



European Monitoring Centre  
for Drugs and Drug Addiction

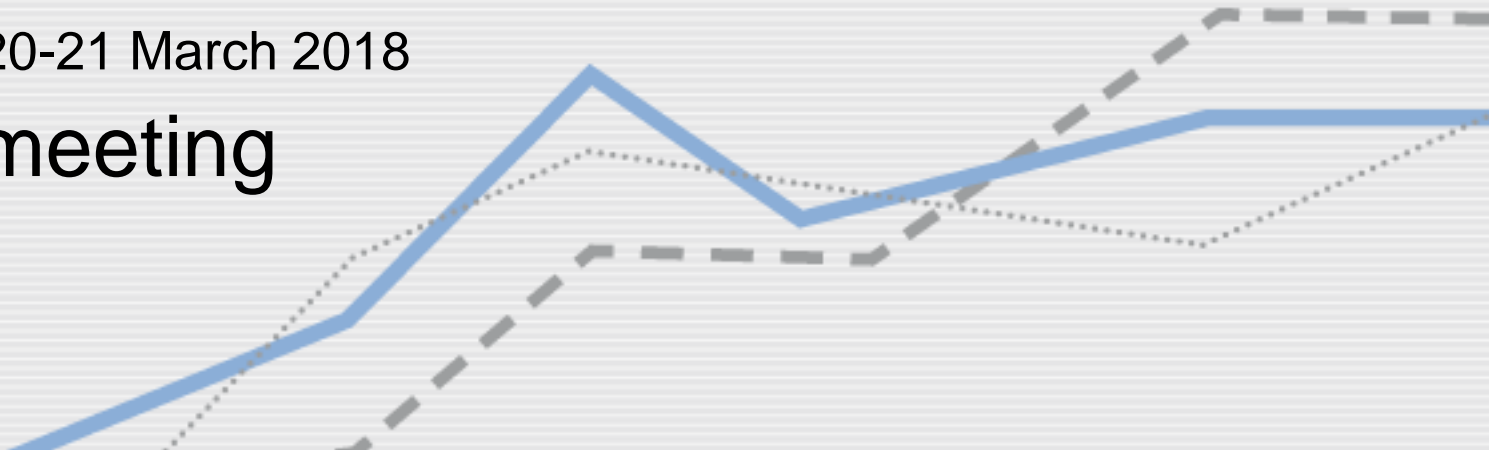
# EMCDDA

## Perspectives for information on alcohol use in the EU

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Luxembourg 20-21 March 2018

CNAPA meeting



# Topics in this presentation

- ESPAD project (now with EMCDDA) in students

Alcohol (– Tobacco – illegal drugs – medicines – gambling)

- Possibility of alcohol use information in adults (EMCDDA)



# **ESPAD project**

**European School survey Project on  
Alcohol and other Drugs**

# ESPAD data collections

- **26 countries in 1995**
- **30 countries in 1999**
- **35 countries in 2003**
- **35 countries in 2007 (plus 5 in 2008)**
- **39 countries in 2011**
- **35 countries in 2015**

**2019** in preparation: Regional Seminars April-May

- **46 European countries have participated**



# ESPAD 2015

- **35** European countries
- **96 043** students (15-16 years old)
- In the 6 waves of data collection (1995, 1999, 2003, 2007, 2011 and 2015) about **600 000** students have participated



# Why school surveys?

- Cost effective
- Relatively easy to conduct
- Reach a large number of students in one setting
- Relatively easy to standardise
- Sampling relatively easy
- High response rate among students
- High validity, i.e. more honest answers than in other surveys



# Strategy: standardization

- Target age group
- Random sampling of classes
- Master questionnaire
- Survey leader protocol
- Data collection procedure
- Time of data collection
- Common database
- The ESPAD Handbook



# Value of the project

ESPAD - one of the biggest collaborative projects worldwide on substance use among adolescents.

- Tobacco
- Alcohol
- Illegal drugs
- Medicines
- Now also gaming and gambling (on and off line)

## Cons

- Recommended sample not big (some countries much bigger samples)
- The common survey is every 4 years (though some do more frequently)
  - though enough to identify core trends





# New organizational developments

- 1995-2014 international coordination based in CAN (Sweden) with funding from Swedish Government
- Transition phase with increasing support of EMCDDA - 2015 data collection and report in 2016
- In 2017 ESPAD constitution revised to include EMCDDA as key international partner (Steering C and joint coordination).
- In 2018, European Commission – DG Home- additional contribution to EMCDDA for polydrug use and ESPAD
- Intensive work on-going for 2019 data collection (questionnaire, regional seminars...)



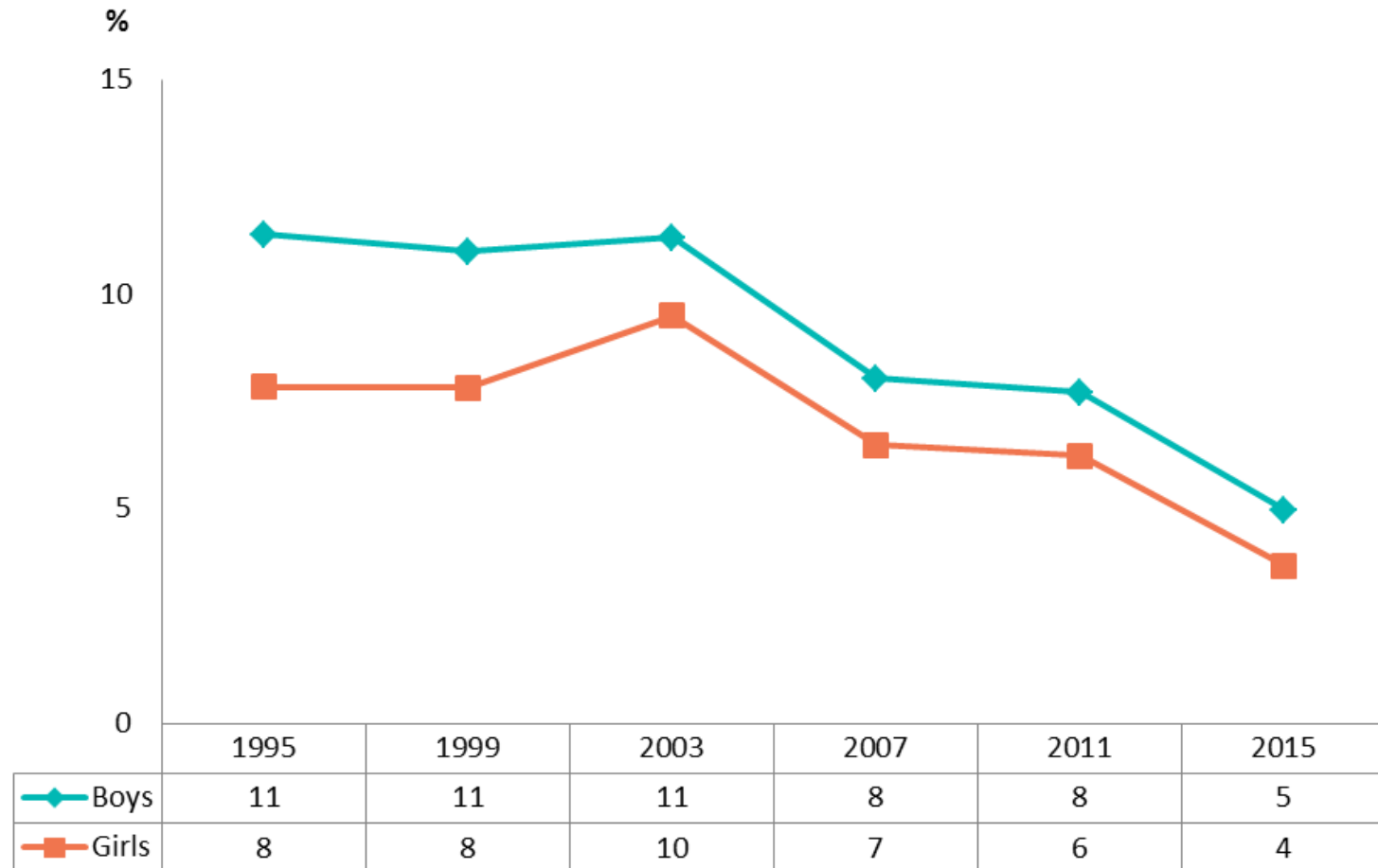
**For context**

**Few indicators on tobacco and cannabis**



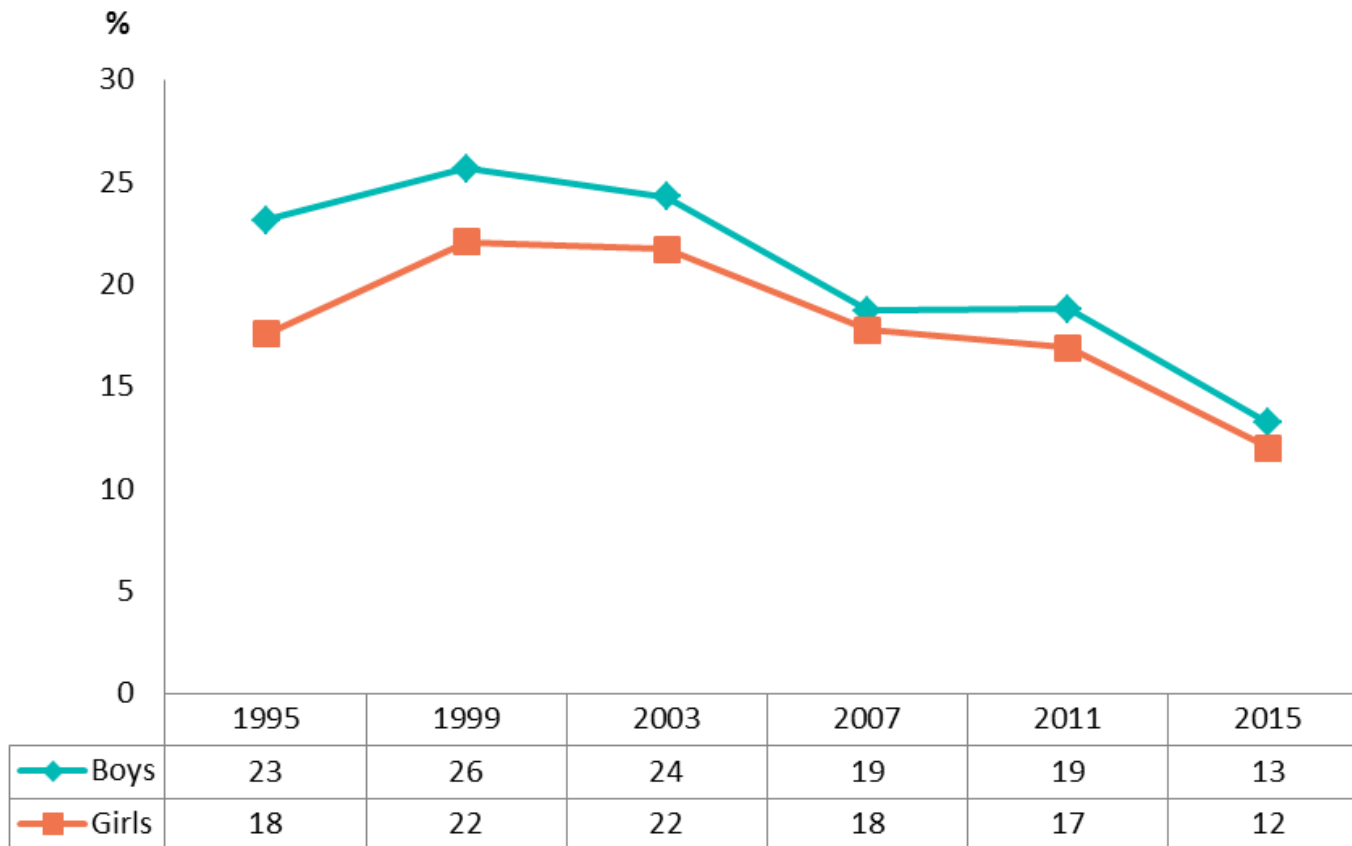
# Daily cigarette use at the age of 13 or younger, by gender

25-country trend 1995-2015 (percentage)



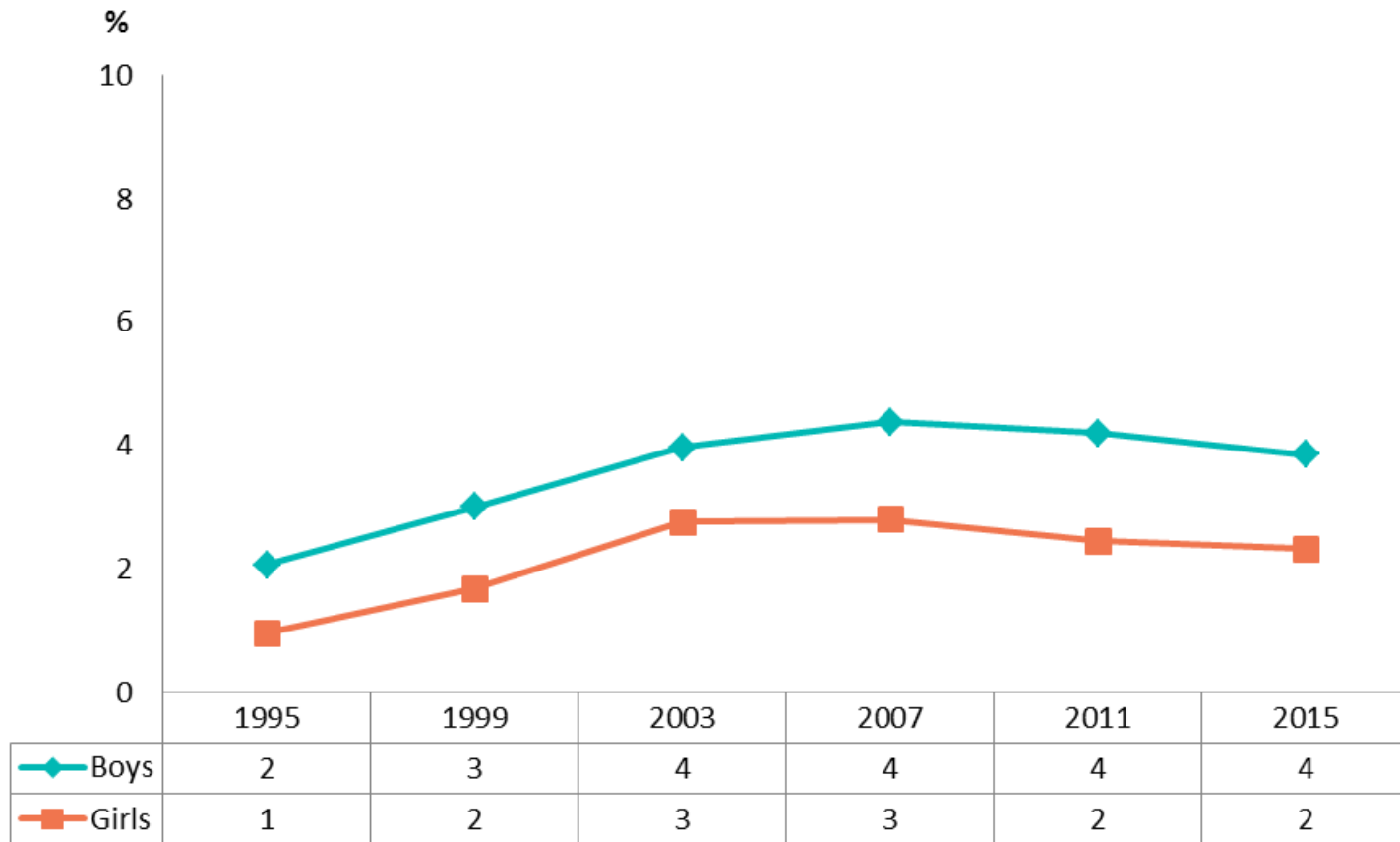
# Daily cigarette use in the last 30 days, by gender

25-country trend 1995-2015 (percentage)



# Cannabis use at the age of 13 or younger, by gender

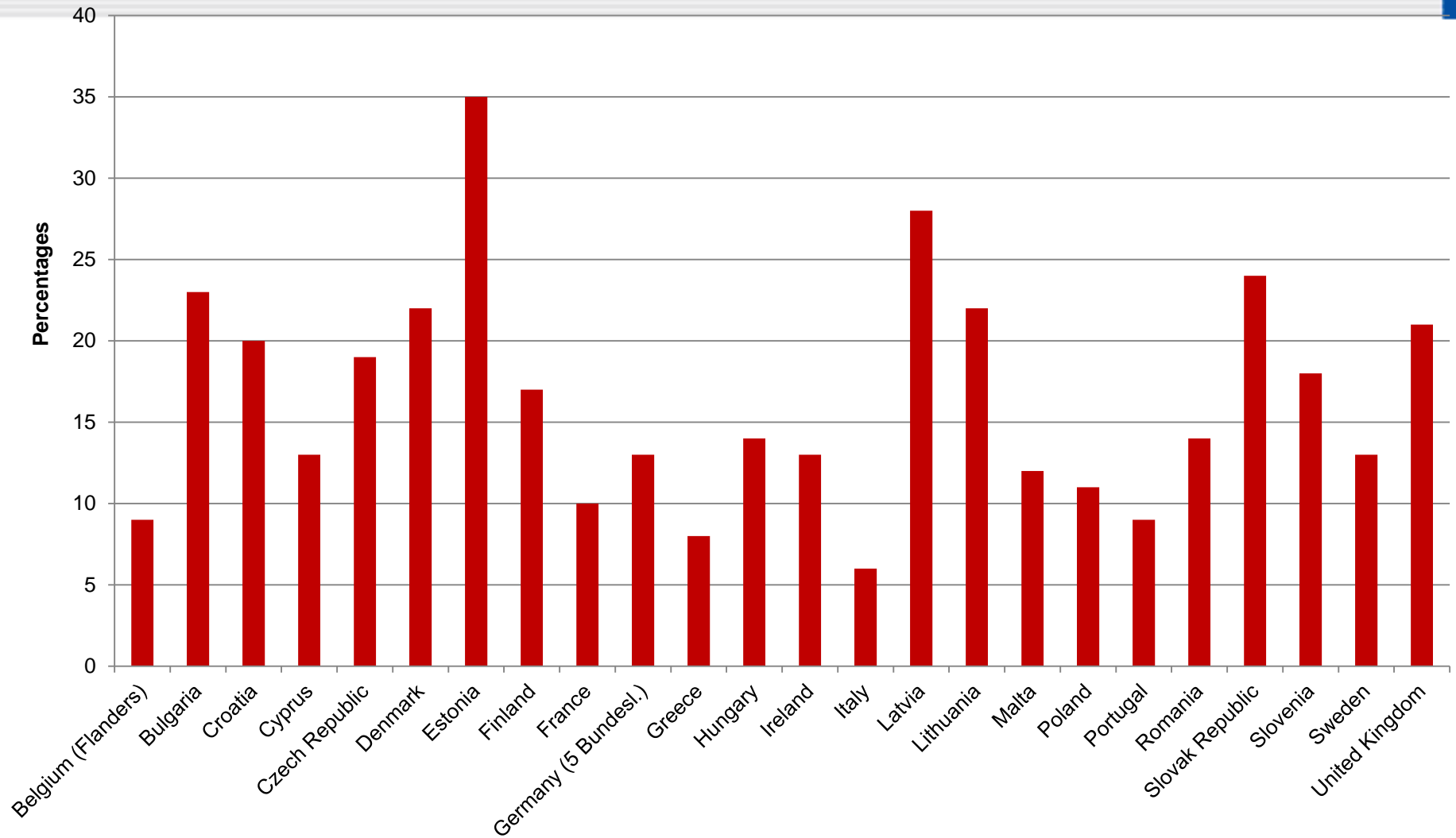
25-country trend 1995-2015 (percentage)



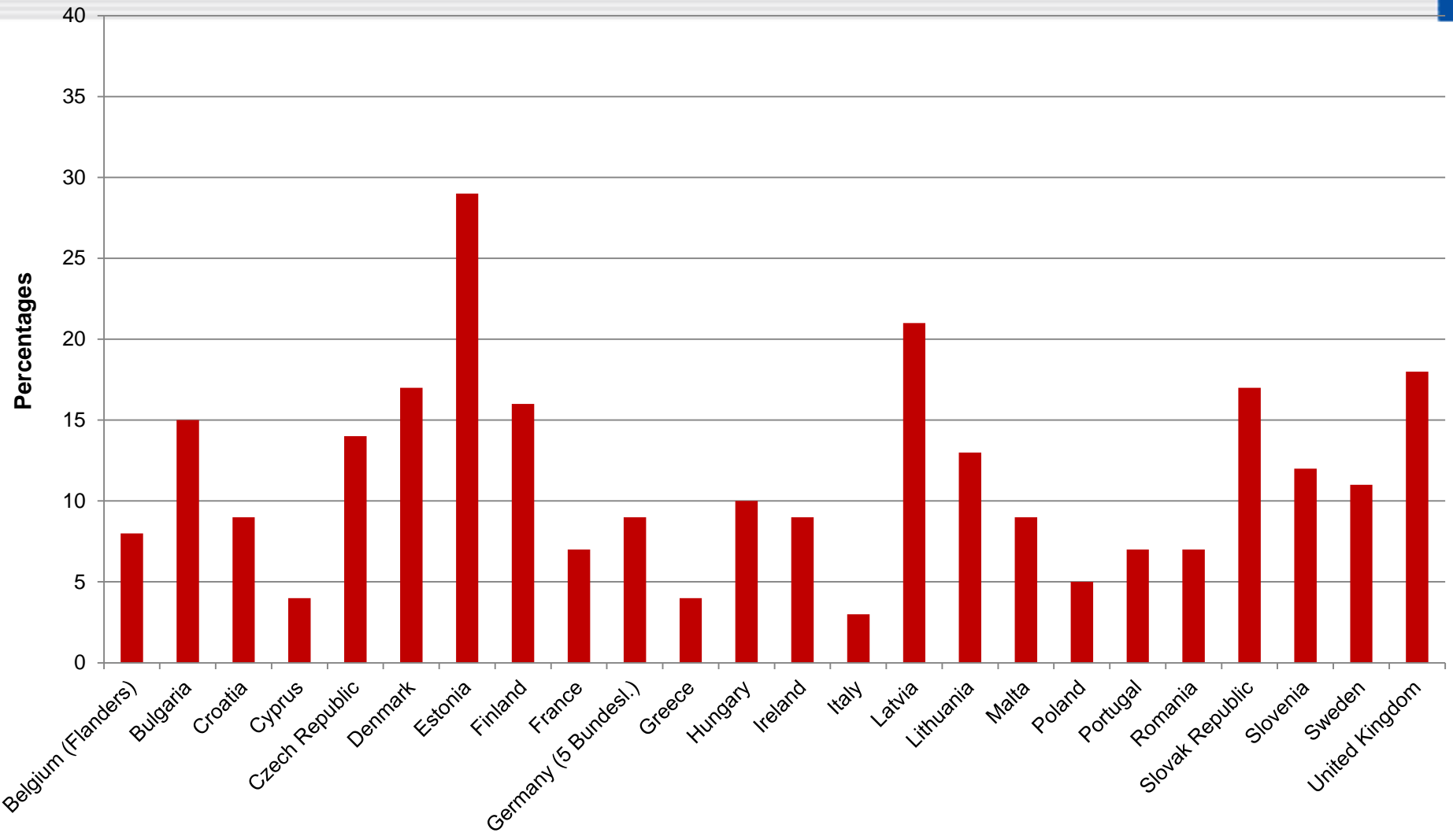
# Some indicators on alcohol



# Proportion of male students having been drunk at the age of 13 or younger (2011).



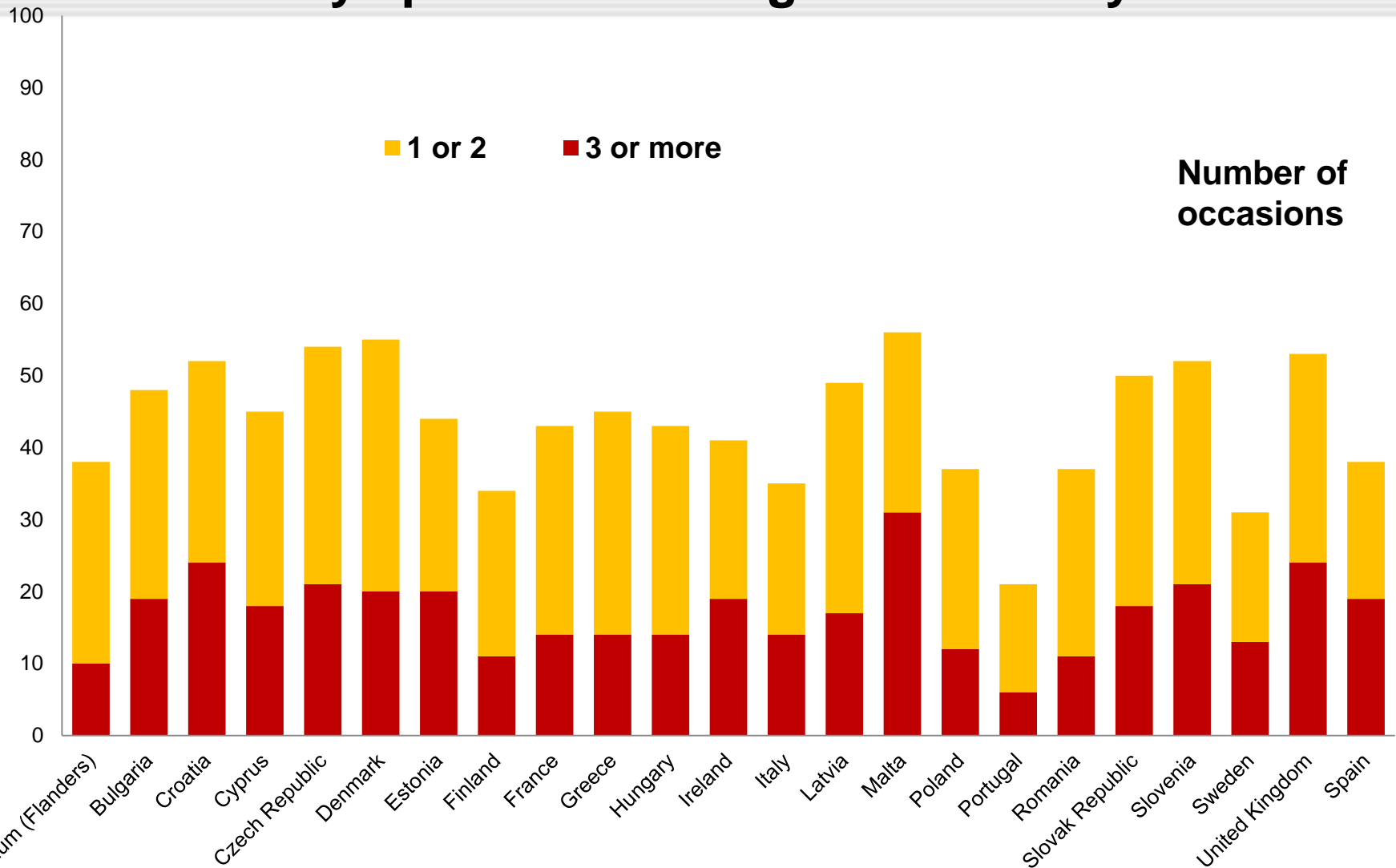
# Proportion of female students having been drunk at the age of 13 or younger (2011).



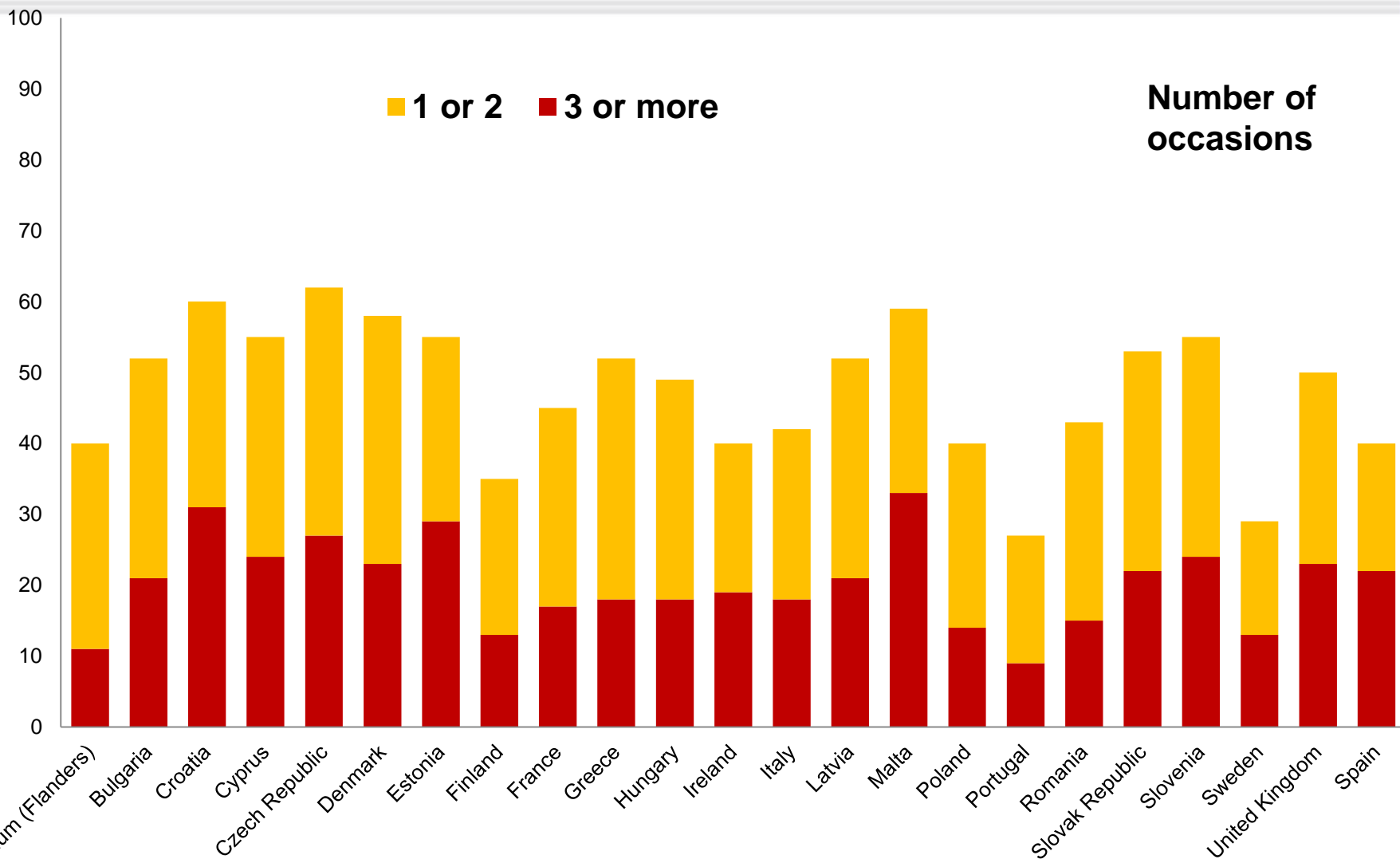


# All students frequency of having had five or more drinks on one occasion during the last 30 days (2011).

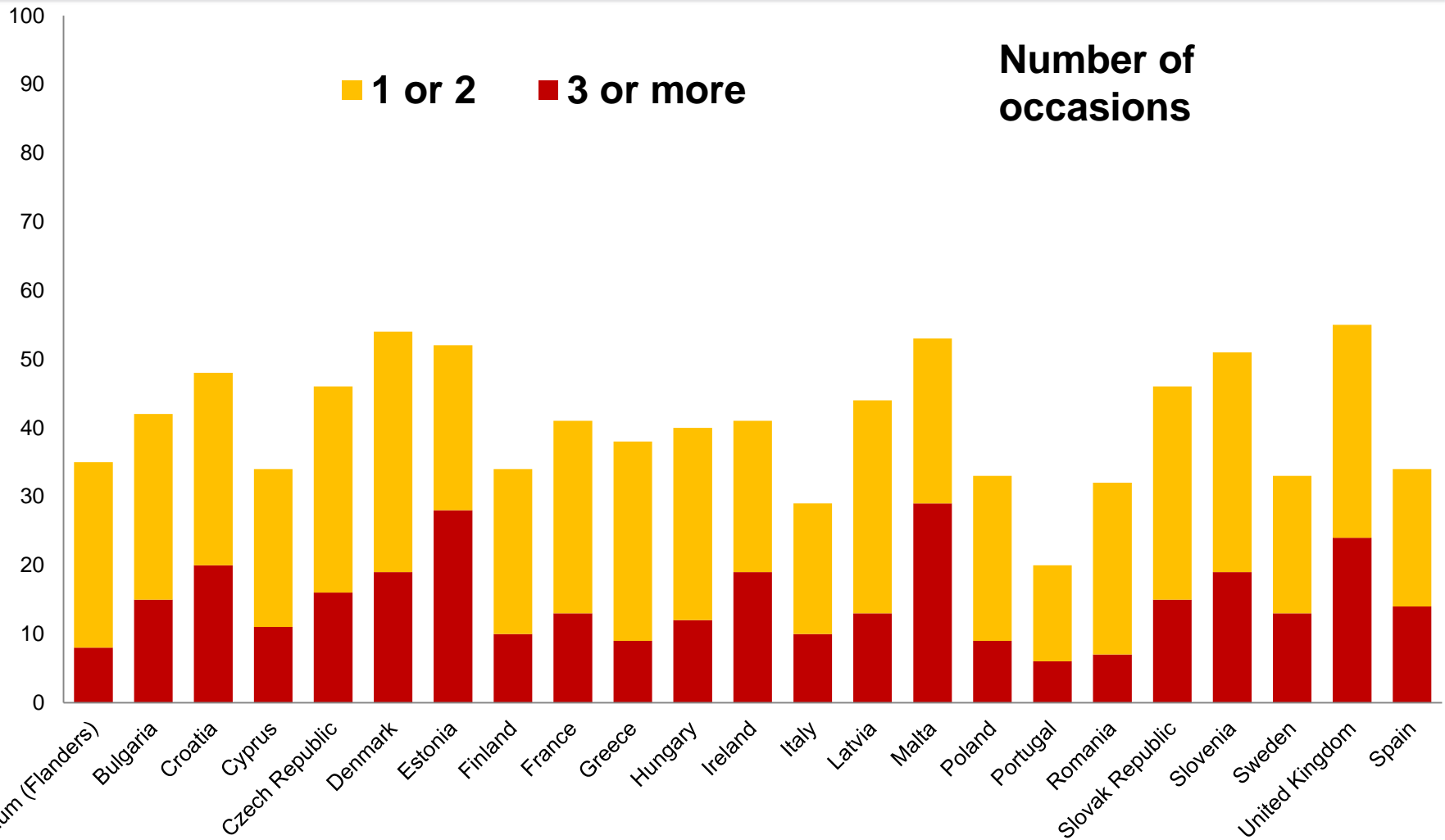
## - Heavy episodic drinking in last 30 days-



# Frequency of having had five or more drinks on one occasion during the last 30 days. **Boys (2011).**

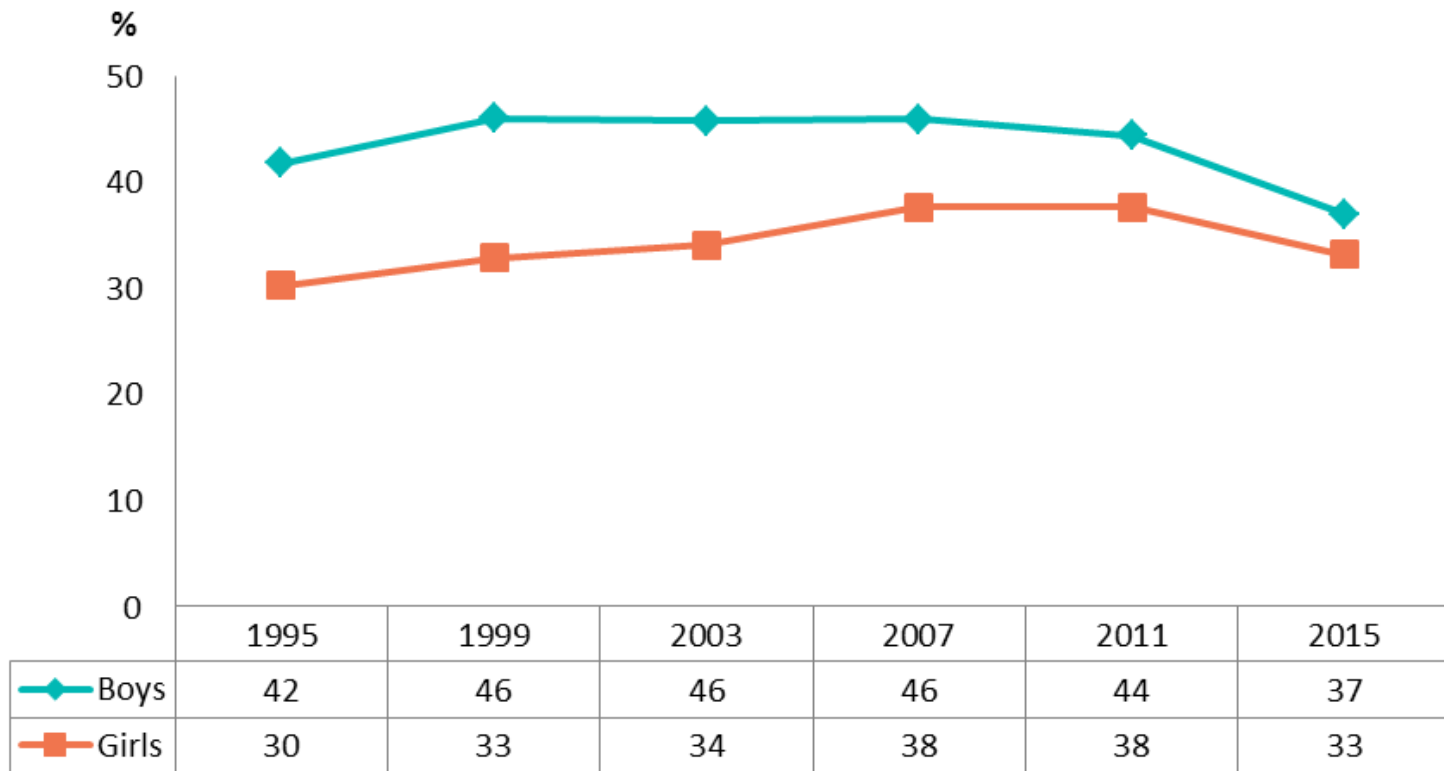


# Frequency of having had five or more drinks on one occasion during the last 30 days. **Girls (2011).**

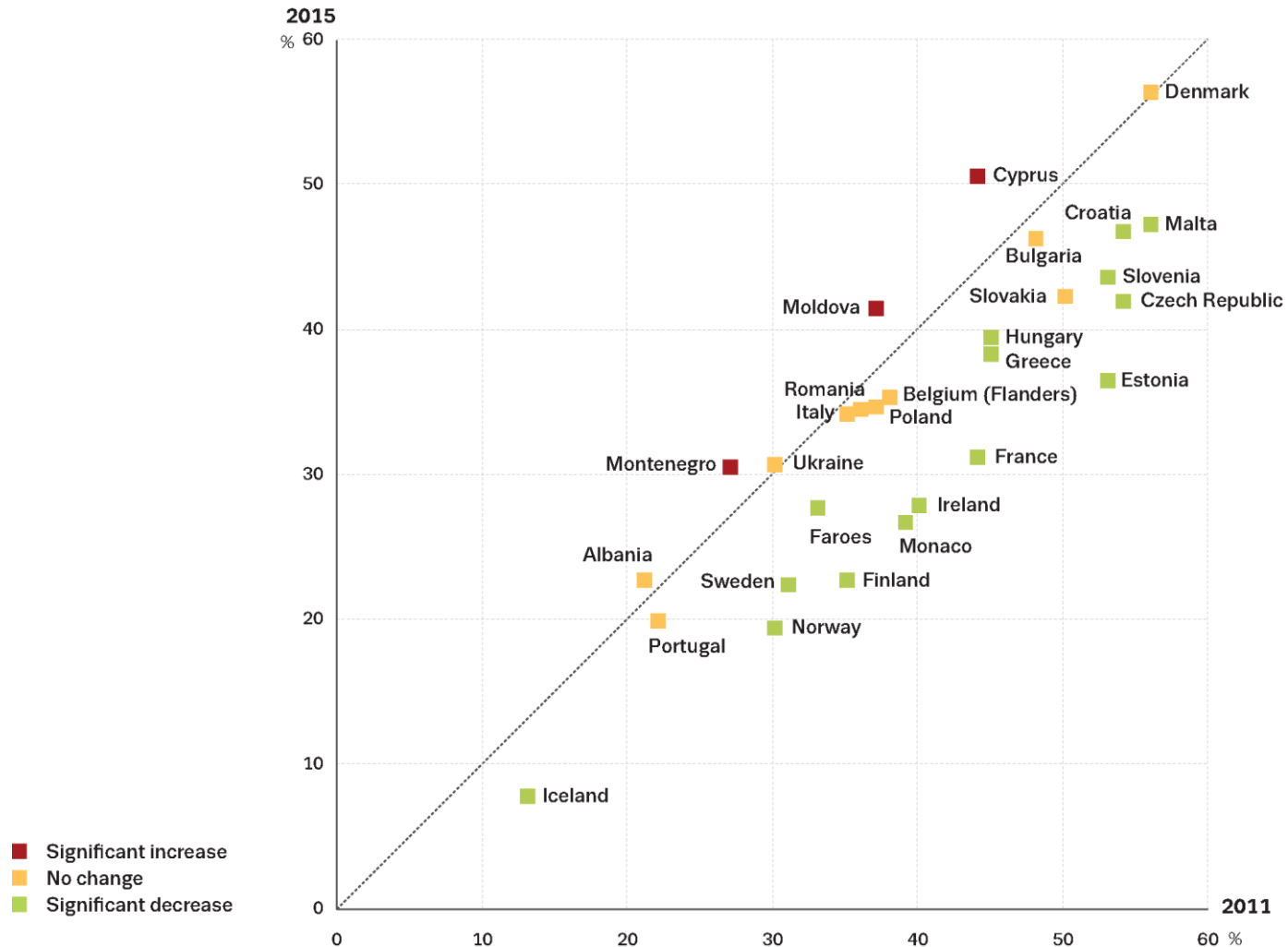


# Heavy episodic drinking during the last 30 days, by gender

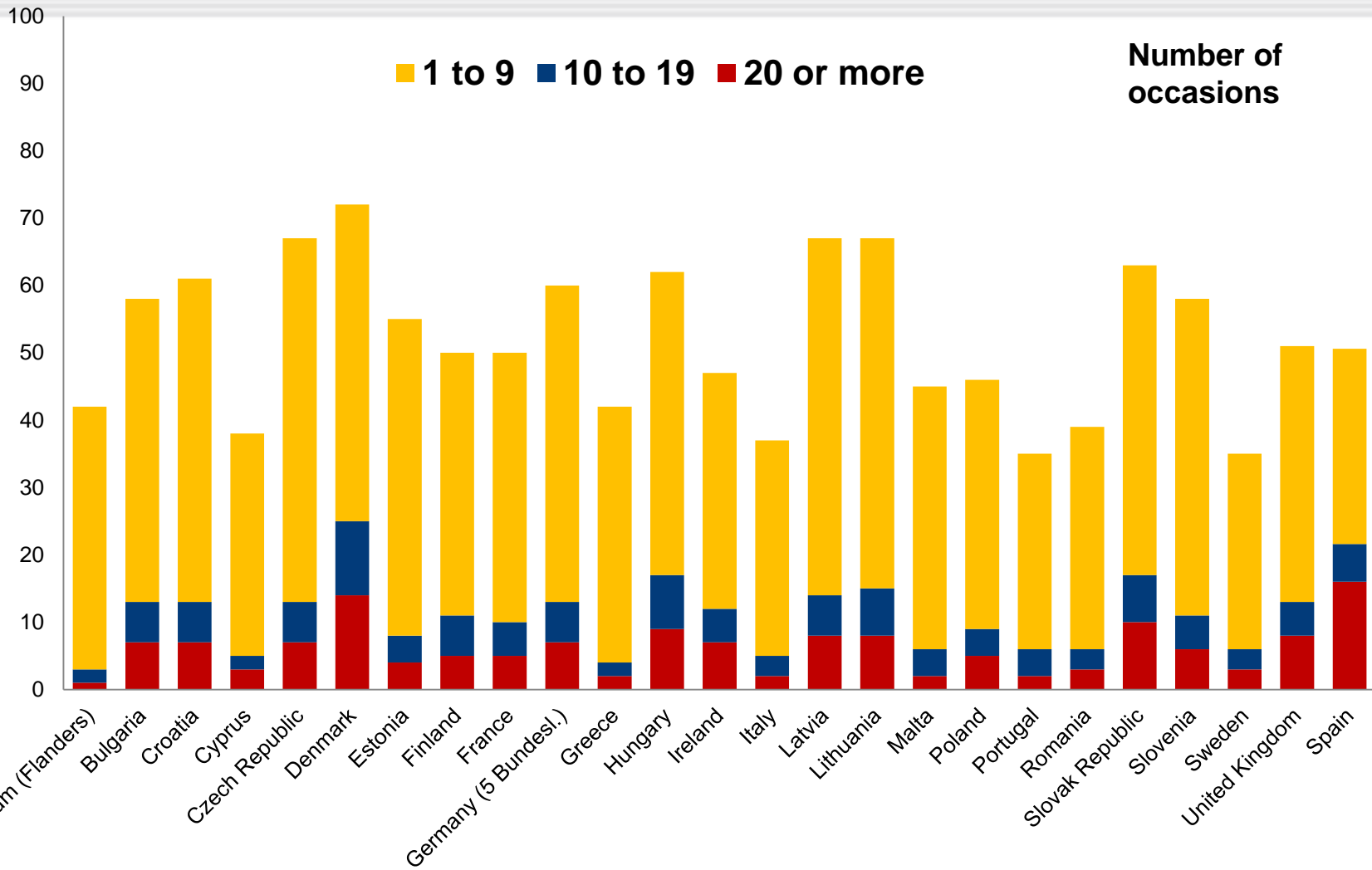
Five or more drinks on one occasion. 25-country trend 1995-2015 (percentage)



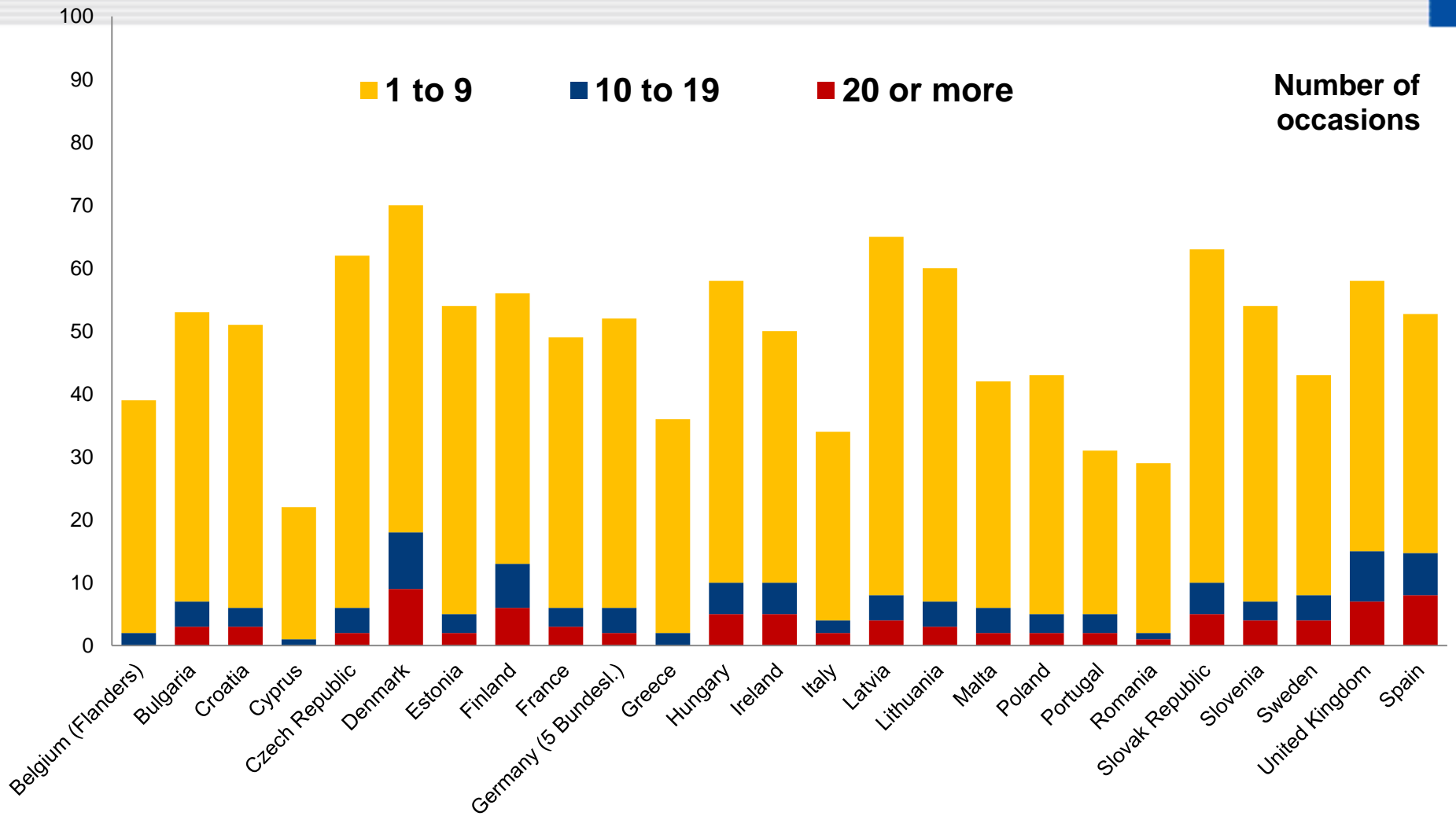
# Changes between 2011 and 2015 in the proportion reporting having had five or more drinks on one occasion during the past 30 days (percentage)



# Frequency of lifetime drunkenness. Boys (2011).



# Frequency of lifetime drunkenness. Girls (2011).



[www.espad.com](http://www.espad.com)





# Possible additional options in adults



# Reitox: a unique data collection system

Reitox combines

National Drug  
Observatories in 28 EU  
Member States

Norway and Turkey



# “Key Epidemiological” Indicators

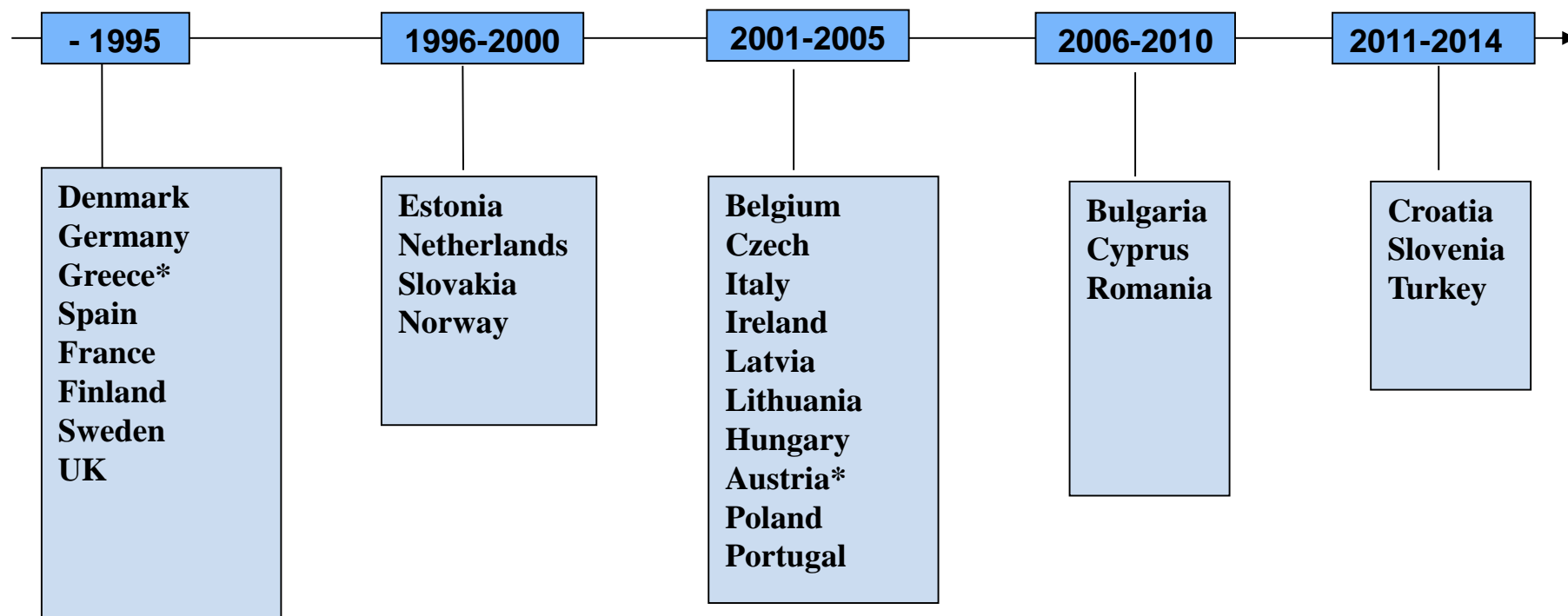
- **Prevalence and patters of drug use\* in the general population (GPS)**
- Prevalence and patters of High Risk Drug Use (HRDU)
- Treatment Demand due to drug problems (TDI)
- Drug-related Deaths (DRD)
- Drug-related Infectious Diseases (DRID)

**(\*) in fact in most cases “substance use”**

(in many countries convergence in policies and institutions on legal and illegal substances  
– use same survey... and other indicators -)



# Timeline: implementation of National Population Surveys on drugs/substance use



Luxembourg only still missing

# “European Model Questionnaire” (EMQ)

Set of **items** on modular form to:

- Create a specific questionnaire
- Inclusion in an existing questionnaires

Modules on:

- socio-demographics
- illicit drugs prevalence and patterns of use
- **alcohol use, tobacco, medicines** - (polydrug use)
- risk perception and policy opinions



# Ongoing

To adapt the “RARHA” questionnaire for the EMQ

By identification of a core set of items, mainly based on

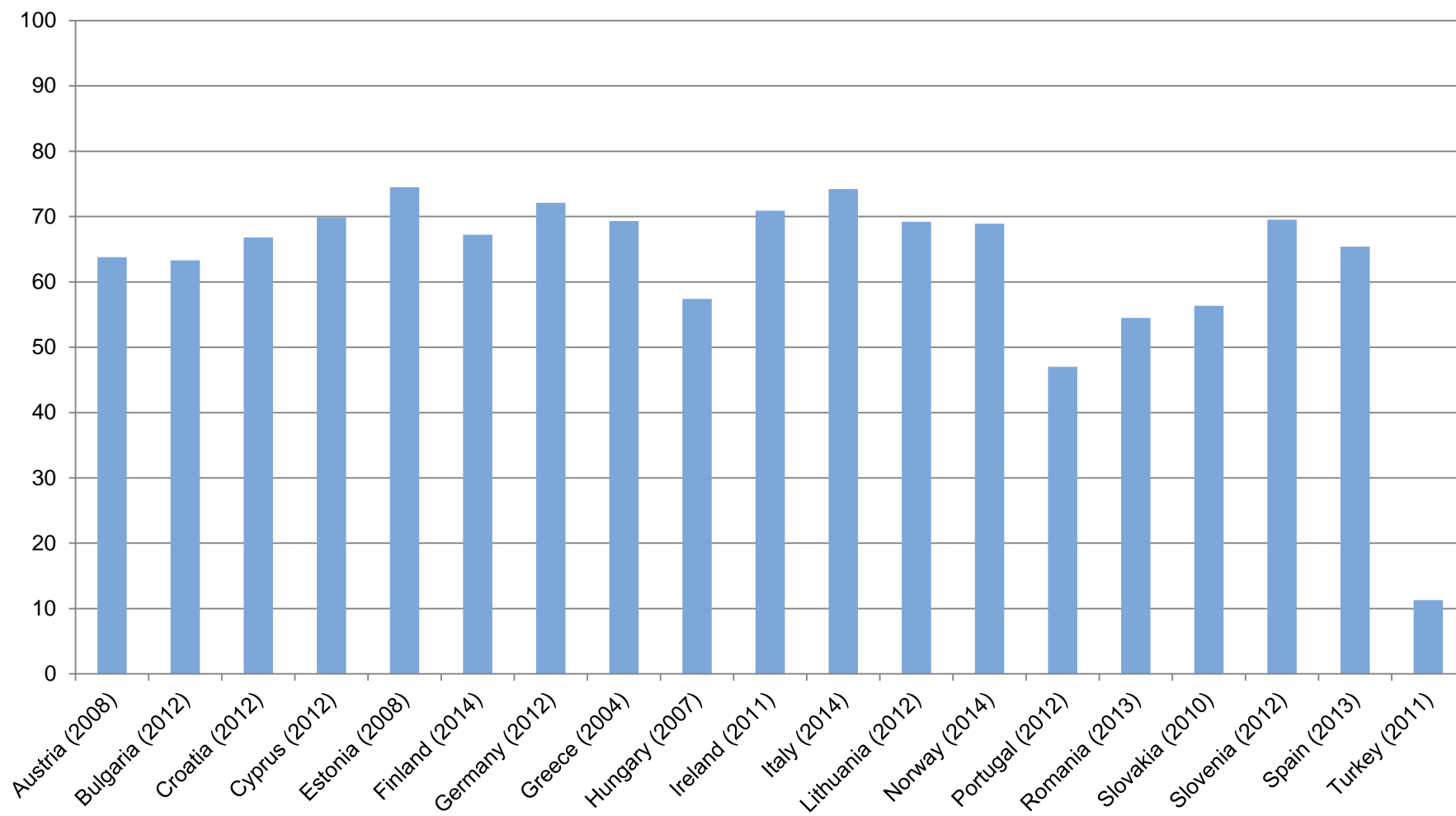
- prevalence questions (frequency, heavy episodic drinking, drunkenness, dependence -yes but instrument not clear-),
- individual harms

No QF or BSQF

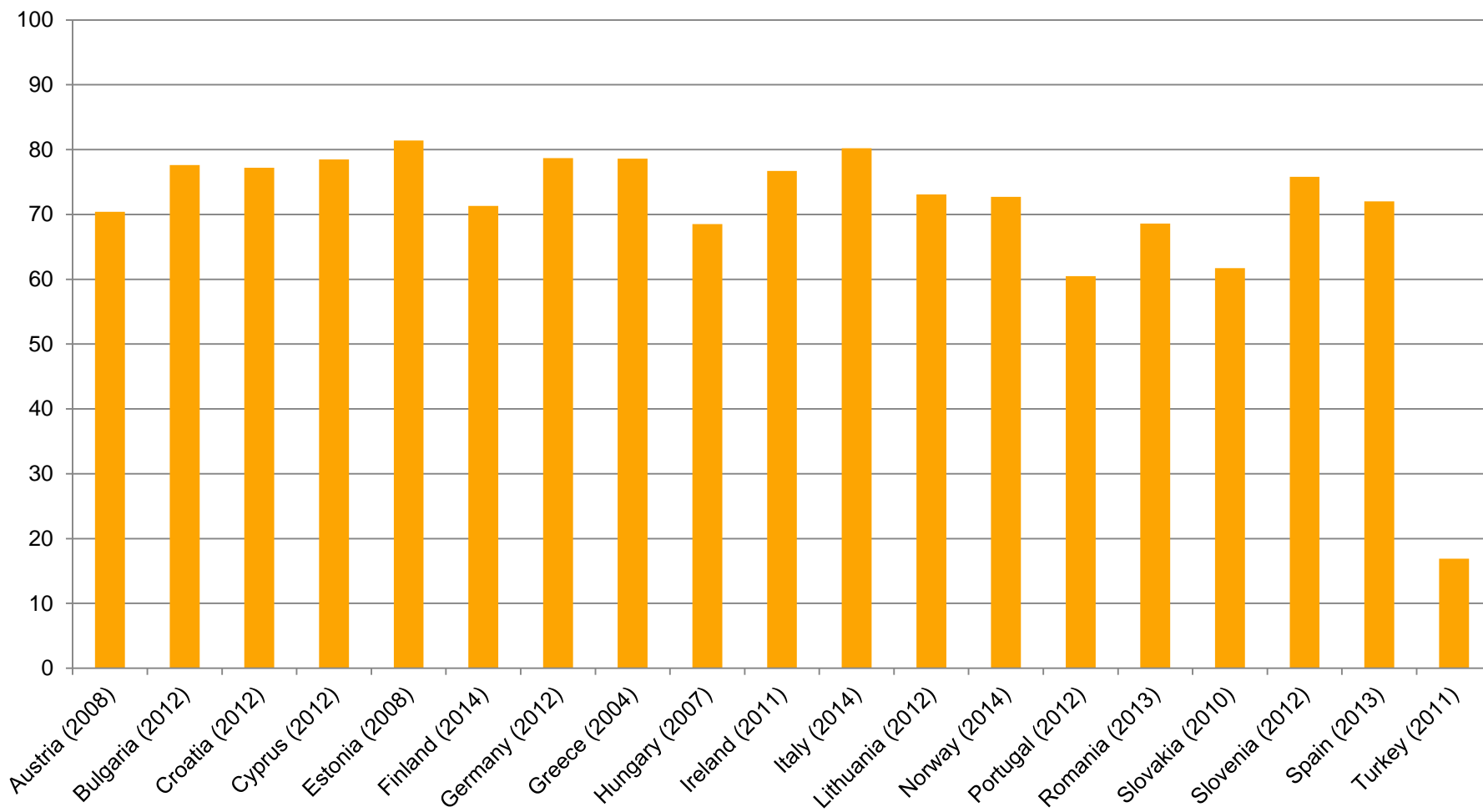
This is for EMQ – countries are free to include all items they wish) → in that case RARHA items recommended



# Last month prevalence of alcohol use – young adults (15-34) ALL

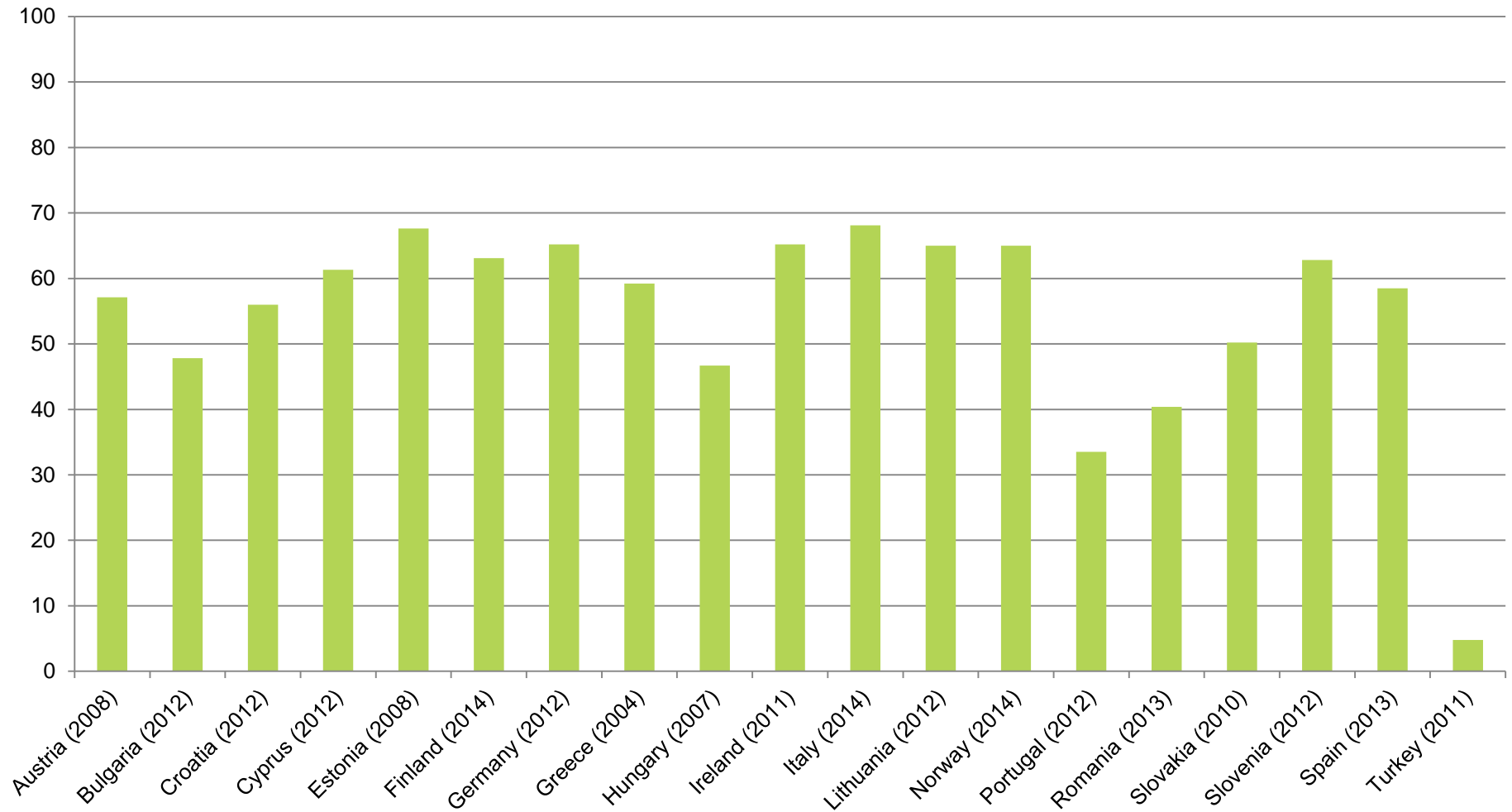


## Last month prevalence of alcohol use – young adults (15-34) males (%)





# Last month prevalence of alcohol use – young adults (15-34) females (%)



# Young Adults 15-34 years old

Ad-hoc polydrug use analysis (2010)

Focus on young adults who were - during last 12 months

Frequent/heavy alcohol users:

drinking 6 glasses of more of an alcoholic drink during the same occasion daily, almost daily or every week during the past 12 months

Cannabis users

# Last 12 month prevalence of cannabis, cocaine and frequent/heavy alcohol (single substance) use

<b>Country and survey date</b>	<b>Freq/heavy alcohol</b>	<b>Cannabis</b>	<b>Cocaine</b>	<b>Base sample</b>
Ireland* (2006/7)	30.3	10.4	2.9	1989
Denmark (2008)	18.6	13.3	3.4	1744
UK** (2007/8)	9.9	15.4	5	10,021
Germany (2006)	9.2	12	1.5	3306
Spain (2007/8)	7.5	19.6	5.1	9443
Cyprus (2006)	5.9	3.6	0.9	1753
France (2005)	5.3	16.7	1.2	10,855
Portugal (2007)	2	6.7	1.2	4765
Italy (2007)	1.8	20.9	3.1	4243

16-30 unweighted \*\*

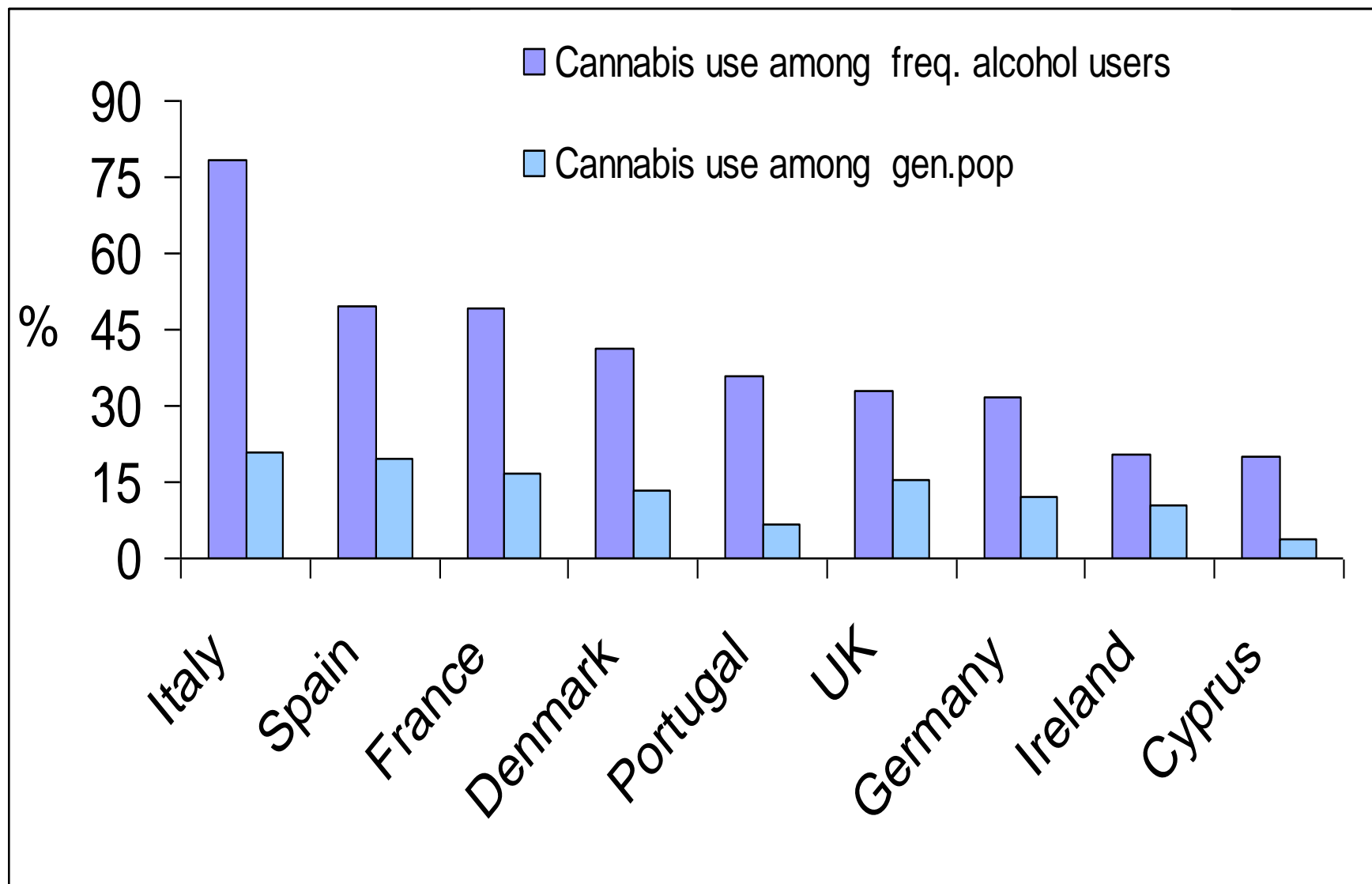
Frequent/heavy alcohol : drinking 6 glasses of more of an alcoholic drink in the same occasion daily, almost daily or every week

# **Frequent/heavy alcohol users - young adults**

## Last 12 months prevalences

Frequent/heavy alcohol users, in general, are 2 to 6 times more likely to use cannabis than those in the general population

# Freq/heavy alcohol users:use of cannabis (last 12 months) compared to general population



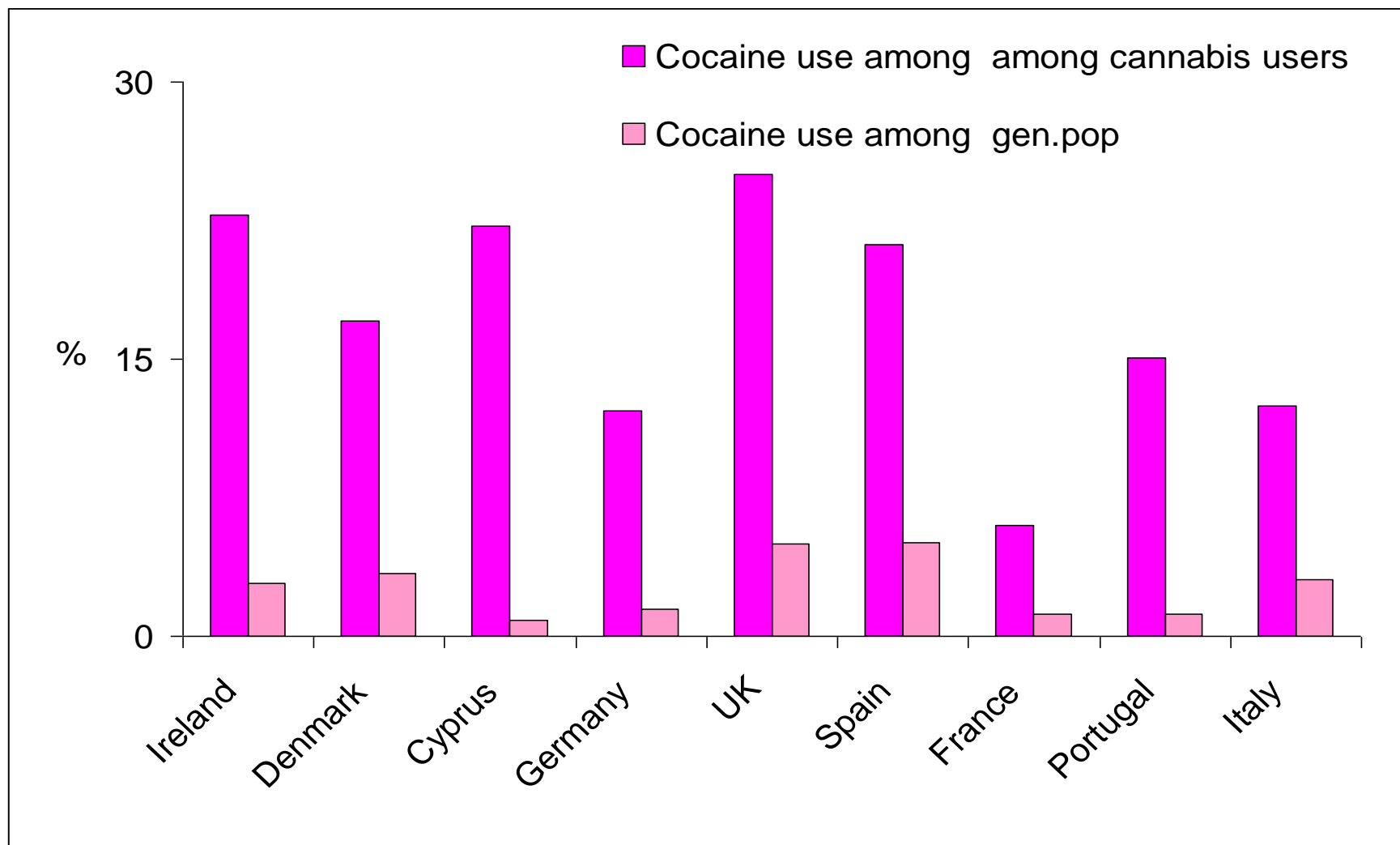
# Perspectives

- Adoption of a new module on alcohol use based in RARHA questionnaire (limited number of items)
- More proactive role of EMCDDA in implementation of this module in national surveys
- More proactive role in collation of the information at EU level (sole limited resources?)



# Cannabis users: use of cocaine

(last 12 months) compared to the general population







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# Thank you for your attention!


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