



The Scottish  
Government

# 2010/11 Scottish Crime and Justice Survey: Drug Use

Crime and Justice



**2010/11 SCOTTISH CRIME AND JUSTICE SURVEY:  
DRUG USE**

**Scottish Government Social Research**

**2012**

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## Scottish Crime and Justice Survey (SCJS) publications

The 2010/11 Scottish Crime and Justice Survey: Main Findings was published on November 1<sup>st</sup> 2011. In addition to this report which focuses on illicit drug use, two other supplementary reports on the subjects of partner abuse and sexual victimisation and stalking are available.

The dates of SCJS publications are pre-announced and can be found via the UK National Statistics Publication Hub:

<http://www.statistics.gov.uk/hub/index.html>

Copies of this report and other SCJS related Scottish Government publications are available from the Scottish Government's survey website:

<http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/crime-and-justice-survey>

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<p>This report is a National Statistics output produced to the highest professional standards and free from political interference. It has been produced by Scottish Government social researchers in Justice Analytical Services.</p>
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## Conventions used in figures and tables

The following conventions are used in the figures and tables for this report, including the annexes.

### ***Figures and tables***

Each figure or table has a title (1), the data source (survey and year) (2), a base definition and the unweighted base figures (3), and the SPSS data file variable name (4).<sup>1</sup> For example:

1. **Figure 2.4: % of adults aged 16 or over reporting drug use ever by drug used**
2. SCJS 2010/11
3. Base: Adults aged 16 or over (10,999)
4. Variable name: *QEVE*

### ***Unweighted base***

All SCJS percentages and rates presented in the figures and tables are based on weighted data (see Annex 2 for further details). However, figures and tables show the unweighted base above the figure or below the table which represents the number of respondents interviewed in the specified group.

### ***Percentages***

Row or column percentages may not add to 100 per cent due to rounding.

Most figures / tables present cell percentages where the figures refer to the percentage of respondents that have the attribute being discussed. The complementary percentage to add to 100 per cent may not be shown. Respondents could refuse to answer any question they did not wish to answer. The majority of questions also had a 'don't know' option. Percentages are often not shown for these response categories.

A percentage may be quoted in the report text for a single category that is identifiable in the figures / tables only by summing two or more component percentages. In order to avoid rounding errors, the percentage has been recalculated for the single combined category and therefore may differ by one percentage point from the sum of the percentages derived from the figures / tables.

Percentages in the figures in the main body of the report are displayed to one decimal place.

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<sup>1</sup> The SPSS variable name is also often the question name.

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## Executive Summary

### ***Introduction***

The Scottish Crime and Justice Survey (SCJS) is a large-scale continuous survey measuring people's experience and perceptions of crime in Scotland, based on approximately 13,000 in-home face-to-face interviews conducted annually with adults (aged 16 or over) living in private households in Scotland. The results are presented in a series of reports including this report on the extent of self-reported illicit drug use. The 2010/11 survey is the third year of the SCJS, with the first being conducted in 2008/09, although crime and victimisation surveys have been carried out in Scotland since the early 1980s.

Information on experience of illicit drug use was collected through the self-completion section of the questionnaire, which was completed by 10,999 (85%) of the 13,010 respondents to the main SCJS questionnaire.

This report identifies the extent of self-reported illicit drug use *ever*, in the *last year* and in the *last month* and examines the experience of first drug use and drug use in the last month by adults aged 16 or over.

### ***Prevalence of illicit drug use in Scotland***

#### Self-reported drug use

The SCJS 2010/11 estimated that:

- Almost one in four (**23.7%**) adults in Scotland, aged 16 years and over, had taken one or more illicit drug *at some point in their lives*, even if it was a long time ago;
- **6.6%** of adults had used one or more illicit drug in the *last year*, i.e. the 12 months prior to the survey interview;
- **3.5%** of adults had used one or more illicit drug in the *last month*, i.e. the month prior to the survey interview.

#### Types of drugs reported

**Cannabis** was by far the most commonly reported drug in any of the 3 time periods asked about:

- 21.6% of adults had taken cannabis *at some point in their lives*;
- Around one in seventeen (5.6%) adults reported using cannabis in the *last year*;
- 3.0% of adults reported using cannabis in the *last month*.

The next most common drugs that adults reported they had *ever* taken were:

- Amphetamines (7.8%);
- Ecstasy (7.2%);
- Cocaine (7.1%);
- Poppers (6.4%).

Cocaine and ecstasy were the next most commonly reported drugs used after cannabis in the *last year* (1.9% and 1.4% respectively) and in the *last month* (0.7% and 0.6% respectively).

### Demographic variations

**Men reported higher levels of illicit drug use than women** including:

- Around three in ten (29.1%) men reported taking an illicit drug *at some point in their lives* compared with just under two in ten (18.7%) women;
- The percentage of men (9.5%) who reported using one or more illicit drug in the *last year* was more than twice as high as the percentage of women (3.9%) who reported this;
- 5.3% of men compared with 1.8% of women reported the use of one or more illicit drug in the *last month*.

The prevalence of self-reported illicit drug use by adults *at some point in their lives* was most common amongst the 16-24 and 25-44 age groups (37.2% and 38.1% respectively). Reported use of illicit drugs in the *last year* and in the *last month* was higher for 16-24 year olds (20.3% and 9.8% respectively) than for 25-44 year olds (9.2% and 5.1% respectively). Reported drug use was lower for all time periods among 45-59 year olds and decreased further among those aged 60 or over.

### Trends in self-reported drug use over time

Self-reported drug use among adults aged 16 or over in Scotland has decreased between 2008/09 and 2010/11. 6.6% of adults reported using drugs in the *last year* in 2010/11 compared with 7.2% in 2009/10 and 7.6% in 2008/09. Similarly 3.5% of adults reported using drugs in the *last month* in 2010/11 compared with 4.2% of adults in 2009/10 and 4.4% of adults in 2008/09. These decreases are statistically significant.

In 2010/11, fewer adults self-reported that they had used **ecstasy** in the *last year* (1.4%) compared with 2009/10 (1.9%) and 2008/09 (1.8%).

A significantly lower percentage of adults reported taking **cocaine** in the *last year* in the SCJS 2010/11 (1.9%) compared with in 2008/09 (2.7%). Cocaine use in the *last year* has remained stable between 2009/10 (2.1%) and 2010/11.

Prevalence of drug use among adults aged 16-59 in the *last year* has steadily decreased from that reported in the Scottish Crime and Victimization Survey (SCVS) in 2006. 12.6% of adults reported using drugs in the *last year* in 2006 compared to 10.3% in the SCJS 2008/09, 9.8% in the SCJS 2009/10 and 9.1% in the SCJS 2010/11.

Compared to 2008/09, drug use in the *last year* among 16-24 year olds has reduced from 23.5% to 20.3% in 2010/11. Drug use in the *last year* among adults aged 16-24 has remained stable between 2009/10 (20.2%) and 2010/11.

### Trends in self-reported drug use in Scotland compared with England and Wales

The percentage of 16-59 year olds reporting they had taken any illicit drug *at some point in their lives* was lower in Scotland than across England and Wales.

In contrast, the percentage of 16-59 year olds taking any illicit drug in the *last year* or *last month* was similar in Scotland to England and Wales.

### Being offered drugs

Around one in nine (11.6%) adults reported that someone had offered to give or sell them at least one type of illicit drug in the *last year*.

- 43.4% of those offered an illicit drug in the *last year* had used an illicit drug in the *last year* and 55.9% had not.

The percentage of adults being offered drugs in the *last year* has decreased between 2008/09 and 2010/11. 11.6% of adults in Scotland reported that they had been offered drugs in the *last year* in 2010/11 compared to 13.7% in 2008/09 and 12.9% in 2009/10.

## ***The experience of adults reporting drug use***

### Drug most commonly reported

Of adults, who had used at least one illicit drug *at some point in their lives*, almost three in ten (27.8%) reported using at least one drug in the *last year*.

- More than eight in ten (83.6%) of those who had used any illicit drug in the *last year* had used **cannabis** in that time.

Of those who had used any illicit drug in the *last year*, around half (51.5%) had used an illicit drug in the *last month*.

- Almost nine in ten (87.2%) of those who had used any illicit drug in the *last month* had used **cannabis** in that time.

Of adults who reported that they had used any drugs in the *last month*, four in five (80.2%) reported **cannabis** as the drug they had taken most often in that period.

#### Frequency of drug use

Half (49.1%), of those adults who reported using an illicit drug in the *last month*, had used their only / most frequently used drug on at least a weekly basis, including around a quarter (24.3%) who had done so every day or almost every day.

#### Dependency on drugs

Of those who had used an illicit drug in the *last month*, almost a quarter (24.4%) reported that they had felt dependent on the drug they used *most often in the last month* while over seven in ten (73.7%) said they had not.

Three in ten (29.7%) said they had tried to cut down on their use of the drug they used *most often in the last month*, but found they could not, while over two thirds (67.3%) said they had not tried to cut down.

Around one in eight (12.7%) of those who had used an illicit drug in the *last month* had, in that period, felt dependent on the drug they used *most often in the last month* and had tried to cut down on its use, but found they could not.

#### Polydrug use / mixing alcohol and drugs among recent users

Over a third (34.3%) of adults who had used at least one illicit drug in the *last month* reported some kind of polydrug use involving that drug ever:

- Over seven in ten (73.0%) of those who had ever mixed the drug they used *most often in the last month* with any other drug, had ever mixed other drugs with **cannabis**, reflecting the predominance of that drug as the drug used *most often in the last month*.
- Other drugs that adults were most likely to have ever mixed with the drug they used *most often in the last month* were **ecstasy** (52.5%) or **cocaine** (50.0%) which reflects the drugs most commonly reported in the survey.

Of the adults who had used at least one illicit drug in the *last month*, the majority (84.6%) reported drinking alcohol *at some point in their lives* while taking the drug they had used *most often in the last month*.

#### First drug use

Late teens (16-19 years) was the most common age for first using drugs. Of the adults who had ever used drugs, over half (51.3%) reported first trying illicit drugs at this age. A quarter (24.7%) of those who had ever used drugs first tried them when they were under 16.

Reflecting its dominance, **cannabis** was the first drug tried by more than three quarters (78.3%) of those who had ever used any illicit drug.

## 1 Introduction

The Scottish Crime and Justice Survey (SCJS) is a large-scale continuous survey measuring people's experience and perceptions of crime in Scotland. The survey is based on 13,000 in-home face-to-face interviews with adults (aged 16 or over) living in private households in Scotland.

The main aims of the SCJS are to:

- Provide a valid and reliable measure of adults' experience of crime, including services provided to victims of crime;
- Examine trends in the number and nature of crime in Scotland over time;
- Examine the varying risk of crime for different groups of adults in the population;
- Collect information about adults' experiences of, and attitudes to, a range of crime and justice related issues.

The main findings for 2010/11 are presented in a series of four reports. This report presents the key findings about illicit drug use collected through the self-completion section of the survey. A Technical Report and User Guide are also available.<sup>2</sup>

The SCJS is the only source of information on self-reported drug use among the general adult population of Scotland as a whole (Box 1.1). Information on experience of illicit drug use was collected through the self-completion section of the questionnaire, which was completed by 10,999 (85%) of the 13,010 respondents to the main SCJS questionnaire.

The data for the survey are available on the UK Data Archive in SPSS format.<sup>3</sup> The analysis in this report is not exhaustive, and readers are encouraged to conduct their own analysis of the primary data. Supporting documentation for the survey, as well as generic teaching datasets, is also provided on the UK Data Archive.

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<sup>2</sup> The SCJS 2010/11 Main Findings report and related publications are available on the 'publications' section of the Scottish Government website: <http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/Publications/publications> The SCJS also has a dedicated website: <http://www.scotland.gov.uk/scjs>.

<sup>3</sup> The UK Data Archive's website is at: <http://www.data-archive.ac.uk/>.

## 1.1 Background

The main aim of the self-completion illicit drug use questions was to establish whether adults aged 16 or over reported using any of 16 specified drugs either at *some point in their lives*, in the *last year* and in the *last month*. In addition to the 16 drugs included in the previous surveys, in 2010/11 5 previously legal 'new' drugs were added to the survey for the first time (see section 1.4). These were BZP, GBL, khat, mephedrone and synthetic cannabinoids. Those who had used any types of drugs were asked a series of follow-up questions to provide more detail about being offered drugs, the first drug they used, and the drug used *most often in the last month*. Further details of the questionnaire content can be found in Annex 2, section A2.2.

### Box 1.1: SCJS data on self-reported illicit drug use in Scotland

The SCJS is the only source of information and trend data on self-reported **illicit** drug use in the general adult population at national level in Scotland.<sup>4</sup>

The Scottish Government's Drugs Strategy,<sup>5</sup> *The Road to Recovery* (2008),<sup>6</sup> recognises that recovery from drug use must be tailored to the needs of individuals and highlights the importance of a strong evidence base. A review of the evidence base exploring what works in recovery from drug use was published by the Scottish Government in September 2010 (Best, *et al*, 2010). However, continued, up-to-date and accurate information on the prevalence of drug use in Scotland is vital in allowing government and other stakeholders to respond promptly and appropriately, and in informing the successful delivery of the drugs strategy.

This report provides information which is of use to national and local policy makers, practitioners, NHS and voluntary service providers to help build a picture of drug use in the general population and provide evidence on the latest trends in drug use for prevention / education work and service-planning purposes.

## 1.2 Methodology

The SCJS was sampled from private residential addresses in Scotland using the Royal Mail Postcode Address File (PAF). One adult aged 16 years or over per household was then randomly selected for interview. As the survey only included private residential addresses, it is acknowledged that it can under-represent key groups who are likely to use illicit drugs (section 1.3).

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<sup>4</sup> While drugs such as valium or temazepam were included in the list of drugs asked about in the questionnaire, the question wording emphasised that only details of drugs *not given on prescription* were of interest.

<sup>5</sup> See the Scottish Government website: <http://www.scotland.gov.uk/Topics/Justice/law/Drugs-Strategy>.

<sup>6</sup> Available from the Scottish Government website:  
<http://www.scotland.gov.uk/Publications/2008/05/22161610/0>.

Questions on illicit drug use were included in the self-completion section of the questionnaire, which was undertaken at the end of the main SCJS interview. Respondents were handed the interviewer's tablet computer and guided by the interviewer through a series of practice questions which explained how to use the computer. Where respondents were unable or unwilling to use the tablet computer themselves, interviewers administered the interview, showing the respondent the screen and helping them to input their answers.

Participation was voluntary, with 10,999 (85%) of the 13,010 respondents to the main survey completing the self-completion questionnaire. Non-response was higher among adults aged 60 and over (see Annex 2, section A2.5 for further details).

A more detailed explanation of the methodology for the survey can be found in Annex 2, and the accompanying Technical Report.<sup>7</sup>

### **1.3 Limitations of the data**

Self-reporting drug surveys are valuable in providing information on drug use when there are few other sources of available data about the population as a whole. However, it is recognised that such surveys do have limitations.

First, it is likely that there will be an under-representation of some groups who take drugs. In part, this will be due to the fact that some people who use drugs may live in accommodation not covered by a survey of private households (such as the SCJS) including, for example, hostels, prisons and student halls of residence. The survey is likely to under-represent those with the most problematic or chaotic drug use, some of whom may live in accommodation previously described and some of whom may live in private households covered by the survey, yet they may be rarely be at home or be unable to take part in an interview due to the chaotic nature of their lives.

Secondly, despite using Computer Assisted Self-completion Interviewing (CASI) for this module, it is likely there will be a certain amount of under-reporting of illicit drug use among survey respondents. Illicit drug use is an illegal activity and as such some individuals may have felt uncomfortable reporting that they have taken illicit drugs, despite reassurances about confidentiality and anonymity.

Thirdly, questions cover past use over varying periods (*ever*, in the *last year* and in the *last month*) and it is possible that some respondents may simply forget occasional uses of a certain drug, particularly if they last took it a long time ago.

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<sup>7</sup> The Technical Report is available from the Scottish Government website: <http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/crime-and-justice-survey>.

While under-reporting of drug use on surveys such as the SCJS is almost certain, it should be noted that the issues discussed above are unlikely to apply equally across all types of drugs. While a survey such as the SCJS is likely to provide an insight into the more commonly used drugs, in particular cannabis, it may be less effective in providing information for some of the Class A drugs such as opiates or crack cocaine, where a sizeable number of those using these drugs may be concentrated in small sub-groups of the population not covered by the survey (Smith *et al.*, 2011).

In addition, while under-reporting is by far the main limitation of this type of household survey, it is also recognised that some people may report taking drugs when they have not actually done so for a number of reasons. To try and counter this mis-reporting, a non-existent drug (semeron) was included in the list of drugs presented to respondents. Including the name of a fictitious drug is a technique that is commonly used in drug surveys (see for example Smith *et al.*, 2011; Brown and Bolling, 2007; Black *et al.*, 2011). In the SCJS 2010/11, twenty two respondents reported that they had ever taken semeron and were, therefore, excluded from the analysis presented in this report.

#### **1.4 Classification of drugs**

The Misuse of Drugs Act 1971 classifies illegal drugs into three categories (Class A, B and C) according to the harm they cause. The 16 drugs that respondents were asked about and their classification under the Act are:

- **Class A**, including cocaine, crack, crystal meth, ecstasy, LSD, magic mushrooms, heroin, methadone and amphetamines (if prepared for injection);<sup>8</sup>
- **Class B**, including amphetamines (in powdered form) and cannabis;
- **Class C**, including ketamine, temazepam, valium and anabolic steroids;
- **Not classified**, including poppers and glues, solvents, gas or aerosols.

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<sup>8</sup> The SCJS does not collect details of whether amphetamine was prepared for injection or in powdered form. As injection as a method of taking drugs *ever* reported in the SCJS 2010/11 was relatively rare, all self-reported amphetamine use is included in Class B in the analysis that follows.



In addition to reporting by Class, a number of other composite drug groups are reported. These composite groups, and the individual drugs that they include, are:

- **Opiates**, including heroin and the illicit / non-prescribed use of methadone;
- **Stimulant drugs**, including cocaine, crack, crystal meth, ecstasy, amphetamines and poppers;
- **Psychedelics**, including LSD, magic mushrooms and ketamine;
- **Downers / tranquilisers**, including temazepam and valium.

The groups include illicit drugs across the legal classifications and reflect the drugs' shared properties, effects and characteristics, providing an additional measure to the class-based categorisation. For example, stimulant drugs may be used interchangeably by the same people at similar times and in similar settings.

Drugs not included in the composite groups such as cannabis, anabolic steroids and glues, solvents, gas or aerosols, are included separately in appropriate figures where sufficient data are available to do this.

In addition to the 16 drugs included in the previous surveys, 5 'new' previously legal drugs were added to the SCJS in 2010/11:

- Mephedrone (mmcat, 4-mmc, 'meow', 'doves', 'bubbles');
- BZP (benzylpiperazine);
- GBL (gamma-butyrolactone, liquid 'e') or GHB (gamma-hydroxybutyrate);
- Synthetic cannabinoids (such as 'spice', 'space');
- Khat (quat, qat, qaadka, chat, jaad).

It should be recognised that as these drugs were previously legal, for respondents reporting use of them *ever*, this does not necessarily represent an illicit activity.

### **1.5 A note on reference periods**

In the survey, respondents were asked about their history of drug use over three different time periods. These, with their respective strengths and limitations, are:

- Self-reported use *ever*: whether respondents had used specific drugs *at some point in their lives*, providing useful contextual information when, for example, examining general attitudes to drugs. However, this is not a useful indicator of current drug use or recent trends since it can include people who have used a drug once, perhaps a long time ago;

- Use in the *last year*: whether respondents had used specific drugs in the year prior to interview. This time frame is generally regarded as the most stable measure of current drug use, especially when analysing trends over time;<sup>9</sup>
- Use in the *last month*: whether respondents had used specific drugs in the month prior to interview. This time frame provides the most up-to-date information on usage. However, since it is a relatively short time period it is more prone to variation, for example, it may miss people who use drugs regularly but who have not done so within the last month.

## **1.6 Comparing the SCJS 2010/11 with the BCS 2010/11**

Due to the fact that the British Crime Survey (BCS) 2010/11 self-completion questionnaire was asked of respondents aged between 16 and 59 years while the SCJS was asked of respondents of 16 years and over (i.e. including those aged 60 or over), care should be taken when comparing SCJS and BCS data. In this report, where comparisons are made with the BCS 2010/11, the SCJS 2010/11 data have been filtered to exclude those aged 60 years and over.

## **1.7 Structure of the report**

This report looks at self-reported illicit drug use among adults in Scotland.

**Chapter 2** focuses on prevalence of drug use *ever* (that is, *at least some point in a person's life*), at least once in the *last year* (i.e. the year prior to interview) and at least once in the *last month* (i.e. the month prior to interview) among all adults aged 16 or over.

It looks at key trends in the use of different types of drugs, comparing findings with the SCJS 2008/09 and the SCJS 2009/10 as well as findings for England and Wales using results from the BCS 2010/11. Variations in self-reported drug use in terms of some key demographic and socio-economic variables are also explored. The chapter then looks at the likelihood of being offered drugs in the *last year*, again highlighting any demographic and socio-economic differences. The chapter concludes by looking at the prevalence of the 'new' previously legal drugs included in the SCJS 2010/11.

**Chapter 3** looks in more detail at the experiences of respondents who reported taking drugs *at some point in their lives*, firstly looking at self-reported drug use in the *last year*, followed by use in the *month prior to interview*. Providing more in-depth analysis, the chapter then looks more specifically at the drug reported as being used *most often in the last month*, the frequency

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<sup>9</sup> As interviewing for the SCJS 2010/11 was continuous over the course of 10 months from June 2010 to the end of March 2011, the reported measure of 'in the last year' covers a 12 month period which varies according to the date of the interview. More information on the survey 'reference period' is available in the Technical Report: <http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/crime-and-justice-survey>.

with which these drugs were taken and the extent of dependency. The ease with which adults were able to obtain drugs is explored along with polydrug use; that is, mixing drugs with other drugs or alcohol. The chapter concludes with a look at first experiences of drug taking, including which drug was first taken and at what age.

## 2 Prevalence of Illicit Drug Use in Scotland

### 2.1 Chapter summary

#### Self-reported drug use

The SCJS 2010/11 estimated that:

- Just under one in four (**23.7%**) adults reported taking one or more illicit drug *at some point in their lives (ever)*, even if it was a long time ago;
- One in fifteen (**6.6%**) adults reported using one or more illicit drug in the *last year*, i.e. the 12 months prior to the survey interview;
- One in twenty eight (**3.5%**) adults reported using one or more illicit drug in the *last month*, i.e. the month prior to the survey interview.

**Cannabis** was by far the drug most commonly reported in any of the 3 time periods asked about with around one in seventeen (5.6%) adults reporting cannabis use in the *last year*. **Cocaine** and **ecstasy** were the next most commonly reported drugs used after cannabis in the *last year* (1.9% and 1.4% respectively).

#### Demographic variations

The percentage of men (9.5%) who reported using one or more illicit drug in the *last year* was more than twice as high as the percentage of women (3.9%).

Use of illicit drugs in the *last year* was higher among 16-24 year olds (20.3%) than for 25-44 year olds (9.2%) and lower among 45-59 year olds, decreasing further among those aged 60 or over.

#### Trends in self-reported drug use over time

Self-reported drug use among adults aged 16 or over in Scotland has decreased between 2008/09 and 2010/11. 6.6% of adults reported using drugs in the *last year* in 2010/11 compared with 7.2% in 2009/10 and 7.6% in 2008/09. Similarly 3.5% of adults reported using drugs in the *last month* in 2010/11 compared with 4.2% of adults in 2009/10 and 4.4% of adults in 2008/09. These decreases are statistically significant.

#### Trends in self-reported drug use compared with England and Wales

Fewer 16-59 year olds reported that they had taken any illicit drug *at some point in their lives* in Scotland than across England and Wales, while the percentages of adults taking any illicit drug in the *last year* or *last month* were similar.

#### Being offered drugs

Around one in eight (11.6%) adults reported that someone had offered to give or sell them at least one type of illicit drug in the *last year*. 43.4% of these had used an illicit drug in the *last year* and 55.9% had not.

## 2.2 Introduction

This chapter looks at the prevalence of illicit drug use in Scotland, including the overall extent of drug use, use by composite drug group and legal classification, as well as use of the individual drugs asked about. It then moves on to examine demographic, socio-economic and geographical variations in prevalence of drug use. The chapter then looks at the likelihood of being offered illicit drugs, and concludes by looking at the prevalence of the 'new' previously legal drugs.

Comparisons are made over time using the SCJS data from 2008/09 and 2009/10, and between Scotland and England and Wales (together) using the British Crime Survey (BCS) 2010/11, where relevant.<sup>10</sup>

## 2.3 Self-reported drug use

The SCJS 2010/11 provides estimates of the percentage of adults, aged 16 or over, in Scotland who report that they have used illicit drugs based on answers provided to 3 questions covering 3 periods of time (*ever*, in the *last year* and in the *last month*):<sup>11</sup>

- Just under one in four (23.7%) adults reported taking one or more illicit drug *at some point in their lives (ever)*, even if it was a long time ago;
- One in fifteen (6.6%) adults reported using one or more illicit drug in the *last year*, i.e. the 12 months prior to the survey interview;
- One in twenty eight (3.5%) adults reported using one or more illicit drug in the *last month*, i.e. the month prior to the survey interview.

Comparisons with the SCJS 2008/09 and 2009/10 help to set these findings in context.

- Self-reported drug use among adults age 16 and over in Scotland has decreased between 2008/09 and 2010/11 (Figure 2.1);
- 23.7% of adults reported using drugs *ever* in 2010/11 compared with 25.2% in 2009/10 and 25.6% in 2008/09. The decrease between 2010/11 and both 2008/09 and 2009/10 is statistically significant;
- 6.6% of adults reported using drugs in the *last year* in 2010/11 compared with 7.2% in 2009/10 and 7.6% in 2008/09. The decrease between 2010/11 and 2008/09 is statistically significant;

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<sup>10</sup> In the BCS 2010/11 drug use questions were asked of 16-59 year olds only. Comparisons of SCJS results with the BCS therefore are made between 16-59 year olds only (section 1.6. See the Technical Report for further details: <http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/Publications/publications>.)

<sup>11</sup> Section 1.5 provides further details of the use of these time periods.

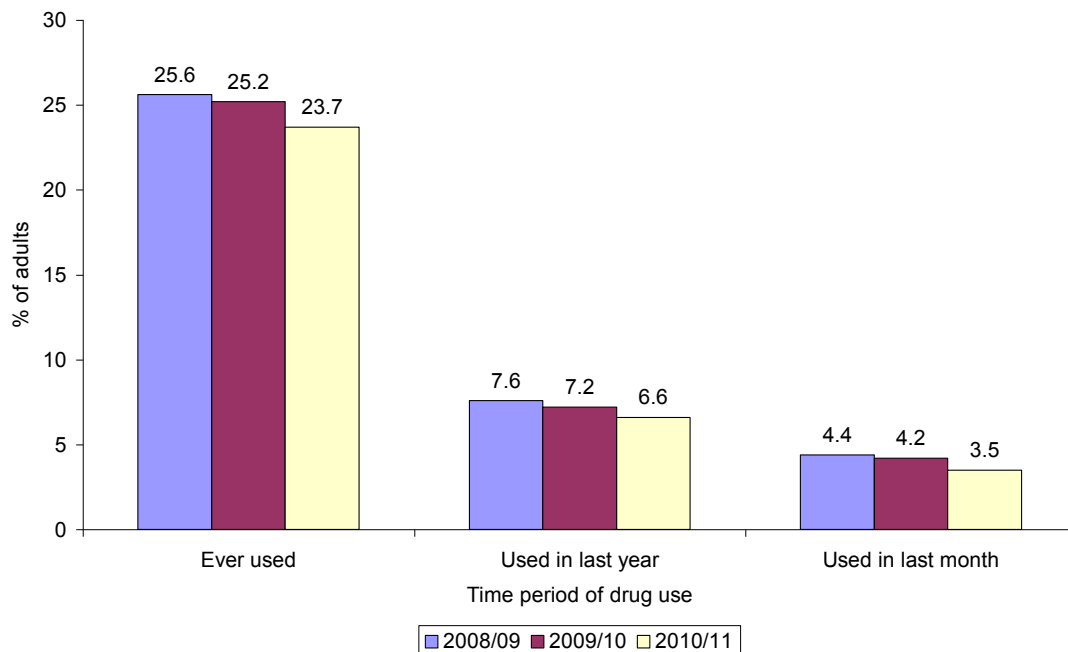
- Similarly 3.5% of adults reported using drugs in the *last month* in 2010/11 compared with 4.2% of adults in 2009/10 and 4.4% of adults in 2008/09. The decrease between 2010/11 and both 2008/09 and 2009/10 is statistically significant.

**Figure 2.1: % of adults aged 16 or over reporting use of drugs ever, in the last year and in the last month over time**

SCJS 2008/09; SCJS 2009/10; SCJS 2010/11.

Base: Adults aged 16 or over (2008/09 10,962; 2009/10 13,409; 2010/11 10,977).

Variable name: QEVE; Q12M; Q1M.



Prevalence of drug use among adults aged 16-59 in the *last year* has steadily decreased from that reported in the Scottish Crime and Victimization Survey (SCVS) in 2006. 12.6% of adults reported using drugs in the *last year* in 2006 compared to 10.3% in the SCJS 2008/09, 9.8% in the SCJS 2009/10 and 9.1% in the SCJS 2010/11.

Comparisons with the BCS 2010/11, based on 16-59 year olds, provide further context to these Scotland findings (reported in Smith *et al.*, 2011).

Self-reported illicit drug use *ever* in Scotland (SCJS 2010/11) was significantly lower than across England and Wales among 16-59 year olds (31.4% compared with 36.3% for England and Wales).

However, self-reported illicit drug use in the *last year* and in the *last month* was similar (not significantly different) in Scotland to that across England and Wales. In England and Wales 8.8% of 16-59 year olds reported taking drugs in the *last year* and 4.8% said they had in the *last month* (compared with 9.1% and 4.8% respectively in Scotland).

## 2.4 Self-reported drug use by composite group and Class of drug<sup>12</sup>

Looking in more detail at self-reported drug use by composite drug group, i.e. classifying them by shared characteristics, Figure 2.2 shows that:

- One in eight (12.5%) adults reported that they had taken **stimulant** drugs (cocaine, crack, crystal meth, ecstasy, amphetamines, poppers) *at some point in their lives* while 2.8% had taken at least one of these drugs in the *last year* and 1.2% in the *last month*;
- Around one in thirteen (7.5%) adults reported use of **psychedelic** substances (including LSD, magic mushrooms or ketamine), *at some point in their lives*. Less than 1% of adults aged 16 or over reported using a drug from this composite drug group either in the *last year* or the *last month* (0.6% and 0.2% respectively);
- Just under one in twenty one (4.6%) adults reported *ever* using **downers or tranquilisers** (temazepam or valium), with 1.1% having used either of these in the *last year* and 0.4% in the *last month*;
- Use of **opiates** (heroin and methadone) was lower. 1.0% of adults reported taking either of these drugs *at some point in their lives*, and less than 0.5% had taken opiates either in the *last year* or the *last month* (0.3% and 0.2% respectively).<sup>13</sup>

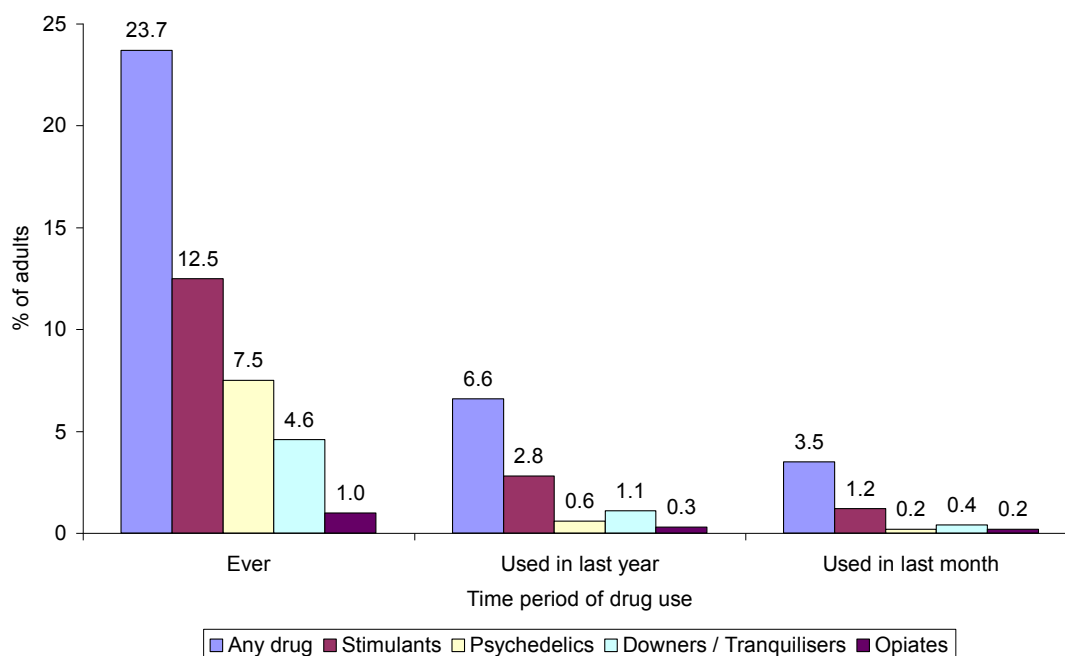
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<sup>12</sup> Section 1.4 provides details of the drugs that are included in the composite groups and Classes of drugs.

<sup>13</sup> Prevalence of opiate use is particularly prone to under-estimation due to its association with problematic drug use (section 1.3). Alternative studies are used to estimate problem opiate (and/or benzodiazepine) use in Scotland (ISD Scotland, 2011).

**Figure 2.2: % of adults aged 16 or over reporting use of drugs by composite group ever, in the last year and in the last month**  
SCJS 2010/11.

Base: Adults aged 16 or over (10,977).  
Variable name: QEVE; Q12M; Q1M.



In respect of legal classification, findings from the SCJS 2010/11 showed that (Figure 2.3):

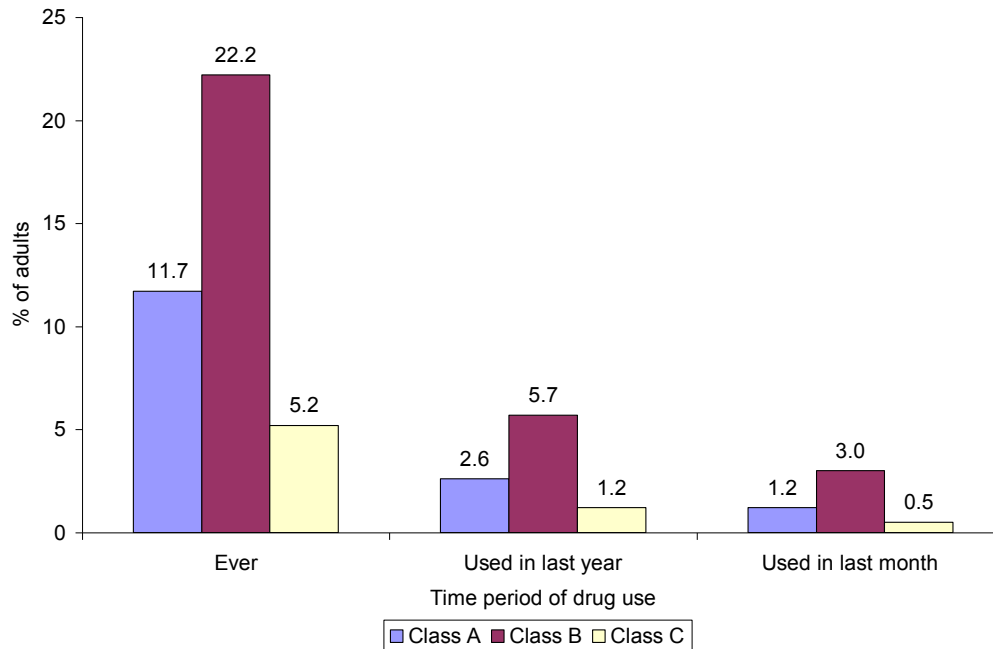
- Around one in nine (11.7%) adults aged 16 or over reported use of **Class A** drugs *at some point in their lives*, with 2.6% reporting use of Class A drugs in the *last year* and 1.2% in the *last month*;
- Almost a quarter (22.2%) of adults reported use of **Class B** drugs *at some point in their lives*. Use of Class B drugs was dominated by cannabis use, the drug adults most commonly reported taking (21.6% reported *ever* using cannabis). 5.7% of adults aged 16 or over had taken Class B drugs in the *last year* and 3.0% in the *last month*;
- Around one in twenty (5.2%) adults aged 16 or over reported use of **Class C** drugs *ever*, with 1.2% having done so in the *last year* and 0.5% in the *last month*.



**Figure 2.3: % of adults aged 16 or over reporting use of drugs by Class ever, in the *last year* and in the *last month***  
SCJS 2010/11.

Base: Adults aged 16 or over (10,977).

Variable name: QEVE; Q12M; Q1M.



## 2.5 Self-reported drug use by specific drug

Reported drug use *ever*, in the *last year* and in the *last month* by adults aged 16 or over followed similar patterns for individual drugs. Patterns of use for all drugs over the three time periods are discussed below. Figure 2.4, Figure 2.5 and Figure 2.6 show findings for all three time periods individually. More detailed discussion of drug use in the *last month* is also provided in Chapter 3.

The SCJS 2010/11 clearly shows that **cannabis** was the most commonly reported drug by adults in any of the 3 time periods asked about.

- 21.6% of adults had taken **cannabis** *at some point in their lives*, around three times as many as the next most commonly reported drugs (amphetamines, ecstasy, cocaine and poppers – all around 7%):
  - Around one in seventeen (5.6%) adults reported using cannabis in the *last year*, which represents 83.6% of adults using any illegal drug in the *last year*;
  - 3.0% of adults aged 16 or over reported using cannabis in the *last month*;
- The next most common drugs that people reported they had *ever* taken were **amphetamines** (7.8%), **ecstasy** (7.2%), **cocaine** (7.1%) and **poppers** (6.4%):

- In the *last year*, 1.9% of adults reported that they had used cocaine compared with 1.4% who reported ecstasy use, 0.9% who reported amphetamine use and 0.6% who reported using poppers over the same time period;
- Reported use of cocaine in the *last month* was 0.7% compared with 0.6% for ecstasy, 0.4% for amphetamines and 0.2% for poppers;
- Reported use of the psychedelic drugs, **magic mushrooms** and **LSD**, was similar for each time period:
  - Around one in twenty adults reported using magic mushrooms (5.2%) and LSD (4.9%) *at some point in their lives*. Less than 0.5% of adults reported using either of these drugs in the *last year* or *last month*;
- For downers / tranquilisers, reported use of **valium** was greater than **temazepam** over all three time periods:
  - 3.9% of adults had used valium *at some point in their lives* compared with 2.0% for temazepam;
  - 1.0% of adults had used valium in the *last year* and 0.4% had done so in the *last month* compared with 0.3% and 0.1% who had used temazepam in the respective periods;
- Use of **glues, solvents, gas or aerosols** was reported by 2.2% of adults aged 16 or over *at some point in their lives*, while use in the *last year* was 0.2% and use in the *last month* was lower than 0.1%;
- **Ketamine** use ever was reported by 1.2% of adults, reducing to 0.3% in the *last year* and 0.1% in the *last month*. Use of **anabolic steroids** ever and in the *last year* (0.3% and 0.1% respectively), and **crystal meth** (0.3%) ever was reported by fewer adults;<sup>14</sup>
- Less than 1% of adults reported using **heroin** (0.8%), **crack** (0.8%) or **methadone** (0.7%) *at some point in their lives*, with 0.2% or fewer having used these in either the *last year* or *last month*.

Results for individual drugs are shown in the 3 charts that follow and each covers a separate time period. The drugs in each chart are ordered consistently, from highest to lowest percentage ever used (i.e. based on Figure 2.4) and the same scale (0% - 25%) has been used for the y axis in each chart to aid comparison.

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<sup>14</sup> The percentage reporting use of crystal meth in the last year and both crystal meth and anabolic steroids in the last month was less than 0.05%.

Firstly, Figure 2.4 shows which drugs adults, aged 16 or over, reported using *at some point in their lives*:

- Three times as many adults reported that they had used cannabis *at some point in their lives* (21.6%) compared with amphetamines (7.8 %) or ecstasy (7.2%), which were the next most commonly used drugs *ever*. This illustrates the dominance of cannabis highlighted previously.

**Figure 2.4: % of adults aged 16 or over reporting drug use ever by drug used**

SCJS 2010/11.

Base: Adults aged 16 or over (10,977).

Variable name: QEVE.

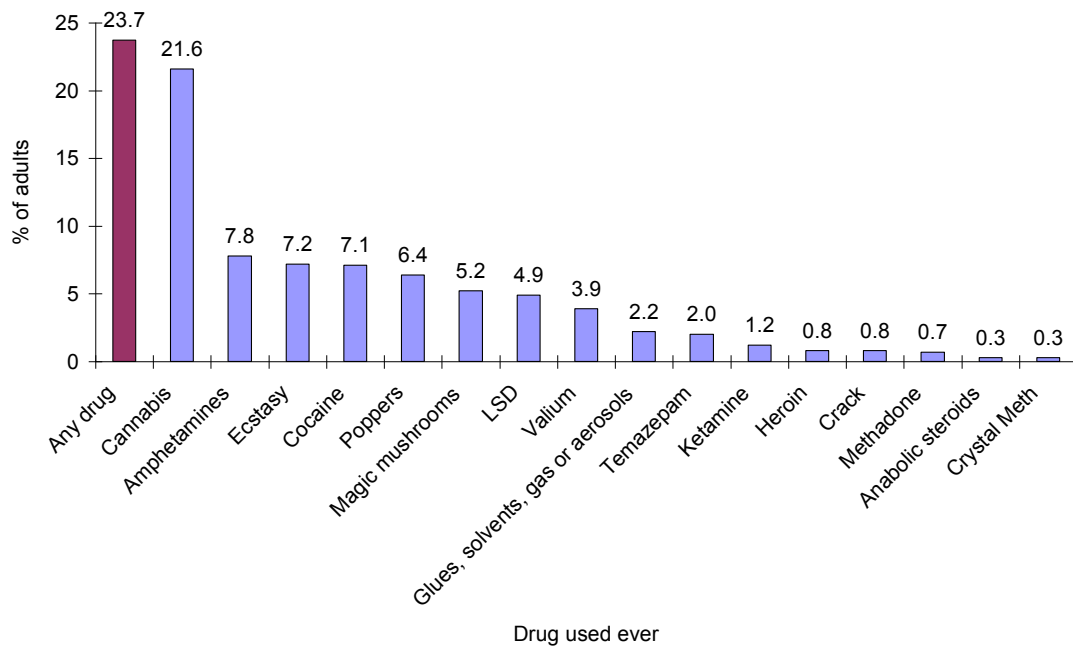


Figure 2.5 shows the drugs reported by adults in the *last year*:

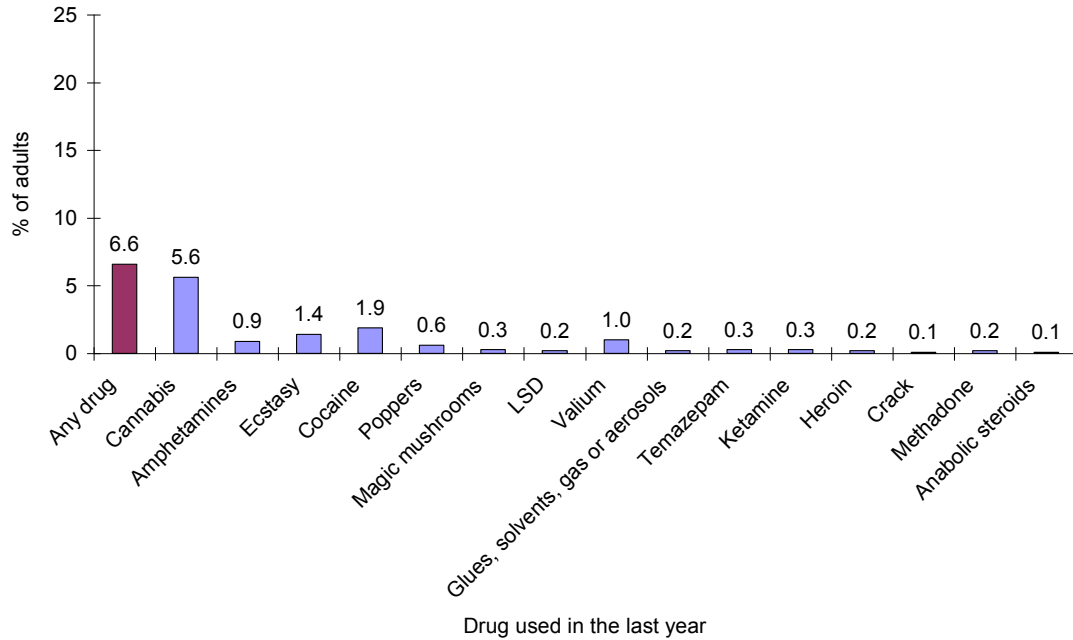
- Cannabis remained the most commonly used drug (5.6%);
- The next most commonly used drugs were cocaine (1.9%) and ecstasy (1.4%);
- Around three times as many adults reported they had used cannabis in the *last year* than cocaine or ecstasy.

**Figure 2.5: % of adults aged 16 or over reporting drug use in the *last year* by drug used <sup>15</sup>**

SCJS 2010/11.

Base: Adults aged 16 or over (10,977).

Variable name: Q12M.



Finally, Figure 2.6 presents the drugs reported by adults in the *last month*:

- Cannabis was the most commonly used drug in the *last month* (i.e. the month prior to the survey interview)(3.0%);
- Cocaine and ecstasy were the next most commonly reported drugs in the *last month* (0.7% and 0.6% respectively);
- Between four and five times as many adults reported taking cannabis in the *last month* than reported taking cocaine or ecstasy.

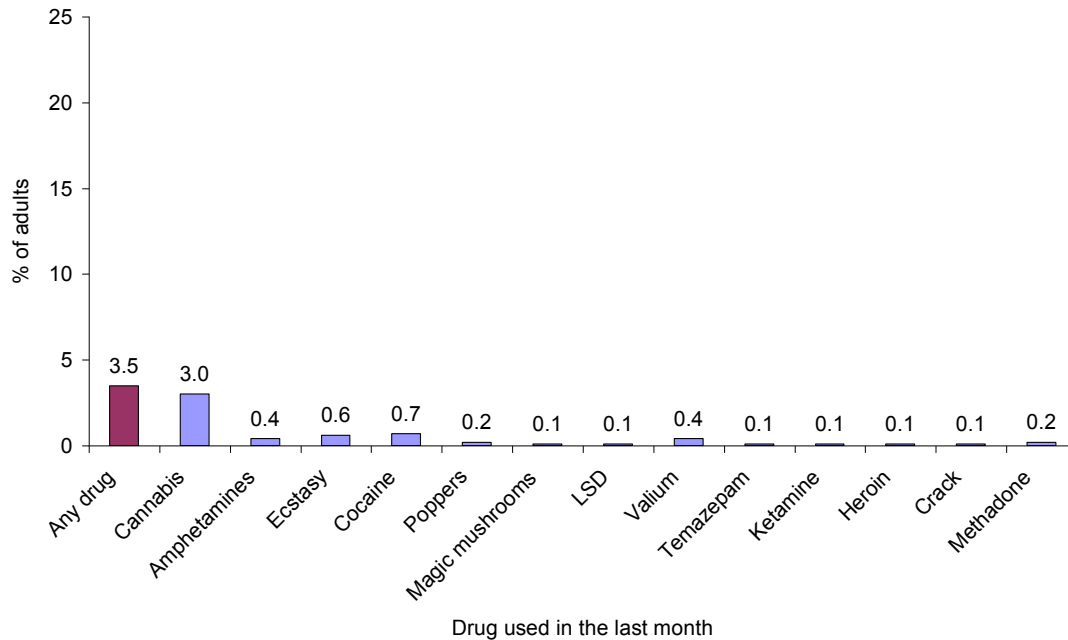
<sup>15</sup> Less than 0.05% reported having used crystal meth in the last year and this is not shown in Figure 2.5.

**Figure 2.6: % of adults aged 16 or over reporting drug use in the *last month* by drug used <sup>16</sup>**

SCJS 2010/11.

Base: Adults aged 16 or over (10,977).

Variable name: Q1M.



The ranking of Figure 2.5 and Figure 2.6 in order of highest to lowest percentage used *ever* highlights the relatively higher prevalence of taking cocaine and valium in the *last year* or the *last month*, compared with amphetamines, poppers, magic mushrooms and LSD which were relatively more likely to have been taken *at some point in a person's life*.

Figure 2.7 shows the percentage of adults who reported use of the most prevalent drugs over time in 2008/09, 2009/10 and 2010/11:

- Significantly fewer adults reported taking cocaine in the *last year* in the SCJS 2010/11 (1.9%) compared with in 2008/09 (2.7%), but the difference between 2010/11 and 2009/10 (2.1%) is not significant, meaning that cocaine use in the *last year* has remained stable. This pattern was repeated for cocaine use in the *last month* (0.7% 2010/11; 0.7% 2009/10; 1.2% 2008/09).
- The proportion of adults in Scotland who reported ecstasy use in the *last year* is significantly lower in the SCJS 2010/11 (1.4%) compared with both 2009/10 (1.9%) and 2008/09 (1.8%).

<sup>16</sup> Less than 0.05% of adults aged 16 or over reported having used anabolic steroids or glues, solvents, gas or aerosols in the last month and these are not shown in Figure 2.6. No respondents reported having used crystal meth in the last month.

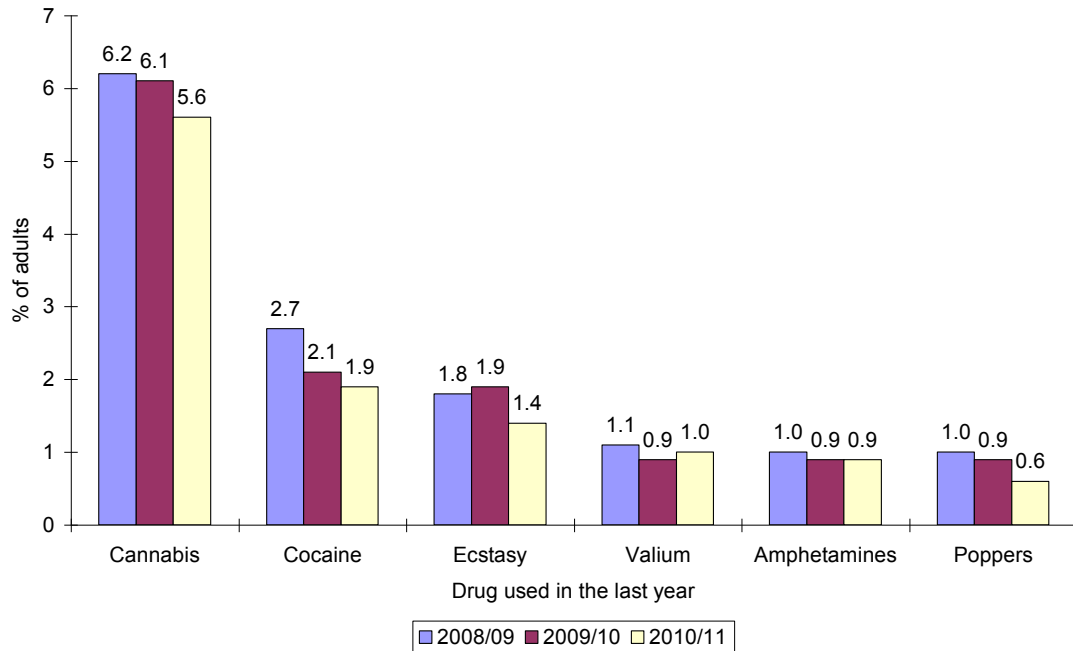
- Significantly fewer adults aged 16 and over reported taking poppers in the *last year* in the SCJS 2010/11 (0.6%) compared with both 2009/10 (0.9%) and 2008/09 (1.0%).

**Figure 2.7: % of adults aged 16 or over reporting use of the most prevalent drugs in the *last year* over time <sup>17</sup>**

SCJS 2008/09; SCJS 2009/10; SCJS 2010/11.

Base: Adults aged 16 or over (2008/09 10,962; 2009/10 13,409; 2010/11 10,977).

Variable name: Q12M.



Findings from the SCJS 2010/11 can also be compared with results from the BCS 2010/11 for individual drug use. Although the overall difference in reported illicit drug use among 16-59 year olds in Scotland in the *last year* was not significantly different to England and Wales, use of a number of individual drugs was still significantly higher in Scotland than England and Wales. This included cannabis (7.7% of adults aged 16-59 in Scotland compared with 6.8% across England and Wales); cocaine (2.6% in Scotland; 2.1% in England and Wales) and ecstasy (1.9% in Scotland; 1.4% in England and Wales).

<sup>17</sup> Less than 0.3% of adults reported, in the SCJS 2010/11 using the remaining drugs during the *last year* and these are not shown in Figure 2.7.

## 2.6 Variations in self-reported drug use

This section looks at the prevalence of self-reported illicit drug use by gender, age, and a series of other factors.

### 2.6.1 Variation by gender

Men reported higher levels of illicit drug use than women (Figure 2.8):

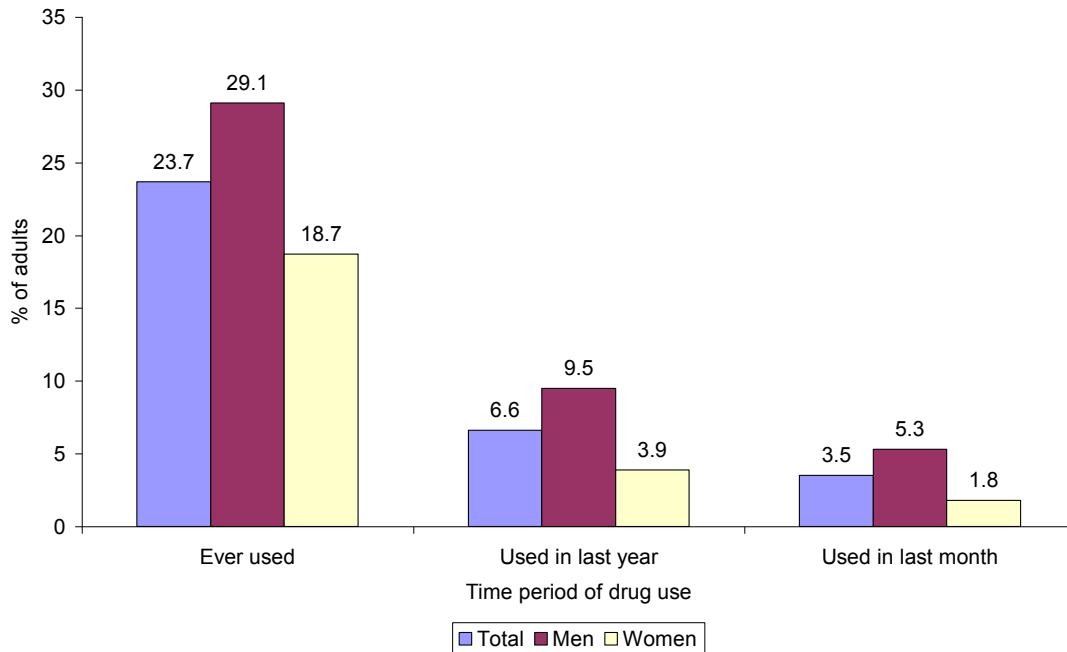
- Almost three in ten (29.1%) men reported taking an illicit drug at *some point in their lives* compared with less than two in ten (18.7%) women;
- Over the *last year*, more than twice the percentage of men (9.5%) than women (3.9%) reported taking an illicit drug, a pattern that was repeated for self-reported drug use in the *last month* (5.3% and 1.8% respectively).

**Figure 2.8: Variation in self-reported drug use ever, in the *last year* and *last month* among adults aged 16 or over by gender**

SCJS 2010/11.

Base: Adults aged 16 or over (adults 10,977; men 4,728; women 6,249).

Variable name: *QEVE*; *Q12M*; *Q1M*.



This gender difference also extended to composite drug groups, Class and individual drugs (see Tables A1.7 – A1.12 in Annex 1).

### 2.6.2 Variation by age

In terms of age, the youngest age groups in the SCJS reported the highest levels of drug use in the *last year* and in the *last month* compared with other age groups and prevalence decreased steadily with age:

- 16-24 year olds reported the highest levels of illicit drug use in the *last year* (20.3%), decreasing to 9.2% of those aged 25-44, 2.5% of 45-59 year olds and 0.2% of those aged 60 or older.
- In the *last month*, 9.8% of 16-24 year olds reported using illicit drugs decreasing to 5.1% of 25-44 year olds, 1.4% of 45-59 year olds and 0.1% of those aged 60 or over.
- Compared to 2008/09, drug use among 16-24 year olds has reduced from 23.5% to 20.3% in 2010/11. Drug use among 16-24 year olds in the *last year* has remained stable between 2009/10 (20.2%) and 2010/11.

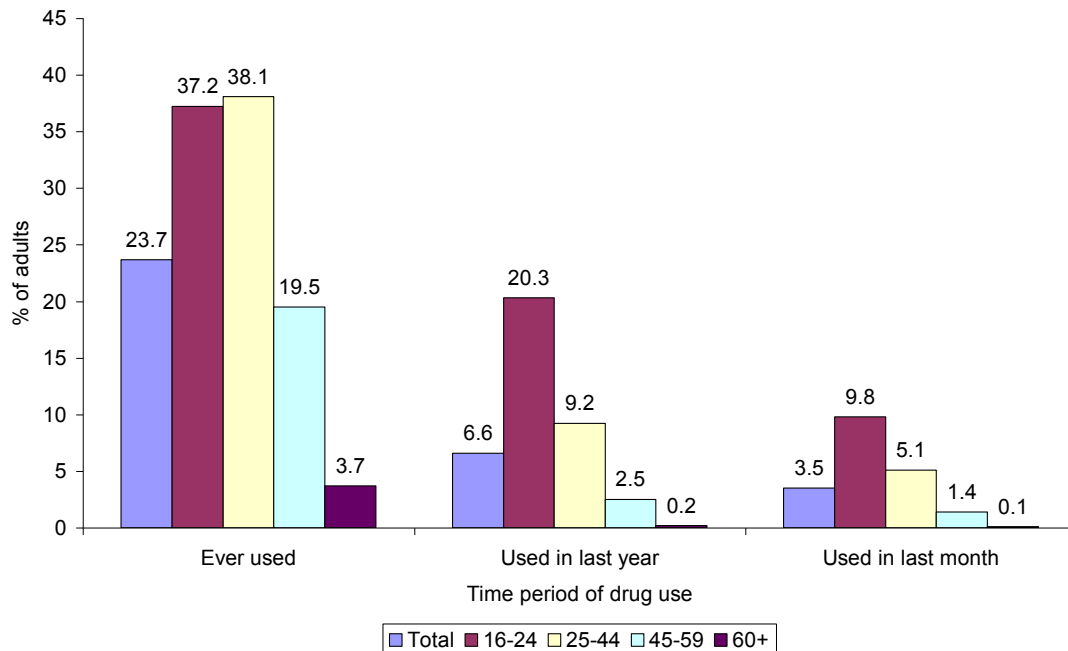
However, as Figure 2.9 shows, a similar percentage of 16-24 year olds (37.2%) reported using illicit drugs *at some point in their lives* as did 25-44 year olds (38.1%), reflecting drug use in the past among these older adults. Reported use of illicit drugs in the *last year* and in the *last month* was higher for 16-24 year olds (20.3% and 9.8% respectively) than for 25-44 year olds (9.2% and 5.1% respectively).

**Figure 2.9: Variation in drug use ever, in the last year and last month among adults aged 16 or over by age**

SCJS 2010/11.

Base: Adults aged 16 or over (adults 10,977; 16-24 968; 25-44 3,298; 45-59 2,916; 60+ 3,793).

Variable name: QEVE; Q12M; Q1M.



Those aged 25-44 were most likely to report that they had *ever* used **stimulants, opiates, psychedelics, Class A or Class B** drugs, though in the *last year* the younger age group (16-24 year olds) were more likely to report using all of these, with the exception of **opiates** (see Tables A1.4 and A1.5 in Annex 1).



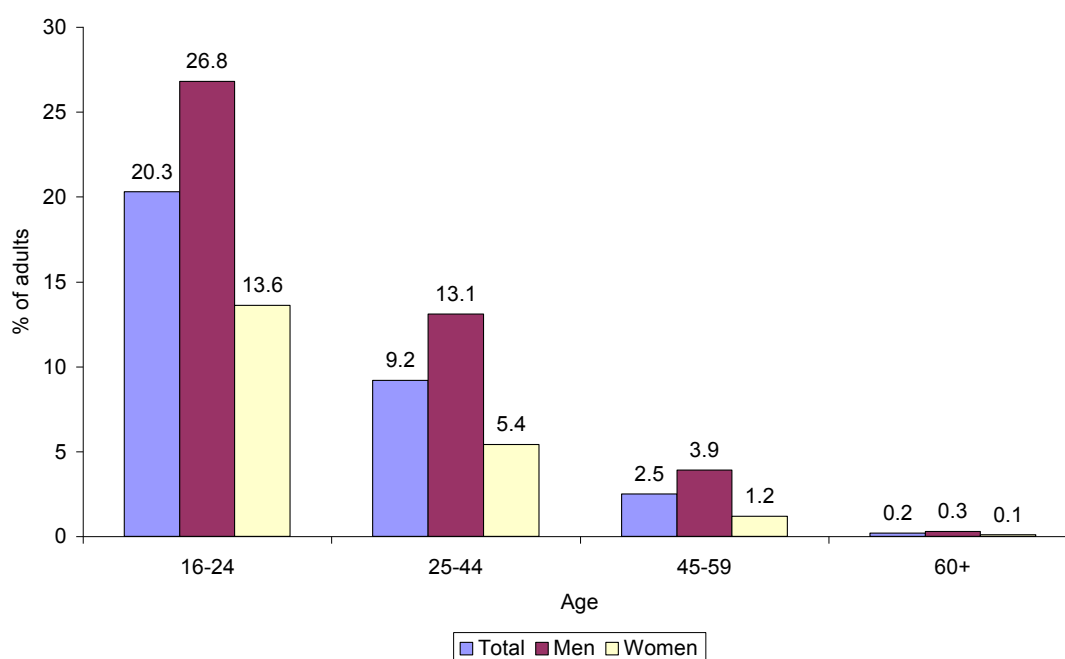
### 2.6.3 Variation by gender and age

Examining drug use in the *last year* by gender within age shows a consistent pattern, with men in all age cohorts more likely to report using drugs, and a clear association between age and likelihood of use (Figure 2.10).

**Figure 2.10: Variation in drug use in the *last year* among adults aged 16 or over of different age groups by gender**  
SCJS 2010/11.

Base: Adults aged 16 or over in each age range by gender (ranging from adults aged 60+ 3,793, to males aged 16-24 438).<sup>18</sup>

Variable name: Q12M.



### 2.6.4 Variation in drug use by other factors

Variation in drug use in the *last year* among adults aged 16 or over was also investigated by other socio-economic, experiential and area factors. The fact that an association is identified between these factors and drug taking does *not* imply that one causes the other. Associations were investigated as simple one-to-one relationships rather than more complex statistical relationships that take into account links between factors that might be identified through statistical modelling.<sup>19</sup>

<sup>18</sup> Tables A1.5, A1.8 and A1.11 in Annex 1 provide base sizes for all age ranges for adults, men and women respectively.

<sup>19</sup> Statistical modelling would identify the main factors associated with drug use and others where association arises through links to these main factors. For example, housing tenure appears to be associated with levels of drug use. However, we know that both drug use and housing tenure are partly associated statistically with age, rural / urban location and levels of deprivation. It may be that the apparent association between tenure and drug use is actually a reflection of these other characteristics,

Factors where differences in drug use between sub-groups were identified included self-reported experience of being a victim of crime as measured by the SCJS 2010/11; socio-economic classification, as measured by Office for National Statistics Socio-Economic Classification (NS-SEC);<sup>20</sup> tenure; area deprivation<sup>21</sup> and urban rural classification.<sup>22</sup>

Associations identified that were statistically significant included:

- **Victims of crime** as measured by the SCJS 2010/11 were significantly more likely to report using illicit drugs in the *last year* (11.7% compared with 5.5% among non-victims);
- Those working in **routine and manual occupations** (9.6%) were significantly more likely to have taken illicit drugs in the *last year* than those who were not working or long-term unemployed (4.8%)<sup>23</sup> and those in managerial and professional occupations (4.8%). 5.9% of those in intermediate occupations had used any drug in the *last year*, which is also significantly less than those working in routine or manual occupations;
- Those living in **private rented accommodation** (14.5%) were more likely to report using any drug in the *last year* compared with those living in **social rented housing** (10.0%). Both of these groups were significantly more likely to report illicit drug use in the *last year* than owner-occupiers (4.1%);
- Those living in the **15% most deprived areas** of Scotland were more likely to report using drugs in the *last year* than adults living elsewhere in Scotland (9.0% compared with 6.3% respectively);
- Those living in **urban areas** (7.2%) were significantly more likely to report using any drug in the *last year* than adults living in rural areas (4.4%).

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rather than a direct association between the two. Statistical modelling would be able to confirm or disprove this.

<sup>20</sup> Further details of NS-SEC coding can be found on the ONS website:

<http://www.ons.gov.uk/ons/guide-method/classifications/archived-standard-classifications/ns-sec/index.html>

<sup>21</sup> Area deprivation is measured by the Scottish Index of Multiple Deprivation:

<http://www.scotland.gov.uk/Topics/Statistics/SIMD/>.

<sup>22</sup> Details of the 2007-2008 Scottish Government urban rural Classification used in this survey can be found at: <http://www.scotland.gov.uk/Resource/Doc/233802/0063988.pdf>.

<sup>23</sup> Adults categorised as not working or long term unemployed included those who were retired from paid work (QD1EMP).

## 2.7 Being offered drugs in the last year

The SCJS 2010/11 estimated that around one in nine (11.6%) adults in Scotland reported that someone had offered to give or sell them at least one type of illicit drug in the *last year*. The particular drugs offered showed similar patterns to levels of usage of different drugs.

Figure 2.11 shows the percentage of adults aged 16 or over who reported being offered at least one drug within composite drug groups and Class in the *last year*. It also shows the top three individual drugs that adults reported that they had been offered:<sup>24</sup>

- The drug most likely to have been offered to adults aged 16 or over was **cannabis**, offered to just under one in ten adults (9.3%), followed by **cocaine** (5.1%) and **ecstasy** (4.6%) respectively;
- Around one in thirteen (7.5%) adults had been offered **stimulants** and far fewer had been offered any of the other drug groupings: **downers or tranquilisers** (2.3%); **psychedelics** (2.2%); and **opiates** (1.3%);
- Around one in fourteen (7.3%) adults mentioned that they had been offered at least one **Class A** drug in the *last year* compared to 9.6% for **Class B** (reflecting Cannabis – 9.3% - being the most likely drug offered) and 3.1% for **Class C**.

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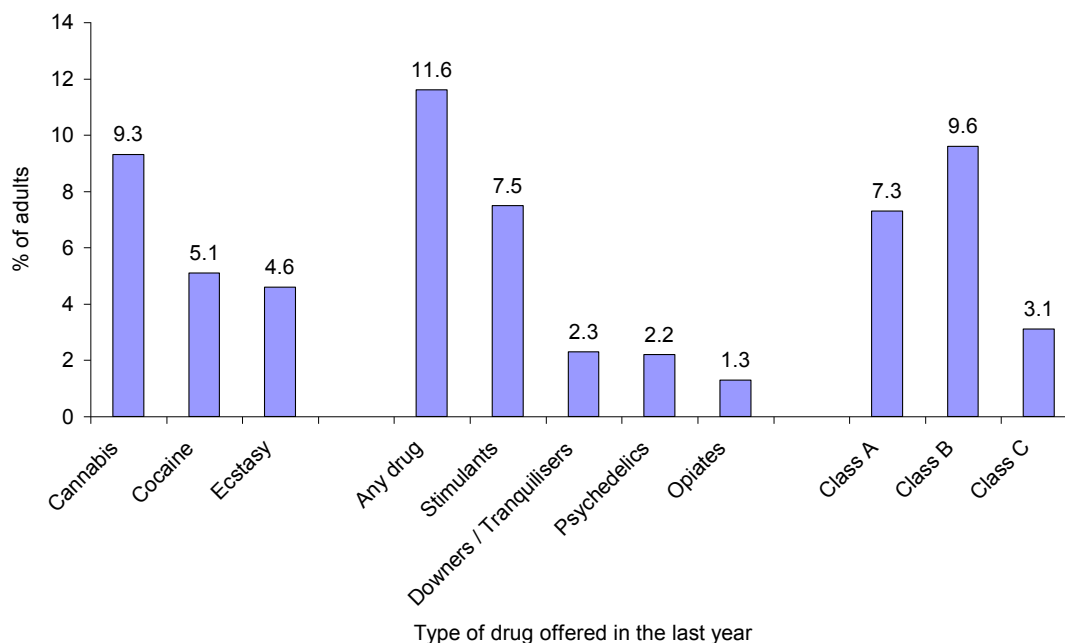
<sup>24</sup> Other individual drugs were offered to less than 4% of adults and are not shown.

**Figure 2.11: % of adults aged 16 or over being offered drugs in the *last year* within type of drug**

SCJS 2010/11.

Base: Adults aged 16 or over (10,977).

Variable name: QOF2.



The percentage of adults being offered drugs in the *last year* has decreased between 2008/09 and 2010/11. 11.6% of adults reported that they had been offered drugs in the *last year* compared to 13.7% in 2008/09 and 12.9% in 2009/10.

Significantly fewer adults aged 16 or over reported that they had been offered **stimulants** in the *last year* in 2010/11 (7.5%) compared with both 2009/10 (8.8%) and 2008/09 (9.8%), specifically **ecstasy** (4.6% 2010/11; 5.4% 2009/10; 6.3% 2008/09), and **cocaine** (5.1% 2010/11; 6.3% 2009/10; 7.0% 2008/09).

Similarly, significantly fewer adults reported that they had been offered any **Class A** drug (7.3% 2010/11; 8.5% 2009/10; 9.4% 2008/09), and also any **Class B** drug (9.6% 2010/11; 10.7% 2009/10; 11.0% 2008/09).

Significantly fewer adults reported being offered **psychedelics** in 2010/11 (2.2%) compared with 2008/09 (2.7%). There were no other significant differences for being offered drugs among composite drug groups or Class of drugs between the current and the previous two sweeps of the SCJS.

There were distinct differences among the main demographic sub-groups in terms of likelihood of being offered drugs in the *last year*, similar to those seen for use. These are reviewed in turn in the sections that follow.

### 2.7.1 Variation in being offered drugs by gender

Men were twice as likely as women to have been offered an illicit drug in the *last year* (15.9% compared with 7.6% women):

- The difference was most pronounced for **stimulants** (10.7% men compared with 4.6% women), **Class A** drugs (10.4% and 4.5% respectively) and **Class B** drugs (13.2% and 6.3% respectively).

### 2.7.2 Variation in being offered drugs by age

- Younger adults were more likely to have been offered any illicit drug in the *last year*. 34.6% of 16-24 year olds and 15.8% of 25-44 year olds reported that they had been offered an illicit drug in the *last year* compared to 4.9% of 45-59 year olds and 0.7% of those aged 60 or over;
- 16-24 year old men (40.8%) were almost twice as likely as 25-44 year old men (21.7%) to have been offered an illicit drug;
- 16-24 year old women (28.1%) were two and a half times more likely than 25-44 year old women (10.1%) to have been offered an illicit drug.

### 2.7.3 Variation in being offered drugs by other factors

Self-reporting of being offered any illicit drug in the *last year* among adults aged 16 or over also varied by other socio-economic, experiential and area factors. As noted in section 2.6.4, associations were investigated as simple one-to-one relationships and association does not imply a causal relationship.

Factors other than age and gender associated with being offered any drug were similar to those associated with drug use (section 2.6.4).

- **Victims of crime**, as measured by the SCJS 2010/11, were more than twice as likely to have been offered drugs in the *last year* compared with those who had not been a victim of crime (20.2% compared with 9.7% respectively);
- Those working in **routine and manual occupations** (15.3%) were significantly more likely to have been offered drugs in the *last year* than those in any other occupation group. Those in **intermediate occupations** (11.3%), and **managerial and professional occupations** (10.1%) were significantly more likely than those who were **not working or long term unemployed** (6.4%)<sup>25</sup> to have been offered illicit drugs in the *last year*;

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<sup>25</sup> Adults categorised as not working or long term unemployed included those who were retired from paid work (QD1EMP).

- Those living in **private rented accommodation** (25.8%) were significantly more likely to report being offered any drug in the *last year* compared with those living in **social rented housing** (14.8%). Both of these groups were significantly more likely to report being offered any drug in the *last year* than owner-occupiers (7.5%);
- Those living in the **15% most deprived areas** of Scotland were significantly more likely to report being offered drugs in the *last year* than adults living elsewhere in Scotland (13.9% compared with 11.1% respectively);
- Those living in **urban areas** (12.2%) were significantly more likely to report being offered any drug in the *last year* than adults living in rural areas (8.7%).

#### **2.7.4 Variation in being offered any drugs by drug use in the last year**

Around one in nine (11.6%) adults, aged 16 or over, reported that someone had offered to give or sell them illicit drugs in the *last year*.

Among those adults, who reported that they had not used any illicit drugs in the *last year*, 6.9% said that they had been offered illicit drugs in that time period. This demonstrates that it is not necessarily the case that those reporting being offered illicit drugs would have actually used any illicit drug.

Further analysis showed that less than half (43.4%) of those offered any illicit drug in the *last year* had used any illicit drug in the *last year* and over half (55.9%) had not. More than a quarter (27.9%) of those who had been offered drugs in the *last year* had never taken drugs.

### **2.8 New drugs**

Five additional substances were added to the SCJS 2010/11 to investigate the prevalence of the use of the new (previously legal) drugs **BZP**, **GBL**, **khat**, **synthetic cannabinoids** and **mephedrone**.

1.8% of respondents reported taking any of the above new drugs *ever*, reducing to 0.7% in the *last year*, and 0.2% in the *last month*.

Of these 5 new drugs, mephedrone was the drug adults reported that they had most commonly used. 1.2% of adults reported taking mephedrone *at some point in their lives*, 0.7% reported taking it in the *last year*, and 0.2% of adults reported mephedrone use in the *last month*.

Due to the small percentages involved, the addition of these drugs to the main drug statistics has little impact on the overall percentages reported so they have not been included in the analysis presented in the rest of the report.

Specifically looking at use of the new drugs, of those who had used any illicit drug in the *last year*, over one in ten (11.0%) had used one or more of the

new drugs. This included 9.9% who had taken mephedrone, 1.0% who had taken khat and 0.6% who had taken synthetic cannabinoids in that time period.

Looking at variation of mephedrone use by age and gender, it can be seen that adults aged 16-24 were most likely to report using mephedrone with 3.6% reporting use of mephedrone in the *last year*, compared to the average of 0.7% amongst adults aged 16 and over. Men (0.9%) were more likely than women (0.4%) to have used mephedrone in the *last year*. 4.9% of men aged 16-24 reported using mephedrone in the *last year* compared to 2.2% of women in the same age group.

## 3 The Experience of Adults Reporting Drug Use

### 3.1 Chapter summary

#### Drug most commonly reported

**Cannabis** was the drug most commonly reported. Of those who had used an illicit drug in the *last year*, 83.6% reported using cannabis in that time. 87.2% of those using any illicit drug in the *last month* reported using cannabis in the *last month*.

#### Frequency of drug use

Of those who had used drugs in the *last month*, half (49.1%) had used their only / most frequently used drug on at least a weekly basis, including around a quarter (24.3%) who reported use every day or almost every day.

#### Dependency on drugs

Of those who had used an illicit drug in the *last month*, almost a quarter (24.4%) reported feeling dependent on the drug they used *most often in the last month*. Three in ten (29.7%) said they had tried to cut down, but found they could not, on their use of the drug they used *most often in the last month*. 12.7% reported both feeling dependent and trying to cut down, but finding they could not, on the drug they used *most often in the last month*.

#### Ease of obtaining drugs

In 2010/11, fewer respondents reported finding it *very easy* to obtain the drug they most commonly used in the *last month* compared to 2008/09, while more respondents reported that it was *fairly difficult* to obtain the drug.

#### Polydrug use / mixing alcohol and drugs

Of those who had used at least one illicit drug in the *last month*, 34.3% reported some kind of polydrug use and 84.6% reported drinking alcohol at *some point in their lives* while taking the drug they had used *most often in the last month*.

#### First drug use

Of the 23.7% of adults who had *ever* used illicit drugs, over half (51.3%) reported that they had first tried them when they were in their late teens (16-19 years), whilst a quarter (24.7%) first tried them when they were under 16 years.

Reflecting its dominance, cannabis was the first drug tried by more than three quarters (78.3%) of adults who reported that they had used an illicit drug *at some point in their lives*.



### 3.2 Introduction

This chapter takes a more detailed look at the experiences of adults who reported illicit drug use in the *last year* and the *last month*.

Initially it examines drug use in the *last year* and in the *last month* by individual drug.

The chapter then moves on to look at more detailed experiences of drug use in the *last month*, including drugs used, frequency of use, levels of dependency, ease of obtaining drugs, polydrug use and the use of alcohol at the same time.

The chapter concludes by looking at first experiences and methods of taking drugs.

### 3.3 Self-reported drug use in the last year

As discussed in Chapter 2, almost a quarter (23.7%) of adults in Scotland reported they had used drugs *at some point in their lives*. This section focuses on the experience of these adults. Of these, almost three in ten (27.8%) reported using at least one drug in the *last year*. Figure 3.1 examines the individual drugs taken in the *last year* based on those who had taken at least one drug in that period. The figure is ranked in order of drugs *ever* used:

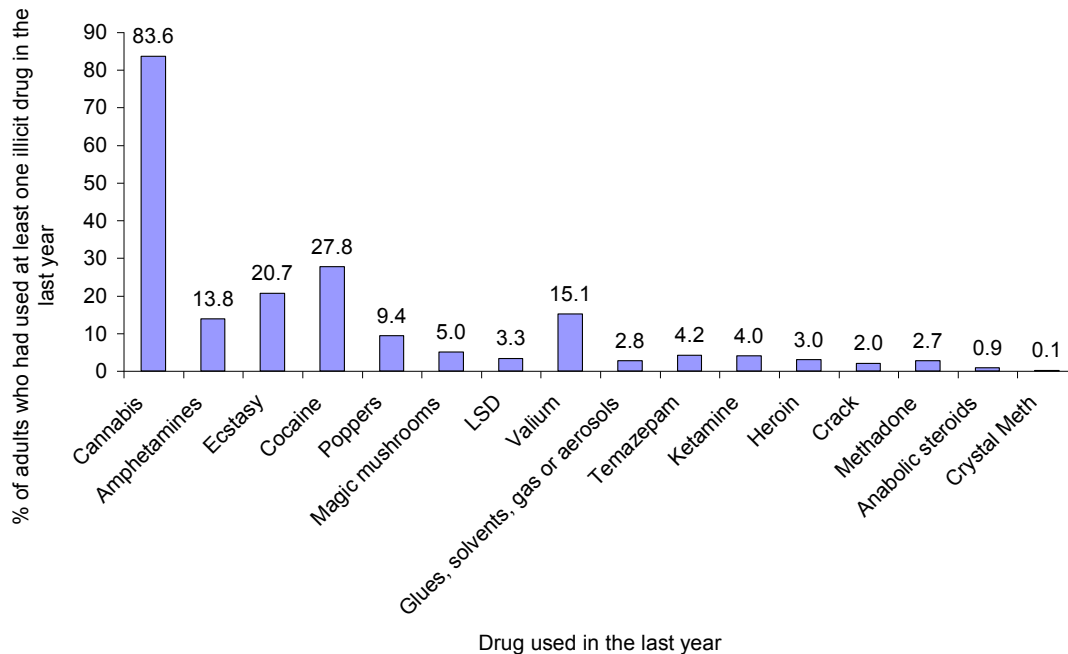
- More than eight in ten (83.6%) adults who had used any illicit drug in the *last year* had used **cannabis** in that time;
- Over two in five (41.9%) of those who had used any illicit drug in the *last year* had used a **stimulant** in that time period. This included 27.8% who had taken **cocaine** in the *last year*, 20.7% who had taken **ecstasy**, 13.8% **amphetamines**, 9.4% **poppers**, 2.0% **crack** and 0.1% who had taken **crystal meth** in the *last year*;
- Of those adults who had taken any drug in the *last year*, 16.6% had taken **downers / tranquilisers** in the *last year* including 15.1% who had taken **valium** and 4.2% who had taken **temazepam**;
- Almost one in ten (9.3%) of those who had used any illicit drug in the *last year* had used one or more **psychedelic** drug, including 5.0% who had taken **magic mushrooms**, 4.0% had taken **ketamine** and 3.3% who reported taking **LSD** in the *last year*;
- 3.9% of those who had used any illicit drug in the *last year* had taken an **opiate** in that time period. This included 3.0% who had taken **heroin** and 2.7% who had taken **methadone** illicitly in the *last year*;
- 2.8% of those using any illicit drug in the *last year* had used **glues, solvents, gas or aerosols** and 0.9% had used **anabolic steroids** in that period.

**Figure 3.1: % of adults aged 16 or over who had used each illicit drug in the last year**

SCJS 2010/11.

Base: Adults aged 16 or over who had used at least one illicit drug in the last year (574).

Variable name: Q12M.



### 3.4 Self-reported drug use in the last month

Chapter 2 identified that around one in twenty nine (3.5%) adults aged 16 or over reported using one or more illicit drug in the last month. Figure 3.2 shows use of individual drugs in the last month as a percentage of those who had used at least one drug in the last month to give a relative indication of the most commonly used drugs. The figure is ranked in order of drugs ever used:

- Almost nine in ten (87.2%) adults who had used any illicit drug in the last month reported that they had used **cannabis** in that time period;
- A third (33.4%) of those who had used any illicit drug in the last month reported **stimulant** use in that time period. This included 19.9% who had taken **cocaine** in the last month, 16.3% who had taken **ecstasy** in the last month, 11.2% **amphetamines**, 5.2% **poppers** and 1.6% **crack**;
- Of those who had taken any drug in the last month, 11.8% reported that they had taken **downers / tranquilisers** in that period including 11.0% who had taken **valium** and 3.9% who had taken **temazepam**;
- Of those who had used any illicit drug in the last month 6.2% had used a **psychedelic** drug in that period, including 3.4% who had taken **LSD**, 3.4% who had taken **magic mushrooms** and 1.9% who had taken **ketamine** in the last month;

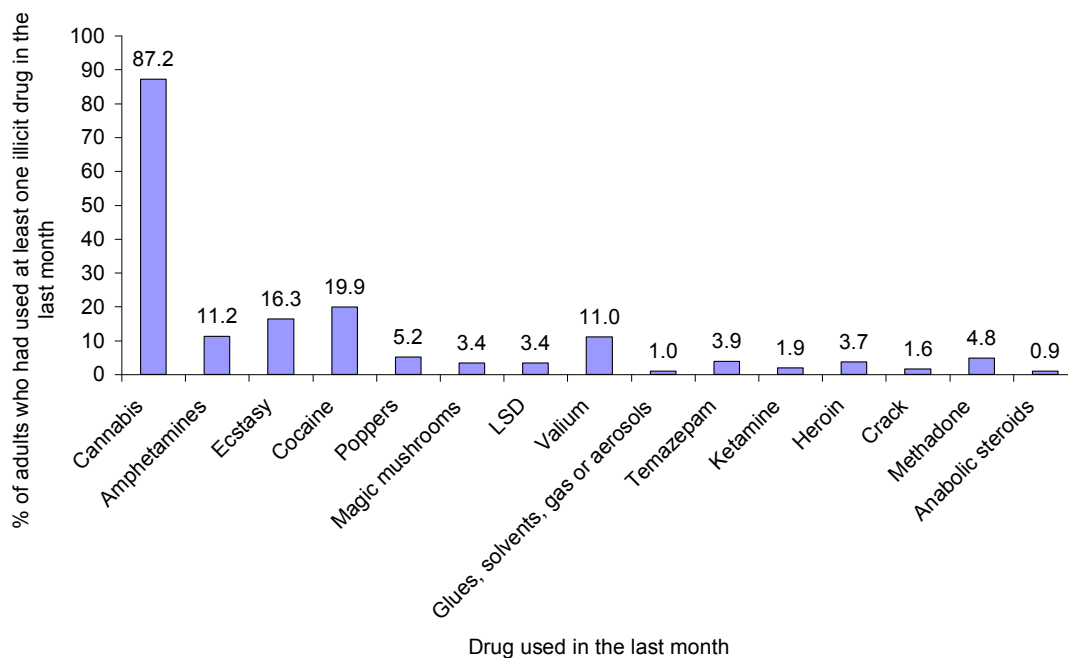
- 6.5% of those who had used any illicit drug in the *last month* had taken an **opiate** in that time period. This included 4.8% who had taken **methadone** and 3.7% who had taken **heroin** in the *last month*;
- 1.0% of those using any illicit drug in the *last month* had used **glues, solvents, gas or aerosols** and 0.9% had used **anabolic steroids** in the *last month*.

**Figure 3.2: % of adults aged 16 or over who had used each illicit drug in the last month**

SCJS 2010/11.

Base: Adults aged 16 or over who had used at least one illicit drug in the *last month* (308).

Variable name: Q1M.



### 3.5 Experience of drug use in last month

Self-reported use of illicit drugs in the *last month* provides information on drugs taken in the most recent time period covered by the SCJS 2010/11. This section looks at the single illicit drug reported as being used / used most often in the month prior to interview, the frequency with which that drug was used and adults' perception of their dependency on that drug.<sup>26</sup> The ease of obtaining the drug used *most often in the last month* and use of additional drugs (polydrug use) or alcohol alongside the most frequently used drug is also examined.

The single drug reported as being used *most often in the last month* extended across a range of drugs though cannabis was identified as the most dominant:

<sup>26</sup> Where only one drug was used in the last month this was included in the analysis that follows.

- Of those who had used any drug in the *last month*, four in five (80.2%) reported **cannabis** as the drug they had taken most often in that period;
- One in eight (12.5%) of those using drugs during the *last month* identified a **stimulant** as their most frequently used drug:
  - 6.0% reported **cocaine** as the drug they used *most often in the last month*, the highest percentage after cannabis;
  - Other **stimulants** reported as being most used in the last month included **ecstasy** (3.4%) **amphetamines** (1.1%), **poppers** (1.6%), and **crack** (0.3%). No adults reported crystal meth as the drug they used *most often in the last month*;
- Fewer adults (1.9%) used a drug from the composite group of **downers / tranquilisers** as the drug they had used *most often in the last month*:
  - A higher percentage identified **valium** (1.6%) than **temazepam** (0.3%) as the drug they took *most often in the last month*;
- 0.8% of adults reported a drug from the composite group **psychedelics** as the illicit drug used *most often in the last month*. This included **ketamine** (0.5%) and **LSD** (0.3%). No adults reported that they had used **magic mushrooms** as the drug they used *most often in the last month*;
- **Opiates** were used *most often in the last month* by 2.6% of those who had used any illicit drug in that period including **methadone** (1.6%) and **heroin** (1.0%);
- Less than one per cent of those using any illicit drug in the *last month* had used **anabolic steroids** (0.7%) or **glues, solvents, gas or aerosols** (0.2%) *most often in the last month*;
- Among Class of drugs, 12.6% of adults reporting use of any illicit drug in the *last month* reported a **Class A** drug as the drug they had used *most often in the last month*, 81.3% reported a **Class B** drug and 3.0% a **Class C** drug.

### 3.5.1 Drug used most often in last month – frequency of use

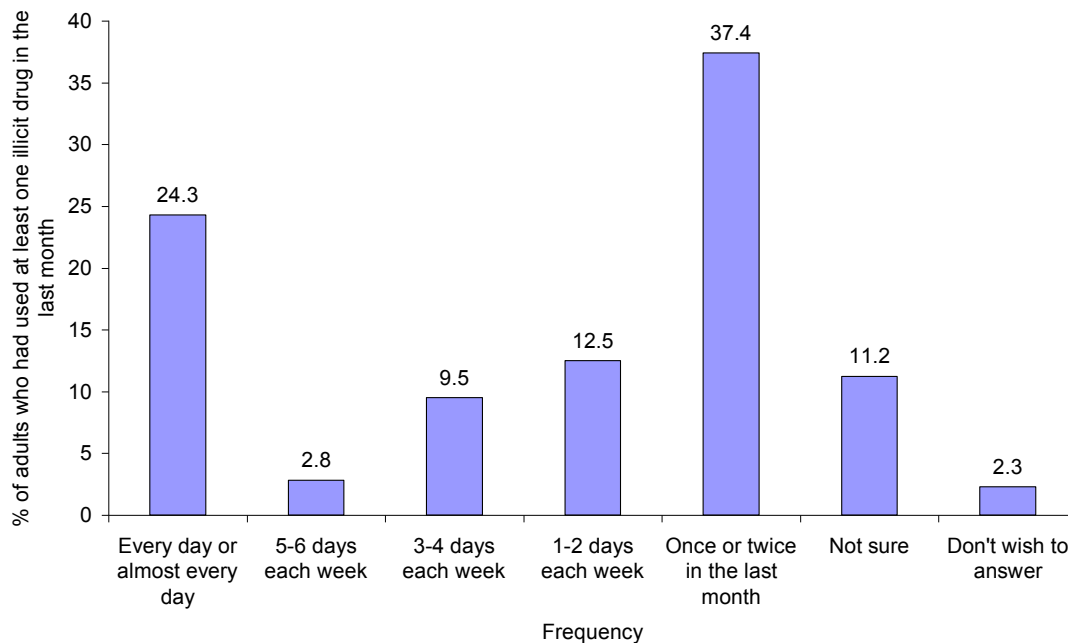
Of the 3.5% of adults who had used drugs in the *last month*, half (49.1%) had used their most frequently used drug on at least a weekly basis, including around a quarter (24.3%) who had done so every day or almost every day. Over a third (37.4%) had taken the drug they used *most often in the last month* only once or twice in that period (Figure 3.3).

**Figure 3.3: Frequency of using the drug used most often in the *last month***

SCJS 2010/11.

Base: Adults aged 16 or over who had used at least one illicit drug in the *last month* (308).

Variable name: *QDROFT*.



There was variation by socio-economic group and tenure. Adults who were **not working or long term unemployed** using drugs in the *last month* (37.1%) were significantly more likely to have taken their most frequently used drug every day or almost every day compared with the average for all adults (24.3%).

Adults living in **privately rented accommodation** using drugs in the *last month* (13.0%) were significantly less likely to have taken their most frequently used drug every day or almost every day compared with the average for all adults (24.3%).

### 3.5.2 Drug dependency

Two questions relating to dependency on the drug used most often were asked of those who had taken any illicit drug in the *last month*.<sup>27</sup>

First, those who had used at least one illicit drug in the *last month* were asked whether, in the *last month*, they had felt dependent on the drug they used

<sup>27</sup> In the discussion that follows it should be noted that the two questions were asked only of the drug the respondent had used *most often in the last month* (including the only drug taken in the last month). Where a respondent had used more than one drug in the *last month*, it is possible that they may have felt dependent or tried to cut down on another drug they had used in the *last month*. If this was the case, the percentages reported in this section would increase had data been collected on this.

most often in that period. Almost a quarter (24.4%) reported they had felt dependent on the drug they used *most often in the last month* while over seven in ten (73.7%) said they had not.<sup>28</sup>

- Almost one in five (19.6%) of those who had used at least one illicit drug in the *last month* said they felt dependent on or needed to take **cannabis** in that period;
- 0.8% of those who had used at least one illicit drug in the *last month* reported feeling dependent on any **stimulant** drug in that period. This included 0.4% on **amphetamine** and 0.4% reporting that they felt dependent on **cocaine** in the *last month*. No adults among those who had used at least one illicit drug in the *last month* reported feeling dependent on **ecstasy**, **crack** or **poppers** in that period;
- 1.3% of those who had used at least one illicit drug in the *last month* reported feeling dependent on any **downer / tranquiliser** in that period, including 1.1% saying they felt dependent on **valium** and 0.2% on **temazepam** in the *last month*;
- No adults among those who had used at least one illicit drug in the *last month* reported feeling dependent on any of the **psychedelic** drugs in that period;
- 2.4% of those who had used at least one illicit drug in the *last month* reported feeling dependent on any **opiate** in that period including 1.5% saying they felt dependent on **methadone** and 0.9% on **heroin** in the *last month*;
- 0.4% of those who had used at least one illicit drug in the *last month* reported feeling dependent on **anabolic steroids**. No adults who had said they had felt dependent on **glues, solvents, gas or aerosols** in that period.

Those who had used at least one illicit drug in the *last month* were also asked whether in the *last month* they had tried to cut down on the drug they used most often in that period, but found they could not. Three in ten (29.7%) said they had tried to cut down on their use of the drug they used *most often in the last month*, but found they could not, while over two thirds (67.3%) said they had not tried to cut down.

- More than one in five (23.5%) of those using at least one illicit drug in the *last month* reported that they had tried to cut down on their **cannabis** intake in the last month, but found that they could not;

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<sup>28</sup> As the percentages shown are based on all those using illicit drugs in the *last month*, the relative size of results for individual drugs reflect the relative size of drug use overall, including the dominance of cannabis.

- One in thirty one (3.2%) of those taking drugs in the *last month* had tried to cut down on any **stimulant** drug in that period including 1.4% who had tried but found they could not cut down on their **cocaine** use, 0.8% their **amphetamine** use, 0.6% their **ecstasy** use and 0.3% their use of **crack**. No adults reported that they had tried but were unable to cut down on their use of **poppers**;
- Of those using at least one illicit drug in the *last month*, 0.7% said they had tried but found they could not cut down on **downers / tranquilisers** including 0.5% who had tried and were unable to cut down on **valium** and 0.2% on **temazepam** in the *last month*;
- No adults among those who had used at least one illicit drug in the *last month* said they had tried to cut down on their use of any **psychedelic** drug but found they could not in that period;
- Among those who had used at least one illicit drug in the *last month* 1.8% said they had tried to cut down on their use of any **opiate** but had not been able to. This included 0.9% who had tried and found they could not cut down on **heroin** and 0.8% on **methadone**;
- 0.5% of those who had used at least one illicit drug in the *last month* said they had tried to cut down on their use of **anabolic steroids**. No adults reported that they had tried to cut down on **glues, solvents, gas or aerosols** and were not able to in that period.

As well as analysing the two questions separately, the percentage saying yes to either question, and to both, was also investigated. This showed that just over four in ten (41.4%) of those who had taken at least one illicit drug in the *last month* had, in that period, either felt dependent on the drug they used *most often in the last month* and / or had tried and found they were unable to cut down on it. Around one in eight (12.7%) adults who had used an illicit drug in the *last month* had, in that period, felt dependent on the drug they used *most often in the last month* and had tried to and found they could not cut down on it.

### 3.5.3 Ease of obtaining drugs in the last month

Those who reported taking any drug in the *last month* were asked how difficult it was for them to get hold of the drug they had used *most often in the last month*.

Of those adults who had used any drug in the *last month*, the majority (78.5%) reported that it was easy to get hold of the drug they had used *most often in the last month*, including 39.2% who said it was very easy (Figure 3.4).

Figure 3.4 displays how difficult it was for those using at least one illicit drug in the *last month* to obtain the drug they used most often in that period over time.

- In the SCJS 2010/11, 78.5% of those using at least one illicit drug in the *last month* reported that it was fairly or very easy to get hold of the drug they reported using most often in that period. This percentage has

fallen when compared to the SCJS 2009/10 (83.4%) and the SCJS 2008/09 (87.6%):

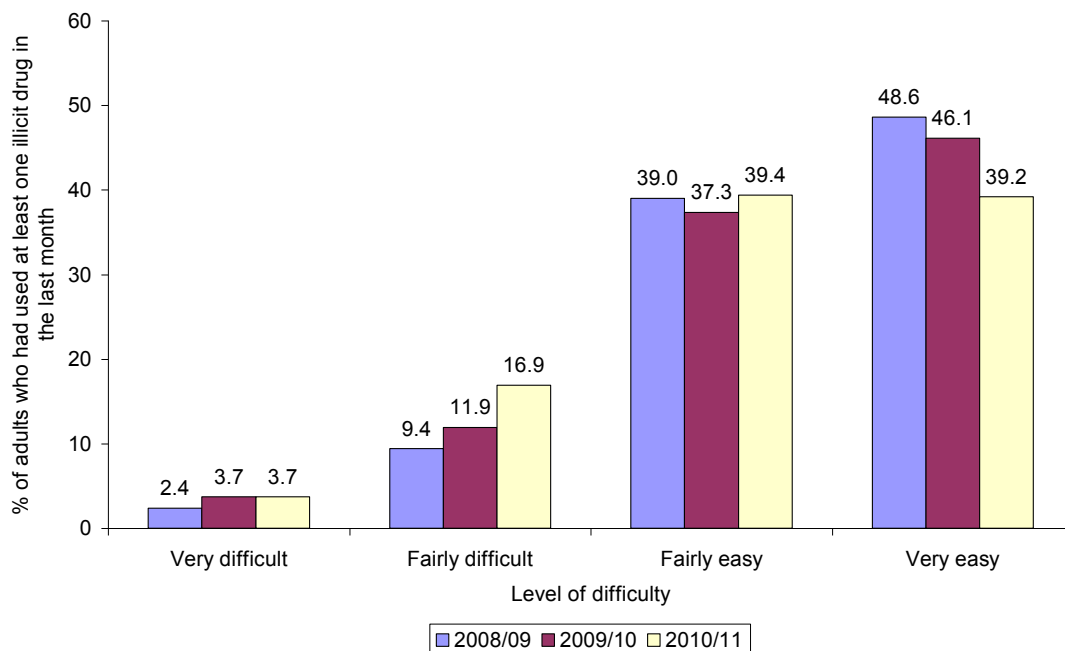
- Fewer respondents reported that it was very easy to obtain the drug they used *most often in the last month* in 2010/11 (39.2%) compared to in 2008/09 and 2009/10 (48.6% and 46.1% respectively);
- In the SCJS 2010/11, one in five (20.6%) of those using at least one drug in the *last month* said it was very or fairly difficult to get hold of the drug they used most often in that period, compared with 15.6% in the SCJS 2009/10 and 11.8% in the SCJS 2008/09:
  - A similar percentage said it was very difficult to obtain the drug they used *most often in the last month* in the SCJS 2010/11 (3.7%) compared with the SCJS 2009/10 (3.7%) and the SCJS 2008/09 (2.4%).

**Figure 3.4: Ease of getting hold of drug used most often in the last month**

SCJS 2008/09; SCJS 2009/10; SCJS 2010/11.

Base: Adults aged 16 or over who had used as least one illicit drug in the *last month* (2008/09 384; 2009/10 436; 2010/11 308).

Variable name: *QDRHOLD*.



### 3.5.4 Polydrug use

Polydrug use is the use of more than one drug at the same time, often with the intention of enhancing or countering the effect of another drug. Polydrug use is distinct from multiple drug use, where users may be taking more than one type of drug over a particular period (Brown and Bolling, 2007). Polydrug use is a particular concern because of the increased risk to both mental and



physical wellbeing, including the risk of overdose due to the interactions between drugs, as well as the use of unfamiliar drugs (Hoare, 2010).

Respondents who had used at least one illicit drug in the *last month* (3.5% of adults) were asked if they had *ever* used another drug when they were under the influence of the drug they had used *most often in the last month*:

- Over a third (34.3%) of these adults reported some kind of polydrug use.

Over seven in ten (73.0%) of those who had *ever* mixed the drug they used *most often in the last month* with any other drug, had mixed other drugs with **cannabis**, reflecting the predominance of cannabis as the drug used *most often in the last month* (section 3.4). Almost a third (31.3%) of those who had used cannabis *most often in the last month* had mixed it with one or more other drugs.

The drugs that these adults said they had *ever* mixed with the drug they took *most often in the last month* are shown in Figure 3.5. This shows that:

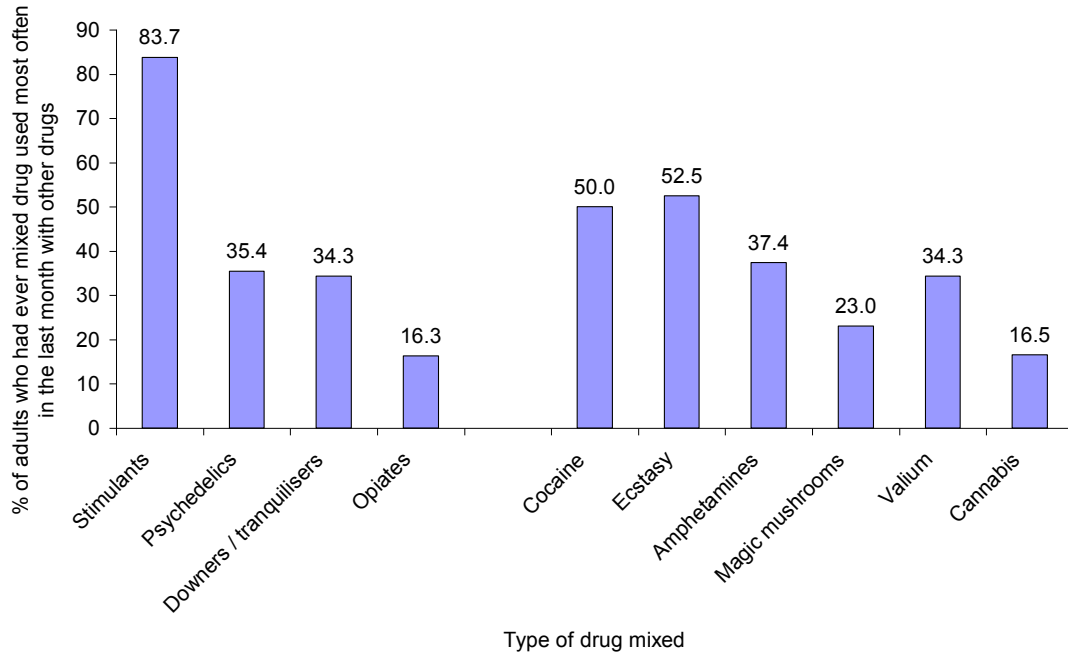
- The types of drugs these adults were most likely to have *ever* mixed with the drug they used *most often in the last month* were **stimulants** (83.7%), in particular **ecstasy** (52.5%), **cocaine** (50.0%) or **amphetamines** (37.4%);
- Three in ten of those adults reporting polydrug use (35.4%) had *ever* mixed the drug they had used *most often in the last month* with **psychedelics**, principally with **magic mushrooms** (23.0%);
- Three in ten (34.3%) had *ever* mixed the drug they had used *most often in the last month* with **downers / tranquilisers**, principally with **valium** (34.3%);
- One in six (16.5%) adults reporting polydrug use reported that they had *ever* mixed the drug they had used *most often in the last month* with **cannabis**.

**Figure 3.5: Drugs ever mixed with drug used *most often in the last month* – most often mixed drugs** <sup>29</sup>

SCJS 2010/11.

Base: Adults aged 16 or over who had ever mixed the drug used *most often in the last month* with other drugs (117).

Variable name: QDRWHIC.



### 3.5.5 Mixing alcohol with the drug used most often in the last month

Of the 3.5% of adults who had used at least one illicit drug in the *last month*, the majority (84.6%) also reported drinking alcohol *at some point in their lives* while under the influence of the drug they had used *most often in the last month*. This compares with 34.3% who reported *ever* mixing the drug they had used *most often in the last month* with other drugs as seen in section 3.5.4 (Figure 3.6).

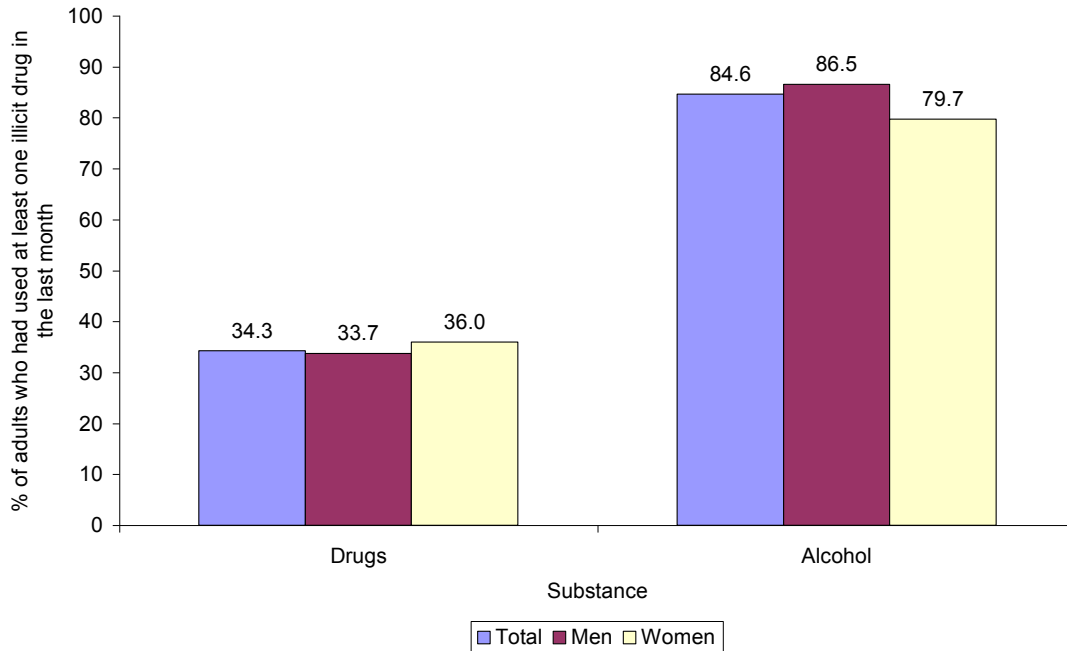
<sup>29</sup> All other drugs were mentioned by fewer than 20% of adults who had ever mixed any drug with the drug they used *most often in the last month*, and are not shown in Figure 3.5.

**Figure 3.6: % ever mixing drug used most often in the last month with other drugs or alcohol by gender**

SCJS 2010/11.

Base: Adults aged 16 or over who had used at least one illicit drug in the *last month* (308).

Variable name: *QDRMIX*; *QDRALC*.



### 3.6 Experience of drug use ever

Having examined drug use in the last year and in the last month, this chapter concludes by considering aspects of drug taking among those adults who reported using drugs *at some point in their lives*. This includes the age at which they took their first drug, the drug they first used and the method(s) of drug taking they had *ever* tried.

#### 3.6.1 Age at which drugs were first taken

All adults who reported that they had *ever* used one or more illicit drug were asked at what age they first took drugs (Figure 3.7).

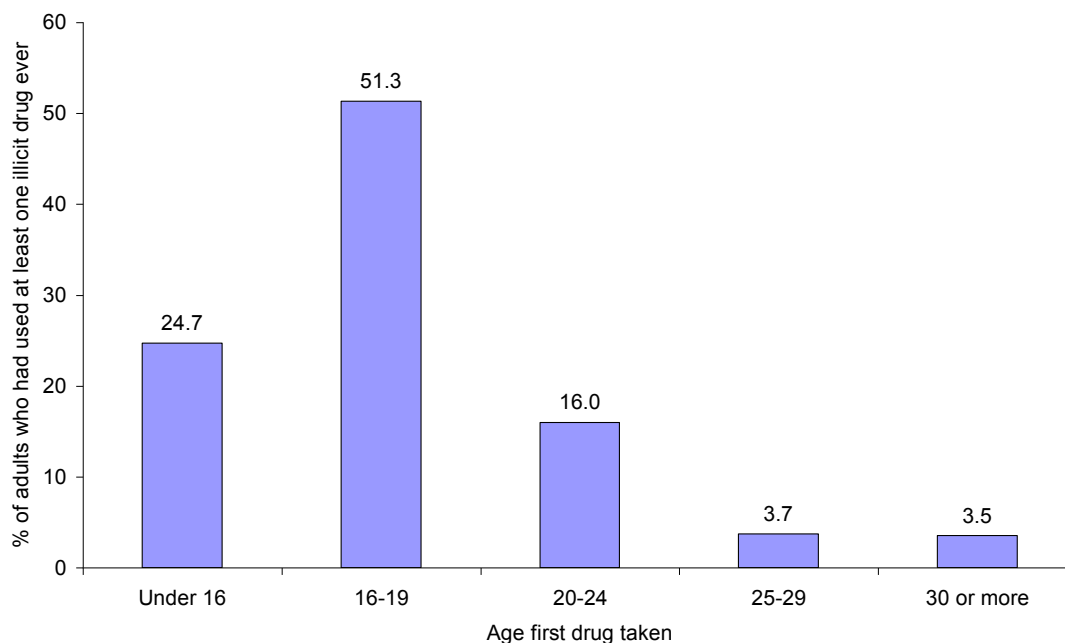
- Late teens (16-19 years) was the most common age for first trying drugs, with over half (51.3%) of those who had used drugs *at some point in their lives* first trying them at this age;
- Of those adults who had used drugs *at some point in their lives*, a quarter (24.7%) reported that they had first tried them when they were under 16.

**Figure 3.7: Age at which drugs were first taken**

SCJS 2010/11.

Base: Adults aged 16 or over who had ever used at least one illicit drug (2,350).

Variable name: QDRAGE.



- **Men** who had ever used any drug were significantly more likely to have first tried any drug when they were under 16 (27.0%) compared with women (21.4%);
- Those who had ever used any drug who were living in **social rented accommodation** at the time of the survey interview (36.0%) were significantly more likely to have first tried any drug when they were under 16 compared with those living in **private rented accommodation** (23.1%) and **owner-occupiers** (19.8%);
- Adults who had ever used drugs living in the **15% most deprived areas** of Scotland were significantly more likely to have first tried any drug when they were under 16 (37.9% compared with 22.2% of those living in the rest of Scotland);
- Adults who were **not working or who were long term unemployed** at the time of the survey interview were significantly more likely to have first tried any drug when they were under 16 (30.9%) compared to the average for all adults (24.7%).

**3.6.2 First drug ever used**

Respondents who had ever used one or more illicit drug were also asked to indicate the drug they first took. Their responses are shown below in Figure 3.8, which is ranked in order of the drugs most commonly used ever.

- More than three quarters (78.3%) of adults who had ever used any illicit drug reported that **cannabis** was the first drug that they tried;

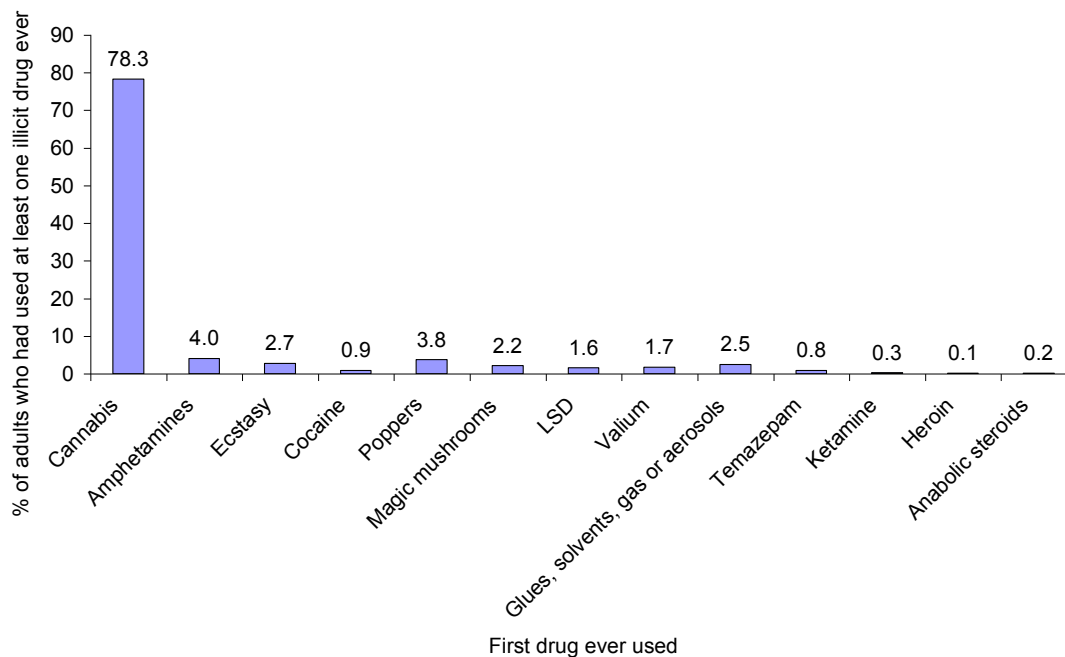
- Over one in ten (11.4%) of those who had *ever* taken any illicit drug reported first taking any **stimulant** with 4.0% first taking **amphetamines**, 3.8% mentioning **poppers**, 2.7% **ecstasy** and 0.9% **cocaine**;
- 4.1% of those using illicit drugs *ever* had first used a **psychedelic** drug including **magic mushrooms** (2.2%), **LSD** (1.6%) and **ketamine** (0.3%);
- 2.5% of those who had *ever* taken any illicit drug reported first taking **downers / tranquilisers** including 1.7% first taking **valium** and 0.8% first taking **temazepam**;
- 2.5% of those who had *ever* taken any illicit drug had first taken **glues, solvents, gas or aerosols**;
- 0.2% of those who had *ever* taken any illicit drug reported first taking an **opiate**, including 0.1% who reported first taking **heroin**.

**Figure 3.8: First drug ever used** <sup>30</sup>

SCJS 2010/11.

Base: Adults aged 16 or over who had *ever* used at least one illicit drug (2,350).

Variable name: QDR1ST.



The dominance of cannabis as the first drug used was maintained regardless of the age at which an adult took their first drug.

<sup>30</sup> Less than 0.05% of those who had *ever* used at least one illicit drug reported crack, methadone or crystal meth as the first drug they used and this is not shown in Figure 3.8.

The percentage of adults taking some other drugs first varied depending on the age at which they were first taken:

- For adults who took their first drug when they were under 16, a higher percentage reported that the first drug they used was **glues, solvents, gas or aerosols** among both men (9.9% compared with 3.0% of men who had *ever* taken any drug on average) and women (7.6% compared with 1.7% of women who had *ever* taken any drug on average). This suggests that illicit drugs are possibly less available to those under the age of 16 meaning that they are more likely to try substances more readily available to them;
- For adults, who reported first using drugs when they were 25 and over, a higher percentage reported that the first illicit drug that they took was a **downer / tranquiliser** (12.7% compared with 2.5% of all adults):
  - Among women who took their first drug aged 25 or over, 16.3% said the first drug they took was **valium** compared with 3.3% of all women who had *ever* taken any drug whose first drug taken was valium;

### 3.6.3 Methods of taking drugs ever tried

Of those adults who reported that they had used illicit drugs *at some point in their lives*, the majority (90.3%), said that they had taken them by smoking, sniffing or inhaling them.

However, two in five (40.2%) adults also reported that they had tried swallowing, eating or drinking drugs.

Just 1.8% of adults, aged 16 and over, who had used drugs *at some point in their lives* reported that they had injected them.<sup>31</sup>

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<sup>31</sup> 45 respondents said they had *ever* injected drugs and, as a result, further information about their characteristics or drug use is not provided as the SCJS 2010/11 follows accepted practice in social surveys of not reporting variables with a base size below 50.

## References

- Best, D., Rome, A., Hanning, K. A., White, W., Gossop, M., Taylor, A. & Perkins, A. (2010); *Research for Recovery: A Review of the Drugs Evidence Base*. Edinburgh: Scottish Government.
- Black, C., Eunson, J., Sewel, K. & Murray, L. (2011); *Scottish Schools Adolescent Lifestyle and Substance Use survey (SALSUS) 2010 National Report*. NHS Scotland.
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- Hoare, J. & Moon, D. (Eds) (2010); *Drug Misuse Declared: Findings from the 2009/10 British Crime Survey*. London: the Home Office.
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## Annex 1: 2010/11 Data Tables

The following data tables provide data for some of the key measures of illicit drugs use. Notes on how to read and interpret these tables follow.

### **Notes:**

1. The classifications of drugs used in this report are detailed in section 1.4. However, there are two points of clarification which readers should note which are given in section A2.4.
2. Base figures are shown in the bottom row of Annex 1 tables.
3. The definition of time periods shown are:
  - a. *Ever*: at any time in an individual's life;
  - b. In the *last year*: in the 12 months prior to interview;
  - c. In the *last month*: in the month prior to interview.
4. 'Any drugs' refers to any of the drugs listed separately in the tables. 'Class' refers to the legal classification of drugs. Composite drug groups include:
  - a. Any stimulants: cocaine, crack, crystal meth, ecstasy, amphetamines and poppers;
  - b. Any opiates: heroin and methadone;
  - c. Any psychedelics: LSD, magic mushrooms and ketamine;
  - d. Any downers / tranquilisers: temazepam and valium;
  - e. Any new drugs: BZP, GBL, khat, mephedrone and synthetic cannabinoids.

### **Table abbreviations**

' - ' indicates that no respondents gave an answer in the category.

' \* ' indicates an answer of less than 0.05%.



**Data tables contents:**

- A1.1: % of adults aged 16 or over who reported having *ever* used illicit drugs, used illicit drugs in the *last year*, and used illicit drugs in the *last month*
- A1.2: % of adults aged 16 or over who reported having *ever* used illicit drugs / using illicit drugs in the last 12 months: 2008/09 vs. 2009/10 vs. 2010/11
- A1.3: % of adults aged 16 or over who reported having *ever* used illicit drugs, used illicit drugs in the *last year*, and used illicit drugs in the *last month* by gender
- A1.4: % of adults aged 16 or over who reported having *ever* used illicit drugs by age group
- A1.5: % of adults aged 16 or over who reported having used illicit drugs in the *last year* by age group
- A1.6: % of adults aged 16 or over who reported having used illicit drugs in the *last month* by age group
- A1.7: % of men aged 16 or over who reported having *ever* used illicit drugs by age group
- A1.8: % of men aged 16 or over who reported having used illicit drugs in the *last year* by age group
- A1.9: % of men aged 16 or over who reported having used illicit drugs in the *last month* by age group
- A1.10: % of women aged 16 or over who reported having *ever* used illicit drugs by age group
- A1.11: % of women aged 16 or over who reported having used illicit drugs in the *last year* by age group
- A1.12: % of women aged 16 or over who reported having used illicit drugs in the *last month* by age group
- A1.13: Type of drug first taken and age at which first taken among men who reported *ever* using illicit drugs
- A1.14: Type of drug first taken and age at which first taken among women who reported *ever* using illicit drugs
- A1.15: % of men aged 16 or over who reported having been offered drugs in the *last year* by age group
- A1.16: % of women aged 16 or over who reported having been offered drugs in the *last year* by age group
- A1.17: Polydrug and drug and alcohol use *ever* among those using illicit drugs in *last month*

**Table A1.1: % of adults aged 16 or over who reported having ever used illicit drugs, used illicit drugs in the *last year*, and used illicit drugs in the *last month***Source: SCJS 2010/11. Variable name: *QEVE, Q12M, Q1M*.

	Ever %	In last year %	In last month %
<b>CLASS A</b>	<b>11.7</b>	<b>2.6</b>	<b>1.2</b>
Cocaine	7.1	1.9	0.7
Crack	0.8	0.1	0.1
Ecstasy	7.2	1.4	0.6
Heroin	0.8	0.2	0.1
Methadone	0.7	0.2	0.2
LSD	4.9	0.2	0.1
Magic mushrooms	5.2	0.3	0.1
<b>CLASS B</b>	<b>22.2</b>	<b>5.7</b>	<b>3.0</b>
Amphetamines	7.8	0.9	0.4
Crystal Meth	0.3	*	-
Cannabis	21.6	5.6	3.0
<b>CLASS C</b>	<b>5.2</b>	<b>1.2</b>	<b>0.5</b>
Anabolic steroids	0.3	0.1	*
Ketamine	1.2	0.3	0.1
Temazepam	2.0	0.3	0.1
Valium	3.9	1.0	0.4
<b>NOT CLASSIFIED</b>			
Glues/solvents/gas/aerosols	2.2	0.2	*
Poppers	6.4	0.6	0.2
<b>NEW DRUGS</b>	<b>1.8</b>	<b>0.7</b>	<b>0.2</b>
BZP	0.1	-	-
GBL	0.2	*	-
Khat	0.2	0.1	*
Mephedrone	1.2	0.7	0.2
Synthetic cannabinoids	0.4	*	*
<b>ANY STIMULANTS</b>	<b>12.5</b>	<b>2.8</b>	<b>1.2</b>
<b>ANY OPIATES</b>	<b>1.0</b>	<b>0.3</b>	<b>0.2</b>
<b>ANY PSYCHEDELICS</b>	<b>7.5</b>	<b>0.6</b>	<b>0.2</b>
<b>ANY DOWNERS / TRANQUILISERS</b>	<b>4.6</b>	<b>1.1</b>	<b>0.4</b>
<b>ANY DRUGS</b>	<b>23.7</b>	<b>6.7</b>	<b>3.5</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>23.7</b>	<b>6.6</b>	<b>3.5</b>
<i>Base:</i>	<i>10,977</i>	<i>10,977</i>	<i>10,977</i>

**Table A1.2: % of adults aged 16 or over who reported having ever used illicit drugs / using illicit drugs in the last year: 2008/09 vs. 2009/10 vs. 2010/11**

Source: SCJS 2008/09, 2009/10, 2010/11. Variable name: QEVE, Q12M

	Ever			In last year		
	2008/09 %	2009/10 %	2010/11	2008/09 %	2009/10 %	2010/11 %
<b>CLASS A</b>	<b>11.7</b>	<b>11.7</b>	<b>11.7</b>	<b>3.4</b>	<b>3.0</b>	<b>2.6</b>
Cocaine	6.6	6.7	7.1	2.7	2.1	1.9
Crack	0.7	0.7	0.8	0.2	0.1	0.1
Ecstasy	7.2	7.4	7.2	1.8	1.9	1.4
Heroin	0.9	0.9	0.8	0.2	0.3	0.2
Methadone	0.6	0.6	0.7	0.2	0.3	0.2
LSD	4.9	4.6	4.9	0.4	0.2	0.2
Magic mushrooms	5.5	5.3	5.2	0.3	0.3	0.3
<b>CLASS B</b>	<b>23.6</b>	<b>23.5</b>	<b>22.2</b>	<b>6.4</b>	<b>6.2</b>	<b>5.7</b>
Amphetamines	7.5	7.6	7.8	1.0	0.9	0.9
Crystal Meth	0.2	0.2	0.3	*	*	*
Cannabis	22.9	22.9	21.6	6.2	6.1	5.6
<b>CLASS C</b>	<b>5.7</b>	<b>4.8</b>	<b>5.2</b>	<b>1.3</b>	<b>1.3</b>	<b>1.2</b>
Anabolic steroids	0.5	0.4	0.3	0.1	*	0.1
Ketamine	1.2	1.3	1.2	0.2	0.3	0.3
Temazepam	2.5	2.1	2.0	0.4	0.4	0.3
Valium	4.2	3.4	3.9	1.1	0.9	1.0
<b>NOT CLASSIFIED</b>						
Glues/solvents/gas/aerosols	2.3	2.0	2.2	0.1	0.1	0.2
Poppers	6.5	6.6	6.4	1.0	0.9	0.6
<b>ANY STIMULANTS</b>	<b>12.6</b>	<b>12.7</b>	<b>12.5</b>	<b>3.9</b>	<b>3.3</b>	<b>2.8</b>
<b>ANY OPIATES</b>	<b>1.1</b>	<b>1.0</b>	<b>1.0</b>	<b>0.3</b>	<b>0.4</b>	<b>0.3</b>
<b>ANY PSYCHEDELICS</b>	<b>7.7</b>	<b>7.6</b>	<b>7.5</b>	<b>0.7</b>	<b>0.7</b>	<b>0.6</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>5.0</b>	<b>4.1</b>	<b>4.6</b>	<b>1.2</b>	<b>1.0</b>	<b>1.1</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>25.6</b>	<b>25.2</b>	<b>23.7</b>	<b>7.6</b>	<b>7.2</b>	<b>6.6</b>
<i>Base</i>	<i>10,962</i>	<i>13,409</i>	<i>10,977</i>	<i>10,962</i>	<i>13,409</i>	<i>10,977</i>

**Table A1.3: % of adults aged 16 or over who reported having ever used illicit drugs, used illicit drugs in the *last year*, and used illicit drugs in the *last month* by gender**

Source: SCJS 2010/11. Variable name: QEVE, Q12M, Q1M.

	Ever used		In last year		In last month	
	Men %	Women %	Men %	Women %	Men %	Women %
<b>CLASS A</b>	<b>15.9</b>	<b>7.9</b>	<b>3.9</b>	<b>1.3</b>	<b>1.8</b>	<b>0.6</b>
Cocaine	9.7	4.7	2.7	1.1	1.1	0.3
Crack	1.1	0.4	0.1	0.1	*	0.1
Ecstasy	10.1	4.6	2.3	0.6	0.9	0.2
Heroin	1.2	0.5	0.2	0.2	0.1	0.1
Methadone	1.1	0.4	0.2	0.2	0.2	0.1
LSD	7.5	2.6	0.4	*	0.2	-
Magic mushrooms	7.8	2.8	0.4	0.2	0.2	*
<b>CLASS B</b>	<b>27.7</b>	<b>17.2</b>	<b>8.3</b>	<b>3.4</b>	<b>4.6</b>	<b>1.6</b>
Amphetamines	10.3	5.5	1.4	0.5	0.6	0.1
Crystal Meth	0.4	0.2	*	-	-	-
Cannabis	27.0	16.6	8.2	3.3	4.6	1.6
<b>CLASS C</b>	<b>7.0</b>	<b>3.6</b>	<b>1.7</b>	<b>0.9</b>	<b>0.6</b>	<b>0.3</b>
Anabolic steroids	0.6	0.1	0.1	*	0.1	*
Ketamine	1.8	0.7	0.3	0.3	0.1	-
Temazepam	2.9	1.2	0.4	0.2	0.2	0.1
Valium	5.2	2.8	1.4	0.6	0.5	0.3
<b>NOT CLASSIFIED</b>						
Glues/solvents/gas/aerosols	3.4	1.1	0.3	0.1	0.1	-
Poppers	9.0	4.1	1.0	0.3	0.3	0.1
<b>NEW DRUGS</b>	<b>2.6</b>	<b>1.0</b>	<b>1.0</b>	<b>0.5</b>	<b>0.2</b>	<b>0.2</b>
BZP	0.2	0.1	-	-	-	-
GBL	0.3	0.1	-	*	-	-
Khat	0.4	0.1	0.1	*	-	*
Mephedrone	1.6	0.8	0.9	0.4	0.2	0.2
Synthetic cannabinoids	0.6	0.3	0.1	*	*	-
<b>ANY STIMULANTS</b>	<b>16.3</b>	<b>9.0</b>	<b>4.1</b>	<b>1.6</b>	<b>1.8</b>	<b>0.6</b>
<b>ANY OPIATES</b>	<b>1.5</b>	<b>0.6</b>	<b>0.3</b>	<b>0.2</b>	<b>0.3</b>	<b>0.2</b>
<b>ANY PSYCHEDELICS</b>	<b>10.9</b>	<b>4.4</b>	<b>0.9</b>	<b>0.4</b>	<b>0.4</b>	<b>*</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>6.2</b>	<b>3.2</b>	<b>1.6</b>	<b>0.7</b>	<b>0.5</b>	<b>0.3</b>
<b>ANY DRUGS</b>	<b>29.2</b>	<b>18.7</b>	<b>9.8</b>	<b>3.9</b>	<b>5.3</b>	<b>1.8</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>29.1</b>	<b>18.7</b>	<b>9.5</b>	<b>3.9</b>	<b>5.3</b>	<b>1.8</b>
<i>Base</i>	4,728	6,249	4,728	6,249	4,728	6,249

**Table A1.4: % of adults aged 16 or over who reported having ever used illicit drugs by age group**Source: SCJS 2010/11. Variable name: *QEVE*.

	All ages %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>11.7</b>	<b>19.0</b>	<b>21.0</b>	<b>7.9</b>	<b>0.7</b>
Cocaine	7.1	12.9	13.1	3.8	0.1
Crack	0.8	1.5	1.4	0.3	-
Ecstasy	7.2	14.6	14.0	2.2	0.1
Heroin	0.8	0.7	1.6	0.7	0.1
Methadone	0.7	1.1	1.4	0.5	*
LSD	4.9	3.9	9.6	4.7	0.4
Magic mushrooms	5.2	5.4	9.5	4.9	0.4
<b>CLASS B</b>	<b>22.2</b>	<b>35.3</b>	<b>36.3</b>	<b>17.9</b>	<b>3.1</b>
Amphetamines	7.8	9.9	14.9	5.8	0.3
Crystal Meth	0.3	0.4	0.5	0.2	0.1
Cannabis	21.6	34.7	34.9	17.5	3.1
<b>CLASS C</b>	<b>5.2</b>	<b>9.3</b>	<b>8.8</b>	<b>3.5</b>	<b>0.7</b>
Anabolic steroids	0.3	0.6	0.5	0.3	*
Ketamine	1.2	3.4	2.0	0.3	*
Temazepam	2.0	2.1	4.1	1.6	*
Valium	3.9	7.1	6.6	2.5	0.6
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	2.2	3.4	4.1	1.3	0.2
Poppers	6.4	13.1	11.6	3.0	0.2
<b>NEW DRUGS</b>	<b>1.8</b>	<b>6.0</b>	<b>2.3</b>	<b>0.6</b>	<b>0.1</b>
BZP	0.1	0.2	0.3	0.1	-
GBL	0.2	0.3	0.4	0.1	-
Khat	0.2	0.5	0.3	0.2	0.1
Mephedrone	1.2	5.5	1.2	0.1	-
Synthetic cannabinoids	0.4	1.2	0.7	0.2	*
<b>ANY STIMULANTS</b>	<b>12.5</b>	<b>21.2</b>	<b>22.9</b>	<b>7.6</b>	<b>0.6</b>
<b>ANY OPIATES</b>	<b>1.0</b>	<b>1.4</b>	<b>1.8</b>	<b>0.9</b>	<b>0.1</b>
<b>ANY PSYCHEDELICS</b>	<b>7.5</b>	<b>9.0</b>	<b>13.6</b>	<b>6.5</b>	<b>0.6</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>4.6</b>	<b>8.0</b>	<b>7.8</b>	<b>3.1</b>	<b>0.6</b>
<b>ANY DRUGS</b>	<b>23.7</b>	<b>37.2</b>	<b>38.2</b>	<b>19.7</b>	<b>3.8</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>23.7</b>	<b>37.2</b>	<b>38.1</b>	<b>19.5</b>	<b>3.7</b>
<i>Base</i>	<i>10,977</i>	<i>968</i>	<i>3,298</i>	<i>2,916</i>	<i>3,793</i>

**Table A1.5: % of adults aged 16 or over who reported having used illicit drugs in the *last year* by age group**

Source: SCJS 2010/11. Variable name: Q12M.

	All adults %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>2.6</b>	<b>7.9</b>	<b>3.9</b>	<b>0.7</b>	-
Cocaine	1.9	5.8	3.0	0.3	-
Crack	0.1	-	0.4	*	-
Ecstasy	1.4	5.0	1.9	0.2	-
Heroin	0.2	0.3	0.4	0.1	-
Methadone	0.2	*	0.5	0.1	-
LSD	0.2	0.5	0.4	0.1	-
Magic mushrooms	0.3	1.0	0.5	0.1	-
<b>CLASS B</b>	<b>5.7</b>	<b>18.6</b>	<b>7.6</b>	<b>2.2</b>	<b>0.1</b>
Amphetamines	0.9	3.8	1.0	0.2	-
Crystal Meth	*	-	*	-	-
Cannabis	5.6	18.4	7.4	2.1	0.1
<b>CLASS C</b>	<b>1.2</b>	<b>4.3</b>	<b>1.6</b>	<b>0.4</b>	-
Anabolic steroids	0.1	0.2	0.1	-	-
Ketamine	0.3	1.4	0.2	-	-
Temazepam	0.3	0.5	0.5	0.2	-
Valium	1.0	3.6	1.2	0.3	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.2	0.7	0.2	*	-
Poppers	0.6	2.4	0.8	-	0.1
<b>NEW DRUGS</b>	<b>0.7</b>	<b>3.9</b>	<b>0.5</b>	<b>0.1</b>	-
BZP	-	-	-	-	-
GBL	*	*	-	-	-
Khat	0.1	0.4	*	-	-
Mephedrone	0.7	3.6	0.4	*	-
Synthetic cannabinoids	*	0.1	*	*	-
<b>ANY STIMULANTS</b>	<b>2.8</b>	<b>8.6</b>	<b>4.3</b>	<b>0.6</b>	<b>0.1</b>
<b>ANY OPIATES</b>	<b>0.3</b>	<b>0.3</b>	<b>0.6</b>	<b>0.2</b>	-
<b>ANY PSYCHEDELICS</b>	<b>0.6</b>	<b>2.2</b>	<b>0.8</b>	<b>0.2</b>	-
<b>ANY DOWNERS / TRANQ.</b>	<b>1.1</b>	<b>3.9</b>	<b>1.4</b>	<b>0.4</b>	-
<b>ANY DRUGS</b>	<b>6.7</b>	<b>21.0</b>	<b>9.2</b>	<b>2.5</b>	<b>0.2</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>6.6</b>	<b>20.3</b>	<b>9.2</b>	<b>2.5</b>	<b>0.2</b>
<i>Base</i>	10,977	968	3,298	2,916	3,793

**Table A1.6: % of adults aged 16 or over who reported having used illicit drugs in the *last month* by age group**

Source: SCJS 2010/11. Variable name: Q1M.

	All adults %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>1.2</b>	<b>3.8</b>	<b>1.7</b>	<b>0.3</b>	-
Cocaine	0.7	2.3	1.0	0.1	-
Crack	0.1	-	0.2	-	-
Ecstasy	0.6	2.4	0.6	0.1	-
Heroin	0.1	0.2	0.3	*	-
Methadone	0.2	*	0.4	0.1	-
LSD	0.1	0.2	0.3	-	-
Magic mushrooms	0.1	0.3	0.2	-	-
<b>CLASS B</b>	<b>3.0</b>	<b>8.9</b>	<b>4.5</b>	<b>1.2</b>	<b>0.1</b>
Amphetamines	0.4	1.5	0.4	0.1	-
Crystal Meth	-	-	-	-	-
Cannabis	3.0	8.9	4.4	1.2	0.1
<b>CLASS C</b>	<b>0.5</b>	<b>1.1</b>	<b>0.9</b>	<b>0.1</b>	-
Anabolic steroids	*	0.1	*	-	-
Ketamine	0.1	0.2	0.1	-	-
Temazepam	0.1	0.1	0.3	*	-
Valium	0.4	0.9	0.7	0.1	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	*	0.1	0.1	-	-
Poppers	0.2	0.5	0.3	-	-
<b>NEW DRUGS</b>	<b>0.2</b>	<b>1.1</b>	<b>0.2</b>	-	-
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	*	0.1	-	-	-
Mephedrone	0.2	1.0	0.2	-	-
Synthetic cannabinoids	*	-	*	-	-
<b>ANY STIMULANTS</b>	<b>1.2</b>	<b>4.0</b>	<b>1.6</b>	<b>0.2</b>	-
<b>ANY OPIATES</b>	<b>0.2</b>	<b>0.2</b>	<b>0.5</b>	<b>0.1</b>	-
<b>ANY PSYCHEDELICS</b>	<b>0.2</b>	<b>0.7</b>	<b>0.4</b>	-	-
<b>ANY DOWNERS / TRANQ.</b>	<b>0.4</b>	<b>0.9</b>	<b>0.8</b>	<b>0.1</b>	-
<b>ANY DRUGS</b>	<b>3.5</b>	<b>9.8</b>	<b>5.1</b>	<b>1.4</b>	<b>0.1</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>3.5</b>	<b>9.8</b>	<b>5.1</b>	<b>1.4</b>	<b>0.1</b>
<i>Base</i>	<i>10,977</i>	<i>968</i>	<i>3,298</i>	<i>2,916</i>	<i>3,793</i>

**Table A1.7: % of men aged 16 or over who reported having ever used illicit drugs by age group**Source: SCJS 2010/11. Variable name: *QEVE*.

	<b>All men</b> %	<b>16-24</b> %	<b>25-44</b> %	<b>45-59</b> %	<b>60+</b> %
<b>CLASS A</b>	<b>15.9</b>	<b>24.0</b>	<b>26.4</b>	<b>12.3</b>	<b>1.1</b>
Cocaine	9.7	15.2	17.3	6.3	0.2
Crack	1.1	2.4	1.9	0.6	-
Ecstasy	10.1	19.6	18.1	4.1	*
Heroin	1.2	1.4	2.0	1.2	0.1
Methadone	1.1	1.9	1.7	0.9	*
LSD	7.5	6.2	13.4	7.7	0.5
Magic mushrooms	7.8	8.2	13.3	7.7	0.6
<b>CLASS B</b>	<b>27.7</b>	<b>40.2</b>	<b>42.5</b>	<b>24.2</b>	<b>4.8</b>
Amphetamines	10.3	12.9	18.0	8.7	0.4
Crystal Meth	0.4	0.7	0.6	0.4	-
Cannabis	27.0	39.4	41.2	23.6	4.8
<b>CLASS C</b>	<b>7.0</b>	<b>12.4</b>	<b>11.4</b>	<b>4.7</b>	<b>0.6</b>
Anabolic steroids	0.6	1.0	0.9	0.5	*
Ketamine	1.8	4.2	3.0	0.5	-
Temazepam	2.9	3.3	5.4	2.4	-
Valium	5.2	9.6	8.3	3.2	0.5
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	3.4	4.1	6.2	2.4	0.3
Poppers	9.0	16.1	15.7	4.7	0.4
<b>NEW DRUGS</b>	<b>2.6</b>	<b>7.8</b>	<b>3.1</b>	<b>1.2</b>	<b>0.2</b>
BZP	0.2	0.1	0.3	0.1	-
GBL	0.3	0.2	0.7	0.2	-
Khat	0.4	0.5	0.4	0.4	0.2
Mephedrone	1.6	7.4	1.4	0.1	-
Synthetic cannabinoids	0.6	1.2	1.1	0.4	*
<b>ANY STIMULANTS</b>	<b>16.3</b>	<b>25.3</b>	<b>28.2</b>	<b>11.4</b>	<b>0.8</b>
<b>ANY OPIATES</b>	<b>1.5</b>	<b>2.5</b>	<b>2.2</b>	<b>1.5</b>	<b>0.1</b>
<b>ANY PSYCHEDELICS</b>	<b>10.9</b>	<b>12.8</b>	<b>18.3</b>	<b>10.2</b>	<b>0.9</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>6.2</b>	<b>11.0</b>	<b>10.0</b>	<b>4.0</b>	<b>0.5</b>
<b>ANY DRUGS</b>	<b>29.2</b>	<b>41.6</b>	<b>44.5</b>	<b>26.0</b>	<b>5.4</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>29.1</b>	<b>41.6</b>	<b>44.4</b>	<b>25.7</b>	<b>5.4</b>
<i>Base</i>	4,728	438	1,340	1,283	1,666



**Table A1.8: % of men aged 16 or over who reported having used illicit drugs in the *last year* by age group**

Source: SCJS 2010/11. Variable name: Q12M.

	All men %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>3.9</b>	<b>10.6</b>	<b>5.9</b>	<b>1.3</b>	-
Cocaine	2.7	7.5	4.4	0.5	-
Crack	0.1	-	0.4	0.1	-
Ecstasy	2.3	8.0	2.8	0.4	-
Heroin	0.2	0.5	0.3	0.2	-
Methadone	0.2	*	0.5	0.1	-
LSD	0.4	0.7	0.8	0.1	-
Magic mushrooms	0.4	1.2	0.6	0.2	-
<b>CLASS B</b>	<b>8.3</b>	<b>24.8</b>	<b>10.8</b>	<b>3.3</b>	<b>0.2</b>
Amphetamines	1.4	5.8	1.2	0.4	-
Crystal Meth	*	-	0.1	-	-
Cannabis	8.2	24.4	10.7	3.2	0.2
<b>CLASS C</b>	<b>1.7</b>	<b>5.7</b>	<b>1.8</b>	<b>0.7</b>	-
Anabolic steroids	0.1	0.2	0.2	-	-
Ketamine	0.3	1.4	0.2	-	-
Temazepam	0.4	1.0	0.5	0.2	-
Valium	1.4	5.1	1.5	0.6	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.3	1.1	0.5	-	-
Poppers	1.0	3.0	1.4	-	0.1
<b>NEW DRUGS</b>	<b>1.0</b>	<b>5.3</b>	<b>0.6</b>	<b>0.1</b>	-
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	0.1	0.5	0.1	-	-
Mephedrone	0.9	4.9	0.5	*	-
Synthetic cannabinoids	0.1	0.1	0.1	0.1	-
<b>ANY STIMULANTS</b>	<b>4.1</b>	<b>11.4</b>	<b>6.2</b>	<b>1.0</b>	<b>0.1</b>
<b>ANY OPIATES</b>	<b>0.3</b>	<b>0.5</b>	<b>0.6</b>	<b>0.2</b>	-
<b>ANY PSYCHEDELICS</b>	<b>0.9</b>	<b>2.7</b>	<b>1.1</b>	<b>0.3</b>	-
<b>ANY DOWNERS / TRANQ.</b>	<b>1.6</b>	<b>5.7</b>	<b>1.6</b>	<b>0.7</b>	-
<b>ANY DRUGS</b>	<b>9.8</b>	<b>28.1</b>	<b>13.2</b>	<b>3.9</b>	<b>0.3</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>9.5</b>	<b>26.8</b>	<b>13.1</b>	<b>3.9</b>	<b>0.3</b>
<i>Base</i>	4,728	438	1,340	1,283	1,666

**Table A1.9: % of men aged 16 or over who reported having used illicit drugs in the *last month* by age group**

Source: SCJS 2010/11. Variable name: Q1M.

	All men %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>1.8</b>	<b>5.8</b>	<b>2.3</b>	<b>0.5</b>	-
Cocaine	1.1	3.4	1.5	0.2	-
Crack	*	-	0.1	-	-
Ecstasy	0.9	3.7	1.0	0.1	-
Heroin	0.1	0.4	0.2	*	-
Methadone	0.2	*	0.5	0.1	-
LSD	0.2	0.5	0.5	-	-
Magic mushrooms	0.2	0.6	0.3	-	-
<b>CLASS B</b>	<b>4.6</b>	<b>12.6</b>	<b>6.4</b>	<b>2.1</b>	<b>0.1</b>
Amphetamines	0.6	2.6	0.6	0.2	-
Crystal Meth	-	-	-	-	-
Cannabis	4.6	12.6	6.3	2.0	0.1
<b>CLASS C</b>	<b>0.6</b>	<b>1.4</b>	<b>1.0</b>	<b>0.2</b>	-
Anabolic steroids	0.1	0.2	0.1	-	-
Ketamine	0.1	0.5	0.2	-	-
Temazepam	0.2	0.2	0.4	0.1	-
Valium	0.5	0.9	0.9	0.1	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.1	0.2	0.1	-	-
Poppers	0.3	0.6	0.6	-	-
<b>NEW DRUGS</b>	<b>0.2</b>	<b>1.1</b>	<b>0.2</b>	-	-
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	-	-	-	-	-
Mephedrone	0.2	1.1	0.2	-	-
Synthetic cannabinoids	*	-	*	-	-
<b>ANY STIMULANTS</b>	<b>1.8</b>	<b>6.0</b>	<b>2.3</b>	<b>0.5</b>	-
<b>ANY OPIATES</b>	<b>0.3</b>	<b>0.4</b>	<b>0.6</b>	<b>0.1</b>	-
<b>ANY PSYCHEDELICS</b>	<b>0.4</b>	<b>1.3</b>	<b>0.6</b>	-	-
<b>ANY DOWNERS / TRANQ.</b>	<b>0.5</b>	<b>0.9</b>	<b>0.9</b>	<b>0.2</b>	-
<b>ANY DRUGS</b>	<b>5.3</b>	<b>14.2</b>	<b>7.3</b>	<b>2.5</b>	<b>0.1</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>5.3</b>	<b>14.2</b>	<b>7.3</b>	<b>2.5</b>	<b>0.1</b>
<i>Base</i>	4,728	438	1,340	1,283	1,666

**Table A1.10: % of women aged 16 or over who reported having ever used illicit drugs by age group**Source: SCJS 2010/11. Variable name: *QEVE*.

	All women	16-24	25-44	45-59	60+
	%	%	%	%	%
<b>CLASS A</b>	<b>7.9</b>	<b>13.8</b>	<b>15.8</b>	<b>3.8</b>	<b>0.4</b>
Cocaine	4.7	10.4	9.0	1.5	*
Crack	0.4	0.5	1.0	0.1	-
Ecstasy	4.6	9.4	10.0	0.4	0.2
Heroin	0.5	0.1	1.3	0.2	-
Methadone	0.4	0.3	1.1	0.2	-
LSD	2.6	1.4	5.9	1.8	0.3
Magic mushrooms	2.8	2.5	5.9	2.3	0.2
<b>CLASS B</b>	<b>17.2</b>	<b>30.3</b>	<b>30.3</b>	<b>12.1</b>	<b>1.8</b>
Amphetamines	5.5	6.8	11.9	3.0	0.2
Crystal Meth	0.2	*	0.4	0.1	0.1
Cannabis	16.6	29.7	28.8	11.8	1.8
<b>CLASS C</b>	<b>3.6</b>	<b>6.0</b>	<b>6.2</b>	<b>2.4</b>	<b>0.7</b>
Anabolic steroids	0.1	0.1	0.1	0.2	-
Ketamine	0.7	2.5	1.0	0.1	0.1
Temazepam	1.2	0.8	2.8	0.8	0.1
Valium	2.8	4.5	4.9	1.9	0.7
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	1.1	2.7	2.1	0.3	0.1
Poppers	4.1	9.8	7.5	1.3	0.1
<b>NEW DRUGS</b>	<b>1.0</b>	<b>4.1</b>	<b>1.4</b>	<b>*</b>	<b>-</b>
BZP	0.1	0.2	0.3	-	-
GBL	0.1	0.3	0.2	-	-
Khat	0.1	0.4	0.2	*	-
Mephedrone	0.8	3.5	0.9	-	-
Synthetic cannabinoids	0.3	1.1	0.3	-	-
<b>ANY STIMULANTS</b>	<b>9.0</b>	<b>16.9</b>	<b>17.8</b>	<b>4.0</b>	<b>0.4</b>
<b>ANY OPIATES</b>	<b>0.6</b>	<b>0.3</b>	<b>1.5</b>	<b>0.3</b>	<b>-</b>
<b>ANY PSYCHEDELICS</b>	<b>4.4</b>	<b>5.1</b>	<b>9.1</b>	<b>3.1</b>	<b>0.4</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>3.2</b>	<b>4.7</b>	<b>5.6</b>	<b>2.3</b>	<b>0.7</b>
<b>ANY DRUGS</b>	<b>18.7</b>	<b>32.7</b>	<b>32.1</b>	<b>13.7</b>	<b>2.5</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>18.7</b>	<b>32.5</b>	<b>32.1</b>	<b>13.7</b>	<b>2.5</b>
<i>Base</i>	6,249	530	1,958	1,633	2,127

**Table A1.11: % of women aged 16 or over who reported having used illicit drugs in the last year by age group**

Source: SCJS 2010/11. Variable name: Q12M.

	All women %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>1.3</b>	<b>5.1</b>	<b>2.0</b>	<b>0.1</b>	<b>-</b>
Cocaine	1.1	4.1	1.6	*	-
Crack	0.1	-	0.4	-	-
Ecstasy	0.6	2.0	1.0	0.1	-
Heroin	0.2	-	0.5	*	-
Methadone	0.2	*	0.4	0.1	-
LSD	*	0.3	-	-	-
Magic mushrooms	0.2	0.8	0.4	-	-
<b>CLASS B</b>	<b>3.4</b>	<b>12.1</b>	<b>4.5</b>	<b>1.1</b>	<b>0.1</b>
Amphetamines	0.5	1.7	0.8	0.1	-
Crystal Meth	-	-	-	-	-
Cannabis	3.3	12.1	4.2	1.1	0.1
<b>CLASS C</b>	<b>0.9</b>	<b>3.0</b>	<b>1.3</b>	<b>0.2</b>	<b>-</b>
Anabolic steroids	*	0.1	*	-	-
Ketamine	0.3	1.3	0.3	-	-
Temazepam	0.2	*	0.5	0.1	-
Valium	0.6	2.1	1.0	*	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.1	0.4	-	*	-
Poppers	0.3	1.8	0.2	-	-
<b>NEW DRUGS</b>	<b>0.5</b>	<b>2.5</b>	<b>0.4</b>	<b>-</b>	<b>-</b>
BZP	-	-	-	-	-
GBL	*	*	-	-	-
Khat	*	0.2	-	-	-
Mephedrone	0.4	2.2	0.4	-	-
Synthetic cannabinoids	*	0.2	-	-	-
<b>ANY STIMULANTS</b>	<b>1.6</b>	<b>5.7</b>	<b>2.5</b>	<b>0.2</b>	<b>-</b>
<b>ANY OPIATES</b>	<b>0.2</b>	<b>*</b>	<b>0.5</b>	<b>0.1</b>	<b>-</b>
<b>ANY PSYCHEDELICS</b>	<b>0.4</b>	<b>1.8</b>	<b>0.5</b>	<b>-</b>	<b>-</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>0.7</b>	<b>2.1</b>	<b>1.2</b>	<b>0.2</b>	<b>-</b>
<b>ANY DRUGS</b>	<b>3.9</b>	<b>13.6</b>	<b>5.4</b>	<b>1.2</b>	<b>0.1</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>3.9</b>	<b>13.6</b>	<b>5.4</b>	<b>1.2</b>	<b>0.1</b>
<i>Base</i>	<i>6,249</i>	<i>530</i>	<i>1,958</i>	<i>1,633</i>	<i>2,127</i>

**Table A1.12: % of women aged 16 or over who reported having used illicit drugs in the *last month* by age group**

Source: SCJS 2010/11. Variable name: Q1M.

	All women %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>0.6</b>	<b>1.7</b>	<b>1.1</b>	<b>0.1</b>	<b>-</b>
Cocaine	0.3	1.1	0.6	-	-
Crack	0.1	-	0.2	-	-
Ecstasy	0.2	0.9	0.3	-	-
Heroin	0.1	-	0.4	-	-
Methadone	0.1	-	0.4	0.1	-
LSD	-	-	-	-	-
Magic mushrooms	*	-	0.2	-	-
<b>CLASS B</b>	<b>1.6</b>	<b>4.9</b>	<b>2.6</b>	<b>0.3</b>	<b>0.1</b>
Amphetamines	0.1	0.4	0.2	*	-
Crystal Meth	-	-	-	-	-
Cannabis	1.6	4.9	2.5	0.3	0.1
<b>CLASS C</b>	<b>0.3</b>	<b>0.9</b>	<b>0.7</b>	<b>-</b>	<b>-</b>
Anabolic steroids	*	-	*	-	-
Ketamine	-	-	-	-	-
Temazepam	0.1	-	0.3	-	-
Valium	0.3	0.9	0.6	-	-
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	-	-	-	-	-
Poppers	0.1	0.4	0.1	-	-
<b>NEW DRUGS</b>	<b>0.2</b>	<b>1.1</b>	<b>0.1</b>	<b>-</b>	<b>-</b>
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	*	0.2	-	-	-
Mephedrone	0.2	0.9	0.1	-	-
Synthetic cannabinoids	-	-	-	-	-
<b>ANY STIMULANTS</b>	<b>0.6</b>	<b>1.9</b>	<b>0.9</b>	<b>*</b>	<b>-</b>
<b>ANY OPIATES</b>	<b>0.2</b>	<b>-</b>	<b>0.5</b>	<b>0.1</b>	<b>-</b>
<b>ANY PSYCHEDELICS</b>	<b>*</b>	<b>-</b>	<b>0.2</b>	<b>-</b>	<b>-</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>0.3</b>	<b>0.9</b>	<b>0.7</b>	<b>-</b>	<b>-</b>
<b>ANY DRUGS</b>	<b>1.8</b>	<b>5.3</b>	<b>3.0</b>	<b>0.4</b>	<b>0.1</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>1.8</b>	<b>5.3</b>	<b>3.0</b>	<b>0.4</b>	<b>0.1</b>
<i>Base</i>	<i>6,249</i>	<i>530</i>	<i>1,958</i>	<i>1,633</i>	<i>2,127</i>

**Table A1.13: Type of drug first taken and age at which first taken among men who reported ever using illicit drugs**Source: SCJS 2010/11. Variable name: *QDR1ST, QDRAGE*.

	All men reporting drug use %	U16 %	16-19 %	20-24 %	25 + %
<b>CLASS A</b>	<b>7.5</b>	<b>6.8</b>	<b>7.5</b>	<b>9.6</b>	<b>5.3</b>
Cocaine	0.9	-	1.0	1.7	2.3
Crack	-	-	-	-	-
Ecstasy	2.4	2.7	1.6	4.5	2.5
Heroin	-	-	-	-	-
Methadone	*	-	-	-	-
LSD	2.1	2.0	2.5	2.0	-
Magic mushrooms	2	2.1	2.4	1.4	0.5
<b>CLASS B</b>	<b>82.5</b>	<b>77.4</b>	<b>86.8</b>	<b>83.7</b>	<b>75.4</b>
Amphetamines	3.0	1.8	3.3	4.1	3.6
Crystal Meth	-	-	-	-	-
Cannabis	79.4	75.6	83.5	79.6	71.8
<b>CLASS C</b>	<b>1.8</b>	<b>0.9</b>	<b>1.1</b>	<b>2.5</b>	<b>8.3</b>
Anabolic steroids	0.3	-	0.1	0.5	2.0
Ketamine	-	-	-	-	-
Temazepam	0.9	0.5	0.4	1.6	5.1
Valium	0.6	0.4	0.5	0.4	1.1
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	3.0	9.9	0.6	-	-
Poppers	4.1	4.7	3.7	3.0	8.8
<b>NEW DRUGS</b>	<b>0.7</b>	<b>0.3</b>	<b>0.3</b>	<b>1.1</b>	<b>2.2</b>
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	0.3	0.3	0.1	0.3	1.0
Mephedrone	0.2	-	0.2	0.9	-
Synthetic cannabinoids	0.2	-	-	-	1.3
<b>ANY STIMULANTS</b>	<b>10.5</b>	<b>9.2</b>	<b>9.5</b>	<b>13.3</b>	<b>17.3</b>
<b>ANY OPIATES</b>	<b>*</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>ANY PSYCHEDELICS</b>	<b>4.1</b>	<b>4.1</b>	<b>4.9</b>	<b>3.4</b>	<b>0.5</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>1.5</b>	<b>0.9</b>	<b>0.9</b>	<b>2.0</b>	<b>6.3</b>
<i>Base</i>	<i>1,220</i>	<i>300</i>	<i>587</i>	<i>224</i>	<i>100</i>

**Table A1.14: Type of drug first taken and age at which first taken among women who reported ever using illicit drugs**Source: SCJS 2010/11. Variable name: *QDR1ST, QDRAGE*.

	All women reporting drug use %	U16 %	16-19 %	20-24 %	25 + %
<b>CLASS A</b>	<b>7.8</b>	<b>7.4</b>	<b>7.5</b>	<b>8.6</b>	<b>7.1</b>
Cocaine	0.8	0.1	0.9	0.3	2.9
Crack	0.1	-	-	-	-
Ecstasy	3.1	3.0	2.6	4.2	3.7
Heroin	0.3	0.9	0.2	-	-
Methadone	-	-	-	-	-
LSD	0.9	1.2	0.9	1.2	-
Magic mushrooms	2.5	2.2	2.9	2.9	0.5
<b>CLASS B</b>	<b>82.2</b>	<b>78.8</b>	<b>86.5</b>	<b>84.1</b>	<b>68.7</b>
Amphetamines	5.4	2.6	5.7	8.9	4.5
Crystal Meth	0.1	-	-	-	-
Cannabis	76.8	76.1	80.8	75.2	64.2
<b>CLASS C</b>	<b>4.7</b>	<b>2.3</b>	<b>2.4</b>	<b>5.4</b>	<b>19.8</b>
Anabolic steroids	-	-	-	-	-
Ketamine	0.6	-	0.8	1.0	-
Temazepam	0.8	0.6	0.6	-	3.5
Valium	3.3	1.6	1.0	4.4	16.3
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	1.7	7.6	0.2	-	-
Poppers	3.2	4.0	3.2	1.9	4.4
<b>NEW DRUGS</b>	<b>0.2</b>	<b>-</b>	<b>0.2</b>	<b>-</b>	<b>-</b>
BZP	-	-	-	-	-
GBL	-	-	-	-	-
Khat	-	-	-	-	-
Mephedrone	0.1	-	0.2	-	-
Synthetic cannabinoids	0.1	-	-	-	-
<b>ANY STIMULANTS</b>	<b>12.7</b>	<b>9.7</b>	<b>12.4</b>	<b>15.2</b>	<b>15.4</b>
<b>ANY OPIATES</b>	<b>0.3</b>	<b>0.9</b>	<b>0.2</b>	<b>-</b>	<b>-</b>
<b>ANY PSYCHEDELICS</b>	<b>4.1</b>	<b>3.3</b>	<b>4.6</b>	<b>5.1</b>	<b>0.5</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>4.0</b>	<b>2.3</b>	<b>1.7</b>	<b>4.4</b>	<b>19.8</b>
<i>Base</i>	<i>1,130</i>	<i>226</i>	<i>586</i>	<i>197</i>	<i>108</i>

**Table A1.15: % of men aged 16 or over who reported having been offered drugs in the *last year* by age group**

Source: SCJS 2010/11. Variable name: QOF2.

	All men %	16-24 %	25-44 %	45-59 %	60+ %
<b>CLASS A</b>	<b>10.4</b>	<b>25.5</b>	<b>15.8</b>	<b>4.2</b>	<b>0.7</b>
Cocaine	7.4	16.9	12.0	3.0	0.4
Crack	0.9	2.3	1.1	0.5	0.2
Ecstasy	6.6	18.0	10.3	1.5	0.1
Heroin	1.4	3.8	1.6	0.7	0.2
Methadone	0.8	1.6	1.6	0.2	-
LSD	1.4	5.2	1.3	0.5	0.2
Magic mushrooms	1.1	3.3	1.4	0.3	*
<b>CLASS B</b>	<b>13.2</b>	<b>35.6</b>	<b>17.4</b>	<b>6.6</b>	<b>0.8</b>
Amphetamines	3.6	8.8	5.2	1.7	0.1
Crystal Meth	0.3	0.2	0.5	0.3	-
Cannabis	12.9	35.2	16.9	6.3	0.8
<b>CLASS C</b>	<b>4.3</b>	<b>11.6</b>	<b>6.4</b>	<b>1.5</b>	<b>0.2</b>
Anabolic steroids	0.9	2.0	1.9	0.1	-
Ketamine	1.1	2.3	2.0	0.3	-
Temazepam	1.1	1.6	1.8	0.7	0.1
Valium	2.9	9.5	3.6	1.0	*
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.4	1.3	0.5	0.1	-
Poppers	2.0	6.2	3.0	0.2	0.1
<b>NEW DRUGS</b>	<b>2.3</b>	<b>8.6</b>	<b>2.7</b>	<b>0.1</b>	<b>*</b>
BZP	0.1	-	0.1	-	*
GBL	0.1	0.4	0.2	-	*
Khat	0.2	0.5	0.2	*	*
Mephedrone	2.0	7.9	2.3	0.1	*
Synthetic cannabinoids	0.3	0.8	0.5	-	*
<b>ANY STIMULANTS</b>	<b>10.7</b>	<b>26.1</b>	<b>16.0</b>	<b>4.7</b>	<b>0.6</b>
<b>ANY OPIATES</b>	<b>1.8</b>	<b>5.1</b>	<b>2.4</b>	<b>0.8</b>	<b>0.2</b>
<b>ANY PSYCHEDELICS</b>	<b>2.9</b>	<b>8.7</b>	<b>3.9</b>	<b>1.0</b>	<b>0.3</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>3.2</b>	<b>9.9</b>	<b>4.1</b>	<b>1.1</b>	<b>0.2</b>
<b>ANY DRUGS</b>	<b>16.0</b>	<b>41.0</b>	<b>22.1</b>	<b>8.0</b>	<b>1.3</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>15.9</b>	<b>40.8</b>	<b>21.7</b>	<b>8.0</b>	<b>1.3</b>
<i>Base</i>	4,728	438	1,340	1,283	1,666



**Table A1.16: % of women aged 16 or over who reported having been offered drugs in the *last year* by age group**

Source: SCJS 2010/11. Variable name: QOF2.

	<b>All women %</b>	<b>16-24 %</b>	<b>25-44 %</b>	<b>45-59 %</b>	<b>60+ %</b>
<b>CLASS A</b>	<b>4.5</b>	<b>17.7</b>	<b>6.1</b>	<b>0.6</b>	<b>0.1</b>
Cocaine	3.0	11	4.6	0.3	*
Crack	0.6	2.0	0.9	0.1	-
Ecstasy	2.8	11.3	3.9	0.1	-
Heroin	0.7	1.2	1.5	0.1	-
Methadone	0.4	1.3	0.5	*	0.1
LSD	0.8	3.5	0.9	0.1	-
Magic mushrooms	0.5	2.1	0.6	0.1	0.1
<b>CLASS B</b>	<b>6.3</b>	<b>23.9</b>	<b>8.1</b>	<b>1.8</b>	<b>0.2</b>
Amphetamines	1.5	5.1	2.5	0.2	0.1
Crystal Meth	0.2	0.3	0.3	-	0.1
Cannabis	6.0	22.9	7.5	1.8	0.2
<b>CLASS C</b>	<b>2.0</b>	<b>6.4</b>	<b>3.4</b>	<b>0.1</b>	<b>0.1</b>
Anabolic steroids	0.2	0.4	0.3	-	0.1
Ketamine	0.7	3.3	0.8	0.1	0.1
Temazepam	0.5	0.6	1.4	-	-
Valium	1.3	3.9	2.4	0.1	0.1
<b>NOT CLASSIFIED</b>					
Glues/solvents/gas/aerosols	0.3	1.0	0.4	-	0.1
Poppers	1.1	5.4	1.0	-	-
<b>NEW DRUGS</b>	<b>1.0</b>	<b>4.3</b>	<b>1.1</b>	<b>0.2</b>	<b>0.1</b>
BZP	0.1	0.1	0.1	0.1	0.1
GBL	0.1	0.1	0.1	*	-
Khat	0.1	0.2	0.1	-	-
Mephedrone	0.8	3.6	1.0	0.1	-
Synthetic cannabinoids	0.1	0.4	0.1	-	-
<b>ANY STIMULANTS</b>	<b>4.6</b>	<b>17.8</b>	<b>6.3</b>	<b>0.6</b>	<b>0.1</b>
<b>ANY OPIATES</b>	<b>0.9</b>	<b>2.3</b>	<b>1.6</b>	<b>0.1</b>	<b>0.1</b>
<b>ANY PSYCHEDELICS</b>	<b>1.5</b>	<b>6.8</b>	<b>1.5</b>	<b>0.2</b>	<b>0.1</b>
<b>ANY DOWNERS / TRANQ.</b>	<b>1.5</b>	<b>4.2</b>	<b>3.0</b>	<b>0.1</b>	<b>0.1</b>
<b>ANY DRUGS</b>	<b>7.7</b>	<b>28.1</b>	<b>10.2</b>	<b>2.1</b>	<b>0.4</b>
<b>ANY DRUGS EXCLUDING NEW DRUGS</b>	<b>7.6</b>	<b>28.1</b>	<b>10.1</b>	<b>2.0</b>	<b>0.3</b>
<i>Base</i>	6,249	530	1,958	1,633	2,127

**Table A1.17: Polydrug and drug and alcohol use ever among those using illicit drugs in *last month***Source: SCJS 2010/11. Variable name: *QDRMIX, QDRALC*.

<i>Cell percentages</i>		<b>Ever mixed drug taken most often in last month with other drugs</b>	<b>Ever mixed drug taken most often in last month with alcohol</b>	<i>Base:</i>
<b>GENDER</b>				
Male	%	33.7	86.5	204
Female	%	36.0	79.7	104
<b>VICTIM STATUS</b>				
Victim of crime	%	35.4	85.2	101
Non-victim	%	33.8	84.4	207
<b>TENURE</b>				
Owner-occupier	%	30.6	90.1	95
Social renter	%	37.0	78.2	131
Private renter	%	38.3	87.6	68
<b>DEPRIVATION</b>				
15% most deprived	%	36.7	78.6	61
Rest of Scotland	%	33.7	86.3	247
<b>ALL</b>	<b>%</b>	<b>34.3</b>	<b>84.6</b>	<b>308</b>

1. Victim status indicates whether a respondent was the victim of a crime as measured by the SCJS in 2010/11 (for further details of crimes included see Annex 3 of the 2010/11 Scottish Crime and Justice Survey: Main Findings or the accompanying Technical Report).
2. Tenure indicates the ways in which households occupy their accommodation and, where rented, the type of organisation from whom the property is rented:
  - a. Owner-occupier includes households who own outright and those buying with a mortgage or loan;
  - b. Social renter includes households who live in housing rented from a local authority, housing association or co-operative;
  - c. Private renter includes households who live in housing rented from an individual private landlord.
3. Multiple deprivation is measured by the Scottish Index of Multiple Deprivation: <http://www.scotland.gov.uk/Topics/Statistics/SIMD>.

## Annex 2: Self-completion Methodology

Crime and victimisation surveys have been carried out in Scotland since the early 1980s. The geographical coverage, sample size, method and reference period have varied across these surveys. The Scottish Crime and Justice Survey (SCJS) was launched in April 2008 and represented a major shift in design, methodology and sample size from previous Scottish crime surveys.

This section provides more detail about aspects of the self-completion section of the questionnaire and specifically about the questions covering illicit drug use. Details are also included about the self-completion interview, the weighting used on the data and the classifications of illicit drugs used in this report.

Further information about the design of the SCJS is contained in Annex 2 of 2010/11 Scottish Crime and Justice Survey: Main Findings report and in the accompanying Technical Report.<sup>32</sup>

### **A2.1 The self-completion interview**

Interviews for the SCJS 2010/11 were conducted in the respondent's home using Computer Assisted Personal Interviewing (CAPI) and, for more sensitive questions in the self-completion section of the questionnaire such as those reported here, Computer Assisted Self-completion Interviewing (CASI). Interviews lasted 37 minutes on average in total, with the self-completion section taking just over 10 minutes on average to complete.

The results included in this report are based on interviews conducted by TNS-BMRB between 01 June 2010 and 31 March 2011. Respondents to the SCJS had the option of refusing to participate in the self-completion section which means this part of the questionnaire was not completed by all 13,010 respondents to the main survey. 10,999 (85%) respondents agreed to participate in the self-completion questionnaire.

The majority of respondents who answered the self-completion questions used the touch sensitive tablet PC on their own without any help from the interviewer (67%). A third (33%) of respondents asked the interviewer to enter their answers for them. A dislike of computers was the most common reason why respondents asked the interviewer to enter their answers for them (mentioned by 66%), while running out of time was the most common reason given for respondents refusing to complete it (mentioned by 52%). Only 6% of respondents refused to complete the self-completion questionnaire because of worries about confidentiality.<sup>33</sup>

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<sup>32</sup> Both reports are available from the Scottish Government survey website: <http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/crime-and-justice-survey>.

<sup>33</sup> Data described in this paragraph are unweighted.

## A2.2 Questionnaire content

The SCJS questionnaire has a complex structure, but basically consists of three elements:<sup>34</sup>

- The **main questionnaire** consists of a set of core modules asked of the whole sample, including demographics; and a set of **full and quarter-sample modules**, containing questions on a variety of topics;
- A **victim form questionnaire** which collects details about the separate incidents a respondent may have experienced during the reference period. This victim form can be repeated up to five times. The number of victim forms completed depends on the number and nature of incidents respondents experienced;
- A **self-completion questionnaire** covering sensitive issues, including illicit drug use. All respondents were asked to complete a self-completion questionnaire, but had the option to refuse this due to the sensitive nature of the questions.

The illicit drugs section is included at the start of the self-completion questionnaire.

Respondents are asked whether they have *ever* used 16 illicit drugs (see Chapter 1 for information on how these are classified in this report). While under-reporting of illicit behaviour by respondents is by far the main concern on a survey such as this, it is also recognised that some people may report taking particular drugs when they have not actually done so for reasons of bravado or other reasons. Respondents are therefore asked if they have *ever* taken 'semeron', a fictitious drug. Respondents who said they had taken semeron were then excluded from the final data outputs and data displayed in this report.<sup>35</sup> There were 22 cases of respondents reporting that they had taken semeron in the SCJS 2010/11.

Those respondents who have taken drugs in the past are then asked a series of follow-up questions, including:

- Whether they have taken the drug in the last year. Those that have are asked whether they have taken the drug in the last month and, if so, which one they have taken most and how hard it is to get hold of it;
- What drug was the first *ever* taken; at what age they first took drugs, and what methods of drug taking they have *ever* tried;

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<sup>34</sup> The SCJS questionnaire is available from the Scottish Government survey website. A detailed description is provided in the Technical Report:

<http://www.scotland.gov.uk/Topics/Statistics/Browse/Crime-Justice/crime-and-justice-survey>

<sup>35</sup> These respondents are, however, retained in the rest of the dataset, including the remainder of the self-completion section.

- Whether they have *ever* mixed the drug they had used most often in the last month with either alcohol or other drugs, and in the case of the latter which drugs they have mixed with it;
- Whether, in the *last month*, they have felt dependent on the drug taken *most often in the last month* and have tried to cut down but were not able to do so.

The questions are asked in a loop, circulating through each drug (i.e. “*Have you ever taken <drug name>?*”) rather than by selection from a single list of drugs. This approach has been shown to improve survey estimates of illegal drug-taking (Mayhew, 1995).

### **A2.3 Disclosure of sensitive information**

Given the sensitive nature of the questions, especially as the majority of the questions on illicit drug use were on offending behaviours rather than victimisation (as opposed to the remainder of the self-completion questionnaire and the main questionnaire), a separate ‘Don’t wish to answer’ button was provided at the top of the screen at every question in the self-completion section of the questionnaire.

At the start of the questions on illicit drug use, respondents were reminded that the answers they gave were completely confidential, reminded not to answer the questions including any drugs for which they had a prescription, and asked to answer the questions honestly.

*“The following questions ask whether or not you have ever used drugs. Please answer them honestly. The answers you give are completely confidential. **Please DO NOT tell us about drugs you have been given on prescription.**”*

### **A2.4 Drugs classification**

The classifications of drugs used in this report are detailed in section 1.4. However, there are two points of clarification which readers should note:

1. Amphetamines can be classified as either Class A (when prepared for injection) or Class B (in powdered form). Since questions used in the SCJS do not distinguish between the forms of the drug taken for the purposes of analysis, the report assumes that all amphetamine use is of the Class B type. This is consistent with the approach adopted by previous surveys, including the 2008/09 and 2009/10 SCJS.
2. The category “not classified” indicates that possession of these substances (poppers and glues, solvents, gas or aerosols) is not illegal but it is an offence to supply these substances if it is likely that the product is intended for abuse.

### ***A2.5 Non-response to the self-completion section***

Table A2.1 compares the profile of respondents who answered the self-completion section of the questionnaire (including those who did so where the interviewer administered the questionnaire) and those who did not answer it:

- Equal percentages of males and females answering the main questionnaire also answered the self-completion section (85%);
- The percentages of respondents to the main questionnaire who answered the self-completion section decreased as age increased (for example, 90% of 16-24 year olds answered the self-completion section compared with 80% of those aged 60 or over):
  - Similar percentages of males and females within age groups answered the self-completion section;
- There were only minor differences in response between those who had been a victim of crime, as identified by the SCJS 2010/11 and those who had not (86% and 84% respectively).

**Table A2.1: % of respondents to the main questionnaire overall and in selected sub-groups who did and who did not answer the self-completion section** <sup>36</sup>

SCJS 2010/11.

Base: All respondents (13,010).

<i>Row percentages</i>	<b>Self-completion</b>	<b>No self-completion</b>
	<b>%</b>	<b>%</b>
<b>AGE</b>		
16-24	89.7	10.3
25-44	86.9	13.1
45-59	87.2	12.8
60+	79.7	20.3
<b>MALE (TOTAL)</b>	<b>84.7</b>	<b>15.3</b>
16-24	88.5	11.5
25-44	84.8	15.2
45-59	86.6	13.4
60+	82.2	17.8
<b>FEMALE (TOTAL)</b>	<b>84.5</b>	<b>15.5</b>
16-24	90.6	9.4
25-44	88.4	11.6
45-59	87.6	12.4
60+	77.8	22.2
<b>VICTIM STATUS</b>		
Victim	86.2	13.8
Non-Victim	84.2	15.8
<b>ALL</b>	<b>84.5</b>	<b>15.5</b>

**A2.6 Sample Profile**

All sample surveys are not necessarily representative of a cross-section of the population due to a variety of reasons including whether potential respondents were available for interview and their willingness to participate in the survey. In the SCJS 2010/11, the achieved sample under-represented younger adults and over-represented older adults. Weighting was applied to correct for differences in the level of response among groups of individuals on key attributes (section A2.7).

The differential response of younger and older respondents to the self-completion section of the questionnaire discussed in section A2.5 brought the unweighted sample profile for the self-completion questionnaire slightly closer

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<sup>36</sup> Data displayed in the table are unweighted.

to the adult population profile. Weighting was still required as differences in the level of response remained.

Table A2.2 shows the profile of the achieved sample of the self-completion section before weighting was applied and the weighted sample profile.

**Table A2.2: Unweighted and weighted sample profiles by age and gender**

SCJS 2010/11.

Base: all respondents to the self-completion section (10,999).

	Unweighted sample <sup>1</sup>	Weighted sample <sup>2</sup>
	%	%
<b>Men</b>		
16-24	9.3	15.4
25-34	12.0	16.2
35-44	16.4	16.9
45-54	17.7	17.9
55-64	18.9	15.4
65+	25.8	18.2
<i>Base</i>	4,737	2,063,700
<b>Women</b>		
16-24	8.5	13.6
25-34	14.3	14.6
35-44	17.0	16.8
45-54	17.7	17.7
55-64	17.8	14.9
65+	24.6	22.4
<i>Base</i>	6,262	2,246,600
<b>ALL MEN</b>	<b>43.1</b>	<b>47.9</b>
<b>ALL WOMEN</b>	<b>56.9</b>	<b>52.1</b>
<i>Base</i>	10,999	4,310,300

1. The unweighted sample includes twenty two respondents who said they had taken semeron *at some point in their lives* and who were subsequently excluded from the data for the drugs questions (section A2.2 above).
2. The weighted sample targets were based on the General Register of Scotland (GROS) mid year population estimates for 2010: <http://www.gro-scotland.gov.uk/>.

### **A2.7 Weighting**

The results obtained in the SCJS were weighted to correct for the unequal probability of selection for interview caused by the sample design and for differences in the level of response among groups of individuals.

In view of the reduced response to the self-completion section, some additional weighting was necessary for use when analysing this sub-sample. The self-completion weights were calculated in a similar way to the main



individual and household weights but based only on respondents who had answered the self-completion section of the questionnaire.<sup>37</sup> The individual weight was applied to all of the questions included in this report as they all related to the experiences and opinions of individuals.

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<sup>37</sup> Further detail of the weighting used in the survey and an explanation of when to use the different weights is provided in the accompanying Technical Report.

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The statistics published from the *Scottish Crime and Justice Survey* have been assessed by the UK Statistics Authority and have been confirmed as National Statistics. The Scottish Government reported back to the Authority in January 2010 on some specific enhancements it was to make, as identified by the Authority. The Assessment Report, which was published in September 2009, can be accessed via the following link:

<http://www.statisticsauthority.gov.uk/assessment/assessment/assessment-reports/assessment-report-12---scottish-crime-and-justice-survey--15-september-2009.pdf>

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