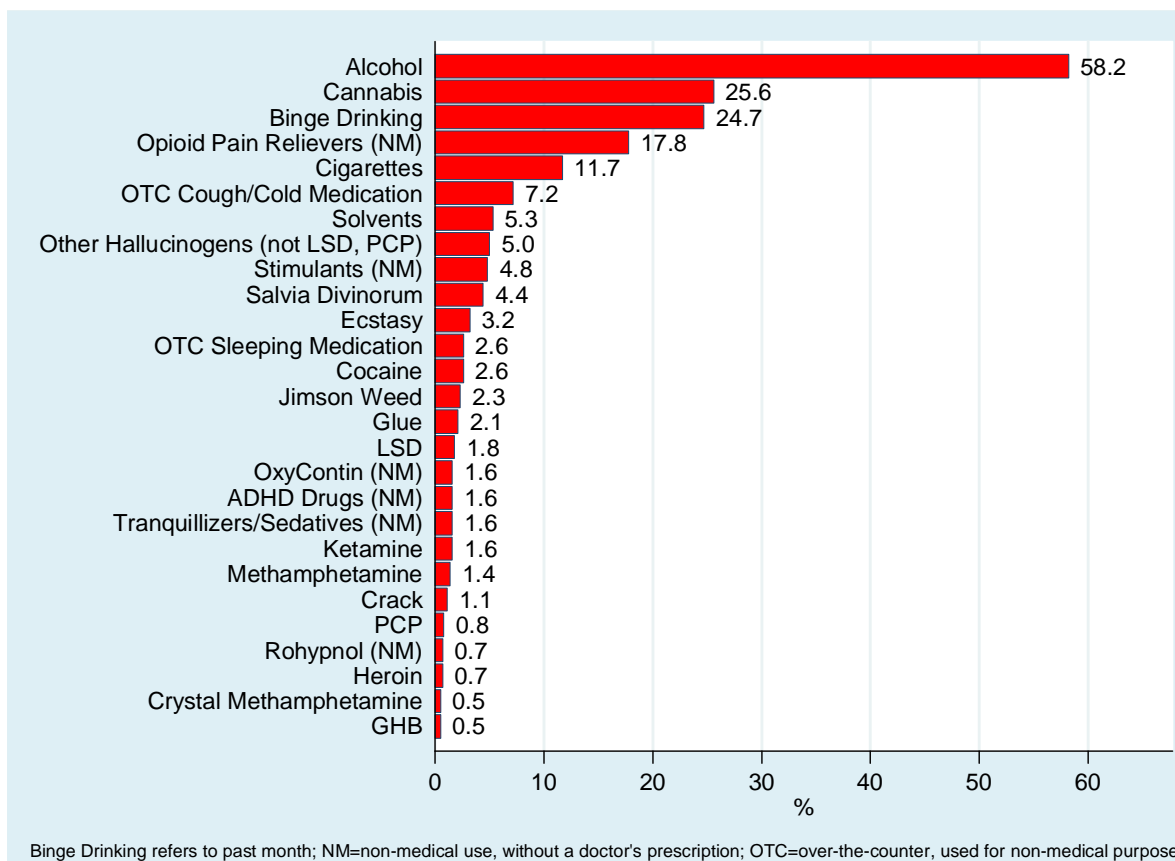


## Drug Use Among Students in Ontario: Highlights from the 2009 OSDUHS

The Ontario Student Drug Use and Health Survey (OSDUHS) is a repeated cross-sectional anonymous survey of Ontario students in grades 7 to 12, and is the longest ongoing school survey in Canada and the second longest in North America. The survey has been conducted every two years since 1977, with the purpose of monitoring substance use, mental health, physical health, and risk behaviours among students. This *eBulletin* highlights the main alcohol, tobacco and other drug use findings from the 2009 OSDUHS, and selected trends since 1977.

As presented in Figure 1, alcohol is students' drug of choice, as over half (58%) of all students reported drinking more than a few sips of alcohol during the 12 months before the survey. One-quarter (25%) of students reported binge drinking at least once during the month before the survey. Cannabis is the second most common drug, as 26% reported using at least once in the past year. The non-medical use of a prescription opioid pain reliever (such as Percocet<sup>®</sup>, Tylenol No. 3<sup>®</sup>) at least once in the past year was reported by 18% of students. Cigarette smoking during the past year was reported by about 12% of students.

**Figure 1.**  
**Percentage of Ontario Students in Grades 7 to 12 Who Reported Past Year Drug Use, 2009 OSDUHS**



## Demographic Correlates of Student Drug Use in 2009

**Sex:** Males were significantly more likely than females to report the past year use of: alcohol, cannabis, cigarettes, hallucinogens other than LSD or PCP, salvia divinorum, methamphetamine, and heroin. Females were significantly more likely to report using solvents, opioid pain relievers non-medically (NM), stimulant pills (NM), and tranquilizers/sedatives (NM). Males and females were equally likely to report binge drinking.

**Grade/Age:** There were significant increases by grade for most of the drug use measures: alcohol, binge drinking, cannabis, opioid pain relievers (NM), cigarettes, stimulant pills (NM), LSD, hallucinogens other than LSD or PCP, ecstasy, cocaine, tranquilizers/sedatives (NM), OxyContin (NM), heroin, methamphetamine, and ketamine. Solvent use decreased with grade.

**Region:** Students in Western and Eastern Ontario did not differ from the provincial average on any drug measure. Compared to the provincial average, Toronto students were less likely to smoke cigarettes, drink alcohol, binge drink, use cannabis, and stimulant pills (NM). They were, however, more likely to report using glue, solvents, and over-the-counter cough/cold medication to “get high.” Compared to the province, Northern Ontario students were more likely to smoke cigarettes, drink alcohol, binge drink, use cannabis, methamphetamine, OxyContin (NM), and stimulant pills (NM).

## Trends in Student Drug Use

*Ten-Year Trends, 1999–2009  
(Grades 7-12)*

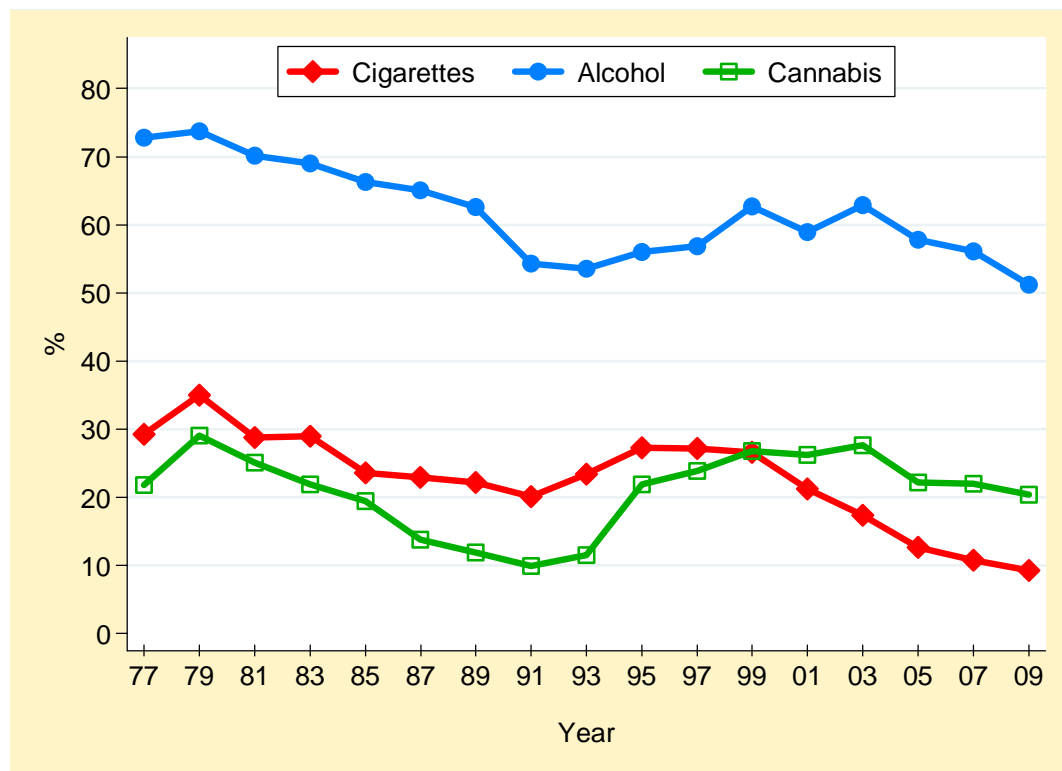
While there were no significant changes in past year drug use between 2007 and 2009, there have been significant changes since 1999. Prevalence rates for many drugs were significantly lower in 2009 compared to a decade ago, including alcohol, cigarettes, hallucinogenic drugs, and ecstasy. Binge drinking and cannabis use have remained stable over the past decade.

*Long-Term Trends, 1977–2009  
(Grades 7, 9, and 11 only)*

Long-term trends are available for 15 drug use measures. In general, many drugs show a common pattern: a peak in use during the late 1970s, a decline during the late 1980s to early 1990s, followed by a second peak in the late 1990s or early 2000s, and another decline in recent years.

Selected drug use trends are presented in Figure 2. The prevalence of cigarette smoking shows a substantial decline over the past decade, and the 2009 estimate was among the lowest on record. Alcohol use shows a steady declining trend since 1979, and use in 2009 was significantly lower than the peaks found in the late 1970s and late 1990s. Cannabis use peaked in 1979, declined significantly in the late 1980s/early 1990s, and increased again in late 1990s/early 2000s.

**Figure 2.**  
**Percentage of Ontario Students in Grades 7, 9, and 11 Who Reported Smoking Cigarettes, Drinking Alcohol, and Using Cannabis in the Past Year, 1977-2009 OSDUHS**



### Methods:

The *Ontario Student Drug Use and Health Survey* (OSDUHS) is an Ontario-wide survey of elementary/middle school students in grades 7 and 8, and secondary school students in grades 9 to 12. The survey has been conducted every two years since 1977. The 2009 survey, which used a stratified (region, school type) two-stage cluster design (school, class) was based on responses from 9,112 students in grades 7 to 12 from 47 school boards, 181 schools, and 573 classes. Self-administered questionnaires, which promote anonymity, were administered by staff from the Institute for Social Research, York University on a classroom basis between November 2008 and June 2009. The student participation rate was 65%. All survey estimates were weighted, and variance and statistical tests were corrected for the sampling design. The margin of error is  $\pm 2\%$ . The 2009 full sample size of 9,112 students represents over one million students in grades 7 to 12 in public and Catholic schools in Ontario.

Note that prior to the 1999 survey, only students in grades 7, 9, and 11 were included. Therefore, long-term trends (1977-2009) are limited to only these three grades. The ten-year trends (1999-2009) are based on all grades from 7 to 12.

### Terminology:

- **Past Year Alcohol Use:** drinking any type of alcohol during the 12 months before the survey. Use includes consumption on special occasions, but excludes sips just to try it.
- **Binge Drinking:** drinking 5 or more drinks on the same occasion at least once during 4 weeks before the survey.
- **Past Year Cigarette Smoking:** smoking less than one whole cigarette or more daily during 12 months before the survey. Excluded are those who “tried a cigarette.”
- **Past Year Drug Use:** used the drug at least once during the 12 months before the survey. Students who responded “don’t know what [the drug] is” were coded as non-users.
- **Non-Medical (NM) Drug Use:** used the drug without a prescription, or without a doctor’s supervision, at least once during the 12 months before the survey. Note that “non-medical” use does not necessarily *solely* reflect recreational use or to use to “get high”.
- **Non-Medical Use of Opioid Pain Relievers:** was measured with the question: “*In the last 12 months, how often did you use pain relief pills (such as Percocet, Percodan, Tylenol #3, Demerol, OxyContin, codeine) without a prescription or without a doctor telling you to take them? (We do not mean regular Tylenol or Aspirin that anyone can buy in a drugstore.)*”
- **Non-Medical Use of ADHD Drugs:** was measured with the question: “*Sometimes doctors give medicine to students who are hyperactive or have problems concentrating in school. This is called Attention Deficit Hyperactivity Disorder (ADHD). In the last 12 months, how often did you use medicine that is usually used to treat ADHD (such as Ritalin, Concerta, Adderall, Dexedrine) without a prescription or without a doctor telling you to take it?*”
- **Non-Medical Use of Stimulant Pills:** was measured with the question: “*In the last 12 months, how often did you use stimulants such as diet pills and stay-awake pills (also known as “uppers”, “bennies”, “dexies”, “pep pills”, etc.) without a prescription or without a doctor telling you to take them?*”
- **Hallucinogens other than LSD or PCP:** refers to mescaline and psilocybin, also known as “magic mushrooms”, “shrooms”, “mesc”.

(continued...)

- **Region:** the survey design divides the province into four regions: Toronto; Northern Ontario (Parry Sound District, Nipissing District and farther north); Western Ontario (Peel District, Dufferin County and farther west); and Eastern Ontario (Simcoe County, York County and farther east).
- **Statistically significant difference** refers to a difference between two percentages that is not likely due to chance. For example, a difference found at the  $p < .05$  level of statistical significance is one that is less than 5% likely to occur by chance alone.

### Source:

For more details about the survey methods and further drug-related findings, please see:

Paglia-Boak, A., Mann, R.E., Adlaf, E.M., & Rehm, J. (2009). *Drug use among Ontario students, 1977-2009: Detailed OSDUHS findings* (CAMH Research Document Series No. 27). Toronto, ON: Centre for Addiction and Mental Health. [Available online at <http://www.camh.net/research/osdus.html>]

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