

FACT SHEET: YOUTH DRUG USE AND ABUSE

JANUARY 2004



HIGHLIGHTS

Background

Substance abuse has been a grave social problem as well as a notable cause of morbidity and health expenditure in Jamaica. This problem results in social, economic, and personal problems ranging from emotional and physical illness, through family dysfunction, to lost productivity, and health costs. Recent studies demonstrate that the prevalence of substance abuse in Jamaica has serious implications for the health and well being of young people.¹ Surveys estimate that one in five adolescents, between the ages of 12 and 17 years, consume alcohol on a regular basis (more than twice per month). Figures also show that lifetime use of tobacco increases significantly, with age, among youth, moving from six percent of those aged 12-17 years to 21% of youth between 18 and 24 years old.³

Studies of substance use in Jamaica report that approximately 40% of males have tried alcohol, cigarettes, or ganja (marijuana) at least once. Among females, the consumption is significantly lower, ranging from 14% to 21%.¹ Substance use influences the well being of Jamaican adolescents, including their sexual and reproductive behaviour. In a recent Youth Reproductive Health Survey (Jackson, et al - 1998), adolescents, who had experimented with alcohol, were more than twice as likely as others to report ever having sex.⁴

Adolescents' Substance Use

Alcohol is the most widely used and abused substance in Jamaica.¹ It is easily accessible and adolescents begin drinking as early as 11 years old. A study on drug use among youth (Douglas, 2000) showed that 71% of children in grades 9 to 13 used alcohol more than once. Another study of urban children, whose average age was 12 years, showed that 13% of them were using alcohol (Samms-Vaugh, 2000). In a study conducted for the *Uplifting Adolescents Project (2000)*, 14% of the 10 to 14 year olds reported having been intoxicated. Almost one out of ten boys reported daily consumption of alcohol, and in Canterbury, St. James, four out of ten boys (15-19 years) reported alcohol consumption at least once a week. Boys consume more alcohol than girls, and usually drink outside their homes in public and social settings, whereas girls consume alcohol more often, in the privacy of their homes (Hope Enterprises 1998).¹

Tobacco, although licit, is one of the most addictive drugs universally. It is also very accessible to young people and is relatively affordable, selling for about \$8.00 per cigarette (July 2003). Current cigarette use among the in-school youth population is on the rise, with a noticeable increase in new smokers who

are under 14 years old. Today, it is estimated that approximately 1 in 23 in-school adolescents smoke. There is no significant difference in smoking behaviour of youth in rural and urban areas. Use is estimated at one in four or five persons.³ Twenty-seven percent of teens in grades 9-13 have smoked cigarettes in their lifetime. The prevalence of smoking is higher among persons with low educational attainment, the employed, and persons without strong links to a religious denomination.³

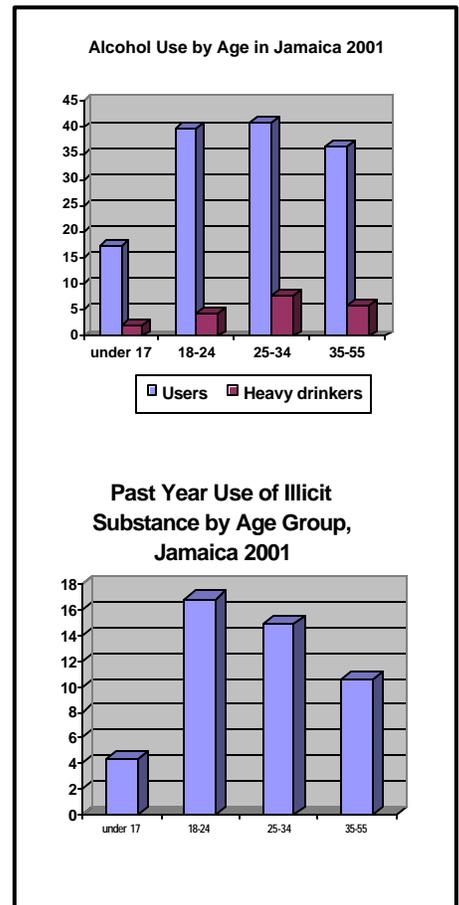
Source: NCDA 2001,

Inhalants

Inhaling the fumes of substances such as paint, glue, paint thinner/solvents, gasoline, markers, cleaning agents, and nail polish remover often intoxicates young people. However, they do not normally admit to this practice.³ Studies show that 16% of adolescents, in grades 9 to 13, have used inhalants.³

Prescription Drugs

There is evidence to suggest that prescription drugs are commonly used for non-medical purposes. Painkillers are the most prevalent.



In a 2001 drug abuse study, 1 in 10 persons indicated that, at some

time, they had taken painkillers that had not been prescribed. Females, aged 18-24 years, were the most likely to report this.³

Illicit Substances

Nineteen percent of youth in a 2000 study reported that they had ever used an illicit substance. One in twenty students have, at some time, experimented with drugs such as ganja, heroin, crack, cocaine, and ecstasy, and about one percent claim to be current users. Lifetime prevalence of illicit substance use shows no difference between urban (11.8%) and rural residents (11.5%). However, youth, aged 18-24 years, report the highest use of these substances; 16.9% used them in the past year.^{1,3} Males are five times more likely than females to use illicit drugs in Jamaica. Currently ganja use for boys is 15% and for girls 3%.¹ Data from 1997 indicated that 10% of youngsters had used ganja by grade seven. Ganja use has increased, from 20% in 1989 to 27% in 1997, for students in grades 9-13, and is even more prevalent for out of school youth.

Health Consequences

Cigarette smoking is the most wide spread cause of health problems and early death. Chronic bronchitis, emphysema, heart disease, hypertension, and some forms of cancer are just a few of the medical complications that can affect smokers.⁵ The World Health Organization (WHO) Expert Committee on Drug Dependence reports that cigarette smokers have a 30-80% greater mortality rate than non-smokers.

Getting high by inhaling toxic substances like glue, kerosene, and cleaning chemicals can cause serious respiratory problems and permanent brain damage.² Drinking increases the risk of injury - car crashes, falls, burns, drowning, and suicide.²

Knowledge and Perceptions about Drugs

Young people exhibit relatively high levels of awareness of the different types of drugs that are available or exist in their communities. However, gaps exist in their level of knowledge regarding the harmful repercussions of substance use. At least 80% of persons interviewed in the National Household Survey of Drug Use and Abuse 2001 knew that smoking was bad for their health, and were aware of some of the health risks, for example, lung cancer, associated with tobacco use. Ninety percent of the same sample also knew that alcohol could cause people to get sick. Most admitted that alcohol use is becoming a more serious problem in Jamaica and agreed that there should be stricter legislative regulations in place to decrease the availability of alcohol and to improve the general awareness of the dangers of alcohol abuse. Eighty percent of Jamaicans feel that illicit drug use is becoming more of a problem in Jamaica. However, 59% believe that the use of illicit drugs is more prevalent among the youth population. Eighty

two percent of adolescents perceive regular use of cocaine as entailing a "great risk" of harm for the user.³

What is being done to help youth at risk?

General drug use by youth continues to increase. Work is currently being done, however, to raise awareness and to advocate for a healthy and drug free Jamaica. The Assessment & Detoxification Unit at the University of the West Indies, the Addiction Alert Organisation, Teen Challenge, Patricia House, Richmond Fellowship and Regional Hospitals island wide have established treatment and rehabilitation centres that give assistance to those in need of counselling and medical treatment.⁵

REFERENCES

1 Douglas, Ken, 2000. *Patterns of Substance Use and Abuse among Post primary Students in Jamaica: National Adolescent Student's Drug Survey*. PIOJ Kingston, Jamaica.

2 *Youth Rising*. 2001. Jamaica Adolescent Health Unit, Health Promotion and Protection Division, Ministry of Health, Jamaica.

3 Hope Enterprises 2002. *National Household Survey of Drug Use and Abuse in Jamaica, 2001*. National Council on Drug Abuse/ Hope Enterprises Ltd, Kingston, Jamaica.

4 DeBruin M. 2002. Teenagers at Risk. Youth.now, Futures International.

5. National Council on Drug Abuse (NCDA)

Fact Sheet on Youth in Jamaica:
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REFERENCES



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