

The University of Michigan

News and Information Services

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February 20, 1987

Contact: Gil Goodwin

Phone: (313)747-1844

Illicit drug use by American high school seniors resumed its gradual decline in 1986, but not among cocaine users; U-M survey shows drug use levels remain extremely high. First national data on crack reported.

EDITORS: Further information may be obtained from Dr. Lloyd Johnston at the U-M's Institute for Social Research (313) 763-5043. A simultaneous release on the results of this study is being issued by the National Institute on Drug Abuse, sponsoring agency for the ISR research. Contact Lucy Walker at (301) 443-6245.

FOR RELEASE 12 NOON MONDAY, FEBRUARY 23, 1987

ANN ARBOR---The gradual decline in drug use by young Americans resumed in 1986---after a year's interruption---but well over half of all high school seniors still report having had some experience with illicit drugs, according to researchers at The University of Michigan's Institute for Social Research (ISR).

A notable exception to the pattern of decline, however, occurred in the case of cocaine, which remained at peak levels among students despite increased public attention to its dangers.

Overall use of illicit drugs by American young people continues to be extremely high in comparison to other industrialized countries or our own past, the U-M investigators noted.

Reporting on the 12th national survey of nearly 130 high schools, ISR social scientists Lloyd D. Johnston, Jerald G. Bachman and Patrick M. O'Malley said that the proportion of seniors indicating any experience with illicit drugs in their lifetime fell modestly, from 61 percent in 1985 to 58 percent in 1986. Prior-month use (that is, current use) was reported by 27 percent of the students in 1986, down from 30 percent in 1985.

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"What is most significant about these results," Johnston said, "is that the stall we observed in 1985, in an otherwise continuous decline over several years, was just that---a stall. It was not the end of the decline, nor the beginning of a turnaround in drug use, as some had feared."

The proportion of seniors who have at some time used an illicit drug has now fallen from a peak of around 66 percent in 1981 to last year's 58 percent, a decline in lifetime use that Johnston describes as "rather modest." The decline in current use has been more sizable, a drop of nearly one-third from 39 percent in 1979 to 27 percent in 1986.

Significant declines were observed in 1986 in the use of marijuana, amphetamine stimulants and methaqualone. Usage rates were relatively unchanged for PCP, LSD and heroin, drug classes whose use declined earlier and remains quite low. Long-term gradual declines continued in the use of barbiturates and tranquilizers.

The proportion of seniors reporting prior-month use of marijuana fell from 26 percent in 1985 to 23 percent last year, a figure more than one-third below the 1978 peak level of 37 percent. Daily marijuana use was down from 5 percent in 1985 to 4 percent in 1986, but far below its peak of 11 percent in 1978.

Current use of amphetamines, once second in prevalence, stood at 5.5 percent in 1986, down more than half from a peak level of about 13 percent in 1981. Cocaine is now the second most used illicit drug among high school seniors.

The 1986 survey showed no appreciable change from the prior year in overall use of cocaine. One senior in six (17 percent) had tried cocaine, 13 percent had used it in the prior year, 6 percent in the prior month.

"This is an instance where a lack of change is quite significant," Johnston explained, "because it means that cocaine use remained at peak levels in this group despite accumulating evidence of, and public attention to, its addictive potential and possible toxic effects."

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While a majority of student respondents recognized great risk in occasional use of cocaine (54 percent) and regular use (82 percent), only about one-third (34 percent) saw experimenting with cocaine as endangering the user.

"As recently as last spring, a great many young people still seemed to think that they could play around with cocaine and not run much of a risk, even though an increasing number were coming to recognize that regular use is very dangerous," Johnston said. "Of course some dramatic events have occurred since the last survey was completed---including the untimely deaths of sports figures Len Bias and Don Rogers---which one would hope have had some impact."

While the proportion of high school students using cocaine has not changed much since 1980, the investigators report some important qualitative changes.

Since 1983, they say, there has been an increase in the number of frequent cocaine users, an increase in the number of students who reported difficulty in discontinuing their use, and an increase in the number smoking cocaine, including "crack"---a potent, smokable form of the drug.

Daily use of cocaine roughly doubled between 1983 and 1986, from 0.2% to 0.4%, the highest level observed so far. (Regarding increased dependence, the proportion of all seniors who said they used cocaine in the last year and were unable to stop using it at some time also doubled from 0.4% in 1983 to 0.8% in 1986 (0.8% corresponds to roughly 25,000 seniors nationwide.)

"Certainly one reason for the increased rate of subjectively reported dependence is the increase in the proportion of students smoking cocaine," Johnston explained. "While the proportion of students indicating they smoked cocaine in the past year hovered around 2.5 percent between 1979 and 1983, since then it has risen steadily to reach 6 percent of all seniors by 1986."

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"Undoubtedly crack has been an important contributor to the growth of this more dangerous mode of ingestion" explained Johnston. "While we will have more information on crack use next year than is available at present; what we do have indicates that this particularly dangerous form of cocaine has reached communities throughout the country. It is not confined to a few large cities, as many had hoped."

One senior in 25 or 4.1% confirmed the use of crack at least once in the year prior to the 1986 survey. One-third of all prior-year cocaine users had some experience with crack.

Crack users have a demographic profile similar to that of users of the powdered form of cocaine: Males are somewhat more likely to be users than females; use is higher in the Northeastern and Western regions than in the North Central and Southern regions, and use is higher in more urban areas than in less urban ones. The crack user profile differs from powder cocaine in being even more concentrated among non-college-bound students.

About half of the high schools in the study showed some reported crack use. The highest percentage reported for prior-year crack users in a single school was 18 percent. Non-urban communities in the South appeared to be least affected by crack cocaine.

Johnston's assessment is that "crack has become available rather widely across the country, but the rapid and dramatic spread of public information about its dangers has helped to stem what might have been a much larger epidemic. Nevertheless, there is enough use out there already---and a sufficiently widespread availability---to be cause for continued concern."

In its look at the two major licit drugs, the ISR survey found little change in alcohol use in 1986 and only a slight drop in cigarette smoking.

Alcohol is widely and frequently used by high school students. Nearly two-thirds of the seniors reported using it in the 30 days prior to the survey, 37 percent admitted having five or

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more drinks in a row at least once in the prior two weeks, and 5 percent reported daily or near-daily use in the prior month.

Johnston said, "Cigarette smoking among American teenagers dropped by about one-quarter to one-third some years back. But in recent years, there has been little further progress."

He noted that daily use of cigarettes fell from 21 percent to 19 percent between 1980 and 1985. The number of half-a-pack or more smokers was down slightly, which may be attributed in part to the proliferation of no-smoking policies in schools and work places.

"Nevertheless," Johnston said, "we seem to be making very little progress in reducing the onset of this deadly addiction among our children---an addiction which probably will cut short the lives of more of them than will all of the other drugs combined."

"The fact that smoking rates among teenagers are changing so little is of particular importance, since it is during the teens that the vast majority of smokers establish their smoking habit. In fact, it is somewhat surprising that smoking levels are not dropping more among teenagers, considering the large changes in societal norms which have been taking place."

In commenting on the significance of the overall 1986 results, the investigators point out that while progress in reducing the use of illicit drugs was modest, it is encouraging. "The fact that illicit drug use overall is once again decreasing in popularity, albeit slowly, is the most encouraging part of the story", concludes Johnston. "But the fact that there is an increasing use of cocaine in its most addicting form is certainly a sobering counterweight. Further, the overall levels of illicit drug use by our young people remain extremely high, both by historical standards in this country and by comparison to virtually all of the industrialized world. In addition, we know that these adolescents will carry their drug habits into their twenties, as they enter the work force. Clearly, a great deal remains to be done."

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TABLE 7
Trends in Lifetime Prevalence of Sixteen Types of Drugs

| | Percent ever used | | | | | | | | | | | | '85-'86 change |
|-------------------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|--------------------|
| | 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 | Class of 1986 | |
| Approx. N = | (9400) | (15400) | (17100) | (17800) | (15500) | (15900) | (17500) | (17700) | (16300) | (15900) | (16000) | (15200) | |
| Marijuana/Hashish | 47.3 | 52.8 | 56.4 | 59.2 | 60.4 | 60.3 | 59.5 | 58.7 | 57.0 | 54.9 | 54.2 | 50.9 | -3.3 _{ss} |
| Inhalants ^a | NA | 10.3 | 11.1 | 12.0 | 12.7 | 11.9 | 12.3 | 12.8 | 13.6 | 14.4 | 15.4 | 15.9 | +0.5 |
| Inhalants Adjusted ^b | NA | NA | NA | NA | 18.2 | 17.3 | 17.2 | 17.7 | 18.2 | 18.0 | 18.1 | 20.1 | +2.0 _s |
| Amyl & Butyl Nitrites ^c | NA | NA | NA | NA | 11.1 | 11.1 | 10.1 | 9.8 | 8.4 | 8.1 | 7.9 | 8.6 | +0.7 |
| Hallucinogens | 16.3 | 15.1 | 13.9 | 14.3 | 14.1 | 13.3 | 13.3 | 12.5 | 11.9 | 10.7 | 10.3 | 9.7 | -0.6 |
| Hallucinogens Adjusted ^d | NA | NA | NA | NA | 17.7 | 15.6 | 15.3 | 14.3 | 13.6 | 12.3 | 12.1 | 11.9 | -0.2 |
| LSD | 11.3 | 11.0 | 9.8 | 9.7 | 9.5 | 9.3 | 9.8 | 9.6 | 8.9 | 8.0 | 7.5 | 7.2 | -0.3 |
| PCP ^e | NA | NA | NA | NA | 12.8 | 9.6 | 7.8 | 6.0 | 5.6 | 5.0 | 4.9 | 4.8 | -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 | 16.9 | -0.4 |
| Heroin | 2.2 | 1.8 | 1.8 | 1.6 | 1.1 | 1.1 | 1.1 | 1.2 | 1.2 | 1.3 | 1.2 | 1.1 | -0.1 |
| Other opiates ^g | 9.0 | 9.6 | 10.3 | 9.9 | 10.1 | 9.8 | 10.1 | 9.6 | 9.4 | 9.7 | 10.2 | 9.0 | -1.2 _s |
| Stimulants ^g | 22.3 | 22.6 | 23.0 | 22.9 | 24.2 | 26.4 | 32.2 | 35.6 | 35.4 | NA | NA | NA | NA |
| Stimulants Adjusted ^{g,f} | NA | NA | NA | NA | NA | NA | NA | 27.9 | 26.9 | 27.9 | 26.2 | 23.4 | -2.8 _{ss} |
| Sedatives ^g | 18.2 | 17.7 | 17.4 | 16.0 | 14.6 | 14.9 | 16.0 | 15.2 | 14.4 | 13.3 | 11.8 | 10.4 | -1.4 _s |
| Barbiturates ^g | 16.9 | 16.2 | 15.6 | 13.7 | 11.6 | 11.0 | 11.3 | 10.3 | 9.9 | 9.9 | 9.2 | 8.4 | -0.8 |
| Methaqualone ^g | 8.1 | 7.8 | 8.5 | 7.9 | 8.3 | 9.5 | 10.6 | 10.7 | 10.1 | 8.3 | 6.7 | 5.2 | -1.5 _{ss} |
| Tranquilizers ^g | 17.0 | 16.8 | 18.0 | 17.0 | 16.3 | 15.2 | 14.7 | 14.0 | 13.3 | 12.4 | 11.9 | 10.9 | -1.0 |
| Alcohol | 90.4 | 91.9 | 92.5 | 93.1 | 93.0 | 93.2 | 92.6 | 92.8 | 92.6 | 92.6 | 92.2 | 91.3 | -0.9 |
| Cigarettes | 73.6 | 75.4 | 75.7 | 75.3 | 74.0 | 71.0 | 71.0 | 70.1 | 70.6 | 69.7 | 68.8 | 67.6 | -1.2 |

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.

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

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

^d Adjusted for underreporting of PCP. See text for details.

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

^f Adjusted for the inappropriate reporting of non-prescription stimulants.

TABLE 8
Trends in Annual Prevalence of Sixteen Types of Drugs

| | | Percent who used in last twelve months | | | | | | | | | | | | |
|-------------------------------------|-------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------|
| | Approx. N = | Class of 1975 (9400) | Class of 1976 (15400) | Class of 1977 (17100) | Class of 1978 (17800) | Class of 1979 (15500) | Class of 1980 (15900) | Class of 1981 (17500) | Class of 1982 (17700) | Class of 1983 (16300) | Class of 1984 (15900) | Class of 1985 (16000) | Class of 1986 (15200) | '85-'86 change |
| Marijuana/Hashish | | 40.0 | 44.5 | 47.6 | 50.2 | 50.8 | 48.8 | 46.1 | 44.3 | 42.3 | 40.0 | 40.6 | 38.8 | -1.8 |
| Inhalants ^a | | NA | 3.0 | 3.7 | 4.1 | 5.4 | 4.6 | 4.1 | 4.5 | 4.3 | 5.1 | 5.7 | 6.1 | +0.4 |
| Inhalants Adjusted ^b | | NA | NA | NA | NA | 8.9 | 7.9 | 6.1 | 6.6 | 6.2 | 7.2 | 7.5 | 8.9 | +1.4 _{ss} |
| Amyl & Butyl Nitrites ^c | | NA | NA | NA | NA | 6.5 | 5.7 | 3.7 | 3.6 | 3.6 | 4.0 | 4.0 | 4.7 | +0.7 |
| Hallucinogens | | 11.2 | 9.4 | 8.8 | 9.6 | 9.9 | 9.3 | 9.0 | 8.1 | 7.3 | 6.5 | 6.3 | 6.0 | -0.3 |
| Hallucinogens Adjusted ^d | | NA | NA | NA | NA | 11.8 | 10.4 | 10.1 | 9.0 | 8.3 | 7.3 | 7.6 | 7.6 | 0.0 |
| LSD | | 7.2 | 6.4 | 5.5 | 6.3 | 6.6 | 6.5 | 6.5 | 6.1 | 5.4 | 4.7 | 4.4 | 4.5 | +0.1 |
| PCP ^c | | NA | NA | NA | NA | 7.0 | 4.4 | 3.2 | 2.2 | 2.6 | 2.3 | 2.9 | 2.4 | -0.5 |
| Cocaine | | 5.6 | 6.0 | 7.2 | 9.0 | 12.0 | 12.3 | 12.4 | 11.5 | 11.4 | 11.6 | 13.1 | 12.7 | -0.4 |
| Heroin | | 1.0 | 0.8 | 0.8 | 0.8 | 0.5 | 0.5 | 0.5 | 0.6 | 0.6 | 0.5 | 0.6 | 0.5 | -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 | 5.2 | -0.7 _s |
| Stimulants ^e | | 16.2 | 15.8 | 16.3 | 17.1 | 18.3 | 20.8 | 26.0 | 26.1 | 24.6 | NA | NA | NA | NA |
| Stimulants Adjusted ^{e,f} | | NA | NA | NA | NA | NA | NA | NA | 20.3 | 17.9 | 17.7 | 15.8 | 13.4 | -2.4 _{sss} |
| Sedatives ^e | | 11.7 | 10.7 | 10.8 | 9.9 | 9.9 | 10.3 | 10.5 | 9.1 | 7.9 | 6.6 | 5.8 | 5.2 | -0.6 |
| Barbiturates ^e | | 10.7 | 9.6 | 9.3 | 8.1 | 7.5 | 6.8 | 6.6 | 5.5 | 5.2 | 4.9 | 4.6 | 4.2 | -0.4 |
| Methaqualone ^e | | 5.1 | 4.7 | 5.2 | 4.9 | 5.9 | 7.2 | 7.6 | 6.8 | 5.4 | 3.8 | 2.8 | 2.1 | -0.7 _s |
| Tranquilizers ^e | | 10.6 | 10.3 | 10.8 | 9.9 | 9.6 | 8.7 | 8.0 | 7.0 | 6.9 | 6.1 | 6.1 | 5.8 | -0.3 |
| Alcohol | | 84.8 | 85.7 | 87.0 | 87.7 | 88.1 | 87.9 | 87.0 | 86.8 | 87.3 | 86.0 | 85.6 | 84.5 | -1.1 |
| Cigarettes | | NA | 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.

^bAdjusted 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 the inappropriate reporting of non-prescription stimulants.

TABLE 9
Trends in Thirty-Day Prevalence of Sixteen Types of Drugs

| | Percent who used in last thirty days | | | | | | | | | | | | '85-'86 change |
|-------------------------------------|--------------------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|-------------------|
| | 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 | Class of 1986 | |
| Approx. N = | (9400) | (15400) | (17100) | (17800) | (15500) | (15900) | (17500) | (17700) | (16300) | (15900) | (16000) | (15200) | |
| Marijuana/Hashish | 27.1 | 32.2 | 35.4 | 37.1 | 36.5 | 33.7 | 31.6 | 28.5 | 27.0 | 25.2 | 25.7 | 23.4 | -2.3s |
| Inhalants ^a | NA | 0.9 | 1.3 | 1.5 | 1.7 | 1.4 | 1.5 | 1.5 | 1.7 | 1.9 | 2.2 | 2.5 | +0.3 |
| Inhalants Adjusted ^b | NA | NA | NA | NA | 3.2 | 2.7 | 2.5 | 2.5 | 2.5 | 2.6 | 3.0 | 3.2 | +0.2 |
| Amyl & Butyl Nitrites ^c | NA | NA | NA | NA | 2.4 | 1.8 | 1.4 | 1.1 | 1.4 | 1.4 | 1.6 | 1.3 | -0.3 |
| Hallucinogens | 4.7 | 3.4 | 4.1 | 3.9 | 4.0 | 3.7 | 3.7 | 3.4 | 2.8 | 2.6 | 2.5 | 2.5 | 0.0 |
| Hallucinogens Adjusted ^d | NA | NA | NA | NA | 5.3 | 4.4 | 4.5 | 4.1 | 3.5 | 3.2 | 3.8 | 3.5 | -0.3 |
| LSD | 2.3 | 1.9 | 2.1 | 2.1 | 2.4 | 2.3 | 2.5 | 2.4 | 1.9 | 1.5 | 1.6 | 1.7 | +0.1 |
| PCP ^c | NA | NA | NA | NA | 2.4 | 1.4 | 1.4 | 1.0 | 1.3 | 1.0 | 1.6 | 1.3 | -0.3 |
| Cocaine | 1.9 | 2.0 | 2.9 | 3.9 | 5.7 | 5.2 | 5.8 | 5.0 | 4.9 | 5.8 | 6.7 | 6.2 | -0.5 |
| Heroin | 0.4 | 0.2 | 0.3 | 0.3 | 0.2 | 0.2 | 0.2 | 0.2 | 0.2 | 0.3 | 0.3 | 0.2 | -0.1 |
| Other opiates ^e | 2.1 | 2.0 | 2.8 | 2.1 | 2.4 | 2.4 | 2.1 | 1.8 | 1.8 | 1.8 | 2.3 | 2.0 | -0.3 |
| Stimulants ^e | 8.5 | 7.7 | 8.8 | 8.7 | 9.9 | 12.1 | 15.8 | 13.7 | 12.4 | NA | NA | NA | NA |
| Stimulants Adjusted ^{e,f} | NA | NA | NA | NA | NA | NA | NA | 10.7 | 8.9 | 8.3 | 6.8 | 5.5 | -1.3ss |
| Sedatives ^e | 5.4 | 4.5 | 5.1 | 4.2 | 4.4 | 4.8 | 4.6 | 3.4 | 3.0 | 2.3 | 2.4 | 2.2 | -0.2 |
| Barbiturates ^e | 4.7 | 3.9 | 4.3 | 3.2 | 3.2 | 2.9 | 2.6 | 2.0 | 2.1 | 1.7 | 2.0 | 1.8 | -0.2 |
| Methaqualone ^e | 2.1 | 1.6 | 2.3 | 1.9 | 2.3 | 3.3 | 3.1 | 2.4 | 1.8 | 1.1 | 1.0 | 0.8 | -0.2 |
| Tranquilizers ^e | 4.1 | 4.0 | 4.6 | 3.4 | 3.7 | 3.1 | 2.7 | 2.4 | 2.5 | 2.1 | 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 | 65.3 | -0.6 |
| Cigarettes | 36.7 | 38.8 | 38.4 | 36.7 | 34.4 | 30.5 | 29.4 | 30.0 | 30.3 | 29.3 | 30.1 | 29.6 | -0.5 |

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.

^bAdjusted 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 the inappropriate reporting of non-prescription stimulants.

**Percent of 1986 High School
Seniors Using Cocaine
in Powder and Crack Forms
in Past Year**

| | Powder Form | Crack Form |
|---------------------------|-------------|------------|
| All Seniors | 12.6 | 4.1 |
| Sex | | |
| Male | 13.4 | 4.2 |
| Female | 11.1 | 3.6 |
| College Plans | | |
| None or under 4 years | 14.3 | 5.2 |
| Complete 4 years | 10.6 | 2.8 |
| Region | | |
| Northeast | 19.0 | 6.0 |
| North Central | 9.8 | 3.1 |
| South | 6.6 | 1.6 |
| West | 19.7 | 7.5 |
| Population Density | | |
| Large SMSA | 18.8 | 5.9 |
| Other SMSA | 11.2 | 3.5 |
| Non SMSA | 9.9 | 3.5 |

(N=2990)