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Health

Substance use and other health-related behaviours among ACT secondary students

**Results of the 2011 ACT Secondary Students'
Alcohol and Drug Survey
Number 60**

**Epidemiology Section
Health Improvement Branch
Population Health Division**

November 2013

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Executive summary

This report presents results from the ACT component of the Australian Secondary Students' Alcohol and Drug Survey (ASSAD) which collected information from 1,546 students attending government, Catholic and independent secondary schools in the ACT, in 2011. The students were aged between 12 and 17 years. This report builds on the analysis of the five previous triennial surveys.¹⁻⁸

Comparisons have been made with Australian data throughout the report for selected questions about alcohol, tobacco, and illicit substance and other drug use (see Appendix 10.1).

There were many important improvements in the health behaviours reported by students in 2011. A summary of the key findings for each section of the survey is presented below.

Alcohol use

There has been a steady decline in reported alcohol consumption among secondary students since 1999.

- ◆ 48.5% of students had consumed alcohol in the last year (a statistically significant decrease from 64.5% in 2008).
- ◆ 4.3% of students reported single-occasion risky drinking (a statistically significant decrease from 8.1% in 2008).

When compared with the national average, the ACT had lower rates of alcohol consumption in the last month (ACT: 24.4%, Australia: 29.1%), the last week (ACT: 14.0%, Australia: 17.4%) and single-occasion risky drinking (ACT: 4.3%, Australia: 6.4%).

Tobacco use

There has been a steady decline in smoking rates among secondary students since the first survey in 1996.

- ◆ 19.1% of students reported smoking at least part of a cigarette (a statistically significant decrease from 26.4% in 2008).

Rates of smoking among students in the ACT in 2011 were below the national average, with 23.3% of students reporting having ever smoked nationally (ACT: 19.1%) and 6.7% reporting to be current smokers (ACT: 5.8%).⁹

Illicit substance and other drug use

Lifetime use

There has been a steady and statistically significant decline in students reporting having used at least one illicit substance in their lifetime since 1996.

- ◆ 12.7% of students reported using an illicit drug at least once in their lifetime (a statistically significant decrease from 14.8% in 2008). This is below the national average of 15.6% and this difference is statistically significant.⁹

Use in last week

- ◆ 4.1% of students reported using an illicit drug in the last seven days (not a statistically significant change from 3.7% in 2008).

Cannabis

The most commonly used illicit substance was cannabis. There has been a consistent and statistically significant decrease in the lifetime use of cannabis since 1996.

- ◆ 11.0% of students reported that they had ever used cannabis (not a statistically significant change from 13.2% in 2008). This is below the national average of 14.8% and this difference is statistically significant.⁹
- ◆ 3.6% of students reported that they had used cannabis in the last week (not a statistically significant change from 2.7% in 2008). This is not significantly different to the national average of 3.6%.⁹

Tranquilisers

- ◆ 19.2% of students reported having ever used tranquilisers other than for medical reasons (not a statistically significant change from 19.4% in 2008). This is above the national average of 17.1% and this difference is statistically significant.⁹
- ◆ 2.3% of students reported using tranquilisers in the last week other than for medical reasons (not a statistically significant change from 2.5% in 2008). This is not significantly different to the national average of 2.2%.⁹

Inhalants

- ◆ 14.9% of students reported that they had ever used inhalants (not a statistically significant change from 17.7% in 2008). This is below the national average of 17.3% and this difference is statistically significant.⁹
- ◆ 3.9% of students reported using inhalants in the last week (not a statistically significant change from 3.6% in 2008). This is not significantly different to the national average 4.4%.⁹

Painkillers

- ◆ 96.5% of students reported having used painkillers during their lifetime (not a statistically significant change from 96.1% in 2008). This is not significantly different to the national average of 96.2%.⁹
- ◆ 38.0% reported that they had used painkillers in the last week (not a statistically significant change from 42.6% in 2008). This is not significantly different to the national average of 39.0%.⁹

Sun protection

- ◆ 74.9% of students reported getting sunburnt at least once over the previous summer (not a statistically significant change from 73.8% in 2008).
- ◆ 45.2% of students wore SPF 30+ sunscreen when outside for an hour or more on a sunny day in summer between 11am and 3pm, 31.2% wore sunglasses and 31.0% stayed mainly in the shade.

Weight, nutrition and physical activity

Self-reported height and weight

Of the 1,546 respondents about half reported on weight and height:

- ◆ 12.7% were underweight (a statistically significant increase from 7.4% in 2008), 71.5% were in the normal weight category (not a statistically significant change from 73.3% in 2008), 12.4% were overweight (a statistically significant decrease from 16.7% in 2008) and 3.3% were in the obese range (not a statistically significant change from 2.6% in 2008).

Nutrition

Data was analysed according to the 2003 National Health and Medical Research Council (NHMRC) Dietary Guidelines.¹⁰

- ◆ 44.8% of students met the guideline of at least three serves of fruit (not a statistically significant change from 41.7% in 2008).
- ◆ 28.2% of students met the guideline of at least four serves of vegetables a day (a statistically significant increase from 22.3% in 2008).

Physical activity, screen time and homework

Data was analysed according to Department of Health and Ageing¹¹ recommendations.

- ◆ 12.8% of students reported doing at least 60 minutes of vigorous or moderate physical activity each day in the last week thereby meeting the recommendation (a statistically significant decrease from 15.6% in 2008).
- ◆ 26.3% of students spent two hours or less on an average school day on the internet, playing computer games, or watching TV or videos (not a statistically significant change from 25.0% in 2008).

Policy and program implications

Despite improvements in a number of health-related behaviours among ACT secondary school students there is still room to further improve their risk profile. Furthermore there are a number of specific unfavourable findings evident in this report. These concern the use of inhalants, tranquilisers and sun protection as well as associated factors with student's weight status. These issues highlight a need for further research and targeted policy and program development in the ACT.

◆ Inhalant use

Younger students were more likely to report having ever used inhalants (16.5%) in their lifetime compared to older students (11.5%). While the proportion is concerning in itself it is puzzling as to why this risk behaviour is more prevalent in younger students when use of other substances is higher among older students. Whilst there is a decreasing trend over time, this issue does warrant attention. This therefore requires further research.

◆ Tranquiliser use

Lifetime tranquiliser use among students in the ACT (19.2%) was significantly above the national average (17.1%) as it was in 2008 and represents the most prevalent substance misuse among students. This misuse of a non-illicit substance appears to be an emerging problem in the context of general decreases in illicit drug use among secondary students in the ACT and therefore may warrant a targeted approach in policy and program development.

◆ Sun protection

Despite fewer students reporting a preference for a suntan, there has been a steady decrease in sun protection behaviours since 1996 indicating a need for targeted interventions.

◆ BMI

There was a significant increase in the number of students who reported being underweight in the 2011 survey compared to the 2008 survey. This requires future monitoring and research to ensure that eating disorders are not increasing among secondary students.

Also of interest are students' perceptions of their own weights—28.8% of males and 51.9% of females who were underweight perceived themselves to be about the right weight and 37.9% of males and 11.3% of females who were in the overweight/obese category perceived that they were about the right weight.

BMI status appears to be independent of physical activity. In addition, poor nutrition is no more prevalent in overweight students than it is in normal weight students. This may indicate that other factors such as quantity and portion size are important contributors to weight gain among students. These factors should be considered in program and planning development.

Results also indicate that BMI status is independent of income despite alcohol, tobacco and drug use all increasing with increased income. This lends support to non-targeted approaches to addressing obesity.

1. Introduction

In 2011, ACT Health conducted the ACT component of the Australian Secondary Students' Alcohol and Drug Survey (ASSAD) of students in years 7 to 12 in the ACT. The students were aged between 12 and 17 years and 56 identified as being Aboriginal and/or Torres Strait Islander.

An external market research company, McNair Ingenuity Research, was commissioned to administer this survey in schools. The survey was based on a self-report written questionnaire that students completed in a classroom environment.

Similar surveys were conducted in the ACT in 1996, 1999, 2002, 2005 and 2008. Many of the questions about alcohol, tobacco, use of other substances and sun protection included in these earlier surveys were similar to questions in the 2011 survey, allowing for analysis of trends over time. However, surveys prior to 2005 either did not include questions, or they included different questions, about nutrition, physical activity and height and weight. Therefore analysis of healthy weight-related behaviours is only reported for 2005, 2008 and 2011.

According to data from the Australian Bureau of Statistics (ABS) there were 28,609 students aged between 12 and 17 years in the ACT in 2011.¹² Table 19 in Appendix 10.3 shows the breakdown of student numbers by education sector, sex and age and Table 20 the corresponding table for Aboriginal and Torres Strait Islander students.

2. Methods

2.1. Sampling

Sampling was based on a stratified two-stage probability sample. The first stage drew from a random selection of schools within the ACT with proportional representation of the three school sectors—government, Catholic and independent. Sampling was done separately for lower secondary schools (years 7–10) and upper secondary schools (years 11–12). Where a school declined to participate, a school from the same sector was approached as a replacement.

The total response rate for ACT schools was 60% (57% for government schools, 100% for Catholic schools and 56% for independent schools).

The second stage of sampling involved the random selection of students to participate. Letters were sent to parents of the selected students to inform them of the study. Parents were able to exclude their child from the survey by returning a form to the school.

The original sample size was 1,701. After removal of 24 students because of large numbers of invalid responses, 1,677 remained. Of these, 1,546 were aged between 12 and 17 years. Fifty-six students identified as being Aboriginal and/or Torres Strait Islander. See Appendix 10.2 for a breakdown of the number of full-time students surveyed by education sector, sex and age.

2.2. Questionnaire

Students from all states and territories answered core questions about alcohol use, tobacco use, and illicit substance and other drug use. In the ACT, questions were also asked about sun protection, weight and nutrition.

An external market research company, McNair Ingenuity Research, was commissioned to administer this survey in schools. The survey was based on a self-report written questionnaire that students completed in a classroom environment.

A copy of the questionnaire can be found at Appendix 10.6.

2.3. Coding, data entry and cleaning

Coding, data entry and cleaning were managed by the Centre for Behavioural Research in Cancer at Cancer Council Victoria with the assistance of a commercial market research firm. Students with a large amount of missing data or highly exaggerated responses were removed from the dataset before being provided to the Epidemiology Section, ACT Health where it was merged with data from previous surveys for analysis.

2.4. Reliability of the estimates

Where responses to the survey had small numbers, the relative standard error (RSE) (see Glossary) was calculated. Estimates with a RSE between 25% and 50% should be interpreted with caution and have been indicated with a single asterisk (*). Estimates with a RSE above 50% are considered unreliable and have not been included in the report. In tables and figures where other estimates are reliable, estimates with a RSE above 50% have not been included, but are indicated by a double asterisk (**).

2.5. Data analysis

Only data for students aged 12 to 17 were analysed.

Data were weighted to reflect the actual population size of 12 to 17 year olds in the ACT¹³ based on education sector (government or non-government), sex and age. All estimates provided in the report are based on weighted data.

Chi-square statistics were calculated, using unweighted data, to determine the association between categorical variables. If the p-value was less than 0.05 the null hypothesis was rejected and the

association was deemed to be statistically significant. Logistic regression was used to determine whether specific behaviours had changed over time.

Statistical analyses were undertaken using SPSS (PASW Statistics 18) and Microsoft Office Excel 2007.

Missing values were not included in the analyses.

2.6. Comparisons with Australian data

Comparisons have been made with Australian data throughout the report for selected questions about alcohol use, tobacco use, and illicit substance and other drug use. These were the core questions answered by students from each state and territory. See Appendix 10.1 for a summary of the comparisons.

3. Alcohol use

The National Health and Medical Research Council (NHMRC)¹⁴ recommends that:

- ◆ For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.
- ◆ For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.
- ◆ Children under 15 years of age are at the greatest risk of harm from drinking and for this age group, not drinking alcohol is especially important.
- ◆ For young people aged 15–17 years, the safest option is to delay the initiation of drinking for as long as possible.

It is therefore important to note that **any** drinking by 12–17 year olds is considered risky drinking. For the purposes of analysing drinking behaviours, the following key definitions are used based on the NHMRC guidance for adults.

Key definitions

Never used:	Students who reported never consuming even part of an alcoholic drink.
Ever used:	Students who reported having ever consumed even part of an alcoholic drink.
Past week/current drinkers:	Students who reported consuming alcohol on at least one day in the last seven days before the survey.
Past month:	Students who reported consuming alcohol in the last four weeks.
Past year:	Students who reported consuming alcohol in the last twelve months.
Single-occasion risky drinkers:	Students who reported consuming more than four alcoholic drinks on at least one day in the last seven days before the survey.

3.1. Prevalence of alcohol consumption

Students were asked whether they had ever had even part of an alcoholic drink and whether they had had an alcoholic drink in the last twelve months, the last four weeks and the last seven days.

Since 1999 there has been a steady decline in reported alcohol consumption amongst secondary students. This decline was marked in 2008 and there was another statistically significant decrease in 2011.

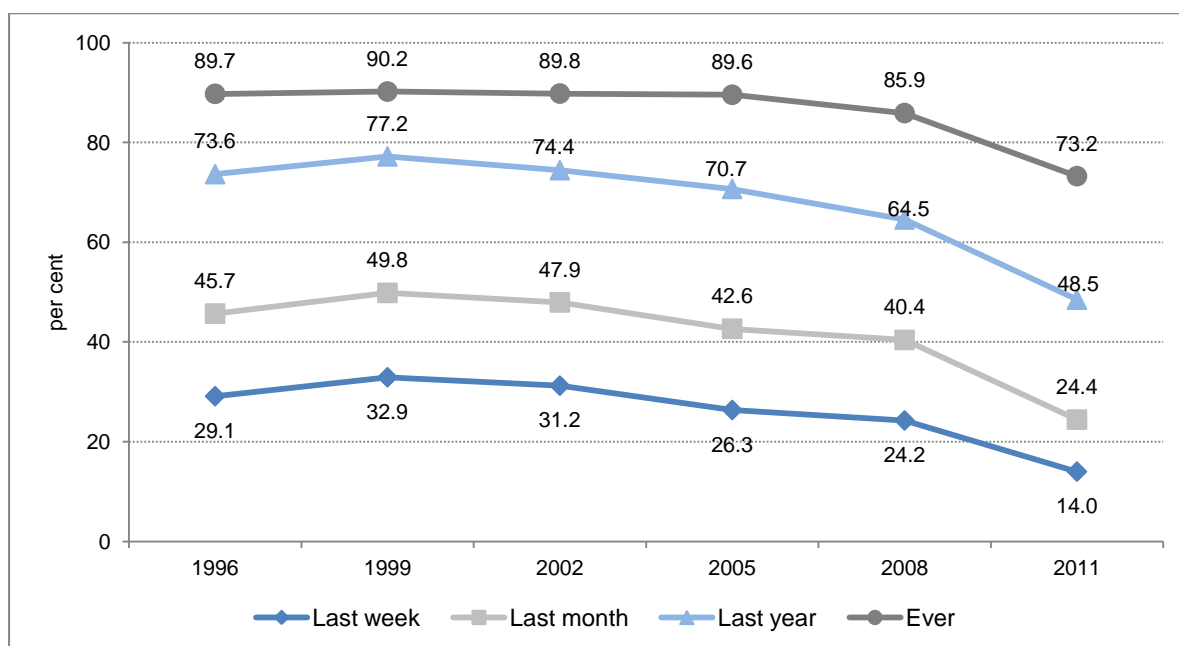
In 2011, 73.2% of students surveyed reported that they had consumed at least a few sips of alcohol in their lifetime (Figure 1). This is a statistically significant reduction from 85.9% in 2008.

There was a statistically significant decrease in the number of students consuming alcohol in the last seven days (current drinkers) from 24.2% in 2008 to 14.0% in 2011.

Similarly there were statistically significant decreases in the number of students consuming alcohol in the last four weeks from 40.4% in 2008 to 24.4% in 2011 and in the last year from 64.5% in 2008 to 48.5% in 2011.

When compared with the national average, the ACT had lower rates of consumption of alcohol in the last month (ACT: 24.4%, Australia: 29.1%) and in the last week (ACT: 14.0%, Australia: 17.4%). These differences were statistically significant. There were no significant differences for lifetime consumption of alcohol (ACT: 73.2%, Australia: 74.0%) or consumption in the last year (ACT: 48.5%, Australia: 50.7%).⁹

Figure 1: Alcohol consumption, lifetime & current use, % of students, ACT, 1996-2011



Source: ASSAD confidentialised unit record files 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

The results from 2011 suggest that the differences in alcohol consumption patterns between the sexes were not statistically significant other than for alcohol consumed in the last year (Table 1), but the differences between younger and older students were significant with older students consistently drinking at higher levels than younger students.

Table 1: Alcohol consumption, lifetime & current use, % of students by sex & age group, ACT, 2011

Consumed alcohol	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
Ever	73.1	73.3	73.2	66.9	86.3 [#]
In last week	15.9	12.0	14.0	9.4	23.5 [#]
In last month	26.4	29.5	28.0	17.3	42.3 [#]
In last year	50.1	56.1 [†]	53.4	39.2	72.3 [#]

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: # Denotes a statistically significant difference between age groups.

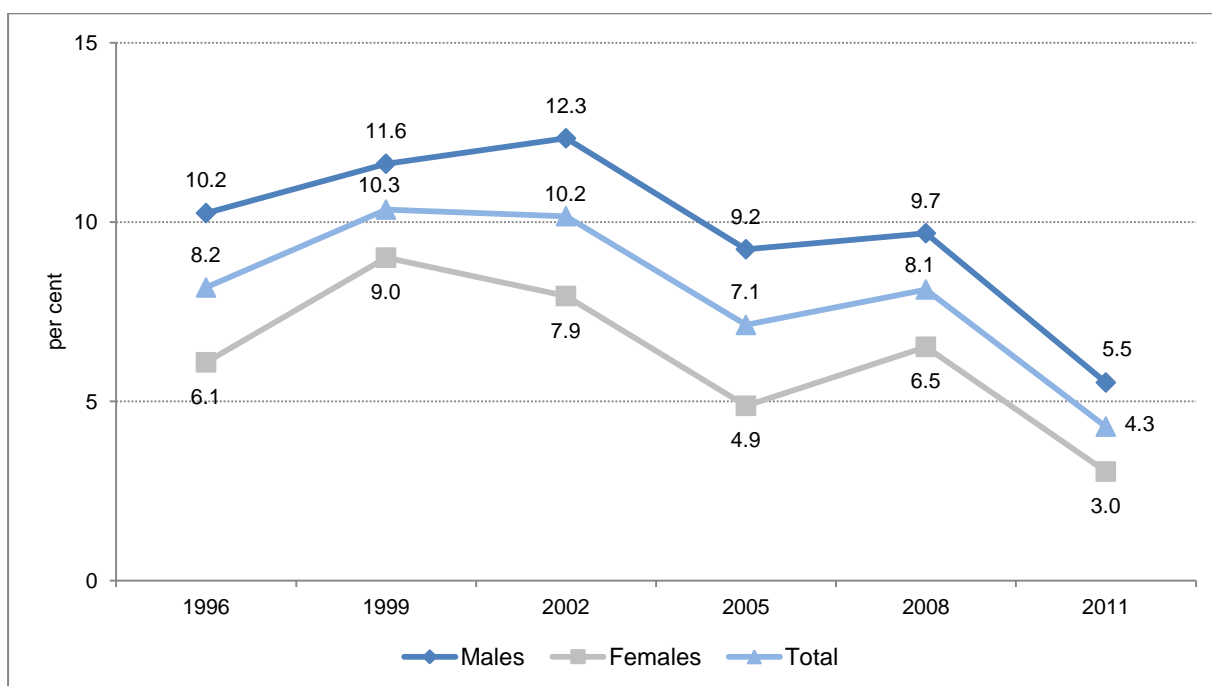
† Denotes a statistically significant difference between the sexes.

3.2. Single-occasion risky drinking

There was a statistically significant decrease in the number of students reporting single-occasion risky drinking (consuming more than four drinks on any one occasion) in the week preceding the survey from 8.1% in 2008 to 4.3% in 2011. Differences between males (5.5%) and females (3.0%) reporting single-occasion risky drinking were not statistically significant (Figure 2). Older students (9.5%) were significantly more likely than younger students (1.8%) to report single-occasion risky drinking (Figure 3).

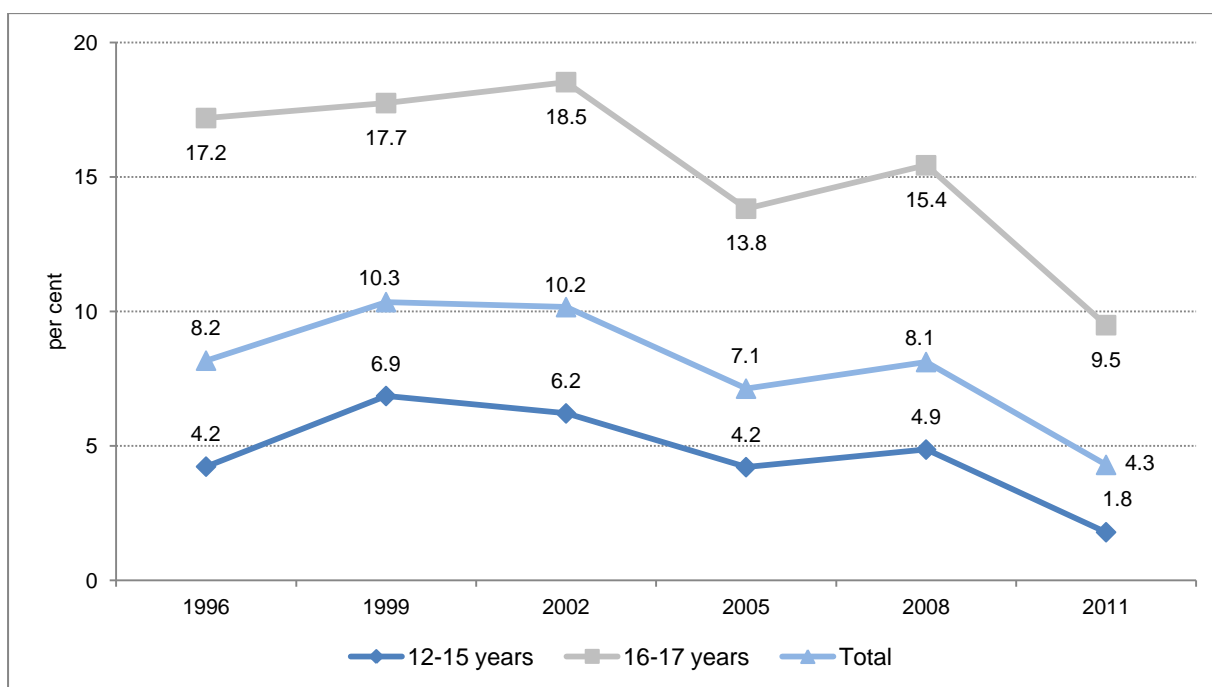
Single-occasion risky drinking rates in the ACT (4.3%) were below the national average of 6.4% for all students and this difference was statistically significant.⁹

Figure 2: Single-occasion risky drinking, % of students by sex, ACT, 1996-2011



Source: ASSAD confidentialised unit record files 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

Figure 3: Single-occasion risky drinking, % of students by age group, ACT, 1996-2011



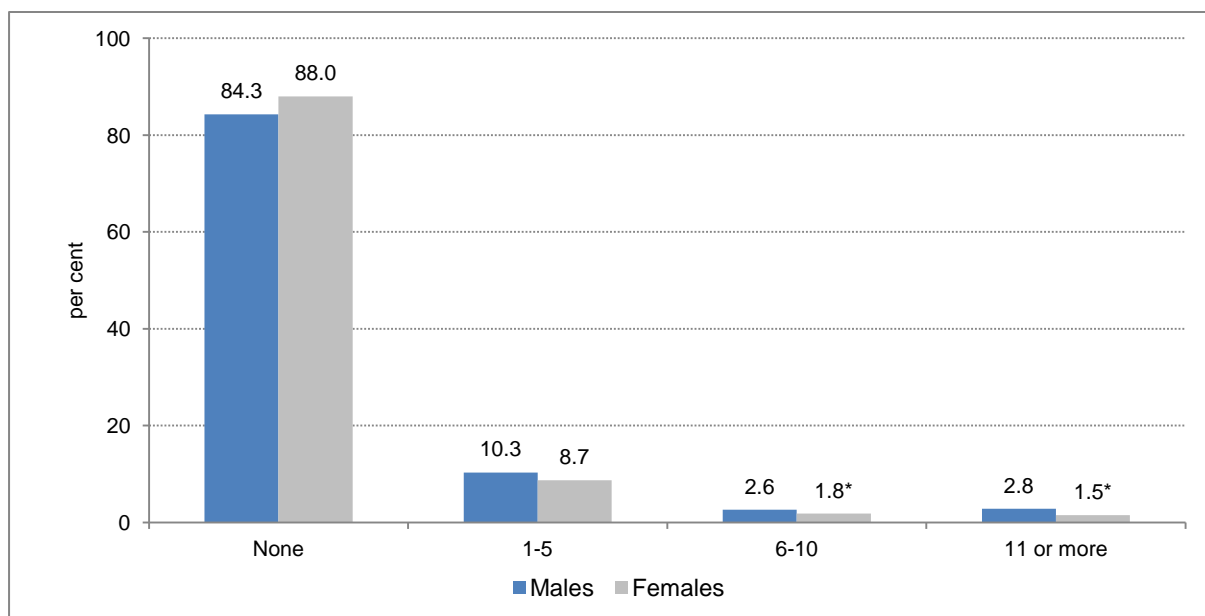
Source: ASSAD confidentialised unit record files 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

3.3. Quantity and type of alcohol consumed

Students were asked how many alcoholic drinks they had consumed in the last seven days; the difference between males and females (Figure 4) was not statistically significant.

The difference between age groups however, was statistically significant, with older students consistently drinking more than younger students (Figure 5).

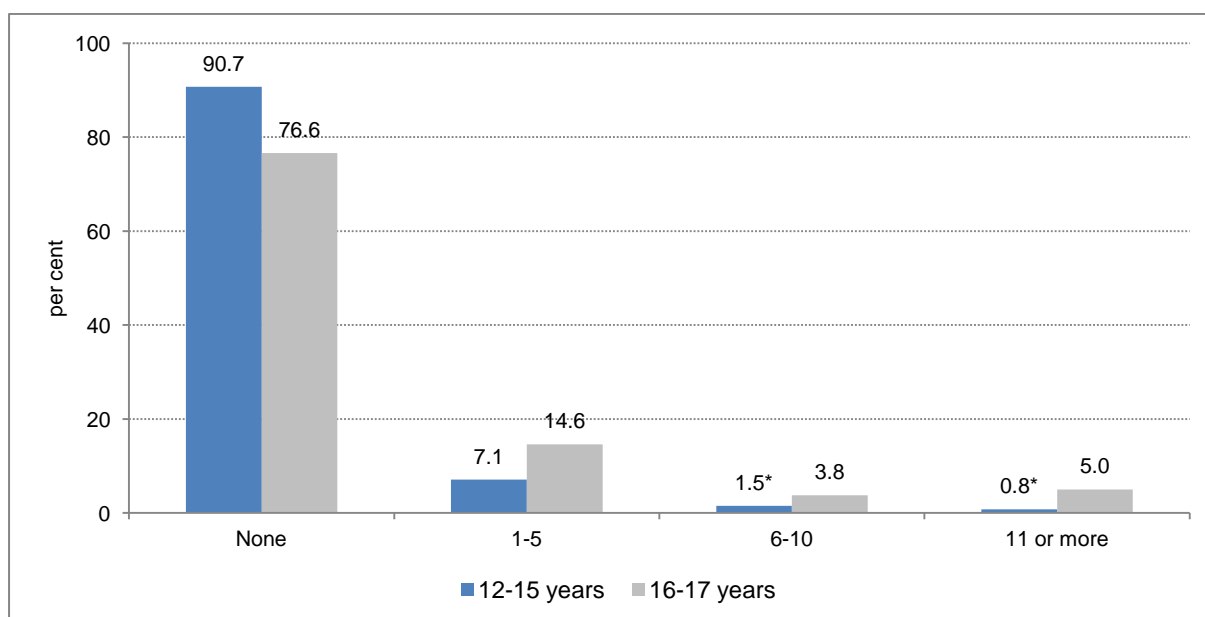
Figure 4: Total number of drinks consumed in last 7 days, % of students by sex, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Figure 5: Total number of drinks consumed in last 7 days, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Students who had ever had an alcoholic drink were asked about their preferred alcoholic drink, with some students giving multiple responses. The majority of males who had ever consumed alcohol expressed a preference for beer, followed by spirits and then pre-mixed drinks. The majority of females expressed a preference for pre-mixed spirits followed by spirits then wine.

Younger students preferred spirits, followed by beer and then pre-mixed spirits, while older students expressed a preference for pre-mixed spirits, followed by beer and then spirits (Table 2).

In April 2008 the Australian Government introduced a tax on premixed alcoholic drinks (alcopops) to bring the tax rate of their alcohol content in line with that of spirits. This was a strategy to reduce the consumption of alcohol among young people. While rates of alcohol consumption amongst secondary students in the ACT have decreased significantly since the introduction of the tax, alcoholic drink preferences have not changed.

Table 2: Alcoholic drink preferences, % of students by sex & age group, ACT, 2011

Preferred drink	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
Ordinary beer	41.6	12.5	27.0	25.2	29.1
Spirits	28.4	26.2	27.3	27.2	27.5
Premixed spirits	23.1	37.6	30.4	21.5	40.6
Wine	18.2	17.3	17.8	18.2	17.3
Low alcohol beer	16.2	6.3	11.2	12.5	9.7
Alcoholic sodas	8.6	7.5	8.0	7.3	8.9
Champagne or sparkling wine	7.4	10.7	9.1	9.8	8.3
Alcoholic cider	7.2	8.4	7.8	8.0	7.6
Liqueurs	5.7	8.0	6.9	6.6	7.2
Wine cooler	3.9	2.5	3.2	3.6	2.8
Other	2.8	5.4	4.2	6.2	1.6*

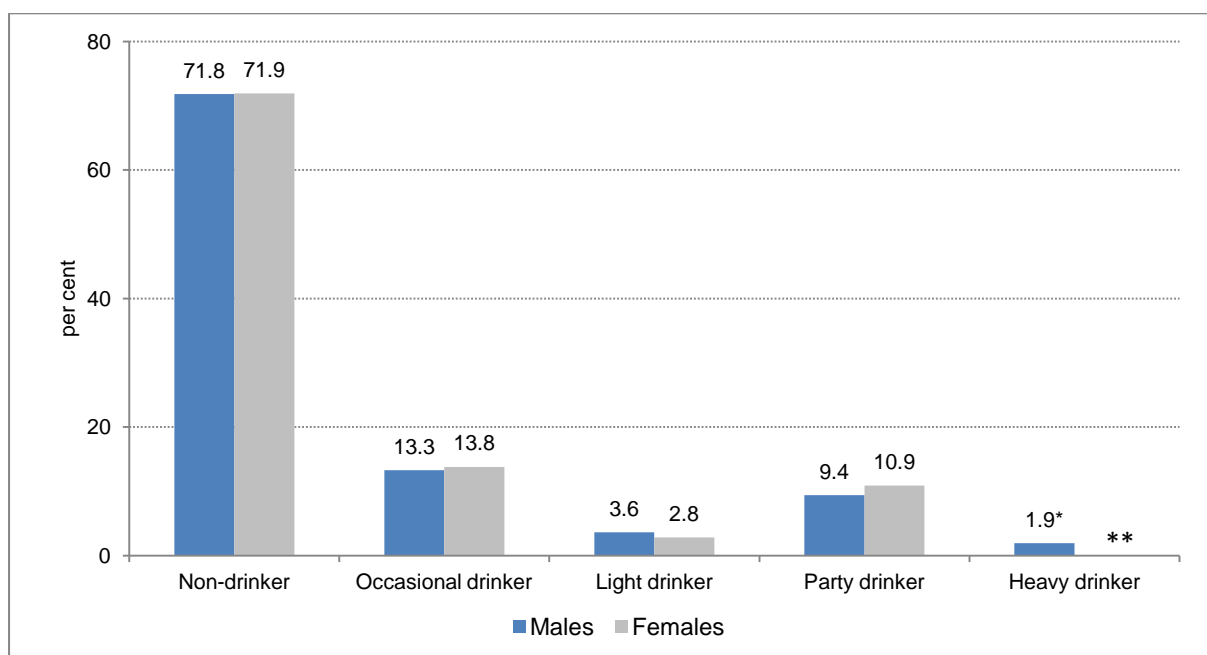
Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.
Totals add up to more than 100% because some students gave multiple responses.

3.4. Self-perceptions of alcohol use

Students were asked whether they considered themselves a non-drinker, an occasional drinker, a light drinker, a party drinker or a heavy drinker. Responses for males and females were similar (though the differences were statistically significant) (Figure 6).

Figure 6: Self-perceptions of alcohol use, % of students by sex, ACT, 2011



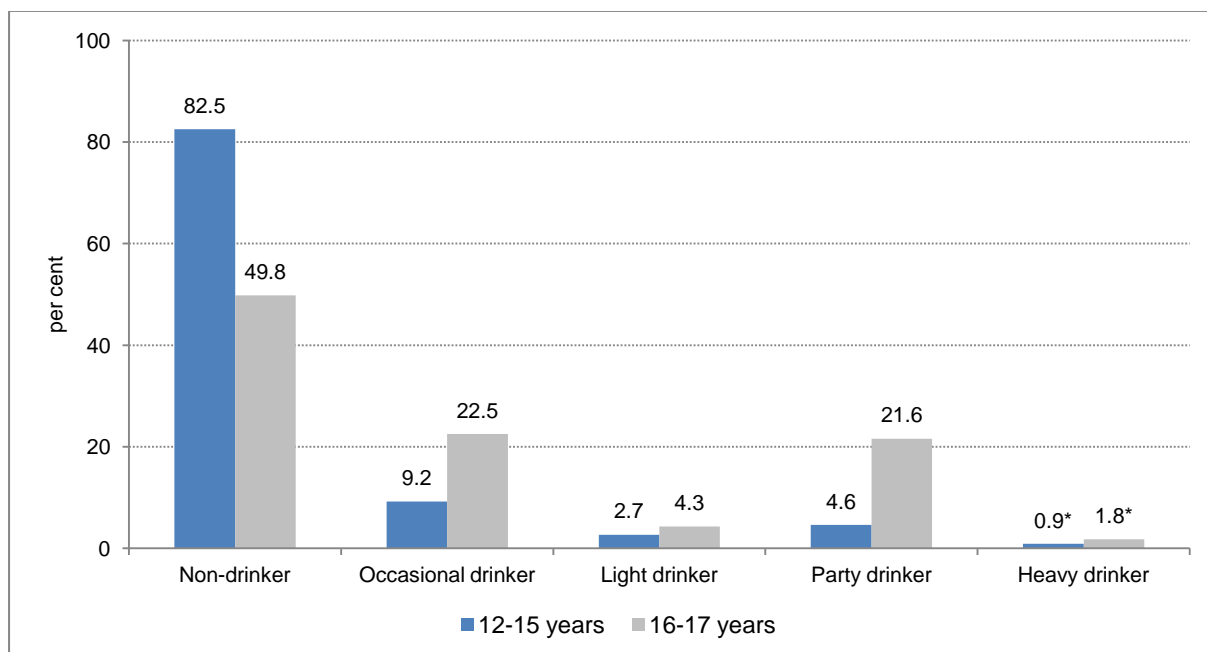
Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Younger students (82.5%) were more likely to be non-drinkers than older students (49.8%) (Figure 7). Older students were more likely to be occasional drinkers, light drinkers, party drinkers or heavy drinkers and the difference between age groups was statistically significant.

Figure 7: Self-perceptions of alcohol use, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

3.5. Purchase of alcohol and places consumed

Students were asked where, or from whom, they obtained their last alcoholic drink with some students giving multiple responses. Of those students who had ever had an alcoholic drink, 9.6% of males and 3.7% of females bought it themselves, and 3.3% of younger students bought their last drink compared with 10.4% of older students. For students who did not buy their last alcoholic drink, the most common source for both sexes and age groups was their parent(s), followed by friends and then someone else buying it for them (Table 3).

Table 3: Source of last alcoholic drink, % of students by sex & age group, ACT, 2011

Source of last alcoholic drink	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
I bought it	9.6	3.7	6.7	3.3	10.4
I didn't buy it...					
My parent(s) gave it to me	40.6	38.7	39.6	44.6	33.7
Friends gave it to me	26.7	25.1	25.9	21.1	31.6
I got someone to buy it for me	13.7	13.2	13.5	9.8	17.9
My brother or sister gave it to me	7.4	7.5	7.4	7.1	7.9
I took it from home without my parent(s) permission	5.3	3.8	4.5	6.3	2.5*
Other relative	3.1	4.1	3.6	4.8	2.2*
Other	7.0	8.6	7.7	10.8	4.2

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: Totals add up to more than 100% because some students gave multiple responses.

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Of those students reporting that someone else bought their alcohol, 68% reported that it was a friend aged 18 years or over and 13.9% reported that it was a relative aged 18 years or over.

Students also gave multiple responses when asked where they consumed their last alcoholic drink. Of those students who had ever had a drink, the most common place for their last drink was 'At home' for both sexes and age groups (Table 4). This was followed by 'At a party' and then by 'At a friend's home'.

Table 4: Place of last alcoholic drink, % of students by sex & age group, ACT, 2011

Place of last alcoholic drink	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
Home	37.6	39.4	38.5	44.5	31.4
Party	30.2	24.5	27.3	20.6	35.2
Friend's home	14.9	17.1	16.1	13.5	19.1
Beach, park or recreation area	5.7	3.1	4.4	4.3	4.5
Hotel, pub, bar, tavern or RSL club	2.8*	**	1.6	1.3*	2.0*
Car	2.3*	1.4*	1.9	2.0*	1.7*
Restaurant	1.6*	4.3	3.0	3.0	2.9
Other adult's/relative's home	1.5*	2.4*	1.9	2.6	1.1*
Dance venue/dance party/music festival	1.3*	2.4*	1.9	2.4*	1.3*
Other	9.7	11.7	10.8	15.1	5.6

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: Totals add up to more than 100% because some students gave multiple responses.

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

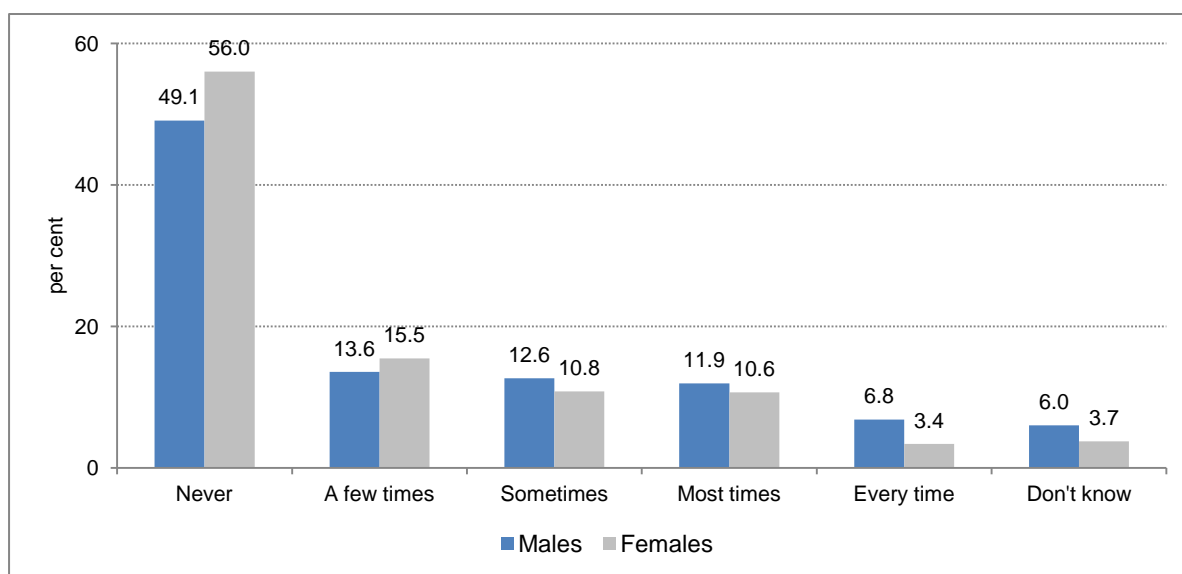
** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

About three-quarters of students (72.6%) who had ever consumed alcohol reported that there was an adult supervising them when they consumed their last alcoholic drink. Females (77.7%) were significantly more likely than males (67.3%) to report that there was an adult supervising. The difference between younger students (73.8%) and older students (71.2%) was not statistically significant.

3.6. Intention to get drunk and experiences after using alcohol

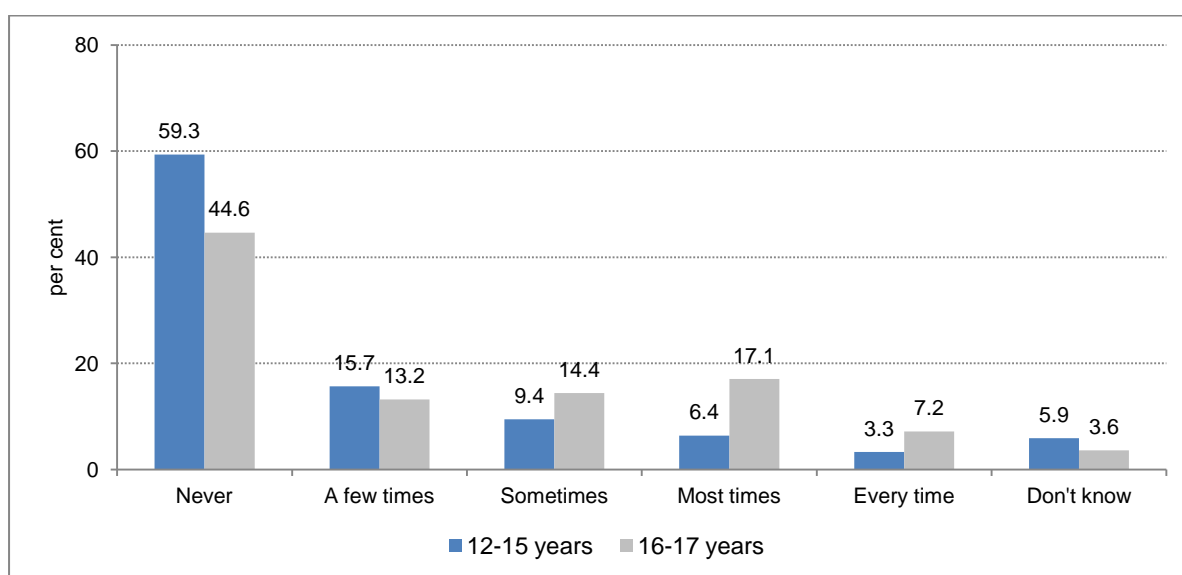
Students were also asked how often on an occasion that they drank alcohol did they intend to get drunk. About half of all students who had ever had an alcoholic drink reported that they never intended to get drunk. The difference between males (49.1%) and females (56.0%) was not statistically significant (Figure 8). However, younger students (59.3%) were significantly more likely than older students (44.6%) to report that they never intended to get drunk (Figure 9).

Figure 8: Intention to get drunk, % of students by sex, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Figure 9: Intention to get drunk, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health.

Students were also asked about their negative experiences after drinking alcohol in the last 12 months with some students giving multiple responses (Table 5). The majority of students reported no negative experiences. The most common negative experience for both sexes and age groups was vomiting (16.9% of males, 19.5% of females; 13.2% of younger students and 24.1% of older students).

Table 5: Experiences after drinking alcohol in last 12 months, % of students by sex & age group, ACT, 2011

Experience after drinking alcohol	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
Been sick (vomited)	16.9	19.5	18.3	13.2	24.1
Had an argument	14.9	11.2	13.0	9.1	17.5
Attended work or school	12.7	16.3	14.5	12.3	17.2
Verbally abused someone	11.2	6.5	8.8	6.0	12.0
Created a public disturbance or nuisance	11.0	5.5	8.2	6.4	10.2
Hit someone or had a fight	10.1	4.3	7.1	6.2	8.1
Caused damage to property	9.8	3.4	6.5	4.5	8.9
Physically threatened someone	8.1	2.0*	5.0	3.0	7.3
Tried any drugs	7.6	4.2	5.9	3.1	9.1
Stole something	7.5	1.8*	4.5	3.0	6.3
Been in trouble with the police	5.6	3.2	4.4	3.7	5.2
Driven a motor vehicle	5.3	2.5	3.9	2.8	5.0
Missed school	5.2	4.9	5.1	5.8	4.2
Been taken home by police	3.0	1.6*	2.2	2.1*	2.4*
Had an injury that needed to be seen by a doctor	1.5*	1.1*	1.3*	1.4*	1.1*
Other	3.4	2.9	4.4	2.7	3.6
None of the above	61.3	63.2	62.3	68.7	54.8

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: Totals add up to more than 100% because some students gave multiple responses.

* Estimate has a relative standard error of 25% to 50% and should be interpreted with caution.

3.7. Alcohol use amongst Aboriginal and Torres Strait Islander students

Although there were some differences in alcohol use between students who were Aboriginal and Torres Strait Islander and those who were not, these differences were mostly not statistically significant (Table 6). The exception was alcohol consumption within the last month; Aboriginal and Torres Strait Islander students were more likely to have consumed alcohol within the last month (42.0%) than non-Aboriginal and Torres Strait Islander students (23.9%). However, the relative standard error of this estimate is between 25% and 50% and should be interpreted with caution.

Table 6: Alcohol consumption, lifetime & current use, % of students by Aboriginal & Torres Strait Islander status, ACT, 2011

Consumed alcohol	Aboriginal & Torres Strait Islanders	Non-Aboriginal & Torres Strait Islanders
Ever	72.8	73.7
In last week	23.5*	13.7
In last month	42.0	23.9 [#]
In last year	58.2	48.3

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: # Denotes a statistically significant difference between Aboriginal & Torres Strait Islanders and non-Aboriginal & Torres Strait Islanders.

* Estimate has a relative standard error of 25% to 50% and should be interpreted with caution.

3.8. Alcohol consumption and student income

Alcohol consumption in the last week and last month were significantly dependent on income for the students surveyed in 2011 controlling for students' age.

3.9. Education in class about alcohol

In the 2011 survey, 87.7% of all students recalled having received at least part of a lesson about drinking alcohol during 2010 (not a statistically significant change from 90.0% in the previous survey). There was no difference between responses for males and females and the difference between younger students (88.3%) and older students (86.6%) was not statistically significant.

4. Tobacco use

Key definitions

- Ever smoked:** Students who reported having ever smoked even part of a cigarette.
- Current smoker:** Students who reported smoking cigarettes on at least one day in the last seven days before the survey.
- Daily smoker:** Students who reported smoking cigarettes every day in the last seven days before the survey.

4.1. Prevalence of tobacco use

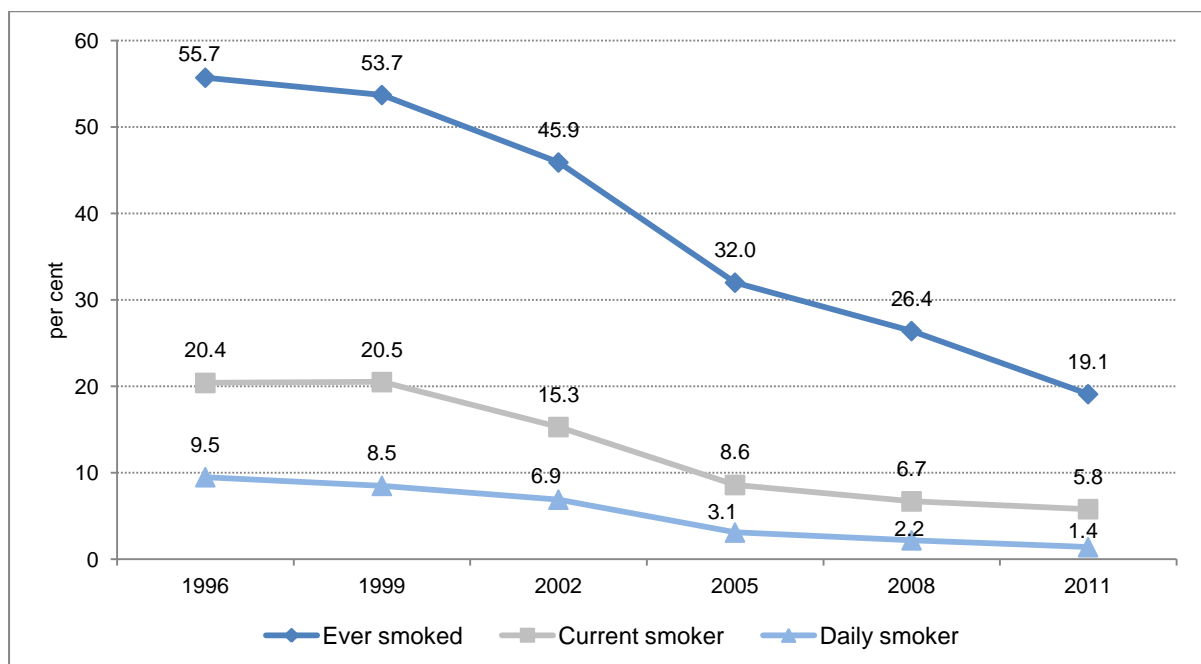
In 2011, 19.1% of all students surveyed reported having smoked at least once in their lifetime (Figure 10). This is a statistically significant decrease from 26.4% in 2008.

The survey results indicate that 5.8% of students reported smoking cigarettes on at least one day in the seven days before the survey (current smokers), and 1.4% reported smoking cigarettes every day in the last seven days (daily smokers).

Although there have been continual decreases in current and daily smoking since 1996, the decreases from 2008 to 2011 were not statistically significant.

The rate of lifetime smoking among students in the ACT in 2011 (19.1%) was below the national average (23.3%) and this difference was statistically significant. The rate of current smoking among students in the ACT (5.8%) was similar to the national average (6.7%).⁹

Figure 10: Smoking status, % of students, ACT, 1996–2011

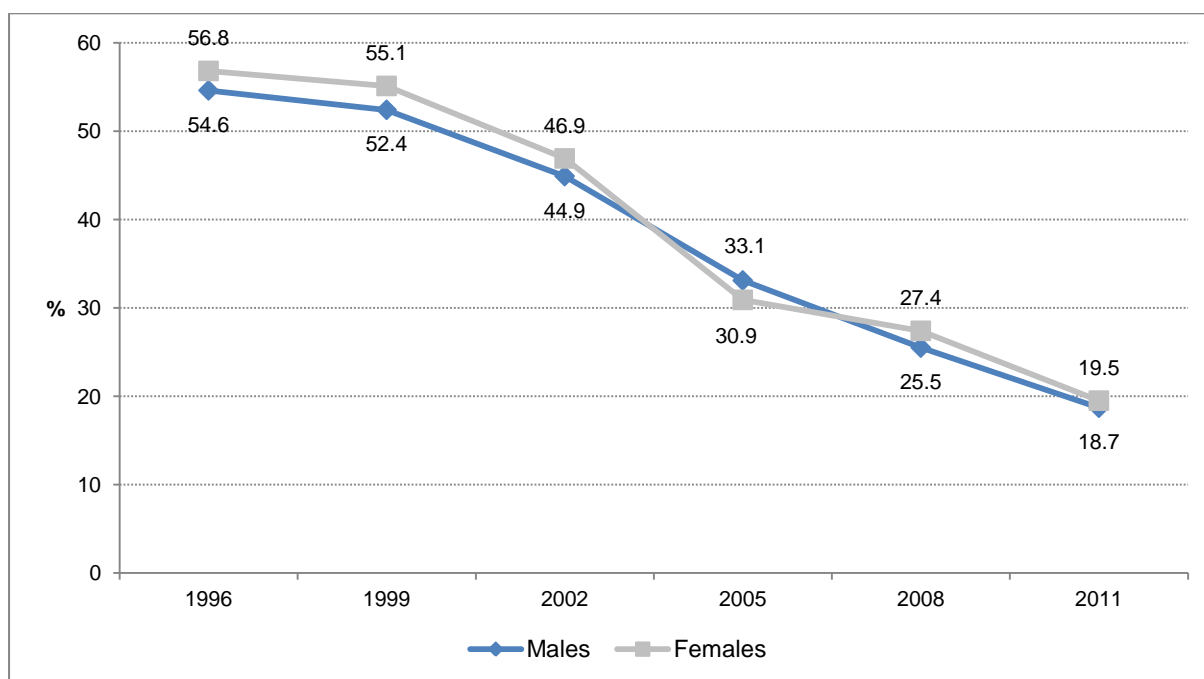


Source: ASSAD confidentialised unit record files 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

Note: Estimates for rates of daily smoking have changed slightly from previous reports due to coding changes.

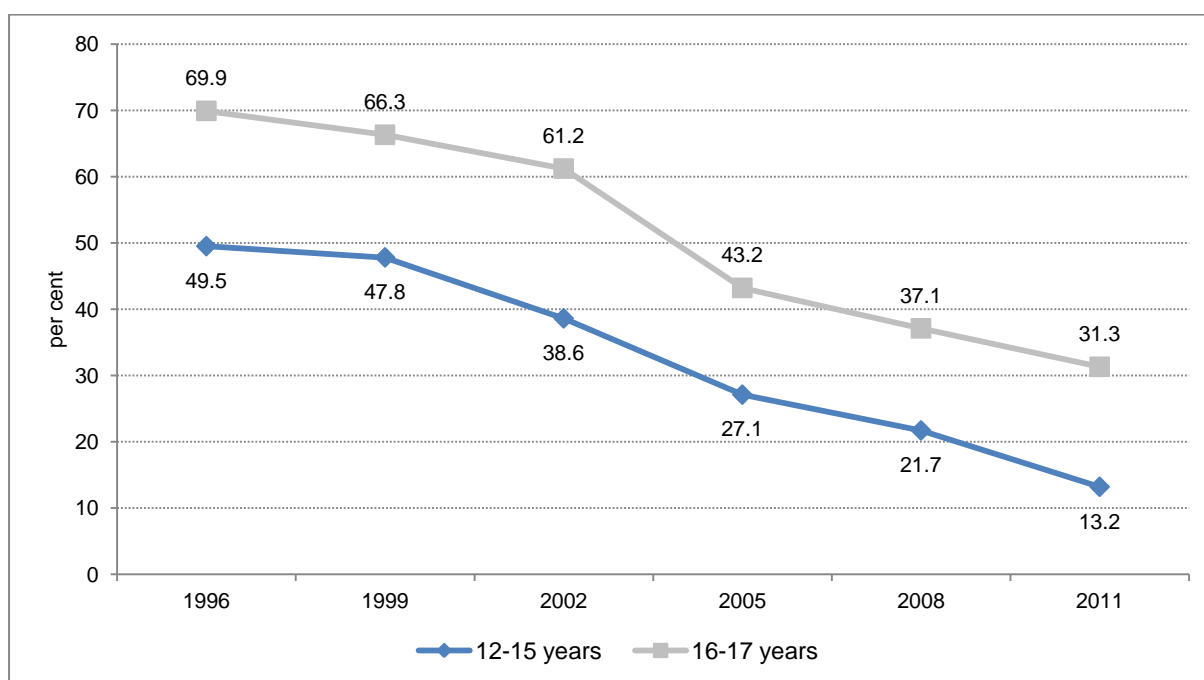
Rates for students having ever smoked are similar between the sexes (Figure 11). In 2011, older students were significantly more likely than younger students to report having ever smoked (Figure 12).

Figure 11: Ever smoked, % of students by sex, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

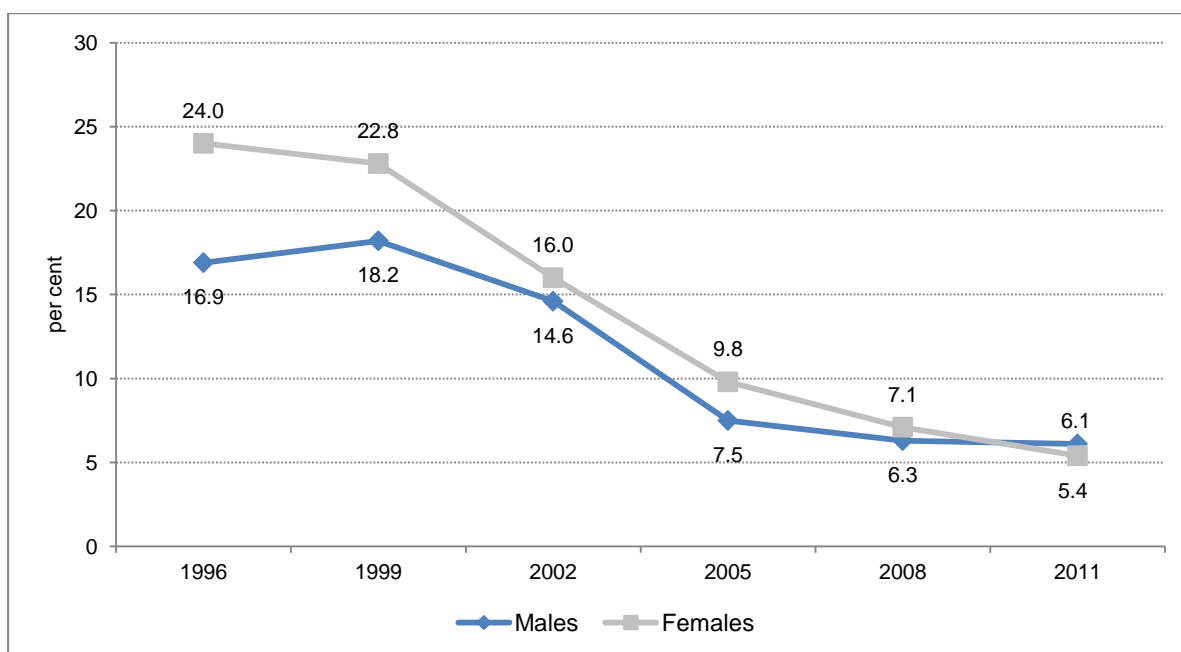
Figure 12: Ever smoked, % of students by age group, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

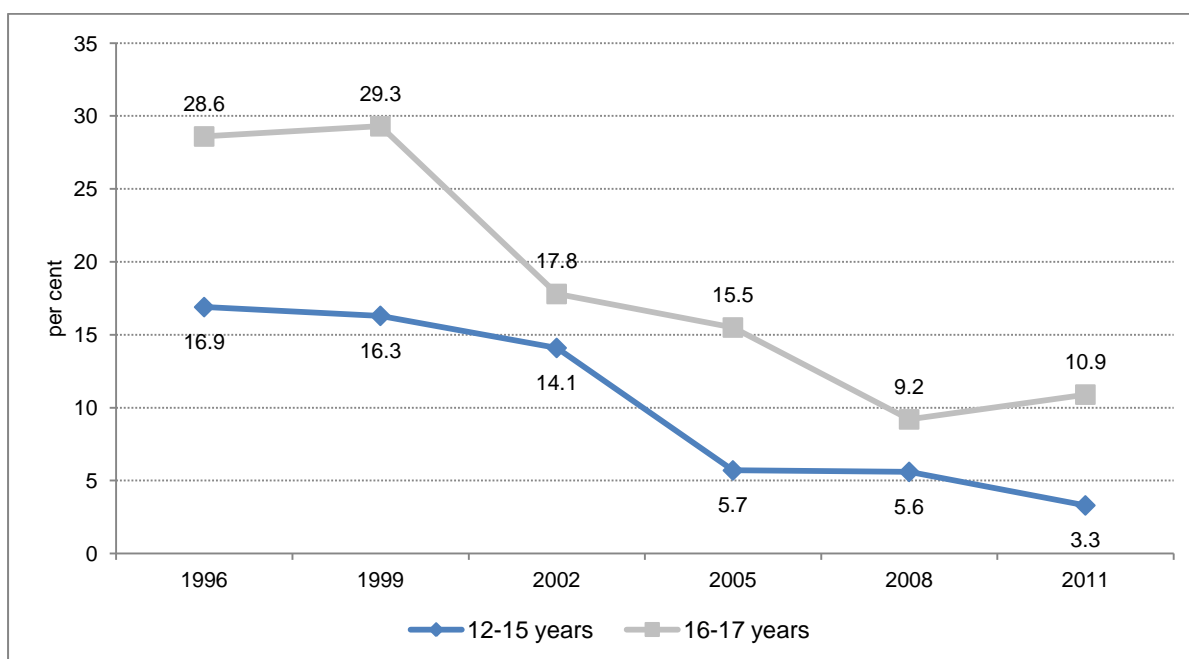
Smoking rates for current smokers are similar between the sexes (Figure 13). In 2011, older students were significantly more likely than younger students to report being current smokers (Figure 14). While the number of current smokers in the younger age group decreased significantly from 5.6% to 3.3% between 2008 and 2011, the number of current smokers in the older age group increased from 9.2% to 10.9% between 2008 and 2011. This increase was not statistically significant.

Figure 13: Current smokers, % of students by sex, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

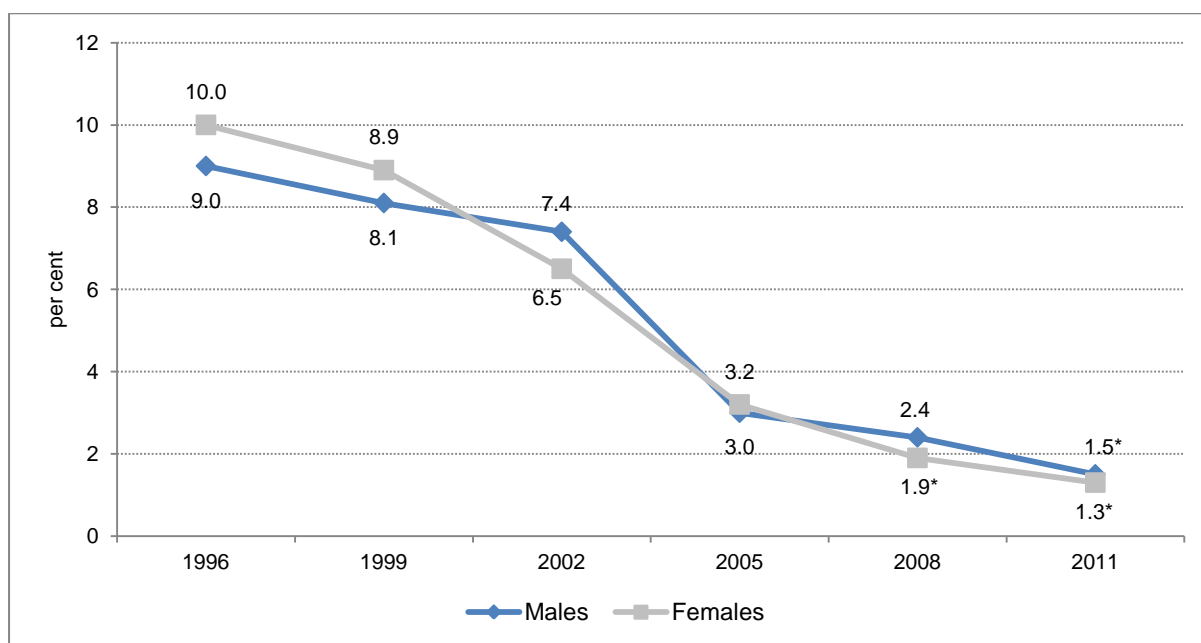
Figure 14: Current smokers, % of students by age group, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

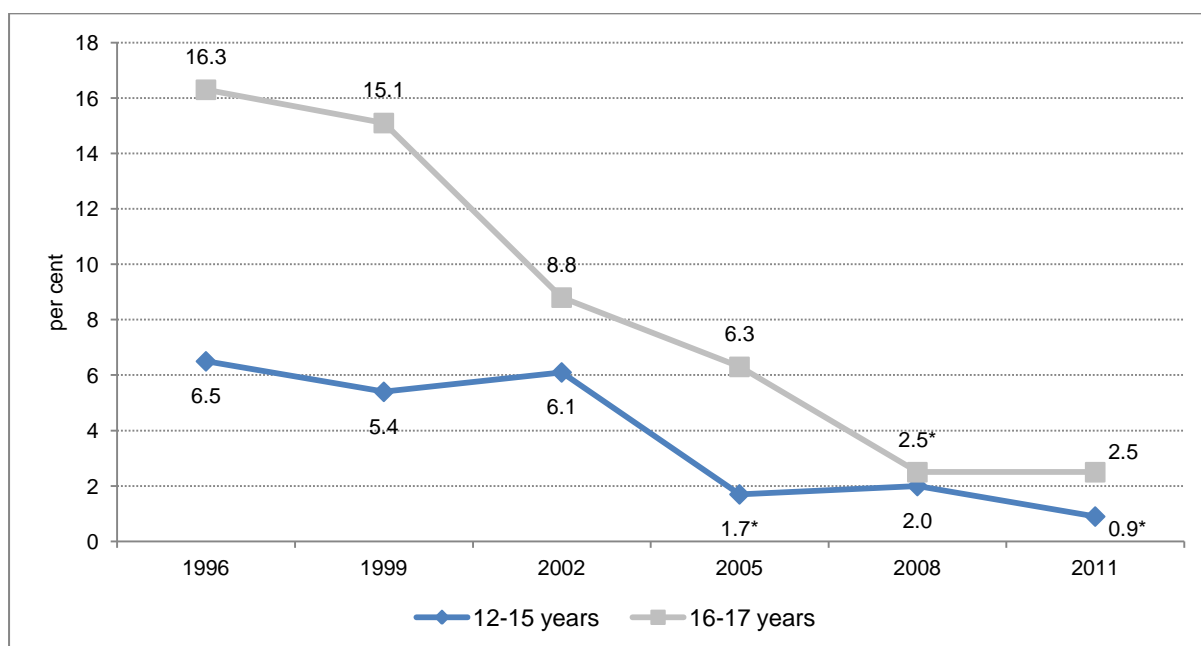
Smoking rates for daily smokers are also similar between the sexes (Figure 15). In 2011, older students were significantly more likely than younger students to report being daily smokers (Figure 16). While the number of daily smokers in the younger age group decreased significantly from 2.0% to 0.9% from 2008 to 2011, the number of daily smokers in the older age group remained constant at 2.5%.

Figure 15: Daily smokers, % of students by sex, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: * Estimate has a relative standard error of 25% to 50% and should be interpreted with caution.

Figure 16: Daily smokers, % of students by age group, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: * Estimate has a relative standard error of 25% to 50% and should be interpreted with caution.

4.2. Quantity and type of cigarettes preferred

Students were asked how many cigarettes they had smoked in the last seven days. In 2011, male students reported smoking an average of 23 cigarettes (compared with 28 in 2008) and female students an average of 17 cigarettes (compared with 20 in 2008). Younger students reported smoking

an average of 23 cigarettes in the last seven days (25 in 2008) and older students reported an average of 19 (22 in 2008).

Students were asked what brand of cigarette they usually smoke with some students giving multiple responses. Winfield was the most popular with 61.6% of males and 68.0% of females choosing this as a brand they usually smoke, followed by Marlboro (34.2%) and Peter Jackson (27.0%*) for males and Longbeach (16.9%*) and Peter Jackson (11.5%*) for females.

In 2011, of students who were current or daily smokers, 61.2% usually smoked cigarettes from a packet of 25 and 16.4% smoked from a packet of 20 with a small number of students giving multiple responses. Sometimes people break open a packet and sell single cigarettes; 25.6% of current or daily smokers had purchased single cigarettes in the last four weeks.

4.3. Intent to smoke in the future

In 2011, students were asked whether they thought they would be smoking this time next year. Of those students who were not current or daily smokers, 83.8% were certain not to be smoking in a year, 13.6% were unlikely or very unlikely to be smoking next year, 2.3% were undecided and 0.3%* of students were either likely, very likely or certain to be smoking in a year.

4.4. Ease of purchase

Students were asked how easy it would be for them to buy cigarettes and how easy it would be to get someone else to buy cigarettes for them. In 2011, of the students who were current or daily smokers, 41.7% reported it would be easy to buy cigarettes (39.2% of younger students, 43.2% of older students, 49.2% of males and 32.9% of females). In terms of getting someone else to buy cigarettes for them, 76.9% of students who were current or daily smokers thought it would be easy (72.4% of younger students, 79.6% of older students, 72.0% of males and 82.5% of females).

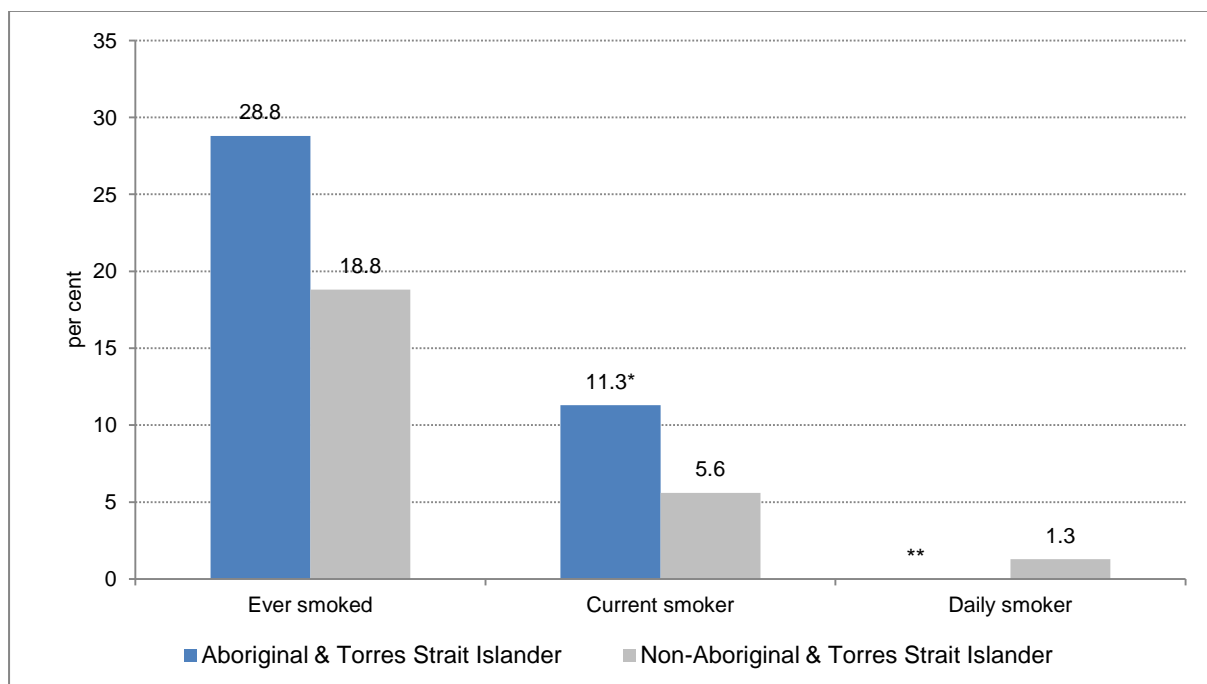
In 2011, of those students who were current or daily smokers, 59.3% obtained their last cigarette from a friend, 19.6% got someone else to buy it for them, and 10.6%* of students bought their last cigarette from a supermarket with some students giving multiple responses.

4.5. Tobacco use amongst Aboriginal and Torres Strait Islander students

Students who were of Aboriginal and Torres Strait Islander descent were more likely to have ever smoked or to be current smokers (Figure 17). In 2011, 28.8% of Aboriginal and Torres Strait Islander students had ever smoked compared with 18.8% of non-Aboriginal and Torres Strait Islander students and this difference is statistically significant; 11.3% of Aboriginal and Torres Strait Islander students had smoked in the last seven days (current smokers) compared with 5.6% of non-Aboriginal and Torres Strait Islander students (this is not statistically significant and should be interpreted with caution given the large relative standard error in the estimate for Aboriginal and Torres Strait Islander students).

* Estimate has a relative standard error of 25% to 50% and should be interpreted with caution.

Figure 17: Smoking status, % of students by Aboriginal & Torres Strait Islander status, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

4.6. Tobacco use and student income

The relative standard errors for the estimates were too large to allow for a meaningful analysis of tobacco use and student income.

4.7. Education in class about smoking

In the 2011 survey, 84.2% of all students recalled having received at least part of a lesson about smoking cigarettes during 2010 (not a statistically significant change from 84.1% in the previous survey). Males (85.5%) and younger students (87.9%) were significantly more likely than females (83.0%) and older students (76.6%) respectively to recall having had at least part of a lesson about smoking cigarettes during 2010.

5. Illicit substance and other drug use

Key definitions

Illicit substance use:	Use of illicit substances including cannabis, amphetamines, ecstasy, cocaine, hallucinogens (LSD, magic mushrooms, datura, angel's trumpet) and opiates (heroin, methadone, pethidine).
Other drug use:	Use of tranquillisers (sleeping tablets/sedatives), inhalants that were deliberately sniffed from spray cans, paint, petrol, glue or thinners (excluding sniffing whiteout, liquid paper, textas, markers and pens) and steroids.
Multi-substance use:	Use of tobacco, alcohol and at least one illicit substance, on at least one occasion, in the seven days prior to the survey.
Non-users:	Students who did not report any use of tobacco, alcohol or illicit substance in their lifetime.
Lifetime users/ever used:	Students who reported ever consuming a particular substance.
Past week/current users:	Students who reported using a particular substance on at least one day in the last seven days before the survey.

Descriptions of illicit substances and other drugs

The descriptions of illicit substances and other drugs are the same as the descriptions used in the questionnaire.

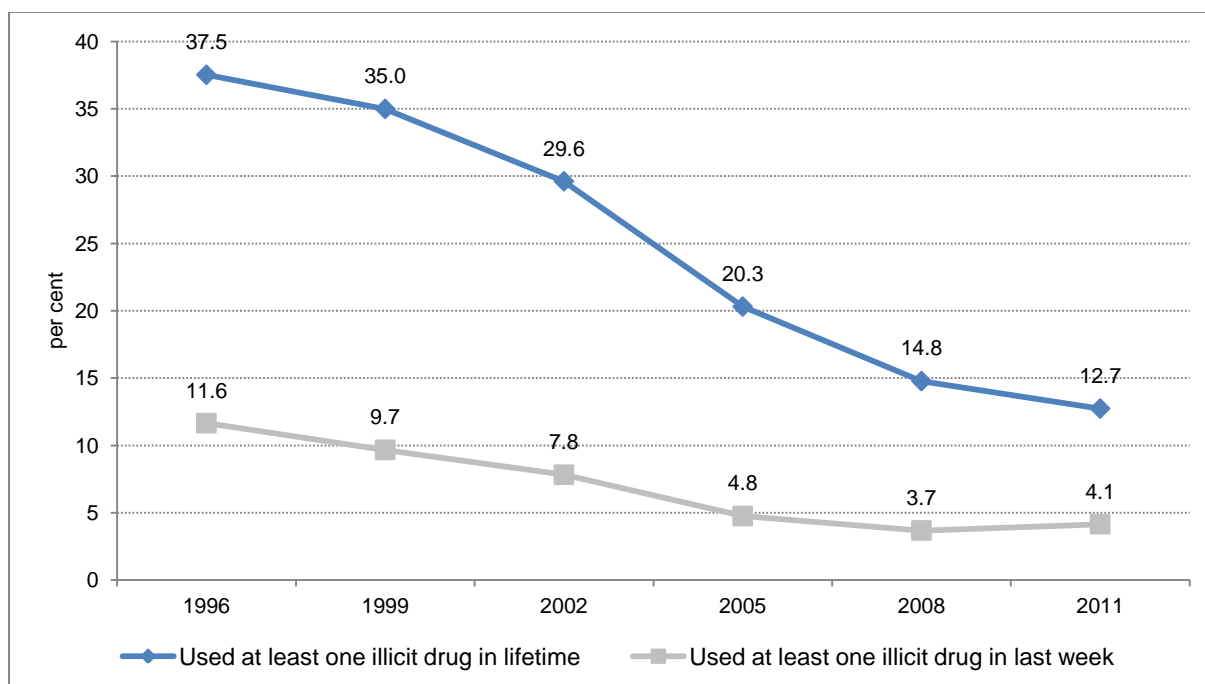
Amphetamines:	Amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice) other than for medical reasons.
Cannabis:	Marijuana/cannabis (grass, hash, dope, weed, mull, yarndi, ganga, pot, a bong, a joint).
Cocaine:	Cocaine.
Ecstasy:	Ecstasy or XTC (E, MDMA, eccy, X, bickies).
Hallucinogens:	Hallucinogens (LSD, acid, trips, magic mushrooms, datura, angel's trumpet).
Heroin:	Heroin (smack, horse, skag, hammer, H), or other opiates (narcotics) such as methadone, morphine or pethidine other than for medical reasons.
Inhalants:	Deliberately sniffed (inhaled) from spray cans or deliberately sniffed things like glue, paint, petrol or thinners in order to get high or for the way it makes you feel. This does not include white-out, liquid paper, textas, markers or pens.
Painkillers:	Painkillers/analgesics such as Disprin, Panadol, Nurofen.
Steroids:	Steroids (muscle, roids, gear) without a doctor's prescription in an attempt to make you better at sport, to increase muscle size or to improve your general appearance.
Tranquilisers:	Sleeping tablets, tranquilisers, sedatives or benzodiazepines, such as Valium, Mogadon, Diazepam, Temazepam (Mazzies, Vallies, Moggies, Jellies), Serepax (Serries), Rohypnol (Rohies, Barbs) other than for medical reasons.

5.1. Prevalence of illicit substance and other drug use

In 2011, 12.7% of students reported having used at least one illicit substance in their lifetime and 4.1% reported having used an illicit substance at least once in the last seven days (Figure 18). There has been a steady and statistically significant decline in lifetime use since 1996. Use in the last week has also declined significantly since 1996 but the differences between 2005 and 2008, and 2008 and 2011 were not statistically significant.

The percentage of students in the ACT who had used at least one illicit drug in their lifetime was 12.7% compared with the national average of 15.6%.⁹ This difference was statistically significant.

Figure 18: Use of illicit drugs in lifetime & last week, % of students by year, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

Table 7 and Table 8 summarise the use of illicit and other drugs from 1996 to 2011 for lifetime use and use in the last week respectively.

Looking at lifetime use, the drugs most commonly used in 2011, apart from painkillers, were tranquilisers, followed by inhalants and then cannabis.

5.1.1. Tranquilisers

In 2011, 19.2% of students reported having ever used tranquilisers other than for medical reasons, with 2.3% reporting use in the last week. There were no statistically significant changes in lifetime use or use in the last week from 2008. There were no statistically significant differences between males and females, or younger students and older students for lifetime use. Lifetime use in the ACT (19.2%) was higher than the national average of 17.1% and this difference was statistically significant. There was not a statistically significant difference between the ACT and the national average for use of tranquilisers in the last week.

When asked where or from whom they got their last tranquiliser, most students who had ever used tranquilisers (66.9%) reported getting it from their parent/s with another 21.7% reporting 'I am prescribed tranquilisers by my doctor'.

5.1.2. Inhalants

The second most commonly used drug was inhalants with 14.9% of students reporting that they had ever used. This was not a statistically significant change from 17.7% in 2008. In 2011, 3.9% of students reported that they had used inhalants in the last week (not a statistically significant change from 3.6% in 2008). There was not a statistically significant difference in lifetime use between males and females, but younger students (16.5%) were significantly more likely to have used inhalants in their lifetime than older students (11.5%). Lifetime use in the ACT (14.9%) was lower than the national average of 17.3% and this difference was statistically significant. There was not a statistically significant difference between the ACT and the national average for use of inhalants in the last week.

5.1.3. Cannabis

In 2011, cannabis was the most commonly used illicit substance with 11.9% of students reporting that they had ever used (not a statistically significant change from 13.2% in 2008) and 3.6% reporting that they had used in the last week (not a statistically significant change from 2.7% in 2008). The difference in lifetime use between males (13.6%) and females (10.2%) was not significant, but there was a statistically significant difference between age groups with 8.9% of younger students reporting having ever used cannabis compared with 18.1% of older students. There has been a consistent and statistically significant decrease in lifetime use of cannabis since 1996 (36.4%).

Lifetime use in the ACT (11.9%) was lower than the national average of 14.8% and this difference was statistically significant. There was not a statistically significant difference between the ACT and the national average for use of cannabis in the last week.

Students were asked whether they usually use cannabis by themselves or with others. In 2011, of those students who used cannabis, 94.1% used with others, 1.1% used by themselves, and 4.8% used with others and by themselves equally often. There were no statistically significant differences between the sexes or age groups. Students were also asked how they used cannabis: 57.8% reported smoking it from a bong or a pipe, 37.3% reported smoking it as a joint, 2.3% reported eating it, and 2.6% specified other methods. When asked where they last used cannabis, the most common place of use was 'at my friend's home' (46.8%), followed by 'at a party' (20.5%) and then 'in a park' (11.2%).

5.1.4. Painkillers

In 2011, 96.5% of students reported having used painkillers during their lifetime and 38.0% reported that they had used painkillers in the last week. These levels of use have not changed significantly since 2008. There was a statistically significant difference between lifetime painkiller use in males (95.9%) and females (97.1%), but there was not a significant difference between younger and older students. There were no statistically significant differences between use of painkillers in the ACT and the national average either for lifetime use or use in the last week.

Students were asked the reason they last used painkillers with some students giving multiple responses. The most common reason given in 2011 was 'had a headache or migraine' (52.4%) followed by 'had a cold or 'flu' (27.0%) and then 'had pains associated with playing sport' (13.6%).

When asked from where or from whom they got their last painkillers, the majority of students (85.9%) reported being given painkillers by their parent/s; another 5.4% bought their own painkillers and 4.3% of students took them from home without parental permission.

Table 7: Use of illicit drugs & other drugs at least once in lifetime, % of students by year, ACT, 1996–2011

	1996	1999	2002	2005	2008	2011
Illicit drugs						
Cannabis	36.4	33.5	28.1	16.9	13.2	11.9
Hallucinogens	8.0	7.1	4.0	4.1	2.4	2.0
Amphetamines	6.1	7.7	6.1	5.8	3.3	2.5
Ecstasy	4.5	4.5	5.3	5.0	3.8	1.9
Heroin or other opiates	4.6	4.0	2.5	2.3	1.8	0.9*
Cocaine	4.2	4.7	3.4	3.4	1.6	1.6
Other drugs						
Painkillers	98.5	96.6	93.3	95.4	96.1	96.5
Inhalants	26.7	25.1	19.6	17.6	17.7	14.9
Tranquilisers	20.6	19.1	15.1	14.7	19.4	19.2
Steroids	2.5	3.7	4.1	2.8	2.4	2.0

Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: Reported lifetime use of illicit drugs excludes other drugs (inhalants, tranquilisers and steroids).
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Table 8: Use of illicit drugs & other drugs at least once in last week, % of students by year, ACT, 1996–2011

	1996	1999	2002	2005	2008	2011
Illicit drugs						
Cannabis	10.7	8.8	7.6	3.7	2.7	3.6
Hallucinogens	2.3	1.7	1.1	0.9*	0.4*	0.5*
Amphetamines	1.9	2.0	2.0	1.7	1.1	0.5*
Ecstasy	1.3	1.5	1.5	1.6	1.1	0.5*
Heroin or other opiates	1.8	1.3	0.9*	0.7*	0.7*	0.6*
Cocaine	1.8	1.6	0.7*	1.1*	0.6*	0.6*
Other drugs						
Painkillers	43.0	41.0	42.4	40.1	42.6	38.0
Inhalants	6.5	6.4	6.2	5.2	3.6	3.9
Tranquilisers	2.6	2.4	1.7	2.1	2.5	2.3
Steroids	1.5	1.3	2.4	1.5	0.9*	0.5*

Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: Reported use in last week of illicit drugs excludes other drugs (inhalants, tranquilisers and steroids).
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

5.2. Use of multiple substances

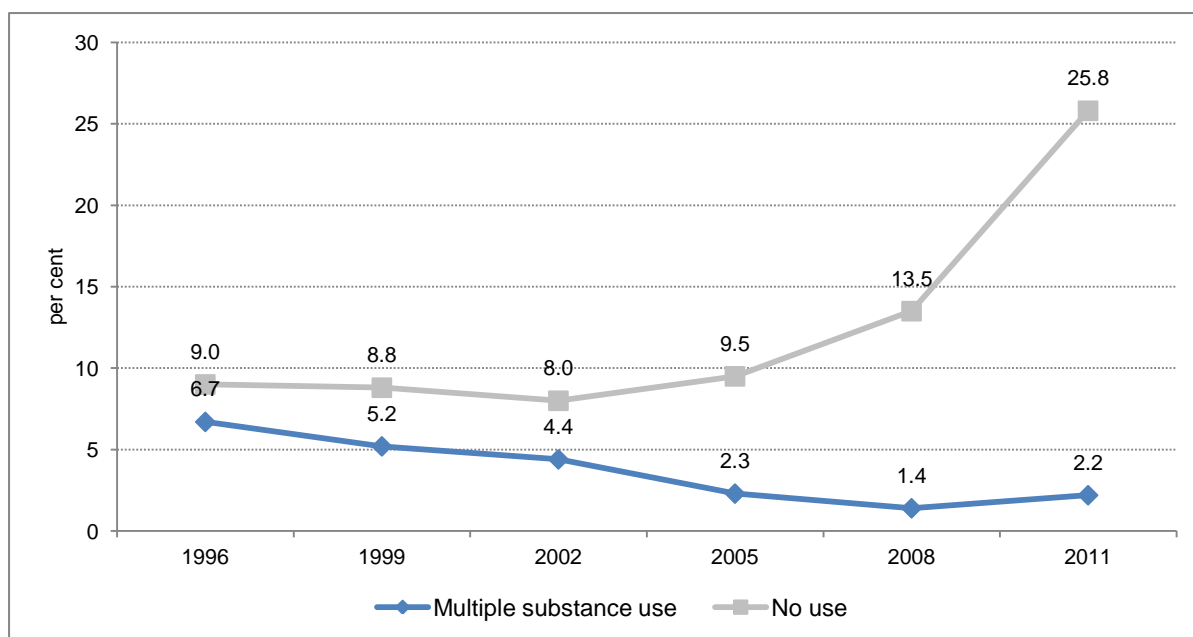
In 2011, 2.2% of all students surveyed reported the use of multiple substances (tobacco, alcohol and at least one illicit substance), on at least one occasion, in the seven days prior to the survey (Figure 19). There has been a statistically significant decrease in the number of students reporting multiple substance use since 1996, but the changes from 2005 to 2008 and 2008 to 2011 were not

statistically significant. The difference between responses for males (3.6%) and females (0.7%*) was statistically significant, as was the difference between younger students (1.1%*) and older students (4.4%).

5.3. Non-users

In 2011, 25.8% of students surveyed reported never having used tobacco, alcohol or any illicit substance in their lifetime (Figure 19). This represents a statistically significant increase in the proportion of non-users from 2008 (13.5%). There was very little difference between the responses for males (25.5%) and females (26.0%) but the difference between age groups was statistically significant with 32.1% of younger students reporting to be non-users compared with 12.6% of older students.

Figure 19: Multiple substance use in last week & no substance use ever, % of students by year, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

5.4. Illicit substance use and student income

Use of at least one illicit drug in lifetime was significantly dependent on income for the students surveyed in 2011, controlling for students' age. The relative standard errors of the estimates were too large to allow for meaningful analysis of other frequencies of use by income.

5.5. Education in class about illicit drugs

In the 2011 survey, 80.7% of all students recalled having received at least part of a lesson about illicit drugs during 2010 (a statistically significant change from 84.4% in the previous survey). Males (82.3%) were significantly more likely than females (79.1%) to recall having had a lesson. The difference between older students (84.0%) and younger students (79.1%) was not statistically significant.

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

6. Sun Protection

There have been changes over time to some of the sun protection questions asked in the survey. Therefore, time trends are only presented for comparable questions that have not changed between survey years. Some estimates have changed from previous reports due to coding changes—previously students with dark skin were omitted from some analyses, but for this report they have been included in all analyses.

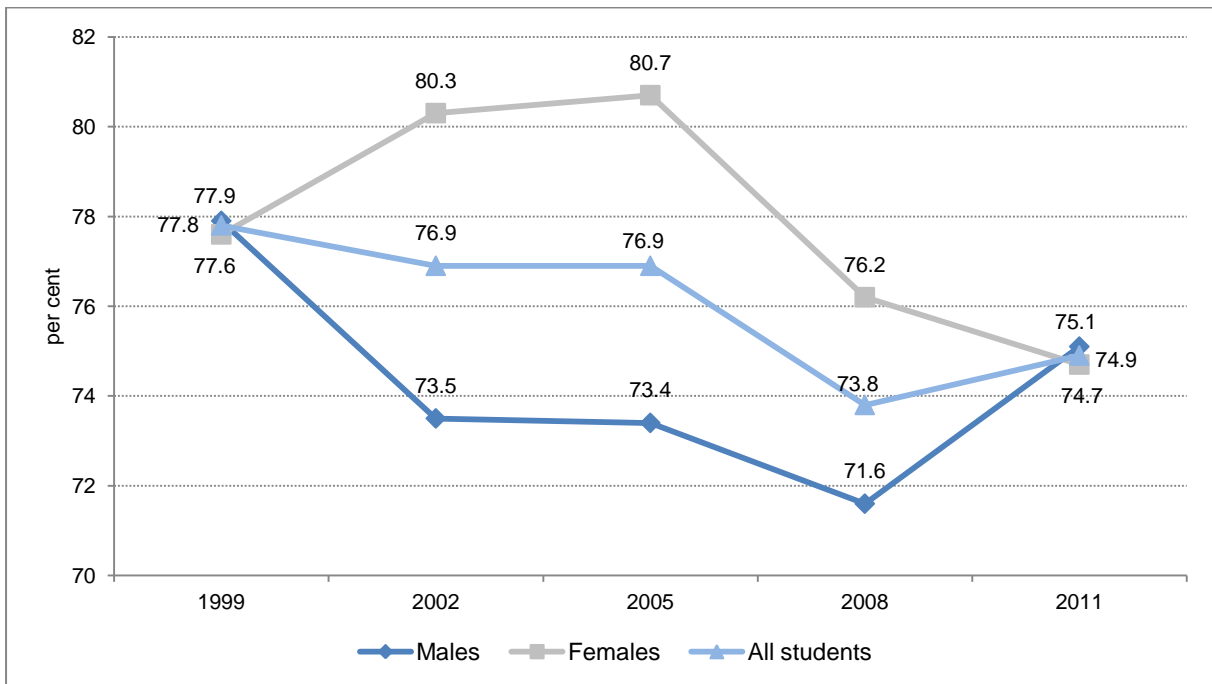
6.1. Skin type

Students were asked what would happen if their skin was exposed to sunshine for 30 minutes at the beginning of summer with no protection at all: 31.4% responded they would burn or just go red, 31.7% thought they would burn or go red first and then tan afterwards, 29.9% reported they would just tan, and 7.0% responded that nothing would happen because they were born with dark skin.

6.2. Sun exposure

In 2011, 74.9% of all students reported getting sunburnt at least once over the previous summer (75.1% of males, 74.7% females; 73.6% of younger students and 77.7% of older students) (Figure 20 and Figure 21). This was similar (the difference was not statistically significant) to 2008 (73.8%) despite the 2010–11 summer being the second wettest summer on record for the ACT and the wettest in 63 years according to the Bureau of Meteorology.¹⁵ The differences between the sexes and age groups were also not statistically significant.

Figure 20: Sunburn last summer, % of students by sex, ACT, 1999–2011

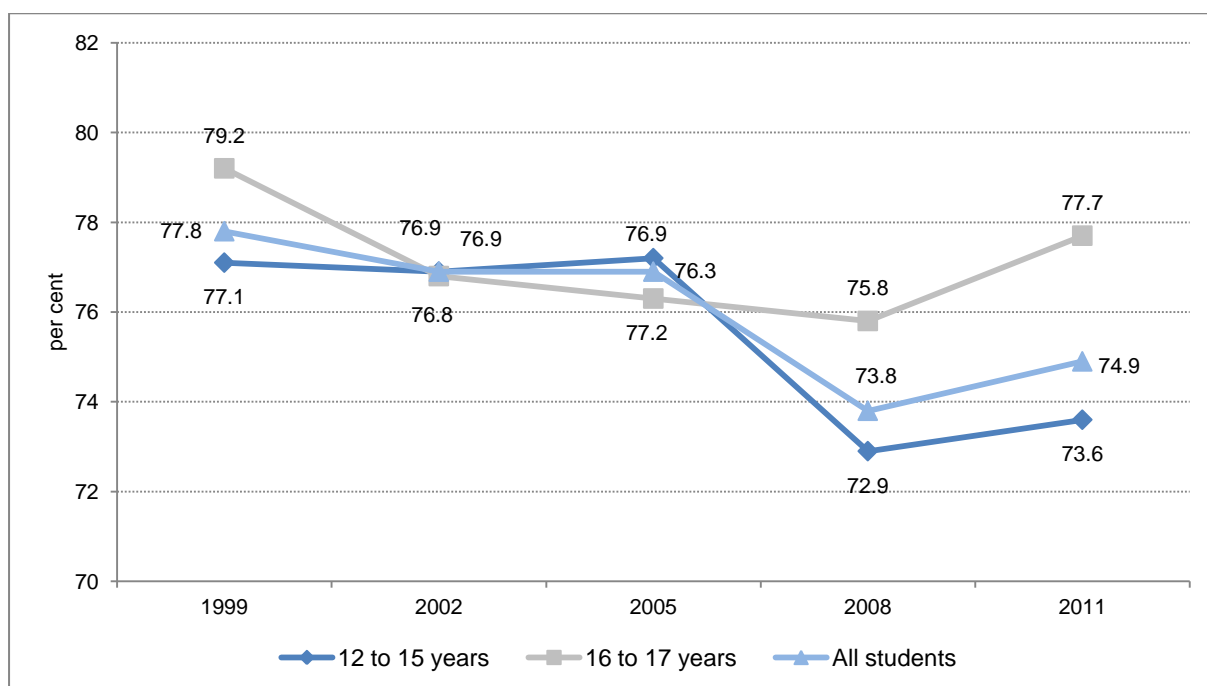


Source: ASSAD confidentialised unit record files, 1999, 2002, 2005, 2008 & 2011, ACT Health

Note: Students were not asked this question in 1996.

Estimates for prevalence of sunburn have changed slightly from previous reports due to coding changes.

Figure 21: Sunburn last summer, % of students by age group, ACT, 1999–2011



Source: ASSAD confidentialised unit record files, 1999, 2002, 2005, 2008 & 2011, ACT Health

Note: Students were not asked this question in 1996.

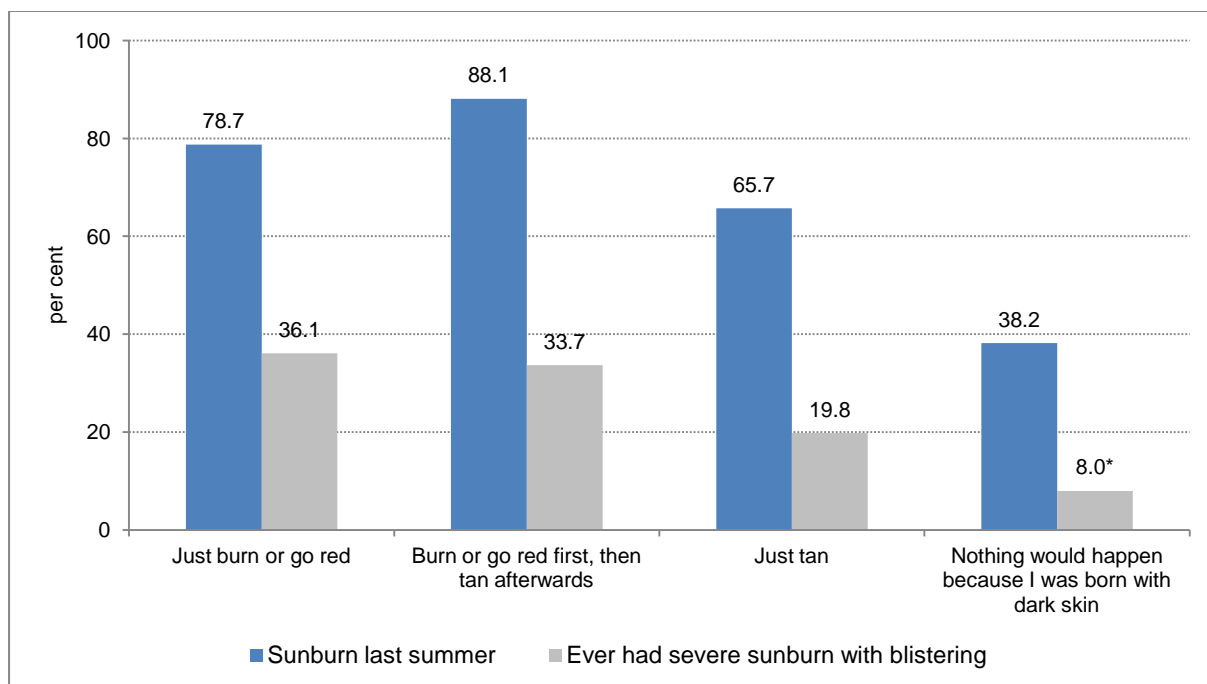
Estimates for prevalence of sunburn have changed slightly from previous reports due to coding changes.

In 2011, 28.2% of students reported having ever had severe sunburn with blistering. There were statistically significant differences between the sexes and age groups with 26.3% of males reporting having ever had severe sunburn with blistering, compared with 30.1% of females, and 26.8% of younger students compared with 31.0% of older students.

In 2011, of those students who reported having ever had severe sunburn with blistering, 48.6% reported that they were severely burnt last summer and 51.4% reported that the severe burn occurred more than a year ago. Differences between the sexes and age groups were not statistically significant.

Figure 22 shows sunburn last summer and lifetime severe sunburn with blistering by skin type. As expected, students with fairer skin were generally more likely to have been sunburnt last summer and to have ever had severe sunburn with blistering. Interestingly though, there was still a considerable number of students who perceived that they had dark skin and had a sunburn last summer (38.2%).

Figure 22: Sunburn last summer and lifetime severe sunburn with blistering, % of students by skin type, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

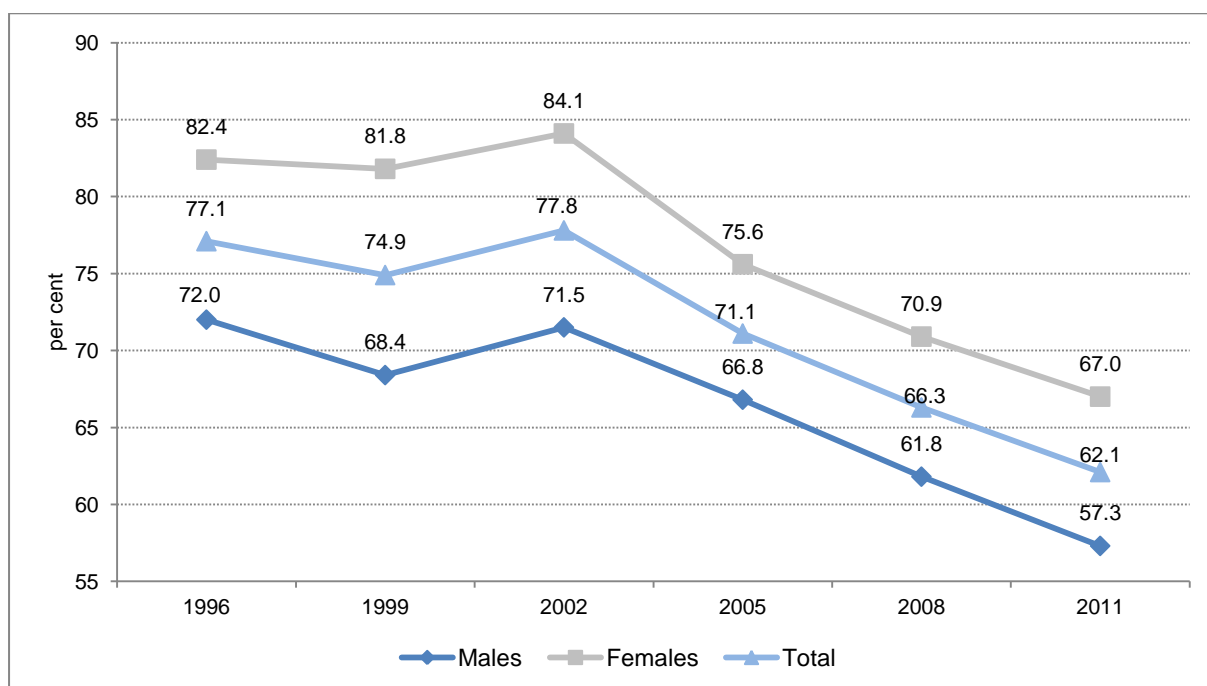
Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

6.3. Attitudes to tanning

In 2011, 62.1% of all students surveyed reported that they liked to get a suntan compared with 66.3% of all students surveyed in 2008. Females (67.0%) were significantly more likely than males (57.3%) to like getting a suntan (Figure 23), and older students (64.3%) were also significantly more likely than younger students (61.1%) to like getting a tan (Figure 24).

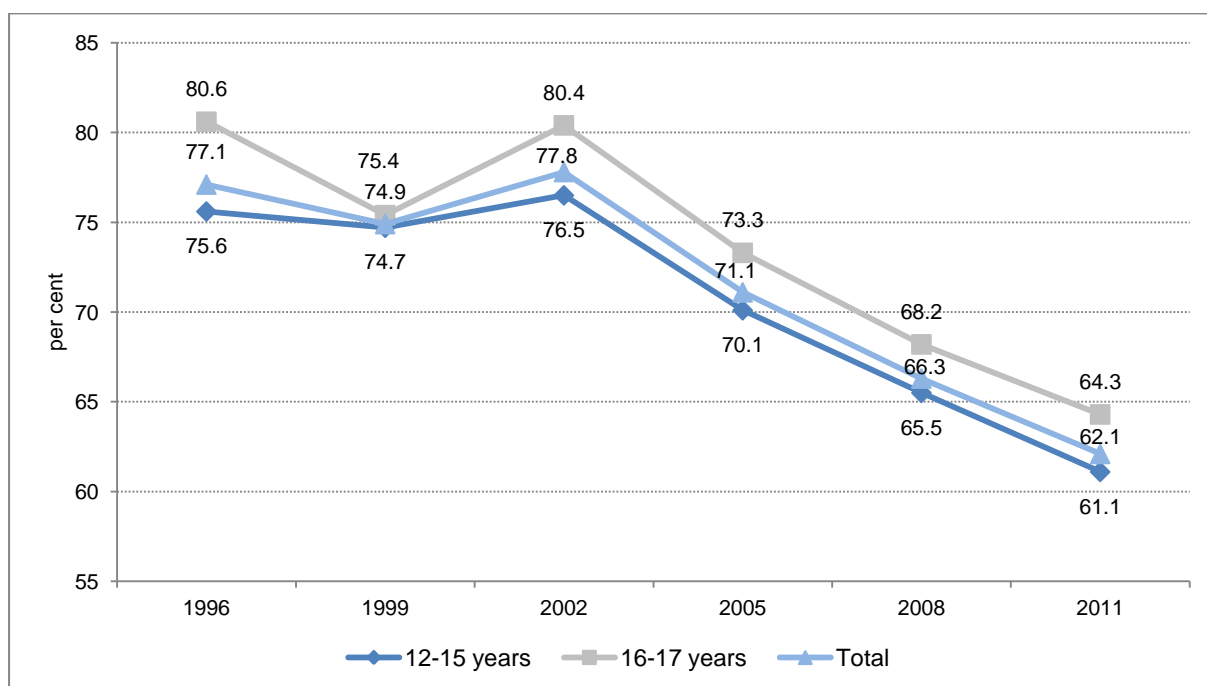
Since 2002 there has been a steady decline in the proportion of students reporting a preference for a suntan (Figure 23 and Figure 24). The difference between 2008 and 2011 is not statistically significant however the difference between 2005 and 2011 is significant.

Figure 23: Liking to get a tan, % of students by sex, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: Estimates for prevalence of sunburn have changed slightly from previous reports due to coding changes.

Figure 24: Liking to get a tan, % of students by age group, ACT, 1996–2011



Source: ASSAD confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health
 Note: Estimates for prevalence of sunburn have changed slightly from previous reports due to coding changes.

6.4. Sun protection

Students were asked about the types of sun protective behaviours they would use when outside for an hour or more on a sunny day in summer between 11am and 3pm (Table 9). In 2011, the most common sun protection activity was wearing SPF 30+ sunscreen (45.2%), followed by wearing sunglasses (31.2%) and staying mainly in the shade (31.0%).

Table 9: Sun protection activities on sunny days in summer, students reporting 'usually' or 'always' participating, by activity type, % of students, ACT, 1996–2011

	1996	1999	2002	2005	2008	2011
Wearing a hat	52.5	44.9	42.4	39.7	29.7	29.3 [‡]
Wearing clothes covering body	27.7	22.4	20.0	22.6	21.0	21.4 [‡]
Deliberately wearing less clothing	14.2	18.1	22.6	19.4	19.1	23.6 [‡]
Wearing sunscreen (SPF 30+)	65.6	60.1	46.3	39.1	42.4	45.2
Staying mainly in the shade	28.9	29.2	25.7	22.9	27.1	31.0 [‡]
Wearing sunglasses	33.1	33.8	27.7	25.2	37.2	31.2
Spending most time indoors	18.1	20.8	23.0	21.3	26.4	- [#]

Source: ASSAD, confidentialised unit record files, 1996, 1999, 2002, 2005, 2008 & 2011, ACT Health

Note: Students were asked about the types of sun protective behaviours they would use when outside for an hour or more on a sunny day in summer between 11am and 3pm.

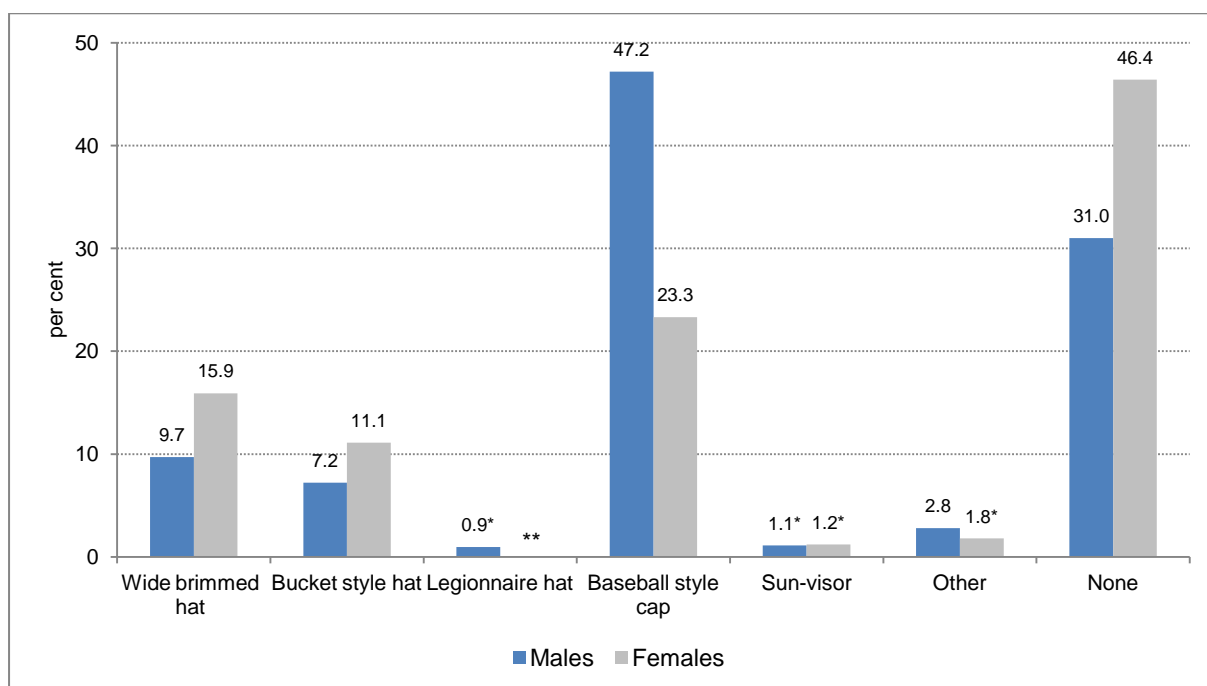
This question was not asked in 2011.

‡ Denotes a statistically significant difference between 2008 and 2011.

Estimates for prevalence of sun protection activities have changed slightly from previous reports due to coding changes.

Students were asked what type of hat they most often wore on a sunny day in summer (Figure 25 and Figure 26). There were statistically significant differences between the responses for males and females and also between younger and older students. Many students reported wearing no hat (31.0% of males, 46.4% of females; 33.8% of younger students and 48.1% of older students). The most popular type of hat was the baseball-style cap with 47.2% of males preferring this style along with 23.3% of females, 35.5% of younger students and 35.3% of older students.

Figure 25: Type of hat, % of students by sex, ACT, 2011

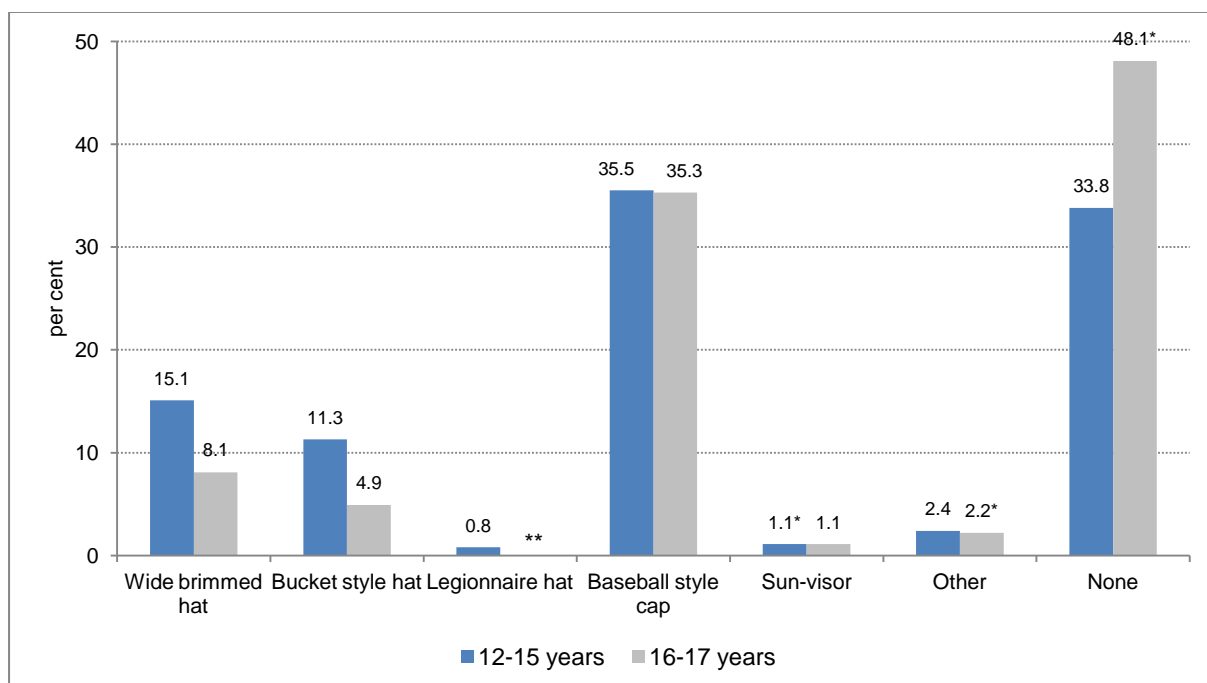


Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Figure 26: Type of hat, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Students were also asked the SPF (Sun Protection Factor) of the sunscreen they usually used on a sunny day in summer. Nearly three-quarters (72.0%) of students reported using SPF 30+ sunscreen, 4.3% reported using SPF 15 or lower, 0.7%* used SPF 12 or lower, 6.6% did not use sunscreen and 16.4% could not remember or did not know what type of sunscreen they used.

6.5. Reasons for not wearing a hat or sunglasses

In 2011 some additional questions were added to the survey. Students who never, rarely or sometimes wear a hat in summer were asked why they don't wear a hat in summer, with some students giving multiple responses (Table 10). The most common reason given by both males (45.5%) and females (47.6%) was 'I don't like wearing a hat when spending time outdoors', followed by 'it messes up my hair' (24.3% for males and 35.4% for females).

Table 10: Reasons for not wearing a hat in summer, % of students by sex, ACT, 2011

	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
I don't like wearing a hat when spending time outdoors	45.5	47.6	46.7	45.7	48.4
It messes up my hair	24.3	35.4	30.5	30.0	31.2
My head gets too hot when I wear a hat	20.5	21.9	21.3	22.2	19.8
My parents don't make me	17.1	23.0	20.4	21.4	18.6
It is not compulsory to wear one at my school	16.0	33.2	25.6	26.3	24.3
It is not cool	13.2	21.4	17.7	16.0	20.6
No-one else wears them	9.8	18.4	14.6	12.7	17.8
None of my friends wear one	7.6	16.6	12.6	11.7	14.1
Forgetfulness/don't think about it	5.1	5.7	5.4	5.7	5.0
Annoying/uncomfortable	4.1	5.7	5.0	6.9	1.6*
Don't like them/don't want to	3.9	3.2	3.5	3.2	4.0
Can't be bothered/lazy	2.3*	1.8*	2.0	2.4*	1.4*
Don't have many/any hats	1.4*	1.9*	1.6	1.3*	2.3*
Inconvenience	1.0*	2.1*	1.6	1.3*	2.1*
Use other sun protection methods	0.9*	**	0.6*	0.9*	**
Don't need to/don't go outside/don't get sunburnt	**	**	0.6*	**	**
Other reason	5.0	3.4	4.1	2.9*	6.2

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Totals add up to more than 100% because some students gave multiple responses.

Similarly, students who never, rarely or sometimes wear sunglasses in summer were asked why they don't wear sunglasses in summer, with some students giving multiple responses (Table 11). The most common reason given by males (43.2%) was 'I don't like wearing sunglasses' (36.4% for females). The most common reason given by females (36.7%) was 'I keep losing or breaking them' (20.2% for males). 'I don't own any' was another common reason given by both males (27.2%) and females (21.7%).

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Table 11: Reasons for not wearing sunglasses in summer, % of students by sex, ACT, 2011

	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
I don't like wearing sunglasses	43.2	36.4	40.3	41.9	36.3
I don't own any	27.2	21.7	24.8	24.8	24.9
I keep losing or breaking them	20.2	36.7	27.2	26.9	28.0
My parents don't make me wear them	14.2	18.2	15.9	18.5	9.5
It is not compulsory to wear them at my school	11.4	18.8	14.6	15.1	13.2
If everyone wore them then I would probably wear them	6.9	10.5	8.4	8.9	7.4
It is not cool	6.8	2.9*	5.1	5.1	5.3
None of my friends wear them	4.3	2.3*	3.4	3.6	3.1*
Impractical (e.g. wear prescription glasses)	2.2*	5.7	3.7	3.1	5.1
Can't be bothered	2.0*	**	1.2*	0.8*	2.3*
Forget them	1.9*	4.5	3.0	3.2	2.5*
Don't want to	1.2*	**	0.9*	0.8*	1.2*
Uncomfortable/hurt	1.2*	2.4*	1.7	2.2*	**
Don't go outside/don't need to	**	**	0.5*	**	**
Annoying	**	1.4*	0.7*	0.8*	**
Don't suit me	**	1.0*	0.4*	**	**
Other reason	4.5	3.3*	4.0	3.2	5.8

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

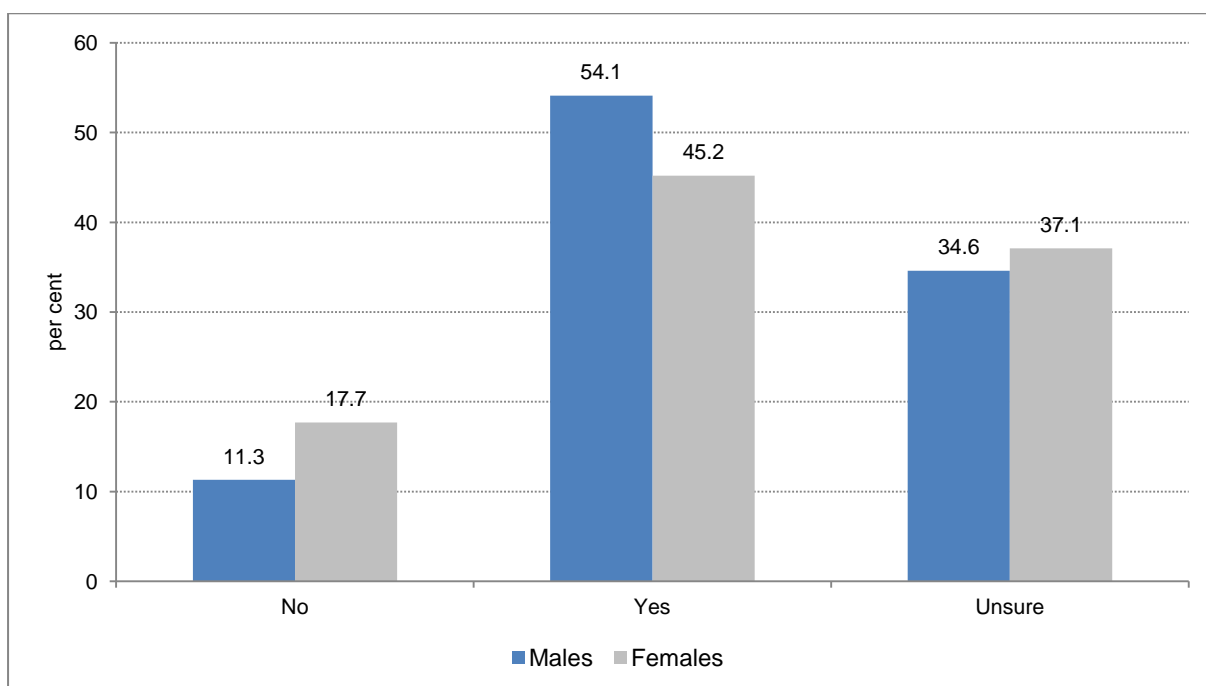
** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Totals add up to more than 100% because some students gave multiple responses.

6.6. Shade at school

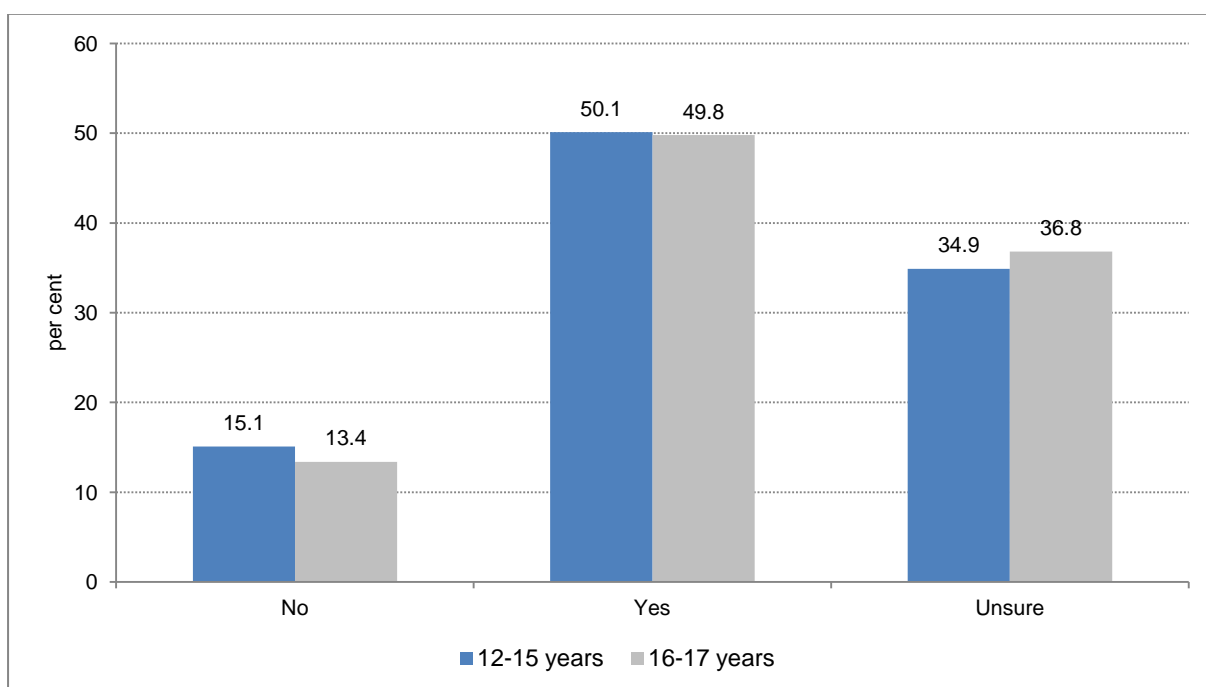
In 2011 students were asked whether they felt adequate shade was provided at their school. Of those who responded, 49.7% felt there was adequate shade, 14.5% felt there was not adequate shade, and 35.8% were unsure. There were statistically significant differences between answers for males and females (Figure 27), but differences between the age groups were not significant (Figure 28). Responses from government and non-government students were remarkably similar (Figure 29).

Figure 27: Adequate shade provided at school, % of students by sex, ACT, 2011



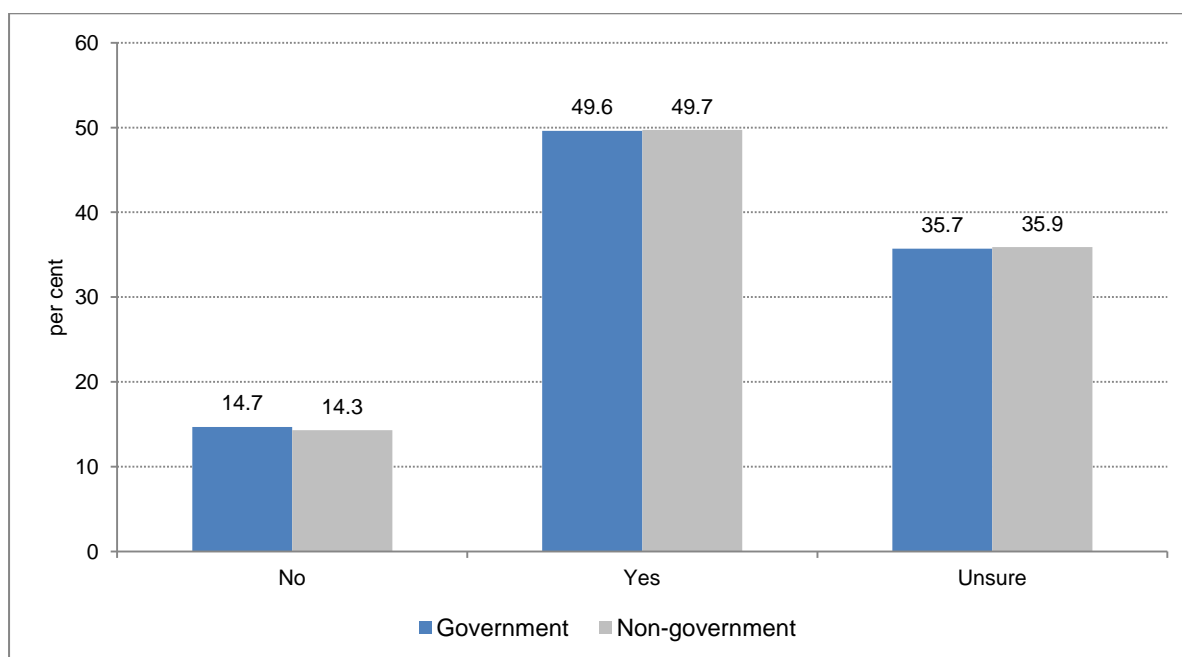
Source: ASSAD confidentialised unit record file, 2011, ACT Health

Figure 28: Adequate shade provided at school, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Figure 29: Adequate shade provided at school, % of students by education sector, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

6.7. Education and knowledge about skin cancer

In 2011, the majority of students (73.1%) surveyed recalled having received at least part of an education session in class about skin cancer or protection from the sun during the previous year compared with 74.5% in the 2008 survey.

There was a statistically significant difference between females recalling this (70.9%) compared with males (75.3%) but the difference between age groups was not significant with 74.2% of younger students recalling having had at least part of a lesson in the previous year compared with 71.0% of older students.

With regards to knowledge about skin cancer, students were asked two questions about the causes of skin cancer.

In response, 92.0% of students correctly rated as true the statement that 'Most skin cancer is caused by over-exposure to ultraviolet radiation (UVR) from the sun'. Younger students (93.5%) were significantly more likely to answer correctly than older students (88.9%) and a similar proportion of males (91.6%) and females (92.4%) answered correctly.

In response to the second statement, 'You only get skin cancer if you burn often', 80.4% of students correctly rated this statement as false in 2011. The accuracy of responses to this question varied over time, sex and age-group. There has been a decrease in the knowledge of this statement since 1996, when 83.6% correctly rated the statement as false, compared with 78.4% in 2008. In 2011, females (83.1%) were significantly more likely to answer this question correctly than males (77.7%) compared with 81.4% of females in and 75.4% of males in 2008. Older students (88.0%) were significantly more likely to answer this question correctly than younger students (76.7%), compared with 89.1% and 73.3% respectively in 2008.

In 2011, 73.2% of students answered both questions correctly (76.2% of females and 70.3% of males). Older students (77.9%) were more likely to answer both questions correctly than younger students (70.9%). The differences between males and females and older and younger students were both statistically significant.

7. Weight, nutrition and physical activity

Key definitions

Body Mass Index (BMI):

$$BMI = \frac{\text{weight in kilograms}}{(\text{height in metres})^2}$$

Moderate physical activity:

Activity which did not make students sweat or breathe hard, such as slow bike riding, housework, brisk walking, pushing a lawnmower etc.

Vigorous physical activity:

Activity which made students sweat or breathe hard, such as basketball, netball, soccer, football, running, fast bike riding, aerobics etc.

Questions about physical activity and nutrition were asked for the first time in the 2002 survey, but the questions asked in 2005 were changed to better reflect national guidelines. Therefore, the results from the 2002 survey are not comparable with the results from the 2005, 2008 and 2011 surveys and have not been presented.

7.1. Self-reported height and weight

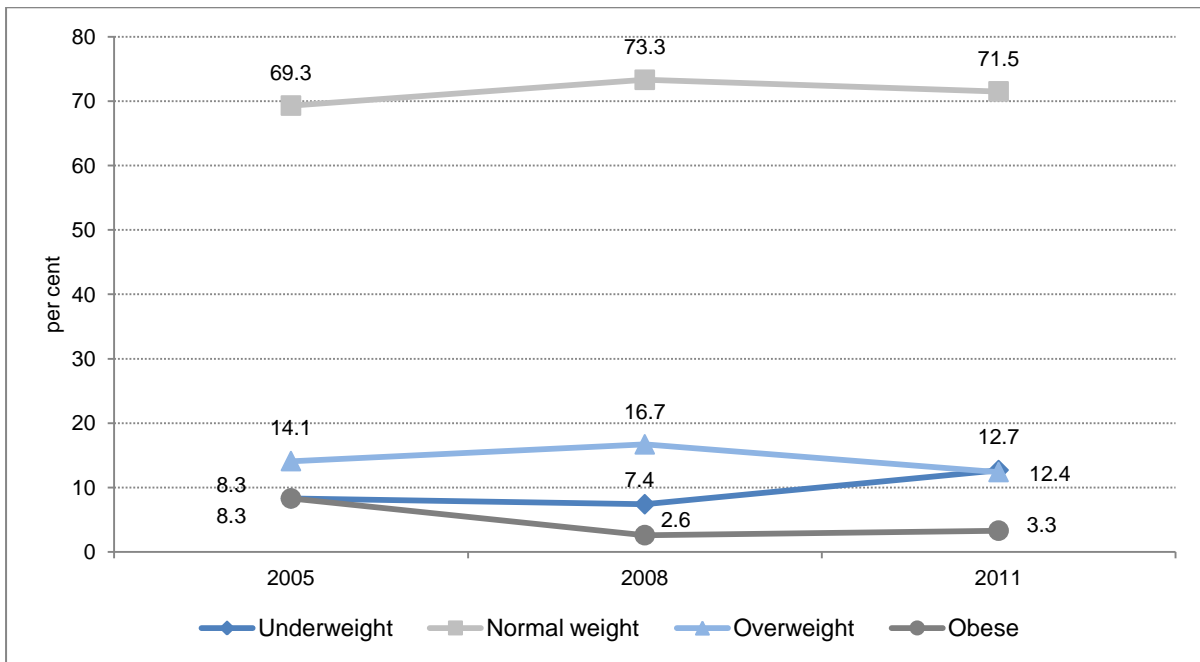
In 2005, 2008 and 2011, students were asked to report their weight and height. These data were used to calculate a body mass index (BMI) for each student. The BMI provides a useful estimate of excess weight as it measures an individual's weight in relation to their height. Student BMIs have been categorised based on the adolescent thresholds endorsed by the Australian Government Department of Health and Ageing.¹⁶ BMI categories used in this report can be found in Appendix 10.4. These thresholds take into account the substantial changes in BMI with age. For the purposes of analysis, half-year age cut-offs were used. For example if a student was 12 years or older, but less than 13 years old, the classification for a 12.5 year old was used. In 2011 any weight entries outside 20-180kg and any height entries outside 80-210cm were coded as invalid responses. There was a larger number of students than expected who had recorded their height as 200cm so only students who recorded their height as less than 200cm were included in the analysis.

While trends in adolescent obesity have major public health impacts, it is important to look at this in context. Subsequent work by Cole, et al.¹⁷ has been used to define thinness (referred to as underweight in this report).

Of the 1,546 respondents in 2011, about half reported on weight and height. Of those, 12.7% were underweight (a statistically significant increase from 7.4% in 2008), 71.5% were in the normal weight range (not a statistically significant change from 73.3% in 2008), 12.4% were in the overweight range (a statistically significant decrease from 16.7% in 2008) and 3.3% were in the obese range (not a statistically significant change from 2.6% in 2008) (Figure 30).

These results are particularly interesting given the results from the National Health Survey (NHS) 2011¹⁸ which reports that 25.4% of 12–15 year olds and 30.5% of 16–17 year olds in the ACT are in the overweight/obese category—considerably different results to those found in ASSAD 2011. The BMIs for the NHS were based on measured values of weights and heights whereas the BMIs in ASSAD were based on self-reported values of weights and heights. It has been established^{19 20} that self-reported heights are significantly higher than measured heights and self-reported weights are significantly lower than measured weights. Wang, Patterson et al also found that differences between actual weight and self-reported weight were significantly greater for overweight or obese adolescents in Australia compared with normal/underweight adolescents.²⁰ They concluded that the percentage of correct classification of overweight or obesity from self-reported data was 69% for boys and 70% for girls.²⁰

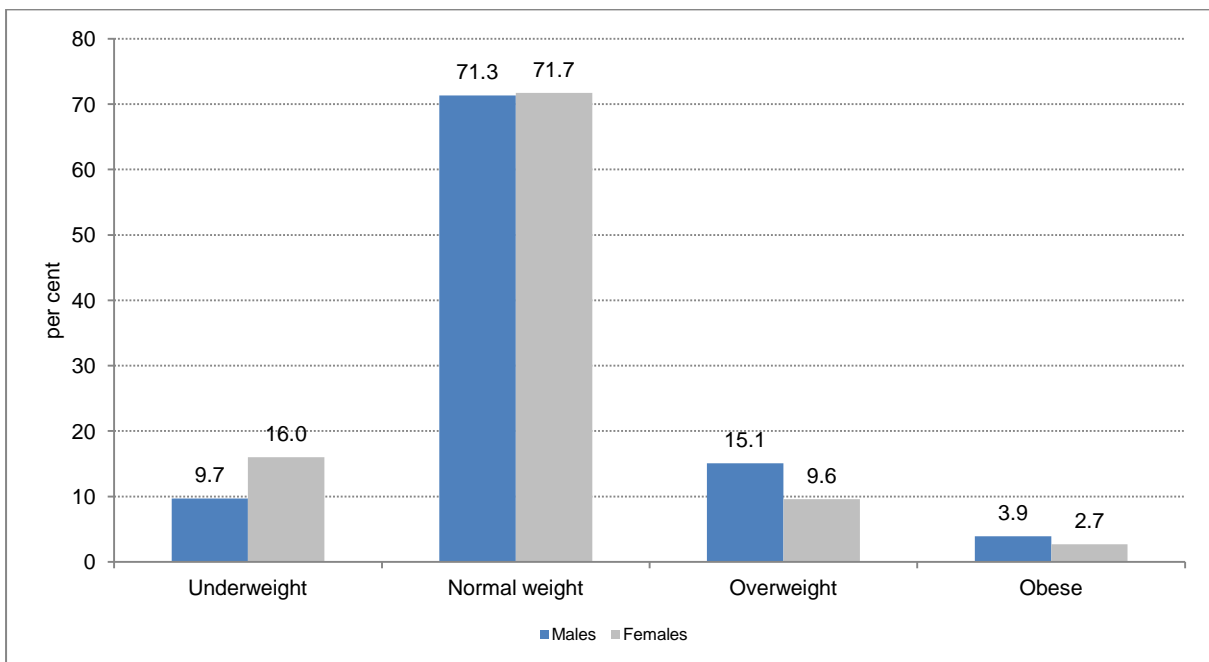
Figure 30: BMI status, % of students, ACT, 2005-2011



Source: ASSAD confidentialised unit record files, 2005, 2008 & 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷

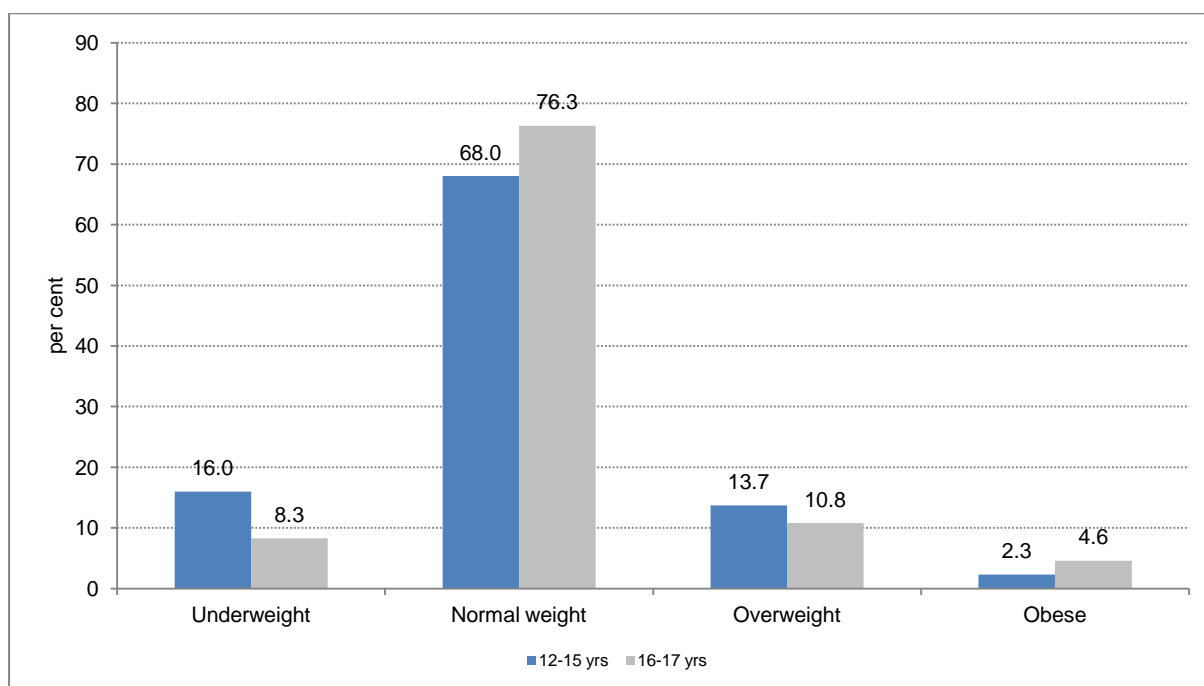
In 2011, females and younger students were significantly more likely than males and older students to be underweight. Males were significantly more likely to be overweight than females, but there was not a statistically significant difference between age groups (Figure 31 and Figure 32). Younger students (both males and females) were more likely than older students to be overweight or underweight, but less likely to be normal weight or obese (Figure 33 and Figure 34).

Figure 31: BMI status, % of students by sex, ACT, 2011



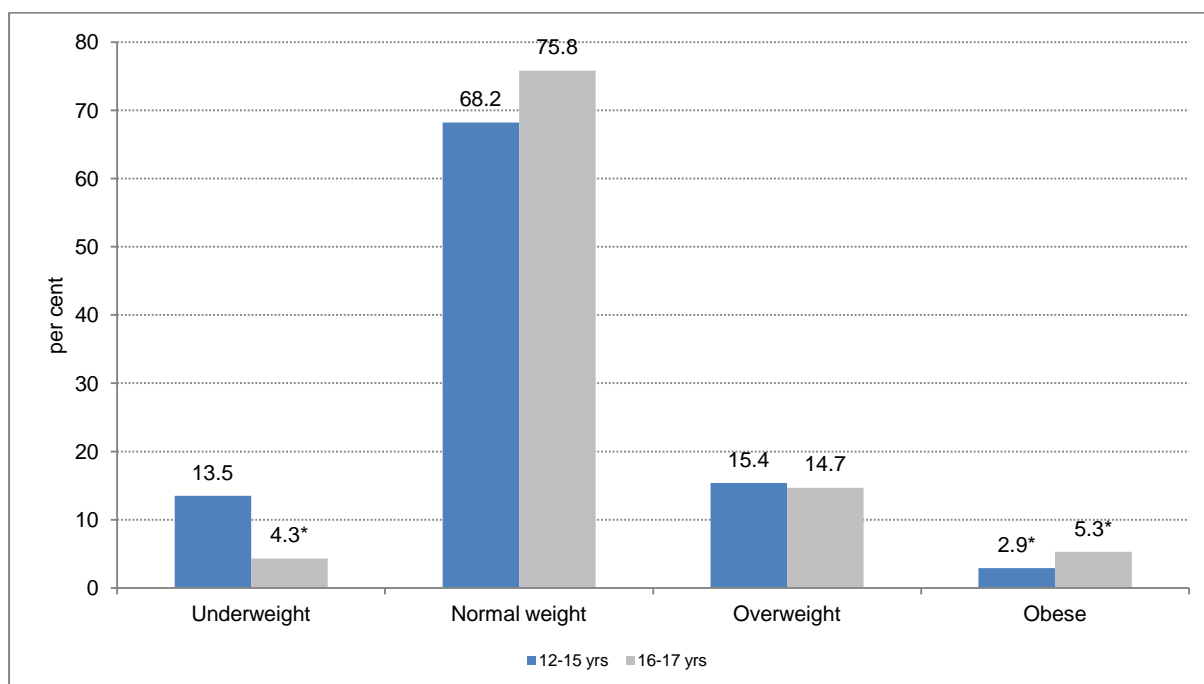
Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷

Figure 32: BMI status, % of students by age group, ACT, 2011



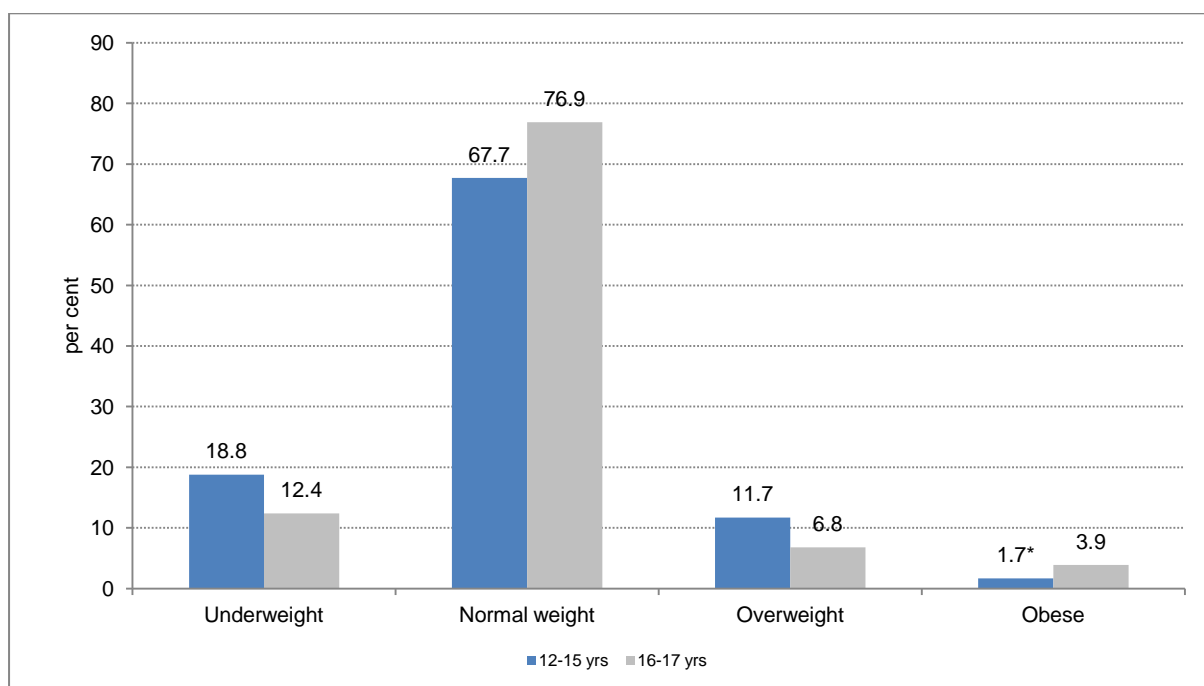
Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷

Figure 33: BMI status, % of males by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Figure 34: BMI status, % of females by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

7.2. Attitudes to weight and actions taken

Students were asked about perceptions of their own weight (Table 12) and whether they were happy with that weight (Table 13). Of those in the normal weight range only 65.1% thought they were about the right weight. A further 20.2% thought they were overweight and 14.6% thought they were underweight. Only 38.6% of females in the normal weight category were happy with their weight, while 72.6% of males in the normal weight category were happy with their weight.

Students who were overweight had a similar accuracy in perceiving their weight classification: 66.3% thought they were overweight, 28.2% thought they were about the right weight and 5.6% thought they were underweight. Of males in the overweight/obese category, 37.9% thought they were about the right weight, compared with only 11.3% of females. For students in the overweight/obese category, 40.6% of males and 8.9% of females were happy with their weight.

Table 12: Perceived weight, % of students by BMI status & sex, ACT, 2011

BMI status	Do you think you are...?						
	Underweight	Males			Females		
		About the right weight	Overweight	Underweight	About the right weight	Overweight	
Underweight	67.0	28.8	**	40.7	51.9	7.4*	
Normal weight	21.8	66.3	11.9	6.9	63.9	29.2	
Overweight/obese	8.8*	37.9	53.2	**	11.3	90.7	

Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷
 Totals may not add to 100% due to rounding.
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.
 ** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

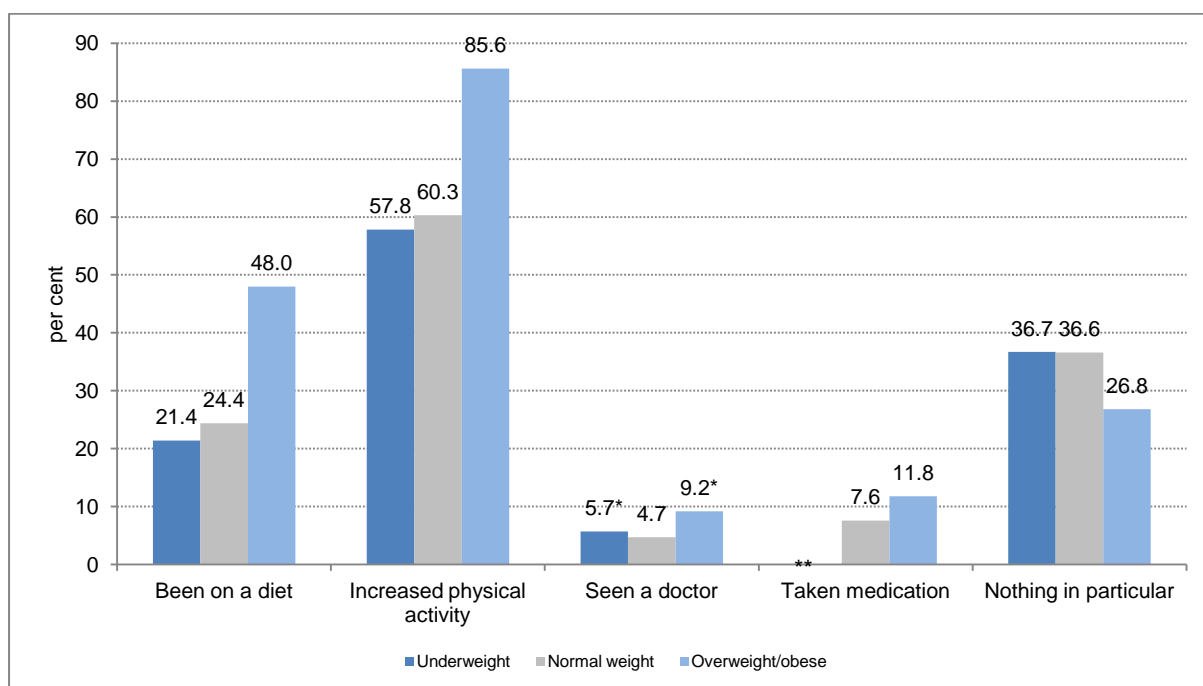
Table 13: Satisfaction with weight, % of students by BMI status & sex, ACT, 2011

How happy are you with your weight?						
BMI status	Males			Females		
	Happy	In between	Unhappy	Happy	In between	Unhappy
Underweight	59.8	30.8*	**	62.2	29.9	7.9*
Normal weight	72.6	19.4	7.9	38.6	40.1	21.2
Overweight/obese	40.6	33.7	25.7	8.9*	29.0	62.0

Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷
 Totals may not add to 100% due to rounding.
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.
 ** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Students were asked about activities they had undertaken in the last 12 months to control their weight. For those students in the overweight/obese category, increasing physical activity (85.6%) was the most common strategy employed to control weight, followed by dieting (48.0%) (Figure 35).

Figure 35: Actions taken to change body weight in last year, % of students by BMI status, ACT, 2011

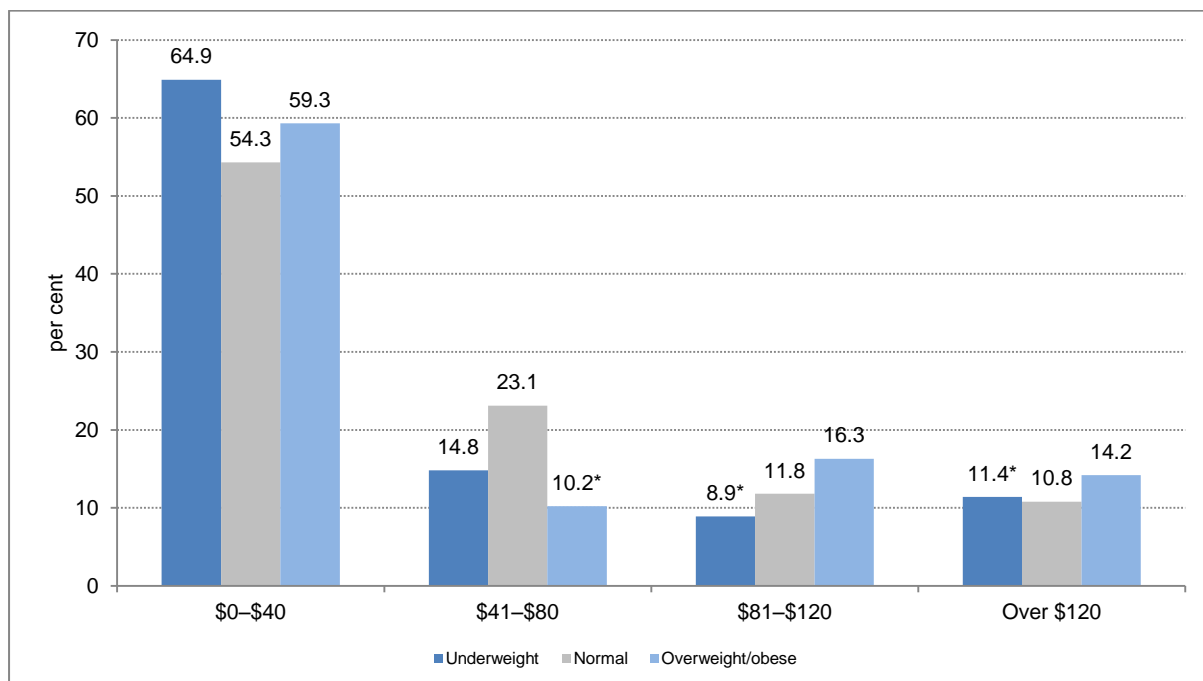


Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷
 * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.
 ** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

7.3. BMI status and student income

Of the 1,546 survey respondents in 2011, 778 answered questions about how much money they had available to spend on themselves e.g. from pocket money or a part-time job (Figure 36). Income was not a statistically significant predictor of BMI category. The majority of students were in the lowest income bracket (64.9% of underweight students, 54.3% of normal weight students and 59.3% of overweight/obese students).

Figure 36: Income, % of students by BMI status, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷.

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

7.4. Nutrition

In 2005, 2008 and 2011, students were asked a range of questions about their diet, including how many times in the last week they had consumed a fast food meal¹, snacks² and soft drink³, and how many serves of fruit, vegetables and cereals they usually consumed each day.

7.4.1. Fast food, snacks and soft drink

In 2011, 22.8% of students reported that they had not consumed any fast food in the last week (a statistically significant increase from 18.6% in 2008), 34.3% reported consuming food from a fast food outlet once in the last week (not a statistically significant change from 33.4% in 2008) and 42.8%

¹ 'Fast food' is defined in the questionnaire as 'a fast food meal like McDonald's, Hungry Jacks, pizzas, fish and chips, hamburgers, meat pies, pasties etc'.

² 'Snacks' are defined in the questionnaire as being 'like a chocolate bar, a piece of cake, a packet of chips/twisties/corn chips, ice-cream, 3-4 sweet biscuits'.

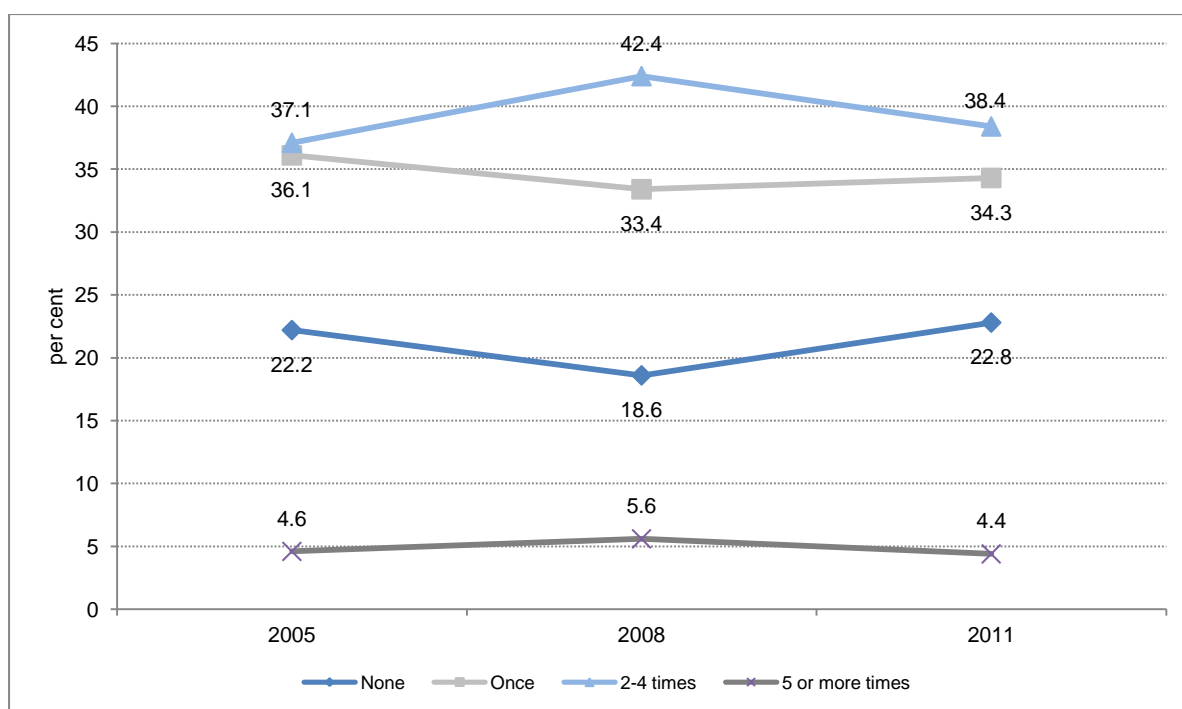
³ 'Soft drink/energy drink/fruit juice/cordial' is defined in the questionnaire as being 'like Coke, Pepsi, Lemonade, Fanta, and energy drink like Red Bull, V, Wild, fruit juice or having at least 2 glasses of cordial in a row'.

reported consuming food from a fast food outlet at least twice in the last week (a statistically significant decrease from 48.0% in 2008) (Figure 37).

Only 4.4% (a statistically significant increase from 2.6% in 2008) of students reported that they did not consume any snacks in the last week and 13.1% (a statistically significant decrease from 16.4% in 2008) reported eating seven or more snacks in the last week (Figure 38).

In 2011, 14.7% of students reported that they did not consume any soft drink/energy drink/fruit juice/cordial (a statistically significant increase from 9.1% in 2008) and 67.9% reported consuming one of these drinks at least twice in the last week (a statistically significant decrease from 77.3% in 2008) (Figure 39). More than one in five students (23.2%) reported consuming one of these drinks five or more times in the last week.

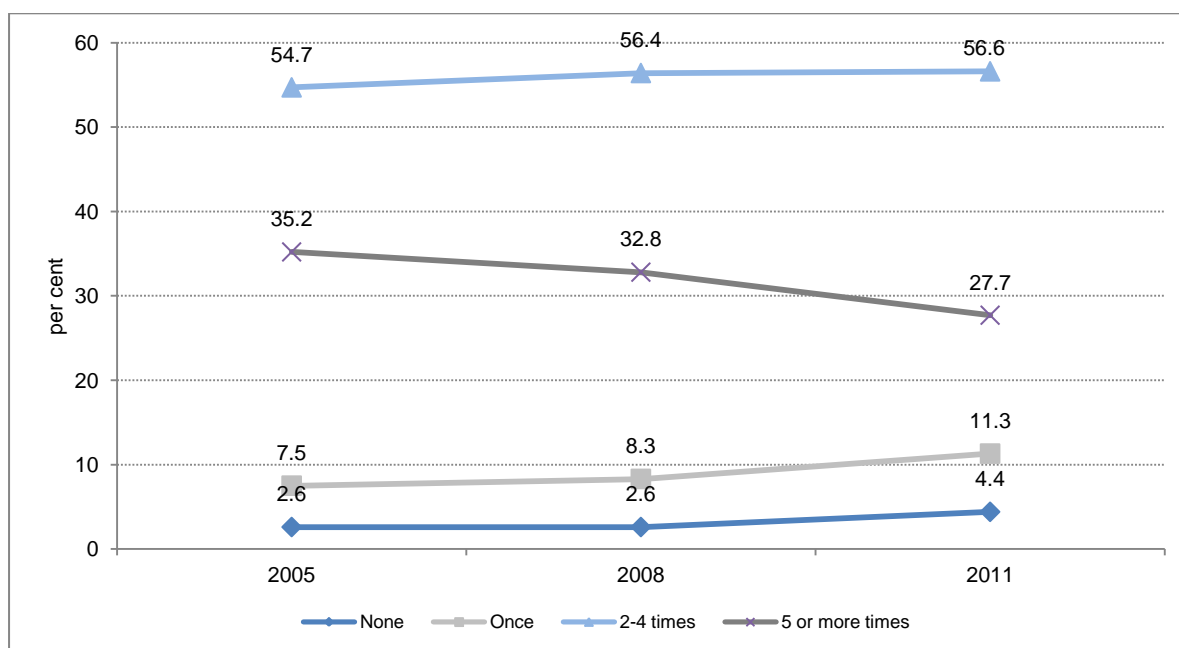
Figure 37: Number of fast food meals in the last week, % of students, ACT, 2005–2011



Source: ASSAD confidentialised unit record files, 2005, 2008 and 2011, ACT Health

Notes: 'Fast food' is defined in the questionnaire as 'a fast food meal like McDonald's, Hungry Jacks, pizzas, fish and chips, hamburgers, meat pies, pasties etc'.

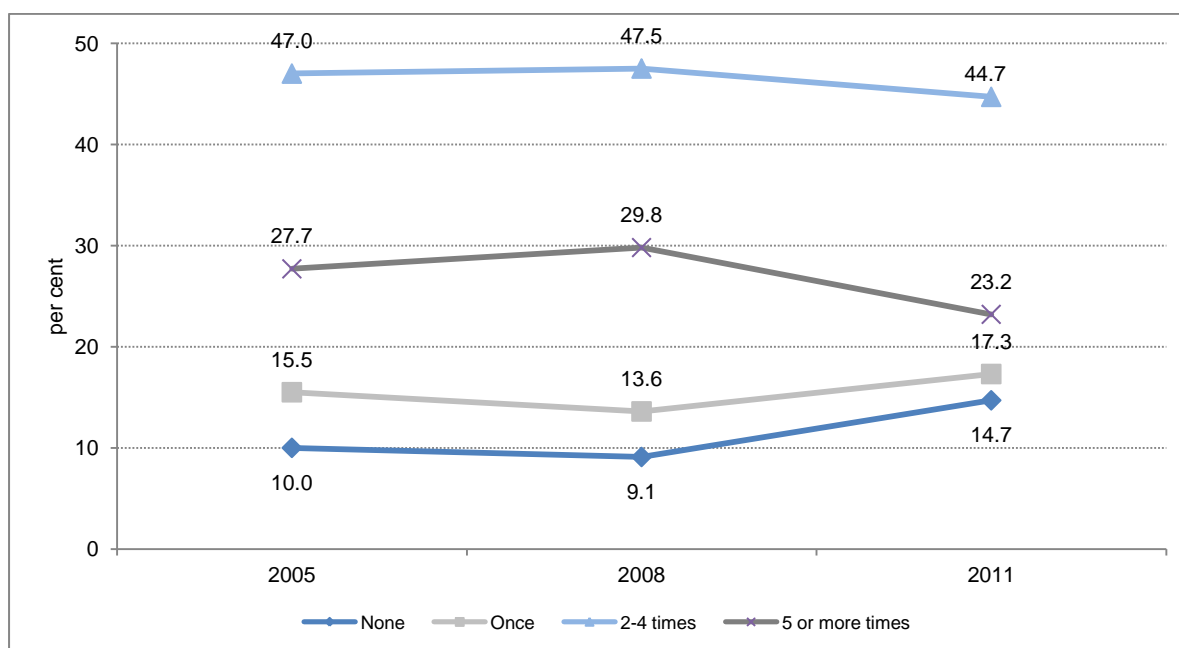
Figure 38: Number of snacks in the last week, % of students, ACT, 2005–2011



Source: ASSAD confidentialised unit record files, 2005, 2008 and 2011, ACT Health

Notes: 'Snacks' are defined in the questionnaire as being 'like a chocolate bar, a piece of cake, a packet of chips/twisties/corn chips, ice-cream, 3-4 sweet biscuits.

Figure 39: Number of soft drinks in the last week, % of students, ACT, 2005–2011

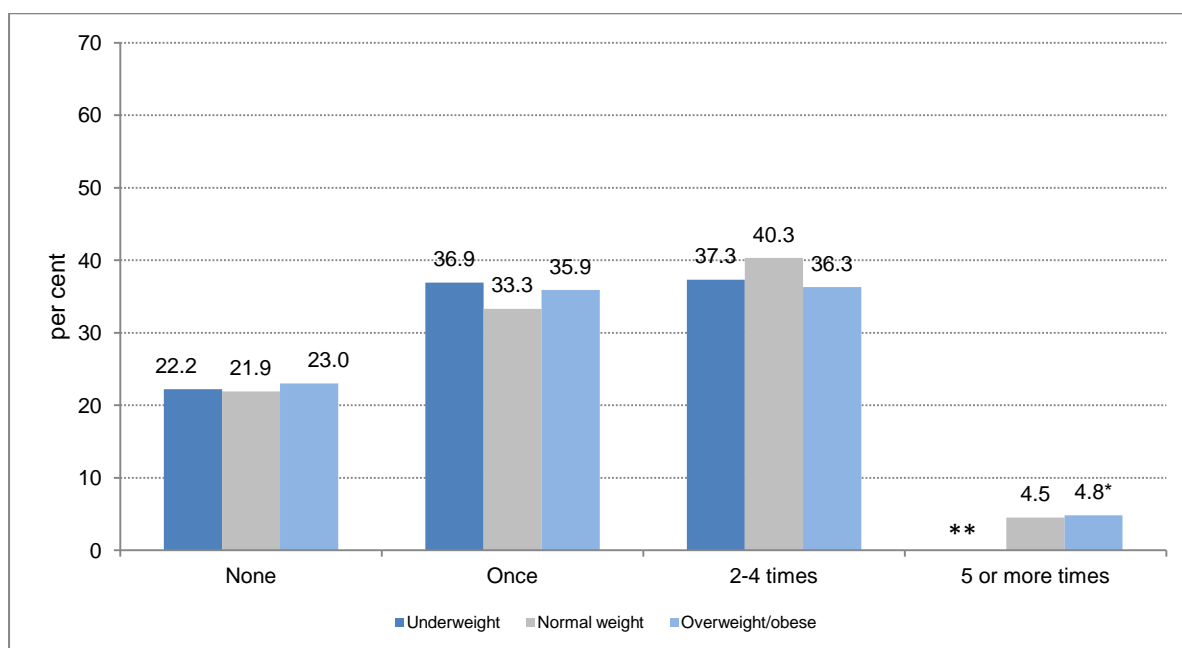


Source: ASSAD confidentialised unit record files, 2005, 2008 and 2011, ACT Health

Notes: 'Soft drink/energy drink/fruit juice/cordial' is defined in the questionnaire as being 'like Coke, Pepsi, Lemonade, Fanta, and energy drink like Red Bull, V, Wild, fruit juice or having at least 2 glasses of cordial in a row'.

Analysis of these questions by BMI status indicated that responses were independent of BMI status, that is, not statistically significant (Figure 40, Figure 41 and Figure 42).

Figure 40: Number of fast food meals in the last week, % of students by BMI status, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

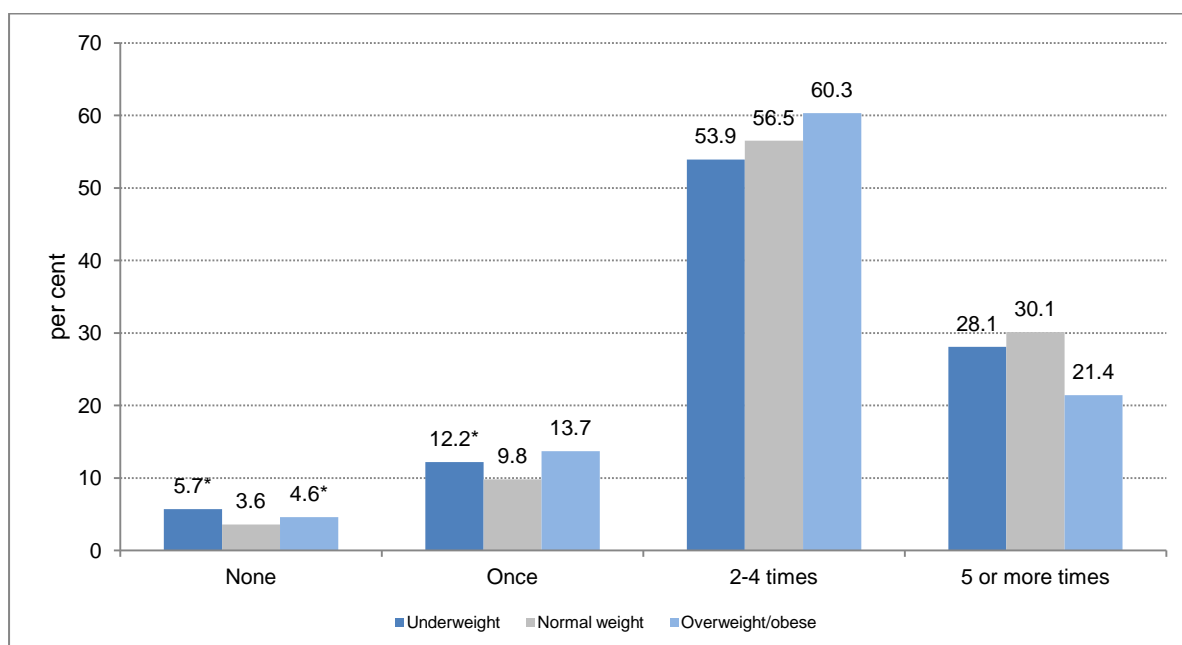
Notes: 'Fast food' is defined in the questionnaire as 'a fast food meal like McDonald's, Hungry Jacks, pizzas, fish and chips, hamburgers, meat pies, pasties etc'.

BMI categories for adolescents are defined in Cole, et al. ²¹ and Cole, et al. ¹⁷

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

** Estimate has a relative standard error greater than 50% and is considered too unreliable for use.

Figure 41: Number of snacks in the last week, % of students by BMI status, ACT, 2011



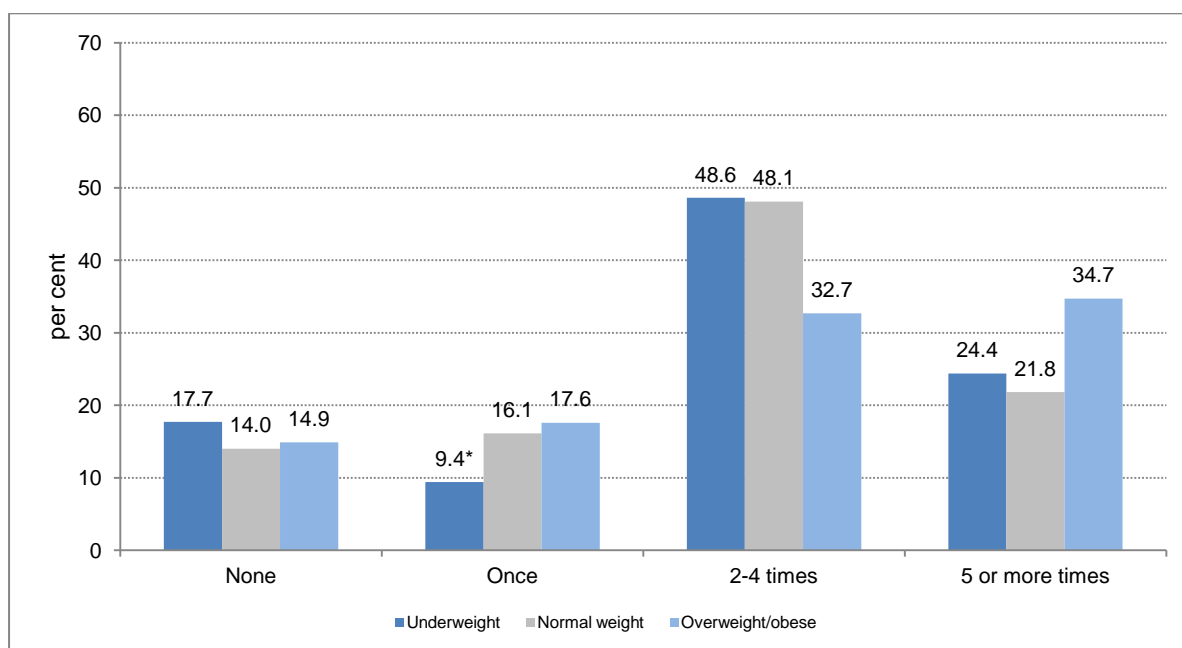
Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: 'Snacks' are defined in the questionnaire as being 'like a chocolate bar, a piece of cake, a packet of chips/twisties/corn chips, ice-cream, 3-4 sweet biscuits.

BMI categories for adolescents are defined in Cole, et al. ²¹ and Cole, et al. ¹⁷

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Figure 42: Number of soft drinks in the last week, % of students by BMI status, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: 'Soft drink/energy drink/fruit juice/cordial' is defined in the questionnaire as being 'like Coke, Pepsi, Lemonade, Fanta, and energy drink like Red Bull, V, Wild, fruit juice or having at least 2 glasses of cordial in a row'. BMI categories for adolescents are defined in Cole, et al.²¹ and Cole, et al.¹⁷

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

7.4.2. Fruit, vegetable and cereal consumption

According to the 2003 National Health and Medical Research Council (NHMRC) *Dietary Guidelines for Children and Adolescents in Australia*¹⁰, adolescents (12–18 years) should eat on average at least three serves of fruit, four serves of vegetables and a minimum of five serves of cereals each day.

In 2011, 44.8% of students reported consuming at least three serves of fruit (not a statistically significant change from 41.7% in 2008) (Table 14). The difference between younger students (46.9%) and older students (40.3%) was not statistically significant. Similarly, the difference between males (45.9%) and females (43.6%) was not significant. Differences within BMI status were not statistically significant.

Only 28.2% of students met the guideline of four serves of vegetables a day (a statistically significant increase from 22.3% in 2008). Again, the difference between younger students (29.0%) and older students (26.4%) was not statistically significant. Males (30.3%) were significantly more likely than females (26.1%) to meet the guideline. Differences within BMI status were not statistically significant.

In 2011, 16.5% of students met the guideline for five serves of cereals each day (not a statistically significant change from 17.7% in 2008). The difference between older students (18.2%) and younger students (15.7%) was not statistically significant. More males (21.4%) met the guideline than females (11.9%) and this difference was statistically significant. Differences within BMI status were not statistically significant.

Only 4.9% of students met the guidelines for fruit, vegetables and grains (not a statistically significant change from 3.0% in 2008). There was not a statistically significant difference between younger students (4.8%) and older students (5.1%), but males (6.1%) were significantly more likely to meet all three guidelines than females (3.8%). There were statistically significant differences between the BMI categories with underweight students (9.3%) more likely to meet the three guidelines than students of normal weight (7.4%). Students in the overweight/obese category (0.7%) were least likely to meet the three guidelines.

Table 14: Met selected dietary guidelines, % of students by sex & age group, ACT, 2011

Met guidelines for minimum recommended	Sex		Total	Age group	
	Males	Females		12-15 years	16-17 years
Serves of fruit	45.9	43.6	44.8	46.9	40.3
Serves of vegetables	30.3 [#]	26.1	28.2	29.0	26.4
Serves of cereals	21.4 [#]	11.9	16.5	15.7	18.2
Serves of fruit, vegetables and cereals	6.1 [#]	3.8	4.9	4.8	5.1

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Notes: The NHMRC *Dietary Guidelines for Children and Adolescents in Australia*¹⁰, recommend that adolescents (12-18 yrs) should eat on average at least three serves of fruit, four serves of vegetables and a minimum of five serves of cereals each day.

Denotes a statistically significant difference between the sexes.

In 2013, NHMRC released updated Australian Dietary Guidelines.²² Questions on nutrition for the 2005, 2008 and 2011 ASSAD surveys were formulated in line with the 2003 NHMRC Australian Dietary Guidelines so data has been analysed accordingly.

The 2013 NHMRC Australian Dietary Guidelines are summarised in Appendix 10.5 for comparison.

7.5. Physical activity, screen time and homework

In 2005, 2008 and 2011, students were asked questions about their physical activity levels, including how many times in the last week they had undertaken at least 30 minutes of moderate or vigorous activity; how many days in the last week they had undertaken vigorous or moderate activity for at least 60 minutes; and, how many hours on an average school day they would do homework, watch TV or videos, use the internet or play computer games.

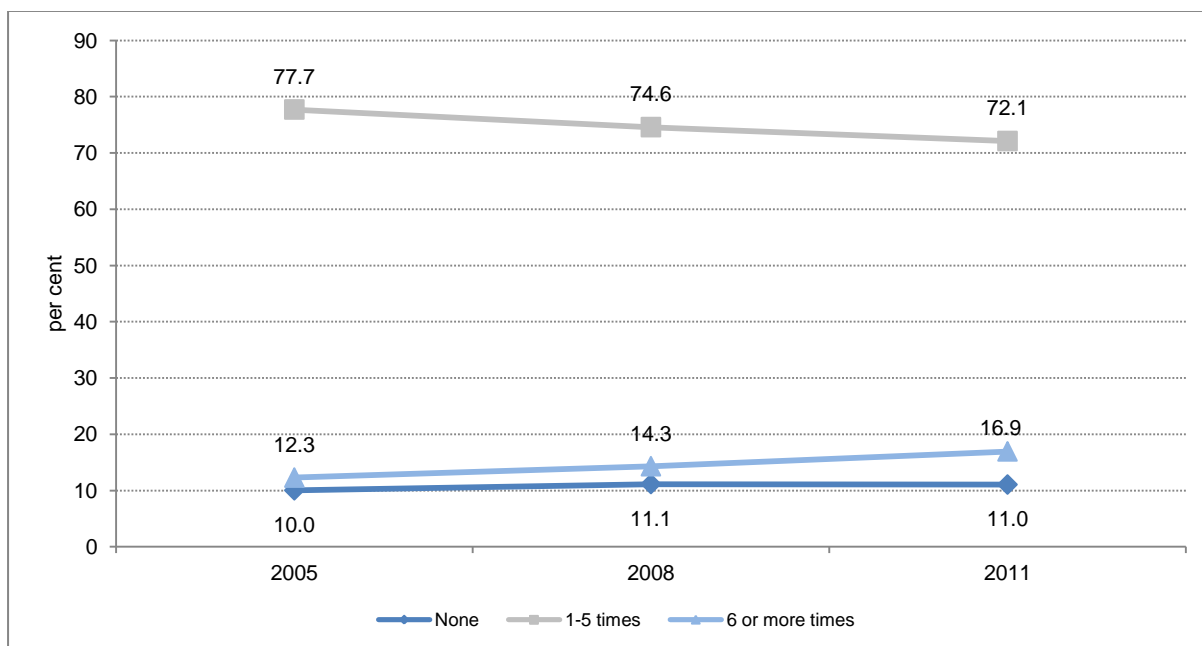
The Department of Health and Ageing¹¹ recommends that 12–18 year olds:

- ◆ should be doing at least 60 minutes of moderate to vigorous physical activity every day to keep healthy; and
- ◆ should not spend more than two hours a day surfing the net, watching TV or playing video games.

7.5.1. Physical activity

The results of the 2011 survey show that of those students who answered the questions about physical activity, 11.0% reported that they did not do any vigorous physical activity in the last week, 72.1% did at least 30 minutes of vigorous activity 1–5 times and 16.9% did at least 30 minutes of vigorous activity six or more times in the last week (Figure 43). These results are similar to those found in 2008 and the differences are not statistically significant.

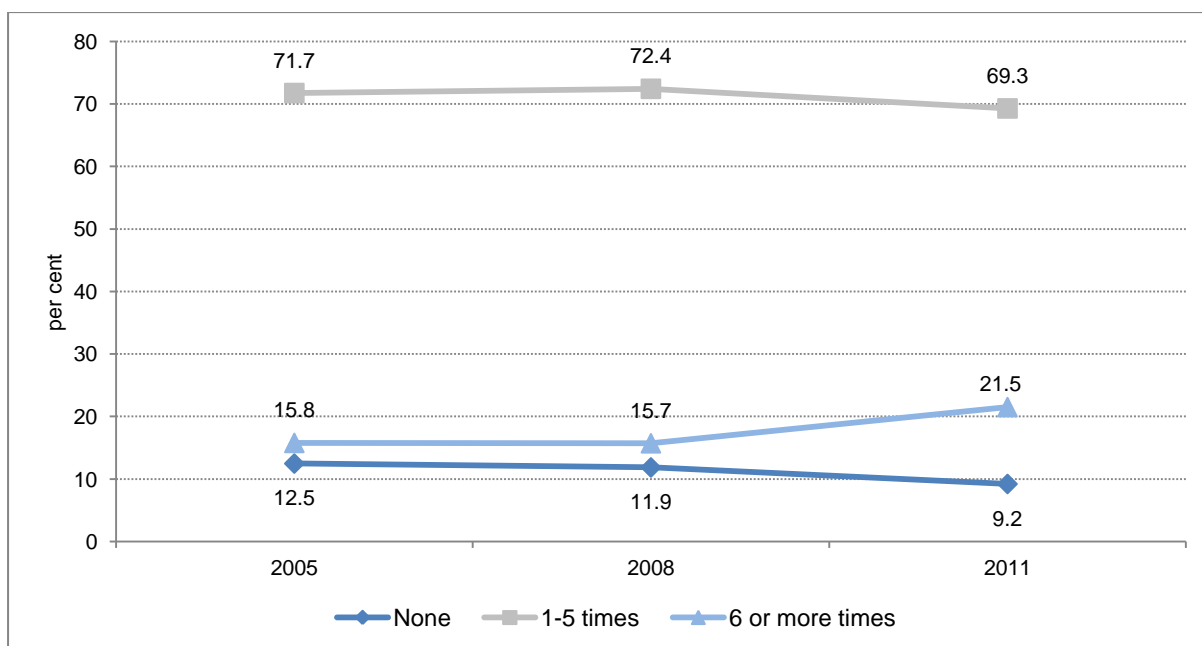
Figure 43: Number of times participated in vigorous activity for at least 30 minutes in past week, % of students, ACT, 2005–2011



Source: ASSAD confidentialised unit record files, 2005, 2008 and 2011, ACT Health
 Note: Estimates have changed slightly from previous reports due to coding changes.

When asked about moderate activity 9.2% of students reported that they did not do any moderate physical activity in the last week (11.9% in 2008), 69.3% did at least 30 minutes of moderate activity between one and five times in the last week (72.4% in 2008) and 21.5% did at least 30 minutes of moderate activity six or more times in the last week (15.7% in 2008) (Figure 44). The differences between 2008 and 2011 were statistically significant.

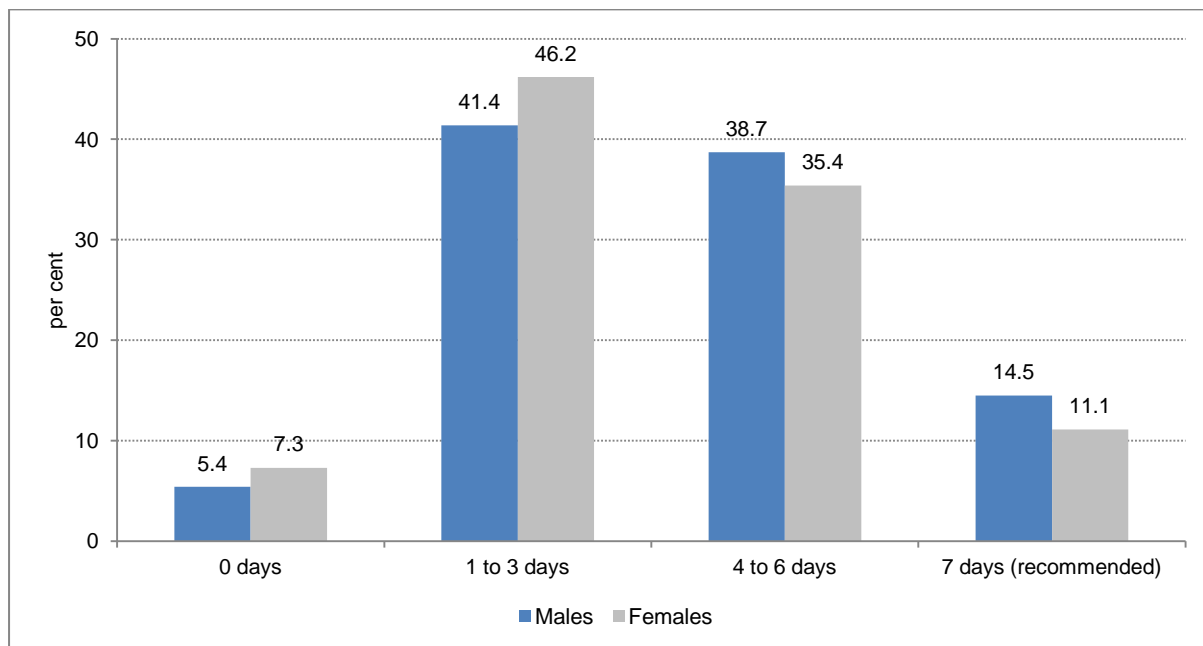
Figure 44: Number of times participated in moderate activity for at least 30 minutes in past week, % of students, ACT, 2005–2011



Source: ASSAD confidentialised unit record files, 2005, 2008 and 2011, ACT Health

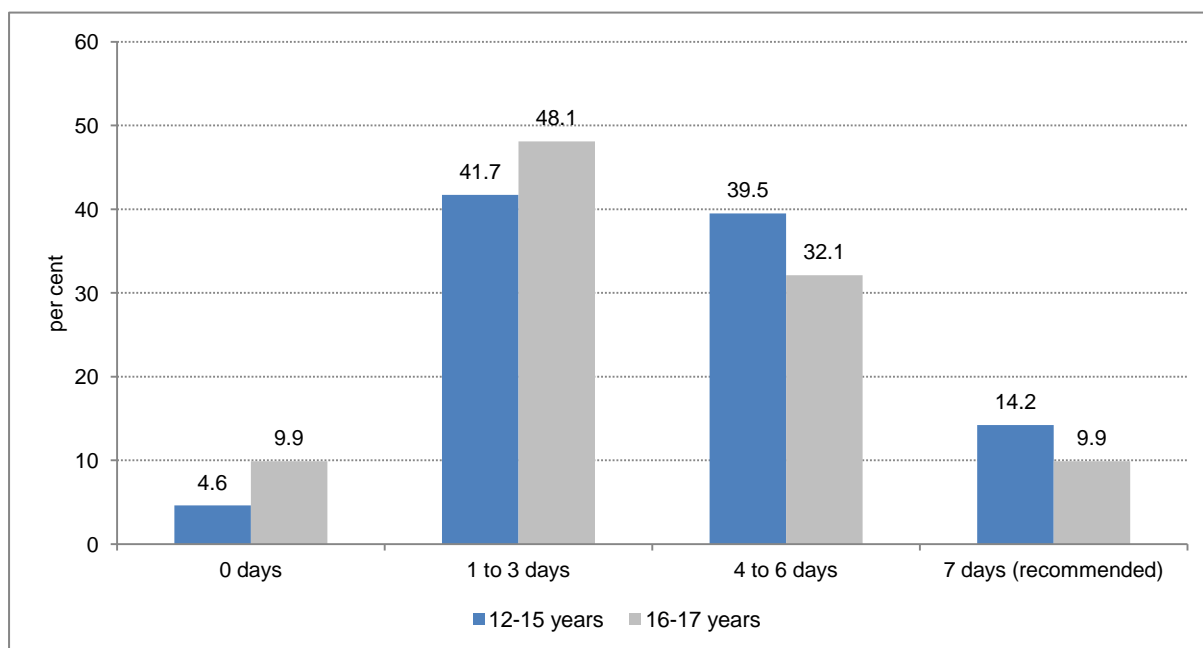
In 2011, 12.8% of students reported doing at least 60 minutes of vigorous or moderate physical activity each day in the last week thereby meeting the recommendation. This is a statistically significant decrease from 15.6% in 2008. Males (14.5%) and younger students (14.2%) were significantly more likely to meet the recommendation than females (11.1%) and older students (9.9%) (Figure 45 and Figure 46).

Figure 45: Number of times participated in vigorous or moderate physical activity for at least 60 minutes in past week, % of students by sex, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

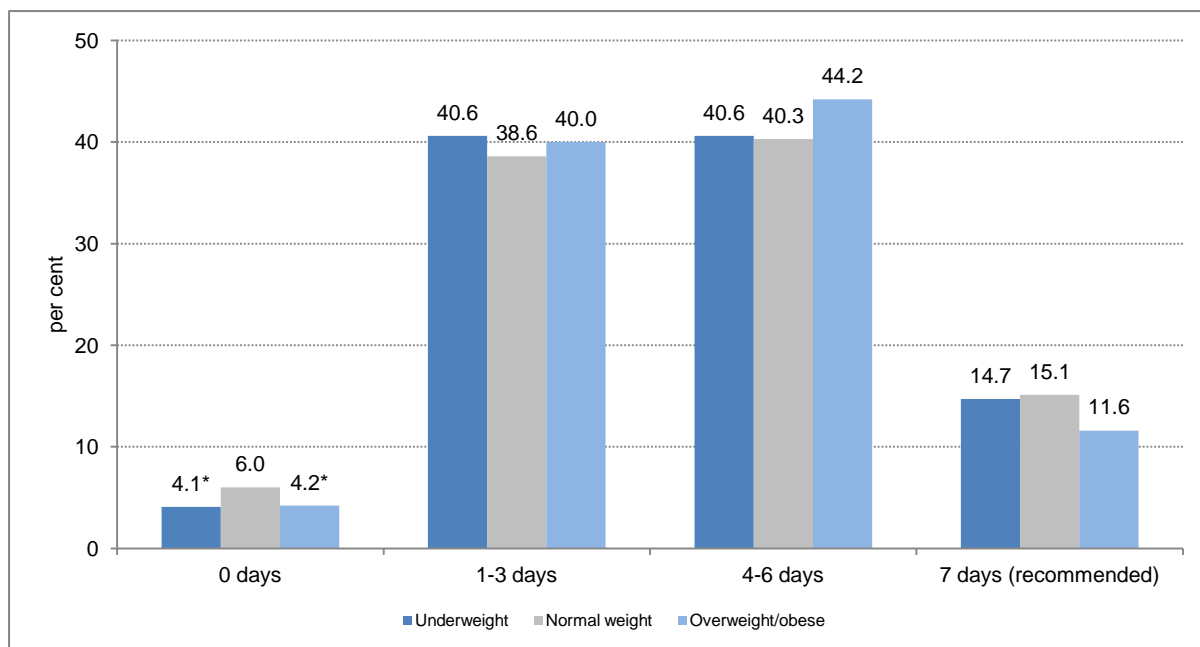
Figure 46: Number of times participated in vigorous or moderate physical activity for at least 60 minutes in past week, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Participation in at least 60 minutes of vigorous or moderate physical activity was found to be independent or unrelated to BMI status with the relationship between them showing no statistical significance (Figure 47).

Figure 47: Number of times participated in vigorous or moderate physical activity for at least 60 minutes in past week, % of students by BMI category, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health
 Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

7.5.2. Screen time

When asked about the amount of time they spent on the internet, playing computer games, or watching TV or videos, 26.3% of students surveyed in 2011 reported spending two hours or less engaged in these activities on an average school day. This was not a statistically significant change from 25.0% in 2008 (29.9% in 2005). Males (76.9%) were significantly more likely than females (70.5%) to spend more than two hours engaged in these activities. Similarly, older students (80.9%) were significantly more likely than younger students (70.2%) to spend two hours engaged in these activities.

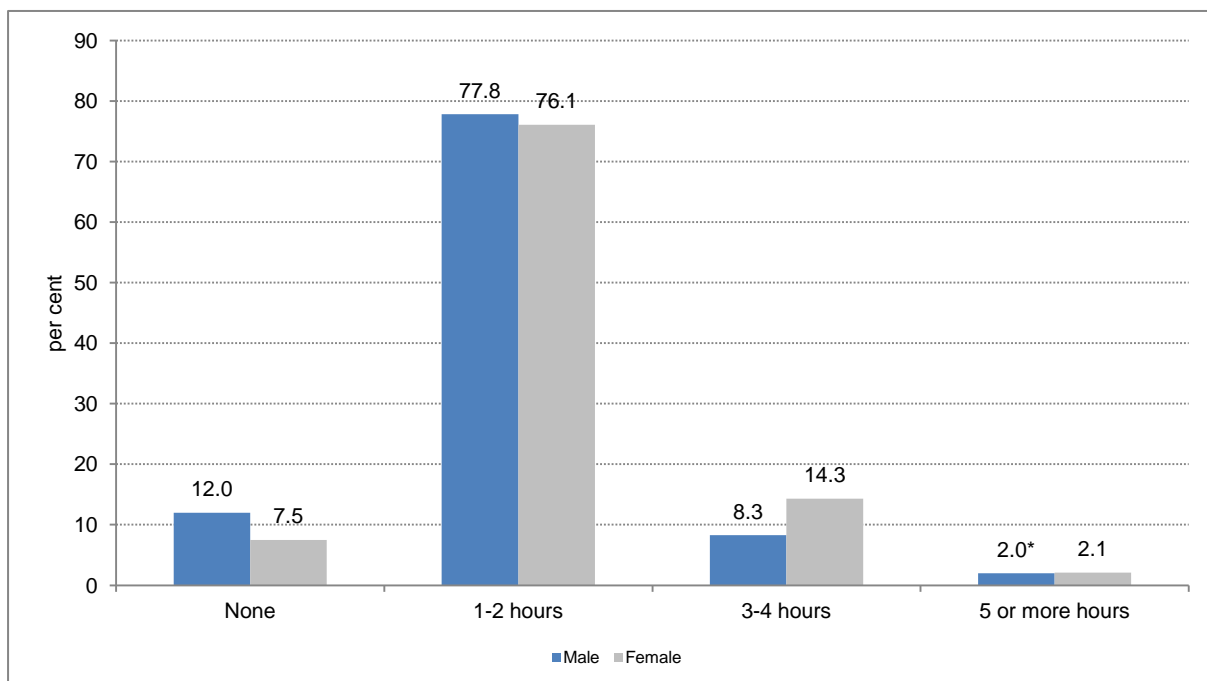
7.5.3. Physical activity and screen time overall guideline

In 2011, only 4.2% of students met the recommendations for physical activity and time spent surfing the net, watching TV or playing video games. This was not significantly different from 5.0% in 2008 (5.1% in 2005). Younger students (5.2%) were significantly more likely than older students (2.3%) to meet both recommendations but the difference between the sexes was not significant (4.0% for males and 4.4% for females).

7.5.4. Homework

Students were also asked how many hours they spent doing homework on an average school day. In 2011, 9.7% of students reported doing no homework, 77.0% reported doing 1–2 hours, 11.3% did 3–4 hours and 2.0% reported doing 5 or more hours. There were statistically significant differences between the sexes with males more likely to do no homework or 1–2 hours and females more likely to do 3–4 hours or 5 or more hours (Figure 48). Similarly there were statistically significant differences between the age groups with older students more likely to do no homework, 3–4 hours and 5 or more hours and younger students more likely to do 1–2 hours (Figure 49).

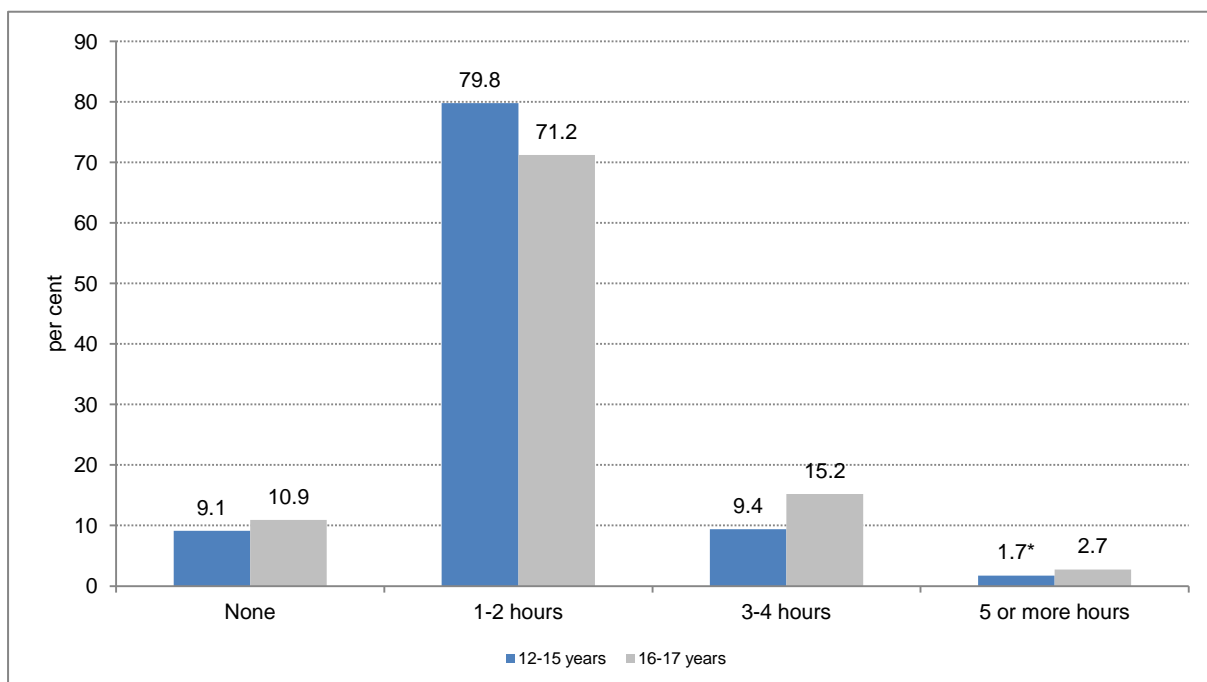
Figure 48: Number of hours of homework done on average school day, % of students by sex, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

Figure 49: Number of hours of homework done on average school day, % of students by age group, ACT, 2011



Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: * Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

8. ABBREVIATIONS

ABS	Australian Bureau of Statistics
ACT	Australian Capital Territory
ASSAD	Australian Secondary Students' Alcohol and Drug Survey (1996, 1999, 2002, 2005, 2008 and 2011)
BMI	Body Mass Index (see Glossary for explanation)
DoHA	Department of Health and Ageing
NaSSDA	National Secondary Students' Diet and Activity Survey
NHRMC	National Health and Medical Research Council
NHS	National Health Survey
RSE	Relative Standard Error (see Glossary for explanation)
SPF	Sun Protection Factor
WHO	World Health Organization

9. GLOSSARY

ALCOHOL INTAKE: NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL GUIDELINES

The National Health and Medical Research Council (NHMRC) recommends that:

- ◆ For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.
- ◆ For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.
- ◆ Children under 15 years of age are at the greatest risk of harm from drinking and for this age group, not drinking alcohol is especially important.
- ◆ For young people aged 15–17 years, the safest option is to delay the initiation of drinking for as long as possible.¹⁴

BODY MASS INDEX (BMI)

The BMI provides a useful estimate of excess weight as it measures an individual's weight in relation to their height.

$$BMI = \frac{\text{weight in kilograms}}{(\text{height in metres})^2}$$

BMI is complex for children. Categories used in this report are defined specifically for males and females of each age in Cole, et al.²¹ and Cole, et al.¹⁷. See Appendix 10.4 for definitions of BMI categories.

DIETARY INTAKE: NATIONAL HEALTH AND MEDICAL RESEARCH GUIDELINES

The National Health and Medical Research Council guidelines recommend that for a healthy diet, young people aged between 12 and 18 years should consume at least 3 serves of fruit, 4 serves of vegetables/legumes and 5 serves of cereals (including breads, rice, pasta, noodles) each day.²³

PHYSICAL ACTIVITY LEVELS: DEPARTMENT OF HEALTH AND AGEING GUIDELINES

The Department of Health and Ageing¹¹ recommends that 12–18 year olds:

- ◆ should be doing at least 60 minutes of moderate to vigorous physical activity every day to keep healthy; and
- ◆ should not spend more than two hours a day surfing the net, watching TV or playing video games.

RELATIVE STANDARD ERROR (RSE)

Relative standard errors provide an indication of the reliability of an estimate. Estimates with RSEs less than 25% are generally regarded as reliable. Estimates with a relative standard error (RSE) between 25% and 50% should be interpreted with caution and have been indicated with a single asterisk (*) in this report. Estimates with a RSE above 50% are considered unreliable and have not been included in this report. In tables and graphs where other estimates are reliable, estimates with a RSE above 50% have not been included, but are indicated by a double asterisk (**).

STATISTICAL SIGNIFICANCE

In statistics, a result is significant if it is considered unlikely to have occurred by chance. For the purpose of this report 'significant' implies that a test of significance has been applied. A result was deemed statistically significant (i.e. there is an effect that is considered unlikely to be due to chance alone) if the p-value obtained was less than 0.05, or if comparing confidence intervals, there was not overlap between intervals, depending on the type of data available for hypothesis testing. Note that statistical significance is different to clinical significance.

YOUNGER STUDENTS/OLDER STUDENTS

For the purposes of the analyses in this report, younger students are those aged 12 to 15 years and older students are aged 16 to 17 years.

10. Appendices

10.1. Comparisons with Australian data

10.1.1. Alcohol use

Table 15: Alcohol use, % of students, ACT & Australia, 2011

	ACT 2011	Australia 2011
Consumption of alcohol:		
Ever	73.2	74.0
In last year	48.5	50.7
In last month	24.4	29.1 [#]
In last week	14.0	17.4 [#]
Single-occasion risky drinking	4.3	6.4 [#]

Source: ASSAD confidentialised unit record files 2011, ACT Health
ASSAD confidentialised unit record files 2011, Australia, Cancer Council Victoria

Notes: # Denotes a statistically significant difference between the ACT and Australia.

10.1.2. Tobacco use

Table 16: Tobacco use, % of students, ACT & Australia, 2011

	ACT 2011	Australia 2011
Tobacco use:		
Ever	19.1	23.3 [#]
In last week	5.8	6.7

Source: ASSAD confidentialised unit record files 2011, ACT Health
ASSAD confidentialised unit record files 2011, Australia, Cancer Council Victoria

Notes: # Denotes a statistically significant difference between the ACT and Australia.

10.1.3. Illicit substance and other drug use

Table 17: Illicit substance and other drug use, % of students, ACT & Australia, 2011

	ACT 2011	Australia 2011
Use of illicit drugs in lifetime, % of students	12.7	15.6 [#]
Use of drug in lifetime:		
Cannabis	11.9	14.8 [#]
Hallucinogens	2.0	3.0 [#]
Amphetamines	2.5	2.9
Ecstasy	1.9	2.7
Heroin	0.9*	1.6 [#]
Cocaine	1.6	1.7
Painkillers	96.5	96.2
Inhalants	14.9	17.3 [#]
Tranquilisers	19.2	17.1 [#]
Steroids	2.0	2.0
Use of drug in last week:		
Cannabis	3.6	3.6
Painkillers	38.0	39.0
Inhalants	3.9	4.4
Tranquilisers	2.3	2.2

Source: ASSAD confidentialised unit record files 2011, ACT Health
ASSAD confidentialised unit record files 2011, Australia, Cancer Council Victoria

Note: # Denotes a statistically significant difference between the ACT and Australia.

* Estimate has a relative standard error between 25% and 50% and should be interpreted with caution.

10.2. Number of students surveyed by age, sex and education sector

Table 18: Number of full-time students surveyed, by education sector, sex & age, ACT, 2011

	Age in years						Total
	12	13	14	15	16	17	
Government							
Males	37	73	69	58	93	104	434
Females	41	93	79	68	97	98	476
Total	78	166	148	126	190	202	910
Non-government							
Males	23	53	92	70	25	8	271
Females	22	48	30	27	103	131	361
Total	45	101	122	97	128	139	632
ACT Total	123	267	270	223	318	341	1542

Source: ASSAD confidentialised unit record file, 2011, ACT Health

Note: Data were weighted to reflect the actual population size of 12 to 17 year olds in the ACT based on education sector (government or non-government), sex and age.

10.3. ACT student numbers by education sector, sex and age for all students and Aboriginal and Torres Strait Islander students, 2011

Table 19: Full-time students by education sector, sex & age, ACT, 2011

	Age in years						Total
	12	13	14	15	16	17	
Government							
Males	1254	1236	1266	1220	1488	1264	7728
Females	1172	1218	1151	1153	1346	1348	7388
Total	2426	2454	2417	2373	2834	2612	15116
Non-government							
Males	1182	1175	1221	1184	1050	911	6723
Females	1195	1203	1264	1190	981	937	6770
Total	2377	2378	2485	2374	2031	1848	13493
Totals	4803	4832	4902	4747	4865	4460	28609

Source: ABS 4221.0 Schools, Australia, 2011¹²

Table 20: Aboriginal & Torres-Strait Islander full-time students by education sector, sex & age, ACT, 2011

	Age in years						Total
	12	13	14	15	16	17	
Government							
Males	48	43	45	35	37	31	239
Females	41	36	38	31	35	27	208
Total	89	79	83	66	72	58	447
Non-government							
Males	14	11	13	13	18	3	72
Females	15	23	14	15	7	4	78
Total	29	34	27	28	25	7	150
Totals	118	113	110	94	97	65	597

Source: ABS 4221.0 Schools, Australia, 2011¹²

10.4. BMI categories for adolescents

Table 21: BMI values for BMI categories by age, males

Age (years)	Underweight	Normal weight	Overweight	Obese
12.5	≤15.57	≥15.58 and ≤21.55	≥21.56 and ≤26.42	≥26.43
13.5	≤16.11	≥16.12 and ≤22.26	≥22.27 and ≤27.24	≥27.25
14.5	≤16.68	≥16.69 and ≤22.95	≥22.96 and ≤27.97	≥27.98
15.5	≤17.25	≥17.26 and ≤23.59	≥23.60 and ≤28.59	≥28.60
16.5	≤17.79	≥17.80 and ≤24.18	≥24.19 and ≤29.13	≥29.14
17.5	≤18.27	≥18.28 and ≤24.72	≥24.73 and ≤29.69	≥29.70

Source: Cole, Bellizzi et al ²¹ and Cole, Flegal et al ¹⁷

Table 22: BMI values for BMI categories by age, females

Age (years)	Underweight	Normal weight	Overweight	Obese
12.5	≤15.92	≥15.93 and ≤22.13	≥22.14 and ≤27.23	≥27.24
13.5	≤16.56	≥16.57 and ≤22.97	≥22.98 and ≤28.19	≥28.20
14.5	≤17.17	≥17.18 and ≤23.65	≥23.66 and ≤28.86	≥28.87
15.5	≤17.68	≥17.69 and ≤24.16	≥24.17 and ≤29.28	≥29.29
16.5	≤18.08	≥18.09 and ≤24.53	≥24.54 and ≤29.55	≥29.56
17.5	≤18.37	≥18.38 and ≤24.84	≥24.85 and ≤28.83	≥29.84

Source: Cole, Bellizzi et al ²¹ and Cole, Flegal et al ¹⁷

10.5. National Health and Medical Research Council Australian Dietary Guidelines 2013

Table 23: Summary of NHMRC Australian Dietary Guidelines for 12–18 year olds, 2013

Food Groups	Sex	Serves per day	
		12-13 years	14-18 years
Vegetables and legumes/beans	Male	5½	5½
	Female	5	5
Fruit	Male	2	2
	Female	2	2
Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties	Male	6	7
	Female	5	7
Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans	Male	2½	2½
	Female	2½	2½
Milk, yoghurt, cheese and/or alternatives, mostly reduced fat	Male	3½	3½
	Female	3½	3½

Source: NHMRC 2013 Australian Dietary Guidelines: Healthy Eating for Children

10.6. Questionnaire

Survey

- **Please do not write your name on this paper.**
- The information you give is private and will only be seen by the researchers.
- Answer **every** question you can.
- If you can't answer a question or if you do not want to answer a question, leave it out and go on to the next one.
- You may withdraw from the survey at any time.
- **HOW TO ANSWER QUESTIONS:**

For most questions, there is a choice of answers.

Pick the one that's true for you and cross the box next to it like this: Yes

Please cross **ONE** Box only unless otherwise indicated.

If you make a mistake, simply scribble it out and mark the correct answer with a cross like this: No Yes

Some questions ask you to write a short answer in the space provided.

Use a ballpoint blue or black pen (do **NOT** use a felt tipped pen).

Office use only

STATE <input type="text" value="6"/>	SCHOOL <input type="text"/> <input type="text"/> <input type="text"/>	ID <input type="text"/> <input type="text"/> <input type="text"/>	POSTCODE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	LEVEL <input type="text"/>	CAMPUS <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
PATTERN <input type="text"/>	SCHSEX <input type="text"/>	STRATA <input type="text"/>	TEACH <input type="text"/>	DAY <input type="text"/>	
ORDER <input type="text" value="1"/>	INITIALS <input type="text"/> <input type="text"/> <input type="text"/>		DATE <input type="text"/> <input type="text"/>	MONTH <input type="text"/> <input type="text"/>	YEAR <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>

1. (a) What suburb or town do you live in?

1. (b) What is the postcode of your address?

2. What year level are you in?

Year 7

Year 9

Year 11

Year 8

Year 10

Year 12

3. How old are you now?

10

14

18

11

15

19 and over

12

16

13

17

4. What sex are you?

Male

Female

5. What is your date of birth?

Day

Month

Year

6. During a normal week, how much money do you have available to spend on yourself (eg from pocket money, part-time job)?

None

\$21 – \$40

\$81 – \$100

\$131 – \$140

\$10 or less

\$41 – \$60

\$101 – \$120

\$141 – \$150

\$11 – \$20

\$61 – \$80

\$121 – \$130

Over \$150

7. At school work, do you consider yourself:

A lot above average?

Above average?

Average?

Below average?

A lot below average?

8. Were you at school on the last school day?

- 1 Yes 2 No

9. Are you of Aboriginal or Torres Strait Islander descent?

- 1 No
2 Yes – Aboriginal descent
3 Yes – Torres Strait Islander descent
4 Yes – both Aboriginal and Torres Strait Islander descent

10. What is the main language spoken at home?

Cross only one box.

- 1 English
2 Another language only (*please specify which language*)

- 3 English and another language (*please specify the other language*)

THE NEXT FEW QUESTIONS ARE ABOUT DRINKING **ALCOHOL –
BEER, WINE, WINE COOLERS, ALCOHOLIC SODAS, SPIRITS, PREMIXED
SPIRIT DRINKS, LIQUEURS, ALCOHOLIC CIDER, SHERRY OR PORT.**

11. At the present time, do you consider yourself:

- 1 A non-drinker?
2 An occasional drinker?
3 A light drinker?
4 A party drinker?
5 A heavy drinker?

12. Have you ever had even part of an alcoholic drink?

- 1 No
2 Yes, just a few sips
3 Yes, I have had fewer than 10 alcoholic drinks in my life
4 Yes, I have had more than 10 alcoholic drinks in my life

13. Have you had an alcoholic drink in the last twelve months?

1 Yes

2 No

14. Have you had an alcoholic drink in the last four weeks?

1 Yes

2 No

15. This question is about the number of alcoholic drinks you had during the last seven days, including yesterday.

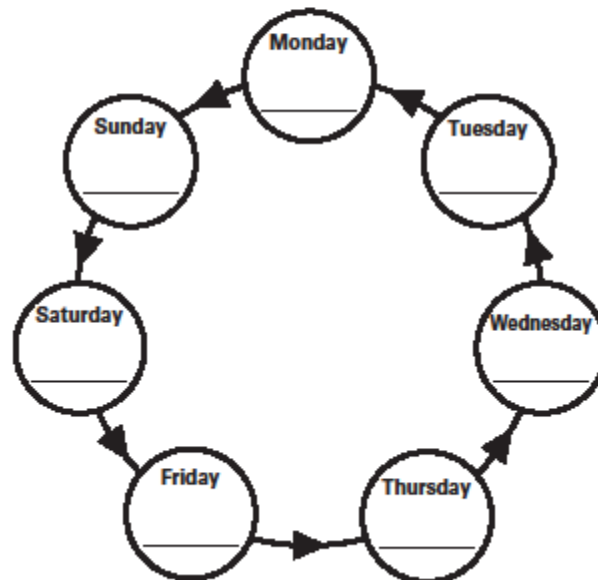
Put a cross next to **yesterday**. Then in the space provided, write the number of alcoholic drinks you had yesterday. If you didn't have any alcoholic drinks, put in '0'.

Start filling in the spaces beginning with yesterday, and follow the arrows.

Answer for every day of the week.

Write the number of alcoholic drinks you had each day in the circle.

Put '0' for each day you didn't drink any alcoholic drinks.



QUESTIONS 16, 17, 18, 19, and 20 ARE FOR ANYONE WHO HAS HAD AN ALCOHOLIC DRINK.

IF YOU HAVE NEVER HAD AN ALCOHOLIC DRINK, GO TO QUESTION 21.

16. What alcoholic drink do you usually have?

Cross the box next to the drink you usually have. If that drink is not listed here, cross the box next to 'Other' and write the name of the drink in the space provided.

- 01 Ordinary beer
- 02 Low alcohol beer
- 03 Wine (Cask (Goon) or Bottle)
- 04 Wine Cooler (eg West Coast Coolers)
- 05 Champagne or sparkling wine (eg Spumante, Passion Pop)
- 06 Alcoholic Cider (eg Apple, Pear, Strongbow, Magners, Woodchuck)
- 07 Alcoholic Sodas (eg Elevate Alcoholic Soda / Cola)
- 08 Premixed spirits (eg Bacardi Breezer, Lemon Ruski, Vodka Mudshake, Jim Beam and Cola, Wild Turkey and Cola, Bundaberg Rum and Cola, etc)
- 09 Spirits (eg rum, brandy, whisky, gin, vodka)
- 10 Liqueurs including premixed liqueurs (eg Tia Maria, Kahlua, Midori, Glide, Illusion etc)
- 11 Other (please specify)

You should have crossed only one box.

17. (a) Where, or from whom, did you get your last alcoholic drink?

Fill in the space beside 'Other' if you can't find your answer.

Cross only one box.

I didn't buy it...

OR

I bought it...

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> 1 My parent(s) gave it to me <input type="checkbox"/> 2 My brother or sister gave it to me <input type="checkbox"/> 3 I took it from home without my parent(s) permission <input type="checkbox"/> 4 Friends gave it to me <input type="checkbox"/> 5 I got someone to buy it for me <input type="checkbox"/> 6 Other (please specify) | <ul style="list-style-type: none"> <input type="checkbox"/> 51 At a hotel, pub, bar, tavern, RSL Club <input type="checkbox"/> 52 At a licensed liquor store or supermarket <input type="checkbox"/> 53 At a walk-in bottle-shop at a pub or hotel <input type="checkbox"/> 54 At a drive-in bottle-shop <input type="checkbox"/> 55 At a restaurant <input type="checkbox"/> 56 At a dance venue / dance party / music festival <input type="checkbox"/> 57 At a nightclub <input type="checkbox"/> 58 At a sporting event <input type="checkbox"/> 59 At a sports club (eg Leagues, surfing, football) <input type="checkbox"/> 60 Through the Internet <input type="checkbox"/> 61 By phone, fax, mail order <input type="checkbox"/> 62 Other (please specify) |
|--|--|

→ **Go to QUESTION 17(b)**

You should have crossed only one box.

17. (b) If someone else bought alcohol for you, who was this person?

- | | |
|---|---|
| 1 <input type="checkbox"/> Friend who is 18 or over | 4 <input type="checkbox"/> Brother / sister or other relative who is not yet 18 |
| 2 <input type="checkbox"/> Brother / sister or other relative who is 18 or over | 5 <input type="checkbox"/> Stranger who was able to buy alcohol |
| 3 <input type="checkbox"/> Friend who is not yet aged 18 | 6 <input type="checkbox"/> Other (please specify) |
-

18. (a) Where did you drink your last alcoholic drink?

Fill in the space beside 'Other' if you can't find your answer.
Cross only **one** box.

I drank it.....

- | | |
|---|--|
| 01 <input type="checkbox"/> At a beach, park or recreation area | 08 <input type="checkbox"/> At a sports club (eg Leagues, surfing, football) |
| 02 <input type="checkbox"/> At a hotel, pub, bar, tavern or RSL club | 09 <input type="checkbox"/> On school grounds during school hours |
| 03 <input type="checkbox"/> At a dance venue / dance party / music festival | 10 <input type="checkbox"/> On school grounds after hours |
| 04 <input type="checkbox"/> At a nightclub | 11 <input type="checkbox"/> At my home |
| 05 <input type="checkbox"/> At a party | 12 <input type="checkbox"/> At my friend's home |
| 06 <input type="checkbox"/> At a restaurant | 13 <input type="checkbox"/> In a car |
| 07 <input type="checkbox"/> At a sporting event | 14 <input type="checkbox"/> Other (please specify) |
-

You should have crossed only one box.

18. (b) Was an adult supervising you and / or your friends when you had this drink?

- 1 Yes 2 No

19. How often on an occasion that you drink alcohol, do you intend to get drunk?

- | | |
|--|---------------------------------------|
| 1 <input type="checkbox"/> Never | 4 <input type="checkbox"/> Most times |
| 2 <input type="checkbox"/> A few times | 5 <input type="checkbox"/> Every time |
| 3 <input type="checkbox"/> Sometimes | 6 <input type="checkbox"/> Don't know |

20. In the past 12 months, after drinking alcohol have you? Cross all that apply.

- | | |
|--|--|
| <input type="checkbox"/> 01 Created a public disturbance or nuisance | <input type="checkbox"/> 13 Missed school |
| <input type="checkbox"/> 02 Stolen something | <input type="checkbox"/> 14 Been sick (vomited) |
| <input type="checkbox"/> 03 Driven a motor vehicle | <input type="checkbox"/> 15 Tried any drugs |
| <input type="checkbox"/> 04 Verbally abused someone | <input type="checkbox"/> 16 Been in trouble with the police |
| <input type="checkbox"/> 05 Physically threatened someone | <input type="checkbox"/> 17 Had to go to a Hospital Emergency Department |
| <input type="checkbox"/> 06 Hit someone or had a fight | OR |
| <input type="checkbox"/> 07 Attended work or school | <input type="checkbox"/> 18 Other (please specify) |
| <input type="checkbox"/> 08 Had an injury that needed to be seen by a Doctor | <input type="text"/> |
| <input type="checkbox"/> 09 Caused damage to property | OR |
| <input type="checkbox"/> 10 Had an argument | <input type="checkbox"/> 19 None of the above |
| <input type="checkbox"/> 11 Been admitted to hospital overnight | |
| <input type="checkbox"/> 12 Been taken home by police | |

You should have crossed all that apply.

THE NEXT QUESTIONS ARE FOR EVERYONE AND ARE ABOUT SMOKING CIGARETTES.

21. At the present time, do you consider yourself:

- 1 A heavy smoker?
- 2 A light smoker?
- 3 An occasional smoker?
- 4 An ex-smoker?
- 5 A non-smoker?

22. Have you ever smoked even part of a cigarette?

- 1 No
- 2 Yes, just a few puffs
- 3 Yes, I have smoked fewer than 10 cigarettes in my life
- 4 Yes, I have smoked more than 10 but fewer than 100 cigarettes in my life
- 5 Yes, I have smoked more than 100 cigarettes in my life

23. Have you smoked cigarettes in the last twelve months?

- 1 Yes
- 2 No

24. Have you smoked cigarettes in the last four weeks?

- 1 Yes
- 2 No

25. This question is about the number of cigarettes you had during the last seven days, including yesterday.

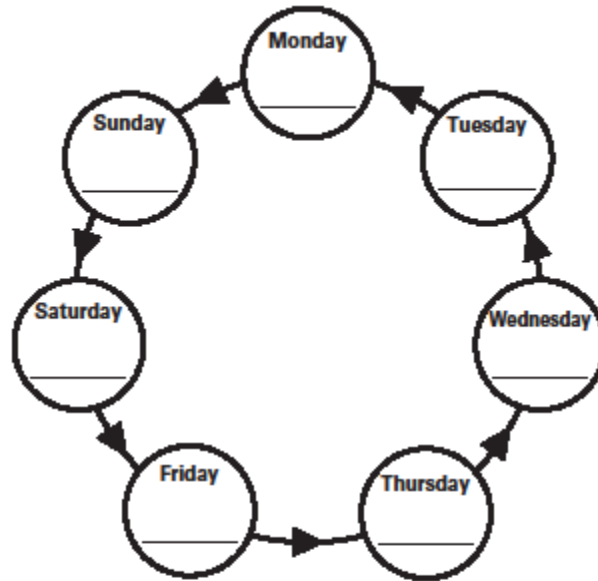
Put a cross next to **yesterday**. Then in the space provided, write the number of cigarettes you had yesterday. If you didn't smoke any cigarettes, put in '0'.

Start filling in the spaces beginning with yesterday, and follow the arrows.

Answer for every day of the week.

Write the number of cigarettes you smoked each day in the circle.

Put '0' for each day you didn't smoke any cigarettes.



26. Do you think you will be smoking cigarettes this time next year?

- 1 Certain **not** to be smoking
- 2 Very **un**likely to be smoking
- 3 **Un**likely to be smoking
- 4 Can't decide how likely
- 5 Likely to be smoking
- 6 Very likely to be smoking
- 7 Certain to be smoking

27. At most shops in the area where you live and go to school, how easy or difficult would it be:

Cross only **one** box for each question.

	Very easy	Easy	Neither easy nor difficult	Difficult	Very difficult
(i) for you to buy cigarettes?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(ii) for you to get someone else to buy cigarettes for you?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

QUESTIONS 28, 29 AND 30 ARE ONLY FOR THOSE WHO HAVE SMOKED A CIGARETTE IN THE PAST WEEK. IF YOU HAVE NOT SMOKED A CIGARETTE IN THE PAST WEEK, GO TO QUESTION 31.

28. (a) What brand of cigarettes do you usually smoke?

Cross the box next to the brand you usually smoke. If that brand is not listed here, cross the box next to 'Other' and write the name of the brand in the space provided.

- | | |
|---|--|
| <input type="checkbox"/> 01 Alpine | <input type="checkbox"/> 10 Peter Jackson |
| <input type="checkbox"/> 02 Benson & Hedges | <input type="checkbox"/> 11 Sterling |
| <input type="checkbox"/> 03 Dunhill | <input type="checkbox"/> 12 Stradbroke |
| <input type="checkbox"/> 04 Escort | <input type="checkbox"/> 13 Vogue |
| <input type="checkbox"/> 05 Fortune | <input type="checkbox"/> 14 Wills Super Mild |
| <input type="checkbox"/> 06 Holiday | <input type="checkbox"/> 15 Winfield |
| <input type="checkbox"/> 07 Horizon | <input type="checkbox"/> 16 Freedom |
| <input type="checkbox"/> 08 Longbeach | <input type="checkbox"/> 17 Other (please specify) |
| <input type="checkbox"/> 09 Marlboro | <input type="text"/> |

You should have crossed only one box.

28. (b) Do the cigarettes you usually smoke come from packets of ...?

- | | |
|---------------------------------|---------------------------------|
| <input type="checkbox"/> 1 20's | <input type="checkbox"/> 4 35's |
| <input type="checkbox"/> 2 25's | <input type="checkbox"/> 5 40's |
| <input type="checkbox"/> 3 30's | <input type="checkbox"/> 6 50's |

Remember: you should have crossed only one box.

29. (a) Where, or from whom, did you get the last cigarette that you smoked?

Fill in the space beside 'Other' if you can't find your answer.

Cross only one box.

I didn't buy it.....

OR

I bought it.....

- | | |
|--|--|
| <input type="checkbox"/> 1 My parent(s) gave it to me | <input type="checkbox"/> 51 At a hotel, pub, bar, tavern, RSL Club |
| <input type="checkbox"/> 2 My brother or sister gave it to me | <input type="checkbox"/> 52 At a supermarket |
| <input type="checkbox"/> 3 I took it from home without my parent(s) permission | <input type="checkbox"/> 53 At a newsagency |
| <input type="checkbox"/> 4 Friends gave it to me | <input type="checkbox"/> 54 At a milk bar or delicatessen |
| <input type="checkbox"/> 5 I got someone to buy it for me | <input type="checkbox"/> 55 At a convenience store (eg 7-Eleven) |
| → Go to QUESTION 29(b) | <input type="checkbox"/> 56 At a tobacconist / tobacco shop |
| <input type="checkbox"/> 6 Other (please specify) | <input type="checkbox"/> 57 At a take-away food shop |
| <input type="text"/> | <input type="checkbox"/> 58 At a petrol station |
| | <input type="checkbox"/> 59 Through the Internet |
| | <input type="checkbox"/> 60 Other (please specify) |
| | <input type="text"/> |

You should have crossed only one box.

29. (b) If someone else bought cigarettes for you, who was this person?

- 1 Friend who is 18 or over
 2 Brother / sister or other relative who is 18 or over
 3 Friend who is not yet aged 18
 4 Brother / sister or other relative who is not yet 18
 5 Stranger who was able to buy cigarettes
 6 Other (please specify)

30. Sometimes people break open a packet of cigarettes and sell single cigarettes. In the last four weeks, have you bought cigarettes that were not in a full packet (for example, buying one or more cigarette(s) at a time)?

- 1 Yes
 2 No

THE NEXT QUESTIONS ARE FOR EVERYONE AND ARE ABOUT OTHER THINGS YOU MIGHT USE.

For each substance, cross the box which shows how many times you have used the substance during the specified time period. There should only be one cross for each line of boxes.

31. (a) How many times, if ever, have you used or taken painkillers / analgesics such as Disprin, Panadol or Nurofen, for any reason:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NEVER used or taken painkillers / analgesics, go to QUESTION 32(a).

31. (b) Last time you used a painkiller / analgesic, did you use it because you...?

Cross only one box.

- 1 Had a headache or migraine
 2 Had a cold or 'flu
 3 Had a toothache or pains associated with dental procedures
 4 Had pains associated with playing sport (eg, injury, strain)
 5 Had other types of pain (please specify)

- 6 Wanted to – there was no medical reason for using it
 7 Other (please specify)

31. (c) Where, or from whom, did you get your last painkiller / analgesic?

- 1 My parent(s) gave it to me
 2 My brother or sister gave it to me
 3 I took it from home without my parent(s) permission
 4 Friends gave it to me
 5 A member of staff at my school gave it to me
 6 A member of staff at my sporting club gave it to me
 7 I bought it
 8 Other (please specify)

32. (a) How many times, if ever, have you used or taken sleeping tablets, tranquilisers, sedatives or benzodiazepines, such as Valium, Mogadon, Diazepam, Temazepam (Mazzies, Vallies, Moggies, Jellies), Serepax (Serries) or Rohypnol (Rohies, Barbs) other than for medical reasons:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NEVER used or taken sleeping tablets, tranquilisers, sedatives or benzodiazepines, go to QUESTION 33(a).

32. (b) In the last year, did you use any other substance or substances on the same occasion that you used sleeping tablets, tranquilisers, sedatives or benzodiazepines, such as Valium, Mogadon, Diazepam, Temazepam (Mazzies, Vallies, Moggies, Jellies), Serepax (Serries) or Rohypnol (Rohies, Barbs)?

Cross all that apply.

- 1 Tobacco / cigarettes
 2 Alcohol
 3 Ecstasy (XTC, E, MDMA, eccy, X, bickies)
 4 Hallucinogens (eg LSD, acid, trips, magic mushrooms)
 5 Marijuana / cannabis (grass, hash, dope, weed, mull, yardi, ganga, pot, a bong, a joint)
 6 Painkillers / analgesics
 7 Amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)
 8 Other (what substance?)

- 9 I did not use any other substance on the same occasion

You should have crossed all that apply.

32. (c) Where, or from whom, did you get your last sleeping tablet, tranquiliser, sedative or benzodiazepine from?

Fill in the space beside 'Other' if you can't find your answer

Cross only **one** box.

- 1 My parent(s) gave it to me
- 2 I am prescribed sedatives / tranquilisers by my doctor / paediatrician, or psychiatrist
- 3 My brother or sister gave it to me
- 4 I took it from home without my parent(s) permission
- 5 I bought it from someone
- 6 It was given to me by someone
- 7 I traded or swapped something for it with someone
- 8 Other (please specify)

33. (a) How many times, if ever, have you smoked or used marijuana / cannabis (grass, hash, dope, weed, mull, yandi, ganga, pot, a bong, a joint):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used marijuana / cannabis in the last year, go to QUESTION 34.

33. (b) In the last year, did you use any other substance or substances on the same occasion that you used marijuana / cannabis?

Cross **all** that apply.

- 1 Tobacco / cigarettes
- 2 Alcohol
- 3 Painkillers / analgesics
- 4 Sedatives / tranquilisers / sleeping tablets / benzodiazepines
- 5 Hallucinogens (eg LSD, acid, trips, magic mushrooms)
- 6 Amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)
- 7 Ecstasy (XTC, E, MDMA, eccy, X, bickies)
- 8 Other (what substance?)

- 9 I did not use any other substance on the same occasion

You should have crossed all that apply.

33. (c) When you use marijuana / cannabis do you usually:

Cross only one box.

- 1 Smoke it as a joint (reefer, spliff)? 4 Other (please specify)
 2 Smoke it from a bong or a pipe?
 3 Eat it (eg in hash cookies)?

You should have crossed only one box.

33. (d) Do you usually use marijuana / cannabis by yourself or with others?

- 1 By myself 3 By myself and with others about equally often
 2 With others

33. (e) Where did you last use marijuana / cannabis?

Fill in the space beside 'Other' if you can't find your answer.

I used it.....

- 11 At a hotel, pub, bar, tavern or RSL club 17 At a sports club (eg Leagues, surfing, football)
 12 At a dance venue, dance party, rave, music festival 18 At the beach
 13 At a nightclub 19 In a park
 14 At a party 20 In a car
 15 At my home 21 On school grounds during school time
 16 At my friend's home 22 On school grounds after hours
 23 Other (please specify)

You should have crossed only one box.

34. How many times, if ever, have you used or taken steroids (muscle, roids, or gear) without a doctor's prescription in an attempt to make you better at sport, to increase muscle size or to improve your general appearance:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

35. How many times, if ever, have you **deliberately sniffed** (inhaled) from spray cans or **deliberately sniffed** things like glue, paint, petrol or thinners in order to get high or for the way it makes you feel:

This does not include sniffing white-out, liquid paper, textas, markers or pens.

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

36. (a) How many times, if ever, have you used or taken amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice) **other than for medical reasons:**

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used amphetamines in the last year, go to QUESTION 37 (a).

36. (b) In the **last year**, did you use any other substance or substances **on the same occasion that you used amphetamines** (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice)?

Cross all that apply.

- | | |
|--|---|
| 1 <input type="checkbox"/> Tobacco / cigarettes | 6 <input type="checkbox"/> Marijuana / cannabis (grass, hash, dope, weed, mull, yardi, ganga, pot, a bong, a joint) |
| 2 <input type="checkbox"/> Alcohol | 7 <input type="checkbox"/> Ecstasy (XTC, E, MDMA, eccy, X, bickies) |
| 3 <input type="checkbox"/> Painkillers / analgesics | 8 <input type="checkbox"/> Other (<i>what substance?</i>) |
| 4 <input type="checkbox"/> Sedatives / tranquillisers / sleeping tablets / benzodiazepines | <div style="border: 1px solid black; height: 20px; width: 250px;"></div> |
| 5 <input type="checkbox"/> Hallucinogens (eg LSD, acid, trips, magic mushrooms) | 9 <input type="checkbox"/> I did not use any other substance on the same occasion |

You should have crossed all that apply.

37. (a) How many times, if ever, have you used or taken ecstasy or XTC (E, MDMA, eccy, X, bickies):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used ecstasy in the last year, go to QUESTION 38.

37. (b) In the last year, did you use any other substance or substances on the same occasion that you used ecstasy (XTC, E, MDMA, eccy, X, bickies)?

Cross all that apply.

- | | |
|--|---|
| <input type="checkbox"/> 1 Tobacco / cigarettes | <input type="checkbox"/> 7 Marijuana / cannabis (grass, hash, dope, weed, mull, yardi, ganga, pot, a bong, a joint) |
| <input type="checkbox"/> 2 Alcohol | <input type="checkbox"/> 8 Other (<i>what substance?</i>) |
| <input type="checkbox"/> 3 Painkillers / analgesics | <input type="checkbox"/> 9 I did not use any other substance on the same occasion |
| <input type="checkbox"/> 4 Sedatives / tranquillisers / sleeping tablets / benzodiazepines | |
| <input type="checkbox"/> 5 Hallucinogens (eg LSD, acid, trips, magic mushrooms) | |
| <input type="checkbox"/> 6 Amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ica) | |

You should have crossed all that apply.

38. How many times, if ever, have you used or taken cocaine:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

39. How many times, if ever, have you used or taken heroin (smack, horse, skag, hammer, H), or other opiates (narcotics) such as methadone, morphine or pethidine other than for medical reasons:

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

40. (a) How many times, if ever, have you used or taken hallucinogens (LSD, acid, trips, magic mushrooms, datura, angel's trumpet):

	None	Once or twice	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
(i) In the last week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(ii) In the last four weeks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iii) In the last year?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
(iv) In your lifetime?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If you have NOT used hallucinogens in the last year, go to QUESTION 41.

40. (b) In the last year, did you use any other substance or substances on the same occasion that you used hallucinogens (eg LSD, acid, trips, magic mushrooms, datura, angel's trumpet)?

Cross all that apply.

- | | |
|--|---|
| 1 <input type="checkbox"/> Tobacco / cigarettes | 3 <input type="checkbox"/> Ecstasy (XTC, E, MDMA, eccy, X, bickies) |
| 2 <input type="checkbox"/> Alcohol | 4 <input type="checkbox"/> Other (<i>what substance?</i>) |
| 3 <input type="checkbox"/> Painkillers / analgesics | <input type="text"/> |
| 4 <input type="checkbox"/> Sedatives / tranquilisers / sleeping tablets / benzodiazepines | 5 <input type="checkbox"/> I did not use any other substance on the same occasion |
| 5 <input type="checkbox"/> Marijuana / cannabis (grass, hash, dope, weed, mull, yardi, ganga, pot, a bong, a joint) | |
| 6 <input type="checkbox"/> Amphetamines (eg speed, uppers, goey, crystal meth, base, dex, dexies, dexamphetamines, ox blood, methamphetamine, ice) | |

You should have crossed all that apply.

THESE QUESTIONS ARE FOR EVERYONE.

41. During 2010 (last year), did you have any lessons or parts of lessons at school that were about smoking cigarettes?

- | | |
|--|--|
| 1 <input type="checkbox"/> No, not even part of a lesson | 3 <input type="checkbox"/> Yes, one lesson |
| 2 <input type="checkbox"/> Yes, part of a lesson | 4 <input type="checkbox"/> Yes, more than one lesson |

42. During 2010 (last year), did you have any lessons or parts of lessons at school that were about drinking alcohol?

- | | |
|--|--|
| 1 <input type="checkbox"/> No, not even part of a lesson | 3 <input type="checkbox"/> Yes, one lesson |
| 2 <input type="checkbox"/> Yes, part of a lesson | 4 <input type="checkbox"/> Yes, more than one lesson |

43. During 2010 (last year), did you have any lessons or parts of lessons at school that were about illicit drugs such as marijuana / cannabis, ecstasy, heroin, amphetamines (speed, uppers, goey, crystal meth, dexies, dexamphetamines, methamphetamine, ice), hallucinogens, cocaine?

- | | |
|--|--|
| 1 <input type="checkbox"/> No, not even part of a lesson | 3 <input type="checkbox"/> Yes, one lesson |
| 2 <input type="checkbox"/> Yes, part of a lesson | 4 <input type="checkbox"/> Yes, more than one lesson |

Remember: last year was 2010.

THE NEXT FEW QUESTIONS ARE ABOUT SUN PROTECTION.

44. You only get skin cancer if you get burnt often.

- 1 True 2 False

45. Most skin cancer is caused by over-exposure to ultraviolet radiation (UVR) from the sun.

- 1 True 2 False

46. During 2010 (that is last year), did you have any lessons or parts of lessons at school that were about skin cancer or protection from the sun?

- 1 No, not even part of a lesson 3 Yes, one lesson
2 Yes, part of a lesson 4 Yes, more than one lesson

47. Over the last summer, did you get sunburn that was sore or tender the next day?

- 1 Yes, just once 3 Yes, 4 or more times
2 Yes, 2 or 3 times 4 No, not at all

48. (a) Have you ever had severe sunburn, which has blistered?

- 1 Yes → Go to QUESTION 48(b) 2 No → Go to QUESTION 49

48. (b) If YES: How long ago was the last time you were severely sunburnt?

- 1 Last summer 2 1 to 2 years ago 3 More than 2 years ago

49. What type of hat do you most often wear on a sunny day in summer?

- 1 Wide brimmed hat 5 Sun-visor
2 Bucket style hat 6 Other (what kind?)
3 Legionnaire hat
4 Baseball style Cap 7 None

50. What is the SPF (Sun Protection Factor) of the sunscreen you usually use on a sunny day in summer?

- 1 I don't use sunscreen 3 SPF 15 5 Can't remember / don't know
2 SPF 12 or lower 4 SPF 30+

51. Suppose your skin was exposed to sunshine at the beginning of summer with no protection at all. If you stayed in the sun for 30 minutes, would your skin:

- 1 Just burn or go red 3 Just tan
2 Burn or go red first, then tan afterwards 4 Nothing would happen because I was born with dark skin

52. Do you like to get a suntan?

- 1 No 3 Yes, a moderate tan 5 Yes, a very dark tan
2 Yes, a light tan 4 Yes, a dark tan

53. Thinking about sunny days in summer, when you are outside for an hour or more between 11 am and 3 pm, how often would you:

	Never	Rarely	Sometimes	Usually	Always
(i) Wear a hat?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(ii) Wear clothes covering most of your body (including arms and legs)?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(iii) Deliberately wear less or briefer clothing so as to get some sun on your skin?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(iv) Wear maximum protection sunscreen (SPF 30+)?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(v) Wear sunglasses?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(vi) Stay mainly in the shade?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

If you never, rarely or sometimes wear a hat in summer, please answer Question 54. If you never, rarely or sometimes wear sunglasses in summer, please answer Question 55.

Alternatively, if you answered that you usually or always wear sunglasses and a hat on summer days when outside please go to Question 56.

54. Why don't you wear a hat in summer?

Cross all that apply.

- | | |
|--|---|
| <input type="checkbox"/> It messes up my hair | <input type="checkbox"/> My head gets too hot when I wear a hat |
| <input type="checkbox"/> None of my friends wear one | <input type="checkbox"/> No-one else wears them |
| <input type="checkbox"/> It is not cool | <input type="checkbox"/> I don't like wearing a hat when spending time outdoors |
| <input type="checkbox"/> It is not compulsory to wear one at my school | <input type="checkbox"/> Other reason (please specify) |
| <input type="checkbox"/> My parents don't make me | <input type="text"/> |

55. Why don't you wear sunglasses?

Cross all that apply.

- | | |
|---|--|
| <input type="checkbox"/> I don't like wearing sunglasses | <input type="checkbox"/> My parents don't make me wear them |
| <input type="checkbox"/> I don't own any | <input type="checkbox"/> I keep loosing or breaking them |
| <input type="checkbox"/> None of my friends wear them | <input type="checkbox"/> If everyone wore them then I would probably wear them |
| <input type="checkbox"/> It is not cool | <input type="checkbox"/> Other reason (please specify) |
| <input type="checkbox"/> It is not compulsory to wear them at my school | <input type="text"/> |

56. Do you feel there is adequate shade provided at your school?

- | | | |
|--------------------------------|-------------------------------------|---|
| 1 <input type="checkbox"/> No | 3 <input type="checkbox"/> Perhaps | 5 <input type="checkbox"/> I don't know |
| 2 <input type="checkbox"/> Yes | 4 <input type="checkbox"/> Not sure | |

THE NEXT FEW QUESTIONS ARE ABOUT FOOD YOU MIGHT HAVE EATEN.

57. How many serves of vegetables do you usually eat each day?

(A serve is equal to ½ cup of cooked vegetables or 1 cup of salad vegetables)

- | | | | |
|--|-------------------------------------|---|--|
| 1 <input type="checkbox"/> 1 serve or less | 3 <input type="checkbox"/> 3 serves | 5 <input type="checkbox"/> 5 serves | 7 <input type="checkbox"/> I do not eat vegetables |
| 2 <input type="checkbox"/> 2 serves | 4 <input type="checkbox"/> 4 serves | 6 <input type="checkbox"/> 6 serves or more | |

58. How many serves of fruit do you usually eat each day?
(A serve is equal to 1 medium piece or 2 small pieces of fruit, or 1 cup of diced pieces of fruit)

- 1 1 serve or less 3 3 serves 5 5 serves 7 I do not eat fruit
 2 2 serves 4 4 serves 6 6 serves or more

59. How many serves of bread and/or cereal do you usually eat each day?
(A serve is 1 slice of bread, ½ bread roll, ½ cup breakfast cereal, or ½ cup pasta, rice, or noodles)

- 1 1 serve or less 4 4 serves 7 7 serves 10 10 serves or more
 2 2 serves 5 5 serves 8 8 serves 11 I do not eat bread and / or cereal
 3 3 serves 6 6 serves 9 9 serves

THE NEXT FEW QUESTIONS ASK ABOUT WHAT YOU DID IN THE LAST WEEK.

60. How many times in the last week did you eat a fast food meal like McDonalds, Hungry Jacks, pizzas, fish and chips, hamburgers, meat pies, pasties etc?

- 1 Once 3 3 times 5 5 times 7 7 or more times
 2 Twice 4 4 times 6 6 times 8 None

61. How many times in the last week did you eat snacks like a chocolate bar, a piece of cake, a packet of chips / twisties / com chips, ice cream, 3-4 sweet biscuits?

- 1 Once 3 3 times 5 5 times 7 7 or more times
 2 Twice 4 4 times 6 6 times 8 None

62. How many times in the last week did you drink a can of soft drink (like Coke, Pepsi, lemonade, Fanta), an energy drink (like Redbull, V, Wild), fruit juice or have at least 2 glasses of cordial in a row? This does not include diet or low joule drinks.

- 1 Once 3 3 times 5 5 times 7 7 or more times
 2 Twice 4 4 times 6 6 times 8 None

THE NEXT FEW QUESTIONS ARE ABOUT SOME ACTIVITIES YOU MIGHT HAVE DONE IN THE LAST WEEK, OR OVER THE PAST 12 MONTHS.

63. How many times in the last week did you:

- | | None | Once | Twice | 3 times | 4 times | 5 times | 6 or more times |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| (i) Do any vigorous physical activity for at least 30 minutes that made you huff and puff or sweat? <i>(eg basketball, netball, soccer, football, running, fast bike riding, aerobics)</i> | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | 7 <input type="checkbox"/> |
| (ii) Do any moderate physical activity for at least 30 minutes that did not make you huff and puff or sweat? <i>(eg slow bike riding, housework, brisk walking, skateboarding)</i> | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | 7 <input type="checkbox"/> |

64. How many days **in the past week** have you done any **vigorous** or **moderate** physical activity for a **total of at least one hour**? (This could be made up of different activities during the day like cycling or walking to and from school, playing sport at lunchtime or after school, doing an exercise class, doing housework etc)

- 1 day 3 days 5 days 7 days
 2 days 4 days 6 days No days in the last week

65. On an average school day, about how many hours a day do you do the following when you are not at school:

	None	1 hour or less	2 hours	3 hours	4 hours	5 or more hours
(i) Homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Watch TV / Videos / DVDs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(iii) Use the Internet / play computer games? (Don't include computer use for homework)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

66. How tall are you without shoes:

Centimetres **or** Feet Inches **or** I don't know

67. How much do you weigh without clothes or shoes?

Kilograms **or** Stones Pounds **or** I don't know

68. Do you think that you are...

- Underweight Slightly underweight About the right weight Slightly overweight Overweight

69. How happy are you with your weight?

- Extremely happy Fairly happy In between Fairly unhappy Extremely unhappy

70. In the last 12 months have you tried any of the following to control your weight?

Cross one box for each statement.

	Yes	No
(a) Have been on a diet	<input type="checkbox"/>	<input type="checkbox"/>
(b) Have increased my physical activity	<input type="checkbox"/>	<input type="checkbox"/>
(c) Have seen a doctor	<input type="checkbox"/>	<input type="checkbox"/>
(d) Have taken medication	<input type="checkbox"/>	<input type="checkbox"/>
(e) Have done nothing in particular	<input type="checkbox"/>	<input type="checkbox"/>
(f) Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>

**THANK YOU VERY MUCH FOR YOUR HELP
YOU HAVE COMPLETED THE SURVEY!**

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