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Alcohol and other drug use among South Australian secondary school students: Findings from the South Australian component of the 2022-23 Australian Secondary Schools' Alcohol and Drug (ASSAD) Survey.





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Background and important notes on methodology

Every three years, students throughout Australia participate in the Australian Secondary Students' Alcohol and Drug (ASSAD) Survey. In South Australia the survey is conducted by Cancer Council SA. The ASSAD Survey investigates the use of both licit and illicit substances among students between the ages of 12 and 17 years recruited from South Australian Government, Catholic and Independent schools. The 2022-23 iteration is the 13th in the series and was delayed due to COVID-19, with the previous survey carried out in 2017. Data were collected from March 2022 to July 2023 via an online questionnaire. The response rate was very low at 5%; of 143 schools approached to participated, only seven did so. In 2022-23, only Government (59%) and Independent (41%) schools were surveyed. This is significantly different from 2017, where 64% were Government; 16% Independent and 20% Catholic.

In previous years, the ASSAD Survey sample was weighted to be in line with the population of 12-17year-old students in South Australia by sex, age, and education sector. However, in 2022-23, no students from Catholic schools and no 12-year-olds participated¹. Consequently, the Independent school students were used to represent non-Government students, and students aged 13 years from Government schools were used to represent 12-13-year-olds. Moreover, an 'other' gender response option was included for the first time. Weighting data are taken from Australian Bureau of Statistics (ABS), which only provides student enrolment data for males and females and therefore when sex was neither male nor female, they were randomly assigned to either category. In this report, when examining prevalence by sex, estimates for the 'other' and 'not stated' categories were excluded, although they were included in the total prevalence estimates.

There was a change to the methodology in South Australia in 2014, which has impacted on the sample sizes obtained from that point on. As a condition of ethics approval from the Department for Education, an active consent procedure was required where only children with a signed parental consent form could participate in the survey. This differs to previous years where passive consent was used: all parents were notified of the survey and could opt-out if they did not want their child to participate. Research on this was conducted in Victoria during the 1999 survey and found that active parental consent is likely to underestimate the prevalence of substance use. Recruitment of schools also proved more difficult than in previous years due to factors such as a high number of research participation requests, scheduling (e.g., curriculum pressure, exams, school events) and staff time. The final weighted samples for 2014 (N=1856), 2017 (N=1342) and 2022-23 (N=769) are substantially smaller than in previous years (e.g., N=2875 in 2011 and N=2984 in 2008), and results may underestimate the prevalence of alcohol and drug use among secondary students in South Australia. Therefore, results comparing these data from previous iterations should be interpreted with caution, particularly from the 2022-23 survey. All graphs have a vertical line denoting when the change of consent took place.

Data from 2017 and 2022-23 were compared for statistical significance using a Chi-square test to assess differences in frequencies of drug use, controlling for education sector, age, and sex (where appropriate), as well as school-level clustering. Due to small numbers, breakdowns by individual ages are unreliable; rather, comparisons were made in 2022-23 between those aged 12-15 years, and those aged 16-17 years, as well as by sex. In addition, use of individual drugs is not reported, except for alcohol and selected illicit and licit drugs where sample sizes were large enough to provide reliable estimates (painkillers, sedatives, inhalants, and cannabis). Six illicit drugs² have been

combined into one category, measuring use of at least one of these. South Australian data on tobacco have not yet been released at the time this Bulletin was published.

Previous Bulletins have reported drug and alcohol use over two time periods: lifetime and recent (in the last week). Due to the significantly smaller sample size achieved in 2022-23, estimates of use in the last week were unreliable for nearly all drug classes, and for some drugs, use in the last month was also unreliable. For students surveyed from November 2022, those that had only consumed a few sips of alcohol in their lifetime and that didn't answer yes to having had an alcoholic drink in the last year, last month or last week were not asked about the quantity of alcohol consumed, the main drink consumed, where they sourced their alcohol, location of last drink and risky behaviour.

Due to unreliable estimates, the following comparisons have been excluded:

Overall sample

- Use in the last week or month for painkillers, sedatives, and inhalants.
- All frequencies of use for other opiates and steroids, and all illicit drugs except cannabis and use of at least one illicit drug, where only lifetime use or use in the last year were included.

Sex and age group

- All sub-analyses (sex or age group) relating to use in the last week or month for painkillers, sedatives, and inhalants.
- All frequencies of use for other opiates and steroids, and all illicit drugs except cannabis and use of at least one illicit drug, where only lifetime use or use in the last year were included.

Other variables

Data for 2022-23 are also presented on the main drink consumed, the source of the last drink, location of last drink and risky behaviour while intoxicated. Due to unreliable estimates, comparisons over time and between sex and age group were only possible for risky behaviour while intoxicated.

Summary

- The prevalence of alcohol, sedatives, inhalants, cannabis, and at least once illicit drug among secondary school students remained relatively stable between 2017 and 2022-23.
- Alcohol use in the last month decreased between 2017 and 2022-23 among male students, and in 2022-23, they were less likely than female students to have used alcohol in the last year. Female students also reported an increase between 2017 and 2022-23 in risky drinking in the last two weeks.
- Older students reported an increase in risky drinking between 2017 and 2022-23 at all frequencies; younger students reported a decrease in lifetime risky drinking. Older students were more likely than younger students to report using alcohol at most frequencies, including risky drinking.
- There were decreases between 2017 and 2022-23 in the use of painkillers overall, and by both sex and age group; conversely, there was an increase in lifetime use of inhalants among older students.
- Younger students reported a decrease between 2017 and 2022-23 in lifetime and last year use of cannabis; older students in 2022-23 were more likely to report lifetime or last year use than younger students.
- Younger students reported a decrease between 2017 and 2022-23 in lifetime use of at least one illicit drug and older students reported an increase; older students in 2022-23 were more likely to report lifetime or last year use than younger students.
- Engaging in at least one risky behaviour while intoxicated decreased among male students and younger students between 2017 and 2022-23 but was unchanged among female students and older students.

Detailed findings

Alcohol – Frequency of Use

- Between 2017 and 2022-23, the percentage of all students that had ever used alcohol remained stable (66.8% to 69.5%), as did the percentage that had used in the last year (44.4% to 48.8%), the last month (24.6% to 23.7%) and the last week (12.3% to 12.7%). Note that more than half of students that reported lifetime use stated that they had only had a few sips of alcohol (55.6% in 2017 and 53.8% in 2022-23). *Figure 1*
- There were no changes between 2017 and 2022-23 among male or female students in the percentage that had used alcohol ever, in the last year and in the last week. However, there was a significant decrease in the percentage of male students that had used alcohol in the last month (24.8% to 16.7%). *Figures 2-3*
- During 2022-23, there was a significant difference between male and female students in the percentage that had used alcohol in the last year (42.7% compared with 55.4%). *Figures 2-3*
- There were no significant differences between 2017 and 2022-23 among students aged 12-15 or 16-17 years in the percentage that had used alcohol at any frequency. *Figures 4-5*
- During 2022-23, there were significant differences in the percentage of 12-15 and 16-17 year old students that had used alcohol in the last year (39.8% aged 12-15 years compared with 68.3% aged 16-17 years), the last month (16% aged 12-15 years compared with 40.6% aged 16-17 years) and the last week (7.7% aged 12-15 years compared with 25.6% aged 16-17 years). *Figures 4-5*



Figure 1: Percentage of secondary school students that had used alcohol at various frequencies, 2008 to 2022-23



Figure 2: Percentage of male secondary school students that had used alcohol at various frequencies, 2008 to 2022-23

The estimates for 'last month' and 'last week' in 2022-23' had Relative Standard Errors (RSEs) between 20% and 50% and should be interpreted with caution.



Figure 3: Percentage of female secondary school students that had used alcohol at various frequencies, 2008 to 2022-23



Figure 4: Percentage of secondary school students aged 12-15 years that had used alcohol at various frequencies, 2008 to 2022-23

Figure 5: Percentage of secondary school students aged 16-17 years that had used alcohol at various frequencies, 2008 to 2022-23



Alcohol – Quantity of Use

- During 2022-23, one-fifth (20.8%) of students consumed more than four standard drinks (exceeding the recommended guidelines) at least once in a single occasion of drinking within the past two weeks, and 27.5% within the last month. Three-fifths (59.8%) had done so in the last year, and 64.4% in their lifetime.
- Between 2017 and 2022-23, the percentage of all students that had consumed more than four drinks on a single occasion at various frequencies did not change. *Figure 6*

- There were no changes in quantity of use between 2017 and 2022-23 for male students, but for female students there was a significant increase in the percentage that had consumed more than four drinks on a single occasion in the last two weeks (18.3% to 25.5%). There were no differences between male and female students in 2022-23. *Figures 7-8*
- There were significant changes in lifetime quantity of use between 2017 and 2022-23 among both age groups (a decrease from 59% to 49.2% for 12-15 year olds and an increase from 67% to 81.7% for 16-17 year olds), and significant increases in the percentage of 16-17 year olds that had consumed more than four drinks on a single occasion in the last year (65.5% to 77.9%), the last four weeks (38.7% to 52.6%) and the last two weeks (25.8% to 37.2%). *Figures 9-10*
- During 2022-23, there were significant differences by age group in the percentage of students that had consumed more than four drinks on a single occasion ever (49.2% aged 12-15 years compared with 81.7% aged 16-17 years), the last year (48.6% aged 12-15 years compared with 77.9% aged 16-17 years), the last four weeks (14.5% aged 12-15 years compared with 42.6% of those aged 16-17 years) and the last two weeks (14.1% aged 12-15 years compared with 37.2% aged 16-17 years). *Figures 9-10*



Figure 6: Percentage of secondary school students consuming more than 4 drinks on one occasion at various frequencies, 2017 to 2022-23

The estimate for 'last 4 weeks' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Figure 7: Proportion of male secondary school students consuming more than 4 drinks on one occasion at all frequencies, 2017 to 2022-23



2017 2022-23

The estimates for 'last 4 weeks' and 'last 2 weeks' in 2022-23' had Relative Standard Errors (RSEs) between 20% and 50% and should be interpreted with caution.





The estimate for "last 4 weeks' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Figure 9: Percentage of secondary school students aged 12-15 years consuming more than 4 drinks on one occasion at all frequencies, 2017 to 2022-23



The estimate for 'last 4 weeks' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Figure 10: Percentage of secondary school students aged 16-17 years consuming more than 4 drinks on one occasion at all frequencies, 2017 to 2022-23



2017 2022-23

Alcohol – Drinking Behaviour and Attitudes³

Drink preference

• In 2022-23, the most common alcoholic drinks 'usually consumed' were pre-mixed or bottled spirits (60.2%), followed by regular or light strength beer (23%). *Figure 11*



Figure 11: Main drink usually consumed by secondary school students, 2022-23*

* Multiple responses by individual students were excluded so this figure shows students' first selection only. Drink categories have been combined due to small numbers. Estimates for 'wine' and 'cider' had Relative Standard Errors (RSEs) between 20% and 50% and should be interpreted with caution.

Source of supply

• In 2022-23, the main source of supply was parents or siblings (67.9%). This was followed by alcohol being purchased for them by someone either under or over 18 (17.9%). *Figure 12*



Figure 12: Source of most recent alcoholic drink for secondary school students, 2022-23*

Bought for them (over or under 18)

Other (party, other relative, home without permission)

* Multiple responses by individual students were excluded so this figure shows students' first selection only. Source categories have been combined due to small numbers. The estimate for 'bought for them' had a Relative Standard Error (RSÉ) between 20% and 50% and should be interpreted with caution.

Location of last drink

In 2022-23, the most common location of last drink was at their own or someone else's home • (57.2%). This was followed by at a party (25.1%) and at licenced premises (9%). Figure 13



Figure 13: Location of last drink consumed by secondary school students, 2022-23*

* Multiple responses by individual students were excluded so this figure shows students' first selection only. Source categories have been combined due to small numbers. The estimates for 'party' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Alcohol – Risky Behaviour

The incidence of behaviours such as drink-driving, being sick, trouble with law enforcement or verbal or physical assault after drinking was examined among those who had consumed alcohol in the last year. Note that students could choose multiple responses for this question. A full list of behaviours can be found <u>here</u>.

- During 2022-23, 28.7% of students reported at least one risky behaviour while intoxicated, not significantly different from 2017 (36.6%). *Figure 14*
- There was a significant decrease between 2017 and 2022-23 among male students (35.4% to 27.2%) but risky behaviour was unchanged among female students (38% to 29.2%). *Figure 14*
- There was a significant decrease between 2017 and 2022-23 among students aged 12-15 years (26.2% to 17.1%) but risky behaviour was unchanged among students aged 16-17 years (47.2% to 44%). *Figure 15*
- During 2022-23, there was no difference between male and female students in the percentage reporting at least one risky behaviour, although a significantly higher percentage of students aged 16-17 years reported at least one (44% compared with 17.1% of students aged 12-15 years). *Figures 14-15*



Figure 14: Percentage of secondary school students that had committed at least one risky behaviour after drinking alcohol by sex, 2017 to 2022-23

The estimate for 'female students' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Figure 15: Percentage of secondary school students that had committed at least one risky behaviour after drinking alcohol by age group, 2017 to 2022-23



Use of other drugs

Due to unreliable estimates, prevalence rates for most illicit drugs could not be reported individually. Rather, data are presented on the percentage of students who had used at least one of six illicit drugs at ever or in the last year. Data on use in the last week or last month were not reported.

Use of licit drugs

These include painkillers (paracetamol or ibuprofen), sedatives (benzodiazepines), inhalants (nitrous oxide, petrol, amyl nitrate), other opiates (methadone, morphine, oxycodone, codeine, buprenorphine, fentanyl, tramadol or tapentadol) and performance or image enhancing drugs (steroids). Only the first three drug classes are reported due to unreliable estimates for the prevalence of use of other drugs.

- Painkillers were the most commonly used licit drugs in 2022-23 (86.1% had ever used and 82.5% had used in the last year), followed by inhalants (19.2% had ever used and 11.2% had used in the last year), and sedatives (14.7% had ever used and 10.5% had used in the last year. *Figures 16-17*
- Between 2017 and 2022-23, the percentage of students that had ever used painkillers decreased significantly (95.9% to 86.1%), as did the percentage that had used in the last year (92.8% to 82.5%). In contrast, the percentage that had ever used sedatives or inhalants, or used in the last year, remained stable. *Figures 16-17*
- There were significant decreases between 2017 and 2022-23 among male and female students in the percentage that had ever used painkillers (94.4% to 83.9% for male students and 97.6% to 87.5% for female students) or had used in the last year (92.1% to 78.8% for male students and 93.6% to 85.3% for female students). *Table 1*
- During 2022-23, there were no significant differences between male and female students in the percentage that had used any of these licit drugs. *Tables 1-3*

- There were significant decreases between 2017 and 2022-23 among 12-15 year old students in the percentage that had ever used painkillers (95.5% to 83.9%) or had used in the last year (91.6% to 79.5%). Among those aged 16-17 years, there was a significant increase in the percentage that had ever used inhalants (11.9% to 20.6%). *Tables 1 and 3*
- During 2022-23, there were significant differences by age group in the percentage of students that had used inhalants in the last year (10.1% aged 12-15 years compared with 13.5% aged 16-17 years). *Table 3*



Figure 16: Percentage of secondary school students that had ever used selected licit drugs, 2008 to 2022-23

The estimate for 'use of inhalants ever or among male students' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Figure 17: Percentage of secondary school students reporting use of selected licit drugs in the last year, 2008 to 2022-23



■2008 ■2011 ■2014 ■2017 ■2022-23

The estimate for 'use of inhalants in the last year among male students' in 2022-23' had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.

Table 1: Use of painkillers by sex and age group, 2017 to 2022-23

	2017	2022-23
Male students		
Ever*	94.4%	83.9%
Last year*	92.1%	78.8%
Female students		
Ever*	97.6%	87.5%
Last year*	93.6%	85.5%
Students aged 12-15 years		
Ever*	95.5%	83.9%
Last year*	91.6%	79.5%
Students aged 16-17 years		
Ever	96.6%	91.2%
Last year	95%	89.4%
All students		
Ever*	95.9%	86.1%
Last year*	92.8%	82.5%

* Statistically significant difference between 2017 and 2022-23. There were no significant differences by sex or age group in 2022-23.

	2017	2022-23
Male students		
Ever	17.1%	13.9%
Last year	9.4%	8.2%
Female students		
Ever	14.6%	14.9%
Last year	10.1%	12%
Students aged 12-15 years		
Ever	13.9%	14.4%
Last year	7.1%	10.2%
Students aged 16-17 years		
Ever	20%	15.2%
Last year	14.7%	11.1%
All students		
Ever	16%	14.7%
Last year	9.7%	10.5%

There were no significant differences in sedative use either between 2017 and 2022-23, or by sex and age group in 2022-23.

Table 3: Use of inhalants by sex and age group, 2017 to 2022-23

	2017	2022-23
Male students		
Ever	13.5%	16.3%
Last year	8.4%	8.1%
Female students		
Ever	15.4%	20.1%
Last year	10.2%	14%
Students aged 12-15 years		
Ever	15.6%	18.5%
Last year**	7.1%	10.2%
Students aged 16-17 years		
Ever*	11.9%	20.6%
Last year**	8.5%	13.5%
All students		
Ever	14.4%	19.2%
Last year	9.3%	11.2%

* Statistically significant diference between 2017 and 2022-23. ** Statistically significant diference between age groups in 2022-23. The estimates for 'use of inhalants ever or in the last year among male students' in 2022-23' had Relative Standard Errors (RSEs) between 20% and 50% and should be interpreted with caution.

Use of cannabis

- The percentage of students that had ever used cannabis remained unchanged between 2017 (10.2%) and 2022-23 (11.1%), as did the percentage that had used in the last year (9.2% compared with 9.3% in 2022-23). *Figure 18*
- Estimates for female students were too unreliable for use, but there were no changes in the use of cannabis between 2017 and 2022-23 among male students. *Figure 19*
- There was a significant decrease between 2017 and 2022-23 among students aged 12-15 years in the percentage that had ever used cannabis (6.7% to 4.2%) or had used cannabis in the last year (5.5% to 3.5%); there were no changes among students aged 16-17 years. *Figures 20-21*
- During 2022-23, students aged 16-17 years were significantly more likely to have ever used cannabis (26.1% compared with 4.2% of those aged 12-15 years) or to have used cannabis in the last year (22.2% compared with 3.5% of those aged 12-15 years). *Figures 20-21*



Figure 18: Percentage of secondary school students that had ever used cannabis or had used in the last year, 2008 to 2022-23

The estimate for 'use of cannabis ever or in the last year' among all students in 2022-23 had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.



Figure 19: Percentage of male secondary school students that had ever used cannabis or had used in the last year, 2008 to 2022-23

The estimate for 'use of cannabis ever or in the last year' among male studemts in 2022-23 had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution. The estimates for 'use of cannabis ever or in the last year among female students' in 2022-23 had Relative Standard Errors (RSEs) over 50% and were too unreliable to be used.



Figure 20: Percentage of secondary school students aged 12-15 years that had ever used cannabis or had used in the last year, 2008 to 2022-23

The estimates for 'use of cannabis ever or in the last year' among studemts aged 12-15 years in 2022-23 had Relative Standard Errors (RSEs) between 20% and 50% and should be interpreted with caution.



Figure 21: Percentage of secondary school students aged 16-17 years that had used cannabis ever or had used in the last year, 2008 to 2022-23

Use of at least one illicit drug

- The percentage of students that had ever used at least one illicit drug remained unchanged between 2017 (12.8%) and 2022-23 (13.1%), as did the percentage using at least one in the last year (11.2% compared with 11% in 2022-23). *Figure 22*
- There were no changes in the lifetime use of at least one illicit drug between 2017 and 2022-23 by sex, or between male and female students in 2022-23. *Figures 23-24*
- There was a significant decrease between 2017 and 2022-23 among students aged 12-15 years (9.7% to 6.4%) in the percentage that had ever used at least once illicit drug, and a significant increase among students aged 16-17 years (18.2% to 27.7%). *Figures 25-26*
- During 2022-23, students aged 16-17 years were significantly more likely to have ever used at least one illicit drug (27.7% compared with 6.4% of those aged 12-15 years) or to have used at least one in the last year (23.1% compared with 5.6% of those aged 12-15 years). *Figures 25-26*
- Sample sizes were too small to produce reliable estimates of use for drugs such as methamphertamine, ecstasy, cocaine, hallucinogens and heroin.





The estimate for 'use of at least one illicit drugs ever or in the last year' among all students in 2022-23 had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.



Figure 23: Percentage of male secondary school students that had ever used at least one illicit drug or had used in the last year, 2008 to 2022-23

The estimate for 'use of at least one illicit drugs ever or in the last year' among male students in 2022-23 had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution





The estimate for 'use of at least one illicit drugs ever or in the last year' among female students in 2022-23 had a Relative Standard Error (RSE) between 20% and 50% and should be interpreted with caution.



Figure 25: Percentage of secondary school students aged 12-15 years that had ever used at least one illicit drug or had used in the last year, 2008 to 2022-23

Figure 26: Percentage of secondary school students aged 16-17 years that had ever used at least one illicit drug or had used in the last year, 2008 to 2022-23



For more information

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¹ Although no 12-year-olds participated in the 2022-23 survey, for ease of reporting age group comparisons are defined as between 12-15and 16–17-year-olds.

^{2 &#}x27;Illicit drugs' include cannabis, amphetamines, ecstasy, cocaine, heroin, and hallucinogens.

³ Note that variables measuring drinking behaviour only include students that reported consuming alcohol in the last year. Due to unreliable estimates, comparisons were not possible between 2017 and 2022-23, or by sex and age group in 2022-23, for all variables except risky behaviour while intoxicated.