



Flash Eurobarometer



European
Commission

Young people and drugs *among 15-24 year-olds*

Analytical report

Fieldwork: May 2008

Report: May 2008

Flash Eurobarometer 233— The Gallup Organization

This survey was requested by Directorate-General Justice, Liberty & Security and coordinated by Directorate-General Communication

This document does not represent the point of view of the European Commission. The interpretations and opinions contained in it are solely those of the authors.

Flash EB Series #233

Young people and drugs

Survey conducted by The Gallup Organization,
Hungary upon the request of Directorate-
General Justice, Liberty & Security



Coordinated by Directorate-General
Communication

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THE GALLUP ORGANIZATION

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Introduction

Drugs and drug-related problems are major concerns for EU citizens and a major threat to the security and health of European society. The use of drugs, particularly among young people, is at historically high levels. The European Commission has been studying the importance of drug-related phenomena in EU Member States for several years. In 2002 and 2004, surveys were conducted among young people in the old EU15 (Special Eurobarometer N° 172 and Flash Eurobarometer N° 158).

In these earlier surveys, almost 8,000 interviews were conducted with 15-24 year-olds, using a face-to-face interviewing methodology. The topics covered ranged from the consumption of various drugs and young people's involvement in the drug culture to the dangers associated with various products and young people's opinions about the effectiveness of policies aimed at solving society's drug-related problems.

Although the current Flash Eurobarometer on "*Young People and Drugs*" (N° 233), requested by Directorate-General Justice, Liberty and Security, builds on these earlier surveys, it is different in various ways: Flash Eurobarometer 233 has covered more countries than the previous ones (EU27 vs. EU15), the questionnaire has been re-designed and telephone interviews have replaced face-to-face discussions.

This Flash Eurobarometer's objective was to study young EU citizens' attitudes and perceptions about the issues of drugs, such as:

- past and potential information sources about illicit drug use and the related risks and effects
- perceived health risks associated with using various licit and illicit substances (i.e. heroin, cocaine, ecstasy, cannabis, alcohol and tobacco)
- opinions about the effectiveness of alternative drug policies
- attitudes towards banning or regulating illicit drugs, alcohol and tobacco
- perceptions about the availability of specific drugs.

This survey's fieldwork was carried out from the 14th – 18th May 2008. Over 12,000 randomly selected young people (15-24 years-of-age) were interviewed across the 27 EU Member States. The survey was carried out by telephone, with web-based computer assisted telephone interviewing (WebCATI). To correct for sampling disparities, a post-stratification weighting of the results was implemented, based on socio-demographic variables.

The charts in the report present the results for: a) the EU27 in total and b) individually for each of the 27 EU Member States. The respondents' results have also been broken down by socio-demographic variables. Where possible, and relevant, a comparison has been made with the results of the Eurobarometer reports on "*Young People and Drugs*" conducted in 2002 and 2004.

Main findings

Preferred sources of drug-related information

- Almost two-thirds (61%) of young people in the EU27 said they would use the Internet to get information about illicit drugs and drug use in general; only in Cyprus and Greece did figures fall below 50%.
- One in three respondents (35%) would turn to a friend to discuss drug-related issues, while slightly more than a quarter of young people (27%) would prefer to talk to a parent or other relative.
- A health professional was selected by one-third of 15-24 year-olds (34%), and a quarter would contact a specialised drugs counsellor or someone at a drugs centre.
- There was a great similarity across Member States, with many young people opting for similar sources (the Internet, a friend, parents, a health professional or drugs counsellor). These preferences would be at the expense of potential contact with the police, social workers and a telephone helpline.

Actual channels used by young people to find out about drug issues

- Despite the above findings, which referred to methods that theoretically might be used, the Internet (35%) was not actually the channel most frequently consulted to find out about drug-related issues. More use was made of media campaigns (46%) and school prevention programmes (39%).
- In almost all Member States, 15-24 year-olds have used a similar range of information channels – media campaigns, school prevention programmes and the Internet. In some countries, however, access to relevant information via school prevention programmes has found less favour than talking to a friend.

Health risks associated with drug use

- The high health risks linked to heroin, cocaine and ecstasy were accepted by almost all young people in the EU (between 80% and 94% of respondents thought there would be a risk).
- There is a different perception in relation to cannabis, where only 40% of young people saw a high health risk and 14% attributed a low risk to the use of this drug.
- Only a quarter of young people in the EU saw high risks linked to the consumption of alcohol and tobacco (24% and 28%, respectively).
- For ecstasy and cannabis, Czech respondents stood out with only 37% and 17%, respectively, associating high health risks with these illicit drugs. Young Czechs thought tobacco (20%) and alcohol (18%) posed a slightly higher risk than cannabis (17%). Romanians were the most likely to say that alcohol or tobacco, (37% and 42%, respectively), posed a high health risk.

Actions to combat drug use in society

- To deal with drug problems in society, young people would prefer tough measures to be taken against drug dealers and traffickers (63%).

- The 15-24 year-olds also want “soft” measures to be used against drug users as opposed to “hard” ones, e.g. they prefer information and prevention campaigns (47%) and the treatment and rehabilitation of offenders (33%) as opposed to tough measures against drug users (23%).
- Exceptions were Estonia, Latvia, Hungary and the Netherlands, where tough measures against drug users were considered to be more effective than treatment and rehabilitation.
- Legalising drugs, and reducing poverty and unemployment (13% and 15%, respectively) were seen to be the least effective ways of fighting society’s drug problems.

Bans or regulation of drugs, alcohol and tobacco

- Young EU citizens think that heroin, cocaine and ecstasy should continue to be banned: from 94% to 97% of 15-24 year-olds feel this way.
- There were more differences in opinions relating to the use of cannabis: two-thirds (67%) of young people wanted to continue the ban and 31% wanted to bring in regulation.
- A large majority of young people agreed that legal substances such as alcohol and tobacco should continue to be regulated; only 18% wanted to ban tobacco and 9% would choose to prohibit alcohol.
- Relatively few people in the Czech Republic (45%) and the Netherlands (38%) wanted to ban cannabis. Romanian youth were the strongest advocates of such a ban (91%), but they were also the ones most likely to opt for a ban on alcohol and tobacco (22% and 31%, respectively).

Access to drugs, alcohol and tobacco

- Heroin was seen to be the most difficult illicit drug to obtain (72% of 15-24 year-olds were of this opinion) followed by cocaine, ecstasy and cannabis. Only a third of young people (34%) felt that it would be difficult to get hold of cannabis
- There was a wide variety of opinions across the Member States in regard to the difficulty there would be in acquiring illicit drugs: most Finns (91%) said it would be difficult to find heroin, but only 43% of young Bulgarians shared this opinion.
- There was an even greater variety of opinions regarding the availability of cocaine: Finns, again, said access to the drug would be difficult (90%) but over half of the Spanish and Irish respondents said it would be easy to obtain cocaine.
- In a majority of countries, more than half of the young people thought it would be easy to get hold of cannabis; however, in Cyprus, Finland, Romania and Sweden, more than half of the respondents said it would be difficult.
- There was less variation across the Member States when it came to obtaining alcohol and tobacco.
- Young people in Denmark and the Netherlands most frequently said that they could easily get hold of alcohol and tobacco, while young respondents in Romania and Cyprus thought they would have the most difficulty.

1. Becoming more informed about illicit drugs and drug use

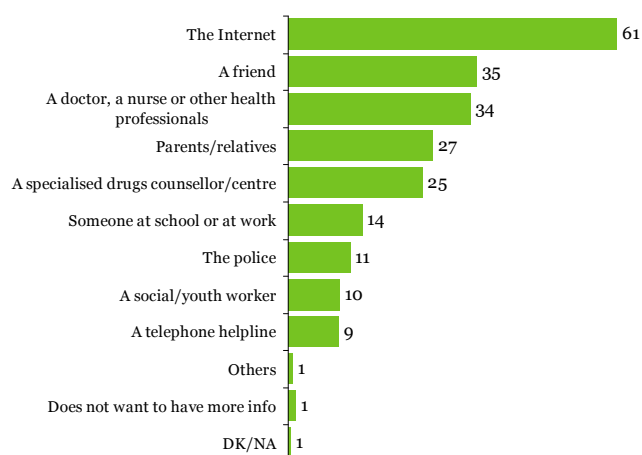
1.1 Potential sources of information

Young EU citizens participating in this survey were presented with a list of potential sources they could turn to when looking for general information about illicit drugs and drug use; they were asked to select up to three sources. **The Internet** was the most popular source of information: 61% of respondents said they would use the Internet to find out more about illicit drugs and drug use in general.

One in three respondents (35%) said they would turn to **a friend** in order to discuss issues relating to illicit drugs and drug use, while slightly more than a quarter preferred to talk to **their parents or other relatives** (27%). A **health professional, such as a doctor or nurse**, was selected by one-third of interviewees (34%), and a quarter of respondents would contact a **specialised drugs counsellor** or someone at a drugs centre.

Other sources of information envisaged in this survey seemed to be less popular with young people. A smaller group of respondents (14%) would talk to someone at school or at work (e.g. a teacher, classmate or colleague). Only one in 10 interviewees selected **the police** (11%), **a social or youth worker** (10%) or **a telephone helpline** (9%) to discuss drug-related issues.

Potential sources of information about illicit drugs and drug use



Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.

Base: all respondents; % of mentions by EU27

Comparison with the Flash Eurobarometers “Young people and drugs” - 2002 and 2004

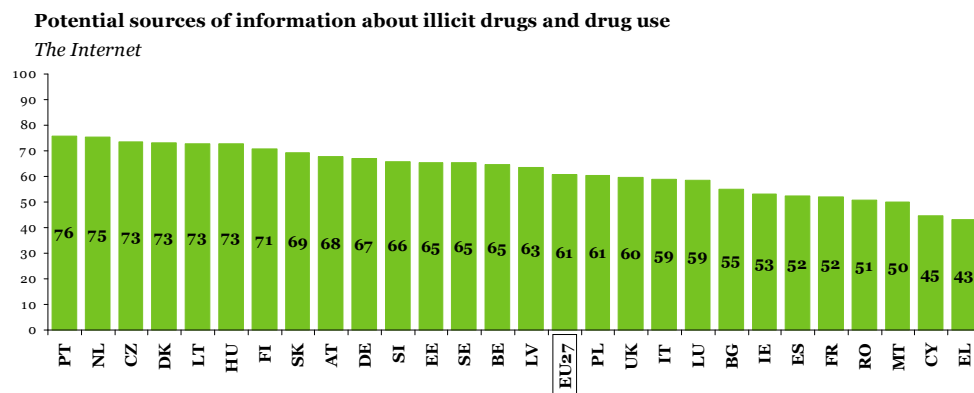
The more formalised information sources – a specialised drugs counsellor and a health professional – had been the ones most likely to be used by young people in 2004, and fewer respondents selected the Internet as a way of finding out about drugs. However, compared to 2002, the Internet was making headway (in 2004) as a source of information about drugs.

This increasing importance of the potential use of the Internet for this purpose has been confirmed in 2008: it is now said to be the most likely information source for young people wanting to know more about illicit drugs and drug use in general. The increasing importance of the Internet would lead to a reduction in the use of more formalised information sources, which have now been selected by fewer respondents.

Getting information from someone at school or at work, a social or youth worker, a police officer or by calling a telephone helpline were all less popular than other sources in 2002 and 2004, and this trend has been confirmed in the present survey¹.

Individual country results

A majority of respondents in almost all Member States selected **the Internet** as a potential source of information about illicit drugs and drug use in general. The proportion of respondents selecting this source ranged from three-quarters of Portuguese and Dutch respondents (76% and 75%, respectively) to a slim majority of respondents in, for example, Malta (50%) and Romania (51%), and to less than half of the respondents in Greece and Cyprus (43% and 45%, respectively).



Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.
Base: all respondents; % of mentions by country

Respondents in Ireland and the UK were the most likely to say they would talk to **a friend** when looking for more information about illicit drugs and drug use in general; more than half of respondents selected this answer from the listed information sources (58% and 54%, respectively)². In Lithuania and Romania, on the other hand, less than one-fifth of interviewees would talk to a friend about this issue (17% and 19%, respectively).

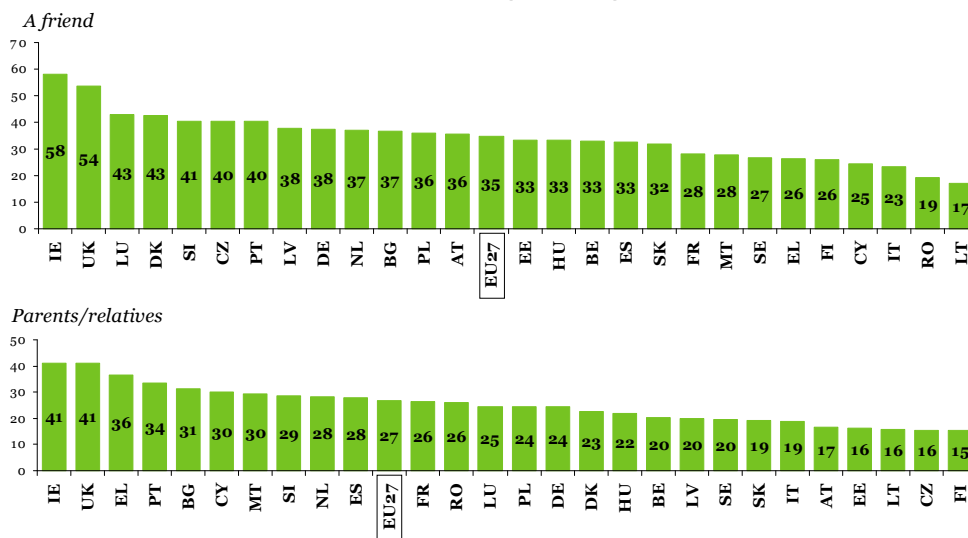
Irish and British young people were also the ones most liable to talk to their **parents or relatives** about drugs and drug use (41% in both countries), as were significant numbers of young people in Greece and Portugal, 36% and 34%, respectively³. Lithuanian respondents, on the other hand, were again found at the lower end of the distribution of Member States: only 16% of Lithuanians would get information about illicit drug use from a parent or other relative. The proportions were similarly low in Finland (15%), the Czech Republic (16%), Estonia (16%) and Austria (17%).

¹ In the surveys in 2002 and 2004, young people were asked who they would turn to when wanting to know more about “drugs”, while young people in 2008 were asked who they would turn to when they wanted to know more about “illicit drugs and drug use in general”.

² In 2004, young people in the UK and Ireland were also among the most likely in the EU15 to talk to a friend about drugs.

³ Respondents in the southern European countries, Greece and Portugal, were also more likely to get information about drugs from someone in their family in 2004.

Potential sources of information about illicit drugs and drug use

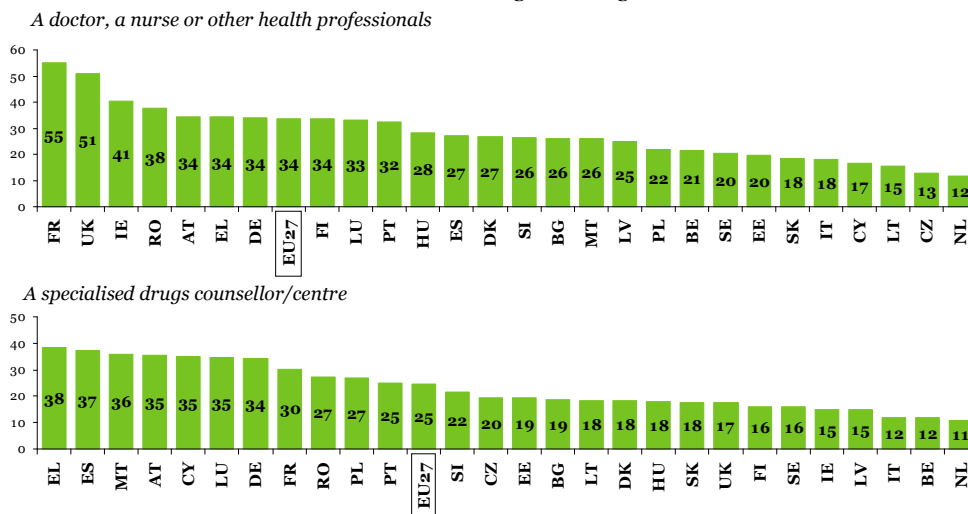


Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.
Base: all respondents; % of mentions by country

Talking to a **health professional**, such as a nurse or a doctor, about drug-related issues was clearly more appreciated in France (55%) and the UK (51%) than in other countries. A **counsellor or someone else at a specialised drug centre** was mentioned most often in the southern European countries: Greece (38%), Spain (37%) and Malta (36%).

These more formalised sources of information were, however, the ones the least often selected in the Netherlands: only 12% of Dutch interviewees would refer to a health professional to get general information about illicit drugs and drug use and 11% would talk to a specialised drugs counsellor or someone at a specialised drugs centre⁴. Young people in Italy were also less disposed to select these formal information sources, with just 18% of respondents who would talk to a health professional and 12% to a specialised drugs counsellor.

Potential sources of information about illicit drugs and drug use



Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.
Base: all respondents; % of mentions by country

⁴ The 2004 survey on young people and drugs also showed that the Dutch were less inclined to go to a specialised drugs centre or to a health professional for drugs-related issues.

The following set of charts shows that all other sources of information – **someone at school or at work, the police, a social or youth worker and a telephone helpline** – were selected by less than one in five respondents in almost all Member States. The exceptions were Hungary, Ireland and Poland, with slightly more than one in five respondents who would prefer to talk to someone at school or at work (24%, 22% and 21%, respectively), and Cyprus and Poland, where a quarter of respondents said they would go to the police to find out more about illicit drugs and drug use.

It has already been seen that Irish and British respondents were the most inclined to talk to someone they know about drugs and drug use (a friend, a parent or a relative). Additionally, they were among the ones most open to turning to someone at school or at work, i.e. someone known to them (22% and 19%, respectively).

Respondents in the Netherlands and Italy, in turn, repeated that they were less disposed to refer to a more formalised source of information – fewer than one in 20 Dutch and Italian respondents would talk to a police officer, a youth or social worker or would call a telephone helpline.

Potential sources of information about illicit drugs and drug use



Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.
Base: all respondents; % of mentions by country

Respondents were asked to select *up to three* information sources that they would turn to when looking for more information about drugs; some of them selected three sources, but others mentioned only one or two. Since differences were observed in the average number of sources that respondents in each Member State selected, their significance was difficult to compare across countries⁵. An alternative way to look at the differences between countries is to compare the top three information sources, about illicit drugs and drug use in general, in the different countries.

⁵ For example, in some countries a majority of respondents listed three information sources (e.g. in the UK and Ireland), while in Lithuania a large majority of interviewees selected only one source from the list. As a consequence, the UK and Ireland were more often found at the higher end of the distribution of selected information sources, while Lithuania was consistently found at the lower end.

The table on the following page shows the three most popular choices of information sources, to find out more about illicit drugs, per country. A first glance shows that respondents in all of the EU Member States frequently selected similar information sources, i.e. the Internet, a friend, parents and relatives, a health professional and a specialised drugs counsellor.

In all Member States, except for Ireland and France, **the Internet** was selected by the largest group of respondents. For example, in Lithuania, 73% of respondents selected the Internet, while the second and third most-mentioned sources, a specialised drugs counsellor and a friend, were selected by only 18% and 17%, respectively, of respondents. In other countries, the difference between the most-frequently-selected information source and the second one was smaller: for example, in Luxembourg, 59% of respondents said they would search the Internet (in first position) compared to 43% who preferred talking to a friend (in second position).

The Internet was not the most popular choice in Ireland. As described, Ireland had the highest proportion of respondents who would choose to talk to **a friend** when looking for more information about illicit drugs and drugs use: 53% of Irish 15-24 year-olds said that they would consult the Internet for more information, while a slightly larger group (58%) said they would talk to a friend. This latter option was also one of the preferred methods of finding out more about drugs in almost all of the other EU Member States – this information source appeared among the three most popular (listed) information sources in 22 EU countries.

Although **parents or relatives** were generally less frequently mentioned than a friend as someone to talk to about drugs and drug use, they were the third most popular way to find out more about the topic in 10 Member States. For example, 66% of Slovene respondents would search the Internet (in first position), followed by 41% who preferred talking to a friend (second position) and 29% to their parents or a relative (third position).

Respondents in France, in turn, were slightly more disposed to select **a doctor or nurse**, or any other health professional, as someone they would turn to when looking for more information about drug use than they were to answer that they would search the Internet (55% vs. 52%). A **specialised drugs counsellor** or someone at a drugs counselling centre came in third position, selected by 30% of French respondents. A health professional appeared in the top three of the most-mentioned information sources in 10 Member States (e.g. Denmark or Romania) and a specialised drugs counsellor was selected by the second or third largest group of respondents in 12 Member States (e.g. Cyprus or Poland).

Potential sources of information about illicit drugs and drug use (three most popular choices)

BE	%	BG	%	CZ	%
The Internet	65	The Internet	55	The Internet	73
A friend	33	A friend	37	A friend	40
A doctor, a nurse or other health professionals	21	Parents/ relatives	31	A specialised drugs counsellor/ centre	20
DK	%	DE	%	EE	%
The Internet	73	The Internet	67	The Internet	65
A friend	43	A friend	38	A friend	33
A doctor, a nurse or other health professionals	27	A specialised drugs counsellor/ centre	34	A doctor, a nurse or other health professionals	20
EL	%	ES	%	FR	%
The Internet	43	The Internet	52	A doctor, a nurse or other health professionals	55
A specialised drugs counsellor/ centre	38	A specialised drugs counsellor/ centre	37	The Internet	52
Parents/ relatives	36	A friend	33	A specialised drugs counsellor/ centre	30
IE	%	IT	%	CY	%
A friend	58	The Internet	59	The Internet	45
The Internet	53	A friend	23	A specialised drugs counsellor/ centre	35
Parents/ relatives	41	Parents/ relatives	19	Parents/ relatives	30
LV	%	LT	%	LU	%
The Internet	63	The Internet	73	The Internet	59
A friend	38	A specialised drugs counsellor/ centre	18	A friend	43
A doctor, a nurse or other health professionals	25	A friend	17	A specialised drugs counsellor/ centre	35
HU	%	MT	%	NL	%
The Internet	73	The Internet	50	The Internet	75
A friend	33	A specialised drugs counsellor/ centre	36	A friend	37
A doctor, a nurse or other health professionals	28	Parents/ relatives	30	Parents/ relatives	28
AT	%	PL	%	PT	%
The Internet	68	The Internet	61	The Internet	76
A friend	36	A friend	36	A friend	40
A specialised drugs counsellor/ centre	35	A specialised drugs counsellor/ centre	27	Parents/ relatives	34
RO	%	SI	%	SK	%
The Internet	51	The Internet	66	The Internet	69
A doctor, a nurse or other health professionals	38	A friend	41	A friend	32
A specialised drugs counsellor/ centre	27	Parents/ relatives	29	Parents/ relatives	19
FI	%	SE	%	UK	%
The Internet	71	The Internet	65	The Internet	60
A doctor, a nurse or other health professionals	34	A friend	27	A friend	54
A friend	26	A doctor, a nurse or other health professionals	20	A doctor, a nurse or other health professionals	51

Q1. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to?
Please choose up to three.

Socio-demographic considerations

If **young women** wanted to know more about illicit drug and drug use, they would be more likely to contact a specialised drugs counselling centre (28% vs. 22% of young men) or a health professional (36% vs. 31%)⁶. Young men, on the other hand, would prefer to get their information from the police (14% vs. 9% of young women).

Age also had an impact on the responses from 15-24 year-olds when they were asked how they would find more information about illicit drugs and drug use. Higher proportions of the older respondents said they would turn to more formalised information sources: a specialised drugs counsellor, a health professional or a helpline. For example, while 12% of respondents in the oldest age category said they would contact a telephone helpline, only 7% of respondents in the youngest age category said they would do this⁷. Furthermore, older respondents were more likely to search the Internet for drug-related information (64% of 22-24 year-olds and 65% of 19-21 year-olds vs. 54% of 15-18 year-olds). Younger respondents, on the other hand, were more likely to prefer to get information from their friends, families or someone at school or at work. For example, 38% of the 15-18 year-olds and 36% of the 19-21 year-olds said they would turn to a friend compared to 31% of the 22-24 year-olds.

The higher the completed **level of education** of the respondents, the more they considered that a health professional, a telephone helpline or the Internet could provide more information about illicit drugs and drug use in general. For example, 69% of respondents who had completed their higher education said they would search the Internet compared to just 54% of respondents who had only completed primary education at the time of the interview. Conversely, the shorter the schooling of the respondents, the more inclined they were to talk to a friend, relatives (e.g. a parent) or someone at school or at work. For example, while 19% of respondents who had completed higher education said they would talk to a parent or relative, almost twice as many respondents who had (so far) only completed primary education said so (37%)⁸. Similar observations could be made when comparing respondents who were currently a **full-time student** and those who were not.

The results for the variable “**occupational status**” showed that non-working respondents, or respondents where the head of the household was not working, were less liable than their counterparts to say they would talk about drug-related issues to a friend, their parents or someone at school or at work, but they were more disposed to contact a doctor or a nurse. For example, while one-third of respondents in “non-working” households would talk to a friend, almost four out of 10 respondents in “self-employed” households would do this (37%). Manual workers, or respondents from a household where the main contributor to the household income was a manual worker, on the other hand, were the least likely to prefer searching the Internet (56% vs. 61% average), but slightly more ready to get information from the police (14% vs. 11% average).

The **place of residence** of the respondents seemed to have almost no impact on the interviewees’ views about potential information sources about illicit drugs and drugs use in general.

For further details, please see Annex table No. 1b and 2b.

⁶ In 2004, it was also noted that young women in the EU15, who wanted to know more about drugs, were more likely than young men to contact a specialised drugs centre or a health professional.

⁷ This is similar to the observation made in 2004 that higher proportions of 20-24 year-olds in the EU15 would turn to a specialised drugs counsellor, a health professional or a telephone helpline when looking for more information about drugs.

⁸ The level of education played a similar role regarding the use of information sources about drug use in 2004. Respondents with a high level of education were more likely to refer to a more formalised source of information (a drugs counsellor or health professional) or to search the Internet, while respondents with a lower level of education would prefer to talk to someone they know to find out more about drugs.

1.2 Information channels used in the past year

The results for Question 1 (potential sources of information about illicit drugs) showed that the Internet was said to be the most popular such information source for young people. However, when asked through which information channels they had actually been informed about the effects and risks of illicit drug use during the past year, **the Internet** was in *third position* – with one-third of interviewees (35%) selecting this channel from the ones listed.

As opposed to the Internet, young citizens of the EU have turned to **media campaigns** (46% selected this channel) and **school prevention programmes** (39%) to get information about the effects and risks of illicit drug use in the past year.

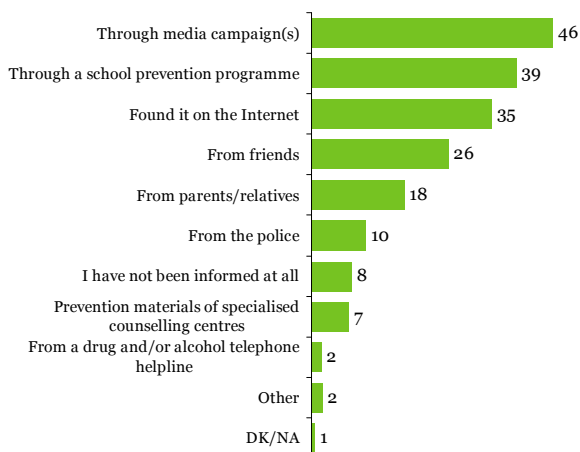
Although 35% of young people said they would turn a friend to discuss drug-related issues and 27% preferred to talk to their parents or other relatives, only a quarter said they had actually discussed these issues with **a friend** in the past year, and about one-fifth of respondents (18%) had talked to their **parents or other relatives** about these issues.

The difference between potential and actual information channels about drug use was even larger for the specialised counselling centres: although a quarter of respondents said they would consider these outlets when looking for more information about illicit drugs, only 7% had actually used **information issued by specialised counselling centres**.

Only a minority of respondents said they had received information about the effects and risks of drug use from **the police** (10%) or by calling a **drug and/or alcohol helpline** (2%) in the past year. This corresponded to the low proportion of respondents who selected these information channels as potential information sources in Question 1.

Finally, only 8% of respondents spontaneously said they had **not been informed at all** about the effects and risks of illicit drug use in the past year.

Channels through which young people were informed about the effects and risks of illicit drug use



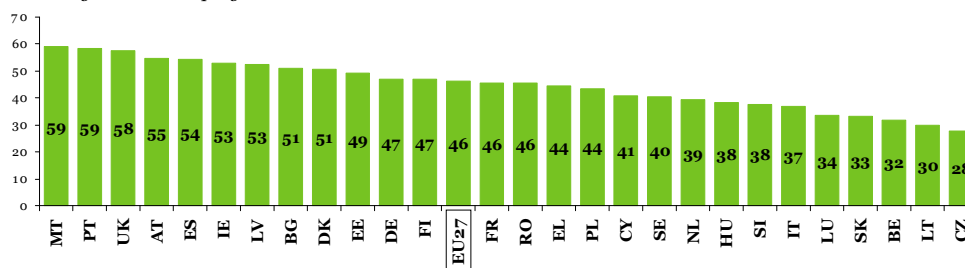
Q2. Through which of the following channels – if any – have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by EU27

Individual country results

In almost all Member States, at least one-third of respondents had received information in the past year about the risks and effects of illicit drug use through **media campaigns**. Maltese and Portuguese respondents (59%), followed by those from the UK (58%), were the ones making the most use of such campaigns. Respondents from the Czech Republic, Lithuania and Belgium, on the other hand, were the least likely to have been informed in this way. Furthermore, the Czech Republic, Lithuania and Belgium were the only countries where less than one in three respondents mentioned this information channel (28%, 30% and 32%, respectively).

Channels through which young people were informed about the effects and risks of illicit drug use

Through media campaign(s)

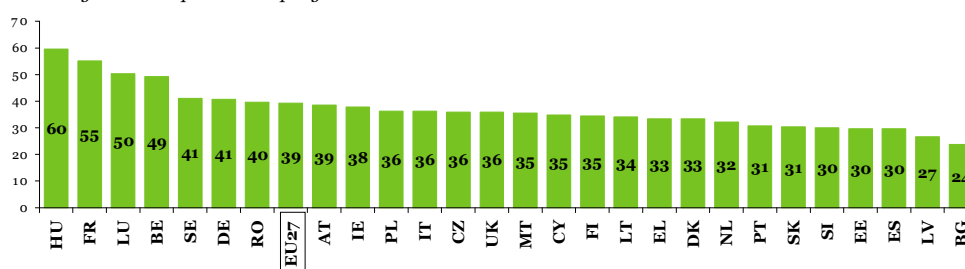


Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by country

The proportion of respondents who answered that they were informed about the risks and effects of drug use through **a school prevention programme**, organised during the course of the past year, ranged from just 24% in Bulgaria and 27% in Latvia to 60% in Hungary. Half of the young people, or more, learned about the risks of illicit drugs during such a school programme in only four countries: 60% in Hungary, 55% in France, 50% in Luxembourg and 49% in Belgium. Although Luxembourg and Belgium had some of the lowest proportions of 15-24 year-olds who were informed through a media campaign, they were among the highest in terms of using school prevention programmes.

Channels through which young people were informed about the effects and risks of illicit drug use

Through a school prevention programme



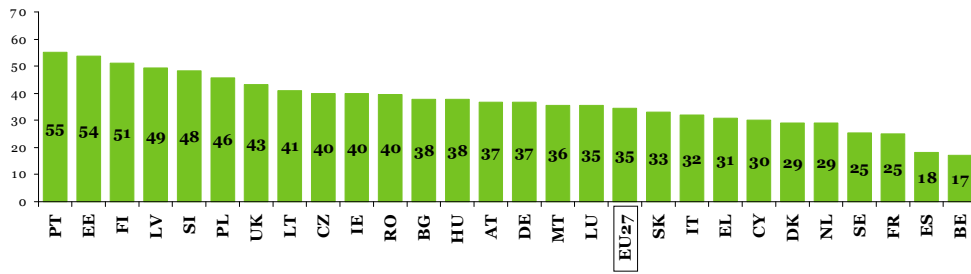
Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by country

A slim majority of Portuguese (55%), Estonians (54%) and Finns (51%) said they used **the Internet** in the past year looking for more information about illicit drug use. Young Portuguese citizens were not only the ones most likely to have used the Internet in the past year for this purpose, they were also the respondents most liable to select the Web as the one they would use if needed (see section 1.1).

Dutch respondents were also among the most prone to say they would use the Internet when looking for more information about drugs. However, only 29% of them had actually used the Internet in that way in the past year. Respondents from Belgium and Spain were the least likely to say they informed themselves about drug-related issues by searching the Internet (17% and 18%, respectively).

Channels through which young people were informed about the effects and risks of illicit drug use

Found it on the Internet



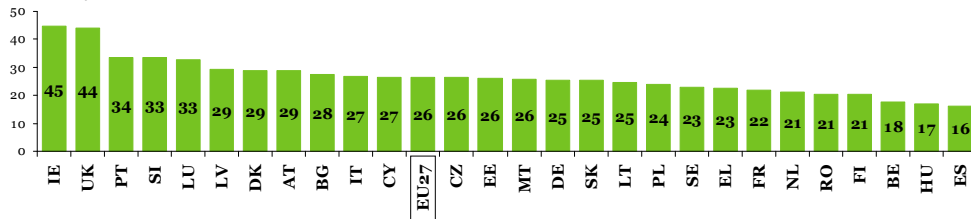
Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by country

In the UK and Ireland, almost twice as many respondents as the EU27 average mentioned that they had discussed the risks and effects of drug use with their **friends** or **relatives** during the past year. Forty-five percent of Irish and 44% of British respondents said they had talked to a friend (compared to the EU27 average of 26%) and the corresponding percentages for having contact with a parent or relative were 36% and 32%, respectively, compared to the EU27 average of 18%. This finding is consistent with that fact that Irish and British young people were the most liable to say they would trust their friends or relatives when wanting more information about illicit drugs (see section 1.1).

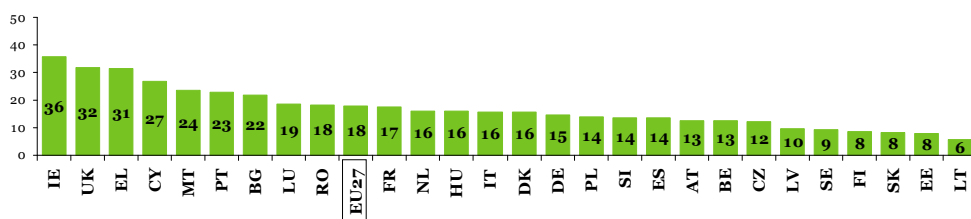
In Spain, Hungary and Belgium, less than one-fifth of respondents had been informed about the effects and risks associated with drug use by their friends (16% in Spain, 17% in Hungary and 18% in Belgium) in the past year. Less than one in 10 respondents in the eastern European countries, Lithuania (6%), Estonia and Slovakia (both 8%), and in the Nordic countries, Finland (8%) and Sweden (9%) said they knew more about the effects and risks of illicit drug use after having talked to their parents or other relatives.

Channels through which young people were informed about the effects and risks of illicit drug use

From friends



From parents/relatives



Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by country

In all EU Member States, except for Cyprus and Luxembourg, less than one-fifth of respondents had been informed about the effects and risks of drug use, in the past year, by **the police**. In Italy, Spain, Lithuania, Bulgaria, the Netherlands and Portugal, even less than one in 20 respondents had used this option. In Luxembourg, on the other hand, 22% of interviewees had been informed about drug-related risks by the police, and in Malta, more than a quarter of respondents (28%) had chosen this route.

Maltese 15-24 year-olds were the ones actually making most use of the police to get information about the risks of drug use and the ones most likely to say that they would turn to the police if necessary (see section 1.1).

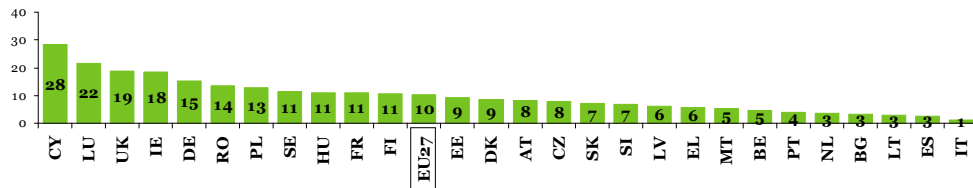
The proportion of young EU citizens who said they learned more about the risks and effects of illicit drug use in the past year from reading **prevention materials issued by a specialised counselling centre** ranged from 3% in Estonia to 18% in Cyprus. Furthermore, Cyprus was the only country where more than one-sixth of respondents selected such specialised centres for this purpose.

The proportion of interviewees who said they called **a telephone helpline** to get information about the risks and effects of illicit drug use was insignificant in almost all of the Member States. Malta was the only country where more than one-tenth of young people (11%) said they had called such a helpline for this purpose in the past year.

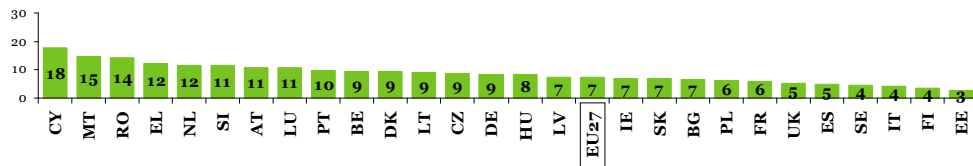
Young Slovenes (17%) and Slovaks (16%) were the most apt to say they had **not been informed** about the risks and effects of drug use in the past year. However, none of the Maltese, only 1% of Cypriots and 3% of Irish and Portuguese said they had not been informed about the risks of drugs.

Channels through which young people were informed about the effects and risks of illicit drug use

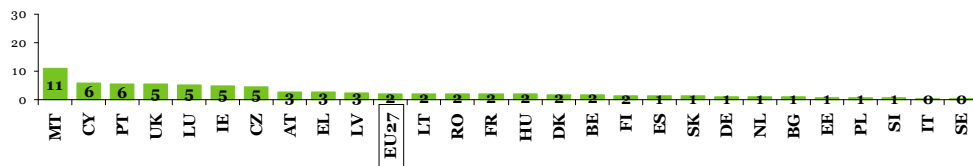
From the police



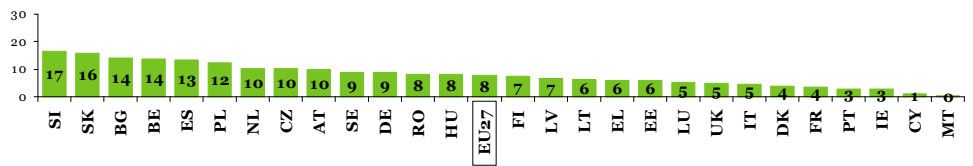
Prevention materials of specialised counselling centres



From a drug and/or alcohol telephone helpline



“I have not been informed about the effects and risks of illicit drug use”



Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.
Base: all respondents; % of mentions by country

As respondents were again asked to select *up to three* information channels through which they had actually been informed about the effects and risks of illicit drug use, the importance of different information sources was difficult to compare across countries. The next table shows the three most popular information channels for each country.

In all EU Member States, **media campaigns** appeared among the three most popular information channels for young people in the past year. Furthermore, these campaigns were the most frequently mentioned method of seeking information in 16 Member States. As noted previously, Maltese, Portuguese and British respondents were the ones making most use of media campaigns – with almost six out of 10 respondents using such a channel. However, these campaigns were also the most popular information source in, for example, Italy even though just over a third (37%) of 15-24 year-olds had used such methods.

The Internet also appeared among the three most popular methods to find out about illicit drugs in almost all of the Member States; it was the most frequently used channel in six countries. For example, almost half of Slovene respondents (48%) searched the Internet in the past year (in first position), followed by 38% who said they were informed through a media campaign (second position) and 33% who had talked to their friends (third position). The Internet was not such a popular information channel to be used for this purpose in Belgium and Greece, as this channel did not appear in the top three of the most-mentioned channels in these two countries.

A school prevention programme proved to be among the main information channels in 21 Member States. In Belgium, France, Luxembourg, Hungary and Sweden, it was the most popular information channel for young people to learn about the effects and risks of illicit drug use. For example, six out of 10 Hungarian 15-24 year-olds made use of a school prevention programme, while smaller proportions of respondents mentioned a media campaign or the Internet (both 38%). School prevention programmes found less favour in Bulgaria, Ireland, Latvia, Portugal, Slovenia and the UK.

Not surprisingly, in the UK and Ireland – where we found that informal sources of information played a vital role – the second largest group of respondents were informed by their **friends** about the effects and risks of illicit drug in the past year. This outlet also appeared among the top three information channels in Belgium, Bulgaria, Latvia, Portugal and Slovenia. Only in one Member State **were parents and relatives** listed as one of the main information channels: in Greece, almost one-third of young people said they had turned to their parents or other relatives in the past year – placing this information channel in third place in this country

**Channels through which young people were informed about the effects and risks of illicit drug use
(three most popular choices)**

BE	%	BG	%	CZ	%
Through a school prevention programme	49	Through media campaign(s)	51	Found it on the Internet	40
Through media campaign(s)	32	Found it on the Internet	38	Through a school prevention programme	36
From friends	18	From friends	28	Through media campaign(s)	28
DK	%	DE	%	EE	%
Through media campaign(s)	51	Through media campaign(s)	47	Found it on the Internet	54
Through a school prevention programme	33	Through a school prevention programme	41	Through media campaign(s)	49
Found it on the Internet	29	Found it on the Internet	37	Through a school prevention programme	30
EL	%	ES	%	FR	%
Through media campaign(s)	44	Through media campaign(s)	54	Through a school prevention programme	55
Through a school prevention programme	33	Through a school prevention programme	30	Through media campaign(s)	46
From parents/ relatives	31	Found it on the Internet	18	Found it on the Internet	25
IE	%	IT	%	CY	%
Through media campaign(s)	53	Through media campaign(s)	37	Through media campaign(s)	41
From friends	45	Through a school prevention programme	36	Through a school prevention programme	35
Found it on the Internet	40	Found it on the Internet	32	Found it on the Internet	30
LV	%	LT	%	LU	%
Through media campaign(s)	53	Found it on the Internet	41	Through a school prevention programme	50
Found it on the Internet	49	Through a school prevention programme	34	Found it on the Internet	35
From friends	29	Through media campaign(s)	30	Through media campaign(s)	34
HU	%	MT	%	NL	%
Through a school prevention programme	60	Through media campaign(s)	59	Through media campaign(s)	39
Through media campaign(s)	38	Found it on the Internet	36	Through a school prevention programme	32
Found it on the Internet	38	Through a school prevention programme	35	Found it on the Internet	29
AT	%	PL	%	PT	%
Through media campaign(s)	55	Found it on the Internet	46	Through media campaign(s)	59
Through a school prevention programme	39	Through media campaign(s)	44	Found it on the Internet	55
Found it on the Internet	37	Through a school prevention programme	36	From friends	34
RO	%	SI	%	SK	%
Through media campaign(s)	46	Found it on the Internet	48	Through media campaign(s)	33
Through a school prevention programme	40	Through media campaign(s)	38	Found it on the Internet	33
Found it on the Internet	40	From friends	33	Through a school prevention programme	31
FI	%	SE	%	UK	%
Found it on the Internet	51	Through a school prevention programme	41	Through media campaign(s)	58
Through media campaign(s)	47	Through media campaign(s)	40	From friends	44
Through a school prevention programme	35	Found it on the Internet	25	Found it on the Internet	43

Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year?
Please choose up to three.

Socio-demographic considerations

Not surprisingly, **younger respondents**, those who had not (yet) completed more than **primary education** and **full-time students** were significantly more likely to say they were informed about the risks and effects of illicit drug use during a school prevention programme in the past year. For example, six out of 10 respondents (61%) of 15-18 year-olds chose such a programme from the list of information channels compared to only 18% of 22-24 year-olds.

Younger respondents, and those who had not (yet) completed more than primary education, were also more liable to turn to someone they know (a friend, parent or relative) and the police as channels through which they had been informed about the risks of drug use during the past year. For example, only 12% of 22-24 year-olds said they had been informed by their parents compared to twice as many 15-18 year-olds (24%).

The **older** and more **highly-educated respondents** were, however, more likely to have been informed about illicit drugs through a media campaign or by searching the Internet. For example, six out of 10 respondents who had completed higher education said they had been informed through a media campaign about illicit drugs compared to 36% of respondents who had not (yet) completed more than primary education. Finally, respondents in the oldest age category (the 22-24 year-olds), those who had completed higher education and those who were no longer full-time students were the ones most inclined to say they had not been informed at all in the past year about the effects and risks of illicit drugs (e.g. 6% of full-time students vs. 11% of respondents not studying full-time).

City dwellers were more likely to have been informed about the effects and risks of illicit drug use through a media campaign than via a school prevention programme (46% vs. 33% for metropolitan areas and 48% vs. 38% for urban areas), while young people from rural areas were as likely to mention either of these information channels (44% for both). City dwellers were also more prone than rural residents to say they had used the Internet (36% in metropolitan areas and 37% in urban areas vs. 31% in rural areas).

Finally, a few differences were found by the **occupational status** of the respondent or, alternatively, of the main contributor to the household income. Firstly, respondents in “non-working” and “manual worker” households were less likely to have learned more about the risks and effects of drug use from someone they know. For example, a quarter (24%) of manual workers (or respondents in households where the head of the household was a manual worker) said they learned about the risks of drug use from a friend compared to 28% of respondents in “self-employed” households. Furthermore, respondents in “non-working” households were also the least likely to have been informed about illicit drug during a school prevention programme (28% vs. 39% average) and respondents in “manual worker” households were unlikely to have used the Internet (30% vs. 35% average).

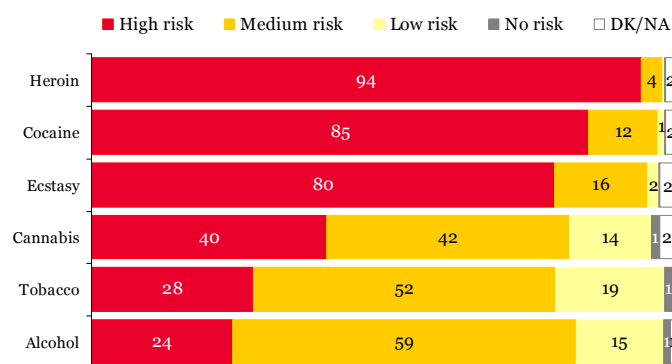
For further details, please see Annex table No. 3b.

2. Perceived health risks of using drugs

This chapter assesses young people’s perceptions of the health risks associated with the various illicit and licit substances. Virtually none of the young EU citizens interviewed thought that the substances mentioned in the survey – heroin, cocaine, ecstasy, cannabis, tobacco and alcohol – did not pose a risk to a person’s health. Moreover, accumulating the responses for the categories “high risk” and “medium risk”, it was noted that a large majority of interviewees acknowledged the potential dangers to a person’s health for all of these substances.

For **heroin**, **cocaine** and **ecstasy**, the health risk was seen to be a certainty for almost all of the respondents; 98%, 97% and 96% of them thought that using these substances might pose a *medium* or *high* risk to a person’s health. Of these three substances, heroin was considered to be the most dangerous, with 94% of respondents saying it posed a *high* health risk. Cocaine and ecstasy were considered slightly less dangerous: 85% and 80%, respectively, selected the “high risk” category.

Perceived extent of the risk to a person’s health



Q3. To what extent do you think the following substances may pose a risk to a person's health?
Does ecstasy pose a high, medium, low or no risk? How about ...
Base: all respondents; % by EU27

The picture is quite different for young people’s perceptions about the health risks associated with **cannabis**. Although eight out of 10 respondents (82%) recognised the health risks (*medium* or *high*) associated with cannabis, only half of them (40%) thought it posed a *high* risk to a person’s health. Furthermore, 14% of respondents said cannabis only posed a *low* risk to a person’s health.

Finally, looking at the results for **tobacco** and **alcohol**, eight young EU citizens out of 10 knew the health risks (*medium* or *high*) linked to smoking or the consumption of alcoholic drinks (80% and 83%, respectively). However, these risks were only considered to be *high* by 28% and 24% of 15-24 year-olds, respectively. Finally, 19% thought that tobacco only posed a *low* risk to a person’s health and 15% had the same opinion about alcohol.

Comparison with the Flash Eurobarometers “Young people and drugs” - 2002 and 2004

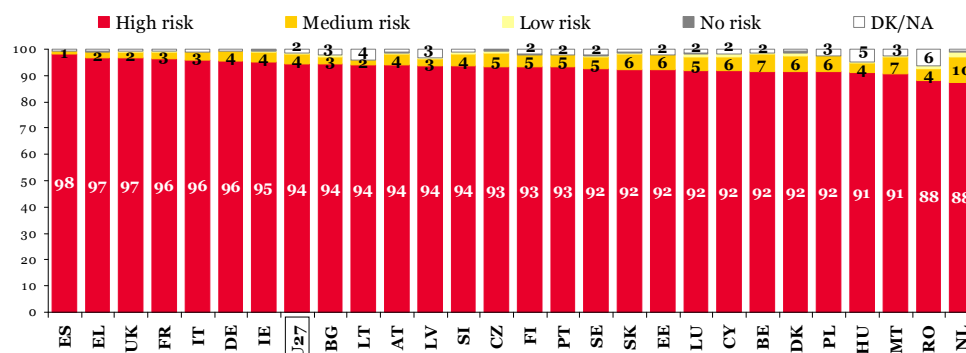
The 2004 survey assessed young people’s perceptions of the *dangers* of the various substances (drugs) under review⁹. Similar to young people’s perceptions of the health risks associated with each drug, heroin stood out as the most dangerous substance, followed by cocaine and ecstasy – a large majority of respondents considered these three drugs to be dangerous. Only half as many respondents, however, had this opinion about cannabis – this is similar to the findings of the current survey.

⁹ Although different terminology was used in the current survey – young people were asked to assess the *health risks* associated with certain substances - a comparison could be made between the ranking of each of the substances in terms of the perceived *health risks* and the perceived *dangers*.

Individual country results

Almost no difference was found between the EU Member States in regard to the number of respondents who knew the health risks (*medium* or *high*) of **heroin**: the figures ranged from 92% in Romania to virtually all respondents in, for example, Germany and Spain. Furthermore, even the differences in the proportion of respondents who thought that heroin posed a *high* risk were small across the Member States. In almost all countries, more than nine out of 10 respondents selected the “high risk” category (ranging from 91% in Malta to 98% in Spain). The exceptions were Romania and the Netherlands, where 88% of respondents thought that heroin posed a *high* health risk.

Perceived extent of the risk to a person’s health of **heroin**

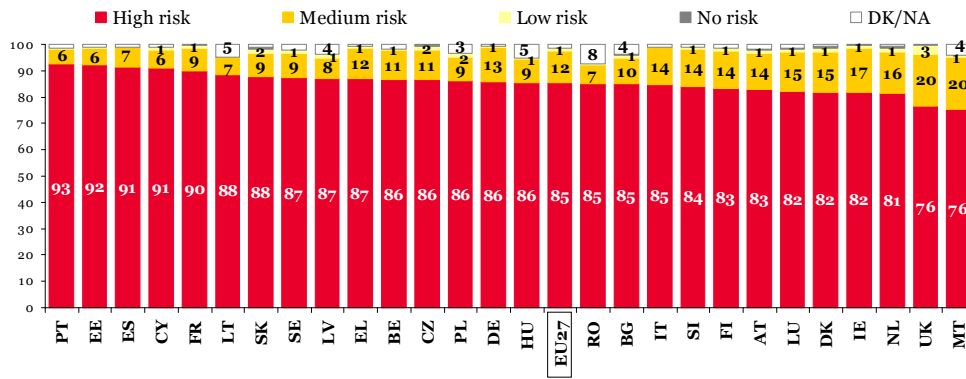


Q3. To what extent do you think the following substances may pose a risk to a person's health?
Does heroin pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

The individual country results for **cocaine** showed little variation in the proportion of respondents who thought that this substance posed a *medium* or *high* risk to a person’s health: the figures ranged from 92% in Romania to 99% in, for example, Portugal or France. However, focusing on those respondents who thought that cocaine use was associated with *high* health risks, there was more variation than for heroin use, and the figures ranged from 76% in Malta and the UK to 93% in Portugal.

Additionally, the proportion of respondents who thought that the use of cocaine was associated with *high* health risks was slightly lower in all Member States than was the case for heroin. For example, 94% of young Austrians thought that heroin posed a high health risk compared to 83% who thought the same about cocaine. This reduced awareness of the risks linked to cocaine was especially noticeable in the UK: it ranked among the highest in the perceived *high* health risks linked to heroin use (97%), but was the lowest in terms of the perceived risks associated with cocaine (76%).

Perceived extent of the risk to a person’s health of **cocaine**



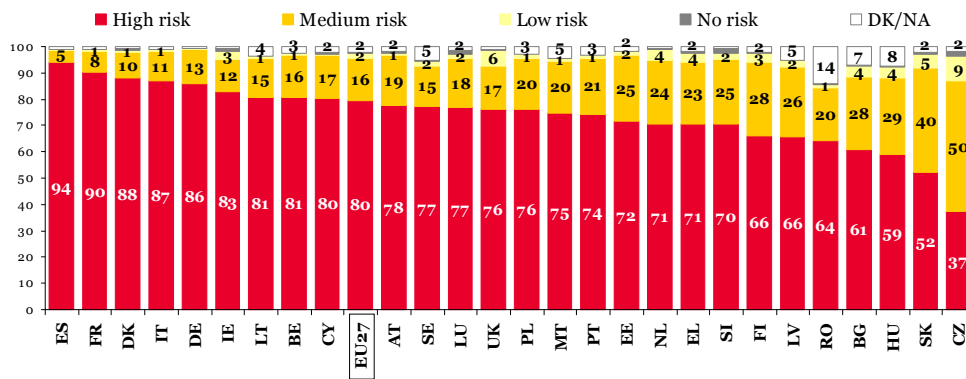
Q3. To what extent do you think the following substances may pose a risk to a person’s health?
Does cocaine pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

The proportion of young people who thought that **ecstasy** might pose a *high* risk to a person’s health was the greatest in Spain (94%). Other countries at the higher end of the Member States distribution – where more respondents thought there was a *high* health risk linked to ecstasy – were France (90%), Denmark (88%), Italy (87%), Germany (86%) and Ireland (83%). In these countries, at least as many young people thought that the health risks associated with ecstasy were just as *high* as those linked to cocaine (e.g. 88% of Danish respondents thought ecstasy posed a *high* health risk compared to 82% who had that opinion about cocaine).

In all other Member States, the health risks associated with ecstasy were perceived as being less serious than cocaine. This was especially noticeable in the Czech Republic where less than four out of 10 respondents (37%) thought ecstasy might pose a *high* risk to a person’s health compared to 86% who thought that about cocaine. The Czech Republic was the only country where less than half of 15-24 year-olds selected the “high risk” category for ecstasy use. Some of the other eastern European countries (i.e. Slovakia, Hungary, Bulgaria, Romania and Latvia) were also found at the lower end of the Member States distribution – with between 52% and 66% of respondents who associated *high* health risks with the use of ecstasy.

Nevertheless, the negative effects of ecstasy on a person’s health were not underestimated in any of the Member States – *medium* or *high* risks were foreseen by approximately 90% of 15-24 year-olds and less than one in 10 respondents said ecstasy only posed a *low* risk. For example, 87% of Czech respondents knew the health risks (*medium* or *high*) of ecstasy and just 9% thought that this drug would only mean a *low* risk to a person’s health.

Perceived extent of the risk to a person’s health of **ecstasy**



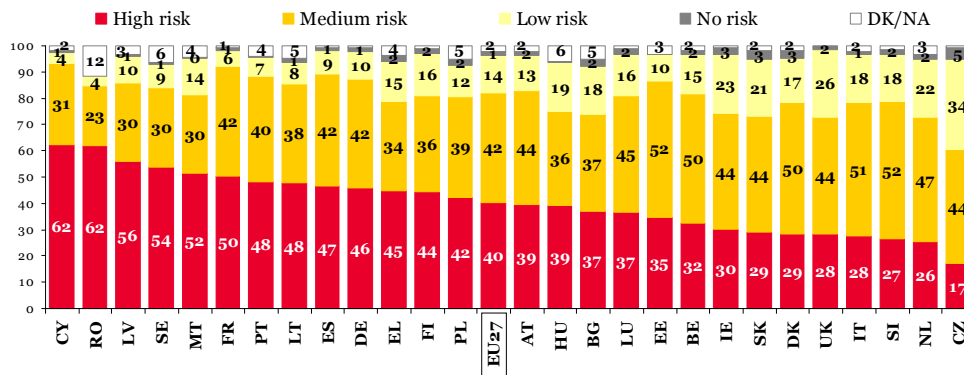
Q3. To what extent do you think the following substances may pose a risk to a person’s health?
Does ecstasy pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

The results about the perceived health risks linked to **cannabis** showed the largest variation between Member States. The proportion of respondents who reasoned that it might pose a *high* risk to a person’s health ranged from 17% in the Czech Republic to 62% in Cyprus and Romania. Furthermore, even when the Czech responses for “high risk” and “medium risk” were accumulated (giving a total of 61%), this was only equal to the “high risk” category in Cyprus and Romania (both 62%).

Czech respondents were the ones with the least concern about the impact of ecstasy on a person’s health, and they felt the same way about cannabis: just 17% thought the latter might pose a *high* health risk, 44% a *medium* health risk and 34% a *low* health risk. By comparison, in Cyprus, where respondents were the most likely to accept the health risks associated with cannabis, almost two-thirds (62%) of 15-24 year-olds selected the “high risk” category, 31% the “medium risk” and only 4% the “low risk”.

Similar to the results obtained for the EU27 overall, in all of the individual Member States (except for Romania) the proportion of respondents who said cannabis might pose a *high* risk to a person’s health was significantly smaller than the numbers thinking that about ecstasy. For example, 35% of Estonian respondents agreed that cannabis entailed a *high* health risk, while the proportion for ecstasy was twice that number (72%). In Romania, however, similar proportions – just under two-thirds - accepted the high risks of cannabis and ecstasy (62% and 64%, respectively).

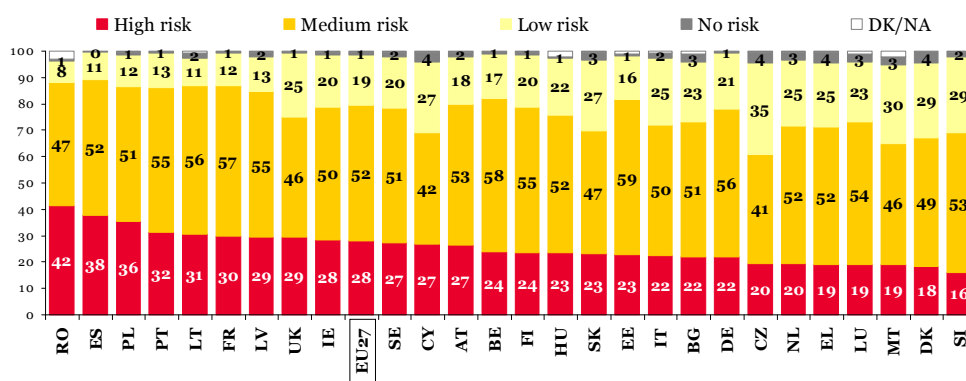
Perceived extent of the risk to a person’s health of **cannabis**



Q3. To what extent do you think the following substances may pose a risk to a person's health?
Does cannabis pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

Young Romanians were the most likely to say that **tobacco** posed a *high* health risk (42%), followed by Spanish and Polish 15-24 year-olds (38% and 36%, respectively). Additionally, in Romania (8%), Spain (11%) and Poland (12%), only one in 10 respondents thought that tobacco posed a *low* risk to a person’s health. Slovene, Danish and Maltese respondents, on the other hand, were the least likely to think that tobacco posed serious health risks – less than one-fifth said smoking might cause a *high* health risk (16% in Slovenia, 18% in Denmark and 19% in Malta) and three out of 10 respondents in these countries thought tobacco might pose a *low* risk to a person’s health (30% in Malta and 29% in Denmark and Slovenia). The proportion of respondents selecting the “low risk” category was, however, the greatest in the Czech Republic (35%).

Perceived extent of the risk to a person’s health of **tobacco**

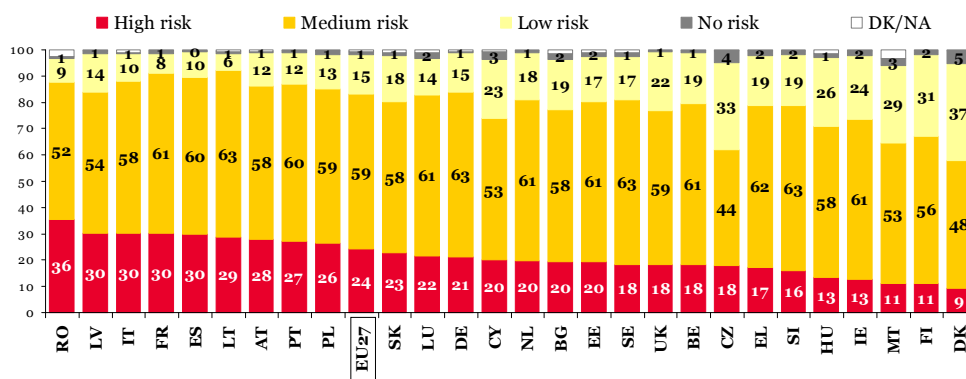


Q3. To what extent do you think the following substances may pose a risk to a person's health? Does tobacco pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

Young people in Romania were also the most likely to answer that **alcohol** posed a *high* risk to a person’s health (36%), and they were among the least disposed to say that consumption of alcohol would only entail a *low* health risk (9%). Similar proportions of respondents believing that alcohol was associated with a *low* health risk were found in France (8%) and Lithuania (6%). In these two Member States, more than nine out of 10 young people selected the “medium” and “high risk” categories.

Danish respondents, however, were the least minded to think that alcohol could cause serious health problems – only 9% said that alcohol might cause a *high* health risk and 37% thought there was a *low* risk to a person’s health. The proportion of respondents selecting the “low risk” category was almost as high in the Czech Republic (33%). However, twice as many Czechs as Danes said that alcohol might pose a *high* health risk (18%).

Perceived extent of the risk to a person’s health of **alcohol**



Q3. To what extent do you think the following substances may pose a risk to a person's health? Does alcohol pose a high, medium, low or no risk? How about ...
Base: all respondents; % by country

In almost all Member States, the proportion of respondents who thought that tobacco or alcohol posed a *high* risk to a person’s health was smaller than the proportion who thought this about cannabis. There were, however, four exceptions where a very small, but opposite, difference was found:

- in the Czech Republic, one-fifth of respondents thought that smoking tobacco was associated with a high health risk and 18% selected the “high risk” category for alcohol, compared to 17% who had this opinion about cannabis
- in the UK, no difference was found between the proportions selecting the “high risk” category for tobacco and for cannabis (29% and 28%, respectively)

- three out of 10 Italian respondents said alcohol might pose a high risk to a person's health compared to 28% who thought that about cannabis.

Accumulating the “medium” and “high” risk categories showed that in many countries the overall risk assessment did not differ much between the illicit drug cannabis and the licit substances tobacco and alcohol. For example, three-quarters of Bulgarian respondents thought that tobacco products might pose a *medium* or *high* risk to someone's health (22% *high* and 56% *medium*), and they felt the same about cannabis: 74% of Bulgarians expected a *medium* or *high* health risk linked to using cannabis (37% *high* and 37% *medium*).

Socio-demographic considerations

For heroin and cocaine, no difference was seen in the answering patterns of **young men and women**. For ecstasy and cannabis, however, more young women thought these substances would pose a *high* risk to a person's health, while more young men perceived *low* health risks. For example, 46% of young women said that using cannabis was associated with a *high* health risk and only 10% said health risks would be *low*. The corresponding percentages for young men were 35% for “high risk” and 18% for “low risk”. Similar differences by gender were found for licit substances: young men were more prone to say that alcohol posed a *low* risk to a person's health (19% vs. 11% for women) or that tobacco posed similar *low* risks (22% vs. 16%)¹⁰.

Although the same proportion of respondents in **different age categories** said that *heroin* and *cocaine* would pose a *medium* or *high* risk to a person's health, older respondents were more likely to recognise the seriousness of the risks associated with these drugs, i.e. they were more likely to select the “high risk” versus the “medium risk” category. For example, 88% of 22-24 year-olds thought that cocaine posed a *high* risk compared to 83% of 15-18 year-olds who had that opinion. No differences were observed about the perceived health risks of using *ecstasy*, but for *cannabis* exactly the opposite was seen (compared to *heroin* and *cocaine*): there was no difference in the proportions of respondents in the different age groups selecting the “high” and “medium risk” categories, but the youngest respondents were now the ones seeing a *high* health risk linked to cannabis (46% of 15-18 year-olds, 36% of 19-21 year-olds and 38% of 22-24 year-olds)¹¹.

A similar pattern of differences was observed when comparing the perceived health risks associated with these substances by the **level of education of the respondent** (i.e. respondents who had only completed primary education at the time of the interview were less likely to recognise the seriousness of the health risks associated with heroin and cocaine, but they were more likely to think that cannabis posed a *high* health risk).

Older respondents were also more likely to accept the health risks associated with alcohol and tobacco. For example, 32% of 22-24 year-olds thought that smoking posed a *high* risk to a person's health and 16% saw a low risk. By comparison, only a quarter of 15-18 year-olds perceived the health risks caused by smoking as *high* and 22% as *low*. A similar pattern of differences was seen once more when looking at the respondents' highest level of education.

The respondent's status as a **full-time student**, their **place of residence** and the **occupational status** of the respondent or the primary earner of the household also had some influence on the perceived health risks associated with certain substances, but no clear pattern emerged. Nevertheless, it could be seen that:

¹⁰ These findings are similar to the results of the survey in 2004 in the EU15. Somewhat more women thought that ecstasy, cannabis, tobacco and alcohol were dangerous or *very* dangerous products.

¹¹ In 2004, older respondents and those with a higher level of education were also more aware of the dangerous effects of heroin and cocaine, and of tobacco and alcohol. The greater perceived level of danger associated with using cannabis and ecstasy among the more highly-educated respondents was, however, not seen in the current survey.

- full-time students were more prone to associate the “high risk” category with alcohol (28% vs. 22%), while respondents who had completed their education were more liable to see this in the “medium risk” category (61% vs. 56%)
- respondents living in rural areas were more likely to think that using cannabis would pose a *high* risk to a person’s health (44% vs. 35% for respondents in metropolitan areas and 39% for urban areas)
- respondents in “employee” and “manual worker” households were more disposed to think that cannabis posed a *high* risk to a person’s health (41% and 43%, respectively, vs. 40% average) and respondents in “self-employed” households more often saw the health risks as *medium* (46% vs. 42% average).

For further details, please see Annex table No. 4b through 9b.

3. How should society's drug problems be tackled?

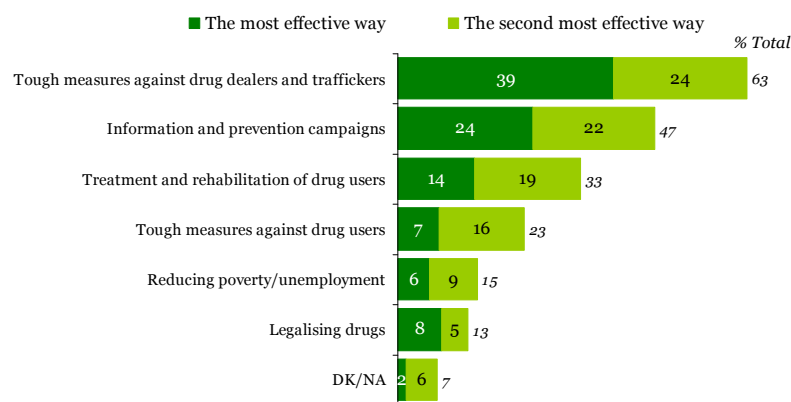
Young EU citizens responding to the survey were presented with a list of possible actions that public authorities could take to deal with society's drug problems and asked to choose the actions they considered to be the *most effective* and the *second most effective* ways of combating the problems.

Most young Europeans thought that politicians should first tackle drug problems on the supply side of the drug economy before addressing the demand side: almost two-thirds of respondents (63%) chose **tough measures against drug dealers and traffickers** as one of the most effective ways that public authorities could deal with drug problems in society¹². Four out of 10 respondents (39%) thought that this was the *most effective* way.

When it came to dealing with the demand side – the drug users – young people thought that “soft” measures would be more effective than “hard” measures:

- Nearly half of respondents (47%) chose **information and prevention campaigns** as one of the most effective ways of dealing with society's drug problems and a quarter (24%) said it was *the most effective* way
- The **treatment and rehabilitation of drug users** followed, with one-third of respondents choosing this as an effective measure and 14% as the *most effective* way to combat drug abuse
- **Tough measures against drug users**, one the other hand, were considered to be less effective: only a quarter (23%) of interviewees thought this would be an effective measure, and not even one in 10 respondents (7%) thought this was the *most effective* way of dealing with drug problems in society.

Most effective ways for public authorities to deal with drug problems in society



Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?
Q4b. What would be the second most effective way?
Base: all respondents; % by EU27

Combating drug abuse at one of the possible root causes – poverty and unemployment – was even less popular: only 15% of interviewees considered the **reduction of poverty and unemployment** to be an effective way of dealing with society's drug problems, and only 6% thought it would be the *most effective* way.

The **legalisation of drugs**, however, was judged to be the least effective way of fighting drug problems in society: only 13% of interviewees selected this measure as one of the most effective

¹² They selected this source as the *most effective* or *second most effective* way for public authorities to deal with drug problems in society.

measures. Nevertheless, the proportion of respondents who considered this to be the *most effective* way did not differ from the proportions found for “tough measures against drug users” (7%) and “the reduction of poverty and unemployment” (6%).

Comparison with the Flash Eurobarometers “Young people and drugs” - 2002 and 2004

In regard to the effective management of drug-related problems, the 2002 and 2004 surveys showed similar results to those of the current review¹³. In the three surveys, the most efficient ways of combating drug-related problems were considered to be “tougher measures against drug dealers and traffickers”, followed by “more treatment and rehabilitation of drug users” and through “information and prevention campaigns”. Furthermore, in line with the results of the current survey, “hard” measures against drug users and the more “social” measure of reducing poverty and unemployment were also considered to be less effective in 2002 and 2004.

Individual country results

The results at the individual country level showed that **tough measures against drug dealers and traffickers** found the most positive echo among young Europeans from countries at the eastern and southern borders of the EU.

Respondents from Bulgaria were the most positive about the effectiveness of such tough measures: nine out of 10 young Bulgarians (86%) cited this action as an effective response, and two in three Bulgarians thought this was the *most effective* response. Furthermore, in Hungary, Poland and Romania – other Member States on the EU’s borders – slightly more than seven out of 10 respondents thought this action was an effective measure and approximately half of the respondents thought it was the *most effective* measure.

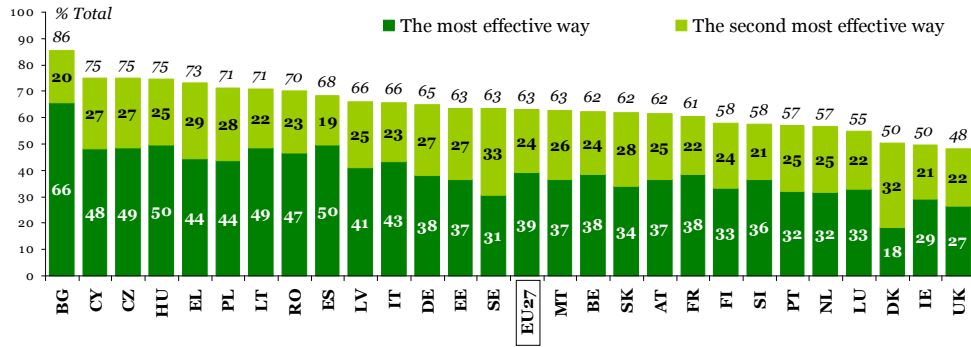
Cyprus and Greece, at the EU’s south-eastern border, and Spain and Italy, at the Union’s southern border, also belonged to this group of countries: between 66% and 75% of young Cypriots, Greeks, Spaniards and Italians considered tough measures against drug dealers to be an effective response to drug problems and between 44% and 50% thought it was the *most effective* response.

In Denmark and the Anglo-Saxon countries, the clampdown against drug dealers and traffickers was seen to be the least effective response: only half of British (48%), Danish and Irish (both 50%) 15-24 year-olds thought this action would be effective. Furthermore, while in Ireland and the UK, three out of 10 respondents considered this action to be the *most effective* way to combat society’s drug problems (29% and 27%, respectively), Danish respondents were significantly less likely to share this positive view (18%).

¹³ Although respondents in 2002/04 were asked to select three measures (instead of the most and second most effective ones), and although some differences occurred in the proposed measures (e.g. “tougher measures against drug producers and manufacturers” in 2002/04) and the wording of the proposed measures (e.g. “*tough* measures against drug users” vs. “*tougher* measures for drug users”), it has been possible to compare the relative perceived effectiveness of different measures across the three surveys.

Most effective ways for public authorities to deal with drug problems in society

Tough measures against drug dealers and traffickers



Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?

Q4b. What would be the second most effective way?

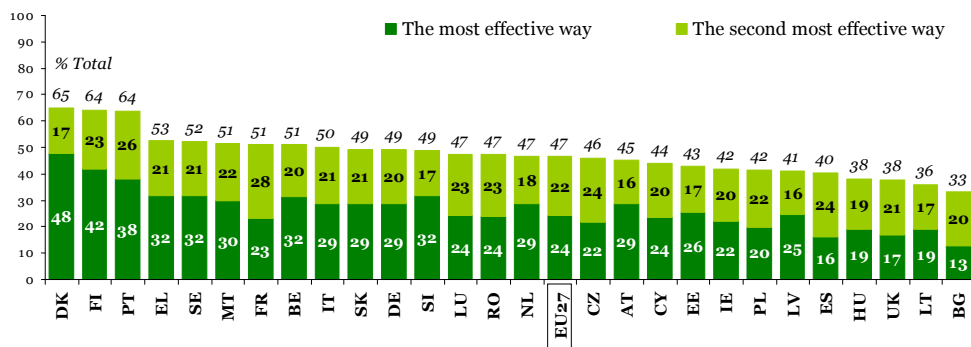
Base: all respondents; % by country

The results concerning tougher measures against drug dealers could be seen as a mirror image, to a certain extent, compared to the opinions linked to the effectiveness of **information and prevention campaigns** which had the highest approval ratings in Denmark and the lowest in Bulgaria. Two-thirds of Danes (65%) thought that such campaigns were an effective way of dealing with drug problems in society (48% considered this action as the *most effective* method). By comparison, only a third of Bulgarians supported this action and only 13% thought it was the *most effective* method.

Finland and Portugal joined Denmark at the higher end of the Member State distribution, with two-thirds (64%) of respondents selecting this action as an effective way of fighting drug problems in society. Lithuania, the UK and Hungary, on the other hand, joined Bulgaria at the lower end of the country ranking with approximately two-thirds (between 36% and 38%) of respondents who judged this measure to be effective and 17% to 19% who thought it was the *most effective* method.

Most effective ways for public authorities to deal with drug problems in society

Information and prevention campaigns



Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?

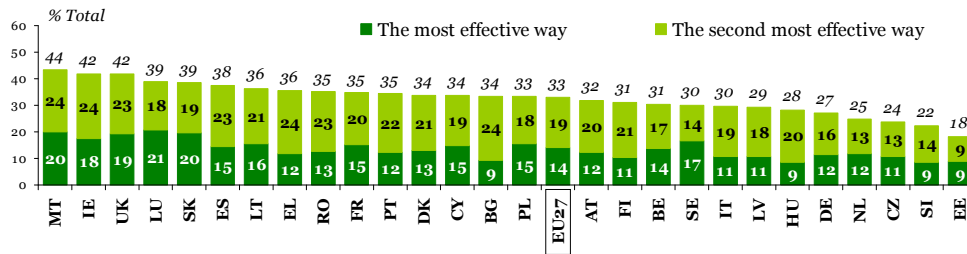
Q4b. What would be the second most effective way?

Base: all respondents; % by country

The proportion of respondents who thought that that the **treatment and rehabilitation of drug users** was an effective way for public authorities to deal with society's drug problems ranged from 18% in Estonia to 44% in Malta. Ireland and the UK joined Malta at the higher end of the rankings with 42% of respondents who thought that this action would be effective and almost one-fifth who thought it was the *most effective* response (18% and 19%, respectively). The low perception of the effectiveness of such a measure by the Estonians was shared by the Dutch, the Czechs and Slovenes: approximately a quarter said that such rehabilitation measures were effective (11-12% thought it was the *most effective* way).

Most effective ways for public authorities to deal with drug problems in society

Treatment and rehabilitation of drug users



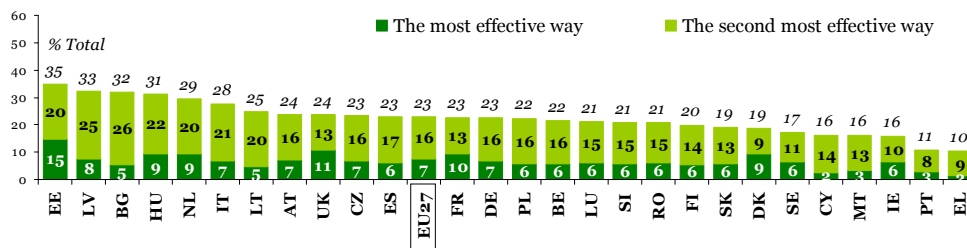
Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?
 Q4b. What would be the second most effective way?
 Base: all respondents; % by country

In almost all EU Member States “tough measures against drug dealers and traffickers”, “information and prevention campaigns” and “the treatment and rehabilitation of drug users” were considered to be more effective ways of dealing with society’s drug problems compared to “**tough measures against drug users**”. The proportion of respondents who thought that the last-named measures were effective ranged from 10% in Greece to 35% in Estonia, while the proportion who said they were the *most effective* response ranged from 2% in Greece to 15% in Estonia.

The exceptions were Estonia, Latvia, Hungary and the Netherlands, where “tough measures against drug users” were considered to be more effective than “treatment and rehabilitation of drug users”. For example, 35% of Estonian respondents thought that the former would be an effective way to deal with society’s drug problems compared to only half as many (18%) who thought that the latter would be effective.

Most effective ways for public authorities to deal with drug problems in society

Tough measures against drug users

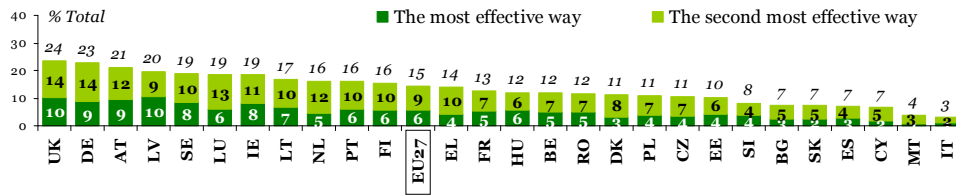


Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?
 Q4b. What would be the second most effective way?
 Base: all respondents; % by country

Fighting drug abuse by trying to **reduce poverty and unemployment** was the most popular measure in the UK (24%) and Germany (23%), where almost a quarter of interviewees considered it to be effective (one in 10 respondents thought it was the *most effective* response). Austria (21%), Latvia (20%), Sweden, Luxemburg and Ireland (all 19%) followed with approximately one-fifth of respondents thinking that this would be an effective way of dealing with society’s drug problems. In the southern EU Member States, Italy (3%), Malta (4%), Cyprus and Spain (both 7%), on the other hand, only a handful of respondents considered the reduction of poverty and unemployment to be an effective measure. Slovakia and Bulgaria joined these southern European countries at the lower end of the country rankings (both 7%).

Most effective ways for public authorities to deal with drug problems in society

Reduction of poverty/unemployment

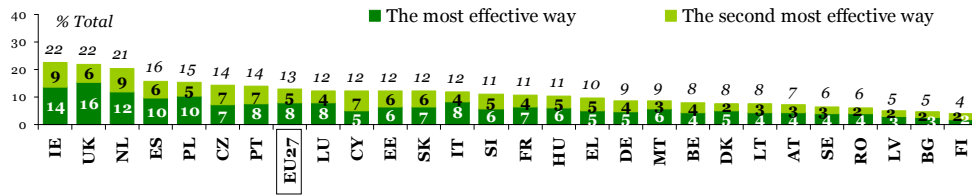


Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?
Q4b. What would be the second most effective way?
Base: all respondents; % by country

British, Irish and Dutch respondents were the ones who most favoured the **legalisation of drugs** as a way of dealing with drug problems in society: slightly more than one in five respondents thought that this would be effective, and 14%, 16% and 12%, respectively, thought it was the *most effective* way. This measure received the least support in Finland (4%), Bulgaria and Latvia (both 5%).

Most effective ways for public authorities to deal with drug problems in society

Legalisation of drugs



Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?
Q4b. What would be the second most effective way?
Base: all respondents; % by country

Socio-demographic considerations

Socio-demographic variables had a minor impact on the opinions about the effectiveness of the proposed ways that public authorities could deal with drug-related problems in society. Some small differences were observed as to which methods might be the *most effective ones*, but in regard to the opinions about the *second most effective ways*, almost no differences were found.

While **women** were more likely to judge “soft” measures, such as “information and prevention campaigns” (26% vs. 23%) and the “treatment and rehabilitation of drug users” (17% vs. 12%), as the most effective ways of dealing with drug problems, **men** were more prone to opt for “the legalisation of drugs” as a way of dealing with society’s drug problems (11% vs. 5%).

The respondent’s status as a **full-time student** and the **occupational status** of the respondent (or the primary earner of the household) also had some influence. “Tough measures against drug dealers and traffickers” were more often supported by respondents who had completed their education and respondents from “manual worker” households, while “information and prevention campaigns” were more often judged to be the most effective by full-time students and respondents from “self-employed”, “employee” or “non-working” households. For example, a quarter (26%) of full-time students thought that information and prevention campaigns would be the most effective way of dealing with drug problems, while only a fifth (21%) of 15-24 year-olds who were not full-time students felt that way. Similarly, 42% of respondents from “manual worker” households expected that tough measures against drug dealers and traffickers would be the most effective way of combating society’s drug problems, while only a third (37%) of respondents from “non-working” households did so.

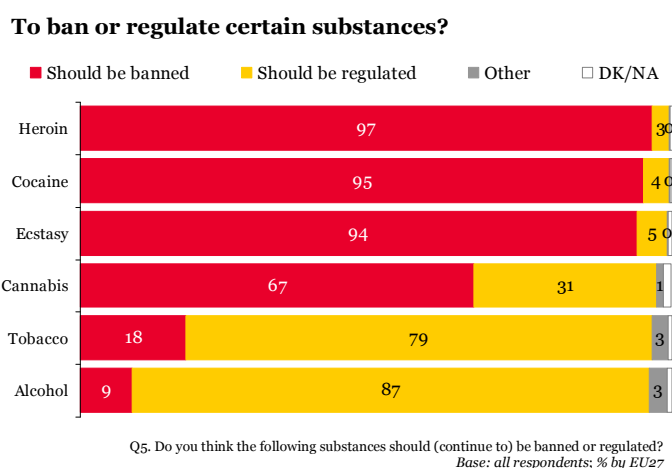
Finally, respondents from **metropolitan areas** were less disposed than their counterparts in **urban or rural areas** to think that tough measures against drug dealers and traffickers were the most effective ways of dealing with drug problems in society (36% for metropolitan areas and 40% for urban and rural areas).

For further details, please see Annex table No. 10b through 11b.

4. To ban or regulate illicit drugs, alcohol and tobacco?

Drugs, such as cocaine, heroin, ecstasy and cannabis are banned in all EU Member States. The sale and consumption of legally-available substances, such as alcohol and tobacco, on the other hand, is regulated in most countries. Examples of such regulation are minimum age limits for the consumption of alcohol and tobacco and licensed sales of associated products through specialised shops. Young EU citizens were asked if they thought that heroin, cocaine, ecstasy and cannabis should continue to be banned or if they preferred that the sale and consumption of these illicit drugs should be regulated. For the legal substances – alcohol and tobacco – they were asked if they favoured a continuation of the regulation system currently in place or if they advocated a ban on alcohol and/or tobacco.

There was a consensus among young EU citizens that **heroin**, **cocaine** and **ecstasy** should continue to be banned – almost all respondents agreed with this: 97% for heroin, 95% for cocaine and 94% for ecstasy. Only a very small minority would regulate one or more of these substances (3% for heroin, 4% for cocaine and 5% for ecstasy).



In the past few years, there has been a trend in Europe towards the development of alternatives to criminal convictions for the use and possession of small quantities of **cannabis** for personal use¹⁴. As opposed to the other illicit substances covered by the survey, there has been a move away from custodial sentences for the use of cannabis, in most European countries, towards fines, cautions, exemption from punishment and counselling. This survey showed that young people also regard cannabis differently from the other illicit substances in terms of whether it should be banned or if its sale and consumption should be regulated: while there was a consensus among young EU citizens to continue to prohibit heroin, cocaine and ecstasy, opinions were more divided about cannabis. Two-thirds of respondents (67%) said the sale and consumption of cannabis should continue to be banned in EU Member States and one-third wanted a system regulating the sale and use of cannabis to be adopted.

When asked about **tobacco**, eight out of 10 respondents (79%) agreed that its sale should continue to be regulated, while one-fifth of respondents thought that the government should actually ban the product. An even smaller group of respondents (9%) said that **alcohol** should be prohibited instead of simply regulated, while almost nine out of 10 (87%) preferred to continue regulating the sale and consumption of alcohol.

¹⁴ EMCDDA website: <http://www.emcdda.europa.eu/html.cfm/index41524EN.html>

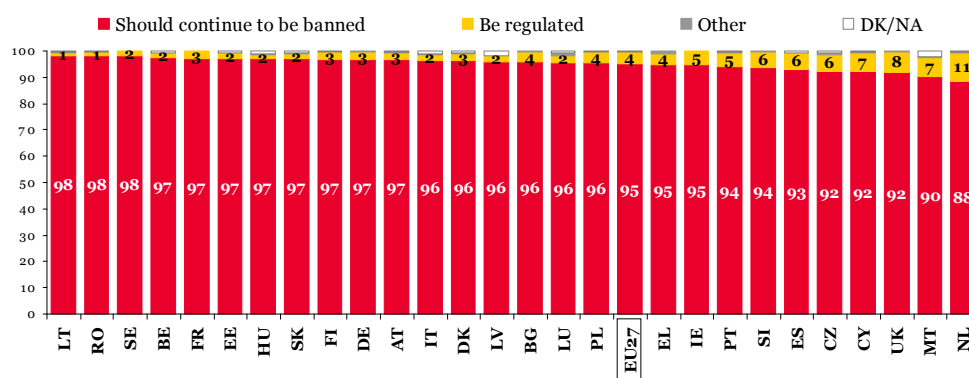
Individual country results

The individual country results showed a broad consensus concerning the continuation of a ban on heroin, cocaine and ecstasy. More than nine out of 10 respondents in almost all of the Member States were in favour of keeping a ban on these substances and less than 10% wanted the government to adopt regulations to control the sale and consumption instead of continuing to prohibit them.

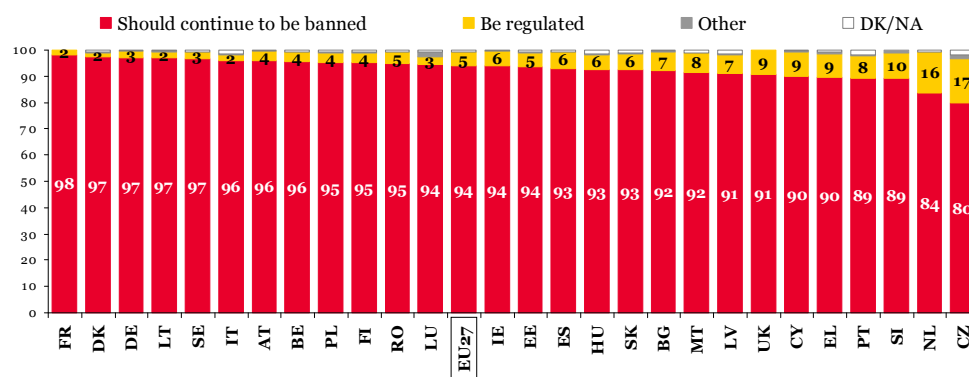
Heroin should (continue to) be banned or regulated



Cocaine should (continue to) be banned or regulated



Ecstasy should (continue to) be banned or regulated



Q5. Do you think the following substances should (continue to) be banned or regulated?
Base: all respondents; % by country

The only notable exceptions were the Czech Republic, the Netherlands and Slovenia: 17% of Czech, 16% of Dutch and 10% of Slovene interviewees wanted ecstasy to be regulated, and 11% of Dutch respondents said the same about cocaine. The last-named were also the most likely to advocate the

regulation of all three substances, with none being banned (7% vs. the EU27 average of 2%) followed by the young Maltese (6%) and young Cypriots (5%).

To ban or to regulate heroin, cocaine and ecstasy?

Country	% regulating heroin	% regulating cocaine	% regulating ecstasy	% regulating heroin, cocaine & ecstasy
EU27	3	4	5	2
NL	8	11	16	7
MT	6	7	8	6
CY	5	7	9	5

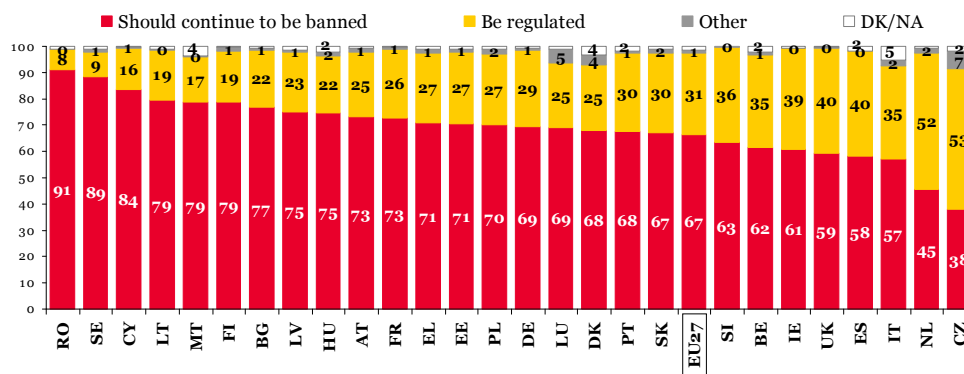
Q5. Do you think the following substances should (continue to) be banned or regulated?
Base: all respondents; % by country

The opinions of young people in the different Member States, however, were more diversified when they were asked if **cannabis** should continue to be banned. The proportion of respondents who thought the government should uphold such a ban ranged from 38% in the Czech Republic to 91% in Romania.

The Netherlands joined the Czech Republic at the lower end of the Member State distribution, with only 45% of respondents wanting to ban cannabis. More than half of the Czech and Dutch respondents (53% and 52%, respectively) said the sale and consumption of cannabis should be regulated. The openness of young Dutch towards regulating cannabis might be explained by the country's long-standing "relaxed" policy towards the drug. The explanation for the Czech Republic might be found in the widespread use of cannabis in the country – survey data showed that, when looking at 15-24 year-olds across the EU, the Czechs were the most likely to say they had used cannabis in the past year¹⁵.

Sweden and Cyprus, on the other hand, joined Romania at the higher end of the country rankings – with more respondents who supported a ban on cannabis (89% and 84%, respectively). Only 8% of Romanian, 9% of Swedish and 16% of Cypriot respondents said the government should relax the ban on cannabis and instead adopt a set of rules to regulate the sale and consumption of this illicit drug¹⁶.

Cannabis should (continue to) be banned or regulated



Q5. Do you think the following substances should (continue to) be banned or regulated?
Base: all respondents; % by country

Romanian youth were also the strongest advocates of banning **tobacco** and **alcohol** – 31% were in favour of banning tobacco and 22% of banning alcohol. Respondents in the UK and Sweden (both

¹⁵ EMCDDA website: <http://www.emcdda.europa.eu/html.cfm/index39570EN.html>

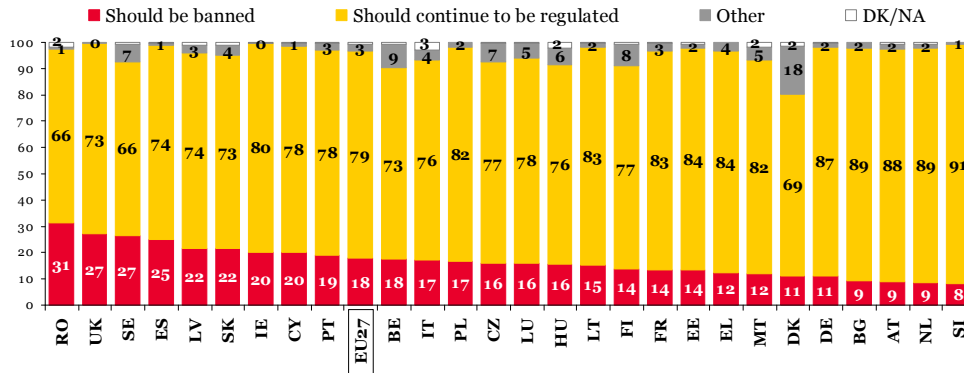
¹⁶ In the Standard Eurobarometer 66 (2006), EU citizens were asked if they agreed or disagreed that personal consumption of cannabis should be legalised throughout Europe. Comparing the results of this survey with those of the current one, it was noted that for the Member States where young people were more in favour of regulating the use of cannabis, instead of opting for a ban, then the population at large were more likely to say that cannabis should be legalised (e.g. the Netherlands, Spain, the UK and Italy). In addition, the countries where young people most often advocated a continuation of the ban on cannabis, also saw the highest level of rejection among the general population to legalise the substance (e.g. Romania and Sweden).

27%) also gave strong support to a tobacco ban. However, they were less likely to think that the government should ban alcohol (8% and 7%, respectively, compared to the EU27 average of 8%). In all of the EU Member States, except for Romania, less than one-sixth of respondents thought alcohol should be banned.

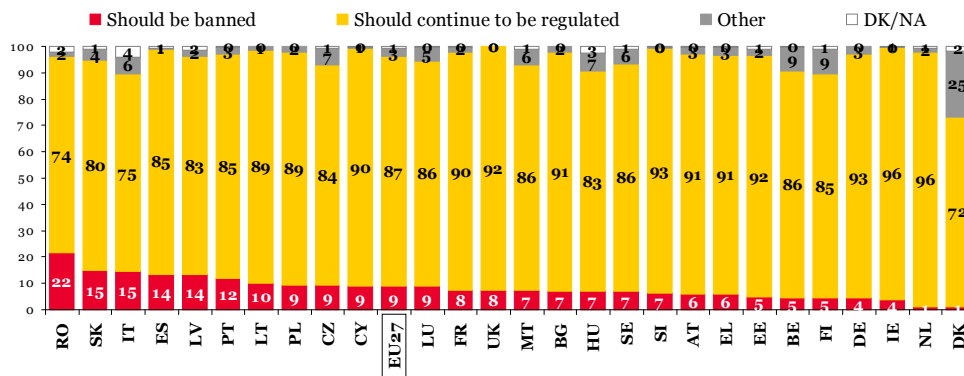
Most opposed to a ban on tobacco and therefore the strongest supporters of a continuation of a system that regulated tobacco sales were the Slovenes (91% vs. 9% who wanted to ban tobacco), the Dutch and Bulgarians (both 89% vs. 9%), Austrians (88% vs. 9%) and Germans (87% vs. 11%). The largest proportions of respondents who supported a continuation of a system that regulated the sale of alcoholic drinks were found in the Netherlands and Ireland (96%). In the former, only 1% of respondents were in favour of banning alcohol.

Finally, Denmark was characterised by a low proportion of respondents in favour of banning alcohol (1%) and tobacco (11%), but also by the lowest proportion of 15-24 year-olds who opted for a continuation of a system regulating their sale and consumption (72% for alcohol and 69% for tobacco). Denmark stood out from the pack with a high proportion of respondents (25% and 18%, respectively) who spontaneously said that, rather than banning or regulating alcohol and tobacco, other actions should be taken.

Tobacco should (continue to) be banned or regulated



Alcohol should (continue to) be banned or regulated



Q5. Do you think the following substances should (continue to) be banned or regulated?
Base: all respondents; % by country

Socio-demographic considerations

The socio-demographic analysis showed no differences in the groups' opinions about whether heroin, cocaine and ecstasy should continue to be banned. Nevertheless, young men, older respondents, the more highly-educated respondents, those who had completed their education, city dwellers and non-working respondents, or those in households where the head of the household was not working, were

more liable than their counterparts to approve the regulation of the sale and consumption of cannabis. For example, less than a quarter of 15-18 year-olds (24%) said that cannabis should be regulated instead of banned compared to more than a third of 19-24 year-olds (35% of the 19-21 year-olds and 36% of 22-24 year-olds).

Younger respondents, full-time students and those who have (so far) only completed primary education were, on the other hand, more disposed to think it would be better if tobacco was banned instead of simply regulated. For example, 20% of full-time students thought that tobacco should be banned compared to 15% of respondents who were not in that category. Finally, young women were more in favour of a ban on alcohol (11% vs. 7% of men).

For further details, please see Annex table No. 12b through 17b.

The relationship between perceived health risks associated with certain drugs and opinions about whether such substances should be regulated

By cross-tabulating the answers of Question 3 (health risks) and the current question about whether certain substances should be banned or regulated, a check was made to see if young people, who associated the most serious health risks with drug use, were also stronger supporters of a ban on such drugs. This additional analysis did indeed show that this was the case for all of the substances listed in the survey (heroin, cocaine, ecstasy, cannabis, tobacco and alcohol). The following table illustrates the association between the assessed health risk and the opinions about the need for a ban or regulation *in the case of cannabis*.

Almost nine out of 10 respondents who thought that the health risks associated with using cannabis were *high*, and six out of 10 respondents who thought there was a *medium* health risk, also believed that cannabis should continue to be banned in their country. Eleven percent and 37%, respectively, of these two groups thought cannabis should be regulated instead of banned.

By comparison, only 28% of respondents who thought cannabis posed a *low* health risk and 14% who believed there were no health risks associated with the drug believed that it should continue to be banned. A majority of these respondents, who did not perceive cannabis as a drug that posed serious health risks, preferred it to be regulated (68% and 83%, respectively).

Relationship between the perceived health risk of using cannabis and the support to regulate the substance (rather than to ban it)

Perceived health risk	To ban or regulate cannabis?	
	Continue to be banned	Should be regulated
High risk (n=4976)	89%	11%
Medium risk (n=5120)	60%	37%
Low risk (n=1744)	28%	68%
No risk (n=171)	14%	83%
DK/NA (n=301)	77%	11%

Q3. To what extent do you think the following substances may pose a risk to a person's health? Does cannabis pose a high, medium, low or no risk?

Q5. Do you think the following substances should (continue to) be banned or regulated?
Base: all respondents; % by EU27 (Q5 "other" and "DK/NA" answers not shown)

5. Access to illicit drugs, alcohol and tobacco

Young EU citizens were also asked how difficult it would be for them to get hold of illicit drugs (heroin, cocaine, ecstasy and cannabis), alcohol and tobacco – *if they wanted to*. In accordance with the legislation in force in the EU Member States, young Europeans said they would find it more difficult to get hold of banned substances, such as heroine, cocaine, ecstasy and – to a lesser extent – cannabis than the “regulated substances” alcohol and tobacco.

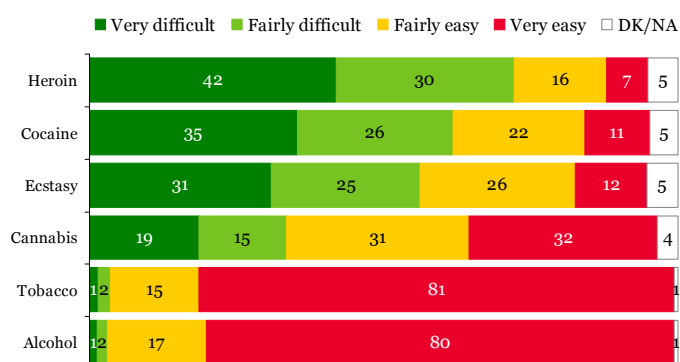
Heroin was the substance considered to be the most difficult to get hold of: nearly three-quarters of young people (72%) thought that it would be hard to obtain this drug and 42% said that it would be *very* hard. Furthermore, only a quarter of interviewees (23%) thought that getting hold of heroine was easy (7% considered it to be *very* easy).

Young people found it slightly easier to acquire **cocaine**. Six out of 10 interviewees (61%) said it would be difficult for them to get hold of the drug and a third (35%) thought it would be *very* difficult. One in three respondents, however, said that it would be easy for them to obtain cocaine and one in 10 respondents (11%) considered it to be *very* easy to have access to this drug.

The “party drug” **ecstasy** was also perceived as being easier to get hold of than heroin. While a slim majority of young people (56%) still thought it would difficult for them to find ecstasy (31% thought it would be *very* difficult), almost four out of 10 of young people (38%) felt it would be easy to obtain this drug and slightly more than one in 10 expected it to be *very* easy (12%).

Even if the purchase and consumption of **cannabis** is still legally banned across most EU Member States, the legislation and practice of criminal conviction of cannabis-related offences has softened in the past few years. Not surprisingly, cannabis was considered to be the most easily accessible of the illicit substances: nearly two out of three respondents (63%) thought it would be easy for them to acquire cannabis, and one-third thought it would be *very* easy (32%).

Ease of access to certain substances (if desired)



Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by EU27

Having access to **alcohol** and **tobacco** seemed to cause no problems for young Europeans: nearly all respondents said that it would be easy for them to obtain alcoholic drinks (97%) and tobacco products (96%). A large majority of young Europeans (approximately 80%) thought that it would be *very* easy for them to get hold of these substances and only a handful considered it to be difficult (3%). This

finding is in line with the fact that for many respondents – the older ones – the purchase and consumption of alcohol and tobacco is legal¹⁷.

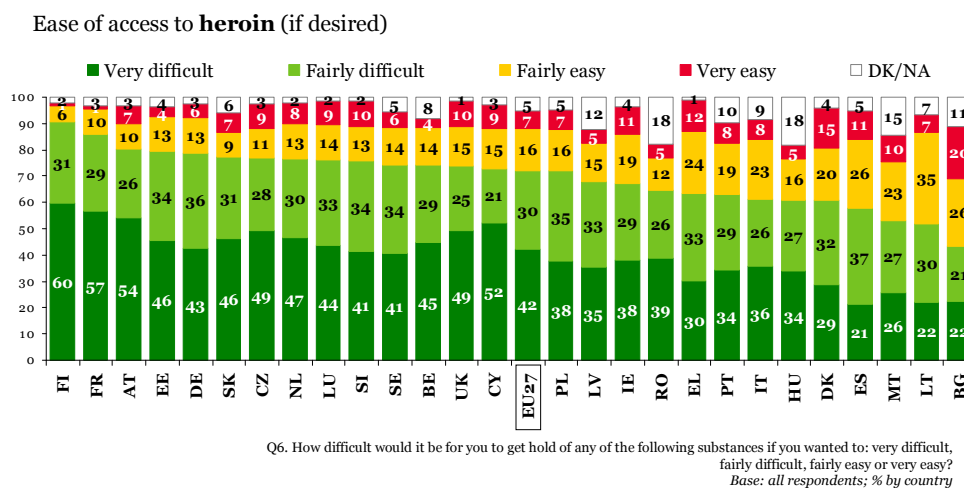
Individual country results

There was a large variation, across the EU27 Member States, in young people's perceptions about how difficult it would be for them to obtain illicit drugs, such as heroin, cocaine, ecstasy and cannabis.

While approximately nine out of 10 Finnish (91%) and French (86%) respondents thought it would be *very* or *fairly* difficult for them to acquire **heroin**, only a slim majority of young Maltese (53%) and Lithuanian (52%) respondents felt that way. The Bulgarians were, nevertheless, the least likely to think that they would have problems in obtaining heroin (43%).

In Finland and France, 60% and 57%, respectively, of 15-24 year-olds thought it would be *very* difficult to get hold of heroin. Young people in Austria, Cyprus, the UK and the Czech Republic also expected to have difficulties in obtaining heroin: approximately half of respondents in these countries said that it would be *very* difficult.

Young people in Bulgaria were not only the most liable to say that it would be easy for them to get heroine (46%), but also that it would be *very* easy: one-fifth of respondents in Bulgaria said they could *very* easily obtain heroin. Denmark followed with 15% of respondents who considered it to be *very* easy to acquire that drug.

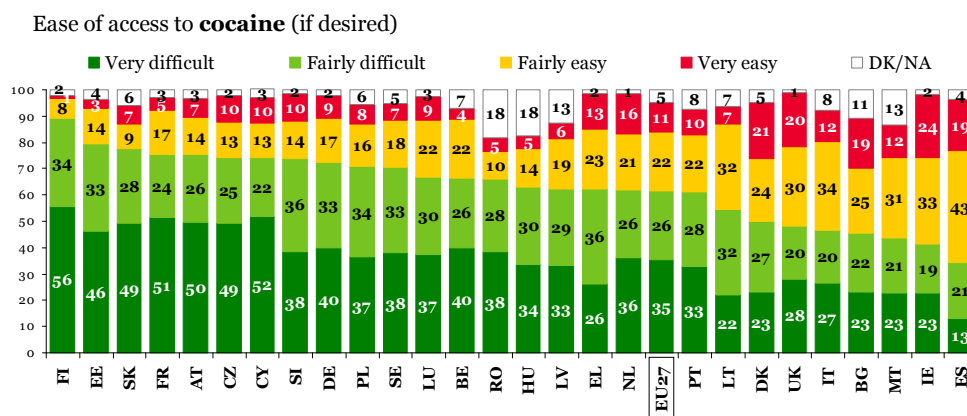


Opinions throughout the Member States about how difficult or, on the contrary, how easy it would be to acquire **cocaine** varied even more than the opinions about the ease of access to heroin.

Once more, Finnish respondents were the ones thinking they would have the most difficulty in obtaining cocaine: nine out of 10 Finns said it would be difficult (*very* or *fairly*) and more than half thought it would be *very* difficult (56%). Cocaine was also said to be difficult to obtain for young people in Estonia, Slovakia, France, Austria, the Czech Republic and Cyprus, where approximately three-quarters of respondents said it would be difficult for them to acquire cocaine and around half of them said it would be *very* difficult.

¹⁷ The age limit for buying and consuming alcohol varies from 14 to 20 years-of-age and the limit for buying tobacco products ranges from 16 to 18 years-of-age. In: European Monitoring Centre for Drugs and Drug Addiction (2007), *Drug use and related problems among very young people* <http://www.emcdda.europa.eu/publications/selected-issues/minors.html>

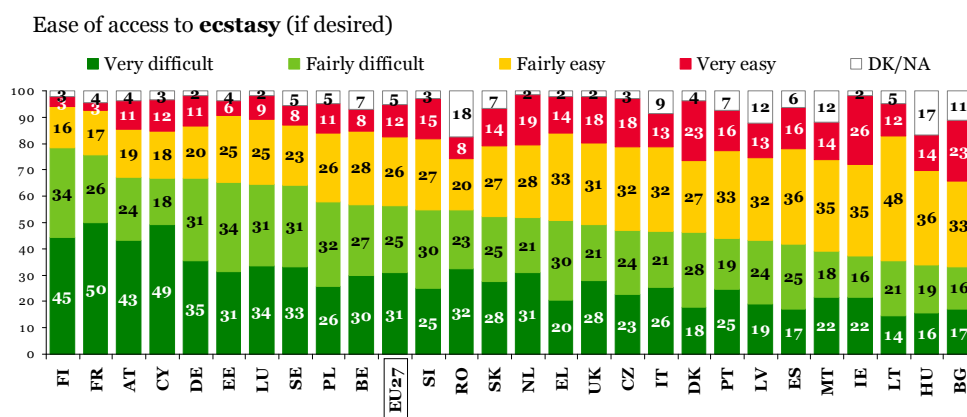
Spain and Ireland were the only countries where more than half of the interviewees said it would be easy for them to obtain cocaine (62% for Spain and 57% for Ireland). Furthermore, 24% of young people in Ireland said they could *very* easily get hold of cocaine. This view was shared by approximately one-fifth of Danish (21%), British (20%), Spanish and Bulgarian respondents (both 19%).



Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by country

Similar to the results for heroin and cocaine, respondents in Finland (79%), France (76%) and Austria (67%) were among the most disposed to say that **ecstasy** would not be easy to obtain. Although the Finns were again the ones most liable to face such difficulties (79% said it would be difficult and 45% *very* difficult), respondents in France and Cyprus were the most prone to say it would be *very* difficult to obtain ecstasy (50% and 49%, respectively).

In Bulgaria (33%), Hungary and Lithuania (both 35%), however, respondents were unlikely to say that it would be difficult for them to obtain ecstasy. Furthermore, Lithuanian 15-24 year-olds were also the least likely to think it would be *very* difficult (14%). Nevertheless, Irish (61%) and Lithuanian (60%) interviewees were the most liable to find it easy to obtain ecstasy. The Irish were also the most prone to say that it was *very* easy for them to obtain the drug (26%), closely followed by the Danes and Bulgarians (both 23%).



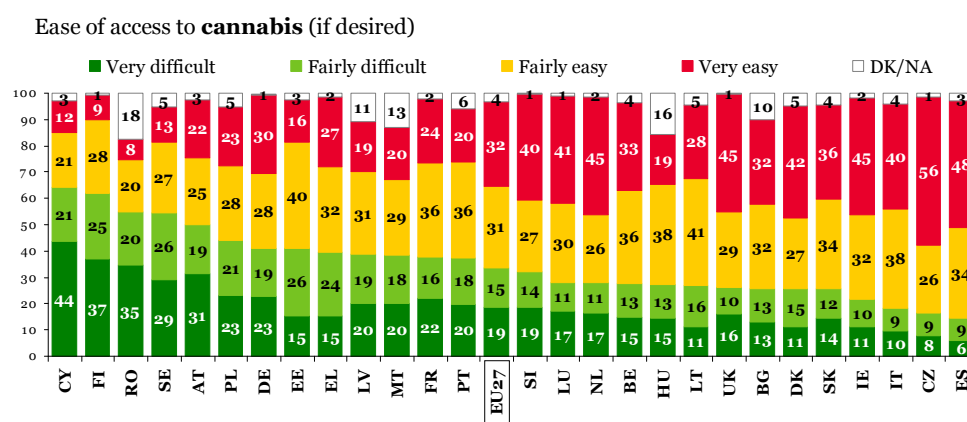
Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by country

It was mentioned earlier that, in many EU Member States, the law treats **cannabis** differently to other illicit substances, and this distinction could also be observed when measuring the ease of access to illicit drugs. While in a majority of EU Member States, more than half of young people thought it would be difficult to get hold of heroin, cocaine or ecstasy, in only four countries did more than half of

the 15-24 year-olds say there would be a problem in acquiring cannabis (63% in Cyprus, 62% in Finland, 55% in both Romania and Sweden).

Furthermore, the legal status of cannabis for *personal use* and the measures adopted to control it vary considerably across EU Member States: some countries or regions tolerate certain forms of possession and consumption; other countries apply administrative sanctions or fines; while still others apply penal sanctions¹⁸. These differences in legislation and the practice of criminal conviction across Member States will have had some influence on the perceived ease of access to cannabis.

In Spain and the Czech Republic, respondents expected to find the least difficulty in obtaining cannabis. Only a small minority of the Spaniards (15%) and Czechs (17%) said they would have a problem in obtaining cannabis, while 82% in both countries thought it would be easy. More than half of Czech respondents (56%) and half (48%) of Spanish respondents said it would be *very easy* for them to get hold of this drug. In Cyprus (65% difficult, 44% *very difficult*) and Finland (62% difficult, 37% *very difficult*), on the other hand, young people were the most likely to say that it would be difficult for them to obtain cannabis.



Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by country

While there was a large variation, across the EU Member States, in young people's perceptions about how difficult it would be for them to get hold of illicit drugs, there was significantly less variation in their assessment of the ease of access to alcohol and tobacco. The proportions of young people who considered the access to tobacco as being easy ranged from 78% in Cyprus to 99% in Denmark and Bulgaria. For alcohol, these figures ranged from 83% in Cyprus to 99% in the Netherlands.

In all EU Member States, except for Cyprus, at least nine out of 10 respondents said it would be *very* or *fairly* easy to obtain cigarettes or other **tobacco** products. In Denmark, the Netherlands and Bulgaria, more than nine out of 10 interviewees thought it would be *very* easy to have access to tobacco. In Cyprus, on the other hand, just three-quarters (78%) of interviewees thought it would be easy for them to get hold of cigarettes or other tobacco products, and just 55% thought it would be *very* easy. Slightly more than one-fifth of respondents in Cyprus said it would be difficult for them to obtain tobacco (22%).

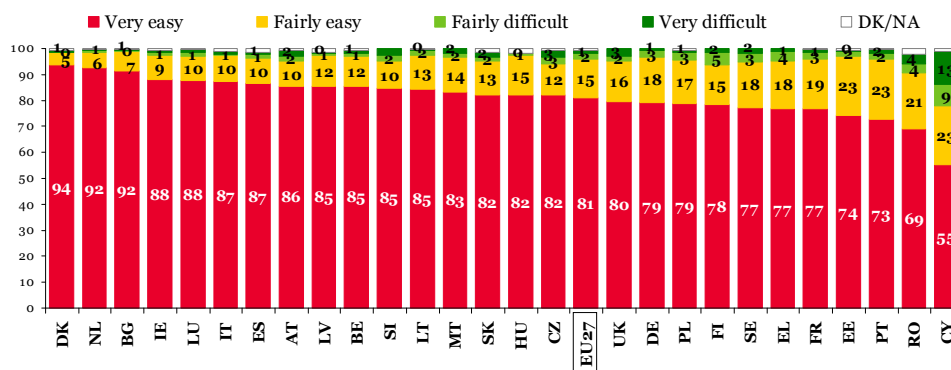
The current regulating systems and the enforcement of the rules with respect to the purchase and consumption of tobacco products vary across the Member States. For example, the age limit for buying tobacco products ranges from 16 to 18 years-of-age¹⁹. The fact that young people in Cyprus

¹⁸ EMCDDA website: <http://eldd.emcdda.europa.eu/html.cfm/index5769EN.html>

¹⁹ European Monitoring Centre for Drugs and Drug Addiction (2007), *Drug use and related problems among very young people* <http://www.emcdda.europa.eu/publications/selected-issues/minors.html>

were the least likely to find it *very* easy to get tobacco could probably be linked to the country’s comparatively strict youth protection laws (e.g. the minimum age for purchase and consumption of tobacco is 18 and the supply of tobacco to a person under 18 constitutes a criminal offence²⁰).

Ease of access to **tobacco** (if desired)

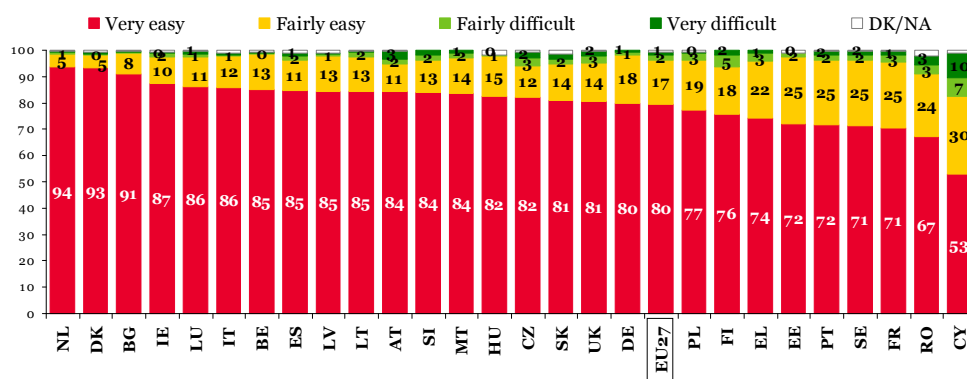


Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by country

A similar picture emerged when looking at the individual country results for **alcohol**. While more than nine out of 10 respondents in all Member States (except Cyprus) said it would be easy for them to obtain alcohol, only 83% of respondents in Cyprus said it would be easy. Similarly, the Dutch, Danes and Bulgarians were the ones most prone to say it would be *very* easy to obtain alcohol (94%, 93% and 91%, respectively), while only a small majority of Cypriots thought the same (53%).

Although it was not possible to explain the very low proportion of Cypriot respondents who found it very easy to get hold of alcoholic drinks, the rather low proportions of Swedish and Finnish respondents who found it *very* easy (71% and 76%, respectively) might, for example, be linked to the fact that drinks with a high alcohol content can only be sold in official government-run shops²¹ in these countries.

Ease of access to **alcohol** (if desired)



Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by country

Some conclusions that could be drawn by looking across all substances (heroin, cocaine, ecstasy, cannabis, alcohol and tobacco) were:

²⁰ Ibid.

²¹ *Systembolaget* in Sweden, *Alko* in Finland

- for illicit drugs – heroin, cocaine, ecstasy and cannabis – Finnish, French, Austrian, Estonian and Cypriot respondents were consistently found at the higher end of the Member State distribution, with more respondents finding it difficult to get hold of these substances
- Bulgarian, Spanish, Lithuanian, Irish and Maltese respondents, on the other hand, were more likely to say it would be easy to obtain the aforementioned illicit drugs
- A significant number of young Hungarians and Romanians did not want to or could not say how easy it would be for them to get hold of each of the illicit drugs listed in the survey (between 16% and 18%)
- Young people in Denmark, the Netherlands, Bulgaria, Ireland, Luxemburg and Italy were the ones most liable to say that they could easily obtain alcohol and tobacco, while young respondents in Romania and Cyprus were the least likely to say so.

Socio-demographic considerations

The same proportions of **young men and women** thought that it would *difficult* for them to obtain heroin or cocaine, and the same proportions thought it would be *easy* to get hold of alcohol or tobacco. For ecstasy and cannabis, however, it was noted that young women were slightly more prone to say that it would be *very difficult* for them to acquire ecstasy or cannabis (ecstasy: 33% vs. 29% of men; cannabis: 21% vs. 16%), while more young men expected that it would be *very easy* to obtain ecstasy or cannabis (ecstasy: 14% vs. 10% of women; cannabis: 35% vs. 29%).

Not surprisingly, ease of access to certain types of drugs also differed between the **youngest respondents** (15-18 year-olds) and the **older ones** (19-24 year-olds):

- *Heroin and cocaine*: the 15-18 year-olds were the ones thinking it would be *very difficult* for them to get hold of these illicit drugs, while the 19-24 year-olds most often expected it to be *very easy* to obtain them. For example, 15% of 22-24 year-olds and 13% of 19-21 year-olds said they could very easily get hold of cocaine, compared to 7% of 15-18 year-olds.
- *Cannabis and ecstasy*: the 19-24 year-olds found it easier (*very* or *fairly* easy) to acquire cannabis or ecstasy, while 15-18 year-olds expected it to be more difficult (*very* or *fairly* difficult). For example, while 62% of 15-18 year-olds thought it would be difficult for them to obtain ecstasy and 32% thought it would be easy, only half of 19-24 year-olds said it would be difficult and approximately 40% thought it would be easy.
- *Alcohol and tobacco*: Here, the greatest differences were seen in the proportions finding it *very easy* to access these substances. For example, 72% of 15-18 year-olds thought it would be very easy for them to get hold of tobacco compared to 87% of 22-24 year-olds²².

Similar differences were seen when comparing the ease of access to each of the substances in the survey, based on the **respondent's level of education** and whether or not they were a **full-time student**. This was to be expected, given that most 15-18 year-olds had only completed primary education at the time of the survey, and full-time students tend to be younger than those who have completed their education.

Since the age limit for buying and consuming alcohol in the EU27 varies from 14 to 20 years-of-age and that for buying tobacco products varies from 16 to 18 years-of-age, differences in the ease of access to these products for 15-18 year-olds might be expected. The following table shows that, for this group, as they get older, then the access to alcohol and tobacco becomes easier. For example, while 56% of 15 year-olds said it would be *very* easy to obtain cigarettes or other tobacco products,

²² In the previous survey on “Young people and drugs”, young people in the EU15 were asked how easy it would be for them to obtain drugs from different places (e.g. near their home or at parties). It was noted that the age group between 20 and 24 years-of-age were more prone to say it would be easy to get drugs in such circumstances – this is in line with the current findings that 19-24 year-olds more often said that it would be *fairly* or *very* easy to obtain certain types of drugs.

this proportion increased to 67% of 16 year-olds, 77% of 17 year-olds and 82% of 18 year-olds. Similarly, the same proportion of 15 year-olds (56%) expected it would be *very easy* for them to obtain alcohol, this proportion gradually increased to 81% for 18 year-olds.

Ease of access to tobacco and alcohol (if desired) for 15-18 year-olds				
	Age of the respondent			
	<i>15</i>	<i>16</i>	<i>17</i>	<i>18</i>
Tobacco				
Very difficult	5%	2%	1%	1%
Fairly difficult	9%	6%	2%	2%
Fairly easy	28%	24%	19%	14%
Very easy	56%	67%	77%	82%
DK/NA	2%	1%	0%	1%
Alcohol				
Very difficult	4%	2%	1%	1%
Fairly difficult	8%	3%	3%	2%
Fairly easy	30%	28%	21%	16%
Very easy	56%	66%	75%	81%
DK/NA	2%	1%	0%	1%
	<i>n=963</i>	<i>n=1174</i>	<i>n=1283</i>	<i>n=1315</i>

Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?
Base: all respondents; % by EU27

Young people's **place of residence** also influenced the possibility of being able to obtain drugs. Those from rural areas more often than city dwellers thought it would be *very difficult* for them to acquire heroin, cocaine, ecstasy or cannabis. For example, just under half (47%) of rural residents said it would be very difficult to acquire heroin, compared to 39% of urban residents and 40% of metropolitan residents²³.

The results for alcohol and tobacco showed differences between rural residents and city dwellers in the proportions of respondents who thought it would be *very easy* to obtain these products. For example, 77% of rural residents thought it would be very easy for them to get hold of alcoholic drinks compared to slightly more than eight out of 10 city dwellers (82% for metropolitan areas, 81% for urban areas).

Although the perceptions about the ease of access to certain substances also differed by **occupational status** of the respondents or the primary earner of the household, there was less consistency in the differences across the various substances. Nevertheless, manual workers, or respondents from household where the main contributor to the household income was a manual worker, appeared to find it less easy to obtain most of the substances in the survey. For example, a quarter (27%) of respondents in "manual worker" households thought that it would be very easy for them to get hold of cannabis, compared to a third of respondents in "self-employed" (35%) and "non-working" households (34%).

For further details, please see Annex table No. 18b through 23b.

The relationship between the perceived health risks associated with certain drugs and the ease of obtaining these substances (if desired)

Cross-tabulating the answers of Question 3 (health risks) and the current question concerning access to certain drugs or substances, showed that young people who found it easier to obtain these substances (heroin, cocaine, ecstasy, cannabis, tobacco or alcohol), also perceived that the health risks associated

²³ In 2004, city dwellers tended to say that it would be easy to get drugs at different places (e.g. near their home or at parties) – this is similar to the current findings that they were more likely to say that it would be *fairly* or *very easy* for them to get hold of certain types of drugs.

with drug use to be less serious. The following table illustrates the association between the assessment of the health risks and the ease of access for *cannabis*.

Almost seven out of 10 respondents who said it would be *very difficult* for them to obtain cannabis, also thought that the health risks associated with this drug were *high* and only 4% thought the health risks would be *low*. By comparison, only a quarter (26%) of respondents who said it would be *very easy* to get hold of cannabis, thought that using this drug would pose a *high* health risk, and almost as many of them (24%) thought using cannabis would be associated with a *low* health risk.

Relationship between the perceived health risk of using cannabis and ease of access to that drug

Ease of access to cannabis (if desired)		Perceived health risk of cannabis				
		High risk	Medium risk	Low risk	No risk	DK/NA
Very difficult	(n=2286)	67%	25%	4%	0%	4%
Fairly difficult	(n=1832)	53%	37%	7%	1%	3%
Fairly easy	(n=3814)	32%	50%	16%	1%	1%
Very easy	(n=3936)	26%	47%	24%	3%	1%
DK/NA	(n=445)	40%	42%	14%	1%	2%

Q3. To what extent do you think the following substances may pose a risk to a person's health? Does cannabis pose a high, medium, low or no risk?

Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?

Base: all respondents; % by EU27

Flash EB Series #233

Young people and drugs

Annex Tables and Survey Details

THE GALLUP ORGANIZATION

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Table 1a. Potential sources of information about illicit drugs and drug use – *part 1 – by country*

QUESTION: Q1_01-07. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to?

% of "Mentioned" shown





























	Total N	A friend	Parents/ relatives	Someone at school or at work	A doctor, a nurse or other health professionals	A social/ youth worker	A specialised drugs counsellor/ centre	The police
 EU27	12312	34.9	26.6	13.7	33.6	9.5	24.7	11.4
COUNTRY								
 Belgium	500	33.1	20.4	13.3	21.4	4.6	11.9	5.1
 Bulgaria	502	36.5	31.3	10	26.2	8.1	18.8	13
 Czech Rep.	505	40.3	15.6	15.5	12.8	8.5	19.5	9.4
 Denmark	503	42.6	22.5	12.1	26.7	8.9	18.1	7.4
 Germany	517	37.5	24.3	12.2	34.1	11.3	34.4	17.4
 Estonia	250	33.2	16.2	12.2	19.8	9.4	19.3	6.2
 Greece	500	26.4	36.4	11.5	34.3	13.8	38.4	14.4
 Spain	500	32.6	27.9	9.6	27.2	13.9	37.3	4.6
 France	504	28.1	26.2	10.3	55.1	6.6	30.4	8.6
 Ireland	500	58	40.9	22.3	40.5	12.2	15.1	12.1
 Italy	500	23.4	18.8	10.2	18	3.4	12	3.3
 Cyprus	252	24.6	30.1	11.7	16.7	16.3	35.2	25.4
 Latvia	504	37.8	20	10.3	24.8	8.7	14.9	8
 Lithuania	501	17.1	15.7	7.9	15.4	7.8	18.2	3.6
 Luxembourg	250	42.9	24.6	18	33.3	14.1	34.7	17.2
 Hungary	500	33.2	21.9	23.8	28.2	7.9	17.8	14.5
 Malta	250	27.9	29.5	10.1	26	17.9	36	8
 Netherlands	503	37.1	28.3	15.4	11.7	3.3	11	0.8
 Austria	500	35.5	16.7	13.1	34.4	14.1	35.3	8.1
 Poland	501	35.8	24.4	20.8	21.8	9.2	26.7	25
 Portugal	507	40.2	33.6	17.9	32.4	7.5	25	7.1
 Romania	505	19.2	26.1	9.8	37.8	12.9	27.4	15.2
 Slovenia	251	40.5	28.5	11.8	26.4	18.1	21.7	8.9
 Slovakia	501	32	19.1	8.9	18.4	7.5	17.5	5.3
 Finland	502	25.9	15.3	13.8	33.6	14.9	15.9	18.6
 Sweden	504	26.5	19.7	15.7	20.3	8.3	15.9	17.9
 United Kingdom	500	53.8	40.8	18.5	51	13.1	17.4	10.1

Table 2a. Potential sources of information about illicit drugs and drug use – *part 2 – by country*

QUESTION: Q1_08-99. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to?

% of "Mentioned" shown





























	Total N	A telephone helpline	The Internet	Others	Does not want to have more info	It depends	None of these	DK/NA
 EU27	12312	9.4	60.6	0.8	1.4	0	0.3	0.6
COUNTRY								
 Belgium	500	3.8	64.6	0.1	4.7	0.2	0	0.7
 Bulgaria	502	8.5	55.1	0.6	2.5	0.2	0.8	0
 Czech Rep.	505	7.5	73.3	0.2	2.3	0	0.3	0.5
 Denmark	503	6.4	72.9	0.7	0.1	0.8	0	1.2
 Germany	517	13.4	67.1	0.2	0.5	0	0.4	0.2
 Estonia	250	3.5	65.4	0.3	2.9	0.3	0	0.3
 Greece	500	12.4	43.1	0	0.4	0	0.6	0.2
 Spain	500	6.7	52.4	0.2	1	0	0.5	0.7
 France	504	8.4	51.8	0	1.6	0	0	0.3
 Ireland	500	10.4	53.2	1.1	0	0	0.6	0.4
 Italy	500	1.2	58.8	2.5	1.6	0	0.7	1.5
 Cyprus	252	11.9	44.6	0.2	0.7	0	0.6	0.4
 Latvia	504	8.2	63.4	1.2	3.6	0	0	0.8
 Lithuania	501	4.4	72.6	0.8	0.6	0	0.5	0.7
 Luxembourg	250	8.3	58.5	0.9	0.9	0	0.8	0.8
 Hungary	500	5	72.6	0.9	2.8	0	0	0.5
 Malta	250	17.2	49.9	2.5	1.1	0	1.1	0.6
 Netherlands	503	1.6	75.3	1.1	1.8	0	0	0.6
 Austria	500	13.1	67.8	1.8	2.1	0.7	0.9	0.8
 Poland	501	11.5	60.5	0.5	0.7	0	0.6	1.1
 Portugal	507	13.7	75.6	0.9	0.4	0	0	0.2
 Romania	505	4.9	50.9	0.1	6.7	0	0.9	1.1
 Slovenia	251	13.2	65.8	0.4	0.7	0	0	0.3
 Slovakia	501	4.7	69.4	0.9	2.8	0.5	0.2	0.7
 Finland	502	7.4	70.8	0.5	1.5	0	0.2	0
 Sweden	504	4.1	65.4	2.5	0	0	0.2	2.7
 United Kingdom	500	17.9	59.5	1.5	0.4	0	0	0

Table 1b. Potential sources of information about illicit drugs and drug use – *part 1 – by segment*

QUESTION: Q1_01-07. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to?

% of "Mentioned" shown







	Total N	A friend	Parents/ relatives	Someone at school or at work	A doctor, a nurse or other health professionals	A social/ youth worker	A specialised drugs counsellor/ centre	The police
EU27	12312	34.9	26.6	13.7	33.6	9.5	24.7	11.4
 SEX								
Male	6292	35.6	25.5	14	31.4	8.2	21.7	13.5
Female	6020	34.1	27.8	13.4	35.9	10.8	27.8	9.1
 AGE								
15 - 18	4735	37.6	37.4	20.5	30	10.2	22.8	11.4
19 - 21	3736	36	22.7	11.6	35.4	9	24.9	9.8
22 - 24	3841	30.5	17.1	7.5	36.3	9.2	26.9	12.8
 HIGHEST LEVEL OF FULL-TIME EDUCATION								
Primary	4522	36.8	36.5	19.6	29.5	10.3	23.2	12.1
Secondary	5399	32.7	21.1	11	34.9	9	25.6	10.8
Higher	1747	36.7	18.7	8.3	38	9.2	24.2	10.4
 CURRENTLY A FULL- TIME STUDENT								
Yes	8024	35.5	28.8	17.1	31.4	9	23.7	10.5
No	4283	33.7	22.6	7.4	37.6	10.4	26.6	13
 URBANISATION								
Metropolitan	2305	36	26.5	13.8	33.8	8.2	23	11.4
Urban	5424	35.5	26	13.1	33.2	10.1	24.9	10
Rural	4564	33.6	27.3	14.3	34	9.5	25.3	13.1
 OCCUPATION OF RESPONDENT/PRIMARY EARNER								
Self-employed	1741	37.3	29	16.4	31.9	8.4	22.3	9.1
Employee	5748	34.9	27.3	14.5	34.3	9.9	25.3	10.1
Manual worker	1918	34.2	26.9	12.7	31.6	9	25.2	13.8
Not working	2136	33	23.4	10.3	35.8	9.3	23.4	13

Table 2b. Potential sources of information about illicit drugs and drug use– *part 2 – by segment*

QUESTION: Q1_08-99. If you wanted to have more information about illicit drugs and drug use in general, who would you turn to?

% of "Mentioned" shown






	Total N	A telephone helpline	The Internet	Others	Does not want to have more info	It depends	None of these	DK/NA
EU27	12312	9.4	60.6	0.8	1.4	0	0.3	0.6
 SEX								
Male	6292	9	59.4	0.9	1.9	0	0.5	0.6
Female	6020	9.8	61.8	0.6	0.9	0	0.1	0.6
 AGE								
15 - 18	4735	7.1	54.1	0.5	0.8	0	0.3	0.4
19 - 21	3736	9.8	64.8	0.8	1.1	0	0.4	0.8
22 - 24	3841	11.9	64.4	1	2.6	0	0.3	0.6
 HIGHEST LEVEL OF FULL-TIME EDUCATION								
Primary	4522	7.4	53.8	0.5	1	0	0.3	0.5
Secondary	5399	9.4	64.3	0.7	1.6	0	0.4	0.8
Higher	1747	13.3	68.6	1.6	1.7	0	0.2	0.3
 CURRENTLY A FULL-TIME STUDENT								
Yes	8024	7.5	61.5	0.8	0.9	0	0.3	0.5
No	4283	13	58.8	0.7	2.5	0	0.4	0.7
 URBANISATION								
Metropolitan	2305	10.5	61	0.6	1.7	0	0.4	0.2
Urban	5424	9.9	61.4	0.8	1.2	0	0.5	0.6
Rural	4564	8.3	59.5	0.8	1.7	0	0.2	0.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER								
Self-employed	1741	8.4	60	0.8	0.7	0	0.5	0.8
Employee	5748	8.6	62.9	0.7	1.1	0	0.3	0.6
Manual worker	1918	10.2	56.4	0.7	2.5	0.1	0.1	0.2
Not working	2136	10.8	60.2	0.6	1.9	0	0.6	0.8

Table 3a. Channels through which young people were informed about the effects and risks of illicit drug use – *by country*

QUESTION: Q2_01-99. Through which of the following channels - if any - have you been informed about the effects and risks of illicit drug use over the past year?

% of "Mentioned" shown





























	Total N	Through a school prevention programme	From friends	From parents/ relatives	Through media campaign(s)	From the police	Found it on the Internet	Prevention materials of specialised	From a drug and/or alcohol telephone helpline	I have not been informed at all	Other	DK/NA
 EU27	12312	39.3	26.4	17.9	46.3	10.4	34.6	7.2	2	7.8	2.1	0.7
COUNTRY												
 Belgium	500	49.4	17.7	12.5	31.9	4.6	16.9	9.3	1.6	13.8	0.3	0.4
 Bulgaria	502	23.6	27.5	21.9	51.2	3.2	37.8	6.8	0.9	14.1	1.3	0
 Czech Rep.	505	35.8	26.4	12.2	27.7	7.9	40	8.7	4.6	10.2	1.5	0.7
 Denmark	503	33.3	28.8	15.7	50.6	8.5	29.1	9.3	1.7	3.8	1.9	3.1
 Germany	517	40.6	25.2	14.8	47.2	15.1	36.5	8.5	1.1	8.8	1.9	1.8
 Estonia	250	29.8	26.1	7.8	49.4	9.1	53.5	2.9	0.8	5.9	2.3	0
 Greece	500	33.4	22.6	31.3	44.3	5.8	30.8	12.3	2.7	6	3.1	0
 Spain	500	29.7	16.2	13.5	54.4	2.5	18	4.9	1.4	13.4	0.9	0
 France	504	55.2	22	17.4	45.6	11	25	5.8	1.9	3.6	1.1	0.1
 Ireland	500	37.6	44.7	35.7	53	18.4	39.9	7	4.7	2.8	2.6	1.1
 Italy	500	36.2	26.8	15.8	36.7	0.9	32	4.1	0.2	4.6	3.3	0.3
 Cyprus	252	34.9	26.5	26.9	40.7	28.4	30	17.7	5.8	1	3	0
 Latvia	504	26.8	29.3	9.6	52.5	6.1	49.3	7.4	2.5	6.7	1.9	0.5
 Lithuania	501	34	24.5	5.8	29.8	2.9	41.1	9	2	6.4	3.5	0.3
 Luxembourg	250	50.3	32.7	18.7	33.7	21.6	35.4	10.7	5.3	5.2	2.6	1.2
 Hungary	500	59.6	17	15.9	38.4	11.1	37.7	8.4	1.9	8.1	1.1	0.8
 Malta	250	35.4	25.7	23.7	59.2	5.4	35.6	14.8	11.1	0.3	6	1.3
 Netherlands	503	32.1	21.1	16.2	39.3	3.4	29.1	11.5	1.1	10.3	4.1	1.1
 Austria	500	38.6	28.7	12.6	54.6	8	36.6	10.8	2.8	9.9	3.4	0.9
 Poland	501	36.3	24.1	13.9	43.5	12.8	45.6	6.3	0.6	12.2	0.9	0.5
 Portugal	507	30.9	33.6	22.9	58.5	4	55.2	9.8	5.6	2.9	0.7	0.2
 Romania	505	39.8	20.5	18.1	45.6	13.5	39.6	14.3	2	8.2	0.2	1.3
 Slovenia	251	30.1	33.4	13.6	37.5	6.6	48.3	11.4	0.6	16.6	2.5	0.5
 Slovakia	501	30.5	25.2	8.3	33.1	7.2	33	6.9	1.4	15.8	1.9	1.2
 Finland	502	34.5	20.5	8.4	47.1	10.6	51	3.6	1.5	7.3	1.9	0.8
 Sweden	504	41.1	22.8	9.3	40.3	11.4	25.4	4.4	0.2	8.9	2.2	0.5
 United Kingdom	500	35.8	43.9	31.7	57.7	18.8	43	5.3	5.4	4.8	4.4	0.3

Table 3b. Channels through which young people were informed about the effects and risks of illicit drug use – *by segment*

QUESTION: Q2_01-99. Through which of the following channels - if any - have you been informed about the effects and risks of illicit drug use over the past year?

% of "Mentioned" shown







	Total N	Through a school prevention programme	From friends	From parents/ relatives	Through media campaign(s)	From the police	Found it on the Internet	Prevention materials of specialised	From a drug and/or alcohol telephone helpline	I have not been informed at all	Other	DK/NA
EU27	12312	39.3	26.4	17.9	46.3	10.4	34.6	7.2	2	7.8	2.1	0.7
 SEX												
Male	6292	37.7	26.8	17.4	45.2	11.9	35	7.3	2.1	7.5	2.2	0.6
Female	6020	41	26	18.4	47.4	8.8	34.3	7	1.9	8.1	2	0.8
 AGE												
15 - 18	4735	61.2	26.3	24.3	34.5	13	31.3	5.8	2.3	4.6	1.3	0.5
19 - 21	3736	34.1	29.7	15.5	51.1	10	38	7.1	2.4	7	2.2	1
22 - 24	3841	17.5	23.3	12.4	56	7.6	35.6	8.9	1.3	12.6	3	0.6
 HIGHEST LEVEL OF FULL-TIME EDUCATION												
Primary	4522	58.4	26.3	23.5	35.9	13.1	30.7	5.7	2.3	5	1.4	0.4
Secondary	5399	31.1	25.9	14.7	50.4	8.7	36.4	8	1.7	8.1	2.6	0.8
Higher	1747	20.4	26.2	12.8	59.5	8.3	38.7	8.5	1.8	12.5	2.4	0.8
 CURRENTLY A FULL-TIME STUDENT												
Yes	8024	48.3	26.3	18.6	42.6	10.1	34.9	7.1	2	5.9	1.6	0.6
No	4283	22.4	26.6	16.6	53.1	10.9	34.2	7.3	2	11.3	3	0.7
 URBANISATION												
Metropolitan	2305	33	29.8	18.7	46.2	10.8	35.6	5.5	2	9	2.5	1
Urban	5424	37.9	26.1	16.8	48.4	9.1	37	7.8	2.4	7.7	2.2	0.4
Rural	4564	44.2	25.1	18.8	43.9	11.7	31.4	7.2	1.6	7.3	1.7	0.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER												
Self-employed	1741	45.7	28.1	18.8	44.2	8.7	36.6	6.9	2.1	6.3	1.6	0.7
Employee	5748	40.6	26.3	18.6	47.2	10.3	34.9	7.2	2	7.1	2	0.6
Manual worker	1918	44.5	23.8	17.3	44.9	13	30.4	6.9	1.6	7.1	1.6	0.4
Not working	2136	27.9	24.9	14.2	48.7	9.4	36.4	7.3	1.6	10.5	3.6	1

Table 4a. Perceived extent of the risk to a person's health of ecstasy – *by country*

QUESTION: Q3_A. To what extent do you think the following substances may pose a risk to a person's health? Does Ecstasy pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	79.5	15.9	2	0.2	2.4
COUNTRY						
 Belgium	500	80.5	16	1	0	2.5
 Bulgaria	502	60.7	27.9	3.8	0.5	7.1
 Czech Rep.	505	37.4	49.5	9.3	1.9	2
 Denmark	503	87.9	9.9	0.8	0.8	0.6
 Germany	517	85.9	12.9	0.3	0	0.9
 Estonia	250	71.5	25.2	1.5	0	1.8
 Greece	500	70.6	23.3	3.6	0.7	1.8
 Spain	500	93.9	4.5	0.3	0	1.3
 France	504	90.3	7.8	0.6	0	1.4
 Ireland	500	82.8	12.2	3.2	1.2	0.6
 Italy	500	86.9	11.3	0.7	0	1.1
 Cyprus	252	80.2	16.5	0.4	0.6	2.3
 Latvia	504	65.8	26.4	2.4	0.2	5.2
 Lithuania	501	80.6	14.9	0.6	0.1	3.8
 Luxembourg	250	77	18.4	1.7	1.3	1.7
 Hungary	500	59	29.1	4.1	0.2	7.7
 Malta	250	74.8	19.6	1.1	0	4.6
 Netherlands	503	70.7	24	4.1	0.6	0.6
 Austria	500	77.7	18.8	1	0.6	1.8
 Poland	501	76	19.7	1.2	0.2	3
 Portugal	507	74.2	21.2	1.4	0	3.3
 Romania	505	64.1	20.1	1.1	0.5	14.2
 Slovenia	251	70.4	24.8	2.1	2	0.7
 Slovakia	501	52.1	39.8	5.2	0.7	2.1
 Finland	502	66.1	27.9	3.3	0.6	2.1
 Sweden	504	77.4	15.1	2	0.4	5.1
 United Kingdom	500	76.1	16.5	5.8	0.4	1.2

Table 4b. Perceived extent of the risk to a person's health of ecstasy – *by segment*

QUESTION: Q3_A. To what extent do you think the following substances may pose a risk to a person's health? Does Ecstasy pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	79.5	15.9	2	0.2	2.4
 SEX						
Male	6292	75.4	18.5	2.7	0.4	3
Female	6020	83.8	13.1	1.3	0	1.8
 AGE						
15 - 18	4735	78.9	15.7	2.2	0.2	3
19 - 21	3736	78.7	16.8	1.9	0.3	2.4
22 - 24	3841	81	15.2	1.9	0.3	1.7
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	79.6	15	2.1	0.2	3.1
Secondary	5399	79	16.6	1.9	0.3	2.2
Higher	1747	81.7	15.9	1.4	0.3	0.7
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	78.5	16.6	2.1	0.2	2.5
No	4283	81.3	14.4	1.8	0.3	2.2
 URBANISATION						
Metropolitan	2305	78.1	17.1	2.7	0.4	1.7
Urban	5424	78	17.1	2.1	0.2	2.6
Rural	4564	82	13.8	1.5	0.2	2.4
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	79.2	16.1	2.6	0.1	2
Employee	5748	80.4	15.6	1.7	0.2	2.1
Manual worker	1918	79	15	1.7	0.3	3.9
Not working	2136	79	16.8	1.9	0.3	2

Table 5a. Perceived extent of the risk to a person's health of heroin – *by country*

QUESTION: Q3_B. To what extent do you think the following substances may pose a risk to a person's health? Does Heroin pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	94.4	3.7	0.3	0.1	1.5
COUNTRY						
 Belgium	500	91.6	6.5	0.3	0	1.7
 Bulgaria	502	94.3	2.8	0.5	0	2.5
 Czech Rep.	505	93.4	5	0.7	0.7	0.2
 Denmark	503	91.6	5.9	1.1	0.8	0.7
 Germany	517	95.5	3.8	0	0	0.7
 Estonia	250	92	5.7	0	0	2.3
 Greece	500	96.6	2.3	0	0.5	0.6
 Spain	500	98	1.2	0	0	0.9
 France	504	96.1	2.9	0.1	0	0.9
 Ireland	500	95	3.7	0.4	0.6	0.4
 Italy	500	95.8	2.9	0	0	1.3
 Cyprus	252	91.7	5.5	1	0	1.8
 Latvia	504	93.8	2.6	0.4	0	3.2
 Lithuania	501	94.1	1.7	0	0	4.2
 Luxembourg	250	91.9	5.3	0.9	0.4	1.5
 Hungary	500	91.1	3.6	0.5	0	4.8
 Malta	250	90.5	6.7	0.2	0	2.5
 Netherlands	503	87.5	9.7	1.6	0.4	0.8
 Austria	500	94	4.2	0.2	0.4	1.2
 Poland	501	91.6	5.8	0	0	2.6
 Portugal	507	93.2	4.5	0.2	0	2.1
 Romania	505	88.2	4.2	1.2	0	6.4
 Slovenia	251	93.8	4.4	0.8	0	1.1
 Slovakia	501	92.3	5.9	0.3	0.3	1.2
 Finland	502	93.4	4.5	0	0.4	1.7
 Sweden	504	92.4	4.8	0.3	0.1	2.4
 United Kingdom	500	96.5	2.3	0.6	0	0.6

Table 5b. Perceived extent of the risk to a person's health of heroin – *by segment*

QUESTION: Q3_B. To what extent do you think the following substances may pose a risk to a person's health? Does Heroin pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	94.4	3.7	0.3	0.1	1.5
 SEX						
Male	6292	93.9	4.1	0.4	0.1	1.5
Female	6020	95	3.3	0.2	0	1.5
 AGE						
15 - 18	4735	91.4	6.1	0.5	0.1	1.9
19 - 21	3736	95.8	2.6	0.1	0.1	1.4
22 - 24	3841	96.7	1.9	0.2	0.1	1.2
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	91.8	5.6	0.4	0.1	2
Secondary	5399	95.7	2.5	0.2	0	1.5
Higher	1747	97.4	2.3	0.1	0.1	0.1
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	94	4.1	0.3	0.1	1.6
No	4283	95.3	3	0.3	0.1	1.4
 URBANISATION						
Metropolitan	2305	95.9	2.9	0.6	0.1	0.5
Urban	5424	94.6	3.3	0.3	0.1	1.7
Rural	4564	93.5	4.6	0.2	0.1	1.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	95.2	3.7	0.1	0	0.9
Employee	5748	95.2	3.3	0.2	0.1	1.3
Manual worker	1918	92.1	4.8	0.4	0.1	2.5
Not working	2136	94.6	3	0.6	0.1	1.7

Table 6a. Perceived extent of the risk to a person's health of cocaine – *by country*

QUESTION: Q3_C. To what extent do you think the following substances may pose a risk to a person's health? Does Cocaine pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	85.4	11.9	1.2	0.1	1.5
COUNTRY						
 Belgium	500	86.4	11.2	0.6	0	1.9
 Bulgaria	502	84.9	9.9	1.2	0.3	3.8
 Czech Rep.	505	86.4	11.4	1.6	0.4	0.2
 Denmark	503	81.8	15.3	1.3	0.8	0.9
 Germany	517	85.9	12.8	0.7	0	0.5
 Estonia	250	92.3	6.1	0.4	0	1.2
 Greece	500	86.8	11.6	0.8	0.2	0.6
 Spain	500	91.3	7.4	0.2	0	1.1
 France	504	90.1	8.5	1	0	0.4
 Ireland	500	81.8	16.7	1	0.4	0.2
 Italy	500	84.6	14.1	0.3	0	0.9
 Cyprus	252	91.2	6.4	1.4	0	1.1
 Latvia	504	87	7.9	1.4	0	3.7
 Lithuania	501	88.3	6.8	0.2	0	4.8
 Luxembourg	250	82	15	1	0.4	1.6
 Hungary	500	85.5	8.8	0.6	0	5.1
 Malta	250	75.5	19.5	1	0	4
 Netherlands	503	81.4	15.8	1.3	0.8	0.8
 Austria	500	82.8	14	0.9	0.6	1.6
 Poland	501	86.2	8.8	1.8	0	3.2
 Portugal	507	92.6	5.5	0.4	0	1.5
 Romania	505	85.2	6.8	0.4	0	7.6
 Slovenia	251	84	14.2	0.8	0	1.1
 Slovakia	501	87.6	9	1.5	0.7	1.2
 Finland	502	83.1	14.3	1	0.2	1.4
 Sweden	504	87.3	9.4	0.9	0.1	2.2
 United Kingdom	500	76.4	19.8	3.3	0.2	0.3

Table 6b. Perceived extent of the risk to a person's health of cocaine – *by segment*

QUESTION: Q3_C. To what extent do you think the following substances may pose a risk to a person's health? Does Cocaine pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	85.4	11.9	1.2	0.1	1.5
 SEX						
Male	6292	83.5	13.1	1.5	0.2	1.7
Female	6020	87.4	10.6	0.8	0.1	1.2
 AGE						
15 - 18	4735	82.9	13.6	1.5	0.1	1.9
19 - 21	3736	85.6	12.1	0.9	0.1	1.3
22 - 24	3841	88.1	9.5	1.1	0.2	1.1
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	82.9	13.6	1.5	0.1	1.9
Secondary	5399	86.9	10.7	0.9	0.1	1.4
Higher	1747	88.2	10.4	1.1	0.1	0.3
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	84.9	12.4	1.1	0.1	1.5
No	4283	86.3	10.9	1.3	0.1	1.4
 URBANISATION						
Metropolitan	2305	86.4	10.9	1.5	0.3	1
Urban	5424	85.3	12.1	0.9	0	1.6
Rural	4564	84.9	12	1.3	0.1	1.6
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	84.2	13.4	1.3	0	1
Employee	5748	86.1	11.7	0.9	0.1	1.3
Manual worker	1918	84.7	11.6	1.5	0.1	2.2
Not working	2136	87	10.2	1.1	0.3	1.5

Table 7a. Perceived extent of the risk to a person's health of alcohol – *by country*

QUESTION: Q3_D. To what extent do you think the following substances may pose a risk to a person's health? Does Alcohol pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	24.2	59	15.1	1.1	0.6
COUNTRY						
 Belgium	500	18.1	61.4	19.4	0.7	0.4
 Bulgaria	502	19.5	57.6	19.3	2	1.6
 Czech Rep.	505	18	44	33.3	4.3	0.3
 Denmark	503	9.4	48.4	36.8	5.2	0.1
 Germany	517	21.4	62.7	14.7	0.6	0.7
 Estonia	250	19.5	60.9	17	1.5	1.2
 Greece	500	17.2	61.5	19	1.9	0.4
 Spain	500	29.8	59.6	9.9	0.4	0.3
 France	504	30.1	60.8	7.6	1.4	0.1
 Ireland	500	12.7	60.8	24.4	1.7	0.4
 Italy	500	30.2	58	10.2	0.5	1
 Cyprus	252	20.3	53.4	22.5	3	0.9
 Latvia	504	30.4	53.7	14.3	1.4	0.3
 Lithuania	501	28.8	63.3	6.4	0.8	0.7
 Luxembourg	250	21.6	61.3	13.7	2.3	1.1
 Hungary	500	13.4	57.5	26.3	1.3	1.5
 Malta	250	11.2	53.4	29.3	2.7	3.3
 Netherlands	503	19.6	61.4	17.9	0.9	0.3
 Austria	500	28.1	58.2	12.4	0.7	0.6
 Poland	501	26.4	58.5	13.2	1.4	0.6
 Portugal	507	27.4	59.6	11.8	1	0.2
 Romania	505	35.5	52.1	8.9	0.9	2.6
 Slovenia	251	16.1	62.7	19.3	1.6	0.3
 Slovakia	501	22.6	57.6	17.6	0.9	1.2
 Finland	502	11.1	56.2	30.7	1.9	0.2
 Sweden	504	18.3	62.6	16.6	1.4	1.1
 United Kingdom	500	18.2	58.5	22.4	0.9	0

Table 7b. Perceived extent of the risk to a person's health of alcohol – *by segment*

QUESTION: Q3_D. To what extent do you think the following substances may pose a risk to a person's health? Does Alcohol pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	24.2	59	15.1	1.1	0.6
 SEX						
Male	6292	20.4	58.2	19.2	1.7	0.6
Female	6020	28.2	59.9	10.8	0.5	0.6
 AGE						
15 - 18	4735	20.7	59.6	17.9	1	0.7
19 - 21	3736	24	60.7	13.8	1	0.5
22 - 24	3841	28.7	56.8	12.7	1.2	0.5
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	20.7	60	17.9	0.8	0.6
Secondary	5399	25.4	59.1	13.7	1.1	0.7
Higher	1747	26.2	59.1	13	1.3	0.4
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	22.4	60.5	15.6	1	0.5
No	4283	27.5	56.4	14.1	1.4	0.7
 URBANISATION						
Metropolitan	2305	23	57.9	16.7	1.8	0.6
Urban	5424	24.2	59.3	15.2	0.9	0.4
Rural	4564	24.7	59.4	14.1	1	0.8
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	24	59	15.5	1.1	0.4
Employee	5748	22.9	60.3	15.3	0.8	0.7
Manual worker	1918	23.7	60.4	14	1.3	0.7
Not working	2136	26.9	57.4	13.8	1.4	0.4

Table 8a. Perceived extent of the risk to a person's health of cannabis – *by country*

QUESTION: Q3_E. To what extent do you think the following substances may pose a risk to a person's health? Does Cannabis pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	40.4	41.6	14.2	1.4	2.4
COUNTRY						
 Belgium	500	32.4	49.5	14.6	1.5	2
 Bulgaria	502	37.1	36.9	18.3	2.3	5.4
 Czech Rep.	505	17	43.6	34.1	4.6	0.7
 Denmark	503	28.5	49.9	16.8	2.8	2
 Germany	517	46	41.5	10.4	1.2	0.9
 Estonia	250	34.7	52	10	0	3.2
 Greece	500	44.6	34.3	15.2	2	4
 Spain	500	46.8	42.3	9.2	0.8	0.8
 France	504	50.4	41.6	6.3	0.9	0.7
 Ireland	500	30.1	44.1	22.5	2.5	0.8
 Italy	500	27.5	50.7	18.4	1.3	2.2
 Cyprus	252	62.4	30.9	4.2	0.6	1.8
 Latvia	504	56	29.8	10	1	3.2
 Lithuania	501	47.9	37.5	8.4	1.2	4.9
 Luxembourg	250	36.6	44.5	15.6	2.3	1
 Hungary	500	39.2	35.8	18.7	0.3	6
 Malta	250	51.5	29.9	13.8	0.3	4.4
 Netherlands	503	25.5	47.1	22.2	1.9	3.2
 Austria	500	39.4	43.5	13.2	1.8	2.2
 Poland	501	42.1	38.6	11.8	2.1	5.4
 Portugal	507	48.3	40.1	7.2	0.2	4.2
 Romania	505	62	22.8	3.6	0.1	11.5
 Slovenia	251	26.6	52.1	18.1	1.8	1.4
 Slovakia	501	29.2	44.1	21.4	3.3	2.1
 Finland	502	44.4	36.4	16.3	1.6	1.3
 Sweden	504	53.7	30.1	9	0.9	6.3
 United Kingdom	500	28.4	44.3	25.7	1.5	0.2

Table 8b. Perceived extent of the risk to a person's health of cannabis – *by segment*

QUESTION: Q3_E. To what extent do you think the following substances may pose a risk to a person's health? Does Cannabis pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	40.4	41.6	14.2	1.4	2.4
 SEX						
Male	6292	35.1	42.9	17.9	1.9	2.3
Female	6020	46	40.2	10.3	0.9	2.6
 AGE						
15 - 18	4735	46	37	12.5	1.3	3.1
19 - 21	3736	35.7	46.3	14.2	1.8	2
22 - 24	3841	38	42.7	16.1	1.1	2
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	46.2	36.8	12.7	1.2	3.2
Secondary	5399	37.3	44.1	14.7	1.7	2.2
Higher	1747	35.9	47.1	15.2	0.7	1.1
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	41.4	40.8	13.7	1.5	2.6
No	4283	38.6	43	15	1.2	2.1
 URBANISATION						
Metropolitan	2305	35	44.3	16.2	2.6	1.9
Urban	5424	39.3	42	15.4	0.8	2.5
Rural	4564	44.4	39.9	11.7	1.5	2.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	38.5	45.5	11.7	2.4	1.9
Employee	5748	41.2	41.4	14.3	1.1	2
Manual worker	1918	43.3	39.7	13.3	1.1	2.7
Not working	2136	37.5	42.8	15.4	1.2	3.1

Table 9a. Perceived extent of the risk to a person's health of tobacco– *by country*

QUESTION: Q3_F. To what extent do you think the following substances may pose a risk to a person's health? Does Tobacco pose a high, medium, low or no risk?





























	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
 EU27	12312	27.8	51.8	18.8	1.2	0.4
COUNTRY						
 Belgium	500	23.9	58.2	16.9	0.9	0.1
 Bulgaria	502	22.1	51.1	22.7	2.9	1.2
 Czech Rep.	505	19.5	41.2	34.7	4.3	0.4
 Denmark	503	18.2	48.8	28.7	4.2	0
 Germany	517	22	56.1	21.1	0.8	0
 Estonia	250	22.7	59.2	16.3	0.6	1.2
 Greece	500	19	52.2	24.5	3.8	0.5
 Spain	500	37.6	51.5	10.5	0.2	0.3
 France	504	29.9	57	12.2	0.7	0.3
 Ireland	500	28.4	50.4	19.6	1.3	0.2
 Italy	500	22.3	49.8	25.3	2	0.5
 Cyprus	252	27	42	26.9	3.9	0.2
 Latvia	504	29.3	55.3	13.3	1.7	0.5
 Lithuania	501	30.5	56.3	10.5	1.9	0.8
 Luxembourg	250	18.9	54.1	22.8	3	1.1
 Hungary	500	23.4	52.2	21.8	0.5	2
 Malta	250	18.9	46.1	29.7	2.9	2.3
 Netherlands	503	19.5	52.2	25	2.8	0.5
 Austria	500	26.5	53.3	18.1	1.7	0.4
 Poland	501	35.5	50.9	12.1	1	0.4
 Portugal	507	31.5	54.7	13.2	0.6	0
 Romania	505	41.5	46.7	8	0.9	2.9
 Slovenia	251	16.2	52.8	28.6	2.1	0.3
 Slovakia	501	23.1	46.8	26.8	2.8	0.5
 Finland	502	23.5	55.1	19.9	1.1	0.3
 Sweden	504	27.3	51.1	19.5	1.6	0.5
 United Kingdom	500	29.3	45.6	24.5	0.6	0

Table 9b. Perceived extent of the risk to a person's health of tobacco – *by segment*

QUESTION: Q3_F. To what extent do you think the following substances may pose a risk to a person's health? Does Tobacco pose a high, medium, low or no risk?







	Total N	% High risk	% Medium risk	% Low risk	% No risk	% DK/NA
EU27	12312	27.8	51.8	18.8	1.2	0.4
 SEX						
Male	6292	27	49.5	21.5	1.5	0.5
Female	6020	28.6	54.1	15.9	0.9	0.4
 AGE						
15 - 18	4735	25	51.2	21.6	1.7	0.6
19 - 21	3736	27.4	52.7	18.4	1.1	0.3
22 - 24	3841	31.6	51.5	15.7	0.7	0.4
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	25	51.4	21.5	1.5	0.5
Secondary	5399	27.7	52.8	17.9	1.2	0.4
Higher	1747	32.2	50.2	16.5	0.7	0.4
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	27.3	51.7	19.2	1.3	0.5
No	4283	28.7	51.9	18	1.1	0.3
 URBANISATION						
Metropolitan	2305	26.2	53.5	17.7	2.1	0.4
Urban	5424	29	50.4	19.4	1	0.3
Rural	4564	27.1	52.6	18.6	1.1	0.5
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	26.9	52	20.1	0.8	0.2
Employee	5748	28.6	51.9	17.9	1.2	0.4
Manual worker	1918	26.3	51.4	20	1.5	0.8
Not working	2136	27.1	52.9	18.4	1.2	0.4

Table 10a. Most effective ways for public authorities to deal with drug problems in society (first mention) – *by country*

QUESTION: Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?





























	Total N	% Information and prevention campaigns	% Treatment and rehabilitation of drug users	% Tough measures against drug dealers and traffickers	% Reducing poverty/unemployment	% Tough measures against drug users	% Legalising drugs	% DK/NA
 EU27	12312	24.4	13.9	39	5.7	7.4	8	1.6
COUNTRY								
 Belgium	500	31.5	13.6	38.4	5	5.6	4.2	1.8
 Bulgaria	502	12.8	9.3	65.7	2.6	5.4	2.5	1.7
 Czech Rep.	505	21.5	10.7	48.5	3.5	7	7.3	1.5
 Denmark	503	47.6	13	18.1	3.1	9.2	5.1	3.9
 Germany	517	28.8	11.6	37.9	8.6	6.8	4.7	1.6
 Estonia	250	25.5	8.8	36.5	4.1	14.8	6.3	3.9
 Greece	500	31.6	12	44.3	4.2	1.5	5.1	1.4
 Spain	500	16.1	14.6	49.5	2.7	6.2	9.7	1.1
 France	504	23.3	15.2	38.4	5.4	9.5	6.6	1.7
 Ireland	500	22	17.5	29	8.1	6.3	13.5	3.7
 Italy	500	28.7	10.6	43.3	1.2	6.8	8.1	1.3
 Cyprus	252	23.5	14.8	48.1	1.9	2.4	5	4.3
 Latvia	504	24.7	10.9	41.1	10.4	7.7	2.9	2.4
 Lithuania	501	19.1	15.5	48.5	6.6	4.7	4.2	1.3
 Luxembourg	250	24.4	20.6	32.9	5.8	6	7.8	2.4
 Hungary	500	19	8.7	49.8	5.6	9.2	6	1.5
 Malta	250	29.7	19.9	36.5	0.6	3.2	5.6	4.5
 Netherlands	503	28.9	11.9	31.6	4.6	9.2	11.9	1.8
 Austria	500	28.8	12.1	36.5	9.4	7.3	4.3	1.5
 Poland	501	19.7	15.4	43.6	3.7	5.9	10.4	1.3
 Portugal	507	38.1	12.4	32	5.8	3	7.5	1.3
 Romania	505	23.9	12.7	46.7	4.9	6	3.8	2
 Slovenia	251	31.8	8.7	36.4	4	5.7	5.6	7.9
 Slovakia	501	28.7	19.8	34	2.4	5.7	6.5	2.9
 Finland	502	41.8	10.5	33.3	5.6	5.5	1.8	1.6
 Sweden	504	31.6	16.5	30.7	8.4	6.4	3.8	2.5
 United Kingdom	500	16.9	19.2	26.5	10.1	10.7	15.5	1

Table 10b. Most effective ways for public authorities to deal with drug problems in society (first mention) – *by segment*

QUESTION: Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?







	Total N	% Information and prevention campaigns	% Treatment and rehabilitation of drug users	% Tough measures against drug dealers and traffickers	% Reducing poverty/unemployment	% Tough measures against drug users	% Legalising drugs	% DK/NA
EU27	12312	24.4	13.9	39	5.7	7.4	8	1.6
 SEX								
Male	6292	23.1	11.5	39.4	6	7.4	10.7	1.9
Female	6020	25.7	16.5	38.6	5.4	7.4	5.2	1.3
 AGE								
15 - 18	4735	25.6	14.3	36.7	5.5	7.5	8.6	1.6
19 - 21	3736	23.9	14.1	40	5.1	7.2	7.8	1.9
22 - 24	3841	23.3	13.2	40.8	6.5	7.5	7.4	1.3
 HIGHEST LEVEL OF FULL-TIME EDUCATION								
Primary	4522	24.3	14.5	37.7	5.8	7.7	8.5	1.5
Secondary	5399	24.3	13.2	40.1	4.9	7.8	8.2	1.5
Higher	1747	25.3	13.3	39.3	8	6.3	6.4	1.5
 CURRENTLY A FULL-TIME STUDENT								
Yes	8024	26.2	13.5	37.8	5.5	7.4	8.2	1.4
No	4283	20.9	14.6	41.3	6.1	7.5	7.6	1.9
 URBANISATION								
Metropolitan	2305	26	13.3	35.8	5.7	7.9	9.9	1.4
Urban	5424	24.2	14	39.5	5.7	7.6	7.6	1.4
Rural	4564	23.9	14	40	5.7	7	7.6	1.9
 OCCUPATION OF RESPONDENT/PRIMARY EARNER								
Self-employed	1741	26.6	13	38.9	4.6	6.3	9.2	1.5
Employee	5748	25.4	13.2	39	5.2	7.7	8.2	1.4
Manual worker	1918	20.3	15	42.3	6	7.1	7.9	1.4
Not working	2136	24.6	14.3	36.9	7.8	7.9	6.6	1.9

Table 11a. Most effective ways for public authorities to deal with drug problems in society (second mention)– *by country*

QUESTION: Q4b. What would be the second most effective way?





























	Total N	% Information and prevention campaigns	% Treatment and rehabilitation of drug users	% Tough measures against drug dealers and traffickers	% Reducing poverty/unemployment	% Tough measures against drug users	% Legalising drugs	% DK/NA
 EU27	12312	22.1	19.2	24.2	8.8	15.6	4.7	5.5
COUNTRY								
 Belgium	500	19.6	16.9	24	6.8	16	3.5	13.2
 Bulgaria	502	20.3	24.2	19.9	4.7	26.4	2	2.5
 Czech Rep.	505	24.3	13.1	26.5	7	16.4	7	5.7
 Denmark	503	17.3	20.7	32.2	8.3	9.4	2.4	9.7
 Germany	517	20.3	15.6	27.1	14.3	15.7	3.9	3.2
 Estonia	250	17.4	9.2	26.8	6	20.2	5.7	14.8
 Greece	500	21.1	23.5	28.7	9.7	8.8	4.5	3.6
 Spain	500	24.1	22.9	18.7	4.4	16.9	5.9	7.2
 France	504	28	19.8	22.2	7.2	13.2	4	5.5
 Ireland	500	19.9	24.3	20.8	10.5	9.5	8.9	6.1
 Italy	500	21.4	18.9	22.5	2.1	20.9	3.8	10.4
 Cyprus	252	20.4	18.9	27	4.8	13.8	7.1	8.1
 Latvia	504	16.2	18.4	24.8	9.2	24.8	2.2	4.4
 Lithuania	501	16.6	20.9	22.4	10.4	20	3.3	6.4
 Luxembourg	250	23	18.2	22	12.9	15.1	4.4	4.4
 Hungary	500	19.2	19.5	24.7	6.3	21.9	4.5	3.9
 Malta	250	21.7	23.6	26.2	3.4	13	2.9	9.1
 Netherlands	503	17.8	13	25	11.6	20.2	8.6	3.9
 Austria	500	16.4	19.8	25	11.8	16.3	2.8	7.8
 Poland	501	21.9	17.9	27.7	7.1	16.2	5	4.2
 Portugal	507	25.6	22.1	25.2	10.2	7.7	6.6	2.6
 Romania	505	23.4	22.6	23.4	6.8	14.7	2.4	6.8
 Slovenia	251	17	13.7	21.1	4.2	15.2	5.4	23.3
 Slovakia	501	20.7	18.9	28	4.9	13.4	5.5	8.6
 Finland	502	22.5	20.6	24.4	9.9	14.1	2.2	6.3
 Sweden	504	20.7	13.6	32.6	10.4	10.7	2.5	9.4
 United Kingdom	500	20.9	22.6	21.7	13.5	12.9	6.3	2.1

Table 11b. Most effective ways for public authorities to deal with drug problems in society (second mention)– *by segment*

QUESTION: Q4b. What would be the second most effective way?







	Total N	% Information and prevention campaigns	% Treatment and rehabilitation of drug users	% Tough measures against drug dealers and traffickers	% Reducing poverty/unemployment	% Tough measures against drug users	% Legalising drugs	% DK/NA
EU27	12312	22.1	19.2	24.2	8.8	15.6	4.7	5.5
 SEX								
Male	6292	22.3	17.5	23.3	9.4	15.1	5.5	6.9
Female	6020	21.8	21.1	25	8.1	16.1	3.8	4
 AGE								
15 - 18	4735	21.6	19.8	24.1	8.8	15.3	4.5	6
19 - 21	3736	21.8	18.8	23.3	8.7	16.4	4.9	6.2
22 - 24	3841	22.9	18.9	25.1	8.9	15.1	4.7	4.4
 HIGHEST LEVEL OF FULL-TIME EDUCATION								
Primary	4522	22.4	20.1	23.2	8.5	15.2	4.3	6.3
Secondary	5399	21.5	18.9	24.8	8.7	16.2	4.7	5.2
Higher	1747	22.5	18	25.7	9.6	15.1	5.5	3.6
 CURRENTLY A FULL-TIME STUDENT								
Yes	8024	22.4	19.4	24.9	8	15.1	4.6	5.5
No	4283	21.4	18.9	22.8	10.2	16.4	4.8	5.5
 URBANISATION								
Metropolitan	2305	20.6	19.7	27	8.9	13.8	4.7	5.3
Urban	5424	22.6	19.6	24	8.4	15.1	4.8	5.5
Rural	4564	22.2	18.5	23	9.3	16.9	4.5	5.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER								
Self-employed	1741	21.8	20.5	23.7	8.1	15.3	4.6	6
Employee	5748	22.2	18.5	25	8.8	16.1	4.5	4.9
Manual worker	1918	22.5	18.8	23.1	8.9	16.4	4.9	5.4
Not working	2136	22.3	19.6	25.2	7.4	13.9	4.8	6.8

Table 12a. Cannabis should (continue to) be banned or regulated – *by country*

QUESTION: Q5_A. Do you think the following substances should (continue to) be banned or regulated? - Cannabis





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	66.6	30.9	1	1.4
COUNTRY					
 Belgium	500	61.7	35	1.2	2.1
 Bulgaria	502	77	21.6	0.5	0.8
 Czech Rep.	505	38	53.3	6.9	1.8
 Denmark	503	67.9	25	3.6	3.5
 Germany	517	69.4	29.1	0.8	0.7
 Estonia	250	70.5	27.3	1.2	0.9
 Greece	500	70.8	26.7	1.4	1.1
 Spain	500	58.1	40.1	0	1.7
 France	504	72.7	26.2	0.7	0.4
 Ireland	500	60.9	38.5	0	0.6
 Italy	500	57.2	35.4	2.1	5.3
 Cyprus	252	83.5	15.6	0.6	0.4
 Latvia	504	75.1	22.8	0.7	1.3
 Lithuania	501	79.4	19.1	0.4	1
 Luxembourg	250	69.1	24.5	5.3	1.1
 Hungary	500	74.5	21.7	1.7	2.1
 Malta	250	78.8	17.1	0.3	3.9
 Netherlands	503	45.4	52	1.7	0.9
 Austria	500	73.3	24.6	1.2	0.8
 Poland	501	70.1	27.1	1.5	1.3
 Portugal	507	67.6	29.7	0.9	1.9
 Romania	505	91.1	7.7	0	1.2
 Slovenia	251	63.3	36.3	0.4	0
 Slovakia	501	67.3	30.1	1.6	1
 Finland	502	78.7	19.4	1.4	0.5
 Sweden	504	88.5	9.4	1	1.1
 United Kingdom	500	59.2	40.1	0.2	0.5

Table 12b. Cannabis should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_A. Do you think the following substances should (continue to) be banned or regulated? - Cannabis







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	66.6	30.9	1	1.4
 SEX					
Male	6292	60.8	36.2	1.4	1.6
Female	6020	72.8	25.3	0.7	1.3
 AGE					
15 - 18	4735	73.8	23.6	1.2	1.5
19 - 21	3736	63.6	34.6	1	0.8
22 - 24	3841	60.8	36.3	1	1.9
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	72.8	24.6	1.1	1.5
Secondary	5399	63.6	34	1.2	1.2
Higher	1747	59.7	37.7	0.7	1.9
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	67.8	29.8	1	1.4
No	4283	64.5	33	1.1	1.4
 URBANISATION					
Metropolitan	2305	59	38.2	1.3	1.4
Urban	5424	66.3	31.5	1.1	1.2
Rural	4564	70.9	26.5	0.9	1.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	66.2	31.8	0.6	1.4
Employee	5748	67.4	30	1.3	1.3
Manual worker	1918	69.2	28.2	1.2	1.4
Not working	2136	62.9	34.6	0.7	1.8

Table 13a. Ecstasy should (continue to) be banned or regulated – *by country*

QUESTION: Q5_B. Do you think the following substances should (continue to) be banned or regulated? - Ecstasy





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	94.1	5.1	0.2	0.6
COUNTRY					
 Belgium	500	95.6	3.6	0.1	0.6
 Bulgaria	502	92	7.2	0.4	0.4
 Czech Rep.	505	79.8	16.8	1.6	1.8
 Denmark	503	97.3	1.7	0.3	0.7
 Germany	517	97.1	2.5	0	0.5
 Estonia	250	93.7	5.2	0.5	0.6
 Greece	500	89.7	8.9	0.8	0.6
 Spain	500	93	6.3	0	0.7
 France	504	98.2	1.8	0	0
 Ireland	500	94	5.5	0	0.5
 Italy	500	95.8	2.4	0.2	1.6
 Cyprus	252	90	9.1	0.6	0.4
 Latvia	504	91.1	7.2	0.1	1.5
 Lithuania	501	97.1	2.2	0.3	0.4
 Luxembourg	250	94.4	2.9	2.1	0.6
 Hungary	500	92.7	5.5	0.4	1.4
 Malta	250	91.5	7.5	0	1
 Netherlands	503	83.7	15.7	0	0.6
 Austria	500	95.8	3.9	0	0.3
 Poland	501	95.3	3.7	0.4	0.6
 Portugal	507	89.3	8.3	0.6	1.7
 Romania	505	94.6	4.5	0	0.8
 Slovenia	251	89.3	9.7	1	0
 Slovakia	501	92.5	5.9	0.5	1.1
 Finland	502	95	4	0.4	0.6
 Sweden	504	96.8	2.5	0	0.8
 United Kingdom	500	90.7	9.3	0	0

Table 13b. Ecstasy should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_B. Do you think the following substances should (continue to) be banned or regulated? - Ecstasy







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	94.1	5.1	0.2	0.6
 SEX					
Male	6292	92.7	6.5	0.2	0.6
Female	6020	95.5	3.7	0.1	0.6
 AGE					
15 - 18	4735	94.8	4.4	0.2	0.6
19 - 21	3736	94	5.3	0.1	0.5
22 - 24	3841	93.3	5.9	0.2	0.6
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	95	4.3	0.1	0.6
Secondary	5399	93.7	5.4	0.2	0.8
Higher	1747	93.8	5.8	0.1	0.3
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	94.1	5	0.2	0.7
No	4283	94	5.4	0.1	0.4
 URBANISATION					
Metropolitan	2305	93	6.1	0.3	0.6
Urban	5424	93.7	5.6	0.2	0.6
Rural	4564	95.1	4.1	0.1	0.6
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	93.9	5.8	0.1	0.2
Employee	5748	94.2	4.9	0.1	0.8
Manual worker	1918	95.8	3.4	0.2	0.6
Not working	2136	93.6	5.9	0.1	0.4

Table 14a. Alcohol should (continue to) be banned or regulated – *by country*

QUESTION: Q5_C. Do you think the following substances should (continue to) be banned or regulated? - Alcohol





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	8.8	87.4	3	0.8
COUNTRY					
 Belgium	500	4.6	86	9	0.4
 Bulgaria	502	7.2	90.7	2.1	0
 Czech Rep.	505	9.2	83.6	6.5	0.7
 Denmark	503	1.2	72.1	24.9	1.9
 Germany	517	4.4	92.7	2.9	0
 Estonia	250	5	91.6	2.1	1.2
 Greece	500	5.8	91	3	0.2
 Spain	500	13.6	85.2	0.5	0.8
 France	504	7.6	90.2	2	0.1
 Ireland	500	3.8	95.8	0	0.5
 Italy	500	14.6	75.1	6.1	4.2
 Cyprus	252	8.9	90.2	0.6	0.4
 Latvia	504	13.6	82.7	2.1	1.6
 Lithuania	501	10	88.5	1.4	0.1
 Luxembourg	250	8.8	85.7	5.2	0.3
 Hungary	500	7.2	83.3	7	2.5
 Malta	250	7.3	85.6	5.8	1.4
 Netherlands	503	1.3	96.4	1.7	0.6
 Austria	500	5.9	91.2	2.5	0.4
 Poland	501	9.3	88.6	2	0.1
 Portugal	507	12	85	2.7	0.3
 Romania	505	21.8	74.4	1.5	2.3
 Slovenia	251	6.5	92.9	0.3	0.3
 Slovakia	501	14.8	80.1	4	1.2
 Finland	502	4.6	85	9.1	1.3
 Sweden	504	7.2	85.9	5.6	1.2
 United Kingdom	500	7.6	92.4	0	0

Table 14b. Alcohol should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_C. Do you think the following substances should (continue to) be banned or regulated? - Alcohol







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	8.8	87.4	3	0.8
 SEX					
Male	6292	6.6	89.2	3.4	0.8
Female	6020	11.1	85.5	2.5	0.9
 AGE					
15 - 18	4735	9.3	87	2.9	0.8
19 - 21	3736	8.2	87.7	3.2	1
22 - 24	3841	8.9	87.6	2.8	0.7
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	9.5	86.6	3.2	0.7
Secondary	5399	8.5	87.6	3	0.9
Higher	1747	7.2	88.9	3	0.9
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	8.8	86.9	3.2	1.1
No	4283	8.9	88.2	2.5	0.4
 URBANISATION					
Metropolitan	2305	8.2	88.1	3.4	0.4
Urban	5424	7.9	88.9	2.3	0.9
Rural	4564	10.3	85.3	3.5	0.9
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	8.6	87.3	3.1	1.1
Employee	5748	7.1	89.3	2.9	0.7
Manual worker	1918	10.6	84.8	3.6	1
Not working	2136	12.3	83.7	3	0.9

Table 15a. Tobacco should (continue to) be banned or regulated – *by country*

QUESTION: Q5_D. Do you think the following substances should (continue to) be banned or regulated? - Tobacco





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	17.8	78.9	2.6	0.7
COUNTRY					
 Belgium	500	17.7	72.7	8.8	0.8
 Bulgaria	502	9.3	88.5	2.1	0.1
 Czech Rep.	505	15.9	76.8	6.8	0.6
 Denmark	503	11.2	68.9	18.3	1.6
 Germany	517	11.2	87	1.6	0.2
 Estonia	250	13.5	84.1	1.5	0.9
 Greece	500	12.4	84.1	3.5	0
 Spain	500	24.9	74.1	0.5	0.5
 France	504	13.6	83	2.9	0.6
 Ireland	500	20.1	79.6	0	0.2
 Italy	500	17	76.1	4.1	2.8
 Cyprus	252	20.1	78.3	1.2	0.4
 Latvia	504	21.7	74.1	3.2	1.1
 Lithuania	501	15.2	83.1	1.5	0.1
 Luxembourg	250	15.9	78.3	5.4	0.3
 Hungary	500	15.7	75.8	6.2	2.3
 Malta	250	11.8	81.6	4.9	1.7
 Netherlands	503	8.5	89.1	1.8	0.6
 Austria	500	9.1	88.3	1.8	0.9
 Poland	501	16.8	81.5	1.7	0
 Portugal	507	18.9	78	2.6	0.5
 Romania	505	31.2	66.1	0.9	1.7
 Slovenia	251	8.1	91	0.9	0
 Slovakia	501	21.6	73.4	3.8	1.2
 Finland	502	13.9	77.3	8	0.7
 Sweden	504	26.5	65.9	6.9	0.7
 United Kingdom	500	27.2	72.6	0.2	0

Table 15b. Tobacco should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_D. Do you think the following substances should (continue to) be banned or regulated? - Tobacco







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	17.8	78.9	2.6	0.7
 SEX					
Male	6292	18	78.7	2.8	0.5
Female	6020	17.6	79.1	2.4	0.9
 AGE					
15 - 18	4735	20.5	76.8	2.1	0.7
19 - 21	3736	15.7	80.7	2.6	0.9
22 - 24	3841	16.5	79.8	3.1	0.6
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	20.6	76.4	2.4	0.6
Secondary	5399	16.4	80.1	2.7	0.8
Higher	1747	16	80.2	2.9	0.9
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	19.5	77.2	2.4	0.9
No	4283	14.7	82.1	2.8	0.4
 URBANISATION					
Metropolitan	2305	16.7	79.1	3.5	0.7
Urban	5424	17.8	79.7	1.8	0.7
Rural	4564	18.4	77.9	3	0.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	20.4	76.4	2.2	1
Employee	5748	17.2	80	2.2	0.6
Manual worker	1918	17.8	77.7	3.5	1
Not working	2136	18.9	77.1	3.4	0.6

Table 16a. Cocaine should (continue to) be banned or regulated – *by country*

QUESTION: Q5_E. Do you think the following substances should (continue to) be banned or regulated? - Cocaine





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	95.3	4.2	0.2	0.3
COUNTRY					
 Belgium	500	97.4	1.9	0.1	0.5
 Bulgaria	502	95.8	3.8	0.4	0
 Czech Rep.	505	92.3	6.2	0.7	0.8
 Denmark	503	96.2	2.7	0.3	0.8
 Germany	517	96.7	3	0.3	0
 Estonia	250	97	2.4	0	0.6
 Greece	500	94.8	4.2	1	0
 Spain	500	93	6.3	0	0.7
 France	504	97.1	2.9	0	0
 Ireland	500	94.8	5.2	0	0
 Italy	500	96.3	2.3	0.2	1.2
 Cyprus	252	92.3	6.8	0.6	0.4
 Latvia	504	96	2.3	0	1.7
 Lithuania	501	98.2	1.2	0.3	0.3
 Luxembourg	250	95.6	2.4	1.4	0.6
 Hungary	500	97	1.6	0.3	1.1
 Malta	250	90.4	6.9	0.3	2.3
 Netherlands	503	88.3	10.9	0.3	0.5
 Austria	500	96.7	2.6	0.2	0.5
 Poland	501	95.6	3.9	0.1	0.4
 Portugal	507	94	5.2	0.3	0.5
 Romania	505	98.2	1.4	0.2	0.3
 Slovenia	251	93.7	5.9	0.4	0
 Slovakia	501	97	1.9	0.4	0.6
 Finland	502	96.8	2.8	0.2	0.2
 Sweden	504	98.1	1.9	0	0
 United Kingdom	500	91.8	8	0.2	0

Table 16b. Cocaine should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_E. Do you think the following substances should (continue to) be banned or regulated? - Cocaine







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	95.3	4.2	0.2	0.3
 SEX					
Male	6292	94.5	4.9	0.3	0.3
Female	6020	96.1	3.4	0.1	0.4
 AGE					
15 - 18	4735	96.1	3.5	0.1	0.4
19 - 21	3736	95.3	4.1	0.3	0.2
22 - 24	3841	94.3	5.2	0.2	0.3
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	96.1	3.5	0.1	0.3
Secondary	5399	95.6	3.8	0.2	0.4
Higher	1747	93.4	6	0.3	0.3
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	95.6	3.9	0.1	0.4
No	4283	94.7	4.7	0.4	0.2
 URBANISATION					
Metropolitan	2305	94.6	4.9	0.1	0.4
Urban	5424	95.4	4.2	0.2	0.2
Rural	4564	95.5	3.8	0.3	0.4
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	95	4.6	0.2	0.3
Employee	5748	95.7	3.8	0.2	0.4
Manual worker	1918	95	4.5	0.1	0.5
Not working	2136	95.4	4.3	0.1	0.2

Table 17a. Heroin should (continue to) be banned or regulated – *by country*

QUESTION: Q5_F. Do you think the following substances should (continue to) be banned or regulated? - Heroin





























	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
 EU27	12312	96.7	2.9	0.1	0.4
COUNTRY					
 Belgium	500	98	1.3	0.1	0.5
 Bulgaria	502	95.6	4	0.4	0
 Czech Rep.	505	94.4	4.8	0.4	0.4
 Denmark	503	97.2	1.7	0.3	0.8
 Germany	517	97.5	2.5	0	0
 Estonia	250	97.6	1.8	0	0.6
 Greece	500	96.5	2.9	0.6	0
 Spain	500	94.8	4.5	0	0.7
 France	504	98.6	1.3	0	0.1
 Ireland	500	96.5	3.3	0	0.2
 Italy	500	96.7	2.2	0	1.2
 Cyprus	252	93.7	5.4	0.6	0.4
 Latvia	504	97.1	1.4	0	1.5
 Lithuania	501	98.4	1	0.3	0.3
 Luxembourg	250	96.5	1.7	1.4	0.3
 Hungary	500	97.5	1.6	0.2	0.8
 Malta	250	92	6.2	0	1.7
 Netherlands	503	91	8.3	0	0.7
 Austria	500	96.6	2.6	0.2	0.7
 Poland	501	96.4	3.2	0	0.4
 Portugal	507	95	4.3	0.2	0.5
 Romania	505	99.2	0.3	0.2	0.3
 Slovenia	251	95.9	4.1	0	0
 Slovakia	501	97.7	1.4	0.3	0.6
 Finland	502	97.5	2.1	0.2	0.2
 Sweden	504	97.9	1.9	0	0.2
 United Kingdom	500	95.9	4.1	0	0

Table 17b. Heroin should (continue to) be banned or regulated – *by segment*

QUESTION: Q5_F. Do you think the following substances should (continue to) be banned or regulated? - Heroin







	Total N	% Should (continue to) be banned	% Be regulated	% Other	% DK/NA
EU27	12312	96.7	2.9	0.1	0.4
 SEX					
Male	6292	96.2	3.5	0	0.3
Female	6020	97.3	2.2	0.1	0.4
 AGE					
15 - 18	4735	97	2.5	0.1	0.5
19 - 21	3736	97	2.7	0.1	0.2
22 - 24	3841	96.1	3.5	0.1	0.3
 HIGHEST LEVEL OF FULL-TIME EDUCATION					
Primary	4522	97.1	2.5	0.1	0.4
Secondary	5399	97.1	2.5	0	0.4
Higher	1747	95	4.7	0	0.3
 CURRENTLY A FULL-TIME STUDENT					
Yes	8024	96.7	2.8	0.1	0.4
No	4283	96.7	3	0.1	0.2
 URBANISATION					
Metropolitan	2305	95.5	3.9	0.1	0.5
Urban	5424	96.9	2.8	0.1	0.2
Rural	4564	97.2	2.3	0.1	0.4
 OCCUPATION OF RESPONDENT/PRIMARY EARNER					
Self-employed	1741	96	3.6	0	0.4
Employee	5748	97.1	2.5	0	0.4
Manual worker	1918	96.8	2.7	0.1	0.4
Not working	2136	96.6	3.1	0.1	0.2

Table 18a. Ease of access to ecstasy (if desired) – *by country*

QUESTION: Q6_A. How difficult would it be for you to get any of the following substances if you wanted to? - Ecstasy





























	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	30.8	25.4	26.3	12.2	5.3
COUNTRY						
 Belgium	500	30	26.9	27.8	8.3	7
 Bulgaria	502	17	16.2	32.6	23.1	11.1
 Czech Rep.	505	22.9	24.1	31.7	18.4	2.9
 Denmark	503	18	28.2	27.2	22.7	3.9
 Germany	517	35.4	31.3	20	11.4	2
 Estonia	250	31.2	34.1	25.2	5.9	3.7
 Greece	500	20.4	30.2	33.4	13.9	2
 Spain	500	17.3	24.6	36.1	15.8	6.1
 France	504	49.9	25.7	17	3	4.4
 Ireland	500	21.6	15.9	34.7	25.9	2
 Italy	500	25.5	21.1	32.1	12.7	8.5
 Cyprus	252	49.1	17.7	18	11.9	3.2
 Latvia	504	19	24.3	31.5	13	12.2
 Lithuania	501	14.4	20.9	47.6	12.3	4.8
 Luxembourg	250	33.7	30.9	24.5	9	1.9
 Hungary	500	15.6	18.5	35.5	13.7	16.8
 Malta	250	21.6	17.7	34.5	14.2	12
 Netherlands	503	30.9	21	27.6	19	1.5
 Austria	500	43.2	23.8	18.6	10.8	3.7
 Poland	501	25.8	31.9	26.4	10.9	5
 Portugal	507	24.8	19.3	33.1	15.5	7.2
 Romania	505	32.3	22.5	19.6	7.9	17.7
 Slovenia	251	25	29.9	26.9	15.1	3.1
 Slovakia	501	27.7	24.5	26.8	14.2	6.7
 Finland	502	44.5	33.8	15.9	3.4	2.5
 Sweden	504	33.1	31.2	22.7	7.5	5.4
 United Kingdom	500	28.1	21.3	30.9	17.5	2.1

Table 18b. Ease of access to ecstasy (if desired) – *by segment*

QUESTION: Q6_A. How difficult would it be for you to get any of the following substances if you wanted to? - Ecstasy







	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	30.8	25.4	26.3	12.2	5.3
 SEX						
Male	6292	28.8	25.4	27.2	13.8	4.7
Female	6020	32.8	25.4	25.4	10.4	5.9
 AGE						
15 - 18	4735	34.8	27.4	23.9	8.5	5.5
19 - 21	3736	27.2	26.3	27.7	14	4.8
22 - 24	3841	29.3	22.2	28.1	14.9	5.5
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	34.7	26.8	24	9.2	5.2
Secondary	5399	28.5	24.7	27.9	13.2	5.7
Higher	1747	27.7	26.3	26.7	15	4.3
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	30.7	27.2	26.6	9.7	5.8
No	4283	31	22.1	25.8	16.7	4.4
 URBANISATION						
Metropolitan	2305	28.5	25.2	26.8	15.5	3.9
Urban	5424	27.2	25.4	29.8	11.9	5.6
Rural	4564	36.1	25.6	22	10.8	5.5
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	28.2	26.5	27.7	12.8	4.8
Employee	5748	30.1	25.3	27.8	11.2	5.7
Manual worker	1918	31	28.5	23.5	11.4	5.6
Not working	2136	32.8	24.1	24.3	14.2	4.6

Table 19a. Ease of access to heroin (if desired) – *by country*

QUESTION: Q6_B. How difficult would it be for you to get any of the following substances if you wanted to? - Heroin





























	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	42	30.2	15.7	6.9	5.2
COUNTRY						
 Belgium	500	44.8	29.3	14.3	3.5	8.1
 Bulgaria	502	22.4	20.9	25.7	19.7	11.4
 Czech Rep.	505	49.4	27.6	11	9.4	2.6
 Denmark	503	28.7	32.2	19.8	15.2	4
 Germany	517	42.6	36	13.4	5.5	2.5
 Estonia	250	45.6	34	13	3.7	3.7
 Greece	500	30.2	33.1	23.7	11.8	1.2
 Spain	500	21.4	36.5	26.1	10.8	5.2
 France	504	56.7	29.2	9.8	1.1	3.2
 Ireland	500	38.1	29	18.7	10.6	3.6
 Italy	500	35.7	25.6	22.5	7.5	8.6
 Cyprus	252	52.3	20.6	15.1	9	3
 Latvia	504	35.3	32.5	14.8	5.2	12.2
 Lithuania	501	22.2	29.5	34.9	6.6	6.8
 Luxembourg	250	43.5	32.6	13.6	8.7	1.5
 Hungary	500	33.8	27.1	15.5	5.3	18.3
 Malta	250	25.6	27.4	22.5	9.9	14.7
 Netherlands	503	46.5	30	13.3	8	2.1
 Austria	500	54.1	26.3	9.5	6.9	3.2
 Poland	501	37.6	34.6	15.5	7.4	4.9
 Portugal	507	34.3	28.9	19.2	7.9	9.6
 Romania	505	38.8	25.9	12	5.3	18
 Slovenia	251	41.4	34.3	13.2	9.6	1.5
 Slovakia	501	46.4	31	9.2	7.3	6.1
 Finland	502	59.6	31.1	6.1	1	2.1
 Sweden	504	40.5	33.7	14.4	5.9	5.4
 United Kingdom	500	49.2	24.6	15.1	9.7	1.4

Table 19b. Ease of access to heroin (if desired) – *by segment*

QUESTION: Q6_B. How difficult would it be for you to get any of the following substances if you wanted to? - Heroin







	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	42	30.2	15.7	6.9	5.2
 SEX						
Male	6292	41.8	31.2	15.1	7.1	4.8
Female	6020	42.1	29.1	16.3	6.8	5.6
 AGE						
15 - 18	4735	45.2	29.9	15.2	4.8	4.9
19 - 21	3736	40.5	31.8	16.3	6.8	4.7
22 - 24	3841	39.4	29.1	15.8	9.8	5.9
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	44.3	30.2	15.5	5.2	4.8
Secondary	5399	40.9	29.8	16.2	7.7	5.5
Higher	1747	41.3	31.6	14.5	7.2	5.3
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	42.2	31	16.1	5.3	5.4
No	4283	41.5	28.7	15.1	10	4.7
 URBANISATION						
Metropolitan	2305	39.7	30.1	17.3	9.1	3.8
Urban	5424	38.9	32.1	16.6	6.5	5.8
Rural	4564	46.6	28.1	13.9	6.4	5
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	41.9	31.3	15.6	6.2	5
Employee	5748	41.3	30.7	16	6.3	5.7
Manual worker	1918	41.1	30.6	16.6	6.1	5.6
Not working	2136	42.8	29.6	14.7	9	3.9

Table 20a. Ease of access to cocaine (if desired) – *by country*

QUESTION: Q6_C. How difficult would it be for you to get any of the following substances if you wanted to? - Cocaine





























	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	35.3	26.4	22.4	11.1	4.8
COUNTRY						
 Belgium	500	39.9	26.4	22.4	4.3	7
 Bulgaria	502	23.1	22.3	24.7	19.2	10.7
 Czech Rep.	505	49.3	25	13.3	10.3	2.2
 Denmark	503	23	26.9	24.1	21.2	4.8
 Germany	517	39.8	32.7	16.6	8.8	2
 Estonia	250	46.2	33.2	13.6	3.2	3.7
 Greece	500	26.3	35.9	23	13.3	1.6
 Spain	500	13.1	21.1	42.6	19.3	3.9
 France	504	51.4	24	16.6	5	3.1
 Ireland	500	22.7	18.6	33.1	23.8	1.8
 Italy	500	26.5	20	33.6	12.1	7.8
 Cyprus	252	51.8	22.3	13.3	9.8	3
 Latvia	504	33.3	29.2	18.8	5.9	12.7
 Lithuania	501	22.2	32.4	32.3	6.6	6.5
 Luxembourg	250	37.2	29.6	21.7	8.8	2.7
 Hungary	500	33.5	29.7	14.3	4.9	17.6
 Malta	250	22.9	20.9	30.6	12.3	13.2
 Netherlands	503	36.2	25.9	21	15.5	1.4
 Austria	500	49.6	25.7	14.4	7.1	3.2
 Poland	501	36.5	34.4	15.9	7.7	5.5
 Portugal	507	33	28.1	21.6	9.8	7.5
 Romania	505	38.4	27.8	10.2	5.3	18.3
 Slovenia	251	38.3	35.6	14.2	10.3	1.5
 Slovakia	501	49.1	28.4	9.3	7.4	5.8
 Finland	502	55.5	33.5	7.8	1.1	2.2
 Sweden	504	38.1	32.5	17.7	6.6	5.1
 United Kingdom	500	27.8	20.3	30.4	20.3	1.2

Table 20b. Ease of access to cocaine (if desired) – *by segment*

QUESTION: Q6_C. How difficult would it be for you to get any of the following substances if you wanted to? - Cocaine







	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	35.3	26.4	22.4	11.1	4.8
 SEX						
Male	6292	34.7	26.9	22	12.1	4.3
Female	6020	36	25.9	22.7	10	5.3
 AGE						
15 - 18	4735	38.1	27.5	22.5	6.9	4.9
19 - 21	3736	33.5	26.9	22.6	12.8	4.2
22 - 24	3841	33.6	24.6	22	14.6	5.2
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	37.6	27.6	22.2	7.8	4.9
Secondary	5399	34.5	25.4	22.9	12.3	5
Higher	1747	33.5	26.8	21.2	14.5	4
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	36.3	28	22	8.4	5.3
No	4283	33.4	23.5	23	16.1	3.9
 URBANISATION						
Metropolitan	2305	35.7	25.6	22.1	13.1	3.6
Urban	5424	32	27.2	24.1	11.6	5.2
Rural	4564	39	25.9	20.5	9.6	4.9
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	34.1	29.5	20.2	11.4	4.8
Employee	5748	34.7	26.3	23.2	10.5	5.3
Manual worker	1918	35.4	27.4	22.4	10	4.8
Not working	2136	36.9	24.9	21.9	12.5	3.8

Table 21a. Ease of access to cannabis (if desired) – *by country*

QUESTION: Q6_D. How difficult would it be for you to get any of the following substances if you wanted to? - Cannabis





























	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	18.6	14.9	31	32	3.6
COUNTRY						
 Belgium	500	15	12.6	35.5	33.1	3.8
 Bulgaria	502	13.1	12.8	31.9	32.1	10.1
 Czech Rep.	505	8	8.5	25.8	56.2	1.4
 Denmark	503	11.3	14.6	26.7	42.4	5
 Germany	517	22.6	18.6	28.2	29.7	0.7
 Estonia	250	15.4	25.5	40.3	16.2	2.6
 Greece	500	15.3	24.4	32.3	26.5	1.5
 Spain	500	6.1	8.6	34.1	48.3	2.9
 France	504	22.1	15.5	35.9	24.4	2
 Ireland	500	11.1	10.4	32.1	44.6	1.8
 Italy	500	9.7	8.7	37.5	40	4.2
 Cyprus	252	43.7	20.6	20.6	12	3.1
 Latvia	504	20.3	18.5	31.2	19.2	10.8
 Lithuania	501	11.1	15.6	40.7	28	4.6
 Luxembourg	250	17.1	10.9	30.2	40.7	1
 Hungary	500	14.7	12.6	37.9	19.2	15.6
 Malta	250	20.2	18.2	28.8	19.7	13.1
 Netherlands	503	16.6	11.3	26	44.5	1.6
 Austria	500	31.3	18.8	25.3	21.9	2.7
 Poland	501	23.1	20.9	28.4	22.5	5
 Portugal	507	19.7	17.8	36.3	20.1	6.2
 Romania	505	34.6	20.2	19.8	7.8	17.6
 Slovenia	251	18.5	13.6	27.2	40.2	0.5
 Slovakia	501	14.4	11.5	33.9	35.7	4.4
 Finland	502	36.8	25.1	28	9.3	0.8
 Sweden	504	29	25.5	26.9	13.2	5.3
 United Kingdom	500	16	10.2	28.7	44.7	0.5

Table 21b. Ease of access to cannabis (if desired) – *by segment*

QUESTION: Q6_D. How difficult would it be for you to get any of the following substances if you wanted to? - Cannabis







	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	18.6	14.9	31	32	3.6
 SEX						
Male	6292	15.9	14.1	31.6	35	3.3
Female	6020	21.3	15.7	30.3	28.8	3.9
 AGE						
15 - 18	4735	23.1	17.7	28.8	26.3	4
19 - 21	3736	14.8	13.9	33	34.9	3.5
22 - 24	3841	16.6	12.4	31.6	36.1	3.3
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	22.8	18.6	27.8	26.9	3.9
Secondary	5399	16.6	12.3	32.9	34.5	3.7
Higher	1747	13.5	13.3	33	37.6	2.6
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	18.8	15.8	31.8	29.5	4.2
No	4283	18	13.2	29.4	36.7	2.6
 URBANISATION						
Metropolitan	2305	15.8	14.5	31.6	35	3.2
Urban	5424	15.7	13.8	32.3	34.3	3.9
Rural	4564	23.3	16.4	29.1	27.7	3.4
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	19.3	13.2	29.8	34.7	3
Employee	5748	17.6	14.6	32.2	31.9	3.7
Manual worker	1918	18.3	18.6	31.4	27.3	4.4
Not working	2136	19.3	13.4	29.8	34.3	3.2

Table 22a. Ease of access to alcohol (if desired) – *by country*

QUESTION: Q6_E. How difficult would it be for you to get any of the following substances if you wanted to? - Alcohol





























	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	1.2	1.9	16.8	79.5	0.6
COUNTRY						
 Belgium	500	0.4	0.4	13.3	85.2	0.6
 Bulgaria	502	0.3	0.6	7.5	91.2	0.4
 Czech Rep.	505	2.3	3	11.9	82.2	0.6
 Denmark	503	0.6	0.3	5	93.3	0.8
 Germany	517	0.8	0.9	18.3	80	0
 Estonia	250	0	1.6	25.1	72.2	1.1
 Greece	500	1.2	3.1	21.7	74.1	0
 Spain	500	1	1.5	11.4	84.8	1.3
 France	504	1.3	2.8	25	70.5	0.4
 Ireland	500	0.3	1.5	10.1	87.4	0.6
 Italy	500	0.7	0.6	11.9	85.7	1.1
 Cyprus	252	9.5	6.9	29.7	52.8	1.1
 Latvia	504	0.4	0.7	13.2	84.5	1.1
 Lithuania	501	0.3	1.7	13	84.5	0.5
 Luxembourg	250	1.2	1.2	11	86.3	0.3
 Hungary	500	0	0.6	15.3	82.4	1.8
 Malta	250	1.4	1.5	13.7	83.5	0
 Netherlands	503	0.3	0.9	4.7	93.8	0.4
 Austria	500	3.2	1.6	10.5	84.4	0.4
 Poland	501	0.4	2.6	19	77.3	0.7
 Portugal	507	1.5	2.1	24.6	71.6	0.2
 Romania	505	3.3	3.4	24	67	2.2
 Slovenia	251	1.8	1.9	12.5	83.9	0
 Slovakia	501	1.6	2.1	13.6	81.1	1.6
 Finland	502	1.8	4.7	17.9	75.6	0
 Sweden	504	1.5	2.2	24.7	71.4	0.2
 United Kingdom	500	2.1	2.7	14.4	80.6	0.2

Table 22b. Ease of access to alcohol (if desired)– *by segment*

QUESTION: Q6_E. How difficult would it be for you to get any of the following substances if you wanted to? - Alcohol







	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	1.2	1.9	16.8	79.5	0.6
 SEX						
Male	6292	1.2	2	15.8	80.6	0.4
Female	6020	1.2	1.8	17.8	78.4	0.8
 AGE						
15 - 18	4735	1.9	3.7	23.2	70.4	0.8
19 - 21	3736	0.8	1.1	13.1	84.4	0.6
22 - 24	3841	0.7	0.5	12.4	86	0.4
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	1.9	3.9	23.7	69.8	0.8
Secondary	5399	0.8	0.8	12.4	85.5	0.5
Higher	1747	0.7	0.4	12.2	86.1	0.6
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	1.5	2.4	18.1	77.2	0.8
No	4283	0.6	0.9	14.3	83.9	0.2
 URBANISATION						
Metropolitan	2305	1.2	1.5	15.4	81.6	0.3
Urban	5424	1	1.7	15.7	81	0.6
Rural	4564	1.3	2.4	18.8	76.8	0.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	1.8	2.2	14.1	81.4	0.6
Employee	5748	1.2	1.7	15.6	80.9	0.7
Manual worker	1918	1	2.5	22.1	73.9	0.6
Not working	2136	1.1	1.2	17.3	79.9	0.5

Table 23a. Ease of access to tobacco (if desired) – *by country*

QUESTION: Q6_F. How difficult would it be for you to get any of the following substances if you wanted to? - Tobacco



































	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
 EU27	12312	1.4	2.1	15	80.9	0.6
COUNTRY						
 Belgium	500	1	1.2	11.8	85.3	0.8
 Bulgaria	502	0.5	0.4	7.2	91.5	0.4
 Czech Rep.	505	2.7	2.5	12.1	82	0.6
 Denmark	503	0.6	0.1	4.9	93.6	0.8
 Germany	517	0.7	2.5	17.7	79.1	0
 Estonia	250	0.3	1.9	22.7	74.2	0.8
 Greece	500	1	4	18.1	76.9	0
 Spain	500	1	1.2	9.8	86.6	1.3
 France	504	1	2.8	19	76.8	0.4
 Ireland	500	1	1.1	9.4	87.9	0.6
 Italy	500	0.9	0.5	9.9	87.4	1.3
 Cyprus	252	12.7	8.5	22.5	55.3	1.1
 Latvia	504	0.4	0.7	12.1	85.3	1.4
 Lithuania	501	0.3	1.8	12.9	84.5	0.5
 Luxembourg	250	1	1.4	9.5	87.7	0.3
 Hungary	500	0	0.9	15.4	82	1.8
 Malta	250	1.7	1.5	13.6	83.2	0
 Netherlands	503	0.4	0.7	6.2	92.4	0.4
 Austria	500	2.4	1.8	9.5	85.6	0.6
 Poland	501	0.8	3.1	16.5	78.9	0.7
 Portugal	507	1.8	2.1	23.1	72.8	0.2
 Romania	505	3.6	3.5	21.3	69.2	2.4
 Slovenia	251	2.5	2.4	10.3	84.8	0
 Slovakia	501	1.6	1.6	13	82.2	1.6
 Finland	502	1.6	4.7	15.4	78.3	0
 Sweden	504	1.8	3.3	17.6	77.3	0
 United Kingdom	500	2.7	2.1	15.5	79.6	0.2

Table 23b. Ease of access to tobacco (if desired) – *by segment*

QUESTION: Q6_F. How difficult would it be for you to get any of the following substances if you wanted to? - Tobacco

	Total N	% Very difficult	% Fairly difficult	% Fairly easy	% Very easy	% DK/NA
EU27	12312	1.4	2.1	15	80.9	0.6
 SEX						
Male	6292	1.3	2.3	14	81.9	0.4
Female	6020	1.4	2	16	79.8	0.8
 AGE						
15 - 18	4735	2.2	4.4	20.6	71.9	0.8
19 - 21	3736	0.8	0.9	11.7	85.9	0.7
22 - 24	3841	0.8	0.5	11.3	87.1	0.3
 HIGHEST LEVEL OF FULL-TIME EDUCATION						
Primary	4522	2.2	4.6	21.1	71.2	0.8
Secondary	5399	1	0.8	10.8	86.9	0.6
Higher	1747	0.5	0.3	11.7	86.8	0.6
 CURRENTLY A FULL-TIME STUDENT						
Yes	8024	1.7	2.8	16.1	78.5	0.8
No	4283	0.7	0.9	12.9	85.3	0.3
 URBANISATION						
Metropolitan	2305	0.9	1.5	14.2	83	0.3
Urban	5424	1.1	1.9	14.2	82.2	0.7
Rural	4564	1.8	2.7	16.3	78.4	0.7
 OCCUPATION OF RESPONDENT/PRIMARY EARNER						
Self-employed	1741	2.8	1.7	13.6	81.2	0.7
Employee	5748	1.3	2.1	14	82	0.7
Manual worker	1918	0.8	3.5	18.3	76.8	0.6
Not working	2136	1.2	0.8	15.2	82.2	0.6

II. Survey Details

This survey on “Young People and Drugs” was conducted for the European Commission, DG Justice, Freedom and Security.

Telephone interviews were conducted in each country between the 14/05/2008 and 18/05/2008 by the following institutes:

Belgium	BE	Gallup Europe	(Interviews : 14/05/2008 -18/05/2008)
Czech Republic	CZ	Focus Agency	(Interviews : 14/05/2008 -18/05/2008)
Denmark	DK	Hermelin	(Interviews : 14/05/2008 -18/05/2008)
Germany	DE	IFAK	(Interviews : 14/05/2008 -17/05/2008)
Estonia	EE	Saar Poll	(Interviews : 14/05/2008 -18/05/2008)
Greece	EL	Metroanalysis	(Interviews : 14/05/2008 -18/05/2008)
Spain	ES	Gallup Spain	(Interviews : 14/05/2008 -18/05/2008)
France	FR	Efficienc3	(Interviews : 14/05/2008 -15/05/2008)
Ireland	IE	Gallup UK	(Interviews : 14/05/2008 -18/05/2008)
Italy	IT	Demoskopea	(Interviews : 14/05/2008 -16/05/2008)
Cyprus	CY	CYMAR	(Interviews : 14/05/2008 -17/05/2008)
Latvia	LV	Latvian Facts	(Interviews : 14/05/2008 -18/05/2008)
Lithuania	LT	Baltic Survey	(Interviews : 14/05/2008 -18/05/2008)
Luxembourg	LU	Gallup Europe	(Interviews : 14/05/2008 -18/05/2008)
Hungary	HU	Gallup Hungary	(Interviews : 14/05/2008 -17/05/2008)
Malta	MT	MISCO	(Interviews : 14/05/2008 -16/05/2008)
Netherlands	NL	Telder	(Interviews : 14/05/2008 -18/05/2008)
Austria	AT	Spectra	(Interviews : 14/05/2008 -18/05/2008)
Poland	PL	Gallup Poland	(Interviews : 14/05/2008 -17/05/2008)
Portugal	PT	Consulmark	(Interviews : 14/05/2008 -18/05/2008)
Slovenia	SI	Cati d.o.o.	(Interviews : 14/05/2008 -17/05/2008)
Slovakia	SK	Focus Agency	(Interviews : 14/05/2008 -18/05/2008)
Finland	FI	Hermelin	(Interviews : 14/05/2008 -18/05/2008)
Sweden	SE	Hermelin	(Interviews : 14/05/2008 -18/05/2008)
United Kingdom	UK	Gallup UK	(Interviews : 14/05/2008 -18/05/2008)
Bulgaria	BG	Vitosh Research	(Interviews : 14/05/2008 -16/05/2008)
Romania	RO	Gallup Romania	(Interviews : 14/05/2008 -17/05/2008)

Representativeness of the results

Each national sample is representative of the general population between 15 and 24 years of age.

Sizes of the sample

In each EU country the target sample size was 500 respondents, except in Luxembourg, Cyprus, Estonia, Slovenia and Malta, where the targeted number of interviews was 250. The table on the following page shows the achieved sample size by country:

A weighting factor was applied to the national results in order to compute a marginal total where each country contributes to the European Union result in proportion to its population.

The table below presents, for each of the countries:

- (1) the number of interviews actually carried out in each country
- (2) the population-weighted total number of interviews for each country

TOTAL INTERVIEWS

	Total Interviews			
	Conducted	% of Total	EU27 Weighted	EU27 % on Total (weighted)
Total	12312	100	12312	100
1 Belgium	500	4.1	272	2.2
2 Czech Rep.	505	4.1	266	2.2
3 Denmark	503	4.1	141	1.1
4 Germany	517	4.2	1906	15.5
5 Estonia	250	2.0	39	0.3
6 Greece	500	4.1	241	2.0
7 Spain	500	4.1	924	7.5
8 France	504	4.1	1682	13.7
9 Ireland	500	4.1	120	1.0
10 Italy	500	4.1	1228	10.0
11 Cyprus	252	2.0	23	0.2
12 Latvia	504	4.1	69	0.6
13 Lithuania	501	4.1	69	0.6
14 Luxembourg	250	2.0	12	0.1
15 Hungary	500	4.1	259	2.1
16 Malta	250	2.0	12	0.1
17 Netherlands	503	4.1	422	3.4
18 Austria	500	4.1	208	1.7
19 Poland	501	4.1	1121	9.1
20 Portugal	507	4.1	241	2.0
21 Slovenia	251	2.0	46	0.4
22 Slovakia	501	4.1	162	1.3
23 Finland	502	4.1	139	1.1
24 Sweden	504	4.1	267	2.2
25 UK	500	4.1	1654	13.4
26 Bulgaria	502	4.1	192	1.6
28 Romania	505	4.1	596	4.8

Questionnaires

1. The questionnaire prepared for this survey is reproduced at the end of this results volume, in English (see hereafter).
2. The institutes listed above translated the questionnaire in their respective national language(s).
3. One copy of each national questionnaire is annexed to the data tables' result volumes.

Tables of results**VOLUME A: COUNTRY BY COUNTRY**

The VOLUME A presents the European Union results country by country.

VOLUME B: RESPONDENTS' DEMOGRAPHICS

The VOLUME B presents the European Union results with the following socio-demographic characteristics of respondents as breakdowns:

Volume B:

Sex (Male, Female)

Age (15-18, 19-21, 22-24)

Highest level of full-time education (Primary education, Secondary education, Higher education)

Are you currently a full-time student? (Yes, No)

Subjective urbanisation (Metropolitan zone, Other town/urban centre, Rural zone)

Occupation of respondent/primary earner (Self-employed, Employee, Manual worker, Not working)

Sampling error

The results in a survey are valid only between the limits of a statistical margin caused by the sampling process. This margin varies with three factors:

1. The sample size (or the size of the analysed part in the sample): the greater the number of respondents is, the smaller the statistical margin will be;
2. The result in itself: the closer the result approaches 50%, the wider the statistical margin will be;
3. The desired degree of confidence: the more "strict" we are, the wider the statistical margin will be.

As an example, examine this illustrative case:

1. One question has been answered by 500 people;
2. The analysed result is around 50%;
3. We choose a significance level of 95 % (it is the level most often used by the statisticians, and it is the one chosen for the Table hereafter);

In this illustrative case the statistical margin is: (+/- 4.4%) around the observed 50%. And as a conclusion: the result for the whole population lies between 45.6% and 54.4 %.

Hereafter, the statistical margins computed for various observed results are shown, on various sample sizes, at the 95% significance level.

STATISTICAL MARGINS DUE TO THE SAMPLING PROCESS (AT THE 95 % LEVEL OF CONFIDENCE)

Various sample sizes are in rows;

Various observed results are in columns:

	5%	10%	15%	20%	25%	30%	35%	40%	45%	50%
N=50	6.0	8.3	9.9	11.1	12.0	12.7	13.2	13.6	13.8	13.9
N=500	1.9	2.6	3.1	3.5	3.8	4.0	4.2	4.3	4.4	4.4
N=1000	1.4	1.9	2.2	2.5	2.7	2.8	3.0	3.0	3.1	3.1
N=1500	1.1	1.5	1.8	2.0	2.2	2.3	2.4	2.5	2.5	2.5
N=2000	1.0	1.3	1.6	1.8	1.9	2.0	2.1	2.1	2.2	2.2
N=3000	0.8	1.1	1.3	1.4	1.5	1.6	1.7	1.8	1.8	1.8
N=4000	0.7	0.9	1.1	1.2	1.3	1.4	1.5	1.5	1.5	1.5
N=5000	0.6	0.8	1.0	1.1	1.2	1.3	1.3	1.4	1.4	1.4
N=6000	0.6	0.8	0.9	1.0	1.1	1.2	1.2	1.2	1.3	1.3

III. Questionnaire

D1. Gender

(DO NOT ASK - MARK APPROPRIATE)

Male..... 1
 Female 2

D2. How old are you?

[][] years old
 [99] [REFUSAL/NO ANSWER]

D3_a. What is the last level of full-time education that you completed?

Primary education 1
 Secondary education 2
 Higher education 3
 [NEVER BEEN IN FULL-TIME EDUCATION] 4
 [DK/NA]..... 9

D3_b. Are you currently a full-time student?

Yes..... 1 ASK D4A
 No..... 2 ASK D4B
 [DK/NA]..... 9 ASK D4B

D4A. What is the current occupation of the person who contributes most to the household income? Would you say he/she is self-employed, an employee, a manual worker or would you say that he/she is without a professional activity? Does it mean that he/she is a(n)...

D4B. As far as your current occupation is concerned, would you say you are self-employed, an employee, a manual worker or would you say that you are without a professional activity? Does it mean that you are a(n)...

[IF A RESPONSE TO THE MAIN CATEGORY IS GIVEN, READ OUT THE RESPECTIVE SUB-CATEGORIES - ONE ANSWER ONLY]

- Self-employed

→ i.e. : - farmer, forester, fisherman 11
 - owner of a shop, craftsman 12
 - professional (lawyer, medical practitioner, accountant, architect,...) ... 13
 - manager of a company 14
 - other 15

- Employee

→ i.e. : - professional (employed doctor, lawyer, accountant, architect)..... 21
 - general management, director or top management..... 22
 - middle management 23
 - civil servant..... 24
 - office clerk 25
 - other employee (salesman, nurse, etc...) 26
 - other 27

- Manual worker	
→ i.e. :	
- supervisor / foreman (team manager, etc...)	31
- manual worker	32
- unskilled manual worker	33
- other	34
- Without a professional activity	
→ i.e. :	
- looking after the home	41
- student (full-time)	42
- retired	43
- seeking a job	44
- other	45
- [Refusal]	99
D6.	Would you say you live in a ...?
- metropolitan zone	1
- other town/urban centre	2
- rural zone	3
- [Refusal]	9
Q1.	If you wanted to have more information about illicit drugs and drug use in general, who would you turn to? Please choose up to three.
ROTATE	
- A friend	1
- Parents/ relatives	2
- Someone at school or at work	3
- A doctor, a nurse or another health professional	4
- A social/ youth worker	5
- A specialised drugs counsellor/ centre	6
- The police	7
- A telephone helpline	8
- The Internet	9
- [Others]	10
- [Does not want to have more info]	11
- [It depends]	12
- [None of these]	13
- [DK/NA]	99

Q2. Through which of the following channels – if any - have you been informed about the effects and risks of illicit drug use over the past year? Please choose up to three.

ROTATE

- Through a school prevention programme..... 01
- From friends 02
- From parents/ relatives 03
- Through media campaign(s)..... 04
- From the police..... 05
- Found it on the Internet 06
- Prevention materials from specialised counselling centres 07
- From a drug and/or alcohol telephone helpline 08
- [I have not been informed at all] 09
- [Other] 10
- [DK/NA]..... 99

Q3. To what extent do you think the following substances may pose a risk to a person's health? Does Ecstasy pose a high, medium, low or no risk? How about...

- High risk 1
 - Medium risk 2
 - Low risk..... 3
 - No risk 4
 - DK/NA 9
- Ecstasy 1 2 3 4 9
 - Heroin 1 2 3 4 9
 - Cocaine 1 2 3 4 9
 - Alcohol 1 2 3 4 9
 - Cannabis 1 2 3 4 9
 - Tobacco 1 2 3 4 9

Q4a. What do you think is the most effective way for public authorities to deal with drug problems in society?

- Information and prevention campaigns 1
- Treatment and rehabilitation of drug users..... 2
- Tough measures against drug dealers and traffickers..... 3
- Reduction of poverty/ unemployment 4
- Tough measures against drug users 5
- Legalisation of drugs 6
- [DK/NA]..... 9

Q4b. What would be the second most effective way?

- Information and prevention campaigns 1
- Treatment and rehabilitation of drug users..... 2
- Tough measures against drug dealers and traffickers..... 3
- Reduction of poverty/ unemployment 4
- Tough measures against drug users 5
- Legalisation of drugs 6
- [DK/NA]..... 9

Q5. Drugs such as cannabis, cocaine, ecstasy and heroin are banned in all EU Member States. The sale and consumption of legal substances such as alcohol and tobacco s not prohibited but regulated in most countries.

Do you think the following substances should (continue to) be banned or regulated?

(Examples of regulation are: minimum age limits for consumption, limits in the concentration of active components such as nicotine, licensed sales through specialised shops and pharmacies, etc.)

- Should (Continue to) be banned 1
 - be regulated 2
 - Other 3
 - DK/NA 9
- Cannabis 1 2 3 9
 - Ecstasy 1 2 3 9
 - Alcohol 1 2 3 9
 - Tobacco 1 2 3 9
 - Cocaine 1 2 3 9
 - Heroin 1 2 3 9

Q6. How difficult would it be for you to get hold of any of the following substances if you wanted to: very difficult, fairly difficult, fairly easy or very easy?

- Very difficult 1
 - Fairly difficult 2
 - Fairly easy 3
 - Very easy 4
 - DK/NA 9
- Ecstasy 1 2 3 4 9
 - Heroin 1 2 3 4 9
 - Cocaine 1 2 3 4 9
 - Cannabis 1 2 3 4 9
 - Alcohol 1 2 3 4 9
 - Tobacco 1 2 3 4 9