



CAYMAN ISLANDS STUDENT DRUG USE SURVEY (CISDUS) 2016



Comparative Survey about drug use among students
from Year 7th to 12th in the Cayman Islands

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Mrs. Dorothy Scott, Chair
National Drug Council

Table of Contents

Summary of Key Findings	9
Chapter 1: INTRODUCTION	11
1.1 Background	12
1.2 Methodology	12
Survey Design	12
Sample Participation and Characteristics	12
Data Interpretation and Presentation.....	12
Questionnaire Design	13
Procedure.....	13
Data processing and analysis.....	15
Substance use measures and definitions.....	15
1.3 Objectives	16
1.4 Survey Limitations	16
Chapter 2: RESULTS	17
2.1 Demographics	18
2.2 Alcohol, Tobacco and Other Drugs.....	24
2.2.1 Introduction and Measurements	24
2.2.2 Overall.....	25
2.2.3 Overall of Alcohol Use.....	26
2.2.4 Overall of Tobacco Use	35
2.2.5 Overall of Electronic Cigarettes Use.....	42
2.2.6 Overall of Marijuana Use	47
2.2.7 Overall of Inhalants Use.....	56
2.2.8 Overall of Tranquilizers Use.....	61
2.2.4 Overall of Energy Drinks Use	65
2.2.4 Overall of Other Illegal Drug Use	68

Chapter 3: PROTECTIVE AND RISK FACTORS	71
3.1 Protective Factors	72
3.2 Risk Factors	75
Chapter 4: DISCUSSION	81
Chapter 5: APPENDICES	88
Appendix A: Questionnaire for Years 7-8	89
Appendix B: Questionnaire for Years 9-12	100
References	118

List of Figures

<i>Figure 0: Survey Design Steps</i>	14
<i>Figure 1: Age Distribution</i>	18
<i>Figure 2: Gender</i>	18
<i>Figure 3: Year (Grade) Distribution</i>	18
<i>Figure 4: District Distribution</i>	19
<i>Figure 5: Living Arrangement Distribution</i>	19
<i>Figure 6: Feeling about going to school</i>	20
<i>Figure 7: Been taught about drugs</i>	20
<i>Figure 8a: Individuals that feels more comfortable to talk about drugs – Yrs 7-8</i>	20
<i>Figure 8b: Individuals that feels more comfortable to talk about drugs – Yrs 9-12</i>	21
<i>Figure 9: Safety at School</i>	21
<i>Figure 10: Feel close to people at School</i>	21
<i>FIGURE 11: FEEL PART OF SCHOOL</i>	22
<i>Figure 12: Friends’ Use of Drugs</i>	22
<i>FIGURE 13: FRIENDS’ ANTI-SOCIAL BEHAVIOURS</i>	23
<i>FIGURE 14A: OVERALL DRUG USE – YRS 7-8</i>	25
<i>FIGURE 14B: OVERALL DRUG USE – YRS 7-8</i>	25
<i>Figure 15: Lifetime Alcohol Prevalence</i>	26
<i>FIGURE 16: ANNUAL ALCOHOL PREVALENCE</i>	27
<i>Figure 17: Current Alcohol Prevalence</i>	28
<i>FIGURE 18: SOURCES OF FIRST DRINK OF ALCOHOL:</i>	29
<i>FIGURE 20: SOURCE OF ALCOHOL</i>	30
<i>Figure 21: Binge drinking among Yrs 9-12 students by Gender, Year and District</i>	32
<i>FIGURE 22: AVAILABILITY OF ALCOHOL BY GENDER, YEAR, AND DISTRICT</i>	33
<i>Figure 23: Perception of Risk of Alcohol Use</i>	33
<i>FIGURE 24: LIFETIME TOBACCO PREVALENCE</i>	36
<i>Figure 25: Annual Tobacco Prevalence</i>	36
<i>FIGURE 26: CURRENT TOBACCO PREVALENCE</i>	37
<i>FIGURE 27: FIRST CIGARETTE:</i>	38

<i>FIGURE 28: PLACE OF CONSUMPTION – TOBACCO</i>	39
<i>Figure 29: Source of Tobacco</i>	39
<i>FIGURE 30: AVAILABILITY OF TOBACCO BY GENDER, YEAR, AND DISTRICT</i>	41
<i>Figure 31: Perception of Risk of Tobacco Use</i>	41
<i>FIGURE 32: LIFETIME ELECTRONIC CIGARETTES PREVALENCE</i>	43
<i>Figure 33: Annual Electronic Cigarettes Prevalence</i>	43
<i>FIGURE 34: CURRENT ELECTRONIC CIGARETTES PREVALENCE</i>	44
<i>Figure 35: Place of consumption – Electronic Cigarettes</i>	45
<i>FIGURE 36: SOURCE OF ELECTRONIC CIGARETTES</i>	45
<i>Figure 37: Availability of Electronic Cigarettes by Gender, Year, and District</i>	46
<i>FIGURE 38: LIFETIME MARIJUANA PREVALENCE</i>	48
<i>Figure 39: Annual Marijuana Prevalence</i>	48
<i>FIGURE 40: CURRENT MARIJUANA PREVALENCE</i>	49
<i>Figure 41: First Smoke of Marijuana:</i>	51
<i>FIGURE 42: PLACE OF CONSUMPTION – MARIJUANA</i>	51
<i>Figure 43: Source of Marijuana</i>	52
<i>FIGURE 44: AVAILABILITY OF MARIJUANA BY GENDER, YEAR, AND DISTRICT</i>	53
<i>Figure 45: Perception of Risk of Marijuana Use - Occasionally</i>	54
<i>FIGURE 46: PERCEPTION OF RISK OF MARIJUANA USE – REGULARLY</i>	55
<i>Figure 47: Lifetime Inhalants Prevalence</i>	57
<i>FIGURE 48: ANNUAL INHALANTS PREVALENCE</i>	57
<i>Figure 49: Current Inhalants Prevalence</i>	58
<i>FIGURE 50: PLACE OF CONSUMPTION – INHALANTS</i>	59
<i>Figure 51: Source of Inhalants</i>	59
<i>FIGURE 52: AVAILABILITY OF INHALANTS BY GENDER, YEAR, AND DISTRICT</i>	61
<i>Figure 53: Lifetime Tranquilizers Prevalence</i>	62
<i>Figure 54: Annual Tranquilizers Prevalence</i>	62
<i>Figure 55: Current Tranquilizers Prevalence</i>	63
<i>FIGURE 56: PLACE OF CONSUMPTION – TRANQUILIZERS</i>	64
<i>Figure 58: Availability of Tranquilizers by Gender, Year, and District</i>	65
<i>FIGURE 59: LIFETIME ENERGY DRINKS PREVALENCE</i>	66
<i>Figure 60: Current Energy Drinks Prevalence</i>	67

FIGURE 62: PREVALENCE OF COMBINING ENERGY DRINKS WITH ALCOHOLIC BEVERAGES – YRS 9-12..... 68

Figure 63: Protective Factor: Parenting scale by Year Level 73

Figure 64: Protective Factor: Family opportunities for prosocial involvement by Year level..... 73

Figure 65: Protective Factor: School opportunities for prosocial involvement by Year level 74

Figure 66: Protective Factor: Peer-Individual Interaction with Prosocial Peers By Year Level..... 74

FIGURE 67: PROTECTIVE FACTOR: EDUCATION BY YEAR LEVEL 74

FIGURE 68: PROTECTIVE FACTOR: INFLUENCE BY YEAR LEVEL..... 75

Figure 69: Protective Factor: People that students felt most comfortable talking to about alcohol and other drugs by Year Level..... 75

FIGURE 70: RISK FACTOR: COMMUNITY DISORGANISATION BY YEAR LEVEL 76

Figure 71: Risk Factor: Perceived Availability of Drugs by Year Level..... 76

FIGURE 72: RISK FACTOR: PERCEIVED AVAILABILITY OF HANDGUNS BY YEAR LEVEL 77

Figure 73: Risk Factor: Family History of Antisocial Behaviour Year Level 77

FIGURE 74: RISK FACTOR: POOR FAMILY MANAGEMENT YEAR LEVEL 78

Figure 75: Risk Factor: Family Conflict Year Level 78

FIGURE 76: RISK FACTOR: LACK OF COMMITMENT TO SCHOOL BY YEAR LEVEL 78

Figure 77: Risk Factor: Friend’s Use of Drugs by Year Level..... 79

Figure 78: Risk Factor: Friend’s Delinquency Behaviour by Year Level 79

Figure 79: Risk Factor: Low Perceived Risk of Drug Use by Year Level 80

FIGURE 80: RISK FACTOR: DELINQUENT BEHAVIOURS/VIOLENCE BY YEAR LEVEL 80

Figure 81: Risk Factor: Second Hand Effects by Year Level 81

List of Tables

Table 1: First Use of Alcohol for Survey Respondents	28
Table 2: Mean and Median – Use of Alcohol	28
Table 3A: Frequency of Use by Type of Alcoholic Beverage from Current Users – Yrs 7-8	30
Table 3B: Frequency of Use by Type of Alcoholic Beverage from Current Users – Yrs 9-12	30
Table 3C: Frequency of Alcohol Use.....	31
Table 4: Number of Days Current Users of Alcohol Drank Too Much and Got Drunk	31
Table 5: Respondents’ Awareness of Vehicular Driver being Under the Influence	34
Table 6: First Use of Tobacco for Survey Respondents	37
Table 7: Mean and Median – Use of Tobacco (Cigarettes)	38
Table 8: Frequency of Use - Tobacco	39
Table 9: Number of Cigarettes Smoked in the Past 30 Days	40
Table 10: First Use of Electronic Cigarettes for Survey Respondents	44
Table 11: Mean and Median – Use of Electronic Cigarettes	44
Table 12: Frequency of Use – Electronic Cigarettes	45
Table 13: First Use of Marijuana for Survey Respondents	49
Table 14: Mean and Median – Use of Marijuana	50
Table 15: Frequency of Use – Marijuana	51
Table 16: Percentage of Students reported Number of Marijuana Spliffs Used in the Past Month ...	52
Table 17: Percentage of Students reported Number of Marijuana Spliffs Used Daily – Yrs 9-12	52
Table 18: Respondents’ Awareness of Vehicular Driver being Under the Influence of Marijuana	54
Table 19: First Use of Inhalants for Survey Respondents	58
Table 20: Mean and Median – Use of Inhalants	58
Table 21: Frequency of Use – Inhalants	59
Table 22: Number of days of sniffing inhalants	59
Table 23: First Use of Tranquilizers for Survey Respondents	62
Table 24: Mean and Median – Use of Tranquilizers	62
Table 25: Frequency of Use – Tranquilizers	64
Table 26: Circumstances of Use of Energy Drinks – Yrs 7-8	67
Table 27: Circumstances of Use of Energy Drinks – Yrs 9-12	67
Table 28: Frequency of Use – Energy Drinks – Yrs 7-8	68
Table 29: Frequency of Use – Energy Drinks – Yrs 9-12	68

Summary of Key Findings

About the Survey:

The Cayman Islands Student Drug Use Survey was a collaborative effort between the National Drug Council, Stakeholders, Schools and volunteers from the community. The survey was implemented to continue to monitor and study changes in the use of licit and illicit substances; monitor trends in the prevalence and frequency of drug use; examine the prevalence and frequency of antisocial behaviours; determine changes in the level of risk associated with Alcohol, Tobacco and Other Drugs (ATOD) use, delinquency, and other problem behaviours in adolescents; and discover the levels of protective factors that help guard against those behaviours.

The survey questionnaire was divided into two: one specific for years 7-8 and one specific for years 9-12, to assure comprehension of all questions.

Survey implementation occurred the weeks of February 29th – March 17, 2016, during one class period (approximately 50 minutes) and recorded an 85.5% response rate.

Demographic Profile of Survey Respondents:

The target population comprised all students in years 7th through 12th, attending public and private schools on the Islands. In total 2,982 students (50.9% females, 49.0% males) completed the self-administered questionnaire; notable proportions reported lived in George Town, followed by Bodden Town and West Bay.

Alcohol, Tobacco, and Other Drug Use:

- ❖ Slightly fewer students from years 7-8 have experimented with substance use: About two in 10 students have reported use of at least one drug in their lifetime. Contrary, a great majority of students in years 9-12 have experimented with substance use: About seven of 10 students have reported use of a least one drug in their lifetime.
- ❖ The drug of choice among Cayman Islands students was Alcohol, followed by marijuana, electronic cigarettes and energy drinks.
- ❖ Current use of substances was most prevalent among older students (years 9-12): Current alcohol use ranges from a low of 11.7% among year 7-8 students to a high of 38% among students in years 9-12. For marijuana, current use ranges from a low of 2.7% among years 7-8 to a high of 15.1% among students Year 9-12; and for cigarettes, from a low of 2.7% to a high of 9.1% for students Year 7-8 and Year 9-12 respectively.
- ❖ Gender differences were apparent: For both the lifetime and current use prevalence, males were more likely to use electronic cigarettes, marijuana, energy drinks, tranquilizers and be involved in binge drinking; while females were more likely to use alcohol, and cigarettes.
- ❖ Students mostly get alcohol and marijuana from parents (years 7-8) and friends (years 9-12). The students most often drink at “other social events”, at “home”, or at “a friend’s house”. A great percentage of the

marijuana users indicated they usually get it from a “friends”, “other relatives” and “other relatives” and that they most often use it “at a friend’s house” or “social events”.

- ❖ Non-medical prescription drug use was very low: Overall, lifetime prevalence of tranquilizers was reported at 2.7% while current use was indicated at 1%
- ❖ Mixing energy drinks with alcohol still prevalent: Energy drinks consumption remained relatively high. About 2.5% of students in years 7-8 and 15.5% of students in years 9-12 who indicated using energy drinks has consumed a mixture of energy drinks with alcohol.
- ❖ No delayed or earlier age of initiation: The average age of first use, ranging from nine years for inhalants to 12 years for marijuana. Alcohol use began around 12 years and cigarette use at 11 years, on average. Females initiated substance use later than males with the exception of their earlier use of inhalants.
- ❖ Alcohol and marijuana are easily accessible. Other substances easy available for the students were: inhalants, electronic cigarettes, energy drinks and tobacco.
- ❖ Smoking cigarettes is perceived to be most harmful: The majority of students (72%) perceived “smoking cigarettes frequently” to be the most harmful behaviour in terms of health risk when compared to alcohol or marijuana use; whereas “smoking

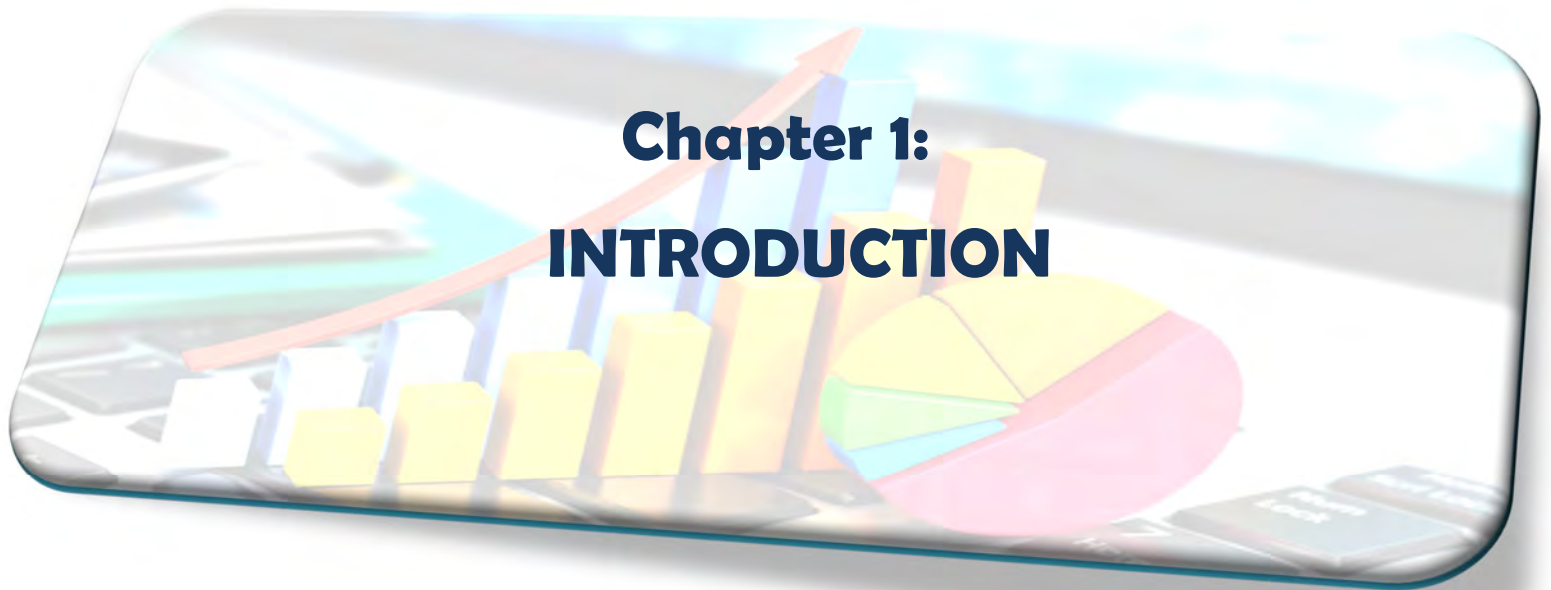
marijuana once or twice” is perceived to be harmful by 26.1% of years 7-8 students and 9.2% of year 9-12 students.

- ❖ Persons are drinking and driving or riding with passengers (students): About 8% of students in years 7-8 and 10.5% of students in years 9-12 indicated that he/she has been in a car driven by someone who had been drinking alcohol.
- ❖ Parents admonish substance using behaviours and convey dangers; but there is room for improvement: Seven in ten students (75%) reported parents talked to them about the importance of not using drugs. However, 27.1% of students in years 7-8 and 42.6% in years 9-12 reported that their parents talked to them about their experiences with alcohol and other drugs when they were young. A very small percentage of students (4.5% on years 7-8 and 17.3% in years 9-12) reported that parents allow them to drink alcohol, smoke cigarettes and smoke marijuana.

Risk and Protective Factor Profile:

The three highest proportions for protective factors were: School Opportunities for Prosocial Involvement, followed by Family Opportunities for Social Involvement and Peer-Individual Interaction with Prosocial Peers.

The three highest proportions on the risk factor scales were: Family domain, Community Domain and Peer & Individual domain.



1.1 Background:

The Cayman Islands Student Drug Use Survey (CISDUS) describes the prevalence and patterns of alcohol and other drug use among Cayman Islands students in Years 7 through 12 in 2016, and changes since 1998. The findings are based on the 8th cycle of the National Drug Council's biennial CISDUS.

Repeated cross-sectional surveys such as the CISDUS contribute to an understanding of the trends over the years and potential future patterns of alcohol and other drug use and misuse in the adolescent population, the harms stemming from such use, and the associated contextual, social and demographic risk and protective factors. Such monitoring is fundamental to governments, educators, parents and public in general.

The following report describes the administration and results of the survey in addition to recommendations for programme and policy formation and reform. The findings are presented in three separate sections:

- 1) Prevalence of use,
- 2) Risk and Protective factors, and
- 3) Outcome measures.

1.2 Methodology:

Survey Design:

The CISDUS employs a complete census¹ of students enrolled in years 7 to 12. In 2016, 2982 students in all private and public schools completed anonymous, self-administered questionnaires from February 29th to March 17th, 2016.

¹ A census is the procedure of systematically acquiring and recording information about the members of a given population. It is a regularly occurring and official count of a particular population. The census can be contrasted with sampling in which information is obtained only from a subset of a population.

Although sample surveys are preferable for collecting data in large populations, there are several advantages to conducting a complete census when the population is small, as is the case for the Cayman Islands school population. First, public acceptance and compliance is often enhanced in census surveys. In turn, this also strengthens political acceptance and credibility, especially in new research endeavours. Second, data analysis is less complicated because calculation of sampling error is irrelevant. Third, survey administration is easier, and fourth, a census provides the maximum numbers required to study subgroup differences. In sum, a census can increase reliability of your data as well as the public acceptance of it.

Sample Participation and Characteristics:

Thirteen high schools in the Cayman Islands participated in 2016. Of the 3,486 (approx.) enrolled students, 2,982 completed questionnaires and a participation rate of 85.5% (for comparison of number of students that participated in the previous years see Table A – Appendix A)

Data Interpretation and Presentation:

Because the survey is based on a census, there is no sampling error attached to estimates (although estimates still have error based on non-sampling error such as mis-reporting). Thus, the calculation of confidence intervals is inappropriate. Although the data is population derived, there are still important reasons to perform inferential statistical analysis. First, a census can be regarded as a sample because it is subject to observational error (rates of ganja use could vary slightly if the census was replicated the following day) and it has a population limited in time and space. Second, random sampling is not a prerequisite for drawing statistical inference. For example, if we were to find

numerical differences in alcohol use among districts, we still need to rule out the possibility of chance processes in generating the differences. Consequently, in this report we employ statistical tests, primarily the chi-square (χ^2) test, to ensure that differences are not due to chance processes. We report a difference as statistically significant if the probability is at the .05 level or lower.

Readers should note the following important points regarding the data analyses in this report: (1) Since there is still the element of chance findings and the element of non-sampling errors (such as mis-reporting), we cannot treat all absolute differences in percentages as meaningful and important; and

(2) small percentages are more unreliable than larger percentages.

Questionnaire Design:

The CISDUS is an in-school, self administrated, paper-and-pencil-instrument (PAPI) survey. The school setting is conducive to maintaining an assurance of anonymity, thereby reducing the likelihood of social desirability bias in reporting sensitive and illegal behaviours.

The CISDUS 2016 questionnaire was divided in two: one questionnaire for students in Years' 7, and 8 and another questionnaire for students in Years' 9, 10, 11 and 12. The first questionnaire for younger students (Yrs 7-8) contain questions about demographics, school experiences, experience with drugs (cigarettes, alcohol and marijuana), energy drinks, health and feelings, violence related behaviours, videogames and other electronic devices and family upbringing.

For older students (Yrs 9 - 12), the questionnaire included questions about demographics, school experiences, other experiences in life, experience with drugs (alcohol, marijuana, cigarettes, electronic

cigarettes, inhalants, crack cocaine, cocaine powder, ecstasy, tranquilizers, LSD, pain relief pills, "donkey weed", "seasoned spliff" and "magic mushrooms"), energy drinks, health and feelings, violence related behaviours, and family upbringing (see Appendix B).

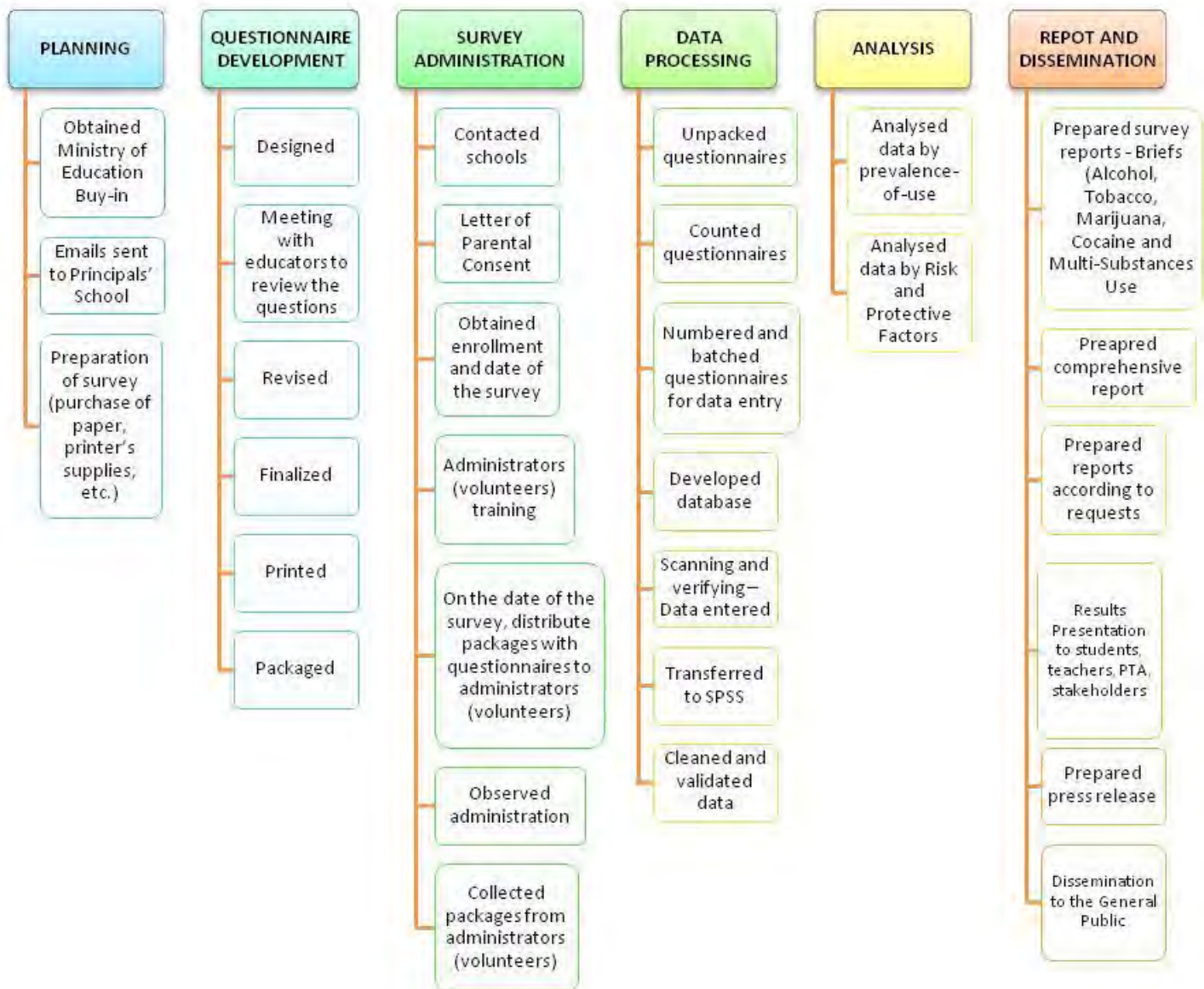
The average completion time was 30 minutes for students in Yrs 7-8 and 45 minutes for students in Yrs 9-12.

Students were asked to evaluate the comprehension and sensitive nature of the questionnaire. The majority of students (80.7% - yrs 9-12 / 75.9% - yrs 8-9) indicated that the questionnaire was "fairly easy" or "very easy" to understand; almost one-quarter of students in yrs 9-12 indicated that the questionnaire was "much too long" compared with 15.3% of students in yrs 7-8. Some 13.6% of students in yrs 7-8 and 13.7% in yrs 9-12 indicated that the questions in the survey would make most students "very uncomfortable". This latter finding provides some reassurance that social desirability should not greatly bias our estimates, even among the youngest students.

Procedure:

Survey procedure has been standard over all survey years. For more information about procedure, please visit our website for more reports.

Figure 0: Survey Design Steps



Data processing and analysis:

Responses to the survey questions were captured directly onto the questionnaire by the respondents.

- ❖ Data entry and analysis were conducted at the NDC:
- ❖ As soon as the packages were received from administrators and transfer to the offices of the NDC, there are unpacked, counted, numbered and batched for scanning, using OpenText Teleform, a software specialized in scanning, reading and verifying questionnaires. This process spanned approximately eight weeks.
- ❖ After verifying, data is exported to SPSS for cleaning and analysis. The NDC staff performed the data analyses, including the generation of appropriate tables and descriptive statistics for inclusion in the briefs and final report.
- ❖ Data is reviewing and validated by the external consultant, Dr. Ken-Garfield Douglas.

The briefs produced for this survey were:

- ❖ Alcohol and Binge Drinking
- ❖ Tobacco and E-Cigarettes
- ❖ Ganja (Marijuana)
- ❖ Cocaine
- ❖ Multi-substance use
- ❖ Risk & Protective factors

Substance use measures and Definitions:

The CISDUS report primarily emphasizes the prevalence of substance use i.e., the percentage of students who report using a given drug at some point in their lifetime, during the 12 months before the survey or more specifically during the 30 days prior to the survey. It is important to note that prevalence does not imply regular, frequent or problematic use, but it is an important first-order epidemiological indicator of the

size of the population that has at minimum, tried a substance.

Throughout this report certain terms have been used to describe the prevalence of substance use.

***TECHNICAL NOTE**

What is Prevalence?

The terms prevalence refers to the proportion of a population who has used a drug over a particular time period. In this population survey of middle and senior school students, prevalence is measured by asking students to recall their use of drugs. Typically, the three most widely used recall periods are: lifetime (ever used a drug), last year (used a drug in the last twelve months), and last month (used a drug in the last 30 days).

Lifetime prevalence: the proportion of survey respondents who reported ever having used the named drug at the time they were surveyed; that is, at least once. A person who records lifetime prevalence may – or may not – be currently using the drug. Lifetime prevalence should not be interpreted as meaning that people have necessarily used a drug over a long period of time or that they will use the drug in the future.

Annual (past 12 months) prevalence: the proportion of survey respondents who reported using a named drug in the year prior to the survey. For this reason, last year prevalence is often referred to as recent use; and also classified as lifetime prevalence.

Current (past 30 days) prevalence: the proportion of survey respondents who reported using a named drug in the 30-day period prior to the survey. Last month prevalence is often referred to as current use; and also classified as lifetime and recent prevalence. A proportion of those reporting current use may be occasional (or first-time) users who happen to have used in the period leading up to the survey – it should therefore

be appreciated that current use is not synonymous with regular use.

Binge drinking: a report of five drinks or more in a row within the past two weeks.

1.3 Objectives:

The CISDUS serves many purposes. Among them is:

- ❖ To understand the nature and extent of the drug problem amongst middle and high school students.
- ❖ To be able to track changes in drug use patterns over time.
- ❖ To aid the development and strengthening of prevention programmes and policies.
- ❖ To examine and monitor trends in the prevalence and frequency of antisocial behaviours.

1.4 Survey Limitations:

Research findings has demonstrated that collecting data on alcohol, tobacco and drug use prevalence among young populations through surveys is the most efficient and frequently used method of collection; the advantage of school surveys is that they are cost-effective and relatively easy to conduct. However, some limitations and disadvantages are associated with school surveys.

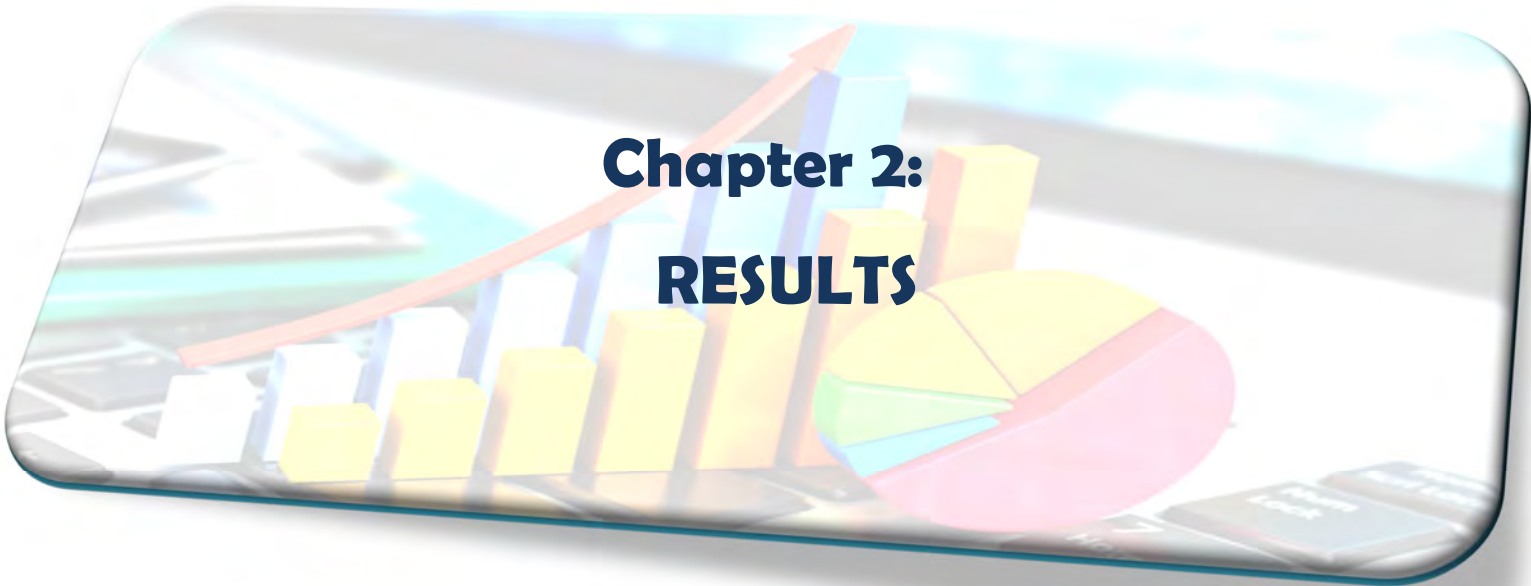
- ❖ Participation: The survey was restricted to students enrolled in public and private schools. Excluded were students from home-schools, school leavers, and University College of the Cayman Islands (UCCI). Students who were absent on the day of survey administration, special education classes, and school for students with behaviour issues (Cornerstones) were not represented. Students from Sixth Form from Saint Ignatius Catholic School were unavailable at the time of the survey because of their MOCK exams.

- ❖ Reliability: The risk of receiving inaccurate responses is probably higher if the data collection setting is less formal, that is, if the student thinks that classmates might be able to see their responses. There is strong evidence from many studies, however, that data collected through school surveys have a high level of reliability and validity. To minimize the effects of overestimation a very large population frame was utilized. Additionally, consumption questions were asked in a variety of ways as a means of confirming previous responses. As this survey was based on self-reported data, the results should therefore be interpreted with caution.

- ❖ Literacy: Literacy issues posed a challenge to a few students in completing the questionnaire on their own; and, therefore, volunteers and teachers (in some schools) were permitted to verbally read the survey questions aloud.

- ❖ Volunteers: A month and a half prior to the survey information flyers/emails requesting volunteers to participate in the survey were distributed. The turn was not as expected, despite the database of volunteers that we have at NDC, no many volunteers return to participate on this cycle. Press releases, radio and TV interventions were used to invite the public to participate in this initiative.

- ❖ Since we did not get the number of volunteers necessary for the administration and in order to cover the demand, it was necessary to split the largest schools to cover all grades. Two days were necessary to administrate the survey at John Gray High School and Clifton Hunter High School.



2.1.1 Age and gender:

Age distribution for the complete survey showed that almost half of the students were between 13 and 15 years old, following by students that were between 10 and 12 years old (67.4% Yr7-8 and 0.4% Yrs9-12), students that were between 16 and 18 years old (37.7% Yr9-12) and students that were between 19 and 20 years old (0.4% Yrs9-12). No data was available for about 0.1% (5 students) (Figure 1).

Slightly more females than males completed the survey (51.8% of females compared to 48.2% of males – Yrs7-8 and 50.1% of females compared to 49.9% of males – Yrs9-12) (Figure 2).

Figure 1: Age Distribution

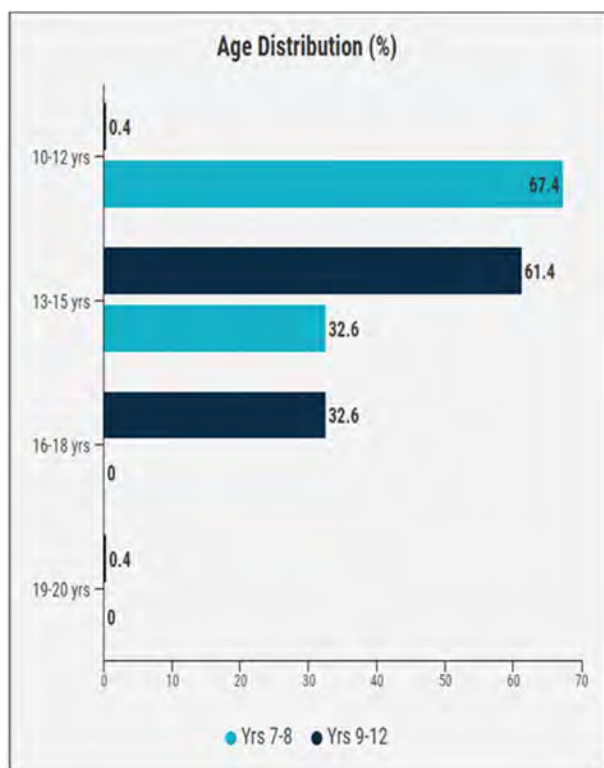
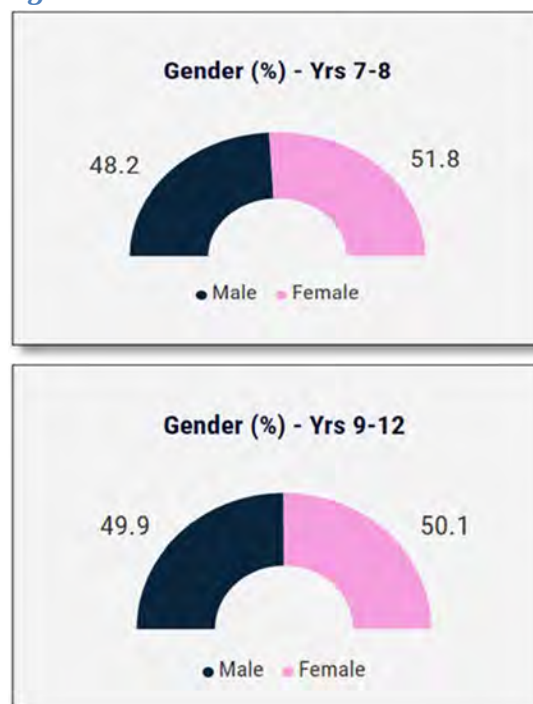


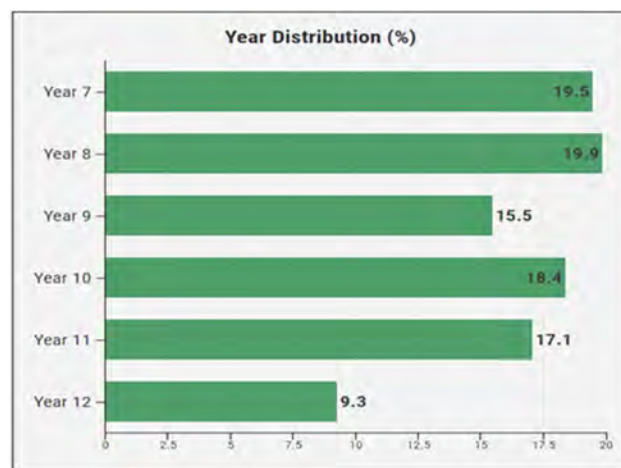
Figure 2: Gender



2.1.2 School and Year (Grade) Level:

Majority of respondents attended public school (61.1%), and a further 38.9% attended private schools. Students were distributed among the years levels as follows:

Figure 3: Year (Grade) Distribution



2.1.3 District:

The district with the highest concentration of students surveyed was George Town (38.2%), followed by Bodden Town (29.4%) and West Bay (22.5%). The distribution for the other districts showed North Side (3.4%), Cayman Brac (3.3%) and East End (3.1%) (Figure 4).

Figure 4: District Distribution



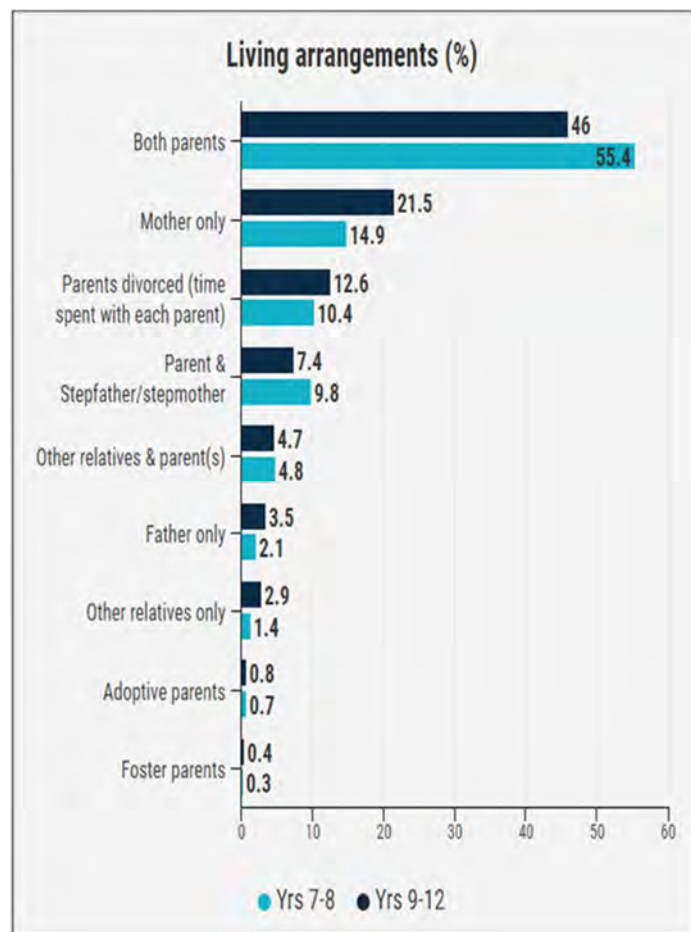
2.1.4 Living arrangements:

Students were asked to indicate, “Who do you live with most of the time?” (Figure 5).

- ❖ 55.4% in yrs 7-8 and 46.0% in yrs 9-12 indicated that they lived with their natural parents (mother and father).
- ❖ 15% in yrs 7-8 and 21.5% in yrs 9-12 reported that they lived with their mother only;
- ❖ 10.4% in yrs 7-8 and 12.6% in yrs 9-12) indicated that parents are divorced and share the time with each parent;
- ❖ 9.8% in yrs 7-8 and 7.4% in yrs 9-12 lived with a parent and stepfather/stepmother;
- ❖ 4.8% in yrs 7-8 and 4.7% in yrs 9-12 lived with other relatives and parent(s);
- ❖ 2.1% in yrs 7-8 and 3.5% in yrs 9-12) lived with their father only;
- ❖ 1.4% in yrs 7-8 and 2.9% in yrs 9-12 lived with other relatives only;
- ❖ 0.7% 0.7% in yrs 7-8 and 0.8% in yrs 9-12 lived with adoptive parents; and

- ❖ 0.3% 0.3% in yrs 7-8 and 0.4% in yrs 9-12 lived with foster parents.

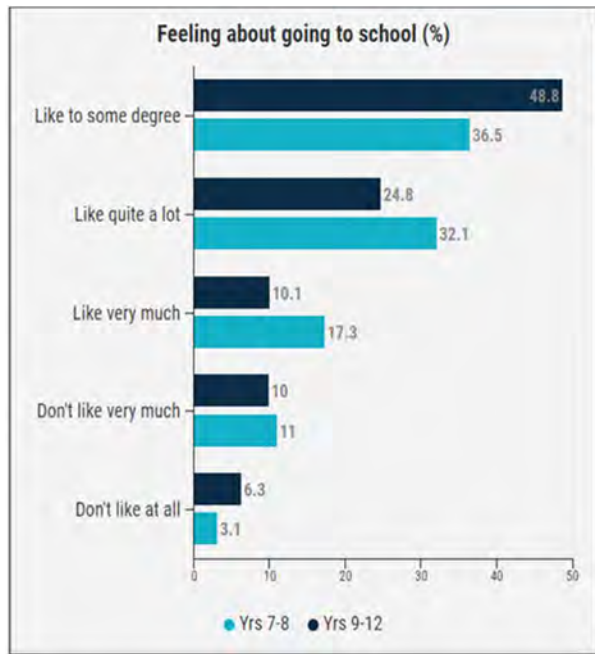
Figure 5: Living Arrangement Distribution.



2.1.5 School Experience:

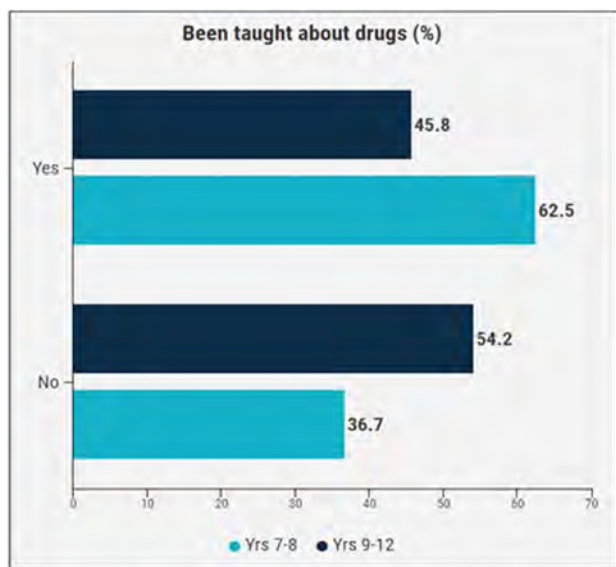
- ❖ Students perception regarding school: 42.6% reported they 'like school to some degree', 28.4% reported they 'like school quite a lot', 13.7% of the students reported that they 'like school very much', while 10.5% reported that they 'don't like it very much' and 4.7% reported that they 'don't like it at all' (Figure 6).

Figure 6: Feeling about going to school



- ❖ More than half of the students (54.1%) reported having taught about alcohol, tobacco and other drugs during the school year (Figure 7).

Figure 7: Been taught about drugs



- ❖ Among students in years 7-8, more than half (59.6%) reported that parents are the persons that the students feel more comfortable talking to about alcohol and other drugs, following by peers (26.9%), teachers (26.3%), counsellors (19.5%), police officers (8.8%), older students (7.8%), coaches (5.4%) and security guards (2.9%). Other persons reported were: siblings, relatives (cousins, uncle, etc.), godparents and mother (Figure 8a).
- ❖ Among students in years 9-12, almost half (48.1%) reported that peers are the persons that the students feel more comfortable talking to about alcohol and other drugs, following by parents (36.8%), teachers (15.9%), old students (12.5%), counsellors (12.0%), coaches (4.2%), police officers (3.4%) and security guards (2.0%). Other persons reported were: boyfriend, siblings, church members, close friends and mother (Figure 8b).

Figure 8a: Individuals that feels more comfortable to talk about drugs - Yrs 7-8

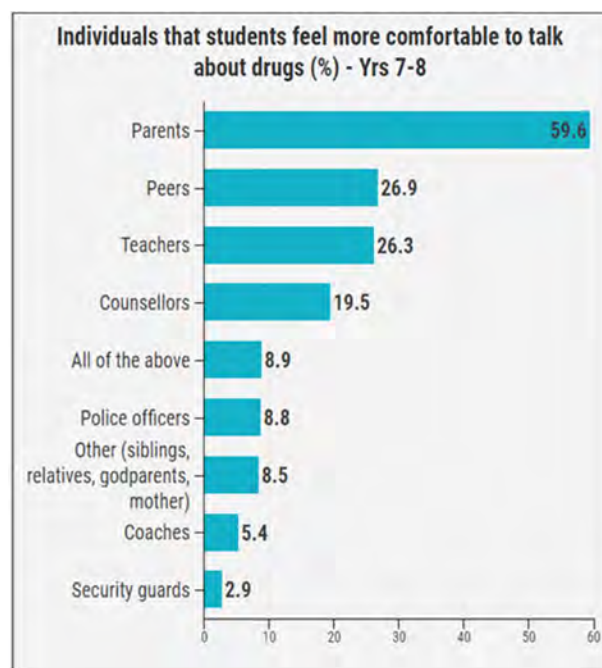
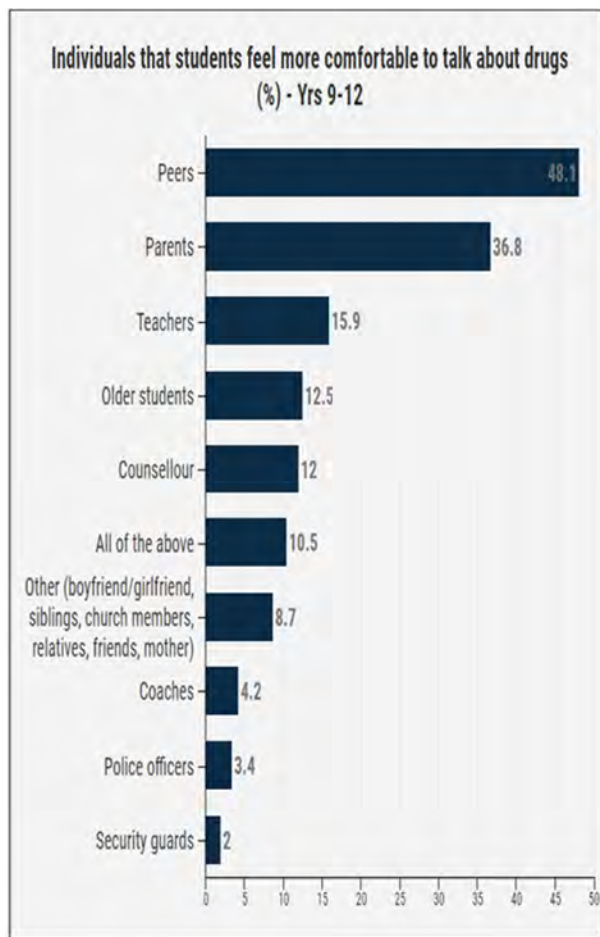


Figure 8b: Individuals that feels more comfortable to talk about drugs – Yrs 9-12

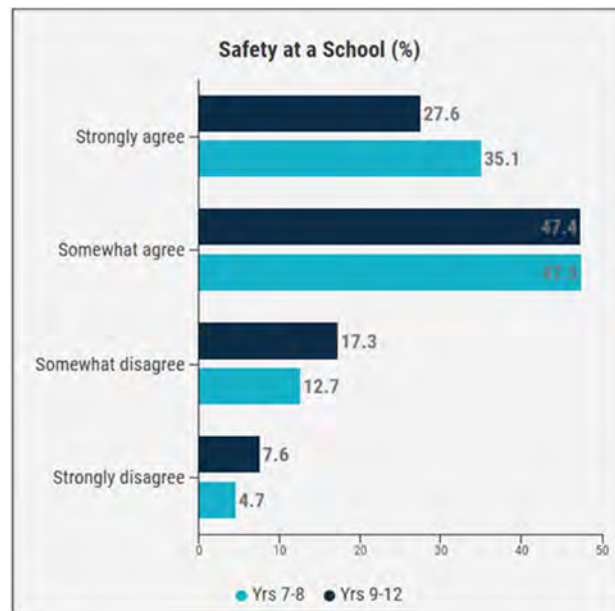


2.1.6 Perception of Safety / Prosocial School Involvement:

Making students feel safe and part of school environment helps reduce the likelihood of their involvement in drugs and other negative behaviours: because that assurance helps increase a student’s self-esteem and the feeling of being bonded with their peers.

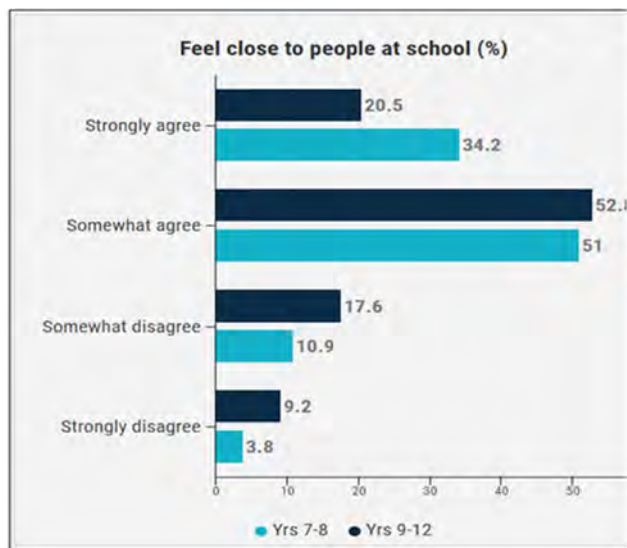
Majority of students reported that they somewhat agree/strongly agree about feeling safe at school; a notable proportion reported somewhat disagree/strongly disagree about feeling safe at school - mainly students in years 9-12. (Figure 9).

Figure 9: Safety at School



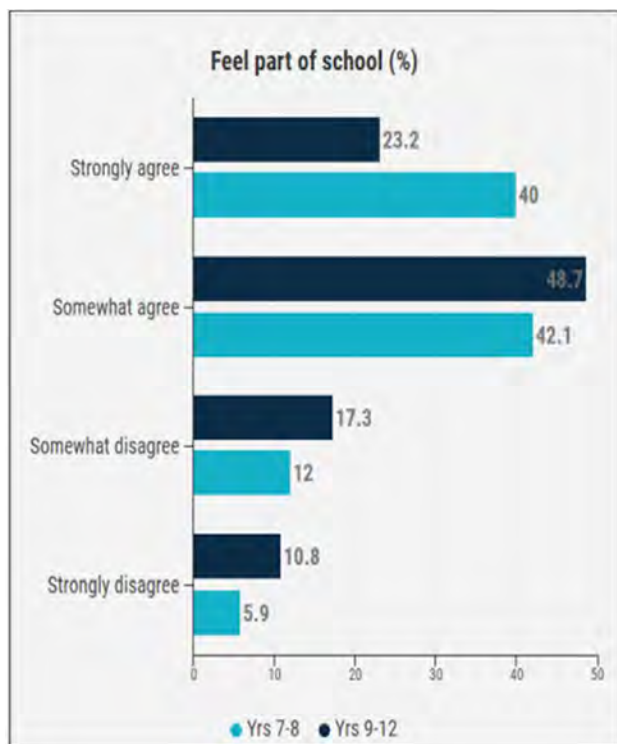
About closeness to people at school: majority of students reported that they somewhat agree /strongly agree about feeling close to the people at school; just a notable proportion reported that they somewhat disagree/strongly disagree about feeling close to people at school, - mainly students in years 9-12. (Figure 10).

Figure 10: Feel close to people at School



The majority of students reported that they somewhat agree/strongly agree about feeling part of their school; notable proportion reported somewhat disagree/strongly disagree about feeling part of their school, mainly students in years 9-12. (Figure 11).

FIGURE 11: FEEL PART OF SCHOOL

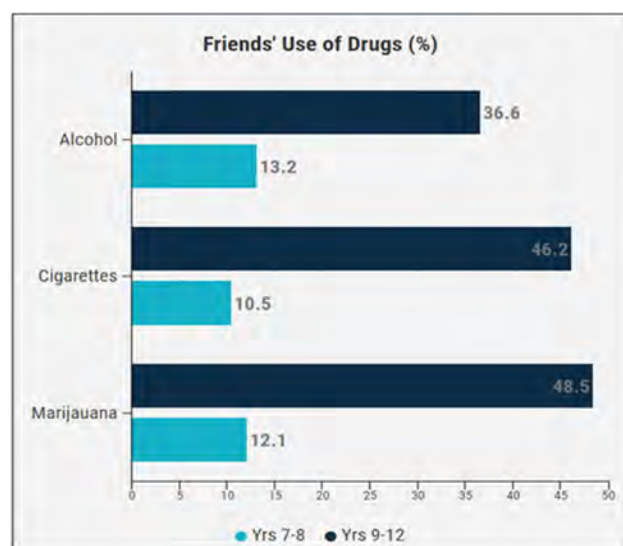


2.1.7 Perception of Friends Anti-social Behaviours:

Friends association with peers who engage in substance use and other anti-social behaviours are much more likely to get involved in it themselves. This is one of the most consistent predictors identified by research. Even when, young people come from well-managed families and do not experience other risk factors, spending time with peers who use drugs and participate in anti-social behaviours greatly increases youths' risk of becoming involved in such behaviours.

A notable percentage of students reported that at least one of their friends uses cigarettes (36.6%), marijuana (48.5%) and/or alcohol (36.6%), especially among students in Years 9-12. Notable fewer students in the Years 7-8 cohort reported that their friends use drugs (10.5-13.2% for the drugs indicated, with the highest proportion for use of alcohol) (Figure 12).

Figure 12: Friends' Use of Drugs

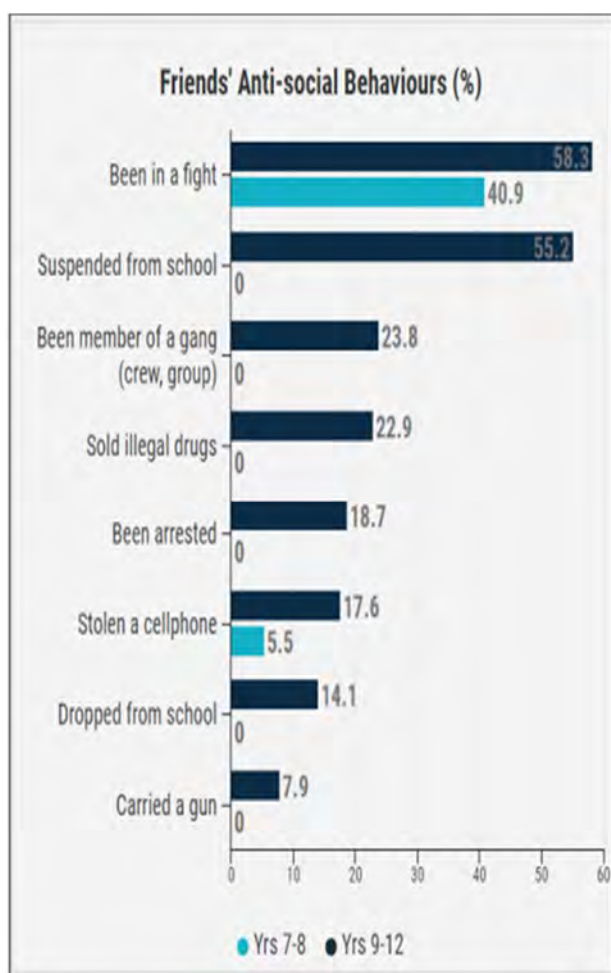


About delinquent behaviours: 58% of the older cohort (Year 9-12) reported having friends that have been in a fight compared to

41% in the younger cohort (Year 7-8). The only other category where the younger cohort reported friend's involvement was for 'stealing a cellphone (17.6%, older) vs 5.5%, younger) (Figure 13).

Among students from years 9-12, more than half of students (55%) reported having friends that were suspended from school. Smaller proportion of these students reported to be members of gangs (crew, group, etc.), sold illegal drugs, been arrested, dropped from school, but is it important to note that 7.9% indicated that they had carried a gun (Figure 13).

FIGURE 13: FRIENDS' ANTI-SOCIAL BEHAVIOURS



2.2 Alcohol, Tobacco and Other Drugs

2.2.1 Introduction and Measurements:

In this survey, drug consumption (substance use) is measured by a set of two questionnaires (one questionnaire for years 7-8 and one questionnaire for years 9-12), similar to questions generally used to study drug consumption by high school students, regionally and internationally. Energy drinks consumption is measured by a set of six questions. (See Appendix B and Appendix C).

This section presents the results of the consumption of alcohol, tobacco, and other drugs (ATODs), as well as energy drinks. Also included in this section is the prevalence of use of drugs such as inhalants, tranquilizers, and stimulants. These results are presented for lifetime, annual (last 12 months) and current use (last 30 days) of ATODs and energy drinks, disaggregated by gender, year level of student and district, with relevant tables and charts included to illustrate the number and proportion of students who have reported use of these substances.

In addition, this section also examines age of first use and present results of students' perception of harm in relation to the consumption of ATODs and ease of obtaining these substances. In addition to the standard lifetime and current use prevalence of alcohol, perception of risk, and ease of availability, binge drinking behaviour is also measured.

Early Onset:

One important predictor of future problems with any substance is early onset of use. "Early age" of onset is defined here as first use of any substance between the ages of 6 and 11. Using age-of-initiation data to coordinate the timing of prevention efforts can be an important tool for maximizing programme effectiveness.

For example, programmes delivered after the majority of potential drug users have already initiated the behaviour may have limited impact. Alternatively, very early intervention might prove less effective because it is not close enough to the critical initiation period.

Perception of Risk:

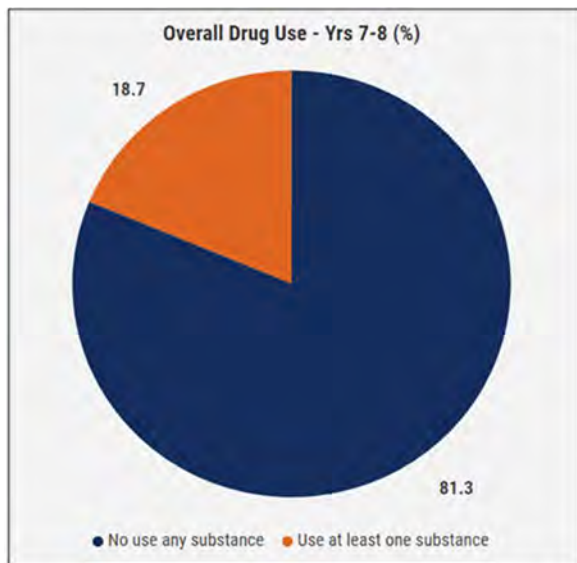
Research shows that students' attitudes and beliefs about substances correlate with both increases and decreases in rates of substance use over time, although there may be a lag effect.

2.2.2 Overall

Students were asked to report if they "have ever" consumed any of the substances described in the survey and "when was the first time you have tried ...".

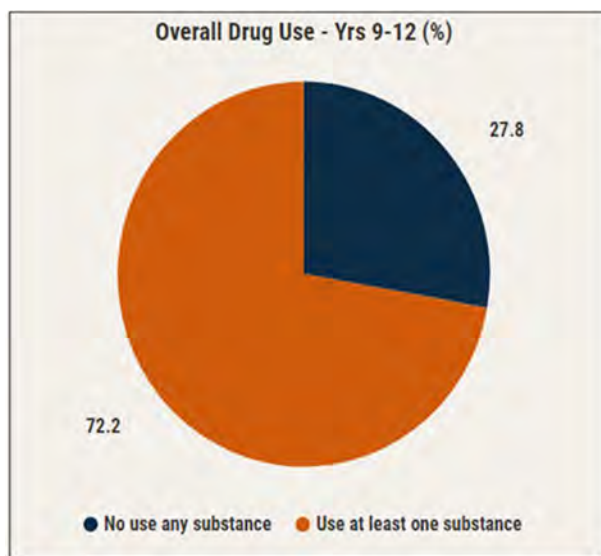
Overall, 18.7% (221 students) in years 7-8 and 72.2% (1300 students) in years 9-12 have reported use of at least one drug in their lifetime (Figure 14a and Figure 14b).

FIGURE 14A: OVERALL DRUG USE – YEARS 7-8



Comparing cohort Year 7-8 to cohort Year 9-12, current use prevalence for energy drink was 18.1% versus 22.7%; alcohol 11.7% versus 38% and marijuana 2.7% versus 15.1% (Figure 14).

FIGURE 14B: OVERALL DRUG USE – YEARS 9-12



2.2.3 Overview of Alcohol Use - 2016

(Appendix A - Literature)

Lifetime Alcohol Use:

Alcohol remained the most commonly reported drug used by adolescents in the Cayman Islands according to the Student Drug Use Surveys.

About 33.0% of students in years 7-8 and 85.8% of students in years 9-12 surveyed reported lifetime use (Figure 15).

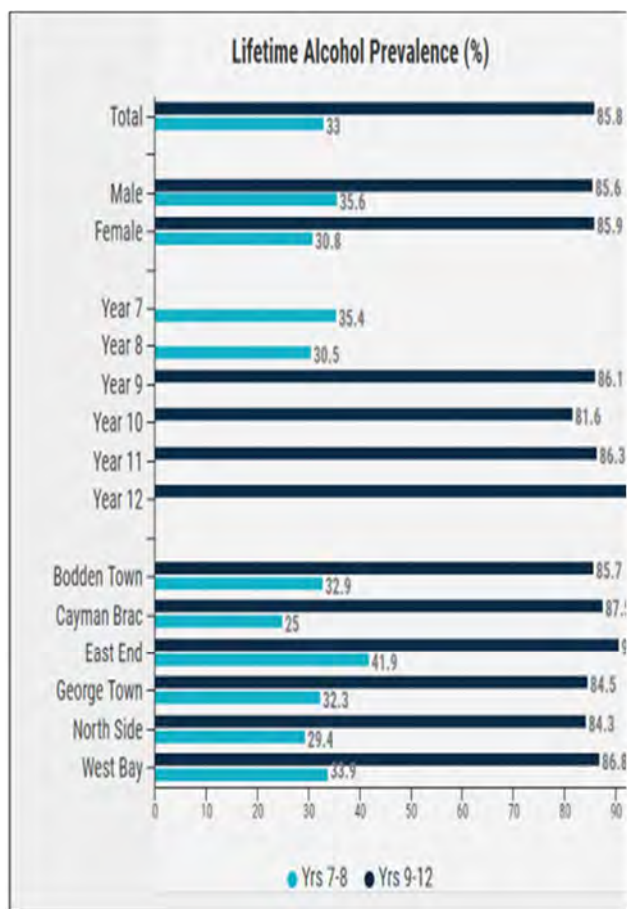
As shown in Figure 15, lifetime use of alcohol did vary significantly by gender among students in years 7-8 (35.6% of males vs. 30.8% of females); however, among students in years 9-12 there was no significant variation by gender (85.6% of males vs. 85.9% of females) (Figure 15).

In general lifetime alcohol use prevalence increased with age. Although year 8 students reported a lower prevalence than year 7 students, year 9 students were significantly higher than year 8 students and year 12 students showed a slightly higher prevalence than year 11 students (Figure 15).

Among the districts, more than half of the responding students in all districts in the older age cohort reported consuming alcohol in their lifetime (about 84% to 91%

Among the younger cohort, students in all districts reported about 25-42% if lifetime alcohol including students in Cayman Brac (Figure 15).

Figure 15: Lifetime Alcohol Prevalence



Annual Alcohol Prevalence:

More than two-fifths (about 42%) of all students reported drinking at least once during the 12 months before the 2016 survey (16.9% in the younger cohort and 67.9% in the older cohort), (see Figure 16).

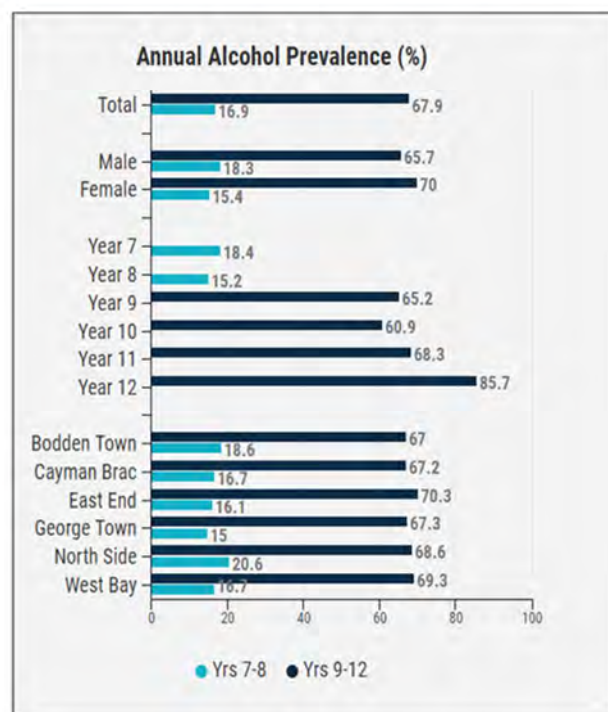
Females (70.0%) compared with males (65.7%) in years 9-12 were more likely to use alcohol in the past 12 months. Among students in years 7-8, males (18.3%) were more likely than females (15.4%) to use alcohol in the past 12 months (Figure 16).

Reported past year drinking significantly increased with years - from 18.4% of 7th-years up to 85.7% of 12th-years (Figure 16).

There were no significant differences among the districts; however, students in North Side (among students in years 7-8) and East End

(among students in years 9-12) were more likely to have consumed alcohol in the past year (Figure 16).

FIGURE 16: ANNUAL ALCOHOL PREVALENCE



Current Alcohol Prevalence:

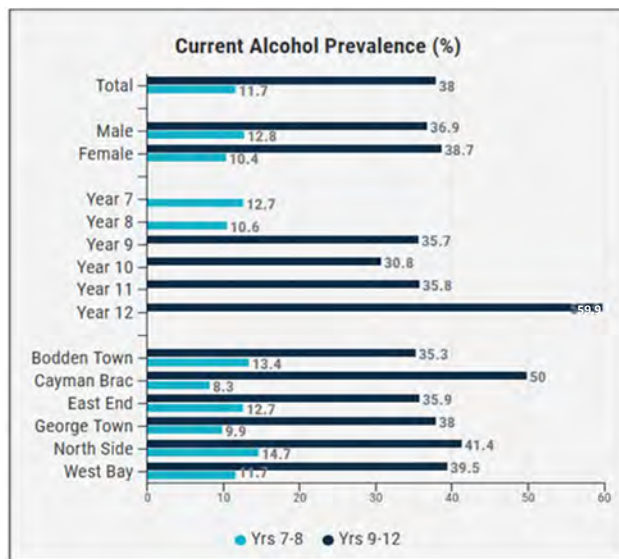
One-quarter (about 25%) of students reported drinking alcohol at least once in the month (past 30 days) prior to the survey (11.7% in the younger cohort and 38% in the older cohort), (see Figure 17).

Again, females (38.7%) were more likely than males (36.9%) to report alcohol use in years 9-12, compared to females (10.4%) and males (12.8%) from years 7-8 (Figure 17).

In general current use prevalence increased with age. Although year 8 students reported a lower prevalence than year 7 students (10.6% versus 12.7%), prevalence for year 9 students were significantly higher than year 8 students and year 12 students showed a notable higher prevalence than year 11 students (Figure 17).

There were no significant differences among the districts; however, Years 7-8 students in Cayman Brac (about 8%) were less likely to have consumed alcohol in the past month compared to students in years 9-12 (50%), that reported the highest prevalence in past month use (Figure 17).

Figure 17: Current Alcohol Prevalence



First Use of Alcohol:

Of the lifetime users in years 7-8, 197 initiated alcohol consumption “more than a year ago” (16.7% of all survey respondents), while 21 consumed alcohol for the first time “during the past 30 days” (1.8% of all survey respondents).

Of the lifetime users in years 9-12, 740 initiated alcohol consumption “more than a year ago” (41.1% of all survey respondents), while 35 consumed alcohol for the first time “during the past 30 days” (1.9% of all survey respondents).

TABLE 1: FIRST USE OF ALCOHOL FOR SURVEY RESPONDENTS

First Use	Years 7-8		Years 9-12	
	Number	%	Number	%
During the past 30 days	21	1.8	35	1.9
More than 1 month, less than 1 year	75	6.3	232	12.9
More than a year ago	197	16.7	740	41.1
Not stated	889	75.2	793	44.1
Total	1182	100.0	1800	100.0

Incidence of Alcohol:

In the past year (last 12 months), the incidence of alcohol use among students was 17.8%. In the past month (last 30 days), the incidence of alcohol use among students was 3.2%.

Incidence of use in the past month was 2.3% for the Year 7-8 cohort and 9.7% for the Year 9-12 cohort. The past year incidence was notable higher in the Year 9-12 cohort (25.2%) compared to those Year 7-8 (4.2%).

Early Onset:

Overall, 27% of all students surveyed reported early onset drinking. About 43% of all students in years 7-8 and about 10% of all students in years 9-12 reported early onset: that is, they had their first drink between the ages of 6 and 11 years.

The average age of first use among those reporting ever drinking alcohol was 11 years old for students in years 7-8 and 14 years old for students in years 9-12 (Table 2).

TABLE 2: MEAN AND MEDIAN AGE OF FIRST USE OF ALCOHOL

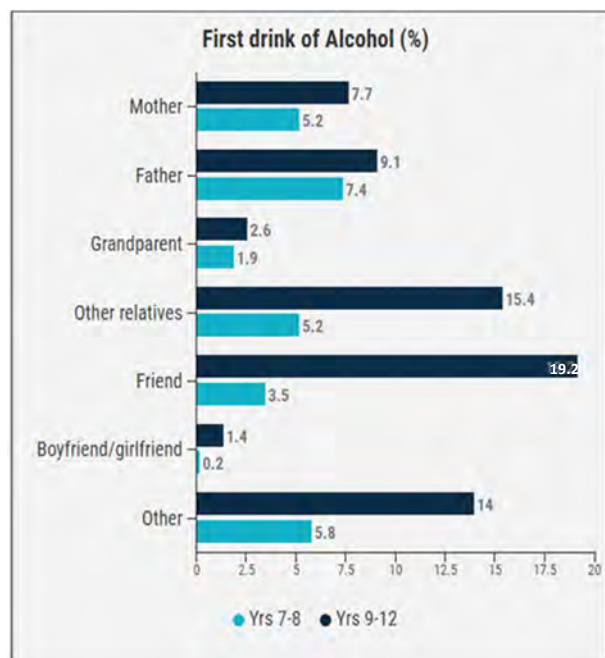
	Overall		Male		Female	
	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 9-12
Mean	11.07 yrs	13.97 yrs	11.03 yrs	13.78 yrs	11.12 yrs	14.18 yrs
Median	11 yrs	14 yrs	11 yrs	14 yrs	11 yrs	14 yrs

Sources of first drink of alcohol:

The survey asked the students that reported alcohol use, “who gave you your first drink?": Among students from years 7-8, the person who first gave them alcohol was *father* (7.4%), followed by *other person* (5.8%), *mother* (5.2%), *other relatives* (5.2%), *friend* (3.5%), *grandparent* (1.9%) and *boyfriend/girlfriend* (0.2%) (Figure 18).

Among students from years 9-12, the person who first gave them alcohol was a *friend* (19.2%), followed by *other relatives* (15.4%), *other person* (14.0%), *father* (9.1%), *mother* (7.7%), *grandparent* (2.6%) and *boyfriend/girlfriend* (1.4%) (Figure 18).

FIGURE 18: SOURCES OF FIRST DRINK OF ALCOHOL:



Places of consumption:

Students were also asked where they usually drink alcohol. Of those who drank alcohol in years 7-8, about 11.6% reported drinking at *home*, 4.1% at *social events*, 4.1% at *other places* (Christmas parties, at the beach, boat trips, overseas, restaurants), 2.1% at a *friend's house*, 0.9% *at school*, 0.7% at the *neighbourhood*, 0.4% at a *car*, and 0.3% at a *sporting event* (Figure 19).

Among students in years 9-12, the place where a somewhat larger proportion of students reported drinking alcohol was *social events* (27.6%). Other places reported where: at *home* (23.5%), *friend's house* (16.4%), *other places* (9.7%) (at parties, bars/clubs, at the beach, family gatherings, boat trip, overseas, restaurants, “trap house”), *neighbourhood* (4.8%), *sporting event* (2.7%), *at school* (2.6%) and *at the car* (2.6%) (Figure 19). There was no variation by gender: females and males in years 7-8 were more likely to drink at *home* and females and males in years 9-12 were more likely to drink at *social events* (Figure 19).

FIGURE 19: PLACES OF CONSUMPTION – ALCOHOL



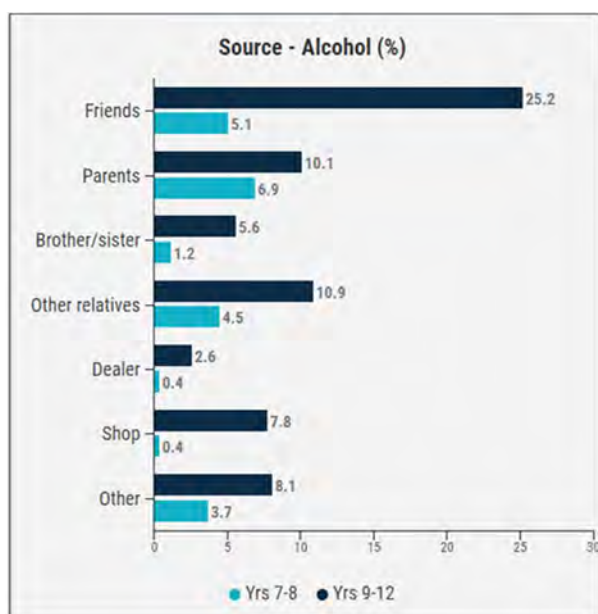
Source:

In terms of sources of alcohol, among students from years 7-8 that reported alcohol use: *parents* (6.9%) were their main source of alcohol, followed by *friends* (5.1%), *other relatives* (4.5%), *other sources* (3.7%) (girlfriend, grandparent, helper, available at home, mother, stepfather, church), *brother/sister* (1.2%), *shop* (0.4%) and *dealer* (0.4%) (Figure 20).

Among students from years 9-12 that reported alcohol use, *friends* (25.2%) were the main source of alcohol, followed by *other relatives* (10.9%), *parents* (10.1%), *other sources* (bar, church, “*da plug*”, available at home, friend’s house, girlfriend, nanny/helper) (8.1%), *shop* (7.8%), *brother/sister* (5.6%), and *dealer* (2.6%) (Figure 20).

There was some variation by gender among students from years 7-8: the main source of alcohol for males was a *parent*, and for females was a *friend*. Among students from years 9-12, the main source of alcohol for males and females was a *friend*.

FIGURE 20: SOURCE OF ALCOHOL



Frequency of Use and Type of Alcoholic Beverage Consumed:

- ❖ With reference to use in the past 30 days among student in years 7-8, a number of students consumed wines “only at social events” (4.9%) and beers “only at social events” (4.5%). Other number of students reported use of hard liquor (3.6%) and “coolers” (3.1%) “only at social events” (Table 3a).
- ❖ Among students in years 9-12, a considerable number of students reported using hard liquor (rum, whiskey, vodka, gin, cognac, etc) (18.1%) and “coolers” (Smirnoff Ice, Seagrams, Escapes, Bacardi Breeze, Mike Hard Flavours, etc) (15.6%) “only at social events”. Other students reported use beers (12.2%) and wines (13.9%) “only at social events” (Table 3b).
- ❖ Very few current users of alcohol consumed these beverages daily (about 0.3% of all survey respondents in years 7-9 and about 1.5% of all respondents in years 9-12).

TABLE 3A: FREQUENCY OF USE BY TYPE OF ALCOHOLIC BEVERAGE FOR CURRENT USERS – YRS 7-8

Frequency of Use	Yrs 7-8			
	Beers	Wines	Coolers (Smirnoff Ice, Seagrams, Escapes, Bacardi Breeze, Mike Hard Flavours, etc)	Liquor (rum, whiskey, vodka, gin, cognac, ect.)
Daily	0.1 (1)	0.4 (5)	0.2 (2)	0.4 (5)
Weekends	1.4 (16)	1.2 (14)	1.7 (20)	0.8 (10)
Some week days	1.0 (12)	1.8 (21)	0.9 (11)	1.3 (15)
Only in social events	4.5 (53)	4.9 (58)	3.1 (37)	3.6 (43)
Never	21.7 (256)	20.3 (240)	22.8 (269)	22.2 (262)
Not stated	71.4 (844)	71.4 (844)	71.3 (843)	71.7 (847)

TABLE 3B: FREQUENCY OF USE BY TYPE OF ALCOHOLIC BEVERAGE FOR CURRENT USERS – YRS 9-12

Frequency of Use	Yrs 9-12			
	Beers	Wines	Coolers (Sminorf Ice, Seagrams, Escapes, Bacardi Breeze, Mike Hard Flavours, etc)	Liquor (r vodka, gir
Daily	1.4 (26)	1.0 (18)	1.6 (28)	2
Weekends	7.3 (131)	4.8 (86)	9.3 (167)	10
Some week days	3.3 (60)	4.2 (75)	3.8 (68)	4
Only in social events	12.2 (220)	13.9 (251)	15.6 (281)	18
Never	39.2 (706)	39.5 (711)	33.4 (602)	28
Not stated	36.5 (657)	36.6 (659)	36.3 (654)	35

- ❖ Of the total number of students in years 7-8, 7.5% (89) reported drinking alcohol sometimes in the past 12 months and 1.0% (1) reported drinking alcohol daily. Of the total number of students in years 9-12, 23.3% (420) reported drinking alcohol sometimes in the past 12 months and 1.8% (33) reported drinking alcohol daily (Table 3c).

TABLE 3C: FREQUENCY OF USE OF ALCOHOL

Frequency	Years 7-8		Years 9-12	
	Number	%	Number	%
Only Once	177	15.0	357	19.8
Sometimes in the past 12 months	89	7.5	420	23.3
Sometimes in the past 30 days	24	2.0	178	9.9
Sometimes in the past week	11	0.9	126	7.0
Daily	1	0.1	33	1.8
Not stated	880	74.5	686	38.1
Total	1182	100.0	1800	100.0

Heavy Drink² (Years 9-12):

The following question was asked to students in years 9-12: How many days in the last four weeks has drinking alcohol made you drunk (that is, you had so much to drink that you could not do what you wanted to do, or you threw up)?

On at least one day in the past month, 32 students in years 7-8 and 200 students in years 9-12, current users of alcohol, have reported that they had too much to drink and got drunk (2.7% of all years 7-8 and 11.0% of all years 9-12 respondents) (Table 4).

There were 6 current users in years 7-8 and 33 current users in years 9-12 who reported to have been drunk for more than half the month (0.5% of all respondents in years 7-8 and 1.8% of all respondents in years 9-12) (see Table 4).

TABLE 4: NUMBER OF DAYS CURRENT USERS OF ALCOHOL DRANK TOO MUCH AND GOT DRUNK

Heavy Drinking	Years 7-8		Years 9-12	
	Number	%	Number	%
None	206	17.4	0	0.0
1 - 5 days	0	0.0	128	7.1
6 - 10 days	20	1.7	26	1.4
11 - 15 days	6	0.5	13	0.7
16+ days	6	0.5	33	1.8
Not stated	944	79.9	1600	88.9
Total	1182	100.0	1800	100.0

Binge Drinking:

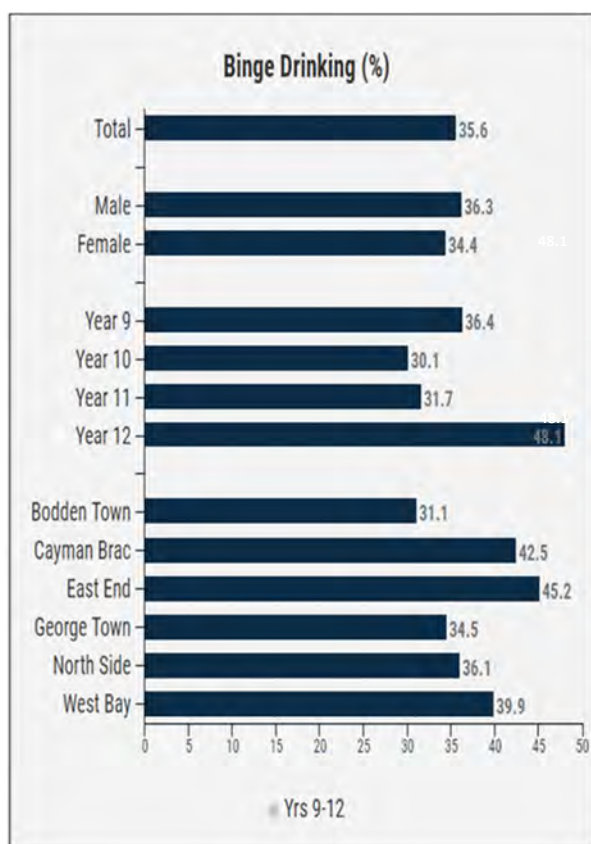
- ❖ Across years 9-12 students, binge drinking prevalence ranged from 36.4% for year 9 students to a high of

² SAMHSA defines heavy alcohol use as binge drinking on 5 or more days in the past month.

48.1% for year 12 students (Figure 21).

- ❖ Overall, 35.6% of the survey respondents from years 9-12 have reported at least one episode of binge drinking in the past 30 days (Figure 21).
- ❖ More males (36.3%) than females (34.4%) reported binge drinking (Figure 21).
- ❖ More students in East End and Cayman Brac reported binge drinking in the past 30 days compared to the other districts (Figure 21).

Figure 21: Binge drinking among Yrs 9-12 students by Gender, Year and District



Counselling and Treatment:

A very low number of students (7 students (0.6%) in years 7-8 and 62 students (3.4%) in years 9-12) reported that a relative, friend, doctor, or other health worker was concerned about their drinking in the past 12 months.

About counselling or treatment programme during the past 12 months, 10 students in years 7-8 (0.8%) and 22 students in years 9-12 (1.2%) reported been to counselling or treatment.

Just 3 students (0.3%) in years 7-8 and 18 students (1.0%) in years 9-12 reported that they feel that they needed counselling or treatment programme for their drinking behaviour.

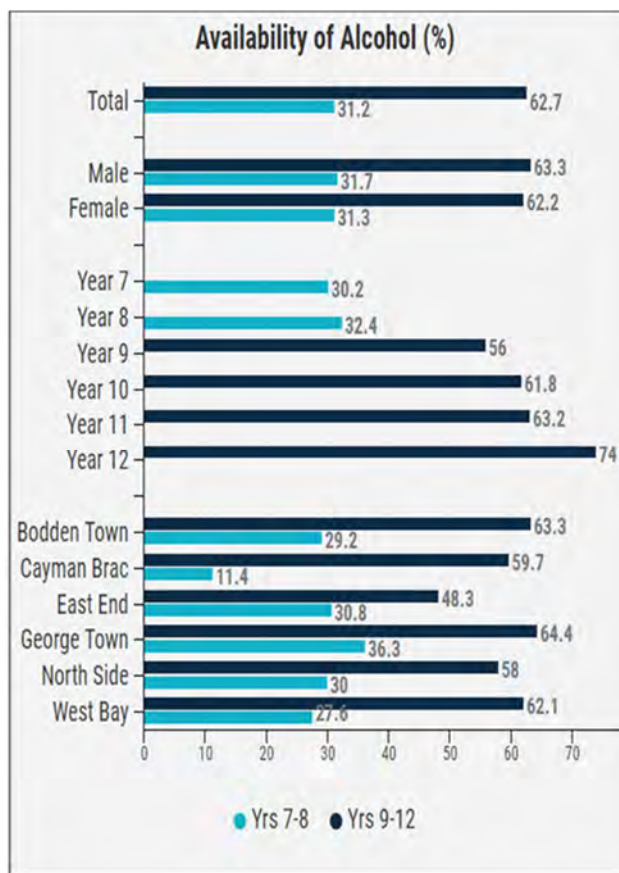
Availability:

About availability, 31.2% of respondents in years 7-8 and 62.7% of respondents in years 9-12, reported that alcohol was easy/very easy to obtain (Figure 22).

Among genders, males were as likely to have access to alcohol as females. Perception of availability significantly increased with year, from 14.3% of 7th years to 74.0% of 12th years reporting that it is 'easy' or 'very easy' to obtain alcohol (Figure 22).

There is also significant variation by district, with students in George Town, West Bay, Cayman Brac, North Side and Bodden Town more likely to report easy availability of alcohol (Figure 22).

FIGURE 22: AVAILABILITY OF ALCOHOL BY GENDER, YEAR, AND DISTRICT



Perception of Risk:

Students were asked how much risk they thought daily drinking poses to one’s health and well-being. Figure 23 presents the percentage of students who perceive “great risk” of harm to one’s health from daily drinking.

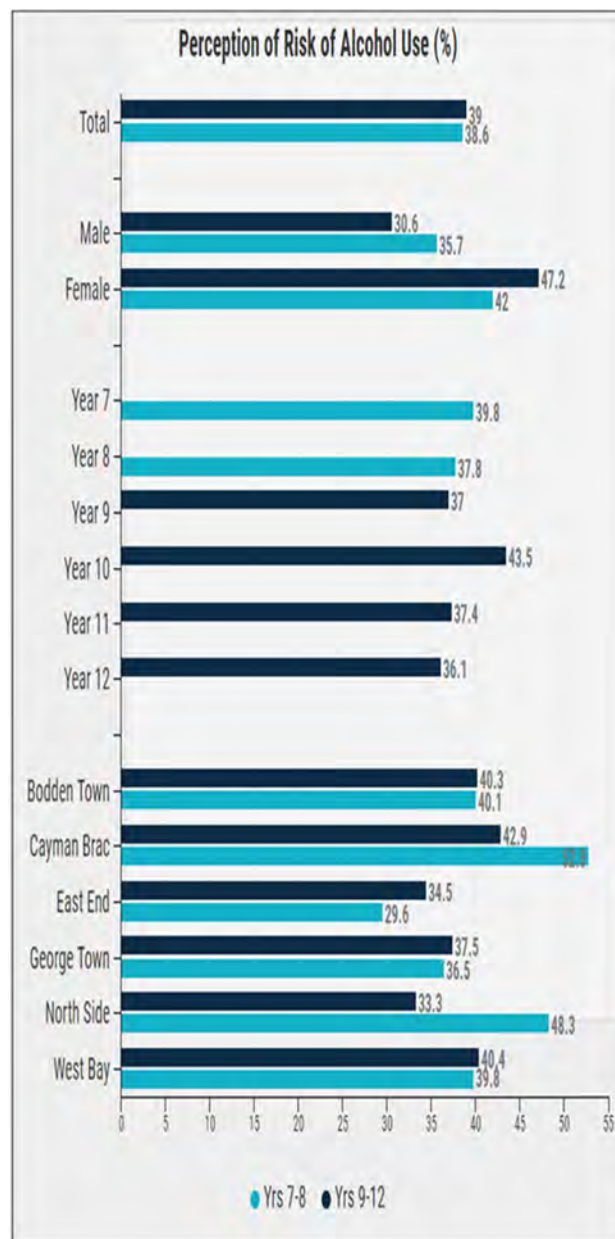
In 2016, 38.6% of students in years 7-8 and 39.0% of students in years 9-12 reported that they believe drinking daily poses a great risk, with females significantly more likely than males to feel this way (42.0% vs. 35.4% among years 7-8 and 47.2% vs. 30.6% among years 9-12).

The perception of great risk from daily drinking showed little variability over the school year cohorts, -39.8% of 7th year

students to 36.1% of 12th years with the highest proportion for Year 10 students (43.5%).

While there were variations by district, this was not significant, except for Cayman Brac and North Side (Figure 23).

Figure 23: Perception of Risk of Alcohol Use



Second Hand Effects of Alcohol Use:

Although many students did not know whether or not they had ever ridden in a vehicle that was driven by someone who had been drinking alcohol, there were, however, 7.6% of students in years 7-8 and 10.5% of students in years 9-12 who said that they were in a car driven by such person (Table 5).

TABLE 5: RESPONDENTS' AWARENESS OF VEHICULAR DRIVER BEING UNDER THE INFLUENCE

2nd hand effects of Alcohol	Years 7-8		Years 9-12	
	Number	%	Number	%
Never	707	59.8	999	55.5
Once	105	8.9	208	11.6
2-5 times	39	3.3	98	5.4
6-9 times	94	8	210	11.7
10 times or more	21	1.8	38	2.1
Not sure	165	14.0	196	10.9
Not stated	51	4.6	51	2.8
Total	1182	100.0	1800	100.0

Parental Approval:

The students were asked if their parents (or guardians) allow them or their friends to drink alcohol at their homes while they are having a party or get-together. About 3% of students in years 7-8 and 14% of students in years 9-12 reported that parents allow them to drink alcohol.

Association with friends that use Alcohol:

As many studies and research state, having friends who use alcohol could increase the risk of alcohol use among adolescents.

In 2016, about 13% of students in years 7-8 and 35% of students in years 9-12 reported that in the past 12 months, they had a friend(s) that tried alcohol when their parents didn't know about it.

Other questions about Alcohol – Students in Years 9-12:

- ❖ Students were asked, “in the last 12 months, how often have you driven a vehicle an hour after drinking two or more drinks of or containing alcohol”: 1.1% reported once, 2.2% reported between 2-5 times, and 1.2% reported more than 6 times.
- ❖ To the question if their family know about their drinking behaviours, about one-third (30.3%) reported “yes”.

2.2.4 Overview of Tobacco Use - 2016

(Appendix A – Literature)

Lifetime Tobacco Use:

As seen in Figure 24, about one-tenth (9.9%) of students in years 7-8 and one-third (29.3%) of students in years 9-12 have smoked at least one tobacco cigarette in their lifetime (see Figure 24).

Among students in years 7-8, more males (11.0%) than females (8.8%) reported smoking in their lifetime.

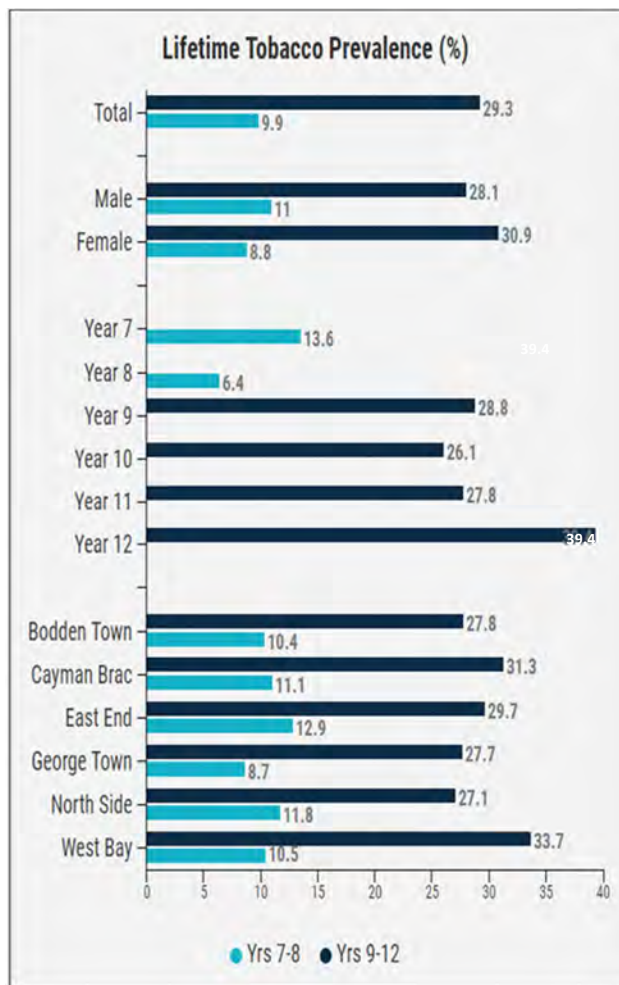
Among students in years 9-12, more females (30.9%) than males (28.1%) reported smoking in their life (Figure 24).

There were significant differences by year levels for lifetime smoking, ranging from a low of 6.4% among 8th years to a high of 39.4% among 12th years (Figure 24).

Despite some variation among the districts, there were no significant differences, except for George Town students, that reported the lowest prevalence (8.7% among students in years 7-8 and 27.7% among students in years 9-12) (Figure 24).

It is interesting to note that Year 12 students in Cayman Brac and North Side reports lifetime prevalence above the overall average (Figure 24).

FIGURE 24: LIFETIME TOBACCO PREVALENCE



Annual Tobacco Use:

About 4% of students overall reported smoking tobacco cigarettes in the past year (in years 7-8, 3.7% and 14.8% in years 9-12). (Figure 25).

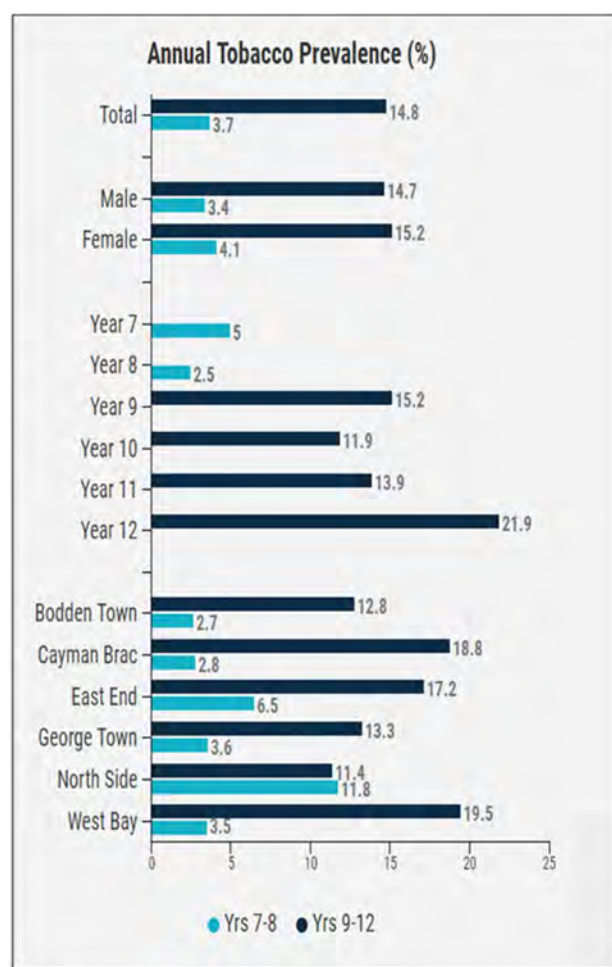
Females (4.1% in years 7-8 and 15.2% in years 9-12) were more likely than males (3.4% in years 7-8 and 14.7% in years 9-12) to smoke tobacco during the 12 months before the survey (see Figure 25).

Prevalence in the younger cohort showed a higher proportion of use among the year 7 students compared to the year 8 students. Rates also did not progressively increase as the Year (grade) increased for the older

cohort – year 9 students reported a higher prevalence than did years 10 and 11 students.

Despite some variation, there was no significant difference by district, except for North Side and East End year 7-8 students (11.8% and 6.5% respectively), and Cayman Brac and West Bay year 9-12 students (19.5%, and 18.8% respectively) that reported the highest prevalence

Figure 25: Annual Tobacco Prevalence



Current Tobacco Use:

Overall, 2.7% of students in years 7-8 and 9.1% of students in years 9-12 reported smoking tobacco cigarettes during the one month period before the survey (Figure 26).

There was no difference between females compared to males (2.8% vs. 2.7%) in years 7-8 reported past month smoking.

Among students in years 9-12, slightly more males (10.1%) than females (8.1%) reported past month smoking (Figure 26).

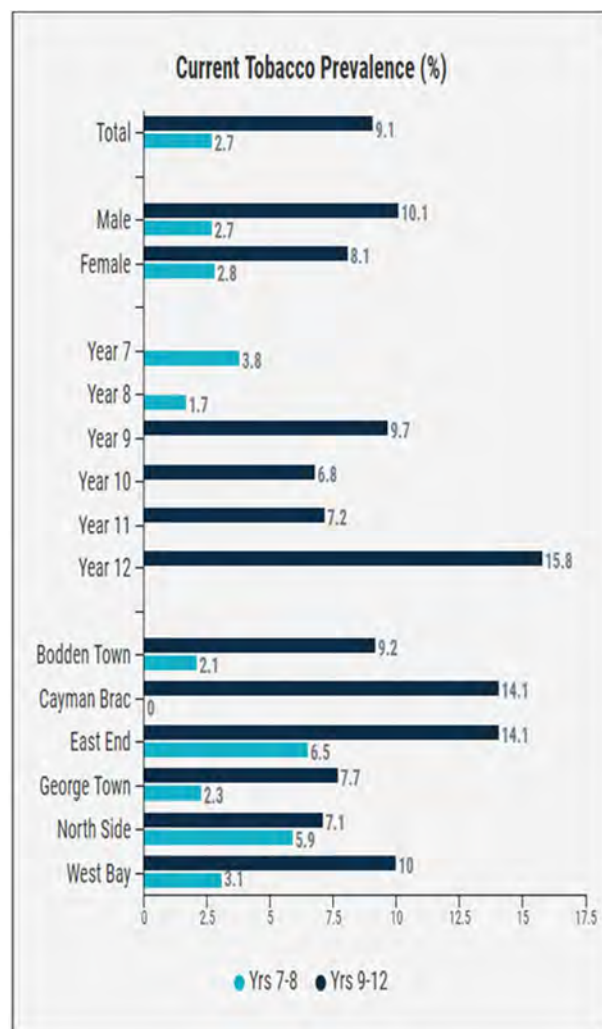
As with reported prevalence in the past year, the younger cohort showed a higher proportion of use among the year 7 students compared to the year 8 students.

Rates also did not progressively increase as Year (grade) increased for the older cohort – year 9 students reported a higher prevalence than did years 10 and 11 students (Figure 26).

Again, there was no significant difference by district, except for North Side and East End years 7-8 students and East End and Cayman Brac years 9-12 students, that reported the highest prevalence (6.5% and 5.9% among students in years 7-8, and 14.1% and 14.1% among students in years 9-12, respectively).

It is notable that students in years 7-8 from Cayman Brac reported no use of tobacco in the past 30 days (Figure 26).

FIGURE 26: CURRENT TOBACCO PREVALENCE



First Use of Tobacco:

Of the lifetime users in years 7-8, 47 initiated tobacco use “more than a year ago” (4.0% of all survey respondents), while 7 used tobacco for the first time “during the past 30 days” (0.6% of all survey respondents) (Table 6).

Of the lifetime users in years 9-12, 243 initiated tobacco use “more than a year ago” (13.5% of all survey respondents), while 61 used tobacco for the first time “during the past 30 days” (3.4% of all survey respondents) (Table 6).

TABLE 6: FIRST USE OF TOBACCO FOR SURVEY RESPONDENTS

First Use	Years 7-8		Years 9-12	
	Number	%	Number	%
During the past 30 days	7	0.6	61	3.4
More than 1 month, less than 1 year	11	0.9	89	4.9
More than a year ago	47	4.0	243	13.5
Not stated	1117	94.5	1407	78.2
Total	1182	100.0	1800	100.0

Incidence of smoking:

In the past year the incidence of tobacco use among students was 6.2%. In the past month, the incidence of tobacco use was 2.6%. Past year incidence in the older cohort was 9.6% compared to 4.2% in the younger cohort, while past month incidence was 1.6% and 0.6% respectively.

Early Onset of Smoking:

In 2016, about 3.8% of all students in years 7-8 and about 5.2% of all students in years 9-12 reported early onset that is, they had their first cigarette between the ages of 6 and 11 years.

The average age of first use among those reporting ever smoking cigarettes was 11 years old for students in years 7-8 and 12 years old for students in years 9-12.

Among genders, more females than males reportedly had their first cigarettes between the ages of 6 and 11 years.

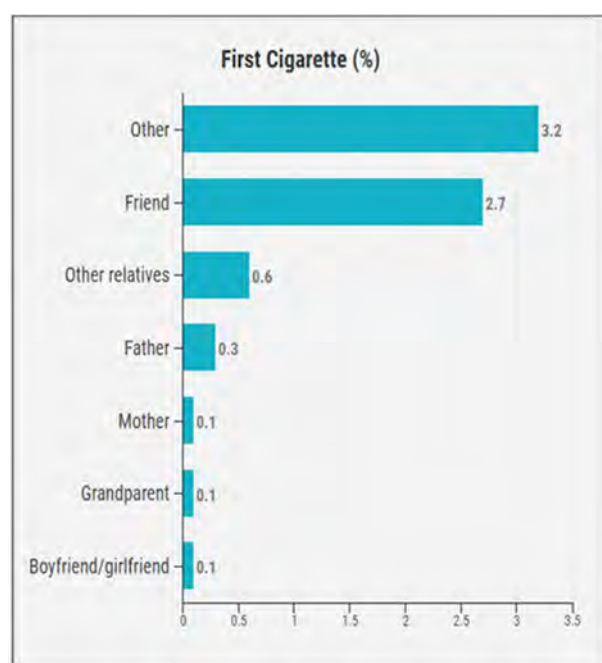
TABLE 7: MEAN AND MEDIAN AGE OF FIRST USE OF TOBACCO (CIGARETTES)

	Overall		Male		Female	
	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 7-8
Mean	10.26 yrs	11.99 yrs	9.83 yrs	11.83 yrs	10.90 yrs	12.12 yrs
Median	11 yrs	12 yrs	10 yrs	12 yrs	11 yrs	12 yrs

Source of first smoke of tobacco:

Among students in years 7-8, the survey asked the students that reported tobacco use, “who gave you your first cigarette?”. In response, the person who gave students their first cigarette was: *other person* (3.2%), *friend* (2.7%), followed by *other relatives* (0.6%), *father* (0.3%), *mother* (0.1%), *grandparent* (0.1%), and *boyfriend/ girlfriend* (0.1%) (Figure 27).

FIGURE 27: FIRST CIGARETTE:



Places of Consumption:

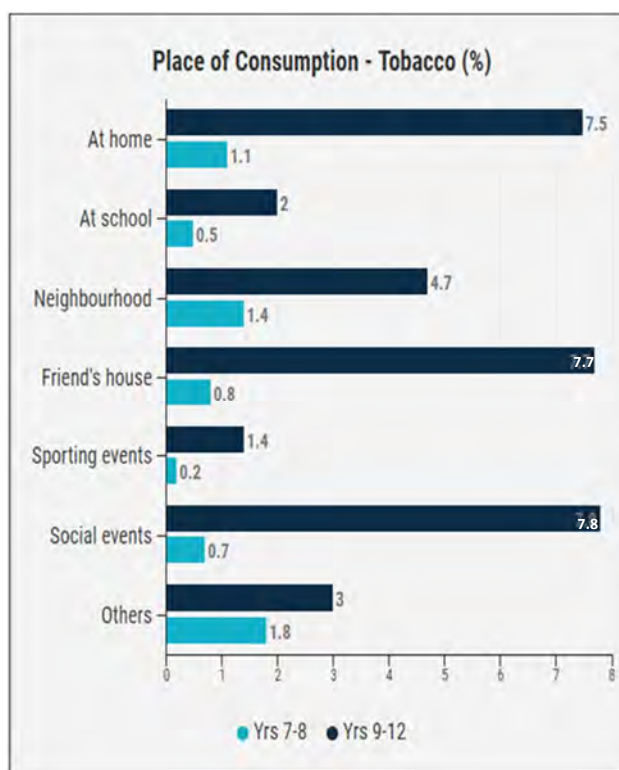
Students were also asked where they usually smoke cigarettes. Of those who use tobacco in years 7-8, about 1.8% reported smoking at *other places* (a shop, relative’s house), 1.4% at *the neighbourhood*, 1.1% at *home*, 0.8% at a *friend’s house*, 0.7% at *social events*, 0.5% at *school*, and 0.2% at *sporting event* (see Figure 28).

Among students in years 9-12, students reported smoking at *social events* (7.8%), followed by *friend’s house* (7.7%), *at home*

(7.5%), *at neighbourhood* (4.7%), *other places* (3.3%) (relative's house, parties, streets, when go out), *at school* (2.0%), and *at sporting events* (1.4%) (Figure 28).

There were some variations by gender: among students in years 7-8, females were more likely to smoke at home and at the neighbourhood and males were more likely to smoke at friend's house and at the neighbourhood. Among students in years 9-12, females were more likely to smoke at social events and males were more likely to smoke at friend's house (Figure 28).

FIGURE 28: PLACE OF CONSUMPTION - TOBACCO



Source:

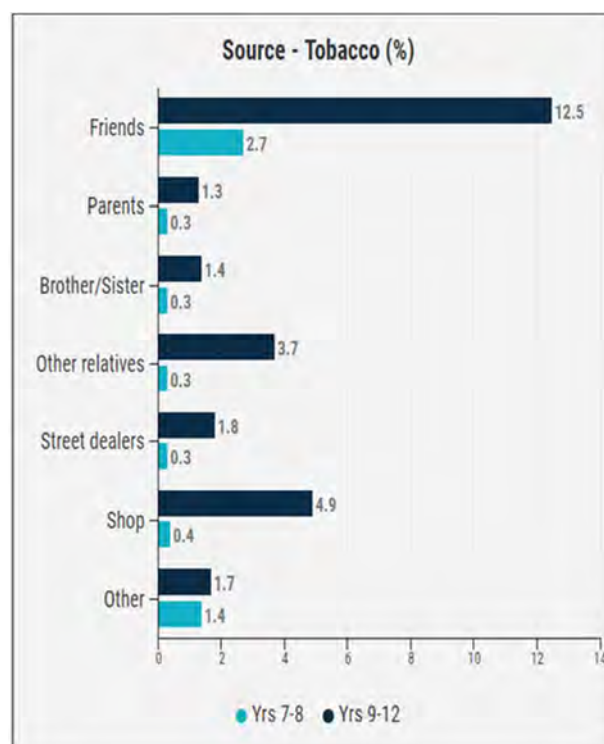
About sources of tobacco, among students from years 7-8 that reported tobacco use were, *friends* (2.7%) as their main source of tobacco, followed by *other sources* (1.4%) (dealer, person in the neighbourhood), *shop* (0.4%), *parents* (0.3%), *brother/ sister*

(0.3%), *other relatives* (0.3%) and *dealer* (0.3%) (Figure 29).

Among students from years 9-12 that reported tobacco use, *friends* (12.5%) were the main source of tobacco followed by *shop* (4.9%), *other relatives* (3.8%), *dealer* (1.8%), *other sources* (available at home, "the plug", stolen) (1.7%), *brother/sister* (1.4%), and *parents* (1.3%) (Figure 29).

There was no variation by gender among students from years 7-8 and years 9-12: the main source of tobacco for both males and females were "friends".

Figure 29: Source of Tobacco



Among students in years 7-8, about 4% of all students reported that they know someone in their school from whom they can get cigarettes.

Frequency of use:

Among students that report tobacco use in years 7-8 (n=77), a large proportion (66.2%) reported using once, followed by those who reported using sometimes in the past 12 months (18.2%), sometimes in the past week (9.1%), sometimes in the past 30 days (3.9%) and daily (2.6%) (Table 8).

There was some variation among gender (Years7-8): more females reported having used tobacco in the past week, and more males reported having used tobacco only once (Table 8).

Among students that report tobacco use in years 9-12 (n=393), about two-fifths (38.7%) reported using once, followed by those who reported using sometimes in the past 12 months (30.3%), sometimes in the past 30 days (12.0%), sometimes in the past week (10.9%) and daily (8.1%) (Table 8).

Among gender (Years 9-12), a large proportion of females and males reported having used tobacco only once (Table 8).

TABLE 8: FREQUENCY OF USE – TOBACCO:

Frequency	Years 7-8		Years 9-12	
	Number	%	Number	%
Only once	51	66.2	152	38.7
Sometimes in the past 12 months	14	18.2	119	30.3
Sometimes in the past 30 days	3	3.9	47	12.0
Sometimes in the past week	7	9.1	43	10.9
Daily	2	2.6	32	8.1
Total	77	100.0	393	100.0

Amount of Cigarettes:

Among students that report tobacco use, about one-tenth (8.9% in years 7-8 and 12.8% in years 9-12) reported smoking 1-5 cigarettes in the last 30 days.

Just a few students reported smoking more than 20 cigarettes during the same period of time (0.5% in years 7-8 and 2.7% in years 9-12) (see Table 9).

TABLE 9: NUMBER OF CIGARETTES SMOKED IN THE PAST 30 DAYS

Frequency	Years 7-8		Years 9-12	
	Number	%	Number	%
No cigarettes	178	88.1	667	79.1
1-5 cigarettes	18	8.9	108	12.8
6-10 cigarettes	3	1.5	12	1.4
11-20 cigarettes	2	1.0	33	3.9
More than 20 cigarettes	1	0.5	23	2.7
Total	202	100.0	843	100.0

Availability:

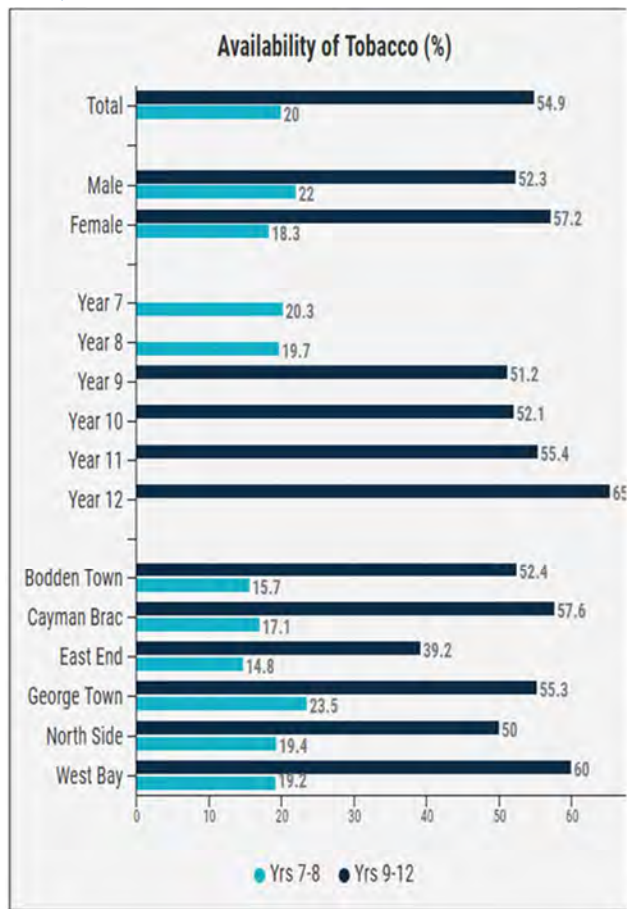
In terms of availability, 20.0% of respondents in years 7-8 and 54.9% of respondents in years 9-12, reported that it was easy/very easy to obtain tobacco (Figure 30).

Among gender, in years 7-8, males (22%) were more likely to have access/availability to tobacco than females (18.3%). Among gender in years 9-12, females (57.2%) were more likely to have access/availability to tobacco than males (52.3%) (Figure 30).

Perception of availability increased with year for the most part, from 19.7% for 8th year students to 65.3% for 12th year students reporting that it is 'easy' or 'very easy' to obtain tobacco (Figure 30).

With the exception of East End more than 50% of Years9-12 students reported that it was easy or very easy to access tobacco. This compares to some 15-20% of Years 7-8 students in all the districts reporting that it was easy or very easy to access tobacco (Figure 30).

FIGURE 30: AVAILABILITY OF TOBACCO BY GENDER, YEAR, AND DISTRICT



Perception of Risk:

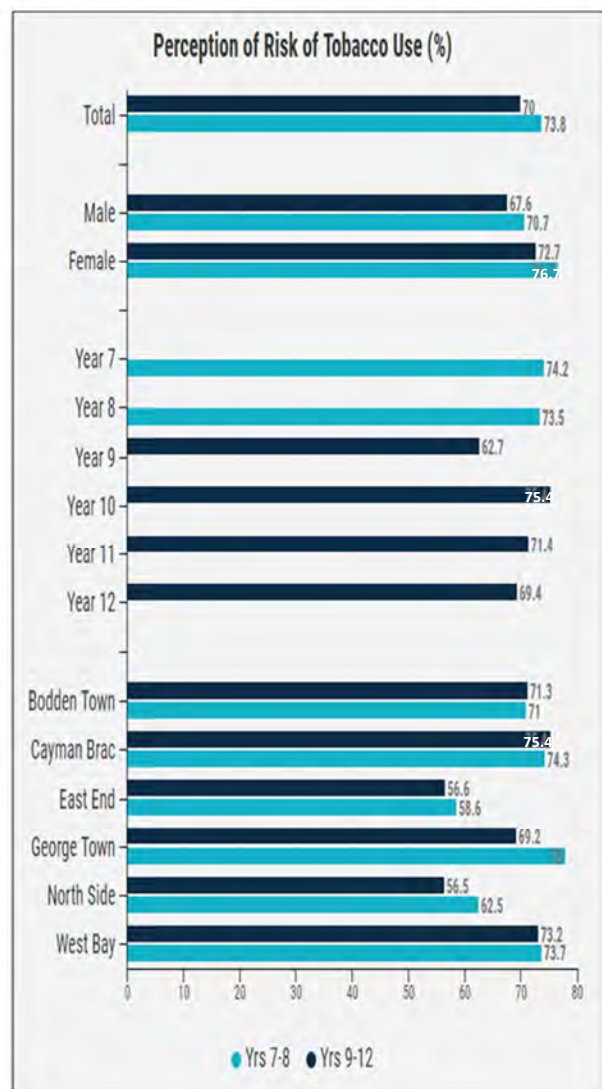
Students were asked how much risk they thought smoking one or more packs of cigarettes per day poses to one’s health and well-being. Figure 31 presents the percentage of students who perceived “great risk” of harm to one’s health from daily smoking.

In 2016, 73.8% of students in years 7-8 and 70.0% of students in years 9-12 reported that they believe smoking one or more packs of cigarettes per day poses a great risk, with females significantly more likely than males to feel this way (76.7% vs. 70.7% among years 7-8 and 72.7% vs. 67.6% among years 9-12) (Figure 31).

The perception of great risk from smoking one or more packs of cigarettes per day

remained similar over the school years, - just about 70% at all Year levels with the exception of Year 9 students (62.7%). . While there was variation by district, this was not significant, except in George Town and Cayman Brac (Figure 31).

Figure 31: Perception of Risk of Tobacco Use



Parental Approval:

The students for years 7-8 were asked if their parents (or guardians) allowed them or their friends to smoke cigarettes at their homes while they are having a party or get-together. A very small percentage (1.1%) of students reported “yes” – their parents allowed them to smoke cigarettes.

Association with friends that use Tobacco:

In 2016, about 10% of students in years 7-8 and 45% of students in years 9-12 reported that in the past 12 months, they had a friend(s) that smoked cigarettes.

2.2.5 Overview of Electronic Cigarette Use (Years 9-12) - 2016

however, George Town and North Side reported the lowest prevalence (Figure 32).

(Appendix A – Literature)

Lifetime Electronic Cigarettes Use:

About 44% of students (786 students) in years 9-12 surveyed reported lifetime use of electronic cigarettes.

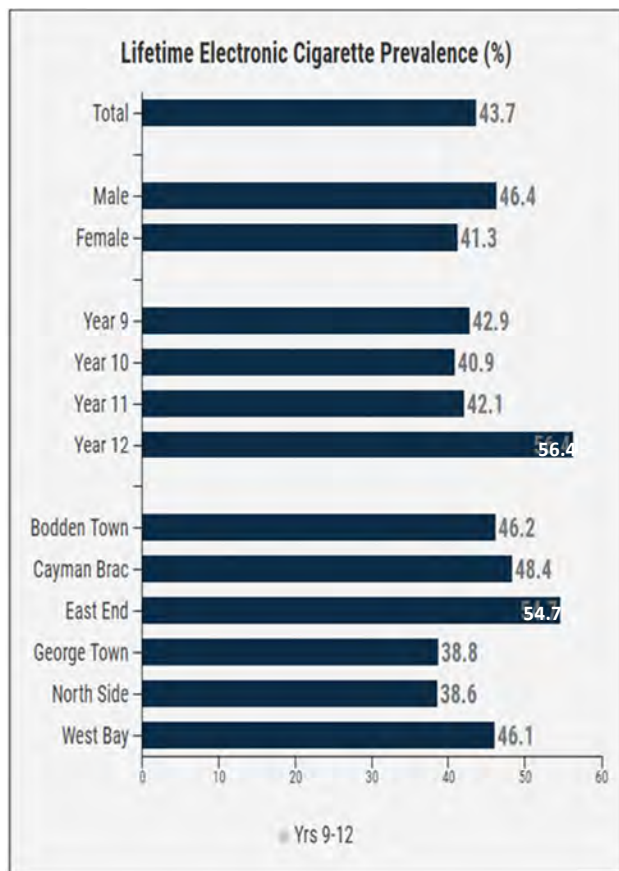
As shown in Figure 32, lifetime use of electronic cigarettes varied by gender with males (46.4%) reporting slightly higher prevalence than females (41.3%).

Greater than 40% of students in all Year levels reported lifetime smoking electronic cigarettes prevalence.

The highest reported prevalence was 53.4% for 12th-year students (Figure 32.)

A notable large proportion of students in all districts reported smoking electronic cigarettes in their lifetime (38-48%);

FIGURE 32: LIFETIME ELECTRONIC CIGARETTES PREVALENCE



Annual Electronic Cigarette Prevalence:

One-quarter (25.6%) of all students (461) in years 9-12 reported smoking electronic cigarettes at least once during the 12 months before the 2016 survey (Figure 33).

More males (27.2%) compared with females (24.4%) in years 9-12 were more likely to smoke electronic cigarettes in the past 12 months (Figure 33).

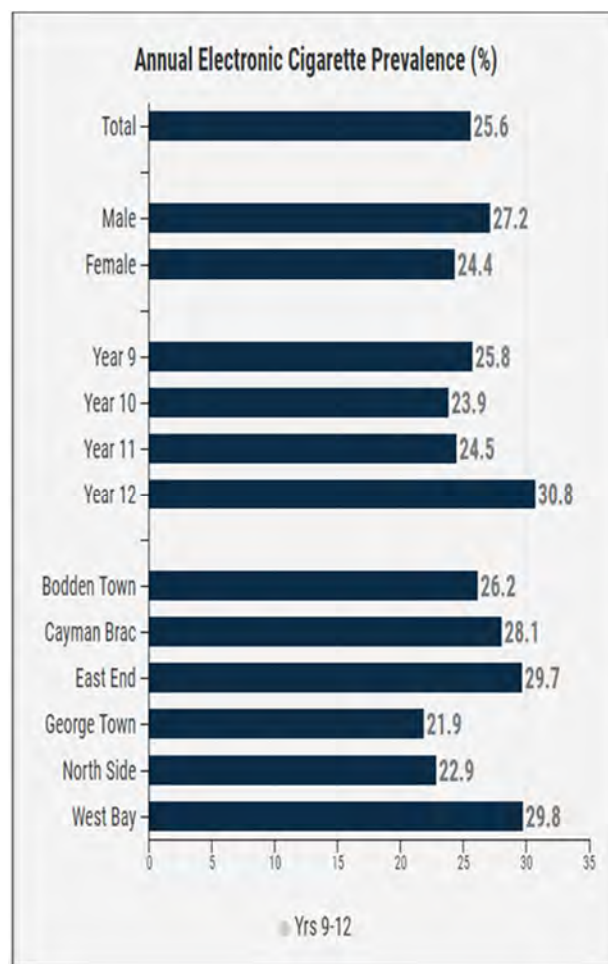
Comparing Year levels, the prevalence ranged from 25.8% up to 30.8%. More than a quarter of the student at all Year level reported past year smoking of electronic cigarettes (Figure 33).

A notable large proportion of students in all districts reported smoking electronic

cigarettes in the past year (22-30%). Again, George Town and North Side reported the lowest prevalence (Figure 33).

Students in East End and West Bay reported slightly higher prevalence for smoking electronic cigarettes in the past year (Figure 33).

Figure 33: Annual Electronic Cigarettes Prevalence



Current Electronic Cigarettes Prevalence:

More than one-tenth (14.1%) of students in years 9-12 reported smoking electronic

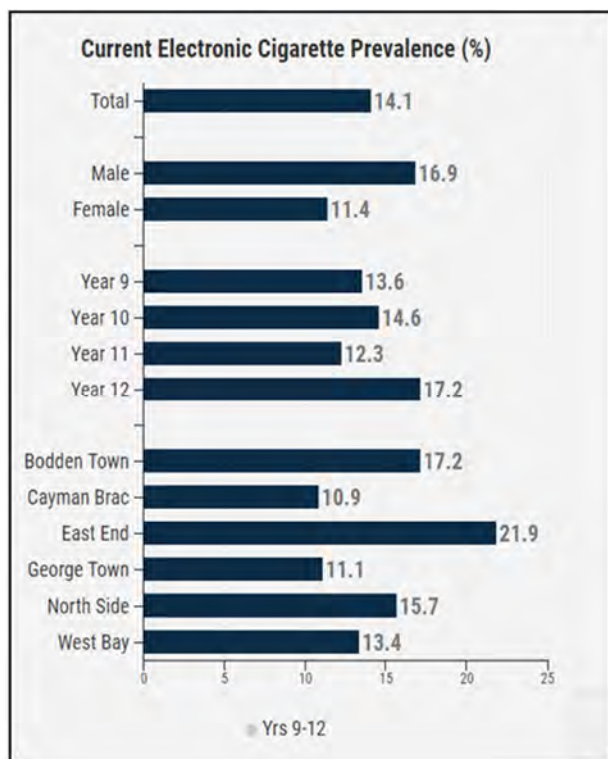
cigarettes at least once in the month prior to the survey (Figure 34).

Again, males (16.9%) were more likely than females (11.4%) to smoke electronic cigarettes in years 9-12, in the past month (Figure 34).

Comparing Year levels, the prevalence ranged from 12.3% up to 17.2%. Year 12 students reported a slightly higher past month prevalence compared to the rest (Figure 34).

There were no notable differences among the districts; however, students from East End (21.9%) were much more likely to report smoking electronic cigarettes in the past month (Figure 34).

FIGURE 34: CURRENT ELECTRONIC CIGARETTES PREVALENCE



First Use of Electronic Cigarettes:

Of the lifetime users in Years 9-12, 274 initiated smoking electronic cigarettes “more

than a year ago” (15.2% of years 9-12 survey respondents), while 104 initiated use of electronic cigarettes for the first time “during the past 30 days” (5.8% of years 9-12 survey respondents) (see Table 10).

TABLE 10: FIRST USE OF ELECTRONIC CIGARETTES FOR SURVEY RESPONDENTS

First Use	Years 9-12	
	Number	%
During the past 30 days	104	5.8
More than 1 month, less than 1 year	186	10.3
More than a year ago	274	15.2
Not stated	1236	68.7
Total	1800	100.0

Incidence of Electronic Cigarettes:

In the past year, the incidence of electronic cigarettes use among students was 19% and 7.8% in the past month.

Early Onset of Smoking Electronic Cigarettes:

In 2016, about 2.6% of all students in years 9-12 reported early onset that is, they had smoked their first electronic cigarettes between the ages of 6 and 11 years. The average age of first use among those reporting ever smoking e-cigarettes was 11 years old for students in years 9-12 (Table 10).

Among gender, more males than females reportedly had smoked their electronic cigarette between the ages of 6 and 11 years.

TABLE 11: MEAN AND MEDIAN AGE OF FIRST USE OF ELECTRONIC CIGARETTES:

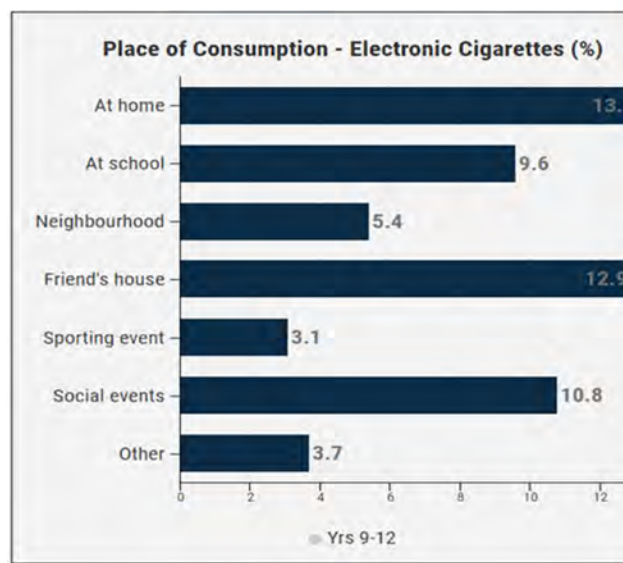
	Overall	Male	Female
	Yrs 9-12	Yrs 9-12	Yrs 9-12
Mean	10.76 yrs	10.69 yrs	10.83 yrs
Median	11 yrs	11 yrs	11 yrs

Places of consumption:

Students were also asked where they usually smoke electronic cigarettes. About 13.1% reported smoking electronic cigarettes at *home*, 12.9% at *friend’s house*, 10.8% at *social events*, 9.6% at *school*, 5.4% at *neighbourhood*, 3.7% at *other* places (anywhere, at the beach, relative’s house, vapor store, clubs/parties, “trap house”, bus), and 3.1% at *sporting events* (Figure 35).

There is some variation by gender: females were more likely to smoke electronic cigarettes at *home* and males were more likely to smoke electronic cigarettes at *friend’s house*.

Figure 35: Place of consumption – Electronic Cigarettes

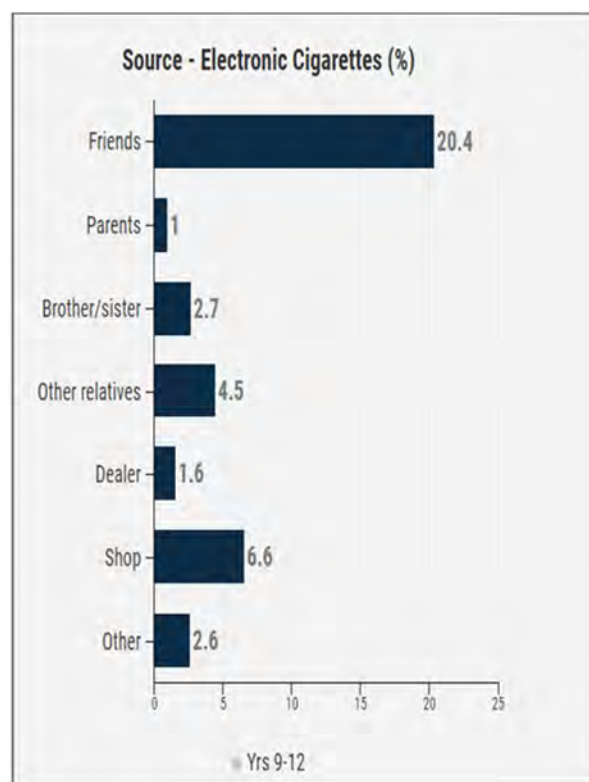


Source:

In terms of sources of electronic cigarettes among students from years 9-12, *friends* (20.4%) were their main source of obtaining electronic cigarettes, followed by *shop* (6.6%), *other relatives* (4.5%), *brother/sister* (2.7%), *other sources* (2.6%), *dealer* (1.6%) and *parents* (1.0%) (Figure 36).

There is some variation by gender among students from years 9-12: the main source of electronic cigarettes for males and females was *friends*.

FIGURE 36: SOURCE OF ELECTRONIC CIGARETTES



Frequency of Use:

Among students that report electronic cigarettes use in years 9-12 (n=792), a great percentage (24.5%) reported used sometimes in the past 12 months, followed by those who reported used once (23.5%), sometimes in the past week (9.3%), sometimes in the past 30 days (9.2%) and daily (5.7%) (Table 12).

There is some variation among gender: more females reported having used electronic cigarettes in the past 12 months, and more males reported having used electronic cigarettes only once.

TABLE 12: FREQUENCY OF USE – ELECTRONIC CIGARETTES

Frequency	Years 9-12	
	Number	%
Only once	186	23.5
Sometimes in the past 12 months	194	24.5
Sometimes in the past 30 days	73	9.2
Sometimes in the past week	74	9.3
Daily	45	5.7
Not stated	220	27.8
Total	792	100.0

Availability:

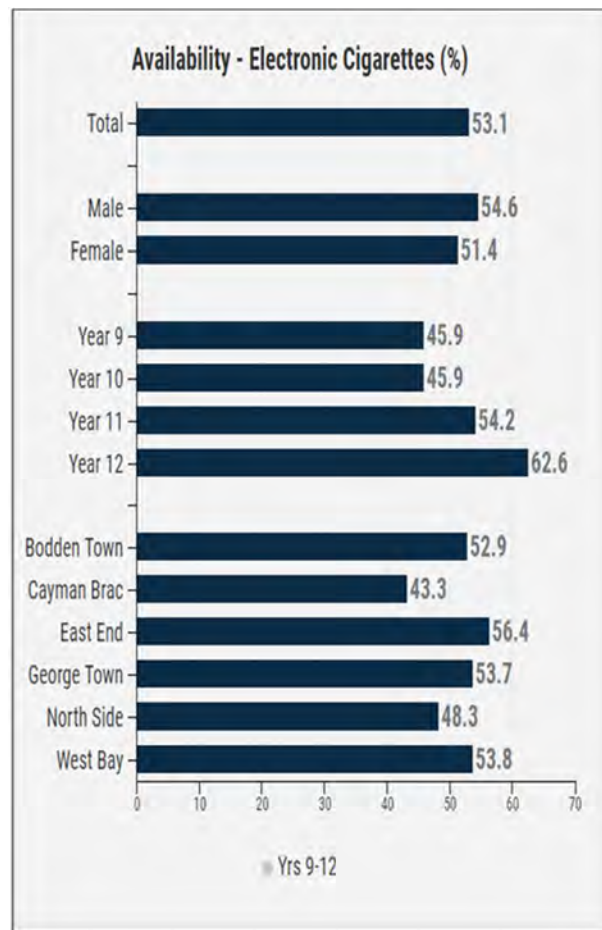
About availability, more than half (53.1%) of respondents in years 9-12 reported that it was easy/very easy to obtain electronic cigarettes (Figure 37).

Among gender, males were more likely to have access/availability to electronic cigarettes than females (see Figure 37).

Perception of availability increased with year, from 45.9% of 9/10th year students to 62.6% of 12th years reporting that it is ‘easy’ or ‘very easy’ to obtain electronic cigarettes (Figure 37).

There was also notable variation by district, with students in East End, West Bay and George Town slightly more likely to report easy availability of electronic cigarettes (Figure 37).

Figure 37: Availability of Electronic Cigarettes by Gender, Year, and District



2.2.6 Overview of Marijuana Use - 2016

(Appendix A – Literature)

Lifetime Marijuana Use:

Marijuana remained the most commonly reported illegal drug used by adolescents in the Cayman Islands according to the Student Drug Use Surveys.

About 7.9% of students in years 7-8 and 42.7% of students in years 9-12 surveyed reported lifetime use.

As shown in Figure 38, lifetime use of marijuana did significantly vary by gender:

among students in years 7-8, males (9.1%) were more likely than females (6.8%) to use marijuana in their life time.

Also among students in years 9-12, males (45.4%) were more likely than females (39.9%) to use marijuana in their life time (see Figure 38).

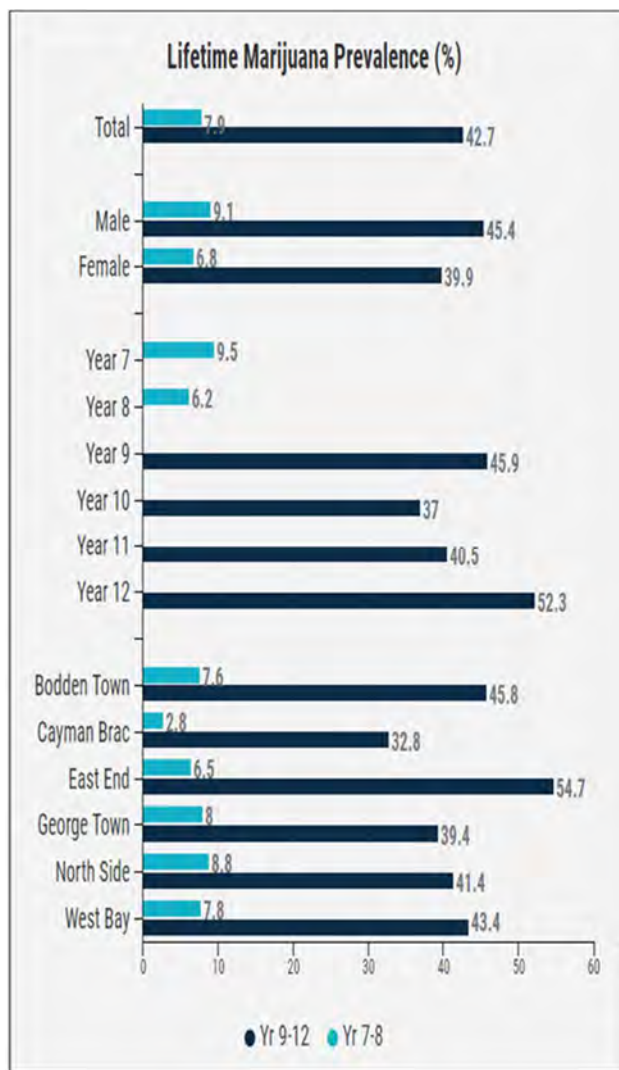
Reported lifetime marijuana prevalence showed variations by year levels.

Prevalence ranged from a low of 6.2% for 8th Year up to 52.3% for 12th-years (Figure 38).

Among the districts, more students from North Side and East End reported marijuana use in their lifetime (about 9% in years 7-8 and about 55% in years 9-12, respectively) in comparison with the other districts.

Student in all district reported notable high lifetime prevalence of marijuana use, especially among the older cohort (Figure 38).

FIGURE 38: LIFETIME MARIJUANA PREVALENCE



and 25.7% in years 9-12) were more likely to use marijuana in the past 12 months (Figure 39).

Reported past month marijuana prevalence also showed variations by year levels: prevalence ranged from a low of 3.4% and 5% for 8th and 7th Years respectively up to 36.2% for 12th-years. Note however that Year 9 students reported higher prevalence than Years 10 and 11 students (Figure 39).

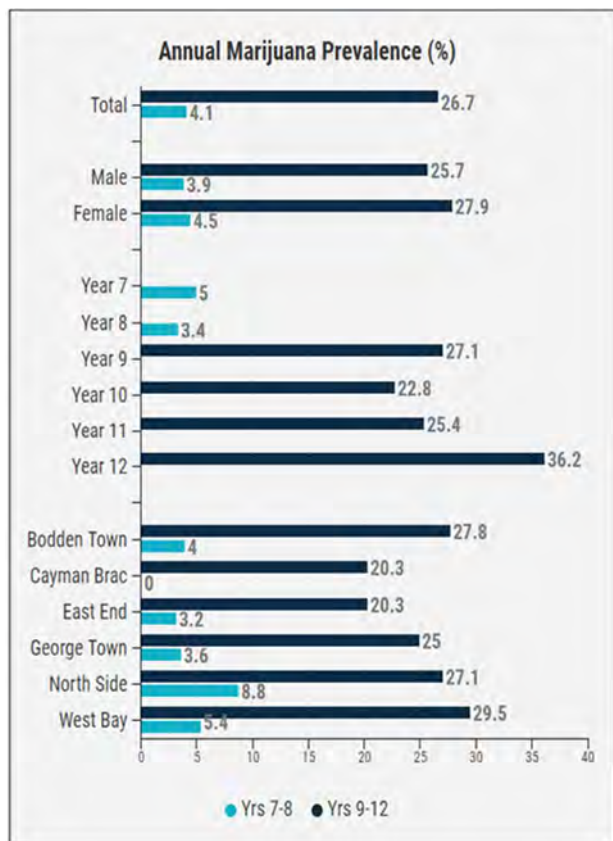
Reported past month prevalence among the districts showed wide variability. Students in Cayman Brac (among students in years 7-8) report no use of marijuana in the past 12 months. Among students in years 9-12, students from Cayman Brac and East End were less likely to have used marijuana in the past year while those in Bodden Town and West Bay were more likely to report past month use (Figure 39).

Figure 39: Annual Marijuana Prevalence

Annual Marijuana Prevalence:

A very small percentage of students in years 7-8 (4.1%) and more than a quarter (26.7%) of students in years 9-12 reported marijuana use at least once during the 12 months before the 2016 survey (see Figure 39).

Females (4.5% in years 7-8, 27.9% in years 9-12) compared with males (3.9% in years 7-8



The year variation was significant, ranging from 3.4% of 7th-years up to 24.0% of 12th-years (Figure 40).

There were not significant differences among the districts; however, among students in Cayman Brac, none of students in years 7-8 used marijuana in the past month.

Among students in years 9-12, students in Cayman Brac were less likely to have used marijuana in the past month (Figure 40).

Current Marijuana Prevalence:

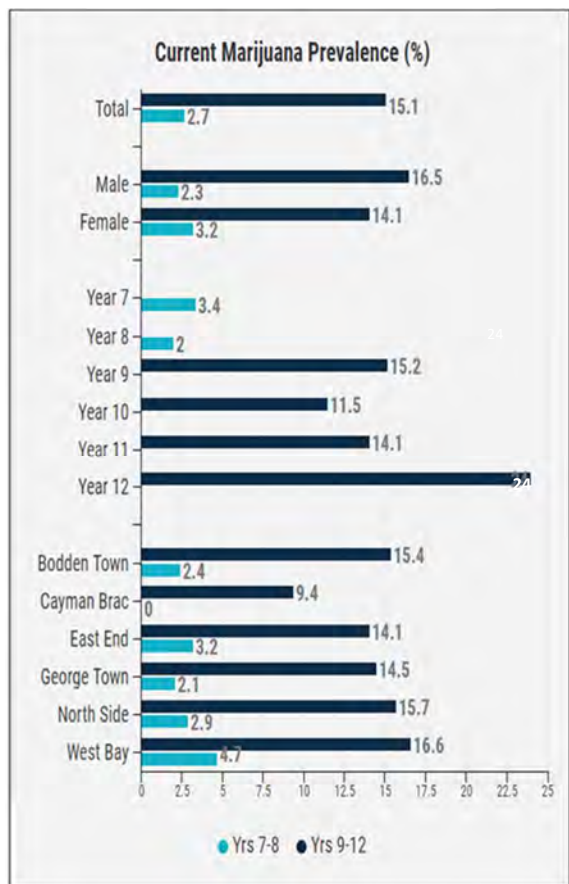
A very small percentage (2.7%) of students in years 7-8 and more than one-tenth (15.1%) of students in years 9-12 reported use marijuana at least once in the month (past 30 days) prior to the survey (see Figure 40).

Among students in years 7-8, females (3.2%) were more likely than males (2.3%) to use marijuana; among students in years 9-12, contrary, males (16.5%) were more likely than females (14.1%) to use marijuana in the past 30 days (Figure 40).

Reported past month marijuana prevalence also showed variations by year levels: prevalence ranged from a low of 2% and 3.4% for 8th and 7th Years respectively up to 24% for 12th-years.

Note however that Year 9 students reported higher prevalence than Years 10 and 11 students.

FIGURE 40: CURRENT MARIJUANA PREVALENCE



First Use of Marijuana:

Of the lifetime users in years 7-8, 44 initiated marijuana use “more than a year ago” (3.7% of all survey respondents), while 7 used marijuana for the first time “during the past 30 days” (0.6% of all survey respondents) (Table 13).

Of the lifetime users in years 9-12, 378 initiated marijuana use “more than a year ago” (21.0% of all survey respondents), while 26 used marijuana for the first time “during the past 30 days” (1.4% of all survey respondents) (Table 13).

TABLE 13: FIRST USE OF MARIJUANA FOR SURVEY RESPONDENTS

First Use	Years 7-8		Years 9-12	
	Number	%	Number	%
During the past 30 days	7	0.6	26	1.4
More than 1 month, less than 1 year	11	0.9	120	6.7
More than a year ago	44	3.7	378	21.0
Not stated	1120	94.8	1276	70.9
Total	1182	100.0	1800	100.0

Incidence of Marijuana:

In the past year (last 12 months), the incidence of marijuana use among students was 6.4%. In the past month (last 30 days), the incidence of marijuana use among students was 1.4%. Past year incidence in the older cohort was 10.3% compared to 2% in the younger cohort, while past month incidence was 1.6% and 0.6% respectively.

Early Onset of Marijuana Use:

In 2016, about 2.8% of all students in years 7-8 and about 4.2% of all students in years 9-12 reported early onset that is, they used marijuana between the ages of 6 and 11 years. The average age of first use among those reporting ever smoking marijuana was 9 years old for students in years 7-8 and 14 years old for students in years 9-12.

Among gender, more females than males in years 7-8 and more males than females in years 9-12 reportedly used marijuana for the first time between the ages of 6 and 11 years.

TABLE 14: MEAN AND MEDIA AGE OF FIRST USE OF MARIJUANA

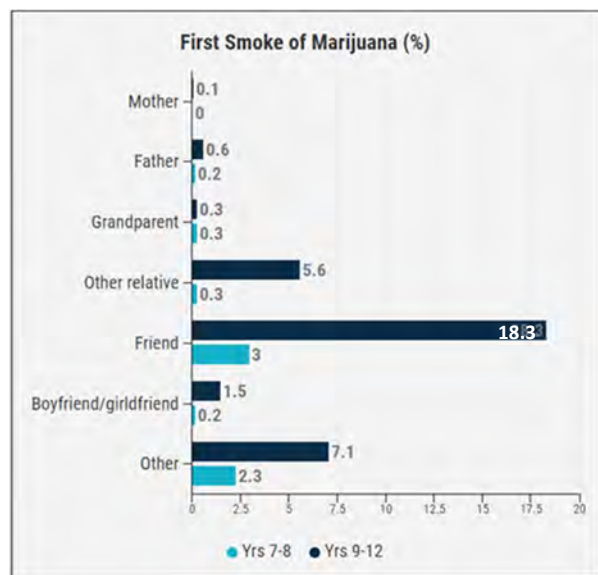
	Overall		Male		Female	
	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 9-12	Yrs 7-8	Yrs 7-8
Mean	9.13 yrs	14.34 yrs	9.25 yrs	13.95 yrs	9.00 yrs	14.69 yrs
Median	9 yrs	14 yrs	9.5 yrs	14 yrs	9 yrs	15 yrs

First smoke of marijuana:

The survey asked the students that reported marijuana use, “who gave you your first smoke of marijuana?”: Among students from years 7-8, the person who first gave them marijuana was a *friend* (3.0%), followed by *other person* (2.3%), *grandparent* (0.3%), *other relatives* (0.3%), *father* (0.2%), *boyfriend/ girlfriend* (0.2%) and *mother* (0%) (see Figure 41).

Among students from years 9-12, the person who first gave them marijuana was a *friend* (18.3%), followed by *other relatives* (5.6%), *other person* (7.1%), *boyfriend/ girlfriend* (1.5%), *father* (0.6%), *grandparent* (0.3%) and *mother* (0.1%) (see Figure 41).

Figure 41: First Smoke of Marijuana:



Places of consumption:

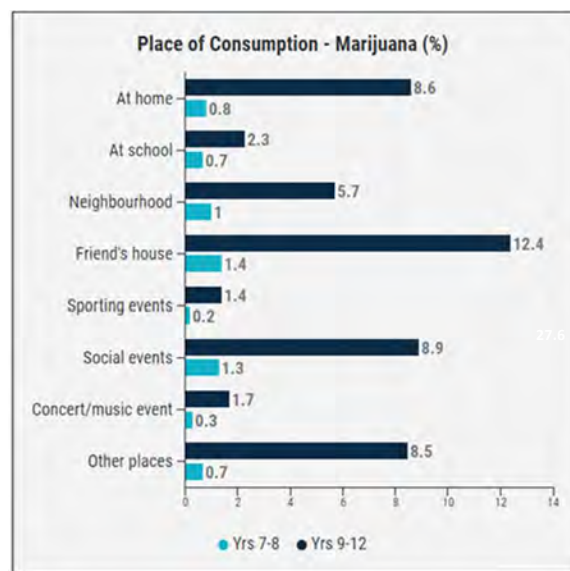
Students were also asked where they usually use marijuana. Of those who use marijuana in

years 7-8, about 1.7% reported that they used marijuana at *other places* (beach, hotel “trap house” “bushes”, tree house), 1.4% at *friend’s house*, 1.3% at *social events*, 1.0% at the *neighbourhood*, 0.8% at *home*, 0.7% at *school*, 0.3% at a *concert/music event*, and 0.2% at a *sporting event* (Figure 42).

Among students in years 9-12, the place where a large proportion of students reported that they used marijuana at *friend’s house* (12.4%). Other places reported where: at *social events* (8.9%), at *home* (8.6%), *other places* (8.5%) (anywhere, at the beach, overseas, at the car, bushes, “trap house”, “in the cut”, old buildings, parties and clubs, park), *neighbourhood* (5.7%), at *school* (2.3%), at a *concert/music event* (1.7%) and at a *sporting event* (1.4%) (Figure 42).

There was little variation by gender: females and males in years 7-8 were more likely to use marijuana at *other places* and females and males in years 9-12 were more likely to use marijuana at *friend’s house*.

FIGURE 42: PLACE OF CONSUMPTION – MARIJUANA



Source:

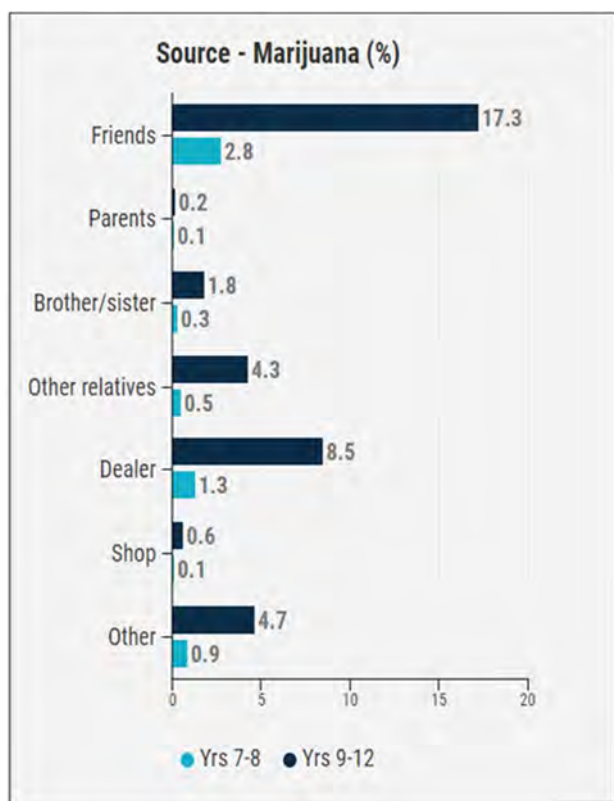
In terms of sources of marijuana among students from years 7-8 that reported

marijuana use, *friends* (2.8%) were their main source of marijuana, followed by *dealer* (1.3%), *other sources* (0.9%) (best friend, not telling), *other relatives* (0.5%), *brother/ sister* (0.3%), and *parents* (0.1%) (Figure 43).

Among students from years 9-12 that reported marijuana use, *friends* (17.3%) were the main source of marijuana, followed by *dealer* (8.5%), *other sources* (4.7%) (“trap house”, overseas, own garden, “the plug”), *other relatives* (4.3%), *brother/ sister* (1.8%), *shop* (0.6%), and *parents* (0.2%) (Figure 43).

There was no variation by gender among students from years 7-8 and years 9-12: the main source of marijuana for males and females was *friends*.

Figure 43: Source of Marijuana



Forms of use of Marijuana:

Among students in years 9-12, it was asked “How have you used marijuana?”.

About one-third (29.4%) reported using marijuana in a Rizla paper; 9.6% reported use marijuana in a pipe, chalice, bong, and 5.9% reported use marijuana in a “grabba leaf”. Other students reported using marijuana in food, like cookies and brownies.

Frequency of Use:

Among students that report marijuana use in years 7-8 (n=71), a small percentage (3.1%) reported using once, followed by those who reported using sometimes in the past 12 months (1.0%), sometimes in the past 30 days (0.7%), sometimes in the past week (0.7%), and daily (0.5%) (see Table 15).

There was no variation among gender: more males and more females reported having used marijuana only once.

Among students that report tobacco use in years 9-12 (n=563), about one-tenth (9.9%) reported using sometimes in the past 12 months, followed by those who reported used once (9.4%), sometimes in the past week (4.6%), daily (4.6%), and sometimes in the past 30 days (2.8%).

Among gender, more females reported using marijuana sometimes in the past 12 months and more males reported having used marijuana only once.

TABLE 15: FREQUENCY OF USE – MARIJUANA

Frequency	Years 7-8		Years 9-12	
	Number	%	Number	%
Only once	37	3.1	169	9.4
Sometimes in the past 12 months	12	1.0	179	9.9
Sometimes in the past 30 days	8	0.7	50	2.8
Sometimes in the past week	8	0.7	83	4.6
Daily	6	0.5	82	4.6
Not stated	1111	94.0	1237	68.7
Total	1182	100.0	1800	100.0

Quantity of Marijuana Used for Current Users:

Past Month:

- ❖ Among students in years 7-8, a small percentage of students (0.8%) reported having used less than 1 spliff of ganja in the month before the survey. Another small proportion (0.7%) reported having used 4 or more spliffs of ganja during the same period of time. (Table 16).
- ❖ Among students in years 9-12, 7.5% reported having used 4 or more spliffs of ganja in the past month. A very small percentage of students (0.8%) reported having used less than one spliff during the same period of time (Table 16).

TABLE 16: PERCENTAGE OF STUDENTS REPORTING NUMBER OF MARIJUANA SPLIFFS USED IN THE PAST MONTH

Number of spliffs	Years 7-8		Years 9-12	
	Number	%	Number	%
None	133	11.3	419	23.3
Less than 1 spliff	9	0.8	44	2.4
About 1 spliff	12	1.0	50	2.8
2-3 spliffs	10	0.8	59	3.3
4 or more spliffs	8	0.7	135	7.5
Not stated	1010	85.4	1093	60.7
Total	1182	100.0	1800	100.0

Daily:

- ❖ Among students in years 9-12, 2.5% reported having used less than one spliff of marijuana daily. A very small percentage of students (2.9%) reported having used 4 or more spliffs daily (Table 17).

TABLE 17: PERCENTAGE OF STUDENTS REPORTING NUMBER OF MARIJUANA SPLIFFS USED DAILY – YRS 9-12

Number of spliffs	Years 9-12	
	Number	%
None	491	27.3
Less than 1 spliff	45	2.5
About 1 spliff	51	2.8
2-3 spliffs	79	4.4
4 or more spliffs	53	2.9
Not stated	1081	60.1
Total	1800	100.0

Counselling and Treatment:

Less than one percent (0.6% of students in years 7-8 and 2.3% in years 9-12) reported been to counselling or treatment. Just 2 students in years 7-8 and 20 students in years 9-12 reported that they felt that they needed counselling or treatment programme for their marijuana use.

Availability:

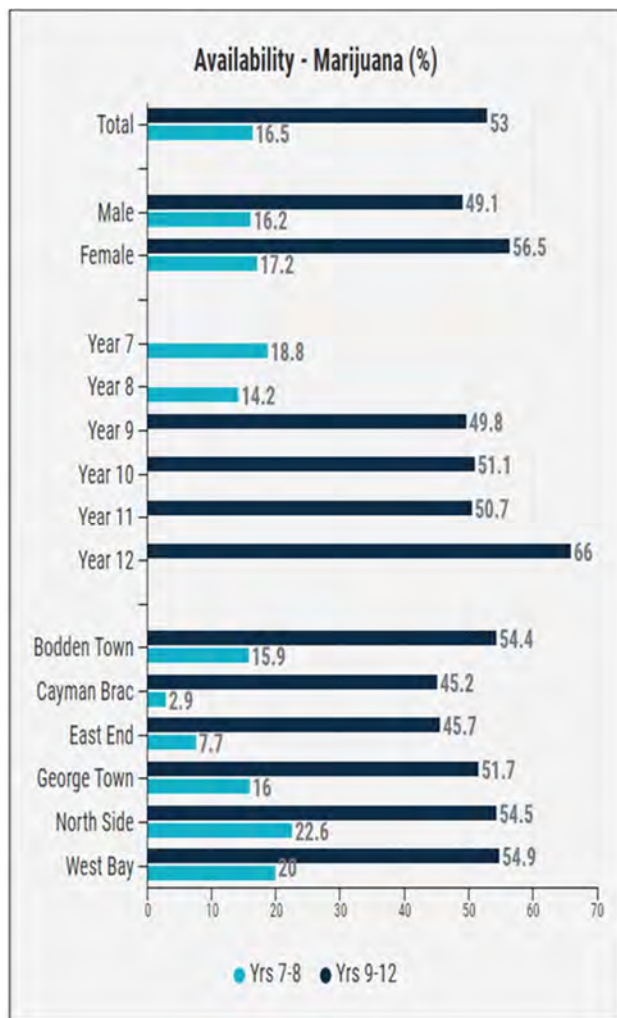
In terms of availability, 16.5% of respondents in years 7-8 and 53% of respondents in years 9-12, reported that it was easy/very easy to obtain marijuana (see Figure 44).

Females compared to males were more likely to have access/availability to marijuana (Figure 44).

Perception of easy access showed variations by year levels. Proportions ranged from a low of 14.2% and 18.8% for 8th and 7th Years respectively up to 66% for 12th-years. Year 9, 10 and 11 students reported about the same proportion with respect to ease of access (Figure 44).

There were also variability by district, with students in Bodden Town, George Town, North Side and West Bay more likely to report easy availability of marijuana (Figure 44).

FIGURE 44: AVAILABILITY OF MARIJUANA BY GENDER, YEAR, AND DISTRICT



Perception of Risk:

Students were asked how much risk they thought trying marijuana once or twice poses to one’s health and well-being. Figure 45 presents the percentage of students who perceived “great risk” of harm to one’s health from trying marijuana once or twice.

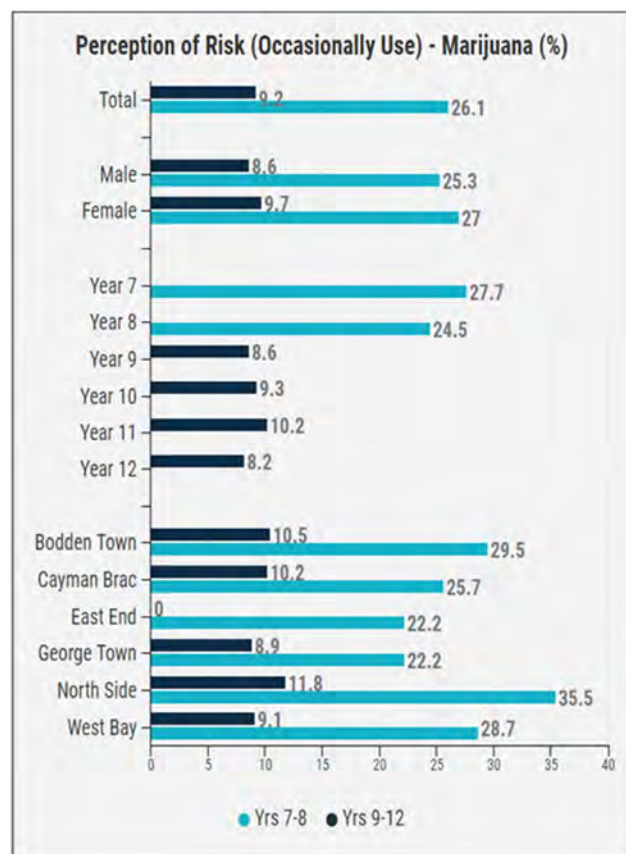
In 2016, 26.1% of students in years 7-8 and 9.2% of students in years 9-12 reported that they believe trying marijuana once or twice poses a great risk, with females significantly more likely than males to feel this way (27.0% vs. 25.3% among years 7-8 and 9.7% vs. 8.6% among years 9-12) (Figure 45).

The perception of great risk from trying marijuana once or twice was noticeable

higher in the younger cohort and decreased among students in the older cohort - from 27.7% of 7th year students to 8.2% of 12th years. (Figure 45).

There were variations by districts: among students in years 7-8, North Side and Bodden Town reported a notable percentage of students that considered that use of marijuana occasionally had a risk. Among students in years 9-12, a small percentage of students in all districts considered that use of marijuana occasionally had a risk (Figure 45).

Figure 45: Perception of Risk of Marijuana Use - Occasionally

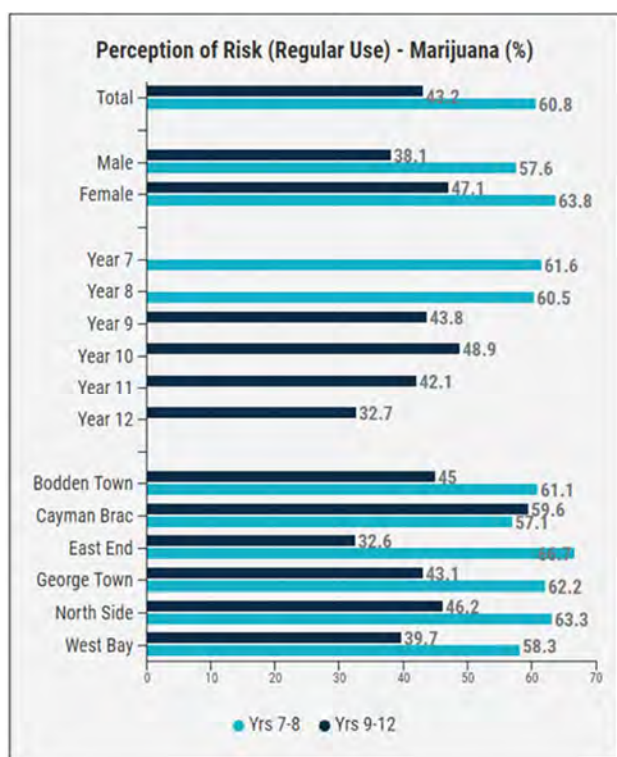


Students were asked how much risk they thought smoking marijuana regularly poses to one’s health and well-being. Figure 46 presents the percentage of students who perceive “great risk” of harm to one’s health

from smoking marijuana regularly. In 2016, 60.8% of students in years 7-8 and 43.2% of students in years 9-12 reported that they believe smoking marijuana regularly poses a great risk, with females significantly more likely than males to feel this way (63.8% vs. 57.6% among years 7-8 and 48.1% vs. 38.1% among years 9-12) (Figure 46).

The perception of great risk from smoking marijuana regularly notably decreased over the school year, from 61.6% of 7th year students to 32.7% of 12th years. While there was variation by district, this was not significant, except in Cayman Brac among students in years 7-8 and East End among students in years 9-12 (Figure 46).

FIGURE 46: PERCEPTION OF RISK OF MARIJUANA USE – REGULARLY



Second Hand Effects of Marijuana:

Although many students did not know whether or not they had ever ridden in a vehicle that was driven by someone who had

been using marijuana, there were, however, 7.2% of students in years 7-8 and 24.1% of students in years 9-12 who said that they were in a car driven by such person (Table 18).

TABLE 18: RESPONDENTS’ AWARENESS OF VEHICULAR DRIVER BEING UNDER THE INFLUENCE OF MARIJUANA

2nd hand effects of Marijuana	Years 7-8		Years 9-12	
	Number	%	Number	%
Never	902	76.3	1103	61.3
Once	33	2.8	128	7.1
2-5 times	24	2.0	138	7.7
6-9 times	6	0.5	38	2.1
10 times or more	0	0.0	130	7.2
Not sure	131	11.1	192	10.7
Not stated	1119	94.7	71	3.9
Total	1182	100.0	1800	100.0

Parental Approval:

The students were asked if their parents (or guardians) allow them and their friends to smoke marijuana at their homes while they are having a party or get-together. About 0.5% of students in years 7-8 and 2.2% of students in years 9-12 reported that parents allow them to smoke marijuana.

Association with friends that use Marijuana:

In 2016, about 11% of students in years 7-8 and 47% of students in years 9-12 reported that in the past 12 months, they had a friend(s) that used marijuana.

Other questions about Marijuana – Students in Years 9-12:

- ❖ About a quarter (24.9%) of students reported having eaten marijuana.
- ❖ Just a small percentage (4.1%) reported growing marijuana at their home.

- ❖ About 113 students reported carried marijuana to school. For those who responded yes, it was asked why they it did: 81 students responded they that carried for personal use, 53 students responded to share with friends, and 56 students responded to sell.
- ❖ Just a few students (9.3%) reported that their family knows about their marijuana use.
- ❖ Almost half of students (46.8%) reported that they know someone in their school whom they can get marijuana from.

2.2.7 Overview of Inhalants Use (Years 9-12) - 2016

(Appendix A – Literature)

Lifetime Inhalants Use:

About 7.8% of students in years 9-12 reported lifetime use of inhalants.

As shown in Figure 47, lifetime use of inhalants did significantly vary by gender:

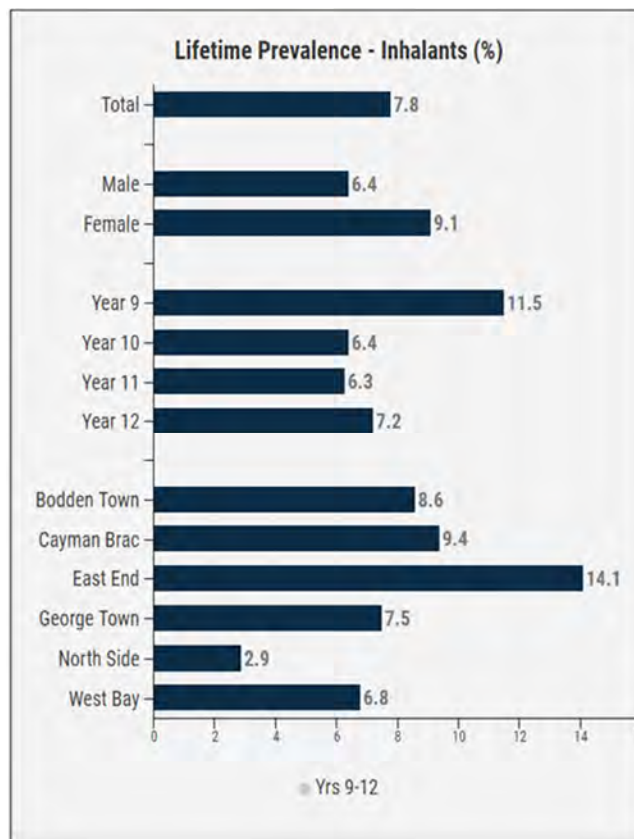
females (9.1%) were more likely than males (6.4%) to report inhalant use in their lifetime.

Use pattern by Year levels showed notable higher reported use in the younger cohort (11.5% in Year 9 students) and a much lower reported prevalence as Year level increased.

Among the districts, more students from East End reported inhalants use in their lifetime compared to the other districts.

The reported prevalence for North Side was very low in comparison.

The other districts reported prevalence that was close to the overall average (Figure 47).



Annual Inhalants Prevalence:

A very small percentage of students in years 9-12 (4.2%) reported inhalants use at least once during the 12 months before the 2016 survey (see Figure 48).

Females (5.7%) compared with males (2.6%) were more likely to use inhalants in the past 12 months (Figure 48).

Use pattern for past year inhalants use varied by Year level – lowest prevalence (3.1%) among students in Year 10 and highest among Year 9 students (5.8%) (Figure 48).

Use pattern among the districts was also variable; however, students in East End were more likely to have used inhalants in the past year (Figure 48).

Figure 47: Lifetime Inhalants Prevalence

FIGURE 48: ANNUAL INHALANTS PREVALENCE

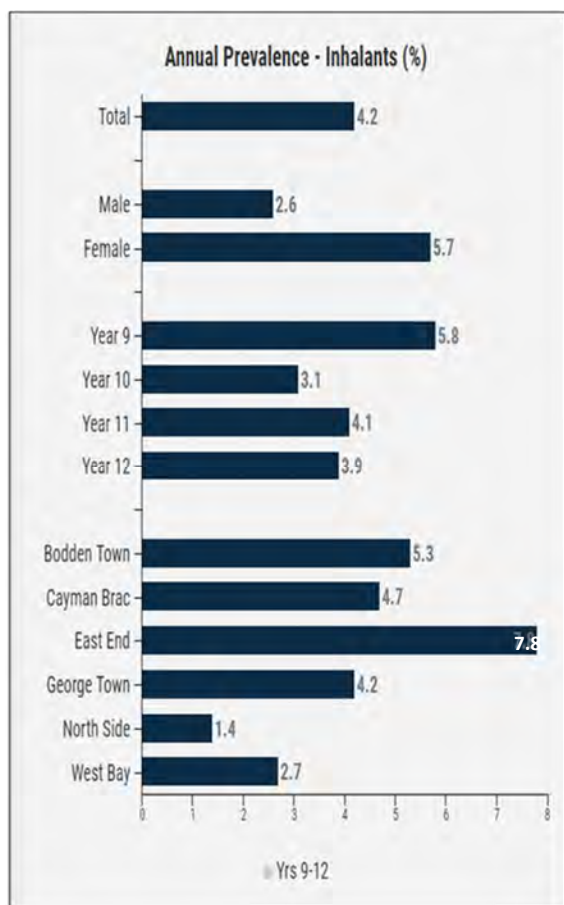
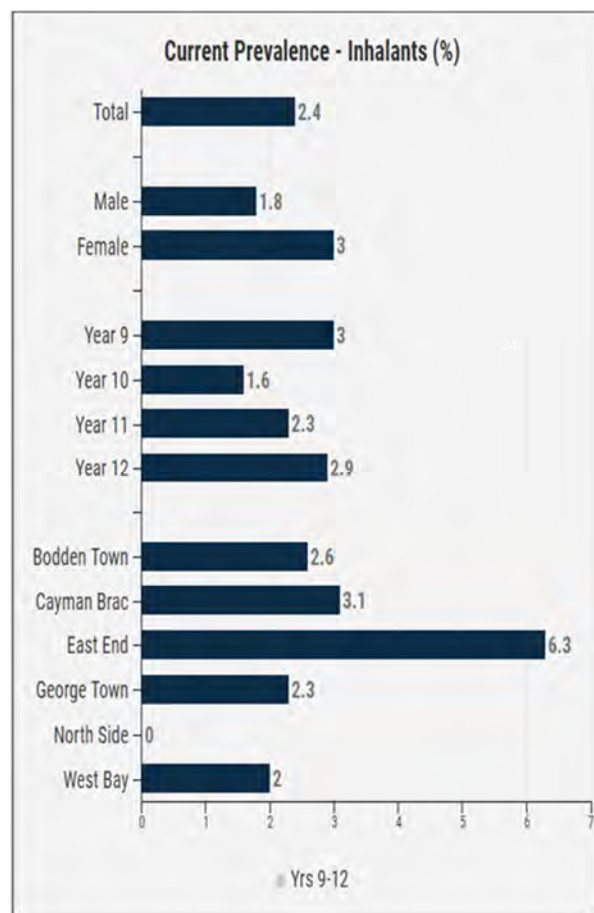


Figure 49: Current Inhalants Prevalence



Current Inhalants Prevalence:

A very small percentage (2.4%) of students in years 9-12 reportedly use inhalants at least once in the month prior to the survey (see Figure 49).

Among gender, females (3.0%) were more likely than males (1.8%) to report inhalants use in the past 30 days (Figure 49).

The year level variation was almost similar except for Year 10 students (1.3%) compared to 2.3-3% for the other Year levels.

Reported use by districts was relatively low (2-3%) except for East End (6.3%) (Figure 49).

First Use of Inhalants:

Of the lifetime users, 44 initiated inhalant use “more than a year ago” (2.4% of all survey respondents), while 9 used inhalants for the first time “during the past 30 days” (0.5% of all survey respondents) (Table 19).

TABLE 19: FIRST USE OF INHALANTS FOR SURVEY RESPONDENTS

First Use	Years 9-12	
	Number	%
During the past 30 days	9	0.5
More than 1 month, less than 1 year	10	0.6
More than a year ago	44	2.4
Not stated	1737	96.5
Total	1800	100.0

Incidence of Inhalants:

In the past year (last 12 months), the incidence of inhalants use among students was 1.08%. In the past month (last 30 days), the incidence of inhalants use among students was 0.5%.

Early Onset of Inhalants Use:

In 2016, about 1.6% of all students in years 9-12 reported early onset that is, they used inhalants between the ages of 6 and 11 years. The average age of first use among those reporting ever use inhalants was 9 years old.

Among genders, more males than females reportedly used inhalants for the first time between the ages of 6 and 11 years.

TABLE 20: MEAN AND MEDIA AGE OF FIRST USE OF INHALANTS

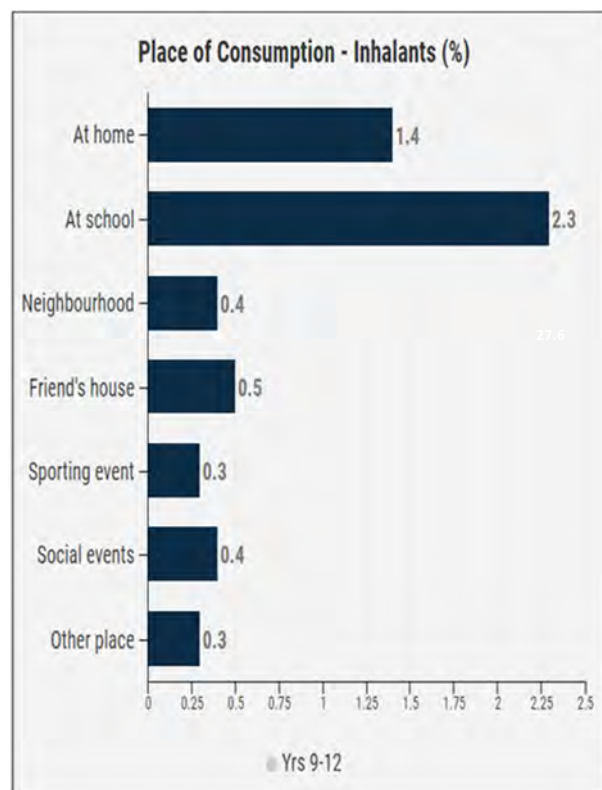
	Overall	Male	Female
	Yrs 9-12	Yrs 9-12	Yrs 7-8
Mean	9.38 yrs	8.62 yrs	9.89 yrs
Median	10 yrs	8.5 yrs	10 yrs

Places of consumption:

Students were also asked where they usually use inhalants. Of those who use inhalants about 2.3% reported used inhalants at *school* 1.4% at *home*, 0.5% at *friend's house*, 0.4% at the *neighbourhood*, 0.4% at *social events*, 0.7% at *school*, 0.3% at a *sporting events*, and 0.3% at *other places* (gas station, school) (see Figure 50).

There was no variation by gender: females and males were as likely to use inhalants at *school*.

FIGURE 50: PLACE OF CONSUMPTION – INHALANTS

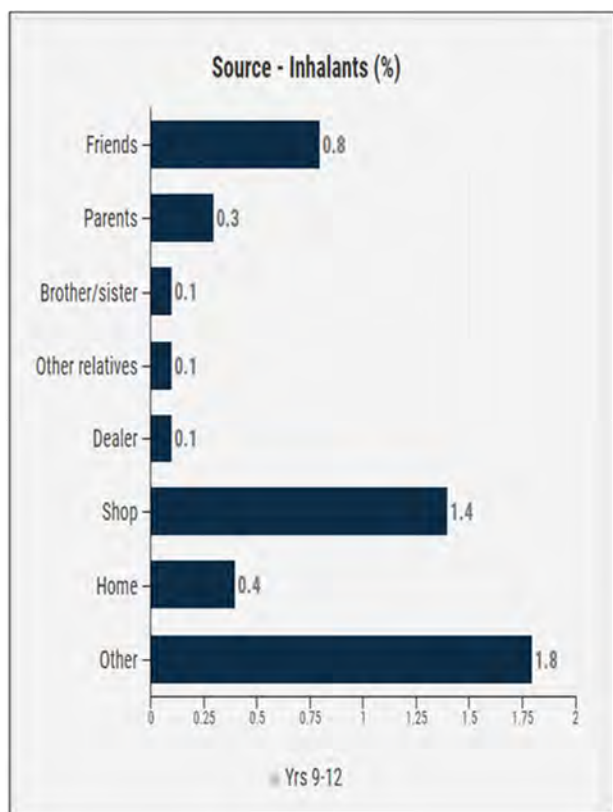


Source:

About sources of inhalants, *shop* (1.4%) were their main source of inhalants, followed by *other sources* (1.8%) (supermarket, school), *friends* (0.8%), *home* (0.4%), *parents* (0.3%), *brother/sister* (0.1%), *other relatives* (0.1%) and *dealer* (0.1%) (see Figure 51).

There was some variation by gender: more males reported obtaining inhalants from *other sources* and females reported obtaining inhalants from *shop*.

Figure 51: Source of Inhalants



Frequency of Use:

Among students that report inhalants use in years 7-8 (n=69), a small percentage (1.6%) reported used once, followed by those who reported used sometimes in the past 12 months (0.9%), daily (0.5%), sometimes in the past week (0.4%), and sometimes in the past 30 days (0.3%) (see Table 21).

There is not variation among genders: more males and more females reported having used inhalants only once.

TABLE 21: FREQUENCY OF USE – INHALANTS

Frequency	Years 9-12	
	Number	%
Only once	29	1.6
Sometimes in the past 12 months	17	0.9
Sometimes in the past 30 days	6	0.3
Sometimes in the past week	8	0.4
Daily	9	0.5
Not stated	1731	96.2
Total	1800	100.0

Number of days of sniffing inhalants:

In the past 30 days, 17 students reported sniffing inhalants 4 or more times. About 23 students reported sniffing inhalants about 1 time in the last 30 day (Table 22).

TABLE 22: NUMBER OF DAYS OF SNIFFING INHALANTS

Number of sniffs - Past 30 days	Years 9-12	
	Number	%
None	774	43
About 1 time	23	1.3
2 - 3 times	11	0.6
4 or more times	17	0.9
Not stated	975	54.2
Total	1800	100.0

Availability:

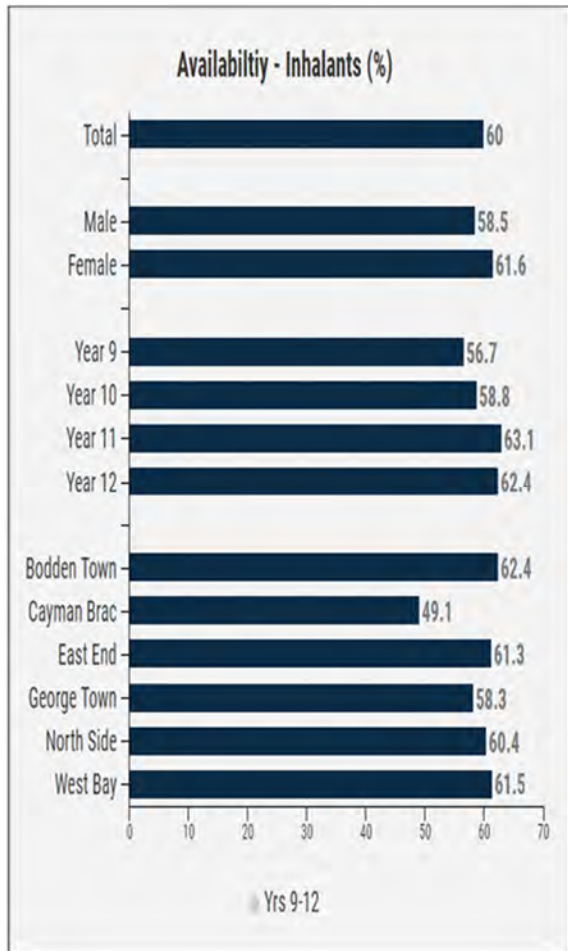
In terms of availability, 60.0% of respondents in years 9-12 reported easy/very easy to obtain inhalants (Figure 52).

Among gender, more females than males reported easy access/availability to inhalants (Figure 52).

Perception of availability remained constant with year level, (56.7% - 62.4%) (Figure 52).

Among the districts, fewer students from Cayman Brac reported that it was easy to obtain inhalants compared to the other districts. The reported prevalence for the other districts were similar (Figure 52).

FIGURE 52: AVAILABILITY OF INHALANTS BY GENDER, YEAR, AND DISTRICT



2.2.8 Overview of Tranquilizers Use (Years 9-12) - 2016

(Appendix A – Literature)

Lifetime Tranquilizers Use:

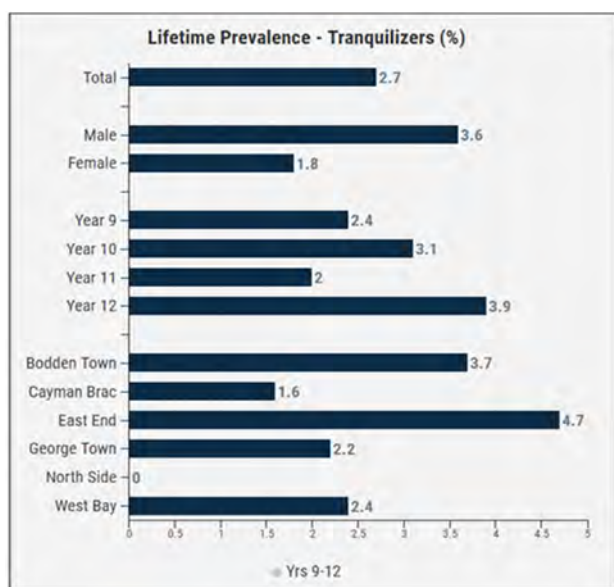
About 2.7% of students (49 students) in years 9-12 reported lifetime use of tranquilizers (Figure 53).

As shown in Figure 53, lifetime use of tranquilizers did vary by gender: males (3.6% - 32 students) were more likely than females (1.8% - 16 students) to report tranquilizer use in their life time.

Use pattern by Year levels showed lower reported use in the younger cohort (2.4% - 11 students - in Year 9 students) and a much higher reported prevalence as Year level increased (Figure 53).

Among the districts, no students from North Side reported tranquilizer use; however, more students from East End reported tranquilizers use in their lifetime (Figure 53).

Figure 53: Lifetime Tranquilizers Prevalence



Annual Tranquilizers Prevalence:

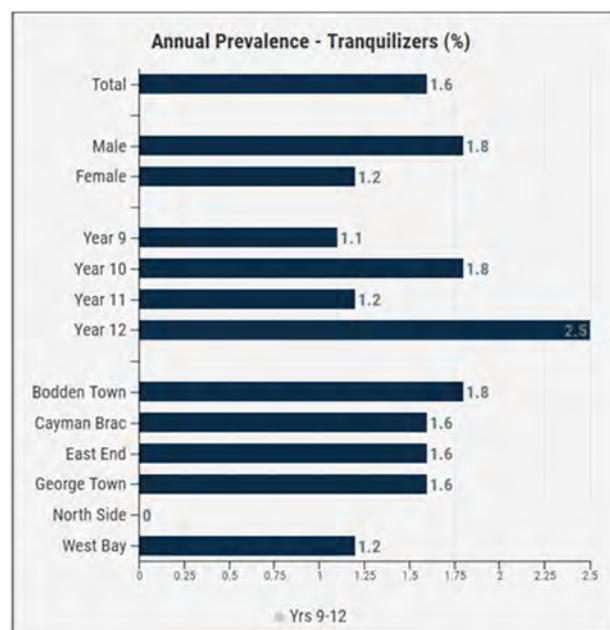
A very small percentage of students in years 9-12 (1.6% - 28 students) reported tranquilizers use at least once during the 12 months before the 2016 survey (see Figure 54).

More males (1.8% - 16 students) compared with females (1.2% - 11 students) were more likely to use tranquilizers in the past 12 months (Figure 54).

Use pattern by Year levels showed minimal difference in reported use. Use ranged from 1.1% (5 students) to 2.5% (7 students) (Figure 54).

There were no marked differences among the districts; however, students in North Side report no use of tranquilizers; and students in Bodden Town reported a slightly higher prevalence of tranquilizer use in the past year (Figure 54).

Figure 54: Annual Tranquilizers Prevalence



Current Tranquilizers Prevalence:

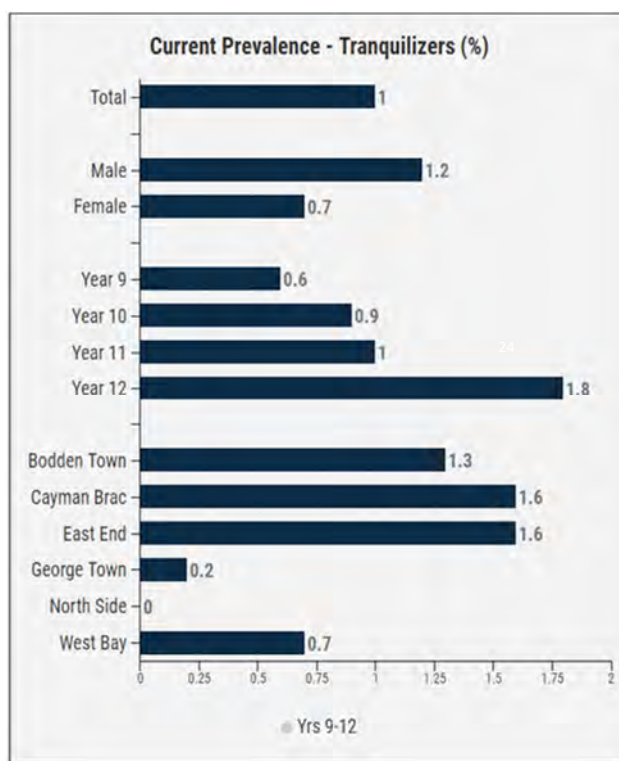
A very small percentage (1.0% - 18 students) of students in years 9-12 reported use tranquilizers at least once in the month prior to the survey (Figure 55).

Among gender, one more time males (1.2% - 11 students) were more likely than females (0.7% - 6 students) to use tranquilizers in the past 30 days (Figure 55).

The year variation increased slightly significant, ranging from 0.6% (3 students) of 9th-years to 1.8% (5 students) of 12th-years (Figure 55).

There were not significant differences among the districts; however, among students in North Side none of students used tranquilizers in the past month (Figure 55).

Figure 55: Current Tranquilizers Prevalence



First Use of Tranquilizers:

Of the lifetime users, 13 initiated tranquilizers use “more than a year ago” (0.7% of all survey respondents), while 11 used tranquilizers for the first time “during the past 30 days” (0.6% of all survey respondents).

TABLE 23: FIRST USE OF TRANQUILIZERS FOR SURVEY RESPONDENTS

First Use	Years 9-12	
	Number	%
During the past 30 days	11	0.6
More than 1 month, less than 1 year	5	0.3
More than a year ago	13	0.7
Not stated	1771	98.4
Total	1800	100.0

Incidence of Tranquilizers:

In the past year (last 12 months), the incidence of tranquilizers use among students was 0.9% (16 students) . In the past month the incidence of tranquilizers use among students was 0.6% (11 students).

Early Onset of Tranquilizers Use:

In 2016, about 0.6% (11 students) of all students in years 9-12 reported early onset that is, they used tranquilizers between the ages of 6 and 11 years. The average age of first use among those reporting ever use inhalants was 10 years old.

Among genders, more males than females reportedly used tranquilizers for the first time between the ages of 6 and 11 years.

TABLE 24: MEAN AND MEDIA AGE OF FIRST USE OF TRANQUILIZERS

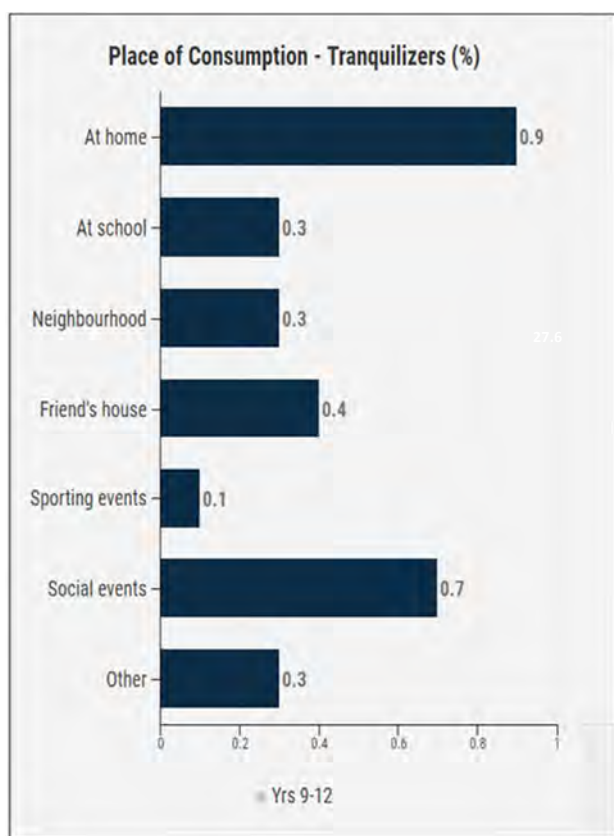
	Overall	Male	Female
	Yrs 9-12	Yrs 9-12	Yrs 7-8
Mean	10.48 yrs	10.40 yrs	10.57 yrs
Median	11 yrs	11 yrs	10.5 yrs

Places of consumption:

Students were also asked where they usually use tranquilizers. Of those who use tranquilizers, about 0.9% (16 students) reported used at *home*, 0.7%(12 students) at *social events*, 0.4% (7 students) at *friend's house*, 0.3% (5 students) at *school*, 0.3% (6 students) at *neighbourhood*, 0.3% (6 students) at *other places* (festivities, school "the plum"), and 0.1% (2 students) at a *sporting events* (Figure 56).

There is some variation by gender: males were more likely to use tranquilizers at *social events* and females were more likely to use tranquilizers at *home*.

FIGURE 56: PLACE OF CONSUMPTION – TRANQUILIZERS

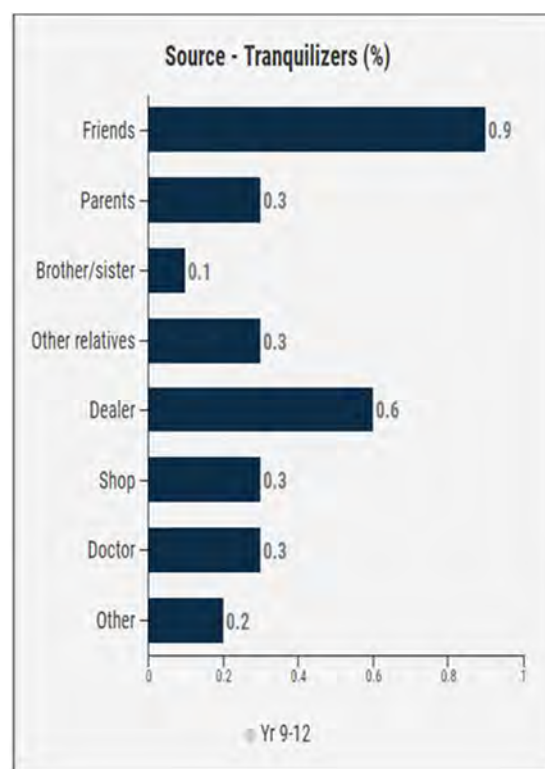


Source:

About sources of tranquilizers, *friends* (0.9% - 17 students) were their main source, followed by *dealer* (0.6% - 10 students), *parents* (0.3% - 6 students), *other relatives* (0.3% - 5 students), *shop* (0.3% - 5 students), *Doctor* (0.3% - 6 students), *other sources* (0.2% - 3 students) and *brother/sister* (0.1% - 2 students) (Figure 57).

There is not variation by gender: more males and more females reported obtain tranquilizers from *friends*.

FIGURE 57: SOURCE OF TRANQUILIZERS



Frequency of Use:

Among students that report tranquilizers use, a small percentage (0.7% - 13 students) reported used once, followed by those who reported used sometimes in the past 12 months (0.4% - 8 students), daily (0.5% - 9 students), sometimes in the past 30 days

(0.3% - 5 students), and sometimes in the past week (0.3% - 6 students) (Table 25).

There is some variation among genders: more males than females reported having used tranquilizers only once.

TABLE 25: FREQUENCY OF USE – TRANQUILIZERS

Frequency	Years 9-12	
	Number	%
Only once	13	0.7
Sometimes in the past 12 months	8	0.4
Sometimes in the past 30 days	5	0.3
Sometimes in the past week	6	0.3
Daily	9	0.5
Not stated	1759	97.7
Total	1800	100.0

Availability:

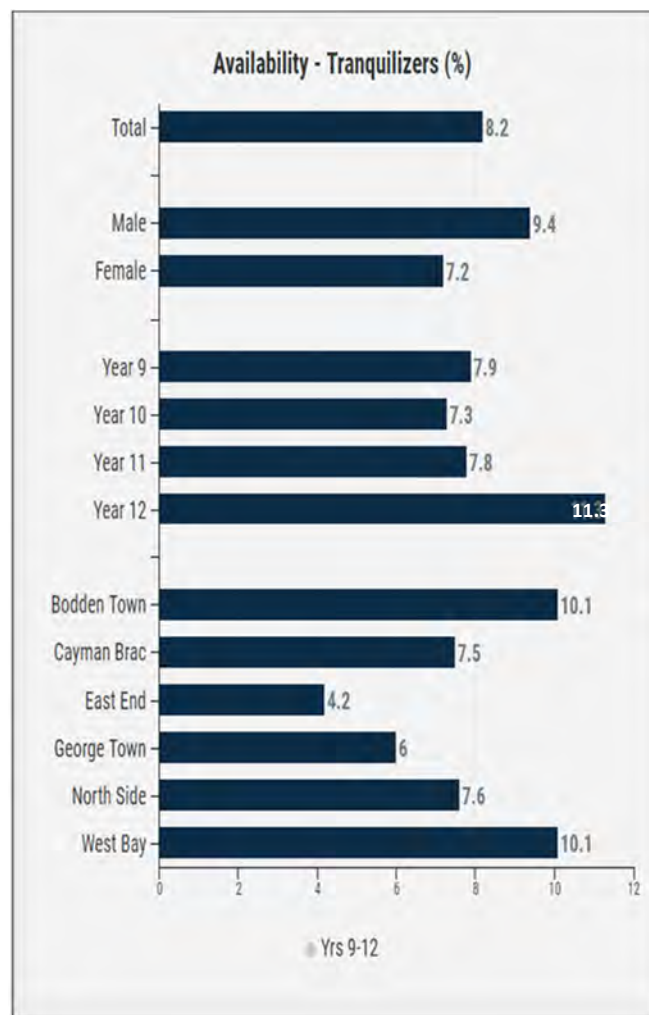
About availability, 8.2% (118 students) of respondents in years 9-12 reported easy/very easy to obtain tranquilizers (Figure 58).

Among genders, more males than females were more likely to have access/availability to tranquilizers.

Perception of availability increase as year levels increase, from 7.9% (28 students) of 9th years to 11.3% (24 students) of 12th years reporting that it is ‘easy’ or ‘very easy’ to obtain tranquilizers (Figure 58).

There is not significant variation by district, however, students from Bodden Town and West Bay were more likely to report easy availability of tranquilizers. Students from East End reported the lowest availability (see Figure 58).

Figure 58: Availability of Tranquilizers by Gender, Year, and District



2.2.9 Overview of Energy Drinks - 2016

Lifetime Energy Drinks Use:

About 43.2% of students in years 7-8 and 59.7% of students in years 9-12 reported lifetime use of energy drinks (Figure 59)

As shown in Figure 59, lifetime use of energy drinks did vary by gender: among students in years 7-8, males (53.4%) were more likely than females (45.9%) to use energy drinks in their life time.

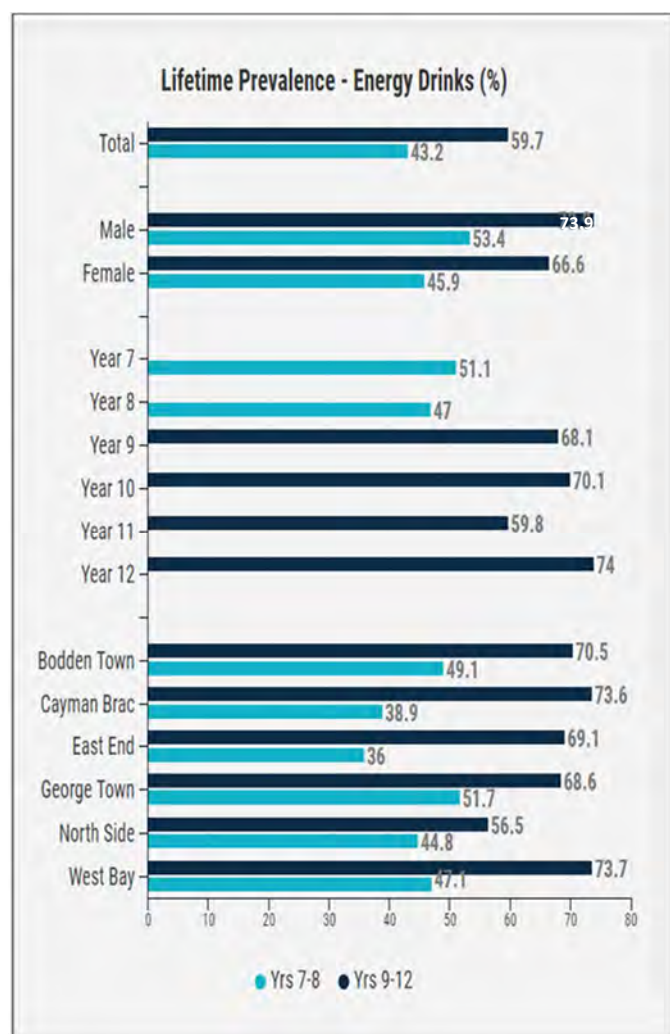
Also among students in years 9-12, males (73.9%) were more likely than females (66.6%) to use energy drinks in their life time.

As expected, there were marked increases in reported lifetime energy drinks prevalence as year level increased.

Use pattern by Year levels showed slightly higher reported use (51%) in Year 9 students compared to Year 8 (47%). Prevalence in the older cohort was higher but variable (Figure 59).

Among the districts, more students from George Town and West Bay reported energy drinks use in their lifetime (about 52% in years 7-8 and about 74% in years 9-12, respectively) in compared with the other districts (Figure 59).

FIGURE 59: LIFETIME ENERGY DRINKS PREVALENCE



Current Energy Drinks Prevalence:

About one-fifth (18.1%) of students in years 7-8 and more than one-fifth (22.7%) of students in years 9-12 reported use energy drinks at least once in the month (past 30 days) prior to the survey (Figure 60).

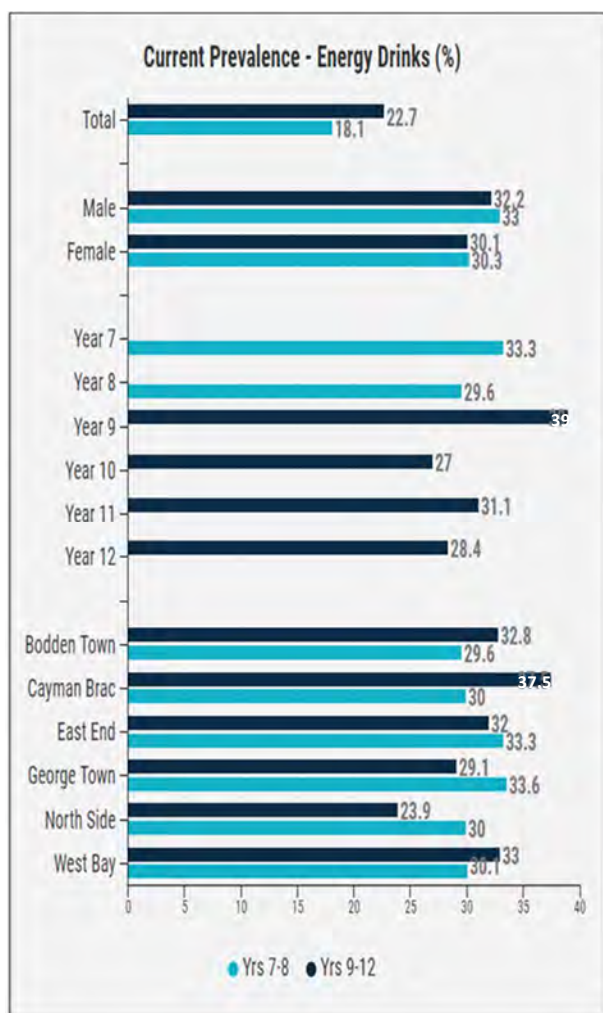
Among students in years 7-8, males (53.4%) were more likely than females (45.9%) to use energy drinks; among students in years 9-12, more males (73.9%) were more likely than

females (66.6%) to use energy drinks in the past 30 days (Figure 60).

The year variation ranged from 33.3% of 7th-years down to 28.4% of 12th-years (Figure 60).

There were not significant differences among the districts: students from Bodden Town years 7-8 were less likely to have used energy drinks, and students from North Side in years 9-12 were less likely to have used energy drinks in the past month.

Figure 60: Current Energy Drinks Prevalence



Among students in years 7-8, most students (319 or 29.9%) who reported that they have used energy drinks indicated that they used these drinks “before or after sporting events”. Approximately 18.3% (216) of lifetime users used energy drinks “while hanging out” whereas only 6.6% (78) reported that they used energy drinks “while studying” (Table 26).

Similar circumstances of use have been reported by students in years 9-12: among energy drink users where 673 or 37.4% of users consume energy drinks “while hanging out” while 570 or 31.7% use these drinks “before or after sporting activities” (Table 27).

TABLE 26: CIRCUMSTANCES OF USE OF ENERGY DRINKS – YEARS 7-8

Circumstances of Use	Years 7-8 (n=1182)		
	Yes	No	Not Stated
While studying	78	354	750
Before or after sporting activity	319	222	641
While hanging out	216	278	688

TABLE 27: CIRCUMSTANCES OF USE OF ENERGY DRINKS – YEARS 9-12

Circumstances of Use	Years 9-12 (n=1800)		
	Yes	No	Not Stated
While studying	288	660	852
Before or after sporting activity	570	457	773
While hanging out	673	388	739

Frequency of Use

Among students that report energy drinks use in years 7-8, about one-tenth (12.1%) reported having used once per month; a small percentage (3.5%) reported having used once per day (Table 28).

Circumstances of Use:

TABLE 28: FREQUENCY OF USE – ENERGY DRINKS (YRS 7-8)

Frequency	Years 7-8	
	Number	%
Once per day	41	3.5
Twice or more per day	32	2.7
Once per week	48	4.1
Twice per week	61	5.2
Once per month	143	12.1
Other	115	9.7
Never had energy drinks	110	9.3
Not stated	632	53.5
Total	1182	100.0

Among students that report energy drinks use in years 9-12, about one-fifth (20.1%) reported having used once per month; a small percentage (4.5%) reported having used once per day (Table 29).

TABLE 29: FREQUENCY OF USE – ENERGY DRINKS (YRS 9-12)

Frequency	Years 9-12	
	Number	%
Once per day	81	4.5
Twice or more per day	48	2.7
Once per week	91	5.1
Twice per week	100	5.6
Once per month	362	20.1
Other	338	18.8
Never had energy drinks	138	7.7
Not stated	642	35.7
Total	1800	100.0

Prevalence of Combining Energy Drinks with Alcoholic Beverages

Figure 61 shows that of those students who have consumed energy drinks in their lifetime in years 7-8, a great percentage (45.3%) have not consumed a mixture of these drinks with alcoholic beverages; whereas a very small percentage (2.5%) of these students has consumed a mixture (see Figure 61).

Among those students who have consumed energy drinks in their lifetime in years 9-12,

almost half of the students (49.4%) have not consumed a mixture of these drinks with alcoholic beverages; whereas a small but significant percentage (15.5%) of these students has consumed a mixture (Figure 62).

FIGURE 61: PREVALENCE OF COMBINING ENERGY DRINKS WITH ALCOHOLIC BEVERAGES – YRS 7-8

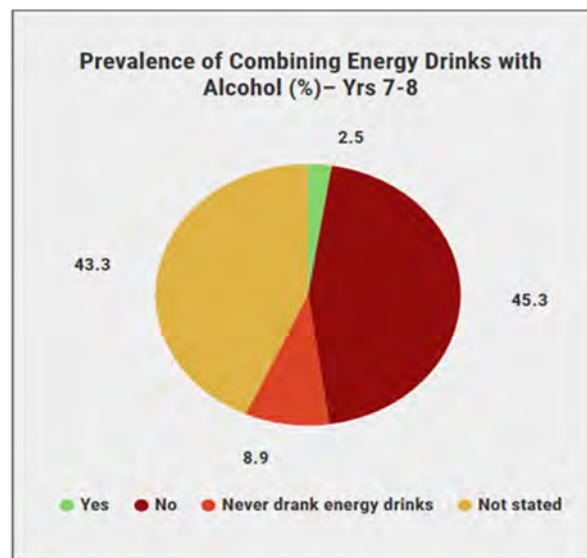
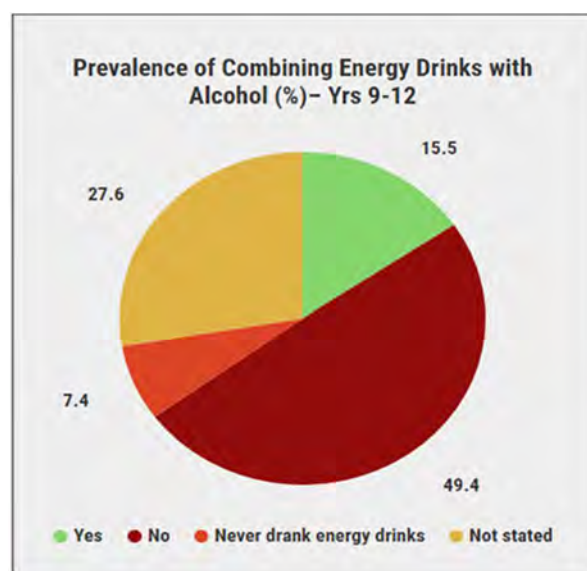


FIGURE 62: PREVALENCE OF COMBINING ENERGY DRINKS WITH ALCOHOLIC BEVERAGES – YRS 9-12



2.2.10 Other illegal Drugs (Yrs 9-12) - 2016

Crack Cocaine:

- ❖ Overall, 1.6% (28 students) of all survey respondents has used crack cocaine in their lifetime.
- ❖ Lifetime prevalence of crack cocaine use ranges from a low of 1.3% (23 students) for 9th year students to a high of 1.6% (28 students) for 12th year students.
- ❖ Overall, only 0.6% (11 students) of all survey respondents had used crack cocaine in the past 30 days.
- ❖ Current prevalence of crack cocaine use by survey respondents is low, ranging from a low of 0.2% (18 students) for 9th year students to a high of 1.1% (20 students) for 12th year students.
- ❖ More males reported having used crack cocaine in lifetime (2.4% - 43 students vs. 0.8% - 14 students) and current (1.0% - 18 students vs. 0.2% - 4 students).
- ❖ Students reported crack cocaine use mainly at *other places* ("the plug", "trap house").
- ❖ The main sources of crack cocaine reported were *friends* and *dealer*.
- ❖ About 13 students (0.7%) reported have used crack cocaine only once.
- ❖ About 130 students (7.6%) reported easy/very easy to obtain crack cocaine.

Cocaine Powder:

- ❖ Overall, 2.2% (40 students) of all survey respondents has used cocaine powder in their lifetime.
- ❖ Lifetime prevalence of cocaine powder use ranges from a low of 1.1% (20 students) for 9th year students to a high of 4.3% (77 students) for 12th year students.

- ❖ Overall, only 0.7% (13 students) of all survey respondents had used cocaine powder in the past 30 days.
- ❖ Current prevalence of cocaine powder use by survey respondents ranged from 1.1% (6 students) for 10th year students to 2.2% (6 students) for 12th year students.
- ❖ More males reported having used cocaine powder in lifetime (3.5% - 31 students vs. 0.8% - 7 students) and the past 30 days (1.1% - 10 students vs. 0.3% - 3 students).
- ❖ Students reported cocaine use at *friend's house* and *social events*.
- ❖ The main sources of cocaine reported were *friends* and *dealer*.
- ❖ About 18 students (1.0%) reported have used cocaine only once.
- ❖ About 152 students (8.5%) reported easy/very easy to obtain cocaine.

Ecstasy:

- ❖ Overall, 2.9% (53 students) of all survey respondents has used ecstasy in their lifetime.
- ❖ Lifetime prevalence of ecstasy use ranges from a low of 2.2% (10 students) for 9th year students to a high of 5.4% (15 students) for 12th year students.
- ❖ Overall, only 0.7% (12 students) of all survey respondents had used ecstasy in the past 30 days.
- ❖ Current prevalence of ecstasy use by survey respondents is low, ranging from 0.9% (5 students) for 10th year students to 1.8% (5 students) for 12th year students.
- ❖ More males reported having used ecstasy in lifetime (4.1% - 36 students vs. 1.9% - 17 students) and more females reported having used ecstasy

in the past 30 days (0.8% - 7 students vs. 0.6% - 5 students).

- ❖ Students reported ecstasy use at *friend's house* and *social events*.
- ❖ The main sources of ecstasy reported were *friends* and *dealer*.
- ❖ About 26 students (1.4%) reported have used ecstasy only once.
- ❖ About 132 students (7.4%) reported easy/very easy to obtain ecstasy.

LSD:

- ❖ Overall, 3.7% (66 students) of all survey respondents has used LSD in their lifetime.
- ❖ Lifetime prevalence of LSD use ranges from a low of 3.5% (16 students) for 9th year students to a high of 7.5% (21 students) for 12th year students.
- ❖ Overall, only 0.6% (10 students) of all survey respondents had used LSD in the past 30 days.
- ❖ Current prevalence of LSD use by survey respondents is low, ranging from a low of 0.2% (1 student) for 9th year students to a high of 1.4% (4 students) for 12th year students.
- ❖ More males reported having used LSD in lifetime (5.5% - 49 students vs. 1.9% - 17 students) and in the past 30 days (0.8% - 7 students vs. 0.3% - 3 students).
- ❖ Students reported LSD use at *friend's house* and *social events*.
- ❖ The main sources of LSD reported were *friends* and *dealer*.
- ❖ About 36 students (2.0%) reported have used LSD only once.
- ❖ About 154 students (8.5%) reported easy/very easy to obtain LSD.

Pain Relief Pills:

- ❖ Overall, 7.1% (128 students) of all survey respondents has used pain relief pills in their lifetime.

- ❖ Lifetime prevalence of pain relief pills use ranges from 6.7% (31 students) for 9th year students to 10.0% (28 students) for 12th year students.
- ❖ Overall, only 2.6% (47 students) of all survey respondents had used pain relief pills in the past 30 days.
- ❖ Current prevalence of pain relief pills use by survey respondents is low, ranging from 2.4% (11 students) for 9th year students to 3.6% (10 students) for 12th year students.
- ❖ More males reported having used pain relief pills in lifetime (7.6% - 67 students vs. 6.6% - 59 students) and more females reported having used pain relief pills in the past 30 days (3.4% - 30 students vs. 1.8% - 16 students).
- ❖ Students reported used pain relief pills at *home*.
- ❖ The main sources of pain relief pills reported were *parents*, *shop* and *Doctor*.
- ❖ About 26 students (1.4%) reported have used pain relief pills only once.
- ❖ About 733 students (40.7%) reported easy/very easy to obtain pain relief pills.

“Donkey Weed” (hallucinogen bush that grows naturally in the Cayman Islands):

- ❖ Overall, 6.2% (111 students) of all survey respondents had used donkey weed in their lifetime.
- ❖ Lifetime prevalence of donkey weed use ranges from 6.5% (30 students) for 9th year students to 7.5% (21 students) for 12th year students.
- ❖ Overall, only 1.4% (25 students) of all survey respondents had used donkey weed in the past 30 days.
- ❖ Current prevalence of donkey weed use by survey respondents is low, ranging from a low of 0.6% (3 students) for 9th year students to a high of 3.2% (9 students) for 12th year students.

- ❖ More males reported having used donkey weed in lifetime (6.9% - 61 students vs. 5.6% - 50 students) and more females reported having used donkey weed in the past 30 days (1.6% - 14 students vs. 1.2% - 11 students).
- ❖ About 380 students (21.1%) reported easy/very easy to obtain donkey weed.

“Seasoned Spliff” (combination of cocaine and marijuana):

- ❖ Overall, 2.3% (42 students) of all survey respondents had used seasoned spliff in their lifetime.
- ❖ Lifetime prevalence of seasoned spliff use ranges from 3.7% (17 students) for 9th year students to 2.9% (8 students) for 12th year students.
- ❖ Overall, only 0.7% (12 students) of all survey respondents had used seasoned spliff in the past 30 days.
- ❖ Current prevalence of donkey weed use by survey respondents is low, ranging from 0.9% (4 students) for 9th year students to 1.4% (4 students) for 12th year students.
- ❖ More males reported having used seasoned spliff in lifetime (3.0% - 27 students vs. 1.5% - 13 students) and in the past 30 days (0.9% - 8 students vs. 0.4% - 4 students).
- ❖ About 227 students (12.7%) reported easy/very easy to obtain seasoned spliff.

“Magic Mushrooms” (hallucinogens mushrooms, also known as “shrooms”):

- ❖ Overall, 2.2% (40 students) of all survey respondents has used magic mushrooms in their lifetime.
- ❖ Lifetime prevalence of magic mushrooms use ranges from 2.2% (10 students) for 9th year students to

2.2% (6 students) for 12th year students.

- ❖ Overall, only 0.6% (11 students) of all survey respondents had used magic mushrooms in the past 30 days.
- ❖ Current prevalence of magic mushrooms use by survey respondents is low, ranging from 0.6% (3 students) for 9th year students to 0.7% (2 students) for 12th year students.
- ❖ More males reported having used magic mushrooms in lifetime (3.4% - 30 students vs. 1.1% - 10 students) and in the past 30 days (0.7% - 6 students vs. 0.6% - 5 students).
- ❖ Students reported used magic mushrooms at *friend's house* and *social events*.
- ❖ The main sources of magic mushrooms reported were *friends* and *dealer*.
- ❖ About 16 students (0.9%) reported have used magic mushrooms only once.
- ❖ About 101 students (5.7%) reported easy/very easy to obtain magic mushrooms.



Chapter 3:
PROTECTIVE AND RISK FACTORS

3.1 Protective Factors

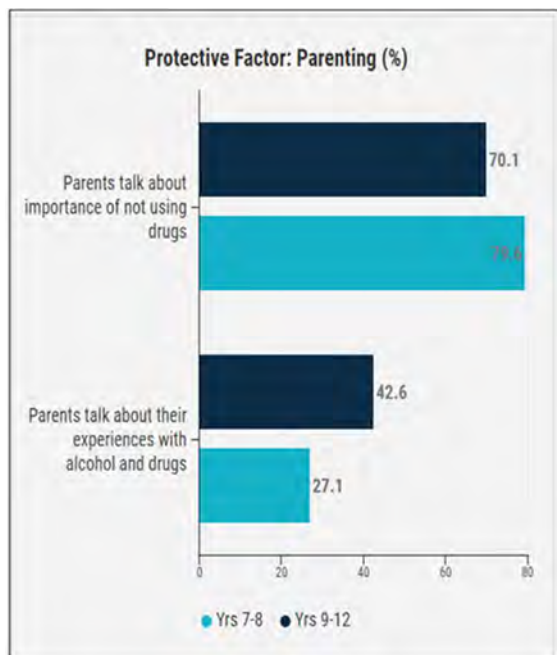
(Appendix A – Literature)

Parenting:

According to Figure 63, a great majority of students in the Cayman Islands reported that parents talk about the importance of not using drugs.

More students in years 9-12 (42.6%) compared with students in years 7-8 (27.1%) reported that their parents talk about their experiences with alcohol and other drugs when they were young.

Figure 63: Protective Factor: Parenting scale by Year Level



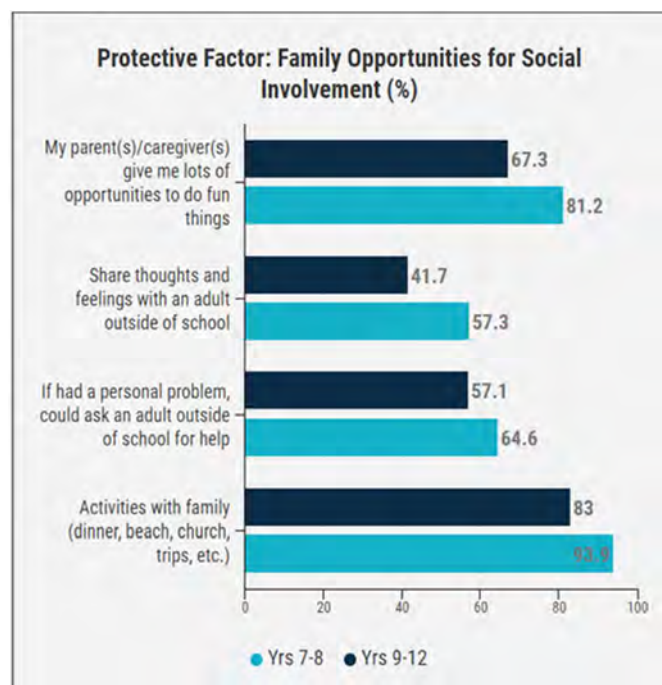
Family Opportunities for Social Involvement:

According to Figure 64, a great percentage of students reported family opportunities for prosocial involvement.

More students in years 7-8 (57.3%) than students in years 9-12 (41.7%) reported that they share their thoughts and feelings with an adult outside of school.

Once again, more students in years 7-8 (64.6%) than students in years 9-12 (57.1%) reported if they have a personal problem, they can ask an adult outside of school for help.

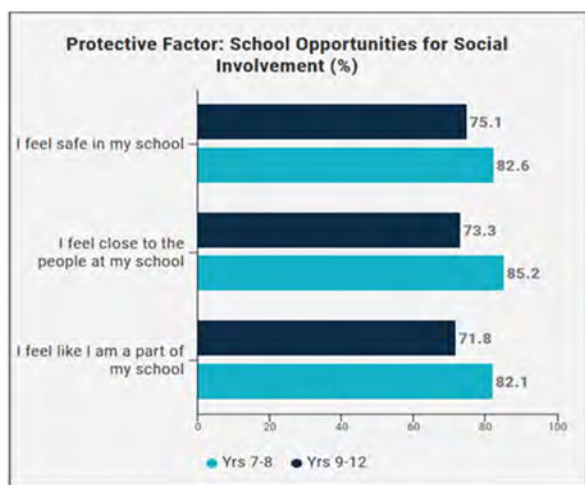
Figure 64: Protective Factor: Family opportunities for prosocial involvement by Year level



School Opportunities for Prosocial Involvement:

As represented in Figure 65, more students in years 7-8 than students in years 9-12 reported higher percentages in this protective factor, however, the great majority of the students reported school opportunities for prosocial involvement.

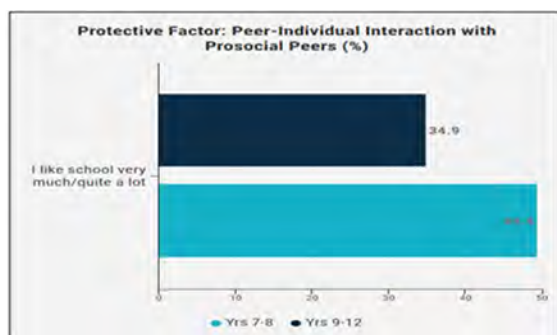
Figure 65: Protective Factor: School opportunities for prosocial involvement by Year level



Peer-Individual Interaction with Prosocial Peers:

Not too many students reported like school very much/quite a lot; however, students in years 7-8 (49.4%) reported like school very much/quite a lot than students in years 9-12 (34.9%) (see Figure 66).

Figure 66: Protective Factor: Peer-Individual Interaction with Prosocial Peers By Year Level



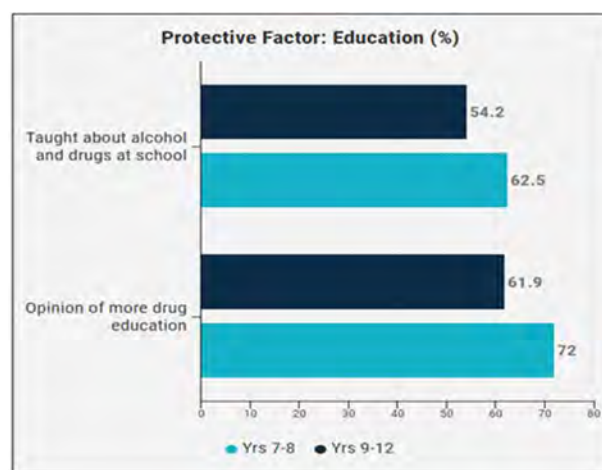
Education:

Majority of students (62.5% among students in years 7-8 and 54.2% among students in

years 9-12) reported that they have been taught about alcohol, tobacco or other drugs (see Figure 67).

Once again, the majority (72.0% among students in years 7-8 and 61.9% among students in years 9-12) were of the opinion that more education about alcohol and other drugs should be implemented in the schools (see Figure 67).

FIGURE 67: PROTECTIVE FACTOR: EDUCATION BY YEAR LEVEL

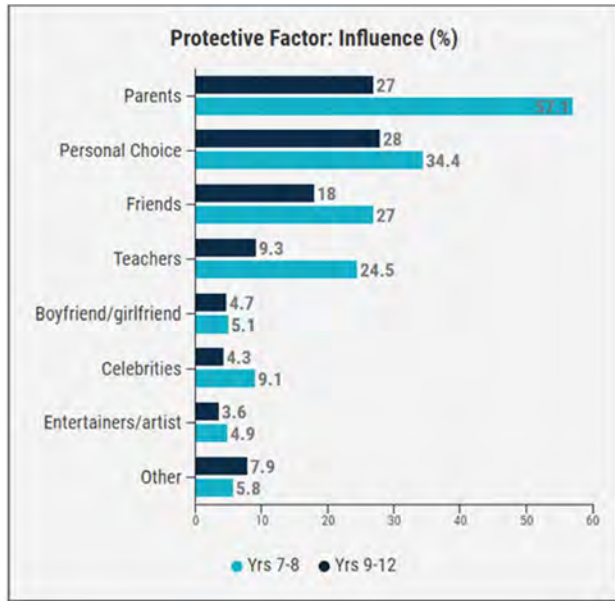


Influence:

According to Figure 68, *parents* represented the person who most influenced the students in their decision of not using any substance. Other persons that influenced in their decision were: *personal choice*, *friends*, and *teachers*.

In lower percentage, other persons influenced in their decision: *boyfriend/girlfriend*, *celebrities*, *entertainers/artists*, and *others* (religion believes, priest/pastor, coaches).

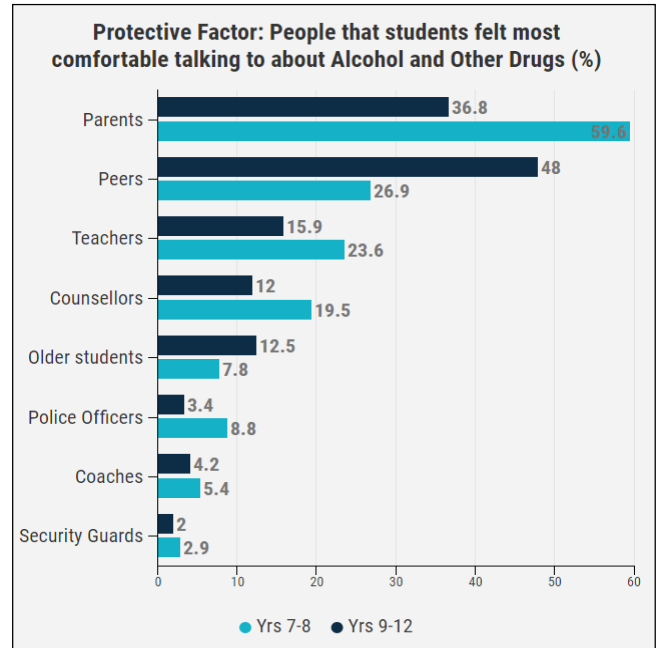
FIGURE 68: PROTECTIVE FACTOR: INFLUENCE BY YEAR LEVEL



People that Students felt most comfortable to talk about alcohol and other drugs:

Once again, parents were reported as the person who students felt most comfortable talking to about alcohol and other drugs. Other persons reported were: peers, teachers, counsellors, old students, police officers, coaches, and security guards (see Figure 69).

Figure 69: Protective Factor: People that students felt most comfortable talking to about alcohol and other drugs by Year Level



3.2 Risk Factors

(Appendix A – Literature)

Community Disorganisation:

A great percentage of students (41.6% in years 7-8 and 50.4% in years 9-12) reported that in their community, they see drugs being used.

More students in years 9-12 (39.3%) than students in years 7-8 (17.8%) reported their community they know where they can get drugs.

The great majority of students feel safe in their community/neighbourhood.

More students in years 9-12 (13.1%) than students in years 7-8 (5.7%) were approached by a stranger and attempted to give them or sell them drugs/alcohol (see Figure 70).

Perceived Availability of Drugs:

According to Figure 71, across year levels, perception of availability was more prevalent among students in years 9-12. More students in this year levels were reported to have easy/very easy access to this substances.

More students (31.2% in years 7-8 and 62.7% in years 9-12) reported availability of alcohol, followed by students that reported easy availability of cigarettes (20.0% in years 7-8 and 54.9% in years 9-12) and marijuana (16.5% in years 7-8 and 53.0% in years 9-12).

More than half of students (53.1%) in years 9-12 reported easy/very easy availability of electronic electronics.

During analysis categories of “easy” and “very easy” were collapsed for ease of reporting.

FIGURE 70: RISK FACTOR: COMMUNITY DISORGANISATION BY YEAR LEVEL

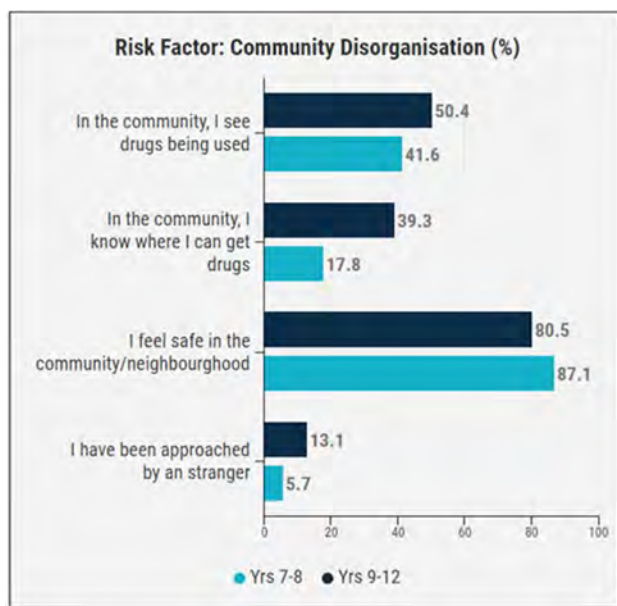
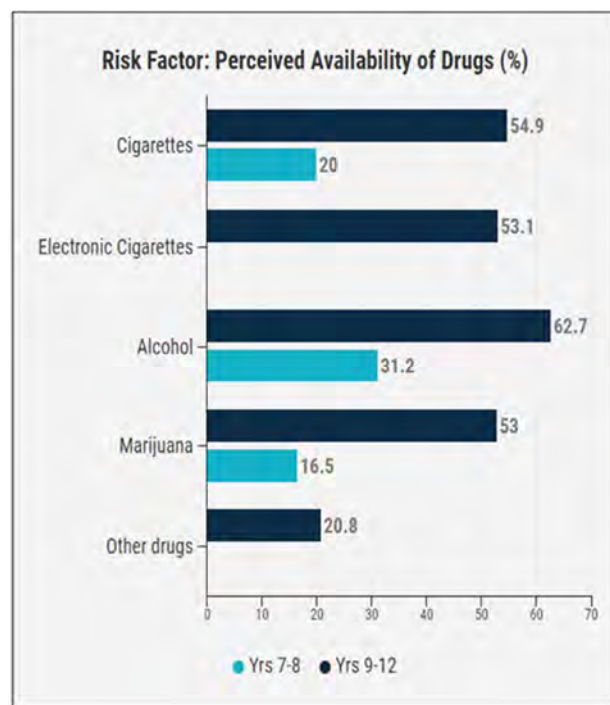


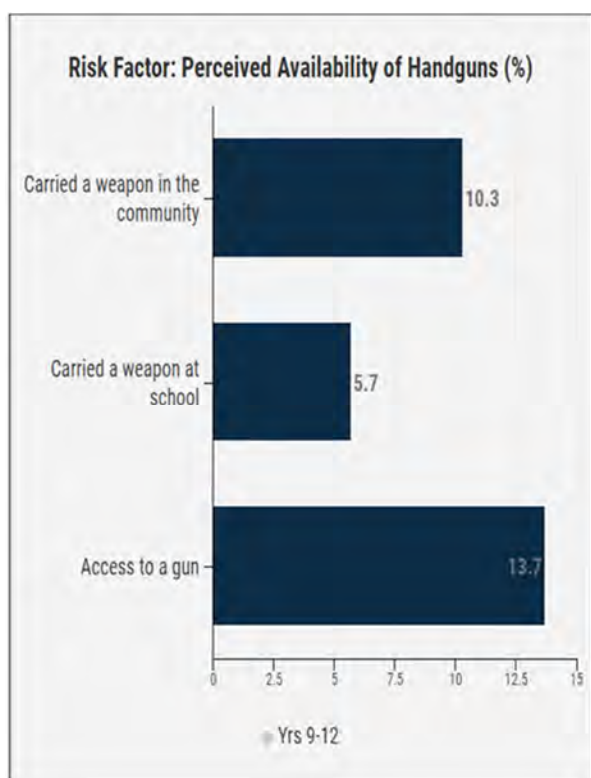
Figure 71: Risk Factor: Perceived Availability of Drugs by Year Level



Perceived Availability of Handguns:

Among students in years 9-12, a very low percentage of students reported carried weapons in the community (10.3%), carried weapons at the school (5.7%) and reported access to a gun (13.5%) (see Figure 72).

FIGURE 72: RISK FACTOR: PERCEIVED AVAILABILITY OF HANDGUNS BY YEAR LEVEL

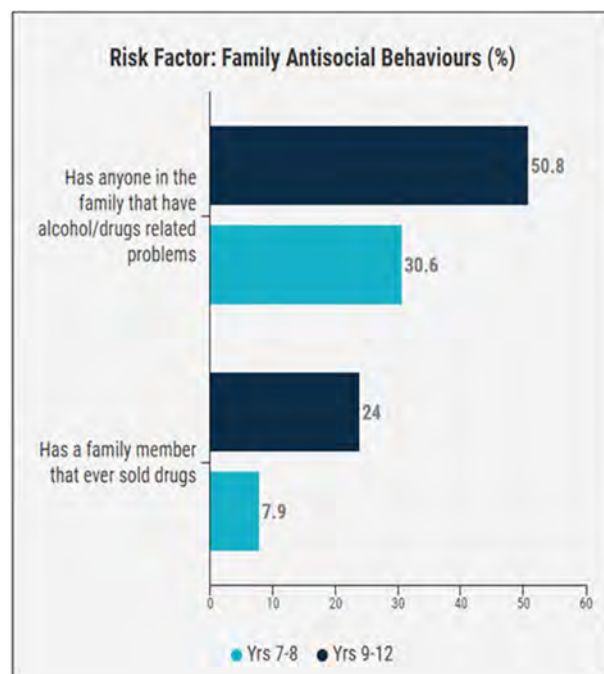


Family History of Antisocial Behaviour:

Among students in years 7-8, about one-third of the students reported that have a family member with an alcohol/drug related problems. Among students in years 9-12, half of the students (50.8%) reported that have a family member with an alcohol/drug related problem (see Figure 73).

A very small percentage (7.9%) of students in years 7-8 reported that a family member ever sold drugs. Almost a quarter of students in years 9-12 reported that a family member ever sold drugs (see Figure 73).

Figure 73: Risk Factor: Family History of Antisocial Behaviour Year Level

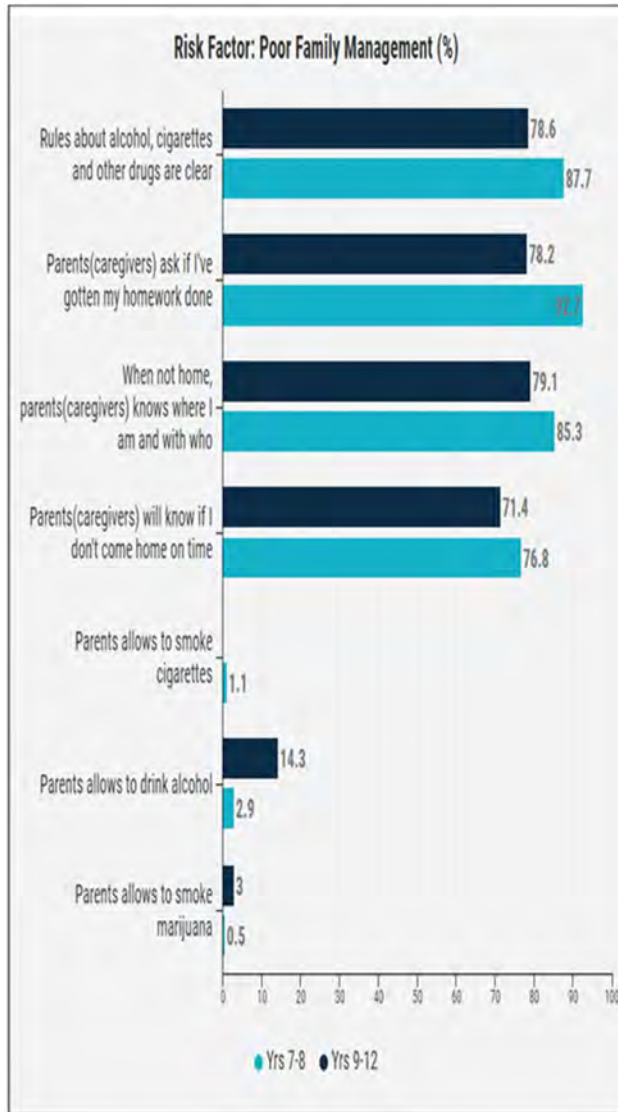


Poor Family Management:

A great percentage of students reported that the rules about alcohol, cigarettes and other drugs are clear; parents asked if homework has be done; parents/caregivers know where children are when not home and with whom; and parents(caregivers) will know if don't home on time (see Figure 74).

About consent of drug use, a very small percentage reported that parents allow them to smoke cigarettes and marijuana. More students in years 9-12 (14.3%) than students in years 7-8 (2.9%) reported that parents allow them to drink alcohol (see Figure 74).

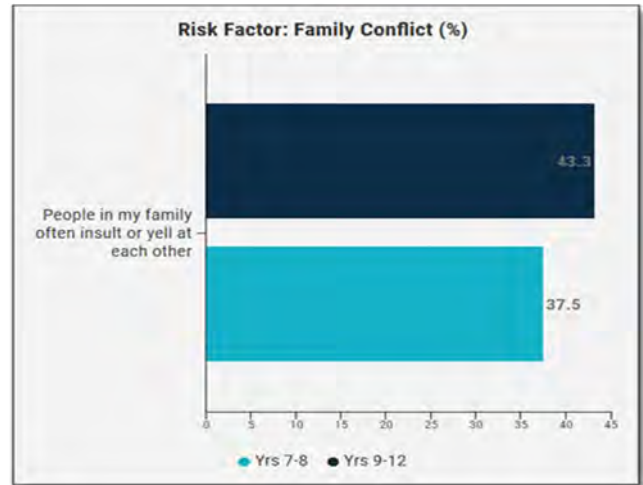
FIGURE 74: RISK FACTOR: POOR FAMILY MANAGEMENT YEAR LEVEL



Family Conflict:

A significant percentage of students in years 7-8 (37.5%) and students in year 9-12 (43.3%) reported that people at their family often insult or yell at each other (see Figure 75).

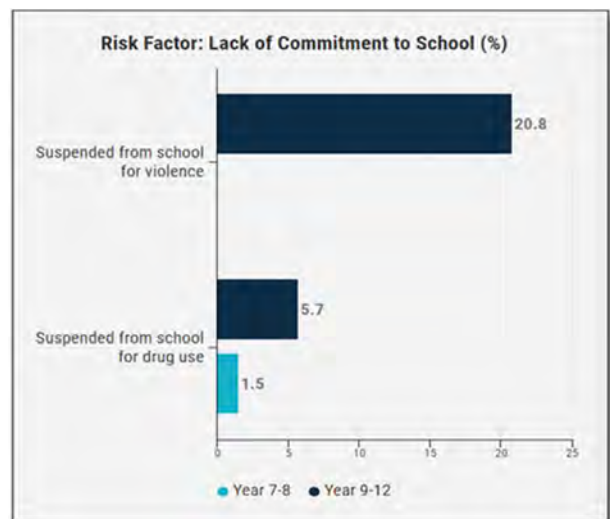
Figure 75: Risk Factor: Family Conflict Year Level



Lack of Commitment to School:

Among students in years 9-12, about one-fifth (20.8%) reported been suspended from school for violence. More students in years 9-12 (5.7%) than students in years 7-8 (1.5%) reported been suspended from school for drug use.

FIGURE 76: RISK FACTOR: LACK OF COMMITMENT TO SCHOOL BY YEAR LEVEL



Gang Involvement:

Among students in years 9-12, about one-tenth (11.1%) reported to belong to a group (gang, crew, etc).

The average age of first time belong to a group (gang, crew, etc.) was 14.1 yrs.

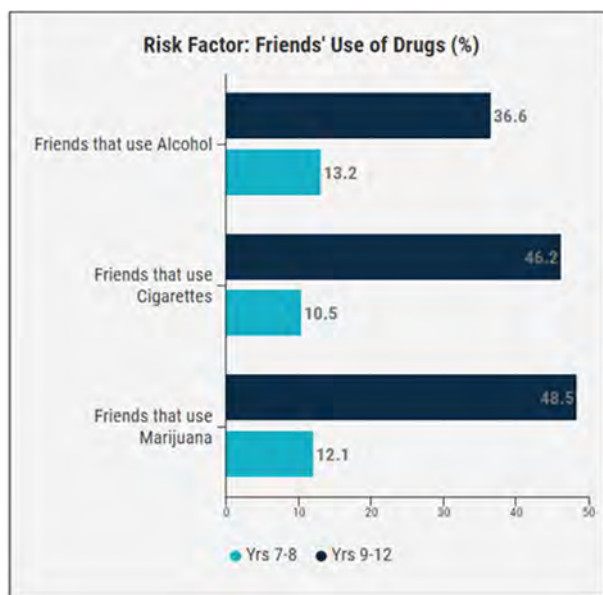
Friends' Use of Drugs:

More students in years 9-12 than students in years 7-8 reported associate with friends that use alcohol, cigarettes and marijuana (see Figure 77).

Among students in years 7-8, students reported having more friends that use marijuana, following by alcohol and cigarettes.

Among students in years 9-12, students reported having more friends that use marijuana, cigarettes and alcohol.

Figure 77: Risk Factor: Friend's Use of Drugs by Year Level



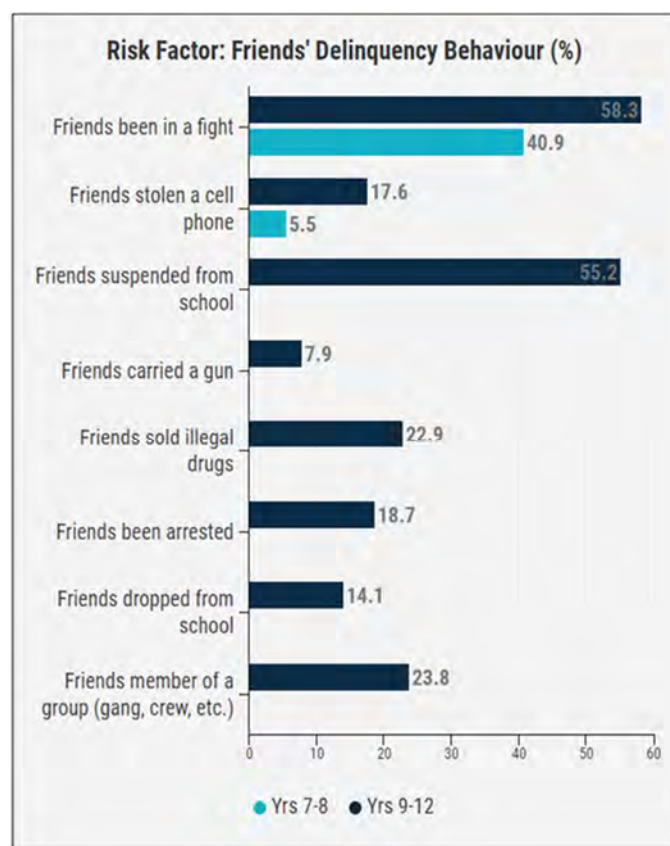
Friends' Delinquent Behaviour:

According to Figure 78, a great percentage of students (40.9% in years 7-8 and 58.3%) reported that have any friends that have been in a fight the last 12 months prior to the survey.

More students in years 9-12 (17.6%) than students in years 7-8 reported that any of their friends stole a cell phone.

Among students in years 9-12, more than one-fifth (23.8%) reported having friends that have been member of a group (gang, crew, etc.), more than one-fifth reported having friends that sold illegal drugs, 18.7% reported having friends that have been arrested, and 14.1% reported having friends that were dropped from school.

Figure 78: Risk Factor: Friend's Delinquency Behaviour by Year Level



Low Perceived Risk of Drug Use:

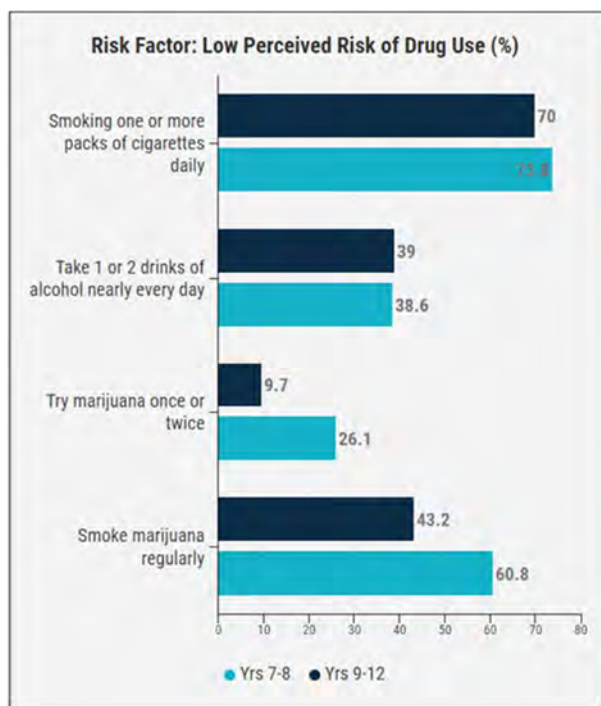
According to Figure 79, among all students, a small percentage of students in years 7-8 (26.1%) and a very small percentage of students in years 9-12 (9.7%) reported low perception of risk of marijuana. This means, that this students consider no risk/slight risk to use marijuana once or twice.

Among all students, a great percentage of students (73.8% in years 7-8 and 70.0% in years 9-12) reported very high perception of risk of smoking cigarettes.

Drinking alcohol nearly every day was reported with medium perception of risk, among students in years 7-8 (60.8%) and among students in years 9-12 (43.2%).

Smoke marijuana regularly was reported with high perception of risk, especially among students in years 7-8 compared with students in years 9-12 (60.8% vs. 43.2%).

Figure 79: Risk Factor: Low Perceived Risk of Drug Use by Year Level



Early Initiation of Drug Use:

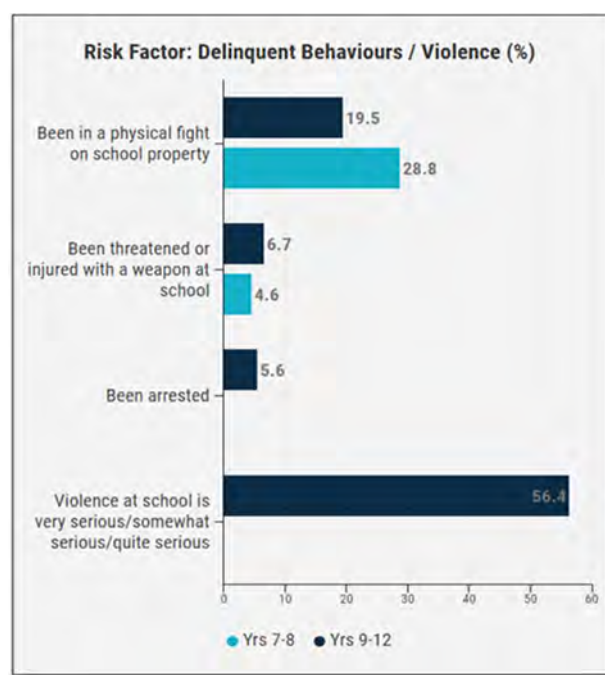
Initiation of substances started at 11 years old with alcohol, cigarettes, electronic cigarettes (among students in years 9-12), and marijuana. At a later age (13 years old), students started to use other drugs.

Delinquent Behaviours / Violence:

About one-third (28.8%) of students in years 7-8 and one-fifth (19.5%) of students in years 9-12 reported been at least once in a physical fight on school property, in the past 12 months. More students in years 9-12 (6.7%) than students in years 7-8 (4.6%) reported been threatened or injured with a weapon on school property, in the last 12 months (see Figure 80).

Among students in years 9-12, more than half of the students (56.4%) reported that violence in their school was very serious/somewhat serious/quite serious. A very small percentage (5.6%) reported been arrested (see Figure 80).

FIGURE 80: RISK FACTOR: DELINQUENT BEHAVIOURS/VIOLENCE BY YEAR LEVEL



Second Hand Effects:

Drinking and driving or smoking marijuana and driving can cause devastated consequences in the society. More statistics around the world show the negative effect of the combination of substances.

The risk factor **Second Hand Effects** is measured by a single factor using two survey items:

- ❖ In the past 12 months, how often did you ride in a vehicle driven by someone who had been drinking alcohol?
- ❖ In the past 12 months, how often did you ride in a vehicle driven by someone who had been using marijuana?

More students in years 9-12 (42.9%) than students in years 7-8 (22.9%) reported ride in a vehicle driven by someone who had been drinking alcohol (see Figure 81).

More students in years 9-12 (36.2%) than students in years 7-8 (7.6%) reported ride in a vehicle driven by someone who had been using marijuana (see Figure 81).

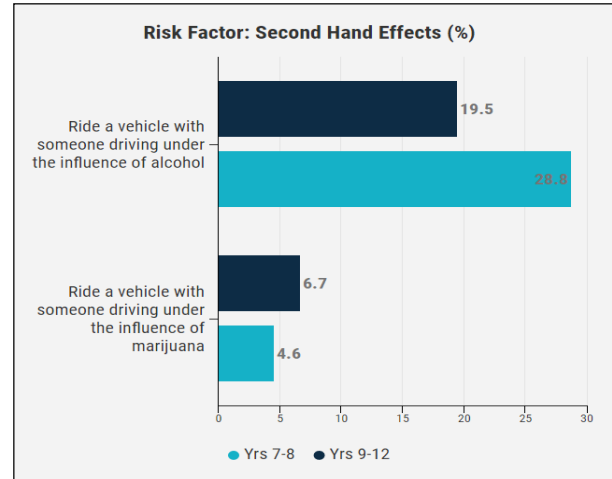


Figure 81: Risk Factor: Second Hand Effects by Year Level



The Cayman Islands Student Drug Use Survey (CISDUS) show the effects of the consumption of legal and illegal drugs among the students from year 7th to 12th from all public and private schools in Grand Cayman and Cayman Brac.

The results of this cycle of CISDUS provide indicators to measure the prevalence of use of legal and illegal drugs, risk perception about drug use, availability to obtain drugs and easy access of drugs in schools and the community, preferences of consumption, sources, early onset and frequency of use.

This type of study provides an opportunity to develop a clear picture regarding the extent and characteristics of the use/abuse and misuse of psychoactive substances, which will guide the definition and development of programmes, plans and strategies in the field of demand reduction for the children and youth of the Cayman Islands. The methodology used in the study allows comparison with other studies in the region and in North America that have administered this type of research among the school population.

The results of the survey as described throughout this report include the following findings:

In the Cayman Islands, the higher prevalence (lifetime, annual and current) of consumption of psychoactive substances are concentrated in the use of legal substances as alcohol and in lower proportions, tobacco (electronic

cigarettes and cigarettes). A considerable proportion of students (about 42%) reported consuming alcoholic beverages during the last 12 months prior to the survey; about 25% reported consuming alcohol during the last 30 days prior to the survey. About 9% of the students reported using tobacco in the 12-month period before the survey and about 25% of students in years 9-12 reported using electronic cigarettes in the last 12 months period.

In terms of illegal drugs, the Cayman Islands like many other countries worldwide, reports ganja (marijuana) as the most widely used drug by adults and youth. The CISDUS survey and report demonstrate that ganja is the most preferred drug by students of schools nationwide with 4.1% among students in years 7-8 and 26.7% among students in years 9-12 reported having used marijuana in the 12-months before the survey.

Among gender, females reported higher prevalence of alcohol, cigarettes, marijuana and inhalants. Males reported a higher prevalence of binge drinking, energy drinks, electronic cigarettes and tranquilizers.

The survey also revealed the easy access to drugs (especially alcohol, cigarettes, electronic cigarettes, inhalants and energy drinks) with the main source of access reported as *friends*.

Findings in this report showed that there has been an increase in illicit drug use during lifetime, annual and current prevalence when compared with the previous CISDUS conducted in 2014.

Despite these statistics, just more than half (about 54%: 81.3% of students in years 7-8 and 27.8% of students in years 9-12) of the students in the Cayman Islands reported **NOT** having used any legal or illegal drug/substance. It is important to support these students who are making and maintaining healthy lifestyle choices. These healthy lifestyles choices may be attributed to

several factors, but they can certainly be maintained by implementing or strengthening programmes or policies including: a strong prevention education programme included in the curriculum, a comprehensive drug use reduction strategy, media messages about the risk of consuming not just the illegal drugs but also the legal drugs, more extracurricular activities and providing more counselling and appropriate interventions for those students that are already affected by drugs.

Recommendations:

❖ Although most students continue to choose not to use alcohol, tobacco and drugs, it is necessary to implement in the school curriculum programmes to focus on reducing risk behaviours, such as binge drinking, driving while intoxicated, and being a passenger with a driver who was using alcohol or drugs.

- Resource: National Drug Council – Drug Education Prevention Programmes.

❖ Public education about the potential hazards associate with the electronic cigarettes. These devices seem to be increasing in popularity among youth.

- Resource: National Drug Council – Drug Education Prevention Programmes

❖ Prevention programmes should address the use and abuse of alcohol, tobacco and other drugs, and include the abuse of medication to “get high” by educating youth and parents about risk of harm associated with the use of these substances.

- Resources:
 - National Drug Council – Drug Education Prevention Programmes.

- National Drug Council – PTA Meetings.
- National Drug Council – “Parents as Preventers” Programme.

❖ Clear Drug Policies at your school. Schools need to reflect upon how they might provide for the needs of their student cohort and respond appropriately to what are sometimes sensitive and emotional issues.

- Resource: National Drug Council – Development of a comprehensive Drug Policy for schools, according to their necessities.

❖ Engage both teachers and parents in developing strategies of the institution in the quest for the prevention of alcohol, tobacco and drug use and eventual reintegration of the students that have used these substances.

❖ The Ministry of Education should prescribe the strategies/actions for drug demand reduction. These should be articulated in the National Anti-Drug Strategy Plan.

Location of Referrals for further assistance:

Counselling:

- ❖ Department of Counselling Services – 949-8789
- ❖ Rayle Roberts & Associates – 946-9389
- ❖ The Wellness Centre – 949-9355
- ❖ Infinite Mindcare – 926-0882

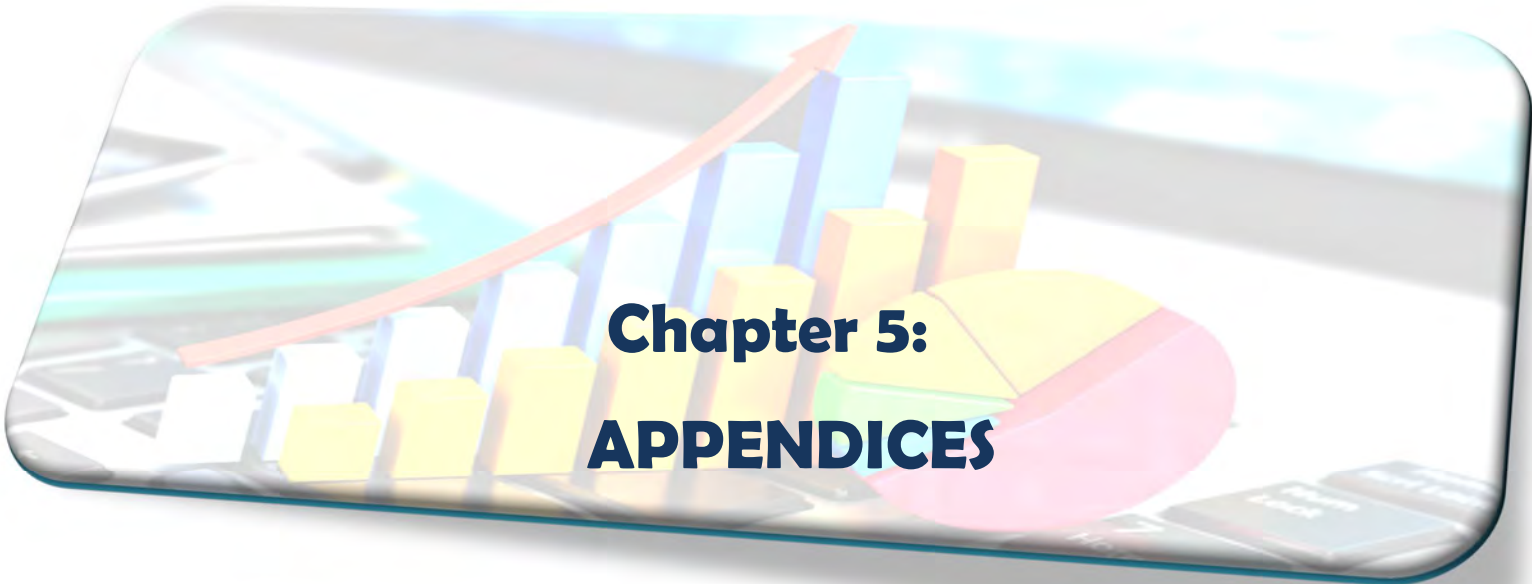
Offer motivating *extracurricular activities* for students such as; sports, arts, theatre, photography, etc.

Resources:

- ❖ National Drug Council – Youth to Youth Programme (Y2Y)
- ❖ YMCA
- ❖ Cadet Corps

- ❖ Sports programmes
- ❖ Churches programmes for youth

In spite of the acknowledged limitations in the surveys, there were findings that increased the confidence placed in the surveys' results. These findings were consistent with and supported what has been observed elsewhere and what would not be seen if the students had been giving random answers or consistently dishonest answers. Consequently, authorities, schools and the public in general should view this report as a valuable piece of literature that can be of great use in the efforts to plan, implement and evaluate drug prevention programs and projects.



APPENDIX A

TABLE A: SAMPLE CHARACTERISTICS

	1998		2000		2002		2006		2010		2012		2014		2016	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
	Interviewed		Interviewed		Interviewed		Interviewed		Interviewed		Interviewed		Interviewed		Interviewed	
Total	1946	86.0	2186	94.0	2187	88.0	2480	84.0	2612	87.0	2928	89.0	2510	70.0	2982	85.5
Male	952	48.9	1063	48.9	1036	48.5	1228	49.7	1262	48.3	1422	48.6	1211	48.2	1449	49.0
Female	982	50.5	1111	51.1	1148	51.5	1242	50.3	1338	51.2	1453	49.6	1234	49.2	1492	50.9
Grade 7	359	18.4	409	18.7	429	19.6	427	17.3	495	19.0	590	20.2	478	19.0	582	19.5
Grade 8	376	19.3	378	17.3	420	19.2	432	17.5	454	17.4	527	18.0	515	20.5	593	19.8
Grade 9	329	16.9	361	16.5	340	15.5	452	18.3	453	17.3	529	18.0	509	20.3	462	15.5
Grade 10	349	17.9	372	17.0	368	16.8	438	17.8	446	17.1	510	17.4	331	13.2	548	19.3
Grade 11	300	15.4	369	16.9	321	14.7	405	16.4	387	14.8	435	14.9	350	13.9	511	17.1
Grade 12	228	11.7	297	13.6	309	14.1	313	12.7	377	14.4	238	8.1	259	10.2	279	9.3
West Bay	422	21.7	524	24.1	505	23.1	562	22.8	565	21.6	625	21.3	591	23.5	667	22.5
George Town	866	44.5	941	43.3	886	42.9	990	40.2	982	37.6	1123	38.4	940	37.5	1113	38.2
Bodden Town	390	20.0	423	19.5	481	20.6	562	22.8	658	25.2	771	26.3	608	24.2	874	29.4
East End	71	3.6	79	3.6	79	3.7	99	4.0	96	3.7	93	3.2	67	2.7	95	3.1
North Side	76	3.9	77	3.5	75	3.6	84	3.4	101	3.9	103	3.5	92	3.7	104	3.4
Cayman Brac	110	5.7	127	5.8	140	6.0	168	6.8	149	5.7	142	4.8	99	3.9	100	3.3

LITERATURE

Overview of Alcohol:

Alcohol, including beer, wine, and hard liquor, is the drug (substance) most often used by adolescents today. Research and similar surveys in the past have shown the pervasiveness of alcohol use in high schools³. In comparison, the use of cigarette or marijuana is less than half as prevalent as alcohol use. Taking in consideration the national pattern, it is not unexpected that alcohol is the drug of choice among the students in the Cayman Islands. Furthermore, the high prevalence of alcohol use among students promotes other risk behaviours such as binge drinking and drinking and driving. High alcohol use prevalence can also lead to negative outcomes such as poor school performance, violence and others. As with alcohol use in general tends to become more pervasive as students grow older.

³ L. D. Johnston, P. M. O'Malley, J. G. Bachman, & J. E. Schulenberg. (2012). Monitoring the Future national results on adolescent drug use: Overview of key findings, 2016 Ann Arbor: Institute for Social Research, The University of Michigan. <http://www.monitoringthefuture.org//pubs/monographs/mtf-overview2016.pdf>

Overview of Tobacco:

Over the years, research had identified nicotine as the main addictive ingredient in cigarettes. Research suggests that children and teens may be especially sensitive to nicotine, making it easier for them to become addicted. The younger smokers are when they start, the more likely they are to become addicted. Public health researchers claim that cigarette smoking is the leading cause of preventable deaths in the United States. After alcohol, tobacco or cigarettes is the most commonly used drug among adolescents, but its consumption has been on the decline since 2010 in the Cayman Islands, according with CISDUS.

Overview of Electronic Cigarettes:

An electronic cigarette (e-cigarette) is a battery-powered cigarette-shaped canister used to stimulate the sensation of smoking. A liquid-filter cartridge is heated and releases vapour when inhaled. The vapour resembles smoke. Some e-cigarettes contain nicotine, and some are flavoured. E-cigarettes are approved for sale in the Cayman Islands and to adults older than 18 years old.

Facts electronic cigarettes

- ❖ Currently, teens are more likely to use electronic cigarettes than cigarettes.
- ❖ Teen electronic cigarette user is more likely to start smoking.
- ❖ Perception of risk is extremely low. Manufacturers don't have to report e-cig ingredients, so users don't know what's actually in them.
- ❖ Teens are more exposure to electronic cigarettes (ads, social media, tv, movies, etc.)

Overview of Marijuana:

While it is clear that in many countries of the world marijuana or cannabis use is not as popular as alcohol and tobacco it is usually the first illegal drug tried, and is the most widely used illegal drug, used by teens around the world⁴. The average age of first use in many Western countries is around 14-15 years old. The average age of use among developing countries seems to be a bit older. While it is true that boys are more likely to use marijuana, alcohol, and tobacco than girls, the gap is closing in many countries. Further, street youths are more likely to use marijuana and more heavily than “mainstream” youth. A review of addiction studies show that use of cannabis in youth is related to one or more of the following: truancy, low self-esteem, delinquent behaviours (stealing, vandalism, etc.), having delinquent friends, hanging out on the streets in boredom, and other behavioural/mental health issues⁵.

⁴ Center for Behavioral Health Statistics and Quality. (2015). Behavioral health trends in the United States: Results from the 2014 National Survey on Drug Use and Health (HHS Publication No. SMA 15-4927, NSDUH Series H-50). Rockville, MD: Substance Abuse and Mental Health Services Administration. https://www.samhsa.gov/data/sites/default/files/report_2121/ShortReport-2121.html

⁵ I. P. Spruit (Ed.). (2002). Cannabis 2002 Report. p. 20. Ministry of Public Health of Belgium. http://www.cpha.ca/uploads/portals/substance/Cannabis_report_2002.pdf (accessed January 28, 2012).

Overview of Inhalants:

Inhalants are household products which are either “sniffed” through the nose or “huffed” through the mouth, e.g., paint, glue, diesel fuel. The effects are similar to getting drunk on alcohol but some experience something like hallucinations.⁶ Because many inhalants can be found around the house, people often don’t realize that inhaling their fumes, even just once, can be very harmful to the brain and body and can lead to death. In fact, the chemicals found in these products can change the way the brain works and cause other problems in the body. The deliberate misuse of volatile substances poses a poorly recognized risk for considerable morbidity and mortality in adolescent populations worldwide. Adolescents are often unaware of the health threats posed by inhalation of solvents. Inhalation can result in serious organ system dysfunction or even sudden death.

Overview of Tranquilizers:

Tranquilizers are defined as a drug that calms and relieves anxiety. These drugs slow normal brain function, which may result in slurred speech, shallow breathing, sluggishness, fatigue, disorientation and lack of coordination or dilated pupils. Higher doses cause impaired memory, judgment and coordination; irritability; paranoia; and thoughts of suicide. Some people can become agitated or aggressive. Using prescription sedatives and tranquilizers with other substances — particularly alcohol — can slow breathing, or slow both the heart and respiration, and possibly lead to death.

Continued use can lead to physical dependence and — when use is reduced or stopped abruptly — withdrawal symptoms may occur. Because all prescription sedatives and tranquilizers work by slowing the brain’s activity, when a person stops taking them, there can be a rebound effect, possibly leading to seizures and other harmful consequences. Tolerance to the drug’s effects can also occur, meaning that larger doses are needed to achieve similar effects as those experienced initially. This may lead users to take higher doses and risk the occurrence of an overdose. Prescription sedatives and tranquilizers can become addictive, meaning a person continues to take these drugs despite their harmful consequences.

Despite the small percentage of students that reported use of tranquilizers, it is notable an increase of number of users.

Overview Energy Drinks:

Energy drinks are widely promoted as products that increase alertness and enhance physical and mental performance. Marketing from popular brands such as Red Bull, Monster, SoBe, 5-hours-energy, targeted at young people has been quite effective. Also increasing in popularity is the practice of mixing alcoholic beverages with energy drinks. Research has shown that individuals who have a high frequency of energy drink consumption are at increased risk of engaging in

⁶ World Health Organization. (1999). Volatile solvents abuse: A global overview. Substance Abuse Department Geneva, Switzerland: World Health Organization. p. 54. http://www.unodc.org/pdf/youthnet/trends_five.pdf

episodes of heavy drinking and developing alcohol dependence⁷. In addition, research has highlighted the dangers of combining energy drinks with alcohol⁸. In the Cayman Islands, research has been recent (since 2014) to determine more specific patterns of the consumption of energy drinks, among this target population; however, it is clear that the trends are increasing and more young people are using this drinks. The subsequent sections will show the prevalence for both lifetime and current (last 30 days) use, frequency of energy drink use, situations for which energy drinks are used, and energy drinks mixed with alcohol.

Protective Factors:

Protective factors are characteristics that are known to decrease the likelihood that a student will engage in problem behaviours. They encompass family, social, psychological, and behavioural characteristics that can provide a buffer for young people and mitigate the effects of risk factors while promoting positive youth development. These factors fall into three categories – individual characteristics, bonding, healthy beliefs and clear standards. For example, bonding to parents reduces the risk of an adolescent engaging in problem behaviours. To develop these healthy positive behaviours, young people must be immersed in environments that consistently communicate healthy beliefs and clear standards for behaviour; that foster the development of strong bonds to members of their family, school, and community; and that recognise the individual characteristics of each young person (Social Development Strategy).

Below, each protective factor is described and the results are presented. Higher percentages on the protective factor are preferred as they indicate greater levels of protection.

Parenting:

Parents were selected as the most influence persons in the decision of no using drugs among students in the Cayman Islands. It is clear that nurturing parents, stable family relationships, household rules and child monitoring, and caring adults will buffer students from use substances as alcohol tobacco and others.

The protective factor **Parenting** was measured by the following two survey items:

- ❖ Do you parents talk to you about the importance of not using alcohol, cigarettes and other drugs?
- ❖ Have you parents ever spoken to you about their experiences with alcohol and other drugs when they were your age?

Family Opportunities for Social Involvement:

When students have the opportunity to make meaningful contributions to their families, they are less likely to get involved in risky behaviours. By having the opportunity to make a contribution,

⁷ A. M. Arria, K. M. Caldeira, S. J. Kasperski, K. B. Vincent, R. R. Griffiths, & K. E. O'Grady. (2011). Energy Drink Consumption and Increased Risk for Alcohol Dependence. *Alcoholism: Clinical and Experimental Research*, 35, 365–375. doi: 10.1111/j.1530-0277.2010.01352.x. p. 365. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3058776/pdf/nihms-240328.pdf>

⁸ A. Roemer, T. Stockwell. Alcohol Mixed with Energy Drinks and Risk Injury: A Systematic Review. Centre from Addictions Research of BC, University of Victoria, British Columbia, Canada. <http://www.jsad.com/doi/pdf/10.15288/jsad.2017.78.175>

students feel as if they are an integral part of their families. These strong bonds allow students to adopt the family norms, which can protect students from risk. For instance, children whose parents have high expectations for their school success and achievement are less likely to drop out of school.

The protective factor **Family Opportunities for Prosocial Involvement** was measured by the following four survey items:

- ❖ My parent(s) or caregiver(s) give me lots of opportunities to do fun things with them.
- ❖ Do you feel share your thoughts and feelings with an adult outside of school?
- ❖ If I had a personal problem, I could ask an adult outside of school for help.
- ❖ Are there activities you and your family do together (dinner, beach, church, trips, etc.)?

School Opportunities for Prosocial Involvement:

Giving students opportunities to participate in important activities at school helps to reduce the likelihood that they will become involved in problem behaviours. Students who feel they have opportunities to be involved are more likely to contribute to school activity. This bond can protect a student from engaging in behaviours that violate socially accepted standards.

The protective factor **School Opportunities for Prosocial Involvement** was measured by the following three survey items:

- ❖ I feel safe in my school.
- ❖ I feel close to the people at my school.
- ❖ I feel like I am a part of my school.

Peer-Individual Interaction with Prosocial Peers:

Students who feel they have opportunities to be involved are more likely to contribute to school activity. These students are likely to avoid negative behaviours and delay use of alcohol and drugs. This bond can protect a student from engaging in behaviours that violate socially accepted standards.

The protective factor **Peer-Individual Interaction with Prosocial Peers** was measured by the following survey item:

- ❖ How do you feel about going to school? Like school very much/quite a lot.

Education:

Prevention programs can be designed to intervene as early as preschool to address risk factors for drug abuse, such as aggressive behavior, poor social skills, and academic difficulties.

Prevention programs for elementary school children should target improving academic and social-emotional learning to address risk factors for drug abuse, such as early aggression, academic failure, and school dropout. Education should focus on the following skills: self-control; emotional awareness; communication; social problem-solving; and academic support, especially in reading.

Prevention programs for middle or junior high and high school students should increase academic and social competence with the following skills: study habits and academic support; communication; peer relationships; self-efficacy and assertiveness; drug resistance skills; reinforcement of anti-drug attitudes; and strengthening of personal commitments against drug abuse ⁹.

The protective factor **Education** was measured by the following two survey item:

- ❖ During the current school year (since September 2015) have you been taught about alcohol, tobacco or other drugs?
- ❖ Should be more education classes about alcohol and other drugs at your school?

Influence:

The decision of drug use can be influenced for several factors, including by the persons that are around the youth. Young people might begin drug use as part of adolescent experimentation. Or perhaps they're introduced to alcohol and other drugs in a family context where drug use is normal. Living in environments where drug use is an accepted part of everyday life significantly increases the likelihood of a young person developing a problem with drugs.

A great majority of students in years 7-8 (81.3%) and a notable percentage of students in years 9-12 (27.8%) reported no use of any substance.

The protective factor **Influence** was measured by the following survey item:

- ❖ If you have never used any substance, who would you say has the most influence on your decision to not try alcohol, tobacco or other drugs?

People that Students felt most comfortable to talk about alcohol and other drugs:

As influence is a great factor in the decision of using/not using substances, feel comfortable with someone that can talk about alcohol and other drugs will also influence in the decision of substances use.

The protective factor **People that students felt most comfortable talking to about alcohol and other drugs** was measured by the following survey item:

- ❖ Who do feel most comfortable talking to about alcohol and other drugs?

Risk Factors:

Risk factors are characteristics in the community, family, school, peer, and individual's environments that are known to increase the likelihood of a student engaging in one or more problem behaviours (substance abuse, depression and anxiety, delinquency, teen pregnancy, school

⁹ NIDA, Preventing Drug Use among Children and Adolescents (In Brief), October 2003.
<https://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents-in-brief/prevention-principles>

dropout, or violence). For example, a risk factor in the community environment is the existence of laws and norms favourable to drug use, which can affect the likelihood that a young person will try alcohol, tobacco, or other drugs. In those communities where there is acceptance or tolerance of drug use, students are more likely to engage in alcohol, tobacco, and other drug use.

Community Disorganisation:

The Community Disorganisation factor pertains to students' perceptions of their communities' appearance and other external attributes. The Community Disorganisation factor was developed to measure a component of the risk factor. Low Neighbourhood Attachment and Community Disorganisation.

This risk factor is measured by four survey items that describe the neighbourhood in which the student resides. These items include:

- ❖ In your community/neighbourhood/ district, do you see drugs being used?
- ❖ In your community/neighbourhood/ district, do you know where you can get drugs?
- ❖ Do you feel safe in your community/ neighbourhood/district?
- ❖ Have you ever been approached by a stranger and attempted to give you or sell you drugs/alcohol?

Perceived Availability of Drugs:

The perceived availability of alcohol, tobacco, and other drugs in a community is directly related to the incidence of delinquent behaviour. For example, in schools where children believe that drugs are more available, a higher rate of drug use occurs.

The risk factor **Perceived Availability of Drugs** was developed to measure a component of the risk factor *Availability of Drugs*. This factor is measured by five survey items:

- ❖ How easy or difficult would it be for you to get cigarettes if you wanted some?
- ❖ How easy or difficult would it be for you to get electronic cigarettes if you wanted some?
- ❖ How easy or difficult would it be for you to get alcohol if you wanted some?
- ❖ How easy or difficult would it be for you to get marijuana if you wanted some?
- ❖ How easy or difficult would it be for you to get other drugs if you wanted some?

Perceived Availability of Handguns:

While a few studies report no association between firearm availability and violence, more studies do show a relationship. Given the lethality of firearms, the greater likelihood of conflict escalating into homicide when guns are present, and the strong association between the availability of guns and homicide rates, the availability of handguns is included in this survey among students in years 9-12.

The **Perceived Availability of Handguns** factor was developed to measure a component of the risk factor *Availability of Handguns*. This factor is measured using three survey items:

- ❖ Have you ever carried a weapon such as a gun (any weapon which fires bullets or shells; this includes hunting guns, fake guns, spear gun, pop gun, BB/pellet guns), knife or club in the community?
- ❖ Have you ever carried a weapon such as a gun (any weapon which fires bullets or shells; this includes hunting guns, fake guns, spear gun, pop gun, BB/pellet guns), knife or club to school?
- ❖ Do you have access to a gun?

Family History of Antisocial Behaviour:

If children are raised in a family where a history of addiction to alcohol or other drugs exists, the risk of having alcohol or other drug problems themselves increases. If children are born or raised in a family where criminal activity is present, their risk for delinquency increases. Similarly, children who are born to teenage mothers are more likely to become teen parents, and children of dropouts are more likely to drop out of school themselves.

Children whose parents engage in violent behaviour inside or outside the home are at greater risk for exhibiting violent behaviour themselves.

Students' perceptions of their families' behaviour and standards regarding drug use and other antisocial behaviours are measured by the survey.

The **Family History of Antisocial Behaviour** factor was developed to measure a component of the risk factor *Family History of Problem Behaviour*. This factor is measured by two survey items:

- ❖ Has anyone in your family ever had an alcohol or drug problem?
- ❖ Has a family member ever sold drugs?

Poor Family Management:

The risk factor Poor Family Management measures two components of family life: "poor family supervision", which is defined as parents failing to supervise and monitor their children, and "poor family discipline", which is defined as parents failing to communicate clear expectations for behaviour and giving excessively severe, harsh or inconsistent punishment. Children who experience poor family supervision and poor family discipline are at higher risk of developing problems with drug use, delinquency, violence, and school dropout.

The risk factor **Poor Family Management** was developed to measure a component of the risk factor *Family Management Problems*.

This factor is measured by the following seven survey items:

- ❖ The rules about alcohol, cigarettes and other drugs in my family are clear.
- ❖ My parent(s) or caregiver(s) ask if I've gotten my homework done.
- ❖ When I am not home, one of my parent(s)/ caregiver(s) knows where I am and who I am.
- ❖ Do you parents (or guardians) allow you and your friends smoke cigarettes at your home while you are having a party or get-together?

- ❖ Do you parents (or guardians) allow you and your friends drink alcohol at your home while you are having a party or get-together?
- ❖ Do you parents (or guardians) allow you and your friends smoke marijuana at your home while you are having a party or get-together?

Family Conflict:

Bonding between family members, especially between children and their parents or guardians, is a key component in the development of positive social norms. High levels of family conflict interfere with the development of these bonds, and increase the likelihood that young people will engage in illegal drug use and other forms of delinquent behaviour.

The risk factor **Family Conflict** is measured by a single factor one three survey items:

- ❖ People in my family often insult or yell at each other.

Lack of Commitment to School:

Lack of Commitment to School assesses a student's general feelings about his or her schooling. Elevated findings for this risk factor scale can suggest that students feel less attached to, or connected with, their classes and school environment. Lack of commitment to school means the child has ceased to see the role of student as a positive one. Young people who have lost this commitment to school are at higher risk for a variety of problem behaviours.

The risk factor **Lack of Commitment to School** is measured by a single factor using two survey items:

- ❖ Have you ever been suspended from school for violence?
- ❖ Have you ever been suspended from school for drug use?

Gang Involvement:

Gangs have long been associated with crime, violence, and other antisocial behaviours. Evidence suggests that gangs can contribute to antisocial behaviour beyond simple association with delinquent peers.

The risk factor **Gang Involvement** is measured by a single factor using one survey items:

- ❖ Have you ever belong to a group (gang, crew, etc)?
- ❖ How old were you when you first belong to a group (gang, crew, etc.)?

Friends' Use of Drugs:

Young people who associate with peers who engage in substance use are much more likely to engage in it themselves. This is one of the most consistent predictors identified by research. Even when young people come from well-managed families and do not experience other risk factors, spending time with peers who use drugs greatly increases a youth's risk of becoming involved in such behaviour.

The **Friends' Use of Drugs** factor was developed to measure a component of the risk factor *Friends Who Engage in the Problem Behaviour*. This factor is measured by three survey items:

- ❖ In the past 12 months, have any of your friends tried alcohol when their parents didn't know about it?
- ❖ In the past 12 months, have any of your friends smoked cigarettes?
- ❖ In the past 12 months, have any of your friends used marijuana?

Friends' Delinquent Behaviour:

Young people who associate with peers who engage in delinquent behaviour are much more likely to engage in delinquent behaviour themselves. This is one of the most consistent predictors identified by research. Even when young people come from well-managed families and do not experience other risk factors, spending time with peers who engage in delinquent behaviour greatly increases the risk of their becoming involved in delinquent behaviour.

The **Friends' Delinquent Behaviour** factor was developed to measure a component of the risk factor *Friends Who Engage in the Problem Behaviour*. This factor is measured by eight survey items:

- ❖ In the past 12 months, have any of you friends been in a fight?
- ❖ In the past 12 months, have any of you friends stolen a cell phone?
- ❖ In the past 12 months, have any of your friends been suspended from school?

- ❖ In the past 12 months, have any of your friends carried a gun?
- ❖ In the past 12 months, have any of your friends sold illegal drugs?
- ❖ In the past 12 months, have any of your friends been arrested?
- ❖ In the past 12 months, have any of your friends dropped out of school?
- ❖ In the past 12 months, have any of your friends been a member of a group (gang, crew, etc)?

Low Perceived Risk of Drug Use:

The perception of harm from drug use is related to both experimentation and regular use. The less harm that an adolescent perceives as the result of drug use, the more likely it is that he or she will use drugs.

The **Low Perceived Risks of Drug Use** factor was developed to measure a component of the risk factor *Favourable Attitudes toward Problem Behaviour*.

This scale is measured by four survey items:

- ❖ How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?
- ❖ How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks of an alcoholic beverage (such as beer, wine or hard liquor) nearly every day?
- ❖ How much do you think people risk harming themselves (physically or in other ways) if they try marijuana once or twice?

- ❖ How much do you think people risk harming themselves (physically or in other ways) if they smoke marijuana regularly?

Early Initiation of Drug Use:

The initiation of alcohol, tobacco, or other drug use at an early age is linked to a number of negative outcomes. The earlier that experimentation with drugs begins, the more likely it is that experimentation will become consistent, regular use. Early initiation may lead to the use of a greater range of drugs, as well as other problem behaviours. In this current survey, early initiation of drug use is defined as drug use at age 11 years or younger.

The risk factor **Early Initiation of Drug Use** was developed to measure a component of the risk factor *Early Initiation of Problem Behaviour*.

This scale is measured by survey items that ask when drug use began.

Delinquent Behaviours / Violence:

Youth violence refers to harmful behaviors that can start early and continue into young adulthood. The young person can be a victim, an offender, or a witness to the violence. Youth violence includes various behaviors. Some violent acts—such as bullying, slapping, or hitting— can cause more emotional harm than physical harm. Others, such as robbery and assault (with or without weapons), can lead to serious injury or even death.

The risk factor **Delinquent Behaviours / Violence** is measured by a single factor using four survey items:

- ❖ In the past 12 months, how many times were you in a physical fight on school property?
- ❖ In the last 12 months, how many times someone threatened or injured you with a weapon (such as gun (any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun BB/pellet guns), knife or club) on school property?
- ❖ How old were you when you first got arrested?
In my school, violence is very serious / somewhat serious / quite serious

Second Hand Effects:

Drinking and driving or smoking marijuana and driving can cause devastated consequences in the society. More statistics around the world show the negative effect of the combination of substances

The risk factor **Second Hand Effects** is measured by a single factor using two survey items:

- ❖ In the past 12 months, how often did you ride in a vehicle driven by someone who had been drinking alcohol?
- ❖ In the past 12 months, how often did you ride in a vehicle driven by someone who had been using marijuana?

APPENDIX B - Questionnaire for Years 7-8

**DO NOT PUT YOUR NAME ANYWHERE
ON THIS QUESTIONNAIRE**

CISDUS2016
GRADE 7,8/
YEAR 7,8,9



STUDENT QUESTIONNAIRE

THIS IS NOT A TEST. These questions are to find out what you know about alcohol, and other drugs (for example, tobacco, marijuana, cocaine, medical drugs, etc.), what you think about alcohol and other drugs, and what you do about using alcohol and other drugs. There is no assumption that you have ever used alcohol or other drugs.

Do not put your name on the questionnaire. The information you give will be kept **completely private and confidential**. Therefore, we ask you to be honest and accurate when you answer the questions.

Also, you may withdraw from this survey at any time.

THANK YOU FOR YOUR HELP!

PLEASE DO NOT WRITE IN THIS AREA

01 02 03 04 05 06 07 08 09 10 11 12 13 14
 00 01



INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE

* Most questions are followed by a list of answers. Please choose the answer that you think is best for you and indicate your choice by filling in one of the circles (bubbles) to the left. For example:

How do you rate your physical health?

- Excellent
- Very good
- Good
- Fair
- Poor

- * Mark your answer clearly.
- * It is best to use a pencil, but you may also may use a blue or black ink pen.
- * If using pencil, erase any answer you want to change. If using pen, cross out the wrong answer with and "x" and fill in the circle (bubble) with the correct answer.
- * Make no other markings or comments on this questionnaire.

BEFORE BEGINNING , PLEASE INDICATE THE CURRENT TIME (For example, 08:15)

:

 am/pm (For example, 08:15^{am}/pm)

DEMOGRAPHICS

1. How old are you?
- 10 yrs or younger 14 years
 - 11 years 15 years
 - 12 years 16 years or older
 - 13 years

2. Are you male or female?
- Male Female

3. What grade/year are you in?
- Grade 6 / Year 7
 - Grade 7 / Year 8
 - Grade 8 / Year 9

4. Who do you live with most of the time?
- Both birth parents
 - Adoptive parent(s)
 - Birth mother only
 - Birth father only
 - Parent and Stepfather/Stepmother
 - Parents Divorced/Separate (Some time spent with each parent)
 - Other relatives and parent(s)
 - Other relatives only (uncles, grand parents, etc)
 - Foster parents

5. Which district/island do you live in most of the
- West Bay (includes West Bay Road)
 - George Town (includes Prospect/Spotts)
 - Bodden Town (includes Savannah/Newlands)
 - East End North Side Cayman Brac

SCHOOL EXPERIENCE

6. How do you feel about going to school?
- I like school very much
 - I like school quite a lot
 - I like school to some degree
 - I don't like school very much
 - I don't like school at all
7. During this current school year (since September 2015) have you been taught about alcohol, tobacco or other drugs? Yes No
8. Who do you feel most comfortable talking to about alcohol and other drugs? (**Choose all that apply**)
- Teachers Security guards
 - Counsellors Parents
 - Coaches Peers
 - Police Officers All of the above
 - Older students Other



9. How much time do you spend on a/your cellphone (chatting, texting, surfing the internet, pictures) per day?

- Less than a hour
- Between 2 - 3 hours
- Between 4 - 5 hours
- More than 6 hours

10. About how many hours a day do you usually spend on **social media websites** such as Facebook, Instagram, Snapchat, either posting or browsing?

- Less than one hour a day
- Between 1 - 3 hours a day
- Between 3 - 6 hours a day
- More than 6 hours a day
- I visit these websites, but not daily
- I use internet, but never visit these sites
- I don't use the internet

11. Does your school allow you to bring your cellphone /electronic device to school?

- Yes No

12. How many times did you bring your cellphone / electronic device to school in the last 20 days of school?

Days

For the next questions, please tell us whether you agree or disagree with the following statements:

13. I feel safe in my school.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

14. I feel close to the people at my school.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

15. I feel like I am a part of my school.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

EXPERIENCE WITH DRUGS (CIGARETTES, ALCOHOL AND OTHER DRUGS)

16. CIGARETTES:

17. Have you ever smoked cigarettes in your lifetime?

- Yes No

18. Have you smoked cigarettes in the past 12 months?

- Yes No

19. Have you smoked cigarettes in the past 30 days?

- Yes No

If you have never smoke cigarettes, continue to question #28.

20. How old were you when you first smoked a whole cigarette?

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year

21. Who gave you your **first** cigarette?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other

22. Where do you most often smoke cigarettes?

(Choose all that apply).

- At home
- At school
- Neighbourhood
- Friend's house
- Sporting event
- Other social events
- Other place

Where?



23. Who usually or most often gets/gives you cigarettes?

- Friends
- Parents
- Brother/sister
- Other relatives
- Dealer
- Shop
- Other sources

From whom?

24. Do you know someone in your school from whom you can get cigarettes?

- Yes
- No
- Not sure

25. How frequently have you smoked cigarettes?

- Only once
- Sometimes in the past 12 months
- Sometimes in the past 30 days
- Sometimes in the past week
- Daily

26. How many cigarettes have you smoked in the **past 30 days**?

- 0
- 1 - 5
- 6 - 10
- 11 - 20
- More than 20

27. Does your family know that you smoke cigarettes?

- Yes
- No

28. How easy or difficult would it be for you to get cigarettes if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

29. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

30. Do your parents (or guardians) allow you and your friends to smoke cigarettes at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Smoking is not acceptable at all

31. In the past 12 months, have your friends smoked cigarettes?

- Yes
- No
- I don't know

32. ALCOHOL:

(For example: beer, wine, coolers and liquor such as rum, vodka, Smirnoff ice, etc. Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or at church for Communion).

33. Have you ever drunk alcohol in your lifetime?

- Yes
- No

34. Have you drunk alcohol in the past 12 months?

- Yes
- No

35. Have you drunk alcohol in the past 30 days?

- Yes
- No

If you have never used alcohol, continue to question #48.

36. How old were you when you first drank alcohol? (Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or at church for Communion).

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year ago

37. Who gave you your **first** drink of alcohol?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other



23. Who usually or most often gets/gives you cigarettes?

- Friends
- Parents
- Brother/sister
- Other relatives
- Dealer
- Shop
- Other sources

From whom?

24. Do you know someone in your school from whom you can get cigarettes?

- Yes
- No
- Not sure

25. How frequently have you smoked cigarettes?

- Only once
- Sometimes in the past 12 months
- Sometimes in the past 30 days
- Sometimes in the past week
- Daily

26. How many cigarettes have you smoked in the **past 30 days**?

- 0
- 1 - 5
- 6 - 10
- 11 - 20
- More than 20

27. Does your family know that you smoke cigarettes?

- Yes
- No

28. How easy or difficult would it be for you to get cigarettes if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

29. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

30. Do your parents (or guardians) allow you and your friends to smoke cigarettes at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Smoking is not acceptable at all

31. In the past 12 months, have your friends smoked cigarettes?

- Yes
- No
- I don't know

32. ALCOHOL:

(For example: beer, wine, coolers and liquor such as rum, vodka, Smirnoff ice, etc. Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or at church for Communion).

33. Have you ever drunk alcohol in your lifetime?

- Yes
- No

34. Have you drunk alcohol in the past 12 months?

- Yes
- No

35. Have you drunk alcohol in the past 30 days?

- Yes
- No

If you have never used alcohol, continue to question #48.

36. How old were you when you first drank alcohol? (Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or at church for Communion).

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year ago

37. Who gave you your **first** drink of alcohol?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other



49. How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks of an alcoholic beverage (such as beer, wine or hard liquor) nearly every day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

50. In the past 12 months, how often did you ride in a vehicle driven by someone who had been drinking alcohol?

- Never
- 6 - 9 times
- Once
- 10 times or more
- 2 - 5 times
- Not sure

51. Do your parents (or guardians) allow you and your friends to drink alcohol at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Drinking is not acceptable at all

52. In the past 12 months, have your friends tried alcohol when their parents didn't know about it?

- Yes
- No
- I don't know

53. MARIJUANA/GANJA:

(Also known as "weed", "grass", "pot", "marijane", "hash")

54. Have you ever used marijuana (ganja) in your lifetime?

- Yes
- No

55. Have you used marijuana (ganja) in the past 12 months?

- Yes
- No

56. Have you used marijuana (ganja) in the past 30 days?

- Yes
- No

If you have never used marijuana (ganja), continue to question #66.

57. How old were you when you first used marijuana?

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year ago

58. Who gave you your **first** smoke of marijuana?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other

59. Where do you most often use marijuana? (**Choose all that apply**).

- At home
- Sporting event
- At school
- Other social events
- Neighbourhood
- Concert/Music event
- Friend's house
- Other place

Where?

60. Who usually or most often gets/gives you marijuana?

- Friends
- Dealer
- Parents
- Shop
- Brother/sister
- Other sources
- Other relatives

From whom?



61. How frequently have you used marijuana?

- Only once
- Sometimes in the past 12 months
- Sometimes in the past 30 days
- Sometimes in the past week
- Daily

62. How many marijuana spliffs/joints/blunts have you smoked in the **past 30 days**?

- None
- Less than 1 spliff
- About 1 spliff
- 2 - 3 spliffs
- 4 or more spliffs

63. Have you ever been to counselling or a treatment programme during the past 12 months because of your marijuana use?

- Yes
- No

64. Do you feel you need counselling or treatment for your marijuana use behaviours?

- Yes
- No

65. Does your family know about your marijuana use?

- Yes
- No

66. Do you know someone **in your school** whom you can get marijuana from?

- Yes
- No
- I don't know

67. How easy or difficult would it be for you to get marijuana if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

69. In the past 12 months, how often did you ride in a vehicle driven by someone who had been using marijuana?

- Never
- Once
- 2 - 5 times
- 6 - 9 times
- 10 times or more
- Not sure

69. How much do you think people risk harming themselves (physically or in other ways) if they....

69a) Try marijuana once or twice?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

69b) Smoke marijuana regularly

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

70. Do your parents (or guardians) allow you and your friends to smoke marijuana at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Marijuana use is not acceptable at all

71. In the past 12 months, have your friends used marijuana?

- Yes
- No
- I don't know

Other questions about drug experiences:

72. Has anyone in your family ever had alcohol or drug problem?

- Yes
- No
- I don't know

73. Has a family member ever sold drugs?

- Yes
- No
- I don't know

74. Have your parents ever spoken to you about their experiences with alcohol and other drugs when they were your age?

- Yes
- No



75. If **you have** consumed any of the substances described before (cigarettes, alcohol, marijuana), what is/was the main reason why you do it or did it? (**Please choose all that apply**).

	Cigarettes	Alcohol	Marijuana
a) Never used any substance in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Peer pressure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) It is popular (movies, videos, tv shows, internet)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) To relief stress / depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Curiosity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Because my parents used it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Boredom / nothing to do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Lack of information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) To have fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Just used it at parties / with friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Because I want to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Because my friends use it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m) Because my boy/girlfriend used it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n) Because it is cool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o) Because it is easy to get	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p) Other reason	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What other reason?

76. If **you have never** used any substance, who would you say has the most influence on your decision to not try alcohol, tobacco or other drugs? (**Choose all that apply**).

- Parents
- Teachers
- Friends
- Boyfriend/Girlfriend
- Celebrities
- Entertainers/Artists
- Personal Choice
- I have used any substance

If you have never used, go to question #76.

77. Should there be more educational classes about alcohol and other drugs at your school?

- Yes No

78. Do your parents talk to you about the importance of not using alcohol, cigarettes and other drugs?

- Yes No

79. Have you ever been suspended, expelled or excluded from school **for using drugs**?

- Yes No

80. In your community/neighbourhood/district, do you see drugs being used?

- Yes No

81. In your community/ neighbourhood/ district, do you know where you can get drugs?

- Yes No

82. Do you feel safe in your community/ neighbourhood/ district?

- Yes No

83. Have you ever been approached by a stranger and attempted to give you or sell you drugs/alcohol?

- Yes No

If yes, where?

How was it concealed/packaged?

ENERGY DRINKS

Consider **Energy Drink** as the following: "Red Bull", "Rockstar", "Sobe", "Monster" and "5 hours energy". Please **do not** consider Gatorade, Vitamin Water, Powerade, Propel, Lucozade, etc., as energy drinks.

84. Have you ever had energy drinks in your life?

- Yes No Don't know / Not Sure

If you have never used, go to question #89.



85. Please indicate Yes or No for each of the following:
When do you drink energy drinks?

- * While studying Yes No
- * Before of after sporting activities Yes No
- * While hanging out Yes No
- * Other (specify):

86. How often do you consume energy drinks?

- Once per day
- Twice or more per day
- Once per week
- Twice per week
- Once per month
- Other (specify)
- Never had energy drinks

87. Have you consumed energy drinks in the **past 30 days**?

- Yes No Never drank energy drinks

88. Have you **ever** mixed alcohol with an energy drink?

- Yes No Never drank energy drinks

HEALTH AND FEELINGS

89. In the last 30 days, about how often did you...

89a) Feel nervous?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89b) Feel hopeless?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89c) Feel restless or fidgety?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89d) Feel depressed (sad) that nothing could cheer you up?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89e) Feel that everything was an effort/hard to do?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89f) Feel useless?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

89g) Feel anxious?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

90. How much do you agree or disagree with the following statement: On a whole, I am satisfied with myself.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree



VIOLENCE RELATED BEHAVIOURS

91. Have you been bullied in your life?
 Yes No

If you have never bullied, go to question #95.

92. Have you been bullied in the past 12 months?
 Yes No

93. Have you been bullied in the past 30 days?
 Yes No

94. If you were bullied, how were you bullied?
(Choose all that apply)

- Kicked, pushed or shoved
- Made fun of because of race/color
- Made fun of because of religion
- Made fun of because of sexual orientation (homosexual/heterosexual)
- Made fun of about your body
- Left out of activities
- On social media (Facebook, Twitter, Instagram, etc.)
- Teased about the school that you attend
- Some other way:

95. In the past 12 months, how many times were you in a physical fight on school property?

- Never
- Once
- 2 or 5 times
- 6 - 10 times
- More than 10 times

96. In the last 12 months, how many times has someone threatened or injured you with a weapon (such as a gun *(any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun, BB/pellet guns)*, knife or club) **on school property?**

- 0 times
- 1 -3 times
- 4 - 6 times
- 7 - 9 times
- 10 or more times

97. In the past 12 months, have your friends:

- 97a) Been in a fight? Yes No I don't know
- 97b) Stolen a cell phone? Yes No I don't know

VIDEO GAMES AND OTHER ELECTRONIC DEVICES

98. In the last 7 days, about how many hours a day, on average, did you spend: watching TV/movies, playing video/computer games, on a computer/ tablet / smartphone chatting, emailing, or surfing the internet in your free time?

- None
- Less than 1 hour a day
- 1 to 3 hours a day
- 4 - 6 hours a day
- 7 or more hours a day
- Not sure

FAMILY UPBRINGING

99. The rules about alcohol, cigarettes and other drugs in my family are clear.

- Yes
- No

100a. Do you share your thoughts and feelings with an adult **outside of school?**

- Yes No

100b. If yes, who? **(Choose all that apply)**

- Both birth parents
- Adoptive parent(s)
- Birth mother only
- Birth father only
- Stepfather/Stepmother
- Other relatives (uncles, grand parents, etc)
- Foster parents
- Other adult:



101. People in my family often insult or yell at each other.

- Yes
- No

102. When I am not at home, one of my parent(s)/caregiver(s) knows where I am and who I am

- Yes
- No
- I am not sure

103. If I had a personal problem, I could ask an adult outside of school for help.

- Yes
- No
- I am not sure

104. My parent(s) or caregiver(s) give me lots of opportunities to do fun things with them.

- Yes
- No

105. My parent(s) or caregiver(s) ask if I've gotten my homework done.

- Yes
- No

106. Would your parent(s) or caregiver(s) know if you did not come home on time?

- Yes
- No
- Not sure

107. Are there activities you and your family do together (dinner, beach, church, trips, etc.)?

- Yes
- No

FINAL COMMENTS

108. Overall, how easy did you find this questionnaire to understand and complete?

- Not at all easy
- Somewhat easy
- Fairly easy
- Very easy

109. What are your thoughts on the length of this questionnaire?

- Much too long
- A bit too long
- About right
- A bit too short

110. In your opinion, do you think the questions asked in this survey make most students...

- Very uncomfortable
- Somewhat uncomfortable
- Not at all uncomfortable

111. In your opinion, what other questions should be included in this survey?

Thank you for your participation in this survey!

Please indicate the time you finished the survey:

		:			am/pm (For example, 09:00am/pm)
--	--	---	--	--	---------------------------------



APPENDIX C - Questionnaire for Years 9-12

**DO NOT PUT YOUR NAME ANYWHERE
ON THIS QUESTIONNAIRE**

**CISDUS2016
GRADE 9, 10, 11, 12/
YEAR 10, 11, 12, 13**



STUDENT QUESTIONNAIRE

THIS IS NOT A TEST. These questions are to find out what you know about alcohol, and other drugs (for example, tobacco, marijuana, cocaine, medical drugs, etc.), what you think about alcohol and other drugs, and what you do about using alcohol and other drugs. There is no assumption that you have ever used alcohol or other drugs.

Do not put your name on the questionnaire. The information you give will be kept **completely private and confidential**. Therefore, we ask you to be honest and accurate when you answer the questions.

Also, you may withdraw from this survey at any time.

THANK YOU FOR YOUR HELP!

PLEASE DO NOT WRITE IN THIS AREA

01 02 03 04 05 06 07 08 09 10 11 12 13 14
 00 01

Page 1 of 18



INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE

* Most questions are followed by a list of answers. Please choose the answer that you think is best for you and indicate your choice by filling in one of the circles (bubbles) to the left. For example:

How do you rate your physical health?

- Excellent
- Very good
- Good
- Fair
- Poor

* Mark your answer clearly.

* It is best to use a pencil, but you may also use a blue or black ink pen.

* If using pencil, erase any answer you want to change. If using pen, cross out the wrong answer with and "x" and fill in the circle (bubble) with the correct answer.

* Make no other markings or comments on this questionnaire.

BEFORE BEGINNING , PLEASE INDICATE THE CURRENT TIME (For example, 08:15)

:

 am/pm (For example, 08:15(am/pm))

DEMOGRAPHICS

1. How old are you?
 - 10 yrs or younger 16 years or older
 - 11 years 17 years
 - 12 years 18 years
 - 13 years 19 years
 - 14 years 20 years or older
 - 15 years
2. Are you male or female?
 - Male Female
3. What grade/year are you in?
 - Grade 9 / Year 10 Grade 11 / Year 12
 - Grade 10 / Year 11 Grade 12 / Year 13
4. Which district/island do you live in most of the time?
 - West Bay (includes West Bay Road)
 - George Town (includes Prospect/Spotts)
 - Bodden Town (includes Savannah/Newlands)
 - East End North Side Cayman Brac

5. Who do you live with most of the time?
 - Both birth parents
 - Adoptive parent(s)
 - Birth mother only
 - Birth father only
 - Parent and Stepfather/Stepmother
 - Parents Divorced/Separated (*Some time spent with each parent*)
 - Other relatives and parent(s)
 - Other relatives only (uncles, grand parents, etc)
 - Foster parents

SCHOOL EXPERIENCE

6. How do you feel about going to school?
 - I like school very much
 - I like school quite a lot
 - I like school to some degree
 - I don't like school very much
 - I don't like school at all
7. During this current school year (since September 2015) have you been taught about alcohol, tobacco or other drugs?
 - Yes No



8. Who do you feel most comfortable talking to about alcohol and other drugs? (**Choose all that apply**)

- Teachers Security guards
 Counsellors Parents
 Coaches Peers
 Police Officers All of the above
 Older students Other

9. How much time do you spend on a/your cellphone (chatting, texting, surfing the internet, pictures) per day?

- Less than a hour
 Between 2 - 3 hours
 Between 4 - 5 hours
 More than 6 hours

10. About how many hours a day do you usually spend on **social media websites** such as Facebook, Instagram, Snapchat, either posting or browsing?

- Less than one hour a day
 Between 1 - 3 hours a day
 Between 3 - 6 hours a day
 More than 6 hours a day
 I visit these websites, but not daily
 I use internet, but never visit these sites
 I don't use the internet

11. Does your school allow you to bring your cellphone /electronic device to school?

- Yes No

12. How many times did you bring your cellphone / electronic device to school in the last 20 days of school?

Days

For the next questions, please tell us whether you agree or disagree with the following statements:

13. I feel safe in my school.

- Strongly agree
 Somewhat agree
 Somewhat disagree
 Strongly disagree

14. I feel close to the people at my school.

- Strongly agree
 Somewhat agree
 Somewhat disagree
 Strongly disagree

15. I feel like I am a part of my school.

- Strongly agree
 Somewhat agree
 Somewhat disagree
 Strongly disagree

OTHER EXPERIENCES IN LIFE

These questions ask about your feelings and experiences in other areas of your life:

16. In the past 12 months, have any of your friends:

- a) Smoked Cigarettes? Yes No
 b) Used cocaine, other illegal drugs? Yes No
 c) Been suspended from school? Yes No
 d) Carried a gun? Yes No
 e) Sold illegal drugs? Yes No
 f) Been arrested? Yes No
 g) Dropped out of school? Yes No
 h) Been a member of a group (gang, crew, etc)? Yes No
 i) Got in a fight? Yes No
 j) Stole a cell phone? Yes No

EXPERIENCE WITH DRUGS (CIGARETTES, ALCOHOL AND OTHER DRUGS)

ALCOHOL:

(For example: beer, wine, coolers and liquor such as rum, vodka, Smirnoff ice, etc. Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or at church for Communion).

17. Have you ever drunk alcohol in your lifetime?

- Yes No



18. Have you drunk alcohol in the past 12 months?

- Yes No

19. Have you drunk alcohol in the past 30 days?

- Yes No

If you have never used alcohol, continue to question #37.

20. How old were you when you first drank alcohol? (Don't include any time when your parents/guardian(s) gave you a sip of alcohol to taste, or while at church for Communion).

Years

When did this happen?

- During the past 30 days
 More than 1 month but less than 1 year ago
 More than a year ago

21. Who gave you your **first** drink of alcohol?

- Mother Friend
 Father Boyfriend/Girlfriend
 Grandparent Other
 Other relative

22. Where do you most often drink alcohol? (**Choose all that apply**).

- At home
 At school
 Neighbourhood
 Friend's house
 Sporting event
 Social Events
 Car
 Other place: **Where?**

23. Who usually or most often gets/gives you alcohol?

- Friends
 Parents
 Brother/sister
 Other relatives
 Dealer
 Shop
 Other sources

From whom?

Page 4 of 18

24. How frequently have you drunk alcohol?

- Only once
 Sometimes in the past 12 months
 Sometimes in the past 30 days
 Sometimes in the past week
 Daily

25. How many times in the **last four weeks** has drinking alcohol **MADE YOU DRUNK** (that is, you had so much to drink that you could not do what you wanted to do, or you threw up)?

Days

26. How many drinks containing alcohol do you have on a day when you are drinking?

- 1 drink
 2 - 3 drinks
 4 drinks
 5 - 7 drinks
 8 or more drinks

27. How frequently do you have five or more drinks on one occasion?

- Never
 Less than once a month
 About once a month
 About once a week
 Daily or almost daily

28. How many times in the last 30 days, have you had 5 or more alcoholic drinks on the same occasion?

- Only once
 2 - 3 times
 4 - 5 times
 More than 5 times
 Never have 5 or more drinks on same occasion
 Didn't drink in the last 30 days

29. Have you or someone else been injured as a result of your drinking?

- Yes, but not in the last 12 months
 Yes, during the last 12 months
 No



30. Has a relative, friend, doctor or other health worker ever been concerned about your drinking?

- Yes, but not in the last 12 months
- Yes, during the last 12 months
- No, never

31. How often during the last 12 months, have you:

31a) Found that you were not able to stop drinking once you had started?

- Never
- Less than monthly
- Monthly
- Weekly
- Daily or almost daily

31b) Failed to do what was normally expected of you because of drinking?

- Never
- Less than monthly
- Monthly
- Weekly
- Daily or almost daily

31c) Needed a drink first thing in the morning to get yourself going after a heavy drinking session?

- Never
- Less than monthly
- Monthly
- Weekly
- Daily or almost daily

31d) Had a feeling of guilt or remorse after drinking?

- Never
- Less than monthly
- Monthly
- Weekly
- Daily or almost daily

31e) Been unable to remember what happened the night before because you had been drinking?

- Never
- Less than monthly
- Monthly
- Weekly
- Daily or almost daily

32. Have you ever been to counselling or a treatment programme during the past 12 months because of your alcohol use?

- Yes
- No

33. Do you feel you need counselling or treatment for your drinking behaviours?

- Yes
- No

34. In the past 30 days, what type of alcoholic beverage did you consume, and in what frequency? **(Choose all that apply).**

34a) Beers:

- Never
- Daily
- Weekends
- Some week days
- Only at social events

34b) Wines:

- Never
- Daily
- Weekends
- Some week days
- Only at social events

34c) Coolers (such as Smirnoff ice, Seagrams Escapes, Bacardi Breezer, Mikes Hard Flavours, etc.):

- Never
- Daily
- Weekends
- Some week days
- Only at social events

34d) Liquor: rum, whiskey, vodka, gin, cognac, etc.:

- Never
- Daily
- Weekends
- Some week days
- Only at social events



35. In the last 12 months, how often have you driven a vehicle within an hour of drinking 2 or more drinks of or containing alcohol?

- No driver's licence
- Never
- Once
- 2 times
- 3 times
- 4 times
- 5 times
- 6 times
- 7 times
- 8 or more times

36. Does your family know that you drink alcohol?

- Yes
- No

37. How easy or difficult would it be for you to get alcohol if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

38. How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks of an alcoholic beverage nearly every day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

39. In the past 12 months, how often did you ride in a vehicle driven by someone who had been drinking alcohol?

- Never
- Once
- 2 - 5 times
- 6 - 9 times
- 10 times or more
- Not sure

40. Do your parents (or guardians) allow you and your friends to drink alcohol at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Drinking is not acceptable at all

41. In the past 12 months, have your friends tried alcohol when their parents didn't know about it?

- Yes
- No
- I don't know

MARIJUANA/GANJA:

(Also known as "weed", "grass", "pot", "marijane", "hash")

42. Have you ever used marijuana (ganja) in your lifetime?

- Yes
- No

43. Have you used marijuana (ganja) in the past 12 months?

- Yes
- No

44. Have you used marijuana (ganja) in the past 30 days?

- Yes
- No

If you have never used marijuana (ganja), continue to question #59.

45. How old were you when you first used marijuana?

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year ago

46. Who gave you your **first** smoke of marijuana?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other



35. In the last 12 months, how often have you driven a vehicle within an hour of drinking 2 or more drinks of or containing alcohol?

- No driver's licence
- Never
- Once
- 2 times
- 3 times
- 4 times
- 5 times
- 6 times
- 7 times
- 8 or more times

36. Does your family know that you drink alcohol?

- Yes
- No

37. How easy or difficult would it be for you to get alcohol if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

38. How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks of an alcoholic beverage nearly every day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

39. In the past 12 months, how often did you ride in a vehicle driven by someone who had been drinking alcohol?

- Never
- Once
- 2 - 5 times
- 6 - 9 times
- 10 times or more
- Not sure

40. Do your parents (or guardians) allow you and your friends to drink alcohol at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Drinking is not acceptable at all

41. In the past 12 months, have your friends tried alcohol when their parents didn't know about it?

- Yes
- No
- I don't know

MARIJUANA/GANJA:

(Also known as "weed", "grass", "pot", "marijane", "hash")

42. Have you ever used marijuana (ganja) in your lifetime?

- Yes
- No

43. Have you used marijuana (ganja) in the past 12 months?

- Yes
- No

44. Have you used marijuana (ganja) in the past 30 days?

- Yes
- No

If you have never used marijuana (ganja), continue to question #59.

45. How old were you when you first used marijuana?

Years

When did this happen?

- During the past 30 days
- More than 1 month but less than 1 year ago
- More than a year ago

46. Who gave you your **first** smoke of marijuana?

- Mother
- Father
- Grandparent
- Other relative
- Friend
- Boyfriend/Girlfriend
- Other



61. How easy or difficult would it be for you to get marijuana if you wanted?

- Probably impossible
- Very difficult
- Difficult
- Easy
- Very easy
- I don't know how to get it

62. In the past 12 months, how often did you ride in a vehicle driven by someone who had been using marijuana?

- Never
- Once
- 2 - 5 times
- 6 - 9 times
- 10 times or more
- Not sure

63. How much do you think people risk harming themselves (physically or in other ways) if they....

- | | |
|-----------------------------------|-----------------------------------|
| 63a) Try marijuana once or twice? | 63b) Smoke marijuana regularly |
| <input type="radio"/> No risk | <input type="radio"/> No risk |
| <input type="radio"/> Slight risk | <input type="radio"/> Slight risk |
| <input type="radio"/> Medium risk | <input type="radio"/> Medium risk |
| <input type="radio"/> Great risk | <input type="radio"/> Great risk |
| <input type="radio"/> Don't know | <input type="radio"/> Don't know |

64. Do your parents (or guardians) allow you and your friends to smoke marijuana at your home while you are having a party or get-together?

- Yes
- No
- I don't know
- Marijuana use is not acceptable at all

OTHER DRUGS:

65. Have you..	In your life → Last 12 months → Last 30 days					
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
a) Smoked cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Smoked electronic cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Sniffed glue or solvents to get high: (for example: nail polish remover, gasoline, pain thinner, aerosols, butane)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Used crack cocaine : (also known as "rocks", "base nuggets", "kryptonite")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Used cocaine powder : (also known as "snow", "coke", "nose candy", "blow", "snort")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Used ecstasy : (also known as "Molly", "X", "XTC", "MDMA", "Adam", "hug", "love drug")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Used tranquilizers without a prescription: (for example: Valium, Xanax, Ativan, Serax) to get high?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Used LSD to get high: (also known as "acid", "dots", "sugar cubes", "microdots")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Used pain relief pills (such as "Oxycotin" also known as "Oxy" and "OC") without a prescription from a doctor or to get high	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Used "donkey weed" : (hallucinogenic bush that grows naturally in the Cayman Islands)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Used "seasoned spliff" : (combination of cocaine and ganja)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Used "magic mushrooms" : (hallucinogens mushrooms, also known as "shrooms")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



If you have never used any of the substances listed above in #65, continue to question #74.

66. How old were you when you used the following substances for the first time? Please answer all that you have used.

	Age of first time used	When did this happen?		
		During the past 30 days	More than 1 month, less than 1 year ago	More than a year ago
a) Cigarettes	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Electronic Cigarettes	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Glue or Solvents to get high	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Crack Cocaine	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Cocaine	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Ecstasy	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Tranquilizers	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) LSD	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Pain Relief Pills, such as Oxycotin	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Donkey Weed	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Seasoned	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Magic Mushrooms	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

67. Where do you most often use the following substances? (Choose all that apply).

	At home	At school	Neighbourhood	Friend's house	Sporting Event	Other Social Events	Other Place	Where?
a) Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
b) Electronic Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
c) Glue or Solvents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
d) Crack Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
e) Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
f) Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
g) Tranquilizers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
h) LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
i) Pain relief pills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
j) Magic Mushrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

68. From whom do you usually get the following substances? (Choose all that apply).

	Friends	Parent	Brother Sister	Other relatives	Dealer	Shop	Other Sources	Whom/Where?
a) Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
b) Electronic Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
c) Glue or Solvents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
d) Crack	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
e) Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>



	Friends	Parent	Brother Sister	Other relatives	Dealer	Shop	Other Sources	From whom?
f) Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
g) Tranquilizers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	By a Doctor <input type="radio"/> <input type="text"/>
h) LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
i) Pain relief pills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	By a Doctor <input type="radio"/> <input type="text"/>
j) Magic Mushrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

69. How frequently have you used the following substances?

	Only once	Sometimes in the past 12 months	Sometimes in the past 30 days	Sometimes in the past week	Daily
a) Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Electronic Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Glue or Solvents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Crack Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Tranquilizers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Pain relief pills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Magic Mushrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

70. Please answer the following questions (**please select one option**):

70a) How many **cigarettes** have you smoked in the **last 30 days**?

- 0
- 1 - 5
- 6 - 10
- 11 - 20
- More than 20

70b) How many times did you sniff **glue or solvents** to get high, in the **last 30 days** ?

- None
- About 1 time
- 2 - 3 times
- 4 or more times

70c) How many sniffs of **cocaine powder** have you had in the **last 30 days**?

- None
- 1
- 2 - 5
- More than 10

70d) How many **crack cocaine** rocks have you smoked in the **last 30 days**?

- None
- 1 rock
- 2 - 5 rocks
- More than 10 rocks

70e) How many **donkey weed** spliffs have you smoked in the **last 30 days**?

- None
- Less than 1 spliff
- About 1 spliff
- 2 - 3 spliffs
- 4 or more spliffs



70f) How many **seasoned spliffs** have you smoked in the **last 30 days**?

- None
- Less than 1 spliff
- About 1 spliff
- 2 - 3 spliffs
- 4 or more spliffs

70g) How many times did you use **magic mushrooms** in the **last 30 days**?

- None
- 1 time
- 2 - 3 times
- 4 or more times

70h) How many pills have you typically used of the following substances in the **last 30 days**:

- * Ecstasy: 1 pill 2 - 3 pills 4 or more pills
- * Tranquilizers 1 pill 2 - 3 pills 4 or more pills
- * Pain relief pills 1 pill 2 - 3 pills 4 or more pills
(to get high)

71. Have you ever been treated by a doctor as a result of abuse/misuse of any substance?

- Yes No

72. Have you ever received counselling or treatment as a result of use of any substance?

- Yes No

If yes, which substance? **(Choose all that apply)**

- Tobacco
- Crack cocaine
- Ecstasy
- Cocaine Powder
- Other

73. Does your family know about your drug use?

- Yes
- No

74. How easy or difficult would it be for you to get any of the following substances if you wanted some?

	I Don't know how to get it	Probably Impossible	Very Difficult	Difficult	Easy	Very Easy
a) Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Electronic Cigarettes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Glue or Solvents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Crack Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Tranquilizers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Pain relief pills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Donkey weed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Seasoned spliff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Magic Mushrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



75. Would your parents allow you to use any of the substances described above?

- Yes
- No
- I don't know

Other questions about drug experiences:

76. Has anyone in your family ever had an alcohol or drug problem?

- Yes
- No
- I don't know

77. Has a family member ever sold drugs?

- Yes
- No
- I don't know

78. Have your parents ever spoken to you about their experiences with alcohol and other drugs when they were your age?

- Yes
- No

79. If **you have** consumed any of the substances described before (cigarettes, electronic cigarettes, alcohol, marijuana, glue or solvents to get high, crack cocaine, cocaine powder, ecstasy, tranquilizers, stimulants, pain relief pills, "donkey weed", "seasoned spliff", magic mushrooms"), what is/was the main reason why you do it or did it? Please indicate the main reason.

80. If **you have never** used any substance, who would you say has the most influence on your decision of not trying alcohol, tobacco or other drugs? **(Choose all that apply) If you have used any substance, go to question #81.**

- Parents
- Teachers
- Friends
- Boyfriend/Girlfriend
- Other:
- Celebrities
- Entertainers/Artists
- Personal Choice

81. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?

- No risk
- Slight risk
- Medium risk
- Great risk
- Don't know

82. In the past 12 months, how often did you ride in a vehicle driven by someone who had been using drugs (other than alcohol and/or marijuana)?

- Never
- Once
- 2 - 5 times
- 6 - 9 times
- 10 times or more
- Not sure

83. Are drugs used, kept or sold on your school property?

- Yes
- No
- Don't know

84. Do your parents talk to you about the importance of not using alcohol, tobacco and other drugs?

- Yes
- No

85. Did you **buy** any illegal drugs, either for yourself or for others?

In the past 12 months:

- Yes
- No
- Don't buy illegal drugs

In the past 30 days:

- Yes
- No
- Don't buy illegal drugs

86. Did you **sell** any illegal drugs, either for yourself or for others?

In the past 12 months:

- Yes
- No
- Don't sell illegal drugs

In the past 30 days:

- Yes
- No
- Don't sell illegal drugs

87. Should there be more educational classes about drugs at your school?

- Yes
- No

88. Do you know of anyone who was forced to do something they didn't want to do because they were drunk or high?

- Yes
- No



89. Have you ever been suspended, expelled or excluded from school in **your lifetime for using drugs**?

Yes No

90a. In your opinion, do the penalties/consequences for drug use **at the school** stop persons from using/buying/selling drugs?

Yes No

90b. In your opinion, do the penalties/consequences for drug use **in the community** stop persons from using/buying/selling drugs?

Yes No

91. In your community/neighbourhood/district, do you see drugs being used?

Yes No

92. In your community/ neighbourhood/ district, do you know where you can get drugs?

Yes No

93. Do you feel safe in your community/ neighbourhood/ district?

Yes No

94. Have you ever been approached by a stranger and attempted to give you or sell you drugs/alcohol?

Yes No

If yes, where?

How was it concealed/packaged?

ENERGY DRINKS

Consider **Energy Drink** as the following: "Red Bull", "Rockstar", "Sobe", "Monster" and "5 hours energy".

Please **do not** consider Gatorade, Vitamin Water, Powerade, Propel, Lucozade, etc., as energy drinks.

95. Have you ever consumed energy drinks in your life?

Yes No Don't know / Not Sure

If you have never used, go to question #100.

96. Please indicate Yes or No for each of the following: When do you drink energy drinks?

* While studying Yes No

* Before of after sporting activities Yes No

* While hanging out Yes No

* Other (specify):

97. How often do you consume energy drinks?

Once per day

Twice or more per day

Once per week

Twice per week

Once per month

Other (specify)

Never had energy drinks

98. Have you consumed energy drinks in the **past 30 days**?

Yes No Never drank energy drinks

99. Have you **ever** mixed alcohol with an energy drink?

Yes No Never drank energy drinks

VIOLENCE RELATED BEHAVIOURS

100. Have you ever carried a weapon, such as a gun (*any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun, BB/pellet guns*), knife or club **in the community**?

In the past 12 months:

Yes No Never

In the past 30 days:

Yes No Never

101. Have you ever carried a weapon, such as a gun (*any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun, BB/pellet guns*), knife or club **to school**?

In the past 12 months:

Yes No Never

In the past 30 days:

Yes No Never



102. During the last 12 months, how many times has someone threatened or injured you with a weapon (such as a gun *(any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun, BB/pellet guns)*, knife or club) **on school property?**

- 0 times
- 1 -3 times
- 4 - 6 times
- 7 - 9 times
- 10 or more times

103. During the last 12 months, how many times has someone threatened or injured you with a weapon (such as a gun *(any weapon which fires bullets or shells; this includes hunting guns, fake guns, speargun, pop gun, BB/pellet guns)*, knife or club) **in your community?**

- 0 times
- 1 -3 times
- 4 - 6 times
- 7 - 9 times
- 10 or more times

104. Have you ever.....

104a) Been hit, slapped or physically hurt on purpose by your boy/girlfriend?

- | Last 30 days | Last 12 months |
|---|---|
| <input type="radio"/> Yes | <input type="radio"/> Yes |
| <input type="radio"/> No | <input type="radio"/> No |
| <input type="radio"/> Don't have boy/girlfriend | <input type="radio"/> Don't have boy/girlfriend |

104b) Been physically forced to have sex when you did not want to?

- | Last 30 days | Last 12 months |
|-------------------------------------|-------------------------------------|
| <input type="radio"/> Yes | <input type="radio"/> Yes |
| <input type="radio"/> No | <input type="radio"/> No |
| <input type="radio"/> Never had sex | <input type="radio"/> Never had sex |

104c) Been physically forced to have sex because your partner was drunk or high?

- | Last 30 days | Last 12 months |
|-------------------------------------|-------------------------------------|
| <input type="radio"/> Yes | <input type="radio"/> Yes |
| <input type="radio"/> No | <input type="radio"/> No |
| <input type="radio"/> Never had sex | <input type="radio"/> Never had sex |

105. How many times in the past 12 months have you:

105a) Been arrested?

- Never
- 1 - 2 times
- 3 - 5 times
- 6 - 9 times
- 10 - 19 times
- 20 - 29 times
- 30 - 39 times
- 40 and more times

105b) Attacked someone with the intention of seriously hurting them?

- Never
- 1 - 2 times
- 3 - 5 times
- 6 - 9 times
- 10 - 19 times
- 20 - 29 times
- 30 - 39 times
- 40 and more times

105c) Been drunk or high at school?

- Never
- 1 - 2 times
- 3 - 5 times
- 6 - 9 times
- 10 - 19 times
- 20 - 29 times
- 30 - 39 times
- 40 and more times

106. How old were you when you first:

106a) Got suspended from school for violence?

- | | |
|---|---------------------------------------|
| <input type="radio"/> Never | <input type="radio"/> 14 yrs |
| <input type="radio"/> 10 yrs or younger | <input type="radio"/> 15 yrs |
| <input type="radio"/> 11 yrs | <input type="radio"/> 16 yrs |
| <input type="radio"/> 12 yrs | <input type="radio"/> 17 yrs or older |
| <input type="radio"/> 13 yrs | |



106. How old were you when you first (cntd):

106b) Got arrested?

- Never 14 yrs
- 10 yrs or younger 15 yrs
- 11 yrs 16 yrs
- 12 yrs 17 yrs or older
- 13 yrs

106c) Carried a gun?

- Never 14 yrs
- 10 yrs or younger 15 yrs
- 11 yrs 16 yrs
- 12 yrs 17 yrs or older
- 13 yrs

106d) Attacked someone with the intention of seriously hurting them?

- Never 14 yrs
- 10 yrs or younger 15 yrs
- 11 yrs 16 yrs
- 12 yrs 17 yrs or older
- 13 yrs

106e) Belonged to a group (gang, crew, etc.)?

- Never 14 yrs
- 10 yrs or younger 15 yrs
- 11 yrs 16 yrs
- 12 yrs 17 yrs or older
- 13 yrs

107. If you are in trouble with a specific member of another group (gang, crew, etc.), do you have a group/crew to support and defend you?

- Yes No

108. Have you been bullied?

In your life:

- Yes No

If you have never bullied, go to question #110.

Last 12 Months:

- Yes No

Last 30 days:

- Yes No

109. How were you bullied most often? **(Choose all that apply)**

- Kicked, pushed or shoved
- Made fun of because of race/color
- Made fun of because of religion
- Made fun of because of sexual orientation
- Made fun of about your body (homosexual/heterosexual)
- Left out of activities
- On social media (Facebook, Twitter, Instagram, etc.)
- Teased about the school that you attend
- Some other way:

110. I or someone I know was the victim of violence at school sometime in the last year.

- Yes No

111. In my school, violence is:

- Not a problem
- Quite serious
- Somewhat serious
- Very serious

112. Do you know anyone who has carried a weapon (such as gun, knife or club) **to your school?**

- Yes No

113. Do you have access to a gun?

- Yes No

114. Have you ever used any other weapons (apart from a gun) to injure someone?

- Yes No

If yes, which weapons have you used? **(Choose all that apply)**

- Knife
- Razor
- Machete
- Club, stick, bat or pipe
- Scissors
- Other



115. In the last 12 months, how many times were you in a physical fight on school property?

- Never
- Once
- 2 or 5 times
- 6 - 10 times
- More than 10 times

116. Have you ever fought: **(Choose all that apply)**

- for money
- to defend a girlfriend/boyfriend
- to defend a brother/sister
- to defend other family member
- for a friend
- Never fought in my life

HEALTH AND FEELINGS

117. How do you rate your mental or emotional health?

- Excellent
- Very good
- Good
- Fair
- Poor

118. In the past 12 months, how many times did you see a doctor, nurse or counsellor about your mental or emotional health?

- Didn't see a doctor/nurse/counsellor
- Once
- 2 - 5 times
- 6 - 10 times
- More than 10 times

119. In the last 30 days, about how often did you...

119a) Feel nervous?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119b) Feel hopeless?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119c) Feel restless or fidgety?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119d) Feel depressed (sad) that nothing could cheer you up?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119e) Feel that everything was an effort/hard to do?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119f) Feel useless?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

119g) Feel anxious?

- At no time
- A little of the time
- Some of the time
- Most of the time
- All of the time

120. How much do you agree or disagree with the following statement: On a whole, I am satisfied with myself.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree



121a) Have you ever seriously considered attempting suicide?

In your Lifetime: Yes No

Last 12 months: Yes No

Last 30 days: Yes No

121b) Did you actually attempt suicide?

In your Lifetime: Yes No Never attempted suicide

Last 12 months: Yes No Never attempted suicide

Last 30 days: Yes No Never attempted suicide

121c) Did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

In your Lifetime: Yes No Never attempted suicide

Last 12 months: Yes No Never attempted suicide

Last 30 days: Yes No Never attempted suicide

122a) Have you ever been physically abused?

Yes No

122b) Have you ever been sexually abused?

Yes No

122c) Were you abandoned by your parent(s) before the age of 17 years?

Yes No

FAMILY UPBRINGING

123. The rules about alcohol, cigarettes and other drugs in my family are clear.

Yes No

124. Do you share your thoughts and feelings with an adult **outside of school**?

Yes No

If yes, who? **(Choose all that apply)**

- Both birth parents
- Adoptive parent(s)
- Birth mother only
- Birth father only
- Stepfather/Stepmother
- Other relatives (uncles, grand parents, etc)
- Foster parents
- Other adult:

125. People in my family often insult or yell at each other.

Yes

No

126. When I am not at home, one of my parent(s)/caregiver(s) knows where I am and who I am

Yes

No

I am not sure

127. If I had a personal problem, I could ask an adult outside of school for help.

Yes

No

I am not sure

128. My parent(s) or caregiver(s) give me lots of opportunities to do fun things with them.

Yes

No

129. My parent(s) or caregiver(s) ask if I've gotten my homework done.

Yes

No

130. Would your parent(s) or caregiver(s) know if you did not come home on time?

Yes

No

Not sure

131. Are there activities you and your family do together (dinner, beach, church, trips, etc.)?

Yes

No



FINAL COMMENTS

129. Overall, how easy did you find this questionnaire to understand and complete?

- Not at all easy
- Somewhat easy
- Fairly easy
- Very easy

130. What are your thoughts on the length of this questionnaire?

- Much too long
- A bit too long
- About right
- A bit too short

131. In your opinion, do you think the questions asked in this survey make most students...

- Very uncomfortable
- Somewhat uncomfortable
- Not at all uncomfortable

132. In your opinion, what other questions should be included in this survey?

Thank you for your participation in this survey!

Please indicate the time you finish the survey:

: am/pm (For example, 09:00am/pm)



APPENDIX C- References

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