

Recent trends in drug use at the age of 17: ESCAPAD 2000-2002

Since 2000, once a year, the ESCAPAD¹ survey has questioned all the adolescents who attend their *Journée d'appel de préparation à la défense* [call-up and preparation for defence day] (JAPD), on the Wednesday and Saturday of a given week in metropolitan France and across all the sessions from April to June in the overseas departments. This survey was set up by the OFDT [*Observatoire français des drogues et toxicomanies* – French observatory for drugs and drug addiction], with the support of the *Direction centrale du service national* [Central national service directorate] (DCSN). ESCAPAD is based on a self-administered, strictly anonymous questionnaire focusing on health, lifestyles, and the use and contexts of use of psychoactive products. The objective of this cross-sectional survey is to give accurate results across an age range which corresponds to a transition period in the trajectories of drug use. Above all, this third edition is able to show movement trends for the first time, by comparing the results observed at the age of 17² with those from ESCAPAD 2000. Finally, where possible, these figures have been compared with the surveys carried out in schools during the 1990s.

Experimentation refers to the fact of having already used a product at least once during one's life. The other use indicators focus on the past thirty days ; current use (at least one episode of use), regular use of alcohol or cannabis (at least 10 episodes of use)³, daily use (at least once per day). Even if they are the result of a reasoned choice, these thresholds are necessarily arbitrary and give an incomplete account of the diversity of usage rates, making a poor distinction between realities which are sometimes strongly contrasting.

Tobacco: recent stabilisation in experimentation and slight drop in current use between 2000 and 2002

At 17, around eight out of ten young people say that they have already smoked at least one cigarette, girls a little more often than boys: 78.9% as opposed to 75.6% ($p < 0.01$). Daily use is widespread, with no significant difference between the sexes (39.0% among girls, 40.0% among boys). When they smoke on a daily basis, boys and girls state fairly similar quantities, even if there are a few more boys who smoke more than ten cigarettes per day (29.0% as opposed to 26.0% among the daily smokers, ns) and a few more girls who smoke fewer than 5 cigarettes (35.3% as opposed to 31.3% among the daily smokers, $p < 0.05$). Thus, although tobacco is still the psychoactive product where there is the least difference in use between the sexes, a slight variance between the sexes does persist: a little more frequent experimentation among girls and a barely more pronounced daily use for boys. On average, the experimenters smoked their first cigarette at the age of 13.6 for girls and 13.4 for boys ($p < 0.05$). Those who smoke every day started this daily use just before the age of 15 (14.7 for girls and 14.6 for boys, ns).

Between the end of the 1970s and the beginning of the 1990s, the comparison between the available surveys shows a global downward trend in the use of tobacco among 12-18 year-olds (Baudier *et al.*, 1998). Between 1993 and 1999, there was an increase in this use which was visible across both the experimentation and the daily use of 14-18 year-olds. This increase is clear at all ages, particularly for girls (Choquet *et al.*, 2002).

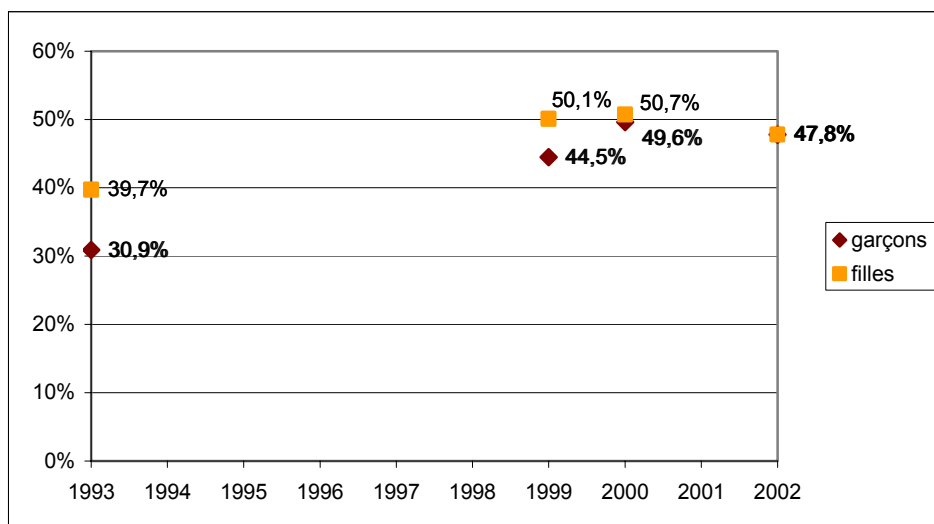
Between 2000 and 2002, experimentation with tobacco remained stable among both girls (78.9% as opposed to 79.4% in 2000) and boys (75.6% as opposed to 76.0% in 2000). On the other hand, current smoking (occasional or daily smokers) fell slightly (47.8% as opposed to 49.6% in 2000, $p < 0.01$), particularly among girls (47.8% as opposed to 50.7% in 2000, $p < 0.05$), the fall observed among boys being not significant. The future ESCAPAD exercises will make it possible to determine whether this slight change persists and indicates a long-term trend or whether it is merely a situational fluctuation.

Trend in the current use of tobacco by sex, at 17, since 1993

¹ *Enquête sur la santé et les consommations lors de l'appel de préparation à la Défense* [Health and drug use survey during conscription and preparation for defence]

² The results of the 2001 ESCAPAD survey focused on young people aged 18. They are therefore not directly comparable with the figures presented here in so far as the levels of use intersect strongly with age in adolescence.

³ For cannabis, reference will also be made to "repeated" use (at least 10 times during the year) in order to observe the trend since the beginning of the 1990s, since the question of use during the month was not posed in the first surveys.

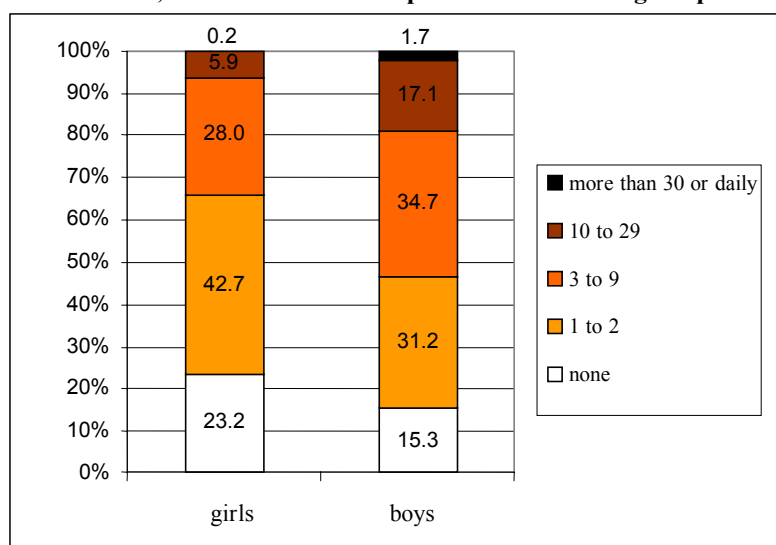


Sources: INSERM⁴ 1993; ESPAD⁵ 1999 INSERM-OFDT-MENRT⁶; ESCAPAD 2000, OFDT; ESCAPAD 2002, OFDT.

Alcohol: recent increase in regular use among boys

As is the case among adults, the use of alcohol at 17 is a more male behaviour. Although the variance between the sexes is not significant for experimentation (which affects 95.3% of boys and 94.0 % of girls), it increases with frequency of use: thus there are three times fewer girls than boys who say that they are regular users.

Alcohol use at 17, in 2002: number of episodes of use during the past 30 days



Source: ESCAPAD 2002, OFDT.

The variance in frequency of use between the sexes observed across alcohol use is also found in drunkenness: thus, at 17, boys state more often than girls that they have already been drunk during their life (62.8% as opposed to 49.1%) or during the past twelve months (55.8% as opposed to 38.2%). The average age for getting drunk for the first time is 15.0 for boys and 15.3 for girls ($p < 0.001$).

Between 2000 and 2002, the use of alcoholic drinks during the past thirty days remained stable among girls (76.8% as opposed to 77.4% in 2000) but it increased among boys (84.7% as opposed to 81.0% in 2000, $p < 0.001$), this increase being due above all to the increase in the proportion of regular drinkers (18.8% as opposed to 16.0% in 2000, $p < 0.001$). The comparisons with the earlier years proved awkward since the questions posed in 1993 and 1999 were not identical.

As for experimentation with drunkenness, this appeared remarkably stable between 2000 and 2002 among both girls (49.1% as opposed to 49.5% in 2000) and boys (62.8% as opposed to 63.2% in 2000). The number of episodes of drunkenness during the year was not asked in the 2000 ESCAPAD survey⁷. Nevertheless, it is possible to observe, at the age of 18 this

⁴ Institut national de la santé et de la recherche médicale [National institute for health and medical research]

⁵ European School Survey on Alcohol and Other Drugs

⁶ Ministère de l'Éducation nationale de la Recherche et de la Technologie [Ministry for education, research and technology]

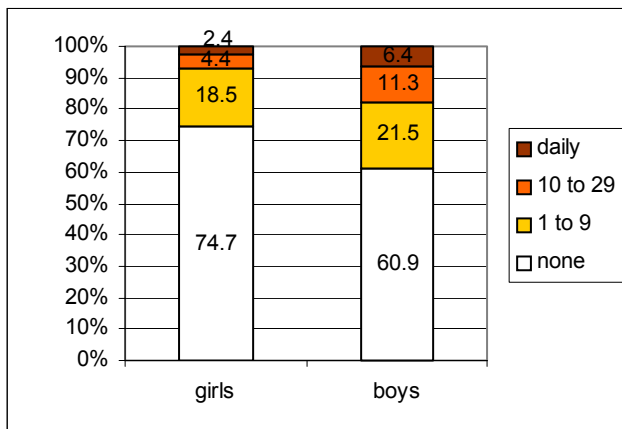
⁷ On this occasion, the question posed concerned the number of times across one's whole life.

time, that the proportion of young people who had experienced drunkenness at least ten times during the year fell between 1993 and 1999 and then increased slightly between 1999 and 2002. The fluctuations observed are slight, however, particularly for girls: this proportion varies from 10 to 14% for boys, and from 2 to 3% for girls.

Cannabis: a continual rise since the beginning of the 1990s

In the use of cannabis there is also a difference between the sexes: being experimenters more often (54.6% as opposed to 45.7%), boys are also regular users nearly three times as often (17.7% as opposed to 6.8% among girls). On average, experimentation takes place at the age of 15.2 for boys and 15.3 for girls ($p < 0.001$).

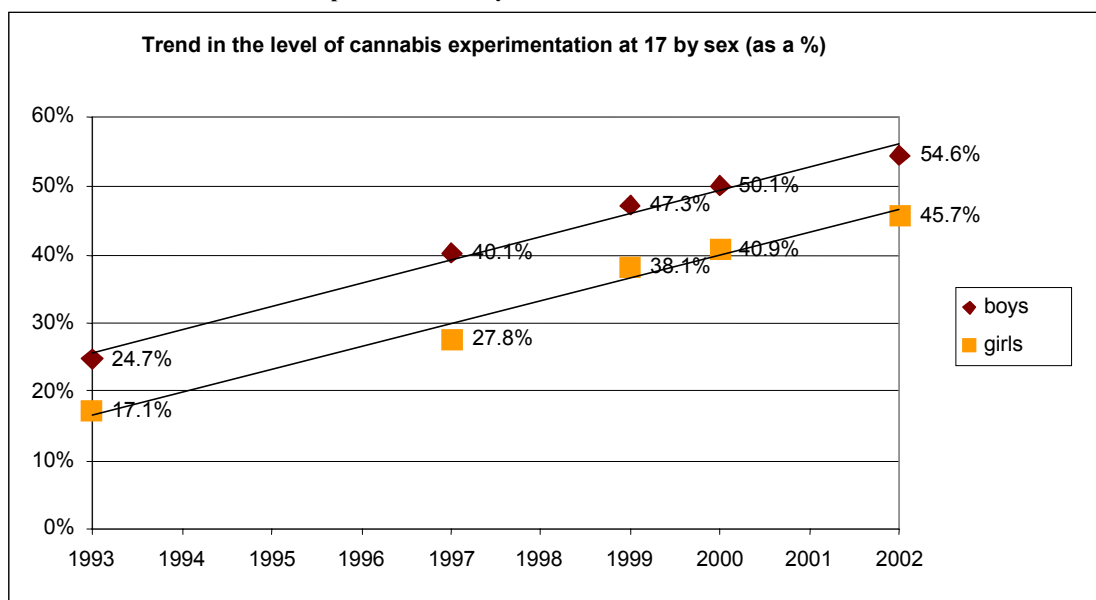
Use of cannabis at 17, in 2002: number of episodes of use during the past 30 days



Source: ESCAPAD 2002, OFDT.

The level of experimentation with cannabis more than doubled between 1993 and 2002. This trend proves to be almost linear, as is shown by observing straight regression lines among both boys and girls. The average annual increase across the whole period is thus 3.2 points for girls and 3.3 points for boys. One must, however, be careful not to extrapolate such a growth for future years, since a slight drop is to be anticipated instead given the levels already attained, which put France at the head of the European countries (Hibell *et al.*, 2000). It is probable that cannabis experimentation will reach a maximum below tobacco experimentation, although one cannot predict at what level.

Trend in the level of cannabis experimentation by sex, at 17, since 1993

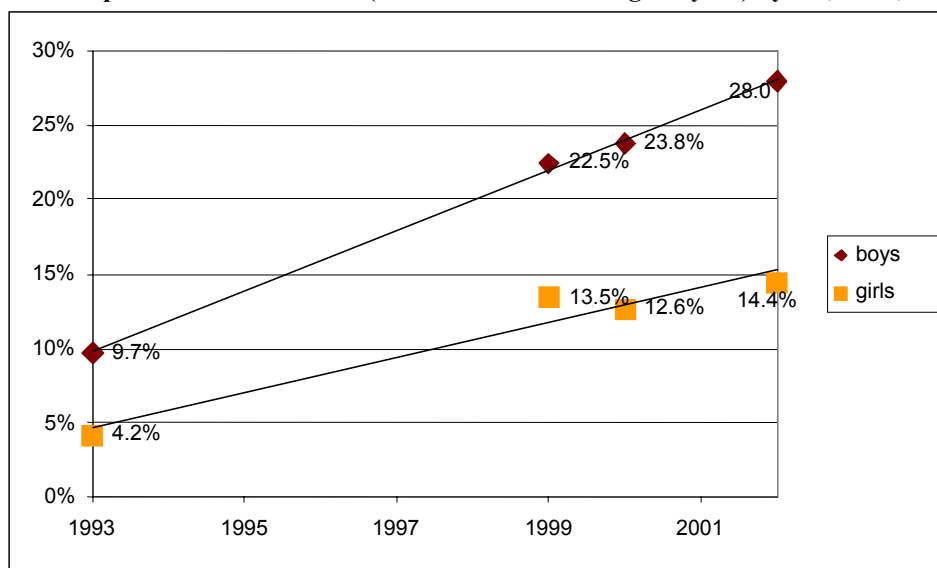


Sources: INSERM 1993; CADIS⁸-OFDT 1997 (use during the year); ESPAD 1999 INSERM-OFDT-MENRT; ESCAPAD 2000, OFDT; ESCAPAD 2002, OFDT

The increase in the repeated use (at least ten times during the year) of cannabis was even faster than the increase in experimentation during the same period: the proportion of such users more than tripled between 1993 and 2002, among both boys and girls, although the proportion among girls is still twice as small.

⁸ Centre d'analyse et d'intervention sociologique [Centre for sociological analysis and intervention].

Trend in the repeated use of cannabis (at least 10 times during the year) by sex, at 17, since 1993



Sources: INSERM 1993; ESPAD 1999 INSERM-OFDT-MENRT; ESCAPAD 2000, OFDT; ESCAPAD 2002, OFDT.

Psychotropic medicines: slight increase in experimentation

Psychotropic medicines constitute a special class of products: unlike the other substances, they can be covered by a medical prescription. In addition, their use proves above all to be female (in 2002, 30.7% of girls had already taken them during their life as opposed to 12.3% among boys). This medicine-taking was requested by a doctor in a little over half the cases, and by parents in more than a quarter, but was decided by the adolescents themselves in one out of seven cases. Between 2000 and 2002, the level of experimentation with these products increased slightly among 17 year-olds (21.4% as opposed to 19.8% in 2000, $p < 0.05$). The levels of more recent use appear similar, however, in both the surveys: 13.6% of girls and 4.2% of boys had taken such medicines during the past thirty days.

2000-2002 trend in the regular use of tobacco, alcohol, psychotropic medicines and cannabis by sex, at 17 (% in rows)

	girls		regular use (1)		total 2000	total 2002
	2000	2002	boys 2000	boys 2002		
tobacco	40.2	39.0	41.9	40.0	41.1	39.5*
alcohol	5.5	6.1	16.0	18.8***	10.9	12.6***
medicines	2.6	3.2	1.0	1.0	1.8	2.1
cannabis	5.2	6.8**	14.6	17.7***	10.0	12.3***

Reading: *, **, ***: 2000/2002 trend significant at the 0.05, 0.01, 0.001 threshold; the percentages without asterisks denote trends which are not significant at the 0.05 threshold.

(1) daily use for tobacco

Source: ESCAPAD 2002, OFDT.

Lower experimentation levels but on the increase for most other psychoactive products

Experimentation with other psychoactive products is clearly rarer and the hierarchy of products is almost the same as in 2000: barely 5% of 17 year-olds have experimented with inhalants, ecstasy, hallucinogenic mushrooms and poppers, and experimentation with amphetamines, LSD, cocaine, heroin or crack is even more marginal (between 0.7% and 2%).

Experimentation with the majority of psychoactive substances has increased since 2000, but remains at much lower levels than those for alcohol, tobacco, cannabis or psychotropic medicines. This is the case, for both sexes, for inhalants, hallucinogenic mushrooms, poppers, ecstasy and amphetamines. The level of experimentation with these last three products has even doubled for girls. Moreover, there is a slight increase in experimentation with cocaine and heroin which is restricted to boys. Although the variances are small, they are no less significant. LSD and crack remain at the very low experimentation level already seen in 2000.

**2000-2002 trend in the level of experimentation with other illicit psychoactive substances by sex, at 17
(% in rows)**

	girls 2000	girls 2002	boys 2000	boys 2002	total 2000	total 2002
inhalants	3.3 %	4.3 %*	4.9 %	6.1 %*	4.1 %	5.2 %***
hallucinogenic mushrooms	1.6 %	2.6 %**	4.5 %	5.7 %**	3.1 %	4.2 %***
poppers	1.3 %	2.6 %***	3.4 %	5.4 %***	2.4 %	4.0 %***
ecstasy	1.4 %	2.9 %***	2.8 %	5.0 %***	2.9 %	3.9 %***
amphetamines	0.6 %	1.3 %**	1.4 %	2.6 %***	1.0 %	2.0 %***
cocaine	0.6 %	0.9 %	1.3 %	2.2 %***	1.0 %	1.6 %***
LSD	0.8 %	0.9 %	1.6 %	1.7 %	1.2 %	1.3 %
heroin	0.4 %	0.6 %	0.9 %	1.4 %**	0.7 %	1.0 %*
crack	0.2 %	0.4 %	0.9 %	1.0 %	0.6 %	0.7 %

Reading: *, **, ***: 2000/2002 trend significant at the 0.05, 0.01, 0.001 threshold; the percentages without asterisks denote trends which are not significant at the 0.05 threshold.

Source: ESCAPAD 2002, OFDT.

Conclusion

ESCAPAD 2002 allows the device set up in 2000 to play its role as a barometer of drug use at the end of adolescence by updating a number of recent trends. Of these, the ones that must be remembered are the slight fall in the use of tobacco, the slight increase in the level of experimentation with psychotropic medicines and, exclusively among boys, the regular use of alcohol. The continued increase in the use of cannabis confirms a trend that was already recognised, and most of the other illicit psychoactive substances are displaying experimentation levels which are still low but on the increase. This is particularly true for inhalants, hallucinogenic mushrooms, poppers, ecstasy and amphetamines. The future ESCAPAD exercises will offer a means of checking whether these recent variations continue and materialise into a trend, or disappear. The full report, to be produced, will also provide the levels of use at the age of 18 and 19, together with a detailed exploration of the contexts of use, accompanied by a new analysis on problematic use.

Methodological indicators

The ESCAPAD survey supplements a device that comprises four-yearly surveys in schools (ESPAD, under the scientific direction of the INSERM, which was last held in 2003; HBSC⁹, carried out in 2002 under the aegis of the WHO) and a three-yearly telephone survey among 12-75 year-olds, the *Baromètre Santé* [health barometer], under the scientific direction of the INPES¹⁰, which will next be held in 2004. ESCAPAD is based on a self-administered questionnaire and is strictly anonymous. The completion process is assigned to one of the two people involved in training the attendees. This person introduces the survey (reiterating the guarantee of anonymity, the relevance of such a study and the importance of obtaining accurate and reliable responses), and distributes the questionnaires. After 25 minutes, the trainer completes a survey completion report, describing the running of the survey, then collects the questionnaires.

While benefiting from a collection method similar to that for the surveys in schools, the sample also contains young people who are not at school. Moreover, the call-up procedure, which limits the chances of young people who live in the same commune finding themselves in the same room when they are called up, guarantees a very high level of confidentiality. The questionnaire is drawn up so that a user takes around the same length of time to complete it as a non-user, in order to erase any difference between the two during the completion of the questionnaire.

The level of participation in the JAPDs is in the order of 90%, although it should be pointed out that this ratio (number of people present divided by the number of call-ups) is still lower than the reality: those called up are summoned to attend on several dates and therefore have several opportunities to sort out their situation if they did not come at the first invitation. The JAPD is in fact almost compulsory: the participants are given a certificate which they are required to present when registering for examinations or checks subject to public authority control (driving licence, baccalaureat, university exams, etc.). Certain people who are declared “definitively unfit” upon presentation of a disability card or a medical file (around 1% of those summoned to attend in 2002) obtain the certificate without participating in the day.

The questionnaire completion dates (4 and 15 May 2002) were chosen so as to avoid the school exams and an over-representation of young people whose school or work situations would be unusual. In all, 224 JAPD centres were mobilised to receive 17 207 young people: only 57 of them returned a blank form, and 370 others who did not give their sex or their year of birth were removed from the analysis. After this filtering, the useable sample stood at 16 775 adolescents in metropolitan France. The results presented here concern exclusively the 7 608 young people born in 1985, called the “17 year-olds”, namely 3 767 boys and 3 841 girls.

⁹ Health Behaviour in School-aged Children

¹⁰ Institut National de Prévention et d'Éducation pour la Santé [National institute for prevention and health education]

ESCAPAD has received the expediency notice from the *Conseil national de l'information statistique* [National council of statistical information] (CNIS) and the public statistics general interest seal from the *Comité du Label* [Seal committee], as well as the favourable opinion of the *Commission nationale de l'informatique et des libertés* [National information and liberties commission] (CNIL).

In this document, the prevalences are not given for the whole of France in order to be able to compare ESCAPAD more easily with the other surveys. Since the population of the overseas departments is lower than that of metropolitan France, including them in the calculation of global prevalences would have only a marginal impact on the results (a maximum of 1 basis point). In the overseas departments, several data-gathering sessions were required, stretching from the beginning of March to the end of May 2002. The number of young people questioned was 1 035 in Réunion, 928 in Martinique, 492 in Guadeloupe, and finally 130 (insufficient quantity for reliable statistical use) in Guyana. The results obtained in Réunion, Martinique and Guadeloupe are presented in the report.

Moreover, the degree of significance in the difference between two percentages, calculated using Pearson's Chi2 test, is presented in the following manner: ns: the difference is not significant; $p < 0.05$, $p < 0.01$, $p < 0.001$: the variance observed is significant with an error risk lower than 5%, 1% and 0.1% respectively.

ESCAPAD is also an opportunity for exchanging information: in addition to the telephone numbers and an internet address for further information on drugs or the survey, a two-page summary of the principal results from the previous year is distributed to the participants upon completion of the questionnaire. The analysis of the free comments, presented in the earlier reports shows in fact that many respondents wanted to know how their responses would be used.

For further information:

Baudier F., Janvrin M.-P., Arènes J., 1998, *Baromètre santé jeunes 97/98 [Young people's health barometer 97/98]*, Vanves, Les éditions du CFES, 328 p.

Beck F, Legleye S, *Usages de drogues et contextes d'usages à la fin de l'adolescence, évolutions récentes [Drug use and contexts of use at the end of adolescence, recent trends]: ESCAPAD 2002*, OFDT, (to be produced in 2003).

Beck F, Legleye S, Peretti-Watel P, *Alcool, tabac, cannabis et autres drogues illicites parmi les élèves de collège et de lycée [Alcohol, tobacco, cannabis and other illicit drugs among middle school and secondary school pupils]: ESPAD 1999 France*, Volume II, OFDT, February 2002, 225 p.

Choquet M, Ledoux S, Hassler C, *Alcool, tabac, cannabis et autres drogues illicites parmi les élèves de collège et de lycée [Alcohol, tobacco, cannabis and other illicit drugs among middle school and secondary school pupils]: ESPAD 1999 France*, Volume I, OFDT-INSERM, February 2002, 148 p.

Hibell B, Andersson B, Ahlström S, Balakireva O, Bjarnasson T, Kokkevi A, Morgan M, 2000, *The 1999 ESPAD Report, Alcohol and Other Drug Use Among Students in 30 European Countries*, CAN, Stockholm, 362 p.