

8 SUBSTANCE USE

The 2010 survey used the same key variables as the 1997-98 national psychosis survey to measure substance use to ensure comparability with the 1997-98 survey, allowing an assessment of change over time.

For tobacco use, the key measure was the proportion currently smoking.

For alcohol abuse or dependence and drug abuse or dependence, the key measure was the proportion of participants with a lifetime history of abuse or dependence. These data were assessed and coded by interviewers with a mental health background on the basis of a detailed semi-structured interview on current and lifetime use, including frequency of use, quantity and impact.

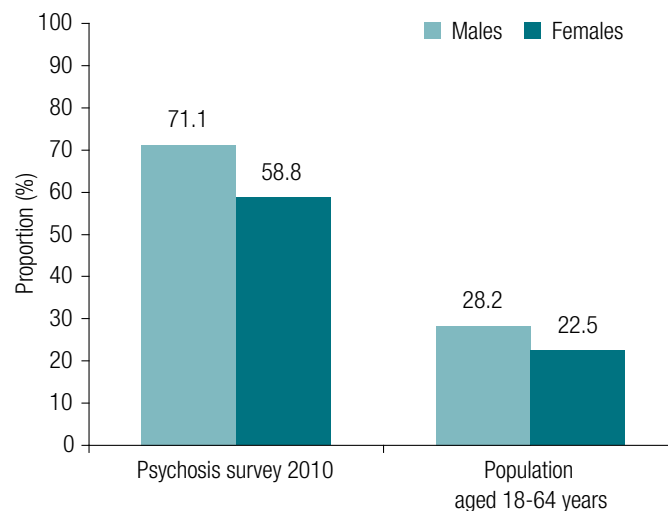
8.1 Tobacco use

Despite concerted public anti-smoking campaigns, including within public specialised mental health services, levels of tobacco smoking were very high among people with psychosis. The proportion smoking had not changed since the 1997-98 survey, with two thirds (66.1%) of participants reporting they were currently smoking in both surveys.

The proportion smoking was higher in males, with 71.1% reporting they were current smokers when interviewed compared to 58.8% of females. Participants smoked on average 21 cigarettes per day.

These figures are well above current national levels. The 2007 National Survey of Mental Health and Wellbeing found, using a slightly different methodology, that one quarter or 25.3% of the general population aged 18-64 years smoked (Figure 8-1). The rates were marginally higher in males, with 28.2% currently smoking compared with 22.5% of females.⁸

Figure 8-1. Current tobacco smoking, and population comparison⁸



Across age groups, 69.9% of 18-34 years were smoking compared to 63.4% of 35-64 year olds.

Forty percent (40.0%) of the total sample were ranked high or very high on the Fagerstrom Test for Nicotine Dependence, a test commonly used by health professionals to measure the intensity of nicotine dependence.

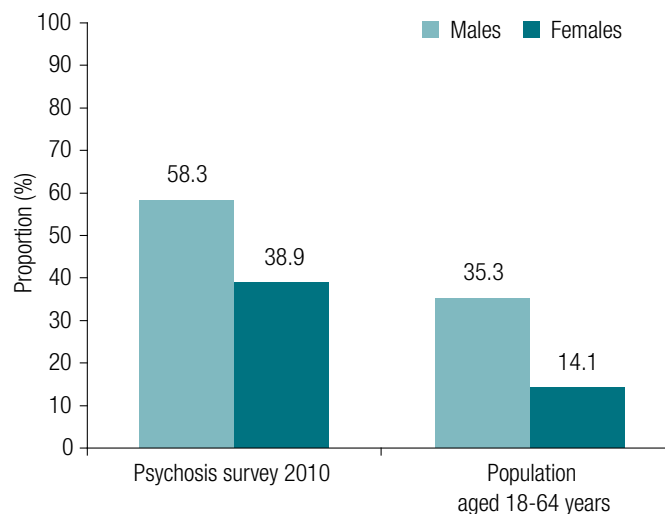
Just over one quarter (27.3%) of people currently smoking had never tried to stop, however, 31.0% had made an effort to stop smoking within the past year.

8.2 Alcohol use

The proportion of participants who were assessed at interview as having a lifetime history of alcohol abuse or dependence was very high. The proportion is substantially higher than was found in the first psychosis survey in 1997-98 and markedly higher than current population levels.

In the 2010 survey, 58.3% of males and 38.9% of females had a lifetime history of alcohol abuse or dependence (Figure 8-2). This compares to 35.3% for males and 14.1% for females in the general population as assessed in the 2007 National Survey of Mental Health and Wellbeing as drinking at levels constituting harmful use or dependence.⁸

Figure 8-2. Lifetime alcohol abuse or dependence and population comparison⁸



These general population rates are more similar to rates in the 1997-98 psychosis survey than the current psychosis survey. In 1997-98 it was found that 37.9% of males and 17.7% females met criteria for lifetime alcohol abuse or dependence. The rates in 2010 are one and a half times higher (an increase of 53.8%) in males and twice as high (an increase of 119.8%) in females.

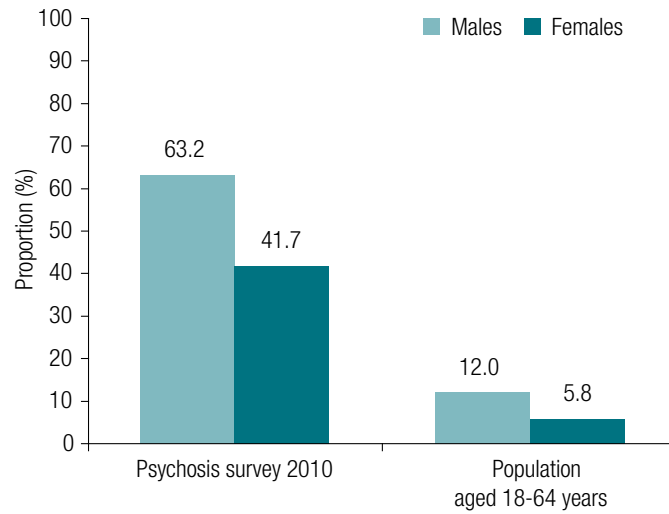
8.3 Use of cannabis and other illicit drugs

The proportion with a lifetime history of cannabis or other illicit drug abuse or dependence was very high at 63.2% of males and 41.7% of females (Figure 8-3).

Comparison with population data was even more striking, with only 12.0% of males and 5.8% of females in the general population, as assessed in the 2007 National Survey of Mental Health and Wellbeing meeting criteria for lifetime cannabis or other illicit substance harmful use or dependence.⁸

The increases in proportions were similar to, but somewhat higher, than those found for alcohol abuse or dependence. In 1997-98, 35.6% of males and 15.9% of females were reported as abusing or being dependent on cannabis and other illicit drugs. This is a 77% increase in the proportion of males in 2010 and a 136.5% increase for females.

Figure 8-3. Lifetime cannabis and other drug abuse or dependence and population comparison⁸



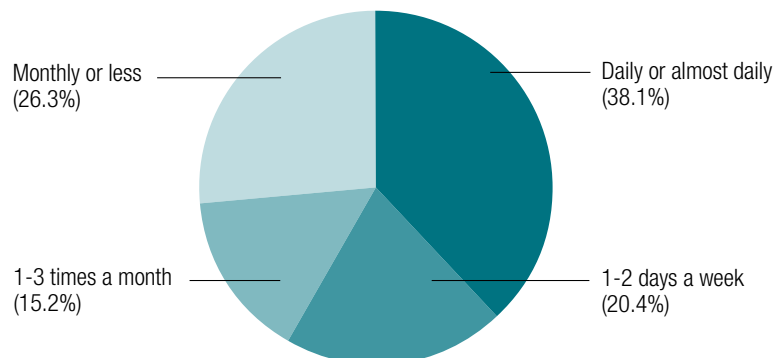
Cannabis was the most commonly used illicit drug, with one third (32.8%) of participants having used it in the previous year and two thirds (66.4%) over their lifetime (Table 8-1).

Table 8-1. Type of illicit drug used in past year and over lifetime

	Proportion (%)	
	Past year	Lifetime
Cannabis	32.8	66.4
Amphetamines	12.5	40.1
Tranquillisers	4.1	11.9
Ecstasy	4.0	23.1
Heroin	3.7	15.7
Hallucinogens	2.7	25.4
Cocaine	2.0	13.3
Solvents/inhalants	0.4	10.3

Almost three-fifths (58.5%) of people using cannabis in the past year were using it at least once a week, with 38.1% using it daily or almost daily (Figure 8-4).

Figure 8-4. Frequency of cannabis use in the past year



8.4 Consequences of substance use

One in ten (10.6%) of all participants reported failure to fulfil their normal role over the past year as a result of their alcohol use. The same proportion (10.1%) reported social or legal problems related to alcohol use. An even higher proportion, one quarter (26.6%) reported engaging in risk-taking behaviour over the past year as a result of their alcohol use.

The data on negative consequences of cannabis or other illicit drug use were similar to those for alcohol use. One in ten (11.1%) reported failure to fulfil their normal role. One in ten (11.1%) reported social or legal problems, and one quarter (26.5%) reported engaging in risk-taking behaviour as a result of their illicit drug use.