

Drug Use Among Ontario Students

DETAILED
OSDUS
FINDINGS



1977-2003



Centre
for Addiction and
Mental Health
Centre de
toxicomanie et
de santé mentale

EDWARD M. ADLAF
ANGELA PAGLIA

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The 2003 OSDUS Drug Report Executive Summary

The Centre for Addiction and Mental Health's *Ontario Student Drug Use Survey (OSDUS)*, is the longest ongoing school survey of adolescents in Canada. The study, which spans over two decades, is based on 14 surveys conducted every two years since 1977. In the spring of 2003, 6,616 students (72% of selected students) in grades 7 to 12 from 37 school boards, 126 schools and 383 classes participated in the survey administered by the Institute for Social

Research, York University. This report describes drug use in 2003 and changes since 1977. Data are provided for two groups of students: those in grades 7 to 12, and those in grades 7, 9, and 11 only. The first group is used to assess current and short-term drug use trends (1999-2003), and the second is used to assess long-term trends (1977-2003). All data are based on self-reports derived from anonymous questionnaires administered in classrooms.

Past Year Drug Use (%) by Total, Sex, and Grade, 2003 OSDUS

	Total	Males	Females		G7	G8	G9	G10	G11	G12	
<i>Alcohol</i>	66.2	68.3	64.3	*	39.1	48.9	65.1	75.1	79.9	82.5	*
<i>Cannabis</i>	29.6	30.9	28.3		6.2	10.7	27.9	35.9	45.0	44.8	*
<i>Binge Drinking</i>	26.5	29.4	23.8	*	5.8	7.7	23.5	29.8	40.9	45.2	*
<i>Cigarettes</i>	19.2	18.0	20.3		4.4	10.2	17.0	21.8	28.3	30.2	*
<i>Hallucinogens</i>	10.0	12.1	8.0	*	1.8	2.6	7.8	12.5	17.4	15.3	*
<i>Solvents</i>	6.1	5.9	6.3		10.2	9.5	6.5	4.2	3.6	3.9	*
<i>Stimulants (NM)</i>	5.8	4.7	6.7	*	1.6	3.7	5.6	6.6	8.2	7.8	*
<i>Cocaine</i>	4.8	5.4	4.3		3.1	1.9	4.9	4.6	6.9	6.7	*
<i>Ecstasy (MDMA)</i>	4.1	4.2	3.9		0.5	0.8	3.7	4.6	6.6	7.2	*
<i>Methamphetamine</i>	3.3	3.8	2.9		1.0	0.9	3.8	4.2	5.4	3.6	*
<i>LSD</i>	2.9	3.5	2.3	*	0.7	1.1	3.7	4.2	4.0	2.7	*
<i>Ritalin (NM)</i>	2.9	3.4	2.5		1.2	1.2	3.0	3.3	5.0	3.1	*
<i>Glue</i>	2.8	3.0	2.6		5.2	3.2	2.4	2.4	2.3	1.8	*
<i>Crack</i>	2.7	2.8	2.6		1.7	1.7	3.1	3.0	3.6	2.5	
<i>Barbiturates (NM)</i>	2.5	2.6	2.5		1.8	2.2	3.0	2.8	3.1	1.8	
<i>PCP</i>	2.2	2.9	1.6	*	1.3	0.8	2.1	3.6	2.6	2.7	*
<i>Tranquillizers (NM)</i>	2.2	2.7	1.8	*	0.6	1.2	1.8	2.4	4.1	2.7	*
<i>Ketamine</i>	2.2	3.0	1.6	*	1.0	s	1.7	1.6	4.7	3.7	*
<i>Rohypnol</i>	1.6	1.7	1.5		1.2	1.2	1.4	2.0	2.3	1.3	
<i>Heroin</i>	1.4	1.9	0.9	*	1.4	0.8	1.5	2.0	1.3	1.1	
<i>Ice</i>	1.2	1.3	1.0		1.2	0.8	1.3	1.0	1.1	1.5	
<i>GHB</i>	0.7	0.8	0.6		s	s	s	0.9	1.7	s	
<i>Any Illicit, including cannabis</i>	32.2	33.1	31.3		10.1	13.9	29.6	38.6	47.5	47.1	*
<i>Any Illicit, excluding cannabis</i>	15.3	16.6	14.2	*	6.6	8.0	13.0	18.0	21.7	22.3	*
<i>Steroids (lifetime)</i>	3.0	4.4	1.7	*	0.7	1.8	1.6	3.8	4.6	5.3	*

Notes: binge drinking (5+ drinks on one occasion) refers to the past 4 weeks time period; NM=non-medical use; s=estimate suppressed; * indicates a significant a sex difference, or grade differences (p<.05), *not* controlling for other factors.

2003 Subgroup Differences (G7-12)

- ❑ Males are more likely than females to use 7 drugs: alcohol, LSD, PCP, other hallucinogens, tranquilizers, Ketamine, and heroin. Males are also more likely to binge drink, and generally to use any illicit drug, excluding cannabis. Females are more likely to use stimulants (e.g., diet pills).
- ❑ Drug use varies by grade. With the exception of inhalants (glue and solvents) – which declines by grade level – drug use is lowest among 7th-graders and highest among 11th- and 12th-graders. A prominent grade pattern reflects a sizeable jump in the likelihood of drug use between grade 8 and grade 9.
- ❑ Regional differences exist for 5 drug use measures (cigarette smoking, binge drinking, use of stimulants, hallucinogens, and Ritalin). Students from Toronto are least likely to use these drugs, whereas Northern students are most likely. Students from the East and West do not differ from the province as a whole.

Changes Between 2001 and 2003 (G7-12)

The escalating trend in drug use, which began in the early 1990s, has generally subsided.

Between 2001 and 2003, the past year use of 5 measures significantly decreased:

- ❑ Cigarettes: from 23.1% to 19.2%
- ❑ Ecstasy: from 6.0% to 4.1%
- ❑ LSD: from 4.8% to 2.9%
- ❑ Barbiturates: from 4.0% to 2.5%
- ❑ The use of any illicit drug, excluding cannabis, also declined, from 18% to 15%.

Short-Term Changes, 1999 – 2003 (G7-12)

There have been significant changes in drug use between 1999 and 2003, most of which have been declines:

- ❑ Cigarettes: from 28% to 19%
- ❑ LSD: from 6.8% to 2.9%
- ❑ Hallucinogens: from 12.8% to 10.0%
- ❑ Methamphetamine: from 5.0% to 3.3%
- ❑ Barbiturates: from 4.4% to 2.5%
- ❑ Use of any illicit drug, excluding cannabis, significantly decreased between 1999 (20%) and 2003 (15%).
- ❑ Cocaine use *increased* over the short-term, from 3.4% in 1999 to 4.8% in 2003.

Subgroup Changes, 1999 – 2003 (G7-12)

With the exception of cannabis use (which increased among females); cocaine use (which increased among 12th-graders, and Northern students); and crack use (which increased among Northern students), most subgroup changes between 1999 and 2003 show decreases in use.

- ❑ Sex: Males show decreases in cigarette smoking, use of methamphetamine, LSD, ecstasy, and any illicit drug (excluding cannabis). No drug increased among males. Females show decreases in cigarette smoking, use of barbiturates, LSD, and any illicit drug (excluding cannabis).
- ❑ Grade: Among 8th-graders, 5 drug use measures declined (cigarettes, LSD, other hallucinogens, ecstasy, and any illicit drug excluding cannabis); 4 declined among 9th-graders (cigarettes, LSD, ecstasy, and any illicit drug excluding cannabis); 5 declined among 10th-graders (cigarettes, barbiturates, LSD, other hallucinogens, and any illicit drug); 3 declined among 11th-graders (cigarettes, LSD, and any illicit drug)

excluding cannabis); and 2 declined among 12th-graders (methamphetamine and LSD).

- ❑ **Region:** There were 4 decreases among students in Northern Ontario (cigarettes, barbiturates, LSD, and any illicit drug excluding cannabis). In Western Ontario, cigarette smoking, use of LSD, ecstasy, and any illicit drug decreased. In Eastern Ontario, cigarette smoking, LSD use and any illicit drug use declined. No short-term changes occurred among Toronto students.

Long-Term Changes, 1977 – 2003 (G7, 9, 11 only)

There are 5 general patterns that describe the long-term trends in drug use:

1) Decreased during the 1980s, Increased during the 1990s, Currently Stable, but Elevated:

Alcohol
Binge Drinking
Inhalants
Cannabis
Ecstasy
Hallucinogens

2) Decreased during the 1980s, Increased during the 1990s, Currently on a Downward Trend:

Cigarettes
LSD

3) Decreased during the 1980s, Upward movement during the 1990s:

Cocaine
Crack

4) Decreased during the 1980s, Stable during the 1990s:

Stimulants
Tranquillizers
Barbiturates

5) Low and Stable:

Heroin
PCP
Methamphetamines

Other Highlights

Patterns of Use

- ❑ About two-thirds (68%) of students have not used any illicit drug, including cannabis, in the past year. Conversely, 32% of students have used an illicit drug, including cannabis.
- ❑ About one-third (30%) of students do not consume any substance, including alcohol or tobacco, and another third (31%) consume only alcohol.
- ❑ One-in-ten (10%) students report using alcohol, tobacco, cannabis *and* at least one illicit drug.
- ❑ The percentage reporting first-time drug use during the past year is as follows: 19% for alcohol, 10% for cannabis, 9% for cigarettes, and 5% for illicit drugs other than cannabis.

Age of First Use

- ❑ The average age at which students smoke their first whole cigarette is currently about age 13. This average age has increased since the early 1980s, when it was age 11.
- ❑ The average age of first alcohol use is about age 13, and has not showed any major fluctuations over the past two decades.
- ❑ The average age of first cannabis use is currently about 14. Historically, this onset age increased throughout the 1980s and early 1990s, and then decreased again in recent years.

Perceptions of Risk and Disapproval

- ❑ Among the drug behaviours surveyed, students felt that the greatest risk of harm is associated with regular marijuana use (55%), followed by trying ecstasy (40%), trying cocaine (34%), trying LSD (32%), daily drinking (31%), smoking 1 or 2 cigarettes daily (24%), and trying cannabis (19%).
- ❑ Compared to 2001, there was a significant increase in 2003 in the perception of great risk in trying ecstasy (32% vs 40%). There was also a parallel increase in the percentage that strongly disapproves of trying ecstasy (39% vs 49%).
- ❑ Since the early 1990s, risk perceptions surrounding most substance use (except ecstasy) have gradually weakened, especially regarding cannabis.

Availability of Drugs

- ❑ In 2003, the substances most available to students are alcohol (66% of students indicated that it would be “easy” or “very easy” to get) and cannabis (51%). Cocaine (21%), ecstasy (20%) and LSD (16%) are reported as less available.
- ❑ The reported availability of LSD significantly decreased between 1999 (25%) and 2003 (16%). Similarly, the availability of ecstasy significantly decreased between 2001 (27%) and 2003 (20%).
- ❑ The reported availability of cannabis, as well as cocaine, has significantly increased since 1989.

School and Neighbourhood

- ❑ About half (53%) of students believe that drug use in their school is higher today than a few years ago (16% stated it was the same and 31% said it was lower).

- ❑ About one-quarter (28%) of students believe that drug use is a big problem in their school, while about half (51%) say it is a small problem and 21% say it is not a problem.
- ❑ About one-third (32%) of students report exposure to drug selling in their neighbourhood in the past year. The proportion of students observing drug selling in their neighbourhood has significantly increased since 1995.
- ❑ Just over one-third (37%) report that someone tried to sell them drugs in the past year.

Cigarettes Overview

- ❑ In 2003, 19% of students report smoking during the past year (about 185,100 students). Over their lifetime, 57% of students have never smoked, 15% smoked a few puffs only, while 10% smoked 100 or more cigarettes in their lifetime.
- ❑ Past year smoking does not differ between males and females. There are significant differences by grade (varying from 4% of 7th-graders to 30% of 12th-graders). There are also regional differences, with Northern students (24%) most likely to smoke, while Toronto students (16%) are least likely.
- ❑ About 14% of students smoke on a daily basis. On average, smokers consume 5 cigarettes daily.
- ❑ About one-quarter (23%) of smokers report dependence on cigarettes, as defined by smoking within 30 minutes of waking in the morning.
- ❑ In 2003, 62% of all smokers reported an attempt to quit smoking during the year before the survey.
- ❑ In 2003, 9% of underage students (under 19 years of age) successfully purchased

cigarettes at least once during the month before the survey.

Alcohol Overview

- ❑ In 2003, about two-thirds (66%) of all students report drinking during the past year, and 69% report drinking during their lifetime. Males are more likely to drink than are females (68% vs 64%). Past year drinking varies by grade (increasing from 39% of 7th-graders to about 80% of 11th- and 12th-graders). There are no significant regional differences.
- ❑ In 2003, 18% of drinkers (12% of all students) drink alcohol at least once a week, and less than 1% drink on a daily basis.
- ❑ About one-quarter (26%) of students report binge drinking (5+ drinks on one occasion) at least once during the month before the survey. A similar proportion (24%) report getting drunk at least once during this time.
- ❑ Also, about 15% of drinkers report binge drinking 2 to 3 times during the month before the survey, and another 10% report doing so four or more times.

Cannabis Overview

- ❑ Just under one-in-three (30%) students used cannabis in the past year, and 34% report using at least once in their lifetime. Cannabis use does not significantly differ between males (31%) and females (28%), nor by region. Use does significantly differ by grade (from 6% of 7th-graders to 45% of 11th- and 12th-graders).
- ❑ On average, cannabis users consumed cannabis 16 times during the year before the survey. About 14% of users (4% of all students) used cannabis daily during the month before the survey.

- ❑ Use of cannabis 6 or more times in the past year, as well as daily cannabis use, have been on an upward trend since 1989.
- ❑ One-in-ten (10%) cannabis users report a significant level of dependence symptoms.

Consequences and Problems Related to Alcohol and Other Drug Use

Drugs and Vehicles

- ❑ About one-in-seven (14%) licensed drivers in grades 10 to 12 report driving within an hour of consuming two or more drinks. The percentage drinking and driving remained stable between 2001 and 2003. However, drinking and driving among students has significantly declined since 1977.
- ❑ About one-in-five (20%) drivers in grades 10 to 12 reported driving a vehicle within one hour of using cannabis during the past year. Thus, the percentage of drivers reporting cannabis and driving is slightly higher than the percentage reporting drinking and driving.
- ❑ About one-quarter (29%) of students in grades 7 to 12 report being a passenger in a vehicle driven by someone who had been drinking alcohol, and 23% report being a passenger in a vehicle driven by someone who had been using drugs prior to driving.

Alcohol Problems

- ❑ In 2003, 19% of students (27% of drinkers) report drinking at hazardous levels, a percentage representing some 186,700 students. Hazardous drinking varies significantly between males and females (21% vs 17%), and by grade (4% of 7th-graders to 33% of 12th-graders). There is no significant difference by region.

Drug Problems

- ❑ Just under one-in-five (18%) students report symptoms of a drug use problem. There is no significant sex or regional difference regarding drug use problems. However, there is a significant grade difference: reports are lowest among 7th- and 8th-graders (about 7%) and highest among 11th- and 12th-graders (about 27%).
- ❑ In 2003, 1.4% of students indicated that they received either alcohol and/or drug treatment in the past year. This estimate represents about 13,100 Ontario students in grades 7 to 12.

Coexisting Hazardous Drinking and Elevated Psychological Distress

- ❑ About one-in-twelve (8% or 81,100 Ontario students) report both hazardous drinking and elevated psychological distress (i.e., symptoms of anxiety and depression).
- ❑ Females are more likely than males to report these coexisting problems (10% vs 6%). There is significant variation by grade: from 2% of 7th-graders increasing to 13% of 11th- and 12th-graders. There is no significant regional variation.

Health Objectives

Two health objectives, recently established by health authorities, are related to the *OSDUS*.

The first, regarding cigarette smoking, recommends that teen smoking should not exceed 10% by 2005. The 2003 *OSDUS* found that about 14% of students in grades 7 to 12 smoke cigarettes on a daily basis.

The second, regarding alcohol and illicit drug use, recommends that the percentage of adolescents who use *no* alcohol or illicit drugs in the past 30 days should be 89% or higher by the year 2010. The 2003 *OSDUS* found that only 50% of students in grades 7 to 12 did not use

alcohol or cannabis during the month before the survey.

Although monitoring surveys such as the *Ontario Student Drug Use Survey* are effective in identifying trends in drug use, they are not designed to identify the root causes of such change. The importance of such studies, however, remains critical. They provide scientifically-based, timely data which, not only informs policy-makers and prevention programmers, but provide relevant monitoring data needed to evaluate the successes and failures of public health objectives, and prevention programs and campaigns.

Résumé – SCDEO 2003

Le *Sondage sur la consommation de drogues parmi les élèves de l'Ontario (SCDEO)*, réalisé par le Centre de toxicomanie et de santé mentale, est l'étude permanente la plus ancienne sur la consommation de drogues chez les adolescents au Canada. Cette étude, qui couvre plus de vingt ans, repose sur 14 sondages effectués tous les deux ans depuis 1977. Au printemps 2003, 6 616 élèves de la 7^e à la 12^e année (72 % des élèves choisis), répartis dans 37 conseils scolaires, 126 écoles et 383 classes, ont répondu au sondage, administré par l'Institut de recherche sociale de l'Université

York. Le rapport qui en a résulté décrit la consommation de drogues en 2003 et les changements relevés depuis 1977. Les données sont fournies pour deux groupes d'élèves : ceux de la 7^e à la 12^e année, d'une part, et ceux de 7^e, 9^e et 11^e années, d'autre part. Le premier groupe sert à évaluer les tendances actuelles et à court terme en matière de consommation de drogues (1999-2003) et le second, les tendances à long terme (1977-2003). Toutes les données reposent sur des autoévaluations issues de questionnaires anonymes administrés en classe.

Consommation de drogues (en pourcentage) au cours de l'année écoulée, selon le sexe et l'année d'étude, SCDEO 2003

Drogue	Total	Garçons	Filles		7	8	9	10	11	12	
<i>Alcool</i>	66,2	68,3	64,3	*	39,1	48,9	65,1	75,1	79,9	82,5	*
<i>Cannabis</i>	29,6	30,9	28,3		6,2	10,7	27,9	35,9	45,0	44,8	*
<i>Excès occ. d'alcool</i>	26,5	29,4	23,8	*	5,8	7,7	23,5	29,8	40,9	45,2	*
<i>Cigarettes</i>	19,2	18,0	20,3		4,4	10,2	17,0	21,8	28,3	30,2	*
<i>Hallucinogènes</i>	10,0	12,1	8,0	*	1,8	2,6	7,8	12,5	17,4	15,3	*
<i>Solvants</i>	6,1	5,9	6,3		10,2	9,5	6,5	4,2	3,6	3,9	*
<i>Stimulants (NM)</i>	5,8	4,7	6,7	*	1,6	3,7	5,6	6,6	8,2	7,8	*
<i>Cocaïne</i>	4,8	5,4	4,3		3,1	1,9	4,9	4,6	6,9	6,7	*
<i>Ecstasy (MDMA)</i>	4,1	4,2	3,9		0,5	0,8	3,7	4,6	6,6	7,2	*
<i>Méthamphétamines</i>	3,3	3,8	2,9		1,0	0,9	3,8	4,2	5,4	3,6	*
<i>LSD</i>	2,9	3,5	2,3	*	0,7	1,1	3,7	4,2	4,0	2,7	*
<i>Ritalin (NM)</i>	2,9	3,4	2,5		1,2	1,2	3,0	3,3	5,0	3,1	*
<i>Colle</i>	2,8	3,0	2,6		5,2	3,2	2,4	2,4	2,3	1,8	*
<i>Crack</i>	2,7	2,8	2,6		1,7	1,7	3,1	3,0	3,6	2,5	
<i>Barbituriques (NM)</i>	2,5	2,6	2,5		1,8	2,2	3,0	2,8	3,1	1,8	
<i>PCP</i>	2,2	2,9	1,6	*	1,3	0,8	2,1	3,6	2,6	2,7	*
<i>Tranquillisants (NM)</i>	2,2	2,7	1,8	*	0,6	1,2	1,8	2,4	4,1	2,7	*
<i>Kétamine</i>	2,2	3,0	1,6	*	1,0	s	1,7	1,6	4,7	3,7	*
<i>Rohypnol</i>	1,6	1,7	1,5		1,2	1,2	1,4	2,0	2,3	1,3	
<i>Héroïne</i>	1,4	1,9	0,9	*	1,4	0,8	1,5	2,0	1,3	1,1	
<i>Ice</i>	1,2	1,3	1,0		1,2	0,8	1,3	1,0	1,1	1,5	
<i>GHB</i>	0,7	0,8	0,6		s	s	s	0,9	1,7	s	
<i>Toutes drogues illicites, (cannabis inclus)</i>	32,2	33,1	31,3		10,1	13,9	29,6	38,6	47,5	47,1	*
<i>Toutes drogues illicites (cannabis exclus)</i>	15,3	16,6	14,2	*	6,6	8,0	13,0	18,0	21,7	22,3	*
<i>Stéroïdes (au cours de la vie)</i>	3,0	4,4	1,7	*	0,7	1,8	1,6	3,8	4,6	5,3	*

Nota : Un excès occasionnel d'alcool (5 verres et plus par occasion) se rapporte à la période des quatre semaines précédentes ; NM = fins non médicales ; s = estimation supprimée ; * différence importante entre les sexes ou les années d'étude ($p < 0,05$), sans tenir compte d'autres facteurs.

Différences entre les sous-groupes pour 2003 (de la 7^e à la 12^e année)

- ❑ Les garçons sont plus susceptibles que les filles de prendre les sept drogues suivantes : alcool, LSD, PCP, autres hallucinogènes, tranquillisants, kétamine et héroïne. En outre, ils sont plus susceptibles de faire des excès occasionnels d'alcool et, en général, de prendre des drogues illicites, à l'exclusion du cannabis. Les filles sont plus susceptibles de prendre des stimulants (p. ex., des amaigrissants).
- ❑ La consommation de drogues varie selon l'année d'étude. À l'exception des drogues inhalées (solvants et colle), dont le taux de consommation diminue selon l'année d'étude, le taux de consommation de drogues était le plus faible chez les élèves de 7^e année et le plus élevé chez les élèves de 11^e et de 12^e années. Une tendance manifeste au chapitre des années d'étude illustre une hausse appréciable des risques de consommation de drogues entre la 8^e et la 9^e année.
- ❑ Il existe des différences régionales sur le plan de la consommation de cinq drogues : cigarette, alcool (excès occasionnels), stimulants, hallucinogènes et Ritalin. Les élèves de Toronto sont les moins susceptibles de prendre ces drogues, et les élèves du Nord, les plus susceptibles. Les habitudes des élèves de l'Est et de l'Ouest de la province sont semblables à celles de l'ensemble des élèves de la province.

Changements relevés entre 2001 et 2003 (de la 7^e à la 12^e année)

En général, la tendance à la hausse de la consommation de drogues, commencée au début des années 1990, s'est renversée.

Entre 2001 et 2003, le taux de consommation de cinq drogues au cours de l'année écoulée a diminué considérablement :

- ❑ cigarettes de 23,1 % à 19,2 % ;
 - ❑ ecstasy de 6,0 % à 4,1 % ;
 - ❑ LSD de 4,8 % à 2,9 % ;
 - ❑ barbituriques de 4,0 % à 2,5 %.
- ❑ La consommation de toute drogue illicite, cannabis exclu, a aussi diminué, passant de 18 % à 15 %.

Changements à court terme, de 1999 à 2003 (de la 7^e à la 12^e année)

Il y a eu des changements importants dans la consommation de drogues entre 1999 et 2003. La plupart de ces changements sont des baisses :

- ❑ cigarettes de 28 % à 19 % ;
 - ❑ LSD de 6,8 % à 2,9 % ;
 - ❑ hallucinogènes de 12,8 % à 10,0 % ;
 - ❑ méthamphétamines de 5,0 % à 3,3 % ;
 - ❑ barbituriques de 4,4 % à 2,5 %.
- ❑ La consommation de toute drogue illicite, cannabis exclu, a diminué considérablement, passant de 20 % en 1999 à 15 % en 2003.
- ❑ La consommation de cocaïne a *augmenté* à court terme, passant de 3,4 % en 1999 à 4,8 % en 2003.

Changements relevés dans les sous-groupes entre 1999 et 2003 (de la 7^e à la 12^e année)

À l'exception de la consommation de cannabis (qui a augmenté chez les filles), de cocaïne (qui a augmenté chez les élèves de 12^e année et les élèves du Nord) et de crack (qui a augmenté chez les élèves du Nord), la consommation de drogues a diminué entre 1999 et 2003 dans la plupart des sous-groupes.

- ❑ Sexe : Chez les garçons, il y a eu une diminution de la consommation de cigarettes, de méthamphétamines, de LSD, d'ecstasy et de toute drogue illicite (cannabis exclu). On n'a relevé aucune hausse de la consommation de drogues chez

les garçons. Chez les filles, la consommation de cigarettes, de barbituriques, de LSD et de toute drogue illicite (cannabis exclu) a diminué.

- **Année d'étude** : Chez les élèves de 8^e année, la consommation de cinq drogues a diminué (cigarettes, LSD, autres hallucinogènes, ecstasy et toute drogue illicite (cannabis exclu)) ; la consommation de quatre drogues a diminué chez les élèves de 9^e année (cigarettes, LSD, ecstasy et toute drogue illicite (cannabis exclu)); chez les élèves de 10^e année, la consommation de cinq drogues a diminué (cigarettes, barbituriques, LSD, autres hallucinogènes et toute drogue illicite) ; la consommation de trois drogues a diminué chez les élèves de 11^e année (cigarettes, LSD et toute drogue illicite (cannabis exclu)) ; et la consommation de deux drogues a diminué chez les élèves de 12^e année (méthamphétamines et LSD).
- **Région** : La consommation de quatre drogues a diminué chez les élèves du Nord de l'Ontario (cigarettes, barbituriques, LSD et toute drogue illicite (cannabis exclu)). Dans l'Ouest de la province, l'usage de cigarettes, de LSD, d'ecstasy et de toute drogue illicite a fléchi. Dans l'Est de l'Ontario, l'usage de cigarettes, de LSD et de toute drogue illicite a baissé. Il n'y a eu aucun changement à court terme chez les élèves de Toronto.

Changements à long terme, de 1977 à 2003 (7^e, 9^e et 11^e années seulement)

Il existe cinq tendances générales à long terme concernant la consommation de drogues :

1) Diminution de la consommation dans les années 1980, augmentation dans les années 1990, consommation stable mais élevée actuellement :

alcool ;
excès occasionnels d'alcool ;

drogues inhalées ;
cannabis ;
ecstasy ;
hallucinogènes.

2) Diminution de la consommation dans les années 1980, augmentation dans les années 1990, consommation à la baisse actuellement :

cigarettes ;
LSD.

3) Diminution de la consommation dans les années 1980 et augmentation dans les années 1990 :

cocaïne ;
crack.

4) Diminution de la consommation dans les années 1980 et stabilisation dans les années 1990 :

stimulants ;
tranquillisants ;
barbituriques.

5) Consommation faible et stable :

héroïne ;
PCP ;
méthamphétamines.

Autres faits saillants

Tendances de la consommation de drogues

- Environ les deux tiers des élèves (68 %) n'ont pas pris de drogue illicite, y compris le cannabis, au cours de l'année écoulée. À l'inverse, 32 % des élèves ont pris une drogue illicite, y compris le cannabis.
- Environ le tiers des élèves (30 %) ne prennent aucune drogue, y compris l'alcool et le tabac, et le tiers des élèves (31 %) ont consommé uniquement de l'alcool.

- ❑ Un élève sur dix (10 %) a déclaré qu'il avait consommé de l'alcool, du tabac, du cannabis *et* au moins une drogue illicite.
- ❑ Les pourcentages d'élèves qui ont déclaré avoir pris de la drogue pour la première fois au cours de l'année écoulée sont les suivants : 19 % pour l'alcool, 10 % pour le cannabis, 9 % pour les cigarettes et 5 % pour les drogues illicites autres que le cannabis.

Âge où les jeunes prennent de la drogue pour la première fois

- ❑ L'âge moyen où les élèves ont fumé en entier leur première cigarette est actuellement d'environ 13 ans. Cet âge a augmenté depuis le début des années 1980 ; il se situait alors à 11 ans.
- ❑ L'âge moyen où les jeunes consomment de l'alcool pour la première fois est d'environ 13 ans. Il n'y a pas eu de fluctuation majeure au cours des vingt dernières années.
- ❑ L'âge moyen où les jeunes prennent du cannabis pour la première fois est d'environ 14 ans. Cet âge a augmenté dans les années 1980 et au début des années 1990, puis a diminué ces dernières années.

Perception des risques et de la désapprobation

- ❑ 55 % des élèves ont déclaré que, parmi les comportements étudiés associés à la consommation de drogues, le plus dangereux était le fait de fumer régulièrement de la marijuana, 40 % ont dit l'essai de l'ecstasy, 34 % l'essai de la cocaïne, 32 % l'essai du LSD, 31 % la consommation quotidienne d'alcool, 24 % le fait de fumer une ou deux cigarettes par jour et 19 % l'essai du cannabis.
- ❑ Comparativement à 2001, il y a eu une augmentation importante en 2003 de la perception de risques graves associés à l'essai de l'ecstasy (de 32 % à 40 %). Il y a

également eu une hausse parallèle du pourcentage d'élèves qui désapprouvent fortement l'essai de l'ecstasy (de 39 % à 49 %).

- ❑ Depuis le début des années 1990, la perception que la consommation de la plupart des drogues (sauf l'ecstasy) est risquée s'est graduellement affaiblie, surtout en ce qui concerne le cannabis.

Disponibilité des drogues

- ❑ En 2003, les drogues les plus faciles à obtenir pour les élèves étaient l'alcool (66 % ont déclaré qu'il serait « facile » ou « très facile » de s'en procurer) et le cannabis (51 %) ; 21 % des élèves ont déclaré que la cocaïne était plus difficile à obtenir, 20 % l'ecstasy et 16 % le LSD.
- ❑ Le pourcentage d'élèves qui ont déclaré qu'il est facile de se procurer du LSD a diminué considérablement (de 25 % en 1999 à 16 % en 2003). De même, il y a eu une diminution du pourcentage d'élèves (de 27 % en 2001 à 20 % en 2003) qui ont déclaré qu'il est facile de se procurer de l'ecstasy.
- ❑ Le pourcentage d'élèves qui ont déclaré qu'il est facile de se procurer du cannabis ou de la cocaïne a augmenté considérablement depuis 1989.

École et quartier

- ❑ Environ la moitié des élèves (53 %) estiment que la consommation de drogues a augmenté dans leur école au cours des dernières années (16 % ont déclaré qu'elle n'avait pas changé et 31 %, qu'elle avait diminué).
- ❑ Environ le quart des élèves (28 %) estiment que la consommation de drogues est un grave problème dans leur école. La moitié des élèves environ (51 %) sont d'avis que

c'est un problème mineur et 21 % ont déclaré que ce n'était pas un problème.

- Environ le tiers des élèves (32 %) ont déclaré avoir été témoins de la vente de drogue dans leur quartier au cours de l'année écoulée. Le pourcentage d'élèves qui ont déclaré avoir été témoins de la vente de drogue dans leur quartier a augmenté considérablement depuis 1995.
- Un peu plus du tiers des élèves (37 %) ont déclaré qu'on avait essayé de leur vendre de la drogue au cours de l'année écoulée.

Aperçu de la consommation de la cigarette

- En 2003, 19 % des élèves ont déclaré avoir fumé la cigarette au cours de l'année écoulée (soit environ 185 100 élèves ontariens) ; 57 % ont dit qu'ils n'avaient jamais fumé, 15 % qu'ils avaient pris quelques bouffées seulement et 10 % qu'ils avaient fumé 100 cigarettes ou plus au cours de leur vie.
- La consommation de la cigarette au cours de l'année écoulée ne varie pas selon le sexe. Il y a des différences importantes selon l'année d'étude (4 % des élèves de 7^e année, 30 % des élèves de 12^e année). On a également relevé des différences régionales. Les élèves du Nord (24 %) risquent le plus de fumer et les élèves de Toronto (16 %) risquent le moins de fumer.
- Environ 14 % des élèves fument tous les jours. En moyenne, ceux-ci fument cinq cigarettes par jour.
- Environ le quart des fumeurs (23 %) estiment qu'ils ont une dépendance à la cigarette, comme en témoigne le fait qu'ils fument dans les 30 minutes qui suivent leur réveil le matin.
- En 2003, 62 % des fumeurs ont déclaré qu'ils avaient essayé d'arrêter de fumer pendant l'année précédant le sondage.

- Toujours en 2003, 9 % des élèves mineurs (âgés de moins de 19 ans) ont réussi à acheter des cigarettes au moins une fois au cours du mois précédant le sondage.

Aperçu de la consommation d'alcool

- En 2003, environ les deux tiers des élèves (66 %) ont déclaré avoir bu de l'alcool au cours de l'année écoulée et 69 % en avoir bu au cours de leur vie. Les garçons sont plus susceptibles de boire que les filles (68 % comparativement à 64 %). La consommation d'alcool au cours de l'année écoulée varie selon l'année d'étude (passant de 39 % des élèves de 7^e année à environ 80 % des élèves de 11^e et 12^e années). Il n'y a pas de différences importantes entre les régions.
- En 2003, 18 % des élèves qui consommaient de l'alcool (soit 12 % des élèves) en buvaient au moins une fois par semaine et moins de 1 % en buvaient tous les jours.
- Environ le quart des élèves (26 %) ont déclaré avoir fait des excès occasionnels d'alcool (5 verres ou plus par occasion) au moins une fois pendant le mois précédant le sondage. Une proportion semblable d'élèves (24 %) ont déclaré s'être enivrés au moins une fois pendant cette période.
- De plus, environ 15 % des buveurs ont déclaré avoir fait des excès occasionnels d'alcool à deux ou trois reprises pendant le mois précédant le sondage et 10 % ont déclaré en avoir fait à quatre reprises ou plus.

Aperçu de la consommation de cannabis

- Un peu moins du tiers des élèves (30 %) ont pris du cannabis au cours de l'année écoulée et 34 % ont déclaré en avoir pris au moins une fois dans leur vie. La consommation de cannabis varie peu entre les garçons (31 %)

et les filles (28 %) et entre les régions. Toutefois, elle varie considérablement selon l'année d'étude, passant de 6 % des élèves de 7^e année à 45 % des élèves de 11^e et 12^e années.

- En moyenne, les élèves qui prennent du cannabis l'ont fait à 16 reprises au cours de l'année précédant le sondage. Environ 14 % des élèves qui prennent du cannabis (4 % de tous les élèves) l'ont fait tous les jours pendant le mois précédant le sondage.
- La consommation de cannabis à six reprises ou plus au cours de l'année écoulée et la consommation quotidienne de cannabis sont à la hausse depuis 1989.
- Un élève sur dix (10 %) qui prend du cannabis a déclaré qu'il avait un degré significatif de symptômes de dépendance à cette drogue.

Conséquences et problèmes liés à l'alcool et à d'autres drogues

Drogues et conduite de véhicules automobiles

- Environ un élève sur sept (14 %) de la 10^e à la 12^e année ayant un permis de conduire a déclaré avoir pris le volant une heure ou moins après avoir consommé deux verres ou plus d'alcool. Le pourcentage d'élèves qui ont conduit un véhicule après avoir bu de l'alcool est demeuré stable entre 2001 et 2003. Toutefois, la conduite en état d'ivresse a diminué considérablement chez les élèves depuis 1977.
- Un conducteur sur cinq (20 %) de la 10^e à la 12^e année a déclaré avoir conduit une heure ou moins après avoir pris du cannabis au cours de l'année écoulée. Le pourcentage d'élèves qui ont déclaré avoir conduit un véhicule après avoir pris du cannabis est donc légèrement plus élevé que le pourcentage d'élèves ayant déclaré avoir conduit un véhicule après avoir bu de l'alcool.

- Environ le quart des élèves de la 7^e à la 12^e année (29 %) ont déclaré avoir été passagers, au cours de l'année écoulée, dans un véhicule conduit par une personne qui avait consommé de l'alcool et 23 % ont déclaré avoir été passagers dans un véhicule conduit par une personne qui avait pris de la drogue avant de conduire.

Problèmes liés à l'alcool

- En 2003, 19 % des élèves (27 % de ceux qui consomment de l'alcool) ont déclaré avoir bu des quantités dangereuses d'alcool (soit quelque 186 700 élèves). La consommation dangereuse d'alcool varie considérablement entre les garçons et les filles (21 % et 17 % respectivement) et selon l'année d'étude (de 4 % des élèves de 7^e année à 33 % des élèves de 12^e année). Il n'y a pas de différences importantes entre les régions.

Problèmes liés aux drogues

- Un peu moins de un élève sur cinq (18 %) a signalé des symptômes d'un problème de toxicomanie. Il n'y a pas de différences importantes entre les garçons et les filles ni entre les régions à ce chapitre. Toutefois, il y a des différences importantes selon l'année d'étude : les problèmes liés aux drogues sont les plus rares chez les élèves de 7^e et 8^e années (environ 7 %) et les plus fréquents chez les élèves de 11^e et 12^e années (environ 27 %).
- En 2003, 1,4 % des élèves ont déclaré avoir suivi un programme de traitement de l'alcoolisme ou de la toxicomanie au cours de l'année écoulée. Cela représente environ 13 100 élèves ontariens de la 7^e à la 12^e année.

Consommation dangereuse d'alcool et niveau élevé de détresse psychologique

- ❑ Environ un élève sur douze (8 %, soit 81 100 élèves ontariens) a signalé à la fois une consommation dangereuse d'alcool et un niveau élevé de détresse psychologique (p. ex., symptômes d'anxiété et de dépression).
- ❑ Les filles sont plus susceptibles que les garçons d'avoir ces problèmes jumelés (10 % comparativement à 6 %). Il y a des différences à ce chapitre selon l'année d'étude : de 2 % des élèves de 7^e année à 13 % des élèves de 11^e et 12^e années. Il n'y a pas de différences importantes entre les régions.

Objectifs de santé

Les responsables en matière de santé ont récemment établi deux objectifs de santé se rapportant au *SCDEO*.

Le premier objectif, concernant la consommation de la cigarette, recommande de réduire la consommation de tabac chez les adolescents à 10 % d'ici 2005. Selon le *SCDEO* de 2003, environ 19 % des élèves de la 7^e à la 12^e année fument la cigarette et environ 14 % fument tous les jours.

Le second objectif, concernant la consommation d'alcool et de drogues illicites, recommande que le pourcentage des adolescents qui n'auront pas consommé d'alcool ni de drogues illicites au cours des 30 jours précédents, soit 89 % ou plus, d'ici 2010. Selon le *SCDEO* de 2003, 50 % des élèves de la 7^e à la 12^e année n'avaient pas consommé d'alcool ni de cannabis au cours du mois précédant le sondage.

Bien que les sondages de surveillance tels que le *Sondage sur la consommation de drogues parmi les élèves de l'Ontario* permettent de cerner les tendances de la consommation de drogues, ils ne permettent pas de déterminer les causes

fondamentales des changements observés. Toutefois, ces sondages demeurent très importants, car ils fournissent des données scientifiques à jour qui s'avèrent utiles aux décideurs et aux responsables des programmes de prévention et qui permettent d'évaluer les réussites et les échecs des objectifs de santé publique et des programmes et campagnes de prévention.

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Edward M. Adlaf
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1. INTRODUCTION

This report describes the extent and patterns of alcohol and other drug use among Ontario students in grades 7 through 12 in 2003 and changes since 1977. The findings are based on the 14th cycle of the *Ontario Student Drug Use Survey (OSDUS)*, the longest systematic study of alcohol and drug use among a youthful population in Canada.

Surveys such as the *OSDUS* contribute to an understanding of current and changing patterns of alcohol and other drug use, the problems associated with use, and the social and demographic correlates involved.

One major aim of the *OSDUS* is to provide timely data regarding:

- the extent of drug use by students in grades 7 through 12, and trends in use since 1977;
- the extent and nature of alcohol-related and drug-related problems;
- attitudes, beliefs and perceptions about alcohol and other drug use.

The 2003 *OSDUS* report includes new material on the following issues:

- the use of Ritalin without a prescription;
- the use of Ketamine;
- the average age of onset for tobacco, alcohol, and cannabis use and changes over time;
- and, riding in a vehicle with a driver who had been using drugs.

Note to Readers of Prior OSDUS Reports

Unlike prior OSDUS surveys, OAC (Grade 13) students were not surveyed in 2003. Thus, to ensure valid comparisons across years, we have made important changes to the 2003 OSDUS report:

- *All percentages based on samples before 2003 have been recalculated to exclude OAC students.*

This means that percentages found in earlier OSDUS reports (from 1977 to 2001) cannot be compared to percentages in the 2003 report (the exception to this rule is for percentages based on individual grade levels).

History of the OSDUS

The Ontario Student Drug Use Survey is the longest ongoing school survey in Canada. In 1967, several Toronto school boards approached the Addiction Research Foundation for assistance in determining the extent of drug use among their students. Under the direction of Reginald Smart, four surveys from 1968 to 1974 monitored the extent of alcohol, tobacco and other drug use among Toronto students in grades 7, 9, 11 and 13. In 1977, the study was expanded to include students throughout the province of Ontario. In 1999, the OSDUS was again expanded to include students in grades 7 to 13 (OAC). In 2003, the OSDUS excluded grade 13 (OAC), therefore representing students in grades 7 to 12, and increased the number of classes surveyed in secondary schools.

Since 1977, the study has surveyed about 4,000 students every two years, and to date, has interviewed over 58,000 students.

This report is restricted to descriptive findings related to alcohol and other drug use. Discussed are the prevalence and the frequency of use of alcohol and other drugs, changes in rates of use, and the association between drug use and selected demographic characteristics. Subsequent analyses will examine other aspects of these data in greater depth. As well, the *OSDUS* has broadened its scope to also include an array of mental health and general health indicators, which are described in a companion report (Adlaf, Paglia, & Beitchman, 2002).

Why Survey and Monitor the Drug Use of Students?

There are important reasons for estimating and monitoring drug use among adolescent students.

- Drug use and its consequences can change quickly. Indeed, in a short period we have seen several drug-related public health concerns emerge – crack cocaine, HIV and AIDS, and club drugs, for example.
- Adolescents are at a pivotal developmental stage in which negative consequences due to drug use could result in negative life trajectories in later adolescence and adulthood.
- Even when the size of the drug-using population is stable, or declining, patterns of drug use among users and associated harms can differ dramatically over time. For example, the same population of users can be using drugs more or less hazardously at one point than another.
- Because population surveys have a scientific basis and a known

representativeness, they can provide data that can confirm or challenge anecdotal and media reports regarding the nature of drug use and its consequences. Thus, the results can inform the public and challenge myths.

- Monitoring surveys also provide a basis for program and policy evaluation of goals established by governmental and non-governmental agencies. Examples include Canada’s renewed Drug Strategy (Interdepartmental Working Group on Substance Abuse, 1998), the Ontario Premier’s Council on Health (Ontario Premier’s Council on Health, 1991), and health objectives outlined in “Healthy People 2010” (U.S. Department of Health and Human Services, 2000).

What Do Drug Use Surveys Tell Us?

Drug use surveys provide important information that serves as a basis for evaluating the harm caused by drug use:

- the size of the adolescent student drug-using population (both the percentage and absolute number);
- the factors that correlate with drug use;
- the identification of high-risk groups;
- and the changes in use and abuse of drugs over time.

But the size of the drug-using population and the pattern of drug use are only two components of the harm caused by drug use. Whether the use of

a given drug causes significant societal or individual problems depends on a host of factors in addition to the number of users. Some of these other factors include the pharmacological hazard of the given drug, purity levels, addictive potential, economic and social costs of treatment and enforcement. As well, in evaluating the harm caused by drug use it is important to balance the relative number of users (the percentage using a drug) and the absolute number of users. Both pieces of information are important, and in some cases, considering only the percentages or absolute numbers can be misleading.

Consider, for example, that 1% of the *OSDUS* sample represents over 9,000 students in grades 7 through 12. Clearly, our evaluation of harm to the public health will differ if this percentage refers to the number of students using cannabis once, versus the number of students sharing needles when injecting drugs or the number of students reporting serious consequences due to their use of alcohol or other drugs.

Because the same students are not surveyed at different times, repeated cross-sectional surveys cannot evaluate developmental patterns or individual change (e.g., how patterns of drug use change with increasing age), nor can they fully resolve issues of causal order (e.g., whether poor grades cause drug use or whether drug use causes poor grades). However, repeated cross-sectional surveys are especially efficient at *identifying and measuring* period trends (e.g., changes in the percentage of the population using alcohol and other drugs).

What Student Drug Use Surveys Do Not Tell Us?

Because school-based drug use surveys are based on adolescents in school, their data cannot fully measure the totality of substance problems. Student surveys cannot address the following:

- The extent and changes in drug use among non-students or adults.
- The nature and changes in drug problems in the street drug scene. Still, student drug use typically plays a small role in indicators such as arrests, convictions, deaths, and treatment. Thus, student drug use trends need not be similar to trends in other drug use indicators.

Strengths and Weaknesses of Student Drug Use Surveys

Although no single indicator can fully describe the contours of the drug problem, in our view, the strengths of

the survey method far outweigh the limitations in estimating the size of the drug-using population.

Strengths	Weaknesses
<ul style="list-style-type: none"> ■ <i>The survey is based on scientific, random (probability) sampling methods that result in representative samples in which the sampling error of drug use estimates can be calculated.</i> 	<ul style="list-style-type: none"> ■ The survey is restricted to adolescent students enrolled in school. Excluded by design are groups in which drug use is typically higher such as dropouts and street youth.
<ul style="list-style-type: none"> ■ <i>Drug use surveys are often the only feasible means to measure the size of the drug-using population since no other official source exists (e.g., sales data).</i> 	<ul style="list-style-type: none"> ■ Because the reporting of drug use is based on self-reports, there is an unmeasurable potential for the underestimation of drug use caused by intentional (i.e., under reporting) and unintentional errors (e.g., memory errors).
<ul style="list-style-type: none"> ■ <i>The survey is widely dispersed throughout Ontario with about 40 school boards and over 120 schools participating.</i> 	<ul style="list-style-type: none"> ■ The survey is designed to provide precise estimates of drug use at the provincial level and by grade level. The survey, however, is not designed to provide precise estimates for local geographic areas.
<ul style="list-style-type: none"> ■ <i>The survey is administered on a classroom basis. Not only is this cost-effective, but it tends to increase the rate of student participation. As well, the questionnaire can be completed in an anonymous setting, which is the most critical factor in reducing the under reporting of drug use. Indeed, school administered surveys typically obtain higher reports of drug use than do household surveys.</i> 	<ul style="list-style-type: none"> ■ Highly structured surveys do not allow for the probing of rich qualitative information.
<ul style="list-style-type: none"> ■ <i>Unlike enforcement data (e.g., arrests, convictions) and treatment data, survey data captures the widest population of drug users, from former to active users.</i> 	
<ul style="list-style-type: none"> ■ <i>Because surveys are based on individual responses, they can assess the correlates and predictors of drug use and identify the characteristics of high-risk groups.</i> 	

2. METHOD

Sampling Design

Overview

For each of the 14 surveys, the target population was composed of all students enrolled in the public or Catholic regular school systems. Thus it excludes those

enrolled in private schools, special education classes, those institutionalized for correctional or health reasons, those on Indian reserves and Canadian Forces bases, and those in the far northern regions of Ontario (a total of about 7% of Ontario students).

Table 2.1 Twenty-Five Years of the OSDUS

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003	
No. Boards	20	20	31	31	20	24	25	27	25	20	22	38	41	37	
No. Schools	104	87	182	227	193	170	171	179	165	137	168	111	106	126	
No. Classes	196	195	198	261	205	215	224	221	233	223	234	285	272	383	
No. Students	4686	4794	3270	4737	4154	4267	3915	3945	3571	3870	3990	4894	4211	6616	
Design Features	Multi-stage selection (board; school; class), stratified by grade and region. Self-weighted estimates. Grades 7, 9, 11 and 13.		Single-stage selection (board clusters), stratified by grade and region. Weighted estimates. Grades 7, 9, 11 and 13 (OAC).									Two-stage selection (school; class), stratified by region and school type (and grade for middle schools). North oversampled. Weighted estimates.			
												Grades 7 to 13 (OAC).		Selected schools based on 2001 participating sample. Grades 7 to 12 (OAC dropped).	

As seen in Table 2.1, each survey was based on a random probability design. The 1977 and 1979 surveys were based on a stratified (region by grade) multistage design. The proportional allocation of students by grade and region allowed for self-weighted estimates. To incorporate improvements which would provide estimates with greater precision and efficiency, in 1981 the sample design was modified to a stratified single-stage cluster design,

which resulted in the selection of more school boards and schools. Since 1981 this survey has been administered by the Institute for Social Research (ISR), York University.

Beginning in 1999, a two-stage (school, class), stratified (region and school type) cluster design sample was utilized. Further, rather than surveying students in grades 7, 9, 11 and 13 (OAC) only, the revised design surveyed students in

grades 7 through OAC, inclusive. This change provided greater age variation, and thus more developmentally based detail on the relationship between drug use and age. It also allowed for more direct grade comparisons to American and other international studies.

Rather than the selection of school board clusters, the 1999 and 2001 *OSDUS* design was a probability sample of schools, regardless of the school board designation. Consequently, more students per school were sampled. The advantages include a greater geographical dispersion of schools and school boards, and better school-level estimates.

In *OSDUS* designs prior to 1999, the allocation of students from Northern Ontario was proportional to population. Thus, the sample for this region was smaller than other regions. The revised design, beginning in 1999, oversampled Northern students to provide better regional estimates.

The 2003 *OSDUS*¹

Like the 1999 and 2001 cycles, the 2003 *OSDUS* employed a two-stage (school, class), stratified (region and school type) cluster sample design, and oversampled students in Northern Ontario.

However, the 2003 *OSDUS* differs from previous surveys in several ways:

1. *Students in Grades 7 through 12 were surveyed.* Grade 13 (OAC) students were excluded from the 2003 sample, given that this grade will no longer exist in Ontario schools after the 2002/2003 school year.

¹ In addition to the authors, the 2003 *OSDUS* sample design team, headed by Michael Ornstein, also included John Pollard and David Northrup, all of the *Institute for Social Research*, York University.

2. *Four classes were selected in each secondary school, representing each grade between 9 and 12.* This differs from past surveys in which only three classes were selected in secondary schools, regardless of grade.

3. *The sample of schools was based on a longitudinal sample commencing in 2001.* The 2003 sample design incorporated a longitudinal sample of schools drawn from the 2001 sample. Forty-three percent (n=54) of the schools in the 2003 survey also participated in 2001. This feature of overlapping schools provides more efficient estimates of change over time (Kish, 1965).

The sample selection occurred as follows:

- a) For the 2001 sample, schools were drawn from the Ministry of Education's 1996/1997 enrolment data, and were stratified according to the four regions used in previous surveys.
- b) Within each of the four regional strata, a random selection of schools was chosen with probability proportional to size (thus, larger schools would have a greater probability of being selected). In 2003, these same schools were re-contacted. New replacement schools were selected to replace those that could not participate again. The sampling frame for these new schools was based on the Ontario Ministry of Education and Training's 2000/2001 enrolment data.
- c) Within each school, classes were randomly selected. In elementary/middle schools, two classes were randomly selected – one 7th-grade and one 8th-grade. In secondary schools, four classes were

randomly selected, one in each grade between 9 and 12.

For all surveys, Ontario was divided into four regions based on the following boundaries: **Toronto**, schools within the former Metropolitan Toronto; **Northern Ontario**, schools within the North Bay and Sudbury areas and farther north; **Eastern Ontario**, schools within York Region district and farther east; and **Western Ontario**, schools west of and including the Peel Region area. (Note: see Section 3.12 for drug use rates for the seven Ontario Public Health Planning Regions.)

Procedures

The *OSDUS* protocol was approved by the joint Research Ethics Board of the CAMH and the University of Toronto.

For each school board associated with a randomly selected school, permission to survey students was first requested from the Director of Education. Depending upon the policies of each board, agreement to participate was conditional upon approval from research review committees, as well as school principals, classroom teachers, and parents. If a school board decided not to allow their schools to participate, replacement schools from the same stratum were randomly selected and the relative boards were contacted for permission. If an individual class or student did not participate, no substitution took place. Instead, the data were statistically weighted to correct for loss of precision.

All schools were provided with parental consent forms (see Appendix). Consent forms were distributed to students, who, in turn, sought the signature of at least one parent/guardian if they were under age 18. Those without signed consent forms on the day of the survey (16%) were not allowed to participate.

Students responded to the anonymous, self-administered questionnaires in class groups within a 30 to 40 minute session, between January 15th and June 20th 2003. Participation was voluntary and anonymous. ISR field staff provided a short introduction of the study to students prior to its administration. All students recorded their responses directly on the questionnaires, which were then entered and fully-verified by ISR data-entry staff.

The Questionnaire

In addition to alcohol and other drug use, the *OSDUS* covers an array of health-related issues. To cover as many content areas as possible in a fixed time period, we employed two questionnaires, Form A and Form B. In each classroom, half the students were randomly assigned either Form A or Form B. Both forms contained 178 items, with about three-quarters of the content overlapping. On average, the questionnaire took about 30 minutes to complete. An evaluation of the readability of the 2003 questionnaire showed a Grade 7 level according to the Flesch-Kincaid score. Questionnaires are available at: www.camh.net/research/population_life_course.html.

Data Quality

2003 Sample Participation and Characteristics

Initially, 144 schools (48 elementary and 96 secondary) were selected. In total, 126 schools (52 elementary and 74 secondary), represented by 37 school boards, participated in the 2003 survey. Of the 126 participating schools, 54 were also in the 2001 sample, and the

other 72 had been randomly selected to replace refusing schools or school boards. Of the 480 classes selected, 383 participated. It is important to note that 35 of the 383 classes were not randomly selected. Rather, these classes were “convenient” same-grade replacements for classes that were originally selected but could not participate for logistic reasons.²

Finally, of the 9,411 students enrolled in these classes, 6,730 participated in the survey. The student completion rate was 72% (12% were lost due to absenteeism and 16% were lost due to lack of a parental consent form); the overall response rate was 51% (School rate, 0.88*Class rate, 0.80*Student rate, 0.72).

In addition, exclusion criteria were established to enhance data quality. Students were excluded from the final analysis sample if they (1) did not provide a valid age or sex; (2) reported the use of a fictitious drug; (3) reported using 11 or more of 13 illicit drugs 40 or more times during the past year; or (4) had missing values for all the core drug questions. If a case met one of these criteria, then it was dropped. In 2003, 114 cases were dropped from the data set. This resulted in 6,616 minimally complete cases used for the data analyses, as shown in Table 2.2. Form A was completed by 3,464 students, and Form B was completed by 3,152 students.

Table 2.3 shows that there is a good correspondence between the 2003 *OSDUS* weighted sex-by-grade distribution compared to the 2001/2002 (most recently available) Ministry of Education enrolment data. Differences do not exceed 1.7% and the average

difference is less than 1 percentage point.

Both the single item nonresponse rate and overall, item nonresponse rate were low. Item nonresponse averaged less than 1% overall, and over 96% responded to all 16 core drug questions.

² Drug prevalence data were evaluated with and without the inclusion of the non-random classes, and results did not differ. Thus all classes remained in the final data set.

Table 2.2 Sample Characteristics, 2003 OSDUS

<i>Sample</i>	<i>Number Surveyed</i>	<i>Weighted %</i>	<i>Population</i>
Total	6 616		970 000
Male	3 163	48.3	468 510
Female	3 453	51.7	501 490
Grade 7	947	14.9	144 530
Grade 8	976	14.3	138 710
Grade 9	1 254	18.4	178 480
Grade 10	1 181	18.0	174 600
Grade 11	1 188	18.3	177 510
Grade 12	1 070	16.1	156 170
Toronto	1 097	18.3	177 510
North	1 285	7.9	76 630
West	2 513	44.4	430 680
East	1 721	29.4	285 180

Table 2.3 The 2003 OSDUS Sample vs. Ontario 2001/02 School Enrolment Figures

	<i>OSDUS</i>		<i>ENROLLED</i>	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
Grade 7	6.9	8.0	8.2	7.8
Grade 8	6.6	7.6	8.0	7.7
Grade 9	9.4	8.9	9.0	8.3
Grade 10	8.2	9.8	8.6	8.1
Grade 11	8.9	9.4	8.3	7.9
Grade 12	8.2	8.0	9.6	8.2

Notes: (1) OSDUS cell entries are total sample percentages and are based on weighted data; (2) enrolment cell entries are total enrolment percentages and are based on students enrolled in Ontario public and Catholic schools in 2001/2002.

Data Analysis, Interpretation and Presentation

Data Weighting

For several reasons, including the oversampling of Northern Ontario students, the sample design requires weights to ensure the proper representation of students to the Ontario student population. For each student, the weight is based on the product of three factors: (1) the probability of a school being selected; (2) the probability of a class being selected and (3) a student non-response correction factor. Our sample of 6,616 students represents about 970,000 Ontario students in grades 7 through grade 12.

Survey Estimates

Before turning to the survey results, it is important to first briefly discuss the meaning, interpretations and limitations of survey results as they pertain to our data. The main goal of sample surveys is to estimate the “true” value of a particular characteristic in the population – in our case, the percentage of Ontario students who report using a given drug. Because we do not survey all students in the province, this “true” population percentage is unknown and must be estimated from a sample. Consequently, every estimate from a sample has associated with it some degree of sampling error. The accuracy of a percentage, i.e., the difference between the obtained sample percentage and the “true” population percentage is determined by the degree of precision and bias.

Precision refers to the “probable accuracy” of a percentage; those summarized in the present report include a range, or confidence interval, around percentage values, which indicate the

interval within which the true population percentage probably lies. The reason for employing confidence intervals arises from the uncertainty, or sampling error, associated with using the results obtained from a single sample to draw conclusions about the entire population from which the sample was drawn. If we had surveyed another sample, using identical procedures, the results would probably have differed slightly from those we obtained from our present sample.

The confidence interval around a percentage indicates the range of variation in percentage values that would have been obtained from most (in our case, 95 out of 100) of the other equivalent samples that we might have studied. The confidence interval (in our case, a 95% confidence interval) can also be interpreted as being 95% likely to include the percentage value we would have obtained if we had studied every member of the target population. In reporting that the percentage of students who had used alcohol in the past year was 66.2% (64.1-68.4) (see Table 3.4.1a), we mean that there is a 95% chance that the actual or true percentage of students in the population of Ontario students who used alcohol lies between 64.1% and 68.4%. Smaller confidence intervals imply greater precision, or less sampling error.

In our case, the size of the interval depends on three factors: the number of students interviewed – other things being equal, the larger the sample size the smaller or more precise is the interval; second, the size of the percentage – other things being equal, percentages around 50% have the largest interval while percentages approaching 0% and 100% have the smallest interval; and third, design effects – in our design, other things being equal, the greater the similarity (or correlation) of responses within schools and classrooms the wider is the interval. Changes in any of these

three factors affect the size of the confidence interval. Also, because of this last factor the confidence intervals can vary, even though both the size of sample and percentage remain constant.

Bias, in contrast to precision, refers to sources of error that may inflate or deflate estimates from the true percentage. Such sources include under-reporting of drug use, memory effects, and other sources of systematic error. Thus, a percentage may have a high degree of precision (a small confidence interval) but may still be biased (not covering the true value).

The research evidence suggests that self-reported drug use estimates are generally understated (i.e., under-reported), and consequently should be viewed as conservative. However, assuming that this bias remains more or less constant across years, estimates of change or trends remain unbiased. The degree of survey error we present in this report is restricted to precision and not bias.

The margin of error, or confidence intervals, we present in this report include only sampling error. *Confidence intervals do not include errors due to nonsampling factors such as the under-reporting of drug use or errors of memory or recall.*

2003 Analysis

All 2003 confidence intervals are corrected for characteristics of the sampling design (i.e., stratification, clustering and weighting) using *Stata 7.0* Taylor series survey routines (StataCorp, 2001). The analysis is based on a design with 8 strata (4 regions * 2 school types), 126 primary sampling units (schools) and 6,616 students.

All confidence intervals since 1977 were also corrected for the respective survey design effects.

Trend Analysis

Although we highlight dominant long-term trends, we pay particular attention to changes between the last two surveys – 2001 and 2003. To statistically test for differences between the 2001 and 2003 percentages, we calculated 95% confidence intervals around the difference and assessed whether the confidence interval spanned the value zero – i.e., no significant difference (Fleiss, 1981).

It is important to note that the tests comparing 2001 and 2003 estimates are based on grades 7 to 12. Short-term trend tests (1999-2003) are also based on grades 7 to 12, but the long-term trend tests (1977-2003) are based on only grades 7, 9, and 11.

Because only a sample of all students in Ontario is surveyed, sampling error is involved in every drug use estimate. Consequently, *absolute differences between two percentages cannot necessarily be interpreted as indicating true or real differences in the population.*

For example, 56.3% (44.7%-67.3%) of Toronto students reported drinking alcohol in 2001. This percentage increased to 61.5% (55.8%-66.9%) in 2003, representing an increase of 5.2 percentage points. However, because these two intervals overlap we cannot be confident that they are different in the population. For this reason, we restrict the word “significant” (e.g., a significant decline or difference) to indicate a statistically discernible difference, one that is less than 5% likely to occur by chance (i.e., $p < .05$).

Readers should also note the following regarding our analysis.

- Statistically significant differences must be carefully evaluated. First, *our analysis does not consider the large number of statistical tests performed*. For example, for every 20 statistical tests, 1 significant difference could occur by chance.

- Second, outcomes that are statistically significant tell us only that the difference is probably not due to chance. *Whether a difference is of a practical importance to public health policy is a matter that requires both statistical and non-statistical evaluation*.

- Our report is descriptive. *Associations found in these data should not necessarily imply causal relationships*. For example, regarding regional differences, we can only determine if a difference in drug use exists and describe the difference. Because many other factors may cause regional differences (e.g., socio-economic status), we cannot attribute such differences solely to the geographical location of students.

- We have suppressed estimates for unreliability if they meet any of the following conditions:
 - the base sample size was less than 30 students;

 - or, the estimate was less than 0.5%.

Terminology

The following terms are used throughout this report:

<i>Term</i>	<i>Definition</i>
<i>Past Year Cigarette Use (“Smoker”)</i>	Smoking less than one cigarette or more daily during the past 12 months. Excluded are those who “tried a cigarette.”
<i>Past Year Alcohol Use (“Drinker”)</i>	Any alcohol consumed during the past 12 months. Use includes consumption on special occasions, but excludes sips.
<i>Past Year Drug Use (“User”)</i>	Used the drug at least once during the past 12 months.
<i>Frequent Drug Use</i>	Used the drug 6 or more times during the past 12 months.
<i>Illicit Drug Use</i>	Use of any illegal drug at least once during the past 12 months. For the trend analysis, excluded from this analysis are: alcohol, tobacco, inhalants, prescription drugs, ecstasy, ice, GHB, Rohypnol, Ketamine, and non-medical Ritalin. The analysis is also preformed with cannabis excluded.
<i>Daily Smoking</i>	Smoking at least one whole cigarette daily over the past 12 months.
<i>Heavy Drinking</i>	Two indicators are used: (1) <i>Binge Drinking</i> : drinking 5 or more drinks on the same occasion during the past 4 weeks; (2) <i>Becoming drunk</i> during the past 4 weeks.
<i>Hazardous Drinking</i>	Scoring at least 8 out of 40 on the World Health Organization’s Alcohol Use Disorders Identification Test (“AUDIT”) screen, which measures heavy drinking and alcohol-related problems during the past 12 months. (See page 65)
<i>Drug Use Problem</i>	Reporting experiencing at least 2 of the 6 items on the “CRAFFT” screener, which measures a drug use problem that may require treatment (past 12 months time interval). (See page 184)

3. RESULTS

3.1 Overview of Drug Use in 2003

Drug Use in 2003

(Tables 3.1.1, 3.2.1; Figure 3.1.1)

By far the most commonly used drug is alcohol, with 66.2% of students reporting use during the 12 months before the survey. Cannabis is the next most common drug, with 29.6% reporting use. Tobacco ranks third, with 19.2% reporting smoking cigarettes during the past year.

Past year use of hallucinogens other than LSD (e.g., mescaline and psilocybin “magic mushrooms”) is reported by 10% of students. The remaining drugs are used by fewer than 7% on a past year basis. The least common drug is GHB, used by less than 1% of students.

One-third (32.2%) report using at least one illicit drug in the past year. When cannabis is excluded, this proportion becomes about one-in-six (15.3%).

Lifetime Drug Use

(Table 3.1.1; Figure 3.1.1)

Estimates for lifetime drug use follow a similar pattern as that for past year use: alcohol, cannabis, and tobacco are the three most common drugs. Just under 70% have ever used alcohol, and about one-third have ever used cannabis, and cigarettes in their lifetime. About one-in-ten have used hallucinogens, other than LSD and PCP, and solvents. The remaining drugs were used by less than 7% of students in their lifetime.

Frequency of Drug Use

(Table 3.2.3a; Figure 3.1.2)

Frequent drug use, defined as using six or more times during the past 12 months, is shown in Table 3.2.3a. Of all the drugs, excluding alcohol and tobacco, cannabis is the most frequently used. About one-in-six (16.5%) students reports using cannabis six or more times during the past year. Stimulants and hallucinogens (excluding LSD) are the next most frequently used, with about 2% of all students reporting using these six or more times. All other drugs are not likely to be used at this frequency.

Figure 3.1.2 displays the number of times *past year users* used a drug during the 12 months before the survey (excluded are alcohol and tobacco). Again, we can readily see that most drug use is infrequent. For the majority of the 17 drugs shown (those with more than 50 users), use is only once or twice. At the higher end, the drugs used most frequently (10 or more times) are cannabis and stimulants.

Figure 3.1.1
 Percentage Reporting Lifetime and Past Year Drug Use
 (Grades 7-12), OSDUS 2003

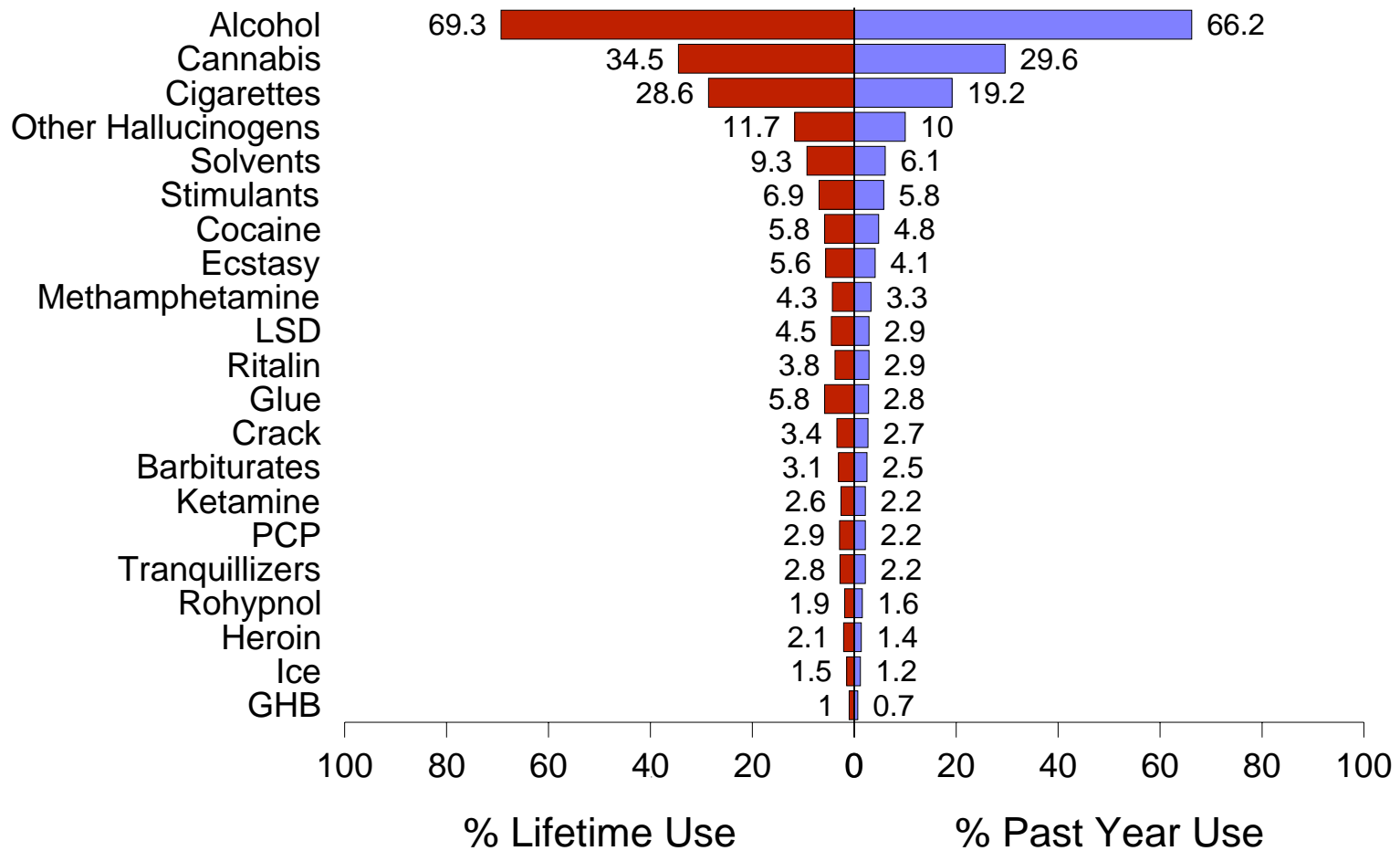
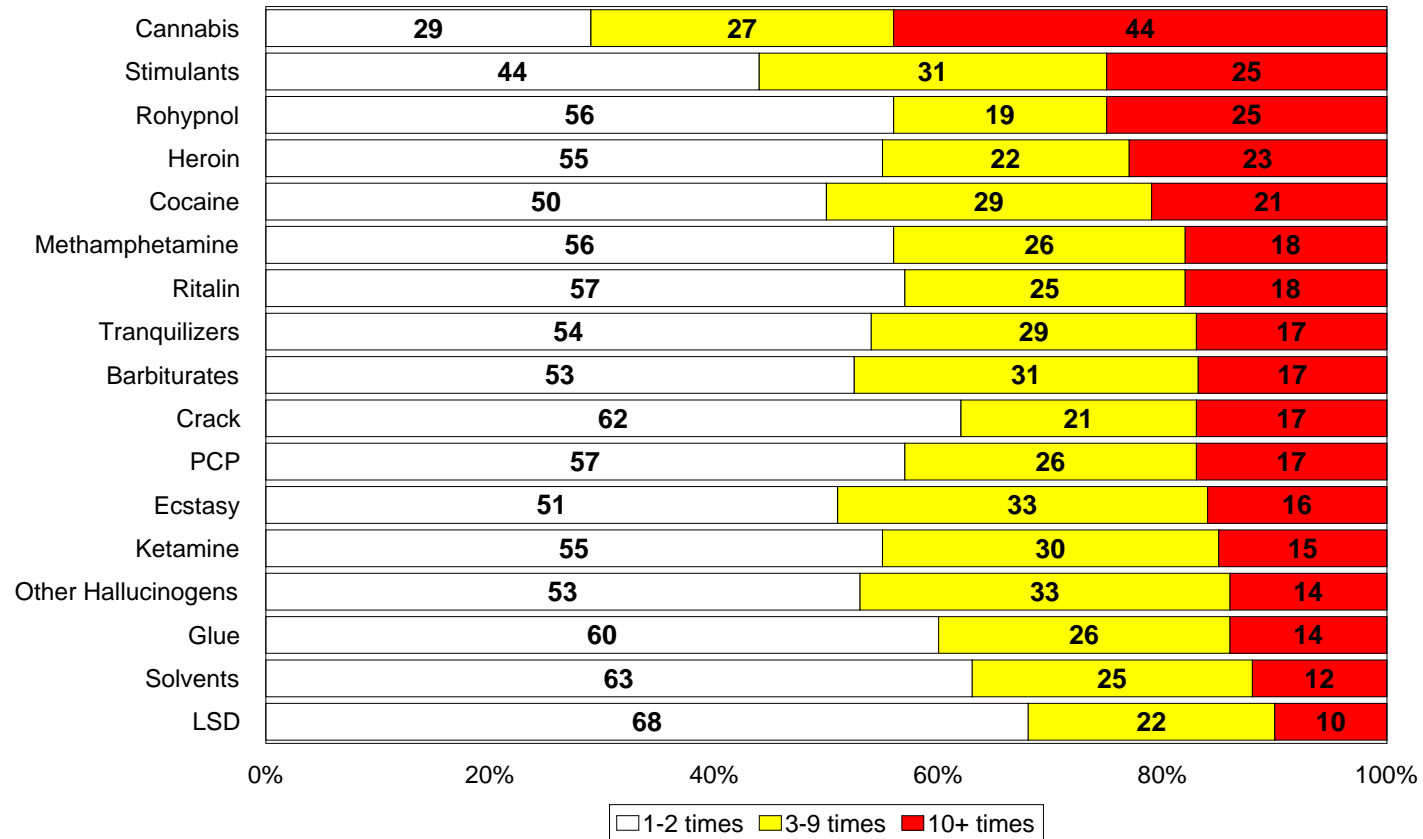


Figure 3.1.2
Frequency of Drug Use During the Past 12 Months Among Users
(Grades 7-12), OSDUS 2003



Note: frequencies displayed only for illicit drugs with 50 or more users

Table 3.1.1: Percentage Reporting Drug Use During Lifetime and During the Past Year, 2003, Grades 7 to 12

	<i>Lifetime Use</i>			<i>Past Year Use</i>					
	Lower Estimate ^a	%	Upper Estimate ^a	Lower Estimate ^a	%	Upper Estimate ^a	Lower Estimate ^b	Approx. Number of Users ^b	Upper Estimate ^b
Cigarettes	26.6	28.6	30.7	17.7	19.2	20.8	168,900	185,800	202,600
Alcohol	67.2	69.3	71.4	64.1	66.2	68.4	602,500	641,700	680,800
Cannabis	32.3	34.5	36.8	27.6	29.6	31.6	264,300	286,000	307,700
Glue	5.0	5.8	6.8	2.3	2.8	3.4	21,700	27,200	32,800
Other Solvents	8.1	9.3	10.6	5.2	6.1	7.2	48,700	59,200	69,600
Barbiturates (NM)	2.6	3.1	3.7	2.1	2.5	3.0	20,000	24,300	28,600
Stimulants (NM)	6.1	6.9	7.8	5.0	5.8	6.6	48,300	55,600	62,800
Tranquillizers (NM)	2.4	2.8	3.4	1.8	2.2	2.7	17,200	21,600	26,000
LSD	3.8	4.5	5.4	2.4	2.9	3.5	22,600	27,700	32,900
PCP	2.5	2.9	3.5	1.9	2.2	2.7	17,800	21,800	25,700
Other Hallucinogens	10.3	11.7	13.3	8.8	10.0	11.4	84,300	96,800	109,300
Methamphetamine (“Speed”)	3.7	4.3	5.1	2.8	3.3	4.0	27,000	32,000	38,000
Ice	1.0	1.5	2.1	0.8	1.2	1.7	6,900	11,100	15,400
Cocaine	5.1	5.8	6.6	4.2	4.8	5.5	40,200	46,500	52,700
Crack	2.8	3.4	4.1	2.2	2.7	3.3	20,400	25,900	31,500
Heroin	1.8	2.1	2.6	1.1	1.4	1.7	9,800	13,100	16,400
Ecstasy (MDMA)	4.8	5.6	6.5	3.5	4.1	4.8	33,400	39,400	45,800
GHB	0.7	1.0	1.5	0.4	0.7	1.1	3,600	6,500	9,500
Ketamine	2.0	2.6	3.4	1.8	2.2	2.9	16,000	21,200	26,500
Rohypnol	1.4	1.9	2.6	1.2	1.6	2.2	10,600	15,300	20,000
Ritalin (NM)	3.2	3.8	4.4	2.5	2.9	3.5	23,400	28,100	32,800
Steroids (lifetime use only)	2.4	3.0	3.7						
Any Illicit, including cannabis				30.1	32.2	34.3	289,700	312,300	334,800
Any Illicit, excluding cannabis				13.9	15.3	16.9	134,700	148,800	163,000

Notes: (1) ^a Based on 95% confidence interval; (2) ^b Based on population of approximately 970,000 students in grades 7 to 12. Numbers are based on survey weights and have been rounded to the nearest hundred; (3) NM = non-medical use; (4) “Past Year Use” refers to use at least once during the 12 months before the survey.

Source: OSDUS, Centre for Addiction & Mental Health

3.2 Trends

2003 vs. 2001: Grades 7 to 12

(Table 3.2.1a)

Of the 22 drug measures included in the 2003 and 2001 surveys, 5 showed significant decreases. Cigarette smoking decreased from 23.1% in 2001 to 19.2% in 2003 among all students in grades 7 to 12. Past year use of barbiturates decreased from 4.0% in 2001 to 2.5% in 2003, as did LSD use (from 4.8% to 2.9%) and ecstasy use (from 6.0% to 4.1%). Use of any illicit drug excluding cannabis decreased from 18.1% in 2001 to 15.3% in 2003.

Between 2001 and 2003 there was no drug that showed a significant increase in use. All other drugs remained stable between these two survey years.

Short-Term Changes in Use, 1999 – 2003: Grades 7 to 12

(Table 3.2.1a)

Table 3.2.1a presents drug estimates for the years 1999, 2001 and 2003 among all students in grades 7 to 12. There are 6 measures that showed a decrease in the short-term. Cigarette smoking has significantly decreased since 1999 (from 28.4% to 19.2%). Other decreases between 1999 and 2003 were also found for: barbiturates (from 4.4% to 2.5%), LSD (from 6.8% to 2.9%), other hallucinogens (from 12.8% to 10.0%), and methamphetamine (from 5.0% to 3.3%). Use of any illicit drug excluding cannabis significantly decreased, from 20.5% in 1999 to 15.3% in 2003.

Use of cocaine, however, significantly increased between 1999 and 2003 (from 3.4% to 4.8%). All other drugs showed no significant change over the short-term.

Long-Term Changes in Use, 1977 – 2003: Grades 7, 9, 11

(Tables 3.2.1b, 3.2.2)

An examination of long-term trends reveals 5 dominant patterns. The first pattern displays decreases during the 1980s, increases during the 1990s and current stability at elevated rates. This pattern occurs for 6 measures: any alcohol use, binge drinking, inhalants, cannabis, hallucinogens other than LSD or PCP, and ecstasy. For example, cannabis use declined from 29% in 1979 to 10% in 1991, and then increased to 28% in 2003.

The second pattern is one that displays decreases during the 1980s, increases during the 1990s, but is currently moving downward. The pattern is evident for smoking cigarettes and LSD use. Smoking declined from 35% in 1979 to 20% in 1991, then moved upward to 26.6% in 1999, and then dropped to 17.4% in 2003. LSD use moved similarly, from 9.0% to 4.9% to 6.5% to 2.9%, respectively.

The third pattern is one that displays declines during the 1980s, but an upward movement during the 1990s. This is evident for cocaine and, to a lesser extent, crack. For example, cocaine use declined from 5.3% in 1979 to 1.7% in 1991, but increased to 3.0% in 2003.

The fourth pattern shows decreases during the 1980s, but stability during the 1990s. The pattern is evident for the non-medical use of stimulants, tranquilizers and barbiturates.

The fifth pattern is one that displays low and stable rates over time. This pattern is evident for the use of heroin, PCP and methamphetamine.

Table 3.2.1a: Percentage Using Drug *at Least Once* During the Past Year, 1999 – 2003, Grades 7 to 12

	1999 (N)	2001 (3898)	2003 (6616)
Cigarettes	28.4 (26.1-30.7)	23.1 (20.3-26.1)	19.2^{ab} (17.7-20.8)
Alcohol	66.0 (63.6-68.3)	63.9 (60.8-67.0)	66.2 (64.1-68.4)
Cannabis	28.0 (26.0-30.1)	28.6 (25.8-31.7)	29.6 (27.6-31.6)
Glue	3.8 (3.1-4.7)	3.2 (2.6-4.1)	2.8 (2.3-3.4)
Other Solvents	7.6 (6.6-8.8)	6.4 (5.3-7.9)	6.1 (5.2-7.2)
Barbiturates (NM)	4.4 (3.5-5.5)	4.0 (3.2-5.0)	2.5^{ab} (2.1-3.0)
Stimulants (NM)	7.3 (6.4-8.4)	6.3 (5.4-7.4)	5.8 (5.0-6.6)
Tranquillizers (NM)	2.0 (1.6-2.6)	2.2 (1.6-3.1)	2.2 (1.8-2.7)
LSD	6.8 (6.7-8.1)	4.8 (3.9-5.9)	2.9^{ab} (2.4-3.5)
PCP	3.0 (2.4-3.9)	2.8 (2.2-3.7)	2.2 (1.8-2.7)
Other Hallucinogens	12.8 (11.4-14.4)	11.1 (9.6-12.9)	10.0^b (8.8-11.4)
Methamphetamine (“Speed”)	5.0 (4.1-6.2)	3.9 (3.1-4.9)	3.3^b (2.8-4.0)
Ice	1.4 (0.8-2.7)	0.6 (0.3-1.1)	1.2 (0.8-1.7)
Cocaine	3.4 (2.8-4.2)	4.4 (3.6-5.4)	4.8^b (4.2-5.5)
Crack	2.5 (1.9-3.2)	2.1 (1.6-2.8)	2.7 (2.2-3.3)
Heroin	1.9 (1.5-2.5)	1.1 (0.8-1.5)	1.4 (1.1-1.7)
Ecstasy (MDMA)	4.0 (3.1-5.2)	6.0 (5.0-7.1)	4.1^a (3.5-4.8)
GHB	—	1.3 (0.8-2.1)	0.7 (0.4-1.1)
Rohypnol	—	3.1 (2.0-4.8)	2.2 (1.8-2.9)
Any illicit, including cannabis	32.3 (30.2-34.4)	32.5 (29.8-35.3)	32.2 (30.1-34.3)
Any illicit, excluding cannabis	20.5 (18.8-22.4)	18.1 (16.6-19.7)	15.3^{ab} (13.9-16.9)
Steroids (lifetime use)	3.4 (2.7-4.2)	3.8 (3.0-4.8)	3.0 (2.4-3.7)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; (3) ^b 2003 vs. 1999 significant difference, $p < .01$; (4) † estimate suppressed or less than 0.5%; (5) NM = non-medical use; (6) estimates for “any illicit” drug include: cannabis, barbiturates, heroin, speed, stimulants, tranquillizers, LSD, PCP, hallucinogens, cocaine, and crack (excluded are glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin).

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.2.1b: Percentage Using Drug at Least Once During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1989 (3376)	1991 (3040)	1993 (2961)	1995 (2617)	1997 (2907)	1999 (3072)	2001 (2421)	2003 (2013)	2003 (3389)
Cigarettes	29.2 (26.7-31.8)	35.0 (32.3-37.7)	28.8 (25.4-32.5)	29.0 (25.6-32.6)	23.6 (21.1-26.2)	22.9 (21.1-24.8)	22.2 (20.3-24.2)	20.1 (18.4-22.0)	23.4 (21.8-25.2)	27.3 (25.2-29.5)	27.2 (25.4-29.0)	26.6 (23.5-30.0)	21.2 (17.7-25.2)	17.4 (15.3-19.7)	
Alcohol	72.8 (70.4-75.1)	73.7 (71.6-75.8)	70.1 (67.7-72.3)	69.0 (66.1-71.9)	66.3 (64.7-67.9)	65.1 (63.0-67.3)	62.6 (58.8-66.3)	54.3 (51.6-57.0)	53.6 (50.4-56.6)	56.0 (53.4-58.4)	56.9 (53.3-60.4)	62.7 (59.4-66.0)	58.9 (54.1-63.5)	62.9 (60.2-64.4)	
Cannabis	21.8 (19.5-24.3)	29.1 (26.1-32.4)	25.1 (22.2-28.2)	21.9 (19.7-24.3)	19.4 (16.4-22.9)	13.8 (10.9-17.3)	11.9 (9.7-14.4)	9.9 (8.7-11.3)	11.5 (10.7-12.4)	21.9 (18.8-25.4)	23.9 (21.9-26.0)	26.8 (23.7-30.1)	26.2 (22.1-30.8)	27.8 (25.4-30.3)	
Glue	4.2 (3.6-5.1)	4.9 (4.1-5.8)	3.2 (2.4-4.2)	3.6 (3.2-4.2)	2.3 (1.8-2.8)	2.7 (1.8-4.1)	2.0 (1.7-2.5)	1.2 (0.8-1.9)	1.8 (1.3-2.4)	2.8 (2.3-3.3)	1.7 (1.3-2.2)	4.3 (3.3-5.5)	3.1 (2.2-4.2)	3.2 (2.5-4.0)	
Other Solvents	7.4 (6.5-8.5)	7.2 (6.3-8.2)	4.4 (3.3-5.8)	4.6 (3.8-5.5)	3.1 (2.5-3.7)	4.2 (3.1-5.6)	3.4 (2.8-4.3)	1.8 (1.2-2.7)	2.6 (2.0-3.2)	3.2 (2.7-3.9)	2.8 (2.1-3.7)	8.3 (6.8-10.1)	6.7 (5.4-8.4)	6.6 (5.5-7.8)	
Barbiturates (NM)	6.1 (5.2-7.2)	7.4 (6.3-8.5)	7.6 (5.7-10.1)	6.0 (4.8-7.3)	4.2 (3.8-4.8)	3.2 (2.5-4.3)	2.1 (1.6-2.7)	2.2 (1.8-2.8)	3.2 (2.5-4.1)	2.9 (2.2-3.6)	2.7 (2.1-3.4)	4.3 (3.1-5.9)	2.7 (1.9-3.7)	2.7 (2.2-3.4)	
Stimulants (NM)	7.3 (6.4-8.3)	11.0 (9.5-12.6)	11.0 (9.4-12.8)	14.3 (12.2-16.8)	10.9 (9.4-12.5)	7.6 (6.4-8.9)	5.8 (5.0-6.6)	3.8 (2.9-4.8)	5.2 (3.7-7.4)	6.4 (5.3-7.7)	7.2 (6.2-8.3)	6.7 (5.3-8.5)	5.7 (4.6-7.2)	5.4 (4.6-6.3)	
Tranquillizers (NM)	4.8 (4.0-5.7)	5.8 (5.0-6.8)	4.6 (3.8-5.6)	5.0 (3.8-6.4)	3.3 (2.6-4.2)	3.0 (2.2-4.0)	2.2 (1.9-2.7)	1.6 (1.2-2.2)	1.0 (0.6-1.7)	1.6 (1.0-2.4)	1.7 (1.4-2.2)	1.8 (1.2-2.6)	1.7 (1.1-2.7)	2.3 (1.8-3.0)	
LSD	6.0 (5.1-7.1)	9.0 (7.7-10.5)	9.4 (7.6-11.6)	8.5 (7.2-9.9)	7.1 (5.6-8.9)	5.8 (4.2-7.9)	5.4 (3.8-7.4)	4.9 (4.2-5.9)	6.8 (5.8-7.9)	9.5 (7.2-12.5)	7.7 (7.0-8.5)	6.5 (4.8-8.6)	3.6 (2.7-4.7)	2.9 (2.3-3.6)	
PCP	—	—	2.4 (1.7-3.4)	2.2 (1.6-2.8)	1.7 (1.3-2.2)	1.4 (0.8-2.3)	1.2 (0.8-1.8)	0.6 (0.3-1.1)	0.6 (0.3-1.2)	1.8 (1.0-3.1)	2.1 (1.4-3.0)	3.2 (2.2-4.5)	2.6 (1.9-3.5)	2.0 (1.6-2.6)	
Other Hallucinogens	3.9 (3.2-4.7)	5.2 (4.3-6.4)	4.2 (2.9-6.1)	5.6 (4.4-7.1)	4.5 (3.5-5.8)	4.0 (2.6-6.1)	3.8 (2.7-5.4)	3.0 (2.4-3.7)	2.8 (2.2-3.6)	7.6 (5.5-10.4)	9.6 (8.3-11.2)	11.7 (9.4-14.4)	9.7 (7.7-12.1)	9.5 (8.0-11.2)	
Methamphetamine ("Speed")	2.7 (2.2-3.2)	3.7 (3.0-4.4)	2.8 (2.0-3.9)	4.2 (2.4-7.0)	3.2 (2.7-3.9)	3.3 (2.5-4.2)	2.5 (2.0-3.2)	1.9 (1.4-2.5)	2.2 (1.6-3.0)	4.7 (3.4-6.6)	3.7 (3.1-4.5)	4.5 (3.2-6.4)	3.2 (2.4-4.3)	3.6 (2.9-4.4)	
Ice	—	—	—	—	—	—	—	0.9 (0.5-1.6)	1.2 (0.5-2.8)	1.7 (1.2-2.5)	†	1.6 (0.6-4.1)	0.5 (0.2-1.5)	1.2 (0.7-2.0)	
Cocaine	3.6 (3.0-4.3)	5.3 (4.4-6.2)	4.6 (3.8-5.6)	4.0 (3.1-5.3)	4.0 (3.1-5.3)	3.4 (2.5-4.7)	2.4 (1.7-3.4)	1.7 (1.2-2.4)	1.5 (0.9-2.4)	2.5 (2.1-3.0)	2.7 (2.4-3.1)	3.7 (2.8-4.9)	4.0 (3.1-5.3)	5.1 (4.2-6.1)	
Crack	—	—	—	—	—	1.5 (1.0-2.2)	1.3 (0.8-2.0)	1.1 (0.6-1.9)	1.1 (0.6-2.0)	1.8 (1.5-2.3)	2.4 (1.7-3.3)	2.5 (1.7-3.6)	2.4 (1.7-3.2)	3.0 (2.2-3.8)	
Heroin	2.0 (1.6-2.6)	2.5 (1.9-3.2)	1.5 (1.0-2.2)	1.8 (1.3-2.5)	1.6 (1.2-2.3)	1.5 (1.0-2.3)	1.2 (0.8-1.9)	1.1 (0.7-1.7)	1.3 (0.9-1.8)	2.1 (1.4-2.9)	1.8 (1.6-2.2)	1.7 (1.2-2.4)	1.3 (0.9-2.0)	1.4 (1.0-1.9)	
Ecstasy (MDMA)	—	—	—	—	—	—	—	†	†	2.0 (1.2-3.3)	2.9 (1.7-5.1)	4.3 (3.0-6.2)	5.8 (4.7-7.3)	3.8 (3.2-4.7)	
Any illicit, including Cannabis	26.0 (23.7-28.5)	33.4 (30.4-36.7)	28.0 (25.4-30.8)	26.6 (24.0-29.3)	24.2 (21.0-27.7)	19.3 (16.2-22.8)	16.6 (14.7-18.8)	14.0 (12.6-15.5)	16.4 (14.6-18.3)	25.8 (22.7-29.2)	28.1 (26.2-30.0)	30.8 (27.6-34.2)	30.0 (26.1-34.2)	30.3 (27.9-32.9)	
Any illicit, excluding Cannabis	15.1 (13.6-16.7)	20.4 (18.4-22.5)	17.0 (15.2-19.0)	20.0 (17.8-22.3)	16.6 (14.4-19.0)	13.7 (11.9-15.8)	11.8 (10.4-13.3)	9.8 (8.7-11.0)	11.8 (9.9-13.9)	17.0 (14.7-19.6)	17.5 (16.0-19.0)	19.2 (16.5-22.3)	16.4 (14.4-18.7)	14.3 (12.6-16.2)	
Steroids (lifetime use)	—	—	—	—	—	—	1.3 (0.9-1.8)	1.7 (1.4-2.1)	1.6 (1.1-2.4)	1.4 (1.0-2.0)	1.4 (1.0-2.0)	3.1 (2.2-4.3)	3.4 (2.4-4.6)	2.4 (1.8-3.3)	

Notes: (1) entries in brackets are 95% confidence intervals; (2) NM = non-medical use; (3) † estimate suppressed or less than 0.5%; (4) estimates for "any illicit" drug include cannabis, barbiturates, heroin, speed, stimulants, tranquillizers, LSD, PCP, hallucinogens, cocaine, and crack (excluded are glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin).

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.2.2: Changes in Past Year Drug Use, 1979 vs. 2003, Grades 7, 9, 11 only

	1979 (N=3920)	2003 (N=3389)	Effect Size ^a
2003 Significantly Higher than 1979			
Other Hallucinogens	5.2	9.5	.17
2003 Significantly Lower than 1979			
Cigarettes	35.0	17.4	.41
Alcohol	73.7	62.9	.23
LSD	9.0	2.9	.27
Barbiturates	7.4	2.7	.22
Stimulants	11.0	5.4	.21
Tranquillizers	5.8	2.3	.18
Glue	4.9	3.2	.09
Heroin	2.5	1.4	.08
No Significant Difference			
Binge drinking	23.8	24.6	.02
Cannabis	29.1	27.8	.03
Solvents	7.2	6.6	.02
Methamphetamine	3.7	3.6	.01
Cocaine	5.3	5.1	.01

Notes: (1) 1979 versus 2003 significant difference based on $p < .05$ or less; (2) "Effect Size" is a general measure of how large the effect is in the population. Conventional definitions to convey the scale of the measure are as follows: .20 - small effect, .50 - medium effect, .80 - large effect, (Cohen, 1988).

Source: *OSDUS*, Centre for Addiction & Mental Health

Short- and Long-Term Changes in *Frequent* Drug Use:

(Tables 3.2.3a, 3.2.3b)

Frequent drug use, defined as using six or more times during the past year, is shown in Tables 3.2.3a (short-term) and 3.2.3b (long-term). Between 1999 and 2003, frequent use of LSD has decreased from 1.9% to 0.6%. Frequent use of other hallucinogens has also decreased, from 4.1% in 1999 to 2.6% in 2003.

Only cannabis has shown marked fluctuations over the long-term. Frequent cannabis use was at an elevated level in the late 1970s, dipped in the 1980s and started to increase again in the late 1990s. Currently, frequent cannabis use remains at an elevated level.

Table 3.2.3a: Frequent Drug Use: Percentage Using Drug *Six Times or More* During the Past Year, 1999 – 2003, Grades 7 to 12

	1999 (4447)	2001 (3898)	2003 (6616)
Cannabis	15.5 (14.0-17.1)	16.4 (14.4-18.6)	16.5 (14.8-18.4)
Glue	0.8 (0.5-1.2)	0.5 (0.3-0.8)	0.6 (0.4-0.9)
Other Solvents	1.4 (0.9-2.0)	0.8 (0.5-1.2)	1.4 (1.1-1.8)
Barbiturates (NM)	1.1 (0.7-1.7)	0.9 (0.5-1.4)	0.7 (0.5-0.9)
Stimulants (NM)	2.3 (1.7-3.0)	1.9 (0.4-2.6)	2.3 (0.9-2.8)
Tranquillizers (NM)	0.5 (0.3-0.8)	0.8 (0.4-1.4)	0.6 (0.4-0.8)
LSD	1.9 (1.3-2.8)	0.9 (0.5-1.6)	0.6^b (0.4-1.0)
PCP	0.8 (0.6-1.3)	0.7 (0.3-1.6)	0.6 (0.4-0.9)
Other Hallucinogens	4.1 (3.3-5.1)	3.1 (2.4-3.8)	2.6^b (2.1-3.1)
Methamphetamine (“Speed”)	1.2 (0.8-1.6)	0.6 (0.4-1.0)	0.9 (0.7-1.2)
Ice	†	†	
Cocaine	1.1 (0.8-1.6)	1.0 (0.7-1.6)	1.6 (1.2-2.1)
Crack	0.6 (0.4-1.0)	†	0.6 (0.4-0.9)
Heroin	0.7 (0.4-1.1)	†	0.5 (0.3-0.7)
Ecstasy (MDMA)	1.0 (0.6-1.6)	1.6 (1.1-2.4)	1.2 (0.9-1.5)
GHB	—	†	†
Rohypnol	—	†	†
Ketamine	—	—	0.6 (0.4-1.1)
Ritalin (NM)		—	0.8 (0.6-1.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^b 2003 vs. 1999 significant difference, $p < .01$; (3) † estimate suppressed or less than 0.5%; (4) NM = non-medical use.

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.2.3b: Frequent Drug Use: Percentage Reporting Using Drug *Six or More Times* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2424)	2001 (2013)	2003 (3389)
Cannabis	12.8 (11.1-14.7)	18.0 (15.5-20.8)	15.2 (12.4-18.5)	11.6 (10.1-13.3)	9.4 (7.7-11.5)	6.2 (4.6-8.2)	4.8 (3.5-6.4)	4.6 (3.7-5.7)	4.9 (3.7-6.6)	11.4 (9.3-14.0)	15.2 (13.1-17.7)	14.9 (12.8-17.3)	15.4 (12.4-18.8)	16.0 (13.8-18.4)	
Glue	0.7 (0.4-1.1)	0.9 (0.6-1.4)	0.5 (0.4-0.7)	†	†	0.5 (0.2-1.3)	†	†	†	†	†	1.0 (0.6-1.7)	†	0.7 (0.4-1.0)	
Other Solvents	1.1 (0.8-1.5)	1.1 (0.7-1.6)	0.9 (0.6-1.3)	0.5 (0.4-0.8)	†	0.5 (0.2-1.2)	†	†	0.5 (0.3-0.8)	†	0.6 (0.3-1.1)	1.6 (1.0-2.4)	0.8 (0.5-1.5)	1.6 (1.2-2.1)	
Barbiturates (NM)	1.8 (1.4-2.4)	1.7 (1.3-2.2)	2.4 (1.6-3.7)	1.8 (1.2-2.8)	1.0 (0.7-1.4)	1.2 (0.8-1.7)	0.5 (0.3-0.9)	0.5 (0.3-0.7)	0.9 (0.4-2.2)	0.5 (0.3-0.9)	1.4 (0.9-2.1)	1.0 (0.5-2.1)	0.6 (0.3-1.1)	0.7 (0.5-1.1)	
Stimulants (NM)	1.8 (1.4-2.4)	3.2 (2.6-4.0)	3.6 (2.5-5.1)	5.3 (4.1-6.8)	2.9 (2.3-3.7)	2.0 (1.4-3.0)	1.7 (1.3-2.4)	1.0 (0.7-1.3)	1.6 (0.7-3.6)	1.3 (0.9-2.0)	2.0 (1.7-2.4)	2.1 (1.3-3.4)	1.8 (1.2-2.7)	2.3 (1.8-3.0)	
Tranquillizers (NM)	0.9 (0.6-1.3)	1.0 (0.7-1.5)	0.8 (0.5-1.5)	1.3 (0.9-2.0)	0.5 (0.4-0.7)	0.7 (0.4-1.3)	†	†	†	†	†	0.5 (0.3-1.0)	0.6 (0.2-1.3)	0.6 (0.3-0.9)	
LSD	1.6 (1.2-2.0)	2.4 (1.9-3.2)	3.4 (2.1-5.4)	3.5 (2.6-4.6)	2.4 (1.6-3.8)	2.2 (1.5-3.1)	1.6 (1.1-2.4)	1.8 (1.3-2.5)	2.7 (2.2-3.3)	3.3 (2.4-4.7)	2.6 (1.7-3.8)	2.2 (1.3-3.7)	†	0.7 (0.4-1.0)	
PCP	—	—	†	0.5 (0.3-0.9)	†	†	†	†	†	†	†	†	0.7 (0.4-1.4)	†	0.5 (0.3-0.8)
Hallucinogens	0.9 (0.6-1.3)	1.4 (1.0-1.9)	1.0 (0.5-2.1)	1.2 (0.7-2.2)	0.7 (0.4-1.0)	0.8 (0.4-1.6)	0.9 (0.5-1.8)	0.6 (0.4-0.8)	0.6 (0.3-1.0)	1.5 (0.9-2.6)	2.7 (1.8-4.1)	4.1 (2.9-5.7)	3.1 (2.2-4.4)	2.5 (2.0-3.2)	
Methamphetamine ("Speed")	0.6 (0.4-1.0)	0.7 (0.5-1.1)	0.6 (0.4-1.0)	1.3 (0.5-3.0)	0.5 (0.3-1.0)	0.8 (0.4-1.6)	0.5 (0.3-0.8)	0.5 (0.3-0.9)	0.6 (0.2-1.4)	0.8 (0.4-1.4)	1.1 (0.6-1.7)	1.0 (0.7-1.7)	†	1.0 (0.8-1.4)	
Ice	—	—	—	—	—	—	—	0.5 (0.2-1.0)	0.5 (0.2-1.4)	0.5 (0.3-0.8)	†	†	†	†	
Cocaine	0.8 (0.6-1.1)	1.0 (0.7-1.5)	0.9 (0.6-1.2)	0.9 (0.6-1.3)	1.0 (0.7-1.3)	1.0 (0.6-1.6)	0.6 (0.4-1.2)	0.6 (0.3-1.3)	0.9 (0.5-1.5)	0.8 (0.5-1.1)	0.8 (0.4-1.3)	1.2 (0.7-2.2)	1.4 (0.8-2.2)	1.8 (1.3-2.5)	
Crack	—	—	—	—	—	—	—	—	—	—	†	0.6 (0.2-1.2)	0.5 (0.2-1.0)	0.6 (0.4-0.9)	
Heroin	0.5 (0.3-0.9)	0.6 (0.4-1.0)	†	0.6 (0.4-0.8)	†	†	†	†	0.8 (0.5-1.3)	0.7 (0.5-1.1)	0.9 (0.6-1.4)	1.1 (0.9-1.4)	0.6 (0.4-1.1)	†	0.5 (0.3-0.8)
Ecstasy (MDMA)	—	—	—	—	—	—	—	—	†	†	†	†	1.2 (0.7-2.3)	1.4 (0.8-2.3)	1.3 (0.9-2.0)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) estimates for ice are based on a random half sample in each year, estimates for ecstasy are based on a half sample between 1991 and 1999; (4) NM = non-medical use.

Source: OSDUS, Centre for Addiction & Mental Health

3.3 Tobacco Use

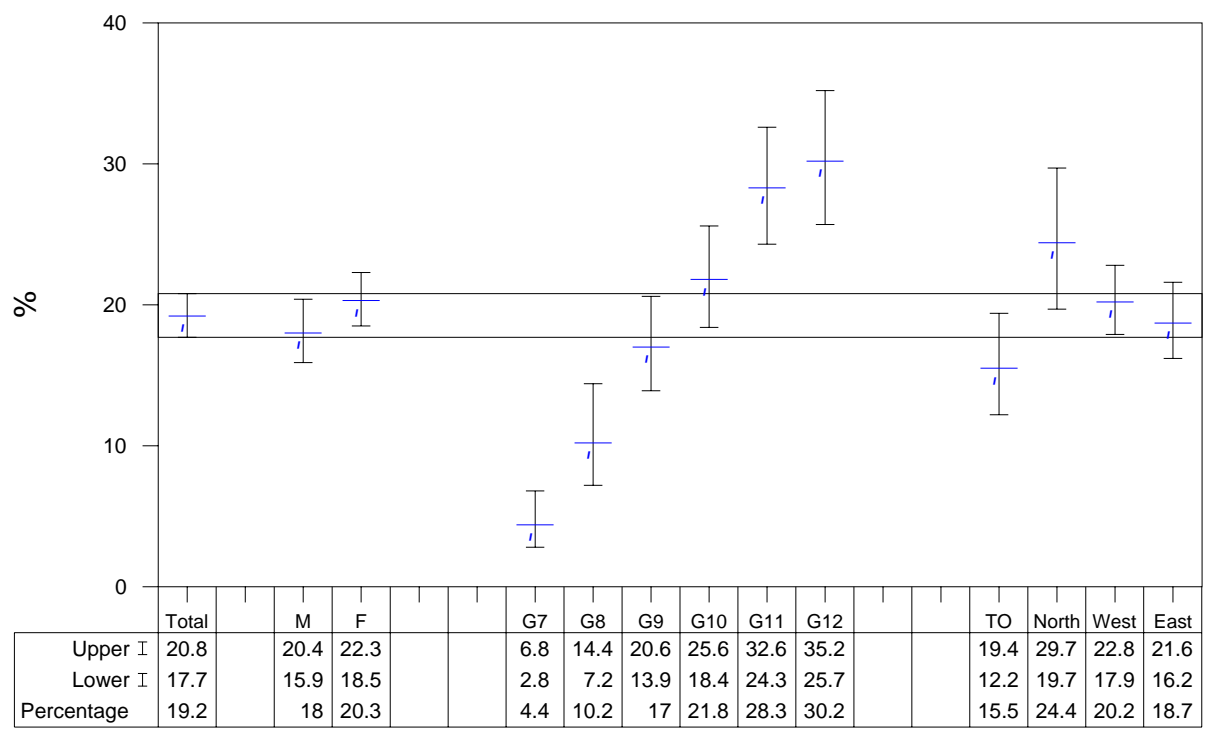
Past Year Cigarette Smoking

(Tables 3.3.1a, 3.3.1b; Figures 3.3.1, 3.3.2)

	Smoking in 2003 (Grades 7 to 12)	Trends in Smoking
Total Sample	<ul style="list-style-type: none"> ■ Overall, 19.2% of students report smoking cigarettes during the 12 months before the survey. We estimate that the actual percentage of all students who smoke ranges between 17.7% and 20.8%. The percentage of 19.2% smokers represents about 185,100 Ontario students in grades 7 to 12. 	<ul style="list-style-type: none"> □ Smoking among all students in grades 7 to 12 significantly declined between 2001 (23.2%) and 2003 (19.2%). In fact, the smoking prevalence has decreased since 1999 by about 10 percentage points. □ Over the long-term, the highest smoking prevalence estimate was found in 1979, at 35.0% (among grades 7, 9, and 11 only). Smoking decreased during the 1980s and increased in the late 1990s. Since then smoking among students has been on the decline, and is currently at its lowest point since the <i>OSDUS</i> began in 1977.
Sex	<ul style="list-style-type: none"> ■ Rates of smoking in 2003 do not differ significantly between males (18.0%) and females (20.3%). 	<ul style="list-style-type: none"> □ Although there have been decreases in smoking between 2001 and 2003 among both males (from 22.7% to 18.0%) and females (from 23.5% to 20.3%), these are not statistically significant. However, among each sex, smoking has significantly declined compared to 1999 estimates (males: from 29.0% to 18.0%; females: from 27.7% to 20.3%). □ In the long-term, smoking prevalence among males and females was highest in the late 1970s, decreased during the 1980s, and increased in the 1990s. Since the end of the 1990s, smoking among both sexes seems to be on a downward trend.

- Grade**
- Smoking is significantly related to grade level. Rates of smoking increase with age, from 4.4% of 7th-graders; 10.2% of 8th-graders; 17.0% of 9th-graders; 21.8% of 10th-graders; and peaking in 11th- (28.3%) and 12th-grade (30.2%).
 - Although smoking decreased among all the grades between 2001 and 2003, the drop was only significant for 10th-graders (from 29.9% to 21.8%). However, for each grade between 8 and 11, smoking has significantly decreased compared to 1999 estimates.
- Region**
- Smoking significantly differs by region, with students in Northern Ontario (24.4%) most likely to smoke, and those in Toronto (15.5%) least likely. Students in the West (20.2%) and East (18.7%) fall in between.
 - Although there were decreases in smoking between 2001 and 2003 in each of the four regions, none was statistically significant. However, decreases since 1999 are significant among students in the North (from 35.8% to 24.4%), the West (from 31.3% to 20.2%), and the East (from 26.7% to 18.7%).

Figure 3.3.1
Past Year Cigarette Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.3.1a: Percentage Reporting *Cigarette Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(N)	(3898)	(6616)
Total		28.4	23.1	19.2^{ab}
(95% CI)		(26.1-30.7)	(20.3-26.1)	(17.7-20.8)
Sex	Male	29.0	22.7	18.0^b
		(26.0-32.2)	(19.4-26.4)	(15.9-20.4)
	Female	27.7	23.5	20.3^b
		(25.0-30.6)	(20.1-27.2)	(18.5-22.3)
Grade	7	7.4	5.0	4.4
		(5.2-10.3)	(3.2-7.6)	(2.8-6.8)
	8	17.8	10.7	10.2^b
		(14.3-21.9)	(8.3-13.8)	(7.2-14.4)
	9	27.8	23.4	17.0^b
		(23.6-32.5)	(17.5-30.6)	(13.9-20.6)
	10	37.4	29.9	21.8^{ab}
		(32.0-43.1)	(25.6-34.6)	(18.4-25.6)
	11	41.7	35.8	28.3^b
		(35.4-48.4)	(29.8-42.2)	(24.3-32.6)
	12	38.6	36.3	30.2
		(33.3-44.2)	(27.6-46.1)	(25.7-35.2)
Region	Toronto	20.6	17.2	15.5
		(15.7-26.6)	(11.0-25.7)	(12.2-19.4)
	North	35.8	25.4	24.4^b
		(30.3-41.6)	(20.3-31.2)	(19.7-29.7)
	West	31.3	25.8	20.2^b
		(27.8-35.0)	(21.6-30.4)	(17.9-22.8)
	East	26.7	22.4	18.7^b
		(22.9-31.0)	(17.6-28.1)	(16.2-21.6)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; (3) ^b 2003 vs 1999 significant difference, $p < .01$.

Q. In the **last 12 months**, how often did you **smoke cigarettes**? (Use excludes trying 1 cigarette in the past 12 months, but includes less than 1 cigarette or more daily.)

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.3.2
Past Year Cigarette Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

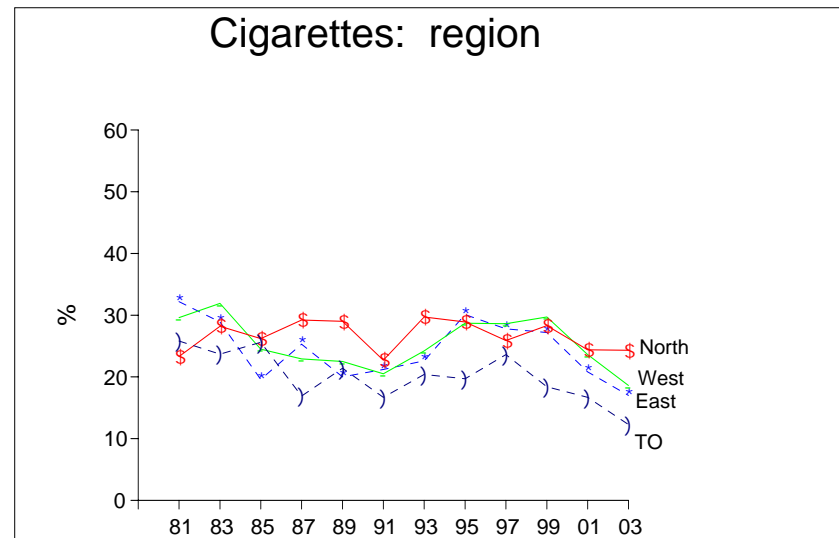
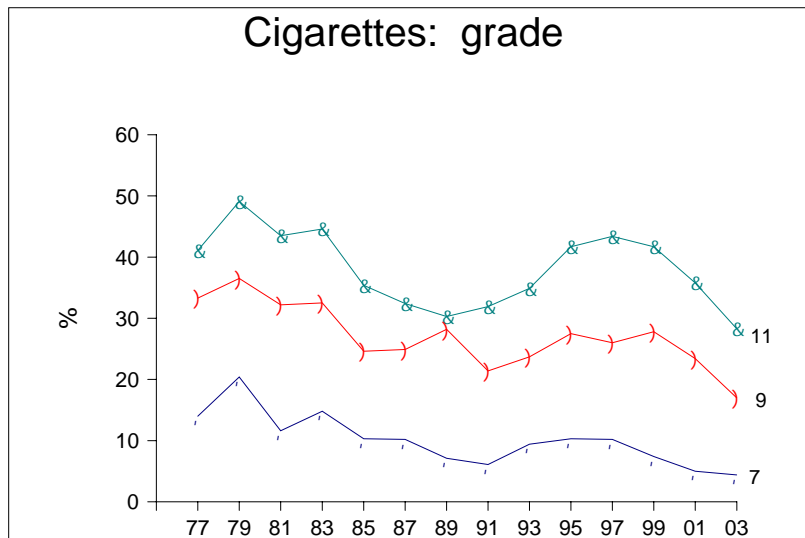
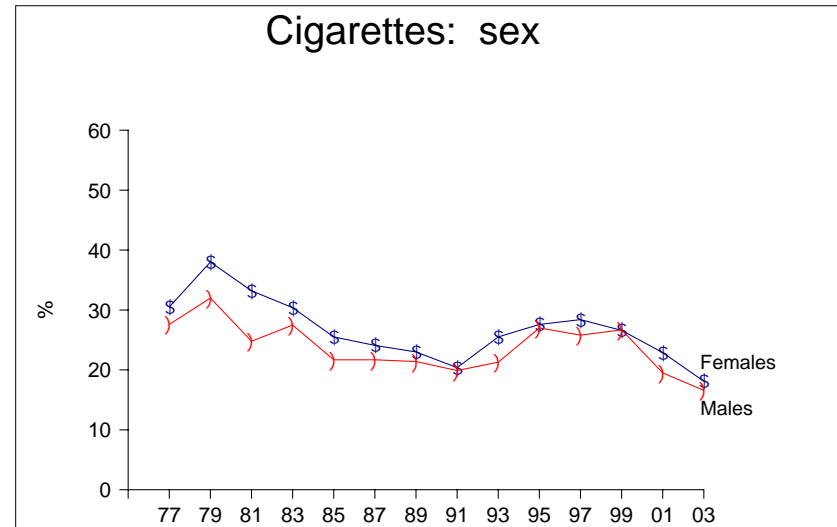
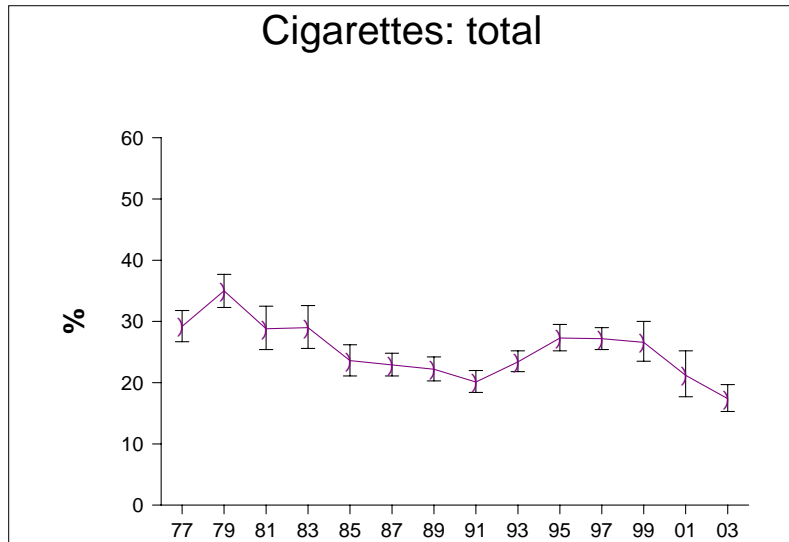


Table 3.3.1b: Percentage Reporting *Cigarette Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	29.2	35.0	28.8	29.0	23.6	22.9	22.2	20.1	23.4	27.3	27.2	26.6	21.2	17.4
(95% CI)	(26.7-31.8)	(32.3-37.7)	(25.4-32.5)	(25.6-32.6)	(21.1-26.2)	(21.1-24.8)	(20.3-24.2)	(18.4-22.0)	(21.8-25.2)	(25.2-29.5)	(25.4-29.0)	(23.5-30.0)	(17.7-25.2)	(15.3-19.7)
Sex														
Male	27.6	32.0	24.8	27.5	21.7	21.7	21.4	19.9	21.3	27.0	25.8	26.7	19.5	16.6
	(24.6-30.9)	(29.1-35.1)	(23.0-26.7)	(22.9-32.7)	(18.8-24.9)	(18.8-24.9)	(19.1-23.9)	(17.4-22.6)	(18.6-24.3)	(24.2-30.0)	(22.4-29.6)	(22.7-31.0)	(15.7-24.0)	(13.8-19.8)
Female	30.5	38.0	33.2	30.4	25.5	24.1	23.0	20.4	25.5	27.6	28.4	26.6	22.9	18.1
	(27.5-33.8)	(34.7-41.4)	(26.6-40.6)	(27.0-34.0)	(22.0-29.4)	(21.8-26.5)	(19.1-27.4)	(18.7-22.2)	(22.2-29.2)	(24.6-30.9)	(27.1-29.7)	(22.8-30.8)	(18.3-28.2)	(15.5-21.1)
Grade														
7	14.0	20.4	11.6	14.8	10.3	10.2	7.1	6.1	9.4	10.3	10.2	7.4	5.0	4.4
	(11.1-17.7)	(17.2-23.9)	(10.8-12.5)	(8.9-23.7)	(7.3-14.4)	(7.4-13.9)	(4.6-11.0)	(4.4-8.4)	(7.7-11.3)	(7.2-14.4)	(8.1-12.7)	(5.2-10.3)	(3.2-7.6)	(2.8-6.8)
9	33.3	36.5	32.2	32.5	24.6	24.9	28.2	21.4	23.7	27.5	26.0	27.8	23.4	17.0
	(28.9-38.1)	(32.2-41.0)	(27.0-37.9)	(30.8-34.3)	(19.8-30.1)	(21.3-28.9)	(26.2-30.4)	(18.5-24.5)	(22.8-24.8)	(25.8-29.1)	(23.5-28.6)	(23.6-32.5)	(17.5-30.6)	(13.9-20.6)
11	41.1	49.1	43.5	44.6	35.4	32.4	30.3	31.9	34.9	41.7	43.4	41.7	35.8	28.3
	(36.6-45.7)	(44.4-53.9)	(37.6-49.5)	(38.4-51.0)	(31.1-40.0)	(28.1-37.0)	(26.4-34.5)	(28.7-35.3)	(30.6-39.5)	(36.7-46.8)	(39.3-47.6)	(35.4-48.4)	(29.8-42.2)	(24.3-32.6)
Region														
Toronto	—	—	25.8	23.7	25.6	16.9	21.4	16.7	20.4	19.7	23.6	18.4	16.7	12.3
			(17.7-36.0)	(17.7-31.0)	(21.6-30.0)	(13.1-21.6)	(16.1-27.9)	(12.7-21.6)	(16.7-24.6)	(13.5-27.9)	(20.3-27.3)	(13.6-24.5)	(9.2-28.2)	(8.4-17.6)
North	—	—	23.3	28.2	26.2	29.2	29.0	22.7	29.7	28.9	25.9	28.3	24.4	24.3
			(14.2-35.8)	(22.3-35.0)	(22.1-30.6)	(21.1-38.9)	(22.2-36.8)	(15.5-31.9)	(22.0-38.9)	(19.2-41.0)	(23.9-27.9)	(19.4-39.2)	(17.4-33.2)	(18.5-31.1)
West	—	—	29.6	31.9	24.5	22.9	22.5	20.5	24.2	28.7	28.6	29.7	23.6	18.6
			(24.3-35.6)	(25.2-39.4)	(22.8-26.2)	(20.3-25.8)	(20.2-25.0)	(18.2-23.0)	(21.9-26.8)	(26.0-31.6)	(25.5-31.9)	(24.3-35.7)	(19.2-28.7)	(15.7-21.8)
East	—	—	32.2	28.9	19.6	25.3	20.0	21.2	22.6	30.1	27.8	27.2	20.8	17.0
			(27.2-37.6)	(24.6-33.6)	(12.9-28.7)	(23.6-27.1)	(16.3-24.3)	(18.1-24.7)	(20.3-25.1)	(28.5-31.7)	(24.6-31.3)	(22.1-33.1)	(14.3-29.3)	(12.8-22.2)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q. In the **last 12 months**, how often did you **smoke cigarettes**? (Use excludes trying 1 cigarette in the past 12 months, but includes less than 1 cigarette or more daily.)

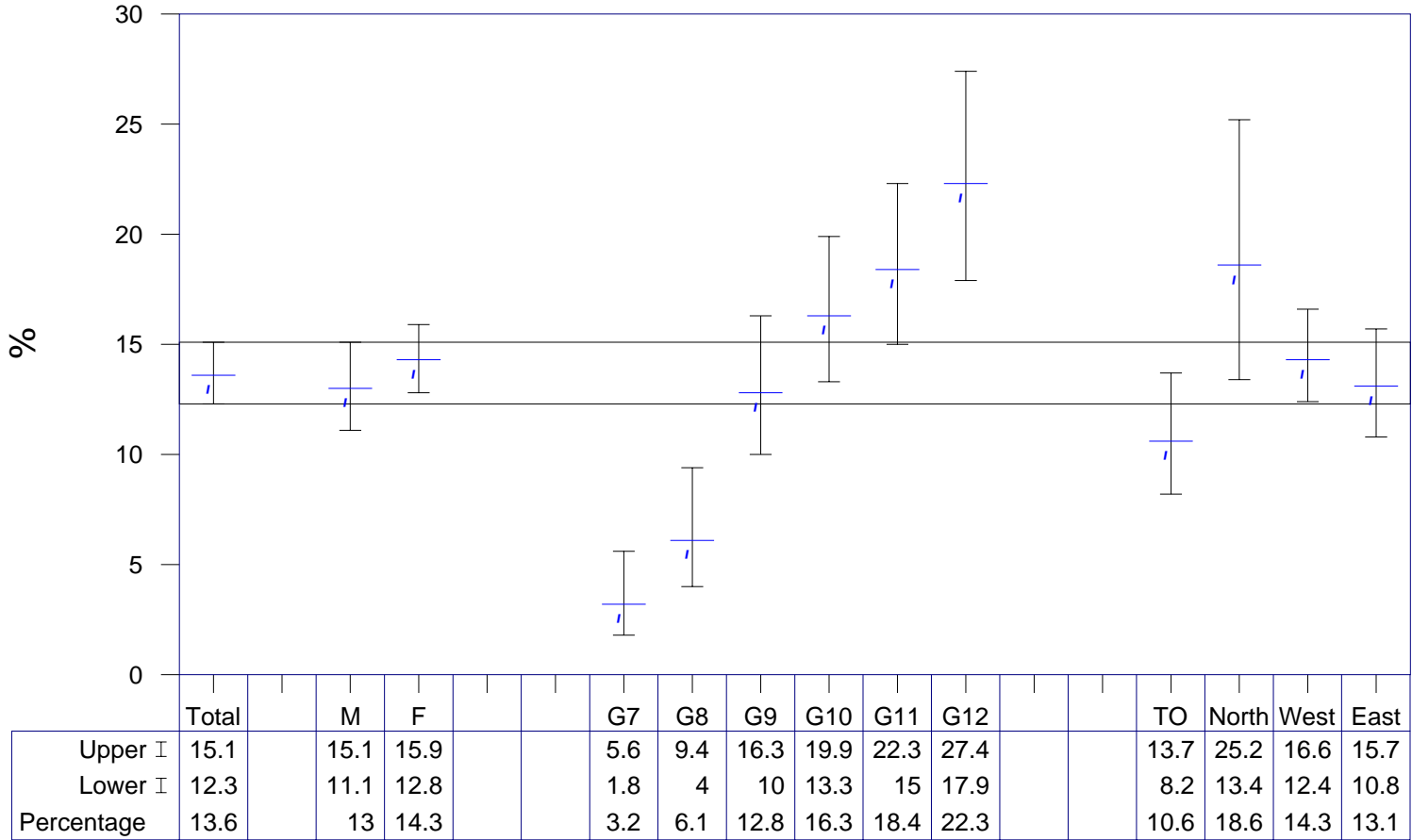
Source: OSDUS, Centre for Addiction & Mental Health

Past Year Daily Cigarette Smoking

(Tables 3.3.2a, 3.3.2b; Figures 3.3.3, 3.3.4)

	Daily Smoking in 2003 (Grades 7 to 12)	Trends in Daily Smoking
Total Sample	<ul style="list-style-type: none"> ■ Overall, 13.6% (range: 12.3% to 15.1%) of students report smoking one or more cigarettes on a daily basis during the past 12 months. This percentage represents about 131,700 students in grades 7 to 12 across Ontario. 	<ul style="list-style-type: none"> □ There was a significant decline in daily smoking between 2001 (17.9%) and 2003 (13.6%). The current estimate is also lower than that in 1999 (22.0%). □ Over the long-term, daily smoking has reached an all-time low in 2003 (12%, among grades 7, 9, 11 only).
Sex	<ul style="list-style-type: none"> ■ Daily smoking does not significantly differ between males (13.0%) and females (14.3%). 	<ul style="list-style-type: none"> □ Although both males and females show a decline in daily smoking between 2001 and 2003, only males reached statistical significance (from 17.8% to 13.0%). Both sexes, however, show a significant decrease compared to their 1999 estimates.
Grade	<ul style="list-style-type: none"> ■ Daily smoking is significantly related to grade level, increasing incrementally between 7th-grade (3.2%) and 12th-grade (22.3%). 	<ul style="list-style-type: none"> □ Among the grades, daily smoking significantly declined between 2001 and 2003 only among students in grade 10 (from 22.2% to 16.3%) and grade 11 (from 29.4% to 18.4%). □ All grades, except grade 7, show a significant decline in daily smoking compared to 1999 estimates.
Region	<ul style="list-style-type: none"> ■ Daily smoking significantly differs by region, with students in the North (18.6%) most likely to smoke daily, and those in Toronto (10.6%) least likely. 	<ul style="list-style-type: none"> □ Only students in the West show a significant drop in daily smoking between 2001 (21.0%) and 2003 (14.3%). □ Within each region, except Toronto, daily smoking is currently significantly lower compared to 1999 estimates.

Figure 3.3.3
Past Year Daily Smoking by Sex, Grade and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.3.2a: Percentage Reporting *Daily Smoking* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999 (4447)	2001 (3898)	2003 (6616)
(N)				
Total		22.0	17.9	13.6^{ab}
(95% CI)		(19.8-24.4)	(14.7-21.7)	(12.3-15.1)
Sex	Male	22.3	17.8	13.0^{ab}
	(19.3-25.7)		(14.8-21.4)	(11.1-15.1)
	Female	21.7	17.9	14.3
(19.1-24.6)		(14.7-21.7)	(12.8-15.9)	
Grade	7	4.2	3.2	3.2
	(2.8-6.2)		(1.6-6.0)	(1.8-5.6)
	8	13.3	7.3	6.1^b
	(10.1-17.2)		(5.2-10.2)	(4.0-9.4)
	9	20.8	18.6	12.8^b
	(16.8-25.5)		(13.0-25.8)	(10.0-16.3)
	10	28.7	22.2	16.3^{ab}
(23.6-34.4)		(17.9-27.2)	(13.3-20.0)	
	11	34.7	29.4	18.4^{ab}
(28.5-41.5)		(24.1-35.4)	(15.0-22.3)	
	12	30.9	29.3	22.3^b
(25.9-36.4)		(20.3-40.2)	(18.0-27.4)	
Region	Toronto	16.4	13.0	10.6
	(12.2-21.7)		(8.3-19.9)	(8.2-13.7)
	North	28.4	18.9	18.6^b
	(22.9-34.6)		(14.1-24.9)	(13.4-25.2)
	West	24.7	21.0	14.3^{ab}
(20.9-29.0)		(16.8-26.0)	(12.4-16.6)	
	East	19.8	16.1	13.1^b
(16.4-23.7)		(11.4-22.3)	(10.8-15.7)	

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; (3) ^b 2003 vs. 1999 significant difference, $p < .01$.

Q. In the **last 12 months**, how often did you **smoke cigarettes**? (Daily smoking includes smoking 1 or more cigarettes daily.)

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.3.4
Past Year Daily Smoking, OSDUS 1977 - 2003 (Grades 7, 9, 11 only)

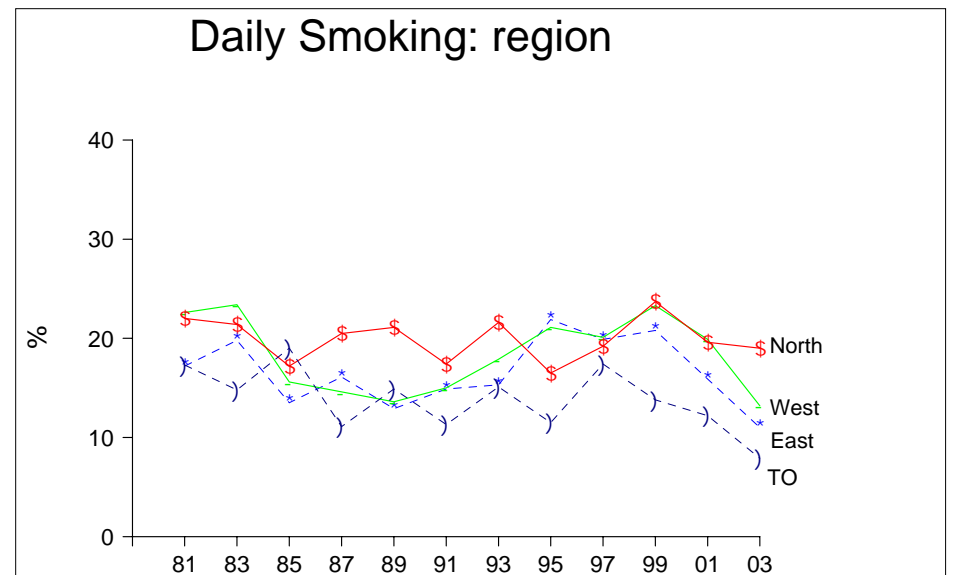
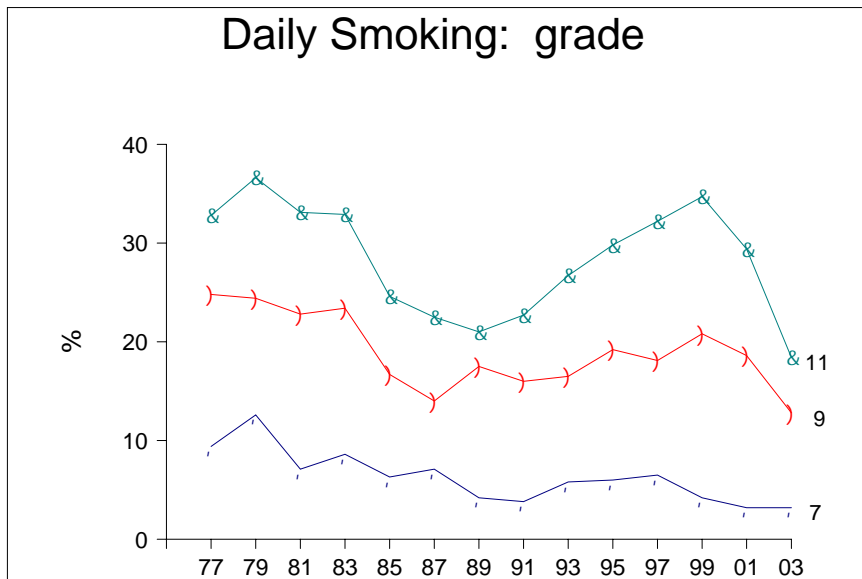
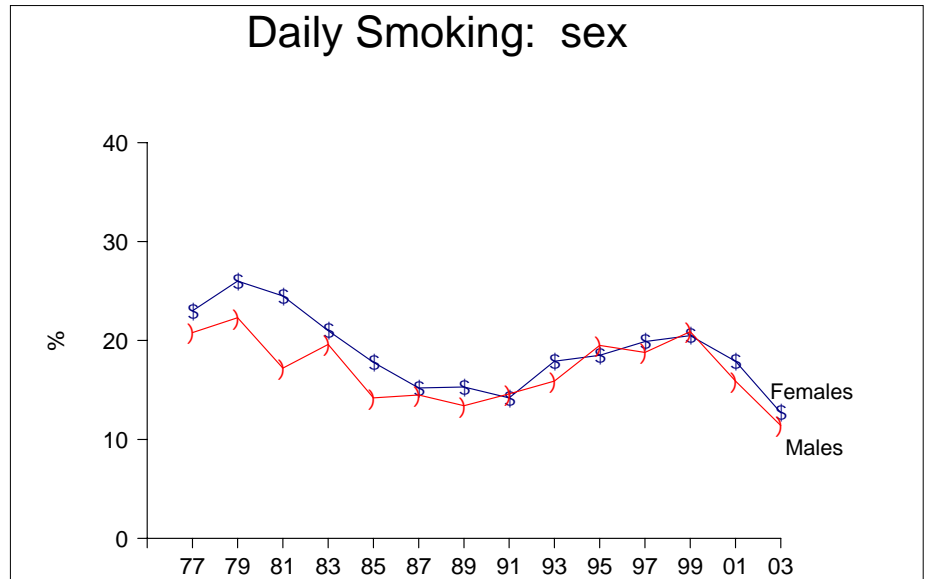
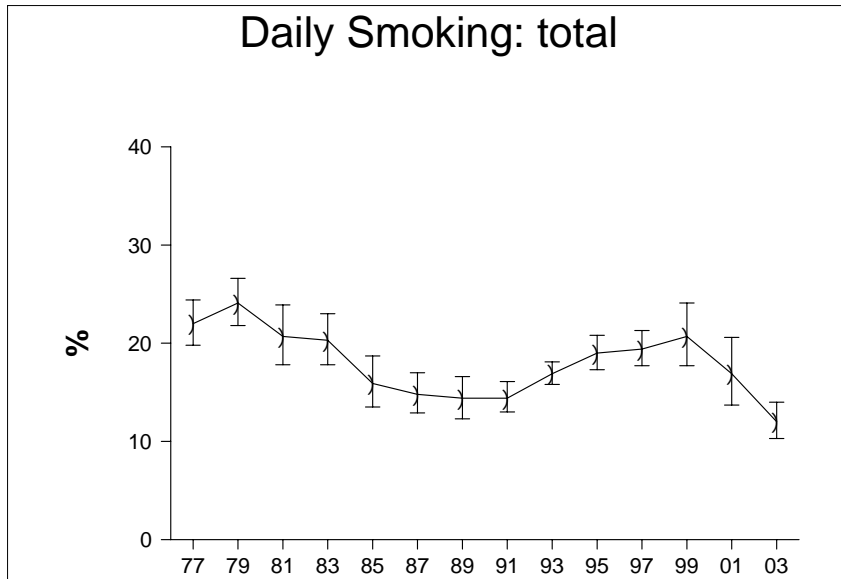


Table 3.3.2b: Percentage Reporting *Daily Smoking* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)	
Total		22.0	24.1	20.7	20.3	15.9	14.8	14.4	14.4	16.9	19.0	19.4	20.7	16.9	12.0
(95% CI)		(19.8-24.4)	(21.8-26.6)	(17.8-23.9)	(17.8-23.0)	(13.5-18.7)	(12.9-17.0)	(12.3-16.6)	(13.0-16.1)	(15.8-18.1)	(17.3-20.8)	(17.7-21.3)	(17.7-24.1)	(13.7-20.6)	(10.3-14.0)
Sex															
Male		20.8	22.3	17.2	19.6	14.2	14.5	13.4	14.6	15.9	19.5	18.8	20.9	15.9	11.4
		(18.1-23.9)	(19.6-25.1)	(15.6-18.9)	(16.2-23.5)	(11.7-17.0)	(12.3-16.9)	(11.2-15.9)	(11.8-18.0)	(14.3-17.6)	(17.1-22.2)	(15.6-22.5)	(16.9-25.5)	(12.4-20.0)	(9.1-14.1)
Female		23.0	26.0	24.5	21.0	17.8	15.2	15.3	14.2	17.9	18.5	19.9	20.5	17.9	12.7
		(20.4-25.9)	(23.1-29.1)	(19.9-29.7)	(18.2-24.2)	(14.4-21.7)	(12.7-18.0)	(11.9-19.5)	(12.8-15.8)	(15.5-20.6)	(16.6-20.5)	(18.8-21.2)	(16.9-24.6)	(13.6-23.1)	(10.6-15.1)
Grade															
7		9.4	12.6	7.1	8.6	6.3	7.1	4.2	3.8	5.8	6.0	6.5	4.2	3.2	3.2
		(7.1-12.4)	(10.3-15.4)	(5.4-9.2)	(4.9-14.9)	(3.9-10.0)	(4.9-10.2)	(2.7-6.3)	(1.9-7.6)	(4.4-7.7)	(3.2-11.0)	(4.5-9.3)	(2.8-6.2)	(1.6-6.0)	(1.8-5.6)
9		24.8	24.4	22.8	23.4	16.7	14.0	17.5	16.0	16.5	19.2	18.1	20.8	18.6	12.8
		(20.9-29.2)	(20.7-28.5)	(18.7-27.4)	(20.3-26.9)	(12.0-22.8)	(11.3-17.3)	(14.3-21.3)	(14.9-17.1)	(14.9-18.1)	(16.6-22.0)	(16.0-20.4)	(16.8-25.5)	(13.0-25.8)	(10.0-16.3)
11		32.8	36.6	33.1	32.9	24.6	22.5	21.0	22.7	26.7	29.8	32.2	34.7	29.4	18.4
		(28.6-37.3)	(31.6-41.8)	(27.5-39.3)	(28.4-37.7)	(20.1-29.8)	(18.1-27.7)	(16.8-26.0)	(19.4-26.5)	(23.6-30.1)	(27.4-32.4)	(28.1-36.6)	(28.5-41.5)	(24.1-35.4)	(15.0-22.3)
Region															
Toronto		—	—	17.3	14.8	19.0	11.1	14.9	11.3	15.1	11.5	17.4	13.8	12.2	7.9
				(12.1-24.1)	(10.2-20.9)	(14.9-23.8)	(7.2-16.7)	(10.6-20.6)	(7.2-17.2)	(12.2-18.6)	(8.3-15.9)	(14.2-21.0)	(9.9-18.9)	(6.6-21.6)	(5.1-12.2)
North		—	—	22.0	21.4	17.2	20.5	21.1	17.4	21.6	16.5	19.2	23.7	19.6	19.0
				(17.0-28.0)	(16.1-28.0)	(15.2-19.5)	(9.4-39.1)	(13.4-31.7)	(14.7-20.6)	(14.9-30.1)	(12.8-21.0)	(17.3-21.2)	(15.4-34.7)	(13.4-27.9)	(13.1-26.8)
West		—	—	22.6	23.4	15.6	14.6	13.6	15.0	17.9	21.1	20.1	23.3	19.9	13.2
				(17.8-28.3)	(18.2-29.4)	(14.2-17.1)	(13.6-15.7)	(11.0-16.7)	(13.8-16.2)	(17.4-18.4)	(18.5-23.9)	(16.8-23.8)	(17.9-29.8)	(15.2-25.6)	(10.6-16.2)
East		—	—	17.2	19.8	13.5	16.1	12.9	14.9	15.3	21.9	19.9	20.8	15.9	11.0
				(11.8-24.4)	(17.8-21.8)	(7.1-24.1)	(13.6-18.9)	(9.2-17.9)	(11.5-19.1)	(13.4-17.4)	(18.7-25.4)	(17.6-22.4)	(16.1-26.6)	(10.4-23.6)	(8.0-14.9)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q. In the **last 12 months**, how often did you **smoke cigarettes**? (Daily smoking includes smoking 1 or more cigarettes daily.)

Source: *OSDUS*, Centre for Addiction & Mental Health

Frequency of Smoking among Smokers

(Tables 3.3.3a, 3.3.3b, Figure 3.3.5)

2003: Grades 7 to 12

■ About 4.4% of all smokers report smoking more than 20 cigarettes daily, an amount roughly equal to one package. Among smokers, the most common quantity consumed is less than 1 cigarette per day (29.1%). There is little variation in the frequency of smoking between males and female smokers.

1999 – 2003: Grades 7 to 12

□ Since 1999, there has been no significant change in the frequency of smoking among smokers.

1979 – 2003: Grades 7, 9, 11

□ Figure 3.3.5 displays the long-term trends in the number of cigarettes smoked daily among smokers (grades 7, 9, and 11 only). The percentage smoking more than 20 cigarettes daily (3.1%) is the lowest it has been since 1979, and is significantly lower than the peak reached in 1995 (8%).

□ The average number of cigarettes smoked daily among smokers has not significantly decreased between 2001 and 2003 (5.8 vs 5 cigarettes). The average number of cigarettes consumed daily was highest in the late 1990s, and appears to be on a downward trend.

Figure 3.3.5
Cigarettes Consumed Daily among Smokers
(Grades 7, 9, 11 only), OSDUS 1979 - 2003

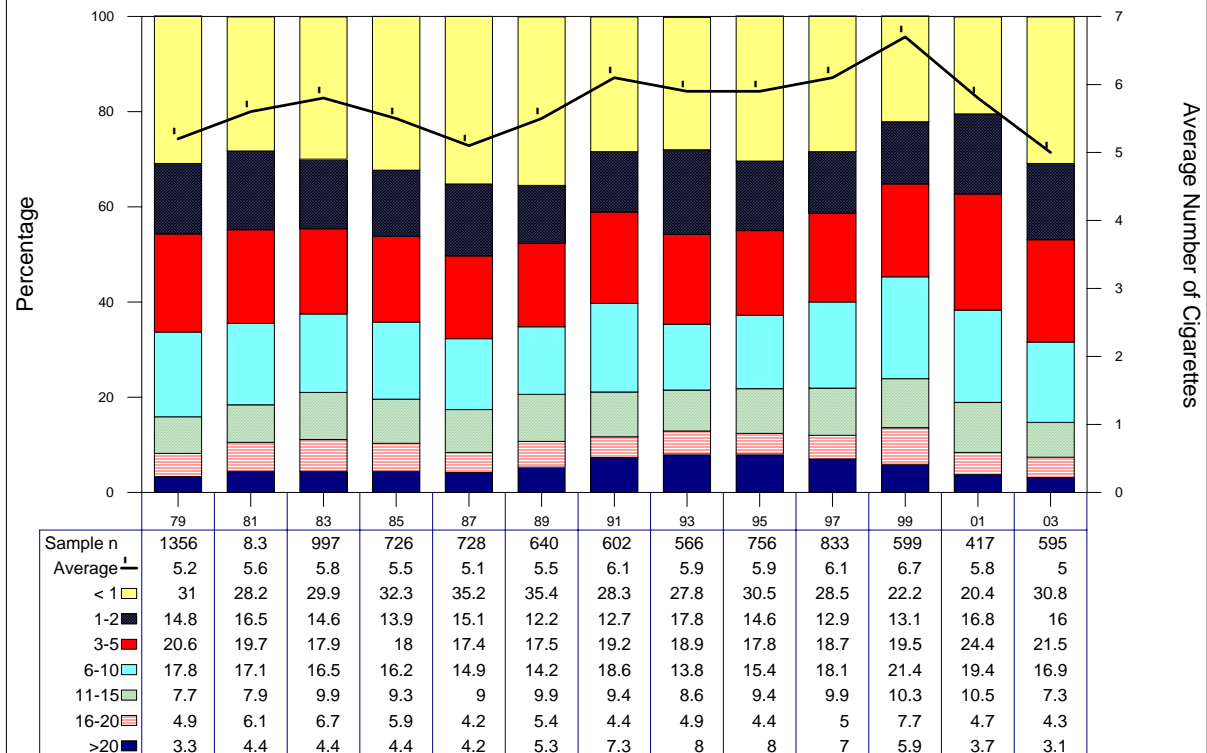


Table 3.3.3a: Usual Number of Cigarettes Smoked Daily During the Past Year among Smokers, 1999 – 2003, Grades 7 to 12

		Percentage of Smokers			
		(N)	1999 (1228)	2001 (861)	2003 (1273)
Less than 1 cigarette daily					
Total			22.3	22.5	29.1
Sex	Male		23.0	21.5	28.2
	Female		21.6	23.6	29.9
1-2 cigarettes daily					
Total			12.7	15.2	16.3
Sex	Male		9.7	15.7	13.9
	Female		15.9	14.8	18.2
3-5 cigarettes daily					
Total			19.6	21.0	20.1
Sex	Male		18.8	18.4	21.0
	Female		20.4	23.6	19.4
6-10 cigarettes daily					
Total			21.0	21.0	18.6
Sex	Male		18.1	22.0	19.4
	Female		24.1	20.1	18.0
11-15 cigarettes daily					
Total			12.6	9.6	7.0
Sex	Male		13.6	10.5	6.6
	Female		11.4	8.8	7.3
16-20 cigarettes daily					
Total			6.2	5.7	4.5
Sex	Male		8.2	6.0	6.0
	Female		4.1	5.4	3.2
More than 20 cigarettes daily					
Total			5.6	4.8	4.4
Sex	Male		8.6	5.9	4.9
	Female		2.4	3.8	4.0

Q. In the **last 12 months**, how often did you **smoke cigarettes**?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.3.3b: Usual Number of Cigarettes Smoked Daily During the Past Year among Smokers, 1987 – 2003, Grades 7, 9, 11 only

	Percentage of Smokers									
	(N)	1987 (728)	1989 (640)	1991 (602)	1993 (566)	1995 (756)	1997 (833)	1999 (599)	2001 (417)	2003 (595)
Less than 1 cigarette daily										
Total		35.2	35.4	28.3	27.8	30.5	28.5	22.2	20.4	30.8
Sex	Male	33.2	37.4	26.5	25.4	27.6	29.7	21.6	18.6	31.5
	Female	37.0	33.5	30.2	29.8	33.1	27.0	22.9	21.8	30.2
1-2 cigarettes daily										
Total		15.1	12.2	12.7	17.8	14.6	12.9	13.1	16.8	16.0
Sex	Male	14.6	11.1	11.6	17.7	14.2	12.3	10.4	18.6	14.5
	Female	15.5	13.2	13.9	18.0	14.9	13.6	15.9	15.3	17.3
3-5 cigarettes daily										
Total		17.4	17.5	19.2	18.9	17.8	18.7	19.5	24.4	21.5
Sex	Male	16.5	15.2	18.6	17.3	17.9	20.9	18.0	23.3	22.3
	Female	18.1	19.6	19.9	20.3	17.7	15.9	21.1	25.3	20.8
6-10 cigarettes daily										
Total		14.9	14.2	18.6	13.8	15.4	18.1	21.4	19.4	16.9
Sex	Male	16.9	14.0	19.0	14.9	13.3	17.1	19.4	18.9	15.0
	Female	13.2	14.4	18.1	12.9	17.4	19.3	23.5	19.9	18.6
11-15 cigarettes daily										
Total		9.0	9.9	9.4	8.6	9.4	9.9	10.3	10.5	7.3
Sex	Male	7.6	11.8	10.0	7.3	12.6	8.4	11.2	12.4	6.9
	Female	10.3	8.2	8.8	9.7	6.3	11.8	9.3	8.9	7.7
16-20 cigarettes daily										
Total		4.2	5.4	4.4	4.9	4.4	5.0	7.7	4.7	4.3
Sex	Male	4.7	4.4	4.7	3.0	6.2	5.4	10.7	3.6	6.1
	Female	3.8	6.4	4.2	7.3	2.6	4.4	4.6	5.7	2.8
More than 20 cigarettes daily										
Total		4.2	5.3	7.3	8.0	8.0	7.0	5.8	3.7	3.1
Sex	Male	6.5	6.0	9.6	10.1	8.2	6.1	8.7	4.6	3.8
	Female	2.2	4.7	4.8	6.3	7.9	8.0	2.8	3.0	2.6

Q. In the last 12 months, how often did you smoke cigarettes?

Source: OSDUS, Centre for Addiction & Mental Health

Lifetime Smoking

(Figures 3.3.6, 3.3.7)

2003: Grades 7 to 12

■ Although 19.2% of all students in grades 7 to 12 are considered to be smokers, about half (43%) have tried a cigarette at some point in their life. About 15% of students have smoked a few puffs, while 17.4% have consumed less than 100 cigarettes, and 10.3% have consumed 100 or more cigarettes in their lifetime.

1991 - 2003: Grades 7, 9, 11

□ Figure 3.3.7 displays the long-term trends in lifetime smoking status. Since 1997, more students are declaring that they have never smoked or have only smoked a few puffs in their lifetime.

Smoking Dependence

(Figure 3.3.8)

To gauge smoking dependence, a random-half sample of students was asked about time to first cigarette: “*How soon after you wake up do you usually smoke your first cigarette?*” Smokers who have their first cigarette within the first 30 minutes upon waking may be considered nicotine dependent (Heatherton, Kozlovski, Frecker, Rickert, & Robinson, 1989).

■ The 2003 survey found that 22.6% of all smokers smoke their first cigarette within the first 30 minutes upon waking. Male (21.3%) and female (23.9%) smokers are equally likely to smoke within the first half-hour after waking. While there is some variation by grade, these differences are not statistically significant. Despite some variation, there is no significant difference by region.

Figure 3.3.6
Lifetime Cigarette Use (Grades 7 to 12), OSDUS 2003

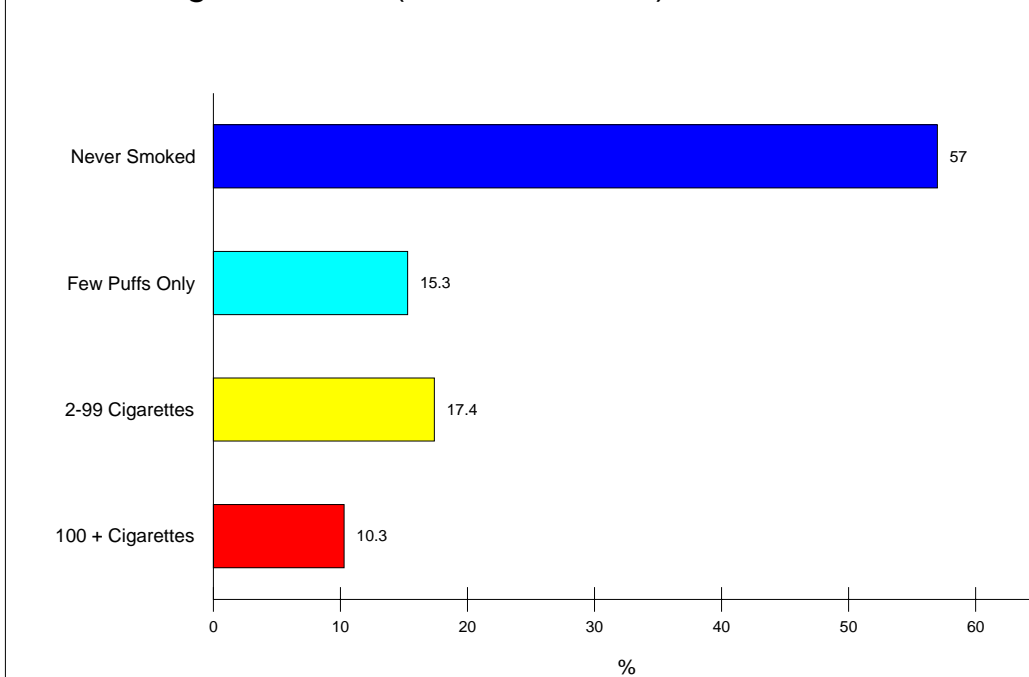


Figure 3.3.7
Lifetime Smoking Status (Grades 7, 9, 11 only), 1991 - 2003

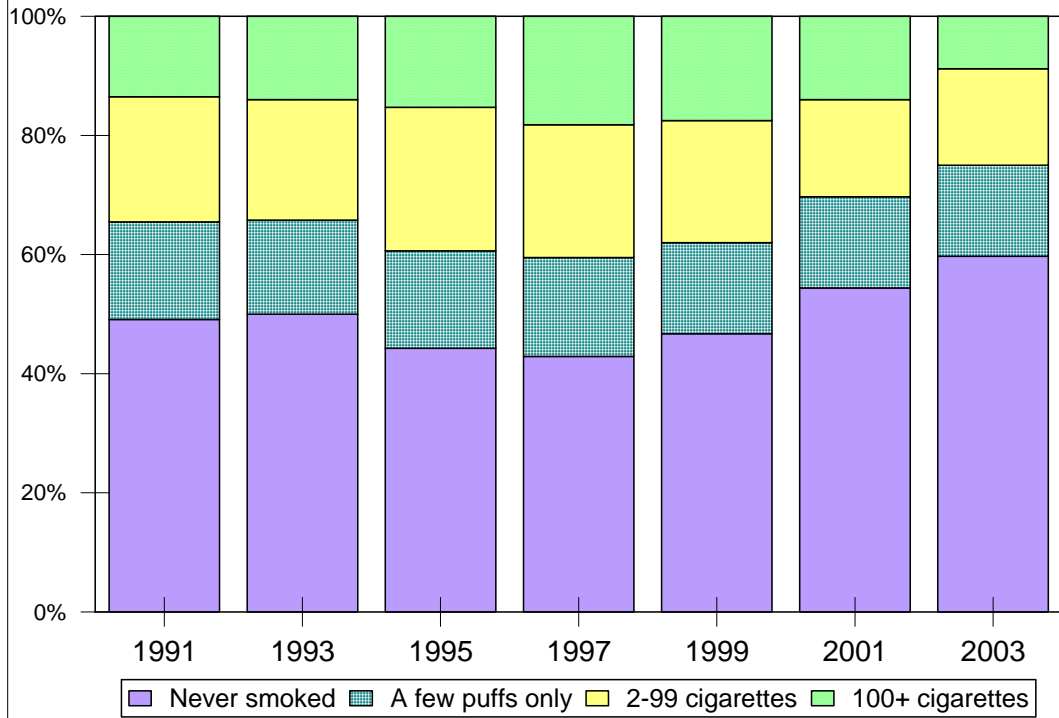
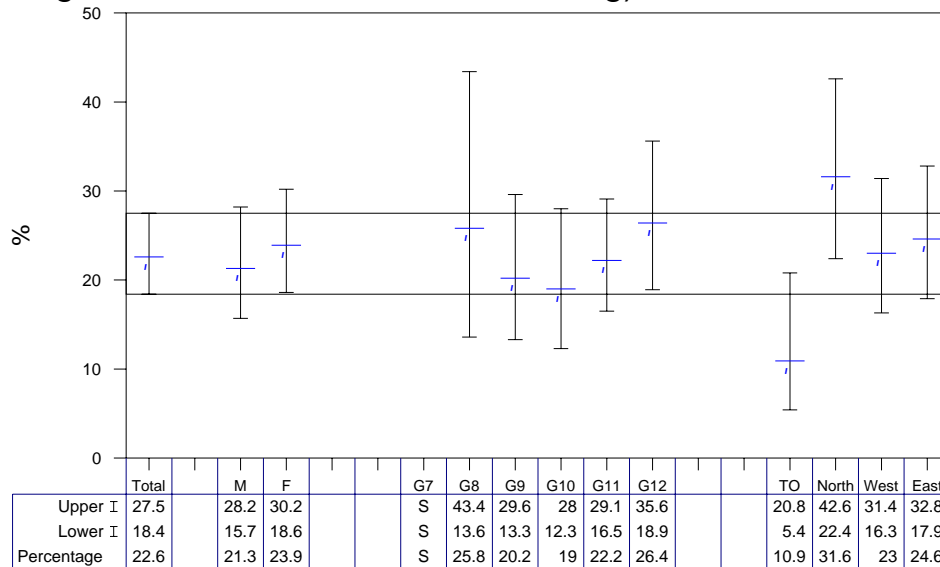


Figure 3.3.8
Percentage of Smokers Reporting Smoking Dependence (first cigarette within 30 minutes of waking), OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate; "S" = estimate suppressed.

Attempts to Quit Smoking

(Table 3.3.4)

2003: Grades 7 to 12

We asked smokers about their attempts to quit smoking. Specifically, among a random half-sample of about 2,000 students, we asked: (1) whether they tried to quit smoking during the 12 months before the survey; (2) the number of times they tried to quit smoking; and (3) the duration of abstinence on their last attempt.

- In 2003, 62.4% of smokers in all grades reported at least one quit attempt in the 12 months before the survey. Among the 373 smokers who attempted to quit, most report attempting to do so once (42.7%) or twice (27.0%).

- Table 3.3.4 also shows that smokers have difficulty quitting, about one-third could not abstain for longer than one week, while only one-quarter (27.7%) managed to abstain for more than three months.

1999 – 2003: Grades 7, 9, 11

- Since 1999, there has been little variation in the proportion of smokers who attempted to quit smoking (stable at about two-thirds of smokers).

Table 3.3.4: Attempts to Quit Smoking, 1999-2003, Grades 7 to 12

	1999	2001	2003
(Among Smokers)	(N=549)	(N=397)	(N=592)
Tried to quit smoking during the past 12 months	66.2	64.1	62.4
(Among Quitters)	(N=363)	(N=269)	(N=373)
Number of times tried to quit:			
Once	29.9	38.9	42.7
Twice	26.4	25.3	27.0
Three times	17.4	19.9	11.5
Four or more times	26.2	15.9	18.8
Duration of abstinence on last quitting attempt:			
Less than one week	48.2	47.1	33.3
One week to one month	22.1	17.9	25.7
One to three months	9.6	10.5	13.3
More than three months	20.1	24.5	27.7

Notes: (1) entries are percentages; (2) based on a random half sample in each year.

Source: OSDUS, Centre for Addiction & Mental Health

Cigarette Purchasing

(Table 3.3.5)

One of the more salient aspects of public health policies regarding smoking has been adolescent access to tobacco products. In 1994, the Ontario government raised the legal age to purchase tobacco from 18 to 19 years, and removed all sales of tobacco from pharmacies.

The *OSDUS* asked a random half sample of students several questions regarding the purchase of cigarettes: "*In the last four weeks, how often did you buy cigarettes ...at a small grocery or corner store? ... at a supermarket? ...at a restaurant, gas station or bar?*"

2003: Grades 7 to 12

- In 2003, 8.6% of underage students purchased cigarettes at any one of the three retail outlets during the 4 weeks before the survey.
- Purchasing varied by age: 3.0% of students aged 15 and under, and 15.8% of students aged 16 to 18 years, successfully purchased cigarettes.
- Cigarettes are most commonly purchased at corner stores (8.2%) followed by restaurants, gas stations and bars (6.9%) and supermarkets (6.5%).

1999 – 2003: Grades 7 to 12

- Table 3.3.5 displays the percentage of underage students who purchased cigarettes from the three retail outlets, from 1999 to 2003. Cigarette purchasing behaviour at any location by underage students appears to have declined since 1999 (14.8% vs 8.6% in 2003).

Table 3.3.5 Percentage of *Underage Students* (18 years-old and under) who Report Purchasing Cigarettes During the Past 4 Weeks, 1999 – 2003, Grades 7 to 12

	(N)	1999 (1168)	2001 (1837)	2003 (3152)
Purchased cigarettes at a small grocery or corner store				
Total		14.0	10.8	8.2
15 years and under		7.2	7.0	2.8
16-18 years-old		25.2	18.7	15.2
Purchased at a supermarket				
Total		6.4	5.3	6.5
15 years and under		3.6	3.7	2.2
16-18 years-old		11.2	8.7	12.1
Purchased at a restaurant, gas station, or bar				
Total		10.8	7.6	6.9
15 years and under		4.3	4.4	2.1
16-18 years-old		21.4	14.2	13.1
Any purchase				
Total		14.8	11.5	8.6
15 years and under		7.4	7.2	3.0
16-18 years-old		26.8	20.3	15.8

Note: Based on a random half sample in each year.
Source: OSDUS, Centre for Addiction & Mental Health

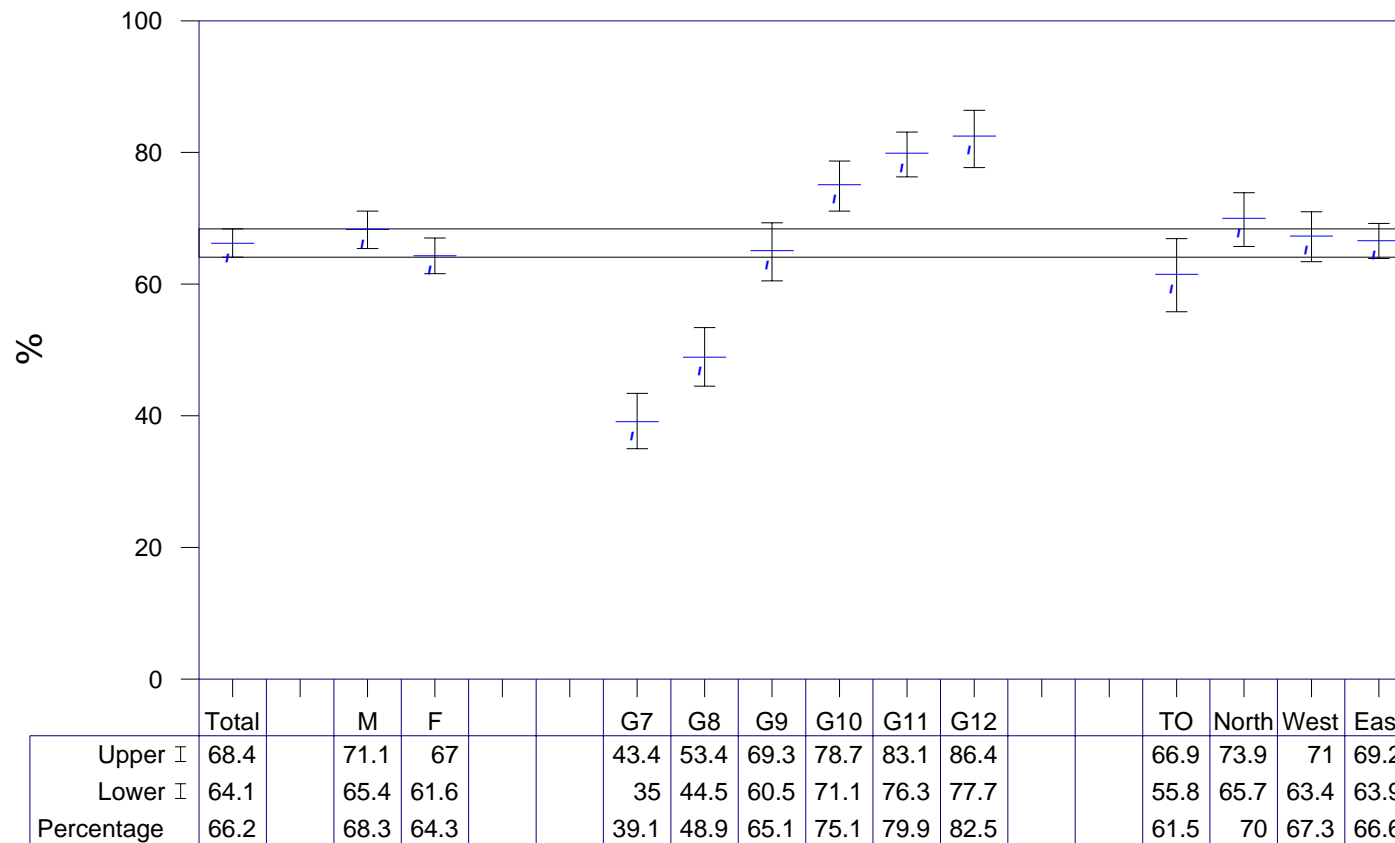
3.4 Alcohol Use

Past Year Use of Alcohol

(Tables 3.4.1a, 3.4.1b; Figures 3.4.1, 3.4.2)

	Drinking in 2003 (Grades 7 to 12)	Trends in Drinking
Total Sample	<ul style="list-style-type: none"> Overall, 66.2% of students report drinking alcohol during the 12 months before the survey. We estimate that between 64.1% and 68.4% of all Ontario students used alcohol. The percentage of 66.2% represents about 641,700 students in grades 7 to 12 in Ontario. 	<ul style="list-style-type: none"> The percentage of all students drinking in the past year remained stable between 2001 (63.9%) and 2003 (66.2%), and has remained stable since 1999. In the long-term, rates of drinking among grades 7, 9, and 11 declined steadily between 1977 (72.8%) and 1993 (53.6%). However, since 1993, rates of drinking have steadily increased, although the current rate falls below values from the late 1970s.
Sex	<ul style="list-style-type: none"> The prevalence of drinking is significantly higher among males (68.3%) than females (64.3%). 	<ul style="list-style-type: none"> Between 2001 and 2003, rates of drinking remained relatively stable among males (64.6% vs 68.3%) and females (63.2% vs 64.3%). For both sexes, drinking declined during the late 1980s, but increased during the late 1990s, especially among males.
Grade	<ul style="list-style-type: none"> Drinking increases significantly with grade: rates climb more than ten percentage points by each grade, between grades 7 and 11 (from 39.1% to 79.9%). Drinking rates among grades 11th- and 12th-graders are similar (about 80%). 	<ul style="list-style-type: none"> Rates of drinking have not changed between 1999 and 2003 among any of the grades. However, drinking rates for 7th- and 9th-graders are significantly higher in 2003 compared to a decade ago.
Region	<ul style="list-style-type: none"> Rates of drinking do not differ significantly by region: about two-thirds of students in each of the four regions drink alcohol. 	<ul style="list-style-type: none"> Between 1999 and 2003, drinking did not significantly change for any region. Over the long-term, most regions show the general decreasing trend during the 1980s and a weak, but steady, increase during the early 1990s.

Figure 3.4.1
Past Year Alcohol Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.4.1a: Percentage Reporting *Alcohol Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(N)	(3898)	(6616)
Total		66.0	63.9	66.2
(95% CI)		(63.6-68.3)	(60.8-67.0)	(64.1-68.4)
Sex	Male	69.7	64.6	68.3
		(66.6-72.6)	(61.1-68.0)	(65.4-71.1)
	Female	62.2	63.2	64.3
		(59.2-65.2)	(59.0-67.2)	(61.6-67.0)
Grade	7	39.7	36.1	39.1
		(33.8-45.9)	(29.6-43.1)	(35.0-43.4)
	8	53.7	52.0	48.9
		(49.2-58.3)	(45.5-58.4)	(44.5-53.4)
	9	63.1	60.9	65.1
		(58.0-67.9)	(54.3-67.1)	(60.5-69.3)
	10	74.9	76.8	75.1
		(69.2-79.8)	(73.0-80.2)	(71.1-78.7)
	11	82.0	81.0	79.9
		(77.7-85.6)	(75.1-85.8)	(76.3-83.1)
	12	84.6	80.0	82.5
		(80.8-87.8)	(72.5-85.9)	(77.7-86.4)
Region	Toronto	56.1	56.3	61.5
		(49.4-62.5)	(44.7-67.3)	(55.8-66.9)
	North	75.9	72.3	70.0
		(69.3-81.5)	(68.2-76.0)	(65.7-73.9)
	West	69.7	66.2	67.3
		(66.1-73.2)	(62.3-70.0)	(63.4-71.0)
	East	63.9	63.0	66.6
		(59.8-67.8)	(58.7-67.2)	(63.9-69.2)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you drink **alcohol** - liquor (rum, whiskey, etc.), wine or beer? (Use includes drinking at a special event, but excludes a sip.)

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.4.2
Past Year Alcohol Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

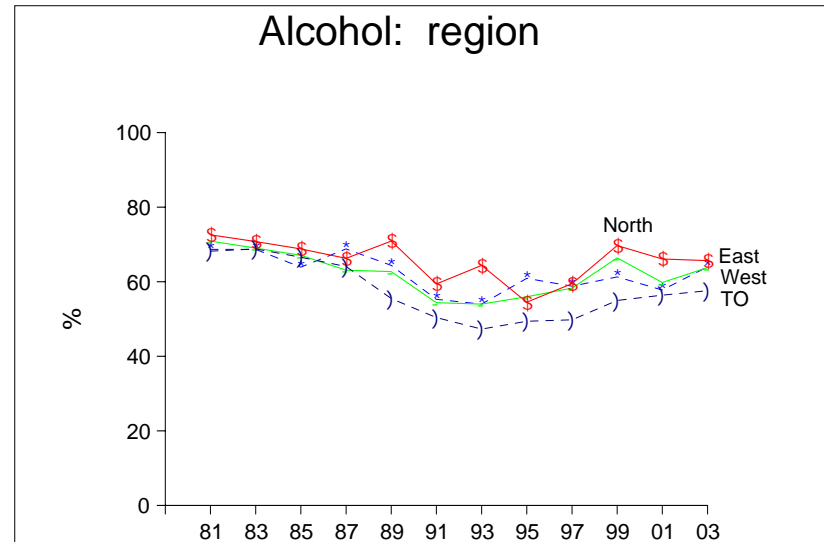
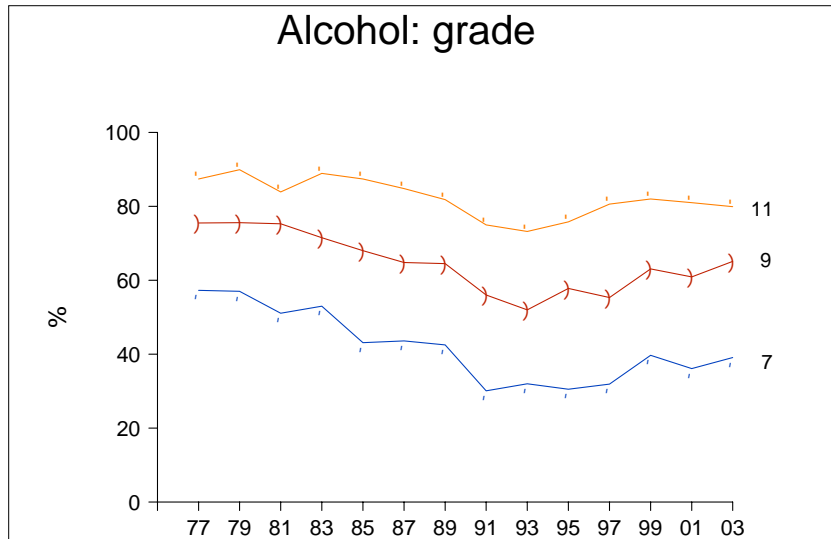
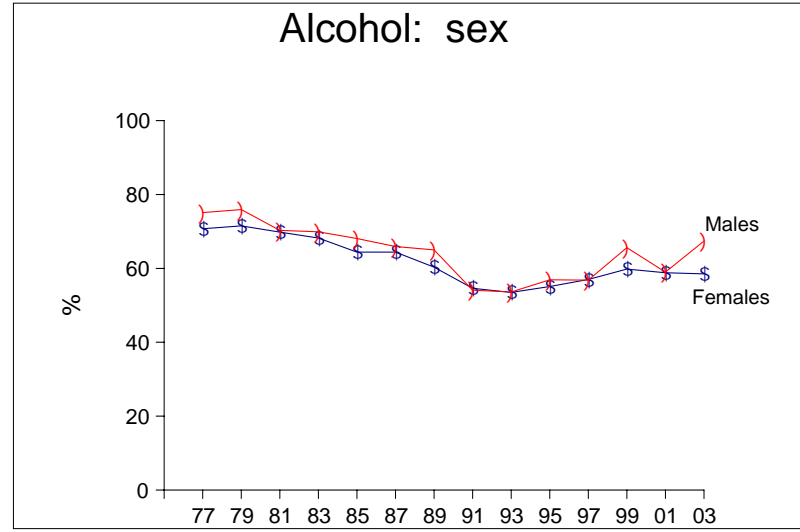
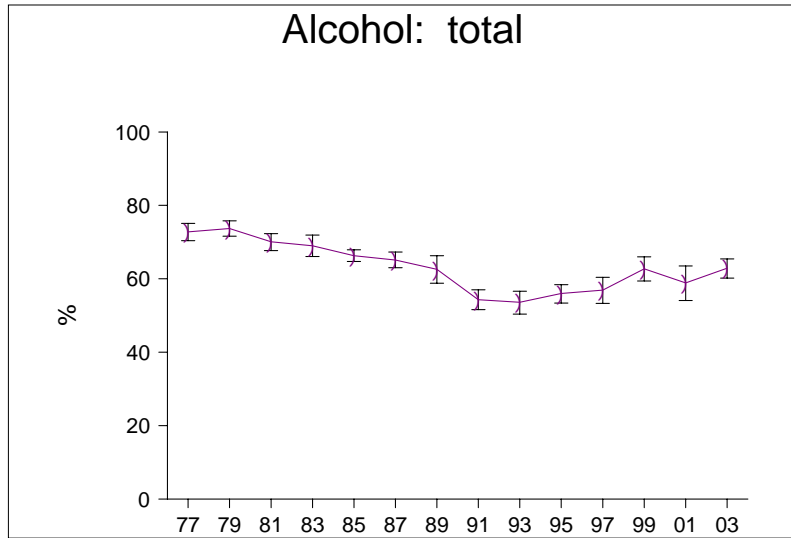


Table 3.4.1b: Percentage Reporting *Alcohol Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total	72.8	73.7	70.1	69.0	66.3	65.1	62.6	54.3	53.6	56.0	56.9	62.7	58.9	62.9
(95% CI)	(70.4-75.1)	(71.6-75.8)	(67.7-72.3)	(66.1-71.9)	(64.7-67.9)	(63.0-67.3)	(58.8-66.3)	(51.6-57.0)	(50.4-56.6)	(53.4-58.4)	(53.3-60.4)	(59.4-66.0)	(54.1-63.5)	(60.2-65.4)
Sex														
Male	75.1	75.9	70.3	69.9	68.1	65.9	65.0	54.1	53.6	56.9	56.8	65.6	59.0	67.4
	(72.5-77.6)	(73.6-78.0)	(68.0-72.5)	(66.4-73.2)	(65.1-71.0)	(63.6-68.2)	(60.5-69.3)	(50.8-57.4)	(50.4-56.9)	(53.8-59.9)	(52.6-60.9)	(61.5-69.6)	(54.2-63.7)	(64.2-70.5)
Female	70.7	71.5	69.8	68.2	64.4	64.4	60.3	54.6	53.5	55.1	57.0	59.8	58.8	58.5
	(67.5-73.8)	(68.6-74.2)	(66.0-73.3)	(65.4-70.9)	(62.1-66.6)	(61.2-67.5)	(56.3-64.2)	(51.4-57.7)	(48.5-58.4)	(51.6-58.6)	(53.3-60.6)	(55.5-63.9)	(52.2-65.1)	(54.9-61.9)
Grade														
7	57.3	57.0	51.1	53.0	43.1	43.6	42.5	30.1	32.0	30.5	31.9	39.7	36.1	39.1
	(53.5-61.0)	(53.6-60.4)	(48.5-53.7)	(46.3-60.0)	(39.6-46.6)	(39.5-47.8)	(38.5-46.6)	(26.8-33.6)	(25.6-39.1)	(27.8-33.3)	(26.1-38.3)	(33.8-45.9)	(29.6-43.1)	(35.0-43.4)
9	75.5	75.6	75.3	71.5	68.0	64.8	64.5	56.0	52.0	57.8	55.3	63.1	60.9	65.1
	(72.7-78.1)	(72.9-78.1)	(71.4-78.9)	(68.6-74.3)	(65.8-70.1)	(59.0-70.2)	(58.1-70.5)	(52.1-59.8)	(49.2-54.7)	(54.5-61.0)	(47.4-63.0)	(58.0-67.9)	(54.3-67.1)	(60.5-69.3)
11	87.4	89.9	83.9	88.9	87.4	84.8	81.8	75.0	73.2	75.8	80.6	82.0	81.0	79.9
	(85.1-89.3)	(87.0-92.2)	(80.3-87.0)	(86.3-91.1)	(84.7-89.7)	(81.1-87.9)	(73.1-88.2)	(69.7-79.6)	(68.7-77.3)	(69.3-81.3)	(76.3-84.3)	(77.7-85.6)	(75.1-85.8)	(76.3-83.1)
Region														
Toronto	—	—	68.2	68.8	66.6	64.1	55.5	50.4	47.3	49.4	49.8	55.0	56.4	57.6
			(60.5-75.0)	(61.1-75.6)	(62.0-71.0)	(58.1-69.7)	(40.9-69.2)	(44.1-56.8)	(41.3-53.4)	(40.3-58.5)	(39.5-60.1)	(47.6-62.2)	(41.4-70.3)	(50.1-64.7)
North	—	—	72.6	70.8	68.8	66.3	70.9	59.4	64.4	54.5	59.5	69.7	66.1	65.7
			(61.9-81.2)	(65.7-75.4)	(64.6-72.7)	(62.1-70.2)	(58.2-81.0)	(50.4-67.8)	(50.3-76.4)	(49.4-59.6)	(54.7-64.1)	(60.6-77.5)	(60.6-71.3)	(60.3-70.8)
West	—	—	70.9	69.0	67.1	63.1	62.7	54.4	54.0	56.0	58.3	66.4	59.8	63.8
			(68.4-73.3)	(64.9-72.9)	(64.5-69.6)	(59.2-66.8)	(57.5-67.7)	(51.9-57.0)	(48.2-60.0)	(52.8-59.2)	(52.9-63.5)	(61.1-71.4)	(54.6-64.8)	(59.3-68.1)
East	—	—	68.7	68.7	63.9	68.8	64.4	55.3	54.0	60.9	58.8	61.3	57.8	64.0
			(64.7-72.4)	(62.4-74.3)	(61.6-66.2)	(66.7-70.8)	(60.6-68.0)	(48.6-61.8)	(50.7-57.3)	(57.4-64.3)	(52.8-64.6)	(55.5-66.8)	(50.8-64.4)	(60.8-67.0)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you drink **alcohol** - liquor (rum, whiskey, etc.), wine or beer? (Use includes drinking at a special event, but excludes a sip.)

Source: *OSDUS*, Centre for Addiction & Mental Health

Frequency of Drinking

(Tables 3.4.2a – 3.4.3b; Figure 3.4.3)

2003: Grades 7 to 12

■ As seen in Table 3.4.2a, 25.1% of all students (37.8% of drinkers, as seen in Table 3.4.3a) restrict their drinking to special occasions. Just over one-in-ten (11.7%) students drink at least once a week (17.7% of drinkers). Only a very small number of students drink on a daily basis (less than 0.5%).

1981 – 2003: Grades 7, 9, 11

□ Figure 3.4.3 and Table 3.4.3b present trends in the frequency of past year drinking among drinkers between 1981 and 2003. Between 2001 and 2003, the average number of drinking occasions per year remained stable (from 26.5 to 29.1).

Despite fluctuations in the frequency of drinking among the total sample and among drinkers, there are no dominant long-term or short-term changes within either group.

Table 3.4.2a: Frequency of Alcohol Use During the Past Year among the Total Sample, 1999 – 2003, Grades 7 to 12

		Percentage of Total Sample		
		1999 (4447)	2001 (3898)	2003 (6616)
(N)				
None				
Total		34.0	36.1	33.8
Sex	Male	30.3	35.4	31.7
	Female	37.8	36.8	35.7
On Special Occasions only				
Total		23.7	24.6	25.1
Sex	Male	23.8	22.4	25.2
	Female	23.6	26.9	24.9
Once a Month or Less				
Total		16.1	14.7	16.0
Sex	Male	16.0	14.1	14.9
	Female	16.3	15.4	17.3
2-3 Times a Month				
Total		13.0	14.2	13.0
Sex	Male	13.3	14.8	11.9
	Female	12.6	13.6	14.2
At Least Once a Week				
Total		12.3	10.0	11.7
Sex	Male	15.1	13.0	14.0
	Female	9.4	7.1	9.6
Almost Daily				
Total		0.9	†	†
Sex	Male	1.5	0.5	0.6
	Female	†	†	†

Notes: (1) † estimate suppressed or less than 0.5%; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you drink **alcohol** - liquor (rum, whiskey, etc.), wine or beer?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.2b: Frequency of Alcohol Use During the Past Year among the *Total Sample*, 1987 – 2003, Grades 7, 9, 11 only

		Percentage of Total Sample									
		(N)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
None											
Total			34.9	37.4	45.7	46.4	44.0	43.1	37.3	41.1	37.2
Sex	Male		34.1	35.0	45.9	46.4	43.1	43.2	34.3	41.0	32.6
	Female		35.6	39.7	45.4	46.5	44.9	43.0	40.2	41.2	41.5
On Special Occasions only											
Total			30.9	28.4	23.0	25.0	21.7	20.2	24.1	24.1	25.2
Sex	Male		30.0	29.1	21.3	24.8	20.3	20.8	24.4	23.0	25.8
	Female		31.8	27.7	24.9	25.2	23.1	19.8	23.8	25.2	24.5
Once a Month or Less											
Total			14.5	13.8	13.5	13.2	15.4	15.3	15.0	14.0	14.6
Sex	Male		13.3	13.0	12.9	12.7	16.0	13.3	14.7	12.1	15.5
	Female		15.6	14.5	14.2	13.7	14.9	17.1	15.4	16.0	13.8
2-3 Times a Month											
Total			10.2	10.1	9.2	8.5	11.4	12.3	11.7	12.2	11.9
Sex	Male		11.4	10.3	8.5	7.5	11.4	12.2	11.9	12.4	12.8
	Female		9.0	9.9	9.9	9.4	11.4	12.4	11.5	12.0	11.1
At Least Once a Week											
Total			8.9	10.1	8.3	6.5	7.1	8.6	11.0	8.3	10.8
Sex	Male		10.1	12.1	10.7	8.3	8.7	9.7	13.0	11.2	12.8
	Female		7.7	8.1	5.5	4.7	5.6	7.6	9.0	5.4	8.8
Almost Daily											
Total			0.7	†	†	†	†	0.5	0.9	†	†
Sex	Male		1.2	0.5	0.6	†	0.5	0.8	1.6	†	0.6
	Female		†	†	†	†	†	†	†	†	†

Note: † estimate suppressed or less than 0.5%.

Q: In the **last 12 months**, how often did you drink **alcohol** - liquor (rum, whiskey, etc.), wine or beer?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.4.3a: Frequency of Alcohol Use During the Past Year among Drinkers, 1999 – 2003, Grades 7 to 12

		Percentage of Drinkers		
(N)		1999 (2914)	2001 (2484)	2003 (4421)
On Special Occasions only				
Total		36.0	38.5	37.8
Sex	Male	34.2	34.6	36.9
	Female	38.0	42.5	38.8
Once a Month or Less				
Total		24.4	23.0	24.2
Sex	Male	23.0	21.8	23.0
	Female	26.2	24.3	25.4
2-3 Times a Month				
Total		19.6	22.3	19.6
Sex	Male	19.0	22.9	18.7
	Female	20.3	21.6	20.5
At Least Once a Week				
Total		18.6	15.7	17.7
Sex	Male	21.6	20.0	20.5
	Female	15.2	11.2	14.9
Almost Daily				
Total		1.3	0.5	0.6
Sex	Male	2.1	0.7	0.9
	Female	†	†	†

Notes: (1) † estimate suppressed, or less than 0.5%; (2) no significant differences between 1999 and 2003.
Source: OSDUS, Centre for Addiction & Mental Health

Figure 3.4.3
Frequency of Drinking During the Past Year among Drinkers (Grades 7, 9, 11 only), OSDUS 1981 - 2003

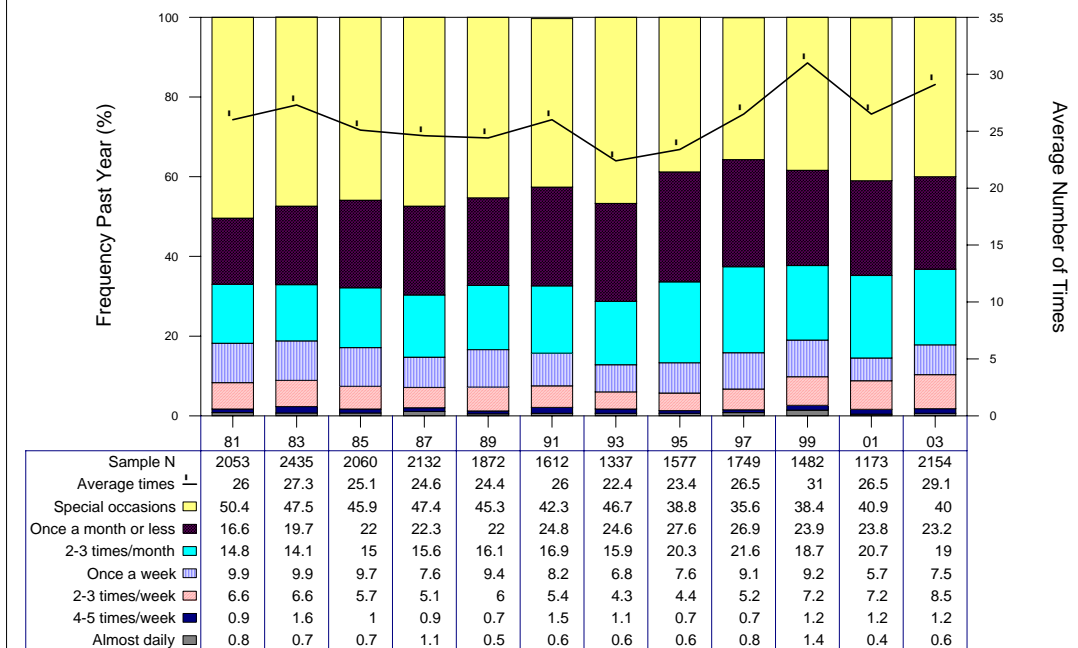


Table 3.4.3b: Frequency of Alcohol Use During the Past Year among *Drinkers*, 1987 – 2003, Grades 7, 9, 11 only

		Percentage of Drinkers								
		1987 (2132)	1989 (1872)	1991 (1612)	1993 (1337)	1995 (1577)	1997 (1749)	1999 (1482)	2001 (1173)	2003 (2154)
(N)										
On Special Occasions only										
Total		47.4	45.3	42.3	46.7	38.8	35.6	38.4	40.9	40.0
Sex	Male	45.5	44.7	39.4	46.2	35.7	36.5	37.2	39.0	38.3
	Female	49.3	45.9	45.6	47.2	41.9	34.8	39.7	42.8	41.9
Once a Month or Less										
Total		22.3	22.0	24.8	24.6	27.6	26.9	23.9	23.8	23.2
Sex	Male	20.2	20.0	23.8	23.7	28.2	23.5	22.3	20.5	22.9
	Female	24.3	24.1	26.0	25.6	27.0	30.0	25.7	27.3	23.6
2-3 Times a Month										
Total		15.6	16.1	16.9	15.9	20.3	21.6	18.7	20.7	19.0
Sex	Male	17.2	15.9	15.8	14.0	20.0	21.4	18.1	21.0	18.9
	Female	14.0	16.4	18.2	17.7	20.6	21.8	19.3	20.4	19.0
At Least Once a Week										
Total		13.6	16.1	15.2	12.2	12.7	15.1	17.6	14.1	17.1
Sex	Male	15.3	18.7	19.8	15.6	15.2	17.1	19.9	18.9	19.0
	Female	12.0	13.5	10.1	8.9	10.2	13.3	15.1	9.2	15.1
Almost Daily										
Total		1.1	0.5	0.6	0.6	0.6	0.8	1.4	0.5	0.6
Sex	Male	1.8	0.7	1.1	0.6	0.9	1.5	2.5	0.6	0.8
	Female	†	†	†	0.7	†	†	†	†	†

Note: † estimate suppressed or less than 0.5%.

Q: In the **last 12 months**, how often did you drink **alcohol** - liquor (rum, whiskey, etc.), wine or beer?

Source: *OSDUS*, Centre for Addiction & Mental Health

Heavy Drinking among the Total Sample

(Tables 3.4.4 – 3.4.9; Figures 3.4.4 – 3.4.6)

We use two indicators of heavy drinking in this report: consuming 5 or more drinks on a single occasion (“binge drinking”), and becoming drunk (i.e., drinking until becoming ill). Both refer to the past-4-week period.

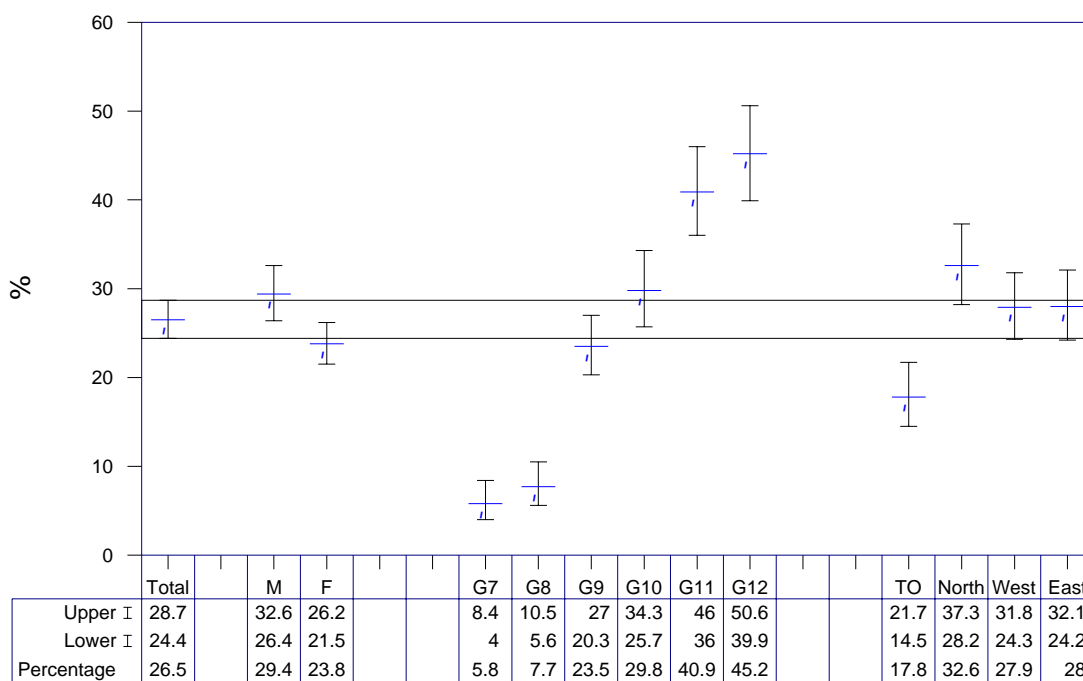
	Heavy Drinking in 2003 (Grades 7 to 12)	Trends in Heavy Drinking
Total Sample	<ul style="list-style-type: none"> ■ Overall, 26.5% of students report binge drinking at least once during the 4 weeks before the survey. This percentage represents about 255,900 students in grades 7 through 12. ■ A similar percentage (23.9%) reported becoming drunk at least once during the past 4 weeks, representing about 225,800 students across Ontario. ■ About one-in-ten (9.9%) of all students report binge drinking 2 to 3 times during the 4 weeks before the survey. Another 6.4% report binge drinking 4 or more times (see Table 3.4.5). 	<ul style="list-style-type: none"> □ In 2003, the overall percentage reporting binge drinking during the past 4 weeks, as well as the percentage becoming drunk, did not significantly change compared to 2001. Rates of heavy drinking have been stable since 1999. □ In the long-term, rates of binge drinking among grades 7, 9, and 11 climbed steadily during the late 1990s (from an all-time low of 15% in 1993 to an all-time high of 26% in 1999). The current rate remains in this higher range. □ Drunkenness has followed a similar pattern, climbing steadily over the 1990s to an all-time high of 23.6% in 2003.
Sex	<ul style="list-style-type: none"> ■ Binge drinking is significantly higher among males (29.4%) than females (23.8%). However, reported drunkenness is not significantly different between males and females (25.8% vs 22.2%). 	<ul style="list-style-type: none"> □ Between 1999 and 2003, heavy drinking did not change for either males or females. □ Increases in the two indicators of heavy drinking over the last decade are more prominent for males, than for females.
Grade	<ul style="list-style-type: none"> ■ Heavy drinking increases significantly with grade: binge drinking is lowest among 7th-graders (5.8%) and climbs to a high of 45.2% among 12th-graders. Drunkenness is lowest among 7th-graders (3.6%) and peaks in grades 11 and 12 (about 40%). 	<ul style="list-style-type: none"> □ Heavy drinking did not change significantly between 1999 and 2003 among any of the grades. □ Compared to 1993, current indicators of heavy drinking are higher for grades 9 and 11.

Region ■ Heavy drinking varies significantly by region. Toronto students are the least likely to report binge drinking (17.8%) and drunkenness (13.7%) compared to students in the other three regions.

□ Rates of drinking have not significantly changed since 1999 among any region.

□ For all regions, except the North, the two indicators of heavy drinking have been moving upward since 1993/1995. Among Northern students, reports of drunkenness have significantly increased from 13.3% in 1981 to 32.1% in 2003.

Figure 3.4.4
Binge Drinking (in Past 4 Weeks) by Sex, Grade and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.4.4: Percentage Reporting *Binge Drinking* at Least Once During the Past 4 Weeks, 1999 – 2003, Grades 7 to 12

		Percentage of Total Sample		
		1999	2001	2003
		(N)	(4447)	(3898)
			(6616)	
Total		27.6	26.0	26.5
(95% CI)		(25.1-30.3)	(23.3-28.8)	(24.4-28.7)
Sex	Male	32.1	29.4	29.4
		(29.2-35.1)	(25.5-33.6)	(26.4-32.6)
	Female	23.0	22.6	23.8
		(19.7-26.8)	(20.1-25.4)	(21.5-26.2)
Grade	7	5.0	4.2	5.8
		(3.5-7.1)	(2.7-6.7)	(4.0-8.4)
	8	13.8	12.0	7.7
		(11.1-16.9)	(8.5-16.8)	(5.6-10.5)
	9	23.8	21.7	23.5
		(18.7-29.7)	(17.0-27.2)	(20.3-27.0)
	10	35.2	34.7	29.8
		(29.7-41.0)	(30.6-39.0)	(25.7-34.3)
	11	45.7	41.7	40.9
		(39.1-52.5)	(36.1-47.5)	(36.0-46.0)
	12	44.6	48.0	45.2
		(38.6-50.7)	(37.1-59.0)	(39.9-50.6)
Region	Toronto	16.3	18.1	17.8
		(13.0-20.3)	(12.0-26.4)	(14.5-21.7)
	North	37.4	30.9	32.6
		(31.1-44.2)	(26.0-36.3)	(28.2-37.3)
	West	32.4	28.8	27.9
		(27.9-37.3)	(24.6-33.4)	(24.3-31.8)
	East	24.8	25.6	28.0
		(21.1-28.9)	(21.5-30.3)	(24.2-32.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.

Q: How many times in the **last 4 weeks** have you had **5 or more drinks of alcohol** on the **same occasion**?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.5: Frequency of Binge Drinking During the Past 4 Weeks among the *Total Sample*, 1999 – 2003, Grades 7 to 12

	(N)	Percentage of Total Sample		
		1999 (4447)	2001 (3898)	2003 (6616)
Total				
Never		72.4	74.0	73.5
Once		11.3	10.7	10.1
2 to 3 times		10.2	9.9	9.9
4 + times		6.1	5.4	6.4
Males				
Never		67.9	70.6	70.6
Once		11.0	10.8	10.7
2 to 3 times		12.8	11.4	10.2
4 + times		8.3	7.1	8.4
Females				
Never		77.0	77.4	76.2
Once		11.7	10.6	9.6
2 to 3 times		7.5	8.4	9.6
4 + times		3.9	3.6	4.5
Grade 7				
Never		95.0	95.8	94.2
Once		3.2	2.2	3.2
2 to 3 times		1.1	1.5	2.3
4 + times		0.6	0.5	†
Grade 8				
Never		86.2	88.0	92.3
Once		7.6	8.7	5.0
2 to 3 times		4.4	2.8	2.0
4 + times		1.8	†	0.7
Grade 9				
Never		76.2	78.3	76.5
Once		11.4	10.6	10.3
2 to 3 times		8.8	7.9	9.3
4 + times		3.6	3.2	3.9
Grade 10				
Never		64.8	65.3	70.2
Once		12.6	12.9	11.5
2 to 3 times		16.3	14.6	11.0
4 + times		6.4	7.1	7.3
Grade 11				
Never		54.3	58.3	59.1
Once		16.3	15.0	13.0
2 to 3 times		17.1	16.1	15.8
4 + times		12.3	10.5	12.1
Grade 12				
Never		55.4	52.0	54.8
Once		17.4	16.5	16.2
2 to 3 times		14.2	18.5	16.6
4 + times		13.1	13.0	12.4

Notes: (1) † estimate suppressed or less than 0.5%; (2) no significant differences between 1999 and 2003.

Q: How many times in the **last 4 weeks** have you had **5 or more drinks of alcohol** on the **same occasion**?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.6: Percentage Reporting *Becoming Drunk* at Least Once during the Past 4 Weeks, 1999 – 2003, Grades 7 to 12

		Percentage of Total Sample		
		1999	2001	2003
(N)		(2148)	(1837)	(3152)
Total		25.0	26.0	23.9
(95% CI)		(22.6-27.7)	(23.1-29.2)	(21.4-26.6)
Sex	Male	27.4	28.5	25.8
		(24.6-30.3)	(24.4-32.9)	(22.6-29.3)
	Female	22.6	23.7	22.2
		(19.4-26.2)	(20.3-27.4)	(19.0-25.7)
Grade	7	4.3	4.8	3.6
		(2.8-6.6)	(2.8-8.1)	(2.0-6.5)
	8	12.8	12.8	6.2
		(9.7-16.6)	(6.5-23.5)	(4.3-9.0)
	9	21.5	24.5	24.5
		(16.7-27.1)	(19.2-30.8)	(20.6-28.8)
	10	31.7	36.0	25.8
	(26.4-37.4)	(31.2-41.2)	(21.0-31.2)	
	11	41.7	40.7	39.6
		(35.3-48.4)	(32.5-49.4)	(33.4-46.1)
	12	40.0	38.3	38.7
		(33.5-46.8)	(25.4-53.1)	(32.7-45.1)
Region	Toronto	12.2	17.2	13.7
		(8.8-16.6)	(10.8-26.2)	(8.9-20.5)
	North	33.8	29.4	29.8
		(28.6-39.3)	(25.2-33.9)	(24.2-36.0)
	West	30.1	29.4	26.2
		(25.6-35.0)	(24.8-34.6)	(22.0-30.9)
	East	23.0	26.2	25.7
		(19.3-27.2)	(22.0-31.0)	(21.9-29.8)

Notes: (1) estimates in brackets are 95% confidence intervals; (2) the 2001 and 2003 estimates are based on random half samples; (3) no significant differences between 1999 and 2003.

Q: How many times in the **last 4 weeks** has drinking alcohol **made you drunk** (that is, you had so much that you could not do what you wanted to do, or you threw up)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.4.5
Percentage Reporting Binge Drinking at Least Once During the Past 4 Weeks, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

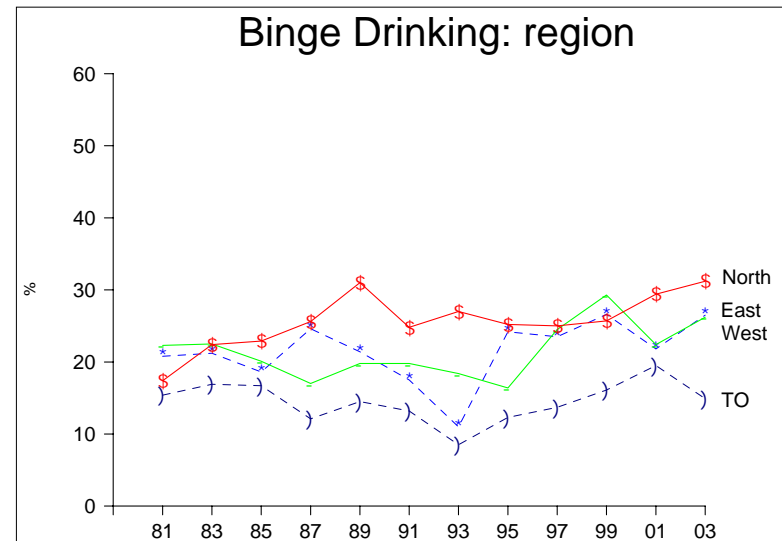
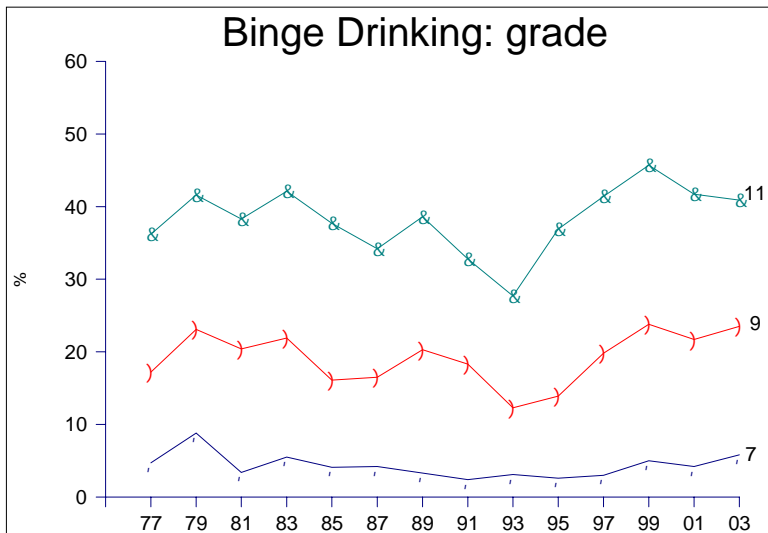
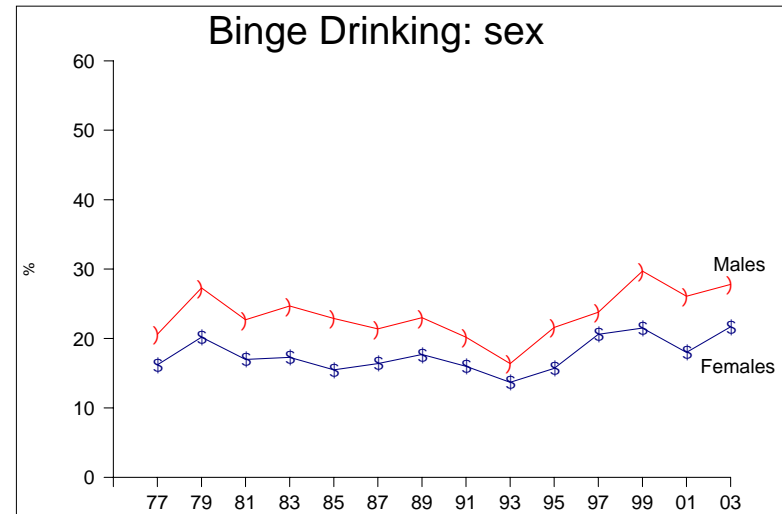
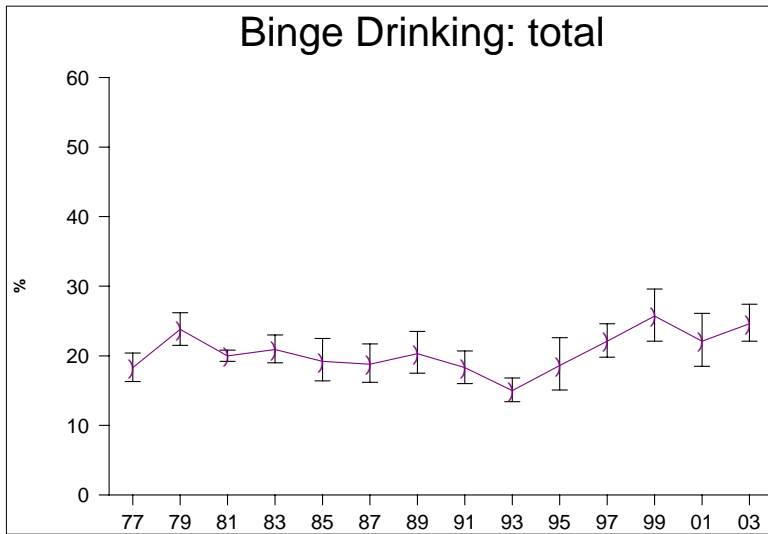


Figure 3.4.6
Percentage Reporting Becoming Drunk at Least Once During the Past 4 Weeks, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

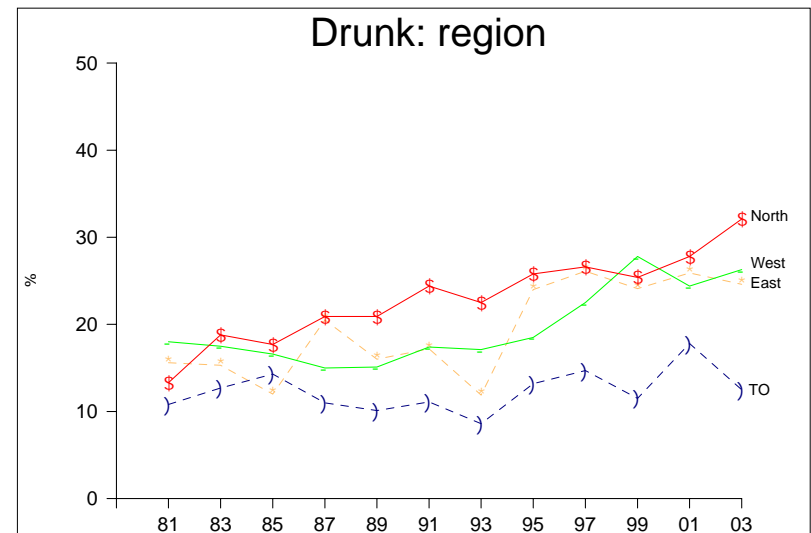
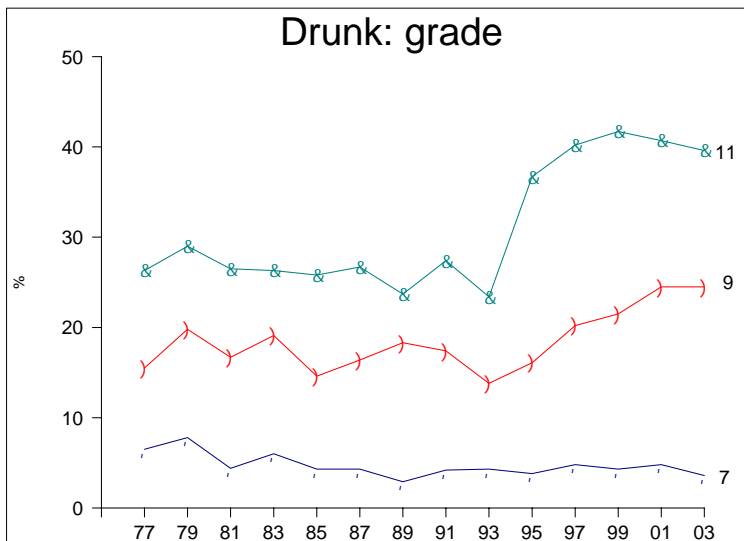
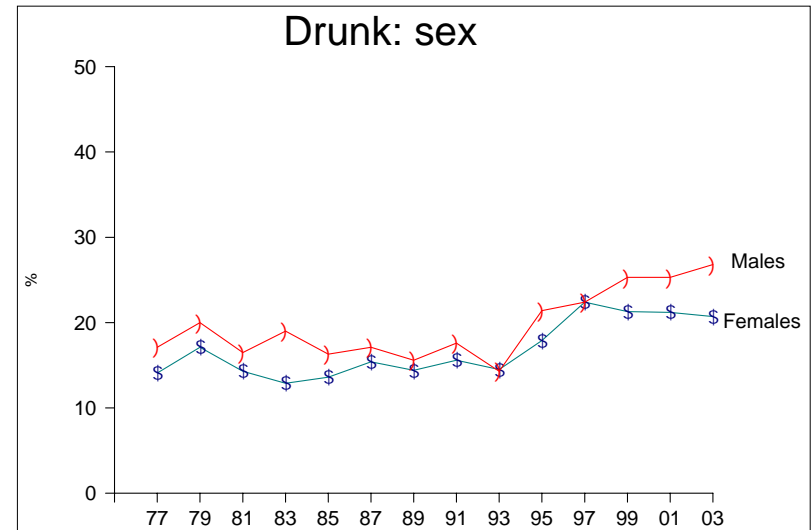
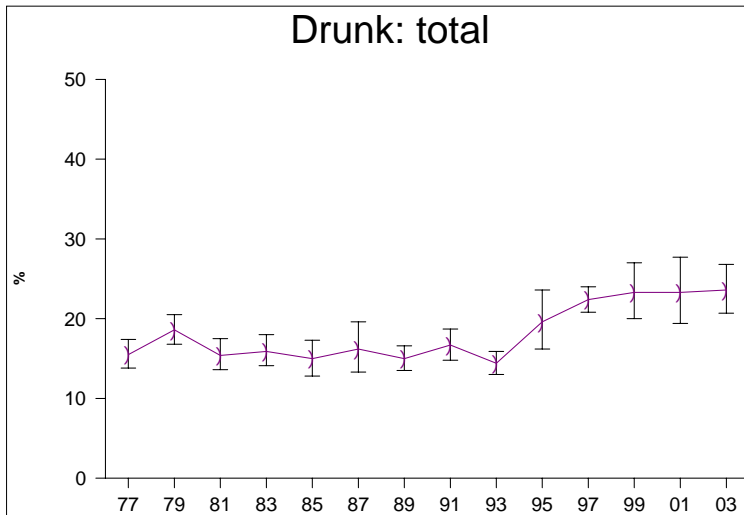


Table 3.4.7: Percentage Reporting *Binge Drinking* at Least Once During the Past 4 Weeks, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	18.3	23.8	20.0	20.9	19.2	18.8	20.3	18.3	15.0	18.6	22.1	25.7	22.1	24.6
(95% CI)	(16.3-20.4)	(21.5-26.2)	(19.2-20.8)	(19.0-23.0)	(16.4-22.5)	(16.2-21.7)	(17.5-23.5)	(16.0-20.7)	(13.4-16.8)	(15.1-22.6)	(19.8-24.6)	(22.1-29.6)	(18.5-26.1)	(22.1-27.4)
Sex														
Male	20.6	27.3	22.7	24.7	22.9	21.4	23.0	20.2	16.4	21.6	23.8	29.7	26.1	27.7
	(18.2-23.3)	(24.6-30.1)	(21.1-24.4)	(22.4-27.1)	(18.3-28.1)	(17.3-26.0)	(20.0-26.4)	(17.9-22.8)	(13.9-19.2)	(17.6-26.1)	(21.1-26.8)	(25.6-34.2)	(21.5-31.3)	(24.1-31.6)
Female	16.2	20.2	17.0	17.3	15.5	16.4	17.7	16.0	13.7	15.7	20.6	21.5	18.0	21.7
	(13.9-18.9)	(17.6-23.1)	(15.1-19.1)	(14.9-19.9)	(12.5-19.0)	(14.0-19.0)	(14.2-21.9)	(13.0-19.7)	(11.3-16.5)	(12.6-19.4)	(17.6-24.1)	(17.3-26.4)	(14.4-22.1)	(18.7-25.0)
Grade														
7	4.7	8.8	3.4	5.5	4.1	4.2	3.3	2.4	3.1	2.6	3.0	5.0	4.2	5.8
	(3.4-6.5)	(6.8-11.2)	(2.5-4.5)	(2.9-10.3)	(1.9-8.4)	(2.5-6.9)	(2.4-4.5)	(1.5-4.0)	(2.1-4.6)	(2.2-3.1)	(2.3-3.9)	(3.5-7.1)	(2.7-6.7)	(4.0-8.4)
9	17.2	23.1	20.4	21.9	16.1	16.5	20.3	18.3	12.3	13.9	19.8	23.8	21.7	23.5
	(14.3-20.6)	(20.0-26.5)	(19.1-21.7)	(19.6-24.3)	(10.6-23.7)	(12.6-21.3)	(17.7-23.2)	(13.8-23.8)	(9.7-15.4)	(9.1-20.6)	(15.6-24.9)	(18.7-29.7)	(17.0-27.2)	(20.3-27.0)
11	36.2	41.6	38.3	42.1	37.7	34.2	38.6	32.8	27.7	36.9	41.4	45.7	41.7	40.9
	(32.2-40.5)	(36.8-46.5)	(32.3-44.9)	(38.8-45.4)	(32.5-43.2)	(26.2-43.2)	(30.8-47.1)	(28.5-37.4)	(24.5-31.2)	(28.5-45.2)	(36.3-46.6)	(39.1-52.5)	(36.1-47.5)	(36.0-46.0)
Region														
Toronto	—	—	15.4	16.9	16.7	12.1	14.5	13.2	8.5	12.3	13.7	16.1	19.5	14.9
			(13.1-17.9)	(12.4-22.5)	(10.1-26.2)	(8.5-16.8)	(7.4-26.3)	(10.3-16.7)	(6.4-11.1)	(6.9-21.1)	(11.8-15.8)	(12.6-20.4)	(11.7-30.8)	(11.0-19.7)
North	—	—	17.4	22.4	22.9	25.6	31.0	24.8	27.0	25.2	25.0	25.7	29.4	31.2
			(14.2-21.3)	(18.2-27.4)	(18.6-27.9)	(17.0-36.6)	(22.2-41.4)	(15.8-36.9)	(21.5-33.2)	(18.4-33.4)	(20.4-30.2)	(19.0-33.8)	(23.4-36.1)	(25.6-37.3)
West	—	—	22.3	22.5	20.1	17.0	19.8	19.8	18.4	16.4	24.5	29.3	22.4	26.2
			(21.5-23.1)	(18.9-26.6)	(17.0-23.8)	(12.5-22.6)	(15.3-25.3)	(16.9-23.2)	(15.4-21.9)	(10.0-25.7)	(22.1-27.1)	(22.6-37.0)	(17.8-27.9)	(22.1-30.8)
East	—	—	20.8	21.2	18.6	24.6	21.4	17.5	11.0	24.2	23.5	26.6	21.8	26.5
			(18.9-22.9)	(18.9-23.6)	(12.5-26.8)	(21.2-28.4)	(18.6-24.5)	(13.0-23.1)	(8.9-13.6)	(22.0-26.5)	(17.3-31.2)	(21.1-33.0)	(15.2-30.3)	(21.6-32.2)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: How many times in the last 4 weeks have you had 5 or more drinks of alcohol on the same occasion?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.8: Frequency of Binge Drinking During the Past 4 Weeks among the *Total Sample*, 1987 – 2003, Grades 7, 9, 11 only

		Percentage of Total Sample								
(N)		1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total										
	Never	81.2	79.7	81.7	85.0	81.4	77.9	74.3	77.9	75.4
	Once	8.2	8.2	7.6	7.1	8.8	9.8	10.7	9.2	9.2
	2 to 3 times	6.2	7.5	6.3	5.2	6.3	7.8	9.4	8.3	9.6
	4 + times	4.3	4.6	4.3	2.8	3.4	4.5	5.6	4.5	5.8
Males										
	Never	78.6	77.0	79.8	83.6	78.4	76.2	70.3	73.9	72.3
	Once	8.3	8.9	8.0	7.3	9.4	8.6	10.2	10.1	9.8
	2 to 3 times	7.5	8.3	6.2	4.9	7.2	8.8	11.9	9.6	10.3
	4 + times	5.5	5.8	6.1	4.2	4.9	6.4	7.6	6.4	7.6
Females										
	Never	83.6	82.3	84.0	86.3	84.3	79.4	78.5	82.0	78.3
	Once	8.1	7.6	7.2	6.8	8.3	10.8	11.1	8.3	8.6
	2 to 3 times	5.0	6.6	6.5	5.5	5.5	7.0	6.8	7.0	9.0
	4 + times	3.2	3.5	2.4	1.4	1.9	2.9	3.6	2.6	4.1
Grade 7										
	Never	95.8	97.0	97.5	96.9	97.4	97.0	95.0	95.8	94.2
	Once	2.1	1.7	1.4	2.0	1.6	1.2	3.2	2.2	3.2
	2 to 3 times	1.2	0.9	0.8	0.6	0.7	1.2	1.1	1.5	2.3
	4 + times	0.9	0.7	†	0.5	†	0.6	0.6	0.5	†
Grade 9										
	Never	83.5	80.0	81.7	87.7	86.1	80.2	76.2	78.3	76.5
	Once	7.8	9.0	9.3	7.0	8.2	10.4	11.4	10.6	10.3
	2 to 3 times	5.3	8.2	5.8	4.6	4.2	6.4	8.8	7.9	9.3
	4 + times	3.3	3.1	3.2	0.7	1.5	2.9	3.6	3.2	3.9
Grade 11										
	Never	65.8	61.4	67.2	72.3	63.1	58.6	54.3	58.3	59.1
	Once	14.1	14.2	11.7	11.4	15.8	16.7	16.3	15.0	13.0
	2 to 3 times	11.6	13.6	11.9	9.6	13.3	15.1	17.1	16.1	15.8
	4 + times	8.4	10.9	9.2	6.7	7.9	9.6	12.3	10.5	12.1

Note: † estimate suppressed or less than 0.5%.

Q: How many times in the **last 4 weeks** have you had **5 or more drinks of alcohol** on the **same occasion**?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.4.9: Percentage Reporting *Becoming Drunk* at Least Once during the Past 4 Weeks, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (1168)	2001 (953)	2003 (1618)
Total	15.5	18.6	15.4	15.9	15.0	16.2	15.0	16.7	14.4	19.6	22.4	23.3	23.3	23.6
(95% CI)	(13.8-17.4)	(16.8-20.5)	(13.6-17.5)	(14.1-18.0)	(12.8-17.3)	(13.3-19.6)	(13.5-16.6)	(14.8-18.7)	(13.0-15.9)	(16.2-23.6)	(20.8-24.0)	(20.0-27.0)	(19.4-27.7)	(20.7-26.8)
Sex														
Male	17.1	20.0	16.5	19.0	16.3	17.1	15.6	17.6	14.3	21.4	22.4	25.3	25.3	26.8
	(15.0-19.3)	(17.7-22.7)	(14.8-18.5)	(16.4-22.0)	(13.6-19.3)	(13.5-21.4)	(13.7-17.7)	(15.7-19.6)	(12.8-15.9)	(17.9-25.4)	(20.3-24.7)	(21.2-29.8)	(20.6-30.7)	(22.8-31.1)
Female	14.1	17.1	14.3	12.9	13.6	15.4	14.4	15.6	14.5	17.9	22.4	21.3	21.2	20.7
	(12.1-16.4)	(14.9-19.6)	(11.4-17.7)	(11.3-14.7)	(10.7-17.1)	(12.8-18.2)	(12.0-17.2)	(12.9-18.8)	(12.2-17.0)	(14.3-22.3)	(20.6-24.2)	(17.4-25.8)	(16.3-27.1)	(16.8-25.3)
Grade														
7	6.5	7.8	4.4	6.0	4.3	4.3	2.9	4.2	4.3	3.8	4.8	4.3	4.8	3.6
	(4.9-8.5)	(6.0-10.1)	(3.8-5.1)	(3.8-9.4)	(2.6-7.2)	(2.8-6.6)	(2.3-3.6)	(3.5-5.1)	(2.8-6.6)	(3.0-4.9)	(3.1-7.4)	(2.8-6.6)	(2.8-8.1)	(2.0-6.5)
9	15.5	19.8	16.7	19.1	14.6	16.4	18.3	17.4	13.8	16.1	20.2	21.5	24.5	24.5
	(12.8-18.6)	(17.0-22.9)	(13.6-20.4)	(17.7-20.5)	(11.1-19.2)	(12.4-21.4)	(15.2-21.8)	(13.9-21.5)	(11.0-17.0)	(10.9-23.1)	(17.7-22.8)	(16.7-27.1)	(19.2-30.8)	(20.6-28.8)
11	26.3	29.0	26.5	26.3	25.8	26.7	23.7	27.4	23.4	36.7	40.2	41.7	40.7	39.6
	(22.9-30.0)	(25.4-33.0)	(20.2-33.8)	(21.4-31.8)	(21.5-30.7)	(18.5-36.9)	(21.3-26.2)	(23.9-31.1)	(20.6-26.4)	(28.9-45.5)	(37.0-43.4)	(35.3-48.4)	(32.5-49.4)	(33.4-46.1)
Region														
Toronto	—	—	10.8	12.7	14.3	11.0	10.1	11.1	8.6	13.2	14.7	11.5	17.8	12.5
			(7.8-14.5)	(7.4-20.8)	(11.4-17.7)	(7.2-16.4)	(6.4-15.6)	(7.0-17.0)	(6.5-11.2)	(6.8-24.2)	(14.2-15.2)	(7.9-16.5)	(9.5-30.8)	(7.6-20.1)
North	—	—	13.3	18.8	17.7	20.9	20.9	24.4	22.5	25.8	26.6	25.4	27.8	32.1
			(9.2-19.0)	(15.2-22.9)	(12.6-24.3)	(16.4-26.3)	(14.3-29.4)	(14.9-37.2)	(16.6-29.7)	(19.1-34.0)	(22.9-30.7)	(18.0-34.4)	(23.1-33.1)	(25.0-40.1)
West	—	—	18.0	17.5	16.6	15.0	15.1	17.4	17.1	18.5	22.5	27.8	24.4	26.3
			(15.3-21.0)	(14.9-20.5)	(14.6-18.8)	(10.2-21.6)	(13.4-17.0)	(15.2-19.8)	(15.3-19.1)	(12.4-26.6)	(21.2-23.9)	(21.9-34.6)	(19.5-30.1)	(21.6-31.7)
East	—	—	15.6	15.3	12.0	20.5	16.0	17.2	11.9	24.0	26.1	24.1	25.9	24.6
			(14.9-16.4)	(13.1-17.8)	(6.8-20.4)	(15.1-27.3)	(13.5-19.0)	(14.0-20.8)	(8.9-15.8)	(20.5-27.9)	(21.6-31.2)	(18.6-30.6)	(18.8-34.6)	(19.8-30.2)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) the 2001 and 2003 estimates are based on random half samples.

Q: How many times in the **last 4 weeks** has drinking alcohol **made you drunk** (that is, you had so much that you could not do what you wanted to do, or you threw up)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Frequency of Binge Drinking among Drinkers

(Tables 3.4.10a, 3.4.10b; Figure 3.4.7)

2003: Grades 7 to 12

1979 – 2003: Grades 7, 9, 11

■ The majority (60.6%) of past-year drinkers do not report a binge drinking episode during the 4 weeks before the survey (Table 3.4.10a). On the opposite end, about one-in-ten (9.7%) drinkers report binge drinking 4 times or more.

□ Figure 3.4.7 shows that binge drinking increased steadily among drinkers up until 1991. Between 1981 and 1991, the prevalence of binge drinking increased from 29.2% to 32.4%. Since 1993, binge drinking increased significantly from 27.2% to a high of 40.1% in 1999, and remains steady at 38.3% in 2003.

Figure 3.4.7
Frequency of Binge Drinking During the Past 4 Weeks among Drinkers (Grades 7, 9, 11 only), OSDUS 1979 - 2003

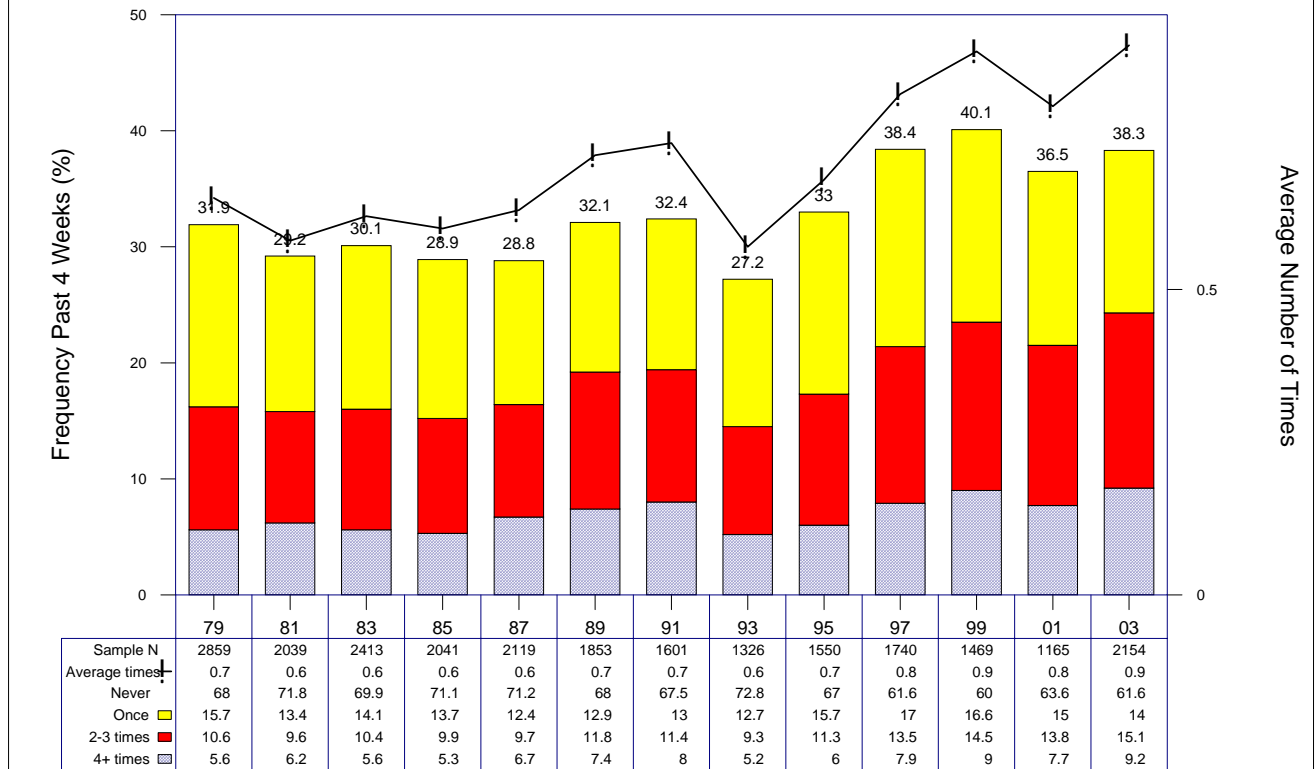


Table 3.4.10a: Frequency of Binge Drinking During the Past 4 Weeks among Drinkers, 1999 – 2003, Grades 7 to 12

		Percentage of Drinkers		
		1999	2001	2003
(N)		(2885)	(2469)	(4421)
Total				
	Never	59.0	60.2	60.6
	Once	16.6	16.1	14.9
	2 to 3 times	15.1	15.4	14.9
	4 + times	9.2	8.4	9.7
Males				
	Never	54.8	55.6	57.6
	Once	15.2	15.9	15.1
	2 to 3 times	18.0	17.5	15.0
	4 + times	12.0	11.0	12.4
Females				
	Never	63.7	64.8	63.5
	Once	18.3	16.2	14.7
	2 to 3 times	11.8	13.2	14.8
	4 + times	6.1	5.7	7.0
Grade 7				
	Never	87.8	90.3	87.8
	Once	7.7	5.0	5.9
	2 to 3 times	2.9	3.3	5.5
	4 + times	1.6	1.4	0.8
Grade 8				
	Never	76.1	78.1	84.8
	Once	13.0	15.5	9.7
	2 to 3 times	8.0	5.5	4.2
	4 + times	2.8	0.9	1.4
Grade 9				
	Never	63.8	65.8	64.6
	Once	17.4	16.2	15.3
	2 to 3 times	13.2	12.6	14.0
	4 + times	5.6	5.3	6.0
Grade 10				
	Never	54.4	55.2	60.7
	Once	15.7	16.4	14.9
	2 to 3 times	21.4	19.1	14.6
	4 + times	8.5	9.3	9.8
Grade 11				
	Never	44.7	48.5	48.8
	Once	19.7	18.5	16.2
	2 to 3 times	20.6	20.0	19.8
	4 + times	15.0	13.0	15.2
Grade 12				
	Never	47.5	40.6	45.2
	Once	20.2	20.2	19.6
	2 to 3 times	16.8	23.1	20.2
	4 + times	15.5	16.1	15.0

Note: No significant differences between 1999 and 2003.

Q: How many times in the last 4 weeks have you had 5 or more drinks of alcohol on the same occasion?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.10b: Frequency of Binge Drinking During the Past 4 Weeks among *Drinkers*, 1987 – 2003, Grades 7, 9, 11 only

	(N)	Percentage of Drinkers								
		1987 (2119)	1989 (1853)	1991 (1601)	1993 (1326)	1995 (1550)	1997 (1740)	1999 (1469)	2001 (1165)	2003 (2154)
Total										
Never		71.2	68.0	67.5	72.8	67.0	61.6	59.9	63.6	61.6
Once		12.4	12.9	13.0	12.7	15.7	17.0	16.6	15.0	14.0
2 to 3 times		9.7	11.8	11.4	9.3	11.3	13.5	14.5	13.8	15.1
4 + times		6.7	7.4	8.0	5.2	6.0	7.9	9.0	7.7	9.2
Males										
Never		67.6	64.8	63.7	70.4	62.1	58.4	55.8	57.2	59.8
Once		12.5	13.6	13.9	13.3	16.5	15.0	14.9	16.0	13.8
2 to 3 times		11.6	12.7	11.2	8.4	12.7	15.0	17.6	15.9	15.2
4 + times		8.4	8.9	11.2	7.9	8.6	11.1	11.6	10.8	11.3
Females										
Never		74.8	71.3	71.8	75.1	71.8	63.9	64.3	70.0	63.6
Once		12.4	12.2	12.1	12.2	14.9	18.7	18.6	13.9	14.3
2 to 3 times		7.8	10.8	11.8	10.1	9.9	12.3	11.1	11.6	15.1
4 + times		5.0	5.8	4.3	2.6	3.5	5.1	6.1	4.5	7.0
Grade 7										
Never		90.8	93.0	93.0	90.5	92.2	91.9	87.8	90.3	87.8
Once		4.5	3.5	3.6	6.0	4.6	3.6	7.7	5.0	5.9
2 to 3 times		2.8	2.0	2.7	1.8	2.1	2.8	2.9	3.3	5.5
4 + times		1.8	1.5	0.7	1.7	1.1	1.8	1.6	1.4	0.8
Grade 9										
Never		74.9	69.2	70.0	77.9	76.3	64.6	63.8	65.8	64.6
Once		11.6	13.7	14.7	12.7	13.8	18.7	17.4	16.2	15.3
2 to 3 times		8.3	12.5	10.0	8.0	7.4	11.6	13.2	12.6	14.0
4 + times		5.1	4.7	5.6	1.3	2.5	5.2	5.6	5.3	6.0
Grade 11										
Never		59.6	53.0	56.6	62.8	51.5	49.0	44.7	48.5	48.8
Once		16.6	17.2	15.3	15.2	20.9	20.5	19.7	18.5	16.2
2 to 3 times		13.7	16.5	15.8	12.9	17.3	18.6	20.6	20.0	19.8
4 + times		10.0	13.4	12.3	9.2	10.3	11.9	15.0	13.0	15.2

Q: How many times in the last 4 weeks have you had 5 or more drinks of alcohol on the same occasion?

Source: OSDUS, Centre for Addiction & Mental Health

Hazardous Drinking (AUDIT) among the Total Sample

(Tables 3.4.11 – 3.4.12; Figure 3.4.8)

Starting in 1999, the *OSDUS* included the Alcohol Use Disorders Identification Test (AUDIT) developed by the World Health Organization (Saunders, Aasland, Babor, De La Fuente, & Grant, 1993). This instrument is designed to detect problem drinkers at the less severe end of the spectrum of alcohol problems. The AUDIT assesses hazardous and harmful drinking. *Hazardous* drinking refers to an established pattern of drinking that increases the likelihood of future medical and physical problems (e.g., accidents), whereas harmful drinking refers to a pattern of drinking that is already causing damage to one's health (e.g., alcohol-related injuries). Adolescents with a score of 8 or more (out of 40) are considered to be drinking at a hazardous or harmful level. We restrict the term to "hazardous" for convenience.

2003: Grades 7 to 12

The ten AUDIT questions are presented in Table 3.4.11, while Figure 3.4.8 presents the percentage of the total sample drinking at a hazardous level.

- Overall, 18.8% of students report drinking at a hazardous level. This represents about 186,700 of students in grades 7 to 12 across Ontario.
- Males (21.1%) are significantly more likely than females (16.7%) to drink at this level.
- There is also significant variation by grade: as grade increases so does the likelihood of hazardous drinking, with a large incremental increase in each grade between grade 8 and grade 11 (5.6% to 29.6%).

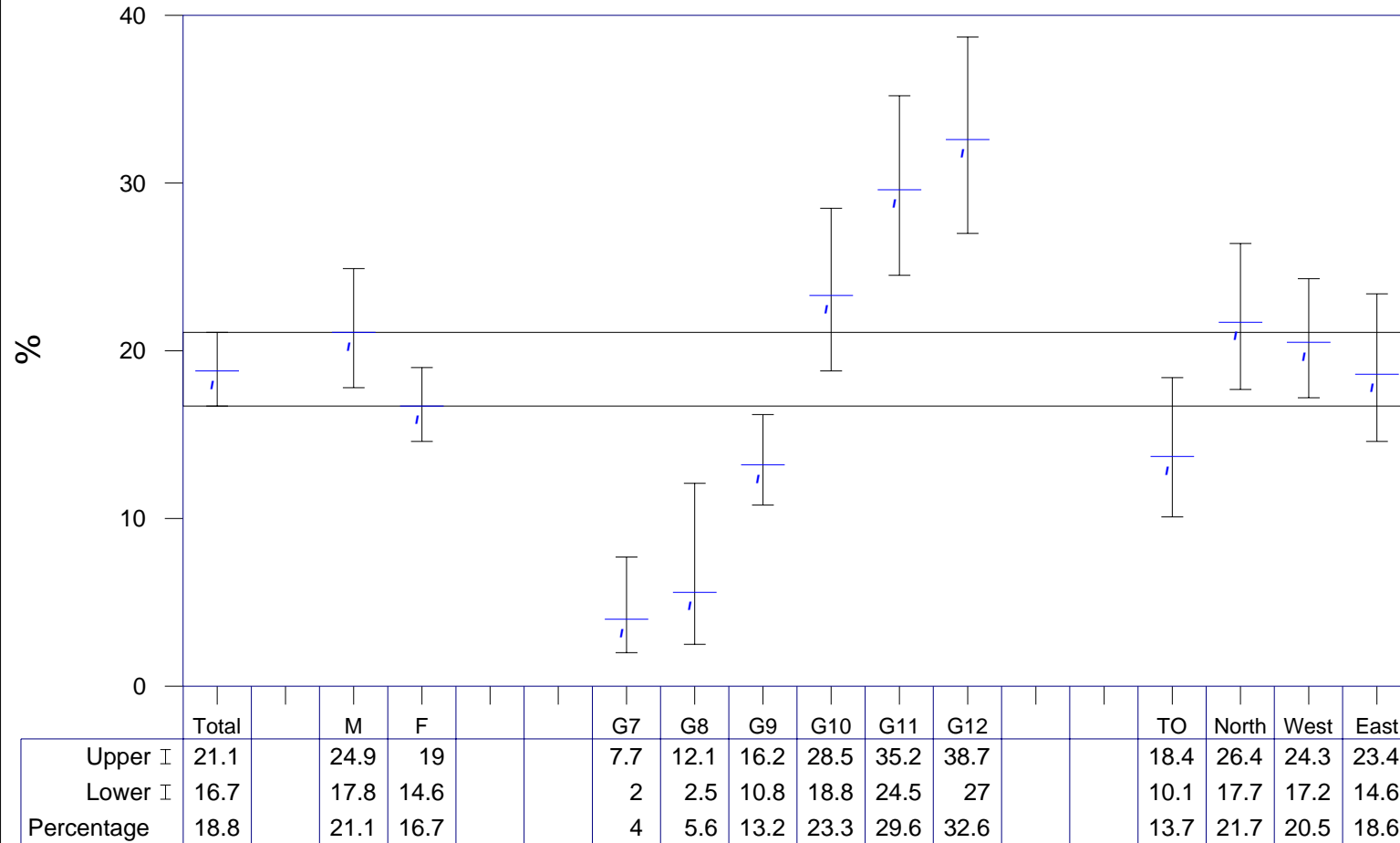
- Although there is variation among the regions in hazardous drinking, with Toronto being the lowest (13.7%), this is not statistically significant.

1999 – 2003: Grades 7 to 12

Table 3.4.12 presents the percentages reporting drinking at a hazardous level, broken down by subgroup, for 1999 to 2003.

- Although there was a significant increase in hazardous drinking among the total sample between 2001 (14.6%) and 2003 (18.8%), the 2003 level is similar to that found in 1999 (18.0%).
- Hazardous drinking among males has remained stable between 1999 and 2003. The percentage of females reporting hazardous drinking significantly increased between 2001 (11.9%) and 2003 (16.7%), but the current estimate resembles that found in 1999 (15.7%).
- Only 7th-graders report a significant increase in hazardous drinking, from 0.6% in 2001 to 4.0% in 2003, but this current estimate is similar to that found in 1999 (2.3%). No other grade showed a significant change over the short-term.
- Among the regions, only students in the Toronto show a significant increase in hazardous drinking between 1999 (7.8%) and 2003 (13.7%). No other region changed significantly between 1999 and 2003.

Figure 3.4.8
Percentage of Total Sample Reporting Hazardous Drinking
(AUDIT 8+), OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.4.11: Percentage of the Total Sample, and of Drinkers, Reporting Hazardous Drinking Indicators (AUDIT), 2003, Grades 7 to 12

AUDIT Item	% "yes"	
	Total Sample (N=3464)	Drinkers (N=2332)
<i>Alcohol Intake</i>		
1. Consumed alcohol during the past 12 months:	67.1	--
2. Number of drinks usually have on typical day when drink (% reporting 3+ drinks):	30.2	44.7
3. Consumed 5 or more drinks on one occasion during the past 12 months:	36.5	53.0
<i>Dependence Indicators (past 12 months)</i>		
4. Were not able to stop drinking once you had started:	10.2	14.8
5. Failed to do what was normally expected from you because of drinking:	12.5	18.2
6. Needed a first alcoholic drink in the morning to get yourself going after a heavy drinking session:	3.8	5.4
<i>Adverse Consequences</i>		
7. Had a feeling of guilt or remorse after drinking, during past 12 months:	12.7	18.2
8. Been unable to remember what happened the night before because you had been drinking, during past 12 months:	20.6	29.9
9. You or someone else ever been injured as a result of your drinking:	14.3	19.6
10. Relative/friend or a doctor/health worker ever been concerned about your drinking or suggested that you cut down:	3.9	5.6
AUDIT 8+ Score: (95 % CI)	18.8 (16.7-21.1)	27.7 (24.7-30.9)

Notes: (1) The "AUDIT" is a screener that measures hazardous and harmful drinking, as indicated by a score of 8 or more out of 40; (2) "Drinkers" are those who consumed alcohol, excluding a sip, at least once during the past 12 months; (3) based on a random half sample.

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.4.12: Percentage of the *Total Sample* Reporting Hazardous Drinking (AUDIT 8+), 1999 – 2003, Grades 7 to 12

	(N)	1999 (2299)	2001 (2061)	2003 (3464)
Total		18.0	14.6	18.8^a
(95% CI)		(15.8-20.4)	(12.2-17.3)	(16.7-21.1)
Sex				
Male		20.3	17.3	21.1
		(17.3-23.6)	(14.0-21.1)	(17.8-24.9)
Female		15.7	11.9	16.7^a
		(13.0-18.7)	(9.6-14.6)	(14.6-19.0)
Grade				
7		2.3	0.6	4.0^a
		(1.0-5.1)	(0.3-1.5)	(2.0-7.7)
8		8.5	5.3	5.6
		(6.4-11.3)	(3.0-9.2)	(2.5-12.1)
9		15.1	10.4	13.2
		(10.6-21.0)	(7.2-14.8)	(10.8-16.2)
10		25.5	21.2	23.3
		(19.5-32.6)	(16.0-27.4)	(18.8-28.5)
11		29.5	27.0	29.6
		(23.8-36.0)	(20.5-34.5)	(24.5-35.2)
12		28.2	28.0	32.6
		(21.1-36.6)	(21.9-34.9)	(27.0-38.7)
Region				
Toronto		7.8	6.1	13.7^b
		(5.4-11.0)	(2.5-13.9)	(10.1-18.4)
North		30.7	20.9	21.7
		(24.5-37.6)	(16.5-26.1)	(17.7-26.4)
West		20.0	16.4	20.5
		(16.2-24.4)	(12.6-21.1)	(17.2-24.3)
East		17.6	15.3	18.6
		(14.0-22.0)	(11.2-20.5)	(14.6-23.4)

Notes: (1) based on a random half sample in each year; (2) entries in brackets are 95% confidence intervals; (3) ^a 2003 vs 2001 significant difference, p<.01; ^b 2003 vs 1999 significant difference, p<.01.

Source: *OSDUS*, Centre for Addiction & Mental Health

Hazardous Drinking (AUDIT) among Drinkers

(Table 3.4.11; Figure 3.4.9)

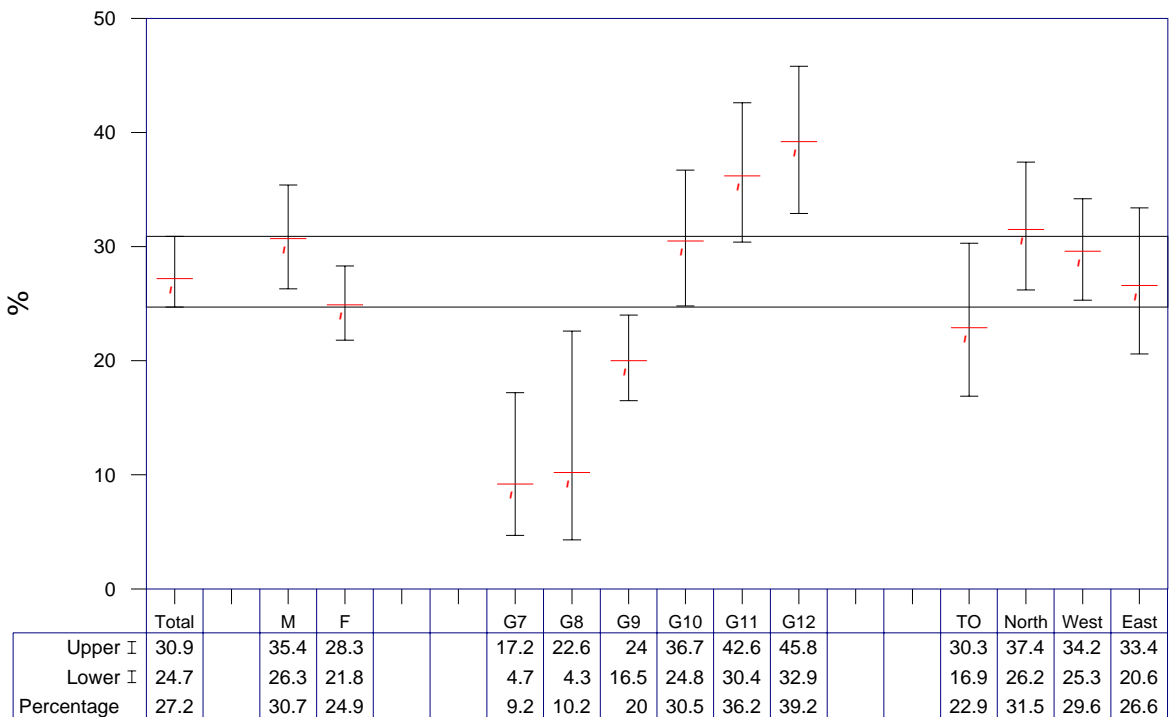
2003: Grades 7 to 12

Drinkers' responses to the ten AUDIT items are presented in Table 3.4.11, while Figure 3.4.9 presents the percentage of drinkers that drink at a hazardous level.

- Overall, 27.2% of drinkers report drinking at a hazardous level.
- Male drinkers (30.7%) are significantly more likely than females (24.9%) to drink at this level.

- There is also significant variation by grade: there are large increases in hazardous drinking among drinkers between each grade, starting between 8th-grade and 9th-grade.
- There is no significant regional difference in rates of hazardous drinking among drinkers.

Figure 3.4.9
Percentage of Drinkers Reporting Hazardous Drinking (AUDIT 8+), OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

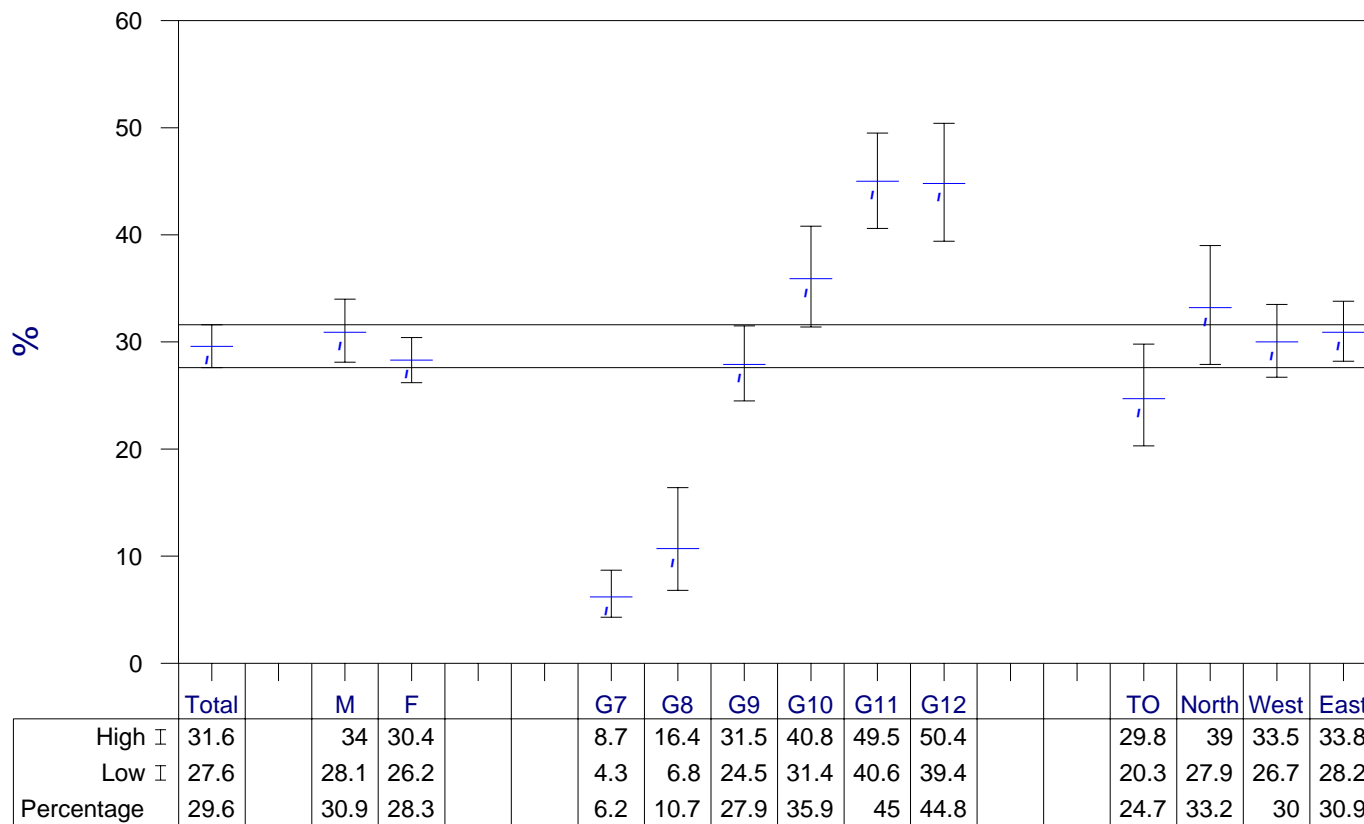
3.5 Cannabis Use

Past Year Use of Cannabis

(Tables 3.5.1a, 3.5.1b; Figures 3.5.1, 3.5.2)

	Cannabis Use in 2003 (Grades 7 to 12)	Trends in Cannabis Use
Total Sample	<ul style="list-style-type: none"> Overall, 29.6% of students report using cannabis at least once during the 12 months before the survey. With the sampling error, we estimate that between 27.6% and 31.6% of Ontario students in grades 7 to 12 have used cannabis. The percentage of 29.6% represents about 286,000 students. 	<ul style="list-style-type: none"> The prevalence of cannabis use in 2003 (29.6%) among grades 7 to 12 is similar to that in 2001 (28.6%) and 1999 (28.0%). However, in the long-term (grades 7, 9, 11 only) the 2003 rate is comparable to those found during the historical peak years of use – the late 1970s and early 1980s.
Sex	<ul style="list-style-type: none"> There is no significant difference in the prevalence of cannabis use between males (30.9%) and females (28.3%). 	<ul style="list-style-type: none"> There was no change in cannabis use for either males or females between 2001 and 2003. Females, however, increased their use in 2003 (28.3%) compared to 1999 (23.9%). Over the long-term, for both males and females, cannabis use is significantly higher in 2003 than in the late 1980s and early 1990s, resembling rates of the late 1970s.
Grade	<ul style="list-style-type: none"> Cannabis use shows strong increases with each grade, increasing from 6.2% among 7th-graders to 45% among 11th- and 12th-graders. 	<ul style="list-style-type: none"> Between 1999 and 2003, cannabis use did not significantly change among any of the grades. However, use has increased significantly in each grade compared to the early 1990s.
Region	<ul style="list-style-type: none"> Although cannabis use is lowest in Toronto (24.7%) compared to the other regions (about 30%), the regional differences are not statistically significant. 	<ul style="list-style-type: none"> There were no significant changes between 1999 and 2003 within any of the regions. Long-term, cannabis use in each region is currently higher compared to the early 1990s.

Figure 3.5.1
Past Year Cannabis Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.5.1a: Percentage Reporting *Cannabis Use* During the Past Year, 1999 – 2003, Grades 7 to 12

	(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total		28.0	28.6	29.6
(95% CI)		(26.0-30.1)	(25.8-31.7)	(27.6-31.6)
Sex				
Males		31.9	32.5	30.9
		(29.4-34.4)	(28.6-36.6)	(28.1-34.0)
Females		23.9	24.8	28.3^b
		(21.0-27.1)	(22.0-27.8)	(26.2-30.4)
Grade				
7		3.5	5.1	6.2
		(2.2-5.6)	(3.4-7.6)	(4.3-8.7)
8		14.9	12.0	10.7
		(11.6-18.9)	(9.4-15.1)	(6.8-16.4)
9		25.5	28.8	27.9
		(21.7-29.7)	(23.8-34.3)	(24.5-31.5)
10		36.4	39.0	35.9
		(30.7-42.6)	(35.0-43.1)	(31.4-40.8)
11		48.1	45.7	45.0
		(42.8-53.4)	(37.7-53.9)	(40.6-49.5)
12		39.4	43.5	44.8
		(33.2-45.9)	(33.1-54.5)	(39.4-50.4)
Region				
Toronto		19.2	20.8	24.7
		(16.2-22.6)	(13.2-31.3)	(20.3-29.8)
North		31.9	27.6	33.2
		(26.2-38.2)	(22.4-33.6)	(27.9-39.0)
West		31.1	32.6	30.0
		(27.6-34.8)	(28.5-37.1)	(26.7-33.5)
East		27.6	28.4	30.9
		(24.1-31.4)	(24.1-33.1)	(28.2-33.8)

Notes: (1) entries in brackets are 95% confidence intervals; (2)^b 2003 vs 1999 significant difference, $p < .01$.

Q: In the **last 12 months**, how often did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil, etc)?

Source: OSDUS, Centre for Addiction & Mental Health

Figure 3.5.2
Past Year Cannabis Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

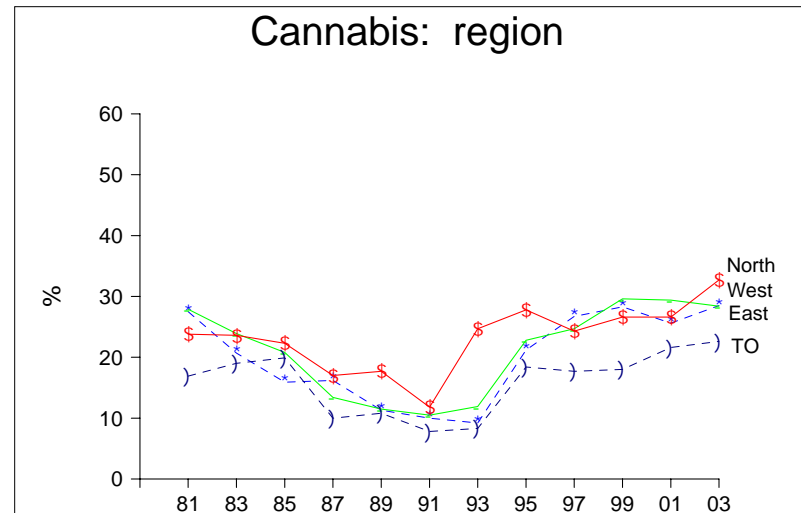
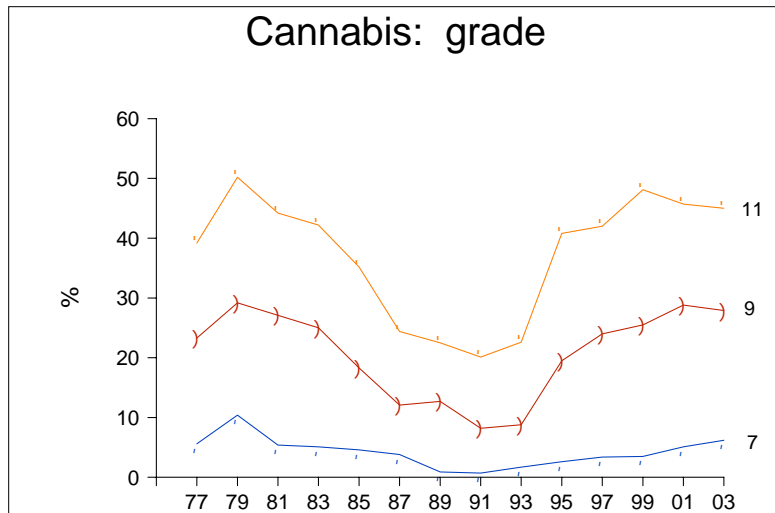
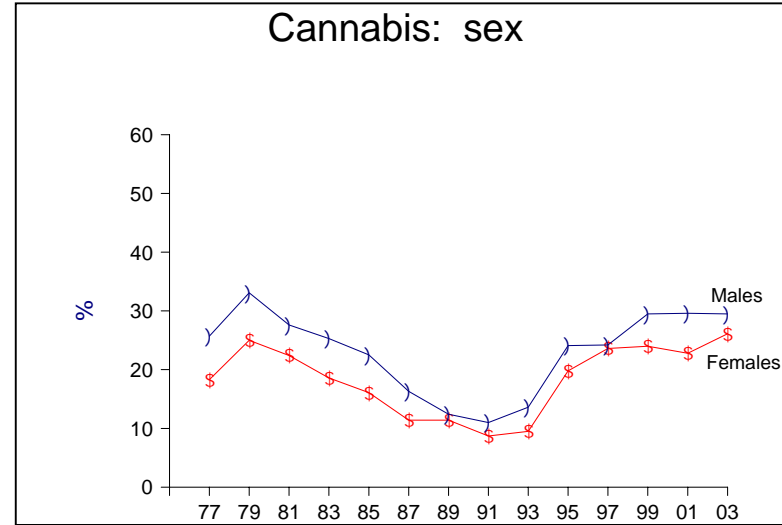
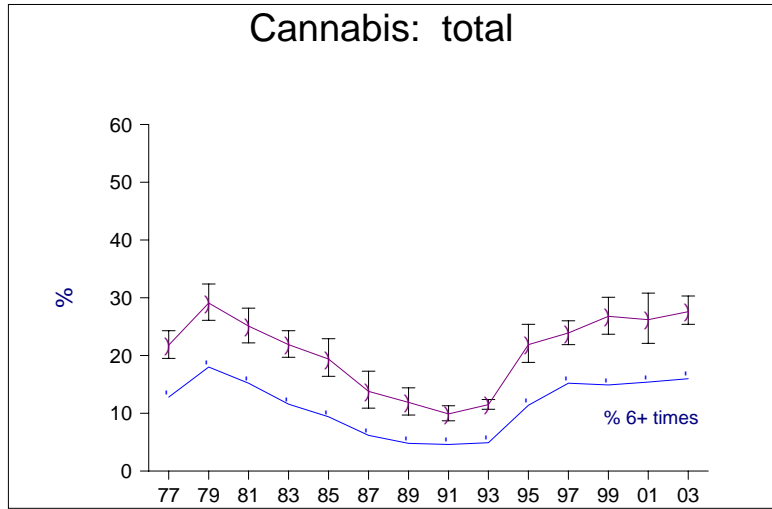


Table 3.5.1b: Percentage Reporting *Cannabis Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	21.8	29.1	25.1	21.9	19.4	13.8	11.9	9.9	11.5	21.9	23.9	26.8	26.2	27.8
(95% CI)	(19.5-24.3)	(26.1-32.4)	(22.2-28.2)	(19.7-24.3)	(16.4-22.9)	(10.9-17.3)	(9.7-14.4)	(8.7-11.3)	(10.7-12.4)	(18.8-25.4)	(21.9-26.0)	(23.7-30.1)	(22.1-30.8)	(25.4-30.3)
Sex														
Male	25.7	33.1	27.6	25.3	22.5	16.3	12.4	11.0	13.6	24.1	24.2	29.5	29.6	29.5
	(22.7-28.9)	(29.3-37.2)	(25.1-30.2)	(22.6-28.1)	(18.8-26.7)	(13.4-19.7)	(10.2-14.9)	(9.6-12.7)	(10.3-17.6)	(20.8-27.7)	(21.3-27.4)	(26.2-33.1)	(24.5-35.2)	(25.9-33.3)
Female	18.3	25.0	22.4	18.6	16.1	11.4	11.4	8.7	9.5	19.8	23.6	24.0	22.8	26.1
	(15.7-21.3)	(21.6-28.7)	(17.6-28.0)	(16.3-21.1)	(12.3-20.8)	(8.5-15.2)	(8.5-15.0)	(7.2-10.4)	(7.0-12.8)	(16.0-24.1)	(21.9-25.4)	(19.9-28.6)	(18.5-27.7)	(23.6-28.9)
Grade														
7	5.6	10.4	5.4	5.1	4.6	3.8	0.9	0.7	1.7	2.6	3.4	3.5	5.1	6.2
	(4.1-7.5)	(8.2-13.0)	(4.3-6.7)	(2.8-9.1)	(3.1-6.8)	(2.4-6.0)	(0.5-1.5)	(0.2-2.1)	(0.9-3.0)	(1.2-5.6)	(1.4-8.1)	(2.2-5.6)	(3.4-7.6)	(4.3-8.7)
9	23.3	29.2	27.1	25.0	18.3	12.1	12.7	8.2	8.8	19.5	24.0	25.5	28.8	27.9
	(19.3-27.8)	(24.1-34.8)	(24.0-30.4)	(22.1-28.3)	(13.1-25.0)	(6.0-23.0)	(8.8-18.0)	(6.6-10.0)	(7.5-10.2)	(14.1-26.2)	(21.6-26.5)	(21.7-29.7)	(23.8-34.2)	(24.5-31.5)
11	39.2	50.2	44.2	42.2	35.2	24.4	22.5	20.1	22.6	40.8	42.0	48.1	45.7	45.0
	(34.4-44.1)	(44.3-56.1)	(36.6-52.2)	(36.8-47.7)	(28.6-42.4)	(19.9-29.4)	(18.5-27.0)	(17.3-23.2)	(20.5-24.8)	(34.1-47.9)	(37.5-46.7)	(42.8-53.4)	(37.7-53.9)	(40.6-49.5)
Region														
Toronto	—	—	16.9	19.0	19.9	10.0	10.8	7.8	8.3	18.4	17.7	18.0	21.6	22.6
			(12.8-21.9)	(12.8-27.2)	(16.8-23.4)	(4.8-19.8)	(5.1-21.3)	(7.3-8.2)	(7.8-8.6)	(10.5-30.2)	(14.1-21.9)	(14.2-22.6)	(11.4-37.1)	(16.9-29.6)
North	—	—	23.8	23.6	22.3	17.0	17.7	11.8	24.7	27.8	24.3	26.6	26.6	32.7
			(18.5-30.1)	(18.6-29.4)	(18.0-27.4)	(8.9-29.9)	(14.2-22.0)	(6.6-20.2)	(18.9-31.6)	(22.5-33.8)	(23.1-25.5)	(16.6-39.7)	(18.8-36.2)	(26.8-39.2)
West	—	—	27.9	23.9	20.8	13.4	11.5	10.5	11.9	22.8	24.7	29.6	29.4	28.5
			(22.7-33.7)	(20.3-28.0)	(17.1-25.0)	(8.8-20.0)	(8.5-15.3)	(9.0-12.2)	(10.8-13.1)	(18.0-28.4)	(21.8-28.0)	(24.0-35.8)	(24.6-34.6)	(24.8-32.6)
East	—	—	27.5	20.7	15.9	16.2	11.3	10.0	9.2	21.2	26.7	28.3	25.6	28.5
			(23.2-32.3)	(18.6-23.1)	(8.4-28.0)	(13.2-19.7)	(8.0-15.6)	(7.2-13.8)	(7.6-11.1)	(16.8-26.5)	(22.4-31.5)	(23.9-33.3)	(18.7-33.9)	(24.6-32.7)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil, etc)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Frequency of Cannabis Use among the Total Sample

(Tables 3.2.3, 3.5.2a – 3.5.3b; Figure 3.5.2)

2003: Grades 7 to 12

- Among all students, 16.5% report using cannabis six times or more during the past year (see Table 3.2.3). About 13% of students used cannabis between 1 to 5 times.
- During the past 4 weeks before the survey, 7.7% of students used cannabis weekly, and 4.2% used on a daily basis.
- Males are more likely to use cannabis frequently than are females. For example, among all students, 6.2% of males use cannabis daily compared to 2.2% of females.

□ If we consider the ratio of daily use among the total sample to past year use (i.e., daily rate/past 12 month rate) as an indicator of the relative intensity of cannabis use, then this rate is higher in 2003 (.14) compared to earlier surveys from the 1990s (.07 - .08) and especially compared to 1987 (.04).

1999 – 2003: Grades 7 to 12

□ In the short-term, there have been no major changes in the frequency at which students use cannabis.

1979 – 2003: Grades 7, 9, 11

□ Among all students, the use of cannabis six times or more over the past year is currently at an elevated level (16%) – resembling the rates of the late 1970s – compared to 1991 (4.6%) (see Table 3.2.3 and Figure 3.5.2).

□ Daily cannabis use is also more prevalent now (4.3%) than a decade ago (under 1%).

Table 3.5.2a: Frequency of Cannabis Use During the Past Year among the Total Sample, 1999 – 2003, Grades 7 to 12

	(N)	Percentage of Total Sample		
		1999 (4447)	2001 (3898)	2003 (6616)
Frequency:				
Not Used		72.0	71.4	70.4
1-2 times		8.1	7.0	8.6
3-5 times		4.3	5.2	4.5
6-9 times		3.6	3.5	3.4
10-19 times		3.4	3.6	3.3
20-39 times		2.8	2.8	2.6
40+ times		5.8	6.6	7.2

Q: In the last 12 months, how often did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil, etc)?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.5.2b: Frequency of Cannabis Use During the Past Year among the Total Sample, 1981 – 2003, Grades 7, 9, 11 only

	(N)	Percentage of Total Sample											
		1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Frequency:													
Not Used		75.0	78.1	80.6	86.2	88.1	90.1	88.5	78.1	72.2	73.2	73.8	72.2
1-2 times		6.8	7.1	6.6	5.5	5.0	3.6	4.5	6.7	8.0	8.0	6.0	8.2
3-5 times		3.1	3.2	3.3	2.2	2.1	1.7	2.1	3.7	4.5	3.8	4.8	3.6
6-9 times		3.5	2.8	2.3	1.2	1.2	1.1	1.2	2.1	3.3	3.8	2.9	3.2
10-19 times		3.3	2.5	2.0	2.1	1.4	1.1	0.9	2.8	3.5	3.4	4.1	3.4
20-39 times		2.8	1.9	1.7	0.9	1.0	1.0	1.1	2.0	2.8	2.7	2.6	2.5
40+ times		5.5	4.3	3.5	2.0	1.2	1.4	1.6	4.4	5.7	5.1	5.8	6.8

Q: In the last 12 months, how often did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil, etc)?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.5.3a: Frequency of Cannabis Use *During the Past 4 Weeks* among the *Total Sample, 1999 – 2003, Grades 7 to 12*

		Percentage of Total Sample		
		1999 (4447)	2001 (1837)	2003 (3152)
(N)				
Not Used During the Past 4 Weeks				
Total		79.1	78.4	79.4
Sex	Male	75.2	75.4	76.2
	Female	83.2	81.4	82.4
1-2 Times				
Total		10.2	10.1	8.8
Sex	Male	10.6	10.0	8.4
	Female	9.8	10.3	9.3
1-2 Times Each Week				
Total		4.3	3.9	3.7
Sex	Male	5.2	5.1	4.1
	Female	3.3	2.7	3.2
3-4 Times Each Week				
Total		2.6	2.9	2.4
Sex	Male	3.3	3.3	2.9
	Female	2.0	2.5	1.9
5-6 Times Each Week				
Total		1.2	1.6	1.6
Sex	Male	1.9	1.3	2.2
	Female	0.5	1.9	1.9
Used Daily				
Total		2.5	3.1	4.2
Sex	Male	3.8	5.0	6.2
	Female	1.2	1.2	2.2

Note: The 2001 and 2003 estimates are each based on a random half sample.

Q: During the **last 4 weeks** how often (if ever) did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil)?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.5.3b: Frequency of Cannabis Use *During the Past 4 Weeks* among the *Total Sample*, 1987 – 2003, Grades 7, 9, 11 only

		Percentage of Total Sample								
(N)		1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (2544)	1999 (2421)	2001 (953)	2003 (1618)
Not Used During the Past 4 Weeks										
Total		90.6	92.5	93.2	91.6	82.6	79.0	79.6	80.3	79.4
Sex	Male	88.6	92.1	92.1	89.0	80.1	77.0	76.8	76.2	74.7
	Female	92.4	92.9	94.4	94.1	85.0	80.1	82.4	84.6	83.8
1-2 Times										
Total		4.6	4.1	3.1	4.5	7.9	9.2	10.3	8.8	8.6
Sex	Male	4.9	3.9	3.2	5.2	8.2	8.0	10.3	9.6	8.9
	Female	4.3	4.4	3.0	3.9	7.7	10.2	10.3	7.8	8.3
1-2 Times Each Week										
Total		2.7	2.4	2.2	2.3	5.2	6.7	3.8	3.4	3.8
Sex	Male	3.2	2.6	2.3	3.3	6.1	7.0	4.1	4.1	4.5
	Female	2.3	2.4	2.0	1.3	4.3	6.4	3.4	2.7	3.0
3-4 Times Each Week										
Total		1.1	†	0.6	0.6	1.9	2.1	2.7	2.8	2.3
Sex	Male	1.6	0.5	0.9	0.9	2.4	3.5	3.4	3.5	3.6
	Female	0.6	†	†	†	1.5	0.9	2.0	2.0	1.1
5-6 Times Each Week										
Total		†	†	†	0.6	1.0	1.4	1.3	2.0	1.6
Sex	Male	0.6	†	†	1.1	1.1	1.7	2.1	1.8	1.9
	Female	†	†	†	†	0.9	1.2	†	2.2	1.2
Used Daily										
Total		0.6	†	0.7	†	1.4	1.6	2.5	2.7	4.3
Sex	Male	1.0	0.5	1.1	0.6	2.1	2.8	3.3	4.8	6.3
	Female	†	†	†	†	0.7	†	1.6	0.6	2.4

Notes: (1) † estimate suppressed or less than 0.5%; (2) the 2001 and 2003 estimates are each based on a random half sample.

Q: During the **last 4 weeks** how often (if ever) did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Frequency of Cannabis Use among Users

(Tables 3.5.4a, 3.5.4b; Figure 3.5.3)

2003: Grades 7 to 12

- Among users, almost half (44%) used cannabis at least 10 times during the year before the survey (see Figure 3.1.2).
- Table 3.5.4a presents the frequency of cannabis use in the past 4 weeks among cannabis users. About one-quarter of users consume cannabis on a weekly basis. Another 13.6% use on a daily basis.
- Male users consume cannabis more frequently than female users. For example, 19.2% of male cannabis users use the drug daily compared to 7.5% of female users.

1999 – 2003: Grades 7 to 12

- In the short-term, daily cannabis use among users is significantly higher in 2003 (13.6%) than in 1999 (8.1%), but has remained relatively stable since 2001 (10.2%).

1979 – 2003: Grades 7, 9, 11

- As seen in Figure 3.5.3, between 1979 and 1989 the frequency of past year cannabis use declined steadily among users. For example, the average number of times cannabis was used dropped from 17.6 times to 10.2 times, and the percentage of users who used 40 or more times dropped from 26.7% in 1979 to 9.8% in 1989.
- This trend reversed after 1989: the percentage of cannabis users who used 40 or more times increased significantly from 9.8% in 1989 to 24.6% in 2003,

and the average number of times used increased from 10.2 to 16.1 times in 2003.

- Table 3.5.4b shows past-4-week frequency of use among cannabis users, between 1987 and 2003. Daily cannabis use among users has increased significantly over the long-term, from 3.5% in 1987 to 14.6% in 2003.

Figure 3.5.3
Frequency of Past Year Cannabis Use among Users
(Grades 7, 9, 11 only), OSDUS 1979 - 2003

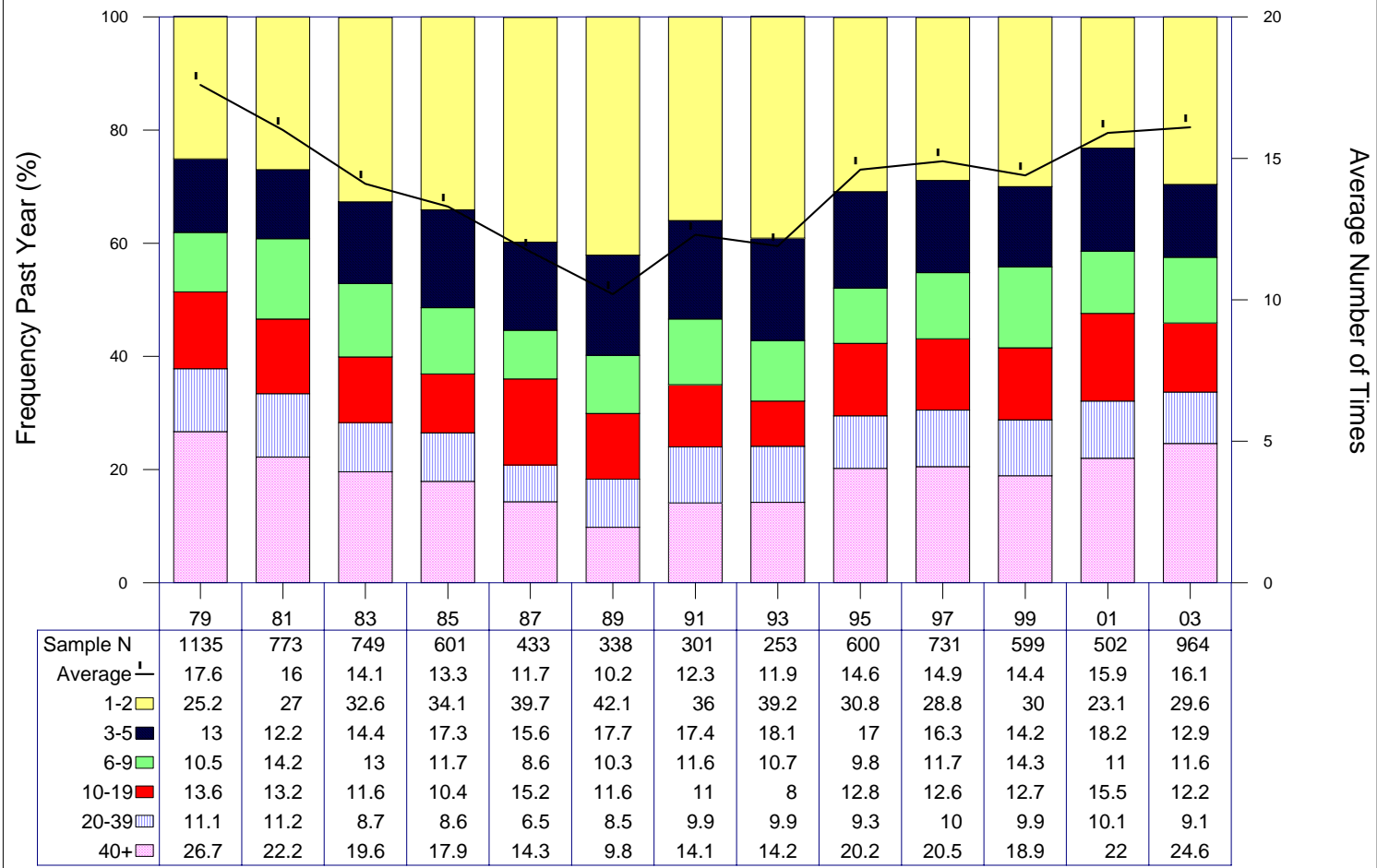


Table 3.5.4a: Frequency of Cannabis Use *During the Past 4 Weeks* among Cannabis Users, 1999 – 2003, Grades 7 to 12

		Percentage of Past Year Cannabis Users		
		1999	2001	2003
(N)		(1171)	(498)	(925)
Not Used During the Past 4 Weeks				
Total		32.6	30.2	33.6
Sex	Male	29.2	29.1	28.7
	Female	37.0	31.6	38.9
1-2 Times				
Total		32.6	32.0	28.0
Sex	Male	29.8	27.6	24.2
	Female	36.4	37.5	32.1
1-2 Times Each Week				
Total		14.0	13.1	12.0
Sex	Male	15.0	15.3	12.6
	Female	12.7	10.3	11.4
3-4 Times Each Week				
Total		8.8	9.1	7.8
Sex	Male	9.5	9.5	8.7
	Female	7.7	8.6	6.8
5-6 Times Each Week				
Total		4.0	5.4	5.0
Sex	Male	5.4	3.8	6.6
	Female	2.0	7.4	3.4
Used Daily				
Total		8.1	10.2	13.6^b
Sex	Male	11.0	14.7	19.2
	Female	4.2	4.6	7.5

Notes: (1) the 2001 and 2003 estimates are based on random half samples; (2) ^b 2003 vs 1999 significant difference, $p < .01$.

Q: During the **last 4 weeks** how often (if ever) did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.5.4b: Frequency of Cannabis Use *During the Past 4 Weeks* among *Cannabis Users*, 1987 – 2003, Grades 7, 9, 11 only

		Percentage of Past Year Cannabis Users								
(N)		1987 (424)	1989 (333)	1991 (299)	1993 (249)	1995 (592)	1997 (722)	1999 (597)	2001 (248)	2003 (459)
Not Used During the Past 4 Weeks										
Total		37.9	40.4	39.5	33.8	26.7	30.0	31.2	31.5	30.5
Sex	Male	36.1	41.6	38.8	26.6	23.9	24.7	29.8	25.4	23.8
	Female	40.3	39.2	40.6	43.7	30.0	34.8	33.0	39.3	38.5
1-2 Times										
Total		29.7	32.9	27.2	34.6	32.3	30.3	34.5	29.8	28.3
Sex	Male	27.9	27.8	23.2	33.1	30.2	25.9	30.6	29.3	25.9
	Female	32.1	38.2	32.8	36.7	34.7	34.2	39.4	30.5	31.1
1-2 Times Each Week										
Total		18.7	19.3	20.0	18.8	22.1	22.7	12.9	12.2	12.9
Sex	Male	17.9	18.3	19.6	23.2	23.7	23.6	12.8	13.2	13.9
	Female	19.8	20.3	20.4	12.8	20.3	21.8	13.0	10.9	11.7
3-4 Times Each Week										
Total		7.8	2.5	5.4	4.7	8.4	7.0	9.1	9.8	8.1
Sex	Male	9.4	4.0	7.5	5.1	9.3	11.3	10.3	11.1	11.2
	Female	5.6	1.0	2.3	4.1	7.4	3.2	7.6	8.1	4.4
5-6 Times Each Week										
Total		2.4	2.3	2.4	5.2	4.3	4.8	4.2	7.0	5.5
Sex	Male	3.5	3.9	2.9	7.7	4.2	5.4	6.3	5.6	6.1
	Female	1.0	0.6	1.7	1.8	4.3	4.3	1.6	8.8	4.9
Used Daily										
Total		3.5	2.5	5.6	2.9	6.2	5.2	8.1	9.6	14.6
Sex	Male	5.2	4.3	8.0	4.4	8.7	9.2	10.2	15.4	19.1
	Female	1.2	0.6	2.2	0.9	3.3	1.6	5.5	2.4	9.4

Notes: (1) † estimate suppressed or less than 0.5%; (2) the 2001 and 2003 estimates are each based on a random half sample.

Q: During the **last 4 weeks** how often (if ever) did you use **cannabis** (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil)?

Source: OSDUS, Centre for Addiction & Mental Health

Quantity of Marijuana Consumed

(Table 3.5.5)

2003: Grades 7 to 12

■ In 2003, about 15% of cannabis users in grades 7 to 12 smoked less than one joint per occasion during the past 4 weeks; 21.9% smoked about one joint; 18.4% smoked two to three joints; and 15.4% smoked four or more joints. Just over one-quarter (29.4%) of past year users did not use marijuana during the 4 weeks before the survey.

1999 – 2003: Grades 7 to 12

□ The typical quantity of marijuana consumed by users has not increased over the short-term.

Table 3.5.5: Number of Marijuana Joints Smoked Per Occasion During the Past 4 Weeks among Cannabis Users, 1999 – 2003, Grades 7 to 12

	Percentage of Past Year Cannabis Users			
	(N)	1999 (1137)	2001 (497)	2003 (930)
No marijuana in the past 4 weeks		13.1	26.4	29.4
Less than 1 joint		23.8	13.8	14.9
About 1 joint		23.8	19.6	21.9
2 to 3 joints		24.9	23.6	18.4
4 + joints		14.4	16.6	15.4

Note: Item asked of a random half sample in 2001 and 2003.

Q: During the **last 4 weeks**, on occasions when you have used marijuana, **how many joints** did you typically smoke? (If you shared joints with others, count only the amount that **you** smoked)

Source: *OSDUS*, Centre for Addiction & Mental Health

Indicators of Cannabis Problems and Dependence

(Tables 3.5.6, 3.5.7)

Starting in 1999, we assessed attempts to reduce cannabis use during the past 12 months. In 2003, we also included questions about uncontrolled use and sustained daily use during the past 12 months. We report results for the total sample and for cannabis users.

1999 – 2003: Grades 7 to 12

□ As seen in Table 3.5.7, between 1999 and 2003, the percentage of cannabis users attempting to cut down on use remained stable – hovering at about 40%.

2003: Grades 7 to 12

■ Among all students, 13.4% report attempting to reduce their use of cannabis during the past 12 months; 4.3% report uncontrolled use (could not stop); and 7.7% have used cannabis on a daily basis for at least one month.

■ Overall, a majority (91.9%) of students report none of the three cannabis dependence indicators; 8.1% report one or more indicators.

■ Among cannabis users, the most commonly cited indicator is attempts to reduce use (40%), followed by sustained daily use (24.3%), and uncontrolled use (11.6%).

■ Overall, 75% of cannabis users report experiencing none of the three problem indicators, while about 2% experienced all three problems.

Table 3.5.6: Percentage of Total Sample, and of Cannabis Users, Reporting Indicators of Cannabis Problems, 2003, Grades 7 to 12

	Total Sample (N=3152)	Past Year Cannabis Users (N=930)
In the last 12 months, have you tried to stop using marijuana or hashish, but found that you couldn't stop?	4.3	11.6
In the last 12 months, has there been a period when you used marijuana or hashish every day or almost every day for at least a month?	7.7	24.3
In the last 12 months, have you tried to cut down your use of marijuana or hashish?	13.4	40.0
Summary:		
0 positive	91.9	75.0
1 positive	5.0	15.6
2 positive	2.5	7.5
3 positive	0.6	1.9

Notes: (1) entries in brackets are the 95% confidence intervals; (2) based on a random half sample.
Source: OSDUS, Centre for Addiction & Mental Health

Table 3.5.7: Percentage of *Cannabis Users* Reporting Attempts to Cut Down on Use During the Past Year, 1999 – 2003, Grades 7 to 12

		Percentage of Past Year Cannabis Users			
		1999	2001	2003	
		(N)	(1158)	(496)	(930)
In the last 12 months, have you tried to cut down your use of marijuana or hashish?					
Total		41.5	42.0	40.0	
(95% CI)		(37.2-46.0)	(36.6-47.5)	(36.2-43.8)	
Sex					
Male		45.0	47.0	44.1	
		(39.4-50.7)	(39.8-54.4)	(38.4-49.9)	
Female		36.8	35.6	35.6	
		(31.1-43.0)	(27.5-44.6)	(31.5-39.7)	
Grade					
7		†	†	†	
8		37.9	†	†	
		(27.2-49.9)			
9		43.2	45.2	36.8	
		(37.2-49.4)	(34.4-56.4)	(28.2-46.3)	
10		37.3	47.5	44.4	
		(30.2-45.0)	(35.9-59.4)	(36.0-53.2)	
11		45.9	37.8	39.4	
		(37.4-54.6)	(30.0-46.3)	(32.6-46.5)	
12		38.7	41.0	41.9	
		(31.0-47.0)	(36.6-47.5)	(34.9-49.3)	
Region					
Toronto		40.3	36.3	40.7	
		(29.2-52.4)	(21.0-55.0)	(31.8-50.3)	
North		32.6	36.1	34.9	
		(25.2-41.0)	(25.5-48.3)	(28.2-42.2)	
West		45.9	45.1	37.8	
		(38.9-53.1)	(37.2-53.2)	(32.4-43.6)	
East		38.0	41.2	44.5	
		(31.0-45.6)	(32.4-50.7)	(37.0-52.3)	

Notes: (1) based on a random half sample in 2001 and 2003; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed; (4) no significant differences between 1999 and 2003.

Source: OSDUS, Centre for Addiction & Mental Health

Potential Cannabis Dependence among Users

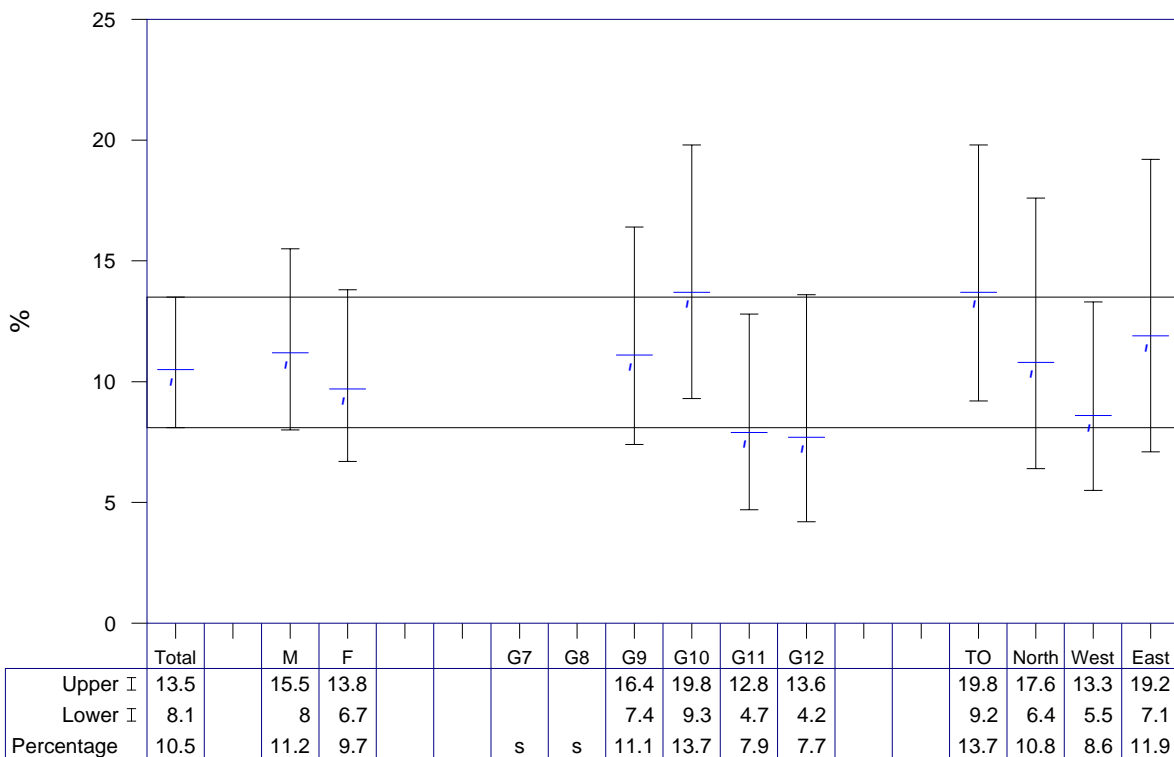
(Figure 3.5.4)

To estimate the percentage of past year cannabis users who may have a dependence problem, we present the percentage reporting uncontrolled use *and* sustained daily use or attempts to reduce use, during the past 12 months.

2003: Grades 7 to 12

- About one-in-ten (10.5%) of cannabis users in grades 7 to 12 may have a dependence problem.
- Despite some variation, there are no significant differences by sex, grade, or region.

Figure 3.5.4
Percentage of Past Year Cannabis Users Reporting a Potential Dependence Problem, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate; s= suppressed estimate; based on a random half sample.

3.6 Other Illicit Drug Use

Past Year Use of Inhalants: Glue and Other Solvents

(Tables 3.6.1a, 3.6.1b, 3.6.2a, 3.6.2b; Figures 3.6.1 - 3.6.3)

	Inhalant Use in 2003 (Grades 7 to 12)	Trends in Inhalant Use
Total Sample	<ul style="list-style-type: none"> Overall, 2.8% of Ontario students report inhaling <u>glue</u> and 6.1% report inhaling <u>other solvents</u> in order to get high during the 12 months before the survey. With the sampling error, we estimate that between 2.3% and 3.4% of students inhaled <u>glue</u>, and that between 5.2% and 7.2% inhaled <u>solvents</u>. The estimated number of students in grades 7 to 12 inhaling <u>glue</u> is 21,700, and the number for <u>other solvents</u> is 48,700. 	<ul style="list-style-type: none"> Between 1999 and 2003, there was no significant change for either inhaling glue or other solvents among students in grades 7 to 12. Over the long-term, inhalant use in 2003 is higher than the rates of the 1980s and early 1990s, and comparable to those found during the late 1970s. The most dominant long-term change occurred for solvent use, which declined during the 1980s, from 7.4% in 1977 to 1.8% in 1991. Use increased noticeably between 1997 and 1999, from 2.8% to 8.3%, and has remained at this elevated level in recent years.
Sex	<ul style="list-style-type: none"> Males and females are equally likely to inhale <u>glue</u> and <u>other solvents</u>. 	<ul style="list-style-type: none"> Inhalant use did not significantly change for either males or females between 1999 and 2003. Over the long-term, solvent use is higher in 2003 compared to 1991 for both males (6.5% vs 1.4%) and females (6.6% vs 2.2%). Glue use increased during this period among females only.
Grade	<ul style="list-style-type: none"> Inhaling <u>glue</u> tends to significantly decline with grade, from about 5% of 7th-graders down to 2% of 12th-graders. The same pattern holds true for sniffing <u>solvents</u>, from about 10% of 7th-graders down to about 4% of 12th-graders. 	<ul style="list-style-type: none"> Between 1999 and 2003, there was no significant change in inhalant use within any grade. The long-term trend of decreases during the 1980s and increases during the 1990s is especially prominent among 7th-graders and 9th-

graders. Most noticeably, solvent use declined among 7th-graders from 12.9% in 1977 to 2.1% in 1991, then increased to 10.2% in 2003.

Region

■ Although rates of inhaling glue and other solvents regionally vary, these differences are not statistically significant.

□ Between 1999 and 2003, the use of inhalants did not significantly change in any of the regions.

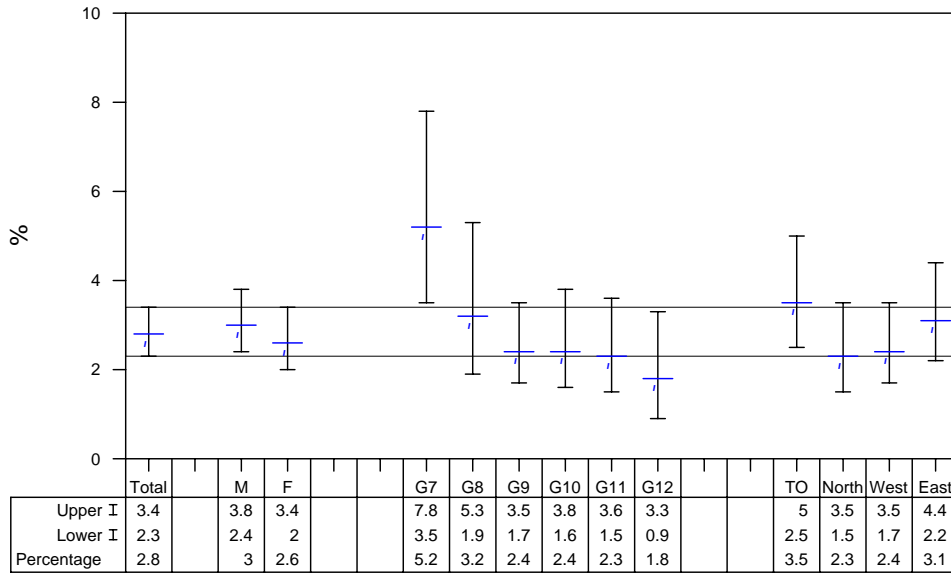
□ Students in all four regions show increases in inhalant use during the 1990s.

Frequency of Use

■ Less than 1% of the total sample report sniffing glue at least 6 times during the past 12 months. Inhaling other solvents at least 6 times was reported by 1.4% of the total sample.

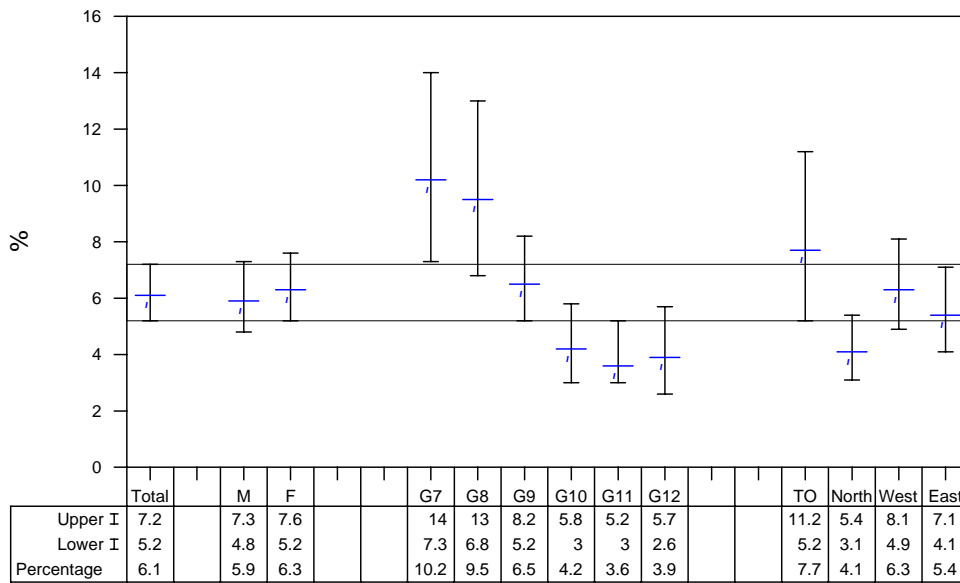
■ Most users report using inhalants only once or twice during the 12 months before the survey (60% of glue users, and 63% of solvent users).

Figure 3.6.1
Past Year Glue Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate.

Figure 3.6.2
Past Year Other Solvent Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate.

Table 3.6.1a: Percentage Reporting *Glue Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			3.8	3.2	2.8
(95% CI)			(3.1-4.7)	(2.6-4.1)	(2.3-3.4)
Sex	Male		3.9	4.0	3.0
			(2.9-5.1)	(3.0-5.2)	(3.8-2.4)
	Female		3.8	2.5	2.6
			(2.8-5.1)	(1.8-3.5)	(2.0-3.4)
Grade	7		6.8	3.9	5.2
			(4.8-9.6)	(2.5-6.0)	(3.5-7.8)
	8		6.3	5.7	3.2
			(4.6-8.6)	(3.9-8.3)	(1.9-5.3)
	9		4.3	3.8	2.4
			(2.9-6.4)	(2.5-5.6)	(1.7-3.5)
	10		1.1	2.7	2.4
			(0.6-2.3)	(1.5-4.8)	(1.6-3.8)
	11		2.1	1.2	2.3
			(0.9-4.6)	(0.3-5.3)	(1.5-3.6)
	12		2.0	1.8	1.8
			(1.1-3.8)	(0.8-4.2)	(0.9-3.3)
Region	Toronto		4.1	4.6	3.5
			(2.7-6.1)	(2.8-7.7)	(2.5-5.0)
	North		3.0	2.3	2.3
			(1.8-5.0)	(1.5-3.5)	(1.5-3.5)
	West		4.0	3.3	2.4
			(2.7-5.7)	(2.3-4.8)	(1.7-3.5)
	East		3.8	2.4	3.1
			(2.8-5.2)	(1.6-3.6)	(2.2-4.4)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you sniff **glue** (for example, airplane glue, contact cement, etc.) in order to get high?

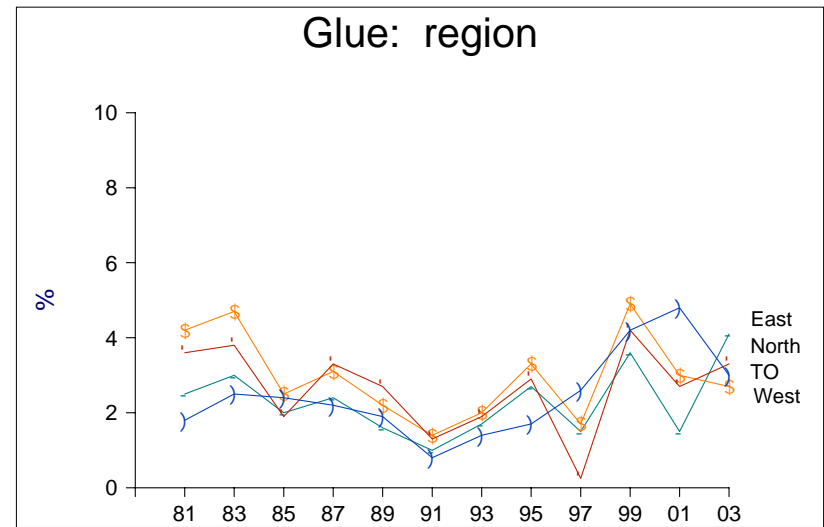
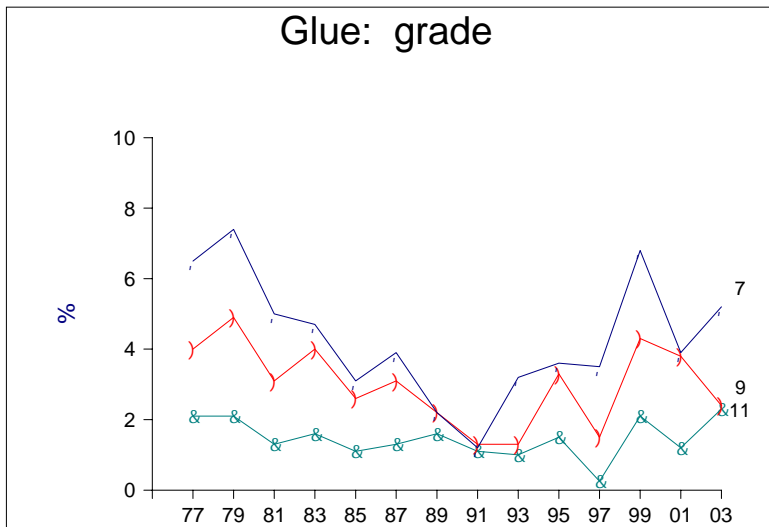
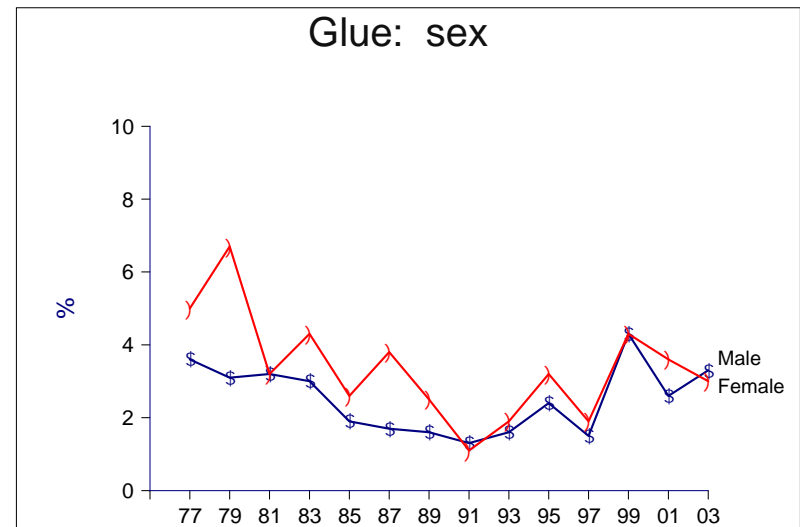
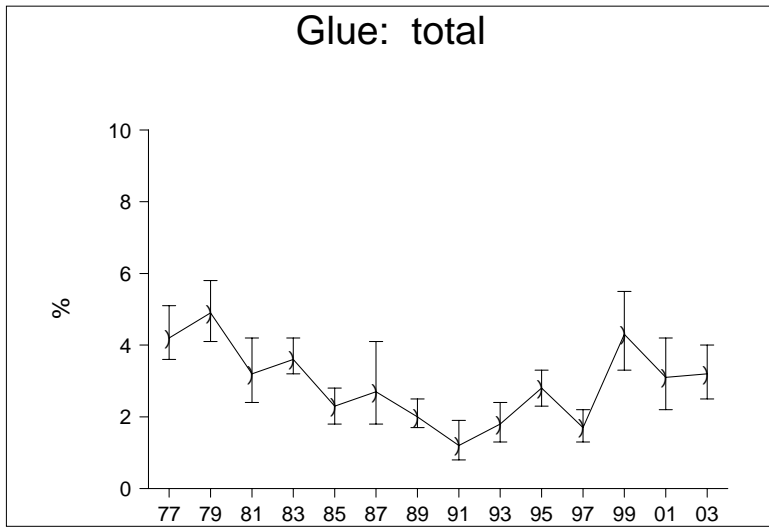
Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.2a: Percentage Reporting *Other Solvent Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(4447)	(3898)	(6616)
		(N)		
Total		7.6	6.4	6.1
(95% CI)		(6.6-8.8)	(5.3-7.9)	(5.2-7.2)
Sex	Male	6.5	5.9	5.9
		(5.3-7.8)	(4.6-7.6)	(4.8-7.3)
	Female	8.8	6.4	6.3
		(7.2-10.7)	(5.3-7.9)	(5.2-7.6)
Grade	7	12.1	9.7	10.2
		(9.3-15.7)	(7.6-12.4)	(7.3-14.0)
	8	11.2	9.3	9.5
		(8.5-14.5)	(7.1-12.0)	(6.8-13.0)
	9	8.4	7.6	6.5
		(6.3-11.0)	(5.6-10.3)	(5.2-8.2)
	10	4.6	3.8	4.2
		(2.9-7.1)	(2.2-6.6)	(3.0-5.8)
	11	4.9	2.3	3.6
		(3.0-8.0)	(1.0-5.2)	(2.5-5.2)
	12	3.9	3.9	3.9
		(2.2-6.6)	(2.2-6.6)	(2.6-5.7)
Region	Toronto	9.4	9.6	7.7
		(6.8-12.8)	(6.4-14.0)	(5.2-11.2)
	North	6.0	4.5	4.1
		(4.0-8.8)	(3.1-6.4)	(3.1-5.4)
	West	7.1	6.0	6.3
		(5.6-8.9)	(4.8-7.5)	(4.9-8.1)
	East	7.8	4.6	5.4
		(5.9-10.1)	(3.2-6.6)	(4.1-7.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.
 Q: In the **last 12 months**, how often did you sniff **solvents** (such as nail polish remover, paint thinner or gasoline, etc.) in order to get high?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.3
Past Year Inhalant Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)



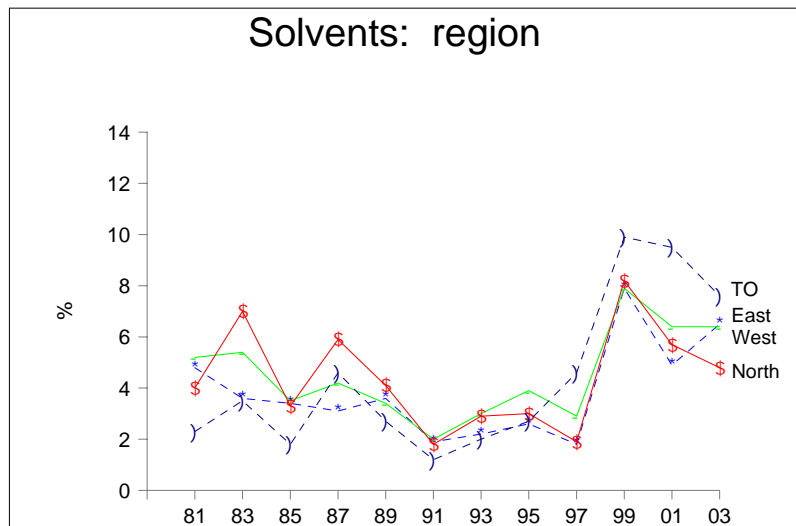
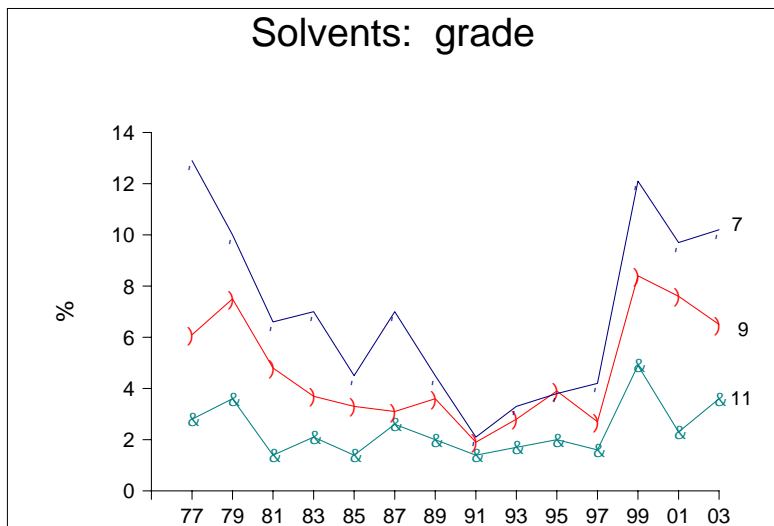
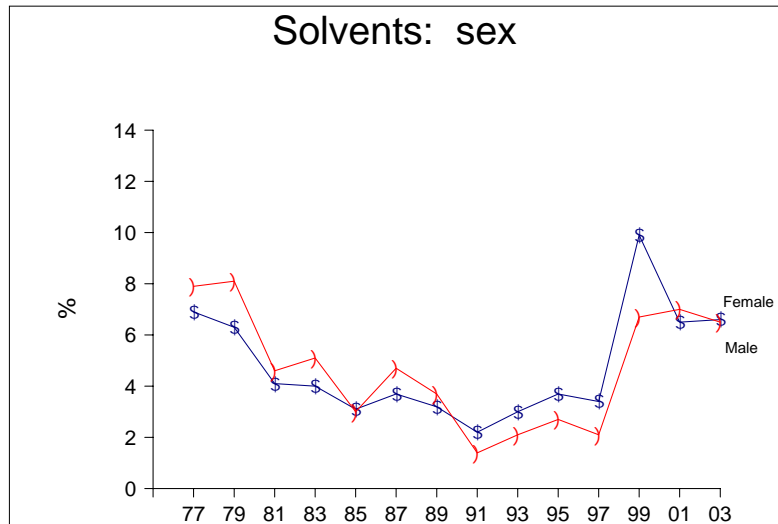
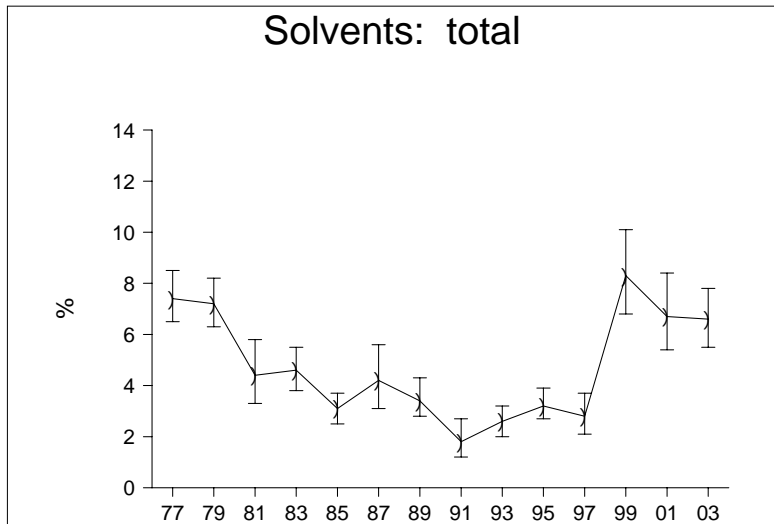


Table 3.6.1b: Percentage Reporting *Glue Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1989 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total		4.2	4.9	3.2	3.6	2.3	2.7	2.0	1.2	1.8	2.8	1.7	4.3	3.1	3.2
(95% CI)		(3.6-5.1)	(4.1-5.8)	(2.4-4.2)	(3.2-4.2)	(1.8-2.8)	(1.8-4.1)	(1.7-2.5)	(0.8-1.9)	(1.3-2.4)	(2.3-3.3)	(1.3-2.2)	(3.3-5.5)	(2.2-4.2)	(2.5-4.0)
Sex															
Male		5.0	6.7	3.2	4.3	2.6	3.8	2.5	1.1	1.9	3.2	1.9	4.3	3.6	3.0
		(3.9-6.2)	(5.3-8.3)	(2.4-4.2)	(3.4-5.4)	(1.8-3.7)	(2.6-5.6)	(1.9-3.3)	(0.8-1.6)	(1.2-3.1)	(2.3-4.3)	(1.3-2.7)	(2.9-6.2)	(2.4-5.3)	(2.3-4.0)
Female		3.6	3.1	3.2	3.0	1.9	1.7	1.6	1.3	1.6	2.4	1.5	4.3	2.6	3.3
		(2.9-4.5)	(2.4-4.0)	(2.0-5.1)	(2.3-4.0)	(1.6-2.3)	(0.9-3.2)	(1.0-2.5)	(0.6-2.6)	(1.0-2.8)	(1.8-3.2)	(1.0-2.4)	(3.0-6.1)	(1.6-4.0)	(2.4-4.6)
Grade															
7		6.5	7.4	5.0	4.7	3.1	3.9	2.2	1.2	3.2	3.6	3.5	6.8	3.9	5.2
		(5.1-8.2)	(5.9-9.3)	(3.2-7.8)	(3.9-5.7)	(2.2-4.3)	(2.4-6.4)	(1.5-3.2)	(0.3-4.2)	(2.2-4.5)	(2.4-5.2)	(2.7-4.5)	(4.8-9.6)	(2.5-6.0)	(3.5-7.8)
9		4.0	4.9	3.1	4.0	2.6	3.1	2.2	1.3	1.3	3.3	1.5	4.3	3.8	2.4
		(3.0-5.1)	(3.7-6.4)	(2.2-4.4)	(3.2-5.0)	(1.6-4.0)	(1.4-6.7)	(1.6-3.1)	(0.9-1.9)	(0.8-2.2)	(2.8-4.0)	(1.0-2.4)	(2.9-6.4)	(2.5-5.6)	(1.7-3.5)
11		2.1	2.1	1.3	1.6	1.1	1.3	1.6	1.1	1.0	1.5	†	2.1	1.2	2.3
		(1.2-3.4)	(1.2-3.4)	(0.8-2.2)	(0.9-3.0)	(0.7-1.7)	(0.6-2.9)	(1.2-2.2)	(0.7-1.8)	(0.4-2.7)	(0.9-2.5)		(0.9-4.6)	(0.3-5.3)	(1.5-3.6)
Region															
Toronto		—	—	1.8	2.5	2.4	2.2	1.9	0.8	1.4	1.7	2.6	4.2	4.8	3.0
				(1.2-2.8)	(1.1-5.4)	(1.1-5.2)	(1.2-4.0)	(0.8-4.3)	(0.2-3.1)	(0.9-2.1)	(0.7-3.8)	(1.6-4.2)	(2.4-7.4)	(2.8-8.3)	(1.7-5.1)
North		—	—	3.6	3.8	1.9	3.3	2.7	1.3	1.9	2.9	†	4.2	2.7	3.3
				(1.1-10.8)	(2.0-6.8)	(0.8-4.7)	(2.9-3.9)	(1.2-6.0)	(0.3-5.3)	(0.5-6.8)	(1.6-5.0)		(2.0-8.8)	(1.7-4.2)	(2.0-5.6)
West		—	—	4.2	4.7	2.5	3.1	2.2	1.4	2.0	3.3	1.7	4.9	3.0	2.7
				(2.9-6.0)	(4.2-5.2)	(2.0-3.0)	(1.5-6.5)	(1.8-2.8)	(0.7-3.0)	(1.2-3.2)	(2.8-3.9)	(1.1-2.6)	(3.2-7.2)	(1.8-5.1)	(1.8-4.0)
East		—	—	2.5	3.0	2.0	2.4	1.6	1.0	1.7	2.7	1.5	3.6	1.5	4.1
				(1.5-4.0)	(2.4-3.9)	(1.5-2.7)	(1.2-4.4)	(1.4-1.8)	(0.8-1.5)	(0.9-3.2)	(1.6-4.3)	(1.2-1.9)	(2.2-5.6)	(0.7-3.3)	(2.7-6.1)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed or less than 0.5%.
Q: In the last 12 months, how often did you sniff glue (for example, airplane glue, contact cement, etc.) in order to get high?
Source: OSDUS, Centre for Addiction & Mental Health

Table 3.6.2b: Percentage Reporting *Other Solvent Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	7.4	7.2	4.4	4.6	3.1	4.2	3.4	1.8	2.6	3.2	2.8	8.3	6.7	6.6
(95% CI)	(6.5-8.5)	(6.3-8.2)	(3.3-5.8)	(3.8-5.5)	(2.5-3.7)	(3.1-5.6)	(2.8-4.3)	(1.2-2.7)	(2.0-3.2)	(2.7-3.9)	(2.1-3.7)	(6.8-10.1)	(5.4-8.4)	(5.5-7.8)
Sex														
Male	7.9	8.1	4.6	5.1	3.0	4.7	3.7	1.4	2.1	2.7	2.1	6.7	7.0	6.5
	(6.4-9.8)	(6.8-9.6)	(3.5-6.0)	(4.2-6.2)	(2.2-4.1)	(3.3-6.6)	(2.5-5.5)	(0.9-2.2)	(1.5-2.9)	(2.0-3.7)	(1.5-3.0)	(5.0-8.9)	(4.9-9.8)	(5.1-8.2)
Female	6.9	6.3	4.1	4.0	3.1	3.7	3.2	2.2	3.0	3.7	3.4	9.9	6.5	6.6
	(5.9-8.1)	(5.1-7.6)	(2.8-5.9)	(3.0-5.4)	(2.5-4.0)	(2.4-5.5)	(2.4-4.2)	(1.4-3.5)	(2.0-4.3)	(2.8-4.9)	(2.5-4.7)	(7.9-12.4)	(5.0-8.5)	(5.2-8.5)
Grade														
7	12.9	10.0	6.6	7.0	4.5	7.0	4.5	2.1	3.3	3.8	4.2	12.1	9.7	10.2
	(10.9-15.2)	(8.4-11.8)	(3.9-11.0)	(5.9-8.3)	(3.1-6.3)	(4.4-11.0)	(2.9-6.9)	(1.0-4.5)	(2.0-5.3)	(3.1-4.6)	(2.4-7.2)	(9.3-15.7)	(7.6-12.4)	(7.3-14.0)
9	6.1	7.5	4.8	3.7	3.3	3.1	3.6	1.9	2.8	3.9	2.7	8.4	7.6	6.5
	(4.9-7.5)	(6.1-9.3)	(3.7-6.0)	(2.1-6.4)	(2.7-4.1)	(2.6-3.8)	(2.7-4.7)	(1.3-2.7)	(2.3-3.4)	(2.9-5.3)	(2.2-3.3)	(6.3-11.0)	(5.6-10.3)	(5.2-8.2)
11	2.8	3.6	1.4	2.1	1.4	2.6	2.0	1.4	1.7	2.0	1.6	4.9	2.3	3.6
	(2.0-4.0)	(2.5-5.1)	(0.8-2.4)	(1.2-3.5)	(0.8-2.4)	(1.5-4.4)	(1.5-2.7)	(0.6-3.4)	(1.0-2.7)	(1.2-3.5)	(1.1-2.4)	(3.0-8.0)	(1.0-5.2)	(2.5-5.2)
Region														
Toronto	—	—	2.3	3.5	1.8	4.6	2.7	1.2	2.0	2.7	4.6	9.9	9.5	7.6
			(1.1-4.7)	(2.2-5.5)	(1.0-3.2)	(3.6-5.7)	(2.3-3.2)	(0.3-4.5)	(1.1-3.7)	(1.1-6.3)	(3.8-5.6)	(6.9-14.0)	(5.6-15.6)	(4.7-12.2)
North	—	—	4.0	7.0	3.3	5.9	4.1	1.8	2.9	3.0	1.9	8.2	5.7	4.8
			(1.3-12.3)	(4.3-10.4)	(2.2-4.8)	(4.2-8.2)	(2.2-7.6)	(0.6-5.0)	(1.1-7.6)	(2.0-4.5)	(1.2-3.0)	(4.2-15.3)	(3.7-8.8)	(3.3-7.0)
West	—	—	5.2	5.4	3.5	4.2	3.4	2.0	3.0	3.9	2.9	7.9	6.4	6.4
			(3.3-8.1)	(3.8-7.5)	(2.7-4.4)	(2.1-8.2)	(2.3-5.2)	(1.2-3.5)	(2.3-3.8)	(3.2-4.8)	(1.6-5.1)	(5.6-11.0)	(4.8-8.6)	(4.9-8.4)
East	—	—	4.8	3.6	3.4	3.1	3.6	1.9	2.2	2.6	1.8	7.9	4.9	6.5
			(4.4-5.3)	(3.1-4.2)	(2.2-5.4)	(2.4-4.0)	(2.7-4.9)	(0.9-3.9)	(1.3-3.9)	(2.2-3.2)	(1.2-2.5)	(5.6-11.0)	(3.0-7.9)	(4.8-8.8)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you sniff **solvents** (such as nail polish remover, paint thinner or gasoline, etc.) in order to get high?

Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year *Non-Medical Use of Barbiturates, Stimulants, and Tranquillizers*

(Tables 3.6.3a – 3.6.5b; Figures 3.6.4 - 3.6.7)

	Non-medical Substance Use in 2003 (Grades 7 to 12)	Trends in Non-medical Substance Use
Total Sample	<ul style="list-style-type: none"> ■ Of these three substances, the most widely used is <u>stimulants</u> (used by 5.8% of students) followed by <u>barbiturates</u> (2.5%), and <u>tranquillizers</u> (2.2%). These percentages represent about 55,600, 24,300, and 21,600 students in grades 7 through 12, respectively. 	<ul style="list-style-type: none"> □ Of the three substances, only barbiturates showed a significant change in use over the short-term, declining between 2001 (4.0%) and 2003 (2.5%). The 2003 estimate is also significantly lower than that found in 1999 (4.4%). □ Over the long-term, rates of use for all three substances are significantly lower in 2003 than they were in the late 1970s and 1980s (grades 7, 9, 11 only). Stimulant and tranquillizer use has remained relatively stable over the past decade, while barbiturate use has declined slightly in recent years.
Sex	<ul style="list-style-type: none"> ■ <u>Stimulant</u> use varies by sex, with females more likely to use than males (6.7% vs 4.7%). In contrast, males are significantly more likely than females to use <u>tranquillizers</u> (2.7% vs 1.8%). <u>Barbiturate</u> use does not differ by sex. 	<ul style="list-style-type: none"> □ Between 1999 and 2003 there was no significant change in use of any of these substances among males. However, among females, barbiturate use significantly declined in 2003 (2.5%) compared to 2001 (4.5%) and 1999 (4.9%). □ For both males and females, current rates of use are significantly lower compared to the early 1980s.
Grade	<ul style="list-style-type: none"> ■ <u>Stimulant</u> use is significantly associated with grade, increasing from 1.6% of 7th-graders to about 8% of 11th- and 12th-graders. <u>Tranquillizer</u> use also increases with grade, from less than 1% of 7th-graders to 4.1% of 11th-graders. Barbiturate use does not significantly vary by grade. 	<ul style="list-style-type: none"> □ Between 2001 and 2003, the use of <u>barbiturates</u> declined among 10th-graders (8.1% vs 2.8%). There was no significant change over the short-term for barbiturate use or tranquillizer use within any grade. □ For both 9th- and 11th-graders, current use of all three drugs is significantly lower compared to levels found in the early 1980s.

Region	<ul style="list-style-type: none"> ■ Only <u>stimulant</u> use varies significantly by region, with Toronto (3.8%) students the least likely to use, compared to the other three regions (range 6%-8%) 	<ul style="list-style-type: none"> □ Over the short-term, the only regional change occurred in the North: <u>barbiturate</u> use in 2003 (2.7%) is significantly lower than in 1999 (5.9%). □ Students in all four regions show declining trends in use of the three drugs during the 1980s, and a levelling-off since then.
Frequency of Use	<ul style="list-style-type: none"> ■ Frequent use (at least 6 times during the past year) of these substances is under 3% among all students. ■ Most users report using these substances only once or twice during the year before the survey (53% of <u>barbiturate</u> users, 44% of <u>stimulant</u> users, and 54% of <u>tranquillizer</u> users). However, one-quarter (25%) of <u>stimulant</u> users report using at least 10 times over the past year. 	

Figure 3.6.4
Past Year Non-Medical Barbiturate Use by Sex, Grade and Region, OSDUS 2003

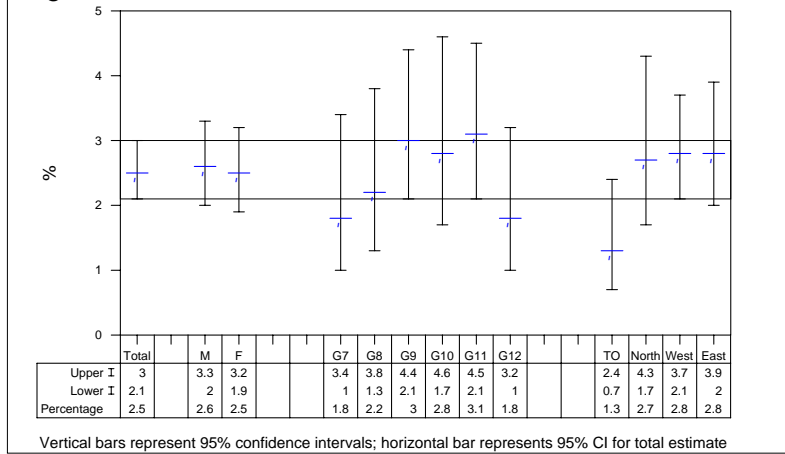


Figure 3.6.5
Past Year Non-Medical Stimulant Use by Sex, Grade and Region, OSDUS 2003

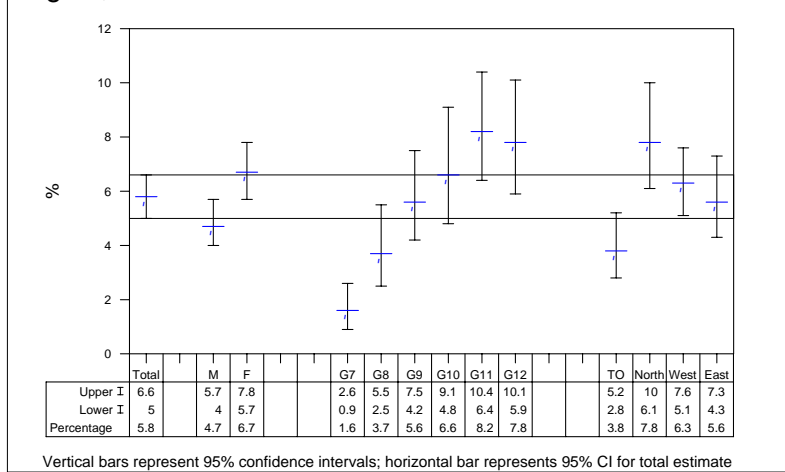


Figure 3.6.6
Past Year Non-Medical Tranquillizer Use by Sex, Grade and Region, OSDUS 2003

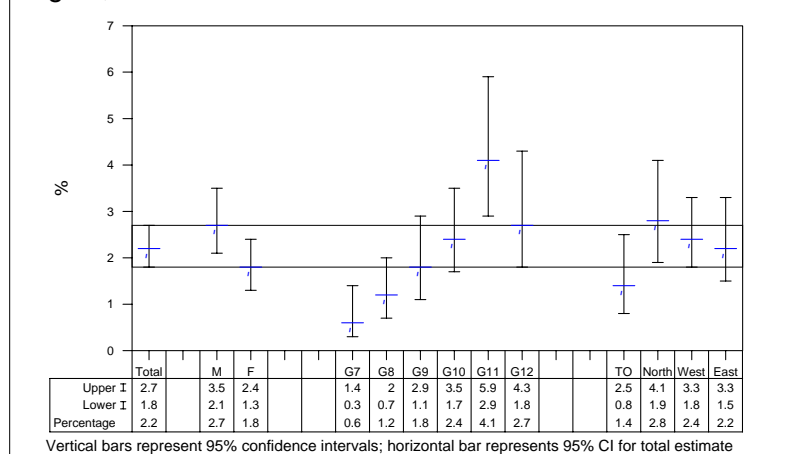


Table 3.6.3a: Percentage Reporting *Barbiturate Use* for Non-Medical Purposes During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			4.4	4.0	2.5^{ab}
(95% CI)			(3.5-5.5)	(3.2-5.0)	(2.1-3.0)
Sex	Male		3.8	3.5	2.6
			(2.7-5.4)	(2.6-4.9)	(2.0-3.3)
	Female		4.9	4.5	2.5^{ab}
			(3.8-6.4)	(3.4-5.9)	(1.9-3.2)
Grade	7		2.5	2.3	1.8
			(1.3-5.0)	(1.5-3.5)	(1.0-3.4)
	8		4.4	3.0	2.2
			(3.1-6.2)	(1.8-4.9)	(1.3-3.8)
	9		3.2	2.9	3.0
			(2.1-5.0)	(1.8-4.7)	(2.1-4.4)
	10		5.2	8.1	2.8^a
			(3.6-7.3)	(6.0-10.8)	(1.7-4.6)
	11		7.0	2.9	3.1
			(4.2-11.3)	(1.5-5.4)	(2.1-4.5)
	12		3.9	4.0	1.8
			(2.3-6.6)	(2.1-7.3)	(1.0-3.2)
Region	Toronto		3.0	2.5	1.3
			(1.7-5.0)	(1.6-4.1)	(0.7-2.4)
	North		5.9	4.3	2.7^b
			(3.0-11.5)	(3.1-5.8)	(1.7-4.3)
	West		4.6	4.8	2.8
			(3.1-6.7)	(3.5-6.6)	(2.1-3.7)
	East		4.4	3.8	2.8
			(3.2-6.1)	(2.4-5.9)	(2.0-3.7)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; (3) ^b 2003 vs. 1999 significant difference, $p < .01$.

Q: In the last 12 months, how often did you use **barbiturates** (such as Seconal, also known as “barbs”, “rainbows”, etc) **without a prescription** or without a doctor telling you to take them?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.4a: Percentage Reporting *Stimulant Use* for Non-Medical Purposes During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			7.3	6.3	5.8
(95% CI)			(6.4-8.4)	(5.4-7.4)	(5.0-6.6)
Sex	Male		5.3	4.5	4.7
			(4.3-6.6)	(3.4-6.0)	(4.0-5.7)
	Female		9.4	8.0	6.7
			(8.0-11.0)	(6.7-9.6)	(5.7-7.8)
Grade	7		1.8	1.9	1.6
			(1.1-3.0)	(1.1-3.3)	(0.9-2.6)
	8		6.3	3.3	3.7
			(4.1-9.4)	(2.2-5.0)	(2.5-5.5)
	9		6.9	5.5	5.6
			(5.3-9.0)	(3.6-8.3)	(4.2-7.5)
	10		8.4	7.8	6.6
			(6.2-11.3)	(5.7-10.6)	(4.8-9.1)
	11		10.7	10.3	8.2
			(7.5-14.9)	(7.4-14.1)	(6.4-10.4)
	12		10.0	10.4	7.8
			(7.9-12.7)	(6.9-15.4)	(5.9-10.1)
Region	Toronto		5.3	5.0	3.8
			(3.9-7.2)	(4.0-6.3)	(2.8-5.2)
	North		8.4	6.6	7.8
			(6.5-10.8)	(4.9-8.8)	(6.1-10.0)
	West		8.6	7.2	6.3
			(6.8-10.9)	(5.5-9.3)	(5.1-7.6)
	East		6.4	5.8	5.6
			(5.0-8.1)	(4.1-8.0)	(4.3-7.3)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.
 Q: In the **last 12 months**, how often did you use **stimulants** other than cocaine (such as diet pills, also known as “uppers”, “bennies”, “dexies”, etc.) **without a prescription** or without a doctor telling you to take them?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.5a: Percentage Reporting *Tranquillizer Use* for Non-Medical Purposes During the Past Year, 1999 – 2003, Grades 7 to 12

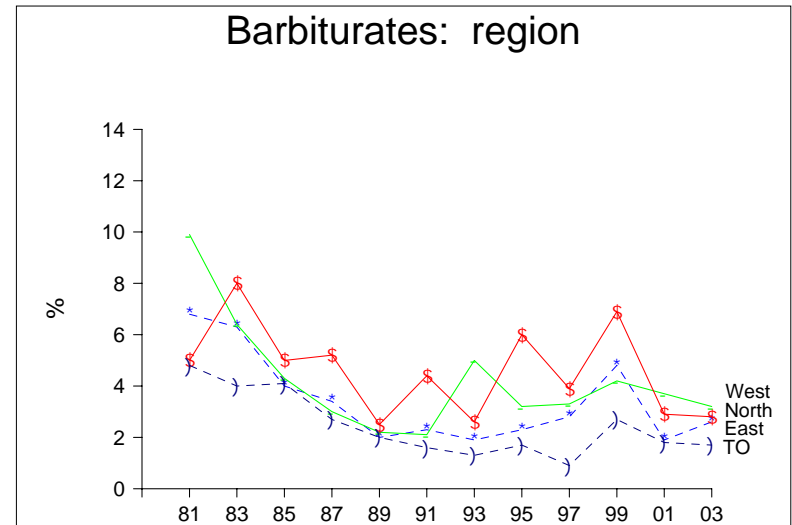
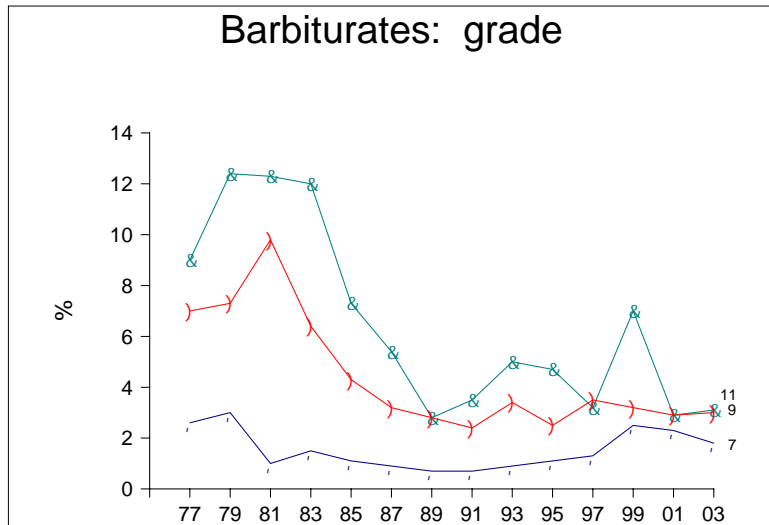
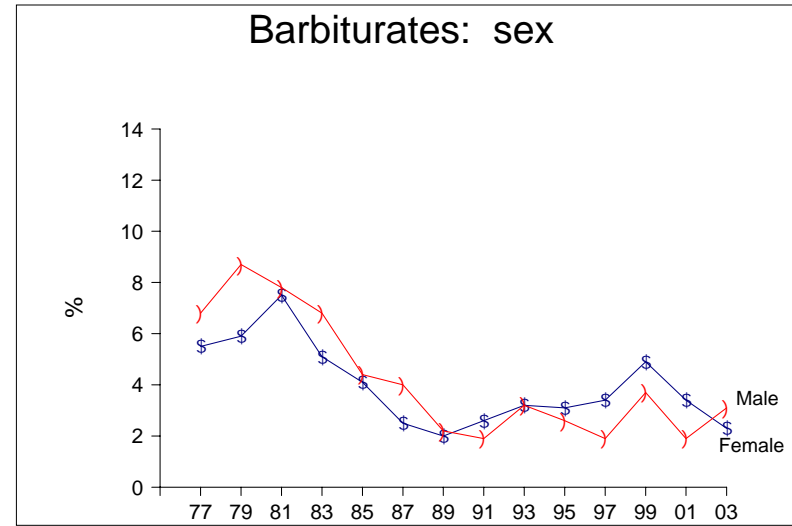
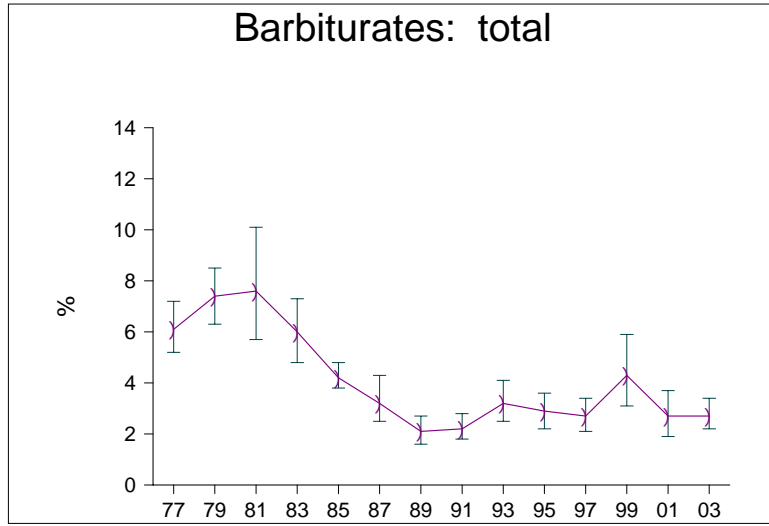
		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			2.0	2.2	2.2
(95% CI)			(1.6-2.6)	(1.6-3.1)	(1.8-2.7)
Sex	Male		1.9	2.7	2.7
			(1.4-2.7)	(1.8-3.9)	(2.1-3.5)
	Female		2.1	1.8	1.8
			(1.5-3.1)	(1.1-2.9)	(1.3-2.4)
Grade	7		†	0.6	0.6
				(0.2-1.8)	(0.3-1.4)
	8		1.9	2.1	1.2
			(1.1-3.3)	(1.1-4.2)	(0.7-2.0)
	9		1.7	1.4	1.8
			(1.0-2.9)	(0.6-3.2)	(1.1-2.9)
	10		1.3	2.7	2.4
			(0.7-2.3)	(1.6-4.6)	(1.7-3.5)
	11		3.1	3.3	4.1
			(1.8-5.2)	(1.7-6.4)	(2.9-5.9)
	12		4.1	4.2	2.7
			(2.7-6.2)	(2.0-8.4)	(1.8-4.2)
Region	Toronto		2.0	1.0	1.4
			(1.1-3.5)	(0.2-5.5)	(0.8-2.5)
	North		2.7	3.0	2.8
			(1.6-4.4)	(1.8-4.7)	(1.9-4.1)
	West		1.8	2.8	2.4
			(1.1-2.7)	(1.7-4.5)	(1.8-3.3)
	East		2.3	2.0	2.2
			(1.4-3.6)	(1.2-3.6)	(1.5-3.3)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) no significant differences between 1999 and 2003.

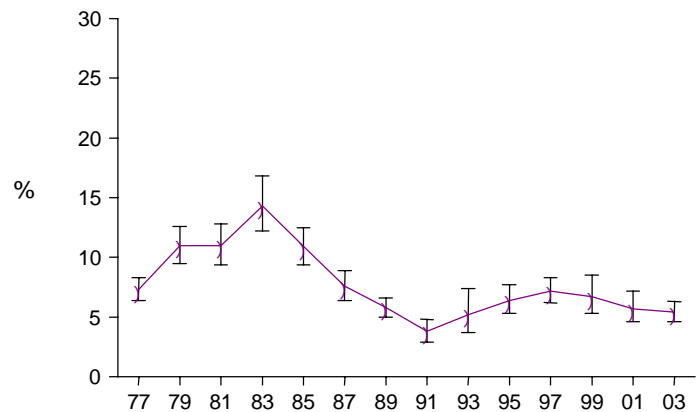
Q: In the **last 12 months**, how often did you use **tranquillizers** (such as Valium, Librium, also known as “tranqs”, “downers”, etc.) **without a prescription** or without a doctor telling you to take them?

Source: *OSDUS*, Centre for Addiction & Mental Health

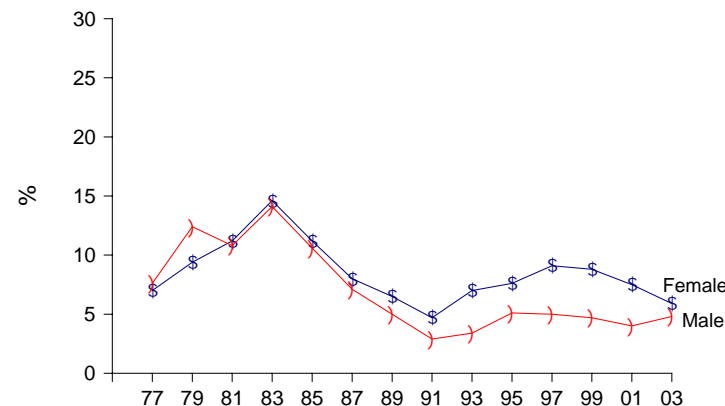
Figure 3.6.7
Past Year Non-medical Substance Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)



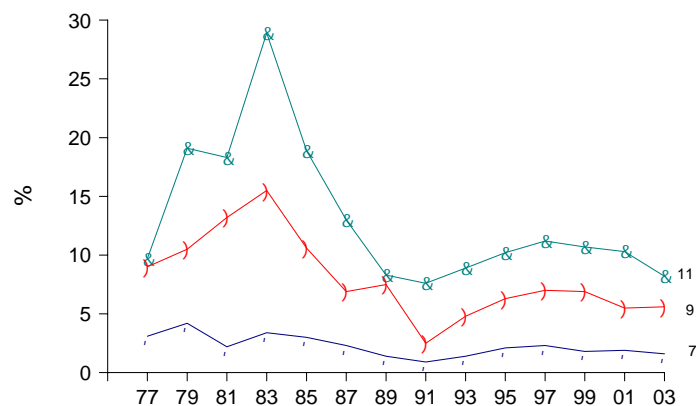
Stimulants: total



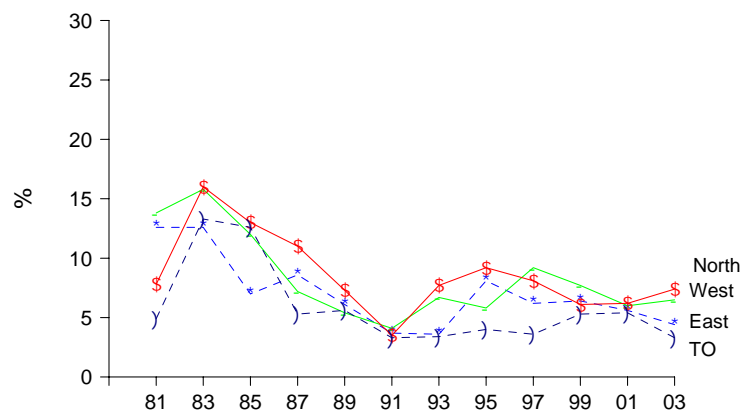
Stimulants: sex



Stimulants: grade



Stimulants: region



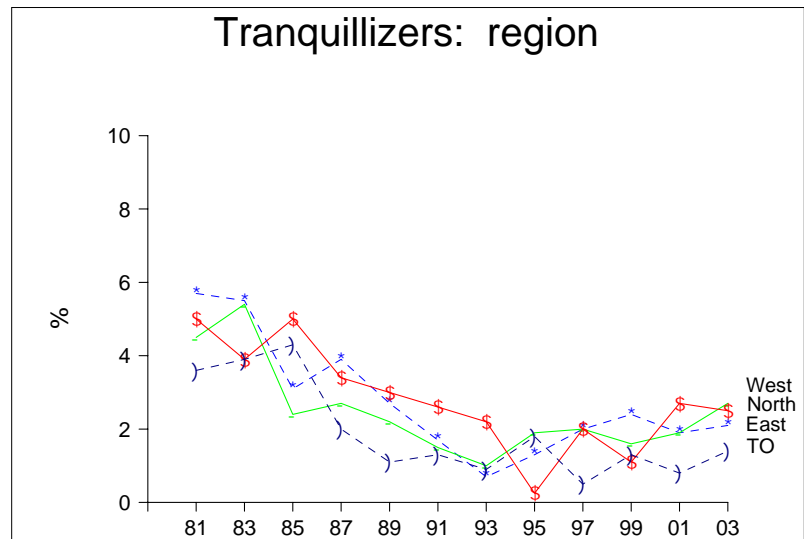
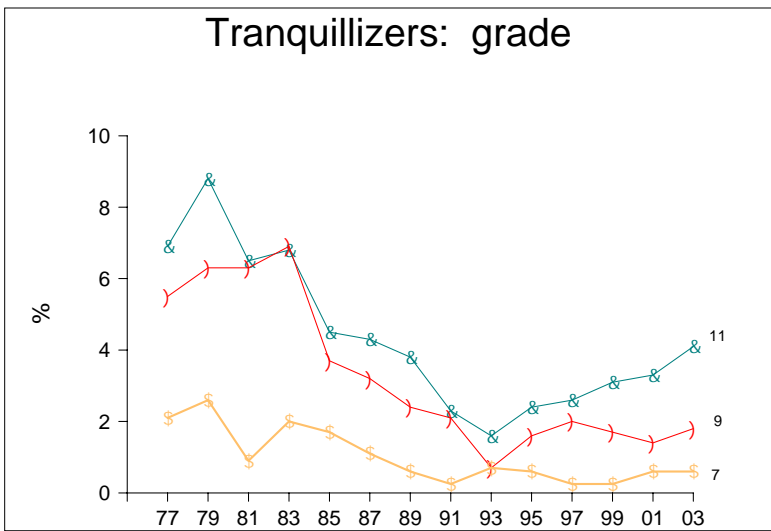
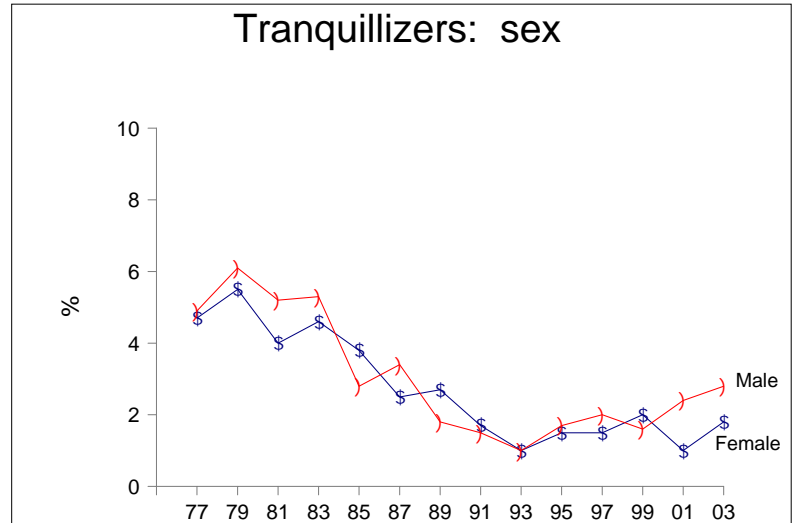
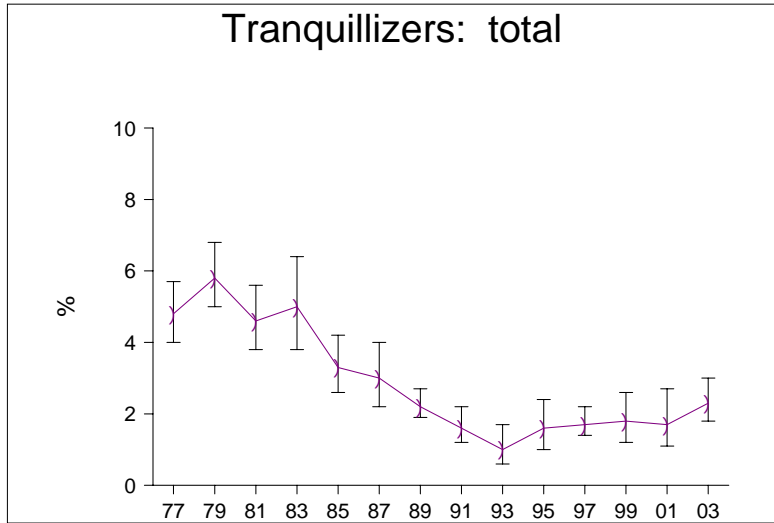


Table 3.6.3b: Percentage Reporting *Barbiturate Use* for Non-Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	6.1	7.4	7.6	6.0	4.2	3.2	2.1	2.2	3.2	2.9	2.7	4.3	2.7	2.7
(95% CI)	(5.2-7.2)	(6.3-8.5)	(5.7-10.1)	(4.8-7.3)	(3.8-4.8)	(2.5-4.3)	(1.6-2.7)	(1.8-2.8)	(2.5-4.1)	(2.2-3.6)	(2.1-3.4)	(3.1-5.9)	(1.9-3.7)	(2.2-3.4)
Sex														
Male	6.8	8.7	7.8	6.8	4.4	4.0	2.2	1.9	3.2	2.6	1.9	3.7	1.9	3.1
	(5.5-8.4)	(7.4-10.3)	(6.2-9.8)	(5.6-8.2)	(3.4-5.6)	(2.8-5.6)	(1.5-3.2)	(1.1-3.0)	(1.9-5.5)	(1.7-4.0)	(1.3-2.9)	(2.3-5.7)	(1.1-3.3)	(2.3-4.3)
Female	5.5	5.9	7.5	5.1	4.1	2.5	2.0	2.6	3.2	3.1	3.4	4.9	3.4	2.3
	(4.4-7.0)	(4.6-7.5)	(4.9-11.3)	(3.8-7.0)	(3.0-5.5)	(1.9-3.3)	(1.3-3.0)	(1.9-3.6)	(2.2-4.6)	(1.8-5.4)	(2.6-4.5)	(3.3-7.1)	(2.3-5.1)	(1.6-3.3)
Grade														
7	2.6	3.0	1.0	1.5	1.1	0.9	0.7	0.7	0.9	1.1	1.3	2.5	2.3	1.8
	(1.7-3.8)	(2.1-4.3)	(0.7-1.5)	(0.7-3.1)	(0.7-1.7)	(0.6-1.4)	(0.3-1.4)	(0.4-1.2)	(0.6-1.3)	(0.6-2.0)	(0.5-3.5)	(1.3-5.0)	(1.5-3.5)	(1.0-3.4)
9	7.0	7.3	9.8	6.4	4.3	3.2	2.8	2.4	3.4	2.5	3.5	3.2	2.9	3.0
	(5.3-9.2)	(5.7-9.2)	(7.3-13.0)	(5.4-7.6)	(3.7-5.1)	(1.9-5.6)	(1.9-4.1)	(1.7-3.3)	(2.8-4.1)	(1.7-3.7)	(2.6-4.7)	(2.1-5.0)	(1.8-4.7)	(2.1-4.4)
11	9.0	12.4	12.3	12.0	7.3	5.4	2.8	3.5	5.0	4.7	3.2	7.0	2.9	3.1
	(7.1-11.4)	(10.1-15.1)	(8.2-18.1)	(8.6-16.4)	(6.4-8.4)	(3.6-8.0)	(2.0-3.9)	(2.6-4.8)	(3.2-7.7)	(3.4-6.6)	(2.3-4.4)	(4.2-11.3)	(1.5-5.4)	(2.1-4.5)
Region														
Toronto	—	—	4.8	4.0	4.1	2.7	2.0	1.6	1.3	1.7	0.9	2.7	1.8	1.7
			(1.9-11.8)	(2.2-7.2)	(3.2-5.1)	(1.3-5.5)	(0.6-6.6)	(0.7-3.5)	(0.4-3.8)	(1.4-2.0)	(0.3-2.4)	(1.3-5.6)	(0.9-3.7)	(0.8-3.8)
North	—	—	5.0	8.0	5.0	5.2	2.5	4.4	2.6	6.0	3.9	6.9	2.9	2.8
			(3.3-7.6)	(7.1-9.1)	(3.7-6.8)	(3.4-8.0)	(0.9-6.6)	(1.9-9.6)	(0.3-18.4)	(2.0-16.4)	(2.6-5.9)	(2.4-18.2)	(1.8-4.6)	(1.5-5.2)
West	—	—	9.9	6.4	4.3	3.0	2.2	2.1	5.0	3.2	3.3	4.2	3.7	3.2
			(6.6-14.6)	(4.9-8.1)	(3.7-5.1)	(1.9-4.7)	(1.8-2.5)	(1.4-3.0)	(4.0-6.4)	(2.6-3.9)	(2.2-4.7)	(2.2-7.7)	(2.3-5.9)	(2.3-4.4)
East	—	—	6.8	6.3	4.0	3.4	2.0	2.3	1.9	2.3	2.8	4.8	1.9	2.6
			(5.9-7.7)	(3.8-10.2)	(3.0-5.3)	(2.1-5.6)	(1.7-2.4)	(2.1-2.5)	(1.0-3.5)	(2.2-3.6)	(1.9-4.0)	(3.1-7.4)	(0.9-4.1)	(1.7-3.8)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you use **barbiturates** (such as Seconal, also known as “barbs”, “rainbows”, etc) **without a prescription** or without a doctor telling you to take them?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.6.4b: Percentage Reporting *Stimulant Use* for Non-Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	7.3	11.0	11.0	14.3	10.9	7.6	5.8	3.8	5.2	6.4	7.2	6.7	5.7	5.4
(95% CI)	(6.4-8.3)	(9.5-12.6)	(9.4-12.8)	(12.2-16.8)	(9.4-12.5)	(6.4-8.9)	(5.0-6.6)	(2.9-4.8)	(3.7-7.4)	(5.3-7.7)	(6.2-8.3)	(5.3-8.5)	(4.6-7.2)	(4.6-6.3)
Sex														
Male	7.6	12.4	10.8	14.1	10.6	7.1	5.0	2.9	3.4	5.1	5.0	4.7	4.0	4.8
	(6.4-9.1)	(10.7-14.5)	(9.4-12.4)	(11.6-17.0)	(8.6-13.0)	(5.4-9.4)	(3.6-6.9)	(1.8-4.6)	(1.9-6.0)	(3.8-6.8)	(4.1-6.0)	(3.4-6.4)	(2.6-5.9)	(3.8-6.1)
Female	7.0	9.4	11.2	14.6	11.2	8.0	6.5	4.7	7.0	7.6	9.1	8.8	7.5	5.9
	(5.8-8.4)	(7.6-11.6)	(8.4-14.8)	(12.3-17.3)	(9.0-13.8)	(6.7-9.4)	(4.9-8.6)	(3.6-6.2)	(5.0-9.8)	(5.2-11.0)	(7.8-10.7)	(6.7-11.5)	(5.9-9.6)	(4.7-7.4)
Grade														
7	3.1	4.2	2.2	3.4	3.0	2.3	1.4	0.9	1.4	2.1	2.3	1.8	1.9	1.6
	(2.2-4.4)	(3.2-5.6)	(1.5-3.1)	(2.2-5.3)	(1.3-6.7)	(1.6-3.2)	(0.9-2.1)	(0.3-2.5)	(0.8-2.4)	(1.3-3.5)	(0.6-8.5)	(1.1-3.0)	(1.1-3.3)	(0.9-2.6)
9	9.0	10.5	13.2	15.5	10.6	6.9	7.5	2.5	4.8	6.3	7.0	6.9	5.5	5.6
	(7.5-10.8)	(8.6-12.7)	(12.5-14.0)	(12.6-18.9)	(9.1-12.3)	(4.6-10.2)	(6.0-9.4)	(1.9-3.2)	(3.4-6.8)	(4.2-9.2)	(6.0-8.1)	(5.3-9.0)	(3.6-8.3)	(4.2-7.5)
11	9.7	19.1	18.3	28.9	18.9	13.0	8.3	7.6	8.9	10.2	11.2	10.7	10.3	8.2
	(7.6-12.3)	(15.5-23.4)	(13.8-23.9)	(22.8-35.9)	(15.8-22.4)	(10.2-16.2)	(7.5-9.1)	(5.6-10.3)	(5.1-15.0)	(8.2-12.6)	(9.9-12.8)	(7.5-14.9)	(7.4-14.1)	(6.4-10.4)
Region														
Toronto	—	—	4.9	13.3	12.6	5.3	5.6	3.3	3.4	4.0	3.6	5.3	5.4	3.3
			(3.3-7.4)	(8.6-20.1)	(11.1-14.4)	(3.3-8.4)	(3.1-9.7)	(1.8-6.1)	(1.4-7.9)	(2.1-7.5)	(2.5-5.2)	(3.5-8.0)	(3.6-8.0)	(2.0-5.5)
North	—	—	7.8	16.0	13.0	11.0	7.3	3.5	7.7	9.2	8.1	6.1	6.2	7.4
			(5.0-11.8)	(14.7-17.3)	(8.7-19.1)	(7.1-16.7)	(3.9-13.5)	(1.1-10.5)	(1.6-29.5)	(5.2-15.6)	(4.8-13.3)	(4.3-8.6)	(3.9-9.7)	(5.3-10.1)
West	—	—	13.8	15.8	12.0	7.2	5.4	4.1	6.7	5.8	9.2	7.7	6.0	6.5
			(11.0-17.3)	(12.5-19.8)	(9.1-15.7)	(5.3-9.6)	(4.8-5.9)	(3.0-5.6)	(4.3-10.2)	(4.2-8.0)	(7.4-11.4)	(5.1-11.6)	(4.0-8.7)	(5.1-8.2)
East	—	—	12.6	12.6	7.0	8.6	6.1	3.7	3.6	8.1	6.2	6.4	5.6	4.4
			(11.7-13.6)	(8.7-18.0)	(5.4-8.9)	(7.2-10.4)	(5.2-7.0)	(2.2-6.3)	(1.9-6.7)	(6.2-10.6)	(5.1-7.5)	(4.6-8.8)	(3.5-8.9)	(3.3-5.8)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you use **stimulants** other than cocaine (such as diet pills, also known as “uppers”, “bennies”, “dexies”, etc.) **without a prescription** or without a doctor telling you to take them?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.5b: Percentage Reporting *Tranquillizer Use* for Non-Medical Purposes During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total	4.8	5.8	4.6	5.0	3.3	3.0	2.2	1.6	1.0	1.6	1.7	1.8	1.7	2.3
(95% CI)	(4.0-5.7)	(5.0-6.8)	(3.8-5.6)	(3.8-6.4)	(2.6-4.2)	(2.2-4.0)	(1.9-2.7)	(1.2-2.2)	(0.6-1.7)	(1.0-2.4)	(1.4-2.2)	(1.2-2.6)	(1.1-2.7)	(1.8-3.0)
Sex														
Male	4.9	6.1	5.2	5.3	2.8	3.4	1.8	1.5	1.0	1.7	2.0	1.6	2.4	1.8
	(3.8-6.2)	(4.9-7.6)	(4.4-6.1)	(3.8-7.5)	(2.1-3.9)	(2.2-5.4)	(1.1-2.8)	(0.9-2.3)	(0.5-1.8)	(1.0-2.8)	(1.5-2.6)	(1.0-2.7)	(1.2-4.4)	(1.2-2.7)
Female	4.7	5.5	4.0	4.6	3.8	2.5	2.7	1.7	1.0	1.5	1.5	2.0	1.0	2.8
	(3.6-6.0)	(4.5-6.8)	(2.9-5.5)	(3.5-6.0)	(2.8-5.1)	(1.8-3.4)	(2.0-3.7)	(1.1-2.7)	(0.4-2.5)	(0.9-2.5)	(1.1-2.0)	(1.1-3.3)	(0.6-1.8)	(2.0-3.8)
Grade														
7	2.1	2.6	0.9	2.0	1.7	1.1	0.6	†	0.7	0.6	†	†	0.6	0.6
	(1.5-3.0)	(1.8-3.9)	(0.4-1.8)	(1.2-3.4)	(1.0-2.8)	(0.6-2.1)	(0.3-1.3)		(0.4-1.2)	(0.2-2.4)			(0.2-1.8)	(0.3-1.4)
9	5.5	6.3	6.3	6.9	3.7	3.2	2.4	2.1	0.7	1.6	2.0	1.7	1.4	1.8
	(4.3-7.1)	(5.0-8.0)	(5.0-8.1)	(5.2-9.0)	(2.8-4.9)	(1.7-6.0)	(1.8-3.1)	(1.4-3.0)	(0.3-1.6)	(1.0-2.6)	(1.3-3.1)	(1.0-2.9)	(0.6-3.2)	(1.1-2.9)
11	6.9	8.8	6.5	6.8	4.5	4.3	3.8	2.3	1.6	2.4	2.6	3.1	3.3	4.1
	(5.1-9.3)	(6.9-11.1)	(5.0-8.4)	(4.0-11.4)	(3.0-6.7)	(2.7-6.8)	(3.1-4.6)	(1.4-3.6)	(0.6-3.8)	(1.2-4.8)	(2.0-3.4)	(1.8-5.2)	(1.7-6.4)	(2.9-5.9)
Region														
Toronto	—	—	3.6	3.9	4.3	2.0	1.1	1.3	0.9	1.8	0.5	1.3	0.8	1.4
			(2.4-5.2)	(3.2-4.7)	(3.5-5.2)	(0.6-6.6)	(0.3-4.2)	(0.7-2.2)	(0.2-4.6)	(0.4-6.7)	(0.1-2.2)	(0.5-3.4)	(0.1-5.8)	(0.6-3.5)
North	—	—	5.0	3.9	5.0	3.4	3.0	2.6	2.2	†	2.0	1.1	2.7	2.5
			(2.7-9.0)	(2.6-5.9)	(3.0-8.2)	(2.5-4.8)	(1.9-5.0)	(1.1-6.1)	(0.4-11.0)		(1.4-2.8)	(0.4-2.8)	(1.3-5.3)	(1.3-4.9)
West	—	—	4.5	5.4	2.4	2.7	2.2	1.5	1.0	1.9	2.0	1.6	1.9	2.7
			(3.6-5.6)	(3.5-8.2)	(1.3-4.6)	(1.6-4.6)	(2.0-2.6)	(0.8-2.6)	(0.5-1.9)	(1.1-3.3)	(1.5-2.7)	(1.0-3.0)	(1.0-3.7)	(1.9-3.9)
East	—	—	5.7	5.5	3.1	3.9	2.7	1.7	0.7	1.3	2.0	2.4	1.9	2.1
			(3.5-9.0)	(3.4-8.8)	(2.2-4.4)	(2.7-5.6)	(2.0-3.5)	(1.1-2.7)	(0.3-1.5)	(0.8-2.2)	(1.4-3.0)	(1.2-4.5)	(0.8-4.4)	(1.3-3.2)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed or less than 0.5%.
 Q: In the **last 12 months**, how often did you use **tranquillizers** (such as Valium, Librium, also known as “tranqs”, “downers”, etc.) **without a prescription** or without a doctor telling you to take them?

Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year Use of Hallucinogens: LSD, PCP, and Other Hallucinogens

(Tables 3.6.6a - 3.6.8b; Figures 3.6.8 – 3.6.11)

	Hallucinogen Use in 2003 (Grades 7 to 12)	Trends in Hallucinogen Use
Total Sample	<ul style="list-style-type: none"> ■ The most commonly used <u>hallucinogens</u> are substances other than <u>LSD</u> or <u>PCP</u>, such as mescaline and psilocybin, reported by 10.0% of students. <u>LSD</u> use is reported by 2.9% of students, and 2.2% reported using <u>PCP</u> during the past year. These percentages represent about 96,800, 27,700 and 21,800 Ontario students in grades 7 through 12, respectively. 	<ul style="list-style-type: none"> □ Between 1999 and 2003, <u>LSD</u> use significantly declined among all students, dropping from 6.8% in 1999 to 4.8% in 2001 and again down to 2.9% in 2003. <u>Other hallucinogen</u> use is significantly lower in 2003 (10.0%) compared to 1999 (12.8%). <u>PCP</u> use remained stable in the short-term. □ <u>LSD</u> use decreased in the 1980s and early 1990s, made a brief comeback between 1991 and 1995, and has been moving downward since then. Indeed, the current estimate is the lowest on record since 1977 (among grades 7, 9, 11). □ Use of <u>PCP</u> has remained around 3% or lower between 1981 and 2003. □ After a steady rate of use during the 1980s, <u>other hallucinogen</u> use increased in the 1990s, reaching an all-time peak in 1999 at about 12%. The current estimate still remains at a relatively high level (hovering at 9%) compared to the late 1970s, 1980s, and early 1990s.
Sex	<ul style="list-style-type: none"> ■ <u>LSD</u>, <u>PCP</u>, and <u>other hallucinogen</u> use each significantly differs by sex, with males more likely to use than females: 3.5% vs 2.3% for <u>LSD</u>, 2.9% vs 1.6% for <u>PCP</u>, and 12.1% vs 8.0% for other hallucinogens. 	<ul style="list-style-type: none"> □ Among males, <u>LSD</u> use in 2003 (3.5%) is significantly lower than in 2001 (6.3%) and 1999 (7.8%). Females show a decline in <u>LSD</u> use between 1999 (5.7%) and 2003 (2.3%). Neither males nor females show a change in the short-term for the other hallucinogenic drugs. □ Over the long-term, the general trends in hallucinogenic drug use have occurred similarly among both males and females – i.e., decreases in <u>LSD</u> use, and increases in other

Grade	<ul style="list-style-type: none"> ■ Use of each of the three hallucinogens significantly differs by grade. Rates of <u>LSD</u> use vary from less than 1% of 7th-graders to 4% of 10th- and 11th- graders; <u>PCP</u> use varies from less than 1% of 8th-graders to 3.6% of 10th-graders; <u>other hallucinogen</u> use varies from 1.8% of 7th-graders to 17.4% of 11th-graders. 	<p>hallucinogen use.</p> <ul style="list-style-type: none"> □ All grades, except 7th-graders, show a significant decline in <u>LSD</u> use between 1999 and 2003. <u>Other hallucinogen</u> use significantly declined among 8th- and 10th-graders between 1999 and 2003. <u>PCP</u> use showed no change in the short-term within any grade. □ Trends in hallucinogenic drug use are most prominent for 11th-graders, and, to a lesser extent, for 9th-graders. For example, since 1993 other hallucinogen use increased among 11th-graders, from 6.4% to 17.4% in 2003. In contrast, LSD use declined from 18.5% in 1995 to 4.0% in 2003.
Region	<ul style="list-style-type: none"> ■ Of these three substances, only <u>other hallucinogen</u> use significantly differs by region: use among Toronto students is lower than the other regions (6.3% vs 10%-12%). 	<ul style="list-style-type: none"> □ Among the three hallucinogenic drug types, only <u>LSD</u> use significantly declined between 1999 and 2003 among students in the North, West, and East. □ Current use of <u>LSD</u> among students in the North, West, and East is significantly lower than estimates reported in 1995. □ Between 1993 and 2003 the use of <u>other hallucinogens</u> significantly increased among students from the North, West and the East.
Frequency of Use	<ul style="list-style-type: none"> ■ Less than 1% of all students used <u>LSD</u> or <u>PCP</u> at least 6 times during the past year. About 3% of students used <u>other hallucinogens</u> at this frequency. ■ The majority of users report using these substances only once or twice during the past year: 68% for <u>LSD</u>, 57% for <u>PCP</u>, and 53% for <u>other hallucinogens</u>. 	<ul style="list-style-type: none"> □ Frequent use of other hallucinogens (6 or more times in the past year) increased in the late 1990s, but has stabilized in recent years.

Figure 3.6.8
Past Year LSD Use by Sex, Grade and Region, OSDUS 2003

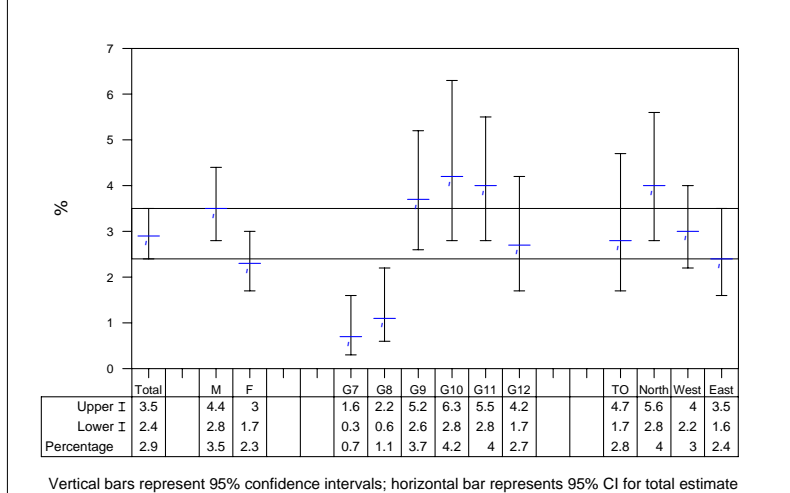


Figure 3.6.9
Past Year PCP Use by Sex, Grade and Region, OSDUS 2003

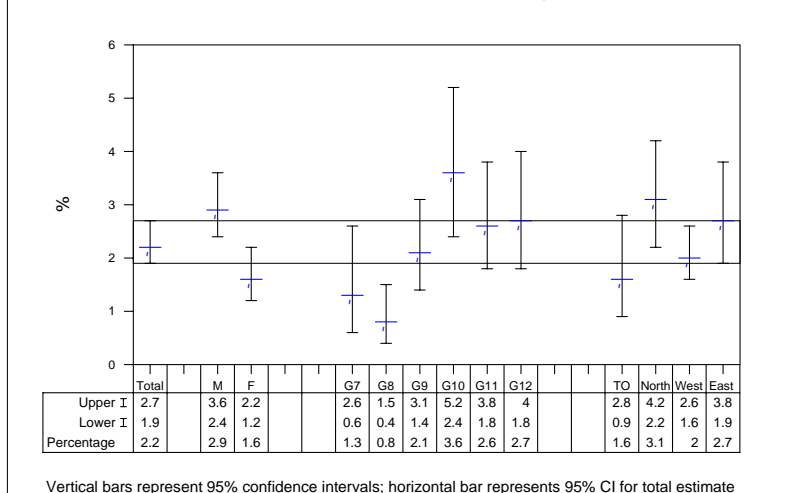


Figure 3.6.10
Past Year Other Hallucinogen Use by Sex, Grade and Region, OSDUS 2003

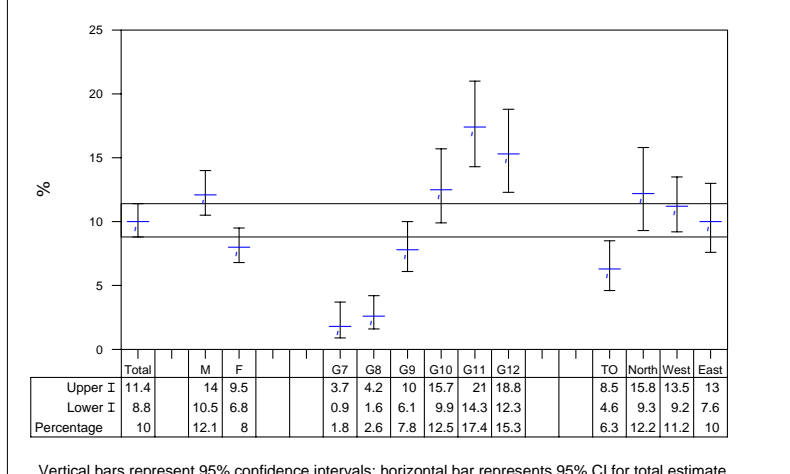


Table 3.6.6a: Percentage Reporting *LSD Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			6.8	4.8	2.9^{ab}
(95% CI)			(6.7-8.1)	(3.9-5.9)	(2.4-3.5)
Sex	Male		7.8	6.3	3.5^{ab}
			(6.5-9.5)	(5.0-7.9)	(2.8-4.4)
	Female		5.7	3.3	2.3^b
			(4.3-7.5)	(2.3-4.6)	(1.7-3.0)
Grade	7		1.2	0.9	0.7
			(0.6-2.4)	(0.4-1.8)	(0.3-1.6)
	8		3.9	2.5	1.1^b
			(2.3-6.5)	(1.3-4.6)	(0.6-2.2)
	9		6.8	4.6	3.7^b
			(4.8-9.4)	(3.3-6.4)	(2.6-5.2)
	10		10.4	8.0	4.2^{ab}
		(7.4-14.3)	(5.7-11.2)	(2.8-6.3)	
	11		10.7	5.0	4.0^b
			(7.2-15.6)	(2.9-8.6)	(2.8-5.5)
	12		7.8	7.8	2.7^b
			(5.9-10.2)	(4.1-14.3)	(1.7-4.2)
Region	Toronto		4.0	2.9	2.8
			(2.7-5.9)	(1.5-5.5)	(1.7-4.7)
	North		11.0	4.3	4.0^b
			(7.0-16.8)	(2.9-6.2)	(2.8-5.6)
	West		7.5	5.9	3.0^{ab}
		(5.4-10.4)	(4.4-7.8)	(2.2-4.0)	
	East		6.2	4.6	2.4^b
			(5.1-7.5)	(3.1-6.8)	(1.6-3.5)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, p< .01;

(3) ^b 2003 vs. 1999 significant difference, p<.01.

Q: In the **last 12 months**, how often did you use **LSD** or “acid”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.7a: Percentage Reporting *PCP Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(4447)	(3898)	(6616)
		(N)		
Total		3.0	2.8	2.2
(95% CI)		(2.4-3.9)	(2.2-3.7)	(1.9-2.7)
Sex	Male	3.2	3.3	2.9
		(2.4-4.2)	(2.3-4.6)	(2.4-3.6)
	Female	2.9	2.3	1.6
		(1.9-4.2)	(1.6-3.4)	(1.2-2.2)
Grade	7	0.7	0.8	1.3
		(0.3-1.6)	(0.3-1.8)	(0.6-2.6)
	8	2.7	1.2	0.8
		(1.6-4.4)	(0.5-2.7)	(0.4-1.5)
	9	3.1	3.8	2.1
		(1.9-5.1)	(2.5-5.8)	(1.4-3.1)
	10	3.5	3.7	3.6
		(2.0-6.0)	(2.0-6.7)	(2.4-5.2)
	11	5.4	2.9	2.6
		(3.3-8.7)	(1.9-4.5)	(1.8-3.8)
	12	2.3	4.4	2.7
		(1.3-4.2)	(2.4-8.0)	(1.8-4.0)
Region	Toronto	2.4	2.3	1.6
		(1.4-4.2)	(1.4-3.8)	(0.9-2.8)
	North	2.6	2.0	3.1
		(1.7-3.9)	(1.1-3.5)	(2.2-4.2)
	West	3.5	3.0	2.0
		(2.3-5.1)	(2.1-4.3)	(1.6-2.6)
	East	2.9	3.2	2.7
		(1.9-4.4)	(1.7-5.6)	(1.9-3.8)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you use the drug **PCP** (also known as “angel dust”, “dust”, “horse tranquilizer”, etc.)?

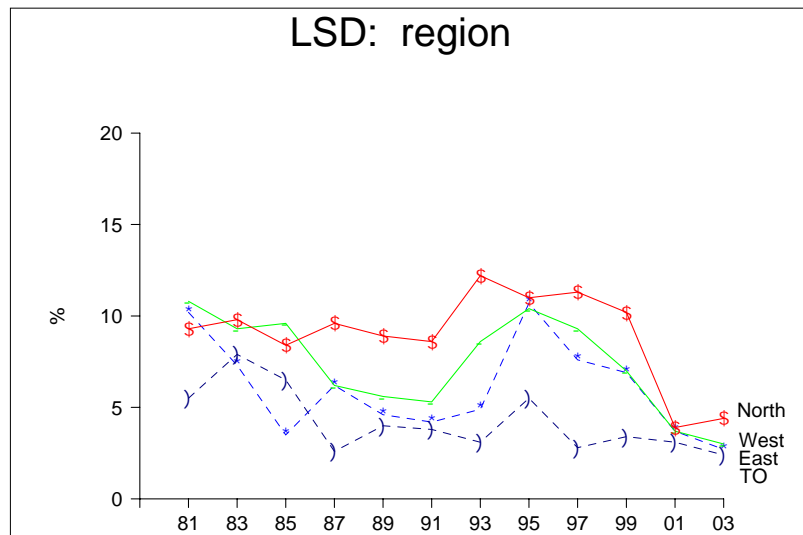
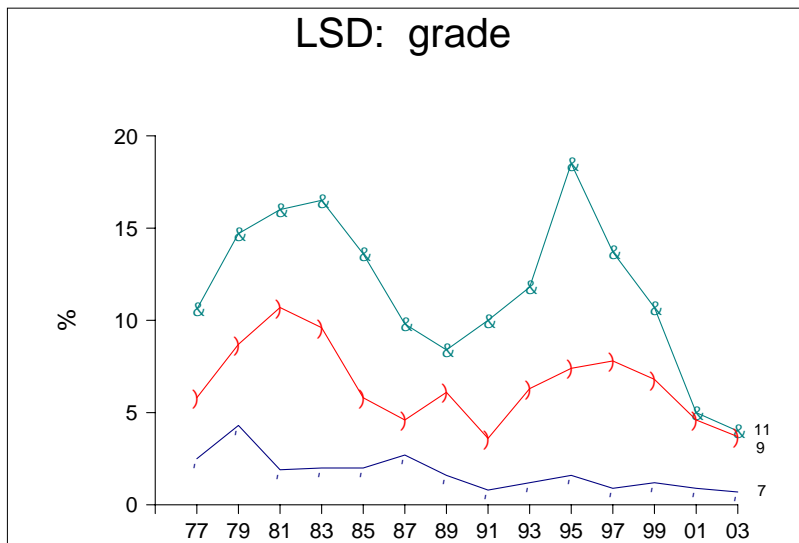
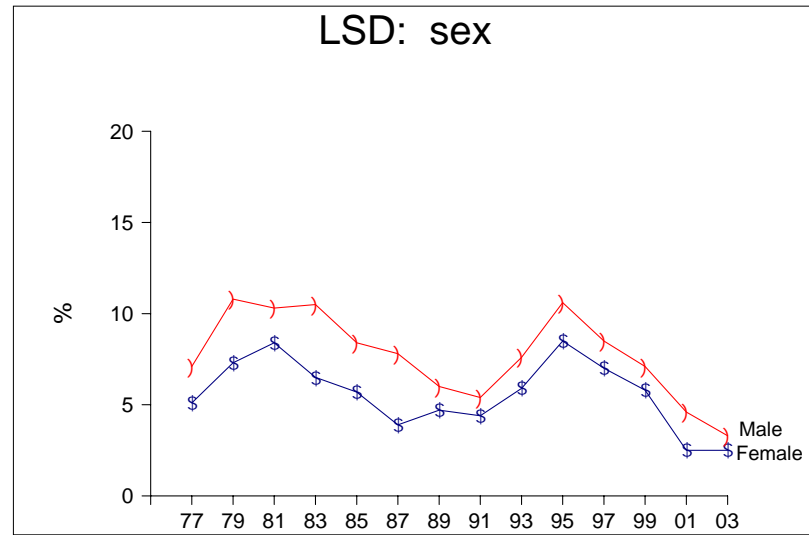
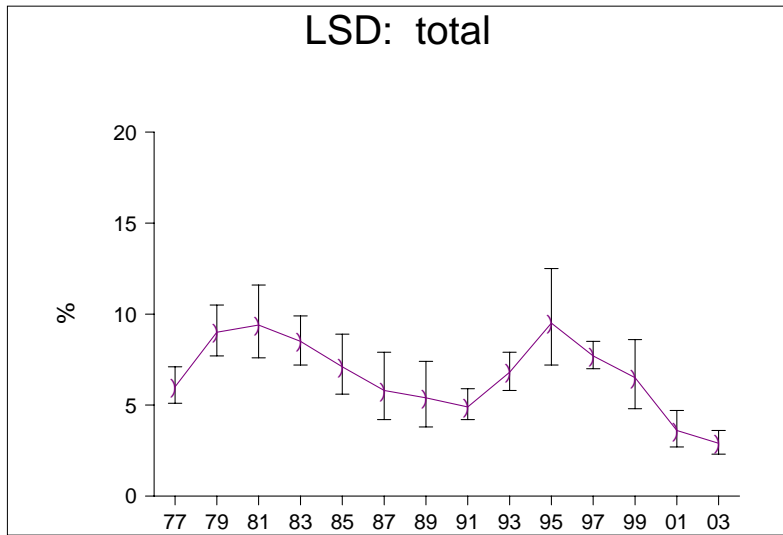
Source: *OSDUS*, Centre for Addiction & Mental Health

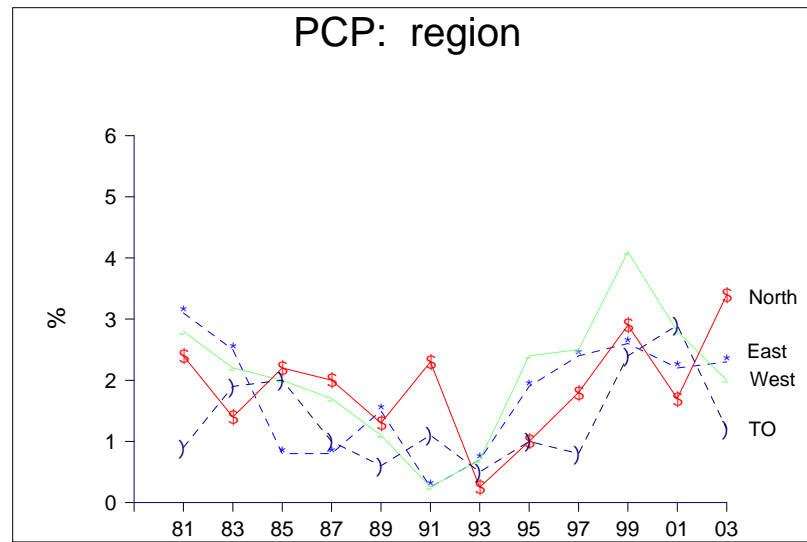
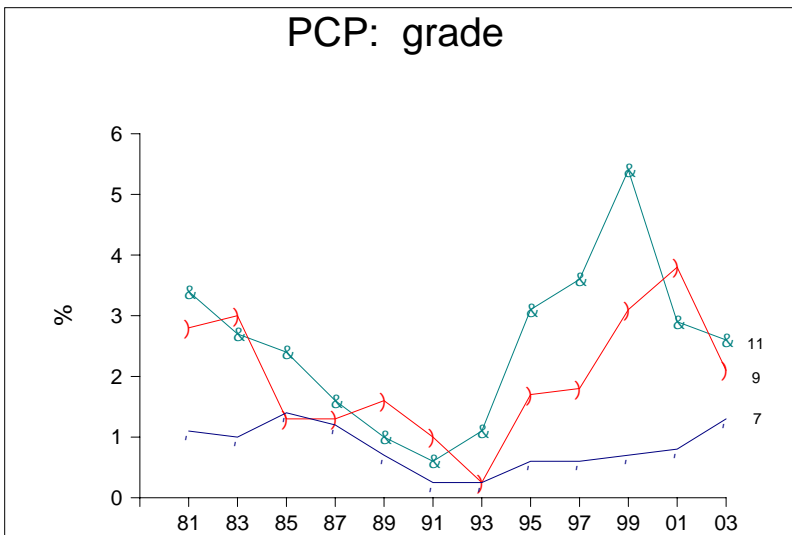
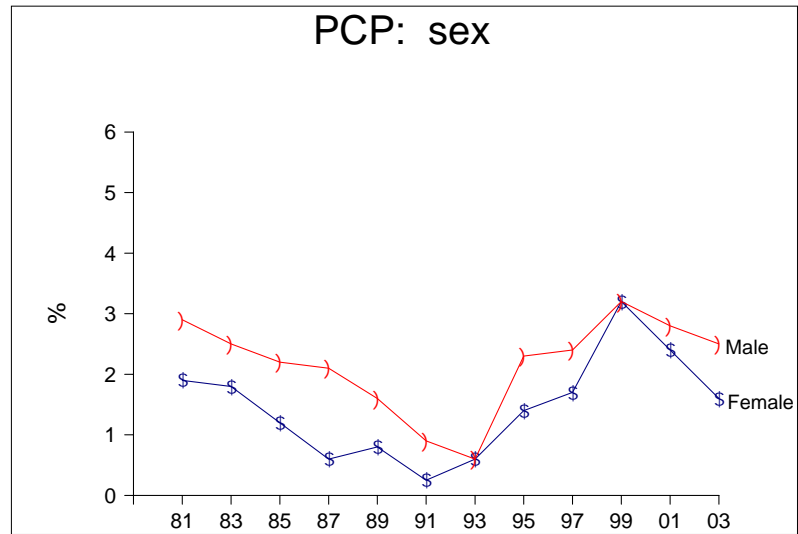
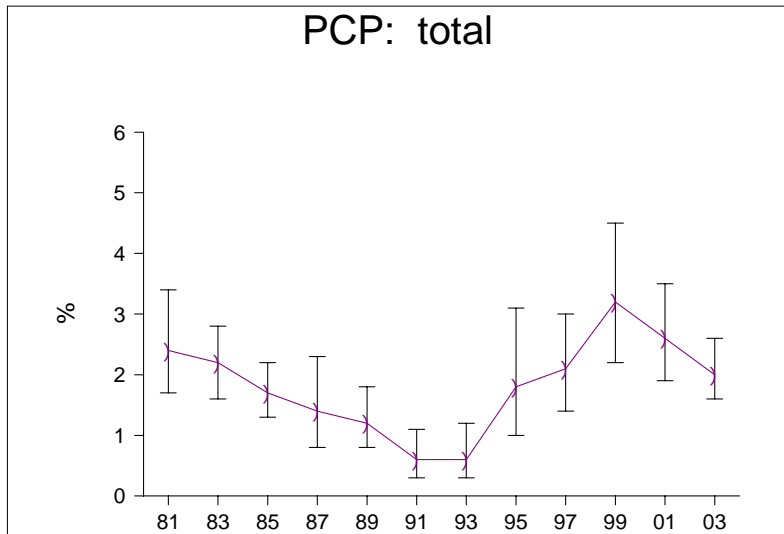
Table 3.6.8a: Percentage Reporting *Other Hallucinogen Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(N)	(3898)	(6616)
Total		12.8	11.1	10.0^b
(95% CI)		(11.4-14.4)	(9.6-12.9)	(8.8-11.4)
Sex	Male	14.9	12.8	12.1
		(12.9-17.2)	(10.8-15.1)	(10.5-14.0)
	Female	10.6	9.4	8.0
		(8.7-12.9)	(7.6-11.6)	(6.8-9.5)
Grade	7	0.9	0.9	1.8
		(0.4-2.0)	(0.4-1.8)	(0.9-3.7)
	8	6.7	3.8	2.6^b
		(4.4-10.1)	(2.4-6.0)	(1.6-4.2)
	9	10.2	9.7	7.8
		(7.6-13.5)	(7.0-13.4)	(6.1-10.0)
	10	19.3	15.2	12.5^b
		(15.0-24.4)	(11.9-19.2)	(9.9-15.7)
	11	22.7	19.2	17.4
		(17.9-28.3)	(14.9-24.5)	(14.3-21.0)
	12	18.1	20.5	15.3
		(14.1-22.9)	(13.9-29.2)	(12.3-18.8)
Region	Toronto	7.4	5.3	6.3
		(5.4-10.0)	(2.3-11.7)	(4.6-8.5)
	North	14.4	12.3	12.2
		(11.4-18.0)	(9.4-16.0)	(9.3-15.8)
	West	15.2	14.3	11.2
		(12.6-18.1)	(11.8-17.2)	(9.2-13.5)
	East	12.3	10.0	10.0
		(10.0-15.0)	(7.7-12.8)	(7.6-13.0)

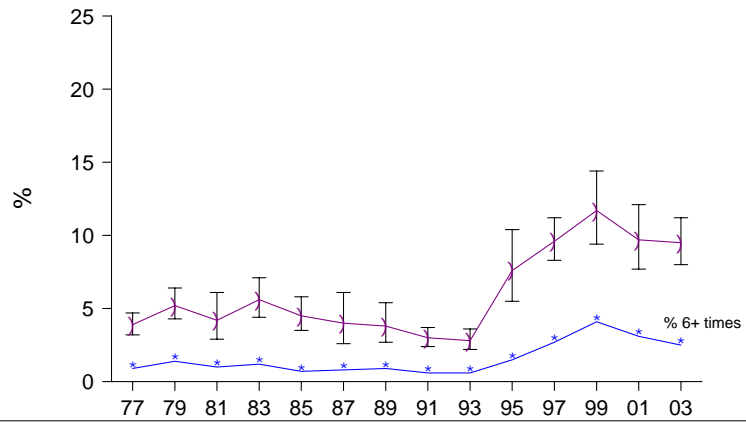
Notes: (1) entries in brackets are 95% confidence intervals; (2) ^b 2003 vs. 1999 significant difference, p<.01.
 Q: In the **last 12 months**, how often did you use **hallucinogens**, other than LSD or PCP (such as Mescaline or Psilocybin, also known as “magic mushrooms”, “mesc”, etc.)?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.11
Past Year Hallucinogens Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

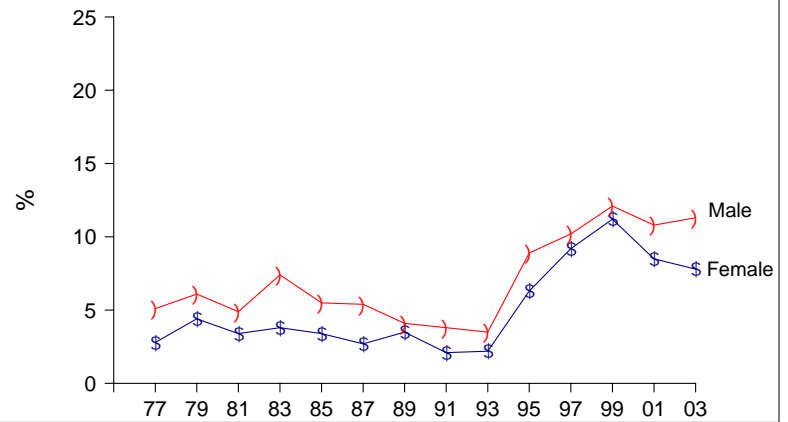




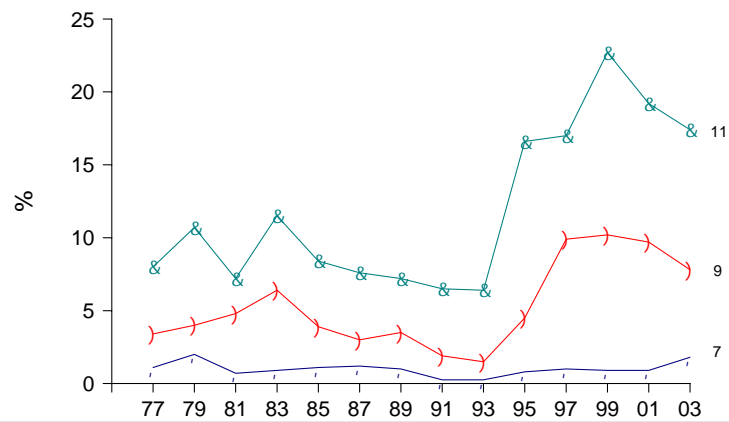
Other Hallucinogens: total



Other Hallucinogens: sex



Other Hallucinogens: grade



Other Hallucinogens: region

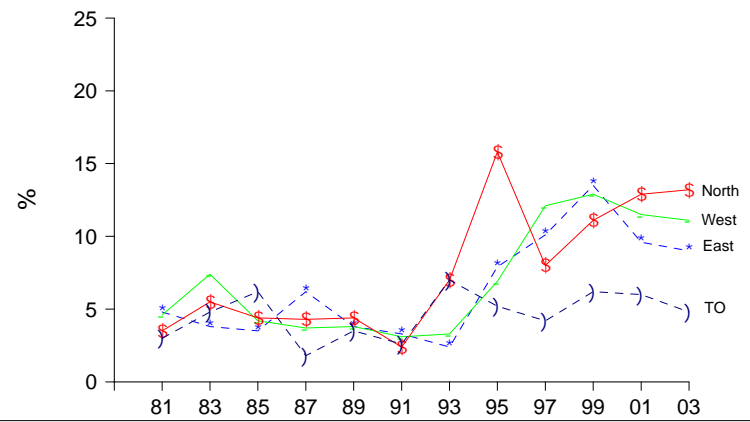


Table 3.6.6b: Percentage Reporting *LSD Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	6.0	9.0	9.4	8.5	7.1	5.8	5.4	4.9	6.8	9.5	7.7	6.5	3.6	2.9
(95% CI)	(5.1-7.1)	(7.7-10.5)	(7.6-11.6)	(7.2-9.9)	(5.6-8.9)	(4.2-7.9)	(3.8-7.4)	(4.2-5.9)	(5.8-7.9)	(7.2-12.5)	(7.0-8.5)	(4.8-8.6)	(2.7-4.7)	(2.3-3.6)
Sex														
Male	7.1	10.8	10.3	10.5	8.4	7.8	6.0	5.4	7.6	10.6	8.5	7.1	4.6	3.3
	(5.7-8.8)	(9.0-12.8)	(9.1-11.6)	(9.0-12.2)	(6.6-10.6)	(5.5-10.8)	(4.1-8.8)	(4.6-6.2)	(6.0-9.8)	(8.5-13.1)	(7.4-9.8)	(5.2-9.7)	(3.3-6.4)	(2.5-4.4)
Female	5.1	7.3	8.4	6.5	5.7	3.9	4.7	4.4	5.9	8.5	7.0	5.8	2.5	2.5
	(4.1-6.4)	(5.9-8.9)	(5.7-12.2)	(5.0-8.5)	(4.1-7.8)	(2.8-5.5)	(3.2-6.8)	(4.2-5.9)	(4.6-7.5)	(5.8-12.4)	(5.8-8.5)	(3.9-8.6)	(1.6-3.9)	(1.8-3.6)
Grade														
7	2.5	4.3	1.9	2.0	2.0	2.7	1.6	0.8	1.2	1.6	0.9	1.2	0.9	0.7
	(1.6-4.0)	(3.3-5.6)	(0.9-3.9)	(1.1-3.7)	(1.1-3.8)	(1.6-4.3)	(1.2-2.2)	(0.4-1.7)	(0.6-2.3)	(0.9-2.9)	(0.7-1.2)	(0.6-2.4)	(0.4-1.8)	(0.3-1.6)
9	5.8	8.7	10.7	9.6	5.8	4.6	6.1	3.6	6.3	7.4	7.8	6.8	4.6	3.7
	(4.4-7.6)	(6.9-11.1)	(8.5-13.4)	(8.2-11.1)	(4.0-8.2)	(2.3-8.9)	(3.4-10.8)	(2.9-4.6)	(5.0-8.0)	(4.4-12.2)	(6.3-9.8)	(4.8-9.4)	(3.3-6.4)	(2.6-5.2)
11	10.6	14.7	16.0	16.5	13.6	9.8	8.4	10.0	11.8	18.5	13.7	10.7	5.0	4.0
	(8.5-13.3)	(11.6-18.5)	(11.7-21.5)	(12.9-20.7)	(10.1-18.0)	(6.0-15.5)	(5.5-12.5)	(8.2-12.1)	(9.2-15.0)	(12.9-25.7)	(12.3-15.2)	(7.2-15.6)	(2.9-8.6)	(2.8-5.5)
Region														
Toronto	—	—	5.5	7.9	6.5	2.6	4.0	3.8	3.1	5.5	2.8	3.4	3.1	2.4
			(2.5-11.5)	(4.3-14.2)	(4.4-9.4)	(0.9-7.6)	(3.0-5.4)	(2.1-6.8)	(1.7-5.6)	(1.7-16.0)	(2.0-3.9)	(1.9-5.9)	(1.8-5.3)	(1.4-4.4)
North	—	—	9.3	9.8	8.4	9.6	8.9	8.6	12.2	11.0	11.3	10.2	3.9	4.4
			(6.3-13.6)	(7.0-13.7)	(6.1-11.6)	(3.8-22.1)	(4.2-17.7)	(4.6-15.4)	(7.2-20.0)	(8.1-14.8)	(8.5-14.7)	(4.2-23.1)	(2.3-6.5)	(3.0-6.4)
West	—	—	10.8	9.3	9.6	6.2	5.6	5.3	8.6	10.4	9.3	7.0	3.7	3.0
			(7.6-15.1)	(8.1-10.8)	(6.8-13.4)	(3.6-10.7)	(3.2-9.8)	(4.5-6.2)	(7.7-9.5)	(6.3-16.7)	(8.1-10.8)	(4.1-11.9)	(2.4-5.8)	(2.2-4.1)
East	—	—	10.2	7.3	3.5	6.2	4.6	4.2	4.9	10.7	7.6	6.9	3.7	2.7
			(8.3-12.4)	(5.4-9.6)	(1.7-6.9)	(5.4-7.1)	(2.3-8.9)	(2.7-6.4)	(2.9-8.1)	(8.5-13.2)	(6.3-9.2)	(5.0-9.5)	(2.1-6.3)	(1.7-4.4)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you use **LSD** or “acid”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.7b: Percentage Reporting *PCP Use* During the Past Year, 1981 – 2003, Grades 7, 9, 11 only

(N)	1981 (3010)	1983 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total	2.4	2.2	1.7	1.4	1.2	0.6	0.6	1.8	2.1	3.2	2.6	2.0
(95% CI)	(1.7-3.4)	(1.6-2.8)	(1.3-2.2)	(0.8-2.3)	(0.8-1.8)	(0.3-1.1)	(0.3-1.2)	(1.0-3.1)	(1.4-3.0)	(2.2-4.5)	(1.9-3.5)	(1.6-2.6)
Sex												
Male	2.9	2.5	2.2	2.1	1.6	0.9	0.6	2.3	2.4	3.2	2.8	2.5
	(1.9-4.4)	(1.7-3.6)	(1.6-3.1)	(1.3-3.5)	(0.9-2.7)	(0.4-2.2)	(0.4-1.0)	(1.3-4.0)	(1.9-3.2)	(2.0-4.9)	(1.7-4.4)	(1.9-3.4)
Female	1.9	1.8	1.2	0.6	0.8	†	0.6	1.4	1.7	3.2	2.4	1.6
	(1.2-2.9)	(1.2-2.7)	(0.8-1.8)	(0.2-1.8)	(0.4-1.5)		(0.2-2.2)	(0.8-2.6)	(0.9-3.3)	(1.8-5.5)	(1.5-3.8)	(1.0-2.5)
Grade												
7	1.1	1.0	1.4	1.2	0.7	†	†	0.6	0.6	0.7	0.8	1.3
	(0.5-2.6)	(0.6-1.6)	(0.6-3.6)	(0.4-3.3)	(0.4-1.1)			(0.1-3.6)	(0.2-2.0)	(0.3-1.6)	(0.3-1.8)	(0.6-2.6)
9	2.8	3.0	1.3	1.3	1.6	1.0	†	1.7	1.8	3.1	3.8	2.1
	(1.4-5.4)	(2.8-3.4)	(1.1-1.6)	(0.5-3.5)	(0.9-2.8)	(0.3-2.8)		(0.8-3.2)	(0.7-4.4)	(1.9-5.1)	(2.5-5.8)	(1.4-3.1)
11	3.4	2.7	2.4	1.6	1.0	0.6	1.1	3.1	3.6	5.4	2.9	2.6
	(2.6-4.5)	(1.2-5.7)	(2.0-3.0)	(0.7-3.2)	(0.4-3.0)	(0.2-1.4)	(0.5-2.8)	(1.4-6.6)	(2.4-5.3)	(3.3-8.7)	(1.9-4.5)	(1.8-3.8)
Region												
Toronto	0.9	1.9	2.0	1.0	0.6	1.1	0.5	1.0	0.8	2.4	2.9	1.2
	(0.3-2.9)	(0.8-4.2)	(1.8-2.2)	(0.2-4.1)	(0.1-3.8)	(0.3-4.3)	(0.1-2.1)	(0.6-1.6)	(0.2-3.1)	(1.1-5.3)	(2.0-4.2)	(0.5-2.7)
North	2.4	1.4	2.2	2.0	1.3	2.3	†	1.0	1.8	2.9	1.7	3.4
	(0.7-7.8)	(0.3-6.3)	(0.7-6.8)	(1.1-3.7)	(0.5-3.6)	(1.0-5.3)		(0.1-8.4)	(0.4-8.5)	(1.7-5.0)	(0.7-4.0)	(2.1-5.6)
West	2.8	2.2	2.0	1.7	1.1	†	0.7	2.4	2.5	4.1	2.8	2.0
	(1.6-4.8)	(1.7-2.8)	(1.3-3.1)	(0.8-3.6)	(0.6-2.1)		(0.4-1.3)	(1.0-5.5)	(1.5-4.0)	(2.4-6.9)	(1.8-4.4)	(1.4-2.8)
East	3.1	2.5	0.8	0.8	1.5	†	0.7	1.9	2.4	2.6	2.2	2.3
	(2.0-5.0)	(1.5-4.2)	(0.4-1.4)	(0.2-3.0)	(0.8-2.8)		(0.1-3.8)	(0.8-4.2)	(1.2-4.7)	(1.4-4.5)	(0.9-5.1)	(1.4-3.6)

Notes: (1) PCP use was not queried in 1977 or 1979; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed or less than 0.5%.

Q: In the **last 12 months**, how often did you use the drug **PCP** (also known as “angel dust”, “dust”, “horse tranquillizer”, etc.)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.8b: Percentage Reporting *Other Hallucinogen Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1987 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total		3.9	5.2	4.2	5.6	4.5	4.0	3.8	3.0	2.8	7.6	9.6	11.7	9.7	9.5
(95% CI)		(3.2-4.7)	(4.3-6.4)	(2.9-6.1)	(4.4-7.1)	(3.5-5.8)	(2.6-6.1)	(2.7-5.4)	(2.4-3.7)	(2.2-3.6)	(5.5-10.4)	(8.3-11.2)	(9.4-14.4)	(7.7-12.1)	(8.0-11.2)
Sex															
Male		5.1	6.1	4.9	7.4	5.5	5.4	4.1	3.8	3.5	8.9	10.2	12.1	10.8	11.3
		(4.0-6.5)	(4.7-7.8)	(3.4-7.1)	(6.1-9.0)	(4.1-7.4)	(3.4-8.6)	(2.8-5.9)	(3.2-4.4)	(2.3-5.2)	(6.6-11.9)	(8.5-12.1)	(9.6-15.2)	(8.4-13.9)	(9.1-14.0)
Female		2.8	4.4	3.4	3.8	3.4	2.7	3.5	2.1	2.2	6.3	9.2	11.2	8.5	7.8
		(2.1-3.7)	(3.2-5.7)	(2.1-5.4)	(2.8-5.2)	(2.4-4.8)	(1.6-4.5)	(2.2-5.4)	(1.4-3.1)	(1.2-4.1)	(4.3-9.1)	(7.7-10.9)	(8.2-15.2)	(6.3-11.5)	(6.3-9.5)
Grade															
7		1.1	2.0	0.7	0.9	1.1	1.2	1.0	†	†	0.8	1.0	0.9	0.9	1.8
		(0.7-1.7)	(1.1-3.4)	(0.6-1.0)	(0.3-2.8)	(0.8-1.6)	(0.7-2.1)	(0.7-1.2)			(0.3-2.1)	(0.4-2.8)	(0.4-2.0)	(0.4-1.8)	(0.9-3.7)
9		3.4	4.0	4.8	6.4	3.9	3.0	3.5	1.9	1.5	4.5	9.9	10.2	9.7	7.8
		(2.4-4.6)	(3.0-5.3)	(2.4-9.2)	(4.6-8.8)	(2.5-6.0)	(1.2-6.9)	(1.5-7.8)	(1.5-2.4)	(0.6-3.6)	(3.1-6.4)	(6.9-14.1)	(7.6-13.5)	(7.0-13.4)	(6.1-10.0)
11		8.0	10.7	7.2	11.5	8.4	7.6	7.2	6.5	6.4	16.6	17.0	22.7	19.2	17.4
		(6.2-10.3)	(8.2-14.0)	(4.9-10.5)	(8.1-16.0)	(6.1-11.5)	(4.3-13.1)	(5.4-9.6)	(5.0-8.4)	(5.1-7.9)	(11.0-24.1)	(14.9-19.2)	(17.9-28.3)	(14.9-24.5)	(14.3-21.0)
Region															
Toronto		—	—	3.0	4.8	6.2	1.8	3.5	2.6	0.7	5.2	4.2	6.2	6.0	4.8
				(0.8-10.6)	(2.9-7.7)	(3.6-10.5)	(0.3-9.6)	(2.0-6.3)	(1.7-4.0)	(0.2-3.6)	(1.9-13.4)	(3.1-5.7)	(3.9-9.8)	(2.5-13.7)	(2.8-8.2)
North		—	—	3.5	5.5	4.4	4.3	4.4	2.4	7.0	15.8	8.0	11.1	12.9	13.2
				(1.1-10.4)	(3.3-9.2)	(3.0-6.4)	(2.5-7.2)	(2.0-9.3)	(0.6-9.4)	(4.5-10.5)	(4.5-42.4)	(4.2-14.6)	(7.4-16.4)	(9.5-17.4)	(9.9-17.4)
West		—	—	4.6	7.4	4.2	3.7	3.8	3.1	3.3	6.9	12.1	12.9	11.5	11.1
				(2.6-7.9)	(5.0-10.8)	(2.6-6.8)	(2.4-5.6)	(2.2-6.4)	(2.8-3.4)	(2.3-4.7)	(4.5-10.5)	(9.8-15.0)	(8.9-18.2)	(8.4-15.5)	(8.9-13.8)
East		—	—	4.8	3.8	3.5	6.2	3.8	3.3	2.4	7.9	10.1	13.5	9.6	9.0
				(2.9-8.0)	(2.5-5.8)	(2.6-4.8)	(2.7-13.6)	(1.7-8.2)	(1.9-5.7)	(1.6-3.4)	(5.6-11.2)	(7.7-13.0)	(10.0-18.0)	(6.5-13.9)	(6.2-12.9)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed or less than 0.5%.
Q: In the **last 12 months**, how often did you use **hallucinogens**, other than LSD or PCP (such as Mescaline or Psilocybin, also known as “magic mushrooms”, “mesc”, etc.)?
Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year Use of Methamphetamine ("Speed")

(Tables 3.6.9a, 3.6.9b; Figures 3.6.12, 3.6.13)

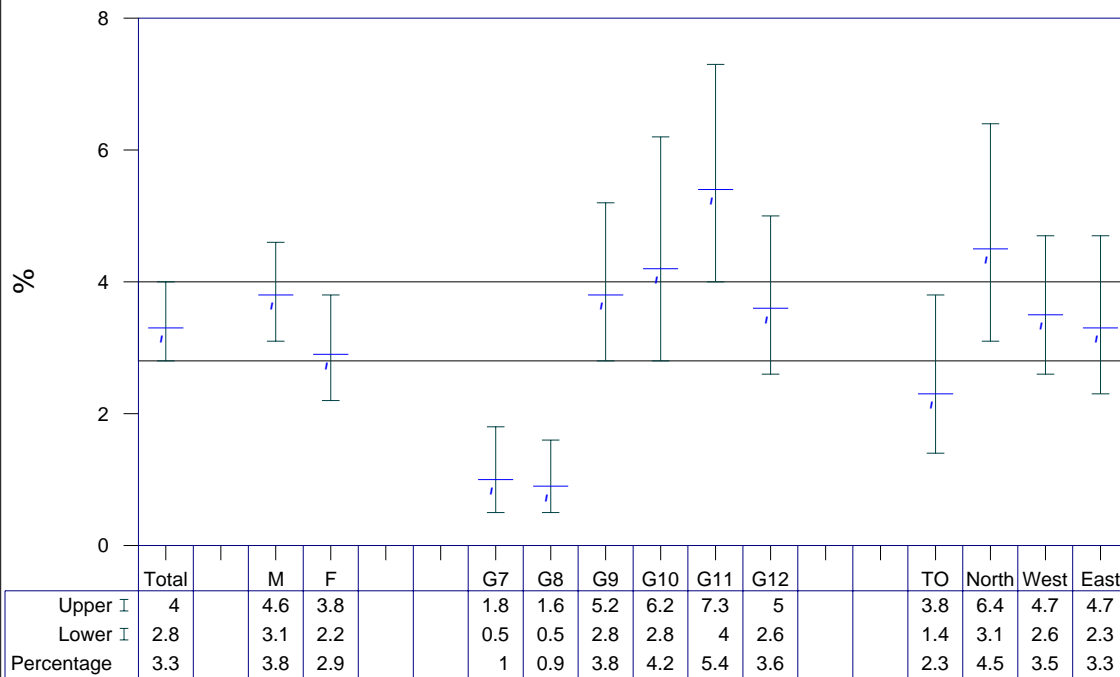
	Methamphetamine Use in 2003 (Grades 7 to 12)	Trends in Methamphetamine Use
Total Sample	<ul style="list-style-type: none"> Overall, 3.3% of students report using methamphetamine at least once during the 12 months before the survey. We estimate that between 2.8% and 4.0% of Ontario students use methamphetamine. The percentage of 3.3% represents about 32,000 students in grades 7 through 12. 	<ul style="list-style-type: none"> Methamphetamine use did not significantly change between 2001 (3.9%) and 2003 (3.3%). However the 2003 estimate is significantly lower than that found in 1999 (5.0%). Over the long-term, methamphetamine use shows only minor fluctuations, varying between 2% and 4% (among all students in grades 7, 9, and 11). However, current use remains significantly higher than rates of the early 1990s.
Sex	<ul style="list-style-type: none"> Males (3.8%) and females (2.9%) are equally likely to report use of methamphetamine. 	<ul style="list-style-type: none"> Methamphetamine use significantly declined among males between 1999 (6.2%) and 2003 (3.8%). Females show no significant change over the short-term.
Grade	<ul style="list-style-type: none"> Methamphetamine use significantly differs by grade. Use is lowest among 7th- and 8th-graders (about 1%) and highest among 11th-graders (5.4%). 	<ul style="list-style-type: none"> Although some grades show non-significant decreases since 1999, methamphetamine use significantly declined only among 12th-graders (8.4% in 1999 vs 3.6% in 2003).
Region	<ul style="list-style-type: none"> Although there is slight variation in use by region, with the North being the highest (4.5%) and Toronto being the lowest (2.3%), these differences are not statistically significant. 	<ul style="list-style-type: none"> Use did not significantly change between 1999 and 2003 within any of the regions, although most showed slight declines.

Frequency
of Use

■ Use of methamphetamine 6 or more times in the past year was reported by less than 1% of all students.

■ The majority of (56%) of methamphetamine users report using once or twice in the past year.

Figure 3.6.12
Past Year Methamphetamine ("Speed") Use by Sex, Grade and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.6.9a: Percentage Reporting *Methamphetamine* (“Speed”) Use During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			5.0	3.9	3.3^b
(95% CI)			(4.1-6.2)	(3.1-4.9)	(2.8-4.0)
Sex	Male		6.2	5.1	3.8^b
			(4.9-7.8)	(3.9-6.6)	(3.1-4.6)
	Female		3.9	2.8	2.9
			(2.7-5.6)	(1.9-4.3)	(2.2-3.8)
Grade	7		1.5	1.2	1.0
			(0.8-2.8)	(0.6-2.4)	(0.5-1.8)
	8		3.1	1.4	0.9
			(1.8-5.3)	(0.6-3.2)	(0.5-1.6)
	9		3.5	3.7	3.8
			(2.5-5.0)	(2.6-5.2)	(2.8-5.2)
	10		6.1	6.8	4.2
			(4.0-9.2)	(4.6-9.9)	(2.8-6.2)
	11		8.2	4.9	5.4
			(5.2-12.7)	(2.9-8.2)	(4.0-7.3)
	12		8.4	5.0	3.6^b
			(5.7-12.3)	(3.2-7.8)	(2.6-5.0)
Region	Toronto		4.0	2.0	2.3
			(2.8-5.7)	(0.8-4.6)	(1.4-3.8)
	North		5.0	4.4	4.5
			(3.6-7.0)	(2.6-7.3)	(3.1-6.4)
	West		6.0	5.2	3.5
			(4.2-8.5)	(3.9-6.9)	(2.6-4.7)
	East		4.3	3.2	3.3
			(3.2-6.0)	(1.9-5.4)	(2.3-4.7)

Notes: (1) entries in brackets are 95% confidence intervals; (3)^b 2003 vs. 1999 significant difference, p<.01.

Q: In the **last 12 months**, how often did you **use methamphetamine** or “speed”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.13
Past Year Methamphetamine (“Speed”) Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

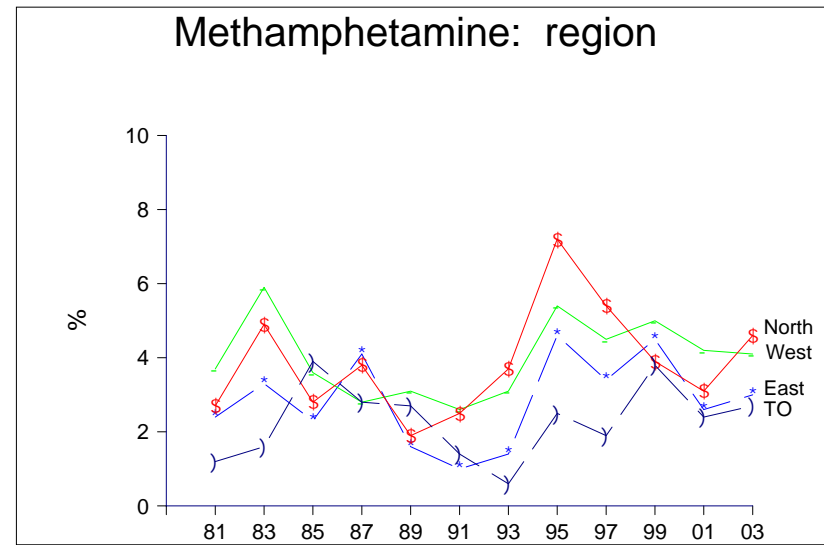
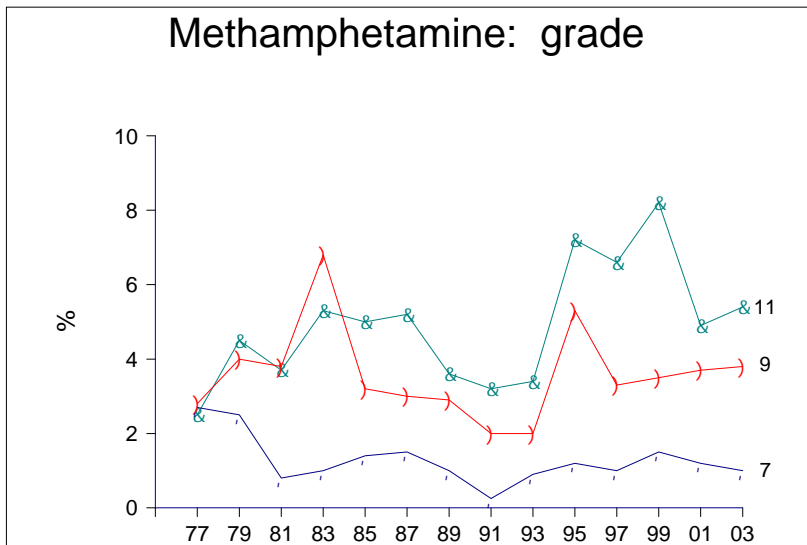
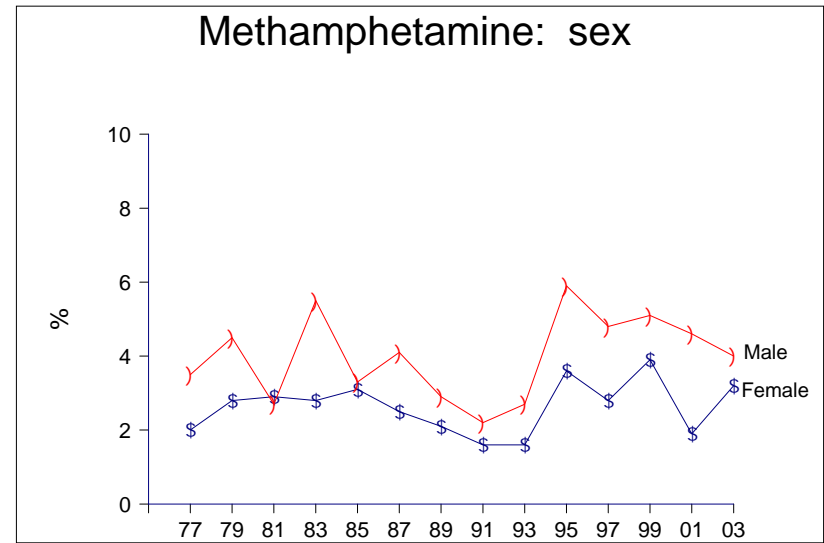
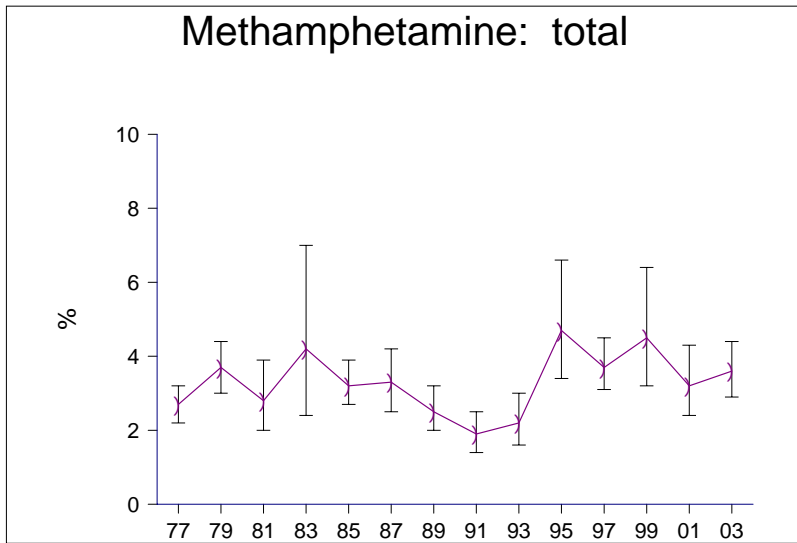


Table 3.6.9b: Percentage Reporting *Methamphetamine* (“Speed”) Use During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	2.7	3.7	2.8	4.2	3.2	3.3	2.5	1.9	2.2	4.7	3.7	4.5	3.2	3.6
(95% CI)	(2.2-3.2)	(3.0-4.4)	(2.0-3.9)	(2.4-7.0)	(2.7-3.9)	(2.5-4.2)	(2.0-3.2)	(1.4-2.5)	(1.6-3.0)	(3.4-6.6)	(3.1-4.5)	(3.2-6.4)	(2.4-4.3)	(2.9-4.4)
Sex														
Male	3.5	4.5	2.7	5.5	3.3	4.1	2.9	2.2	2.7	5.9	4.8	5.1	4.6	4.0
	(2.7-4.5)	(3.6-5.7)	(1.8-4.1)	(3.4-8.9)	(2.7-4.1)	(3.0-5.6)	(1.9-4.4)	(1.7-2.8)	(1.9-3.8)	(4.5-7.7)	(4.0-5.6)	(3.4-7.6)	(3.2-6.7)	(3.0-5.2)
Female	2.0	2.8	2.9	2.8	3.1	2.5	2.1	1.6	1.6	3.6	2.8	3.9	1.9	3.2
	(1.4-2.7)	(2.0-3.7)	(2.0-4.3)	(1.5-5.2)	(2.3-4.2)	(1.6-3.7)	(1.4-3.1)	(1.0-2.6)	(0.9-2.8)	(2.0-6.7)	(2.1-3.7)	(2.3-6.6)	(1.1-3.0)	(2.3-4.4)
Grade														
7	2.7	2.5	0.8	1.0	1.4	1.5	1.0	†	0.9	1.2	1.0	1.5	1.2	1.0
	(2.1-3.4)	(1.6-3.8)	(0.4-1.7)	(0.6-1.8)	(1.0-2.0)	(0.8-2.8)	(0.6-1.6)		(0.4-2.4)	(0.5-3.2)	(0.4-2.8)	(0.8-2.8)	(0.6-2.4)	(0.5-1.8)
9	2.8	4.0	3.8	6.8	3.2	3.0	2.9	2.0	2.0	5.3	3.3	3.5	3.7	3.8
	(2.1-3.8)	(3.0-5.3)	(2.1-6.7)	(2.7-16.2)	(2.6-4.0)	(1.9-4.6)	(2.0-4.3)	(1.4-2.7)	(1.0-3.8)	(2.5-10.9)	(2.7-4.1)	(2.5-5.0)	(2.6-5.2)	(2.8-5.2)
11	2.5	4.5	3.7	5.3	5.0	5.2	3.6	3.2	3.4	7.2	6.6	8.2	4.9	5.4
	(1.6-4.0)	(3.4-5.9)	(2.6-5.2)	(3.8-7.0)	(3.6-7.0)	(3.5-7.7)	(2.7-4.8)	(2.1-4.8)	(2.4-4.6)	(5.6-9.2)	(5.2-8.2)	(5.2-12.7)	(2.9-8.2)	(4.0-7.3)
Region														
Toronto	—	—	1.2	1.6	3.9	2.8	2.7	1.4	0.6	2.5	1.9	3.8	2.4	2.7
			(0.5-3.1)	(0.7-3.8)	(2.4-6.4)	(2.0-4.1)	(1.6-4.5)	(0.8-2.7)	(0.2-1.9)	(1.7-3.6)	(1.0-3.6)	(2.2-6.4)	(1.2-4.8)	(1.4-5.2)
North	—	—	2.7	4.9	2.8	3.8	1.9	2.5	3.7	7.2	5.4	3.9	3.1	4.6
			(1.9-4.0)	(2.6-9.1)	(2.6-3.1)	(2.4-5.9)	(0.6-6.2)	(1.8-3.6)	(1.3-9.9)	(2.9-16.8)	(2.8-10.1)	(2.3-6.4)	(1.6-5.8)	(2.3-9.1)
West	—	—	3.7	5.9	3.6	2.8	3.1	2.6	3.1	5.4	4.5	5.0	4.2	4.1
			(2.3-6.0)	(2.4-13.9)	(2.7-4.7)	(1.7-4.6)	(2.3-4.2)	(1.7-3.9)	(2.3-4.3)	(3.0-9.6)	(3.5-5.8)	(2.6-9.3)	(2.9-6.2)	(3.0-5.6)
East	—	—	2.4	3.3	2.3	4.1	1.6	1.0	1.4	4.6	3.4	4.5	2.6	3.0
			(1.7-3.3)	(2.2-4.9)	(1.7-3.1)	(2.6-6.4)	(0.9-2.7)	(0.6-1.7)	(0.5-3.8)	(3.0-6.9)	(2.6-4.3)	(2.7-7.4)	(1.2-5.3)	(2.1-4.3)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) † estimate suppressed or less than 0.5%.

Q: In the last 12 months, how often did you use methamphetamine or “speed”?

Source: OSDUS, Centre for Addiction & Mental Health

Past Year Use of Ice

(Tables 3.6.10a, 3.6.10b)

“Ice” (d-methamphetamine hydrochloride) made its first appearance in Canada in 1989. It is a smokeable form of methamphetamine (“speed”), a powerful stimulant. The use of ice among students was first surveyed in 1991.

	Ice Use in 2003 (Grades 7 to 12)	Trends in Ice Use
Total Sample	<ul style="list-style-type: none"> ■ In 2003, 1.2% of students in grades 7 to 12 report using ice at least once during the past year. This represents about 11,100 students in Ontario. 	<ul style="list-style-type: none"> □ Overall, ice use has not significantly changed between 1999 (1.4%) and 2003 (1.2%). □ Since 1991, use of ice has not changed, consistently remaining under 2% (among grades 7, 9, 11).
Sex	<ul style="list-style-type: none"> ■ No sex difference exists in the use of ice in 2003 (1.3% of males, and 1% of females). 	<ul style="list-style-type: none"> □ Neither males nor females show a significant change in ice use over the short- or long-term.
Grade	<ul style="list-style-type: none"> ■ No significant grade differences exist for ice use – most grades hover at around 1%. 	<ul style="list-style-type: none"> □ There is no significant change in ice use over time among any of the grades.
Region	<ul style="list-style-type: none"> ■ No significant regional differences are evident. 	<ul style="list-style-type: none"> □ There is no significant change in ice use over time among any of the regions.

Table 3.6.10a: Percentage Reporting *Ice Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (2299)	2001 (2061)	2003 (3152)
Total			1.4	0.6	1.2
	(95% CI)		(0.8-2.7)	(0.3-1.1)	(0.8-1.7)
Sex	Male		1.9	0.6	1.3
			(1.0-3.6)	(0.3-1.5)	(0.8-2.1)
	Female		0.9	0.5	1.0
			(0.4-2.3)	(0.2-1.5)	(0.6-1.8)
Grade	7		†	0.6	1.2
				(0.1-2.8)	(0.4-3.0)
	8		1.2	1.0	0.8
			(0.5-3.0)	(0.3-3.3)	(0.3-2.2)
	9		1.1	†	1.3
			(0.4-3.3)		(0.6-2.9)
	10		0.9	0.6	1.0
		(0.3-2.5)	(0.2-2.2)	(0.4-2.8)	
	11		3.2	1.2	1.1
			(0.8-11.8)	(0.3-4.5)	(0.4-2.8)
	12		1.6	†	1.5
			(0.6-4.1)		(0.7-3.2)
Region	Toronto		†	1.1	0.8
				(0.3-3.8)	(0.2-2.7)
	North		1.1	†	1.2
			(0.4-2.6)		(0.6-2.2)
	West		2.2	0.5	1.3
		(0.9-5.2)	(0.2-1.3)	(0.7-2.2)	
	East		1.2	0.6	1.2
			(0.4-3.2)	(0.1-2.2)	(0.6-2.4)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) based on a random half sample in each year; (4) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you use methamphetamine in the form of “**ice**”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.10b: Percentage Reporting *Ice Use* During the Past Year, 1991 – 2003, Grades 7, 9, 11 only

	1991 (1405)	1993 (1376)	1995 (1454)	1997 (1545)	1999 (1253)	2001 (1060)	2003 (1618)
Total (95% CI)	0.9 (0.5-1.6)	1.2 (0.5-2.8)	1.7 (1.2-2.5)	†	1.6 (0.6-4.1)	0.5 (0.2-1.5)	1.2 (0.7-2.0)
Sex							
Male	1.1 (0.3-3.3)	1.6 (0.7-4.0)	2.1 (1.2-3.7)	†	2.0 (0.8-5.2)	0.7 (0.2-2.3)	1.5 (0.8-2.7)
Female	0.7 (0.2-2.3)	0.8 (0.2-2.3)	1.4 (0.7-3.0)	0.6 (0.2-2.3)	1.2 (0.4-3.8)	†	1.0 (0.4-2.3)
Grade							
7	0.6 (0.3-1.2)	1.0 (0.2-4.8)	1.9 (1.0-4.4)	†	†	0.6 (0.1-2.8)	1.2 (0.4-3.0)
9	1.9 (0.7-5.4)	0.8 (0.2-3.8)	1.0 (0.7-3.2)	0.7	1.1 (0.4-3.3)	†	1.3 (0.6-2.9)
11	†	1.7 (0.5-6.2)	1.0 (0.4-2.4)	†	3.2 (0.8-1.8)	1.2 (0.3-4.5)	1.1 (0.4-2.8)
Region							
Toronto	1.9 (0.9-3.8)	3.4 (0.8-13.5)	2.9 (2.0-4.4)	†	†	1.6 (0.4-5.4)	0.7 (0.1-3.2)
North	†	†	†	†	1.0 (0.3-3.9)	†	1.7 (0.7-4.0)
West	0.8 (0.3-2.3)	0.9 (0.4-1.7)	1.8 (1.0-3.0)	0.7 (0.2-2.4)	2.6 (0.7-9.2)	†	1.2 (0.5-2.5)
East	0.6 (0.1-3.5)	0.7 (0.1-5.6)	1.4 (0.6-3.7)	†	1.4 (0.4-5.3)	0.6 (0.1-3.9)	1.5 (0.6-3.6)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) based on a random half sample in each year.

Q: In the **last 12 months**, how often did you use methamphetamine in the form of “ice”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year Use of Cocaine

(Tables 3.6.11a, 3.6.11b; Figures 3.6.14, 3.6.15)

	Cocaine Use in 2003 (Grades 7 to 12)	Trends in Cocaine Use
Total Sample	<ul style="list-style-type: none"> Overall, 4.8% of students report using cocaine at least once during the 12 months before the survey. We project that between 4.2% and 5.5% of all Ontario students use cocaine. The 4.8% estimate represents about 46,500 students in grades 7 to 12. 	<ul style="list-style-type: none"> Among all students in grades 7 to 12, cocaine use significantly increased between 1999 (3.4%) and 2003 (4.8%). Over the long-term, cocaine use was highest in 1979, but gradually decreased over the 1980s and early 1990s. However, use has been on a significant upswing since 1993, increasing from 1.5% to 5.1% in 2003 (grades 7, 9, 11 only). The current estimate is similar to that found in 1979.
Sex	<ul style="list-style-type: none"> Cocaine use does not significantly differ between males (5.4%) and females (4.3%). 	<ul style="list-style-type: none"> Between 1999 and 2003, cocaine use remained stable among males and females. However, since 1993, cocaine use has increased significantly for both males (from 1.4% to 5.4%) and females (from 1.6% to 4.9%).
Grade	<ul style="list-style-type: none"> Cocaine use significantly varies by grade. Use is lowest among 7th- and 8th-graders (2%-3%), and highest among 11th- and 12th-graders (about 7%). 	<ul style="list-style-type: none"> Although certain grades show nominal increases in cocaine use over the short-term, only the 12th-graders show a significant increase between 1999 (3.6%) and 2003 (6.7%). The most striking long-term trend occurs for 11th-graders, whose use increased from 2.5% in 1993 to 6.9% in 2003. The recent levels of cocaine use among 11th-graders are the highest on record. Another noticeable increase occurs for 9th-graders, from 0.6% in 1993 to 4.9% in 2003.

Region

■ Although there is slight variation in cocaine use by region, with the North showing the highest prevalence (6.1%), these differences are not statistically significant.

□ Regionally, cocaine use significantly increased in the North between 1999 and 2003, from 3.1% to 6.1%. Toronto and the West each show a non-significant increase over the short-term.

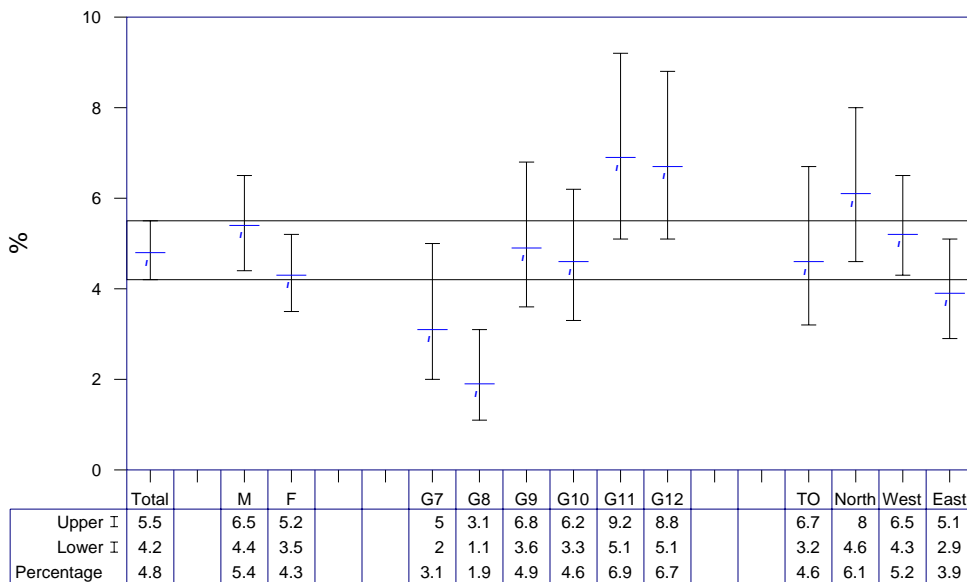
□ Since 1991, cocaine use among Northern students (from 0.5% to 6.7%) and Western students (from 1.4% to 6.1%) has significantly increased.

Frequency of Use

■ Use of cocaine at 6 times or more over the past year is reported by 1.6% of all students in grades 7 to 12.

■ Half (50%) of cocaine users report using once or twice during the past year, while one-in-five (21%) report using ten or more times.

Figure 3.6.14
Past Year Cocaine Use by Sex, Grade and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.6.11a: Percentage Reporting *Cocaine Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			3.4	4.4	4.8^b
(95% CI)			(2.8-4.2)	(3.6-5.4)	(4.2-5.5)
Sex	Male		3.8	4.6	5.4
			(3.0-4.9)	(3.6-5.9)	(4.4-6.5)
	Female		3.0	4.2	4.3
			(2.4-3.9)	(3.1-5.6)	(3.5-5.2)
Grade	7		2.5	2.4	3.1
			(1.4-4.3)	(1.3-4.1)	(2.0-5.0)
	8		2.0	3.2	1.9
			(1.1-3.6)	(2.0-5.1)	(1.1-3.1)
	9		3.2	3.2	4.9
			(2.1-4.7)	(2.0-5.2)	(3.6-6.8)
	10		3.8	6.5	4.6
			(2.4-5.9)	(4.4-9.6)	(3.3-6.2)
	11		5.4	7.0	6.9
			(3.4-8.4)	(4.4-10.9)	(5.1-9.2)
	12		3.6	3.5	6.7^b
			(2.3-5.7)	(1.9-6.2)	(5.1-8.8)
Region	Toronto		3.5	2.6	4.6
			(2.1-5.6)	(1.4-4.8)	(3.2-6.7)
	North		3.1	3.1	6.1^{ab}
			(1.8-5.1)	(1.9-5.3)	(4.6-8.0)
	West		3.6	5.8	5.3
			(2.6-5.0)	(4.4-7.6)	(4.3-6.5)
	East		3.2	3.9	3.9
			(2.4-4.3)	(2.6-5.9)	(2.9-5.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, p<.01; (3) ^b 2003 vs. 1999 significant difference, p<.01.

Q: In the **last 12 months**, how often did you use **cocaine** (also known as “coke”, “snow”, “snort”, “blow”, etc.)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.15
Past Year Cocaine Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

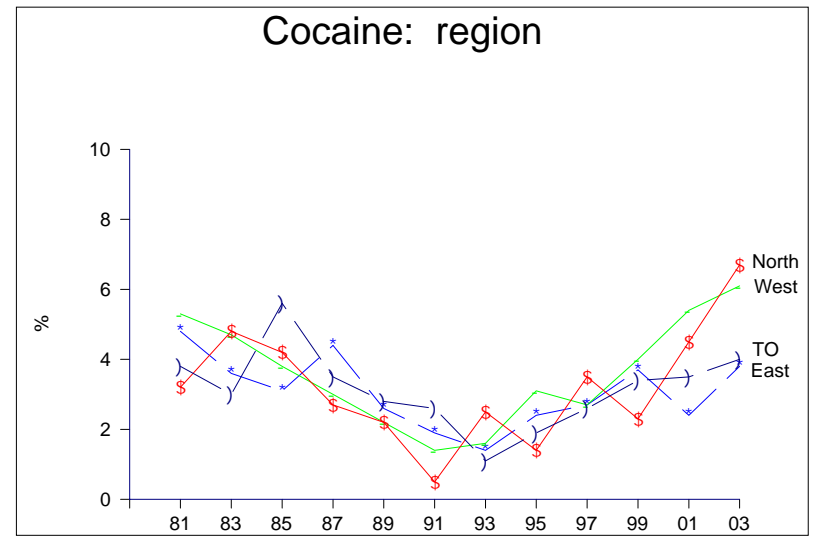
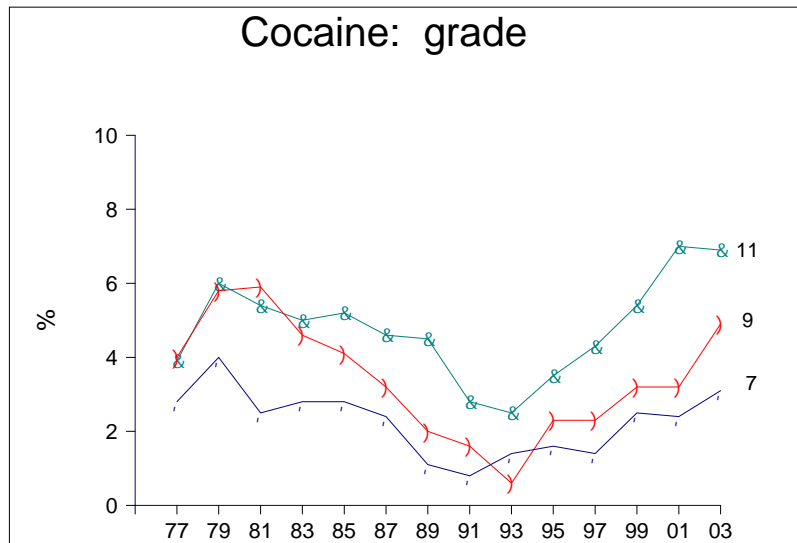
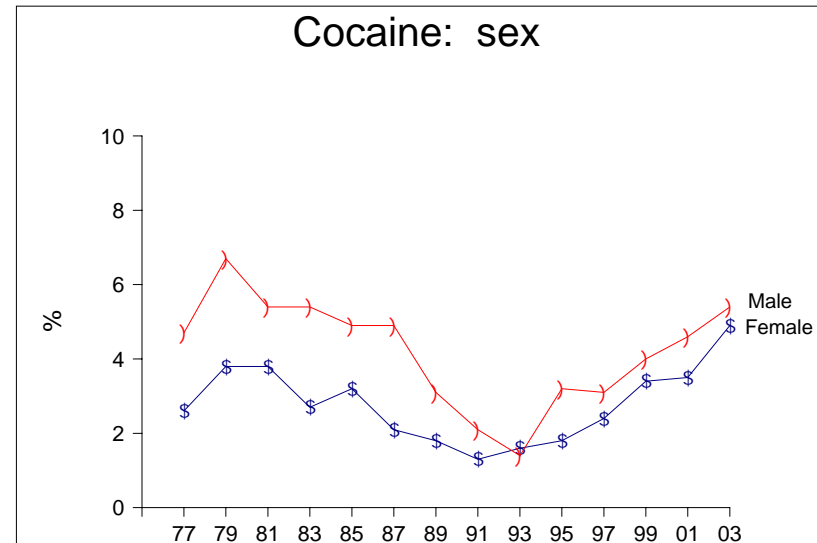
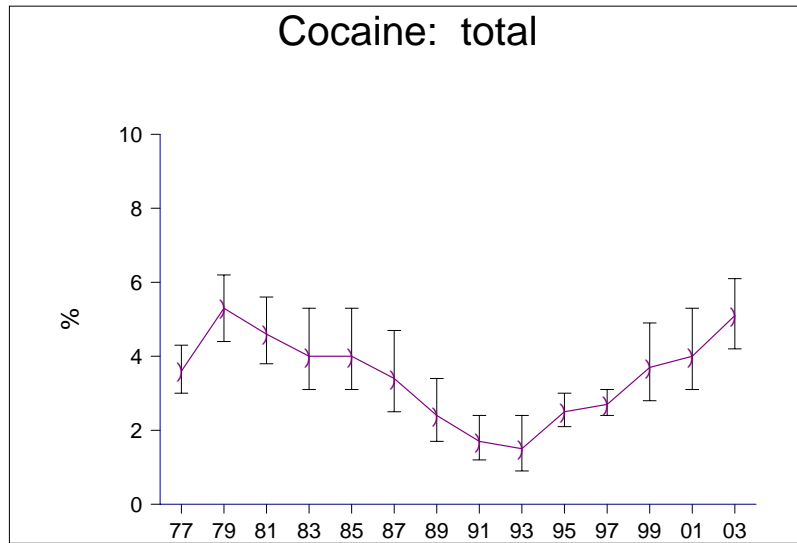


Table 3.6.11b: Percentage Reporting Cocaine Use During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	3.6	5.3	4.6	4.0	4.0	3.4	2.4	1.7	1.5	2.5	2.7	3.7	4.0	5.1
(95% CI)	(3.0-4.3)	(4.4-6.2)	(3.8-5.6)	(3.1-5.3)	(3.1-5.3)	(2.5-4.7)	(1.7-3.4)	(1.2-2.4)	(0.9-2.4)	(2.1-3.0)	(2.4-3.1)	(2.8-4.9)	(3.1-5.3)	(4.2-6.1)
Sex														
Male	4.7	6.7	5.4	5.4	4.9	4.9	3.1	2.1	1.4	3.2	3.1	4.0	4.6	5.4
	(3.8-5.8)	(5.5-8.2)	(4.3-6.7)	(4.1-7.1)	(3.1-7.6)	(3.2-7.2)	(2.2-4.5)	(1.3-3.3)	(0.6-3.4)	(2.4-4.5)	(2.4-4.2)	(2.7-5.7)	(3.2-6.4)	(4.1-6.9)
Female	2.6	3.8	3.8	2.7	3.2	2.1	1.8	1.3	1.6	1.8	2.4	3.4	3.5	4.9
	(1.9-3.6)	(3.0-4.8)	(2.7-5.4)	(1.9-3.8)	(2.3-4.4)	(1.2-3.5)	(1.0-3.3)	(0.8-2.1)	(0.8-3.0)	(1.3-2.6)	(1.8-3.1)	(2.5-4.8)	(2.2-5.5)	(3.7-6.4)
Grade														
7	2.8	4.0	2.5	2.8	2.8	2.4	1.1	0.8	1.4	1.6	1.4	2.5	2.4	3.1
	(2.0-3.9)	(2.8-5.5)	(1.8-3.3)	(1.7-4.5)	(1.2-6.2)	(1.7-3.2)	(0.6-1.8)	(0.2-2.9)	(0.6-3.4)	(1.2-2.3)	(1.0-2.0)	(1.4-4.3)	(1.3-4.1)	(2.0-5.0)
9	4.0	5.8	5.9	4.6	4.1	3.2	2.0	1.6	0.6	2.3	2.3	3.2	3.2	4.9
	(3.1-5.3)	(4.3-7.6)	(4.6-7.6)	(3.0-7.1)	(2.6-6.5)	(1.6-6.6)	(1.0-3.7)	(1.0-2.5)	(0.3-1.1)	(1.5-3.5)	(2.0-2.7)	(2.1-4.7)	(2.0-5.2)	(3.6-6.8)
11	3.9	6.0	5.4	5.0	5.2	4.6	4.5	2.8	2.5	3.5	4.3	5.4	7.0	6.9
	(2.8-5.6)	(4.6-7.8)	(3.7-7.9)	(3.1-8.1)	(3.8-6.9)	(2.9-7.3)	(2.9-6.9)	(1.7-4.4)	(1.3-4.8)	(2.7-4.5)	(3.6-5.1)	(3.4-8.4)	(4.4-10.9)	(5.1-9.2)
Region														
Toronto	—	—	3.8	3.0	5.6	3.5	2.8	2.6	1.1	1.9	2.6	3.4	3.5	4.0
			(1.7-8.1)	(1.7-5.3)	(3.8-8.1)	(1.5-8.1)	(1.5-5.4)	(1.2-5.6)	(0.4-3.0)	(1.1-3.4)	(1.8-3.9)	(1.8-6.4)	(1.8-6.6)	(2.6-6.0)
North	—	—	3.2	4.8	4.2	2.7	2.2	0.5	2.5	1.4	3.5	2.3	4.5	6.7
			(1.8-5.7)	(3.8-6.1)	(2.1-8.2)	(1.7-4.2)	(0.8-6.0)	(0.1-3.6)	(0.5-11.1)	(0.2-7.2)	(1.7-7.0)	(0.8-6.2)	(2.2-9.1)	(4.7-9.4)
West	—	—	5.3	4.7	3.8	3.0	2.2	1.4	1.6	3.1	2.7	4.0	5.4	6.1
			(4.2-6.6)	(2.8-7.7)	(2.3-6.3)	(2.2-4.1)	(1.7-2.9)	(0.7-2.7)	(0.8-3.1)	(2.7-3.5)	(2.3-3.1)	(2.5-6.5)	(3.7-7.9)	(4.6-8.2)
East	—	—	4.8	3.6	3.1	4.4	2.6	1.9	1.4	2.4	2.7	3.7	2.4	3.8
			(3.1-7.3)	(2.5-5.2)	(1.6-5.9)	(2.2-8.5)	(1.0-6.7)	(1.3-2.7)	(0.5-3.7)	(1.5-3.9)	(2.4-3.0)	(2.5-5.4)	(1.5-3.7)	(2.8-5.2)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the **last 12 months**, how often did you use **cocaine** (also known as “coke”, “snow”, “snort”, “blow”, etc.)?

Source: OSDUS, Centre for Addiction & Mental Health

Past Year Use of Crack Cocaine

(Tables 3.6.12a, 3.6.12b; Figures 3.6.16, 3.6.17)

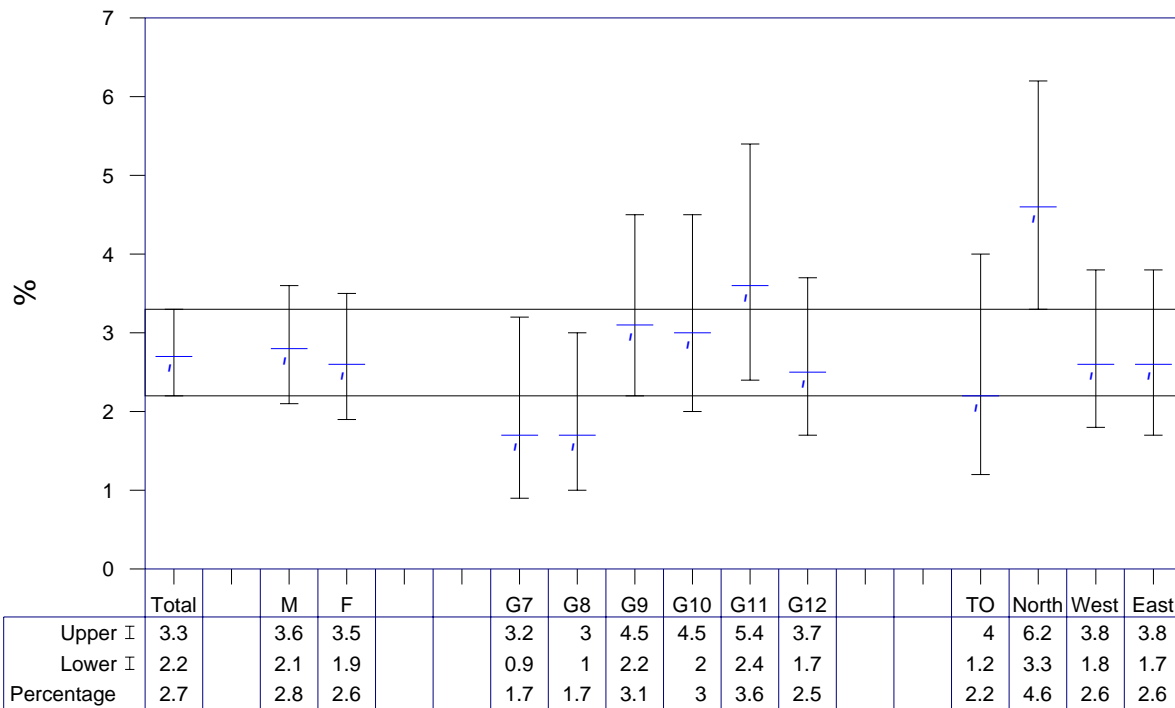
	Crack Cocaine Use in 2003 (Grades 7 to 12)	Trends in Crack Cocaine Use
Total Sample	<ul style="list-style-type: none">■ Among all students, 2.7% used crack during the past year. With the sampling error, we estimate that between 2.2% and 3.3% of students in grades 7 to 12 use crack. The percentage 2.7% represents about 25,900 students in Ontario.	<ul style="list-style-type: none">□ Among all students, crack use remained stable between 1999 and 2003 (under 3%).□ Over the past decade, there has been a small, but significant, increase in crack use, from 1.1% in 1991 to 2.9% in 2003 (among grades 7, 9, and 11 only).
Sex	<ul style="list-style-type: none">■ Use of crack does not differ between males (2.8%) and females (2.6%).	<ul style="list-style-type: none">□ Between 1999 and 2003, crack use did not change for males or females.
Grade	<ul style="list-style-type: none">■ Grade is not significantly associated with crack use, although there is variation between the younger grades (1.7%) and 11th-graders (3.6%).	<ul style="list-style-type: none">□ Between 1999 and 2003, crack use shows no significant change in any of the grades.□ Current 9th- and 11th-graders are more likely to report crack use than their counterparts in the early 1990s.
Region	<ul style="list-style-type: none">■ Although crack use in the North (4.6%) is higher compared to the other regions, there is no significant association with region.	<ul style="list-style-type: none">□ Only students in the North show a significant change in crack use in the short-term, increasing from 1.0% in 2001 to 4.6% in 2003.□ Crack use among students in the North (grades 7, 9, 11 only) is currently significantly higher than level found in the late 1980s and early 1990s (5.1% vs about 1%).

Frequency of Use

- Less than 1% of all students used crack 6 or more times during the past year.

- Among crack users, 62% used only once or twice in the past year.

Figure 3.6.16
Past Year Crack Cocaine Use by Sex, Grade and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.6.12a: Percentage Reporting *Crack Cocaine Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(N)	(4447)	(3898)
		(6616)		
Total		2.5	2.1	2.7
(95% CI)		(1.9-3.2)	(1.6-2.8)	(2.2-3.3)
Sex	Male	3.0	2.5	2.8
		(2.2-4.1)	(1.6-3.8)	(2.1-3.6)
	Female	2.0	1.8	2.6
		(1.4-2.8)	(1.2-2.6)	(1.9-3.5)
Grade	7	0.6	0.5	1.7
		(0.2-1.5)	(0.2-1.5)	(0.9-3.2)
	8	1.6	1.7	1.7
		(0.8-3.0)	(0.8-3.5)	(1.0-3.0)
	9	3.0	3.7	3.1
		(1.9-4.6)	(2.3-6.0)	(2.2-4.5)
	10	3.8	1.4	3.0
		(2.1-6.6)	(0.7-2.8)	(2.0-4.5)
	11	3.6	2.6	3.6
		(1.9-6.8)	(1.6-4.0)	(2.4-5.4)
	12	2.4	2.9	2.5
		(1.2-4.8)	(1.3-6.7)	(1.7-3.7)
Region	Toronto	1.8	2.7	2.2
		(0.9-3.6)	(2.0-3.6)	(1.2-4.0)
	North	2.8	1.0	4.6^a
		(1.6-4.8)	(0.5-2.0)	(3.3-6.2)
	West	2.9	2.7	2.6
		(1.8-4.4)	(1.7-4.1)	(1.8-3.8)
	East	2.3	1.3	2.6
		(1.7-3.2)	(0.7-2.2)	(1.7-3.8)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, p < .01.

Q: In the **last 12 months**, how often have you used **cocaine** in the form of “**crack**”?

Source: OSDUS, Centre for Addiction & Mental Health

Figure 3.6.17
Past Year Crack Cocaine Use, OSDUS 1987 – 2003 (Grades 7, 9, 11 only)

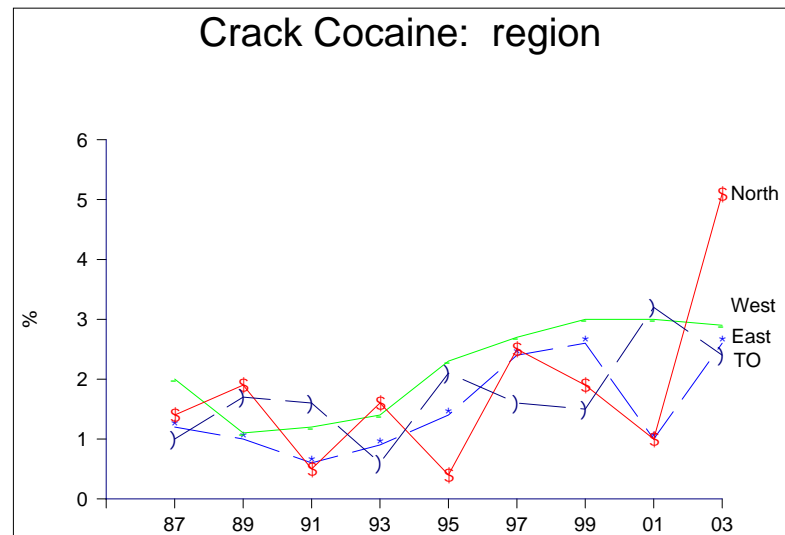
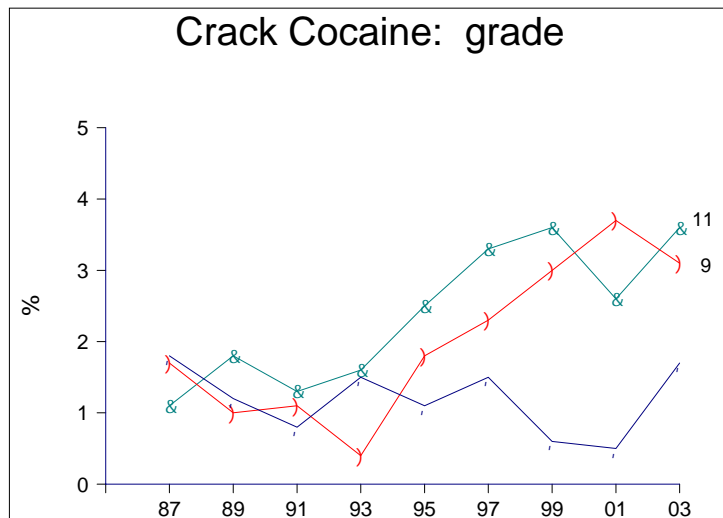
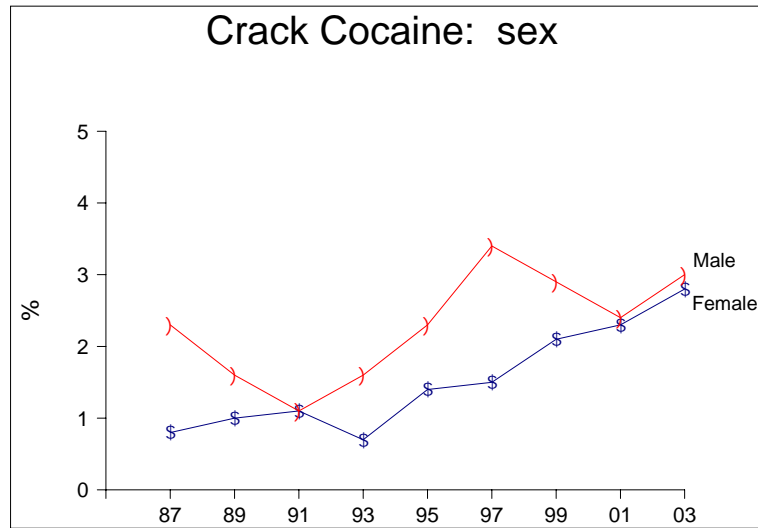
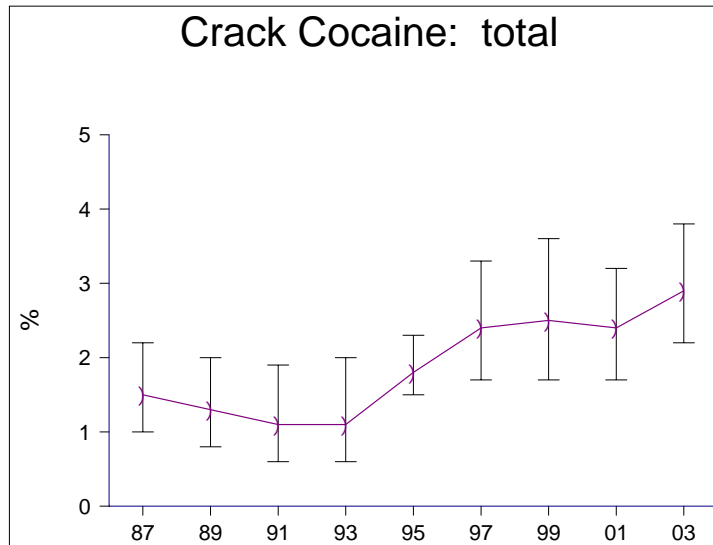


Table 3.6.12b: Percentage Reporting *Crack Cocaine Use* During the Past Year, 1987 – 2003, Grades 7, 9, 11 only

(N)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total	1.5	1.3	1.1	1.1	1.8	2.4	2.5	2.4	2.9
(95% CI)	(1.0-2.2)	(0.8-2.0)	(0.6-1.9)	(0.6-2.0)	(1.5-2.3)	(1.7-3.3)	(1.7-3.6)	(1.7-3.2)	(2.2-3.8)
Sex									
Male	2.3	1.6	1.1	1.6	2.3	3.4	2.9	2.4	3.0
	(1.3-4.1)	(1.0-2.6)	(0.6-2.1)	(0.8-3.3)	(1.6-3.4)	(2.0-5.8)	(1.9-4.4)	(1.4-3.9)	(2.1-4.2)
Female	0.8	1.0	1.1	0.7	1.4	1.5	2.1	2.3	2.8
	(0.4-1.3)	(0.6-1.8)	(0.5-2.2)	(0.3-1.6)	(1.1-1.8)	(1.0-2.3)	(1.3-3.4)	(1.4-3.7)	(1.9-4.1)
Grade									
7	1.8	1.2	0.8	1.5	1.1	1.5	0.6	0.5	1.7
	(1.3-2.4)	(0.7-1.9)	(0.2-3.0)	(0.6-3.8)	(0.7-1.8)	(0.4-5.3)	(0.2-1.5)	(0.2-1.5)	(0.9-3.2)
9	1.7	1.0	1.1	†	1.8	2.3	3.0	3.7	3.1
	(1.0-2.9)	(0.4-2.6)	(0.4-3.4)		(1.1-3.0)	(1.4-3.7)	(1.9-4.6)	(2.3-6.0)	(2.2-4.5)
11	1.1	1.8	1.3	1.6	2.5	3.3	3.6	2.6	3.6
	(0.3-3.4)	(0.8-3.8)	(0.7-2.4)	(0.7-3.6)	(2.0-3.2)	(2.4-4.4)	(1.9-6.8)	(1.6-4.0)	(2.4-5.4)
Region									
Toronto	1.0	1.7	1.6	0.6	2.1	1.6	1.5	3.2	2.4
	(0.4-2.4)	(0.4-7.4)	(0.7-3.8)	(0.3-1.3)	(1.2-3.7)	(0.5-4.9)	(0.7-3.3)	(2.1-4.9)	(1.2-5.0)
North	1.4	1.9	0.5	1.6	†	2.5	1.9	1.0	5.1
	(0.9-2.2)	(0.6-5.8)	(0.1-3.6)	(0.2-12.6)		(0.8-7.5)	(0.6-6.1)	(0.3-2.8)	(3.5-7.4)
West	2.0	1.1	1.2	1.4	2.3	2.7	3.0	3.0	2.9
	(1.0-3.6)	(0.8-1.6)	(0.5-3.3)	(0.7-2.9)	(1.8-2.9)	(1.6-4.6)	(1.6-5.5)	(1.8-4.9)	(1.8-4.4)
East	1.2	1.0	0.6	0.9	1.4	2.4	2.6	1.0	2.6
	(0.6-2.2)	(0.4-2.7)	(0.4-1.1)	(0.2-3.0)	(0.8-2.5)	(1.8-3.2)	(1.6-4.2)	(0.5-2.2)	(1.6-4.3)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%.

Q: In the **last 12 months**, how often have you used **cocaine** in the form of “**crack**”?

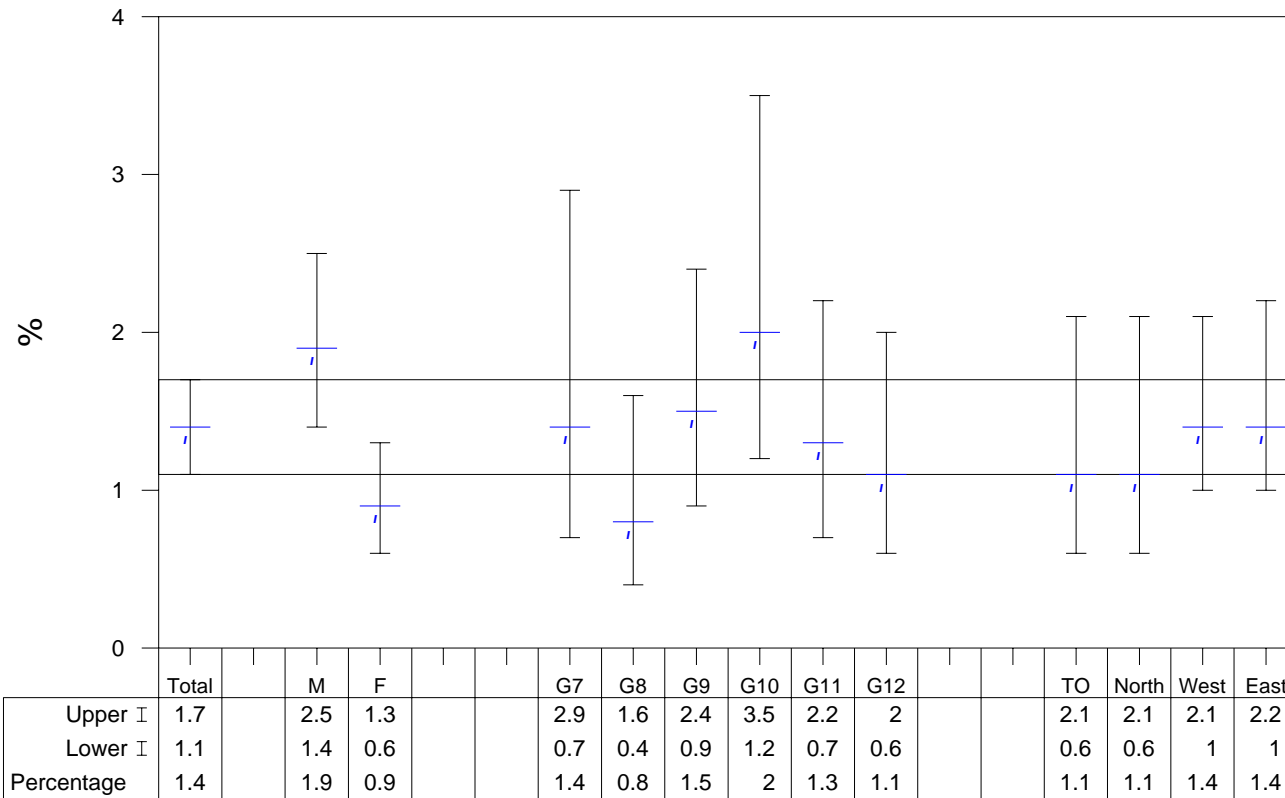
Source: OSDUS, Centre for Addiction & Mental Health

Past Year Use of Heroin

(Tables 3.6.13a, 3.6.13b; Figures 3.6.18, 3.6.19)

	Heroin Use in 2003 (Grades 7 to 12)	Trends in Heroin Use
Total Sample	<ul style="list-style-type: none"> Overall, 1.4% of students report using heroin at least once during the 12 months before the survey. We project that between 1.1% and 1.7% of all Ontario students use heroin. The percentage of 1.4% represents 13,100 students in grades 7 through 12. 	<ul style="list-style-type: none"> Heroin use remained steady between 1999 and 2003 (under 2%). Between 1977 and 2003, the use of heroin has varied minimally, remaining under 2.5%. The current rate is significantly lower than the peak in use found in 1979.
Sex	<ul style="list-style-type: none"> Use of heroin significantly differs between males (1.9%) and females (0.9%). 	<ul style="list-style-type: none"> There is no major change in heroin use over time for either males or females.
Grade	<ul style="list-style-type: none"> Heroin use does not significantly vary by grade, as use among most grades remains around 2% or under. 	<ul style="list-style-type: none"> No grade shows a significant change in heroin use over time.
Region	<ul style="list-style-type: none"> There is no significant regional variation for heroin use. 	<ul style="list-style-type: none"> There is no major change in use over time within any of the regions.
Frequency of Use	<ul style="list-style-type: none"> Less than 1% of students used heroin 6 times or more during the past year. Among heroin users, most (55%) reported using once or twice during the past year. 	

Figure 3.6.18
Past Year Heroin Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bars represents 95% CI for the total estimate

Table 3.6.13a: Percentage Reporting *Heroin Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (4447)	2001 (3898)	2003 (6616)
Total			1.9	1.1	1.4
(95% CI)			(1.5-2.5)	(0.8-1.5)	(1.1-1.7)
Sex	Male		2.5	1.4	1.9
			(1.8-3.4)	(1.0-2.1)	(1.4-2.5)
	Female		1.4	0.7	0.9
			(0.8-2.1)	(0.4-1.4)	(0.6-1.3)
Grade	7		0.5	0.9	1.4
			(0.2-1.4)	(0.4-1.9)	(0.7-2.9)
	8		2.8	0.9	0.8
			(1.6-4.9)	(0.4-1.7)	(0.4-1.6)
	9		2.5	2.2	1.5
			(1.7-3.8)	(1.3-3.6)	(0.9-2.4)
	10		1.5	1.2	2.0
			(0.6-3.6)	(0.6-2.2)	(1.2-3.5)
	11		1.8	0.5	1.3
			(0.8-3.9)	(0.2-1.7)	(0.7-2.2)
	12		2.2	†	1.1
			(1.2-4.0)		(0.6-2.0)
Region	Toronto		1.4	0.6	1.1
			(0.7-2.7)	(0.2-1.9)	(0.6-2.1)
	North		1.3	1.0	1.1
			(0.8-2.1)	(0.4-2.2)	(0.6-2.1)
	West		1.9	1.7	1.4
			(1.2-2.9)	(1.1-2.4)	(1.0-2.1)
	East		2.5	0.6	1.4
			(1.8-3.5)	(0.2-1.3)	(1.0-2.2)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, how often did you use **heroin** (also known as “H”, “junk”, or “smack”)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.19
Past Year Heroin Use, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

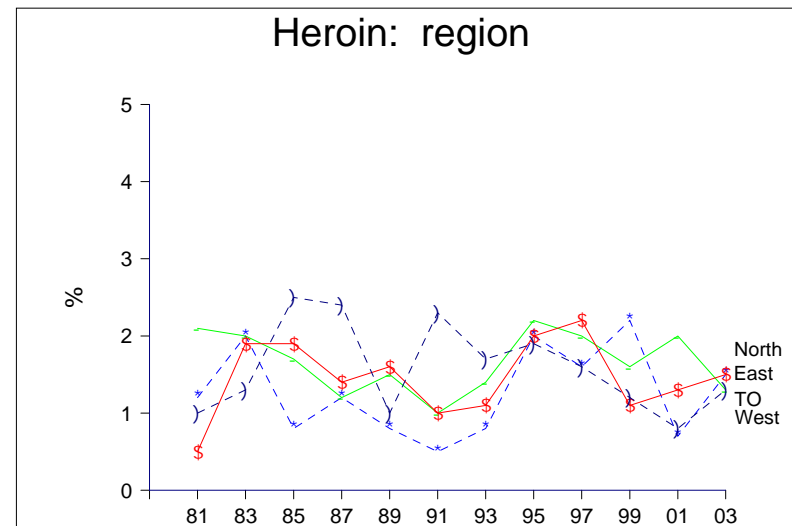
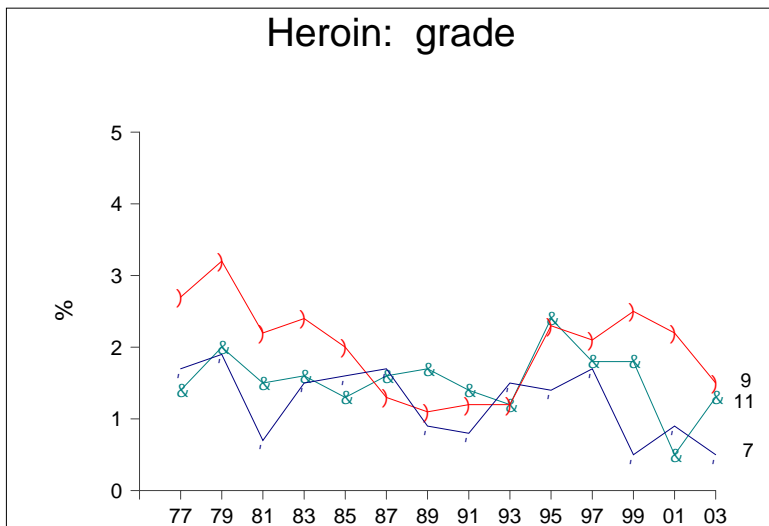
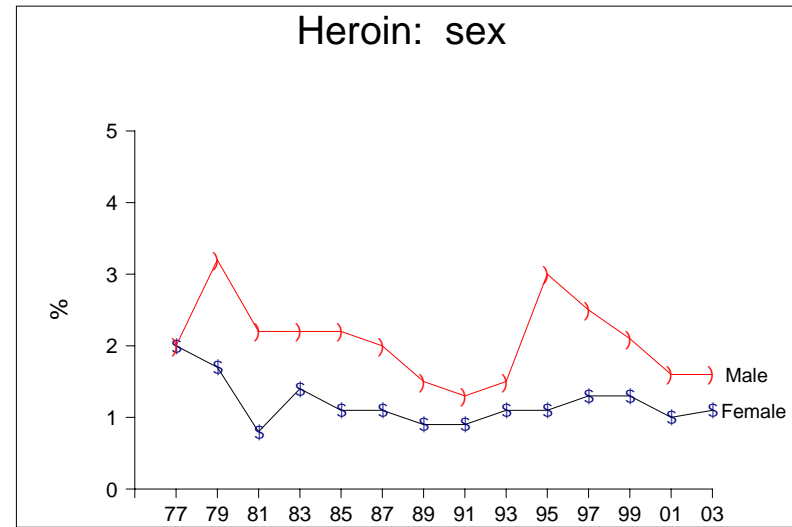
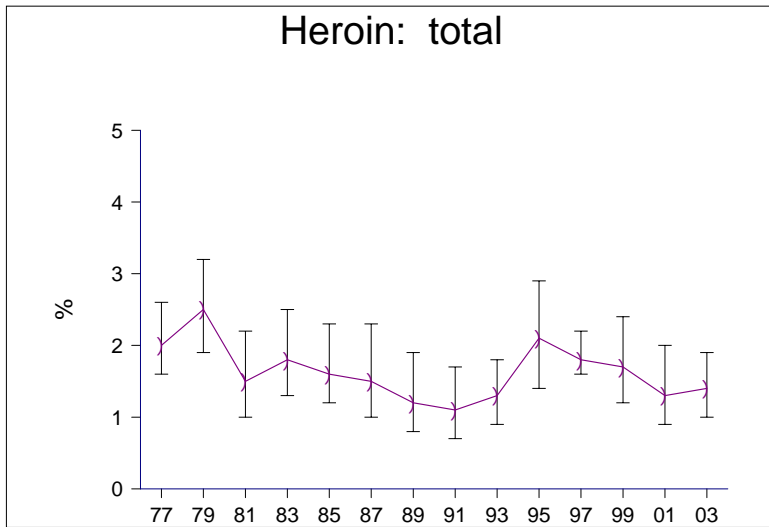


Table 3.6.13b: Percentage Reporting *Heroin Use* During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977 (N)	1979 (3927)	1981 (3920)	1983 (3010)	1985 (3614)	1985 (3146)	1987 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Total		2.0	2.5	1.5	1.8	1.6	1.5	1.2	1.1	1.3	2.1	1.8	1.7	1.3	1.4
(95% CI)		(1.6-2.6)	(1.9-3.2)	(1.0-2.2)	(1.3-2.5)	(1.2-2.3)	(1.0-2.3)	(0.8-1.9)	(0.7-1.7)	(0.9-1.8)	(1.4-2.9)	(1.6-2.2)	(1.2-2.4)	(0.9-2.0)	(1.0-1.9)
Sex															
Male		2.0	3.2	2.2	2.2	2.2	2.0	1.5	1.3	1.5	3.0	2.5	2.1	1.6	1.6
		(1.4-2.7)	(2.4-4.3)	(1.4-3.3)	(1.5-3.2)	(1.6-2.9)	(1.2-3.2)	(0.9-2.6)	(0.7-2.5)	(0.8-2.7)	(2.2-4.2)	(1.9-3.2)	(1.3-3.4)	(0.9-2.9)	(1.1-2.5)
Female		2.0	1.7	0.8	1.4	1.1	1.1	0.9	0.9	1.1	1.1	1.3	1.3	1.0	1.1
		(1.5-2.8)	(1.1-2.5)	(0.4-1.4)	(0.9-2.3)	(0.6-1.9)	(0.6-1.8)	(0.5-1.6)	(0.6-1.4)	(0.5-2.1)	(0.6-2.1)	(1.0-1.7)	(0.6-2.7)	(0.4-2.2)	(0.6-1.9)
Grade															
7		1.7	1.9	0.7	1.5	1.6	1.7	0.9	0.8	1.5	1.4	1.7	0.5	0.9	1.4
		(1.1-2.5)	(1.2-3.1)	(0.2-1.8)	(0.8-2.6)	(0.7-3.5)	(1.1-2.6)	(0.4-1.9)	(0.2-2.9)	(1.1-2.0)	(0.5-3.7)	(1.3-2.2)	(0.2-1.4)	(0.4-1.9)	(0.7-2.9)
9		2.7	3.2	2.2	2.4	2.0	1.3	1.1	1.2	1.2	2.3	2.1	2.5	2.2	1.5
		(2.0-3.8)	(2.3-4.6)	(1.3-3.8)	(1.6-3.8)	(1.2-3.2)	(0.5-3.4)	(0.5-2.4)	(0.6-2.4)	(0.6-2.2)	(1.7-3.2)	(1.6-2.7)	(1.7-3.8)	(1.3-3.6)	(0.9-2.4)
11		1.4	2.0	1.5	1.6	1.3	1.6	1.7	1.4	1.2	2.4	1.8	1.8	0.5	1.3
		(0.8-2.4)	(1.3-3.1)	(1.0-2.2)	(0.8-3.1)	(0.9-2.0)	(0.8-3.2)	(0.9-3.3)	(0.8-2.2)	(0.6-2.4)	(1.3-4.6)	(1.2-2.5)	(0.8-3.9)	(0.2-1.7)	(0.7-2.2)
Region															
Toronto		—	—	1.0	1.3	2.5	2.4	1.0	2.3	1.7	1.9	1.6	1.2	0.8	1.3
				(0.2-4.3)	(0.7-2.4)	(1.4-4.5)	(1.0-5.8)	(0.2-4.8)	(1.1-4.8)	(0.9-3.3)	(1.2-3.0)	(1.0-2.5)	(0.5-2.9)	(0.2-2.6)	(0.7-2.7)
North		—	—	0.5	1.9	1.9	1.4	1.6	1.0	1.1	2.0	2.2	1.1	1.3	1.5
				(0.1-2.4)	(1.0-3.7)	(1.0-3.6)	(0.6-3.1)	(0.4-5.6)	(0.1-7.1)	(0.5-2.4)	(0.5-7.0)	(1.2-4.3)	(0.4-2.7)	(0.5-3.2)	(0.7-3.5)
West		—	—	2.1	2.0	1.7	1.2	1.5	1.0	1.4	2.2	2.0	1.6	2.0	1.3
				(1.4-3.1)	(1.1-3.5)	(0.9-3.1)	(0.6-2.6)	(0.9-2.5)	(0.6-1.8)	(0.8-2.2)	(1.2-4.3)	(1.6-2.6)	(0.9-3.1)	(1.2-3.3)	(0.8-2.1)
East		—	—	1.2	2.0	0.8	1.2	0.8	0.5	0.8	2.0	1.6	2.2	0.7	1.5
				(0.8-2.0)	(1.3-3.2)	(0.4-1.6)	(0.6-2.4)	(0.4-1.7)	(0.2-1.0)	(0.5-1.5)	(1.2-3.0)	(1.3-2.0)	(1.2-3.8)	(0.2-2.0)	(0.8-3.0)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals.

Q: In the last 12 months, how often did you use **heroin** (also known as “H”, “junk”, or “smack”)?

Source: OSDUS, Centre for Addiction & Mental Health

Club Drugs

The *OSDUS* has been monitoring certain so-called “club drugs” since the early 1990s. Club drugs are used by adolescents and young adults, usually at nightclubs and raves. The most popular is “ecstasy” (MDMA, methylenedioxymethamphetamine), which first appeared in Canada in 1989. Ecstasy is a synthetic substance with both stimulant and hallucinogenic properties. The *OSDUS* began to monitor the use of ecstasy 1991.

The 2001 *OSDUS* first included questions on the use of GHB, and Rohypnol. GHB (gamma-hydroxybutyrate, also called “liquid ecstasy,” “G”) is an odourless central nervous system depressant, taken for its euphoric and relaxing effects. Rohypnol (flunitrazepam, also called “roofies,” “the date-rape drug”) is a benzodiazepine sedative, which is odourless and tasteless and can produce amnesia. For the first time, the 2003 *OSDUS* asked about the use of Ketamine, which is a general anesthetic for human and veterinary use. Ketamine (also called “vitamin K”, “special K”) is a central nervous system depressant that can produce hallucinogenic effects.

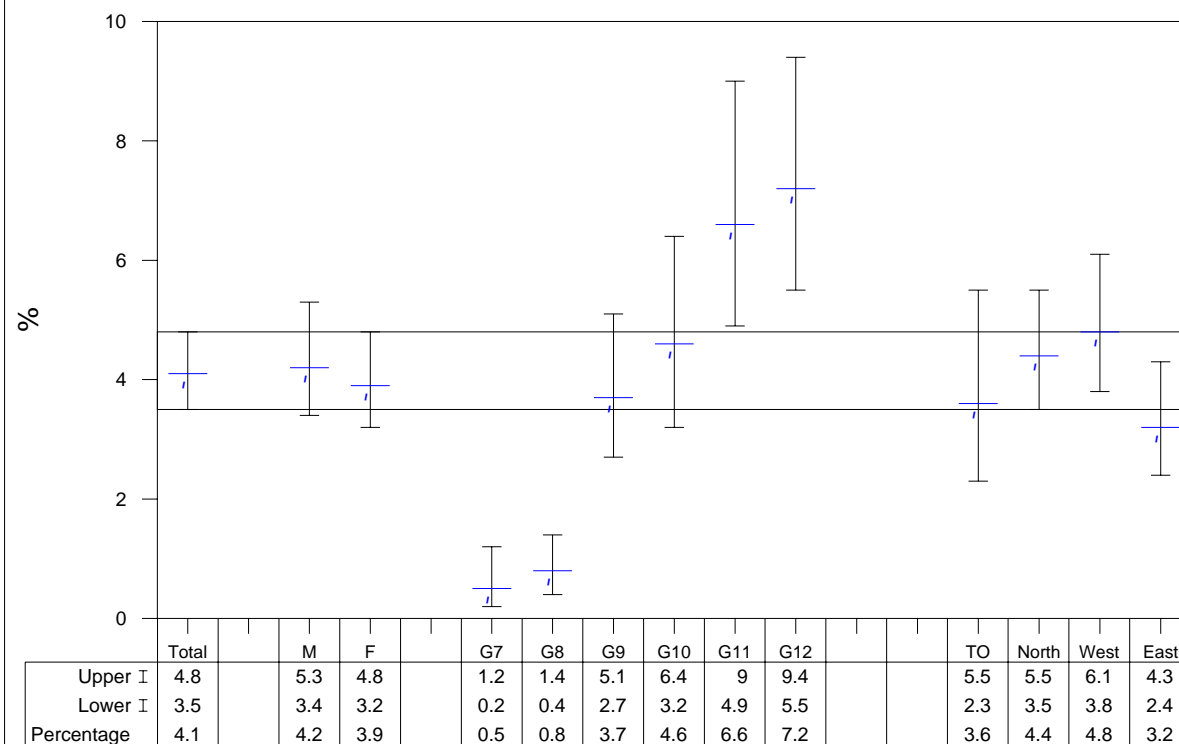
Past Year Use of “Ecstasy”

(Tables 3.6.14a, 3.6.14b; Figure 3.6.20)

	Ecstasy Use in 2003 (Grades 7 to 12)	Trends in Ecstasy Use
Total Sample	<ul style="list-style-type: none"> ■ In 2003, 4.1% of students in grades 7 through 12 report using ecstasy during the 12 months before the survey. With the sampling error, we estimate that between 3.5% and 4.8% of students use ecstasy. The estimated number of students in Ontario who use ecstasy is about 39,400. 	<ul style="list-style-type: none"> □ The 2003 estimate for ecstasy use (4.1%) among students in grades 7 to 12 is significantly lower than that found in 2001 (6.0%), and resembles that found in 1999 (4.0%). □ Since monitoring began in 1991, ecstasy use steadily increased from under 1% to 5.8% in 2001. Since then, there has been a decline to 3.8% in 2003 (grades 7, 9 11 only).
Sex	<ul style="list-style-type: none"> ■ No significant sex difference exists regarding ecstasy use (4.2% of males, 3.9% of females). 	<ul style="list-style-type: none"> □ Between 2001 and 2003, ecstasy use significantly declined among males (from 6.7% to 4.2%). Females’ use of ecstasy did not change over the short-term.

- Grade**
- 11th-graders (6.6%) and 12th-graders (7.2%) are most likely to report ecstasy use, compared to the other grades.
 - Between 2001 and 2003, ecstasy use significantly declined among 8th-graders (3.0% to 0.8%) and 9th-graders (7.2% to 3.7%). No other grade shows a significant change over the short-term.
- Region**
- Ecstasy use does not significantly vary by region.
 - Among the four regions, students in the West show a significant decrease between 2001 and 2003 (8.1% vs. 4.8%). No other region shows a significant change.
-
- Frequency of Use**
- Less than 2% of all students report using ecstasy 6 times or more in the last year.
 - Most (51%) ecstasy users report using once or twice in the past year.

Figure 3.6.20
Past Year Ecstasy (MDMA) Use by Sex, Grade, and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.6.14a: Percentage Reporting *Ecstasy Use* During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (2299)	2001 (3898)	2003 (6616)
Total			4.0	6.0	4.1^a
	(95% CI)		(3.1-5.2)	(5.0-7.1)	(3.5-4.8)
Sex	Male		4.1	6.7	4.2^a
			(2.8-5.9)	(5.3-8.5)	(3.4-5.3)
	Female		4.0	5.3	3.9
			(2.7-5.7)	(4.2-6.6)	(3.2-4.8)
Grade	7		0.6	0.9	0.5
			(0.2-1.9)	(0.4-1.8)	(0.2-1.2)
	8		1.9	3.0	0.8^a
			(0.9-4.2)	(1.7-5.3)	(0.4-1.4)
	9		2.3	7.2	3.7^a
			(1.0-5.0)	(5.0-10.1)	(2.7-5.1)
	10		4.4	6.8	4.6
			(2.5-7.8)	(4.6-9.9)	(3.2-6.4)
	11		9.8	9.5	6.6
			(6.4-14.8)	(6.9-12.9)	(4.9-9.0)
	12		4.8	9.2	7.2
			(2.6-8.8)	(6.0-14.1)	(5.5-9.4)
Region	Toronto		3.8	4.8	3.6
			(2.0-7.4)	(3.1-7.4)	(2.3-5.5)
	North		1.9	4.2	4.4
			(1.0-3.4)	(3.0-5.9)	(3.5-5.5)
	West		4.6	8.1	4.8^a
			(3.1-6.6)	(6.5-10.0)	(3.8-6.1)
	East		4.0	4.2	3.2
			(2.5-6.5)	(2.6-6.8)	(2.4-4.3)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, p< .01; (3) based on a random half sample in 1999.

Q. In the **last 12 months**, how often did you use MDMA or “ecstasy”?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.6.14b: Percentage Reporting *Ecstasy Use* During the Past Year, 1991 – 2003, Grades 7, 9, 11 only

	1991 (N)	1993 (1405)	1995 (1376)	1997 (1454)	1999 (1545)	2001 (1253)	2003 (2013)	2003 (3389)
Total (95% CI)	†	†	2.0 (1.2-3.3)	2.9 (1.7-5.1)	4.3 (3.0-6.2)	5.8 (4.7-7.3)	3.8 (3.2-4.7)	
Sex								
Male	†	†	2.4 (1.4-4.1)	2.6 (0.8-8.0)	3.8 (2.2-6.4)	6.0 (4.4-8.0)	3.4 (2.5-4.6)	
Female	†	†	1.6 (0.7-3.6)	3.2 (2.1-5.0)	4.9 (3.1-7.6)	5.7 (4.2-7.9)	4.3 (3.3-5.6)	
Grade								
7	†	†	0.7 (0.1-5.7)	†	0.6 (0.2-1.9)	0.9 (0.4-1.8)	0.5 (0.2-1.2)	
9	†	†	1.9 (0.7-5.1)	3.0 (2.2-4.2)	2.3 (1.0-5.0)	7.2 (5.0-10.1)	3.7 (2.7-5.1)	
11	0.5 (0.2-1.1)	†	3.0 (1.7-5.6)	5.3 (2.2-12.1)	9.8 (6.4-14.8)	9.5 (6.9-12.9)	6.6 (4.9-9.0)	
Region								
Toronto	0.5 (0.4-0.6)	†	1.4 (0.3-6.1)	2.9 (1.8-4.6)	3.2 (1.2-8.2)	5.7 (3.6-8.9)	2.9 (1.5-5.8)	
North	†	†	2.5 (0.4-13.7)	0.8 (0.1-6.2)	1.2 (0.3-4.4)	4.6 (2.6-7.9)	4.5 (3.3-6.2)	
West	†	†	2.4 (1.4-4.3)	4.2 (2.0-8.6)	5.0 (3.0-8.3)	7.0 (5.2-9.4)	4.9 (3.7-6.4)	
East	†	1.0 (0.3-3.1)	1.4 (0.3-6.7)	1.7 (0.3-9.6)	4.7 (2.4-8.8)	4.6 (2.5-8.4)	2.6 (1.8-3.9)	

Notes: (1) † estimate suppressed or less than 0.5%; (2) entries in brackets are 95% confidence intervals; (3) based on a random half sample in each year from 1991 to 1999.

Q. In the **last 12 months**, how often did you use MDMA or “ecstasy”?

Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year Use of GHB

(Table 3.6.15; Figure 3.6.21)

2003: Grades 7 to 12

- Among all students, 0.7% report using GHB during the past year. This estimate represents about 6,500 students in Ontario.
- No significant difference in GHB use is evident between males (0.8%) and females (0.6%).
- Although GHB use varies among the grades (ranging from less than 1% to 1.7%), these differences are not statistically significant.
- There are no significant regional differences in GHB use.

2003 vs 2001: Grades 7 to 12

- Between 2001 and 2003, GHB use remained stable among all students (1.3% vs 0.7%).

Past Year Use of Rohypnol

(Table 3.6.15; Figure 3.6.22)

2003: Grades 7 to 12

- 1.6% of students report using Rohypnol during the past 12 months. This represents about 15,300 Ontario students.
- There is no significant sex difference in Rohypnol use (1.7% of males, and 1.5% of females).
- Although Rohypnol use varies among the grades (ranging from 1.2% to 2.3%), these differences are not statistically significant.
- There is no significant regional difference, although there is a range from 0.9% (Toronto) to 3.5% (North).

2003 vs 2001: Grades 7 to 12

- Between 2001 and 2003, Rohypnol use remained stable among all students (3.1% vs 1.6%).

Figure 3.6.21
Past Year GHB Use by Sex, Grade, and Region,
OSDUS 2003

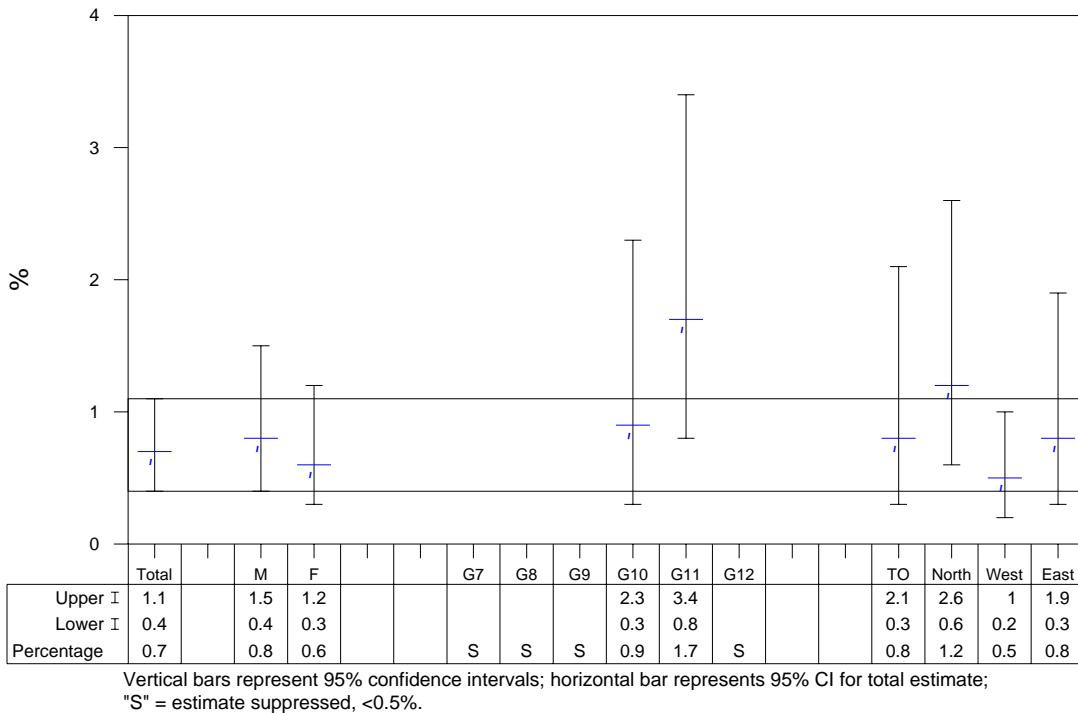


Figure 3.6.22
Past Year Rohypnol Use by Sex, Grade, and Region,
OSDUS 2003

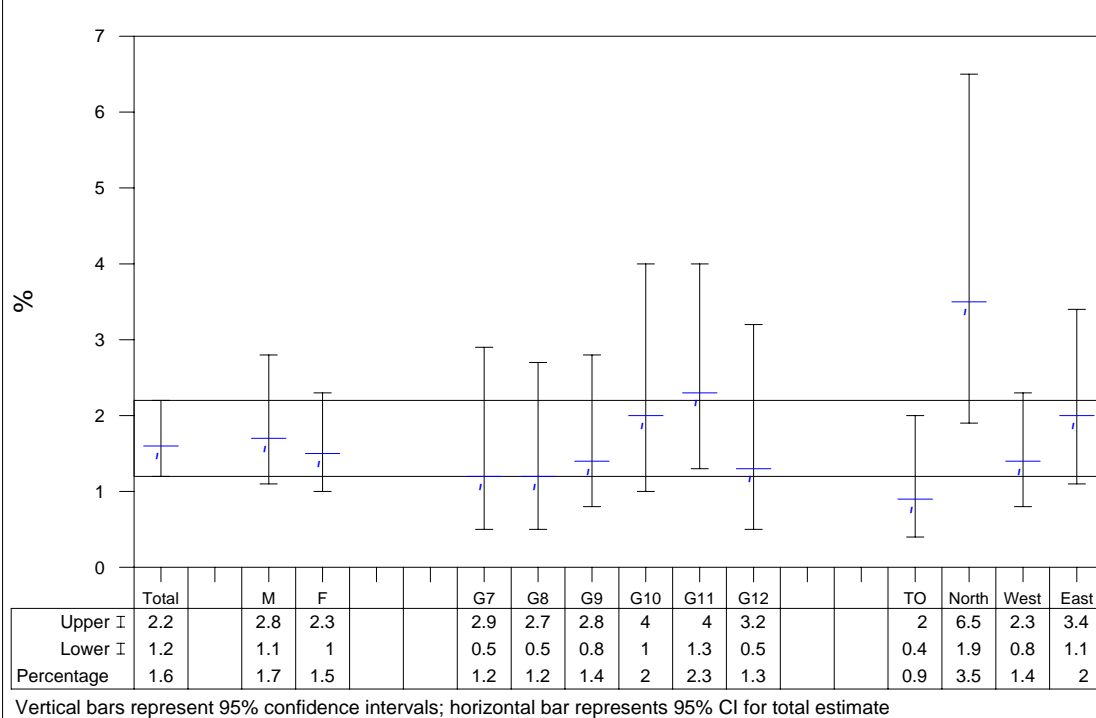


Table 3.6.15: Percentage Reporting *GHB* Use and *Rohypnol* Use During the Past Year, 2001 – 2003, Grades 7 to 12

		<i>GHB</i>		<i>Rohypnol</i>	
(N)		2001 (1837)	2003 (3152)	2001 (1837)	2003 (3152)
Total		1.3	0.7	3.1	1.6
(95% CI)		(0.8-2.1)	(0.4-1.1)	(2.0-4.8)	(1.2-2.2)
Sex	Male	1.8	0.8	3.5	1.7
		(1.0-3.4)	(0.4-1.5)	(1.6-7.3)	(1.1-2.8)
	Female	0.7	0.6	2.7	1.5
		(0.3-1.5)	(0.3-1.2)	(1.6-4.7)	(1.0-2.3)
Grade	7	0.6	†	1.6	1.2
		(0.2-2.5)		(0.6-4.4)	(0.5-2.9)
	8	†	†	2.6	1.2
				(1.0-6.5)	(0.5-2.7)
	9	1.2	†	5.2	1.4
		(0.4-3.3)		(3.4-7.9)	(0.8-2.8)
	10	3.6	0.9	3.0	2.0
		(1.7-7.1)	(0.3-2.3)	(1.3-6.9)	(1.0-4.0)
	11	†	1.7	1.2	2.3
			(0.8-3.4)	(0.4-3.5)	(1.3-4.0)
	12	1.2	†	5.4	1.3
		(0.3-3.8)		(1.3-19.9)	(0.5-3.2)
Region	Toronto	1.6	0.8	2.9	0.9
		(0.6-4.2)	(0.3-2.1)	(1.6-5.1)	(0.4-2.0)
	North	0.7	1.2	1.6	3.5
		(0.2-2.0)	(0.6-2.6)	(0.6-4.1)	(1.9-6.5)
	West	1.5	0.5	4.2	1.4
		(0.7-3.1)	(0.2-1.0)	(2.1-8.1)	(0.8-2.3)
	East	0.9	0.8	2.0	2.0
		(0.3-2.3)	(0.3-1.9)	(0.9-4.5)	(1.1-3.4)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) based on a random half sample in each year; (4) no significant differences between 2001 and 2003.

Q: In the **last 12 months**, how often did you use **GHB** (also known as “G”, “goop”, “grevious bodily harm”, “liquid ecstasy”)?

Q: In the **last 12 months**, how often did you use **Rohypnol** (also known as “roach”, “roofies”)?

Source: *OSDUS*, Centre for Addiction & Mental Health

Past Year Use of Ketamine

(Table 3.6.16; Figure 3.6.23)

For the first time, the 2003 *OSDUS* asked about use of Ketamine in the past year.

2003: Grades 7 to 12

- Among all students surveyed in 2003, 2.2% reported using Ketamine in the past 12 months. This represents about 21,200 Ontario students.
- Significantly more males use Ketamine than females (3.0% vs 1.6%).
- There is a significant grade association: generally Ketamine use increases with grade, peaking in 11th-grade (4.7%).
- There is no significant association with region.

Past Year Non-Medical Use of Ritalin (Methylphenidate)

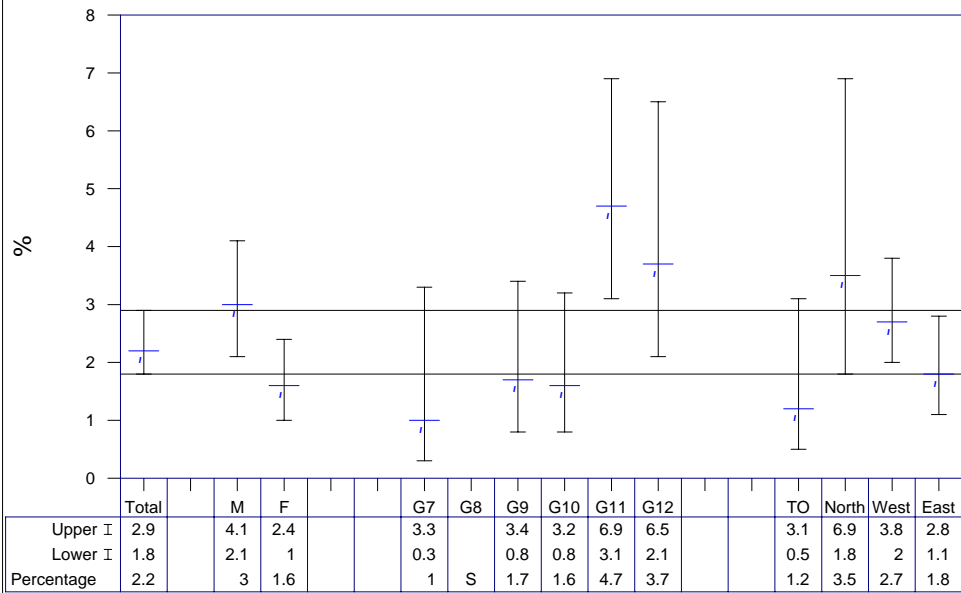
(Table 3.6.16; Figure 3.6.24)

Ritalin (methylphenidate) is a stimulant, similar to amphetamines, that is primarily used to treat Attention Deficit/Hyperactivity Disorder (ADHD). However, some people use Ritalin recreationally for its stimulant effects: appetite suppression, wakefulness, increased focus, and euphoria. For the first time, the 2003 *OSDUS* asked students about non-medical use of Ritalin.

2003: Grades 7 to 12

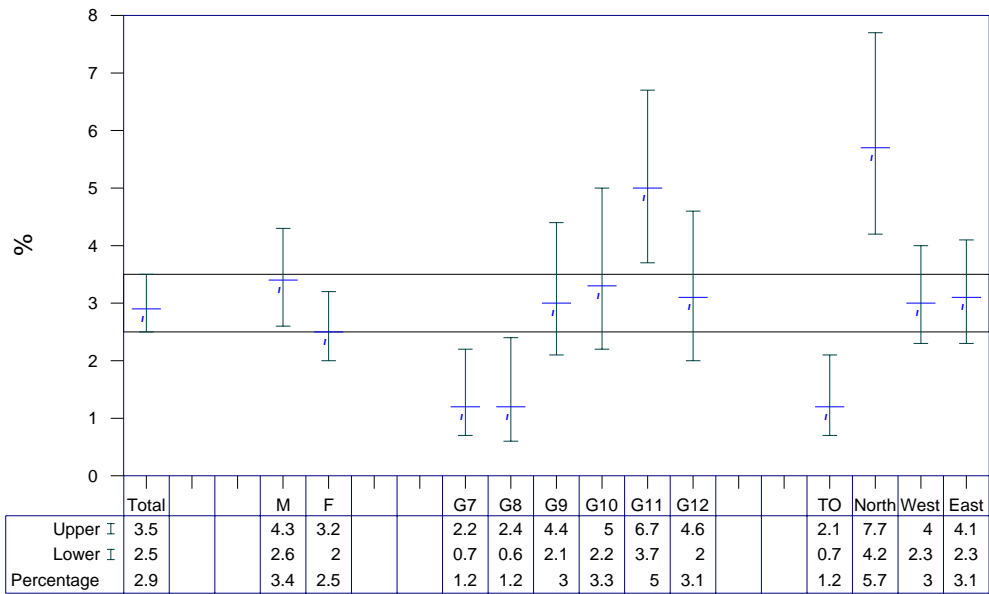
- Among all students surveyed in 2003, 2.9% reported using Ritalin without a prescription in the past 12 months. This represents about 28,100 Ontario students.
- There is no significant difference between males (3.4%) and females (2.5%).
- Non-medical Ritalin use significantly increases with grade, from about 1% of 7th- and 8th-graders up to 5% of 11th-graders.
- Regional estimates significantly differ, with students in the North (5.7%) showing the highest rate of Ritalin use and Toronto (1.2%) showing the lowest.

Figure 3.6.23
Past Year Ketamine Use by Sex, Grade and Region,
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate
 "S" = estimate suppressed, <0.5%

Figure 3.6.24
Past Year Non-Medical Ritalin Use by Sex, Grade and
Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Table 3.6.16: Percentage Reporting *Ketamine Use* and *Non-Medical Ritalin Use* During the Past Year, 2003, Grades 7 to 12

		(N)	Ketamine (3152)	Ritalin (3152)
Total			2.2	2.9
(95% CI)			(1.8-2.9)	(2.5-3.5)
Sex	Male		3.0	3.4
			(2.1-4.1)	(2.6-4.3)
	Female		1.6	2.5
			(1.0-2.4)	(2.0-3.2)
Grade	7		1.0	1.2
			(0.3-3.3)	(0.7-2.2)
	8		†	1.2
				(0.6-2.4)
	9		1.7	3.0
			(0.8-3.2)	(2.1-4.4)
	10		1.6	3.3
			(0.8-3.2)	(2.2-5.0)
	11		4.7	5.0
			(3.1-6.9)	(3.7-6.7)
	12		3.7	3.1
			(2.1-6.5)	(2.0-4.6)
Region	Toronto		1.2	1.2
			(0.5-3.1)	(0.7-2.1)
	North		3.5	5.7
			(1.8-6.9)	(4.1-7.7)
	West		2.7	3.0
			(2.0-3.8)	(2.3-4.0)
	East		1.8	3.1
			(1.1-2.8)	(2.3-4.1)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) based on a random half sample.

Q: In the **last 12 months**, how often did you use the drug **Ketamine** (also known as “special K”)?

Q: In the last 12 months, how often did you use **Ritalin without a prescription** or without a doctor telling you to take it?

Source: *OSDUS*, Centre for Addiction & Mental Health

Lifetime Use of Steroids

(Tables 3.6.17a, 3.6.17b)

In 1989, we began asking students whether they had ever used steroids (e.g., body builders, testosterone, androgens, durabolin, growth hormones) to enhance their athletic performance or to change their physical appearance

2003: Grades 7 to 12

- In 2003, 3.0% of students in grades 7 to 12 report ever using steroids to increase performance or change their physical appearance.
- As in previous surveys, males are significantly more likely than females to use steroids (4.4% vs 1.7%).
- Steroid use significantly increases with grade, from less than 1% of 7th-graders up to 5.3% of 12th-graders.
- There are no significant differences in steroid use by region.

1999 – 2003: Grades 7 to 12

- There was no significant change in steroid use between 1999 (3.4%) and 2003 (3.0%), nor are there changes among the subgroups.

1989 – 2003: Grades 7, 9, 11

- For most of the past decade, rates of steroid use have remained under 2% among the total sample of students in grades 7, 9, and 11.
- However, among 11th-graders, steroid use has significantly increased between 1989 (1.8%) and 2003 (4.6%).

Table 3.6.17a: Percentage Reporting *Steroid Use* in Lifetime, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(4447)	(3898)	(3152)
		(N)		
Total		3.4	3.8	3.0
(95% CI)		(2.7-4.2)	(3.0-4.8)	(2.4-3.7)
Sex				
	Male	5.4	5.4	4.4
		(4.2-6.9)	(4.0-7.3)	(3.5-5.6)
	Female	1.3	2.2	1.7
		(0.9-1.8)	(1.6-3.0)	(1.1-2.7)
Grade				
	7	1.4	2.1	0.7
		(0.8-2.5)	(1.3-3.4)	(0.3-1.8)
	8	1.5	2.7	1.8
		(0.8-3.1)	(1.3-5.4)	(0.8-4.4)
	9	1.7	2.7	1.6
		(0.8-3.8)	(1.4-5.1)	(0.9-2.9)
	10	2.9	3.1	3.8
		(1.8-4.7)	(2.0-4.8)	(2.4-6.1)
	11	6.2	5.6	4.6
		(4.2-9.1)	(3.4-9.1)	(3.2-6.6)
	12	6.9	9.1	5.3
		(4.9-9.7)	(5.7-14.3)	(3.4-8.0)
Region				
	Toronto	3.6	3.8	2.3
		(2.2-5.9)	(2.6-5.5)	(1.2-4.4)
	North	4.4	4.0	3.8
		(2.4-7.8)	(2.8-5.7)	(2.5-5.6)
	West	3.3	4.1	2.7
		(2.2-4.8)	(2.9-5.6)	(1.9-3.7)
	East	3.0	3.4	3.9
		(2.1-4.4)	(1.9-5.9)	(2.7-5.6)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003; (3) based on a random half sample in 2003.

Q: Have you ever used **steroids**, body builders (e.g. testosterone and other androgens, durabolin, growth hormones, etc.) to increase your performance in some sport or activity and/or to change your physical appearance?

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.6.17b: Percentage Reporting *Steroid Use* in Lifetime, 1989 – 2003, Grades 7, 9, 11 only

	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(1618)
Total	1.3	1.7	1.6	1.4	1.4	3.1	3.4	2.4
(95% CI)	(0.9-1.8)	(1.4-2.1)	(1.1-2.4)	(1.0-2.0)	(1.0-2.0)	(2.2-4.3)	(2.4-4.6)	(1.8-3.3)
Sex								
Male	2.4	3.0	2.4	1.8	2.3	5.1	4.6	4.1
	(1.7-3.6)	(2.3-3.8)	(1.7-3.3)	(1.1-2.9)	(1.5-3.4)	(3.5-7.3)	(3.1-6.7)	(2.8-5.8)
Female	†	0.3	0.8	1.0	0.6	1.2	2.1	0.9
		(0.1-0.9)	(0.4-2.0)	(0.6-1.7)	(0.3-1.1)	(0.7-1.9)	(1.3-3.4)	(0.4-1.6)
Grade								
7	0.7	1.2	1.0	1.2	1.0	1.4	2.1	0.7
	(0.3-1.4)	(1.0-1.3)	(0.4-2.5)	(0.5-3.0)	(0.8-1.4)	(0.8-2.5)	(1.3-3.4)	(0.3-1.8)
9	1.3	1.8	0.9	1.4	1.2	1.7	2.7	1.6
	(0.6-2.9)	(1.2-2.5)	(0.3-2.6)	(1.3-1.6)	(0.5-2.7)	(0.8-3.8)	(1.4-5.1)	(0.9-2.9)
11	1.8	2.1	2.8	1.5	1.8	6.2	5.6	4.6
	(1.2-2.8)	(1.5-3.1)	(1.8-4.2)	(0.7-3.0)	(1.1-3.1)	(4.2-9.1)	(3.4-9.1)	(3.2-6.6)
Region								
Toronto	0.6	2.2	0.8	0.7	1.6	4.0	2.9	1.6
	(0.1-2.9)	(1.8-2.8)	(0.2-2.8)	(0.2-1.9)	(0.8-3.2)	(2.0-7.9)	(1.8-4.5)	(0.5-5.0)
North	2.3	2.5	2.1	1.3	0.8	2.3	3.3	2.5
	(0.9-5.7)	(1.1-5.4)	(0.4-10.8)	(0.2-7.0)	(0.7-0.8)	(1.0-5.2)	(2.0-5.4)	(1.3-4.7)
West	1.3	2.1	2.1	1.6	1.4	2.9	3.5	1.9
	(0.9-1.8)	(1.5-2.8)	(1.3-3.4)	(1.0-2.6)	(0.8-2.6)	(1.6-5.2)	(2.0-5.9)	(1.0-3.4)
East	1.3	0.6	1.4	1.6	1.3	3.0	3.6	3.8
	(0.4-3.5)	(0.4-1.0)	(0.8-2.3)	(0.9-2.9)	(0.7-2.4)	(1.8-4.9)	(1.7-7.5)	(2.6-5.5)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or less than 0.5%; (3) based on a random half sample in 2003.

Q: Have you **ever used steroids**, body builders (e.g. testosterone and other androgens, durabolin, growth hormones, etc.) to increase your performance in some sport or activity and/or to change your physical appearance?

Source: *OSDUS*, Centre for Addiction & Mental Health

Any Illicit Drug Use

(Tables 3.6.18a – 3.6.19b; Figures 3.6.25 - 3.6.28)

Two estimates of any illicit drug use in the past year are reported. The first measures use of any drug out of 11 drugs that are common to all *OSDUS* surveys: cannabis, barbiturates, heroin, methamphetamine, stimulants, tranquilizers, LSD, PCP, other hallucinogens, cocaine, and crack. Because crack use was not asked about before the 1987 survey, and PCP use was not asked in 1977 or 1979, these two drugs are excluded from the computation for those years. The drugs excluded in this measure for all years are: glue, solvents, prescription drugs, ice, GHB, Rohypnol, Ketamine, and Ritalin.

The second measure of any illicit drug use is similar to the first, but also excludes cannabis.

2003: Grades 7 to 12

■ One-third (32.2%) of students report use of at least one illicit drug in the past year. This estimate represents about 312,300 Ontario students. When cannabis is excluded from the analysis, this estimate becomes 15.3% (148,800 students).

■ There is a significant sex difference for any illicit drug use excluding cannabis (16.6% of males vs. 14.2% of females).

■ There is a significant grade association with illicit drug use including cannabis, ranging from a low of 10.1% among 7th-graders, peaking to 47% among 11th- and 12th-graders. When cannabis is excluded from the estimate, the range is from 6.6% among

7th-graders to a high of 22% among 11th- and 12th-graders.

■ Although Toronto students show the lowest use of illicit drugs, including and excluding cannabis, these regional differences are not statistically significant.

1999 – 2003: Grades 7 to 12

□ Significant short-term changes are evident for any illicit drug use excluding cannabis. Among all students, the 2003 estimate (15.3%) is significantly lower than in 2001 (18.1%) and 1999 (20.5%).

□ Compared to 1999, any illicit drug use excluding cannabis significantly declined in 2003 among the following subgroups:

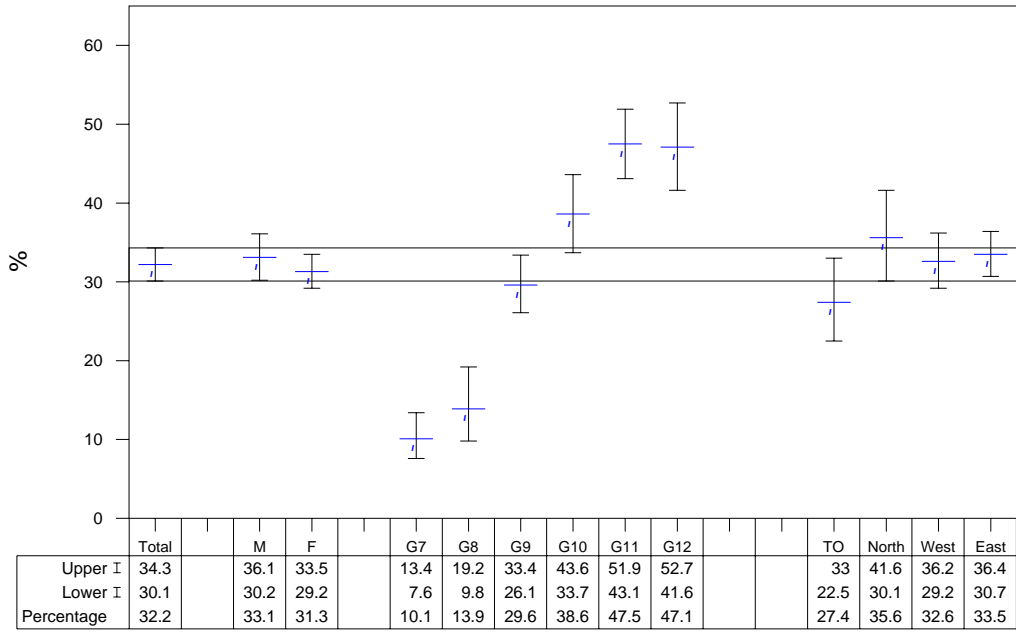
- males (21.5% vs 16.6%),
- females (19.5% vs 14.2%),
- 8th-graders (13.0% vs 8.0%),
- 9th-graders (19.0% vs 13.0%),
- 10th-graders (27.2% vs 18.0%),
- 11th-graders (29.7% vs 21.7%),
- the West (22.5% vs 16.2%), and
- the East (20.0% vs 15.4%).

1977 – 2003: Grades 7, 9, 11

□ Any illicit drug use including cannabis began to decline during the 1980s after peaking in 1979. Rates increased again after 1991, when the rate reached an all-time low. The current level parallels those found in the late 1990s. This pattern is evident for all subgroups.

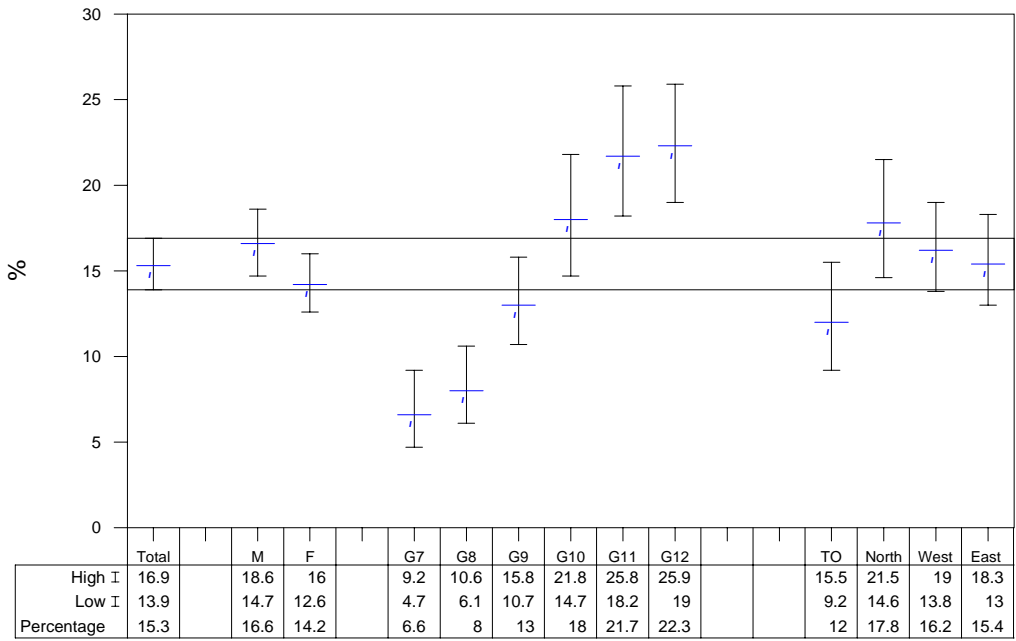
□ The same general pattern holds true for any illicit drug use excluding cannabis, but the current rate is lower than those found in 1997 and 1999.

Figure 3.6.25
Percentage Reporting Any Illicit Drug Use (includes Cannabis)
by Sex, Grade, and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate; this illicit drug estimate is based on 11 drugs.

Figure 3.6.26
Percentage Reporting Any Illicit Drug Use (excludes Cannabis),
by Sex, Grade, and Region, OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate; this illicit drug estimate is based on 10 drugs.

Table 3.6.18a: Percentage Reporting *Any Illicit Drug Use Including Cannabis* (excludes inhalants, club drugs, prescription drugs) During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (2299)	2001 (2061)	2003 (6616)
Total			32.3	32.5	32.2
	(95% CI)		(30.2-34.4)	(29.8-35.3)	(30.1-34.3)
Sex	Male		35.4	35.5	33.1
			(32.7-38.1)	(31.6-39.6)	(30.2-36.1)
	Female		29.1	29.5	31.3
			(26.2-32.2)	(26.8-32.4)	(29.2-33.5)
Grade	7		9.1	10.0	10.1
			(6.7-12.1)	(7.6-13.0)	(7.6-13.4)
	8		19.8	17.2	13.9
			(16.2-24.0)	(14.2-20.7)	(9.8-19.2)
	9		29.4	32.4	29.6
			(25.3-34.0)	(28.2-36.9)	(26.1-33.4)
	10		40.5	42.5	38.6
			(35.1-46.1)	(38.7-46.4)	(33.7-43.6)
	11		51.0	48.6	47.5
			(45.8-56.2)	(40.7-56.6)	(43.1-51.9)
	12		44.5	46.1	47.1
			(38.6-50.6)	(35.0-57.6)	(41.6-52.7)
Region	Toronto		23.0	25.0	27.4
			(19.8-26.5)	(17.9-33.9)	(22.5-33.0)
	North		37.6	32.3	35.6
			(31.0-44.7)	(27.0-38.1)	(30.1-41.6)
	West		35.4	36.1	32.6
			(31.8-39.0)	(32.2-40.2)	(29.2-36.2)
	East		31.9	32.3	33.5
			(28.5-35.6)	(28.3-36.5)	(30.7-36.4)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003; (3) 11 drugs included in all years are: cannabis, barbiturates, heroin, methamphetamine, stimulants, tranquilizers, LSD, PCP, hallucinogens, cocaine, and crack (excluded are glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin).

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.6.19a: Percentage Reporting *Any Illicit Drug Use Excluding Cannabis* (excludes cannabis, inhalants, club drugs, prescription drugs) During the Past Year, 1999 – 2003, Grades 7 to 12

		(N)	1999 (2299)	2001 (2061)	2003 (6616)
Total			20.5	18.1	15.3^{ab}
(95% CI)			(18.8-22.4)	(16.6-19.7)	(13.9-16.9)
Sex	Male		21.5	19.2	16.6^b
			(19.2-24.0)	(17.0-21.5)	(14.7-18.6)
	Female		19.5	17.1	14.2^b
			(17.1-22.1)	(15.1-19.3)	(12.6-16.0)
Grade	7		7.3	6.8	6.6
			(5.2-10.0)	(5.2-9.0)	(4.7-9.2)
	8		13.0	10.7	8.0^b
			(9.8-17.0)	(8.6-13.3)	(6.1-10.6)
	9		19.0	16.6	13.0^b
			(15.7-22.8)	(14.0-20.0)	(10.7-15.8)
	10		27.2	23.9	18.0^b
			(22.8-32.2)	(20.5-27.7)	(14.7-21.8)
	11		29.7	26.6	21.7^b
			(24.5-35.6)	(21.5-32.3)	(18.2-25.8)
	12		27.8	25.4	22.3
			(23.6-32.5)	(18.4-33.8)	(19.0-25.9)
Region	Toronto		14.7	12.2	12.0
			(12.2-17.6)	(10.0-14.8)	(9.2-15.5)
	North		24.7	19.2	17.8^b
			(20.1-30.0)	(15.3-23.8)	(14.6-21.5)
	West		22.5	21.1	16.2^b
			(19.3-26.0)	(18.6-23.9)	(13.8-19.0)
	East		20.0	17.3	15.4^b
			(17.4-22.9)	(14.6-20.4)	(13.0-18.3)

Notes: (1) entries in brackets are 95% confidence intervals; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; (3) ^b 2003 vs. 1999 significant difference, $p < .01$; (4) 10 drugs included in all years are: barbiturates, heroin, methamphetamine, stimulants, tranquilizers, LSD, PCP, hallucinogens, cocaine, and crack (excluded are cannabis, glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin).

Source: *OSDUS*, Centre for Addiction & Mental Health

Figure 3.6.27

Percentage Reporting Any Illicit Drug Use Including Cannabis (excludes inhalants, club drugs, prescription drugs) During the Past Year, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

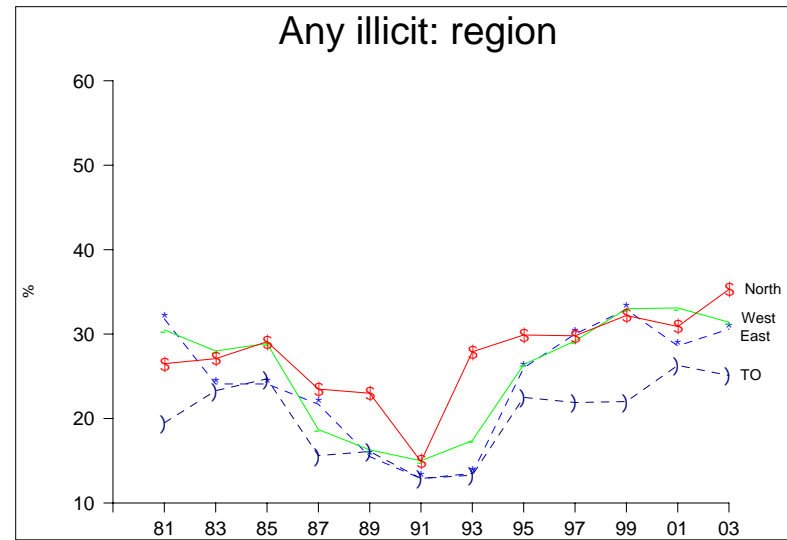
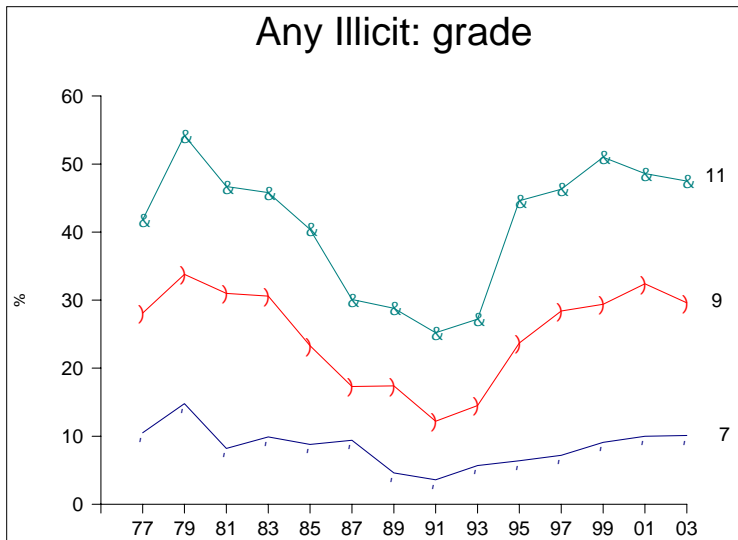
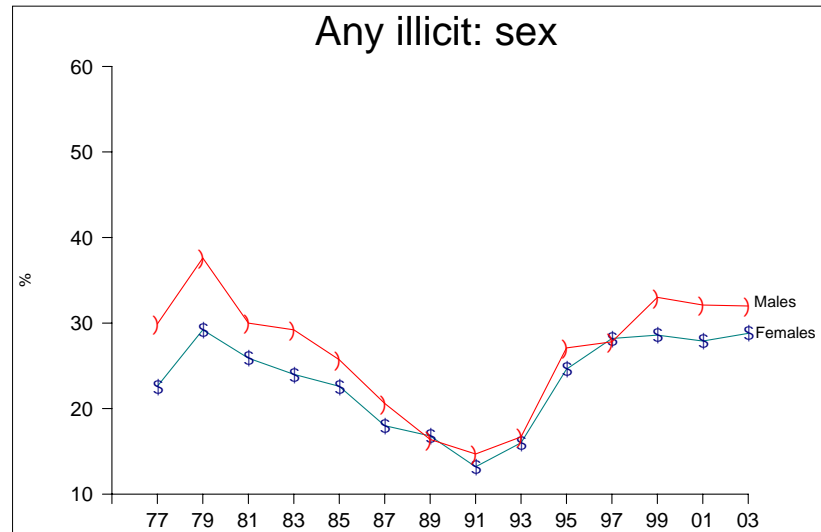
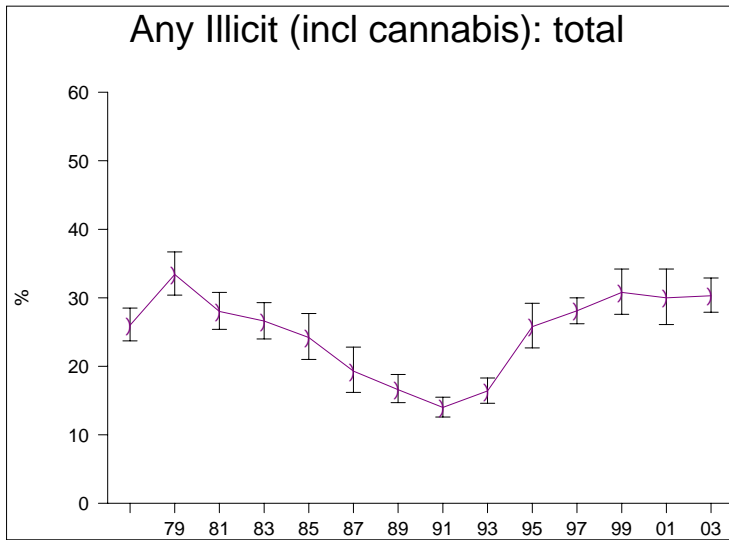


Figure 3.6.28

Percentage Reporting *Any Illicit Drug Use Excluding Cannabis* (excludes cannabis, inhalants, club drugs, prescription drugs) During the Past Year, OSDUS 1977 – 2003 (Grades 7, 9, 11 only)

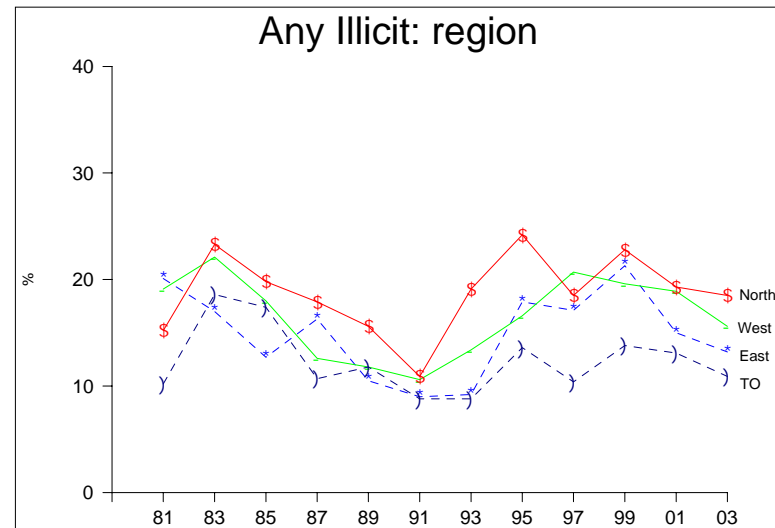
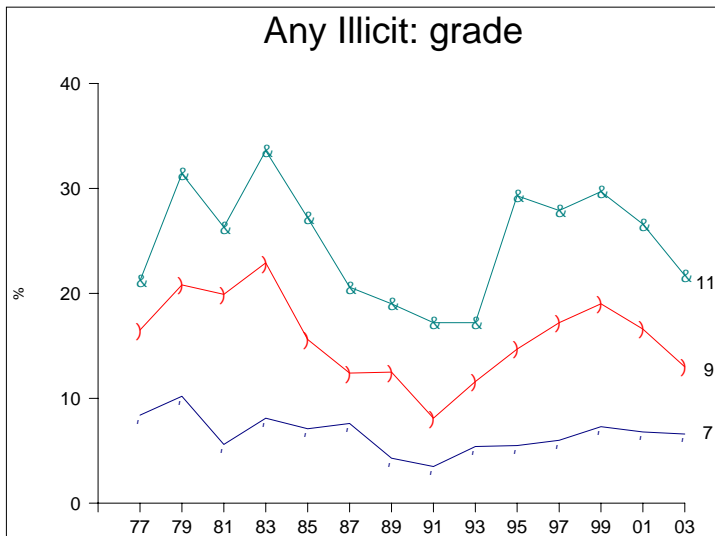
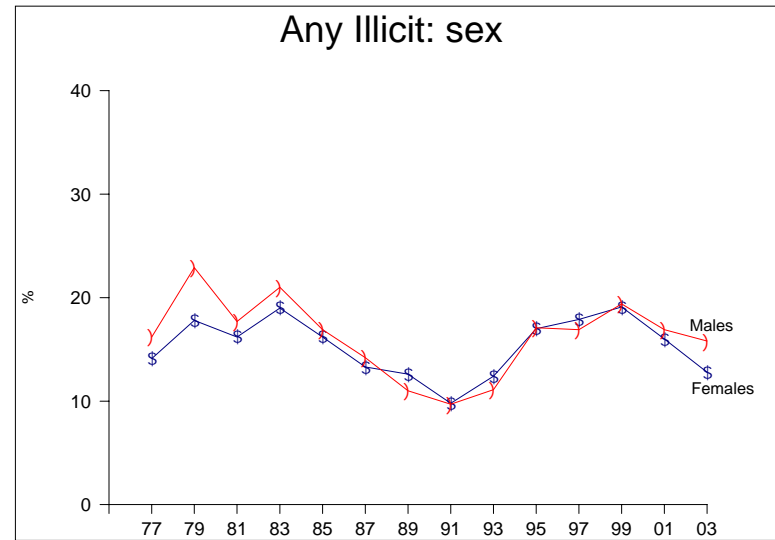
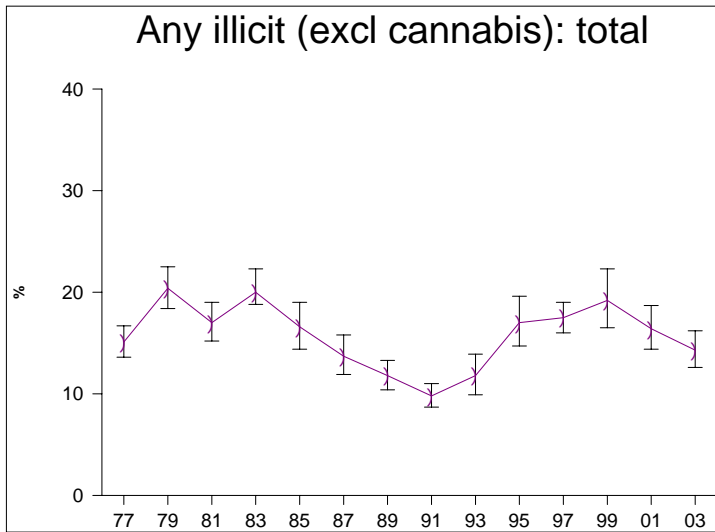


Table 3.6.18b: Percentage Reporting *Any Illicit Drug Use Including Cannabis* (excludes inhalants, club drugs, prescription drugs) During the Past Year, 1977 – 2003, Grades, 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	26.0	33.4	28.0	26.6	24.2	19.3	16.6	14.0	16.4	25.8	28.1	30.8	30.0	30.3
(95% CI)	(23.7-28.5)	(30.4-36.7)	(25.4-30.8)	(24.0-29.3)	(21.0-27.7)	(16.2-22.8)	(14.7-18.8)	(12.6-15.5)	(14.6-18.3)	(22.7-29.2)	(26.2-30.0)	(27.6-34.2)	(26.1-34.2)	(27.9-32.9)
Sex														
Male	29.9	37.6	30.0	29.2	25.7	20.6	16.4	14.7	16.7	27.1	27.8	33.0	32.1	32.0
	(27.0-33.1)	(33.8-41.5)	(27.7-32.3)	(26.2-32.5)	(21.9-29.9)	(16.8-25.0)	(14.2-18.9)	(13.3-16.2)	(12.9-21.3)	(24.0-30.4)	(25.5-30.4)	(29.6-36.6)	(27.2-37.5)	(28.3-35.9)
Female	22.6	29.2	25.9	24.0	22.6	18.0	16.8	13.2	16.0	24.6	28.2	28.6	27.9	28.8
	(19.8-25.6)	(25.8-32.8)	(21.4-31.0)	(21.5-26.7)	(18.8-26.8)	(15.3-21.1)	(13.7-20.5)	(11.3-15.2)	(13.3-19.2)	(20.7-28.9)	(26.4-30.1)	(24.3-33.3)	(23.7-32.5)	(26.3-31.4)
Grade														
7	10.5	14.8	8.2	9.9	8.8	9.4	4.6	3.6	5.7	6.4	7.2	9.1	10.0	10.1
	(8.5-12.8)	(12.7-17.3)	(7.4-9.1)	(6.6-14.6)	(5.8-13.0)	(7.2-12.0)	(3.7-5.6)	(1.9-6.6)	(4.0-7.9)	(4.8-8.6)	(4.0-12.8)	(6.7-12.1)	(7.6-13.0)	(7.6-13.4)
9	28.1	33.8	31.0	30.6	23.3	17.3	17.4	12.2	14.5	23.7	28.4	29.4	32.4	29.6
	(24.1-32.4)	(28.6-39.5)	(28.1-34.0)	(27.4-34.0)	(18.3-29.3)	(10.6-27.2)	(14.1-21.3)	(11.0-13.6)	(12.6-16.6)	(18.0-30.7)	(25.7-31.3)	(25.3-34.0)	(28.2-36.9)	(26.1-33.4)
11	41.8	54.2	46.7	45.8	40.4	30.1	28.8	25.2	27.2	44.6	46.3	51.0	48.6	47.5
	(37.0-46.7)	(48.1-60.1)	(39.8-53.7)	(40.5-51.3)	(33.6-47.6)	(25.1-35.7)	(24.7-33.2)	(22.1-28.6)	(22.6-32.4)	(38.2-51.2)	(43.7-49.0)	(45.8-56.2)	(40.7-56.6)	(43.1-51.9)
Region														
Toronto	—	—	19.5	24.7	23.8	15.6	16.1	12.9	13.3	22.5	21.9	22.0	26.3	25.1
			(14.8-25.2)	(18.6-31.9)	(19.0-29.4)	(9.5-24.4)	(10.2-24.4)	(11.9-14.0)	(10.4-16.8)	(14.6-33.2)	(19.6-24.4)	(18.8-25.6)	(16.3-39.5)	(19.0-32.5)
North	—	—	26.5	29.1	27.9	23.5	23.0	14.9	27.9	29.9	29.8	32.2	30.9	35.3
			(20.2-33.8)	(24.8-33.8)	(23.8-32.4)	(16.1-32.8)	(18.0-29.0)	(7.6-27.2)	(18.6-39.7)	(25.6-34.6)	(27.1-32.6)	(21.2-45.6)	(22.7-40.5)	(29.4-41.7)
West	—	—	30.5	28.9	25.9	18.7	16.3	15.0	17.4	26.4	29.2	33.0	33.1	31.4
			(25.9-35.5)	(23.9-34.6)	(20.8-31.6)	(13.7-25.0)	(13.7-19.2)	(13.1-17.0)	(14.6-20.5)	(21.5-32.0)	(25.7-33.0)	(27.0-39.5)	(28.5-38.1)	(27.8-35.4)
East	—	—	31.8	24.1	20.5	21.7	15.5	12.9	13.5	26.0	30.0	32.9	28.6	30.6
			(27.1-36.8)	(22.5-25.8)	(13.6-29.7)	(17.5-26.4)	(12.3-19.3)	(10.0-16.6)	(11.0-16.4)	(21.6-30.9)	(27.1-33.0)	(28.0-38.3)	(21.9-36.5)	(26.8-34.6)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) 11 drugs included in all years are: cannabis, barbiturates, heroin, methamphetamine, stimulants, tranquilizers, LSD, PCP (except 1977 and 1979), hallucinogens, cocaine, and crack (except before 1987); excluded in all years are glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin.

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.6.19b: Percentage Reporting *Any Illicit Drug Use Excluding Cannabis* (excludes cannabis, inhalants, club drugs, prescription drugs) During the Past Year, 1977 – 2003, Grades 7, 9, 11 only

	1977	1979	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3927)	(3920)	(3010)	(3614)	(3146)	(3376)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(2013)	(3389)
Total	15.1	20.4	17.0	20.0	16.6	13.7	11.8	9.8	11.8	17.0	17.5	19.2	16.4	14.3
(95% CI)	(13.6-16.7)	(18.4-22.5)	(15.2-19.0)	(17.8-22.3)	(14.4-19.0)	(11.9-15.8)	(10.4-13.3)	(8.7-11.0)	(9.9-13.9)	(14.7-19.6)	(16.0-19.0)	(16.5-22.3)	(14.4-18.7)	(12.6-16.2)
Sex														
Male	16.2	22.9	17.7	21.0	16.9	14.2	11.0	9.7	11.1	17.1	16.9	19.4	16.9	15.8
	(14.2-18.4)	(20.5-25.5)	(16.5-19.0)	(18.5-23.7)	(14.2-20.0)	(11.3-17.6)	(8.6-13.8)	(8.5-11.1)	(8.6-14.3)	(15.2-19.1)	(15.0-19.0)	(16.3-22.9)	(14.2-20.0)	(13.2-18.8)
Female	14.1	17.8	16.2	19.0	16.2	13.3	12.6	9.8	12.4	17.0	17.9	19.1	16.0	12.8
	(12.2-16.3)	(15.5-20.3)	(13.2-19.7)	(16.4-21.8)	(13.6-19.2)	(11.7-15.1)	(10.1-15.6)	(8.1-11.8)	(10.0-15.3)	(14.0-20.4)	(16.1-19.9)	(15.5-23.3)	(13.0-19.4)	(11.0-14.9)
Grade														
7	8.4	10.2	5.6	8.1	7.1	7.6	4.3	3.5	5.4	5.5	6.0	7.3	6.8	6.6
	(6.8-10.4)	(8.5-12.2)	(5.2-5.9)	(5.6-11.7)	(4.5-11.1)	(6.2-9.3)	(3.6-5.2)	(1.9-6.2)	(3.9-7.5)	(4.3-6.9)	(3.4-10.6)	(5.2-10.0)	(5.2-9.0)	(4.7-9.2)
9	16.5	20.8	19.9	22.9	15.6	12.4	12.5	8.1	11.6	14.7	17.2	19.0	16.6	13.0
	(13.9-19.4)	(17.8-24.2)	(17.6-22.3)	(21.1-24.7)	(12.7-19.0)	(8.5-17.8)	(10.1-15.4)	(7.6-8.6)	(9.2-14.6)	(10.6-20.1)	(14.5-20.3)	(15.7-22.8)	(14.0-20.0)	(10.7-15.8)
11	21.2	31.4	26.3	33.6	27.2	20.6	19.0	17.2	17.2	29.3	27.9	29.7	26.6	21.7
	(17.9-24.9)	(26.7-36.5)	(22.2-30.8)	(28.2-39.4)	(22.6-32.3)	(16.7-25.0)	(16.5-21.7)	(14.9-19.7)	(12.8-22.7)	(24.7-34.3)	(27.0-28.8)	(24.5-35.6)	(21.5-32.3)	(18.2-25.8)
Region														
Toronto	—	—	10.2	18.6	17.4	10.7	11.8	8.8	8.8	13.6	10.4	13.8	13.1	10.9
			(6.0-16.8)	(13.2-25.7)	(13.2-22.5)	(6.7-16.8)	(9.2-15.0)	(7.2-10.6)	(5.0-15.1)	(7.8-22.5)	(8.4-12.9)	(11.0-17.1)	(10.5-16.2)	(7.6-15.4)
North	—	—	15.2	23.3	19.8	17.9	15.6	10.9	19.1	24.2	18.5	22.8	19.3	18.5
			(10.7-21.1)	(20.9-26.0)	(14.1-27.2)	(12.4-25.1)	(9.8-23.9)	(5.2-21.5)	(12.8-27.7)	(14.5-37.5)	(15.8-21.6)	(14.8-33.5)	(13.8-26.3)	(15.0-22.6)
West	—	—	19.1	22.1	18.0	12.6	11.8	10.6	13.4	16.6	20.7	19.6	18.9	15.6
			(16.3-22.3)	(18.7-25.8)	(13.8-23.2)	(10.5-15.2)	(10.0-14.0)	(9.2-12.1)	(11.1-16.1)	(13.7-20.1)	(18.1-23.7)	(14.6-25.7)	(15.4-23.1)	(13.0-18.7)
East	—	—	20.1	17.0	12.7	16.3	10.5	9.0	9.2	17.9	17.1	21.3	15.0	13.2
			(17.6-22.9)	(13.6-21.4)	(11.0-14.6)	(12.4-21.3)	(8.2-13.4)	(7.0-11.4)	(5.8-14.2)	(14.9-21.2)	(14.7-19.8)	(17.0-26.5)	(11.0-20.1)	(10.2-16.9)

Notes: (1) regional stratification differed in 1977 and 1979 and therefore regions are not presented; (2) entries in brackets are 95% confidence intervals; (3) 10 drugs included in all years are: barbiturates, heroin, methamphetamine, stimulants, tranquilizers, LSD, PCP (except 1977 and 1979), hallucinogens, cocaine, and crack (except before 1987); excluded in all years are cannabis, glue, solvents, ecstasy, ice, GHB, Rohypnol, Ketamine, non-medical Ritalin.

Source: OSDUS, Centre for Addiction & Mental Health

Multiple Drug Use in 2003: Alcohol, Tobacco, Cannabis, and Other Drugs

(Figure 3.6.29)

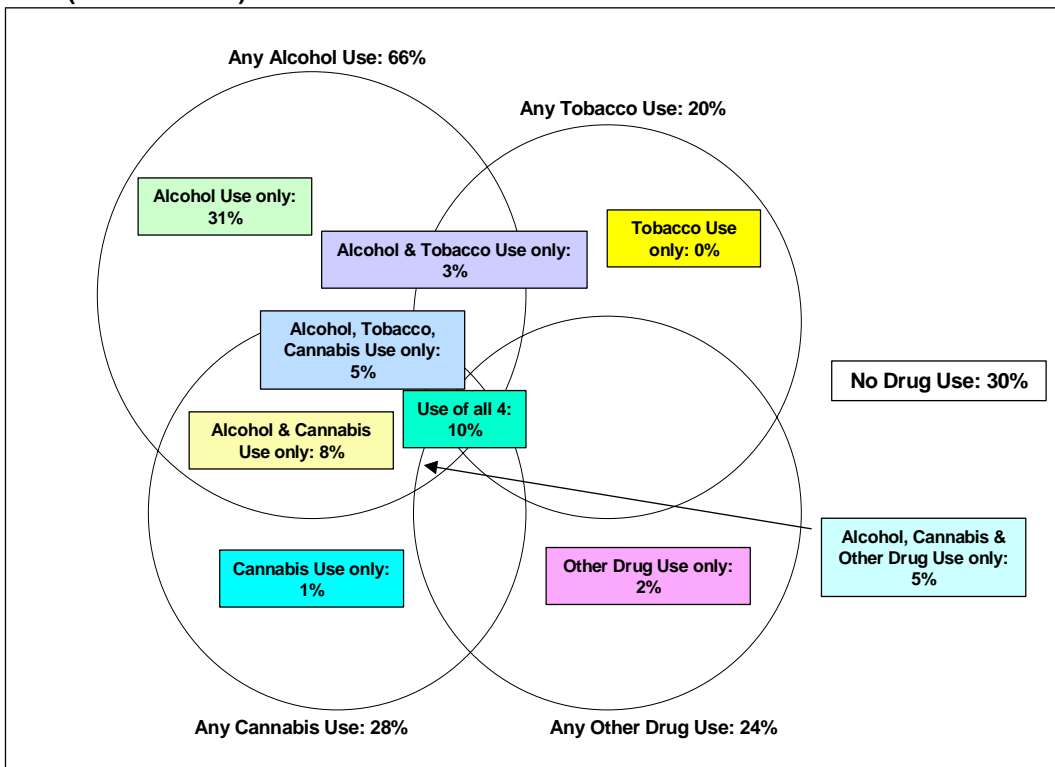
2003: Grades 7 to 12

- In 2003, just under one-third (30%) of students in grades 7 through 12 report *no drug use* during the past year. About the same proportion (31%) reports using only alcohol. A very small proportion uses cannabis exclusively (about 1%), virtually no students smoke cigarettes exclusively, and 2% use any other illicit drug exclusively.

- From the diagram below, it appears that alcohol use is a common element of other substance use. This is not surprising, given the ubiquity of alcohol use among students.

- One-in-ten (10%) students report using alcohol, tobacco, cannabis, *and* at least one other illicit drug in the past year.

Figure 3.6.29
The Overlap of Alcohol, Tobacco, Cannabis, and Other Drug Use in the Past Year, OSDUS 2003 (Grades 7 to 12)



Note: based on a random half sample (N=3152)

Drug Use Patterns

(Tables 3.6.20a, 3.6.20b; Figure 3.6.30)

2003: Grades 7 to 12

- In 2003, 30% of all students in grades 7 through 12 report *no drug use* during the past year. Almost the same percentage (31%) report using only alcohol, and 9% use alcohol and cannabis only. About 6% only use alcohol, tobacco, and cannabis.

1999 – 2003: Grades 7 to 12

- Between 1999 and 2003, there was no significant change in the percentage of students reporting *no drug use* (about 30% in each year).

- There has been an increase in the percentage using alcohol, tobacco, and cannabis only (from 4.2% in 1999 to 9.1% in 2003).

1979 – 2003: Grades 7, 9, 11

- The peak period of drug use was in the late 1970s, as only 22.8% of students in grade 7, 9, and 11 reported no drug use of any type, while 4.3% reported use of all six drug types (vs. only 1.9% in 2003).

- Figure 3.6.30 shows the long-term changes in the number of drug types (out of 6) used in the past year since 1977 for students in grades 7, 9, and 11 only. The number of drug types used was highest in 1979 (average of 1.8 types) and declined in 1991 (average of 1). Between 1991 and 1999 there was a significant upward trend, which has since stabilized.

**Table 3.6.20a: Drug Use Patterns* in the Past Year, 1999 – 2003,
Grades 7 to 12**

	(N)	1999 (4447)	2001 (3898)	2003 (6616)
No Drug Use		29.0	31.6	30.0
Alcohol only		27.4	28.0	31.0
Tobacco only		1.2	0.7	0.4
Alcohol + Tobacco only		5.6	3.4	3.3
Cannabis only		0.6	0.5	0.8
Alcohol + Cannabis only		4.2	6.4	9.1
Tobacco + Cannabis only		†	†	0.2
Alcohol + Tobacco + Cannabis only		6.2	6.2	5.7
Stimulant use only		0.5	†	†
Alcohol + Stimulant only		0.5	0.5	0.6
Alcohol + Tobacco + Cannabis + Stimulant only		0.8	1.1	0.9
Hallucinogen use only		--	--	--
Alcohol + Tobacco + Cannabis + Hallucinogen only		4.2	2.9	2.6
Alcohol + Tobacco + Cannabis + Stimulant + Hallucinogen only		2.7	3.0	2.2
Other Illicit Drug use only		2.2	2.0	2.0
All 6 Categories		3.1	1.9	1.7
Other combinations not listed		11.6	11.1	9.3

Notes: * not necessarily use on the same occasion
 (1) **Stimulant** use includes any one of the following: cocaine, crack, speed, stimulant pills; (2) **Hallucinogen** use includes any one of the following: LSD, PCP, other hallucinogens (e.g., magic mushrooms); (3) **Other Illicit Drug** use includes any one of the following: barbiturates, tranquilizers, heroin, glue, solvents; (4) † estimate suppressed, less than 0.5%.

Source: OSDUS, Centre for Addiction & Mental Health

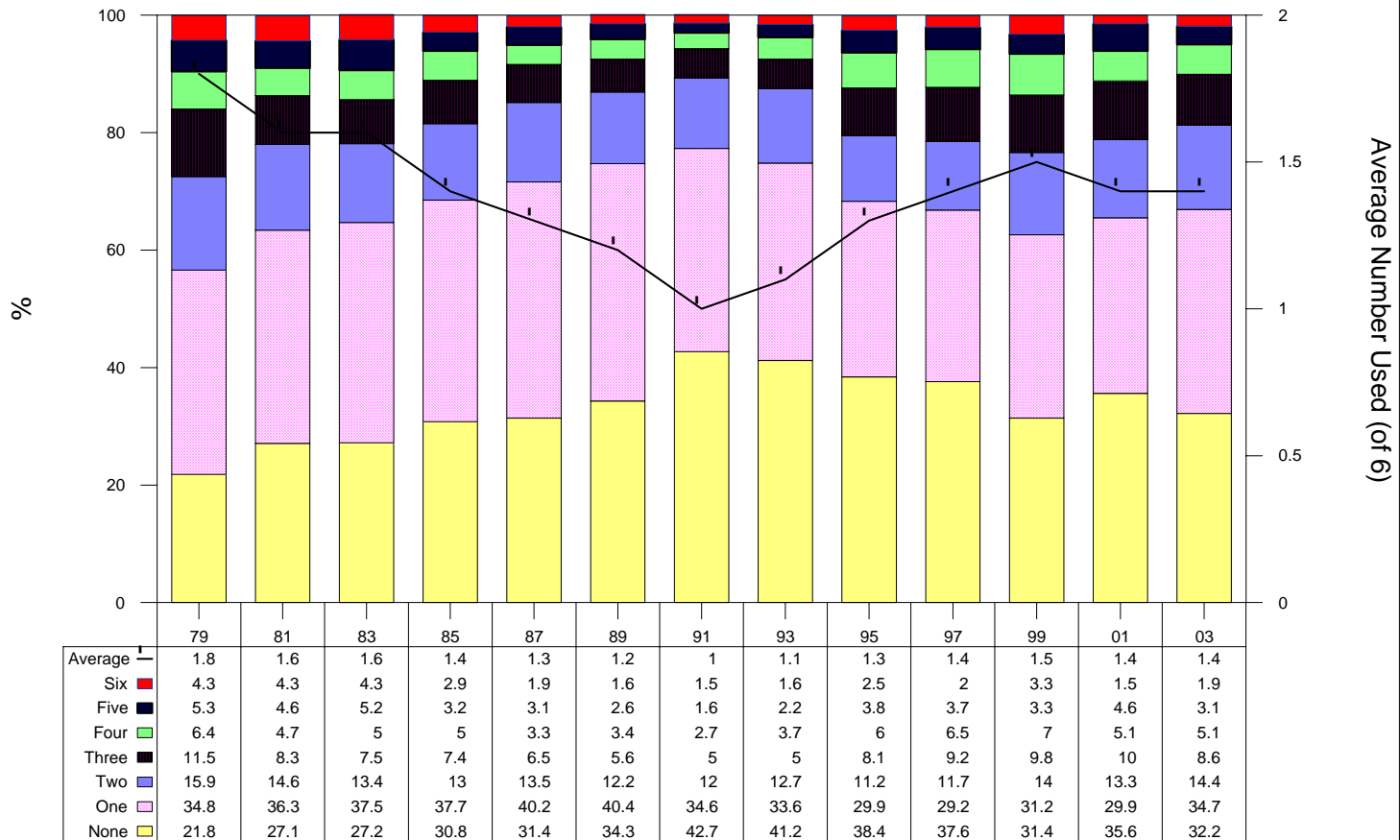
Table 3.6.20b: Drug Use Patterns* in the Past Year, 1979 – 2003, Grades 7, 9, 11 only

	1979 (N) (3920)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
No Drug Use	22.8	43.2	41.6	39.4	38.0	32.2	36.2	32.6
Alcohol only	30.7	31.6	29.3	25.1	24.7	25.9	25.6	30.5
Tobacco only	1.8	1.4	2.5	2.4	2.1	1.0	†	0.5
Alcohol + Tobacco only	8.4	8.8	8.8	5.7	5.6	5.1	3.6	2.6
Cannabis only	†	†	†	0.5	†	0.5	0.6	0.7
Alcohol + Cannabis only	3.5	1.0	1.1	2.1	3.2	4.3	5.7	8.7
Tobacco + Cannabis only	†	†	†	0.6	†	†	†	0.2
Alcohol + Tobacco + Cannabis only	7.4	2.9	2.8	5.0	6.3	5.9	6.0	5.4
Stimulant use only	†	†	†	0.5	†	0.6	0.5	0.2
Alcohol + Stimulant only	0.6	0.6	0.8	0.5	0.5	0.5	0.5	0.6
Alc + Tob + Can + Stimulant only	1.6	0.5	0.5	0.8	1.3	0.6	0.8	0.7
Hallucinogen use only	†	--	--	--	--	--	--	--
Alc + Tob + Can + Hallucinogen only	1.2	1.4	1.6	3.3	4.1	4.0	2.5	2.4
Alc + Tob + Can + Stimulant + Hallucinogen only	1.4	0.9	0.9	2.5	2.5	2.1	3.0	1.9
Other Illicit Drug use only	1.0	0.9	1.0	0.6	1.2	2.6	2.4	2.6
All 6 Categories	4.3	1.5	1.6	2.5	2.0	3.3	1.5	1.9
Other combinations not listed	14.2	4.7	6.7	8.5	7.4	11.2	10.3	8.5

Notes: * not necessarily use on the same occasion
 (1) **Stimulant** use includes any one of the following: cocaine, crack, speed, stimulant pills (no crack question in 1979); (2) **Hallucinogen** use includes any one of the following: LSD, PCP, other hallucinogens (e.g., magic mushrooms) (no PCP question in 1979); (3) **Other Illicit Drug** use includes any one of the following: barbiturates, tranquilizers, heroin, glue, solvents; (4) † estimate suppressed, less than 0.5%.

Source: OSDUS, Centre for Addiction & Mental Health

Figure 3.6.30
Number of Drug Types Used in the Past Year (Grades 7, 9, 11 only), OSDUS 1979 - 2003



6 Drug Types: Alcohol, Tobacco, Cannabis, Stimulants (4), Hallucinogens (3), Other Illicit Drugs (5)

3.7 New Users and Early Onset

Incidence: New Users

(Tables 3.7.1, 3.7.2)

2003: Grades 7 to 12

The 2003 survey asked students whether they used certain substances for the first time during the past 12 months. We evaluated the incidence of four substances – alcohol, cigarettes, cannabis, and illicit drugs other than cannabis. We also compared these results to those from past surveys.

- Among the total sample, 9.3% smoked cigarettes for the first time during the last 12 months; 19.4% drank alcohol for the first time; 10.4% used cannabis; and 5.1% used another illicit drug for the first time (data not tabled).
- Among smokers, 22.1% smoked for the first time during the past 12 months; among drinkers, 21.2% drank for the first time; and among cannabis users, almost one-third (31.9%) used the drug for the first time in the past year.
- First use does not vary significantly by sex or region; however, grade level is significantly associated. Notably, between 8th- and 9th-grades, there is a jump in first use of tobacco (from 8.1% to 12.3%), and for cannabis (from 5.4% to 13.1%).

1999 – 2003: Grades 7 to 12

- Between 1999 and 2003, there was no significant change in the percentage of new users of tobacco, alcohol, or cannabis.

Table 3.7.1: Percentage Reporting *First Drug Use* During the Past Year, Grades 7 to 12, 2003

	Percentage of Total Sample			Percentage of Past Year Users		
	Tobacco	Alcohol	Cannabis	Tobacco	Alcohol	Cannabis
Total (95% CI)	9.3 (8.4-10.3)	19.4 (18.1-20.8)	10.4 (9.6-11.2)	22.1 (19.8-24.5)	21.2 (19.4-23.0)	31.9 (29.6-34.4)
Sex						
Male	8.1	20.4	10.8	20.4	22.6	31.6
Female	10.5	18.4	10.0	23.4	19.7	32.3
Grade						
7	5.8	21.4	3.2	†	30.0	†
8	8.1	21.7	5.4	35.4	25.8	34.8
9	12.3	23.4	13.1	35.0	28.3	44.1
10	9.8	20.4	14.8	19.7	20.9	38.9
11	10.6	16.1	12.8	18.8	16.9	26.8
12	8.2	13.5	10.4	15.2	13.4	21.2
Region						
Toronto	7.3	19.7	8.5	21.1	24.3	31.4
North	9.8	22.2	13.2	22.2	23.8	37.8
West	9.2	18.4	9.8	21.1	19.1	29.2
East	10.6	19.9	11.6	24.1	21.7	34.5

Notes: (1) † estimate suppressed or less than 0.5%; (2) entries in brackets are 95% confidence intervals.
 Q: During the **last 12 months**, have you smoked one whole cigarette for the very first time?
 During the **last 12 months**, have you tried alcohol (beer, wine or liquor) for the very first time?
 During the **last 12 months**, have you tried cannabis (marijuana or hashish) for the very first time?
 Source: OSDUS, Centre for Addiction & Mental Health

Table 3.7.2: Percentage of Users Reporting *First Drug Use* During the Past Year, 1999 – 2003, Grades 7 to 12

	Tobacco			Alcohol			Cannabis			
	(N)	1999 (1217)	2001 (851)	2003 (1273)	1999 (2892)	2001 (2465)	2003 (4421)	1999 (1177)	2001 (1027)	2003 (1960)
Total % of <i>Past Year Users</i> (95% CI)		19.8 (16.9-23.1)	24.4 (20.5-28.7)	22.1 (19.8-24.5)	21.5 (19.4-23.7)	22.1 (19.6-24.7)	21.1 (19.4-23.0)	31.1 (27.7-34.8)	33.1 (29.4-37.1)	31.9 (29.6-34.4)
Sex										
Male		19.1	23.0	20.4	21.7	23.8	22.6	29.4	31.3	31.6
Female		20.6	25.7	23.4	21.3	20.4	19.7	33.4	35.5	32.3
Grade										
7		†	†	†	29.0	31.0	30.0	†	†	†
8		23.2	36.3	35.4	28.3	31.4	25.8	45.2	43.7	34.8
9		30.8	32.0	35.0	30.7	26.7	28.3	52.4	49.5	44.1
10		16.4	22.1	19.7	18.9	21.1	20.9	27.3	29.9	38.9
11		14.9	19.0	18.8	13.6	15.5	16.9	23.0	23.7	26.8
12		11.3	14.6	15.2	14.2	11.8	13.4	18.6	22.1	21.2
Region										
Toronto		28.0	38.3	21.1	28.2	24.7	24.3	34.0	42.2	31.4
North		18.8	26.5	22.2	17.1	19.8	23.8	31.4	31.0	37.8
West		17.9	18.0	21.1	20.3	19.2	19.1	28.3	31.7	29.2
East		19.7	27.7	24.1	21.3	26.0	21.7	34.2	31.8	34.5

Notes: (1) † estimate suppressed or less than 0.5%; (2) no significant differences between 1999 and 2003 among total percentages.

Q. During the **last 12 months**, have you smoked **one whole cigarette** for the very first time?
 During the **last 12 months**, have you **tried alcohol** (beer, wine or liquor) for the very first time?
 During the **last 12 months**, have you **tried cannabis** (marijuana or hashish) for the very first time?

Source: *OSDUS*, Centre for Addiction & Mental Health

Early Onset among 7th-Graders, 1981 – 2003

(Figures 3.7.1 - 3.7.3)

One of the most consistent factors associated with future substance problems is the early onset of drug use. Research has shown that those who begin using drugs at an early age are more likely to develop dependence and other problems later on in life (DeWit, Adlaf, Offord, & Osborne, 2000; Fergusson & Horwood, 1997; Hingson, Heeren, Jamanka, & Howland, 2000).

One way of monitoring changes in early onset is to examine onset of drug use among the youngest cohort of students, namely the 7th-graders (ages 12-13). The grade of first drug use among the 7th-graders is profiled in Figures 3.7.1 to 3.7.3 for the years 2003, 2001, 1997, 1993 and 1981.

Tobacco

- There is an evident trend of decreasing early onset of cigarette use, with fewer 7th-graders smoking at an early age. Most notably, under 2% of 7th-graders in 2003 reported smoking their first whole cigarette by grade 4, compared to 5% in 2001, 7% in 1997, 8% in 1993, and 16% in 1981.

Alcohol

- Early onset of alcohol use appears to be decreasing over time: fewer 7th-graders in 2003 used alcohol by grade 6 compared to two decades ago (42% vs 50% in 1981).

Cannabis

- The early onset of cannabis use – defined as using for the first time before the end of grade 6 (age 11) – appears to have increased over time. About 5% of 7th-graders in 2003 reported using cannabis before the end of grade 6. This is significantly higher than the proportion found in 1993 (1%), but not from the proportion in 2001 (2%). It is not significantly lower than the proportion found in 1981 (7%).

Drug Use Trends among 7th-Graders, 1977 – 2003

(Figures 3.7.4 – 3.7.6)

Another means of assessing potential future trends on adolescent drug use is to closely monitor trends among the 7th-graders (12-13 year olds), the youngest students in our sample.

An overview of these data shows the following:

- The general upswing in drug use during the 1990s is evident among the 7th-graders, with the exception of smoking. Increases are evident for alcohol, cannabis, glue, solvents and use of any illicit drug (excluding cannabis).

- Over the long-term, the prevalence of most drugs is generally lower in 2003 compared to the late 1970s (the peak years of use). The exception may be cocaine, which has been increasing in recent years among 7th-graders, reaching the level of the late 1970s.

Figure 3.7.1
Grade of First Use of Tobacco, among All 7th-Graders, by Year of Survey, OSDUS

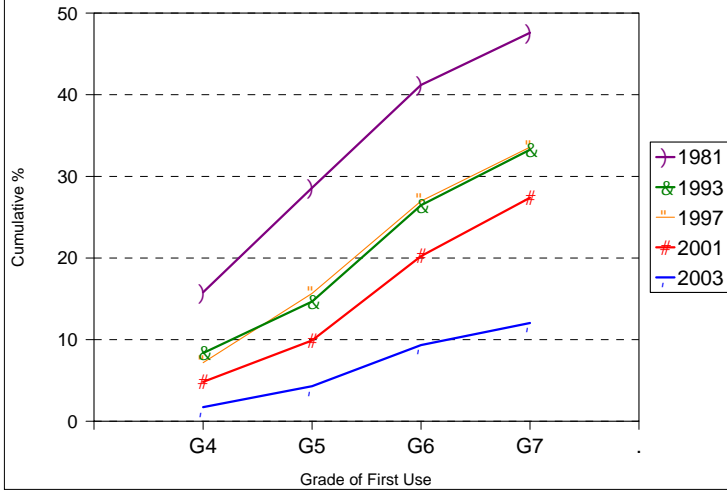


Figure 3.7.2
Grade of First Use of Alcohol, among All 7th-Graders, by Year of Survey, OSDUS

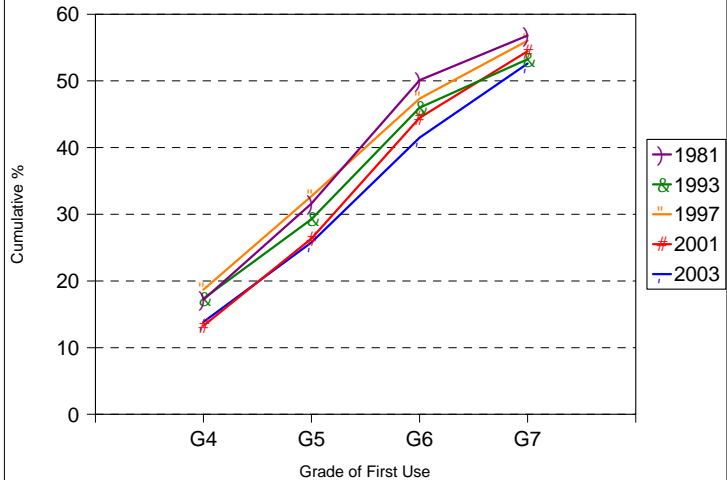
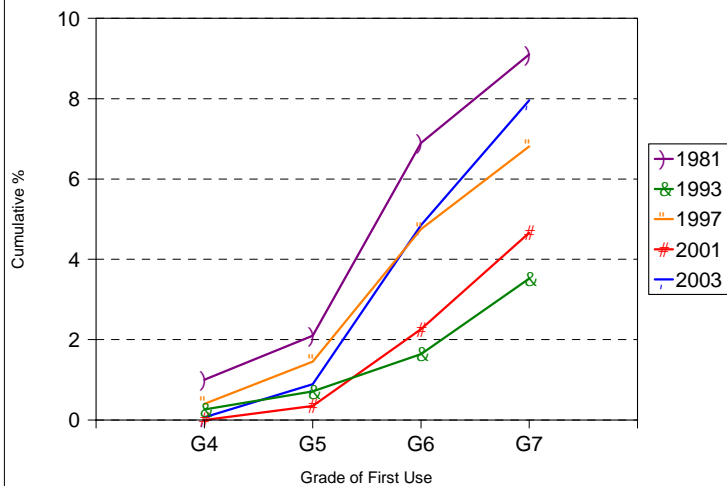
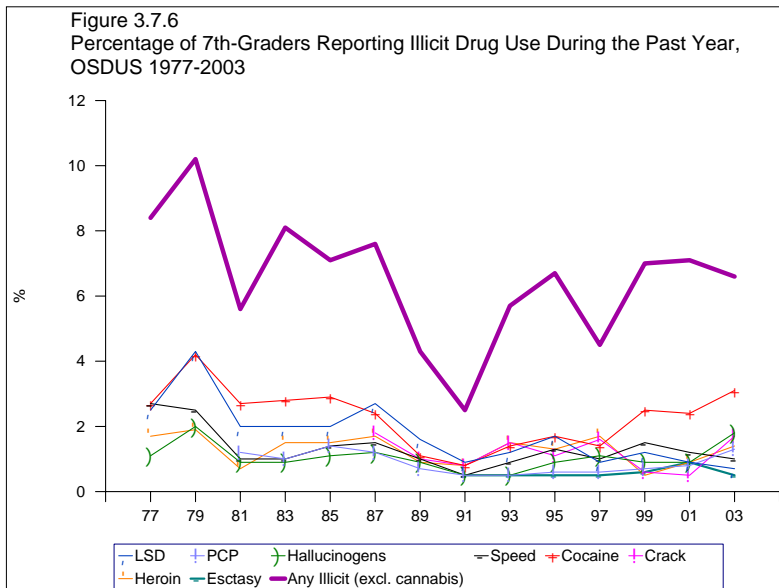
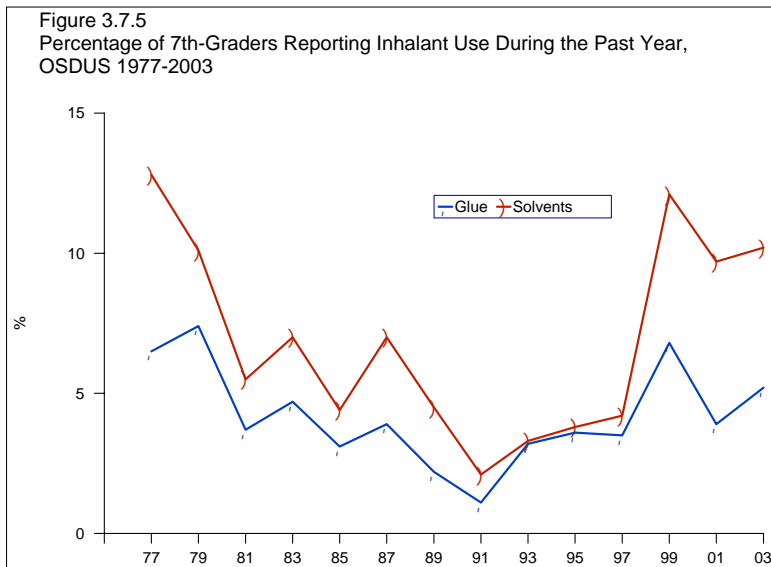
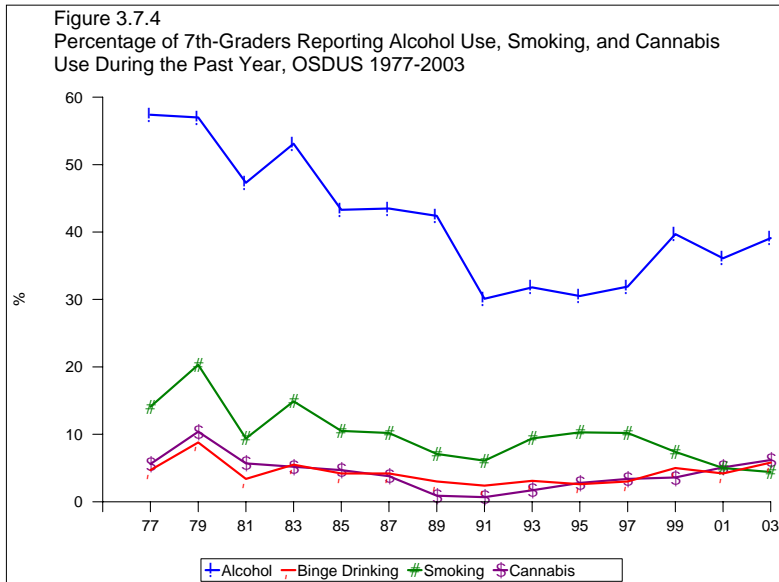


Figure 3.7.3
Grade of First Use of Cannabis, among All 7th-Graders, by Year of Survey, OSDUS





Age of Onset for Smoking, Alcohol Use and Cannabis Use, 1981 – 2003

(Figures 3.7.7 – 3.7.10)

As previously mentioned, early onset of substance use is a risk factor for dependency and other problems later in life. In this section we present the average age of onset for cigarette, alcohol, and cannabis use among grade 11 users. We provide this analysis for the years between 1981 and 2003. We selected grade 11 for two reasons: (1) it was the oldest grade for which we had data that spanned back the furthest, and (2) grade 11 is typically the peak grade of most drug use.

- In 2003, the average age of first use of cigarettes (smoking one whole cigarette) among grade 11 smokers was 13.1 years. The average age of first use of alcohol among grade 11 drinkers was 13.1 years, and the average age of first cannabis use among grade 11 users was 13.7 years.

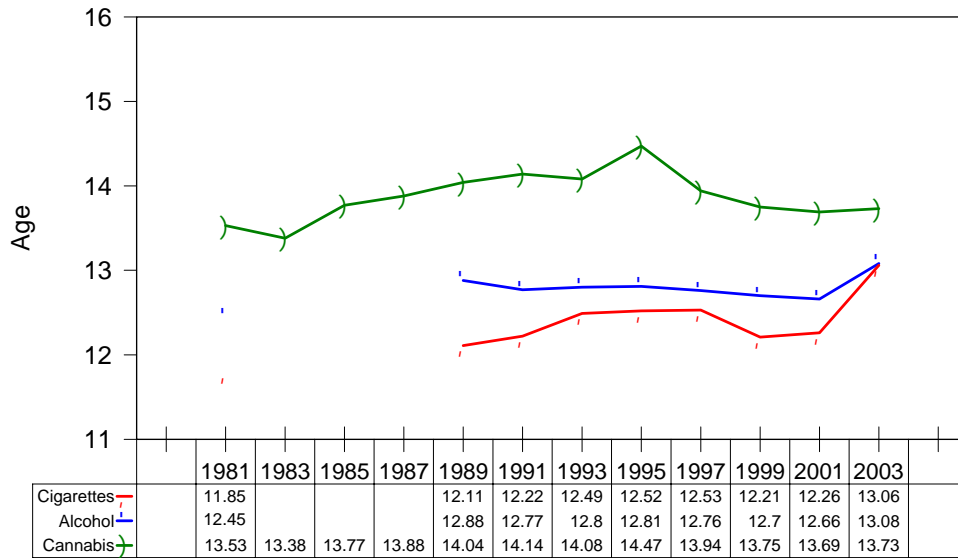
- As seen in Figures 3.7.7 and 3.7.8, the average onset age for smoking appears to have increased between 1981 and 1995, and slightly decreased since then.

- As seen in Figures 3.7.7 and 3.7.9, the average onset age for drinking has not changed very much over the past two decades, hovering around age 13.

- However, the average age of onset for cannabis use appears to have increased during the 1980s and early 1990s, and then decreased again in recent years (see Figures 3.7.3, 3.7.9, and 3.7.10).

- Also notable in Figure 3.7.7, is that the pattern of use of these three substances has been constant since the beginning of the survey. That is, during adolescence, smoking a cigarette typically occurs first, followed by drinking alcohol, and then cannabis use. The exception is in 2003 when cigarette and alcohol use appear to coincide, at about age 13.

Figure 3.7.7
 Mean Age of First Cigarette Use among 11th-Grade Smokers, First Alcohol Use among 11th-Grade Drinkers, and First Cannabis Use among 11th-Grade Users, OSDUS 1981 - 2003



Note: age of first cigarette and alcohol use was not asked between 1983 and 1987

Figure 3.7.8
 Grade of First Whole Cigarette among 11th-Grade Smokers, by Year of Survey, OSDUS

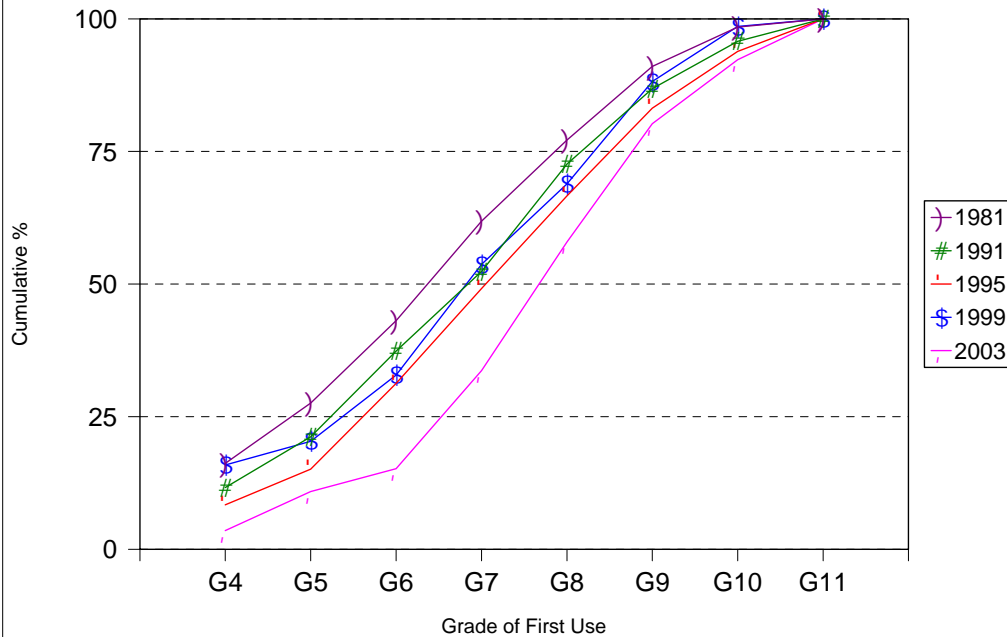


Figure 3.7.9
Grade of First Alcoholic Drink among 11th-Grade Drinkers, by Year of Survey, OSDUS

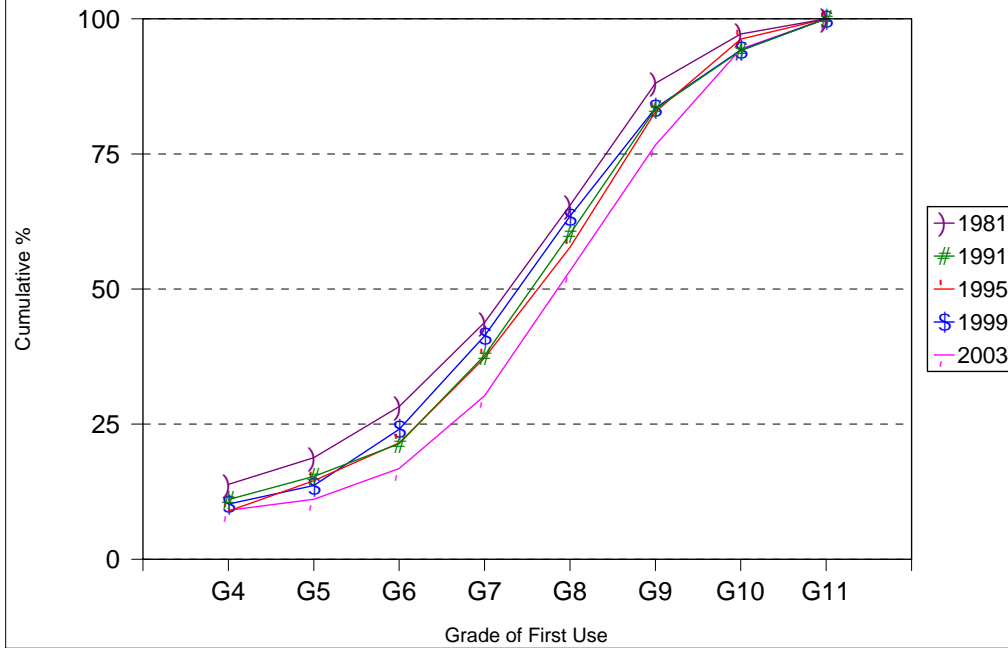
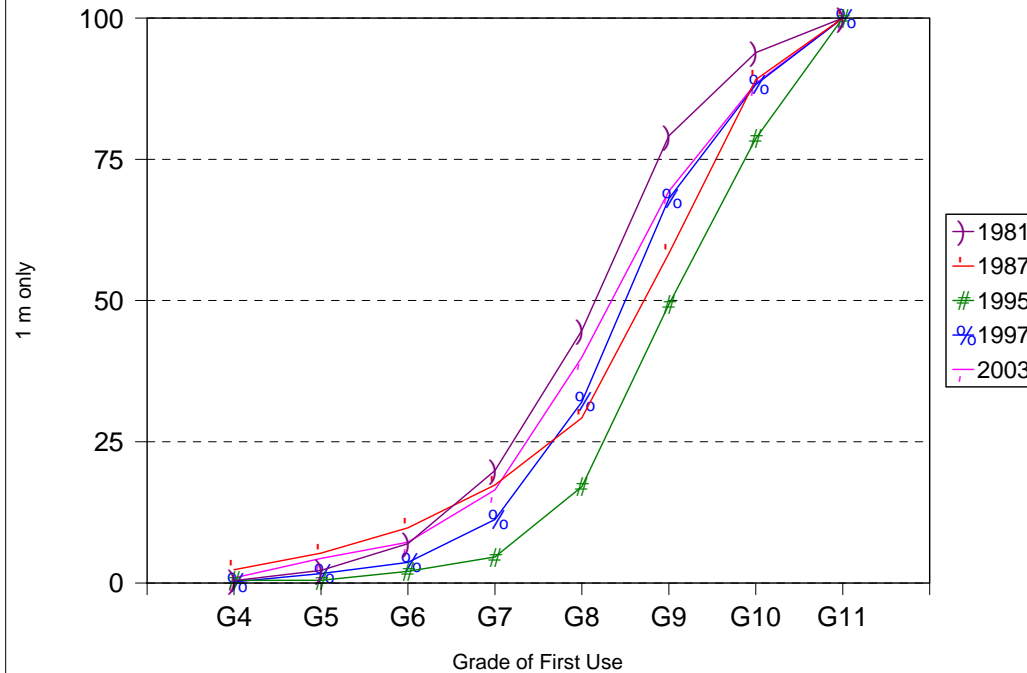


Figure 3.7.10
Grade of First Cannabis Use among 11th-Grade Users, by Year of Survey, OSDUS



3.8 Consequences and Problems Related to Substance Use

Drinking and Driving

(Table 3.8.1; Figure 3.8.1)

2003: Grades 7 to 12

- In 2003, 13.8% of all drivers in grades 10 to 12 drove within an hour after consuming two or more drinks of alcohol during the 12 months before the survey. Among the total sample of students, which includes non-drivers, the drinking and driving rate is 9.3% (7.9%-10.8%).
- Male drivers are more likely than females to drink and drive (19.5% vs 7.8%).
- Although there is variation by grade (from 9.8% of 10th-graders to 16.2% of 12th-graders), these differences are not statistically significant.
- There is no significant regional variation in drinking and driving rates.

1999 – 2003: Grade 10 to 12

- As seen in Table 3.8.1, there is no significant change in the rate of drinking and driving among adolescent drivers between 1999 and 2003.

1977 – 2003: Grade 11 only

- Figure 3.8.1 shows trends in the prevalence and frequency of drinking and driving among grade 11 licensed drivers (including graduated licences). The left axis displays the percentage of drivers reporting various frequencies of drinking-driving. The right axis displays the average number of times the student drank and drove during the past year.

From this figure it can be seen that the rate of drinking and driving among drivers increased non-significantly between 2001 and 2003 (10.7% vs 12.7%). Over the long-term, drinking and driving among 11th-graders has significantly declined since 1977, when it was at an all-time high.

Figure 3.8.1
Driven within an Hour of Drinking Two or More Drinks
(11th-grade Licensed Drivers only), OSDUS 1977 - 2003

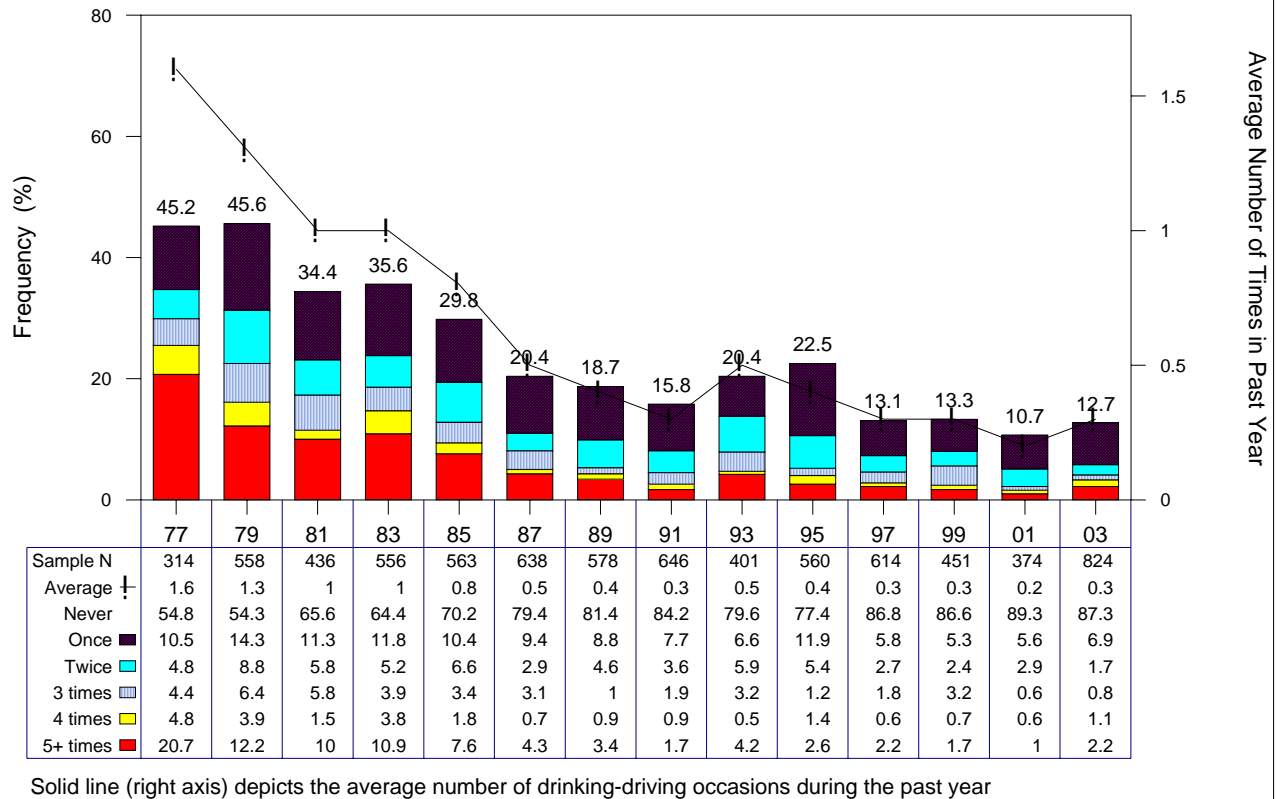


Table 3.8.1: Percentage Reporting *Drinking and Driving* During the Past Year, 1999 – 2003, Grades 10 to 12 with a Driver’s Licence

	(N)	1999 (1009)	2001 (847)	2003 (973)
Total (95% CI)		14.0 (11.1-17.6)	14.2 (11.1-17.9)	13.8 (11.9-16.0)
Sex				
Male		17.6 (14.0-21.8)	19.0 (14.2-25.1)	19.5 (16.5-22.9)
Female		9.8 (6.4-14.7)	7.4 (4.6-11.8)	7.8 (6.0-10.0)
Grade				
10		8.1 (4.0-15.5)	9.8 (4.4-20.6)	9.8 (6.1-15.4)
11		13.4 (9.1-19.4)	10.7 (8.0-14.2)	12.7 (10.3-15.6)
12		16.3 (11.4-22.8)	20.9 (15.4-27.7)	16.2 (13.1-19.8)
Region				
Toronto		7.3 (3.0-16.9)	13.2 (10.7-16.2)	12.4 (8.5-17.9)
North		26.0 (17.3-37.2)	12.5 (9.0-17.0)	16.8 (12.0-23.0)
West		13.6 (9.8-18.6)	18.5 (13.1-25.6)	13.9 (10.6-18.0)
East		12.9 (7.7-21.0)	8.2 (4.8-13.5)	13.6 (11.0-16.7)

Notes: (1) entries in brackets are 95% confidence intervals; (2) no significant differences between 1999 and 2003.
Q: How often in the **last 12 months**, have you driven within **an hour of drinking two or more drinks** of alcohol?
Source: *OSDUS*, Centre for Addiction & Mental Health

Cannabis Use and Driving

(Table 3.8.2)

The 2003 *OSDUS* asked students whether they had driven a vehicle within one hour of using cannabis, during the past 12 months.

- About one-in-five (20.1%) drivers in grades 10 to 12 report driving after consuming cannabis.
- Male drivers are more likely than females to use cannabis and drive (25.6% vs 14.1%). There is no significant difference by grade, or by region.

2003 vs 2001: Grade 10 to 12

- As seen in Table 3.8.2, there is no significant change in the rate of using cannabis and driving among adolescent drivers between 2001 and 2003, as both estimates hover at 20%.

Been a Passenger with an Intoxicated Driver

(Table 3.8.2)

Students were asked how often they had been a passenger in a car driven by someone who had been drinking alcohol, and – for the first time in 2003 – how often they had been a passenger in a car driven by someone who had been using drugs. Both questions refer to the past 12 months before the survey.

- Results show that 29.2% of students had been a passenger in a car at least once in the past year with a driver who was drinking, and 22.9% with a driver who was using drugs.

- There is no significant sex difference for either passenger involvement.

- Being a passenger with an intoxicated driver (either by alcohol or drugs) increases significantly with grade level.

- There are no significant regional differences on these two estimates.

2003 vs 2001: Grades 7 to 12

- The percentage of students who report being a passenger with a driver who was drinking did not significantly change between 2001 (30.9%) and 2003 (29.2%).

Table 3.8.2: Percentage Reporting Using Cannabis and Driving, Riding with a Driver who was Drinking, and Riding with a Driver who was using Drugs (During the Past Year), 2001 – 2003, Grades 7 to 12

	% Drivers Using Cannabis and Driving		% All Students Riding with Driver who was Drinking		% All Students Riding with Driver who was using Drugs	
	(N)	2001 (397)	2003 (1973)	2001 (1837)	2003 (3152)	2003 (3464)
Total (95% CI)		19.9 (14.9-26.0)	20.1 (17.3-23.1)	30.9 (28.5-33.5)	29.2 (27.1-31.3)	22.9 (20.8-25.0)
Sex						
Male		25.3 (17.3-35.5)	25.6 (21.4-30.2)	31.5 (28.2-34.9)	27.6 (25.0-30.5)	21.1 (18.3-24.1)
Female		12.6 (8.5-18.4)	14.1 (11.3-17.6)	30.4 (26.7-34.3)	30.6 (27.7-33.6)	24.5 (21.8-27.3)
Grade						
7		—	—	17.5 (12.9-23.4)	21.2 (16.6-26.8)	9.4 (6.1-14.1)
8		—	—	23.2 (16.5-31.5)	25.2 (21.1-29.8)	11.1 (8.0-15.3)
9		—	—	31.5 (25.1-38.6)	24.0 (20.1-28.4)	17.4 (14.0-21.3)
10		18.9 (9.6-33.9)	15.9 (11.3-21.9)	36.0 (30.8-41.7)	30.2 (25.5-35.4)	23.3 (19.0-28.3)
11		18.9 (12.7-27.3)	18.0 (14.4-22.3)	40.0 (33.4-46.9)	38.3 (33.9-42.8)	33.8 (28.7-39.3)
12		21.6 (14.1-31.7)	23.3 (18.9-28.3)	36.2 (28.9-44.1)	34.1 (30.1-38.2)	37.0 (31.4-43.0)
Region						
Toronto		13.7 (6.1-28.0)	13.8 (10.0-19.4)	26.1 (19.0-34.6)	27.1 (21.6-33.4)	20.7 (17.0-25.0)
North		17.5 (10.9-27.1)	24.7 (16.3-35.6)	34.7 (30.9-38.8)	29.8 (26.0-33.8)	27.0 (21.7-33.2)
West		23.9 (17.2-32.2)	21.0 (17.0-25.7)	32.8 (29.2-36.5)	32.5 (29.4-35.6)	22.7 (19.9-25.8)
East		16.7 (7.8-32.1)	20.3 (15.2-26.6)	30.2 (26.5-34.2)	25.1 (21.6-28.9)	23.2 (18.9-28.0)

Notes: (1) entries in brackets are 95% confidence intervals; (2) all items are based on a random half sample in each year, except for cannabis and driving in 2003.

Q: How often in the **last 12 months** did you ride in a car or other vehicle **driven by someone who had been drinking alcohol**? How often in the **last 12 months** did you ride in a car or other vehicle **driven by someone who had been using drugs** (other than alcohol)? How often in the **last 12 months** have you **driven within an hour of using marijuana or hashish**?

Source: OSDUS, Centre for Addiction & Mental Health

Drug Use Problem

(Table 3.8.3; Figure 3.8.2)

2003: Grades 7 to 12

The 2003 survey included the six-item “CRAFFT” screener in order to gauge drug use problems experienced by students (Knight et al., 1999). The six items (outlined in Table 3.8.3) pertain to problems experienced during the past 12 months. A total of two or more problems is used to identify adolescents who may have a drug use problem – that is, those who may be in need of treatment.

- Among the six CRAFFT problems, riding in a vehicle with a driver who was using drugs is experienced the most (about 23%), followed by using drugs to relax or feel better (about 17%).

- 17.5% of students may have a drug use problem (that is, they experienced at least two of the six CRAFFT problems).

- There is no sex difference with respect to experiencing a drug use problem: 17.7% of males and 17.4% of females.

- There is significant grade variation: reports of drug problems are lowest among 7th- and 8th-graders (about 7%) and highest among 11th- and 12th-graders (about 27%).

- No significant regional differences were found.

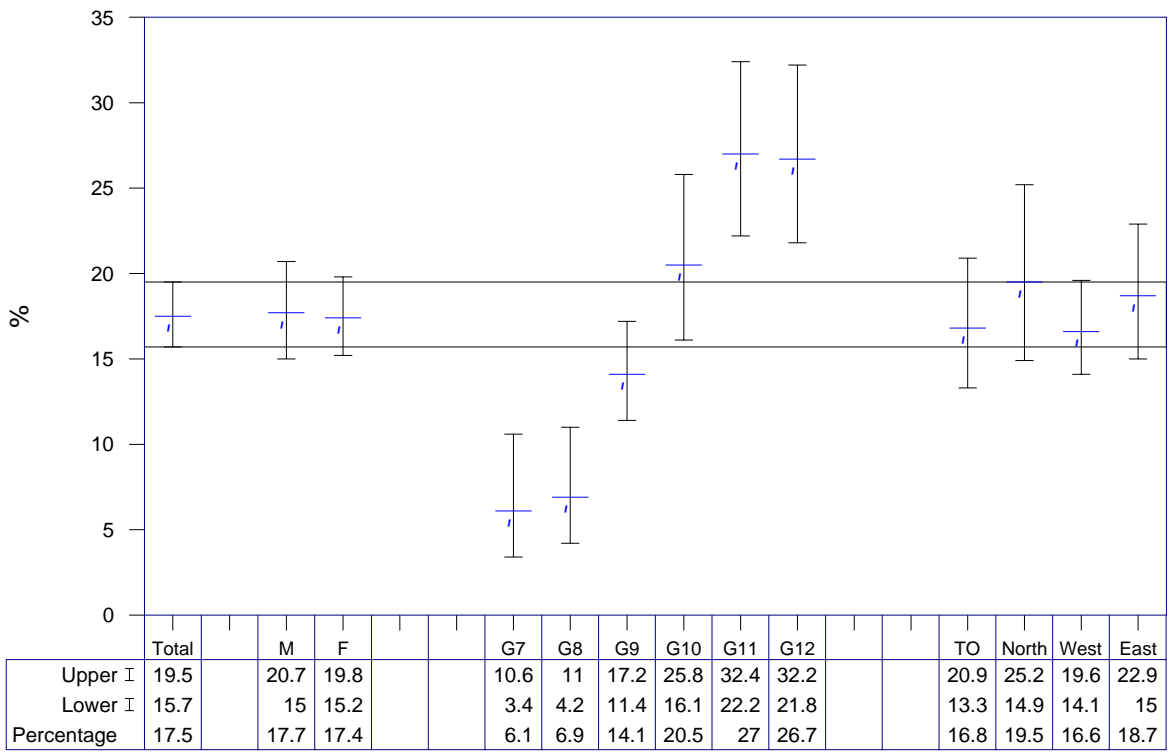
Table 3.8.3: Percentage of the Total Sample Reporting a Drug Use Problem (“CRAFFT”) During the Past Year, Grades 7 to 12, 2003

CRAFFT Item	% “yes” among the Total Sample (N=3464)
“In the last 12 months....”	
1. did you ride in a car or other vehicle driven by someone who had been using drugs (other than alcohol)?	22.9
2. did you use drugs to relax, feel better about yourself, or fit in?	16.8
3. did you use drugs while you were by yourself (alone) ?	9.7
4. did you forget things you did while using drugs?	9.7
5. did your family or friends tell you that you should cut down on your use of drugs?	5.0
6. did you get into trouble while using drugs?	5.7
CRAFFT 2+ Score (95% CI)	17.5 (15.7-19.5)

Notes: (1) those responding “yes” to 2 or more problems on the CRAFFT screener may have a drug use problem that requires treatment; (2) based on a random half sample.

Source: OSDUS, Centre for Addiction & Mental Health

Figure 3.8.2
Percentage Reporting a Drug Use Problem (CRAFFT 2+),
OSDUS 2003



Vertical bars represent 95% confidence intervals; horizontal bar represents 95% CI for total estimate

Problematic Consequences Due to Substance Use

(Tables 3.8.4a, 3.8.4b)

2003: Grades 7 to 12

Table 3.8.4a shows the percentage of 7th- to 12th-graders reporting problematic consequences from alcohol and drug use, experienced during their lifetime. The most commonly cited consequence from drinking was being warned by the police (5.4%), followed by having seen a doctor about drinking (1.7%), and having spoken to a school counsellor about alcohol (less than 1%).

A small percentage of students report being warned by the police about their drug use (4.4%). Less report having seen a doctor because of drugs (1.2%), or speaking to a school counsellor (1.2%).

1999 – 2003: Grades 7 to 12

□ Over the short-term, there are no significant changes in the percentage experiencing problems stemming from alcohol or drug use.

1981 – 2003: Grades 7, 9, 11

□ No major long-term changes in alcohol- or drug-related consequences are evident.

Table 3.8.4a: Percentage of Total Sample Reporting Lifetime Alcohol and Drug Use Problems, 1999 – 2003, Grades 7 to 12

	Percentage of Total Sample Responding "Yes"		
	1999 (4447)	2001 (3898)	2003 (6616)
(N)			
Ever Arrested or Warned by Police Because of Your Use of...			
Alcohol	6.7	5.4	5.4
Drugs	3.4	3.7	4.4
Ever Seen a Doctor or Been in Hospital Because of Your Use of...			
Alcohol	1.6	1.6	1.7
Drugs	1.1	1.0	1.2
Ever Talked to a School Counsellor, Nurse or Teacher Because of Your Use of...			
Alcohol	1.2	0.6	0.7
Drugs	1.3	1.0	1.2

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.8.4b: Percentage of Total Sample Reporting Lifetime Alcohol and Drug Use Problems, 1981 – 2003, Grades 7, 9, 11 only

	Percentage of Total Sample Responding “Yes”												
	1981 (N)	1983 (3010)	1985 (3614)	1987 (3146)	1989 (3376)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (2013)	2003 (3389)
Ever Arrested or Warned by Police Because of Your Use of...													
Alcohol	5.0	5.5	4.6	5.1	5.0	4.6	3.9	4.6	5.2	6.4	4.8	4.8	
Drugs	2.8	2.4	1.9	1.5	1.4	1.4	1.2	1.7	2.6	3.4	3.2	4.1	
Ever Seen a Doctor or Been in Hospital Because of Your Use of...													
Alcohol	0.8	0.9	0.9	1.0	0.9	1.2	1.2	1.2	0.9	1.3	1.1	1.8	
Drugs	0.8	0.8	0.6	0.9	0.6	0.6	0.9	0.7	0.7	1.2	1.4	1.3	
Ever Talked to a School Counsellor, Nurse or Teacher Because of Your Use of...													
Alcohol	0.8	0.6	0.5	1.2	0.6	0.8	1.0	0.7	0.8	1.3	0.6	0.6	
Drugs	0.8	0.8	0.5	0.7	0.5	0.6	0.8	0.8	1.0	1.6	1.0	1.2	

Source: OSDUS, Centre for Addiction & Mental Health

Alcohol and Other Drug Treatment

In addition to asking students about alcohol and drug use problems, we also surveyed students about their treatment experiences. When asked “*Have you been in a treatment program during the last 12 months because of your alcohol or drug use?*”

- In 2003, 1.4% (1.0%-1.8%, 95% CI) of students indicated that they had received either alcohol and/or drug treatment (data not tabled). This estimate represents about 13,100 Ontario students in grades 7 to 12.

- The 2003 percentage of students in grades 7 to 12 who sought treatment is not significantly different from 2001 (0.9%, 0.6%-1.5%, 95% CI), or 1999 (1.3%, 0.8%-1.9%, 95% CI).

- In 2003, 8.2% of all students (81,100 Ontario students) report both alcohol problems and elevated psychological distress.

- Females are more likely than males to report coexisting problems (10.0% vs 6.3%).

- Coexisting problems are likely to increase with grade, from about 2% of 7th-graders to about 13% of 11th- and 12th-graders.

- There are no significant regional differences in experiencing coexisting problems.

Coexisting Alcohol and Mental Health Problems

(Figures 3.8.3, 3.8.4)

In addition to substance problem indicators, the 2003 *OSDUS* also contains indicators of poor mental health. Specifically, the survey included the General Health Questionnaire (GHQ12), which is a screening instrument designed to detect current elevated psychological distress (symptoms of anxiety and depression) (Goldberg, Oldehinkel, & Ormel, 1998; McDowell & Newell, 1996). For our present purpose, we examine the percentage reporting at least 3 of the 12 GHQ problems.

Figure 3.8.3 displays the percentage of all students in grades 7 to 12 who report hazardous drinking according to the AUDIT (those scoring 8+); the percentage reporting psychological distress according to the GHQ (those scoring 3+); and the percentage that report both problems.

Figure 3.8.3
 Coexisting Problems: Hazardous Drinking and Elevated Psychological Distress, OSDUS 2003 (Grades 7 to 12)

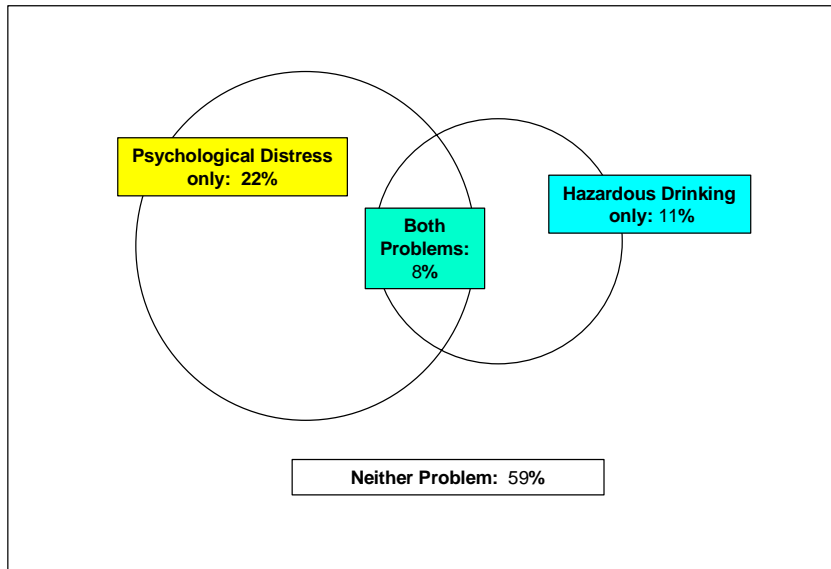
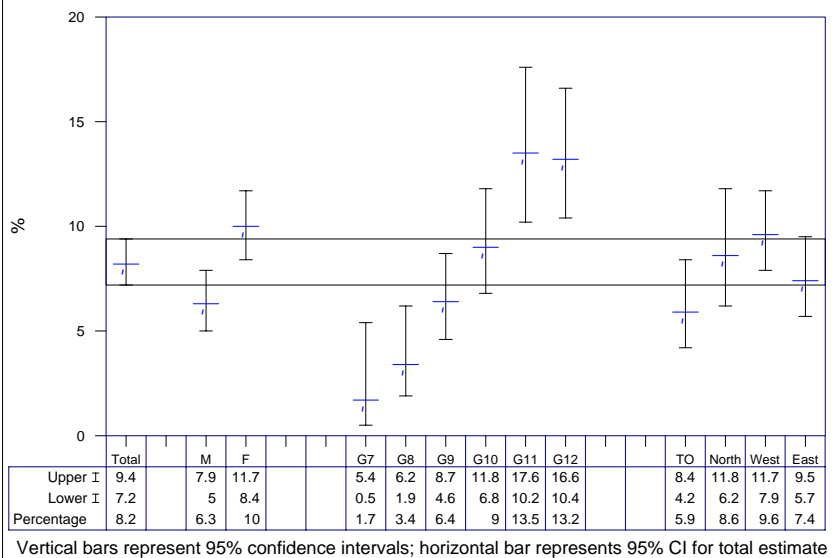


Figure 3.8.4
 Percentage Reporting Coexisting Hazardous Drinking and Elevated Psychological Distress, OSDUS 2003



3.9 Attitudes and Perceptions

Perceptions of Risk and Disapproval

(Tables 3.9.1a – 3.9.2b; Figure 3.9.1)

Research has shown that drug-related attitudes and beliefs correlate with both increases and decreases in rates of drug use (Bachman, Wadsworth, O'Malley, Johnston, & Schulenberg, 1997; Johnston, O'Malley, & Bachman, 2003). Because the *OSDUS* is cross-sectional, we cannot necessarily attribute attitudes and beliefs as causal factors in the changing rates of drug use. We can, however, examine the extent to which beliefs and drug use vary with time.

In Tables 3.9.1a and b, we display the percentage of students who perceive “**great risk**” that people will harm themselves if they used various drugs. In Tables 3.9.2a and b, we display the percentage of students who “**strongly disapprove**” of people aged 18 and older using particular drugs.

2003: Grades 7 to 12

- Among the drug behaviours surveyed, students felt that the greatest risk is associated with regular marijuana use (54.9%), followed by trying ecstasy (39.5%), trying cocaine (33.7%), trying LSD (32%), daily drinking (31.4%), daily smoking (24%), and trying cannabis (19.2%).
- Perceptions of risk increase significantly with grade for daily drinking, trying cocaine, LSD, and ecstasy, but decrease with grade for cannabis.

- Almost half of students strongly disapprove of trying ecstasy (48.9%), smoking marijuana regularly (47.1%), trying LSD (45.5%), and trying cocaine (44.9%). Just over one-quarter of students strongly disapprove of daily drinking and trying cannabis.

1999 – 2003: Grades 7 to 12

- Compared to 2001, there was a significant increase in 2003 in the perception of great risk in trying ecstasy (32.2% vs 39.5%). There was also a parallel increase in the percentage who strongly disapprove of trying ecstasy (38.8% vs 48.9%).

- Between 1999 and 2003, there was a significant increase in the percentage of students who strongly disapprove of trying LSD (from 38.1% to 45.5%).

1989 – 2003: Grades 7, 9, 11

- Over the long-term, risk perceptions surrounding the use of most of the substances asked about have gradually declined, especially any use of cannabis.
- Disapproval of using cannabis has declined since 1989, as has disapproval of using cocaine. In contrast, since 1997, there has been a gradual increase in those who disapprove of trying LSD. Disapproval of daily drinking has not changed significantly since 1989.

Table 3.9.1a: Percentage Reporting *Great Risk* in Using Drugs by Grade, 1999 – 2003, Grades 7 to 12

(N)	1999 (4447)	2001 (1837)	2003 (3152)
Great risk in smoking 1 or 2 cigarettes daily			
Total	—	—	24.0
Grade 7	—	—	20.4
Grade 8	—	—	21.4
Grade 9	—	—	22.5
Grade 10	—	—	23.8
Grade 11	—	—	26.0
Grade 12	—	—	29.2
Great risk in drinking 1 or 2 drinks daily			
Total	32.4	29.0	31.4
Grade 7	23.1	24.3	25.4
Grade 8	27.0	22.2	24.9
Grade 9	34.4	26.2	30.0
Grade 10	31.7	30.6	32.9
Grade 11	38.0	33.7	36.3
Grade 12	38.7	39.7	36.8
Great risk in trying cannabis once or twice			
Total	19.2	19.7	19.2
Grade 7	28.4	27.0	30.8
Grade 8	27.7	30.5	29.4
Grade 9	16.6	18.5	18.8
Grade 10	13.9	16.6	13.3
Grade 11	15.2	11.1	12.4
Grade 12	13.8	16.0	14.6
Great risk in smoking marijuana regularly			
Total	52.2	49.4	54.9
Grade 7	63.6	61.1	69.4
Grade 8	60.2	58.7	66.8
Grade 9	53.1	47.8	55.4
Grade 10	45.5	48.2	48.4
Grade 11	44.9	36.8	47.4
Grade 12	45.2	44.4	46.8
Great risk in trying cocaine once or twice			
Total	33.3	31.8	33.7
Grade 7	23.8	21.4	19.0
Grade 8	28.0	28.1	29.4
Grade 9	27.8	30.0	32.0
Grade 10	35.4	34.3	33.7
Grade 11	45.1	38.8	41.2
Grade 12	40.8	40.2	44.0
Great risk in trying LSD once or twice			
Total	28.9	28.6	32.0
Grade 7	21.9	19.7	17.8
Grade 8	25.7	25.4	26.0
Grade 9	30.0	25.8	34.0
Grade 10	28.3	28.8	33.7
Grade 11	33.0	35.8	37.0
Grade 12	34.1	40.2	40.0

(N)	1999 (4447)	2001 (1837)	2003 (3152)
Great risk in trying ecstasy once or twice			
Total	—	32.2	39.5 ^a
Grade 7	—	25.5	23.3
Grade 8	—	27.3	38.7
Grade 9	—	31.7	38.7
Grade 10	—	31.3	43.5
Grade 11	—	39.4	43.4
Grade 12	—	39.8	46.9

Notes: (1) based on a random half sample in 2001 and 2003; (2)^a 2003 vs 2001 significant difference, p<.01
Q: How much do you think **people risk harming themselves** (physically or in other ways) if they...[behaviour]?
Source: OSDUS, Centre for Addiction and Mental Health

Table 3.9.1b: Percentage Reporting Great Risk in Using Drugs by Grade, 1989 – 2003, Grades 7, 9, 11 only

(N)	1989 (3040)	1991 (2961)	1993 (2617)	1995 (2907)	1997 (3072)	1999 (2421)	2001 (953)	2003 (1618)
Great risk in drinking 1 or 2 drinks daily								
Total	36.2	31.8	30.5	27.8	30.0	32.5	28.0	30.9
Grade 7	28.4	23.1	21.5	21.6	21.1	23.1	24.3	25.4
Grade 9	38.2	28.8	31.2	27.4	32.6	34.4	26.2	30.0
Grade 11	41.8	42.7	37.3	33.5	34.9	38.0	33.7	36.3
Great risk in trying cannabis once or twice								
Total	29.1	32.4	28.5	21.7	20.1	19.4	18.8	19.9
Grade 7	39.3	37.0	35.3	34.1	33.4	28.4	27.0	30.8
Grade 9	29.4	35.4	29.6	21.4	17.6	16.6	18.5	18.8
Grade 11	18.0	25.2	21.8	11.6	11.6	15.2	11.1	12.4
Great risk in smoking marijuana regularly								
Total	75.4	73.3	70.2	60.1	57.6	53.2	48.3	56.5
Grade 7	72.3	72.0	69.9	67.6	65.9	63.6	61.1	69.4
Grade 9	78.8	74.0	73.7	64.1	59.4	53.1	47.8	55.4
Grade 11	74.6	73.8	66.9	50.0	49.2	44.9	36.8	47.4
Great risk in trying cocaine once or twice								
Total	36.7	42.1	38.2	35.6	35.3	32.5	30.2	31.6
Grade 7	35.1	37.8	30.5	27.1	27.7	23.8	21.4	19.0
Grade 9	40.7	41.3	37.1	34.8	33.0	27.8	30.0	32.0
Grade 11	33.2	46.8	45.6	43.6	43.8	45.1	38.8	41.2
Great risk in trying LSD once or twice								
Total	—	—	—	—	36.8	28.8	27.1	30.5
Grade 7	—	—	—	—	39.6	21.9	19.7	17.8
Grade 9	—	—	—	—	33.4	30.0	25.8	34.0
Grade 11	—	—	—	—	38.0	33.0	35.8	37.0

Note: based on a random half sample in 2001 and 2003.
Q: How much do you think **people risk harming themselves** (physically or in other ways) if they...[behaviour]?
Source: OSDUS, Centre for Addiction & Mental Health

Table 3.9.2a: Percentage *Strongly Disapproving* of Drug Use by Grade, 1999 – 2003, Grades 7 to 12

(N)	1999 (4447)	2001 (1837)	2003 (3152)
Strongly disapprove of drinking 1 or 2 drinks daily			
Total	26.0	24.0	27.8
Grade 7	32.4	29.8	34.0
Grade 8	25.8	23.6	30.6
Grade 9	28.7	23.6	27.8
Grade 10	21.2	22.6	27.0
Grade 11	24.2	20.4	23.4
Grade 12	22.0	24.8	25.5
Strongly disapprove of trying cannabis once or twice			
Total	26.3	28.0	28.8
Grade 7	44.3	48.2	47.3
Grade 8	35.0	38.6	38.6
Grade 9	25.7	23.7	26.4
Grade 10	18.4	19.0	27.5
Grade 11	18.2	19.4	18.9
Grade 12	16.1	22.5	19.0
Strongly disapprove of smoking marijuana regularly			
Total	43.4	39.9	47.1
Grade 7	63.6	64.0	66.6
Grade 8	53.5	53.5	62.3
Grade 9	43.6	34.3	47.7
Grade 10	35.7	30.6	42.4
Grade 11	31.2	29.8	33.0
Grade 12	33.2	30.1	36.8
Strongly disapprove of trying cocaine once or twice			
Total Sample	40.1	38.7	44.9
Grade 7	44.6	45.3	48.9
Grade 8	39.9	37.4	43.7
Grade 9	35.5	34.9	41.5
Grade 10	35.0	37.6	46.3
Grade 11	44.7	38.4	41.7
Grade 12	41.5	40.2	48.4
Strongly disapprove of trying LSD once or twice			
Total	38.1	40.1	45.5^{ab}
Grade 7	45.2	47.4	48.9
Grade 8	41.1	39.6	45.5
Grade 9	38.0	35.8	42.3
Grade 10	28.1	39.0	47.0
Grade 11	37.8	39.5	42.2
Grade 12	37.1	40.9	48.3
Strongly disapprove of trying “ecstasy” once or twice			
Total	—	38.8	48.9^a
Grade 7	—	49.6	54.0
Grade 8	—	40.3	50.6
Grade 9	—	35.1	48.5
Grade 10	—	35.6	51.1

	1999	2001	2003
(N)	(4447)	(1837)	(3152)
Grade 11	—	35.7	43.0
Grade 12	—	38.8	47.4

Notes: (1) based on a random half sample in 2001 and 2003; (2) ^a 2003 vs. 2001 significant difference, $p < .01$; ^b 2003 vs. 1999 significant difference, $p < .01$.

Q: Do you **approve of people (18 or older)** doing the following...[behaviour]?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.9.2b: Percentage *Strongly Disapproving* of Drug Use by Grade, 1989 – 2003, Grades 7, 9, 11 only

	1989	1991	1993	1995	1997	1999	2001	2003
(N)	(3040)	(2961)	(2617)	(2907)	(3072)	(2421)	(953)	(1618)
Strongly disapprove of drinking 1 or 2 drinks daily								
Total	29.7	31.0	28.0	24.9	23.8	28.2	24.5	28.0
Grade 7	35.9	33.9	30.6	28.8	30.4	32.4	29.8	34.0
Grade 9	27.2	29.0	29.5	24.2	22.3	28.7	23.6	27.8
Grade 11	26.3	30.2	24.6	22.3	19.7	24.2	20.4	23.4
Strongly disapprove of trying cannabis once or twice								
Total	43.1	45.9	38.6	30.9	26.4	28.2	29.8	29.6
Grade 7	59.1	57.9	48.7	47.6	44.0	44.3	48.2	47.3
Grade 9	37.9	48.4	39.0	30.5	22.3	25.7	23.7	26.4
Grade 11	32.8	32.5	30.1	17.7	15.5	18.2	19.4	18.9
Strongly disapprove of smoking marijuana regularly								
Total	62.5	62.0	56.8	49.6	44.1	44.9	41.8	47.8
Grade 7	73.7	72.1	66.8	65.0	61.3	63.6	64.0	66.6
Grade 9	59.5	62.5	54.6	50.5	40.8	43.6	34.3	47.7
Grade 11	54.6	52.4	50.8	36.4	32.8	31.2	29.8	33.0
Strongly disapprove of trying cocaine once or twice								
Total	50.6	55.6	48.3	46.1	41.2	41.1	39.1	43.7
Grade 7	58.6	59.6	47.7	45.7	44.9	44.6	45.3	48.9
Grade 9	48.5	54.5	46.4	42.6	37.3	35.5	34.9	41.5
Grade 11	44.9	53.1	50.6	49.8	41.7	44.7	38.4	41.7
Strongly disapprove of trying LSD once or twice								
Total	—	—	—	—	37.9	39.8	40.5	44.1
Grade 7	—	—	—	—	44.1	45.2	47.2	48.9
Grade 9	—	—	—	—	34.6	38.0	35.8	42.3
Grade 11	—	—	—	—	35.5	37.8	39.5	42.2

Note: based on a random half sample in 2001 and 2003.

Q: Do you **approve of people (18 or older)** doing the following...[behaviour]?

Source: OSDUS, Centre for Addiction & Mental Health

Drug Availability

(Tables 3.9.3a, 3.9.3b)

In this section, we present the percentage reporting that it is “easy” or “very easy” to get alcohol, cannabis, cocaine, LSD, and ecstasy.

2003: Grades 7 to 12

■ In 2003, the perception of easy availability was highest for alcohol (66.4%), followed by cannabis (51.4%), cocaine (21.1%), ecstasy (19.9%) and LSD (15.6%).

■ Not surprisingly, as grade increases, students are more likely to report that these drugs are easy to get.

1999 – 2003: Grades 7 to 12

□ Over the short-term, the perceived availability of LSD has significantly decreased since 1999, decreasing from 25.2% to 15.6% in 2003.

□ The availability of ecstasy also significantly declined between 2001 (27.1%) and 2003 (19.9%).

1989 – 2003: Grades 7, 9, 11

□ The perceived availability of cannabis, as well as cocaine, has significantly increased since 1989. However, it seems that LSD is not as readily available in 2003 as it was in 1995 (15.4% vs 33.2% reporting it is easy to obtain).

The Association between Cannabis Use and Attitudes

(Figure 3.9.1)

Figure 3.9.1 presents the relationship between past year cannabis use and the perception of great risk of regular use, disapproval of regular use, and availability of the drug, over the past decade.

There is a definitive association between past year use and attitudes over the years: as use and availability gradually increase, perception of risk and disapproval gradually decrease. It should be noted here that these associations are correlational. We only know that they move together in time, but we cannot claim that one causes the other.

Figure 3.9.1
 Cannabis: Use, Risk Perceptions, Disapproval, and Availability
 (Grades 7, 9, 11 only), OSDUS 1989 - 2003

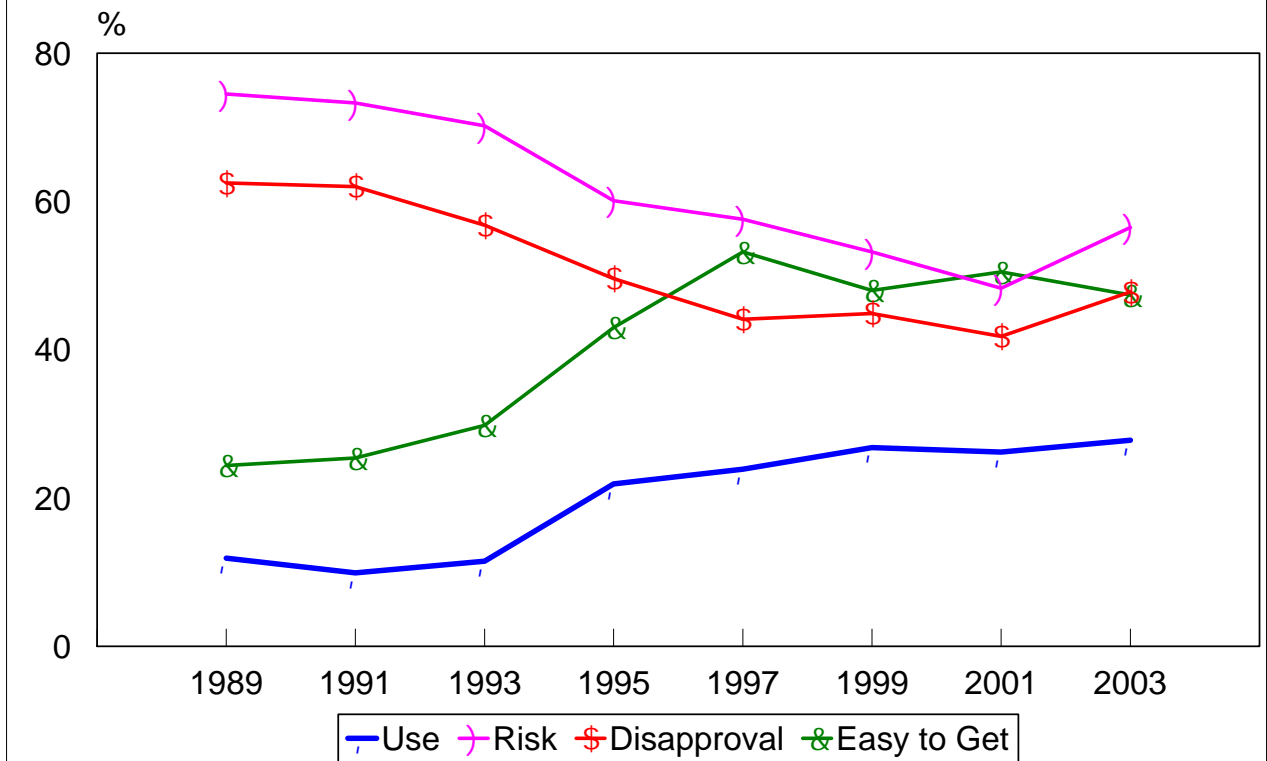


Table 3.9.3a: Percentage Reporting “Easy” or “Very Easy” to Obtain Alcohol, Cannabis, Cocaine, LSD, and Ecstasy, 1999 – 2003, Grades 7 to 12

	1999	2001	2003
Alcohol			
Total	66.9	67.3	66.4
Grade 7	33.8	31.9	33.8
Grade 8	47.9	52.3	43.9
Grade 9	66.6	68.8	66.2
Grade 10	79.2	80.0	75.1
Grade 11	87.2	85.1	82.6
Grade 12	87.6	89.6	86.7
Cannabis			
Total	51.6	53.4	51.4
Grade 7	12.2	14.9	14.5
Grade 8	30.9	27.6	28.4
Grade 9	50.3	59.5	51.6
Grade 10	66.7	68.6	63.5
Grade 11	75.2	76.6	70.6
Grade 12	76.2	73.6	70.9
Cocaine			
Total	19.6	21.6	21.1
Grade 7	6.5	6.9	7.1
Grade 8	12.7	9.2	10.5
Grade 9	19.6	26.3	21.2
Grade 10	23.6	24.4	24.4
Grade 11	29.5	31.4	28.8
Grade 12	25.1	32.5	31.5
LSD			
Total	25.2	20.0	15.6^{ab}
Grade 7	3.8	5.2	3.6
Grade 8	13.6	7.1	6.2
Grade 9	23.6	21.3	13.9
Grade 10	33.3	24.9	19.3
Grade 11	40.9	30.6	25.7
Grade 12	35.2	34.3	20.1
Ecstasy			
Total	—	27.1	19.9^a
Grade 7	—	3.9	4.7
Grade 8	—	12.2	6.2
Grade 9	—	28.7	14.4
Grade 10	—	37.4	22.3
Grade 11	—	36.8	33.3
Grade 12	—	46.0	34.7

Notes: (1) all results, except alcohol, are based on a random half sample in each year; (2) ^a 2003 vs 2001 significant difference, $p < .01$; ^b 2003 vs. 1999 significant difference, $p < .01$.

Q. How easy or difficult would it be for you to get [drug] if you wanted some?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.9.3b: Percentage Reporting “Easy” or “Very Easy” to Obtain Alcohol, Cannabis, Cocaine, and LSD, 1989 – 2003, Grades 7, 9, 11 only

	1989	1991	1993	1995	1997	1999	2001	2003
Alcohol								
Total	59.4	62.3	63.4	68.1	64.3	64.4	62.1	63.0
Grade 7	38.1	40.1	42.8	43.7	40.8	33.8	31.9	33.8
Grade 9	60.1	62.6	64.8	69.1	63.8	66.6	68.8	66.2
Grade 11	80.8	81.7	78.4	87.2	84.5	87.2	85.1	82.6
Cannabis								
Total	24.4	25.4	29.8	43.0	52.3	48.0	50.5	47.4
Grade 7	5.1	4.8	7.1	12.7	17.3	12.2	14.9	14.5
Grade 9	26.9	22.3	28.0	45.1	51.1	50.3	59.5	51.6
Grade 11	42.0	47.7	50.2	66.4	77.3	75.2	76.6	70.6
Cocaine								
Total	13.7	12.7	13.7	15.0	15.0	19.2	21.8	19.7
Grade 7	5.2	4.5	5.0	6.3	6.5	6.5	6.9	7.1
Grade 9	14.4	12.5	12.9	15.7	15.1	19.6	26.3	21.2
Grade 11	21.9	20.6	21.6	21.5	22.1	29.5	31.4	28.8
LSD								
Total	—	—	—	33.2	24.2	23.9	18.8	15.4
Grade 7	—	—	—	8.7	5.0	3.8	5.2	3.6
Grade 9	—	—	—	29.7	23.1	23.6	21.3	13.9
Grade 11	—	—	—	56.9	41.6	40.9	30.6	25.7

Note: All results, except alcohol, are based on a random half sample in each year.
 Q: How easy or difficult would it be for you to get [drug] if you wanted some?
 Source: OSDUS, Centre for Addiction & Mental Health

3.10 School and Neighbourhood Factors

Drug Use at School

(Tables 3.10.1a – 3.10.2b)

Since 1993, the *OSDUS* asked students about their perceptions about the drug problem in their own school and neighbourhood. First, students were asked “*In your school, do you think that drug use is higher, lower, or about the same as it was a few years ago?*”

- Of all students surveyed in 2003, 53.4% said drug use was higher, 15.6% said it was the same, and 31% said it was lower than a few years ago.

- Students in grades 9 to 11 are most likely to report that drug use is higher, compared to other grades.

- Students in Toronto are least likely to report that drug use is higher now, compared to students in the other three regions (46.8% vs 53%-58%).

- The percentage of students reporting that drug use is higher now than a few years ago in their school has not changed over the short-term or long-term (hovering at around 53%).

Students were then asked about perceptions of the magnitude of the drug problem in school, using the following question: “*In your school, is drug use a big problem, a small problem or no problem at all?*”

- In 2003, 27.8% of all students indicated that drug use in their school is a big problem, 50.9% said it was a small problem, and 21.3% said drug use was not a problem at their school.

- Students in grades 9 to 11 are most likely to indicate that drug use is a big problem in their school.

- Students in the North are most likely to indicate that drug use is a big problem in their school, compared to students in the other regions.

- In the short-term (1999 to 2003), there has been no significant change in the perception that drug use is a big problem at school. However, this perception significantly increased between 1993 (14.8%) and 2003 (28.2%).

Drug Selling

(Tables 3.10.3a – 3.10.4b)

Students were asked whether anyone had tried to sell them drugs during the past 12 months, and whether they had seen drug selling in their neighbourhood.

- In 2003, over one-third (36.7%) of students report that someone had tried to sell them drugs. Males and older students were more likely to report that someone tried to sell them drugs. No significant regional differences were found.

- The proportion of students reporting that someone had tried to sell them drugs has not significantly changed over the short-term or long-term (hovering at around one-third).

- Just under one-third (32%) of students had seen someone selling drugs in their neighbourhood in the past year. Males and older students were more likely to indicate this. No significant regional differences were found

- The proportion of students reporting observing drug selling in their neighbourhood has not changed since 1999. However, it has increased significantly since 1995 (from 24.5% to 31.5% in 2003).

Table 3.10.1a: Percentage Reporting Perception that *Drug Use in School Has Increased Over Time, 1999 – 2003, Grades 7 to 12*

	1999 (2148)	2001 (1837)	2003 (3152)
(N)			
(% reporting drug use is “higher”)			
Total (95% CI)	54.3 (51.2-57.4)	56.5 (53.0-60.0)	53.4 (20.6-56.1)
Grade			
7	41.0	33.8	29.4
8	43.9	34.2	35.1
9	60.3	69.0	61.3
10	59.1	68.6	66.6
11	61.4	63.1	63.2
12	57.3	61.7	55.1
Region			
Toronto	43.6	49.6	46.8
North	55.7	53.7	54.3
West	59.6	60.5	53.4
East	52.4	55.9	57.6

Notes: (1) based on a random half sample in each year; (2) no significant differences between 1999 and 2003.
 Q: **In your school, do you think that drug use is higher, lower, or about the same** as it was a few years ago?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.10.1b: Percentage Reporting Perception that *Drug Use in School Has Increased Over Time, 1993 – 2003, Grades 7, 9, 11 only*

	1993 (1241)	1995 (1453)	1997 (1527)	1999 (1168)	2001 (953)	2003 (1618)
(% reporting drug use is “higher”)						
Total (95% CI)	53.4 (49.0-57.7)	63.9 (57.0-70.3)	56.3 (51.2-61.2)	55.4 (51.5-59.3)	56.6 (51.8-61.2)	53.1 (49.5-56.6)
Grade						
7	47.0	45.3	38.9	41.0	33.8	29.4
9	57.8	71.0	63.9	60.3	69.0	61.3
11	54.2	71.5	63.2	61.4	63.1	63.2
Region						
Toronto	52.6	57.6	50.9	44.6	50.7	43.2
North	56.4	61.9	60.6	58.5	53.9	54.8
West	53.5	67.0	57.0	60.4	61.5	55.3
East	53.4	63.7	57.2	54.4	55.3	55.7

Note: based on a random half sample in each year.
 Q: **In your school, do you think that drug use is higher, lower, or about the same** as it was a few years ago?
 Source: *OSDUS*, Centre for Addiction & Mental Health

Table 3.10.2a: Percentage Reporting that *Drug Use in School is a “Big Problem,” 1999 – 2003, Grades 7 to 12*

	(N)	1999 (2148)	2001 (1837)	2003 (3152)
Total		23.5	26.6	27.8
(95% CI)		(20.5-26.7)	(23.1-30.5)	(25.2-30.5)
Grade				
7		17.9	8.1	14.2
8		14.6	8.0	14.8
9		29.9	35.0	32.6
10		21.4	37.0	35.7
11		27.8	31.2	34.7
12		26.1	37.4	28.8
Region				
Toronto		21.8	21.1	25.6
North		26.6	30.7	31.4
West		25.5	29.4	29.0
East		20.6	25.0	26.3

Notes: (1) based on a random half sample in each year; (2) no significant differences between 1999 and 2003.
 Q: In **your school**, is **drug use** a **big problem**, a **small problem**, or **no problem** at all?

Table 3.10.2b: Percentage Reporting Perception that *Drug Use in School is a “Big Problem,” 1993 – 2003, Grades 7, 9, 11 only*

	(N)	1993 (1241)	1995 (1453)	1997 (1527)	1999 (1168)	2001 (953)	2003 (1618)
Total		14.8	26.2	25.4	25.9	25.5	28.2
(95% CI)		(11.4-19.0)	(21.5-31.5)	(22.1-29.1)	(22.2-30.0)	(20.7-31.0)	(25.0-31.6)
Grade							
7		9.0	13.7	14.5	17.9	8.1	14.2
9		18.0	31.8	29.1	29.9	35.0	32.6
11		16.5	31.0	31.2	27.8	31.2	34.7
Region							
Toronto		16.5	21.5	24.9	23.7	21.0	22.8
North		35.5	10.4	35.4	24.2	32.3	32.0
West		11.9	32.7	26.2	30.1	27.8	32.2
East		15.4	23.7	19.3	21.9	24.6	24.2

Note: based on a random half sample in each year.
 Q: In **your school**, is **drug use** a **big problem**, a **small problem**, or **no problem** at all?
 Source: OSDUS, Centre for Addiction & Mental Health

Table 3.10.3a: Percentage Reporting that *Someone Tried to Sell them Drugs* in the Past Year, 1999 – 2003, Grades 7 to 12

	(N)	1999 (2148)	2001 (1837)	2003 (3152)
Total		35.4	38.8	36.7
(95% CI)		(32.7-38.3)	(35.3-42.5)	(34.4-39.1)
Sex				
	Male	42.8	45.6	45.3
	Female	27.9	32.4	28.7
Grade				
	7	11.5	13.1	11.9
	8	23.1	20.2	21.0
	9	36.8	46.6	36.8
	10	45.2	53.7	47.2
	11	51.2	50.8	51.2
	12	44.9	42.0	44.8
Region				
	Toronto	27.8	29.3	32.6
	North	36.0	34.9	35.8
	West	38.9	43.3	39.0
	East	34.7	39.7	36.1

Notes: (1) based on a random half sample in each year; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, has anyone tried to sell you drugs?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.10.3b: Percentage Reporting that *Someone Tried to Sell them Drugs* in the Past Year, 1995 – 2003, Grades 7, 9, 11 only

	(N)	1995 (2907)	1997 (1527)	1999 (1168)	2001 (953)	2003 (1618)
Total		30.6	31.0	34.5	37.3	34.8
(95% CI)		(28.0-33.3)	(28.8-33.2)	(31.2-38.0)	(32.4-42.6)	(31.9-37.8)
Sex						
	Male	35.1	38.9	42.5	43.9	44.6
	Female	26.4	24.1	26.4	31.0	25.8
Grade						
	7	11.3	11.7	11.5	13.1	11.9
	9	30.4	33.5	36.8	46.6	36.8
	11	46.9	45.3	51.2	50.8	51.2
Region						
	Toronto	27.8	26.7	29.7	32.0	30.5
	North	31.4	35.6	32.4	31.1	39.2
	West	32.4	32.5	37.6	43.5	37.2
	East	29.5	30.2	33.6	34.5	32.7

Note: based on a random half sample in each year, except 1995.

Q: In the **last 12 months**, has anyone tried to sell you drugs?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.10.4a: Percentage Reporting Having Observed Drug Selling in the Neighbourhood in the Past Year, 1999 – 2003, Grades 7 to 12

		1999	2001	2003
		(2148)	(1837)	(3152)
		(N)		
Total		31.4	32.1	32.0
(95% CI)		(28.5-34.4)	(29.0-35.3)	(29.9-34.3)
Sex	Male	36.2	37.6	37.7
	Female	26.5	26.8	26.7
Grade				
	7	12.2	14.2	14.3
	8	22.8	17.8	22.3
	9	27.5	36.6	30.8
	10	43.8	39.9	36.7
	11	45.8	44.2	46.2
	12	38.7	36.7	37.2
Region				
	Toronto	26.3	31.1	30.7
	North	33.0	26.0	27.6
	West	32.5	33.0	33.7
	East	32.3	33.0	31.5

Notes: (1) based on a random half sample in each year; (2) no significant differences between 1999 and 2003.

Q: In the **last 12 months**, have you seen anyone selling drugs in your neighbourhood?

Source: OSDUS, Centre for Addiction & Mental Health

Table 3.10.4b: Percentage Reporting Having Observed Drug Selling in the Neighbourhood in the Past Year, 1995 – 2003, Grades 7, 9, 11 only

		1995	1997	1999	2001	2003
		(2907)	(1527)	(1168)	(953)	(1618)
		(N)				
Total		24.5	25.5	29.3	31.9	31.5
(95% CI)		(21.8-27.5)	(22.8-28.4)	(25.2-33.7)	(27.3-36.8)	(28.8-34.2)
Sex	Male	26.7	30.6	35.2	36.9	38.5
	Female	22.6	21.0	23.2	27.0	25.0
Grade						
	7	8.7	12.8	12.2	14.2	14.3
	9	24.4	26.4	27.5	36.6	30.8
	11	38.0	35.6	45.8	44.2	46.2
Region						
	Toronto	26.2	26.8	26.7	34.4	30.3
	North	27.7	24.4	29.0	21.2	28.4
	West	25.2	26.3	29.4	33.8	34.3
	East	21.5	23.8	30.7	29.3	28.4

Note: based on a random half sample in each year, except 1995.

Q: In the **last 12 months**, have you seen anyone selling drugs in your neighbourhood?

Source: OSDUS, Centre for Addiction & Mental Health

3.11 Long-term Trends in Drug Use among Toronto Students, 1968 - 2001

(Figures 3.11.1 – 3.11.4)

Between 1968 and 1974, the *Addiction Research Foundation* monitored drug use among Toronto students enrolled in Grades 7, 9, 11 and 13. During this period surveys were conducted in 1968 (6,447 interviews), 1970 (6,890 interviews), 1972 (6,641 interviews) and 1974 (3,479 interviews). Because of their historical significance we present these long-term data.

There are some limitations in comparing the 1968-1974 series to the 1977-1999 one. First, although both employ full-probability designs that would result in a random selection of students, the sample designs are not identical.

Second, in the 1968-1974 surveys, drug use refers to use occurring during the six months prior to the interview, whereas in the 1977-1999 series, use refers to the 12-month period before the interview. Despite such differences we believe that comparisons are still insightful. For comparability, we restrict our attention to the use of four substances: alcohol, tobacco, cannabis, and LSD.

- There is a dominant long-term decline in **tobacco** use between 1968 and 2001, dropping from 38% to an all-time low of 16.3%.

- The percentage of students drinking **alcohol** increased significantly between 1968 and 1974 (from 46% to 73%). Between 1977 and 1997 the rate of drinking among Toronto students declined from 77% to 52%. The drinking rate increased nonsignificantly to 60% in 1999 and remains at 58% in 2001.

- During the period 1968 to 1974 **cannabis** use increased from 7% to 23%. Use peaked in 1979 (25%) and declined until 1991 (10%). Over the 1990s, use has gradually increased to the highest rate on record (26%) in 1999 and remains elevated at 23% in 2001.

- The use of **LSD** increased during the late 1960s from 3% in 1968 to 7% in 1970, and remained stable between 1970 through 1983. Between 1983 and 1987, use dropped significantly from 8% to 3%, and has since fluctuated nonsignificantly between 3% and 6%.

3.12 Public Health Planning Regions

(Table 3.12)

This section provides the 2003 drug estimates for the Ontario Ministry of Health's seven public health planning regions (Ontario Ministry of Health, 1999). The seven regions are delineated as such:

Toronto

South West

- Essex
- Kent, Lambton
- Elgin, Oxford, Middlesex
- Bruce, Grey, Perth, Huron

Central South

- Niagara
- Hamilton-Wentworth
- Brant, Haldimand-Norfolk

Central West

- Halton
- Peel
- Wellington, Dufferin
- Waterloo

Central East

- Northumberland, Victoria, Haliburton, Peterborough
- Durham
- York
- Simcoe

East

- Ottawa-Carleton
- Renfrew, Prescott & Russell, Stormont, Dundas & Glengarry
- Lanark/Leeds/Grenville, Hastings, Prince Edward, Frontenac, Lennox, Addington

North

- Algoma, Cochrane
- Manitoulin, Sudbury (R.M.), Sudbury (T.D.)
- Muskoka, Parry Sound, Nipissing, Timiskaming
- Thunder Bay, Kenora, Rainy River

Table 3.12: Percentage Reporting Drug Use During the Past Year, by Ontario Public Health Planning Region, 2003

	Toronto (N=) (1097)	South- West (934)	Central- South (218)	Central- West (1361)	Central- East (724)	East (1049)	North (1233)	Ontario (6616)
Alcohol	61.5 (55.8-66.9)	74.0* (66.6-80.2)	58.0 (45.2-69.8)	64.3 (57.8-70.3)	70.2 (62.3-77.0)	64.1 (58.7-69.2)	72.0* (67.0-76.6)	66.2 (64.1-68.4)
Binge Drinking	17.8** (14.5-21.7)	34.3* (26.8-42.8)	15.4 (5.1-38.3)	25.8 (20.6-31.6)	26.8 (20.3-34.4)	28.0 (22.3-34.4)	34.7** (29.9-39.9)	26.5 (24.4-28.7)
Cigarettes	15.5 (12.2-19.4)	24.5* (19.9-29.7)	14.0 (7.8-23.9)	18.3 (15.1-22.1)	19.1 (14.6-24.6)	18.2 (14.7-22.4)	25.6** (20.5-31.4)	19.2 (17.7-20.8)
Daily Smoking	10.6 (8.2-13.7)	17.6* (13.4-22.7)	6.1** (3.4-10.9)	13.6 (11.2-16.5)	14.2 (10.3-19.3)	12.2 (9.3-15.9)	19.8** (14.2-26.8)	13.6 (12.3-15.1)
Cannabis	24.7 (20.3-29.8)	37.3* (30.5-44.6)	11.6 (3.6-31.6)	28.4 (23.7-33.7)	31.1 (24.8-38.2)	30.2 (25.8-35.1)	35.0* (29.2-41.4)	29.6 (27.6-31.6)
Glue	3.5 (2.5-5.0)	1.2* (0.6-2.5)	2.3 (0.9-5.8)	3.4 (2.2-5.2)	3.7 (1.8-7.7)	2.8 (2.1-3.9)	2.0 (1.3-3.0)	2.8 (2.3-3.4)
Solvents	7.7 (5.2-11.2)	4.2 (2.7-6.4)	6.2 (2.2-15.8)	7.9* (5.8-10.7)	6.4 (4.3-9.5)	4.9 (3.3-7.2)	3.8** (3.0-4.9)	6.1 (5.2-7.2)
Barbiturates	1.3* (0.7-2.4)	3.3 (2.1-5.2)	2.0 (0.6-6.6)	2.6 (1.8-3.6)	4.2** (2.9-6.2)	2.1 (1.3-3.4)	2.6 (1.6-4.4)	2.5 (2.1-3.0)
Stimulants	3.8* (2.8-5.2)	6.6 (4.9-9.0)	3.7 (1.1-12.1)	6.5 (4.9-8.6)	5.8 (3.8-8.6)	5.6 (3.9-7.9)	7.8* (6.0-10.0)	5.8 (5.0-6.6)
Tranquillizers	1.4 (0.8-2.5)	2.9 (2.0-4.2)	1.4 (0.4-5.4)	2.3 (1.4-3.8)	2.5 (1.6-4.0)	2.1 (1.2-3.7)	2.7 (1.8-4.0)	2.2 (1.8-2.7)
Heroin	1.1 (0.6-2.1)	0.9 (0.5-1.6)	0.9 (0.2-5.2)	2.0 (1.3-3.0)	1.8 (0.9-3.7)	1.2 (0.7-1.9)	1.2 (0.7-2.2)	1.4 (1.1-1.7)
Methamphetamine ("Speed")	2.3 (1.4-3.8)	4.4 (2.8-6.9)	1.0 (0.3-3.6)	3.4 (2.2-5.0)	3.2 (1.8-5.4)	3.3 (2.0-5.3)	4.8* (3.3-6.9)	3.3 (2.8-4.0)
LSD	2.8 (1.7-4.7)	3.2 (2.0-5.1)	1.0 (0.3-3.0)	3.2 (2.2-4.8)	3.0 (1.8-5.0)	2.0 (1.1-3.5)	4.3** (3.0-6.0)	2.9 (2.4-3.5)
PCP	1.6 (0.9-2.8)	2.3 (1.5-3.5)	0.5 (0.1-2.8)	2.1 (1.6-2.8)	3.4 (1.9-6.2)	2.4 (1.6-3.5)	3.1* (2.2-4.3)	2.2 (1.9-2.7)
Hallucinogens	6.3* (4.6-8.5)	14.0* (10.3-18.9)	4.0 (0.9-16.7)	10.5 (7.8-13.8)	9.6 (6.3-14.3)	10.0 (6.8-14.3)	12.9* (9.8-16.8)	10.0 (8.8-11.4)
Cocaine	4.6 (3.2-6.7)	5.9 (4.1-8.4)	1.4* (0.5-4.0)	5.6* (4.4-7.1)	4.3 (2.4-7.6)	3.6 (2.8-4.7)	6.2** (4.6-8.2)	4.8 (4.2-5.5)
Crack	2.2 (1.2-4.0)	3.2 (2.0-5.2)	0.5* (0.1-2.8)	2.6 (1.5-4.5)	3.8 (2.1-7.0)	1.9 (1.2-3.0)	4.8** (3.5-6.6)	2.7 (2.2-3.3)
Ecstasy (MDMA)	3.6 (2.3-5.5)	6.0* (4.2-8.7)	1.9 (0.3-10.2)	4.5 (3.2-6.2)	3.3 (2.0-5.4)	3.1 (2.1-4.6)	4.6 (3.7-5.9)	4.1 (3.5-4.8)
Ice	0.8 (0.2-2.7)	1.4 (0.6-3.2)	1.3 (0.3-5.2)	1.1 (0.4-2.8)	0.9 (0.2-3.6)	1.4 (0.7-2.8)	1.3 (0.7-2.4)	1.2 (0.8-1.7)
GHB	0.8 (0.3-2.1)	0.8 (0.3-2.3)	†	†	1.1 (0.4-3.4)	0.6 (0.2-2.2)	1.3 (0.6-2.7)	0.7 (0.4-1.1)
Rohypnol	0.9 (0.4-2.0)	2.2 (1.2-4.1)	1.7 (0.5-5.9)	0.7 (0.3-1.8)	2.2 (0.9-5.3)	1.9 (1.0-3.7)	3.5* (1.8-6.7)	1.6 (1.2-2.2)
Ketamine	1.2 (0.5-3.1)	3.2 (1.9-5.4)	1.0 (0.2-5.6)	2.7 (1.7-4.4)	1.8 (0.8-4.2)	1.7 (1.1-2.7)	3.8 (1.9-7.4)	2.2 (1.8-2.9)
Ritalin (non-medical)	1.2** (0.7-2.1)	3.8* (2.5-5.6)	0.8* (0.2-2.8)	3.0 (2.0-4.5)	3.0 (2.2-4.1)	3.0 (2.0-4.6)	6.1** (4.6-8.2)	2.9 (2.5-3.5)

Notes: (1) entries in brackets are 95% confidence intervals; (2) † estimate suppressed or <0.5%; (3) binge drinking is defined as consuming 5 or more drinks on one occasion at least once during the 4 weeks before the survey; (4) daily smoking is defined as having at least one whole cigarette a day during the past 12 months; (5) solvents include nail polish remover, paint thinner, gasoline; (6) hallucinogens excludes LSD and PCP, includes mescaline and psilocybin; (7) ice is a crystallized, smokeable form of methamphetamine; (8) *p<.05, **p<.01 significant difference, public health region versus Ontario.

Source: OSDUS, Centre for Addiction & Mental Health

4. SUMMARY AND DISCUSSION

The Public Health Approach towards Drug Use

The *OSDUS* performs several public health functions, namely: identifying the extent of drug use among the general population; identifying its timing and pattern during the life course; tracking trends in the prevalence and incidence over time; and, identifying risk and protective factors. As well, the *OSDUS* provides a knowledge-base for designing preventive programs and health promotion programs; informing public health policy; and disseminating information to the general public.

Study Limitations and Data Interpretation

Before addressing our findings, it is important to first highlight some of the limitations of this study. First, we must recognize that these data are based on self-reports, which cannot be readily verified. However, there is evidence that conditions of anonymity (e.g., class administration of surveys) yield reasonably accurate reports of drug use (Gfroerer, Wright, & Kopstein, 1997). Still, we must acknowledge that self-reported drug use likely underestimates the true rate by some unknown magnitude, but underreporting is not likely to vary over time. Thus, estimates of change should remain valid and unbiased.

Second, another factor that can deflate drug use estimates is the bias caused by non-respondents. It is likely that students who are absent from school would report higher rates of drug use than those who attend regularly. However, the rate of student completions has remained fairly stable across time, and so the trends reported should remain valid.

Third, our findings cannot be generalized to adolescents who are not attending school (e.g.,

drop-outs, street youth, those in the workplace). Drug use in this group can be appreciably different from what is found in the mainstream student population (Smart, Adlaf, Walsh, & Zdanowicz, 1994; Smart, Adlaf, Walsh, & Zdanowicz, 1992).

Finally, the data reflect a snapshot in time; consequently, because we do not follow the same students across time, we cannot identify causes of individual change or the temporal ordering of effect. Also, we cannot determine from these data to what extent our findings are adolescent-limited – that is, whether drug use declines or ceases with the transition into young adulthood.

Despite these limitations, such monitoring studies excel at identifying the extent and change of various health behaviours that have important current and future implications for adolescent well-being. Indeed, such studies help to identify which population groups are at the greatest risk for poor health outcomes, help to identify areas requiring more research, and help to identify potential future trends that have implications for future service and programming needs.

Still, the array of findings in such a large study can be numerous and complex. Indeed, some findings are more reliable than others. For example, random variation causes us to be cautious in interpreting change between two points in time. Therefore, we place more emphasis on steady trends over time.

Although a majority of drugs examined had past year prevalence rates below 10%, it would be inappropriate to dismiss these rates as unimportant. Whether a given drug poses significant problems depends not only on the percentage using, but also on the odds of dependency and other hazards as well. Thus, it would be irresponsible to ignore the harm

caused by drugs that are used by a small group. Even low rates of use represent large numbers of students. If we extrapolate our estimates to the total population of students in grades 7 through 12 in Ontario (approximately 970,000 students), we estimate that about 13,100 (1.4%) have used heroin in the past year; about 38,000 (4.2%) used cannabis daily; and about 16,000 (1.7%) sought medical attention for their alcohol use.

Some Encouraging Findings

There are certain findings in this report that should be viewed as encouraging. We have ordered these findings according to their public health importance.

- **Cigarettes:** The majority of students do not smoke cigarettes. In fact, the prevalence of smoking declined in 2003 and is at its lowest point (19%) since monitoring began in 1977. Among the demographic subgroups, only 10th-graders show a significant decline in 2003 compared to 2001. However, most subgroups do show significant decreases in smoking compared to their 1999 estimates.

- Among all students, use of **any illicit drug excluding cannabis** is currently lower in 2003 compared to 2001 and 1999. This short-term decline is evident among males, females, grades 8 to 11, and all regions except Toronto – which remained stable and low.

- The majority of students (about 68%) **have not used an illicit drug**, including cannabis, in the past year. Further, the majority of drug users report infrequent use – once or twice in the past year.

- Student use of **ecstasy** showed the first decrease since monitoring began in 1991. The 2003 level is significantly lower than that found in 2001, but does resemble that in 1999. The decrease is also evident among males, 8th- and 9th-graders, and students in the West.

- Use of **LSD** continued on the downward trend that started in 1995. The 2003 estimate is significantly lower than that found in 2001 and 1999. This short-term decline is also found among males, females, all grades except the 7th, and all regions except Toronto. The decline in LSD use corresponds to a decrease in reported of availability of the drug, and increased disapproval of use.

- **Other hallucinogen** use decreased between 1999 and 2003. Those in 8th- and 10th-grade also show this short-term decrease.

- There is some evidence to suggest that students today **begin smoking cigarettes at a later age** (about age 13), compared to students two decades ago (about age 11). The average age of onset for alcohol use has not changed over the long-term (about age 13).

- **Drinking and driving** among licensed students remained stable at about 14%. This level is markedly lower than that of 1977 (58%).

- In 2003, **perceptions of risk regarding ecstasy use** increased compared to 2001. Thus, students today seem to be more aware of the potential physical harm caused by ecstasy.

Some Public Health Flags

The following findings should be viewed as potential public health concerns. We begin with tobacco and alcohol because these legal drugs – rather than illegal drugs – are responsible for greater harm to the physical, psychological, and social well-being of youth, as well as to the population as a whole.

- **Cigarettes:** Although student smoking declined between 2001 and 2003, there is still a significant proportion (one-in-five) that does smoke (about 185,800 students). Cigarette smoking is by far the greatest public health issue

impinging on a population's health, as is it the leading preventable cause of disease.

- **Heavy Drinking:** while rates of alcohol use have not increased in 2003, trend data show that heavy drinking (i.e., binge drinking, getting drunk) still remains at an elevated level among all students compared to a decade ago.

- **Drugs and Vehicles:** Despite long-term declines in drinking and driving, there are still about one-in-seven (14%) licensed students who drink and drive. A somewhat higher percentage (20%) of licensed students report driving after using cannabis. Moreover, over one-quarter (29%) of all students report being a passenger with a driver who had been drinking, and 23% rode with a driver who had been using drugs. These behaviours increase the risk of unintentional injuries – a leading cause of death among youth.

- **Cocaine:** Since 1993, cocaine use has been steadily increasing among all students, and among all demographic subgroups, except Toronto students. There was a significant increase in cocaine use among all students between 1999 and 2003. Students in grade 12, and Northern students, also show marked increases in cocaine use over the short-term.

- **Crack:** Since 1991, crack use has increased modestly among the total sample. Northern students also report an increased rate of crack use in 2003 compared to 2001.

- **Hallucinogens:** Compared to 1979, a substantially larger percentage of students today use hallucinogens, such as mescaline and psilocybin. Among Ontario students, hallucinogens are the most prevalent illicit drugs, next to cannabis.

- **Cannabis use among females** increased between 1999 and 2003.

- **Daily cannabis use** among cannabis users has increased significantly over the long- and short-term.

- The average **age of onset for cannabis use** has decreased in recent years. Thus, youth today are trying cannabis for the first time at a younger age compared to youth a decade ago.

- **Attitudes and Perceptions:** Although the perceived risk surrounding ecstasy use has increased, perceptions about the risks of using cannabis, cocaine, LSD, and daily drinking seem to be weakening over time. The reported availability of cannabis and cocaine has increased over time.

Substance Use and Mental Health

There is an overlap between alcohol and drug use problems and mental health problems among youth. The 2003 *OSDUS* shows that about 8% (81,100 Ontario students) report both hazardous drinking *and* elevated psychological distress (symptoms of anxiety and depression).

Health Objectives

As one of the health objectives of the Ontario Tobacco Strategy, the Ontario Ministry of Health has established an objective to reduce teen smoking to 10% by 2005 (Ontario Tobacco Research Unit, 2002, December). The 2003 *OSDUS* found that about 14% of students in grades 7 to 12 smoke cigarettes on a daily basis.

Public health professionals in the US (U.S. Department of Health and Human Services, 2000) have outlined a health objective for the year 2010 recommending that the percentage of adolescents who use *no* alcohol or illicit drugs in the past 30 days at 89% or higher. The 2003 *OSDUS* found that only 50% of students in grades 7 to 12 did not use alcohol or cannabis during the month before the survey.

Important Correlates of Drug Use

The strongest correlate of drug use found in this report was **grade or age** (see Table 4.2).

Generally, drug use is more likely to occur as grade level increases, typically peaking in grade 11 or 12. The exception to this is inhalant use, which is most prevalent among 7th- and 8th- graders.

There is a prominent pattern of increasing drug use that corresponds to the transition from grade 8 to 9 (about half of the drug use measures increased). This suggests that the transition from elementary school to high school may be a high-risk time for either the initiation or the increased likelihood of drug use.

Sex is also associated with drug use, with males showing significantly higher levels on 8 of 21 drug measures shown in Table 4.2. Females are more likely to use stimulants (e.g., diet pills).

Region is associated with the use of 5 out of 21 drug measures shown in Table 4.2.

Compared to the *provincial average*:

- Toronto students are less likely to: smoke cigarettes, binge drink, use stimulants, hallucinogens, and Ritalin.
- Northern Ontario students are more likely to: smoke cigarettes, binge drink, use stimulants, hallucinogens, and Ritalin.
- Western and Eastern students do not differ from the provincial average on any of the measures.

Possibilities for Prevention

Research has shown that preventing adolescents from using drugs, including alcohol and tobacco, is difficult, and, at best, effects are usually short-term. However, delaying the onset of use, and preventing or minimizing harmful consequences from drug use may be more feasible goals (Paglia & Room, 1999; Rosenbaum, 1999).

Our survey shows that problem use of alcohol and drugs, such as cannabis, are not rare among youth. We also found that potentially harmful consequences, such as binge drinking and becoming drunk, driving while intoxicated, and being a passenger with an intoxicated driver, are not uncommon occurrences. Thus, there is a need for programs to focus on these harmful consequences from substance use. Indeed, special efforts should be made to address the high rate of driving after cannabis use among youth – a problem that, to date, has received relatively little attention.

In regards to efforts to reduce drug use, our findings show that attitudes and beliefs about cannabis correlate with use of that drug over time, but other drugs such as cocaine and LSD do not show this robust relationship over time. This supports the notion that not only are attitudes drug-specific, but also that the attitude-behaviour relationship is drug-specific. Thus, any prevention effort should provide drug-specific information.

Finally, school-based drug education should intensify between grade 7 and 9, as this is the time most likely for initiation. For a comprehensive review of effective prevention programs, see Roberts et al., 2002. (Roberts et al., 2002).

Comparisons to Other Surveys

By comparing the 2003 *OSDUS* drug estimates with those from similar school surveys conducted elsewhere, we can gain some perspective on the extent of drug use among Ontario students.

Canadian School Surveys

In the spring of 2002, the provinces of Nova Scotia (Poulin & Wilbur, 2002), New Brunswick (New Brunswick Department of Health and Wellness, 2003), and Prince Edward Island (PEI) (Van Til & Poulin, 2002) each conducted a standardized drug use survey of students in grades 7, 9, 10 and 12. Student surveys were

also conducted in Alberta in 2002 (Alberta Alcohol and Drug Abuse Commission, 2003), and in Manitoba in 2001 (Addictions Foundation of Manitoba, 2001). For comparison purposes, Table 4.3 presents the past year prevalence for certain drugs in each of the six provincial surveys.

In general, compared to students in other Canadian provinces, Ontario students are *less likely* to: smoke cigarettes, use cannabis, tranquilizers, and non-medical Ritalin. On the other hand, Ontario students are *more likely* to: drink alcohol, use cocaine or crack, and ride in vehicle with a driver who was drinking alcohol. Ontario students *are similar* to other Canadian students with respect to: binge drinking, inhalant use, any hallucinogen use, heroin use, ecstasy use, and drinking and driving (with the exception of New Brunswick, which is lower).

American School Surveys

Overall, the 2003 *OSDUS* drug estimates are similar to those recently found in American school surveys, such as the 2002 *Monitoring the Future* survey (Johnston et al., 2003) (see Table 4.4) and the 2001 *Youth Risk Behavior Survey* (Centers for Disease Control and Prevention, 2002). Three exceptions are: alcohol use (including drunkenness) cannabis use, and hallucinogens other than LSD and PCP, all of which are more prevalent among Ontario youth compared to American youth (MTF survey).

Similarly, American survey data mirror the *OSDUS* trends in the decrease in cigarette smoking, the recent decreases in ecstasy, LSD use, and any illicit drug use excluding cannabis (Johnston et al., 2003). However, Ontario students have shown increases in heavy drinking and hallucinogen use over the long-term, and an increase in cocaine use over the short-term, which are not paralleled in the US.

Future *OSDUS* Monitoring

As new drugs come on to the scene, it is important to monitor use and perceptions about them. Monitoring health risk behaviours, such as substance use, over time provides valuable information about determinants, changes, and co-occurrences of the behaviours. With these data, we can evaluate the effects of policies (e.g., smoking on school property), education programs, and whether health objectives are achieved. Finally, scientific surveys such as the *OSDUS*, provide a useful tool to compare across different youth populations.

In summary, great strides were made during the 1980s in reducing drug use among Ontario students. But history has shown that the values and lifestyles of adolescents can change quickly, and so too can the character of drug use. Although it is premature to know confidently what the near future holds for adolescent drug use, we can closely monitor changes to ensure that any programmatic responses are based not on sensationalized fears, but rather on sound scientific information.

Readers should note that there is a companion *OSDUS* report titled *The Mental Health and Well-Being of Ontario Students*, which addresses trends in other important public health issues such as physical activity, mental health, gambling, and violence. The next release will be in the spring of 2004.

Table 4.1: Significant Changes in Past Year Drug Use between 1999 and 2003 by Subgroup, *OSDUS*, Grades 7 to 12

	<i>Cigarettes</i>	<i>Alcohol</i>	<i>Binge Drinking</i>	<i>Cannabis</i>	<i>Glue</i>	<i>Other Solvents</i>	<i>Barbiturates (NM)</i>	<i>Stimulants (NM)</i>	<i>Tranquillizers (NM)</i>	<i>Heroin</i>	<i>Meth ("Speed")</i>	<i>LSD</i>	<i>PCP</i>	<i>Other Hallucinogens</i>	<i>Cocaine</i>	<i>Crack</i>	<i>Ecstasy</i>	<i>GHB</i>	<i>Rohypnol</i>	<i>Any Illicit Drug, excluding Cannabis</i>
Total	↓ ▽						↓ ▽				▽	↓ ▽		▽	△		↓			↓ ▽
Males	▽										▽	↓ ▽					↓			▽
Females	▽			△			↓ ▽					▽								▽
Grade 7																				
Grade 8	▽											▽		▽			↓			▽
Grade 9	▽											▽		▽			↓			▽
Grade 10	↓ ▽						↓					↓ ▽		▽			↓			▽
Grade 11	▽											▽								▽
Grade 12											▽	▽			△					
Toronto																				
North	▽						▽					▽			↑ △	↑				▽
West	▽											↓ ▽					↓			▽
East	▽											▽								▽

Notes: (1) ↓ ↑ significant decrease or increase between 2001 and 2003, p<.01; (2) △ ▽ significant decrease or increase between 1999 and 2003, p<.01; (3) NM = non-medical use; (4) table excludes ice, Ketamine, and non-medical Ritalin use.

Source: *OSDUS*, Centre for Addiction & Mental Health

Table 4.2: Significant Subgroup Differences in the 2003 OSDUS

	Cigarettes	Alcohol	Binge Drinking	Cannabis	Glue	Other Solvents	Barbiturates (NM)	Stimulants (NM)	Tranquillizers (NM)	Heroin	Meth ("Speed")	LSD	PCP	Other Hallucinogens	Cocaine	Crack	Ecstasy	GHB	Rohypnol	Ketamine	Ritalin (NM)	
Males vs Females	ns	*	***	ns	ns	ns	ns	***	*	***	ns	*	***	***	ns	ns	ns	ns	ns	*	ns	
		M↑	M↑					F↑	M↑	M↑		M↑	M↑	M↑							M↑	
Overall Grade Effect	***	***	***	***	**	***	ns	***	***	ns	***	***	***	***	***	ns	***	ns	ns	***	***	
(compared to previous grade)	8↑7 9↑8 11↑10	8↑7 9↑8 10↑9 11↑10	9↑8 10↑9 11↑10	8↑7 9↑8 10↑9 11↑10		10↓9		8↑7 11↑10			9↑8 12↓11	9↑8	9↑8 10↑9	9↑8 10↑9 11↑10	9↑8		9↑8				11↑10	9↑8
Overall Region Effect	*	ns	***	ns	ns	ns	ns	**	ns	ns	ns	ns	ns	**	ns	ns	ns	ns	ns	ns	ns	***
(region compared to Ontario)	T↓ N↑		T↓ N↑					T↓ N↑						T↓ N↑								T↓ N↑

Notes: (1) overall tests of effect are based on a univariate chi-square statistic: *p<.05, **p<.01, ***p<.001; (2) subgroup comparisons are based on **adjusted logistic regressions**;

(3) ns=nonsignificant; (4) table excludes ice.

Source: OSDUS, Centre for Addiction & Mental Health

Table 4.3: Past Year Drug Use: 2003 OSDUS versus Findings from Other Canadian Provincial Student Surveys

	2003 OSDUS	2002 Nova Scotia	2002 New Brunswick	2002 P.E.I.	2002 Alberta	2001 Manitoba
	Grades 7 to 12 N=6,616	Grades 7, 9, 10, 12 N=4,247	Grades 7, 9, 10, 12 N=3,854	Grades 7, 9, 10, 12 N=2,416	Grades 7 to 12 N=3,394	Grades 9 to 12 N=4,680
	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)	%	%
Cigarettes	19.2 (17.7-20.8)	23.2 (21.4-25.0)	20.7 (18.9-22.5)	18.3 (16.8-19.9)	16.2	39.5
Alcohol	66.2 (64.1-68.4)	51.7 (49.8-53.6)	53.2 (51.1-55.3)	48.5 (46.8-50.1)	56.3	80.4
Binge Drinking (past month)	26.5 (24.4-28.7)	29.0 n/a	27.4 n/a	26.0 n/a	n/a	n/a
Cannabis	29.6 (27.6-31.6)	36.5 (34.7-38.3)	34.9 (32.9-37.0)	24.1 (22.5-25.8)	27.6	37.9
Glue or other Solvents	7.0 (6.0-8.1)	4.9 (4.1-5.7)	5.3 (4.6-6.1)	6.1 (5.2-7.1)	5.6	2.3
Tranquillizers (NM)	2.2 (1.8-2.7)	4.7 (4.1-5.3)	5.0 (4.3-5.7)	4.1 (3.4-5.0)	n/a	n/a
LSD	2.9 (2.4-3.5)	5.5 (4.7-6.3)	5.2 (4.3-6.0)	4.0 (3.3-4.9)	n/a	3.8
PCP	2.2 (1.8-2.7)	3.2 (2.6-3.8)	3.9 (3.2-4.6)	2.2 (1.7-2.9)	n/a	n/a
Hallucinogens	10.0 (8.8-11.4)	12.2 (11.0-13.4)	11.6 (10.4-12.8)	6.7 (5.8-7.8)	10.4	15.1
Cocaine or Crack	5.4 (4.7-6.2)	3.9 (3.2-4.6)	3.6 (2.9-4.3)	2.8 (2.2-3.5)	2.8	3.3-4.5*
Heroin	1.4 (1.1-1.7)	1.6 (1.2-2.0)	1.9 (1.5-2.3)	2.1 (1.6-2.8)	1.4	n/a
Ecstasy	4.1 (3.5-4.8)	4.4 (3.7-5.1)	4.0 (3.3-4.7)	3.9 (3.2-4.8)	5.3	4.3
Ritalin (NM)	2.9 (2.5-3.5)	7.5 (6.5-8.5)	5.8 (4.9-6.7)	6.8 (5.9-7.9)	n/a	n/a
Drinking & Driving (among Drivers)	13.8 (11.9-16.0)	14.8 n/a	8.5 n/a	19.0 n/a	n/a	n/a
Been a Passenger with a Driver who was Drinking	29.2 (27.1-31.3)	22.8 n/a	25.6 n/a	20.5 n/a	n/a	n/a

Notes: (1) CI = confidence interval; (2) NM = non-medical use; (3) n/a = not available; (4) confidence intervals not available for the Alberta and Manitoba surveys.

* 3.3% used crack, 4.5% used cocaine.

Table 4.4: Past Year Drug Use: 2003 OSDUS versus 2002 Monitoring the Future (MTF) (USA), for Grades 8, 10, and 12

	Grade 8		Grade 10		Grade 12	
	2003 OSDUS % (95% CI)	2002 MTF %	2003 OSDUS % (95% CI)	2002 MTF %	2003 OSDUS % (95% CI)	2002 MTF %
Alcohol	48.9 (44.5-53.4)	38.7	75.1 (71.1-78.7)	60.0	82.5 (77.7-86.4)	71.5
Drunk (past month)	6.2 (4.3-9.0)	6.7	25.8 (21.0-31.2)	18.3	38.7 (32.7-45.1)	30.3
Cannabis	10.7 (6.8-16.4)	14.6	35.9 (31.4-40.8)	30.3	44.8 (39.4-50.4)	36.2
Glue or other Solvents	10.8 (8.1-14.3)	7.7	4.9 (3.6-6.6)	5.8	4.4 (3.0-6.4)	4.5
Barbiturates (NM)		n/a		n/a	1.8 (1.0-3.2)	6.7
Stimulants (NM)	3.7 (2.5-5.5)	5.5	6.6 (4.8-9.1)	10.7	7.8 (5.9-10.1)	11.1
Tranquillizers (NM)	1.2 (0.7-2.0)	2.6	2.4 (1.7-3.5)	3.3	2.7 (1.8-4.2)	7.7
LSD	1.1 (0.6-2.2)	1.5	4.2 (2.8-6.3)	2.6	2.7 (1.7-4.2)	3.5
PCP		n/a		n/a	2.7 (1.8-4.0)	1.1
Hallucinogens	2.6 (1.6-4.2)	2.1	12.5 (9.9-15.7)	4.0	15.3 (12.3-18.8)	5.4
Methamphetamine	0.9 (0.5-1.6)	2.2	4.2 (2.8-6.2)	3.9	3.6 (2.6-5.0)	3.6
Ice		n/a		n/a	1.5 (0.7-3.2)	3.0
Cocaine	1.9 (1.1-3.1)	2.3	4.6 (3.3-6.2)	4.0	6.7 (5.1-8.8)	5.0
Crack	1.7 (1.0-3.0)	1.6	3.0 (2.0-4.5)	2.3	2.5 (1.7-3.7)	2.3
Heroin	0.8 (0.4-1.6)	0.9	2.0 (1.2-3.5)	1.1	1.1 (0.6-2.0)	1.0
Ecstasy	0.8 (0.4-1.4)	2.9	4.6 (3.2-6.4)	4.9	7.2 (5.5-9.4)	7.4
GHB	<0.5%	0.8	0.9 (0.3-2.3)	1.4	<0.5%	1.5
Rohypnol	1.2 (0.5-2.7)	0.3	2.0 (1.0-4.0)	0.7	1.3 (0.5-3.2)	1.6
Ketamine	<0.5%	1.3	1.6 (0.8-3.2)	2.2	3.7 (2.1-6.5)	2.6
Ritalin (NM)	1.2 (0.6-2.4)	2.8	3.3 (2.2-5.0)	4.8	3.1 (2.0-4.6)	4.0
Steroids (lifetime)	1.8 (0.8-4.4)	2.5	3.8 (2.4-6.1)	3.5	5.3 (3.4-8.0)	4.0

Notes: (1) shaded percentages indicate level significantly higher among Ontario students; (2) CI = confidence interval; (3) NM = non-medical use; (4) n/a = not available

5. APPENDIX

Table A1

District School Boards in Ontario by Region

<p>Toronto TORONTO CATHOLIC DISTRICT TORONTO DISTRICT</p>	<p>Western Ontario AVON MAITLAND DISTRICT BLUEWATER DISTRICT BRANT HALDIMAND NORFOLK CATHOLIC DISTRICT BRUCE-GREY CATHOLIC DISTRICT CONSEIL DES ECOLES CATHOLIQUES DE SUD-OUEST CONSEIL DE DISTRICT DU CENTRE SUD-OUEST DISTRICT OF NIAGARA DUFFERIN-PEEL CATHOLIC DISTRICT ENGLISH-LANGUAGE #38 CATHOLIC DISTRICT GRAND ERIE DISTRICT GREATER ESSEX COUNTY DISTRICT HALTON CATHOLIC DISTRICT HALTON DISTRICT HAMILTON –WENTWORTH CATHOLIC DISTRICT HAMILTON-WENTWORTH DISTRICT HURON PERTH CATHOLIC DISTRICT LAMBTON KENT DISTRICT LONDON DISTRICT CATHOLIC NIAGARA CATHOLIC DISTRICT PEEL DISTRICT ST. CLAIR CATHOLIC DISTRICT THAMES VALLEY DISTRICT UPPER GRAND DISTRICT WATERLOO CATHOLIC DISTRICT WATERLOO REGION DISTRICT WELLINGTON CATHOLIC DISTRICT WINDSOR-ESSEX CATHOLIC DISTRICT</p>
<p>Eastern Ontario ALGONQUIN AND LAKESHORE CATHOLIC DISTRICT CATHOLIC DISTRICT OF EASTERN ONTARIO CONSEIL CATHOLIQUE CENTRE-SUD CONSEIL CATHOLIQUE DE L'EST ONTARIEN CONSEIL DES ÉCOLES PUBLIQUES DE L'EST DE L'ONTARIO CONSEIL DES ÉCOLES CATHOLIQUES DE LANGUE FRANÇAISE DU CENTRE-EST DURHAM CATHOLIC DISTRICT DURHAM DISTRICT HASTINGS AND PRINCE EDWARD DISTRICT KAWARTHA PINE RIDGE DISTRICT LIMESTONE DISTRICT OTTAWA-CARLETON CATHOLIC DISTRICT OTTAWA-CARLETON DISTRICT PETERBOROUGH VICTORIA NORTHUMBERLAND & CLARINGTON CATHOLIC DISTRICT RENFREW COUNTY CATHOLIC DISTRICT RENFREW COUNTY DISTRICT SIMCOE COUNTY DISTRICT SIMCOE MUSKOKA CATHOLIC DISTRICT TRILLIUM LAKELANDS DISTRICT UPPER CANADA DISTRICT YORK CATHOLIC DISTRICT YORK REGION DISTRICT</p>	<p>Northern Ontario ALGOMA DISTRICT CONSEIL CATHOLIQUE FRANCO-NORD CONSEIL CATHOLIQUE DES GRANDES RIVIÈRES CONSEIL CATHOLIQUE DU NOUVEL ONTARIO CONSEIL DU GRAND NORD DE L=ONTARIO CONSEIL DU NORD-EST DE L=ONTARIO CONSEIL CATHOLIQUE DES AURORES BORÉALES DISTRICT ONTARIO NORTH EAST HURON-SUPERIOR CATHOLIC DISTRICT KEEWATIN-PATRICIA DISTRICT KENORA CATHOLIC DISTRICT LAKEHEAD DISTRICT NEAR NORTH DISTRICT NIPISSING-PARRY SOUND CATHOLIC DISTRICT NORTHEASTERN CATHOLIC DISTRICT NORTHWEST CATHOLIC DISTRICT RAINBOW DISTRICT RAINY RIVER DISTRICT SUDBURY CATHOLIC DISTRICT SUPERIOR-GREENSTONE DISTRICT SUPERIOR NORTH CATHOLIC DISTRICT THUNDER BAY CATHOLIC DISTRICT</p>

Table A2

**Student Enrolment in Public and Catholic
School Boards in Ontario, by Region and Grade Level**

Region	Grades 7 and 8	Grades 9 to 12
Toronto	48,380 ^a	128,717
	299 ^b	796
Northern Ontario	23,859	58,492
	409	1,001
Western Ontario	116,736	278,785
	722	1,725
Eastern Ontario	84,363	198,286
	522	1,227
Total	273,338	664,280
	1,952	4,749

Source: 1996-1997 MIDENT File, tabulated by ISR
^a enrolment ^b allocation

Table A3
Student Participation Rate by Year of Survey

		1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
Total Sample	Selected (N)	(5077)	(5092)	(4832)	(4781)	(4640)	(5167)	(5231)	(6564)	(6094)	(9411)
	Participated %	81.8	83.8	81.0	83.0	77.3	75.6	76.7	76	71	72
	Absent (%)	14.0	12.3	15.0	14.0	13.3	15.5	14.7	12	13	12
	No consent (%)	4.2	3.9	4.0	3.0	9.4	8.9	8.7	12	16	16
Grade 7	Selected (N)	(1257)	(1440)	(1340)	(1106)	(1083)	(1165)	(1054)	(1030)	(1016)	(1446)
	Participated (%)	84.5	86.2	83.7	86.3	83.3	80.4	81.1	76	75	68
	Absent (%)	6.7	6.4	6.8	5.2	7.7	6.2	4.6	10	7	7
	No consent (%)	8.8	7.4	9.5	8.5	9.0	13.4	14.2	14	18	25
Grade 8	Selected (N)								(1061)	(1038)	(1449)
	Participated (%)								76	68	68
	Absent (%)								10	8	9
	No consent (%)								14	24	23
Grade 9	Selected (N)	(1315)	(1206)	(1265)	(1029)	(1248)	(1366)	(1442)	(1201)	(1017)	(1671)
	Participated (%)	82.3	84.4	82.5	87.9	81	77.9	80.4	77	70	75
	Absent (%)	13.2	10.5	13.3	10.3	8.7	10.9	12.1	9	12	12
	No consent (%)	4.5	5.1	4.2	1.8	10.3	11.2	7.4	14	18	13
Grade 10	Selected (N)								(855)	(1177)	(1654)
	Participated (%)								76	70	73
	Absent (%)								10	16	14
	No consent (%)								14	14	13
Grade 11	Selected (N)	(1280)	(1341)	(1115)	(1392)	(1068)	(1270)	(1075)	(1046)	(874)	(1672)
	Participated (%)	79.5	83.6	78.8	81.3	67.6	74.2	75	73	68	72
	Absent (%)	17.6	14.4	19.9	16.4	17.5	18.4	14.9	17	18	14
	No consent (%)	3.0	2.0	1.3	2.3	14.9	7.4	10.3	10	14	14
Grade 12	Selected (N)								(789)	(584)	(1519)
	Participated (%)								76	68	72
	Absent (%)								19	23	19
	No consent (%)								5	9	9
Toronto	Selected (N)	(1140)	(1187)	(856)	(1060)	(1117)	(1113)	(1273)	(1139)	(734)	(1617)
	Participated (%)	75.1	78.4	77	81.1	80.2	69.7	77.5	74	76	69
	Absent (%)	17.7	14.2	18.6	15.7	12.8	23	15.8	15	12	15
	No consent (%)	7.2	7.3	4.4	3.2	7.0	7.3	6.8	11	12	16
West	Selected (N)	(1914)	(1917)	(2211)	(2054)	(2061)	(2261)	(1992)	(2321)	(2360)	(3628)
	Participated (%)	83.9	85.3	81	81.9	74.4	76.8	77.5	73	66	71
	Absent (%)	12.2	11.6	14.3	9.6	13.8	12.9	15.4	13	14	11
	No consent (%)	3.9	3.1	4.7	3.6	11.8	10.3	7.1	13	20	18
East	Selected (N)	(1397)	(1404)	(1339)	(1340)	(1209)	(1407)	(1476)	(1881)	(1552)	(2298)
	Participated (%)	83.5	85.1	81.6	85.3	78.7	78.2	74.3	79	70	76
	Absent (%)	14	11.1	14.5	11.8	12.7	13.4	13.4	10	12	12
	No consent (%)	2.5	3.8	4.0	2.4	8.6	8.4	12.4	11	17	12
North	Selected (N)	(626)	(584)	(426)	(327)	(253)	(386}	(490)	(1223)	(1448)	(1868)
	Participated (%)	83.9	86.5	87.6	86.2	81	76.2	78.6	77	76	70
	Absent (%)	12.9	13.5	12.4	11.6	14.2	16.3	12.7	13	14	13
	No consent (%)	3.2	0	0	2.1	4.7	7.5	8.8	10	10	17

Notes: Surveys between 1985 and 1997 included grades 7, 9, 11, and 13 only; surveys in 1999 and 2001 included grades 7 to 13; the 2003 survey included grades 7 to 12.

Source: *OSDUS*, Centre for Addiction & Mental Health; tabulated by ISR.

Table A4

Sample Demographics by Year of Survey

	1977		1979		1981		1983		1985		1987		1989		1991		1993		1995		1997		1999		2001		2003		
	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	(N) ^a	% ^b	
Male	(1841)	46.9	(1988)	50.7	(1530)	52.5	(1784)	49.5	(1603)	51.2	(1663)	48.9	(1509)	49.6	(1554)	52.8	(1270)	49.4	(1412)	48.9	(1438)	47.3	(2252)	50.8	(1917)	49.8	(3163)	48.3	
Female	(2086)	53.1	(1932)	49.3	(1461)	47.5	(1830)	50.5	(1543)	48.8	(1713)	51.1	(1531)	50.4	(1407)	47.2	(1347)	50.6	(1495)	51.1	(1634)	52.7	(2195)	49.2	(1981)	50.2	(3453)	51.7	
Grade:																													
7	(1287)	32.8	(1267)	32.3	(1112)	32.7	(1539)	38.9	(1054)	32.4	(1239)	31.9	(1121)	32.3	(941)	32.1	(894)	29.5	(927)	30.3	(851)	31.1	(766)	16.0	(750)	17.1	(947)	14.9	
8																						(798)	16.0	(691)	14.6	(976)	14.3		
9	(1578)	40.2	(1545)	39.4	(1004)	38.7	(1149)	34.4	(1078)	35.1	(1017)	32.9	(1042)	38.1	(897)	33.2	(1003)	35.4	(1050)	34.7	(1152)	34.0	(905)	21.7	(702)	20.8	(1254)	18.4	
10																						(638)	13.7	(806)	21.6	(1181)	18.0		
11	(1062)	27.0	(1108)	28.3	(894)	28.6	(926)	26.7	(1014)	32.5	(1120)	35.2	(877)	29.7	(1123)	34.6	(720)	35.1	(930)	35.0	(1069)	34.9	(750)	18.7	(561)	15.7	(1188)	18.3	
12																						(590)	13.8	(388)	10.2	(1070)	16.1		
Mean Age (sd)	n/a		n/a		n/a		14.1		14.5		14.5		14.4		14.6		14.6		14.5		14.4		15.0		14.8		15.0		
							(1.8)		(1.8)		(1.8)		(1.7)		(1.9)		(1.7)		(1.7)		(1.7)		(1.8)		(1.7)		(1.8)		
Region:																													
Toronto	(1486)	37.8	(1115)	28.4	(494)	21.9	(759)	21.2	(574)	22.3	(706)	21.4	(453)	18.0	(601)	19.4	(642)	20.4	(647)	20.2	(715)	19.6	(740)	18.0	(533)	19.8	(1097)	18.3	
North	(509)	13.0	(624)	15.9	(356)	8.9	(351)	8.7	(401)	11.0	(417)	9.7	(256)	9.0	(256)	7.8	(156)	8.5	(220)	8.4	(291)	8.0	(808)	8.5	(1014)	9.0	(1285)	7.9	
East	(843)	21.5	(778)	19.5	(1022)	22.6	(1035)	29.8	(917)	27.5	(948)	26.8	(926)	28.2	(852)	29.2	(697)	28.2	(798)	28.8	(903)	29.5	(1367)	30.7	(926)	28.2	(1721)	29.4	
West	(1089)	27.7	(1403)	35.8	(1138)	46.6	(1469)	40.3	(1254)	39.1	(1305)	42.2	(1405)	44.8	(1252)	43.7	(1122)	42.9	(1242)	42.7	(1163)	42.8	(1532)	42.7	(1425)	43.0	(2513)	44.4	
Total	3927		3920		3010		3614		3146		3376		3040		2961		2617		2907		3072		4447		3898		6616		

Notes: ^a Based on actual sample (unweighted); ^b Based on weighted data; the 7 regions sampled in 1977 and 1979 correspond approximately to the 4 regions sampled since 1981; NA = not available

Source: *OSDUS*, Centre for Addiction & Mental Health

Table A5

Design Effects (DEFFs) for Drug Estimates by Year of Survey

	1981	1983	1985	1987	1989	1991	1993	1995	1997	1999	2001	2003
Drug:												
Alcohol	5.64	4.61	2.28	1.38	1.56	1.23	3.13	1.46	1.23	3.73	4.65	2.63
Cannabis	2.08	3.34	1.03	1.83	3.76	4.04	2.48	1.77	3.49	2.94	3.58	3.46
Glue	3.25	2.16	3.98	5.19	3.39	2.43	1.42	4.1	1.47	3.59	3.67	3.24
Solvents	0.94	0.75	1.00	3.67	0.6	0.95	0.9	0.73	0.73	1.91	3.00	1.97
Barbiturates (NM)	0.85	1.54	0.85	3.15	1.14	1.1	1.27	0.87	1.48	1.95	1.88	2.90
Barbiturates (M)	6.24	2.17	0.58	1.81	0.83	1.39	0.95	1.22	1.06	3.07	1.92	1.54
Heroin	0.82	2.17	1.32	4.47	1.52	0.86	2.61	0.69	2.5	2.38	2.30	1.58
Methamphetamine	1.52	1.67	1.87	2.12	1.38	2.78	1.72	1.83	0.41	1.54	1.05	1.34
Stimulants (NM)	1.61	10.63	0.87	1.56	0.87	2.54	0.92	3.4	0.91	4.28	2.06	1.99
Stimulants (M)	2.51	3.12	1.39	1.63	1.01	2.12	1.69	1.65	1.15	2.47	1.79	1.80
Tranquillizers (NM)	1.14	1.92	0.82	3.45	1.53	1.13	1.84	1.15	2.89	1.25	1.60	1.09
Tranquillizers (M)	1.61	2.60	1.3	2.11	0.65	1.31	1.10	1.95	0.72	3.74	2.49	1.56
LSD	0.90	1.15	0.68	2.19	0.98	1.25	0.32	1.28	0.84	1.71	1.20	1.11
PCP	3.13	1.83	2.84	4.21	3.94	2.08	2.40	5.05	0.89	3.42	2.26	1.85
Other Hallucinogens	2.11	1.50	0.95	2.90	1.43	0.54	1.91	3.79	2.10	2.12	2.70	1.17
Cocaine	3.61	2.59	2.1	4.38	3.5	1.29	2.03	5.22	1.57	4.21	2.48	3.22
Cocaine	2.1	2.23	2.3	2.47	1.79	1.03	1.03	0.66	0.41	3.13	1.90	1.61
Total (average)	2.36	2.71	1.54	2.85	1.76	1.65	1.63	2.16	1.40	2.79	2.38	2.00

Notes: 1981-1997 DEFFs are based on grades 7, 9, 11, & 13; 1999 and 2001 DEFFs are based on grades 7 to 13; 2003 DEFFs are based on grades 7 to 12; (NM) Non-Medical Use; (M) Medical Use

Source: *OSDUS*, Centre for Addiction & Mental Health

6. PARENTAL CONSENT FORM



Centre for Addiction and Mental Health
33 Russell Street
Toronto, Ontario
Canada M5S 2S1
Tel: 416.535.8501

The 2003 Ontario Student Drug Use Survey

PARENTAL INFORMATION AND CONSENT FORM

Dear Parents/Guardians:

The *Centre for Addiction and Mental Health* conducts the longest on-going school survey in Canada. Since 1977, students have been asked about their beliefs and use (if any) of tobacco, alcohol and other drugs (for example, cannabis, hallucinogens, cocaine, heroin and medical drugs).

A sample of about 5,000 Ontario students will be asked to complete a pencil and paper questionnaire between January and May of this year. Your child's class has been asked to participate. Both the class and school were randomly selected. Students do not write their name on the questionnaire and neither students nor classes can be identified. The findings will be reported to ensure complete confidentiality and the information cannot appear in any school records.

Because we are interested in both the use and non-use of drugs, **there is no assumption that students who complete the survey have ever used tobacco, alcohol or other drugs.** The survey also covers topics such as physical health, mental well-being, and illegal behaviours such as theft, assault and drug-selling. Students do not have to answer every question, and they have the choice to stop at any time. The survey will be completed in a single 30 to 40 minute class period. For your interest, the full 2001 report and the 2003 questionnaire are available on our web site:
http://www.camh.net/research/population_life_course.html.

The results of the survey will be used to help school and health professionals across Ontario to identify key health issues and to develop health and education programs. We believe this study is important and we hope you will allow your child to participate by signing and returning the bottom portion of this form.

I sincerely appreciate your co-operation. If you would like to receive more information about the study or questionnaire, please contact me at 416-535-8501 ext. 4506 (or email: edward_adlaf@camh.net). If you would like to receive information regarding your child's participation, please contact Dr. Louis Glikzman at 416-535-8501 ext. 6609.

Thank you,

Edward M. Adlaf, Ph.D.
Study Director

Centre de toxicomanie et de santé mentale
33, rue Russell
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Canada M5S 2S1
Tel: 416.535.8501

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Addiction Research Foundation
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Institut psychiatrique Clarke

Donwood Institute
Institut Donwood

Queen Street Mental Health Centre
Centre de santé mentale de la rue Queen

*A World Health Organization Centre of Excellence
Un Centre d'excellence de l'Organisation mondiale de la santé*

*Affiliated with the University of Toronto
Affilié à l'Université de Toronto*

I have read and understood the request for my son/daughter to participate in the study of the **2003 Ontario Student Drug Use Survey**. I have discussed it with my son/daughter and...

- I give permission for my son/daughter to participate.
- I do **not** give permission for my son/daughter to participate.

Name of Student (*please print*): _____

Signature of Parent/Guardian: _____

Date: _____

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