

Drug use at the age of 18: principal results from the ESCAPAD 2001 survey

Since 2000, once a year, the *Enquête sur la Santé et les Consommations lors de l'Appel de Préparation A la Défense* [Health and drug use survey during call-up and preparation for defence] (ESCAPAD) 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. This survey replaces the annual surveys on the use of psychoactive substances which were carried out until 1996 by the armed forces health department.. ESCAPAD is based on a strictly anonymous self-administered questionnaire focusing on health, lifestyle (going out and sociability) and the use of psychoactive products. As in 2000, the objective of this cross-sectional survey is to give precise results on a limited age bracket covering the end of adolescence.

Since ESCAPAD 2001 took place only ten months after the first survey in 2000, it is not yet a question of observing trends. On the other hand, this second exercise does consolidate the results of the first.

In 2001, ESCAPAD took place in metropolitan France (around 15 000 individuals), and in the overseas departments (Réunion, Guadeloupe, Martinique and Guyana, around 2 300 individuals). The results presented here concern, for metropolitan France, young people born in 1983 (n=12 512, referred to subsequently as the "18 year-olds"), and for the overseas departments, young people born in 1983 and 1984 (referred to subsequently as the "17-18 year-olds"): n=1 095 for Réunion, n=598 for Guadeloupe, n=294 for Martinique), the number of participants in Guyana (n=98) being insufficient for any reliable statistical use.

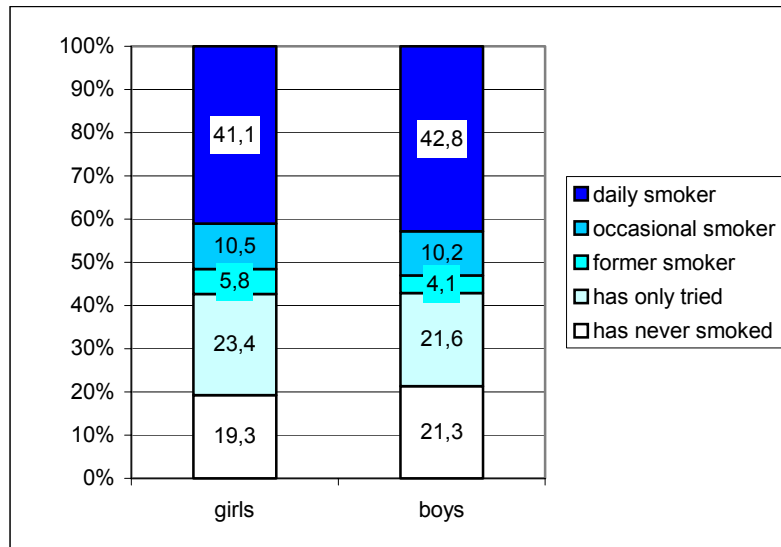
Use of psychoactive substances at the age of 18 in metropolitan France

Experimentation denotes the fact of having already consumed a product at least once during one's life. The other use indicators refer to the last thirty days: daily use of tobacco (at least one cigarette per day), regular use of alcohol or cannabis (more than 10 times). Even if they are the result of a reasoned choice, these thresholds are necessarily arbitrary and do not distinguish realities which are sometimes very different.

Tobacco

At the age of 18, girls experiment a little more frequently (80.7 %, as opposed to 78.7 % for boys), but daily use proves to be a slightly more male behaviour. The differences observed between the sexes are, however, minimum, with tobacco remaining the psychoactive product for which there is the least difference between the sexes. It is also a very addictive product: more than seven out of ten experimenters are currently smokers (daily or occasional) or have been during their life.

Past and present use of tobacco at the age of 18



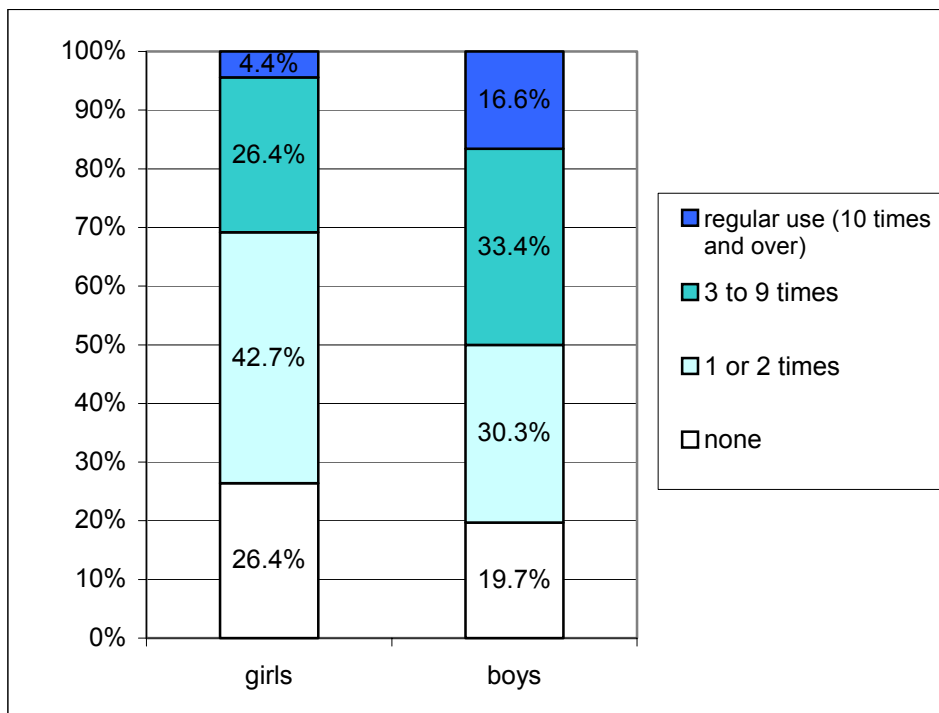
Source: ESCAPAD 2001, OFDT.

The smokers, girls or boys, state that they smoke about the same number of cigarettes per day, with a third of the daily smokers smoking more than ten cigarettes per day. On average, the experimenters smoked their first cigarette at 13.7 years of age (13.8 for the girls and 13.6 for the boys), and those who smoke every day started doing so just before the age of 15 (14.8 for the girls and 14.9 for the boys).

Alcohol

At the age of 18, alcohol is used more by males. Although the difference between the sexes is small for experimentation (93.3 % of boys as opposed to 91.9 % of girls), it increases with the frequency of use: thus, the number of girls who declare a regular use is almost four times fewer than the number of boys who do so.

Alcohol use at the age of 18 (number of episodes of use during the past 30 days)



Source: ESCAPAD 2001, OFDT.

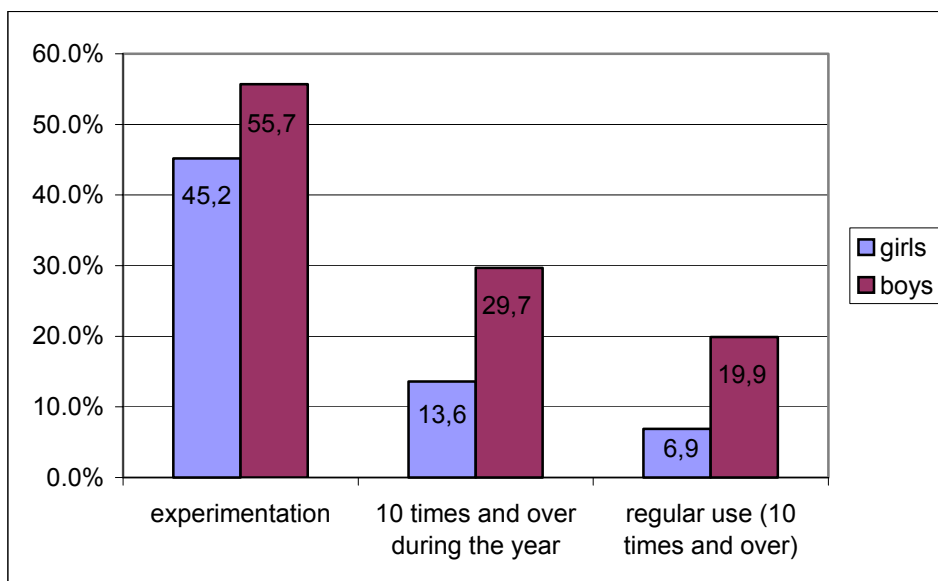
The difference in frequency of use between the sexes is, logically, also found in drunkenness: at 18, therefore, the boys state more often than the girls that they have already been drunk during their life (65.0 % as opposed to 49.9 %) or during the past 12 months (57.6 % as opposed to 39.8 %). The average age for getting drunk the first time is 15.2 for the boys and 15.6 for the girls.

Among the experimenters, the consumption of alcohol before midday is more common than solitary use: 44.8 % of the girls and 60.5 % of the boys have already drunk alcohol before midday, but only 23.3 % of the girls and 42.5 % of the boys have already drunk it alone. The repetition of these uses remains rare, however: scarcely more than 1 % of the girls and 3 % of the boys state that they have *often* consumed in these situations.

Cannabis

The use of cannabis is also different between the sexes: experimenting more frequently (55.7 % as opposed to 45.2 %), the boys are also regular users twice as often as the girls.

Cannabis use at the age of 18



Source : ESCAPAD 2001, OFDT.

On average, experimentation takes place at the age of 15.2 for the boys and 15.5 for the girls. Solitary use of cannabis and in particular before midday concerns a significant proportion of the experimenters: 46.1 % of the girls and 63.2 % of the boys who have already smoked cannabis state that they have already smoked it before midday, and 30.8 % of the girls and 55.6 % of the boys have already smoked it alone. The repetition of these cannabis uses is much more frequent than it is for alcohol uses: nearly 10 % of the girls and 20 % of the boys state that they have often smoked before midday or alone.

The other psychoactive products

At the age of 18, experimentation with other psychoactive products is clearly much rarer. Hallucinogenic mushrooms, poppers, products for inhaling and ecstasy have been experimented with by around 5 % of young people, and experimentation with amphetamines, LSD, cocaine, heroin or crack is even rarer (between 0.6 % and 2 % of young people have already tried them). Poppers (a synthesised inhalant whose sale is regulated) and hallucinogenic mushrooms are experimented with more often than other products, such as ecstasy, which receive greater media coverage. Psychotropic medicines are a little different: unlike the other substances, it is above all females who use them (without it being possible to determine here whether or not it corresponds to a medical prescription).

Experimentation with other psychoactive products at the age of 18

	girls	boys
psychotropic medicines*	31.1 %	12.4 %
hallucinogenic mushrooms	2.5 %	6. %
poppers	3.4 %	5.7 %
products for inhaling	3.7 %	5.8 %
ecstasy	2.7 %	5.0 %
amphetamines	1.2 %	2.5 %
LSD	1.3 %	2.3 %
cocaine	1.3 %	2.5 %

heroin	0.8 %	1.0 %
crack	0.6 %	1.0 %

* heading used in the questionnaire: "medicines for nerves or for sleeping". Source: ESCAPAD 2001, OFDT.

Multiple use of psychoactive substances

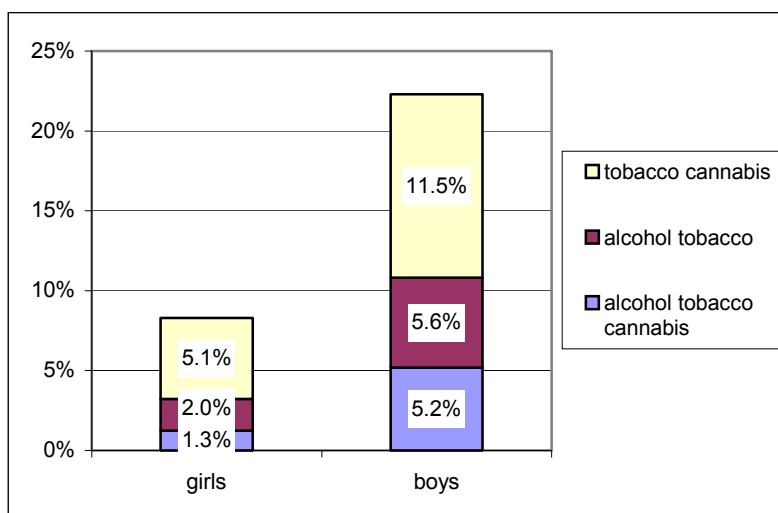
At the age of 18, more than 96 % of boys and girls have experimented with at least two psychoactive substances. However, the products in question are very few in number: in more than 95 % of cases, it involves alcohol, tobacco and cannabis. It is therefore very rare to have already consumed cannabis without having experimented with tobacco or alcohol.

Multiple use (or multiple consumption) denotes here the fact of having declared at least two uses (not necessarily on the same occasions) from among: regular use of alcohol, daily use of tobacco, regular use of cannabis.

Multiple use

At the age of 18, 8.3 % of girls and 22.9 % of boys are multiple consumers. The most common profiles are the use of tobacco and cannabis and the use of alcohol and tobacco: the product that is present most often in these uses is tobacco, ahead of cannabis and alcohol.

Multiple use of alcohol, tobacco and cannabis at the age of 18



The alcohol-cannabis combination, excluding tobacco, is too rare to be represented. Source: ESCAPAD 2001, OFDT.

Concomitant use

The notion of concomitant use is directly linked to simultaneity of use. There are more boys who state that they have already used several substances at the same time during their life (45.0 % of boys and 35.6 % of girls), principally alcohol and cannabis (39.6 % as opposed to 27.7 % of girls). Only the alcohol-medicine combination is mentioned more frequently by the girls than the boys (14.7 % as opposed to 8.6 %). The alcohol-tobacco combination was not offered, but was explicitly mentioned by the majority of the young people who wanted to mention combinations other than those on the

questionnaire, which seems to indicate that alcohol and tobacco are now considered by some young people as drugs in the same way as the other psychoactive substances.

Uses of psychoactive substances in the overseas departments at the age of 17-18

Uses of tobacco, alcohol and cannabis by the 17-18 year-olds questioned in the overseas departments* (% on line)

	tobacco				alcohol				cannabis			
	experimen- tation		daily use		experimen- tation		regular use		experimen- tation		regular use	
	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys
Réunion	63 %	60 %	19 %	19 %	83 %	80 %	1 %	4 %	20 %	32 %	0 %	6 %
Guadeloupe	53 %	63 %	9 %	13 %	90 %	93 %	1 %	7 %	14 %	33 %	1 %	5 %
Martinique	60 %	57 %	12 %	10 %	95 %	93 %	0 %	5 %	12 %	24 %	0 %	3 %
<i>metropolitan France</i>	81 %	79 %	41 %	43 %	92 %	93 %	5 %	17 %	45 %	55 %	7 %	19 %

* The number of those present in Guyana is too low to be analysed.
Source: ESCAPAD 2001, OFDT.

In the overseas departments, in order for the sample size to be sufficient, the analysis focuses on the 17-18 year-olds. In these departments, the uses turn out to be much lower than in metropolitan France, even compared with those of the 17-18 year-olds: the difference reaches 30 points for experimentation with cannabis, daily use of tobacco is two to three times rarer and regular use of alcohol more than four times rarer. Even more than in metropolitan France, experimentation with other substances here is very infrequent. ESCAPAD therefore emphasises the relative rarity of the declarations of use of psychoactive products in the overseas departments and corroborates the results obtained during the surveys in schools on the use of psychoactive substances, undertaken in Réunion (by the DRASS [*Direction Régionale des Affaires Sanitaires et Sociales* – Regional directorate for health and social affairs] St Denis in 1997)¹, in Martinique², in Guadeloupe (by the ORS [*Observatoires Régionaux de la Santé* – Regional health observatories] Guadeloupe in 1998) and in Guyana (by the ORS Guyana in 1997)³. It is possible that, in the overseas departments, the JAPD is less favourable to such declarations than in metropolitan France; however, it is unlikely that this declarative bias alone explains the scale of the differences obtained. It remains to be determined whether these differences convey different magnitudes or precocities, and whether or not they are maintained into adulthood.

¹ Catteaux *et al.*, 1998.

² OSM, 1998 ; Merle, 2001.

³ ORS Guyane, 1997.

Methodological indicators

ESCAPAD is carried out with the assistance of the *Direction Centrale du Service National* [Central national service directorate] (DCSN). It supplements a device that comprises surveys in schools (ESPAD⁴, every four years, under the scientific direction of the INSERM [National institute for health and medical research], which is next due to be run in 2003; HBSC⁵, every four years, organised under the aegis of the WHO, under the scientific responsibility of the medical service of the Toulouse Education Office and planned for 2002) as well as a triennial telephone survey among 12-75 year-olds, the *Baromètre santé* [Health barometer], under the scientific direction of the CFES [*Comité français d'éducation pour la santé* - French centre for health education], which will next take place in 2003.

ESCAPAD is an annual survey. The principal amendments made to the 2001 questionnaire focus on sociability and leisure activities: on the one hand going to music and sports events (as a spectator), and on the other the frequency of contacts with friends by telephone (mobile or fixed) and of time spent with friends in bars, in the evenings, or outdoors. These themes are studied in the report.

The level of participation in the JAPDs is in the order of 90 %, bearing in mind that this ratio (number of people present divided by the number of call-ups) underestimates the reality: those called are called up on several dates, and therefore have several opportunities to sort out their situation if they did not come at the first call-up. 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 exam, university exams, etc.). Certain people, who are declared to be "definitively unfit" upon presentation of a disability card or a medical file (illness, handicap, etc.), obtain the certificate without participating in the day, but they represent around 1 % of those called up in 2001.

ESCAPAD questions a not inconsiderable proportion of young people who are not at school while benefiting from a collection method similar to the one for the school surveys; moreover, the DCSN 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 excellent confidentiality. The questionnaire is drawn up so that a user takes about the same length of time to fill it in as a non-user does, so as to avoid making the difference between them visible while they are completing it in.

In metropolitan France, the dates for the questionnaire are chosen in consultation with the DCSN, so as to avoid the school exams and the recruitment of an abnormally large number of young people whose school or work situations would be unusual. On 24 and 28 March, 245 JAPD centres were mobilised to receive 15 582 young people. The 293 questionnaires in which the sex or the year of birth were not filled in were removed from the analysis, and 100 other questionnaires were excluded because non-responses meant that no use could be defined in the course of their life for at least two

⁴ European School Survey on Alcohol and Other Drugs

⁵ Health Behaviour in School-aged Children

products from among tobacco, alcohol and cannabis. After this filtering, the useable sample stood at 15 189 adolescents, 12 512 of whom were born in 1983 (8888 girls and 3624 boys)⁶.

In the overseas departments, several sessions of data gathering were needed: 6 for Réunion (from 7 April to 12 May, 1207 people present), 8 in Guadeloupe (from 17 March to 12 May, 771 people present), 3 in Martinique (from 24 March to 21 April, 347 people present). The numbers of useable questionnaires from young people born in 1983 and 1984 are (after filtering): 1 095 in Réunion, 598 in Guadeloupe, 294 in Martinique, and finally 98 in Guyana (which does not allow statistically reliable use).

In this document, the prevalences are not given for the whole of France, so as to be able to compare the overseas departments more easily with metropolitan France; since the population of the overseas departments is lower than that of metropolitan France, taking them into account in the calculation of global prevalences would have only a marginal impact on the results (a maximum of 1 basis point). Out of a concern for economy, statistical significances are not indicated: except where explicitly mentioned, all the differences are significant at the 5 % threshold, and usually at the 0.1 % threshold.

ESCAPAD is also an opportunity for exchanging information: in addition to telephone numbers and an internet address for further information on drugs or the survey, a two-page summary of the principal results of the previous year is distributed to the participants after completion of the questionnaire. The analysis of the free comments, presented in the 2000 and 2001 reports, shows in fact that many people wanted to know how their responses would be used.

For further information:

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.

Beck F, Legleye S, Peretti-Watel P, *Santé, mode de vie et usages de drogues à 18 ans : les résultats de l'enquête* [Health, lifestyle and drug use at the age of 18: the survey results] *ESCAPAD 2001*, OFDT, April 2002, 196 p.

Catteau C., Le Bot F., Ragache N. *Tabac, alcool, drogues : enquête épidémiologique auprès des jeunes scolarisés en 4ème, seconde et terminale à l'île de la réunion en 1996-1997* [Tobacco, alcohol, drugs: epidemiological survey among young people in the fourth, second and final year of school on Réunion Island in 1996-1997] , DRASS St-Denis, 1998, 84 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.

⁶ This imbalance results from an administrative constraint: the way it is structured means that the call-up number for girls is higher than that for boys, which means that the girls tend to be summoned at the end of term (here, end of March).

Guilbert P., Baudier F., Gautier A. (dir), *Baromètre santé* [Health Barometer] 2000, Vanves, CFES, 2001.

Merle S., "Conduites addictives chez les jeunes martiniquais [Addictive behaviour in young people from Martinique]" in *Les Actes de la 6ème Conférence Régionale de Santé* [The proceedings of the 6th regional health conference], *Direction de la Santé et du Développement Social de la Martinique* [Department of health and social development of Martinique], 14 December 2001.

Peretti-Watel P, Beck F, Legleye S, *Les consommations de produits psychoactifs, à la fin de l'adolescence à la Réunion, en Guadeloupe et en Martinique, Exploitations locales de l'enquête ESCAPAD 2001* [Use of psychoactive products at the end of adolescence in Réunion, Guadeloupe and Martinique, local use of the ESCAPAD survey 2001], OFDT, 2001, resp. 31, 31 and 23 p.

OSM (Observatoire de la Santé de la Martinique) [Martinique health observatory], *Evaluation de la consommation de tabac, alcool et drogues illicites en milieu scolaire* [Evaluation of the use of tobacco, alcohol and illicit drugs in schools] – flash no.19 – April 1998.

ORS Guyana, *Les adolescents et la santé, Bulletin Santé n°2* [Adolescents and health, health bulletin no. 2] – December 1997.

Salem G, Rican S, Kürzinger ML. *Atlas de la santé en France, Vol 2 : Les états de santé* [Atlas of health in France, Vol 2: the state of health]. To be produced.