



YOUTH2000 SURVEY SERIES

Youth19 Rangatahi Smart Survey Initial Findings Substance Use

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YOUTH19
A Youth2000 survey

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Fleming, T., Peiris-John, R., Crengle, S., & Parry, D. (2018). *Integrating survey and intervention research for youth health gains*. Health Research Council of New Zealand Project Grant (HRC ref: 18/473).

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Further Youth19 publications are available at www.youth19.ac.nz

Summary

This report highlights findings from the Youth19 Rangatahi Smart Survey (Youth19) about smoking, vaping, alcohol use, and use of marijuana and other drugs. It is designed to be read with the *Youth19 Rangatahi Smart Survey, Initial Findings: Introduction and Methods* report, which explains how the survey was conducted, who was included and how to interpret the results. This document and other Youth19 outputs are available at www.youth19.ac.nz.

As part of Youth19, secondary school students answered questions about their substance use. We present an overview of these findings and changes over time, first for the total population (all students combined) and then for Māori, Pacific, Asian, and Pākehā and other European groups. Finally, we outline opportunities for supporting students who face challenges with substance use.

Youth19 data shows that:

- **There were very large declines in cigarette smoking and binge drinking for New Zealand secondary school students from 2001–2019.**

This finding is consistent with international research highlighting a general decrease in youth substance use in many countries in the first part of the 21st century. However there are some indicators that behaviours such as smoking may no longer be declining or may be beginning to increase again in some countries (ASH, 2020; Ball et al., 2020b; Inchley et al., 2020; Johnston et al., 2020).

- **Most students do not smoke, vape, drink alcohol, or use marijuana or other drugs.**
- **Regular cigarette smoking is now uncommon overall, but ethnic and socioeconomic differences remain stark.** In particular, youth smoking remains relatively common in Māori, Pacific and low-income communities.
- **Vaping has emerged as a new issue.**
- **Binge drinking is still prevalent**, especially among older students.
- Weekly marijuana use has been relatively stable over time, and is now more prevalent than weekly cigarette smoking.
- For many health risks, risks are higher in poorer communities, for example smoking and cannabis use are more common in higher deprivation areas. However, vaping and binge drinking do not operate this way. Rather, regular vaping is more common in wealthier communities and binge drinking is common in all socioeconomic groups.

A Youth19 factsheet about smoking and vaping is available on our website. Further publications are in development and will also be accessible via www.youth19.ac.nz.

Findings

Cigarette smoking

In Youth19, 4.7% of students reported smoking at least monthly, and 2.6% reported smoking at least weekly, as shown in Table 1.

Although youth smoking has reduced markedly over recent decades, smoking remains an important cause of preventable health problems and is still a concern, particularly in higher deprivation communities. Smoking at least weekly was more prevalent among students from low decile schools (5.2%) and high deprivation neighbourhoods (4.6%), than among students from high decile schools (1.3%) and low deprivation neighbourhoods (1.3%).

Weekly smoking was also more common in students living in small towns (5.0%) compared with urban (2.2%) and rural (2.2%) areas. Similar differences were found for smoking monthly or more often.

Youth smoking has decreased dramatically since 2001, and that decrease continued between 2012 and 2019, from 4.5% to 2.6% for weekly smoking, as shown in Table 3. However, recent data suggests this downward trend may have slowed or even be reversing (ASH, 2020). Reducing youth smoking remains important for health among New Zealand young people.

E-cigarette use / vaping

In Youth19, 12% of students reported using e-cigarettes or vapes at least monthly, and 8% reported vaping at least weekly, as shown in Table 1.

Vaping was more common than smoking in high school students, and many teens who vape are non-smokers (Ball et al., 2020a). For smokers, switching to vaping can reduce harm (Villalobos et al., 2019), however vaping is not recommended among those who do not smoke (Health Promotion Agency, 2019). Our factsheet on vaping provides more detail about possible health effects (Ball et al., 2020a).

Vaping at least weekly was more prevalent among students living in small towns (12%) than in urban areas (7%), and among older students. Similar differences were found for using e-cigarettes monthly or more often. In contrast to cigarette smoking, regular vaping (weekly or monthly) was more common in low, rather than high deprivation communities.

Questions about vaping were not included in previous Youth2000 surveys, so trend data is not available. However, other New Zealand surveys show that youth vaping has increased rapidly in recent years (Lucas et al., 2020).

Binge drinking

As a measure of binge drinking, we asked how many times students had five or more alcoholic drinks in one session (within 4 hours) in the last 4 weeks.

In Youth19, more than one in five students (22%), reported binge drinking in the last 4 weeks. Binge drinking increased with age, and prevalence was very high in the 17+ age group (42%), as shown in Table 2.

Binge drinking was common in all deprivation groups and geographic areas. However binge drinking was slightly more common among students living in lower deprivation (generally higher income) neighbourhoods (24%) than in

high deprivation neighbourhoods (19%), and those living in rural areas (26%) than in urban areas (19%).

The decline in youth binge drinking from a peak in of 36% in 2007 is an important health gain. Binge drinking is associated with harm both from the drinking itself and from associated behaviours, such as drink driving, violence, risky or unwanted sex, and suicidal behaviour. Despite these improvements, youth binge drinking remains high in New Zealand compared with other countries and continues to cause preventable physical, mental and social harm in our communities.

Marijuana use

In Youth19, 23% of students reported ever using marijuana, and 4.1% reported using marijuana at least weekly, as shown in Table 2.

Using marijuana at least weekly was more prevalent among males (5.1%) than females (3.1%), and in students from low decile schools (6.2%) than from high decile schools (2.5%). As with other substance use indicators, regular use of marijuana increases with age.

The proportion of youth using marijuana weekly or more often is lower now (4.1%) than in 2001 (6.5%), however it did not substantially change between 2012 and 2019, as shown in Table 3.

Marijuana use, particularly frequent use starting from a young age, can harm mental health and have other negative effects (Royal Society Te Apārangi, 2019), so marijuana harm reduction remains important for youth health, and declines since 2001 are good news.

Use of other drugs

In Youth19, 3.7% of students reported ever trying any other drugs (such as P, huffing, synthetics), as shown in Table 2.

The proportion of students who had ever tried other drugs increased with age.

There were no substantial differences between male and female students, between school deciles or neighbourhood deprivation levels, or between students living in small towns compared to urban or rural areas.



Table 1: Cigarette and e-cigarette use, 2019

	Smoke cigarettes weekly or more often		Smoke cigarettes monthly or more often		Vape / use e-cigarettes weekly or more often		Vape / use e-cigarettes monthly or more often	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Total	191 (7,154)	2.6 [2.2-3.0]	292 (7,154)	4.7 [4.1-5.2]	423 (7,146)	7.8 [6.8-8.8]	723 (7,146)	12.4 [11.3-13.6]
Sex								
Male	81 (3,194)	2.9 [2.2-3.7]	119 (3,194)	4.4 [3.5-5.3]	232 (3,193)	9.1 [7.4-10.8]	370 (3,193)	13.4 [11.6-15.2]
Female	110 (3,960)	2.3 [1.8-2.8]	173 (3,960)	5.0 [4.1-5.8]	191 (3,953)	6.6 [5.7-7.5]	353 (3,953)	11.5 [10.1-13.0]
Age								
13 and under	10 (1,267)	0.6 [0.2-1.0]	18 (1,267)	1.9 [0.9-3.0]	26 (1,269)	2.2 [0.9-3.5]	53 (1,269)	4.7 [3.7-5.7]
14	26 (1,614)	1.7 [0.8-2.5]	42 (1,614)	2.9 [2.0-3.8]	61 (1,620)	4.3 [3.2-5.5]	130 (1,620)	8.0 [6.3-9.8]
15	54 (1,554)	3.1 [2.4-3.9]	75 (1,554)	5.4 [4.1-6.7]	102 (1,551)	8.9 [7.4-10.4]	171 (1,551)	13.7 [12.0-15.4]
16	42 (1,388)	3.4 [2.4-4.3]	67 (1,388)	5.5 [4.3-6.6]	111 (1,378)	9.5 [7.5-11.5]	189 (1,378)	15.9 [14.0-17.9]
17 and over	59 (1,331)	3.7 [2.6-4.7]	90 (1,331)	6.9 [5.4-8.3]	123 (1,328)	12.4 [9.6-15.2]	180 (1,328)	17.6 [14.6-20.6]
Neighbourhood Deprivation¹								
Low	22 (2,027)	1.3 [0.6-2.0]	48 (2,027)	4.1 [3.0-5.3]	153 (2,027)	10.3 [8.4-12.2]	246 (2,027)	15.8 [13.4-18.2]
Medium	85 (2,980)	2.3 [1.7-2.9]	92 (2,657)	4.2 [3.4-5.1]	137 (2,660)	7.2 [5.5-8.9]	228 (2,660)	10.3 [8.2-12.3]
High	30 (2,809)	4.6 [3.9-5.3]	116 (1,755)	5.9 [5.1-6.7]	72 (1,746)	4.9 [4.0-5.8]	146 (1,746)	10.2 [8.7-11.7]
School Decile²								
Low	75 (1,324)	5.2 [4.1-6.3]	102 (1,324)	7.5 [6.5-8.5]	42 (1,306)	3.0 [1.9-4.1]	98 (1,306)	7.5 [5.4-9.5]
Medium	2,106 (3,048)	2.9 [2.1-3.7]	126 (2,980)	4.4 [3.4-5.5]	186 (2,995)	8.2 [6.4-10.0]	321 (2,995)	12.2 [10.1-14.3]
High	1,942 (2,819)	1.3 [0.9-1.7]	63 (2,809)	3.9 [3.0-4.8]	194 (2,804)	9.3 [6.9-11.6]	303 (2,804)	14.7 [12.0-17.3]
Urban Rural indicator³								
Urban	111 (4,876)	2.2 [1.9-2.6]	165 (4,876)	4.1 [3.6-4.7]	252 (4,875)	7.0 [5.6-8.4]	426 (4,875)	11.4 [9.9-12.9]
Small towns	29 (515)	5.0 [3.6-6.3]	43 (515)	8.1 [6.6-9.5]	47 (509)	11.9 [8.5-15.3]	77 (509)	17.1 [14.4-19.9]
Rural	33 (1,049)	2.2 [0.8-3.5]	48 (1,049)	4.3 [2.3-6.3]	63 (1,050)	7.7 [5.0-10.4]	117 (1,050)	12.0 [8.7-15.3]

1 NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

2 School Decile, Low decile (1-3) indicating higher deprivation, Medium decile (4-7), High decile (8-10) indicating lower deprivation

3 Urban (population of 10,000 or more), Small towns (population between 1,000 and 9,999 people), Rural (population fewer than 1,000)

Table 2: Use of alcohol, marijuana and other drugs, 2019

	Drink alcohol at least once a week			Binge drinking at least once in past 4 weeks			Ever used marijuana			Marijuana use weekly or more often			Ever tried any other drugs such as P, huffing, synthetics		
	n	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	
Total	494 (7,114)	9.1 [7.8-10.5]	1,314 (7,053)	21.8 [20.2-23.5]	1,425 (6,996)	23.4 [22.0-24.7]	279 (6,981)	4.1 [3.5-4.7]	224 (6,983)	3.7 [3.2-4.2]					
Sex															
Male	268 (3,166)	10.2 [8.3-12.2]	620 (3,135)	22.9 [19.9-25.8]	675 (3,107)	25.7 [23.5-27.8]	150 (3,099)	5.1 [4.2-6.0]	108 (3,095)	4.1 [3.5-4.8]					
Female	226 (3,948)	8.1 [6.4-9.8]	694 (3,918)	20.8 [19.0-22.6]	750 (3,889)	21.1 [19.2-23.1]	129 (3,882)	3.1 [2.4-3.8]	116 (3,886)	3.3 [2.7-3.8]					
Age															
13 and under	20 (1,254)	2.0 [0.6-3.5]	42 (1,244)	4.1 [2.9-5.3]	84 (1,239)	6.0 [4.6-7.4]	20 (1,237)	1.3 [0.7-2.0]	15 (1,235)	1.3 [0.7-1.9]					
14	46 (1,612)	3.4 [2.2-4.5]	134 (1,597)	7.7 [6.2-9.3]	174 (1,580)	11.3 [8.7-13.8]	35 (1,578)	2.5 [1.5-3.5]	24 (1,581)	1.1 [0.7-1.6]					
15	108 (1,548)	8.3 [6.7-9.9]	287 (1,530)	19.4 [17.2-21.6]	336 (1,522)	24.1 [21.5-26.6]	83 (1,518)	6.4 [5.0-7.8]	54 (1,512)	4.8 [3.6-6.0]					
16	145 (1,376)	11.7 [9.5-13.9]	365 (1,364)	29.3 [26.5-32.2]	389 (1,355)	31.2 [28.8-33.5]	71 (1,353)	5.2 [4.2-6.2]	63 (1,353)	4.6 [3.4-5.8]					
17 and over	175 (1,324)	17.7 [14.0-21.5]	486 (1,318)	42.1 [37.8-46.4]	442 (1,300)	38.8 [35.0-42.6]	70 (1,295)	4.6 [3.2-6.0]	68 (1,302)	6.0 [4.7-7.2]					
Neighbourhood Deprivation¹															
Low	166 (2,023)	11.9 [10.2-13.6]	392 (2,017)	24.4 [21.3-27.5]	340 (2,004)	21.7 [19.0-24.3]	56 (2,002)	3.3 [2.3-4.3]	60 (1,996)	3.7 [3.2-4.3]					
Medium	147 (2,651)	7.4 [5.5-9.3]	423 (2,636)	19.9 [17.0-22.8]	448 (2,610)	21.2 [18.7-23.8]	86 (2,607)	3.7 [2.9-4.4]	80 (2,612)	4.0 [3.2-4.8]					
High	110 (1,740)	7.5 [5.2-9.7]	299 (1,709)	18.9 [17.0-20.9]	412 (1,696)	26.7 [24.2-29.2]	89 (1,686)	5.4 [4.3-6.5]	47 (1,686)	2.6 [1.8-3.4]					
School Decile²															
Low	78 (1,303)	6.7 [2.9-10.5]	254 (1,277)	20.6 [16.5-24.7]	360 (1,247)	27.5 [23.6-31.3]	80 (1,239)	6.2 [4.5-7.9]	33 (1,247)	2.7 [1.6-3.9]					
Medium	212 (2,975)	8.6 [6.1-11.1]	575 (2,949)	22.4 [18.8-26.1]	663 (2,941)	26.6 [23.1-30.2]	137 (2,935)	4.9 [3.8-6.0]	109 (2,917)	4.4 [3.4-5.3]					
High	203 (2,794)	10.8 [8.2-13.4]	479 (2,785)	21.7 [17.8-25.5]	400 (2,767)	18.6 [15.5-21.7]	61 (2,766)	2.5 [1.6-3.4]	82 (2,777)	3.4 [2.9-3.9]					
Urban Rural indicator³															
Urban	261 (4,859)	8.2 [6.7-9.7]	720 (4,831)	19.2 [17.1-21.3]	781 (4,777)	20.7 [18.3-23.0]	138 (4,769)	3.5 [2.8-4.1]	126 (4,765)	3.3 [2.9-3.8]					
Small towns	53 (509)	10.5 [6.0-15.0]	142 (497)	26.1 [20.5-31.7]	145 (497)	26.5 [22.6-30.5]	32 (494)	6.2 [4.0-8.3]	24 (496)	4.4 [0.4-8.4]					
Rural	109 (1,047)	10.6 [7.0-14.2]	252 (1,035)	25.8 [21.6-30.1]	274 (1,037)	28.2 [24.3-32.1]	61 (1,033)	4.5 [3.1-5.8]	37 (1,034)	3.8 [2.9-4.8]					

1 NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

2 School Decile, Low decile (1-3) indicating higher deprivation, Medium decile (4-7), High decile (8-10) indicating lower deprivation

3 Urban (population of 10,000 or more), Small towns (population between 1,000 and 9,999 people), Rural (population fewer than 1,000)

Table 3: Substance use trends

	Year 2001		Year 2007		Year 2012		Year 2019	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Smoke cigarettes weekly or more often								
Total	1,376 (8,720)	15.1 [14.0-16.2]	647 (8,301)	8.1 [7.4-8.9]	370 (8,179)	4.5 [3.9-5.1]	169 (6,850)	2.6 [2.1-3.0]
Sex								
Male	515 (3,923)	13.1 [11.6-14.5]	273 (4,392)	6.0 [5.1- 6.8]	167 (3,681)	4.7 [4.0-5.4]	73 (3,058)	2.9 [2.1-3.7]
Female	861 (4,797)	17.0 [15.5-18.6]	374 (3,909)	10.2 [8.9-11.6]	203 (4,498)	4.3 [3.4-5.2]	96 (3,792)	2.2 [1.8-2.7]
Binge drinking at least once in past 4 weeks								
Total	2,545 (7,613)	34.4 [32.9-35.9]	2,829 (8,247)	36.2 [34.6-37.8]	1,840 (8,145)	25.3 [23.8-26.8]	1,221 (6,775)	21.8 [20.1-23.4]
Sex								
Male	1,241 (3,458)	36.8 [34.5-39.2]	1,566 (4,390)	37.8 [35.7-39.8]	845 (3,667)	25.7 [23.0-28.4]	579 (3,009)	22.8 [19.8-25.8]
Female	1,304 (4,155)	31.9 [30.2-33.7]	1,263 (3,857)	34.7 [32.1-37.2]	995 (4,478)	24.9 [23.3-26.4]	642 (3,766)	20.7 [18.9-22.6]
Marijuana use weekly or more often								
Total	558 (8,400)	6.5 [5.7-7.2]	374 (7,911)	4.7 [4.2-5.2]	259 (8,097)	3.6 [3.1-4.1]	246 (6,711)	4.1 [3.4-4.7]
Sex								
Male	297 (3,775)	7.8 [6.6-9.0]	249 (4,179)	5.9 [5.2-6.7]	166 (3,639)	5.0 [4.1-5.9]	141 (2,981)	5.1 [4.1-6.0]
Female	261 (4,625)	5.2 [4.3-6.2]	125 (3,732)	3.5 [2.8-4.2]	93 (4,458)	2.1 [1.7-2.6]	105 (3,730)	3.1 [2.4-3.8]

When comparing survey years: 1) students from kura kaupapa Māori are not included in 2019 results, as previous years did not include kura kaupapa Māori students. 2) The data reported has been calibrated to adjust for differences between the national population of students and those who took part in surveys. See *Youth19 Rangatahi Smart Survey, Initial Findings: Introduction and Methods* for details (available at www.youth19.ac.nz).

Substance use among rangatahi Māori

Youth19 data shows that most rangatahi Māori do not use substances and there have been dramatic reductions in substance use among rangatahi over the last two decades. However, when compared to their peers, a larger proportion of rangatahi Māori:

- smoke cigarettes weekly or more often (4.7% compared to 2.1% for Pākehā and other European youth)
- use marijuana weekly or more often (8.5% compared to 3.3% for Pākehā and other European youth).

A greater proportion of rangatahi Māori from high deprivation areas smoke cigarettes weekly or more often (5.4%) than from low deprivation areas (1.7%), as shown in Table 4.

We have seen strong decreases in the prevalence of cigarette smoking and binge drinking, particularly among rangatahi Māori females. From 2012 to 2019, the proportion of Māori females who smoked cigarettes weekly or more often decreased from 10.4% to 3.4%, and binge drinking reduced among Māori females from 36% in 2012 to 28%. These are continuations of major declines that occurred in the 2001–2012 period, as shown in Table 5.

There have been reductions in weekly marijuana use since 2001, however there was no substantial change between 2012 and 2019.

More detailed Māori health publications will be coming soon.

Table 4: Rangatahi Māori substance use, 2019*

	Smoke cigarettes weekly or more often		Binge drinking at least once in past 4 weeks		Marijuana use weekly or more often	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Total	77 (1,343)	4.7 [3.5-5.8]	377 (1,293)	28.6 [25.4-31.8]	116 (1,268)	8.5 [6.4-10.5]
Sex						
Male	36 (611)	5.7 [3.9-7.5]	176 (586)	29.0 [23.5-34.5]	53 (571)	8.8 [6.1-11.5]
Female	41 (732)	3.5 [2.1-4.8]	201 (707)	28.2 [24.5-31.8]	63 (697)	8.1 [5.9-10.4]
Neighbourhood Deprivation¹						
Low	4 (189)	1.7 [0.1-3.2]	55 (190)	32.2 [25.9-38.4]	11 (187)	7.1 [5.1-9.1]
Medium	20 (377)	5.8 [3.1-8.5]	86 (366)	23.8 [20.2-27.5]	27 (364)	7.8 [4.5-11.1]
High	45 (532)	5.4 [3.7-7.2]	154 (512)	27.8 [23.7-31.9]	53 (497)	9.3 [6.8-11.9]

*Ethnicity is categorised using the NZ census ethnicity prioritisation method

¹ NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

Table 5: Rangatahi Māori substance use trends*

	Year 2001		Year 2007		Year 2012		Year 2019	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Smoke cigarettes weekly or more often								
Total	519 (2,079)	25.5 [23.0-27.9]	254 (1,526)	17.6 [15.0-20.1]	136 (1,602)	8.4 [6.8-9.9]	56 (1,057)	4.6 [3.4-5.8]
Sex								
Male	174 (937)	19.4 [16.8-21.9]	94 (774)	11.4 [8.3-14.6]	48 (744)	6.5 [4.7- 8.3]	28 (485)	5.6 [3.8-7.5]
Female	345 (1,142)	31.6 [28.3-35.0]	160 (752)	22.9 [18.9-26.9]	88 (858)	10.4 [8.1-12.7]	28 (572)	3.4 [2.0-4.8]
Binge drinking at least once in past 4 weeks								
Total	795 (1,773)	46.1 [43.2-49.0]	762 (1,501)	51.8 [48.5-55.2]	517 (1,590)	34.8 [32.1-37.5]	291 (1,033)	28.4 [25.1-31.7]
Sex								
Male	374 (808)	47.1 [43.7-50.6]	377 (767)	50.1 [45.3-54.8]	227 (740)	33.5 [29.8-37.1]	139 (470)	28.9 [23.2-34.6]
Female	421 (965)	45.1 [41.2-48.9]	385 (734)	53.4 [49.3-57.5]	290 (850)	36.2 [32.9-39.6]	152 (563)	28.0 [24.2-31.7]
Marijuana use weekly or more often								
Total	250 (1,979)	13.9 [12.2-15.5]	143 (1,423)	9.9 [8.2-11.6]	120 (1,570)	8.3 [6.8-9.9]	85 (1,015)	8.4 [6.3-10.5]
Sex								
Male	130 (903)	16.0 [13.3-18.7]	85 (714)	12.1 [9.3-14.8]	72 (729)	10.2 [8.0-12.4]	45 (462)	8.8 [6.1-11.6]
Female	120 (1,076)	11.7 [9.2-14.2]	58 (709)	8.0 [6.0- 9.9]	48 (841)	6.3 [4.5- 8.1]	40 (553)	7.9 [5.6-10.2]

*Ethnicity is categorised using the NZ census ethnicity prioritisation method

When comparing survey years: 1) students from kura kaupapa Māori are not included in 2019 results, as previous years did not include kura kaupapa Māori students.

2) The data reported has been calibrated to adjust for differences between the national population of students and those who took part in surveys. See *Youth19 Rangatahi Smart Survey, Initial Findings: Introduction and Methods* for details (available at www.youth19.ac.nz).

Substance use among Pacific youth

Youth19 data shows that most Pacific youth do not use substances and there have been reductions in Pacific youth substance use over recent years.

When compared to their peers:

- a greater proportion of Pacific youth smoke cigarettes weekly or more often (4.3% compared to 2.1% for Pākehā and other European youth)
- a smaller proportion of Pacific youth report binge drinking at least once in the past 4 weeks (13% compared to 24% for Pākehā and other European youth).

There were very large declines in Pacific youth smoking from 2001 to 2007. These positive trends appear to have continued, as shown in Table 7. For Pacific youth, we have seen a reduction in rates of binge drinking, particularly among males. From 2012 to 2019, the proportion of Pacific males who reported binge drinking in the past week reduced from 21% in 2012 to 13% in 2019. Pacific youth from low deprivation areas (generally wealthier neighbourhoods) reported higher rates of binge drinking (23%) than those from high deprivation areas (10%), as shown in Table 6.

Table 6: Pacific youth substance use, 2019*

	Smoke cigarettes weekly or more often		Binge drinking at least once in past 4 weeks		Marijuana use weekly or more often	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Total	39 (806)	4.3 [3.2-5.5]	113 (795)	12.8 [10.3-15.3]	28 (779)	3.6 [2.4-4.8]
Sex						
Male	11 (305)	4.3 [1.9-6.6]	35 (296)	12.7 [8.2-17.1]	13 (291)	5.4 [3.5-7.3]
Female	28 (501)	4.4 [2.6-6.2]	78 (499)	12.9 [10.4-15.4]	15 (488)	2.2 [0.9-3.6]
Neighbourhood Deprivation¹						
Low	2 (66)	1.9 [0.0-4.9]	18 (64)	22.5 [14.8-30.3]	2 (63)	1.9 [0.0-5.0]
Medium	9 (193)	4.0 [0.7-7.4]	22 (197)	12.2 [6.4-18.0]	6 (189)	2.9 [0.4-5.3]
High	26 (467)	5.2 [4.1-6.4]	49 (453)	9.9 [7.0-12.9]	18 (448)	4.4 [2.6-6.2]

*Ethnicity is categorised using the NZ census ethnicity prioritisation method

¹ NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

Table 7: Pacific youth substance use trends*

	Year 2001		Year 2007		Year 2012		Year 2019	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Smoke cigarettes weekly or more often								
Total	117 (601)	20.2 [16.1-24.2]	76 (763)	11.1 [8.8-13.5]	64 (1,108)	6.2 [4.4-8.0]	38 (799)	4.3 [3.2-5.5]
Sex								
Male	40 (238)	16.8 [10.4-23.3]	27 (394)	7.0 [4.3- 9.7]	24 (462)	6.1 [3.5-8.7]	11 (303)	4.3 [1.9-6.6]
Female	77 (363)	22.7 [18.0-27.3]	49 (369)	14.9 [11.7-18.0]	40 (646)	6.3 [3.9-8.6]	27 (496)	4.4 [2.6-6.1]
Binge drinking at least once in past 4 weeks								
Total	119 (538)	23.2 [19.6-26.8]	203 (755)	27.8 [24.0-31.6]	172 (1,102)	18.2 [15.4-20.9]	109 (788)	12.7 [10.2-15.2]
Sex								
Male	50 (207)	25.1 [18.1-32.1]	106 (393)	27.3 [23.1-31.4]	78 (461)	20.5 [15.9-25.1]	34 (294)	12.6 [8.2-17.0]
Female	69 (331)	21.8 [17.6-26.0]	97 (362)	28.2 [23.3-33.2]	94 (641)	15.8 [12.3-19.3]	75 (494)	12.8 [10.3-15.3]
Marijuana use weekly or more often								
Total	34 (563)	5.9 [3.5-8.2]	40 (707)	5.7 [4.1-7.4]	19 (1,086)	1.7 [0.9-2.5]	27 (773)	3.6 [2.3-4.8]
Sex								
Male	17 (213)	7.9 [4.6-11.1]	26 (365)	7.3 [4.5-10.0]	10 (455)	2.2 [0.9-3.5]	13 (290)	5.4 [3.5-7.3]
Female	17 (350)	4.4 [1.7- 7.2]	14 (342)	4.3 [2.7- 6.0]	9 (631)	1.3 [0.4-2.2]	14 (483)	2.2 [0.9-3.6]

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Substance use among Asian youth

Youth19 data shows that, when compared to their peers, a smaller proportion of Asian youth:

- smoke cigarettes weekly or more often (0.9% compared to 2.1% for Pākehā and other European youth)
- report binge drinking at least once in the past 4 weeks (8% compared to 24% for Pākehā and other European youth)
- report using marijuana weekly or more often (1.1% compared to 3.3% for Pākehā and other European youth).

A greater proportion of Asian youth from low deprivation (higher income) areas

reported binge drinking (12%) than from high deprivation (lower income) areas (6%), as shown in Table 8. However, risk of smoking cigarettes went in the opposite direction: a greater proportion of Asian youth from high deprivation (lower income) areas reported smoking cigarettes weekly or more often (1.6%) than from low deprivation (higher income) areas (0.1%).

Overall, smoking among Asian youth declined dramatically from 2001 to 2019. Binge drinking and marijuana use among Asian youth are relatively low compared with other ethnicities and have remained low over time, as shown in Table 9.

Table 8: Asian youth substance use, 2019*

	Smoke cigarettes weekly or more often		Binge drinking at least once in past 4 weeks		Marijuana use weekly or more often	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Total	14 (1,678)	0.9 [0.4-1.3]	120 (1,669)	8.4 [6.2-10.5]	18 (1,652)	1.1 [0.6-1.7]
Sex						
Male	3 (774)	0.6 [0.0-1.2]	53 (767)	7.9 [6.2-9.6]	10 (759)	1.5 [0.7-2.3]
Female	11 (904)	1.2 [0.4-1.9]	67 (902)	8.9 [5.0-12.9]	8 (893)	0.8 [0.2-1.4]
Neighbourhood Deprivation¹						
Low	1 (412)	0.1 [0.0-0.3]	37 (413)	11.6 [8.7-14.4]	2 (406)	0.7 [0.0-1.8]
Medium	6 (787)	0.8 [0.2-1.3]	49 (784)	7.3 [4.4-10.2]	10 (774)	1.3 [0.6-2.0]
High	4 (349)	1.6 [0.4-2.9]	19 (346)	6.0 [3.3-8.6]	2 (345)	1.0 [0.0-2.3]

*Ethnicity is categorised using the NZ census ethnicity prioritisation method

¹ NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

Table 9: Asian youth substance use trends*

	Year 2001		Year 2007		Year 2012		Year 2019	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Smoke cigarettes weekly or more often								
Total	42 (587)	7.4 [5.0-9.8]	39 (1,038)	4.0 [2.7-5.3]	13 (1,015)	1.6 [0.7-2.6]	14 (1,678)	0.9 [0.4-1.3]
Sex								
Male	27 (274)	9.8 [5.7-14.0]	26 (567)	5.1 [3.3-6.8]	11 (502)	2.7 [1.1-4.2]	3 (774)	0.6 [0.0-1.2]
Female	15 (313)	5.0 [2.7- 7.3]	13 (471)	2.9 [1.0-4.8]	2 (513)	0.4 [0.0-1.0]	11 (904)	1.2 [0.4-1.9]
Binge drinking at least once in past 4 weeks								
Total	57 (545)	10.3 [7.3-13.4]	149 (1,028)	15.0 [12.4-17.6]	84 (1,009)	8.9 [7.0-10.9]	120 (1,669)	8.4 [6.3-10.5]
Sex								
Male	34 (250)	12.5 [8.0-16.9]	94 (559)	18.0 [14.5-21.4]	40 (499)	8.7 [6.1-11.4]	53 (767)	7.9 [6.2- 9.6]
Female	23 (295)	8.2 [4.6-11.7]	55 (469)	11.9 [8.9-14.9]	44 (510)	9.2 [6.7-11.7]	67 (902)	8.9 [5.0-12.9]
Marijuana use weekly or more often								
Total	15 (566)	2.6 [1.5-3.8]	19 (994)	1.9 [0.9-3.0]	7 (1,008)	0.7 [0.1-1.2]	18 (1,652)	1.1 [0.6-1.7]
Sex								
Male	9 (264)	3.2 [1.7-4.8]	17 (542)	3.4 [1.5-5.3]	3 (497)	0.6 [0.0-1.2]	10 (759)	1.5 [0.7-2.3]
Female	6 (302)	2.0 [0.6-3.4]	2 (452)	0.4 [0.0-0.9]	4 (511)	0.8 [0.1-1.5]	8 (893)	0.8 [0.2-1.4]

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Substance use among Pākehā and other European youth

Binge drinking is relatively common among Pākehā and other European young people of all socio-economic groups, as shown in Table 10. However, it has markedly declined from 2001.

A greater proportion of Pākehā and other European youth from high deprivation areas reported smoking cigarettes weekly or more

often (5.1%) than from medium deprivation (1.5%) and low deprivation (1.4%) areas.

From 2012 to 2019, there was a decline in the proportion of Pākehā and other European youth smoking cigarettes weekly or more often, decreasing from 3.4% to 2.1%, as shown in Table 11.

Table 10: Pākehā and other European youth substance use, 2019*

	Smoke cigarettes weekly or more often		Binge drinking at least once in past 4 weeks		Marijuana use weekly or more often	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Total	55 (2,974)	2.1 [1.5-2.6]	659 (2,949)	24.3 [21.8-26.7]	107 (2,939)	3.3 [2.5-4.0]
Sex						
Male	29 (1,332)	2.4 [1.3-3.5]	331 (1,318)	26.3 [21.6-31.1]	67 (1,313)	4.7 [3.5-5.8]
Female	26 (1,642)	1.8 [1.3-2.3]	328 (1,631)	22.4 [20.4-24.4]	40 (1,626)	2.0 [1.2-2.8]
Neighbourhood Deprivation¹						
Low	13 (1,263)	1.4 [0.5-2.3]	269 (1,255)	25.1 [21.8-28.3]	38 (1,253)	3.2 [2.0-4.4]
Medium	23 (1,161)	1.5 [0.8-2.2]	250 (1,152)	23.1 [19.2-26.9]	39 (1,145)	2.8 [1.6-4.0]
High	15 (320)	5.1 [3.8-6.3]	69 (315)	22.3 [18.2-26.4]	16 (313)	4.6 [3.1-6.1]

*Ethnicity is categorised using the NZ census ethnicity prioritisation method

¹ NZ Deprivation Index 2018, Low deprivation (1-3), Medium deprivation (4-7), High deprivation (8-10)

Table 11: Pākehā and other European youth substance use trends*

	Year 2001		Year 2007		Year 2012		Year 2019	
	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]	n (N)	% [95% CI]
Smoke cigarettes weekly or more often								
Total	663 (5,160)	13.1 [11.9-14.4]	253 (4,489)	5.8 [5.1-6.5]	132 (3,954)	3.4 [2.8-4.0]	55 (2,971)	2.1 [1.5-2.6]
Sex								
Male	255 (2,319)	11.6 [9.9-13.3]	114 (2,418)	4.5 [3.6-5.4]	70 (1,743)	4.1 [3.2-5.0]	29 (1,330)	2.4 [1.3-3.5]
Female	408 (2,841)	14.6 [13.1-16.2]	139 (2,071)	7.1 [5.9-8.4]	62 (2,211)	2.7 [1.8-3.7]	26 (1,641)	1.8 [1.3-2.3]
Binge drinking at least once in past 4 weeks								
Total	1,503 (4,506)	35.3 [33.5-37.1]	1,589 (4,480)	36.7 [34.8-38.6]	980 (3,945)	26.8 [24.7-28.9]	657 (2,946)	24.3 [21.8-26.8]
Sex								
Male	739 (2,062)	37.8 [35.2-40.4]	913 (2,430)	39.1 [36.6-41.6]	452 (1,736)	27.8 [24.3-31.3]	329 (1,316)	26.3 [21.6-31.1]
Female	764 (2,444)	32.8 [30.5-35.0]	676 (2,050)	34.2 [31.3-37.2]	528 (2,209)	25.9 [23.8-28.1]	328 (1,630)	22.4 [20.4-24.4]
Marijuana use weekly or more often								
Total	238 (5,025)	5.2 [4.3-6.1]	157 (4,318)	3.6 [3.0-4.2]	99 (3,934)	2.9 [2.3-3.5]	106 (2,936)	3.3 [2.5-4.0]
Sex								
Male	128 (2,255)	6.3 [4.9-7.6]	112 (2,322)	4.7 [3.7-5.6]	69 (1,727)	4.5 [3.4-5.7]	66 (1,311)	4.6 [3.5-5.8]
Female	110 (2,770)	4.2 [3.3-5.2]	45 (1,996)	2.5 [1.9-3.2]	30 (2,207)	1.3 [0.8-1.8]	40 (1,625)	2.0 [1.2-2.8]

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What helps to reduce smoking, substance abuse and risky drinking?

There are many things we can do in our homes, schools and communities to reduce risks of problem substance use and to support young people to make positive decisions. These generally include factors that promote strengths and positive environments such as:

- safe communities where there are fun things to do
- freedom from violence, bullying and discrimination
- supportive schools, where there are adults who care, teachers have high expectations, and students are treated fairly
- acceptance of identity (ethnicity, abilities, sexual and gender identity, etc.)

- fostering a strong sense of cultural identity and belonging
- caring and supportive families.

In addition there are factors that more directly address substance use and addictive behaviours such as:

- ensuring harmful substances are not available in communities
- adults role modelling healthy choices and not supplying substances
- clear communication of expectations to young people
- families knowing where young people are and who they are with.

Getting help

To get help with concerns about substance use, contact:

- Quitline – www.quit.org.nz/help-to-quit-smoking
- Alcohol and drug helpline – 0800 787 797 or text 8681
- Gambling helpline – 0800 654 655 or text 8006
- Youthline – 0800 376 633, text 234 or webchat (www.youthline.co.nz/web-chat-counselling.html)
- Health services, e.g. family doctor, school-based health teams, youth one stop shops or Whānau Ora.

You can find other sources of help by visiting Health Navigator New Zealand (www.healthnavigator.org.nz) or Family Services Directory (www.family.services.govt.nz).



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