

# Prevalence of Drug Use and Gambling in Ireland and Drug use in Northern Ireland

## 2014/15 Drug Prevalence Survey: Polydrug and New Psychoactive Substances Results

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## Key Findings

It should be noted that the ordering of the key findings below is according to the order of appearance in the bulletin and is not intended to reflect the order of importance of the findings. It should also be noted that the figures presented for prevalence are for that specific combination only and do not provide information on individual substances unless specified. In this bulletin, polydrug use is defined as using any two or more substances, legal<sup>1</sup>, illegal or prescribed, in the same timeframe (last month), e.g. alcohol, tobacco.

### Part 1 – Polydrug Use (in the last month, age 15+)

- ▶ Twenty three percent of all adults aged 15+ in Ireland had not used any substance (legal or illegal) in the month prior to the survey.
- ▶ Alcohol and tobacco use is the most common combination of polydrug use reported among all adults (10.5%).
- ▶ Among all adults, illegal drug use is most commonly combined with alcohol and tobacco use (2.0% of the population). Males are more likely to report use of illegal drugs combined with alcohol and tobacco (3.2% of males vs. 0.8% of females). This combination is more common than illegal drug use alone, or any other combination including illegal drug use.
- ▶ Females (26.0%) are more likely than males (20.3%) not to have used any substance (legal or illegal) during the last month.
- ▶ The proportion of females using other legal drugs<sup>2</sup> in the previous month is more than double that reported by males (5.4% vs. 2.6%).
- ▶ Those aged over 65 are more likely to report no drug use, either legal or illegal (35.8%), than young adults aged 15-34 (22.0%) or older adults aged 35-64 (20.1%).
- ▶ Those aged over 65 years report higher prevalence of use of other legal drugs (4.3%) than older adults (4.1%) or younger adults (3.8%).
- ▶ Older adults (aged 35-64) are more likely than younger adults (aged 15-34) to report the use of alcohol and anti-depressants (1.4% vs. 0.2%).
- ▶ Among people who use alcohol, males are more likely than females to have smoked tobacco (33.5% vs. 26.2%) in the last month, or to have used cannabis (8.3% vs. 3.1%).
- ▶ Since 2010/11 the proportion of people who use tobacco and who also use alcohol has decreased significantly for males and females (from 83.1% to 76.7% in males and from 72.5% to 64.9% in females). The proportion of people who use tobacco and who also use cannabis has increased significantly (from 11.2% to 17.6% in males and 3.1% to 7.7% in females), and among young adults, this proportion has increased by 9.1 percentage points to 20.1%.
- ▶ The proportion of respondents who use sedatives or tranquillisers and also use anti-depressants has increased since the 2010/11 survey (+6.8 percentage points). Similarly, the proportion of those using anti-depressants who also use sedatives or tranquillisers has increased by 4.6 percentage points.

### Part 2 – New Psychoactive Substances

- ▶ Last year prevalence of use of new psychoactive substances has decreased significantly since the 2010/11 survey to 0.8% (from 3.5%).

<sup>1</sup> "Legal drugs" refers to alcohol, tobacco, sedatives or tranquillisers, anti-depressants and 'other legal drugs'.

<sup>2</sup> Due to small numbers methadone, other opiates<sup>3</sup> and anabolic steroids are grouped as 'other legal drugs'.

<sup>3</sup> Codeine, DF 118 30 tablets, Feminax, Kapake, Migrave, Nurofen Plus, Panadeine tablets, Paracodin, Paramol, Solpadeine, Solpadol, Syndol, Tylex, Unifu Plus with Vitamin C, Veganin Plus, Tramadol, Opiates (excluding heroin & methadone), Temgesic®, Kapake®, Morphine, Opium, DF118 ® (DF's), Diffs, Dikes, Peach, Fentanyl (Durogesic ® & Sublimaze ® & Actiq ®), Oxycodone (Oxycontin ® & Oxynorm ®), MST ® (MST's), Buprenorphine (Subutex ®), Diconal ®, Pethidine, Napps.

- ▶ Among young adults 6.0% report ever taking new psychoactive substances in their lifetime, but just 0.1% report use in the month prior to the survey.
- ▶ Last year use of new psychoactive substances is highest in those who are unemployed (2.2%).
- ▶ Those renting from a private landlord are most likely to have ever taken new psychoactive substances in their lifetime (6.6%) or in the last year (1.8%). Respondents who own their dwelling either in part or full, are least likely to have ever taken new psychoactive substances in their lifetime (1.5%), or to have taken them in the last year (0.3%).
- ▶ Analysis of prevalence of new psychoactive substances by education level attained shows that those with more education are most likely to take new psychoactive substances in their lifetime with 3.3% of those with a third level education ever taking new psychoactive substances in their lifetime compared to 1.2% of those with no formal education/primary education.
- ▶ Last year use is highest for single/never married individuals and those who are co-habiting (both 1.4%) and lowest in those who are widowed (0%).

## Introduction

This bulletin presents findings regarding polydrug use and use of new psychoactive substances in Ireland from the fourth drug prevalence survey of households in Ireland and Northern Ireland. Within Ireland the survey sampled a representative number of people aged 15+ from August 2014 to August 2015. Part 1 of the bulletin presents prevalence rates and other relevant information regarding current polydrug use; that is, the use of more than one substance within the last month. Part 2 of this bulletin presents results regarding use of new psychoactive substances on lifetime (ever used), last year prevalence (recent use) and last month (current use) prevalence rates for Ireland. The survey was carried out according to standards set by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).

The Drug Prevalence Survey 2014/15 for the Republic of Ireland introduced a number of key changes to the questionnaire and sample population targeted, most notably:

- ▶ The sample population was extended from 15-64 years to include all those aged 15+ years.
- ▶ A new section focusing on gambling prevalence was included.

These changes, therefore, require some modification of the bulletin layout to ensure that the valuable insights garnered from the trend data of 15-64 year olds is continued, but also to ensure that the 2014/15 data of all those aged 15+ is adequately addressed.

The survey was commissioned by the National Advisory Committee on Drugs and Alcohol (NACDA) in Ireland and the Public Health Information & Research Branch (PHIRB) within the Department of Health, 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 general population survey were based on best practice guidelines drawn up by the EMCDDA. The questionnaires were administered through face-to-face interviews with respondents aged 15+ years in Ireland who are normally resident in households. Thus persons outside these age ranges, or who do not normally live in private households, have not been included in the survey (for example prisons, nursing homes etc.).

Fieldwork for the survey was carried out between August 2014 and August 2015 and the final achieved sample comprised of 7,005 respondents in the Republic of Ireland. The response rate for the survey was 61%.

Area-based sampling was applied. A three-stage process was used to construct the sample for this survey. The first stage involved stratifying by former Health Board regions in Ireland and sampling within each Health Board was primarily in proportion to the population. The achieved sample was weighted by gender, age and former Health Board region to maximise its representativeness of the general population. Details of the methodology can be found in the technical report.

Interviews were conducted using computer-assisted personal interviewing (CAPI). These techniques allow interviews to be conducted more efficiently and more accurately than other techniques, such as pen-and-paper completion.

### Reliability of the Estimates

The tests of statistical significance are used to establish the degree of confidence with which we can infer that the observed changes in drug prevalence between 2014/15 and 2010/11 are not due to sampling error. For the change in prevalence over time, a significance level of 5% has been specified which means that the likelihood that sampling error accounts for the observed change is less than 5%. More stringent criteria are used for the tests of association; for instance between prevalence and socio-economic group, significance levels of 1% and 0.1% are used.

In statistical testing, a result is deemed statistically significant if it is unlikely to have occurred by chance, and hence provides enough evidence to reject the hypothesis of 'no effect'. As used in statistics, *significant* does not mean *important* or *meaningful*. A small, but important, real-world difference may fail to reach significance in a statistical test. Conversely, a statistically significant finding may have no practical consequence. This is especially important to remember when working with large sample sizes because any difference can be statistically significant if the samples are extremely large. Whether the change is of practical importance is reflected in an evaluation of effect size, which is a substantive issue.

### Limitations of the General Population Survey Methodology

A general population drug prevalence survey has some limitations. Some groups with high drug use prevalence are not covered by the general population survey method (for example the homeless, those in prison etc.). Additionally, drug prevalence questions are considered to be sensitive and therefore people may refuse to participate or they may under-report their drug use. Moreover, for some groups the numbers can be too small for reliable prevalence estimations and for these specific groups, general population prevalence estimates can be supplemented by other methods (e.g. capture-recapture for problem drug use and surveys targeting special populations (e.g. prisoners, students, early school leavers).)

### What is prevalence?

The term prevalence refers to the proportion of a population who have 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 month). Provided that 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 future.

Last year prevalence refers to the proportion of the sample that reported using a named drug in the year prior to the survey. 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 only use occasionally (or for the first-time) and 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.

## Understanding the Results of this Bulletin

Part 1 of this bulletin contains prevalence rates and other relevant information regarding current polydrug use; that is, the use of any two or more substances, legal, illegal or prescribed, in the same timeframe (last month), e.g. alcohol, tobacco. Results are given for all respondents (all adults aged 15+ years) and for gender and age (15-34, 35-64 and 65+ years) categories.

Due to changes in the combinations of polydrug use since the last survey, comparisons between 2014/15 and earlier survey results are not presented for prevalence of use. Comparisons between 2014/15 and earlier survey results are presented for use of one substance by use of another substance.

Part two of this bulletin presents prevalence rates of the use of new psychoactive substances, on a lifetime (ever used), last year prevalence (recent use) and last month (current use) basis.

All prevalence rates presented in the accompanying tables are rounded to one decimal place. 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. Percentages may not always sum to 100 due to either the effect of rounding or that respondents could give more than one answer.

Those over 65 were included in the Republic of Ireland survey for the first time in 2014/15, therefore the current results report prevalence levels of all those aged 15+ years, while the comparative results are provided for those aged 15-64 years.

For the purpose of this study:

- ▶ 'Legal drugs' refers to alcohol, tobacco, sedatives or tranquillisers, anti-depressants and 'other legal drugs'. Due to small numbers methadone, other opiates<sup>4</sup> and anabolic steroids are grouped as 'other legal drugs'.
- ▶ 'Any illegal drugs' refers to cannabis, cocaine (including crack), ecstasy, cocaine powder, magic mushrooms, amphetamines, poppers, LSD, new psychoactive substances, solvents, crack, and heroin. Please note the addition of new psychoactive substances into this category for 2014/15 following the Criminal Justice (Psychoactive Substances) Act 2010 in the Republic of Ireland.
- ▶ 'No legal or illegal drugs' refers to the use of none of the above specified (legal or illegal) drugs in the last month.

## Polydrug Use in Ireland

There are a number of forms of polydrug use. The definition reported in this bulletin is: the use of any two or more substances, legal, illegal or prescribed, in the same timeframe (last month).

Polydrug use is associated with a number of negative consequences including mental and physical ill-health, violence, aggression and a range of social problems. Polydrug use is more likely to result in accidents and death (including death from overdose) than when a single substance is consumed.

There is evidence that polydrug use is common among people seeking drug treatment. The majority of cases treated in 2010 in Ireland reported problem drug use of more than one substance (65%) (HRB 2011)<sup>5</sup>. Polydrug use is more complex to treat, requiring services that can treat both alcohol and other drug dependence while providing a broad range of interventions, and is associated with poorer treatment outcomes. Earlier research shows that the pattern of use

<sup>4</sup> Codeine, DF 118 30 tablets, Feminax, Kapake, Migraleve, Nurofen Plus, Panadeine tablets, Paracodin, Paramol, Solpadeine, Solpadol, Syndol, Tylex, Unifu Plus with Vitamin C, Veganin Plus, Tramadol, Opiates (excluding heroin & methadone), Temgesic®, Kapake®, Morphine, Opium, DF118 ® (DF's), Diffs, Dikes, Peach, Fentanyl (Durogesic ® & Sublimaze ® & Actiq ®), Oxycodone (Oxycontin ® & Oxynorm ®), MST ® (MST's), Buprenorphine (Subutex ®), Diconal ®, Pethidine, Napps.

<sup>5</sup> Alcohol and Drug Research Unit of the Health Research Board (2011) Trends in treated problem drug use in Ireland, 2005 to 2010. Available at <http://www.hrb.ie/publications>.



of 'additional' substances was linked to the main problem substance, the most common additional problem substances were cannabis followed by cocaine and benzodiazepines.

In considering the results presented here, note that the figures for prevalence are for that specific combination of drugs ONLY. Thus, the figures for alcohol only refers to that group of people who consumed alcohol only, i.e. that group did not use any other substance during that specified interval. A higher percentage than this will actually have consumed alcohol, but will also have used another substance (for example, smoke tobacco). The important point is that the tables presented in this bulletin are not aimed at presenting information on the prevalence of individual substances, but rather at the prevalence of the combination of drugs.

## **Definition of New Psychoactive Substances**

According to the Council of the European Union (Article 3 of Council Decision 2005/387/JHA of 10 May 2005 on the information exchange, risk assessment and control of new psychoactive substances), the term 'new psychoactive substance' refers to a new narcotic drug or a new psychotropic drug in pure form or in a preparation. Many of these substances mimic the most common illegal drugs cocaine, ecstasy, amphetamine and cannabis. The emergence of new psychoactive substances in Ireland was facilitated by the increase in the number of head shops and online retailers selling the substances and drug paraphernalia. The surge in availability of new psychoactive substances led to new legislation for drug control. The introduction of the Criminal Justice (Psychoactive Substances) Act 2010 made illegal, the sale, import, export or advertisement of unregulated psychoactive substances for human consumption. The Act also gave appropriate powers to An Garda Síochána and the Courts to intervene quickly to prevent trade in a non-criminal procedure; via the use of prohibition and closure orders.

## Results – Ireland

### Part 1: Polydrug Use – Last Month

**Table 1: Top 30 of last month prevalence of no drug, monodrug and polydrug use – All adults (15+) (%)**

Substance	Frequency n=7005	Percent
Alcohol	2289	32.7
No drug	1626	23.2
Alcohol and Tobacco	737	10.5
Alcohol and Other legal drugs	565	8.1
Tobacco	388	5.5
Other legal drugs	284	4.1
Alcohol, Tobacco and Other legal drugs	252	3.6
Alcohol, Tobacco and any illegal drugs	140	2.0
Tobacco and Other legal drugs	78	1.1
Alcohol and Anti-depressants	60	0.8
Sedatives or Tranquillisers	55	0.8
Anti-depressants	42	0.6
Alcohol and Sedatives	38	0.5
Alcohol, Tobacco, Other legal drugs and any illegal drugs	35	0.5
Alcohol, Tobacco and Anti-depressants	35	0.5
Alcohol and any illegal drugs	35	0.5
Alcohol, Other legal drugs and Sedatives or Tranquillisers	33	0.5
Tobacco and any illegal drugs	25	0.4
Alcohol, Tobacco and Sedatives	21	0.3
Alcohol, Tobacco, Other legal drugs and Anti-depressants	19	0.3
Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	19	0.3
Anti-depressants and Sedatives or Tranquillisers	19	0.3
Tobacco and Anti-depressants	18	0.3
Other legal drugs and Sedatives or Tranquillisers	18	0.3
Other legal drugs and Anti-depressants	17	0.2
Tobacco and Sedatives or Tranquillisers	15	0.2
Alcohol, Tobacco, Anti-depressants and Sedatives or Tranquillisers	13	0.2
Alcohol, Anti-depressants and Sedatives or Tranquillisers	13	0.2
Tobacco, Other legal drugs and Anti-depressants	13	0.2
Tobacco, Anti-depressants and Sedatives or Tranquillisers	12	0.2

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

#### All adults – Table 1

Among adults aged 15+ years, 23.2% had not used any substance (either legal or illegal) in the last month.

The most commonly used substance is alcohol, with 32.7% reporting alcohol consumption in the month before the survey. The most common combination of substances in the population is alcohol and tobacco (10.5% report use of both in the last month), and the proportion of those reporting use of alcohol and other legal drugs is 8.1%.

The combination of alcohol, tobacco and any illegal drugs is 2.0%, higher than the proportion reporting use of tobacco and other legal drugs (1.1%), or alcohol and anti-depressants (0.8%).

All other combinations of polydrug use are reported by 0.5% of the population or lower.

Again it should be noted that prevalence rates are for the specific **combination** of substances ONLY and do not indicate the level of consumption of any individual substance on its own.

**Table 2: Top 30 of last month prevalence of no drug, monodrug and polydrug use – Males (15+) (%)**

Substance	Frequency n=3439	Percent
Alcohol	1266	36.8
No drug	698	20.3
Alcohol and Tobacco	454	13.2
Alcohol and Other legal drugs	237	6.9
Tobacco	185	5.4
Alcohol, Tobacco and Other legal drugs	112	3.3
Alcohol, Tobacco and any illegal drugs	110	3.2
Other legal drugs	90	2.6
Alcohol and any illegal drugs	31	0.9
Tobacco and any illegal drugs	20	0.6
Alcohol, Tobacco, Other legal drugs and any illegal drugs	18	0.5
Tobacco and Other legal drugs	18	0.5
Alcohol and Anti-depressants	17	0.5
Alcohol, Tobacco and Anti-depressants	16	0.5
Alcohol and Sedatives or Tranquillisers	15	0.4
Anti-depressants	14	0.4
Sedatives or Tranquillisers	12	0.4
Alcohol, Tobacco, Other legal drugs and Anti-depressants	11	0.3
Alcohol, Other legal drugs and Sedatives or Tranquillisers	11	0.3
Tobacco and Anti-depressants	8	0.2
Alcohol, Other legal drugs and any illegal drugs	7	0.2
Anti-depressants and Sedatives or Tranquillisers	7	0.2
Alcohol, Tobacco, Anti-depressants and Sedatives or Tranquillisers	6	0.2
Alcohol, Tobacco, Other legal drugs, any illegal drugs and Anti-depressants	6	0.2
Tobacco, Anti-depressants and Sedatives or Tranquillisers	5	0.2
Tobacco and Sedatives or Tranquillisers	5	0.1
Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	5	0.1
Alcohol, Tobacco and Sedatives or Tranquillisers	5	0.1
Alcohol, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	4	0.1
Alcohol, Anti-depressants and Sedatives or Tranquillisers	4	0.1

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

**Table 3: Top 30 of last month prevalence of no drug, monodrug and polydrug use – Females (15+) (%)**

Substance	Frequency n=3566	Percent
Alcohol	1022	28.7
No Drug	928	26.0
Alcohol and Other legal drugs	328	9.2
Alcohol and Tobacco	283	7.9
Tobacco	202	5.7
Other legal drugs	194	5.4
Alcohol, Tobacco and Other legal drugs	139	3.9
Tobacco and Other legal drugs	60	1.7
Alcohol and Anti-depressants	43	1.2
Sedatives or Tranquillisers	43	1.2
Alcohol, Tobacco and any illegal drugs	30	0.8
Anti-depressants	28	0.8
Alcohol and Sedatives or Tranquillisers	23	0.6
Alcohol, Other legal drugs and Sedatives or Tranquillisers	22	0.6
Alcohol, Tobacco and Anti-depressants	19	0.5
Alcohol, Tobacco, Other legal drugs and any illegal drugs	17	0.5
Other legal drugs and Anti-depressants	16	0.5
Alcohol, Tobacco and Sedatives or Tranquillisers	16	0.4
Other legal drugs and Sedatives or Tranquillisers	14	0.4
Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	14	0.4
Anti-depressants and Sedatives or Tranquillisers	12	0.3
Tobacco and Anti-depressants	11	0.3
Tobacco, Other legal drugs and Anti-depressants	11	0.3
Tobacco and Sedatives or Tranquillisers	10	0.3
Tobacco, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	9	0.3
Alcohol, Anti-depressants and Sedatives or Tranquillisers	9	0.2
Alcohol, Tobacco, Other legal drugs and Anti-depressants	8	0.2
Alcohol, Other legal drugs and Anti-depressants	7	0.2
Alcohol, Tobacco, Anti-depressants and Sedatives or Tranquillisers	7	0.2
Alcohol, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	7	0.2

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

### Gender – Tables 2 & 3

A higher percentage of females (26.0%) than males (20.3%) had not used any substance (legal or illegal) during the last month. A larger proportion of males consume alcohol (36.8%) compared to females (28.7%) and the same is true for the combination of alcohol and tobacco in the last month (13.2% of males vs. 7.9% of females). Females are more likely to report use of the combination of alcohol and other legal drugs compared to males (9.2% vs. 6.9%).

Males and females report similar proportions of tobacco only use in the previous month (5.4% males and 5.7% females). The proportion of females using other legal drugs in the previous month is more than double that reported by males (5.4% vs. 2.6%).

Males are more likely to report use of illegal drugs combined with alcohol and tobacco (3.2% of males vs. 0.8% of females).

**Table 4: Top 30 of last month prevalence of no drug, monodrug and polydrug use – Young Adults (15-34) (%)**

Substance	Frequency n=2592	Percent
Alcohol	743	28.7
No Drug	571	22.0
Alcohol and Tobacco	327	12.6
Alcohol and Other legal drugs	221	8.5
Alcohol, Tobacco and Other legal drugs	147	5.7
Tobacco	142	5.5
Alcohol, Tobacco and any illegal drugs	112	4.3
Other legal drugs	100	3.8
Tobacco and Other legal drugs	35	1.4
Alcohol and any illegal drugs	31	1.2
Alcohol, Tobacco, Other legal drugs and any illegal drugs	30	1.2
Tobacco and any illegal drugs	22	0.8
Anti-depressants	12	0.5
Alcohol, Tobacco, Other legal drugs and Anti-depressants	10	0.4
Alcohol, Other legal drugs and any illegal drugs	9	0.3
Alcohol, Tobacco and Anti-depressants	9	0.3
Tobacco, Anti-depressants and Sedatives or Tranquillisers	6	0.2
Other legal drugs and Anti-depressants	6	0.2
Tobacco, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	5	0.2
Alcohol, Tobacco, Other legal drugs, any illegal drugs and Anti-depressants	5	0.2
Alcohol and Anti-depressants	4	0.2
Tobacco, Other legal drugs and Anti-depressants	4	0.1
Alcohol, Other legal drugs and Anti-depressants	4	0.1
Alcohol, Tobacco and Sedatives or Tranquillisers	3	0.1
Alcohol, Other legal drugs and Sedatives or Tranquillisers	3	0.1
Alcohol and Sedatives or Tranquillisers	3	0.1
Alcohol, Tobacco, Other legal drugs, any illegal drugs, Anti-depressants and Sedatives or Tranquillisers	3	0.1
Sedatives or Tranquillisers	2	0.1
Any illegal drugs	2	0.1
Alcohol, Tobacco, Other legal drugs, any illegal drugs and Sedatives or Tranquillisers	2	0.1

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

**Table 5: Top 30 of last month prevalence of no drug, monodrug and polydrug use – Older Adults (35-64) (%)**

Substance	Frequency n=3345	Percent
Alcohol	1217	36.4
No drug	672	20.1
Alcohol and Tobacco	365	10.9
Alcohol and Other legal drugs	290	8.7
Tobacco	195	5.8
Other legal drugs	138	4.1
Alcohol, Tobacco and Other legal drugs	97	2.9
Alcohol and Anti-depressants	46	1.4
Tobacco and Other legal drugs	34	1.0
Alcohol, Tobacco and any illegal drugs	29	0.9
Alcohol, Tobacco and Anti-depressants	21	0.6
Alcohol, Other legal drugs and Sedatives or Tranquillisers	20	0.6
Sedatives or Tranquillisers	18	0.5
Anti-depressants	18	0.5
Tobacco and Anti-depressants	15	0.5
Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	15	0.4
Alcohol and Sedatives or Tranquillisers	13	0.4
Alcohol, Tobacco and Sedatives or Tranquillisers	12	0.3
Alcohol, Tobacco, Anti-depressants and Sedatives or Tranquillisers	10	0.3
Anti-depressants and Sedatives or Tranquillisers	10	0.3
Other legal drugs and Anti-depressants	10	0.3
Alcohol, Tobacco, Other legal drugs and Anti-depressants	9	0.3
Tobacco, Other legal drugs and Anti-depressants	9	0.3
Alcohol, Anti-depressants and Sedatives or Tranquillisers	9	0.3
Alcohol, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	8	0.2
Alcohol, Other legal drugs and Anti-depressants	7	0.2
Tobacco and Sedatives or Tranquillisers	7	0.2
Alcohol, Tobacco, Other legal drugs and Sedatives or Tranquillisers	6	0.2
Tobacco, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	6	0.2
Other legal drugs and Sedatives or Tranquillisers	6	0.2

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

**Table 6: Prevalence of no drug, monodrug and polydrug use – Over 65s (%)**

Substance	Frequency n=1039	Percent
No drug	372	35.8
Alcohol	320	30.7
Alcohol and Other legal drugs	52	5.0
Tobacco	49	4.7
Alcohol and Tobacco	45	4.3
Other legal drugs	45	4.3
Sedatives or Tranquillisers	34	3.3
Alcohol and Sedatives or Tranquillisers	20	1.9
Anti-depressants	12	1.2
Other legal drugs and Sedatives or Tranquillisers	12	1.1
Alcohol, Other legal drugs and Sedatives or Tranquillisers	10	0.9
Tobacco and Other legal drugs	9	0.8
Alcohol and Anti-depressants	8	0.8
Anti-depressants and Sedatives or Tranquillisers	8	0.8
Tobacco and Sedatives or Tranquillisers	8	0.8
Alcohol, Tobacco and Other legal drugs	7	0.7
Alcohol, Tobacco and Sedatives or Tranquillisers	6	0.6
Alcohol, Tobacco and Anti-depressants	5	0.5
Alcohol, Anti-depressants and Sedatives or Tranquillisers	4	0.4
Tobacco, Anti-depressants and Sedatives or Tranquillisers	3	0.3
Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	2	0.2
Alcohol, Tobacco, Anti-depressants and Sedatives or Tranquillisers	2	0.2
Alcohol, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	2	0.2
Other legal drugs and Anti-depressants	2	0.1
Alcohol, Tobacco, Other legal drugs and Sedatives or Tranquillisers	2	0.1
Tobacco, Other legal drugs and Sedatives or Tranquillisers	1	0.1
Tobacco and Anti-depressants	1	0.1
Alcohol, Other legal drugs and Anti-depressants	1	0.1
Tobacco, Other legal drugs, Anti-depressants and Sedatives or Tranquillisers	0.3	0.02

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

### Age – Tables 4, 5 & 6

Similar percentages of young adults (15-34 years) and older adults (35-64 years) report no drug use during the month prior to the survey (22.0% and 20.1% respectively), while a larger proportion of over 65s report no drug use for the last month (35.8%).

Prevalence of alcohol and tobacco use in young adults is 12.6%, higher than that reported by older adults (10.9%) and over 65s (4.3%). Polydrug use of alcohol and other legal drugs is similar for younger and older adults (8.5% and 8.7% respectively), and lower in over 65s (5.0%).

In younger adults illegal drugs are most commonly used in combination with alcohol and tobacco (4.3%), while 0.9% of older adults report this combination of polydrug use in the month before the survey. Older adults are more likely than younger adults to report the use of alcohol and anti-depressants (1.4% vs. 0.2%).

Those aged over 65 years report higher prevalence of use of other legal drugs (4.3%) than older adults (4.1%) or younger adults (3.8%).



**Table 7: Total proportion of people using one substance by proportion using another substance – Adults (15-64) (%)**

	Last month prevalence			Use of Alcohol			Use of Tobacco			Use of Cannabis		
	06/07	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	4967	5126	5937	3653	3621	3856	1619	1451	1629	128	143	259
Alcohol	73.4	70.6	65.0				81.2	78.3 <sup>†</sup>	71.5*	90.6	84.5	87.4
Tobacco	32.6	28.3	27.4	36.1	31.4 <sup>†</sup>	30.2				88.3	76.7 <sup>†</sup>	82.9
Cannabis	2.6	2.8	4.4	3.2	3.3	5.9*	7.0	7.6	13.2*			
ATS <sup>1</sup>	0.4	0.1	1.0	0.5	0.1 <sup>†</sup>	1.5*	1.0	0.3 <sup>†</sup>	3.4*	11.7	2.2 <sup>†</sup>	20.2*
Cocaine	0.5	0.5	0.5	0.7	0.7	0.8	1.2	1.4	1.5	11.7	7.4	8.9
ST <sup>2</sup>	3.0	2.8	3.3	2.6	2.6	2.7	4.1	4.5	4.6	5.5	9.0	4.6
AD <sup>3</sup>	3.1	4.1	4.8	2.6	3.7 <sup>†</sup>	4.2	4.8	6.3	7.7	7.0	8.9	7.2

  

	Use of ATS <sup>1</sup>			Use of Cocaine			Use of ST <sup>2</sup>			Use of AD <sup>3</sup>		
	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	19	5	60	25	26	30	147	142	193	154	209	285
Alcohol	100.0	100.0	97.1	100.0	100.0	100.0	65.3	65.2	54.8	62.1	63.5	56.3
Tobacco	84.2	88.3	90.9	80.0	77.2	83.6	45.6	46.1	38.6	50.0	43.5	44.1
Cannabis	78.9	62.4	87.4	60.0	40.9	76.6*	4.7	9.0	6.1	5.8	6.1	6.5
ATS <sup>1</sup>				25.0	14.1	50.1*	0.7	0.4	1.3	0.6	1.2	2.6
Cocaine	33.3	74.1	25.1*				0.7	2.1	1.0	0.0	1.5	1.9
ST <sup>2</sup>	5.3	11.7	4.0	4.0	11.4	6.7				38.3	26.2 <sup>†</sup>	30.8
AD <sup>3</sup>	5.3	52.9 <sup>†</sup>	12.1*	0.0	12.4	17.6	40.1	38.5	45.3			

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

<sup>†</sup> Denotes a statistically significant change ( $p < 0.05$ ) between 2006/07 and 2010/11

\* Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

<sup>1</sup> ATS – Amphetamine-type stimulants (Ecstasy and Amphetamines)

<sup>2</sup> ST – Sedatives or Tranquillisers

<sup>3</sup> AD – Anti-depressants

### Relationship between use of particular substances and use of other substances – All adults (Table 7)

Patterns of association between pairs of substances are presented in Table 7 for all adults aged 15-64. Reading the table by column, of the respondents in the 2014/15 survey who used alcohol in the previous month, 30.2% also used tobacco, while 5.9% used cannabis. A large proportion of people who use tobacco reported use of alcohol (71.5%), cannabis (13.2%) and anti-depressants (7.7%).

Those using cannabis in the month prior to the survey are also likely to report alcohol use (87.4%) and/or tobacco use (82.9%), while 20.2% of people who use cannabis also report use of amphetamine-type stimulants.

The majority of people who use amphetamine-type stimulants such as ecstasy or amphetamines also use alcohol (97.1%), tobacco (90.9%) and cannabis (87.4%), while 25.1% used cocaine in the last month.

All respondents who used cocaine in the previous month prior to the survey also used alcohol, 83.6% used tobacco, 76.6% used cannabis and half of people who use cocaine (50.1%) also used amphetamine-type stimulants.

Since the 2010/11 survey there has been a significant increase in the proportion of people who drink alcohol, people who use tobacco and people who use cannabis who use amphetamine-type stimulants (+1.4, +3.1 and +18.0 percentage points respectively). The proportion of those who used alcohol, tobacco or cocaine in the last month who also report cannabis use has increased significantly since 2010/11 (+2.6, +5.6 and +35.7 percentage points respectively).

The proportion of respondents who use sedatives or tranquillisers and also use anti-depressants has increased since the 2010/11 survey (+6.8 percentage points). Similarly, the proportion of those using anti-depressants who also use sedatives or tranquillisers has increased by 4.6 percentage points.

**Table 8: Total proportion of people using one substance by proportion using another substance – Males (15-64) (%)**

	Last month prevalence			Use of Alcohol			Use of Tobacco			Use of Cannabis		
	06/07	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	2513	2554	2957	1966	1946	2078	844	800	909	99	119	196
Alcohol	78.2	76.3	70.3				87.6	83.1 <sup>†</sup>	76.7 <sup>*b</sup>	92.0	84.4	87.5
Tobacco	33.6	31.3	30.7	37.6	34.2 <sup>†</sup>	33.5 <sup>b</sup>				89.9	75.1 <sup>†</sup>	81.3
Cannabis	4.0	4.7	6.6	4.7	5.2 <sup>a</sup>	8.3 <sup>*b</sup>	10.5	11.2 <sup>a</sup>	17.6 <sup>*b</sup>			
ATS <sup>1</sup>	0.5	0.2	1.2	0.7	0.2 <sup>†</sup>	1.6 <sup>*</sup>	1.4	0.5	3.4 <sup>*</sup>	11.1	2.2 <sup>†</sup>	14.7 <sup>*</sup>
Cocaine	0.7	0.8	0.9	1.0	1.0	1.2	1.9	1.8	2.3	12.0	8.0	10.0
ST <sup>2</sup>	2.4	2.3	2.4	2.0	2.1	2.1	3.4	3.5	3.7	4.0	7.4	4.6
AD <sup>3</sup>	2.3	3.2	3.9	1.9	2.3 <sup>a</sup>	3.6 <sup>*</sup>	3.3	4.5 <sup>a</sup>	7.1 <sup>*</sup>	5.1	7.3	7.6

  

	Use of ATS <sup>1</sup>			Use of Cocaine			Use of ST <sup>2</sup>			Use of AD <sup>3</sup>		
	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	13	4	34	19	19	26	60	58	70	58	80	114
Alcohol	100.0	100.0	96.8	100.0	100.0	100.0	63.9	70.6	63.0	63.8	55.7	66.5
Tobacco	92.3	100.0	88.7	84.2	75.6	80.7	47.5	49.2	48.0	48.3	44.8	56.6
Cannabis	84.6	67.0	83.9	63.2	49.7	76.7	6.6	15.3 <sup>a</sup>	13.1	8.6	10.9	13.0
ATS <sup>1</sup>				26.3	13.5	43.4 <sup>*</sup>	0.0	0.0	0.0	0.0	2.5	3.7
Cocaine	38.5	67.0	32.2				0.0	1.4	2.2	0.0	2.5	4.2
ST <sup>2</sup>	0.0	0.0	0.0	0.0	4.1	5.9				38.6	23.8	30.5
AD <sup>3</sup>	0.0	52.5 <sup>†</sup>	12.2	0.0	10.5	18.7	36.7	33.2	49.7			

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

<sup>†</sup> Denotes a statistically significant change ( $p < 0.05$ ) between 2006/07 and 2010/11

<sup>\*</sup> Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

<sup>a</sup> Denotes a statistically significant difference between genders in 2010/2011

<sup>b</sup> Denotes a statistically significant difference between genders in 2014/2015

<sup>1</sup> ATS – Amphetamine-type stimulants (Ecstasy and Amphetamines)

<sup>2</sup> ST – Sedatives or Tranquillisers

<sup>3</sup> AD – Anti-depressants

**Table 9: Total proportion of people using one substance by proportion using another substance – Females (15-64) (%)**

	Last month prevalence			Use of Alcohol			Use of Tobacco			Use of Cannabis		
	06/07	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	2454	2572	2980	1678	1673	1778	776	651	719	28	24	63
Alcohol	68.4	65.1	59.7				74.4	72.5 <sup>a</sup>	64.9 <sup>*b</sup>	85.7	85.1	88.1
Tobacco	31.6	25.3	24.1	34.4	28.2 <sup>†</sup>	26.2 <sup>b</sup>				85.7	84.7	87.8
Cannabis	1.1	0.9	2.1	1.4	1.2 <sup>a</sup>	3.1 <sup>*b</sup>	3.1	3.1 <sup>a</sup>	7.7 <sup>*b</sup>			
ATS <sup>1</sup>	0.2	0.0	0.9	0.4	0.1	1.4 <sup>*</sup>	0.5	0.1	3.3 <sup>*</sup>	10.7	2.1	37.4 <sup>*</sup>
Cocaine	0.2	0.3	0.2	0.4	0.4	0.3	0.5	0.8	0.6	10.7	4.5	5.4
ST <sup>2</sup>	3.5	3.3	4.1	3.4	3.1	3.5	5.0	5.7	5.7	10.7	17.1	4.3
AD <sup>3</sup>	3.9	5.0	5.7	3.5	5.3 <sup>†</sup>	4.8	6.3	8.5 <sup>a</sup>	8.5	10.7	17.0	5.9

  

	Use of ATS <sup>1</sup>			Use of Cocaine			Use of ST <sup>2</sup>			Use of AD <sup>3</sup>		
	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	6	1	26	6	7	5	87	85	124	96	129	171
Alcohol	100.0	100.0	97.4	100.0	100.0	100.0	66.3	61.5	50.1	61.5	68.3	49.5 <sup>*</sup>
Tobacco	80.0	45.8	93.8	80.0	81.8	100.0	44.8	44.0	33.2	51.0	42.8	35.7
Cannabis	60.0	45.8	92.1	50.0	15.8	75.7 <sup>*</sup>	3.4	4.8 <sup>a</sup>	2.2	3.2	3.1	2.2
ATS <sup>1</sup>				33.3	15.8	88.4 <sup>*</sup>	1.1	0.7	2.0	1.0	0.4	1.8
Cocaine	33.3	100.0	15.5 <sup>*</sup>				1.1	2.5	0.4	0.0	0.9	0.3
ST <sup>2</sup>	16.7	54.2	9.5	16.7	32.1	11.6				38.5	27.7	31.0
AD <sup>3</sup>	16.7	54.2	12.0	0.0	17.5	11.6	42.5	42.1	42.8			

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

† Denotes a statistically significant change ( $p < 0.05$ ) between 2006/07 and 2010/11

\* Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

<sup>a</sup> Denotes a statistically significant difference between genders in 2010/2011

<sup>b</sup> Denotes a statistically significant difference between genders in 2014/2015

<sup>1</sup> ATS – Amphetamine-type stimulants (Ecstasy and Amphetamines)

<sup>2</sup> ST – Sedatives or Tranquillisers

<sup>3</sup> AD – Anti-depressants

### Relationship between use of particular substances and use of other substances – Gender (Tables 8 & 9)

Tables 8 and 9 present patterns of association between pairs of substances for males and females aged 15-64.

Among people who drink alcohol, males are more likely than females to have smoked tobacco (33.5% vs. 26.2%) in the last month, and/or to have used cannabis (8.3% vs. 3.1%). Of those who used cannabis in the month before the survey females are more likely to also report use of amphetamine-type stimulants (37.4% vs. 14.7%). The proportion of males who use cannabis who report use of cocaine was almost double that of females (10.0% vs. 5.4%).

Males who took sedatives or tranquillisers in the last month are more likely than females to report alcohol use (63.0% vs. 50.1%) and/or tobacco use (48.0% vs. 33.2%). Similarly, males who took anti-depressants in the last month are more likely to report alcohol use (66.5% in males, 49.5% in females) or tobacco use (56.6% in males vs. 35.7% in females).

Since 2010/11 the proportion of people who use tobacco who also use alcohol has decreased significantly for males and females (-6.4 percentage points in males vs. -7.6 in females), while the proportion of people who use tobacco who use cannabis has increased significantly (+6.4 percentage points in males vs. +4.6% in females).

**Table 10: Total proportion of people using one substance by proportion using another substance – Younger adults (15-34) (%)**

	Last month prevalence			Use of Alcohol			Use of Tobacco			Use of Cannabis		
	06/07	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	2315	2254	2592	1709	1597	1675	883	706	851	97	102	210
Alcohol	73.8	70.9	64.6				84.8	82.4 <sup>a</sup>	74.9 <sup>*</sup>	93.8	86.4	87.3
Tobacco	36.0	31.3	32.8	41.3	36.4 <sup>a†</sup>	38.1 <sup>b</sup>				89.7	75.4 <sup>†</sup>	81.7
Cannabis	4.2	4.5	8.1	5.3	5.5 <sup>a</sup>	10.9 <sup>*b</sup>	10.4	11.0 <sup>a</sup>	20.1 <sup>*b</sup>			
ATS <sup>1</sup>	0.7	0.1	2.2	1.0	0.1 <sup>†</sup>	3.2 <sup>*b</sup>	1.7	0.2 <sup>†</sup>	6.0 <sup>*b</sup>	13.4	0.0 <sup>†</sup>	23.9 <sup>*</sup>
Cocaine	1.0	1.0	0.9	1.3	1.4 <sup>a</sup>	1.3	2.2	2.3 <sup>a</sup>	2.0	14.4	7.4	8.4
ST <sup>2</sup>	1.3	1.0	1.6	1.2	1.0 <sup>a</sup>	1.2 <sup>b</sup>	1.7	1.6 <sup>a</sup>	3.0	1.0	3.1 <sup>a</sup>	3.1
AD <sup>3</sup>	2.2	2.3	3.0	2.0	2.2 <sup>a</sup>	2.4 <sup>b</sup>	3.0	4.7 <sup>a</sup>	5.4	4.1	4.7 <sup>a</sup>	4.6

  

	Use of ATS <sup>1</sup>			Use of Cocaine			Use of ST <sup>2</sup>			Use of AD <sup>3</sup>		
	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	17	2	56	23	22	22	30	24	40	50	51	79
Alcohol	100.0	100.0	96.8	100.0	100.0	100.0	70.0	69.7	51.4	68.0	68.5	51.1
Tobacco	82.4	68.9	91.2	78.3	73.2	77.7	48.3	48.0	62.5	50.0	64.3 <sup>a</sup>	58.6
Cannabis	76.5	0.0 <sup>†</sup>	89.4 <sup>*b</sup>	58.3	34.2	79.9 <sup>*</sup>	3.3	13.3	16.3	7.8	9.5	12.2
ATS <sup>1</sup>				21.7	2.6 <sup>a</sup>	52.3 <sup>*</sup>	3.3	2.4	4.7	2.0	1.1	5.6
Cocaine	31.3	31.1	20.7 <sup>b</sup>				3.3	10.8 <sup>a</sup>	2.3	0.0	2.3	2.3
ST <sup>2</sup>	5.9	31.1	3.4	4.2	11.5	4.1				24.0	13.1 <sup>a</sup>	27.7
AD <sup>3</sup>	5.9	31.1	7.8 <sup>b</sup>	0.0	5.3 <sup>a</sup>	8.2	40.0	28.4	54.0			

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

† Denotes a statistically significant change ( $p < 0.05$ ) between 2006/07 and 2010/11

\* Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

<sup>a</sup> Denotes a statistically significant difference between younger and older adults in 2010/2011

<sup>b</sup> Denotes a statistically significant difference between younger and older adults in 2014/2015

<sup>1</sup> ATS – Amphetamine-type stimulants (Ecstasy and Amphetamines)

<sup>2</sup> ST – Sedatives or Tranquillisers

<sup>3</sup> AD – Anti-depressants

**Table 11: Total proportion of people using one substance by proportion using another substance – Older adults (35-64) (%)**

	Last month prevalence			Use of Alcohol			Use of Tobacco		
	06/07	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	2652	2872	3345	1935	2023	2182	787	745	777
Alcohol	73.0	70.4	65.2				77.5	74.5 <sup>a</sup>	67.7*
Tobacco	29.7	25.9	23.2	31.5	27.4 <sup>†</sup>	24.1 <sup>*b</sup>			
Cannabis	1.2	1.4	1.5	1.3	1.6 <sup>a</sup>	2.0 <sup>b</sup>	3.3	4.3 <sup>a</sup>	5.6 <sup>b</sup>
ATS <sup>1</sup>	0.1	0.1	0.1	0.1	0.2	0.2 <sup>b</sup>	0.3	0.4	0.4 <sup>b</sup>
Cocaine	0.0	0.1	0.2	0.1	0.2 <sup>a</sup>	0.4	0.1	0.5 <sup>a</sup>	1.0
ST <sup>2</sup>	4.4	4.1	4.6	3.9	3.8 <sup>a</sup>	3.9 <sup>b</sup>	6.7	7.3 <sup>a</sup>	6.4
AD <sup>3</sup>	3.9	5.5	6.2	3.2	4.8 <sup>†</sup>	5.5 <sup>b</sup>	6.6	7.8 <sup>a</sup>	10.2

  

	Use of Cannabis			Use of ATS <sup>1</sup>			Use of Cocaine		
	06/7	10/11	14/15	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	31	41	49	2	3	4	1	4	8
Alcohol	80.6	79.7	88.8	100.0	100.0	100.0	100.0	100.0	100.0
Tobacco	83.9	79.8	88.1	100.0	100.0	86.5	100.0	100.0	100.0
Cannabis				100.0	100.0	59.2 <sup>b</sup>	100.0	79.2	67.3
ATS <sup>1</sup>	6.5	7.6	4.8				100.0	79.2 <sup>a</sup>	43.8
Cocaine	3.3	7.6	10.8	50.0	100.0	86.5 <sup>b</sup>			
ST <sup>2</sup>	19.4	24.0 <sup>a</sup>	10.7	0.0	0.0	13.1	0.0	10.4	14.1
AD <sup>3</sup>	16.7	19.5 <sup>a</sup>	18.2	0.0	66.0	72.3 <sup>b</sup>	0.0	52.2 <sup>a</sup>	44.1

  

	Use of ST <sup>2</sup>			Use of AD <sup>3</sup>		
	06/7	10/11	14/15	06/7	10/11	14/15
Total weighted N	118	119	153	103	158	206
Alcohol	64.1	64.3	55.6	59.2	61.8	58.3
Tobacco	44.9	45.7	32.3*	50.0	36.8 <sup>†</sup>	38.6
Cannabis	5.1	8.2	3.5	4.9	5.0	4.4
ATS <sup>1</sup>	0.0	0.0	0.3	0.0	1.3	1.4
Cocaine	0.0	0.3 <sup>a</sup>	0.7	0.0	1.3	1.7
ST <sup>2</sup>				45.6	30.5 <sup>†</sup>	32.0
AD <sup>3</sup>	39.8	40.5	43.0			

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

† Denotes a statistically significant change ( $p < 0.05$ ) between 2006/07 and 2010/11

\* Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

<sup>a</sup> Denotes a statistically significant difference between younger and older adults in 2010/2011

<sup>b</sup> Denotes a statistically significant difference between younger and older adults in 2014/2015

<sup>1</sup> ATS – Amphetamine-type stimulants (Ecstasy and Amphetamines)

<sup>2</sup> ST – Sedatives or Tranquillisers

<sup>3</sup> AD – Anti-depressants

### **Relationship between use of particular substances and use of other substances – Age (Tables 10 & 11)**

Tables 10 and 11 present patterns of association between pairs of substances for younger and older adults. For people who drink alcohol, young adults are more likely to also report use of tobacco (38.1% vs. 24.1% in older adults). Young adults who consume alcohol are also more likely to report cannabis use (10.9% vs. 2.0% in older adults) and/or amphetamine-type stimulants (3.2% vs. 0.2% in older adults).

Of those who used tobacco in the last month prior to the survey, young adults are more likely to also report alcohol use (74.9% vs. 67.7% of older adults), cannabis use (20.1% vs. 5.6% of older adults) and/or amphetamine-type stimulants (6.0% vs. 0.4% in older adults).

Among people who use cannabis, older adults are more likely to also take cocaine (10.8% vs. 8.4% in younger adults), sedatives or tranquillisers (10.7% vs. 3.1% in younger adults), and/or anti-depressants (18.2% vs. 4.6% in younger adults). Younger adults who take cannabis are more likely than older adults to also take amphetamine-type stimulants (23.9% vs. 4.8%).

Since the 2010/11 survey, the proportion of young adults who use cannabis who also took amphetamine-type stimulants in the last month has increased significantly by 23.9 percentage points from 0%. The proportion of young adults who use tobacco and also report cannabis use has increased by 9.1 percentage points to 20.1%.

## Part 2: New Psychoactive Substances

**Table 12: Prevalence of use of new psychoactive substances in Ireland 2010/11 and 2014/15 – Adults (15+) (%)**

	All adults (15-64)		Male (15-64)		Female (15-64)		Young Adults (15-34)		Older Adults (35-64)		65+
	10/11	14/15	10/11	14/15	10/11	14/15	10/11	14/15	10/11	14/15	14/15
Total Weighted N (valid responses)	5127	5937	2553	2957	2574	2980	2254	2592	2873	3345	1039
Lifetime prevalence (ever used)	-	3.5	-	4.7	-	2.3	-	6.0	-	1.5	0.3
Last year prevalence (recent use)	3.5	0.8*	5.4	1.2*	1.6	0.5*	6.7	1.6*	1.0	0.2*	0.0
Last month prevalence (current use)	-	0.1	-	0.1	-	0.1	-	0.1	-	0.0	0.0

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

\* Denotes a statistically significant change ( $p < 0.05$ ) between 2010/11 and 2014/15

Last year prevalence of use of new psychoactive substances has decreased significantly since the 2010/11 survey to 0.8% (from 3.5%). Males, females, young and older adults have seen significant decreases in last year use of new psychoactive substances. This follows the introduction of the Criminal Justice (Psychoactive Substances) Act 2010.

Among young adults 6.0% report ever taking new psychoactive substances in their lifetime, but just 0.1% report use in the month prior to the survey. Last year use is higher among males (1.2%) than females (0.5%).

**Table 13: Age at first use of new psychoactive substances (People who have used in their lifetime, 15+) (%)**

	Adults (15+)	Males	Females	Young adults (15-34)	Older adults (35-64)	65+
Total weighted N (valid responses)	205	137	68	153	51	2
Median age	20	22	19	19	28	56

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

Among adults over 15 years old, the median age at first use of new psychoactive substances is 20. Median age at first use is higher in males than females (22 vs. 19) and lower in young adults than older adults (19 vs. 28).



## Profile of people who have used new psychoactive substances

### New Psychoactive Substances prevalence by Socio-economic Group (SOC2000 Classification)<sup>4</sup>

**Table 14: Prevalence of new psychoactive substances by socio-economic group (SOC2000 Classification) – Adults 15+ (%)**

	Lifetime (Ever used)	Last year (Recent use)	Last month (Current use)
A: Professional, senior management, top civil servants (n=192)	0.8	0.0	0.0
B: Middle management, senior civil servants, managers and owners of own business (n=1046)	2.9	0.8	0.0
C1: Junior management and owners of small business (n= 1913)	3.4	0.9	0.1
C2: Skilled manual workers and manual workers responsible for other workers (n=1304)	3.1	0.7	0.0
D: Semi-Skilled and unskilled manual workers, trainees and apprentices (n=925)	2.4	0.3	0.0
E: All those dependent on the state long term (n=1266)	3.4	0.8	0.1
F1: Farmer 50+ acres (n=254)	0.8	0.2	0.0
F2: Farmer <50 acres (n=104)	3.4	0.3	0.0

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Analysis of prevalence of new psychoactive substances by socio-economic group status shows that lifetime rates are highest in Groups C1 (Junior management and owners of small business), E (All those dependent on the state long term) and F2 (Farmer <50 acres), all with 3.4%.

Last year use of new psychoactive substances is highest in group C1 (Junior management and owners of small business) with 0.9% reporting use, and lowest in group A (Professional, senior management, top civil servants) with 0% reporting use in the last month.

## New Psychoactive Substances prevalence by Work Status

**Table 15: Prevalence of new psychoactive substances by work status – Adults 15+ (%)**

	Lifetime (Ever used)*	Last year (Recent use)	Last month (Current use)
At work (n=3600)	3.3	0.7	0.0
Unemployed (n=646)	7.6	2.2	0.2
Student (n=802)	2.9	0.9	0.2
Engage in home duties (n=852)	0.8	0.0	0.0
Retired (n=853)	0.2	0.1	0.0
Other (n=251)	3.6	1.4	0.0

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Analysis of prevalence of new psychoactive substances by work status shows that those who are unemployed are most likely to have ever taken new psychoactive substances in their lifetime (7.6%), while those who are retired report the lowest use (0.2%).

Last year use is also highest in the unemployed (2.2%) and lowest in those who are retired (0.1%) or engaged in home duties (0%).

Last month use is 0% in most groups except for the unemployed and students (both 0.2%).

<sup>4</sup> Official/international system for classifying socio-economic group.

## New Psychoactive Substances prevalence by Housing tenure

**Table 16: Prevalence of new psychoactive substances by housing tenure – Adults 15+ (%)**

	Lifetime (Ever used)*	Last year (Recent use)	Last month (Current use)
Owned in part or full (n=4357)	1.5	0.3	0.0
Rented from private landlord (n=1221)	6.6	1.8	0.0
Rented from LA/HA (n=479)	3.5	0.9	0.1
Other (n=65)	5.6	1.5	0.0
Live with parents/other family (n=883)	5.0	1.0	0.3

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Analysis of prevalence of new psychoactive substances by housing tenure shows that those renting from a private landlord are most likely to take new psychoactive substances in their lifetime (6.6%) or in the last year (1.8%). Respondents who own their dwelling either in part or full, are least likely to have ever taken new psychoactive substances in their lifetime (1.5%), or to have taken them in the last year (0.3%).

## New Psychoactive Substances prevalence by Age Ceased Education

**Table 17: Prevalence of new psychoactive substances by age education ceased – Adults 15+ (%)**

	Lifetime (Ever used)	Last year (Recent use)	Last month (Current use)
15 years and under (n=755)	2.6	0.5	0.0
16-19 years (n=2361)	2.4	0.4	0.1
20 years and over (n=2482)	3.4	0.8	0.0

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Lifetime prevalence of new psychoactive substances is highest among those who ceased education at 20 years or over (3.4%). Last year use is also highest in this group (0.8%). Prevalence rates for those who ceased education at 15 years and under, and 16-19 years are similar for lifetime (2.6% vs. 2.4%) and last year use (0.5% vs. 0.4%).

## New Psychoactive Substances prevalence by Highest Education Level Attained

**Table 18: Prevalence of new psychoactive substances by highest education level attained – Adults 15+ (%)**

	Lifetime (Ever used)	Last year (Recent use)	Last month (Current use)
No formal education/primary (n=504)	1.2	0.0	0.0
Lower secondary (n=1376)	2.6	0.5	0.1
Upper Secondary (n=2012)	3.2	1.0	0.0
Third level (n=3088)	3.3	0.7	0.1

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Analysis of prevalence of new psychoactive substances by education level attained shows that those with more education are most likely to take new psychoactive substances in their lifetime with 3.3% of those with a third level education ever taking new psychoactive substances in their lifetime compared to 1.2% of those with no formal education/primary education.

Those with an upper secondary education report the highest last year use of new psychoactive substances (1.0%), followed by those with third level education (0.7%).

## New Psychoactive Substances prevalence by Marital Status

**Table 19: Prevalence of new psychoactive substances by highest marital status – Adults 15+ (%)**

	Lifetime (Ever used)*	Last year (Recent use)	Last month (Current use)
Single/never married (n=2231)	5.0	1.4	0.2
Married (n=3531)	1.2	0.3	0.0
Co habiting (n=610)	8.1	1.4	0.0
Separated (n=187)	0.7	0.4	0.0
Divorced (n=115)	3.1	0.3	0.0
Widowed (n=315)	0.6	0.0	0.0

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

\* Wald-F statistical significance test ( $p < 0.001$ ) for a test of equality among groups.

Analysis of prevalence of new psychoactive substances by marital status shows that those who are co-habiting are most likely to take new psychoactive substances (8.1%) in their lifetime, while those who are widowed (0.6%) or separated (0.7%) report the lowest lifetime prevalence.

Last year use is highest for single/never married individuals and those who are co-habiting (both 1.4%) and lowest in those who are widowed (0%).

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