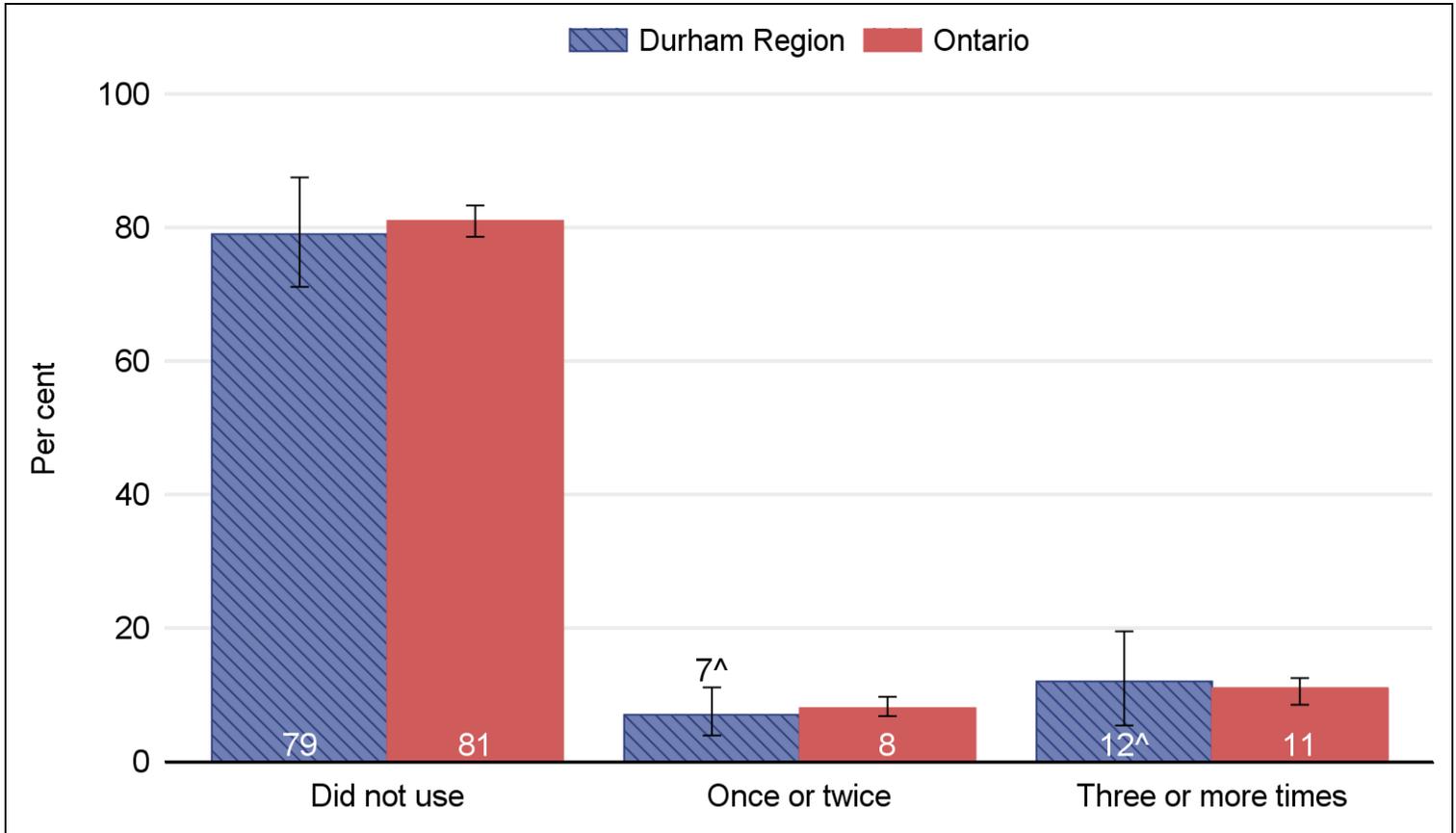


Quick facts:

# Percentage of secondary school students using alcohol and cannabis on the same occasion in the past year, 2016-2017



Release date: May 2018



**Notes**  
Results were weighted and sex-by-grade adjusted to the Ontario 2014-2015 student enrollment.  
Error bars represent the 95 per cent confidence intervals around the percentage. The true or actual percentage falls within the range of values, 95 out of 100 times. Categories may not sum to 100% as item non-response is not presented in the results above.  
^ Interpret with caution as the coefficient of variation (CV) is between 16.6 and 33.3 per cent, inclusive.  
NR - Unreliable and not releasable as the CV is greater than 33.3 per cent.  
Source: Public Health Monitoring of Risk Factors in Ontario – Ontario Student Drug Use and Health Study (OSDUHS), 2016-17.

## Summary

While the majority (79%) of Durham Region secondary school students did not use alcohol and cannabis on the same occasion in the past year, one in five reported using both drugs at least once on the same occasion. These percentages were similar across Ontario.

## Questions

In the last 12 months, how often did you use cannabis (“weed”) and alcohol on the same occasion that is, so that their effects overlapped?

- 1 or 2 times
- 3 to 5 times; 6 to 9 times; 10 to 19 times; 20 to 39 times; 40 or more times
- Used cannabis and alcohol together but not in the last 12 months; never used these together in lifetime; never used either of these in lifetime

## Survey methods

The Ontario Student Drug Use and Health Survey (OSDUHS) targets students, Grades 7 to 12, enrolled in the public and catholic regular school system. The OSDUHS uses a two-stage (school, class) stratified (region and school type) cluster sample design, and oversampling in PMO-participating public health units. The survey is self-administered in the classroom, taking, on average, 35 minutes to complete. Participation is voluntary and anonymous. Students, 17 years old and younger, absent or without signed consent forms on the day of the survey do not participate.

This survey excluded groups, such as street youth and dropouts, in which health behaviours such as healthy eating, physical activity, drug use, etc. may be underestimated. In addition, self-reporting may result in under-reporting whether from social desirability or recall bias.

For a detailed description of the OSDUHS, visit the [CAMH website](#).

## Data analysis

Data were analyzed using SAS 9.4. For 2016-2017, the analysis was based on a design of 17 strata (7 geographical strata for elementary schools and 10 for secondary schools), 214 schools, 764 classes and 11,435 students. Variables accounting for the probability of selection, stratification and clustering were used when analyzing the data. The final sampling weight was based on each regional stratum’s sex-by-grade structure according to the provincial population structure.

Differences in two percentages may be clinically important. However, when error bars overlap, the difference cannot necessarily be interpreted as real or statistically significant.

## Acknowledgement

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For more information, contact Durham Region Health Department at 1-800-841-2729, by fax at 905-666-6241 or by visiting the [Durham Region website](#).