Executive Summary

This report presents the findings of the third secondary school drug prevalence survey administered to one thousand four hundred ninety (1,490) 2nd, 4th and 5th form students in Grenada in 2013. The survey’s objectives were two-fold:

1. To determine the prevalence and incidence of drug use among secondary school students in Grenada.
2. To establish comparisons with the results of the first and second secondary school drug prevalence surveys conducted in 2002 and 2005 as a means of informing policy makers of changes in prevalence and incidence and new findings.

Overall, the prevalence of substance use in Grenada has decreased in 2013 when compared to 2002 and 2005.

Moreover, this report finds that alcohol is the number one drug among adolescents. In addition, overall there is a reduction in alcohol use among secondary school students in Grenada with the current and past year use going back to pre-Hurricane Ivan levels. However, the results show that among the students consuming alcohol, males had a larger reduction in prevalence than females; possibly because there were more efforts in alcohol reduction directed toward males. The results also showed that the reduction of alcohol consumption varied based on form level; Form 2 students had the highest level of reduction.

The report also finds that marijuana use is the 2nd most popular drug that is presently being used among secondary school students. In relation to this, the data shows that the majority of students currently not using any substance are curious to try marijuana. The results show though that marijuana use has decreased drastically in 2013. Nevertheless, it is noted that there is a greater decrease in males than females and that the issue of use is after 3rd form. In relation to this, cigarette smoking decreased in 2013 for all time points; the reduction is seen more with males than females and at the 2nd form level. Moreover, there is not much change in reported tranquilizer and stimulant use.

As it relates to access, the ease of access is less with harder drugs, such as heroin, cocaine, and crack. Moreover, marijuana is accessed more through friends while harder drugs are accessed at social events. The results show though that overall the majority of students see drugs at or around school. The data also shows that of the students not using substances, almost a third would try a substance if given the opportunity. However, the data shows an increase in inhalant use, particularly among the 4th form students; males reportedly having higher rates of use.

The major areas of concern regarding drug use among secondary school students in Grenada include inter alia: low level of drug prevention education, the potential for
peer motivated drug use, accessibility of illicit drugs, the significant consumption of alcohol, marijuana and cigarette, and inhalants and solvents among secondary school students.

The following recommendations are therefore proposed to address the above issues:

- Enact legislation on tobacco control.
- Increase the awareness of national school policy on drugs and link the policy to the Education Act.
- Formulation of a national alcohol policy
- Amend of the Liquor Dealers’ License act.
- Increase drug prevention and awareness programming to Carriacou.
- Programs should be more directed to Form 2 students.

The limitations of the results of this study reflect the reliance on self-reporting drug use. In general, self-reporting of adolescents provides an under-estimate of the prevalence of drug use because of the under reporting. People are prone to under report use or some people might report things they are not doing. Because the survey was very long, there is a possibility that participants were fatigued and did not take time in reading and responding to questions.
# Table of Contents

**Introduction** .................................................................................................................. 1
**MAP OF GRENADA** ........................................................................................................ 4
**Overview of the Drug Situation** ......................................................................................... 5

**Methodology** ..................................................................................................................... 9
**Sample Design** .................................................................................................................. 9
**Data Collection** ................................................................................................................ 9
**Data Handling** .................................................................................................................. 10

**Presentation of Findings** ................................................................................................... 11
**Student Demographics** ..................................................................................................... 11
**Knowledge and Exposure to Drugs and Drug Use** ............................................................... 11
**Access to Drugs** ................................................................................................................ 13
**Prevalence** ........................................................................................................................ 22

**Student Demographics** ..................................................................................................... 48
**Prevalence of Cigarette Smoking** ...................................................................................... 48
**Prevalence of Alcohol Use** ................................................................................................ 50
**Prevalence of Marijuana Use** ............................................................................................ 52
**Prevalence of Tranquilizers** .............................................................................................. 54
**Prevalence of Stimulants** .................................................................................................. 56
**Prevalence of solvents and Inhalants** ................................................................................. 57

**Conclusions** ....................................................................................................................... 61

**Recommendations** ............................................................................................................ 62
List of Tables and Figures

TABLES
Table 1. Types and total quantity of drugs seized by the Royal Grenada Police Force...... 7
Table 2. Summary of persons arrested and charged with drug-related offences.............. 7
Table 4. Summary of the average age of initiation ..................................................... 22
Table 5: Summary of student demographics ............................................................ 48
Table 5: Summary of Comparison between 2005 and 2013 ....................................... 59

FIGURES
Figure 1. Drug trafficking related arrests ............................................................... 6
Figure 2. Percent of people younger than 20 years old arrested for drug related
offences ..................................................................................................................... 8
Figure 3. Summary of curiosity to try drugs: all students .......................................... 12
Figure 4. Summary of student’s curiosity to try a substance: students who have not
tried any substance .................................................................................................. 13
Figure 6. Perception of drugs at school by every used a drug .................................... 15
Figure 7. Summary of how easy the access it is to get drugs .................................... 16
Figure 8. Summary of where students are offered drugs .......................................... 17
Figure 9. Summary of who is offering drugs ................................................................ 18
Figure 10. Summary of use related risks experienced because of alcohol use or illicit
drug use ..................................................................................................................... 19
Figure 11. Summary of perceived risk for sometime use ........................................... 19
Figure 12. Summary of perceived risk for frequent use ............................................. 20
Figure 13. Summary of perceived risk: other .......................................................... 21
Figure 14. Overall prevalence of drug use ............................................................... 22
Figure 15. Prevalence of alcohol consumption ...................................................... 23
Figure 16. Prevalence of alcohol consumption by gender ........................................ 24
Figure 17. Prevalence of alcohol consumption by age ............................................ 24
Figure 18. Prevalence of alcohol consumption by geographic location ................. 25
Figure 19. First time consumed alcohol by age ...................................................... 26
Figure 21. Summary of where students consume alcoholic beverages .................... 27
Figure 22. Summary of where consuming alcoholic beverages by gender ............... 27
Figure 23. Summary of where consuming alcoholic beverages by geographic location ................................................................. 28
Figure 24. Summary of where/whom student gets alcoholic beverages .................. 29
Figure 25. Summary of where/whom student gets alcoholic beverages by gender .... 29
Figure 26. Summary of where/whom student gets alcoholic beverages by geographic location .................................................................................................................. 30
Figure 27. Summary of where/whom student gets alcoholic beverages by age ........ 30
Figure 28. Alcoholic beverage preference and frequency over past 30 days frequency ......................................................................................................................... 31
Figure 71. Trends in prevalence of stimulant use by gender ........................................ 57
Figure 72. Trends in prevalence of stimulant use by grade level ................................ 57
Figure 73. Trend in prevalence of solvent and inhalant use ........................................ 58
Figure 74. Trends in solvent and inhalant use by gender ............................................ 58
Figure 75. Trends in prevalence of solvents and inhalants use by grade level .......... 59
Introduction

The State of Grenada is comprised of three islands: Grenada, Carriacou and Petite Martinique, with a total area of 344 sq. km. and 121 km of coastline. The country has a population of 103,328\(^1\) (males: 52,651; females: 50,677), who are mainly African, European and Indian descent. The country is a parliamentary democratic state and applies a common law legal system.

Since 2009, the Grenadian economy has declined on average by 2.0%. The unemployment rate appears to have doubled between 2008 and 2012. Inflation is relatively low, with average inflation of 1.8% in 2012 compared to 3.5% in 2011. However, food inflation has increased more rapidly at around 3.0 percent. The economy returned to recession in 2012.

Grenada continues to experience problems associated with the use and trafficking of drugs. The illicit drugs used in Grenada are marijuana, and crack-cocaine. In 2012, 558 persons were admitted to treatment facilities for problems derived from the consumption of drugs (506 males and 52 females). 819 persons were arrested and charged for drug-related offences (769 males and 50 females). 136 arrestees were convicted for possession of drugs, while 4 were convicted for drug trafficking. Statistics also show that 52 persons were sentenced to prison for drug-related offences for the year 2012. This comprised of 51 males and 1 female.

In the area of financial crimes, 1 person was arrested for laundering of money derived from illicit drugs. No firearms, ammunition, explosives or other related materials were forfeited in relation to drug trafficking.

No illicit drug laboratories for drugs of natural or synthetic origin were detected and dismantled. There were no seizures or disposal of pharmaceutical products or precursor chemicals. Grenada did not receive any Pre-Export Notifications for the importation of controlled chemicals. No penal or civil sanctions were imposed for the illicit production, diversion, and illicit trafficking of pharmaceutical products; 4 administrative sanctions were imposed in 2012.

The types and quantities of drugs seized by law enforcement officials in 2012 were: cannabis plants: 11,875 units; cannabis: 940 kg; cocaine: 10.56 kg; crack: 597 g. There were no seizures of ecstasy, methamphetamine or heroin. No new drugs were detected, nor any new routes of drug administration detected during the year 2012.

The country’s drug and drug-related legislation comes from several pieces of legislation. The most significant pieces of legislation in this regard are the 1992 Drug Abuse (Prevention and Control) Act and its subsequent amendments. The Act

\(^1\) Population and Housing Census 2011
establishes control and regulatory mechanisms. Other important pieces of legislation in Grenada include the Proceeds of a Crime Act of 2012, Financial Intelligence Unit Act of 2012, and the Terrorism Act of 2012, as well as other norms on international cooperation. Grenada is also party to several treaties and conventions, which were adopted by the Organization of American States and the United Nations to combat drugs, terrorism and other criminal activities. It is also party to various bilateral agreements in the area of drug control. Legislation is in place for the control of pharmaceutical products and chemical precursors.

The Draft National Anti-Drug Strategy 2013 to 2018 articulates national policies, defines programs, and apportions responsibilities in the strategic areas of the national drug control program. The components of the Strategy are: Institutional Strengthening, Demand Reduction, Supply reduction, Control Measures, and Monitoring and Evaluation. These issues are structured in a logical framework, through the analysis of the nature and extent of the drug situation, assessment of programs conducted previously, and identification of new programs to be implemented to attain the objectives set out in the document. The Strategy is also an expression of the Government of Grenada’s commitment to regional and international drug control programmes, and reaffirms Grenada’s willingness to fulfill all its obligations to all treaties, conventions, mutual, and bilateral agreements to which it is a party in the area of drug control. The Strategy also embraces the principles of the Hemispheric Drug Strategy, and the Hemispheric Plan Of Action On Drugs, 2011-2015.

The establishment of the Grenada Drug Information Network (GRENDIN) in 2002 which in 2012 was renamed the Grenada Drug Epidemiology Network (GRENDEN), has significantly improved Grenada’s ability to participate in local, regional and international drug control projects. GRENDEN is the mechanism through which Grenada collects, analyzes, and disseminates information on drugs, and related information, for the purpose of monitoring trends, developing policy, and implementing appropriate programmes and responses. The Drug Control Secretariat is the National Observatory on Drugs in Grenada. It performs the administrative functions of GRENDEN.

Grenada is committed to regional and international efforts to combat the drug problem.

This report presents the findings of the third secondary school drug prevalence survey administered to one thousand four hundred and ninety (1,490) secondary students representing 2nd, 4th and 5th form students in Grenada in 2013. The survey’s objectives were two-fold:

1. To determine the prevalence and incidence of drug use among secondary school students in Grenada.
2. To establish comparisons with the results of the first and second secondary school drug prevalence surveys conducted in 2002 and 2005 as a means of
informing policy makers of changes in prevalence and incidence and new findings.

The report is divided into six (6) sections. The first describes the drug situation in Grenada. The second presents the methodology used. The third provides a summary of the findings. The fourth consist of a comparison of findings, comparing the current results with the survey results from 2002 and 2005. The final sections provide the conclusions and recommendations.
Overview of the Drug Situation

Cultivation and Production
Cocaine manufacturing or the cultivation of coca plants does not occur within Grenada. Marijuana, however, is cultivated on a small scale and is utilized primarily for local consumption. The majority of marijuana found locally is smuggled into Grenada from neighboring islands such as St. Vincent and the Grenadines.

Trafficking
Grenada's geo-strategic location as the southernmost island of the Eastern Caribbean, its proximity to South America and the numerous uninhabited, unpoliced islands and beaches make it an ideal location for the transshipment of narcotics to other parts of the Caribbean, North America and Europe. In fact, maritime smuggling is the principal method used to traffic cocaine and marijuana into Grenada. Drugs are smuggled into and out of the island aboard a variety of vessels, including go-fast and fishing boats, small merchant vessels and commercial containerized cargo ships. Grenada is not considered a major transshipment point for essential chemicals that may be diverted for illicit drug production.

According to the 2012 GRENDEN report, the transfer of drugs particularly cocaine through the island's sole international airport is a major concern to authorities. Figure 1 provides the number of drug trafficking related arrests from 2008 to 2012. As illustrated in Figure 1, the arrests decreased sharply from 2008 to 2009, however, since 2009 the number of drug trafficking arrests has been increasing slowly.

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Figure 1. Drug trafficking related arrests

The types of drugs seized by the Royal Grenada Police Force (RGPF) and the Customs and Excise Department (CED) are presented in Table 1. The following is a detailed analysis of the quantity seized is presented:

- The highest number of cannabis trees seized was in 2009 with 25,025 plants and the lowest number in 2011 with 5,926 plants seized.
- With the exception of 2008, the number of cannabis cigarettes seized has been steadily increasing each year, representing a 67% increase in 2012 from 2009.
- Cured cannabis had the highest seizures in 2012 with 940 kilograms seized, representing a 124% increase in the amount seized.
- The amount of cocaine seized decreased 90% from 2008 to 2012. However, the trend is not consistent and there is a slight increase in 2012.
- The amount of crack seized decreased 59% from 2008 to 2012.
- The only seizure of ecstasy tablets occurred in 2008, with 3,302 tablets seized.
Table 1. Types and total quantity of drugs seized by the Royal Grenada Police Force

<table>
<thead>
<tr>
<th></th>
<th>Cannabis plants (unit)</th>
<th>Cannabis cigarettes (unit)</th>
<th>Cannabis (kg)</th>
<th>Cocaine (kg)</th>
<th>Crack (kg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>19,573</td>
<td>1,489</td>
<td>54.54</td>
<td>101.26</td>
<td>1.44</td>
</tr>
<tr>
<td>2009</td>
<td>25,025</td>
<td>1,818</td>
<td>481</td>
<td>36</td>
<td>0.63</td>
</tr>
<tr>
<td>2010</td>
<td>9,023</td>
<td>2,578</td>
<td>440</td>
<td>59</td>
<td>0.69</td>
</tr>
<tr>
<td>2011</td>
<td>5,926</td>
<td>2,754</td>
<td>419.48</td>
<td>17.05</td>
<td>0.64</td>
</tr>
<tr>
<td>2012</td>
<td>11,875</td>
<td>2,958</td>
<td>940</td>
<td>10.56</td>
<td>0.597</td>
</tr>
</tbody>
</table>

Statistical Review

During the period of 2008-2012, a total of three thousand five hundred and eighteen (3,518) people were arrested and charged with drug related offences. Of these, 93% were males. As provided in Table 2, the number of arrests has increased from 2008 to 2012 with the largest increase in arrests (63%) occurring in 2009.

Table 2. Summary of persons arrested and charged with drug-related offences

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>441</td>
<td>29</td>
<td>412</td>
</tr>
<tr>
<td>2009</td>
<td>719</td>
<td>49</td>
<td>670</td>
</tr>
<tr>
<td>2010</td>
<td>783</td>
<td>71</td>
<td>712</td>
</tr>
<tr>
<td>2011</td>
<td>756</td>
<td>50</td>
<td>706</td>
</tr>
<tr>
<td>2012</td>
<td>819</td>
<td>50</td>
<td>769</td>
</tr>
</tbody>
</table>

Of the persons arrested and charged with drug related offences, four hundred and twenty (420) were under the age of 20 years. Figure 2 provides the percent of people younger than 20 years old that were arrested for drug related offences by year. The percent of people arrested and charged for drug-related offences ranged from 19% (in 2008) to 9% (in 2012).
Further analysis shows that as it relates to incarcerations, three hundred and fifty-one (351) persons were incarcerated during 2008-2012. Of these persons, 94% were male. 4% of the incarcerated were under 20 years old, 36% were 40 years old and older, 29% were between 30 and 39 years old and 31% between 20 and 29 years old.

The analysis also points out that with regard to mental health admissions, two thousand eight hundred and fifty-nine (2859) persons were admitted to Carlton House, Rathdune and the General Hospital for drug-related admissions during 2008-2012. Of these admissions 92% were males, 50% were admitted because of alcohol use, 35% poly drugs (this includes both with cocaine/crack and without cocaine/crack), 14% marijuana and 1% cocaine/crack.
Methodology

This section describes the methodology used to collect the data from secondary students in Grenada. Specifically, it discusses sample design, data collection and data handling.

Sample Design

Students enrolled in Forms 2, 4, and 5 at seventeen (17) public and private secondary schools in Grenada were included in the survey's sample of 1,825 students. A total of 1,490 students from these forms participated in the survey. The data were collected using a two-stage cluster sampling design. The first stage randomly selected the secondary schools to participate. The second stage identified the 2nd, 4th and 5th Form classrooms within the selected secondary schools. All students within the identified classrooms were asked to participate in the survey.

Data Collection

Data was collected from all attending students in the selected forms through the use of a self-administered questionnaire (refer to Appendix 1). Trained facilitators were used to distribute and collect the research instruments, and answer student questions or concerns as needed. Confidentiality of information was maintained throughout the entire data collection process. Specifically, facilitators did not have access to students' responses during the time the questions were answered and no information that could be used to identify respondents was recorded.

The survey collected data on the use of the following drugs: tobacco, alcohol, tranquilizers, stimulants, marijuana, cocaine hydrochloride, crack cocaine, ecstasy, methamphetamines, hallucinogens, heroin, opium, morphine, and solvents/inhalants.

Drug use was measured through three indicators as outlined below:

1. Lifetime prevalence/experimental drug use: the percentage of the targeted population that used drugs at least once in their lifetime;
2. Prevalence in the last year: the percentage of the target population that used drugs one or more times during the 12 months preceding the survey;
3. Prevalence in the last month/current use: the percentage of the population that used drugs one or more times in the 30 days immediately preceding the survey.

In addition to the prevalence data, information was also collected on other relevant indicators such as the number of friends who used illicit drugs and or alcohol, desire and opportunity to use drugs, exposure to prevention measures, and extent of behavioral and/or disciplinary problems at school.
Data Handling
The steps recommended by the Inter-American Drug Use Data System (SIDUC) to ensure accuracy, completeness and integrity of the data were adhered to by survey coordinating personnel. For instance, facilitators gave clear and consistent instructions and explanations to reduce the chance of ambiguity. Additionally, they were responsible for checking all returned questionnaires for completeness and consistency in responses as soon as possible after the exercise was completed in each class. Finally, the data was entered twice into Excel for verification purposes to eliminate the chance of data entry error. The final Excel Spreadsheet containing the data was converted to SPSS format (Statistical Package for Social Sciences) for use in data tabulation.
**Presentation of Findings**

The presentation of findings provides the results of the survey. It consists of three sections. The first section describes the demographic information of the students. The second section discusses the knowledge and exposure to drugs and drug use; examining the curiosity to try drugs, student access to drugs, use related risks and risk perceptions. The final section presents the self-reported prevalence of each drug surveyed.

**Student Demographics**

One thousand four-hundred and ninety (1,490) students from across seventeen (17) public and private secondary schools participated in the third secondary school drug prevalence survey. This sample represents a population of 5,570 students, as illustrated in Table 3, the majority of this population were between 15 and 16 years old (41.5%) followed by students 12 to 14 years old (31.2%) and 17 years old and older (16.8%). Approximately 37.5% of the students were in the 2nd Form, 35.5% in the 4th Form and 27% in the 5th Form. There were slightly more females (51.3%) than males (48.3%).

**Table 3. Students’ demographics (expanded to population)**

<table>
<thead>
<tr>
<th>Demographic indicator</th>
<th>Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of school</td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>5409 (97.1)</td>
</tr>
<tr>
<td>Private</td>
<td>161 (2.9)</td>
</tr>
<tr>
<td>Age (in years)a</td>
<td></td>
</tr>
<tr>
<td>11-14</td>
<td>1739 (31.2)</td>
</tr>
<tr>
<td>15-16</td>
<td>2312 (41.5)</td>
</tr>
<tr>
<td>17+</td>
<td>938 (16.8)</td>
</tr>
<tr>
<td>Genderb</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>2857 (51.3)</td>
</tr>
<tr>
<td>Male</td>
<td>2690 (48.3)</td>
</tr>
<tr>
<td>Form in school</td>
<td></td>
</tr>
<tr>
<td>2nd</td>
<td>2090 (37.5)</td>
</tr>
<tr>
<td>4th</td>
<td>1976 (35.5)</td>
</tr>
<tr>
<td>5th</td>
<td>1505 (27)</td>
</tr>
</tbody>
</table>

Note: a Five hundred eighty-one (581) students did not disclose their age.

b Twenty-three (23) students did not report their gender.

**Knowledge and Exposure to Drugs and Drug Use**

Students were asked several questions about their experiences with drugs and drugs use. The following section reports the results of the responses. It is divided
into three sections: curiosity to try drugs; where drugs are accessed; ease of access to drugs; risk perception; and use related risks.

Curiosity to trying drugs

Overall, 28.5% of students reported they were curious to try any illicit drug (see Figure 3). Many students were curious to try marijuana (22%) and to a lesser extent hemp (10%). Few students were curious about cocaine (4%), ecstasy (4%) and crack (2%).

Figure 3. Summary of curiosity to try drugs: all students

![Curiosity to try drugs chart]

The majority (77%) of students reported using at least one substance in their lifetime. Of the remaining 23%, 8% reported that they were curious to try a substance (Figure 4). Of these students, the majority (68%) was curious to try marijuana, 14% hemp and 5% crack or ecstasy. Most notable is that 28% of these students would use a substance if given the opportunity.
Access to Drugs

Drugs at School

Students were asked questions about the presence of drugs at or around their school. Overall, 38% of the students reported that drugs are at their school and 57% reported that drugs are next to their school (Figure 5). 57% percent of students reported that students bring drugs to school and 50% reported that students try/deal drugs at school. However, 25% reported seeing students selling drugs at school and 33% reported seeing a student use drugs at school.
To assess the resilience of students, a summary of the students’ perception of drugs at school is presented in Figure 6. Students who have used at least one substance in their lifetime, have a greater perception that there are drugs at school than students who have not tried any substances. Although the perception of presence of drugs at school is less 22% vs. 44%, the perception that drugs are next to school is similar to all students responding (46% vs. 64%). For students who have not tried drugs, they are less likely to perceive students bringing drugs to school (43% vs. 63%), and students trying or dealing drugs at school (34% vs. 57%). In addition, students who reported not trying any substance are less likely to have seen a student selling drugs (12% vs. 30%) and seeing a student using drugs (17% vs. 39%).
Figure 6. Perception of drugs at school by ever used a drug

Ease of Access to Drugs

Marijuana, which has the third highest prevalence of use in secondary students, is the easiest drug for students to obtain; 38% of the students reported it is easy for them to get (Figure 7). Twenty percent (20%) of the students reported that they would not be able to get marijuana. Of the other listed drugs, hemp is the second easiest to obtain (19%) and cocaine the third; 11% of the students reported it is easy to get. Overall, students reporting that drugs were hard for them to get ranged from 13% (marijuana) to 21% (cocaine) and students reporting that they would not be able to get any drug ranged from 20% (marijuana) to 34% (heroin and LSD).
Where drugs are offered

Of the students reporting being offered drugs (Figure 8), with the exception of ecstasy, most students are offered drugs on the block. Across all drugs, the range of students reporting being offered drugs on the block ranged from 38 (ecstasy) to 550 (marijuana). With the exception of marijuana and LSD, the second highest rating of where drugs are offered is “other”. Students reporting other ranged from 26 (LSD) to 316 (marijuana). It is important to note that 369 of the students who were offered marijuana, were presented with it at home. It is also important to note that 38 students reported that LSD is being offered in the schools and 41 on the block. In addition, 38 students reported that LSD was offered at other social events and 35 at sporting events. Finally, the primary place ecstasy is offered is at a friend’s house (n=69).
Who is offering drugs

Students were asked about who offers drugs to them. The majority of students (>50%) were not offered drugs. Of the students who reported being offered drugs, with the exception of crack, friends are the primary persons who are offering drugs (Figure 9). The range of students reporting that their friends offer them drugs is 27% (crack) to 57% (marijuana). With the exception of marijuana and crack, the second highest category of who offered students’ drugs is someone they do not know. Students report ranged from 26% (cocaine) to 32% (heroin). It is important to note that crack is more likely offered by someone the student knows but is not their friend (35%) and to a lesser extent by a friend (27%) and someone the student does not know (24%).
Use-Related Risks

Students were asked about their experiences that were caused by their alcohol or illicit drug use. The majority (63%) of students did not experience any of the consequences listed. Provided in Figure 10 is the distribution of students reported experiences: 18% of students reported issues with anger management, 17% had academic issues, 15% had problems with family and/or friends, and 7% had trouble with the police. It is important to note that some students experience mental health concerns. Specifically, 11% had memory loss, 9% seriously considered thinking about suicide, 8% considered self-harm and have taken advantage of someone (each), and 6% had someone take advantage of them sexually.
Figure 10. Summary of use related risks experienced because of alcohol use or illicit drug use

Risk Perception

Overall, most students recognize that sometime use of drugs is very harmful (Figure 11). The range of student’s perception that using drugs sometimes is harmful is 35% (inhalants) to 60% (cocaine). It is interesting to note that many students do not know the harm of sometime use of ecstasy, inhalants and solvents, and tranquilizers and stimulants.

Figure 11. Summary of perceived risk for sometime use
With the exception of alcohol and ecstasy, the majority of students perceive each drug listed as very harmful when used frequently (Figure 12). Student perception that frequent use of drugs is harmful ranges from 50% (ecstasy) to 72.6% (cigarettes). With respect to ecstasy 49.8% of students reported frequent use being harmful, however, 32.2% reported they did not know the harm in frequent consumption of ecstasy. As with sometime use of ecstasy (32%), inhalants and solvents (19%), and tranquilizers and stimulants (21.7%), many students reported not knowing the harmful effects.

**Figure 12. Summary of perceived risk for frequent use**

Student perception of harm for inhaling secondhand smoke from cigarettes and marijuana and getting drunk is provided in Figure 13. The majority of students (>51%) reported that they are very harmful. However, more than 10% of the students do not know the harmful effects of second hand cigarette smoke.
Figure 13. Summary of perceived risk: other
Prevalence

Overall, the substance of choice with secondary school students is alcohol (72%), followed by cigarettes (27%), marijuana (20%) and inhalants and solvents (16%) (See Figure 14). Fewer than 10% of the students reported using other substances.

Figure 14. Overall prevalence of drug use

As seen in Table 4, the average of age of initiation of using drugs is between 11 and 13 years. The youngest was using inhalants and solvents. The oldest age of initiation was 13 years for stimulants, tranquilizers and marijuana.

Table 4. Summary of the average age of initiation

<table>
<thead>
<tr>
<th>Substance</th>
<th>Average (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Used Inhalants and solvents</td>
<td>11 (3)</td>
</tr>
<tr>
<td>Smoked Cigarettes</td>
<td>12 (3)</td>
</tr>
<tr>
<td>Consumed alcoholic drink</td>
<td>12 (3)</td>
</tr>
<tr>
<td>Any illicit drug</td>
<td>12 (3)</td>
</tr>
<tr>
<td>Cocaine</td>
<td>12 (4)</td>
</tr>
<tr>
<td>Used Stimulants</td>
<td>13 (2)</td>
</tr>
<tr>
<td>Used Tranquilizer</td>
<td>13 (3)</td>
</tr>
<tr>
<td>Marijuana</td>
<td>13 (3)</td>
</tr>
</tbody>
</table>
Alcohol Prevalence

Alcoholic beverages are the most prevalent substances used by secondary students (Figure 15). Seventy-two percent (72%) of secondary students reported having at least one alcoholic beverage in their lifetime and 35% have consumed alcohol in the 30 days prior to the survey. Overall, 75% of females tried alcohol at least once in their lifetimes while 69% of males did. Compared to 36% of males, 34% of females have consumed alcoholic beverages during the 30-days prior to the survey (Figure 16).

Figure 15. Prevalence of alcohol consumption
Comparing alcohol use by age, older students (17 years old and older) have the highest prevalence of consuming alcoholic beverages (Figure 17) for lifetime, 1-year and 1-month prevalence.

There is a difference in prevalence of alcohol consumption by geographic location (see Figure 18). Even though the majority of students have reported alcoholic consumption in their lifetime, almost all of the students attending school in Carriacou (96%) have experimented with drinking alcohol and 58% have had an alcoholic beverage in the past 30 days of the survey. The proportion of students reporting drinking alcoholic beverages is similar in the rural and urban areas. In
In contrast to Carriacou students, less than half of the students reported consuming alcohol in the 30 days prior to the survey.

**Figure 18. Prevalence of alcohol consumption by geographic location**

![Bar chart showing prevalence of alcohol consumption by geographic location](chart)

### Patterns of use

Comparing age groups, 32% of the older students (17 years old and older) first consumed alcohol over the past 30 days, compared to 24% of the 11 to 14 year olds and 17% of the 15 to 16 year olds (Figure 19).
Where Consuming Alcoholic Beverages

When asked where students drink alcohol 46% reported they drink at other social events, 22% other and 17% at home (Figure 21). Few students reported consuming alcoholic beverages at school or at a friend’s house (2% each). Overall, a similar pattern exists between males and females, with the exception that males had a higher prevalence of drinking on the block (10%) than females (4%), as seen in Figure 22. Examining the differences in geographic regions, students attending Carriacou schools reported a significantly lower proportion of students consuming alcoholic beverages at other social events (37% vs. 46%) and at home (10% vs. 14% for the urban areas and 18% for the rural areas), as seen in Figure 21. However, students attending Carriacou secondary school consume alcohol significantly more at sporting events (16% vs. 5% for urban and rural areas). For students attending schools in the urban and the rural areas, there is no statistically significant difference and the pattern is similar to the overall pattern of response in Figure 23.
Figure 21. Summary of where students consume alcoholic beverages

<table>
<thead>
<tr>
<th>Location</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>At home</td>
<td>17%</td>
</tr>
<tr>
<td>At school</td>
<td>2%</td>
</tr>
<tr>
<td>On the block</td>
<td>6%</td>
</tr>
<tr>
<td>At a friend's house</td>
<td>2%</td>
</tr>
<tr>
<td>At sporting events</td>
<td>5%</td>
</tr>
<tr>
<td>At other social events</td>
<td>46%</td>
</tr>
<tr>
<td>Other</td>
<td>22%</td>
</tr>
</tbody>
</table>

Figure 22. Summary of where consuming alcoholic beverages by gender

<table>
<thead>
<tr>
<th>Location</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>At home</td>
<td>15%</td>
<td>17%</td>
</tr>
<tr>
<td>At school</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>On the block</td>
<td>4%</td>
<td>10%</td>
</tr>
<tr>
<td>At a friend’s house</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>At sporting events</td>
<td>6%</td>
<td>5%</td>
</tr>
<tr>
<td>At other social events</td>
<td>44%</td>
<td>48%</td>
</tr>
<tr>
<td>Other</td>
<td>20%</td>
<td>24%</td>
</tr>
</tbody>
</table>
**Access to Alcoholic Beverages**

Students are getting their alcoholic beverages from friends (40%) and, to a lesser extent, from the shop; as is indicated by 20% of the respondents (Figure 24). There is little difference between males and females in where they access alcohol (Figure 25). Comparing females and males, females are getting alcohol more from other relatives (11%) while males are getting alcohol more from a street vendor (13% vs. 5%) and the shop (24% vs. 16%).
Similar patterns exist for geographic location. However, students attending Carriacou secondary school disproportionately get their alcohol from street vendors (18% vs. 8% for urban and rural areas) (Figure 26). Comparing students by age, there are differences in the pattern of access by age group (Figure 27). Fifteen and 16 year old students are more likely to access alcohol from friends (46% vs. 35% for 11 to 14 year olds and 33% for 17 year olds and older). Whereas 17 year old and
older students access their alcohol more from the shop (33%) compared with 15% of the 15 to 16 year olds and 14% of the 11 to 14 year olds.

Figure 26. Summary of where/whom student gets alcoholic beverages by geographic location

Figure 27. Summary of where/whom student gets alcoholic beverages by age
**Type of Alcoholic Beverage Consumed and Frequency of Consumption**

The type of alcoholic beverage preferred is beer, 71.2% of the students drink beer. Of the respondents who drink beer, 12% drink daily or several times a week and 18% drink on the weekends (Figure 28). Wine is consumed by 55.4% of students. Approximately 8% of the students drinking wine consume daily or several times a week and 11.7% drink on the weekends. Hard liquor is consumed by 57.4% and 10% drink daily or several times a week.

**Figure 28. Alcoholic beverage preference and frequency over past 30 days**

![Alcoholic beverage preference and frequency over past 30 days](chart.png)

**Cigarette Prevalence**

Approximately 27% of secondary school students reported smoking cigarettes, the second highest prevalence of substance use (Figure 29), in their lifetime. The one-month prevalence is 5% and one-year prevalence is 9%. The prevalence of smoking cigarettes was higher for males than females for all time periods (Figure 30). There was little difference between 1-year and 1-month prevalence across forms, suggesting that even though many students try cigarettes, few continue smoke. The same trends are illustrated with the age groups (Figure 31) and geographic region (Figure 32).
Figure 29. Prevalence of cigarette smoking

Figure 30. Prevalence of cigarette smoking by gender
Figure 31. Prevalence of cigarette smoking by age

Figure 32. Prevalence of cigarette smoking by geographic region
Marijuana Prevalence

Marijuana has the third highest reported lifetime prevalence of substance use among secondary students (Figure 33). Approximately 20% of secondary students reported a lifetime prevalence of marijuana use, 13% indicated a 1-year prevalence and 7% said a 1-month prevalence. Overall, males use marijuana more than females (Figure 34). The difference in lifetime prevalence is (24% vs. 15%, respectively), 1-year prevalence is 16% vs. 10%, and 1-month prevalence is 9% vs. 5%. Figure 35 presents the summary of marijuana prevalence between age groups. Proportionately, the 17-year-olds have consumed alcohol more than the other age groups in their lifetime. However, approximately the same proportion of students in the 15-16 year group and 17 years and older group report consuming alcohol for the 1-year and 1-month prevalence. There was no difference between students attending schools in Carriacou, urban or rural areas on the mainland (Figure 36) across all time points.

Figure 33. Prevalence of marijuana use
Figure 34. Prevalence of marijuana use by gender

Figure 35. Prevalence of marijuana use by age
Figure 36. Prevalence of marijuana use by geographic location

Access to marijuana

Students were asked where they most often used marijuana. The results are in figure 37. Overall, 32% of the students reported using marijuana on the block followed by 21% at home and 16% at a friend’s house. When students were asked who they usually get marijuana from, the majority of students (56%) reported getting marijuana from friends (Figure 38).

Figure 37. Summary of where marijuana is most often used
Prevalence of Inhalants and Solvent Use

Inhalants and solvents were the fourth most prevalent substances reportedly used by secondary school students. Overall 16% of the students reported lifetime use, 10% reported a 1-year prevalence and 6% a 1-month prevalence (Figure 39). There was no significant difference in the prevalence between males and females (Figure 40) and by age group (Figure 41) at each time point.
Figure 39. Prevalence of inhalant use

Figure 40. Prevalence of inhalant and solvent use by Gender
Figure 41. Prevalence by Age Group

Proportionately, more students from Carriacou reported using inhalants and solvents at each time point (see Figure 42) than the rural and urban areas. However, the percent difference between rural, urban and Carriacou is small.

Figure 42. Prevalence of inhalant and solvent use by geographic region

Other Drug Use

Stimulant Prevalence
According to the 2013 CICAD survey, 4% of the students have used stimulants at least once in their lifetime (Figure 43). Overall, 6% of males tried stimulants at least once in their lifetime compared to 3% of females (Figure 44). The comparison of
rural, urban and Carriacou is in figure 45. There is little difference between rural, urban and Carriacou students reported use.

**Figure 43. Prevalence of stimulant use**

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Rural</th>
<th>Urban</th>
<th>Carriacou</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifetime</td>
<td>4%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>1-year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-Month</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Figure 44. Prevalence of stimulant use by gender**

**Prevalence of Stimulant Use**

- **Male**
  - Lifetime: 6%
  - 1-year: 5%
  - 1-Month: 3%

- **Female**
  - Lifetime: 3%
  - 1-year: 1%
  - 1-Month: 1%
Crack Prevalence

Lifetime crack cocaine use was reported by 3% of the students and 2% in the month prior to the survey (Figure 46). Males were more likely to report using crack (5%) at least once compared to females (2%), as highlighted in Figure 47. There is minimal difference between age groups reported crack use (see figure 48) and rural, urban and Carriacou reported crack use (figure 49).
Figure 47. Prevalence of crack use by gender

Figure 48. Prevalence of crack use by age group
Lifetime tranquilizer use was reported in 4% of the students (Figure 50). Proportionately, more males have used tranquilizers (6%) in their lifetime than females (2%), as seen in Figure 51. Current use of tranquilizers is approximately the same across age groups (Figure 52) and geographic regions (Figure 53).
Figure 51. Prevalence of tranquilizer use by gender

<table>
<thead>
<tr>
<th></th>
<th>Lifetime</th>
<th>1-year</th>
<th>1-Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>6%</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Female</td>
<td>2%</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Figure 52. Prevalence of tranquilizer use by age

<table>
<thead>
<tr>
<th></th>
<th>Lifetime</th>
<th>1-year</th>
<th>1-Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>11--14</td>
<td>4%</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>15 - 16</td>
<td>4%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>17+</td>
<td>2%</td>
<td>2%</td>
<td>1%</td>
</tr>
</tbody>
</table>
Cocaine

Three percent of students reported lifetime use of cocaine (Figure 54). Cocaine use is more likely in males (6%) compared to females (1%), as evidenced by Figure 55. There is no statistical difference between age and geographic region across all time points (Figures 56 and 57, respectively).
Figure 55. Prevalence of cocaine use by gender

Figure 56. Prevalence of cocaine use by age
Figure 57. Prevalence of cocaine use by geographic region

<table>
<thead>
<tr>
<th></th>
<th>Lifetime</th>
<th>1-year</th>
<th>1-month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>5%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>Urban</td>
<td>3%</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>Carriacou</td>
<td>8%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

This section of the report highlights the main changes observed in the various measures which were evaluated during the first, second and third secondary school drug prevalence surveys. Comparisons are made within the following thematic areas: students' demographics and prevalence of drug use. The section concludes with a discussion of results.

Student Demographics

The student demographics for each year the survey was administered is in table 5.

<table>
<thead>
<tr>
<th></th>
<th>1st prevalence survey 2002</th>
<th>2nd prevalence survey 2005</th>
<th>3rd prevalence survey 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of students sampled</td>
<td>4223</td>
<td>3088</td>
<td>1490</td>
</tr>
<tr>
<td>Age distribution (%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 - 14</td>
<td>49</td>
<td>33.8</td>
<td>31.2</td>
</tr>
<tr>
<td>15 - 16</td>
<td>37.9</td>
<td>41.3</td>
<td>41.5</td>
</tr>
<tr>
<td>17+</td>
<td>13.1</td>
<td>17.9</td>
<td>16.8</td>
</tr>
<tr>
<td>Grade/form level (%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd</td>
<td>52.9</td>
<td>33.1</td>
<td>37.5</td>
</tr>
<tr>
<td>4th</td>
<td>41.2</td>
<td>35.6</td>
<td>35.5</td>
</tr>
<tr>
<td>5th</td>
<td>Not assessed</td>
<td>31.3</td>
<td>27</td>
</tr>
<tr>
<td>Gender (%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>43.5</td>
<td>54.2</td>
<td>48.3</td>
</tr>
<tr>
<td>Female</td>
<td>56.5</td>
<td>45.8</td>
<td>51.3</td>
</tr>
<tr>
<td>Type of school (%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>98.9</td>
<td>100</td>
<td>97.1</td>
</tr>
</tbody>
</table>

Prevalence of Cigarette Smoking

Comparative analysis, as shown in Figure 58, indicates that lifetime and past year prevalence of cigarette smoking among students decreased in 2013 as compared to 2002 and 2005. Overall, the prevalence of cigarette smoking has decreased in 2013 for all time periods.
Trends in Prevalence of Cigarette Smoking by Gender

Gender analysis (Figure 59) revealed that 14.2% fewer males experimented with cigarette smoking in 2013. The prevalence of smoking cigarettes among females decreased by 6.5% in 2013 as compared to 2005. There is little difference in current use over time.
Trends in Prevalence of Cigarette Smoking by Grade Level

In examining cigarette smoking by form it was noted that the prevalence of cigarette smoking in Form 2 was reduced by 24.6% in 2013 from 2005 (Figure 60). There was also a decrease in the 4th form, but not as much as 2nd form; with a decrease of 5.1% in 2013 from 2005.

Figure 60. Trends in lifetime and current prevalence of cigarette smoking by grade level

Prevalence of Alcohol Use

Lifetime prevalence of alcohol among secondary school students is presented in figure 61. With more than 70% of the students reporting use, alcohol consistently remains the choice of drug among secondary students. Alcohol use ranges from 72% (in 2013) to 84.1% (in 2005). Alcohol use decreased in 2013 when compared to 2005 for all time periods. For the lifetime prevalence there was an 8.1% decrease, 8.5% for the past year and 7.8% for the past 30 days. The decrease was consistent for all time periods.
When comparing gender (Figure 62), the prevalence of males drinking decreased more than females in 2013, 18.6% and 5.6% respectively in 2013 from 2005. There is little difference over time in current use of alcohol.

Comparing the form level, there was a larger decrease in the prevalence of alcohol consumption in 2nd form as compared to 4th form in 2013 (Figure 63). Second form students’ prevalence of alcohol drinking decreased by 17.8% and 4th form decreased by 10.7%. There is little difference in the current prevalence of alcohol over time.
Prevalence of Marijuana Use

Overall, the trend in marijuana use decreased in all time periods in 2013 when compared to 2005 (Figure 64). The lifetime prevalence decreased by 7.8%, past year 2.8% and current 1.6%.
Comparing marijuana use by gender, males increased their prevalence of marijuana use in 2013 and females reduced their prevalence (Figure 65). Males’ prevalence increased by 8.2% and females decreased by 6.8%. There was little difference in the current use of marijuana.

**Figure 65. Trends in lifetime and current prevalence of marijuana use by gender**

Overall, 2nd and 4th Forms reduced their use of marijuana in 2013. Second form reduced marijuana use by 4.4% and 4th form by 7.4% (Figure 66). Interesting, 2005 is characterized by an increase in marijuana use in 4th Form. This increase coincides with Hurricane Ivan, which devastated Grenada in 2004. The current use of marijuana remained approximately the same.

**Figure 66. Trends in lifetime and current prevalence of marijuana use by grade level**
Prevalence of Tranquilizers

Although tranquilizer use is not high, the lifetime prevalence of tranquilizer use was reduced from 7.1% in 2002 to 4% in 2013 resulting in a 3.1% reduction in lifetime prevalence (Figure 67). However, there was a slight increase in the prevalence from 2005 to 2013 for the past year (0.5% increase) and for current prevalence (0.2% increase).

There was a difference in the prevalence of tranquilizer use by gender. Male’s lifetime prevalence was reduced slightly (0.8%) and females reduced by 4.6% (Figure 68). The current tranquilizer use also reduced for both males and females.
Although there was a larger decrease in the lifetime prevalence of tranquilizer use in 4th form students than 2nd form students, the change is minimal (figure 69). There was little change in current prevalence of tranquilizer use for both 2nd and 4th form students.
**Prevalence of Stimulants**

Lifetime, past year and past month prevalence of stimulant use among secondary students decreased in 2005 from 2002 (figure 70). However, the prevalence increased in 2013 for each time point.

**Figure 70. Trends in prevalence of stimulant use**

![Graph showing trends in stimulant use](image)

Stimulant use increased in 2013 for all time prevalence time periods (figure 71). The previous time period comparison reflected a decrease in stimulant use in 2005 from 2002. However, in 2013, stimulant use was either similar to the 2002 or greater.
All forms registered an increase in prevalence of stimulant use (figure 72).

**Prevalence of solvents and Inhalants**

Lifetime prevalence has increased in 2013 as compared to 2002 and 2005. This is seen in the one-year prevalence and one-month prevalence (Figure 73).
Figure 73. Trend in prevalence of solvent and inhalant use

For both males and females, the prevalence of inhalant use has increased in 2013 (figure 74).

Figure 74. Trends in solvent and inhalant use by gender

The increase in 4th form is higher than 2nd form when comparing inhalant use in 2013 (figure 75).
**Table 5: Summary of Comparison between 2005 and 2013**

<table>
<thead>
<tr>
<th>Drug Use Prevalence</th>
<th>Increase or decrease in 2013</th>
<th>Percent change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigarette smoking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>-</td>
<td>10.6</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>-</td>
<td>2.8</td>
</tr>
<tr>
<td>Current prevalence</td>
<td>-</td>
<td>0.5</td>
</tr>
<tr>
<td>Alcoholic drinks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>-</td>
<td>12.1</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>-</td>
<td>8.5</td>
</tr>
<tr>
<td>Current prevalence</td>
<td>-</td>
<td>7.8</td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>-</td>
<td>7.8</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>-</td>
<td>2.8</td>
</tr>
<tr>
<td>Current prevalence</td>
<td>-</td>
<td>1.6</td>
</tr>
<tr>
<td>Tranquilizers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>-</td>
<td>1.9</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>+</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Current prevalence</td>
<td>+</td>
</tr>
<tr>
<td>--------------------------</td>
<td>--------------------</td>
<td>------</td>
</tr>
<tr>
<td><strong>Stimulants</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>+</td>
<td>1.3</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>+</td>
<td>1.3</td>
</tr>
<tr>
<td>Current prevalence</td>
<td>+</td>
<td>0.6</td>
</tr>
<tr>
<td><strong>Solvents and inhalants</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime prevalence</td>
<td>+</td>
<td>6.3</td>
</tr>
<tr>
<td>Past year prevalence</td>
<td>+</td>
<td>4.1</td>
</tr>
<tr>
<td>Current prevalence</td>
<td>+</td>
<td>2.9</td>
</tr>
</tbody>
</table>

*Notes:*

a: “+” indicates an increased prevalence in 2013 when compared to the previous administration in 2005.

b: “-” Indicates a decrease prevalence of the indicator
Conclusions

Secondary school represents a critical transition period for adolescents. Not only are adolescents moving toward social and economic independence, they are developing their identity and skills needed to carry out adult relationships. However, this period is also characterized as one where adolescents are developing their abstract thinking, do not fully understand complex concepts and do not link behavior with consequences. This experimentation period is one where peer pressure and other outside pressures exert influence on using alcohol, cigarettes, marijuana and other drugs. The initiation of drug use and other risky health behaviors develops behavioral patterns that can have lasting impacts on the psychological, behavioral and health and wellbeing.

In this current survey, alcohol, marijuana and tobacco are the main substances used by secondary students. Alcohol is the primary substance of choice among secondary school students, with more than 70% of the student reported consuming alcoholic beverages at least once in their lifetime. Fewer than 5% of the students reported using other drugs, such as morphine, Heroin, tranquilizers, stimulants and opium. Even though few students reported using these harder drugs, monitoring of their use should still be continued regularly.

The results of the current survey are consistent with the results from 2002 and 2005. Marijuana, tobacco and alcohol are the drugs most often used by students, although there is a reduction in the prevalence of their use. In contrast, inhalants and solvents had a 6% increase in report student use.

In this comparison (with the exception of inhalant and solvent use), it is important to note that there is an increase in reported use in 2005 from 2002. This could be a post-traumatic stress response contributed to Hurricane Ivan in 2004, which caused considerable psychological and economic damage to Grenada. In addition, the reduction in reported substance use in 2013 returns levels to pre-Hurricane Ivan levels.

There is a cultural acceptance of alcohol and marijuana at the societal level. The results of this survey suggest that many students may be accepting of alcohol and marijuana use. In addition to the large proportion of students who have tried alcohol, tobacco and marijuana, a fairly large proportion of students (61%) reported that sometime use of marijuana and alcohol are not very harmful. Similarly 68% of

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the students not using any substance reported a curiosity of trying marijuana and 28% reported that would try an illicit substance given the opportunity. Drugs, specifically marijuana, are easily accessed as the majority of students report being offered marijuana on the block. The harder drugs are more likely seen at social functions. Furthermore, the majority of students reported seeing drugs in and around their schools. This may present a desensitization for adolescents; increasing their likelihood of early initiation. To further compound the situation, there is no law providing a minimum age of alcohol consumption. The Liquor Dealers’ License Act, CAP 174 enacted in 1911 states that alcohol can be purchased by anyone regardless of age if liquor is in a corked or sealed vessel, however you have to be at least 16 years to consume on the premises of the retailer.

The average age of alcohol initiation is 11 years and marijuana initiation is 13 years. This indicates that students start experimenting with substances in early adolescence; the time students begin to establish their identities. Such early initiation can contribute to increased violence and low academic performance: increasing the likelihood of students dropping out in Form 3. Form 3 is seen as the time where students self-select to drop out of school\(^6\). In relation to this, it has been seen in previous studies that the majority of adults arrested for drugs have not completed secondary school. Even though the prevalence of students using drugs has decreased since 2002 and 2005, given the findings of this study, prevention programming that targets students in 2\(^{nd}\) form should be prioritized.

**Recommendations**

In an effort to delay the age of first time use of substances, it is imperative that relevant laws exist to address purchase and consumption. It is therefore concerning that existing legislation is archaic or legislation is non-existent. The following are recommendations based on the results of this study:

- **Formulate a national alcohol policy** – Currently, there is no national alcohol policy. A national alcohol policy should be developed, which, at a minimum, should consist of specifying a legal alcohol consumption age as well as marketing messages to persons under the legal age.
- **Amend the Liquor License Act** - the Liquor Dealer’s License Act, CAP 174 has not been amended since 1988. The Liquor Dealer’s License Act states that liquor dealers can “(1) sell or deliver or supply or knowingly permit to be sold or delivered or supplied to any person under the age of 16 years any

intoxicating liquor (excepting liquor as are sold or delivered or supplied in
corked or sealed vessels for consumption off the premises; and (2) permit
any such persons to drink any intoxicating liquor on his or her premises.” As
stated, this act allows any person of any age to purchase alcohol. In addition,
there is no legislation that prohibits the consumption of alcohol under the
age of 16 years.
- Education Act should modified – Currently, there is no link between school
policy with the Drug and Education Act. This link should be added to
strengthen the Education Act to protect the health of primary and secondary
students.
- Programming to Carriacou – The results suggest that secondary school
students in Carriacou are more likely to experiment with substances and
continue their use. There should be increased programming of drug
education to Carriacou.
- Programs should be directed toward 2nd Form students and expanded to 4th
and 5th Form students – As the results of this survey suggest, the average age
of substance use is between 11 and 13 for all substances. This suggests that,
on average, substances are being used as secondary students are beginning
establishing their identities and independence. Such early initiation
contributes to the economic growth of the nation. The goal of the Office of
Drug Control is to delay the start of drug use. As such, drug education and
awareness programming should be directed toward 2nd Form and continue
with 4th and 5th Form students to not only increase awareness of the harm
but to counter the societal acceptance of some substances.