

Drug Use in Ireland and Northern Ireland

2006/2007 Drug Prevalence Survey: Cannabis Results

This bulletin provides a comprehensive overview of many different aspects of cannabis use in Ireland and Northern Ireland. It presents data relating to cannabis use on a lifetime (ever used), last year (recent use) and last month (current use) basis and compares these results with 2002/3 data. The bulletin also examines age of first use, regular use, types of cannabis used, method by which cannabis is used, how and where cannabis is obtained, reasons for stopping use, attitudes towards cannabis use, perceptions of risk and the profile of typical cannabis users. The survey was carried out by Ipsos MORI in Ireland and by the Central Survey Unit of the Northern Ireland Statistics and Research Agency in Northern Ireland according to standards set by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).

Ireland – Key Findings

- Prevalence rates were highest among young adults. The lifetime prevalence rate for those aged 15-34 years was 29%. The last year prevalence rate for young adults (10%) was at least three times higher than for older adults aged 35-64 (3%) and last month prevalence rate was four times higher among young adults (4%) than older adults (1%).
- Male respondents reported higher prevalence rates than females across all time periods. The lifetime prevalence rate for males was 27% compared to 17% for females.
- The average age the respondents reported that they first used cannabis was 18 years for both males and females. The average age of first regular use was also 18 years.
- Approximately one-in-four (24%) of current cannabis users used the drug on a daily or almost daily basis.
- The majority of current users (93%) smoked cannabis in a joint.
- Cannabis resin (also known as hash) was the most commonly used form of cannabis (60%); however, over one-third (38%) of current users reported smoking herbal cannabis (i.e. grass, weed, herb and skunk).

- The majority of cannabis users were either given the drug by family/friends (44%) or shared the drug amongst friends (28%).
- The majority of respondents (62%) considered it 'very easy' or 'fairly easy' to obtain cannabis within a 24-hour period.
- Over one-quarter (26%) of respondents who said that they had ever taken cannabis reported taking the drug regularly. Of these the majority (66%) said they had stopped taking cannabis, 10% had tried to stop but failed, whilst nearly one-in-four regular users (24%) had never tried to stop.

Northern Ireland – Key Findings

- Prevalence rates were highest among young adults. The lifetime prevalence rate for those aged 15-34 years was 35%. The last year prevalence rate for young adults (12%) was four times higher than for older adults aged 35-64 (3%) and the last month prevalence rate for young adults (4%) was twice that of older adults (2%).
- Male respondents reported higher prevalence rates than females across all time periods. The lifetime prevalence rate for males was 30% compared to 19% for females.

- The average age respondents reported that they first used cannabis was 18 years for males and 19 years for females. Among regular users, the average age of first use of cannabis was 16 years and the average age of first regular use was 18 years.
- Approximately one-in-six (16%) of current cannabis users reported using the drug on a daily or almost daily basis.
- The majority of current users (85%) smoked cannabis in a joint.
- Grass (43%) was the most commonly used form of cannabis; however one-third of current users (33%) reported using cannabis resin.
- More than one-third (35%) of recent cannabis users reported the drug was shared among friends, with another 30% being given the drug by family/friends.
- Three-quarters of recent users (75%) considered it 'very easy' or 'fairly easy' to obtain cannabis within a 24-hour period.
- Almost one-quarter (24%) of respondents who said that they had ever taken cannabis reported taking the drug regularly. Of these regular users, almost three-quarters (74%) said they had stopped taking cannabis, 13% had tried to stop but failed while another 13% had never tried to stop.

Comparisons in Prevalence Rates between 2002/3 and 2006/7

All findings reported are statistically significant at least at the 5% level. Some of the findings presented here have previously been published in Bulletin 1.

Ireland

- Lifetime use of cannabis increased among all adults aged 15-64 from 17.4% in 2002/3 to 21.9% in 2006/7.
- Increases in lifetime use of cannabis were found among males (from 22.4% to 27.0%), females (from 12.3% to 16.6%), young adults aged 15-34 (from 24.0% to 28.6%) and older adults aged 35-64 (from 11.4% to 16.1%).
- Last year use of cannabis increased among all adults aged 15-64 from 4.5% in 2002/3 to 6.3% in 2006/7.

Northern Ireland

- Lifetime use of cannabis increased among all adults aged 15-64 from 16.8% in 2002/3 to 24.7% in 2006/7.
- Increases in lifetime use of cannabis were also found among males (from 23.3% to 30.1%), females (from 10.5% to 19.3%), young adults aged 15-34 years (from 25.1% to 35.0%) and older adults aged 35-64 years (from 10.3% to 17.3%).
- Last year use of cannabis increased among all adults aged 15-64 from 5.4% in 2002/3 to 7.2% in 2006/7.
- Increases in last year use were also seen among females (from 2.2% to 4.1%) and older adults aged 35-64 years (from 2.0% to 3.3%) between 2002/3 and 2006/7.
- There were no significant increases in last month use of cannabis among any of the groups of respondents.

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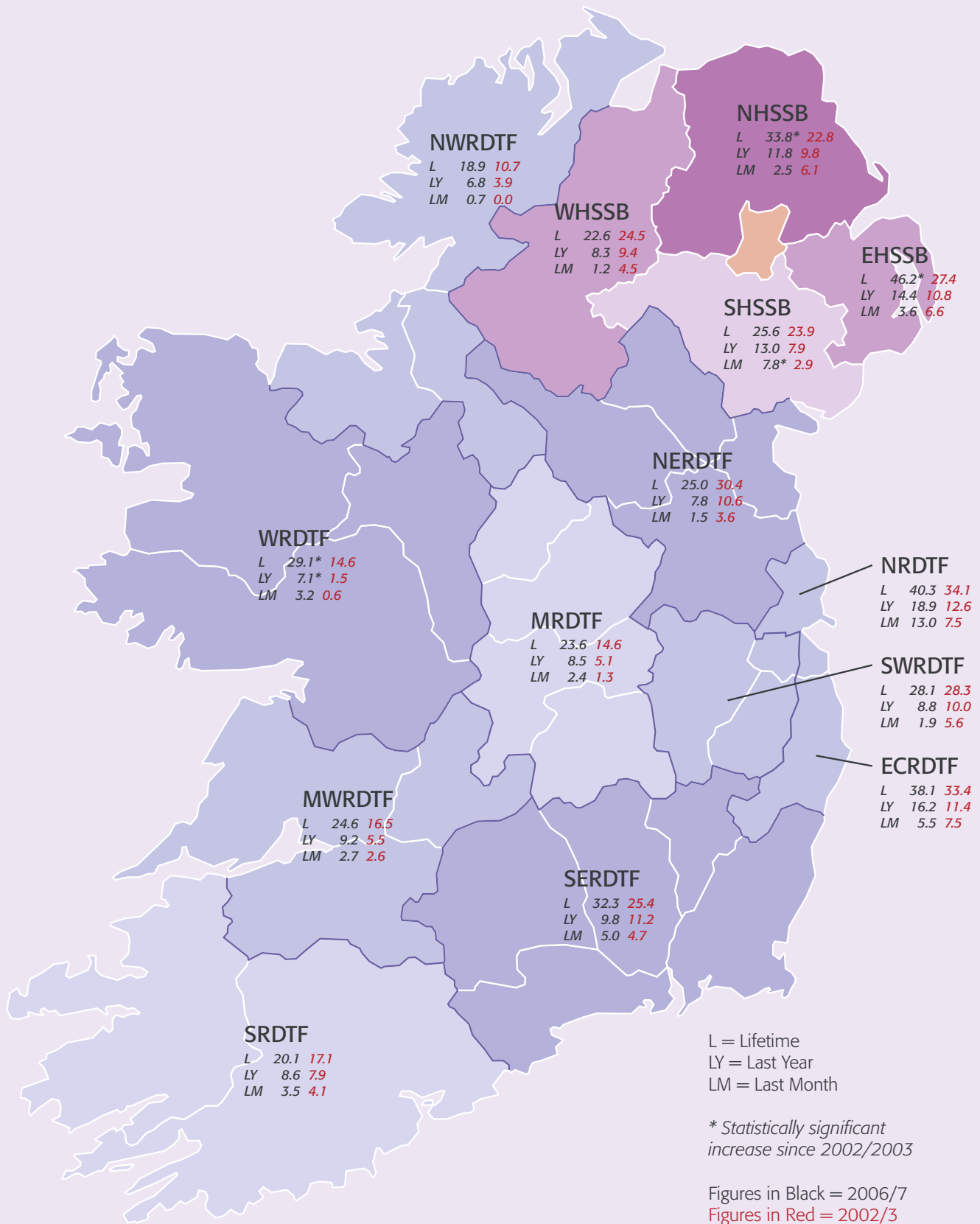
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Map 1:
Cannabis Use: prevalence rates for young adults aged 15-34 years by Regional Drugs Task Force (RDTF) and Health and Social Services Board (HSSB) areas 2006/7



Purple boundary and shading highlights the RDTF areas.
 HSSB areas are highlighted in pink shading.

Introduction

The survey was commissioned by the National Advisory Committee on Drugs (NACD) in Ireland and the Public Health Information and Research Branch (PHIRB), formerly known as Drug and Alcohol Information and Research Unit (DAIRU), within the Department of Health, Social Services and Public Safety (DHSSPS) in Northern Ireland.

The main focus of the survey was to obtain prevalence rates for key illegal drugs, such as cannabis, ecstasy, cocaine and heroin, on a lifetime (ever used), last year (recent use), and last month (current use) basis. Similar prevalence questions were also asked of alcohol, tobacco, and other drugs (e.g. tranquillisers); attitudinal and demographic information was also sought from respondents.

Methodology

The questionnaire and methodology for this survey were based on best practice guidelines drawn up by the EMCDDA. The questionnaires were administered through face-to-face interviews with respondents aged between 15 and 64 normally resident in households in Ireland and Northern Ireland. Thus persons outside these age ranges, or who do not normally reside in private households, have not been included in the survey. This approach is commonly used throughout the EU and because of the exclusion of those living in institutions (for example, prisons, hostels) this type of prevalence survey is usually known as a general population survey.

Fieldwork for the survey was carried out between October 2006 and May 2007 and the final achieved sample was 6,969 (4,967 in Ireland and 2,002 in Northern Ireland). The response rate for the survey was 65% in Ireland and 62% in Northern Ireland. Area based sampling was applied in Ireland. The first stage involved stratifying by Health Board¹/Regional Drugs Task Force (RDTF) area in Ireland. Within the Health Board/RDTF strata Electoral Divisions (EDs) were selected as areas. In Northern Ireland, the first stage involved stratifying by Health and Social Services Board (HSSB) areas and within the strata simple random sampling was used. The achieved sample was weighted by gender, age, RDTF area in Ireland and HSSB area in Northern Ireland, to maximise representativeness of the general population. The effects of stratification, clustering and weighting have been incorporated in the interval estimates (i.e. design effect adjusted). Details of the methodology have been summarised in a paper published on the websites of the NACD (<http://www.nacd.ie/>) and the DHSSPS (<http://www.dhsspsni.gov.uk/>) in

comprehensive technical reports containing copies of the questionnaires used in each jurisdiction.

The Research Advisory Group (RAG) decided to change from using a pen and paper interviewing technique to computer-assisted personal interviewing (CAPI), where the interviewer records responses electronically. This technique has several advantages: interviews can be administered more quickly; human error is minimised, yielding higher-quality data; and data input is managed more efficiently, thus cutting costs.²

As with other European surveys, people over the age of 64 are excluded from this survey, as they grew up in an era when both the use and availability of illegal drugs were very limited. Therefore surveys with older people have, to date, shown very low rates of use even on a lifetime basis. This situation will change over time as the younger population grows older. Hence, lifetime prevalence rates are likely to increase for a considerable period of time. When examining the data and comparing results over time, last year use is the best reflection of change as it refers to recent use. Last month use is equally valuable as it refers to current use.

What is Prevalence?

The term prevalence refers to the proportion of a population who has used a drug over a particular time period. In general population surveys, prevalence is measured by asking respondents in a representative sample drawn from the population to recall their use of drugs. The three most widely used recall periods are: lifetime (ever used a drug), last year (used a drug in the last twelve months), and last month (used a drug in the last 30 days). Provided a sample is representative of the total population, prevalence information obtained from a sample can be used to infer prevalence in the population.

Lifetime prevalence refers to the proportion of the sample that reported ever having used the named drug at the time they were surveyed. A person who records lifetime prevalence may – or may not – be currently using the drug. Lifetime prevalence should not be interpreted as meaning that people have necessarily used a drug over a long period of time or that they will use the drug in the future.

Last year prevalence refers to the proportion of the sample that reported using a named drug in the year prior to the survey. For this reason, last year prevalence is often referred to as recent use.

Last month prevalence refers to the proportion of the sample that reported using a named drug in the 30 day period prior to the survey. Last month prevalence is often referred to as current use. A proportion of those reporting current use may be occasional (or first-time) users who happen to have used in the period leading up to the survey – it should therefore be appreciated that current use is not synonymous with regular use.

1 Since January 2005 the Health Boards in Ireland have undergone restructuring and are merged under one authority – the Health Service Executive. However for the purpose of comparison with 2002/3 data, we have continued to weight the data by the former Health Board areas as these correspond with the Regional Drugs Task Force (RDTF) structures. The above reference relates to the Health Board structures details in *Bulletin 2: Drug Use in Ireland and Northern Ireland 2002/2003 Drug Prevalence Survey – Health Board (Ireland) & Health and Social Services Board (Northern Ireland) Results (Revised)* June, 2005.

2 EMCDDA Handbook on Population Surveys.

Understanding the Results in this Bulletin

First results from the second Drug Prevalence Survey were published in Bulletin 1 (January 2008). They gave lifetime, last year and last month prevalence rates for key drugs for the Island of Ireland, Ireland and Northern Ireland. Bulletin 2, published in June 2008, contained comparable information for Ireland and its constituent Regional Drugs Task Force areas (former Health Board areas) and Northern Ireland and its constituent Health and Social Services Board areas.

Bulletin 4 (2006/7 Drug Prevalence Survey: Cocaine Results) published in October 2008, contained prevalence rates for the use of cocaine and examined age of first use, regular use, and method of taking cocaine, ease of obtaining cocaine, reasons for stopping use, perceptions of risk together with the typical profile of cocaine users.

This bulletin (*Bulletin 3*) contains prevalence rates for the use of cannabis and other information relating to cannabis use in Ireland and Northern Ireland for 2006/7 and also provides comparison information between 2002/3 and 2006/7. Results are given for all respondents, and are also presented by gender and by age (young adults aged 15-34 and older adults aged 35-64).

Readers should note that the total sample size for each group is given at the head of each column. All prevalence rates presented in the accompanying tables are rounded to one decimal place and are rounded to whole numbers in the text (except for percentages less than 1%). Changes in prevalence rates between 2002/3 and 2006/7 are also rounded to one decimal place and reported in this format in the text.

As in all sample surveys, the greater the sample size the more statistically reliable are the results. Some of the differences in prevalence rates in the tables will be attributable to natural sample variations. Detailed confidence intervals for all prevalence rates contained in this bulletin can be found on the websites of the NACD and DHSSPS in Bulletin 1 and 2.

Invalid responses have been excluded from all analyses. Percentages may not always sum to 100 due to either the effect of rounding or where respondents could give more than one answer.

Where the figure 0.0% appears it does not mean that no-one has used the drug, rather it means that in this category no respondent reported use. The confidence intervals will provide a prevalence rate for all categories of drug use reported for lifetime, last year and last month, by gender and by age. Details regarding the calculation of confidence intervals can be found in the Technical Report published on the NACD and DHSSPS websites.

Two statistical tests were used to examine the relationship between cannabis use and other variables such as age, gender, economic status and the study year.

The Chi-Square test examined the association between categorical variables and cannabis use in 2006/7. For the purposes of this study, a p-value of less than 0.05 indicated that a true association or relationship existed and the differences observed were not due to chance. The Z-Test was used to compare differences in the proportions for selected variables, for example 'how cocaine was obtained' between 2002/3 and 2006/7.

In an attempt to compare prevalence rates for cannabis use across different social classes/socio-economic groups, the Standard Occupational Classification (SOC2000) was used in Ireland. The SOC2000 is based on the employment status, level of responsibility and qualifications, of the chief income earner within a household. Respondents were then coded into social grades.

SOC2000 Classification

- A** Professionals, senior management and top civil servants
- B** Middle management, senior civil servants, managers and owners of business
- C1** Junior management and owners of small businesses
- C2** Skilled manual workers and manual workers responsible for other workers
- D** Semi-skilled and unskilled manual workers, trainees and apprentices
- E** All those dependent on the State long-term

Respondents were coded into the following social grades in Northern Ireland based on the National Statistics Socio-Economic Classification (NSSEC) as this has replaced the Social Class based on Occupation and Socio-Economic Group (SEG). The NSSEC classification data shown in Table 37 relate to the individual.

NSSEC Classification

- Managerial and professional occupations
- Intermediate occupations
- Small employers and own account workers
- Lower supervisory and technical occupations
- Semi-routine and routine occupations
- Never worked and long-term unemployed.

Some of the tables for Ireland (Tables 15-17, 19) and Northern Ireland (Tables 37-40) differ slightly with regard to response categories. Table 18: Ireland Age Education Ceased has no comparable table in Northern Ireland.

Glossary

Bong

A water pipe through which the hot smoke is cooled down before being inhaled.

Grass/Weed

Slang terms for herbal cannabis.

Resin

Produced by separating the resinous parts of the plant from the leaves etc.

Hash, Hashish

Cannabis resin.

Hash Oil

A purified and concentrated form of resin or herbal cannabis.

Herb

The fresh or (more commonly) dried leaves and flowering tops of the plant.

Joint

A cannabis cigarette (also known as a spliff, reefer etc.).

Skunk

A type of high-potency herbal cannabis.

Results – Ireland

Prevalence of Cannabis Use (Table 1)

More than one-in-five respondents (22%) aged 15-64 reported the lifetime use of cannabis; 6% reported use in the last year and 3% reported last month use.

Results comparison with 2002/3 survey

Since the previous survey, there was a significant increase among all adults aged 15-64 in the lifetime use of cannabis (from 17.4% to 21.9%). Last year use of cannabis increased among all adults aged 15-64 from 4.5% in 2002/3 to 6.3% in 2006/7.

Age (Table 1)

Young adults reported higher cannabis prevalence rates than older adults across all three time periods. The lifetime prevalence rate for young adults aged 15-34 years was 29% compared with 16% for older adults aged 35-64 years. The last year prevalence rate for young adults aged 15-34 (10.4%) was four times the rate for older adults aged 35-64 (2.6%), while last month prevalence rate for young adults (4.2%) was more than three times that for older adults (1.2%).

Results comparison with 2002/3 survey

Since the previous survey in 2002/3, significant increases in the lifetime use of cannabis were found among both young adults aged 15-34 years (from 24.0% to 28.6%) and older adults aged 35-64 years (from 11.4% to 16.1%).

Gender (Table 1)

Male respondents reported higher cannabis prevalence rates than females across all three time periods. The lifetime prevalence rate for males was 27% compared with 17% for females. The last year cannabis prevalence rate for males (9%) was more than double that for females (4%) and the last month prevalence rate for males (4%) was four times the rate for females (1%).

Results comparison with 2002/3 survey

Since the previous survey in 2002/3, significant increases in the lifetime use cannabis were found among both males (from 22.4% to 27%) and females (from 12.3% to 16.6%).

First use (Table 2)

The average age that respondents reported first use of cannabis was 18 years³ - this was true for both males and females, and young adults aged 15-34 years. Older adults aged 35-64 reported an older average³ age of first use (20 years). Regular cannabis users reported a younger average age of first use (17 years).

³ The median was used to measure central tendency in the case of the age of first use to avoid extreme values skewing the results.

Results comparison with 2002/3 survey

In the previous survey, the average³ ages of first use of cannabis were broadly similar, except for young adults aged 15-34 – they reported a younger average³ age of first cannabis use (17 years) in the 2002/3 survey.

First regular use (Table 2)

The average³ age of first regular use of cannabis was 18 years – this was true for young adults, and males and females. Older adults reported an average age of 20 years for first regular use of cannabis.

The period of time between first using cannabis and becoming a regular user (lag⁴) was two years in all instances.

Results comparison with 2002/3 survey

In the previous survey, the average³ ages of first regular use of cannabis were similar, however, females and young adults reported first regular use at a younger age (17 years). The lag between first use and becoming a regular user was the same (two years).

Frequency of use (Table 3)

More than one-third (37%) of current cannabis users reported taking the drug less than once a week in the previous month; 28% reported cannabis use at least once a week (4-9 days) and 10% reported use several times a week. Approximately one-in-four (24%) current cannabis users reported daily or almost daily use.

Similarly, one-third of male current users (34%) reported taking cannabis less than once a week; 29% reported using the drug at least once a week (4-9 days) and a similar proportion reported daily or almost daily use (28%). Among female respondents, approximately half (49%) of current users reported taking cannabis less than once a week, 24% reported use at least once a week and 12% reported daily or almost daily use.

Among young adults aged 15-34 years 37% of current cannabis users reported taking the drug less than once a week; 27% reported cannabis use at least once a week and one-in-four (25%) current users reported daily or almost daily cannabis use. Among older adults aged 35-64 years, one-in-three (33%) current cannabis users reported taking the drug at least once a week and 22% reported daily or almost daily use.

Results comparison with 2002/3 survey

In the previous survey, male current cannabis users were more likely to report use less than once a week (41%) than in this survey, and they were less likely to report weekly use (20%). A similar proportion reported daily or almost daily use (27%) in 2002/3 as in 2006/7. Conversely, female current cannabis users

in 2002/3 were less likely to report use less than once a week (40%). Older adults were more likely to have reported use as less than once per week in 2002/3 (50%) than in this survey, however a similar proportion (21%) reported daily or almost daily use in 2002/3 and in 2006/7. These apparent changes since 2002/3 were not statistically significant.

Type of cannabis used (Table 4)

Hash was the most commonly used form of cannabis; 54% of current cannabis users aged between 15-64 years reported using hash and 6% reported using cannabis resin. More than one-in-four (27%) current cannabis users reported using grass; an additional 8% reported using 'weed', 2% reported using 'herb' and 1% reported using skunk.

One-in-two (50%) male cannabis users reported using hash; as did the majority (66%) of female cannabis users.

However, women were less likely than men to report the use of grass (23% compared to 28%) and weed (3% compared to 10%). Female cannabis users were also less likely to know what form of the drug they used compared to their male counterparts (3% compared to 0%).

Older adults aged 35-64 years (13%) were approximately three times more likely to report using resin than young adults aged 15-34 years (4%), conversely young adults were more likely to identify weed as their most commonly use form of cannabis than older adults (11% compared to 0%). Only older adults aged 34-65 years (3%) and males (1%) reported using hash oil.

Results comparison with 2002/3 survey

As the coding of responses changed since the last survey, statistical comparisons cannot be made, however, it is worth noting that the proportions reporting the use of grass were substantially lower in 2002/3 among all adults aged 15-64 (18%), among males (19%), females (16%) and young adults (16%).

Smokers of herbal cannabis and whether it was grown in Ireland (Table 5)

Respondents who report current cannabis use and smoked herbal cannabis (in the form of grass, weed, herb or skunk) were asked whether the cannabis they smoked in the last month was grown in Ireland. More than half (51%) of respondents stated that the cannabis they smoked was not grown in Ireland, whereas 16% reported that it was. One-in-three respondents did not know where the cannabis they smoked was grown. Older adults aged 35-64 years were four times more likely than young adults to report smoking Irish grown cannabis (43% compared to 11%). Female respondents were more likely than males to state that they did not know whether the cannabis they smoked was grown in Ireland (54% compared to 29%).

⁴ Lag was calculated by measuring the time in years between when a respondent reported first using cannabis and first using cannabis regularly.

Method by which cannabis is used (Table 6)

The vast majority of current users (93%) reported smoking cannabis in a joint; an additional 4% reported smoking it in a pipe, 3% smoked it in a bong and 0.8% reported eating it. A higher proportion of females (96%) reported smoking cannabis in a joint than males (92%). Conversely, males were more likely than females to smoke it in a pipe (5% compared to 0%) or a bong (3% compared to 0%). Older adults aged 35-64 years were more likely than young adults aged 15-34 to smoke cannabis in a pipe (4% compared to 3%) or in a bong (4% compared to 2%). Only females (4%) and young adults aged 15-34 years (1%) reported eating cannabis.

Results comparison with 2002/3 survey

As the coding of responses changed since the last survey, statistical comparisons cannot be made. However, in the previous survey the vast majority of respondents (98%) also reported smoking cannabis in a joint.

How cannabis was obtained (Table 7)

All respondents who reported using cannabis in the last twelve months were asked how they had obtained the drug on the last occasion. The majority of respondents were either given the drug by a family member or friend (44%) or shared the drug amongst friends (28%). More than one-in-five respondents (22%) reported having bought the drugs from either a friend (15%), a contact not known personally (6%) or a stranger (1%).

Generally, male respondents were more likely than females to report having bought cannabis; males were more than twice as likely as females to have bought the drug from a friend (18% compared to 6%); the same proportion of males and females reported buying the drug from a contact not known personally (6%), and 1% of males bought cannabis from a stranger, whereas no females did. Conversely, females were more likely than males to report having shared the drug amongst friends (33% compared to 26%) or having been given it by family or friends (52% compared to 41%).

Young adults aged 15-34 were twice as likely as older adults aged 35-64 to report sharing the drug amongst friends (32% compared to 16%). Conversely, older adults aged 35-64 years were more likely than young adults to report having been given the drug by family or friends (52% compared to 42%).

Results comparison with 2002/3 survey

In the previous survey almost one-third (31%) of all adults aged 15-64 years reported being given cannabis by a family member or friend; similar proportions were observed across gender and age categories. Among all adults aged 15-64 years one-fifth (20%) of recent cannabis users reported buying the drug from a friend and 16% reported buying the drug from a contact not known personally.

Since the previous survey in 2002/3, among all adults aged 15-64 years there was a significant increase in the proportion of those who were given cannabis by family or friends, and a significant drop in the proportion who reported buying cannabis from a contact not known personally. These significant changes in responses occurred across gender and age categories.

Where cannabis was obtained (Table 8)

Respondents who had recently taken cannabis were asked where they had obtained the drug on the last occasion that they had used it. Over half (57%) of all respondents reported obtaining cannabis at the house of friends, 12% obtained it in the street/park, 8% reported getting cannabis in a disco/bar/club and 5% ordered the drug by phone.

Male respondents (10%) were three times more likely than females (3%) to report obtaining cannabis in a disco/bar/club, or to have obtained it in school/college (3% compared to 1% respectively) and males were twice as likely as females to have ordered the drug by phone (6% compared to 3%). On the other hand the majority of females reported obtaining cannabis in the house of friends (73%) compared to 50% of males. No females reported obtaining cannabis in the office/workplace compared to 2% of the male respondents. The majority of young adults aged 15-34 years (58%) and older adults (53%) reported obtaining cannabis in the house of friends. Older adults were more likely to obtain the drug in the street/park than young adults (17% compared to 11%). While similar proportions of young and older adults reported obtaining cannabis in their office/workplace (2%), young adults aged 15-34 years were twice as likely as older adults to obtain the drug in school/college (3% compared to 1.5%).

Results comparison with 2002/3 survey

A similar proportion of respondents in the previous survey reported obtaining cannabis in the house of a friend (57%) however a greater proportion of respondents reported obtaining the drug in a disco/bar/club (20%). In addition, in the 2002/3 survey no respondents reported obtaining cannabis in either the office/workplace or school/college.

Since the previous survey in 2002/3, among all adults aged 15-64 years there was a significant drop in the proportion of those who obtained cannabis in a disco/bar/club. This significant change in responses also occurred among both male and female respondents and young adults.

Ease of obtaining cannabis (Table 9)

The majority of recent cannabis users (62%) considered it 'very easy' or 'fairly easy' to obtain the drug within a 24-hour period. This was true for male (63%) and female respondents (58%), and both young (62%) and older respondents (60%). However, older adults aged 35-64 years were more than twice as likely as young adults to consider it 'very difficult' to obtain cannabis within a 24-hour period (7% compared to 3%).

Results comparison with 2002/3 survey

In the previous survey a higher proportion of all respondents considered it 'very easy' or 'fairly easy' to obtain cannabis within a 24-hour period (79%). On the other hand, in the 2002/3 survey lower proportions considered it 'fairly difficult' (7%) and 'very difficult' (0.6%) to obtain the drug.

Since the previous survey in 2002/3, there was a significant drop in the proportions who considered it 'very easy' to obtain cannabis in a 24-hour period among all adults aged 15-64 years and a significant increase in the proportions who considered it 'fairly difficult' and 'very difficult' to obtain the drug.

Stopping cannabis use and reasons for stopping (Tables 10 & 11)

Over one-quarter (26%) of all respondents who said that they had ever taken cannabis reported using the drug regularly. Male cannabis users were more likely than female cannabis users to report regular use (31% compared to 18%) similarly young adult cannabis users aged 15-34 were more likely than older adults cannabis users aged 35-64 to report regular use of the drug (30% compared to 19%).

Among all adults, two-thirds of regular cannabis users (66%) said that they had stopped taking cannabis, 10% said that they had tried to stop but failed and almost one-quarter (24%) had never tried to stop.

The same proportion (66%) of male and female regular cannabis users reported having stopped taking the drug. However, males were more likely than females to have never tried to stop (25% compared to 20%) and females were more likely than males to report having tried but failed to stop (13% compared to 8%).

Older adult regular cannabis users were proportionately more likely than young adult regular users to report having stopped taking cannabis (73% compared to 64%). Conversely, young adult regular users were more likely than older adult regular users to have never tried to stop taking cannabis (27% compared to 17%).

Among all adult regular users who stopped using cannabis, approximately one-third (32%) said that it was because they no longer wanted to take the drug, 19% said it was due to health concerns and 17% said it was because it was no longer part of their social life.

Males were four times more likely than females to say that they stopped using cannabis because of the impact on their job/friends and family (9% compared to 2%) or because they were persuaded to stop by friends/family (4% compared to 0%). One-in-five males (21%) compared to 13% of females said they stopped due to health concerns, while 14% of females said they stopped taking cannabis due to pregnancy.

Similar proportions of young (33%) and older adults (31%) said they had stopped because they did not want to take cannabis anymore; however, older adults (28%) were twice as likely as young adults (12%) to say it was no longer part of their social life. Conversely, young adults were more likely than older adults to say they stopped due to health concerns (20% compared to 16%) and due to the impact of use on their job/friends and family (10% compared to 0%).

Results comparison with 2002/3 survey

In 2002/3, a similar proportion of those who had ever used cannabis reported taking it regularly (27%). The proportion of regular users, who reported never having tried to stop taking cannabis (30%), was higher in the previous survey, across gender and age group. However, none of the apparent changes since 2002/3 were statistically significant.

In the 2002/3 survey, a higher proportion of respondents said that they stopped taking cannabis due to the cost of the drug (8%) and less available supply (5%) however, as the coding of responses changed since the last survey statistical comparisons could not be made.

Attitudes towards cannabis use (Table 12)

All those surveyed who had heard of cannabis were asked about their attitudes regarding cannabis use. The attitudes of this group were then compared with the attitudes of two mutually exclusive groups – those who said that they had used cannabis at some stage in their lives and those who said that they had never used cannabis.

In general, those who had ever used cannabis had more liberal views towards the use of cannabis for both medical and recreational use than those who had never used.

The majority (71%) of those surveyed felt that cannabis use should be permitted for medical reasons. Males and older adults aged 35-64 were most likely to agree with the medical use of cannabis (73% and 74% respectively). A higher proportion of those who had ever used cannabis (87%) agreed with the medical use of it than those who had never used the drug (67%). This was true across gender and age.

In contrast, only 19% of all respondents agreed that cannabis use should be permitted for recreational purposes. Eleven percent of those who had never used cannabis agreed that recreational use should be permitted, compared to 48% of those who had ever used the drug. For both groups, males (14% and 52% respectively) were more likely to agree with recreational use than females (8% compared to 43%).

Respondents were also asked to rate their level of disapproval to the occasional use of cannabis – 82% of respondents who had never used cannabis compared to 29% of those who had ever used cannabis disapproved of people smoking cannabis

occasionally. For both groups females (84% and 32% respectively) were more likely to disapprove than males (80% and 28%), and older adults (84% and 31% respectively) were more likely to disapprove than young adults (79% and 28% respectively).

Results comparison with 2002/3 survey

Medical reasons

In 2002/3, a higher proportion (44%) of all respondents 'fully agreed' that cannabis use should be permitted for medical reasons. Similarly, the proportions of respondents who had never used cannabis (42%) and who had ever used cannabis (72%), who 'fully agreed' that cannabis use should be permitted for medical use, were higher in the previous survey than in 2006/7. These changes were statistically significant.

Recreational reasons

In 2002/3, a higher proportion (9%) of respondents 'fully agreed' that cannabis use for recreational reasons should be permitted. The proportions of respondents who had never used cannabis (4%) and who had ever used cannabis (32%), who 'fully agreed' that cannabis should be permitted for recreational use, were higher in the previous survey than in 2006/7. These changes were statistically significant across gender and age categories among those who had ever used cannabis and for males and young adults in the general population.

Smoking cannabis occasionally

In 2002/3, a lower proportion (33%) of all respondents 'strongly disapproved' of the occasional use of cannabis. Similarly, the proportions of respondents who had never used cannabis (39%) and who had ever used cannabis (4%), who 'strongly disapproved' of occasional cannabis use, were lower in the previous survey than in 2006/7. These changes were statistically significant across gender and age categories among those who had never used cannabis, and among females and young adults in the general population.

Risk perceptions (Table 12)

When asked about the risk involved in the use of the drug, approximately two-in-three (68%) respondents who had never used cannabis compared to less than one-third (30%) of respondents who had ever used cannabis, felt that there was a great risk in smoking cannabis regularly.

Males and females who had never used cannabis were more than twice as likely (63% and 73% respectively) as males and females who had ever used cannabis (28% and 33% respectively) to perceive cannabis use as a 'great risk'. In general, males were less likely to perceive cannabis use as a 'great risk' than females.

Both young adults aged 15-34 years (59%) and older adults (75%) who had never used cannabis were proportionately more likely to have felt that there was a 'great risk' associated with regular cannabis use, compared to young (28%) and older adults (32%) who had ever used cannabis.

Results comparison with 2002/3 survey

In 2002/3, a lower proportion (57%) of all respondents felt that there was a 'great risk' associated with regular cannabis use. Similarly, the proportions of respondents who had never used cannabis (64%) and who had ever used cannabis (25%), who perceived regular use to be a 'great risk', were lower in the previous survey than in 2006/7. These changes were statistically significant.

Profile of cannabis users

For the purpose of the statistical tests detailed below a cannabis user is defined as someone who has ever used cannabis on a lifetime basis.

Tests were performed on the data for lifetime, last year and last month prevalence rates.

Gender (Table 13)

The results of the three chi-square tests were statistically significant. This indicated that there is an association between gender and cannabis use. Males were proportionately more likely than females to have ever used cannabis, to have used it in the last twelve months, and to report current use of the drug.

Results from the 2002/3 survey found the same association between gender and cannabis use.

Age (Table 14)

The results of the three chi-square tests were statistically significant. This indicated that there is an association between age and cannabis use. Young adults aged 15-34 were proportionately more likely than older adults aged 35-64 to report lifetime, last year and current (last month) cannabis use.

Results from the 2002/3 survey found the same association between age and cannabis use.

Socio-economic group (Table 15)

The results of the three chi-square tests were statistically significant. This indicated that there is an association between socio-economic group (SEG) and cannabis use for lifetime, last year and last month use. Respondents from the SEG C1 (junior management and owners of small businesses) had higher lifetime, last year and last month cannabis prevalence rates than expected, whereas respondents in the SEG C2 (skilled manual workers and manual workers responsible for other work) and SEG B (middle management, senior civil servants, managers and owners of businesses) had lower lifetime, last year and last month prevalence rates than expected. Respondents from the SEG D (semi-skilled and unskilled manual workers, trainees and apprentices) had higher last year and last month cannabis prevalence rates than expected.

Results from the 2002/3 survey found an association between SEG and lifetime and last month cannabis use.

Work status (Table 16)

The results of the two chi-square tests were statistically significant. This indicates that there was an association between work status and lifetime and last year cannabis use. Respondents who were in paid work had a higher lifetime prevalence rate than expected, whereas respondents who were not in paid work had a lower lifetime and last year prevalence rate than expected. Students had a higher last year cannabis prevalence rate than expected.

Results from the 2002/3 survey found similar associations between work status and cannabis use.

Housing tenure (Table 17)

The results of the three chi-square tests were statistically significant. This indicated that there is an association between housing tenure and cannabis use. Respondents who rented property from a private landlord had a higher lifetime, last year and last month cannabis prevalence rate than expected, whereas respondents who owned their home had a lower lifetime, last year and last month prevalence rate than expected.

Results from the 2002/3 survey found the same associations between housing tenure and cannabis use.

Age education ceased (Table 18)

The results of the two chi-square tests were statistically significant. This indicates that there is an association between lifetime and last year prevalence rates and age education ceased. Respondents who left education aged 20 years or older had a higher lifetime and last year prevalence rate than expected, whereas respondents who left education aged 15 years and younger had a lower lifetime and last year prevalence rate than expected.

Results from the 2002/3 survey found an association between age education ceased (20 years or older) and lifetime cannabis use.

Education level (Table 19)

The results of the two chi-square tests were statistically significant. This indicates that there is an association between lifetime and last year prevalence rates and education level attained. Respondents who had an elementary and lower second level education had lower lifetime and last year prevalence rates than expected. Respondents who had upper level secondary education had higher lifetime and last year prevalence rates than expected and those who had third level education had a higher lifetime prevalence rate than expected.

Results from the 2002/3 survey found this association only with third level education and lifetime prevalence.

Results – Northern Ireland

Prevalence of cannabis use (Table 23)

One-quarter of respondents (25%) aged 15-64 reported that they had taken cannabis at some stage in their lives, with 7% having used in the last year and 3% having used in the last month.

Results comparison with 2002/3 survey

Since the previous survey, there were significant increases among all adults aged 15-64 in the lifetime (from 16.8% to 24.7%) and in the last year (from 5.4% to 7.2%) use of cannabis. There was no statistically significant change in the current cannabis prevalence rate among all adults.

Age (Table 23)

Overall, cannabis prevalence rates were higher among young adults across all time periods. The lifetime prevalence for young adults aged 15-34 (35%) was double the rate for older adults aged 35-64 (17%) while the last year prevalence rate for young adults (12%) was four times that for older adults (3%). The rate of last month use of cannabis for those aged 15-34 (4%) was twice that for those aged 35-64 (2%).

Results comparison with 2002/3 survey

Since the previous survey in 2002/3, significant increases in the lifetime use of cannabis were found among both young adults aged 15-34 years (from 25.1% to 35.0%) and older adults aged 35-64 years (from 10.3% to 17.3%). A significant increase was also found among older adults aged 35-64 years in their last year use of cannabis where prevalence increased from 2.0% to 3.3% between 2002/3 and 2006/7.

Gender (Table 23)

Male respondents reported higher cannabis prevalence rates than females across all time periods. The lifetime prevalence rate for males was 30% compared to 19% for females. The last year prevalence rate for males (10%) was more than double that for females (4%) while last month prevalence rates for males and females were 4% and 2%, respectively.

Results comparison with 2002/3 survey

Since the previous survey in 2002/3, significant increases in the lifetime use of cannabis were found among both males (from 23.3% to 30.1%) and females (from 10.5% to 19.3%). Females also showed a significant increase in last year cannabis use (from 2.2% to 4.1%).

First use (Table 24)

For respondents who had ever taken cannabis, the average age that they had first used cannabis was reported as 18 years.⁵ Females were slightly older at 19 years compared to males at 18 years. Young adults aged 15-34 reported a lower average⁵ age of first use (17 years) while older adults aged 35-64 reported an average age of first use of 20 years.

The average⁵ age that regular users reported they had first used cannabis was 16 years. This was also true for males, females and young adults. However, among older adults who are regular users, the average age that they first used cannabis was higher at 19 years.

Results comparison with 2002/3 survey

Among all users of cannabis, the average⁵ age of first use has remained unchanged since 2002/3 for all adults, males, females and young adults. However, older adults aged 35-64 reported a higher average age of first use of cannabis (21 years) in the previous survey.

Among regular users of cannabis, the average⁵ age of first use has remained unchanged since the previous survey for all adults, males and young adults. In 2002/3, females and older adults aged 35-64 reported a higher average age of first use of cannabis (17 years and 20 years respectively).

First regular use (Table 24)

Among regular users, the average⁵ age of first regular use of cannabis was reported as 18 years – this was also true for males and females. The average age of first regular use, for young adults aged 15-34 was reported as 17 years, compared to an average age of 21 years for those aged 35-64.

The period of time between first using cannabis and becoming a regular user (lag⁶) was two years for all adults, males and females. However, the lag for young adults aged 15-34 was one year compared to three years for older adults.

Results comparison with 2002/3 survey

In the previous survey, the average⁵ age of first regular use of cannabis was similar, although females, young adults and older adults reported first regular use at an older age (19 years for females, 18 years for younger adults and 23 years for older adults).

The lag between first use and becoming a regular user was the same for all groups of respondents (two years) except for females where it was one year in 2002/3.

5 The median was used to measure central tendency in the case of age of first use to avoid extreme values skewing the results.

6 Lag was calculated by measuring the time in years between when a respondent reported first using cannabis and first using cannabis regularly.

Frequency of use (Table 25)

Almost two-fifths (38%) of current cannabis users reported taking the drug less than once a week in the previous month while just over one-quarter (27%) used cannabis at least once a week.

Approximately one-in-six (16%) said that they used cannabis on a daily or almost daily basis. However, when broken down by gender, almost one-quarter of males (24%) compared to no females reported using cannabis on a daily or almost daily basis.

Of current users, one-in-eight (12%) young adults compared to 23% of older adults reported taking cannabis on a daily or almost daily basis.

Results comparison with 2002/3 survey

Results from the previous survey in 2002/3 were broadly similar with regard to the frequency of use of cannabis; there were no significant differences between the two years among any of the groups of respondents.

Type of cannabis used⁷ (Table 26)

Grass was the most commonly used form of cannabis among current users, reported by 43% of all adults aged 15-64. Grass was also the most common type used by females (67%) and young adults (54%) while resin was the most common type used by males (44%) and older adults (41%).

Results comparison with 2002/3 survey

The proportions reporting the use of grass were significantly lower among all adults aged 15-64 (15%), among males (12%), females (29%) and young adults (15%) in the previous survey.

Conversely, the proportions reporting the use of hash in the 2002/3 survey were significantly higher among all adults aged 15-64 (28%), males (30%) and young adults (28%). Use of the herbal form of cannabis by older adults was significantly higher in 2002/3 with 18% reporting use in this form.

Smokers of cannabis and whether it was grown in Northern Ireland (Table 27)

Respondents who were current users and smoked cannabis in the form of grass, weed, herb or skunk were asked whether the cannabis was grown in Northern Ireland. Almost one-third (31%) stated that the cannabis was grown in Northern Ireland and the same proportion reported that it was not. The remaining 38% did not know where the cannabis was grown.

Just over two-fifths (41%) of males said that the cannabis was grown in Northern Ireland while almost half (47%) of females did not know. One-quarter (25%) of young adults reported that the cannabis was grown in Northern Ireland compared to almost half (47%) of older adults.

7 This was a multi-choice question in 2002/3 but not in 2006/7.

Method by which cannabis is used⁸ (Table 28)

Current users were asked about how they take cannabis and 85% reported that they take cannabis in the form of a joint. This was true for both male (92%) and female (70%) respondents and for young adults (78%) and older adults (96%).

Results comparison with 2002/3 survey

Results from the previous survey in 2002/3 were broadly similar with regard to the method of use of cannabis; there were no significant differences between the two surveys among any of the groups of respondents.

How cannabis was obtained (Table 29)

All respondents who said they had used cannabis in the last twelve months were asked how they had obtained the drug on the last occasion. More than one-third (35%) said they shared cannabis among a group of friends, a further 30% reported that they were given the drug by family/friends and 18% reported that they bought the cannabis from a friend.

Less than two-fifths (37%) of females compared to over one-quarter of males (28%) had been given the cannabis by family/friends. Similar proportions of females (36%) and males (35%) shared cannabis among friends, while 23% of males compared to 5% of females had bought it from a friend. Over one-tenth (13%) of females had bought the cannabis from a contact not known personally, compared to 2% of males.

Almost two-in-five young adults (39%) said that they shared cannabis among a group of friends, one-third (33%) had been given the cannabis by family/friends and a further 15% had bought it from a friend. Approximately one-quarter of older adults reported the drug had been bought from a friend (27%), been shared among friends (25%) or been given by family/friends (23%).

Results comparison with 2002/3 survey

In the previous survey one-fifth (20%) of all adults aged 15-64 years reported being given cannabis by a family member or friend; similar proportions were observed across the gender and older adult categories although a significantly lower proportion of young adults (19%) were given cannabis by a family member or friend in 2002/3.

In the previous survey a significantly higher proportion of females (22%) reported buying cannabis from a friend; similar proportions were observed among males and across the age categories.

Since the previous survey in 2002/3, there was a significant drop in the proportion of young adults aged 15-34 years who were given cannabis by a stranger; similar proportions were observed among males, females and older adults.

8 This was a multi-choice question in 2002/3 but not in 2006/7.

Where cannabis was obtained (Table 30)

Respondents who had recently taken cannabis were asked where they had obtained the drug. Over half (56%) said they had obtained cannabis at the house of friends, while 17% had obtained it at a disco/bar/club, 9% in the street/park, 6% at the house of a dealer and 5% had ordered it by phone.

Just over three-fifths of females (61%) compared to 54% of males had obtained cannabis at the house of friends and approximately one-fifth of male respondents (19%) compared to one-in-ten female respondents (10%) obtained cannabis in a disco/bar/club. Thirteen percent of female respondents and 7% of male respondents reported obtaining cannabis in a street/park, while 6% of males and 4% of females said that they obtained cannabis by ordering it by phone.

Nearly three-fifths of young adults (59%) compared to almost half (49%) of older adults said that they had obtained cannabis at the house of friends. More than twice as many young adults (28%) compared to older adults (13%) reported obtaining cannabis at a disco/bar/club.

Results comparison with 2002/3 survey

Results from the previous survey in 2002/3 were broadly similar with regard to where cannabis was obtained; there were no significant differences between the two surveys among any of the groups of respondents.

Ease of obtaining cannabis (Table 31)

Of recent users, the majority (75%) of respondents considered it 'very easy' or 'fairly easy' to obtain cannabis within a 24-hour period. This was true for both male (77%) and female (71%) respondents and for both young adults (77%) and older adults (70%).

Results comparison with 2002/3 survey

Since the 2002/3 survey, the proportion of all adults considering it 'very easy' or 'fairly easy' to obtain cannabis within a 24-hour period has fallen significantly from 91%. The proportions of males, young adults aged 15-34 and older adults aged 35-64 considering cannabis 'very easy' or 'fairly easy' to obtain in a 24-hour period have also decreased significantly from 2002/3.

Conversely, there were significant increases in the proportions of all adults aged 15-64, males and young adults aged 15-34 who considered it 'fairly difficult' or 'very difficult' to obtain the drug in a 24-hour period, since 2002/3.

Stopping cannabis use and reasons for stopping (Tables 32 & 33)

Almost one-quarter (24%) of respondents who had ever taken cannabis said that they had used it regularly. Of these regular users, almost three-quarters (74%) said that they had stopped

taking cannabis, 13% said that they had tried to stop but failed while another 13% said that they had never tried to stop.

Approximately three-quarters of both female respondents (75%) and male respondents (74%) said that they had stopped taking cannabis, 16% of females and 11% of males had tried to stop but failed, while 15% of males compared to 9% of females said that they had never tried to stop.

More than three-quarters of young adults (77%) compared to more than two-thirds of older adults (68%) said that they had stopped taking cannabis, while 18% of older adults and 10% of young adults had tried to stop but failed, compared to 14% of older adults and 13% of young adults who said that they had never tried to stop.

Over one-third of regular users (36%) who stopped using cannabis said they stopped because they did not want to take it any more. Almost one-quarter (24%) said they stopped because cannabis was no longer part of their social life, 9% cited health concerns as their reason for stopping and 9% said they stopped using cannabis due to the cost/they could no longer afford it.

Just over two-fifths of females (41%) compared to just over one-third of males (34%) who had stopped taking cannabis said they did not want to take it any more. More than one-quarter of females (27%) compared to almost one-quarter of males (24%) stopped taking cannabis because it was no longer part of their social life, while 9% of females and 6% of males did not enjoy the after effects. Around one-in-ten males (11%) stopped taking cannabis because of the cost/they could no longer afford it compared to 4% of females.

Almost two-in-five young adults (39%) compared to almost three-in-ten older adults (29%) stated the reason for stopping was that they did not want to take it any more. Almost two-fifths (39%) of older adults said they stopped using cannabis as it was no longer part of their social life, compared to 19% of young adults.

Results comparison with 2002/3 survey

In the previous survey, the proportion of all adults aged 15-64 who were regular users and had stopped taking cannabis (48%) was significantly lower. A significantly higher proportion in 2002/3 had never tried to stop (33%).

The proportions of males and young adults aged 15-34 who stopped taking cannabis have increased significantly since 2002/3, although there was a decrease in the proportions of males and young adults who had tried to stop but failed and who had never tried to stop taking cannabis. In 2002/3, a significantly lower proportion of females (29%) had never tried to stop taking cannabis.

In 2002/3, the proportions of all adults aged 15-64 (26%), males (31%) and young adults aged 15-34 (29%) stating 'health concerns' as the reason for stopping taking cannabis were

significantly higher. Also, in the previous survey, significantly higher proportions of all adults (20%) and young adults (25%) reported the reason for stopping taking cannabis as 'did not enjoy the after effects'.

In the previous survey, a significantly higher proportion of young adults aged 15-34 cited 'pros did not outweigh the cons' (10%) as the reason for stopping taking cannabis and a significantly higher proportion of older adults aged 35-64 said they 'did not want to take it any more' (66%).

Similar proportions of females, in both surveys, had reported each of the reasons for stopping taking cannabis.

Attitudes towards cannabis use (Table 34)

All those surveyed who had heard of cannabis were asked about their attitudes regarding cannabis use. The attitudes of this group were then compared with the attitudes of two mutually exclusive groups - those who said that they have used cannabis at some stage in their lives and those who said that they have never used cannabis.

In general, those who have ever used cannabis had more liberal views on the use of cannabis for both medical and recreational use and they felt that there was less risk to those who smoked cannabis on a regular basis.

For all respondents surveyed, almost three-quarters (73%) of all adults aged 15-64 'fully agreed' or 'largely agreed' that people should be permitted to take cannabis for medical reasons. Males (76%) were more likely than females (69%) to have these combined levels of agreement, while similar proportions of young adults (72%) and older adults (74%) 'fully agreed' or 'largely agreed' with the medical use of cannabis. A higher proportion of all adults aged 15-64 who have ever used cannabis (88%) 'fully agreed' or 'largely agreed' with its use for medical reasons than all adults who have never used the drug (68%). This was true across gender and age.

In contrast, for all respondents surveyed, less than one-fifth (18%) of all adults aged 15-64 'fully agreed' or 'largely agreed' that cannabis should be allowed to be used for recreational reasons. Males (22%) were more likely than females (14%), and young adults (23%) more likely than older adults (15%), to hold these combined levels of agreement. A higher proportion of all adults who have ever used cannabis (43%) 'fully agreed' or 'largely agreed' with recreational cannabis use than those who have never used cannabis (10%). This was true across gender and age.

Respondents were also asked to rate their level of disapproval to the occasional use of cannabis. For all those surveyed, over two-thirds (69%) of all adults 'disapproved' or 'strongly disapproved' of people smoking cannabis occasionally. Females (73%) were more likely than males (64%), and older adults (75%) were more likely than young adults (60%) to have these combined

levels of disapproval. A higher proportion of all adults who have never used cannabis (81%) than those who have used it (32%) 'disapproved' or 'strongly disapproved' of people smoking it occasionally. This was true across gender and age.

Results comparison with 2002/3 survey

Medical reasons

For all respondents surveyed, in 2002/3 a significantly higher proportion of all adults aged 15-64 'fully agreed' (53%) that people should be permitted to take cannabis for medical reasons. In the previous survey, the proportions of all adults who 'largely agreed' (25%), 'neither agreed nor disagreed' (6%) and 'largely disagreed' (6%) with this statement were significantly lower than in 2006/7.

For respondents who had never used cannabis, a significantly higher proportion of all adults aged 15-64 in the previous survey 'fully agreed' (49%) that people should be permitted to take cannabis for medical reasons. In 2002/3, the proportions of all adults who 'largely agreed' (28%), 'neither agreed nor disagreed' (6%) and 'largely disagreed' (7%) were significantly lower.

For those who had ever used cannabis, a significantly higher proportion of all adults aged 15-64 in 2002/3 'fully agreed' (80%) that people should be permitted to take cannabis for medical reasons. However, in the previous survey, the proportions of all adults who 'largely agreed' (14%), 'neither agreed nor disagreed' (3%) and 'largely disagreed' (1%) with this statement were significantly lower.

Recreational reasons

For all respondents surveyed, in 2002/3 a significantly higher proportion of all adults aged 15-64 'fully agreed' (10%) that people should be permitted to take cannabis for recreational reasons. In the previous survey, the proportions of all adults who 'neither agreed nor disagreed' (10%) and 'largely disagreed' (23%) with this statement were significantly lower than in 2006/7.

For respondents who had never used cannabis, significantly higher proportions of all adults aged 15-64 in the previous survey 'fully agreed' (5%) and 'largely agreed' (9%) that people should be permitted to take cannabis for recreational reasons. In 2002/3, the proportion of all adults who 'neither agreed nor disagreed' (9%) with this statement was significantly lower.

For those who had ever used cannabis, a significantly higher proportion of all adults aged 15-64 in 2002/3 'fully agreed' (36%) that people should be permitted to take cannabis for recreational reasons. However, in the previous survey, the proportions of all adults who 'neither agreed nor disagreed' (13%) and 'largely disagreed' (11%) with this statement were significantly lower.

Smoking cannabis occasionally

For all respondents surveyed, in 2002/3 a significantly higher proportion of all adults aged 15-64 'strongly disapproved' (33%), and a significantly lower proportion 'disapproved' (33%), of smoking cannabis occasionally.

For those respondents who had never used cannabis, a significantly higher proportion of all adults aged 15-64 in 2002/3 'did not disapprove' (23%) of people smoking cannabis occasionally while a significantly lower proportion of all adults 'disapproved' (37%).

For those who had ever used cannabis, in 2002/3 a significantly higher proportion of all adults aged 15-64 'did not disapprove' (79%), and a significantly lower proportion 'disapproved' (15%), of people smoking cannabis occasionally than in the 2006/7 survey.

Risk perception (Table 34)

When asked about the risk involved in the use of cannabis, 72% of all adults who had never used the drug compared to over a third (37%) of all adults who had ever used it felt that there was a 'great risk' in smoking cannabis regularly.

Females and males who had never used cannabis were more likely (75% and 67% respectively) than females and males who had ever used cannabis (43% and 33% respectively) to perceive regular cannabis use as a 'great risk'. In general, females were more likely than males to perceive regular cannabis use as a 'great risk'.

Both older adults (76%) and young adults (63%) who had never used cannabis felt that there was a 'great risk' from regular cannabis use compared to the corresponding respondents (41% and 34% respectively) who had ever used cannabis.

Results comparison with 2002/3 survey

For all respondents surveyed, in 2002/3 significantly higher proportions of all adults aged 15-64 felt that there was 'no risk' (2%) and a 'slight risk' (15%) related to smoking cannabis regularly. In the previous survey, a significantly lower proportion of all adults felt there was a 'great risk' (54%) related to smoking cannabis regularly than in 2006/7.

For those who had never used cannabis, significantly higher proportions of all adults aged 15-64 in the previous survey felt that there was a 'slight risk' (11%) and a 'moderate risk' (24%) related to smoking cannabis regularly, while a significantly lower proportion felt that there was a 'great risk' (60%).

For those who had ever used cannabis, in 2002/3 significantly higher proportions of all adults aged 15-64 felt that there was 'no risk' (9%) and a 'slight risk' (32%) related to smoking cannabis regularly. Conversely, in the previous survey, significantly lower proportions of all adults felt there was a 'moderate risk' (34%) and a 'great risk' (23%) than in 2006/7.

Personally know people who take cannabis (Tables 41 & 42)

In 2006/7, almost half (46%) of respondents reported personally knowing people who had taken cannabis compared to approximately one-third (34%) in 2002/3. Significant increases since the previous survey were found among males (from 42% to 51%), females (from 26% to 41%), young adults aged 15-34 (from 50% to 62%) and older adults aged 35-64 (from 22% to 34%). In both 2002/3 and 2006/7, males were more likely than females, and young adults were more likely than older adults, to have reported personally knowing people who take cannabis.

Profile of cannabis users

For the purpose of the statistical tests detailed below a cannabis user was defined as someone who has ever used cannabis.

Tests were performed on the data for lifetime, last year and last month prevalence rates.

Gender (Table 35)

The results of three chi-square tests were statistically significant, showing an association between gender and cannabis use. Males were more likely than females to have ever used cannabis, to have used it in the last year and to have used it in the last month.

Results from the 2002/3 survey found the same association between gender and cannabis use.

Age (Table 36)

The results of the three chi-square tests were statistically significant. This indicates that there is an association between age and cannabis use. Young adults (15-34 years) were more likely than older adults aged 35-64 to report lifetime, last year and last month use.

Results from the 2002/3 survey found the same association between gender and cannabis use.

National Statistics Socio-Economic Classification (NSSEC)⁹ (Table 37)

The results of the three chi-square tests were statistically significant. This indicates that there is an association between NSSEC and cannabis use. Managerial and professional occupations, semi-routine and routine occupations and the unemployed had higher than expected lifetime prevalence than the other occupations. Small employers and own account workers and semi-routine and routine occupations had higher than expected recent and current prevalence rates than the other occupations.

Results from the 2002/3 survey found there to be an association between socio-economic group (SEG) and cannabis use for both lifetime and last month use.

9 In 2002/3 Socio-Economic Group (SEG) was used in NI.

Work status¹⁰ (Table 38)

The result of one of the three chi-square tests was statistically significant. This indicates that there is an association between work status and lifetime cannabis use, but not between work status and recent and current cannabis use. Respondents who were in paid work had a lifetime prevalence rate higher than expected whereas those respondents who were not in paid work had a lower lifetime prevalence rate than expected.

Results from the 2002/3 survey found the same association between work status and cannabis use.

Housing tenure¹¹ (Table 16)

The results of the three chi-square tests were statistically significant. This indicates that there is an association between housing tenure and cannabis use. Respondents who owned their own home outright had lower prevalence rates than expected for lifetime, last year and last month use, whereas respondents who rented their property (rented from Housing Executive, Housing Association or privately) had higher prevalence rates than expected for lifetime, last year and last month use.

Results from the 2002/3 survey found there to be an association between renting from a private landlord and cannabis use.

Education level (Table 40)

The results of the three chi-square tests were statistically significant. This indicates that there is an association between levels of education and lifetime, recent or current drug use. Respondents who had educational qualifications of GCSE grade C or above had higher prevalence rates than expected for lifetime cannabis use, whereas respondents who had GCSE grade D or below (including those with no qualifications) had lower lifetime prevalence rates than expected. Respondents with educational qualifications above A level and those with no qualifications had lower last year and last month prevalence rates than expected, whereas respondents with A levels or GCSEs had higher than expected last year and last month prevalence rates.

Results from the 2002/3 survey showed that respondents who had educational qualifications had higher than expected prevalence rates for lifetime, last year and last month use, whereas respondents who had no qualifications had lower prevalence rates than expected.

10 The work status categories used in NI varied slightly between the 2002/3 and 2006/7 surveys.

11 The housing tenure categories used in NI differed between the 2002/3 and 2006/7 surveys.

Ireland and Northern Ireland Comparison – Key Findings

Caution should be used when interpreting information based on small numbers.

- Lifetime cannabis prevalence rates among adults aged 15-64 are higher in Northern Ireland (25%) than in Ireland (22%).
- Males reported higher prevalence rates than females across all time periods in both jurisdictions.
- Age of first use of cannabis is broadly similar although regular users in Northern Ireland first started using at a younger age (16 years) than in Ireland (17 years).
- In Northern Ireland and Ireland, the age of first use of cannabis has remained largely unchanged since 2002/3.
- Hash is the most common type of cannabis used in Ireland, while grass is most commonly used in Northern Ireland.
- Almost one-in-three (31%) adults aged 15-64 in Northern Ireland smoke cannabis that is grown in Northern Ireland, compared to approximately one-in-six (16%) adults in Ireland who smoke cannabis grown in Ireland.
- How cannabis was obtained is broadly similar in both jurisdictions. However, a higher proportion of all adults aged 15-64 were given the cannabis by family/friends in Ireland (44%) than in Northern Ireland (30%).
- The proportion of all adults who obtained cannabis in a disco/bar/club is two times higher in Northern Ireland (17%) than in Ireland (8%). No-one reported obtaining cannabis in a school/college in Northern Ireland compared to 3% of all adults in Ireland.
- A higher proportion of all adults aged 15-64 in Northern Ireland (75%) than in Ireland (62%) said it was 'very easy' or 'fairly easy' to obtain cannabis.
- The proportions of lifetime users who reported using cannabis regularly are similar among all adults in Ireland (26%) and Northern Ireland (24%). Among regular users, a higher proportion of all adults had never tried to stop taking cannabis in Ireland (24%) than in Northern Ireland (13%).
- Both Ireland and Northern Ireland have experienced a shift in attitudes since the previous survey, with higher proportions of those who have used cannabis attributing great risk to its use and disagreeing that people should be allowed to take cannabis for recreational reasons.

Table 1: Ireland

Cannabis Prevalence Rates (%)					
2006/7	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
<i>Total Weighted N (valid responses)</i>	(4967)	(2513)	(2454)	(2315)	(2652)
Lifetime Prevalence (%)	21.9*	27.0*	16.6*	28.6*	16.1*
Last Year Prevalence (Recent use) (%)	6.3*	8.5	3.9	10.4	2.6
Last Month Prevalence (Current use) (%)	2.6	4.0	1.1	4.2	1.2

Cannabis Prevalence Rates (%)					
2002/3	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
<i>Total Weighted N (valid responses)</i>	(4918)	(2470)	(2448)	(2333)	(2585)
Lifetime Prevalence (%)	17.4	22.4	12.3	24.0	11.4
Last Year Prevalence (Recent use) (%)	4.5	7.2	2.9	8.6	1.8
Last Month Prevalence (Current use) (%)	2.6	3.4	1.7	4.3	0.9

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

*Indicates a significant change from 2002/3 to 2006/7

Table 2: Ireland

Age of First Use and First Regular Use of Cannabis					
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Age first use cannabis (all users)					
<i>Total Weighted N (valid responses)</i>	(1087)	(679)	(408)	(661)	(426)
Mean age of first use	20	20	19	18	22
Median of age of first use ¹	18	18	18	18	20
Age first use cannabis (regular users)					
<i>Total Weighted N (valid responses)</i>	(280)	(208)	(72)	(201)	(79)
Mean age of first use	17	18	17	17	19
Median of age of first use ¹	17	17	17	17	19
Age first regular use cannabis (regular users)					
<i>Total Weighted N (valid responses)</i>	(280)	(208)	(72)	(201)	(79)
Mean age of first use	19	19	19	18	21
Median of age of first use ¹	18	18	18	18	20
Average number of years between first use and first regular use of cannabis (regular users)²					
<i>Total Weighted N (valid responses)</i>	(276)	(205) [◆]	(72) [◆]	(198) [◆]	(79) [◆]
Average number of years	2	2	2	2	2

1 Median is used as a measure of central tendency to avoid extreme values skewing results.

2 Lag was calculated by measuring the time in years between when a respondent reported first using cannabis and first using cannabis regularly.

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 3: Ireland

Frequency of Cannabis Use ¹ (Current Users) (%)					
2006/7	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Frequency of use (%)					
Total Weighted N (valid responses)	(128)	(99) [◆]	(28) [◆]	(97)	(31)
20 days or more	24.4	27.8	12.3	25.0	22.4
10-19 days	10.3	9.0	15.0	11.1	7.9
4-9 days	28.3	29.4	24.1	26.9	32.6
1-3 days	37.0	33.8	48.6	37.0	37.1

Frequency of Cannabis Use ¹ (Current Users) (%)					
2002/3	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Frequency of use (%)					
Total Weighted N (valid responses)	(125)	(84)	(41)	(100) [◆]	(24) [◆]
20 days or more	22.2	27.4	11.3	22.5	20.7
10-19 days	14.0	10.4	21.5	14.9	10.2
4-9 days	22.3	19.9	27.1	23.0	19.0
1-3 days	40.7	41.3	40.0	38.5	50.1

1 EMCDDA 'Handbook for surveys on Drug Use among the General Population' (Aug. 2002) defines frequency of drug use as:

20 days or more = daily or almost daily; 10-19 days = several times a week; 4-9 days = at least once a week; 1-3 days = less than once a week.

Based on responses of those who had used cannabis in the last 30 days.

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data. All figures are rounded to the nearest decimal place. All figures are based on valid responses.

Table 4: Ireland

Type of Cannabis Most Commonly Used (Current Users) (%)					
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	(128)	(99) [◆]	(28) [◆]	(97)	(31)
Hash	53.8	50.3	66.2	53.4	55.2
Grass	26.8	27.8	23.5	27.1	26.0
Resin	6.4	6.7	5.2	4.3	13.1
Weed	8.4	10.1	2.5	11.1	0.0
Herb	1.9	2.5	0.0	2.5	0.0
Skunk	1.2	1.6	0.0	1.6	0.0
Hash oil	0.8	1.1	0.0	0.0	3.4
Don't know	0.6	0.0	2.6	0.0	2.4

Based on responses of those who had used cannabis in the last 30 days.

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data. All figures are rounded to the nearest decimal place. All figures are based on valid responses.

Table 5: Ireland

Cannabis Smokers (Grass/weed/herb/skunk): Grown in Ireland (Current Users) (%)					
	All adults 15-64			Young adults 15-34	Older adults 35-64
	Male	Female			
Total Weighted N (valid responses)	(49)	(42)	(7)	(41)	(8)
Yes	16.1	17.1	9.9	10.8	43.0
No	51.2	53.8	36.3	55.4	29.6
Don't know	32.7	29.0	53.8	33.8	27.4

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 6: Ireland

Method of Taking Cannabis (Current Users) (%)					
	All adults 15-64			Young adults 15-34	Older adults 35-64
	Male	Female			
Total Weighted N (valid responses)	(99) [◆]	(28) [◆]		(97)	(31)
Joint	92.0	96.3		93.5	91.2
Pipe	4.7	0.0		3.4	4.5
Bong	3.2	0.0		2.0	4.3
Eat	0.0	3.7		1.1	0.0

Based on responses of those who had used cannabis in the last 30 days.

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 7: Ireland

How Cannabis was Obtained on Last Occasion (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
<i>Total Weighted N (valid responses)</i>	(311)	(215)	(96)	(241)	(70)
Given by family/friend	44.3	41.0	51.6	42.1	51.6
Shared amongst friends	28.3	26.0	33.4	31.9	15.8
Bought from a friend	14.6	18.5	5.8	13.8	17.2
Bought from contact not known personally	6.1	6.2	6.0	6.8	4.0
Given by stranger	1.4	2.0	0.0	0.7	3.8
Given by contact not known personally	2.7	2.7	2.6	2.4	3.5
Bought from a stranger	1.0	1.4	0.0	0.8	1.6
Don't know	0.3	0.5	0.0	0.0	1.5
Refused to answer	1.4	1.8	0.6	1.5	1.0

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 8: Ireland

Where Cannabis was Obtained on Last Occasion (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
<i>Total Weighted N (valid responses)</i>	(311)	(215)	(96)	(241)	(70)
House of friends	56.8	49.5	73.2	57.9	53.2
Disco/bar/club	7.9	9.9	3.3	8.0	7.3
Street/Park	12.2	13.1	10.3	10.8	17.1
Ordered by phone	5.2	6.3	2.6	5.1	5.2
House of a dealer	4.4	5.0	3.1	3.9	5.9
Other	0.0	0.0	0.0	0.0	0.0
School/College	2.8	3.5	1.3	3.2	1.5
Office/Workplace	1.7	2.4	0.0	1.6	1.9
Don't know	0.8	0.8	0.7	1.0	0.0
Refused to answer	8.4	9.6	5.6	8.5	7.9

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 9: Ireland

Ease of Obtaining Cannabis in a 24-Hour Period (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male		Female	15-34
<i>Total Weighted N (valid responses)</i>	(311)	(215)	(96)	(241)	(70)
Very Easy	27.8	26.1	31.6	27.8	28.0
Fairly Easy	33.8	37.0	26.7	34.2	32.5
Neither easy or difficult	14.3	14.6	13.6	14.2	14.6
Fairly Difficult	15.9	16.2	15.0	17.4	10.4
Very Difficult	3.8	3.4	4.6	2.9	6.7
Don't know	4.5	2.7	8.5	3.5	7.8

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 10: Ireland

Regular Cannabis Users and Stopping Cannabis Use (%)					
	All adults		Young adults	Older adults	
	15-64	Male		Female	15-34
Lifetime cannabis users who have ever used cannabis regularly					
<i>Total Weighted N (valid responses)</i>	(1087)	(679)	(408)	(661)	(426)
	25.8	30.6	17.7	30.4	18.6
Regular cannabis users and stopping cannabis use					
<i>Total Weighted N (valid responses)</i>	(280)	(208)	(72)	(201)	(79)
Regular user – Stopped taking	66.2	66.1	66.5	63.5	73.1
Regular user – Tried to stop but failed	9.6	8.4	13.2	9.3	10.4
Regular user – Never tried to stop	24.2	25.5	20.3	27.2	16.6

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 11: Ireland

Reasons for Stopping Cannabis Use (Regular Users Who Have Stopped) (%)					
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
<i>Total Weighted N (valid responses)</i>	(186)	(137) [◆]	(48) [◆]	(128)	(58)
Did not want to take any more	32.0	29.7	38.5	32.7	30.5
No longer part of social life	16.9	18.1	13.4	12.0	27.6
Did not enjoy after effects	6.5	5.7	9.0	6.7	6.1
Health concerns	18.9	20.8	13.3	20.1	16.2
Persuaded by friends/family	3.2	4.3	0.0	3.1	3.5
Cost/could no longer afford it	0.7	0.0	2.5	1.0	0.0
Impact on job/friends/family	7.0	8.8	1.8	10.1	0.0
Less available supply	1.3	1.0	2.1	0.0	4.0
Pregnancy	3.7	0.0	14.1	4.6	1.5
Pros did not outweigh cons	1.3	1.3	1.2	0.0	4.1
Rehab programme	1.7	1.8	1.5	1.2	2.7
Don't know	7.1	8.6	2.6	8.6	3.7

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 12: Ireland

Attitudes Towards Cannabis Use (%)															
	GENERAL POPULATION					THOSE WHO HAVE NEVER USED CANNABIS					THOSE WHO HAVE EVER USED CANNABIS				
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
People should be permitted to take cannabis for medical reasons															
<i>Total Weighted N (valid responses)</i>	(4868)	(2473)	(2395)	(2270)♦	(2599)♦	(3781)	(1794)	(1987)	(1609)♦	(2173)♦	(1087)	(679)	(408)	(661)	(426)
Fully agree	44.1	46.3	41.9	42.2	45.8	39.3	40.3	38.4	35.9	41.8	61.1	62.3	58.9	57.6	66.3
Largely agree	27.0	27.2	26.8	26.0	27.9	27.4	28.1	26.7	25.5	28.8	25.6	24.6	27.4	27.2	23.2
Neither agree or disagree	8.3	8.2	8.5	9.9	7.0	9.2	9.3	9.1	11.6	7.4	5.2	5.2	5.3	5.6	4.7
Largely disagree	8.5	8.1	8.9	9.1	8.0	10.1	10.0	10.2	11.1	9.3	3.2	3.4	2.9	4.2	1.7
Fully disagree	10.0	8.5	11.5	10.8	9.2	11.7	10.2	13.0	13.5	10.3	4.1	3.9	4.4	4.4	3.7
Don't know	2.0	1.7	2.3	2.0	2.0	2.4	2.2	2.6	2.4	2.4	0.8	0.5	1.1	1.0	0.3
People should be permitted to take cannabis for recreational reasons															
<i>Total Weighted N (valid responses)</i>	(4868)	(2473)	(2395)	(2270)♦	(2599)♦	(3781)	(1794)	(1987)	(1609)♦	(2173)♦	(1087)	(679)	(408)	(661)	(426)
Fully agree	7.3	9.7	4.9	8.3	6.5	3.3	4.4	2.4	3.1	3.6	21.2	23.5	17.3	21.1	21.3
Largely agree	11.7	14.6	8.8	13.0	10.6	7.3	9.4	5.4	7.2	7.3	27.2	28.4	25.3	27.1	27.5
Neither agree or disagree	10.0	10.2	9.8	12.9	7.5	8.7	8.7	8.6	11.6	6.5	14.7	14.3	15.4	16.2	12.4
Largely disagree	21.8	21.4	22.1	21.8	21.7	22.3	22.6	22.1	22.1	22.4	19.9	18.4	22.4	20.9	18.3
Fully disagree	48.1	43.0	53.4	43.2	52.4	57.3	53.7	60.5	55.1	58.9	16.4	14.8	19.0	14.3	19.6
Don't know	1.0	1.1	1.0	0.8	1.2	1.2	1.2	1.1	0.9	1.3	0.6	0.6	0.5	0.4	0.8

♦ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 12: Ireland continued

Attitudes Towards Cannabis Use (%)															
	GENERAL POPULATION					THOSE WHO HAVE NEVER USED CANNABIS					THOSE WHO HAVE EVER USED CANNABIS				
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
People smoking cannabis occasionally															
<i>Total Weighted N (valid responses)</i>	(4868)	(2473)	(2395)	(2270) [◆]	(2599) [◆]	(3781)	(1794)	(1987)	(1609) [◆]	(2173) [◆]	(1087)	(679)	(408)	(661)	(426)
Do not disapprove	28.7	33.3	23.8	34.9	23.2	16.7	18.7	15.0	20.0	14.3	70.1	71.9	67.1	71.4	68.1
Disapprove	34.9	35.0	34.8	35.0	34.8	38.3	39.9	36.8	40.1	37.0	23.1	22.1	24.7	22.5	23.8
Strongly disapprove	35.6	30.7	40.6	29.4	40.9	44.0	40.3	47.3	39.2	47.5	6.3	5.4	7.8	5.7	7.2
Don't know	0.9	0.9	0.8	0.6	1.1	1.0	1.0	0.9	0.7	1.1	0.6	0.6	0.5	0.4	0.8
Perceived risk related to smoking cannabis regularly															
<i>Total Weighted N (valid responses)</i>	(4868)	(2473)	(2395)	(2270) [◆]	(2599) [◆]	(3781)	(1794)	(1987)	(1609) [◆]	(2173) [◆]	(1087)	(679)	(408)	(661)	(426)
No risk	1.8	2.3	1.3	2.6	1.1	0.7	0.6	0.7	1.2	0.3	5.8	6.6	4.5	6.1	5.3
Slight risk	11.7	14.2	9.1	15.9	8.0	7.5	9.4	5.8	10.8	5.1	26.1	26.8	25.0	28.4	22.5
Moderate risk	26.3	29.6	22.8	30.6	22.5	22.9	26.3	19.9	27.9	19.2	37.8	38.1	37.4	37.1	39.0
Great risk	59.5	53.3	66.0	50.4	67.6	68.1	62.8	72.8	59.4	74.5	29.9	28.1	32.9	28.3	32.4
Don't know	0.7	0.7	0.7	0.5	0.8	0.8	0.8	0.8	0.7	0.9	0.4	0.3	0.2	0.0	0.7

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 13: Ireland

Cannabis Prevalence by Gender									
Cannabis Use	LIFETIME PREVALENCE*			LAST YEAR PREVALENCE*			LAST MONTH PREVALENCE*		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
<i>Total Weighted N (valid responses)</i>	(2513)	(2454)	(4967)	(2513)	(2454)	(4967)	(2513)	(2454)	(4967)
No	73.0	83.4	78.1	91.4	96.1	93.7	96.1	98.9	97.4
Yes	27.0	16.6	21.9	8.6	3.9	6.3	3.9	1.1	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 14: Ireland

Cannabis Prevalence by Age Group									
Cannabis Use	LIFETIME PREVALENCE*			LAST YEAR PREVALENCE*			LAST MONTH PREVALENCE*		
	15-34	35-64	Total	15-34	35-64	Total	15-34	35-64	Total
<i>Total Weighted N (valid responses)</i>	(2315)	(2652)	(4967)	(2315)	(2652)	(4967)	(2315)	(2652)	(4967)
No	71.4	83.9	78.1	89.6	97.4	93.7	95.8	98.8	97.4
Yes	28.6	16.1	21.9	10.4	2.6	6.3	4.2	1.2	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 15: Ireland

Cannabis Prevalence by Socio-Economic Group (SEG) (%)							
	A	B	C1	C2	D	E	Total
<i>Total Weighted N (valid responses)</i>	(232)	(869)	(1424)	(1111)	(800)	(485)	(4921)
Lifetime Prevalence by SEG*							
No	73.7	78.9	73.5	79.4	81.9	81.6	78.0
Yes	26.3	21.1	26.5	20.6	18.1	18.4	22.0
Last Year Prevalence by SEG*							
No	93.6	96.9	90.9	95.1	92.3	95.5	93.7
Yes	6.4	3.1	9.1	4.9	7.8	4.5	6.3
Last Month Prevalence by SEG*							
No	98.7	99.5	96.1	97.9	96.4	97.3	97.4
Yes	1.3	0.5	3.9	2.1	3.6	2.7	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 16: Ireland

Cannabis Prevalence by Work Status (%)					
	In paid work	Not in paid work	Student	Other	Total
<i>Total Weighted N (valid responses)</i>	(3202)	(1228)	(525)	(2)	(4957)
Lifetime Prevalence*					
No	75.5	84.3	80.2	100.0	78.2
Yes	24.5	15.7	19.8	0.0	21.8
Last Year Prevalence*					
No	93.9	95.4	89.0	100.0	93.7
Yes	6.1	4.6	11.0	0.0	6.3
Last Month Prevalence					
No	97.4	97.6	97.0	100.0	97.4
Yes	2.6	2.4	3.0	0.0	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 17: Ireland

Cannabis Prevalence by Housing Tenure (%)					
	Owned in part or full	Rented from Private Landlord	Rented from LA/HA	Other	Total
<i>Total Weighted N (valid responses)</i>	(3521)	(931)	(466)	(48)	(4966)
Lifetime Prevalence*					
No	82.1	62.6	78.3	81.3	78.1
Yes	17.9	37.4	21.7	18.8	21.9
Last Year Prevalence*					
No	96.1	85.4	93.4	89.6	93.7
Yes	3.9	14.6	6.6	10.4	6.3
Last Month Prevalence*					
No	98.4	93.6	97.4	97.9	97.4
Yes	1.6	6.4	2.6	2.1	2.6

* p < 0.05

LA/HA = Local Authority or Housing Association.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 18: Ireland

Cannabis Prevalence by Age Education Ceased (%)				
	15 years & under	16-19	20 years & over	Total
<i>Total Weighted N (valid responses)</i>	(516)	(1924)	(1416)	(3856)
Lifetime Prevalence*				
No	84.5	82.0	71.3	78.4
Yes	15.5	18.0	28.7	21.6
Last Year Prevalence*				
No	96.9	94.9	93.5	94.7
Yes	3.1	5.1	6.5	5.3
Last Month Prevalence				
No	98.3	97.9	97.2	97.7
Yes	1.7	2.1	2.8	2.3

* p < 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 19: Ireland

Cannabis Prevalence by Highest Education Level Attained (%)					
	Elementary	Lower second level	Upper second level	Third Level	Total
<i>Total Weighted N (valid responses)</i>	(325)	(1472)	(1196)	(1967)	(4960)
Lifetime Prevalence*					
No	90.5	83.4	78.0	72.2	78.1
Yes	9.5	16.6	22.0	27.8	21.9
Last Year Prevalence*					
No	96.6	94.0	92.0	94.2	93.8
Yes	3.4	6.0	8.0	5.8	6.2
Last Month Prevalence					
No	97.5	97.5	97.2	97.6	97.5
Yes	2.5	2.5	2.8	2.4	2.5

* p < 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 20: Ireland

Personally Know People Who Take Cannabis (%)					
2002/3	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
<i>Total Weighted N (valid responses)</i>	(4870)	(2442)	(2428)	(2316)	(2554)
Yes	35.2	41.2	29.2	48.7	23.0
No	64.8	58.8	70.8	51.3	77.0

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 21: Ireland

Personally Know People Who Take Cannabis (%)					
2006/7	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
<i>Total Weighted N (valid responses)</i>	(4868)	(2473)	(2395)	(2270)♦	(2599)♦
Yes	43.2	48.2	38.0	58.5	29.8
No	56.8	51.8	62.0	41.5	70.2

♦ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 22: Ireland

Cannabis Prevalence by Regional Drugs Task Force (RDTF) Area (%)						Cannabis Prevalence by Regional Drugs Task Force (RDTF) Area (%)					
2006/7	All adults		Young adults	Older adults		2002/3	All adults		Young adults	Older adults	
	15-64	Male					Female	15-34			
Lifetime Prevalence (%)						Lifetime Prevalence (%)					
East Coast RDTF	35.9*	42.9	29.5*	38.1	33.7*	East Coast RDTF	24.5	32.3	16.4	33.4	17.4
Midlands RDTF	17.0	19.7	14.1	23.6	11.6	Midlands RDTF	10.7	13.3	7.9	14.6	7.4
Mid-Western RDTF	17.0	20.6	13.3	24.6	10.8	Mid-Western RDTF	10.9	13.7	8.1	16.5	6.1
North Eastern RDTF	19.5	25.2	13.4	25.0	14.9*	North Eastern RDTF	17.8	24.2	11.0	30.4	6.7
North Western RDTF	12.8	16.8	8.7	18.9	8.2	North Western RDTF	9.3	11.9	6.6	10.7	8.2
Northern RDTF	28.8	37.0	20.7	40.3	18.4	Northern RDTF	26.9	35.2	19.1	34.1	19.9
South Eastern RDTF	23.3	29.7	16.6	32.3	16.3*	South Eastern RDTF	16.8	22.0	11.4	25.4	9.8
South Western RDTF	24.0	29.6	18.2	28.1	19.5	South Western RDTF	23.2	30.2	16.5	28.3	16.5
Southern RDTF	15.0	17.9	12.0	20.1	10.8	Southern RDTF	11.6	13.6	9.5	17.1	6.9
Western RDTF	21.0*	26.1	15.8*	29.1*	14.5	Western RDTF	12.0	15.8	8.1	14.6	9.9
Last Year Prevalence (%)						Last Year Prevalence (%)					
East Coast RDTF	11.3*	13.8	9.0*	16.2	6.5*	East Coast RDTF	6.1	9.6	2.5	11.4	1.9
Midlands RDTF	4.1	5.4	2.7	8.5	0.5	Midlands RDTF	2.8	3.6	1.9	5.1	0.8
Mid-Western RDTF	4.7	6.6	2.8	9.2	1.0	Mid-Western RDTF	3.0	3.9	2.0	5.5	0.8
North Eastern RDTF	4.6	6.4	2.6	7.8	1.9	North Eastern RDTF	5.2	7.8	2.4	10.6	0.4
North Western RDTF	2.9	3.9	2.0	6.8	0.0	North Western RDTF	2.2	3.4	0.9	3.9	0.8
Northern RDTF	11.9	17.6	6.3	18.9	5.5	Northern RDTF	7.7	12.2	3.4	12.6	2.9
South Eastern RDTF	5.1	7.4	2.6	9.8	1.4	South Eastern RDTF	5.8	7.9	3.6	11.2	1.3
South Western RDTF	6.7	8.9	4.4	8.8	4.4	South Western RDTF	7.3	10.6	4.2	10.0	3.8
Southern RDTF	4.6	6.9	2.1	8.6	1.3	Southern RDTF	4.4	4.8	4.0	7.9	1.4
Western RDTF	4.3	5.0	3.5	7.1*	2.0	Western RDTF	2.0	2.8	1.2	1.5	2.4
Last Month Prevalence (%)						Last Month Prevalence (%)					
East Coast RDTF	4.2	5.5	3.0	5.5	2.9	East Coast RDTF	3.8	5.4	2.2	7.5	1.0
Midlands RDTF	1.1	1.4	0.7	2.4	0.0	Midlands RDTF	1.0	2.0	0.0	1.3	0.8
Mid-Western RDTF	1.4	2.8	0.0	2.7	0.4	Mid-Western RDTF	1.6	1.9	1.4	2.6	0.8
North Eastern RDTF	0.8	1.3	0.3	1.5	0.3	North Eastern RDTF	1.9	2.9	0.9	3.6	0.4
North Western RDTF	0.3	0.0	0.6	0.7	0.0	North Western RDTF	0.2	0.0	0.5	0.0	0.4
Northern RDTF	7.9	12.5	3.3	13.0	3.2	Northern RDTF	4.5	6.9	2.3	7.5	1.7
South Eastern RDTF	2.8	4.3	1.2	5.0	1.0	South Eastern RDTF	2.1	2.5	1.7	4.7	0.0
South Western RDTF	1.8	2.5	1.0	1.9	1.6	South Western RDTF	3.9	6.1	1.8	5.6	1.7
Southern RDTF	2.0	3.7	0.2	3.5	0.7	Southern RDTF	2.1	1.9	2.3	4.1	0.4
Western RDTF	1.6	2.5	0.6	3.2	0.3	Western RDTF	1.3	1.4	1.2	0.6	1.9

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

*Indicates a significant change from 2002/3 to 2006/7

Table 23: Northern Ireland

Cannabis Prevalence Rates (%)					
2006/7	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	(2000)	(992) [♦]	(1009) [♦]	(843) [†]	(1150) [†]
Lifetime Prevalence (%)	24.7*	30.1*	19.3*	35.0*	17.3*
Last Year Prevalence (Recent use) (%)	7.2*	10.3	4.1*	12.4	3.3*
Last Month Prevalence (Current use) (%)	2.6	3.7	1.6	3.7	1.8

Cannabis Prevalence Rates (%)					
2002/3	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	(3516)	(1739)	(1777)	(1550)	(1966)
Lifetime Prevalence (%)	16.8	23.3	10.5	25.1	10.3
Last Year Prevalence (Recent use) (%)	5.4	8.7	2.2	9.8	2.0
Last Month Prevalence (Current use) (%)	2.9	5.1	0.8	5.4	1.0

♦ Due to rounding, the weighted Ns for the gender or age categories do not sum to the total weighted N.

† Eight respondents confirmed they were eligible to participate in the survey but did not state their exact age.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

*Indicates a significant change from 2002/3 to 2006/7

Table 24: Northern Ireland

Age of First Use and First Regular Use of Cannabis					
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Age first use cannabis (all users)					
<i>Total Weighted N (valid responses)</i>	(493)	(298)	(195)	(295) [◆]	(199) [◆]
Mean age of first use	20	20	21	18	24
Median of age of first use¹	18	18	19	17	20
Age first use cannabis (regular users)					
<i>Total Weighted N (valid responses)</i>	(120)	(87)	(33)	(83) [◆]	(38) [◆]
Mean age of first use	18	18	17	17	20
Median of age of first use¹	16	16	16	16	19
Age first regular use cannabis (regular users)					
<i>Total Weighted N (valid responses)</i>	(120)	(87)	(33)	(83) [◆]	(38) [◆]
Mean age of first use	20	20	20	18	23
Median of age of first use¹	18	18	18	17	21
Average number of years between first use and first regular use of cannabis (regular users)²					
<i>Total Weighted N (valid responses)</i>	(120)	(87)	(33)	(83) [◆]	(38) [◆]
Average number of years	2	2	2	1	3

1 Median is used as a measure of central tendency to avoid extreme values skewing results.

2 Lag was calculated by measuring the time in years between when a respondent reported first using cannabis and first using cannabis regularly.

◆ Due to rounding, the weighted Ns for the age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 25: Northern Ireland

Frequency of Cannabis Use ¹ (Current Users) (%)					
2006/7	All adults		Young adults	Older adults	
	15-64	Male		Female	15-34
<i>Total Weighted N (valid responses)</i>	(53)	(36) [♦]	(16) [♦]	(31) [♦]	(21) [♦]
20 days or more	16.4	23.6	0.0	12.1	22.8
10-19 days	18.9	19.9	16.4	14.4	25.5
4-9 days	27.1	25.0	32.0	30.4	22.3
1-3 days	37.6	31.5	51.5	43.1	29.4

Frequency of Cannabis Use ¹ (Current Users) (%)					
2002/3	All adults		Young adults	Older adults	
	15-64	Male		Female	15-34
<i>Total Weighted N (valid responses)</i>	(103)	(89)	(14)	(84)	(19)
20 days or more	30.5	32.8	15.7	29.8	33.6
10-19 days	20.3	20.0	22.6	21.1	17.0
4-9 days	20.9	20.5	23.8	23.1	11.5
1-3 days	28.2	26.7	37.9	26.0	38.0

¹ EMCDDA 'Handbook for surveys on Drug Use among the General Population' (Aug. 2002) defines frequency of drug use as:

20 days or more = daily or almost daily; 10-19 days = several times a week; 4-9 days = at least once a week; 1-3 days = less than once a week.

Based on responses of those who had used cannabis in the last 30 days.

♦ Due to rounding, the weighted Ns for the gender or age categories do not sum to the total weighted N.

All figures are based on weighted data. All figures are rounded to the nearest decimal place. All figures are based on valid responses.

Table 26: Northern Ireland

Type of Cannabis Most Commonly Used (Current Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male		Female	15-34
<i>Total Weighted N (valid responses)</i>	(53)	(36) [♦]	(16) [♦]	(31) [♦]	(21) [♦]
Hash	9.6	11.9	4.3	2.3	20.4
Grass	43.5	33.1	67.1	53.6	28.5
Resin	33.3	44.1	8.8	28.3	40.6
Weed	9.0	11.0	4.5	10.3	7.0
Herb	0.0	0.0	0.0	0.0	0.0
Skunk	1.5	0.0	4.8	2.4	0.0
Hash oil	0.0	0.0	0.0	0.0	0.0
Other	1.8	0.0	5.8	3.0	0.0
Don't know	1.4	0.0	4.7	0.0	3.6

Based on responses of those who had used cannabis in the last 30 days.

♦ Due to rounding, the weighted Ns for the gender or age categories do not sum to the total weighted N.

All figures are based on weighted data. All figures are rounded to the nearest decimal place. All figures are based on valid responses.

Table 27: Northern Ireland

Cannabis Smokers (Grass/weed/herb/skunk): Grown in Northern Ireland (Current Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
Total Weighted N (valid responses)	(28)	(16)	(12)	(21) [◆]	(8) [◆]
Yes	31.1	40.7	18.4	25.3	47.1
No	30.8	28.1	34.5	26.1	44.1
Don't know	38.1	31.2	47.1	48.6	8.8

◆ Due to rounding, the weighted Ns for the age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

Table 28: Northern Ireland

Method of Taking Cannabis (Current Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
Total Weighted N (valid responses)	(53)	(36) [◆]	(16) [◆]	(31) [◆]	(21) [◆]
Joint	85.2	92.0	69.8	77.7	96.4
Pipe	5.9	4.5	9.0	9.9	0.0
Bong	7.5	3.5	16.4	12.5	0.0
Eat	1.4	0.0	4.7	0.0	3.6

Based on responses of those who had used cannabis in the last 30 days.

◆ Due to rounding, the weighted Ns for the gender or age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 29: Northern Ireland

How Cannabis was Obtained on Last Occasion (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
<i>Total Weighted N (valid responses)</i>	(143)	(102)	(41)	(105)	(38)
Given by family/friend	30.5	27.9	36.7	33.2	23.1
Shared amongst friends	35.3	34.8	36.5	39.0	25.1
Bought from a friend	18.0	23.3	4.9	14.7	26.9
Bought from contact not known personally	5.3	2.1	13.1	5.0	6.0
Given by stranger	1.0	0.7	1.7	0.7	1.8
Given by contact not known personally	6.2	6.6	5.2	6.4	5.6
Bought from a stranger	3.3	4.6	0.0	1.0	9.6
Other	0.5	0.0	1.8	0.0	2.0

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 30: Northern Ireland

Where Cannabis was Obtained on Last Occasion (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
<i>Total Weighted N (valid responses)</i>	(143)	(102)	(41)	(105)	(38)
House of friends	55.9	53.9	60.7	58.5	48.6
Disco/bar/club	16.7	19.3	10.3	12.5	28.0
Street/Park	8.7	7.0	12.8	10.9	2.5
Ordered by phone	5.5	6.3	3.5	4.7	7.7
House of a dealer	5.8	4.6	8.7	5.6	6.2
School/College	0.0	0.0	0.0	0.0	0.0
Office/Workplace	0.5	0.7	0.0	0.7	0.0
Other	7.0	8.1	4.1	7.0	6.9

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 31: Northern Ireland

Ease of Obtaining Cannabis in a 24-Hour Period (Recent Users) (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
<i>Total Weighted N (valid responses)</i>	(143)	(102)	(41)	(105)	(38)
Very Easy	36.7	36.2	37.9	37.2	35.3
Fairly Easy	38.5	40.7	33.0	39.7	35.0
Neither easy or difficult	5.4	2.3	13.1	5.5	5.3
Fairly Difficult	7.5	9.0	3.9	8.0	6.2
Very Difficult	7.2	6.6	8.6	7.1	7.3
Don't know	4.7	5.2	3.6	2.4	11.0

Based on responses of those who had used cannabis in the last 12 months.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 32: Northern Ireland

Regular Cannabis Users and Stopping Cannabis Use (%)					
	All adults		Young adults	Older adults	
	15-64	Male			
Lifetime cannabis users who have ever used cannabis regularly					
<i>Total Weighted N (valid responses)</i>	(493)	(298)	(195)	(295) [◆]	(199) [◆]
	24.4	29.3	16.8	28.1	18.9
Regular cannabis users and stopping cannabis use					
<i>Total Weighted N (valid responses)</i>	(120)	(87)	(33)	(83) [◆]	(38) [◆]
Regular user – Stopped taking	74.3	73.9	75.5	77.2	68.0
Regular user – Tried to stop but failed	12.6	11.4	15.9	10.2	17.9
Regular user – Never tried to stop	13.1	14.8	8.7	12.6	14.1

◆ Due to rounding, the weighted Ns for the age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 33: Northern Ireland

Reasons for Stopping Cannabis Use (Regular Users Who Have Stopped) (%)					
	All adults	Gender		Young adults	Older adults
	15-64	Male	Female	15-34	35-64
<i>Total Weighted N (valid responses)</i>	(89)	(65) [◆]	(25) [◆]	(64) [◆]	(26) [◆]
Did not want to take any more	36.0	34.2	40.6	38.7	29.2
No longer part of social life	24.5	23.7	26.6	18.5	39.4
Did not enjoy after effects	7.0	6.2	9.3	8.4	3.5
Health concerns	9.1	10.6	5.1	9.2	8.8
Persuaded by friends/family	1.6	1.1	2.9	1.1	2.9
Cost/could no longer afford it	9.1	11.1	3.8	10.4	5.8
Impact on job/friends/family	5.1	5.9	2.9	6.0	2.9
Less available supply	0.0	0.0	0.0	0.0	0.0
Pregnancy	2.4	0.0	8.8	3.4	0.0
Pros did not outweigh cons	3.3	4.6	0.0	1.6	7.6
Rehab programme	1.1	1.6	0.0	1.6	0.0
Other	0.8	1.1	0.0	1.1	0.0

◆ Due to rounding, the weighted Ns for the gender or age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 34: Northern Ireland

Attitudes Towards Cannabis Use (%)															
	GENERAL POPULATION					THOSE WHO HAVE NEVER USED CANNABIS					THOSE WHO HAVE EVER USED CANNABIS				
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
People should be permitted to take cannabis for medical reasons															
<i>Total Weighted N (valid responses)</i>	(1961)	(974)	(987)	(831) [†]	(1125) [†]	(1468)	(676)	(792)	(536) [†]	(926) [†]	(493)	(298)	(195)	(295) [◆]	(199) [◆]
Fully agree	39.0	41.6	36.5	36.8	40.9	33.4	33.0	33.7	28.3	36.5	55.9	61.1	47.9	52.2	61.4
Largely agree	33.8	34.9	32.6	35.0	32.9	34.3	38.1	31.0	34.9	33.9	32.3	27.9	39.1	35.0	28.3
Neither agree or disagree	11.6	9.7	13.4	12.6	10.6	13.2	11.3	14.9	15.8	11.6	6.6	6.1	7.2	6.9	6.1
Largely disagree	8.1	6.9	9.3	9.3	7.3	9.8	8.7	10.8	12.3	8.4	3.2	2.9	3.5	3.9	2.1
Fully disagree	6.8	6.3	7.3	5.9	7.3	8.4	8.2	8.6	8.1	8.4	1.9	1.9	2.0	1.8	2.2
Don't know	0.7	0.5	0.9	0.4	1.0	0.9	0.8	1.1	0.5	1.2	0.1	0.0	0.3	0.2	0.0
People should be permitted to take cannabis for recreational reasons															
<i>Total Weighted N (valid responses)</i>	(1961)	(974)	(987)	(831) [†]	(1125) [†]	(1468)	(676)	(792)	(536) [†]	(926) [†]	(493)	(298)	(195)	(295) [◆]	(199) [◆]
Fully agree	6.0	8.4	3.7	7.5	5.0	2.3	2.5	2.1	2.6	2.2	17.1	21.6	10.1	16.3	18.2
Largely agree	12.0	14.0	10.0	15.2	9.6	7.2	8.0	6.6	10.3	5.4	26.1	27.6	24.0	24.1	29.1
Neither agree or disagree	14.3	15.5	13.1	16.4	12.9	13.3	15.6	11.3	15.4	12.2	17.4	15.3	20.5	18.1	16.2
Largely disagree	25.2	24.0	26.5	28.6	22.8	25.5	24.4	26.4	29.2	23.3	24.6	23.2	26.7	27.5	20.2
Fully disagree	42.0	37.6	46.4	32.3	49.1	51.2	48.7	53.3	42.4	56.2	14.9	12.3	18.7	14.0	16.2
Don't know	0.4	0.5	0.3	0.1	0.6	0.5	0.7	0.3	0.1	0.7	0.0	0.0	0.0	0.0	0.0

† Six respondents who were routed to this question confirmed they were eligible to participate in the survey but did not state their exact age.

◆ Due to rounding, the weighted Ns for the age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 34: Northern Ireland continued

Attitudes Towards Cannabis Use (%)															
	GENERAL POPULATION					THOSE WHO HAVE NEVER USED CANNABIS					THOSE WHO HAVE EVER USED CANNABIS				
	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
People smoking cannabis occasionally															
<i>Total Weighted N (valid responses)</i>	(1961)	(974)	(987)	(831) [†]	(1124) [†]	(1468)	(675) [◆]	(792) [◆]	(536) [†]	(926) [†]	(493)	(298)	(195)	(295) [◆]	(199) [◆]
Do not disapprove	30.9	35.4	26.4	39.9	24.4	18.6	19.3	18.1	24.4	15.4	67.3	71.9	60.3	67.9	66.3
Disapprove	38.7	37.1	40.2	38.6	38.7	43.3	43.6	43.1	47.1	41.1	24.8	22.4	28.5	23.3	27.1
Strongly disapprove	30.0	26.9	33.1	21.5	36.2	37.6	36.5	38.5	28.5	42.7	7.4	5.0	11.2	8.7	5.6
Don't know	0.4	0.6	0.3	0.0	0.8	0.5	0.6	0.3	0.0	0.7	0.4	0.7	0.0	0.0	1.0
Perceived risk related to smoking cannabis regularly															
<i>Total Weighted N (valid responses)</i>	(1961)	(974)	(987)	(831) [†]	(1124) [†]	(1468)	(675) [◆]	(792) [◆]	(536) [†]	(926) [†]	(493)	(298)	(195)	(295) [◆]	(199) [◆]
No risk	1.4	2.1	0.8	2.8	0.4	0.7	1.1	0.5	1.6	0.3	3.6	4.4	2.3	5.1	1.3
Slight risk	9.1	11.0	7.3	11.7	7.3	5.5	6.5	4.7	6.5	5.0	19.9	21.1	17.9	21.1	18.0
Moderate risk	26.2	29.7	22.8	32.2	21.9	21.7	24.7	19.2	28.2	18.1	39.6	41.1	37.3	39.6	39.6
Great risk	62.9	57.0	68.8	53.1	70.0	71.6	67.4	75.2	63.4	76.2	37.0	33.4	42.5	34.3	41.1
Don't know	0.3	0.2	0.4	0.2	0.4	0.4	0.3	0.5	0.3	0.5	0.0	0.0	0.0	0.0	0.0

† Six respondents who were routed to this question confirmed they were eligible to participate in the survey but did not state their exact age.

◆ Due to rounding, the weighted Ns for the gender or age categories do not always sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 35: Northern Ireland

Cannabis Prevalence by Gender									
Cannabis Use	LIFETIME PREVALENCE*			LAST YEAR PREVALENCE*			LAST MONTH PREVALENCE*		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Total Weighted N (valid responses)	(992)♦	(1009)♦	(2000)	(991)♦	(1009)♦	(1999)	(991)♦	(1009)♦	(1999)
No	69.9	80.7	75.3	89.7	95.9	92.8	96.3	98.4	97.4
Yes	30.1	19.3	24.7	10.3	4.1	7.2	3.7	1.6	2.6

* p< 0.05

♦ Due to rounding, the weighted Ns for the gender categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 36: Northern Ireland

Cannabis Prevalence by Age Group									
Cannabis Use	LIFETIME PREVALENCE*			LAST YEAR PREVALENCE*			LAST MONTH PREVALENCE*		
	15-34	35-64	Total	15-34	35-64	Total	15-34	35-64	Total
Total Weighted N (valid responses)	(843)♦	(1150)♦	(1992)†	(842)♦	(1150)♦	(1991)†	(842)♦	(1150)♦	(1991)†
No	65.0	82.7	75.3	87.6	96.7	92.8	96.3	98.2	97.4
Yes	35.0	17.3	24.7	12.4	3.3	7.2	3.7	1.8	2.6

* p< 0.05

† Eight respondents confirmed they were eligible to participate in the survey, but did not state their exact age.

♦ Due to rounding, the weighted Ns for the age categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 37: Northern Ireland

Cannabis Prevalence by National Statistics Socio-Economic Classification (NSSEC) (%)								
	Managerial and Professional Qualifications	Intermediate occupations	Small employment and small account workers	Lower supervisory & technical occupations	Semi-routine and routine occupations	Never worked and long term unemployed	Not classified	Total
<i>Total Weighted N (valid responses)</i>	(534)	(211)	(202)	(130)	(637)	(106)	(172)	(1992)
Lifetime Prevalence*								
No	74.9	78.7	78.5	84.1	70.8	72.0	81.3	75.3
Yes	25.1	21.3	21.5	15.9	29.2	28.0	18.7	24.7
Last Year Prevalence*								
No	95.6	98.0	91.7	94.8	89.5	93.9	89.3	92.8
Yes	4.4	2.0	8.3	5.2	10.5	6.1	10.7	7.2
Last Month Prevalence*								
No	98.4	100.0	95.4	98.7	95.4	97.1	99.5	97.4
Yes	1.6	0.0	4.6	1.3	4.6	2.9	0.5	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 38: Northern Ireland

Cannabis Prevalence by Work Status (%)				
	In paid work	Not in paid work	Other	Total
<i>Total Weighted N (valid responses)</i>	(1243)	(607)	(150)	(2000)
Lifetime Prevalence*				
No	73.2	77.6	83.6	75.3
Yes	26.8	22.4	16.4	24.7
Last Year Prevalence				
No	93.2	92.9	89.8	92.8
Yes	6.8	7.1	10.2	7.2
Last Month Prevalence				
No	97.6	96.3	99.4	97.4
Yes	2.4	3.7	0.6	2.6

* p< 0.05

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 39: Northern Ireland

Cannabis Prevalence by Housing Tenure (%)								
	Owned it outright	Buying it with the help of a mortgage or loan	Pay part rent and part mortgage (co-ownership)	Rented from Housing Executive	Rented from a housing association	Rented privately	Live rent free	Total
<i>Total Weighted N (valid responses)</i>	(527)	(908)	(5)	(244)	(38)	(256)	(16)	(1996) [◆]
Lifetime Prevalence*								
No	88.0	74.0	76.4	69.9	60.4	62.7	49.0	75.3
Yes	12.0	26.0	23.6	30.1	39.6	37.3	51.0	24.7
Last Year Prevalence*								
No	97.6	94.1	76.4	89.8	87.5	83.8	75.2	92.8
Yes	2.4	5.9	23.6	10.2	12.5	16.2	24.8	7.2
Last Month Prevalence*								
No	99.7	98.3	76.4	95.2	93.9	93.8	75.2	97.4
Yes	0.3	1.7	23.6	4.8	6.1	6.2	24.8	2.6

* p < 0.05

◆ Due to rounding, the weighted Ns for the housing tenure categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 40: Northern Ireland

Cannabis Prevalence by Highest Qualification Level Attained (%)							
	Degree Level or Higher	Higher Education	GCE/A Level	GCSE A-C or equivalent	GCSE D-G or equivalent	No Qualifications	Total
<i>Total Weighted N (valid responses)</i>	(310)	(237)	(355)	(434)	(159)	(504)	(2000) [◆]
Lifetime Prevalence*							
No	72.7	71.3	71.4	72.9	74.0	84.2	75.3
Yes	27.3	28.7	28.6	27.1	26.0	15.8	24.7
Last Year Prevalence*							
No	96.6	94.1	91.4	89.0	92.2	94.5	92.8
Yes	3.4	5.9	8.6	11.0	7.8	5.5	7.2
Last Month Prevalence*							
No	99.8	99.1	96.2	95.4	96.9	97.8	97.4
Yes	0.2	0.9	3.8	4.6	3.1	2.2	2.6

* p < 0.05

◆ Due to rounding, the weighted Ns for the qualification categories do not sum to the total weighted N.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 41: Northern Ireland

Personally Know People Who Take Cannabis (%)					
2002/3	All adults 15-64		Young adults 15-34	Older adults 35-64	
	Male	Female		Male	Female
Total Weighted N (valid responses)	(3483)	(1725)	(1758)	(1541)	(1942)
Yes	33.9	42.2	25.8	49.6	21.5
No	66.1	57.8	74.2	50.4	78.5

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 42: Northern Ireland

Personally Know People Who Take Cannabis (%)					
2006/7	All adults 15-64		Young adults 15-34	Older adults 35-64	
	Male	Female		Male	Female
Total Weighted N (valid responses)	(1962)	(974)	(988)	(831) [†]	(1125) [†]
Yes	45.7	50.9	40.7	62.0	33.8
No	54.3	49.1	59.3	38.0	66.2

[†] Six respondents who were routed to this question confirmed they were eligible to participate in the survey but did not state their exact age.

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 43: Northern Ireland

Cannabis Prevalence by Health and Social Services Board (HSSB) Area (%)					
2006/7	All adults		Young adults	Older adults	
	15-64	Male			
Lifetime Prevalence (%)					
Eastern HSSB	32.2*	40.3*	24.5*	46.2*	22.1*
Northern HSSB	22.2*	26.2	18.3*	33.8*	14.4*
Southern HSSB	18.7	23.1	14.3	25.6	13.6
Western HSSB	18.1	21.5	14.6	22.6	14.8*
Last Year Prevalence (%)					
Eastern HSSB	8.7	12.0	5.5	14.4	4.5
Northern HSSB	6.5	9.7	3.4	11.8	3.0
Southern HSSB	7.1	10.2	4.0*	13.0	2.7
Western HSSB	4.7	7.5	1.8	8.3	1.9
Last Month Prevalence (%)					
Eastern HSSB	3.5	5.1	2.1	3.6	3.5*
Northern HSSB	1.6	2.0*	1.1	2.5	0.9
Southern HSSB	3.5*	5.2	1.8*	7.8*	0.3
Western HSSB	1.2	1.5	0.9	1.2	1.2

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

*Indicates a significant change from 2002/3 to 2006/7

Cannabis Prevalence by Health and Social Services Board (HSSB) Area (%)					
2002/3	All adults		Young adults	Older adults	
	15-64	Male			
Lifetime Prevalence (%)					
Eastern HSSB	18.9	26.2	12.0	27.4	12.3
Northern HSSB	14.4	19.5	9.3	22.8	8.1
Southern HSSB	16.3	23.0	9.5	23.9	10.2
Western HSSB	16.3	22.5	9.9	24.5	9.2
Last Year Prevalence (%)					
Eastern HSSB	6.0	9.3	2.9	10.8	2.2
Northern HSSB	5.4	9.1	1.7	9.8	2.1
Southern HSSB	4.3	7.9	0.7	7.9	1.5
Western HSSB	5.3	7.4	3.2	9.4	1.8
Last Month Prevalence (%)					
Eastern HSSB	3.4	5.9	1.0	6.6	0.9
Northern HSSB	3.5	6.2	0.8	6.1	1.5
Southern HSSB	1.5	3.1	0.0	2.9	0.5
Western HSSB	1.3	1.5	0.3	2.0	0.1

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