

Drugs—A Study of Irish Rural Post-Primary Schoolchildren 1970-71

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THE Irish Cancer Society and the College of General Practitioners carried out a survey of the smoking and drinking habits of post-primary schoolchildren in Dublin during the first half of 1970. In view of the increasing concern over drug-taking among young children it was decided to include some questions on drugs. The Irish Cancer Society and the College of General Practitioners made this part of their data available to the Medico-Social Research Board (Nevin et al., 1970).

During the period November 1970-May 1971, the Irish Cancer Society and the College of General Practitioners carried out a similar survey of the smoking, drinking and drug-taking habits of post-primary schoolchildren in schools outside Dublin. This paper reports on the findings of the survey on drug-taking among the rural post-primary school-schoolchildren.

Methodology

From the list of 671 recognized post-primary schools (outside of Dublin) issued by the Department of Education (1968/69) a random sample of 27 schools was taken with the probability of selection being proportional to the school attendance.

A structured questionnaire, very similar to that used in the Dublin study but containing additional questions, was used to obtain the data. As in the previous study, the statistical design of the survey was carried out by the Social Survey Unit of the Economic and Social Research Institute and the data was processed by a computer centre.

The main question asked in the section on drugs was: 'Have you ever taken drugs?'

- If 'yes' (1) Which drug or drugs have you taken?
(2) How many times have you taken them?
(3) Where did you get the drug?

The children were also asked if they had ever been offered what they thought was an addictive drug, if they had ever been at a party where drugs were taken and if any of their friends took drugs. Lastly, they were asked if they thought that either 'soft' or 'hard' drugs had any long term effects on people.

The questionnaires were distributed to the children in their classrooms by a specially trained interviewer who explained the questionnaire to them, gave help where necessary and particularly emphasized the anonymity of the forms. In all *but* one case the teachers were not present during the sessions. The children were very co-operative and the questionnaires were in general well completed with almost no facetious comment.

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*Rural, i.e. excluding post-primary schoolchildren attending schools in Dublin city and county.

Results of the Study

The 27 schools in the sample contained 5,851 children as against 5,483 children in the Dublin study. None of the 5,851 questionnaires was discarded. The age range was 11 to 19 years. The age and sex distribution of both samples was very similar and valid comparisons can be made between them. Table I gives the number and distribution of the subjects by age and sex.

69 children or 1.2 per cent of the sample stated that they had taken drugs. An additional 25 children stated that they had taken drugs which are not considered to be drugs of abuse in the accepted sense of that term. The data are presented 'by a sex and age breakdown in Table II. 1.4 per cent of the boys and 1.0 per cent of the girls said they had taken drugs. These figures are approximately half those of the Dublin study (2.6 per cent and 1.9 per cent respectively). In Table IIA the children are divided into two age groups, 'under 16 years' and '16 years and over'.

Table I Sex by Age.

	12 & under	13	14	15	16	17	18 & over	Age not stated	Total
Boy	255	639	684	596	409	254	80	26	2943
Girl	205	523	630	546	483	364	115	27	2893
Sex not stated	2	2	3	4	2	2	0	0	15
Grand Total:	462	1164	1317	1146	894	620	195	53	5851

The higher incidence of drug-taking in the older children (i.e. 2.9 per cent of the children over 16 years took drugs compared to 0.5 per cent of those under 16 years) was also found in the Dublin study.

Table II Children who stated they had taken drugs by age and sex.

	12 & under	13	14	15	16	17	18+	Total
Boys	0	2	2	7	10	15	4	40
Percentage	0	0.3	0.3	1.2	2.4	5.9	5.0	1.4
Dublin 1970 percentage	0	0.5	1.4	2.5	5.9	5.7	6.7	2.6
Girls	1	0	5	2	9	11	1	29
Percentage	0.5	0	0.8	0.4	1.9	3.0	0.9	1.0
Dublin 1970 percentage	0.4	0.6	1.7	1.9	3.0	5.2	0	1.9
TOTAL	Number			69				
	Percentage of sample			1.2				
	Dublin 1970 percentage			2.3				

Table IIA Children who stated they had taken drugs.

	UNDER 16 YEARS			16 YEARS AND OVER		
	Number	Percentage	Dublin Percentage	Number	Percentage	Dublin Percentage
Boys	11	0.5	1.4	29	3.9	5.9
Girls	8	0.4	1.2	21	2.2	3.7
Total:	19	0.5	1.3	50	2.9	4.9

The type of drug taken is indicated in Table III. As in the Dublin study the commonest drug taken was cannabis. The number of children who said they took L.S.D. (fourteen altogether) is perhaps higher than one might expect. Pep pills and heroin were the next two drugs in order of frequency. 15 respondents did not specify which drugs they had taken. The pattern of drugs taken by the children in this study is similar to that seen in the Dublin study, the only notable difference being that morphine/opium was taken by four boys in the Dublin schools and was not mentioned in the present study.

Three boys and two girls stated that they had taken two different drugs. One girl mentioned three drugs and a boy said he had taken four different drugs. A 17 year old boy did not specify the number of different types of drugs which he claimed to have taken.

When asked how many times they had taken the drug or drugs mentioned by them, twenty children stated that they had taken the drug(s) only once, thirty-nine said that they had taken the drug(s) more than once, and the remainder (i.e. ten out of the 69 children) did not answer.

This question was asked in order to establish the frequency of drug-taking among the children. The answers given were such that a full statistical analysis could not be made. Of the 39 children who said that they had taken drugs more than once, six indicated that they were taking the drugs regularly (5

Table III
Type of Drug Taken.

Drug	Boys	Girls
Marijuana (cannabis), hash etc.	18	15
L.S.D.	8	6
Pep pills (amphetamines)	7	4
Heroin	4	1
Mescaline	1	0
Barbiturates	0	1
Drug(s) not specified	<u>8</u>	<u>7</u>
Total mentions*	46	34

*5 boys and 3 girls mentioned two or more drugs.

Table IV
Drug-takers—Source of Drugs

Source	Number	Percentage
Friend	37	51
Pusher	3	4
Party	3	4
Dublin	3	4
England	2	3
Other	7	10
No source mentioned	<u>18</u>	<u>24</u>
*Total mentions	73	100

*Total includes 4 individuals who mentioned 2 sources.

named *marijuana, one named pep pills). Four children named marijuana as the drug they had taken and said they did not know how many times they had taken it; a further three children

had taken marijuana on ten or more occasions; two other children said they had taken the drug 'on 100 occasions' but did not specify the drug concerned; one boy and one girl said they had taken L.S.D. on four occasions and another boy claimed to have taken it on five occasions. Thus, 18 of the 59 drug-takers who answered this question said that they had taken drugs on at least four occasions. Twelve of these children were aged 16 years and over and six were under 16 years.

*The first drug named by each subject is given above.

The replies of those who said they had taken drugs to the question – Where did you get the drug?—are given in Table IV. As the question was open-ended, some subjects named persons and others named places. The sources named by the 7 children listed under 'other (sources)' in the table were—wimpy bar, shop, chemist, while camping; at a dance; a 16 year old boy claimed that he got hash from his mother and a 17 year old boy said that he 'made' the drug which he took but which he did not name. Of the eighteen schoolchildren who said that they had taken drugs but did not mention where they obtained the drugs, eight named the drug and specified the number of times they had taken it, two named the drug and gave no further information, one said he had taken the drug on 'a hundred occasions' but did not name the drug and seven children merely stated that they had taken drugs but did not answer the other parts of the question.

The replies of a further 25 children (in addition to the 69 children studied above) to the question: 'Have you ever taken drugs?' are worthy of note. Nine children mentioned cigarettes and nicotine, indicating an acute awareness of the meaning of the word 'drug'. Nine children mentioned proprietary preparations of aspirin, paracetamol and codeine; three of these children said they took the drugs for illness. Five subjects said they had taken prescribed drugs for medicinal purposes only. Two subjects took anadin with 'coca-cola'.

Those Who Were Offered Drugs

A breakdown by age and sex of those who claimed to have been offered drugs appears in Table V. The corresponding percentage figures for each sex and age group from the Dublin study are included for comparison. As one would expect, the number of pupils who were offered drugs was greater than the number who had actually taken drugs in both studies. The figures from both studies illustrate clearly that the percentages who said that they were offered drugs increased steadily with age and generally speaking the percentages were higher for the Dublin schoolchildren (7.5 per cent of the Dublin schoolchildren claimed to have been offered drugs compared to 4.1 per cent of rural schoolchildren).

In Table VA the children are grouped into two categories, those under 16 years and those aged 16 years and over. 7.9 per cent of those aged 16 years and over were offered drugs and 2.5 per cent of those under 16 years; the corresponding figures for the Dublin study were 13.2 per cent and 5.4 per cent respectively.

Table V

Those who claimed to have been offered drugs—by age and sex.

	12 & under	13	14	15	16	17	18+	Total
Boys	4	16	13	32	27	42	16	*151
Percentage	1.6	2.5	1.9	5.4	6.6	16.5	20.0	5.1
Dublin 1970	1.8	3.9	5.2	11.6	15.0	16.1	22.0	9.1
Percentage								
Girls	5	8	11	13	26	17	7	87
Percentage	2.4	1.5	1.7	2.4	5.4	4.7	6.1	3.0
Dublin 1970	0.7	1.5	5.5	6.9	8.2	11.7	12.9	5.5
Percentage								

*The total of 151 boys includes one boy whose age was not stated.

Table VA

Those offered drugs.

	UNDER 16 YEARS			16 YEARS AND OVER		
	Number	Percentage	Dublin Percentage	Number	Percentage	Percentage
Boys	65	3.0	6.5	85	11.4	15.8
Girls	37	1.9	4.0	50	5.2	9.8
Total	102	2.5	5.4	135	7.9	13.2

52 of the 69 drug-takers (75 per cent) said that they had been offered drugs compared to 4.1 per cent of the total sample. 16 of the 52 children did not name the drug which they said they were offered or the drug which they claimed to have taken. Of the remaining 36 children who answered both of these questions, 32 (89 per cent) said that they had taken the same drug(s) which they had been offered.

Attendance at Parties Where Drugs Were Taken

2.7 per cent of the boys and 1.8 per cent of the girls under 16 years of age said that they had attended a party at which drugs were taken (Table VI). Over the age of 16 years, 8.1 per cent of the boys and 5.9 per cent of the girls attended such a party. Again the percentages in the schools outside of Dublin who had attended such a party were approximately half the percentages among the Dublin schoolchildren.

Table VI

Those who said they attended a party where drugs were taken.

	UNDER 16 YEAR			16 YEARS AND OVER		
	Number	Percentage	Dublin Percentage	Number	Percentage	Dublin Percentage
Boys	59	2.7	4.2	6.	8.1	14.9
Girls	35	1.8	5.6	57	5.9	15.9
Total	94	2.3	4.9	117	6.9	15.3

43 of the 69 drug-takers (62 per cent) said they had attended a party where drugs were taken; only 3.6 per cent of the total sample had attended such a party. These figures show a strong association between those taking drugs and attendance at parties where drugs were available.

Friends Taking Drugs

The children were asked if any of their friends were taking drugs and were instructed to ring one of the three possible answers provided in the questionnaire i.e. most, some or none. Those who answered that some or most of their friends took drugs, are grouped together and presented in Table VII. The number whose friends took drugs increased with age, the percentages rising more rapidly in the case of the boys. The percentage figures for boys rose from 6.1 per cent in the 16 years age group to 16.3 per cent in the 18 years and over group. 4.8 per cent of the boys and 5.3 per cent of the girls in the sample said that either some or most of their friends took drugs. 75 per cent of the boys and 69 per cent of the girls who had taken drugs themselves said that their friends took drugs.

Table VII

Those who claimed that friends took drugs – By age and sex.

	12 & under	13	14	15	16	17	18	Total
Boys	3	13	26	29	25	31	13	*143
Percentage	1.2	2.0	3.8	4.9	6.1	12.2	16.3	4.8
Girls	1	19	30	17	43	34	8	**154
Percentage	0.5	3.6	4.8	3.1	8.9	9.3	7.0	5.3

*Total includes 3 boys age not stated.

**Total includes 2 girls age not stated.

One child, sex not stated, who said some of 'his' friends took drugs, not included in above figures.

Table VIIA

Those who claimed that friend's took drugs.

	Under 16 Years	16 Years and Over
Boys	71	69
Percentage	3.3	9.3
Girls	67	85
Percentage	3.5	8.8

The replies of the children to the questions on the longterm effects of both 'soft' and 'hard' drugs on people indicated a general lack of knowledge on the subject. Approximately 50 per cent of the total sample and 16 per cent of those who said they had taken drugs did not know whether 'soft' or 'hard' drugs had any longterm effects. As expected, those who 'had taken drugs were more knowledgeable about their effects than those who had not done so. 70 per cent of those who said they had taken drugs thought that 'hard' drugs had longterm effects on people (compared to 31 per cent of the total sample) and 28 per cent thought that 'soft' drugs had long-term effects (compared to 17 per cent of the total sample).

Further Differences between Drug-Takers and Total Sample

A number of other important differences were found between those who said they had taken drugs (drug-takers) and the total sample.

The incidence of smoking and drinking was significantly higher among the drug-takers than in the total sample. Of the 29 girls who stated that they had taken drugs, 21 girls said that

they smoked regularly (i.e. at least one cigarette per week) and 24 girls said that they drank alcohol either regularly (i.e. at least one drink per week) or occasionally; the expected numbers out of the 29 girls in these age groups would be 4.9 (smoking) and 6.9 (drinking). Of the 40 boys who took drugs 32 boys said that they smoked regularly and 37 boys said that they drank alcohol regularly or occasionally; the expected numbers out of the 40 boys would be 13.9 (smoking) and 15.4 (drinking). The differences in the smoking and drinking habits between the drug-taking group and the sample were especially marked in the case of the girls. Furthermore, of those who smoked, the drug-takers were the heavier smokers and of those who drank, the drug-takers did so more heavily than the sample who drank.

Subjects were asked how much money they had to spend each week. 29 of the 69 drug-takers (42 per cent) had more than £ 1 to spend compared to only 520 of the total sample (9 per cent). 23 per cent of the drug-takers had between £2-£10 to spend each week compared to 3 per cent of the sample. The drug-takers therefore had more money to spend each week.

Significant differences were noted between the drug-takers and the total sample as regards leisure pursuits. The children were asked to list the three things they liked doing most in their spare time, 56 of the 69 drug-takers listed going out with the opposite sex as one of their three favourite leisure activities; the expected number out of the 69 boys and girls in these age groups would be 30.8. Fewer of the male drug-takers liked to watch television or listen to the radio and more of them liked to visit coffee bars or clubs than the males in the sample. The differences 'between 'the drug-takers and the total sample for die above activities were significant. Similarly, fewer of the female drug-takers liked to watch television or listen to the radio and more of them liked to visit coffee bars or clubs than did the females in the study, but here the differences between die groups were not significant.

The drug-takers spent less time at home than the sample. 20 per cent of the drug-takers said they were 'often bored because they had nothing to do in their spare time' compared to 9 per cent of the sample. No difference was found between the two groups for other activities notably going dancing, going to the cinema or sports and games. These findings are similar to those of R.S.P. Wiener (1970) who, in a study of over 1,000 post-primary schoolchildren carried out in the London area in 1968, found that those who had taken drugs (5.4 per cent of the sample) spent less time than the controls with their family and spent more time with their peers at coffee bars, dancing, in pubs and in Soho.

Discussion

It is important to bear in mind that the survey carried out by the Irish Cancer Society was not primarily designed to study drug-taking but leisure activities, especially smoking, alcohol consumption and the use of drugs. No attempt was made to study in depth the psycho-social background of those who experimented with drugs.

It is not surprising that Irish post-primary school-children should be exposed to the modern teenage cult of experimenting with the effects of psycho-tropic drugs besides alcohol because this trend is present throughout the western world and is a rapidly increasing problem.

In its brief to the Canadian Government in 1969 the Canadian Medical Association stated that the number of youths using psychoactive drugs had more than doubled each year since the mid-1960's despite the warnings of various authorities and the concerted efforts of law enforcement agencies (Canad. Med. Ass. J., 1969). The most consistently quoted figures suggested that some 7 to 13 per cent of high school students in North America in 1969 had had at least one experience with one of the so-called 'soft' drugs.

Fortunately, the problem in Ireland has not reached the same proportions that it has in cities in England and North America. However, the Government Working Party on the Abuse of Drugs in the Irish Republic repeatedly emphasizes the potential seriousness of the problem.

The results of this survey suggest that at the most, only 1-2 per cent of the rural post-primary schoolchildren have taken drugs and that of these, only a quarter were taking them with any degree of regularity. The indication is that drug-taking among these schoolchildren is mainly an experimentation and therefore not as yet a major problem.

The likelihood of becoming involved with drugs increased with age for both sexes and was greater for boys at all ages.

This study showed that drug abuse among the Dublin post-primary schoolchildren was twice as high as among 'their rural counterparts'; we also found that the incidence of drug abuse was higher in the larger provincial towns.

The rural schoolchildren had very little knowledge about drugs. The question of an educational policy on drugs is a controversial one. Wiener (1970) argues that until more research has been carried out, any educational campaign in schools raises more problems than it is likely to solve. There is great public interest in the problem of drug abuse in Ireland at the present time and the general opinion seems to be that schoolchildren should be provided with information on drugs. The Working Party on the Abuse of Drugs in its recent Report to the Churches in Ireland considers the arguments for and against an educational programme on drug abuse in (he schools and concludes that such a programme is necessary. It recommends that educational programmes on drug abuse should be well-planned and professionally executed and should not receive undue publicity or emphasis but should be part of existing educational courses (Report of Working Party, 1972).

The children who had taken drugs differed from the total sample in many respects. More of the drug-takers had been offered drugs and had been at a party where drugs were taken and a greater number said that their friends took drugs. These figures confirm what one would expect to find— greater exposure to drugs among the drug-takers.

Professor Eysenck hypothesizes that extraverted individuals have 'a kind of stimulus hunger' (Eysenck, 1965). Thus their 'preference for alcohol and coffee and their impulsiveness and risk-taking behaviour.' He states that cigarette smokers, on the whole, tend to show extraverted behaviour patterns. Our findings (which closely match those of Wiener's study) of higher tobacco and alcohol consumption rates among the drug-takers together with their general preference for activities outside the home, indicate an extraverted type of behaviour pattern for the drug-taking group.

Today, drug-taking is almost ubiquitous —'the totally temperate individual is statistically the deviant; it is only the type and quantity of psycho-tropic drugs used which varies' (Young, 1971). Hence, it is important to see the 'drug-problem' in Ireland in its proper perspective. The two drugs most commonly used and abused in Ireland are, of course, alcohol and nicotine (cigarettes). Cigarettes contribute greatly to the increase in death rates in middle-aged men in these islands today particularly from lung cancer and coronary thrombosis and alcohol causes much domestic and personal un-happiness and hardship. Massive advertising encourages the taking of these drugs and in 1969 approximately one in every five pounds of personal expenditure in Ireland was spent on alcohol and tobacco (Medico-Social Research Board, 1970). Furthermore, the excessive use of barbiturates and tranquillizers, usually obtained on a doctor's prescription, is a very much larger problem than the much publicized drug-taking subculture in Ireland.

If Irish society condones with relatively minor protest the taking of cigarettes and alcohol and accepts with virtually no protest the greater social costs that accrue from alcoholism, lung cancer and coronary thrombosis, why are the psychotropic drugs (other than alcohol and nicotine) receiving perhaps a disproportionate amount of publicity? The reactions of society against drug abuse are not against drugs per se but against the patterns of behaviour and cultural values of the drug-taking sub-culture. The Working Party on Drug Abuse in its Report (1971) to the Minister for Health stated that among the young people who belong to the drug-taking subculture (in Dublin) there was widespread rejection of what they considered to be the values of the larger society. They expressed discontent and disillusionment with their parents' approach to living—specially their concern with making money and possessing material goods.

Carney et al. (1972) recently reported on the social and psychological background of 50 young drug-abusers seen in Dublin in 1970. School attendance and school achievement were poor and work records were unsatisfactory. There was a higher than average incidence of serious psychiatric illness among their parents and data obtained from the 50 cases suggested that this was, generally, a personality disorder group.

In its Report to the Churches in Ireland, the Working Party on the Abuse of Drugs comments that 'deprivation leads some to the use of drugs; disillusionment leads others, but more appear to turn to them in their despair' and recommends that 'practical action should not be permitted to overshadow consideration and advocacy of comprehensive and radical social change'. In his book on the 'Social Meaning of Drug Use', Jock Young states that 'it is not merely the drug-taker but the experts, politicians and general public who must change if we are to eliminate genuinely deleterious drug use from our society'. There is an obvious need for detailed research to ascertain the social, cultural, environmental 'and other factors involved in the existence of the drug-taking subculture in Ireland.

Summary

In this study of 5851 Irish rural post-primary schoolchildren undertaken in 1970-71 by the Irish Cancer Society, the College of General Practitioners, the Economic and Social Research Institute and the Medico-Social Research Board, 1.2 per cent of the sample claimed to have taken drugs. In a comparable study of post-primary schoolchildren carried out in Dublin in 1970, 2.3 per cent of the sample said they had taken drugs. Comparing this study to the Dublin study, exposure to drugs amongst post-primary schoolchildren appeared to be twice as great in Dublin as in rural Ireland. Exposure to drugs increased with age and was more marked in the case of the boys. In both studies marijuana was the drug most commonly used. In this study, noticeable differences were found between those who had taken drugs and the total sample with regard to smoking and drinking habits, amount of pocket money and leisure activities.

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