth of all males (22.3%) and just about one-fifth of all females (20.3%) reported having used cigarettes in their lifetime. Annual prevalence was slightly higher among female students (8.4% compared to 6.6% among males); however the current use prevalence was about the same for both males and females (3.6% and 3.2% respectively).

5.5 Age

As age increased, lifetime and annual prevalence also increased. Lifetime prevalence was 18.2% among those under 15 years old and increased to 23.9% among those 15 -16 years old and then to 22.7% among those 17 years and older. Annual prevalence showed the same pattern increasing from 6.3% among those less than 15 years to 13.8% among those 17 years and older. Current use was highest among the oldest age group (5.6%) followed by the youngest age group (3.8%) and then the middle age group (2.9%).
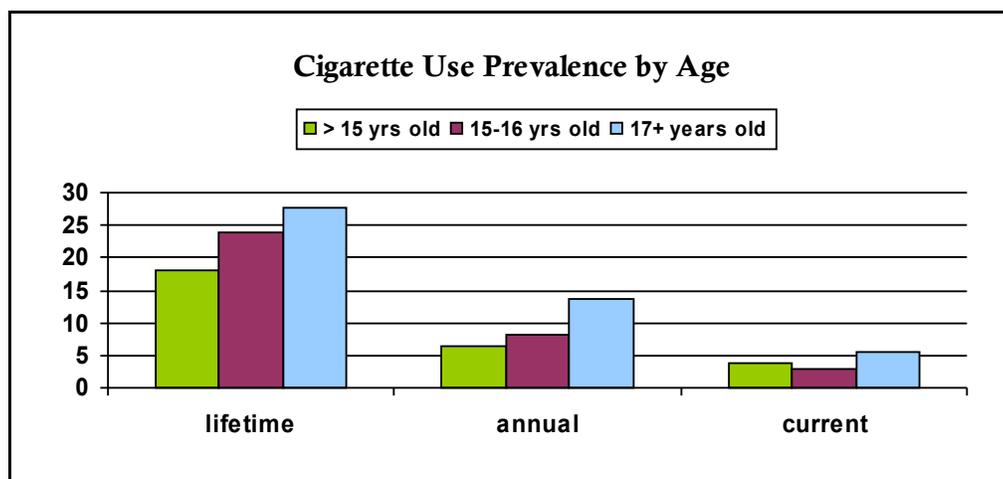
5.6 Grade Level

Lifetime prevalence and annual prevalence among grade levels showed the same pattern as for age, as grade level increased, prevalence also increased. Current use prevalence was the reverse; the highest prevalence was observed in the lowest form (4%) and decreased as grade level increased (3.9% in Form 4 and 2.5% in Form 5 or 6).

5.7 Type of School

Lifetime prevalence among students from private schools was significantly different from that among public school students (41.5% versus 20.7% respectively, p<0.001). The same pattern was observed for annual prevalence (28.9% versus 7%, p<0.001) and current use prevalence (16.3% versus 3.1%, p<0.001).

5.8 Region

Lifetime, annual, and current use prevalence for the parish of St Michael was notable higher that the other regions combined. Lifetime prevalence was slightly higher (22.7% compared to 20.2%), annual prevalence was 3 percentage points higher (9.3% compared to 6.4%), and current use prevalence was twice as high (5.1% compared to 2.3%). These were all significantly different at the p<0.001 level.

5.9 Behavioural and Discipline Problems

Prevalence increased significantly as the frequency of behavioural and discipline problems increased. More than three times as many students who frequently had behavioural or discipline problems reported lifetime prevalence compared to those who never had (43.3% compared to 11.9%, p<0.05). The same significant differences were observed for annual prevalence (18.5% compared to 3.3%, p<0.05) and current use prevalence (9.9% compared to 1%).

Cigarette Prevalence by Behavioural and Discipline Problems

legend: never, once, few times, frequently

(lifetime, annual, current)
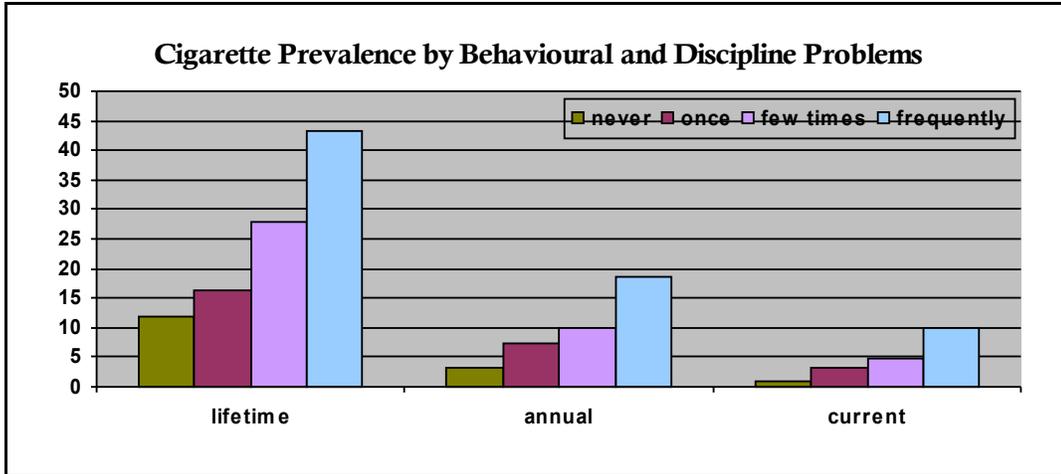
5.10   Repeat Grade of School Years

Students who reported repeating one year were more likely to report a higher lifetime prevalence of cigarette use, but those who had repeated two or more years were more likely to report a higher annual and current use prevalence.

5.11   Probability of Finishing School

Students who felt that it was "very likely" that they would finish secondary school were less likely to report cigarette use than those who felt it was "not very likely" or "impossible" to finish school. Lifetime prevalence was 6 to 16 percentage points higher (from "very likely" to "not very likely" or "impossible"); annual prevalence, 3 to 16 percentage points higher; and current use prevalence, 5 to 10 percentage points higher.

Cigarette Prevalence and Probability of Finishing School

legend: very likely, likely, not very likely, impossible

(current, annual, lifetime)
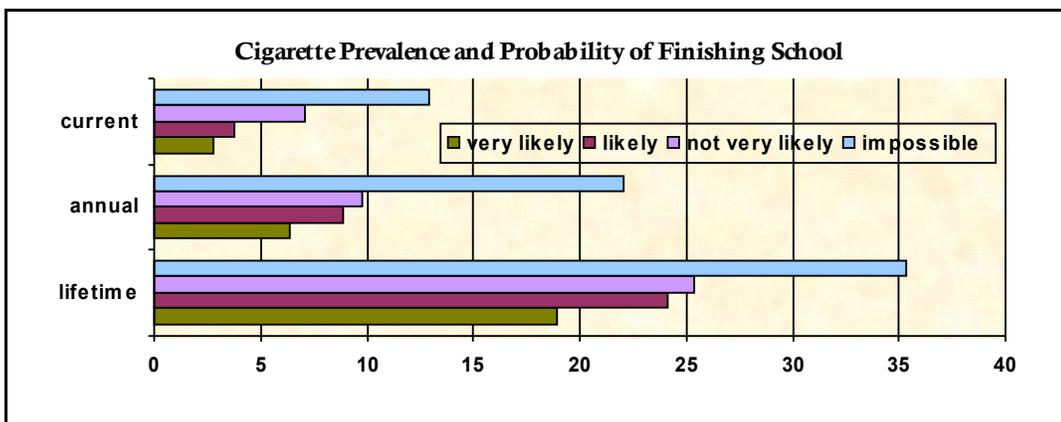
5.12   30-Day Consumption Pattern of Cigarette Use

Table 6b: Number of Cigarette Smoked in the last Month

Number Smoked	Overall	Male	Female
1 to 5	65.5	51.1	84.7
6 to 10	4.6	6.4	2.6
11 to 20	4.4	8.6	-
> 20	8.6	7.7	7.4

Students who indicated cigarette use in the last month were asked to state how many cigarettes that has smoked in the past month.   Most students (65.5%) indicated 1-5 cigarettes while less than 10% indicated greater than 20 cigarettes.   A greater proportion of females indicated smoking 1-5 cigarettes compared to males (84.7% versus 51.1%).

5.13   Location Where Cigarettes Most Often Smoked

Table 6c: Favourite Cigarette Smoking Location

Location	Overall	Male	Female
At Home	31.6	31.9	31.8
At school	29.5	27.9	31.8
At friend's house	7.4	6.6	9.6
At other social events	11.8	7.0	17.2
Other	3.5	4.4	3.2

The most favourite location where cigarettes are most often smoked was surprisingly "at home". About one-third of students (31.6%) indicated this location followed by "at school" (39.5%) and at "social events" (12%). At a "friend's house" was only reported by 7.4% of students. Females were as likely as males to indicate "at home" as the favourite location followed also by "at school".   Notable more females compared to males indicated smoking at social events and at a friend's house (17.2% compared to 7%, and 9.6% compare to 6.6% respectively).

5.14   Sources of Cigarettes – From Whom or Where Obtained

Table 6d: Sources of Cigarettes

Source	Overall	Male	Female
Friends	33.4	28.2	43.0
Parents	1.2	2.1	-
Brother/Sister	6.1	6.4	7.0
Other Relatives	2.4	2.1	3.5
Street Vendor	7.8	8.5	3.5
Shop	17.8	17.1	21.8
Other	13.4	12.0	14.1

Cigarettes were most often obtained from friends overall (33.4%). The shop and street vendors accounted for 26.6% and only 9.7% were obtained from parents, brother/sister or other relatives. Very few students (1.2% overall and 2.1% of males) indicated that cigarettes were obtained from parents. Females as well as males were more likely to obtain cigarettes from friends, the shop or some other source.

6. Alcohol - Alcoholic Beverages (table 7a thru 7e)

Table7a: Percentage of Alcoholic Beverage Use by Various Sub-grouping

	Prevalence		
	Lifetime	**Annual**	**Month**
Overall	74.7	54.9	34.0
Gender			
Males	71.5	51.9	32.0
Females	77.5	57.3	35.4
Grade Level			
2nd Form	60.9	33.2	16.8
4th Form	78.1	62.6	40.5
5th or 6th Form	82.6	64.4	41.1
Age Grouping			
< 15 years	68.5	46.5	26.3
15-16 years	80.2	62.9	41.3
17+ years	88.3	68.5	45.9
Type of School			
Public	74.9	54.2	33.2
Private	92.8	81.7	62.9
Behaviour and Discipline Problems			
Never	61.1	41.5	23.9
Once	72.3	48.4	26.5
A few times	85.0	65.6	42.5
Frequently	88.5	78.9	56.2
Repeated School Years			
None	74.2	54.9	33.9
One Year	81.5	60.2	37.1
Two or more Years	55.6	31.8	24.2
Probability of Finishing School			
Very likely	76.3	56.6	37.0
Likely	75.6	57.9	37.3
Not very likely	70.0	43.9	31.7
Impossible	72.3	53.1	39.3
Don't know	66.3	43.6	28.6
Region/Location			
St Michael	75.6	60.9	39.1
Else	73.9	50.7	30.4

6.1 Alcohol Prevalence/Incidence

More than seven of every ten students (74.7%) reported that they had an alcoholic beverage at some time in their life. The annual prevalence was 54.9% (more than half of all students had an alcoholic beverage in the past year) and 34% (a little more than one-third) were currently consuming alcoholic beverages.

The one-year incidence of using alcoholic beverages was 47.5% overall while the one-month incidence was 28.7%. It means that more than a quarter of the students had used alcoholic beverages for the first time in the one-month period prior to the survey and almost a half had done it for the first time in the one-year period prior to the survey.

Students were asked about the use of specific alcoholic beverages. One month prevalence for beer was (28.5%), wine (25.5%), hard liquor (21.6%), and Shandy (17.7%). This indicated that beer was clearly the alcoholic beverage of choice among students.

6.2   Age of First Use

The mean age of first use overall for alcoholic beverages was 10.9 years. The median age was 11 years (50% of all alcohol use was initiated by age 11 years). In addition, 75% of students who used alcohol had initiated use by age 13 years and an alarming 25.6% by age 9 years. Initiation age for males and females were quite similar – the mean and median ages were equal (mean age of 10.8 years and median age of 11 years.

6.3   Drinking and Getting Drunk

Some 26% of current drinkers indicated that they had gotten drunk in the in the past month. About 20% of current drinkers had gotten drunk at least 1-2 days in the last month. The mean number of days overall that students indicated getting drunk in the last month was about 2 days.

6.4 Perceived Harm

Not many students felt that <u>drinking alcoholic beverages sometimes</u> was very harmful – about 16% felt it was very harmful. About a quarter (26.2%) felt it was moderately harmful and an additional 34.7% slightly harmful. A considerable high proportion (18.4%) or about one in every six students felt it was not harmful and 5.2% did not know of the harm.

Perceived harm of <u>drinking alcoholic beverages frequently</u> was very different, about six of every ten students (59.4%) felt that this was very harmful and only 4.3% felt it was not harmful. A higher proportion of students (7.1%) said they did not know of the harm of frequently drinking alcoholic beverages, this compared to sometimes drinking alcoholic beverages.

A considerable proportion of students felt that it was very harmful to <u>get drunk</u>: more than three-quarters (76.4%) felt it was very harmful but 6.8% did not know of the harm of getting drunk.

Perceived Harm for Drinking Alcoholic Beverages
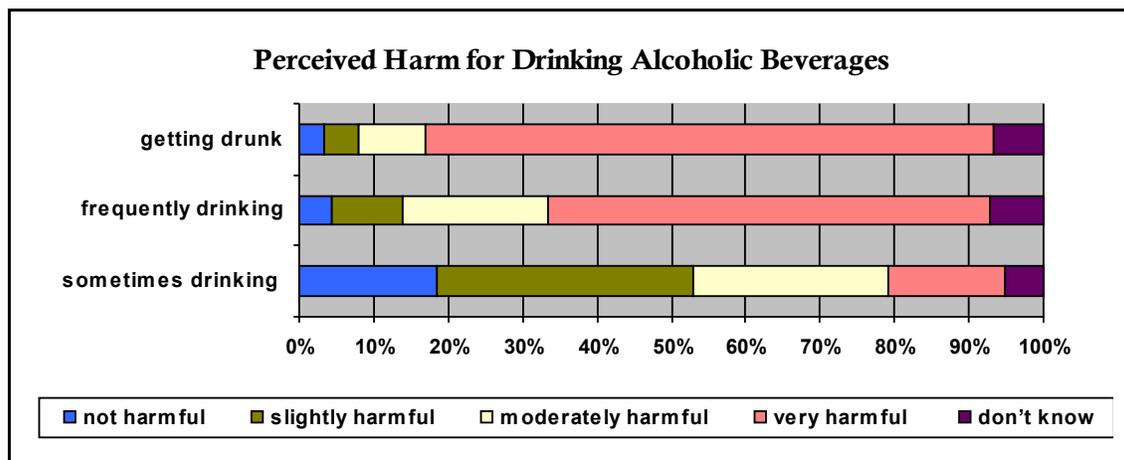
Comparisons From Table 7a

6.5 Male/Female Comparisons

Lifetime prevalence for females was slightly higher than that of males. More than three-quarters of all females (77.5%) and just about 72% of all males reported

having has an alcoholic beverage in their lifetime. Annual prevalence was also slightly higher among female students (57.3% compared to 51.9% among males). In addition, the current use prevalence was also higher among females compared to males (35.4% and 32% respectively).

6.6 Age

As age increased, lifetime and annual and current use prevalence also increased. Lifetime prevalence was 68.5% among those under 15 years old and increased to 80.2% among those 15 -16 years old and then to 88.3% among those 17 years and older. Annual prevalence showed the same pattern increasing from 46.5% among those less than 15 years to 62.9% among those 15 -16 years and 68.5% among those 17 years and older. Current use was highest among the oldest age group (45.9%) followed by those 15 -16 years old (41.3%) and lowest among those in the youngest age group (26.3%).
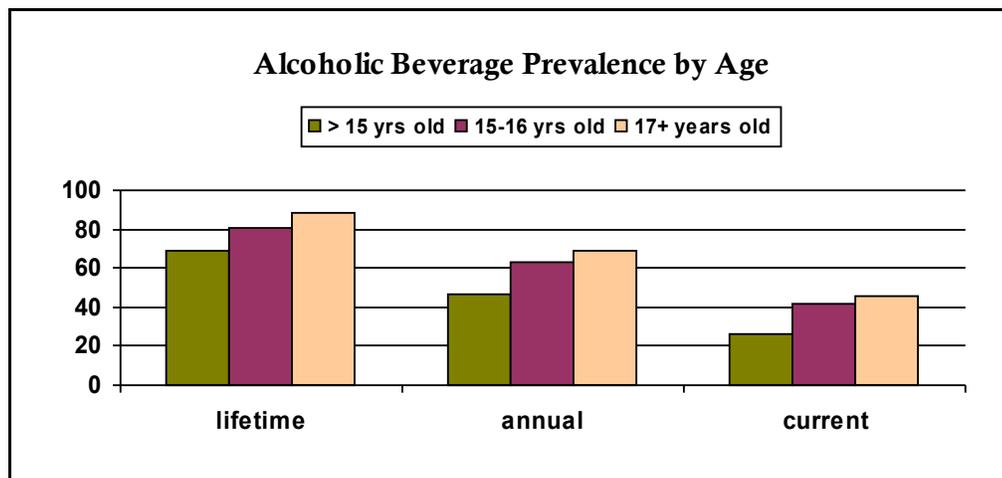
6.7 Grade Level

Lifetime prevalence and annual prevalence among grade levels showed the same pattern as for age, as grade level increased, prevalence also increased. Current use prevalence was slightly different in that prevalence among those 15 -16 years old and those 17 years and older was higher than that for the lowest grade level, but they were about the same (40.5% in Form 4 and 41.1% in Form 5 or 6).

6.8   Type of School

Lifetime prevalence among students from private schools was significantly different from that among public school students (92.8% versus 74.9% respectively, p<0.001). Whereas three of every four students in public school reported having had an alcoholic beverage, nine of every ten in private school reported this. The same pattern was observed for annual and current use prevalence (81.7% versus 54.2%, annual, p<0.001) and (62.9% versus 33.2% current, p<0.001).

Alcoholic Beverages Use by School Type
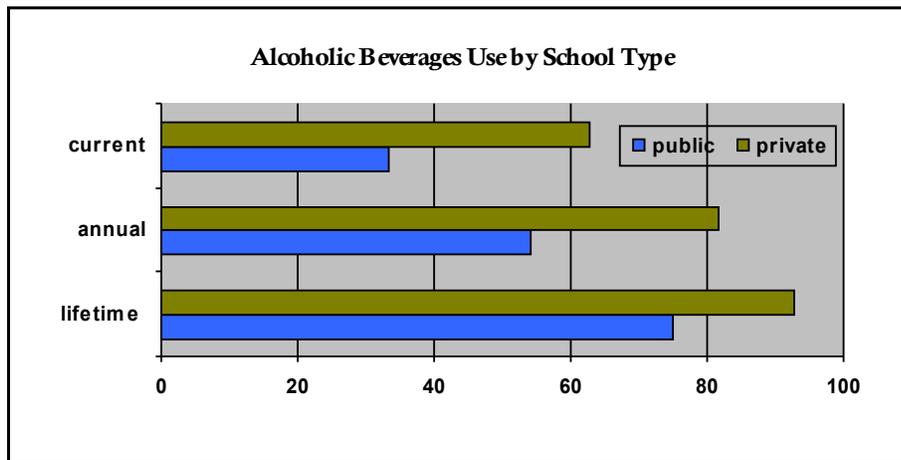
6.9   Region

Annual and current use prevalence for the St Michael's region was significantly higher than the other regions combined. Lifetime prevalence was only slightly higher (75.6% compared to 73.9%). The annual prevalence was 10 percentage points higher (60.9% compared to 50.7%), and current use prevalence was nine percentage points higher (39.1% compared to 30.4%).

6.10   Behavioural and Discipline Problems

Prevalence increased significantly as the frequency of behavioural and discipline problems increased. There was a 27 percentage points difference in prevalence between students who frequently had behavioural or discipline problems and those who reported never having these problems (88.5% compared to 61.1%, p<0.05).

The percentage point differences observed for annual prevalence was even larger (37 percentage points). Current use prevalence was 32 percentage points different. Students who frequently had behavioural and discipline problems or had these problems a few times in the school year were significantly more likely (p<0.001) to report alcoholic beverage use than those students with no reported problems.

Alcoholic Beverage Use and Behavioural and Discipline Problems

Legend: never, once, few times, frequently

Categories: lifetime, annual, current
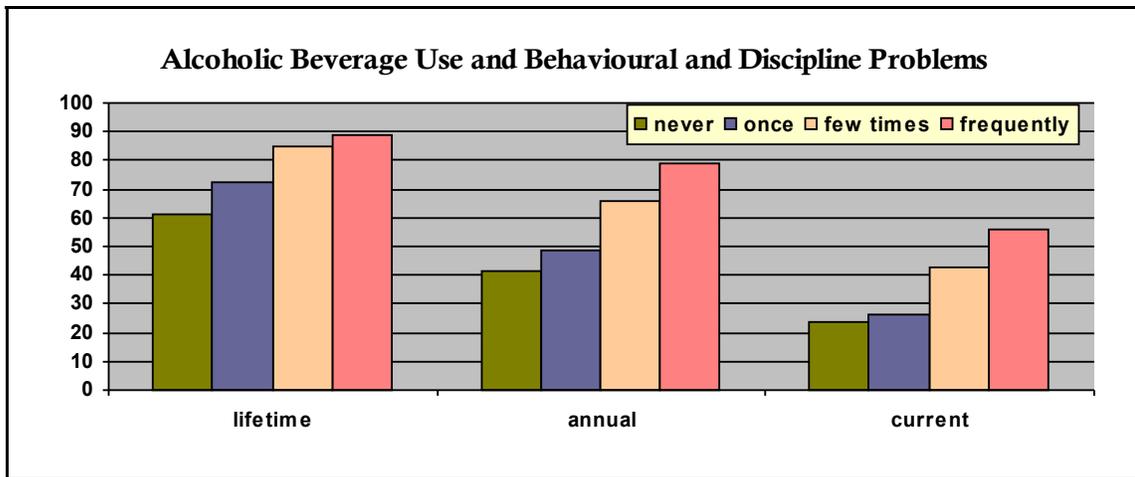
6.11 Repeating of School Years

Students who reported repeating one year (81.5%) were more likely to report a higher lifetime prevalence of alcoholic beverage use compared to those who never repeated (74.2%) and those who had repeated two or more years (55.6%). The same pattern was observed for annual and current use prevalence.

6.12 Probability of Finishing School

Students who felt that it was "very likely" that they would finish secondary school were more likely to report lifetime alcoholic beverage use (76.3%) than all other students. Those who felt it was "likely" (75.6%), "not very likely" (70%) or "impossible" (72.3%) to finish school all reported a lower prevalence. Current use prevalence was however lowest among those who felt that it was "not very likely" (31.7%) and highest among those who felt it was "impossible" (39.3%).

Alcoholic Beverage Prevalence and Probability of Finishing School

Legend: very likely · likely · not very likely · impossible

(Bar chart showing values for current, annual, and lifetime categories on a scale from 0 to 90)
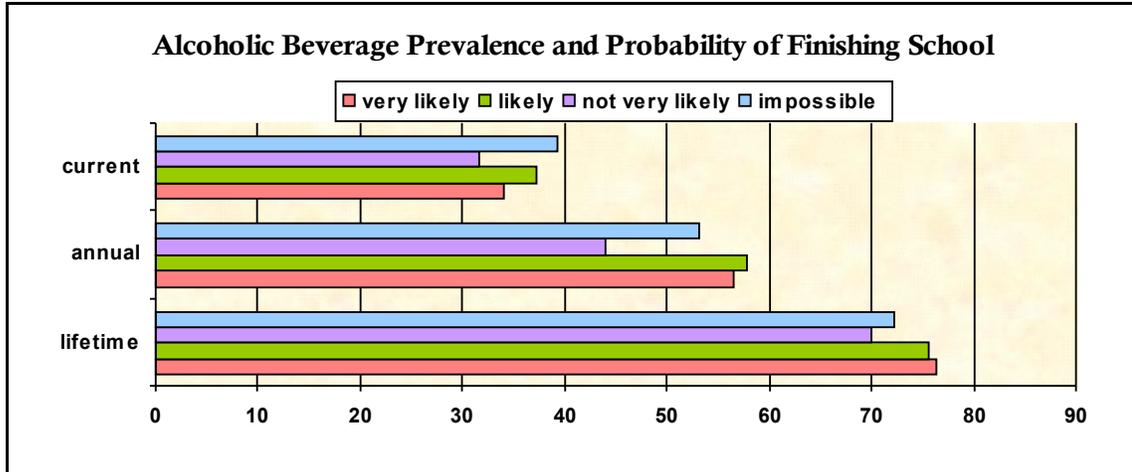
6.13 Location Where Alcoholic Beverage Most Often Consumed

Table 7b: Favourite Place for Using Alcoholic Beverage

Location	Overall	Male	Female
At Home	35.8	30.9	39.4
At school	0.5	0.4	0.6
On the block	5.8	10.1	2.6
At friend's house	3.7	4.7	2.9
Sporting events	2.3	3.9	0.6
At other social events	31.9	33.6	30.8
Other	12.4	10.7	14.2

The most favourite location where alcoholic beverages were most often consumed was surprisingly "at home". A little more than one-third of students (35.8%) indicated this location followed by "at other social events" (31.9%) and at "other" places –not described (12.4%). At a "friend's house" was only reported by 3.7% of students. Considerable more females compared to males indicated that they consumed alcoholic beverages "at home" as the favourite location (39.4% versus 30.9%). However, they were as likely to indicate consuming alcoholic beverages at "other social events", the next most favourite location. Significantly more males compared to females indicated drinking "on the block", (10.1% compared to 2.6%).

6.14   Sources of Alcoholic Beverage – From Whom or Where Obtained

Table 7c: Sources of Alcoholic Beverage

Sources	Overall	Male	Female
Friends	24.1	22.3	26.5
Parents	18.9	16.9	20.6
Brother/Sister	1.9	2.4	1.3
Other Relatives	15.0	11.2	18.2
Street Vendor	2.8	4.0	1.6
Shop	17.6	27.0	9.5
Other	11.2	10.0	12.5

Alcoholic beverages were most often obtained from friends overall (24.1%). Parents accounted for 18.9% of students' source of alcoholic beverages while other relatives accounted for 15%. The shop and street vendors accounted for 20.4%. Very few students (1.9% overall) indicated that alcoholic beverages were obtained from siblings. Females as well as males were more likely to obtain alcoholic beverages from friends (a slightly higher proportion of females), the shop (a considerable higher proportion of males, 27% versus 9.5%), parents and other relatives.

6.15   Types of Alcohol Beverages Consumed in Past 30 Days

Students were asked to indicate the type of alcoholic beverages they had consumed in the last 30 days and with what frequency. Most beverages were consumed at social events and this was the case for all four types of beverages. Of note is the fact that a quarter of the beer and 16% of wine were consumed on weekends. Very few students reported drinking these beverages daily.

Table 7d: Type of Alcoholic Beverages Consumed Last 30 Days

	Daily	Weekends	Weekdays	Social events	Never
Beer	4.1	25.4	15.3	34.6	9.1
Wine	3.2	16.2	14.0	37.8	15.4
Hard Liquor	2.4	12.8	9.9	35.2	24.9
Shandy	6.3	11.6	11.9	19.7	33.7

6.16   Binge Drinking

Binge drinking is defined here as consuming 5 alcoholic drinks or more in one sitting. Overall 15.2% of students indicated binge drinking (16% of males and 14% of females). Some 15.6% indicated doing this "once", 14.9% between 2 and 3 times, 4% between 4 and 5 times and 9.3% greater than 5 times. More females indicated never binge drinking compared to males (52.9% versus 43.9%).

Table 7e: Sources of Alcoholic Beverage

Sources	Overall	Male	Female
Never	48.6	43.9	52.9
Only once	15.6	16.5	14.6
Between 2 and 3 times	14.9	16.7	13.5
Between 4 and 5 times	4.0	4.1	4.0
> 5 times	9.3	12.4	7.0

7.   Inhalants and Solvents (table 8a and 8b)

Prevalence and Incidence

Lifetime prevalence of inhalant use was 19.7%. About one-fifth of all students reported having tried inhalants. The annual prevalence was 9.9% and the current use prevalence was 6.5% (about one in every 15 students were currently using inhalants). One-year incidence rate was 9.9% and the one-month rate was 6.9%. About one in every ten students reported using inhalants for the first time in the one-year period before the survey and one in every 14 during the one-month period before the survey.

7.1   Age of First Use

The mean age of first inhalant use was 10.4 years and the median age 11 years. Seventy-five percent or three-quarters of students who used inhalants had done so by age 12 years. A considerable high proportion (30%) had used inhalants by age 9 years. The mean age of first use among males and females was the same (10.3 years versus 10.5 years) as was the median age (11 years for both).

7.2 Perceived Harm

Not many students felt that <u>inhaling solvents sometimes</u> was very harmful. Only one-third of the students (33.7%) felt it was very harmful. More than a quarter (28.4%) felt it was moderately harmful and an additional 17% slightly harmful. One in every 23 students (4.2%) felt it was not harmful and a notable large proportion (16.7%) did not know of the harm.

Perceived Harm for Inhaling Solvents

□ not harmful	■ slightly harmful
□ moderately harmful	□ very harmful
□ don't know	
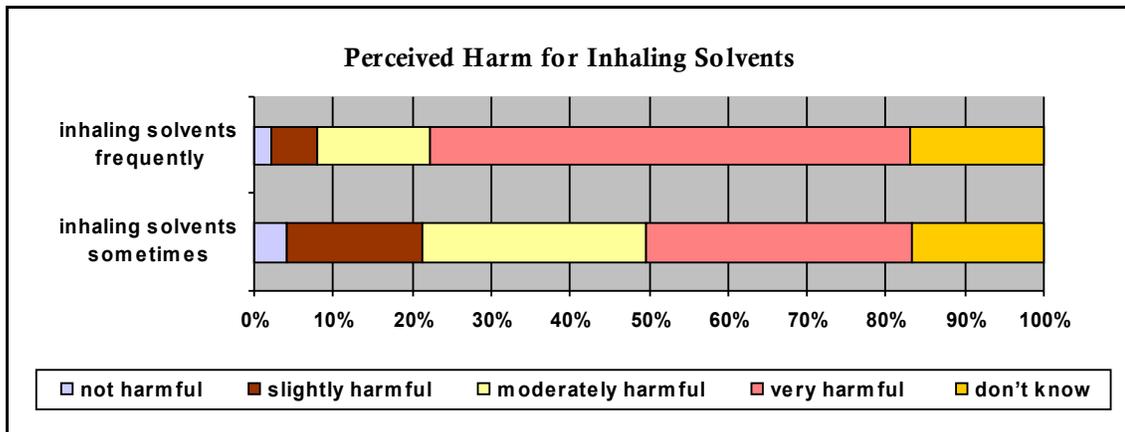
Perceived harm of <u>inhaling solvents frequently</u> was different in terms of harmfulness. Six of every ten students (60.8%) felt that this was very harmful and only 2.3% felt it was not harmful. Like inhaling sometimes, about the same proportion of students (16.9%) said they did not know of the harm of frequently inhaling solvents.

Table 8a: Percentage of Inhalant Use by Various Sub-grouping

	Inhalant Prevalence		
	Lifetime	Annual	Month
Overall	**19.7**	**9.9**	**6.5**
Gender			
Males	17.7	7.7	4.9
Females	21.3	11.9	7.6
Grade Level			
2nd Form	20.9	8.3	5.3
4th Form	21.8	11.8	7.7
5th or 6th Form	16.4	9.2	6.2
Age Grouping			
< 15 years	22.7	11.1	7.1
15-16 years	17.2	9.2	5.9
17+ years	11.8	4.7	3.7
Type of School			
Public	19.1	9.7	6.3
Private	39.3	17.4	13.4
Behaviour and Discipline Problems			
Never	11.9	5.6	3.5
Once	19.1	10.0	7.3
A few times	24.8	12.5	7.8
Frequently	28.4	15.1	12.5
Repeated School Years			
None	20.6	10.3	6.7
One Year	13.4	6.6	4.1
Two or more Years	24.1	15.8	13.4
Probability of Finishing School			
Very likely	20.3	10.6	7.1
Likely	19.2	9.6	6.1
Not very likely	20.1	9.3	4.4
Impossible	23.6	19.9	15.9
Don't know	15.2	6.8	3.4
Region/Location			
St Michael	24.3	12.6	8.3
Else	16.3	7.8	5.1

Comparisons From Table 8a

7.3 Male/Female Comparisons

Lifetime prevalence for females was slightly higher than males. Slightly more than one-fifth of all females (21.3%) and just about one in every six males (17.7%) reported having used inhalants in their lifetime. Annual prevalence was notably higher among females as well, (11.9% compared to 7.7% among males). The current use prevalence was slightly higher for females (7.6% versus 4.9%).

7.4   Age

As age increased, lifetime, annual and current use prevalence decreased. Lifetime prevalence was 22.7% among those under 15 years old and decreased to 17.2% among those 15 -16 years old and then to 11.8% among those 17 years and older. Annual prevalence showed the same pattern decreasing from 11.1% among those less than 15 years to 4.7% among those 17 years and older. Current use was highest among the youngest age group (7.1%) and decreased to (3.7%) among those students 17 years and older.

Solvent Use Prevalence by Age

□ > 15 yrs old ■ 15-16 yrs old □ 17+ years old
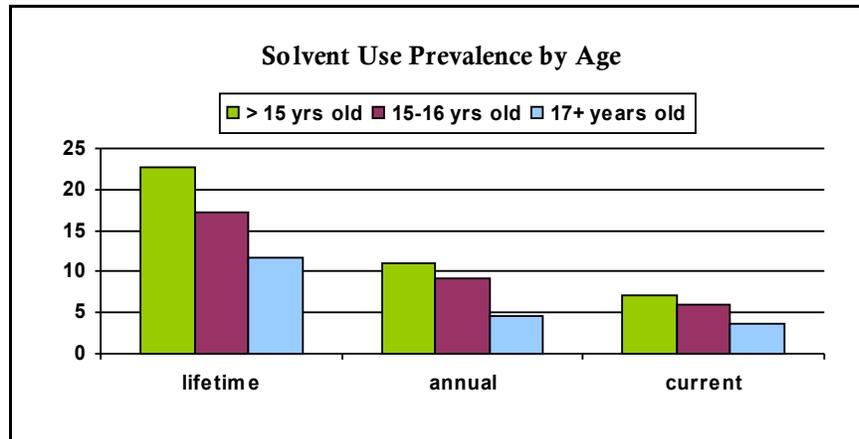
7.5   Grade Level

Lifetime prevalence showed the same pattern of decrease seen with age but the annual and current use prevalence among grade levels showed a higher prevalence among those students in Form 4. Current use prevalence was higher among students in Form 4 (7.7%) followed by those in Form 5 or 6 (6.2%). The lowest grade level (Form 2), reported current use prevalence of 5.3%.

7.6   Type of School

Lifetime prevalence among students from private schools was significantly different from that among public school students (39.3% versus 19.1% respectively,

p<0.001). The same pattern was observed for annual prevalence (17.4% versus 9.7%, p<0.001) and current use prevalence (13.4% versus 6.3%, p<0.001).
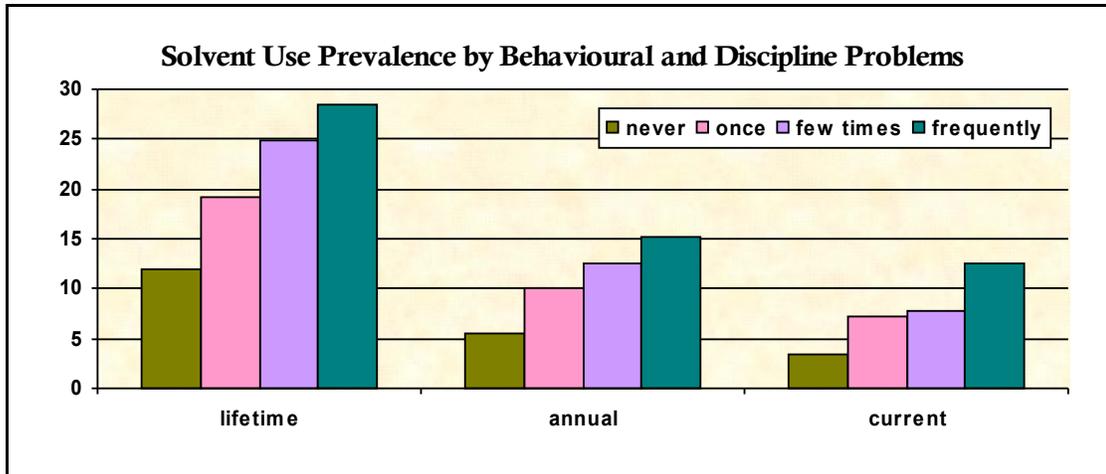
7.7 Region

Lifetime, annual, and current use prevalence for the St Michael's region was significantly higher than the other regions combined. Lifetime prevalence was one and a half times higher (24.3% compared to 16.3%), annual prevalence was 5 percentage points higher (12.6% compared to 7.8%), and current use prevalence was 3 percentage points higher (8.3% compared to 5.1%).   These were all significantly different at the p<0.05 level.

7.8 Repeating School Years

Students who reported repeating two or more school years were more likely to report a higher lifetime prevalence of inhalant use (24.1%). Those who had repeated one school year were less likely to report rates that were higher than those who had reported either 'no' repeats or 'two plus' repeats.

7.9 Behavioural and Discipline Problems

Prevalence increased significantly as the frequency of behavioural and discipline problems increased.   More than twice as many students who frequently had behavioural or discipline problems reported lifetime prevalence compared to those who never had (28.8% compared to 11.9%, p<0.05).   The same significant differences were observed for annual prevalence and current use prevalence. Prevalence was significantly higher among students who reported increasing numbers of discipline and behavioural problems.

Solvent Use Prevalence by Behavioural and Discipline Problems

Legend: never, once, few times, frequently

Categories: lifetime, annual, current

7.10 Probability of Finishing School

Students who felt that it was "very likely" that they would finish secondary school were as likely to report inhalants as those who felt it was "not very likely" or even "impossible" to finish school. Lifetime prevalence ranged from 20.1% to 23.6% while annual prevalence ranged from 6.8% to 11.6%. Current use prevalence ranged from 4.4% to 15.9%. .

Solvent Use Prevalence and Probability of Finishing School

Legend: very likely, likely, not very likely, impossible

Categories: current, annual, lifetime
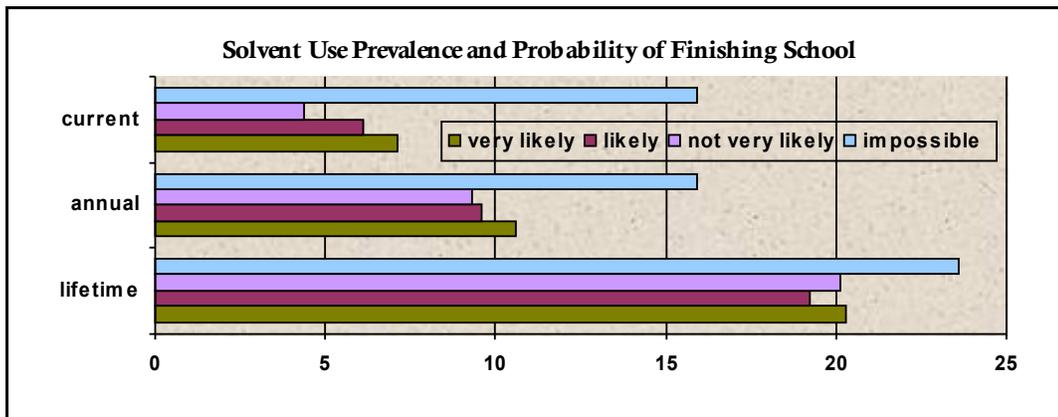
7.11   Frequency of Solvent Use

Table 8b: Frequency of Inhalant Use in the last Month

Frequency	Overall	Male	Female
Once	8.1	8.6	7.5
Sometimes past 12 month	9.5	8.3	10.7
Sometime during the month	6.5	3.4	9.0
Sometimes during the week	8.5	6.2	10.3
Daily	7.8	6.2	8.6
No data	59.7	67.2	53.8

Students who indicated inhalant use in the last month were asked to state with what frequency but a considerable proportion (59.7%) did not give a response. About 8% had used solvents and inhalants once 9.5% in the past 12 month and form 6.5-8.5% had used solvents daily, weekly or monthly.

8.   Marijuana (table 9a thru 9d)

8.1   Prevalence and Incidence

Lifetime prevalence of marijuana use was 17.7%. About one in every six students reported having tried marijuana. The annual prevalence was 10.8% and the current use prevalence was 6% (about one in every 15 students were currently using marijuana). One-year incidence rate was 5.9% and the one-month rate was 2.3%. About one in every 17 students reported using marijuana for the first time in the one-year period before the survey. However, only a small proportion, about one in every 43 students tried marijuana during the one-month period before the survey.

8.2   Age of First Use

The mean age of first marijuana use was 12.6 years and the median age 13 years. Seventy-five percent or three-quarters of students who had used marijuana had done so by age 14 years and 7.6% had used marijuana by age 9 years. The mean age of first use among males was a little lower than that of the females (12.4 years for males and 12.9 years for females).

8.3 Perceived Harm

Not many students felt that <u>smoking marijuana sometimes</u> was very harmful. Only four of every ten students (42.7%) felt it was very harmful. More than a quarter (26.6%) felt it was moderately harmful and an additional 14.8% slightly harmful. A notable high proportion (8.8%) or about one in every 11 students felt it was not harmful and 7% did not know of the harm.

Perceived Harm for Marijuana Use

inhaling second hand marijuana smoke

smoking marijuana frequently

smoking marijuana sometimes

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100 %

□ not harmful ■ slightly harmful □ moderately harmful ■ very harmful □ don't know
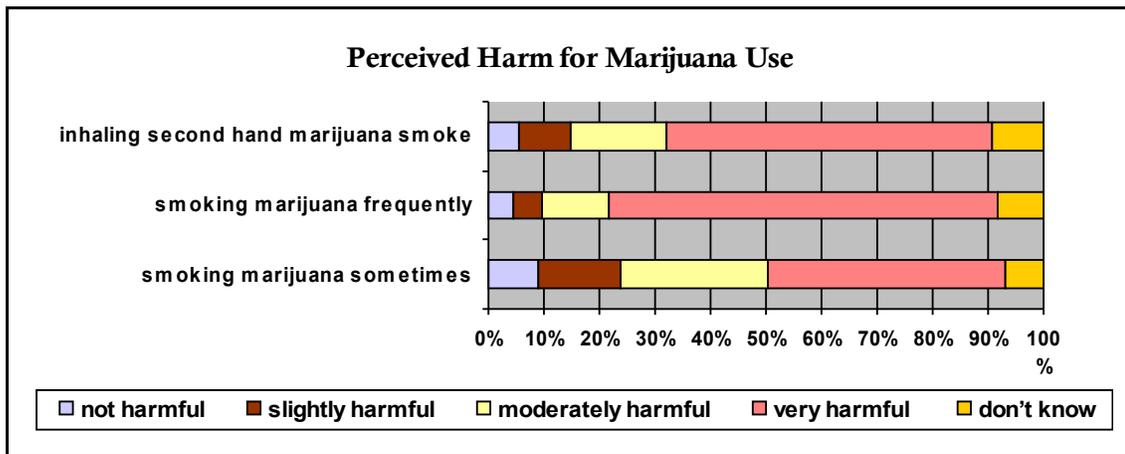
Students were more concerned about the harm of <u>smoking marijuana frequently.</u> Seven of every ten students (70.2%) felt that this was very harmful and only 4.5% felt it was not harmful. An even higher proportion (8.2%) said they did not know of the harm of smoking marijuana frequently.

Students were asked about the harm related to <u>inhaling second hand marijuana smoke</u> – a little more than half (58.4%) said it was very harmful (overall, about 85% said it was harmful), 5.5% said it was not harmful and 9.4% (one in every 11 students) did not know of the harm.

Table 9a: Percentage of Marijuana Use by Various Sub-grouping

|	Lifetime	Annual	Month
Overall	17.7	10.8	6.1
Gender			
Males	20.4	12.4	8.1
Females	14.8	9.0	4.3
Grade Level			
2nd Form	8.4	4.6	3.4
4th Form	19.8	11.6	6.7
5th or 6th Form	23.1	14.9	7.6
Age Grouping			
< 15 years	11.2	6.2	3.9
15-16 years	23.6	15.1	7.7
17+ years	27.4	18.2	12.8
Type of School			
Public	17.7	10.7	6.0
Private	16.4	12.7	7.2
Behaviour and Discipline Problems			
Never	8.5	4.8	2.2
Once	12.7	6.6	4.5
A few times	22.6	13.9	7.5
Frequently	52.4	39.7	24.7
Repeated School Years			
None	15.6	9.3	5.1
One Year	26.6	17.5	9.7
Two or more Years	19.4	13.6	10.6
Probability of Finishing School			
Very likely	14.3	8.7	4.5
Likely	24.1	16.1	8.5
Not very likely	24.6	15.1	10.4
Impossible	26.6	23.1	20.1
Don't know	19.9	8.9	6.8
Region/Location			
St Michael	17.3	11.1	6.4
Else	17.9	10.5	5.9

Comparisons From Table 9a

8.4   Male/Female Comparisons

Lifetime prevalence for males was significantly higher than females, $p<0.01$. One-fifth of all males (20.4%) and just about one in every seven females (14.8%) reported having used marijuana in their lifetime. Annual prevalence was notably higher among males as well, (12.4% compared to 9% among females). The current use prevalence among males was twice that of females (8.1% versus 4.3%).

8.5 Age

As age increased, lifetime, annual and current use prevalence also increased. Lifetime prevalence was 11.2% among those under 15 years old and increased to 23.6% among those 15 -16 years old and then to 27.4% among those 17 years and older.

Marijuana Use Prevalence by Age
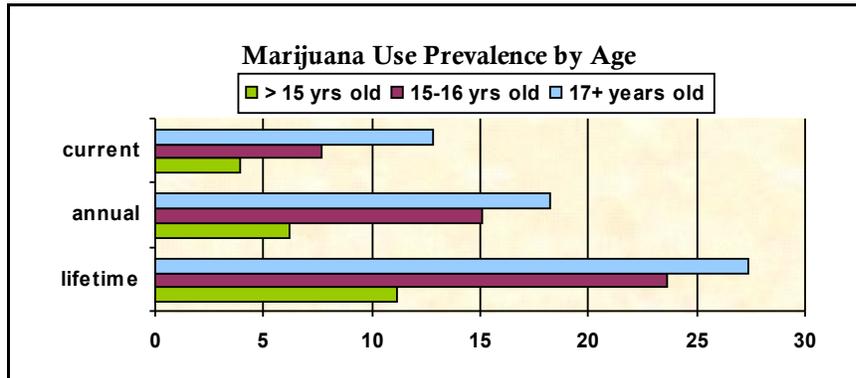
Annual prevalence showed the same pattern increasing from 6.2% among those less than 15 years to 18.2% among those 17 years and older. Current use was highest among the oldest age group (12.8%) and decreased to (3.9%) among those students 15 years and under. Grade level showed the same pattern of increase seen with age.

8.6 Type of School

Lifetime prevalence among students from public schools was only slightly higher than those of private schools (17.7% versus 16.4%). A little different pattern was observed for annual and current use prevalence. The private school's annual prevalence was slightly higher (12.7% versus 10.7%) and for current use (7.2% versus 6%).

8.7 Region

Lifetime prevalence for the St Michael region (17.3%) was about the same as the other regions combined (17.9%). Annual and current use prevalence were less than one percentage points different when comparing St Michael and the other regions.

8.8 Behavioural and Discipline Problems

Prevalence increased significantly as the frequency of behavioural and discipline problems increased. More than 6 times the percentage students who frequently had behavioural or discipline problems reported lifetime prevalence compared to those who never had (52.4% compared to 8.5%, p<0.001). The same significant differences were observed for annual prevalence (8 times as many) and current use prevalence (11 times as many). Prevalence was significantly higher among students who reported increasing numbers of discipline and behavioural problems.
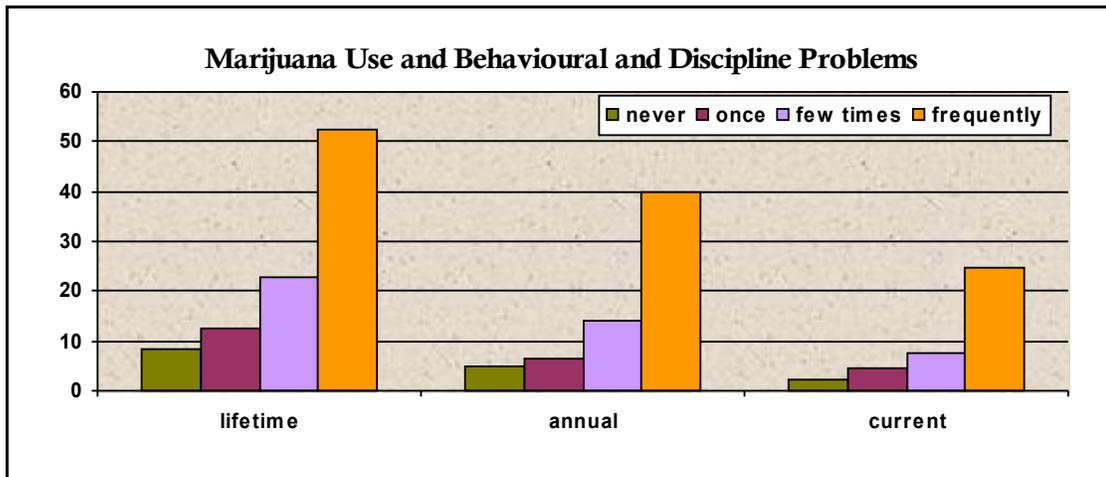
8.9 Repeating School Years

Students who reported repeating one school year were more likely to report a higher lifetime prevalence of marijuana use (26.6%). Those who had repeated two or more school years reported lifetime prevalence of 19.4% and those who had not repeated any school years a prevalence of 15.6%. Those who repeated school years were more likely to report higher annual and current use prevalence than those who had reported no repeats.

8.10   Probability of Finishing School

Students who felt that it was "very likely" that they would finish secondary school reported notable lower prevalence of marijuana use compared to those who felt it was "not very likely" or even "impossible" to finish school. Lifetime prevalence ranged from 14.3% to 26.6% while annual prevalence ranged from 8.7% to 23.1%. Current use prevalence ranged from 4.5% to 20.1%. In all instances, the lowest prevalence related to those who felt it was "very likely" to complete school and the highest prevalence to those who felt is was "impossible" to complete school.
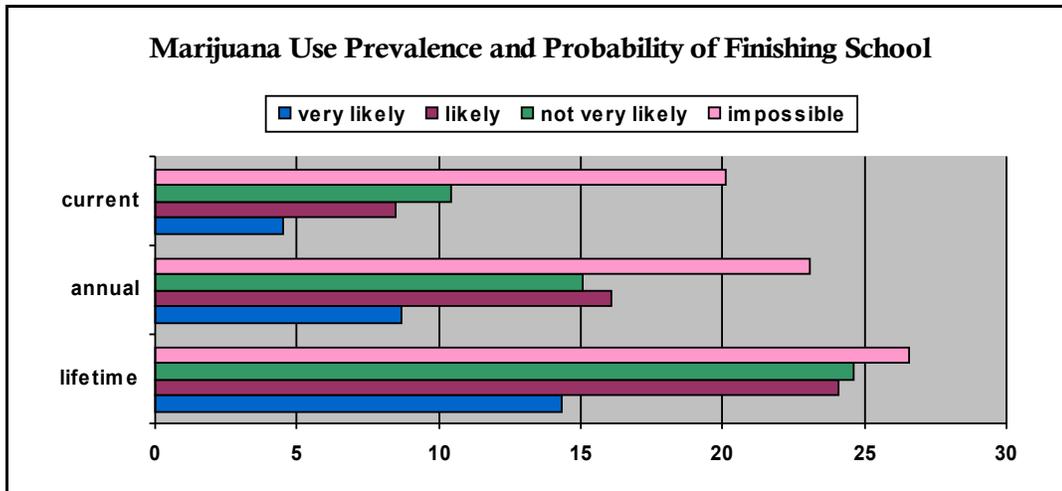
8.11   Frequency of Marijuana Use

Table 9b: Frequency of Marijuana Use in the last Month

Frequency	Overall	Male	Female
Once	7.0	4.9	9.2
Sometimes past 12 month	10.9	12.7	9.1
Sometime during the month	9.6	9.7	9.6
Sometimes during the week	7.7	8.4	7.0
Daily	5.9	6.8	5.1
No data	58.8	57.6	60.1

Students who indicated marijuana use in the last month were asked to state with what frequency but a considerable proportion (58.8%) did not give a response. About 7% had used marijuana once, 10.9% in the past 12 months and from 5.9

-9.6% had used solvents daily, weekly or monthly. Females were as likely as males to report monthly, weekly or daily use (5 - 9.6% of females and 6.8 - 9.7% of males).

8.12 Location Where Marijuana Most Often Smoked

Table 9c: Favourite Place for Using Marijuana

Location	Overall	Male	Female
At Home	7.6	7.5	7.8
At school	1.3	1.7	0.8
On the block	15.0	19.9	9.5
At friend's house	3.6	2.8	4.4
Sporting events	0.6	0.4	0.8
At other social events	6.3	5.9	6.9
Other	3.5	2.2	4.9

The most favourite location where marijuana was most often consumed was "on the block" (15%).   This was followed by "home' (7.6%) and at other social events" (6.3%). At a "friend's house" was only reported by 3.6% of students and very negligible reports of using marijuana at school (1.3%). Considerable more males compared to females indicated that they consumed marijuana "on the block" as the favourite location (19.9% versus 9.5%). However, they were as likely to indicate smoking marijuana at "other social events", the next most favourite location.

8.13 Sources of Marijuana – From Whom or Where Obtained

Marijuana was most often obtained from friends (23.6%).   The street pusher accounted for 6.7% and other sources accounted for 4.2%. Very few students (5.3% overall) indicated that marijuana was obtained from siblings, parents or other relatives. Females as well as males were more likely to obtain marijuana from friends (equal proportions of males and females reported this, (23.7% and 23.5% respectively).

Table 9d: Sources of Marijuana

Sources	Overall	Male	Female
Friends	23.6	23.7	23.5
Parents	0.9	1.7	-

Brother/Sister	1.5	1.8	1.2
Other Relatives	2.9	1.9	2.3
Street Pusher	6.7	9.4	3.6
Other	4.2	2.9	5.7

9. Tranquilizers and Stimulants (table 10a)

Students were asked about non-medical prescribed tranquilizer and stimulant use. Due to the very low annual and current use prevalence reported overall cross-tabs were done only with respect to lifetime prevalence.

9.1 Tranquilizer - Prevalence and Incidence

The overall lifetime prevalence was very low – 2.6% of students reported lifetime use and less than 1% reported current use. Lifetime prevalence was about the same for males and females. Students in the two lower grades reported slightly higher prevalence than those in the highest grade level. This was reversed for age groupings – a much higher prevalence was reported by the older students (those 17 years and older).

The incidence of tranquilizer use was also very low. Only about 0.8% of students reported starting to use tranquilizers in the one-year period before the survey. The one month incidence was even lower (0.4%).

The prevalence reported by private schools was three times higher than that of public schools (7.3% versus 2.5%). Students who reported frequent behaviour and discipline problems also reported a much higher prevalence of tranquilizer use. Those who repeated courses were also more likely to report higher prevalence. Students who felt it was "impossible" to complete school reported a significantly higher prevalence compared to all other students (5-6 times higher).

Table 10a: Percentage of Tranquilizers and Stimulants Use by Various Sub-grouping

| | Tranquilizer | Stimulants | |
	Lifetime	Lifetime	Annual
Overall	2.6	3.5	2.4
Gender			
Males	2.2	3.1	2.1
Females	2.8	3.8	2.6
Grade Level			
2nd Form	2.8	2.9	2.1
4th Form	2.9	5.3	3.4
5th or 6th Form	2.1	2.3	1.5
Age Grouping			
< 15 years	2.7	3.8	2.5
15-16 years	2.1	3.3	2.1
17+ years	4.5	1.8	1.8
Type of School			
Public	2.5	3.3	2.3
Private	7.3	13.5	5.9
Behaviour and Discipline Problems			
Never	1.4	1.6	1.0
Once	2.3	2.6	2.1
A few times	3.2	4.8	2.9
Frequently	6.7	7.7	5.9
Repeated School Years			
None	2.5	3.5	2.3
One Year	2.1	2.1	1.8
Two or more Years	5.9	7.4	4.4
Probability of Finishing School			
Very likely	2.2	3.4	2.5
Likely	2.5	4.1	2.5
Not very likely	1.2	1.2	1.2
Impossible	13.4	10.7	3.2
Don't know	3.6	2.8	2.0
Region/Location			
St Michael	3.2	5.2	3.1
Else	2.2	2.4	1.8

9.2 Age of first use

The mean age of first use was 11 years as well as the median age. Seventy-five percent had initiated use by age 12 and 18.8% by age 9 years.

9.3 Perceived Harm (Tranquilizers/Stimulants)

Quite a large proportion of students felt it was "very harmful" to <u>use tranquilizers sometimes</u>. A notable large proportion did not know of the harm (11.7%), however only a very small proportion (1.3%) felt that it was harmful to use tranquilizers/stimulants sometimes.

In terms of <u>using tranquilizers/stimulants frequently</u>, an equally high proportion (72.5%) felt it was "very harmful" and an even higher proportion (14.6%) did not know of the harm. About 2% felt it was "not harmful" to use tranquilizers/stimulants frequently.

9.4   Stimulants – Prevalence and Incidence

Overall lifetime prevalence was similarly low (compared to tranquilizers). Only 3.5% of students indicated lifetime use while annual use was 2.4% and current use even lower at 1.6%. Males and females reported about equal proportions of lifetime and annual use (3.1%) males versus 3.8% females for lifetime and 2.1% males versus 2.6% females for annual. The one-year incidence was 1.8% and the one-month less than 1% (0.9%). The median age of first use was 12 years and the mean age 11.5 years. However, 75% of use had been initiated by age 14 years.

Both lifetime and annual use were higher among the younger age groups and decreased notably among those 17 years and older. Private schools reported a considerable higher proportion of lifetime use compared to public schools (13.5% versus 3.3%).

Students with frequent behavioural or discipline problems and who had repeated two or more school years were much more likely to report a higher prevalence of stimulant use. This was also the case for students who felt it was "impossible" to finish school.

10.   Other Illegal Drug Prevalence (table 11)

An estimate was computed for any illegal drug use and the lifetime prevalence was 34.4%. The annual prevalence was 20.1% and current use prevalence was 12.7%.   The lifetime prevalence for cocaine powder was 2%. Very few students indicated having tried using cocaine and the annual and current use prevalence was less than one percent.

Lifetime prevalence for heroin, opium and morphine was just about 1%. Again, very few students indicated use of these opiates.   Interestingly, lifetime prevalence of hallucinogens was 3.4% (probably indicating an interpretation of marijuana use).   Hashish was just about 1% lifetime but lifetime prevalence of crack cocaine use was 2% with current use prevalence use decreasing to half of one percent (0.5%).   Ecstasy use showed the same pattern as crack cocaine (about 2% lifetime prevalence and decreasing to 0.4% current use (very negligible use).

Table 11: Overall Reported Prevalence

	Prevalence			Incidence	
	Lifetime	**Annual**	**Current**	**One-year**	**30-Day**
Tranquilizers	2.6	**1.1**	0.8	0.8	0.5
Stimulants	3.5	**2.3**	1.6	1.8	0.9
Inhalants	19.7	**9.9**	6.5	9.9	6.9
Marijuana	17.7	**10.8**	6.1	5.9	2.3
Coca paste	1.1	*	*	*	*
Cocaine powder	2.0	**0.9**	0.5	0.9	0.5
Heroin	0.9	*	*	*	*
Opium	0.9	*	*	*	*
Morphine	1.2	*	*	*	*
Hallucinogens	3.4	*	*	*	*
Hashish	1.1	*	*	*	*
Crack cocaine	2.0	**0.7**	0.5	0.7	0.3
Ecstasy	1.9	**0.7**	0.4	0.8	0.3
Other drugs	5.1	**4.2**	2.4	3.4	1.5
Any illegal drug	34.4	**20.1**	12.7	15.9	9.3

Notes: (a) * annual, current prevalence and incidence not asked
              (b) tranquilizers and stimulants refer to use without medical prescription

10.1   Other Perceptions of Harm (cocaine, ecstasy and coca paste) [table 12]

Students were asked their opinions about the level of harm posed by using various substances. The level of harm as already indicated ranged from not harmful, slightly harmful, moderately harmful, very harmful and don't know. Table 12 describes responses for cocaine including crack cocaine, coca paste and ecstasy.

Table 12: Respondent's Perception of Harm

	Perception of Harm				
	Not harmful	Slightly harmful	Moderate harmful	Very harmful	Don't know
Using cocaine or crack sometimes	1.2	5.8	20.8	62.7	9.5
Using cocaine or crack frequently	1.3	2.0	6.1	79.7	11.0
Using coca paste sometimes	2.7	7.5	15.7	39.5	34.6
Using coca paste frequently	2.0	3.3	7.8	53.4	33.4
Using ecstasy sometimes	2.5	8.5	20.0	48.8	20.2
Using ecstasy frequently	1.6	2.9	8.0	67.6	19.9

10.2 Using cocaine or crack sometimes:

- A relatively high proportion of students felt that using cocaine or crack cocaine sometimes was very harmful (62.7%). Some (9.5%) did not know of the harm. Important to note that about 26% felt there was only moderate or slight harm involved with using crack cocaine or cocaine sometimes

10.3 Using cocaine or crack frequently:

- Perception of harm increased for using cocaine frequently – 79.7% of students said it was very harmful but those who did not know of the harm increased to 11%. Very few students felt that there was no harm involved.

10.4 Using coca paste sometimes:

- A considerable high proportion of students did not know of the harm related to the use of coca paste (34.6%) and only 39.5% felt that using it sometimes was very harmful. Of the others, 15.7% felt there was moderate harm, 7.5%

felt it was only slightly harmful and a negligible amount (2.7%) felt there was no harm.

10.5   Using coca paste frequently:

- The same general pattern was observed although a greater proportion felt that frequent use was very harmful (53.4%). A third (33.4%) did not know of the harm and 2% still felt there was no harm involved.

10.6   Using ecstasy sometimes:

- Less than a half of the students felt that using ecstasy sometimes was very harmful (48.8%) while only 20% felt it involved moderate harm. A notable high proportion did not know of the harm.

10.7   Using ecstasy frequently:

- Similar to using ecstasy sometimes, 20% of students indicated that they did not know of the harm. However, a larger proportion indicated that this was very harmful (67.6%) while 1.6% felt it was not harmful.

10.8   Perception of Harm - Summary

Students were more likely to indicate that they **did not know the harm** for the following:

- Using coca paste (sometimes or frequently);
- Using crack cocaine (sometimes or frequently);
- Using ecstasy (sometimes or frequently);
- Inhaling solvents (sometimes or frequently); and
- Taking un-prescribed tranquilizers/stimulants frequently

They were more likely to indicate that there was **no harm** involved in

- Drinking alcoholic beverages sometimes; and
- Smoking marijuana sometimes

11.   Access to Drugs (tables 13a and 13b)

Students were questioned on the degree of difficulty in obtaining drugs, whether it was easy, difficult or impossible to obtain. The drug categories indicated were: marijuana, cocaine, coca paste, ecstasy and crack.

Table 13a: Access to Drugs

Drugs	Easy	Difficult	Impossible to Obtain	Don't know
Marijuana	45.0	12.3	10.9	31.8
Cocaine	19.0	20.9	15.9	44.1
Coca paste	8.6	15.3	15.6	60.5
Ecstasy	15.5	16.8	16.4	51.6
Crack cocaine	19.0	16.8	16.2	48.0

11.1   Marijuana – About four in every ten students (45%) felt it was easy to obtain marijuana while 23.2% said it was either difficult (12.3%) or it was impossible to obtain (10.9%). Some 31.8% did not know what it would be like to access it.

11.2   Cocaine - Compared to marijuana, significantly fewer students (19% or just about one-fifth) felt it would be easy to obtain cocaine. About 20.9% felt it would be difficult, 15.9% felt it would be impossible to access it and 44.1% of students did not know how easy it would be to access.

11.3   Coca Paste - Most students did not know how easy it would be to access (60.5%). Most others (30.9%) felt it would be difficult (15.3%) or impossible to access (15.6%). A relatively small proportion felt it would be easy to access (8.6%).

11.4   Ecstasy - Unlike marijuana and cocaine, about half of the students (51.6%) indicated that they did not know how to access it. About 16% felt it was easy to access while 16.8% felt it was difficult and a further 16.4% felt it was impossible to access.

11.5   Crack Cocaine – Just under half of all students (48%) indicated they did not know how easy it would be to access. About one-fifth (19%) felt it would be easy to access, 16.8% felt it would be difficult and 16.2% felt it would be impossible to access.

Marijuana was perceived to be the easiest drug to obtain followed by cocaine, crack cocaine and ecstasy. Coca paste was seen as the one least easy to access. In terms of difficult to access, if coca paste was excluded, then cocaine, crack cocaine and ecstasy were perceived as equally difficult to access while marijuana was least difficult to access. Students also perceived all drugs equally impossible to access with the exception of marijuana.
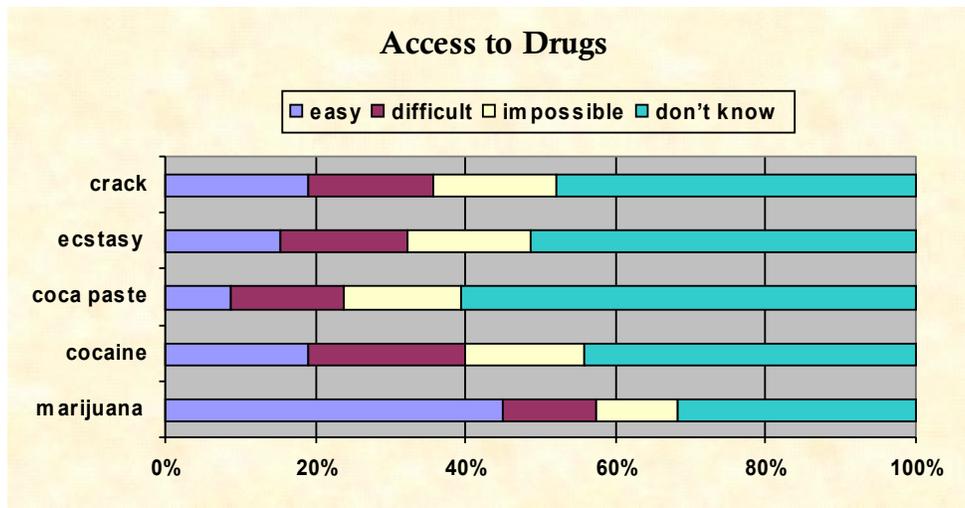
11.6   Access (Males compared to Females)

Responses were similar with respect to marijuana (about the same proportion of male students compared to female students felt that marijuana was easy to access (45.7% and 44.3% respectively).   Slightly more female students perceived that cocaine, crack cocaine and ecstasy were easy to access compared to males. On the other hand, 44 - 51% of males compared to 45 -

52% of females indicated that they did not know how easy it would be to access crack cocaine, cocaine, or ecstasy.

Table 13b: Access to Drugs by Gender

Drugs	Male				Females			
	Easy	Diff	ITO	DK	Easy	Diff	ITO	DK
Marijuana	45.7	11.0	11.9	31.4	44.3	13.6	9.9	32.2
Cocaine	17.4	21.1	18.0	43.6	20.5	20.8	14.2	44.5
Coca paste	9.3	16.1	17.8	56.8	8.0	14.5	13.7	63.8
Ecstasy	14.5	17.0	17.9	50.6	15.8	16.5	15.2	52.4
Crack cocaine	18.5	16.6	18.9	46.0	19.5	17.0	14.0	49.5

Note: ITO= impossible to obtain   Diff= difficult   DK= don't know

12.   Curiosity about Illegal Drugs and Chance to Try Illegal Drugs (table 14)

Students were asked if they had ever been curious to try an illegal drug. Twenty-six percent said "yes", while 13.1% were not sure and 61% said "no". About the same proportion of males and females (25.8% and 25.3%, respectively) said yes they had been curious about trying an illegal drug. The proportion that was not sure was also about the same (13.4% males and 12.8% females).

Table 14: Curiosity and Opportunity to Try Illegal Drugs by Gender

	Curiosity to Try Illegal Drugs			Chance to Try an Illegal Drug		
	Yes	No	Not sure	Yes	No	Not sure
Overall	26.0	60.9	13.1	13.1	67.7	19.0
Male	25.8	60.9	13.4	13.9	67.8	18.3
Female	25.3	60.0	12.8	12.4	68.4	19.3

Students were also asked if they would try an illegal drug if they had the chance – 13.1% said "yes" and 19% said "not sure". Slightly more males than females said yes (13.9% males versus 12.4% females). However, slightly more females than males said they were not sure – 19.3% of females compared to 18.3% of males.

Curiosity to try Drugs/Trying Illegal Drugs

Legend: ■ curious about trying illegal drugs ■ opportunity to try illegal drug

	yes	no	not sure
curious about trying illegal drugs	26	60.9	13.1
opportunity to try illegal drug	13.1	67.7	19
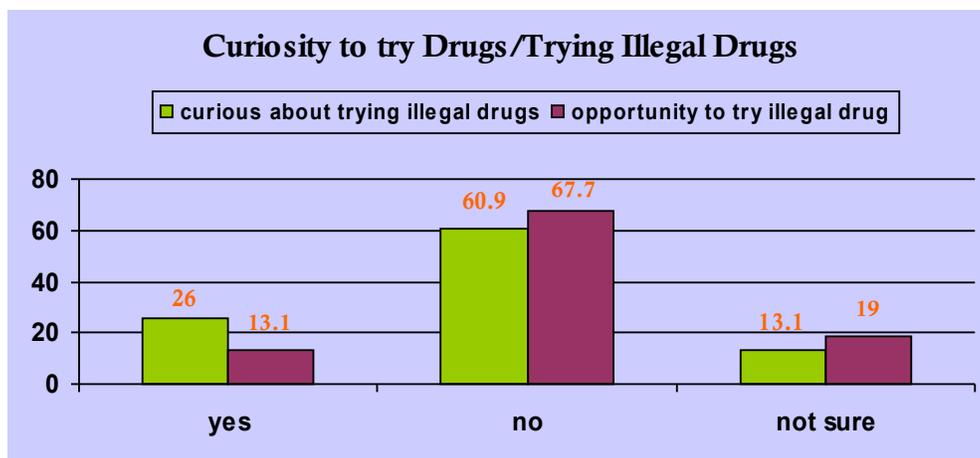
13. Offer to Buy or Use Drugs (tables 15a and 15b)

The vast majority of students indicated that they had never been offered the indicated drugs. Nine of every ten students (94-98%) had never been offered cocaine, coca paste, ecstasy or crack cocaine. However, only 71% of students said they had never been offered marijuana.   Overall, 29.5% of students had been offered marijuana at some point, 5.7% cocaine, 3.6% ecstasy, and 3.8% crack.

Table 15a: Last Time Drugs Offered (to buy or to use)

	During last 30 days	>1 mth < 1yr	>1 yr ago	Never been offered
Marijuana	12.2	9.4	7.9	70.5
Cocaine	1.5	1.8	2.5	94.3
Coca paste	0.7	0.3	0.9	98.1
Ecstasy	1.0	0.9	1.7	96.3
Crack cocaine	1.6	0.7	1.6	96.1

Some 12.2% of students had been offered marijuana in the past 30 days prior to the survey, but less than two percent (1-1.6%) of students had been offered any of the other drugs indicated. Cocaine was offered to 2.5% of students more than a year ago; marijuana was offered to 7.9% of students more than a year ago;

ecstasy was offered to 1.7% of students and crack cocaine was offered to 1.6% of students.

In terms of offers made more than a month, but less that a year before the survey, the highest proportion related to marijuana – 9.4% of marijuana was offered but less that one percent of the other drugs with the exception of crack cocaine (1.6%).
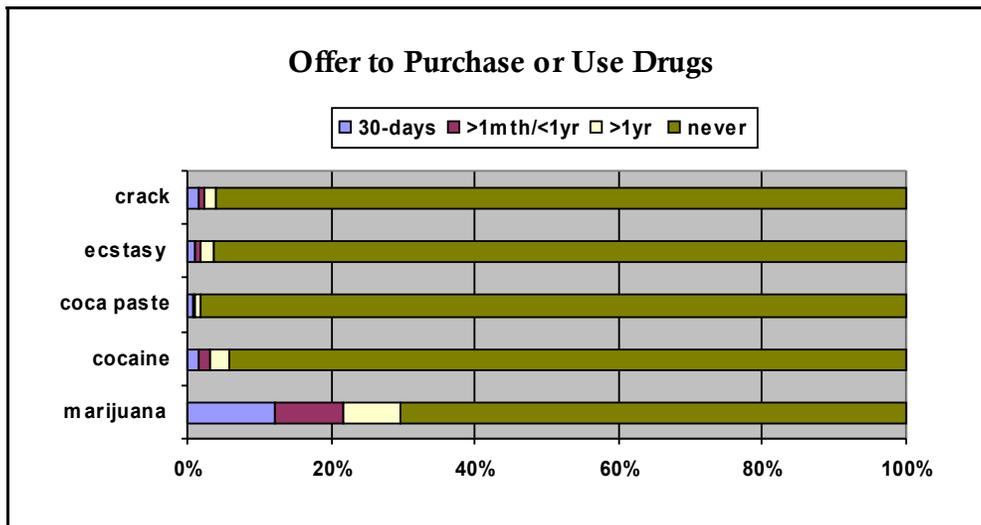
13.1 Male Female Comparison

Notably more males than females reported that they were offered marijuana (47% of males compared to 22% of females).   About the same proportion of males and females were offered cocaine (6.2% of males compared to 5.2% of females). This was the same pattern observed for ecstasy. However, a slightly larger proportion of male students (4.5%) were offered crack cocaine compared to female students (3.2%).

13.2 Age and Gender Comparison (table 15b)

Table 15b: Age and Gender Comparison for Offer to Buy or Use Drugs

	Sex		Age Grouping		
	Male	Female	<15 yrs	15-16	17+

Marijuana	34.0	25.4	20.5	37.6	44.3
Cocaine	6.2	5.2	5.4	6.2	3.6
Ecstasy	3.5	3.7	2.7	4.7	4.5
Crack	4.5	3.2	3.6	4.4	0.9

In terms of drugs being offered at the differing age groups, a higher proportion of marijuana was offered to students as the age grouping increased (about 21% to those 15 years; 38% to those 15 – 16 years and 44% to those 17 years and older). For cocaine, a higher proportion of students <15 year and 15 - 16 years old were offered. More students in the older age groupings (15 - 16 years and 17 plus years) were offered ecstasy.

Supplemental Tables

Table 16: Respondent's Perception of Harm

	Perception of Harm				
	Not harmful	Slightly harmful	Moderate harmful	Very harmful	Don't know
Smoking cigarette sometimes	4.5	23.4	26.5	39.3	6.3
Smoking cigarette frequently	1.4	4.4	9.8	77.1	7.3
Inhaling second hand cigarette smoke	4.5	12.7	20.7	53.9	8.1
Drinking alcoholic beverages sometimes	18.4	34.7	26.2	15.6	5.2
Drinking alcoholic beverages frequently	4.3	9.6	19.6	59.4	7.1
Getting drunk	3.4	4.6	8.9	76.4	6.8
Inhaling solvents sometimes	4.2	17.0	28.4	33.7	16.7
Inhaling solvents frequently	2.3	5.6	14.4	60.8	16.9
Smoking marijuana sometimes	8.8	14.8	26.6	42.7	7.0
Smoking marijuana frequently	4.5	5.1	12.0	70.2	8.2
Inhaling second hand marijuana smoke	5.5	9.4	17.3	58.4	9.4
Use tranquilizers sometimes	1.3	2.6	7.8	76.5	11.7
Using tranquilizers/stimulants frequently	1.9	2.8	8.0	72.6	14.6
Using cocaine or crack sometimes	1.2	5.8	20.8	62.7	9.5
Using cocaine or crack frequently	1.3	2.0	6.1	79.7	11.0
Using coca paste sometimes	2.7	7.5	15.7	39.5	34.6
Using coca paste frequently	2.0	3.3	7.8	53.4	33.4
Using ecstasy sometimes	2.5	8.5	20.0	48.8	20.2
Using ecstasy frequently	1.6	2.9	8.0	67.6	19.9

Table 17: Age of First Use (Mean and Median Age (Yrs)

	Mean	Median
Cigarettes	11.7	12.0
Alcohol	10.9	11.0
Tranquilizers	11.2	11.0
Stimulants	11.5	12.0
Inhalants	10.4	11.0
Marijuana	12.6	13.0
Cocaine powder	11.7	12.0
Hallucinogens	12.6	13.0
Crack cocaine	11.8	12.0
Ecstasy	13.2	14.0
Other drugs	11.5	12.0
Any illegal drug	11.4	12.0

Section 3

14. Discussion and Recommendations

14.1 Substance Use

The use of alcohol, marijuana and other drugs has long been linked with several negative outcomes for youth, including poor academic achievement and school dropouts (Jessor and Jessor 1977, Dryfoss 1990). The findings of the 2006 Student Survey indicated that not many students were current users of illegal drugs. About 13% of students were judged to be currently using some form of illegal drug and the majority of this constituted the use of marijuana (about 6.1% of students) and inhalants (6.5% of students). In terms of the legal substances, more than one-third (34%) of students were currently using alcohol but only a small proportion were currently using tobacco (3.5%).

What was more interesting was the one-year incidence rate for both legal and illegal drugs. A considerable high proportion of students (47.5%) had started using alcohol for the first time in the one-year period before the survey. The one-year incidence for cigarettes was also concerning, (6.6%) of students had started using cigarettes for the first time in the one-year period before the survey. In the case of the illegal drugs, the one-year incidence rate for marijuana was about 6% and inhalants 10%.

Though very minimal, some students were reporting having used illegal substances such as cocaine powder, crack, heroin, opium, hallucinogens, and ecstasy (from 1 - 3.4% of students reported lifetime prevalence or having used these substances at least once in their lifetime).

There are significant numbers of students who are using alcohol, marijuana and tobacco. More than one half of the students consumed alcohol, just over 10% used marijuana and about 8% smoked cigarettes at least once in the 12 months before the survey. These three substances and solvents were the most commonly used by students in this survey.

Inhaling solvents continue to pose a risk for students and especially female students. Over one-fifth (21.3%) of female students reported lifetime use and about 8% were still current users. This compares to 18% of male students indicating lifetime use and 5% being current users.

While these statistics about reported lifetime and current use were notably high and of great concern, there were over 65% of students who had not used an illegal drug and 87% who were not currently using any illegal drugs. In addition, there were 78% who had never smoked a cigarette and 94% who were not presently smoking. It is essential that we continue to support these students who are making and maintaining healthy lifestyle choices.

These healthy lifestyle choices may be attributed to several factors, but they can certainly be maintained by implementing or strengthening programmes or policies, including: a comprehensive tobacco reduction strategy; media messages about the harm caused by smoking, restrictions in access to tobacco by minors, increased taxation on tobacco products, public smoking bans and increased advertising on cigarette packages about the harms associated with smoking. The same strategies can be applied with respect to alcohol.

Peer identification and pressure are often suggested as reasons why adolescents start to use drugs. The survey results identified students were more likely to use alcohol, cigarettes, and or marijuana if their friends gave them these substances. About a third of students got cigarettes from friends, about a quarter got alcohol and marijuana from friends. This highlights the importance of friendship patterns in the adoption of drug use among youth.

14.2   Perceived Harm

Students very infrequently perceived that substances including alcohol and cigarettes were very harmful. For the most part an average of 60 - 70% of students felt that the indicated substances were harmful. A notable proportion of students indicated that they **did not know the harm** for a number of substances including: using coca paste (sometimes or frequently); using crack cocaine (sometimes or frequently); using ecstasy (sometimes or frequently); inhaling solvents (sometimes or frequently); and taking un-prescribed tranquilizers/stimulants frequently.

In addition, they were more likely to indicate that there was **no harm** involved in drinking alcoholic beverages sometimes; and smoking marijuana sometimes. This low perception of harm related to especially alcohol and marijuana use, is perhaps reflected in the notable high prevalence of annual and current use for these two substances. There is a clear need for more education about the harmful consequence of substance use and maybe among parents as well so that they can positively impact on their children's perception of these substances.

14.3 Attitude to Illegal Drugs

The literature supports the fact that one of the factors most related to experimentation with or trying alcohol, tobacco and illegal drugs is curiosity. A large and important proportion (26%) of students expressed curiosity about trying illegal drugs. On the other hand, half as many (13%) said they would probably try an illegal drug if given the chance. This is very important in terms of preventing early drug use. There is now recognition that early prevention intervention (through education or health promotion) should be applied at an early enough age as a counter-measure to prevent experimentation.

14.4 Availability/Access to Drugs

Previous studies support the theory that the two factors that are most highly correlated with youth substance use are personal approval of drugs and perception of availability (Gelfand, Jenson, and Dew 1982; Gottfredson 1988).

Students were asked how easy it was to obtain certain drugs and maybe not surprisingly, many students indicated that marijuana was relatively easy to access. About four in every ten students (45%) felt it was easy to obtain marijuana, while 23.2% said it was either difficult or impossible to obtain.

Marijuana was perceived to be the easiest drug to obtain followed by cocaine, crack cocaine and ecstasy. Coca paste was seen as the one least easy to access. In terms of difficult to access, if coca paste was excluded, then cocaine, crack cocaine and ecstasy were perceived as equally difficult to access while marijuana was least difficult to access. Students also perceived all drugs equally impossible to access with the exception of marijuana.

14.5 Correlations

The relationships between frequency of behavioural and discipline problems, repeated courses and probability of finishing school and substance use were studied using bivariate analyses. Higher proportions of substance use were strongly and consistently related to students who reported behavioural and discipline problems a few times or frequently; and students who felt it was impossible or not very likely to finish school.   Students who never reported behavioural and discipline problems or felt that it was very likely to finish school were less likely to report current alcohol, tobacco or other drug use.

In summary, results from this survey highlight the problems of substance availability, somewhat low perception of harmfulness of drug use, attitudes towards illegal drug use and low age of first use. The information contained in this report is valuable to support students, families, schools and communities to ensure healthy and safe lifestyles for the youth and have identified areas that have potential for improvement (especially with respect to drug prevention education messages and health promotion).

15. Recommendations

15.1 Recommendation 1

A large proportion of students continue to choose not to use alcohol, cigarette and other drugs.   Efforts to support students in making and maintaining healthy choices must be continued. **Parents/guardians, schools, communities and government should work together to support adolescents making healthy decisions about substance use.**

15.2 Recommendation 2

Alcohol, cigarettes and other drug use including inhaling solvents are realities for many students in Barbados. Substance use behaviour can interfere with the healthy growth and development of youth and impact on educational outcomes. **Resources should be strengthened to address substance use prevention, intervention and health promotion for youth.**

15.3 Recommendation 3

Students, parents/guardians, schools, communities and policy makers should be informed about the trends in substance use as well as education, prevention and intervention strategies. Understanding these trends will assist in the enhancement of adolescent specific services spanning the continuum of care, which includes prevention, early intervention, referral and treatment. **The findings of this survey should be communicated to key stakeholders throughout the country.**

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Appendix – Questionnaire

SURVEY OF SECONDARY SCHOOL STUDENTS IN BARBADOS
STANDARDIZED QUESTIONNAIRE 2006

Good day!
*We are carrying out a school survey in different countries on the topic of public health. The objective is to obtain information to address, in the best way possible, the problems related to public health in these countries. Your cooperation in this survey would be of great value to this effect. Your answers are **absolutely confidential and are completely anonymous**, thus we ask you **to** respond very honestly.*

1. COUNTRY **Barbados**	2. Parish	3. CONTROL NUMBER

4. Type of School	5. Day, evening or night classes?
☐ 1. Public ☐☐2. Private ☐ 3. Other(specify) ….....................	☐☐☐1. Day ☐☐☐2. Early evening ☐☐☐3. Night
6. The students at my school are: ☐ 1. All Male ☐ 2. All Female ☐ 3. Mixed	**7. What form are you in?** …………………………………………………………… ……………

QUESTIONNAIRE NUMBER

8. Sex ☐ 1. Male ☐ 2. Female	9. Age ars old
10. What is your parents' marital status? (in relation to each other) ☐ 1. Single ☐ 2. Married ☐ 3. Divorced ☐ 4. Separated ☐ 5. Widow(er) ☐ 6. Living together/common law ☐ 7. Other………… ☐ 8. I don't know	**11. With whom do you live? (you may tick as many options as necessary).** Code ☐ 1. Father ☐ 2. Mother ☐ 3. Brother/ sister ☐ 4. Stepmother ☐ 5. Stepfather ☐ 6. Wife/Husband ☐ 7. Girlfriend/Boyfriend ☐ 8. Other relative ☐ 9. Friend ☐ 10. Alone ☐ 11. Other
12. What is the highest level of school that your mother completed? 1. None 4. Tertiary/ College 2. Primary 5. University 3. Secondary 6. Don't Know	**13. What is the highest level of school that your father completed?** 1. None 4. Tertiary/ College 2. Primary 5. University 3. Secondary 6.Don't Know
14. If you are working as well as studying, how many hours do you work per week? ☐ 1. Do not work ☐ 2. Work approximately ……… hours per week	**15. How likely is it that you will complete secondary school/college?** ☐ 1. Very likely ☐ 2. Likely ☐ 3. Not very likely ☐ 4. Impossible ☐ 5. Don't know

16. How likely is it that you will go to University?	17. How many school years have you had to repeat during the course of your studies?
☐ 1. Very likely ☐ 2. Likely ☐ 3. Not very likely ☐ 4. Impossible ☐ 5. Don't know	☐☐1. None ☐☐☐2. One ☐☐☐3. Two or more

18. Have you ever had behavioral and discipline problems during your school years? (For example detentions and suspensions, being sent to the Head, flogging)

☐☐☐1. Never

　☐☐2. Once

☐☐☐3. Few times

☐☐☐4. Frequently

19. In your opinion, how harmful are the following to your health?

	1. Not harmful	2. Slightly harmful	3. Moderately harmful	4. Very harmful	5. Don't know
1. Smoking cigarettes sometimes					
2. Smoking cigarettes frequently					
3. Drinking alcoholic beverages sometimes					
4. Drinking alcoholic beverages frequently					
5. Getting drunk					
6. Taking tranquilizers/stimulants without medical prescription sometimes (e.g., crack cocaine, ecstacy, caffeine, nicotine, alcohol, valium)					
7. Taking tranquilizers/ stimulants without medical prescription frequently					
8. Inhaling solvents sometimes					
9. Inhaling solvents frequently					
10. Smoking marijuana sometimes					
11. Smoking marijuana frequently					
12. Using cocaine or crack sometimes					
13. Using cocaine or crack frequently					
14. Using coca paste sometimes					
15. Using coca paste frequently					
16. Using ecstasy sometimes					
17. Using ecstasy frequently					
18. Inhaling second hand cigarette smoke					
19. Inhaling second hand marijuana smoke					

20. Have you ever smoked cigarettes? ☐ 1. Yes ☐ 2. No **(skip to #28)**	21. How old were you when you smoked cigarettes for the first time? 　　　　　　　　　Years old

22. When was the <u>first time</u> you smoked cigarettes? ☐ 0. Never **(skip to #28)** ☐☐1. During the past 30 days ☐☐2. More than 1 month ago, less than 1 year ago ☐☐3. More than a year ago	23. Have you smoked cigarettes in the <u>past 12 months</u>? ☐ 1. Yes ☐ 2. No **(skip to #28)**
24. Have you smoked cigarettes in the <u>past 30 days</u>? ☐ 1. Yes ☐ 2. No **(skip to #28)**	25. Approximately, how many cigarettes have you smoked a day in the past month? ☐☐1. 1 to 5 ☐☐2. 6 to 10 ☐☐3. 11 to 20 ☐☐4. More than 20

26. Where do you most often smoke cigarettes? ☐ 1. At home ☐ 5. At sporting events ☐ 2. At school ☐ 6. At other social event ☐ 3.On the block ☐ 7. Other**................** ☐ 4.At a friend's house	27. From whom/where do you usually get cigarettes? ☐ 1. Friends ☐ 5. Street vendor ☐ 2. Parents ☐ 6. Shop ☐ 3. Brother/Sister ☐ 7. Other................. ☐ 4. Other relative(s) .... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

28. Have you <u>ever</u> smoked Fantas? ☐ 1.[☐] ☐ 2. No **(skip to #36)**	29. How old were you when you smoked fantas for the first time? Years old
30. When was the <u>first time</u> you smoked Fantas? ☐ 0. Never **(skip to #36)** ☐☐1. During the past 30 days ☐☐2. More than 1 month ago, less than 1 year ago ☐☐3. More than a year ago	31. Have you smoked Fantas in the <u>past 12 months</u>? ☐ 1. Yes ☐ 2. No **(skip to #36)**
32. Have you smoked Fantas in the <u>past 30 days</u>? ☐ 1. Yes ☐ 2. No **(skip to #36)**	33. Approximately, how many Fantas have you smoked a day in the past month? ☐☐1. 1 to 5 ☐☐2. 6 to 10 ☐☐3. 11 to 20 ☐☐4. More than 20

34. Where do you most often smoke Fantas? ☐ 1. At home ☐ 5. At sporting events ☐ 2. At school ☐ 6. At other social event ☐ 3.On the block ☐ 7. Other**................** ☐ 4.At a friend's house	35. From whom/where do you usually get Fantas? ☐ 1. Friends ☐ 5. Street vendor ☐ 2. Parents ☐ 6. Shop ☐ 3. Brother/Sister ☐ 7. Other................. ☐ 4. Other relative(s) .... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

36. Have you <u>ever</u> used alcoholic beverages? ☐ 1. Yes ☐ 2. No **(skip to #46)**	37. How old were you when you used an alcoholic beverage for the first time? Years old
38. When was the <u>first time</u> you used an alcoholic beverage? ☐ 0. Never **(skip to #46)** ☐☐1. During the past 30 days ☐☐2. More than 1 month ago, less than 1 year ago ☐☐3. More than a year ago	39. Have you used alcoholic beverages in the <u>past 12 months</u>? ☐ 1. Yes ☐ 2. No **(skip to #46)**

40. **Have you used alcoholic beverages in the past 30 days?** ☐ 1. Yes ☐ 2. No **(skip to #46)**	41. **How many days have you drank too much and gotten drunk in the past month?** ☐ **Days**
42. **Where do you most often drink alcohol?** ☐ 1. At home ☐ 4. At a friend's house ☐ 2. At school ☐ 5. At sporting events ☐ 3.On the block ☐ 6. At other social events ☐☐☐ 7. Other……………………………	43. **From whom/where do you usually get alcohol?** ☐ 1. Friends ☐ 4. Other relative(s) ☐ 2. Parents ☐ 5. Street vendor ☐ 3.Brother/Sister ☐ 6. Shop ☐ 7. Other…………………………..

44. In the past 30 days, what type of alcoholic beverage did you consume, and with what frequency?
   INDICATE THE ANSWER FOR EACH DRUG WITH AN (X)

	1. Daily	2. Weekends	3. Some week days	4. Only in social events	5 Never
1 Beer, Smirnoff Ice, Renuite					
2 Wine, Ponche Kuba, Carib, Guinness					
3 Hard liquor (**rum, rum punch, whisky, (liquers)**)					
4 Shandy					

45. In the past 2 weeks, how many times have you used 5 alcoholic drinks or more in one sitting?
☐ 1. Never ☐ 2. Only once
☐ 3. Between 2 and 3 times ☐ 4. Between 4 and 5 times
☐ 5. More than 5 times

46. **In your opinion how easy would it be to obtain the following drugs?** **INDICATE THE ANSWER FOR EACH DRUG WITH AN (X)**	Easy	Difficult	Impossible to obtain	Don't know
1. Marijuana				
2. Cocaine				
3. Coca paste				
4. Ecstasy				
5. Crack				

47. **When was the last time that you were offered any of these drugs, either to buy or to use?** **INDICATE WITH (x) WHAT CORRESPONDS FOR EACH DRUG**		During the last 30 days	More than a month ago, but less than a year ago	More than a year ago	I have never been offered
	1. Marijuana				
	2. Cocaine				
	3. Coca paste				
	4. Ecstasy				
	5. Crack				

48. Have you ever been curious about trying an illegal drug?	49. If you had the opportunity, would you try an illegal drug?
☐ 1. No ☐ 2. Not sure ☐ 3. Yes	☐ 1. No ☐ 2. Not Sure ☐ 3. Yes

50. Have you ever used any of these substances? INDICATE THE ANSWER FOR EACH DRUG WITH AN (X)			51. How old were you when you first tried?
	NO	YES	
1. Tranquilizers without medical prescription			Years old
2. Stimulants without medical prescription			Years old
3. Inhalants (EG. GLUE ,DIESEL FUEL, other SOLVENTS)			Years old
4. Marijuana			Years old
5. Coca paste			Years old
6. Cocaine			Years old
7. Heroin			Years old
8. Opium			Years old
9. Morphine			Years old
10. Hallucinogens (LSD, mushrooms, marijuana,)			Years old
11. Hashish			Years old
12. Crack			Years old
13. Ecstasy			Years old
14. Other drugs:			Years old

52a. When was the <u>first time</u> you tried inhalants (EG. SOLVENTS) (petrol, lighter fluid, glue, deodorants, hairspray, spray paint)? ☐ 0. Never **(skip to #53a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More than 1 year ago	52b. Have you used inhalants in the <u>past 12 months?</u> ☐☐☐☐ 1. Yes ☐☐☐☐ 2. No **(skip to #53 a)**
52c. With what frequency have you used inhalants? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	52d. Have you used inhalants in the <u>past 30 days</u>? ☐☐☐☐ 1. Yes ☐☐☐☐ 2. No

53a. When was the **first time** you tried Marijuana? ☐ 0. Never **(skip to #54a)** ☐ 1. . In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More than 1 year ago	53b. Have you used marijuana in the **past 12 months?** ☐ ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No **(skip to #54a)**
53c. With what frequency have you used Marijuana? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	53d. Have you used marijuana in the **past 30 days?** ☐☐ ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No
53e. Where do you most often use marijuana? ☐ 1. At home ☐ 4. At a friend's house ☐ 2. At school ☐ 5. At sporting events ☐ 3.On the block ☐ 6. At other social events ☐ 7. Other………………………………………	53f. From whom/where do you usually get **marijuana?** ☐ 1. Friends ☐ 4. Other relative(s) ☐ 2. Parents ☐ 5. Street pusher ☐ 3. Brother/sister ☐ 6. Other _____

54a. When was the **first time** you tried cocaine? ☐ 0. Never **(skip to #55a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago	54b. Have you used cocaine in the **past 12 months?** ☐☐☐ ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No **(skip to #55a)**
54c. With what frequency have you used cocaine? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	54d. Have you used cocaine in the **past 30 days?** ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No
54e. Where do you most often use cocaine? ☐ 1. At home ☐ 4. At a friend's house ☐ 2. At school ☐ 5. At sporting events ☐ 3.On the block ☐ 6. At other social events ☐ 7. Other…………………………	54f. From whom/where do you usually get **cocaine?** ☐ 1. Friends ☐ 4. Other relative(s) ☐ 2. Parents ☐ 5. Street pusher ☐ 3. Brother/Sister ☐ 6. Other _____

55a When was the **first time** you tried ecstasy? ☐ 0. Never **(skip to #56a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago	55b. Have you used ecstasy in the **past 12 months?** ☐☐☐ 1. Yes ☐☐☐ 2. No **(skip to #56a)**
55c. With what frequency have you used ecstasy? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	55d. Have you used ecstasy in the **past 30 days?** ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No
56a When was the **first time** you tried crack? ☐ 0. Never **(skip to #57a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago	56b. Have you used crack in the **past 12 months?** ☐☐☐☐ 1. Yes ☐☐☐☐ 2. No **(skip to #57a)**
56c. With what frequency have you used crack? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	56d. Have you used crack in the **past 30 days?** ☐☐☐☐☐ 1. Yes ☐☐☐☐☐ 2. No

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57a. When was the <u>first time</u> you tried other drugs? ☐ 0. I have never tried other drugs **(skip to #58a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago	57b. Have you used other drugs in the <u>past 12 months?</u> ☐☐☐☐☐ 1. Yes ☐☐☐ 2. No **(skip to #58a)**
57c. With what frequency have you used other drugs? ☐ 1. Only once ☐ 2. Sometimes in the past 12 months ☐ 3. Sometimes during the month ☐ 4. Sometimes during the week ☐ 5. Daily	57d. Have you used other drugs in the <u>past 30 days</u>? ☐☐☐☐ 1. Yes ☐☐☐ 2. No

58a. When was the <u>first time</u> you used tranquilizers without medical prescription?
☐ 0. Never **(skip to #59a)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago

58b. Have you used tranquilizers without medical prescription in the <u>past 12 months?</u> ☐ 1. Yes ☐ 2. No **(skip to #59a)**	58c. Have you used tranquilizers without medical prescription in the <u>past 30 days</u>? ☐ 1. Yes ☐ 2. No **(skip to #59a)**
58d. In the <u>past 30 days</u>, how many days did you consume tranquilizers without medical prescription? **Days**	58e. How did you have access to the tranquilizers you used? ☐☐1. From the doctor ☐ 2. in the street ☐☐3. At home ☐ 4. From a friend ☐ 5. At the pharmacy ☐ 6. Other

59a. When was the <u>first time</u> you tried stimulants without medical prescription?
☐ 0. I have never used stimulants without medical prescription **(END)** ☐ 1. In the past 30 days ☐ 2. More than 1 month ago, but less than 1 year ago ☐ 3. More **than** 1 year ago

59b. Have you used stimulants without medical prescription in the <u>past 12 months?</u> ☐ 1. Yes ☐ 2. No	59c. Have you used stimulants without medical prescription in the <u>past 30 days</u>? ☐ 1. Yes ☐ 2. No
59d. In the <u>past 30 days</u>, how many days did you consume stimulants without medical prescription? **Days**	59e. How did you have access to the stimulants you used? ☐☐1. From the doctor ☐ 2. in the street ☐☐3. At home ☐ 4. From a friend ☐ 5. At the pharmacy ☐ 6. Other

THANK YOU VERY MUCH