

“Psychoactive substance use in general population in 2010 - survey results”

Artur Malczewski

Information Centre for Drugs and Drug Addiction

National Bureau for Drug Prevention

Under monitoring drug use prevalence in the general population, Millward Brown SMG/KRC was commissioned to conduct field tests on a representative sample of 1 000 respondents. The survey concerned psychoactive substance use with particular emphasis placed on legal highs. The questionnaire was developed by the Information Centre for Drugs and Drug Addiction of the National Bureau for Drug Prevention (CINN KBPN).

The survey was conducted at respondents' homes through the computer-based face to face interview (CAPI method). As a cold subject, the issues of drug use were addressed with care. Then a respondent individually filled out a separate questionnaire. The previous year's measurement was the second to have been commissioned by the KBPN and the third to have been conducted by SMG/KRC. In 2008, a 1 000 sample survey was commissioned by the Hungarian Civil Liberties Union (HCLU). Some of the 2010 results can be compared to those of 2008 as all the three surveys were conducted in the framework of SMG/KRC Omnibus. Consequently, we can present not only the scale of drug use in respective years but also the trend in this respect.

Sample and methodology

The survey conducted by the CINN KBPN in 2009 and 2010 covered a representative population of Polish residents aged 15-75 (N = 1001). The respondents were asked about using psychoactive substances in the last 30 days, 12 months and in a lifetime. Lifetime substance use prevalence determines the level of experimenting with drugs – respondents might have had a single contact with a substance or used the drug many years before the survey. However, the lifetime prevalence question helps to capture the use of most drugs

whose prevalence rates are far lower compared to the last 12 months or 30 days prior to survey. Based on the 2009 and 2010 data, correlations between substance use and the following variables were analyzed: sex, age (4 age groups), place of residence (four categories: village, city up to 100 thousand population, 100-499 thousand, over 500 thousand population) and education (primary, vocational, secondary, post-secondary). The 2010 results were compared to the 2009 ones and in some substances (amphetamine, cannabis) to the 2008 ones. Calculations were conducted with the PASW Statistics 18 application.

Prevalence of legal highs use

This survey for the first time ever attempted at estimating the scale of legal highs use in the Polish population. Before only selected groups were studied, e.g. students aged 18-19 in 2010¹ (result of the joint CBOS Foundation and the CINN KBPN survey are available at the CINN webpage). In the national surveys of 2009 and 2010 a question was asked about using legal highs (called also designer drugs - substances of psychoactive effects sold in special shops or online). Adding the definition was intended to exclude erroneous answers e.g. considering energy drinks legal highs. In 2010, the respondents were also asked to give names of legal highs they had used. In 2009, in all three prevalence questions (lifetime, last 12 months and last 30 days) the most popular substance were legal highs. In 2010, the prevalence of legal highs use was lower compared to tranquilizers and sedatives taken without doctors prescriptions. 3% of the respondents admitted using legal highs at least once (6% in 2009), which constitutes a 50% fall in lifetime prevalence. Legal highs were more frequently used by men – 3% (7% in 2009) than women – 2% (5% in 2009). Every twenty-fifth respondent in the 15-39 age group reported using legal highs (8% in 2009). It is worth looking at the last 12 months prevalence rate as in this way we can compare the use of legal highs in 2009 and 2010. Since both surveys were conducted towards the end of the year, the last 12 months question refers almost to the whole calendar year. We must remember that between the end of 2008 and the beginning of November 2010 it was the time of dynamic growth of legal highs shops. In 2010, the last 12 months prevalence rates for legal highs use decreased by more than half (from 5% to 2%).

¹ Survey results are available at the CINN website:

Full report in Polish: http://www.cinn.gov.pl/portal?id=15&res_id=301553,

Summary in English: http://www.cinn.gov.pl/portal?id=15&res_id=307419

Both in men and women the percentage of legal highs users was 2%. The respondents were also asked a question about use of legal highs in the last 30 days. In this case 4% of the respondents used legal highs in 2009 (5% of men and 3% of women) whereas in 2010 it was only 1% for both groups. Analyzing the place of residence of the respondents who reported at least a single contact with legal highs we record a 3% prevalence rate among residents of rural areas and cities of more than 500 thousand population in 2010. Considering the education of the respondents the highest percentages of legal highs users are recorded among respondents with secondary education – 4% (8% in 2009). Ages of users legal highs is presented on Figure 2. Apart from the prevalence of legal highs use, the survey looked into the knowledge and attitudes towards new substances. At the beginning the respondents were asked whether they had heard of legal highs. Almost half of them i.e. 46% answered positively to this question. Out of this group i.e. 460 respondents, 6% had visited legal highs shops and every fourth actually made purchase (28 individuals). It is surprising that none of the respondents bought legal highs on the Internet. The individuals who purchased legal highs were asked to list names of substances that they bought. Adding this question was to verify whether the respondents, despite being provided with the definition, did not confuse legal highs with energy drinks. None of the respondents listed a name of energy drink, however, among the individuals who bought legal highs more than a half refused to give the name of the substance and every fourth respondent did not remember it. The most frequently listed substance was an herbal concoction called “Tajfun”. Every tenth individual who bought legal highs listed it.

Figure 1. Percentages of legal highs users in 2009 and 2010

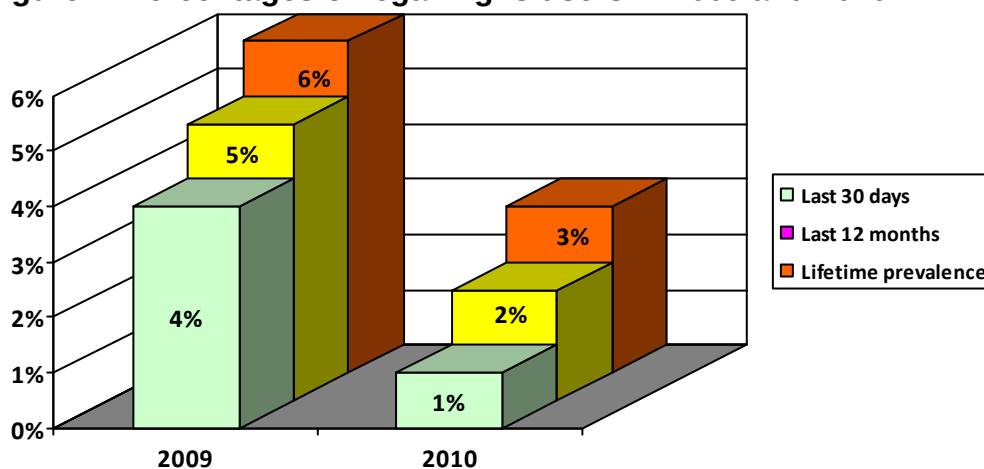
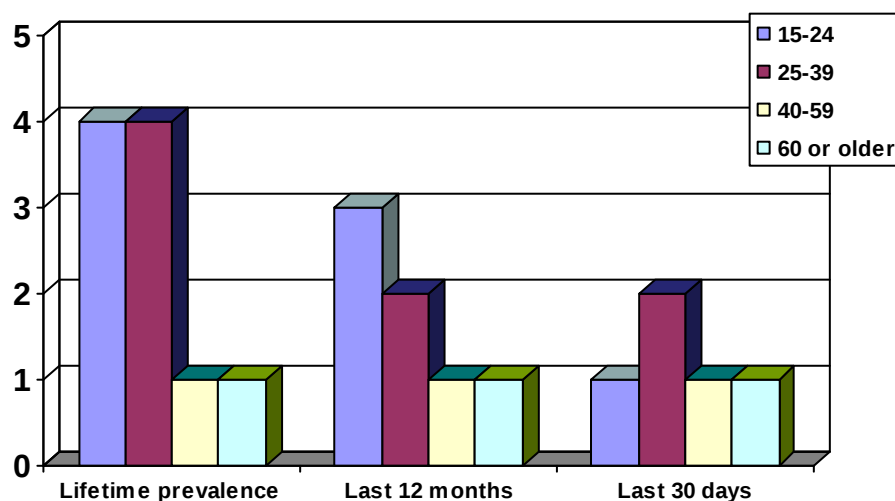


Figure 2. Legal highs use by age in 2010 (%)

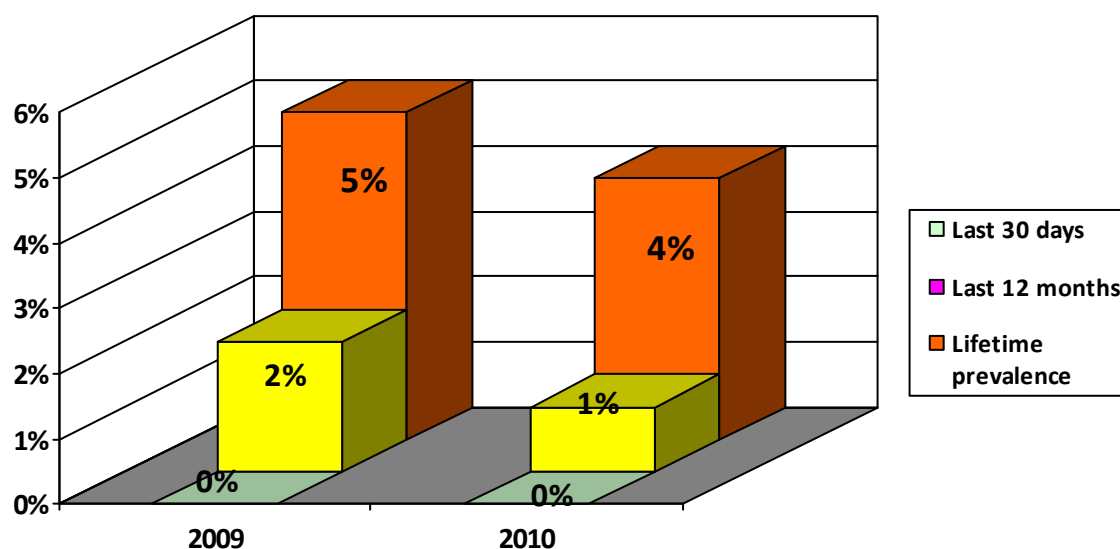


Cannabis – drop in popularity

Cannabis is the most prevalent drug in Poland and Europe. In 2010, 4% of the respondents reported using it in a lifetime (5% in 2009), 1% in the last 12 months (2% in 2009) and 0% in the last 30 days (0% in 2009). The last measurement shows a drop in cannabis use. In the 2008 HCLU survey, 7% of the respondents reported a single contact with cannabis. If we compare the 2008 and 2010 results we observe a fall of 3 percent point.

Cannabis use was more prevalent in men than women. Experimenting rates stood at 6% for men (7% in 2009) and 2% for women (3% in 2009). The male respondents used cannabis three times as frequently as women. The rates are lower if we consider the recent use (last 12 months): 2% of men and 1% of women (the same results as in 2009). Almost every tenth respondent aged 15-39 admitted to ever using cannabis. The highest prevalence rates were recorded in cities of 100-499 thousand population – 8% compared to only 3% in rural areas. Post-secondary education respondents used cannabis more frequently (9%) compared to secondary education respondents (6%). Cannabis use was the least prevalent among vocational education respondents – 2%. The higher the education level of the respondent the more prevalent cannabis use was.

Figure 3. Cannabis use prevalence in 2009 and 2010



Prevalence of tranquilizers and sedatives use

Poland is one of the countries with the highest prevalence use rates of prescription tranquilizers and sedatives taken without a doctor's prescription. The latest CINN KBPN surveys of 2002 and 2006 showed that these psychoactive substances are more popular than cannabis, which is the most prevalent illegal drugs.

In the survey the respondents were asked about consumption of prescription tranquilizers and sedatives taken without doctor's prescription. They were also asked to give names of the drugs they had used. This was meant to verify the validity of answers concerning the medications which had to be available by prescription only. When we analyze the structure of answers we note that tranquilizers and sedatives were the most prevalent type of substance among the respondents. It is a change compared to the 2009 survey results as at that time legal highs were the most prevalent substances. 5.5% of the respondents admitted to experimenting (lifetime prevalence) with the prescription drugs (3.6% in 2009), 3% had used them in the last 12 months (1.7% in 2009) and 1.4% in the last 30 days (1% in 2009). An analysis of the lifetime prevalence of medical drug use in 2009 showed the same proportions of men and women: 4%. Tranquilizers and sedatives are mainly used in small and medium-sized cities (up to 500 thousand population). The highest percentage of users (6.5%) was recorded in cities of 100-500 thousand population. In 2010, medical drugs

enjoyed the highest prevalence among vocational education users (6%) and in the age group of 60 and older. In the survey, every tenth respondent reported using tranquilizers and sedatives. The lowest prevalence was recorded in young people aged 15-24. In this group the rates were close to zero.

The results regarding tranquilizers and sedatives should be considered overestimated and inadequate in terms of providing the accurate scale of tranquilizers and sedatives use without doctor's prescription. As it has been mentioned, in the survey the respondents were asked to give names of the drugs they had used. More than one name was acceptable. In 2009 more than a half of the names of medical drugs given by the respondents were not actually prescription tranquilizers and sedatives. The respondents mentioned drugs such as: Persen, Lemon balm, Deprim, Valerian, Validol, Nervosol, Neospamina, Melatonina, Kalms, or even APAP Noc (paracetamol). 15% of the positive answers included lemon balm, teas or herbs. 26% of the medical drug respondents could not recall what substances they had used and 8% listed Persen or Kalms. In the case of real prescription drugs every fourth respondent had used Relanium. The remaining prescription tranquilizers or sedatives were much less prevalent as they were reported by 2-3% of the respondents. They included Propranol (3%); Polsen (2%), Olzapin (3%), Oksazepam (3%). In 2010, the respondents to a far greater extent failed to give names of medical drugs they had used: 55% did not remember names of drugs and 22% did not remember. Those respondents who had used medical drugs mentioned Nerwosol (2%), Persen (2%), and Lemon balm (3%). These drugs can be available without prescription. The most prevalent prescription drugs were Relanium (6%) as well as Oxazepam (2%), Xanax (2%) and Rexetin (2%). More than 2% of the respondents declared the use of sedatives without giving their names. The surveys of 2009 and 2010 showed that the results concerning tranquilizers and sedatives must be taken with great care as respondents while answering a question regarding prescription drugs report popular and widely available pharmaceuticals or even diet supplements. It is also confirmed by the age group analysis. Almost nobody used medical drugs in the youngest age group of 15-24 and drugs are most prevalent among youth and not people aged 60 and older. And it is the oldest age group where the highest prevalence rates of medical drug use were recorded.

Prevalence of stimulants use

Amphetamine is the most popular stimulant drug in Poland. It is also more prevalent than cocaine in Scandinavian countries. In the Czech Republic it is methamphetamine, which is also used in the United States. The most prevalent stimulant drug in Europe is cocaine. In the surveys of 2008-2010 lifetime prevalence rate of cocaine use stood at 1%. With such low rates it is hard to specify any trend changes. In 2009, 2.8% of the respondents reported amphetamine use at least once in a lifetime, 1% in the last 12 months and 0% in the last 30 days. Lifetime prevalence rates of amphetamine use rose with the size of place of residence. In rural areas the rate was 0% and in cities over 500 thousand population – 7%. The highest prevalence rates were recorded among respondents with secondary or post-secondary education (4% in each group). Amphetamine was most prevalent in the age group 25-39 (5%). In the latest measurement there was a fall in amphetamine use prevalence rates. In 2010, 1% of the respondents reported using amphetamine at least once in a lifetime, 0.4% had done it in the last 12 months and one person i.e. 0.1% in the last 30 days. In 2010, the rates were so low that it is difficult to conduct analyses regarding education or size of place of residence. Men use amphetamine more frequently (2%) than women (1%). It is worth noting that the highest rates were recorded among respondents aged 25-39 (4%). 0.6% of the respondents admitted having used cocaine (0.6%).

Prevalence of use of other substances

In the survey the respondents were also asked about using other psychoactive substances such as ecstasy, LSD or cocaine. Figures 4 and 5 show answers to the question about the use of all psychoactive substances in a lifetime and in the last 12 months. Figure 4 includes the 2008 HCLU survey results regarding the use of heroin, LSD, cocaine, ecstasy, amphetamine and cannabis. The respondents were asked about the consumption of a non-existing substance called “Astrolit”. In 2010, 0.3% of the respondents admitted to having used it. In 2009, it was 1.2%.

Analyzing the survey results, we observe that lifetime prevalence rates for illegal substances other than cannabis or amphetamine are relatively low and stand at 1% or lower. Lifetime prevalence rates from 0.9% (2010) to 1.3% (2009). In 2009, 1% of the respondents reported ever using LSD and cocaine. In 2010, this rate stood at 0.5%. Both 2010 lifetime and the last 12 months prevalence rates are lower compared to 2009.

However, these lower rates should be treated with considerable caution due to their low values. In the case of substances with prevalence rates of 1% and lower, results fall within the margin of error.

For confidence interval 95% we obtain the result ranging from 0.4% to 1.4% for 1% of lifetime heroin users. This also means that it is hard to unequivocally conclude that a drop in heroin use from 1% to 0.3% is a fact.

Discussion

In 2008, the Polish drug scene witnessed the arrival of new substances called legal highs. The results of the 2009 survey showed that they are the most prevalent psychoactive substance. A question arose: is it really the case and - despite attempts to formulate the question clearly - did the respondents not include other substances such as energy drinks under the legal highs category? The example of tranquilizers and sedatives showed that it could not be excluded. The follow-up general population measurement conducted towards the end of 2010 was supplemented with an additional question. The respondents were asked to name substances or products declared as legal highs. It was an attempt to verify whether the respondents did not label other substances as legal highs, which in reality they are not. The 2010 results do not provide a clear answer whether in 2009 the respondents did not regard energy drinks consumption as legal highs use. In 2010, none of the respondents when asked to give names of legal highs they had used mentioned the name of an energy drink. However, 47% failed to recall the name of the substance and 23% refused to give its name. Considering the fact that the 2010 survey was conducted after the crackdown operation on legal highs shops it can be assumed that the respondents were aware what substances there were asked about. In the case of 46% of the respondents who declared that they had heard about legal highs this condition can be accepted. Analyzing the drop in the prevalence of legal highs use it cannot be precluded that it was partly due to a considerably narrower margin of error in 2010 compared to 2009. In 2009, the issue of legal highs was not as publicised as towards the end of 2010.

Another important conclusion from the surveys is the verification of the previous results concerning tranquilizers and sedatives. Incorrect definition of medical drugs by respondents calls for including in the survey a supplementary question about names of substances the respondent has used. However, it does not always provide an opportunity to verify the validity of the results afterwards. Moreover, the outcome of asking a question about

combining alcohol and pills might be even more distant from the researcher assumed. The pills category may include a number of substances. Consequently, one should ponder over the results of the international ESPAD survey where Poland ranks first in terms of prevalence of medical drug use. The outcome analysis should also consider the fact that Polish respondents, who are particularly inclined to resort to painkillers, might have reported utterly different substances than barbiturates or benzodiazepines.

Figure 4. Lifetime prevalence rates of psychoactive substances use in 2008 – 2010 in population aged 15-75. The 2008 data cover only heroin, LSD, cocaine, ecstasy, amphetamine and cannabis

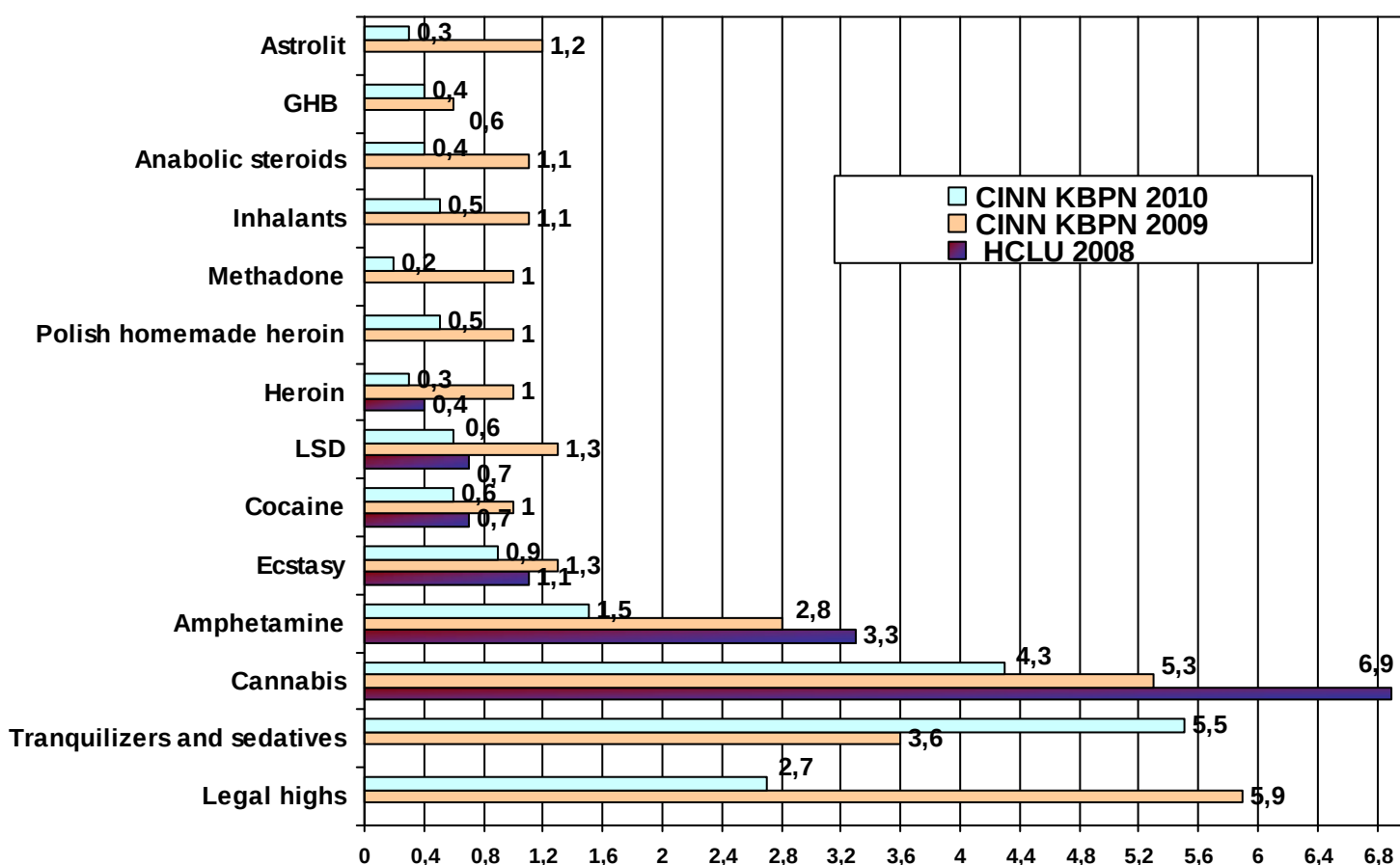


Figure 5. Last year of prevalence rates of psychoactive substances use in 2009 – 2010 in population aged 15-75.

