

Specificities of drug use at the age of 17 in Ile-de-France: regional exploitation of the 2002-2003 ESCAPAD [*Enquête sur la santé et les consommations lors de l'appel de préparation à la défense* - Survey on health and consumption on call-up and preparation for defence day] survey

The ESCAPAD survey¹, set up in 2000 by the OFDT with the logistical support of the *Direction Centrale du Service National* [Central bureau for the National Service] (DCSN), contributes, every year, to reporting the trends in the use of psychoactive products among young French people. Its main aim is to provide precise national indicators, particularly in terms of trend, across an age bracket (17-18) which corresponds to a transition period in the drug use trajectories.

Even though the regular provision of national indicators has proved essential for understanding the uses of psychoactive products and for setting up public policies, the lack of indicators at a regional level is rapidly being felt. Faced with a growing demand from local players who wished to develop specific and targeted local policies, the OFDT developed a regional exploitation of the ESCAPAD survey. This has proved to be a good tool for this type of analysis thanks in particular to the territorial networking of the centres mobilised on this occasion and to the knowledge of the department of residence of the young people called up. Thus, by combining the databases of survey results from two successive years, it is possible to conduct regional studies across sufficiently large representative samples.

The first extracts carried out in 2002, based on the 2000 and 2001 surveys, demonstrated the relevance of such an approach and make it possible to consider a generalisation of the regional analyses. Today, it is the data collected in 2002 and 2003 which is presented for analysis. In Ile-de-France, the study focuses on 2,484 young people aged 17: thanks to the size of this sample, an analysis of the infra-regional differences can be used to highlight the regional specificities and to compare this region with the rest of the country. The study, financed in part by the DRASSIF [*Direction régionale des affaires sanitaires et sociales d'Ile-de-France* – Regional department of health and social affairs for Île-de-France], was carried out in partnership with the *Observatoire régional de santé d'Île-de-France*, and will be followed in 2005 by an analysis of an extension of ESCAPAD focusing specifically on adolescents in inner Paris.

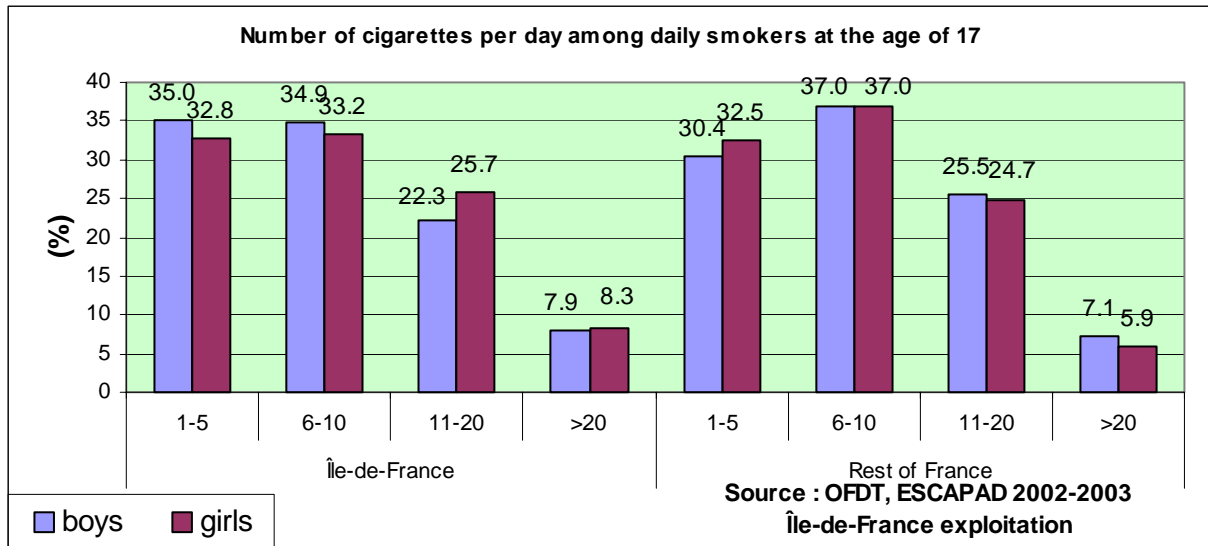
Indicators used : For all the products, experimentation means having already used a product at least once during one's life. The other use indicators relate to the past thirty days: current use (at least one episode of use), regular use of alcohol or cannabis (at least 10 episodes of use)², daily use (at least once per day). Finally, regular drunkenness is defined by at least 10 episodes of drunkenness during the past 12 months.

¹ Cf. Methodological indicators

² For cannabis, reference will also be made to occasional use (at least once during the year) and to "repeated" use (at least 10 times during the year).

Tobacco

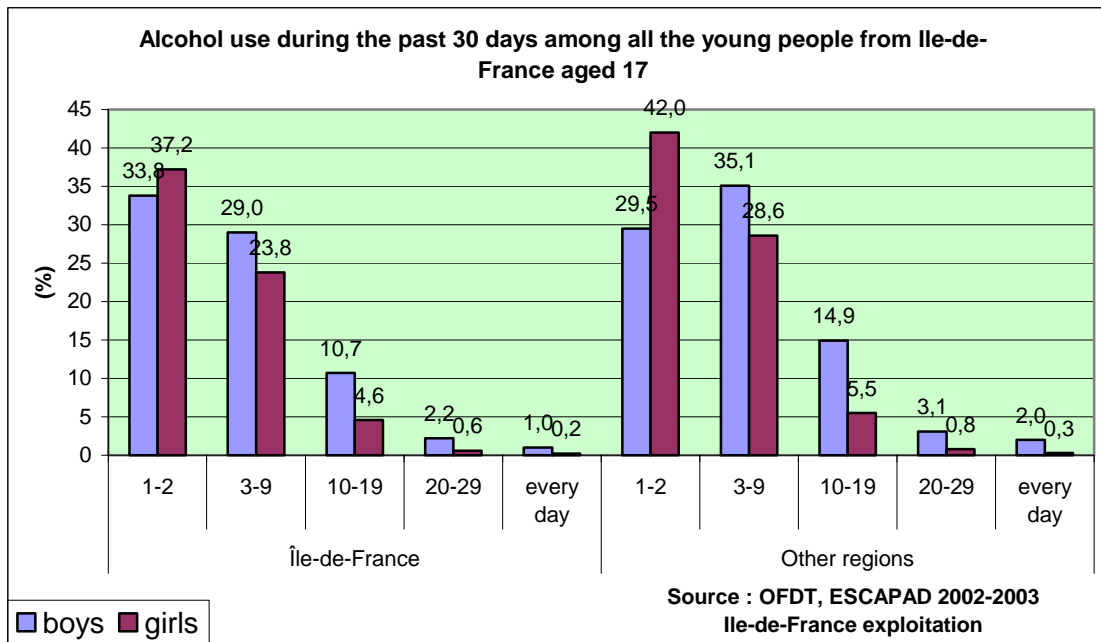
In Île-de-France, at the age of 17, girls say that they have experimented with tobacco more often than boys: 76.5 % of them have already smoked at least one cigarette during their life, as opposed to 73.4 % of boys. However, daily smoking is as frequent among girls as it is among boys, with 34.2 % of the young respondents saying that they have smoked daily during the past 30 days. In terms of the number of cigarettes smoked per day, the behaviours of the girls and boys from Ile-de-France who smoke daily turn out to be very similar.



Tobacco is the psychoactive product whose uses are the least sexually differentiated. On average, the experimenters, of whichever sex, smoked their first cigarette at the age of 13.7. The switch to daily use is however a little earlier among girls (age 14.9 on average) than among boys (age 15, $p < 0.05$).

Alcohol

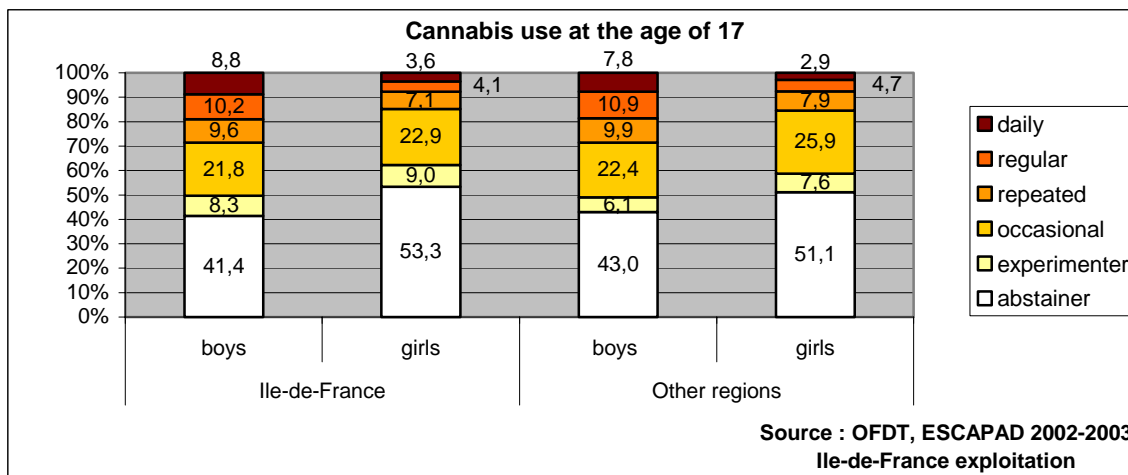
At 17, 89.9 % of young people from Ile-de-France have already drunk alcohol at least once during their life, but boys have experimented with drunkenness more often: half of them (51.1 %) say that they have already been drunk, as opposed to 38.6 % of girls. During the 30 days preceding the survey, 76.7 % of boys and 66.2 % of girls have drunk alcohol. The gap between the two sexes increases for regular use: in this case there are almost three times as many boys (13.9 %) as girls (5.3 %).



Boys, who consume more alcohol than girls, also say that they experienced their first drunkenness at an earlier age (15.3 on average as opposed to 15.6 p<0.001).

Cannabis

At 17, around half the young people from Ile-de-France say that they have already used cannabis during their life (58.6 % of boys and 46.7 % of girls). Concerning more recent or more frequent uses, boys prove to be greater users than girls: 50.3% of boys have taken cannabis at least once during the 12 months preceding the survey (as opposed to 37.7 % of girls); 39.3% have taken it during the past 30 days (as opposed to 24.7 % of girls); finally, 18.9 % use it regularly, as opposed to only 7.6 % of girls. On average, the first use took place at the age of 15.2 for boys and 15.3 for girls (p<0.05).



abst

abstainer: has never used cannabis;

experimenter: at least one use during their life, but none during the year;

occasional user: between 1 and 9 uses during the past twelve months;

repeated user: at least 10 uses during the year, but fewer than 10 in the month;

regular user: between 10 and 29 uses during the past thirty days;

daily user: daily use during the past thirty days.

Other psychoactive products

Experimentation with other psychoactive products remains rare and is usually a male behaviour, with the notable exception of psychotropic medicines (referred to in the questionnaire as "medicines for nerves, to help you sleep"): in Île-de-France, at 17, only 17.0 % of boys have used these before, as opposed to 36.9% of girls. The substances experimented with most frequently of the other nine substances tackled in the questionnaire are poppers (6.9 % of boys, 4.3 % of girls). Then come hallucinogenic mushrooms, ecstasy and inhalants (already taken by just under 5 % of boys and 3 % of girls respectively). For both sexes, however, the proportions of experimenters remain very marginal for amphetamines, LSD and cocaine, and in particular for heroin and crack (around 1 %).

Comparison with the other French regions

As a general rule, the prevalences observed in Ile-de-France among 17-year-old adolescents are at lower levels than those measured in the rest of metropolitan France. This is true in particular for tobacco use, experimentation with alcohol and drunkenness, and regular drunkenness. However, for the different forms of cannabis use and the regular use of psychotropic medicines, the levels observed in Ile-de-France are similar to those in the rest of France. It should be noted that the cannabis experimentation level among girls is higher in Île-de-France.

The only products for which experimentation appears more frequent in Ile-de-France are psychotropic medicines, and this solely for boys (girls declare a level of use similar to that of their counterparts in the rest of France), poppers (for both boys and girls) and finally crack (solely for boys). For all the other products, the prevalences of experimentation appear lower than or similar to those obtained in all the other regions as a whole. It should be stated that for the products experimented with most rarely, the comparison between Ile-de-France and the other regions proves (or appears) awkward on account of the low numbers of people involved in the sample.

Comparison of experimentations with psychoactive substances at the age of 17 in Ile-de-France and in the other French regions, by sex

	boys		girls	
	Île-de-France	Other regions	Île-de-France	Other regions
Alcohol	90.0%***	94.8%	89.8%***	93.8%
Tobacco	73.4%***	76.6%	76.5%***	79.7%
Cannabis	58.6%	57.1%	46.7%*	48.9%
Drunkenness	51.1%***	64.2%	38.6%***	49.3%
Psychotropic medicines	17.0%***	14.1%	36.9%	35.1%
Poppers	6.9%***	5.2%	4.3%*	3.5%
Hallucinogenic mushrooms	4.5%**	6.1%	2.9%	2.4%
Ecstasy	4.5%	5.3%	2.7%	3.1%
Inhalants	4.6%**	6.3%	2.5%***	4.5%
Amphetamines	1.9%**	2.9%	1.0%*	1.6%
LSD	1.8%	1.8%	0.8%	0.9%
Crack	1.4%*	0.9%	0.4%	0.5%
Cocaine	2.1%	2.5%	1.1%	1.4%
Heroin	1.1%	1.2%	0.2%	0.7%

Reading: *, **, *** indicate, respectively, significant differences with the 0.05, 0.01 and 0.001 thresholds between Ile-de-France and the rest of the regions, χ^2 test.

The bold figures represent the significantly higher prevalences.

Source: OFDT, ESCAPAD 2002-2003, Ile-de-France exploitation.

Comparison of regular uses of alcohol, tobacco and cannabis at the age of 17 in Ile-de-France and in the other French regions, by sex

	boys		girls	
	Ile-de-France	Other regions	Ile-de-France	Other regions
Alcohol	13.9%***	20.0%	5.3%*	6.6%
Regular drunkenness	7.7%***	11.0%	2.2%*	3.0%
Tobacco	33.9%***	40.7%	34.6%***	40.6%
Cannabis	18.9%	18.8%	7.6%	7.5%
Psychotropic medicines	0.8%	1.2%	4.2%	4.2%

Reading: *, **, *** indicate, respectively, significant differences with the 0.05, 0.01 and 0.001 thresholds between Ile-de-France and the rest of the regions, χ^2 test.

The bold figures represent the significantly higher prevalences.

Source: OFDT, ESCAPAD 2002-2003, Ile-de-France exploitation.

Trends since 2000

The changes observed since 2000 in Ile-de-France are moving in the same direction overall as those highlighted at the national level, namely a rise in cannabis use and a fall in tobacco use (Beck *et al.*, 2002). The trends observed relate more to girls, whose regular alcohol use, on the one hand, is now at the national average whereas it appeared to be lower in 2000/2001, and whose level of cannabis experimentation, on the other, which was similar to that in the other regions, is today lower. For boys, the only difference is that their level of experimentation with psychotropic medicines appears to be higher than that observed in the rest of the country. The results recorded are very close to those obtained during a secondary analysis of surveys in schools (Peretti-Watel *et al.*, 2002), illustrating without doubt the existence of a genuine regional specificity.

Geographic disparities within the Ile-de-France region

Table: some uses of psychoactive products in Paris, in the *petite couronne* [ring of 3 departments surrounding Paris], in the *grande couronne* [ring of 4 departments surrounding the *petite couronne*] and in the rest of France (% in columns)

	Paris		petite couronne		grande couronne		other regions	
	boys	girls	boys	girls	boys	girls	boys	girls
Daily tobacco	42	40	28	35	35**	33*	41	41
Regular alcohol	20	10	10	6	15***	4***	20	7
Regular drunkenness	10	1	6	4	8*	1***	11	3
Regular cannabis	20	10	15	7	21*	8	19	8
Cannabis-lifetime prevalence	61	50	57	47	59	46	57	49
Ecstasy-lifetime prevalence	3	3	4	3	6	3	5	3
Poppers-lifetime prevalence	12	4	6	5	6*	4	5	4
Mushrooms-lifetime prevalence	6	5	4	3	5	2	6	2
Inhalants-lifetime prevalence	3	5	4	2	5	2*	6	5

Reading: *, **, *** indicate, respectively, significant differences with the 0.05, 0.01 and 0.001 thresholds between Paris, the *petite couronne* and the *grande couronne*, among girls on the one hand and boys on the other (χ^2 test). The figures in bold indicate that the prevalence is significantly higher than in the rest of the region. The accuracy of the estimates at this geographical level does not allow the use of decimal places.

Source: ESCAPAD 2002-2003, OFDT

The daily use of tobacco and the regular use of alcohol are relatively more widespread in Paris than in the rest of the region, and the regular use of cannabis is as common in the *grande couronne* as it is in Paris, but rarer in the *petite couronne*. For the rarer products, the young population of Paris appears to experiment slightly more with hallucinogenic mushrooms and poppers, whereas experimentation with ecstasy is lower here than elsewhere. Paris therefore displays a certain peculiarity at the heart of the region. The forthcoming extension of the ESCAPAD survey in central Paris will soon allow these results to be verified across larger numbers of people.

Discussion

The observation of lower uses of alcohol and tobacco in Ile-de-France had already been highlighted in 1993. This survey had made it possible to compare pupils aged 11 to 19 in the Créteil regional education authority³ with those in eight other education authorities in metropolitan France (Choquet *et al.*, 1998). Experimentation with and regular use of alcohol and tobacco proved to be significantly rarer in this education authority than in the others, among both girls and boys. This lower use of alcohol and tobacco therefore seems to have already existed for at least a decade.

As far as cannabis is concerned, the experimentation and regular use measured in Ile-de-France in the 1993 INSERM [*Institut national de la santé et de la recherche médicale* - National institute for health and medical research] surveys and in the 2002-2003 ESCAPAD surveys are at a level comparable to that measured in the other regions, among both girls and boys. It is, however, not at all certain that cannabis use has evolved in a similar fashion in Ile-de-France and in the other regions, unlike what is observed for alcohol and tobacco. In fact, cannabis use has grown considerably during the past decade in the majority of countries. It is probable that in France, as in other countries, the growth in cannabis use has developed from the major urban metropolises, particularly in the Ile-de-France region. To support this hypothesis, an analysis of the data from the 1997 young people's *Baromètre santé* [health barometer] had highlighted a clear overuse of cannabis. Thus, 31 % of 15-18 year-olds from Ile-de-France had used cannabis during the previous twelve months as opposed to 21 % of young people of the same age from the provinces. There has therefore been, in a transitional way in a period in which cannabis use was spreading among young people, greater use of cannabis in Ile-de-France (Embersin and Grémy, 2000).

However, the lesser use of psychoactive products among young people from Ile-de-France contrasts with prevalences of problematic uses of important drugs. Historically, the Ile-de-France region, and Paris in particular, has always been greatly affected by problems with drug addiction: trafficking has been furthered considerably by the intense urbanisation in the region, its central situation in terms of communication routes, and its tourist and economic attractiveness, which reinforce the accessibility of the products. It alone has half the deaths by overdose occurring in metropolitan France (50 out of 107 in 2001), and the uses of Subutex® and methadone, which are also very significant, are evidence of the presence of highly dependent populations. It is therefore risky to make the link with uses by young people, since the ESCAPAD figures relate to a young age bracket which is largely unaffected by the addictions measured by these indicators.

The complete report on this study conducted using the 2002/2003 ESCAPAD data, to be published in the second half of 2004, will also provide analyses of the age of entry into the different types of use and a detailed exploration of the contexts of use. A specific study launched at the end of 2003 on Parisian adolescents within the context of ESCAPAD will also end with the publication of a report exploring the specificities of use at an infra-district level. This report is due to be published in early 2005.

The Ile-de-France region covers barely 2.2 % of the national territory but has nearly 11 million inhabitants, or 18 % of the metropolitan population. The region is young and active: 32 % of the inhabitants are aged under 25 and only 17 % are 60 or over (as opposed to 31 % and 21% respectively in the metropolitan population) and in 1999 more than 50 % were in active employment. At the economic level, the region ranks the highest in the country. The unemployment rate (8.4 % in 2002) is slightly below the national average (9 %). The gross disposable

³ This covers Seine-Saint-Denis, Hauts-de-Seine and Seine-et-Marne.

income per capita is 16,900 euro as opposed to 13,700 euro in the provinces, or 1.23 times the national average. Another peculiarity is that managers and the higher intellectual professions represent the most important socioprofessional category (18 % as opposed to 10 % on average). Nevertheless, there remain profound social and geographical inequalities. The north, and in particular Seine-Saint-Denis, contrasts increasingly with the central region and the departments in the south-west. Half of the young people in Ile-de-France live in districts characterised by a high level of poverty: between 1984 and 1998, the net income after tax fell by 6 % in Seine-Saint-Denis whereas it grew by 23 % in the capital. These inequalities are tending to become more intensified, highlighting an already worrying regional polarisation. INSEE [Institut national de la statistique, des études économiques - National institute for statistics, research and economic data] data: "France and its regions: 2002-2003".

Methodological indicators

The ESCAPAD survey questions all adolescents attending their *journée d'appel de préparation à la défense* [call-up preparation day] (JAPD) on the Wednesday and Saturday of a given week in metropolitan France and across all the sessions from April to June in the overseas departments. It supplements a device which comprises the quadrennial surveys in schools (ESPAD, under the scientific direction of the INSERM and the OFDT, which was last held in 2003; HBSC⁴, carried out in 2002 under the aegis of the WHO) and a triennial telephone survey carried out among 12-75 year-olds, the *Baromètre santé*, under the scientific direction of the INPES⁵, which will next be held at the end of 2004. ESCAPAD is based on a self-administered and strictly anonymous questionnaire. The questionnaire completion is assigned to one of the two people involved in training the attendees. This person introduces the survey (drawing attention to the guarantee of anonymity, the relevance of such a study and the importance of obtaining accurate and reliable responses), and distributes the questionnaires. After 25 minutes, the trainer fills in a questionnaire completion report describing how the survey has gone, then collects the questionnaires.

The level of participation in the JAPDs is in the order of 90 %, bearing in mind that this ratio (the number of people present divided by the number of call-ups) is still short of the reality: the individuals called up are asked to attend on several dates and therefore have several opportunities to sort out their situation if they did not come at the first notification to attend. The JAPD is in fact almost compulsory: the participants are given a certificate which they are required to present when registering for exams or checks subject to public authority control (driving licence, baccalaureat, university exams, etc.). Certain people who are declared "definitively unfit" upon presentation of a disability card or a medical file (around 1% of those asked to attend each year) obtain the certificate without participating in the day.

While benefiting from a collection method which is similar to that used in the school surveys, the sample also contains young people who do not attend school. Moreover, the notification procedure, which limits the risks of young people living in a single district finding themselves in the same room, guarantees a very high degree of confidentiality. The questionnaire is drawn up so that a user takes around the same length of time to complete it as a non-user, in order to erase any difference between them during the completion of the questionnaire.

In order to have access to a sufficiently large sample for carrying out regional surveys, the databases from the 2002 and 2003 ESCAPAD surveys were combined for this analysis. The questionnaire completion dates (May 2002 and May 2003) were chosen so as to avoid the school exams and an over-representation of young people whose school or work situations might be unusual.

In total, in the Ile-de-France sample, there were 2,484 young people (1,240 boys and 1,244 girls) aged 17 (exact age) on the day of the survey. Given the methodology of the ESCAPAD survey, it was necessary to adjust the sample in order to take into account the respective weight of each Ile-de-France department within the region.

⁴ Health Behaviour in School-aged Children

⁵ *Institut National de Prévention et d'Education pour la Santé* [National institute for health education and prevention]

The region was divided into three parts (Paris (n=294)), *petite couronne* (departments 92, 93 and 94, n=668) and *grande couronne* (departments=77, 78, 91, 95, n=1522). Moreover, to allow the results to be put into perspective with the rest of France, a weighting by sex was used for the other regions.

The ESCAPAD survey has received the expediency notice from the *Conseil national de l'information statistique* [National council for statistical information] (CNIS) and the public statistics general interest seal from the *Comité du Label* [seal committee], as well as the favourable opinion of the *Commission nationale de l'informatique et des libertés* [national information and liberties commission] (CNIL).

Moreover, the degree of significance in the difference between two percentages, calculated using the Pearson χ^2 test, is presented in the following manner: (ns: the difference is not significant; p<0.05, p<0.01, p<0.001: the variance observed is significant with an error risk lower than 5 %, 1 % and 0.1 % respectively).

For further information:

Beck F., Legleye S. (2003) "*Drogues et adolescence. Usages de drogues et contextes d'usages entre 17 et 19 ans, évolutions récentes* [Drugs and adolescence. Drug use and contexts of use between the ages of 17 and 19, recent trends]: *ESCAPAD 2002*" OFDT, 164 p.

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Choquet M, Grémy I, Lagadic C. (1998) "*Existe-t-il une surconsommation de drogue parmi les jeunes de la région parisienne* [Does drug overuse exist among young people in the Paris region]? Review *Epidém et Santé Publ*, 46, 183-192.

Embersin C, Grémy I, (2000) *Conduites à risques chez les jeunes de 12 à 19 ans en IDF: analyse régionale du baromètre CFES santé jeunes de 97/98* [At-risk behaviours among young people aged 12 to 19 in Ile-de-France: regional analysis of the 97/98 CFES [Comité français pour l'éducation à la santé – French committee for health education] *baromètre santé* for young people], ORS report, 136 p.

Peretti-Watel P., Beynet A., Beck F., Legleye S. (2002) "*La diffusion géographique des usages de produits psychoactifs à l'adolescence* [The geographical distribution of uses of psychoactive products in adolescence]", *Alcoologie et Addictologie*, 24 (3): 207-216.

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