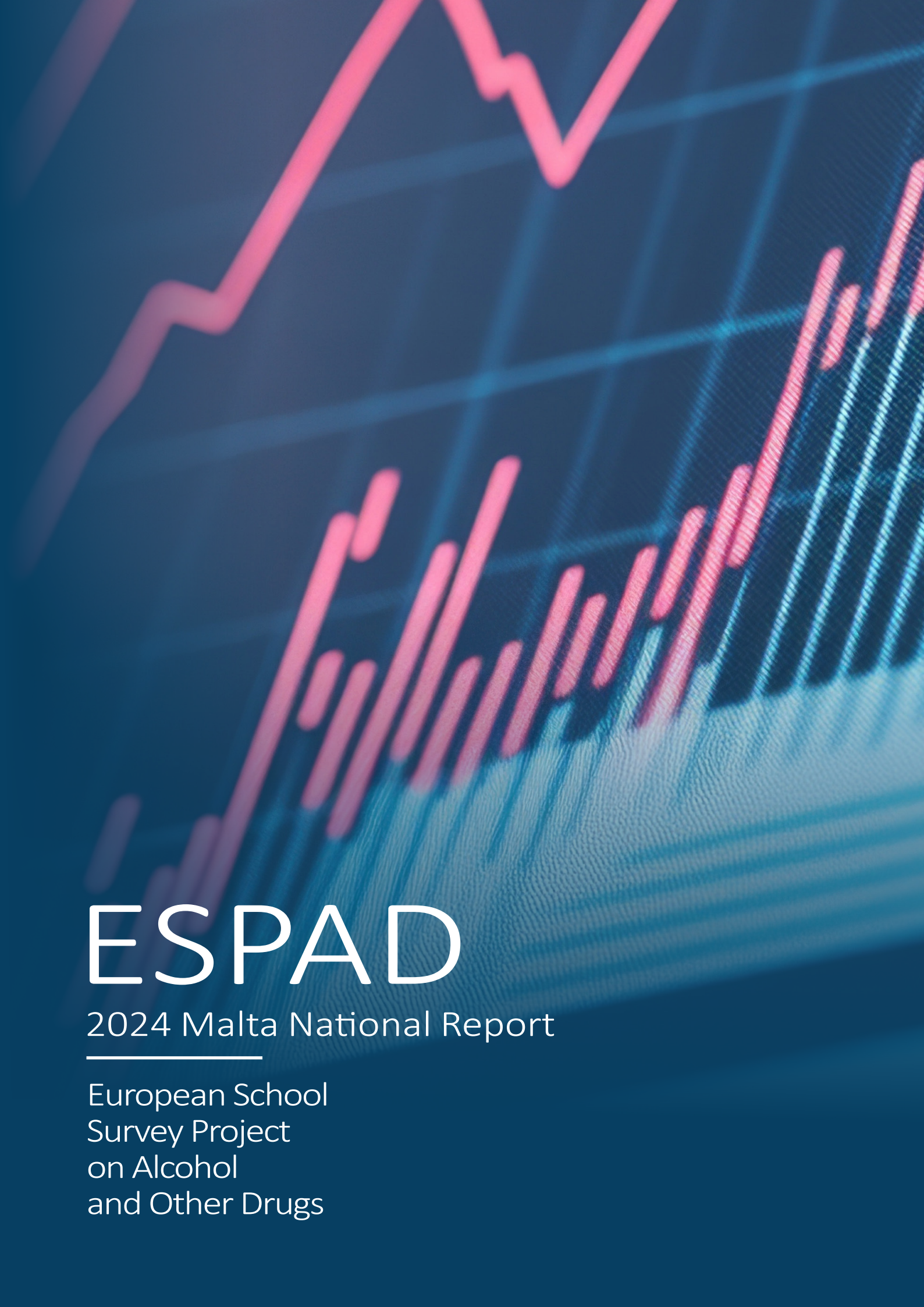

ESPAD

2024 Malta National Report

European School
Survey Project
on Alcohol
and Other Drugs

ESPAD

European School Survey Project on Alcohol and Other Drugs

2024

Malta National Report

Sharon Arpa,
Valentina Galdes
& Stephanie Dimech

Foundation for Social Welfare Services
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2024 Malta National Report

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Message from the CEO of FSWS

Alfred Grixti

This is my third ESPAD report since I was tasked with leading the FSWS way back in 2014. This report brings with it both good news and bad news.

As we say in the conclusion to this Report:

“Overall, alcohol and cigarette use among 15–16-year-olds has continued to decline. However, these positive trends are accompanied by emerging concerns, including the rising use of e-cigarettes, the widespread consumption of energy drinks, and the extensive use of social media and gaming.”

Within this, however, lies the fact that the general downward trends observed in this cohort are not homogenous in terms of gender. To put it simply, there is a marked difference in these behaviours between girls and boys, in some case because boys are declining at a steeper rate than girls and in others, the increase observed among girls is not being seen in boys.

Once more I will quote from the conclusion of this Report.

> “The 2024 ESPAD results highlight important differences between boys and girls in the extent of risk behaviours in Malta. Historically, boys were more likely to engage in substance use, but this pattern is now changing, with girls surpassing boys in several behaviours. ....
>
> Taken together, these findings highlight the need in Malta to move beyond the traditional assumption that boys are the higher-risk group and to adopt more gender-responsive prevention and policy approaches (EMCDDA, 2023).”

This means that while prevention efforts are working, we now need to research in greater depth why there is such a marked sex-based difference and design our strategies to address the higher risk group. In this case, girls.

I had made a similar observation in my ESPAD 2019 message. However, the three years of COVID has given us some cover for not following this through. Now we have no COVID and, therefore, no excuses.

I am more than sure that we can rise up and meet this challenge.

SEDQA is by far the best equipped and best placed entity to do so. We are a one-stop shop focused on harm reduction by means of our opiate substitution service at DETOX, the in-patient detox unit at Dar l-Impenn and the residential rehabilitation centre at Komunità Santa Marija. Above all, we have the most extensive network of prevention interventions in schools across Malta and Gozo, as well as in workplaces. Added to this, the continuous training we give our staff — from doctors to nurses

and all the other psycho-social professionals — along with the research they present at various specialist conferences, means that we are well positioned to address this issue.

Thus, I want to conclude by thanking all those involved with the ESPAD census. Thanks to the schools, state, church and private, who made it possible for us conduct the survey. Above all else, thanks to Sharon Arpa, Valentina Galdes and Stephanie Dimech for seeing the 2024 ESPAD through from beginning to end.

Last but definitely not least, a big thank you to everyone at SEDQA for these very encouraging and impressive results. Yes! our prevention strategies and programmes which we deliver day in, day out in all schools and all places of work around Malta and Gozo are working. Special thanks, then, to Charles Scerri, and Dr Anna Vella and their fantastic, dedicated team of professionals within SEDQA who give their all to ensure that substance misuse and other emerging addictions are kept well in check.

ALFRED GRIXTI
Chief Executive Officer
Foundation for Social Welfare Services

Foreword from the Operations Director of Aġenzija Sedqa, FSWS

Charles Scerri

This report brings forward key findings and insights of the 2024 European School Survey Project on Alcohol and Other Drugs (ESPAD), conducted among students in Malta and Gozo. This report offers us an invaluable lens into the experiences, perceptions, and behaviours of young people, highlighting both areas of concern and opportunities for prevention, which is pivotal to Sedqa's operations.

The data reveal several important patterns. Alcohol remains the most accessible and commonly used substance, with nearly four out of five students perceiving it as easy to obtain. A significant proportion of students report drinking alcohol during their lifetime, and while most use remains experimental or occasional, the trend towards earlier onset of drinking and episodes of intoxication demands attention. E-cigarettes continue to gain ground, with higher experimentation rates among girls than boys, reflecting a shift in youth nicotine use patterns.

Illicit drug use remains relatively low compared to alcohol and nicotine products, but the reported ease of access to cannabis and the prevalence of lifetime use signal the importance of sustained vigilance. New psychoactive substances, though not widespread, are still present, highlighting the need for flexible and timely responses to emerging drug trends.

The survey also extends beyond substance use, examining behaviours that affect well-being and development. The findings show substantial time spent on social media, particularly among girls, accompanied by perceptions of overuse and mood impacts. Gaming is more prevalent among boys, with a notable minority spending many hours daily on electronic devices. Together, these behaviours highlight the evolving landscape of adolescent risk and resilience.

Encouragingly, a large proportion of students report strong social support from family and friends, and many have participated in awareness activities and skills training in recent years. These protective factors are vital, yet the findings also suggest that prevention efforts must remain continuous, comprehensive, and responsive to changing realities.

At Sedqa, we view these results not only as data points but as the lived experiences of our young people. They remind us of our responsibility to equip adolescents with the skills, knowledge, and support they need to make informed and healthy choices. Our work must continue to bridge evidence with practice, fostering collaboration among schools, families, communities, and policymakers.

In this regard, it is fitting to acknowledge the continuity of Sedqa's mission. Back in 2019, through my ESPAD foreword, I had reiterated that prevention must be rooted in evidence and strengthened by partnerships across sectors. Five years on,

these words remain as relevant as ever. The 2024 findings show both progress and persistent challenges, reminding us that the efforts of yesterday must be carried forward with renewed determination today.

I extend my gratitude to all those who contributed to this survey, especially FSWS' Research Team, and to the young people whose voices are reflected here. Their honesty is a gift to our society, enabling us to respond with clarity and commitment. May this report serve as both a guide and a call to action, ensuring that prevention remains a shared priority and that the well-being of our youth continues to be safeguarded.

Charles Scerri
Operations Director
Agenzija SEDQA

Acknowledgements

The National ESPAD Coordinating Team extends sincere thanks to everyone who contributed to the successful implementation of the 2024 ESPAD survey in Malta.

We are deeply grateful to the schools, including their leadership teams, teachers, and administrative staff, for their support, and to the students who took part. This research would not have been possible without their active engagement and cooperation.

We also sincerely thank those who worked towards the co-ordination of the ESPAD study in Malta: Ritianne Borg Saliba, Emile Vassallo, Josanne Ghirxi, Karl Paul Coleiro, Ian Mifsud, Marjoe Abela, Marika Abela, Lawrence Bonello, Emily Chircop, Annemarie Carabot, Roslyn Colette Spiteri, Ruth Stivala, Antoine Saliba, Leanne Mizzi, Cristabel Cutajar Kushta, Daniela Bugeja, Shaun Bartolo, and Christiana Bajada.

Many others provided valuable contributions to this project. Special thanks go to colleagues at the Foundation for Social Welfare Services (FSWS), in particular Ronald Balzan from the Research Team for reviewing this report and checking the data. We are also grateful to members of the Prevention Team and the Community Services Team within Sedqa, as well as the Youth Services Team within the Directorate for Alternative Care, for their feedback on the new questions introduced in the 2024 questionnaire. We further appreciate the support of the Prevention Team, the Corporate Services Team, and the Marketing and Communications Department for their help in processing and preparing the questionnaires for data entry, and the Customer Care Team for their logistical assistance. We also wish to thank former colleagues, Michael Debattista for conducting the literature search and Julia Chetcuti for proofreading and editing the new questions in Maltese.

At a broader level, we acknowledge the collaboration and support of:

- Aġenzija SEDQA (the National Agency against Drug and Alcohol Abuse and Compulsive Gambling) within FSWS;
- The Department for Educational Services (DES), National School Support Services;
- The Secretariat for Catholic Education, Malta; and
- The Independent Schools Association (ISA) and the participating independent schools.

We also thank Hon. Minister Michael Falzon (Ministry for Family, Children's Rights and Social Solidarity) and Hon. Minister Clifton Grima (Ministry for Education and Employment) for their commitment to this study.

Finally, we express our deep appreciation to Mr Alfred Grixti, CEO of FSWS, for his unwavering support throughout the planning, execution, analysis, and reporting of the 2024 survey.

Executive Summary

The European School Survey Project on Alcohol and Other Drugs (ESPAD) collects data on cigarette smoking, e-cigarette use, alcohol consumption, and other substance use, and has gradually broadened its scope to include other behaviours relevant to adolescent health and wellbeing, such as social media use, gaming, and gambling. Established in 1995, ESPAD has conducted surveys every four years from 1995 to 2019, with the most recent wave in 2024 covering 37 countries. This report presents the 2024 Malta findings from 2,880 students aged 15-16 and uses eight waves of data spanning almost three decades to highlight national trends.

Alcohol

All students 2024

Many students perceived that it would be "fairly easy" or "very easy" to obtain beer (69%), wine (63%), premixed drinks (61%), cider (58%), and spirits (56%).

Nearly three-quarters of students (74%) reported lifetime alcohol use, while 65% consumed alcohol in the past 12 months and 37% in the past 30 days. In the past month, spirits (31%) and wine (28%) were the most frequently consumed alcoholic beverages, followed by premixed drinks (24%), beer (21%), and cider (13%).

When asked about their usual sources of alcohol, students most often mentioned parents (16%); pubs, bars, or każini (*Maltese social clubs*) (11%); and stores (8.8%).

In the past 30 days, 20% of students had purchased alcohol off-premises (e.g., in supermarkets or alcohol shops) for their own consumption.

The most common drinking location reported on students' last drinking occasion was at home (23%), followed by bars or pubs (16%), and restaurants (14%).

In the past 30 days, 29% of students had consumed an alcoholic beverage on-premises (in a pub, bar, każin, restaurant, or disco).

Heavy episodic drinking, defined by ESPAD as consuming five or more drinks on a single occasion, was reported by 29% of students in the past 30 days.

Overall, 27% of students reported being intoxicated at least once in their lifetime, 21% in the past 12 months, and 8.1% in the past 30 days.

By age 13, 34% of students had consumed their first drink, and 6.4% had been drunk.

Motivations for drinking were mainly social and mood-enhancing. In the past 12 months, 14% of students reported drinking "mostly" or "always" because it was fun, 12% to enjoy parties, and 11% to improve social gatherings.

The behaviour most often rated as involving a "great risk" was having four or five drinks nearly every day (68%), followed by having five or more drinks nearly every weekend (46%), and having one or two drinks nearly every day (25%).

Sex differences 2024

Significant sex differences were evident across most alcohol-related measures. Compared with boys, girls more frequently perceived alcohol as "fairly easy" or "very easy" to obtain (83% vs. 76%) and reported higher use across all timeframes: lifetime (79% vs. 69%), past 12 months (70% vs. 60%), and past 30 days (42% vs. 33%). In the past month, girls consumed spirits (37% vs. 26%), wine (31% vs. 24%), and premixed drinks (29% vs. 19%) more frequently than boys. Boys were more likely than girls to drink beer (26% vs. 16%).

Compared to boys, girls also reported obtaining alcohol more often from pubs, bars, or każini (14% vs. 9.1%) and from shops (10% vs. 7.8%). On their last drinking occasion, more girls than boys reported alcohol use at a pub, bar, or każin (18% vs. 14%). In the past 30 days, significantly higher rates of on-premises drinking were observed among girls than among boys (36% vs. 23%).

Riskier drinking patterns were also more common among girls than boys: heavy episodic drinking in the past 30 days (34% vs. 25%), lifetime intoxication (32% vs. 22%), intoxication in the past 12 months (26% vs. 17%), and intoxication in the past 30 days (11% vs. 5.8%).

More girls than boys started drinking by age 13 (37% vs. 31%) and reported being drunk by that age (7.7% vs. 5.2%).

Motivations and risk perceptions also differed: girls were more likely than boys to report drinking for fun (18% vs. 9.4%) and were more likely to perceive a "great risk" in having five or more drinks nearly every day (73% vs. 63%) and in having one or two drinks daily (29% vs. 22%).

Changes 2019–2024

Between 2019 and 2024, alcohol-related behaviours showed declines. Lifetime alcohol use fell from 82% to 74%, with past 12-month use dropping from 73% to 65% and past 30-day use from 48% to 37%. Lifetime drunkenness decreased from 32% to 27%, drunkenness in the past 12 months from 25% to 21%, and heavy episodic drinking in the past 30 days from 40% to 29%.

Cigarettes and e-cigarettes

All students 2024

Most students believed it would be "fairly easy" or "very easy" to obtain cigarettes (54%) and e-cigarettes (58%).

E-cigarette use was higher than cigarette use for both lifetime (26% vs. 16%) and past year (18% vs. 12%) measures, while past 30-day prevalence was similar (9.6% vs. 9.3%). By age 13, 11% had tried e-cigarettes and 3.4% were daily users. Early cigarette use was less prevalent, with 7.1% having smoked by age 13 and 1.6% reporting daily smoking.

Among all students, curiosity was the main reason for first trying e-cigarettes (18%), while using them to stop smoking cigarettes was rare (0.8%).

Overall, 17% of all students had not smoked cigarettes before trying e-cigarettes.

Most students (66%) perceived smoking a pack or more of cigarettes a day as a "great risk". The daily use of e-cigarettes was perceived to pose a "great risk" by 45% of students.

Sex differences 2024

Girls were more likely than boys to report that e-cigarettes were easy to obtain (60% vs. 56%). They also reported higher use of both cigarettes in their lifetime (21% vs. 12%), in the past 12 months (15.5% vs. 8.4%), and in the past 30 days (12% vs. 6.8%). E-cigarette use showed a similar pattern, with girls reporting higher rates in their lifetime (32% vs. 19%), in the past 12 months (23% vs. 13%), and in the past 30 days (12.5% vs. 6.7%). Early initiation was also more common among girls, including cigarette use by age 13 (9.3% vs. 4.8%), e-cigarette use by age 13 (16% vs. 6.7%), and daily e-cigarette use at that age (5.3% vs. 1.5%).

Changes 2019–2024

From 2019 to 2024, lifetime e-cigarette use rose from 21% to 26%, with the increase largely attributable to girls (21% to 32%), whereas rates among boys remained relatively stable (21% to 19%). During the same period, lifetime cigarette use decreased substantially (22% to 16%), while other measures of cigarette use remained stable. The percentage of students who had tried e-cigarettes by age 13 also increased (5% to 11%).

Energy drinks

All students 2024

Energy drink consumption was reported by 82% of students over their lifetime, 72% in the past 12 months, and 57% in the past 30 days.

Sex differences 2024

Girls were more likely than boys to report lifetime energy drink use (84% vs. 80%). However, boys were more likely to consume them frequently, with higher rates of use on 20 or more occasions both across their lifetime (44% vs. 41%) and in the past 12 months (23% vs. 20%).

Cannabis

All students 2024

Cannabis was perceived as “fairly easy” or “very easy” to obtain by 30% of all students.

Cannabis was the most commonly used illicit drug, with 11% reporting lifetime use, 9.0% use in the past 12 months and 4.6% use in the past 30 days.

Early initiation of cannabis (first use at the age of 13 or younger) was reported by 2.1% of students.

Regular cannabis use was viewed as a “great risk” by 63% of students, compared with 29% for occasional use and 14% for trying it once or twice.

Sex differences 2024

Girls were more likely than boys to perceive cannabis as “fairly easy” or “very easy” to obtain (33% vs. 27%) and reported higher use over their lifetime (14% vs. 8.6%) and in the past 12 months (11% vs. 7.0%).

Changes 2019–2024

Lifetime cannabis use among all students remained stable between 2019 (12%) and 2024 (11%). Sex-disaggregated data, however, show a widening gap: for boys, rates were 11% in 2019 and 8.6% in 2024, while for girls they were 12% and 14%, respectively.

Other substances

All students 2024

Overall, 15% of students considered it “fairly easy” or “very easy” to obtain cocaine and non-prescribed tranquillisers or sedatives, while 11% perceived the same about ecstasy.

Lifetime use of other substances ranged from 3% to 5%. Inhalants had the highest prevalence (5.2%), followed by synthetic cannabinoids and non-prescribed tranquillisers (both 3.6%). Painkillers to get high and combining alcohol with pills were reported at similar levels (3.3%).

Perceived risk of other substances was highest for regular use of synthetic cannabinoids (64%). In contrast, far fewer considered trying substances once or twice to be a “great risk”: 28% for amphetamines, 27% for ecstasy, and 25% for synthetic cannabinoids.

Sex differences 2024

Girls were significantly more likely than boys to report using synthetic cannabinoids (4.7% vs. 2.4%), alcohol with pills (4.5% vs. 2.0%) and tranquillisers or sedatives without a prescription (4.4% vs. 3.0%) in their lifetime. More girls than boys perceived a "great risk" in using synthetic cannabinoids regularly (67% vs. 62%), while boys were more likely to perceive a "great risk" in trying synthetic cannabinoids once or twice (27% vs. 23%).

Changes 2019–2024

The use of other substances analysed remained relatively stable between 2019 and 2024.

Social media use

All students 2024

Nearly all students had used social media in the past 7 days: 97% on non-school days and 93% on school days.

On non-school days 73% of students had spent four or more hours on social media, compared with 42% on school days.

A non-clinical scale of social media problems indicated that almost half of students (47%) were at high risk of problems relating to social media use.

Sex differences 2024

Girls were more likely than boys to spend four or more hours on social media, both on non-school days (81% vs. 67%) and school days (48% vs. 36%). High scores on a social media problem scale were also more common among girls (54% vs. 41%).

Gaming

All students 2024

In the past 30 days, 82% of students gamed on non-school days and 69% on school days.

Approximately one-third (34%) of students played for four or more hours on non-school days, compared with 13% on school days.

On average, students gamed on four of the past seven days.

Overall, 22% of students scored high on a non-clinical gaming problem scale, suggesting a high risk of problems related to gaming.

Sex differences 2024

In the past 30 days boys were more likely than girls to game on both non-school days (91% vs. 72%) and school days (78% vs. 58%). They were also more likely to spend four or more hours gaming on non-school days (51% vs. 17%) and school days (19% vs. 7.3%). Boys reported spending a higher average number of days gaming than girls in the past 7 days (5 days vs. 3 days) and had a higher risk of problems related to gaming (32% vs. 12%).

Gambling

All students 2024

Overall, 16% of students reported gambling at least once in the past 12 months. Lotteries were the most common activity (9.1%), followed by card or dice games (6.6%), sports or animal betting (5.5%), and slot machines (4.3%).

In the past 12 months, on-site gambling was reported by 14% of students and online gambling by 9.1%.

An adapted version of the Consumption Screen for Problem Gambling indicated that 2.4% of students gambled excessively, while the Lie/Bet screening tool estimated that 5.5% of students may have gambling problems.

Sex differences 2024

Boys were more likely than girls to gamble overall (18% vs. 14%), both on-site (16% vs. 13%) and online (11% vs. 6.7%). Girls were generally more likely than boys to have played lotteries (9.8% vs. 8.4%), while boys were more likely to have engaged in sports betting (8.1% vs. 2.4%). Excessive gambling was also more common among boys than girls (3.3% vs. 1.4%).

Chapter 1
Background and research design

Introduction

Substance use and other risk behaviours pose threats to both physical and mental health, with wide-ranging consequences for individuals, families, and communities. Adolescence is a critical developmental stage during which experimentation with psychoactive substances and other risk behaviours often begins, and experiences during this stage can influence long-term outcomes (Steinfeld & Torregrossa, 2023).

The European School Survey Project on Alcohol and Other Drugs (ESPAD) has become a primary tool to gauge the prevalence and patterns of substance use and other potentially problematic behaviours among young people aged 15–16 years in Europe. Malta has participated in all eight cycles of ESPAD since its inception in 1995. Data are typically collected every four years; however, the 2024 wave followed a five-year interval. In 2024, 37 countries provided data. The project was initially coordinated by the Swedish Council for Information on Alcohol and Other Drugs (CAN) in cooperation with the Pompidou Group at the Council of Europe. It is now managed by the Italian National Research Council (CNR) with the support of the European Union Drugs Agency (EUDA).

On a national level, the 2024 ESPAD survey was coordinated by the Foundation for Social Welfare Services (FSWS) in collaboration with:

- the National School Support Services within the Well-being Services Directorate at the Department for Educational Services (DES);
- the Directorate for Education at the Secretariat for Catholic Education, Archdiocese of Malta;
- the Independent Schools Association (ISA); and
- the participating independent schools.

Purpose, context, and study design

ESPAD is a pan-European, cross-sectional, school-based survey that uses a self-administered, anonymous questionnaire to assess adolescent behaviours, including cigarette smoking, alcohol consumption, and other substance use. To keep pace with emerging risk behaviours among youth, the questionnaire is regularly updated to include new topics, such as e-cigarette use and energy drink consumption, while retaining a core set of items to enable long-term trend analysis. Over time, questions on social media use, gaming, and gambling have been added, reflecting growing evidence that these behaviours, like the use of psychoactive substances, can become problematic (Shannon et al., 2022). The most recent survey cycle also included new items on well-being and on prevention activities.

The use of a common core questionnaire and a standardised methodology across participating countries and successive survey waves enables cross-national comparisons and reliable monitoring of trends over time. International findings are accessible through the ESPAD Data Portal (https://data.espad.org/), which provides open access to comparable data and long-term trends. This evidence base supports policymakers and practitioners in designing and implementing effective policies, strategies, and interventions aimed at preventing, reducing, or halting risky behaviours among young people.

Population, sampling, and respondents

The target population for the local ESPAD survey comprised students in Malta and Gozo born in 2008. Year 11 students were included in the sampling frame since this cohort covered 96% of the target group. As in previous ESPAD surveys, the total population was sampled because the number of eligible students was similar to the desired sample size. In total, 2,880 valid questionnaires were returned from 2008-born students. Forty-three schools participated, with a class participation rate of 95% and a student presence rate of 73%. The overall parental opt-out rate was 0.8%, while the student refusal rate was 0.4%.

Comparisons of the study population and all survey participants (including students born in years other than 2008) showed close alignment by sex and school type, with a slight overrepresentation of Church school students (see Table A).

Table A

A comparison of the study population and all survey participants by sex and school type

	Study population	All survey participants
Sex		
Boys	50%	52%
Girls	50%	48%
School type		
State	55%	52%
Church	34%	39%
Independent	11%	9%

The ESPAD study is designed to represent the school-attending student population. However, data from students who were absent on the day of data collection were not included. Absences may occur for various reasons, such as illness or truancy. In 2024, Easter fell in March, and because most data were collected afterwards, some students may have stayed home to prepare for national exams. Evidence indicates that although absentees and students who have left school are generally more likely to use both licit and illicit substances than their school-attending peers, their exclusion does not substantially affect overall prevalence estimates of substance use (Miech et al., 2025).

Ethical considerations

Ethical approval for the 2024 ESPAD survey was granted by the Research Ethics Committee of the Ministry for Education, Sport, Youth, Research, and Innovation, and consent was obtained from the relevant education authorities. A passive parental consent procedure was adopted (opt-out approach): parents received an information letter outlining the study's purpose and procedures, with the option to decline their child's participation. Students were also informed that their participation was voluntary.

For surveys on sensitive behaviours such as ESPAD, it is essential that students understand their responses are anonymous and feel confident that reporting such behaviours will not lead to negative consequences. To ensure both perceived and actual anonymity, several safeguards were implemented:

- Students were instructed not to write their names or any identifying information on the questionnaire.
- Survey leaders were advised to remain seated during administration to avoid seeing students' responses.
- Each student received a blank envelope and was asked to place the completed questionnaire inside and seal it. They were assured that no one from the school would have access to their answers.
- Assistance was available for students who required help, such as those supported by a Learning Support Educator (LSE). However, if anonymity could not be guaranteed, these students were excused from participation.

Data collection instrument

The 2024 questionnaire covered alcohol, cigarettes, e-cigarettes, energy drinks, other substances, social media use, gambling, gaming, well-being, and prevention activities. Questions on perceptions and sociodemographic characteristics were also included, as in previous waves.

The questionnaire was available in both Maltese and English. Newly introduced ESPAD items were translated into Maltese and back-translated into English to ensure accuracy.

New modules on well-being (measured using the WHO-5 Well-Being Index) and prevention activities were added in 2024, along with additional items on other topics, particularly e-cigarettes. The WHO-5 Well-Being Index, a validated tool consisting of five statements referring to the previous two weeks, was used in this study to assess subjective mental well-being. A score above 50 (out of 100) is considered indicative of good well-being (Topp et al., 2015). To measure participation in prevention activities, students were asked about their involvement in awareness events, interactive training sessions, and personal, social, and media literacy skills.

To ensure clarity and cultural relevance of newly drafted questions for the 2024 instrument, feedback was gathered from stakeholders working with young people. Piloting was then conducted in six Year 10 classrooms across six schools. Written and verbal feedback provided insights into how students interpreted specific terms and referred to various substances. Following this input and pretesting of the questions in both Maltese and English, amendments were made where needed. Several adaptations were introduced, such as using the term "normal cigarettes" instead of "traditional cigarettes" to distinguish conventional cigarettes from e-cigarettes. Although the term "normal cigarettes" does not reflect preferred scientific or public health terminology, stakeholder feedback and piloting indicated that students understood this phrasing more clearly, improving comprehension and consistency in responses. Revisions were also made to prevention-related questions to improve clarity. For example, a definition of "interactive training" was provided to ensure consistent interpretation. Cultural adaptations made in previous national surveys were retained, as outlined in earlier ESPAD reports (Arpa & Borg, 2020).

An English version of the 2024 questionnaire used in Malta is provided in Appendix I.

Field procedures

The anonymous, self-administered questionnaires were completed in classrooms by Year 11 students from State, Church, and Independent schools across Malta and Gozo. Data were collected between 14 February and 17 April 2024, earlier than in most other countries to accommodate Malta's school examination schedule. Pen-and-paper questionnaires were used to enable simultaneous administration across classes, and surveys were conducted during mid-morning sessions to ensure that late arrivals were included. In most schools, survey leaders were members of the school staff. In three schools, staff from the Foundation for Social Welfare Services (FSWS) fulfilled this role. Each leader completed a classroom report detailing student absenteeism, cooperation, observed disturbances during data collection, difficulties in understanding the questions, and the time taken to complete the survey.

Data management and analysis

Data checking and data entry

All completed questionnaires were manually checked to identify invalid responses (e.g., patterned or inconsistent answers). Data entry was carried out by a commissioned company, with 10% of the entries double-checked by the FSWS coordinating team for accuracy. A prepared SPSS dataset was then submitted to the international ESPAD coordination team, which applied standardised cleaning procedures across all participating countries. As a result, 1.0% of questionnaires from 2008-born students in Malta were discarded due to poor data quality.

Data analysis

The cleaned national dataset returned to Malta was analysed using IBM SPSS Statistics 29. Only data from Year 11 students born in 2008 were included in the final analysis.

For the first time, the 2024 questionnaire included the response categories "Other" and "Rather not answer" for the question on sex. Students selecting these options were included in the overall *all students* category but were excluded from sex-specific analyses because their numbers were small. Among the 2,880 valid responses from 2008-born students, 1488 (52%) were boys, 1350 (47%) were girls, 13 (0.5%) selected "Other", and 29 (1.0%) selected "Rather not answer".

All variables examined within Chapters 2 and 3 of the report have been assessed for differences between boys and girls (hereafter referred to as sex differences). For all variables except one, chi-square tests were used; for the item asking about the number of days spent gaming in the last 7 days, t-tests were used to examine sex differences in the mean number of days. Statistical test results were considered significant at the 0.05 level. For brevity, only statistically significant sex differences are discussed in the text.

Variable construction and recategorisation

Substance use variables

For prevalence estimates and sex comparisons, substance use variables were dichotomised into any use and no use.

Perceived availability of substances was measured by asking students how difficult they thought it would be to obtain specific substances if they wanted them. Response options were: "impossible", "very difficult", "fairly difficult", "fairly easy", "very easy", and "don't know". For analysis, responses were recategorised into *fairly or very easy to obtain* and *other*. Overall perceived alcohol availability was categorised as *easy to obtain* when at least one of the five individual types of alcohol (beer, cider, premixed drinks, wine, or spirits) was reported as "fairly easy" or "very easy" to obtain.

The following sets of variables were also recategorised: off-premises alcohol purchasing, on-premises alcohol consumption, heavy episodic drinking, alcohol intoxication (into *yes* and *no*), and perceived risk of various substances (into *great risk* and *other*). In addition, variables that asked about the age when various behaviours first occurred (e.g. use of substances, drunkenness, daily cigarette smoking and e-cigarette use) were dichotomised, with age of initiation at 13 or younger considered early onset.

Drinking motives were assessed with 12 items asking students how often they had consumed alcohol in the past 12 months for each motive (e.g. "because it helps you enjoy a party?"), with the response options of "never", "seldom", "sometimes", "mostly", or "always". For analysis, responses were recategorised into *mostly or always and other*.

Lifetime substance use was summarised using two composite variables: (1) *any illicit drug use* and (2) *any illicit drug use excluding cannabis*. The first variable included lifetime use of cannabis, amphetamines, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine. The second variable captured lifetime use of the same substances, excluding cannabis .

Social media use and gaming variables

Questions on social media use and gaming followed a similar structure. Students reported the amount of time spent on both a school day and a non-school day on social media (during the past 7 days) and on gaming (during the past 30 days). The questions indicated the typical amount of time spent per day within these periods. Response categories were: "none", "half an hour or less", "about 1 hour", "about 2–3 hours", "about 4–5 hours", and "6 hours or more". For analysis, responses were recategorised into *about 3 hours or less and about 4 or more hours*.

An adapted non-clinical screening tool (Holstein et al., 2014) was used to assess perceived problems with social media use and gaming. Students indicated their level of agreement with three statements for each behaviour: (1) they spend too much time on the activity, (2) they get into a bad mood if they cannot engage in it, and (3) their parents believe they spend too much time on it. Responses of “strongly agree” or “partly agree” were coded as 1, and all other responses as 0. Scores across the three items were then summed to create an index ranging from 0 to 3. Scores below 2 indicated a low risk, whereas scores of 2 or 3 reflected a high risk of problematic use.

Gambling variables

In this report, overall gambling in the past 12 months is defined as having engaged at least once in any of the four gambling activities surveyed: slot machines, card or dice games, lotteries, or betting on sports or animals, whether on-site in physical venues (e.g., bars or clubs) or online. Separate indicators are also presented for each

activity and for the formats of on-site gambling and online gambling within the same 12-month timeframe.

For analysis purposes, gambling variables were also dichotomised into *gambled for money in the last 12 months* and *not gambled*.

Excessive gambling was assessed using an adapted version of the Consumption Screen for Problem Gambling (CSPG; Rockloff, 2012). The measure included three items:

1) Frequency of gambling in the past 12 months — Response options were: "I have not gambled for money during the last 12 months" (score 0), "Monthly or less" (score 1), "2–4 times a month" (score 2), and "2–3 times or more a week" (score 3).

2) Time spent gambling on a typical day in the past 12 months — Response options were: "I have not gambled for money during the last 12 months" (score 0), "Less than 30 minutes" (score 0), "Between 30 minutes and 1 hour" (score 1), "Between 1 and 2 hours" (score 2), "Between 2 and 3 hours" (score 3), and "3 hours or more" (score 4).

3) Frequency of gambling for more than two hours on a single occasion in the past 12 months — Response options were: "I have not gambled for money during the last 12 months" (score 0), "Never on a single occasion" (score 0), "Less than monthly" (score 1), "Monthly" (score 2), "Weekly" (score 3), and "Daily or almost daily" (score 4).

Scores from all three items were summed, with a total score of 4 or more indicating excessive gambling.

Possible problem gambling was assessed using the Lie/Bet Screening Tool (Johnson et al., 1997), which consists of two questions:

1) "Have you ever felt the need to bet more and more money?"

2) "Have you ever had to lie to people important to you about how much you gambled?"

Each question was answered with "Yes" (score 1) or "No" (score 0). A total score of 2 indicates problem gambling.

Comparability of variables over time

Changes in questionnaire wording and structure can influence the comparability of certain indicators across survey waves. Between 2019 and 2024, several updates were introduced to reflect aspects such as emerging adolescent behaviours, the changing nature of products, and the need for clearer terminology. While most adaptations are unlikely to substantially impact the overall data, the main changes are summarised below:

Alcohol

In 2024, questions on the perceived availability of beer, cider, and wine were revised to include instructions to exclude non-alcoholic versions of these beverages.

Cigarettes and e-cigarettes

In 2019, the questions about cigarette use clarified that e-cigarettes were excluded. In 2024, the wording of this exclusion was updated: the term "e-cigarettes" was replaced with the phrase "digital and alternative smoking products". At the beginning of the cigarette section, students were shown the following explanation: "The following questions are about tobacco smoking (normal cigarettes, rolled cigarettes, cigarillos, cigars), EXCLUDING products such as e-cigarettes, vapes, heated tobacco products, and water pipe (digital and alternative smoking products)."

The 2019 lifetime-use question for cigarettes, which asked about the number of occasions of use, was replaced with the question: "Have you ever smoked cigarettes (excluding digital and alternative smoking products)?" The response options were: "Yes, in the last 30 days"; "Yes, in the last 12 months but not in the last 30 days"; "Yes, more than 12 months ago"; and "Never".

The 2024 questionnaire also introduced a new item on the perceived risk of daily e-cigarette use.

Other substances

The question on non-prescribed tranquilliser use, previously grouped under the section on other drugs, was moved next to the question on prescribed tranquillisers.

Cannabis terminology was simplified from "marijuana or hashish (cannabis)" to "cannabis".

The term "synthetic cannabinoids" was changed to "synthetic cannabis (synthetic)" to reflect wording commonly used in Malta.

In 2024, methamphetamine was added to the list of substances included in the composite illicit drug use variables in Malta to maintain consistency with updates introduced at the international level.

Social media

New examples of social media platforms were added in 2024 to reflect those most popular among adolescents in Malta (e.g., TikTok, Messenger, and Discord), while outdated examples were removed.

Gambling

In 2019, gambling questions did not distinguish between on-site and online activities. This distinction was reintroduced in the 2024 questionnaire, similar to the approach used in 2015. However, while the 2015 survey referred to gambling "on the internet" and "not on the internet," the 2024 categories were updated to "online" and "on-site (in physical places such as bars, clubs, and każini)".

Questionnaire modifications across survey waves should be considered when interpreting differences between 2019 and 2024, and when examining longer-term trends. Further details on questionnaire revisions are available in the international ESPAD documentation (espad.org) and in previous Maltese ESPAD reports (https://fsws.gov.mt/fsws/publications/espad-reports/).

Data presentation

Chapter 2 presents the 2024 findings on substance use, while Chapter 3 reports on social media use, gaming, and gambling. Chapter 4 examines trends over time, using sex-disaggregated line graphs to highlight differences between boys and girls. Although three or more measurement points are generally recommended to establish trends, some variables with only two data points are included in Chapter 4 because of their policy relevance and value for understanding emerging behaviours. All percentages reported in Chapters 2, 3, and 4 are calculated from valid responses for each variable. A standardised formatting rule was also followed to ensure clarity and readability: values equal to or greater than 10% are shown as whole numbers, while values less than 10% are presented to one decimal place. As a result, totals for each variable may not sum to exactly 100%. The figures in Chapters 2, 3, and 4 are based on data provided in Appendices II and III.

Conclusion

The ESPAD 2024 study marks nearly 30 years of monitoring adolescent substance use across Europe, with Malta participating in every cycle since 1995. This report provides national data on substance use, social media use, gaming, gambling, and other risk behaviours among Maltese adolescents. Although, as in other studies of this kind, the exclusion of absent students may have some impact on prevalence rates, comparability with previous survey waves has been maintained. The findings offer a strong evidence base to guide Malta's prevention planning, resource allocation, and targeted interventions for young people.

Chapter 2
Substance use

Introduction

This chapter presents findings on substance use from the Malta 2024 ESPAD survey. It examines, among other things, prevalence rates, early initiation (first use at age 13 or younger), and students' perceptions regarding alcohol, cigarettes, e-cigarettes, cannabis, and other substances. All figures are based on the total student sample (N = 2,880). In a few instances, specific findings reported in the text draw on subsample analyses, which are noted accordingly. Comparative data on the lifetime prevalence of all substances examined are presented in Figure 15, while detailed tables for many of the results, together with additional variables, are provided in Appendix II.

Alcohol

Perceived availability

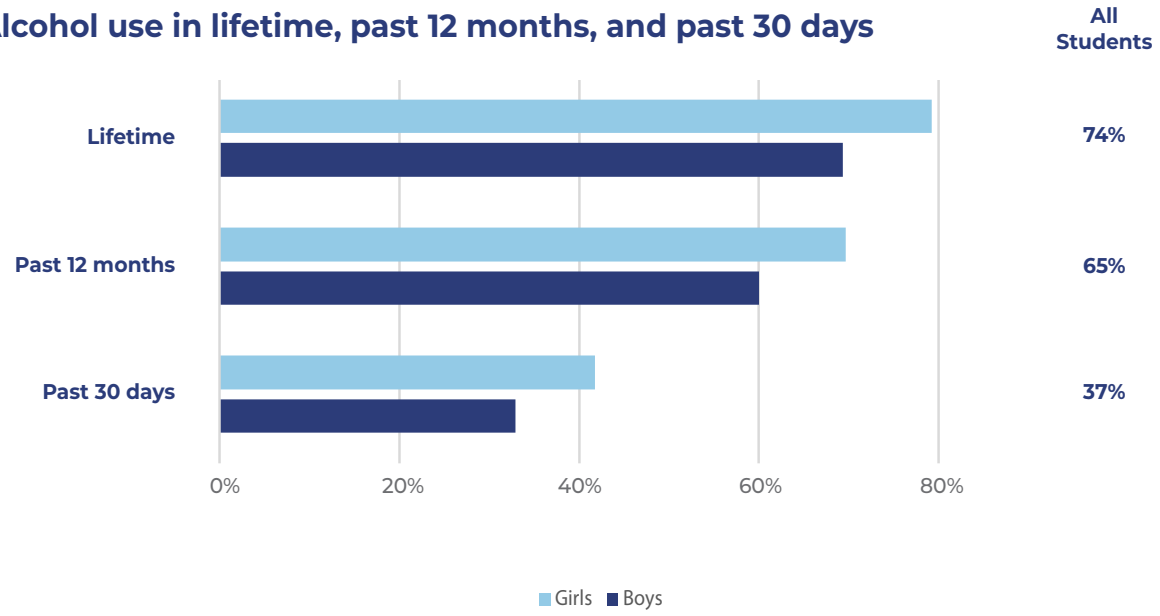
Overall, 79% of students perceived alcohol as "very easy" or "fairly easy" to obtain (hereafter referred to as easy). This composite measure was derived from students' reported ease of access to beer, wine, spirits, cider, or premixed drinks. By beverage type, perceived ease of access was highest for beer (69%), followed by wine (63%), premixed drinks such as breezers (61%), cider (58%), and spirits (56%). Girls were significantly more likely than boys to report that alcohol was easy to obtain overall (83% vs. 76%). This sex difference was also observed for wine (67% vs. 59%), premixed drinks (67% vs. 55%), cider (61% vs. 55%), and spirits (61% vs. 52%).

Alcohol use

Alcohol consumption was common among students, with 74% reporting lifetime use, 65% reporting use in the past 12 months, and 37% in the past 30 days (Figure 1). Girls were significantly more likely than boys to report alcohol use across all time frames: lifetime (79% vs. 69%), past 12 months (70% vs. 60%), and past 30 days (42% vs. 33%). Frequent consumption was less common, with 22% of students having consumed alcohol on 20 or more occasions in their lifetime, 9.1% in the past 12 months, and 1.2% in the past 30 days.

Figure 1

Alcohol use in lifetime, past 12 months, and past 30 days

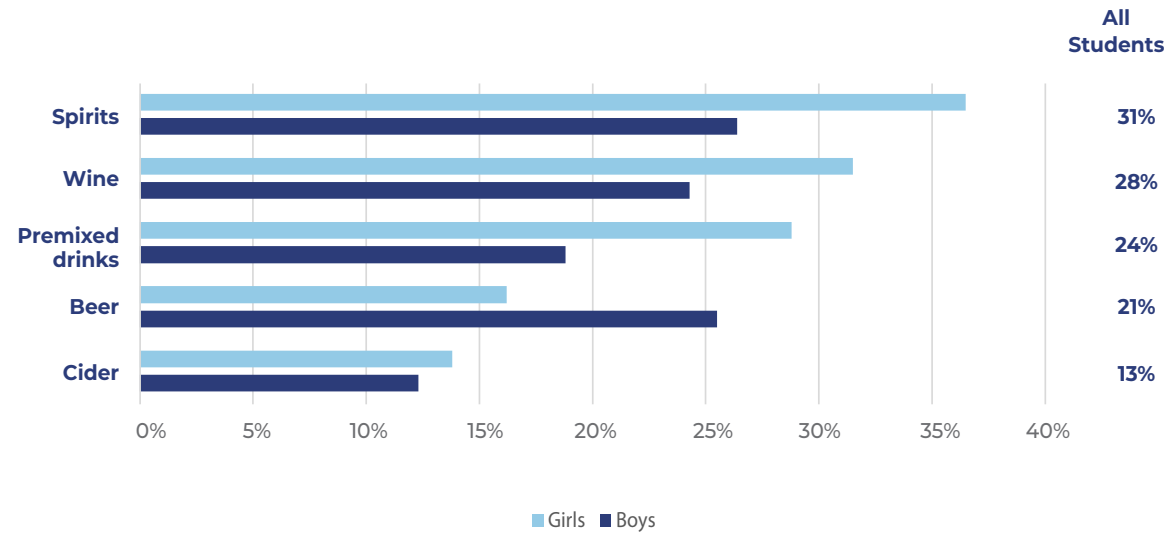


Types of alcoholic beverages consumed

In the 30 days prior to the survey, the most commonly consumed alcoholic beverages among students were spirits (31%) and wine (28%), followed by premixed drinks (24%), beer (21%), and cider (13%) (Figure 2). Girls were significantly more likely than boys to have consumed spirits (37% vs. 26%), wine (31% vs. 24%), and premixed drinks (29% vs. 19%). Conversely, boys were significantly more likely than girls to have consumed beer (26% vs. 16%).

Figure 2

Types of alcoholic beverages consumed in the past 30 days

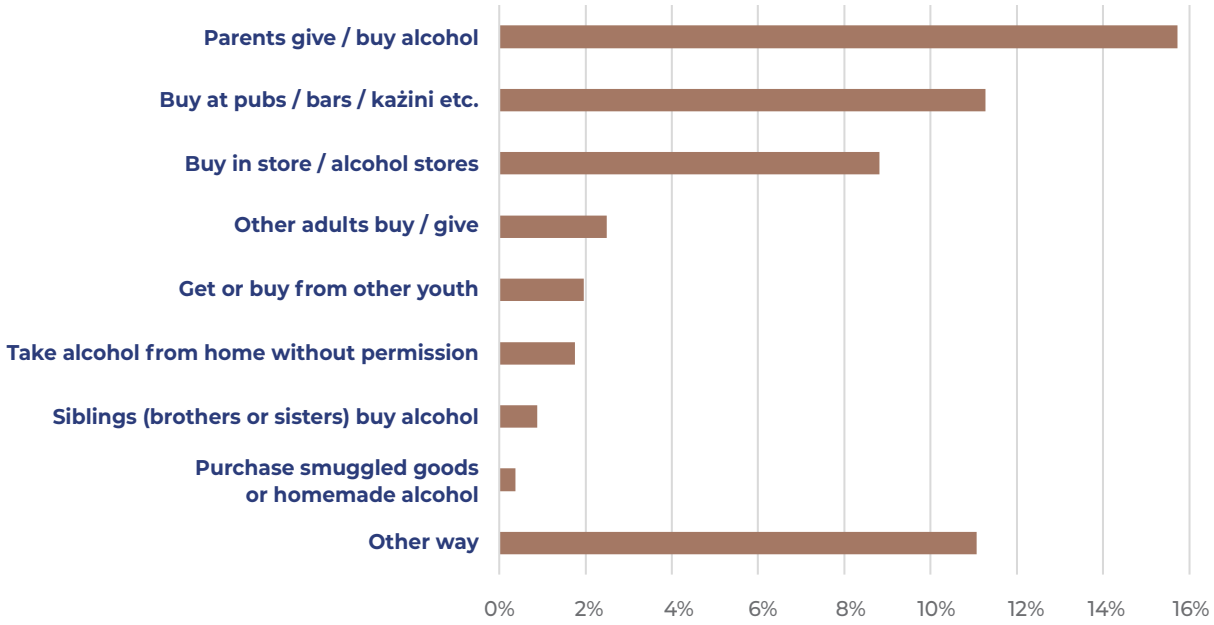


Sources of alcohol

When asked "How do you usually get alcohol?", students most commonly reported obtaining it from parents (16%), purchasing from pubs, bars, or każini[1)] (11%), and purchasing from a store (8.8%) (Figure 3). Girls were significantly more likely than boys to have obtained alcohol from pubs, bars, or każini (14% vs. 9.1%), and from stores (10% vs. 7.8%).

Figure 3

Usual sources of alcohol among all students
(Percentage of students reporting each alcohol source)



In response to a question that specifically asked about purchasing alcohol from a store (such as a supermarket or alcohol shop) in the past 30 days, 20% of students reported buying alcohol for their own off-premises consumption. No significant differences were found between boys and girls.

Locations of alcohol consumption

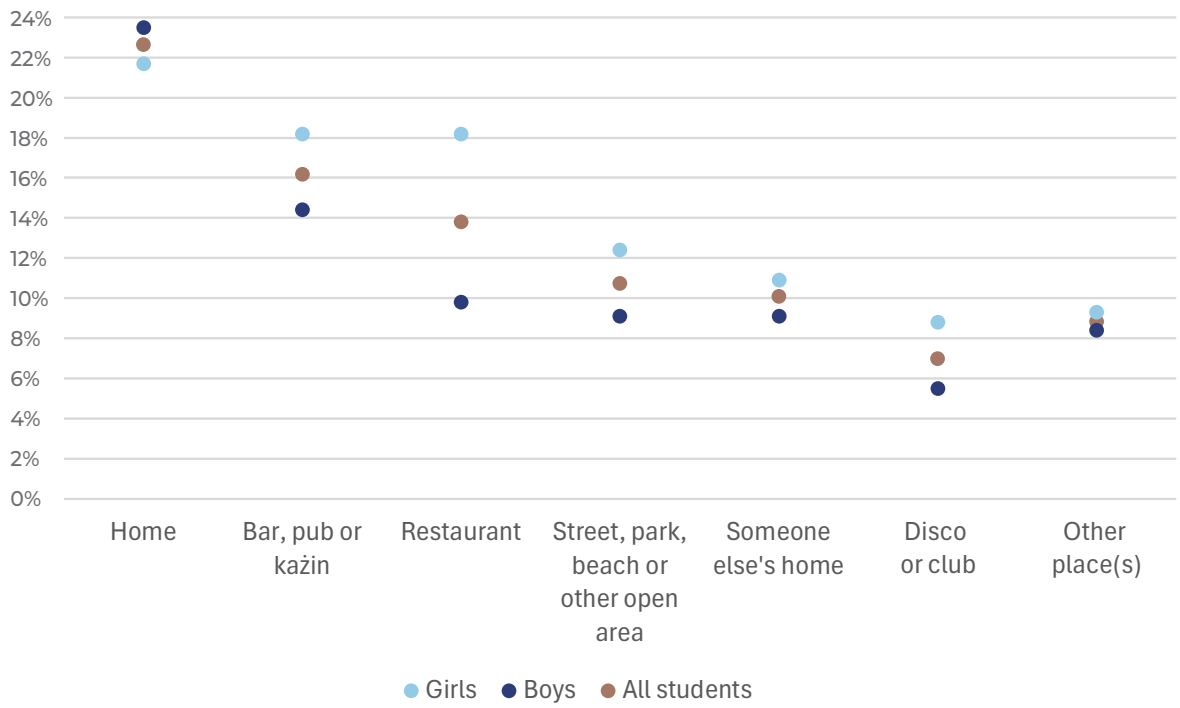
Students were asked to mark all locations where they had consumed alcohol on their most recent drinking day from a given list (Figure 4). The most common drinking locations among the total student sample were: at home (23%), at a bar or pub (16%), and at a restaurant (14%). A significantly higher percentage of girls than boys reported drinking in a pub, bar, or każin (18% vs. 14%), at a restaurant (18% vs. 9.8%), in open areas such as streets, parks, or beaches (12% vs. 9.1%), and at a disco or party (8.8% vs. 5.5%).

1) Każini are traditional Maltese bars which can be associated with a football team, political party or band clubs of the villages.

Figure 4

Alcohol consumption locations on the last drinking occasion

(Percentages of students reporting each location)



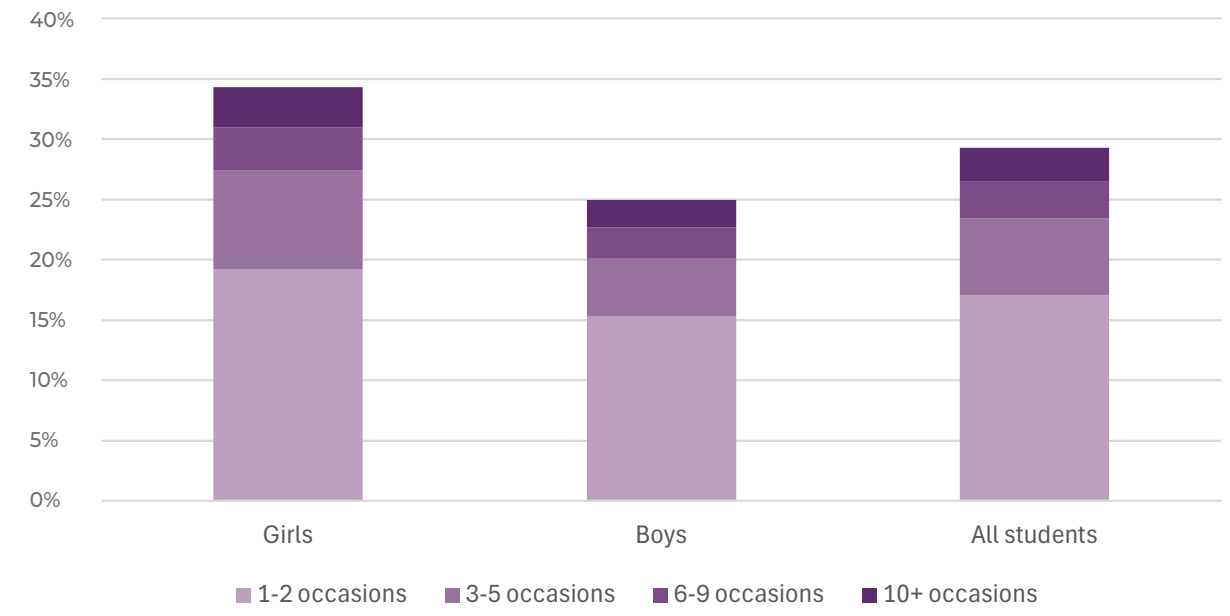
In a separate question, students were specifically asked whether they had consumed alcohol on-premises (in a pub, bar, kažin, restaurant, or disco) in the past 30 days. On-premises drinking was reported by 29% of students, with significantly higher rates observed among girls than boys (36% vs. 23%).

Heavy episodic drinking

Heavy episodic drinking, defined here as the consumption of five or more alcoholic drinks on a single occasion, is used as an indicator of heavy alcohol use (Hibell et al., 2009). For this measure, a *drink* was defined as: one large glass, bottle, or can of beer (or two small ones); one glass of wine; two glasses or shots of spirits; one glass or bottle of cider; or one bottle of premixed drinks. In the past 30 days, 29% of students reported heavy episodic drinking, including 17% on 1 to 2 occasions, 6.4% on 3 to 5 occasions, 3.0% on 6 to 9 occasions, and 2.8% on 10 or more occasions (Figure 5). Girls were significantly more likely than boys to report heavy episodic drinking (34% vs. 25%), with the largest differences observed at lower frequencies (1 to 5 occasions).

Figure 5

Heavy episodic drinking in the past 30 days by frequency.

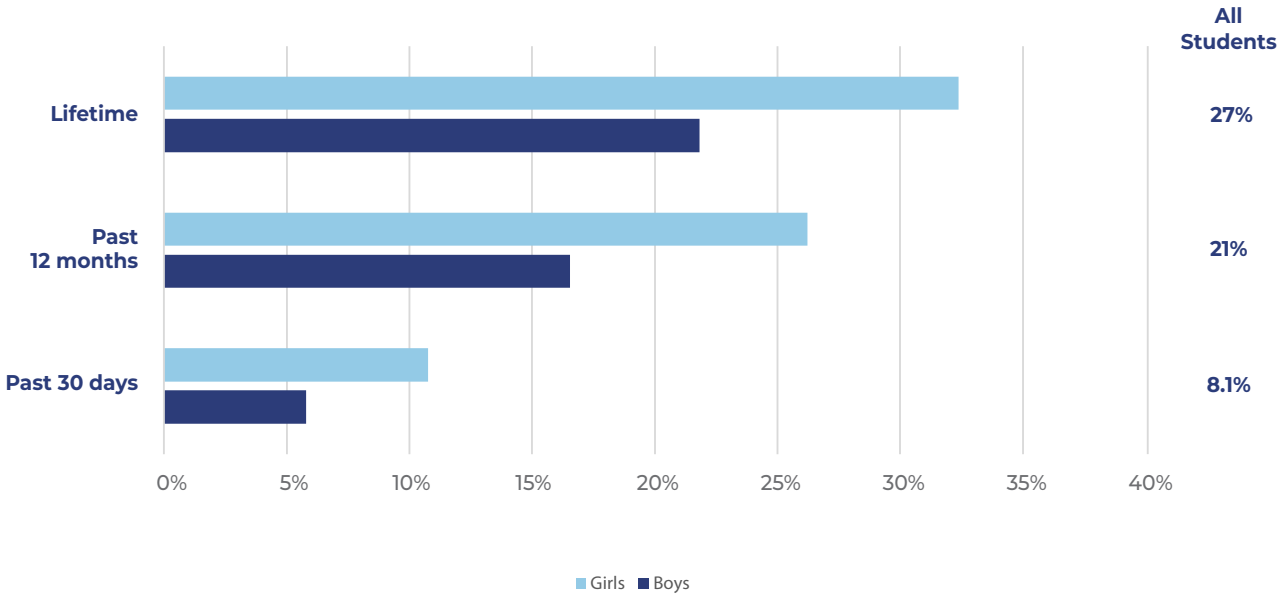


Alcohol intoxication

Overall, 27% of students reported having been drunk at least once in their lifetime, 21% reported intoxication in the past 12 months, and 8.1% in the past 30 days (Figure 6). Among those who had been drunk, most reported 1 to 5 occasions of intoxication within each timeframe. Girls were significantly more likely than boys to report intoxication in their lifetime (32% vs. 22%), in the past 12 months (26% vs. 17%), and in the past 30 days (11% vs. 5.8%).

Figure 6

Alcohol intoxication in lifetime, past 12 months, and past 30 days.



Early onset

Approximately one-third of students (34%) reported first consuming at least one glass of an alcoholic beverage at age 13 or younger (hereafter referred to as early onset). Among all students, 6.4% indicated that they had been drunk by that age. Girls were significantly more likely than boys to report early onset of alcohol use (37% vs. 31%) and early intoxication (7.7% vs. 5.2%).

Drinking motives

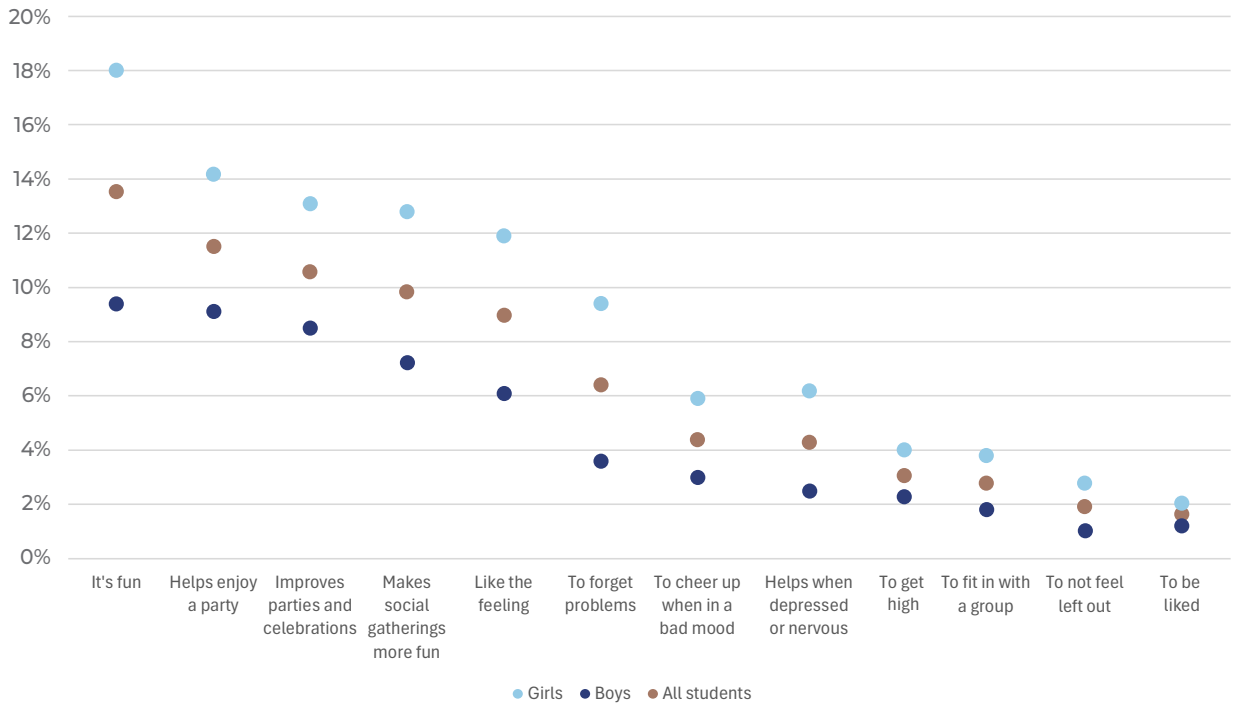
Students were asked about their reasons for consuming alcohol in the past 12 months (Figure 7). The most common motives were social and mood-enhancing. Specifically, 14% reported "mostly" or "always" drinking alcohol in the previous year because it was fun, 12% to help them enjoy a party, and 11% to improve parties and celebrations. A further 10% drank to make social gatherings more enjoyable, and 9.0% because they liked the feeling. Coping-related reasons were less common: 6.4% drank to forget problems, 4.4% to cheer up when in a bad mood, and 4.3% to help when feeling depressed or nervous. Conformity-related reasons were rare, with 2.8% drinking to fit in with a group, 1.9% to avoid feeling left out, and 1.6% to be liked.

Among students who reported drinking in the past 12 months (n = 1,802), girls were significantly more likely than boys to endorse all motives shown in Figure 7, except "to be liked" and "to get high".

Figure 7

Reasons for drinking in the past 12 months

(Percentage of all students reporting "mostly" or "always" drinking for each reason)



Perceived risk

Students were asked how much they thought people risk harming themselves, physically or in other ways, by engaging in various drinking behaviours. Perceived risk increased with both the frequency and quantity of consumption. The behaviour most often rated as involving a "great risk" was having four or five drinks nearly every day (68%), followed by having five or more drinks nearly every weekend (46%) and one or two drinks nearly every day (25%). Girls were more likely than boys to perceive a "great risk" in almost daily drinking, whether heavier (five or more drinks nearly every day: 73% vs. 63%) or lighter (one or two drinks nearly every day: 29% vs. 22%).

Cigarettes and e-cigarettes

Perceived availability

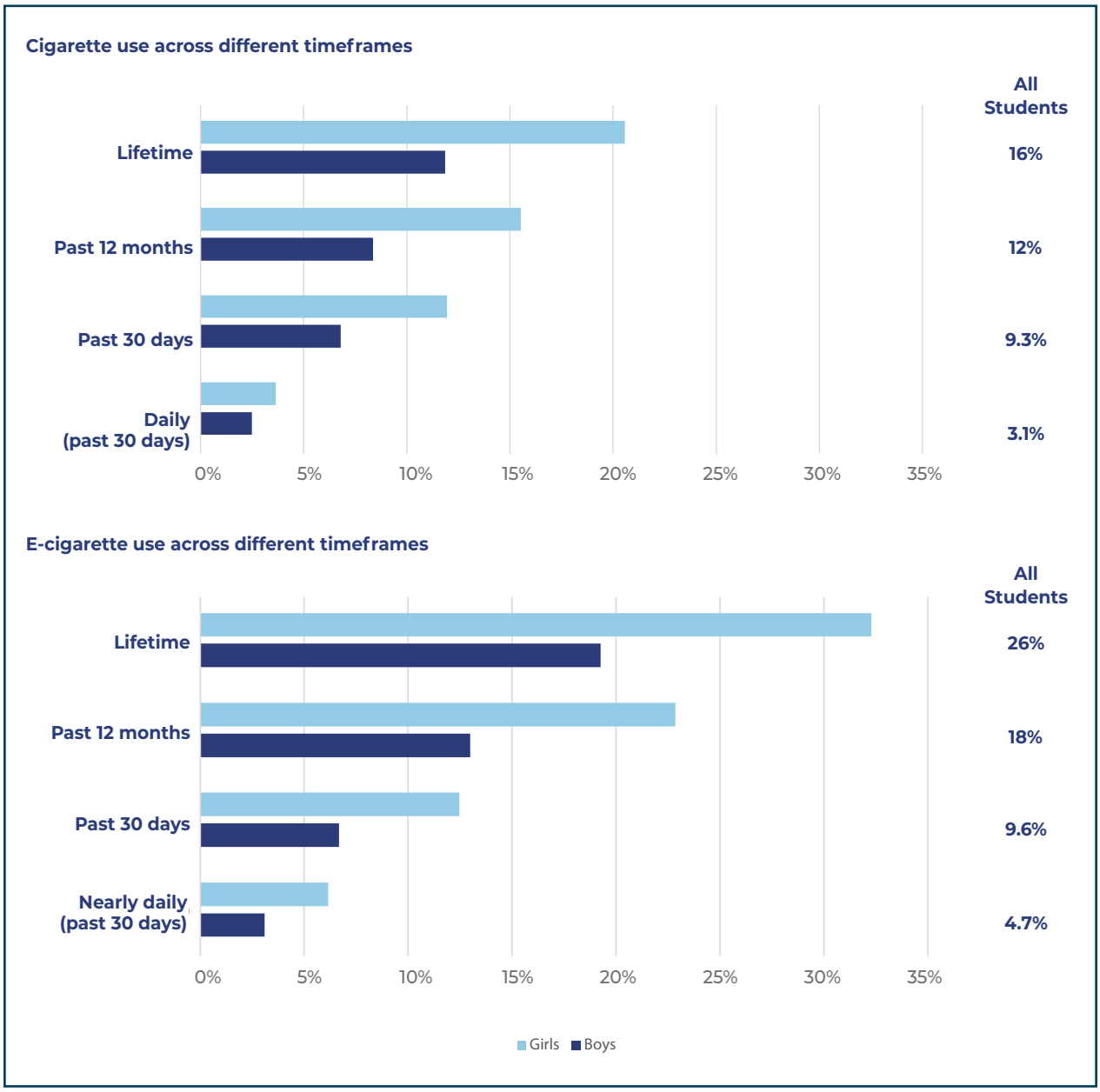
The majority of students thought that cigarettes and e-cigarettes were relatively easy to obtain. Specifically, 54% perceived that it was *fairly or very easy to obtain cigarettes*, while 58% said the same about e-cigarettes. A sex difference was observed for e-cigarettes, with 60% of girls reporting ease of access compared to 56% of boys. No significant sex differences were found for cigarettes.

Cigarette and e-cigarette use

Across the student sample, e-cigarettes were more commonly used than traditional cigarettes, both over the lifetime (26% vs. 16%) and in the past 12 months (18% vs. 12%). In the past 30 days, prevalence was similar for e-cigarettes (9.6%) and cigarettes (9.3%). Daily or near-daily use in this period was reported by 4.7% for e-cigarettes and 3.1% for cigarettes (see Figure 8). When considering the use of either or both products, 28% of students reported lifetime use and 15% reported past 30-day use. Girls were significantly more likely than boys to report use of both products across all timeframes.

Figure 8

Cigarette and e-cigarette use across different timeframes



Early onset

A notable proportion of students reported early initiation of both e-cigarette and cigarette use. By age 13, 11% had tried e-cigarettes, with 3.4% already using them daily. In comparison, 7.1% had smoked cigarettes by this age, and 1.6% were daily smokers. Girls were more likely than boys to initiate use and to transition to daily use of both products by age 13 or younger.

Content of e-cigarettes

Students were asked the question "If you used e-cigarettes in the last 30 days, what did it contain?", and were instructed to mark all possible contents that apply from a given list. The most commonly reported known contents among the total student

sample were flavourings (10%) and nicotine (9.7%), followed by THC (1.2%) and CBD (0.7%). Thirteen percent of students did not know what their device contained. Boys were more likely than girls to be unaware of the contents (14% vs. 12%), whereas girls were more likely to report flavourings (14% vs. 6.9%) and nicotine (13% vs. 6.9%).

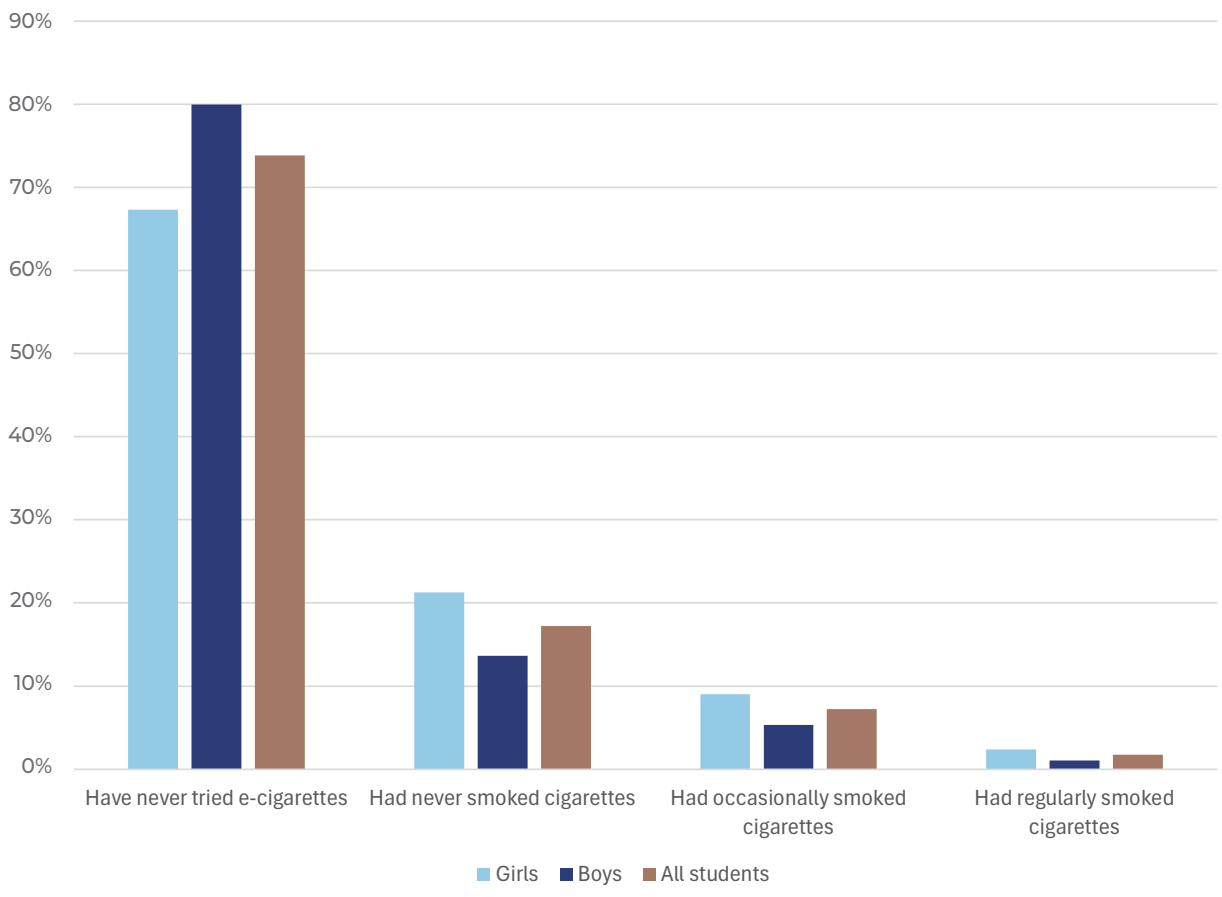
Cigarette use before trying e-cigarettes

Students were asked whether they had smoked cigarettes before first trying e-cigarettes. Nearly three-quarters reported never having tried e-cigarettes, with abstinence rates significantly higher among boys than girls (80% vs. 67%). Among all students, 17% had never smoked cigarettes prior to trying e-cigarettes, 7.2% had smoked cigarettes occasionally, and 1.7% were regular cigarette smokers at the time of first use. Each of these rates was significantly higher among girls than boys (Figure 9).

When focusing only on students who had tried e-cigarettes (n = 751), 66% reported never having smoked cigarettes before first trying e-cigarettes, 28% had smoked occasionally, and 6.7% were regular smokers at the time. No significant sex differences were found within this subgroup.

Figure 9

Cigarette use prior to e-cigarette initiation among all students



Motives for first trying e-cigarettes

Curiosity was the most common reason for first trying e-cigarettes, reported by 18% of all students. Other reasons included being offered one (9.1%), attempting to quit smoking (0.8%), and various other motives (4.7%). Girls were more likely than boys to cite curiosity (21% vs. 14%), being offered an e-cigarette (13% vs. 5.4%), using the product to quit smoking (1.1% vs. 0.4%), and other reasons (5.2% vs. 4.2%).

Perceived risk

Although direct comparisons between perceptions of cigarette and e-cigarette risk are limited due to differences in question wording, the data indicate that perceived risk increases with greater frequency and quantity of use. Two-thirds of students (66%) believed that smoking one or more packs of cigarettes per day posed a "great risk", while 22% considered occasional cigarette smoking to be highly risky. For e-cigarettes, 45% considered daily use a "great risk", whereas 7.0% considered trying them once or twice to be highly risky. Girls were more likely than boys to perceive "great risk" in smoking one or more packs of cigarettes per day (68% vs. 64%), while boys were more likely than girls to consider occasional e-cigarette use as risky (8.3% vs. 5.4%).

Energy drinks

Energy drink use

Most students (82%) reported having consumed energy drinks at least once in their lifetime, with 72% reporting use in the past 12 months, and 57% in the past 30 days. Lifetime use was significantly higher among girls than boys (84% vs. 80%). However, heavier consumption was more common among boys: a greater proportion reported using energy drinks on 20 or more occasions both in their lifetime (44% vs. 41%) and in the past 12 months (23% vs. 20%).

Cannabis

Perceived availability

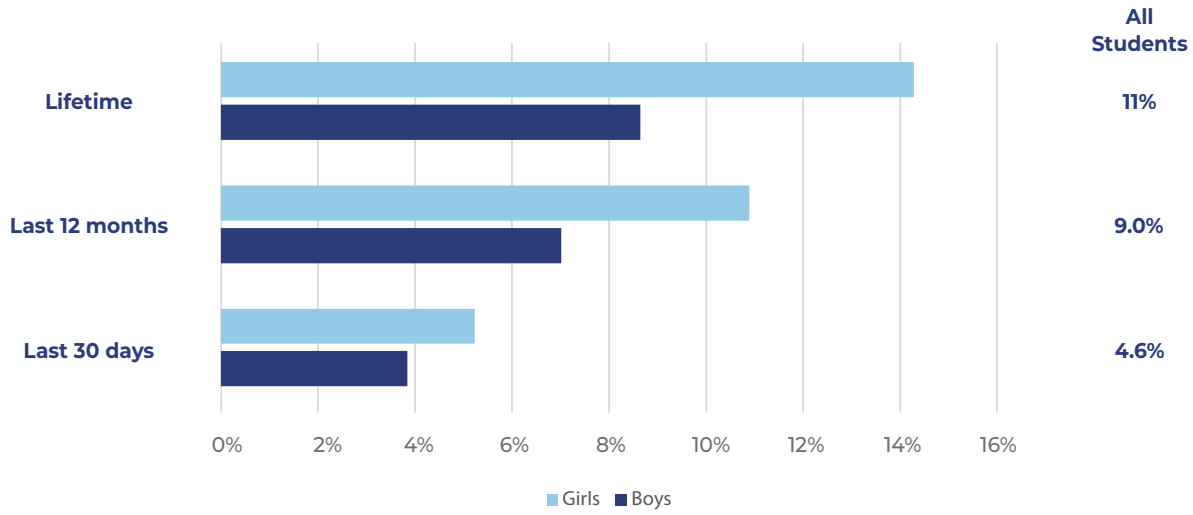
Just under one-third of students (30%) reported that it would be "fairly easy" or "very easy" to access cannabis if they wanted to, with girls significantly more likely than boys to hold this view (33% vs. 27%).

Cannabis use

Lifetime, past year, and past 30-day prevalence rates for cannabis use were 11%, 9.0%, and 4.6%, respectively (Figure 10). Girls were significantly more likely than boys to report lifetime use (14% vs. 8.6%) and use in the past 12 months (11% vs. 7.0%).

Figure 10

Cannabis use in lifetime, past 12 months, and past 30 days



Early onset

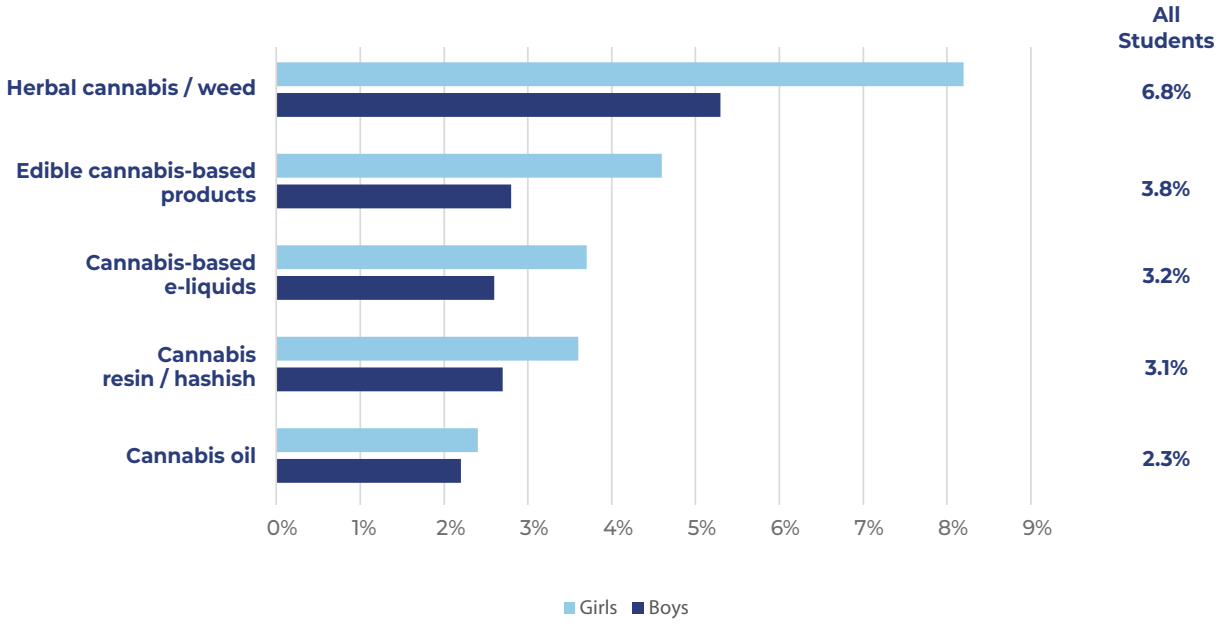
Overall, 2.1% of students reported first using cannabis at age 13 or younger. There was no statistically significant difference between boys and girls.

Type of cannabis used

Among all students, 7.4% reported using cannabis mixed with tobacco in the past 12 months. The most commonly reported type of cannabis used during this period was herbal cannabis/weed (6.8%). Girls were significantly more likely than boys to report using cannabis mixed with tobacco (9.3% vs. 5.3%), herbal cannabis/weed (8.2% vs. 5.3%), and edible cannabis-based products (4.6% vs. 2.8%) (Figure 11).

Figure 11

Types of cannabis used in the past 12 months



Perceived risk

Students were more likely to perceive regular cannabis use as risky (63%) compared with occasional use (29%) or trying it once or twice (14%). Girls were more likely than boys to view regular cannabis use as a "great risk" (66% vs. 61%), whereas boys were more likely to rate occasional cannabis use (30% vs. 27%) and trying it once or twice (16% vs. 11%) as highly risky.

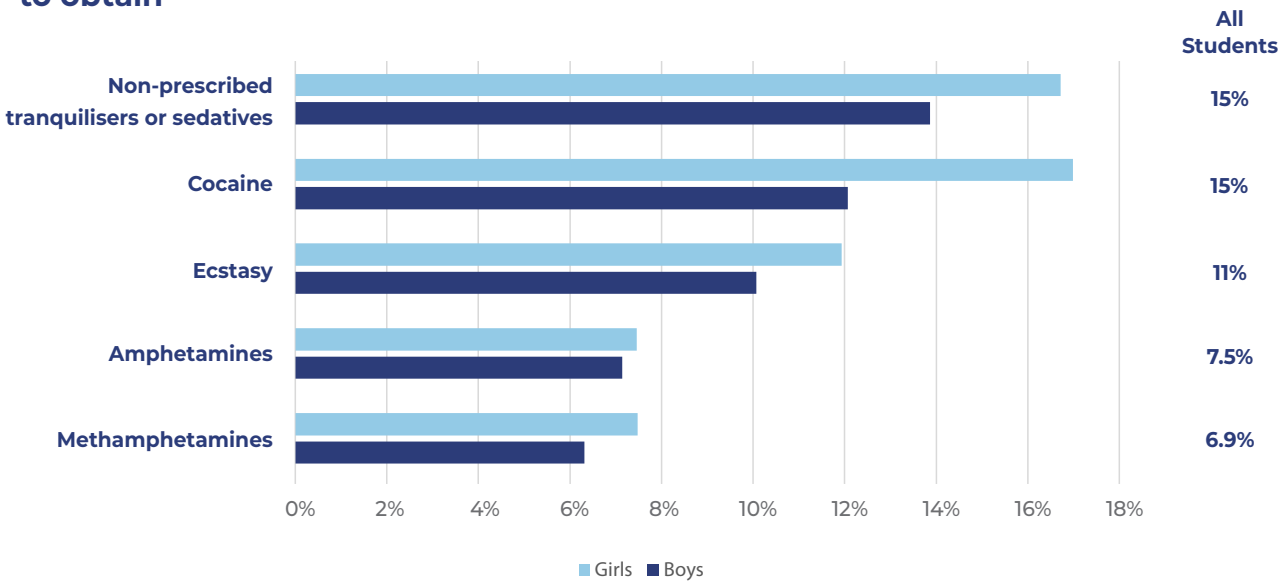
Other substances

Perceived availability

Among the substances shown in Figure 12, the most commonly perceived as "fairly easy" or "very easy" to obtain were tranquillisers or sedatives without a doctor's prescription (15%), cocaine (15%), and ecstasy (11%). Girls were significantly more likely than boys to believe it was easy to obtain cocaine (17% vs. 12%) and tranquillisers or sedatives without a prescription (17% vs. 14%).

Figure 12

Percentage of students perceiving various substances to be fairly or very easy to obtain



Use of other substances

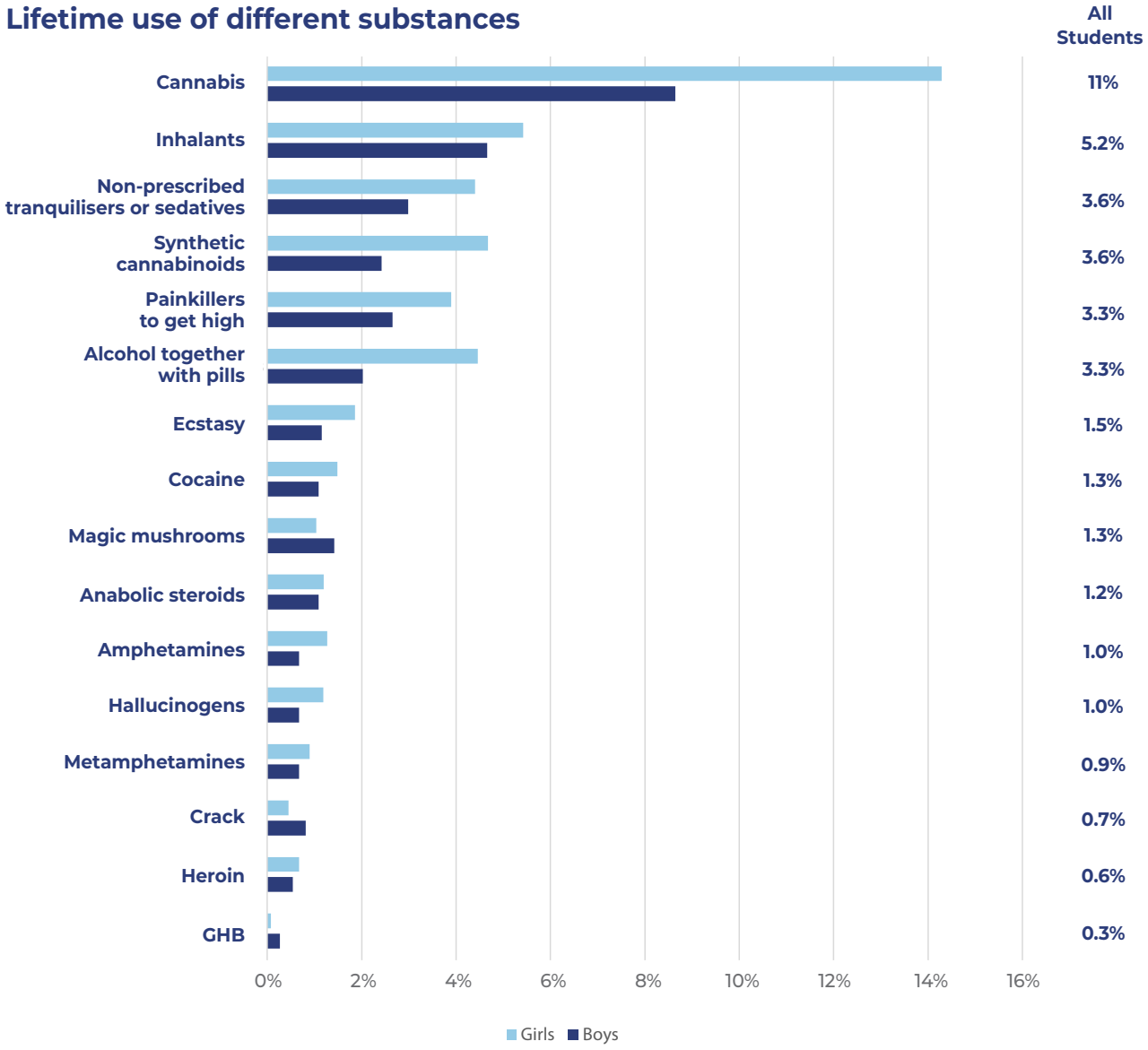
The lifetime prevalence of any illicit drug use (defined as the use of cannabis, amphetamines, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamines at least once) stood at 12%. Girls were significantly more likely than boys to report such use (15% vs. 9.3%). The lifetime prevalence of *any illicit drug use other than cannabis* was much lower, at 3.3%, with no significant differences observed between boys and girls.

When looking at other individual substances, the highest lifetime prevalence was reported for inhalants (5.2%), followed by synthetic cannabinoids (3.6%), tranquillisers

or sedatives without a doctor's prescription (3.6%), painkillers to get high (3.3%), alcohol with pills (3.3%), ecstasy (1.5%), cocaine (1.3%), magic mushrooms (1.3%), and anabolic steroids (1.2%) (Figure 13). Girls were significantly more likely than boys to report lifetime use of synthetic cannabinoids (4.7% vs. 2.4%), alcohol with pills (4.5% vs. 2.0%), and tranquillisers or sedatives without a prescription (4.4% vs. 3.0%).

Figure 13

Lifetime use of different substances

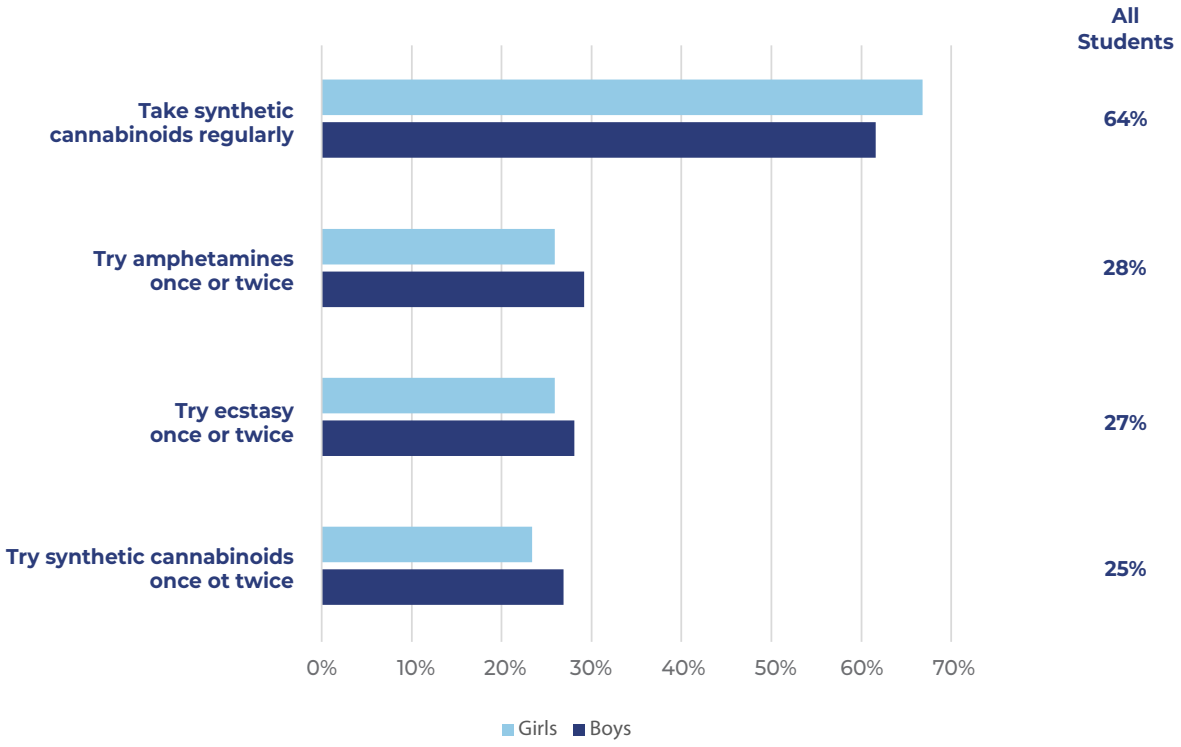


Perceived risk

Perceptions of risk varied by both substance and frequency of use (Figure 14). When asked about trying a substance once or twice, 28% of students considered amphetamine use a "great risk", 27% held the same view for ecstasy, and 25% for synthetic cannabinoids. When asked about the regular use of synthetic cannabinoids, 64% of students reported perceiving it as a "great risk". Boys were significantly more likely than girls to perceive using synthetic cannabinoids once or twice as a "great risk" (27% vs. 23%), whereas girls were significantly more likely than boys to perceive taking synthetic cannabinoids regularly as a "great risk" (67% vs. 62%).

Figure 14

Percentage of students perceiving various behaviours as a "great risk"

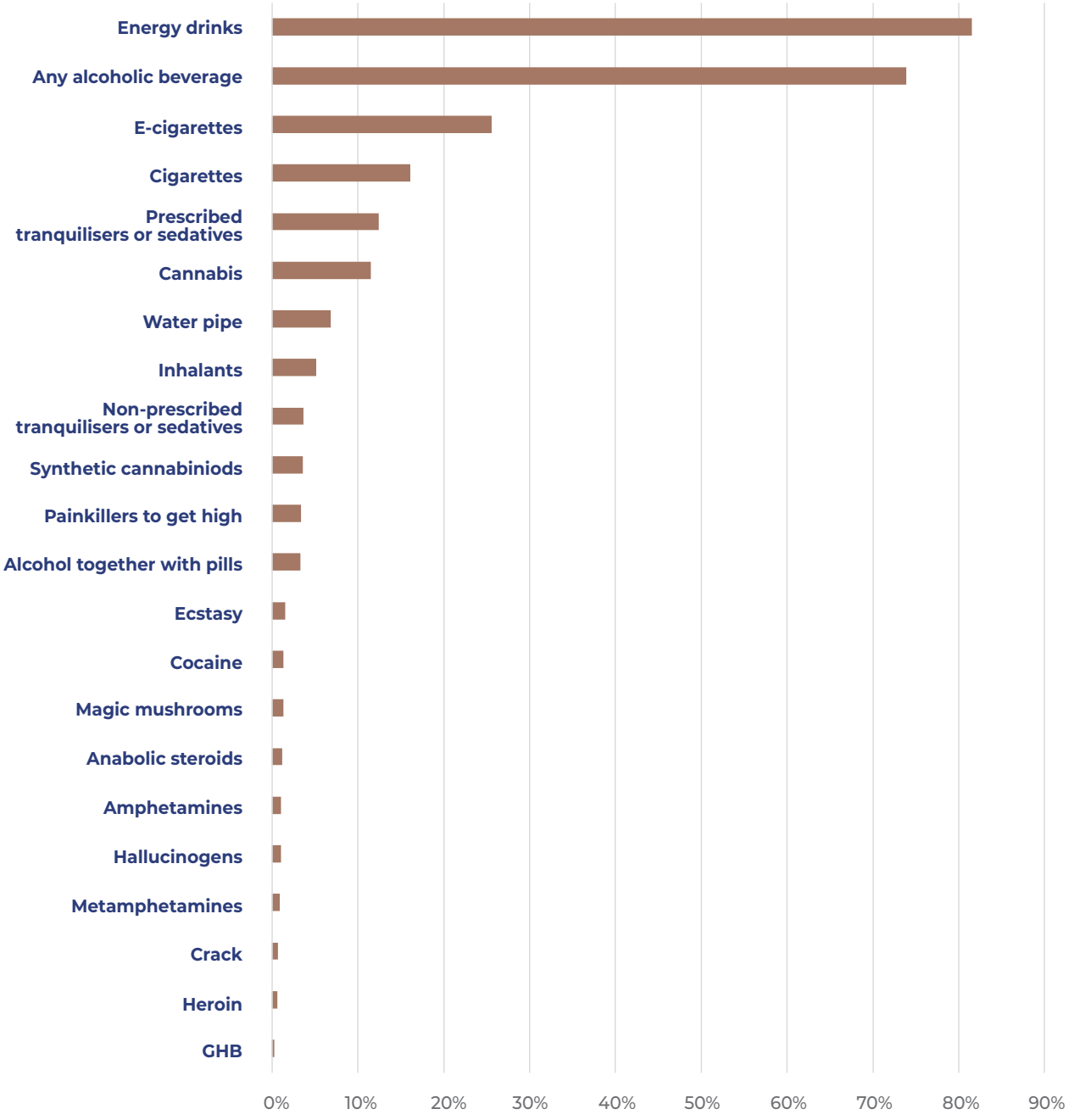


Summary of lifetime substance use prevalence

The findings presented in this chapter highlight the considerable variation in lifetime substance use among students. As shown in Figure 15, energy drinks (82%) and alcoholic beverages (74%) were by far the most commonly tried substances among all students, followed by e-cigarettes (26%), cigarettes (16%), and cannabis (11%). In contrast, the reported lifetime use of other substances, including ecstasy, cocaine, amphetamines, and heroin, was comparatively low. This consolidated overview reinforces the central role of alcohol, cigarettes, and emerging products such as e-cigarettes in adolescent substance use, while also underscoring the presence of illicit drugs, albeit at much lower levels.

Figure 15

Lifetime prevalence of all substances examined among all students



Chapter 3

Social media use, gaming & gambling

Introduction

This chapter examines the prevalence and patterns of social media use, gaming, and gambling among students in Malta, based on the 2024 ESPAD survey. As with psychoactive substances, these behaviours can become excessive or problematic (Grant et al., 2010; Rosenkranz et al., 2017). Following concerns about their impact on adolescent health and well-being, the ESPAD study widened its scope in recent data collection waves to include these behaviours.

To ensure consistency, the ESPAD questionnaire provided explanations of social media use, gaming and gambling to help frame these behaviours.

- Social media was characterised as communicating with others on the internet (using, for example, TikTok, Instagram, Facebook, Messenger, WhatsApp, Snapchat, Twitter, Discord, etc.).

- Gaming was outlined as playing games on a computer, tablet, console, smartphone or other electronic device, with examples of games including strategy, puzzle, adventure, sports, and war games.

- Gambling was defined as gambling for money either online or on-site (i.e., in physical spaces; sometimes described as "not on the internet"). Examples of gambling activities included slot machines, card or dice games, lotteries, and sports betting.

All figures and analyses in this chapter are based on the total student sample (*N* = 2,880). Detailed tables are available in Appendix II.

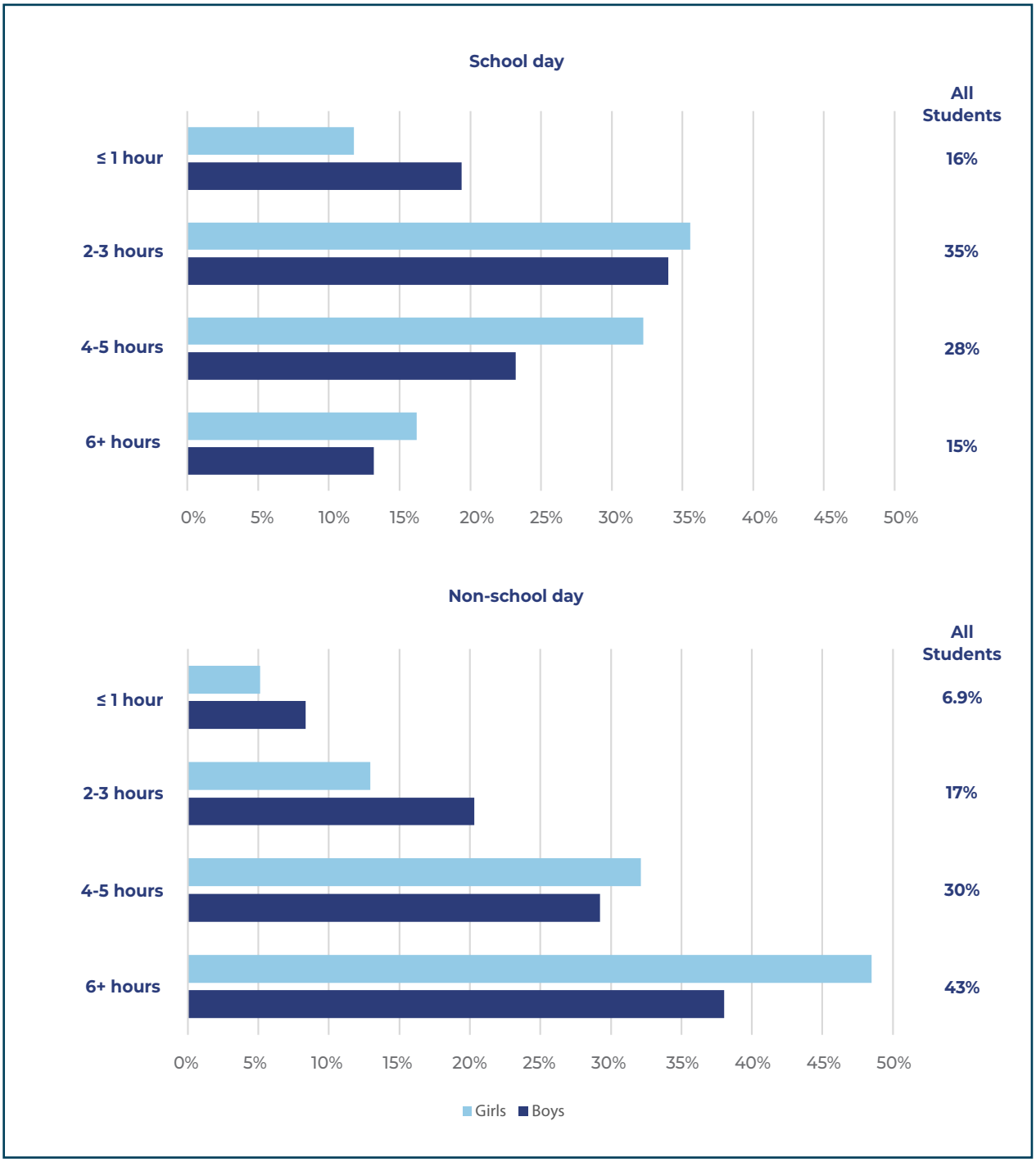
Social media use

Social media prevalence and duration

Almost all students reported using social media in the past seven days, with 93% doing so on school days and 97% on non-school days. As shown in Figure 16, in the past 7 days, 73% spent four or more hours on social media on a non-school day and 42% on a school day. Girls were more likely than boys to report four or more hours of use on both non-school days (81% vs. 67%) and school days (48% vs. 36%).

Figure 16

Time spent on social media on a school day and on a non-school day in the past 7 days



Self-perceived problems with social media use

Based on a self-reported, non-clinical scale assessing problems related to social media use (Holstein et al., 2014), 47% of students scored 2 or 3 (on a scale from 0 to 3), indicating that nearly half may be at high risk of problems related to such behaviour. High scores (2 or 3) were more common among girls than boys (54% vs. 41%).

Gaming

Gaming prevalence and duration

In the past 30 days, more students reported gaming on non-school days than on school days (82% vs. 69%). Time spent gaming also differed: 34% of students played for four or more hours on a non-school day compared with 13% on a school day (Figure 17). Boys were more likely than girls to game for four or more hours, both on non-school days (51% vs. 17%) and school days (19% vs. 7.3%).

Figure 17

Time spent gaming on a school day and on a non-school day in the past 30 days

In terms of the number of days spent gaming, on average, students reported gaming on four days in the past seven days, with boys gaming more frequently than girls (five vs. three days).

Self-perceived problems with gaming

Results from a self-reported, non-clinical scale (Holstein et al., 2014) indicate that 22% of students scored 2 or 3 (on a scale from 0 to 3), suggesting a high risk of gaming-related problems. Boys were more likely than girls to fall into this high-risk category (32% vs. 12%).

Gambling

Gambling prevalence and types

As outlined earlier, gambling prevalence was constructed using the results from eight questions on four activities in the past 12 months: slot machines, card or dice games, lotteries, and sports or animal betting, distinguishing between on-site and online formats. Overall prevalence was defined as gambling for money on at least one of these activities in either format during the past year. Separate rates were also calculated for on-site and online gambling. Figure 18 presents overall prevalence and the distribution by format and gambling type.

Overall gambling

Sixteen percent of students reported gambling for money on at least one activity in any format (on-site, online, or both) in the past 12 months, with boys more likely than girls to do so (18% vs. 14%). Lotteries were the most common activity overall (9.1%), followed by card or dice games (6.6%), sports or animal betting (5.5%), and slot machines (4.3%). Girls were more likely than boys to have played lotteries (9.8% vs. 8.4%), while boys were more likely to have engaged in sports betting (8.1% vs. 2.4%).

On-site gambling

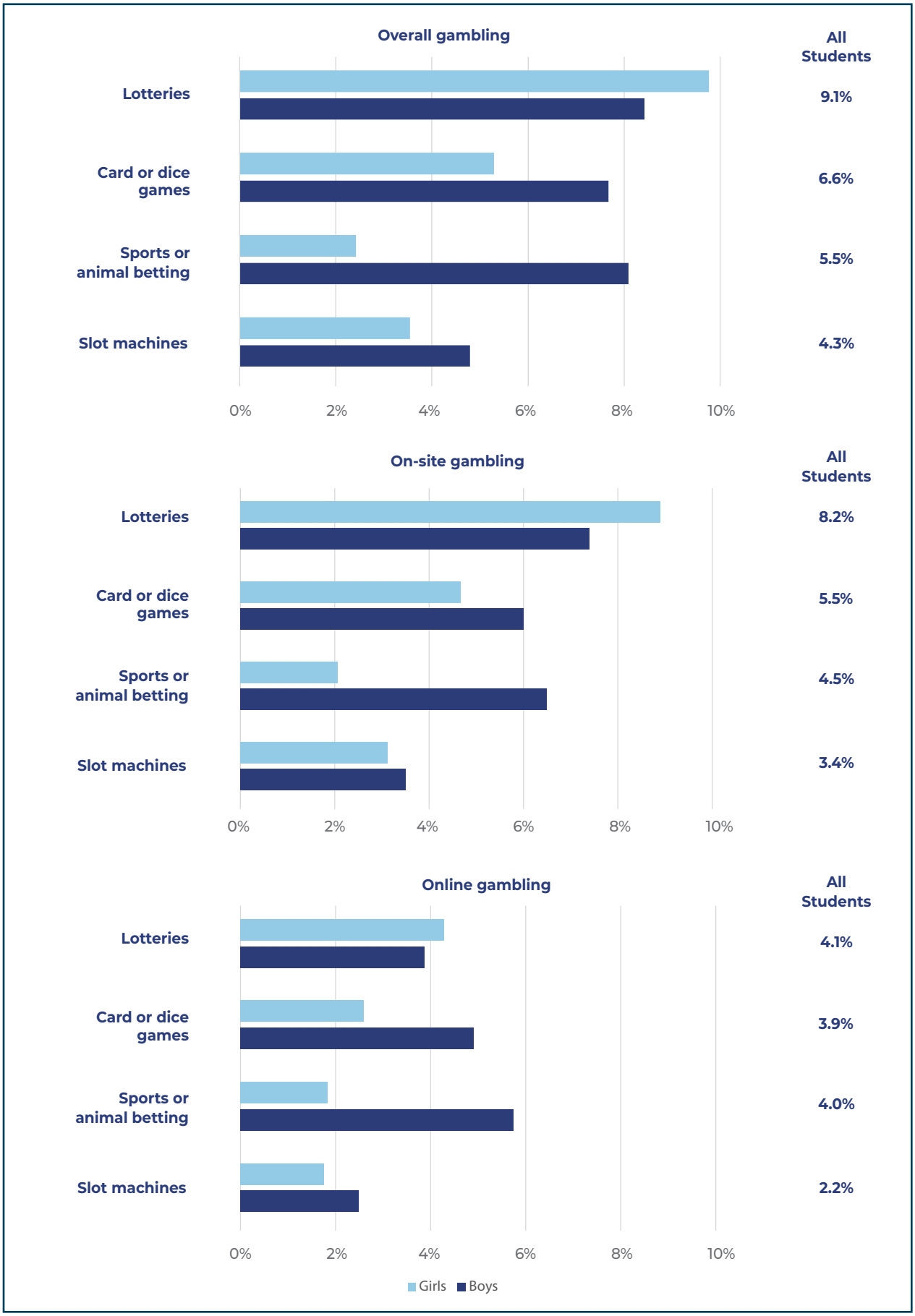
Fourteen percent of students reported on-site gambling, with higher rates among boys than girls (16% vs. 13%). The most common on-site activity was lotteries (8.2%), followed by card or dice games (5.5%), sports or animal betting (4.5%), and slot machines (3.4%). Boys were more likely than girls to bet on sports or animals on-site (6.5% vs. 2.1%).

Online gambling

Among all students, 9.1% reported gambling online, with boys more likely than girls to gamble in this format (11% vs. 6.7%). A similar percentage of students gambled online on lotteries (4.1%), sports or animal g (4.0%), and card or dice games (3.9%). Online gambling on slot machines was lower, at 2.2%. Boys were more likely than girls to report online sports or animal betting (5.7% vs. 1.8%) and card or dice games (4.9% vs. 2.6%).

Figure 18

Overall, on-site, and online gambling by game type in the past 12 months



Excessive and problem gambling

Results from an adapted Consumption Screen for Problem Gambling (Rockloff, 2012) indicate that 2.4% of students gamble excessively, with higher rates of excessive gambling among boys than girls (3.3% vs. 1.4%). Using the Lie/Bet screening tool (Johnson et al., 1997), 5.5% of students were estimated to have possible gambling problems, with no significant sex differences observed.

Summary

Overall, digital behaviours are highly prevalent among students, with near-universal use of social media and a substantial proportion reporting heavy or problematic engagement. Gaming was widespread, particularly among boys, with one in five of all students being at potential risk of problem use. Gambling for money was less common but still reported by one in six students, with small but noteworthy proportions showing signs of excessive or problem gambling.

Chapter 4

Trends in substance use and related perceptions 1995 – 2024

Introduction

This chapter presents trends in substance use and related perceptions among students in Malta, based on eight repeated cross-sectional ESPAD surveys conducted between 1995 and 2024. Until 2019, data were collected every four years; the most recent survey in 2024 was conducted after a five-year interval. Examining changes over time provides insight into the dynamics and aetiology of substance use and other risky behaviours, and helps to anticipate potential future developments.

To facilitate interpretation, differences of three percentage points or more between consecutive survey waves are highlighted in the selected figures. Within figures showing trends for all students, increases are shown in red, decreases in green, and stability or changes of less than three percentage points in orange. For sex-specific trends, solid lines denote substantive increases or decreases, while dotted lines indicate stability or changes below the three-percentage-point threshold. In this report, "stability" is therefore defined as an absolute change of less than three percentage points. This threshold is used as a substantive criterion and does not represent a statistical test. The approach follows previous national ESPAD conventions, which focus on substantive changes rather than statistical significance; by contrast, recent international ESPAD reports use statistical tests to identify change.

When interpreting long-term patterns, the comparability of data across surveys is an important consideration. Changes in survey instruments, timing of data collection, and participation rates may influence results. Certain variables or data points have been excluded where comparability could not be ensured. Information about questionnaire changes over time is available in the international ESPAD documentation[1)] and in national ESPAD documents[2)].

For reliable identification of trends, a greater number of data collection waves is generally recommended to assess patterns of change. Nonetheless, certain indicators with only two data points are included here because of their policy relevance, their value in understanding emerging behaviours, and their importance for the broader context.

The findings presented in this chapter are complemented by detailed statistical tables in Appendix III.

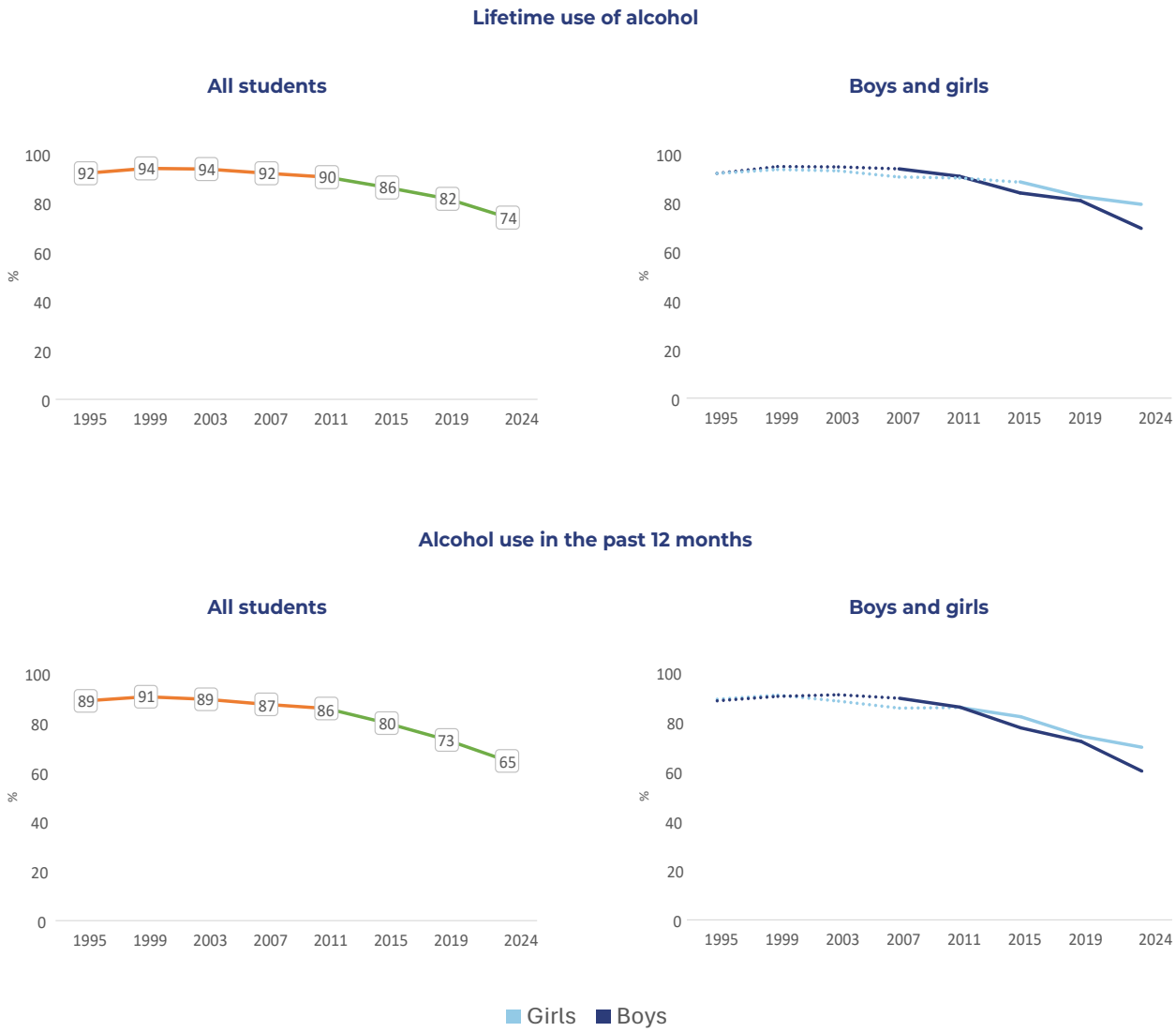
1) See https://www.espad.org/
2) See https://fsws.gov.mt/fsws/publications/espad–reports/

Trends in alcohol use

Following steady declines since 1999, all alcohol-related variables reported in Figure 19 reached their lowest recorded levels in 2024. Between 2019 and 2024, substantial reductions (defined as a decrease of three percentage points or more between consecutive survey waves) were observed among all students for nearly all alcohol indicators, with the exception of drunkenness at age 13 or younger (early drunkenness), which remained stable. Substantial decreases were evident for both sexes across most variables, although boys reported larger reductions than girls, slightly widening the sex gap and leaving girls with higher rates. The most pronounced change was observed in heavy episodic drinking (five or more drinks on one occasion) in the past 30 days: prevalence among girls fell from 41% to 34%, while among boys it dropped more sharply, from 40% to 25%.

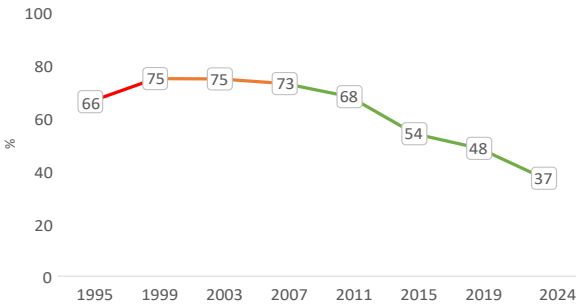
Figure 19

Alcohol use by year. Percentages.

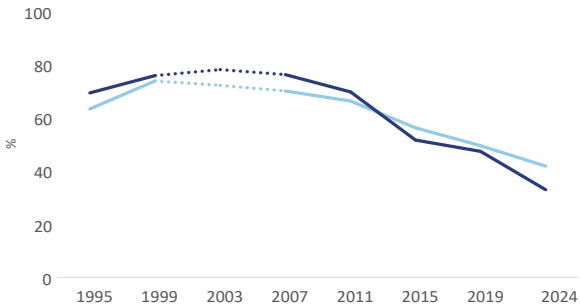


Alcohol use in the past 30 days

All students

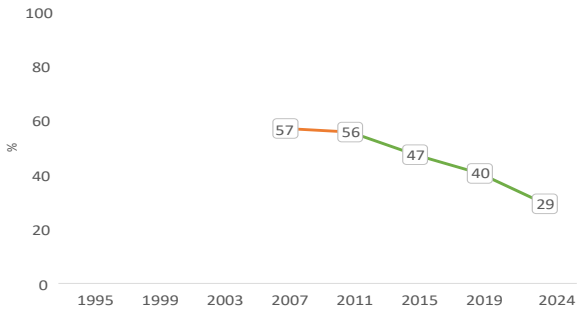


Boys and girls

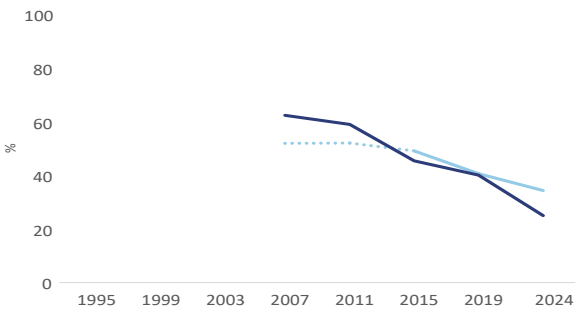


Heavy episodic drinking in the past 30 days

All students

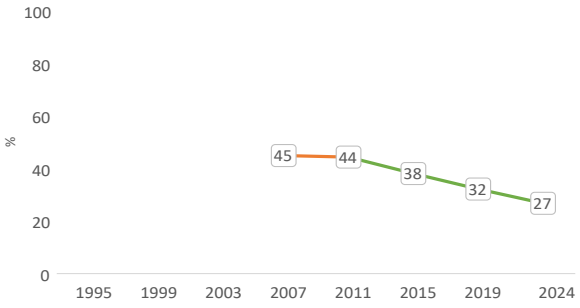


Boys and girls

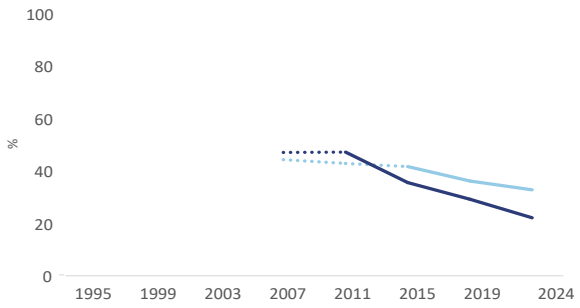


Lifetime drunkenness

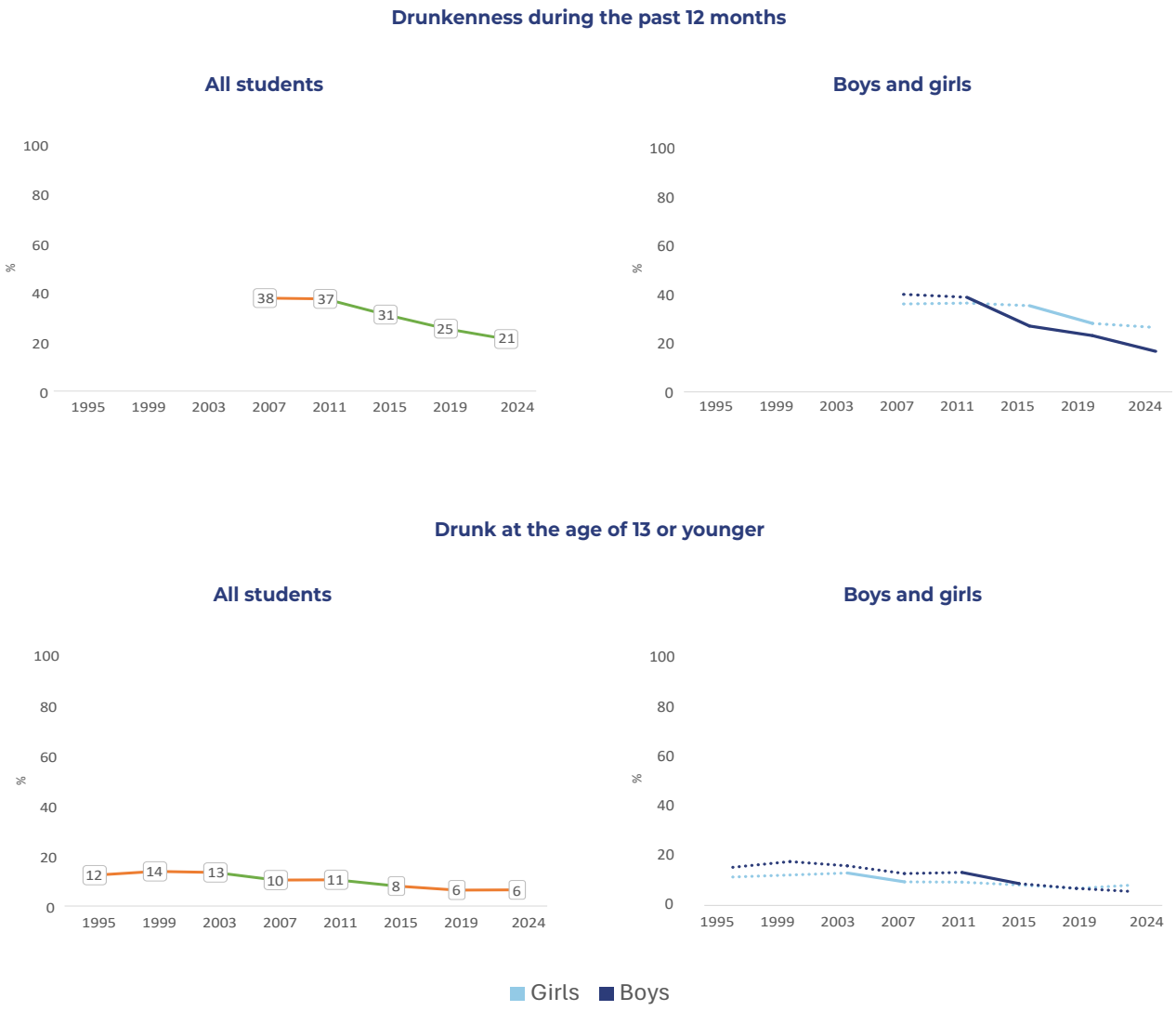
All students



Boys and girls



Girls Boys



Note: Data on heavy episodic drinking, lifetime drunkenness, and drunkenness during the past 12 months are reported from 2007 onwards, due to changes in the questions that rendered earlier data incomparable.

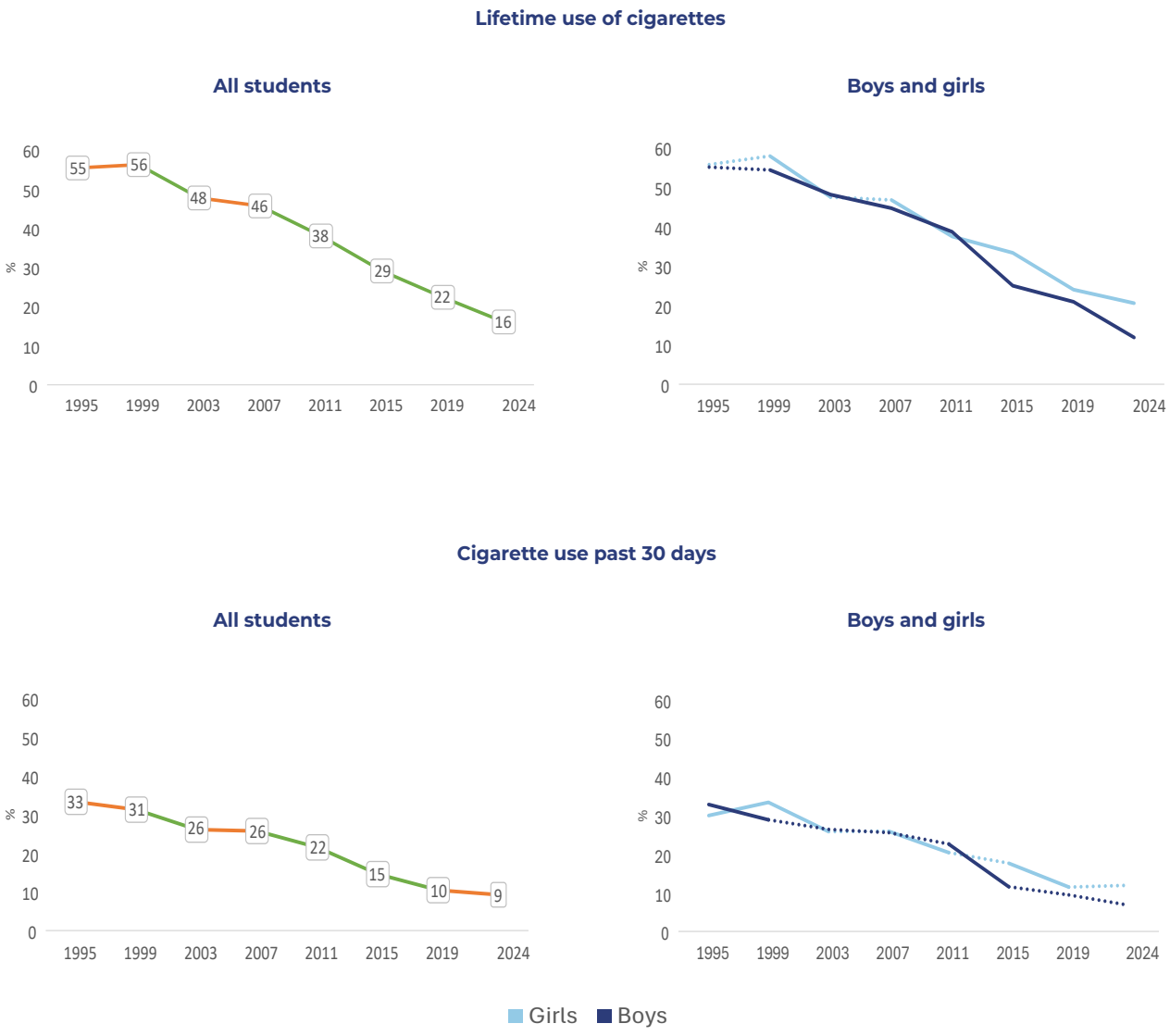
Trends in cigarette and e–cigarette use

All cigarette indicators (lifetime use, past 30-day use, daily cigarette smoking, and early initiation) have shown a long-term decline, reaching their lowest recorded levels in 2024 (Figure 20). However, the magnitude of these recent declines has been smaller than in previous years. Between 2019 and 2024, a substantial reduction was observed only for lifetime cigarette use, with prevalence declining from 22% to 16%. This decrease was largely driven by a decline among boys. For example, lifetime cigarette use among boys declined by 9 percentage points, whereas among girls it declined by 3 percentage points. Other cigarette measures among girls remained stable or increased slightly, indicating a stall in the downward trend.

In contrast to the downward trend in cigarette smoking, all e-cigarette indicators have increased among the total student sample since data collection on this behaviour began in 2019 (Figure 21). The upward trajectories have been driven by increases observed among girls, with general stability reported among boys. For instance, lifetime e-cigarette use increased by 11 percentage points among girls (from 21% to 32%), while rates among boys were relatively stable (21% in 2019 and 19% in 2024).

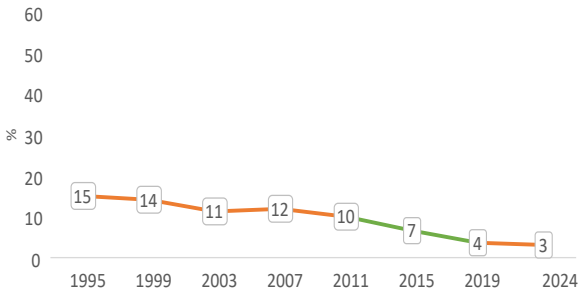
Figure 20

Cigarette use by year. Percentages.

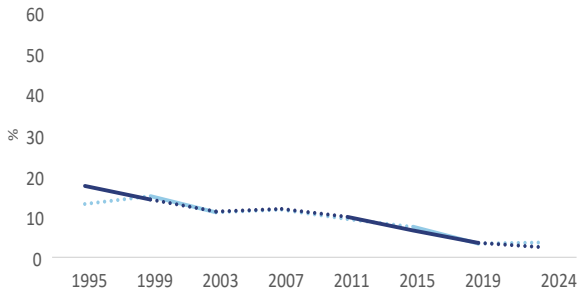


Daily cigarette use in last 30 days

All students

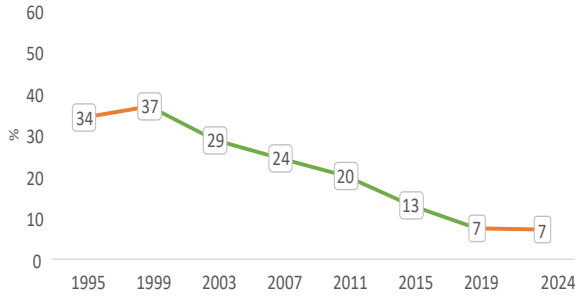


Boys and girls

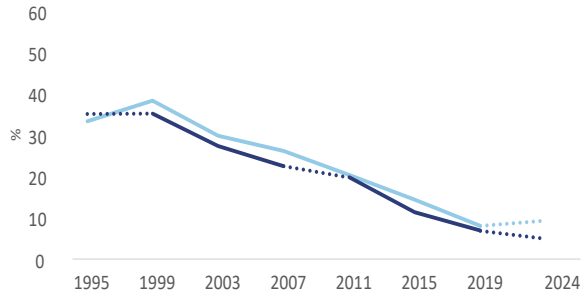


First cigarette at age 13 or younger

All students



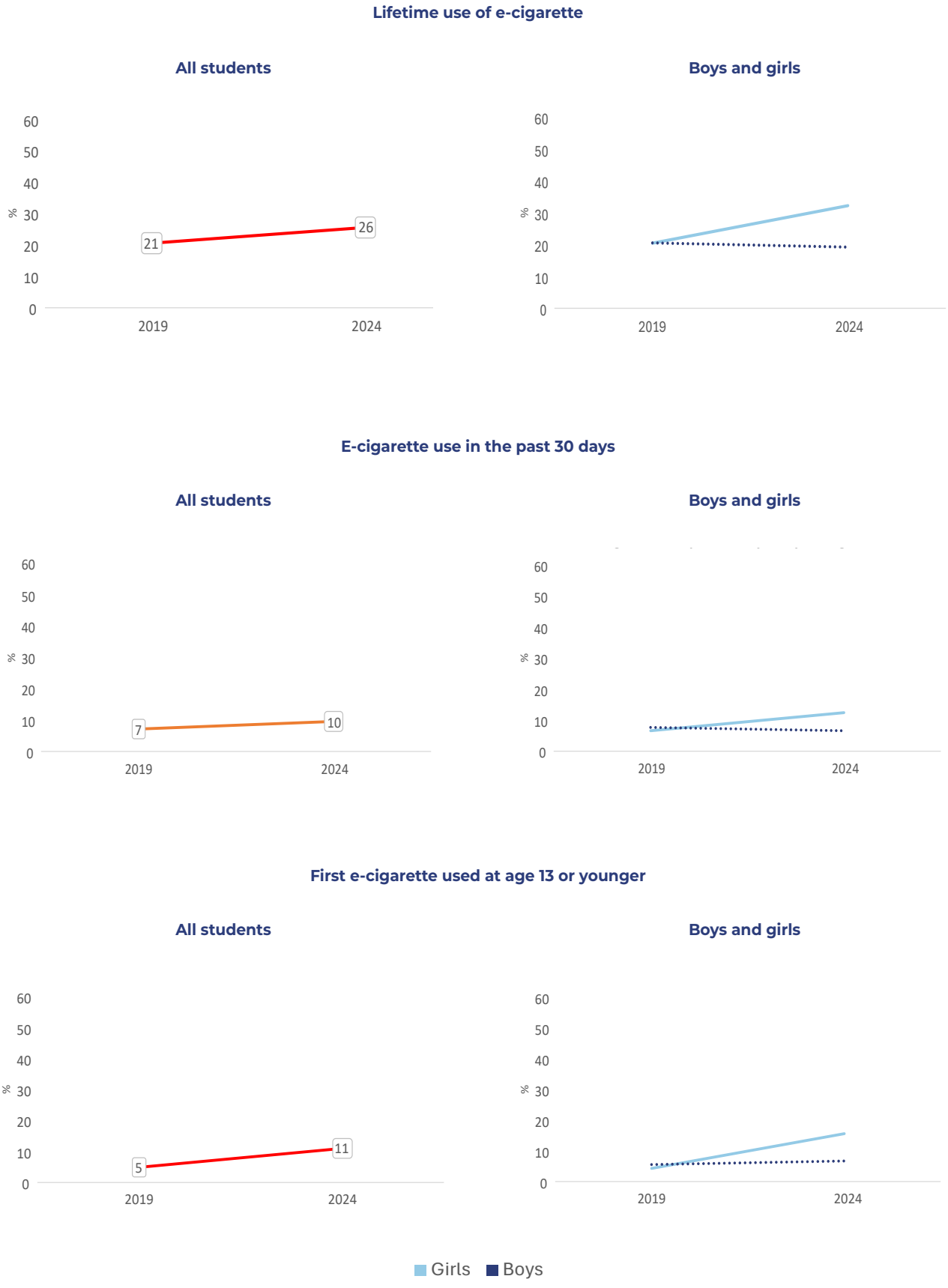
Boys and girls

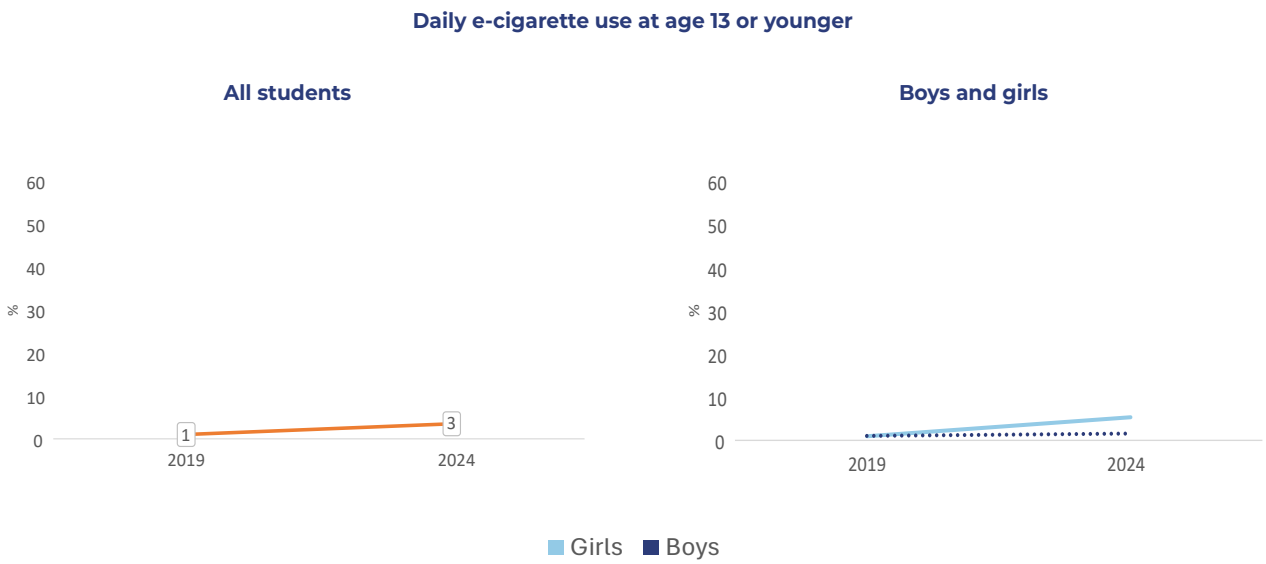


Girls Boys

Figure 21

E-cigarette use by year. Percentages.





Note: Data on e-cigarette use are reported from 2019 onwards, as this behaviour was first introduced into the ESPAD questionnaire in that year. Earlier data are not available for comparison.

Trends in illicit and other substance use

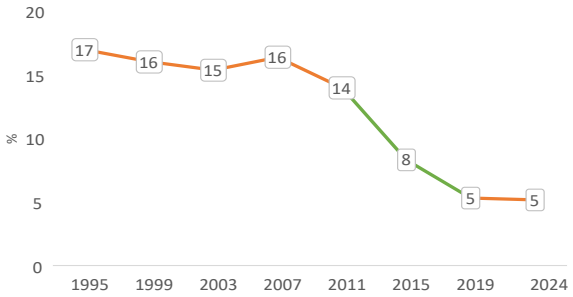
Between 1995 and 2024, indicators of illicit and other drug use among students in Malta have remained comparatively low, with the most pronounced declines observed in lifetime inhalant use (from 17% to 5.2%) and alcohol with pills (from 13% to 3.3%). Most indicators of drug use in Figure 22 showed no substantive change in prevalence among all students between 2019 and 2024, with sex-specific rates remaining largely stable. The clearest development was a widening sex gap in lifetime cannabis use: prevalence increased by 2.5 percentage points among girls while declining by the same margin among boys, creating a six-percentage-point difference in 2024 and marking the highest level for girls in the time series. The only substantive change observed between 2019 and 2024 was a three-percentage-point fall in lifetime use of any illicit drug among boys, largely reflecting their reduced cannabis use.

Figure 22

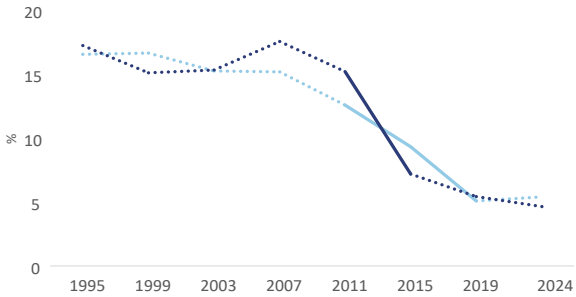
Illicit and other substance use by year. Percentages.

Lifetime use of inhalants

All students

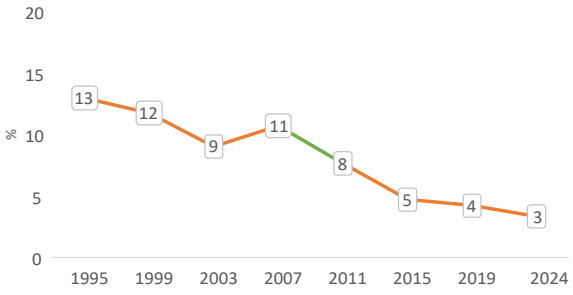


Boys and girls

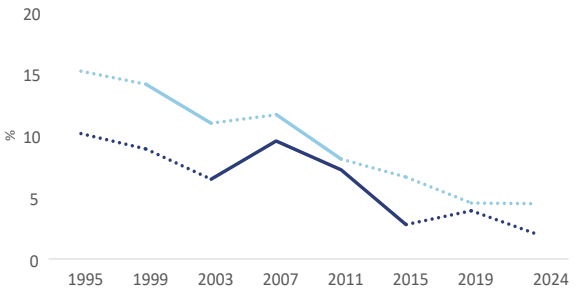


Lifetime use of alcohol together with pills

All students

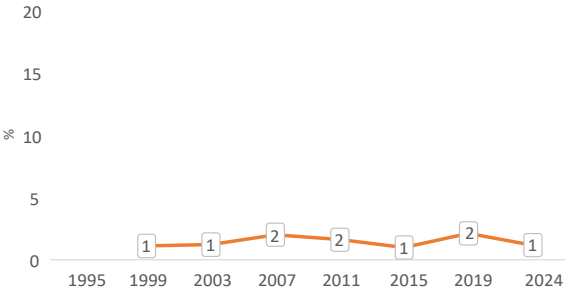


Boys and girls

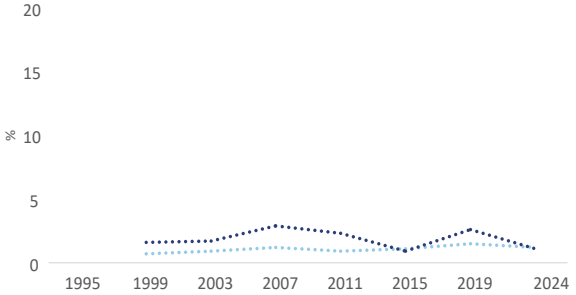


Lifetime use of anabolic steroids

All students



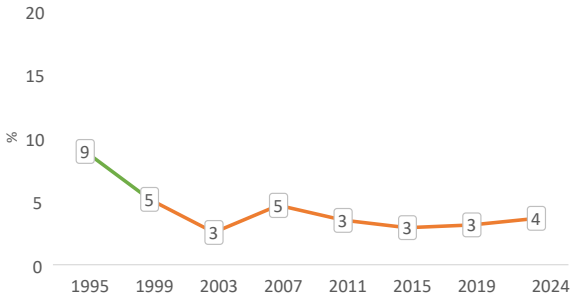
Boys and girls



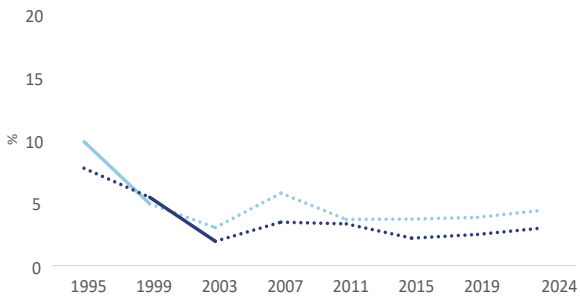
Girls Boys

Lifetime use of tranquillisers or sedatives without a doctor's prescription

All students

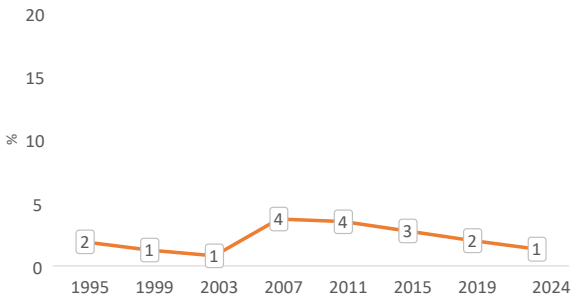


Boys and girls

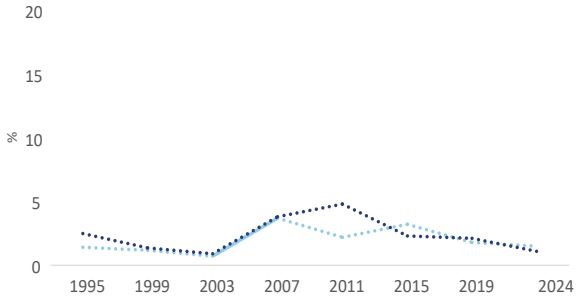


Lifetime use of cocaine

All students

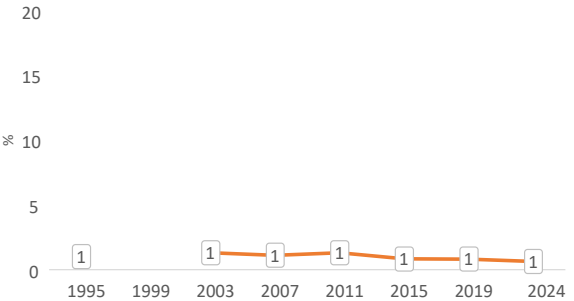


Boys and girls

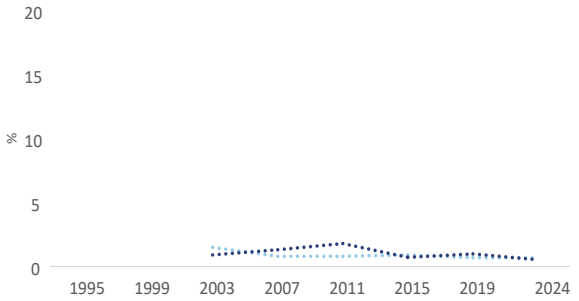


Lifetime use of heroin

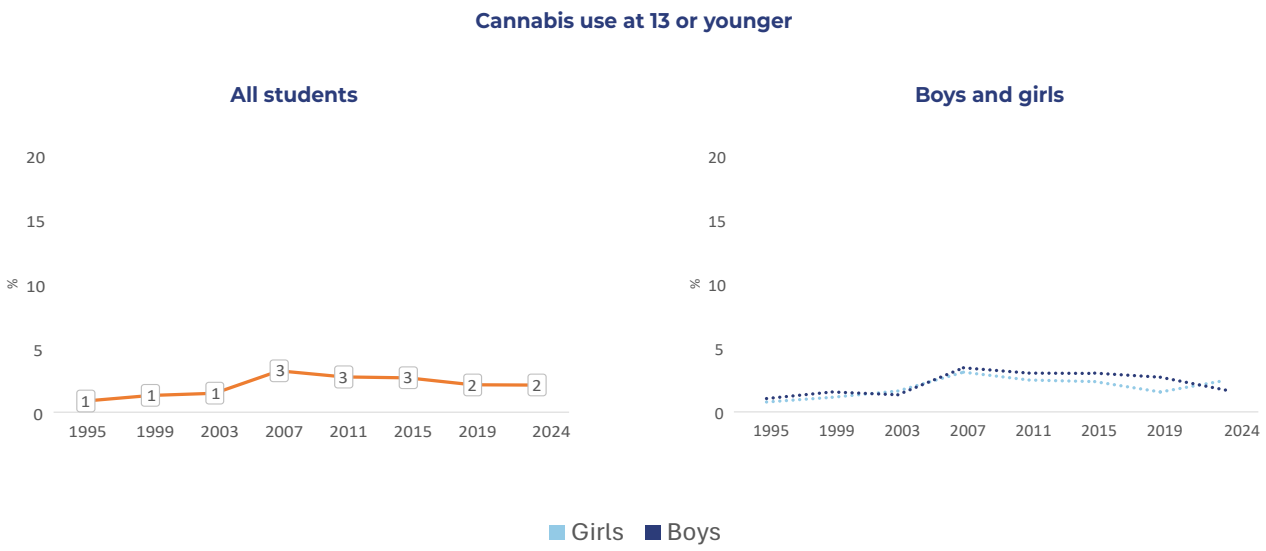
All students



Boys and girls



Girls Boys



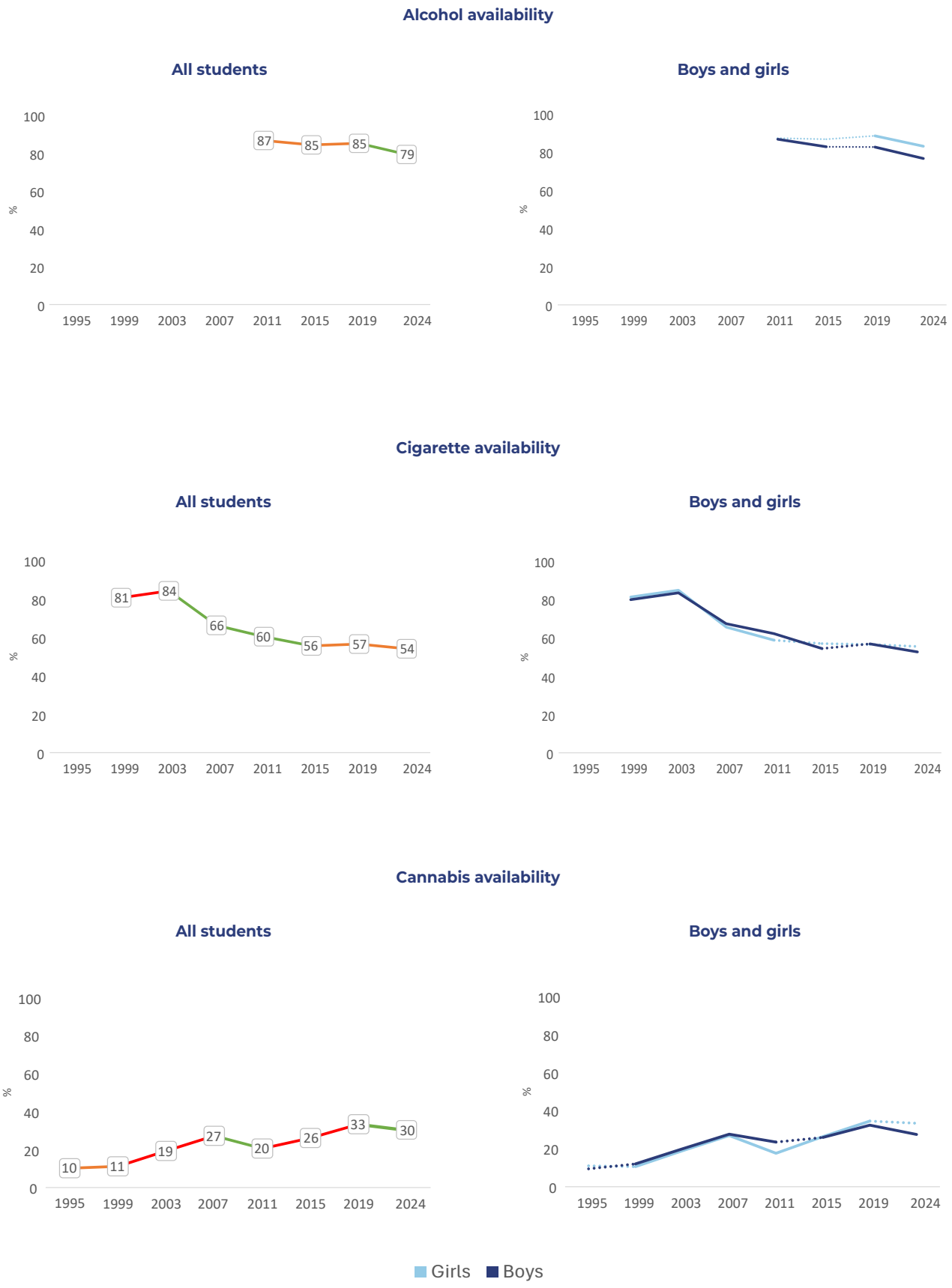
Trends in the perceived availability of substances

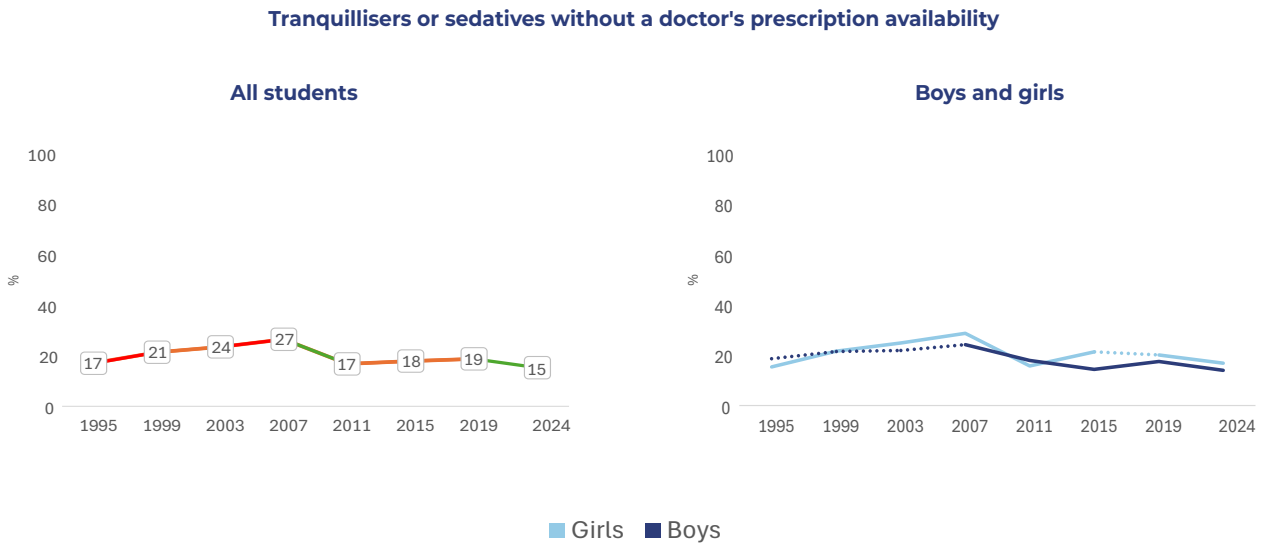
The percentage of all students perceiving alcohol and cigarettes as “fairly easy” or “very easy” (i.e., easy) to obtain has generally declined over the long term. In contrast, perceived cannabis availability rose from 10% in 1995 to a peak of 33% in 2019 before falling slightly to 30% in 2024.

During the most recent wave (2019–2024), the perceived availability of alcohol, cigarettes, and tranquillisers or sedatives without a doctor’s prescription also declined, reaching the lowest levels recorded for these substances. Declines were more pronounced among boys, while among girls the reductions were smaller and, in the case of cigarettes and cannabis, non-substantive. For example, perceived cigarette availability fell from 57% to 53% among boys, compared with a more modest decline from 57% to 55% among girls, resulting in a non-substantive reduction of 2.5 percentage points among all students.

Figure 23

Perceived availability of substances by year. Percentages responding "very easy" or "fairly easy" to obtain.





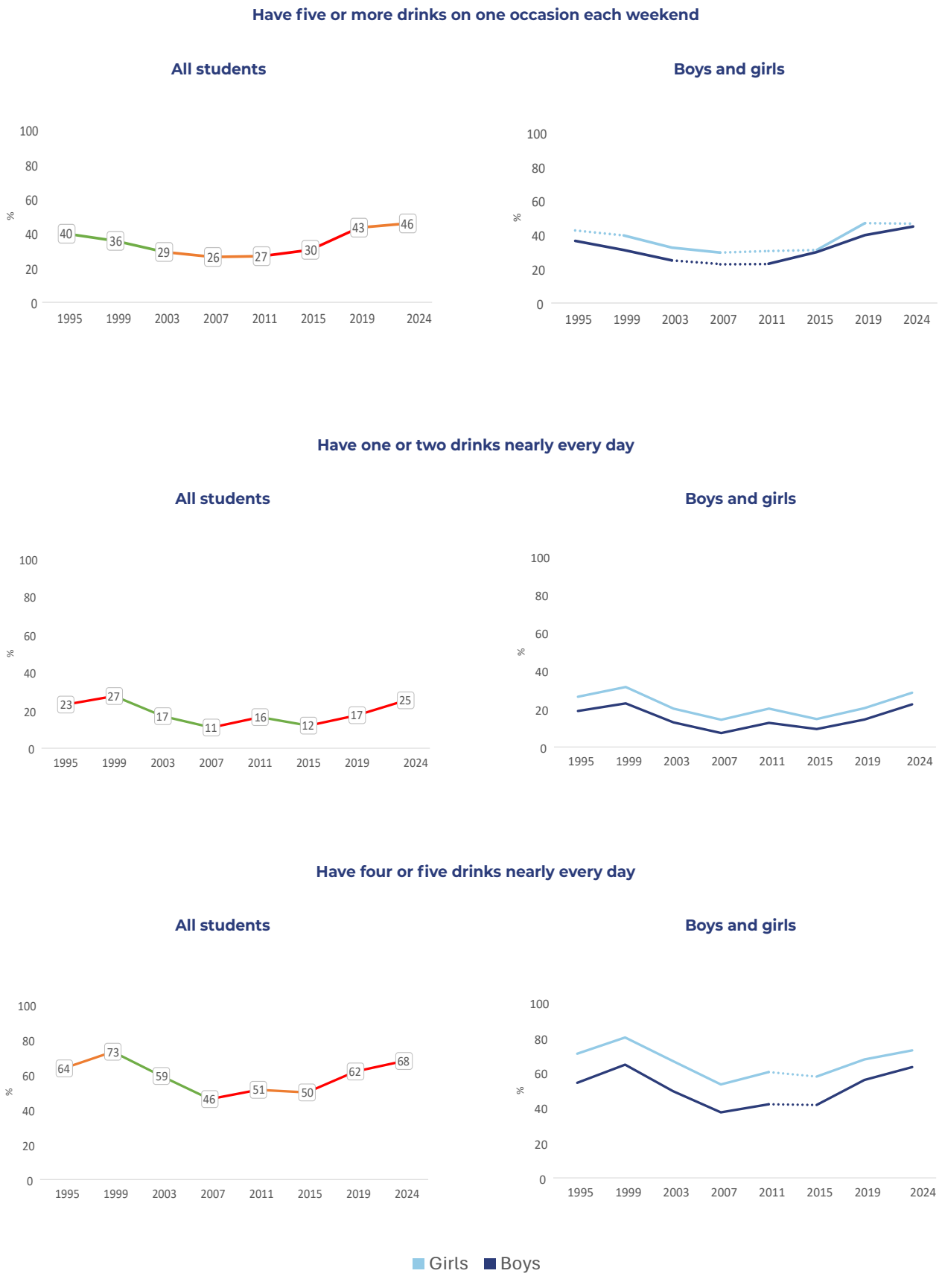
Trends in the perceived risk of substance use

The percentage of students perceiving a "great risk" in various substance use behaviours is shown in Figure 24. Between 1995 and 2024, perceptions of risk fluctuated across many behaviours. Occasional cigarette smoking showed the clearest upward shift (4% to 22%), while the perceived risk of experimental or occasional cannabis use declined (trying cannabis once or twice: 60% to 14%; smoking cannabis occasionally: 60% to 29%).

In the most recent wave (2019–2024), perceived risk increased for most behaviours. A clear exception was "trying cannabis once or twice", which declined by six percentage points among all students to a record low, with a steeper decline among girls. The perceived risk of smoking cannabis occasionally showed a small, non-substantive increase, with similar patterns for both sexes. By contrast, the perceived risk of heavy episodic drinking diverged by sex, rising among boys (from 40% to 45%), while remaining stable among girls (47%).

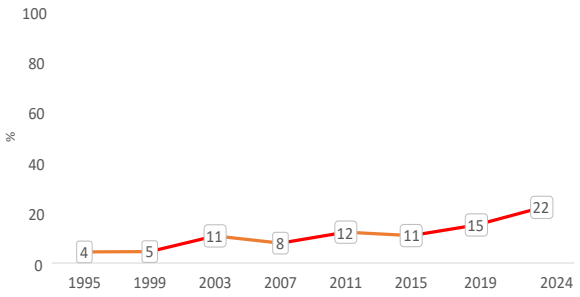
Figure 24

Perceived risk of substance use by year. Percentages responding “great risk”.

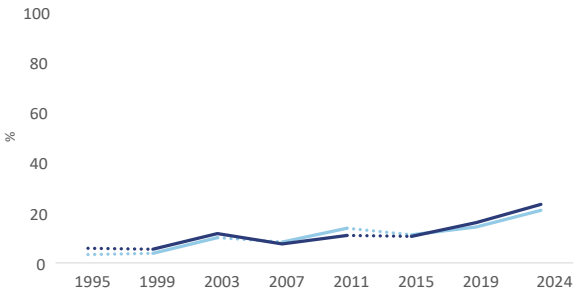


Smoke cigarettes occasionally

All students

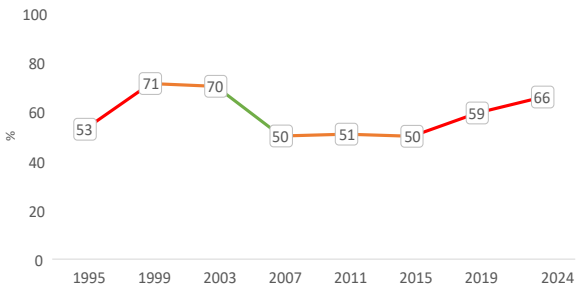


Boys and girls

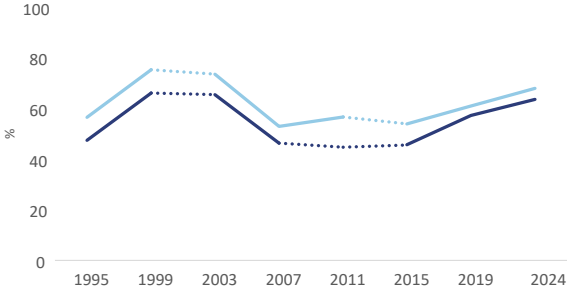


Smoke one or more packs a day

All students

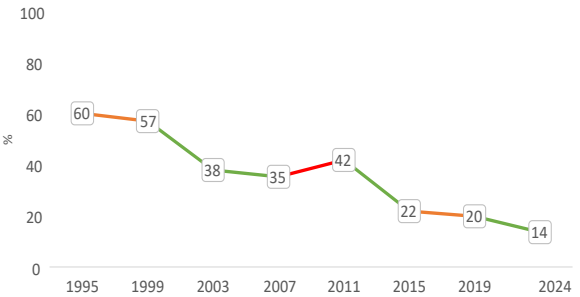


Boys and girls

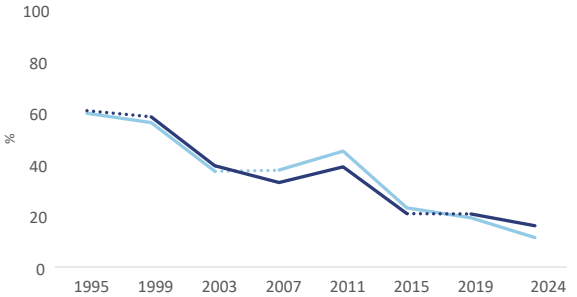


Try cannabis once or twice

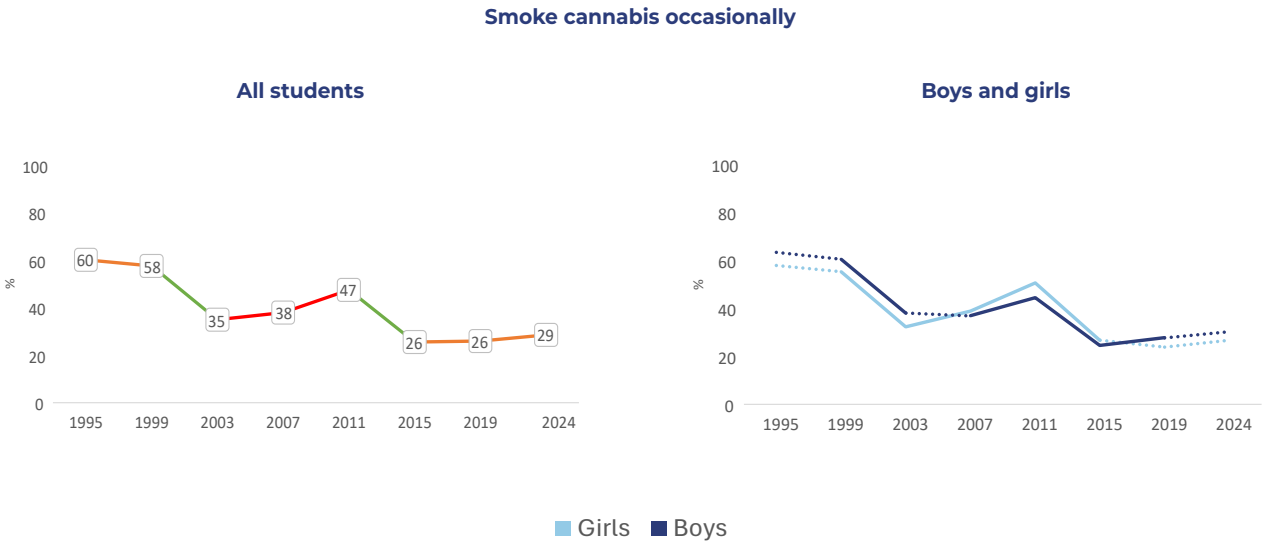
All students



Boys and girls



Girls Boys



Summary

Substance use among students in Malta has generally declined since 1995, with many alcohol and cigarette indicators reaching their lowest levels in 2024. However, e-cigarette use has risen since 2019, particularly among girls, partly offsetting declines in smoking. Illicit substance use remains relatively low, though lifetime cannabis use shows a widening sex gap, with the highest recorded levels among girls. Perceived availability has decreased for most substances, while risk perceptions have generally increased, except for trying cannabis once or twice, where risk continues to fall.

Chapter 5

Discussion and conclusion

Introduction

The 2024 ESPAD survey provides a comprehensive overview of substance use and other risk behaviours among 15–16-year-olds in Malta and Gozo. This wave is noteworthy as it captures data collected after the COVID-19 pandemic. The surveyed cohort was aged 11–12 when public health measures were first implemented, a period that affected daily life and social development (Dumas et al., 2020). This discussion interprets the ESPAD findings in relation to other research, highlighting encouraging trends and emerging areas of concern. Overall, traditional risk behaviours such as cigarette smoking and alcohol use have declined, whereas e-cigarette use and digital activities, including social media engagement and gaming, have increased, indicating a shift in adolescent lifestyles. Differences between boys and girls, which provide further insight into changing behavioural patterns, are also explored later in this chapter.

Alcohol

Although alcohol use among adolescents in Malta has continued to decline between 2019 and 2024, it remains widespread. In 2024, 74% of students reported lifetime alcohol use, 65% had consumed alcohol in the past 12 months, and 37% in the past 30 days, reflecting a persistent downward trend over time.

These patterns reflect broader trends observed across Europe and other high-income countries since the early 2000s (Charrier et al., 2024; ESPAD, 2025), with pandemic-related restrictions further influencing these declines (Miech et al., 2025). Several factors may underlie this shift. Cultural attitudes towards alcohol are evolving, with non-drinking becoming increasingly normalised among young people (Caluzzi et al., 2022). Rising health awareness (World Health Organization [WHO], 2024) and changes in parental practices (Vashishtha et al., 2019) may also help explain the decline in alcohol consumption.

Changes in leisure activities, such as increased engagement in social media use and gaming, have been proposed to play a role. Research indicates that these declines are linked more to a decrease in unsupervised, face-to-face gatherings where alcohol use traditionally occurred rather than to increases in screen-based activities themselves (De Looze et al., 2018; Vashishtha et al., 2022). Pandemic restrictions would have further reinforced this trend by limiting opportunities for young people to meet in person.

Demographic change may also be a contributing factor, with the percentage of non-Maltese 15–16-year-olds increasing by about three percentage points between 2019 and 2024 (National Statistics Office, 2025). This may influence overall drinking norms, as students from different cultural, legal, and religious backgrounds may be less likely to consume alcohol.

Turning to risky patterns of drinking, heavy episodic drinking in the past 30 days, defined in this study as consuming five or more drinks in a row on one occasion, declined from 40% in 2019 to 29% in 2024. Despite this decrease, it remains a cause for concern due to its well-documented effects on brain development, cognitive functioning, and school performance (National Institute on Alcohol Abuse and Alcoholism, 2024), as well as its associations with mental health problems, violence, and injury (WHO, 2010).

Early alcohol consumption remains widespread: one-third of students (34%) reported having their first alcoholic drink at age 13 or younger, and 6.4% had already been drunk by that age. Early onset is associated with heavier drinking, polysubstance use, memory impairment, delinquency, and risky sexual behaviour (Tackaberry-Giddens et al., 2023).

Perceived availability of alcohol remains high. In 2024, 79% of students reported that alcohol was "very easy" or "fairly easy" to obtain, exceeding the ESPAD country average of 75% (ESPAD, 2025). In Malta, alcohol can be legally purchased at age 17, which is lower than in many European countries, where the minimum age is typically 18 years (International Alliance for Responsible Drinking, 2022). Despite legislation stating that alcohol cannot be sold, served, or supplied to individuals under 17 years of age in retail outlets or places of entertainment (Code of Police Laws, Cap. 10), 20% of students reported purchasing alcohol from off-premises outlets (e.g., shops), and 29% reported drinking on-premises (e.g., in bars or discos) in the past month. These findings highlight gaps in the compliance and enforcement of existing regulations.

Parents also play a significant role, with 16% of students reporting that their parents give or buy them alcohol. Parental tolerance towards alcohol may contribute to the normalisation of early use (Gázquez Linares et al., 2023). Drinking at home was the most common setting for the last drinking occasion (23%), although this may not always occur with parental knowledge or consent.

Overall, alcohol-related indicators have declined, yet underage drinking remains a cause for concern. Underscoring these risks, Malta's alcohol policy documents include specific measures aimed at reducing youth alcohol consumption (Ministry for the Family, Children's Rights and Social Solidarity, 2018; Ministry for Social Policy and Children's Rights, 2025).

Energy drinks

Energy drinks emerged in the 2024 ESPAD survey as the most widely consumed product among adolescents in Malta, with 82% reporting lifetime use. These beverages typically contain high levels of caffeine, sugar, and additional stimulants such as taurine, guarana, and herbal extracts (Kumar & Mandumpala, 2022). Their popularity among young people has been strongly linked to marketing strategies targeting adolescents, including intensive promotion on social media platforms (Aonso-Diego et al., 2023; Ayalde et al., 2023). In addition to aggressive marketing, the wide availability and relatively low cost of energy drinks have further contributed to their popularity among this age group (Rostami et al., 2024).

Evidence, primarily from survey-based studies, highlights a range of health and behavioural concerns associated with energy drink consumption. Excessive intake has been linked to cardiovascular and oral health problems, as well as to sleep disruption, fatigue, irritability, aggression, heightened anxiety, stress, depression, and reduced well-being (Kozhabek, 2022; see also Mahmood et al., 2024; Marinoni et al., 2022; Nimri et al., 2024). Consumption is also associated with substance use and other risk-taking behaviours, including alcohol and drug use (Brunborg et al., 2022; Cadoni & Peana, 2023; Silva-Maldonado et al., 2022). In response to these concerns, several countries have introduced restrictions on the sale and marketing of energy drinks to minors (Rostami et al., 2024).

Although further longitudinal research is needed to clarify the direction and strength of the relationships between energy drink use, health outcomes, and risk behaviours (Khouja et al., 2022), concerns remain. A 2025 UK study among teachers identified excessive energy drink consumption as the leading health-related concern among students (NASUWT, The Teachers Union, 2025).

Cigarettes and e-cigarettes

The 2024 ESPAD survey shows a continued decline in traditional cigarette smoking among 15–16-year-olds, alongside a steady rise in e-cigarette use, indicating a shift in how adolescents consume nicotine. Lifetime cigarette smoking has fallen to its lowest recorded level (16%), with past-30-day use at 9.3% and daily smoking at 3.1%. In contrast, e-cigarette use has increased since monitoring began in 2019: lifetime use rose from 21% to 26%, and past-30-day use (9.6%) is now comparable to that of cigarettes. The Health Behaviour in School-aged Children (HBSC) study similarly reports that e-cigarette use exceeds cigarette smoking among adolescents across Europe, Central Asia, and Canada (Charrier et al., 2024).

By age 13, 11% of students in Malta had used e-cigarettes and 7.1% had smoked cigarettes, while 3.9% were daily e-cigarette users and 1.6% were daily cigarette

smokers. Notably, 17% of students began using e-cigarettes before ever smoking cigarettes, and quitting smoking was rarely cited as the reason for first trying e-cigarettes (0.8%). Curiosity was the most commonly reported motive (18%), suggesting that among adolescents in Malta, e-cigarettes are generally not initiated with the aim of reducing the harm caused by cigarette smoking, a purpose for which they were originally promoted. Research also indicates that adolescents who use e-cigarettes are more likely to progress to smoking, although the causal nature of this relationship remains under debate (Begh et al., 2025).

In Malta, e-cigarettes are regulated under the same legislation as tobacco (Tobacco [Smoking Control] Act, Cap. 315), in accordance with the EU Tobacco Products Directive. Sales are prohibited to individuals under 18 years of age. Despite this, accessibility remains high: over half of all students reported that both cigarettes (54%) and e-cigarettes (58%) were easy to obtain, with e-cigarettes now seen as more accessible than cigarettes. Flavourings in e-cigarettes remain unrestricted by law, which may further increase their appeal to young users (Global State of Tobacco Harm Reduction, 2025).

Perceptions of risk are also lower for e-cigarettes than for traditional cigarettes. Two-thirds of students (66%) viewed daily smoking as a "great risk ", compared with 45% for daily e-cigarette use, and only 7% considered trying e-cigarettes once or twice as risky. Such perceptions may encourage experimentation.

Overall, the rise in e-cigarette use represents a public health concern. Malta faces the challenge of sustaining progress in reducing cigarette smoking while preventing e-cigarette initiation to avoid a new generation of nicotine-dependent young people.

Cannabis and other substances

In 2024, 11% of students in Malta reported ever using cannabis, 9.0% reported use in the past 12 months, and 4.6% reported use in the past 30 days. These figures are comparable to the ESPAD country averages and consistent with the 2022 HBSC findings for 15-year-olds in Malta (ESPAD, 2025; Charrier et al., 2024). Cannabis use has remained stable since 2019 but continues to be a concern, as adolescent use has been associated with adverse effects on cognitive development (Camchong et al., 2017), including slowed or impaired thinking, difficulty concentrating (Sultan et al., 2023), and an increased risk of developing mental health disorders (Muñoz-Galán et al., 2023).

Since the previous ESPAD study, Malta has introduced new cannabis legislation. The Authority on the Responsible Use of Cannabis Act (2021) established a regulatory framework allowing adults aged 18 and over to possess up to 7 grams of cannabis and

cultivate up to four plants per household for personal use. The law also introduced additional measures to manage and control cannabis consumption. However, the impact of these changes on this student cohort cannot be determined from the current data, as trends are influenced by multiple factors beyond legal status (EMCDDA, 2023).

Although cannabis remains illegal for minors, increased public debate and visibility may be shaping young people's perceptions of risk. In Malta, the percentage of students who viewed trying cannabis once or twice as a "great risk" declined between 2019 and 2024, while the share perceiving regular use as risky increased. Between 2015 and 2019, there had been a general rise in perceived risk across various forms of substance use. Research indicates that changes in risk perception are a key driver of long-term trends in adolescent substance use (Miech et al., 2025). As perceived risk declines, the likelihood of initiation may increase among those who have not yet tried cannabis.

Use of other illicit drugs among adolescents remains low and stable. Lifetime use of any illicit drug (including cannabis, amphetamines, cocaine, crack, ecstasy, LSD/hallucinogens, heroin, GHB, and methamphetamine) was 12%, close to the ESPAD country average of 13% (ESPAD, 2025). When cannabis is excluded, lifetime use of other illicit drugs drops to 3.3%, showing that cannabis accounts for the vast majority of illicit drug use among adolescents in Malta.

It is also important to note that although individual substances have been analysed separately, polysubstance use (the use of more than one substance either simultaneously or sequentially) remains a key consideration. Increases in this pattern of use can amplify the harms associated with substance use compared to single-substance use (EMCDDA, 2021).

Social media use

Social media use among adolescents in Malta is nearly universal. In 2024, 93% of students reported using social media on a school day in the past 7 days, rising to 97% on a non-school day. The duration of use is also considerable: 73% of students reported spending four or more hours on a non-school day and 42% on a school day in the past 7 days. These findings confirm that social media remains an integral part of young people's daily lives.

Social media offers both benefits and risks. On the positive side, it provides opportunities to connect with others (Incardona et al., 2023), express creativity (Montag et al., 2021), and explore identity, particularly among minority groups (López-Sáez et al., 2024). However, the risks are well-documented and include exposure to cyberbullying (The Malta Foundation for the Wellbeing of Society, 2025), harmful or inappropriate content (Lahti et al., 2024), associations with anxiety and depression

(Winstone et al., 2022), poor sleep quality (Kullolli & Trebicka, 2023), and irritability (Perlis, 2025).

Problematic social media use is a growing concern. ESPAD findings from Malta show that nearly half of students (47%) scored in the high-risk range on a non-clinical screening tool, mirroring the ESPAD country average of 47% (ESPAD, 2025). In a previous study using the Social Media Disorder Scale, 18% of 15-year-old students in Malta were classified as problematic social media users (Boniel-Nissim et al., 2024).

Gaming

Gaming remains a prominent feature in adolescents' lives. In 2024, 69% of students in Malta reported gaming on school days in the past 30 days and 82% on non-school days, slightly above the ESPAD country average for non-school day gaming (77%) (ESPAD, 2025). Gaming duration is also notable: 34% played for four or more hours on a non-school day compared with 13% on a school day in the past 30 days. On average, students reported gaming on four days during the week preceding the study.

Gaming can provide cognitive, social, and emotional benefits, including enhanced problem-solving skills, collaboration, creativity, and stress relief (Alwhaibi et al., 2024; see also Gottfried & Sidoti, 2024). However, there are also negative impacts. Research has linked problematic gaming to depression and anxiety (Männikkö et al., 2017). ESPAD results based on a non-clinical screening scale indicate that 22% of students in Malta are at high risk of gaming-related problems. Using a different measurement tool, Boniel-Nissim et al. (2024) found that 19% of adolescents in Malta were at risk of problematic gaming.

Gambling

Gambling among adolescents is an increasing public health concern, with early initiation linked to a heightened risk of problem gambling and other psychosocial harms (Pérez, 2024). In the 2024 study, 16% of students in Malta reported gambling for money in the past 12 months, which is below the ESPAD country average (ESPAD, 2025).

Traditional on-site gambling continues to dominate, with 14% of students gambling in person during the past year compared with 9.1% gambling online. Lotteries were the most common activity (9.1%), followed by card or dice games (6.6%), sports or animal betting (5.5%), and slot machines (4.3%). In Malta, lotteries are widely promoted and may appear normalised to young people. Evidence suggests that exposure to seemingly low-risk gambling products, such as lotteries, can foster permissive attitudes and increase the likelihood of developing problem gambling (Zhai et al., 2021).

Based on the Consumption Screen for Problem Gambling (CSPG), 2.4% of students showed excessive gambling in the past 12 months, while the Lie/Bet screening tool identified 5.5% as having possible gambling problems. Although these figures are relatively small, they point to a vulnerable group at risk of addiction and related harms. The pervasiveness of gambling marketing (Rossi et al., 2024), combined with the expansion of digital gambling opportunities and the blurring of boundaries between gaming and gambling through features such as loot boxes (Wardle, 2021), underscores the need for continued monitoring of gambling behaviours among young people.

Differences between boys and girls in risk behaviours

The 2024 ESPAD results highlight important differences between boys and girls in the extent of risk behaviours in Malta. Historically, boys were more likely to engage in substance use, but this pattern is now changing, with girls surpassing boys in several behaviours.

One of the clearest examples is alcohol use. Although drinking has declined among both boys and girls, the decrease has been steeper among boys. Girls now report higher prevalence across most alcohol indicators, including lifetime, past-year, and past-month use, as well as heavy episodic drinking and intoxication. This mirrors broader European trends, where gender gaps in alcohol consumption have narrowed or even reversed, particularly in higher-income countries (ESPAD, 2025; Charrier et al., 2024; Institute of Alcohol Studies, 2020).

Similarly, girls in Malta reported higher lifetime cigarette use, with steeper declines observed among boys than girls between 2019 and 2024. E-cigarette use was also more prevalent among girls, a trend noted by Charrier et al. (2024). In the present study, the percentage of boys reporting e-cigarette use remained stable, whereas rates among girls increased.

Cannabis use also reveals a shift. Typically, boys report higher prevalence; yet for the first time in Malta, girls exceed boys in lifetime use. This places Malta among the few ESPAD countries with such a pattern, and one of those showing the widest gaps in favour of girls (ESPAD, 2025). Girls also perceive cannabis as less risky, which may contribute to higher initiation rates. Since cannabis accounts for most illicit drug use, this reversal means that girls now lead in lifetime use of any illicit drug overall.

Digital behaviours show a different pattern. Girls are more likely to use social media than boys, with more than half scoring high on the problem use scale. This aligns with other research indicating that girls are particularly vulnerable to social media–related harms (Boniel-Nissim et al., 2024). In contrast, gaming is more common among boys.

Overall, there have been notable and shifting sex-related patterns in adolescent behaviour. For instance, the overall declines in alcohol and cigarette use are driven by steeper reductions among boys, resulting in comparatively higher prevalence rates among girls. These and other changes may reflect broader social and cultural shifts. In addition to general factors driving declines in adolescent substance use, there may be other influences that specifically increase girls' risk of engaging in certain behaviours relative to boys, and vice versa. Traditional gender norms that once discouraged female drinking and drug use appear to have weakened (Hemsing & Greaves, 2020), while risk-taking and drinking are no longer as strongly associated with masculine identity as in the past (Patró-Hernández et al., 2020). Policy measures such as stricter age-limit enforcement may have had a greater impact on boys, whereas the marketing of new products, particularly e-cigarettes with flavourings, which tend to be used more by females (Chen, 2019), may appeal more to girls.

Digital culture also plays a role by shaping leisure time, normalising substance use, and enabling highly targeted marketing towards young females. At the same time, well-being challenges, which are more prevalent among girls, may lead them to use substances as a coping mechanism (Sjödin et al., 2021).

Taken together, these findings highlight the need in Malta to move beyond the traditional assumption that boys are the higher-risk group and to adopt more gender-responsive prevention and policy approaches (EMCDDA, 2023).

Concluding remarks

The ESPAD findings continue to offer valuable insights into adolescent risk behaviours in Malta. Overall, alcohol and cigarette use among 15–16-year-olds has continued to decline. However, these positive trends are accompanied by emerging concerns, including the rising use of e-cigarettes, the widespread consumption of energy drinks, and the extensive use of social media and gaming.

Notable developments have also been observed in the differences between boys and girls, with girls now surpassing boys in several behaviours, particularly alcohol, e-cigarette, and cannabis use. Girls are also more likely to engage in social media use, while boys remain more involved in gaming and gambling.

These shifts highlight the importance of continued monitoring of both established and emerging behaviours. Future ESPAD surveys will be crucial for tracking these trends and providing a strong evidence base for tailored, gender-responsive policies and interventions aimed at reducing potential harms and supporting the well-being of young people in Malta.

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Appendix I
Questionnaire

Foundation for Social Welfare Services

ESPAD

The European School Survey Project on
Alcohol and Other Drugs
www.espad.org

Questionnaire on substance use 2024

Read this first please!

This questionnaire is part of an international study on substance use among European students. It will be answered by more than 100,000 students in over 35 countries. The study is called ESPAD.

This is a totally anonymous questionnaire. You should not state your name or any other information which identifies you. You should place your completed questionnaire in the envelope provided and seal it yourself. Your teacher / survey leader will collect the envelopes after completion. The completed questionnaire will not be seen by anyone from the school, and only the researchers will see it.

All year 11 students or equivalent in Malta and Gozo have been selected to take part in this study. In Malta and Gozo, the survey is carried out by Sedqa, the Agency against Drug and Alcohol Abuse within the Foundation for Social Welfare Services (FSWS), in collaboration with the Department for Educational Services, the Student Services Department, National School Support Services, Secretariat for Catholic Education, and the Independent Schools Sector.

It is voluntary to take part. If there is any question you find objectionable, i.e. you would not like to answer, for any reason, just leave it blank.

It is important that you answer as thoughtfully and truthfully as possible. The results will not be presented by single classes or schools and remember your answers are totally anonymous.

If you do not find an answer that fits exactly, indicate the one that comes closest. Please mark the appropriate answer to each question by making an "X" in the box (☒). If, and only if, you make a mistake please fill in completely the box you marked by mistake (■) and mark the correct box with an “X”.

Please write where requested in CAPITAL LETTERS.

The term ‘occasion’ is used throughout this questionnaire. An example of an occasion would be an evening out or an afternoon spent with friends. So, if you go to a bar, have two drinks, then go to another bar and have some more drinks, this is still one occasion.

If you have a question, please raise your hand and your teacher / survey leader will assist you.

Thank you in advance for your participation! Please begin.

Foundation for Social Welfare Services
Email: research.fsws-headoffice@gov.mt
Telephone: +356 2258 8900

The first questions ask for some background information about yourself and the kind of things you might do.

1 What is your sex?

1 ☐ Male
2 ☐ Female
3 ☐ Other
4 ☐ Rather not answer

2 When were you born?

	2006	2007	2008	2009	2010	Other
Year	☐	☐	☐	☐	☐	☐
	1	2	3	4	5	6

3 How often do you do any of the following activities?

	Mark one box for each line.	Never	A few times a year	Once or twice a month	At least once a week	Almost every day
a)	Play computer games	☐	☐	☐	☐	☐
b)	Actively take part in sports or athletics or do exercise	☐	☐	☐	☐	☐
c)	Read books for enjoyment (do not count schoolbooks)	☐	☐	☐	☐	☐
d)	Go out in the evening (to a disco, a bar, a party etc.)	☐	☐	☐	☐	☐
e)	Other hobbies (play an instrument, sing, paint, write etc.)	☐	☐	☐	☐	☐
f)	Go around with friends to shopping centres, streets, parks etc. just for fun	☐	☐	☐	☐	☐
		1	2	3	4	5

4 During the LAST 30 DAYS on how many days have you missed one or more lessons?

	Mark one box for each line.	None	1 day	2 days	3-4 days	5-6 days	7 days or more
a)	Because of illness	☐	☐	☐	☐	☐	☐
b)	Because you skipped or 'cut'	☐	☐	☐	☐	☐	☐
c)	For other reasons	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

The following questions are about tobacco smoking (normal cigarettes, rolled cigarettes, cigarillos, cigars) EXCLUDING products such as e-cigarettes, vapes, heated tobacco products and water pipe (digital and alternative smoking products).

5 How difficult do you think it would be for you to get cigarettes (excluding digital and alternative smoking products) if you wanted?

1 ☐ Impossible
2 ☐ Very difficult
3 ☐ Fairly difficult
4 ☐ Fairly easy
5 ☐ Very easy
6 ☐ Don't know

6 Have you ever smoked cigarettes (excluding digital and alternative smoking products)?

1 ☐ Yes, in the last 30 days
2 ☐ Yes, in the last 12 months but not in the last 30 days
3 ☐ Yes, more than 12 months ago
4 ☐ Never

7 How often have you smoked cigarettes (excluding digital and alternative smoking products) during the LAST 30 DAYS?

1 ☐ Not at all
2 ☐ Less than 1 cigarette a week
3 ☐ Less than 1 cigarette a day
4 ☐ 1–5 cigarettes a day
5 ☐ 6–10 cigarettes a day
6 ☐ 11–20 cigarettes a day
7 ☐ More than 20 cigarettes a day

8 When (if ever) did you FIRST do each of the following things?

	Mark one box for each line.	Never	9 years old or less	10 years old	11 years old	12 years old	13 years old	14 years old	15 years old	16 years or older
a)	Smoke your first cigarette (excluding digital and alternative smoking products such as vapes)	☐	☐	☐	☐	☐	☐	☐	☐	☐
b)	Smoke cigarettes on a daily basis (excluding digital and alternative smoking products such as vapes)	☐	☐	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7	8	9

The next questions are about digital and alternative smoking products: e-cigarettes (including e-cigs, vapes and mods), water pipe (shisha) and heated tobacco products.

9 How difficult do you think it would be for you to get the following products if you wanted?

Mark one box for each line.

		Impossible	Very difficult	Fairly difficult	Fairly easy	Very easy	Don't know
a)	E-cigarettes	☐	☐	☐	☐	☐	☐
b)	Water pipe (shisha)	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

10 Have you ever used e-cigarettes?

1 ☐ Yes, in the last 30 days
2 ☐ Yes, in the last 12 months but not in the last 30 days
3 ☐ Yes, more than 12 months ago
4 ☐ Never

11 How often have you used e-cigarettes during the LAST 30 DAYS?

1 ☐ Not at all
2 ☐ Less than once per week
3 ☐ At least once a week
4 ☐ Almost every day or every day

12 If you have used e-cigarettes during the LAST 30 DAYS, what did it contain?

Mark all that apply.

1 ☐ I have not used e-cigarettes in the last 30 days
2 ☐ Nicotine
3 ☐ Flavouring
4 ☐ CBD
5 ☐ THC
6 ☐ Don't know

13 When (if ever) did you FIRST do each of the following things?

Mark one box for each line.

		Never	9 years old or less	10 years old	11 years old	12 years old	13 years old	14 years old	15 years old	16 years or older
a)	Use your first e-cigarette	☐	☐	☐	☐	☐	☐	☐	☐	☐
b)	Use e-cigarettes on a daily basis	☐	☐	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7	8	9

14 When you first tried e-cigarettes (if ever), what was your relationship with normal cigarettes?

1 ☐ I have never tried e-cigarettes
2 ☐ I had never used normal cigarettes
3 ☐ I had occasionally used normal cigarettes
4 ☐ I was regularly using normal cigarettes

15 Why did you try e-cigarettes for the first time?

Mark all that apply.

1 ☐ I have never tried e-cigarettes
2 ☐ To stop smoking cigarettes
3 ☐ Out of curiosity
4 ☐ Because my friends / other people offered an e-cigarette to me
5 ☐ None of the above reasons

16 Have you ever used a water pipe (shisha)?

1 ☐ Yes, in the last 30 days
2 ☐ Yes, in the last 12 months but not in the last 30 days
3 ☐ Yes, more than 12 months ago
4 ☐ Never

The next questions are about alcoholic beverages – including beer, cider, premixed drinks, wine and spirits.

17 How difficult do you think it would be for you to get each of the following, if you wanted?

	Mark one box for each line.	Impossible	Very difficult	Fairly difficult	Fairly easy	Very easy	Don't know
a)	Beer (do not include low alcohol beer like shandy or non-alcoholic beer)	☐	☐	☐	☐	☐	☐
b)	Cider (do not include low or non-alcoholic cider)	☐	☐	☐	☐	☐	☐
c)	Premixed drinks (breezer, alcopops, etc.)	☐	☐	☐	☐	☐	☐
d)	Wine (do not include low or non-alcoholic wine)	☐	☐	☐	☐	☐	☐
e)	Spirits (whisky, vodka, shot drinks, etc.)	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

18 On how many occasions (if any) have you had any alcoholic beverage to drink?

Mark one box for each line.

		Number of occasions						
		0	1-2	3-5	6-9	10-19	20-39	40 or more
a)	In your lifetime	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
b)	During the last 12 months	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
c)	During the last 30 days	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7

19 Think back over the LAST 30 DAYS. On how many occasions (if any) have you had any of the following to drink?

Mark one box for each line.

		Number of occasions						
		0	1-2	3-5	6-9	10-19	20-39	40 or more
a)	Beer (do not include low alcohol beer like shandy or non-alcoholic beer)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
b)	Cider (do not include low or non-alcoholic cider)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
c)	Premixed drinks (breezer, alcopops, etc.)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
d)	Wine (do not include low or non-alcoholic wine)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
e)	Spirits (whisky, vodka, shot drinks, etc.)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7

20 Think back again over the LAST 30 DAYS. How many times (if any) have you had five or more drinks on one occasion?

A 'drink' is defined as:

- **1 large glass / bottle / can of beer OR 2 small glasses / bottles / cans of beer,**
- **1 glass of wine**
- **2 glasses / shots of spirits**
- **1 glass / bottle of cider**
- **1 bottle of premixed drinks (breezer, alcopops etc.)**

1	☐	None
2	☐	1
3	☐	2
4	☐	3-5
5	☐	6-9
6	☐	10 or more times

21 How do you usually get alcohol?

- 0 ☐ I never drink alcohol
- 1 ☐ I buy in store / alcohol stores
- 2 ☐ I purchase smuggled goods or homemade alcohol
- 3 ☐ I get or buy from other youth
- 4 ☐ My parents give / buy me alcohol
- 5 ☐ My siblings (brothers or sisters) buy for me / give to me
- 6 ☐ I take alcohol from home without permission
- 7 ☐ Other adults buy / give to me
- 8 ☐ I buy at pubs / bars / kažin etc.
- 9 ☐ Other way

The next questions are also about alcohol.

22 On how many occasions (if any) have you been intoxicated from drinking alcoholic beverages, for example staggered when walking, not being able to speak properly, throwing up or not remembering what happened?

Mark one box for each line.

		Number of occasions						
		0	1-2	3-5	6-9	10-19	20-39	40 or more
a)	In your lifetime	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
b)	During the last 12 months	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7
c)	During the last 30 days	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7

23 When (if ever) did you FIRST do each of the following things?

Mark one box for each line.

		Never	9 years old or less	10 years old	11 years old	12 years old	13 years old	14 years old	15 years old	16 years or older
a)	Drink alcohol (at least one glass)	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7	☐ 8	☐ 9
b)	Get drunk on alcohol	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7	☐ 8	☐ 9

24 **In the LAST 12 MONTHS, how often did you drink …**

Mark one box for each line.

		Never	Rarely	Sometimes	Mostly	Always
a)	because it helps you enjoy a party?	☐	☐	☐	☐	☐
b)	because it helps you when you feel depressed or nervous?	☐	☐	☐	☐	☐
c)	to cheer up when you're in a bad mood?	☐	☐	☐	☐	☐
d)	because you like the feeling?	☐	☐	☐	☐	☐
e)	to get high?	☐	☐	☐	☐	☐
f)	because it makes social gatherings more fun?	☐	☐	☐	☐	☐
g)	to fit in with a group you like?	☐	☐	☐	☐	☐
h)	because it improves parties and celebrations?	☐	☐	☐	☐	☐
i)	to forget about your problems?	☐	☐	☐	☐	☐
j)	because it's fun?	☐	☐	☐	☐	☐
k)	to be liked?	☐	☐	☐	☐	☐
l)	so you won´t feel left out?	☐	☐	☐	☐	☐
		1	2	3	4	5

Tranquillisers and sedatives, like Valium and Ativan, are sometimes prescribed by doctors to help people to calm down, get to sleep or to relax. Pharmacies are not supposed to sell them without a prescription.

25 **Have you ever taken tranquillisers or sedatives because a doctor told you to take them?**

1	☐	No, never
2	☐	Yes, but for less than 3 weeks
3	☐	Yes, for 3 weeks or more

26 **On how many occasions in your lifetime (if any) have you used any of the following drugs without a doctor's prescription?**

Mark one box for each line.

		0	1-2	3 or more
a)	Tranquillisers or sedatives	☐	☐	☐
b)	Painkillers in order to get high	☐	☐	☐
		1	2	3

The following questions are about your wellbeing.

27 Please indicate for each of the five statements which is closest to how you have been feeling over the LAST TWO WEEKS.

	Mark one box for each line.	All the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
a)	I have felt cheerful and in good spirits	☐	☐	☐	☐	☐	☐
b)	I have felt calm and relaxed	☐	☐	☐	☐	☐	☐
c)	I have felt active and vigorous	☐	☐	☐	☐	☐	☐
d)	I woke up feeling fresh and rested	☐	☐	☐	☐	☐	☐
e)	My daily life has been filled with things that interest me	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

The next questions ask about cannabis (marijuana or hashish). Cannabis can also be called weed, ħaxixa, joint or smoke. These questions DO NOT include synthetic cannabis (synthetic) and CBD products (e.g. CBD oil).

28 How difficult do you think it would be for you to get cannabis if you wanted?

1	☐	Impossible
2	☐	Very difficult
3	☐	Fairly difficult
4	☐	Fairly easy
5	☐	Very easy
6	☐	Don't know

29 On how many occasions (if any) have you used cannabis?

	Mark one box for each line.	Number of occasions						
		0	1-2	3-5	6-9	10-19	20-39	40 or more
a)	In your lifetime	☐	☐	☐	☐	☐	☐	☐
b)	During the last 12 months	☐	☐	☐	☐	☐	☐	☐
c)	During the last 30 days	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7

30 When (if ever) did you FIRST try cannabis?

1 ☐ Never
2 ☐ 9 years old or less
3 ☐ 10 years old
4 ☐ 11 years old
5 ☐ 12 years old
6 ☐ 13 years old
7 ☐ 14 years old
8 ☐ 15 years old
9 ☐ 16 years or older

31 During the past 12 MONTHS, did you use the following types of cannabis?

Mark one box for each line.

		Never	Rarely	Often
a)	Cannabis mixed with tobacco	☐	☐	☐
b)	Cannabis resin / hashish	☐	☐	☐
c)	Herbal cannabis / weed	☐	☐	☐
d)	Cannabis oil	☐	☐	☐
e)	Edible cannabis-based products	☐	☐	☐
f)	Cannabis-based e-liquids	☐	☐	☐
		1	2	3

32 Have you used cannabis in the LAST 12 MONTHS?

1 ☐ No
2 ☐ Yes → **Has the following happened to you during the LAST 12 MONTHS?**

Mark one box for each line.

		Never	Rarely	From time to time	Fairly often	Very often
a)	Have you smoked cannabis before midday?	☐	☐	☐	☐	☐
b)	Have you smoked cannabis alone?	☐	☐	☐	☐	☐
c)	Have you had memory problems after smoking cannabis?	☐	☐	☐	☐	☐
d)	Have friends or members of your family told you that you ought to reduce or stop your cannabis use?	☐	☐	☐	☐	☐
e)	Have you tried to reduce or stop using cannabis without success?	☐	☐	☐	☐	☐
f)	Have you had problems because of your use of cannabis (arguments, fights, accidents, bad school results etc.)?	☐	☐	☐	☐	☐
		1	2	3	4	5

The next questions ask about other drugs.

33 How difficult do you think it would be for you to get each of the following, if you wanted?

Mark one box for each line.

		Impossible	Very difficult	Fairly difficult	Fairly easy	Very easy	Don't know
a)	Amphetamines (speed, uppers)	☐	☐	☐	☐	☐	☐
b)	Methamphetamines (crystal, meth, ice)	☐	☐	☐	☐	☐	☐
c)	Tranquillisers or sedatives without a doctor's prescription	☐	☐	☐	☐	☐	☐
d)	Ecstasy / MDMA	☐	☐	☐	☐	☐	☐
e)	Cocaine	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

34 On how many occasions (if any) have you ever used…?

Mark one box for each line.

		Number of occasions		
		0	1-2	3 or more
a)	Ecstasy / MDMA in your lifetime	☐	☐	☐
b)	Ecstasy / MDMA during the last 12 months	☐	☐	☐
c)	Amphetamines (speed, uppers) in your lifetime	☐	☐	☐
d)	Amphetamines (speed, uppers) during the last 12 months	☐	☐	☐
e)	Methamphetamines (crystal, meth, ice) in your lifetime	☐	☐	☐
f)	Methamphetamines (crystal, meth, ice) during the last 12 months	☐	☐	☐
g)	Synthetic cannabis (synthetic) in your lifetime	☐	☐	☐
h)	Synthetic cannabis (synthetic) during the last 12 months	☐	☐	☐
		1	2	3

35 On how many occasions (if any) have you ever used…?

Mark one box for each line.

		Number of occasions		
		0	1-2	3 or more
a)	Cocaine in your lifetime	☐	☐	☐
b)	Cocaine during the last 12 months	☐	☐	☐
c)	Crack in your lifetime	☐	☐	☐
d)	Crack during the last 12 months	☐	☐	☐
e)	Heroin in your lifetime	☐	☐	☐
f)	Heroin during the last 12 months	☐	☐	☐
		1	2	3

36 **On how many occasions (if any) have you used inhalants (sniffed substances) to get high? (Examples of inhalants are glue, gas, or aerosols. Inhalants are not inhalers for asthma.)**

	Mark one box for each line.	Number of occasions		
		0	1-2	3 or more
a)	In your lifetime	☐	☐	☐
b)	During the last 12 months	☐	☐	☐
c)	During the last 30 days	☐	☐	☐
		1	2	3

37 **On how many occasions in your lifetime (if any) have you used any of the following drugs?**

	Mark one box for each line.	Number of occasions		
		0	1-2	3 or more
a)	LSD or some other hallucinogens	☐	☐	☐
b)	"Magic mushrooms"	☐	☐	☐
c)	GHB	☐	☐	☐
d)	Melevin	☐	☐	☐
e)	Drugs by injection with a needle (like heroin, cocaine, amphetamine)	☐	☐	☐
		1	2	3

38 **On how many occasions in your lifetime (if any) have you used any of the following drugs?**

	Mark one box for each line.	Number of occasions		
		0	1-2	3 or more
a)	Alcohol together with pills (medicaments) in order to get high	☐	☐	☐
b)	Anabolic steroids	☐	☐	☐
		1	2	3

The next question asks about new psychoactive substances that imitate the effects of illicit drugs such as cannabis or ecstasy and that may now be sometimes available. They are sometimes called 'legal highs', 'ethno-botanicals', 'research chemicals' and can come in different forms, for example – herbal mixtures, powders, crystals, or tablets.

39 **On how many occasions (if any) have you used new psychoactive substances?**

	Mark one box for each line.	Number of occasions			
		0	1-2	3 or more	Don't know / not sure
a)	In your lifetime	☐	☐	☐	☐
b)	During the last 12 months	☐	☐	☐	☐
		1	2	3	4

The next questions ask about various substances.

40 **How much do you think PEOPLE RISK harming themselves (physically or in other ways), if they …**

	Mark one box for each line.	No risk	Slight risk	Moderate risk	Great risk	Don't know
a)	smoke cigarettes occasionally?	☐	☐	☐	☐	☐
b)	smoke one or more packs of cigarettes per day?	☐	☐	☐	☐	☐
c)	try e-cigarettes once or twice?	☐	☐	☐	☐	☐
d)	use e-cigarettes on a daily basis?	☐	☐	☐	☐	☐
e)	have one or two drinks nearly every day?	☐	☐	☐	☐	☐
f)	have four or five drinks nearly every day?	☐	☐	☐	☐	☐
g)	have five or more drinks on one occasion nearly each weekend?	☐	☐	☐	☐	☐
		1	2	3	4	5

41 ***Again*: how much do you think PEOPLE RISK harming themselves (physically or in other ways), if they …**

	Mark one box for each line.	No risk	Slight risk	Moderate risk	Great risk	Don't know
a)	try cannabis once or twice?	☐	☐	☐	☐	☐
b)	smoke cannabis occasionally?	☐	☐	☐	☐	☐
c)	smoke cannabis regularly?	☐	☐	☐	☐	☐
d)	try ecstasy / MDMA once or twice?	☐	☐	☐	☐	☐
e)	try amphetamines (uppers, speed) once or twice?	☐	☐	☐	☐	☐
f)	try synthetic cannabis (synthetic) once or twice?	☐	☐	☐	☐	☐
g)	use synthetic cannabis (synthetic) regularly?	☐	☐	☐	☐	☐
		1	2	3	4	5

The next questions ask about Social Media.

42 **During the LAST 7 DAYS, how many hours (if any) did you spend on Social Media communicating with others on the Internet? (Using for example, TikTok, Instagram, Facebook, Messenger, WhatsApp, Snapchat, Twitter, Discord, etc.)**

	Mark one box for each line.	None	Half an hour or less	About 1 hour	About 2-3 hours	About 4-5 hours	6 hours or more
a)	On a school day	☐	☐	☐	☐	☐	☐
b)	On a non-school day (weekend, holidays)	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

43 **How much do you agree or disagree with the following statements on Social Media communicating with others on the Internet? (Using for example TikTok, Instagram, Facebook, Messenger, WhatsApp, Snapchat, Twitter, Discord, etc.)**

	Mark one box for each line.	Strongly agree	Partly agree	Neither nor	Partly disagree	Strongly disagree
a)	I think I spend way too much time on Social Media	☐	☐	☐	☐	☐
b)	I get in bad mood when I cannot spend time on Social Media	☐	☐	☐	☐	☐
c)	My parents say that I spend way too much time on Social Media	☐	☐	☐	☐	☐
		1	2	3	4	5

The next questions ask about gaming.

44 **During the LAST 30 DAYS, how many hours (if any) did you play games using a computer, tablet, console, smartphone or other electronic device (strategy, puzzle, adventure, football, war games etc.)?**

	Mark one box for each line.	None	Half an hour or less	About 1 hour	About 2-3 hours	About 4-5 hours	6 hours or more
a)	On a school day	☐	☐	☐	☐	☐	☐
b)	On a non-school day (weekend, holidays)	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6

45 **During the LAST 7 DAYS, on how many days (if any) were you playing games using a computer, tablet, console, smartphone or other electronic device (strategy, puzzle, adventure, football, war games etc.)?**

1	☐	None
2	☐	1 day
3	☐	2 days
4	☐	3 days
5	☐	4 days
6	☐	5 days
7	☐	6 days
8	☐	7 days

46 **How much do you agree or disagree with the following statements about gaming on a computer, tablet, console, smartphone or other electronic device?**

	Mark one box for each line.	Strongly agree	Partly agree	Neither nor	Partly disagree	Strongly disagree
a)	I think I spend way too much time playing games	☐	☐	☐	☐	☐
b)	I get in bad mood when I cannot spend time on games	☐	☐	☐	☐	☐
c)	My parents say that I spend way too much time on gaming	☐	☐	☐	☐	☐
		1	2	3	4	5

The next questions ask about gambling for money (slot machines, playing card or dice, lotteries, sport bookmakers etc.) both on the Internet and not on the Internet (in physical spaces).

47 How often (if ever) did you gamble for money in the LAST 12 MONTHS?

1 ☐ I have not gambled for money during the last 12 months
2 ☐ Monthly or less
3 ☐ 2-4 times a month
4 ☐ 2-3 times or more a week

48 How much time (if any) did you spend gambling for money on a TYPICAL DAY in the LAST 12 MONTHS?

1 ☐ I have not gambled for money during the last 12 months
2 ☐ Less than 30 minutes
3 ☐ Between 30 minutes and 1 hour
4 ☐ Between 1 and 2 hours
5 ☐ Between 2 and 3 hours
6 ☐ 3 hours or more

49 How often (if ever) did you gamble for money for more than 2 hours (on a single occasion) in the LAST 12 MONTHS?

1 ☐ I have not gambled for money during the last 12 months
2 ☐ Never on a single occasion
3 ☐ Less than monthly
4 ☐ Monthly
5 ☐ Weekly
6 ☐ Daily or almost daily

50 If you have gambled <u>for money ON-SITE</u> (in physical places such as bars, clubs and kažin) in the LAST 12 MONTHS, which games have you played?

	Mark one box for each line.	I have not played these games	Monthly or less	2-4 times a month	2-3 times or more a week
a)	Slot machines (fruit machine, new slot, etc.)	☐	☐	☐	☐
b)	Play card or dice (poker, bridge, dice, etc.)	☐	☐	☐	☐
c)	Lotteries (scratch, bingo, keno, etc.)	☐	☐	☐	☐
d)	Betting on sports or animals (horses, dogs, etc.)	☐	☐	☐	☐
		1	2	3	4

51 **If you have gambled <u>for money ONLINE</u> in the LAST 12 MONTHS, which games have you played?**

	Mark one box for each line.	I have not played these games	Monthly or less	2-4 times a month	2-3 times or more a week
a)	Slot machines (fruit machine, new slot, etc.)	☐	☐	☐	☐
b)	Play card or dice (poker, bridge, dice, etc.)	☐	☐	☐	☐
c)	Lotteries (scratch, bingo, keno, etc.)	☐	☐	☐	☐
d)	Betting on sports or animals (horses, dogs, etc.)	☐	☐	☐	☐
		1	2	3	4

Now think again about gambling for money in general.

52 **Have you ever felt the need to bet more and more money?**

1 ☐ Yes

4 ☐ No

53 **Have you ever had to lie to people important to you about how much you gambled?**

1 ☐ Yes

4 ☐ No

The next questions ask about your parents.
If mostly foster parents, step-parents or others brought you up answer for them.
For example, if you have both a stepfather and a natural father, answer for the one that is the most important in bringing you up.

54 **What is the highest level of schooling your father completed?**

1 ☐ Completed primary school or less

2 ☐ Some secondary school (or Trade school)

3 ☐ Completed secondary school (or Trade school)

4 ☐ Some post-secondary school (e.g. Junior College, Sixth Form, MCAST, Polytechnic, Fellenberg, Technical Institute)

5 ☐ Completed post-secondary school (e.g. Junior College, Sixth Form, MCAST, Polytechnic, Fellenberg, Technical Institute)

6 ☐ Some University

7 ☐ Completed University

8 ☐ Don't know

9 ☐ Does not apply

55 What is the highest level of schooling your mother completed?

1 ☐ Completed primary school or less
2 ☐ Some secondary school (or Trade school)
3 ☐ Completed secondary school (or Trade school)
4 ☐ Some post-secondary school (e.g. Junior College, Sixth Form, MCAST, Polytechnic, Fellenberg, Technical Institute)
5 ☐ Completed post-secondary school (e.g. Junior College, Sixth Form, MCAST, Polytechnic, Fellenberg, Technical Institute)
6 ☐ Some University
7 ☐ Completed University
8 ☐ Don't know
9 ☐ Does not apply

56 How well off is your family compared to other families in Malta?

1 ☐ Very much better off
2 ☐ Much better off
3 ☐ Better off
4 ☐ About the same
5 ☐ Less well off
6 ☐ Much less well off
7 ☐ Very much less well off

57 Which of the following people live in the same house in which you stay most of the time?

Mark all that apply.

1 ☐ I live alone
2 ☐ Father
3 ☐ Stepfather/Mother's partner/ Step-parent
4 ☐ Mother
5 ☐ Stepmother/ Father's partner/ Step-parent
6 ☐ Brother(s)
7 ☐ Sister(s)
8 ☐ Grandparent(s)
9 ☐ Other relative(s)
10 ☐ Non-relative(s)

58 How often do the following statements apply to you?

	Mark one box for each line.	Almost always	Often	Sometimes	Rarely	Almost never
a)	My parent(s) set definite rules about what I can do at home	☐	☐	☐	☐	☐
b)	My parent(s) set definite rules about what I can do outside the home	☐	☐	☐	☐	☐
c)	My parent(s) know whom I am with in the evenings	☐	☐	☐	☐	☐
d)	My parent(s) know where I am in the evenings	☐	☐	☐	☐	☐
e)	I can easily borrow money from my mother and / or father	☐	☐	☐	☐	☐
f)	I can easily get money as a gift from my mother and / or father	☐	☐	☐	☐	☐
		1	2	3	4	5

59 We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.

	Mark one box for each line.	Very strongly disagree	2	3	4	5	6	Very strongly agree
a)	My family really tries to help me	☐	☐	☐	☐	☐	☐	☐
b)	I get the emotional help and support I need from my family	☐	☐	☐	☐	☐	☐	☐
c)	I can talk about my problems with my family	☐	☐	☐	☐	☐	☐	☐
d)	My family is willing to help me make decisions	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7

60 We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.

	Mark one box for each line.	Very strongly disagree	2	3	4	5	6	Very strongly agree
a)	My friends really try to help me	☐	☐	☐	☐	☐	☐	☐
b)	I can count on my friends when things go wrong	☐	☐	☐	☐	☐	☐	☐
c)	I have friends with whom I can share my joys and sorrows	☐	☐	☐	☐	☐	☐	☐
d)	I can talk about my problems with my friends	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7

61 Does your mother OR your father know where you spend Saturday nights?

1 ☐ Know always

2 ☐ Know quite often

3 ☐ Know sometimes

4 ☐ Usually don't know

62 **If you had ever used cannabis, do you think that you would have said so in this questionnaire?**

1 ☐ I already said that I have used it
2 ☐ Definitely yes
3 ☐ Probably yes
4 ☐ Probably not
5 ☐ Definitely not

The next questions are about your participation in prevention activities.

Think about the LAST TWO YEARS. Do you remember having participated in the following activities?

63 **Awareness events / information activities about effects and possible harms of:**

Mark one box for each line.

		Never	Once	More than once
a)	Alcohol	☐	☐	☐
b)	Tobacco	☐	☐	☐
c)	Other drugs	☐	☐	☐
d)	Gambling, Gaming or Internet disorders	☐	☐	☐
		1	2	3

64 **Interactive training about better interaction and communication with others: expressing feelings, empathy, compliments, dealing with peer pressure (social skills training).** ***Interactive training may include active participation in activities / exercises to develop skills.***

1 ☐ Never
2 ☐ Once
3 ☐ More than once

65 **Interactive training about better dealing with yourself: controlling impulses, controlling anger, setting goals and objectives, being mindful (personal skills training).** ***Interactive training may include active participation in activities / exercises to develop skills.***

1 ☐ Never
2 ☐ Once
3 ☐ More than once

66 **Training in how to analyse adverts and media and to detect the intended messages in order to be manipulated less (media literacy)**

1 ☐ Never
2 ☐ Once
3 ☐ More than once

67 **Who mainly delivered these activities?**

Mark all that apply.

1 ☐ I did not participate in any of the above activities in the past 2 years
2 ☐ A teacher
3 ☐ Other school staff
4 ☐ Law enforcement officers (e.g. police)
5 ☐ An external professional
6 ☐ Ex-drug user
7 ☐ Other

68 **Where did you mainly participate in these activities?**

Mark all that apply.

1 ☐ I did not participate in any of the above activities in the past 2 years
2 ☐ In school
3 ☐ Out-of-school
4 ☐ In school after class hours

The next questions ask once more about alcohol.

69 **Think back over the LAST 30 DAYS. On how many occasions (if any) have you bought alcohol in a store (supermarket or alcohol store) for your own consumption (off-premise)?**

Number of occasions

0	1-2	3-5	6-9	10-19	20 or more
☐	☐	☐	☐	☐	☐
1	2	3	4	5	6

70 **Think back over the LAST 30 DAYS. On how many occasions (if any) have you drunk alcohol in a pub, bar, kažin, restaurant or disco (on-premise)?**

Number of occasions

0	1-2	3-5	6-9	10-19	20 or more
☐	☐	☐	☐	☐	☐
1	2	3	4	5	6

71 **Think of that last day on which you drank alcohol. Where were you when you drank?**

Mark all that apply.

1	☐	I never drink alcohol
2	☐	At home
3	☐	At someone else's home
4	☐	Out on the street, in a park, beach or other open area
5	☐	At a bar, a pub or kažin
6	☐	In a disco or club
7	☐	In a restaurant
8	☐	Other places

The next question is about energy drinks. Energy drinks contain caffeine, sugar and other stimulants. These questions are NOT about sports drinks. Sports drinks contain carbohydrates and electrolytes and are taken to hydrate during strenuous physical activity.

72 **On how many occasions (if any) have you had any energy drink?**
(Don´t include so called "sports drinks").

Mark one box for each line.

		Number of occasions						
		0	1-2	3-5	6-9	10-19	20-39	40 or more
a)	In your lifetime	☐	☐	☐	☐	☐	☐	☐
b)	During the last 12 months	☐	☐	☐	☐	☐	☐	☐
c)	During the last 30 days	☐	☐	☐	☐	☐	☐	☐
		1	2	3	4	5	6	7

Now follow some more questions about Internet use.

73 Please read the statements below regarding Internet use. Please indicate how often these statements apply to you.

Mark one box for each line.

		Never	Rarely	Sometimes	Often	Very often
a)	How often do you find it difficult to stop using the Internet when you are online?	☐	☐	☐	☐	☐
b)	How often do you continue to use the Internet despite your intention to stop?	☐	☐	☐	☐	☐
c)	How often do others (e.g. parents, friends) say you should use the Internet less?	☐	☐	☐	☐	☐
d)	How often do you prefer to use the Internet instead of spending time with others (e.g. parents, friends)?	☐	☐	☐	☐	☐
e)	How often are you short of sleep because of the Internet?	☐	☐	☐	☐	☐
f)	How often do you think about the Internet, even when not online?	☐	☐	☐	☐	☐
g)	How often do you look forward to your next Internet session?	☐	☐	☐	☐	☐
h)	How often do you think you should use the Internet less often?	☐	☐	☐	☐	☐
i)	How often have you unsuccessfully tried to spend less time on the Internet?	☐	☐	☐	☐	☐
j)	How often do you rush through your (home) work in order to go on the Internet?	☐	☐	☐	☐	☐
k)	How often do you neglect your daily obligations (work, school or family life) because you prefer to go on the Internet?	☐	☐	☐	☐	☐
l)	How often do you go on the Internet when you are feeling down?	☐	☐	☐	☐	☐
m)	How often do you use the Internet to escape from your sorrows or get relief from negative feelings?	☐	☐	☐	☐	☐
n)	How often do you feel restless, frustrated, or irritated when you cannot use the Internet?	☐	☐	☐	☐	☐
		1	2	3	4	5

The next question is about yourself.

74 In which town / village do you live?

THANK YOU

Appendix II

Tables 2024

Note to readers

Unless otherwise specified, the tables in this appendix display the percentage of students who responded to each individual item. Data are generally disaggregated by sex (boys, girls, and all students). Students who selected "Other" or "Rather not answer" in response to the question "What is your sex?" were excluded from sex-disaggregated analyses due to the small number of responses in these categories (see the methodology chapter for details). As a result, the sum of boys and girls will not match the total number reported under "All students."

Table 1
Perceived availability of substances. Percentages responding "very easy" or "fairly easy" to obtain.

	Boys	Girls	All students
Cigarettes, e-cigarettes and water pipes			
Cigarettes	52.6	55.4	54.1
E-cigarettes	56.2	60.2	58.1
Water pipe	22.6	24.7	23.6
Alcohol			
Beer	68.0	69.6	68.8
Cider	54.6	61.4	58.0
Premixed drinks	55.1	66.5	60.7
Wine	58.9	67.2	62.9
Spirits	52.4	60.5	56.3
Any alcoholic beverage [a)]	76.0	82.5	79.1
Other drugs			
Cannabis	27.4	33.2	30.3
Tranquillisers or sedatives without prescription	13.9	16.7	15.3
Ecstasy	10.1	11.9	11.2
Amphetamine	7.1	7.5	7.5
Methamphetamine	6.3	7.5	6.9
Cocaine	12.1	17.0	14.6

[a)] *Any alcoholic beverage* is a composite measure derived from individual items assessing perceived ease of access to beer, cider, premixed drinks, wine, and spirits. A student was considered to perceive alcohol as "very easy" or "fairly easy" to obtain if they responded this way to at least one of these beverage types.

Table 2
Frequency of lifetime substance use and related behaviours among all students. Percentages.

	Occasions of use in lifetime						
	0	**1-2**	**3-5**	**6-9**	**10-19**	**20-39**	**40+**
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	83.9	16.1					
E-cigarettes [a)]	74.4	25.6					
Water pipe [a)]	93.2	6.8					
Alcohol and other drinks							
Any alcoholic beverage	26.1	14.8	12.4	10.6	13.6	9.9	12.4
Been drunk	73.2	15.5	5.1	2.7	2.1	0.7	0.6
Energy drinks	18.5	11.6	7.4	7.4	12.6	12.8	29.8
Other substances							
Cannabis	88.5	4.5	2.1	1.3	0.8	0.9	1.9
Alcohol together with pills [b)]	96.7	2.3	1.0				
Painkillers in order to get high [b)]	96.7	2.3	1.1				
Tranquillisers or sedatives without prescription [b)]	96.4	2.5	1.2				
Anabolic steroids [b)]	98.8	0.7	0.5				
Inhalants [b)]	94.8	3.2	2.0				
Ecstasy [b)]	98.5	1.2	0.4				
Amphetamine [b)]	99.0	0.8	0.2				
Methamphetamine [b)]	99.1	0.5	0.3				
Cocaine [b)]	98.7	0.8	0.5				
Crack [b)]	99.3	0.5	0.2				
LSD or other hallucinogens [b)]	99.0	0.7	0.3				
Heroin [b)]	99.4	0.5	0.1				
GHB [b)]	99.7	0.2	0.1				
Magic mushrooms [b)]	98.7	1.0	0.3				
Synthetic cannabinoids [b)]	96.4	2.5	1.1				
Any drug by injection [b)]	99.5	0.3	0.2				
Any illicit drug use [a)c)]	87.7	12.3					
Any illicit drug use other than cannabis [a)d)]	96.7	3.3					
Medically supervised use							
Tranquillisers or sedatives with prescription [a)]	87.6	12.4					

a) Includes any reported use.
b) The last category includes use on three or more occasions.
c) *Any illicit drug use* is a composite measure that includes reported use of cannabis, amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.
d) *Any illicit drug use other than cannabis* is a composite measure that includes reported use of amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.

Table 3
Frequency of lifetime substance use and related behaviours among boys. Percentages.

	Occasions of use in lifetime						
	0	**1-2**	**3-5**	**6-9**	**10-19**	**20-39**	**40+**
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	88.1	11.9					
E-cigarettes [a)]	80.7	19.3					
Water pipe [a)]	93.9	6.1					
Alcohol and other drinks							
Any alcoholic beverage	30.6	15.4	12.2	9.6	12.0	8.1	12.1
Been drunk	78.2	13.5	3.9	1.8	1.6	0.3	0.7
Energy drinks	20.3	11.8	7.1	5.4	11.7	11.6	32.1
Other substances							
Cannabis	91.4	3.9	1.1	1.1	0.3	0.7	1.6
Alcohol together with pills [b)]	98.0	1.4	0.6				
Painkillers in order to get high [b)]	97.3	1.6	1.0				
Tranquillisers or sedatives without prescription [b)]	97.0	2.1	0.9				
Anabolic steroids [b)]	98.9	0.5	0.6				
Inhalants [b)]	95.3	3.1	1.6				
Ecstasy [b)]	98.8	1.0	0.1				
Amphetamine [b)]	99.3	0.4	0.3				
Methamphetamine [b)]	99.3	0.3	0.3				
Cocaine [b)]	98.9	0.7	0.4				
Crack [b)]	99.2	0.5	0.3				
LSD or other hallucinogens [b)]	99.3	0.5	0.2				
Heroin [b)]	99.5	0.3	0.2				
GHB [b)]	99.7	0.2	0.1				
Magic mushrooms [b)]	98.6	0.9	0.5				
Synthetic cannabinoids [b)]	97.6	1.8	0.7				
Any drug by injection [b)]	99.5	0.2	0.3				
Any illicit drug use [a)c)]	90.7	9.3					
Any illicit drug use other than cannabis [a)d)]	97.4	2.6					
Medically supervised use							
Tranquillisers or sedatives with prescription [a)]	89.8	10.2					

[a)] Includes any reported use.
[b)] The last category includes use on three or more occasions.
[c)] *Any illicit drug use* is a composite measure that includes reported use of cannabis, amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.
[d)] *Any illicit drug use other than cannabis* is a composite measure that includes reported use of amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.

Table 4
Frequency of lifetime substance use and related behaviours among girls. Percentages.

	Occasions of use in lifetime						
	0	**1-2**	**3-5**	**6-9**	**10-19**	**20-39**	**40+**
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	79.4	20.6					
E-cigarettes [a)]	67.7	32.3					
Water pipe [a)]	92.4	7.6					
Alcohol and other drinks							
Any alcoholic beverage	20.8	14.3	13.0	11.7	15.6	12.0	12.7
Been drunk	67.6	17.9	6.3	3.7	2.7	1.1	0.6
Energy drinks	16.2	11.5	7.8	9.6	13.7	14.4	26.9
Other substances							
Cannabis	85.7	5.3	3.1	1.3	1.3	1.0	2.3
Alcohol together with pills [b)]	95.5	3.0	1.5				
Painkillers in order to get high [b)]	96.1	2.8	1.0				
Tranquillisers or sedatives without prescription [b)]	95.6	2.9	1.5				
Anabolic steroids [b)]	98.8	1.0	0.2				
Inhalants [b)]	94.6	3.3	2.1				
Ecstasy [b)]	98.1	1.3	0.6				
Amphetamine [b)]	98.7	1.1	0.1				
Methamphetamine [b)]	99.1	0.7	0.2				
Cocaine [b)]	98.5	1.0	0.4				
Crack [b)]	99.6	0.4	0.0				
LSD or other hallucinogens [b)]	98.8	0.9	0.3				
Heroin [b)]	99.3	0.7	0.0				
GHB [b)]	99.9	0.1	0.0				
Magic mushrooms [b)]	99.0	1.0	0.0				
Synthetic cannabinoids [b)]	95.3	3.2	1.5				
Any drug by injection [b)]	99.6	0.3	0.1				
Any illicit drug use [a)c)]	84.8	15.2					
Any illicit drug use other than cannabis [a)d)]	96.1	3.9					
Medically supervised use							
Tranquillisers or sedatives with prescription [a)]	85.5	14.5					

[a)] Includes any reported use.
[b)] The last category includes use on three or more occasions.
[c)] *Any illicit drug use* is a composite measure that includes reported use of cannabis, amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.
[d)] *Any illicit drug use other than cannabis* is a composite measure that includes reported use of amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.

Table 5
Lifetime use of various substances. Absolute numbers.

	Boys	Girls	All students
Cigarettes, e-cigarettes and water pipes			
Cigarettes	176	277	462
E-cigarettes	286	435	736
Water pipe	91	102	196
Alcohol and other drinks			
Any alcoholic beverage	1007	1033	2065
Been drunk	322	430	762
Energy drinks	1145	1098	2271
Other substances			
Cannabis	128	192	329
Alcohol together with pills	30	60	95
Painkillers in order to get high	39	52	95
Tranquillisers or sedatives without prescription	44	59	104
Anabolic steroids	16	16	33
Inhalants	69	73	148
Ecstasy	17	25	44
Amphetamine	10	17	29
Methamphetamine	10	12	25
Cocaine	16	20	38
Crack	12	6	20
LSD or other hallucinogens	10	16	29
Heroin	8	9	18
GHB	4	1	8
Magic mushrooms	21	14	38
Synthetic cannabinoids	36	63	103
Any drug by injection	7	5	14
Any illicit drug use [a)]	139	205	355
Any illicit drug use other than cannabis [b)]	39	52	96
Medically supervised use			
Tranquillisers or sedatives with prescription [a)]	151	195	354

[a)] *Any illicit drug use* is a composite measure that includes reported use of cannabis, amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.
[b)] *Any illicit drug use other than cannabis* is a composite measure that includes reported use of amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine.

Table 6
Use of new psychoactive substances (NPS). Percentages.

	Boys	Girls	All students
Lifetime use of new psychoactive substances (NPS)			
Yes	1.8	2.1	2.0
No	97.2	96.4	96.8
Don't know	0.9	1.5	1.2
Use of new psychoactive substances (NPS) in the past 12 months			
Yes	1.1	1.9	1.5
No	98.0	96.5	97.3
Don't know	0.9	1.6	1.2

Table 7
Frequency of substance use and related behaviours in the past 12 months among all students. Percentages.

	Occasions of use in the past 12 months						
	0	**1-2**	**3-5**	**6-9**	**10-19**	**20-39**	**40+**
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	88.1	11.9					
E-cigarettes [a)]	82.2	17.8					
Water pipe [a)]	95.4	4.6					
Alcohol and other drinks							
Any alcoholic beverage	35.5	19.5	14.0	11.4	10.5	5.2	3.9
Been drunk	78.9	14.4	3.4	1.6	1.1	0.5	0.2
Energy drinks	28.2	14.1	11.3	11.4	13.2	11.7	10.1
Other substance use							
Cannabis	91.0	4.0	1.5	0.8	0.9	0.8	1.1
Inhalants [b)]	97.1	2.0	0.8				
Ecstasy [b)]	99.0	0.7	0.3				
Amphetamine [b)]	99.4	0.5	0.1				
Methamphetamine [b)]	99.3	0.4	0.3				
Cocaine [b)]	99.2	0.6	0.2				
Crack [b)]	99.4	0.4	0.1				
Heroin [b)]	99.5	0.3	0.2				
Synthetic cannabinoids [b)]	96.4	2.5	1.1				

[a)] Includes any reported use.
[b)] The last category includes use on three or more occasions.

Table 8
Frequency of substance use and related behaviours in the past 12 months among boys. Percentages.

	Occasions of use in the past 12 months						
	0	**1-2**	**3-5**	**6-9**	**10-19**	**20-39**	**40+**
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	91.6	8.4					
E-cigarettes [a)]	87.0	13.0					
Water pipe [a)]	95.6	4.4					
Alcohol and other drinks							
Any alcoholic beverage	40.0	19.4	12.3	10.5	9.0	5.0	3.8
Been drunk	83.5	11.0	2.5	1.5	0.9	0.5	0.2
Energy drinks	29.0	13.3	10.6	10.6	13.4	11.6	11.6
Other substance use							
Cannabis	93.0	3.5	0.7	0.5	0.7	0.7	1.0
Inhalants [b)]	97.6	1.8	0.7				
Ecstasy [b)]	99.3	0.5	0.3				
Amphetamine [b)]	99.5	0.4	0.1				
Methamphetamine [b)]	99.3	0.4	0.3				
Cocaine [b)]	99.3	0.5	0.3				
Crack [b)]	99.5	0.4	0.1				
Heroin [b)]	99.7	0.1	0.2				
Synthetic cannabinoids [b)]	97.8	1.5	0.6				

[a)] Includes any reported use.
[b)] The last category includes use on three or more occasions.

Table 9
Frequency of substance use and related behaviours in the past 12 months among girls. Percentages.

	Occasions of use in the past 12 months						
	0	1-2	3-5	6-9	10-19	20-39	40+
Cigarettes, e-cigarettes and water pipes							
Cigarettes [a)]	84.5	15.5					
E-cigarettes [a)]	77.1	22.9					
Water pipe [a)]	95.4	4.6					
Alcohol and other drinks							
Any alcoholic beverage	30.3	19.8	16.0	12.4	12.2	5.6	3.7
Been drunk	73.8	18.0	4.5	1.7	1.3	0.5	0.3
Energy drinks	27.1	15.2	12.1	12.3	13.3	11.9	8.1
Other substance use							
Cannabis	89.1	4.4	2.4	1.0	1.0	0.9	1.1
Inhalants [b)]	96.8	2.4	0.8				
Ecstasy [b)]	98.7	0.9	0.4				
Amphetamine [b)]	99.3	0.7	0.0				
Methamphetamine [b)]	99.5	0.4	0.1				
Cocaine [b)]	99.2	0.7	0.1				
Crack [b)]	99.6	0.4	0.1				
Heroin [b)]	99.5	0.4	0.1				
Synthetic cannabinoids [b)]	96.2	2.8	1.0				

[a)] Includes any reported use.
[b)] The last category includes use on three or more occasions.

Table 10
Frequency of substance use and related behaviours in the past 30 days among all students. Percentages.

	Occasions of use in the past 30 days						
	0	1-2	3-5	6-9	10-19	20-39	40+
Alcohol and other drinks							
Any alcoholic beverage	62.9	18.4	9.5	5.0	3.0	0.7	0.5
Beer	78.9	12.8	4.2	1.7	1.3	0.7	0.5
Cider	86.8	8.3	2.4	1.1	0.6	0.4	0.4
Premixed drinks	76.5	13.8	4.8	2.3	1.3	0.6	0.7
Wine	72.3	18.2	4.9	2.0	1.6	0.6	0.5
Spirits	68.8	14.9	6.9	4.1	2.9	1.2	1.3
Been drunk	91.9	6.0	1.1	0.6	0.1	0.1	0.3
5+ drinks on one occasion [a)b)]	70.7	17.0	6.4	3.0	2.8		
Energy drinks	43.1	21.3	13.8	9.6	7.2	2.9	2.1
Other substance use							
Cannabis	95.4	1.8	0.8	0.7	0.6	0.3	0.5
Inhalants [c)]	98.9	0.6	0.5				
Cigarettes, e-cigarettes and water pipes							
	Number of cigarettes per day in the past 30 days						
	0	**<1**	**1-5**	**6-10**	**11-20**	**21+**	
Cigarettes	90.7	6.2	2.0	0.6	0.1	0.4	
	Frequency of e-cigarette use in past 30 days						
	Not at all	**Less than once per week**	**At least once a week**	**Almost every day or every day**			
E-cigarettes	88.4	4.0	3.0	4.7			
	Prevalence of water pipe use in the past 30 days						
	No use	**Any use**					
Water pipe	98.2	1.8					

[a)] The alcohol content of alcoholic beverages differs across beverage type and country. For comparability, the question in Malta asked "Think back again over the LAST 30 DAYS. How many times (if any) have you had five or more drinks on one occasion? (For the purpose of this question, a "drink" is defined as: 1 large glass / bottle / can of beer OR 2 small glasses / bottles / cans of beer, 1 glass of wine, 2 glasses / shots of spirits, 1 glass / bottle of cider, 1 bottle of premixed drinks".
[b)] The last category includes use on 10 or more occasions.
[c)] The last category includes use on three or more occasions.

Table 11
Frequency of substance use and related behaviours in the past 30 days among boys. Percentages.

	Occasions of use in the past 30 days						
	0	1-2	3-5	6-9	10-19	20-39	40+
Alcohol and other drinks							
Any alcoholic beverage	67.1	16.5	8.4	4.2	2.9	0.4	0.5
Beer	74.5	14.2	5.9	2.6	1.5	0.7	0.7
Cider	87.7	7.6	2.4	1.1	0.5	0.3	0.4
Premixed drinks	81.2	10.3	4.1	2.0	1.1	0.4	1.0
Wine	75.7	16.1	4.3	2.0	1.1	0.5	0.3
Spirits	73.6	12.5	5.4	3.4	2.7	1.1	1.3
Been drunk	94.2	3.9	0.8	0.7	0.1	0.1	0.2
5+ drinks on one occasion [a)b)]	75.0	15.3	4.8	2.6	2.3		
Energy drinks	44.0	20.1	13.5	9.3	8.0	3.3	1.8
Other substance use							
Cannabis	96.2	1.3	0.7	0.4	0.6	0.2	0.7
Inhalants [c)]	99.1	0.5	0.4				
Cigarettes, e-cigarettes and water pipes							
	Number of cigarettes per day in the past 30 days						
	0	**<1**	**1-5**	**6-10**	**11-20**	**21+**	
Cigarettes	93.2	4.3	1.3	0.3	0.2	0.6	
	Frequency of e-cigarette use in past 30 days						
	Not at all	**Less than once per week**	**At least once a week**	**Almost every day or every day**			
E-cigarettes	91.9	3.2	1.7	3.1			
	Prevalence of water pipe use in the past 30 days						
	No use	**Any use**					
Water pipe	97.8	2.2					

[a)] The alcohol content of alcoholic beverages differs across beverage type and country. For comparability, the question in Malta asked “Think back again over the LAST 30 DAYS. How many times (if any) have you had five or more drinks on one occasion? (For the purpose of this question, a “drink” is defined as: 1 large glass / bottle / can of beer OR 2 small glasses / bottles / cans of beer, 1 glass of wine, 2 glasses / shots of spirits, 1 glass / bottle of cider, 1 bottle of premixed drinks)”.
[b)] The last category includes use on 10 or more occasions.
[c)] The last category includes use on three or more occasions.

Table 12
Frequency of substance use and related behaviours in the past 30 days among girls. Percentages.

	Occasions of use in the past 30 days						
	0	1-2	3-5	6-9	10-19	20-39	40+
Alcohol and other drinks							
Any alcoholic beverage	58.2	20.7	10.6	5.9	3.1	1.0	0.5
Beer	83.8	11.3	2.2	0.9	1.0	0.7	0.2
Cider	86.2	9.0	2.3	1.0	0.7	0.5	0.3
Premixed drinks	71.2	17.8	5.5	2.7	1.6	0.8	0.4
Wine	68.5	20.6	5.4	2.1	2.2	0.6	0.6
Spirits	63.5	17.6	8.3	5.0	3.1	1.3	1.2
Been drunk	89.2	8.3	1.3	0.5	0.2	0.2	0.5
5+ drinks on one occasion [a)b)]	65.7	19.2	8.1	3.6	3.4		
Energy drinks	42.0	22.9	14.0	9.8	6.4	2.5	2.3
Other substances							
Cannabis	94.8	2.0	0.9	1.0	0.6	0.4	0.3
Inhalants [c)]	98.9	0.7	0.4				
Cigarettes, e-cigarettes and water pipes							
	Number of cigarettes per day in the past 30 days						
	0	**<1**	**1-5**	**6-10**	**11-20**	**21+**	
Cigarettes	88.1	8.3	2.7	0.8	0.1	0.1	
	Frequency of e-cigarette use in past 30 days						
	Not at all	**Less than once per week**	**At least once a week**	**Almost every day or every day**			
E-cigarettes	85.0	4.5	4.3	6.2			
	Prevalence of water pipe use in the past 30 days						
	No use	**Any use**					
Water pipe	98.7	1.3					

[a)] The alcohol content of alcoholic beverages differs across beverage type and country. For comparability, the question in Malta asked "Think back again over the LAST 30 DAYS. How many times (if any) have you had five or more drinks on one occasion? (For the purpose of this question, a "drink" is defined as: 1 large glass / bottle / can of beer OR 2 small glasses / bottles / cans of beer, 1 glass of wine, 2 glasses / shots of spirits, 1 glass / bottle of cider, 1 bottle of premixed drinks)".
[b)] The last category includes use on 10 or more occasions.
[c)] The last category includes use on three or more occasions.

Table 13
Age of onset of substance use and related behaviours among all students. Percentages.

	Age of onset							
	<9	10	11	12	13	14	15	16[a)]
Cigarettes and e-cigarettes								
First cigarette	0.6	0.4	0.7	2.0	3.4	5.1	4.5	0.2
Daily cigarette smoking	0.1	0.2	0.1	0.5	0.7	2.6	2.4	0.3
First e-cigarette	0.2	0.1	0.7	2.7	7.4	8.6	5.2	0.3
Daily e-cigarette use	0.2	0.0	0.1	0.4	2.6	4.3	2.5	0.5
Alcohol								
Drink alcohol (at least one glass)	6.1	3.7	4.2	7.4	12.6	17.4	16.2	1.1
Been drunk	0.5	0.2	0.4	1.5	3.8	8.8	11.8	1.2
Other drugs								
Cannabis	0.2	0.2	0.1	0.4	1.2	4.5	4.4	0.3

[a)] Since many respondents had not yet reached the age of 16 at the time of data collection, the reported prevalence of substance use and related behaviours at the age of 16 will be lower than the actual rates.

Table 14
Age of onset of substance use and related behaviours among boys. Percentages.

	Age of onset							
	<9	10	11	12	13	14	15	16[a)]
Cigarettes and e-cigarettes								
First cigarette	0.7	0.3	0.7	1.1	2.1	3.9	3.9	0.3
Daily cigarette smoking	0.2	0.3	0.1	0.1	0.3	1.6	1.7	0.3
First e-cigarette	0.1	0.1	0.5	1.4	4.6	6.9	5.1	0.3
Daily e-cigarette use	0.1	0.0	0.0	0.2	1.1	2.9	0.3	0.3
Alcohol								
Drink alcohol (at least one glass)	7.2	3.7	3.2	6.2	10.4	14.8	16.4	1.0
Been drunk	0.5	0.4	0.5	1.2	2.6	6.7	9.3	1.2
Other drugs								
Cannabis	0.3	0.2	0.1	0.4	0.6	2.8	3.6	0.3

[a)] Since many respondents had not yet reached the age of 16 at the time of data collection, the reported prevalence of substance use and related behaviours at the age of 16 will be lower than the actual rates.

Table 15
Age of onset of substance use and related behaviours among girls. Percentages.

	Age of onset							
	<9	10	11	12	13	14	15	16[a)]
Cigarettes and e-cigarettes								
First cigarette	0.5	0.4	0.5	3.0	4.8	6.6	5.3	0.1
Daily cigarette smoking	0.1	0.1	0.1	1.0	1.0	3.8	3.3	0.4
First e-cigarette	0.2	0.1	0.9	4.0	10.4	10.5	5.5	0.4
Daily e-cigarette use	0.3	0.0	0.3	0.7	4.1	6.0	2.9	0.6
Alcohol								
Drink alcohol (at least one glass)	4.9	3.7	5.1	8.7	15.0	20.5	16.2	1.2
Been drunk	0.4	0.1	0.4	1.8	5.0	11.0	14.5	1.3
Other drugs								
Cannabis	0.1	0.1	0.0	0.4	1.9	6.3	5.0	0.3

[a)] Since many respondents had not yet reached the age of 16 at the time of data collection, the reported prevalence of substance use and related behaviours at the age of 16 will be lower than the actual rates.

Table 16
Perceived risk of substance use. Percentages responding "great risk".

	Boys	Girls	All students
Cigarettes and e-cigarettes			
Smoke cigarettes occasionally	23.3	20.9	22.2
Smoke one or more packs of cigarettes per day	63.7	68.1	65.8
Try e-cigarettes once or twice	8.3	5.4	7.0
Use e-cigarettes on a daily basis	45.8	44.9	45.4
Alcohol			
Have one or two drinks nearly every day	22.3	28.5	25.2
Have four or five drinks nearly every day	63.3	72.8	67.7
Have five or more drinks nearly each weekend	44.8	46.5	45.7
Other drugs			
Try cannabis once or twice	15.9	11.4	13.7
Smoke cannabis occasionally	30.2	26.7	28.6
Smoke cannabis regularly	60.9	66.4	63.1
Try ecstasy once or twice	28.1	25.9	26.9
Try amphetamine once or twice	29.2	25.9	27.6
Try synthetic cannabinoids once or twice	26.9	23.4	25.1
Use synthetic cannabinoids regularly	61.6	66.8	63.8

Table 17
Usual sources of alcohol. Percentages.

	Boys	Girls	All students
I never drink alcohol	50.4	39.5	45.7
I buy in store / alcohol stores	7.8	10.3	8.8
I purchase smuggled goods or homemade alcohol	0.4	0.4	0.4
I get or buy from other youth	1.6	2.3	2.0
My parents give / buy me alcohol	14.5	17.0	15.7
Siblings (brothers or sisters) buy for me / give to me	1.0	0.7	0.9
I take alcohol at home without permission	1.4	2.2	1.7
Other adults buy / give to me	2.2	2.9	2.5
Buy at pubs / bars / każin, etc.	9.1	14.0	11.3
Other way	11.5	10.7	11.1

Table 18
Off-premises alcohol purchases for own consumption in the past 30 days. Percentages.

Occasions of use	Boys	Girls	All students
0	81.3	79.4	80.3
1-2	10.0	13.4	11.6
3-5	4.8	3.9	4.4
6-9	1.8	2.0	1.9
10-19	0.4	0.6	0.5
20 or more	1.7	0.8	1.3

Table 19
On-premises alcohol consumption in the past 30 days. Percentages.

Occasions of use	Boys	Girls	All students
0	77.4	63.5	70.7
1-2	11.2	21.5	16.1
3-5	5.6	8.3	6.9
6-9	2.5	3.7	3.1
10-19	1.6	1.5	1.6
20 or more	1.7	1.5	1.7

Table 20
Locations of alcohol consumption on the last drinking day. Percentages [a].

	Boys	Girls	All students
Never drink	40.2	27.3	34.1
At home	23.5	21.7	22.6
At someone else's home	9.1	10.9	10.1
On the street, in a park, beach or other open area	9.1	12.4	10.7
At a bar or a pub	14.4	18.2	16.2
In a disco or club	5.5	8.8	7.0
In a restaurant	9.8	18.2	13.8
Other places	8.4	9.3	8.8

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Table 21
Reasons for drinking alcohol in the past 12 months. Percentages responding "mostly" or "always" for each reason.

	Boys	Girls	All students
Helps enjoy a party	9.1	14.2	11.5
Helps when feeling depressed or nervous	2.5	6.2	4.3
To cheer up when in a bad mood	3.0	5.9	4.4
Like the feeling	6.1	11.9	9.0
To get high	2.3	4.0	3.1
Makes social gatherings more fun	7.2	12.8	9.8
To fit in with a group	1.8	3.8	2.8
Improves parties and celebrations	8.5	13.1	10.6
To forget about problems	3.6	9.4	6.4
It's fun	9.4	18.0	13.5
To be liked	1.2	2.0	1.6
To not feel left out	1.0	2.8	1.9

Table 22
Content of e-cigarettes used in the past 30 days. Percentages [a].

	Boys	Girls	All students
I have not used e-cigarettes in the past 30 days	77.2	74.1	75.6
Nicotine	6.9	12.6	9.7
Flavouring	6.9	13.5	10.2
CBD	0.6	0.8	0.7
THC	1.1	1.2	1.2
Don't know	14.4	11.6	13.1

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Table 23
Cigarette use status at time of first e-cigarette use. Percentages.

	Boys	Girls	All students
When you first tried e-cigarettes (if ever), what was your relationship with normal cigarettes?			
I have never tried e-cigarettes	79.9	67.3	73.8
I had never used normal cigarettes	13.7	21.3	17.2
I had occasionally used normal cigarettes	5.3	9.0	7.2
I was regularly using normal cigarettes	1.1	2.4	1.7

Table 24
Reported reasons for trying e-cigarettes for the first time. Percentages [a].

	Boys	Girls	All students
I never tried e-cigarettes	81.6	68.6	75.3
To stop smoking cigarettes	0.4	1.1	0.8
Out of curiosity	14.0	21.2	17.5
Because my friends / other people offered an e-cigarette to me	5.4	13.4	9.1
None of the above reasons	4.2	5.2	4.7

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Table 25
Willingness to admit cannabis use. Percentages.

	Boys	Girls	All students
If you had ever used cannabis, do you think that you would have said so in this questionnaire?			
I already said that I have used it	7.8	13.1	10.5
Definitely yes	29.5	24.5	27.1
Probably yes	29.7	39.2	34.1
Probably not	9.4	11.2	10.3
Definitely not	23.7	11.9	18.1

Table 26
Types of cannabis used in the past 12 months. Percentages.

	Boys	Girls	All students
Cannabis mixed with tobacco	5.3	9.3	7.4
Cannabis resin / hashish	2.7	3.6	3.1
Herbal cannabis / weed	5.3	8.2	6.8
Cannabis oil	2.2	2.4	2.3
Edible cannabis-based products	2.8	4.6	3.8
Cannabis-based e-liquids	2.6	3.7	3.2

Table 27
Time spent on social media communicating with others in the past 7 days. Percentages.

	Boys	Girls	All students
On a school day			
None	10.2	4.2	7.4
Half an hour or less	6.0	3.9	5.0
About 1 hour	13.4	7.8	10.8
About 2-3 hours	34.0	35.6	34.6
About 4-5 hours	23.2	32.2	27.6
6 hours or more	13.2	16.2	14.7
On a non-school day (weekends or holidays)			
None	4.1	1.3	2.9
Half an hour or less	2.8	1.7	2.3
About 1 hour	5.6	3.4	4.6
About 2-3 hours	20.3	12.9	16.8
About 4-5 hours	29.2	32.1	30.4
6 hours or more	38.0	48.5	43.1

Table 28
Perceptions of own social media use. Percentages.

	Boys	Girls	All students
I think I spend way too much time on social media			
Strongly agree	25.1	35.6	30.1
Partly agree	37.8	38.9	38.1
Neither / nor	21.9	16.4	19.4
Partly disagree	8.2	6.0	7.1
Strongly disagree	7.1	3.1	5.2
I get in a bad mood when I cannot spend time on social media			
Strongly agree	7.6	11.8	9.6
Partly agree	17.3	23.7	20.3
Neither / nor	24.3	24.9	24.5
Partly disagree	24.1	22.7	23.4
Strongly disagree	26.7	17.0	22.2
My parents say that I spend way too much time on social media			
Strongly agree	19.1	24.3	21.6
Partly agree	21.8	24.4	23.1
Neither / nor	24.8	21.4	23.2
Partly disagree	15.6	15.2	15.4
Strongly disagree	18.7	14.6	16.7

Table 29
Time spent playing games on an electronic device in the past 30 days. Percentages.

	Boys	Girls	All students
On a school day			
None	21.7	41.7	31.1
Half an hour or less	11.6	21.2	16.1
About 1 hour	20.5	18.5	19.5
About 2-3 hours	27.4	11.3	19.9
About 4-5 hours	10.5	4.6	7.7
6 hours or more	8.3	2.7	5.6
On a non-school day (weekend, holidays)			
None	8.9	28.3	18.1
Half an hour or less	5.3	18.7	11.7
About 1 hour	10.9	17.3	14.0
About 2-3 hours	24.1	19.1	21.8
About 4-5 hours	25.9	8.6	17.7
6 hours or more	24.9	7.9	16.7

Table 30
Days spent playing games on a computer, tablet, console, smart phone or other electronic device in the past 7 days. Percentages.

	Boys	Girls	All students
None	11.0	33.0	21.4
1 day	6.8	15.2	10.8
2 days	9.5	13.8	11.4
3 days	11.0	9.1	10.2
4 days	9.1	6.4	7.8
5 days	10.2	5.4	8.0
6 days	7.2	3.1	5.4
7 days	35.2	14.1	25.1

Table 31
Perceptions of own gaming on electronic devices. Percentages.

	Boys	Girls	All students
I think I spend way too much time playing games			
Strongly agree	15.0	5.7	10.6
Partly agree	25.2	10.4	18.3
Neither / nor	22.4	17.4	20.0
Partly disagree	17.3	18.6	17.8
Strongly disagree	20.1	48.0	33.3
I get in a bad mood when I cannot spend time on playing games			
Strongly agree	6.9	4.9	6.1
Partly agree	15.5	5.8	10.9
Neither / nor	22.6	13.8	18.3
Partly disagree	21.7	15.2	18.5
Strongly disagree	33.4	60.3	46.2
My parents say that I spend way too much time on gaming			
Strongly agree	15.7	5.6	11.1
Partly agree	19.2	6.5	13.2
Neither / nor	21.3	13.0	17.4
Partly disagree	16.9	12.3	14.6
Strongly disagree	26.9	62.6	43.7

Table 32
Frequency of on-site gambling activities in the past 12 months. Percentages.

	Boys	Girls	All students
Slot machines			
I have not played these games	96.5	96.9	96.6
Monthly or less	2.5	2.6	2.6
2-4 times a month	0.8	0.2	0.5
2-3 times or more a week	0.2	0.3	0.3
Play cards or dice			
I have not played these games	94.0	95.3	94.5
Monthly or less	4.5	3.1	3.9
2-4 times a month	0.8	1.2	1.0
2-3 times or more a week	0.6	0.4	0.6
Lotteries			
I have not played these games	92.6	91.1	91.8
Monthly or less	5.5	7.3	6.4
2-4 times a month	1.5	1.4	1.4
2-3 times or more a week	0.4	0.2	0.4
Betting on sports or animals			
I have not played these games	93.5	97.9	95.5
Monthly or less	4.3	1.0	2.8
2-4 times a month	0.9	0.5	0.8
2-3 times or more a week	1.3	0.5	1.0

Table 33
Frequency of online gambling activities in the past 12 months. Percentages.

	Boys	Girls	All students
Slot machines			
I have not played these games	97.5	98.2	97.8
Monthly or less	1.4	1.3	1.4
2-4 times a month	0.5	0.2	0.4
2-3 times or more a week	0.6	0.2	0.5
Play cards or dice			
I have not played these games	95.1	97.4	96.1
Monthly or less	3.3	1.7	2.5
2-4 times a month	1.0	0.5	0.8
2-3 times or more a week	0.6	0.5	0.6
Lotteries			
I have not played these games	96.1	95.7	95.9
Monthly or less	2.8	3.5	3.1
2-4 times a month	0.6	0.7	0.6
2-3 times or more a week	0.6	0.1	0.4
Betting on sports or animals			
I have not played these games	94.3	98.2	96.0
Monthly or less	3.3	1.0	2.2
2-4 times a month	1.2	0.4	0.9
2-3 times or more a week	1.2	0.5	0.9

Table 34
Frequency of leisure activities. Percentages.

	Boys	Girls	All students
Play computer games			
Never	5.0	16.2	10.2
A few times a year	6.9	24.9	15.3
Once or twice a month	9.5	22.4	15.7
At least once a week	29.7	22.0	26.0
Almost every day	48.9	14.5	32.7
Actively participate in sports, athletics or exercise			
Never	4.6	7.9	6.3
A few times a year	6.7	12.5	9.4
Once or twice a month	7.7	14.4	10.9
At least once a week	29.0	36.9	32.7
Almost every day	52.0	28.2	40.6
Read books for enjoyment (non-school books)			
Never	34.8	19.6	27.7
A few times a year	29.5	27.1	28.3
Once or twice a month	19.9	21.5	20.6
At least once a week	10.3	16.6	13.3
Almost every day	5.5	15.1	10.1
Go out in the evening (to a disco, cafe, party, etc.)			
Never	18.7	16.7	17.9
A few times a year	21.1	24.5	22.6
Once or twice a month	24.2	27.3	25.6
At least once a week	31.6	27.6	29.7
Almost every day	4.5	3.9	4.3
Other hobbies (play instrument, sing, draw, write etc.)			
Never	25.6	16.7	21.3
A few times a year	10.1	10.7	10.3
Once or twice a month	15.1	17.8	16.4
At least once a week	27.6	28.7	28.2
Almost every day	21.6	26.1	23.8
Go around with friends to shopping centres, streets, parks, etc. just for fun			
Never	5.8	2.0	4.1
A few times a year	13.1	6.9	10.2
Once or twice a month	29.4	33.8	31.3
At least once a week	42.5	47.5	44.9
Almost every day	9.3	9.8	9.5

Table 35
Number of days students missed one or more school lessons in the past 30 days. Percentages.

	Boys	Girls	All students
Because of illness			
None	57.6	53.1	55.2
1 day	12.5	14.2	13.5
2 days	13.3	13.7	13.6
3-4 days	10.5	12.3	11.4
5-6 days	3.6	4.1	3.8
7 days or more	2.5	2.6	2.5
“Skipped lessons”			
None	79.0	72.7	76.0
1 day	10.5	12.6	11.5
2 days	5.0	6.8	5.8
3-4 days	3.0	4.6	3.8
5-6 days	0.7	2.1	1.4
7 days or more	1.7	1.3	1.5
Other reasons			
None	65.7	57.9	62.0
1 day	17.4	20.0	18.6
2 days	7.8	11.7	9.6
3-4 days	5.3	5.6	5.5
5-6 days	1.6	2.0	1.8
7 days or more	2.3	2.8	2.5

Table 36
Parents' level of schooling. Percentages.

	Boys	Girls	All students
Father			
Completed primary school or less	2.0	2.7	2.3
Some secondary school (or Trade school)	7.7	7.2	7.5
Completed secondary school (or Trade school)	36.8	43.5	39.9
Some college or university	4.6	4.1	4.3
Completed college or university	26.6	26.6	26.4
Don't know or does not apply	22.3	15.9	19.6
Mother			
Completed primary school or less	1.2	1.1	1.1
Some secondary school (or Trade school)	3.2	6.1	4.5
Completed secondary school (or Trade school)	39.0	45.3	41.9
Some college or university	5.3	5.5	5.3
Completed college or university	32.1	30.8	31.4
Don't know or does not apply	19.3	11.4	15.8

Table 37
Perceived economic situation compared to other families. Percentages.

	Boys	Girls	All students
Very much better off	6.7	5.2	6.0
Much better off	12.1	10.2	11.1
Better off	30.1	22.0	26.2
About the same	42.2	51.4	46.5
Less well off	6.4	8.6	7.5
Much less well off	1.5	1.2	1.4
Very much less well off	1.0	1.4	1.3

Table 38
People living in the same household. Percentages [a].

	Boys	Girls	All students
Live alone	1.9	0.7	1.4
Father	77.1	74.7	75.7
Stepfather or mother's partner	6.3	7.0	6.7
Mother	89.2	92.6	90.6
Stepmother or father's partner	1.5	1.6	1.6
Brother(s)	42.9	43.6	42.9
Sister(s)	38.1	40.8	39.3
Grandparent(s)	8.1	8.2	8.1
Other relative(s)	2.6	3.0	2.8
Non-relative(s)	2.3	2.8	2.6

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Table 39
Parental knowledge of students' whereabouts on a Saturday night. Percentages.

	Boys	Girls	All students
Mother or father…			
Know always	73.3	77.6	75.3
Know quite often	18.4	16.9	17.6
Know sometimes	5.2	4.3	4.8
Usually don't know	3.2	1.2	2.3

Table 40
Perceptions of parental rule-setting, monitoring and support. Percentages.

	Boys	Girls	All students
Parent(s) set definite rules about what can be done at home			
Almost always	15.1	12.2	13.8
Often	22.3	18.7	20.6
Sometimes	27.0	31.0	28.8
Seldom	19.8	22.7	21.1
Almost never	15.8	15.4	15.8
Parent(s) set definite rules about what can be done outside the home			
Almost always	17.5	17.2	17.3
Often	24.6	24.7	24.6
Sometimes	27.7	29.9	28.6
Seldom	19.1	18.6	19.0
Almost never	11.0	9.6	10.4
Parent(s) know with whom evenings are spent			
Almost always	60.3	75.7	67.6
Often	21.1	14.3	17.7
Sometimes	9.7	5.9	7.9
Seldom	4.9	1.6	3.4
Almost never	3.9	2.6	3.4
Parent(s) know whereabouts in the evenings			
Almost always	64.9	78.3	71.3
Often	21.2	12.6	17.1
Sometimes	7.1	5.6	6.3
Seldom	3.4	1.7	2.7
Almost never	3.4	1.7	2.6
Can easily borrow money from mother and / or father			
Almost always	36.1	49.3	42.4
Often	30.1	28.0	29.0
Sometimes	21.3	14.9	18.2
Seldom	6.5	4.7	5.7
Almost never	6.0	3.1	4.7
Can easily get money as a gift from mother and / or father			
Almost always	32.5	39.5	35.8
Often	26.9	23.9	25.3
Sometimes	24.2	21.2	22.9
Seldom	10.4	10.2	10.3
Almost never	6.0	5.2	5.6

Table 41
Perceived social support from family [a]. Percentages.

	Boys	Girls	All students
My family really tries to help me			
Very strongly disagree	4.2	3.6	3.9
2	1.5	2.8	2.2
3	2.4	4.1	3.3
4	4.8	9.3	6.9
5	8.2	11.4	9.6
6	12.7	15.2	13.9
Very strongly agree	66.2	53.7	60.1
I get the emotional help and support I need from my family			
Very strongly disagree	6.0	6.0	6.1
2	5.0	5.8	5.4
3	5.7	10.1	7.7
4	10.6	12.0	11.2
5	12.1	12.1	12.2
6	13.0	16.4	14.5
Very strongly agree	47.6	37.7	42.8
I can talk about my problems with my family			
Very strongly disagree	8.8	8.8	9.0
2	7.5	9.8	8.5
3	7.1	10.6	8.7
4	10.9	12.4	11.7
5	12.3	14.3	13.2
6	11.2	12.4	11.7
Very strongly agree	42.2	31.6	37.2
My family is willing to help me make decisions			
Very strongly disagree	4.7	4.3	4.6
2	2.3	3.7	3.0
3	2.9	4.6	3.8
4	6.8	8.5	7.6
5	9.7	12.6	11.0
6	15.9	17.1	16.4
Very strongly agree	57.7	49.1	53.6

[a] Items are derived from the Multidimensional Scale of Perceived Social Support (MSPSS).

Table 42
Perceived social support from friends [a]. Percentages.

	Boys	Girls	All students
My friends really try to help me			
Very strongly disagree	5.3	2.8	4.2
2	3.8	4.4	4.1
3	6.3	6.2	6.2
4	15.8	13.2	14.5
5	22.4	21.0	21.7
6	20.2	21.3	20.6
Very strongly agree	26.2	31.1	28.6
I can count on my friends when things go wrong			
Very strongly disagree	8.1	4.5	6.5
2	6.3	6.5	6.4
3	10.1	8.7	9.4
4	16.1	15.8	16.1
5	18.1	18.2	18.1
6	17.3	20.0	18.5
Very strongly agree	24.0	26.1	25.0
I have friends with whom I can share my joys and sorrows			
Very strongly disagree	6.4	3.4	5.1
2	3.4	3.5	3.5
3	5.6	5.4	5.4
4	11.6	8.3	10.1
5	16.2	13.9	15.1
6	21.2	21.2	21.1
Very strongly agree	35.6	44.3	39.8
I can talk about my problems with my friends			
Very strongly disagree	8.5	5.1	7.0
2	6.0	5.7	5.9
3	7.7	6.8	7.2
4	14.0	12.0	13.1
5	15.7	16.1	15.8
6	17.7	17.8	17.6
Very strongly agree	30.4	36.4	33.3

[a] Items are derived from the Multidimensional Scale of Perceived Social Support (MSPSS).

Table 43
Well-being over the past two weeks [a]. Percentages.

	Boys	Girls	All students
I have felt cheerful and in good spirits			
All the time	10.4	4.5	7.7
Most of the time	32.1	26.2	29.3
More than half of the time	26.9	27.3	26.9
Less than half of the time	11.9	17.4	14.6
Some of the time	12.2	19.8	15.9
At no time	6.6	4.9	5.8
I have felt calm and relaxed			
All the time	11.7	3.9	8.1
Most of the time	25.6	16.8	21.4
More than half of the time	24.2	20.3	22.2
Less than half of the time	16.2	19.8	17.9
Some of the time	13.2	27.6	20.1
At no time	9.0	11.6	10.3
I have felt active and vigorous			
All the time	13.2	5.3	9.5
Most of the time	27.8	15.2	21.9
More than half of the time	23.4	22.8	22.9
Less than half of the time	14.7	21.2	17.7
Some of the time	12.0	23.7	17.6
At no time	8.9	11.7	10.2
I woke up feeling fresh and rested			
All the time	11.1	4.2	7.8
Most of the time	17.9	11.1	14.6
More than half of the time	21.1	14.6	18.0
Less than half of the time	16.8	19.1	17.9
Some of the time	17.5	26.2	21.7
At no time	15.5	24.8	20.0
My daily life has been filled with things that interest me			
All the time	15.0	8.6	11.9
Most of the time	23.3	17.7	20.5
More than half of the time	23.5	18.4	21.1
Less than half of the time	15.1	20.8	17.9
Some of the time	14.5	24.5	19.3
At no time	8.7	10.0	9.3

[a] Items are derived from the **WHO-5 Well-being Index**

Table 44
Self-reported participation in awareness events / information activities on risky behaviours in the past 2 years. Percentages.

	Boys	Girls	All students
Participation in awareness events / information activities about effects and possible harms of...			
Alcohol			
Never	50.7	39.1	45.3
Once	19.8	22.4	20.9
More than once	29.5	38.5	33.8
Tobacco			
Never	75.8	68.6	72.2
Once	11.4	15.4	13.4
More than once	12.8	16.0	14.4
Other drugs			
Never	77.0	72.8	75.0
Once	11.3	14.4	12.8
More than once	11.6	12.8	12.2
Gambling, gaming or internet disorders			
Never	74.0	83.3	78.3
Once	12.2	10.5	11.4
More than once	13.8	6.2	10.3

Table 45
Frequency of self-reported participation in interactive training on social, personal, and media literacy skills in the past 2 years. Percentages.

	Boys	Girls	All students
Frequency of participation in social skills training			
Never	51.3	38.2	45.0
Once	24.0	26.3	25.3
More than once	24.7	35.5	29.8
Frequency of participation in personal skills training			
Never	50.2	38.5	44.7
Once	22.6	26.8	24.6
More than once	27.1	34.7	30.7
Frequency of participation in media literacy			
Never	55.5	52.2	54.0
Once	23.7	26.0	24.8
More than once	20.8	21.8	21.2

Table 46
Main providers of prevention activities attended by students in the past 2 years. Percentages [a].

	Boys	Girls	All students
I did not participate in any of the above activities in the past 2 years	37.1	31.0	34.2
A teacher	31.8	37.5	34.2
Other school staff	11.9	15.3	13.5
Law enforcement officers	8.8	11.9	10.4
An external professional	14.2	18.2	16.3
Ex-drug user	9.9	10.9	10.3
Other	25.8	23.6	24.9

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Table 47
Main setting of prevention activities attended by students in the past 2 years. Percentages.

	Boys	Girls	All students
I did not participate in any of the above activities in the past 2 years	37.8	30.8	34.4
In school	42.4	50.9	46.2
Out-of-school	26.8	27.8	27.5
In school after class hours	3.0	2.4	2.7

[a] Students were asked to mark all responses that apply; column totals do not sum to 100%.

Appendix III

Trend tables 1995-2024

Note to readers

The tables in this Appendix present the percentage of students reporting various behaviours and perceptions over time. Data derive from the International ESPAD Database, and previous ESPAD National Reports. Figures in bold are taken from past national ESPAD reports. Unavailable or noncomparable data are indicated by a dot (.) unless otherwise specified. While most tables in this appendix present data across multiple years to illustrate trends over time, some variables are based on only two data points. These have been included due to the importance and preliminary signs of change.

Students who selected "Other" or "Rather not answer" in response to the question "What is your sex?" were excluded from sex-disaggregated analyses due to the small number of responses (see the methodology chapter for details). As a result, the sum of boys and girls will not match the total number of students reported under "All".

Table 48
Prevalence of cigarette use, 1995-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime cigarette use	**All**	**55.3**	56.2	47.7	45.7	38.0	29.1	22.4	16.1
	Boys	**55.0**	54.3	48.1	44.6	38.6	25.0	20.9	11.9
	Girls	**55.6**	57.9	47.5	46.7	37.5	33.3	23.9	20.6
Cigarette use in the past 30 days	**All**	**33.3**	31.3	26.1	25.8	21.6	14.6	10.5	9.3
	Boys	**32.9**	28.9	26.4	25.6	22.7	11.6	9.5	6.8
	Girls	**30.0**	33.4	25.9	26.0	20.4	17.6	11.5	11.9
Daily cigarette use in the past 30 days	**All**	**15.0**	14.2	11.2	11.9	10.0	6.6	3.6	3.1
	Boys	**17.5**	13.2	11.5	12.1	10.5	5.7	3.8	2.5
	Girls	**13.0**	15.0	11.1	11.7	9.4	7.5	3.4	3.6
First cigarette use at age 13 or younger	**All**	**34.1**	**36.8**	**28.6**	**24.2**	**20.0**	**12.9**	7.4	7.1
	Boys	**35.1**	**35.2**	**27.3**	**22.4**	**19.7**	**11.3**	6.8	4.8
	Girls	**33.3**	**38.2**	**29.8**	**26.1**	**20.3**	**14.3**	8.0	9.3
Daily cigarette use at age 13 or younger	**All**	8.0	9.4	6.5	6.2	6.0	3.0	1.7	1.6
	Boys	8.7	8.6	4.4	6.1	6.0	2.6	1.7	1.0
	Girls	7.7	10.2	8.1	6.2	6.1	3.5	1.7	2.2

Table 49
Prevalence of e-cigarette use, 2019-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime e-cigarette use	All	.	.	.	.	.	.	20.6	25.6
	Boys	.	.	.	.	.	.	20.6	19.3
	Girls	.	.	.	.	.	.	20.5	32.3
E-cigarette use in the past 30 days	All	.	.	.	.	.	.	7.2	9.6
	Boys	.	.	.	.	.	.	7.7	6.7
	Girls	.	.	.	.	.	.	6.6	12.5
Daily or almost daily e-cigarette use in the past 30 days	All	.	.	.	.	.	.	1.2	4.7
	Boys	.	.	.	.	.	.	1.4	3.1
	Girls	.	.	.	.	.	.	0.9	6.2
First e-cigarette use at age 13 or younger	All	.	.	.	.	.	.	4.9	11.1
	Boys	.	.	.	.	.	.	5.6	6.7
	Girls	.	.	.	.	.	.	4.3	15.6
Daily e-cigarette use at age 13 or younger	All	.	.	.	.	.	.	1.0	3.4
	Boys	.	.	.	.	.	.	1.0	1.5
	Girls	.	.	.	.	.	.	0.9	5.3

Table 50
Prevalence of cigarette and / or e-cigarette use, 2019-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime use of cigarettes and/or e-cigarettes	All	.	.	.	.	.	.	29.3	27.7
	Boys	.	.	.	.	.	.	28.1	21.4
	Girls	.	.	.	.	.	.	30.6	34.2
Cigarette and/or e-cigarette use in the past 30 days	All	.	.	.	.	.	.	14.0	14.6
	Boys	.	.	.	.	.	.	13.2	10.8
	Girls	.	.	.	.	.	.	14.9	18.4
Daily cigarette and/or e-cigarette use in the past 30 days	All	.	.	.	.	.	.	4.3	6.2
	Boys	.	.	.	.	.	.	4.8	4.7
	Girls	.	.	.	.	.	.	3.8	7.6
Daily cigarette and/or e-cigarette use at age 13 or younger	All	.	.	.	.	.	.	2.2	4.2
	Boys	.	.	.	.	.	.	2.2	2.3
	Girls	.	.	.	.	.	.	2.3	6.4

Table 51
Prevalence of alcohol use and related behaviours, 1995-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime alcohol use	**All**	**91.9**	94.0	93.6	92.0	90.4	86.2	81.6	73.9
	Boys	**91.8**	94.6	94.5	93.8	90.7	83.9	80.7	69.4
	Girls	**92.0**	93.4	92.9	90.4	90.1	88.4	82.5	79.2
Lifetime alcohol use 40 times or more	**All**	**33.8**	**35.9**	**33.3**	**33.3**	**29.5**	**19.6**	17.1	12.4
	Boys	**39.4**	**43.5**	**41.0**	**40.6**	**34.6**	**20.9**	18.5	12.1
	Girls	**29.3**	**29.1**	**27.1**	**26.9**	**24.4**	**18.2**	15.6	12.7
Alcohol use in the past 12 months	**All**	**88.8**	90.5	89.4	87.4	85.8	79.8	73.1	64.5
	Boys	**88.5**	90.3	90.8	89.5	85.8	77.5	72.0	60.0
	Girls	**89.1**	90.7	88.3	85.5	85.7	82.1	74.2	69.7
Alcohol use 20 times or more in the past 12 months	**All**	**27.7**	31.1	30.9	32.3	27.6	18.1	15.3	9.1
	Boys	**33.0**	36.9	37.9	37.7	31.1	18.2	16.0	8.8
	Girls	**23.6**	26.1	25.4	27.6	24.0	18.1	14.5	9.3
Alcohol use in the past 30 days	**All**	**66.1**	74.8	74.7	72.9	68.0	53.9	48.4	37.1
	Boys	**69.4**	75.8	78.0	76.2	69.7	51.6	47.3	32.9
	Girls	**63.3**	73.9	72.1	70.0	66.3	56.3	49.5	41.8
Alcohol use 10 times or more in the past 30 days	**All**	**15.9**	19.5	19.4	20.3	18.3	10.5	9.5	4.2
	Boys	**20.3**	24.2	24.6	23.5	21.0	9.1	10.1	3.8
	Girls	**12.3**	15.4	15.3	17.5	15.7	11.9	8.9	4.5
Beer consumption in the past 30 days	**All**	**48.2**	52.7	48.3	47.1	45.4	36.0	32.7	21.1
	Boys	**64.3**	66.7	64.9	62.6	57.0	42.5	39.9	25.5
	Girls	**35.1**	40.5	35.2	33.4	33.9	29.5	25.2	16.2
Cider consumption in the past 30 days	**All**	.	.	.	**16.5**	**19.9**	**16.4**	16.0	13.2
	Boys	.	.	.	**20.3**	**23.6**	**15.7**	17.1	12.3
	Girls	.	.	.	**13.2**	**16.3**	**17.1**	14.9	13.8
Premixed drink consumption in the past 30 days [a)]	**All**	.	.	.	**35.2**	**32.0**	**25.7**	31.4	23.5
	Boys	.	.	.	**36.4**	**31.6**	**21.6**	27.5	18.8
	Girls	.	.	.	**34.1**	**32.5**	**29.8**	35.4	28.8
Wine consumption in the past 30 days	**All**	**60.8**	67.7	67.4	63.3	55.6	42.5	39.6	27.7
	Boys	**65.1**	71.4	72.1	66.5	57.3	41.2	37.0	24.3
	Girls	**57.4**	64.5	63.8	60.6	53.9	43.9	42.3	31.5
Spirits consumption in the past 30 days	**All**	.	.	.	64.3	62.5	48.2	40.2	31.2
	Boys	.	.	.	65.4	63.8	43.8	39.3	26.4
	Girls	.	.	.	63.3	61.3	52.6	41.0	36.5
Heavy episodic drinking in the past 30 days [b)]	**All**	.	.	.	56.8	55.5	47.3	40.3	29.3
	Boys	.	.	.	62.4	59.0	45.4	40.1	25.0
	Girls	.	.	.	52.0	52.1	49.2	40.6	34.3

Heavy episodic drinking 3 times or more in the past 30 days [b)]	**All**	.	.	.	31.5	30.8	22.1	18.0	12.2
	Boys	.	.	.	36.4	33.2	19.9	17.7	9.7
	Girls	.	.	.	27.2	28.4	24.3	18.3	15.1

a) The question referred to "alcopops" in 2007, 2011, and 2015. This terminology was changed to "premixed drinks" from 2019 onwards.

b) The quantity of premixed drinks defined as a "drink" for the purpose of measuring heavy episodic drinking changed from "2 glasses/bottles of alcopops" in 2015 to "1 bottle of premixed drinks (breezer, alcopops, etc.)" from 2019 onwards.

Table 52
Prevalence of alcohol intoxication, 1995-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime experience of drunkenness	**All**	.	.	.	**45.0**	**44.4**	**38.1**	32.2	26.8
	Boys	.	.	.	**46.5**	**46.6**	**35.1**	28.8	21.8
	Girls	.	.	.	**43.7**	**42.3**	**41.1**	35.6	32.4
Drunkenness in the past 12 months	**All**	.	.	.	**37.8**	**37.4**	**31.0**	25.4	21.1
	Boys	.	.	.	**39.8**	**38.6**	**26.9**	22.9	16.5
	Girls	.	.	.	**35.9**	**36.3**	**35.1**	27.9	26.2
Drunkenness in the past 30 days	**All**	.	.	.	**19.4**	**19.6**	**14.4**	12.1	8.1
	Boys	.	.	.	**20.1**	**20.8**	**11.5**	11.4	5.8
	Girls	.	.	.	**18.7**	**18.4**	**17.4**	12.8	10.8
Drunkenness at age 13 or younger	**All**	**12.3**	**13.9**	**13.4**	**10.3**	**10.5**	**8.0**	6.4	6.4
	Boys	**14.4**	**16.6**	**15.0**	**12.0**	**12.5**	**8.3**	6.4	5.2
	Girls	**10.7**	**11.5**	**12.2**	**8.9**	**8.8**	**7.7**	6.4	7.7

Table 53
Prevalence of cannabis use, 1995-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Lifetime use of cannabis	**All**	**8.0**	7.0	9.6	12.9	9.8	12.6	11.5	11.5
	Boys	**9.9**	7.2	11.6	14.7	11.6	12.7	11.3	8.6
	Girls	**6.5**	6.9	8.1	11.4	7.9	12.5	11.8	14.3
Cannabis use in the past 12 months	**All**	**5.8**	4.8	8.0	10.6	7.8	10.4	9.4	9.0
	Boys	**6.8**	5.2	9.3	12.3	9.7	10.6	9.3	7.0
	Girls	**5.1**	4.5	7.0	9.1	5.9	10.3	9.4	10.9
Cannabis use in the past 30 days	**All**	**2.7**	2.5	3.6	5.3	4.5	5.4	4.7	4.6
	Boys	**4.4**	2.9	4.2	6.0	6.2	5.4	4.7	3.8
	Girls	**2.2**	2.2	3.2	4.7	2.7	5.3	4.6	5.2
Cannabis use at age 13 or younger	**All**	**0.9**	1.3	1.5	3.2	2.8	2.7	2.1	2.1
	Boys	**1.0**	1.6	1.3	3.4	3.0	3.0	2.7	1.7
	Girls	**0.8**	1.1	1.6	3.1	2.5	2.4	1.5	2.4

Table 54
Lifetime prevalence of other drug use, 1995-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Alcohol together with pills to get high	All	**12.9**	11.7	9.0	10.7	7.6	4.7	4.2	3.3
	Boys	**10.1**	8.9	6.5	9.6	7.2	2.8	3.9	2.0
	Girls	**15.2**	14.1	11.0	11.7	8.1	6.6	4.5	4.5
Tranquillisers or sedatives without a prescription	All	**8.9**	5.1	2.5	4.7	3.5	2.9	3.1	3.6
	Boys	**7.7**	5.4	1.9	3.4	3.3	2.2	2.5	3.0
	Girls	**9.9**	4.9	3.0	5.8	3.7	3.7	3.8	4.4
Tranquillisers or sedatives with a prescription	All	.	8.5	8.3	7.0	**7.1**	**7.1**	9.0	12.4
	Boys	.	**8.7**	**7.8**	**7.1**	**7.0**	6.6	8.2	10.2
	Girls	.	**8.3**	**8.7**	**7.0**	**7.0**	7.5	9.9	14.5
Painkillers to get high	All	.	.	.	.	.	3.0	2.6	3.3
	Boys	.	.	.	.	.	1.6	2.7	2.7
	Girls	.	.	.	.	.	4.4	2.5	3.9
Anabolic steroids	All	.	**1.1**	**1.2**	**2.0**	**1.6**	**1.0**	2.1	1.2
	Boys	.	**1.6**	**1.7**	**2.9**	**2.3**	**0.9**	2.6	1.1
	Girls	.	**0.7**	**0.9**	**1.2**	**0.9**	**1.1**	1.5	1.2
Inhalants	All	**16.9**	16.0	15.3	16.4	13.9	8.3	5.3	5.2
	Boys	**17.3**	15.2	15.4	17.6	15.3	7.2	5.5	4.7
	Girls	**16.6**	16.7	15.3	15.2	12.6	9.4	5.1	5.4
Ecstasy	All	**2.1**	2.1	1.0	3.9	2.8	2.0	1.1	1.5
	Boys	**2.1**	2.8	0.7	4.5	3.5	1.5	1.3	1.2
	Girls	**1.4**	1.5	1.2	3.5	2.1	2.4	0.9	1.9
Amphetamine	All	**0.9**	**1.4**	**1.3**	**5.2**	**2.9**	**1.7**	0.8	1.0
	Boys	**1.5**	**2.1**	**1.2**	**6.3**	**3.7**	**1.5**	1.1	0.7
	Girls	**0.5**	**0.7**	**1.4**	**4.2**	**2.1**	**1.9**	0.5	1.3
Cocaine	All	**1.9**	**1.3**	**0.8**	**3.7**	**3.5**	**2.8**	2.0	1.3
	Boys	**2.5**	**1.4**	**0.9**	**3.8**	**4.8**	**2.3**	2.1	1.1
	Girls	**1.4**	**1.2**	**0.7**	**3.7**	**2.2**	**3.2**	1.8	1.5
Crack	All	**1.0**	**0.7**	**1.1**	**1.9**	**1.8**	**1.4**	1.2	0.7
	Boys	**1.8**	**0.8**	**1.3**	**2.9**	**2.3**	**1.4**	1.7	0.8
	Girls	**0.4**	**0.6**	**0.9**	**1.0**	**1.2**	**1.5**	0.7	0.4
LSD or other hallucinogens	All	**1.8**	**0.8**	**0.6**	**2.5**	**1.9**	**1.2**	1.3	1.0
	Boys	**2.3**	**0.9**	**0.7**	**2.8**	**2.6**	**1.2**	1.8	0.7
	Girls	**1.3**	**0.7**	**0.5**	**2.2**	**1.2**	**1.1**	0.8	1.2
Heroin	All	**1.0**	.	**1.3**	**1.1**	**1.3**	**0.8**	0.8	0.6
	Boys	**1.0**	.	**0.9**	**1.3**	**1.8**	**0.7**	1.0	0.5
	Girls	**0.5**	.	**1.5**	**0.8**	**0.8**	**0.9**	0.7	0.7

GHB	All	.	.	.	**0.5**	**0.8**	**0.3**	0.4	0.3
	Boys	.	.	.	**0.8**	**1.2**	**0.3**	0.5	0.3
	Girls	.	.	.	**0.3**	**0.4**	**0.4**	0.3	0.1
Magic mushrooms	All	.	.	.	**1.9**	**2.0**	**1.4**	1.3	1.3
	Boys	.	.	.	**2.3**	**2.9**	**1.8**	1.7	1.4
	Girls	.	.	.	**1.6**	**1.2**	**1.1**	0.9	1.0
Methamphetamine	All	.	.	.	.	.	1.1	0.9	0.9
	Boys	.	.	.	.	.	1.2	1.0	0.7
	Girls	.	.	.	.	.	1.0	0.7	0.9
Synthetic cannabinoids	All	.	.	.	.	.	6.9	4.0	3.6
	Boys	.	.	.	.	.	7.3	3.4	2.4
	Girls	.	.	.	.	.	6.5	4.5	4.7
New psychoactive substances (NPS)	All	.	.	.	.	.	4.0	2.9	3.2
	Boys	.	.	.	.	.	4.4	2.8	2.8
	Girls	.	.	.	.	.	3.7	3.1	3.6
Lifetime use of any illicit drug [a)]	All	**2.4**	8.4	10.4	15.2	11.6	14.7	12.5	12.3
	Boys	**3.0**	9.3	12.3	18.1	13.7	14.7	12.5	9.3
	Girls	**1.7**	7.7	8.9	12.6	9.5	14.6	12.4	15.2
Lifetime use of any illicit drug other than cannabis [b)]	All	**1.4**	3.8	3.3	8.6	6.4	5.3	3.7	3.3
	Boys	**1.9**	4.6	2.9	10.6	7.9	4.7	4.3	2.6
	Girls	**0.9**	3.0	3.6	6.9	4.8	6.0	3.1	3.9

a) Any illicit drug use is a composite measure that includes reported use of cannabis, amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine. Methamphetamines were included in this variable in 2024.

b) Any illicit drug use other than cannabis is a composite measure that includes reported use of amphetamine, cocaine, crack, ecstasy, LSD or other hallucinogens, heroin, GHB, and methamphetamine. Methamphetamines were included in this variable in 2024.

Table 55
Perceived availability of substances, 1995-2024. Percentages reporting substances would be "fairly easy" or "very easy" to obtain.

		1995	1999	2003	2007	2011	2015	2019	2024
Cigarettes	All	.	80.7	84.3	66.4	60.4	55.7	56.7	54.1
	Boys	.	79.9	83.5	67.4	62.1	54.4	56.8	52.6
	Girls	.	81.3	84.8	65.5	58.7	57.0	56.6	55.4
Any alcoholic beverage [a]	All	.	.	.	.	86.8	84.5	85.2	79.4
	Boys	.	.	.	.	86.5	82.5	82.4	76.3
	Girls	.	.	.	.	87.0	86.5	88.2	82.7
Beer	All	67.3	85.9	87.8	78.0	74.4	71.0	75.0	68.8
	Boys	70.1	86.8	88.6	81.5	77.2	70.8	74.6	68.0
	Girls	65.1	85.1	87.2	74.8	71.7	71.2	75.4	69.9
Wine	All	69.5	86.3	87.8	82.1	77.4	70.3	72.3	62.9
	Boys	69.4	86.3	87.4	82.7	76.2	67.5	67.8	58.9
	Girls	69.6	86.4	88.1	81.5	78.7	73.1	77.0	67.2
Spirits	All	57.3	76.5	77.7	73.2	68.6	59.7	60.3	56.3
	Boys	52.5	75.7	76.6	72.5	67.5	56.5	57.2	52.4
	Girls	61.1	77.2	78.5	73.8	69.7	62.9	63.4	60.5
Cider	All	.	.	.	51.6	51.6	51.9	58.7	58.0
	Boys	.	.	.	54.7	54.0	51.1	57.5	54.6
	Girls	.	.	.	48.9	49.2	52.7	60.0	61.4
Premixed drinks [b]	All	.	.	.	54.3	58.2	57.9	66.8	60.7
	Boys	.	.	.	56.2	57.9	54.6	62.0	55.1
	Girls	.	.	.	52.7	58.5	61.3	71.8	66.5
Cannabis	All	10.2	11.2	19.3	27.2	20.5	26.1	33.4	30.3
	Boys	9.4	12.0	19.8	27.6	23.4	25.8	32.3	27.4
	Girls	10.9	10.5	18.8	26.9	17.6	26.3	34.5	33.2
Tranquillisers or sedatives (general) [c]	All	17.1	21.4	23.5	26.5	16.8	17.9	.	.
	Boys	18.5	21.4	21.8	24.1	17.9	14.3	.	.
	Girls	15.3	21.5	24.8	28.6	15.7	21.3	.	.
Tranquillisers or sedatives without a prescription [c]	All	.	.	.	.	.	.	18.8	15.3
	Boys	.	.	.	.	.	.	17.4	13.9
	Girls	.	.	.	.	.	.	20.1	16.7
Ecstasy	All	7.3	13.6	13.9	21.2	14.0	13.5	15.2	11.2
	Boys	7.5	14.7	12.8	21.1	15.8	12.0	14.4	10.1
	Girls	7.1	12.6	14.8	21.2	12.1	14.9	16.1	11.9
Amphetamine	All	6.9	7.3	9.1	18.0	8.3	8.8	10.5	7.5
	Boys	7.4	8.9	8.5	17.8	10.6	7.8	10.3	7.1
	Girls	6.5	5.9	9.5	18.1	6.0	9.9	10.8	7.5

Meth-amphetamine	All	.	.	.	.	.	5.2	8.8	6.9
	Boys	.	.	.	.	.	5.3	8.6	6.3
	Girls	.	.	.	.	.	5.2	9.0	7.5
Cocaine	All	6.4	6.7	9.8	.	.	14.8	19.9	14.6
	Boys	7.2	7.0	8.4	.	.	12.0	17.6	12.1
	Girls	5.7	6.4	10.9	.	.	17.6	22.4	17.0

a) Any alcoholic beverage is a composite measure derived from individual items assessing perceived ease of access to beer, cider, premixed drinks, wine, and spirits. A student was considered to perceive alcohol as "very easy" or "fairly easy" to obtain if they responded this way to at least one beverage type.

b) In 2007, 2011, and 2015, the question referred to "alcopops". From 2019 onwards, the term was revised to "premixed drinks".

c) Prior to 2019, the question referred to "tranquillisers or sedatives" in general. From 2019 onwards, it specified "tranquillisers or sedatives without a doctor's prescription".

Table 56
Perceived risk of harm from substance use, 1995-2024. Percentages reporting a "great risk".

		1995	1999	2003	2007	2011	2015	2019	2024
Smoke cigarettes occasionally	**All**	**4.4**	**4.6**	**10.8**	**7.9**	**12.3**	**10.9**	15.2	22.2
	Boys	**5.8**	**5.5**	**11.7**	**7.5**	**10.9**	**10.5**	16.0	23.3
	Girls	**3.4**	**3.8**	**10.0**	**8.3**	**13.8**	**11.2**	14.3	20.9
Smoke one or more packs of cigarettes per day	**All**	**52.7**	**71.2**	**70.1**	**49.9**	**50.7**	**49.8**	59.2	65.8
	Boys	**47.5**	**66.2**	**65.6**	**46.4**	**44.8**	**45.7**	57.3	63.7
	Girls	**56.6**	**75.5**	**73.7**	**52.9**	**56.7**	**54.0**	61.1	68.1
Try e-cigarettes once or twice	**All**	.	.	.	.	.	.	**6.1**	7.0
	Boys	.	.	.	.	.	.	**6.4**	8.3
	Girls	.	.	.	.	.	.	**5.7**	5.4
Have one or two drinks nearly every day	**All**	**23.1**	**27.5**	**16.9**	**11.0**	**16.4**	**12.0**	17.4	25.2
	Boys	**18.9**	**22.8**	**12.9**	**7.3**	**12.6**	**9.4**	14.4	22.3
	Girls	**26.4**	**31.5**	**20.1**	**14.3**	**20.1**	**14.6**	20.4	28.5
Have five or more drinks on one occasion nearly each weekend	**All**	**39.8**	**35.6**	**29.2**	**26.3**	**26.7**	**30.4**	43.3	45.7
	Boys	**36.4**	**31.0**	**25.0**	**22.8**	**22.9**	**29.8**	39.8	44.8
	Girls	**42.4**	**39.6**	**32.5**	**29.5**	**30.4**	**31.0**	46.8	46.5
Have four or five drinks nearly every day	**All**	**63.6**	**73.0**	**59.1**	**45.9**	**51.3**	**49.8**	61.8	67.7
	Boys	**54.3**	**64.7**	**49.6**	**37.4**	**42.1**	**41.7**	56.0	63.3
	Girls	**70.9**	**80.2**	**66.7**	**53.3**	**60.4**	**57.9**	67.7	72.8
Try cannabis once or twice	**All**	**60.1**	**57.1**	**38.0**	**35.3**	**41.9**	**21.8**	19.8	13.7
	Boys	**60.6**	**58.3**	**39.2**	**32.8**	**38.9**	**20.7**	20.6	15.9
	Girls	**59.7**	**56.1**	**37.1**	**37.6**	**44.9**	**22.9**	19.0	11.4
Smoke cannabis occasionally	**All**	**60.3**	**57.6**	**34.9**	**37.9**	**47.5**	**25.6**	25.9	28.6
	Boys	**63.3**	**60.4**	**38.0**	**36.9**	**44.4**	**24.5**	27.7	30.2
	Girls	**57.9**	**55.2**	**32.3**	**38.8**	**50.6**	**26.7**	23.9	26.7
Smoke cannabis regularly	**All**	**60.9**	**89.1**	**77.2**	**72.9**	**72.0**	**60.8**	56.0	63.1
	Boys	**64.2**	**83.6**	**76.2**	**69.2**	**65.4**	**53.0**	53.3	60.9
	Girls	**58.2**	**88.2**	**78.0**	**76.2**	**78.5**	**68.7**	58.7	66.4
Try amphetamines once or twice	**All**	**63.0**	**55.9**	**31.2**	**32.4**	**42.6**	**31.0**	32.4	27.6
	Boys	**63.5**	**56.8**	**32.0**	**29.1**	**39.8**	**31.0**	33.1	29.2
	Girls	**62.7**	**55.1**	**30.8**	**35.3**	**45.5**	**31.1**	31.8	25.9
Try ecstasy once or twice	**All**	**58.6**	**63.9**	**46.7**	**38.5**	**44.2**	**32.3**	31.0	26.9
	Boys	**61.4**	**64.8**	**46.5**	**35.6**	**41.1**	**32.0**	33.8	28.1
	Girls	**56.4**	**63.0**	**46.8**	**41.0**	**47.2**	**32.7**	28.1	25.9
Try synthetic cannabinoids once or twice	**All**	.	.	.	.	.	.	**35.9**	25.1
	Boys	.	.	.	.	.	.	**39.2**	26.9
	Girls	.	.	.	.	.	.	**32.5**	23.4

Table 57
Prevalence of social media use in the past 7 days, 2019-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
On a school day	All	.	.	.	.	.	.	91.4	92.6
	Boys	.	.	.	.	.	.	88.5	89.8
	Girls	.	.	.	.	.	.	94.5	95.8
4 or more hours on a school day	All	.	.	.	.	.	.	37.9	42.2
	Boys	.	.	.	.	.	.	31.1	36.4
	Girls	.	.	.	.	.	.	44.9	48.4
On a non-school day	All	.	.	.	.	.	.	97.1	97.1
	Boys	.	.	.	.	.	.	95.9	95.9
	Girls	.	.	.	.	.	.	98.5	98.7
4 or more hours on a non-school day	All	.	.	.	.	.	.	67.5	73.4
	Boys	.	.	.	.	.	.	60.4	67.3
	Girls	.	.	.	.	.	.	74.8	80.6

Table 58
Perceptions of own social media use. 2015-2024. Percentages responding "strongly agree" or "partly agree".

		1995	1999	2003	2007	2011	2015	2019	2024
I think I spend way too much time on social media	All	.	.	.	.	.	**56.6**	**63.5**	68.2
	Boys	.	.	.	.	.	**47.5**	**54.7**	62.8
	Girls	.	.	.	.	.	**65.8**	**72.7**	74.6
I get in bad mood when I cannot spend time on social media	All	.	.	.	.	.	**38.8**	**35.5**	29.9
	Boys	.	.	.	.	.	**32.5**	**32.3**	24.9
	Girls	.	.	.	.	.	**45.1**	**38.7**	35.4
My parents say that I spend way too much time on social media	All	.	.	.	.	.	**49.0**	**49.7**	44.7
	Boys	.	.	.	.	.	**41.7**	**46.0**	40.9
	Girls	.	.	.	.	.	**56.3**	**53.6**	48.8

Table 59
Prevalence of gaming in the past 30 days, 2019-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
On a school day	All	.	.	.	.	.	.	66.1	68.9
	Boys	.	.	.	.	.	.	78.5	78.3
	Girls	.	.	.	.	.	.	53.4	58.3
4 or more hours on a school day	All	.	.	.	.	.	.	12.9	13.3
	Boys	.	.	.	.	.	.	18.5	18.8
	Girls	.	.	.	.	.	.	7.1	7.3
On a non-school day	All	.	.	.	.	.	.	78.4	81.9
	Boys	.	.	.	.	.	.	90.9	91.1
	Girls	.	.	.	.	.	.	65.6	71.7
4 or more hours on a non-school day	All	.	.	.	.	.	.	30.0	34.4
	Boys	.	.	.	.	.	.	46.0	50.7
	Girls	.	.	.	.	.	.	13.4	16.5

Table 60
Perception of own gaming on electronic devices, 2015-2024. Percentages responding "strongly agree" or "partly agree".

		1995	1999	2003	2007	2011	2015	2019	2024
I think I spend way too much time playing games	All	.	.	.	.	.	26.5	28.0	28.9
	Boys	.	.	.	.	.	40.1	38.7	40.2
	Girls	.	.	.	.	.	12.9	16.9	16.1
I get in bad mood when I cannot spend time on games	All	.	.	.	.	.	21.1	19.7	17.0
	Boys	.	.	.	.	.	32.2	28.9	22.4
	Girls	.	.	.	.	.	10.0	10.0	10.7
My parents say that I spend way too much time on gaming	All	.	.	.	.	.	26.4	27.4	24.2
	Boys	.	.	.	.	.	39.8	40.9	34.9
	Girls	.	.	.	.	.	13.0	13.4	12.1

Table 61
Prevalence of gambling in the past 12 months, 2015-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Gambling in the past 12 months [a)]	All	.	.	.	.	.	**12.7**	.	16.2
	Boys	.	.	.	.	.	**16.8**	.	18.3
	Girls	.	.	.	.	.	**8.5**	.	13.7

a) This is a constructed variable representing the percentage of students who reported gambling for money in the past 12 months, either on-site or online, on at least one of the following: slot machines, card or dice games, lotteries, sport or animal betting. In 2015, students were asked about gambling "on the internet" and "not on the internet". In 2024, the terminology was updated to "online" and "on-site (in physical places such as bars, clubs, and kažini)".

Table 62
Prevalence of on-site gambling activities in the past 12 months by gambling type, 2015-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Any on-site gambling [a)]	All	.	.	.	.	.	10.5	.	14.3
	Boys	.	.	.	.	.	14.0	.	15.7
	Girls	.	.	.	.	.	7.1	.	12.6
Slot machines (on-site)	All	.	.	.	.	.	1.9	.	3.4
	Boys	.	.	.	.	.	2.1	.	3.5
	Girls	.	.	.	.	.	1.7	.	3.1
Card or dice games (on-site)	All	.	.	.	.	.	4.5	.	5.5
	Boys	.	.	.	.	.	5.9	.	6.0
	Girls	.	.	.	.	.	3.0	.	4.7
Lotteries (on-site)	All	.	.	.	.	.	5.0	.	8.2
	Boys	.	.	.	.	.	6.3	.	7.4
	Girls	.	.	.	.	.	3.6	.	8.9
Sports or animal betting (on-site)	All	.	.	.	.	.	4.0	.	4.5
	Boys	.	.	.	.	.	7.1	.	6.5
	Girls	.	.	.	.	.	0.9	.	2.1

a) This is a constructed variable representing the percentage of students who reported gambling for money on-site in the past 12 months, on at least one of the following: slot machines, card or dice games, lotteries, sport or animal betting. In 2015, students were asked about gambling "not on the internet". In 2024, the terminology was updated to "on-site (in physical places such as bars, clubs, and każini)".

Table 63
Prevalence of online gambling activities in the past 12 months by gambling type, 2015-2024. Percentages.

		1995	1999	2003	2007	2011	2015	2019	2024
Any online gambling [a)]	All	.	.	.	.	.	8.3	.	9.1
	Boys	.	.	.	.	.	11.6	.	11.2
	Girls	.	.	.	.	.	5.0	.	6.7
Slot machines (online)	All	.	.	.	.	.	1.9	.	2.2
	Boys	.	.	.	.	.	2.4	.	2.5
	Girls	.	.	.	.	.	1.4	.	1.8
Card or dice games (online)	All	.	.	.	.	.	3.4	.	3.9
	Boys	.	.	.	.	.	4.8	.	4.9
	Girls	.	.	.	.	.	2.0	.	2.6
Lotteries (online)	All	.	.	.	.	.	3.7	.	4.1
	Boys	.	.	.	.	.	4.4	.	3.9
	Girls	.	.	.	.	.	3.0	.	4.3
Sports or animal betting (online)	All	.	.	.	.	.	3.7	.	4.0
	Boys	.	.	.	.	.	6.3	.	5.7
	Girls	.	.	.	.	.	1.1	.	1.8

a) This is a constructed variable representing the percentage of students who reported gambling for money online in the past 12 months on at least one of the following: slot machines, card or dice games, lotteries, sport or animal betting. In 2015, students were asked about gambling "on the internet". In 2024, the terminology was updated to "online".

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