Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS)



NATIONAL OVERVIEW (2018)





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INTRODUCTION

This report provides an overview of findings from the 2018 wave of the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS). It outlines the prevalence of smoking, drinking and drug use in 2018 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.

The research was commissioned by the Scottish Government and carried out by Ipsos MORI Scotland.

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. The survey runs approximately every two years.

SALSUS informs progress towards Scottish Government policies to reduce the harms from smoking, drinking and drug use among children and young people.

This 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.

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 2018 Technical Report.

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

Schools were given the choice to complete the survey either online or on paper.

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 October 2018 and April 2019. In total (including those schools who took part in Realigning Children's Services Survey), 12,558 pupils in S2 and 10,807 pupils in S4 took part in the survey.

Data was weighted by local authority, age, sex, school sector (state/independent), school denomination and by urban/rural classification

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, if 40% (40.4%) of 15 year olds were very confident and 47% (47.4%) were fairly confident that they have the information they need to make the right choices about their health and wellbeing, it would be reported that 88% (87.8%) were 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

100,546

pupils aged 13 and 15 who were eligible to take part in the survey

Sampled

325

1,821

23,791

Schools

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Participated

199

1,036

21,559

The overall response rate was

52%

based on class and pupil response rate

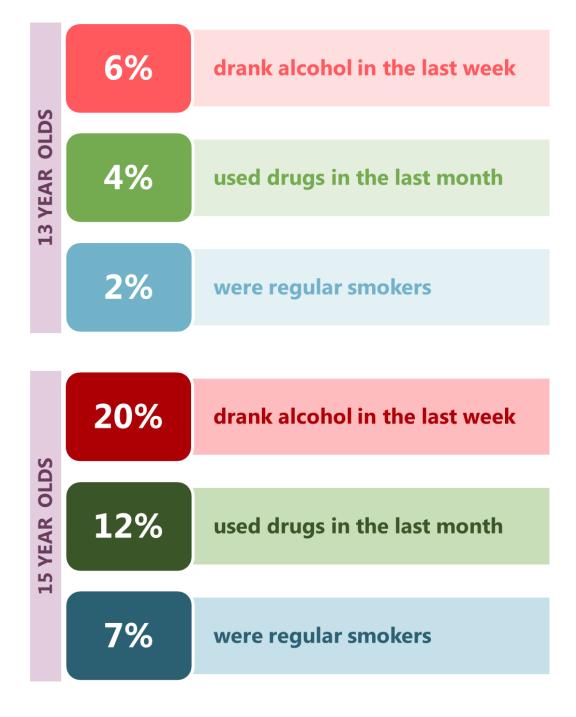
N.B. The overall response rate excludes schools who took part in the Realigning Children's Services Survey and Glasgow state schools. For more details please see the SALSUS 2018 Technical Report.

KEY PREVALENCE MEASURES

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

Smoking prevalence has remained unchanged since 2015. However, there have been increases in drinking in the last week (among 13 year old of both genders and among 15 year old boys) and using drugs in the last month (among 13 year old boys) in the same period.

Figure 1 Prevalence of smoking, drinking and drug use (2018)



PREVALENCE OVER TIME

Figure 2 Trends in proportion of pupils smoking regularly (1982-2018)

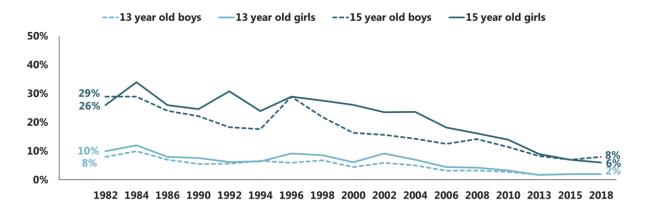


Figure 3 Trends in proportion of pupils who drank in the last week (1990-2018)

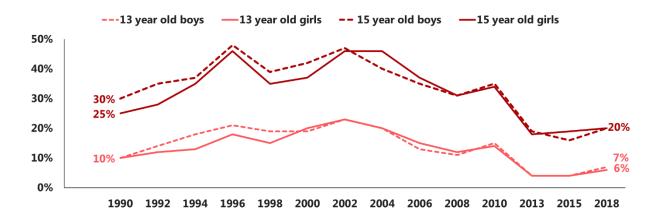
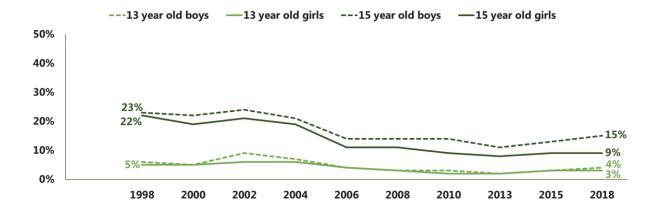


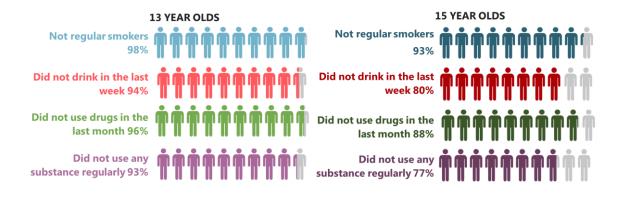
Figure 4 Trends in proportion of pupils who used drugs in the last month (1998-2018)



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 (2018)

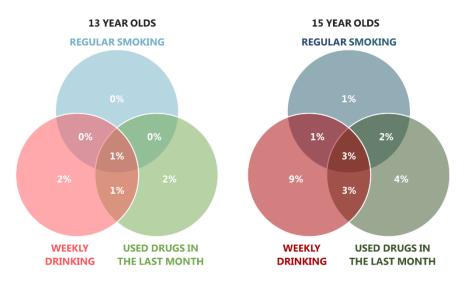


MULTIPLE SUBSTANCE USE

A large majority of pupils do not take any substances regularly, 77% of 15 year olds and 93% of 13 year olds.

A small proportion, however, do take all three substances (not simultaneous use) regularly, 3% of 15 year olds and 1% of 13 year olds.

Figure 6 Multiple substance use (2018)



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 2015 and 2018.

Figure 7 Average age that 15 year old boys and girls first tried the following... (2018)

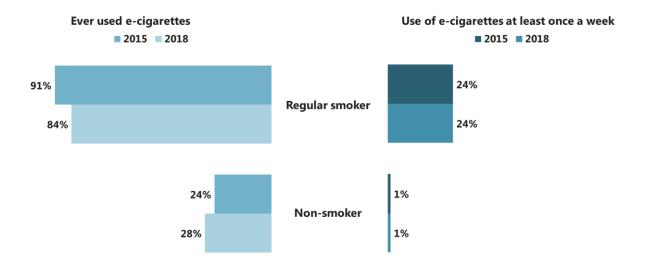


E-CIGARETTES

Use of e-cigarettes *ever* has decreased between 2015 and 2018 among regular smokers. However, there has been an increase in non-smokers ever using e-cigarettes.

Regular use of e-cigarettes has remained unchanged between 2015 and 2018 among both groups.

Figure 8 E-cigarette use among 15 year olds (2015-2018)



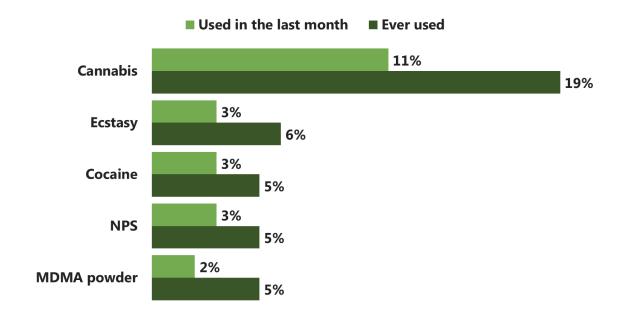
TYPE OF DRUGS USED

Cannabis is the most widely used drug among 15 year old pupils: 19% of 15 year old pupils had ever used cannabis and 11% had used it in the past month.

Use of new psychoactive substances (NPS) 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 new psychoactive substances where use was similar).

Figure 9 Use of individual drugs ever and in the last month among 15 year olds (2018)



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 get tobacco from relatives. It was more common for them to ask an adult to buy tobacco for them.

Figure 10 Most common sources of alcohol, tobacco and drugs, among both age groups (2018)



68% got drugs from a friend the last time they used them – by far the main source



41% of regular smokers are usually given cigarettes by friends

31% of those who have ever drunk alcohol usually get it from a friend

BUYING FROM SHOPS OR OTHER PEOPLE

34% of regular smokers usually buy their cigarettes from other people





31% of regular smokers usually buy their cigarettes from shops

47% of regular smokers usually get someone else to buy them cigarettes

FAMILY

31% of those who had ever had alcohol usually get it from a relative



31% of those who had ever had alcohol usually get it from home (with or without permission)

The proportion of pupils getting tobacco from shops has decreased markedly since 2002.

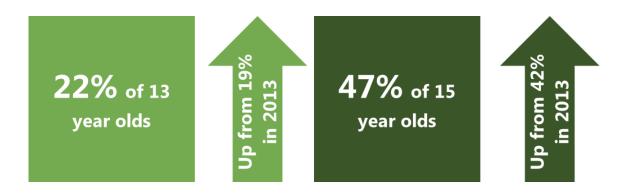
There has been an increase in the proportion of pupils getting tobacco from supermarkets between 2015 and 2018, but no further change for newsagents, garages and 'other' shops in the same time period.

Figure 11 Proportion of 15 year old regular smokers, sourcing tobacco from retail outlets (1990-2018)



There has been an increase in the proportion of pupils reporting that they have been offered drugs between 2015 and 2018.

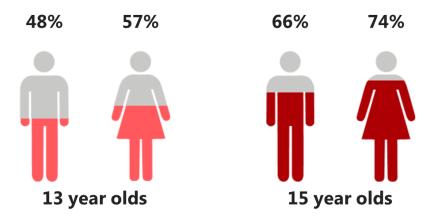
Figure 12 Proportion of pupils who have ever been offered drugs, by age (2018)



CONSEQUENCES: IMMEDIATE IMPACT OF ALCOHOL AND DRUGS

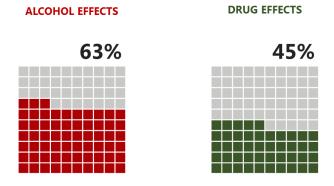
Among both age groups, girls were more likely than boys to have ever been drunk.

Figure 13 Proportion of pupils who have ever had an alcoholic drink and have been drunk at least once, by age and sex (2018)



In the last year, those who had ever had a drink were more likely to have experienced a negative effect 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.

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 (2018)



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 (2018)

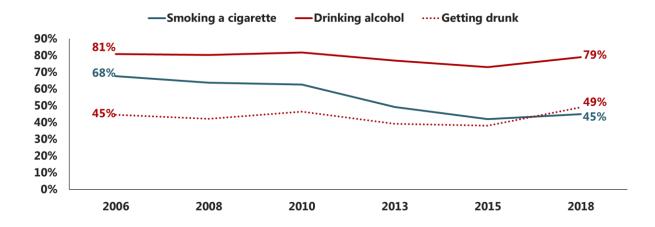


ATTITUDES TO SUBSTANCE USE

The proportion of pupils who think it is 'ok' to try drinking (from 73% to 79%) or getting drunk (from 38% to 49%) has shown a marked increase between 2015 and 2018. There has also been a small increase in the proportion who think it is 'ok' to try smoking (from 42% to 45%).

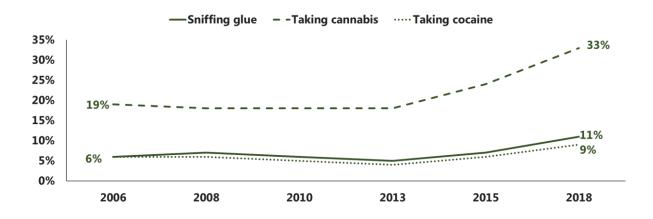
By some margin, pupils are more likely to think that it is 'ok' to try drinking than to try getting drunk, smoking or taking drugs.

Figure 16 Proportion of 15 year old pupils who thought it was 'ok' for someone their age to try... (2006-2018)



Although it was much less common for pupils to say that it was 'ok' for someone their age to try drugs, there has been an increase since 2015 in the proportion of 15 year olds who think it is 'ok' to try all drugs asked about, but particularly in relation to taking cannabis (from 18% to 33%).

Figure 17 Proportion of 15 year old pupils who thought it was 'ok' for someone their age to try... (2006-2018)



Girls were more likely than boys to think it was 'ok' to try smoking a cigarette, drinking alcohol, getting drunk and sniffing glue, whereas boys were more likely to think that it was 'ok' to try taking cannabis and taking cocaine.

GIVING UP SMOKING AND DRUGS

More than a quarter 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 (2018)

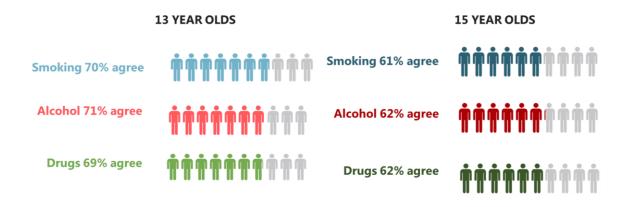


EDUCATION

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.

Similarly, around two-thirds of pupils thought that their school was providing them with enough advice and support about smoking, alcohol and drugs.

Figure 19 Proportion of pupils who agree that their school provides them with enough advice and support about... (2018)



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 (2018)



CONFIDENCE ABOUT MAKING CHOICES

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

Figure 21 Proportion of pupils who felt confident about... (2018)

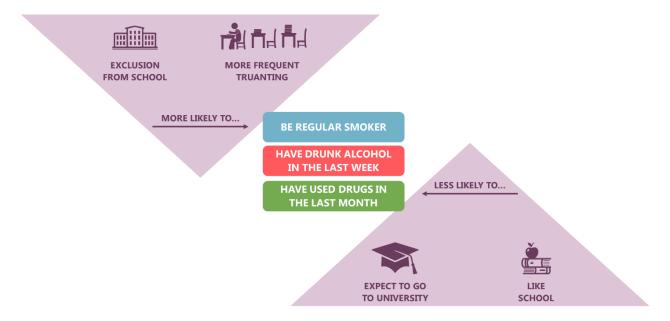


For the most part, feeling confident about health and wellbeing choices was associated with lower substance use behaviour. Pupils who felt confident were less likely to smoke regularly, have drunk in the last week or have used drugs in the last month. Only one element - confidence in knowing where to go for information and support - was not associated with substance use.

RISK FACTORS: SCHOOL VARIABLES

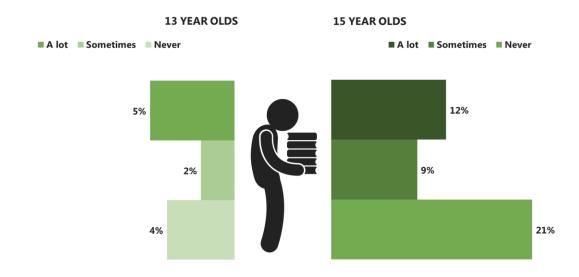
Overall, the more engaged a pupil is with school (e.g. if they like it or if they haven't been excluded etc.) the less likely they are to use substances.

Figure 22 School variables associated with substance use, among both age groups (2018)



The relationship between feeling pressure from schoolwork and smoking, drinking or drugs use was more complex. For example, both those who feel pressure 'a lot' and those who feel pressure 'never' were more likely to have used drugs in the last month.

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 (2018)



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: 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

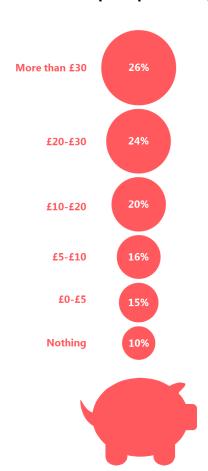


They had no close friends



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

Figure 24 Proportion of 15 year old pupils who had drunk in the last week by amount of own cash to spend per week (2018)



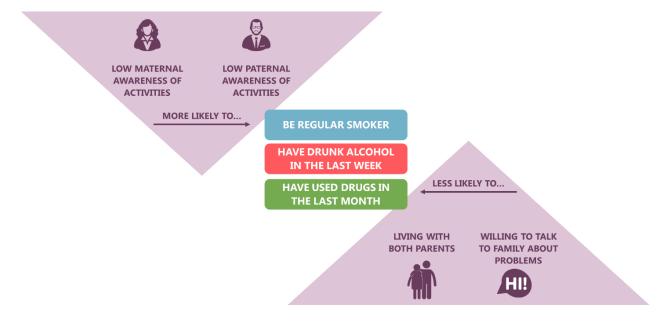
RISK FACTORS: MONEY TO SPEND

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 more than £30 a week to spend were twice as likely to have drunk in the last week than those with nothing.

RISK FACTORS: FAMILY VARIABLES

In general, pupils who were closer to their families were less likely to use substances.

Figure 25 Family variables associated with substance use, among both age groups (2018)

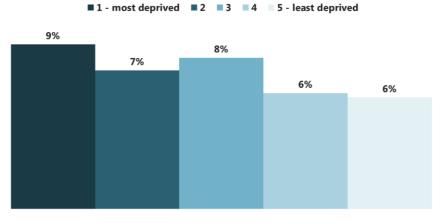


RISK FACTORS: DEPRIVATION

Living in a deprived area (as measured by SIMD²) was associated with higher levels of regular smoking and drug use in 15 year olds. But area deprivation was not linked with drinking for this age group.

Among 13 year olds, area deprivation was associated with regular drinking and smoking, but not drug use prevalence.

Figure 26 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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How to access background or source data

The data collected for this publication:

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X will be available on https://statistics.gov.scot

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ISBN 978-1-83960-333-4 (web only)

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The Scottish Government St Andrew's House Edinburgh EH1 3DG

ISBN: 978-1-83960-333-4 (web only)

Published by The Scottish Government, November 2019

Produced for The Scottish Government by APS Group Scotland, 21 Tennant Street, Edinburgh EH6 5NA PPDAS658122 (11/19)

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