

Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS)



NATIONAL OVERVIEW (2015)



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INTRODUCTION

This report provides an overview of findings from the 2015 wave of the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS). It outlines the prevalence of smoking, drinking and drug use in 2015 and the trends over time. It also looks at the risk factors and protective factors associated with substance use, sources of substances, attitudes towards substance use, and views on the support and advice provided by schools.

By drawing together the SALSUS findings for smoking, drinking and drug use, it highlights where there are common themes across the three behaviours and where there are differences depending on the substance.

Three individual topic reports on Tobacco, Alcohol and Drug Use accompany this publication and provide more detail on the findings for each substance. All accompanying publications can be found at:

<http://www.gov.scot/Topics/Research/by-topic/health-community-care/social-research/SALSUS>

SURVEY BACKGROUND

SALSUS is a continuation of a long established series of national surveys on smoking, drinking and drug use. These were carried out jointly in Scotland and England between 1982 and 2000, to provide a national picture of young peoples' smoking (from 1982), drinking (from 1990), and drug use (from 1998) behaviours within the context of other lifestyle, health and social factors. Since 2002, Scotland has developed its own, more tailored survey, known as SALSUS.

SALSUS measures progress towards Scottish Government targets for smoking and drug use, and is used to inform the Scottish Government priority of addressing harmful drinking among young people.

This biennial survey series also provides local prevalence rates for smoking, drinking and drug use every four years across Alcohol and Drug Partnerships (ADPs), local authorities and NHS Boards. SALSUS data are used in a number of the ADP national core indicators, which allows them to monitor their progress against a common set of outcomes. ADPs and their community planning partners make extensive use of SALSUS data in local needs assessments and in developing their strategic priorities.

Throughout the report the colour red is used for information, charts and graphics on alcohol, green for drugs and blue for smoking.

METHODS AND NOTES ON INTERPRETATION

For full details of the methodology, including changes to the questionnaire, please see the accompanying SALSUS 2015 Technical Report.

SALSUS is a self-completion survey administered by teachers in a mixed ability class, under exam conditions.

In the past the survey has been completed on paper, but in 2015 half of the sample completed the survey online. Analysis showed very little evidence of a mode effect: in other words, the responses from pupils who completed the survey online were very similar to the responses from those who completed the survey on paper.

Comparisons can therefore be made with previous waves to see trends over time.

All local authority and independent schools in Scotland were eligible for inclusion in the sample, with the exception of special schools. A random, nationally representative sample of S2 and S4 pupils was drawn, with classes as the primary sampling unit.

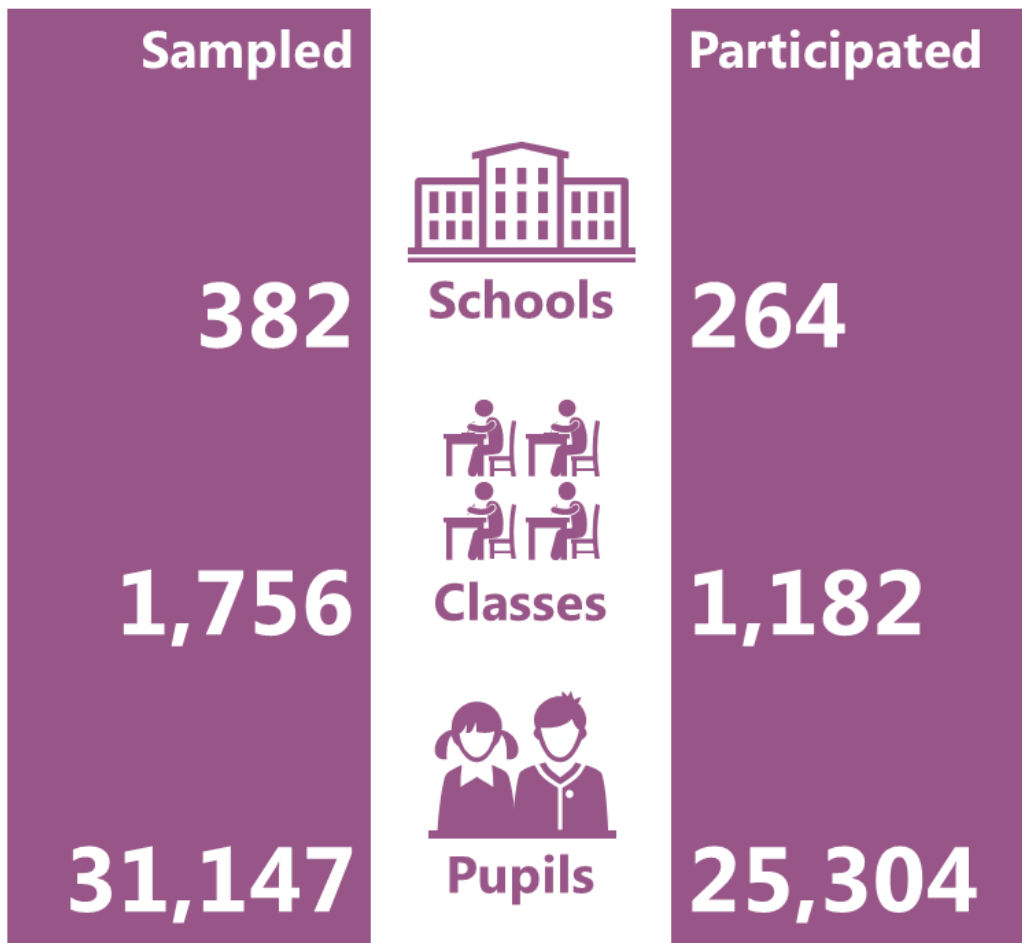
Fieldwork was undertaken between September 2015 and January 2016.

Notes:

- When differences between estimates are specifically commented on, these differences are statistically significant at the 95% level.
- Percentages may not add up to 100% due to rounding. Rounding can also cause slight discrepancies between the sum of reported percentages and the actual percentage if combined. For example, 40% (40.4%) of 15 year olds are very confident and 47% (47.4%) are fairly confident that they have the information they need to make the right choices about their health and wellbeing. If these are combined it would be reported that 88% (87.8%) are confident.
- Some pupils did not answer each question. Where answers are missing, these have been excluded from analyses, hence charts and tables that describe the same population may have varying bases.
- Throughout the report pupils in S2 are referred to as '13 year olds' and S4 pupils are referred to as '15 year olds' for ease. It should be borne in mind that some pupils within these categories may be slightly older or younger.
- While there are associations between many of the behaviours explored in this report, conclusions about causality cannot be drawn.

ABOUT THE SURVEY

There were
110,984
pupils aged 13 and 15 who were eligible
to take part in the survey



The overall response rate was
53%
based on class and pupil response rate

N.B. The overall response rate excludes schools who took part in the Realigning Children's Services Survey. For more details please see the SALSUS 2015 Technical Report

KEY PREVALENCE MEASURES

Substance use prevalence has remained largely stable since 2013, but it remains the case that prevalence has declined considerably over the last couple of decades.

Among 13 year olds, prevalence of use across all three substances has remained unchanged since 2013, but there were some differences among 15 year olds.

Drinking in the last week remains more common than smoking regularly or having used drugs in the last month.

Figure 1 Prevalence of smoking, drinking and drug use (2015)



PREVALENCE OVER TIME

Figure 2 Trends in proportion of pupils smoking regularly (1982-2015)

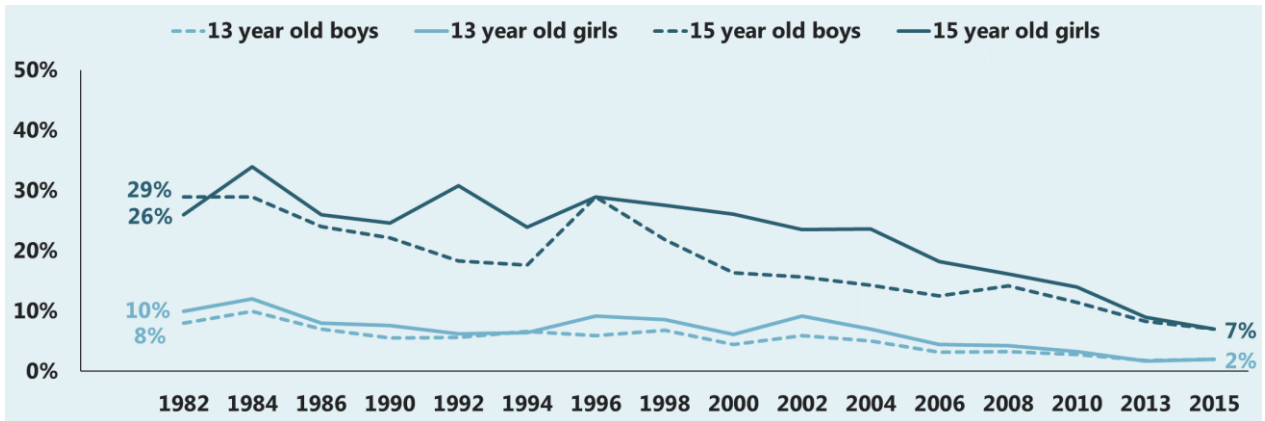


Figure 3 Trends in proportion of pupils who drank in the last week (1990-2015)

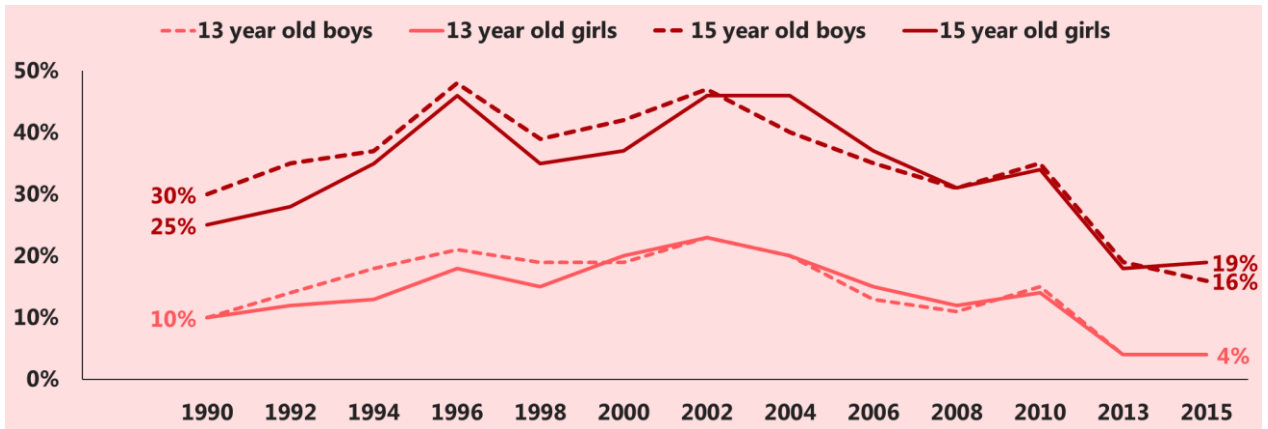
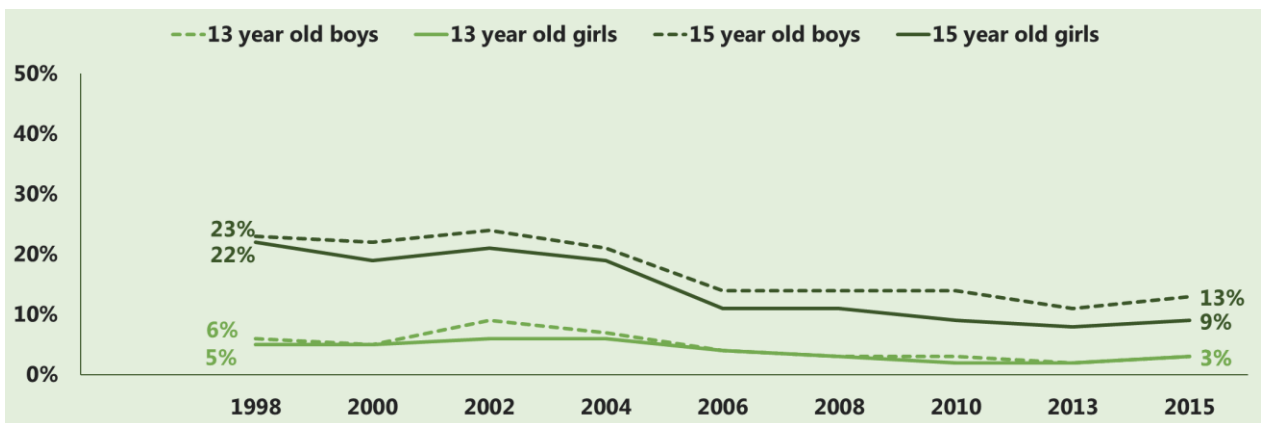


Figure 4 Trends in proportion of pupils who used drugs in the last month (1998-2015)



THOSE NOT USING SUBSTANCES

While headline indicators focus on substance users, it is important to remember that the vast majority of pupils do not use substances regularly.

Figure 5 Proportion of pupils not using individual substances (2015)

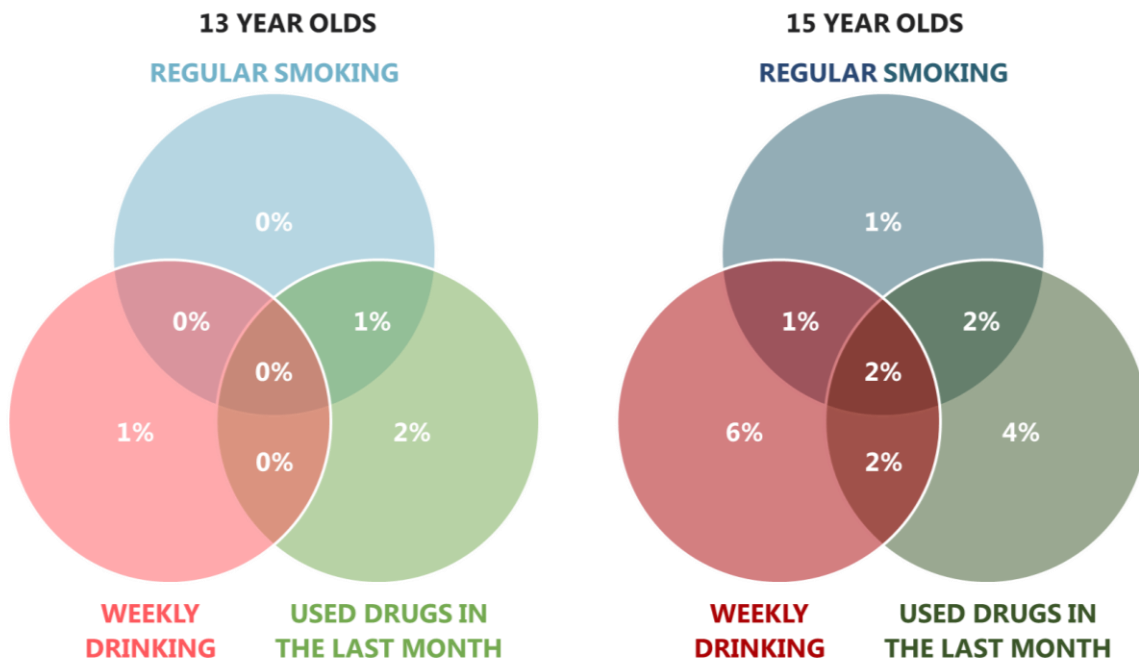


MULTIPLE SUBSTANCE USE

A large majority of pupils do not take any substances regularly, 80% of 15 year olds and 95% of 13 year olds.

A small proportion, however, do take all three substances (not simultaneous use) regularly, 2% of 15 year olds and less than 1% of 13 year olds.

Figure 6 Multiple substance use (2015)



N.B. The measure of 'weekly drinking' used in this graphic differs from the measure 'drank in the last week' used elsewhere in the overview.

AGE OF FIRST SUBSTANCE USE

There has been a gradual increase over time in the age pupils first use substances, but little change between 2013 and 2015.

Figure 7 Average age that 15 year old boys and girls first tried the following... (2015)

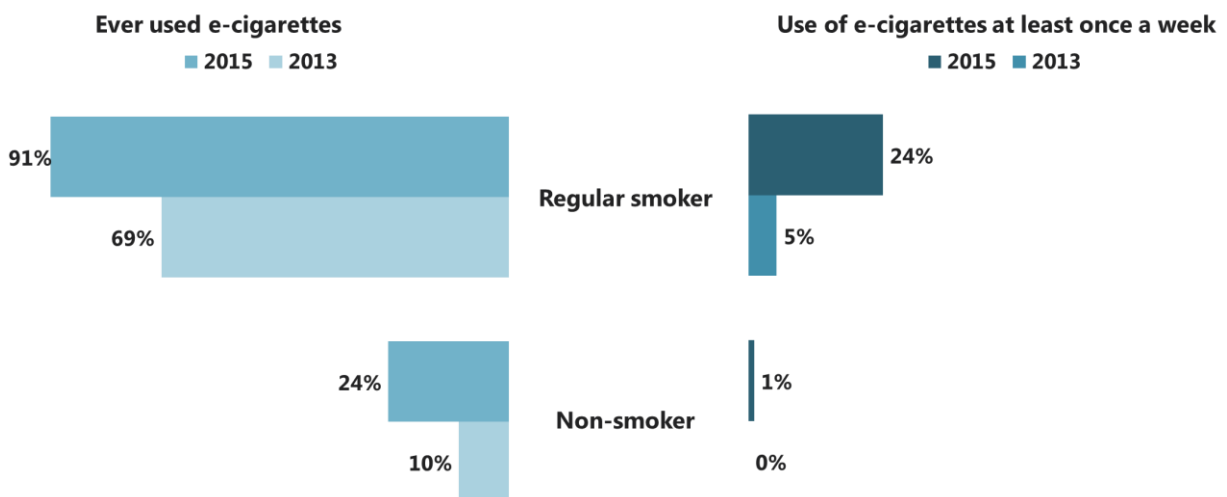


E-CIGARETTES

Use of e-cigarettes *ever* has increased markedly between 2013 and 2015 across both regular and non-smokers. However, *regular* use of e-cigarettes has only risen amongst smokers.

Smokers who had tried to give up smoking were more likely to have used e-cigarettes than those who had not tried (94%, compared with 87%).

Figure 8 E-cigarette use among 15 year olds (2013-2015)



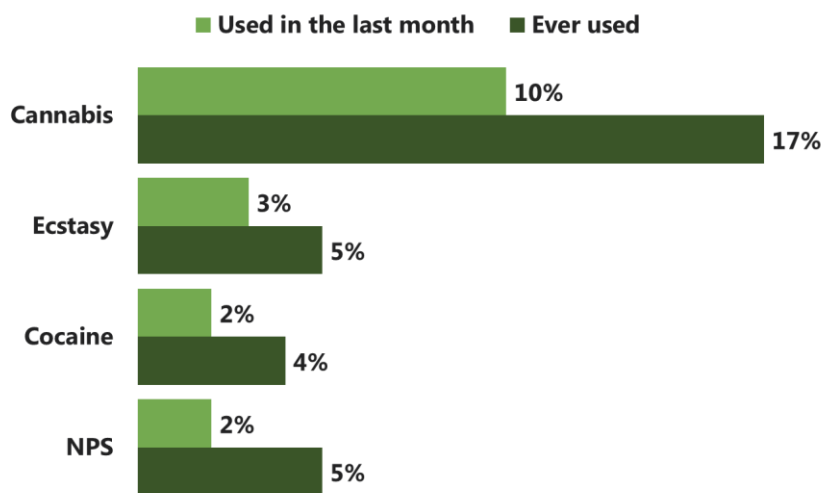
TYPE OF DRUGS USED

Cannabis is the most widely used drug among 15 year old pupils: 17% of 15 year old pupils had ever used cannabis and 10% had used it in the past month.

The use of New Psychoactive Substances (NPS) was covered in depth. As Figure 9 shows, current use is low, in line with figures for ecstasy or cocaine.

15 year old boys were more likely than girls to say they had used each of the individual drugs below in the last month (with the exception of ecstasy where use was similar).

Figure 9 Use of individual drugs ever and in the last month among 15 year olds (2015)



SOURCES AND AVAILABILITY

SOURCES OF ALCOHOL AND TOBACCO

One of the most common sources of alcohol, tobacco and drugs was to get it from a friend. It was also common for pupils to get alcohol from a relative or at home (either with or without permission).

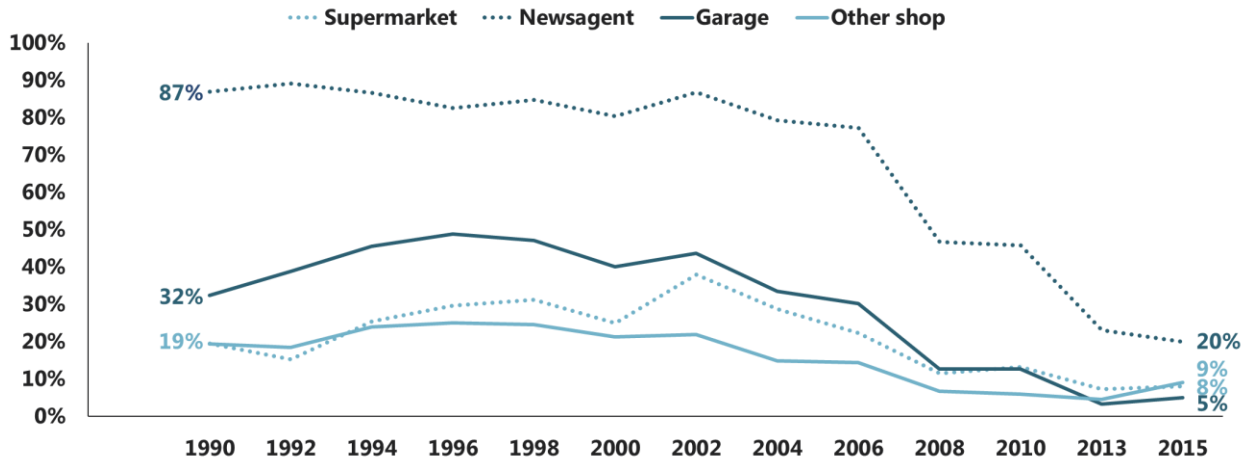
However, it was rare for smokers to be given tobacco by relatives. It was more common for them to ask an adult to buy tobacco for them. 13 year olds were more likely to ask a stranger, while 15 year olds were more likely to ask someone they knew.

Figure 10 Most common sources of alcohol, tobacco and drugs, among both age groups



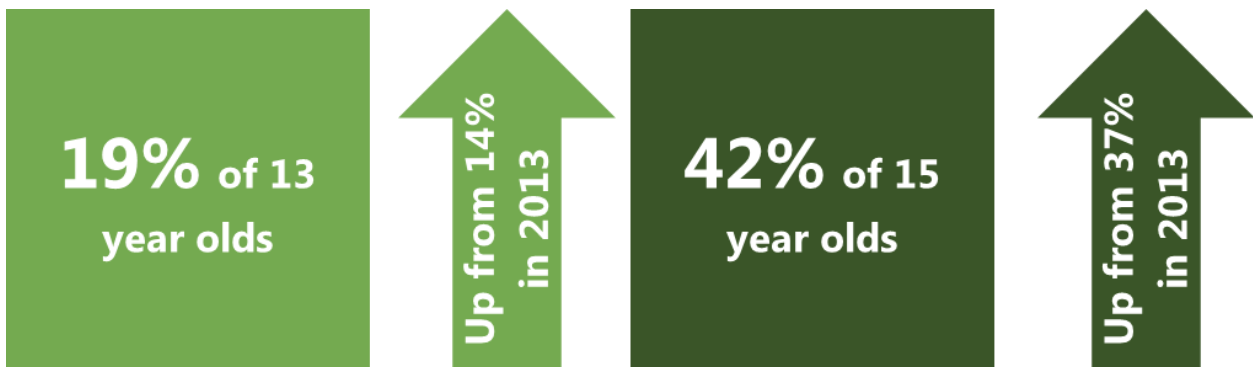
The proportion of pupils sourcing their tobacco from retail outlets has decreased over time. In particular, purchasing tobacco from a newsagent has dropped markedly over time.

Figure 11 Proportion of 15 year old regular smokers, sourcing tobacco from retail



There has been an increase in the proportion of pupils reporting that they have been offered drugs between 2013 and 2015.

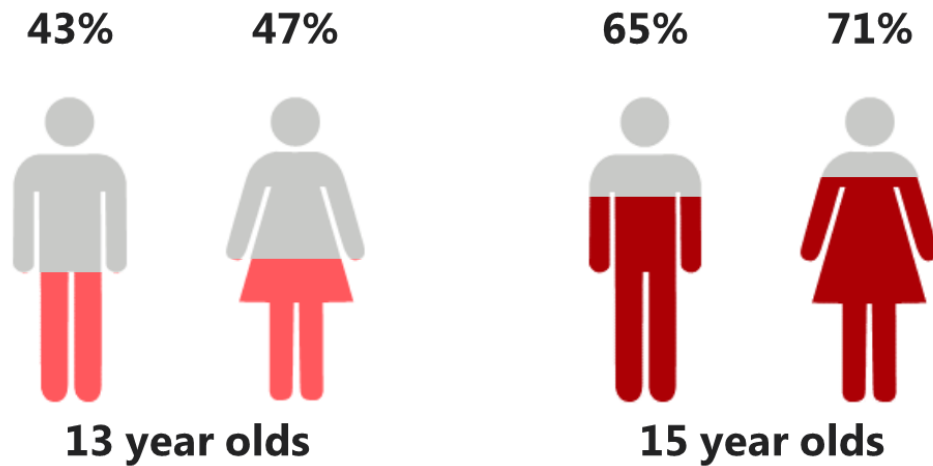
Figure 12 Proportion of pupils who have ever been offered drugs, by age (2015)



CONSEQUENCES: IMMEDIATE IMPACT OF ALCOHOL AND DRUGS

Among both age groups, girls were more likely than boys to have ever been drunk (this is the first time this has been the case among 13 year olds).

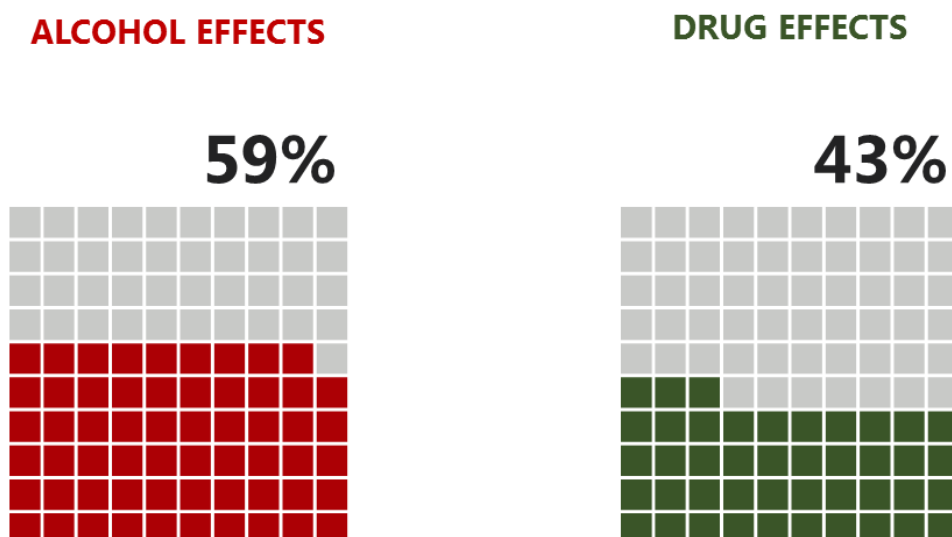
Figure 13 Proportion of pupils who have ever had an alcoholic drink and have been drunk at least once, by age and sex (2015)



Those who had ever had a drink were more likely to have experienced a negative effect in the last year from having done so than those who had ever taken drugs. This, in part, may be due to the fact that pupils tend to drink more frequently than they take drugs.

There has been no change in the proportion of pupils who have experienced negative effects due to either alcohol or drugs between 2013 and 2015 with the exception of a small increase among 13 year old girls (44% in 2013 to 48% in 2015).

Figure 14 Proportion of 15 year old pupils (who had ever taken each substance) experiencing at least one negative effect from doing so in the last year (2015)



For both alcohol and drugs, the most common negative experiences were vomiting, having an argument and doing something you later regretted.

There were only small gender differences in relation to drug use. However, there were clear gender patterns in the effects of alcohol.

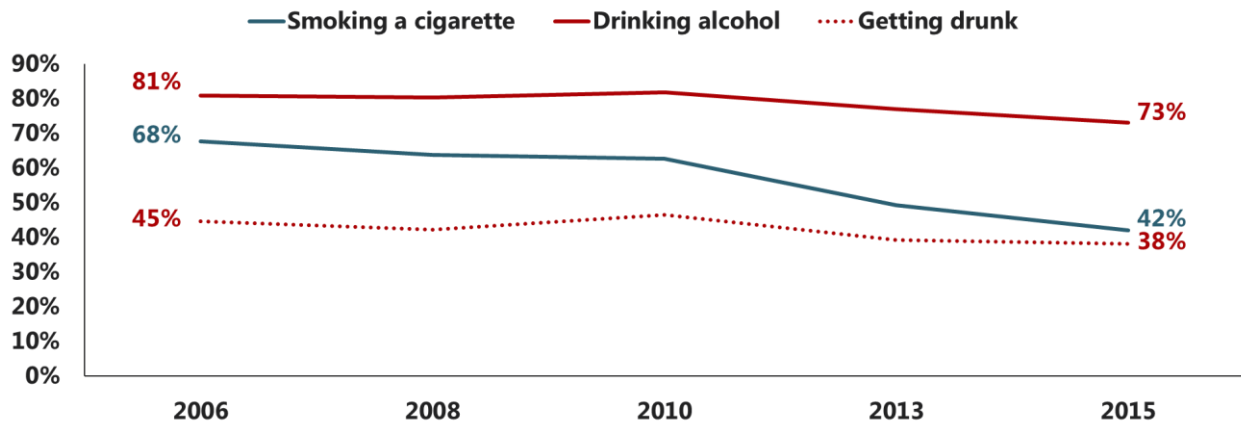
Figure 15 Gender differences in alcohol effects experienced (2015)



ATTITUDES TO SUBSTANCE USE

The proportion of pupils who think it is 'ok' to try drinking or getting drunk has shown a small decline since 2010. The greatest decline is in the proportion of pupils thinking it is 'ok' to try smoking. This is true among both age groups and genders.

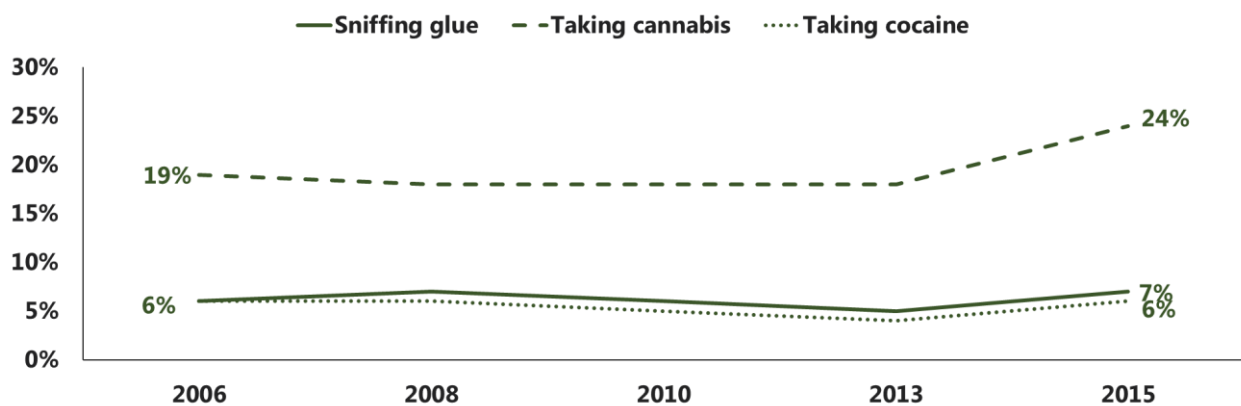
Figure 16 Proportion of 15 year old pupils who thought it was 'ok' for someone their age to try... (2006-2015)



By some margin, pupils are more likely to think that it is 'ok' to try drinking than to try getting drunk, smoking or taking drugs.

Although it was much less common for pupils to say that it was 'ok' for someone their age to try drugs, there has been a notable increase since 2013 in the proportion of 15 year olds who think it is ok to try taking cannabis.

Figure 17 Proportion of 15 year old pupils who thought it was 'ok' for someone their age to try... (2006-2015)



15 year old girls were more likely than boys to think it was 'ok' to try smoking a cigarette, drinking alcohol and getting drunk, whereas 15 year olds boys were more likely to think that it was 'ok' to try sniffing glue, taking cannabis and taking cocaine. There were few differences between 13 year old boys and 13 year old girls.

GIVING UP SMOKING AND DRUGS

A minority of those who regularly smoke or take drugs said that they wanted to stop.

Figure 18 Proportion of 15 year old regular smokers who want to give up and the proportion of 15 year olds who used drugs in the last month who want to stop (2015)

29% of 15 year old regular smokers want to give up



21% of 15 year olds who use drugs once a month or more want to stop



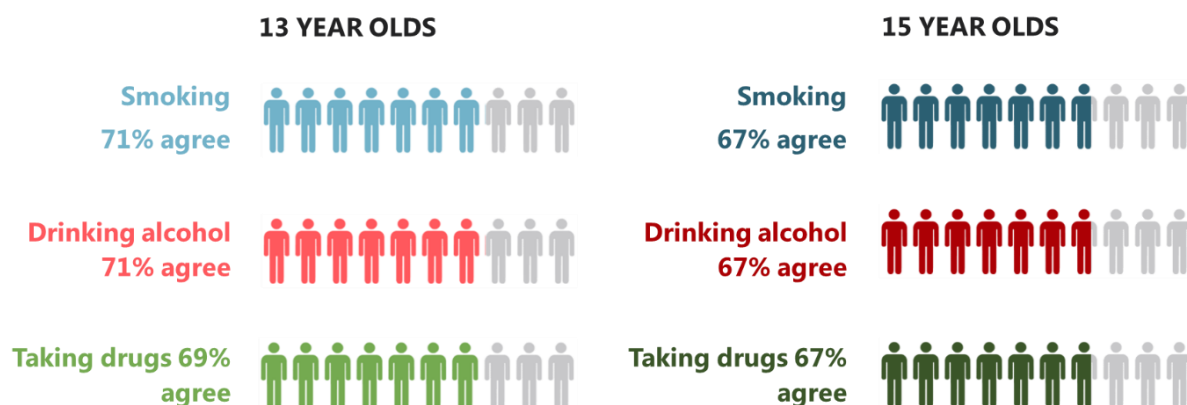
EDUCATION

Close to two-thirds of pupils reported that they had received lessons, videos/DVDs or discussion in class on each of the three substances in the last 12 months.

Overall, receiving lessons on a substance was not correlated with lower levels of use. The exception was 15 year olds who had received a lesson on drugs.

Just over two-thirds of pupils thought that their school was providing them with enough advice and support about smoking, drinking alcohol and taking drugs.

Figure 19 Proportion of pupils who agree that their school provides them with enough advice and support about... (2015)



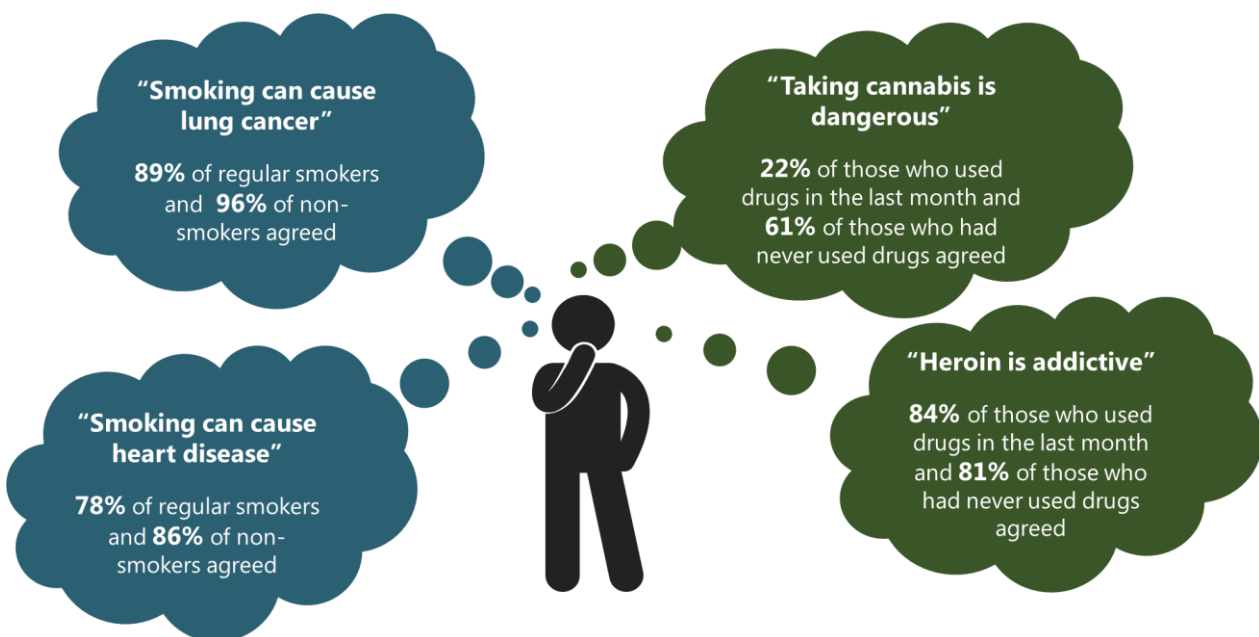
Those that agreed that their school provided enough advice and support about smoking, drinking alcohol or taking drugs were less likely to be regular users of that substance.

PERCEPTIONS OF THE RISKS OF SUBSTANCE USE

Non-smokers were slightly more likely than regular smokers to agree with statements about the health risks of smoking.

The pattern was different for drugs. Those who had used drugs in the last month were generally more likely than those who had never used drugs to say that statements about the risks were true. But they were much *less* likely to agree that "Taking cannabis is dangerous", and cannabis is the drug they are most likely to have taken.

Figure 20 Proportion of pupils among both age groups who agreed with substance use health risk statements by substance use status (2015)

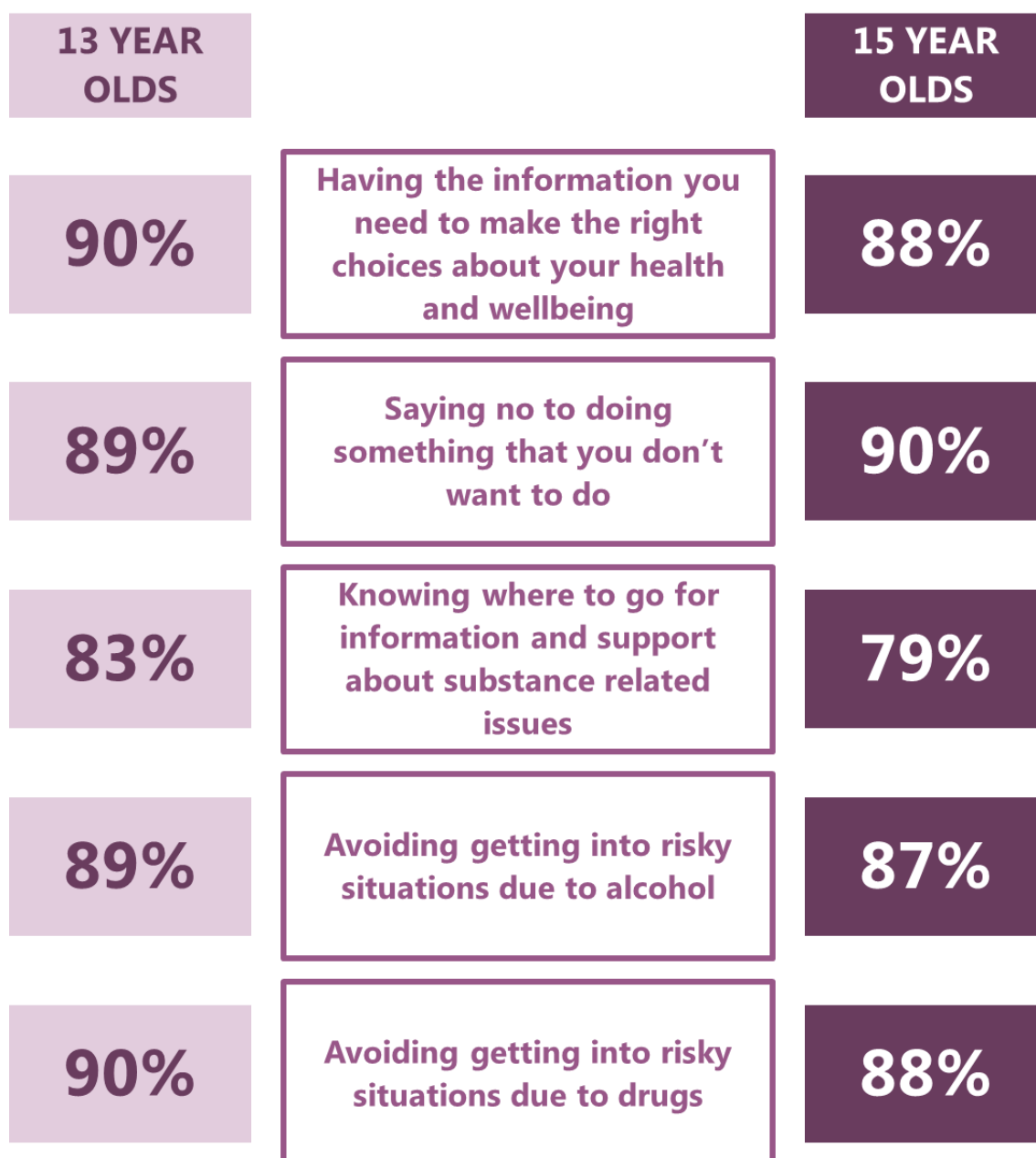


CONFIDENCE ABOUT MAKING CHOICES

The majority of pupils of both age groups reported that they felt confident about their health and wellbeing choices.

13 year olds were slightly more likely than 15 year olds to feel confident that they know where to go for information and support about substance related issues.

Figure 21 Proportion of pupils who felt confident about... (2015)



Feeling confident about health and wellbeing choices was associated with lower substance use behaviour. Across all five statements, pupils who felt confident were less likely to smoke regularly, have drunk in the last week or have used drugs in the last month.

RISK FACTORS: SCHOOL VARIABLES

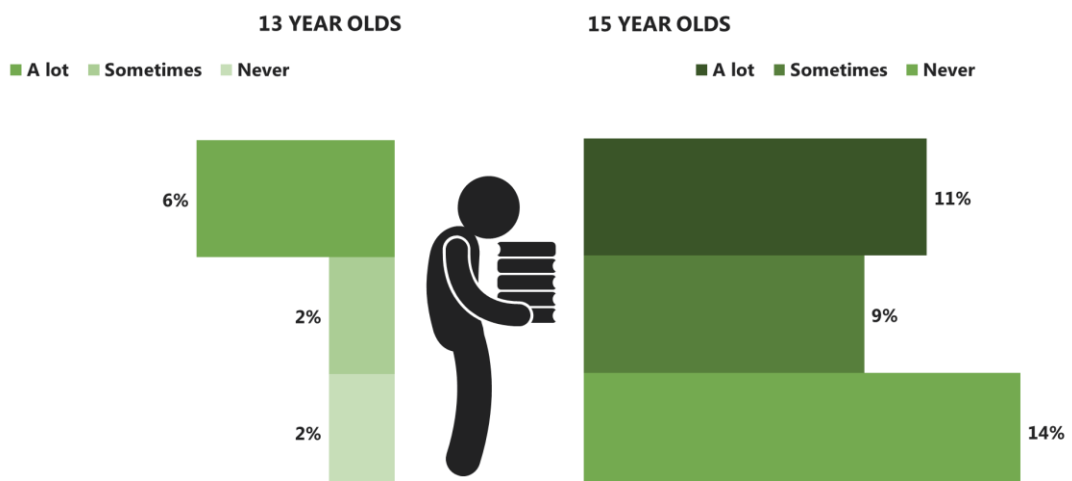
All of the school-related variables in the survey were associated with all forms of substance use. Overall, the more engaged a pupil is with school (e.g. if they like it or if they haven't been excluded etc.) the less likely they are to use substances.

Figure 22 School variables associated with substance use, among both age groups (2015)



The relationship between feeling pressure from schoolwork and substance use was more complex. Among 13 year olds, the more pressure they felt due to schoolwork, the more likely they were to use substances. However, among 15 year olds, those who *never* felt pressured by schoolwork were the most likely to use substances.

Figure 23 Proportion of pupils using drugs in the last month by how often they feel strained or pressured by the schoolwork they have to do (2015)



RISK FACTORS: HEALTH AND WELLBEING VARIABLES

Pupils were more likely to smoke regularly, have drunk in the last week or used drugs in the last month if...



They thought their general health was 'bad' or 'very bad'



They had a long term illness or disability



They had poorer mental wellbeing (as measured by SDQ and WEMWBS¹)



They had caring responsibilities

¹ Based on the Goodman Strengths & Difficulties Questionnaire and the Warwick-Edinburgh Mental Wellbeing Scale. Further information is in the Technical Report and <http://www.sdqinfo.org/> and <http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/>

RISK FACTORS: LEISURE ACTIVITIES

Six leisure activities were consistently associated with substance use when carried out at least once a week, across both age groups and genders.

Figure 24 Leisure activities associated with substance use, among both age groups (2015)



Figure 25 Proportion of 15 year old pupils who had drunk in the last week by amount of own cash to spend per week (2015)



RISK FACTORS: MONEY TO SPEND

The more money a pupil had a week to spend, the more likely they were to have used substances. The relationship was particularly strong for alcohol. Those with £30 a week to spend were almost three times as likely to have drunk in the last week than those with less than £5.

RISK FACTORS: FRIEND VARIABLES

Pupils were more likely to smoke regularly, have drunk in the last week or used drugs in the last month if...



They had older or mixed age friends



They had no close friends



They spent a greater number of evenings in a week out with friends

RISK FACTORS: FAMILY VARIABLES

All of the family variables were associated with substance use. In general, pupils who were closer to their families were less likely to use substances.

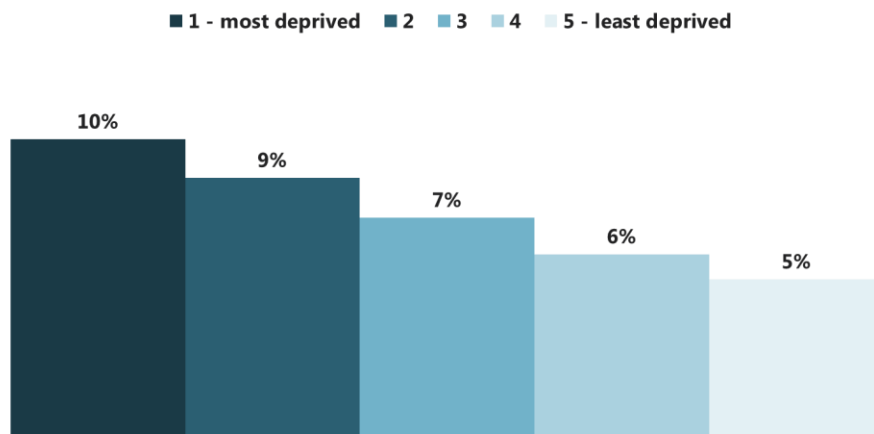
Figure 26 Family variables associated with substance use, among both age groups (2015)



RISK FACTORS: DEPRIVATION

Living in a deprived area (as measured by SIMD²) was associated with higher levels of regular smoking and drug use in 15 year olds. Area deprivation was not linked with drinking among 15 year olds. There were some differences in 13 year olds drinking by SIMD, but the relationship was not clear cut.

Figure 27 Proportion of 15 year olds who were regular smokers, by SIMD band (2015)



² Area deprivation was assessed using the Scottish Index of Multiple Deprivation (SIMD) based on postcodes of respondents and postcodes of the schools of participating pupils. Further information on SIMD can be found at <http://www.gov.scot/Topics/Statistics/SIMD>



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