

New Brunswick Student Drug Use Survey



New Brunswick

2007 Student Drug Use Survey - Highlights Report

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We would like to gratefully acknowledge the help and dedication of the Community Addiction Workers in the regional coordination and implementation of this survey in New Brunswick. We would like to thank the Vice Presidents of community based services and Directors of Addiction and Mental Health Services within the RHA's and the staff of the New Brunswick Provincial Epidemiology Service for their continued dedication to this project. We would also like to thank the Youth Addiction Workers and staff from Addition Services, the English and French School Districts, and the principals and teachers across New Brunswick for their effort and co-operation. Most importantly, we thank the students for participating and ensuring the success of this project.



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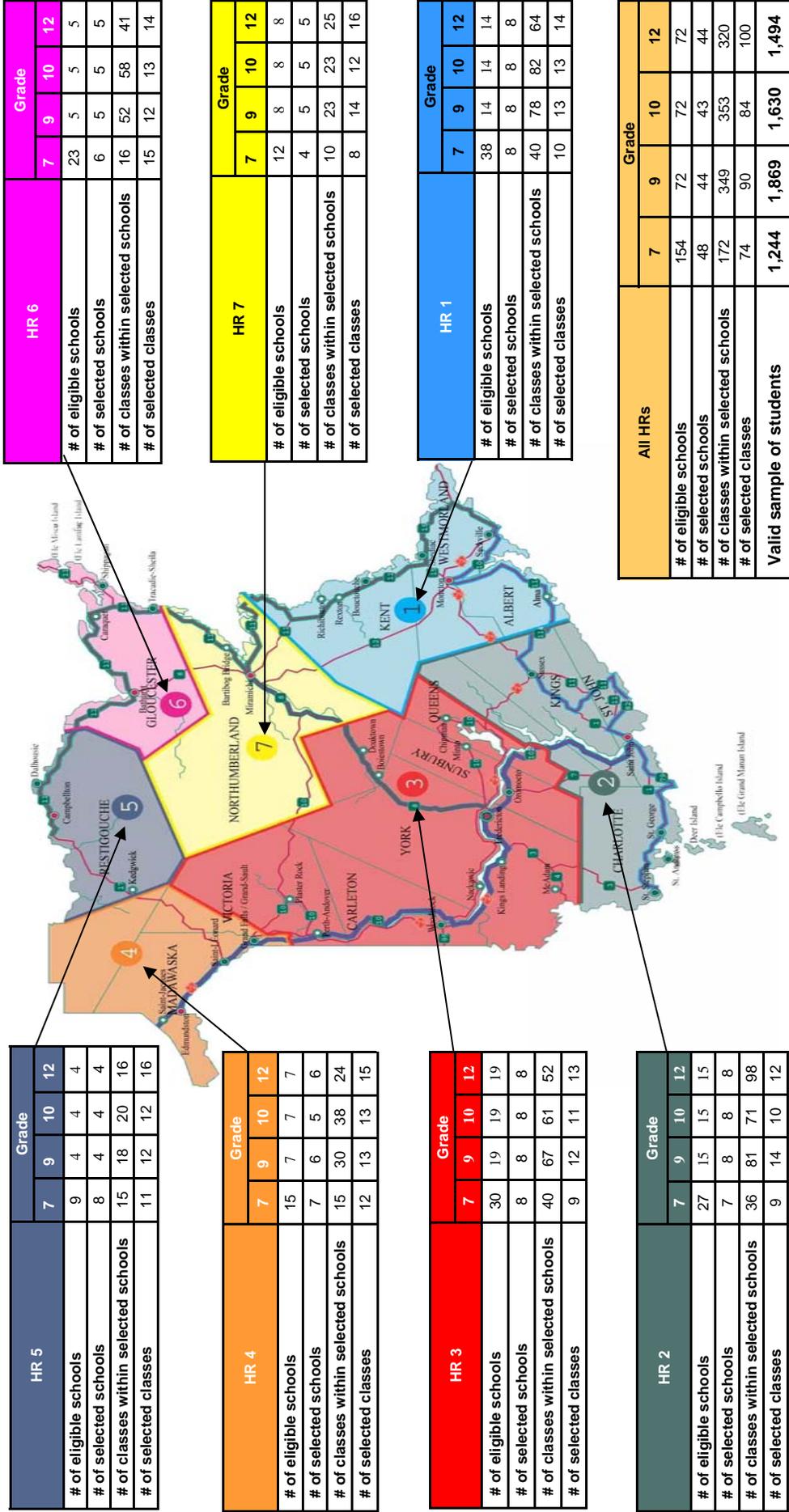


Figure 1: Eligible schools, classes and selected schools, classes by Health Regions (HRs)

OVERVIEW

The *2007 New Brunswick Student Drug Use Survey (NBSDUS)* is part of a coordinated Atlantic Canada initiative, which gathers information regarding substance use, gambling, mental health, and associated risk behaviors among adolescent students across the entire province. This is the fourth collaboration in the Atlantic Provinces since 1996.

The results in this *Highlights* report are from **6,237** randomly selected students in Grades 7, 9, 10, and 12 who completed the questionnaire. Similar to previous surveys, the most commonly used drugs in adolescent students are still alcohol, tobacco, and cannabis.

Overall, this survey revealed decreases from 2002 to 2007 in the prevalence of cannabis, cigarette, and other drug uses (Table 1). In particular, significant decreases were observed in the use of cannabis (e.g., **35%** vs. **25%**), cigarette (**21%** vs. **12%**), psilocybin/mescaline (**12%** vs. **5%**), non-medical amphetamines and Ritalin (**11%** vs. **3%**). Compared to the *2002 NBSDUS*, the prevalence of alcohol use remained relatively stable (**50%** vs. **53%** for alcohol), whereas ecstasy use had slightly increased over the five-year period (**5%** vs. **4%**). Three percent (**3%**) of students reported that they used methamphetamines at least once, and approximately **3%** of students used cocaine/crack in the year prior to the survey.

Regarding associated risk behaviors, in the past year, about 1 out of 20 students with a driver's license drove a motor vehicle within

an hour of having consumed alcohol. Approximately 1 out of 3 students who reported using alcohol had at least one alcohol related problem. Moreover, 1 out of 6 students reported being a passenger at least once with an impaired driver.

About 1 out of 10 *high school* students engaged in unplanned sex because they were under the influence of a substance, at least once during the course of the year. One out of four female and one out of five male *high school* students had more than one sexual partner of the opposite sex in the year prior to the survey. In addition, 1 out of 5 students did not use a condom while engaged in sexual intercourse.

For gambling (e.g., scratch tabs and bingo), more than half (**59%**) of adolescent students participated in at least one gambling activity in the year prior to the survey, and nearly 1 in 4 students were involved in gambling more than once per month.

With respect to mental health, **71%** of students reported having had *Minimal* depressive symptoms, **18%** for *Somewhat elevated*, and **4%** for *Very elevated* depressive symptoms in the 7 days prior to the survey. In total, **4%** reported having had Attention-Deficit/Hyperactivity Disorder (ADHD) symptoms 6 months before the survey.

The majority of students did not feel they needed help, while a small proportion of students (**2%**) felt they did need help for alcohol consumption, cigarette smoking, other drug use, and gambling; about half of the students who needed help actually sought it.

Seventy-six percent (**76%**) of students reported that their school had a rule against using tobacco on school property or at school events, and **63%** had at least one class regarding decision-making, peer pressure, assertiveness or refusal skills in this school year.

In terms of the substance use among adolescents in Atlantic Canada, the prevalence of substance use among the four provinces (NS, PEI, NL, and NB) was not statistically different from each other; however, for certain substances such as cannabis, inhalants, and cocaine, the prevalence of these substances was lower in NB and PEI than that in NS and NL.

SURVEY METHODS

This is the fourth application of the standardized, self-reported student drug use survey in the Atlantic Provinces. The survey was conducted in Nova Scotia, Prince Edward Island, Newfoundland and Labrador, and New Brunswick in the spring of 2007.

The *2007 NBSDUS* is a province-wide survey of students in the public school system in Grades 7, 9, 10, and 12 ranging from 11 to 19 years of age. The students attending private school, street youth, dropouts, and adolescents absent from school on the day of the survey were not included in the sample frame. Two-stage cluster sampling was used to randomly select schools and classes, where the schools were treated as the first stage of cluster and the classes within the

selected schools were sampled as the second stage of cluster. The probability proportional to size sampling (PPS) was utilized to select schools in each Health Region and the simple random sampling (SRS) was implemented at the class level.

By design, a total of 8,042 students were randomly selected from 84 eligible schools and 348 classes with an overall 12% absenteeism rate during the survey. Seven thousand forty-nine (7,049) students were present on the day of the survey and 6,654 of them completed the survey questionnaire. After exclusion of 417 students (a small number of schools had participation rates too low to be considered representative of their student body), **6,237** adolescents remained in the final sample which represented 38,031 of the total students in Grades 7, 9, 10, and 12. Moreover, compared to 2002, the sample size in this survey was increased by 62% (2,383 students) in order to obtain reliable information from each individual Health Region.

The 2007 questionnaire consisted of 98 items and one open-ended question. Information was collected on demographics, social economic status, substance use, gambling, sexual behaviors, mental health (depression and screening test for Attention-Deficit/Hyperactivity Disorder), help-seeking, and school drug education and rules. Two different versions of the questionnaire were administered to students in NB. The questionnaire for Grade 7 did not include the questions on sexual-risk behaviors, which were contained in the questionnaire for Grades 9, 10, and 12. Participation was voluntary, anonymous, and confidential.

In this *Highlights* report, *tobacco* refers to cigarette use. *Smoking* refers to smoking more than one cigarette in the year prior to the survey; and, *frequent use* refers to smoking more than 10 cigarettes a day. *Alcohol* refers to beer, wine, coolers, or hard liquor (rum, whiskey, vodka, gin, etc.). *Any use* refers to consuming alcohol within the year prior to the survey ranging from less than once per month to daily alcohol use; *frequent use* of alcohol is defined as consuming alcohol more than once per month. For all other drugs, *any use* refers to consuming the drug on one or more occasions within the 12 months prior to the survey; and, *frequent use* refers to consuming more than once per month. In addition, a 12-item version of the Center for Epidemiological Studies-Depression Scale (scores 0-36) was used to

access depressive symptoms. The three categories of elevated depressive symptoms include: *Minimal* depressive symptoms (scores 0 to 11); *Somewhat elevated* depressive symptoms (scores 12 to 20); and *Very elevated* depressive symptoms (scores 21 to 36).

This *Highlights* reports the results from New Brunswick on the prevalence of substance use among adolescent students. *Weighted* estimates of the prevalence of substance use and the corresponding 95% confidence intervals were used for comparisons by grade and gender. Detailed information will be available in the *2007 New Brunswick Student Drug Use Survey: Technical Report*.

"I think students should be more educated about the dangers caused by some drugs and the effects that getting drunk or high could have on you. Long term or short term."

Female, Grade 10

"Most of the education we get is about sex or sometimes the use of alcohol. I don't think I've ever learned much about the use of drugs. Drugs are a major problem in this city but I don't think others see it. I would say more people drive under the influence of drugs than alcohol here."

Female, Grade 12

"I used to smoke cannabis early in the year (jan.06) but quit in the summer... if that counts for anything."

Male, Grade 12

"I don't believe that smoking weed should be bordered and frowned upon. It's proven that it does not hurt you as much or nearly as much as smoking tobacco and drinking alcohol. Almost all of my friends do it and we're all attending University come [sic][‡] fall (some with scholarships). There are too many myths about pot."

Male, Grade 12

[‡]: Represents spelling mistake in the original quotation.

FINDINGS

Alcohol, tobacco, and cannabis were the substances most commonly used by adolescent students in NB.

Table 1: Alcohol, tobacco, and other drug use in the year prior to the survey among Grades 7, 9, 10, and 12 students in 1998*, 2002*, and 2007[§]

Substances	Percentage of substance use					
	1998 (N=3,298)		2002 (N=3,854)		2007 (N=6,237)	
	%	95% CI	%	95% CI	%	95% CI
Alcohol	55.6	53.0 - 58.2	53.2	51.1 - 55.3	50.0	47.4 - 52.5
Cannabis	30.6	28.5 - 32.7	34.9	32.9 - 37.0	25.1	23.2 - 27.0
Cigarette	32.2	30.1 - 34.4	20.7	18.9 - 22.5	12.4	11.0 - 13.8
Psilocybin/Mescaline	9.3	8.3 - 10.4	11.6	10.4 - 12.8	4.8	4.1 - 5.5
Ecstasy	N/A	N/A	4.0	3.3 - 4.7	4.4	3.7 - 5.1
LSD	10.9	9.8 - 12.0	5.2	4.3 - 6.1	3.4	2.7 - 4.0
Solvents or Inhalants	5.5	4.7 - 6.4	5.3	4.5 - 6.1	2.8	2.3 - 3.2
Cocaine/Crack	4.0	3.2 - 4.8	3.6	2.9 - 4.3	2.7	2.1 - 3.2
Methamphetamines	N/A	N/A	N/A	N/A	2.5	2.1 - 3.0
Tranquilizers, non-medical use	3.8	3.0 - 4.5	5.0	4.3 - 5.7	2.4	1.9 - 2.8
Amphetamines, non-medical use	N/A	N/A	10.9	9.8 - 12.0	2.4	2.0 - 2.9
Ritalin, non-medical use	N/A	N/A	5.8	4.9 - 6.7	2.0	1.6 - 2.5
Steroids	2.2	1.7 - 2.7	2.8	2.2 - 3.4	1.6	1.3 - 2.0

*: Previous student drug use survey.

[§]: The prevalence of substance use and the corresponding 95% confidence interval were estimated using SAS.

"I do not do drugs, use tobacco, or drink alcohol [sic], and I do not drive yet."

Female, Grade 7

"I think it's dumb to do drugs."

Female, Grade 7

"There should be more questions about aggressive behavior."

Male, Grade 9

"My siblings do drugs."

Female, Grade 10

CHARACTERISTICS OF STUDENTS

Table 2: Demographic characteristics of students in Grades 7, 9, 10, and 12

	Number of students (N=6,237)	Percentage (%)
Gender		
Male	2,987	47.9
Female	3,231	51.8
Grade[†]		
7 (12.4 yrs old)	1,244	19.9
9 (13.9 yrs old)	1,869	30.0
10 (15.5 yrs old)	1,630	26.1
12 (17.5 yrs old)	1,494	24.0
Language		
English	3,220	51.6
French	3,017	48.4
Age		
12 or less	663	10.6
13-14	1,504	24.1
15-16	2,453	39.3
17-18	1,533	24.6
19 +	71	1.1
Grade point average		
60% or higher	5,247	84.1
Less than 60%	239	3.8
Not stated or do not know	690	11.1

†: Average age.

“Some people use Alcohol and drugs responsibly so that it does not affect their schoolwork. Also, many people have a positive attitude to alcohol therefore, to loosen up they have a few drinks. It may be stupid, but it’s true.”
Female, Grade 9

“Any of the drugs I have done or do, I do because I choose to not because I am addicted. My only addiction is smoking ciggerettes [sic]! I don't need drugs or alcohol to have fun!”
Female, Grade 10

Table 3: Socio-economic characteristics of students in Grades 7, 9, 10, and 12

	Number of students (N=6,237)	Percentage (%)
Student's living arrangement		
Mother and father	4,232	67.3
Mother only	829	13.4
Father only	195	3.0
Mother and step-father	562	9.3
Father and step-mother	116	2.0
Alone or with friends	33	0.5
Other	206	3.5
Student's driver's license status		
No license	4,456	74.9
Beginner's or temporary license	550	8.4
Less than 1 year	409	5.4
1 to 2 years	627	8.6
3 or more years	129	1.6
Student's mother's highest level of education		
Graduated university	1,801	30.4
Attended but did not graduate university	165	2.9
Graduated college or trade school	1,103	17.0
Attended but did not graduate trade school	70	1.1
Graduated high school	1,332	21.0
Attended but did not graduate high school	449	6.2
Did not attend high school	106	1.6
Do not know	1,086	18.0
No mother	37	0.6

"I have a lot of friends who have done it at least once. Trying to stop them doesn't work. Classes don't work. They do it because they want to and because they're curious. They later get dumped and regret everything."

Female, Grade 9

"I believe the answers to these questions would greatly vary from an academic course's students to a shop class's students. ex. people in chemistry 121 would be less likely to use drugs/alcohol than those in engines 120."

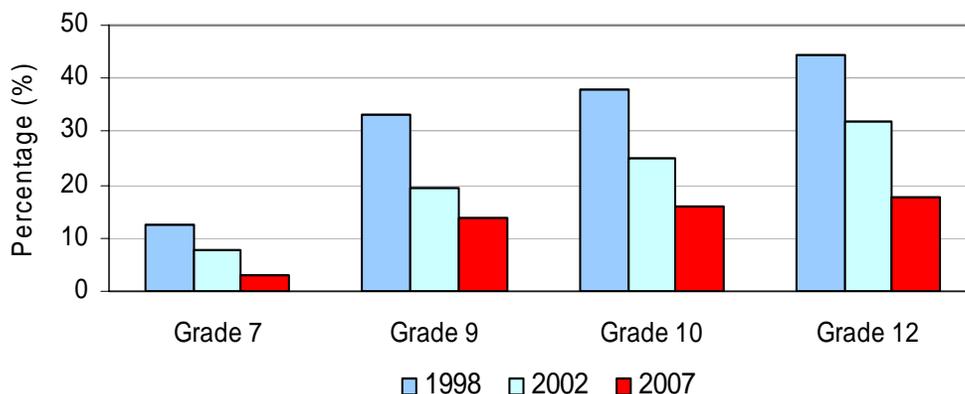
Male, Grade 12

TOBACCO

Table 4: Tobacco use in the year prior to the survey and a comparison with previous surveys

2007	1998 and 2002
<p><i>Overall</i></p> <ul style="list-style-type: none"> • 12% of students reported smoking cigarettes more than once. • 2% of participants reported smoking 10 or more cigarettes per day. 	<ul style="list-style-type: none"> • A systematic decreasing trend was observed in the use of tobacco compared to 1998 (32%) and 2002 (21%).
<p><i>Gender</i></p> <ul style="list-style-type: none"> • The percentages of tobacco use observed for males (13%) and females (12%) were similar. 	<ul style="list-style-type: none"> • The gap between male and female tobacco use diminished in contrast to previous surveys, e.g., in 1998 (30% for males and 35% for females), and in 2002 (18% and 23%).
<p><i>Grade</i></p> <ul style="list-style-type: none"> • The use of tobacco increased with grade level: Grade 7: 3% Grade 9: 14% Grade 10: 16% Grade 12: 18% 	<ul style="list-style-type: none"> • Figure 2 shows that the percentages of tobacco use decreased in all four grades compared to the previous surveys.

Figure 2: Cigarette smoking by grade and year



"I believe there is too much tobacco at the school, and students aren't getting enough exercise."

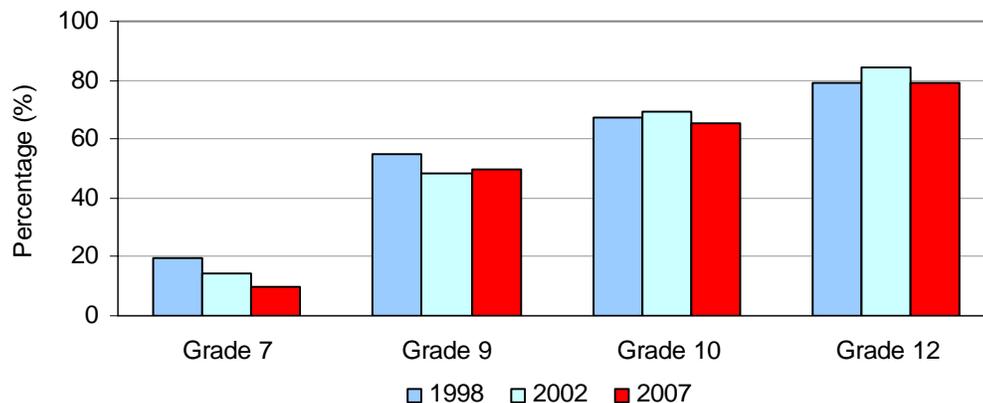
Female, Grade 10

"I'm an off and on chewing tobacco user."

Male, Grade 10

ALCOHOL**Table 5: Alcohol use in the year prior to the survey and a comparison with previous surveys**

2007	1998 and 2002
<p><i>Overall</i></p> <ul style="list-style-type: none"> • 50% of students reported drinking alcohol at least once. • 26% of students consumed alcohol more than once per month. 	<ul style="list-style-type: none"> • The use of alcohol remained at a level similar to what was observed in 1998 (55%) and 2002 (53%).
<p><i>Gender</i></p> <ul style="list-style-type: none"> • The percentages of alcohol consumption were the same for both males (50%) and females (50%). 	<ul style="list-style-type: none"> • The difference in alcohol use decreased for both genders compared to previous surveys, e.g., in 1998 (56% for males and 55% for females), and in 2002 (50% and 55%).
<p><i>Grade</i></p> <ul style="list-style-type: none"> • Alcohol use increased with grade level: Grade 7: 10% Grade 9: 49% Grade 10: 66% Grade 12: 79% 	<ul style="list-style-type: none"> • Figure 3 illustrates that the use of alcohol increased with grade level. A decreasing trend was shown in grade 7 across all three drug use surveys.

Figure 3: Any use of alcohol by grade and year

"The questions were fine, but stupid if you don't drink or smoke which I don't!"

Female, Grade 9

"I do not drink anymore it's been sence [sic] 2005."

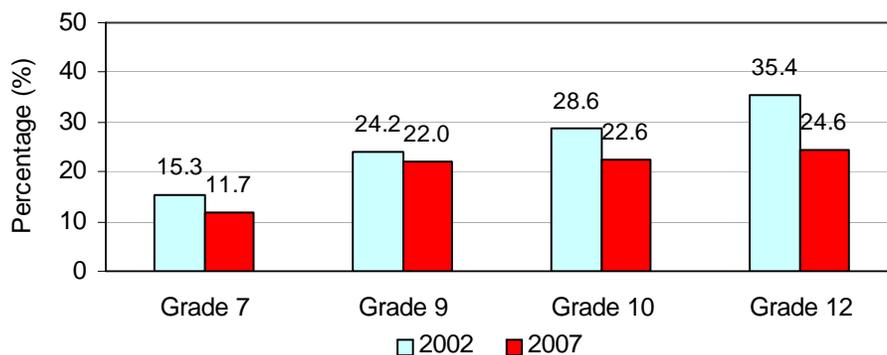
Male, Grade 10

ALCOHOL AND DRIVING

Table 6: Alcohol and motor vehicle driving in the year prior to the survey and a comparison with 2002

	2007	2002
<i>Overall</i>	<ul style="list-style-type: none"> • 5% of participants had driven a motor vehicle within an hour of drinking two or more drinks of alcohol at least once. • 20% reported being a passenger with an impaired driver. • Among frequent users, 1% reported having been a driver in a motor vehicle accident after having drunk two hours prior to the accident. 	<ul style="list-style-type: none"> • The percentage of driving a motor vehicle within an hour of drinking two or more drinks of alcohol decreased compared to 2002 (9%). • Being a passenger with an impaired driver also decreased from 2002 (26%). • Among frequent users, a slight decrease in motor vehicle accident after having drunk was observed in contrast to 2002 (2%).
<i>Gender</i>	<ul style="list-style-type: none"> • More males (7%) than females (3%) reported driving a motor vehicle within an hour after two or more drinks of alcohol. 	<ul style="list-style-type: none"> • Similar to 2002, a higher percentage of males were likely to drive a motor vehicle within an hour after alcohol use.
<i>Grade</i>	<ul style="list-style-type: none"> • Driving under the influence of alcohol increased with grade level: Grade 7: 1% Grade 9: 4% Grade 10: 5% Grade 12: 12% 	<ul style="list-style-type: none"> • The percentages of being a passenger with an impaired driver decreased in all four grades (Figure 4).

Figure 4: Passenger with impaired driver by grade and year

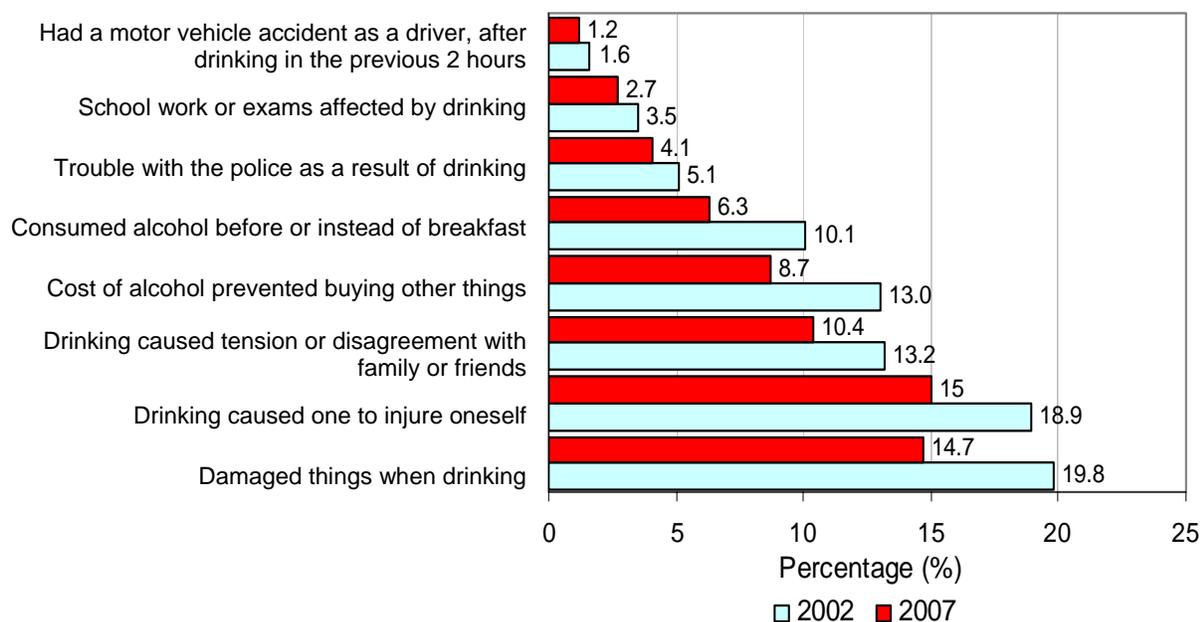


ALCOHOL RELATED PROBLEMS

Table 7: Alcohol related problems in the year prior to the survey and a comparison with 2002

2007	2002
<p><i>Overall</i></p> <ul style="list-style-type: none"> • Among students who used alcohol in the 12 months prior to the survey, 35% had at least one or more alcohol related problems. • The most common alcohol related problems were <i>damaging things</i> (15%) and <i>injuring oneself</i> (15%) after drinking. 	<ul style="list-style-type: none"> • The alcohol related problems among students who used alcohol in the past year decreased from 42% (2002) to 35% (2007). • As illustrated in Figure 5, <i>damaging things</i> and <i>injuring oneself</i> after drinking were still the most common alcohol related problems compared to 2002 (e.g., 20% for the former and 19% for the latter).

Figure 5: Students with problems related to alcohol use by year



"I would like to point out that yes I do drink but never have been to the point of being drunk."
Male, Grade 12

"I have only tried Alcohohal [sic] once. Only a sip."
Male, Grade 12

ALCOHOL, DRUGS AND SEXUAL BEHAVIOR

Table 8: Alcohol, drugs, and sexual behavior in the year prior to the survey and a comparison with 2002 among students in *Grades 9, 10, and 12*

	2007 [¶]	2002
<i>Overall</i>	<ul style="list-style-type: none"> • 45% of students reported having sexual behavior (35% for vaginal, 8% for anal, and 41% for oral). • 27% of students engaged in unplanned sex. In addition, 12% having unplanned sex were under the influence of alcohol or drug use. • 16% did not use a condom the last time that they engaged in sexual intercourse. Moreover, 11% of students were under the influence of alcohol or other drugs during their last sexual encounter. • 85% had heterosexual orientation, less than 1% for homosexual, and 2% for bisexual. 	<ul style="list-style-type: none"> • The percentage of students who engaged in unplanned sex was significantly lower than that from 2002 (51%). • Students (28%) tended to be more likely to use a condom in the last time they had sexual intercourse compared to 2002 (22%).
<i>Grade</i>	<p>Sexual activity increased with grade level (vaginal, anal, and oral):</p> <p>Grade 9: 21%, 7%, and 28% Grade 10: 33%, 7%, and 40% Grade 12: 57%, 9%, and 61%</p>	<ul style="list-style-type: none"> • Figure 6 shows that sexual activities increased with grade level in this survey.

[¶]: A new version of sexual behavior questions was included in the survey.

Figure 6: Sexual activity for high school students by grade



SEXUAL BEHAVIOR

Table 9: Had sex without planning and under the influence of alcohol and drugs in the year prior to the survey among students in Grades 9, 10, and 12

	Overall (%)	Grade 9 (%)	Grade 10 (%)	Grade 12 (%)
Never	57	71	60	35
Did not have unplanned sex	14	7	14	22
Did have unplanned sex but not after alcohol or drug use	15	11	15	20
Had unplanned sex after alcohol or drug use	12	7	9	21

"If the person is having unprotected sex (without latex) and only have [sic] one partner. Consider the fact that the person may be on the birth control pill."

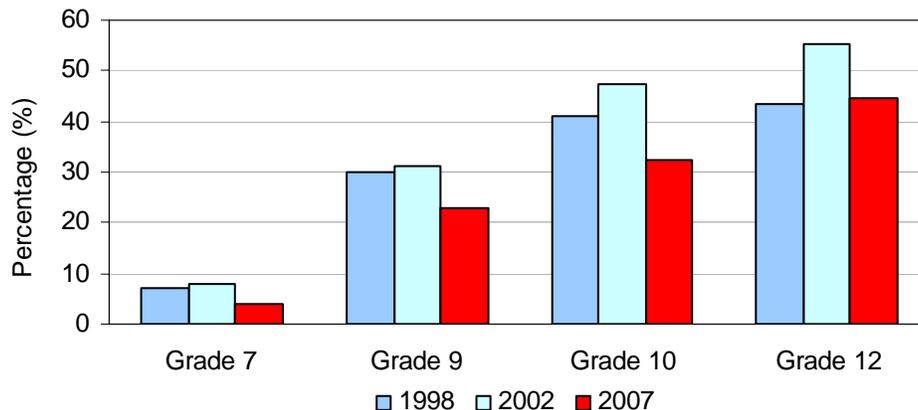
Female, Grade 10

"I think that the questions in this survey about sexual activity should be scanned closely. I think something should be done about the sexual activity at such a young age. We should have more public speakers on how unsafe it is rather than having one in class in the school system that you don't have to take."

Female, Grade 12

CANNABIS**Table 10: Cannabis use in the year prior to the survey and a comparison with previous surveys**

2007	1998 and 2002
<p><i>Overall</i></p> <ul style="list-style-type: none"> • 25% of students used cannabis at least once. • 11% reported that they used cannabis more than once per month. 	<ul style="list-style-type: none"> • A significant decrease in cannabis use was observed compared to previous surveys, e.g., 31% in 1998 and 35% in 2002.
<p><i>Gender</i></p> <ul style="list-style-type: none"> • A higher percentage of cannabis use was observed (27%) in males than in females (23%). • More males (14%) than females (9%) used cannabis more than once per month. 	<ul style="list-style-type: none"> • The gap between male and female cannabis use was similar to 1998 (33% for males and 28% for females), and slightly increased compared to 2002 (35% and 36%, respectively).
<p><i>Grade</i></p> <ul style="list-style-type: none"> • Cannabis use increased with grade level: Grade 7: 4% Grade 9: 23% Grade 10: 33% Grade 12: 45% 	<ul style="list-style-type: none"> • The percentage of cannabis use increased with grade level across three drug use surveys. In addition, a systematic decreasing trend was shown in all four grades compared to 2002 (Figure 7).

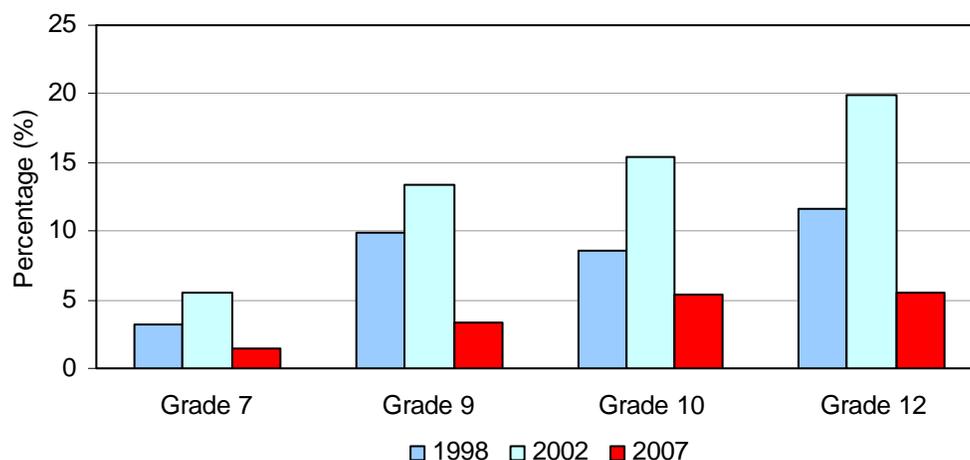
Figure 7: Cannabis use by grade and year

OTHER DRUGS

Table 11: Stimulant (*non-medical* use of amphetamines and/or Ritalin) use in the year prior to the survey and a comparison with previous surveys

	2007	2002
<i>Overall</i>	<ul style="list-style-type: none"> • 3% of students reported amphetamines use at least once. • 2% used Ritalin at least once. • 4% reported using either amphetamines or Ritalin at least once. 	<ul style="list-style-type: none"> • The percentages of amphetamines and Ritalin use significantly decreased with respect to 2002 (11% for the former and 6% for the latter). • The use of either amphetamines or Ritalin also showed a substantial decrease from 2002 (13%).
<i>Gender</i>	<ul style="list-style-type: none"> • The percentage of amphetamines or Ritalin use was similar between males and females (3% vs. 3% for amphetamines, and 3% vs. 2% for Ritalin). 	<ul style="list-style-type: none"> • The gap between male and female stimulant use was comparable to 2002 (14% for males and 13% for females).
<i>Grade</i>	<ul style="list-style-type: none"> • Stimulant use varied by grade level: Grade 7: 2% Grade 9: 4% Grade 10: 6% Grade 12: 6% 	<ul style="list-style-type: none"> • Figure 8 illustrates a significantly decreasing trend in stimulant use among students across all four grades as well as three drug use surveys.

Figure 8: Stimulant use by grade and year

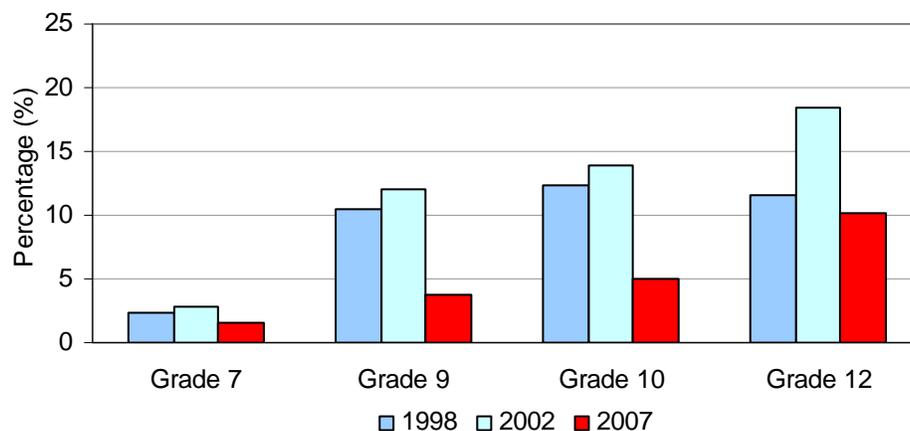


PSILOCYBIN / Mescaline

Table 12: Psilocybin/Mescaline drug use in the year prior to the survey and a comparison with previous surveys

	2007	1998 and 2002
<i>Overall</i>	<ul style="list-style-type: none"> • 5% of students used psilocybin/mescaline at least once. 	<ul style="list-style-type: none"> • The percentage of psilocybin/mescaline use decreased compared to 1998 (9%) and 2002 (11%).
<i>Gender</i>	<ul style="list-style-type: none"> • More males (7%) than females (3%) reported having used these drugs. 	<ul style="list-style-type: none"> • The gap between male and female psilocybin/mescaline use was similar to previous surveys, e.g., in 1998 (11% for males and 8% for females), and in 2002 (13% and 10%, respectively).
<i>Grade</i>	<ul style="list-style-type: none"> • Psilocybin/mescaline use increased with grade level: Grade 7: 2% Grade 9: 4% Grade 10: 5% Grade 12: 10% 	<ul style="list-style-type: none"> • Psilocybin/mescaline use decreased in all four grades compared to the previous surveys (Figure 9).

Figure 9: Use of Psilocybin/Mescaline by grade and year



"I have tried drugs but just once so I could see what they are about but now I know there [sic] bad."

Male, Grade 9

"Once you start doing drugs you never really stop. Even 6 months without them and you would do it [sic] again."

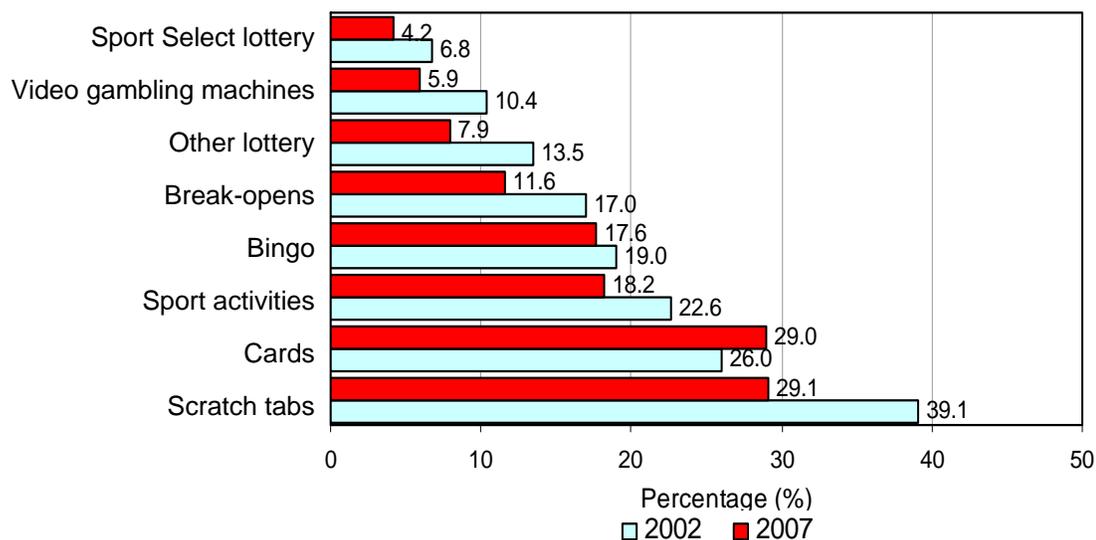
Female, Grade 10

GAMBLING

Table 13: Gambling activities in the year prior to the survey and a comparison with 2002

	2007	2002
<i>Overall</i>	<ul style="list-style-type: none"> • 59% of students reported some gambling. • 24% of students gambled at least once per month. • The two most common forms of gambling were <i>scratch tabs</i> (29%) and <i>playing cards for money</i> (29%). 	<ul style="list-style-type: none"> • The overall percentage of gambling activities was similar to 2002 (58%). • The same proportion of students was involved in gambling at least once per month in contrast to 2002 (24%). • The most popular gambling activities were still <i>scratch tabs</i> and <i>playing cards for money</i>.
<i>Gender</i>	<ul style="list-style-type: none"> • More males (67%) than females (53%) were involved in gambling activities. 	<ul style="list-style-type: none"> • The gap between male and female gambling activities was similar to previous survey.
<i>Grade</i>	<ul style="list-style-type: none"> • Gambling activities increased with grade level: Grade 7: 47% Grade 9: 60% Grade 10: 65% Grade 12: 67% 	<ul style="list-style-type: none"> • The proportion of gambling activities among students were comparable to 2002 (Figure 10). In addition, similar to 2002, a significant increase in gambling activities was observed among <i>high school</i> students.

Figure 10: Gambling activities among students by year



DEPRESSION AND ATTENTION-DEFICIT / HYPERACTIVITY DISORDER (ADHD)

Table 14: Depressive symptoms and Attention-Deficit / Hyperactivity Disorder (ADHD) based on screening tool, among students in Grades 7, 9, 10, and 12

<p style="text-align: center;">Depression (7 days prior to the survey)</p>	<p style="text-align: center;">ADHD (6 months prior to the survey)</p>
<p><i>Overall</i> • 71% of students reported having been <i>minimal</i> depressed in the 7 days before the survey, 18% for <i>somewhat elevated</i>, and 4% for <i>very elevated</i> depressive symptoms.</p>	<p>• 4% of students reported having had ADHD symptoms.</p>
<p><i>Gender</i> • More males (78%) than females (66%) reported having <i>minimal</i> depression, and less males than females felt <i>somewhat</i> (13% vs. 22%), and <i>very</i> (2% vs. 6%) depressed.</p>	<p>• More males (5%) than females (3%) had ADHD symptoms.</p>
<p><i>Grade</i> • Depression by grade level (<i>minimal, somewhat, and very</i>)</p> <p style="padding-left: 40px;">Grade 7: 72%, 13%, and 2% Grade 9: 66%, 21%, and 5% Grade 10: 73%, 17%, and 5% Grade 12: 75%, 19%, and 3%</p>	<p>• ADHD symptoms by grade level:</p> <p style="padding-left: 40px;">Grade 7: 3% Grade 9: 5% Grade 10: 4% Grade 12: 3%</p>

“I feel depressed because I spend most of my free time doing homework, and stressed out if I think that I won’t get it done. I don’t feel like I have much allowance for the things I enjoy.”
Female, Grade 9

“I am [sic] ADHD that is why I’m fidgety.”
Male, Grade 10

“The servers [sic] really help my feeling thank [sic] so much tyl [sic].”
Female, Grade 9

“I have anxiety. So towards the end of the survey that’s what got me the most.”
Male, Grade 10

SCHOOL DRUG EDUCATION RULES, AND HELP-SEEKING

Students were asked how many classes on decision-making they had during the school year and whether their school has a rule against using tobacco on school property or at school events. Some of the results are described below:

A higher proportion of students in grade 7 (**72%**) than those in grades 9 (**62%**), 10 (**65%**), and 12 (**50%**) reported having received education on decision-making, peer pressure, assertiveness or refusal skills during the school year.

Seventy-six percent (**76%**) of students (66%, 74%, 77%, and 91% for grades 7, 9, 10, and 12, respectively) indicated that their school had a policy against using tobacco on school property or at school events, whereas **4%** reported that their school did not have a policy, and **14%** did not know.

For help-seeking, approximately **2%** of students reported needing help for alcohol use (1.4%), cigarette smoking (2.7%), gambling (0.5%), and other drugs (2.2%) in the year prior to the survey. Of those, **1%** actually sought help (0.5% for alcohol use, 1.2% for cigarette, 0.3% for gambling, and 1.1% for other drugs).

SUBSTANCE USE IN THE ATLANTIC PROVINCES

Overall, the percentages of substance use among adolescents in NB were similar to the other three provinces. However, in most circumstances substance use was less common among students in NB than in NS.

Compared to the 2002 SDUS, the percentage of alcohol consumption in PEI, NS, and NB was relatively stable; however, cigarette smoking decreased across the Atlantic Provinces among adolescents. In addition, a decreasing trend in the prevalence of cannabis use among adolescents was also shown across PEI, NS, and NB (NL did not participate in the previous collaboration).

In contrast to the 2002 SDUS, all three provinces (PEI, NS, and NB) had a substantial decrease in the reporting of psilocybin/mescaline and non-medical stimulant use, e.g., the percentage of non-medical stimulant use in NB decreased from **13%** in 2002 to **4%** in 2007.

"I feel the use of CANNABIS once in awhile isn't bad, if you have a lot of problems, they help. You guys don't know why people do drugs, you just ask IF they do them."

Male, Grade 9

RECOMMENDATIONS

The 2007 NBSDUS represents the standardized approach to gathering information on alcohol, tobacco, and drug use, among adolescent students across all seven Health Regions in New Brunswick and has led to the following recommendations:

Recommendation 1:

Continued support for resources relating to prevention initiatives addressing substance use among youth as well as intervention initiatives that seek to help those adolescents experiencing negative consequences as a result of their choice to engage in substance use.

As shown, a large proportion of New Brunswick's youth choose not to engage in the harmful use of substance. The continued support of prevention, education, and awareness programs which engage youth in discussion, experiential learning, and problem solving will provide the necessary tools and information for these and other youth to continue to make responsible choices.

Youth who are harmfully involved in substance use present a challenge to those responsible for helping them make healthier choices. Parents/guardians, schools, communities, and governments should continue to support and educate students in making healthier decisions relating to their substance use. Services offered such as school based youth addiction workers facilitate the students ability to access services required to meet their needs.

Recommendation 2

Standards, clear outcomes, and associated measures should be established in the evaluation of initiatives addressing alcohol, tobacco, drug use, and mental health.

The coordination of the standardized student drug use survey provides a unique opportunity for Atlantic Canada to monitor and evaluate the addictions-related health outcomes among adolescents. On the basis of shared information, inter-provincial collaboration can be formed to address some common identifiable problems.

Recommendation 3

The major findings from the 2007 Student Drug Use Survey should be communicated to key stakeholders throughout the province.

Students, parents/guardians, teachers, schools, communities, government agencies, and policy makers should be informed about the trends in substance use among adolescents, as well as drug education and prevention strategies. Understanding these trends will help us identify substance use related problems and will assist in the planning, resource allocation, and implementation of effective prevention initiatives and treatment programs focused on addressing identified needs.

Recommendation 4

The standardized student drug use survey should be repeated in the Atlantic Provinces every three to four years.

More detailed information will be available in the *2007 New Brunswick Student Drug Use: Technical Report*. To obtain additional copies of the *Highlights* report, contact:

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