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Teen drug use continues decline, according to U-M survey. Cocaine down for second straight year; crack begins decline in 1988.

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EDITORS: Results of the 1988 National High School Senior Survey will be presented at 10 a.m. Tuesday (Feb. 28) in the auditorium of the Hubert Humphrey Bldg., headquarters of the Department of Health and Human Services in Washington, D.C. U-M Research Scientist Dr. Lloyd Johnston will be joined by Dr. Frederick K. Goodwin, Administrator of the Alcohol, Drug Abuse and Mental Health Administration, and Dr. Charles R. Schuster, Director of the National Institute on Drug Abuse. For further information about the study findings, contact Johnston, Program Director at the U-M's Institute for Social Research, (313) 763-5043.

ANN ARBOR---Drug use among American young people in high school and college continued to decline in 1988, according to the most recent national survey by The University of Michigan's Institute for Social Research. Of particular importance, the downturn in cocaine use, which began in 1987, continued in 1988. And among high school seniors at least, crack use---which leveled in 1987---also began to decline in 1988.

These are among the central findings of the 14th national survey in the series titled "Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth." (It is also sometimes referred to as the National High School Senior Survey.)

"Nearly all of the changes revealed by the 1988 survey about illicit drug use are good news, particularly those relating to cocaine and crack. There is also some encouraging indication of a decline in alcohol consumption, but unfortunately not much improvement in the smoking rates," said U-M social psychologists Lloyd Johnston, Jerald Bachman, and Patrick O'Malley, who direct the study.

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Each year since 1975, some 16,000 to 17,000 seniors in 135 high schools nationwide have been surveyed in the study, which has been funded through a series of research grants from the National Institute on Drug Abuse. Self-completed confidential questionnaires are administered to seniors in their classrooms by U-M research personnel.

Also, each year since 1977, some participants from all previously graduated classes have been followed through the use of mailed, self-administered questionnaires. These follow-up surveys have yielded a representative sample of about 1,200 American college students (one to four years past high school) each year since 1980, and presently yield a national sample of about 11,000 young adults one to eleven years beyond high school.

Among the findings reported from the 1988 survey are the following:

Marijuana: Marijuana use continued its long-term, gradual decline among high school seniors in 1988. In the peak year of use, 1979, half of all seniors reported some use in the year prior to the survey (that is, annual prevalence was 51 percent), but by 1988 that statistic has fallen to one-third. Current daily marijuana use has fallen even more in proportional terms--from 10.7 percent in 1978 to 2.7 percent in 1988.

"We think this important decline in marijuana use has been occurring, and continues to occur, largely because of changes in the risks which young people associate with the use of this drug," stated Johnston. "In 1978, the peak year for daily use, only 35 percent of seniors thought there was a 'great risk' associated with regular marijuana use. Today that number stands at 77 percent and is still rising."

Cocaine: "We predicted such a decline in cocaine use would occur once young people began to see its use--particularly experimental and occasional use--as more risky; and that's what now seems to be happening," Johnston said. The proportion of seniors reporting any cocaine use in the prior 12 months dropped between 1986 and 1988 from 13 percent to 8 percent, following a six-year period in which use remained fairly level. Over those same two years (1986 to 1988) the proportion of seniors who said there was great risk associated with even experimenting with cocaine rose from 34 percent to 51 percent, and the proportion who saw great risk associated with occasional cocaine use rose from 54 percent to 69 percent.

Similar changes in cocaine use are occurring among American college students, where the annual prevalence rate for cocaine fell from 17 percent to 10 percent between 1986 and 1988. Cocaine use also fell among all young adults aged 19 to 28 who are high school graduates--from 20 percent annual prevalence in 1986 to 14 percent in 1988. These older age groups are also coming to see cocaine use as more dangerous than in the past.

Disapproval of cocaine use has also been rising among these age groups during the same interval. Fully 89 percent of the 1988 seniors said they personally disapprove of even experimenting with cocaine, up from 80 percent in 1986.

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Crack: "One of the most important findings from the 1988 survey," Johnston added, "is that the use of crack cocaine declined among high school seniors for the first time, and for much the same reason. That is, an increasing number of young people have come to believe that even experimentation with crack is dangerous." Lifetime prevalence of crack use fell from 5.6 percent to 4.8 percent of all seniors between 1987 and 1988, while annual prevalence fell from 4.0 percent to 3.1 percent, after having leveled off between 1986 and 1987.

Between 1987 and 1988 the proportion of seniors who said they believe that experimentation with crack involves great risk rose from 57 percent to 62 percent, while the percent saying it was readily available rose slightly. Among the young adults, there also was a significant increase in the perceived dangers of crack use, and at the same time a substantial increase in perceived availability.

"We really can't say with much certainty whether a similar decline in crack use is occurring among the high school dropout segment of the population, which constitutes about 15 percent of the age group," stated Johnston. "Without question the crack problem is particularly concentrated in this population, especially in the inner cities. However, among the majority still in high school we do not find any evidence that the improvement is concentrated in the upper socioeconomic groups, or among the most academically able, or among those with the best attendance records. This suggests that the incidence of new use may be down even among the dropouts.

"The annual prevalence of crack use showed a decline in 1988 among college students, as well, though not a statistically significant one (from 2.0 percent to 1.4 percent), but there was little change among the 19-29 year olds (from 3.0 percent to 3.1 percent)."

National Strategy: "These important changes in young people's beliefs and attitudes about these drugs, and the declines in use which have accompanied them, tell us a great deal which is relevant to our national strategy in the overall war on drugs," Johnston commented. "The declines in use have occurred in spite of a continuing increase in the availability of cocaine and crack, as reported by seniors, and a fairly constant level of availability for marijuana. In other words, these important successes have been achieved not through supply reduction: they are due almost entirely to a reduction in demand. These results say to me that demand reduction can work, has worked, and has the potential to accomplish a great deal more."

Johnston cautioned, however, "I do not think that use among the already addicted population is likely to be affected nearly as much by an increased recognition of the dangers of crack. Changing use in that segment of the population is going to take longer and will depend heavily on our ability to provide adequate treatment capacity, attract people into treatment, and offer effective treatment. The addicted are going to require the pound of cure, not the ounce of prevention, and that's one reason why it's so very important to prevent use in the first place."

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Other Illicit Drugs: In addition to marijuana, cocaine, and crack, there also was some decline observed in the use of nearly all other illicit drugs in 1988. The use of hallucinogens, stimulants, tranquilizers, opiates other than heroin, and the nitrite inhalants all fell by statistically significant amounts among the nation's high school seniors. Methaqualone and barbiturate sedatives also continued their longer term declines, though their changes in 1988 did not reach statistical significance. The lifetime prevalence for heroin remained at 0.5 percent, where it has hovered for the past nine years, following an earlier period of decline.

Among American college students the story is much the same.

Overall, the proportion of seniors using any illicit drug during the prior year fell from 42 percent in 1987 to 39 percent in 1988. (This compares with 54 percent in 1979, the peak year.) The proportion using any illicit drug other than marijuana in the prior year fell from 24 percent to 21 percent between 1987 and 1988 (which compares with a high point of about 30 percent in 1982.)

Johnston noted, "There's no question this is good news for the country, but what we cannot lose sight of is that there still remains a troublesome amount of illicit drug use among our young people, especially among the segments of the population not well covered by the surveys. Of particular concern is the number who still are willing to experiment with drugs as dangerous as cocaine or crack. And, of course, the one thing that's certain is that there are new drugs yet to come along, which will test the resolve we have inculcated in our young people. That means that prevention must be an ongoing and long-term process."

Alcohol: The 1988 survey also yielded some important results concerning alcohol use among high school students. For the first time in several years, the proportion of seniors who can be categorized as "current drinkers" (had one or more drinks in the past 30 days) declined significantly (from 66 percent to 64 percent). More important, the proportion reporting having five or more drinks in a row during the prior two weeks also declined significantly (from 38 percent to 35 percent, down from a high point of 41 percent in 1983).

Johnston said, "Just as we found no evidence during the onset of the drug epidemic for any displacement of alcohol by the illicit drugs, during this decline phase we have seen no evidence of a displacement from illicit drugs back to alcohol use. In general, these behaviors have tended to move more in parallel, but with alcohol use showing much less overall change, no doubt reflecting its enculturated status in American society.

"This modest decline in alcohol consumption does not seem to be explained by young people seeing such drinking as more dangerous. But we are seeing some change in their own normative attitudes, with an increasing number of seniors saying they personally disapprove of heavy weekend drinking." Among college students, however, and young adults generally, there has been only a slight change in the drinking rates.

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Cigarette Smoking: "Clearly the most disappointing results this year relate to cigarette smoking," according to Johnston, "though that comes as little surprise, since they have been disappointing for the last four years." Neither the number of current smokers, nor the number of current daily smokers, is down significantly from where it was in the class of 1984. "That means that the initiation rate for smoking in this society has pretty well stabilized, and stabilized at a level that is still going to cut short the lives of a lot of our young people. I'm afraid this stabilization has tended to get overshadowed by the overall improvement in adult smoking rates, which results from more people quitting."

The proportion of seniors who are current smokers stands at 29 percent in 1988, with 18 percent of all seniors smoking daily. Johnston pointed out that a number of the current light smokers will graduate to heavy smoking in the years after high school, based on the patterns observed in all previous graduating classes. Cigarette smoking rates among American college students (who are far less likely to smoke than other young adults) are also unchanged since about 1984.

"Clearly the importance of these initiation rates has been underemphasized, in part because of the long delay between the onset of the addiction and the extraordinary amount of death and disease which eventually will result from it," Johnston said. "If the number of young people who eventually will die from this addiction did so in just a year or two after starting, the public outcry for action would be deafening. But the 30- or 40-year delay means that the tragic consequences of adolescent smoking are less recognized. I think it's about time we took the issue of our youngsters smoking a lot more seriously."

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EDITORS: The detailed findings from the 1988 survey will be published later this year by the National Institute on Drug Abuse as a research monograph, authored by Johnston, O'Malley, and Bachman, and tentatively titled "Drug Use, Drinking, and Smoking: National Survey Results from High School, College, and Young Adult Populations, 1975-1988."

(ISR;Johnston;Bachman;O'Malley)(R1-3;ISR;Ed1-3;X1a,2a,9;RTspA,B)[3628]

TABLE 1
Trends in Lifetime Prevalence of Eighteen 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	Class of 1986	Class of 1987	Class of 1988	'87–'88 change
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	(15200)	(16300)	(16300)	
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	50.2	47.2	−3.0ss
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	17.0	16.7	−0.3
Inhalants Adjusted[b]	*NA*	*NA*	*NA*	*NA*	*18.2*	*17.3*	*17.2*	*17.7*	*18.2*	*18.0*	*18.1*	*20.1*	*18.6*	*17.5*	*−1.1*
Amyl & Butyl Nitrites[c,h]	NA	NA	NA	NA	11.1	11.1	10.1	9.8	8.4	8.1	7.9	8.6	4.7	3.2	−1.5s
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	10.3	8.9	−1.4s
Hallucinogens Adjusted[d]	*NA*	*NA*	*NA*	*NA*	*17.7*	*15.6*	*15.3*	*14.3*	*13.6*	*12.3*	*12.1*	*11.9*	*10.6*	*9.2*	*−1.4s*
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	8.4	7.7	−0.7
PCP[c,h]	NA	NA	NA	NA	12.8	9.6	7.8	6.0	5.6	5.0	4.9	4.8	3.0	2.9	−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	15.2	12.1	−3.1sss
"Crack"[g]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	5.6	4.8	−0.8
Other cocaine[c]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	14.0	12.1	−1.9
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	1.2	1.1	−0.1
Other opiates[e]	9.0	9.6	10.3	9.9	10.1	9.8	10.1	9.6	9.4	9.7	10.2	9.0	9.2	8.6	−0.6
Stimulants[e]	22.3	22.6	23.0	22.9	24.2	26.4	32.2	35.6	35.4	NA	NA	NA	NA	NA	NA
Stimulants Adjusted[e,f]	*NA*	*NA*	*NA*	*NA*	*NA*	*NA*	*NA*	*27.9*	*26.9*	*27.9*	*26.2*	*23.4*	*21.6*	*19.8*	*−1.8s*
Sedatives[e]	18.2	17.7	17.4	16.0	14.6	14.9	16.0	15.2	14.4	13.3	11.8	10.4	8.7	7.8	−0.9
Barbiturates[e]	16.9	16.2	15.6	13.7	11.8	11.0	11.3	10.3	9.9	9.9	9.2	8.4	7.4	6.7	−0.7
Methaqualone[e]	8.1	7.8	8.5	7.9	8.3	9.5	10.6	10.7	10.1	8.3	6.7	5.2	4.0	3.3	−0.7
Tranquilizers[e]	17.0	16.8	18.0	17.0	16.3	15.2	14.7	14.0	13.3	12.4	11.9	10.9	10.9	9.4	−1.5s
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	92.2	92.0	−0.2
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	67.2	66.4	−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.

[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] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

[g] Data based on two questionnaire forms. N is two-fifths of N indicated.

[h] Question text changed slightly in 1987.

TABLE 2
Trends in Annual Prevalence of Eighteen 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	Class of 1986	Class of 1987	Class of 1988	'87–'88 change
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	(15200)	(16300)	(16300)	
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	36.3	33.1	−3.2ss
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	6.9	6.5	−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*	*8.1*	*7.1*	*−1.0*
Amyl & Butyl Nitrites[c,h]	NA	NA	NA	NA	6.5	5.7	3.7	3.6	3.6	4.0	4.0	4.7	2.6	1.7	−0.9s
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	6.4	5.5	−0.9s
Hallucinogens Adjusted[d]	*NA*	*NA*	*NA*	*NA*	*11.8*	*10.4*	*10.1*	*9.0*	*8.3*	*7.3*	*7.6*	*7.6*	*6.7*	*5.8*	*−0.9*
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	5.2	4.8	−0.4
PCP[c,h]	NA	NA	NA	NA	7.0	4.4	3.2	2.2	2.6	2.3	2.9	2.4	1.3	1.2	−0.1
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	10.3	7.9	−2.4sss
"Crack"[g]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	4.1	4.0	3.1	−0.9s
Other cocaine[c]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	9.8	7.4	−2.4ss
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	0.5	0.5	0.0
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	5.3	4.6	−0.7s
Stimulants[e]	16.2	15.8	16.3	17.1	18.3	20.8	26.0	26.1	24.6	NA	NA	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*	*12.2*	*10.9*	*−1.3s*
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	4.1	3.7	−0.4
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	3.6	3.2	−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	1.5	1.3	−0.2
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	5.5	4.8	−0.7
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	85.7	85.3	−0.4
Cigarettes	NA	NA	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.

[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] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

[g] Data based on a single questionnaire form in 1986 (N is one-fifth of N indicated), and on two questionnaire forms in 1987 (N is two-fifths of N indicated).

[h] Question text changed slightly in 1987.

TABLE 3
Trends in Thirty-Day Prevalence of Eighteen Types of Drugs

	Percent who used 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	Class of 1986	Class of 1987	Class of 1988	'87–'88 change
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	(15200)	(16300)	(16300)	
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	21.0	18.0	−3.0ss
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	2.8	2.6	−0.2
Inhalants Adjusted[b]	*NA*	*NA*	*NA*	*NA*	*3.2*	*2.7*	*2.5*	*2.5*	*2.5*	*2.6*	*3.0*	*3.2*	*3.5*	*3.0*	*−0.5*
Amyl & Butyl Nitrites[c,h]	NA	NA	NA	NA	2.4	1.8	1.4	1.1	1.4	1.4	1.6	1.3	1.3	0.6	−0.7s
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	2.5	2.2	−0.3
Hallucinogens Adjusted[d]	*NA*	*NA*	*NA*	*NA*	*5.3*	*4.4*	*4.5*	*4.1*	*3.5*	*3.2*	*3.8*	*3.5*	*2.8*	*2.3*	*−0.5*
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	1.8	1.8	0.0
PCP[c,h]	NA	NA	NA	NA	2.4	1.4	1.4	1.0	1.3	1.0	1.6	1.3	0.6	0.3	−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	4.3	3.4	−0.9ss
"Crack"[g]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1.5	1.6	+0.1
Other cocaine[c]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	4.1	3.2	−0.9
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	0.2	0.2	0.0
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	1.8	1.6	−0.2
Stimulants[e]	8.5	7.7	8.8	8.7	9.9	12.1	15.8	13.7	12.4	NA	NA	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*	*5.2*	*4.6*	*−0.6*
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	1.7	1.4	−0.3
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	1.4	1.2	−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	0.6	0.5	−0.1
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	2.0	1.5	−0.5s
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	66.4	63.9	−2.5s
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	29.4	28.7	−0.7

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] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

[g] Data based on two questionnaire forms. N is two-fifths of N indicated.

[h] Question text changed slightly in 1987.

TABLE 4
Trends in Thirty-Day Prevalence of Daily Use of Eighteen 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	Class of 1986	Class of 1987	Class of 1988	'87–'88 change[g]
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	(15200)	(16300)	(16300)	
Marijuana/Hashish	6.0	8.2	9.1	10.7	10.3	9.1	7.0	6.3	5.5	5.0	4.9	4.0	3.3	2.7	−0.6s
Inhalants[a]	NA	0.0	0.0	0.1	0.0	0.1	0.1	0.1	0.1	0.1	0.2	0.2	0.1	0.2	+0.1
Inhalants Adjusted[b]	*NA*	*NA*	*NA*	*NA*	*0.1*	*0.2*	*0.2*	*0.2*	*0.2*	*0.2*	*0.4*	*0.4*	*0.4*	*0.3*	*−0.1*
Amyl & Butyl Nitrites[c,i]	NA	NA	NA	NA	0.0	0.1	0.1	0.0	0.2	0.1	0.3	0.5	0.3	0.1	−0.2
Hallucinogens	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.0	−0.1
Hallucinogens Adjusted[d]	*NA*	*NA*	*NA*	*NA*	*0.2*	*0.2*	*0.1*	*0.2*	*0.2*	*0.2*	*0.3*	*0.3*	*0.2*	*0.0*	*−0.2s*
LSD	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.1	0.1	0.0	0.1	0.0	0.0[g]
PCP[c,i]	NA	NA	NA	NA	0.1	0.1	0.1	0.1	0.1	0.1	0.3	0.2	0.3	0.1	−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	0.4	0.3	0.2	−0.1
"Crack"[h]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0.2	0.1	−0.1
Other cocaine[c]	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0.2	0.2	0.0
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	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	0.1	0.1	0.1	0.0
Stimulants[e]	0.5	0.4	0.5	0.5	0.6	0.7	1.2	1.1	1.1	NA	NA	NA	NA	NA	NA
Stimulants Adjusted[e,f]	*NA*	*NA*	*NA*	*NA*	*NA*	*NA*	*NA*	*0.7*	*0.8*	*0.6*	*0.4*	*0.3*	*0.3*	*0.3*	*0.0*
Sedatives[e]	0.3	0.2	0.2	0.2	0.1	0.2	0.2	0.2	0.2	0.1	0.1	0.1	0.1	0.1	0.0
Barbiturates[e]	0.1	0.1	0.2	0.1	0.0	0.1	0.1	0.1	0.1	0.0	0.1	0.1	0.1	0.0	0.0[g]
Methaqualone[e]	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0[g]
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	0.1	0.0	0.0[g]
Alcohol															
Daily	5.7	5.6	6.1	5.7	6.9	6.0	6.0	5.7	5.5	4.8	5.0	4.8	4.8	4.2	−0.6
5+ drinks in a row/ last 2 weeks	36.8	37.1	39.4	40.3	41.2	41.2	41.4	40.5	40.8	38.7	36.7	36.8	37.5	34.7	−2.8s
Cigarettes															
Daily	26.9	28.8	28.8	27.5	25.4	21.3	20.3	21.1	21.2	18.7	19.5	18.7	18.7	18.1	−0.6
Half-pack or more per day	17.9	19.2	19.4	18.8	16.5	14.3	13.5	14.2	13.8	12.3	12.5	11.4	11.4	10.6	−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.

[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] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

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

[h] Data based on two questionnaire forms. N is two-fifths of N indicated.

[i] Question text changed slightly in 1987.

TABLE 5

Trends in Lifetime, Annual, and Thirty-Day Prevalence in an Index of Illicit Drug Use

(Based on Original and Adjusted Amphetamine Questions)[a]

	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	Class of 1987	Class of 1988	'87–'88 change
Approx. N =	(9400)	(15400)	(17100)	(17800)	(15500)	(15900)	(17500)	(17700)	(16300)	(15900)	(16000)	(15200)	(16300)	(16300)	
	Percent reporting use in lifetime														
Marijuana Only	19.0	22.9	25.8	27.6	27.7	26.7	22.8	20.8	19.7	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	23.3	22.5	21.3	20.9	19.9	20.8	21.4	+0.6
Any Illicit Drug Other Than Marijuana[b]	36.2	35.4	35.8	36.5	37.4	38.7	42.8	45.0	44.4	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	41.1	40.4	40.3	39.7	37.7	35.8	32.5	−3.3sss
Total: Any Illicit Drug Use	55.2	58.3	61.6	64.1	65.1	65.4	65.6	65.8	64.1	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	64.4	62.9	61.6	60.6	57.6	56.6	53.9	−2.7ss
	Percent reporting use in last twelve months														
Marijuana Only	18.8	22.7	25.1	26.7	26.0	22.7	18.1	17.0	16.6	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	19.3	19.0	17.8	18.9	18.4	17.6	17.4	−0.2
Any Illicit Drug Other Than Marijuana[b]	26.2	25.4	26.0	27.1	28.2	30.4	34.0	33.8	32.5	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	30.1	28.4	28.0	27.4	25.9	24.1	21.1	−3.0sss
Total: Any Illicit Drug Use	45.0	48.1	51.1	53.8	54.2	53.1	52.1	50.8	49.1	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	49.4	47.4	45.8	46.3	44.3	41.7	38.5	−3.2sss
	Percent reporting use in last thirty days														
Marijuana Only	15.3	20.3	22.4	23.8	22.2	18.8	15.2	14.3	14.0	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	15.5	15.1	14.1	14.8	13.9	13.1	11.3	−1.8s
Any Illicit Drug Other Than Marijuana[b]	15.4	13.9	15.2	15.1	16.8	18.4	21.7	19.2	18.4	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	17.0	15.4	15.1	14.9	13.2	11.6	10.0	−1.6ss
Total: Any Illicit Drug Use	30.7	34.2	37.6	38.9	38.9	37.2	36.9	33.5	32.4	–	–	–	–	–	
Adjusted Version	–	–	–	–	–	–	–	32.5	30.5	29.2	29.7	27.1	24.7	21.3	−3.4sss

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

[a] Adjusted questions about stimulant use were introduced in 1982 to exclude more completely the inappropriate reporting of non-prescription stimulants.

[b] Use of "other illicit drugs" includes any use of hallucinogens, cocaine, and heroin, or any use of other opiates, stimulants, sedatives, or tranquilizers not under a doctor's orders.

TABLE 6

Trends in Annual Prevalence of Fourteen Types of Drugs
Among College Students 1–4 Years Beyond High School

	Percent who used in last twelve months									
	1980	1981	1982	1983	1984	1985	1986	1987	1988	'87–'88 change
Approx. Wtd. N =	(1040)	(1130)	(1150)	(1170)	(1110)	(1080)	(1190)	(1220)	(1310)	
Marijuana	51.2	51.3	44.7	45.2	40.7	41.7	40.9	37.0	34.6	–2.4
Inhalants[b]	3.0	2.5	2.5	2.8	2.4	3.1	3.9	3.7	4.1	+0.4
LSD	6.0	4.6	6.3	4.3	3.7	2.2	3.9	4.0	3.6	–0.4
Cocaine	16.8	16.0	17.2	17.3	16.3	17.3	17.1	13.7	10.0	–3.7ss
"Crack"[c]	NA	NA	NA	NA	NA	NA	1.3	2.0	1.4	–0.6
Heroin	0.4	0.2	0.1	0.0	0.1	0.2	0.1	0.2	0.2	0.0
Other Opiates[a]	5.1	4.3	3.8	3.8	3.8	2.4	4.0	3.1	3.1	0.0
Stimulants[a]	22.4	22.2	NA	NA	NA	NA	NA	NA	NA	NA
Stimulants, Adjusted[a,d]	NA	NA	21.1	17.3	15.7	11.9	10.3	7.2	6.2	–1.0
Sedatives[a]	8.3	8.0	8.0	4.5	3.5	2.5	2.6	1.7	1.5	–0.2
Barbiturates[a]	2.9	2.8	3.2	2.2	1.9	1.3	2.0	1.2	1.1	–0.1
Methaqualone[a]	7.2	6.5	6.6	3.1	2.5	1.4	1.2	0.8	0.5	–0.3
Tranquilizers[a]	6.9	4.8	4.7	4.6	3.5	3.6	4.4	3.8	3.1	–0.7
Alcohol	90.5	92.5	92.2	91.6	90.0	92.0	91.5	90.9	89.6	–1.3
Cigarettes	36.2	37.6	34.3	36.1	33.2	35.0	35.3	38.0	36.6	–1.4

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

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

[b] This drug was asked about in four of the five questionnaire forms. N is four-fifths of N indicated.

[c] This drug was asked about in one of the five questionnaire forms in 1986 (N is one-fifth of N indicated), and in two of the five questionnaire forms thereafter (N is two-fifths of N indicated).

[d] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

TABLE 7

Trends in Annual Prevalence of Fourteen Types of Drugs
Among Follow-Up Respondents 1–11 Years Beyond High School

	Percent who used in last twelve months		
	1987	1988	'87–'88 change
Approx. Wtd. N =	(7450)	(7320)	
Marijuana	34.3	31.3	–3.0sss
Inhalants[b]	2.0	1.7	–0.3
LSD	2.8	2.8	0.0
Cocaine	15.6	13.8	–1.8ss
"Crack"[c]	3.0	3.1	+0.1
Heroin	0.3	0.2	–0.1
Other Opiates[a]	3.0	2.6	–0.4
Stimulants, Adjusted[a,d]	8.5	7.1	–1.4ss
Sedatives[a]	2.5	2.1	–0.4
Barbiturates[a]	2.0	1.9	–0.1
Methaqualone[a]	0.9	0.5	–0.4ss
Tranquilizers[a]	5.1	4.3	–0.8s
Alcohol	89.1	88.5	–0.6
Cigarettes	39.9	37.5	–2.4ss

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

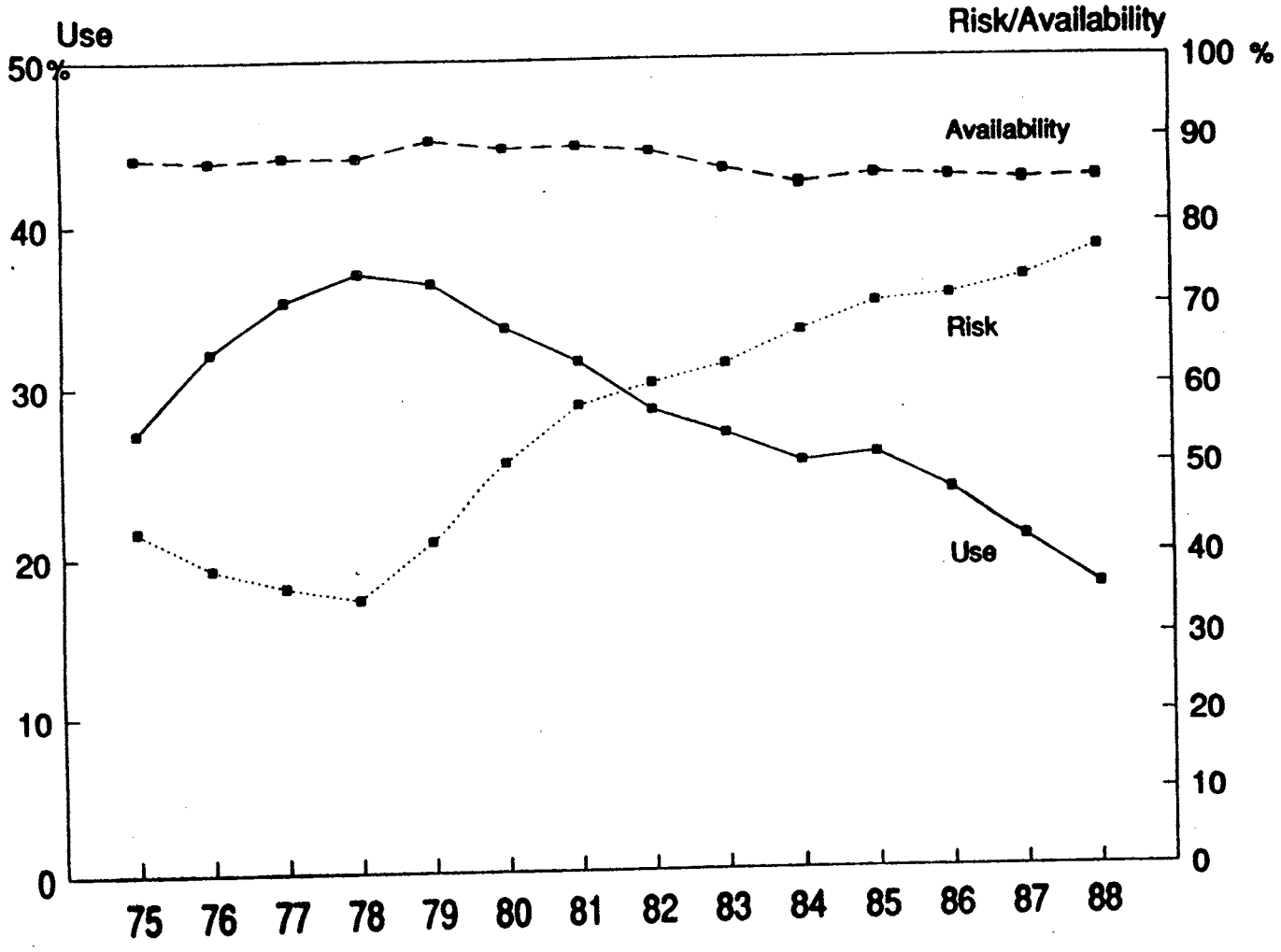
[a] Only drug use which was not under a doctor's orders is included here.

[b] This drug was asked about in four of the five questionnaire forms. N is four-fifths of N indicated.

[c] This drug was asked about in two of the five questionnaire forms. N is two-fifths of N indicated.

[d] Based on the data from the revised question, which attempts to exclude the inappropriate reporting of non-prescription stimulants.

FIGURE 1
Trends in Marijuana Availability,
Perceived Risk of Regular Use, and Use in Past 30 Days
High School Seniors

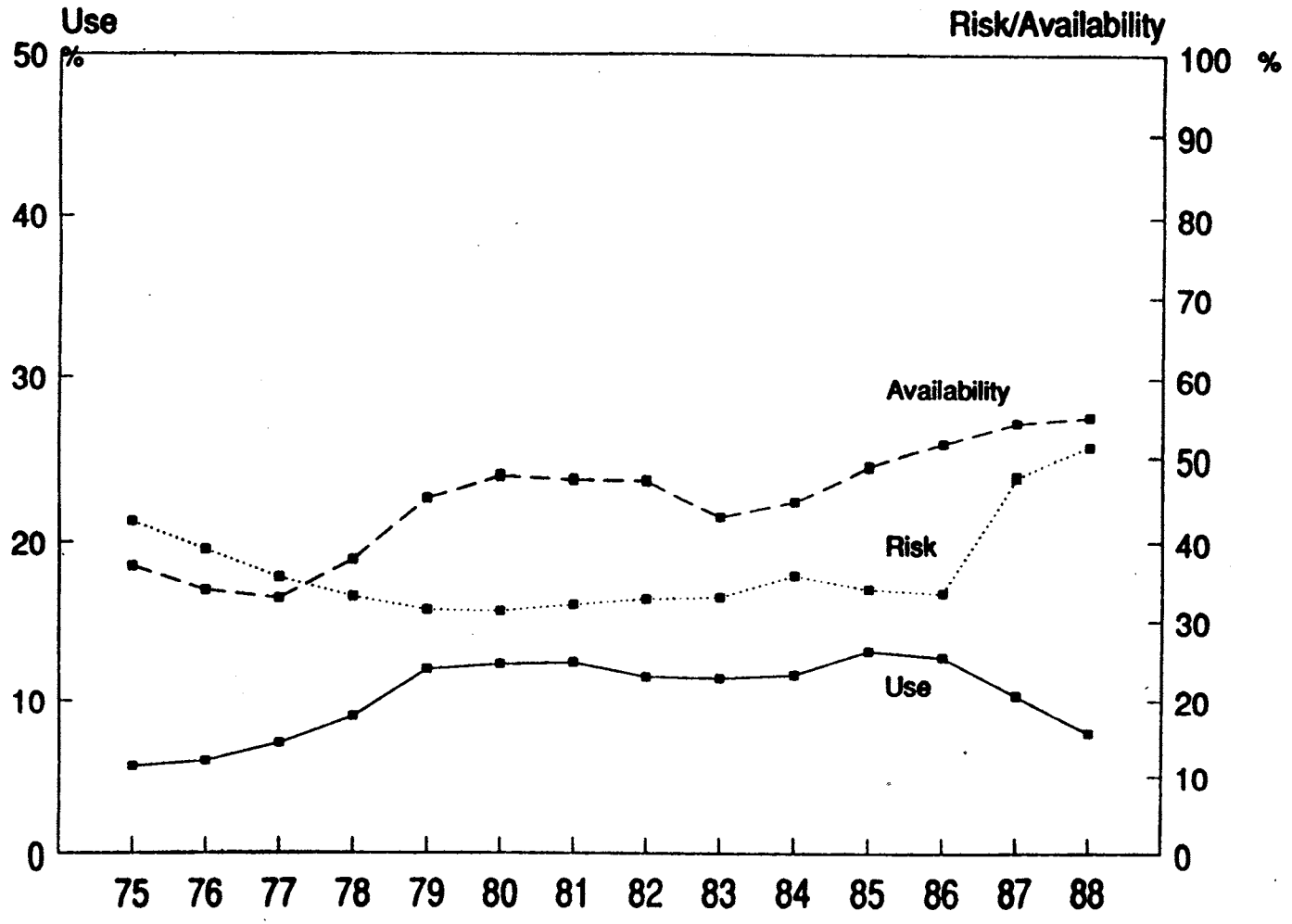


Use: % using once or more in past 30 days

Risk: % saying great risk of harm in regular use

Availability: % saying fairly easy or very easy to get

FIGURE 2
Trends in Cocaine Availability,
Perceived Risk of Trying, and Use in Past Year
High School Seniors



Use: % using once or more in past 12 months

Risk: % saying great risk of harm in using once or twice

Availability: % saying fairly easy or very easy to get