

Cannabis Use in France : an Age-Period-Cohort Analysis, 1992 to 2010

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Cannabis is the illicit drug most widely available in Europe. In most European countries, cannabis use increased during the 1990s and early 2000s. France belongs to the highest-prevalence countries, with a lifetime prevalence of 30.6 % and a last year prevalence of 8.6 %. Trends of consumption across the life course and over time are well known, but to date no study aimed at analyzing cohort effects. This project uses a series of surveys which provides a unique opportunity to analyze lifetime and last year cannabis use across the life course and over time, for various cohorts. First, descriptive statistics are derived from pseudo-cohort analysis. Then cross-classified random effects models are applied to disentangle age, period and cohort effects.

Background

Cannabis is the illicit drug most widely available in Europe, where it is both imported and produced domestically. In most European countries, cannabis use increased during the 1990s and early 2000s. It is estimated that cannabis has been used at least once by about 78 million Europeans, that is over one in five of all 15- to 64-year-olds. Considerable differences exist between countries, with national prevalence figures varying from 1.5 % (for Romania) to 32.5 % (for Denmark). For most of the countries, the prevalence estimates are in the range of 10–30 % of all adults. An estimated 22.5 million Europeans have used cannabis in the last year, or on average 6.7 % of all 15- to 64-year olds. France belongs to the highest-prevalence countries, with a lifetime prevalence of 30.6 % and a last year prevalence of 8.6 %. Trends of consumption across the life course and over time are well known, but to date no study aimed at analyzing cohort effects.

Data

In 1992, in order to find out more about French people's attitudes, behavior, knowledge and opinions in the field of health, the French Committee for Health Education set up a series of 'Health Barometers'. Many of the subjects covered in the Health Barometer surveys deal with health education and promotion campaigns: drinking, smoking, drug taking, vaccinations, use of medicines, accidents, cancer screening, nutrition, physical exercise, etc. This multi-subject surveys repeated over the years provide information on trends in the population's health behavior. They also make it possible to refine the objectives of national prevention programs.

The 1992 (N=2 099), 1995 (N=1 993), 2000 (N=13 163), 2005 (29 431) and 2010 (N=27 653) surveys all cover the population aged 18 to 64. These national representative telephone surveys are conducted on two levels (household then individual). The eligible individual within a household is selected using the next birthday method. Individuals are asked about their lifetime cannabis use and their 12-month cannabis use.

This harmonized series of surveys provides a unique opportunity to analyze lifetime and last year cannabis use across the life course and over time, for various cohorts.

Method

This ongoing project uses pseudo-cohort analysis for descriptive purposes. Cross-classified random effects models are applied to disentangle age, period and cohort effects. Social disparities in cannabis use will be analyzed.