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Prevalence of drug use: key findings from the 2001/2002 British Crime Survey

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The British Crime Survey (BCS) is a large national survey of adults who live in a representative cross-section of private households in England and Wales. In addition to asking respondents about their experiences of crime, the BCS also asks about a number of other crime-related topics. Since 1994, the BCS has included a comparable module of questions on drug misuse.

This Findings examines the prevalence and trends of illicit drug misuse among 16- to 59-year-olds, with particular focus on estimates for 16- to 24-year-olds. Additionally, estimates are given for two new sets of questions that were introduced in the 2001/2002 survey, concerning the age when drug-use started and how easy it was to get access to drugs.

Key points

- Of all 16- to 59-year-olds, 12% had taken an illicit drug and 3% had used a Class A drug in the last year. This equates to around four million users of any illicit drug and around one million users of Class A drugs.

- Cannabis is the most frequently used drug, with around three million 16- to 59-year-olds having used it in the last year (11%).

- Last year use of amphetamines, LSD, magic mushrooms and steroids among 16- to 59-year-olds has decreased significantly since 1998. However, cocaine, crack and ecstasy use increased significantly.

- People aged between 16 and 24 years are significantly more likely to have used drugs in the last year and last month than older people.

- The use of Class A drugs in the last year among 16- to 24-year-olds has not changed significantly since 1994.

- Last year use of amphetamines, LSD, magic mushrooms, methadone and glue among 16- to 24-year-olds has decreased significantly since 1998. However, cocaine and ecstasy use increased significantly.

- Of those drugs measured, cannabis had the youngest mean age of first use at 15½ years, and cocaine had the oldest at just over 18 years.

- Ease of access to drugs is closely tied to patterns of use. Of all 16- to 24-year-olds, cannabis was reported to be the easiest of drugs to obtain followed by ecstasy, amphetamines then cocaine.

The views expressed in these findings are those of the authors, not necessarily those of the Home Office (nor do they reflect Government policy)

The drugs strategy

The Government's Drugs Strategy has the over-arching aim of 'reducing the harm that drugs cause to society, including communities, individuals and their families'. To achieve this, the Government has set the objective to:

'reduce the use of Class A drugs and the frequent use of any illicit drug among all young people under the age of 25 especially by the most vulnerable young people'.

The main measurement tool for Class A use is the BCS, which recorded a baseline figure of last year prevalence of 8.6% (1998 BCS). Additionally, questions have been introduced in the 2002/2003 BCS, which will be used to monitor changes in the frequency of illicit drug misuse. Current work is also examining the feasibility of monitoring drug misuse among vulnerable young people.

Extent of drug use among 16- to 59-year-olds

The 2001/2002 BCS estimates that 34% of 16- to 59-year-olds have used an illicit drug at some time and 12% have used a Class A drug. Table 1 gives prevalence estimates from the 2001/2002 BCS for last year and last month use of drugs for different age groups. Of all 16- to 59-year-olds, 12% had taken an illicit drug and 3% had used a Class A drug in the last year. This equates to around four million users of any illicit drug and around one million users of Class A drugs (see Table 2).

Cannabis is the most frequently used drug, with approximately three million 16- to 59-year-olds having used it in the last year. It was used in the last year by 27% of 16- to 24-year-olds, 13% of 25- to 34-year-olds and 4% of 35- to 59-year-olds. For 16- to 24-year-olds, ecstasy is the second most commonly used drug, followed by amphetamines and cocaine. For those in the older age groups, cocaine is the second most used drug followed by ecstasy and amphetamines – although these are used at much lower levels than cannabis.

Young people are significantly more likely to use drugs. Those aged 16 to 24 have statistically significant higher levels of last year use than 25- to 34-year-olds for all drugs listed except heroin, methadone, tranquillisers and steroids. Methadone is the only drug in which last year use estimates are significantly lower for 16- to 24-year-olds compared to 25- to 34-year-olds. Those aged 16 to 24 have significantly higher levels of last year use than 35- to 59-year-olds for all drugs listed except methadone.

The picture is very similar for last month use. Those aged 16 to 24 report statistically significant higher use of all drugs except crack, heroin, tranquillisers and steroids compared to 25- to 34-year-olds. Again, last month use of methadone amongst 16- to 24-year-olds is significantly lower than for 25- to 34-year-olds. Those aged 16 to 24 have significantly higher levels of last month use than 35- to 59-year-olds for all drugs listed except crack, heroin, tranquillisers, steroids and methadone.

Table 1 Prevalence of drug misuse (16- to 59-year-olds)

Percentage used	16–24*	25–34	35–59	16–59
Amphetamines				
Last year	5.0	2.2	0.4	1.6
Last month	2.0	0.8	0.2	0.7
Cannabis				
Last year	26.9	13.5	4.1	10.6
Last month	17.1	8.6	2.4	6.6
Cocaine				
Last year	4.9	3.3	0.5	2.0
Last month	2.1	1.4	0.3	0.9
Crack				
Last year	0.5	0.2	0.1	0.2
Last month	0.1	0.1	–	0.1
Ecstasy				
Last year	6.8	3.1	0.4	2.2
Last month	3.6	1.5	0.1	1.1
Heroin				
Last year	0.3	0.2	0.1	0.2
Last month	0.2	0.2	0.1	0.1
LSD				
Last year	1.2	0.4	–	0.4
Last month	0.3	0.1	–	0.1
Magic mushrooms				
Last year	1.5	0.7	0.1	0.5
Last month	0.5	0.2	–	0.2
Methadone				
Last year	–	0.2	–	0.1
Last month	–	0.2	–	0.1
Tranquillisers				
Last year	1.0	0.6	0.4	0.5
Last month	0.3	0.2	0.2	0.2
Amyl nitrite				
Last year	3.8	1.5	0.3	1.2
Last month	1.5	0.8	0.2	0.6
Anabolic steroids				
Last year	0.2	0.1	–	0.1
Last month	0.1	0.1	–	–
Glues				
Last year	0.6	0.1	–	0.1
Last month	0.2	–	–	0.1
Any drug				
Last year	29.6	15.4	4.9	12.0
Last month	18.8	9.7	2.9	7.5
Class A				
Last year	8.8	4.9	0.8	3.2
Last month	4.9	2.6	0.4	1.8

Notes: '–' estimate is less than 0.05%. *Core and boost data.
Source: 2001/2002 BCS (weighted data).

Table 2 Estimate of the number of drug users (16- to 59-year-olds)

Number who have used	Best estimate	Low estimate	High estimate
Amphetamines			
Last year	492,000	432,000	561,000
Last month	212,000	173,000	259,000
Cannabis			
Last year	3,293,000	3,137,000	3,452,000
Last month	2,062,000	1,937,000	2,194,000
Cocaine			
Last year	622,000	553,000	698,000
Last month	285,000	239,000	338,000
Crack			
Last year	58,000	39,000	85,000
Last month	18,000	9,000	35,000
Ecstasy			
Last year	680,000	609,000	760,000
Last month	341,000	291,000	399,000
Heroin			
Last year	48,000	32,000	73,000
Last month	32,000	19,000	53,000
LSD			
Last year	110,000	84,000	146,000
Last month	31,000	18,000	52,000
Magic mushrooms			
Last year	151,000	119,000	191,000
Last month	52,000	35,000	78,000
Methadone			
Last year	22,000	12,000	41,000
Last month	19,000	9,000	37,000
Tranquillisers			
Last year	168,000	134,000	210,000
Last month	71,000	50,000	101,000
Amyl nitrite			
Last year	378,000	326,000	439,000
Last month	177,000	142,000	220,000
Anabolic steroids			
Last year	23,000	12,000	42,000
Last month	12,000	5,000	28,000
Glues			
Last year	45,000	29,000	69,000
Last month	23,000	12,000	42,000
Any drug			
Last year	3,728,000	3,563,000	3,900,000
Last month	2,331,000	2,198,000	2,471,000
Class A			
Last year	1,007,000	920,000	1,103,000
Last month	551,000	487,000	624,000

Notes: Numbers have been rounded to the nearest 1,000. See methodological note for technical details on estimates.
Source: 2001/2002 BCS (weighted data).

Patterns of drug use among 16- to 59-year-olds

Comparing last year prevalence estimates for 16- to 59-year-olds from the 1998 BCS with those from the 2001/2002 sweep, there have been statistically significant decreases in the use of:
- amphetamines
- LSD
- magic mushrooms
- steroids.

However, over the same period there were statistically significant increases in the use of:
- cocaine
- crack
- ecstasy
- class A drugs.

Comparing last year prevalence estimates for 16- to 59-year-olds from the 2000 BCS with those from the 2001/2002 sweep, there have been statistically significant decreases in the use of:
- amphetamines
- crack
- heroin
- LSD
- magic mushrooms
- steroids.

However, over the same period there were statistically significant increases in the use of ecstasy. Figure 1 shows the change from 1998 to 2001/2002 in the last year prevalence for Class A and the main drugs for 16- to 59-year-olds.

Figure 1   Last year use of drugs among 16- to 59-year-olds
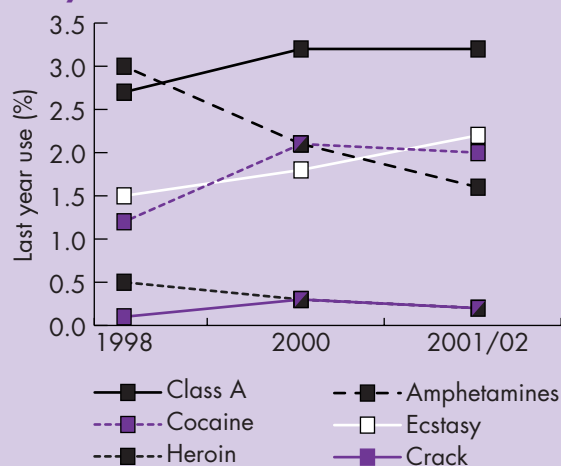
Number of drugs used among 16- to 59-year-olds

The 2001/2002 BCS estimates that approximately two-thirds of last year drug users and three-quarters of last month drug users had only used one type of drug. In the majority of cases this was cannabis. Around one in five last year drug users and one in ten last month drug users reported using three or more drugs (see Table 3). In line with prevalence estimates, the most commonly used drugs were cannabis, ecstasy, cocaine and amphetamines.

Table 3 Percentage using varying number of drugs (16- to 59-year-olds)

Number of drugs used	1	2	3	4	5	6+
Last year	67.7	14.8	7.8	4.2	2.2	3.4
Last month	74.1	13.8	6.9	3.0	0.8	1.4

Notes: Estimates based on users of drugs.
Source: 2001/2002 BCS (weighted data).

Patterns of drug use among young people

The Government has set the target of reducing the use of Class A drugs among people aged under 25. To enable precise changes to be measured, the 2001/2002 BCS boosted the number of young people in the sample (see methodological note). A baseline estimate of 8.6% was recorded from the 1998 BCS. The 2000 BCS estimated that this figure had increased to 9.7%, and most recent estimates show that it has decreased to 8.8%. However, none of these changes are statistically significant. Class A drug use has therefore remained at the same level since 1998.

Comparison of last year prevalence estimates for 16- to 24-year-olds from the 1998 BCS with those from the 2001/2002 sweep, indicates that there have been statistically significant decreases in the use of:

- amphetamines
- LSD
- magic mushrooms
- methadone
- glue.

However, there were significant increases in the last year use of cocaine and ecstasy. For last month use there were significant decreases in the use of amphetamines and methadone.

Comparison of last year prevalence estimates for 16- to 24-year-olds from the 2000 BCS with those from the 2001/2002 sweep, indicates that there have been statistically significant decreases in the use of:

- heroin
- LSD
- magic mushrooms.

There were no significant increases in last year use or any significant changes in last month use.

Overall, the BCS indicates that there have been consistent decreases in the use of drugs such as amphetamines, LSD and magic mushrooms among young people. While at the same time there have been increases in cocaine and ecstasy. It is possible that cheaper supplies of cocaine and ecstasy have led to a movement away from other stimulants and hallucinants.

Figure 2 shows the change from 1998 to 2001/2002 in last year prevalence for Class A and the main drugs for 16- to 24-year-olds. Table 4 gives estimates of the number of 16- to 24-year-olds using illicit drugs.

Whilst the overall prevalence estimates for 16- to 24-year-olds are informative, it is also interesting to break this into two age bands (16–19 and 20–24). This helps to identify differences within the age band and highlight any instances where either of the two age groups may be skewing the overall estimates. Comparison of the two age groups indicates that drug use tends to be higher in the upper age band. Table 5 shows that the overall prevalence of last year use of Class A drugs among 16- to 24-year-olds is 8.8%, for those aged 16–19 this figure is lower at 6.2%. Conversely, for those aged 20–24 the estimate is higher at 10.9%.

A number of significant differences are found when examining the disparity in estimates of last year use between the two age bands. Those in the older group are significantly more likely to have used amphetamines,

Figure 2 Last year use of drugs among 16- to 24-year-olds
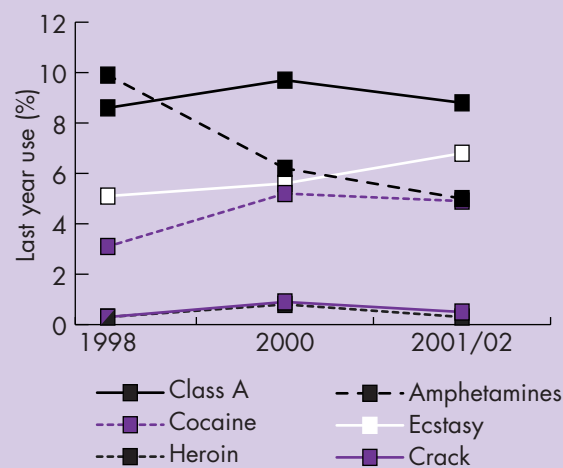
cocaine, crack, ecstasy and heroin. Unsurprisingly therefore, those aged 20–24 had statistically significant higher levels of last year use of Class A drugs.

The picture is similar for last month use; with 20- to 24-year-olds having significantly higher use of amphetamines, cocaine, ecstasy and heroin. Those in the upper age band also had significantly higher prevalence of any drug use and Class A drug use. The only drug that had significantly higher prevalence among 16- to 19-year-olds was 'smoking something unknown' – which falls in the 'any drug' category. This possibly reflects the circumstances in which consumption may sometimes take place for some young people.

Table 4 Estimate of last year drug users (16- to 24-year-olds)

Number who have used	Best estimate	Low estimate	High estimate
Amphetamines	282,000	240,000	332,000
Cannabis	1,525,000	1,432,000	1,619,000
Cocaine	275,000	234,000	324,000
Crack	26,000	15,000	45,000
Ecstasy	384,000	334,000	440,000
Heroin	18,000	9,000	34,000
LSD	68,000	49,000	95,000
Magic mushrooms	85,000	63,000	114,000
Tranquillisers	55,000	38,000	80,000
Amyl nitrite	214,000	178,000	258,000
Anabolic steroids	11,000	5,000	26,000
Glues	34,000	21,000	54,000
Any drug	1,678,000	1,581,000	1,774,000
Class A	499,000	443,000	562,000

Notes: Numbers have been rounded to the nearest 1,000. Methadone has been excluded due to its low prevalence. Source: 2001/2002 BCS. Core and boost sample (weighted data)

Table 5 Prevalence of drug misuse (16- to 24-year-olds)

Percentage used	16–19	20–24	16–24
Amphetamines			
Last year	4.1	5.7	5.0
Last month	1.4	2.4	2.0
Cannabis			
Last year	25.6	28.0	26.9
Last month	16.2	17.8	17.1
Cocaine			
Last year	2.5	6.8	4.9
Last month	1.1	3.0	2.1
Crack			
Last year	0.2	0.7	0.5
Last month	0.1	0.1	0.1
Ecstasy			
Last year	4.9	8.3	6.8
Last month	2.2	4.7	3.6
Heroin			
Last year	–	0.5	0.3
Last month	–	0.3	0.2
LSD			
Last year	0.9	1.5	1.2
Last month	0.3	0.4	0.3
Magic mushrooms			
Last year	1.6	1.4	1.5
Last month	0.4	0.5	0.5
Methadone			
Last year	–	–	–
Last month	–	–	–
Tranquillisers			
Last year	1.0	0.9	1.0
Last month	0.4	0.3	0.3
Amyl nitrite			
Last year	3.2	4.3	3.8
Last month	1.2	1.8	1.5
Anabolic steroids			
Last year	0.1	0.3	0.2
Last month	–	0.1	0.1
Glues			
Last year	0.1	0.3	0.6
Last month	0.4	0.1	0.2
Any drug			
Last year	28.1	30.8	29.6
Last month	17.3	20.0	18.8
Class A			
Last year	6.2	10.9	8.8
Last month	2.9	6.5	4.9

Notes: '–' estimate is less than 0.05%. Source: 2001/2002 BCS. Core and boost sample (weighted data)

Number of drugs used among 16- to 24-year-olds

The 2001/2002 BCS estimates that approximately two-thirds of 16- to 24-year-olds who had used drugs in either the last year or last month, only used one type of drug. Approximately a fifth of both last year and last month drug users reported using three or more drugs, see Table 6. Again, in line with prevalence estimates, the most commonly used drugs were cannabis, ecstasy, amphetamines and cocaine.

Age of onset

For the first time in the BCS, 16- to 24-year-olds who reported having used certain drugs at some time were

Table 6 Percentage using varying number of drugs (16- to 24-year-olds)

Number of drugs used	1	2	3	4	5	6+
Last year	62.5	15.9	8.4	5.2	3.6	4.3
Last month	71.4	13.9	8.8	3.9	0.7	1.3

Notes: Estimates based on users of drugs. Source: 2001/2002 BCS. Core and boost sample (weighted data)

asked how old they were at first use.

Table 7 shows the mean age at which people began using particular drugs. Unsurprisingly, use of cannabis was initiated at the youngest age – 15½ years. Amphetamines, LSD and magic mushrooms were first used around 16 years and crack, heroin, ecstasy and methadone around 17 years. Cocaine had the oldest mean age of first use at around 18 years of age.

Ease of access

The 2001/2002 BCS asked all 16- to 24-year-olds how

Table 7 Age of onset of drug use (16- to 24-year-olds)

	Mean age
Cannabis	15.5
LSD	16.2
Magic mushrooms	16.2
Amphetamines	16.3
Ecstasy	17.2
Heroin	17.4
Crack	17.5
Methadone	17.5
Cocaine	18.2

Source: 2001/2002 BCS. Core and boost sample (weighted data)

easy it would be for them to get certain drugs if they wanted to (if they had heard of the drug but regardless of whether they had ever used the drug).

The ease or difficulty with which young people can access illegal drug markets is likely to be a substantial factor in whether they begin and continue using drugs. 'Access' is a slightly different concept to 'availability' or 'supply' in that it

reflects how geographically or culturally proximate a person is to the market. Drugs may be widely available within an area, but access by specific groups and individuals (for example, according to age, gender or ethnicity) may still vary.

These results, as expected, are tied closely to patterns of use, where the most commonly used drugs are usually also the most accessible (see Table 8). For instance, cannabis is very or fairly easy to get for 68% of young people, but the figure for methadone is only 12%. However, there is not always a direct association, for example, amphetamines

(42%) are easier to get than cocaine (33%), but are used by the same proportion of young people (5% in the last year). A notable proportion of respondents who were unable to provide an answer had never used the drug. It might be fair to assume that most (but certainly not all) of these people would therefore find access to drugs difficult, which is why they have been included in the table as 'not answered' to avoid artificially increasing rates of easy access.

Table 8 How easy it was to get access to drugs

Percentage	Very easy	Fairly easy	Fairly difficult	Very difficult	Impossible	Not answered*
Amphetamines	16	26	12	8	4	33
Cannabis	40	28	7	4	2	19
Cocaine	12	21	15	10	5	36
Crack	8	16	15	11	7	44
Ecstasy	19	24	11	8	4	32
Heroin	8	12	13	14	9	44
LSD	8	16	14	12	7	42
Magic mushrooms	9	15	14	11	7	44
Methadone	4	8	11	12	9	56

Notes: *Includes: 'don't know', 'did not want to answer', those not asked because they had never heard of the drug, and other missing responses. Source: BCS 2001/2002. Core and boost sample (weighted data)

References

Bolling, K., Clemens, S., Phelps, A. and Smith, P. (2002) *2001 British Crime Survey England and Wales* Technical Report. London: BMRB.

Simmons, J. (Ed) (2002) *Crime in England and Wales 2001/2002*. Home Office Statistical Bulletin 07/02. London: Home Office.

Methodological note

The 2001/2002 BCS has a nationally representative sample of 32,797 adults living in private households in England and Wales. The response rate was 74%. Of the total achieved sample, 21,946 respondents were eligible to complete the self-completion drugs module (i.e., aged between 16–59 years). Subtracting the 1,794 respondents who refused to take part and a further six respondents for methodological reasons, this gave a final sample size of 20,146. The 2001/2002 BCS also included an additional sample of 1,536 16- to 24-year-olds (this figure takes into account the 19 respondents who either refused or were discounted). The response rate for the youth boost was 72%. The total number of 16- to 24-year-olds from both the core and booster sample was 4,055. See Bolling et al. (2002) for more information.

The BCS has moved from a biennial to annual survey, with respondents now being interviewed continuously throughout the year as opposed to in the first quarter of the year. The reporting period has moved from a calendar to a financial year. The BCS has adopted 'calibration weighting', which is designed to adjust for known differentials in response rates across age, gender and regional sub-groups. This weighting has been applied to sweeps from 1996 onwards. All estimates in this paper have incorporated calibration techniques; thus some estimates vary slightly from those previously published. The impact of calibration weighting on estimates remains relatively constant over consecutive sweeps: on average 'ever use' estimates increase by a 0.5 percentage point, 'year use' by 0.2 and 'month use' by 0.1. See Simmons (2002) for more information.

Two-tailed significance tests were carried out at the 5% and 10% level (the majority qualified at the 5% level). Estimates of the number of users are based on 95% confidence intervals (calculated using a logit transformation where proportions were less than 0.2 or greater than 0.8). The figures are calculated using population estimates provided by The Office for National Statistics (ONS). A design factor of 1.2 has been used throughout.

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