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Health Canada

Health Concerns

Canadian Alcohol and Drug Use Monitoring Survey

Summary of Results For 2008

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Introduction

The Canadian Alcohol and Drug Use Monitoring Survey (CADUMS) is an on-going general population survey of alcohol and illicit drug use among Canadians aged 15 years and older, that was launched in April 2008. Derived from and similar to the Canadian Addiction Survey (CAS) of 2004, CADUMS is designed to provide detailed national and provincial estimates of alcohol and drug-related behaviours and outcomes.

The results for 2008 are based on telephone interviews with 16,672 respondents, across all 10 provinces, who represent approximately 25,957,435 Canadian residents, aged 15 years and older. In the table below, selected results from CADUMS 2008 are compared with the results from CAS 2004, to indicate how the situation has changed in recent years. Also, a discussion of the results from CADUMS 2008, [detailed tables](#) and some [definitions](#) used in this report are provided.

Selected comparisons with the results from the Canadian Addiction Survey (CAS) of 2004 are presented, due to similarities in questions and methodology with CADUMS. However, it is important to note that data collection for the CAS took place from December 2003 to March 2004, while CADUMS interviews were conducted from April 2008 to December 2008. Hence, there may be differences in results between the two surveys that are due to seasonal variations.

	CAS 2004 =13,909 %	CADUMS 2008 =16,672 %
Alcohol use		
Lifetime Use	92.8	90.2*
Past 12 month Use	79.3	77.3
Average age of initiation for youth 15 to 24 years	15.6 years	15.6 years
Alcohol pattern of use in past year		

	CAS 2004 =13,909 %	CADUMS 2008 =16,672 %
Abstainer -never in life	7.3	9.9*
Former drinker - abstained in past year	13.7	13.0
Light infrequent drinker	38.7	36.3
Light frequent drinker	27.7	31.5*
Heavy infrequent drinker	5.6	4.2*
Heavy frequent drinker	7.1	5.1*
Alcohol related harms in past year		
Any alcohol harm to self - among drinkers	8.8	8.7
Any alcohol harm to self - among total population	7.1	6.8
Illicit drug use in past year		
Cannabis - lifetime	44.5	43.9
Cannabis - past year	14.1	11.4*
Cannabis - Average age of initiation for youth	15.6 years	15.5 years
Cocaine/Crack	1.9	1.6
Speed	0.8	1.1
Hallucinogens	0.7	2.1* **
Ecstasy	1.1	1.4
Any drug (including cannabis)	14.5	12.1*
Any drug (excl. cannabis)	3.0	3.9
Drug related harms in past year		
Any drug harm to self - among users of any drug	17.5	21.7
Any drug harm to self - among total population	2.8	2.7
N - Sample size		
* Indicates that the difference between the estimates for 2004 and 2008 are statistically significant.		
** Caution is required in comparing the 2004 and 2008 results for hallucinogens, given that the list of substances under hallucinogens was expanded in the 2008 questionnaire to include salvia and "magic mushrooms".		

Detailed Tables:

- [Table 1: Main CADUMS indicators by sex and age - Alcohol](#)
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- [Table 3: Comparison of CAS 2004 and CADUMS 2008 results overall and by sex - Alcohol](#)
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Alcohol

Prevalence and Patterns of Use of Alcohol

Similar to the situation in 2004, most Canadians reported drinking but doing so, in moderation. In 2008, some 77.3% of Canadians aged 15 or older reported consuming alcohol in the previous 12 months, a rate comparable to 79.3% reported in 2004. In 2008, more males than females reported drinking in the past year, (81.4% versus 73.5%, respectively). The prevalence of past-year drinking amongst youth 15 to 24 years of age (78.4%) was relatively close to the estimate for the population over 25 years of age, (77.1%). Across provinces, the rate of current drinking was fairly close to the national average, although notably lower rates are recorded for Newfoundland and Labrador (73.1%) and Nova Scotia (71.6%).

Lifetime alcohol use decreased in 2008 with 90.2% of Canadians reporting that they had drunk alcohol at least once in their life compared with 92.8% in 2004. The average age of first use of alcohol amongst youth, 15 to 24 years old, remained constant at 15.6 years of age.

Compared to 2004, more Canadians in 2008 were either not drinking or, generally, were drinking more moderately. In 2008, 31.5% of Canadians reported drinking once a week or more and usually fewer than 5 drinks when alcohol was used compared to 27.9% in 2004. At the same time, fewer Canadians in 2008 reported heavy drinking (i.e. 5 or more drinks for men, and 4 or more drinks for women) to be their usual consumption whether they be drinking frequently (i.e. once or more times a week on average) or infrequently.

Differences in drinking pattern exist between the sexes and between age groups. Significantly more males than females report heavy infrequent (5.7% versus 2.8%) and heavy frequent (7.9% versus 2.6%) drinking patterns, whereas more females than males are abstainers (12.6% versus 7.0%) or light infrequent drinkers (41.5% versus 30.8%).

The rate of light frequent drinking for adults, 25 years and older, at 34.4% was more than double the rate for youth, 15 to 24 years, at 16.2%, whereas a heavy infrequent drinking pattern was almost five times higher among youth 15 to 24 years of age than adults 25 years and older (12.7% versus 2.6%). The prevalence of heavy frequent drinking amongst youth 15 to 24 years of age at 13.5% was almost four times higher than the rate for adults 25 years and older at 3.6%.

Across provinces, some notable differences in drinking patterns emerged. While the national average prevalence rate of light frequent drinking in 2008 was 31.5%, Quebec had the highest rate in the country at 37.8%, whereas Newfoundland and Labrador had the lowest rate at 18.8% of the population. While Newfoundland and Labrador also had one of the lowest prevalence rates for drinking in the past year, it also had the highest rate of heavy frequent drinking, at 9.4%. In contrast, Quebec had the lowest heavy frequent drinking rate at 3.5%.

Harm from one's own use of alcohol

In 2008, consistent with the lower rate of lifetime use of alcohol, fewer Canadians (17.6%) reported experiencing at least one harm in their lifetime as a result of their alcohol use compared to 2004 (22.4%). This decline in harms was seen amongst adults, where it fell to 16.2% in 2008 compared to 21.2% in 2004, but the rate of lifetime harms reported by 24.8% of youth in 2008 was not significantly different from the rate of 30.6% in 2004. The difference in the prevalence of past year harm from alcohol use in 2008 compared to 2004 was not statistically significant.

Consistent with the differences in drinking patterns that exist between males and females as well as between youth 15 to 24 years of age and adults 25 years and older, males and youth 15 to 24 years of age were more likely than their counterparts to experience harm. Twice as many males as females reported experiencing harm in their lifetime (23.7% versus 11.9%). A higher proportion of males also reported experiencing harm in the past 12 months (8.7% compared to 5.1%). Similarly, youth 15 to 24 years of age also had higher rates of harm than adults 25 years and older in their lifetimes (24.8% versus 16.2%) as well as in the past year (17.9% versus 4.7%). Despite the higher rates of heavy drinking in the Atlantic provinces, respondents in these provinces do not report higher rates of lifetime or past year harms. Rather, higher rates of lifetime harm were reported in Saskatchewan (23.5%) and British Columbia (21.0%).

Illicit Drug Use

Cannabis Use

The prevalence of past-year cannabis use amongst Canadians 15 years of age and older decreased to 11.4% in 2008 compared to 14.1% in 2004. The prevalence of use in 2008 by youth 15 to 24 years of age at 32.7% was more than four times higher than the rate of 7.3% for adults 25 years and older. Although males were more likely than females to report past year cannabis use (14.4% versus 8.6%), the reported use in 2008 was lower for males than it was in 2004 (18.2%). Compared with the national average of 11.4%, the prevalence of past-year use of cannabis was fairly consistent across the provinces.

The average age of initiation for cannabis use amongst youth 15 to 24 years of age was 15.5 years, for 2008 - essentially the same as the age of initiation for alcohol in 2008 and the average age of initiation for cannabis reported in 2004.

Other Illicit Drug Use

The statistics on past 12 month use of hallucinogens increased from 0.7% in 2004 to 2.1% in 2008; increases were also evident for hallucinogen use in males (1.0% versus 3.3%), youth 15 to 24 years of age (3.5% versus 10.2%) and adults 25 years and older (0.1% versus 0.6%). However, caution is required in comparing the 2004 and 2008 results, because the list of substances under hallucinogens was expanded in the 2008 questionnaire. The 2008 CADUMS asked respondents about their use of hallucinogens such as PCP, LSD (acid), salvia, or magic mushrooms during the past year, whereas the 2004 CAS questionnaire made specific reference to PCP and LSD only.

Excluding cannabis, hallucinogens was the illicit drug most commonly used during the past 12 months followed closely by cocaine (1.6%), ecstasy (1.4%), speed (1.1%) and methamphetamine (0.2%), the reported rates of which are comparable to those reported in 2004.

In 2008, 12.1% of Canadians used at least one of six drugs (including cannabis, cocaine or crack, speed, ecstasy, hallucinogens or heroin), a decrease from 14.5% reported in 2004. This decrease is primarily due to the decreased rate of cannabis use since the rate of past-year use of any drug excluding cannabis (3.9%) has not changed since 2004 (3.0%). The rate of past-year use of any drug excluding cannabis (at least one of cocaine, speed, ecstasy, hallucinogens or heroin) was higher among men than women (5.5% versus 2.4%, respectively) and approximately 8 times higher among youth 15 to 24 years of age than adults 25 years and older (15.4% versus 1.7%, respectively).

Abuse of Psychoactive Pharmaceutical Drugs¹

CADUMS included questions relating to the use and abuse of three classes of psychoactive pharmaceutical drugs that are normally prescribed for therapeutic purposes. The three classes of drugs were: opioid pain relievers, (such as Percodan®, Demerol®, and OxyContin®); stimulants, (such as Ritalin®, Concerta®, Adderall®, and Dexedrine®); and tranquilizers and sedatives, (such as Valium®, Ativan®, and Xanax®). While these drugs are prescribed for therapeutic purposes, they have the potential for abuse due to their psychoactive properties. To provide a baseline on overall use, (including therapeutic use), respondents were asked whether or not they had used opioid pain relievers, stimulants, or sedatives, and whether or not they had used these pharmaceuticals to get high.

While 28.4% of respondents indicated that they had used a psychoactive pharmaceutical drug in the past year, only 2.0% of these users reported that they used such a drug to get high. In general, women and adults 25 years and older reported higher rates of pharmaceutical use, but among youth 15 to 24 years of age, there were higher rates of use to get high with 9.4% of current users aged 15 to 24 years reporting such use compared to 0.9% of adults 25 years and older (representing 2.1% and 0.3% total population, respectively).

Of the three categories of pharmaceuticals, opioid pain relievers were the most commonly used in 2008. Approximately one in five (21.6%) of the respondents reported the use of opioid pain relievers in the 12 months preceding the survey. Amongst users of opioid pain relievers, 1.5% (which corresponds to 0.3% of the total population) reported using them to get high. The prevalence of abuse was roughly five times higher amongst youth, 15 to 24 years of age, (4.9% of users, 0.9% of the population), compared to adults, 25 years and older, (1.0% of users, 0.2% of the population).

While significantly fewer Canadians (1.1%) reported the use of stimulants in the previous 12 months, the prevalence of abuse by stimulant users was substantially higher than that reported for opioid pain relievers. Among users, one in four, 25.5% (representing 0.3% of the total population) reported the use of stimulants to get high. Youth were more likely than adults to report such use; 38.3% of users aged 15 to 24 years (representing 1.2% of the youth population) reported such use, compared to 3.1% of users aged 25 years and older (representing 0.7% of the adult population).

One in ten Canadians (10.7%) reported the use of sedatives or tranquilizers in the past 12 months. As with opioid pain relievers, only 1.4% of users (representing 0.2% of the total population) reported the use of sedatives to get high. Where sedatives and tranquilizers are concerned, there were no differences according to sex or age in use to get high.

Harms related to illicit drug use

In 2008, 2.7% of Canadians 15 years and older reported experiencing at least one harm in the past year due to their illicit drug use, a rate comparable to 2004 (2.8%). Youth 15 to 24 years of age were approximately ten times more likely than adults 25 years and older to report harm due to drug use, with roughly one in ten (10.8%) youth 15 to 24 years of age reporting such harm, compared to only 1.1% of adults 25 years and older. Among current users the reported rate of past year harm has also not changed since 2004, approximately 1 in 5 (21.7%) users report experiencing some harm in the past year due to their drug use. However, among users, three times as many youth 15 to 24 years of age than adults 25 years and older reported such harm (31.5% versus 13.5%).

Definitions

The terms used above have the following definitions:

Prevalence - the proportion of a group or population reporting the indicated behaviour or outcome, usually expressed as a percentage.

Past-year use - reported use in the 12 months preceding the interview.

Age of initiation - the age at which a person first used alcohol or a drug.

Abstainer - a person who has never used alcohol in their life.

Former drinker - a person who has used alcohol in their life, but not in the past year.

Harm - Alcohol and Drug related harms include harms in any of the following 8 areas: physical health; friendships and social life; financial position; home life or marriage; work, studies or employment opportunities; legal problems; difficulty learning; and housing problems.

Light infrequent drinker - a person who drinks less than once per week on average in a year, and usually consumes less than 5 drinks on each drinking occasion.

Light frequent drinker - a person who drinks once or more per week on average in a year, and usually consumes less than 5 drinks on each drinking occasion.

Heavy infrequent drinker - a person who drinks less frequently than once per week on average in a year, and usually consumes 5 or more drinks on each drinking occasion.

Heavy frequent drinker - a person who drinks one or more times per week on average in a year, and usually consumes 5 or more drinks on each drinking occasion.

Reference Information

The Canadian Alcohol and Drug Use Monitoring Survey (CADUMS) is an on-going general population survey of alcohol and illicit drug use among Canadians aged 15 and older, sponsored by Health Canada. It was developed in collaboration with the Centre for Addictions and Mental Health (CAMH), the Centre for Addiction Research - British Columbia (CAR-BC), Alberta Health Services (formerly, Alberta Alcohol and Drug Abuse Commission), Manitoba Health, the Centre québécois de lutte aux dépendances (CQLD), and the Canadian Centre on Substance Abuse (CCSA). Designed to provide annual national and provincial estimates of alcohol and drug-related behaviours and outcomes, CADUMS was launched in April 2008.

Within each year, the targeted number of CADUMS interviews to be conducted by telephone is 1,008 per province, randomly selected to produce a national survey of 10,080 interviews annually. Due to methodological issues, the territories are not included in the survey. Provinces have the option to buy additional interviews to allow for more detailed analysis of results within their jurisdiction. For the 2008 calendar year, the provinces of Alberta and British Columbia arranged for their samples to be increased to 4,600 and 4,008, respectively. This resulted in a final tally of 16,672 respondents in 2008, representing approximately 25,957,435 Canadians aged 15 and older. For purposes of this report only univariate analyses were conducted, with statistical significance being determined by confidence interval overlap. Further results and more in-depth and thematic analyses from CADUMS are forthcoming.

For more information about the survey and its results, please write to the Office of Drugs and Alcohol Research and Surveillance, Controlled Substances and Tobacco Directorate, Health Canada, 123 Slater Street, Address Locator 3509C, Ottawa, ON, K1A 1B9, or send an e-mail request to ors_brs@hc-sc.gc.ca.

¹ Historical comparisons are not available because abuse of pharmaceuticals was not previously included in the Canadian Addiction Survey (2004).

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