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Youth Drug Use Little Improved In Class of '85, U-M Survey Shows

EDITORS: Further information may be obtained from Dr. Lloyd D. Johnston, program director of the study, at the U-M Institute for Social Research, (313) 763-5043.

ANN ARBOR---A five-year decline in drug use among America's high school students appears to have stalled in 1985, University of Michigan researchers report.

The 11th nationwide survey of high school seniors indicates that an overall decline in the use of both licit and illicit drugs recorded over the past several years did not continue this year.

The latest survey, conducted in 132 U.S. high schools, showed that marijuana use is no longer declining, as it had been since 1979, nor is the use of such drugs as tranquilizers, barbiturates, alcohol and cigarettes.

In fact, the use of some drugs, which until this year had been either level or declining, showed increases in 1985. These include cocaine, PCP, and opiates other than heroin.

The U-M study, "Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth," is directed by three social psychologists, Lloyd D. Johnston, Jerald G. Bachman and Patrick M. O'Malley, at the U-M Institute for Social Research.

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"We are concerned that the steady, if gradual, progress in this important class of problem behaviors for American young people is showing signs of coming to an end," Johnston said of this year's results.

"Beginning about 1980, there was an important turnaround in young people's attitudes about abusable substances after nearly two decades of continuous increases in use. This year, however, only three drugs showed continued decline---amphetamines ("uppers"), methaqualone, and to a lesser extent, LSD."

After marijuana, amphetamines constitute the second largest class of illicitly used substances (26 percent of seniors report nonmedical use at some time), and the U-M investigators consider the continuing decline in their use to be important.

Methaqualone use is less widespread (less than 7 percent of the class of 1985 had tried it) and has been declining since 1982. The investigators emphasize that this year's decline may reflect decreased availability since legal production and distribution of methaqualone was halted roughly a year before the 1985 survey.

"We do not want to understate the substantial improvement which has been made," Johnston said. "Daily marijuana use now is less than half of what it was in 1978 (5 percent versus 11 percent) and the statistics for a number of other drugs are appreciably lower now than they were at their peak levels——including tranquilizers, barbiturates, LSD, PCP and heroin.

"However, the rates of illicit drug use which exist among American young people today are still troublesomely high and certainly remain higher than in any other industrialized nation in the world. Add to that the fact that the use of one of the most dependence-producing substances known to man---cocaine---is once again increasing and you have grounds for real concern."

Cocaine has been tried by 17 percent of this year's seniors---the highest rate observed so far in the continuing study.

"Cocaine use is up in 1985 among virtually all of the subgroups we examined, among both males and females, college-bound and non college-bound, rural and urban areas, and all regions of the country except the South," Johnston said. "While this year's increase is not dramatic, it breaks a pattern of stability which has held for the preceding five years."

The U-M investigators fear that the rate of use in this graduating senior class may increase substantially in the next few years, judging by the records of past classes. (Some members of each class are followed up by mail questionnaires for several years after graduation.)

In the class of 1976, for example, only 10 percent had tried cocaine by their senior year, but nearly 40 percent had tried it by age 27.

About 80 percent of the seniors acknowledged the harmful effects of using cocaine regularly (an increase of 10 percent since 1979), but only about one-third (34 percent) see much risk in experimenting with it (up only 3 percent since 1979).

"It is important that the general public comes to recognize the insidious way in which a severe cocaine dependency develops, or we are going to see an already serious epidemic expand even further," Johnston emphasized. "Certainly the best way to avoid becoming one of the casualties is never to start using this drug in the first place."

PCP is another dangerous substance—because of its unpredictable and often violent effects—which showed some evidence of increased use this year. Relatively few students have tried this drug (about 5 percent in this year's class), and use appears concentrated in a few major cities. Further, the U-M study indicates that usage rates today are less than half of what they were in 1979. Nevertheless, the investigators believe the apparent reversal in this trend should be monitored closely, given the extreme danger associated with PCP.

Overall, some 61 percent of the class of 1985 admitted trying an illicit drug at some time in their lives, with 40 percent using an illicit drug other than marijuana——figures almost identical to last year's class. Active use in the month prior to the survey was reported by 30 percent, with half of them having used an illicit drug other than marijuana, and half using marijuana only.

These overall figures for active use are from one-fourth to one-third lower than in their peak years, but no lower than they were in 1984.

Regarding alcohol and cigarettes, the two legal drugs in the study, there was little change in overall use of alcohol. There was a slight increase in daily use (now at 5 percent) and a slight decrease in monthly and annual use. Occasions of heavy drinking (five or more drinks in a row during the prior two weeks), which last year showed a small decline from 41 to 39 percent, declined again in 1985, from 39 to 37 percent.

(7) Drug Study

"Still, these figures are disturbing to many people, since nearly half (45 percent) of the boys and over one-fourth (28 percent) of the girls report drinking this heavily at least once in the prior two weeks," Johnston observed.

Of cigarettes, Johnston says: "In the long run, smoking cigarettes will probably cut short the lives of more of this group of young Americans than will the use of all the other drugs combined. One in five seniors currently is a daily smoker. While this rate is lower than the peak year of 1977, it is up from last year."

Daily smoking stood at 29 percent in 1977, dropped to 19 percent in 1984, and rose to 20 percent in the class of 1985.

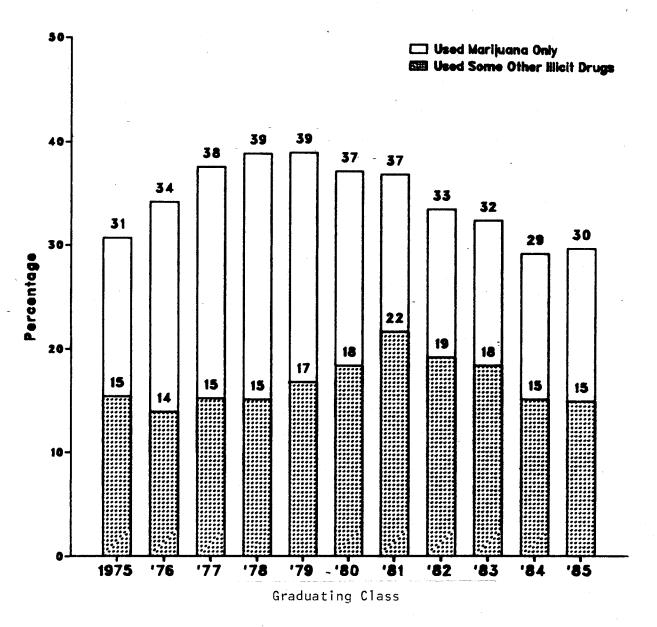
Johnston concludes: "Clearly the lesson to be drawn from these findings is that we cannot take the improvement of recent years for granted. The reduction of drug use from its disturbingly high levels is going to take a sustained, long-term effort on the part of all sectors of society—parents, educators, the entertainment industry, professional athletes, government leaders, and young people themselves."

(NOTE: The 16,000 students surveyed this year comprise a representative national sample of all seniors in public and private high schools in the coterminous United States, as have the samples from all previous years. A monograph on the findings reported here will be available early next year from the National Clearinghouse on Drug Abuse Information, 5600 Fishers Lane, Rockville, Md 20857. Monitoring the Future is supported by research grants from the National Institute on Drug Abuse.)

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(ISR: Johnston; Bachman; O'Malley)(R1-3; ISR; SW; Ed1-4; X1, 2, 9; RTsp)[4310]

Trends in 30-Day Prevalence of an Illicit Drug Use Index All Seniors



NOTE: Top of each bar indicates percentage of seniors using any illicit drug during the month preceding the survey.

TAF 77
Trends in Lifetime Prevalence of Sixteen Types of Drugs

	Percent ever used											
	Class of 1975	Class of 1976	Class of 1977	Class of 1978	Class of 1979	Class of 1980	Class of 1981	Class of 1982	Class of 1983	Class of 1984	Class of 1985	'84-'85 change
Approx. N =	(9490)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	
Marijuana/Hashish	47.3	52.8	56.4	59.2	60.4	60.3	59.5	58.7	57.0	54.9	54.2	-0.7
Inhalants ^a Inhalants Adjusted ^b	NA NA	10.3 NA	11.1 NA	12.0 NA	12.7 18.7	11.9 17.6	12.3 17.4	12.8 18.0	13.6 18.8	14.4 19.0	15.4 17.9	+ 1.0 - 1.1
Amyl & Butyl Nitrites ^c	NA	NA	NA	NA	11.1	11.1	10.1	9.8	8.4	8.1	7.9	-0.2
Hallucinogens Hallucinogens Adjusted ^d	16.3 NA	15.1 NA	13.9 NA	14.3 NA	14.1 18.6	13.3 15.7	13.3 15.7	12.5 15.0	11.9 14.7	10.7 13.3	10.3 12.2	-0.4 -1.1
LSD PCP ^c	11.3 NA	11.0 NA	9.8 NA	9.7 NA	9.5 12.8	9.3 9.6	9.8 7.8	9.6 6.0	8.9 5.6	8.0 5.0	7.5 4.9	-0.5 -0.1
Cocaine	9.0	9.7	10.8	12.9	15.4	15.7	16.5	16.0	16.2	16.1	17.3	+ 1.2
Heroin	2.2	1.8	1.8	1.6	1.1	1.1	1.1	1.2	1.2	1.3	1.2	-0.1
Other opiates ⁶	9.0	9.6	10.3	9.9	10.1	9.8	10.1	9.6	9.4	9.7	10.2	+0.5
Stimulants ^e Stimulants Adjusted ^{e,f}	22.3 NA	22.6 NA	23.0 NA	22.9 NA	24.2 NA	26.4 NA	32.2 NA	35.6 27.9	35.4 26.9	NA 27.9	NA 26.2	NA -1.7
Sedatives ⁶	18.2	17.7	17.4	16.0	14.6	14.9	16.0	15.2	14.4	13.3	11.8	- 1.5s ·
Barbitura <i>tes ⁶</i> Methaqualone ⁶	16.9 8.1	16.2 7.8	15.6 8.5	13.7 7.9	11.8 8.3	11.0 9.5	11.3 10.6	10.3 10.7	9.9 10.1	9.9 8.3	9.2 6.7	-0.7 -1.6ss
Tranquilizers [®]	17.0	16.8	18.0	17.0	16.3	15.2	14.7	14.0	13.3	12.4	11.9	-0.5
Alcohol	90.4	91.9	92.5	93.1	93.0	93.2	92.6	92.8	92.6	92.6	92.2	-0.4
Cigarettes	73.6	75.4	75.7	75.3	74.0	71.0	71.0	70.1	70.6	69.7	68.8	-0.9

NOTES: Level of significance of difference between the two most recent classes: s=.05, ss=.01, sss=.001. NA indicates data not available.

^aData based on four questionnaire forms. N is four-fifths of N indicated.

Adjusted for underreporting of amyl and butyl nitrites. See text for details.

^cData based on a single questionnaire form. N is one-fifth of N indicated.

dAdjusted for underreporting of PCP. See text for details.

^eOnly drug use which was not under a doctor's orders is included here.

fAdjusted for overreporting of non-prescription stimulants.

TABLE 8 Trends in Annual Prevalence of Sixteen Types of Drugs

	Percent who used in last twelve months											
	Class of 1975	Class of 1976	Class of 1977	Class of 1978	Class of 1979	Class of 1980	Class of 1981	Class of 1982	Class of 1983	Class of 1984	Class of 1985	'84-'85 change
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	
Marijuana/Hashish	40.0	44.5	47.6	50.2	50.8	48.8	46.1	44.3	42.3	40.0	40.6	+0.6
Inhalants ^a Inhalants Adjusted ^b	NA NA	3.0 NA	3.7 NA	4.1 NA	5.4 9.2	4.6 7.8	4.1 6.0	4.5 6.6	4.3 6.7	5.1 7.9	5.7 7.2	+0.6 -0.7
Amyl & Butyl Nitrites ^C	NA	NA	NA	NA	6.5	5.7	3.7	3.6	3.6	4.0	4.0	0.0
Hallucinogens Hallucinogens Adjusted ^d	11.2 NA	9.4 NA	8.8 NA	9.6 NA	9.9 12.8	9.3 10.6	9.0 10.1	8.1 9.3	7.3 9.3	6.5 7.9	6.3 7.7	-0.2 -0.2
LSD PCP ^c	7.2 NA	6.4 NA	5.5 NA	6.3 NA	6.6 7.0	6.5 4.4	6.5 3.2	6.1 2.2	5.4 2.6	4.7 2.3	4.4 2.9	-0.3 +0.6
Cocaine	5.6	6.0	7.2	9.0	12.0	12.3	12.4	11.5	11.4	11.6	13.1	+ 1.5s
Heroin	1.0	0.8	0.8	0.8	0.5	0.5	0.5	0.6	0.6	0.5	0.6	+0.1
Other opiates ^e	5.7	5.7	6.4	6.0	6.2	6.3	5.9	5.3	5.1	5.2	5.9	+0.7s
Stimulants ^e Stimulants Adjusted ^{e,f}	16.2 NA	15.8 NA	16.3 NA	17.1 NA	18.3 NA	20.8 NA	26.0 NA	26.1 20.3	24.6 17.9	NA 17.7	NA 15.8	NA - 1.9ss
Sedatives ^e	11.7	10.7	10.8	9.9	9.9	10.3	10.5	9.1	7.9	6.6	5.8	-0.8
Barbiturates ^e Methaqualone ^e	10.7 5.1	9.6 4.7	9.3 5.2	8.1 4.9	7.5 5.9	6.8 7.2	6.6 7.6	5.5 6. 8	5.2 5.4	4.9 3.8	4.6 2.8	-0.3 -1.0ss
Tranquilizers e	10.6	10.3	10.8	9.9	9.6	8.7	8.0	7.0	6.9	6.1	6.1	0.0
Alcohol	84.8	85.7	87.0	87.7	88.1	87.9	87.0	86.8	87.3	86.0	85.6	-0.4
Cigarettes	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

NOTES: Level of significance of difference between the two most recent classes: s = .05, ss = .01, sss = .001. NA indicates data not available.

aData based on four questionnaire forms. N is four-fifths of N indicated.

Adjusted for underreporting of amyl and butyl nitrites. See text for details.

dData based on a single questionnaire form. N is one-fifth of N indicated.

Adjusted for underreporting of PCP. See text for details.

fOnly drug use which was not under a doctor's orders is included here.

Adjusted for overreporting of non-prescription stimulants.

TAB 2 9
Trends in Thirty-Day Prevalence of Sixteen Types of Drugs

Percent who used in last thirty days Class **'84-'85** of 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 change (15900) Approx. N =(9400) (15400)(17100)(17800)(15500)(17500)(17700)(16300)(15900)(16000)Marijuana/Hashish 31.6 28.5 27.0 +0.527.1 32.2 35.4 37.1 36.5 33.7 25.2 25.7 Inhalants^a NA 0.9 1.7 1.9 2.2 +0.31.3 1.5 1.7 1.4 1.5 1.5 Inhalants Adjusted^b NA NA 2.7 2.7 2.9 +0.2NA NA 3.1 2.7 2.3 2.5 Amyl & Butyl Nitrites^C +0.2NA NA NA NA 2.4 1.8 1.4 1.1 1.4 1.4 1.6 Hallucinogens 4.7 3.4 4.1 3.9 4.0 3.7 3.7 3.4 2.8 2.6 2.5 -0.1Hallucinogens Adjusted^d NA 3.8 3.6 4.2 +0.6NA NA NA 5.5 4.4 4.4 4.3 LSD 2.3 1.9 2.1 2.1 2.4 2.3 2.5 2.4 1.9 1.5 1.6 +0.1PCP^C NA NA NA NA 2.4 1.4 1.4 1.0 1.3 1.0 1.6 +0.6 5.0 4.9 5.8 6.7 +0.9sCocaine 1.9 2.0 2.9 3.9 5.7 5.2 5.8 Heroin 0.4 0.2 0.3 0.3 0.2 0.2 0.2 0.2 0.2 0.30.3 0.0 Other opiates 2.0 2.8 2.4 2.1 1.8 1.8 1.8 2.3 +0.5s2.1 2.1 2.4 Stimulantse N۸ 8.5 7.7 8.8 8.7 9.9 12.1 15.8 13.7 12.4 NA Stimulants Adjusted e,f NA NA NA NA NA NA 10.7 8.9 8.3 6.8 -1.588NA Sedativese 4.6 3.4 3.0 2.3 2.4 +0.15.4 4.5 5.1 4.2 4.4 4.8 Barbiturates 2.0 +0.34.7 3.9 4.3 3.2 3.2 2.9 2.6 2.0 2.1 1.7 Methaqualone 1.0 2.1 1.6 2.3 1.9 2.3 3.3 3.1 2.4 1.8 1.1 -0.1Tranquilizers^e 4.1 4.0 4.6 3.4 3.7 3.1 2.7 2.4 2.5 2.1 2.1 0.0 Alcohol 68.2 68.3 71.2 72.1 71.8 72.0 70.7 69.7 69.4 67.2 65.9 -1.336.7 38.4 30.5 29.4 30.0 30.3 29.3 30.1 +0.8Cigarettes 38.8 36.7 34.4

NOTES: Level of significance of difference between the two most recent classes: s = .05, ss = .01, sss = .001.

NA indicates data not available.

⁸Data based on four questionnaire forms. N is four-fifths of N indicated. Adjusted for underreporting of amyl and butyl nitrites. See text for details.

CData based on a single questionnaire form. N is one-fifth of N indicated.

Adjusted for underreporting of PCP. See text for details.

Only drug use which was not under a doctor's orders is included here.
Adjusted for overreporting of non-prescription stimulants.

TABLE 10 Trends in Thirty-Day Prevalence of Daily Use of Sixteen Types of Drugs

	Percent who used daily in last thirty days											
	Class of 1975	Class of 1976	Class of 1977	Class of 1978	Class of 1979	Class of 1980	Class of 1981	Class of 1982	Class of 1983	Class of 1984	Class of 1985	84-85 change
Approx. N =	(9400)	(15400)	(17,100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	
Marijuana/Hashish	6.0	8.2	9.1	10.7	10.3	9.1	7.0	6.3	5.5	5.0	4.9	-0.1
Inhalants ^a Inhalants Adjusted ^b	NA NA	0.0 NA	0.0 NA	0.1 NA	0.0 0.1	0.1 0.2	0.1 0.2	0.1 0.2	0.1 0.2	0.1 0.2	0.2 0.4	+0.1 +0.2
Amyl & Butyl Nitrites ^C	NA	NA	NA	NA	0.0	0.1	0.1	0.0	0.2	0.1	0.3	+0.2
Hallucinogens Hallucinogens Adjusted ^d	0.1 NA	0.1 NA	0.1 NA	0.1 NA	0.1 0.2	0.1 0.2	0.1 0.1	0.1 0.2	0.1 0.2	0.1 0.2	0.1 0.3	0.0 +0.1
LSD PCP ^c	0.0 N A	0.0 NA	0.0 NA	0.0 NA	0.0 0.1	0.0 0.1	0.1 0.1	0.0 0.1	0.1 0.1	0.1 0.1	0.1 0.3	0.0 +0.2
Cocaine	0.1	0.1	0.1	0.1	0.2	0.2	0.3	0.2	0.2	0.2	0.4	+0.19
Heroin	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Other opiates ^e	0.1	0.1	0.2	0.1	0.0	0.1	0.1	0.1	0.1	0.1	0.1	0.0
Stimulants ^e Stimulants Adjusted ^{e,f}	0.5 N A	0.4 NA	0.5 NA	0.5 NA	0.6 NA	0.7 NA	1.2 NA	1.1 0.7	1.1 0.8	NA 0.6	NA 0.4	NA -0.2
Sedatives ^e	0.3	0.2	0.2	0.2	0.1	0.2,	0.2	0.2	0.2	0.1	0.1	0.0
Barbiturates ^e Methaqualone	0.1 0.0	0.1 0.0	0.2 0.0	0.1 0.0	0.0 0.0	0.1 0.1	0.1 0.1	0.1 0.1	0.1 0.0	0.0	0.1 0.0	+0.08
Tranquilizers e	0.1	0.2	0.3	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.0	-0.0 g
Alcohol	5.7	5.6	6.1	5.7	6.9	6.0	6.0	5.7	5.5	4.8	5.0	+0.2
Cigarettes	26.9	28.8	28.8	27.5	25.4	21.3	20.3	21.1	21.2	18.7	19.5	+0.8

NOTES: Level of significance of difference between the two most recent classes: s = .05, ss = .01, sss = .001. NA indicates data not available.

a Data based on four questionnaire forms. N is four-fifths of N indicated.

Adjusted for underreporting of amyl and butyl nitrites. See text for details.

a Data based on a single questionnaire form. N is one-fifth of N indicated.

Adjusted for underreporting of PCP. See text for details.

e Only drug use which was not under a doctor's orders is included here.

Adjusted for overreporting of non-prescription stimulants.

Any apparent inconsistency between the change estimate and the prevalence estimates for the two most recent classes is due to rounding error.