



Australian Government

Department of Health and Ageing

*Australian secondary
students' use of
over-the-counter and
illicit substances
in 2002*

**Monograph Series
No. 56**

*National
Drug Strategy*

Australian secondary students' use of over-the-counter and illicit substances in 2002

Report

Report prepared for:

**Drug Strategy Branch
Australian Government Department
of Health and Ageing**

Report prepared by:

**Victoria White
Jane Hayman**

March 2004



Centre for Behavioural Research in Cancer
Cancer Control Research Institute
The Cancer Council Victoria

© Commonwealth of Australia 2004

ISSN: 1322 5049

ISBN: 0 642 82560 2

This work is copyright. Apart from any use as permitted under the *Copyright Act 1968*, no part may be reproduced by any process without prior written permission from the Australian Government available from the Department of Communications, Information Technology and the Arts. Requests and inquiries concerning reproduction and rights should be addressed to the Manager, Copyright Services, Info Access, GPO Box 1920, Canberra ACT 2601.

Publication approval number: 3547/JN8793

Suggested Citation:

White, V. & Hayman, J. (2004). *Australian secondary students' use of over-the-counter and illicit substances in 2002*. National Drug Strategy Monograph Series No. 56. Canberra. Australian Government Department of Health and Ageing.

The opinions expressed in this document are those of the authors and not necessarily those of the Australian Government.

WhiteFox Communications
For Australian Government Department of Health and Ageing

Acknowledgments

The Centre for Behavioural Research in Cancer at The Cancer Council Victoria gratefully acknowledges the cooperation and assistance of the following people and organisations in the running of this survey:

All of the students who participated in the survey:

- Staff of the participating schools
- State Departments of Education
- State Catholic Education Offices
- State Associations of Independent Schools

The following organisations helped fund and organise the smooth running of the survey in their individual states or territories:

- The Cancer Council ACT
- ACT Department of Health and Community Care
- The Cancer Council South Australia
- The Cancer Council Tasmania
- The Cancer Council Northern Territory
- Centre for Behavioural Research in Cancer, The Cancer Council Victoria
- Commonwealth Department of Health and Ageing
- Health Promotion Branch, NSW Health Department
- Drug and Alcohol Services Council, SA
- Drug Treatment Services, Department of Human Services, Victoria
- Health Department of Tasmania
- Health Department of Western Australia - Drug and Alcohol Office
- The Cancer Council New South Wales
- Queensland Education Department
- Queensland Cancer Fund
- Territory Health Services, Northern Territory

The following people co-ordinated the survey in their state or territory:

- Rod Ballard, Queensland Education Department
- Kerri Beckmann, The Cancer Council South Australia
- Jane Hayman, Centre for Behavioural Research in Cancer, The Cancer Council Victoria
- Sally Rubenach and Jan McKenzie, Population Health Research Centre, ACT
- Richard Hawkins, The Cancer Council NSW
- Margaret Thomas, Health Promotion Branch, NSW Health
- Barbara Gray, NT Department of Health and Community Services

Liz Ernst, Prevention Branch, Drug and Alcohol Office, Western Australia
Robyn Davies, The Cancer Council Tasmania
Jacinta Hanrahan, Quit WA

Jessica Nixon and Sophia Harrison, Centre for Behavioural Research in Cancer, The Cancer Council Victoria, coordinated data entry and cleaning.

Gabbi Davie, Clinical Epidemiology and Biostatistics Unit, Royal Children's Hospital, Victoria, advised on all aspects of sampling.

Contents

EXECUTIVE SUMMARY	1
Background.....	1
Analgesics.....	1
Tranquillisers.....	1
Cannabis.....	2
Inhalants.....	2
Hallucinogens.....	2
Amphetamines.....	3
Steroids.....	3
Opiates.....	3
Cocaine.....	5
Ecstasy.....	5
1. BACKGROUND	6
1.1 The 2002 Australian Secondary Students' Alcohol and Drug Survey.....	6
1.2 Aims of this report.....	7
2. METHOD	8
2.1 Sample selection.....	8
2.2 Procedure.....	8
2.3 Questionnaire.....	9
2.4 Coding and editing of data.....	9
2.5 Data analyses.....	10
2.6 Sample size.....	11
2.7 Definitions of substances.....	12
2.8 Definitions of frequency of drug use.....	12
3. RESULTS	13
3.1 Analgesics.....	13
3.1.1 Prevalence of analgesic use in 1999 and 2002.....	15
3.2 Tranquillisers.....	15
3.2.1 Prevalence of tranquilliser use in 1999 and 2002.....	17
3.3 Cannabis.....	17
3.3.1 Prevalence of cannabis use in 1999 and 2002.....	20
3.4 Inhalants.....	21
3.4.1 Prevalence of inhalant use in 1999 and 2002.....	23
3.5 Hallucinogens.....	24
3.5.1 Prevalence of hallucinogen use in 1999 and 2002.....	25
3.6 Amphetamines.....	26
3.6.1 Prevalence of amphetamine use in 1999 and 2002.....	27
3.7 Steroids.....	28

3.7.1 Comparison of steroid use in 1999 and 2000	29
3.8 Opiates.....	30
3.8.1 Comparison of opiate use in 1999 and 2002.....	31
3.9 Cocaine.....	32
3.9.1 Prevalence of cocaine use in 1999 and 2002.....	33
3.10 Ecstasy.....	34
3.10.1 Comparison of ecstasy use in 1999 and 2002.....	35
3.11 Use of any illicit substance.....	36
3.12 Use of any illicit substance excluding cannabis.....	36
3.13 Poly-substance use.....	37
3.14 Comparisons of the types of substances used by students in 2002.....	38
3.15 Lessons about substance use in the previous school year.....	41
4. CONCLUSION.....	43
5. REFERENCES.....	47
APPENDIX 1: QUESTIONNAIRE – VICTORIA.....	49
APPENDIX 2: SUBSTANCES USED BY SECONDARY STUDENTS IN 1999 AND 2002.....	71

Executive summary

Background

This report describes the results of the third national survey on the use of over-the-counter and illicit substances by Australian secondary school students.

The survey was conducted in 2002 and involved the collaboration of State and Territory Health Departments, cancer organisations and, in Queensland, the Education Department.

In each State and Territory, a representative sample of secondary schools (including government, Catholic and independent) was selected for surveying, and from each school up to 80 students were surveyed.

This report is based on data collected from 23,417 male and female students aged 12–17 years surveyed in 363 schools.

Analgesics

Analgesics were the most commonly used substance (licit or illicit) among secondary school students. By the age of 12 over 90% of students had used analgesics in their lifetime.

Over two-thirds of secondary school students had used analgesics in the four weeks prior to the survey, and this included 41% of students who had used analgesics in the week prior to the survey.

More females than males were regular users of analgesics: around 53% of females 15 years and over had used analgesics in the week prior to the survey, compared with around 36% of males.

The lifetime use of analgesics had decreased slightly between 1999 and 2002 among 12- to 15-year-olds but not among 16- and 17-year-olds. The decrease in lifetime use among 12- to 15-year-olds was reflected in a decrease in use in the past month between 1999 and 2002. However, there was no change in the proportion of 12- to 15-year-olds using analgesics in the week before the survey between 1999 and 2002.

Tranquillisers

Use of tranquillisers other than for medical reasons among students was low, with 84% of students never having used tranquillisers.

Between 4% and 5% of students aged 13 and above had used tranquillisers in the month prior to the survey, and around 2–3% had used them in the week before the survey.

There was no change in the proportion of 12- to 15-year-olds using tranquillisers other than for medical reasons in their lifetime, in the previous month or in the past week between 1999 and 2002. Among 16- and 17-year-olds there was a decrease in the proportion of students who had used tranquillisers in their lifetime but this did not translate into a decrease in the proportion that had used these substances more recently (past month or week).

Cannabis

Cannabis was the most commonly used illicit substance among secondary school students, with 25% of all secondary school students aged between 12 and 17 years reporting the use of cannabis at some time in their life.

Cannabis use increased with age from 9% of 12-year-olds who had ever used cannabis to 42% of 17-year-olds.

Eleven per cent of all students had used cannabis in the month prior to the survey and 7% had used it within the week before the survey. Weekly use increased with age from 2% of 12-year-olds to 10% of 17-year-olds. Weekly use of cannabis was more common among males than females.

Among those who had used cannabis in the past year, bonges were the most common mode of administration. Students who used cannabis in the past year most commonly used it with others at a friend's place.

The proportion of students using cannabis had decreased between 1999 and 2002. Among younger students the proportion using cannabis in their lifetime, the past month and past week had decreased between 1999 and 2002. Among older students only, the decrease in the proportion using cannabis in their lifetime between 1999 and 2002 was statistically significant.

Inhalants

Reported use of inhalants was more common among younger students than older students. While 21% of all students had ever used inhalants, ever use decreased from 26% of 12-year-olds to 12% of 17-year-olds.

Recent use of inhalants also decreased with age, so that while 9% of 12-year-olds had used inhalants in the week prior to the survey, only 2% of 17-year-olds had used these substances recently.

Four per cent of 12-year-olds had used inhalants 10 or more times in the past year and this decreased to 1% of 17-year-olds.

The proportion of 12- to 15-year-olds using inhalants in their lifetime and in the past month had decreased significantly between 1999 and 2002. Among 16- and 17-year-olds, while significantly fewer students had any experience of these substances in 2002 than in 1999, there was no change in the proportion of students in this age group using inhalants in the past month.

Hallucinogens

Four per cent of all secondary school students had had some experience with hallucinogens.

Ever use increased with age, rising from 2% of 12-year-olds to 6% of 17-year-olds.

Around 2% of students aged 16–17 years had used hallucinogens in the month prior to the survey. Around 1% had used hallucinogens in the week prior to the survey.

The majority of students who had used hallucinogens in the year before the survey had used them infrequently.

Lifetime use of hallucinogens decreased significantly between 1999 and 2002 among both older and younger students. The proportion of older students using hallucinogens in the month before the survey decreased between 1999 and 2002. This decrease was not seen among the 12- to 15-year-olds.

Amphetamines

The vast majority (93%) of secondary school students had never used amphetamines. By the age of 17, nearly 11% of students reported having had some experience with amphetamines.

Around 3% of students 14 years and over reported using amphetamines in the month before the survey.

Of the 5% of students who used amphetamines in the year before the survey, 40% indicated that they had used them only once or twice.

There was no change in the proportion of 12- to 15-year-olds or 16- to 17-year-olds using amphetamines in their lifetime or in the month before the survey between 1999 and 2002.

Steroids

Use of steroids without a doctor's prescription was very uncommon, with around 3% of all students having ever used these substances.

No more than 1% of students in any age group had used steroids without a doctor's prescription in the month before the survey.

There was no change in the proportion of 12- to 15-year-olds or 16- to 17-year-olds who had used steroids.

Opiates

A small proportion of students (3%) had ever used opiates such as heroin or morphine.

Only 1% of students reported having used opiates in the month prior to the survey.

There was a decrease in the proportion of 12- to 15-year-olds and 16- to 17-year-olds reporting to have ever used opiates between 1999 and 2002.

Cocaine

Use of cocaine was rare among students. Only 3% of all students reported having ever used cocaine.

Only 1% of students had used cocaine in the month prior to the survey.

There was no change in the proportion of students reporting to have used cocaine between 1999 and 2002.

Ecstasy

Only 5% of students had ever used ecstasy.

Recent use of ecstasy was not common among any age group. Over 2% of students aged 16–17 had used ecstasy in the month prior to the survey.

There had been no change in the proportion of 12- to 15-year-olds or 16- to 17-year-olds reporting to have used ecstasy in their life or in the past month between 1999 and 2002.

1. Background

In 1998 around 17,670 deaths and just under 200,000 (185,558) hospital episodes were attributable to the use of substances.¹ While the use of the licit substances alcohol and tobacco accounted for 93% of these deaths and hospital episodes, the use of illicit substances costs the Australian community \$6,075.8 million in 1998/99.¹ Preventing the use of both licit and illicit substances among adolescents has been identified as one way of reducing substance use among adults and thereby reducing the human and financial costs associated with substance use. Young people are therefore one of the major target groups for policies and programs aimed at reducing the use of substances such as alcohol, cannabis and other drugs.

The National Drug Strategy (NDS) grew out of the National Campaign Against Drug Abuse and was launched in 1997. The NDS was created to address the impact of licit and illicit substances use on the Australian community, and aimed to reduce the supply of and demand for drugs. One of the aims of the NDS was to prevent and reduce the use of illicit substances by young people. As part of the NDS, the Commonwealth Government provided \$27 million to the 'National Schools Drug Education Strategy' between 1999 and 2002. This strategy focused on providing improved preventive drug education programs in schools across Australia and had the goal 'no illicit drugs in school'. In addition to this, the NDS ran a community education and information campaign that commenced in March 2001. This campaign aimed to inform parents of the role they play in preventing their children from using illicit substances. In addition, the campaign aimed to inform parents and their children of the harms associated with the use of illicit drugs. The campaign consisted of mass media advertisements, a booklet delivered to each home, a website and an 1800 information line.

Having accurate information on the prevalence of the use of various substances is essential in planning, implementing and evaluating interventions and campaigns. In 1996, the first national survey on the use of illicit substances by adolescents was conducted on a representative sample of over 30,000 secondary school students.² This 1996 survey showed that while the majority of students aged between 12 and 17 years had not used any illicit substance, 39% had, with cannabis being the most common substance used.

Results from the 2001 National Drug Strategy Household Survey³ suggest that, between 1998 and 2001, there had been a decrease in the prevalence of cannabis use among 14- to 19-year-olds, and no change in the prevalence of amphetamine use. The survey also reported a non-significant increase in the proportion of 14- to 19-year-olds using ecstasy. Due to the relatively small number of 14- to 19-year-olds in this survey, these trends need to be confirmed in other larger studies.

1.1 The 2002 Australian Secondary Students' Alcohol and Drug Survey

In 2002, the third in a series of secondary school based surveys monitoring the use of illicit substances among adolescents was conducted throughout Australia.^{2,4} The current survey in this series was developed from a triennial national survey of

secondary school students' use of tobacco and alcohol conducted collaboratively by the cancer councils in each State of Australia, commencing in 1984.⁵⁻⁹ In 1996, the survey was expanded to include questions on the use of illicit substances and federal, state and territory health departments became collaborators with the cancer councils in the project. The substances asked about in the questionnaire were: analgesics, tranquillisers, steroids, cannabis, inhalants, amphetamines, hallucinogens, ecstasy, heroin and cocaine.

1.2 Aims of this report

In this report, we focus on describing the prevalence of the use of over-the-counter and illicit substances among secondary school students in 2002. For each substance in the survey we present data relating to past and current involvement for male and female students in each age group between 12 and 17 years. We then examine regularity of use (used a substance 10 or more times in the past year). We then examine changes in students' involvement with the substance between 1999 and 2002 and focus on the key indicators of use: i) lifetime use, ii) use in the past month and iii) use in the past week for analgesics, tranquillisers and cannabis; and i) lifetime use and ii) use in the past month for all other substances. These analyses are conducted for 12- to 15-year-olds, 16- to 17-year-olds, and 12- to 17-year-olds. The next section of the report examines poly-drug use among students and we report the proportion of students using substances concurrently with each of cannabis, amphetamines, ecstasy and hallucinogens in the past year. The final section of the report examines the use of the different substances relative to each other, including tobacco and alcohol.

2. Method

The procedures for selecting schools and students to be surveyed and for surveying students were the same as those in previous surveys in this series ^{2,4}. A brief description of the study method is given below.

2.1 Sample selection

The target population was all students in Years 7 to 12 across Australia. Population estimates were based on the most up-to-date figures available from state and federal education departments at the time. Schools with fewer than 100 students enrolled were not included in the study.

Within each State and Territory, schools were sampled using a random sampling methodology designed to represent students from the three main education sectors: government, Catholic and independent. The basic design of the sampling procedure was 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. The schools were stratified by the three education sectors (government, Catholic and independent) and randomly selected from each sector. The sampling procedure of schools ensured that the distribution of schools in the three education sectors in each State or Territory was reflected in the sample. Two samples of schools were drawn to reflect the distinction between junior secondary (up to Year 10) and senior secondary (Years 11 and 12) campuses.

The study aimed to survey students from 379 schools across the country. To achieve this, 558 secondary schools were approached to take part in the study. Three hundred and sixty-three schools participated in the study, giving an overall response rate of 65%.

As in 1999, administrative complications in New South Wales meant fewer Year 12 students from this state were surveyed than was desired and 30% of schools from NSW were surveyed early in the 2003 school year (February and March). Consequently, NSW students in the 2002 study were slightly younger than NSW students participating in surveys prior to 1999 survey. This procedural variation means that prevalence estimates obtained from students surveyed in 2003 tended to be lower than those obtained from students surveyed in 2002; significant differences were found only among 12- to 15-year-olds. To adjust for the over-sampling of younger students in NSW, data from NSW were weighted to bring the 2002 achieved sample into line with the age distribution of NSW students participating in the 1996 survey. The data presented here were based on these weighted data.

2.2 Procedure

Principals of selected schools were contacted and permission to conduct the survey at the school obtained. If a school refused they were replaced by the school nearest to them within the same education sector. The aim was to survey 80 students from each participating school. To this end, a member of the research team randomly selected 20 students (and six replacements) from each of the four year-levels in each junior school participating; while for senior schools, 40 students (and six replacements) were sampled from each of Years 11 and 12. The school roll for the year level to be surveyed at the school provided the sampling frame.

Following the protocol used in past surveys, members of the research team administered the pencil-and-paper questionnaire to groups of up to 20 students on the school premises. If a student from the sample list was not present at the time of the survey, a student from the equivalent year level on the replacement list was surveyed. Students from different year levels were surveyed together. Students answered the questionnaire anonymously. The presence of teachers during the survey was discouraged but, because of individual school policy, 42% of students completed the questionnaire in the presence of teachers.

2.3 Questionnaire

In 2002, a 24-page core questionnaire was completed by the students (see Appendix 1). The core questionnaire covered the use of tobacco, alcohol, pain relievers, sleeping tablets and illicit substances such as cannabis and hallucinogens, sun protection, diet and physical activity. As the focus of this report is the use of illicit substances, we discuss only these questions.

The substances included in the questionnaire represented a wide range of licit and illicit substances, including analgesics, tranquillisers, cannabis, amphetamines, inhalants and steroids. For each substance, the technical name was used in the question and was accompanied by explanations, examples and alternative terminology to clarify what substance was included in that category. As mentioned earlier, the substances were analgesics, sedatives, cannabis, steroids, inhalants, amphetamines, ecstasy, cocaine or crack, opiates and hallucinogens.

For each substance, students were asked to indicate the number of times, if ever, they had used or taken the substance in four time periods: the past week, the past four weeks, the past year, and their lifetime. Students could choose from seven response categories ranging from 'None' to '40 or more times'. The questions concerning the use of sedatives, steroids, amphetamines and opiates explicitly asked about the non-medical use of these substances.

Students who had used cannabis, amphetamines, ecstasy and hallucinogens in the past year were asked if they had used any other substance(s) on the same occasion as using these substances. Students indicated the substances they had used from a list that included alcohol, tobacco, analgesics, cannabis, amphetamines and hallucinogens. Students who had not used any other substances could indicate this response from the list.

Students who had used cannabis in the 12 months preceding the survey were asked to indicate if they usually used it by themselves, with others, or about equally by themselves or with others. They were also asked to indicate where they usually used cannabis and how it was usually used (eg, joint, bong, as food or other).

2.4 Coding and editing of data

Questionnaires from all States except NSW were coded and entered by the Centre for Behavioural Research in Cancer at The Cancer Council Victoria. The market research firm contracted to conduct the survey in NSW processed the data for that State and sent the data file to Victoria for final cleaning and compilation with the national data. After data entry, the data were cleaned and prepared for data

analysis. Students with a large amount of missing data or whose responses were wildly exaggerated were removed from the data set before analyses started.

During analysis, respondents were not included in the analysis for particular questions if they gave contradictory or multiple responses, or did not answer the question. However, these respondents were included in the analysis of other questions if these had been validly completed.

Following procedures established for the 1996 and 1999 data, data cleaning included examining for two types of inconsistent responses. First, inconsistencies in responses regarding use or non-use of a substance across time periods (lifetime, year, month and week) were examined. This cleaning procedure ensured maximum use of the data and operated on the principle that the subject's response about personal use in the most recent time period was accurate. If responses for other time periods were missing or inconsistent with the most recent response, responses for the subsequent time periods were coded '77' to indicate 'used in that time period but unsure how often'. For example, if subjects indicated they had used a substance in the past week, in the past month and in their lifetime but they had not used it in the past year or if the response to this question was missing, the response for the past year was recoded to '77'. This indicated that the subject had used the substance (using something in the past week and month necessitates that it was used in the past year) but how often the substance had been used was unknown. The impact of this set of changes on the data set was minimal, with around 2–3% of data changed to '77' for any substance type in any time period (lifetime, year, month and week). Data coded as '77' were included in analyses reporting prevalence of use within a time period. However, when frequency of use is reported, students giving a '77' response were excluded from the analyses.

The second set of cleaning focused on the frequency of substance use and involved examining inconsistencies in frequency of use across time periods. For example, if the responses for a student indicated cannabis had been used three to five times in the preceding week but only once or twice in the past month, the frequency of use across time periods would be inconsistent (as the number of times the substance was used in the past week should be included in the frequency of use in the past month). While we could not be certain exactly how often cannabis was used in the month before the survey we know that it was used at least three to five times (ie, the frequency of use in the past week). Therefore it was decided to recode all inconsistent responses to indicate the amount we were certain the student had used. This procedure gives a conservative estimate of the number of times a student had used a substance within the various time periods. The impact of this recode on the frequency of responses for the 10 substances was minimal.

2.5 Data analyses

These analyses cover school students aged 12–17 years. To ensure that disproportionate sampling of any State, school type, age level and gender grouping did not bias the prevalence estimates, data were weighted to bring the achieved sample into line with the population distribution. The prevalence estimates reported in this report were based on these weighted data. Information about the enrolment details of male and female students in each age group at government Catholic and independent schools was obtained from the Australian Bureau of Statistics.¹⁰ Using 95% confidence intervals, the prevalence estimates reported here are within 2.6% or better of the true population values.

Logistic regression analyses were used to examine whether the proportion of students engaging in lifetime or monthly use of each substance in 2002 differed significantly from that found in the 1999 survey. For these analyses students were grouped into age groups: 12- to 15-year-olds, 16- to 17-year-olds and 12- to 17-year-olds; and the proportions of all students, and male and female students, in each age group using each substance in 1999 and 2002 were compared. In these analyses, the outcome variable was binary coded, with 1 indicating that the behaviour was engaged in and 0 indicating the behaviour did not occur. Age (within each of the groups), school type (government, Catholic and independent), state and, where appropriate, gender were entered into the analyses first. The two-level categorical variable year was then entered, enabling a χ^2 value associated with the main effect of year to be estimated

Because this study used a two-stage sampling procedure, the sample was less efficient than a simple random sample of the same size. As students within the sample were clustered by school, standard errors for prevalence estimates may have been underestimated. Procedures within the statistical package STATA accommodate complex sample designs within analytic procedures by adjusting for the clustering of observations. STATA was used for analyses comparing prevalence estimates across survey years and standard errors robust to potential non-independence within subjects obtained.

Seventeen per cent of students were absent from school on the school day preceding the survey. Students who reported being away from school the day before the survey were more likely to have used cannabis in the previous week, month, year and in their lifetime. They were also more likely to have used hallucinogens for all time periods. This difference suggests that this report is likely to underestimate the true prevalence of substance use among secondary school students, and would have been higher if those absent on the day of the survey had been included.

Given the large sample size, and in accordance with previous practice, only those results associated with a *p* value of <0.01 were taken to be statistically significant.

2.6 Sample size

A total of 24,403 students in Year levels 7 to 12 were surveyed from schools in Australia during the school year. Table 1 presents the number of students in each gender and age group between 12 and 17 years answering questions on the use of illicit substances. A total of 23,417 male and female students aged between 12 and 17 years across the country answered the questionnaire. Data from 986 students outside this age range were excluded from the analysis as the numbers in each age and gender group were too small to ensure reliable estimates.

Table 1: Number of students surveyed in 2002 in Australia by age and gender

Gender	Age						
	12	13	14	15	16	17	12–17
Male	1401	2317	2390	2375	1819	1344	11646
Female	1471	2287	2248	2197	1995	1573	11771
Total	2872	4604	4638	4572	3814	2917	23417

2.7 Definitions of substances

The drug categories used in this report were identical to the categories used in the questionnaire and follow the descriptions and examples provided to students, as follows:

Amphetamines:	Amphetamines or speed, uppers, MDA, Ritalin, 'Dex', Dexamphetamine, ox blood other than for medical reasons.
Cocaine:	Cocaine or crack.
Ecstasy:	Ecstasy or XTC, E, MDMA, Ecce, X.
Hallucinogens:	LSD, 'acid', 'trips', Magic Mushrooms, Datura, Angel's Trumpet.
Inhalants:	Deliberately sniffed (inhaled) from spray cans or sniffed things like glue, paint, petrol or thinners in order to get high or for the way it makes you feel.
Cannabis:	Marijuana, grass, hash, cannabis, dope, weed, mull, pot or a joint.
Opiates:	Heroin, smack, horse, skag, or other opiates (narcotics) such as methadone, morphine or pethidine other than for medical reasons.
Analgesics:	Painkillers/analgesics such as 'Disprin', Panadol' or 'Aspro'.
Tranquillisers:	Sleeping tablets, tranquillisers or sedatives such as 'Rohies', 'Rohypnol', 'Barbs', 'Valium' or 'Serepax', for non-medical reasons.
Steroids:	Steroids, muscle or roids without a doctor's prescription to make you better at sport, to increase muscle size or to improve your general appearance.

2.8 Definitions of frequency of drug use

Students were asked how many times they had used a particular drug within specified time periods. For each substance we report the prevalence of use within the time periods asked about (past week, past month, past year and lifetime) for all students and males and females in each age group between 12 and 17 years.

The categories of use reported are:

Never:	Those who had never used the substance.
Ever:	Those who indicated any use of the substance, either in their lifetime, the past month, or past week (ever use).
Year:	Those who had used the substance within the past year.
Month:	Those who had used the substance within the four weeks prior to completing the survey.
Week:	Those who had used the substance within the seven days prior to completing the survey.

These categories are not mutually exclusive but rather overlap so that a student who reported having used a substance in the past week was included in the estimates of use in all other time periods, that is, in estimates for lifetime use, use in the past year and use in the past month.

Regularity of use: While the prevalence estimates described above give an indication of how widespread the use of a substance was in 2002, they tell little about the regularity of such use. That is, we cannot infer from the prevalence estimates the proportion of students who were monthly or regular users. For instance, a student may have used hallucinogens for the first time in the month before the survey and therefore was included in the estimates of use in the past month. However, the student may not use the substance again or may not use it for another 12 months so it would be incorrect to describe this student as a regular or monthly user. To gain an idea of the frequency of substance use, the number of times students reported using each substance in the year prior to the survey was examined. This measure gives an indication of involvement with the substance over a period of time. Students with a code indicating that they had used a substance but we were uncertain of the frequency of use within a time period (coded 77) were excluded from these analyses.

Regular use: Students who used a substance 10 or more times within the past year were defined as regular users.

3. Results

3.1 Analgesics

Table 2 illustrates the use of analgesics in all time periods by age and gender.

The reported use and experience of substances such as aspirin among secondary school students was extremely high. Among the entire sample, only 5% of students had never used these medications. The proportions of students who had ever used pain relievers increased significantly with age from a very high 92% of 12-year-olds to 96% of those aged 15 and over. Over two-thirds of all students had used analgesics in the past month. The proportion of students using analgesics in the week before the survey increased from 34% of 12-year-olds to a peak of 45% of 15-year-olds. The increase in the proportion of students using analgesics in the past week was more marked among females than males. While use in the past week among males was fairly stable at around 35%, among females analgesic use increased from 33% of 12-year-olds to 54% of 16-year-olds and 52% of 17-year-olds.

Table 2: Analgesics: Percentage of students according to recency of analgesics use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	7.6	92.4	89.1	64.6	34.1
	Male (%)	7.6	92.4	88.2	63.3	35.1
	Female (%)	7.5	92.5	90.0	65.9	33.1
13	Total (%)	6.1	93.9	90.2	66.3	36.8
	Male (%)	6.7	93.3	88.5	62.7	35.3
	Female (%)	5.5	94.5	91.7	69.7	38.2
14	Total (%)	5.1	94.9	92.0	70.1	41.2
	Male (%)	7.0	93.0	89.1	61.9	35.3
	Female (%)	3.3	96.7	94.9	78.0	46.8
15	Total (%)	3.8	96.2	93.7	73.3	44.9
	Male (%)	5.4	94.6	90.9	64.5	36.5
	Female (%)	2.3	97.7	96.5	81.7	53.0
16	Total (%)	2.9	97.1	94.3	72.4	43.6
	Male (%)	3.9	96.1	92.6	63.3	32.8
	Female (%)	1.9	98.1	95.8	81.2	53.9
17	Total (%)	3.4	96.6	93.6	72.8	43.9
	Male (%)	4.9	95.1	90.1	62.5	35.0
	Female (%)	2.0	98.0	97.0	82.7	52.4
12–17	Total (%)	4.9	95.1	92.0	69.7	40.6
	Male (%)	6.0	94.0	89.8	63.0	35.1
	Female (%)	3.8	96.2	94.2	76.2	45.8

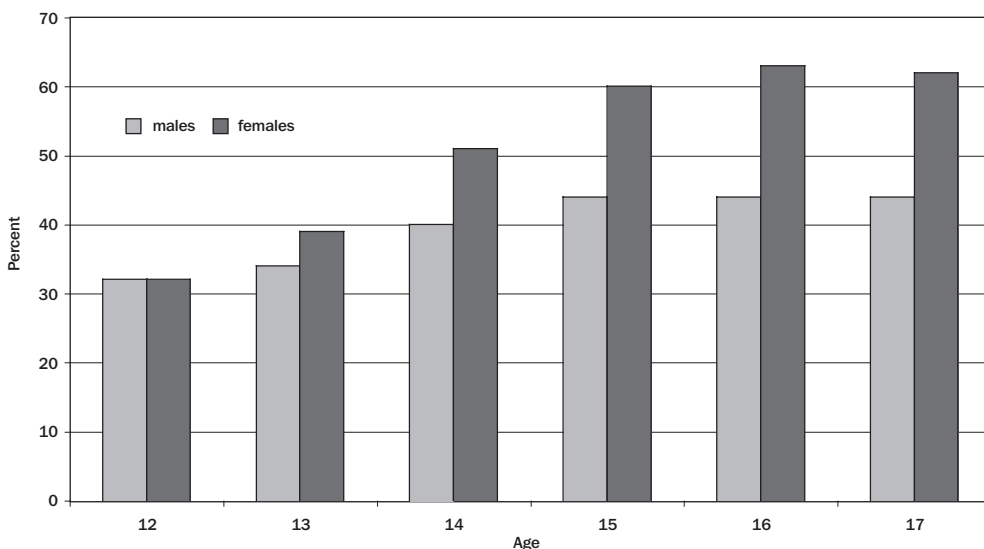
A greater proportion of female students had ever used analgesics when compared with males and this difference was significant for ages 14 and above.

From the age of 13, females were significantly more likely to have used analgesics in the past year and month. The difference in the proportion of males and females using analgesics in the week prior to the survey was greater among the older students, and was significant from the age of 14.

Regularity of use: Of the students who had used analgesics in the past year, 54% of females and 44% of males had used analgesics 10 or more times in the previous year. Only 16% of males and 11% of females had used analgesics once or twice in this time period and this was inversely related to age, decreasing from 18% among males and females aged 12 to 13% of males aged 15 and 7% of females aged 15–16.

Among male students who had used analgesics in the past week, 73% of males had used them only once or twice, while 18% had used them 3–5 times in the previous week. Among females who had used analgesics in the past week, 69% had used them once or twice and 21% had used them 3–5 times.

Figure 1: Proportion of male and female students in each age group using analgesics 10 or more times in the past year (%)



Regular use: Figure 1 shows for males and females the proportion of students who had used analgesics 10 or more time in the past year. While the proportion of students using analgesics regularly increases for both males and females, the increase for females is greater than that for males. While, among 12-year-olds, roughly the same proportion of males and females used analgesics regularly, by the age of 14 more females than males were regular users of analgesics. The increase in females’ use of analgesics coincides with the onset of menstruation and possibly reflects females’ use of analgesics to manage menstrual pain.

The results indicate that the use of analgesics was extremely common among secondary school students. Use in the past week increases with age, so that use in this time period was higher among older students. While ever use of analgesics was similar

among males and females, use in the past week was more likely among female than male students.

3.1.1 Prevalence of analgesic use in 1999 and 2002

Table 3 presents the proportion of 12- to 15-year-olds, 16- to 17-year-olds, and 12- to 17-year-olds who had used analgesics in their lifetime, in the past month and in the past week in 1999 and 2002. There was a small reduction in the proportion of younger students who had ever used analgesics but no change among older students. The reduction among younger students was also seen when comparing use in the past month. There was no statistically significant change in the proportion of younger students using analgesics in the week prior to the survey between 1999 and 2002. Among older students, there was no significant decrease in the proportion using analgesics in the month or week prior to the survey. The results suggest there has been a small reduction in the lifetime prevalence of analgesic use among younger secondary school students between 1999 and 2002.

The significant decrease in the prevalence of lifetime and monthly analgesic use between 1999 and 2002 among 12- to 17-year-olds was largely due to the decreases seen for the younger students.

Table 3: Percentage of students using analgesics in their lifetime, in the past month or in the past week in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			16–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	96	94	<.01	97	97	ns	97	95	<.01
	Male	95	93	<.01	96	96	ns	96	94	<.01
	Female	97	95	<.01	98	98	ns	98	96	<.01
Month	Total	71	69	<.01	75	72	ns	72	70	<.01
	Male	66	63	<.01	66	63	ns	66	63	<.01
	Female	77	74	ns	83	82	ns	78	76	.01
Week	Total	41	39	ns	44	44	ns	42	41	ns
	Male	37	35	ns	37	34	ns	37	35	<.01
	Female	46	43	ns	50	53	ns	47	46	ns

ns = not significant $p > .01$.

3.2 Tranquillisers

Table 4 illustrates the use of tranquillisers other than for medical reasons in all time periods by age and gender.

Sixteen per cent of students had used tranquillisers other than for medical reasons at some point in their life. The proportions of students ever using tranquillisers differed slightly across age groups, increasing from 13% of 12-year-olds to 19% of 17-year-olds. Use in the past month was low and was highest among 16- to 17-year-old students at

5%. For all age groups, between 2% and 3% of secondary school students had used tranquillisers in the week before the survey.

Table 4: Tranquillisers: Percentage of students according to recency of use of tranquillisers other than for medical reasons by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	86.6	13.4	6.4	3.0	1.8
	Male (%)	82.8	17.2	7.5	3.7	2.1
	Female (%)	90.3	9.7	5.3	2.4	1.4
13	Total (%)	85.3	14.7	7.9	3.5	2.0
	Male (%)	85.4	14.6	8.4	4.0	2.3
	Female (%)	85.3	14.7	7.5	3.0	1.8
14	Total (%)	84.3	15.7	9.1	4.1	2.4
	Male (%)	84.9	15.1	8.7	4.1	2.6
	Female (%)	83.7	16.3	9.5	4.2	2.2
15	Total (%)	81.8	18.2	10.7	4.3	2.7
	Male (%)	83.1	16.9	9.0	3.6	2.4
	Female (%)	80.6	19.4	12.4	4.9	2.9
16	Total (%)	82.8	17.2	10.9	4.5	2.5
	Male (%)	84.6	15.4	8.6	3.5	2.3
	Female (%)	81.0	19.0	13.1	5.4	2.8
17	Total (%)	81.0	19.0	12.3	5.4	3.0
	Male (%)	80.2	19.8	11.4	5.3	3.9
	Female (%)	81.7	18.3	13.2	5.5	2.2
12–17	Total (%)	83.8	16.2	9.4	4.1	2.4
	Male (%)	83.7	16.3	8.8	3.9	2.5
	Female (%)	83.9	16.1	10.0	4.1	2.2

Nine per cent of secondary school students had used tranquillisers in the past year. The proportion of students using tranquillisers in the past year increased with age: it ranged from 6% of 12-year-old students to a peak prevalence of 12% among those aged 17.

While the use of tranquillisers was slightly higher among female students than male students, these differences were only significant for ever use among 12-, 13- and 16-year-olds, and use in the past year among 12-year-old and 16-year-old students. In general, there was no consistent pattern in the differences between male and female use across the six age groups.

Regularity of use: Of those students who had used tranquillisers in the previous year, around 50% of males and females had used them only once or twice, while around 20% of males and 21% of females had used them 3–5 times. There was little variation across age groups in these proportions. The proportion of all students using tranquillisers 10 or more times in the previous year was, at 2%, negligible.

3.2.1 Prevalence of tranquilliser use in 1999 and 2002

As can be seen from Table 5, there was no change in the prevalence of tranquilliser use among junior secondary school students between 1999 and 2002. Among senior students, there had been a small but statistically significant decrease in the lifetime use of sedatives. The data suggest that older students in 2002 were less likely to have ever used sedatives compared with senior students in 1999. This decrease was significant among both male and female students. However, this decrease in lifetime use did not translate into a decrease in the proportion of students using tranquillisers more recently (monthly or weekly use). There was no change in the proportion of students using tranquillisers in the week or month prior to the survey between 1999 and 2002.

The decrease in the prevalence of lifetime use of tranquillisers among 12- to 17-year-olds was largely driven by the decrease found among older students.

These results show that the level of tranquilliser use among secondary school students was generally low, and that older students were more likely to have ever used tranquillisers than younger students. While there was a decrease in the prevalence of lifetime use of tranquillisers among older students between 1999 and 2002, this difference did not translate into a reduction in the prevalence of tranquilliser use in the month or week prior to the survey.

Table 5: Percentage of students using tranquillisers in their lifetime, in the past month or in the past week in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	17	16	ns	22	18	<.01	18	16	<.01
	Male	18	16	ns	21	17	<.01	19	16	<.01
	Female	16	15	ns	24	19	<.01	18	16	ns
Month	Total	4	4	ns	5	5	ns	4	4	ns
	Male	4	4	ns	5	4	ns	4	4	ns
	Female	4	4	ns	5	5	ns	4	4	ns
Week	Total	2	2	ns	3	3	ns	2	2	ns
	Male	2	2	ns	3	3	ns	3	3	ns
	Female	2	2	ns	2	3	ns	2	2	ns

ns = not significant $p > .01$.

3.3 Cannabis

Table 6 gives the proportion of students using cannabis in all time periods by age and gender.

Cannabis was the most commonly used illicit substance among secondary school students, especially among those in the older age groups. One out of every four secondary school students surveyed (25%) had used cannabis at some time in their lives. In all time periods, the proportion of students using cannabis increased with

age; for example, levels of ever use increased significantly from 9% of students aged 12 years to 42% of 17-year-olds.

As time periods became more recent, fewer students reported having used cannabis. Use in the past year increased significantly across age groups, from 7% of students aged 12 to 34% of 17-year-old secondary school students, while use in the past month increased from 4% of 12-year-olds to 17% of students aged 16 and 17.

About 60% of students who reported using cannabis in the past month reported using cannabis in the past week. Use in the past week increased with age from 2% of the youngest students to peak at 10% among students aged 16–17.

Table 6: Cannabis: Percentage of students according to recency of cannabis use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	91.1	8.9	6.8	4.0	2.4
	Male (%)	88.6	11.4	8.5	5.1	3.3
	Female (%)	93.5	6.5	5.0	2.9	1.5
13	Total (%)	87.5	12.5	10.3	5.4	3.2
	Male (%)	85.4	14.6	12.0	6.6	4.1
	Female (%)	89.5	10.5	8.8	4.3	2.3
14	Total (%)	76.6	23.4	19.6	11.4	6.6
	Male (%)	73.9	26.1	22.3	13.0	8.0
	Female (%)	79.2	20.8	16.9	9.7	5.3
15	Total (%)	68.0	32.0	27.0	15.1	8.9
	Male (%)	66.2	33.8	28.4	16.5	10.7
	Female (%)	69.6	30.4	25.7	13.7	7.3
16	Total (%)	62.7	37.3	31.6	17.1	9.8
	Male (%)	60.8	39.2	32.4	18.2	10.7
	Female (%)	64.5	35.5	30.8	16.1	8.9
17	Total (%)	58.2	41.8	33.8	17.8	9.7
	Male (%)	53.7	46.3	39.1	22.7	12.7
	Female (%)	62.5	37.5	28.6	13.1	6.8
12–17	Total (%)	75.0	25.0	20.7	11.4	6.6
	Male (%)	72.5	27.5	22.8	13.2	8.0
	Female (%)	77.4	22.6	18.6	9.7	5.2

In all time periods, more males than females had used cannabis and this difference was significant for all age groups except 16-year-olds; and for ever use, use in the past year and past month except among 15-year-olds. The proportions of males having ever used cannabis increased from 11% of 12-year-olds to 46% of 17-year-olds; while among females, use increased from 7% at age 12 to 38% at age 17.

Type of cannabis used and where used: Students who had used cannabis in the past year were asked to indicate whether they usually smoked it as a joint, used a bong or ate it. Bongs were the most common means of using cannabis, with 65% of males

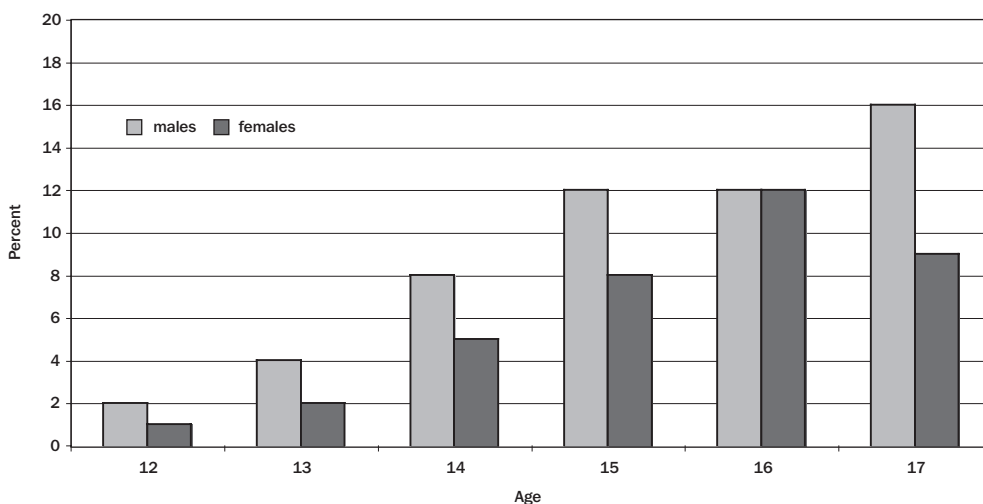
and 59% of females who had used cannabis in the past year indicating that this was how they usually consumed it. Joints were smoked by 38% of females and 31% of males. Most commonly, adolescents used cannabis with others. Eighty-one per cent of males and 85% of females who had used cannabis in the past year used it with others. While 4% of males and 2% of females indicated that they usually used cannabis by themselves, 15% of males and 12% of females indicated that they used it by themselves or with others about equally often. Cannabis was most commonly used at a friend's place (31% of males and 37% of females), a party (27% of males and 28% of females), and the student's own home (13% of males and 12% of females). Around 8% of students who had used cannabis in the year preceding the survey used it at a park.

Regularity of use: Among students who reported using cannabis in the previous year, 31% of males and 37% of females had used it only once or twice. The proportion using cannabis once or twice was inversely related to age: decreasing from 40% of males aged 12 to 24% of 17-year-old males; and among females decreasing from 54% of 12-year-olds to 29% of 16-year-olds. Thirty-eight per cent of males and 31% of females who had used cannabis in the previous year had used it on 10 or more occasions.

Figure 2 shows the proportion of all students who were regular users.

Among male students who had used cannabis in the previous week, 46% had used it once or twice in that week, around 17% said they had used it 3–5 times that week and around 11% said they had used it 6–9 times in the previous week. Among females who had used cannabis in the preceding week, 56% had used it once or twice, 24% had used it 3–5 times and 9% had used it 6–9 times in the past week.

Figure 2: Proportion of all male and female students in each age group who had used cannabis at least 10 times in the previous year (%)

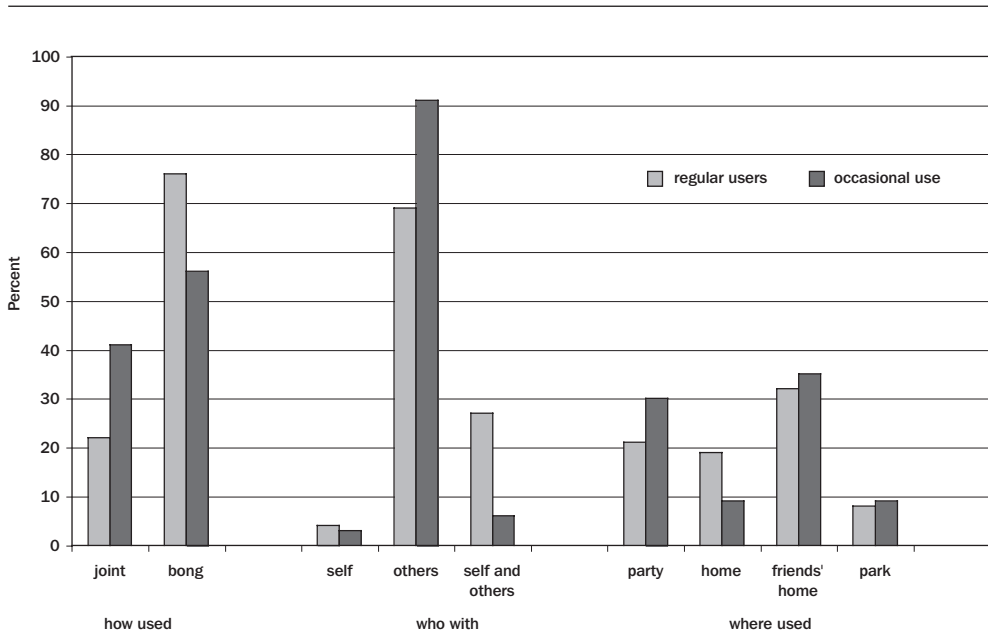


Regular use: Figure 2 shows the proportion of all male and female students in each age group indicating they had used cannabis at least 10 times in the year before the survey. Regular use increased with age from 2% of males and 1% of females aged 12 to reach a peak frequency of 16% among 17-year-old males and 12% among 16-year-old

females. In general, males were more likely to be regular users of cannabis than were females and this difference was significant for all age groups except 16-year-olds.

As Figure 3 shows, there were some differences in the method of cannabis use, with whom cannabis was used, and where cannabis was used, among students who used cannabis regularly compared with occasional use in the past year. Occasional users were more likely to smoke cannabis as a joint ($p < .01$), while regular users were more likely to use a bong ($p < .01$). In addition, although the majority of both regular and occasional users used cannabis with others, more regular users (27%) than occasional users (6%) indicated that they used cannabis about equally often by themselves and with others ($p < .01$). Occasional users were more likely than regular users to use cannabis at a party ($p < .01$), while regular users (19%) were more likely than occasional users (9%) to use cannabis in their own home ($p < .01$). There was no difference in the proportion of regular and occasional users using cannabis at their friend's house or in a park.

Figure 3: How cannabis is used, who cannabis is used with and where cannabis is used, among students who have used cannabis regularly or occasionally in the past year (%)



3.3.1 Prevalence of cannabis use in 1999 and 2002

The proportions of students using cannabis in their lifetime, in the past month or in the past week in 1999 and 2002 are shown in Table 7. Looking at the results for all 12- to 15-year-olds, significantly fewer junior students had used cannabis in each of the time periods in 2002 than in 1999. This decrease was seen for both males and females in all time periods. The proportion of 12- to 15-year-olds who had used cannabis in the past month had decreased from 11% in 1999 to 9% in 2002. Among older students, while there were significantly fewer students who had ever used cannabis in 2002 than in 1999, there was no statistically significant change in the proportion of all students

who had used cannabis in the month or week before the survey. However, the proportion of male students aged 16 to 17 years who had used cannabis in the week before the survey decreased significantly from 15% in 1999 to 12% in 2002.

Examining changes in the use of cannabis for all 12- to 17-year-olds surveyed between 1999 and 2002 showed that lifetime, monthly and weekly use of cannabis was lower in 2002 than in 1999. Only the prevalence of weekly use among females aged between 12 and 17 years had not changed significantly between 1999 and 2002.

These results suggest that, in 2002, cannabis use was widespread among secondary school students, particularly males. Experience with the drug increased with age. While the proportion of younger students who were involved with cannabis decreased between 1999 and 2002, among older students there was little significant difference in the proportions using cannabis in 1999 and 2002. While fewer older students had ever used cannabis in 2002 than in 1999, suggesting experimentation with this substance had decreased, there was no change in the proportion of students using this substance in the month before the survey.

Table 7: Percentage of students using cannabis in their lifetime, in the past month or in the past week in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	23	19	<.01	46	39	<.01	29	25	<.01
	Male	26	22	<.01	50	42	<.01	32	27	<.01
	Female	20	17	<.01	43	36	<.01	27	23	<.01
Month	Total	11	9	<.01	20	17	ns	14	11	<.01
	Male	13	11	<.01	23	20	ns	15	13	<.01
	Female	10	8	<.01	17	15	ns	12	10	<.01
Week	Total	7	5	<.01	12	10	ns	8	7	<.01
	Male	8	7	<.01	15	12	<.01	10	8	<.01
	Female	5	4	<.01	9	8	ns	6	5	ns

ns = not significant $p > .01$.

3.4 Inhalants

Table 8 illustrates the use of inhalants in all time periods by age and gender.

About one-fifth (21%) of all students had deliberately sniffed inhalants at least once during their lives. While 15% had used inhalants at some time in the past year, 9% of students had done so within the past month. Use in the week preceding the survey was reported by 6% of all students.

Inhalant use was related to age; however, unlike the pattern seen for other substances, prevalence decreased significantly from the youngest to the oldest students. While a quarter (26%) of 12-year-old students had ever used inhalants, this proportion decreased to 12% of those aged 17 years.

Among 12- to 14-year-olds, 17–21% reported inhalant use in the past year. Use in the past year was lowest among 17-year-olds at 7%. Use within the past week was highest among the younger students and decreased significantly with increasing age. For example, while around one-tenth of students aged 12 reported using inhalants during the week preceding the survey, only 2% of 17-year-olds reported inhalant use in this time period. Use within the past month ranged from 16% of 12-year-olds to 4% of students aged 17 years.

There were few significant differences in the use of inhalants between male and female secondary school students and there was no obvious pattern in the differences. While significantly more females than males aged 13 had ever used inhalants, and had used them in the past year and month, more males than females aged 12 and 15 had used inhalants in the past week.

These results reveal an interesting pattern of reported inhalant use. While there were few gender differences in the use of these substances, there was a striking difference in the proportions of younger and older students reporting weekly use and ever use of inhalants. For example, 12- to 13-year-old students were more than five times as likely as 17-year-olds to report use in the past week. Similarly, the youngest students were about twice as likely as 17-year-olds to report having ever used inhalants.

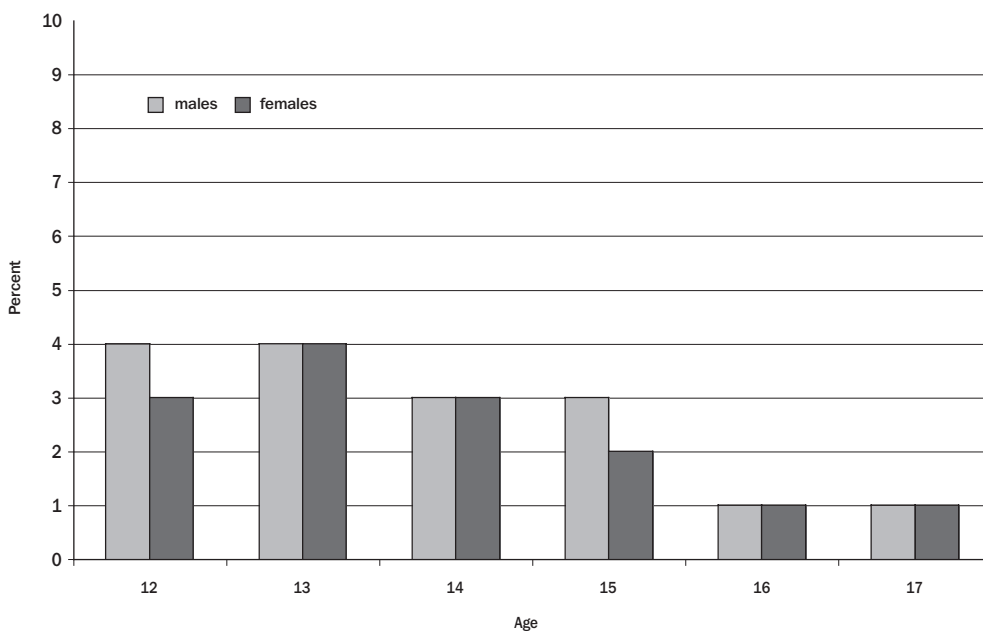
Table 8: Inhalants: Percentage of students according to recency of inhalant use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	73.6	26.4	20.9	15.9	9.3
	Male (%)	73.6	26.4	21.1	15.4	10.6
	Female (%)	73.6	26.4	20.7	16.4	7.9
13	Total (%)	75.8	24.2	18.2	11.9	7.9
	Male (%)	77.6	22.4	15.6	10.4	7.0
	Female (%)	74.1	25.9	20.6	13.4	8.6
14	Total (%)	77.1	22.9	17.0	10.4	6.4
	Male (%)	77.2	22.8	16.9	10.3	6.9
	Female (%)	77.0	23.0	17.1	10.5	6.0
15	Total (%)	80.4	19.6	13.6	6.9	4.4
	Male (%)	81.1	18.9	13.2	7.9	5.5
	Female (%)	79.7	20.3	14.0	6.0	3.3
16	Total (%)	85.0	15.0	9.7	4.8	3.0
	Male (%)	86.2	13.8	8.5	4.2	2.6
	Female (%)	83.8	16.2	10.8	5.5	3.4
17	Total (%)	88.5	11.5	6.6	3.7	2.2
	Male (%)	89.2	10.8	6.2	3.4	2.2
	Female (%)	87.8	12.2	7.1	4.0	2.2
12–17	Total (%)	79.5	20.5	14.9	9.3	5.8
	Male (%)	80.2	19.8	14.1	8.9	6.0
	Female (%)	78.7	21.3	15.6	9.6	5.5

Regularity of use: Around half of the students who had used inhalants in the previous year had used them on only one or two occasions (45% of males and 47% of females). A further 22% of males and 25% of females indicated they had used inhalants 3–5 times in the previous year. Twenty-one per cent of males and 18% of females reported using inhalants 10 or more times in the previous year. Again, this pattern of frequent use was inversely related to age, with younger students reporting more frequent use than older students.

Regular use: Figure 4 shows the proportion of all male and female students in each age group having used inhalants 10 or more times in the past year. This figure shows that regular use of inhalants among secondary school students is low, with fewer than 5% of 12-year-olds and 1% of 17-year-olds using these substances regularly. The figure also shows the same inverse association between age and inhalant use, with regular use of inhalants becoming less common with increasing age.

Figure 4: Proportion of all male and female students in each age group who used inhalants 10 or more times in the year before the survey (%)



3.4.1 Prevalence of inhalant use in 1999 and 2002

Between 1999 and 2002, there was a decrease in the proportion of students reporting to have used inhalants in their lifetime or in the month prior to the survey. Among 12- to 15-year-olds, lifetime use of inhalants was significantly higher in 1999 (29%) than in 2002 (23%) and this decrease was also seen in the proportions using inhalants in the month before the survey; in 1999, 13% of students had used inhalants in the previous month compared to 11% in 2002. Among 16- to 17-year-olds, significantly fewer students had used inhalants in their lifetime in 2002 (14%) than in 1999 (17%). However, there was no difference in the proportion of older students reporting use in the previous month in 1999 (4%) and 2002 (4%).

When data were combined for all students surveyed aged between 12 and 17 years, analyses found a significant decrease in the proportion of students using inhalants in their lifetime (from 26% in 1999 to 21% in 2002) and in the month prior to the survey (from 11% in 1999 to 9%).

The pattern of inhalant use described above shows that use decreases with increasing age, so that 12-year-olds were more likely to report using inhalants than 17-year-olds. This pattern contrasts with that found for other substances where use becomes more likely with increasing age.

3.5 Hallucinogens

Table 9 illustrates the use of hallucinogens such as LSD in all time periods by age and gender.

The use of hallucinogens such as LSD among secondary school students increased with age. While less than 5% of all secondary school students had ever used hallucinogens, the proportions increased significantly with age, from 2% of 12-year-old students to 6% of 17-year-olds. Only 3% of all students reported having used hallucinogens at some time in the past year. Use in the past year increased from 1% of 12-year-olds to 5% of 17-year-olds.

Table 9: Hallucinogens: Percentage of students according to recency of hallucinogen use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	98.4	1.6	1.1	0.8	0.6
	Male (%)	97.8	2.2	1.7	1.1	1.1
	Female (%)	99.0	1.0	0.5	0.5	0.1
13	Total (%)	97.4	2.6	1.9	1.2	0.9
	Male (%)	97.0	3.0	2.2	1.7	1.2
	Female (%)	97.8	2.2	1.5	0.8	0.7
14	Total (%)	95.4	4.6	3.5	2.2	1.5
	Male (%)	94.5	5.5	4.2	3.0	2.0
	Female (%)	96.3	3.7	2.7	1.5	0.9
15	Total (%)	94.3	5.7	4.0	1.9	1.2
	Male (%)	93.1	6.9	4.8	2.5	1.9
	Female (%)	95.5	4.5	3.2	1.4	0.5
16	Total (%)	94.0	6.0	4.4	1.8	0.9
	Male (%)	94.3	5.7	4.2	2.3	1.4
	Female (%)	93.8	6.2	4.5	1.4	0.5
17	Total (%)	93.6	6.4	4.5	1.4	0.8
	Male (%)	92.0	8.0	6.2	1.7	1.3
	Female (%)	95.3	4.7	2.9	1.0	0.3
12–17	Total (%)	95.6	4.4	3.1	1.6	1.0
	Male (%)	94.9	5.1	3.8	2.1	1.5
	Female (%)	96.3	3.7	2.6	1.1	0.5

Use of hallucinogens in the past month was very low, ranging from 1% of 12-year-old students to around 2% of 15- and 16-year-olds. Among these older students, around one-third of those who had used hallucinogens in the past year had used them in the previous month. The proportion of students using hallucinogens in the past week was about half the proportion reporting use in the past month. This pattern of results suggests that most students who use hallucinogens do not use them regularly.

An examination of the pattern of gender differences for hallucinogen use showed that generally more males than females had used these substances. For ever use and use in the past year, these differences were significant among 12-, 14-, 15- and 17-year-olds. For use in the past month, differences were only significant among 14- and 15-year-olds. For use in the past week, differences were not significant among 13- and 17-year-olds.

Regularity of use: The majority of students who reported having used hallucinogens in the previous year had used them infrequently. Fifty per cent of males and 58% of females indicated using hallucinogens only once or twice in the previous year. A further 17% of males and females who had used hallucinogens in the previous year had used them on 3–5 occasions. Negligible numbers of students were classified as regular users of hallucinogens.

Type of hallucinogen used: Students who had used hallucinogens in the year preceding the survey were asked what type of hallucinogens they had used. Students could indicate more than one type of hallucinogen. The hallucinogens most commonly used by students were ‘magic mushrooms’ (used by 61%) and ‘tabs’ (used by 68%). Liquid hallucinogens were used by 24% of students who had used hallucinogens in the previous year.

3.5.1 Prevalence of hallucinogen use in 1999 and 2002

Table 10 shows the proportion of students using hallucinogens in their lifetime and in the previous month in 1999 and 2002. Among 12- to 15-year-olds there was a decrease in the proportion of students reporting that they had ever used hallucinogens, although there was no change in the proportion reporting recent use of these substances. The decrease in lifetime use was significant for all students and among female students. Among 16- to 17-year-olds, there was a significant decrease in the proportion of students who had ever used hallucinogens between 1999 and 2002. This decrease was also found among both male and female students. Recent use of hallucinogens declined slightly between 1999 and 2002, and this decline was significant for all students and for male students aged 16 to 17 years.

The decrease in lifetime use of hallucinogens between 1999 and 2002 was also seen when data were combined for all 12- to 17-year-olds surveyed. However, this decrease did not translate into a decrease in the prevalence of use of hallucinogens “in the month prior to the survey.

The results indicate that use of hallucinogens has declined since 1999. In 2002, there was a low, mainly experimental, level of hallucinogen use among secondary school students.

Table 10: Percentage of students using hallucinogens, in their lifetime and in the past month in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	5	4	<.01	11	6	<.01	7	4	<.01
	Male	5	4	ns	13	7	<.01	7	5	<.01
	Female	5	3	<.01	9	6	<.01	6	4	<.01
Month	Total	2	2	ns	3	2	<.01	2	2	ns
	Male	2	2	ns	4	2	<.01	3	2	ns
	Female	1	1	ns	2	1	ns	1	1	ns

ns = not significant $p > .01$.

3.6 Amphetamines

Table 11 illustrates the use of amphetamines in all time periods by age and gender. The behaviour reported here is supposed to exclude any medically supervised use.

The majority of secondary school students (93%) had never used amphetamines. The proportions of students who had ever used these substances increased significantly with age, from 3% of 12-year-olds to 11% of students aged 17 years.

Around 5% of all students surveyed had used amphetamines in the past year; this proportion was highest among the older students, increasing from 2% of 12-year-olds to 8% of those aged 16 and 17. Use in the past month was very low for all age groups, ranging from 2–4%, and use in the past week was even lower, ranging from 1% to 2%.

Considering the use of amphetamines among males and females separately, although ever use was slightly higher among males than females, this difference was only significant among 13-year-olds. Differences in the proportion of male and female students using amphetamines in the past year were only significant among 13-year-olds. Use of amphetamines in the past month was significantly greater among males than females in 13-year-olds and 15-year-olds. The proportions of males and females using amphetamines in the past week were significantly different among all age groups except for 14-, 16- and 17-year-olds.

Regularity of use: Of those students who reported using amphetamines in the year prior to the study, 39% of males and 48% of females had used them only once or twice. Nineteen per cent of males and 24% of females had used amphetamines 3–5 times in the past year. Among all students around 1% indicated that they had used amphetamines regularly in the year prior to the survey.

Table 11: Amphetamines: Percentage of students according to recency of amphetamine use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	97.3	2.7	2.1	1.5	1.2
	Male (%)	96.6	3.4	2.5	2.0	1.8
	Female (%)	97.9	2.1	1.8	1.1	0.6
13	Total (%)	96.2	3.8	2.9	1.7	1.1
	Male (%)	95.3	4.7	3.7	2.4	1.8
	Female (%)	97.0	3.0	2.1	1.1	0.4
14	Total (%)	94.1	5.9	4.5	2.6	1.8
	Male (%)	93.9	6.1	4.7	2.7	2.1
	Female (%)	94.3	5.7	4.3	2.5	1.6
15	Total (%)	91.7	8.3	6.2	3.0	1.7
	Male (%)	90.7	9.3	6.9	4.1	2.4
	Female (%)	92.6	7.4	5.5	1.9	0.9
16	Total (%)	90.0	10.0	7.7	3.5	1.9
	Male (%)	90.5	9.5	7.0	3.3	2.2
	Female (%)	89.5	10.5	8.4	3.7	1.6
17	Total (%)	89.4	10.6	7.8	3.4	1.4
	Male (%)	89.3	10.7	8.1	3.7	1.9
	Female (%)	89.4	10.6	7.5	3.1	1.0
12–17	Total (%)	93.4	6.6	5.0	2.6	1.5
	Male (%)	92.9	7.1	5.3	3.0	2.0
	Female (%)	93.7	6.3	4.7	2.2	1.0

3.6.1 Prevalence of amphetamine use in 1999 and 2002

The proportion of students using amphetamines in 1999 and 2002 is shown in Table 12. Use of amphetamines had not changed among junior secondary school students between the two survey years. In 1999, 6% of students aged 12–15 years had ever used amphetamines, while in 2002 the proportion reporting using these substances was similar at 5%. The proportion of students reporting monthly use of amphetamines had not changed between 1999 and 2002, and was around 3%.

Table 12: Percentage of students using amphetamines in their lifetime and in the past month in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	6	5	ns	11	10	ns	7	7	ns
	Male	6	6	ns	12	10	ns	8	7	ns
	Female	5	5	ns	10	11	ns	7	6	ns
Month	Total	2	2	ns	4	3	ns	3	3	ns
	Male	3	3	ns	5	3	ns	3	3	ns
	Female	2	2	ns	3	3	ns	2	2	ns

Among older students, there was no significant change in the lifetime and monthly use of amphetamines between 1999 and 2002. About 10% of 16- to 17-year-olds reported using amphetamines in 1999 and 2002 in their lifetime, and 4% indicated they had used them in the month before the survey.

The pattern of results found for 12- to 15-year-olds and 16- to 17-year-olds was also found when data for the two age groups were combined.

The use of amphetamines among Australian secondary school students in 2002 was generally low. While prevalence increased with age, there was little difference in the proportions of students aged 15–17 who had used the drug in the past week. There were small increases in past use across all ages. The pattern of results found in the survey suggests that there was a low level of experimental use among secondary school students, with only a few students having used amphetamines recently.

3.7 Steroids

Table 13 shows the proportion of students using steroids without a doctor’s prescription in an attempt to improve sporting ability, increase muscle size or improve appearance, in all time periods by age and gender.

The use of steroids without a prescription among secondary school students was very low, and across the six age groups there was no significant difference in the proportions of students reporting use in any of the time periods. Both use in the past year and use in the past month were stable at around 1–2% across the six age groups. Only 1% of students in all age groups reported that they had used steroids without a prescription in the week before the survey.

Except among 13 and 16-year-olds, males were significantly more likely than females to have ever used steroids, and to have used them in the past year. More males than females aged 12, 14 and 15 had used steroids in the past month and, except among 13-year-olds, more males than females had used steroids in the past week. For example, ever use was highest at 4% among male students aged 12, 14 and 15 years, and was about twice the rate among females in these age groups. The prevalence of use in the past month was about 2% for male students across the six age groups and was less than 1% for females 13 years and over.

Table 13: Steroids: Percentage of students according to recency of steroid use without a doctors' prescription in an attempt to improve sporting ability, increase muscle size or improve appearance, by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	97.1	2.9	1.9	1.2	0.9
	Male (%)	95.8	4.2	2.7	1.8	1.3
	Female (%)	98.4	1.6	1.1	0.6	0.4
13	Total (%)	96.8	3.2	2.3	1.3	1.0
	Male (%)	96.8	3.2	2.1	1.4	1.0
	Female (%)	96.8	3.2	2.4	1.2	1.0
14	Total (%)	96.9	3.1	2.1	1.4	1.0
	Male (%)	96.1	3.9	2.9	2.0	1.5
	Female (%)	97.7	2.3	1.4	0.8	0.5
15	Total (%)	97.0	3.0	1.9	1.4	1.0
	Male (%)	96.1	3.9	2.7	2.1	1.6
	Female (%)	97.9	2.1	1.2	0.7	0.5
16	Total (%)	97.3	2.7	2.1	1.2	0.8
	Male (%)	96.8	3.2	2.3	1.5	1.3
	Female (%)	97.7	2.3	1.8	0.8	0.4
17	Total (%)	97.7	2.3	1.7	1.2	0.9
	Male (%)	96.8	3.2	2.6	1.7	1.4
	Female (%)	98.6	1.4	0.8	0.6	0.4
12-17	Total (%)	97.1	2.9	2.0	1.3	1.0
	Male (%)	96.4	3.6	2.6	1.8	1.4
	Female (%)	97.8	2.2	1.5	0.8	0.6

Regularity of use: Among those students who had used steroids in the year before the survey, use was infrequent. Among males, 36% had used these substances only once or twice, with a further 12% using them 3–5 times. Among females, 50% had only used them once or twice, with a further 22% using them 3–5 times. Age was not associated with frequency of use.

Less than 1% of all students indicated that they had used steroids 10 or more times in the previous year.

3.7.1 Comparison of steroid use in 1999 and 2000

The proportion of 12- to 15-year-olds and 16- to 17-year-olds using steroids at some time in their life had not changed significantly between 1999 and 2002. There was also no change in the proportion of students indicating they had used steroids in the month prior to the survey. In 1999, around 3% of all 12- to 15-year-olds had used steroids in their lifetime and this proportion was 3% in 2002. Among this age group, in both 1999 and 2002, 1% had used steroids in the month before the study. Among 16- and 17-year-olds, in both 1999 and 2002, around 2% had used steroids at some time in their life, and in both survey years 1% indicated that they had used steroids at least once in the month before the study. There was also no

change in steroid use between 1999 and 2002 when data were combined for all 12- to 17-year-olds surveyed.

While the prevalence estimates reported here indicate very low levels of steroid use that was not medically prescribed among adolescents at school, the results also suggest that, among students who were using steroids, use was fairly regular. Such behaviour was mainly concentrated among male students and did not differ substantially between age groups.

3.8 Opiates

Table 14 illustrates the use of opiates other than for medical reasons in all time periods by age and gender.

A small proportion (3%) of secondary school students had ever used opiates or narcotics such as heroin or morphine other than for medical reasons. Across the six age groups, this ranged from 2% to 4%. Only 2% of students reported using opiates in the past year; this level of use was fairly stable among students of all ages. Use in the past month was reported by around 1% of students. Less than 1% of students reported using opiates in the week prior to the survey.

In most age groups, slightly more males than females had ever used opiates: 1–3% of females compared with 3–4% of males. However, these differences were only significant among 12-year-olds. The differences in the proportion of males and females using opiates in the past year were only statistically significant among 12-year-olds and 15-year-olds. In general, similar proportions of male and female students had used opiates in the past month and week, with only the differences between 13-year-old males and females reaching statistical significance.

Table 14: Opiates: Percentage of students according to recency of the use of opiates other than for medical reasons by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	97.7	2.3	1.6	1.1	0.7
	Male (%)	96.7	3.3	2.5	1.8	1.2
	Female (%)	98.6	1.4	0.7	0.4	0.3
13	Total (%)	97.8	2.2	1.5	1.1	0.8
	Male (%)	97.6	2.4	1.6	1.3	1.0
	Female (%)	97.9	2.1	1.4	0.9	0.6
14	Total (%)	96.5	3.5	2.3	1.4	1.1
	Male (%)	96.1	3.9	2.8	2.0	1.5
	Female (%)	96.9	3.1	1.9	0.8	0.6
15	Total (%)	96.8	3.2	2.2	1.2	0.9
	Male (%)	96.3	3.7	3.1	2.0	1.5
	Female (%)	97.4	2.6	1.4	0.5	0.4
16	Total (%)	97.4	2.6	1.9	0.8	0.6
	Male (%)	97.6	2.4	1.9	1.0	0.7
	Female (%)	97.2	2.8	2.0	0.6	0.4
17	Total (%)	97.3	2.7	1.8	1.1	1.0
	Male (%)	96.7	3.3	2.3	1.8	1.9
	Female (%)	97.8	2.2	1.3	0.4	0.1
12–17	Total (%)	97.2	2.8	1.9	1.1	0.8
	Male (%)	96.8	3.2	2.4	1.7	1.3
	Female (%)	97.6	2.4	1.5	0.6	0.4

Regularity of use: Of the students who reported having used opiates in the year prior to the survey, 45% of males and 55% of females had used these substances only once or twice. Fourteen per cent of males and 18% of females who had used opiates in the past 12 months had used them 3–5 times. Negligible numbers of students (less than <0.5%) indicated that they had used opiates at least 10 times in the previous year.

3.8.1 Comparison of opiate use in 1999 and 2002

Table 15 also shows the proportion of students indicating they had used opiates in their lifetime or in the past month, in 1999 and 2002. There was a small but significant reduction in the proportion of 12- to 15-year-olds indicating they had ever used opiates between 1999 and 2002. This reduction was largely due to a significant decrease in reported lifetime use among young females. There was, however, no change in the proportion of 12- to 15-year-old students indicating that they had used some sort of opiate in the month prior to the survey. Among older students, 5% reported that they had used opiates in their lifetime in 1999 and this was significantly higher than the 3% found in 2002. This reduction was largely driven by a reduction in the proportion of males indicating they had used opiates in their lifetime. The proportion of students aged 16–17 years indicating that they had used opiates in the month before the survey had not changed between 1999 and 2002.

The results indicate that opiate use was uncommon among Australian secondary school students in both 1999 and 2002. The great majority of secondary school students (97%) had never used substances such as heroin. Most of the students who had used opiates had not used them in the past month, suggesting that student use was primarily experimental. Comparisons of the prevalence of opiate use among secondary school students in 1999 suggest that students were less likely to use opiates in 2002 than in 1999.

Table 15: Percentage of students who had used opiates in their lifetime or in the past month in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	4	3	<.01	5	3	<.01	4	3	<.01
	Male	4	3	ns	6	3	<.01	4	3	<.01
	Female	4	2	<.01	4	3	ns	4	2	<.01
Month	Total	1	1	ns	1	1	ns	1	1	ns
	Male	2	2	ns	2	1	ns	2	2	ns
	Female	1	1	ns	1	1	ns	1	1	ns

ns = not significant $p > .01$.

3.9 Cocaine

Table 16 illustrates the use of cocaine in all time periods by age and gender.

As with opiate use, in 2002, most secondary school students had never tried cocaine or crack. Only 3% of all students had ever used cocaine and the proportions across age groups ranged from 2% to 4%. Three-quarters of the students who had ever used cocaine reported using this substance in the past year. Around 1% of students had used cocaine in the month and week preceding the survey. Examining each age group, use in the past month was between 1% and 2%.

Table 16: Cocaine: Percentage of students according to recency of cocaine use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	98.2	1.8	1.3	0.9	0.6
	Male (%)	97.2	2.8	1.8	1.2	1.1
	Female (%)	99.2	0.8	0.7	0.6	0.1
13	Total (%)	97.6	2.4	1.8	1.1	0.7
	Male (%)	97.0	3.0	2.4	1.6	1.1
	Female (%)	98.1	1.9	1.3	0.6	0.4
14	Total (%)	96.0	4.0	3.0	1.9	1.2
	Male (%)	95.8	4.2	3.2	2.1	1.5
	Female (%)	96.1	3.9	2.8	1.6	0.9
15	Total (%)	96.5	3.5	2.8	1.5	1.2
	Male (%)	95.8	4.2	3.4	2.3	1.8
	Female (%)	97.3	2.7	2.2	0.8	0.6
16	Total (%)	96.7	3.3	2.3	1.1	0.6
	Male (%)	96.4	3.6	2.7	1.2	0.8
	Female (%)	96.9	3.1	2.0	1.0	0.5
17	Total (%)	96.1	3.9	2.1	1.0	0.6
	Male (%)	95.2	4.8	3.2	1.7	1.0
	Female (%)	97.0	3.0	1.0	0.3	0.2
12–17	Total (%)	96.9	3.1	2.2	1.3	0.8
	Male (%)	96.3	3.7	2.8	1.7	1.2
	Female (%)	97.5	2.5	1.7	0.9	0.5

Ever use of cocaine showed a consistent pattern, with males being more likely than females to have ever used cocaine at all ages. However, these differences were only significant among 12- and 15-year-olds. Use in the past year was only significantly higher among males than females among 12-, 13- and 17-year-olds. At all ages males showed consistently higher levels of use in the past month and past week when compared with females. The differences in male and female monthly use were significant for 13- and 17-year-olds, while differences in weekly use were significant for 12-, 13- and 15-year-olds.

Regularity of use: Cocaine use was infrequent among those students who reported using in the past year. Around 40% of males and 54% of females who reported using cocaine in the previous year had used it only once or twice. Negligible numbers of students (0.6%) reported using cocaine on at least 10 occasions in the past year.

3.9.1 Prevalence of cocaine use in 1999 and 2002

The proportion of students reporting to have used cocaine in 1999 and 2002 are shown in Table 17. There was little change in the proportion of students indicating they had used cocaine either in their lifetime or in the month prior to the survey. Females aged 12–15 years in 2002 were less likely to report having ever used cocaine than in 1999.

Levels of cocaine or crack use were very low among Australian school students in 2002.

Table 17: Percentage of students who had used cocaine in their life or in the past month in 1999 and 2002

Recency period	Gender	12–15-year-olds			16–17-year-olds			12–17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	3	3	ns	4	4	ns	4	3	ns
	Male	4	4	ns	5	4	ns	4	4	ns
	Female	3	2	<.01	3	3	ns	3	3	ns
Month	Total	1	1	ns	1	1	ns	1	1	ns
	Male	2	2	ns	2	1	ns	2	2	ns
	Female	1	1	ns	0	1	ns	1	1	ns

ns = not significant $p > .01$.

3.10 Ecstasy

Table 18 gives the proportion of students reporting the use of ecstasy in all time periods by age and gender.

A small proportion of secondary school students had ever used ecstasy. Of all students, only 5% had ever had some sort of experience with this drug. Although use of ecstasy was not common among students in any age group, similar to other substances, the proportion of students who had ever used ecstasy increased significantly as students progressed through secondary school. Experience of using ecstasy was most common among 16- to 17-year-old students, with 7% having used this substance. Use in the past year ranged from 1% of students aged 12 years to 5% of 16- to 17-year-olds.

Use of ecstasy in the past month was consistently lower than use in the past year, and use in the past week was lower than use in the past month. While the prevalence of use in the past month ranged from 1% of 12-year-olds to 2% of those aged 15–17 years, use in the past week was only about 1%.

In most age groups, a greater proportion of males than females reported ever using ecstasy. However, these differences were only significant among 12-year-olds. The differences between the use of ecstasy by males and females were also seen in the proportions of students using ecstasy in the past month and past week. The differences in male and female use of ecstasy in the past month were significant for 12-, 13- and 15-year-olds. The differences in weekly use were significant for all groups except 12-year-olds. The results suggest that, among older students, males and females were equally likely to use ecstasy occasionally, but males might be more likely to use it regularly.

Regularity of use: Similar to findings for other substances, nearly 43% of males and 58% of females who had used ecstasy in the year prior to the survey had used it only once or twice. Less than 1% of all students had used ecstasy 10 or more times in the year before the survey.

Table 18: Ecstasy: Percentage of students according to recency of ecstasy use by age and gender

Age		Never	Ever	Year	Month	Week
12	Total (%)	98.1	1.9	1.3	1.0	0.8
	Male (%)	97.2	2.8	1.9	1.7	1.4
	Female (%)	98.9	1.1	0.8	0.2	0.1
13	Total (%)	97.8	2.2	1.8	1.0	0.7
	Male (%)	97.8	2.2	1.8	1.5	1.2
	Female (%)	97.8	2.2	1.9	0.6	0.2
14	Total (%)	95.5	4.5	3.3	1.9	1.2
	Male (%)	95.0	5.0	3.8	2.4	1.5
	Female (%)	96.1	3.9	2.9	1.4	0.9
15	Total (%)	94.5	5.5	4.0	2.2	1.3
	Male (%)	93.6	6.4	4.7	3.0	2.1
	Female (%)	95.3	4.7	3.4	1.5	0.5
16	Total (%)	93.2	6.8	5.3	2.3	1.0
	Male (%)	93.7	6.3	5.0	2.2	1.5
	Female (%)	92.8	7.2	5.7	2.4	0.6
17	Total (%)	93.1	6.9	4.7	2.2	1.0
	Male (%)	92.1	7.9	5.5	2.9	1.6
	Female (%)	94.0	6.0	3.9	1.6	0.5
12-17	Total (%)	95.5	4.5	3.3	1.8	1.0
	Male (%)	95.1	4.9	3.7	2.3	1.6
	Female (%)	95.9	4.1	3.0	1.2	0.5

3.10.1 Comparison of ecstasy use in 1999 and 2002

The proportion of students reporting to have used ecstasy in 1999 and 2002 are shown in Table 19. There was no change in the proportion of students indicating they had used ecstasy either in their lifetime or in the month prior to the survey. In 1999 and 2002, 3–4% of 12- to 15-year-olds had ever used ecstasy, while about 6% of 16- and 17-year-olds had ever used ecstasy in 1999 and 2002.

Table 19: Percentage of students who had used ecstasy in their lifetime or in the past month in 1999 and 2002

Recency period	Gender	12-15-year-olds			16-17-year-olds			12-17-year-olds		
		1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Lifetime	Total	3	4	ns	6	7	ns	4	5	ns
	Male	4	4	ns	7	7	ns	5	5	ns
	Female	3	3	ns	5	7	ns	3	4	ns
Month	Total	1	2	ns	3	2	ns	2	2	ns
	Male	2	2	ns	3	3	ns	2	2	ns
	Female	1	1	ns	2	2	ns	1	1	ns

ns = not significant $p > .01$.

These results indicate that the proportion of Australian secondary school students who had had any experience of ecstasy, either recently or in the past, was very low. While use of ecstasy tended to increase with age, among all age groups prevalence was low, indicating that use of this substance was not widespread among secondary school students in 2002. The results shown here suggest that use of ecstasy among secondary school students was mainly experimental.

3.11 Use of any illicit substance

The proportion of students in each of the two age groups who had used cannabis, hallucinogens, amphetamines, cocaine, opiates or ecstasy in their lifetime and in the month prior to the survey in 1999 and 2002 is shown in Table 20. Among both older and younger students, the proportion of students who had used any illicit substance had declined between 1999 and 2002. Among 12- to 15-year-olds, there had been a significant decrease in the proportion of students using any illicit substance in their lifetime from 26% in 1999 to 22% in 2002. A corresponding decrease was seen among 16- to 17-year-olds, where the proportion of students who had used any illicit substance in their lifetime decreased significantly from 48% in 1999 to 41% in 2002. The decreases in lifetime use of any illicit substance were reflected in decreases in the levels of recent use of any illicit substance. Among 12- to 15-year-olds, recent use of any illicit substance decreased significantly from 13% in 1999 to 10% in 2002. However, among 16- to 17-year-olds, the decrease from 21% of students in 1999 to 19% in 2002 who had used any illicit substance in the month prior to the survey was not statistically significant. It seems that while lifetime use of any illicit substance had decreased among 16- and 17-year-olds between 1999 and 2002, there had been no real decrease in the proportion of 16- and 17-year-olds engaged in recent use of illicit substances.

3.12 Use of any illicit substance excluding cannabis

Because the use of cannabis was so much more prevalent than any other substance, trends in its use tend to drive trends in the use of 'any illicit substance'. For this reason, the above analyses were repeated using an index of illicit substance use that excluded cannabis. The proportion of students who had used any illicit substance other than cannabis in their lifetime or in the prior month in 1999 and 2002 are also shown in Table 20. The proportions of students using any illicit substance other than cannabis were considerably lower than when the index of substance use included cannabis, but were still impressive. In 1999 and 2002, between 15% and 18% of 16- to 17-year-olds and 10% of 12- to 15-year-olds indicated they had used an illicit substance other than cannabis in their lifetime. The proportion of students aged 12–15 who had used any illicit substance other than cannabis in their lifetime had decreased significantly between 1999 and 2002, from 11% to 9%. This decrease was found for both males and females, although only the decrease among females was significant. There was no change in the proportion of 12- to 15-year-olds who had used an illicit substance other than cannabis in the month before the survey. Among 16- and 17-year-olds, there was a significant decrease in the proportion of all students in this age group using an illicit substance other than cannabis in their lifetime. This decrease was reflected in usage patterns for males and females, although only the decrease among males was statistically significant. While there was no change in the proportion of all 16- and 17-year-old students who had used illicit

substances other than cannabis in the month before the survey, males in this age group were significantly less likely to do so in 2002 than in 1999.

Table 20: Percentage of students who had used any illicit substance or any illicit substance excluding cannabis, in their lifetime or in the past month in 1999 and 2002

Substance	Recency period	Gender	12-15-year-olds			16-17-year-olds			12-17-year-olds		
			1999 %	2002 %	Sig	1999 %	2002 %	Sig	1999 %	2002 %	Sig
Any illicit substance	Lifetime	Total	26	22	<.01	48	41	<.01	32	27	<.01
		Male	28	24	<.01	51	44	<.01	34	29	<.01
		Female	23	20	<.01	44	38	<.01	29	25	<.01
	Month	Total	13	10	<.01	21	19	ns	15	13	<.01
		Male	14	12	<.01	24	21	ns	17	14	<.01
		Female	10	8	<.01	18	16	ns	13	11	<.01
Any illicit substance excluding cannabis	Lifetime	Total	11	9	<.01	18	15	<.01	13	11	<.01
		Male	12	10	<.01	20	15	<.01	14	11	<.01
		Female	10	8	<.01	16	14	ns	11	10	<.01
	Month	Total	4	4	ns	6	5	ns	5	4	ns
		Male	5	5	ns	8	5	<.01	6	5	<.01
		Female	3	3	ns	4	5	ns	4	3	ns

ns = not significant $p > .01$.

3.13 Poly-substance use

In response to a specific question, students who had used cannabis, amphetamines, hallucinogens and ecstasy in the previous year were asked to indicate other substances they had used concurrently with these substances. As more than one other substance may have been used on any occasion, or different substances may have been used on different occasions, students could indicate multiple substances. Students could indicate a substance from a list of seven, along with a response indicating that no other substance was used. Students could also indicate other substances that were not listed.

The proportion of students using cannabis, amphetamines, hallucinogens and ecstasy in the past year indicating they had used any alcohol, tobacco, cannabis, hallucinogens amphetamines, ecstasy or analgesics on the same occasion is shown in Table 21. Alcohol, tobacco and cannabis were the substances most commonly used in conjunction with cannabis, hallucinogens and ecstasy. Around 60% of the students who had used these three substances in the previous year were drinking alcohol at the same time, around 50% were smoking and 40% were using cannabis. The exception to this was amphetamines, where alcohol and cannabis were the most commonly used substances. Among this group only 20% also smoked.

Around 20% of students who had used cannabis, amphetamines, hallucinogens or ecstasy in the past year did not use any other substance at the same time. Only 13% of amphetamine users did not use any other substance.

Around 13% of students who had used amphetamines in the past year reported using hallucinogens and ecstasy at the same time, 10% of students using hallucinogens in the past year reported using amphetamines and ecstasy, while 18% of students using ecstasy reported using amphetamines at the same time.

Table 21: Percentage of students who had used cannabis, amphetamines, hallucinogens or ecstasy in the last 12 months indicating they had used other substances on the same occasion

Substance used on same occasion (n)*	Substance used in the last 12 months			
	Cannabis (5142)	Amphetamines (1241)	Hallucinogens (745)	Ecstasy (768)
Alcohol	66	68	53	58
Tobacco	51	20	46	48
Cannabis	N/A**	43	40	40
Hallucinogens	5	13	N/A**	12
Amphetamines	8	N/A**	12	18
Ecstasy	6	15	15	N/A**
Analgesics	8	14	11	9
No other substance used	22	13	23	20
Other	3	6	7	7

* Number of students surveyed using substance in previous year.

** N/A = not applicable

3.14 Comparisons of the types of substances used by students in 2002

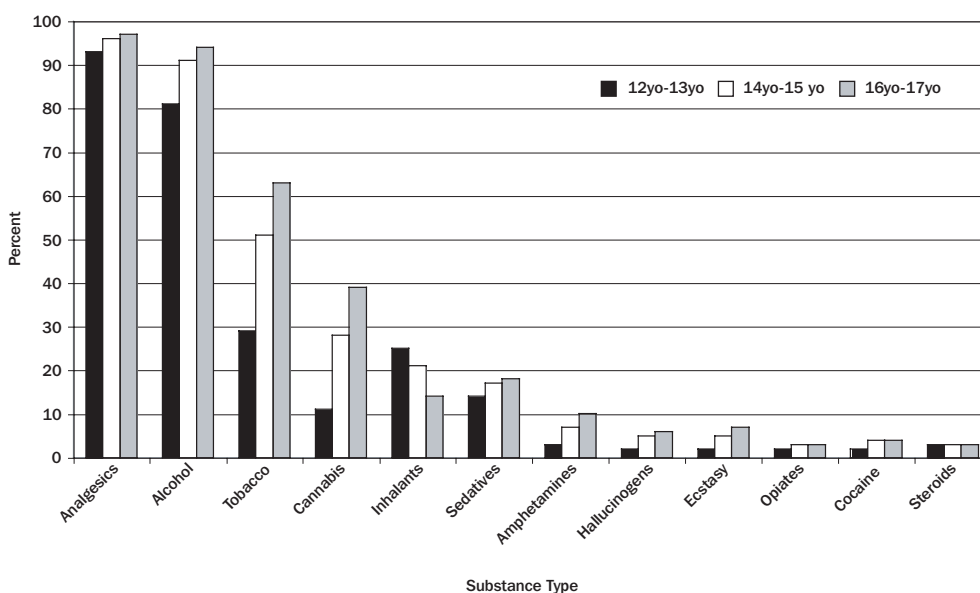
So far, this report has concentrated on the separate prevalence estimates for each substance. In this section the relative levels of use of the different substances were examined in order to highlight the substances most commonly used by secondary school students. Included in these comparisons were data on the prevalence of alcohol and tobacco use. These two substances were included to gain a complete picture of the types of substances most commonly used by secondary school students. Lifetime use and use in the month before the survey were focused upon. Lifetime use provides an indication of the extent students have had contact with the substance, and the extent the substance may have been used in the past, even though they may not be using the substance any more. Use in the past month gives an indication of the recency of use and suggests current access to, and involvement with, the substance.

Lifetime experience of alcohol was assessed by the question ‘Have you ever had an alcoholic drink?’, with responses made on a four-point scale ranging from ‘No, never’ to ‘Yes, more than 10 drinks’. Lifetime experience of tobacco was assessed by the question ‘Have you ever smoked even part of a cigarette?’, with responses made on a five-point scale ranging from ‘No’ to ‘Yes, more than 100 cigarettes’. Students indicating they had consumed alcohol or tried a cigarette were classified as ever users of tobacco or alcohol. Monthly use was assessed by asking students to indicate if they had had an alcoholic drink or a cigarette in the past month. Students indicating they had had a drink or a cigarette in this time period were classified as recent users.

To obtain an overall picture of students' use of various substances, data for males and females were combined and data is presented for 12- to 13-year-olds, 14- to 15-year-olds and 16- to 17-year-olds. This combination of age groups reflects the junior, middle and senior years of secondary school and also reflects the age patterns for use of substances reported previously.

Figure 5 shows the proportions of students who had ever used each of the various substances for the three age groups. As seen, students of all ages have most experience with the legal substances analgesics, alcohol and tobacco. Analgesics were the most widely used substance, with over 90% of students in all three age groups having some experience of them. Experience with alcohol was also high among all age groups, with experience increasing as students move through secondary school. Tobacco was the next commonly used substance. Experience with tobacco also increased as students progressed through secondary school.

Figure 5: Percentage of students who had ever used any licit or illicit substance, Australia 2002



Cannabis was the most widely used illicit substance and was the fourth most widely used substance among adolescents. Once again, experience with cannabis is seen to increase with age, with around 39% of 16- to 17-year-olds having used this substance at some point in their life.

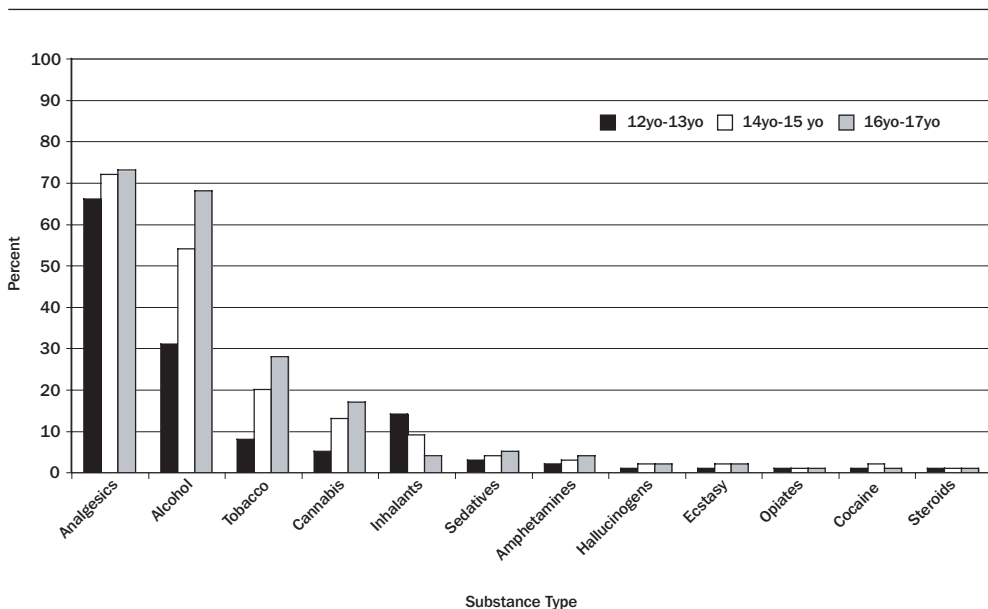
Inhalants were the next most commonly used substance. Again, the unusual pattern where lifetime use of inhalants becomes less common with increasing age was found.

Amphetamines and hallucinogens were the next most commonly used substances, and again their use increased with age. Amphetamines had been tried by over 10% of 16- to 17-year-olds while 6–7% of 16- and 17-year-olds had tried hallucinogens or ecstasy. Experience with other illicit drugs was rare across all age groups.

The percentage of students in the three age groups ever using each of the substances in Figure 5 is shown in Appendix 2, Table 2A.1 for 2002. For interest, the corresponding percentages found in the 1999 survey are also shown in this table.

Figure 6 shows the proportion of students in the three age groups who had used any of the licit and illicit substances in the month prior to the survey. The pattern of substance use seen in Figure 5 was also found in Figure 6. The licit substances were the most commonly used substances. Analgesics had been used by around two-thirds of all students in the past month. Alcohol was the next most commonly used substance, with more students in each age group having used alcohol in the month prior to the survey than any other substance, excluding analgesics. For students aged 14 and over, tobacco was the next most commonly used substance in the four weeks preceding the survey. For students aged 12 and 13, inhalants were more commonly used than tobacco.

Figure 6: Percentage of students who had used any licit or illicit substance in the past month, Australia 2002



For students aged 14 and over, cannabis was the most widely used illicit substance in the previous month. Around 15% of students aged 14 and over had used cannabis in the month before the survey.

Inhalants were the next most commonly used substance, and again use of inhalants was more common among younger students than older students. Recent use of hallucinogens and amphetamines increased with age, and less than 5% of older students had used these substances in the month before the survey. Recent use of other illicit substances was rare across all age groups.

Appendix 2, Table 2A.2, shows the percentage of students in the three age groups using each of the substances in the previous month, presented in Figure 6 for 2002. For interest, the corresponding percentages from the 1999 survey are also shown in this table.

3.15 Lessons about substance use in the previous school year

Students were asked to indicate if they could recall receiving any lessons on the use of illicit drugs and other substances in the previous school year. The proportion of students who did not recall receiving any lessons, or who recalled receiving part of a lesson or one or more lessons in the previous school year is shown on Table 22. Across all age groups, 23% of students indicated that they had not received any lessons on illicit substance use in the previous school year, while 39% indicated that they had received more than one lesson about this topic. The highest proportions of students not receiving a lesson about illicit drug use were found among the 12-year-olds (30%), 13-year-olds (27%) and 17-year-olds (31%). This may indicate that schools were less likely to include lessons about the use of illicit substances in the curriculum of Years 6 and 7 students and in the Year 11 curriculum. Students aged 14, 15 and 16 were most likely to report receiving more than one lesson about the topic in the previous school year. This finding indicates that schools were most likely to include lessons about the use of illicit substances in the curriculum of Years 8, 9 and 10 students.

Table 22: Percentage of students indicating they had received part, one, more than one or no lessons about the use of illicit substances in the previous school year 2002

	Age						
	12	13	14	15	16	17	12-17
No lessons	30	27	18	12	18	31	23
Part of a lesson	21	19	16	14	18	23	18
One lesson	23	21	21	19	19	18	20
More than one lesson	26	33	45	55	45	28	39

4. Conclusion

This 2002 national survey provides recent estimates on the prevalence of the use of illicit and over-the-counter substances among adolescent males and females between the ages of 12 and 17 years. The large sample of students used in this study ensures estimates for these subgroups are reliable, enabling age and gender specific trends to be explored.

Similar to the findings from our previous surveys of secondary school students in 1996 and 1999, the current study found that analgesic use was a large part of the adolescent experience. While the majority of students had not used any illicit substance, 22% of students aged between 12 and 15 years and 41% of students aged 16 and 17 years had tried at least one of cannabis, hallucinogens, amphetamines, ecstasy, opiates or cocaine. As in previous surveys of secondary school students and in surveys of adults, cannabis was the illicit substance most widely used, with around 40% of 16- to 17-year-olds having tried this substance. However, when the prevalence of lifetime and recent use of licit and illicit substances was compared, analgesics, alcohol and tobacco were the substances most widely used by adolescents.

The small decrease in lifetime use of analgesics seen between 1996 and 1999 continued between 1999 and 2002 for 12- to 15-year-olds, but not for older students. The decrease in lifetime prevalence was also reflected in small decreases in monthly and weekly use of these substances. However, despite these decreases, we note that analgesic use (which included Disprin and Panadol) was widespread among secondary school students. By the age of 12, 90% of students had used analgesics and 24% of 12-year-old students had used them in the week before the survey. As was the case in our two previous studies,^{2,4} recent use was more common among females than males. While we note that most recent users of analgesics had used them only once or twice, the general high level of analgesic use among secondary school students may be of some concern.

As in our previous studies, in 2002 the use of inhalants within any time period was more common among younger than older students. This inverse relationship between prevalence and age may be due to inhalants being a 'kiddie' drug with students growing out of using these substances as they get older. If this were the case, the patterns of ever use among older and younger students would be similar, as many older students would have used inhalants when they were younger. The results, however, do not reflect this. While around 25% of 12- to 13-year-olds had ever used inhalants, this decreased to 15% of 16-year-old students. That fewer older than younger students had ever used inhalants may indicate that the use of inhalants among younger students was a recent phenomenon, with students who are now in the upper levels not having used such substances several years ago. This is unlikely, as the proportion of younger students found to be using inhalants in 1999 was slightly higher than that found in the present study (about 30% of 12-year-olds had used inhalants in 1999). Reasons for the finding that fewer older students reported ever using inhalants need to be investigated. However, as noted before, the possibility that younger and older students interpreted the question differently (with, for instance, younger students reporting on instances where they have sniffed 'textas',

glue or other substances without intending to get 'high') cannot be ruled out. The results for inhalant use obtained from this study should be treated cautiously.

Among illicit substance users, cannabis was the drug most commonly used. These results suggest that if adolescents are going to use an illicit substance, cannabis is the substance they are most likely to use. In addition to cannabis being the illicit substance most likely to be used by secondary school students, it was also the substance most likely to be used regularly by current users. About 60% of the students who had used cannabis in the month prior to the survey had used it in the past week. In addition, rather than the pattern found for other substances where the majority of users had used the substance infrequently, about 40% of males and a third of the females who reported using cannabis in the previous year had used this substance on more than 10 occasions. We estimate that about 14% of 16- and 17-year-old males and about 10% of females in this age group could be regular users of cannabis. Regular users of cannabis were more likely than occasional users to smoke cannabis through a bong rather than a joint and while the vast majority of occasional users used cannabis only with others, a quarter of the regular users indicated they were beginning to use cannabis by themselves. In general, however, findings from this study suggest that, for most adolescents, cannabis use is a social activity.

Continuing the trend seen in our 1999 survey, the proportion of secondary school students using cannabis in 2002 was lower than that found in 1999. This finding is similar to the results reported in the 2001 National Drug Strategy (NDS) Household Survey³ which reported a decrease in the prevalence of recent (in the past year) use of cannabis between 1998 and 2001 among 14- to 19-year-olds. In addition, the level of lifetime and yearly use of cannabis found in the 2001 NDS Household Survey was similar to the level found in the present report. The NDS Household Survey found that 34% of 14- to 19-year-olds had used cannabis in their lifetime and 25% had used this substance in the previous year. In the present study, 33% of 14- to 17-year-olds had tried cannabis and 27% had used it in the past year. The slight differences in the estimates may be explained by the NDS Household Survey including 18- to 19-year-olds and 16- to 17-year-olds who had left school. The differences may also be due to sampling error. However, the similarity of the estimates for cannabis use found in the present study and the NDS Household Survey suggests that there has been a decrease in cannabis use among adolescents.

Following cannabis and inhalants, amphetamines were the next most commonly used substance. About 10% of 16- to 17-year-olds had used amphetamines in their lifetime. There was no change in the proportion using amphetamines between 1999 and 2002, and this reflects the lack of change in the use of this substance by 14- to 19-year-olds reported in the 2001 NDS Household Survey.³ In 2002, 7% of 16- to 17-year-olds had used ecstasy at some time in their life and this was about the same level as in 1999. Most students who used ecstasy in the year before the survey had only used this substance once or twice.

Around 6% of 16- to 17-year-old students in 2002 had ever used hallucinogens and this was about half the level found in 1999. Reflecting the results of our previous surveys, use of hallucinogens was irregular, with the majority of students who used these substances in the year before the study only using them once or twice. If students did use hallucinogens they generally used 'magic mushrooms' or tabs.

Use of the other illicit substances and steroids by secondary school students was rare and there had been little change in the prevalence of these substances between 1999 and 2002. The results suggest that any use of illicit substances, other than cannabis, by secondary school students was likely to be experimental rather than regular.

The decrease in the use of cannabis between 1999 and 2002 was partly responsible for the decrease in the proportion of students who had used any illicit substance. However, even when cannabis was excluded from our drug use index, there was a decrease in lifetime substance use among all students. This suggests that fewer students in 2002 were involved in any drug use than was the case in 1999. As inhalants were not included in this analysis, this decrease might reflect the drop in amphetamine use among younger students. Overall, this finding suggests that the proportion of students who were prepared to try illicit substances had decreased between 1999 and 2002.

In 2002, students who had used cannabis, hallucinogens, amphetamines and ecstasy in the 12 months preceding the survey were asked if they had used any other substances on the same occasion. The results showed that mixing substances was not uncommon among those students who had used these four illicit substances. Tobacco and alcohol were the substances most likely to be used when students were using cannabis, hallucinogens or ecstasy. This finding shows the importance of including these two substances in programs and campaigns designed to address the issue of illicit substance use among adolescents. Of some concern was the finding that over 10% of students who had used any amphetamines, hallucinogens or ecstasy in the past 12 months were increasing their risk of an adverse consequence by mixing them. Also of note is that students using amphetamines were more likely to use cannabis at the same time than tobacco.

Several limitations of this school based study need to be noted. First, schools were used as the basis for surveying adolescents. This means that students who did not remain in school past the age of 15 were excluded from the study, and that estimates for 16- to 17-year-olds are only generalisable to the population of students rather than to all adolescents aged 16–17 years. As adolescents who do not complete secondary school are more likely to use substances,¹¹ this study is likely to underestimate the prevalence of substance use among the population of 16–17-year-olds. In addition, it was possible that students with good school attendance were more likely to participate in the survey than students with poor attendance records. This selection bias may also mean that the results of this study tend towards underestimating prevalence. However, countering this bias, is the possibility that students, particularly younger students, may exaggerate their use of illicit substances, leading to slightly inflated estimates. While it must be acknowledged that this may be the case for the responses of some students in this study, as noted in our earlier report, previous work has indicated that the vast majority of students answer questionnaires of the type used in this study honestly.¹² Despite these limitations, we believe the data provide valuable information regarding the prevalence of substance use among Australian secondary school students.

In summary, the most widely and regularly used substances among Australian secondary school students in 2002 were the legal drugs: analgesics, alcohol and tobacco. In contrast to the prevalence estimates for the legal substances, the use

of illicit substances, except cannabis, was low. Although the decline in the proportion of students using cannabis we found between 1996 and 1999 continued into 2002, cannabis was still the most frequently used illicit substance. Prevalence rates for the use of amphetamines in 2002 were similar to those found in 1999, suggesting that the increase in the prevalence of amphetamine use between 1996 and 1999 has stopped. The proportion of students using hallucinogens decreased between 1999 and 2002. It was not uncommon for students to use several substances together – with alcohol, tobacco and cannabis being the substances most commonly mixed with hallucinogens, amphetamines or ecstasy. As in 1996 and 1999, use of substances such as cocaine, opiates, ecstasy or steroids was rare.

5. References

1. Collins D, Lapsley H. *Counting the cost: estimates of the social costs of drug abuse in Australia in 1998-9*. National Drug Strategy Monograph Series No. 49. Canberra: Commonwealth Department of Health and Ageing, 2002.
2. Letcher T, White V. *Australian secondary students' use of over-the-counter and illicit substances in 1996*. Monograph Series 33. Canberra: Commonwealth Department of Health and Aged Care, 1999.
3. Australian Institute of Health and Welfare. *2001 National Drug Strategy Household Survey: first results*. Canberra: AIHW (Drug Statistics Series No. 9), 2002. AIHW Cat No. PHE 35.
4. White V. *Australian secondary students' use of over-the-counter and illicit substances in 1999*. Monograph Series No. 46. Canberra: Commonwealth Department of Health and Aged Care, 2001.
5. Hill D, Wilcox S, Gardner G, Houston J. Tobacco and alcohol use among Australian secondary school children. *Medical Journal of Australia* 1987; 146: 125-130.
6. Hill D, White V, Pain M, Gardner G. Tobacco and alcohol use among Australian secondary school students in 1987. *Medical Journal of Australia* 1990; 152: 124-130.
7. Hill D, White V, Williams R, Gardner G. Tobacco and alcohol use among Australian secondary school students in 1990. *Medical Journal of Australia* 1993; 158: 228-234.
8. Hill D, White V, Segan C. Prevalence of cigarette smoking among Australian secondary school students in 1993. *Australian Journal of Public Health* 1995; 19: 445-449.
9. Hill D, White V, Letcher T. Tobacco use among Australian secondary students in 1996. *Australian and New Zealand Journal of Public Health* 1999; 23: 252-259.
10. Australian Bureau of Statistics. *Schools Australia 2000*. Canberra: Australian Bureau of Statistics, 1999. ABS Catalogue No. 4221.0.
11. Bachman J, Undsworth K, O'Malley P, Johnston L, Schulenberg J. *Smoking, drinking & drug use in young adulthood: the impacts of new freedoms and new responsibilities*. New Jersey: Laurence Erlbaum Assoc, 1997.
12. Cooney A, Dobbinson S, Flaherty B. *1992 survey of drug use by NSW secondary students*. NSW Drug and Alcohol Directorate, 1994. NSW State Health Publication No. (DAD) 93-166.

Appendix 1

Questionnaire - Victoria

SURVEY

- Please do not put your name on this paper.
- The information you give is private and will only be seen by the people putting all the answers together.
- Answer **every** question you can.
- If you can't answer a question or if you do not want to answer, leave it out and go on to the next one.
- For most questions, there is a choice of answers. Pick the one that's true for you and tick the box next to it.
- If you make a mistake or change your answer, cross out the mistake and tick the new response.
- Some questions ask you to write a short answer in the space provided.

Office use only

STATE	1	SCHOOL	ID	PCODE	LEVEL	CAMPUS
PATTERN		SCHSEX		STRATA	TEACH	DAY
ORDER	1	INITIALS		DATE	MONTH	CONSENT

1. (a) What suburb or town do you live in? _____

(b) What is the postcode of your address? _ _ _ _ _

2. What year level (or form) are you in?

1 Year 7

4 Year 10

2 Year 8

5 Year 11

3 Year 9

6 Year 12

3. How old are you now?

10 10

15 15

11 11

16 16

12 12

17 17

13 13

18 18

14 14

19 19 and over

4. What sex are you?

1 Male

2 Female

5. What is your date of birth? _ _ / _ _ / 19 _ _

6. During a normal week, how much money do you have available to spend on yourself? (eg from pocket money, part-time job).

1 None

5 \$41 - \$60

2 Less than \$10

6 \$61 - \$80

3 \$11 - \$20

7 Over \$80

4 \$21 - \$40

7. **At school work**, do you consider yourself:

1 A lot above average?

4 Below average?

2 Above average?

5 A lot below average?

3 Average?

8. (a) Were you at school on the last school day?

- 1 Yes **Go to QUESTION 9**
2 No **Go to QUESTION 8(b)**

(b) If No: Why were you away?

- 1 You were ill or had some other health problem
2 Study day or other school-related activities
3 Family reasons
4 Other (*specify*)

9. Are you of Aboriginal or Torres Strait Islander descent?

- 1 No
2 Yes - Aboriginal descent
3 Yes - Torres Strait Islander descent
4 Yes - both Aboriginal and Torres Strait Islander descent

10. What is the main language spoken at home? *Tick only one box.*

- 1 English
2 Another language only (*specify which language*)
3 English and another language
(*specify the other language*) _____

THE NEXT FEW QUESTIONS ARE ABOUT SMOKING CIGARETTES.

11. At the present time, do you consider yourself:

- 1 A heavy smoker? 4 An ex-smoker?
2 A light smoker? 5 A non-smoker?
3 An occasional smoker?

12. Have you ever smoked even part of a cigarette?

- 1 No 4 Yes, I have smoked more than 10 but
2 Yes, just a few puffs fewer than 100 cigarettes in my life
3 Yes, I have smoked fewer 5 Yes, I have smoked more than
than 10 cigarettes in my life 100 cigarettes in my life

13. Have you smoked cigarettes in the last **twelve months**?

1 Yes

2 No

14. Have you smoked cigarettes in the last **four weeks**?

1 Yes

2 No

15. This question is about the number of cigarettes you had during the last **seven days**, including yesterday.

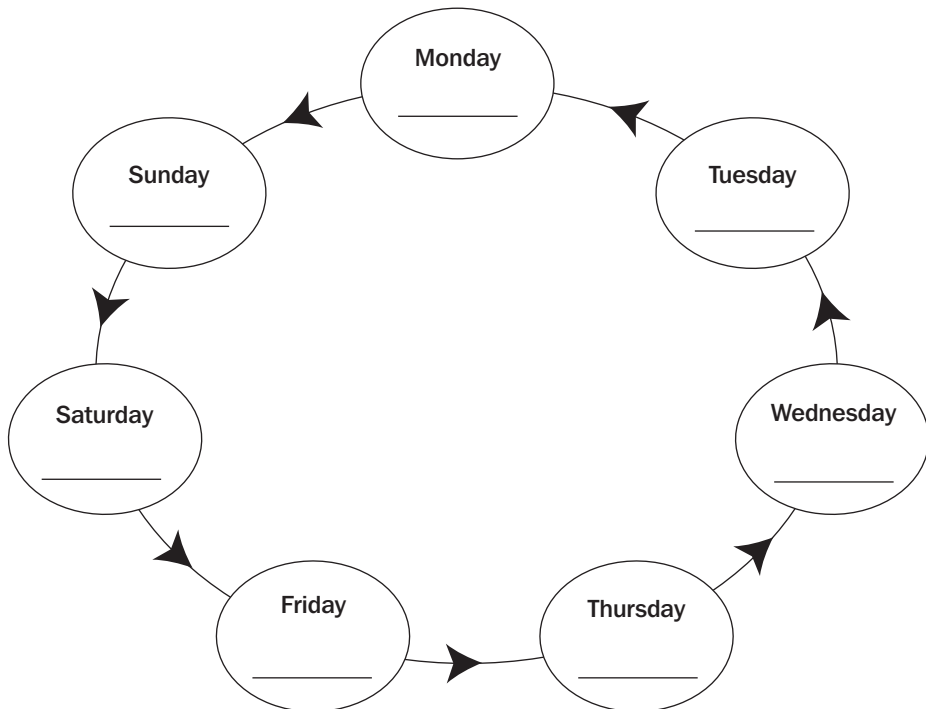
*Put a tick near **yesterday**. Then in the space provided, write the number of cigarettes you had yesterday. If you didn't smoke any cigarettes, put in '0'.*

Start filling in the spaces beginning with yesterday, and follow the arrows.

Answer for every day of the week.

Write the number of cigarettes you smoked each day in the circle.

Put '0' for each day you didn't smoke any cigarettes.



16. Do you think you will be smoking cigarettes this time next year?

- 1 Certain not to be smoking
- 2 Very unlikely to be smoking
- 3 Unlikely to be smoking
- 4 Can't decide how likely
- 5 Likely to be smoking
- 6 Very likely to be smoking
- 7 Certain to be smoking

17. Have you ever smoked even part of a cigar?

- 1 No
- 2 Yes, a few puffs but not as much as one cigar
- 3 Yes, I have smoked at least one cigar in my life

QUESTIONS 18, 19 AND 20 ARE ONLY FOR THOSE WHO HAVE SMOKED A CIGARETTE IN THE PAST WEEK.

IF YOU HAVE NOT SMOKED A CIGARETTE IN THE PAST WEEK, GO TO QUESTION 21.

18. (a) What brand of cigarettes do you usually smoke?

Tick the box near the brand you usually smoke. If that brand is not listed here, tick the box next to "Other" and write the name of the brand in the space provided.

- | | | | |
|-----------------------------|-----------------|-----------------------------|-----------------------|
| 01 <input type="checkbox"/> | Alpine | 10 <input type="checkbox"/> | Peter Jackson |
| 02 <input type="checkbox"/> | Benson & Hedges | 11 <input type="checkbox"/> | Sterling |
| 03 <input type="checkbox"/> | Dunhill | 12 <input type="checkbox"/> | Stradbroke |
| 04 <input type="checkbox"/> | Escort | 13 <input type="checkbox"/> | Vogue |
| 05 <input type="checkbox"/> | Fortune | 14 <input type="checkbox"/> | Wills Super Mild |
| 06 <input type="checkbox"/> | Holiday | 15 <input type="checkbox"/> | Winfield |
| 07 <input type="checkbox"/> | Horizon | 16 <input type="checkbox"/> | Freedom |
| 08 <input type="checkbox"/> | Longbeach | ** <input type="checkbox"/> | Other (specify) _____ |
| 09 <input type="checkbox"/> | Marlboro | | |

*You should have ticked only **one** box.*

(b) Do the cigarettes you usually smoke come from packets of...?

- 1 20s?
- 2 25s?
- 3 30s?
- 4 35s?
- 5 40s?
- 6 50s?

*You should have ticked only **one** box.*

19. (a) Where, or from whom, **did you get** the **last** cigarette that you smoked?

Fill in the space beside "Other" if you can't find your answer.

*Tick only **one** box.*

- | I didn't buy it | OR | I bought it |
|---|-----------------------------|--|
| 01 <input type="checkbox"/> My parent(s) gave it to me | 51 <input type="checkbox"/> | At a hotel, pub, bar, tavern, RSL Club |
| 02 <input type="checkbox"/> My brother or sister gave it to me | 52 <input type="checkbox"/> | At a supermarket |
| 03 <input type="checkbox"/> I took it from home without my parent(s) permission | 53 <input type="checkbox"/> | At a newsagency |
| 04 <input type="checkbox"/> Friends gave it to me | 54 <input type="checkbox"/> | At a milk bar or delicatessen |
| 05 <input type="checkbox"/> I got someone to buy it for me | 55 <input type="checkbox"/> | At a convenience store (eg Food Plus) |
| ** <input type="checkbox"/> Other _____ | 56 <input type="checkbox"/> | At a tobacconist/tobacco shop |
| | 57 <input type="checkbox"/> | At a take-away food shop |
| | 58 <input type="checkbox"/> | At a petrol station |
| | ** <input type="checkbox"/> | Other _____ |

*You should have ticked only **one** box.*

(b) If you bought your last cigarette, was it from a coin-operated (vending) machine?

- 1 Yes
- 2 No

20. (a) Sometimes people break open a packet of cigarettes and sell single cigarettes. In the last **four weeks**, have you **bought** cigarettes that were **not in a full packet** (for example, buying one or more cigarette(s) at a time)?

1 Yes **Go to QUESTION 20(b)**

2 No **Go to QUESTION 21**

(b) Thinking of the last time you **bought** cigarettes that were **not in a full packet**, who did you buy the cigarette(s) from?

1 I bought the cigarette(s) at a shop

2 I bought the cigarette(s) from a friend or relative

3 I bought the cigarette(s) from someone else

THESE QUESTIONS ARE FOR EVERYONE AND ARE ABOUT DRINKING ALCOHOL - BEER, WINE, WINE COOLERS, ALCOHOLIC SODAS, SPIRITS, LIQUEURS, ALCOHOLIC APPLE CIDER, SHERRY OR PORT.

21. At the present time, do you consider yourself:

1 A non-drinker?

2 An occasional drinker?

3 A light drinker?

4 A party drinker?

5 A heavy drinker?

22. Have you **ever** had even part of an alcoholic drink?

1 No

2 Yes, just a few sips

3 Yes, I have had fewer than 10 alcoholic drinks in my life

4 Yes, I have had more than 10 alcoholic drinks in my life

23. Have you had an alcoholic drink in the last **twelve months**?

1 Yes

2 No

24. Have you had an alcoholic drink in the last **four weeks**?

1 Yes

2 No

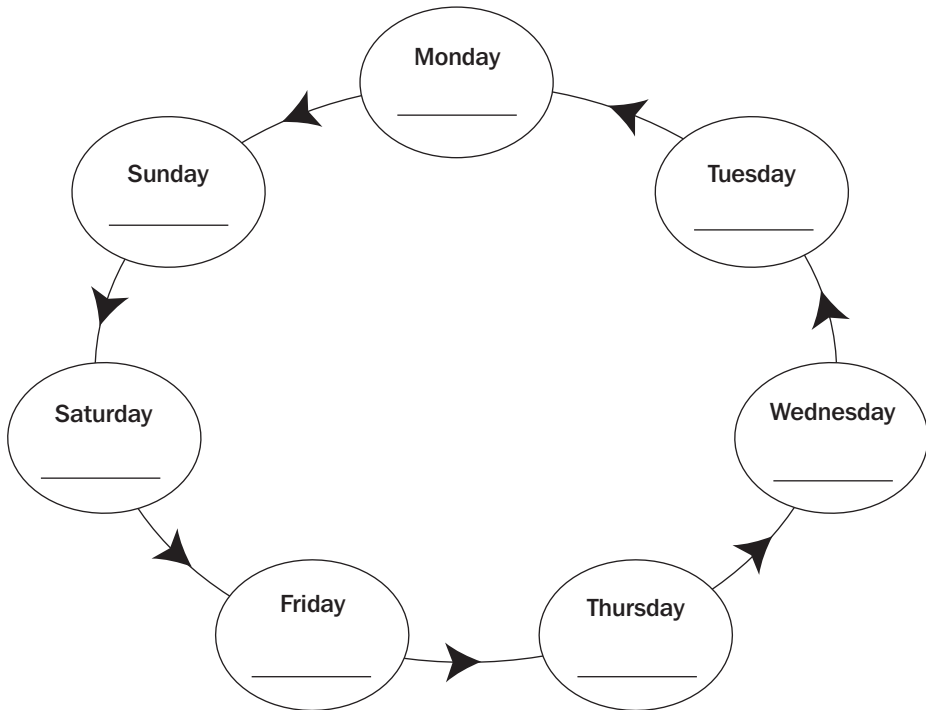
25. This question is about the number of alcoholic drinks you had during the last **seven days**, including yesterday.

*Put a tick near **yesterday**. Then in the space provided, write the number of alcoholic drinks you had yesterday. If you didn't have any alcoholic drinks, put in '0'. Start filling in the spaces beginning with yesterday, and follow the arrows.*

Answer for every day of the week.

Write the number of alcoholic drinks you had each day in the circle.

Put '0' for each day you didn't drink any alcoholic drinks.



QUESTIONS 26, 27, 28 AND 29 ARE FOR ANYONE WHO HAS HAD AN ALCOHOLIC DRINK.

IF YOU HAVE NEVER HAD AN ALCOHOLIC DRINK, GO TO QUESTION 30.

26. What alcoholic drink do you usually have?

*Tick the box near the drink you **usually** have. If that drink is not listed here, tick the box next to "Other" and write the name of the drink in the space provided.*

- 01 Ordinary beer
- 02 Low alcohol beer
- 03 Wine
- 04 Wine Cooler (eg West Coast Coolers)
- 05 Champagne or sparkling wine (eg Spumante, Passion Pop)
- 06 Alcoholic Apple Cider (eg Strongbow)
- 07 Alcoholic sodas (eg Two Dogs)
- 08 Premixed spirits (eg Bacardi Breezer, Lemon Ruski, UDL Drinks, Sub Zero)
- 09 Spirits (eg rum, brandy, whisky, gin, vodka)
- 10 Liqueurs (eg Tia Maria, Kahlua, Midori, etc)
- ** Other (*specify*)

*You should have ticked only **one** box.*

27. Where, or from whom, **did you get** your **last** alcoholic drink?

Fill in the space beside "Other" if you can't find your answer.

*Tick only **one** box.*

- | I didn't buy it | | OR | I bought it | |
|-----------------------------|--|-----------|-------------------------|---|
| 01 | <input type="checkbox"/> My parent(s) gave it to me | | 51 | <input type="checkbox"/> At a hotel, pub, bar, tavern, RSL Club |
| 02 | <input type="checkbox"/> My brother or sister gave it to me | | 52 | <input type="checkbox"/> At a licensed liquor store or supermarket |
| 03 | <input type="checkbox"/> I took it from home without my parent(s) permission | | 53 | <input type="checkbox"/> At a walk in bottle-shop at a pub or hotel |
| 04 | <input type="checkbox"/> Friends gave it to me | | 54 | <input type="checkbox"/> At a drive-in bottle-shop |
| 05 | <input type="checkbox"/> I got someone to buy it for me | | 55 | <input type="checkbox"/> At a restaurant |
| ** | <input type="checkbox"/> Other _____ | | 56 | <input type="checkbox"/> At a dance venue/dance party |
| | | | 57 | <input type="checkbox"/> At a nightclub |
| | | | 58 | <input type="checkbox"/> At a sporting event |
| | | | 59 | <input type="checkbox"/> At a sports club (eg Leagues, surfing, football) |
| | | | 60 | <input type="checkbox"/> Through the Internet |
| | | | 61 | <input type="checkbox"/> By phone, fax, mail order |
| | | | ** | <input type="checkbox"/> Other _____ |

*You should have ticked only **one** box.*

28. **Where** did you drink your **last** alcoholic drink?

Fill in the space beside "Other" if you can't find your answer.

Tick only **one** box.

I drank it

- 01 At a beach, park or recreation area
- 02 At a hotel, pub, bar, tavern or RSL club
- 03 At a dance venue/dance party
- 04 At a nightclub
- 05 At a party
- 06 At a restaurant
- 07 At a sporting event
- 08 At a sports club (eg Leagues, surfing, football)
- 09 On school grounds during school hours
- 10 On school grounds after hours
- 11 At my home
- 12 At my friend's home
- 13 In a car
- ** Other (*specify*)

You should have ticked only **one** box.

29. Think back over the last **two weeks**. How many times, if any, have you had the following number of alcoholic drinks on any one occasion when you have been drinking in the last two weeks?

	None	Once	Twice	3-6 times	7-9 times	10 or more times
(i) 11 or more drinks in a row	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
(ii) 7 or more drinks in a row	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
(iii) 5 or more drinks in a row	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>

THE NEXT QUESTIONS ARE FOR EVERYONE AND ARE ABOUT OTHER THINGS YOU MIGHT USE.

For **each** substance, tick the box which shows how many times you have used the substance during the specified time period. There should only be **one** tick for **each** line of boxes.

30. How many times, if ever, have you used or taken pain killers/analgesics such as Disprin, Panadol or Aspro, **for any reason**:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

31. How many times, if ever, have you used or taken sleeping tablets, tranquillisers or sedatives, such as Valium, Serepax or Rohypnol (rohies, barbs) **other than for medical reasons**:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

32. (a) How many times, if ever, have you smoked or used marijuana/cannabis (grass, hash, dope, weed, mull, yarndi, ganga, pot, a bong, a joint):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used marijuana/cannabis in the last year, go to QUESTION 33.

(b) In the **last year**, did you use any other substance or substances **on the same occasion that you used** marijuana/cannabis?

Tick **all** that apply.

- 01 I did not use any other substance on the same occasion
- 02 Ecstasy (XTC, E, MDMA, ecci, X, bickies)
- 03 Amphetamines (eg speed, uppers, goey, MDA, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)
- 04 Hallucinogens (eg LSD, acid, trips, magic mushrooms)
- 05 Pain killers/analgesics
- 06 Sedatives/tranquillisers/sleeping tablets
- 07 Alcohol
- 08 Tobacco
- ** Other (*what substance?*)

You should have ticked **all** that apply.

(c) When you use cannabis (marijuana) do you usually:

Tick **only one** box

- 1 Smoke it as a joint (reefer, spliff)?
- 2 Smoke it from a bong or a pipe?
- 3 Eat it (eg in hash cookies)?
- 4 Other (*specify*)

You should have ticked **only one** box.

(d) Do you usually use cannabis (marijuana) by yourself or with others?

- 1 By myself
- 2 With others
- 3 By myself and with others about equally often

(e) **Where** did you last use cannabis?

Fill in the space beside "**Other**" if you can't find your answer

I used it....

- 01 At a hotel, pub, bar, tavern or RSL club
- 02 At a dance venue, dance party, rave
- 03 At a nightclub
- 04 At a party
- 05 At my home
- 06 At my friend's home
- 07 At a sports club (eg Leagues, surfing, football)
- 08 At the beach
- 09 In a park
- 10 In a car
- 11 On school grounds during school time
- 12 On school grounds after hours
- ** Other (*specify*)

You should have ticked only **one** box.

33. How many times, if ever, have you used or taken steroids, (muscle, roids, or gear) **without a doctor's prescription** in an attempt to make you better at sport, to increase muscle size or to improve your general appearance:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

34. How many times, if ever, have you deliberately sniffed (inhaled) from spray cans or sniffed things like glue, paint, petrol or thinners in order to get high or for the way it makes you feel:

This does not include sniffing white-out, liquid paper, textas or pens.

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

35. (a) How many times, if ever, have you used or taken amphetamines (eg speed, uppers, MDA, goey, dex, dexies, dexamphetamine, ox blood, methamphetamine, ice) **other than for medical reasons**:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used amphetamines in the last year, go to QUESTION 36(a).

(b) In the **last year**, did you use any other substance or substances **on the same occasion that you used** amphetamines (eg speed, uppers, MDA, goey, dex, dexies, dexamphetamine, ox blood, methamphetamine, ice)?

Tick **all** that apply.

- 01 I did not use any other substance on the same occasion
- 02 Ecstasy (XTC, E, MDMA, ecci, X, bickies)
- 03 Marijuana/cannabis
- 04 Hallucinogens (eg LSD, acid, trips, magic mushrooms)
- 05 Pain killers/analgesics
- 06 Sedatives/tranquillisers/sleeping tablets
- 07 Alcohol
- 08 Tobacco
- ** Other (*what substance?*)

You should have ticked **all** that apply

36. (a) How many times, if ever, have you used or taken ecstasy or XTC (E, MDMA, ecci, X, bickies):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used ecstasy in the last year, go to QUESTION 37.

(b) In the **last year**, did you use any other substance or substances **on the same occasion that you used** ecstasy (XTC, E, MDMA, ecci, X, bickies):

*Tick **all** that apply.*

- 01 I did not use any other substance on the same occasion
- 02 Marijuana/cannabis
- 03 Amphetamines (eg speed, uppers, goey, MDA, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)
- 04 Hallucinogens (eg LSD, acid, trips, magic mushrooms)
- 05 Pain killers/analgesics
- 06 Sedatives/tranquillisers/sleeping tablets
- 07 Alcohol
- 08 Tobacco
- ** Other (*what substance?*)

*You should have ticked **all** that apply.*

37. How many times, if ever, have you used or taken cocaine:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

38. How many times, if ever, have you used or taken heroin (smack, horse, skag, hammer, H), or other opiates (narcotics) such as methadone, morphine or pethidine **other than for medical reasons**:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

39. (a) How many times, if ever, have you used or taken hallucinogens (eg LSD, acid, trips, magic mushrooms, datura, angel's trumpet):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime ?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used hallucinogens in the last year, go to QUESTION 40.

(b) In the **last year**, what forms of hallucinogens did you use?

Tick all that apply.

- 1 Tablets
- 2 Paper tabs
- 3 Liquids
- 4 Magic mushrooms
- 5 Datura / Angel's trumpet
- 6 Other (*please write in*)

- (c) In the **last year**, did you use any other substance or substances **on the same occasion that you used** hallucinogens (eg LSD, acid, trips, magic mushrooms, datura, angel's trumpet)?

Tick **all** that apply.

- 01 I did not use any other substance on the same occasion
- 02 Ecstasy (XTC, E, MDMA, ecci, X, bickies)
- 03 Amphetamines (eg speed, uppers, goey, MDA, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)
- 04 Marijuana/cannabis
- 05 Pain killers/analgesics
- 06 Sedatives/tranquillisers/sleeping tablets
- 07 Alcohol
- 08 Tobacco
- ** Other (*what substance?*)

You should have ticked **all** that apply.

THESE QUESTIONS ARE FOR EVERYONE.

40. **During 2001** (last year), did you have any lessons or parts of lessons at school that were about **smoking**?

- 1 No, not even part of a lesson
- 2 Yes, part of a lesson
- 3 Yes, one lesson
- 4 Yes, more than one lesson

41. **During 2001** (last year), did you have any lessons or parts of lessons at school that were about **drinking**?

- 1 No, not even part of a lesson
- 2 Yes, part of a lesson
- 3 Yes, one lesson
- 4 Yes, more than one lesson

42. **During 2001** (last year), did you have any lessons or parts of lessons at school that were about **illicit drugs** such as marijuana, ecstasy, heroin, amphetamines, hallucinogens, cocaine?

- 1 No, not even part of a lesson
- 2 Yes, part of a lesson
- 3 Yes, one lesson
- 4 Yes, more than one lesson

*Remember, **last** year was 2001.*

THE NEXT FEW QUESTIONS ARE ABOUT SOME OTHER TOPICS.

43. You only get skin cancer if you get burnt often.

- 1 True
- 2 False

44. Most skin cancer is caused by ultraviolet radiation (UVR) from the sun.

- 1 True
- 2 False

45. **During 2001** (that is **last year**), did you have any lessons or parts of lessons at school that were about **skin cancer** or **protection from the sun**?

- 1 No, not even part of a lesson
- 2 Yes, part of a lesson
- 3 Yes, one lesson
- 4 Yes, more than one lesson

46. Over the **last** summer, did you get sunburn that was sore or tender the next day?

- 1 Yes, just once
- 2 Yes, 2 or 3 times
- 3 Yes, 4 or more times
- 4 No, not at all

47. (a) Have you **ever** had severe sunburn, which has blistered?

1 Yes **Go to QUESTION 47(b)**

2 No **Go to QUESTION 48**

(b) **If yes**, how long ago was the last time you were severely sunburnt?

1 Last summer

2 1 to 2 years ago

3 More than 2 years ago

48. What type of hat do you most often wear on a sunny day in summer?

1 Wide brimmed hat

2 Narrow brimmed hat

3 Legionnaire hat

4 Cap

5 Sun-visor

6 Other (*what kind?*)

7 None

49. What is the SPF (Sun Protection Factor) of the sunscreen you usually use on a sunny day in summer?

1 I don't use sunscreen

2 SPF 12 or lower

3 SPF 15

4 SPF 30+

5 Can't remember / don't know

50. Suppose your skin was exposed to **strong** sunshine at the **beginning** of summer with no protection at all. If you stayed in the sun for 30 minutes, would your skin:

1 Just burn or go red

2 Burn or go red first, then tan afterwards

3 Just tan

4 Nothing would happen because I was born with dark skin

51. Do you like to get a suntan?

- 1 No
- 2 Yes, a light tan
- 3 Yes, a moderate tan
- 4 Yes, a dark tan
- 5 Yes, a very dark tan

52. **Thinking about sunny days in summer, when you are outside for an hour or more between 11 am and 3 pm, how often would you:**

- | | Never | Rarely | Sometimes | Usually | Always |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| (i) Wear a hat? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| (ii) Wear clothes covering most of your body (including arms and legs)? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| (iii) Deliberately wear less or briefer clothing so as to get some sun on your skin? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| (iv) Wear maximum protection sunscreen (SPF 30+)? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| (v) Wear sunglasses? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| (vi) Stay mainly in the shade? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

Thinking about sunny days in summer between 11 am and 3 pm:

- | | Never | Rarely | Sometimes | Usually | Always |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| (vii) How often would you spend most of the time inside ? | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

Appendix 2: Substances used by secondary students in 1999 and 2002

Table 2A.1: Proportion of students surveyed indicating they had ever used each of the different substances asked about in the survey in 2002 and 1999 in three age groups (12–13-year-olds; 14–15-year-olds and 16–17-year-olds).

	2002			1999		
	12–13 %	14–15 %	16–17 %	12–13 %	14–15 %	16–17 %
Analgesics	93	96	97	95	97	98
Alcohol	81	91	94	82	91	94
Tobacco	29	51	63	36	58	69
Cannabis	11	28	39	14	33	46
Inhalants	25	21	14	32	27	17
Tranquilisers	14	17	18	15	19	22
Amphetamines	3	7	10	4	7	11
Hallucinogens	2	5	6	3	7	11
Ecstasy	2	5	7	3	4	6
Opiates	2	3	3	3	4	5
Cocaine	2	4	4	3	4	4
Steroids	3	3	3	3	3	2

Table 2A.2: Proportion of students surveyed indicating that in the past month they had used each of the different substances asked about in the survey in 2002 and 1999 in three age groups (12–13-year-olds; 14–15-year-olds and 16–17-year-olds).

	2002			1999		
	12–13 %	14–15 %	16–17 %	12–13 %	14–15 %	16–17 %
Analgesics	66	72	73	67	74	75
Alcohol	31	54	68	31	52	70
Tobacco	8	20	28	13	26	34
Cannabis	5	13	17	6	17	20
Inhalants	14	9	4	16	11	5
Tranquillisers	3	4	5	4	4	5
Amphetamines	2	3	4	2	3	4
Hallucinogens	1	2	2	1	2	3
Ecstasy	1	2	2	1	2	3
Opiates	1	1	1	1	1	1
Cocaine	1	2	1	1	1	1
Steroids	1	1	1	1	1	1