

Alcohol and Drug Use Among European 17–18 Year Old Students

Data from the ESPAD Project

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Preface

Within the ESPAD project data on 15–16 year old students have been collected three times since 1995 in an increasing number of European countries. Although this age is the main target group for the project, some countries have collected data also among older students. In the last survey in 2003 seven countries studied students born in 1985, i.e. they were 17–18 years old by the time of data collection. This report aims at reporting the core variables of the ESPAD questionnaire for this older population.

It has been argued that teenagers older than 15–16 are important to survey since the prevalence rates are supposed to increase by age among young people. However, the reason why the ESPAD project is focussing on the younger group is that the school systems vary a lot between countries. In many countries a large part of the age cohort has left school by the age of 17. Nevertheless it is important to try to cover other age groups in addition to the main target group.

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Stockholm in February 2007

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Contents

Acknowledgements	7
Summary	9
Introduction	13
Background	13
Study design and procedures.....	15
The target population	15
The data collection instrument	15
Sampling procedure	16
Field procedure	16
Methodological considerations	18
Introduction	18
Representativeness	18
Reliability	22
Validity	24
Results.....	29
Tobacco use.....	29
Alcohol consumption	30
Illicit drugs	45
Lifetime abstinence from various substances.....	53
Perceptions and consequences of alcohol and drug use	54
A comparison between two age cohorts: those born in 1987 and those born in 1985.....	65
References	70
Appendix I: Sampling and data collection in participating countries	71
Appendix II: Tables 1–40.....	89
Appendix III: Student questionnaire	137

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Summary

The three large ESPAD (The European School Survey Project on Alcohol and Other Drugs) surveys that were conducted in 1995, 1999 and 2003 investigated the use of alcohol and other drugs among students aged 15–16 (Hibell, Andersson et al 1997, Hibell, Andersson et al 2000, Hibell, Andersson et al 2004). Over the years an increasing number of countries have joined the project and in the last survey 35 European countries collaborated on data collections on nationally representative samples.

In some countries these surveys have covered also other age groups, since this have been of important national interest. In 2003 eight ESPAD countries collected data also among students aged 17–18, i.e. students born in 1985. These countries are: France, Greece, Italy, Latvia, Poland, Portugal, the Slovak Republic and Sweden. Due to organisational change and limited resources the Portuguese data are not included in this report.

Methodology

The ESPAD surveys are conducted with a standardised methodology including an identical questionnaire to provide as comparable data as possible. Data reported here were mainly collected during Spring 2003 and the students included in this report are all born in 1985. This means that they turned 18 during the year of data collection. At the time of data collection the mean age of this group was 17.8 years. Data were collected by group-administered questionnaires in schools on nationally representative samples of classes. The questionnaires used were the same as in the regular ESPAD surveys.

Teachers or research assistants collected the data. The students answered the questionnaires anonymously in the classroom under conditions similar to a written test. The sample sizes varied from 1640 in Latvia to 5130 in Italy.

The results of the surveys were reported in a standardised format. These country reports constitute the basis of the content of this report.

Data quality

Every effort was made to standardise the methodology of the ESPAD project across countries. Nevertheless, some methodological issues inevitably arise in this kind of surveys.

The representativeness of the samples vary between countries, since school is no longer compulsory at this level, which means that some individuals earlier enrolled in compulsory school have now left school. However, the absolute majority of the age cohort is still enrolled in some kind of schooling. Thus, the results presented in this report are representative for students born in 1985.

The validity is deemed to be high in most of the countries. The cultural context in which the students have answered the questions has most probably differed between countries. However, this does not necessarily indicate large differences in the willingness to give honest answers.

For various reasons it was not possible to give precise levels of statistical significance in this report. Small differences in point estimates between countries should therefore be interpreted with caution. However, given the size of the national samples and the sampling methods employed,

differences of more than a few percentage points can with considerable confidence be considered significant.

Tobacco

The prevalence rate of smoking cigarettes 40 times or more in lifetime are highest in Latvia, the Slovak Republic and Greece, where more than 40 percent reported this (data from France not available for this variable). The lowest rate was found in Sweden (33%).

In five of the seven countries about half of the students had been smoking during the past 30 days. Again the lowest figure was found in Sweden, where this was reported by one third of the students.

In three countries the boys report a higher prevalence rate of smoking than the girls (Latvia, Poland and the Slovak Republic). In the three Mediterranean countries there are hardly any gender difference, but in Sweden the girls are in majority.

Alcohol consumption

In this age about half of the students or less have been drinking alcohol 40 times or more in lifetime. The prevalence rates of this behaviour do not differ very much between these countries. The highest proportion was reported from Greece (55%) and the lowest from France (39%). It is also a behaviour that is reported by more boys than girls in all participating countries.

A more frequent use of alcohol – 10 times or more during the last 30 days – is in comparison also more prevalent among the Greek students, of which 23 percent had done so. In Italy this was reported by 18 percent. Least frequent is this behaviour among the Swedish students. Just four percent had been drinking that often during this period. The gender pattern reveals a strong male dominance for this frequency of drinking, especially in Poland where this behaviour is almost non-existent among the girls (2 vs 23%). In Sweden, however, the proportions are about equal between the sexes.

Beer consumption 3 times or more during the last 30 days is more common in Poland (55%) than in the other countries. In Italy and Latvia this is reported by around 40 percent, while in the other countries about one third of the students consume beer that frequently. The lowest rate was found in France (27%). In all countries there is a clear dominance for this behaviour among the boys.

The proportions of students that had been drinking wine three times or more during the last 30 days vary between the countries. The highest figures were found in Greece and Italy, where 30 percent of the students reported this, while in the other Mediterranean country (France) only half as many students had done this (15%). The lowest figure was reported by Poland (8%). More boys than girls report having been drinking wine, except in Latvia and the Slovak Republic where no gender differences are found, and in Sweden where the relation was reversed, i.e. more girls than boys had been drinking wine that often.

The country that reported the highest frequency of spirits consumption three times or more during the last 30 days is Greece. Of the Greek students 47 percent reported this, which is much higher than in France, Italy and the Slovak Republic where around 32 percent had done so. Interestingly, the lowest proportions (about 22%) were reported from the “vodka countries” Latvia, Poland and Sweden. In all countries, but Sweden, more boys than girls reported this behaviour. In Sweden there were no gender differences.

Drunkenness

The number of students that have been drunk 20 times or more in lifetime differ substantially between the countries. The largest proportion reporting this is found in Sweden where half of the students (49%) had this experience. In the three Mediterranean countries on the other hand, only one fifth of the students reported this. In the remaining three countries Latvia, Poland and the Slovak Republic, about one fourth had been drunk that often. In all countries this is a behaviour that is more common among boys than among girls.

Also in relation to the very frequent drunkenness behaviour, three times or more during the last 30 days, the Swedes report this to a higher degree than others. One fourth of the Swedish students reported this, compared to 12–15 percent in Italy, Latvia, Poland and the Slovak Republic, while only around seven percent of the students in France and Greece did so. In all countries this is a male behaviour, but the gender gap among the Greek students is not very wide.

Binge drinking

The differences between the countries are less evident in relation to frequent binge drinking compared to the case of drunkenness. The country that reports the highest proportion of students that have been binge drinking 3 times or more during the last 30 days is still Sweden (26%), but the distance to the other countries is less evident. The range of proportions runs from 17 percent (France) to 23 percent (Poland). In all countries the gender distribution shows that there are more boys than girls reporting this behaviour.

Illicit drugs

The use of illicit drugs is overall dominated by the cannabis use. There is, however, a rather wide gap between the high and low prevalence countries. The highest prevalence rates for the use of hashish or marijuana are found in France (59%) and Italy (43%). In Poland and the Slovak Republic just over one third (around 38%) and in Latvia one fourth (26%) of the students reported this. In Greece and Sweden, however, only around 15 percent had ever used cannabis. In all countries more boys than girls have ever used cannabis, although in Sweden the difference is probably not significant.

A more active and recent use is mirrored by last 30 days prevalence rates. The relation between the countries is almost the same as for the lifetime figures. France and Italy are at the top with 31 and 24 percent respectively, while Greece, Latvia (around 7%) and Sweden (3%) show rather low prevalence rates. The boys are still in the majority also on this variable, except in Sweden where no gender difference was found.

As indicated above, rather few of those who have used any illicit drug have used anything else than cannabis. On average in all participating countries five percent had used amphetamines, three LSD, and four percent had used ecstasy. For amphetamines the largest proportion of users was found in Poland where 15 percent reported this. The lowest figures in this respect were reported from France, Greece and Sweden (1–2%).

LSD is not very frequently used – no country reported a frequency higher than four percent (Italy, Poland and the Slovak Republic). The use of ecstasy is not very frequent either, the highest percentage was found in the Slovak Republic (7%), France and Poland (5% both), while Sweden reported the smallest figure (2%).

The gender distribution of the prevalence rates for these drugs is rather even in most countries, but in the countries (mainly Poland) where differences are found the percentages are higher among the boys. This is for example true in relation to the use of amphetamines in Poland. For LSD it is higher among boys in Poland and the Slovak Republic. Finally, the use of ecstasy is higher among the boys than among the girls in France and Poland.

The use of tranquillisers or sedatives without a doctor's prescription is highest in Poland (20%) and in France (14%). All other countries reported rather small figures, varying between four (Greece) and seven percent (Italy and Sweden).

The gender distribution is mainly even, although higher proportions are found among the girls in France (17 vs 11%) and Poland (27 vs 13%).

The use of inhalants is rather limited in this age group in participating countries. The highest proportions are reported from France and Greece (13% both), while all other figures are below ten. The lowest prevalence rates are reported from Latvia and Sweden (5% both).

The gender pattern reveals, that in those countries where there is a difference, the figures are higher among the boys. This is true in France (17 vs 10%), Italy (10 vs 6%) and in the Slovak Republic (12 vs 6%).

A comparison between two age cohorts

The studies presented here were conducted at the same time as the regular ESPAD surveys on students aged 15–16. A comparison on a few variables shows, as expected, that the prevalence rates are generally higher among the older students, with the exception of inhalants use.

Despite a frequent alcohol consumption in e.g. Greece and Italy the prevalence rates of intoxication in these countries are rather low in both age cohorts. In Sweden, on the other hand, the frequency of intoxication is markedly higher in the older group.

Conclusive remarks

The number of countries included in this study is limited but represent different parts of Europe. On many variables France and Sweden appear as opposite poles regarding alcohol consumption and drug use. The French students drink little and seldom get drunk, while the prevalence of cannabis consumption is high. In Sweden, on the other hand, drunkenness is frequent, but the prevalence of illicit drug use, mainly cannabis, is the lowest among the countries included in this study.

Overall, the results indicate that the tobacco, alcohol and drug use pattern among students aged 17–18 varies a great deal between the seven countries included in this study. For example, almost half of the students are more or less habitual smokers, except in Sweden where this is true for about one third.

Rather few – one fifth or less – had been drinking alcohol 10 times or more during the past 30 days, especially in Sweden. Drunkenness, on the other hand, is much more frequent among the Swedish students in comparison, but especially in relation to the Mediterranean countries, which are very low on this variable.

It is difficult to draw any conclusions from the pattern of alcohol consumption and drunkenness. It seems as if the Swedish students were more inclined to declare a high frequency of intoxication than students in other countries, despite the fact that they drink less often. The binge drinking frequency, however, is a little bit higher among the Swedes than among students in the other countries, but still not far from average.

The lifetime prevalence of illicit drug use, however, gives a picture rather opposite to the alcohol variables. France, which is generally low on most alcohol variables, is dominating the picture with 6 out of 10 students reporting use of cannabis. Italy is the country that comes closest to this, but is still lower (4 out of 10). In contrast, the use of illicit drugs other than cannabis is generally much lower in all the countries under study.

To analyse why some students refrain from alcohol and/or alcohol intoxication, but consume illicit drugs such as cannabis would be an important contribution to the understanding of the formation of drug habits among people this age.

Introduction

This report is focussed on the alcohol, tobacco and illicit drug use among 17–18 year old students in seven European countries. The data collections were integrated parts of the ESPAD surveys among 15–16 year old students in 2003. For this reason some parts of this report (e.g. method, country by country description) are similar to the report on the younger students. For a more detailed methodological discussion we refer to the main ESPAD report (Hibell, Andersson et al, 2004). The eight countries that collected data in the older age group include France, Greece, Italy, Latvia, Poland, Portugal, the Slovak Republic and Sweden. Data from Portugal, however, are not yet available due to an organisational change in the country.

Background

The use of tobacco, alcohol and other drugs among young people is of great concern in most countries and many studies have been conducted to better understand consumption patterns. During the 1980's a subgroup of collaborating investigators was formed within the Pompidou Expert Committee on Drug Epidemiology, Council of Europe, to develop a standardised school survey questionnaire and methodology. The purpose and rationale for the work was to produce a standard survey instrument, which would allow different countries to compare alcohol and drug use in student populations. Eight countries used the common questionnaire in a pilot study in the mid-80s. Unfortunately the studies differed in sample size, representativeness and range of ages studied and they were not performed simultaneously. Due to these differences data were not directly comparable. However, the survey instrument proved to be valid and reliable (Johnston et al. 1994). In spite of these findings, only Greece and Portugal continued to use the questionnaire and methodology in regular surveys.

Another study, whose primary objective is the health behaviour of children in Europe (aged 11, 13 and 15), was initiated by a small group of researchers at the beginning of the 1980's. The project was adopted by WHO and now has an increasing number of countries involved. Surveys have been conducted every third year since 1983/84. However, the focus of these studies is mainly health issues, although in later years complementary questions on smoking, alcohol consumption and cannabis use were introduced (Currie et al. 2004).

Since the beginning of the 1990's a group of European researchers from 30 to 40 countries have been working on a collaborative project called "The European School Survey Project on Alcohol and Other Drugs, ESPAD". The Swedish Council for Information on Alcohol and Other Drugs initiated the project in collaboration with the Pompidou Group at the Council of Europe, which has economically supported some parts of the project.

Thus, three large-scale European surveys on young people's alcohol and drug habits have been conducted over a period of about ten years, in 1995, 1999 and 2003 (Hibell, Andersson et al, 2004). These studies, ESPAD – The European School Survey Project on Alcohol and Other Drugs, are focussed on students 15–16 years of age, i.e. they are born in the same year and will become 16 during the data collection year. The main purpose of the project is to collect comparable data on alcohol, tobacco and drug use in this age group in as many European countries as possible. The studies are conducted as school surveys in each participating country, during the same period of time and with a common methodology. By adopting this methodology the results

can be compared both within and between countries. In the 2003 study data was collected in 35 European countries.

The results have been widely recognised as a useful source of information on young people's alcohol and drug habits. Another aspect is the importance of monitoring trends over time in substance use over the European continent.

As mentioned above, some of the ESPAD countries collected data also in other age groups than was requested for the main survey. This report includes the findings among students two years older than the main target group, i.e. aged 17–18. The results are of great interest although the geographical dispersion is not planned to be representative for entire regions. Some patterns are possible to see though, which might reflect geographical or cultural differences.

Study design and procedures

The target population

The target population for the studies reported here is students that will become 18 years during the year of the data collection i.e. they are all born in 1985. The approximate mean age in participating countries is 17.8 depending on at which time in the spring term that the surveys have been performed.

There are, however, differences between countries in how well the samples represent the age group. In some countries a majority of the compulsory school population continues to higher levels of education, while in others only parts of the birth cohort are found in secondary education. Table A shows the approximate proportion of the age cohort expected to be enrolled in school in the participating countries (see Methodological considerations).

Available information about the proportion of the actual age cohort still in school shows that there are obvious differences between countries in this respect. The approximate proportions range from 74–75 percent (France, Italy) and 80 percent (Poland) to 90–93 percent (the Slovak Republic, Sweden). No data is available from Greece.

The data collection instrument

The data collection instrument used in these surveys is the same as was used for the main target population (students born in 1987) in the ESPAD survey 2003 (Hibell, Andersson et al, 2004). The main part of the questionnaire constitutes of core questions to be used in all countries. In addition, a number of module and optional question were included to be used at the choice of each country. The questionnaire is presented in Appendix III. It was also decided that each country might add questions of special interest provided that those questions were not of a nature that would affect the students' willingness to respond, or that their number would overload the questionnaire.

It was decided that each country should translate the questionnaire into its own language and thereby adjust the wordings to make the questions as appropriate as possible in the cultural context. Drug street names etc. should be adjusted to what was common in the country. Once the translation was ready, it should be back-translated into English again. By doing this, discrepancies from the original might be discovered and corrected.

It was also recommended that each country should test the questionnaire in a small pilot study in order to discover any faults or difficulties while answering it. A test would also indicate how long time the students needed to complete the questionnaire. Of the seven countries represented in this report four did a pilot study (Table A).

Table A shows the number of core, optional and own questions included in participating countries' questionnaires. For each question every single sub-question is counted as one variable.

Most countries used nearly all variables (309 in total). Exceptions include Greece and France, which only used parts of the core questionnaire. (211 and 174 respectively)

Despite all efforts to standardise the data collection instrument, some discrepancies were inevitable. However, it seems reasonable to assume that the discrepancies in the questionnaires only have had a very limited negative effect on the comparability of the findings from different countries. In the few cases when discrepancies are important enough to make a question less comparable, this will be commented in the results chapter.

Sampling procedure

The sample size and sampling procedures have been discussed at some ESPAD Project meetings. It soon became clear that the ESPAD countries were very different in terms of what kinds of school statistics are available. Some countries have detailed information about the number of schools, classes and students, while in others e.g. only the total number of schools, but not the size of them, was known. The sample should consist of randomly selected classes. In order to maximise the comparability between countries and enhance the scientific level, regional seminars were organised aimed at discussion the national project plans in detail, including problems and possibilities for the sampling procedure in each country.

The target population of students born in 1985 was very differently distributed over school types (academic, vocational etc.) and grades in different countries. At the regional seminars solutions to the sampling problems were discussed and suggested. However, the main focus in those discussions was on the 15–16 year olds as this was the target age cohort for the regular ESPAD survey. Nevertheless, when a country wanted to have data on the 17–18 year olds, the sampling procedure needed to be as accurate as for the younger cohort. The possible effects of sampling procedures will be discussed in detail further on.

Field procedure

In line with what was decided about the sampling and the data collection instrument, also the field procedures had to be standardised as much as possible (Hibell and Andersson, 2002,a). Due to cultural differences there are of course many factors that make it difficult to exactly follow the same schedule in every country.

The recommended data collection period was March–April 2003. Most countries adhered to these dates, but the length of the period varied quite a lot, from one day only to about 2–3 months in some countries. For practical reasons the time of the data collection was different from the planned period in a few countries, including Poland (May–June) and Latvia (March–May).

The general planning of the data collection for this project included data collection during a specific week, which should not be proceeded by any holiday, ensuring that the students referred to a “normal” week when answering questions related to a short time reference. Schools unable to perform the survey during the assigned week were allowed to do so in the preceding week instead.

The headmaster of the participating schools were contacted and informed of the planned study. He or she was asked to inform the teacher(s) of the chosen class(es), but not to inform the students in order to avoid discussions among them that could lead to biased data. The class teacher was asked to schedule the survey for one lecture following the same procedure as for a written test.

Data was collected by group-administered questionnaires, under the supervision of a teacher or a research assistant. At some ESPAD project meetings much discussion have been directed towards this issue. It was thought that in many countries teachers would no be trusted by the students and therefore cause biased data. The solution to this problem was that in countries where it was judged to be possible to use teachers this should be done, while in others research assistants were employed. It was considered crucial not to stress whether it was a teacher or a research assistant that collected the data, but whether or not the students would trust them. In a methodological study by Bjarnason (1995) no significant differences were found in Iceland between teachers' or research assistants' modes of questionnaire administration.

Methodological considerations

Introduction

For each of the three ESPAD surveys that have been performed among 15–16 year old students in 1995, 1999 and 2003 a thorough and detailed methodological section was included (Hibell, Andersson et al, 1997, Hibell, Andersson et al, 2000, Hibell, Andersson et al, 2004). Most of the methodological issues discussed in the 2003 report are valid for the age group included here. In this report the most important measures are presented and commented. For a complete methodological discussion a close reading of the ESPAD 2003 report is recommended.

The ESPAD project relies on experiences from more than 30 years of school surveys in Sweden (Hvitfeldt, Andersson and Hibell, 2004) and the Pompidou pilot project (Johnston et al. 1994). Another example are the Greek surveys that started more than 20 years ago (Kokkevi and Stefanis, 1991 and Kokkevi et al, 2000), but also experiences by individual researchers in countries participating in the ESPAD project.

The standardisation of the survey methodology is one of the most important issues in the ESPAD project. However, it should be stressed that standardisation alone does not ensure that data are directly comparable between countries. It is not possible to control for everything and some influences are not even possible to measure. The cultural contexts in which the students have given their answers vary and the measures may have different meanings in different contexts.

In addition, one can never be certain of whether results from one country are more or less valid than those from another. To better ascertain the role of cultural context in different countries, and how it may impact the validity, a methodological study was conducted as one of the preparative measures prior to the ESPAD 99 data collection (Hibell et al. 2000). The methodological study indicated that the reliability as well as the validity was high in all seven countries that participated in the study.

The surveys presented in this report are all done at the same time and complementary to the main surveys on students born in 1987 in the respective countries. However, there are a few things, like sampling procedures and the representativeness of the samples, that need to be commented in this section.

Representativeness

The target population of the ESPAD study is defined as the national population of students who are born in a specific year. For the survey presented here the students should be born in 1985, thus turning 18 during the year of the data collection. All seven surveys are made on nationally representative samples of school classes.

Average age and time of the data collection

All surveys were conducted during spring term in 2003. The data collection period ranges mainly from March to May, while in Poland it was performed somewhat later in May/June. Based on the time of data collection, an approximate average age of the students has been esti-

mated for each country (Table A). The average age is the same in three countries (17.7), and slightly higher in France, Latvia (17.8 each) and Poland (17.9).

Representativeness of the samples

Sampling in the ESPAD project is based on classes as the final sampling unit (Bjarnason and Morgan 2002). This procedure is more economical than sampling individual students and also has some desirable methodological properties. In particular, sampling entire classes can be expected to increase student perceptions of anonymity. Sampling individual students and asking them to fill out a questionnaire individually could affect the truthfulness of their answers and therefore bias the results of the study.

There are differences between countries as to which degree young people in this age group are still engaged in some secondary education. The percentage of the age cohort in participating countries that are still in school is approximately 75 percent in France and Italy, 80 percent in Poland and 90–93 percent in the Slovak Republic and Sweden (no information available from Greece). This means, that the surveys differ to which extent they represent the birth cohort. However, the study population is students, i.e. individuals born in 1985 who are still within the educational system.

An overview of the sampling procedure in each country is provided in Table A. More detailed information for each country can be found in Appendix 1 (Sampling and data collection in participating countries).

Table A. Characteristics of the ESPAD surveys in participating countries. Continues...

Country	Born in 1985 still in school (approx. %)	Sampling unit(s)	Sample type	Grade level(s) included	Approx. mean age ^{a)}	Representativeness ^{b)}
France	75	school	strat. random		17.8	national
Greece	77	school	strat. random	gymn 3 rd , lycee A, B, C	17.7	national
Italy	74	school	strat. random	grade 4	17.7	national (100%)
Latvia		class	strat. random	grades 8–12	17.8	national
Poland	80	class	syst. random	grade 2 post. gymn	17.9	national
Slovak Rep.	90	school	strat. random	grades 2–3	17.7	national
Sweden	93	class	syst. random	grade 2	17.7	national (80%)

a) A calculated figure based on the time of the data collection. In the 1999 report the calculated mean averages were systematically 0.5 years too low.

b) Representativeness in relation to the target population, i.e. students (not persons) born in 1987. The figure within brackets show the approximate population of students born in 1987 that attended participating grades.

Table A. ...continued.

Country	Data collection leader	Data collection period	Individual envelopes	Pilot study	Number of questions (variables)				Data weighted
					Core	Module	Optional	Own	
France	doctor/nurse	March 17–May 18	no	yes	174	14	–	122	no
Greece	res. assistant	March/April	no	yes	211	35	–	43	no
Italy	teachers	March/April	yes	no	309				no
Latvia	res. assistant	March/May	yes	no	309	57	–	38	yes
Poland	res. assistant	May/June	yes	yes	309	22	–	32	yes
Slovak Rep.	health staff	March 24–28	yes	yes	307	62	–	23	no
Sweden	teachers	March 17–21	yes	no	309	38	10	4	no

Not all countries have considered what might be called “the problem of small and large classes”. In some countries all schools/classes have had the same probability to be sampled, independent of the size of the class and the school. In practice this means that students in small classes and schools are over-represented in the samples. If students in these classes and schools have different alcohol and/or drug habits compared to students in large classes or schools, data are not entirely representative of the population. However, in some cases a stratified sampling has been used and it seems reasonable to assume that the sizes of schools and classes are rather similar within strata. Furthermore, class size is rather standardised in many countries. There is reason to believe that this aspect of the sampling procedure has not caused any serious problem for the representativeness of the samples.

In the majority of the countries represented here the surveys were designed to cover a range of grades for the purpose of a national interest, thus proportionally representing the age group in the total sample (France, Greece, Italy and Latvia). In Poland, the Slovak Republic and Sweden the samples were drawn from grades where the absolute majority of this age group is found.

School co-operation

The number of non-participating schools and classes are shown in Table B. In the majority of countries these data refer to the total survey and not only to students born in 1985. Exceptions are Poland, the Slovak Republic and Sweden. Overall, the school co-operation is reported to have been good. The most important loss of schools and classes was observed in France where the survey was seriously affected by a strike of school doctors and school nurses. In spite of the situation the research team, which is well known in those schools, managed to restore the main part of the sample and the school staff accepted to perform the data collection.

In other countries, the main reason for not participating was usually different kinds of school-work, examinations or other reasons that can be considered random occurrences. To sum up, there is reason to assume that non-participating schools and classes have not influenced the representativeness of the samples included to any important degree.

Participating students

In the guidelines for the main ESPAD survey it was recommended that each national net sample should comprise 2,400 students. In the majority of countries represented in this report the sampling was designed to cover certain grade levels for the purpose of national interest. This means

Table B. Not participating schools and classes, eliminated questionnaires and average time to complete the questionnaire.

Country	Non-participating		Eliminated questionnaires (%) ^{a)}	Average time to complete the questionnaire (minutes)
	Schools	Classes		
France	50/450	127/900	1.2	45
Greece	5/221	13/	2.3	52
Italy	12/336	12/336	1.6	52
Latvia			2.1	48
Poland	8/290	8/290	1%	32
Slovak Republic	0/106 ^{b)}	0/172 ^{c)}	0.7	46
Sweden	8/235	14/250	0.8	31

a) Proportion of all answered questionnaires judged not to be seriously answered when the questionnaires were scrutinised.

b) One school was replaced.

c) Four classes were replaced.

that in contrast to the main ESPAD survey (students born in 1987) the sampling was not designed to be representative of the students born in 1985, but for the grade levels. An exception from this is the Swedish sample.

However, as can be seen in table C, the smallest net samples are found in France, Greece and Latvia ranging from 1299 (Greece) to 1977 (France) students. Other countries drew larger samples like the Slovak Republic (3117), Sweden (4245), Poland (4737) and Italy (5130).

In this report the results for all students are not weighted by gender. Generally, this is not a problem, but in countries where the proportion of boys and girls is not equal, the results are slightly skewed toward the patterns among the majority gender. However, in the majority of the countries the distribution by sex is close to even (i.e. does not deviate more than 45–55%). In the Slovak Republic, however, there is an overrepresentation of girls (58%), which thus is not compensated by a weighting procedure. This means that data for all students should be treated carefully when comparing this country with the others.

Response rates

The response rates in each country are shown in Table C. In France and Greece information is only available for the total sample and not by gender. Overall, the response rate is rather good, except in France where only 78 percent of the students in participating classes answered the questionnaire.

The non-participation was mainly due to illness. Other reasons for absence were distributed in a non-systematic way that may allow for the assumption that the results are not affected by this. No country reported any major methodological problems in connection with absent students. Students' refusal to participate was low.

Absent students can be expected to be somewhat more prone to be involved in the use of various substances than is the case with students who are consistently in school (Grube and Morgan, 1989, Andersson and Hibell, 1995). A follow up study of students in Sweden shows that absent students had tried alcohol and illegal drugs more often than those present at the regular data collection (Andersson and Hibell, *ibid*). The results indicate, however, that because of the relatively small number of absent students, the figures for the population as a whole were unchanged or only changed by one percentage point if absent students were included. In the school

Table C. Participating students and response rates. Numbers and percentages among boys and girls.

Country	Number of participating students			Response rates (%) ^{a)}		
	Boys	Girls	Total	Boys	Girls	Total
France	942	1 035	1 977	..	..	78
Greece			1 299	672	627	88
Italy	2 313	2 817	5 130	93	95	94
Latvia			1 640	83	85	84 ^{b)}
Poland	2 367	2 370	4 737	87	85	86
Slovak Republic	1 317	1 800	3 117	87	86	86
Sweden	1 960	2 285	4 245	83	85	84

a) Participating students in participating classes.

b) Calculated on all students in participating classes.

surveys in USA the corresponding average figure has been calculated to be 1.4% (Johnston et al, 2004). The difference in drug use between present and absent students may of course differ between countries and the effect of such differences is dependent upon the response rate. However, in the ESPAD context the alcohol and drug involvement among absent students can most probably be seen as a major methodological problem when students in different countries are compared.

Reliability

Reliability, which is a necessary condition for validity, is the extent to which repeated measurements used under the same conditions produce the same results.

Data from different questions within the ESPAD questionnaire have been used to measure reliability (Table D). Two measures will be discussed. One is the inconsistency between two sets of questions measuring lifetime prevalence for different drugs. The other is a quotient between the proportion of students who on the “honesty question” answered that they “already said” that they had used cannabis and the proportion who actually gave this answer.

In the ESPAD methodology study in 1998 students in seven countries were asked to complete the questionnaire on their use of alcohol and drugs on two separate occasions with a delay period of 3–5 days (Hibell et al. 2000). Since the studies were completely anonymous it was not possible to do a test-retest study at the individual level. However, no significant differences in the consumption patterns were found between the two data collections in any of the countries. This was true for alcohol consumption as well as for the drug prevalence, which suggests that the reliability was very high in all seven ESPAD countries. Similar results with no significant differences were also reported from two repeated studies in Iceland and Hungary (Hibell et al. 1997).

Inconsistency in relation to lifetime use

The questionnaire contained lifetime questions about use of a number of drugs. A later set of questions dealt with the age at first use of drugs. Both questions included the response alternative “never”, which makes it possible to compare the prevalence of users of each drug according to these two questions.

Table D includes information on the proportion of students reporting drug use on one question and not on the other, i.e. giving inconsistent answers. The lowest inconsistency figures were found for anabolic steroids and other illicit drugs than cannabis (explained in table D). In almost all countries the inconsistency rates for these two variables were 0 or 1 percent, except for Italy in relation to other illicit drugs (2%).

The results on other variables are varying, although not very high in any of the countries involved. For tranquillisers or sedatives it ranges from 1 (Sweden) to 6 percent (Poland), for inhalants from 1 (Sweden) to 5 percent (Greece and Italy), for cigarettes from 2 (Sweden) to 5 percent (Latvia), for cannabis from 1 (Greece and Sweden) to 6 percent (Italy) and for “been drunk” the variation ranges from 1 (Sweden) to 8 percent (Latvia).

Table D. Some aspects of reliability. Two measures of inconsistency between two questions in a single administration. Percentages and quotients among all students.

Country	Students reporting lifetime drug use on one question and not on the other (%) ^{a)}							Quotient between two questions ^{b)}
	Cigarettes	Been drunk	Inhalants	Cannabis	Other illicit drugs ^{c)}	Tranq. or sedat. ^{d)}	Anabolic steroids		Cannabis
France	..	..	..	..	..	..	..	..
Greece	3	4	5	1	1	2	1	0.9
Italy	4	5	5	6	2	4	1	0.8
Latvia	5	8	3	5	1	2	0	0.8
Poland	4	6	3	5	1	6	1	1.9
Slovak Republic	4	3	2	4	1	2	0	0.8
Sweden	2	1	1	1	0	1	0	1.0

a) The first question is the self-reported lifetime prevalence question for the drug, while the second is a later one about the age at first use of the drug.

b) Quotient a/b between the proportion answering "I already said that I have used it" to the question "If you ever used marijuana or hashish, do you think that you would have said so in this questionnaire?" (a) and the proportion who reported that they have used it (b).

c) Other illicit drugs include amphetamines, LSD and other hallucinogens, crack, cocaine, ecstasy and heroin. The figure is an average for these drugs.

d) Tranquillisers or sedatives without a doctors prescription.

An inconsistency quotient

The other measure of reliability is the quotient between the answers to two questions. One concerns the willingness to admit the use of marijuana or hashish (the so called "honesty question"). The students were asked: "If you had ever used marijuana or hashish, do you think you would have said so in this questionnaire?" The question could be used as a measure of validity and it is from this perspective that it is discussed in the next section. However, one of the response alternatives was "I already said I have used it" and this proportion has been compared with the proportion that reported cannabis use on the lifetime prevalence question.

Table D includes the quotient between these two proportions, with the "honesty answer" as the numerator and the "lifetime answer" as the denominator. The value 1.0 indicates that the proportions are the same on both measures. The quotient is above 1.0 if more students answered that they already had said they have used the drug than actually reporting so on the direct question. Conversely, the quotient is below 1.0 if fewer students indicated that they have already admitted drug use than actually did admit to it on the direct question.

The largest quotient is reported from Poland (1.9) where almost twice as many students reported drug use on the honesty question as on the lifetime prevalence question. It is not known why this is so, but it calls for some caution when interpreting the Polish results. In all other countries the quotient was close to 1.

Summary

The variables used to measure reliability in the seven surveys presented in this report point at a rather high degree of reliability. However, it is not possible to make a statement for France since the French team omitted some of the variables used in this analysis. The somewhat high proportion of inconsistent answering in Latvia (8%) on the variable "been drunk" should be observed, as well as the high quotient between two questions in the Polish data. However, it is difficult to

explain these variations and the main impression is that the reliability is rather good in all countries.

Validity

The validity of collected data is a major concern in all surveys, and especially so in relation to sensitive behaviours like drug use etc. High reliability is a necessary but not sufficient condition for validity. In ESPAD terms, validity could be said to be the degree to which the ESPAD questionnaire (including how data are collected) measures aspects of students' consumption of different substances under study.

In the previous section it was concluded that the test-retest reliability was high in seven countries in the ESPAD methodology study (Hibell et al, 2000), as well as in two countries where such studies were conducted separately with the ESPAD questionnaire (Hibell et al, 1997). It was also concluded that the inconsistency measures using a high level of reliability in most countries and for most drugs. However, this by itself is not enough to secure high validity.

Student co-operation

The primary condition for obtaining any data is that students in selected classes actually receive the questionnaire and are willing to respond to it. The first condition is nullified if the school or the teacher refuses to co-operate. If students do receive the questionnaire they must have enough time to complete it, understand the questions and they must be willing to answer the questions honestly.

The participation in the study was of course voluntary. However, in nearly all countries none or very few students were reported to have refused to participate. On the contrary, in many countries the classroom reports state that many students were very interested in answering the questionnaire. Very few questionnaires were excluded during the scrutinising process. The highest proportions were reported from Greece and Latvia where about 2 percent of the questionnaires were eliminated because of apparently bad data.

Student comprehension

The average time to complete the questionnaire varies between 52 minutes in Greece and Italy to about 32 in Poland and Sweden (Table B). One reason to the variations may be different levels of experience with questionnaires. The differences are very limited however, all countries have used less than one hour to fill out the questionnaire.

No country reported any difficulties for the students to understand the questions. Overall student comprehension seems to have been satisfactory in all participating countries.

Anonymity

The validity of answers in surveys related to illegal behaviour, such as drug use, is dependent upon the respondents' trusting that reporting such behaviour would not result in any negative consequences. Thus, it is important that the students perceive the survey to be anonymous. Several measures were taken to ensure the perceived as well as the actual anonymity of the ESPAD survey.

The ESPAD protocol recommends distributing an envelope for each student to seal after having answered the questions. In five of the seven countries reported here individual envelopes were used (Table A). In France the students sealed their questionnaire with two stickers before putting it into a common box, while in Greece the students themselves put it into a folder to secure

the anonymity of the collected data. When all questionnaires were collected they were sent to the research institute where they were opened.

It is also important that the students trust that the data collection leaders do not look at their answers. He or she could either be a teacher or a research assistant and it was up to each country to choose method. Only in Italy and Sweden the teachers served as data collection leaders (Table A). In other countries school health staff or research assistants collected the data.

No country reported any serious doubts about the anonymity aspect. As a whole, the anonymity seems to have been safe in all countries.

Missing data rates

In the instructions to the students it was stressed that it was important to answer each question as honest and frankly as possible. However, since participation in the study was voluntary they were told that they could skip any questions they found objectionable for any reason. Thus, missing data rates on drug questions can be seen as an indicator of the respondents' willingness to report drug use. Of special interest are possible differences in missing data rates between different drugs and between drug questions and other questions.

Looking at the questionnaire as a whole the proportion of unanswered questions is low in most countries and does not exceed four percent in any of them (Table F). Overall, the number of unanswered lifetime questions is lower than the average for lifetime and 30 days prevalence questions. When looking at different parts of the questionnaire, however, there are two countries with a relatively high percentage of unanswered own questions (Latvia 8% and the Slovak Republic 10%). This points at the fact that adding a large number of extra questions at the end of the questionnaire might lead to less valid answers simply because of fatigue among the students. This is one reason why these extra questions should always be put at the end of the questionnaire not to jeopardise the validity of the core section data.

Logical consistency and unwillingness to admit drug use

Closely related to the inconsistency measures discussed in the reliability section is the logical consistency. In the ESPAD project this is relevant for drug questions measuring the prevalence for the three time periods; lifetime, last 12 months and last 30 days. Logically the last 12 months prevalence cannot exceed the lifetime prevalence and the same is true for the last 30 days compared to the last 12 months and lifetime prevalence.

Table G includes information on the proportion of inconsistent answers related to the three time periods for four variables; alcohol use (any alcoholic beverage), been drunk, cannabis use and use of inhalants. In all participating countries these proportions are very low, especially in relation to drug use. For the alcohol consumption variable the highest inconsistencies are found in Greece (6%) and Italy (5%). These proportions are not extreme and all other values are lower.

The students were asked about their willingness to admit cannabis or heroin use. The proportions of students answering "definitely not" are mainly low (2–4%) in all participating countries especially regarding the use of cannabis. However, somewhat higher proportions were found in Latvia where around 9 percent were reluctant to admit such use. This calls for some caution when analysing the Latvian data on illicit drugs.

Construct validity

Using existing theories, results from earlier studies and logical inference makes it possible to evaluate the extent to which variables are related to one another in a valid fashion. Such construct validity was discussed rather extensively in the Pompidou six-country pilot study, which

provided the base for the original ESPAD questionnaire. The conclusion was that “there is considerable evidence of construct validity in the current data sets” (Johnston et al. 1994).

For instance, it is logical to expect that countries with high proportions of students reporting use of different drugs also should have high proportions reporting drug use among friends. This was tested in the 1995 ESPAD report with the outcome of very strong relationships for LSD ($r_{xy}=.95$), cannabis ($r_{xy}=.92$) and drunkenness ($r_{xy}=.87$), which indicate a high validity (Hibell et al. 1997).

Table E. Opinions of the data collection leaders ^{a)}. Percentages.

Country	Disturbances during the completion of the questionnaire			Kind of disturbances ^{b)}			Students co-operation	
	No	A few students	More	Giggles or eye makings	Loud comments	Other comments	Students interested ^{c)}	Students worked seriously ^{d)}
France ^{e)}	62	..	..	30	12	11	96(78)	..
Greece ^{f)}	55	29	16	..	88	12	91(80)	91(80)
Italy	56	34	10	24	12	52	92(77)	96(84)
Latvia	67	27	5	17	9	4	92(76)	93(77)
Poland	53	37	10	34	51	15	90(82)	93(78)
Slovak Republic	33	52	15	56	21	23	95(84)	95(82)
Sweden	64	32	4	21	18	–	90(80)	94(91)

- a) In countries where more than one age group participated, the information is usually based on all participating students.
b) Percent of participating classes.
c) “All”, “Nearly all” or “A majority” of the students were reported to have been interested in the survey (within brackets: “All” or “Nearly all” students).
d) “All”, “Nearly all” or “A majority” of the students were reported to have worked seriously (within brackets: “All” or “Nearly all” students).
e) Refers to the total French study.
f) Students co-operation: The Greek study did not distinguish between “students interested” and “students worked seriously”.

Table F. Proportion of unanswered questions. All students.

Country	Cigarettes ^{a)}	Alcohol ^{b)}	Been drunk ^{b)}	Inhalants ^{b)}	Cannabis ^{b)}	Other illegal drugs ^{c)}	Tranq. or sed. ^{d)}	Anabolic steroid ^{e)}	Core questions	Module questions	Own questions	All questions
France	..	3(2)	4(2)	2(1)	2(1)	1	0	2				
Greece	0	2(1)	1(1)	1(0)	1(0)	0	0	1	1	1	2	1
Italy	1	4(4)	3(1)	2(1)	2(2)	1	1	1	3	–	–	3
Latvia	0	2(2)	2(1)	1(0)	1(0)	0	0	1	2	3	8	3
Poland	1	2(2)	2(1)	1(0)	1(1)	1	1	1	2	1	2	1
Slovak Rep.	0	2(3)	2(1)	1(0)	1(1)	1	1	1	1	3	10	2
Sweden	0	2(1)	3(1)	2(1)	2(1)	2	1	2	1	1	3	1

- a) Average for lifetime and 30 days prevalence. Figures within brackets = lifetime prevalence only.
b) Average for lifetime, 12 months and 30 days prevalence. Figures within brackets = lifetime prevalence only.
c) Other illegal drugs include amphetamines, LSD and other hallucinogens, crack, cocaine, ecstasy, heroin and drug by injection. The figure is an average of lifetime prevalence for these drugs.
d) Tranquillisers or sedatives without a doctor's prescription. Lifetime prevalence.
e) Lifetime prevalence.

Table G. Some aspects of validity: Inconsistent answers, unwillingness to admit drug use and reported use of the dummy drug “releivin”. Percentages among all students.

	Inconsistent answers ^{a)}				Unwillingness to admit drug use ^{b)}		Dummy drug “releivin”
	Alco-hol ^{c)}	Been drunk	Canna-bis	Inhal-ants	Cannabis	Heroin	Reported own use
France	2	1	1	0	..	..	0
Greece	6	4	1	1	3	4	0
Italy	5	3	1	0	2	6	1
Latvia	2	2	0	0	8	9	0
Poland	3	2	1	1	4	6	1
Slovak Republic	2	1	1	1	2	3	0
Sweden	0	1	0	0	3	3	0

a) For each drug, inconsistent response pattern is defined as one in which any of the following is found: (a) thirty-day frequency is higher than annual frequency, (b) thirty-day frequency is higher than lifetime frequency, or (c) annual frequency is higher than lifetime frequency.

b) Students answering “definitely not” on the question “If you had ever used marijuana or hashish, do you think that you would have said so in this questionnaire?” and the corresponding question for heroin.

c) Any alcoholic beverage.

The validity of the questionnaire

The comparability of the questionnaire across countries is of vital importance in any multinational survey project. The equivalency of the translation of questions into different languages is therefore an important aspect of validity. The standard ESPAD questionnaire is written in English. In non-English speaking countries the questionnaire was translated back by another translator and the original and the back-translated versions were compared.

However, the equivalency of questionnaires is not only a matter of literal translation. It is also a matter of equivalent understanding. Thus, the question per se should be “understood” in the same way in all countries irrespectively of the original wording in the model questionnaire. When necessary, the questions have been culturally adjusted to the situation in a country. For the possibility to compare the results it is important that e.g. names or nicknames prevalent in a country is used in the translated version of the questionnaire.

No country reported any problem with the translation of the questionnaire. Thus, it seems reasonable to assume that the translation of the questionnaire is a non-issue and does not jeopardise the comparison over the countries.

The cultural context

The standardisation of the different steps in the data collection procedure was the method adopted by the ESPAD project to provide a high level of comparability. This included the target population, the questionnaire and how data were collected and treated, all of which have been described in earlier sections. However, it has not been possible to standardise every detail. This holds true for the cultural contexts in which the students have provided their replies.

Summary

An analysis of data included in this report strongly suggests that the validity is high in all included studies. The indicators include student co-operation, student comprehension, anonymity, reported dummy drug use and construct validity. In no country these measures indicate any serious problem.

According to the survey leaders' reports the students were interested in the study and that they worked seriously while filling out the questionnaire. The conclusion is that the validity of this study seems to be high.

Results

Tobacco use

In this section the lifetime and the last 30 days prevalence rates of smoking cigarettes are presented.

Lifetime use of cigarettes

(Table 1)

A majority of the students in all countries have smoked cigarettes at least once. The highest lifetime prevalence rates are found in Latvia where 82% of the students have smoked, while the lowest rates are reported from Greece where 72% had experienced this. However, about one fourth of the students in all countries reported that they had smoked 1–9 times in their lives (only lifetime prevalence data are available from France).

Regular smokers, if defined as those who had been smoking 40 times or more in lifetime, made up one third (33%) of the Swedish students; while in Latvia almost half of the students (46%) reported this. Other countries with high prevalence rates include the Slovak Republic (44%) and Greece (41%).

The gender pattern reveals that the lifetime prevalence is equal or about equal between the sexes in a majority of the countries. The largest discrepancies are found in Latvia (87% among the boys and 72% among the girls), Poland (79 vs. 74%) and the Slovak Republic (83 vs. 78%).

The largest gap between the sexes regarding the 40+ lifetime prevalence is found in the high prevalence country Latvia in which 56% of the boys and 39% of the girls have smoked at least this often. Other countries with large gender differences are Poland (45 vs. 33%) and the Slovak Republic (50 vs. 39%). In Greece, Italy and Sweden the gender differences are very small (2–3%).

Cigarette smoking during the last 30 days

(Table 2, Figure 1)

About half of the students in the majority of the countries have been smoking during the past 30 days. In all countries except in Sweden the prevalence rates are above 40%, with Latvia at the top where 52% of the students reported this. For the Swedish students the corresponding figure is 33%.

When looking at the proportions of students who have smoked 11 cigarettes or more during the last 30 days another ranking order appears. In Greece 25% of the students reported this, followed by France and Latvia in which 11% had done so. The lowest proportion of students with this behaviour was found in Sweden (4%).

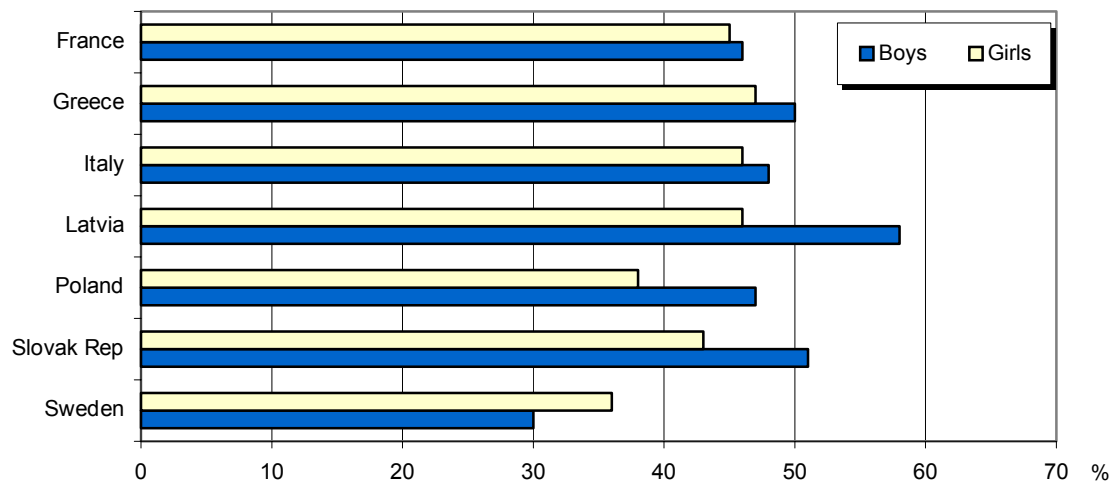


Figure 1. Smoking prevalence last 30 days, by sex.

The gender pattern reveals that in France, Greece and Italy the proportions of students who have been smoking during the last 30 days are almost equal between boys and girls. In Latvia, however, 58% of the boys and 46% of the girls reported smoking at least once during this period, while in Poland (47 vs. 38%) and the Slovak Republic (51 vs. 43%) the gender gap was somewhat smaller. In Sweden, the distribution was reversed, more girls (36%) than boys (30%) had been smoking during the last 30 days. It is known from the annual national surveys, however, that Swedish boys to a large extent use tobacco snuff, which for many individuals may be an alternative or substitute to cigarettes (Hvitfeldt, Andersson and Hibell, 2004).

There are more boys than girls who have smoked cigarettes 11 times or more during last 30 days, except in Sweden where there is hardly any difference between the sexes. The biggest gender differences are found in Latvia, where 17 percent of the boys and 6 of the girls reported this, and in Poland where corresponding figures were 13 and 3 percent.

Alcohol consumption

Lifetime use of any alcoholic beverage

(Table 3, Figure 2)

More than 90 percent of the students in the seven participating countries have been drinking alcohol in this age group, and in some countries almost all (98% in Greece, Latvia and the Slovak Republic) have done so at least 1–2 times in their lives. These high prevalence rates are found in Greece, Latvia and the Slovak Republic, but also in Poland where 97 percent reported this. The lowest lifetime prevalence rates were reported from France (91%), Italy (94%) and Sweden (95%).

However, not all students are regular alcohol consumers. About one fifth of the students in the countries under study had been drinking alcohol less than 10 times in lifetime. Of those countries Italy reported the largest proportion (24%) and Greece the smallest (17%).

Those who reported having consumed alcohol 40 times or more in lifetime (figure 2) can probably be seen as more regular alcohol consumers and this group includes about half of the students in a majority of the countries in this report. The highest proportion was found in Greece where 55 percent reported this, and the smallest in France (39%) and Italy (41%).

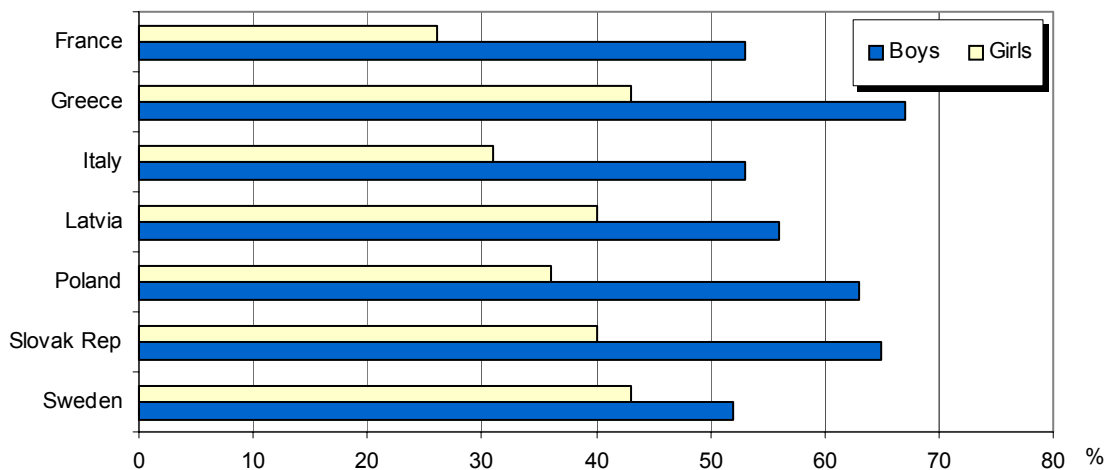


Figure 2. Lifetime use of any alcoholic beverage 40 times or more. Percentages among boys and girls. 2003.

The gender distribution reveals that there are almost no differences with regard to the non-consumers. In the low consumption group, however, there are more girls than boys. Among boys the largest proportion that had been drinking alcohol less than 10 times was reported from Sweden (17%) and Latvia (16%) and the smallest from Greece (12%). Among the girls the largest proportions indicating this was found in Italy (31%) and Poland (28%), but the smallest in Sweden (19%).

Also the prevalence rates of “40+ consumption” show rather important gender differences. The largest differences between the sexes with respect to these prevalence rates are reported from France and Poland, where 53 (boys) vs. 26 percent (girls) and 63 vs. 36 percent respectively reported this. The smallest difference between the sexes was reported from Sweden (52 vs. 43%).

Last 12 months

(Table 4)

It is obvious, that although the majority of the students in this age group are alcohol consumers, the lifetime prevalence rates are not exactly the same as the 12 months rates. Somewhat more students have not been drinking at all during the last 12 months compared to lifetime abstinence. The highest proportion of 12 months abstainers is found in France (14%) and the smallest in Greece and the Slovak Republic (5% each).

Having consumed alcohol 20 times or more during the last 12 months could probably be seen as a rather regular use. The largest proportion reporting this is found in Greece where 42 percent had done so. The smallest percentages are recorded in France (27%) and Sweden (28%).

The sex distribution reveals that there are very small differences in relation to the non-consumers. The largest difference in this respect was found in Italy where 7% of the boys and 12% of the girls did not drink any alcohol during the last 12 months.

Overall more boys than girls had been drinking 20 times or more during this period. In Greece, Poland and the Slovak Republic about half of the boys reported this frequency of drinking, compared to 31, 23 and 25 percent respectively among the girls.

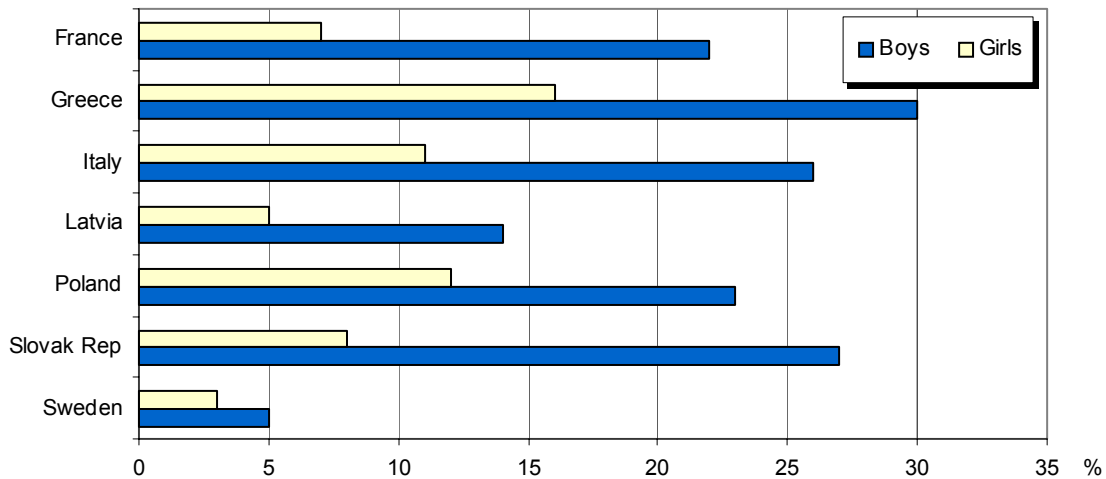


Figure 3. Use of any alcoholic beverage 10 times or more during the last 30 days, by sex.

Last 30 days

(Table 5, Figure 3)

About one fourth of the students had not been drinking alcohol during the last 30 days. The highest number of 30 day-abstainers was reported from France (33%) and the lowest from Greece (18%).

There are rather big differences between the countries with regard to alcohol consumption frequencies of 10 times or more during the last 30 days. In Greece 23 percent had done so, while only 4 percent reported this in Sweden and 9 percent in Latvia. In the other countries this figure was around 16 percent.

The proportions of 30 days abstainers are higher for girls than for boys in nearly all countries. The largest differences are found in France (26 vs. 39%) and Italy (17 vs. 30%), while in Sweden no difference at all was found (26% for both sexes).

The proportion of students who have been drinking at least 10 times during the last 30 days is overall higher among boys than among girls. The highest proportions among the boys are found in Greece (30%), the Slovak Republic (27%) and Italy (26%). A much lower frequency of drinking was reported from the Swedish boys among which only 5 percent had been drinking 10 times or more during the last 30 days.

The highest proportion among the girls in relation to drinking 10+ during the last 30 days was much lower than for the boys, but still reported from the same country (Greece 16%). The lowest corresponding figures were found in Sweden (3%) and Latvia (5%).

Beer

(Table 6)

Four fifth of the students in Poland had been drinking beer during the last 30 days. This is the highest prevalence rate in this group of countries. The next country in beer consumption is Latvia where two thirds of the students reported this. The smallest proportions of consumers were reported from France and the Slovak Republic where about half of the students had been drinking beer during the last 30 days.

Also in relation to frequency of drinking Poland is at the top. 19 percent of the Polish students had been drinking beer 10 times or more during the last 30 days. The countries next to Poland are Latvia (16%) and Italy (15%). In two countries only 8 percent of the students reported that they had been drinking with this frequency (France and Sweden).

More boys than girls are consumers of beer. Among boys the figures varied from 86 (Poland) to 61 percent (France). The highest figure for girls was found in Poland (71%), most other countries about half of the girls were beer consumers. Exceptions are found in France and the Slovak Republic in which countries one third (35%) of the girls had been drinking beer during the last 30 days.

Moreover, there are more boys than girls that had drunk beer 10 times or more during the last 30 days. The highest figure among the boys was found in Poland (30%) and the lowest in Sweden (10%). The highest figures for girls were found in Italy and the Slovak Republic (9% both) and the lowest in France and Sweden (3–4%).

Wine

(Table 7)

A majority of the students in Greece (63%) had been drinking wine during the last 30 days. This is a rather high percentage compared to the other countries and it is especially true in relation to the reported figure from another Mediterranean wine producing country such as France with a corresponding figure of 28 percent. In Italy 56 percent reported wine consumption.

The frequency of drinking is not very high. The highest proportions of students that have been drinking wine 10 times or more during the last 30 days are found in Greece and Italy (9–10%). The lowest figures in this respect are found in Poland and Sweden (1–2%).

The gender distribution is mixed. In France, Greece and Italy there are more boys than girls reporting wine consumption, although the prevalence rates differ quite a lot between the three countries. In Greece and Italy about 65 percent of the boys had been drinking wine compared to 35 percent in France. In Poland and the Slovak Republic there is virtually no difference between boys and girls, while there are more wine consumers among girls in Latvia and Sweden.

In relation to frequent consumption of wine (10+) a difference between the sexes is only visible in the Mediterranean countries France, Greece and Italy where more boys than girls reported this.

Spirits

(Table 8)

The highest prevalence rates of consumption of spirits during the last 30 days are reported from Greece (74%) and Sweden (61%). However, no country reports less than 50 percent (Latvia is exactly 50%) on this variable.

Greece is also high in relation to the proportions of students reporting a frequency of 10 times or more during last 30 days (19%). France, Italy and the Slovak Republic have figures around 10 percent, while Poland has the lowest prevalence rates on this variable (4%).

In all countries there are more boys than girls who have consumed spirits during last month – except in Sweden, where there is no gender difference. The largest gap was reported from Poland (61 vs. 44%) and France (63 vs. 49%).

Frequent consumption of spirits (10 times or more) is mainly reported from the boys, except in Sweden where again there is no difference between the sexes. The highest rates were reported from Greece, both for boys (23%) and girls (16%). The lowest figures among boys (6%) were reported from three countries: Latvia, Poland and Sweden. Among girls the lowest rates were reported from Poland (1%), Latvia (3%) and France (4%).

Last drinking occasion

The questionnaire included five questions regarding the consumed quantities on the last drinking occasion, beverage by beverage. The students were asked: “The last time you had an alcoholic drink, did you drink any beer (/cider/alcopops/wine/spirits)? If so, how much?” The format of the response categories was set as fixed quantities relevant for each beverage in terms of centilitres.

Since glasses, bottles and cans differ in size between countries, each ESPAD researcher described the fixed response categories in the best possible way. The question also included the response categories: “I never drink beer (/cider/alcopops/wine/spirits)” and “I did not drink beer (/cider/alcopops/wine/spirits) on my last drinking occasion”. Countries in which cider or alcopops are virtually non-existent did not include questions about these beverages.

It cannot be excluded that some students misunderstood the questions and reported how much they drank at the last time they consumed the beverage in question and not the consumption on *the last drinking occasion*. Thus, there is a risk that the figures below might be overestimations. However, there is no reason to believe that their possible misinterpretations to any large extent differ between countries.

The results on these beverage specific questions are presented below. They include beer, cider, alcopops, wine and spirits.

Beer

(Table 9, Figure 4)

More than half of the students in two countries (Greece and the Slovak Republic) either do not drink beer or did not drink it on last drinking occasion. (Data from France are missing on this variable). In contrast, the majority of the students in Poland (80%) had consumed beer on the last drinking occasion.

The proportion of students who had consumed rather large quantities (101 cl or more) varies between the six countries. The largest proportions reporting this are found in Sweden (31%) and Poland (25%). Much lower percentages (around 11%) are reported from Greece, Italy and the Slovak Republic.

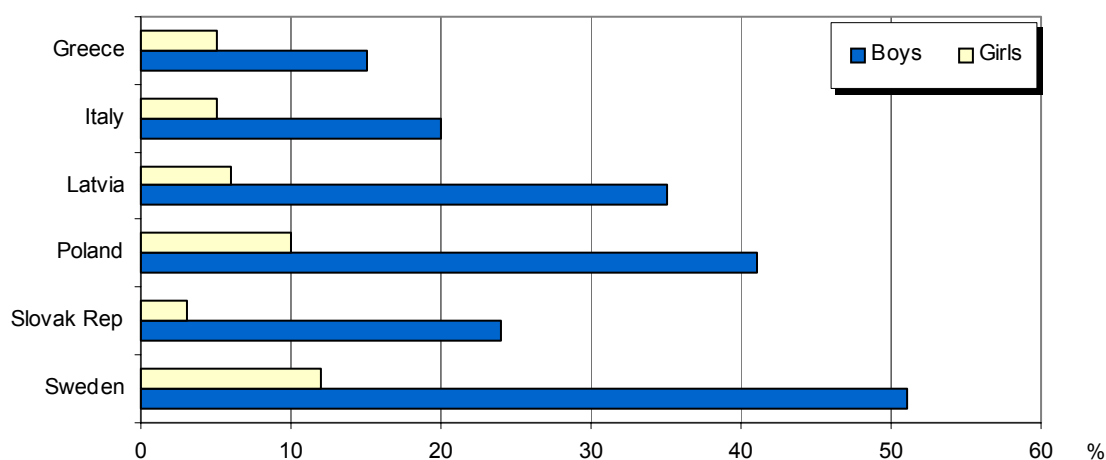


Figure 4. Consumption of 101 cl beer or more on the last drinking occasion, by sex.

More than 4/5 of the boys are beer consumers but not all of them drank beer on the last drinking occasion. The largest proportion in this respect was found among the Polish boys (87%), while the smallest proportion (53%) was reported from Greece.

Among girls we find less beer consumers than among boys. Still, a big proportion of female students who had beer on their last drinking occasion are reported from Poland (73%). Despite the fact that only 33 percent of the Swedish girls consumed beer on this occasion they have a slightly larger proportion of students (12%) than Poland (10%) who had 101 cls or more of beer to drink.

The largest proportion among the boys, who reported a beer consumption of 101 cls or more on the last drinking occasion, was found in Sweden where 51 percent reported this (Figure 4). Next in size in this respect is Poland with 41 percent. The smallest proportions are found in Greece (15%) and Italy (20%). Very few girls in all six countries report having consumed these quantities. As mentioned above, the highest figures were reported from Sweden (12%) and Poland (10%).

Cider

(Table 10)

Rather few countries included questions on cider since this is not a beverage that is sold and consumed in all countries. However, in countries where alcoholic cider is available, young people are often consumers. Of the countries included in this report only three included questions on cider in their questionnaires. They are Latvia, Poland and Sweden.

Moreover, rather few of the students in these countries had been drinking cider on the last drinking occasion. The highest proportion of consumers is found in Sweden where 41 percent had been drinking. In Latvia the corresponding figure was 23% and in Poland 5.

The Swedes also drank a lot more of cider than their Polish and Latvian counterparts. Compared to 1–2 percent in these countries 15 percent of the Swedish students had been drinking 101 cls of cider or more on the last drinking occasion.

In all three countries cider seems to be a beverage of preference among girls, but only the Swedes consume the large volumes. Among boys 10 percent of the Swedish students had been drinking 101 cls or more compared to 2–3 in Latvia and Poland. Among the girls the Swedish figure is even higher (20%) but the corresponding figures for the two other countries are instead lower than for the boys (1% for both).

Alcopops

(Table 11)

As was the case with cider, alcopops are not available in all countries. In this study four out of seven countries included questions about alcopops. They are Greece, Latvia, Poland and Sweden.

However, the vast majority (80% or more) in Latvia, Poland and Sweden did not drink any alcopops on their last drinking occasion. In Greece this proportion was somewhat smaller (61%), but still it represents a majority of the students. There is a substantial difference between Poland and the other countries on this variable. Despite the fact that the proportion of non-consumers are similar in three of the countries, the proportion in Poland that never drink alcopops is much higher than in other countries.

Most of the students who had alcopops on their last drinking occasion reported consumption of 100 cls or less. Greece is the country where most students, in comparison, had been drinking more than 100 cls, but the proportion is nevertheless small (6%). In the other countries 1–3 percent had been drinking these amounts.

The gender distribution reveals that in Latvia (25 vs. 15%) and Sweden (19 vs. 12%) more girls than boys had alcopops on the last drinking occasion. In Greece there was no gender difference at all (39%) and in Poland a small dominance for boys (7%) compared to girls (4%) was observed.

Very few girls drink large quantities (101 cls or more) of alcopops. In Greece and Sweden 4 percent reported this, but no one in Latvia and Poland. Among Greek boys a larger proportion had been drinking 101 cls or more (8%) compared to the other three countries (2–3%).

Wine

(Table 12, Figure 5)

About half of the students in the Slovak Republic (52%) had wine to drink last time they consumed alcohol. In Greece and Italy 47 and 44 percent reported this respectively. However, in another wine producing country, France, only one fifth of the students (21%) had been drinking wine. This is the smallest proportion in any of the countries under study. In Latvia 35 percent had been drinking wine, in Poland and Sweden the corresponding figures were 29 and 27 percent respectively.

The majority of the students in all countries had consumed 30 cls or less. About one tenth of the students (9–12%) in Greece, Italy, Poland, the Slovak Republic and Sweden had been drinking 37 cls or more on this occasion. In France and Latvia, however, this was reported by no more than 4–5 percent.

Although the prevalence rates differ, the gender distribution shows that in France, Greece and Italy more boys than girls had wine on the occasion. In the other countries (Latvia, Poland, the Slovak Republic and Sweden) it was the other way around, i.e. more girls than boys had been drinking wine, while the gender difference was small in Poland.

Among boys in Greece, Italy, Poland and the Slovak Republic 15–19 percent had 37 cls or more on this occasion. In France, Latvia and Sweden rather few (4–7%) reported these volumes however.

Another pattern is found among girls. In no country, except in Sweden, the proportion reporting a wine consumption of 37 cls or more was above 8 percent. The lowest figure was found in France (2%). In contrast, 12 percent of the Swedish girls reported to have consumed these quantities of wine on the last drinking occasion.

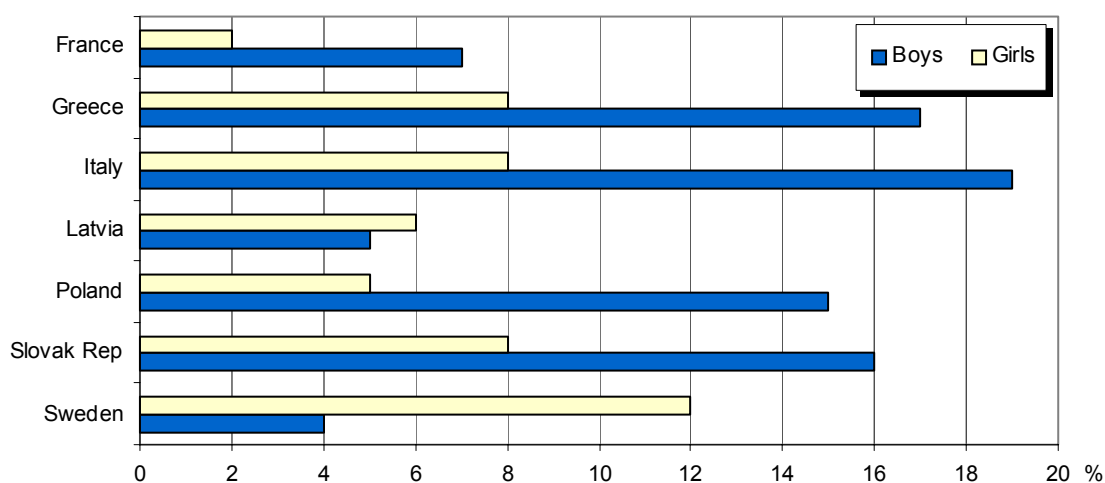


Figure 5. Consumption of 37 cl of wine or more on the last alcohol drinking occasion, by sex.

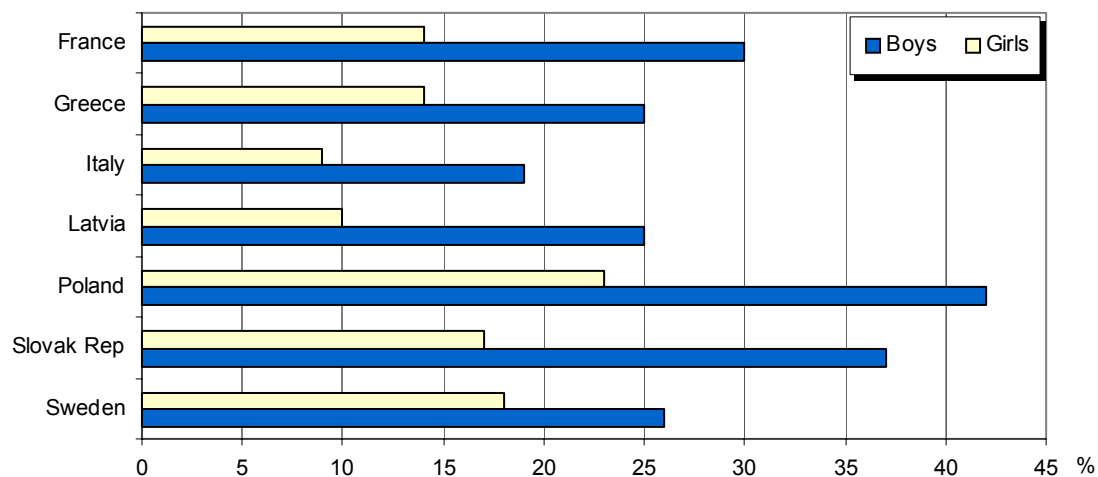


Figure 6. Consumption of 11 cl of spirits or more on the last drinking occasion, by sex.

Spirits

(Table 13, Figure 6)

Compared to other beverages the proportions of students that had consumed spirits on the last drinking occasion are larger than for any of the other beverages. In all participating countries the percentages are slightly higher than 50 percent except in Greece and Latvia where the corresponding figures deviate in opposite directions and was 66 percent for Greece and 40 for Latvia.

The highest percentage reporting consumption of 11 cl or more on this occasion is found in Poland (32%) followed by the Slovak Republic (25%) and France, Greece and Sweden (20–22%). The smallest percentages in this respect are reported from Italy (13%) and Latvia (17%).

In Sweden there are no differences between the sexes regarding consumption of spirits on the last drinking occasion (52%). In the other countries more boys than girls had been drinking spirits.

A clear difference between the sexes can be seen in the proportions that have been drinking 11 cl of spirits or more on this occasion (Figure 6). The largest proportion among the boys is found in Poland (42%), followed by the Slovak Republic (37%) and the smallest in Italy (19%).

Among the girls much lower proportions are reported on this consumption level. Also here Poland reports the highest proportion (23%), followed by the Slovak Republic and Sweden (17–18%). The smallest figures among the girls were found in Italy and Latvia (9–10%).

Estimated average consumption

An attempt has been made to estimate the volumes consumed on the last drinking occasion in each country. For this purpose, the individual responses for different beverages presented in tables 9–13 were used. The volumes are based on the assumed alcohol contents for different beverage types and recalculated into pure alcohol. The alcohol content for alcopops is assumed to be 4.5%, beer and cider 5%, wine 11% and spirits 40%.

For the calculations the midpoints of each response category's range are used. For the last open-ended category the lowest value is used. This is most certainly a conservative estimate, since some of the students in this category probably had been drinking larger quantities. The calculations are done only for students who had ever been drinking alcohol.

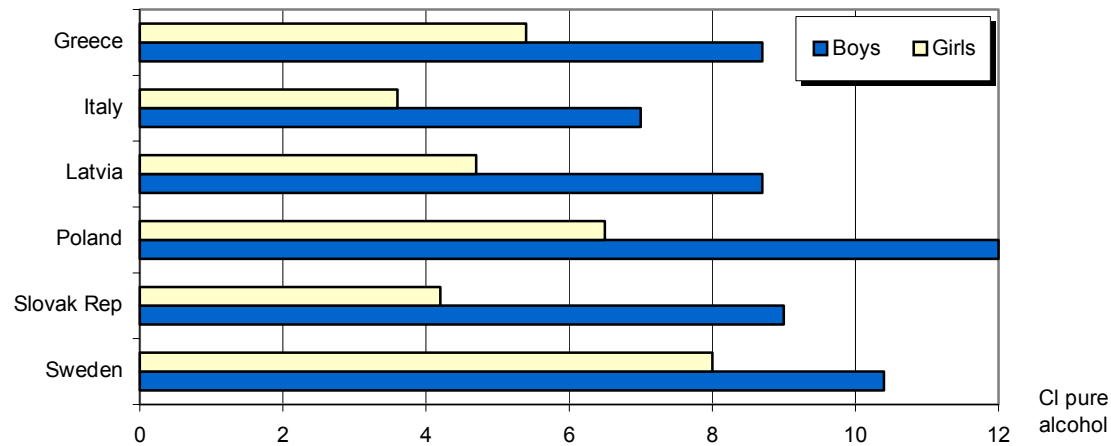


Figure 7. Estimated average consumption of beer, wine and spirits, in cl 100% alcohol, on the last drinking occasion, by sex.

It must be stressed, however, that these kinds of calculations always are uncertain and build on a series of assumptions. Thus, it is important not to overestimate the exact size of the volumes. On the other hand, it seems reasonable to assume that substantial differences in consumption patterns between countries, as well as between boys and girls, most probably reflect true differences since the calculations are done in exactly the same way in all countries. This is an important attempt to, at the macro level, compare the drinking volumes and drinking patterns among young people in Europe. This is an important attempt to, at the macro level, compare the drinking volumes and drinking patterns among young people in Europe.

Beer, wine, alcopops, cider and spirits

(Table 14, Figure 7)

As mentioned above, the students' answers to beverage specific questions about the consumed amounts on the last drinking occasion form the base for the calculations presented in this section. In a few countries, alcopops and ciders are not sold or served, and they are subsequently not asked about in the ESPAD questionnaire.

The estimated last occasion consumption of beer, wine, alcopops, cider and spirits are presented in cls of 100% alcohol and so is the total average consumption (table 14). The French data only include the consumption of wine and spirits. The reason for this is that the question on beer was made as an open-ended question in the French questionnaire. The two countries that report the highest total consumption are Sweden (9.6 cls) and Poland (8.8 cls). The lowest average consumption is reported by Italy (5.5 cls).

Overall, the beverages most preferred and reported by the students are beer and spirits. On average, they constitute slightly more than one third each. However, there are variations between the countries in relation to preferred beverages. In addition, it must be pointed out that the inclusion of alcopops and /or ciders has an impact on the size of the percentages, which makes the comparisons somewhat difficult. It seems, however, that spirits make up the largest parts of the consumption in Greece (40%) and the Slovak Republic (49%). Beer, on the other hand, is predominantly reported by the students in Latvia (42%) and Sweden (36%). In Italy and Poland these two beverages made up equal parts (38 and 41% respectively).

If we instead focus on the amounts drunk by the students, it is clear that the Polish and Swedish students had been drinking the largest quantities of beer (about 3.6 cls), and the Greek and Slo-

vakian students had had the smallest (1.7 and 1.9 cls respectively). Between these countries are Latvia (2.8 cls) and Italy (2.1 cls)

The wine consumption on last drinking occasion is probably more affected by the availability of alcopops and/or ciders than the questions on beer and spirits, at least the prevalence rates are higher in countries where these beverages are not sold. In Italy and the Slovak Republic, for example, the proportions of wine of the total consumption are 24 and 21 percent respectively. In Sweden, where many students drink alcopops or cider, this proportion is only 8 percent, and in Latvia and Poland it is about 12.

When looking at the amounts of wine that were consumed by the students, it is still Italy and the Slovak Republic that are top consumers, but included in this group is also Greece, i.e. all of them are typical wine producing countries. In all three countries the consumed amounts of wine were equivalent to 1.3 cls of pure alcohol. It is interesting to note, that another wine producing country, France, reports the lowest consumption on the last drinking occasion (0.5 cls). The other two countries with low wine consumption are Latvia and Sweden (0.8 cls each).

The two countries in which the students had consumed the largest amounts of spirits on the last drinking occasion are Poland (3.6cls) and the Slovak Republic (3.1cls). Next come Greece (2.9cls), Sweden (2.7) and France (2.6). Italy and Latvia reported the lowest consumption levels (2.1cls both).

Consumption of alcopops is reported by Greece, Latvia, Poland and Sweden. The largest consumption is reported by Greece, where the students had been drinking more than twice as much (1.2 cls of pure alcohol) than the students in the other three countries (0.4 cls on average).

The students in three countries drink cider: Latvia, Poland and Sweden. The largest amount is reported from Sweden (2.0 cls), which is more than three times the consumption in Latvia (0.6cls) and more than 6 times the consumption in Poland (0.3cls). In Latvia the corresponding figure is 0.6 and in Poland 0.3 cls of pure alcohol.

The gender pattern reveals that in all participating countries (no comparable data from France) the consumed volumes of beer are generally larger among boys than among girls. The only exception from this is found in Poland, where no real difference between the sexes exists.

For wine it is the other way around. In Latvia, Poland, the Slovak Republic and Sweden the girls consumed larger volumes of wine than the boys. Only in Greece and Italy there are no gender differences in the consumption of wine.

The gender pattern related to the consumption of spirits is mixed. Only in Latvia the average consumption is higher among boys than among girls (34 vs. 27cls), while it was the other way around in Greece and the Slovak Republic (45 and 52cls vs. 35 and 46cls). In other countries the consumption of spirits was more or less equal.

Drunkenness

Lifetime

(Table 15)

The absolute majority of the students in Latvia, Poland, the Slovak Republic and Sweden have been drunk at least once in lifetime. The highest proportions reporting this are found in Sweden (86%), while it is reported by 82 percent of the students in Latvia and the Slovak Republic and by 78 percent in Poland. Somewhat lower figures are found in the Mediterranean countries, out of which France shows the lowest prevalence rates (61%).

The Swedes have, not only the highest lifetime prevalence rates of being drunk, but also the highest proportion reporting drunkenness 20 times or more in lifetime (49%). The country next

to this, the Slovak Republic, reports only about half this value (27%), while the three Mediterranean countries France, Greece and Italy only report one tenth (8–12%) with this experience.

In all countries, except in Sweden, there are more boys than girls who have ever been drunk. In Sweden there is no difference between the sexes. The highest proportions of boys with drunkenness experiences are found in Latvia and the Slovak Republic (88% both), Sweden (87%) and Poland (85%). Among the girls the highest rates are found in Sweden (86%), Latvia and the Slovak Republic (ca 78%).

Overall, more boys than girls report having been drunk 20 times or more in lifetime. The highest proportions among boys are found in Sweden (54%) and in the Slovak Republic (42%) and the lowest in Greece (11%) and France (15%). The highest proportion among the girls is 44 percent (Sweden) and the lowest 4 percent (France and Greece both).

Last 12 months

(Table 16, Figure 8)

The same pattern that was observed in the lifetime prevalence also appears in the 12 months prevalence rates of being drunk. The highest prevalence rates are found in Sweden where 82 percent of the students had been drunk during the last year. The countries that have the next highest figures include the Slovak Republic (70%), Latvia (67%) and Poland (64%). In France, Greece and Italy about half of the students (France 46, Greece and Italy 51%) had been drunk during the last 12 months.

One fifth (20%) of the Swedish students reported that they had been drunk at least 20 times during last year. This is twice as high as reported from the Slovak Republic (11%). In France, Greece and Italy only 3–5 percent reported this frequency of intoxication.

Again, there is a clear difference between the sexes in all countries, except in Sweden. Table 16 reveals that the 12 months prevalence rates among boys are rather similar in Sweden and the Slovak Republic (about 82%), but in Poland (74%), and Latvia (77%) they are still lower. The drunken behaviour is, however, still more frequent in Sweden than in any of the other countries.

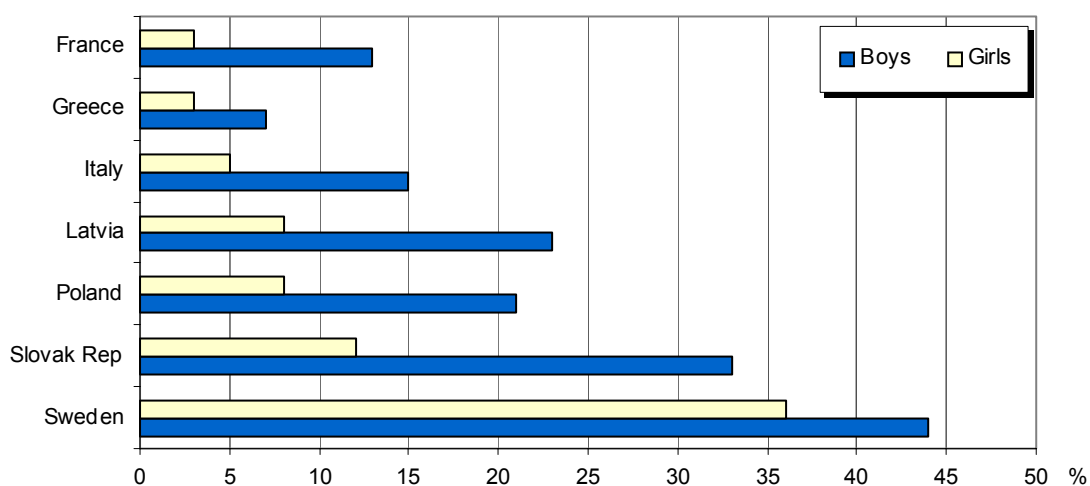


Figure 8. Proportion of all students who have been drunk 10 times or more during last 12 months, by sex.

One quarter (24%) of the Swedish boys had been drunk 20 times or more during the last 12 months, compared to 18 percent in the Slovak Republic and 14 percent in Latvia. The lowest values among boys (4–8%) are reported from France, Greece and Italy.

Such frequent drunken behaviour is very uncommon among girls in the majority of the countries participating in this study. About 1 to 4 percent of the girls reported this behaviour – except in Sweden, where 18 percent of the girls had been drunk 20 times or more during the last 12 months.

Last 30 days

(Table 17, Figure 9)

In the three Mediterranean countries France, Greece and Italy about one fourth of the students have been drunk during the last 30 days. Similar to the findings in relation to lifetime and 12 months these prevalence rates are the lowest in the countries under study. A somewhat higher rate (around 38%) is reported from Latvia, Poland and the Slovak Republic, but the highest proportion was found in Sweden where 61 percent of the students had been drunk during the last 30 days.

The majority of the students (who had been drunk) in all countries had been drunk only 1–2 times during the period. Some, however, report that they had been drunk at least 3 times during the last 30 days. The variation between the countries is not very big. Still, the top country is Sweden (24%), but Italy, Latvia, Poland and the Slovak Republic report about equal proportions, which is about twice the values reported by France and Greece (around 7%).

There are more boys than girls, also in the high prevalence country Sweden, reporting drunkenness during the last 30 days, although the differences vary. Thus, the highest prevalence rates among the boys are found in Sweden (63%), the Slovak Republic (53%), Latvia and Poland (48% both). Consequently, the three Mediterranean countries report the lowest prevalence rates among the boys. The Greek boys report a somewhat lower 30 days prevalence rate (25%) than their counterparts in France and Italy (around 34%).

The gender differences vary, but overall the proportions among girls are lower than among boys. The smallest gender gap is reported from Sweden (59 vs. 63%) and Greece (20 vs. 25%). The largest gap was found in France where 32 percent of boys and 14 of girls had been drunk during the last 30 days.

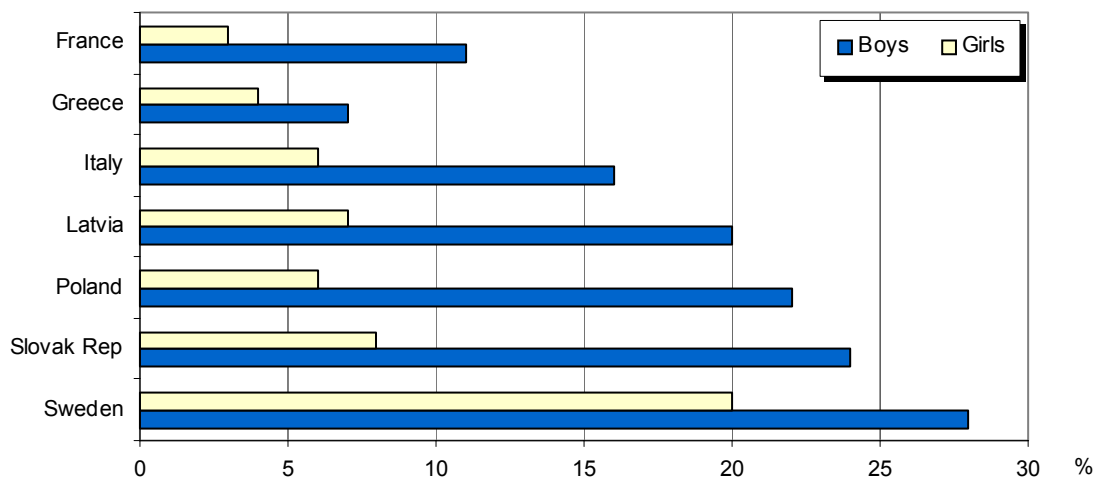


Figure 9. Proportion who have been drunk 3 times or more during the last 30 days, by sex.

Frequent intoxication (3 times or more during the last 30 days), is reported by more boys than girls in all countries. In most countries the number of boys is more than the double compared with the girls, except in two countries. One of them is the low prevalence country Greece (8 vs. 5%) and the other is the high prevalence country Sweden (28 vs. 21%).

Degree of drunkenness

(Table 18)

The feeling of being drunk is a very subjectively defined state of mind. In addition, young people differ in their view on what should be defined as a state of intoxication. In an attempt to measure the individual's personal perception of his/her degree of drunkenness a ten points scale was included in the questionnaire for the students to indicate their estimated degree of drunkenness the last time this happened. The endpoints of the scale were defined as: "Somewhat merry only" (1) and "Heavily intoxicated to the point of being unable to stand on my feet" (10). As an extra option they could tick the mark "I have never been drunk". The results are presented in table 19.

The prevalence rates of drunkenness vary between the participating countries. About one third of the students in France and Greece said on this variable that they had never been drunk. In Italy this was indicated by one fourth, while in the remaining countries less than one fifth gave this answer.

More than half of the students in Latvia (56%) had been only slightly affected by the alcohol as they indicated 1 or 2 on the scale, while one third (30%) of the Slovakian students did so. In all other countries the corresponding proportion was around one fifth.

When looking at the other end of the scale, it was found that almost half of the Swedish students (46%) indicated 6 or higher on the scale. The country with the second highest proportion in this respect was Poland (40%), followed by Italy (37%). The smallest number of students indicating 6 or higher were found in Latvia (18%) and in France (27%).

Another way of analysing the results is to calculate the average degree of drunkenness in each country by taking into account the proportions of students indicating each separate value. This gives a mean value for each country also by gender. Those who have never been intoxicated are excluded.

The mean scale value ranges from 5.4 to 3.2. Italy, Poland and Sweden have got the same value (5.4), Greece 5.2, France 5.0 and Latvia 3.2.

There are important gender differences in these results. In all countries there are more boys than girls that have indicated a degree of drunkenness higher than 5 on the scale. The highest proportions among the boys were found in Poland and Sweden (about 53%), while the lowest were found in Latvia (28%), France and Greece (about 37%). Among the girls the highest proportions in this respect were found in Sweden (42%), Italy (28%), Poland and the Slovak Republic (about 26%) and the lowest in Latvia (12%).

It is not known why the Latvian students are differently distributed over the scale than the students in other countries. One explanation could be that the translation of the question has been inadequate. The difference calls anyhow for attention, since the distributions in other countries are more similar.

Number of drinks needed to get drunk

(Table 19)

There is reason to believe that, as is the case on the individual level, countries may differ in consumption pattern, thus reaching an intoxicated state at different levels of consumption. Thus, in an attempt to get a better understanding of the reported degree of drunkenness, the students were

asked how many drinks they estimated that they would need to feel drunk. As can be expected the results take the form of a normal distribution over the categories. Overall, the majority of the students had indicated 5–6 drinks in all countries except in Sweden where the most frequently indicated category was 3–4 drinks. In some countries, however, the differences between the two groups were very small and most probably not significant (Italy, Latvia the Slovak Republic)

About one fourth of the students in Greece, Poland (25% both) and Italy (24%) thought that 1–4 drinks would make them feel drunk, while about one third in Latvia (32%) and the Slovak Republic (31%) thought so. However, the highest proportion of students who gave this answer was found in Sweden, where 43 percent did so. In France the corresponding figure was 17 percent.

In five countries (France, Greece, Italy, Latvia and the Slovak Republic) the proportion of students estimating that 7–8 drinks or more would make them feel drunk was 24 to 29 percent, while in Poland this was indicated by 31 and in Sweden by 18 percent.

The sex distribution on this variable is interesting. As we have seen previously in this report, more girls than boys have never been drunk at all. In addition, the girls reported that they would get drunk on a lesser amount of alcohol than the boys did. Those reporting that 1 to 4 drinks would make them feel drunk ranged among boys from 9 (France) to 29 percent (Sweden), and among girls from 20 (France) to 45 percent (Sweden).

Consequently, more males than females thought that they should need 7–8 drinks or more to get drunk. In all countries but Sweden 38 to 48 percent of the boys gave this answer, while in Sweden the percentages was 29. The same pattern is found among the girls, however on a much lower level. In five countries (France, Greece, Italy, Latvia, Poland and the Slovak Republic) 13–17 percent of the female students indicated this, while the corresponding figure for Sweden was 9 percent.

The results on this variable indicate that the students in participating countries have different views on the effects of alcohol. An attempt to calculate a mean value from the table data (the mean number of drinks was calculated by taking the mid-points of each category and multiply with the proportion of students who indicated that number of drinks) reveals that the students in France would need 6.4 drinks and the students in Greece and Poland 6.2 drinks to get drunk, while in the high intoxication prevalence country Sweden the students would need only 5.1 drinks to feel these effects.

This suggests different possible explanations. The consumption pattern can be the reason behind this, i.e. having the drinks over a longer or shorter time period could make the difference in the number of drinks needed to feel drunk. Another explanation could be that e.g. the Swedish students drink the alcohol with the intention to get drunk and thus give way for feelings that might be suppressed by students in other cultures where the norm is to stay unaffected by the consumption.

Binge drinking

(Table 20, Figure 10)

Approximately half of the students have been binge drinking during the last 30 days, i.e. drinking five or more drinks in a row. The highest prevalence rates on this variable are found in Sweden (58%), Latvia (55%) and Poland (51%). In France, which had the lowest prevalence rate, about one third reported this.

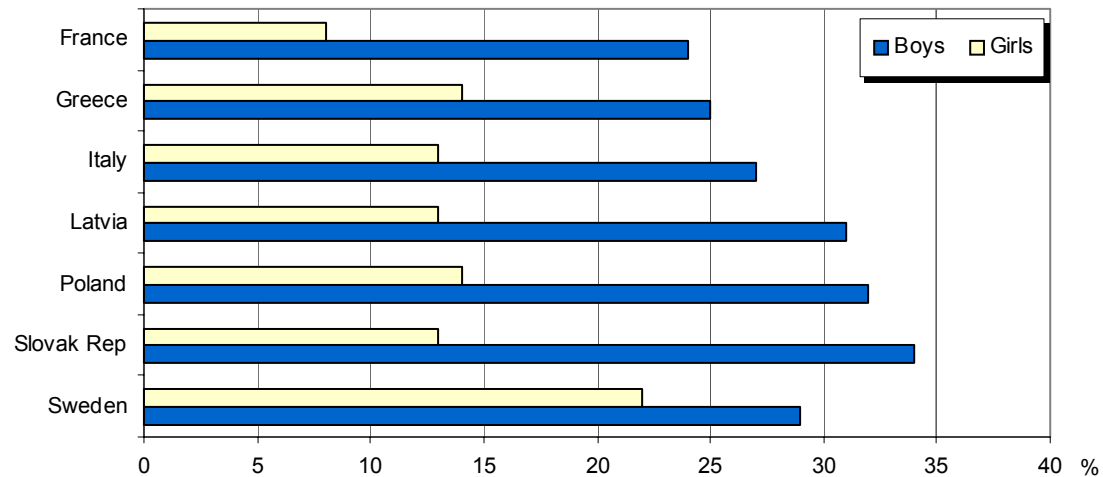


Figure 10. Proportion of students who reported "binge drinking" 3 times or more during the last 30 days, by sex.

The majority of those who reported this behaviour had been binge drinking on one or two occasions. The proportion of students that had been binge-drinking 3 or more times during the last 30 days made up about one fifth in the majority of the countries. The highest percentage was found in Sweden (26%) and the lowest in France and Italy (around 18%). All others reported a prevalence rate around 22 percent.

There are important gender differences in binge drinking. Overall the 30 days prevalence rates were much higher among boys. The highest prevalence rates were found in Latvia, the Slovak Republic (around 65%), in Poland and Sweden (around 61%), while France reported the lowest figure in this respect (49%).

Among the girls the proportions were lower, the only country where this value was rather close to the one for boys was Sweden, where 56 percent of the girls reported this.

When it comes to frequent binge drinking (3 times or more during the last 30 days), the proportions among boys were highest in the Slovak Republic (34%), Latvia and Poland (32% each), while the corresponding figure for France, Greece and Italy was around 25 percent. Among the girls, however, the highest figure is found in Sweden (22%), while this was reported by around 14 percent in the majority of the other countries. Only France deviates from this with 9 percent.

It seems as if the most important differences in binge drinking among the participating countries are found between the Mediterranean countries and the rest, especially among the boys. Among the girls, however, the Swedish girls are strikingly different from girls in the other countries.

Overall, rather few students (around 5%) had been at a restaurant when they had been drinking on last occasion. The country with a somewhat higher proportion indicating this was Italy (13%).

For the rather un-precise category "other places" Greece reports a rather large proportion of students (30%). 16 percent of the Polish and 12 percent of the Slovakian students chose this alternative. The average for all other countries was 7 percent.

The gender pattern reveals that on average more boys than girls report having been drinking outdoors, i.e. at a "street, park, beach" or at a "bar or pub". It is especially the boys in Latvia (32 vs. 21%) and in Poland (36 vs. 18%) that are reporting this.

The boys are also in the majority among those students who had been drinking in a bar or a pub. Only Sweden deviates from this pattern with practically no gender differences.

A reverse gender pattern is found in relation to drinking at a disco. More girls are reporting this in France, Greece, Latvia and the Slovak Republic. In the rest of the countries no gender differences were found.

These findings indicate that there are cultural factors behind this, which are not possible to identify without specific separate studies on the phenomenon. For example, it would have been reasonable to think that drinking outdoors in a street, park or beach would be reported to a higher degree by the students in the Mediterranean countries than among others. Instead, the students in Latvia and Poland are those who are mostly reporting this. Other important factors are country level differences in alcohol policies, which are restricting drinking in public places like bars and restaurants.

Illicit drugs

Any illicit drug

Lifetime

(Table 21, Figure 11)

The use of illicit drugs is spread in all European countries participating in this study, but the prevalence rates differ substantially between the countries. The highest lifetime prevalence rate is found in France, where more than half of the students have tried an illicit drug (58%). The countries that come next are Italy (43%), the Slovak Republic (39%) and Poland (37%). The lowest rates, on the other hand, are found in two so different countries, both geographically and culturally, as Greece (16%) and Sweden (15%).

The frequency of use is varying in all participating countries. About one tenth have used illicit drugs only one or two times in most of the countries. In Greece and Sweden these proportions are smaller (5 and 7% respectively), but since the lifetime prevalence rates in these countries are low this means that one third of the drug users in Greece and half of them in Sweden have only used drugs 1–2 times in lifetime.

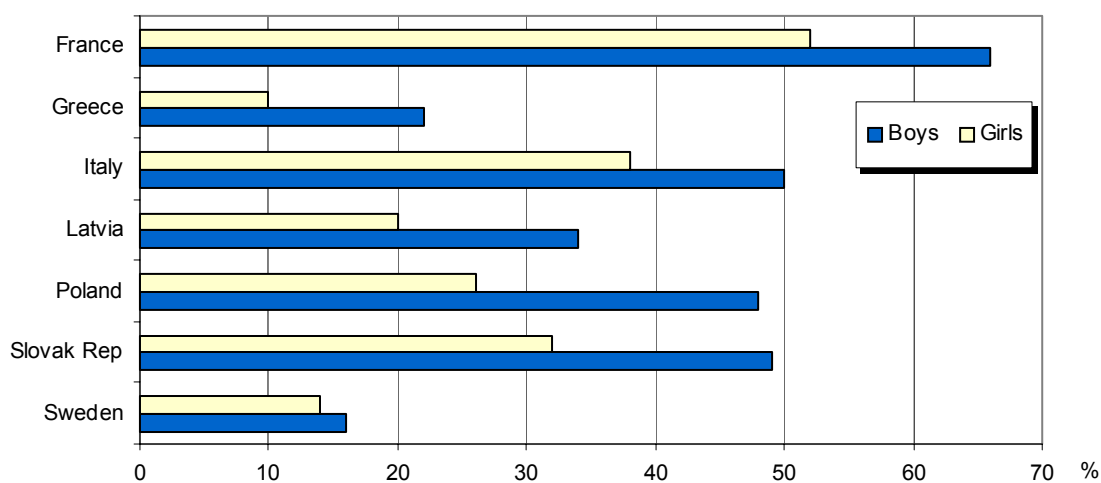


Figure 11. Lifetime experience of any illicit drug, by sex.

A more regular use, 10 times or more in lifetime, either in the past or more recently, is reported by one third of the French students (35%) and one fourth of the Italians (24%). Both in Poland and the Slovak Republic this was reported by 16 percent of the students. In Greece and Latvia these proportions are lower (around 8%) and in Sweden only 3 percent of the students reported these prevalence rates.

In all countries more male than female students have used illicit drugs. The relatively largest difference is found in Greece, where more than twice as many boys as girls report this (22 vs. 10%), and in Poland where the difference was almost as high (48 vs. 26%). In Sweden the prevalence rates are about the same among boys and girls (around 15%).

Similarly, there are more boys than girls that report frequent drug use (10 times or more), but the ranking order between countries remains also when looking into the gender pattern. Thus, the highest proportions of both boys and girls reporting this behaviour are found in France (44 vs. 25%) and Italy (30 vs. 19%). In Sweden, however, there is no difference between the sexes but the prevalence rates are also small (around 4%).

Marijuana or hashish

Lifetime

(Table 22, Figure 12)

Since cannabis is the dominant drug among young people in Europe, the lifetime prevalence rates of cannabis use are virtually equal to those of any illicit drug. Thus, the highest prevalence rates for marijuana or hashish are found in France (58%) and Italy (43%) and the lowest rates are found in Greece (16%) and Sweden (14%).

The high prevalence rates, 10 times or more in lifetime, follows the pattern of the lifetime prevalence rates. In the two high prevalence countries France and Italy 35 and 23 percent respectively had used cannabis 10 times or more. On the other hand, very few in Greece, the Slovak Republic (6% both) and Sweden (3%) reported such a frequent use.

Also the gender pattern is about the same as for any illicit drug. There are more boys than girls who have been using cannabis in lifetime. In the two high prevalence countries, France and Italy, the gender differences are relatively small, i.e. the proportions among the girls are more than $\frac{3}{4}$ of those of the boys. In other countries the gender gap is wider and the girls' proportions are about half of the one for boys, except in Sweden where the proportions are close to equal.

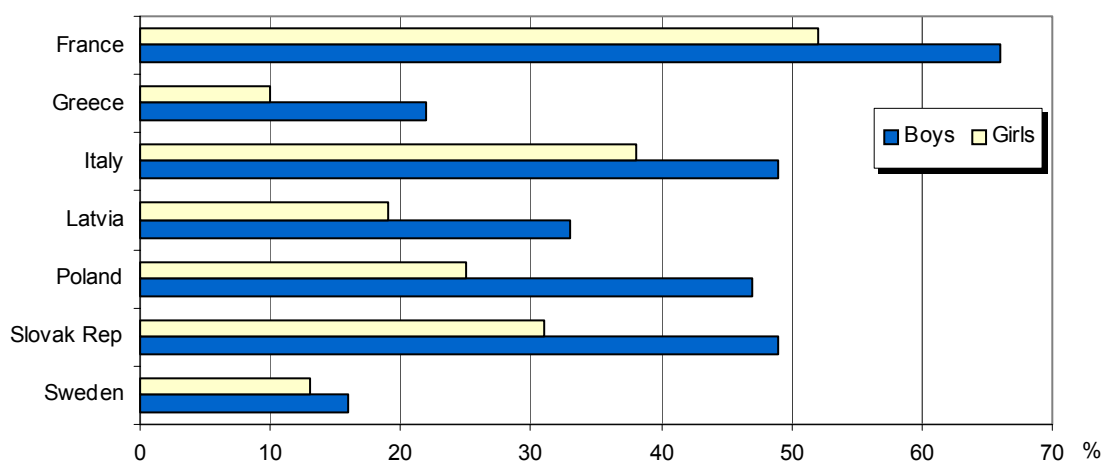


Figure 12. Lifetime experience of marijuana or hashish, by sex.

The gender pattern regarding prevalence rates of 10 times or more follows the pattern for the lifetime figures. In the high prevalence countries France and Italy the gender differences are smaller than in Poland and the Slovak Republic where the proportions among boys are more than twice the girls. No gender difference, however, in the low prevalence country Sweden.

Last 12 months and last 30 days

(Table 23, Figure 13)

Among young people the lifetime drug experience is relatively recent. However, among students aged 17–18 it is reasonable to think that some of those who tried an illicit drug at a younger age did perhaps not continue into a regular use. Thus, the *12 months prevalence* rates of cannabis use are mainly lower than the lifetime figures.

The highest 12 months rates are found in the same countries as the highest lifetime rates, although on a lower level. In France nearly half of the students (46%) had been using cannabis during the last 12 months and in Italy this was true for one third of the study population (35%). The countries that come next in relation to size of prevalence rates are Poland and the Slovak Republic where about one fourth (26–27%) had used it. In the low prevalence countries Greece and Sweden these proportions were 11 and 8 percent respectively.

In the high prevalence countries quite many students had used hashish or marijuana 6 times or more during the past 12 months. In France this was true for 29 percent and in Italy 21 percent. Around 10 percent of the students in Poland and the Slovak Republic reported this, while the proportions in other countries were low.

The gender pattern shows that the 12 months prevalence of cannabis use is higher among boys than among girls in all countries except Sweden. Similar to the Swedish lifetime prevalence figures the proportions are about the same for both sexes.

In some of the participating countries the gender differences are quite big. In Greece, for example, the proportion is almost three times as high among boys (17%) as among girls (6%). In Latvia, Poland and the Slovak Republic the proportions among girls are about half of the ones among boys, while in France and Italy the gender distribution is more equal (about $\frac{3}{4}$).

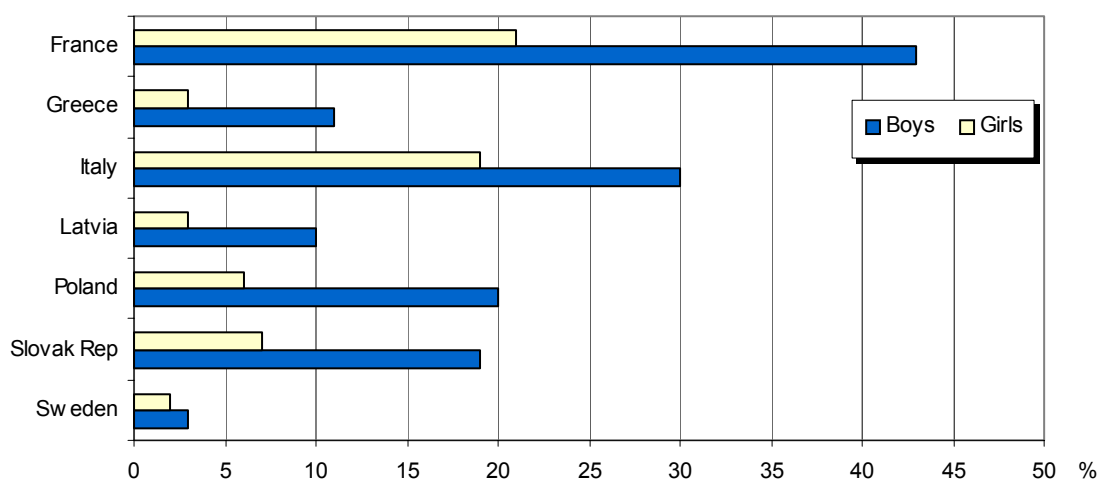


Figure 13. Proportion of students who have used marijuana or hashish during the last 30 days, by sex.

The last 30 days prevalence rates usually indicate a more or less regular use, but the percentages are mainly much lower than the 12 months prevalence rates. However, the high and low prevalence countries are still the same – the ranking order of countries has not been disrupted.

In France one third of the students (31%) had used hashish or marijuana during the last 30 days and in Italy this was reported by one fourth of the students (24%). In most of the other countries the proportions were about half of the 12 months prevalence rates. In Poland and the Slovak Republic about 13 percent had been using cannabis during this time period, and in Greece and Latvia this was reported by about 7 percent. The lowest figure was again reported by Sweden (3%).

The gender differences on this variable are rather important. In France about twice as many boys as girls reported this behaviour (43 vs. 21%), while in Italy the girls' percentage made out about two thirds of that of the boys (30 vs. 19%). In all other countries the proportions reporting recent drug use were substantially lower among the girls than among the boys. However, in the low prevalence country Sweden there are no gender differences.

Any illicit drug other than marijuana or hashish

Lifetime, last 12 months and last 30 days

(Tables 24–28, Figure 14)

Despite the fact that cannabis is the drug of preference for both occasional and regular users in these age groups, some students have used other substances as well. In table 24 the lifetime prevalence rates for any drug other than marijuana or hashish are presented by number of occasions. The substances included are amphetamines, LSD or other hallucinogens, crack, cocaine, heroin, ecstasy, magic mushrooms, GHB (gammahydroxybutyrate) and any drug used by injection. In table 25 the total prevalence rates of the same variable is presented, including also the 12 months and 30 days prevalence rates. Furthermore, in tables 29–31 these variables are presented by substance.

The country reporting the largest proportion of students having used any of these drugs in lifetime is Poland where 16 percent of the students did so (Table 24). In four countries about one tenth reported this behaviour, i.e. France (8%), Italy (11%), Latvia (9%) and the Slovak Republic (10%). In Greece and Sweden, however, the reported percentages are much smaller (around 5%).

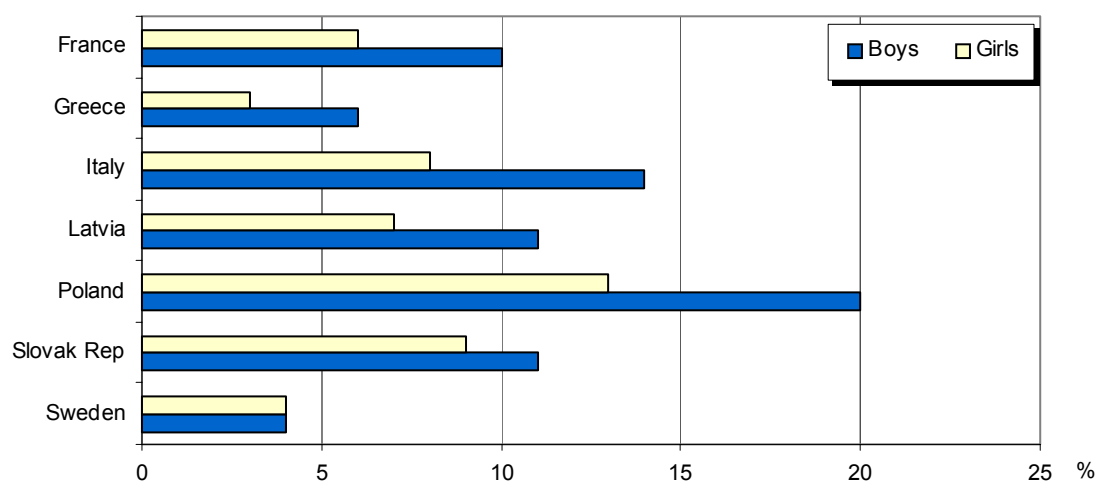


Figure 14. Lifetime experience of any illicit drug other than marijuana or hashish, by sex.

This means that the number of occasions that these substances have been used is not very high. In most of the participating countries the proportions of students who had used any of them 10 times or more are below 10 percent. The country reporting the most frequent use is Poland where 7 percent of the students did so. In all other countries these proportions are 4 percent or below.

In all participating countries, except in Sweden, there are more boys than girls who ever tried any of these substances. In the high prevalence country Poland 20 percent of the boys did so, compared to 13 percent of the girls. The country that comes next to this is Italy where 14 percent of the boys and 8 percent of the girls reported this. In Sweden and the Slovak Republic there are no gender differences.

Table 25 shows the total lifetime rates as well as the 12 months and 30 days prevalence rates of illicit drugs other than marijuana or hashish (for France and Poland data on 12 months and 30 days are missing). Of the available data Italy and the Slovak Republic present the highest 12 months rates (around 8%) and the highest 30 days prevalence rate is noted for Italy (5%). For the other countries the proportions of students that have used any other drug than cannabis during the past 30 days are low, 2 percent or less.

Table 26 shows the lifetime prevalence rates for the individual drugs (drugs listed above). On the average, the most common drugs are amphetamines, followed by ecstasy. There are for some drugs, however, rather big variations between the countries. Two countries (Greece and Sweden) reported low percentages for all substances (1–3%).

The high ranking of amphetamines, is mainly due to a rather high proportion of Polish students (15%) reporting such use. The country next in order of prevalence rates is Latvia and the Slovak Republic (around 6%). All other countries report lower percentages.

The prevalence rates of ecstasy use are rather evenly distributed over participating countries (mean for all countries 4%). The Slovak Republic reported the highest number of students (7%), while France and Poland are both reporting 5 percent.

On average, LSD or other hallucinogens, cocaine and magic mushrooms have been used by 3 percent of the students. The countries with the highest proportion on LSD use are Italy, Poland and the Slovak Republic (4% each). For cocaine use Italy is the outstanding country with 7 percent of the students having used it. In all other countries 3 percent or less had reported cocaine use. Rather many students in France had used magic mushrooms (7%). Next come Poland (5%), Italy and the Slovak Republic (4% each).

Other drugs, crack, heroin, GHB or any drug taken by injection are low prevalence drugs, on average reported by one percent of the students. In Italy, however, a somewhat higher proportion of the students had used heroin (3%).

In almost all countries more boys than girls had used the drugs included in the list, and in no country the relation was reversed. Equal proportions between the sexes – although very low percentages – were found in Greece (amphetamines, GHB and drug by injection), Latvia (heroin, GHB), the Slovak Republic (cocaine, drug by injection) and Sweden (amphetamines, LSD, crack, cocaine, ecstasy, magic mushrooms, GHB and drug by injection). Thus, virtually no gender difference was found in Sweden.

The *12 months prevalence* rates on illicit drugs other than cannabis are generally very low (0–2% on average) (Table 27). The variations over the countries are also very small.

The highest percentage on use of *amphetamines* is found in Poland, Latvia and the Slovak Republic where this is reported by about four percent of the students.

Cocaine use during the last 12 months was reported by six percent of the Italian students. In all other countries the percentages were very low (0–1%). Also for *heroin* use Italy reported a somewhat higher proportion (3%) than the other countries (0–1%).

Ecstasy use was reported by around four percent of the Slovakian and Italian students. All other countries had lower figures on this variable (1–2%).

Very few students had used *magic mushrooms* during the last 12 months. In Italy this was reported by three percent but in all other countries the prevalence rates were lower. Also the use of other substances such as *crack*, *GHB* and *drugs by injection* were virtually non-existent or reported by only 1–2% of the students in the participating countries.

The *30 days prevalence* rates are subsequently mainly very low in all participating countries (0–1%) (Table 28). Exceptions are Italy and Poland. Five percent of the Italian students had used cocaine and two percent had used heroin and ecstasy during the last 30 days. Among the Polish students five percent had used amphetamines and two percent had used ecstasy.

Overall, there is a tendency towards somewhat larger proportions among boys on these variables. However, the prevalence rates are generally very low and the gender differences are subsequently less obvious.

Tranquillisers, anabolic steroids, alcohol together with pills, alcohol together with cannabis

Lifetime

(Table 29, Figures 15–16)

Tranquillisers or sedatives can be used both as a legally prescribed medicine and as an illicit drug. The majority of the students who ever used any such substance have used it legally. In Greece, Italy and Sweden, however, the proportions of students reporting this are about the same for legal and illegal use.

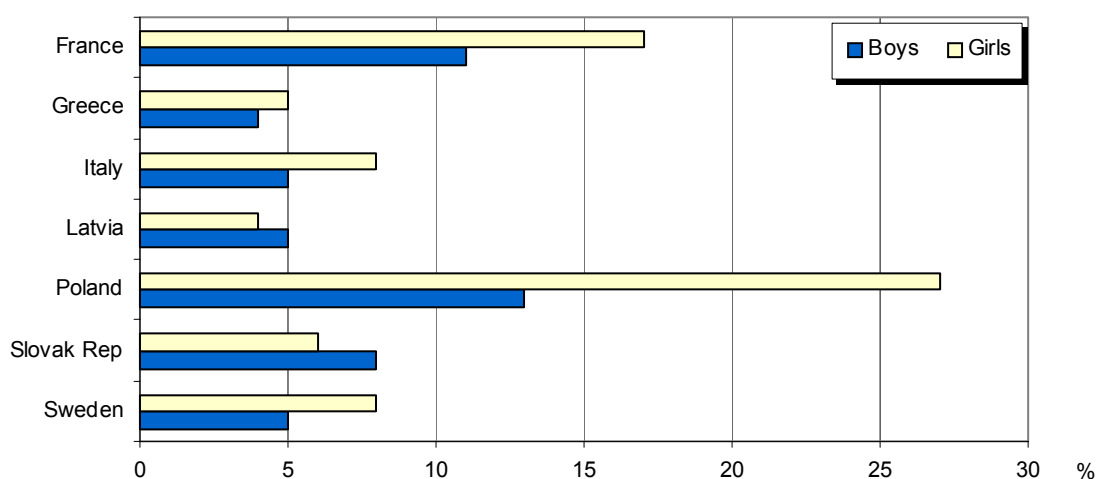


Figure 15. Lifetime experience of tranquilisers or sedatives without a doctors prescription, by sex.

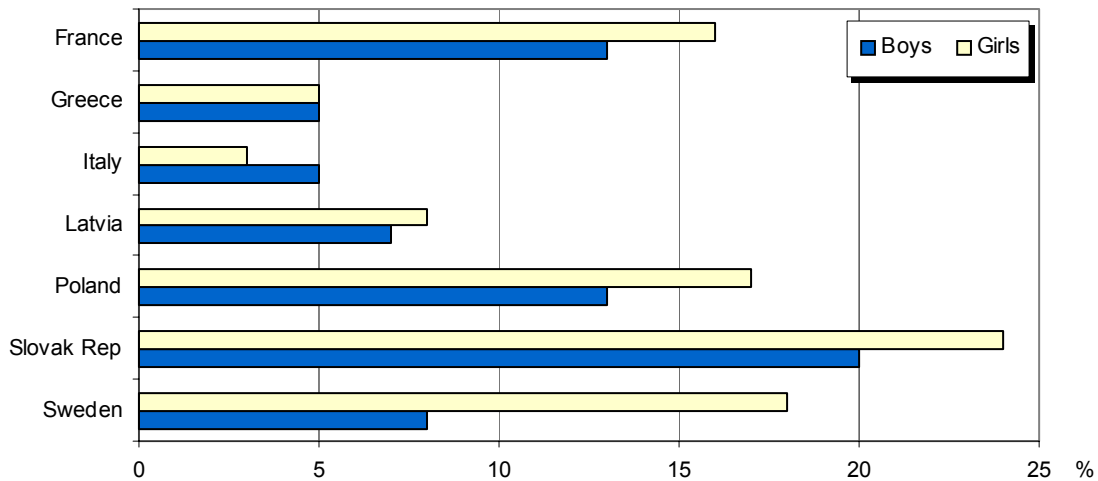


Figure 16. Lifetime experience of alcohol together with pills, by sex.

The largest proportions reporting prescribed use of tranquillisers or sedatives are found in France (20%). In Latvia, Poland and the Slovak Republic the lifetime prevalence rates on this variable are the same (about 15%). In Greece, however, this behaviour is rather uncommon (4%).

For the illegal use of these substances the relation between France and Poland is reversed. In Poland 20 percent of the students had used such a drug without prescription while in France this was reported by 14 percent. In the other countries the prevalence rates were lower, on average six percent.

The use of *anabolic steroids* is very limited in these countries, at least among students this age. The highest proportion was found in Poland where 4 percent reported this.

In many countries young people use different substances in combination. *Alcohol together with any pill* was reported by 22 percent in the Slovak Republic and by approximately 15 percent in France, Poland and Sweden. Very few, however, reported this behaviour in Greece and Italy (around 5%).

The combination of alcohol and cannabis is not unfamiliar to these students. In France 40 percent had done this, while in Italy and the Slovak Republic about 29 percent and in Poland 24 percent reported it. The lowest prevalence rates were reported from Greece and Sweden (about 10%).

The gender pattern for these variables shows that in all participating countries tranquillisers and sedatives are more often prescribed to girls than to boys. In Latvia and Poland twice as many girls as boys reported this, while in the Slovak Republic and Sweden the prevalence rates are almost the same between the sexes.

Mainly boys report use of anabolic steroids. Since the prevalence rates are low the gender difference is rather small, except in Poland, where seven percent of the boys reported this compared to zero percent of the girls.

Overall, alcohol used in combination with pills is more common among girls than among boys, except in Greece and Italy, where these values are the same or only slightly reversed. The largest gender difference on this variable was found in Sweden, where eight percent of the boys compared to 18 percent of the girls reported this.

To use alcohol in combination with alcohol, on the other hand, is a predominantly male behaviour. In all participating countries more boys than girls reported this. The largest gender differences were found in Latvia and Poland, where twice as many boys as girls had this experience (18 vs. 8 and 32 vs. 15% respectively). However, in Sweden there was hardly any gender difference.

Inhalants

Lifetime, 12 months, 30 days

(Table 30, Figure 17)

The highest prevalence rates for use of inhalants are found in France and Greece (13% both). Italy and the Slovak Republic both report 8 percent of the students on this variable, while in the other countries the percentages are lower.

Most of the students have used inhalants only one or two times in their lives. Thus, the proportions reporting experience of this behaviour six times or more are low. The country, that reported the highest figure for lifetime use is Greece, where five percent of the students answered this. All other countries reported lower figures (3% or less).

Overall, there are more boys than girls who ever used an inhalant. The gender difference is most prominent in Poland and the Slovak Republic, where twice as many boys as girls reported this behaviour (8 vs. 4 and 12 vs. 6% respectively). Also in France the gender difference is quite important (17 vs. 10%). It is also evident that the boys had used an inhalant more frequently than the girls.

Last 12 months

(Table 30)

For most students the use of inhalants is not very recent. In the majority of the countries there are much less students reporting use of inhalants during the last year compared to the lifetime prevalence rates. The highest percentages are found in Greece and Italy, where 6 percent of the students reported having been using it during the last 12 months.

The gender pattern remains also in relation to the more recent inhalants use. In all countries more boys than girls reported this behaviour.

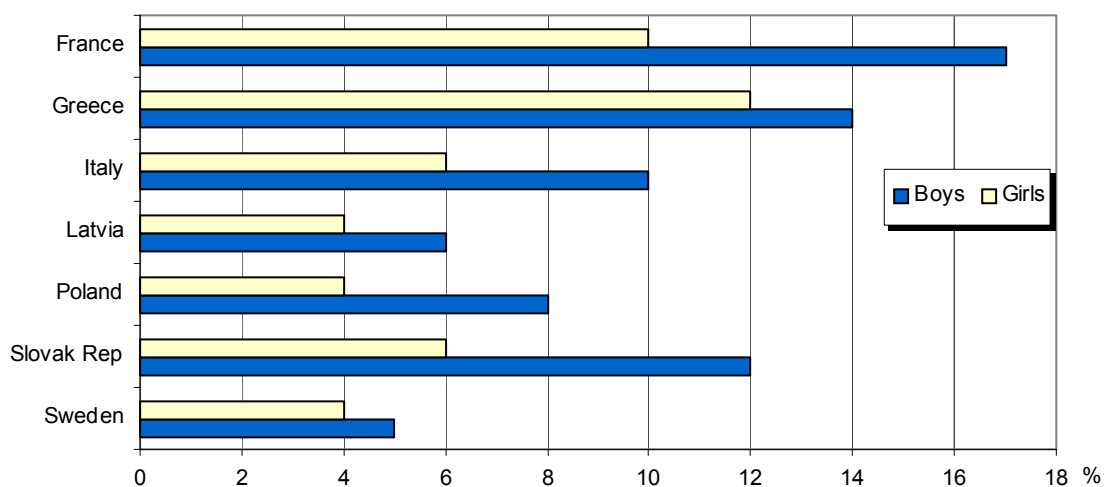


Figure 17. Lifetime experience of inhalants, by sex.

Last 30 days

(Table 30)

In consequence to what was reported above, very few students, less than four percent, in all countries have used an inhalant during the last 30 days. Only one country (Greece) report three percent with this behaviour, all other countries' values are lower.

Similarly to the lifetime and 12 months prevalence data, more boys than girls had used any inhalant during the last 30 days. The three countries with the highest figures among the boys were Greece (4%), France and Italy (3% both).

Lifetime abstinence from various substances

(Table 31)

In table 31 the rates of lifetime abstainers are given for each of the following substances: cigarettes, alcohol, illicit drugs, tranquillisers or sedatives and inhalants. In addition four calculated variables are presented in the table, which reflect the different combinations of abstention from those substances.

The highest proportions of abstention from smoking cigarettes are found in Greece, Italy and Sweden (approximately 28%). All other countries' values are around 20 percent.

Most students in all participating countries have drunk alcohol at least once in lifetime. The highest proportion of non-users is found in France (9%). All other countries present lower figures.

The proportions of abstainers from illicit drugs range from 41 (France) to about 85 percent (Greece and Sweden). France is the only country where the abstainers are in minority, i.e. less than 50 percent of the students.

The large majority (91% on average) of the students have never used tranquillisers or sedatives. There are, however, differences between the countries, although not very dramatic. The lowest rate of abstention is found in Poland (80%) and in France (86%), and the highest in Greece (96%), but the other countries report figures that are very close the Greek one.

The average rate of abstinence from inhalants is 92 percent. The lowest figures on this variable are found in France and Greece (87% both), while all others are 92 percent or above.

As mentioned above, table 31 also include figures representing abstinence rates fro combinations of drugs. The "b" category in the table represents those that are abstainers from *both* cigarettes and alcohol, "c" cigarettes, alcohol and illicit drugs, "d" cigarettes, alcohol, illicit drugs and tranquillisers/sedatives, and "e" cigarettes, alcohol, illicit drugs, tranquillisers/sedatives and inhalants.

There is some variation between the countries in the proportion of students that fit into the various combinations. Analyses of the sequence of figures for the four substance combinations reveal that most of the proportions of abstainers do not change no matter how many substances are added. This means that if the students are abstainers from *both* cigarettes and alcohol they are also abstainers from use of illicit drugs, tranquillisers/sedatives and inhalants.

The highest proportion of abstainers is reported from France (5%) and the lowest from Greece and the Slovak Republic (1% both). The only country in which the number of abstaining students is diminishing when tranquillisers/sedatives are added is Poland. This is logical, however, since the students in Poland reported a much higher prevalence rate (20%) of using tranquillisers/sedatives without a doctor's prescription than the other countries (7% on average).

The gender distribution reveals, that in some countries the combined abstinence rates changes for a few countries when the sexes are analysed separately. Among boys there is a change between “b” and “c” in France (from 6 to 5%) and in Sweden (from 5 to 4%), but also in Italy between “c” and “d” (from 4 to 3%).

For the girls this happens only among the Polish students with three percent abstainers from both cigarettes, alcohol and illicit drugs, but if tranquillisers and sedatives are added the proportion is only two percent.

Drinking places

(Table 32)

The students were asked: “Think of the last day on which you drank alcohol. Where were you when you drank?” The students were allowed to mark more than one response category. The answers to this question reveal a various pattern over the participating countries.

About one fifth of the students in all countries said that they had been drinking at home (17–23%). However, the most frequently indicated response category on average (27%) is “at someone else’s home”. The variation over the countries ranges from 55 percent (Sweden) to 14–15 (Greece and Italy).

A disco is the alternative that on average comes closest to the first two, although the variations are quite big. The highest percentage of students indicating disco as the last drinking occasion venue was found in Greece (37%), while the lowest was reported from Sweden (7%).

“Street, park, beach” was the alternative mainly chosen by the students in Latvia and Poland (26–27%), while this alternative was marked by less than 10 percent in the other countries.

Quite large proportions of the students in Italy (48%) and the Slovak Republic (40%) had been drinking in a bar or a pub, while this was indicated by only 13 percent in France and 17 percent in Sweden.

Perceptions and consequences of alcohol and drug use

Expected personal consequences from alcohol consumption

(Table 33)

The students were asked to indicate how likely they thought that different positive and negative consequences would happen to them if they drink alcohol. The five proposed positive consequences included “Feel relaxed”, “Feel happy”, “Feel more friendly and outgoing”, “Have a lot of fun” and “Forget my problems”. The six proposed negative consequences included “Feel sick”, “Get a hangover”, “Not be able to stop drinking”, “Harm my health”, “Do something I would regret” and “Get into trouble with the police”. The proportions of students in each country responding “likely” or “very likely” to each question are presented in table 33. Data from France is not available for this variable.

In all six countries there are more students associating drinking with positive rather than with negative consequences. On average, Sweden reports the largest percentage of students expecting positive consequences (75%), while Italy reports the smallest (50%). The other countries are all rather similar with average percentages ranging from 55 (Poland) to 63% (Greece).

For the individual items Latvia and Sweden score high on “feel relaxed” (76 and 74% respectively), while this is indicated by only 36% of the Italian students. “Feel happy” was indicated

by 87% of the Swedish students compared to 37% in the Slovak republic, but also Latvia and Poland reported low numbers on this item (40% both). About three quarters of the students in Greece (72%) and Sweden (76%) think that alcohol would make them more “friendly and outgoing”, while this is considered likely by only 56 percent of the Italian students. The most expected of the five positive consequences was “Have a lot of fun”, which on average was indicated by 74 percent of the students. The individual countries that reported the largest proportions for this item were Sweden (86%) and Latvia (83%), while the lowest proportion was found in Italy (58%).

The proportions of students expecting their alcohol consumption to make them forget their problems are very similar in all countries. The largest proportion was reported from Sweden (51%) and the smallest from Greece (42%).

As mentioned above, there are not as many students indicating negative expectations, as was the case for the positive ones. The most commonly indicated negative alternative from the list, “get a hangover”, scored on average 51 percent. Next comes “harm my health” with around 41 percent. The two least mentioned consequences were “not be able to stop drinking” and “get into trouble with the police”, which both scored about ten percent.

For the individual countries the consequence “feel sick” was anticipated by the largest proportion of students in Italy (48%) and by smallest in the Slovak Republic (11%). Get a hangover was indicated by 62 percent in Italy and by 58 in Greece and the lowest percentages were found in Latvia and the Slovak Republic (45% both).

In all countries very similar proportions of students (about 11%) indicated that they might not be able to stop drinking as a consequence from consumption. Harming one’s health was indicated by the highest number of students in Latvia (57%) and Italy (53%), but by only 30 percent in Sweden. About one third in all countries (from 26% in Poland to 39% in Latvia) expected themselves to do something that would be regretted afterwards. In all countries, very few students expected to get into trouble with the police. In Italy and Latvia this was indicated by around 16 percent, while in Greece and Sweden only about 5 percent thought so.

The response pattern is very similar in both sexes, both in relation to the ranking of the items and the sizes of the percentages. On average, slightly more girls (32% on average) than boys (25%) expected themselves to feel sick after alcohol consumption. The other way around, more boys (13%) than girls (7%) thought that they probably would get into trouble with the police.

Experienced problems

The students were asked if they had encountered any problems related to alcohol use, drug use or related to any other reason. The results regarding problems related to alcohol are presented first in this chapter and thereafter problems related to drug use.

The fourteen problems listed in the questionnaire have been grouped into four categories. These categories are: Individual problems, Relationship problems, Sexual problems and Delinquency problems.

Included in “individual problems” are the following items: Performed poorly at school or at work, Damage to objects or clothing, Loss of money or other valuable items, Accident or injury, Hospitalised or admitted to an emergency room. Included in “relationship problems” are: Quarrel or arguments, Problems in relationships with friends, Problems in relationships with parents, Problems in relationships with teachers.

Included in “sexual problems” are: Engaged in sex you regretted the next day, Engaged in unprotected sex (without a condom). Included in “delinquency problems” are: Scuffle or fight, Victimised by robbery or theft, Trouble with police.

Problems caused by own alcohol use

(Table 34, Figures 18a and 18b)

There are rather big differences between the countries included in this study in relation to experienced problem caused by own alcohol use. The country average for the individual problems is highest for Sweden (17% on average) the Slovak Republic and Latvia (11% both). Very few reported such problems in Greece (3%).

When looking at the individual items it is obvious that rather few reported that they had performed poorly at school or at work. The highest figure is found in the Slovak Republic (8%) and the lowest in France and Greece (1%). The distributions related to “damage to objects or clothing” are more varied. The highest percentage was reported from Sweden (36%), Latvia and the Slovak Republic (about 23%) and the lowest was reported from Greece (3%).

Loss of money or other valuable items is also something that the Swedish students have experienced to a higher degree than the students in other countries (25%). Again, Latvia and the Slovak republic report the next highest figures (about 14%), while 5 percent or less reported this in France, Greece and Italy. Rather similar proportions in four countries reported ”Accident or injury”; Sweden (14%), the Slovak Republic (11%), Latvia and Poland (10% both), while in France, Greece and Italy only around 4 percent had experienced this.

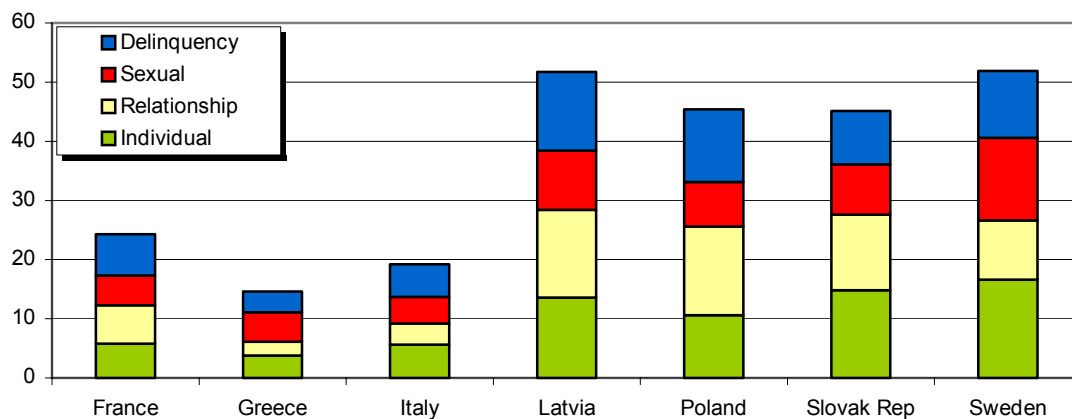


Figure 18a. Proportion of boys reporting experienced problems (delinquency, sexual, relationship or individual problems) caused by own alcohol use.

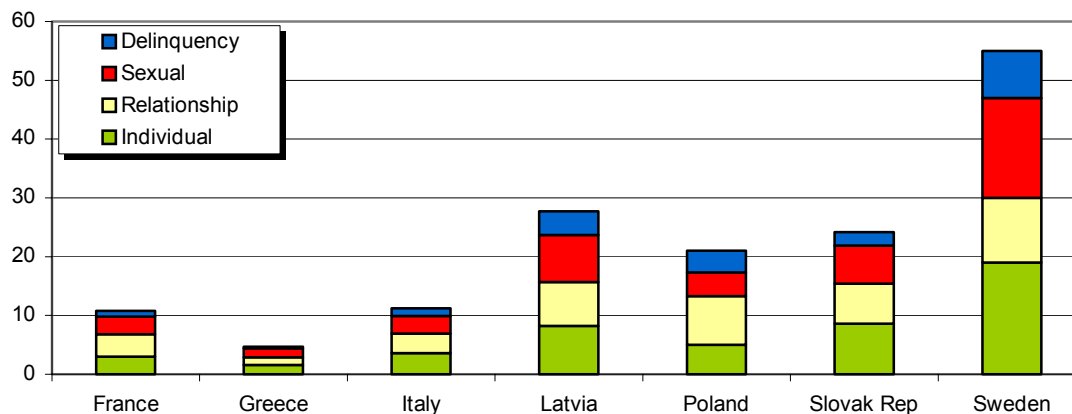


Figure 18b. Proportion of girls reporting experienced problems (delinquency, sexual, relationship or individual problems) caused by own alcohol use.

The most frequently indicated problem included under the heading “Relationship problems” is quarrel or argument. In Sweden this was indicated by 27 percent of the students and in Poland by 20 percent. Again, the Greek students are those who reported the percentage (4%).

The three items for problems in relation to friends, parents or teachers are not very frequently indicated by any country, especially not the one related to teachers (2% on average). The highest proportions indicating problems with friends were reported in Latvia and Poland (about 9%). The same countries are at the top for problems with parents (14% both) and teachers (about 4%). Greece is the country that is scoring very low on all the included items (2% on average).

The Swedish students are predominantly reporting “Sexual problems” such as “engaged in sex you regretted the next day” (17%) compared to the other countries, but so do to some degree also the students in Latvia (10%). Very few in the Mediterranean countries reported this (5% on average). Also engagement in unprotected sex is more reported by the Swedes (15%) than by others. In France, Greece and Italy 3 percent reported this.

Of the “Delinquency problems” the item most frequently reported is “engaged in a scuffle or fight”. Sweden (18%), Latvia (15%) and Poland (13%) are the countries in which most students reported this. Very few in Greece (2%) had experienced this.

To be “Victimised by robbery or theft” in relation to alcohol consumption is not very frequently reported in any country. The highest figure is found in Sweden (5%), while all others are lower.

Another problem that is not very commonly reported in any country is to have had “Trouble with the police”. The countries reporting the highest figures include Latvia and Poland (around 8%). Similar to the observations in relation to the previously presented problem categories, the Greek proportions are very low also on this category.

The gender pattern reveals that on average the boys are in the majority in all categories, however with very small differences on some variables. Among the individual problems the largest difference on average was found in relation to damaged belongings. In all countries, except Sweden, the boys are in majority in reporting this. For the two categories “loss of money..” and “accident..” the boys are in the majority in all countries except in Sweden where the opposite is true. The difference is however rather small for the first variable (26 vs. 23%), but for the accident variable the gender difference is substantial (26 vs. 15%).

The most important gender differences within the relational problems category is found in relation to quarrel or argument. In Latvia, Poland and the Slovak Republic 25 percent of the boys reported this compared to 12–15 percent of the girls. For problems with friends the largest gender differences were found in Latvia and Poland (about 12 vs. about 7%). In the category “problems with parents” the most obvious gender differences were found in Latvia (18 vs. 10%), Poland (19 vs. 10%) and the Slovak Republic (14 vs. 7%). In Sweden however, the proportions among boys and girls are about equal.

Sexual problems are on average reported by more boys than girls. The gender differences on the variable “regretted sex” are generally rather small. In Sweden however, more girls (18%) than boys (14%) reported this. Also for the variable “unprotected sex” the boys are in the majority, except in Sweden where the difference is reversed, but too small to make a significant difference (16 vs. 14%).

Problems caused by own drug use (Table 35)

The number of students in the participating countries that have experienced problems caused by own drug use is much smaller than the number that had problems related to alcohol. This is mainly due to the fact that the prevalence rates are much lower. It should also be pointed out

that the differences between countries might well be due to a random variation because of the small numbers. The results on this variable are nevertheless very interesting since there is a general pattern evolving where a few countries are repeatedly at the top.

Among the *individual problems* the variable “poor schoolwork” is the problem most often encountered by the students. In France this was reported by 6 percent. Next to France come Poland (5%), Italy (4%) and the Slovak Republic (3%). In Greece and Sweden only 1 percent reported this and in Latvia 0 percent (i.e. less than .5%). “Damaged to objects or clothing” was reported by 7 percent in France and by 4 percent in Italy, while this was reported by around 1 percent in the other countries. “Loss of money or other valuable items” was reported by 5 percent in France and by 2 percent in Italy and Poland. Very few students (1% or less) reported that they had had an “accident or injury” or that they had been “hospitalised or admitted to an emergency room” because of drug use.

Among problems related to *relationships* the one the most frequently reported was “quarrel or argument”. In France this was indicated by 6 percent, in Poland by 5 and in Italy by 4 percent. All other countries had lower figures.

Some of the experienced problems are related to the relations with friends and parents. The highest proportions reporting “problems in relationship with friends” due to own drug use were found in France (4%), Italy and Poland (3% both). The same pattern was observed for “problems in relationship with parents”: France (7%), Italy and Poland (3% both), while very few students in the other countries reported this (1% on average). Overall very few students reported “Problems in relationship with teachers” (1% or less) in all participating countries.

Rather few students are reporting negative sexual experiences (*sexual problems*) due to drug use. For engagement in sex that was “regretted the next day” no country reported percentages above 3 percent (Poland 3% and France 2%). For engagement in “unprotected sex” no country reported more than one percent.

Also in relation to the consequences grouped under the heading *delinquency problems* France is the country that shows the highest percentages. On average, the consequence in this category that was most often reported is “trouble with the police”. In France 5 percent had been in trouble with the police because of drug use and in Italy and Poland this was reported by 2 percent, while in Greece and the Slovak Republic 1 percent did so.

Two percent of the students in France had been involved in a “scuffle or fight” because of drug taking, while this was reported by one percent in Greece, Italy and Poland. No country, however, reported that more than one percent of the students had been “victimised by robbery or theft”. The prevalence rates on this variable were just one percent in France, Greece, Italy and Poland.

The gender pattern on these variables is somewhat difficult to analyse due to low prevalence rates. As was pointed out above, the small differences call for careful interpretations.

The prevalence rates on many variables and in many countries are below 3–4 percent. The overall tendency is that the prevalence rates are higher among the boys than among the girls but the conclusions that can be drawn from the results are somewhat limited. However, in the high prevalence country France, the gender pattern is visible. On six variables, “performed poorly at school or work”, “damage to objects or clothing”, “loss of money or other valuable items”, “quarrel or argument”, “problems in relationships with parents” and “trouble with the police” the prevalence rates are higher among boys than among girls.

Other countries where the boys are in the majority on a few variables are Poland (“performed poorly at school or at work” and “quarrel or argument”) and the Slovak Republic (“performed poorly at school or at work”).

Perceived risks of substance use

(Table 36)

The students were asked: “How much do you think people risk harming themselves (physically or in other ways) if they a) smoke cigarettes occasionally, b) smoke one or two packs of cigarettes per day” etc. Eighteen items regarding cigarette smoking, alcohol consumption and illicit drug use were listed. The response categories were: “no risk”, “slight risk”, “moderate risk”, “great risk” and “don’t know”. The presented data in this section of the report regards the proportion of students indicating “great risk” for each item. The alternative “cocaine or crack” was not included in the French study.

The majority of the students thought that smoking one or more packs of cigarettes per day would implicate a great risk of harming oneself. In France 83 percent thought so, which is the highest value on this variable compared to other countries. The smallest proportion indicating “great risk” was observed among the Greek students (61%), while most other countries reported proportions around 70 percent.

To drink five or more drinks each weekend was seen as a less risky behaviour in comparison. The students in the different countries were rather similar in their view upon this. On average 42 percent of the students had answered “great risk”, with the lowest values found in Greece and Italy (approximately 39%) and the highest in Sweden (47%).

The students’ attitudes towards drug use are very much related to the suggested frequency of the involvement. The proportions of students who think that regular use of cannabis would mean a great risk to the individual is more than twice as high as the proportion who indicated that occasional use is related to great risk.

The highest percentages of students who indicate that using cannabis once or twice is related to great risk are found in Latvia and Poland (38% both). Rather few, on the other hand, think so in France (14%) and Italy (18%).

The highest proportions of students thinking that regular use of cannabis means a great risk are found in Sweden (84%) and Greece (81%). Again France and Italy report the lowest percentages (55 and 61% respectively).

To use LSD once or twice is seen as a risky behaviour by more than one third in the participating countries. The highest proportions are found in Poland (53%) and France (51%) and the lowest in the Slovak Republic (25%) and Sweden (35%).

Three out of four students think that regular use of LSD would mean a great risk. The highest percentages were found in Poland and Sweden where the absolute majority of the students thought so (85% both). Other countries are not far behind: France (80%), Greece, Italy, Latvia and the Slovak Republic (about 69%).

Occasional (once or twice) use of amphetamines is not considered by the students to be very risky. However, in a few countries half of the students thought so, i.e. in France and Poland (approximately 50%). In Greece and the Slovak Republic these proportions were about half that size (approximately 26%). The vast majority of the students in Poland (88%), Sweden (86%) and France (81%) thought that regular use of amphetamines would mean a great risk to people. Also in the other countries many students thought so. The lowest proportion on this variable was found in Greece (53%).

About half of the students think that occasional use (once or twice) of cocaine/crack is related to great risk. The largest proportions of students giving this answer are found in Latvia and Poland where about 60 percent said so. In all other countries slightly more than 40 percent (approximately 43%) gave this answer. The majority of the students thought that regular use of cocaine/crack would be risky. In Poland 88 percent of the students indicated “great risk” for this behaviour and in Sweden the correspondent figure was 86 percent. The lowest figures were found in Italy and the Slovak Republic (76%).

The view upon ecstasy is varying, but in no country more than about half of the students would think that using it once or twice would implicate a great risk. The highest proportions in this respect are found in France (54%), Poland (53%) and Italy (50%), while in the Slovak Republic only 21 percent thought so. Regular use of ecstasy, however, is considered more risky. The highest proportions indicating “great risk” were found in France (87%) and Sweden (85%) and the lowest in the Slovak Republic (63%) and Latvia (68%).

It is uncertain if the drug GHB (gammahydroxybuturate) is familiar to the majority of the students. In the ESPAD study among 15–16 year olds less than 20 percent had heard about this drug (Hibell, Andersson et al, 2004). However, the students in this study are somewhat older and may know more about it.

Around 50 percent of the students in France (52%), Italy (47%) and Poland (55%) thought that the occasional use of this drug would implicate a great risk. However, in the Slovak Republic only 23% of the students gave this answer. The proportions of students who thought that regular use would be risky were not very high in any country. The highest proportions of students who thought so were found in France, Poland and Sweden (77% on average), and the lowest in Greece (50%) and the Slovak Republic (52%).

Most students think that injecting drugs would be associated with some risk. However, in Greece, the Slovak Republic and Sweden only somewhat more than half of the students (54% on average) associate occasional use (once or twice) with great risk, while in France 80 percent think so. The absolute majority in all participating countries, however, sees regular use as a very risky behaviour. The lowest percentages, around 80, were found in Greece, Italy and the Slovak Republic and the highest in France (93%).

Rather few, in comparison to other substances, think that occasional use of inhalants is very risky. The highest proportions of students indicating this are found in Poland (58%) and France (47%). In the Slovak Republic the reported figure was about half that size (24%). On average three fourth of the students think that regular use of inhalants is risky. In Poland 84 percent thought so and in France 81 percent. In Greece and Italy, however, somewhat lower proportions (67% on average) had indicated “great risk” on this item.

The gender pattern shows that on average the proportion of students indicating great risk for occasional use (once or twice) is about the same for all both boys and girls. For all other behaviours that are regular – smoking one or more packs of cigarettes a day or drinking five or more drinks each weekend inclusive – more girls than boys indicate that this behaviour is associated with great risk. Exceptions from this pattern are found in the three Mediterranean countries for some of the variables. Very small or no gender differences are found in France, Greece and Italy in relation to regular use of LSD. The same is true in France and Greece in relation to regular use of amphetamines. Finally, very small differences between the sexes are found in Greece regarding regular use of cocaine/crack or GHB.

Perceived availability of substances

(Table 37, Figures 19–21)

The students were asked: “How difficult do you think it would be for you to get each of the following?” For each of the listed substances the response categories were: “Impossible”, “Very difficult”, “Fairly difficult”, “Fairly easy”, “Very easy” and “Don’t know”.

The proportions of students that indicated “Very easy” or “Fairly easy” to his question are presented in this section. There are considerable differences in the availability of alcohol compared to illegal drugs. However, there are also substantial differences within the group of illegal substances.

Considering the averages over the countries, beer is more available (96%) than wine (93%), and spirits the least available beverage (90%). Within the group of countries there are variations however.

Almost all students in Poland, the Slovak Republic and Sweden (98%) think that beer is easily available compared to the students in France where 89 percent think so. Wine is considered very easy to get in the Slovak Republic (98%) but less so in France (86%). Spirits, which on average for all participating countries is the least available beverage was considered to be easy to get by four fifth of the students in Latvia (80%), but in Greece 95 percent indicated this

For other drugs the availability varies considerably across both countries and substances. On average cannabis and inhalants seem to be the most available of the listed substances.

In three of the countries (Greece, Poland and Sweden) more than half of the students think that inhalants are easy to get (53% on average). Italy is the only country where less than 20 percent thought so (18%).

Rather few students in this age group consider anabolic steroids a substance that they would be able to get hold on. The largest proportion indicating this was found in Poland (39%) and Greece (25%). In France this was indicated by only 8 percent.

As was mentioned above, cannabis seems to be available to young people in most of the participating countries, despite the different prevalence rates. In France – a high prevalence country – large proportions of students think that it would be easy for them to find hashish or marijuana (66%). Other countries reporting high frequencies are Italy and Poland (59% both). The lowest percentages are found in Greece and Latvia where 12 percent reported this.

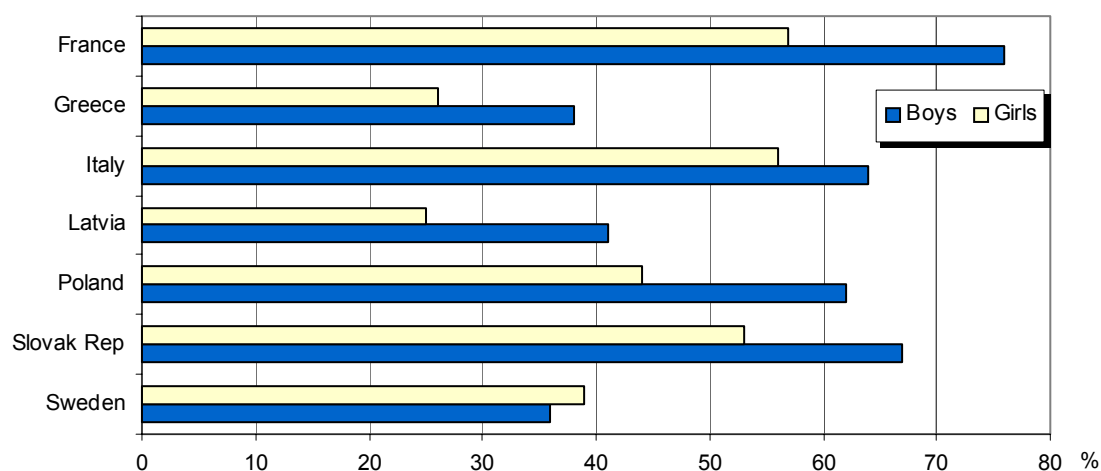


Figure 19. Proportion of students who perceive marijuana or hashish "very easy" or "fairly easy" to obtain, by sex.

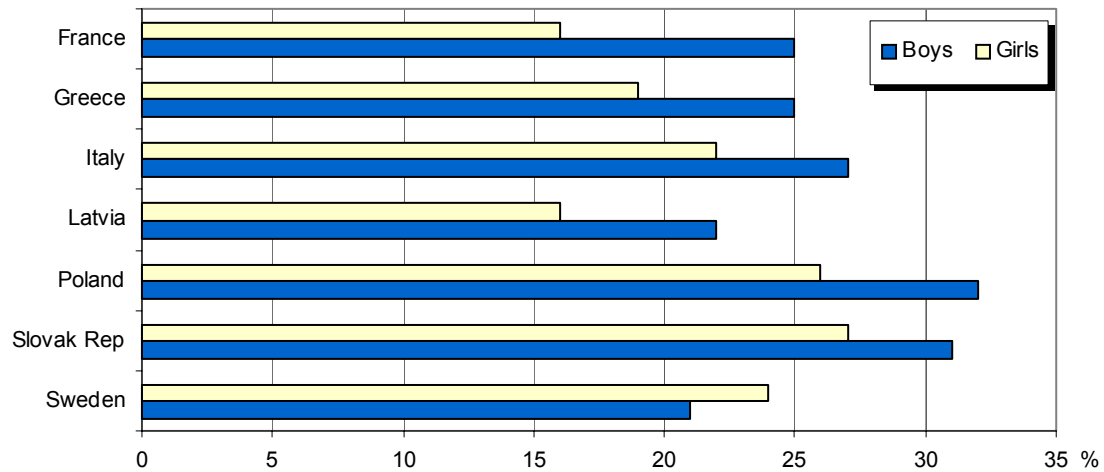


Figure 20. Proportion of students who perceive ecstasy "very easy" or "fairly easy" to obtain, by sex.

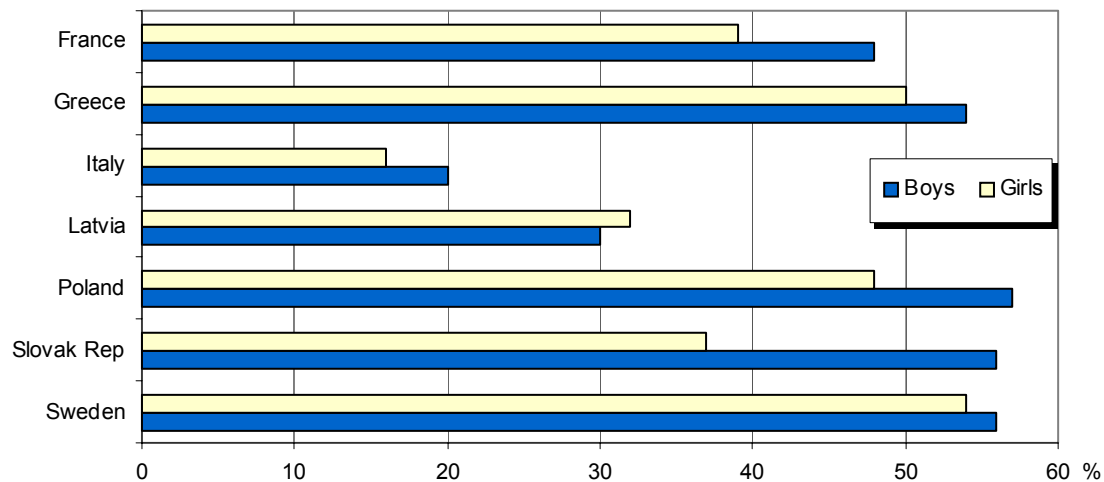


Figure 21. Proportion of students who perceive inhalants "very easy" or "fairly easy" to obtain, by sex.

The availability of amphetamines is much higher in Poland (41%) than in other countries, and twice as high as in Latvia (21%), which is the country with the next highest proportions saying that these substances are easy to get. In all other countries these percentages are below 20 with the lowest value reported from Greece (12%).

In nearly all countries less than 20 percent of the students thought it would be easy to get LSD or other hallucinogens, except in Poland where this was reported by 30 percent. The lowest proportion was found in Greece (12%).

Crack and cocaine are not very common in these age groups in any of these countries. The largest proportion of students who think that crack would be easily available is found in Poland (18%) and the smallest in Latvia (8%). Somewhat more students in both Italy and Poland thought that cocaine would be easy to get (21% both), compared to 9 percent in Latvia.

Ecstasy is well known among students this age in many European countries. The largest proportions in this study that answered that it would be “very” or “fairly” easy to get ecstasy are found in Poland and the Slovak Republic where one third of the students gave this answer (29% both). The smallest percentage in this respect was reported from Latvia (19%).

Rather few students (14% on average) thought that heroin would be easy to get hold of. The highest figure is found in Poland (22%) and the lowest in France (10%).

The availability of magic mushrooms is rather different in various countries. In Poland 29 percent of the students thought that it would be easy to find, compared to 8–9 percent in Italy and Latvia.

GHB is rather unknown in the participating countries. In most of them less than 10 percent say that it would be easy to find. In Poland and Sweden however, 15 percent of the students declared that.

More available are tranquillisers or sedatives, which on average 31 percent of the participating students thought they would be able to get access to. The highest percentage reporting this was found in Poland (46%) followed by Greece (43%). In Latvia, however, only 13 percent answered so.

Very small gender differences were observed in relation to the perceived availability of alcohol, especially in relation to beer and wine. For spirits, however, overall more boys than girls thought that it would be easy to get. The largest discrepancy was found in France where 87 percent of the boys and 77 of the girls reported this. In the other countries the differences were much smaller.

Overall there are more boys than girls who answered that the various drugs were easy to get. Somewhat more girls than boys in Latvia thought that inhalants were easy to get. In Sweden the percentages were very much the same between boys and girls for most drugs, although with a small advantage for the girls.

The substances that change the gender distribution on this variable, however, are tranquillisers or sedatives. In Greece, Latvia and the Slovak Republic the gender distribution is even, but in France, Italy, Poland and Sweden there are more girls than boys who think that these substances are easy to get.

Places to buy cannabis

(Table 38, Figure 22)

The students were asked: “In which of the following places do you think you could easily buy marijuana or hashish if you wanted to?” It is obvious that many students, which have not used cannabis themselves, have an opinion about where to find it.

On average “disco, bar etc.” and “street, park etc” scored highest (approx. 29%), but the distance to other alternatives is not too big. The pattern is clearer if we look into each country to see which of the alternatives is ranked the highest.

Most students indicated “house of a dealer” in France (49%), which was followed by “school” (45%). In Greece “disco, bar etc.” scored the highest (35%) with “street, park etc.” coming next (31%). Italy indicated three alternatives with very similar proportions, “street” (57%), “school” (52%) and “house of a dealer” (47%). In Poland and the Slovak Republic “disco, bar etc.” was the most likely place to find cannabis (44 and 49% respectively). Interestingly, the Swedish students didn’t recognise a specific place that would be the most probable place to buy cannabis. Almost equal proportions, around 10 percent, are found on the different alternatives. However, somewhat more students indicated “street, park etc.” (13%).

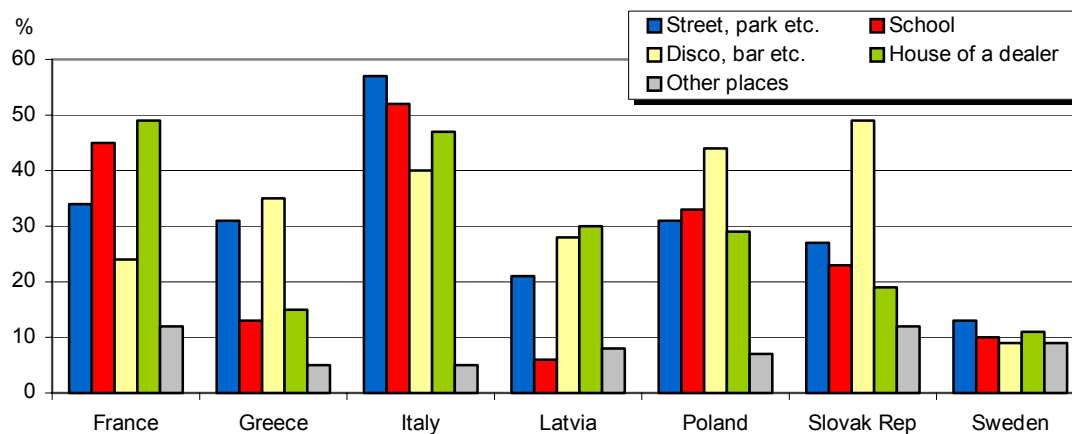


Figure 22. Places where marijuana or hashish easily can be bought. All students.

There are more girls than boys who on this variable claim that they do not know of any such place, except in Sweden where there is no real gender difference.

Overall, the gender pattern reveals that predominantly boys are indicating “park, street”, “school” or “house of a dealer” as a place where they would find it easy to buy cannabis. In Greece, Latvia and Sweden there is no gender difference in relation to “school” and the same is true regarding Greece, the Slovak Republic and Sweden in relation to “house of a dealer”.

More girls than boys give the answer “disco, bar etc” in France, Greece and Latvia. In Italy it was the other way around and in Poland, the Slovak Republic and Sweden there was no gender difference.

Perceived drug use among friends

(Table 39)

In countries where the prevalence rates of drug use are high it would be expected that the students’ friends also have used such substances, and vice versa. The students were asked: “How many of your friends would you estimate... smoke marijuana...take LSD etc?” The response categories were: “None”, “A few”, “Some”, “Most” and “All”.

In table 47 the proportions of students who on this question indicated “Some”, “Most” or “All”. Data from France on this variable are not available.

The country that presents the highest percentages of students whose friend smoke marijuana or hashish is Italy. More than half of the students (58%) report that almost all of their friends use cannabis. Next comes the Slovak Republic where this was reported by 23 percent. The lowest figures are reported from Greece and Sweden (approximately 12%).

Taking LSD or other hallucinogens is rather unusual among the students’ friends. The Italian students report the highest numbers (9%), while Greece, the Slovak Republic and Sweden all reported very few with this experience (2%).

Friends’ taking amphetamines was reported by 6 percent of the students in Italy and Poland, but only 1 percent in Greece and Sweden did so.

Italy is higher than the other countries both on friends taking tranquillisers or sedatives and on taking cocaine/crack (6% on both). The lowest value on tranquillisers or sedatives was found in

the Slovak Republic (2%). In Poland, the Slovak Republic and Sweden only 1 percent answered that most of their friends used to take cocaine/crack.

Not very many students have friends who take ecstasy. The highest proportions were found in Italy (9%) and the Slovak Republic (5%). All other countries' figures were around 3–4 percent.

Similarly, very few have friends who take heroin, but the Italian students are topping this list too (5%). All others are reporting 1–2 percent.

For inhalants use both Greece and Italy report more students, which friends are using it (4–5%) than the other countries. The lowest figure in this respect is reported by Sweden (1%).

Also in relation to taking magic mushrooms or GHB Italy is outstanding in comparison to other countries. Seven percent of the Italian students reported friends' use of magic mushrooms and for GHB the corresponding value was 4 percent. All other countries were lower, especially in relation to GHB, for which the percentage in no country was above 1.

Not so few students report that their friends use to combine alcohol with pills of some sort. In three countries about one tenth of the students report this. They include: Poland (11%), Italy (9%) and the Slovak Republic (8%). The lowest percentage was reported from Greece (3%).

Taking anabolic steroids is not very common among the friends of the respondents. The highest proportion reporting this was found in Poland (6%) and in Italy (4%). All other values are 2 percent.

There are virtually no gender differences in these prevalence rates, except for smoking cannabis. More boys (26%) than girls (22%) report that their friends smoke hashish or marijuana. Slightly more boys than girls report that their friends take amphetamines (5 vs. 3%) or take anabolic steroids (4 vs. 2%).

A comparison between two age cohorts: those born in 1987 and those born in 1985

(Table 40, Figure 23)

The data presented in this report concern students aged 17–18 who were surveyed in seven ESPAD countries the same year as the main ESPAD 03 study, which focussed on students aged 15–16. There is reason to believe, that most of the behaviours studied would increase during this period of life, thus the older students are expected to show higher prevalence rates than the younger ones on various behaviours.

It is important however, to keep in mind that we are here dealing with cross-sectional data collected at the same time in both age groups. Thus, what we know is how these behaviours differ between the two groups. How – and when – the change is taking place needs to be studied by use of other techniques e.g. longitudinal studies.

In this section the prevalence rates of tobacco, alcohol and drug use in the two age cohorts are compared. The variables chosen for this comparison are: The 30 days prevalence rates of cigarette smoking, alcohol consumption, and drunkenness. In addition the consumed amounts of alcohol (in centilitres of pure alcohol) on the last drinking occasion, the lifetime prevalence of illicit drug use and inhalants use are presented (Table 40, Figure 23).

Cigarette smoking during the last 30 days is probably rather close to reflecting an ongoing habit. In the younger age group (15–16) the prevalence rates vary between 23 (Sweden) and 40

percent (Latvia). When looking at the older age group (17–18) the same countries represent the lowest and highest prevalence rates (33 and 52% respectively) and despite the increasing figures in older age groups the individual ordering of countries is very much the same. However, Greece falls out of this pattern. The percentage of the Greek students who had been smoking during the last 30 days was the second lowest (28%) among the younger students, but the second highest (49%) among the older ones. This might suggest that the smoking prevalence in Greece is increasing faster by age than in the other countries. In all other countries the difference between the two age groups is some ten-percentage points.

The gender pattern reveals that among the younger students the boys are in majority only in Latvia, Poland and the Slovak Republic, but the differences between the sexes are not very large. The largest differences are found in Latvia (10%) and Poland (8%).

In the older group the boys are in majority in all countries except in Sweden where the proportion is six percentage points higher among the girls. The gender differences are however very small in France, Greece and Italy (1–3%), and it is highest in Latvia (12%).

The majority of the students in all participating countries have consumed alcohol during the last 30 days, both in the younger and the in older groups. *The 30 days prevalence rates of alcohol consumption* among younger students were lowest in Sweden (51%) and highest in Greece (75%). As expected, more students in the older group had been drinking alcohol during the last 30 days, but the difference is quite varying. The smallest differences between the two age cohorts are found in the Slovak Republic (4%), Greece (7%) and France (9%), but the gap between the two groups is moderate also in Italy (12%). In Latvia and Sweden the differences are larger (18 and 23% respectively), i.e. there are distinctly more students in the older than in the younger groups that have been drinking alcohol during the past 30 days.

In all countries there are more boys than girls among the younger students reporting having been drinking during the last 30 days, except in Latvia where almost identical proportions were reported. The difference is very small also in Sweden (3%). The largest gaps between the sexes are found in Italy and Poland (around 12%).

In the older cohort there are also more boys than girls reporting this behaviour, except in Sweden where the proportions are identical. In all other countries the gender differences in this group are very similar (10–13%), except in Latvia where the difference is smaller (6%).

Among the younger students one third or less reported having been *drunk during the last 30 days*. The lowest figures were found in France and Greece where around 16 percent had this experience while the highest value was found in Sweden (34%). In fact, the three Mediterranean countries France, Greece and Italy are different from the other with markedly lower prevalence rates. This is also true in the older age group, where the figures range from 23 percent in France and Greece to 61 in Sweden. Sweden is also the country with the largest gap between the two age cohorts since the proportion is almost double among the older students (Figure 23).

The gender comparison reveals that in the younger age group there are more boys than girls, who have been drunk during the last 30 days, except in Sweden and Greece, where no differences are found. In other countries the differences range from 5 to 9 percentage points.

Among the older students there are more boys reporting this behaviour in all participating countries. The gender gap varies, however, over the countries. The smallest differences are found in Greece and Sweden (approx. 5%) and the largest in Poland and the Slovak Republic (approx. 22%).

The students were asked how much alcohol they consumed on their last drinking occasion (see “Estimated average consumption” earlier in this report). The consumed alcohol amounts on *the*

last drinking occasion among the younger students are highest in Sweden (7.4 cls) and lowest in Italy (4.6 cls) (Data from France and for the older students in Poland are not available). The same pattern is found in the older age group, where corresponding figures are 9.1 and 5.2 centilitres respectively. The gap in relation to the consumed amounts between the two age cohorts is smallest for Italy (.6 cls) and largest for Latvia (1.6 cls) and Sweden (1.7 cls).

In both age groups the boys consumed more alcohol than the girls on last drinking occasion. The largest gender difference among students aged 15–16 is found in Poland, where the boys had 4.7 centilitres more pure alcohol (9.1 cls) than the girls (4.4 cls) on that occasion. In other countries the differences were around 2 centilitres with the smallest gap recorded in Sweden (1.5 cls).

Boys drink more than girls also among the older students and the largest differences between the sexes for countries with available data are found in the Slovak Republic (4.8 cls) and Latvia (4.0 cls). However, also in this age group the difference is smallest in Sweden (2.4 cls).

There are quite important variations in the prevalence rates of *illicit drug use* in the seven countries included in this report, both among the younger and the older students. Still, the ranking order of countries is the same, except for Poland and Latvia, which have reversed positions in the two groups. The range of the prevalence rates is rather large, from 6 (Greece) to 38 percent (France) in the younger groups, and from around 16 (Greece and Sweden) to 58 percent (France) among the older students.

The relative differences between the two age cohorts are also varying. For example, in the high prevalence countries the rates are about doubled in France, Italy and the Slovak Republic, while in the low prevalence countries Greece and Sweden the differences between the younger and the older students are 167 and 88 percent respectively.

The use of illicit drugs is more prevalent among the boys than among girls in all countries and this is true in both age groups. In the younger group (aged 15–16) the gender differences are about the same in most countries (8–11%), but in the low prevalence countries Greece and Sweden the differences are small (3%).

In the older age group (aged 17–18) with generally higher prevalence rates the gender gaps are wider, especially in Poland (22%) and the Slovak Republic (17%). In Sweden, however, the prevalence rates are almost identical among boys and girls.

The *use of inhalants* is something that is rather much related to younger ages, perhaps because in some countries these substances are more available than other drugs when you are younger. Despite a certain variation, the use is rather limited in most European countries. In both age groups the prevalence rates are highest in France (11 and 13%) and Greece (15 and 13%). In all other countries the figures are lower both among students aged 15–16 and among those aged 17–18.

As was mentioned above, and in contrast to other variables reported here, the use of inhalants is a behaviour that in some countries is more prevalent in younger ages than among the older ones. Moreover, in five of the seven countries under study the prevalence rates are somewhat lower among students born in 1985 than among those born in 1987. They include Greece, Latvia, Poland, the Slovak Republic and Sweden. In only two countries, one in which use of inhalants was least prevalent (Italy) and one high prevalence country (France), somewhat more students had used inhalants among the older than among the younger ones. However, all these differences are so small that they may be due to the random variation.

The gender pattern reveals that more boys in both age groups have been using inhalants. However, the gap between the two sexes is not very large in any country. In the younger group the

differences range between 1 and 4 percentage points (except in Sweden where the figures are identical). Among the older students the gap is a bit wider, from 1 (Sweden) to 7 percentage points (France).

To *sum up* it can be stated that all behaviours reported here seem to increase during this period in life except for the use of inhalants. However, when comparing data from the two cohorts it is important to keep in mind the more restricted sampling frame for the older students due to different educational traditions in different countries. Another thing to remember, that was mentioned earlier, is that the two data collections were done at the same time, i.e. we know the difference between these two age cohorts, but nothing about the progress or change in alcohol and drug use over time.

About half of the students aged 17–18 are smokers, except in Sweden where this is true for one third of them. Despite a certain difference between the sexes among the younger students, this is a predominantly male behaviour among the older – except in Sweden.

The alcohol consumption pattern differs between countries. In some countries, especially in Southern Europe, the frequency of consumption can be rather high, but the frequency of drunkenness rather low. In other countries, e.g. in Sweden, the frequency of consumption is not very high but the episodes of drunkenness are more frequent.

To illustrate this, the figure 23 shows the 30 days prevalence rates of alcohol consumption and drunkenness in the two age cohorts. It is interesting to note that in both age groups the prevalence rates of alcohol consumption are high in some countries, especially so in Greece, while the prevalence rates of drunkenness are low. At the same time the opposite is true in the countries further north, especially in Sweden. Moreover, the difference in prevalence of frequent intoxication between the two age cohorts is about the same in all countries, except in Sweden. The proportion of students in the older group is about doubled (61%) compared to the younger group (34%).

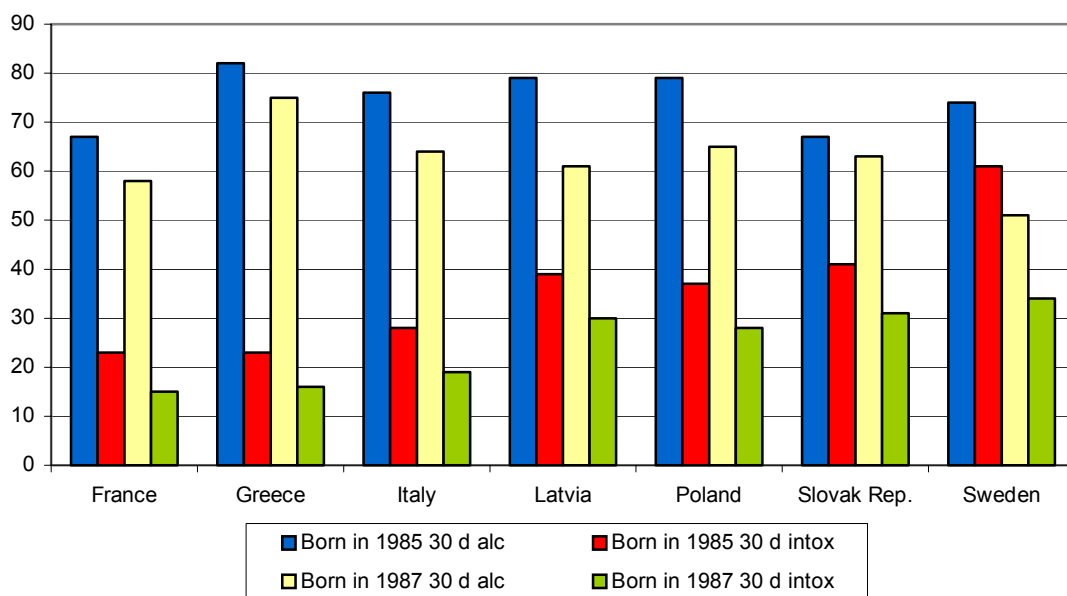


Figure 23. The 30 days prevalence rates of alcohol consumption and intoxication among students born in 1985 and 1987, by country.

The lifetime prevalence of illicit drug use shows almost an opposite geographical pattern to the alcohol and drunkenness pattern that was presented above. France and Italy are high prevalence countries, while Sweden is low. However, Greece is falling out of this pattern as being a Mediterranean country with rather low illicit drug prevalence rates.

The use of inhalants, however, seems to be a minor problem compared to other variables. It has to be stated though, that this is a behaviour that might be more prevalent in other groups of the same age than those who are studying on the secondary school level.

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Sampling and data collection in participating countries

France

The French study was coordinated by Dr. Marie Choquet at Institut National de la Santé et de la Recherche Médical (INSERM) and François Beck at Observatoire Français des Drogue et des Toxicomanies (OFDT).

Population

The target population consisted of students born in 1985 in all types of schools except private establishments and schools with adapted teaching (EREA). Moreover, students in DOM TOM and overseas territories: West Indies, Guyana, and Bourbon Island were not included in the sampling frame.

Sample and representativeness

The French study covered all grades from 6 to 12. The Ministry of Education conducts a population census of the population of pupils each year in September. Of the students born in 1985 92% were in some type of schooling while the proportion of this age cohort in secondary schools was 75%. To ensure sufficient size of sample in each age group the sample size was set to 450 schools including two classes in each. It was drawn from a computerised list of schools as a two-step stratified random sample of schools and classes. The school strata were: type of school (junior high, high and vocational schools), type of area (urban/rural) and educational characteristics (priority zone or not). In each stratum the probability for an establishment to be included was proportional to school size – the higher the number of classes the higher the probability for that school to be included in the sample. In each school two classes were randomly drawn, by taking the two classes for which the first letter of the head teachers' names came closest to the letter L in the alphabet. The sample of students born in 1985 is considered to be representative for this age group's part of the total number in secondary school education. The total sample, which covered all age groups from 11 to 19 was considered to be self-weighted.

Field procedure

The headmasters were contacted and informed that the schools had been drawn for the ESPAD 03 survey. They were asked to appoint a person to supervise the data collection (school doctor or nurse). A serious complication that arose during the data collection period was that a strike came into force for school doctors and school nurses in France. However, the research team Inserm U472 was well known among school doctors and nurses, and most of them (400/450) accepted to perform the data collection for the ESPAD study. They received a phone call with the relevant information about the survey. The students were invited to participate in the survey and to complete the questionnaire during a lesson. The supervisor of the data collection informed the students in a standardised way, reading from a paper and he/she also read the text on the front page of the questionnaire. After completion the students were asked to seal the questionnaire with two stickers and to put it in a box. Neither teachers nor headmasters were present in the classroom during completion of the questionnaire. Data was collected between March 17 and May 18, which gave an average student age of 17.8 years.

Questionnaire and data processing

The French questionnaire deviated in some respects from the commonly decided ESPAD version. In addition, the French version of the questionnaire included only 56% of the ESPAD core questions. Moreover, some module and own questions were inserted in the core section of the questionnaire. In total, the questionnaire included 52% ESPAD core, 5% ESPAD module and 43% own questions. The module questions used was a selection from the ESPAD modules A–D. Some important methodology questions, such as the ESPAD honesty questions were omitted. Another specific detail regarding differences in the questionnaire was that the French version did not include “or some hallucinogens” to the specific question on LSD. It was considered to overlap with the specific question on “magic mushrooms”. Other changes were made, i.e. the question on drinking beer on last drinking occasion, where the indicated volumes were changed to better relate to the usual drink size in France, but at the same time it was turned into an open question and therefore not comparable to other countries.

A translation and back-translation of the questionnaire was done and resulted in some adjustments in relation to the French context. The questionnaire was pre-tested in two schools, with 115 participating students from different grades. As a result the questionnaire was modified into a final version with a better presentation of the questions and in some cases simpler wording. Before data processing 205 (1.2%) of the total number of questionnaires were excluded because they were obviously not seriously answered. SAS statistical package was used and programmed according to the suggested SPSS syntax.

School and student co-operation

In France passive parental consent is required for students below the age of 18. A non-response was considered as a passive consent.

Unfortunately, the implementation of the survey in France was affected by some serious problems. The main problem was the strike that caused a loss of 50 schools (27 in which the headmaster refused to do the survey, 18 because of boycott, 5 because health staff were on strike, in total 100 classes, or 11%). However, differences between participating and non-participating schools were examined and no significant differences were found in relation to geographical or school characteristics. In addition to this loss 27 classes were not surveyed due to strike (2), poor implementation of the survey (14), students were absent (1), the school boycotted the survey (5) or the questionnaires were lost in the mail (4). These schools/classes were not replaced. However, much effort and many phone calls were made to obtain the headmasters collaboration.

The French country reports do not provide separate data for the different parts of the survey. Thus, these methodological data refers to the total survey, not only those born in 1985.

From the classroom reports it was apparent that no disturbances occurred in 62% of the classrooms. The disturbances noted were giggles or eye makings, which accounted for over half of them. The data collection leaders estimated that in 96% of the classes a majority of the students were interested in the survey and worked seriously. The response rate was 91% and the average time to complete the questionnaires was 45 minutes.

Reliability and validity

Reliability measured by inconsistency rates between two questions in a single administration was not possible to do because of a change of format in one of the questions. The French students were asked to write the age at which they first tried a drug – not to tick an alternative as in the ESPAD questionnaire. If they were not concerned, did not remember or did not want to answer they wrote nothing (there was no modality “never”).

The proportion of unanswered questions was low in general. For “been drunk” it was four percent, while for alcohol use it was three. For inhalants and cannabis use it was two percent for both. No data available for cigarette smoking. The average number of unanswered core and module questions was not possible to calculate since a skip sequence was introduced later on in the questionnaire.

The inconsistency rates between lifetime, 12 months and 30 days prevalence rates were overall very low (alcohol 2%, been drunk and cannabis use 1% both, and for inhalants it was below zero 0%). In addition, it can be mentioned that there is a high consistency between the results in this study and another similar French study (ESCAPAD).

The two questions on the possible unwillingness to admit cannabis and heroin use were not asked. However, less than 1 percent reported use of the fictitious drug relevelin.

Methodological considerations

The French study is based on a good representative sample covering all grades in which students born in 1985 can be found. The study encountered serious difficulties in the form of a strike among health staff, some of which were due to supervise data collection. Combined with other types of refusals the loss of classes in the sample was 14%. However, a specific analysis on school and region characteristics was made and no systematic differences between participating and non-participating schools were found.

The French questionnaire was to a large extent modified and it deviates from the common ESPAD version. In total, the questionnaire included 52% core ESPAD, 5% module ESPAD and 43% own questions.

The reliability and validity measures are incomplete, since the inconsistency check between two questions in a single administration is impossible to do due to a change in the format in one of them, and the “honesty” questions about cannabis and heroin were excluded from the questionnaire.

It is unfortunate that the study encountered difficulties and that it deviates in some respects from the common ESPAD methodology. The French team has, however, tried to analyse the loss of classes in the sample and found no significant difference between them on geographical and school characteristics. The fact that the proportions of unanswered questions are low in general and that other measures of validity and reliability show very low values suggests a good data quality despite the problems.

Greece

The Greek study was carried out by the University Mental Health Research Institute (UMHRI) under the responsibility of Anna Kokkevi Ph.D., Assoc. Professor at the Athens University Medical School, in collaboration with Manina Terzidou M.Phil., Head of the Greek National Focal Point (REITOX Network – EMCDDA) and Anastasios Fotiou, Athens University Medical School.

Population

The target population consisted of all school students who turned 18 in the calendar year 2003 and were registered in secondary education, i.e. junior and senior high schools situated in the mainland of Greece and on the islands of Crete and Evia. It is common practice in surveys in Greece to exclude the smaller insular areas from the sampling frame, due to the logistical prob-

lems arising from the large geographical dispersion of the Greek islands and to limited financial resources. No information is available about the school attendance of this age cohort.

Sample and representativeness

For the nationwide School Population Survey four grades were surveyed: 3rd grade of Gymnasium and A, B and C of Lyceum. The sampling methodology was identical to that employed in the ESPAD surveys among 15–16 year old students. Thus the sample was a nationally representative stratified clustered probability sample where the sampling units were schools. The geographical strata were 1) Athens, 2) Thessaloniki, 3) other urban areas (municipalities of 10 000 registered inhabitants or more) and 4) semi-urban and rural areas (municipalities and communities of less than 10000 registered inhabitants).

In all strata the schools were randomly selected with probability proportional to their size, and classes were randomly selected within each school. The average class size in the sample was 23.4 students, which is very close to what was expected.

The original total sample consisted of 221 schools and 427 classes lower and upper secondary education. In the former category, 1985-born students were found in 13 schools and classes and in the latter in 101 schools and 211 classes. A total of 1299 students fell within the 1985 birth cohort. The proportion of the 1985 birth cohort still in school is not known. However the sampled student population was considered representative for the age cohort under study.

Field procedure

In autumn 2002, UMHRI addressed an official letter to the Ministry of Education requesting permission to carry out the study. The Ministry subsequently communicated its approval to the Regional Offices of Secondary Education (responsible for the schools drawn in the sample), and the latter in turn informed the school directors regarding the study and their expected role in it.

A month prior to the field work, UMHRI sent an official letter to the school directors informing them about the study and the time-frame within which it would be carried out. The coordinators of the research assistants contacted the schools to make appointments for the implementation of the study.

The administration of questionnaires took place in the classrooms and was supervised by a research assistant. No teacher was allowed to stay in the classroom except in a few cases (1%), when the teacher insisted on doing so.

The study was introduced to the students as one that was being conducted internationally and aimed to identify their health-related needs as a group. It was emphasised that the University of Athens was conducting the research and that the school staff had no connection with it or its results. Instructions regarding the completion of the questionnaire were given to the students, for example, to read carefully the introduction and to refrain from asking questions regarding the content of the questionnaire items.

When the students had completed the questionnaires they put them into a special folder in a way that safeguarded the anonymity of the respondents. Data were collected in March–April 2003, which gives an average age of 17.7 years.

Questionnaire and data processing

All but one of the ESPAD core items (Q11 on cider) were included in the Greek questionnaire. Minor modifications (e.g. month of birth) and other adjustments were made and the module C was included. In addition some national questions were put at the end of the questionnaire. The 1999 Greek questionnaire was carefully checked for discrepancies or up-dates against the 2003 English ESPAD version. The translation and re-translation was carried out this time only for the

new parts of the questionnaire. Re-translation was carried out by an in-house social scientist that was not working on the ESPAD study.

A computer check aiming at spotting possible coding or scanning errors was conducted. The checking process included cases of 1) unanswered items, 2) extreme values, 3) missing values and 4) errors in questionnaire code numbers. A scanner was used for the purpose of data entry. The sample was considered to be self-weighted. SPSS version 11 for Windows XP was used for data processing.

School and student co-operation

The majority of the schools were willing to participate in the study. Only 5 schools refused to participate. The next school in the sampling frame of schools replaced these. Following these replacements, the ultimate response rate for schools reached 100%. However, 13 classes (2.9%) failed to participate in the survey for various reasons, mainly because of other interfering activities. 12 students openly refused to participate in the study on the day of the administration.

Overall, the students were extremely co-operative and interested in participating in the survey. Based on the classroom reports from the collaborators, in the majority of classes (55%) there were no disturbances. In most of the cases where disturbances occurred only a few students caused them. The most common type of disturbances was loud comments, sometimes stemming from the content of the questionnaire. The questionnaire items that caused most queries from the students were Q3 (activities), Q4 (absence), Q6 (ever smoked), Q20 (drunkenness scale) and Q22 (ever heard of). The level of student comprehension was overall very good; only a few cases of students of non-Greek origin requested clarification. The average time for the completion of the questionnaires was 52 minutes. The response rate was 88%.

Reliability and validity

The consistency between two related questions in a single administration indicated quite high reliability, one question being the self-reported lifetime prevalence for the drug and the second question the age at first use of the drug. The highest inconsistency was observed in relation to questions on use of inhalants (5%), while the corresponding value for alcohol use was 4 percent and for cigarette smoking 3. The figure for other variables was 2 percent or lower.

The proportion of unanswered questions about various drugs was low overall (1%). For lifetime questions the highest proportion was observed in relation to alcohol (1%), while all other values were lower. A small increasing tendency for questions on 12 months or 30 days use was reported for any alcoholic beverage or “been drunk” (from 1 to 2%) or cannabis and inhalants use (from 0 to 1%). The inconsistency rate between lifetime, 12 months and 30 days use of any alcohol was 6 percent, while for “been drunk” it was 4 and for marijuana or inhalants use 1 percent. The percentage of unanswered core or module questions was low (1%).

The two questions about possible reluctance to admit cannabis and heroin use, respectively, reveal that 15 percent answered that they had already said in the questionnaire that they had used cannabis, which is close to the actual prevalence rate of 16 percent. The proportion that answered that they would “definitely not” admit cannabis use was 3 percent and about the same for heroin (4%).

Methodological considerations

The Greek study used the same methodology as in earlier ESPAD surveys. However, the representativeness for this age cohort in school is uncertain, since no information about the level of schooling in this age group is available. However, the representativity of students this age in the study is obvious since several grades where this age cohort may be found were included in the survey. As in earlier studies the insular areas (except Crete and Evia) were excluded from the

sampling frame. There is no information available about the impact of this exclusion on the results of the study, but it can be expected to be rather small.

The implementation of the survey in schools seems to have functioned well, and the students were overall extremely cooperative and interested, except in a very few cases of students who refused to participate.

Low values on most of the methodological measures indicate a good quality of data. Very few students (4%) answered on the “honesty” question that they would not admit using cannabis or heroin had they done so. In all the Greek study seems to have functioned in accordance with expectation and seems to have provided reliable and valid data.

Italy

Responsible for the Italian survey was Fabio Mariani at the Institute of Clinical Physiology, Italian Research Council, Pisa.

Population

In Italy the ESPAD survey was conducted in the whole country: North, Centre, South and Islands. It covered all grades of high school from 1 to 5 (students aged 14 to 19). Only students attending the fourth grade and born in 1985 were included in the analyses for this report.

Sample and representativeness

As in previous surveys, the Italian sample was drawn as a multistage stratified random sample. The stratification of the 103 Italian provinces was based on 3 variables: geographical area (north, centre, south and islands), population density and SMAD index, which is a drug abuse monitoring system that classifies the Italian provinces in relation to high, medium and low levels of drug use prevalence. The next stratum was created in relation to schools within each province type: Lyceums (classic, scientific, linguistic, pedagogic), artistic institute and vocational institute (technical and professional). Finally, 1% of the classes in each school stratum were randomly (simple random) drawn. The artistic schools were oversampled (7%) because of national interest. However, out of the number of schools initially drawn, 12 refused to participate and were replaced by randomly drawn schools.

The size of schools was not considered for stratification as the Italian school system guarantees a rather homogeneous number of students per school and per class (average number of students per school is 500, and per class 25).

In Italy, 74% of the 1985 birth cohort was considered to still be in some kind of schooling. In addition, analysis of distribution by geographical area by school and by sex did not show any presence of selection factors; hence the sample was considered representative of the whole birth cohort.

Field procedure

Contact was established via telephone with the health teacher or CIC staff (Consulting and Information Centre for juvenile distress). If none of these were found, the school headmaster was contacted. Materials for the survey were mailed to the contact person in each school. Data was collected in the classroom under surveillance of a teacher. Printed information for the survey leader (teacher) was provided, and he/she was advised to read aloud the instructions (same as on front page of the questionnaire) to the class. When the questionnaires were completed, each student put it in a separate envelope and sealed it. The data collection leader sent the class envelope

including the classroom report to the National Research Council. Data collection period was end of March until end of April 2003.

Questionnaire and data processing

Almost all ESPAD questions, but no extra country specific questions were included in the Italian questionnaire. The questions 11 and 12 were excluded since cider or alcopops are not available in Italy. The question number 5 (average grade last term) was modified to better fit the Italian grading system. In addition, the drug Ketamin was added to the list of drugs, since it's use was recorded among Italian adolescents. No module questions were added to the Italian version of the questionnaire.

The parcels with out-filled questionnaires were opened at the National Research Council. The questionnaires were scrutinised following a checklist for exclusion. As a result, 83 questionnaires were excluded from analyses. Finally the data was entered into the computer, using the programme Filemaker 5.5. For the analyses SPSS 11.0 was used. The sample was considered to be self-weighted, except for the overrepresentation of artistic schools for which a weight was inserted into the data file.

School and student co-operation

Of the 336 schools (and classes), which had accepted to participate in the total survey 324 sent back the questionnaires to the research institute. This means a loss of 3,5% of the sample. Of the non-participating schools 5 did not do so because the assigned teacher failed to fulfil his/her task, 5 schools had technical problems within the schools and two because of loss of questionnaire within the postal services. No student refused to participate in the study. The teachers' comments revealed that cooperation was excellent for the majority of the students.

According to the classroom reports more than half of the teachers (56%) reported no disturbances at all during completion of the questionnaire. Of those where some disturbances occurred the majority was concerning students making comments about the survey. A large majority of the survey leaders (92%) found that a majority of the students were interested in the survey and that they worked seriously (96%). The average time to fill out the questionnaire was 52 minutes. The response rate was 83%.

Reliability and validity

The inconsistency rate between two questions in a single administration was generally low and the highest were found in relation to the questions on cannabis use (6%), been drunk and use of inhalants (4% each). Other variables with inconsistent answering pattern were cigarette smoking and use of tranquillisers or sedatives (4%). For use of other illicit drugs or use of anabolic steroids the inconsistency rate was 2 percent or lower.

The missing data rate was moderately low, especially in relation to lifetime prevalence. The highest rates of missing data are found in relation to alcohol consumption – four percent both on average and for lifetime prevalence only. For “been drunk” it was three percent and for use of inhalants and cannabis it was two percent. The missing data rate on the lifetime prevalence figures for use of other illegal drugs, tranquillisers or sedatives and use of anabolic steroids it was 1 percent on each.

The rates of inconsistent answering in relation to lifetime, last 12 months and 30 days prevalence was 5% for any alcohol and 3% for having been drunk, 1% for cannabis use and 0% for use of inhalants.

The questions related to students' willingness to admit drug use reveal that 35 percent answered that “I already said I that have used it”, compared to the prevalence rate of 43 percent of canna-

bis use. The proportion who answered that they “definitely not” would admit such use was not very high; 2%. The corresponding figure for heroin use was somewhat higher, 6%. Use of the dummy drug “relewin” was reported by 1%.

Methodological considerations

The Italian sample was drawn in the same way as in earlier ESPAD surveys in Italy, which seems to provide a representative sample of all types of high schools, in which the absolute majority of the 1987 born students are taught. According to the classroom reports the survey seems to have functioned very well in the Italian schools. The response rate seems to be unusually high, but an inquiry among the responsible Italian researchers confirm that this is often the situation in Italian schools at this time of the school year.

The methodological measures such as inconsistency rates and missing data rates indicate no important problems. Not all cannabis users indicated on the honesty question that they had used it, but on the other hand this is something that has been observed also in many other ESPAD surveys. However, very few answered that they definitely wouldn't admit any such use (4%). The same figure related to heroin was only somewhat higher (7%), which give an indication of good quality of data. Thus, the Italian survey seems to provide reliable and valid data.

Latvia

Mrs. Ilze Koroleva, Institute of Philosophy and Sociology, University of Latvia was the principal co-ordinator for the Latvian ESPAD study and Marcis Trapencieris was responsible for the analysing and reporting of results. Latvia collected data also in the 1995 and 1999 ESPAD studies.

Population

The target population consisted of all students born in 1985 still in some kind of schooling in Latvia.

Sample and representativeness

Two types of schools were represented in the study, altogether 1,148 schools. For the present study samples were drawn from grades 5–7 in compulsory and grades 10–12 in vocational schools.

A proportional stratified cluster sample was drawn. For each of the 5 participating grades the schools were stratified by five levels of urbanisation. The stratification criteria were: level of urbanization (Riga, other major cities, regional centres, other towns and rural area/village), type of school (comprehensive or vocational), and language (Latvia, Russian and bilingual). The vocational school sub-sample was not stratified by language since such information was not available. The probability of inclusion in the sample was proportional to the number of students at the target grade level in school. In the second stage, a class was selected with the same probability for all classes.

Taken together this resulted in 33 strata. All together 436 classes in 351 schools were included in the total sample.

Data were weighted. The sample was judged to be representative for all students born in 1985.

Field procedure

Principals in the sampled schools were contacted by telephone. They were informed on the objectives of the survey and asked to nominate a contact teacher. When more than one class was sampled in a school the contact teachers were asked to arrange the data collection on the same day in all classes.

Research assistants administrated the data collection. One reason for that was that “students tend not to trust teachers on such sensitive issues”. The teacher who should have taught the class at the time of the data collection was present, but not active, in the classroom. This helped to avoid disturbances and made it easier to obtain consent from the schools.

The questionnaires were answered in the classrooms under the same conditions as a written test. The students put their questionnaires in individual envelopes, which they sealed and they were collected by the research assistants. The questionnaires and classroom reports were returned to the research institute where they were checked.

Russian speaking students answered a questionnaire in Russian. All students in participating classes took part in the data collection. However, the analysis only includes students born in 1985. The average time to answer the questionnaire was 48 minutes. Data were collected in March, April and early May, which gave an average age of 17.8 years.

Questionnaire and data processing

All ESPAD core questions were included as well as the modules of Integration and Psychosocial measures. Three own socio-demographic questions were added together with 12 drug related questions.

Question number 23 was incorrectly formulated and was excluded from the analysis. Some of the few added drug related response categories will be commented in footnotes in a few tables.

A professional interpreter translated the new questions from English to Latvian and Russian. Since most questions had already been used in 1999, no translation-back-translation was deemed to be necessary for the few new questions. No pre-test was done.

No double entering of data was carried out. However, logical consistency checks were run and checked by going back to the original questionnaires.

School and student co-operation

Of the totally 436 sampled classes 14 refused to participate. Information related to the student co-operation is based on the data from all 7,533 participating students. In the participating classes 16% of the students were absent. No present student refused to participate in the study. The scrutinising process resulted in the exclusion of 88 (1.2%) questionnaires.

Of the survey leaders, 68% did not report any disturbances and 27% that disturbances were found only among a few students. The most important disturbance was giggles or eye makings, which were reported by less than one fifth (17%) of the data collection leaders and loud comments by 9%. Some survey leaders reported that the questionnaire was too repetitive.

A large majority of the survey leaders (94%) reported that “all”, “nearly all” or “a majority” of the students were interested in the study (77% answered “all” or “nearly all” students). The corresponding figures were similar on the question whether the students worked seriously (95 and 78% respectively).

Reliability and validity

The inconsistency rate between two questions in a single administration was highest for the variable been drunk (8%). It was lower for cannabis and cigarettes (5%) as well as for inhalants (3%), tranquillisers and amphetamines (2%) and it was 1 percent or less for other illicit drugs and anabolic steroids.

Missing data rates were low or very low for alcohol and drug related questions (varying between 0 and 3%). Moreover, in the questionnaire as a whole, the proportion of unanswered questions was low (2%). The rates of inconsistent answers to questions of use in lifetime, last 12 months and last 30 days were quite low; 2% on alcohol questions and 0–1% on the questions about cannabis and inhalants.

For cannabis as well as heroin about 9% of the students answered “definitely not” to the question “If you had used marijuana or hashish, do you think you would have said so in this questionnaire?” (and the corresponding question about heroin). On the same question 20% answered that they had already said that they had used cannabis, which is somewhat lower than the lifetime frequency figure (27%).

Methodological considerations

The sample was drawn as a proportional stratified simple random sample of classes and thus the risk for over-sampling of small classes was inherent in the procedure. However, since separate samples were drawn in a large number of strata (33) and the sizes of the classes vary little within the strata, there is reason to believe that this issue did not cause any major sampling problems. As a whole the sampling procedure seems to have functioned well and the results are considered representative for Latvian students born in 1985.

Only a few sampled classes (3%) did not take part in the survey, which is indicative of good school co-operation.

No student refused to participate and the proportion of excluded questionnaires was acceptable (1.2%). Disturbances were reported from one third of the classes. Of all survey leaders 77% reported that “all” or “nearly all” students were interested in the survey and the proportion was the same on the question of whether or not the students worked seriously. The student co-operation seems to have been satisfactory. The overall impression of all reliability and validity measures is that the survey seems to have been conducted without any major methodological problems.

The overall impression is that the Latvian study has functioned well and that data are comparable with data from other ESPAD countries.

Poland

Janusz Sieroslawski, Institute of Psychiatry and Neurology, Warsaw was responsible for the Polish study. Poland also participated in the 1995 and 1999 ESPAD studies.

Population

There was a change of school system in Poland in the period between 1999 and 2003. A three level system was implemented instead of two levels. The population consists of students born in 1985 attending second grade of the post-gymnasium (third level) education in Poland. It was assumed that 80% of the cohort was enrolled in school in March/April 2003 and that the majority of this age cohort was to be found in the second grade.

Sample and representativeness

Lists of schools were obtained from the Ministry of Education. They contained information about the number of classes in each school.

The sampling unit was schools. The drawing scheme assumed equal distribution of the sample over the country and maximal dispersion. The sample was drawn from schools originally drawn for the survey on 15–16 year old students. In each school the data collector draw a class randomly using a simple random formula. An additional number of classes were drawn for the overrepresentation of two cities (Warsaw and Poznan) and three regions (Mazowieckie, Lodzkie and Zachodniopomorskie) for the purpose of regionally analysed data. For this reason data were finally weighted.

One class from each of 290 randomly chosen schools was drawn. As mentioned above, of the 1985 birth cohort 80% were estimated to attend second grade in post-gymnasial education. The sample is judged to be representative for all Polish students born in 1985.

Field procedure

For the administration of the data collection Poland was divided into six areas. Administration and data collection were performed by altogether 124 research assistants, who were specially trained for this task.

The assistants were told to collect data under conditions similar to a written test. Instructions to the students were read aloud in each class and each student could also read it on the front page of the questionnaire before answering it. After completion each student put his or her questionnaire in an individual envelope. No teacher was allowed to stay in the classroom while the survey was done. The research assistants sent all material to the research institute.

The average time to answer the questionnaire was 37 minutes. Data were collected in May–June, which gives an average age of 17.9 years.

Questionnaire and data processing

The questions that were new in 2003 were translated to Polish and then back translated to English, which did not result in any important changes.

The questionnaire contained all ESPAD core questions as well as questions of the Integration module. The same own questions were asked as in the 1995 and 1999 surveys. The questionnaire also included one new question regarding possible prevention activity. The questionnaire was tested via interviews with six students and every item was discussed in detail. Special attention was paid to new questions or changes. For example, the concept of a “drink” was explained in the questionnaire since it is not usual language among Polish youth.

The study proved that few questions raised doubts and that the students understood the original intentions of the questions.

Data were weighted to correct for the over-sampling of some cities and regions.

School and student co-operation

Eight out of 290 schools did not participate. The major reason was that they were not available during the period of data collection. The schools that did not collect data were not replaced. It is stressed in the national report that there were no problems with the willingness of the schools and classes to conduct the survey.

The response rate was 82%. The proportion of student refusal was less than 0.1 percent. The number of eliminated questionnaires was less than 1 percent.

No serious problems or disturbances were reported from the data collection. Of all survey leaders 53 percent did not report any disturbances at all, while 37 answered that this happened with a few students only. The most important disturbance was loud comments, which was reported from nearly half of the survey leaders (45%).

In the large majority of the classes (91%) the data collection leaders reported that “all”, “nearly all” or “a majority” of the students were interested in the study (82% answered “all” or “nearly all”). The proportions that answered that the students worked seriously were 93 and 77% respectively. The average time to complete the survey was 57 minutes.

Reliability and validity

The inconsistency rate between two questions in a single administration was highest for the variables been drunk and tranquillisers or sedatives (6%) and cannabis (5%) followed by the use of inhalants (3%). The corresponding figure for other illicit drugs was about 1 percent, while for alcohol in combination with pills it was 2 percent.

Missing data rates were rather low (1–2%) for all categories of substance use variables. The average number of unanswered core questions was two percent and for the entire questionnaire it was one percent.

The rate of inconsistent answers to questions about use in lifetime, last 12 months and last 30 days was 2–3 percent in relation to alcohol use and 1 percent in relation to cannabis and inhalants use. Just 4 percent answered “definitely not” to the question “If you have ever used marijuana and hashish, do you think that you would have said so in this questionnaire?” The corresponding figure for heroin was 6 percent. On the same question 39% claimed that they already said in this questionnaire that they had used cannabis, which is rather close to the reported prevalence rate (36%).

Methodological considerations

Overall, the sample seems to have been drawn without any problems. However, the original sampling unit was school for the purpose of the survey among the 15–16 year old students. An additional class was drawn in the second grad of post-gymnasium schools for this age group. This means that the sampling was tied to the first sampling and not entirely random. It is assumed, however, that the data are satisfactorily representative for this student cohort in Poland.

There are rather many survey leaders that reported some kind of disturbance during the data collection. The Polish ESPAD researcher who stated that the research assistants were trained to note all disturbances, which made them very observant, made a plausible explanation to this. It was also commented that the survey leaders were trained to handle situations with loud comments from the students and they did not report any serious problems. Hence, there is reason to assume that the disturbances during the data collections were not more serious in Poland than in other ESPAD countries.

Very few students refused to participate, the proportion of skipped questionnaires was not high and the response rate acceptable. The number of refusing schools and classes was low and there are no problems reported in the co-operation with the schools. Thus, there is reason to assume that both the student and the school co-operation were good.

The inconsistency rates are a little higher in Poland than in most other ESPAD countries included in this report, especially for the variable tranquillisers and sedatives without a doctor’s prescription, which calls for some observance. However, other reliability or validity measures are not extremely high.

The only circumstance that creates some concern is the fact that 28% of the students answered that they already had said that they had used cannabis when asked the “honesty question”. The actual prevalence rate was instead 18%. The Polish ESPAD researcher has commented that the “honesty question” was at the end of the questionnaire when some students may have started to get tired. It is also mentioned that the translation of this question may not have been optimal. In a general comment in the Polish report some concern is expressed about Polish students view on cannabis as a harmless drug. On the other hand the ESPAD researcher concludes that the figure of reported cannabis use probably is rather realistic, but that there are some concerns about the answers to the honesty question.

Information is missing about the number of unanswered questions in the questionnaire as a whole. However, since the proportions of unanswered questions about different substances are low, there is reason to assume that this also is the case in the total questionnaire.

With these remarks in mind the Polish data are assumed to be representative for Polish students born in 1985 and that they are comparable with results from other ESPAD countries.

Slovak Republic

Responsible for the Slovakian ESPAD study was Dr. Alojz Nociar, National Monitoring Centre for Drugs¹.

Population

The target population for the 2003 study was secondary school students in grades 1 to 4, born in 1987.

Sample and representativeness

The survey was conducted throughout the Slovak Republic. In each of the administrative regions data from four types of secondary schools was collected: Secondary grammar schools, technical colleges, vocational schools and a new category “composite secondary schools”. Since the latter emerged from the former vocational schools with and without maturity exams, they were processed under the heading “vocational schools”.

The total sample of grades 1–4 included students born in the years 1984 to 1987. In total this sample included 11 267 students, among which 3 117 were born in 1985. As a majority of the pupils from primary schools attend some secondary school, including those in vocational school with three grades only, it was estimated that about 90 percent of the students born in 1985 were still in some kind of secondary schooling in March 2003.

The sample was a stratified random sample of schools, drawn from comprehensive lists including information about schools, classes, number of students. The sampling followed the same procedure as in earlier ESPAD studies. First eight regions were defined, four types of schools and three types of educational language: Slovak, Hungarian, and other. Finally 46 strata were defined, and a stratified random selection of schools was carried out proportionate to the number of students, followed by a random selection of four classes within each school (one in each grade).

The sample used for this report is assumed to be representative of secondary school students born in 1985. The sample is self-weighted for age and gender.

¹ By 2005 working at the Research Institute for Child Psychology and Psychopathology, which recently took over the coordination of the ESPAD in the Slovak Republic.

Field procedure

After negotiation with the Ministry of Education the permission to conduct the survey and a letter of recommendation to the directors of chosen schools was obtained. All material including instructions, questionnaires and classroom reports were prepared for the people collecting the data. These people were employees at the Departments for children and adolescents and Departments for health protection from the network of 38 regional State Health Institutes. Teachers were not involved and they were not present during data collection. No school or class refused to participate in the survey. When the students had filled out the questionnaire they put it in a separate envelope, which was collected and sent to the research institute together with the classroom report.

Data was collected in the period March 24–28, 2003. This gives a mean age 17,7 years.

Questionnaire and data processing

All ESPAD core questions were included in the questionnaire, except two about alcopops. It also included two full additional modules (A and C) and country specific questions about smoking and drinking habits as well as passive smoking (including parts of Fagerström scale, Alcohol Dependence Scale and Female Alcoholism Questionnaire). The country specific questions were put at the end of the questionnaire.

The main part of the questionnaire was identical with the version used in earlier ESPAD surveys. However, new questions were translated and back translated by a professional agency, while the old version was checked and updated. Since the sampling procedure also included language as one of the criteria, the Hungarian ESPAD questionnaire was used for Hungarian speaking students. The country specific questions were translated from Slovak into Hungarian by a native Hungarian and checked for correctness. The questionnaire was pre-tested in three types of secondary schools during December 2002, and slightly adjusted.

After completion all questionnaires were sent back to the research institute. Every questionnaire was checked for completeness and if age or gender was missing it was compared with the information from the classroom reports. If the missing information was impossible to re-establish the questionnaire was excluded. Research assistants entering data were carefully instructed about how to check individual questionnaires for completeness and validity. After this the data file was checked for data quality. If possible, missing data on gender was corrected using information on the classroom report. The proportion of excluded questionnaires was small around 0.7%.

School and student co-operation

All schools and students were willing to participate in the study. However, as one of the selected schools suffered from an influenza epidemic, this school (four classes) was excluded and replaced with the same type of school within the same region.

Of the present students only one refused to participate in the survey. In an absolute majority of the classrooms (95%) the students were interested and worked seriously. However, from the classroom reports it can be seen that in about two thirds of the classrooms some disturbances have occurred, mainly from a few students. It does not seem to have affected the performance of the survey and the majority of the disturbances included giggles or eye-makings.

The response rate was 86%. The average time to fill out the questionnaire was 46 minutes.

Reliability and validity

Reliability measured by inconsistency rates between two questions in a single administration was generally low. The highest rates of inconsistencies were found in relation to using alcohol

together with pills and concerned 5 percent of the students. Next came smoking and cannabis use (4% each) and been drunk (3%).

The proportion of unanswered questions is highest for any alcohol use (lifetime 3%, 12 months and 30 days 2%). Also for “been drunk” this proportion raised somewhat from the lifetime question (1%) to those regarding 12 months and 30 days prevalence (3%). For cannabis use the corresponding value is 1, 2 and 2 percent and for inhalants 0, 2 and 2 percent. For all other variables this value is 1 percent or less.

The average proportion of unanswered questions was low in relation to the core questions (1%), somewhat higher for module questions (3%), but quite high for own questions (10%). This gives an average of 2 percent for the total questionnaire.

The inconsistency rate between lifetime, last 12 months and last 30 days prevalence was low in general. It was highest for alcohol (2%), while for been drunk, inhalants and cannabis use it was 1%.

The two questions about possible unwillingness to admit cannabis use revealed that 2 percent said that they would definitely not do so. For heroin use it was only slightly higher (3%). The proportion that on this question indicated, “I have already said I have used it” was 32 percent for cannabis, while the lifetime prevalence figure was 39. This phenomenon that the lifetime prevalence is higher than the proportion on this question has been observed in other country reports. It is difficult to know why this is so, but the difference is not very big.

Methodological considerations

The coverage of the Slovakian sample in this age group seem to be good with an estimated school attendance of 90 percent of the birth cohort. In general, the survey seems to have worked very well and the participating students were apparently interested in it. In spite of this, the survey leader report that in comparison with earlier surveys more comments and noise were reported this time.

The methodological measures indicate a good data quality. Neither inconsistency rates between two questions in a single administration, nor the proportion of unanswered questions or inconsistencies between lifetime, 12 months and 30 days prevalence were high. The questionnaire might have been a bit too long or too complicated since the missing data rates on own questions was much higher than for the rest of the questionnaire. Anyway, this might be explained by the possibility to skip those questions, be it about alcohol tolerance or dependence on nicotine, if they do not apply. Hence skipping questions not relevant for them (i.e. students not drinking or not smoking at all) can account for this higher missing data rates.

Sweden

Responsible for the 2003 ESPAD survey in Sweden was Barbro Andersson and Björn Hibell, at the Swedish Council for Information on Alcohol and Other Drugs, CAN, Stockholm. Sweden also participated in the 1995 and 1999 surveys.

Population

The target population consists of all grade nine students born in 1987 in compulsory schools in Sweden. It was estimated that about 95% of all persons born in 1987 were enrolled in school and of all students born in 1987 95% were to be found in grade 9.

Sample and representativeness

A sample comprising 200 classes was drawn from national lists of ninth grade education. Only one class from each school was chosen. The sample was drawn as a two-step stratified systematic cluster sample of schools and classes with a probability proportionate to school and class size. Since information originally was available about the number of classes and students in each school, but not the distribution of students within the classes, it was necessary to draw a systematic random number of schools in the first step. This step was performed by Statistics Sweden.

Each selected school was contacted and information about the exact number of classes and students in each class was collected. One class in each school was drawn randomly with a probability proportionate to class size, i.e. a random number (n) within the range of the total number of students in each school was generated and the class with the n :th student was selected.

The sample was self-weighted and considered to be nationally representative of grade nine students born in 1987.

Field procedure

Statistics Sweden provided the lists of schools including addresses, phone and fax numbers. An introductory letter was sent to all head masters, presenting the study. The head master was asked not to inform the students about the survey in advance, to avoid discussions that could lead to biased data. He/she was also asked to schedule the data collection for one class period, following the same conditions as for a written test. One teacher in each school was appointed as data collection leader.

A separate sheet of paper with a dummy table was provided, into which the head master was asked to fill out class identifications and the total number of boys and girls in each class, and thereafter fax the paper to CAN. This documentation was the basis for the random selection of the participating class in each school as described above.

All material for the survey was mailed to the selected schools. It included questionnaires, individual envelopes for each student's questionnaire as well as a written instruction to the teacher responsible for the data collection. After completion the questionnaires were packed in a large prepaid envelope and mailed back to the researchers.

If the questionnaires did not arrive to the research institute within the expected time limit, the school was called by phone and asked to complete the survey. In some cases the questionnaires were already mailed back, but in others the survey had been forgotten. A new agreement was made to accomplish the data collection. The survey was conducted during the period March 17–28, which gives a mean age of 15,7 years.

Questionnaire and data processing

The questionnaire included all core questions. In addition the questions of two modules were included, Integration and Deviance. In addition to this the questionnaire contained optional as well as four own questions. The 1999 questionnaire was used as a base and the Swedish ESPAD researchers translated the new questions. It was piloted in 5 classes and proved to be well functioning, even though some students thought that some questions were too similar and repetitive. This was also mentioned in some of the classroom reports.

When the questionnaires returned to the research centre by mail they were counted and the number of boys and girls were compared with the information on the classroom reports. At the same time they were checked to see if they seemed to be seriously answered. By this procedure 30 unserious questionnaires were discovered and out-sorted and at the computerised control of exaggerated response pattern 17 more questionnaires were deleted, 47 (1.4%) in total.

The questionnaires had been consecutively numbered while printed, and each class' actual number series had been recorded when the questionnaires were packed and sent to the schools. In this way each class could be identified and given an individual number in the data set. The statistical software SPSS version 11 was used for the analyses. Data was not weighted.

School and student co-operation

Most schools were willing to participate in the survey. However, 27 classes (out of 200) did not participate despite the fact that a majority promised to do so when contacted by phone. A few of them, however, refused openly to participate referring to an overload of surveys in school. It is a fact that Swedish schools are widely used for surveys of different kinds. On the classroom reports many teachers reported that the students were tired of surveys – at least three of them reported that they had had 2–3 questionnaires during the very same week. The loss of classes was not concentrated to any particular part of Sweden though.

Despite these facts, the students participated with seriousness according to the teachers. In about 60% of the classes no disturbances were noted and in a majority of the others only a few students made noise, mainly giggles and whispers. No present student refused to participate.

Reliability and validity

Reliability as measured by inconsistency rates between two questions in a single administration was highest for the variables “been drunk”, “inhalants use” and “ever smoked” (3%). For cannabis or other illicit drug use it was low (1% or less).

The proportion of unanswered questions was overall low. It was 2–3% for all substances and in the whole questionnaire 2% of the questions were left unanswered.

The rate of inconsistent answers between lifetime, 12 months and 30 days prevalence questions very was low, 1% for “any alcohol” and “been drunk” and around 0 for cannabis and inhalants. Regarding the possibility to admit drug use 7% of the students indicated that they “definitely not” would admit neither cannabis use nor heroin use. Nine percent of the students indicated that “I already said that I have used it” on this honesty question, which was about the same proportion that in the questionnaire had indicated that they had used cannabis (8%). Only 0.2% had indicated use of the fictitious drug relevin, while 12% thought that they had heard of it.

Methodological considerations

Compared to earlier school surveys in Sweden the drop out rate of schools was somewhat high. The main reason for this was that different kinds of surveys were too frequently disturbing the work in school. However, most probably the loss did not affect the representativeness of the survey in any other way than giving somewhat less students to base the calculations on.

Once a school decided to participate the school cooperation was good. No student refused to participate and the classroom reports do not indicate any major problem during the data collection. However, student as well as school cooperation seems to have been good.

None of the reliability or validity measures indicate any methodological problems, which points to a good data quality. The survey is judged to be representative for students in grade 9 born in 1987 and the results comparable with data from other ESPAD countries.

Tables

Appendix II

1.	Frequency of lifetime use of cigarettes.	91
2.	Cigarette smoking during the last 30 days.	92
3.	Frequency of lifetime use of any alcoholic beverage.	93
4.	Frequency of use of any alcoholic beverage during the last 12 months.	94
5.	Frequency of use of any alcoholic beverage during the last 30 days.	95
6.	Frequency of beer drinking during the last 30 days.	96
7.	Frequency of wine drinking during the last 30 days.	97
8.	Frequency of drinking spirits during the last 30 days.	98
9.	Quantities of beer consumed on the last alcohol drinking occasion.	99
10.	Quantities of cider consumed on the last alcohol drinking occasion.	100
11.	Quantities of alcopops consumed on the last alcohol drinking occasion.	101
12.	Quantities of wine consumed on the last alcohol drinking occasion.	102
13.	Quantities of spirits consumed on the last alcohol drinking occasion.	103
14.	Estimated average consumption of beer, wine, spirits, alcopops and cider in cl 100% alcohol, on the last drinking occasion.	104
15.	Lifetime frequency of being drunk.	105
16.	Frequency of being drunk last 12 months.	106
17.	Frequency of being drunk last 30 days.	107
18.	ESPAD drunkenness scale. Entries are percentages.	108
19.	Drinks needed to get drunk. Entries are percentages.	109
20.	Frequency of drinking five or more drinks in a row.	110
21.	Frequency of lifetime use of any illicit drug. Percentages among boys, girls and all students.	111
22.	Frequency of lifetime use of marijuana or hashish. Percentages among boys, girls and all students.	112
23.	Frequency of use of marijuana or hashish during the last 12 months and the last 30 days. Percentages among boys, girls and all students.	113
24.	Frequency of lifetime use of any illicit drug other than marijuana or hashish. Percentages among boys, girls and all students.	114
25.	Frequency of illicit drug use other than marijuana or hashish. Lifetime, last 12 months and last 30 days.	115
26.	Lifetime experience of different illicit drugs. Percentages among boys, girls and all students.	116
27.	12 months prevalence of different illicit drug use. Percentages among boys, girls and all students.	117
28.	30 days prevalence of different illicit drug use. Percentages among boys, girls and all students.	118

29. Lifetime use of tranquillisers or sedatives; anabolic steroids; alcohol together with pills; alcohol together with cannabis. Percentages among boys, girls and all students.....	119
30. Frequency of use of inhalants during the lifetime, the last 12 months and the last 30 days. Percentages among boys, girls and all students.....	120
31. Lifetime abstinence from various substances.....	121
32. Drinking places on the last drinking day. Percentages among boys, girls and all students.....	122
33. Expected personal consequences of alcohol consumption. Percentages among boys, girls and all students answering "Very likely" or "Likely".	123
34. Experienced problems caused by own alcohol use.	124
35. Experienced problems caused by own drug use.	126
36. Perceived risk of substance use. Percentages among boys, girls and all students answering "Great risk".....	128
37. Perceived availability of substances. Percentages among boys, girls and all students answering "Very easy" or "Fairly easy".....	130
38. Places where marijuana or hashish easily can be bought. Percentages among boys, girls and all students.	132
39. Perceived drug use among friends. Percentages among boys, girls and all students.	133
40. Comparisons between students aged 15–16 and 17–18 respectively on the variables 30 days prevalence of smoking cigarettes, alcohol consumption and drunkenness, consumption in centilitres (cls) of pure alcohol on last drinking occasion, lifetime prevalence of illicit drug use and use of inhalants. Centilitres and percentages among boys, girls and all students.....	135

Table 1. Frequency of lifetime use of cigarettes.

	Number of occasions used in lifetime							No answer %
	0	1–2	3–5	6–9	10–19	20–39	40+	
Boys								
France	22	78						..
Greece	28	13	7	3	3	5	42	0
Italy	29	11	7	5	6	5	38	1
Latvia	13	11	6	4	5	5	56	1
Poland	21	12	8	5	6	5	45	0
Slovak Republic	17	13	7	3	6	4	50	0
Sweden	28	11	8	6	8	6	32	0
Girls								
France	19	81						..
Greece	28	13	7	5	6	3	39	0
Italy	25	13	8	5	7	6	36	1
Latvia	22	16	9	5	5	5	39	1
Poland	26	14	9	5	7	5	33	0
Slovak Republic	22	14	9	6	5	5	39	0
Sweden	27	11	7	7	8	7	34	1
All students								
France	20	80						..
Greece	28	13	7	4	4	4	41	0
Italy	27	12	7	5	7	5	37	1
Latvia	18	14	7	4	5	5	46	1
Poland	23	13	9	5	7	5	39	0
Slovak Republic	20	13	8	5	6	5	44	0
Sweden	27	11	8	6	8	7	33	0

Table 2. Cigarette smoking during the last 30 days.

	Number of cigarettes per day in last 30 days						No answer %
	0	<1	1–5	6–10	11–20	21+	
Boys							
France	54	9	12	13	9	4	0
Greece	50	10	6	6	15	14	1
Italy	52	14	12	11	8	2	1
Latvia	42	9	14	18	11	6	0
Poland	53	10	11	13	10	3	1
Slovak Republic	49	10	15	16	7	4	0
Sweden	70	20	5	3	2	1	0
Girls							
France	55	11	13	13	7	2	0
Greece	53	8	10	8	12	10	1
Italy	54	14	16	10	6	1	0
Latvia	54	14	15	11	3	3	0
Poland	62	13	11	11	2	1	2
Slovak Republic	57	13	15	10	4	1	0
Sweden	64	18	8	6	4	0	0
All students							
France	54	10	12	13	8	3	0
Greece	51	9	8	7	13	12	1
Italy	53	14	14	11	7	2	1
Latvia	48	12	15	14	7	4	0
Poland	57	11	11	12	6	2	2
Slovak Republic	54	12	15	13	5	2	0
Sweden	67	19	6	5	3	1	0

Table 3. Frequency of lifetime use of any alcoholic beverage.

	Number of occasions in lifetime						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	9	5	5	6	11	12	53	2
Greece	1	3	5	4	8	12	67	1
Italy	5	5	5	5	12	14	53	4
Latvia	2	4	5	7	13	13	56	3
Poland	3	3	4	6	9	12	63	1
Slovak Republic	1	3	4	5	9	12	65	2
Sweden	5	5	6	6	13	15	52	1
Girls								
France	9	8	10	8	21	19	26	3
Greece	2	6	6	10	15	18	43	1
Italy	6	10	10	11	17	16	31	3
Latvia	2	6	8	10	16	19	40	2
Poland	3	6	10	12	17	17	36	3
Slovak Republic	2	5	8	11	16	19	40	3
Sweden	4	5	6	8	15	20	43	1
All students								
France	9	7	7	7	16	15	39	2
Greece	2	5	5	7	12	15	55	1
Italy	6	8	8	8	15	15	41	4
Latvia	2	5	6	9	15	16	47	2
Poland	3	5	7	9	13	15	49	2
Slovak Republic	2	4	6	9	13	16	51	3
Sweden	5	5	6	7	14	18	47	1

Table 4. Frequency of use of any alcoholic beverage during the last 12 months.

	Number of occasions in last 12 months							No answer %
	0	1–2	3–5	6–9	10–19	20–39	40+	
Boys								
France	13	10	9	13	19	14	24	3
Greece	4	7	8	11	18	18	34	2
Italy	7	10	9	13	19	15	27	5
Latvia	7	10	12	15	20	13	24	3
Poland	6	6	10	13	19	14	32	2
Slovak Republic	7	9	11	11	16	13	37	2
Sweden	9	10	12	15	22	18	15	1
Girls								
France	15	17	18	18	15	10	7	4
Greece	6	13	15	16	20	14	17	3
Italy	12	17	16	15	18	13	10	4
Latvia	7	16	18	16	20	14	10	3
Poland	7	17	18	15	21	13	10	3
Slovak Republic	5	17	16	15	22	12	13	3
Sweden	8	10	14	17	26	15	10	2
All students								
France	14	14	14	15	17	12	15	3
Greece	5	10	11	14	19	16	26	2
Italy	10	14	13	14	18	14	18	5
Latvia	7	13	15	16	20	14	17	3
Poland	7	12	14	14	20	13	21	3
Slovak Republic	5	13	14	13	20	13	23	2
Sweden	9	10	13	16	24	16	12	2

Table 5. Frequency of use of any alcoholic beverage during the last 30 days.

	Number of occasions in last 30 days							No answer %
	0	1–2	3–5	6–9	10–19	20–39	40+	
Boys								
France	26	21	18	13	12	6	4	3
Greece	12	19	23	16	17	6	7	2
Italy	17	20	21	16	14	6	6	3
Latvia	18	33	24	12	10	2	2	3
Poland	15	21	23	17	16	4	3	2
Slovak Republic	21	22	18	14	14	7	6	2
Sweden	26	36	25	9	4	1	0	2
Girls								
France	39	29	17	9	5	1	1	4
Greece	24	27	19	14	9	5	2	3
Italy	30	27	18	13	7	3	1	4
Latvia	24	40	23	9	4	1	0	2
Poland	27	33	24	10	5	1	6	2
Slovak Republic	31	31	21	9	6	1	1	2
Sweden	26	42	23	6	3	0	–	2
All students								
France	33	25	18	11	8	4	3	3
Greece	18	23	21	15	13	5	5	2
Italy	24	24	20	14	11	4	3	4
Latvia	21	37	23	10	7	1	1	2
Poland	21	27	24	14	11	2	2	2
Slovak Republic	27	27	20	11	10	3	3	2
Sweden	26	39	24	8	3	1	0	2

Table 6. Frequency of beer drinking during the last 30 days.

	Number of occasions in last 30 days							No answer %
	0	1–2	3–5	6–9	10–19	20–39	40+	
Boys								
France	39	21	17	9	9	3	2	2
Greece	32	23	18	12	9	3	4	2
Italy	27	20	17	13	12	6	5	2
Latvia	19	25	17	13	15	6	5	0
Poland	14	17	22	17	18	6	6	1
Slovak Republic	30	17	16	13	15	7	4	1
Sweden	29	31	21	9	5	2	3	1
Girls								
France	65	21	8	3	2	1	0	2
Greece	54	24	11	6	4	1	1	3
Italy	47	25	13	7	5	2	2	2
Latvia	48	26	13	6	5	2	1	2
Poland	29	30	23	11	6	2	1	1
Slovak Republic	65	19	7	4	3	1	1	3
Sweden	54	29	10	4	2	1	1	3
All students								
France	53	21	13	6	5	2	1	2
Greece	42	23	15	10	6	2	2	3
Italy	38	22	15	10	8	4	3	2
Latvia	34	25	15	10	9	4	3	1
Poland	21	24	22	14	12	4	3	1
Slovak Republic	50	18	11	8	8	3	2	2
Sweden	42	30	16	6	4	2	2	2

Table 7. Frequency of wine drinking during the last 30 days.

	Number of occasions in last 30 days						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	65	17	10	5	3	1	1	4
Greece	34	31	14	9	7	3	3	3
Italy	35	26	15	10	7	4	3	3
Latvia	60	26	8	4	2	0	0	3
Poland	69	20	6	3	2	0	1	4
Slovak Republic	51	27	11	5	3	1	1	2
Sweden	71	20	5	2	1	1	0	4
Girls								
France	78	13	5	2	1	0	0	3
Greece	41	35	14	5	3	1	1	3
Italy	52	26	11	6	4	1	1	3
Latvia	43	43	10	3	2	0	0	1
Poland	70	23	5	1	1	0	0	4
Slovak Republic	49	31	11	6	3	1	0	2
Sweden	51	36	9	3	1	1	0	3
All students								
France	72	15	7	4	2	1	1	4
Greece	37	33	14	7	5	2	2	3
Italy	44	26	13	7	5	3	2	3
Latvia	51	35	9	3	2	0	0	2
Poland	70	22	5	2	1	0	0	4
Slovak Republic	50	30	11	5	3	1	1	2
Sweden	60	29	7	2	1	1	0	4

Table 8. Frequency of drinking spirits during the last 30 days.

	Number of occasions in last 30 days						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	37	2	17	12	8	3	3	2
Greece	22	23	17	15	9	8	6	1
Italy	37	26	15	10	6	3	3	2
Latvia	44	32	12	7	4	1	1	3
Poland	39	31	17	7	4	1	1	2
Slovak Republic	35	23	15	10	9	3	5	2
Sweden	39	36	13	6	3	2	1	2
Girls								
France	51	27	13	5	3	1	0	2
Greece	31	30	18	7	9	3	4	1
Italy	47	26	14	8	4	1	1	3
Latvia	55	31	9	3	2	0	1	3
Poland	56	32	9	3	1	0	0	3
Slovak Republic	46	28	15	6	4	1	1	2
Sweden	38	40	13	4	3	1	1	3
All students								
France	44	25	15	8	5	2	1	2
Greece	26	26	17	11	9	5	5	1
Italy	42	26	14	9	5	2	2	2
Latvia	50	31	10	5	3	1	1	3
Poland	48	31	13	5	2	1	1	2
Slovak Republic	41	26	15	8	6	2	2	2
Sweden	39	38	13	5	3	1	1	3

Table 9. Quantities of beer consumed on the last alcohol drinking occasion.

	Centilitres of beer					
	Never drink beer	0	< 50	50–100	101–200	201+
Boys						
France ^{a)}	..	..	..	..	..	..
Greece	14	33	14	24	8	7
Italy	19	15	21	26	11	9
Latvia	11	12	14	29	19	16
Poland	7	6	12	34	24	17
Slovak Republic	19	13	13	32	15	9
Sweden	16	15	5	12	15	36
Girls						
France	..	..	..	..	..	..
Greece	27	40	17	12	3	2
Italy	36	21	25	15	3	2
Latvia	31	27	18	18	4	2
Poland	13	14	32	31	8	2
Slovak Republic	44	28	16	8	2	1
Sweden	37	30	9	11	7	5
All students						
France	..	..	..	..	..	..
Greece	21	36	15	18	5	5
Italy	28	18	23	19	6	5
Latvia	22	20	16	23	11	8
Poland	10	10	22	32	16	9
Slovak Republic	33	21	15	19	8	4
Sweden	27	23	7	12	11	20

a) Data from France are missing due to another question format.

Table 10. Quantities of cider consumed on the last alcohol drinking occasion.

	Centilitres of cider					
	Never drink cider	0	< 50	50–100	101–200	201+
Boys						
France	..	..	..	..	..	..
Greece	..	..	..	..	..	..
Italy	..	..	..	..	..	..
Latvia	42	43	7	6	2	1
Poland	88	5	3	3	1	1
Slovak Republic	..	..	..	..	..	..
Sweden	27	43	9	11	6	4
Girls						
France	..	..	..	..	..	..
Greece	..	..	..	..	..	..
Italy	..	..	..	..	..	..
Latvia	23	48	17	11	1	0
Poland	91	6	2	1	1	0
Slovak Republic	..	..	..	..	..	..
Sweden	15	36	11	19	14	6
All students						
France	..	..	..	..	..	..
Greece	..	..	..	..	..	..
Italy	..	..	..	..	..	..
Latvia	32	45	13	8	2	1
Poland	90	5	2	2	1	1
Slovak Republic	..	..	..	..	..	..
Sweden	20	39	10	16	10	5

Table 11. Quantities of alcopops consumed on the last alcohol drinking occasion.

	Centilitres of alcopops					
	Never drink alcopops	0	< 50	50–100	101–200	201+
Boys						
France	..	..	..	..	..	..
Greece	25	36	12	20	5	3
Italy	..	..	..	..	..	..
Latvia	42	43	10	4	1	1
Poland	87	6	2	3	1	1
Slovak Republic	..	..	..	..	..	..
Sweden	48	40	5	5	2	1
Girls						
France	..	..	..	..	..	..
Greece	17	44	20	15	3	1
Italy	..	..	..	..	..	..
Latvia	25	50	20	4	0	0
Poland	90	6	3	1	0	0
Slovak Republic	..	..	..	..	..	..
Sweden	35	46	7	8	3	1
All students						
France	..	..	..	..	..	..
Greece	21	40	16	18	4	2
Italy	..	..	..	..	..	..
Latvia	33	47	15	4	1	0
Poland	88	6	3	2	1	1
Slovak Republic	..	..	..	..	..	..
Sweden	41	43	6	7	2	1

Table 12. Quantities of wine consumed on the last alcohol drinking occasion.

	Centilitres of wine					
	Never drink wine	0	< 15	15–30	37	75+
Boys						
France	53	23	8	10	5	2
Greece	17	33	12	21	11	6
Italy	28	21	14	19	11	8
Latvia	29	45	11	9	3	2
Poland	44	28	5	8	7	8
Slovak Republic	28	27	13	17	8	8
Sweden	45	37	6	7	2	2
Girls						
France	67	16	8	8	2	0
Greece	20	36	14	22	6	2
Italy	43	19	16	14	6	2
Latvia	14	43	19	19	4	2
Poland	38	31	13	13	4	1
Slovak Republic	16	27	23	26	6	2
Sweden	28	36	11	13	7	5
All students						
France	60	19	8	9	3	1
Greece	19	34	13	22	8	4
Italy	36	20	15	16	8	4
Latvia	21	44	15	15	3	2
Poland	41	30	9	10	6	5
Slovak Republic	21	27	19	22	7	5
Sweden	36	37	9	10	5	4

Table 13. Quantities of spirits consumed on the last alcohol drinking occasion.

	Centilitres of spirits					
	Never drink spirits	0	< 5	5–10	11–25	30+
Boys						
France	23	17	9	21	17	13
Greece	12	18	10	35	16	9
Italy	23	21	14	23	12	7
Latvia	20	33	8	15	13	12
Poland	16	26	4	12	16	26
Slovak Republic	17	21	8	19	17	20
Sweden	19	29	10	17	14	12
Girls						
France	32	18	14	23	11	3
Greece	15	23	18	30	11	3
Italy	32	19	19	21	7	2
Latvia	30	37	11	12	7	3
Poland	27	28	8	14	14	9
Slovak Republic	26	24	14	19	12	5
Sweden	17	31	12	21	13	5
All students						
France	28	17	12	22	14	8
Greece	14	20	14	33	14	6
Italy	28	20	17	22	9	4
Latvia	25	35	10	13	10	7
Poland	22	27	6	13	15	17
Slovak Republic	22	23	12	19	14	11
Sweden	18	30	11	19	13	8

Table 14. Estimated average consumption of beer, wine, spirits, alcopops and cider in cl 100% alcohol, on the last drinking occasion.

	Beer	Wine	Spirits	Alco- pops	Cider	Total	% beer	% wine	% spirits	% alco- pops	% cider
Boys											
France	..	0.7	3.4	..	..	..	..	..	..	..	..
Greece	2.4	1.5	3.4	1.4	..	8.7	28	17	39	16	..
Italy	3.1	1.7	2.6	..	..	7.4	42	23	35	..	..
Latvia	4.3	0.6	3.0	0.4	0.5	8.9	48	7	34	5	6
Poland	4.9	1.2	4.7	0.3	0.3	11.4	43	11	41	3	3
Slovak Rep.	3.4	1.5	4.2	..	..	9.1	37	16	46	..	..
Sweden	5.6	0.5	3.1	0.4	1.5	10.9	51	5	28	4	14
Girls											
France	..	0.4	1.9	..	..	..	..	..	..	..	..
Greece	1.0	1.0	2.3	1.1	..	5.4	19	19	43	20	..
Italy	1.3	0.8	1.7	..	..	3.8	34	21	45	..	..
Latvia	1.4	0.9	1.3	0.4	0.7	4.8	29	19	27	8	15
Poland	2.4	0.7	2.6	0.1	0.1	5.9	41	12	44	2	2
Slovak Rep.	0.8	1.2	2.2	..	..	4.3	19	28	52	..	..
Sweden	1.7	1.1	2.4	0.6	2.5	8.3	20	13	29	7	30
All students											
France	..	0.5	2.6	..	..	..	..	..	..	..	..
Greece	1.7	1.3	2.8	1.2	..	7.1	24	18	39	17	..
Italy	2.1	1.3	2.1	..	..	5.5	38	24	38	..	..
Latvia	2.8	0.8	2.1	0.4	0.6	6.7	42	12	31	6	9
Poland	3.6	1.0	3.6	0.3	0.3	8.8	41	11	41	3	3
Slovak Rep.	1.9	1.3	3.1	..	..	6.3	30	21	49	..	..
Sweden	3.5	0.8	2.7	0.5	2.0	9.6	36	8	28	5	20

Table 15. Lifetime frequency of being drunk.

	Number of occasions in lifetime							No answer %
	0	1–2	3–5	6–9	10–19	20–39	40+	
Boys								
France	33	21	13	8	10	7	8	2
Greece	27	31	16	9	6	5	6	1
Italy	28	21	15	9	10	6	11	2
Latvia	12	18	13	10	13	11	23	1
Poland	15	16	15	11	14	9	21	1
Slovak Republic	12	13	12	10	13	15	27	1
Sweden	13	8	6	7	12	17	37	1
Girls								
France	44	28	14	7	4	2	2	2
Greece	33	35	16	7	5	2	2	1
Italy	39	26	14	7	7	4	3	1
Latvia	23	26	16	13	9	7	8	1
Poland	29	27	18	9	7	5	5	1
Slovak Republic	22	23	18	12	11	8	7	1
Sweden	14	8	8	10	16	17	27	1
All students								
France	39	24	13	7	7	5	5	2
Greece	30	33	16	8	5	4	4	1
Italy	34	24	15	8	8	5	7	1
Latvia	18	22	15	11	11	9	15	1
Poland	22	21	16	10	11	7	13	1
Slovak Republic	18	18	15	11	12	11	16	1
Sweden	14	8	7	8	14	17	32	1

Table 16. Frequency of being drunk last 12 months.

	Number of occasions in last 12 months						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	46	23	12	7	7	3	3	5
Greece	44	32	10	7	3	2	2	2
Italy	40	26	12	8	7	4	4	3
Latvia	23	27	15	11	9	7	7	3
Poland	26	27	15	10	10	5	6	3
Slovak Republic	20	22	14	12	15	8	10	3
Sweden	19	12	13	13	20	14	10	4
Girls								
France	61	26	6	4	2	1	0	5
Greece	55	31	7	4	2	1	0	2
Italy	57	24	9	5	3	1	1	3
Latvia	42	27	14	9	5	2	1	3
Poland	47	30	12	5	5	2	1	2
Slovak Republic	37	27	15	9	8	2	2	3
Sweden	18	14	15	17	18	13	5	3
All students								
France	54	25	9	5	4	2	2	5
Greece	49	32	8	6	2	2	1	2
Italy	49	25	10	6	5	3	2	3
Latvia	33	27	15	10	7	4	4	3
Poland	36	28	14	8	7	3	4	2
Slovak Republic	30	25	14	10	11	5	6	3
Sweden	18	13	14	15	19	13	7	3

Table 17. Frequency of being drunk last 30 days.

	Number of occasions in last 30 days						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	68	21	7	2	1	0	0	6
Greece	75	18	4	2	1	1	0	2
Italy	64	20	7	4	3	1	1	3
Latvia	52	28	10	7	2	0	0	3
Poland	52	26	13	5	3	1	1	3
Slovak Republic	47	29	13	7	3	1	1	3
Sweden	37	35	20	6	2	0	0	4
Girls								
France	86	11	2	0	0	0	0	5
Greece	80	16	2	2	1	0	0	2
Italy	79	15	4	1	0	0	0	3
Latvia	69	24	5	2	0	0	0	3
Poland	74	20	4	1	1	0	0	2
Slovak Republic	68	24	6	2	1	0	0	2
Sweden	41	39	16	4	1	0	–	4
All students								
France	77	16	5	1	1	0	0	5
Greece	77	17	3	2	1	0	0	2
Italy	72	17	6	3	1	1	1	3
Latvia	61	26	8	4	1	0	0	3
Poland	63	23	9	3	2	1	0	3
Slovak Republic	59	26	9	4	2	0	0	3
Sweden	39	37	18	5	1	0	0	4

Table 18. ESPAD drunkenness scale. Entries are percentages.

	Never been drunk	1	2	3	4	5	6	7	8	9	10
Boys											
France	29	5	6	7	6	10	6	11	9	5	6
Greece	26	6	5	10	8	9	11	8	9	4	4
Italy	21	7	4	7	7	8	9	11	11	7	7
Latvia	7	19	15	12	10	10	9	8	5	3	3
Poland	11	5	4	6	9	12	13	13	13	6	8
Slovak Republic	10	6	6	11	10	13	10	13	10	5	8
Sweden	12	4	3	6	9	14	18	17	10	4	3
Girls											
France	40	10	9	8	7	8	5	6	4	2	3
Greece	34	7	7	9	9	12	6	5	4	2	5
Italy	32	13	6	7	6	8	6	7	6	4	5
Latvia	11	38	17	10	6	7	4	3	2	2	1
Poland	25	9	7	12	11	10	8	7	5	3	3
Slovak Republic	19	14	11	11	11	12	7	6	6	3	3
Sweden	12	5	5	10	12	15	15	14	8	3	2
All students											
France	35	8	7	7	6	9	5	8	6	3	5
Greece	30	6	6	10	8	10	9	7	7	3	5
Italy	27	10	5	7	6	8	8	9	9	5	6
Latvia	9	29	16	11	8	8	6	5	3	2	2
Poland	18	7	5	9	10	11	10	10	9	5	6
Slovak Republic	15	10	9	11	11	12	8	9	7	4	5
Sweden	12	5	4	8	11	14	16	16	9	3	2

Table 19. Drinks needed to get drunk. Entries are percentages.

	Never drink alcohol	Never been drunk	1–2 drinks	3–4 drinks	5–6 drinks	7–8 drinks	9–10 drinks	11–12 drinks	13+ drinks
Boys									
France	..	31	1	8	19	16	12	6	8
Greece	3	18	3	13	25	17	10	6	6
Italy	8	16	4	13	22	15	12	4	7
Latvia	4	8	5	19	26	15	13	7	5
Poland	5	9	3	11	25	22	13	6	7
Slovak Republic	4	8	4	14	27	21	13	6	5
Sweden	8	6	3	26	29	16	8	3	2
Girls									
France	..	42	5	20	18	9	4	1	0
Greece	4	25	8	25	21	10	4	1	2
Italy	12	25	9	22	19	8	3	1	1
Latvia	4	19	13	26	23	9	3	1	2
Poland	5	22	10	28	21	9	3	1	2
Slovak Republic	4	19	10	31	24	9	2	1	1
Sweden	8	7	10	45	23	6	2	1	0
All students									
France	..	36	3	14	19	12	8	3	4
Greece	3	21	5	19	23	14	7	4	4
Italy	10	21	7	18	20	11	7	2	4
Latvia	4	14	9	23	24	12	8	4	3
Poland	5	16	6	19	23	15	8	4	4
Slovak Republic	4	14	7	24	25	14	7	3	2
Sweden	8	6	7	36	26	11	4	2	1

Table 20. Frequency of drinking five or more drinks in a row.

	Number of occasions in last 30 days				
	0	1–2	3–5	6–9	10+
Boys					
France	51	25	15	5	5
Greece	45	30	13	6	5
Italy	45	28	14	5	7
Latvia	35	34	18	7	7
Poland	39	29	17	7	8
Slovak Republic	36	30	19	7	8
Sweden	40	31	15	6	9
Girls					
France	76	16	7	1	1
Greece	59	27	9	3	2
Italy	67	20	9	2	2
Latvia	55	32	9	3	2
Poland	59	27	10	3	2
Slovak Republic	61	26	9	2	2
Sweden	44	34	13	4	5
All students					
France	64	20	11	3	3
Greece	52	29	11	5	4
Italy	57	24	11	3	4
Latvia	45	33	13	5	4
Poland	49	28	13	5	5
Slovak Republic	51	28	13	4	4
Sweden	42	33	14	5	7

Table 21. Frequency of lifetime use of any illicit drug. Percentages among boys, girls and all students.

	Number of occasions in lifetime						
	0	1–2	3–5	6–9	10–19	20–39	40+
Boys							
France	34	11	6	5	6	7	31
Greece	78	7	4	2	2	2	5
Italy	50	10	6	4	6	6	18
Latvia	66	14	7	4	4	2	5
Poland	52	11	8	6	6	5	12
Slovak Republic	51	14	7	6	6	4	13
Sweden	84	8	4	2	2	1	1
Girls							
France	48	13	8	6	8	6	11
Greece	90	4	2	1	1	1	2
Italy	62	9	6	4	5	5	9
Latvia	80	9	4	3	2	2	1
Poland	74	8	6	5	4	2	3
Slovak Republic	68	11	6	4	4	2	4
Sweden	86	6	2	2	1	1	1
All students							
France	42	12	7	5	7	6	21
Greece	84	5	3	2	1	2	4
Italy	57	9	6	4	6	5	13
Latvia	73	11	5	3	3	2	3
Poland	63	9	7	6	5	3	8
Slovak Republic	61	12	7	5	5	3	8
Sweden	85	7	3	2	1	1	1

Table 22. Frequency of lifetime use of marijuana or hashish. Percentages among boys, girls and all students.

	Number of occasions used in lifetime						No answer %	
	0	1–2	3–5	6–9	10–19	20–39		40+
Boys								
France	34	11	7	4	6	7	31	2
Greece	78	8	3	2	2	2	4	0
Italy	51	11	6	4	6	6	17	2
Latvia	67	14	7	3	3	1	5	0
Poland	53	13	8	6	5	5	11	1
Slovak Republic	51	15	8	5	6	4	12	1
Sweden	84	8	3	1	2	0	1	1
Girls								
France	48	13	8	6	7	6	11	1
Greece	90	4	1	1	1	1	2	0
Italy	62	9	6	4	5	5	8	2
Latvia	81	10	4	2	1	2	1	0
Poland	75	9	7	3	3	1	2	0
Slovak Republic	69	12	7	4	4	2	3	0
Sweden	87	6	2	2	1	1	1	1
All students								
France	41	12	7	5	7	7	21	1
Greece	84	6	3	2	1	2	3	0
Italy	57	10	6	4	6	5	12	2
Latvia	74	12	6	2	2	2	2	0
Poland	64	11	7	5	4	3	6	1
Slovak Republic	61	13	7	4	5	3	7	1
Sweden	86	7	3	2	1	1	1	1

Table 23. Frequency of use of marijuana or hashish during the last 12 months and the last 30 days. Percentages among boys, girls and all students.

	Number of occasions									
	Last 12 months					Last 30 days				
	0	1–2	3–5	6–9	10+	0	1–2	3–5	6+	
Boys										
France	46	9	6	6	33	57	11	6	26	
Greece	83	7	3	2	6	89	5	3	4	
Italy	58	11	5	5	21	70	10	5	16	
Latvia	79	10	4	2	5	90	5	2	3	
Poland	65	11	8	4	12	80	9	4	8	
Slovak Republic	65	12	6	4	14	81	8	3	9	
Sweden	91	5	2	1	1	97	3	0	1	
Girls										
France	61	11	8	6	14	79	8	4	9	
Greece	94	2	1	1	2	97	1	1	1	
Italy	70	9	6	4	11	81	8	3	8	
Latvia	90	7	2	1	1	97	3	0	0	
Poland	84	9	4	2	2	94	4	1	1	
Slovak Republic	80	10	4	2	5	93	5	1	2	
Sweden	93	4	2	1	1	98	2	0	0	
All students										
France	54	10	7	6	23	69	10	5	17	
Greece	89	4	2	1	4	93	3	2	3	
Italy	65	10	6	5	16	76	9	4	11	
Latvia	85	8	3	1	3	94	4	1	1	
Poland	74	10	6	3	7	87	7	2	4	
Slovak Republic	73	10	5	3	9	88	6	2	5	
Sweden	92	4	2	1	1	97	2	0	1	

Table 24. Frequency of lifetime use of any illicit drug other than marijuana or hashish ^{a)}. Percentages among boys, girls and all students.

	Number of occasions in lifetime						
	0	1–2	3–5	6–9	10–19	20–39	40+
Boys							
France	90	4	2	1	1	0	2
Greece	94	2	1	0	1	1	1
Italy	86	5	3	2	2	1	2
Latvia	89	5	2	2	1	1	1
Poland	80	6	3	2	3	2	4
Slovak Republic	89	4	2	2	1	1	2
Sweden	96	2	1	0	0	0	0
Girls							
France	94	3	1	1	1	0	0
Greece	97	1	0	1	1	0	0
Italy	92	3	2	1	1	0	1
Latvia	93	3	2	1	0	0	0
Poland	87	5	3	2	1	1	1
Slovak Republic	91	4	2	1	1	1	1
Sweden	96	1	1	0	1	0	0
All students							
France	92	4	2	1	1	0	1
Greece	95	2	1	1	1	1	1
Italy	89	4	2	1	1	1	2
Latvia	91	4	2	2	1	1	1
Poland	84	5	3	2	2	2	3
Slovak Republic	90	3	2	1	1	1	1
Sweden	96	2	1	0	1	0	0

a) Including: Amphetamines, LSD or other hallucinogens, crack, cocaine, heroin and ecstasy.

Table 25. Frequency of illicit drug use other than marijuana or hashish ^{a)}. Lifetime, last 12 months and last 30 days.

	Lifetime			Last 12 months			Last 30 days		
	Boys	Girls	All students	Boys	Girls	All students	Boys	Girls	All students
France	10	6	8	..	..	..	..	..	..
Greece	6	3	5	5	3	4	3	1	2
Italy	14	9	11	11	6	8	6	3	5
Latvia	11	7	9	6	3	5	2	1	2
Poland	20	13	16	..	..	..	..	..	..
Slovak Republic	11	9	10	7	6	7	3	2	2
Sweden	4	4	4	2	1	2	1	0	1

a) Including: Amphetamines, LSD or other hallucinogens, crack, cocaine, heroin and ecstasy.

Table 26. Lifetime experience of different illicit drugs. Percentages among boys, girls and all students.

	Amphetamines	LSD or other hallucinogens	Crack	Cocaine	Heroin	Ecstasy	Magic mushrooms	GHB	Any drug by injection
Boys									
France	3	2	3	3	2	7	11	1	1
Greece	1	3	2	3	2	4	2	0	1
Italy	5	5	3	10	4	6	5	2	2
Latvia	7	4	1	2	1	6	2	0	1
Poland	18	7	2	3	3	8	7	1	1
Slovak Republic	5	6	1	2	2	8	6	1	1
Sweden	2	1	1	1	1	2	1	1	1
Girls									
France	2	1	1	2	1	3	3	0	0
Greece	1	2	1	2	1	2	1	0	1
Italy	2	3	2	5	3	3	3	1	1
Latvia	4	1	0	1	1	3	1	0	0
Poland	12	1	0	1	2	3	2	0	0
Slovak Republic	4	2	0	2	1	6	2	0	1
Sweden	2	1	1	1	0	2	1	1	0
All students									
France	2	2	2	2	1	5	7	0	1
Greece	1	3	1	3	1	3	1	0	1
Italy	3	4	2	7	3	4	4	1	1
Latvia	6	2	0	1	1	4	1	0	1
Poland	15	4	1	2	2	5	5	1	1
Slovak Republic	5	4	1	2	1	7	4	1	1
Sweden	2	1	1	1	1	2	1	1	0

Table 27. 12 months prevalence of different illicit drug use. Percentages among boys, girls and all students.

	Amphetamines	LSD or other hallucinogens	Crack	Cocaine	Heroin	Ecstasy	Magic mushrooms	GHB	Any drug by injection
Boys									
France	..	..	..	..	..	..	..	..	..
Greece	0	3	1	2	2	3	1	0	1
Italy	3	3	2	8	3	5	4	2	1
Latvia	4	2	0	1	1	3	1	0	1
Poland	4	2	0	1	0	2	2	0	0
Slovak Republic	3	2	1	1	1	4	2	1	0
Sweden	1	1	1	0	0	1	1	0	0
Girls									
France	..	..	..	..	..	..	..	..	..
Greece	1	1	0	1	1	1	1	0	1
Italy	1	2	1	4	2	2	2	1	1
Latvia	2	0	0	1	0	1	0	0	0
Poland	4	0	0	0	0	1	1	0	0
Slovak Republic	3	1	0	1	0	3	1	0	0
Sweden	1	0	0	1	0	1	0	0	0
All students									
France	..	..	..	..	..	..	..	..	..
Greece	1	2	1	1	1	2	1	0	1
Italy	2	2	2	6	3	3	3	1	1
Latvia	3	1	0	1	0	2	0	0	0
Poland	4	1	0	1	0	1	2	0	0
Slovak Republic	3	2	0	1	0	4	1	0	0
Sweden	1	1	0	0	0	1	0	0	0

Table 28. 30 days prevalence of different illicit drug use. Percentages among boys, girls and all students.

	Amphetamines	LSD or other hallucinogens	Crack	Cocaine	Heroin	Ecstasy	Magic mushrooms	GHB	Any drug by injection
Boys									
France	..	..	..	..	..	..	..	..	..
Greece	0	1	0	1	1	2	0	0	0
Italy	2	2	2	4	2	3	2	1	1
Latvia	1	0	0	0	0	1	0	0	0
Poland	6	1	1	1	0	3	1	0	0
Slovak Republic	2	1	0	0	0	1	0	0	0
Sweden	0	0	0	0	0	0	0	0	0
Girls									
France	..	..	..	..	..	..	..	..	..
Greece	0	0	0	0	0	0	0	0	0
Italy	1	1	1	2	1	1	1	0	0
Latvia	1	0	0	0	0	0	0	0	0
Poland	3	0	0	0	0	1	0	0	0
Slovak Republic	1	1	0	0	0	1	0	0	0
Sweden	0	0	–	0	0	0	–	0	–
All students									
France	..	..	..	..	..	..	..	..	..
Greece	0	1	0	1	1	1	0	0	0
Italy	1	1	1	3	2	2	1	1	1
Latvia	1	0	0	0	0	1	0	0	0
Poland	5	1	0	1	0	2	1	0	0
Slovak Republic	1	1	0	0	0	1	0	0	0
Sweden	0	0	0	0	0	0	0	0	0

Table 29. Lifetime use of tranquillisers or sedatives; anabolic steroids; alcohol together with pills; alcohol together with cannabis. Percentages among boys, girls and all students.

	Tranquillisers or sedatives by prescription	Tranquillisers or sedatives without prescription	Anabolic steroids	Alcohol together with pills	Alcohol and cannabis at same time
Boys					
France	17	11	2	13	49
Greece	3	4	2	5	14
Italy	8	5	3	5	35
Latvia	10	5	2	7	18
Poland	9	13	7	13	32
Slovak Republic	13	8	3	20	36
Sweden	7	5	1	8	12
Girls					
France	23	17	0	16	32
Greece	4	5	1	5	5
Italy	10	8	1	3	26
Latvia	19	4	1	8	8
Poland	19	27	0	17	15
Slovak Republic	14	6	0	24	22
Sweden	8	8	0	18	10
All students					
France	20	14	1	15	40
Greece	4	4	1	5	10
Italy	9	7	2	4	30
Latvia	15	5	1	8	13
Poland	14	20	4	15	24
Slovak Republic	14	5	2	22	28
Sweden	7	7	0	14	11

Table 30. Frequency of use of inhalants during the lifetime, the last 12 months and the last 30 days. Percentages among boys, girls and all students.

	Number of occasions							
	Lifetime					Last 12 months		Last 30 days
	0	1–2	3–5	6–9	10+	1–2	3+	1+
Boys								
France	83	10	3	1	3	4	3	3
Greece	86	8	1	2	4	3	4	4
Italy	90	5	2	1	2	3	4	3
Latvia	94	5	1	1	1	1	1	1
Poland	92	6	1	1	1	1	1	1
Slovak Republic	88	6	2	2	2	2	1	2
Sweden	95	3	1	1	1	1	1	1
Girls								
France	90	7	2	1	1	2	1	1
Greece	88	6	2	1	3	3	3	3
Italy	94	3	1	1	1	2	2	2
Latvia	96	3	1	0	0	1	0	0
Poland	96	3	1	0	0	1	0	1
Slovak Republic	94	4	1	1	1	2	1	1
Sweden	96	3	1	0	0	1	0	0
All students								
France	87	8	2	1	2	3	2	2
Greece	87	7	2	1	4	3	3	3
Italy	92	4	2	1	2	3	3	2
Latvia	95	4	1	0	1	1	1	1
Poland	94	4	1	0	1	1	1	1
Slovak Republic	92	5	1	1	1	2	1	1
Sweden	95	3	1	0	1	1	0	1

Table 31. Lifetime abstinence from various substances.

	Cigar- ettes	Alcohol	Illicit drugs ^{a)}	Tranquil- lisers or sedatives	Inha- lants	b)	c)	d)	e)
Boys									
France	22	7	34	89	83	6	5	5	5
Greece	28	1	78	96	86	1	1	1	1
Italy	29	5	50	95	90	4	4	3	3
Latvia	13	2	66	96	94	2	2	2	2
Poland	21	3	52	86	92	2	2	2	2
Slovak Republic	17	1	51	95	88	1	1	1	1
Sweden	28	5	84	95	95	5	4	4	4
Girls									
France	19	9	48	83	90	5	5	5	5
Greece	28	2	90	95	88	2	2	2	2
Italy	25	6	62	92	94	4	4	4	4
Latvia	22	2	80	95	96	2	2	2	2
Poland	26	3	74	74	96	3	3	2	2
Slovak Republic	22	2	68	95	94	1	1	1	1
Sweden	27	4	86	92	96	4	4	4	4
All students									
France	20	9	41	86	87	5	5	5	5
Greece	28	2	84	96	87	1	1	1	1
Italy	27	6	57	93	92	4	4	4	4
Latvia	18	2	73	95	95	2	2	2	2
Poland	23	3	63	80	94	3	3	2	2
Slovak Republic	20	2	61	95	92	1	1	1	1
Sweden	27	5	85	93	95	4	4	4	4

a) Illicit drugs include marijuana or hashish, LSD, amphetamines, crack, cocaine, heroin and ecstasy.

b) Cigarettes and alcohol.

c) Cigarettes and alcohol and illicit drugs.

d) Cigarettes and alcohol and illicit drugs and tranquillisers or sedatives.

e) Cigarettes and alcohol and illicit drugs and tranquillisers or sedatives and inhalants.

Table 32. Drinking places on the last drinking day. Percentages among boys, girls and all students.

	At home	At someone else's home	Street, park, beach	Bar, pub	Disco	Restaurant	Other place(s)	Never been drinking
Boys								
France	19	30	11	15	9	4	9	12
Greece	18	15	6	31	32	6	32	2
Italy	17	17	11	50	17	13	7	7
Latvia	19	29	32	21	15	2	8	5
Poland	18	30	36	33	26	5	16	4
Slovak Republic	14	14	7	47	22	7	14	3
Sweden	18	53	7	16	7	3	8	7
Girls								
France	24	29	4	11	13	5	5	14
Greece	17	14	3	28	41	8	29	4
Italy	16	14	8	46	16	13	5	10
Latvia	27	28	21	20	19	3	8	5
Poland	24	31	18	27	25	4	16	4
Slovak Republic	23	19	3	34	29	8	11	3
Sweden	16	58	3	18	7	3	7	7
All students								
France	21	29	7	13	11	5	7	13
Greece	17	14	4	29	37	7	30	3
Italy	17	15	9	48	17	13	6	9
Latvia	23	29	26	20	17	3	8	5
Poland	21	31	27	30	25	5	16	4
Slovak Republic	19	17	5	40	26	8	12	3
Sweden	17	55	5	17	7	3	7	7

Table 33. Expected personal consequences of alcohol consumption. Percentages among boys, girls and all students answering “Very likely” or “Likely”.

	“Positive” consequences						“Negative” consequences						
	Feel relaxed	Feel happy	Feel more friendly and outgoing	Have a lot of fun	Forget my problems	Average	Feel sick	Get a hang-over	Not be able to stop drinking	Harm my health	Do something I would regret	Get into trouble with the police	Average
Boys													
France	..	..	..	..	..	..	..	..	..	..	..	..	..
Greece	60	64	69	75	43	62	24	53	13	31	33	9	27
Italy	38	53	57	61	45	51	43	57	12	53	37	18	37
Latvia	74	43	63	85	52	63	31	51	12	60	41	20	36
Poland	66	44	65	71	48	59	22	53	11	32	25	14	26
Slovak Rep.	72	39	70	73	48	60	9	45	11	33	25	9	22
Sweden	75	86	74	85	51	74	19	46	11	27	33	5	24
Girls													
France	..	..	..	..	..	..	..	..	..	..	..	..	..
Greece	61	68	74	79	41	65	33	63	15	37	36	3	31
Italy	35	55	55	55	46	49	52	66	12	53	41	13	40
Latvia	78	37	57	81	45	60	32	40	8	55	37	10	30
Poland	58	37	56	65	41	51	32	47	7	41	27	8	27
Slovak Rep.	69	36	66	67	40	56	13	45	8	37	32	6	24
Sweden	73	88	77	87	50	75	31	50	10	33	36	2	27
All students													
France	..	..	..	..	..	..	..	..	..	..	..	..	..
Greece	60	66	72	77	42	63	28	58	14	34	34	6	29
Italy	36	54	56	58	45	50	48	62	12	53	39	16	38
Latvia	76	40	60	83	48	61	32	45	10	57	39	15	33
Poland	62	40	61	68	46	55	27	50	9	36	26	11	27
Slovak Rep.	70	37	68	69	43	57	11	45	9	35	29	8	23
Sweden	74	87	76	86	51	75	26	48	11	30	35	4	26

Table 34. Experienced problems caused by own alcohol use.

	Individual problems						Relationship problems				
	Performed poorly at school or work	Damage to objects or clothing	Loss of money or other valuable items	Accident or injury	Hospitalised or admitted to an emergency room	Average	Quarrel or argument	Problems in relationships with friends	Problems in relationships with parents	Problems in relationships with teachers	Average
Boys											
France	1	14	6	6	2	6	13	6	6	1	7
Greece	2	5	5	4	3	4	5	2	3	0	3
Italy	2	13	5	5	3	6	9	5	3	1	4
Latvia	6	27	18	13	4	14	25	11	18	5	15
Poland	7	20	10	14	2	11	25	12	19	4	15
Slovak Rep.	11	30	16	15	2	15	25	9	14	3	13
Sweden	5	36	23	15	4	17	26	7	6	1	10
Girls											
France	1	6	4	4	0	3	9	3	2	1	4
Greece	1	2	2	2	1	2	2	1	2	0	1
Italy	1	9	4	3	1	4	6	3	3	1	3
Latvia	3	19	10	8	1	8	12	6	10	2	8
Poland	3	8	6	7	1	5	15	7	10	1	8
Slovak Rep.	7	16	10	9	1	9	13	6	7	1	7
Sweden	4	36	26	26	3	19	28	8	7	1	11
All students											
France	1	10	5	4	1	4	11	4	4	1	5
Greece	1	3	4	3	2	3	4	2	3	0	2
Italy	2	11	4	4	2	5	8	4	3	1	4
Latvia	4	23	14	10	2	11	18	8	14	4	11
Poland	5	14	8	10	2	8	20	9	14	3	12
Slovak Rep.	8	22	13	11	2	11	18	7	10	1	9
Sweden	4	36	25	14	4	17	27	7	7	1	11

Continues.

Continued. Table 34. Experienced problems caused by own alcohol use.

	Sexual problems			Delinquency problems			
	Engaged in sex you regretted the next day	Engaged in unprotected sex	Average	Scuffle or fight	Victimized by robbery or theft	Trouble with police	Average
Boys							
France	6	4	5	10	1	3	4
Greece	6	4	5	4	1	2	2
Italy	6	3	5	8	1	2	3
Latvia	11	9	10	24	4	12	13
Poland	7	8	8	21	5	11	12
Slovak Republic	8	9	9	20	2	5	9
Sweden	14	14	14	23	4	7	11
Girls							
France	4	2	3	2	0	1	1
Greece	2	1	2	1	0	0	0
Italy	4	2	3	2	1	1	1
Latvia	9	7	8	6	2	4	4
Poland	4	4	4	6	2	3	4
Slovak Republic	7	6	7	3	2	2	2
Sweden	18	16	17	14	6	4	8
All students							
France	5	3	4	6	1	2	3
Greece	4	3	4	2	1	1	1
Italy	5	3	4	5	1	2	3
Latvia	10	8	9	15	3	8	9
Poland	6	6	6	13	4	7	8
Slovak Republic	7	7	7	10	2	3	5
Sweden	17	15	16	18	5	5	9

Table 35. Experienced problems caused by own drug use.

	Individual problems						Relationship problems				
	Performed poorly at school or work	Damage to objects or clothing	Loss of money or other valuable items	Accident or injury	Hospitalised or admitted to an emergency room	Average	Quarrel or argument	Problems in relationships with friends	Problems in relationships with parents	Problems in relationships with teachers	Average
Boys											
France	8	9	7	2	1	5	8	5	10	3	7
Greece	1	1	1	0	0	1	1	1	1	0	1
Italy	5	5	3	1	1	3	4	4	3	2	3
Latvia	1	1	0	1	0	1	1	1	1	0	1
Poland	7	3	3	1	1	3	7	3	4	3	4
Slovak Rep.	5	1	1	1	0	2	2	2	3	1	2
Sweden	1	0	0	0	0	0	1	1	1	0	1
Girls											
France	4	5	2	2	1	3	5	3	4	1	3
Greece	1	0	0	1	0	0	1	1	1	0	1
Italy	3	3	2	1	1	2	3	3	3	1	3
Latvia	0	0	0	1	0	0	1	1	0	0	1
Poland	3	1	1	0	1	1	4	2	2	1	2
Slovak Rep.	2	1	1	0	0	1	1	1	1	0	1
Sweden	1	1	1	1	0	1	1	1	1	0	1
All students											
France	6	7	5	2	1	4	6	4	7	2	5
Greece	1	1	0	1	0	1	1	1	1	0	1
Italy	4	4	2	1	1	2	4	3	3	1	3
Latvia	0	0	0	1	0	0	1	1	0	0	1
Poland	5	2	2	1	1	2	5	3	3	2	3
Slovak Rep.	3	1	1	1	0	1	2	2	2	0	2
Sweden	1	1	0	1	0	1	1	1	1	0	1

Continues.

Continued. Table 35. Experienced problems caused by own drug use.

	Sexual problems			Delinquency problems			
	Engaged in sex you regretted the next day	Engaged in unprotected sex	Average	Scuffle or fight	Victimized by robbery or theft	Trouble with police	Average
Boys							
France	2	2	2	3	1	8	4
Greece	1	1	1	1	1	1	1
Italy	2	2	2	2	1	3	2
Latvia	1	1	1	1	1	1	1
Poland	4	2	3	2	1	3	2
Slovak Republic	0	0	0	0	0	1	0
Sweden	0	0	0	0	0	0	0
Girls							
France	2	1	2	1	1	2	1
Greece	1	0	1	0	0	1	0
Italy	1	1	1	1	1	2	1
Latvia	0	0	0	0	0	0	0
Poland	2	0	1	0	0	1	0
Slovak Republic	0	0	0	0	0	0	0
Sweden	1	1	1	0	0	0	0
All students							
France	2	1	2	2	1	5	3
Greece	1	0	1	1	1	1	1
Italy	1	1	1	1	1	2	1
Latvia	1	1	1	0	0	0	0
Poland	3	1	2	1	1	2	1
Slovak Republic	0	0	0	0	0	1	0
Sweden	0	0	0	0	0	0	0

Table 36. Perceived risk of substance use. Percentages among boys, girls and all students answering "Great risk".

	One or more packs of cigarettes per day	Five+ drinks each week-end	Marijuana or hashish		LSD		Amphetamines	
			Once or twice	Regularly	Once or twice	Regularly	Once or twice	Regularly
Boys								
France	82	37	11	45	52	77	49	78
Greece	57	35	36	78	47	68	28	52
Italy	73	37	18	58	40	68	38	65
Latvia	63	38	31	70	42	66	39	66
Poland	73	34	34	70	53	80	49	82
Slovak Republic	65	34	19	53	26	65	25	59
Sweden	73	43	22	79	33	82	36	82
Girls								
France	84	52	17	64	50	77	48	78
Greece	66	42	33	84	47	67	26	53
Italy	74	41	18	64	37	70	35	71
Latvia	71	49	43	86	43	75	42	77
Poland	82	49	42	88	54	90	51	93
Slovak Republic	72	46	27	75	25	73	23	70
Sweden	79	50	26	88	37	87	39	90
All students								
France	83	45	14	55	51	80	49	81
Greece	61	38	34	81	47	68	27	53
Italy	73	39	18	61	39	69	36	68
Latvia	67	44	38	79	43	71	40	72
Poland	77	42	38	79	53	85	50	88
Slovak Republic	69	41	23	66	25	69	24	66
Sweden	76	47	24	84	35	85	38	86

Continues.

Continued. Table 36. Perceived risk of substance use. Percentages among boys, girls and all students answering "Great risk".

	Cocaine or crack		Ecstasy		GHB		Drugs by injection		Inhalants	
	Once or twice	Reg-ularly	Once or twice	Reg-ularly	Once or twice	Reg-ularly	Once or twice	Reg-ularly	Once or twice	Reg-ularly
Boys										
France	..	..	53	84	53	74	79	91	46	77
Greece	43	79	34	71	31	51	55	78	31	66
Italy	46	73	50	74	47	65	67	76	42	64
Latvia	56	74	36	63	38	53	68	78	42	65
Poland	61	84	53	78	54	70	75	85	60	80
Slovak Republic	43	69	21	55	23	46	55	73	28	70
Sweden	41	82	35	81	39	74	54	84	29	75
Girls										
France	..	..	55	90	51	78	82	95	48	83
Greece	39	81	34	77	27	50	52	82	29	70
Italy	44	78	50	80	46	70	72	84	41	69
Latvia	62	86	41	73	39	64	77	89	44	77
Poland	59	93	54	89	55	84	77	95	57	89
Slovak Republic	41	81	21	68	23	56	55	84	22	79
Sweden	42	90	40	89	40	82	57	92	27	79
All students										
France	..	..	54	87	52	76	80	93	47	81
Greece	41	80	34	74	29	50	53	80	30	67
Italy	45	76	50	77	47	68	70	81	42	66
Latvia	59	81	38	68	39	59	73	84	43	71
Poland	60	88	53	84	55	77	76	90	58	84
Slovak Republic	42	76	21	63	23	52	55	80	24	75
Sweden	42	86	37	85	39	78	55	88	28	77

Table 37. Perceived availability of substances. Percentages among boys, girls and all students answering "Very easy" or "Fairly easy".

	Beer	Wine	Spirits	Inhalants	Anabolic steroids	Marijuana or hashish	Ampheta- mines
Boys							
France	93	89	87	48	11	76	19
Greece	96	95	95	54	31	38	15
Italy	96	95	93	20	16	64	19
Latvia	94	92	82	30	15	41	24
Poland	98	95	95	57	51	62	46
Slovak Republic	97	97	94	56	27	67	18
Sweden	98	93	92	56	24	36	16
Girls							
France	86	82	77	39	5	57	12
Greece	97	96	94	50	18	26	9
Italy	96	95	91	16	8	56	15
Latvia	94	89	78	32	8	25	18
Poland	98	93	93	48	27	44	37
Slovak Republic	98	98	91	37	13	53	17
Sweden	98	94	90	54	17	39	18
All students							
France	89	86	82	43	8	66	15
Greece	97	96	95	52	25	33	12
Italy	96	95	92	18	11	59	17
Latvia	94	91	80	31	12	32	21
Poland	98	94	94	52	39	53	41
Slovak Republic	98	98	93	45	19	59	17
Sweden	98	93	91	55	20	38	17

Continues.

Continued. Table 37. Perceived availability of substances. Percentages among boys, girls and all students answering "Very easy" or "Fairly easy".

	LSD or other hallu- cinogens	Crack	Cocaine	Ecstasy	Heroin	Magic mush- rooms	GHB	Tranquil- lizers or sedatives
Boys								
France	15	15	16	25	13	30	7	36
Greece	18	15	17	25	17	11	9	43
Italy	18	14	24	27	16	17	9	25
Latvia	19	10	11	22	14	10	8	13
Poland	34	20	22	32	23	34	15	42
Slovak Republic	22	12	13	31	14	20	8	20
Sweden	18	13	13	21	13	14	14	29
Girls								
France	9	9	10	16	7	15	3	39
Greece	14	9	15	19	12	6	5	43
Italy	14	10	19	22	12	13	7	28
Latvia	14	7	8	16	10	7	6	13
Poland	27	16	21	26	21	24	15	50
Slovak Republic	17	8	12	27	10	13	6	21
Sweden	19	15	16	24	15	14	15	34
All students								
France	12	12	13	20	10	22	5	37
Greece	16	12	16	22	15	8	7	43
Italy	16	12	21	24	13	15	8	26
Latvia	16	8	9	19	12	9	7	13
Poland	30	18	21	29	22	29	15	46
Slovak Republic	19	10	12	29	12	16	7	21
Sweden	18	14	15	23	14	14	15	32

Table 38. Places where marijuana or hashish easily can be bought. Percentages among boys, girls and all students.

	Don't know of any such place	Street, park etc.	School	Disco, bar etc.	House of a dealer	Other places
Boys						
France	20	40	52	22	55	14
Greece	41	33	14	31	13	5
Italy	20	60	55	42	51	7
Latvia	45	24	6	25	32	9
Poland	32	35	36	43	33	8
Slovak Republic	25	32	30	48	19	14
Sweden	50	13	10	8	11	8
Girls						
France	30	28	38	25	43	11
Greece	45	30	12	39	16	4
Italy	23	54	49	39	44	4
Latvia	51	19	7	30	29	7
Poland	40	27	30	44	24	5
Slovak Republic	32	24	18	49	19	10
Sweden	47	13	10	9	12	11
All students						
France	25	34	45	24	49	12
Greece	43	31	13	35	15	5
Italy	22	57	52	40	47	5
Latvia	48	21	6	28	30	8
Poland	36	31	33	44	29	7
Slovak Republic	29	27	23	49	19	12
Sweden	48	13	10	9	11	9

Table 39. Perceived drug use among friends. Percentages among boys, girls and all students.

	Some, most or all friends					
	Smoke marijuana or hashish	Take LSD or other hallucinogens	Take amphetamines	Take tranquilizers or sedatives ^{a)}	Take cocaine or crack	Take ecstasy
Boys						
France	..	..	..	..	..	..
Greece	12	2	1	2	2	3
Italy	59	9	7	5	10	9
Latvia	20	4	7	3	2	5
Poland	24	4	8	3	2	5
Slovak Republic	29	3	4	2	2	6
Sweden	9	2	2	2	1	2
Girls						
France	..	..	..	..	..	..
Greece	12	2	1	3	2	3
Italy	58	9	6	7	9	9
Latvia	16	3	4	3	2	3
Poland	14	2	5	3	1	2
Slovak Republic	19	2	3	2	1	5
Sweden	11	2	1	3	1	3
All students						
France	..	..	..	..	..	..
Greece	12	2	1	3	2	3
Italy	58	9	6	6	10	9
Latvia	18	4	5	3	2	4
Poland	19	3	6	3	1	4
Slovak Republic	23	2	3	2	1	5
Sweden	11	2	1	3	1	3

a) Without a doctors prescription.

Continues.

Continued. Table 39. Perceived drug use among friends. Percentages among boys, girls and all students.

	Some, most or all friends					
	Take heroin	Take inhalants	Take magic mushrooms	Take GHB	Take alcohol together with pills	Take anabolic steroids
Boys						
France	..	..	..	..	..	..
Greece	2	4	1	1	3	2
Italy	5	5	8	4	9	4
Latvia	2	1	2	1	4	2
Poland	2	2	4	2	14	9
Slovak Republic	2	3	4	2	7	4
Sweden	1	1	1	1	3	2
Girls						
France	..	..	..	..	..	..
Greece	1	4	1	1	3	2
Italy	4	5	7	3	8	3
Latvia	2	2	1	1	5	1
Poland	2	1	2	1	7	3
Slovak Republic	1	2	2	1	8	1
Sweden	1	1	1	1	6	1
All students						
France	..	..	..	..	..	..
Greece	2	4	1	1	3	2
Italy	5	5	7	4	9	4
Latvia	2	2	2	1	5	2
Poland	2	2	3	1	11	6
Slovak Republic	1	2	3	1	8	2
Sweden	1	1	1	1	5	2

Table 40. Comparisons between students aged 15–16 and 17–18 respectively on the variables 30 days prevalence of smoking cigarettes, alcohol consumption and drunkenness, consumption in centilitres (cls) of pure alcohol on last drinking occasion, lifetime prevalence of illicit drug use and use of inhalants. Centilitres and percentages among boys, girls and all students.

Age	30 days smoking		30 days alcohol cons		30 days drunkenness		Cls last consumption		Lifetime illicit drugs		Lifetime inhalants	
	15–16	17–18	15–16	17–18	15–16	17–18	15–16	17–18	15–16	17–18	15–16	17–18
Boys												
France	31	46	61	74	17	32	..	..	43	66	12	17
Greece	27	50	78	88	15	25	7.1	8.7	8	22	17	14
Italy	35	48	70	83	23	36	5.9	7.0	33	50	8	10
Latvia	46	58	61	82	33	48	6.0	8.7	21	34	8	6
Poland	35	47	71	85	37	48	9.1	..	25	48	10	8
Slovak Rep.	39	51	66	79	36	53	6.4	9.0	32	49	10	12
Sweden	20	30	52	74	34	63	7.9	10.4	10	16	8	5
Girls												
France	36	45	54	61	12	14	..	..	34	52	10	10
Greece	30	47	72	76	17	20	4.6	5.4	5	10	13	12
Italy	40	46	58	70	16	21	3.3	3.6	24	38	5	6
Latvia	36	46	62	76	27	31	4.1	4.7	13	20	7	4
Poland	27	38	60	73	20	26	4.4	..	14	26	8	4
Slovak Rep.	36	43	59	69	27	32	3.6	4.2	22	32	7	6
Sweden	26	36	49	74	34	59	6.4	8.0	7	14	8	4
All students												
France	33	46	58	67	15	23	..	..	38	58	11	13
Greece	29	49	75	82	16	23	5.7	7.1	6	16	15	13
Italy	38	47	64	76	19	28	4.6	5.2	28	43	6	8
Latvia	40	52	61	79	30	39	5.0	6.6	19	27	7	5
Poland	31	43	65	79	28	37	6.9	9.3	18	37	9	6
Slovak Rep.	37	46	63	67	31	41	4.9	6.2	27	39	9	8
Sweden	23	33	51	74	34	61	7.4	9.1	8	15	8	5



STUDENT QUESTIONNAIRE

Before you start, please read this

This questionnaire is part of an international study on alcohol, drugs and tobacco use among students your age. The survey is performed this year in more than 30 European countries. The Swedish Council for Information on Alcohol and Other Drugs, CAN, SWEDEN initiated the project, and it is supported by the Pompidou Group at the Council of Europe. This is the third study. The first one was done in 1995 and the second in 1999.

In your country the survey is done by The results will be presented in a national report as well as in an international comparison of the results from all participating countries. The report will not include any results of single classes.

Your class has been randomly selected to take part in this study. You are one out of about 2.800 students in, participating in the study.

This is an anonymous questionnaire - it does not include your name or any other information, which would identify you individually. When you have finished the questionnaire, please put it in the enclosed envelope and seal it yourself. Do not write your name on that either. Your teacher/survey administrator will collect the envelopes after completion.

If the study is to be successful, it is important that you answer each question as thoughtfully and frankly as possible. Remember your answers are totally confidential.

The study is completely voluntary. If there is any question, which you would find objectionable for any reason, just leave it blank.

This is not a test. There are no right or wrong answers. If you do not find an answer that fits exactly, mark the one that comes closest. Please, mark the appropriate answer to each question by making an "X" in the box.

We hope you will find the questionnaire interesting. If you have a question, please raise your hand and your teacher/survey administrator will assist you.

Thank you in advance for your participation.

Please begin.

BEFORE BEGINNING BE SURE TO READ THE INSTRUCTIONS ON THE COVER.
Please mark your answer to each question by making an "X" in the appropriate box.

The first questions ask for some background information about yourself and the kinds of things you might do.

1. What is your sex?

- 1 Male
2 Female

2. When were you born?

Year 19

3. How often (if at all) do you do each of the following?

Mark one box for each line.

	Never	A few times a year	Once or twice a month	At least once a week	Almost every day
a) Ride around on a moped or motorcycle just for fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Play computer games.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Use the Internet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Actively participate in sports, athletics or exercising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Read books for enjoyment (do not count schoolbooks).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Go out in the evening (to a disco, cafe, party etc).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Other hobbies (play an instrument, sing, draw, write etc).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Play on slot machines (the kind in which you may win money)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

4. During the LAST 30 DAYS how many whole days of school have you missed?

Mark one box for each line.

	None	1 day	2 days	3-4 days	5-6 days	7 days or more
a) Because of illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Because you skipped or "cut"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) For other reasons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6

5. Which of the following best describes your average grade in the end of the last term?

- 1 A (93-100)
2 A- (90-92)
3 B+ (87-89)
4 B (83-86)
5 B- (80-82)
6 C+ (77-79)
7 C (73-76)
8 C- (70-72)

The next major section of this questionnaire deals with cigarettes, alcohol and various other drugs. There is a lot of talk these days about these subjects, but very little accurate information. Therefore, we still have a lot to learn about the actual experiences and attitudes of people your age.

We hope that you can answer all questions, but if you find one, which you feel you cannot answer honestly, we would prefer that you leave it blank.

Your answers will not be made known to anyone, they will never be connected with your name or your class.

The following questions are about CIGARETTE SMOKING.

6. On how many occasions (if any) during your lifetime have you smoked cigarettes?

Number of occasions						
0	1-2	3-5	6-9	10-19	20-39	40 or more
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	2	3	4	5	6	7

7. How frequently have you smoked cigarettes during the LAST 30 DAYS?

1 Not at all

2 Less than 1 cigarette per week

3 Less than 1 cigarette per day

4 1-5 cigarettes per day

5 6-10 cigarettes per day

6 11-20 cigarettes per day

7 More than 20 cigarettes per day

The next questions are about ALCOHOLIC BEVERAGES – including beer, wine and spirits.

8. On how many occasions (if any) have you had any alcoholic beverage to drink?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) In your lifetime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) During the last 12 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) During the last 30 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

9. Think back over the LAST 30 DAYS. On how many occasions (if any) have you had any of the following to drink?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) Beer (do not include low alcohol beer)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Wine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Spirits (whisky, cognac, shot drinks etc) (also include spirits mixed with soft drinks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

10. The last time you had an alcoholic drink, did you drink any beer/lager/stout? If so, how much? (Do not include low alcohol beer).

- 1 I never drink beer
- 2 I did not drink beer on my last drinking occasion
- 3 Less than a regular bottle or can (<50 cl)
- 4 1-2 regular bottles or cans (50-100 cl)
- 5 3-4 regular bottles or cans (101-200 cl)
- 6 5 or more regular bottles or cans (>200 cl)

11. The last time you had an alcoholic drink, did you drink any cider? If so, how much? (Do not include low alcohol cider).

- 1 I never drink cider
- 2 I did not drink cider on my last drinking occasion
- 3 Less than a regular bottle or can (<50 cl)
- 4 1-2 regular bottles or cans (50-100 cl)
- 5 3-4 regular bottles or cans (101-200 cl)
- 6 5 or more regular bottles or cans (>200 cl)

12. The last time you had an alcoholic drink, did you drink any alcopop? If so, how much?

- 1 I never drink alcopops
- 2 I did not drink alcopops on my last drinking occasion
- 3 Less than a regular bottle or can (<50 cl)
- 4 1-2 regular bottles or cans (50-100 cl)
- 5 3-4 regular bottles or cans (101-200 cl)
- 6 5 or more regular bottles or cans (>200 cl)

13. The last time you had an alcoholic drink, did you drink any wine? If so, how much?

- 1 I never drink wine
- 2 I did not drink wine on my last drinking occasion
- 3 Less than a glass (<15 cl)
- 4 1-2 glasses (15-30 cl)
- 5 Half a bottle (37 cl)
- 6 A bottle or more (≥ 75 cl)

14. The last time you had an alcoholic drink, did you drink any spirits? If so, how much?

- 1 I never drink spirits
- 2 I did not drink spirits on my last drinking occasion
- 3 Less than a drink (<5 cl)
- 4 1-2 drinks (5-10 cl)
- 5 3-5 drinks (11-25 cl)
- 6 6 drinks or more (≥ 30 cl)

15. Think of the last day on which you drank alcohol. Where were you when you drank?

Mark all that apply.

- I never drink alcohol
- At home
- At someone else's home
- Out on the street, in a park, beach or other open area
- At a bar or a pub
- In a disco
- In a restaurant
- Other places (please describe)

16. Think back over the LAST 30 DAYS. How many times (if any) have you bought beer, wine or spirits in a store (grocery store, liquor store, kiosk or gas station) for your own consumption?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) Beer (do not include low alcohol beer)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Wine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Spirits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

17. Think back once more over the LAST 30 DAYS. How many times (if any) have you had five or more drinks in a row? (A "drink" is a glass of wine (ca 15 cl), a bottle or can of beer (ca 50 cl), a shot glass of spirits (ca 5 cl) or a mixed drink.)

- None
- 1
- 2
- 3-5
- 6-9
- 10 or more times

18. How likely is it that each of the following things would happen to you personally, if you drink alcohol?

Mark one box for each line.

	Very likely	Likely	Unsure	Unlikely	Very unlikely
a) Feel relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Get into trouble with police	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Harm my health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Feel happy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Forget my problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Not be able to stop drinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Get a hangover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Feel more friendly and outgoing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Do something I would regret	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Have a lot of fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Feel sick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

19. On how many occasions (if any) have you been drunk from drinking alcoholic beverages?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) In your lifetime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) During the last 12 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) During the last 30 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

20. Please indicate on this scale from 1 to 10 how drunk you would say you were the last time you were drunk.

Somewhat merry only					Heavily intoxicated to the point of being unable to stand on my feet				
01	02	03	04	05	06	07	08	09	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 <input type="checkbox"/>	I have never been drunk								

21. How many drinks do you usually need to get drunk? (A "drink" is a glass of wine (ca 15 cl), a bottle or can of beer (ca 50 cl), a shot glass of spirits (ca 5 cl) or a mixed drink.)

01 I never drink alcohol

02 I have never been drunk

03 1-2 drinks

04 3-4 drinks

05 5-6 drinks

06 7-8 drinks

07 9-10 drinks

08 11-12 drinks

09 13 drinks or more

The next questions ask about some other drugs.

22. Have you ever heard of any of the following drugs?

Mark one box for each line.

	Yes	No
a) Tranquillisers or sedatives (give names that apply)	<input type="checkbox"/>	<input type="checkbox"/>
b) Marijuana or hashish.....	<input type="checkbox"/>	<input type="checkbox"/>
c) LSD.....	<input type="checkbox"/>	<input type="checkbox"/>
d) Amphetamines	<input type="checkbox"/>	<input type="checkbox"/>
e) Crack.....	<input type="checkbox"/>	<input type="checkbox"/>
f) Cocaine.....	<input type="checkbox"/>	<input type="checkbox"/>
g) Relevin.....	<input type="checkbox"/>	<input type="checkbox"/>
h) Heroin	<input type="checkbox"/>	<input type="checkbox"/>
i) Ecstasy.....	<input type="checkbox"/>	<input type="checkbox"/>
j) GHB	<input type="checkbox"/>	<input type="checkbox"/>
k) Methadone	<input type="checkbox"/>	<input type="checkbox"/>
l) "Magic mushrooms".....	<input type="checkbox"/>	<input type="checkbox"/>
	1	2

23. Have you ever wanted to try any of the drugs mentioned in question 22?

- 1 Yes
 2 No

24. On how many occasions (if any) have you used marijuana (grass, pot) or hashish (hash, hash oil)?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) In your lifetime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) During the last 12 months.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) During the last 30 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

25. On how many occasions (if any) have you sniffed a substance (glue, aerosols etc) to get high?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) In your lifetime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) During the last 12 months.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) During the last 30 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

Tranquillisers and sedatives, like (give examples that are appropriate) are sometimes prescribed by doctors to help people to calm down, get to sleep or to relax. Pharmacies are not supposed to sell them without a prescription.

26. Have you ever taken tranquillisers or sedatives because a doctor told you to take them?

- 1 No, never
 2 Yes, but for less than 3 weeks
 3 Yes, for 3 weeks or more

27. Have you ever used any of the following drugs?

Mark one or more boxes for each line.

	No	Yes, during the last 30 days	Yes, during the last 12 months	Yes, during lifetime
a) Tranquillisers or sedatives (without a doctor's prescription).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Amphetamines.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) LSD or some other hallucinogens.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Crack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Cocaine.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Relewin.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Heroin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Ecstasy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) "Magic mushrooms".....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) GHB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Drugs by injection with a needle (like heroin, cocaine, amphetamine)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Alcohol together with pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Alcohol and marijuana/hashish at the same time.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Anabolic steroids.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	1	1	1

28. On how many occasions in your lifetime (if any) have you used any of the following drugs?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) Tranquillisers or sedatives (without a doctor's prescription).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Amphetamines.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) LSD or some other hallucinogens.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Crack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Cocaine.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Relevin.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Heroin.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Ecstasy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) "Magic mushrooms".....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) GHB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Drugs by injection with a needle (like heroin, cocaine, amphetamine)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Alcohol together with pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Alcohol and marijuana/hashish at the same time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Anabolic steroids.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

29. When (if ever) did you FIRST do each of the following things?

Mark one box for each line.

	Never	11 years old or less	12 years old	13 years old	14 years old	15 years old	16 years old
	a) Drink beer (at least one glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Drink wine (at least one glass).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Drink spirits (at least one glass).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Get drunk on alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Smoke your first cigarette.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Smoke cigarettes on a daily basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Try amphetamines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Try tranquillisers or sedatives (without a doctor's prescription).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Try marijuana or hashish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Try LSD or other hallucinogen.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Try crack.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Try cocaine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Try heroin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Try ecstasy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o) Try "magic mushrooms"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p) Try GHB.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q) Try drugs by injection with a needle (like heroin, cocaine, amphetamine)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r) Try inhalants (glue, etc) to get high.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s) Try alcohol together with pills.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t) Try anabolic steroids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

We want to find out how people begin to take drugs. We want you to think back to the very first occasion (if any) on which you took any of them and tell us about it. (Let us say again that any information you choose to give us about this will be very strictly confidential to the researchers. Your name is not on this questionnaire and nobody will attempt to find it out).

30. What was the FIRST drug (if any) that you have ever tried?

- 01 I have never tried any of the substances listed below
- 02 Tranquillisers or sedatives without a doctor's prescription
- 03 Marijuana or hashish
- 04 LSD
- 05 Amphetamines
- 06 Crack
- 07 Cocaine
- 08 Relevin
- 09 Heroin
- 10 Ecstasy
- 11 "Magic mushrooms"
- 12 GHB
- 13 I don't know what it was

31. How did you get this substance?

- 01 I have never used any of the substances listed in question 30
- 02 Given to me by an older brother or sister
- 03 Given to me by a friend, a boy or a girl, older than me
- 04 Given to me by a friend my own age or younger
- 05 Given to me by someone I have heard about but did not know personally
- 06 Given to me by a stranger
- 07 It was shared around a group of friends
- 08 Bought from a friend
- 09 Bought from someone I have heard about but did not know personally
- 10 Bought from a stranger
- 11 Given to me by one of my parents
- 12 Took it at home without my parents permission
- 13 None of these (please describe briefly how you did get it).....
.....

32. Which was the reason(s) for you to try this drug?

Mark all that apply.

- 1 I have never used any of the substances listed in question 30
- 1 I wanted to feel high
- 1 I did not want to stand out from the group
- 1 I had nothing to do
- 1 I was curious
- 1 I wanted to forget my problems
- 1 Other reason(s), please specify.....
- 1 Don't remember

33. In which of the following places do you think you could easily buy marijuana or hashish if you wanted to?

Mark all that apply.

- I don't know of any such place
- Street, park etc
- School
- Disco, bar etc
- House of a dealer
- Other(s), please specify

34. How much do you think PEOPLE RISK harming themselves (physically or in other ways), if they.....

Mark one box for each line.

	No risk	Slight risk	Moderate risk	Great risk	Don't know
a) smoke cigarettes occasionally.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) smoke one or more packs of cigarettes per day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) have one or two drinks nearly every day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) have four or five drinks nearly every day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) have five or more drinks each weekend.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) try marijuana or hashish (cannabis, pot, grass) once or twice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) smoke marijuana or hashish occasionally.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) smoke marijuana or hashish regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) try LSD once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) take LSD regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) try an amphetamine (uppers, pep pills, bennie, speed) once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) take amphetamines regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) try cocaine or crack once or twice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) take cocaine or crack regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o) smoke crack once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p) smoke crack regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q) try ecstasy once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r) take ecstasy regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s) try GHB once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t) take GHB regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u) try drugs by injection with a needle once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v) take drugs by injection with a needle regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x) try inhalants (glue etc) once or twice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y) take inhalants (glue etc) regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

35. How difficult do you think it would be for you to get each of the following, if you wanted?

Mark one box for each line.

	Impossible	Very difficult	Fairly difficult	Fairly easy	Very easy	Don't know
a) Cigarettes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Beer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Wine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Liquor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Marijuana or hashish (cannabis, pot, grass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) LSD or some other hallucinogen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Amphetamines (uppers, pep pills, bennies, speed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Tranquillisers or sedatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Crack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Cocaine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Ecstasy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin (smack, horse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) "Magic mushrooms"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) GHB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o) Inhalants (glue etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p) Anabolic steroids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6

36. How many of your friends would you estimate

Mark one box for each line.

	None	A few	Some	Most	All
a) smoke cigarettes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) drink alcoholic beverages (beer, wine, spirits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) get drunk at least once a week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) smoke marijuana (pot, grass) or hashish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) take LSD or some other hallucinogen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) take amphetamines (uppers, pep pills, bennies, speed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) take tranquillisers or sedatives (without a doctor's prescription)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) take cocaine or crack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) take ecstasy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) take heroin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) take inhalants (glue etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) take "magic mushrooms"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) take GHB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) take alcohol together with pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o) take anabolic steroids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

37. Have you ever had any of the following problems?

Mark all that apply for each line.

	Never	Yes, because of my alcohol use	Yes, because of my drug use	Yes for reasons other than alcohol or drug use
a) Quarrel or argument.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Scuffle or fight.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Accident or injury.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Loss of money or other valuable items.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Damage to objects or clothing you owned.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Problems in your relationship with your parents.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Problems in your relationship with your friends.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Problems in your relationship with your teachers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Performed poorly at school or work.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) Victimized by robbery or theft.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Trouble with police.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Hospitalised or admitted to an emergency room.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Engaged in sexual intercourse you regretted the next day.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Engaged in sexual intercourse without a condom.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	1	1	1

38. Do you think that heavy drinking influences the following problems?

Mark one box for each line.

	Yes, con- siderably	Yes, quite a lot	Yes, to some extent	Yes, but only a little	No
a) Traffic accidents.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Other accidents.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Violent crime.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Family problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Health problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Relationship problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Financial problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

39. Does any of your older siblings.....?

Mark one box for each line.

	Yes	No	Don't know	Don't have any older siblings
a) smoke cigarettes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) drink alcoholic beverages (beer, wine, spirits).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) get drunk.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) smoke marijuana or hashish (pot, grass).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) take tranquillisers or sedatives (without a doctor's prescription).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) take ecstasy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4

The next questions ask about your parents. If mostly foster parents raised you, stepparents, or others answer for them. For example, if you have both a stepfather and a natural father, answer for the one that was the most important in raising you.

40. What is the highest level of schooling your father completed?

- 1 Completed primary school or less
- 2 Some secondary school
- 3 Completed secondary school
- 4 Some college or university
- 5 Completed college or university
- 6 Don't know, or does not apply

41. What is the highest level of schooling your mother completed?

- 1 Completed primary school or less
- 2 Some secondary school
- 3 Completed secondary school
- 4 Some college or university
- 5 Completed college or university
- 6 Don't know, or does not apply

42. How well off is your family compared to other families in your country?

- 1 Very much better off
- 2 Much better off
- 3 Better off
- 4 About the same
- 5 Less well off
- 6 Much less well off
- 7 Very much less well off

43. Which of the following people live in the same household with you?

Mark all that apply.

- 1 I live alone
- 1 Father
- 1 Stepfather
- 1 Mother
- 1 Stepmother
- 1 Brother(s) and/or sister(s)
- 1 Grandparent(s)
- 1 Other relative(s)
- 1 Non-relative(s)

44. How satisfied are you usually with.....

	Very satisfied	Satisfied	Neither satis- fied or not satisfied	Not so satisfied	Not at all satisfied
a) your relationship to your mother?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) your relationship to your father?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) your relationship to your friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

45. Do your parents know where you spend Saturday nights?

- 1 Know always
- 2 Know quite often
- 3 Know sometimes
- 4 Usually don't know

46. If you have ever used marijuana or hashish, do you think that you would have said so in this questionnaire?

- 1 I already said that I have used it
- 2 Definitely yes
- 3 Probably yes
- 4 Probably not
- 5 Definitely not

47. If you have ever used heroin, do you think that you would have said so in this questionnaire?

- 1 I already said that I have used it
- 2 Definitely yes
- 3 Probably yes
- 4 Probably not
- 5 Definitely not

The next section includes questions about your parents' thoughts about alcohol and drug use.

A1. If you wanted to smoke (or already do), do you think your father and mother would allow you to do so?

Mark one box for each line.

	Would allow (allows me) to smoke	Would not (does not) allow smoking at home	Would not (does not) allow smoking at all	Don't know
a) Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4

A2. What do you think your mother's reaction would be if you do the following things?

Mark one box for each line.

	She would not allow it	She would dis- courage it	She would not mind	She would approve of it	Don't know
a) Get drunk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Use marijuana/hashish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Use ecstasy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

A3. What do you think your father's reaction would be if you do the following things?

Mark one box for each line.

	He would not allow it	He would dis- courage it	He would not mind	He would approve of it	Don't know
a) Get drunk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Use marijuana/hashish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Use ecstasy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

A4. How satisfied are you usually with

Mark one box for each line.

	Very satisfied	Satisfied	Neither satisfied or not satisfied	Not so satisfied	Not at all satisfied
a) the financial situation of your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) your health?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

A5. How often do the following statements apply to you?

Mark one box for each line.

	Almost always	Often	Some- times	Seldom	Almost never
a) My parents set definite rules about what I can do at home.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) My parents set definite rules about what I can do outside the home.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) My parents know whom I am with in the evenings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) My parents know where I am in the evenings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I can easily get warmth and caring from my mother and/or father....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) I can easily get emotional support from my mother and/or father....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) I can easily borrow money from my mother and/or father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) I can easily get money as a gift from my mother and/or father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) I can easily get warmth and caring from my best friend.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) I can easily get emotional support from my best friend.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

A6/ B1. How much money do you usually spend a week for your personal needs without your parents' control?

..... National currency

The following questions are about yourself and things you might do.

B2. What house work do you usually do at home?

- I do shopping
- I take care of younger sisters/brothers
- I take care of pets
- I cook
- I clean the house/apartment
- I do laundry
- I wash dishes
- I work on the household plot of land (garden)
- I take care of farm animals
- I care about elder family members
- I take out the trash
- I don't usually do any house work

B3. How much TV or video do you estimate you watch on an average weekday?

- 1 None
- 2 Half-hour or less
- 3 About 1 hour
- 4 About 2 hours
- 5 About 3 hours
- 6 About 4 hours
- 7 5 hours or more

B4. How good do you think you are at schoolwork, compared to other people your age?

- 1 Excellent, I am probably one of the very best
- 2 Well above average
- 3 Above average
- 4 Average
- 5 Below average
- 6 Well below average
- 7 Poor, I am probably one of the worst

The following section is about what you think of yourself.

C1. Below is a list of statements dealing with your general feelings about yourself.

Mark one box for each line to indicate if you agree or disagree.

	Strongly agree	Agree	Disagree	Strongly disagree
a) On the whole, I am satisfied with myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) At times I think I am no good at all	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I feel that I have a number of good qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) I am able to do things as well as most other people.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I feel I do not have much to be proud of.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) I certainly feel useless at times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) I feel that I'm a person of worth, at least on an equal plane with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) I wish I could have more respect for myself.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) All in all, I am inclined to feel that I am a failure.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) I take a positive attitude toward myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4

C2. During the LAST 7 DAYS, how often

Mark one box for each line.

	Rarely or never	Some- times	Several times	Most of the times
a) have you lost your appetite, you did not want to eat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) have you had difficulty in concentrating on what you want to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) have you felt depressed.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) have you felt that you had to put great effort and pressure to do the things you had to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) have you felt sad.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) couldn't you do your work (at home, at work, at school).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4

C3. How much do you agree or disagree with the following statements?

Mark one box for each line.

	Totally agree	Rather agree	Don't know	Rather disagree	Totally disagree
a) You can break most rules if they don't seem to apply.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) I follow whatever rules I want to follow.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) In fact there are very few rules absolute in life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) It is difficult to trust anything, because everything changes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) In fact nobody knows what is expected of him/her in life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) You can never be certain of anything in life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

The following questions concern behaviours, which may be against some social rules or the law. We hope that you will answer all the questions. Nevertheless, if you come across a question, which you cannot answer honestly, we prefer that you leave it unanswered. Remember that your answers are anonymous.

C4. During the LAST 12 MONTHS, how often have you

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) hit one of your teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) gotten mixed into a fight at school or at work.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) taken part in a fight where a group of your friends were against another group.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) hurt somebody badly enough to need bandages or a doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) used any kind of weapon to get something from a person.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) taken something not belonging to you, worth over (the equivalent of) \$ 10.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) taken something from a shop without paying for it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) set fire to somebody else's property on purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) damaged school property on purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) gotten into trouble with the police for something you did.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

C5. Has any of the following ever happened to you?

Mark one box for each line.

	Not at all	Once	Twice	3-4 times	5 or more times
a) Run away from home for more than one day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Thought of harming yourself.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Attempted suicide.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5

The following questions concern behaviours, which may be against some social rules or the law. We hope that you will answer all the questions. Nevertheless, if you come across a question, which you cannot answer honestly, we prefer that you leave it unanswered. Remember that your answers are anonymous.

D1. During the LAST 12 MONTHS, how often have you

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) participated in a group teasing an individual ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) participated in a group bruising an individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) participated in a group starting a fight with another group.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) started a fight with another individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) stolen something worth (give a rounded sum approx equivalent to 2-3 movie theatre tickets)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) broken into a place to steal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) damaged public or private property on purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) sold stolen goods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

D2. During the LAST 12 MONTHS, how often have you

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) been individually teased by a whole group of people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) been bruised by a whole group of people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) been in a group that was attacked by another group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) had someone start a fight with you individually.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) had something worth (give a rounded sum approx equivalent to 2-3 movie theatre tickets) stolen from you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) had someone break into your home to steal something	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) had someone damage your belongings on purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) bought stolen goods.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

The last section of the questionnaire includes some questions about alcohol and moist snuff.

O1. Now think back over the LAST 30 DAYS. On how many occasions (if any) have you had any home made or smuggled alcohol to drink?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) Home made beer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Home made wine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Home made spirits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Smuggled beer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Smuggled wine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Smuggled spirits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

O2. On how many occasions (if any) have you used moist snuff?

Mark one box for each line.

	Number of occasions						
	0	1-2	3-5	6-9	10-19	20-39	40 or more
a) In your lifetime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) During the last 12 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) During the last 30 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1	2	3	4	5	6	7

O3. How much moist snuff have you used during the LAST 30 DAYS?

- 1 None at all
- 2 Less than 1 box per week
- 3 1 box per week
- 4 2 boxes per week
- 5 3 boxes per week
- 6 4 or more boxes per week

