Drug Use in Ireland and Northern Ireland

Bulletin 6

2006/2007 Drug Prevalence Survey: Sedatives or Tranquillisers, and Anti-depressants Results

This bulletin provides a comprehensive overview of many different aspects of sedative or tranquilliser, and anti-depressant use in Ireland and Northern Ireland. It presents data gathered in the All Ireland Drug Prevalence Survey 2006/2007 relating to sedatives or tranquillisers, and anti-depressants on a lifetime (ever used), last year (recent use) and last month (current use) basis. The bulletin also examines, age of first use, frequency of use, method of taking them, how they were obtained and the profile of typical sedative or tranquilliser, and anti-depressant 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 higher among older respondents – the lifetime prevalence rate for older adults aged 35-64 (15%) was more than twice that of young adults aged 15-34 (6%) for sedatives or tranquillisers and was also higher for those using anti-depressants (11% for older adults and 7% for younger adults).
- Females reported higher prevalence rates than males for use of sedatives or tranquillisers, and anti-depressants across all time periods.
- The average age respondents reported they had first used sedatives or tranquillisers was 29 years for males and 31 for females. The average age respondents reported they had first used anti-depressants was 34 years for males and 30 years for females.
- A little more than half (57%) of current users of sedatives or tranquillisers, and nine-in-ten (91%) current users of anti-depressants, took them daily or almost daily.
- Most current users got their sedatives or tranquillisers (89%), and all (100%) got their anti-depressants, on prescription. However 11% reported that they had either got them from someone they knew or bought them without a prescription in a chemist.
- Respondents who were separated or divorced reported higher prevalence rates for use of sedatives or tranquillisers, and anti-depressants across the three time periods.
- Associations were found between various indicators of deprivation and higher prevalence rates. These indicators included: being dependent on the state long term, not being in paid work, lower levels of educational attainment and leaving education before 15 years of age.

Northern Ireland – Key Findings

- Prevalence rates were higher among older respondents – the lifetime prevalence rate for older adults aged 35-64 (26%) was more than twice than that of young adults aged 15-34 (12%) for sedatives or tranquillisers and was also higher for those using anti-depressants (27% for older adults and 14% for young adults).
- Females reported higher prevalence rates than males for lifetime and last month use of sedatives or tranquillisers, and across all time periods for anti-depressants.
- The average age respondents reported they had first used sedatives or tranquillisers was 30 years for both males and females. The average age respondents reported they had first used anti-depressants was 34 years for males and 31 years for females.
- Approximately two-in-three (66%) current users of sedatives or tranquillisers, and nearly nine-in-ten (87%) current users of anti-depressants, took them daily or almost daily.
- The vast majority of current users got their sedatives or tranquillisers (95%), and anti-depressants (96%), on prescription.
- Respondents who were separated, divorced or widowed reported higher lifetime prevalence rates for sedatives or tranquillisers, and anti-depressants.
- Associations were found between various indicators of deprivation and prevalence rates for sedatives or tranquillisers, and anti-depressants across all three time periods. Prevalence rates were higher among those in the lower socio-economic classifications, those not in paid work and those with low educational attainment or no qualifications.

Ireland and Northern Ireland Comparison – Key Findings

- In all instances, use of sedatives or tranquillisers, and anti-depressants was higher in Northern Ireland than in Ireland.
- Older adults reported higher lifetime, last year and last month prevalence rates than younger adults for sedatives or tranquillisers, and anti-depressants in both Ireland and Northern Ireland.
- Females reported higher prevalence rates than males for anti-depressants in both jurisdictions across all time periods.
- In Ireland and Northern Ireland the pattern of obtaining sedatives or tranquillisers, and anti-depressants was the same – nearly all users took tablets or syrup that they had obtained on prescription.
- In both jurisdictions, lifetime prevalence rates for use of sedatives or tranquillisers, and anti-depressants were higher among respondents who were separated, divorced or widowed.
- Associations were found between various indicators of deprivation and higher prevalence rates for sedatives or tranquillisers, and anti-depressants (lower socio-economic groups, not being in paid work and lower educational attainment). The pattern was similar in both Ireland and Northern Ireland.

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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 the 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 such as sedatives or tranquillisers, and anti-depressants; 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 Board[1]/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 published on the websites of the NACD (www.nacd.ie/) and the DHSSPS (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]

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.

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 changes as it refers to recent use. Last month use is equally valuable as it refers to current 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 2006/2007 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 3 (2006/7 Drug Prevalence Survey: Cannabis Results) was published in December 2008, it examines age of first use; regular use; type of cannabis used; method by which cannabis is used; how and where cannabis is obtained; reasons for stopping use; attitudes to cannabis use and perceptions of risk, together with the typical profile of cannabis users.

Bulletin 4 (2006/7 Drug Prevalence Survey: Cocaine Results) was published in October 2008 and contains prevalence rates for the use of cocaine (cocaine powder or crack cocaine) and other information relating to cocaine 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).

This bulletin (Bulletin 6) contains prevalence rates for the use of sedatives or tranquillisers, and anti-depressants and other information in relation to sedative or tranquilliser, and anti-depressant use in Ireland and Northern Ireland for 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%).

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.

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.

The Chi-Square test examined the association between categorical variables and the use of sedatives or tranquillisers, and anti-depressants in 2006/7. For the purpose 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 between the Ireland and Northern Ireland results.

The measurement of the combined group of sedatives, tranquillisers and anti-depressants was changed between 2002/3 and 2006/7. In 2002/3 this drugs category was measured using one question while in 2006/7 two questions were asked and a more expansive list of drug categories was used (see technical report for further details). Given this change in measurement comparative analysis between 2002/3 and 2006/7 is not appropriate.

In an attempt to compare prevalence rates for sedatives or tranquillisers, and anti-depressants 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 the following 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 Social Class based on Occupation and Socio-Economic Group (SEG). The NSSEC classification data shown in Table 21 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 8 – 10, 12 & 13) and Northern Ireland (Tables 21 – 23, 24 & 25) differ slightly with regard to response categories. Table 11: Ireland Age Education Ceased has no comparable table in Northern Ireland.

Future Publications

Further publications from the Drug Prevalence Survey will present analysis of data on polydrug use; alcohol data will also be published (for Ireland only).

Glossary

Sedatives and tranquillisers

Sedatives and tranquillisers are commonly used terms for the same group of medicines which depress, slow down or calm the brain and central nervous system. They are mainly Benzodiazepines ("Benzos") but other drugs with the same effects, e.g. Zolpidem and Zopiclone are included in this group. Medically they are often referred to as Hypnotics, which induce sleep and Anxiolytics or anti-anxiety agents.

The same drug can be used as a hypnotic or as an anti-anxiety agent depending on the dose used and on the time of day that they are used. Hypnotics are used to treat insomnia (lack of adequate restful sleep) which is causing distress. Anxiolytics are also referred to as "minor tranquillisers". Benzodiazepine anxiolytics are the most common type used to obtain relief of severe and disabling anxiety.

Anti-depressants

These are medicines used to treat conditions such as the low or sad mood, loss of interest or pleasure in daily activities, fatigue and energy loss usually known as Depression. Different drug classes are available on prescription to treat Depression.

All of these drugs above are prescribed under medical supervision and can only be obtained by prescription from a pharmacist.

Results – Ireland

Prevalence

Sedatives or tranquillisers (Table 1)

One-in-ten respondents (11%) aged 15-64 reported that they had taken sedatives or tranquillisers at some stage in their lives, one-in-twenty (5%) had used them last year and 3% had used them last month.

Anti-depressants

Similarly, less than one-in-ten respondents (9%) aged 15-64 reported that they had ever used anti-depressants, 4% had used them in the last year and 3% had used them in the last month.

Age *(Table 1)*

Sedatives or tranquillisers

The lifetime prevalence rate for older adults aged 35-64 (15%) was more than twice that for young adults aged 15-34 (6%). Older adults also had higher last year and last month prevalence rates (7% and 4% respectively) than young adults (3% and 1% respectively).

Anti-depressants

Similar results were found for anti-depressants, with older adults more likely than young adults to have used them at some stage in their lives, in the last year and in the last month. The lifetime prevalence rate for older adults aged 35-64 (11%) was higher than that for young adults (15-34) (7%). Older adults also had higher last year (5%) and last month (4%) prevalence rates compared to 3% and 2% respectively for young adults.

Gender *(Table 1)*

Female respondents reported higher prevalence rates than males across all time periods.

Sedatives or tranquillisers

Females reported higher prevalence rates for lifetime (13% compared to 8%), last year (6% compared to 4%) and last month use (4% compared to 2%).

Anti-depressants

The lifetime prevalence rate for females (13%) was twice that for males (6%). Similarly, the figures for last year use were 6% for females and 3% for males, whilst the last month prevalence rate for females was 4% and 2% for males.

First use *(Table 2)*

Sedatives or tranquillisers

The average[3] age respondents aged 15-64 reported that they had first used sedatives or tranquillisers was 30 years. The figure was 29 years for males and 31 years for females. The median age at which younger respondents (aged 15-34) reported first using sedatives or tranquillisers was at 22 years whereas the median age at which older respondents (aged 35-64) reported first use was 35 years.

Anti-depressants

The average (median) age that respondents aged 15-64 reported that they had first used anti-depressants was 32 years. The figure was 34 for males and 30 for females. Younger respondents (aged 15-34) reported first using anti-depressants at 21 years. Older respondents (aged 35-64) reported an average age of first use of anti-depressants at 35 years.

Frequency of use *(Table 3)*

Sedatives or tranquillisers

More than half (57%) of the current users of sedatives or tranquillisers reported use on a daily or almost daily basis, 6% reported use several times a week, 17% used them at least once a week and 20% used them less than once a week. The frequency with which males and females used sedatives or tranquillisers did not differ greatly. Six-in-ten (60%) female and 53% of male current sedative or tranquilliser users reported daily or almost daily use.

Anti-depressants

More than nine-in-ten (91%) current anti-depressants users reported daily or almost daily use, 5% used them several times a week, 2% used them at least once a week and 2% used them less than once a week. The frequency with which males and females used anti-depressants did not differ greatly. The vast majority of both female (95%) and male (86%) current anti-depressant users reported daily or almost daily use.

Method of taking sedatives or tranquillisers, and anti-depressants[4] *(Table 4)*

Sedatives or tranquillisers

Nearly all (99%) current users of sedatives or tranquillisers reported taking them orally (in the form of tablets or syrup); 0.5% of current users reported injecting sedatives or tranquillisers. No females (0.0%) reported injecting but 2% of males did.

Anti-depressants

Nearly all (99%) current users of anti-depressants reported taking them orally (in the form of tablets or syrup); 0.7% injected anti-depressants. No females (0.0%) reported injecting but 2% of males did.

How sedatives or tranquillisers, and anti-depressants were obtained *(Table 5)*

All current users of sedatives or tranquillisers, and anti-depressants were asked how they had obtained their drugs.

Sedatives or tranquillisers

The majority (89%) of current sedative or tranquilliser users got them on prescription; 7% said that they got them from someone else they knew and 2% had bought them without a prescription in a chemist. Older adults aged 35-64 (92%) were more likely then young adults aged 15-34 (77%) to report having got sedatives or tranquillisers on prescription. Twice as many young adults (13%) got them from someone they knew compared with older adults (6%). Over three times as many males (13%) than females (4%) got them from someone they knew.

Anti-depressants

The vast majority of anti-depressant users (99%) had got them on prescription; only 0.5% had bought them without a prescription in a chemist. No males reported buying them without a prescription whereas 1% of females did. All older adults (aged 35-64) reported buying them on prescription whereas 2% of young adults (aged 15-34) reported buying them without a prescription in a chemist.

User profile – sedatives or tranquillisers, and anti-depressants

For the purpose of the statistical tests detailed below a user was defined as someone who has ever used sedatives or tranquillisers, or anti-depressants. Tests were performed on the data for lifetime, last year and last month prevalence rates where appropriate.

Gender *(Table 6)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between gender and use of sedatives or tranquillisers. Females are more likely than males to have ever used sedatives or tranquillisers (13% compared to 8%) to have used them in the last twelve months (6% compared to 4%) and to have used them in the last month (4% compared to 2%).

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

4 This was a multi-choice question and therefore percentages will not equal 100%.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between gender and use of anti-depressants across all three time periods. Females are more likely than males to have ever used anti-depressants (13% compared to 6%), to have used them in the last twelve months (6% compared to 3%) and to have used them in the last month (4% compared to 2%).

Age *(Table 7)*

Sedatives or tranquillisers

The results of all three chi-square testes were statistically significant. This indicates that there is an association between age and use of sedatives or tranquillisers. Older respondents aged 35-64 reported higher prevalence rates than young adults aged 15-34 across all three time periods: Lifetime (15% compared to 6%); last year (7% compared to 3%); and last month (4% compared to 1%).

Anti-depressants

The results of all three chi-square testes were statistically significant. This indicates that there is an association between age and use anti-depressants. Older respondents aged 35-64 reported higher prevalence rates than young adults aged 15-34 across all three time periods: Lifetime (11% compared to 7%); last year (5% compared to 3%); and last month (4% compared to 2%).

Socio-economic group (SEG)[5] *(Table 8)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between SEG and use of sedatives or tranquillisers on a lifetime, last year or last month basis. Respondents from SEG category E (all those dependent on the State long term) reported higher than expected prevalence rates across all three time periods. However, generally those in Category A also had a higher than expected prevalence rates across lifetime and last year periods.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between SEG and use of anti-depressants on a lifetime, last year or last month basis. Respondents from SEG category E (all those dependent on the State long term) reported higher than expected prevalence rates across all three time periods. However, generally those in Category A also had a higher than expected prevalence rates across lifetime, last year and last month periods.

5 See classification of Socio-Economic Groups on page 5.

Work Status *(Table 9)*

Sedatives or tranquillisers

The results of the three chi-square tests were statistically significant. This indicates that there is an association between work status and use of sedatives or tranquillisers. Respondents who reported they were not in paid work had higher than expected prevalence rates across all three time periods.

Anti-depressants

The results of the three chi-square tests were statistically significant. This indicates that there is an association between work status and use of anti-depressants. Respondents who reported they were not in paid work had higher than expected prevalence rates across all three time periods.

Housing tenure *(Table 10)*

Sedatives or tranquillisers

The results of two of the three chi-square tests were statistically significant. This indicates that there is an association between housing tenure and lifetime and last year use of sedatives or tranquillisers. Respondents who rented their houses from a local authority or housing association reported higher levels of use on a lifetime and last year basis.

Anti-depressants

The results of the three chi-square tests were statistically significant. This indicates that there is an association between housing tenure and use of anti-depressants. Respondents who rented their houses from a local authority or housing association reported higher levels of use on a lifetime, last year and last month basis.

Age education ceased *(Table 11)*

Sedatives or tranquillisers

The results of the three chi-square tests were statistically significant. This indicates that there is an association between age education ceased and use of sedatives or tranquillisers. A general trend was observed where those respondents who had ceased education aged 15 years or under had higher than expected prevalence rates on a lifetime, last year and last month basis.

Anti-depressants

The results of the three chi-square tests were statistically significant. This indicates that there is an association between age education ceased and use of anti-depressants. A general trend was observed where those respondents who had ceased education aged 15 years or under had higher than expected prevalence rates on a lifetime, last year and last month basis.

Education level *(Table 12)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between education level and use of sedatives or tranquillisers. Respondents who had obtained a primary school only level of education had higher than expected prevalence rates on a lifetime, last year and last month basis.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between education level and use of anti-depressants. Respondents who had obtained a primary school only level of education had higher than expected prevalence rates on a lifetime, last year and last month basis.

Marital Status *(Table 13)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between marital status and use of sedatives or tranquillisers. Respondents who were separated or divorced reported higher prevalence rates than expected over the three time periods.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between marital status and use of anti-depressants. Respondents who were separated or divorced reported higher prevalence rates than expected over the three time periods.

Results – Northern Ireland

Prevalence *(Table 14)*

Sedatives or tranquillisers

One-in-five (20%) respondents aged 15-64 reported that they had used sedatives or tranquillisers at some stage in their lives while fewer than one-in-ten respondents have used them in the last year (9%) and in the last month (7%).

Anti-depressants

Similarly, just over one-in-five (21%) of all adults reported lifetime use of anti-depressants, 9% have used them in the last year and 8% have used them in the last month.

Age *(Table 14)*

Sedatives or tranquillisers

The lifetime prevalence rate for those aged 35-64 (26%) was twice than that of those aged 15-34 (12%). Older adults were also more than twice as likely as young adults to have used sedatives or tranquillisers in the last year (13% compared to 5%) and more than five times as likely to have used them in the last month (11% compared to 2%).

Anti-depressants

Similar results were found for anti-depressants, with older adults more likely than young adults to have used them at some stage in their lives, in the last year and in the last month. The lifetime prevalence rate for those aged 35-64 (27%) was nearly twice that of those aged 15-34 (14%). Older adults also had higher last year and last month prevalence rates (12% and 10%, respectively) than young adults (6% and 4%, respectively).

Gender *(Table 14)*

Sedatives or tranquillisers

Females reported higher prevalence rates than males for lifetime (22% compared to 18%) and last month (8% compared to 6%) use of sedatives or tranquillisers. A similar proportion of females (10%) and males (8%) reported last year use of these drugs.

Anti-depressants

Prevalence rates for anti-depressants were higher among females than males across all time periods. The lifetime prevalence rate for females was 28% and 13% for males; the last year prevalence rate was 12% for females and 6% for males; and the last month prevalence rate was 11% for females and 4% for males.

First use *(Table 15)*

Sedatives or tranquillisers

The average[6] age that all adults reported they had first used sedatives or tranquillisers was 30 years; this was true for both males and females. Young adults aged 15-34 reported first using sedatives or tranquillisers at 18 years while older adults aged 35-64 reported an average age of first use of 35 years.

Anti-depressants

The average[6] age that respondents aged 15-64 reported they had first used anti-depressants was 32 years; the corresponding age for males was 34 years and 31 years for females. Young adults aged 15-34 reported first using anti-depressants at 21 years with older adults aged 35-64 first using them at 37 years.

Frequency of use *(Table 16)*

Sedatives or tranquillisers

Nearly two-in-three (66%) current users of sedatives or tranquillisers take them on a daily or almost daily basis, 7% use them several times a week, 13% use them at least once a week and 15% use them less than once a week.

Anti-depressants

Nearly nine-in-ten (87%) current users of anti-depressants use them daily or almost daily, 3% use them several times a week, 5% use them at least once a week and 5% use them less than once a week.

Method of taking sedatives or tranquillisers, and anti-depressants *(Table 17)*

Sedatives or tranquillisers

Nearly all (99%) current users of sedatives or tranquillisers reported taking them orally (in the form of tablets or syrup). No current users of sedatives or tranquillisers reported injecting them with a needle, although 1% took them by some other method.

Anti-depressants

All (100%) current users of anti-depressants reported taking them orally.

How sedatives or tranquillisers, and anti-depressants were obtained *(Table 18)*

All current users of sedatives or tranquillisers, and anti-depressants were asked how they had obtained their drugs.

Sedatives or tranquillisers

The vast majority (95%) of current users of sedatives or tranquillisers got them on prescription. A further 2% got them from someone they know, 2% bought them without a prescription in a chemist, and 1% bought them over the Internet. Among current users, at least nine-in-ten females (98%) and males (90%) reported getting their sedatives or tranquillisers on prescription. All (100%) young adults aged 15-34 and 94% of older adults aged 35-64 who are current users of sedatives or tranquillisers got them on prescription.

Anti-depressants

Similarly, more than nine-in-ten (96%) current users of anti-depressants got them on prescription, 2% got them from someone they know, and 2% bought them without a prescription in a chemist. The vast majority of female (98%) and male (90%) current users of anti-depressants got them on prescription. Just over nine-in-ten (91%) young adults got their anti-depressants on prescription, 5% got them from someone they knew and 4% got them from the chemist without a prescription, whereas 97% of older adults who are current users got their anti-depressants on prescription, 1% got them from someone they knew and 2% got them from the chemist without a prescription.

User profile – sedatives or tranquillisers, and anti-depressants

For the purpose of the statistical tests detailed below a user was defined as someone who has ever used sedatives or tranquillisers, or anti-depressants.

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

Gender *(Table 19)*

Sedatives or tranquillisers

The results of two of the three chi-square tests were statistically significant. This indicates that there is an association between gender and lifetime and last month use of sedatives or tranquillisers. Females are more likely than males to have ever used sedatives or tranquillisers (22% compared to 18%) or to have used them in the last month (8% compared to 6%).

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between gender and use of anti-depressants across all three time periods. Females are more likely than males to have ever used anti-depressants (28% compared to 13%), to have used them in the last year (12% compared to 6%) and to have used them in the last month (11% compared to 4%).

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

Age *(Table 20)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between age and use of sedatives or tranquillisers. Older adults aged 35-64 reported higher prevalence rates than young adults aged 15-34 across all three time periods: lifetime (26% compared to 12%); last year (13% compared to 5%); and last month (11% compared to 2%).

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between age and use of anti-depressants. Older adults aged 35-64 reported higher prevalence rates than young adults aged 15-34 across all three time periods: lifetime (27% compared to 14%); last year (12% compared to 6%); and last month (10% compared to 4%).

National Statistics Socio-Economic Classifications (NSSEC)[7] *(Table 21)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between NSSEC and use of sedatives or tranquillisers on a lifetime, last year and last month basis. Respondents from the NSSEC categories 'Semi-routine and routine occupations' and 'Never worked and long term unemployed' reported higher than expected prevalence rates across all three time periods.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association on a lifetime, last year and last month basis between NSSEC and use of anti-depressants. Respondents from the NSSEC categories 'Semi-routine and routine occupations' and 'Never worked and long term unemployed' reported higher than expected prevalence rates across all three time periods.

Work status *(Table 22)*

Sedatives or tranquillisers

The results of the three chi-square tests were statistically significant. This indicates that there is an association between work status and use of sedatives or tranquillisers. Respondents who reported they were not in paid work had higher than expected prevalence rates across all three time periods.

Anti-depressants

The results of the three chi-square tests were statistically significant. This indicates that there is an association between work status and use of anti-depressants. Respondents who reported they were not in paid work had higher than expected prevalence rates across all three time periods.

Housing tenure *(Table 23)*

Sedatives or tranquillisers

Due to small cell counts the chi-square test was not appropriate to determine any association between housing tenure and the use of sedatives or tranquillisers across all three time periods.

Anti-depressants

Due to small cell counts the chi-square test was not appropriate to determine any association between housing tenure and the use of anti-depressants across all three time periods.

Education level *(Table 24)*

Sedatives or tranquillisers

The results of all three chi-square tests were statistically significant. This indicates that there is an association between education level and use of sedatives or tranquillisers. Respondents who had either no qualifications or who had attained GCSE D-G grades as their highest qualification level reported higher prevalence rates than expected on a lifetime, last year and last month basis.

Anti-depressants

The results of all three chi-square tests were statistically significant. This indicates that there is an association between education level and use of anti-depressants. Respondents who had either no qualifications or who had attained GCSE D-G grades as their highest qualification level reported higher prevalence rates than expected across all three time periods.

Marital Status *(Table 25)*

Sedatives or tranquillisers

Due to small cell counts, the chi-square test was only appropriate for lifetime prevalence data and returned a significant result. This indicates an association between marital status and lifetime use of sedatives or tranquillisers. Respondents who were co-habiting, separated, divorced or widowed reported higher prevalence rates than expected.

Anti-depressants

Due to small cell counts, the chi-square test was only appropriate for lifetime prevalence data and returned a significant result. This indicates an association between marital status and lifetime use of anti-depressants. Respondents who were separated, divorced or widowed reported higher prevalence rates than expected.

7 See categories of National Statistics Socio-Economic Classifications on page 5.

Comparison – Ireland and Northern Ireland

Prevalence

In all instances the use of sedatives or tranquillisers, and anti-depressants was higher in Northern Ireland than in Ireland.

Sedatives or tranquillisers

The figure for lifetime use in Northern Ireland (20%) was nearly double that reported for Ireland (11%). The figures for recent use were similarly proportioned. The last year prevalence rate was 9% in Northern Ireland and 5% in Ireland. Likewise, the figure for current use was higher in Northern Ireland (7%) than it was in Ireland (3%).

Anti-depressants

Similarly, the figure for lifetime use in Northern Ireland (21%) was over double that reported for Ireland (9%). The figures for recent use were similarly proportioned. The last year prevalence rate was 9% in Northern Ireland and 4% in Ireland. Likewise, the figure for current use was higher in Northern Ireland (8%) than it was in Ireland (3%).

Obtaining sedatives or tranquillisers, and anti-depressants

Throughout Ireland and Northern Ireland the pattern was the same – nearly all users of sedatives or tranquillisers, and anti-depressants took tablets or syrup that they had obtained on prescription.

Profile of users

The profile of those who used sedatives or tranquillisers, and anti-depressants was similar in both jurisdictions.

In general, females and older respondents reported higher prevalence rates. These associations were found to be statistically significant among females for all usage of sedatives or tranquillisers in Ireland and for lifetime and last month use in Northern Ireland, and among older adults across the three time periods for both jurisdictions. Use of anti-depressants was higher among females and older adults aged 35-64 across all time periods in Ireland and Northern Ireland.

In Ireland, there were statistically significant associations between marital status and use of sedatives or tranquillisers, and anti-depressants on a lifetime, last year and last month basis. However, in Northern Ireland there was only an association between marital status and lifetime use. Nonetheless, respondents who were separated, divorced or widowed in both jurisdictions were more likely to use sedatives or tranquillisers, and anti-depressants.

Significant associations were also found between social class and the use of sedatives or tranquillisers, and anti-depressants. Those respondents who were dependent upon the State long term in Ireland, and those who had never worked or were long-term unemployed in Northern Ireland, reported higher prevalence rates. Similarly, associations between working status and use of these drugs were also noted. Those who were not in paid work in both Ireland and Northern Ireland reported higher prevalence rates across all three time periods.

Further associations were found between educational level attained in Ireland (lower levels of attainment such as 'primary school' only were associated with higher levels of use) and qualification level attained in Northern Ireland (those with no qualifications or who had attained GCSE D-G grades as their highest qualification reported higher prevalence rates). Significant associations were also found between age education ceased and use of sedatives or tranquillisers, and anti-depressants in Ireland on a lifetime, last year and last month basis. A higher proportion of respondents who left school before 15 years-of-age reported using sedatives or tranquillisers, and anti-depressants.

Table 1: Ireland

Sedatives or Tranquillisers – Prevalence Rates (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(4967)*	*(2513)*	*(2454)*	*(2315)*	*(2652)*
Lifetime Prevalence	10.5	8.0	13.2	5.9	14.6
Last Year Prevalence (Recent use)	4.7	3.7	5.7	2.5	6.5
Last Month Prevalence (Current use)	3.0	2.4	3.5	1.3	4.4

Anti-depressants - Prevalence Rates (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(4967)*	*(2513)*	*(2454)*	*(2315)*	*(2652)*
Lifetime Prevalence	9.2	5.9	12.5	7.1	10.9
Last Year Prevalence (Recent use)	4.3	3.0	5.6	3.2	5.2
Last Month Prevalence (Current use)	3.1	2.3	3.9	2.2	3.9

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

Table 2: Ireland

Age of First Use of Sedatives or Tranquillisers (All users)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(524)*	*(201)*	*(323)*	*(136)*	*(388)*
Mean age of first use	32	31	33	23	36
Median age of first use[1]	30	29	31	22	35

Age of First Use of Anti-depressants (All Users)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(455)*◆	*(149)*	*(306)*	*(164)*	*(290)*
Mean age of first use	32	34	30	22	37
Median age of first use[1]	32	34	30	21	35

[1] Median is used as a measure of central tendency to avoid extreme values skewing results.
◆ Due to weighting, age categories do not always sum to total weighted N.
All figures are based on weighted data.
All figures are based on valid responses.

Table 3: Ireland

Frequency of Use[2] of Sedatives or Tranquillisers (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(147)*	*(60)*	*(87)*	*(29)*	*(118)*
20 days or more	57.1	53.3	59.8	41.4	61.0
10-19 days	6.2	5.0	6.9	3.4	6.8
4-9 days	17.0	16.7	17.2	17.2	16.9
1-3 days	19.7	25.0	16.1	37.9	15.3

Frequency of Use[2] of Anti-depressants (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(152)*◆	*(56)*	*(94)*	*(51)*	*(101)*
20 days or more	91.1	87.5	94.7	92.2	90.1
10-19 days	4.9	7.1	3.2	5.9	5.0
4-9 days	1.8	1.8	1.1	2.0	2.0
1-3 days	2.2	3.6	1.1	0.0	3.0

[2] 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.

◆ Due to weighting, gender categories do not always sum to 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

Method of Taking Sedatives or Tranquillisers (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(147)*◆	*(60)*	*(87)*	*(30)*	*(118)*
Oral (Tablets or Syrup)	99.5	98.4	100	100	99.2
Injection with a Needle	0.5	1.6	0.0	0.0	0.8
Other	0.0	0.0	0.0	0.0	0.0

Method of Taking Anti-depressants (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(153)*◆	*(58)*	*(96)*	*(50)*	*(103)*
Oral (Tablets or Syrup)	99.3	98.3	100	100	99
Injection with a Needle	0.7	1.7	0.0	0.0	1.0
Other	0.0	0.0	0.0	0.0	0.0

◆ Due to weighting, gender and/or age categories do not always sum to 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

How Sedatives or Tranquillisers were Obtained (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(147)*◆	*(61)*	*(86)*	*(31)*	*(117)*
I got them on prescription	89.4	83.6	93.0	77.4	92.3
I got them from someone I know	7.4	13.1	3.5	12.9	6.0
I bought them without a prescription in a chemist	2.2	0.0	3.5	3.2	1.7
I bought them over the Internet	0.0	0.0	0.0	0.0	0.0
Other	1.1	3.3	0.0	6.5	0.0

How Anti-depressants were Obtained (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(154)*	*(58)*	*(96)*	*(51)*	*(103)*
I got them on prescription	99.5	100	99.0	98.0	100
I got them from someone I know	0.0	0.0	0.0	0.0	0.0
I bought them without a prescription in a chemist	0.5	0.0	1.0	2.0	0.0
I bought them over the Internet	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0

◆ Due to weighting, age categories do not always sum to 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 6: Ireland

Sedatives or Tranquillisers Prevalence by Gender (%)				Anti-depressants Prevalence by Gender (%)		
	Male	Female	Total	Male	Female	Total
Lifetime*,**						
Total Weighted N (valid responses)	*(2513)*	*(2454)*	*(4967)*	*(2513)*	*(2454)*	*(4967)*
No	92.0	86.8	89.5	94.1	87.5	90.8
Yes	8.0	13.2	10.5	5.9	12.5	9.2
Last Year*,**						
Total Weighted N (valid responses)	*(2513)*	*(2453)*	*(4966)*	*(2513)*	*(2454)*	*(4967)*
No	96.3	94.3	95.3	97.0	94.4	95.7
Yes	3.7	5.7	4.7	3.0	5.6	4.3
Last Month*,**						
Total Weighted N (valid responses)	*(2513)*	*(2454)*	*(4967)*	*(2513)*	*(2454)*	*(4967)*
No	97.6	96.5	97.0	97.7	96.1	96.9
Yes	2.4	3.5	3.0	2.3	3.9	3.1

* p <0.05 (Sedatives or tranquillisers)
** p <0.05 (Anti-depressants)
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

Sedatives or Tranquillisers Prevalence by Age Group (%)				Anti-depressants Prevalence by Age Group (%)		
	Young adults 15-34	Older adults 35-64	Total	Young adults 15-34	Older adults 35-64	Total
Lifetime*,**						
Total Weighted N (valid responses)	*(2315)*	*(2652)*	*(4967)*	*(2315)*	*(2651)*	*(4966)*
No	94.1	85.4	89.5	92.9	89.1	90.9
Yes	5.9	14.6	10.5	7.1	10.9	9.1
Last Year*,**						
Total Weighted N (valid responses)	*(2315)*	*(2651)*	*(4966)*	*(2315)*	*(2651)*	*(4966)*
No	97.5	93.5	95.3	96.8	94.8	95.7
Yes	2.5	6.5	4.7	3.2	5.2	4.3
Last Month*,**						
Total Weighted N (valid responses)	*(2315)*	*(2652)*	*(4967)*	*(2315)*	*(2652)*	*(4967)*
No	98.7	95.6	97.0	97.8	96.1	96.9
Yes	1.3	4.4	3.0	2.2	3.9	3.1

* p <0.05 (Sedatives or tranquillisers)
** p <0.05 (Anti-depressants)
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

Sedatives or Tranquillisers Prevalence by Socio-Economic Group (%)							
	A	**B**	**C**	**C2**	**D**	**E**	**Total**
Lifetime*							
Total Weighted N (valid responses)	*(232)*	*(868)*	*(1423)*	*(1111)*	*(799)*	*(485)*	*(4918)*
No	86.6	89.8	89.5	91.8	91.5	81.2	89.5
Yes	13.4	10.1	10.5	8.2	8.5	18.8	10.5
Last Year*							
Total Weighted N (valid responses)	*(232)*	*(868)*	*(1424)*	*(1111)*	*(800)*	*(486)*	*(4921)*
No	93.5	96.0	95.8	96.8	95.9	89.3	95.3
Yes	6.5	4.0	4.2	3.2	4.1	10.7	4.7
Last Month*							
Total Weighted N (valid responses)	*(232)*	*(868)*	*(1424)*	*(1111)*	*(800)*	*(486)*	*(4923)*◆
No	97.0	97.7	97.4	98.6	97.1	91.2	97.0
Yes	3.0	2.3	2.6	1.4	2.9	8.8	3.0

* $p < 0.05$ (Sedatives or tranquillisers)

◆ Due to weighting, SEG categories do not always sum to 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 8: Ireland (continued)

Anti-depressants Prevalence by Socio-Economic Group (%)							
	A	**B**	**C1**	**C2**	**D**	**E**	**Total**
Lifetime**							
Total Weighted N (valid responses)	*(232)*	*(869)*	*(1424)*	*(1111)*	*(799)*	*(485)*	*(4922)*◆
No	89.2	94.0	91.6	92.2	91.4	79.4	90.8
Yes	10.8	6.0	8.4	7.8	8.6	20.6	9.2
Last Year**							
Total Weighted N (valid responses)	*(232)*	*(868)*	*(1424)*	*(1111)*	*(799)*	*(485)*	*(4920)*◆
No	94.8	97.2	96.7	97.0	96.0	86.8	95.7
Yes	5.2	2.8	3.3	3.0	4.0	13.2	4.3
Last Month**							
Total Weighted N (valid responses)	*(232)*	*(869)*	*(1423)*	*(1111)*	*(799)*	*(485)*	*(4920)*◆
No	96.6	97.8	97.7	97.8	97.6	89.9	96.9
Yes	3.4	2.2	2.3	2.2	2.4	10.1	3.1

** $p < 0.05$ (Anti-depressants)

◆ Due to weighting, SEG categories do not always sum to 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 9: Ireland

Sedatives or Tranquillisers Prevalence by Work Status (%)						Anti-depressants Prevalence by Work Status (%)				
	In paid work	Not in paid work	Student	Other	Total	In paid work	Not in paid work	Student	Other	Total
Lifetime*,**										
Total Weighted N (valid responses)	*(3202)*	*(1228)*	*(525)*	*(11)*	*(4966)*	*(3202)*	*(1228)*	*(525)*	*(11)*	*(4966)*
No	90.8	82.8	96.8	100.0	89.5	92.8	83.1	96.8	100.0	90.9
Yes	9.2	17.2	3.2	0.0	10.5	7.2	16.9	3.2	0.0	9.1
Last Year*,**										
Total Weighted N (valid responses)	*(3202)*	*(1228)*	*(525)*	*(11)*	*(4966)*	*(3203)*	*(1229)*	*(525)*	*(11)*	*(4967)*
No	96.7	90.6	98.5	100.0	95.3	97.3	90.5	98.5	100.0	95.7
Yes	3.3	9.4	1.5	0.0	4.7	2.7	9.5	1.5	0.0	4.3
Last Month*,**										
Total Weighted N (valid responses)	*(3202)*	*(1228)*	*(526)*	*(11)*	*(4967)*	*(3203)*	*(1228)*	*(525)*	*(11)*	*(4967)*
No	98.2	92.8	99.8	100.0	97.0	98.2	92.8	98.9	100.0	96.9
Yes	1.8	7.2	0.2	0.0	3.0	1.8	7.2	1.1	0.0	3.1

* $p < 0.05$ (Sedatives or tranquillisers)

** $p < 0.05$ (Anti-depressants)

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

Sedatives or Tranquillisers Prevalence by Housing Tenure (%)	Owned in part or full	Rented from private landlord	Rented from LA/HA	Other	Total
Lifetime*,**					
Total Weighted N (valid responses)	*(3521)*	*(932)*	*(466)*	*(47)*	*(4968)*◆
No	89.3	90.5	87.3	100.0	89.5
Yes	10.7	9.5	12.7	0.0	10.5
Last Year*,**					
Total Weighted N (valid responses)	*(3521)*	*(932)*	*(466)*	*(47)*	*(4966)*
No	95.5	95.9	92.7	100.0	95.3
Yes	4.5	4.1	7.3	0.0	4.7
Last Month**					
Total Weighted N (valid responses)	*(3521)*	*(931)*	*(466)*	*(47)*	*(4965)*
No	97.2	97.3	95.3	100.0	97.1
Yes	2.8	2.7	4.7	0.0	2.9

Anti-depressants Prevalence by Housing Tenure (%)	Owned in part or full	Rented from private landlord	Rented from LA/HA	Other	Total
Lifetime*,**					
Total Weighted N (valid responses)	*(3522)*	*(932)*	*(467)*	*(48)*	*(4969)*
No	91.9	89.5	84.6	95.8	90.8
Yes	8.1	10.5	15.4	4.2	9.2
Last Year*,**					
Total Weighted N (valid responses)	*(3522)*	*(932)*	*(466)*	*(48)*	*(4968)*
No	96.3	94.8	92.3	100.0	95.7
Yes	3.7	5.2	7.7	0.0	4.3
Last Month**					
Total Weighted N (valid responses)	*(3522)*	*(932)*	*(466)*	*(48)*	*(4968)*
No	97.3	97.0	93.6	100.0	96.9
Yes	2.7	3.0	6.4	0.0	3.1

* $p < 0.05$ (Sedatives or tranquillisers)

** $p < 0.05$ (Anti-depressants)

◆ Due to weighting, housing tenure categories do not always sum to 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.

LA/HA = Local Authority or Housing Association

Table 11: Ireland

Sedatives or Tranquillisers Prevalence by Age Education Ceased (%)					Anti-depressants Prevalence by Age Education Ceased (%)			
	15 years and under	16-19 years	20 years and over	Total	15 years and under	16-19 years	20 years and over	Total
Lifetime*,**								
Total Weighted N (valid responses)	*(516)*	*(1925)*	*(1416)*	*(3857)*	*(516)*	*(1925)*	*(1416)*	*(3857)*
No	83.1	89.7	88.8	88.5	85.1	89.7	92.5	90.1
Yes	16.9	10.3	11.2	11.5	14.9	10.3	7.5	9.9
Last Year*,**								
Total Weighted N (valid responses)	*(516)*	*(1925)*	*(1416)*	*(3857)*	*(516)*	*(1924)*	*(1415)*	*(3855)*
No	91.5	95.1	95.5	94.8	91.7	95.7	96.4	95.4
Yes	8.5	4.9	4.5	5.2	8.3	4.3	3.6	4.6
Last Month*,**								
Total Weighted N (valid responses)	*(516)*	*(1925)*	*(1416)*	*(3857)*	*(516)*	*(1925)*	*(1416)*	*(3857)*
No	93.0	96.7	97.7	96.6	93.2	96.8	97.7	96.7
Yes	7.0	3.3	2.3	3.4	6.8	3.2	2.3	3.3

* p <0.05 (Sedatives or tranquillisers)

** p <0.05 (Anti-depressants)

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

Sedatives or Tranquillisers Prevalence by Highest Education Level Attained (%)					
	Primary	Lower second level	Upper second level	Third level	Total
Lifetime*,**					
Total Weighted N (valid responses)	*(324)*	*(1472)*	*(1196)*	*(1967)*	*(4959)*
No	83.3	90.1	91.5	88.7	89.5
Yes	16.7	9.9	8.5	11.3	10.5
Last Year*,**					
Total Weighted N (valid responses)	*(324)*	*(1473)*	*(1195)*	*(1966)*	*(4958)*
No	92.0	95.4	96.0	95.5	95.4
Yes	8.0	4.6	4.0	4.5	4.6
Last Month*,**					
Total Weighted N (valid responses)	*(324)*	*(1472)*	*(1195)*	*(1967)*	*(4958)*
No	93.8	96.6	97.7	97.5	97.0
Yes	6.2	3.4	2.3	2.5	3.0

Anti-depressants Prevalence by Highest Education Level Attained (%)					
	Primary	Lower second level	Upper second level	Third level	Total
Total Weighted N (valid responses)	*(324)*	*(1472)*	*(1195)*	*(1967)*	*(4958)*
No	86.1	89.9	91.0	92.2	90.8
Yes	13.9	10.1	9.0	7.8	9.2
Total Weighted N (valid responses)	*(324)*	*(1472)*	*(1195)*	*(1966)*	*(4957)*
No	91.7	95.2	95.9	96.6	95.7
Yes	8.3	4.8	4.1	3.4	4.3
Total Weighted N (valid responses)	*(324)*	*(1472)*	*(1196)*	*(1967)*	*(4959)*
No	93.5	96.4	97.2	97.7	96.9
Yes	6.5	3.6	2.8	2.3	3.1

* p <0.05 (Sedatives or tranquillisers)

** p <0.05 (Anti-depressants)

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

Sedatives or Tranquillisers Prevalence by Marital Status (%)							
	Single	**Married**	**Co-habiting**	**Separated**	**Divorced**	**Widowed**	**Total**
Lifetime*							
Total Weighted N (valid responses)	*(1965)*	*(2310)*	*(346)*	*(167)*	*(80)*	*(96)*	*(4965)*◆
No	92.5	88.7	90.5	77.8	73.8	74.0	89.5
Yes	7.5	11.3	9.5	22.2	26.3	26.0	10.5
Last Year*							
Total Weighted N (valid responses)	*(1965)*	*(2310)*	*(346)*	*(166)*	*(80)*	*(96)*	*(4963)*
No	96.1	95.5	96.8	89.2	85.0	90.6	95.3
Yes	3.9	4.5	3.2	10.8	15.0	9.4	4.7
Last Month*							
Total Weighted N (valid responses)	*(1965)*	*(2310)*	*(346)*	*(166)*	*(80)*	*(96)*	*(4963)*
No	97.4	97.0	99.1	95.2	91.3	92.7	97.0
Yes	2.6	3.0	0.9	4.8	8.7	7.3	3.0

* $p < 0.05$ (Sedatives or tranquillisers)

◆ Due to weighting, marital status categories do not always sum to 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 (continued)

Anti-depressants Prevalence by Marital Status (%)							
	Single	**Married**	**Co-habiting**	**Separated**	**Divorced**	**Widowed**	**Total**
Lifetime**							
Total Weighted N (valid responses)	*(1965)*	*(2309)*	*(345)*	*(167)*	*(80)*	*(96)*	*(4962)*
No	92.6	90.8	91.0	80.2	82.5	82.3	90.9
Yes	7.4	9.2	9.0	19.8	17.5	17.7	9.1
Last Year**							
Total Weighted N (valid responses)	*(1965)*	*(2309)*	*(345)*	*(167)*	*(80)*	*(96)*	*(4962)*
No	95.7	96.2	96.8	89.8	88.8	95.8	95.7
Yes	4.3	3.8	3.2	10.2	11.3	4.2	4.3
Last Month**							
Total Weighted N (valid responses)	*(1965)*	*(2309)*	*(346)*	*(167)*	*(80)*	*(96)*	*(4963)*
No	96.6	97.2	98.8	94.0	93.8	95.8	96.9
Yes	3.4	2.8	1.2	6.0	6.3	4.2	3.1

** $p < 0.05$ (Anti-depressants)

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: Northern Ireland

Sedatives or Tranquillisers – Prevalence Rates (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(2002)*	*(993)*	*(1009)*	*(844)*†	*(1150)*†
Lifetime Prevalence	20.2	18.1	22.3	11.7	26.5
Last Year Prevalence (Recent use)	9.2	8.2	10.2	4.6	12.6
Last Month Prevalence (Current use)	7.1	5.7	8.4	2.3	10.7

Anti-depressants - Prevalence Rates (%)	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	21.0	13.4	28.4	13.6	26.6
Last Year Prevalence (Recent use)	9.1	5.8	12.4	5.8	11.7
Last Month Prevalence (Current use)	7.5	4.2	10.7	4.2	10.0

◆ Due to weighting, gender and/or age categories do not always sum to total weighted N.

† Eight respondents confirmed they were eligible to take part 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 15: Northern Ireland

Age of First Use of Sedatives or Tranquillisers (All Users)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(404)*	*(179)*	*(225)*	*(99)*	*(304)*
Mean age of first use	31	31	32	20	35
Median age of first use [1]	30	30	30	18	35

Age of First Use of Anti-depressants (All Users)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(419)*	*(132)*	*(287)*	*(114)*	*(305)*
Mean age of first use	33	35	33	22	38
Median age of first use [1]	32	34	31	21	37

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

All figures are based on weighted data.

All figures are based on valid responses.

Table 16: Northern Ireland

Frequency of Use[2] of Sedatives or Tranquillisers (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(142)*	*(57)*	*(85)*	*(19)*	*(123)*
20 days or more	65.6	50.2	75.8	51.1	67.8
10-19 days	7.2	11.7	4.2	0.0	8.3
4-9 days	12.6	20.4	7.4	34.6	9.2
1-3 days	14.7	17.7	12.7	14.3	14.7

Frequency of Use[2] of Anti-depressants (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(150)*	*(42)*	*(108)*	*(35)*	*(115)*
20 days or more	86.8	70.9	93.0	74.4	90.6
10-19 days	3.4	6.4	2.3	8.0	2.0
4-9 days	4.6	9.6	2.7	12.9	2.1
1-3 days	5.1	13.1	2.0	4.7	5.2

[2] 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.
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: Northern Ireland

Method of Taking Sedatives or Tranquillisers (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(142)*	*(57)*	*(85)*	*(19)*	*(123)*
Oral (Tablets or Syrup)	98.6	100.0	97.6	100.0	98.4
Injection with a Needle	0.0	0.0	0.0	0.0	0.0
Other	1.4	0.0	2.4	0.0	1.6

Method of Taking Anti-depressants (Current Users) (%)	All adults 15-64	Male	Female	Young adults 15-34	Older adults 35-64
Total Weighted N (valid responses)	*(150)*	*(42)*	*(108)*	*(35)*	*(115)*
Oral (Tablets or Syrup)	100.0	100.0	100.0	100.0	100.0
Injection with a Needle	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0

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

Table 18: Northern Ireland

How Sedatives or Tranquillisers were Obtained (Current Users) (%)					
	All adults 15-64	**Male**	**Female**	**Young adults 15-34**	**Older adults 35-64**
Total Weighted N (valid responses)	*(142)*	*(57)*	*(85)*	*(19)*	*(123)*
I got them on prescription	94.8	89.6	98.2	100.0	94.0
I got them from someone I know	2.2	5.5	0.0	0.0	2.5
I bought them without a prescription in a chemist	1.6	1.3	1.8	0.0	1.9
I bought them over the Internet	1.2	2.9	0.0	0.0	1.3
Other	0.3	0.7	0.0	0.0	0.3

How Anti-Depressants were Obtained (Current Users) (%)					
	All adults 15-64	**Male**	**Female**	**Young adults 15-34**	**Older adults 35-64**
(150)	*(42)*	*(108)*	*(35)*	*(115)*	
95.8	90.3	97.9	91.3	97.1	
2.1	7.4	0.0	4.7	1.3	
2.2	2.3	2.1	4.0	1.6	
0.0	0.0	0.0	0.0	0.0	
0.0	0.0	0.0	0.0	0.0	

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 19: Northern Ireland

	Sedatives or Tranquillisers Prevalence by Gender (%)			Anti-depressants Prevalence by Gender (%)		
	Male	**Female**	**Total**	**Male**	**Female**	**Total**
Lifetime*,**						
Total Weighted N (valid responses)	*(993)*	*(1009)*	*(2002)*	*(992)*	*(1009)*	*(2000)*◆
No	81.9	77.7	79.8	86.6	71.6	79.0
Yes	18.1	22.3	20.2	13.4	28.4	21.0
Last Year**						
Total Weighted N (valid responses)	*(993)*	*(1009)*	*(2002)*	*(992)*	*(1009)*	*(2000)*◆
No	91.8	89.8	90.8	94.2	87.6	90.9
Yes	8.2	10.2	9.2	5.8	12.4	9.1
Last Month*,**						
Total Weighted N (valid responses)	*(993)*	*(1009)*	*(2002)*	*(992)*	*(1009)*	*(2000)*◆
No	94.3	91.6	92.9	95.8	89.3	92.5
Yes	5.7	8.4	7.1	4.2	10.7	7.5

* p <0.05 (Sedatives or tranquillisers)

** p <0.05 (Anti-depressants)

◆ Due to weighting, gender categories do not always sum to 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 20: Northern Ireland

	Sedatives or Tranquillisers Prevalence by Age Group (%)			Anti-depressants Prevalence by Age Group (%)		
	Young adults 15-34	Older adults 35-64	Total	Young adults 15-34	Older adults 35-64	Total
Lifetime*,**						
Total Weighted N (valid responses)	*(844)*	*(1150)*	*(1994)*	*(843)*	*(1150)*	*(1992)*◆
No	88.3	73.5	79.8	86.4	73.4	79.0
Yes	11.7	26.5	20.2	13.6	26.6	21.0
Last Year*,**						
Total Weighted N (valid responses)	*(844)*	*(1150)*	*(1994)*	*(843)*	*(1150)*	*(1992)*◆
No	95.4	87.4	90.8	94.2	88.3	90.9
Yes	4.6	12.6	9.2	5.8	11.7	9.1
Last Month*,**						
Total Weighted N (valid responses)	*(844)*	*(1150)*	*(1994)*	*(843)*	*(1150)*	*(1992)*◆
No	97.7	89.3	92.9	95.8	90.0	92.5
Yes	2.3	10.7	7.1	4.2	10.0	7.5

* $p < 0.05$ (Sedatives or tranquillisers)

** $p < 0.05$ (Anti-depressants)

◆ Due to weighting, age categories do not always sum to 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 21: Northern Ireland

Sedatives or Tranquillisers Prevalence by National Statistics Socio-Economic Classification (%)

	Managerial & Professional occupations	Intermediate occupations	Small employers & own account workers	Lower supervisory & technical occupations	Semi-routine & routine occupations	Never worked & long term unemployed	Not classified	Total
Lifetime*								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(107)*	*(172)*	*(1994)*◆
No	79.8	80.7	79.5	83.9	76.3	69.5	94.8	79.8
Yes	20.2	19.3	20.5	16.1	23.7	30.5	5.2	20.2
Last Year*								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(107)*	*(172)*	*(1994)*◆
No	93.2	91.1	93.4	94.4	86.6	82.4	97.6	90.8
Yes	6.8	8.9	6.6	5.6	13.4	17.6	2.4	9.2
Last Month*								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(107)*	*(172)*	*(1994)*◆
No	95.9	92.6	95.1	94.4	89.1	86.3	98.4	92.9
Yes	4.1	7.4	4.9	5.6	10.9	13.7	1.6	7.1

* $p < 0.05$ (Sedatives or tranquillisers)

◆ Due to weighting, NSSEC 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 21: Northern Ireland (continued)

Anti-depressants Prevalence by National Statistics Socio-Economic Classification (%)

	Managerial & Professional occupations	Intermediate occupations	Small employers & own account workers	Lower supervisory & technical occupations	Semi-routine & routine occupations	Never worked & long term unemployed	Not classified	Total
Lifetime**								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(106)*	*(172)*	*(1992)*
No	82.6	78.7	83.4	84.1	71.2	68.7	93.6	79.0
Yes	17.4	21.3	16.6	15.9	28.8	31.3	6.4	21.0
Last Year**								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(106)*	*(172)*	*(1992)*
No	94.7	89.7	96.8	88.9	85.9	81.6	98.5	90.9
Yes	5.3	10.3	3.2	11.1	14.1	18.4	1.5	9.1
Last Month**								
Total Weighted N (valid responses)	*(534)*	*(211)*	*(202)*	*(130)*	*(637)*	*(106)*	*(172)*	*(1992)*
No	95.5	93.0	98.2	89.5	88.1	84.4	98.9	92.5
Yes	4.5	7.0	1.8	10.5	11.9	15.6	1.1	7.5

** $p < 0.05$ (Anti-depressants)

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: Northern Ireland

	Sedatives or Tranquillisers Prevalence by Work Status (%)				Anti-depressants Prevalence by Work Status (%)			
	In paid work	Not in paid work	Other	Total	In paid work	Not in paid work	Other	Total
Lifetime*,**								
Total Weighted N (valid responses)	*(1243)*	*(609)*	*(150)*	*(2002)*	*(1243)*	*(607)*	*(150)*	*(2000)*
No	83.9	67.8	95.0	79.8	84.4	64.2	94.0	79.0
Yes	16.1	32.2	5.0	20.2	15.6	35.8	6.0	21.0
Last Year*,**								
Total Weighted N (valid responses)	*(1243)*	*(609)*	*(150)*	*(2002)*	*(1243)*	*(607)*	*(150)*	*(2000)*
No	95.3	79.7	98.2	90.8	95.0	80.6	98.6	90.9
Yes	4.7	20.3	1.8	9.2	5.0	19.4	1.4	9.1
Last Month*,**								
Total Weighted N (valid responses)	*(1243)*	*(609)*	*(150)*	*(2002)*	*(1243)*	*(607)*	*(150)*	*(2000)*
No	97.1	83.1	98.2	92.9	96.4	82.8	99.1	92.5
Yes	2.9	16.9	1.8	7.1	3.6	17.2	0.9	7.5

* $p < 0.05$ (Sedatives or tranquillisers)

** $p < 0.05$ (Anti-depressants)

All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Table 23: Northern Ireland

Sedatives or Tranquillisers Prevalence by Housing Tenure (%)

	Own 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
Lifetime								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(258)*	*(16)*	*(1998)*◆
No	80.9	83.0	50.1	69.9	56.6	79.2	91.5	79.8
Yes	19.1	17.0	49.9	30.1	43.4	20.8	8.5	20.2
Last Year								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(258)*	*(16)*	*(1998)*◆
No	91.3	94.3	86.8	82.3	73.3	88.3	91.5	90.8
Yes	8.7	5.7	13.2	17.7	26.7	11.7	8.5	9.2
Last Month								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(258)*	*(16)*	*(1998)*◆
No	93.4	95.5	86.8	85.0	75.1	92.6	100.0	92.9
Yes	6.6	4.5	13.2	15.0	24.9	7.4	0.0	7.1

◆ Due to weighting, 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 23: Northern Ireland (continued)

Anti-depressants Prevalence by Housing Tenure (%)

	Own 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
Lifetime								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(256)*	*(16)*	*(1996)*◆
No	82.6	82.6	46.9	64.8	49.0	76.6	91.6	79.0
Yes	17.4	17.4	53.1	35.2	51.0	23.4	8.4	21.0
Last Year								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(256)*	*(16)*	*(1996)*◆
No	92.6	93.8	86.8	81.4	78.1	87.3	95.6	90.9
Yes	7.4	6.2	13.2	18.6	21.9	12.7	4.4	9.1
Last Month								
Total Weighted N (valid responses)	*(527)*	*(908)*	*(5)*	*(244)*	*(38)*	*(256)*	*(16)*	*(1996)*◆
No	93.5	95.1	86.8	84.4	80.1	90.4	95.6	92.5
Yes	6.5	4.9	13.2	15.6	19.9	9.6	4.4	7.5

◆ Due to weighting, housing tenure categories do not sum to 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 24: Northern Ireland

Sedatives or Tranquillisers 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
Lifetime*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(506)*	*(2001)*
No	84.5	78.7	83.3	83.1	70.6	75.2	79.8
Yes	15.5	21.3	16.7	16.9	29.4	24.8	20.2
Last Year*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(506)*	*(2001)*
No	95.6	91.0	94.5	91.4	86.8	85.9	90.8
Yes	4.4	9.0	5.5	8.6	13.2	14.1	9.2
Last Month*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(506)*	*(2001)*
No	98.0	93.7	95.7	94.2	88.5	87.7	92.9
Yes	2.0	6.3	4.3	5.8	11.5	12.3	7.1

Anti-depressants 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
Lifetime*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(504)*	*(2000)*◆
No	86.1	80.8	84.1	77.5	70.9	74.0	79.0
Yes	13.9	19.2	15.9	22.5	29.1	26.0	21.0
Last Year*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(504)*	*(2000)*◆
No	96.0	92.1	94.3	91.2	86.4	85.8	90.9
Yes	4.0	7.9	5.7	8.8	13.6	14.2	9.1
Last Month*,**							
Total Weighted N (valid responses)	*(310)*	*(237)*	*(355)*	*(434)*	*(159)*	*(504)*	*(2000)*◆
No	97.1	93.8	95.1	93.4	88.1	87.8	92.5
Yes	2.9	6.2	4.9	6.6	11.9	12.2	7.5

* $p < 0.05$ (Sedatives or tranquillisers)

** $p < 0.05$ (Anti-depressants)

◆ Due to weighting, qualification categories do not always sum to 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

Sedatives or Tranquillisers Prevalence by Marital Status (%)

	Single	Married	Co-habiting	Separated	Divorced	Widowed	A civil partner in a legally recognised Civil Partnership	Total
Lifetime*								
Total Weighted N (valid responses)	*(731)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(2001)*
No	84.1	81.9	75.5	52.1	63.9	67.8	79.5	79.8
Yes	15.9	18.1	24.5	47.9	36.1	32.2	20.5	20.2
Last Year								
Total Weighted N (valid responses)	*(731)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(2001)*
No	91.3	93.2	93.7	75.2	78.3	83.1	79.5	90.8
Yes	8.7	6.8	6.3	24.8	21.7	16.9	20.5	9.2
Last Month								
Total Weighted N (valid responses)	*(731)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(2001)*
No	94.7	94.3	94.7	81.1	78.8	85.3	79.5	92.9
Yes	5.3	5.7	5.3	18.9	21.2	14.7	20.5	7.1

* $p < 0.05$ (Sedatives or tranquillisers)

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 (continued)

Anti-depressants Prevalence by Marital Status (%)								
	Single	Married	Co-habiting	Separated	Divorced	Widowed	A civil partner in a legally recognised Civil Partnership	Total
Lifetime**								
Total Weighted N (valid responses)	*(729)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(1999)*
No	82.6	80.4	79.3	52.3	61.9	77.9	84.8	79.0
Yes	17.4	19.6	20.7	47.7	38.1	22.1	15.2	21.0
Last Year								
Total Weighted N (valid responses)	*(729)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(1999)*
No	91.7	92.3	94.0	74.8	81.5	89.5	84.8	90.9
Yes	8.3	7.7	6.0	25.2	18.5	10.5	15.2	9.1
Last Month								
Total Weighted N (valid responses)	*(729)*	*(900)*	*(141)*	*(83)*	*(101)*	*(40)*	*(5)*	*(1999)*
No	93.2	93.7	95.3	79.8	84.0	89.5	100.0	92.5
Yes	6.8	6.3	4.7	20.2	16.0	10.5	0.0	7.5

** $p < 0.05$ (Anti-depressants)

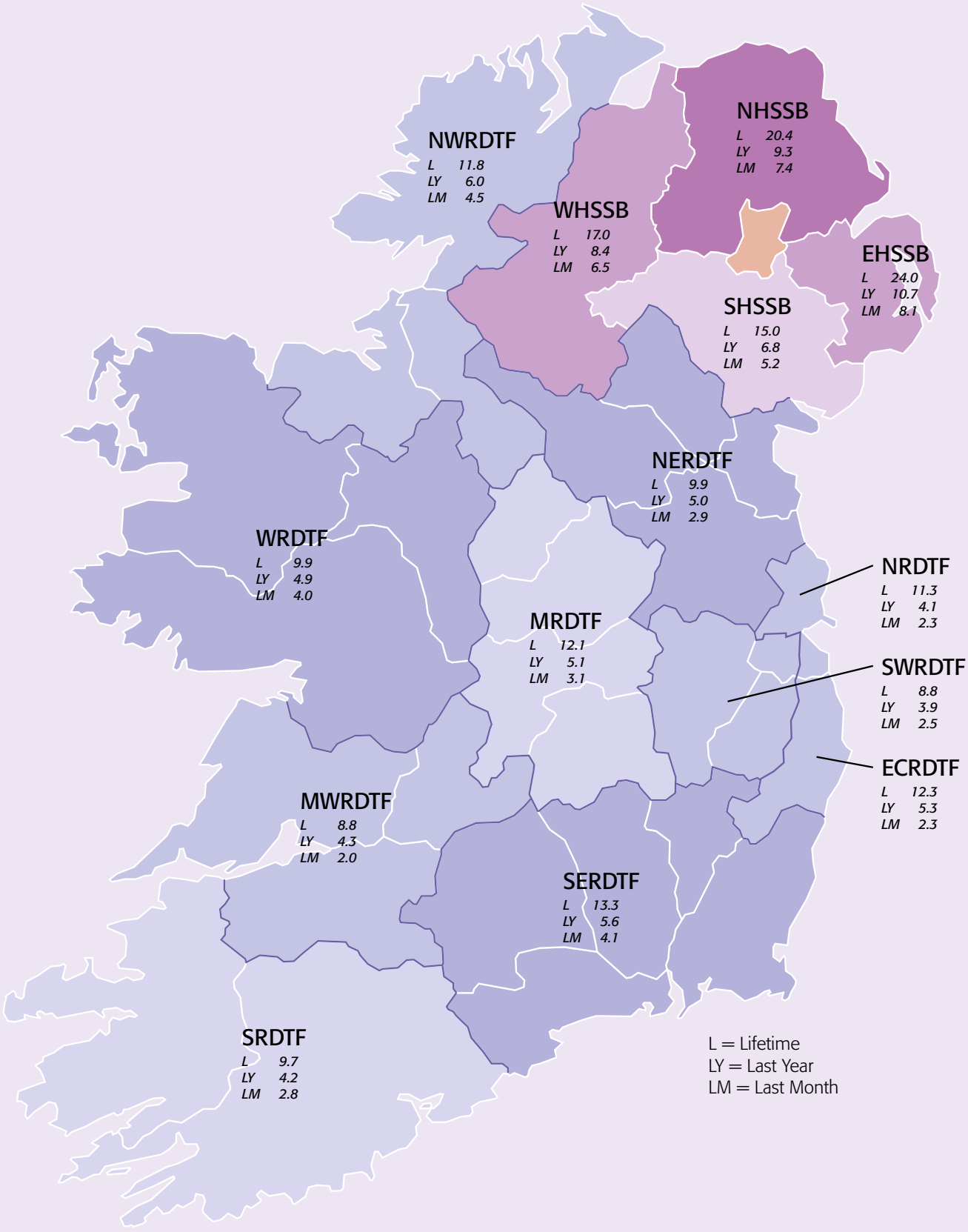
All figures are based on weighted data.

All figures are rounded to the nearest decimal place.

All figures are based on valid responses.

Map 1

Use of Sedatives or Tranquillisers: Prevalence rates for all adults aged 15-64 in RDTF and HSSB areas 2006/2007

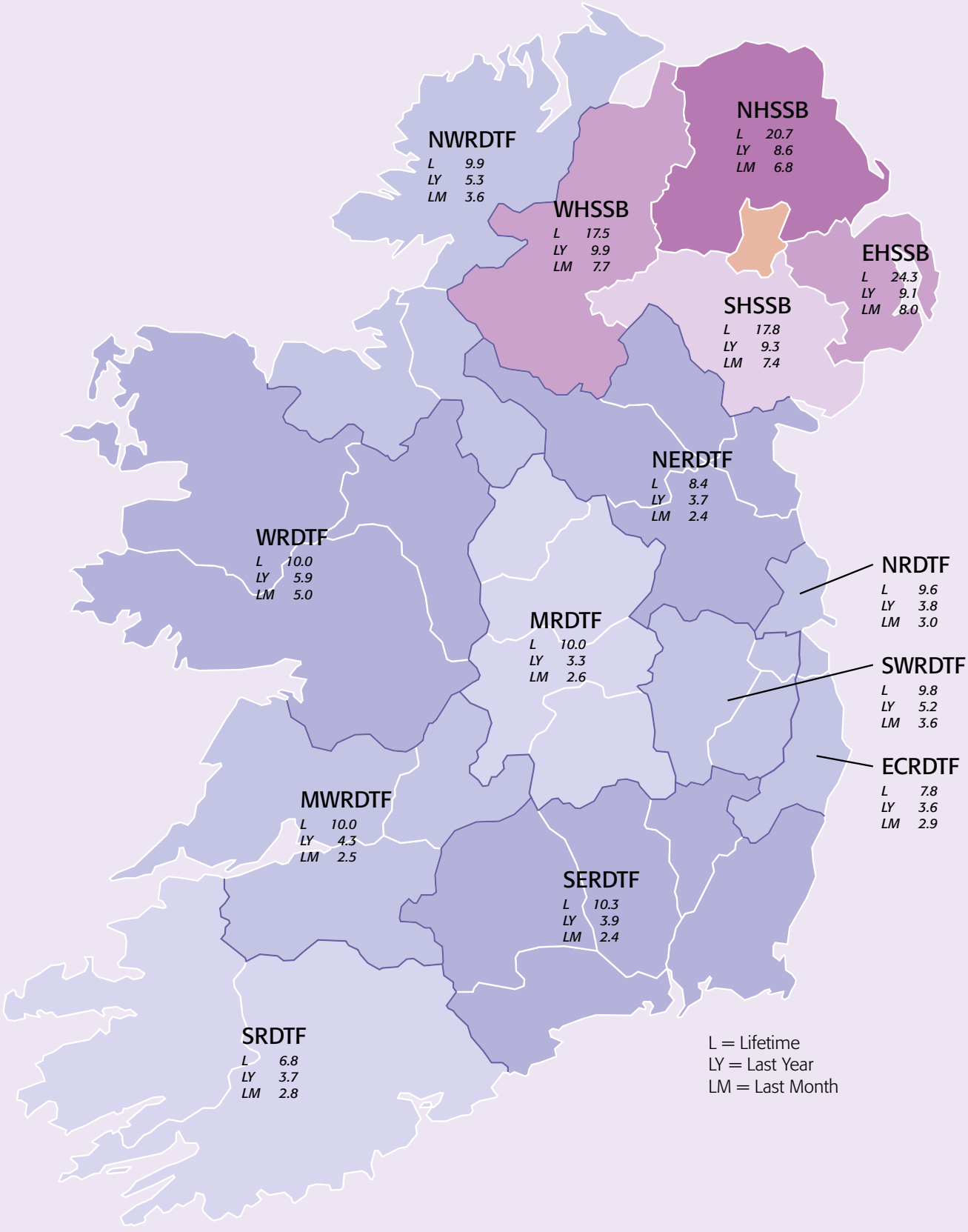


Purple boundary and shading highlights the RDTF areas.

HSSB areas are highlighted in pink shading.

Map 2

Use of Anti-depressants: Prevalence rates for all adults aged 15-64 in RDTF and HSSB areas 2006/2007



Purple boundary and shading highlights the RDTF areas.

HSSB areas are highlighted in pink shading.

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