

European Monitoring Centre for Drugs and Drug Addiction





# Summary

The 2007 ESPAD report

Substance use among students in 35 countries

#### Legal notice

This publication of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is protected by copyright. The EMCDDA accepts no responsibility or liability for any consequences arising from the use of the data contained in this document. The contents of this publication do not necessarily reflect the official opinions of the EMCDDA's partners, the EU Member States or any institution or agency of the European Union or European Communities.

A great deal of additional information on the European Union is available on the Internet. It can be accessed through the Europa server (http://europa.eu).

This summary is available in Bulgarian, Spanish, Czech, Danish, German, Estonian, Greek, English, French, Italian, Latvian, Lithuanian, Hungarian, Dutch, Polish, Portuguese, Romanian, Slovak, Slovenian, Finnish, Swedish, Turkish and Norwegian. All translations were made by the Translation Centre for the Bodies of the European Union. Cataloguing data can be found at the end of this publication.

Luxembourg: Office for Official Publications of the European Communities, 2009

ISBN 978-92-9168-357-4

© European Monitoring Centre for Drugs and Drug Addiction, 2009

Reproduction is authorised provided the source is acknowledged.

Printed in Spain

PRINTED ON WHITE CHLORINE-FREE PAPER

### **Contents**

Foreword	4
Summary	5
Methodology and data quality	5
Cigarettes	5
Alcohol	6
Illicit drugs	9
Other substances	10
Final remarks	11
Key drug-specific figures	14

#### Authors:

Björn Hibell, Swedish Council for Information on Alcohol and Other Drugs (CAN), Stockholm, Sweden.

Ulf Guttormsson, Swedish Council for Information on Alcohol and Other Drugs (CAN), Stockholm, Sweden.

Salme Ahlström, Alcohol and Drug Research, STAKES, Helsinki, Finland. Olga Balakireva, Institute of Economy and Prognoses, NASU, Kiev, Ukraine. Thoroddur Bjarnason, Faculty of Social Science and Law, University of Akureyri, Iceland.

Anna Kokkevi, University Mental Health Research Institute, Athens, Greece. Ludwig Kraus, IFT Institut für Therapieforschung, Munich, Germany.

#### Bibliographic details of the full report:

Hibell, B., Guttormsson, U., Ahlström, S., Balakireva, O., Bjarnason, T., Kokkevi, A. and Kraus, L. (2009), The 2007 ESPAD report. Substance use among students in 35 European countries. The Swedish Council for Information on Alcohol and Other Drugs, Stockholm, Sweden.

Details on how to obtain the full report are available at: http://www.espad.org

## Foreword



We are pleased to present this summary of the 2007 European school survey findings produced by the European School Survey Project on Alcohol and Other Drugs (ESPAD). We have made this summary available in 23 languages to ensure the widest possible dissemination in Europe. It serves as a complement to the full report that is available in English.

This multilingual summary is a product of the cooperation framework that exists between the EMCDDA and ESPAD. Our common aims are: to broaden access to the information and expertise on alcohol and other drug use among school students developed by the ESPAD project; to improve the availability, quality and comparability of school survey data; and to gain maximum analytical insight from the data available in this area.

The mandate of the EMCDDA is to collect, analyse and disseminate factual, objective, reliable and comparable information on the European drug situation. The information provided by the ESPAD project is an important source of information for obtaining the European picture on younger people. The ESPAD project provides a common approach to collecting information on substance use among 15- to 16-year-old students in Europe and allows trends over time to be assessed.

The work of the ESPAD project would not have been possible without the generous support of the Swedish Government, the Swedish National Institute of Public Health and the Pompidou Group. We would also like to take this opportunity to thank all the governmental and non governmental partners in ESPAD countries that contribute to the funding, data collection, analysis and dissemination of this important work.

Wolfgang Götz, Director, EMCDDA

Björn Hibell, ESPAD Coordinator

## Summary

The main purpose of the European School Survey Project on Alcohol and Other Drugs (ESPAD) is to collect comparable data on substance use among 15–16 year-old European students in order to monitor trends within as well as between countries. So far four data collection waves have been conducted within the ESPAD project. The first study was held in 26 countries in 1995, while the 2007 data collection was performed in 35 countries. This summary presents key results from the 2007 survey as well as findings regarding the long-term trends. An initial section gives a short overview of the methodology.

Independent research teams in the participating countries form the basis of the collaborative project. In the 2007 ESPAD data collection more than 100 000 students took part from the following countries: Armenia, Austria, Belgium (Flanders), Bulgaria, Croatia, Cyprus, the Czech Republic, Denmark, Estonia, the Faroe Islands, Finland, France, Germany (7 Bundesländer), Greece, Hungary, Iceland, Ireland, the Isle of Man, Italy, Latvia, Lithuania, Malta, Monaco, the Netherlands, Norway, Poland, Portugal, Romania, Russian Federation, the Slovak Republic, Slovenia, Sweden, Switzerland, Ukraine and the United Kingdom.

#### Methodology and data quality

As in previous ESPAD studies, to provide as comparable data as possible, the surveys were conducted according to a standardised methodology and with a common questionnaire. Data were mainly collected during spring 2007 and the target population was students born in 1991, with a mean age of 15.8 years at the time of data collection.

Data were collected by group-administered questionnaires. The students answered the questionnaires anonymously in the classroom with teachers or research assistants functioning as survey leaders. With two exceptions the class-samples are nationally representative: in Germany the study was performed in 7 out of 16 federal states (Bundesländer) while the Belgian data collection was restricted to the Dutch speaking part (Flanders).

The content of the international report is based on standardised country reports and datasets delivered to the coordinators and the database manager. A few countries have experienced modest problems of a methodological kind, but these are not of the magnitude to seriously threaten the comparability of the results, and the overall validity is deemed high for most countries. The national cultural context in which the students have answered the questions has, however, most certainly varied.

Country sample sizes were close to or above the recommended number of 2 400 apart from the smaller countries, where fewer, but all relevant, students were surveyed. However, a combination of a small gross sample and a high school-dropout level in Denmark led to a net sample which was too small to be considered fully representative, and thereby fully comparable.

Small differences in point estimates between countries or over time should be interpreted with caution. As a rule of thumb, however, given the size of the national samples and the sampling methods employed, differences of more than a few percentage points can quite confidently be considered significant.

#### Cigarettes

A small number of questions regarding cigarette smoking are given at the beginning of the questionnaire. On average, in the 2007 survey, 58 % of the students in participating countries reported having tried smoking cigarettes at least once and 29 % had used cigarettes during the past 30 days. Two percent of all students had smoked at least a packet of cigarettes per day during the past 30 days.

The ranking orders of countries for lifetime and relatively recent use (past 30 days) are more or less the same. High-prevalence countries for cigarette use past 30 days are Austria, Bulgaria, the Czech Republic and Latvia (40–45 %) and low prevalence countries are Armenia, Iceland, Norway and Portugal (7–19 %). There is no obvious geographical pattern at hand, but students in central and eastern European countries are often among those reporting higher rates of smoking.

In countries where more students smoke, one is also more likely to find students reporting that cigarettes are easily obtainable. An early smoking debut (age 13 or younger) is also associated, at the country level, with high levels of use in the past month. On average, 7 % of the students said that they had been smoking cigarettes on a daily basis at the age of 13 or younger. Daily cigarette use at this early age is most common among students in the Czech Republic, Estonia, Latvia and the Slovak Republic (prevalence rates of about 13 %) and least common among students in Greece and Romania (around 3 %).

At the aggregate country level, the gender differences in 2007 are negligible for smoking in the past 30 days. However, in individual countries great differences may be observable. For example, boys were 16 percentage points above girls in Armenia and conversely, girls were 19 percentage points above boys in Monaco.

Over time, a slight decrease in the past 30 days' smoking may be noticed, the total average prevalence rate having dropped by four percentage points between 1995 and 2007 in ESPAD countries with comparable data for all four waves. If the comparison is confined to the period between 1999 and 2007, the drop in relatively recent smoking is seven percentage points. A small overall gender gap (4 percentage points) was noticed in 1995 but this gap had vanished in 2007.

Only four countries give a contrary image regarding the long-term downward trend in recent smoking, displaying higher levels in 2007 than in 1995. In all those countries, however, the actual increases took place already between 1995 and 1999 and the situation has been relatively stable thereafter. Hence, the overall picture of the trend in past 30 days smoking in the ESPAD countries is one of a decrease, or at least of a stabilized situation.

#### Alcohol

In all ESPAD countries at least two thirds of the students have drunk alcohol at least once during their lifetime, with an ESPAD average close to 90 % in the 2007 survey. The corresponding average figures for the past 12 months and the past 30 days are 82 and 61 % respectively. These figures were relatively unchanged from 1995 to 2007 for lifetime and past 12 months prevalences, while past 30 days figures increased until 2003 before they dropped a little in 2007, especially among boys. Between the last two surveys there was also a clear decrease in the average proportion of students that had been drinking beer and/or wine during the past 30 days.

The average figures above are of course based on very divergent country figures. For example, alcohol use during the past 30 days was reported by 80 % of the students in Austria and Denmark (limited comparability) but only by 31 % in Iceland and 35 % in Armenia.

The figures for lifetime, past 12 months and past 30 days prevalences are about the same for boys and girls. However, when it comes to higher frequencies in the respective time frame (40, 20 and 10 times) the proportions are usually higher among boys. These high frequencies are mainly reported by students in Austria and Germany (7 Bundesländer), while the Nordic countries Finland, Iceland, Norway and Sweden belong to those with only very few students who drink this often.

The total amount of alcohol consumed during the last drinking day is usually low in countries where the students drink often, for example in Greece, and the other way around for countries with low consumption frequencies. Countries with such a pattern include the Nordic countries Finland, Iceland, Norway and Sweden. However, there are exceptions to this pattern and they include Denmark (limited comparability) and Austria in which the students report high frequencies as well as large quantities consumed. In the countries with the largest average quantities, Denmark (limited comparability) and the Isle of Man, the quantities for an average student is about 3-4 times higher than in the countries with the lowest average consumption (Armenia and Cyprus).

In nearly all countries boys drink larger quantities than girls. The most pronounced contrast to this is lceland, where girls report larger quantities than boys. In a large majority of the countries, beer is the dominant beverage among boys while spirits is the most important beverage among girls in a little more than half of the countries.

All in all, beer is the dominant beverage, accounting for some 40 % of the amount consumed (in 100 % alcohol) on the last drinking day, and followed by 30 % for spirits and 13 % for wine. Beer is even more dominant among boys, accounting for about half their total consumption on the last drinking day. Girls have a more evenly distributed pattern, with spirits as the most important type, constituting about one third of the total consumption.

On the country level there is a strong positive relationship between reported alcohol consumption for the last drinking day and the perceived level of intoxication on that day. Thus, in countries where students reported that they consumed larger quantities of alcohol they also reported higher levels of intoxication.

On average, half of the ESPAD students have been intoxicated at least once during their lifetime, to the point of staggering when walking, having slurred speech or throwing up. For 39 % of the students this had happened during the past 12 months and for 18 % during the past 30 days. There were gender differences in the frequencies of drunkenness within countries, with higher figures for boys in some countries and for girls in others, while on the average ESPAD level there were no gender differences.

Countries with many students that have been drunk during the past 12 months usually have high figures for drunkenness during the past 30 days. Countries in which many students report drunkenness this often include Denmark (limited comparability), the Isle of Man, the United Kingdom and Austria, with figures from 49 to 31 % for past 30 days drunkenness. Countries on the other end of the scale include Armenia (2 %) and Cyprus (9 %).

Another way of measuring drunkenness has been to ask how often the students had been consuming five drinks or more per occasion. This measure of 'heavy episodic drinking' shows to some extent a different pattern than the question about intoxication. Some countries score high on both measures, for example Denmark (limited comparability), the Isle of Man and the United Kingdom. However, there are countries in which many students report heavy episodic drinking during the past 30 days, while they were rather low on the ranking list for drunkenness for the same period. Examples of such countries include Malta, Portugal, Estonia and Latvia.

On average 43 % of the ESPAD students reported heavy episodic drinking during the past 30 days, and this was more common among boys (47 %) than among girls (39 %). Boys also dominated in a large majority of the countries. In some few the figures were about the same, but there are also countries in which more girls than boys stated this. The most striking example is Norway in which 42 % of the girls and 35 % of the boys reported heavy episodic drinking during the past 30 days.

On average, heavy episodic drinking during the past 30 days increased between 1995 and 1999, but also between 2003 and 2007. In the latter period this is especially true among girls, with an increase from 35 to 42 %. In 1995 heavy episodic drinking was on average much more common among boys than girls, but this gap had diminished substantially in 2007. Countries with a continuing upward trend between all four data collections include Croatia, the Czech Republic, Malta, Portugal and the Slovak Republic.

Increases in the recent period are found in more than half of the countries. The most pronounced increase between 2003 and 2007 is found in Portugal, where the proportion of students reporting heavy episodic drinking during the past 30 days increased from 25 to 56 %, i.e. by 31 percentage points. Other countries with large increases include Poland (which returned close to the 1999 level after a drop in 2003) (16 percentage points), France (15), Croatia (14) and Bulgaria (12).

A number of students reported problems during the past 12 months related to their alcohol consumption. On the average level 15 % answered that they had experienced serious problems with parents and the figure was about the same (13 %) for 'performed poorly at school or work', 'serious problems with friends' and 'physical fights'. Countries in which many

	Cigarette use past 30 days	Alcohol use past 12 months	Drunk past 12 months	Alcohol volume (cl 100%) latest drinking day	Cannabis lifetime use	Any illicit drug other than cannabis lifetime use (1)	Inhalants lifetime use (²)	Tranquillisers sedatives non-prescribed use lifetime	Alcohol together with pills lifetime use ( <sup>3</sup> )
Armenia	7	66	8	1.6	3	2	5	0	1
Austria	45	92	56	5.5	17	11	14	2	12
Belgium (Flanders)	23	83	29	4.3	24	9	8	9	4
Bulgaria	40	83	45	3.5	22	9	3	3	3
Croatia	38	84	43	5.2	18	4	11	5	8
Cyprus	23	79	18	2.1	5	5	16	7	3
Czech Republic	41	93	48	4.5	45	9	7	9	18
Estonia	29	87	42	5.1	26	9	9	7	5
Faroe Islands	33		41		6	1	8	3	6
Finland	30	77	45	5.7	8	3	10	7	9
France	30	81	36	3.6	31	11	12	15	6
Germany (7 Bundesländer)	33	91	50	5.1	20	8	11	3	7
Greece	22	87	26	3.1	6	5	9	4	3
Hungary	33	84	42	4.0	13	7	8	9	12
Iceland	16	56		4.1	9	5	4	7	4
Ireland	23	78	47		20	10	15	3	7
Isle of Man	24	93	61	7.3	34	16	17	7	12
Italy	37	81	27	3.6	23	9	5	10	4
Latvia	41	89	45		18	11	13	4	8
Lithuania	34	87	43	4.0	18	7	3	16	5
Malta	26	87	38	3.9	13	9	16	5	11
Monaco	25	87	35	2.5	28	10	8	12	5
Netherlands	30	84	36	4.9	28	7	6	7	4
Norway	19	66	40	5.9	6	3	7	4	4
Poland	21	78	31	3.9	16	7	6	18	5
Portugal	19	79	26		13	6	4	6	3
Romania	25	74	26	2.5	4	3	4	4	4
Russia	35	77	40	2.8	19	5	7	2	4
Slovak Republic	37	88	50	4.2	32	9	13	5	12
Slovenia	29	87	43	4.5	22	8	16	5	4
Sweden	21	71	37	5.2	7	4	9	7	7
Switzerland	29	85	41	3.9	33	7	9	8	6
Ukraine	31	83	32	2.8	14	4	3	4	1
United Kingdom	22	88	57	6.2	29	9	9	2	7
Average (unweighted)	29	82	39	4.2	19	7	9	6	6
Denmark (4)	32	94	73	7.5	25	10	6	5	6

#### Summary table. Selected key results by country. (Percentages if not otherwise indicated.) ESPAD 2007

(') 'Any illicit drug other than cannabis' includes ecstasy, amphetamines, LSD or other hallucinogens, crack, cocaine and heroin.

(2) Inhalants: '...(glue etc) in order to get high'.
(3) 'In order to get high' except for Cyprus ('to feel differently') and Romania ('to feel better').
(4) Denmark: limited comparability.

students reported problems related to their alcohol consumption include Bulgaria, the Isle of Man, the United Kingdom and Latvia. On the country level there is a positive correlation between problems experienced and intoxication during the past 30 days.

Most alcohol-related problems are on average more common among boys. This is most pronounced in the case of 'physical fights' and 'trouble with the police'. However, for some of the problems the averages are about the same and for one ('serious problems with friends') it is even slightly higher among girls.

#### Illicit drugs

One-third of the students in the ESPAD countries find cannabis readily available. Boys consider cannabis slightly more easily obtainable than girls do, though the gender difference is fairly small. Amphetamines and ecstasy are not considered as readily available as cannabis.

On average, 23 % of the boys and 17 % of the girls have tried illicit drugs at least once during their lifetime according to the 2007 survey. The term 'any illicit drug' includes cannabis, amphetamines, cocaine, crack, ecstasy, LSD and heroin. Reported use of illicit drugs varies considerably across the countries. In the Czech Republic, almost half (46 %) of the students report such use and relatively many students (roughly a third) did so also in France, the Isle of Man, the Slovak Republic and Switzerland. Only around 6 % reported illicit drug use in Cyprus, the Faroe Islands, Norway and Romania. Lower prevalence rates are often found among the Nordic countries and in eastern Europe.

The vast majority of the students who have tried illicit drugs have used cannabis. Lifetime cannabis use was reported by 19 % of the students while 7 % had tried one or more of the other drugs included in the index. Ecstasy, cocaine and amphetamines follows in a split second place (3 % each) and less commonly reported were LSD, crack and heroin (1–2 %). Bulgaria, Estonia, the Isle of Man, Latvia and the Slovak Republic are among the top-five countries regarding lifetime ecstasy use in 2007 (prevalence rates around 6–7 %). Other drugs inquired about, but not included in the illicit drugs-index, are magic mushrooms, GHB and anabolic steroids. Lifetime use of magic mushrooms was reported by 3 % while GHB and steroids were mentioned by 1 %, which is of the same magnitude as reported experience of intravenous drug use.

Since cannabis is being the most frequently used illicit drug, it is worthwhile taking a closer look at this substance. Use of cannabis in the past 12 months was reported by 14 % of all students while use in the past 30 days was stated by 9 % of the boys and 6 % of the girls (7 % mean). In the two top-prevalence countries (the Czech Republic and the Isle of Man) one in six students reported cannabis use in the past 30 days, indicating more regular cannabis consumption in those countries. Only 1–2 % in Armenia, the Faroe Islands, Finland, Norway, Romania and Sweden reported such recent use. High-prevalence countries are most often found in western Europe.

In most countries, but not all, more boys than girls have used cannabis in the past 30 days, especially in high-prevalence countries. Countries where many students report past 30 days cannabis use are in many cases the same ones where many students report having had the opportunity to try cannabis, but without doing so.

The relatively high prevalence rates of cannabis use among young people in Europe raises the question of its potential negative consequences for the individual and the society. By analysing the optional CAST-scale module the risk of cannabis-related problems was estimated in the 17 ESPAD countries providing such data. Overall, one out of seven past-year cannabis users (14 %) was classified as having a high risk of developing cannabis-related problems, and the average prevalence of high-risk users across countries was 2 %. Country specific differences in the risk of harm from cannabis were found, and the percentage of high-risk users in a population corresponds to the cannabis use prevalence rates in the single countries. In other words, at population level the prevalence of high-risk users increases with the prevalence of cannabis use.

In those ESPAD countries with comparable data for all four waves, 12 % of the students reported lifetime prevalence of illicit drugs in 1995 and this figure rose to 21 % in 2003. However, the 2007 results indicate that the upward trend in illicit drug use has come to a halt since only 18 % of the students reported such experiences this year. This development is practically the same for both genders, and the girls are constantly about five percentage points below the boys.

Even though the overall trend between 2003 and 2007 is downward, a handful of countries display increases for 2007. In Estonia and the Slovak Republic there are continuous increases between all four measure points (1995–2007), while the Czech Republic, Lithuania and Malta also display an overall upward trend when the period is considered all in all.

No country displays a continuous decrease, but Ireland and the United Kingdom drop substantially in illicit drug use when the whole period is considered (14 percentage points down roughly), while there is also a minor decrease in the Faroe Islands (6 percentage points down 1995–2007). It could be noted that even though Estonia and the United Kingdom are on the same prevalence level in 2007 (about 28 %), they have reached that point from opposite directions; an increase from 8 % in 1995 in the case of Estonia and a decrease from 42 % in that of the United Kingdom.

Since there is a high co-variation between illicit drug use and cannabis use on the country level, quite naturally the development for lifetime cannabis use is more or less the same as described for all illicit drugs above. Boys display slightly higher rates of relatively recent cannabis use and the gender gap does not change over the period in question.

The overall impression is that the increase in illicit drug use between 1995 and 2003 noted among the ESPAD countries has at least come to a halt, if not a decrease, especially considering that there are no increases in any country for recent use of cannabis between 2003 and 2007.

#### Other substances

Non-prescribed lifetime use of tranquillisers or sedatives is most commonly reported in Poland, Lithuania, France and Monaco — where about 15 % of the students indicated such use in the 2007 survey — while the lowest levels are reported by students from Armenia, Austria, Russia and the United Kingdom (0–2 %). On average, slightly more girls than boys report non-prescribed use of these drugs (8 % versus 5 %) and in the top eight countries, twice as many girls as boys did so. In about half of the countries there is no gender difference to speak of however. The overall trend is fairly stable between 1995 and 2007, and this is true looking at the genders separately, as well as for individual countries.

Having used alcohol together with pills ('medicaments') in order to get high was reported by 6 % on average in 2007. Slightly more girls than boys did so (8 versus 5 %). This variable shows some similarities with the other one concerning use of pharmaceutical drugs mentioned above. Firstly, the proportion of students stating lifetime prevalence for these two variables is more or less of the same magnitude. Secondly, this behaviour is fairly stable over time, at least on average in those countries with data available for all four waves (with the exception of upward trends found in the Czech Republic and the Slovak Republic and downward trends in Finland, Sweden and the United Kingdom). Third and finally, this is another of the very few variables where the girls are in a constant majority over time. During 1995–2007 the girls are about four percentage points above the boys. Top-prevalence country for lifetime alcohol use together with pills in 2007 is the Czech Republic (18 %) and particularly low levels are notable for Armenia and Ukraine (1%).

Students from Cyprus, the Isle of Man, Malta and Slovenia report the highest lifetime prevalence of inhalants in 2007 (16 %), while only 3 % mention this in Bulgaria, Lithuania and Ukraine. The average for lifetime use of inhalants for all ESPAD countries is 9 % and there are no gender differences on the aggregate level. The rates for use in the past 12 months and in the past 30 days follow that for lifetime use relatively well across countries. No typical geographic pattern is observed — the highest rates of inhalant use are reported from different parts of Europe. The lifetime prevalence figures remain relatively stable over the period 1995–2007 among countries with data for all four waves. The biggest drops have taken place in Lithuania and the United Kingdom (about 12 percentage points down) and an

opposite development is notable for Finland and the Slovak Republic (6 points up).

#### **Final remarks**

It is well known that, on the individual level, there is often a relationship between the use of different substances. In the 2007 data, there are apparent associations between the use of different substances at the aggregate country level, and it can be concluded that in countries where many students report recent (past 30 days) alcohol use and intoxication, more students are likely to report experience of illicit drugs, inhalants and use of alcohol together with pills, and vice versa. Nonprescribed use of tranquillisers or sedatives however shows no correlations on the aggregate country level with use of the substances just mentioned.

Nine key variables were selected to give an overview of the 2007 results per country: consumption of any alcoholic beverage during the past 12 months, having been drunk during the past 12 months, alcohol volume (100 % alc.) consumed on the latest drinking day, cigarette smoking during the past 30 days, lifetime use of marijuana or hashish (cannabis), lifetime use of any illicit drug other than cannabis, lifetime use of inhalants, lifetime use of nonprescribed tranquillisers or sedatives and lifetime use of alcohol together with pills in order to get high.

Individual country prevalence rates for the keyvariables are compared to the averages for all countries. The countries that score above or around average for most of the nine measures are Austria, the Czech Republic, Denmark (limited comparability), Germany (7 Bundesländer), the Isle of Man, the Slovak Republic and the United Kingdom. The countries with results mostly around or below average are Armenia, Cyprus, Greece, Iceland, Portugal and Romania. The Faroe Islands could also be included in the list, even though it lacks information for two of the variables.

Two geographically distant countries, Armenia and the Isle of Man, are the ones most distant regarding substance use. For all key variables compared, Armenian students report levels well below average while the Isle of Man students are well above average for all measures but two. For instance, roughly ten times more students in the Isle of Man report drunkenness in the past 12 months, lifetime cannabis use or use of any other drug than cannabis, compared to Armenian students.

Five out of the seven countries mentioned above for scoring high on the key-variables are bordering each other and are located relatively centrally in Europe. The other two, the Isle of Man and the United Kingdom, are bordering each other and not that distant from the other high-prevalence countries. Six countries (or seven if the Faroe Islands are included) were mentioned above for displaying low prevalence rates on the key variables. Those countries do not cluster. On the contrary; they are located relatively distant from each other and spread throughout Europe. With the exception of Romania, the low prevalence countries are located on the borders of the European continent.

The overall substance-use trends for all the countries with data from all four waves display a slightly different development depending on the variable in focus. A decrease for cigarette use in the past 30 days is observable for the whole period. The gender difference was four percentage points in 1995, but this small gap has completely vanished in 2007. The upward trend between 1995 and 2003 in lifetime use of illicit drugs — predominantly cannabis — has come to a halt; the 2007 figure is three percentage points below that for 2003. Alcohol use in the past 12 months, non-prescribed lifetime use of tranguillisers or sedatives, lifetime use of alcohol together with pills and lifetime use of inhalants display hardly any changes at all over all four waves. No changes in gender differences are apparent for illicit drugs or the other substances mentioned.

An upward trend is notable, however, for heavy episodic drinking throughout 1995–2007 (9 percentage points increase), mostly explained by the increasing prevalence rates reported among girls in a number of countries. Most measures on substance use show a recent (2003–2007) stable or slightly downward trend on average, except for heavy episodic drinking.

Hence, the overall impression of the long-term changes in substance use among the ESPAD students, based on countries with such data, is one of an **Summary figure.** Trends in 16 substance use measures, by gender. 1995–2007. Average percentages for the 17–20 countries providing trend data for each variable.



Cigarette use during the last 30 days by gender. 1995–2007. Percentages. Averages for 20 countries.



Daily cigarette use at the age of 13 or younger by gender. 1995–2007. Percentages. Averages for 20 countries.



Use of any alcoholic beverage during the last 12 months by gender. 1995–2007. Percentages. Averages for 19 countries.



Use of any alcoholic beverage during the last 30 days by gender. 1995–2007. Percentages. Averages for 19 countries.



Beer consumption during the last 30 days by gender. 1995–2007. Percentages. Averages for 20 countries.



Wine consumption during the last 30 days by gender. 1995–2007. Percentages. Averages for 20 countries.



Proportion reporting having had five or more drinks on one occasion during the last 30 days, by gender. 1995–2007. Percentages. Averages for 17 countries.



Lifetime use of any illicit drug by gender. 1995–2007. Percentages. Averages for 20 countries.



Lifetime use of marijuana or hashish by gender. 1995–2007. Percentages. Averages for 20 countries.



Use of marijuana or hashish during last 30 days by gender. 1995–2007. Percentages. Averages for 19 countries.



Cannabis use at the age of 13 or younger by gender. 1995–2007. Percentages. Averages for 19 countries.



Lifetime use of any illicit drug other than marijuana or hashish by gender. 1995–2007. Percentages. Averages for 20 countries.



Lifetime use of tranquillisers or sedatives without a doctor's prescription by gender. 1995–2007. Percentages. Averages for 20 countries.



Lifetime use of alcohol together with pills by gender. 1995–2007. Percentages. Averages for 17 countries.



Lifetime use of inhalants by gender. 1995–2007. Percentages. Averages for 18 countries.



Lifetime abstinence from tobacco, alcohol, inhalants, tranquillisers or sedatives and illicit drugs. 1995–2007. Percentages. Averages for 17 countries.

improved situation, apart from the heavy episodic drinking measure that display an increase throughout the period.

Trends in individual countries may however diverge from the overall impression. Regarding recent changes, students in Belgium (Flanders), Iceland, Ireland, Switzerland and the United Kingdom often tend to report decreased levels of substance use for many of the variables. Countries with more recent increases are Latvia and the Slovak Republic. A more mixed development is apparent in France, Portugal and Slovenia, where the alcohol variables show upward trends concurrently several drops for other substances such as illicit drug use. A contrary situation is noted for Lithuania and Russia (Moscow), where alcohol and cigarette use is declining at the same time as illicit drug use is rising.

Some long-term country trends could also be mentioned. For instance, an example of a country for which most substance-use measures show no increases at all across all four surveys is the United Kingdom. Actually, for most variables compared, British students show a decrease or at worst a stabilised situation. Examples of other countries with at least an overall stable situation, and for many variables a decreasing trend throughout the period, are Finland, Iceland, Ireland and Sweden.

Countries displaying rather more upward than downward long-term trends are the Czech and Slovak Republics. To some extent, this is also the case for Estonia and Lithuania, even though the figures from the latest wave in 2007 sometimes point to a stabilised situation (but not to a return to the lower levels seen in the 1990s). Countries showing longterm decreases in substance use are often located in western Europe and countries displaying increases are often found in eastern Europe. This is particularly true for recent increases between 2003 and 2007.

To sum up, trend developments over the 12 years of the ESPAD project indicate a fall in smoking in a majority of the countries. The situation is more or less unchanged as regards alcohol use in the past 12 months and the past 30 days. On the other hand, heavy episodic drinking shows a small but continuous increase throughout the period. Use of illicit drugs is still dominated by cannabis use. Four out of the six countries that had the highest prevalence for cannabis in 2003 show a decline in 2007, and not a single country displays an increase for recent (past 30 days) use of cannabis. The overall impression regarding illicit drug use is that the upward trend between 1995 and 2003 now has come to a halt, with a slightly lower figure in 2007 than in 2003.

The fourth ESPAD data collection in 2007 gave a lot of new and important information about changes in students' substance use. The more data collections that follow in the future, the more clearly the trends will be pictured. We are already looking forward to the next survey, to see whether the trend shift in illicit drug use and the drop in cigarette consumption will continue and whether heavy episodic drinking will continue to be more common. The next data collection will be of interest not only for this reason but also because it will be the first follow-up study of the new countries (Armenia and Monaco) as well as for the five new countries that participated in the extra data collection in 2008. We hope that still more European countries will join in the next survey, in addition to the over 40 countries that are part of the ESPAD project already.

## Key drug-specific figures

#### Figure 1a

Lifetime use of any illicit drug (°). All students. 2007. Percentages.



- (<sup>1</sup>) Belgium and Germany: limited geographical coverage.
- (2) Denmark and Spain: limited comparability.
- (°) 'Any illicit drug' includes cannabis, ecstasy, amphetamines, LSD or other hallucinogens, crack, cocaine and heroin.

Boys



Girls

#### Figure 1b

Lifetime use of any illicit drug (°) by gender. 2007. Percentages.

## Figure 2a Lifetime use of marijuana or hashish. All students. 2007. Percentages. Data uncertain or not available Non-participating country: listed percentage avants

geographical coverage. (<sup>2</sup>) Denmark, Spain and USA: limited comparability.



#### Figure 2b

Lifetime use of marijuana or hashish by gender. 2007. Percentages.

## Figure 3a 16-% Use of marijuana or 11–15% hashish last 30 days. All 6–10% students. 2007. 3–5% Percentages. -2% Data uncertain or not available Non-participating country (<sup>1</sup>) Belgium and Germany: limited

geographical coverage.

(<sup>2</sup>) Denmark, Spain and USA: limited comparability.



#### Figure 3b

Use of marijuana or hashish last 30 days by gender. 2007. Percentages.

#### Figure 4a

Lifetime use of illicit drugs other than marijuana or hashish (°). All students. 2007. Percentages.



(<sup>1</sup>) Belgium and Germany: limited geographical coverage.

(²) Denmark and Spain: limited comparability.

 (°) 'Any illicit drug but cannabis' includes ecstasy, amphetamines, LSD or other hallucinogens, crack, cocaine and heroin.



#### Figure 4b

Lifetime use of illicit drugs other than marijuana or hashish (°) by gender. 2007. Percentages.

20 %



(<sup>2</sup>) Denmark, Spain and USA: limited comparability.



#### Figure 5b

Lifetime use of tranquillisers or sedatives without prescription by gender. 2007. Percentages.

European Monitoring Centre for Drugs and Drug Addiction **Summary — the 2007 ESPAD report** Luxembourg: Office for Official Publications of the European Communities 2009 — 18 pp. — 21x29.7 cm ISBN 978-92-9168-357-4

#### About the EMCDDA and ESPAD

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is one of the European Union's decentralised agencies. Established in 1993 and based in Lisbon, it is the central source of comprehensive information on drugs and drug addiction in Europe.

The EMCDDA collects, analyses and disseminates factual, objective, reliable and comparable information on drugs and drug addiction. In doing so, it provides its audiences with an evidence-based picture of the drug phenomenon at European level.

The European School Survey Project on Alcohol and Other Drugs (ESPAD) is a collaborative effort of independent research teams in more than forty European countries, making it the largest cross-national research project on adolescent substance use in the world.

ESPAD was founded in 1993 on the initiative of the Swedish Council for Information on Alcohol and Other Drugs (CAN) and with the support of the Pompidou Group at the Council of Europe. The first data-collection exercise was conducted in 26 countries in 1995. The 2007 ESPAD report presents the results from the fourth wave, conducted in 35 countries during 2007.

This multilingual summary is a product of the cooperation framework that exists between the EMCDDA and ESPAD. Our common aims include broadening access to the information and expertise on alcohol and other drug use among school students developed by the ESPAD project and improving the availability, quality and comparability of school survey data.



