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A SURVEY OF ADOLESCENT DRUG TAKING BEHAVIOR

BERKSHIRE COUNTY, MASSACHUSETTS

FEBRUARY, 1979

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For: THE COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF MENTAL HEALTH
DIVISION OF DRUG REHABILITATION
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Introduction

During the winter of 1978, the Division of Drug Rehabilitation was approached by the Western Massachusetts Health Planning Council with a request for information pertaining to methods for assessing the scope of the drug problem in Berkshire County.

As we had been planning to research drug problems in rural areas, this request presented us with the unique opportunity to meet our needs and those of a local agency at the same time.

After a year of planning and negotiating with school administrators, we were able to implement a survey of high school students in Berkshire County. This report is the result of that survey.

Methodology

Our survey instrument was a self-administered questionnaire designed by Dr. Victor Gelineau and his staff in 1972¹ and used by the Division in surveys of this nature nearly a dozen times in the intervening seven years. The only changes in the instrument were the addition of questions pertaining to the use of PCP² and the deletion of a number of questions at the request of school administrators because the questions were assessed as being of too personal a nature³.

In total, we conducted the surveys in eleven of the fourteen schools in Berkshire County which had high school age populations. In three schools, the administration chose not to participate in the survey. The sample was composed of students from four community high schools, one regional high school, two regional vocational technical high schools, one parochial high school, and ninth grade classes of three junior high schools.

In schools where homerooms were arranged alphabetically, we took a ten percent random sample of homerooms. In other schools where homerooms were arranged according to some student characteristic (e.g., first period class), we assumed that this arrangement could have a biasing effect on the sample and took a ten percent random sample from class lists. The sample was stratified according to school and grade.

In all, 517 of a potential 730 students completed the survey, giving us a nearly 71% response rate. Because the response rate varied among schools from 50 to 100%, the results for each school were weighted by the relative response rate.

1. See Gelineau, Johnson & Pearsall, Mass. Journal of Mental Health Vol. III, No. 2, Winter '73.
2. The use of PCP was nearly unheard of until recently in Massachusetts. Our concern over its increasing popularity caused us to add questions pertaining to it.
3. See Chart: PREVALENCE OF SOCIALLY UNACCEPTABLE BEHAVIOR AMONG HIGH SCHOOL STUDENTS IN BERKSHIRE COUNTY.

Because of our carefully constructed sample, high response rate and well-tested instrument, we are confident that the results of this survey are indicative of the behavioral trends of high school students in Berkshire County.

Drug Use in Berkshire County Among Adolescents

Our results show that overwhelmingly, alcohol and marijuana are the drugs of choice for high school students in Berkshire County. Nearly three quarters of the high school students have been intoxicated at least once and three in five have tried marijuana. Further, a quarter of the students report regular intoxication and better than one in six report the regular use of marijuana. The prevalence of other drug use falls far below this. Fewer than one student in six report ever trying inhalants, phencyclidine, amphetamines or hallucinogens; less than one in ten have tried narcotics other than heroin, barbiturates, or cocaine, and less than one in forty report ever trying heroin. The reported regular usage of these drugs is less than one percent.

We found that two of five students regularly use at least one drug including alcohol. Approximately a quarter of the students use at least one drug regularly excluding alcohol, and fewer than one in twenty regularly use any of the "hard" drugs (see below, and pages 3 and 4).

REPORTED DRUG USE AMONG HIGH SCHOOL STUDENTS: BERKSHIRE COUNTY, 1979

ESTIMATED NUMBER OF STUDENTS COUNTY-WIDE (4)

DRUG TYPE:	EXPERIMENTAL USE (1)	INFREQUENT CURRENT USE (2)	REGULAR CURRENT USE (3)	TOTAL
ALCOHOL	390 (220 - 550)	4880 (4290 - 5480)	2750 (2210 - 3290)	8020 (7490 - 8550)
MARIJUANA	1180 (790 - 1560)	3470 (2890 - 4040)	1960 (1510 - 2430)	6610 (6030 - 7190)
INHALANTS	970 (620 - 1320)	670 (390 - 960)	10 (0 - 50)	1650 (1220 - 2080)
AMPHETAMINES	740 (430 - 1050)	860 (530 - 1190)	10 (0 - 50)	1610 (1180 - 2040)
PHENCYCLIDINE	470 (230 - 720)	880 (550 - 1210)	90 (0 - 200)	1440 (1030 - 1850)
HALLUCINOGENS	630 (330 - 920)	770 (460 - 1060)	40 (0 - 120)	1440 (1030 - 1850)
OPiates OTHER THAN HEROIN	310 (100 - 520)	590 (320 - 870)	90 (0 - 200)	990 (640 - 1340)
BARBITURATES	420 (180 - 660)	450 (210 - 690)	60 (0 - 140)	930 (590 - 1250)
COCAINE	250 (80 - 430)	570 (310 - 840)	50 (0 - 120)	870 (540 - 1200)
HEROIN	110 (0 - 230)	110 (0 - 230)	30 (0 - 100)	250 (80 - 430)

- (1) EXPERIMENTAL USE: Discontinued past use
- (2) INFREQUENT CURRENT USE: Current use at less than a once per week rate
- (3) REGULAR CURRENT USE: Current use at a once per week or greater rate
- (4) POPULATION BASE OF SAMPLED POPULATION: 7,310
ESTIMATED HIGH SCHOOL AGE POPULATION COUNTY-WIDE: 11,000

REPORTED DRUG USE AMONG HIGH SCHOOL STUDENTS:

BERKSHIRE COUNTY, FEBRUARY 1979

DRUG TYPE:	% R E P O R T I N G			
	EXPERIMENTAL USE ¹	INFREQUENT CURRENT USE ²	REGULAR CURRENT USE ³	TOTAL
ALCOHOL	3.5	44.4	25.0	72.9
MARIJUANA	10.7	31.5	17.9	60.1
INHALENTS	8.8	6.1	0.1	15.0
AMPHETAMINES	6.7	7.8	0.1	14.6
PHENCYCLIDINE	4.3	8.0	0.8	13.1
HALLUCINOGENS	5.7	7.0	0.4	13.1
OPIATES (OTHER THAN HEROIN)	2.8	5.4	0.8	9.0
BARBITURATES	3.8	4.1	0.5	8.4
COCAINE	2.3	5.2	0.4	7.9
HEROIN	1.0	1.0	0.3	2.3

1. EXPERIMENTAL USE: Discontinued past use

2. INFREQUENT CURRENT USE: Current use at less than a weekly rate

3. REGULAR CURRENT USE: Current use on at least a once per week basis.

NOTE: Experimental, Infrequent Current, and Regular Current are mutually exclusive.

FOR BERKSHIRE COUNTY 1979

Students reporting regular use of any drug including alcohol^{1.}

<u>Number of Drugs used</u>	<u>% Students Reporting</u>	<u>Estimated number of Student, countywide</u> ^{2.}
None	56.1	6170 (5580 - 6770)
1 or 2	40.2	4480 (3840 - 5010)
3 or more	<u>3.7</u>	<u>410 (170 - 650)</u>
	100.0	11000

Students reporting regular use of drugs other than alcohol

<u>Number of Drugs used</u>	<u>% Students Reporting</u>	<u>Estimated number of Students, countywide</u>
None	71.2	7830 (7290 - 8370)
1 or 2	26.6	2930 (1960 - 3450)
3 or more	<u>2.2</u>	<u>240 (70 - 420)</u>
	100.0	11000

Students reporting regular use of drugs other than marijuana and alcohol

<u>Number of Drugs used</u>	<u>% Students Reporting</u>	<u>Estimated number of Students, countywide</u>
None	95.9	10550 (10320 - 10780)
1 or 2	3.3	360 (150 - 570)
3 or more	<u>.8</u>	<u>90 (0 - 200)</u>
	100.0	11000

1. Regular use: Current use at a once per week rate or greater.

2. Population base of sampled population: 7,310 estimated countywide high school age population 11,000 estimates rounded to the nearest ten students.

Put in other terms, in the typical Berkshire County high school homeroom of 35 students, 25 will have become intoxicated at least once and 21 will have tried marijuana. Fourteen students will regularly use at least one drug or alcohol, nine will become intoxicated regularly and six will regularly smoke marijuana. Five students will have experimented with inhalants, amphetamines, phencyclidine, or hallucinogens. Three will have experimented with opiates, barbiturates or cocaine, and one will have tried heroin. Though it is unlikely that any student in this hypothetical homeroom will regularly take any one particular hard drug, one student will regularly take various hard drugs. One or two others will use the harder drugs on an occasional basis.

The Social Context of Drug Use in Berkshire County

We have seen that experimentation with psychotropic substances is widespread among high school students in Berkshire County. Furthermore, we have seen that nearly half of the students use drugs or alcohol on a regular basis. However, examination of drug use outside of the social context in which it occurs provides an incomplete picture.

To complete the picture, we examined drug use data in contrast to some of the more traditional social data that we collected. Interestingly enough, we found no statistical differences between those students who had tried drugs and those who had not when we examined such data as age, grade in school, father's education, and father's occupation (see below and page 6).

FOR BERKSHIRE COUNTY 1979

HIGH SCHOOL STUDENT DRUG USE ACCORDING TO FATHER'S EDUCATION

FATHER'S EDUCATION	X STUDENTS REPORTING DRUG USE		
	HAVE USED	NEVER USED	TOTAL
LESS THAN HIGH SCHOOL	8.5	7.8	16.3
FINISH SCHOOL DIPLOMA	20.9	12.4	33.3
* SOME COLLEGE	11.9	3.2	15.1
FINISH COLLEGE	9.4	6.1	15.5
** SOME POST-GRADUATE EDUC.	8.0	6.2	14.2
NOT SURE	3.1	2.5	5.6
TOTAL	61.8	38.2	100.0

* Includes two year Business or Technical Degree.
 ** Includes Post-Graduate Degrees.
 40 missing cases of 517.
 CHI Square equals 12.66: No significant difference at 0.05 level.

FOR BERKSHIRE COUNTY 1979

HIGH SCHOOL STUDENT DRUG USE ACCORDING TO FATHER'S OCCUPATION

FATHER'S OCCUPATION	X STUDENTS REPORTING DRUG USE		
	HAVE USED	NEVER USED	TOTAL
UNSKILLED	6.3	5.1	11.4
SKILLED	13.0	9.9	22.9
WHITE COLLAR AND SERVICE	25.6	15.1	40.7
PROFESSIONAL	10.0	8.0	18.0
* OTHER	5.5	1.5	7.0
TOTAL	60.4	39.6	100.0

* Includes: Student, Unemployed, and Other.
 75 missing cases of 517.
 CHI Square equals 6.49: No significant difference at 0.05 level.

FOR BERKSHIRE COUNTY, 1979REPORTED DRUG USE AMONG HIGH SCHOOL STUDENTSACCORDING TO AGE

AGE	% STUDENTS REPORTING		
	HAVE USED	NEVER USED	TOTAL
13 or 14	8.2	6.8	15.0
15	13.3	9.9	23.2
16	18.1	9.4	27.5
17	15.7	9.0	24.7
18 or 19	6.5	3.1	9.6
TOTAL	61.8	38.2	100.0

TOTAL N equals 511; 6 missing cases

CHI SQUARE equals 4.65, not significant at 0.05 level

FOR BERKSHIRE COUNTY, 1979REPORTED DRUG USE AMONG HIGH SCHOOL STUDENTSACCORDING TO GRADE

GRADE	% STUDENTS REPORTING		
	HAVE USED	NEVER USED	TOTAL
FRESHMAN	14.2	9.8	24.0
SCPHOMORE	14.8	8.9	23.7
JUNIOR	16.7	11.0	27.7
SENIOR	16.1	8.5	24.6
TOTAL	61.8	38.2	100.0

TOTAL N equals 509 cases; 8 missing cases

CHI SQUARE equals 1.31, not significant at 0.05 level

FOR BERKSHIRE COUNTY, 1979

PERCENT OF STUDENTS REPORTING FREQUENCY OF INTOXICATIONBY SEX, ALL STUDENTS

FREQUENCY OF INTOXICATION (ALCOHOL)					
SEX:	NEVER	ONCE	INFREQUENTLY	REGULARLY	TOTAL:
MALE	10.6	4.0	18.9	14.4	47.9
FEMALE	20.2	4.0	17.2	10.7	52.1
TOTAL	30.8	8.0	36.1	25.1	100.0

TOTAL N equals 501; 16 missing cases

CHI SQUARE equals 21.6, significant at 0.05 level

FOR BERKSHIRE COUNTY, 1979

PERCENT OF STUDENTS REPORTING FREQUENCY OF INTOXICATION BY SEX,STUDENTS REPORTING HAVING TRIED DRUGS

FREQUENCY OF INTOXICATION (ALCOHOL)				
SEX:	ONCE	INFREQUENTLY	REGULARLY	TOTAL:
MALE	5.8	27.4	20.7	53.9
FEMALE	5.8	24.8	15.5	46.1
TOTAL	11.6	52.2	36.2	100.0

TOTAL N equals 347; 16 missing cases

CHI SQUARE equals 0.92, not significant at 0.05 level

We also found significant differences when we examined marks in school according to drug use. Though drug use was prevalent to at least 49% at all levels of achievement, it increased dramatically as grades became lower. Where half the "A" students reported drug use, approximately 80% of the "C and D" students reported drug use. We saw no reversal of this trend at any level of achievement. This is a pattern that we have seen in nearly every study of this nature that we have done.

It should be noted here that caution should be used in interpreting these figures. It can safely be said that achievement in school and drug use are related. At the same time, however,

because so many of those students who have achieved high grades do report drug use, one should not consider high or low achievement in school a predictor of drug use. Put in other terms, it can be said that the "low achiever" is more likely to have tried drugs than the "high achiever." At the same time, however, one of every two "high achievers" will have tried drugs (see below).

FOR BERKSHIRE COUNTY, 1979

PERCENT STUDENTS REPORTING DRUG USE

ACCORDING TO MARKS IN SCHOOL

MARKS	NEVER USED DRUGS	USED DRUGS	TOTAL
"A's"	4.3	4.0	8.3
"A's & B's"	14.3	14.9	29.2
"B's"	6.3	12.4	18.7
"B's & C's"	10.6	22.0	32.5
"C's"	1.6	4.5	6.1
"C's & D's" and below	1.0	4.1	5.2
TOTAL	38.1	61.9	100.0

TOTAL N equals 510; 7 missing cases

CHI SQUARE equals 18.9, significant at 0.05 level

To conclude, though we found some difference between those students who had used drugs and those who had not, when weighed against the other data and measured for their directional tendencies, these differences do not provide any clear parameters for identification. In short then, we can conclude that no real identifying assumptions can be made about "what kind of kid" uses drugs in Berkshire County. In nearly every respect, the typical drug using teenager in Berkshire County resembles the typical teenager in Berkshire County.

This can be understood more clearly when one examines some of the other data pertaining to drug use among these students.

Next to cheating, use of alcohol or drugs at at least the experimental level, is the most prevalent form of misbehavior among Berkshire County high school students. Other than "skipping school" and cheating, no other form of misbehavior is more prevalent than the regular use of drugs or alcohol (see page 11).

Of special concern is the fact that driving while intoxicated is a fairly prevalent behavior. The figures belie its prevalence. Assuming that only students of driving age drive while intoxicated, we can estimate that nearly half (43.6%) have driven while drunk and more than a quarter (27.6%) have driven while high on drugs (see page 11).

Nearly every student (96.8%) reported that at least a few of their friends drink; better than three of four students report at least a few of their friends use drugs (see page 12).

The knowledge of drug availability is widespread. Nearly eight of ten students report knowledge of the availability of marijuana and nearly two of three report knowledge of the availability of harder drugs (see page 12).

Perhaps the most telling statistic pertains to where students get drugs. Nearly 70% of the students who use drugs reported that they got their drugs from someone within their own age group. This accounts for 95% of those students reporting a single source of drugs (see page 12).

The fact that so many students obtain drugs from within their own peer group shows us that the distribution system for drugs used by Berkshire County high school students is constructed mostly of the high school students themselves. It shows us that the image of an invasion of "pushers" infesting schoolyards and street corners is mostly a myth. High school students are selling drugs to each other, and when a high school student enters a drug taking or drinking career, he or she is most likely to enter through the peer group. More than anything this shows us how deeply drug and alcohol use is imbedded in the youth culture.

Patterns of Drug Use, Behaviors, and Attitudes

One other method of defining the context of drug use is to relate individual patterns of drug use to behaviors and attitudes. Our survey collected some information in these areas in order to make this comparison. It is in these comparisons that we were able to identify some very clear parameters of identification for a particular subset of the drug using adolescents in Berkshire County.

Our survey asked questions pertaining to each student's satisfaction with life in general, family life, school, and perceptions of his or her friends' satisfaction with life. Using the answers

PREVALENCE OF SOCIALLY UNACCEPTABLE BEHAVIOR
AMONG HIGH SCHOOL STUDENTS IN BERKSHIRE COUNTY, 1979

BEHAVIOR TYPE:	% STUDENTS REPORTING:
CHEATING (1)	79.3
GETTING DRUNK (EVER)	73.5
USING DRUGS (EVER)	61.6
"SKIPPING" SCHOOL	53.0
REGULAR DRUG OR ALCOHOL USE (2)	43.9
BEING "HIGH" AT SCHOOL	35.6
SMOKING CIGARETTES	32.0
REGULAR USE OF DRUGS (INCLUDING MARIJUANA) (2)	28.8
FIGHTING (1)	28.3
VANDALISM (1)	28.2
DRUNK DRIVING	27.5
STEALING FROM SCHOOL (1)	26.5
SHOPLIFTING (1)	25.5
REGULAR USE OF ALCOHOL (2)	25.0
BEING DRUNK AT SCHOOL	22.7
STEALING FROM ANOTHER INDIVIDUAL (1)	21.4
BEING "TAKEN DOWN" TO THE POLICE STATION (1)	18.9
DRIVING WHILE "HIGH"	17.3
BEING CHARGED WITH A CRIME (1)	14.3
REGULAR USE OF DRUGS (EXCLUDING MARIJUANA) (2)	4.1

- (1) These questions were deleted in a number of schools at the request of school administrators. In total, these questions were included in 42.2% of the sample; therefore, caution should be exercised in interpretation. However, little difference was exhibited in other behaviors between those students in the test schools and the others. Because of this, we are assuming these figures to be indicative of countywide trends and therefore have included the figures.
- (2) As before, regular use is defined as use at a once per week or greater rate.

FOR BERKSHIRE COUNTY 1979REPORTED DRUG AND ALCOHOL USE AMONG FRIENDS OF
SURVEYED HIGH SCHOOL STUDENTS

NUMBER OF FRIENDS	% STUDENTS REPORTING DRINKING AMONG FRIENDS	% STUDENTS REPORTING DRUG USE AMONG FRIENDS
NONE	3.2	23.6
A FEW	26.2	43.3
MOST	48.7	26.4
ALL	21.9	6.7
TOTAL	100.0	100.0

FOR BERKSHIRE COUNTY 1979SOURCE OF DRUGS FOR HIGH SCHOOL STUDENTS REPORTING DRUG USE

SOURCE:	% OF STUDENTS REPORTING:
SIBLINGS	2.2
FRIENDS	55.4
PEERS WHO ARE NOT FRIENDS	10.9
DRUG "PUSHERS"	1.5
DOCTORS	1.5
STOLEN	0.4
MULTIPLE SOURCE	28.1
TOTAL	100.0

FOR BERKSHIRE COUNTY 1979STUDENT KNOWLEDGE ABOUT THE AVAILABILITY OF DRUGS

STUDENT RESPONSES:	% STUDENTS REPORTING:
NONE ARE AVAILABLE	1.8
DON'T KNOW IF DRUGS ARE AVAILABLE	20.0
MARIJUANA ONLY IS AVAILABLE	14.0
MARIJUANA, ACID, & PILLS ARE AVAILABLE	39.2
EVERYTHING INCLUDING HEROIN IS AVAILABLE	25.0
TOTAL	100.0

to these questions we were able to construct a crude scale of "dissatisfaction." When we examined patterns of drug use across this scale of dissatisfaction we found that they were highly related with a strong directional tendency. We found that as life satisfaction decreased, the tendency was for drug use to increase in its intensity (see below).

FOR BERKSHIRE COUNTY, 1979

PATTERNS OF DRUG USE ACCORDING TO LEVEL OF SATISFACTION

AMONG HIGH SCHOOL STUDENTS

PATTERN OF DRUG USE	% STUDENTS REPORTING DISSATISFACTION WITH LIFE				
	LOW	MODERATE	HIGH	VERY HIGH	TOTAL
NO DRUG USE	10.0	7.5	3.9	2.2	23.6
INFREQUENT AND/OR EXPERIMENTAL USE	11.1	11.6	7.2	2.6	32.5
REGULAR USE OF MARIJUANA AND/OR ALCOHOL ONLY	8.0	15.2	8.1	8.5	39.8
REGULAR USE OF OTHER DRUGS	0.2	1.2	0.7	2.0	4.1
TOTAL	29.3	35.5	19.9	15.3	100.0

TOTAL N equals 517; no missing cases

CHI SQUARE equals 49.95, significant at 0.05 level

We also collected information on types of misbehavior other than drug use. Unfortunately, many of these questions were deleted for more than half our sample at the request of school administrators as they were seen to be of too personal a nature. However, there were a number of questions that were given to the entire sample. These pertained to such things as running afoul of the law, getting into trouble at school, skipping school and driving under various states of intoxication. As with "dissatisfaction" we constructed a scale using those questions that we called "propensity

for getting into trouble." Our comparison of this information with patterns of drug use produced extremely similar results to those above. The relationship between this variable and drug use patterns was extremely significant and again, there was a directional tendency. As the propensity for getting into trouble increased, so did the intensity of drug use (see below).

FOR BERKSHIRE COUNTY, 1979

PATTERNS OF DRUG USE ACCORDING TO PROPENSITY TO GET INTO TROUBLE
AMONG HIGH SCHOOL STUDENTS

Z STUDENTS REPORTING - PROPENSITY TO GET INTO TROUBLE						
PATTERN OF DRUG USE	VERY LOW	LOW	MODERATE	HIGH	VERY HIGH	TOTAL
NO DRUG USE	4.8	15.0	3.0	0.6	0.1	23.5
INFREQUENT AND/OR EXPERIMENTAL USE	7.8	16.3	6.3	1.8	0.4	32.6
REGULAR USE MARIJUANA AND/OR ALCOHOL ONLY	7.7	13.4	10.3	6.7	1.7	39.8
REGULAR USE OF OTHER DRUGS	0.0	0.3	1.9	0.9	1.0	4.1
TOTAL	20.3	45.0	21.5	10.0	3.2	100.0

TOTAL N equals 517; no missing cases

CHI SQUARE equals 102.45, significant at 0.05 level

Finally, we examined patterns of drug use against marks in school. Again there was a highly significant relationship and a directional tendency. As grades decreased, the intensity of drug use tended to increase (see page 15).

FOR BERKSHIRE COUNTY, 1979

PATTERNS OF DRUG USE ACCORDING TO MARKS IN SCHOOL
FOR HIGH SCHOOL STUDENTS

PATTERNS OF DRUG USE	% STUDENTS REPORTING - GRADES					TOTAL
	"A's"	"A's & B's"	"B's"	"B's & C's"	"C's" & Below	
NO DRUG USE	2.7	8.0	4.3	6.8	1.6	23.4
INFREQUENT AND/OR EXPERIMENTAL USE	2.3	12.1	6.4	8.5	3.3	32.6
REGULAR USE MARIJUANA AND/OR ALCOHOL ONLY	2.3	8.8	7.4	16.2	5.2	39.9
REGULAR USE OTHER DRUGS	0.2	0.6	0.7	0.8	1.8	4.1
TOTAL	7.5	29.5	18.8	32.3	11.9	100.0

TOTAL N equals 514; 3 missing cases

CHI SQUARE equals 45.67, significant at 0.05 level

As can be seen from above, drug abuse is highly related to other life difficulties in high school students. However, caution should be used in interpreting this data. The statistical tests we used do not establish any causal link between drug use and the other variables examined. It would be just as false to assume from this data that drug abuse is the cause for low grades, a propensity to get into trouble or unhappiness as it would be to assume that low grades are the cause of drug abuse. It is safe to assume, however, that an adolescent who is experiencing difficulty in the other parts of his or her life is likely to be also experiencing the drug problem. Or, for that matter, the adolescent who successfully deals with life will probably not have difficulty with drugs, even though he or she may be exhibiting some drug taking behavior.

These data, and our experience, show us that drug abuse among adolescents is rarely a singular problem. Rather, it is a symptom or part of a constellation of problems that an adolescent is experiencing. Our experience also shows that any attempts to rectify drug abuse that do not take this into account will probably not succeed.

A Comparison and Some Conclusions

All of this leads to the question of how bad the "drug problem" in Berkshire County is.

One method of measurement is comparison. In 1975, the Division of Drug Rehabilitation conducted a survey of the same nature on a statewide basis. Included in that survey was one community in

Berkshire County which was also sampled in our 1979 study. Using the data from the 1975 survey as a benchmark for comparison, we found an interesting picture (see below).

A COMPARISON:

REPORTED DRUG USE AMONG HIGH SCHOOL STUDENTS

- Berkshire County, 1979
- One Community, Berkshire County, 1975
- Massachusetts, 1975

% OF STUDENTS REPORTING DRUG USE			
DRUG TYPE	BERKSHIRE COUNTY 1979	ONE COMMUNITY, BERKSHIRE COUNTY 1975	MASSACHUSETTS 1975
ALCOHOL	72.9	69.2	64.1
MARIJUANA	60.1	56.2	54.1
INHALENTS	15.0	7.5	6.6
AMPHETAMINES	14.6	20.8	14.3
PHENCYCLIDINE	13.1	—*	—*
HALLUCINOGENS	13.1	14.4	13.2
OPIATES OTHER THAN HEROIN	9.0	6.7	6.2
BARBITURATES	8.4	10.4	10.3
COCAINE	7.9	8.5	5.3
HEROIN	2.3	1.9	1.3

* PHENCYCLIDINE was not treated as a separate category in 1975.

NOTE: The "One Community, Berkshire County, 1975" was a subset of the Statewide 1975 Sample. The similarity of the sampling methods in the two studies (1979 and 1975) allow comparison; however, differences in sampling parameters, and therefore sampling error, do not allow tests for statistical significance.

For all intents and purposes, the data for Berkshire County in 1979 very closely resembled the 1975 statewide data. The only differences that could not be accounted for by sampling error were the apparent increases in alcohol, marijuana and inhalant usage.

It should be noted that the increases in alcohol and marijuana usage can be described as slight. The rather sharp increases in inhalant usage fits the nationwide pattern of increasing popularity of these substances which in fact are not drugs under any clinical or legal definition. The most popular of these, butyl nitrate, is sold over-the-counter under various trade names and goes by the street names of "locker room" and "rush."

The only other difference we found was the presence of phen-cyclidine or PCP, most commonly called "angel dust" on the street. This is of some concern as PCP is a very dangerous drug. As stated above, the use of this drug was extremely uncommon in Massachusetts until very recently. Our examination of other indicators has shown that the epidemiological pattern for this drug has been a dramatic and short-lived increase in its usage, followed by an equally dramatic decrease. In Massachusetts this drug has exhibited itself as a "fad drug" which rapidly gains the bad street reputation it so richly deserves, thereby leading to diminished popularity. The prevalence of its usage in Berkshire County is a trend well worth watching closely.

Fortunately, we also had data from Berkshire County for 1975 to include in our comparison. As information was collected from one particular Berkshire County community in both surveys and as this community can be safely described as typical, we felt that this comparison was a valid one and one well worth making. As with the comparison above, the results are remarkably similar. The only differences that could not be explained by sampling error were the apparent increase in inhalants and decrease in the usage of amphetamines. Neither of these trends can be described as unexpected. As stated above, the use of inhalants is increasingly popular nationwide and by the same token amphetamines have shown a slight and continuing decrease in popularity.

More important than any one to one comparison for any particular drug is the fact that the two sets of data present a strikingly similar overall picture. This leads to the conclusion that the "drug problem" in Berkshire County has not changed significantly in four years. Other than the fact that this pattern of behavior is not new to Berkshire County, this most probably means that drug use among high school students is endemic rather than epidemic. Put in other terms, this particular pattern of behavior is firmly established within the adolescent subculture and unlikely to change dramatically, with the exception of "fad" drugs such as the inhalants and PCP, in either direction without outside intervention. The idea that Berkshire County is or has been safe haven from this problem is a myth. At the same time, so is the idea that Berkshire County is experiencing a dramatic increase in drug use among its young people.

In conclusion then, adolescent drug usage in Berkshire County is well within the typical patterns of this behavior in Massachusetts. Experimentation with alcohol and marijuana is widespread and these are the only drugs used regularly with any prevalence. The harder drugs are used by a smaller subset of the adolescents and these are used largely experimentally or on an occasional basis. Most of the

usage cannot be technically termed abuse, although it is a behavior that carries with it risk, and therefore is of some concern. Only a small proportion of the adolescent population uses hard drugs on a regular basis and these are the adolescents who are most probably experiencing difficulty in the other facets of their life.