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Executive Summary

The aim of the Canadian Postsecondary Education Alcohol and Drug Use Survey (CPADS) is to obtain regular and current surveillance data that can help to describe trends in substance use among postsecondary students in Canada. Comprehensive and regular data collection is required to plan effective prevention and intervention strategies at the national and school level.

The following summary describes key results obtained from University of Manitoba's participation in the first Pan-Canadian cycle of the CPADS conducted during the 2019/2020 school year.

Overall, 83% University of Manitoba students consumed alcohol and 44% cannabis over the past year. University of Manitoba students were as likely to consume illegal drugs as students in the overall Pan-Canadian survey sample.

University of Manitoba students had higher awareness of the Low Risk Drinking Guidelines (20% University of Manitoba, 16% Pan-Canadian) when compared to the Pan-Canadian sample of survey respondents. Approximately one-fifth (19%) of past 7-day drinkers exceeded the thresholds in the LRDG of 2 for women and 3 for men at the University of Manitoba. University of Manitoba students were less likely to experience any alcohol related harms related to their own alcohol consumption (47% University of Manitoba, 56% Pan-Canadian) including hangovers, throwing up and passing out. University of Manitoba students were also significantly less likely to experiences harms due to the drinking behaviour of their peers (22% University of Manitoba, 31% Pan-Canadian).

In terms of beverage types preferred by students in the past 30 days, spirits and liquor (71%) and cooler and pre-mixed cocktails (<7% alcohol content) (62%) were the most popular beverages among students at the University of Manitoba. Beer, wine, coolers/pre-mixed cocktails (>6% alcohol content), and cider were less popular among University of Manitoba students compared to students in the overall survey sample.

University of Manitoba students who had used cannabis in the past 3 months show similar signs of dependence on cannabis as the overall survey sample, including the urge to use (53%) and failing others' expectations (18%). Overall, 61% of University of Manitoba students were at moderate risk of developing cannabis-related problems based on the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST), comparable to the Pan-Canadian survey sample.

Over one quarter (26%) of University of Manitoba students reported being unaware of harm reduction services available at the University of Manitoba. The three harm reduction services students reported being most aware of on campus included the student counseling centre for harm reduction services (59%), the university health service (49%) and the health and wellness educator (28%).

The majority of University of Manitoba students (57%) reported that they would prefer to have addictions counseling added as a harm reduction service provided by the school.

Background

In 2018, Health Canada identified the need for a surveillance tool to monitor substance use among the postsecondary student population in Canada. In November 2019, the Canadian Postsecondary education Alcohol and Drug use Survey (CPADS) was launched; a national online survey that measures the prevalence of alcohol and drug use among students 17 to 25 years of age, who are attending university or college in Canada.

Substance use is a significant cause of health and safety issues on Canadian campuses and higher rates of consumption make students more vulnerable to harms such as accidents (e.g., falls, driving accidents) as well as sexual and physical violence. In addition, student success at school can be affected if problematic substance use impedes a student's ability to fulfill educational requirements. Students may use substances under pressure to improve academic performance. Comprehensive and regular data collection for this population is required to plan effective prevention and intervention strategies at the national and school level. These data will also be used support the development of policy and program initiatives, including public education and awareness activities.

The CPADS is conducted in collaboration with the Postsecondary Education Partnership-Alcohol Harms (PEP-AH), a network of universities and colleges from across Canada that have partnered with the Canadian Centre on Substance Use and Addiction (CCSA) to support campus efforts to reduce the harms related to alcohol consumption¹.

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¹ https://pepah.ca/

Survey Administration

The survey firm *Advanis Jolicoeur* was hired to conduct data collection for the CPADS on behalf of Health Canada. The survey was delivered online to students and all responses were anonymous and confidential. The target population of the CPADS includes students 17-25 years of age who are enrolled either in a university undergraduate program or college program/certificate in Canada on a full-time or part-time basis.

Each school was responsible for selecting a random sample of students to invite to the CPADS. **University of Manitoba** provided a list of student e-mail addresses to Advanis who administered the survey invitations **directly to students.**

After clicking on the survey link, students were asked two eligibility questions to confirm their age and location of studies. Students who were between the ages of 17 to 25 years and were studying in Canada at the time they received the survey could proceed with responding to subsequent survey questions.

A total of 41 schools participated in the 2019/2020 CPADS; 33 schools participated in November 2019 and 8 schools participated in the winter of 2020 (Jan-March). The 2019/2020 CPADS was conducted from November 5, 2019 to December 13, 2019 at the University of Manitoba and the results are based on student responses from 1,671 completed surveys (39% male and 61% female). The average survey completion time was just over 18.5 minutes at the University of Manitoba and 20 minutes for the larger Pan-Canadian sample.

The following summary describes key results obtained from University of Manitoba's participation in the first Pan-Canadian cycle of the CPADS, conducted during the 2019/2020 school year. School-specific results are compared to overall estimates obtained from the complete sample of 41 schools and only statistically significant differences are discussed in this report. A comprehensive set of data tables can be found in **Appendix 1**. The core CPADS questionnaire can be found in **Appendix 2**. **Appendix 3** contains results for school-specific questions that were asked only of students from University of Manitoba.

Technical notes and data limitations

- Results reported as a percentage are accompanied by their associated 95% confidence interval in the
 data tables. Note that exact values for 95% confidence intervals may vary depending on the statistical
 software used in the analysis and schools may obtain slightly different ranges.
- Estimates with moderate sampling variability are indicated throughout the text with the symbol '*' and should be interpreted with caution.
- Some data are not reportable due to low numbers. Data are only reportable if the number of observations in a cell was >=30 and the coefficient of variation for the estimate was <33.3%. Unreportable estimates are suppressed to ensure that participants cannot be identified. When numbers are not reported, this is indicated with the '#' symbol in the data tables.
- Some numbers are rounded; therefore, totals may not add up to 100%.
- In each section of the report, students were compared on the following demographic and educational dimensions. All reported demographic differences are statistically significant at the 95% confidence level.
 - o Male vs female students based on biological sex at birth
 - Students in 1st and 2nd year vs 3rd year or higher
- In some cases, school level numbers were compared to the Pan-Canadian average to highlight notable differences. All reported differences were significant at the 95% confidence level, but not all statistically significant differences are reported.
- Survey responses are reported by sex based on the question sex01, which asks about biological sex assigned at birth. This measure was chosen to align with recommendations in Canada's Low-Risk Alcohol Drinking Guidelines (LRDG) Error! Bookmark not defined. The LRDG recommend safe drinking amounts based on sex, given the important biological differences in how alcohol is metabolised between males and females and the increased health risks to females who consume alcohol. Sex at birth may not reflect the respondent's current gender identity, which is asked in question "demq01".
- Survey weights were applied to ensure that estimates are representative of the student population at each school by sex and age.
- The overall survey sample does not include adequate representation from all Canadian regions to be considered "nationally representative". Data are missing from British Columbia, Nunavut, Northwest Territories, and Yukon. The overall survey sample, is referred to as "Pan-Canadian", rather than a 'national' sample.
- The number of schools recruited represent 21% of all colleges and universities in Canada (total=196).
 Some schools did not elect to participate, resulting in under representation in BC and in the northern territories. Some schools were not eligible to participate because they did not meet the eligibility criteria which included:
 - Having a registrar office
 - Having more than 500 students
 - Being a not-for-profit public or private school
 - Not offer exclusively online courses
 - Non-theological or military institutions

- Results are based on self-reported data which are subject to recall bias, data entry errors and prone
 to under- or over-reporting. Reporting errors may occur because respondents forget actual use with
 increasing consumption, heavier drinkers have higher rates of non-participation in surveysⁱⁱ and
 desirability bias, where respondents may answer in a way that they think is socially acceptable. In
 addition, lack of knowledge of standard serving sizes may contribute to reporting errorsⁱⁱⁱ.
- Lastly, the survey topic is indicated in the title of this project which could lead to a skewed sample of respondents that are more interested and knowledgeable on the topic of substance use. This may have led to over- or under-estimation of prevalence.

Results

Health Status

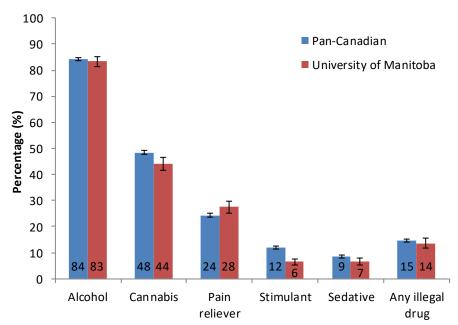
Participants were asked to rate their overall health and mental health using a 5-point Likert scale with the following categories: "excellent, very good, good, fair, and poor". Overall, 86% of respondents rated their general health as "excellent, very good or good". A lower proportion (61%) considered their mental health to be "excellent, very good or good". Respondents with good mental health more likely to be male (69%).

Substance Use

The 2019/2020 CPADS measured substance use among postsecondary students for the following substances: alcohol, cannabis, psychoactive pharmaceuticals (i.e., pain relievers, sedatives, and stimulants) and illegal drugs (e.g., heroin, cocaine). Based on self-reported use in the past 12 months, the largest proportion of students used alcohol, followed by cannabis and psychoactive pharmaceuticals. The smallest proportion reported using illegal drugs in the past 12 months. Only substances with sufficient use to be reportable are included in this report.

Results for University of Manitoba are comparable to Pan-Canadian estimates, including past 12-month alcohol (83%), cannabis (44%), pharmaceutical(34%), and illegal drug use (14%). Estimates for these substances were 84%, 48%, 36%, and 15% respectively for the Pan-Canadian sample.

Figure 1. Past 12-month use of Alcohol, Cannabis, Psychoactive Pharmaceuticals, and illegal drugs*, at University of Manitoba, CPADS 2019/2020



^{*} Includes: Cocaine or crack, amphetamines, methamphetamines, ecstasy or similar designer drugs, Salvia, Hallucinogens, Sniffed glue, gasoline or other solvents, Heroin, Synthetic cannabinoids, Mephedrone, BZP/TFMPP

ALCOHOL

Participants of the 2019/2020 CPADS were asked how familiar they were with Canada's Low-Risk Alcohol Drinking Guidelines (LRDG), their perception about what constitutes low risk drinking amounts and about

their alcohol use patterns. Among those who reported using alcohol, subsequent questions were asked to determine which alcoholic beverages they preferred, the quantities of alcohol consumed, alcohol-related harms, protective strategies used to reduce intoxication and about alcohol-impaired driving.

Throughout this report, the LRDG are defined as follows:

Canada's Low-Risk Alcohol Drinking Guidelines (LRDG)

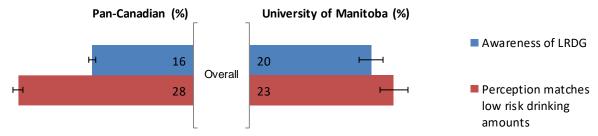
The LRDG provide information on how to reduce the risk of alcohol-related harms in both the short-term (acute; e.g., intoxication, injuries, assault) and long-term (chronic; e.g., cancer) among individuals who choose to drink. The LRDG apply to individuals 25 to 65 years of age; youth in their late teens to age 24 years should never exceed the daily and weekly limits outlined in *the chronic LRDG*. The CPADS calculates the proportion of respondents who exceed the chronic LRDG based on alcohol consumption in the 7 days prior to the survey. Throughout this report, the term LRDG will refer to daily and weekly limits outlined in the following definition:

Low-risk drinking guideline (chronic): people who drink within this guideline must consume "no more than 10 drinks a week for women, with no more than 2 drinks a day most days and 15 drinks a week for men, with no more than 3 drinks a day most days. Plan non-drinking days every week, to avoid developing a habit Error! Bookmark not defined.

Awareness of the Low-Risk Drinking Guidelines

Approximately one-fifth of respondents (20%) had heard of the LRDG (higher than 16% Pan-Canadian sample). When asked to indicate their perceptions of what they thought daily low-risk drinking amounts were for men and women, 23% reported estimates that aligned with the daily limits established in the LRDG (lower than 28% Pan-Canadian sample).

Figure 2. Awareness of Canada's Low-Risk Alcohol Drinking Guidelines (LRDG¹) and perceptions of low-risk daily drinking amounts, CPADS 2019/2020 University of Manitoba



¹ Canada's Low-Risk Drinking Guidelines (LRDG) state that women must drink no more than 10 drinks a week, with no more than 2 drinks a day most days. Men must drink no more than 15 drinks a week, with no more than 3 drinks a day most days. Plan non-drinking days every week to avoid developing a habit.

Alcohol use

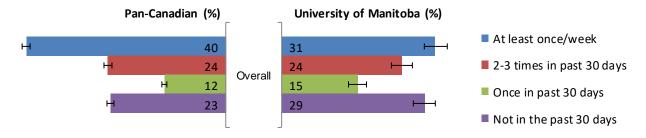
Survey participants were asked if they had consumed an alcoholic beverage in the past year, month and with which frequency. They were also asked to indicate how frequently they had consumed different types of alcoholic beverages as well as their typical and heaviest drinking amounts on drinking days.

The vast majority of survey participants had consumed alcohol in the past 12 months (83% University of Manitoba) and in the past 30 days (71% University of Manitoba, lower than 77% Pan-Canadian sample). The mean age of alcohol initiation was 16 years with no difference between sexes. Among Pan-Canadian respondents who consumed alcohol in the past 12 months, 10% were underage based on the legal drinking age of the province in which their school was located. The proportion of students who were underage was too small to be reported for the University of Manitoba.

Among University of Manitoba students, the largest proportion reported that they consumed alcohol at least once per week. Respondents who consumed alcohol at least once per week were more likely to be:

- Males (36%)
- Third year or greater (34%).

Figure 3. Frequency of past 30-day alcohol use, CPADS 2019/2020 University of Manitoba



Beverage preferences

Past 30-day drinkers were asked which alcoholic beverages they preferred and how frequently these were consumed. Information collected on beverage type can help determine the level of risk as students may be more likely to become intoxicated depending on the type and concentration of alcohol consumed.

The most commonly reported beverage in the past 30 days was spirits and liquor (71%) followed by cooler and pre-mixed cocktails (<7% alcohol content) (61%).

Male respondents were more likely to consume:

- Beer (79%)
- Spirits and liquor (75%)

Female respondents were more likely to consume:

- Wine (65%)
- Cooler and pre-mixed cocktails (<7% alcohol content) (73%)
- Cooler and pre-mixed cocktails (>6% alcohol content) (56%)

Energy drinks and "alcopop" consumption: Consuming energy drinks mixed with alcohol has the potential to increase alcohol consumption and related harms. Caffeine is a stimulant which can mask the effects of alcohol intoxication and lead to overconsumption^{iv}. CPADS participants were asked if they had consumed energy drinks in the past 30 days and if they had consumed various combinations of energy drinks mixed with alcohol (e.g., hand-mixed, pre-mixed).

About one third (28%) of respondents from the University of Manitoba had consumed an energy drink on its own in the past 30 days (higher than 24% of the Pan-Canadian sample). The consumption of energy drinks on the same occasion as alcohol or mixed with alcohol (hand mixed or pre-mixed) was reported by 18% of University of Manitoba students within the past 30 days.

Respondents were asked if they had consumed sweetened high alcohol content beverages (i.e. 'alcopops') with alcohol content of 7% or higher such as 'Four Loko', 'FCKD UP' or 'Clubtails' in the past 30 days. In total, 4% of University of Manitoba students reported they had consumed such a beverage in the past 30 days, lower than the 6% of students in the Pan-Canadian sample.

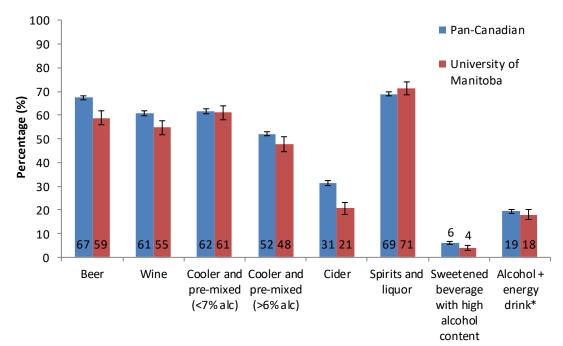


Figure 4. Past 30-day alcohol use by beverage type, CPADS 2019/2020 University of Manitoba

At-Risk/Harmful drinking

Information collected on the frequency of alcohol consumption can be used concurrently with information on quantity to describe the intensity of alcohol consumption among postsecondary students, and the degree of risk for alcohol related harms.

The main measures used to describe harmful drinking patterns among respondents of the CPADS include heavy drinking and adherence to the LRDG.

Heavy drinking: is defined as having four (4) or more drinks for women and five (5) or more drinks for men on one occasion in the past 30 days. 'On one occasion' means consuming drinks at the same time (i.e., consecutively) or within a couple of hours of each other.

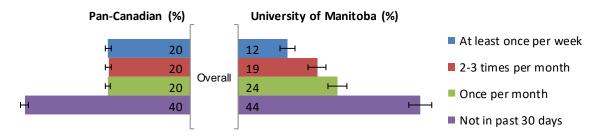
Based on this definition, 56% of respondents from the University of Manitoba had engaged in heavy drinking in the past month, which is consistent among males, females, and year of study. Heavy drinking

^{*}The prevalence of consuming an energy drink and alcohol separately, hand mixed or pre-mixed on one occasion. Measured among those who reported consuming an energy drink mixed with alcohol in the past 30 days.

occurred most often once a month (24%). Fewer respondents drank heavily 2 to 3 times per month (19%) and at least once a week (12%). The proportion of students who did not drink heavily in the past month was 44% (higher than 40% Pan-Canadian).

Respondents reporting heavy drinking at least once per week were more likely to be males (15%).

Figure 5. Frequency of Heavy Drinking in the past 30 days, CPADS 2019/2020 University of Manitoba



Adherence to the LRDG is calculated based on alcohol consumption among respondents who consumed alcohol within the seven (7) days prior to the survey. This calculation has limitations since student drinking patterns are influenced by events throughout the school year (e.g. exams, frosh week) and examining drinking within the past week may not be a representative snapshot of typical behaviour.

Among past week drinkers, the proportion of students from the University of Manitoba who exceeded the weekly LRDG limits (no more than 10 for females and 15 for males) was 19%. The proportion who exceeded the daily LRDG limits, but not the weekly limits was 57% (lower than 64% Pan-Canadian). The proportion who exceeded both the daily and weekly limits in the LRDG was 19%.

Drinking quantities

The CPADS asked participants to report the number of drinks typically consumed on drinking days and the number of drinks consumed on their heaviest drinking day in the past month. Measuring harmful alcohol consumption based on the definition of heavy drinking or based on the LRDG has limitations since factors such as body weight, alcohol tolerance, and food intake/hydration prior to drinking can influence alcohol absorption rates and the level of intoxication. Using a single threshold does not always differentiate those most at risk for consequences resulting from intoxication. As such, it is important to measure the actual number of drinks consumed by survey participants and ranges of consumption to assess the potential for harm.

Among CPADS respondents who had consumed alcohol in the past year, the 'typical' number of drinks they consumed on drinking days in the past month was four (4.1 University of Manitoba, lower than 4.5 Pan-Canadian sample). In contrast, when students from the University of Manitoba were asked to report the highest number of drinks they remember consuming on a drinking day in the past month, they reported 6.7 drinks on average. Both typical and peak amounts consumed exceed the limits in the LRDG.

The typical and heaviest drinking amounts were higher for males than females (typical number of drinks: 4.5 males, 3.8 females; heaviest drinking day: 7.8 males, 5.7 females). However, it should be noted that the average time reported to consume heaviest drinking amounts was similar between sexes (218 min males; 215 min females).

Blood Alcohol Concentrations

The calculation of blood alcohol concentrations (BAC) for the heaviest drinking day in the past month incorporates adjustments for individual factors that can affect alcohol metabolism and impairment. BAC is used as a proxy measure of the degree of intoxication in an individual. The estimated BAC among CPADS respondents is calculated using a formula developed by Seidl et. al^{vi}, that takes into account the amount of alcohol consumed, the time period over which it was consumed and the individual's height and weight, which can all impact how alcohol is metabolised. Students who reported zero drinks on their heaviest drinking day were excluded from analysis, as were students with a BAC level of 500mg/dL (0.50g/dL) or higher since this level is presumed to result in death.

Results are presented as the proportion of respondents who exceeded the legal blood alcohol limit of 80mg/dL (0.08g/dL) or 0.08%. Only respondents who have consumed at least one beverage on the heaviest reported drinking day in the past month are included in the analysis.

It is important to note, that BAC levels are a proxy for impairment and should not be used to determine the legal blood alcohol level of participants. BAC calculations based on self-reported alcohol consumption is subject to limitations and has been shown to overestimate levels when compared to BAC measured using breath samples Pror! Bookmark not defined. Also BAC calculations do not account for food intake, respondent's perception/ recall of alcohol use and the use of other substances which may affect how alcohol is metabolized Pror! Bookmark not defined.

Based on the heaviest drinking day reported by students at the University of Manitoba who consumed alcohol in the past month, the proportion who exceeded the legal threshold for alcohol-impaired driving of 0.08% was 78%.

Drunkenness

Given individual variation that can affect the relationship between the amount of alcohol consumed and intoxication, the CPADS specifically asked respondents about drunkenness. Drunkenness is a self-assessed indicator of level of impairment and potential for harm. Approximately 69% of University of Manitoba respondents who had consumed alcohol in the past month reported feeling drunk (less than 74% for the Pan-Canadian sample).

The proportion of respondents who reported feeling drunk once a week or more often was 15%, which is less than 23% reported among the Pan-Canadian sample.

Alcohol Harms to Self

Participants in the CPADS were asked if they had experienced a range of different harms as a result of their own drinking. Alcohol-related harms were assessed using an adapted version of the Brief Young Adult Alcohol Consequences Questionnaire (B-YAACQ), which is a measure of alcohol problem severity^{vii}.

Among those who drank alcohol within the past 12 months, 47% had experienced at least one alcohol related harm in the past 30 days, which is less than the Pan-Canadian estimate (56% Pan-Canadian sample). The top five harms reported were that they experienced a hangover (27%), said or did something embarrassing (19%), had less energy or felt tired (17%), drank on nights when planned not to (16%), and felt sick to their stomach or threw up (13%).

Among alcohol related harms, those in first and second year were more likely to report they:

- Said or did embarrassing things (21%)
- Needed larger amounts to feel effect (10%)

Figure 6. Top five Alcohol related harms experienced due to own drinking in past 30 days, by sex, [among past 12-month drinkers], CPADS 2019/2020 University of Manitoba

	Pan-Canadian	University of Manitoba (%)		
Top 5 harms caused by own drinking	CPADS sample (%)	Overall	Male	Female
Had a hangover	33	27	26	28
Less energy or felt tired	25	17	16	19
Said or did embarrassing things	22	19	17	21
Drank on nights when planned not to	22	16	17	16
Felt sick to my stomach or thrown up	17	13	14	13
Experienced at least one harm related to own drinking*	56	47	46	48

^{*} This proportion is based on 24 harms in the B-YAACQ scale

Alcohol Harms to Others

Respondents were asked if they had experienced any secondary harm caused by another student's drinking. Approximately 22% of respondents experienced at least one harm within the past 30 days as a result of another student's drinking (less than 31% Pan-Canadian sample). Respondents who were more likely to experience an alcohol related harm due to others drinking were female (24%).

In the past 30 days, the most commonly reported secondary harms by students were the need to take care of another student (11%), they were upset or disappointed by another student (9%), and their sleep was affected (7%).

Figure 7. Alcohol related harms due to others drinking in the past 30 days, by sex, [among all respondents], CPADS 2019/2020 University of Manitoba

	Pan-Canadian	University of Manitoba (%)			
Top 3 harms caused by others drinking	CPADS sample (%)	Overall	Male	Female	
Had to be taken care of by you	14	11	8	13	
Upset or disappointed by another student	11	9	7	11	
Affected sleep	13	7	5	8	
Experienced at least one harm caused by others drinking*	31	22	19	24	

^{*}This proportion is based on 11 harms that could be caused by others drinking.

Alcohol Protective Strategies

The overwhelming majority of respondents (98% University of Manitoba, 98% Pan-Canadian) who consumed alcohol in the past 30 days employed protective strategies to slow down alcohol consumption, avoid intoxication and prevent dangerous alcohol-related consequences. However, some strategies were used more frequently than others. The strategies most often reported as 'always' or 'usually' used by respondents included: only drinking alcohol in safe environments (81%), using a designated driver (80%),

eating before and/or during drinking (80%), avoiding getting in a car with someone who had been drinking (70%), and never leaving a drink unattended (70%).

Female respondents were more likely to employ the following strategies:

- Used a designated driver (83%).
- Never left a drink unattended (79%).
- Avoided getting in a car with someone who had been drinking (73%).
- Limited money spent on alcohol (65%).
- Refused a drink from a stranger (62%).
- Alternated non-alcoholic beverages and alcohol beverages (33%).
- Paced their drinks to 1 or fewer per hour (28%).
- Had a friend let them know when they have had enough (26%).

Students in their first or second year were more likely to employ the following strategies:

- Avoided getting in a car with someone who had been drinking (73%).
- Refused a drink from a stranger (59%).
- Had a friend let them know when they have had enough (25%).
- Avoided drinking games (21%).
- Avoided situations where there was alcohol (11%).

Students in their third year or higher were more likely to make their own drinks (61%).

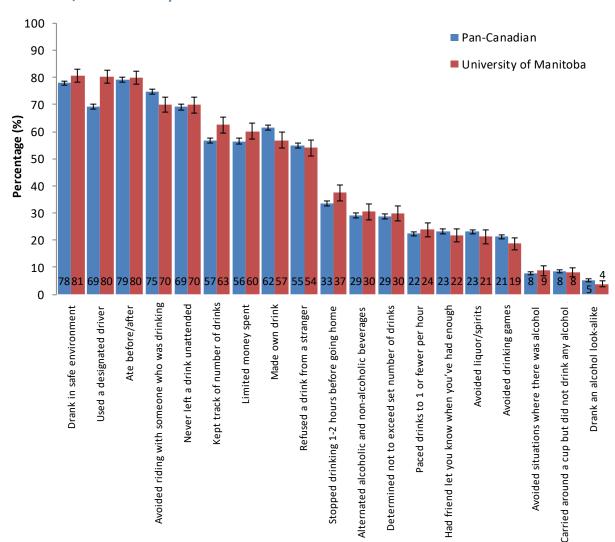


Figure 8. Alcohol protective strategies used 'always' or 'usually' when drinking in the past 30 days, CPADS 2019/2020 University of Manitoba

Alcohol Impaired Driving

Respondents were asked to indicate if they had ever been a passenger in a car driven by someone who consumed two (2) or more alcoholic drinks in the past two (2) hours or if they had ever driven after doing so themselves. Young adults, 20-24 years of age, are more likely than drivers in other age groups to be accused of impaired driving. In 2015, the rate of impaired driving among this age group was 480 incidents per 100,000 drivers, compared to 201 per 100,000 among the general population. The rate of impaired driving among young adults has been declining over time^{viii}.

The proportion of students from the University of Manitoba who reported driving within 2 hours of consuming at least 2 drinks was 14% (higher than 9% Pan-Canadian sample). Similarly, a higher proportion of students at University of Manitoba reported being a passenger with a driver who had consumed 2 or more drinks within the past 2 hours as students at other universities in the survey (20% University of Manitoba, 16% Pan-Canadian).

Drinking Environment

Participants were asked a number of questions regarding the environment in which they consumed alcohol, such as their preferred location for drinking, if they took advantage of alcohol promotions offered on campus during the past 12 months and how much they paid for alcoholic beverages.

Drinking location: Among participants from the University of Manitoba who reported consuming alcohol in the past 30 days, 93% reported consuming alcohol off campus (higher than 86% Pan-Canadian).

Alcohol promotional events: In the 12 months before the survey, 64% of respondents took advantage of at least one alcohol promotional event (higher than 59% Pan-Canadian).

Respondents were most likely to participate in happy hour (52%, higher than 41% Pan-Canadian), followed by low-priced promotions such as ladies' night (33%) and special promotions hosted by alcohol companies (25%).

Participants reported that the lowest amount they spent on one alcoholic beverage over the past month was, on average, \$4.92 (\$5.00 Pan-Canadian average). This amount will be tracked over subsequent survey cycles to determine if the minimum amount that students are spending on alcohol is changing. The recommended price for a standard serving of alcohol is \$1.71 and was established by the National Alcohol Strategy Advisory Committee Working Group in 2015 as part of the development of the CCSA's National Strategy for Alcohol^{ix,x}.

CANNABIS

The 2019/2020 CPADS included questions to determine students' general knowledge and sources of information related to cannabis. Questions also determined the prevalence and patterns of cannabis use among respondents in the past 12 months and in the past 30 days. Questions about cannabis did not differentiate between medical and non-medical use as it was anticipated that the proportion of young adults who use cannabis exclusively for medical purposes would be small and would not greatly impact estimates Error! Bookmark not defined.

Those who reported using cannabis were subsequently asked detailed questions about their frequency of cannabis use, age of initiation, types of cannabis products used, typical THC to CBD ratio preferences in cannabis products, usual source of cannabis, impaired driving and cannabis-related harms.

Exposure to education campaigns, public health or safety messages

Respondents were asked if they had seen or heard education campaigns, public health or safety messages about cannabis in various locations since the cannabis law came into effect on October 17, 2018. Respondents could select more than one location if they had seen or heard these messages in multiple locations. The five most common locations to have seen or heard these messages were:

- School (77%)
- Social media (74%)
- Public display of posters or billboards (64%)
- TV/radio (51%)
- Health care setting (46%)

In total, 5% of students from the University of Manitoba reported that they had not noticed any education campaigns or public health messages (lower than 7% Pan-Canadian).

Compared to Pan-Canadian estimates, students from University of Manitoba reported higher exposure to cannabis related education campaigns and safety messages at school (77%, 71% Pan-Canadian), on posters or billboards (64%, 51% Pan-Canadian), in health care settings (46%, 41% Pan-Canadian), and inside/outside legal cannabis stores (33%, 28% Pan-Canadian). University of Manitoba students reported lower exposure to cannabis related education campaigns than the Pan-Canadian sample on non-social media websites (26%, 29% Pan-Canadian) and inside/outside illegal cannabis stores (5%, 7% Pan-Canadian).

Increase in knowledge of harms related to cannabis

Respondents were asked if their knowledge of the harms related to cannabis increased since the coming into force of the *Cannabis Act*. Almost one-third (29%) of students who responded from the University of Manitoba reported that their knowledge of harms related to cannabis increased.

Knowledge about harms related to cannabis

Respondents were asked if they knew cannabis smoke to be harmful, whether cannabis use during pregnancy or breastfeeding can be harmful, if frequent cannabis use can increase the risk of mental health problems, and whether teenagers are at greater risk of harm from cannabis use than adults. For all these harms the majority of students reported they believe these risks to be true:

- 79% (less than 83% Pan-Canadian) reported cannabis smoke can be harmful,
- 90% believed cannabis use can be harmful during pregnancy,
- 80% (less than 85% Pan-Canadian) believed frequent cannabis use can increase the risk of mental health problems, and
- 84% (less than 88% Pan-Canadian) agreed that teenagers are at greater risk of harm from cannabis use than adults.

Females were more likely than males to know that cannabis can be harmful during pregnancy or breastfeeding (93%).

Compared to Pan-Canadian estimates, students from University of Manitoba reported having lower levels of agreement that cannabis smoke can be harmful, increases the risk of mental health problems, and creates greater risk of harm for teens than adults.

Cannabis Use

Within the past 12 months, 44% of all respondents from University of Manitoba had used cannabis. Past 12-month cannabis users were more likely to be in their third year or greater (48%).

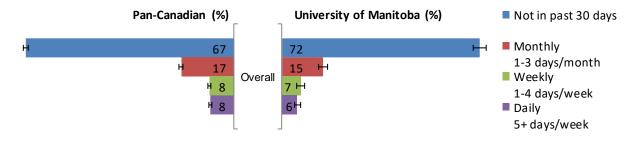
The average age of initiating cannabis use was 17.5 years.

Approximately 28% of respondents had used cannabis in the past 30 days (lower than 33% Pan-Canadian), which was higher among males (30%) and students in their third year or higher (30%).

The majority of University of Manitoba respondents had not used cannabis in the past 30 days (72%), while the greatest proportion used one to three days per month (15%), followed by one to four days per week (7%).

Compared to Pan-Canadian estimates, students from the University of Manitoba were less likely to use cannabis in the past 12 months and past 30 days.

Figure 9. Frequency of past 30-day cannabis use, CPADS 2019/2020 University of Manitoba



Changes in use over time

CPADS respondents were asked to indicate if they had changed the amount of cannabis they use since the cannabis law came into effect October 17, 2018. Most students from the University of Manitoba reported using a similar amount (43% University of Manitoba, lower than 49% Pan-Canadian) rather than a larger amount (29%) since legalisation. Seventeen percent of students from University of Manitoba, reported using a smaller quantity of cannabis since cannabis legalisation and regulation.

Types of cannabis products used and frequency

Students who used cannabis in the past 12 months were asked about the types of cannabis products they had used in the past year and the frequency with which these were consumed. The six most common products used by respondents from the University of Manitoba were:

- Dried flower/leaf (69%)
- Cannabis edible products (58%)
- Cannabis vape pens/cartridges (49%, higher than 40% Pan-Canadian sample)
- Cannabis oil for oral use (32%, higher than 24% Pan-Canadian sample)
- Cannabis concentrate/extracts (20%)
- Hashish/kief (14%)

Compared to Pan-Canadian estimates, students from University of Manitoba reported using similar types of cannabis products, with the exception of cannabis vape pens/cartridges and cannabis oil for oral use, which are both higher than the Pan-Canadian sample.

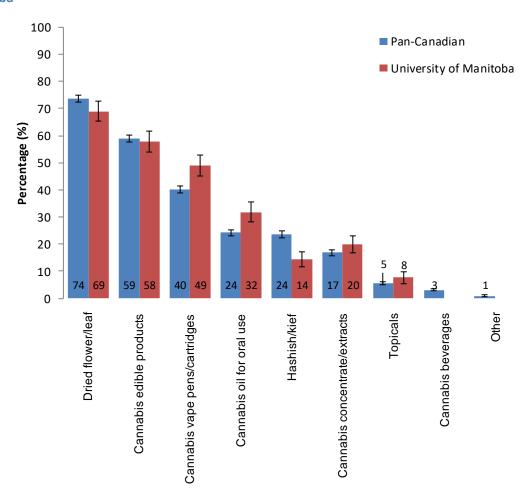


Figure 10. Cannabis products used among past 12-month users, CPADS 2019/2020 University of Manitoba

Relative levels of Tetrahydrocannabinol (THC) and Cannabidiol (CBD) in cannabis products

Respondents who used cannabis in the past 12 months were asked about the relative levels of THC and CBD in the cannabis products they typically use. CBD attenuates the effect of THC on the body and cannabis products with higher ratios of THC compared to CBD have stronger psychoactive properties. Twenty-seven percent (27%) of students from the University of Manitoba indicated using cannabis products with higher levels of THC and twelve percent (12%) indicated higher CBD and lower THC. Most of the "other" responses indicated the use of products with different levels of THC and CBD depending on the purpose of use or the time of day. In total, 40% of students indicated they did not know the relative levels of THC and CBD.

Sources used to obtain the cannabis product

Respondents who indicated using cannabis in the past 12 months were asked who they usually obtained cannabis from in the past year, including if cannabis was purchased from a legal or illegal source. The top source to obtain cannabis was from a legal storefront (42%), which is higher than the 34% among Pan-Canadian sample.

Frequency of cannabis use to get "high" before school or work

Students who had used cannabis in the past 12 months were asked about the frequency of cannabis use to get "high" before or at school. Overall, 73% reported they had not used cannabis to get "high" before or at school in the past 12 months which is more than among Pan-Canadian sample (64%). In total, 19% of students from the University of Manitoba who had used cannabis in the past 12-month cannabis reported rarely using cannabis before or at school (less than once a month).

Cannabis Impaired Driving

People who had used cannabis in the past 12 months were asked about their driving habits relative to their cannabis use. All respondents were also asked if they had ever been a passenger in a vehicle driven by someone who used cannabis within two hours.

Among students from the University of Manitoba who had used cannabis in the past 12 months, 22% reported that they had ever driven within two hours of smoking or vaporizing cannabis, which is higher than the overall survey sample (17% Pan-Canadian).

The proportion of students from the University of Manitoba who reported being a passenger with a driver who had smoked or vaporised cannabis within 2 hours was 31%. Such respondents were more likely to be in their third year of studies or greater (35%).

ASSIST

The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) was developed for the World Health Organization (WHO) by an international group of researchers specialised in problematic substance use to detect and manage substance use and related problems in primary and general medical care settings. The ASSIST module is used to screen respondents of the CPADS for problematic cannabis use.

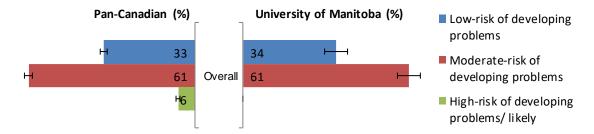
Respondents are categorised based on their consumption as follows:

- 1. Low risk of developing health and other problems (score of 0-3)
- 2. Moderate risk of developing health and other problems (score of 4-26)
- 3. High risk of developing health and other problems and likely to be dependent (score of 27+)

Among those who reported using cannabis in the past three months, 58% experienced at least one of the five cannabis-related harms asked in the ASSIST module. The most commonly reported harm related to their use was a desire or urge to use cannabis (53%), followed by failing others' expectations (18%).

A cannabis substance involvement score was calculated for past three-month users based on their responses to the ASSIST module. Approximately 34% of respondents were at low risk of developing cannabis related health problems (score 0-3). The proportion of respondents from the University of Manitoba with a score of 4-26, indicative of moderate risk of developing cannabis related health problems was 61%. The proportion of respondents with a score of 27 or more, indicating the likelihood of cannabis dependence, was unreportable.

Figure 11. ASSIST scores among past 3-month cannabis users, CPADS 2019/2020 University of Manitoba



Polysubstance use

Those who reported using cannabis within the past 12 months, were asked if they had used another substance at the same time as cannabis. The largest proportion of respondents from the University of Manitoba (74%, lower than 79% Pan-Canadian) used cannabis with alcohol, followed by cannabis use at the same time as tobacco and e-cigarettes with nicotine (38%).

PSYCHOACTIVE PHARMACEUTICALS

Participants were asked about their use of four classes of pharmaceuticals, namely opioid pain relievers, stimulants (such as medication prescribed for Attention Deficit Hyperactivity Disorder), sedatives and over-the-counter medications. While these drugs are intended for therapeutic purposes, they have the potential to be abused due to their psychoactive properties.

The first three classes of pharmaceuticals were asked of all participants to determine the prevalence of use in the past 12 months. Among 12-month users, problematic use was also assessed.

Problematic use was defined as using a larger dose than recommended, using more frequently than recommended or using with the intention to get high.

The prevalence of over-the-counter medication use was not asked since use of these substances is common. However, the CPADS included one question to ask respondents if they had used the following over-the-counter medications for reasons other than health or medical purposes: anti-motion sickness or nausea medicine (e.g., Gravol*); sleeping medicine (e.g., Nytol*); and cold or cough medicine (e.g., Robitussin DM*, Benylin* DM, also known as robos", dex" and "DXM").

Psychoactive pharmaceutical use

Overall, 34% of respondents from the University of Manitoba had used at least one of opioid pain relievers, stimulants, or sedatives in the past 12 months.

Overall, 28% of respondents from the University of Manitoba had used a prescription opioid pain reliever in the past 12 months, 6% used stimulants and 7% used sedatives.

Compared to Pan-Canadian estimates, students from the University of Manitoba were more likely to report using pain relievers (24% Pan-Canadian), and less likely to report using stimulants and sedatives (12% and 9%, respectively, for Pan-Canadian respondents).

Problematic use of psychoactive pharmaceuticals

Problematic use of psychoactive pharmaceuticals was calculated among those who have consumed a psychoactive pharmaceutical in the past 12 months.

Problematic use was reported by 34% of past year users of pain relievers, stimulants, sedatives, or over-the-counter medication from the University of Manitoba.

Naloxone kits

Approximately 30% of respondents had heard of naloxone kits in their lifetime, which is less than the Pan-Canadian estimate (40%). Respondents more likely to have heard of naloxone kits were in their third year or greater (34%).

OTHER DRUGS

Illegal Drug use

CPADS participants were asked if they had ever used any of the following 11 illegal drugs: cocaine and crack; amphetamines; methamphetamine; ecstasy or others similar designer/club drugs; hallucinogens; heroin; sniffed glue, gasoline or other solvents; salvia; synthetic cannabinoids; mephedrone; and BZP/TFMPP. Approximately 14% of participants from the University of Manitoba reported using at least one of these substances during the past 12 months.

Users were more likely to be:

- Males (16%)
- Third year or greater (16%).

DRUG HARMS

CPADS respondents who reported using cannabis, any illegal drug or who had engaged in problematic use of psychoactive pharmaceuticals or over-the-counter medication in the past 12 months were asked if they had experienced any harm as a result of their use. Respondents were asked if there was ever a time they felt their general drug use had a harmful effect on one of eight factors: physical health; friendships and social life; financial position; home life or marriage; work, studies, or employment opportunities; legal problems; difficulty learning; or housing problems.

Approximately 5% of respondents from the University of Manitoba experienced at least one harm due to their substance use.

SMOKING TOBACCO AND VAPING

Information was collected on current smoking status, the frequency of using an e-cigarette or vaporisers and the product which was vaped. Respondents' were also asked their motivations for using these devices. Tobacco smoking is often concurrent with use of alcohol and other drugs and when combined, can intensify health consequences.

The proportion of students from University of Manitoba who occasionally smoke tobacco is 7%. Although the proportion of daily smokers is 2% among the Pan-Canadian sample, the result for the University of Manitoba is unreportable.

In total, 14% of University of Manitoba students reported using an e-cigarette or had tried vaping in the past 30 days which is lower than 17% of all Pan-Canadian respondents.

SCHOOL-SPECIFIC QUESTIONS

Over one-quarter (26%) of students from the University of Manitoba reported being unaware of any harm reduction services at the University of Manitoba. The three services students reported being most aware of included the student counseling centre for harm reduction services at the school (59%), the university health service (49%) and the health and wellness educator (28%).

University of Manitoba students were most likely to want to see addictions counseling as a service provided by the school to support harm reduction for substance abuse (57%).

Female students were more likely than male respondents to want to see support for:

- Addictions counseling (61%),
- Substance use treatment groups (44%),
- A safer use space (40%), and
- Harm reduction room (36%).

First and second year students were more likely to want to see support for addictions counseling (60%), compared to students in third year or higher (54%).

Appendix 1: 2019/2020 CPADS Data Tables University of Manitoba

Table 1. Participation rates and average survey length, CPADS 2019/2020

Field statistics	Pan-Canadian	University of Manitoba
		•
Field start	11/5/2019	11/5/2019
Field end	3/20/2020	12/13/2019
Average survey length (mm:ss)	20:06	18:35
Students invited*	222,307	10,000
Surveys accessed**	30,719	2,152
Survey drop-offs (did not complete, ineligible***)	9,422	481
Not eligible	2,452	90
Surveys completed	21,297	1,671
Response rate (among eligible students)**	9.6%	16.7%

^{*}Students invited is an estimate since there were different recruitment method options. Any school where a static link was sent or posted has been estimated at their approximate enrolment size, which may overestimate the total number of students invited. Schools that sent their own invites have been entered based on the number of links provided, but Advanis cannot guarantee that many were sent out.

^{**}the term "accessed" refers to the number of students who clicked on the survey link.

^{***} refers to students who did not meet survey eligibility criteria (Studying on campus and between 17 to 25yrs)

Table 2. Student demographic profile, CPADS 2019/2020 (UNWEIGHTED DATA)

	Pan-Canadiar	n (all sites)	University of Manitoba		
	N	%	N	%	
Survey language					
English	15,504	72.8%	1,666	99.7%	
French	5,793	27.2%	5	0.3%	
Sex at birth					
Male	8,307	39.1%	645	38.7%	
Female	12,955	60.9%	1,020	61.3%	
Gender					
Male	8,255	39.0%	640	38.6%	
Female	12,759	60.3%	1,003	60.5%	
Specified other	154	0.7%	15	0.9%	
Age groups					
17 to 19 yrs	7,608	35.7%	730	43.7%	
20 to 22 yrs	9,759	45.8%	676	40.5%	
23 to 25 yrs	3,930	18.5%	265	15.9%	
Sexual orientation			·		
Straight/Heterosexual	17,080	82.1%	1,341	82.2%	
Homosexual	631	3.0%	39	2.4%	
Another identity	3,092	14.9%	252	15.4%	
Field of study			<u>.</u>		
Arts/Humanities/Social Science	5,233	24.8%	405	24.7%	
Science/Technology	4,128	19.6%	450	27.5%	
Engineering	3,477	16.5%	151	9.2%	
Business/commerce	2,162	10.2%	184	11.2%	
Medicine	811	3.8%	51	3.1%	
Health science	2,306	10.9%	207	12.6%	
Law	500	2.4%	23	1.4%	
Education	987	4.7%	32	2.0%	
Other	1,499	7.1%	134	8.2%	

Year of study

i cai di study				
1st and 2nd year	12,315	58.8%	904	54.9%
3rd yr or higher	8,645	41.2%	742	45.1%
Student status				
Full-time	20,372	96.3%	1,553	93.7%
Part-time	779	3.7%	104	6.3%
International student status				
Yes	2,419	11.4%	191	11.5%
No	18,716	88.6%	1,467	88.5%
Living location				
Campus residence	3,657	17.3%	95	5.8%
Fraternity or sorority house	58	0.3%	4	0.2%
Other college/university housing	448	2.1%	2	0.1%
Parent/guardian's home	7,838	37.1%	1,125	68.2%
Other off-campus housing	9,037	42.8%	417	25.3%
Other	86	0.4%	6	0.4%

NB Individual cells may not add up to totals when rolled up- "don't know" and refused not shown here and account for the difference.

^{*}Students invites is an estimate since there were different recruit method options. Any school where a static link was sent or posted has been estimated at 1000 students. Schools that sent their own invites have been entered based on the number of links provided, but Advanis cannot guarantee that many were sent out.

Table 3. Past 12 month health status indicators, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%	%)	
	Canadian				Year of study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
General health						
	86.6	85.6	86.9	84.4	85.0	86.3
Excellent, very good, good	[86.0-87.2]	[83.9-87.4]	[84.3-89.6]	[82.2-86.7]	[82.6-87.4]	[83.7-88.8]
	13.4	14.4	13.1	15.6	15.0	13.7
Fair or poor	[12.8-14.0]	[12.6-16.1]	[10.4-15.7]	[13.3-17.8]	[12.6-17.4]	[11.2-16.3]
Mental health						
	65.9	60.7	68.9	52.9	60.3	60.9
Excellent, very good, good	[65.1-66.7]	[58.3-63.2]	[65.3-72.6]	[49.8-56.1]	[56.9-63.6]	[57.3-64.5]
			В			
	34.1	39.3	31.1	47.1	39.7	39.1
Fair or poor	[33.3-34.9]	[36.8-41.7]	[27.4-34.7]	[43.9-50.2]	[36.4-43.1]	[35.5-42.7]
				Α		

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

[#] High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Table 4. Awareness of the Low-Risk Drinking Guidelines1, by sex and year of study, CPADS 2019/2020 University of Manitoba

			S	School-specific (%)			
Alcohol literacy	Pan-Canadian	0	0.4-1	F	Year of study		
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +	
_			Α	В	С	D	
LRDG awareness ²		T	T		1	T	
	16.4	19.8	19.8	19.7	16.8	22.3	
Yes	[15.9-17.0]	[17.8-21.7]	[16.6-22.9]	[17.3-22.2]	[14.3-19.4]	[19.3-25.4]	
						С	
	78.0	74.3	74.3	74.3	78.1	70.9	
No	[77.4-78.7]	[72.1-76.5]	[70.9-77.8]	[71.6-77.0]	[75.3-80.9]	[67.6-74.3]	
					D		
	5.5个	5.9	5.9	6.0	5.1	6.8	
Don't know	[5.2-5.9]	[4.8-7.1]	[4.0-7.7]	[4.5-7.5]	[3.6-6.6]	[4.9-8.6]	
Perception matches Low-Risk Drinking amou	nts ³						
	40.3	38.3	37.1	39.4	39.3	37.7	
for women- no more than 2 standard drinks per day	[39.4-41.2]	[35.6-40.9]	[32.9-41.3]	[36.1-42.6]	[35.6-43.0]	[33.9-41.5]	
	31.3	26.7	24.5↑	28.7	27.5↓	26.5个	
for men- no more than 3 standard drinks per day	[30.5-32.1]	[24.3-29.1]	[20.8-28.3]	[25.7-31.8]	[24.1-30.8]	[23.0-30.0]	
	28.4	23.5↓	21.3	25.5↓	24.3	23.2	
Both sexes	[27.6-29.2]	[21.2-25.8]	[17.8-24.9]	[22.5-28.4]	[21.1-27.5]	[19.9-26.6]	

¹ Refers to the Canadian Low Risk Alcohol Drinking Guidelines (LRDG): http://www.ccsa.ca/Eng/topics/alcohol/drinking-guidelines/Pages/default.aspx

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² Based on ALCO1: 'Have you heard of Canada's Low Risk Drinking Guidelines?"

³ Based on alc02_a: "For a woman/man: How many drinks in a typical day do you think is considered a low risk amount?". The threshold for reporting is based on the Low Risk Drinking Guidelines for chronic health effects.

^{*} Moderate sampling variability, interpret with caution.

Table 5. Alcohol use, by sex and year of study, CPADS 2019/2020University of Manitoba

	Pan-		S	chool-specific (%)	
	Canadian	Overall	Males	Females	Year o	f study
	(%)	Overall	Males	remaies	1 st and 2 nd	3 rd +
			Α	В	С	D
Alcohol use		T	1	1	1	1
	88.3	87.6	85.5↓	89.7	84.2	91.1
Alcohol - lifetime	[87.7-88.8]	[86.0-89.3]	[82.7-88.2]	[87.8-91.6]	[81.7-86.7]	[89.0-93.2]
				Α		С
	84.3	83.3	81.2	85.3	80.5↓	86.1
Alcohol - past year	[83.7-84.9]	[81.4-85.2]	[78.2-84.3]	[83.1-87.5]	[77.8-83.2]	[83.5-88.7]
				Α		С
	15.6	16.1	16.2	16.0	16.0	16.1
Mean age of initiation (years)	[15.6 - 15.7]	[16 - 16.2]	[16 - 16.4]	[15.9 - 16.1]	[15.9 - 16.1]	[15.9 - 16.3]
	10.1	#	#	#	#	#
Under age drinking - among past year drinkers	[9.5-10.7]					
	76.6	71.0	69.2	72.7	66.0	75.9
Alcohol - past month	[75.9-77.3]	[68.7-73.3]	[65.5-72.9]	[69.8-75.5]	[62.7-69.3]	[72.7-79.2]
						С
Alcohol - past month frequency						
	40.3	31.2	36.2	26.5↓	28.3	34.1
At least once/week	[39.5-41.2]	[28.9-33.6]	[32.4-40.1]	[23.7-29.3]	[25.2-31.4]	[30.5-37.7]
			В			С
	23.9	24.4	19.8	28.8	22.9	26.0
2-3 times in past 30 days	[23.1-24.6]	[22.2-26.6]	[16.6-23.0]	[25.9-31.7]	[20.0-25.8]	[22.7-29.3]
				Α		
	12.4	15.4	13.2	17.4	14.8	15.9
Once in past 30 days	[11.9-13.0]	[13.5-17.2]	[10.5-16.0]	[15.0-19.8]	[12.4-17.3]	[13.1-18.6]
				Α		
	23.4	29.0	30.8	27.3	34.0	24.1
Not in the past 30 days	[22.7-24.1]	[26.7-31.3]	[27.1-34.5]	[24.5-30.2]	[30.7-37.3]	[20.8-27.3]
					D	

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Source: Canadian Postsecondary Education Alcohol and Drug Use Survey, 2019/2020 school year

Table 6a. Alcoholic beverages consumed in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

Pan- School-specific (%)					
Canadian	Overell	Malas	Famalas	Year of study	
(%)	Overali	iviales	remaies	1 st and 2 nd	3 rd +
		Α	В	С	D
67.4	58.8	79.4	40.0	53.3	63.1
[66.5-68.3]	[55.8-61.8]	[75.5-83.4]	[36.4-43.7]	[49.1-57.5]	[58.9-67.3]
		В			С
60.8	54.8	43.3	65.3	51.0	57.6
[59.8-61.8]	[51.8-57.8]	[38.4-48.1]	[61.7-68.9]	[46.8-55.2]	[53.3-61.9]
			Α		С
61.7	61.1	47.6	73.2	66.2	56.5个
[60.7-62.6]	[58.1-64.0]	[42.7-52.5]	[69.9-76.5]	[62.2-70.2]	[52.2-60.9]
			Α	D	
52.1	47.7	38.3	56.1	55.2	41.7
[51.1-53.1]	[44.6-50.7]	[33.5-43.1]	[52.4-59.9]	[50.9-59.4]	[37.4-46.1]
			Α	D	
31.3	20.6	19.2	22.0	19.9	20.6
[30.4-32.2]	[18.2-23.1]	[15.3-23.0]	[18.9-25.1]	[16.5-23.3]	[17.1-24.1]
68.9	71.2	74.6	68.2	68.4	73.9
[68.0-69.8]	[68.5-74.0]	[70.3-78.8]	[64.7-71.7]	[64.5-72.3]	[70.0-77.7]
		В		_	_
	67.4 [66.5-68.3] 60.8 [59.8-61.8] 61.7 [60.7-62.6] 52.1 [51.1-53.1] 31.3 [30.4-32.2]	Canadian (%) Overall 67.4 [66.5-68.3] 58.8 [55.8-61.8] 60.8 [59.8-61.8] 54.8 [51.8-57.8] 61.7 [60.7-62.6] [58.1-64.0] 52.1 [58.1-64.0] 47.7 [44.6-50.7] 31.3 [30.4-32.2] 20.6 [18.2-23.1] 68.9 71.2	Canadian (%) Overall Males 67.4 [66.5-68.3] 58.8 [79.4 [75.5-83.4] B [75.5-83.4] B [75.5-83.4] B [75.5-83.4] B [75.5-83.4] B [75.5-83.4] B [75.8-57.8] 60.8 [51.8-57.8] 54.8 [38.4-48.1] [38.4-48.1] 61.7 [60.7-62.6] 61.1 [42.7-52.5] [42.7-52.5] 52.1 [58.1-64.0] 47.7 [42.7-52.5] [42.7-52.5] 52.1 [44.6-50.7] [33.5-43.1] 31.3 [30.4-32.2] [18.2-23.1] [15.3-23.0] 68.9 [68.0-69.8] 71.2 [74.6 [70.3-78.8] [68.0-69.8] [68.5-74.0] [70.3-78.8]	Canadian (%) Overall Males Females A B 67.4 [66.5-68.3] 58.8 [79.4 40.0 [36.4-43.7] [66.5-68.3] [55.8-61.8] [75.5-83.4] [36.4-43.7] B 60.8 [59.8-61.8] 54.8 43.3 65.3 [61.7-68.9] [59.8-61.8] [51.8-57.8] [38.4-48.1] [61.7-68.9] A 61.7 61.1 47.6 73.2 [69.9-76.5] [69.9-76.5] A 52.1 47.7 38.3 56.1 [51.1-53.1] [44.6-50.7] [33.5-43.1] [52.4-59.9] A 31.3 20.6 19.2 22.0 [18.2-23.1] 22.0 [18.9-25.1] 68.9 71.2 74.6 68.2 [68.0-69.8] [68.5-74.0] [70.3-78.8] [64.7-71.7]	Canadian (%) Overall Males Females Year of 1st and 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

^{*} Moderate sampling variability, interpret with caution.

Table 6b. Frequency of alcohol use in past 30 days, by beverage type, CPADS 2019/2020 University of Manitoba

		Beverage type (%)								
Frequency of use by beverage type	Beer	Wine	Cooler or premixed cocktails < 7%	Cooler or premixed cocktails > 6%	Cider	Spirits and liquor				
	ı	J	K	L	М	N				
	22.0	10.2	10.6	8.1	#	16.2				
At least once/week	[19.5-24.6]	[8.4-12.1]	[8.7-12.5]	[6.4-9.7]		[13.9-18.4]				
	JKLN		L			JKL				
	17.6	18.2	23.7	18.6	5.9	29.6				
2-3 times in past 30 days	[15.3-19.9]	[15.9-20.6]	[21.1-26.2]	[16.2-20.9]	[4.4-7.3]	[26.8-32.3]				
	M	M	IJLM	M		IJKLM				
	19.2	26.4	26.8	21.0	12.8	25.5个				
Once in past 30 days	[16.8-21.5]	[23.7-29.0]	[24.1-29.5]	[18.5-23.5]	[10.7-14.8]	[22.8-28.2]				
	M	ILM	ILM	M		ILM				
	41.2	45.2	38.9	52.3	79.4	28.8				
Not in past 30 days	[38.2-44.2]	[42.2-48.2]	[36.0-41.9]	[49.3-55.4]	[76.9-81.8]	[26.0-31.5]				
	N	KN	N	IJKN	IJKLN					

The symbols ↑ and ↓ refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 7. Energy drink use in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian (%)	Overall	Males	Females	Year of study			
					1 st and 2 nd	3 rd +		
			Α	В	С	D		
Energy drinks - past month								
Energy drink- consumed alone	24.0	28.2	32.5↓	24.1	29.6	26.9		
	[23.3-24.8]	[25.9-30.4]	[28.8-36.2]	[21.5-26.8]	[26.5-32.7]	[23.7-30.2]		
			В					
Sweetened beverage with high alcohol content	6.0	4.0	#	4.5个*	5.8	#		
	[5.6-6.5]	[2.9-5.1]		[3.1-6.0]	[4.0-7.6]			
Alcohol and energy drink - consumed separately	11.4	11.6	13.6	9.9	11.6	11.7		
	[10.8-12.0]	[9.9-13.4]	[10.5-16.6]	[7.8-11.9]	[9.2-14.0]	[9.1-14.2]		
			В					
Alcohol and energy drink - hand mixed together	14.2	11.7	13.5↓	10.0	12.7	10.5↓		
	[13.5-14.9]	[9.9-13.4]	[10.5-16.5]	[8.0-12.1]	[10.2-15.2]	[8.0-12.9]		
Store bought pre-mixed alcoholic beverage	3.7	4.5↓	#	4.0*	6.2	#		
	[3.4-4.1]	[3.4-5.6]		[2.7-5.3]	[4.4-8.1]			
	19.3	17.9	20.3	15.8	19.6	16.1		
Any alcohol + energy drink ¹	[18.5-20.0]	[15.8-20.0]	[16.7-23.8]	[13.3-18.2]	[16.6-22.7]	[13.1-19.0]		
			В					

¹ The prevalence of consuming an energy drink and alcohol separately, hand mixed or pre-mixed at one occasion. Measured among those who reported consuming an energy drink mixed with alcohol in the past 30 days.

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 8. Typical/heavy alcohol consumption patterns and Blood Alcohol Concentration (eBAC), [among past 30 day drinkers], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian (%)	Overall	Males	Females	Year of study			
					1 st and 2 nd	3 rd +		
			Α	В	С	D		
Typical drinking day ¹								
Typical number of drinks consumed in one day (average)	4.5↓	4.1	4.5↓	3.8	4.4	3.9		
	[4.4 - 4.6]	[3.9 - 4.3]	[4.1 - 4.9]	[3.6 - 4]	[4.1 - 4.7]	[3.6 - 4.2]		
			В		D			
5+ drinks on average	38.2	35.8	38.9	33.0	39.1	33.3		
	[37.2-39.2]	[32.9-38.7]	[34.1-43.6]	[29.5-36.6]	[35.0-43.3]	[29.2-37.4]		
					D			
8+ drinks on average	13.6	12.7	16.3	9.4	14.7	11.0		
	[12.9-14.4]	[10.7-14.7]	[12.7-20.0]	[7.2-11.6]	[11.7-17.7]	[8.2-13.7]		
			В					
Heaviest drinking day ²								
Highest number of drinks consumed in one day (average)	6.9	6.7	7.8	5.7	6.8	6.5↓		
	[6.7 - 7.0]	[6.4 - 7]	[7.2 - 8.4]	[5.4 - 6]	[6.4 - 7.2]	[6.1 - 6.9]		
(average)			В					
Number of minutes to consume highest number of drinks (average)	234.5个	216.4	218.2	214.8	208.2	224.4		
	[231.4 - 237.6]	[208.6 - 224.2]	[204.4 - 232]	[205.7 - 223.9]	[197.7 - 218.7]	[212.9 - 235.9]		
						С		
Heaviest drinking pace (average number of drinks/hour)	2.5个	2.5个	3.0	2.1	3.0	2.0		
	[2.3 - 2.8]	[2.2 - 2.8]	[2.3 - 3.7]	[1.8 - 2.4]	[2.4 - 3.6]	[1.8 - 2.2]		
			В		D			
Heaviest drinking day in in past month - % with Blood	77.6	74.2	70.1	78.0	78.4	71.2		
Alcohol Concentration (eBAC) above 0.08 g/dL (80mg/dL)	[76.7-78.5]	[71.3-77.1]	[65.3-74.9]	[74.6-81.4]	[74.6-82.2]	[67.1-75.4]		
				Α	D			

¹ Based on Q. ALC10: "During the past 30 days, on those days when you drank alcoholic beverages, how many drinks did you usually have?"

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² Based on Q. ALC13a: "During the past 30 days, what is the highest number of alcoholic drinks you have had on a drinking day?" [95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

^{*} Moderate sampling variability, interpret with caution.

[#] High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Table 9. Drinking within the Low-Risk Drinking Guidelines, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian (%)	Overall		Females	Year of study			
			Males		1 st and 2 nd	3 rd +		
		1	Α	В	С	D		
Heavy drinking ¹	59.8	55.6	53.1	58.0	54.4	57.0		
	[58.9-60.7]	[52.9-58.4]	[48.8-57.5]	[54.6-61.5]	[50.7-58.2]	[53.0-61.1]		
Frequency of heavy drinking in past 30 days								
At least once per week	20.0	12.1	15.1	9.2	12.3	11.7		
	[19.2-20.7]	[10.3-13.9]	[11.9-18.2] B	[7.2-11.3]	[9.9-14.8]	[9.1-14.4]		
2-3 times per month	19.8	19.3	16.5个	22.0	20.1	19.2		
	[19.1-20.6]	[17.1-21.5]	[13.3-19.8]	[19.1-24.9] A	[17.1-23.1]	[16.0-22.5]		
Once per month	20.0	24.2	21.5个	26.8	22.0	26.1		
	[19.3-20.7]	[21.8-26.6]	[17.9-25.1]	[23.7-29.9]	[18.9-25.1]	[22.5-29.7]		
				Α				
	40.2	44.4	46.9	42.0	45.6	43.0		
Not in past 30 days	[39.3-41.1]	[41.6-47.1]	[42.5-51.2]	[38.5-45.4]	[41.8-49.3]	[38.9-47.0]		
Exceeding Low Risk Drinking Guidelines (LRDG) ² - amo	ong past week d	rinkers						
Exceed weekly LRDG	21.1	18.9	22.0	15.7	20.7	18.0		
	[20.1-22.2]	[15.8-22.1]	[16.9-27.0]	[11.9-19.4]	[16.0-25.4]	[13.7-22.3]		
Exceed daily LRDG	64.4	57.1	52.9	61.6	59.3	55.6		
	[63.2-65.6]	[53.1-61.1]	[46.8-59.0]	[56.6-66.6] A	[53.6-65.0]	[50.1-61.2]		
	21.1	18.9	21.8	15.7	20.7	18.0		
Exceed daily and weekly LRDG	[20.0-22.1]	[15.7-22.0]	[16.8-26.9]	[11.9-19.4]	[16.0-25.4]	[13.7-22.2]		

¹ Heavy drinking is defined as consumption of 4 or more drinks for women and 5 or more drinks for men on one occasion in the past 30 days

² A measure of the proportion of respondents who exceed Canada's Low-Risk Alcohol Drinking Guidelines. Calculations are based on respondents alcohol intake in the 7 days prior to the survey.

LRDG: People who drink within this guideline must drink no more than 10 drinks a week for women, with no more than 2 drinks a day most days and 15 drinks a week for men, with no more than 3 drinks a day most days. Plan non-drinking days every week to avoid developing a habit.

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 10. Drunkenness, by sex and year of study and beverage consumed in past 30 days, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%	%)	
	Canadian	0	0.4-1	El	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
Drunkenness						
	85.8	83.1	82.5↓	83.6	81.0	84.4
Ever drunk - among lifetime drinkers	[85.2-86.4]	[81.0-85.1]	[79.2-85.8]	[81.1-86.1]	[78.1-83.9]	[81.6-87.3]
	16.4	16.7	16.8	16.7	16.5个	16.9
Mean age when first drunk- among lifetime drinkers	[16.4 - 16.5]	[16.6 - 16.8]	[16.6 - 17]	[16.6 - 16.8]	[16.4 - 16.6]	[16.7 - 17.1]
						С
	74.5↓	69.4	69.6	69.2	72.1	68.0
Drunk in past 30 days - among past 30 day drinkers	[73.6-75.3]	[66.4-72.3]	[64.8-74.4]	[65.5-72.8]	[68.0-76.1]	[63.7-72.3]
Frequency of being drunk in past 30 days						
	22.8	14.5个	19.4	10.2	14.9	14.4
Once a week or more often	[21.9-23.7]	[12.3-16.8]	[15.3-23.5]	[7.8-12.6]	[11.7-18.1]	[11.2-17.6]
			В			
	24.8	24.1	24.3	23.9	26.3	23.0
2 to 3 times in past month	[23.9-25.8]	[21.3-26.8]	[19.8-28.7]	[20.5-27.3]	[22.3-30.2]	[19.1-26.9]

^{*} Moderate sampling variability, interpret with caution.

	26.9	30.8	25.9	35.1	30.9	30.6
Once in past month	[26.0-27.8]	[27.8-33.7]	[21.4-30.5]	[31.3-38.8]	[26.7-35.0]	[26.4-34.8]
				Α		
	25.5个	30.6	30.4	30.8	27.9	32.0
Not in past 30 days	[24.7-26.4]	[27.7-33.6]	[25.6-35.2]	[27.2-34.5]	[23.9-32.0]	[27.7-36.3]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 11. Drinking location, promotions and expenditure, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		Sc	hool-specific (%)	
	Canadian	0	0.0-1	Para la c	Year of study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
Drinking location - past 30 days						
	13.6	7.0	7.5个	6.6	11.0	#
On campus	[13.0-14.3]	[5.5-8.6]	[5.0-10.1]	[4.7-8.4]	[8.4-13.7]	
	86.4	93.0	92.5↓	93.4	89.0	96.2
Off campus	[85.7-87.0]	[91.4-94.5]	[89.9-95.0]	[91.6-95.3]	[86.3-91.6]	[94.5-97.9]
						С
Uptake of alcohol promotions in the past 12 months						_
	41.4	51.6	48.7	54.2	44.7	57.5↓
Happy hour	[40.5-42.3]	[48.8-54.3]	[44.3-53.1]	[50.8-57.6]	[41.0-48.5]	[53.5-61.4]
				Α		С
	34.6	32.9	27.7	37.5个	34.9	31.2
Low-priced promotions (e.g. ladies night)	[33.8-35.5]	[30.3-35.5]	[23.7-31.6]	[34.2-40.8]	[31.3-38.5]	[27.5-34.9]
				Α		

^{*} Moderate sampling variability, interpret with caution.

	27.3	24.7	26.6	22.9	21.1	27.9				
Special promotions by alcohol companies	[26.5-28.2]	[22.3-27.1]	[22.7-30.6]	[20.0-25.8]	[18.0-24.2]	[24.3-31.6]				
						С				
	13.3	8.5个	7.6	9.4	8.1	8.5↓				
Cover charge for unlimited drinks	[12.7-13.9]	[7.0-10.1]	[5.3-9.9]	[7.4-11.3]	[6.0-10.2]	[6.3-10.7]				
Any alcohol promotion										
	59.4	64.2	60.7	67.4	59.0	68.4				
Among past 12 month drinkers	[58.5-60.3]	[61.5-66.8]	[56.3-65.0]	[64.2-70.6]	[55.3-62.8]	[64.7-72.1]				
				Α		С				
	73.4	79.6	74.5个	84.0	74.6	83.6				
Among heavy drinkers ¹	[72.3-74.4]	[76.5-82.6]	[69.2-79.8]	[80.7-87.4]	[70.1-79.0]	[79.6-87.6]				
				Α		С				
Alcohol expenditure (\$)										
Lowest amount paid for a dripk in the past 12 months	\$4.96	\$4.92	\$4.78	\$5.03	\$5.00	\$4.80				
Lowest amount paid for a drink in the past 12 months (average)	[4.9 - 5.0]	[4.7 - 5.1]	[4.5 - 5.1]	[4.8 - 5.2]	[4.7 - 5.3]	[4.6 - 5]				

¹ Heavy drinking is defined as consumption of 4 or more drinks for women and 5 or more drinks for men on one occasion in the past 30 days

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 12a. Alcohol related harms due to own drinking in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%	%)	
Individual harms caused by own drinking	Canadian	0	DA-I	F	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
	22.0	18.6	16.5个	20.5个	21.2	16.7
Said or did embarrassing things	[21.3-22.9]	[16.5-20.8]	[13.3-19.8]	[17.8-23.3]	[18.1-24.3]	[13.8-19.7]
					D	
	33.4	27.0	26.2	27.8	26.4	27.9
Had a hangover	[32.5-34.3]	[24.6-29.5]	[22.4-30.1]	[24.7-30.8]	[23.1-29.7]	[24.4-31.5]
	17.2	13.5↓	14.1	13.0	14.7	12.8
Felt sick to my stomach or threw up	[16.5-18.0]	[11.6-15.4]	[11.0-17.1]	[10.7-15.3]	[12.0-17.4]	[10.2-15.5]
	22.5↓	16.3	17.0	15.6	17.4	15.6
Drank on nights when planned not to	[21.7-23.3]	[14.2-18.3]	[13.7-20.3]	[13.2-18.1]	[14.6-20.3]	[12.7-18.5]
	10.4	8.6	9.3	8.0	10.1	7.6
Took foolish risks	[9.8-10.9]	[7.1-10.2]	[6.7-11.9]	[6.2-9.9]	[7.8-12.4]	[5.5-9.7]
	5.0	4.6	5.6	3.8*	5.4*	#
Passed out	[4.6-5.5]	[3.5-5.8]	[3.6-7.6]	[2.5-5.1]	[3.7-7.1]	
	12.3	7.7	7.8	7.6	10.4	5.4
Needed larger amounts to feel effect	[11.7-12.9]	[6.2-9.1]	[5.4-10.2]	[5.8-9.4]	[8.0-12.7]	[3.6-7.2]
					D	
	11.3	8.4	8.0	8.7	9.3	7.8
Did impulsive things	[10.7-11.9]	[6.8-9.9]	[5.6-10.4]	[6.8-10.6]	[7.1-11.5]	[5.6-9.9]
	10.8	6.4	5.8	7.0	7.6	5.4
Not able to remember large stretches of time	[10.2-11.4]	[5.1-7.8]	[3.8-7.9]	[5.3-8.7]	[5.6-9.6]	[3.6-7.2]

Drove a motor vehicle when drank too much	1.0 [0.9-1.2]	#	#	#	#	#
Missed work or classes	9.0 [8.4-9.6]	5.0 [3.8-6.2]	#	4.5个* [3.1-5.9]	5.3* [3.6-7.0]	4.8 [3.1-6.5]
Got into sexual situations that I later regretted	4.2 [3.8-4.6]	2.8 [1.9-3.7]	#	#	#	#
Found it difficult to limit amount consumed	9.4 [8.9-10.0]	6.0 [4.7-7.3]	6.2 [4.1-8.3]	5.9 [4.3-7.4]	6.5↓ [4.6-8.3]	5.8 [3.9-7.7]
Became rude or obnoxious	4.9 [4.4-5.3]	2.7 [1.8-3.6]	#	#	#	#
Woke up in unexpected place	2.7 [2.4-3.1]	#	#	#	#	#
Felt badly about myself	10.6 [10.1-11.2]	8.0 [6.5-9.5]	7.4 [5.1-9.7]	8.5↑ [6.6-10.4]	7.7 [5.7-9.7]	8.5↓ [6.3-10.7]
Less energy or felt tired	24.8 [24.0-25.6]	17.3 [15.2-19.4]	15.7 [12.5-18.9]	18.8 [16.1-21.4]	17.7 [14.8-20.6]	17.3 [14.3-20.3]
Quality of work or school work suffered	5.2 [4.8-5.6]	3.4 [2.4-4.4]	#	3.8* [2.5-5.1]	4.5个* [3.0-6.1]	#
Spent too much time drinking	7.0 [6.5-7.5]	4.8 [3.6-5.9]	#	4.3* [2.9-5.7]	5.1* [3.5-6.8]	#
Neglected obligations to family, work or school	5.8 [5.4-6.3]	4.0 [2.9-5.1]	#	4.0* [2.6-5.3]	4.4* [2.9-6.0]	#

Drinking created problem with partner/spouse/family	2.3 [2.1-2.6]	2.3* [1.4-3.1]	#	#	#	#
Have put on weight	5.3 [4.9-5.7]	4.0 [2.9-5.2]	#	4.4* [2.9-5.8]	4.1* [2.6-5.6]	#
Harm to physical appearance	3.6 [3.2-3.9]	#	#	#	#	#
Needed a drink after woke up	2.2 [1.9-2.5]	#	#	#	#	#
Any harm	56.1 [55.1-57.0]	46.9 [44.1-49.7]	46.0 [41.5-50.5]	47.7 [44.2-51.2]	49.1 [45.2-52.9]	45.5↑ [41.4-49.6]
Any harm - among heavy drinkers ¹	80.0 [79.0-80.9]	74.3 [71.0-77.6]	75.9 [70.7-81.2]	72.9 [68.8-77.1]	77.0 [72.7-81.4]	72.5 ↑ [67.6-77.5]

¹ Heavy drinking is defined as consumption of 4 or more drinks for women and 5 or more drinks for men on one occasion in the past 30 days

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 12b. Alcohol related harms due to own drinking in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%	6)	
Harms by theme	Canadian	0	NA-I	F	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
	13.4	8.3	7.8	8.7	9.2	7.5↓
School effects ¹	[12.8-14.1]	[6.7-9.8]	[5.4-10.2]	[6.7-10.6]	[7.0-11.4]	[5.3-9.6]
Sexual situations later regretted	4.2 [3.8-4.6]	2.8 [1.9-3.7]	#	#	#	#
Dependence ²	18.9 [18.1-19.6]	12.8 [10.9-14.6]	12.9 [9.9-15.9]	12.6 [10.3-14.9]	15.5↑ [12.8-18.3] D	10.4 [7.9-12.8]
Acute physical effects ³	45.8 [44.8-46.7]	37.3 [34.6-40.0]	36.9 [32.6-41.3]	37.6 [34.3-41.0]	38.5个 [34.8-42.3]	36.6 [32.7-40.6]
Driving intoxicated	1.0 [0.9-1.2]	#	#	#	#	#

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

¹ School effects include:

^{*}ahs_k: I have missed work or classes at school because of drinking, a hangover or illness cause by my drinking'

^{*}ahs_r: "The quality of my work or schoolwork has suffered because of my drinking'

^{*}ahs_t: " I have neglected my obligations to family, work of school because of drinking"

² Dependence effects include:

Table 13. Alcohol related harms due to others drinking in the past 30 days, [among all respondents], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%)	
Indvidual harms	Canadian	0	DA-I	5 l	Year of study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
	8.4	4.5↓	#	4.9	5.7	#
Interrupted studies	[7.9-8.9]	[3.4-5.5]		[3.5-6.2]	[4.2-7.3]	
	13.3	6.6	5.2	7.8	7.9	5.5个
Affected sleep	[12.7-13.9]	[5.3-7.8]	[3.5-7.0]	[6.2-9.5]	[6.1-9.7]	[3.8-7.2]
				Α		
	5.1	3.7	#	4.2	4.4*	#
Made you feel unsafe	[4.7-5.5]	[2.7-4.6]		[2.9-5.4]	[3.0-5.8]	
	5.6	2.3	#	#	#	#
Messed up living space	[5.2-6.0]	[1.6-3.1]				
	5.1	3.8	#	4.3	4.3*	#
Harassed or bothered you	[4.8-5.5]	[2.8-4.7]		[3.0-5.5]	[2.9-5.6]	

^{*}ahs_g: I have found that I needed larger amounts of alcohol to feel any effect, or that I could no longer get drunk on the amount that use to get me drunk.

^{*}ahs_m: I have found it difficult to limit how much I drink

^{*}ahs_x: I have felt like I needed a drink after I'd gotten up (that is, before breakfast)

³ Acute physical effects include:

^{*}ahs_k: I have had a hangover (headache, sick stomach) the morning after I had been drinking *

^{*}ahs_c: I have felt very sick to my stomach or thrown up after drinking *

^{*}ahs_f. I have passed out from drinking *

^{*}ahs_i. I've not been able to remember large stretches of time while drinking heavily *

^{*}ahs_q: I have had less energy or felt tired because of my drinking'

^{*}ahs_v. I have put on weight because of drinking *

^{*}ahs_w: Harm to physical appearance

Pushed hit or assaulted you	2.0 [1.7-2.2]	#	#	#	#	#
Sexually harassed or assaulted you	1.6 [1.4-1.8]	#	#	#	#	#
Caused an argument with you	6.7 [6.3-7.2]	5.2 [4.1-6.3]	#	6.0 [4.5-7.4]	5.9 [4.3-7.5]	4.6 [3.1-6.2]
Had to be taken care of by you	14.4 [13.8-15.0]	10.7 [9.1-12.2]	8.5↓ [6.3-10.7]	12.7 [10.7-14.8] A	12.1 [9.9-14.3]	9.4 [7.2-11.6]
Upset or disappointed you	11.1 [10.5-11.6]	9.1 [7.7-10.5]	7.3 [5.2-9.3]	10.8 [8.9-12.8] A	9.6 [7.6-11.6]	8.7 [6.6-10.8]
Caused a problem in your friendship or relationship	5.1 [4.8-5.5]	4.0 [3.0-5.0]	#	4.8 [3.5-6.2]	4.3* [2.9-5.7]	#
Any harm	31.4 [30.6-32.3]	21.6 [19.5-23.7]	19.3 [16.1-22.4]	23.8 [21.1-26.5] A	23.4 [20.5-26.3]	20.2 [17.2-23.2]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 14. Alcohol protective behaviours in the past 30 days, [among past 30-day drinkers], reported as "always" or "usually" used, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (9	%)	
Alcohol protective behaviours	Canadian	Overell	Malas	Females	Year o	f study
	(%)	Overall	Males	remaies	1 st and 2 nd	3 rd +
	T	T	Α	В	С	D
Alternated non alcoholic bayerages and alcohol	29.0	30.4	27.1	33.3	30.3	30.7
Alternated non-alcoholic beverages and alcohol beverages	[28.2-29.9]	[27.6-33.2]	[22.7-31.5]	[29.7-36.8]	[26.4-34.2]	[26.7-34.8]
				Α		
Determined in advance matter average and a set average.	28.7	29.9	28.2	31.5↓	31.9	28.2
Determined, in advance, not to exceed a set number of drinks	[27.8-29.6]	[27.2-32.7]	[23.8-32.6]	[28.0-35.0]	[28.0-35.9]	[24.2-32.1]
OI UIIIIKS						
	79.2	79.8	79.0	80.5个	77.8	81.9
Ate before and/or during drinking	[78.4-80.0]	[77.4-82.3]	[75.0-83.0]	[77.6-83.5]	[74.3-81.3]	[78.6-85.3]
	23.2	21.7	17.4	25.6	25.4	18.9
Had a friend let you know when you've had enough	[22.4-24.1]	[19.2-24.3]	[13.7-21.1]	[22.4-28.9]	[21.7-29.0]	[15.5-22.3]
				Α	D	
	56.9	62.5个	59.7	65.0	63.6	61.8
Kept track of how many drinks you were having	[55.9-57.8]	[59.6-65.4]	[55.0-64.5]	[61.4-68.6]	[59.6-67.7]	[57.6-66.0]
	22.3	23.9	19.1	28.2	23.4	24.0
Paced your drinks to 1 or fewer per hour	[21.5-23.1]	[21.3-26.5]	[15.3-23.0]	[24.8-31.5]	[19.9-27.0]	[20.3-27.8]
				А		
	21.3	18.7	16.8	20.4	21.5↓	16.6
Avoided drinking games	[20.6-22.1]	[16.3-21.0]	[13.1-20.4]	[17.4-23.4]	[18.0-24.9]	[13.4-19.8]
					D	

Stopped drinking at least 1-2 hours before going	33.4	37.4	38.3	36.6	37.4	37.7
home	[32.5-34.3]	[34.5-40.4]	[33.5-43.1]	[33.0-40.2]	[33.3-41.5]	[33.4-41.9]
	56.5↓	60.2	55.3	64.7	62.1	58.6
Limited money spent on alcohol	[55.5-57.5]	[57.3-63.2]	[50.4-60.1]	[61.1-68.3]	[58.0-66.2]	[54.3-62.9]
				Α		
	78.0	80.7	78.4	82.7	81.3	80.3
Only drank alcohol in safe environments	[77.2-78.8]	[78.3-83.1]	[74.4-82.4]	[79.9-85.5]	[78.1-84.6]	[76.9-83.8]
	61.6	56.9	56.5个	57.2	51.8	61.1
Made your own drinks	[60.6-62.6]	[53.9-59.9]	[51.7-61.3]	[53.5-60.9]	[47.6-56.0]	[56.9-65.4]
						С
	23.1	21.2	20.5↓	21.8	22.9	19.6
Avoided hard liquor or spirits	[22.2-23.9]	[18.7-23.7]	[16.5-24.4]	[18.7-24.9]	[19.3-26.4]	[16.2-23.1]
	54.9	54.0	44.9	62.1	59.3	49.9
Refused a drink from a stranger	[54.0-55.9]	[51.0-57.0]	[40.0-49.7]	[58.5-65.8]	[55.2-63.4]	[45.5-54.2]
				А	D	
	69.1	69.8	59.9	78.7	70.6	69.3
Never left a drink unattended	[68.1-70.0]	[67.0-72.6]	[55.1-64.7]	[75.6-81.8]	[66.7-74.4]	[65.3-73.4]
				А		
	5.2	3.8	#	4.8*	#	#
Drank an alcohol look-alike	[4.8-5.6]	[2.6-5.0]		[3.1-6.4]		
	8.5↓	8.1	8.0	8.1	7.3	8.6
Carried around a cup but did not drink any alcohol	[7.9-9.0]	[6.4-9.7]	[5.4-10.7]	[6.0-10.1]	[5.1-9.5]	[6.1-11.0]

	7.8	8.7	9.5↓	7.9	11.2	6.7
Avoided situations where there was alcohol	[7.3-8.3]	[6.9-10.4]	[6.6-12.3]	[5.9-9.9]	[8.6-13.9]	[4.5-8.8]
					D	
	69.1	80.3	76.8	83.5↓	81.1	79.7
Used a designated driver	[68.2-70.0]	[77.9-82.7]	[72.6-80.9]	[80.7-86.3]	[77.8-84.4]	[76.2-83.2]
				Α		
Avoided getting in a car with someone who had	74.9	69.9	66.4	73.0	73.3	67.5个
been drinking	[74.0-75.7]	[67.1-72.7]	[61.8-71.0]	[69.7-76.3]	[69.6-77.0]	[63.4-71.6]
C C				Α	D	
Any alcohol protective behaviours	97.8	98.2	97.6	98.7	98.5↓	97.9
	[97.4-98.1]	[97.4-99.0]	[96.1-99.1]	[97.8-99.5]	[97.5-99.5]	[96.6-99.1]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 15. Alcohol impaired driving, within 2 hours of consuming 2 or more drinks, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)					
	Canadian				Year of study		
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +	
			Α	В	С	D	
Been a passenger in a vehicle of someone who	had been drinking						
	15.9	20.2	20.6	19.9	15.8	24.0	
Among all respondents	[15.3-16.5]	[18.2-22.3]	[17.3-23.8]	[17.4-22.4]	[13.3-18.3]	[20.8-27.2]	
						С	
	17.7	22.8	23.9	21.9	18.1	26.7	
Among past 12 month drinkers	[17.1-18.5]	[20.5-25.2]	[20.1-27.7]	[19.0-24.7]	[15.2-21.1]	[23.1-30.3]	
						С	
	8.1	#	#	#	#	#	
Among past 12 month non-drinkers	[6.2-10.6]						
Drove a vehicle after drinking ²	I						
	8.9	13.8	18.6	9.4	9.9	17.1	
Among past 12 month drinkers	[8.4-9.4]	[11.9-15.7]	[15.2-22.1]	[7.5-11.4]	[7.7-12.2]	[14.1-20.1]	
			В			С	

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

[#] High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Table 16. Reported education campaigns and public health or safety messages about cannabis, [among all respondents], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (9	%)	
	Canadian	0	24-1	F	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
	70.6	77.2	76.2	78.2	75.7	78.9
School	[69.8-71.4]	[75.1-79.4]	[72.8-79.7]	[75.6-80.8]	[72.7-78.7]	[75.8-82.0]
	74.2	74.2	73.0	75.2	73.3	74.9
Social media	[73.5-75.0]	[71.9-76.4]	[69.4-76.6]	[72.5-78.0]	[70.2-76.4]	[71.7-78.2]
	28.9	25.7	28.2	23.4	23.7	27.5↓
Non-social media websites	[28.1-29.7]	[23.5-27.9]	[24.5-31.8] B	[20.7-26.1]	[20.7-26.6]	[24.1-30.8]
Events (sporting events, concerts, festivals or markets)	23.0 [22.3-23.8]	25.8 [23.6-28.1]	26.5个 [22.9-30.1]	25.2 [22.5-28.0]	24.3 [21.4-27.3]	27.7 [24.4-31.1]
	13.8	15.4	15.7	15.1	14.4	16.5个
Kiosks or temporary sales locations	[13.2-14.5]	[13.5-17.2]	[12.8-18.7]	[12.8-17.3]	[12.0-16.8]	[13.7-19.3]
Inside/outside legal cannabis stores	28.0 [27.2-28.8]	33.4 [31.0-35.8]	34.0 [30.2-37.8]	32.8 [29.8-35.7]	30.3 [27.1-33.5]	36.5↓ [32.9-40.1] C
Public display of posters or billboards	51.3 [50.5-52.2]	64.5↓ [62.1-66.9]	64.3 [60.4-68.1]	64.7 [61.7-67.7]	57.9 [54.5-61.3]	71.0 [67.6-74.4] C
Health care setting	40.9 [40.1-41.8]	45.6 [43.0-48.1]	39.7 [35.7-43.7]	51.0 [47.8-54.2] A	46.2 [42.8-49.7]	45.3 [41.6-49.1]
Print newspapers or magazines	23.7 [22.9-24.4]	24.9 [22.7-27.1]	26.3 [22.7-29.9]	23.6 [20.9-26.3]	23.8 [20.8-26.7]	26.3 [22.9-29.6]

TV/radio	50.3	50.8	53.6	48.2	46.3	55.1
	[49.5-51.2]	[48.2-53.3]	[49.5-57.6]	[45.0-51.4]	[42.9-49.7]	[51.4-58.9]
Inside/outside illegal cannabis stores	7.3	5.5↓	6.3	4.7	5.7	5.4
	[6.8-7.7]	[4.3-6.7]	[4.4-8.3]	[3.4-6.1]	[4.1-7.3]	[3.7-7.1]
Other	0.7 [0.6-0.8]	#	#	#	#	#
I didn't notice any education campaigns or public health messages	7.3 [6.8-7.8]	5.0 [3.9-6.1]	5.8 [3.9-7.7]	4.2* [2.9-5.5]	7.4 [5.6-9.2]	#

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

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Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 17. Perception of cannabis harms based on what you know, [among all respondents and past 12 month cannabis users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	0	0.0-1	F l	Year o	f study		
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +		
	·		Α	В	С	D		
Can cannabis smoke be harmful?								
	83.3	78.6	80.6	76.8	78.0	79.5↓		
Yes	[82.7-84.0]	[76.6-80.7]	[77.4-83.7]	[74.2-79.5]	[75.2-80.8]	[76.5-82.5]		
	8.1	10.8	10.5个	11.0	11.4	9.9		
No	[7.7-8.6]	[9.2-12.3]	[8.1-12.9]	[9.0-12.9]	[9.2-13.5]	[7.7-12.1]		
	8.5↑	10.6	8.9	12.2	10.6	10.6		
Don't know/not sure	[8.1-9.0]	[9.1-12.1]	[6.7-11.2]	[10.1-14.2]	[8.5-12.7]	[8.3-12.9]		
				Α				
Can it be harmful to use cannabis when p breastfeeding?	regnant or							
	90.5↓	90.2	87.7	92.7	89.8	91.0		
Yes	[90.0-91.0]	[88.7-91.7]	[85.1-90.2]	[91.0-94.3]	[87.8-91.9]	[88.9-93.1]		
				Α				
	1.4	#	#	#	#	#		
No	[1.2-1.6]							
	8.1	8.3	11.3	5.6	8.6	7.8		
Don't know/not sure	[7.7-8.6]	[7.0-9.7]	[8.8-13.8]	[4.1-7.0]	[6.7-10.4]	[5.8-9.8]		
			В					
Can frequent use of cannabis increase the			T	T	1			
	84.6	80.2	79.7	80.7	80.5↓	80.3		
Yes	[84.0-85.3]	[78.2-82.2]	[76.6-82.9]	[78.2-83.1]	[77.8-83.2]	[77.3-83.2]		
]					

	4.2	5.2	5.0	5.4	5.0	5.3
No	[3.8-4.5]	[4.1-6.3]	[3.3-6.7]	[4.0-6.8]	[3.5-6.5]	[3.7-7.0]
	11.2	14.6	15.2	13.9	14.5个	14.4
Don't know/not sure	[10.6-11.8]	[12.8-16.3]	[12.4-18.1]	[11.8-16.1]	[12.1-16.9]	[11.8-17.0]
Are teenagers at greater risk of harm from using cann	abis than adult	s?				
	87.7	84.4	84.1	84.7	85.1	84.0
Yes	[87.1-88.2]	[82.6-86.2]	[81.2-87.0]	[82.5-86.9]	[82.7-87.5]	[81.3-86.7]
	4.1	4.8	5.4	4.1	4.7	4.7
No	[3.7-4.4]	[3.7-5.8]	[3.7-7.2]	[2.9-5.4]	[3.3-6.2]	[3.1-6.2]

10.8

[9.3-12.4]

10.5↓

[8.1-12.9]

11.2

[9.2-13.1]

10.2

[8.2-12.2]

11.3

[9.0-13.7]

8.2

[7.8-8.7]

[95% confidence intervals in brackets]

Don't know/not sure

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

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^{*} Moderate sampling variability, interpret with caution.

Table 18. Knowledge of cannabis-related harms since the cannabis law came into effect, [among all respondents], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	ian	Malaa		Year of study			
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +		
			Α	В	С	D		
Increase knowledge of cannabis-related harms since	the cannabis lav	w came into eff	ect?					
	26.4	28.5↓	26.9	30.0	31.3	25.8		
Yes	[25.6-27.1]	[26.2-30.8]	[23.3-30.4]	[27.1-32.9]	[28.1-34.5]	[22.5-29.1]		
					D			
	43.9	38.4	40.0	36.8	36.2	40.1		
No	[43.0-44.7]	[35.9-40.8]	[36.1-44.0]	[33.7-39.9]	[32.9-39.5]	[36.4-43.7]		
	29.8	33.1	33.1	33.2	32.5↓	34.1		
Somewhat	[29.0-30.6]	[30.8-35.5]	[29.3-36.8]	[30.2-36.2]	[29.3-35.7]	[30.6-37.6]		

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 19. Cannabis use, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	. "	201	- 1	Year o	f study		
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +		
			Α	В	С	D		
Cannabis use								
	48.4	44.1	44.6	43.7	39.2	48.5↓		
Cannabis - past year	[47.6-49.3]	[41.6-46.6]	[40.7-48.6]	[40.6-46.8]	[35.9-42.5]	[44.8-52.2] C		
	17.1	17.5个	17.5↓	17.6	17.0	17.9		
Mean age of initiation (years)	[17.0- 17.2]	[17.3 - 17.7]	[17.2 - 17.8]	[17.4 - 17.8]	[16.8 - 17.2]	[17.6 - 18.2] C		
	32.6	27.7	30.1	25.4	24.2	30.6		
Cannabis - past month use	[31.8-33.5]	[25.4-29.9]	[26.5-33.7] B	[22.7-28.1]	[21.3-27.1]	[27.2-34.0] C		
Cannabis - past 30-day frequency	•	•	•		•	•		
	67.4	72.3	69.9	74.6	75.8	69.4		
Not in past 30 days	[66.5-68.2]	[70.1-74.6]	[66.3-73.5]	[71.9-77.3] A	[72.9-78.7] D	[66.0-72.8]		
	17.1	15.0	14.8	15.3	13.8	16.3		
Monthly- 1 to 3 days per month	[16.4-17.7]	[13.3-16.8]	[12.0-17.6]	[13.0-17.5]	[11.4-16.1]	[13.6-19.1]		
	8.0	6.9	7.9	6.0	5.4	8.1		
Weekly- 1 to 4 days per week	[7.5-8.5]	[5.6-8.2]	[5.7-10.0]	[4.5-7.5]	[3.8-6.9]	[6.1-10.1] C		
	7.6	5.7	7.4	4.2	5.1	6.1		
Daily/Almost daily- 5+ days per week	[7.1-8.1]	[4.6-6.9]	[5.3-9.5] B	[2.9-5.4]	[3.6-6.6]	[4.4-7.9]		

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

[#] High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Table 20. Change in amount of cannabis used since the cannabis law came into effect, [among past 12 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	0	D.AI	F1	Year of study			
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +		
			Α	В	С	D		
	25.3	29.4	26.2	32.5↓	27.2	30.3		
I use more	[24.2-26.4]	[25.9-32.9]	[20.9-31.5]	[28.0-37.0]	[22.3-32.2]	[25.4-35.2]		
	17.5个	17.2	19.4	15.1	21.4	14.4		
I use less	[16.5-18.5]	[14.3-20.1]	[14.6-24.2]	[11.7-18.6]	[16.8-25.9]	[10.6-18.1]		
					D			
	49.1	43.2	47.3	39.4	39.9	45.9		
I use the same amount	[47.9-50.4]	[39.4-47.1]	[41.3-53.3]	[34.6-44.1]	[34.5-45.4]	[40.5-51.2]		
			В					
	8.0	10.1	#	13.0	11.5↓	9.4		
Don't know/Not sure	[7.4-8.7]	[7.8-12.5]		[9.8-16.3]	[7.9-15.0]	[6.3-12.6]		

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 21. Cannabis products used in the past 12 months, [among past 12 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

Pan-		S	chool-specific (9	%)	
Canadian				Year o	f study
(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
		Α	В	С	D
73.6	68.9	72.1	65.8	66.8	70.9
[72.5-74.8]	[65.3-72.6]	[66.6-77.7]	[61.2-70.5]	[61.5-72.2]	[65.9-75.9]
23.5个	14.4	19.3	9.7	16.9	12.4
[22.4-24.7]	[11.6-17.2]	[14.4-24.2]	[6.8-12.7]	[12.6-21.1]	[8.8-16.0]
		В			
24.2	31.8	37.5↓	26.4	24.2	37.8
[23.1-25.3]	[28.1-35.5]	[31.5-43.4]	[22.0-30.7]	[19.3-29.0]	[32.5-43.2]
		В			С
40.1	48.9	52.1	45.9	52.5个	46.2
[38.8-41.4]	[45.0-52.9]	[45.9-58.3]	[41.0-50.9]	[46.9-58.2]	[40.7-51.7]
16.8	19.9	26.4	13.7	17.6	21.5个
[15.8-17.8]	[16.7-23.0]	[20.9-31.8] B	[10.3-17.1]	[13.3-21.9]	[17.0-26.1]
59.1	57.8	53.0	62.4	54.9	60.1
[57.8-60.3]	[53.9-61.7]	[46.8-59.2]	[57.6-67.2] A	[49.2-60.5]	[54.7-65.5]
3.0	#	#	#	#	#
[2.6-3.5]					
5.4	7.6	#	9.2*	#	#
[4.9-6.1]	[5.5-9.7]		[6.4-12.1]		
0.8 [0.6-1.2]	#	#	#	#	#
	73.6 [72.5-74.8] 23.5↑ [22.4-24.7] 24.2 [23.1-25.3] 40.1 [38.8-41.4] 16.8 [15.8-17.8] 59.1 [57.8-60.3] 3.0 [2.6-3.5] 5.4 [4.9-6.1] 0.8	Canadian (%) Overall 73.6 [72.5-74.8] 68.9 [65.3-72.6] 23.5↑ [14.4 [11.6-17.2] 14.4 [11.6-17.2] 24.2 [23.1-25.3] 31.8 [28.1-35.5] 40.1 [48.9 [45.0-52.9] 45.0-52.9] 16.8 [19.9 [16.7-23.0] 16.7-23.0] 59.1 [57.8-60.3] 57.8 [53.9-61.7] 3.0 [2.6-3.5] # 5.4 [4.9-6.1] 7.6 [5.5-9.7] 0.8 #	Canadian (%) Overall Males 73.6 [72.5-74.8] 68.9 [65.3-72.6] 72.1 [66.6-77.7] 23.5↑ [14.4 19.3 [14.4-24.2] B 19.3 [14.4-24.2] B [14.4-24.2] B 24.2 [23.1-25.3] 31.8 37.5↓ [31.5-43.4] B 37.5↓ [31.5-43.4] B 40.1 [48.9 [45.0-52.9] 52.1 [45.9-58.3] [45.9-58.3] 16.8 [15.8-17.8] 16.7-23.0] [20.9-31.8] B B 59.1 [57.8-60.3] 57.8 [53.9-61.7] 53.0 [46.8-59.2] 3.0 # # # # 5.4 [4.9-6.1] 7.6 # # [4.9-6.1] [5.5-9.7] #	Canadian (%) Overall Males Females 73.6 68.9 72.1 65.8 [72.5-74.8] [65.3-72.6] [66.6-77.7] [61.2-70.5] 23.5↑ 14.4 19.3 9.7 [22.4-24.7] [11.6-17.2] [14.4-24.2] [6.8-12.7] B 37.5↓ 26.4 [23.1-25.3] [28.1-35.5] [31.5-43.4] [22.0-30.7] B 40.1 48.9 52.1 45.9 [38.8-41.4] [45.0-52.9] [45.9-58.3] [41.0-50.9] 16.8 19.9 26.4 13.7 [15.8-17.8] [16.7-23.0] [20.9-31.8] [10.3-17.1] B 59.1 57.8 53.0 62.4 [57.8-60.3] [53.9-61.7] [46.8-59.2] [57.6-67.2] A 3.0 # # # [4.9-6.1] [5.5-9.7] [6.4-12.1] 0.8 # # #	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$

Consumption of cannabis + tobacco

Cannabis mixed or combined with tobacco in a joint (spliff), bong or pipe	29.7 [28.6-30.9]	22.7 [19.5-26.0]	28.8 [23.4-34.3] B	16.8 [13.2-20.5]	22.4 [17.8-27.0]	23.4 [18.9-27.9]
Chasing- smoked a joint, followed by tobacco product	23.1 [22.1-24.2]	20.5↓ [17.4-23.6]	27.5↓ [22.1-32.8] B	13.8 [10.4-17.1]	25.8 [21.0-30.6] D	16.8 [12.8-20.8]

¹ Multiple products used were reported by users.

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 22. Prevalence of using other substances in combination with cannabis in the past 12 months, [among past 12 month users], CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	anadian	Males	Familia.	Year of study			
	(%)	Overall		Females	1 st and 2 nd	3 rd +		
			Α	В	С	D		
	78.9	74.4	79.1	69.9	70.8	76.8		
Alcohol	[77.9-79.9]	[71.1-77.7]	[74.3-84.0]	[65.5-74.3]	[65.8-75.8]	[72.3-81.3]		
			В					
	42.0	37.8	47.2	28.9	45.6	32.2		
Tobacco or e-cigarette with nicotine	[40.7-43.2]	[34.1-41.5]	[41.2-53.1]	[24.5-33.2]	[40.1-51.0]	[27.2-37.2]		
			В		D			
	4.9	#	#	#	#	#		
Prescription opioids (e.g., oxy, Dilaudid®, morphine, Demerol®, Tylenol #3®)	[4.4-5.5]							

^{*} Moderate sampling variability, interpret with caution.

Prescription stimulants (e.g., Ritalin®, Concerta®, Adderall®, Dexedrine®)	8.1 [7.4-8.8]	4.3* [2.8-5.9]	#	#	#	#
Prescription sedatives/tranquilizers (e.g., diazepam, lorazepam, Valium®, Ativan®, alprazolam, Xanax®, clonazepam, Rivotril®)	3.7 [3.3-4.3]	#	#	#	#	#
Illegal opioids (e.g., heroin, non-pharmaceutical fentanyl)	0.8 [0.6-1.0]	#	#	#	#	#
Illegal stimulants (e.g., cocaine, crack, methamphetamine, ecstasy/MDMA)	9.9 [9.1-10.7]	9.7 [7.5-12.0]	12.1 [8.2-16.0] B	7.5↓* [4.9-10.0]	#	10.0 [6.8-13.2]
Illegal hallucinogens/dissociatives (e.g., LSD, magic mushrooms, PCP)	11.5个 [10.7-12.4]	12.8 [10.3-15.4]	18.3 [13.7-22.9] B	7.6* [5.0-10.1]	14.0 [10.2-17.8]	11.7 [8.3-15.2]

NB Multiple substances were reported by users.

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 23. Levels of THC and CBD typically used, [among past 12 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (9	%)	
	Canadian				Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
	·		Α	В	С	D
	29.9	27.5↓	34.6	20.6	24.7	29.6
Higher THC, lower CBD	[28.8-31.1]	[24.1-30.9]	[28.9-40.3]	[16.7-24.5]	[20.0-29.5]	[24.7-34.4]
			В			
	10.1	12.1	#	14.5个	10.4*	13.2
Higher CBD, lower THC	[9.4-10.9]	[9.6-14.6]		[11.2-17.9]	[7.1-13.8]	[9.6-16.8]
	12.0	12.5↓	11.0	13.9	14.5个	10.8
Equal levels of THC and CBD	[11.2-12.9]	[9.9-15.0]	[7.3-14.7]	[10.6-17.2]	[10.7-18.4]	[7.5-14.1]
	5.5↓	5.1	#	#	#	#
THC only	[4.9-6.0]	[3.4-6.8]				
	1.4	#	#	#	#	#
CBD only	[1.1-1.7]					
	1.4	#	#	#	#	#
Other	[1.1-1.8]					
	39.7	39.7	35.6	43.6	41.6	38.4
Don't know/not sure	[38.5-40.9]	[35.9-43.4]	[29.9-41.4]	[38.9-48.4]	[36.2-47.0]	[33.2-43.6]
				Α		

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 24. Sources used to obtain cannabis products in the past 12 months, [among past 12 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (9	%)	
	Canadian	0	DA-I	Famala.	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
Grow my own/grown for me	2.5↓ [2.1-2.9]	#	#	#	#	#
From a legal storefront	33.9 [32.7-35.0]	42.3 [38.5-46.2]	46.5↓ [40.4-52.5] B	38.3 [33.6-43.1]	35.5个 [30.2-40.8]	47.9 [42.5-53.3] C
From a legal online source (Health Canada licensed producer, provincial regulated retailer)	8.6 [7.9-9.4]	7.1 [5.1-9.1]	#	7.2* [4.7-9.7]	#	#
From an illegal storefront	2.6 [2.3-3.1]	#	#	#	#	#
From an illegal online source	4.6 [4.0-5.2]	#	#	#	#	#
Shared around a group of friends	14.2 [13.3-15.0]	12.1 [9.6-14.6]	11.0 [7.2-14.8]	13.2 [9.9-16.5]	12.6 [8.9-16.2]	12.1 [8.6-15.7]
Family member	2.9 [2.5-3.3]	#	#	#	#	#
Friend	25.0 [23.9-26.2]	24.0 [20.7-27.3]	21.9 [16.8-26.9]	26.1 [21.9-30.4]	27.7 [22.7-32.6]	21.4 [17.0-25.8]
Acquaintance	1.0 [0.7-1.2]	#	#	#	#	#

Dealer	4.1 [3.6-4.6]	#	#	#	#	#
Other source	0.7 [0.6-1.0]	#	#	#	#	#

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 25. Frequency of cannabis use 2 hours before or after school in the past 12 months, [among past 12 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (%	%)	
	Canadian	0	0.0-1	F	Year o	f study
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
	21.0	18.9	22.0	15.9	21.8	16.7
Rarely (less than one day per month)	[20.0-22.1]	[15.9-21.9]	[17.0-27.0]	[12.4-19.4]	[17.2-26.4]	[12.7-20.6]
			В			
	7.7	4.7*	#	#	#	#
Sometimes (1 to 3 days per month)	[7.0-8.4]	[3.0-6.3]				
	4.7	#	#	#	#	#
Often (weekly)	[4.1-5.3]					
AL	3.1	#	#	#	#	#
Always or almost always (most days you attend	[2.6-3.5]					
school)						

^{*} Moderate sampling variability, interpret with caution.

	63.6	73.1	67.6	78.4	68.3	76.5个
Have not done this in the past 12 months	[62.4-64.8]	[69.7-76.5]	[61.9-73.2]	[74.5-82.4]	[63.1-73.4]	[72.0-81.0]
				Α		С

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 26a. Cannabis related harms and signs of dependence, by sex and year of study, [among past 3 month users], CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	0	D.AI	F1	Year o	f study		
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +		
			Α	В	С	D		
	54.4	52.7	50.4	55.3	53.6	52.2		
Desire or urge to use	[53.0-55.8]	[48.5-57.0]	[43.9-56.8]	[49.9-60.7]	[47.6-59.7]	[46.3-58.1]		
	14.8	12.0	14.7	9.0*	14.6	#		
Health social, legal or financial problems	[13.8-15.7]	[9.2-14.7]	[10.2-19.3]	[5.9-12.1]	[10.3-18.9]			
			В					
	20.8	17.5个	20.4	14.5个	20.9	15.2		
Failed expectations	[19.7-21.9]	[14.3-20.7]	[15.2-25.6]	[10.7-18.3]	[15.9-25.8]	[11.0-19.4]		
	10.1	10.0	14.3	#	#	#		
Others expressed concern	[9.3-10.9]	[7.4-12.5]	[9.8-18.8]					
	9.9	7.2	#	#	#	#		
Failed to control use	[9.1-10.8]	[5.0-9.4]						

^{*} Moderate sampling variability, interpret with caution.

	60.3	58.1	55.6	60.7	61.8	55.4
Any harm	[59.0-61.7]	[53.9-62.3]	[49.2-62.0]	[55.3-66.0]	[55.8-67.7]	[49.5-61.3]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Source: Canadian Postsecondary Education Alcohol and Drug Use Survey, 2019/2020 school year

Table 26b. ASSIST¹ scores [among past 3 month users], by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian	0	Males	Females	Year of study			
	(%)	Overall	iviales		1 st and 2 nd	3 rd +		
			Α	В	С	D		
	33.3	34.1	34.3	33.9	34.0	34.1		
Low-risk of developing problems	[32.0-34.6]	[30.0-38.2]	[28.1-40.4]	[28.7-39.2]	[28.1-39.8]	[28.5-39.8]		
	60.7	60.7	57.8	63.7	62.0	60.0		
Moderate-risk of developing problems	[59.4-62.1]	[56.5-64.9]	[51.4-64.2]	[58.4-69.0]	[56.0-68.0]	[54.1-65.8]		
	6.0	#	#	#	#	#		
High-risk of developing problems/ likely	[5.3-6.8]							

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Source: Canadian Postsecondary Education Alcohol and Drug Use Survey, 2019/2020 school year

¹ WHO - Alcohol, smoking and substance involvement screening test.

What the score means:

Low: You are at low risk of health and other problems from your current pattern of use.

Moderate: You are at risk of health and other problems from your current pattern of substance use.

High: You are at high risk of experiencing severe problems (health, social, financial, legal, relationship) as a result of your current pattern of use and are likely to be dependent.

^{*} Moderate sampling variability, interpret with caution.

^{*} Moderate sampling variability, interpret with caution.

Table 27. Cannabis impaired driving, within 2 hours of using cannabis, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)							
	Canadian				Year o	f study			
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +			
			Α	В	С	D			
Passenger in a vehicle driven by someone who used cannabis ¹									
	30.8	31.3	31.4	31.3	27.5↓	34.7			
Among all respondents	[29.9-31.6]	[28.9-33.7]	[27.6-35.1]	[28.3-34.2]	[24.4-30.6]	[31.0-38.3]			
						С			
	49.9	55.9	57.2	54.6	52.7	58.7			
Among past 12 month cannabis users	[48.7-51.2]	[52.0-59.8]	[51.1-63.3]	[49.7-59.6]	[47.2-58.3]	[53.2-64.1]			
	12.7	11.9	10.9	12.9	10.5个	12.9			
Among past 12 month cannabis non-users	[11.9-13.5]	[9.7-14.2]	[7.5-14.3]	[10.1-15.8]	[7.8-13.3]	[9.3-16.5]			
Drove a vehicle after smoking or vaporizing ²									
	17.1	22.4	26.4	18.6	21.1	23.2			
Among past 12 month cannabis users	[16.2-18.1]	[19.2-25.6]	[21.1-31.8]	[14.9-22.4]	[16.6-25.6]	[18.7-27.8]			
			В						

¹ Driven by someone within 2 hours of using cannabis

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² Drove a vehicle within 2 hours of smoking or vaping cannabis

^{*} Moderate sampling variability, interpret with caution.

Table 28. Psychoactive pharmaceutical drug use in past 12 months, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)					
	Canadian	. "	24.1		Year o	f study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +	
			Α	В	С	D	
Pain Relievers							
	24.3	27.6	24.3	30.7	28.7	26.4	
Pain reliever use- Past 12 months	[23.6-25.0]	[25.3-29.8]	[20.9-27.6]	[27.8-33.6] A	[25.6-31.7]	[23.1-29.6]	
	22.5个	25.3	21.7	28.0	21.2	29.6	
Problematic use of pain relievers- among past 12 month users	[21.1-24.0]	[21.2-29.4]	[15.0-28.4]	[22.9-33.0]	[16.1-26.4]	[23.0-36.1]	
Stimulants							
	11.9	6.5↓	7.5个	5.5↓	6.2	6.8	
Stimulant use-Past 12 months	[11.3-12.5]	[5.2-7.7]	[5.4-9.6]	[4.1-6.9]	[4.6-7.9]	[4.9-8.6]	
	59.7	62.2	#	62.1	57.7	65.4	
Problematic use of stimulants- among past 12 month users	[57.1-62.1]	[52.3-72.0]		[48.9-75.2]	[43.8-71.5]	[51.5-79.3]	
Sedatives		<u> </u>			<u>I</u>		
	8.6	6.7	#	10.0	7.2	6.1	
Sedative use - Past 12 months	[8.1-9.1]	[5.4-7.9]		[8.2-11.9]	[5.5-9.0]	[4.4-7.9]	
	23.8	#	#	#	#	#	
Problematic use of sedatives- among past 12 month users	[21.4-26.4]						
Over the counter (OTC) medication			<u> </u>	<u> </u>	<u> </u>	<u> </u>	
Problematic use of OTC medication- among all	3.9	3.3	#	3.8*	4.5个	#	
respondents	[3.6-4.2]	[2.4-4.2]		[2.6-5.0]	[3.1-5.9]		

Any pharmaceutical

Any pharmaceutical ¹ - Past 12 months	35.6 [34.8-36.4]	34.2 [31.8-36.6]	29.6 [26.0-33.2]	38.6 [35.5-41.6]	34.7 [31.5-38.0]	33.4 [29.9-36.9]
				Α		
Problematic use ² of any pharmaceutical and over the counter medications - among past 12 month users	37.1	34.0	32.6	35.0	30.5个	37.4
	[35.7-38.5]	[29.9-38.0]	[25.6-39.5]	[30.1-39.8]	[25.2-35.8]	[31.3-43.6]
Problematic use of any pharmaceutical or over-the- counter medications - among all respondents ³	14.6	12.7	10.3	15.1	12.2	13.1
	[14.0-15.2]	[11.1-14.4]	[7.9-12.6]	[12.8-17.3]	[10.0-14.4]	[10.6-15.6]
				Α		

¹ Includes use of pain relievers, stimulants and sedatives in the past 12 months among all respondents. Does not include over the counter medication.

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 29. Primary reason for using psychoactive pharmaceuticals other than prescribed in the past 12 months, by sex and year of study, CPADS 2019/2020 University of Manitoba

Reasons for using other than prescribed	Pan-	School-specific (%)					
	Canadian	Overall	Males	Females	Year of study		
	(%)				1 st and 2 nd	3 rd +	
			Α	В	С	D	
Pain relievers							
	46.1	54.7	#	#	#	#	
To help you sleep	[41.0-51.1]	[42.3-67.1]					
	18.7	#	#	#	#	#	
To feel better	[14.8-22.7]						

² Problematic use includes using more (quantity), using more often (frequency) or using in a way other than prescribed (e.g. to get high)- among past 12 month users. Includes pain relievers, sedatives, stimulant, and over-the-counter medication use.

^{*} Moderate sampling variability, interpret with caution.

To improve mood	3.6* [1.7-5.4]	#	#	#	#	#
To cope with stress	7.1 [4.5-9.7]	#	#	#	#	#
For the experience	10.8 [7.7-14.0]	#	#	#	#	#
To feel numb	9.2 [6.3-12.2]	#	#	#	#	#
To party with friends	2.9* [1.2-4.6]	#	#	#	#	#
Other reason	1.6* [0.3-2.9]	#	#	#	#	#
Stimulants						
To cram for exams	56.3 [52.6-60.0]	#	#	#	#	#
To stay up all night to finish a project	14.5↓ [12.1-17.3]	#	#	#	#	#
To decrease appetite	3.4* [2.4-4.9]	#	#	#	#	#
For the experience	3.7* [2.6-5.3]	#	#	#	#	#
To get high	6.7 [5.0-8.8]	#	#	#	#	#

To party with friends	11.5↓ [9.4-13.9]	#	#	#	#	#
Other reason	3.9* [2.7-5.6]	#	#	#	#	#
Sedatives						
For the experience	16.9 [10.1-23.7]	#	#	#	#	#
To get high/the feeling they caused	60.6 [51.7-69.5]	#	#	#	#	#
Other reason	#	#	#	#	#	#
To sleep	#	#	#	#	#	#
For stress / anxiety	#	#	#	#	#	#

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 30. Smoking status, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian (%)		Males	Females	Year o	f study		
		Overall			1 st and 2 nd	3 rd +		
			Α	В	С	D		
Smoking status				1				
	2.0	#	#	#	#	#		
Daily smoker	[1.8-2.3]							
	8.0	7.0	9.5↓	4.6	7.5↓	6.7		
Occasional smoker	[7.6-8.5]	[5.7-8.2]	[7.1-11.8]	[3.3-5.9]	[5.7-9.3]	[4.8-8.5]		
			В					
	4.2	4.0	5.4	#	#	4.6		
Other tobacco smoker (pipe, cigar, shisha)	[3.9-4.6]	[3.0-4.9]	[3.6-7.2]			[3.1-6.2]		
	2.8	3.1	#	#	#	#		
Former smoker (quit smoking within past 12 months)	[2.5-3.1]	[2.3-4.0]						
	3.2	2.3	#	#	#	#		
Former smoker (quit smoking >12 months ago)	[2.9-3.6]	[1.5-3.0]						
	79.7	81.7	77.0	86.2	83.9	80.0		
Never smoked	[79.0-80.4]	[79.8-83.7]	[73.6-80.3]	[84.0-88.4]	[81.4-86.4]	[77.1-83.0]		
				А	D			

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 31. Frequency of vaping and e-cigarette use in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)						
	Canadian			Females	Year of study			
	(%)	Overall	Males		1 st and 2 nd	3 rd +		
			Α	В	С	D		
Past month frequency								
	7.1	5.5个	7.1	4.1*	7.5个	#		
Daily	[6.7-7.6]	[4.4-6.7]	[5.0-9.1]	[2.9-5.3]	[5.7-9.3]			
			В					
	3.5↑	2.9	#	#	3.8*	#		
Weekly	[3.2-3.9]	[2.1-3.8]			[2.5-5.1]			
	6.4	6.0	6.6	5.4	6.6	5.4		
Monthly	[6.0-6.8]	[4.8-7.2]	[4.7-8.6]	[3.9-6.8]	[4.9-8.3]	[3.7-7.1]		
	83.0	85.6	82.7	88.3	82.1	88.7		
Not in past 30 days	[82.3-83.6]	[83.8-87.3]	[79.7-85.7]	[86.3-90.3]	[79.5-84.7]	[86.3-91.0]		
				Α		С		

NB: Vaping and e-cigarette use does not include exclusive vaping of nicotine. Other products such as cannabis and flavours may also be captured.

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 32. Prevalence and number of days spent vaping with nicotine, cannabis or flavouring in the past 30 days, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-					
Vaping product	Canadian (%)		Males	Females	Year of study	
		Overall			1 st and 2 nd	3 rd +
			Α	В	С	D
Prevalence - Vaping Product						
	90.6	87.7	90.3	83.6	91.9	82.8
Nicotine	[89.3-91.8]	[83.1-92.2]	[84.6-96.1]	[76.6-90.7]	[87.2-96.6]	[74.0-91.5]
	32.4	37.4	39.6	34.1	29.9	46.3
Cannabis	[30.3-34.5]	[30.7-44.2]	[30.2-49.1]	[25.1-43.2]	[22.0-37.7]	[34.7-57.8]
						С
	12.8	16.6	#	#	20.5↓*	#
Flavouring alone	[11.4-14.3]	[11.4-21.8]			[13.5-27.4]	
Average number of days						
	14.0	12.9	14.0	11.2	14.1	11.2
Nicotine	[13.4-14.6]	[11.2 - 14.6]	[11.6 - 16.4]	[8.9 - 13.5]	[12 - 16.2]	[8.4 - 14]
	2.5个	3.3	4.0	2.2	2.4	4.1
Cannabis	[2.2-2.8]	[2.3 - 4.3]	[2.4 - 5.6]	[1.1 - 3.3]	[1.4 - 3.4]	[2.1 - 6.1]
	0.7	1.0	1.3	0.5个	0.9	1.1
Flavouring alone	[0.5-0.9]	[0.4 - 1.6]	[0.3 - 2.3]	[0.2 - 0.8]	[0.3 - 1.5]	[-0.1 - 2.3]

NB: Vaping and e-cigarette use does not include exclusive vaping of nicotine. Other products such as cannabis and flavours may also be captured.

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 33. Primary reason for vaping or using an e-cigarette in the past 12 months, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-		S	chool-specific (9	%)	
Vaping product	Canadian		201		Year of study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
Reason for use						
	13.9	16.5个	19.2	#	15.0	#
Quit, cut down or avoid smoking	[12.7-15.1]	[12.7-20.3]	[13.3-25.1]		[10.3-19.7]	
	2.4	#	#	#	#	#
Use when smoking is not allowed	[1.9-2.9]					
	42.4	39.2	41.6	36.2	41.8	37.1
Enjoyment	[40.7-44.1]	[34.2-44.2]	[34.2-49.0]	[29.7-42.7]	[35.4-48.2]	[29.2-45.1]
	36.0	35.0	29.3	42.1	33.5↓	37.0
Curiosity	[34.4-37.6]	[30.1-39.9]	[22.5-36.2]	[35.4-48.7]	[27.3-39.7]	[29.1-44.9]
				Α		
	5.4	#	#	#	#	#
Other reason (social smoking, peer pressure etc.)	[4.6-6.2]					

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Table 34. Use of Illegal drugs in the past 12 months, by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	School-specific (%)					
	Canadian				Year o	f study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +	
	•		Α	В	С	D	
Illegal drug							
	7.4	5.6	6.7	4.7	3.9*	7.2	
Cocaine or crack	[6.9-7.9]	[4.5-6.8]	[4.7-8.6]	[3.4-6.0]	[2.6-5.2]	[5.3-9.1] C	
	1.8	#	#	#	#	#	
Non-Prescription Amphetamines	[1.5-2.0]						
	0.4	#	#	#	#	#	
Methamphetamine	[0.3-0.5]						
	6.0	6.2	6.9	5.5↓	5.3	7.0	
Ecstasy or similar designer drugs	[5.6-6.4]	[5.0-7.4]	[4.9-8.9]	[4.1-6.9]	[3.8-6.8]	[5.1-8.9]	
	0.4	#	#	#	#	#	
Salvia	[0.3-0.5]						
	8.3	9.0	11.4	6.6	7.2	10.6	
Hallucinogens	[7.8-8.9]	[7.5-10.4]	[8.9-13.9] B	[5.1-8.2]	[5.4-8.9]	[8.3-12.8] C	
	0.6	#	#	#	#	#	
Sniffed glue, gasoline or other solvents	[0.4-0.7]						
	#	#	#	#	#	#	
Heroin							
	0.3	#	#	#	#	#	
Synthetic cannabinoids	[0.2-0.4]						

	#	#	#	#	#	#
Mephedrone						
	#	#	#	#	#	#
BZP/TFMPP						
	14.7	13.6	15.8	11.5个	11.3	15.7
Any illegal drug ¹	[14.1-15.3]	[11.9-15.4]	[13.0-18.7]	[9.5-13.5]	[9.2-13.5]	[13.1-18.4]
			В			С
	14.3	13.5↓	15.7	11.4	11.1	15.6
Any of 6 illegal drugs ²	[13.7-14.9]	[11.8-15.2]	[12.8-18.5]	[9.4-13.3]	[8.9-13.2]	[12.9-18.3]
			В			С

¹ "Any illegal drug" includes any substance listed in Table 34.

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² Cocaine/crack, amphetamines, methamphetamine, ecstasy, hallucinogens, heroin.

^{*} Moderate sampling variability, interpret with caution.

Table 35. Drug related harms¹ in the past 12 months, by sex and year of study, CPADS 2019/2020 University of Manitoba

		School-specific (%)					
	Pan-Canadian	Overell	Malaa	Famalas	Year o	f study	
	(%)	Overall	Males	Females	1 st and 2 nd	3 rd +	
Harms			Α	В	С	D	
Friendship or social life	3.8 [3.4-4.3]	#	#	#	#	#	
Physical health	6.3 [5.7-6.9]	4.3* [2.8-5.7]	#	#	#	#	
Home life, family or relationship	3.4 [3.0-3.9]	#	#	#	#	#	
Work, studies or employment opportunities	4.4 [3.9-4.9]	#	#	#	#	#	
Financial position	3.7 [3.2-4.2]	#	#	#	#	#	
Legal problems	0.5↓* [0.3-0.7]	#	#	#	#	#	
Housing problems	0.5↓* [0.3-0.7]	#	#	#	#	#	
Difficulty learning things	3.9 [3.4-4.4]	#	#	#	#	#	
Any harm ¹	1			1	1	l	
Any drug harm to self - total population	6.3 [5.9-6.8]	4.7 [3.7-5.8]	#	4.6 [3.3-5.9]	4.3* [2.9-5.7]	5.0 [3.4-6.6]	

Any drug harm to self among those who have used any of 6 drugs ²	29.8 [27.6-32.0]	24.8 [18.6-31.0]	#	#	#	#
Any drug harm to self among problematic users of pharmaceuticals ³	25.3 [23.2-27.4]	18.3 [12.6-24.0]	#	#	#	#
Any drug harm to self among those who have used any illegal drug or engaged in problematic use of pharmaceuticals ⁴	23.1 [21.5-24.7]	17.8 [13.5-22.1]	#	16.4* [11.4-21.5]	#	#

¹ At least one of 8 harms, including harm to: physical health; friendships and social life; financial position; home life or marriage; work, studies, or employment opportunities; legal problems; difficulty learning; housing problems.

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed. Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² Among those who have used any of 6 drugs (Cocaine/crack, amphetamines, methamphetamine, ecstasy, hallucinogens, heroin) in the past year. Users of any 6 drugs may also have used other drugs, including cannabis, or problematic use of pharmaceuticals or over the counter medication.

³ Among problematic users of prescription pharmaceuticals and over the counter medication in the past year. Problematic use includes using more, using more often or using other than prescribed (e.g. to get high). Problematic users of pharmaceuticals may also have used illegal drugs.

⁴ Among those who have used any drug (cocaine/crack, amphetamine, methamphetamine, ecstasy or other similar drugs, hallucinogens excluding salvia, heroin, salvia, glue and other inhalants, synthetic cannabinoids, mephedrone, BZP) or engaged in problematic use of pharmaceuticals or over the counter medication in the past year.

^{*} Moderate sampling variability, interpret with caution.

Table 36. Use of other drugs, [among all respondents] by sex and year of study, CPADS 2019/2020 University of Manitoba

	D 0 "	School-specific (%)				
	Pan-Canadian	0		F 1	Year of study	
	(%) Over	Overall	Males	Females	1 st and 2 nd	3 rd +
			Α	В	С	D
Other drug use						
	1.4	#	#	#	#	#
Use of new psychoactive susbtances ¹ - lifetime use	[1.2-1.6]					
	1.0	#	#	#	#	#
Used other drugs - past 12 month use ²	[0.9-1.2]					

¹ New Psychoactive Substances (NPS) are substances formulated to contain chemicals that mimic the effects of controlled substances, and are often referred to as alternatives to controlled substances.

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

² In the past 12 months, have you used or tried any other substance or illegal drug for the experience or to get high apart from those mentioned so far?

^{*} Moderate sampling variability, interpret with caution.

Table 37. Naloxone use by sex and year of study, CPADS 2019/2020 University of Manitoba

	Pan-	Pan- School-specific (%)					
	Canadian	Overell	Malaa	Famalas	Year o	f study	
	(%)	Overall	Males	Females	1st and 2nd	3 rd +	
			Α	В	С	D	
Naloxone use	1	_	T	T	T	T	
	39.6	29.9	27.8	32.0	25.3	34.2	
Heard about naloxone	[38.7-40.4]	[27.6-32.2]	[24.2-31.3]	[29.0-34.9]	[22.4-28.3]	[30.7-37.8] C	
	12.6	#	#	#	#	#	
Obtained a naloxone kit in the past 12 months	[11.6-13.7]						
Main reason for obtaining naloxone:							
Need it for yourself	#	#	#	#	#	#	
	38.9	#	#	#	#	#	
Need it for family, friend	[34.6-43.3]						
	44.5↑	#	#	#	#	#	
In case someone on street or venue needs it	[40.2-48.9]						
	#	#	#	#	#	#	
In case anyone needs it							
	6.6	#	#	#	#	#	
I need it for work / am required to have one	[4.8-9.0]						
	4.6*	#	#	#	#	#	
Other reason	[3.1-6.8]						

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

^{*} Moderate sampling variability, interpret with caution.

[#] High sampling variability - although an estimate may be determined from the table, data should be suppressed. Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

Table 38. School Specific Questions, CPADS 2019/2020 University of Manitoba

		School-specific (%)					
	Overall	Moles	Females	Year o	f study		
	Overall	Males	remaies	1 st and 2 nd	3 rd +		
Please indicate which of the following University of Manie	toba services you ar	e aware of that s	support harm red	luction for subst	ance use.		
	3.8	#	3.8*	#	#		
Naloxone Program	[2.8-4.9]		[2.5-5.1]				
	14.9	13.4	16.2	15.8	13.9		
Addictions Foundation of Manitoba Counsellor	[12.9-16.8]	[10.5-16.3]	[13.8-18.7]	[13.1-18.5]	[11.2-16.7]		
	28.4	29.2	27.8	31.9	25.6		
Health and Wellness Educator	[26.0-30.9]	[25.3-33.1]	[24.8-30.7]	[28.5-35.4] D	[22.2-29.1]		
	48.8	47.9	49.6	50.0	48.0		
University Health Service	[46.1-51.5]	[43.6-52.2]	[46.2-52.9]	[46.3-53.7]	[44.1-51.9]		
	11.1	12.1	10.1	13.7	8.7		
Student Support Case Management	[9.4-12.8]	[9.3-14.9]	[8.1-12.1]	[11.2-16.2] D	[6.5-10.9]		
	16.5↓	15.0	17.9	16.9	15.8		
Healthy U	[14.5-18.5]	[12.0-18.1]	[15.3-20.4]	[14.2-19.7]	[12.9-18.6]		
	59.2	54.3	63.8	57.4	60.9		
Student Counselling Centre	[56.6-61.9]	[50.1-58.6]	[60.6-67.0] A	[53.8-61.1]	[57.0-64.7]		
	10.1	12.1	8.2	10.9	9.2		
AA group on campus	[8.4-11.7]	[9.3-14.9] B	[6.4-10.0]	[8.6-13.2]	[6.9-11.4]		
Other	#	#	#	#	#		

None of these	25.6	28.5↓	22.9	26.1	25.3
	[23.2-27.9]	[24.6-32.3]	[20.1-25.7]	[22.9-29.3]	[21.9-28.7]
Notice of these	[23.2 27.3]	B	[20.1 25.7]	[22.5 25.5]	[21.5 25.7]

Please indicate which of the following services you would like to see at the University of Manitoba to support harm reduction for substance use.

	57.3	53.5个	60.7	54.2	60.4
Addictions counselling	[54.5-60.2]	[48.9-58.2]	[57.2-64.2]	[50.3-58.2]	[56.3-64.5]
			Α		С
	44.6	43.4	45.6	42.8	46.1
Health promotion and campaigns	[41.7-47.5]	[38.8-48.0]	[42.1-49.2]	[38.8-46.7]	[41.9-50.3]
	41.0	37.6	44.1	39.5个	41.5↓
Substance use treatment groups	[38.2-43.9]	[33.0-42.1]	[40.5-47.6]	[35.7-43.4]	[37.3-45.6]
			Α		
A safer use space (supervised ream where intervigated	36.3	32.7	39.5个	36.8	34.7
A safer use space (supervised room where intoxicated students could be monitored)	[33.5-39.1]	[28.3-37.1]	[36.0-43.0]	[33.0-40.6]	[30.7-38.7]
students could be monitoredy			Α		
	32.6	29.2	35.6	31.3	32.9
Harm reduction room (sterile needles, sterile water, etc.)	[29.9-35.3]	[24.9-33.4]	[32.2-39.1]	[27.7-35.0]	[28.9-36.8]
			Α		
	#	#	#	#	#
Other					
	20.6	24.9	16.8	22.1	19.7
None of these	[18.2-22.9]	[20.8-28.9]	[14.2-19.5]	[18.8-25.4]	[16.3-23.0]
		В			

[95% confidence intervals in brackets]

The symbols \uparrow and \downarrow refer to the direction of rounding to integers.

High sampling variability - although an estimate may be determined from the table, data should be suppressed.

Capitalised letters (e.g. A, B), indicate differences at the 95% significance level.

^{*} Moderate sampling variability, interpret with caution.

Appendix 2: 2019/2020 CPADS CORE Questionnaire University of Manitoba

CPADS 2019



Government of Canada

Languages: English, French

Section

LoginA Show if Is login

(if HaveSchoolResources)

Thank you for agreeing to participate in the Canadian Postsecondary Education Alcohol and Drug use Survey, distributed by the survey firm Advanis on behalf of Health Canada. Si vous préférez répondre au questionnaire en français, veuillez utiliser le bouton ci-dessous.

If you would like to speak to someone after you complete the survey or for more information on resources related to substance use available at your school, please click the following symbol which can be found at various points throughout the survey.

If you are unable to complete the survey in one session, your partial response will be saved for this survey.

(http://www.advanis.net)

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LoginB Show if Is login1b

Thank you for agreeing to participate in the Canadian Postsecondary Education Alcohol and Drug use Survey, distributed by the survey firm Advanis on behalf of Health Canada. Si vous préférez répondre au questionnaire en français, veuillez utiliser le bouton ci-dessous.

Health Canada is conducting this survey to measure alcohol and drug use among college and university students in Canada. This research is being conducted in partnership with the Postsecondary Education Partnership-Alcohol Harms (PEP-AH), a group of student service representatives working to improve alcohol prevention programs on your campus. The results from this survey will be used to develop health programs for the schools.

This survey will take approximately 20 minutes to complete and you may skip any questions that you do not feel comfortable answering. You may complete the survey in several sessions from different devices

by logging back in using your unique survey link.

Some questions may be uncomfortable to answer as they ask about illegal activities or sensitive topics such as physical or sexual harms related to alcohol use. If you would like to speak to someone after you complete the survey or for more information on resources related to substance use available at your school, please click the following symbol which can be found at various points throughout the survey.

This research has been approved by the Health Canada and Public Health Agency of Canada Research Ethics Board. Any reports or publications produced by Health Canada based on this research will use grouped data and will not identify you or link you to these survey results.

The personal information you provide is governed in accordance with the Privacy Act and collected under the authority of the Controlled Drugs and Substances Act. Personal information is collected in accordance with Health Canada's Controlled Drugs and Substances Strategy, to help promote student health and safety across the country. Your survey responses will be given a unique ID number, all direct identifiers will be removed, and other steps will also be taken so that the risk of identification is extremely low. Your de-identified information will be provided to Health Canada and possibly your school and external researchers.

If you are unable to complete the survey, your partial response will be saved for this survey.

Should you have any ethical questions or concerns regarding your participation in this research study, you may contact your school's ethics board.

(http://www.advanis.net)

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PSE1	
Are you	currently studying at a university or college/cégep in Canada?
O_1	Yes, I am studying in Canada
O_2	No, I am studying outside of Canada
□ -8	I prefer not to answer
- 9	I don't know
PSE2	Show if Studying in Canada
What is y	our age?
Minimum	: 0, Maximum: 99
	years
□ -8	I prefer not to answer
Q ₋₉	I don't know

Thank you for your interest in our survey.

Based on your responses to one or more of the previous questions, you are unfortunately not eligible to participate.

(http://www.advanis.net)

Status Code: 501

SEX01

What was your sex at birth?						
O_1	Male					
O_2	Female					

I prefer not to answer

DEMQ01

□ -8

What is your gender?

(Refers to the gender you currently identify with, which may be different from sex assigned at birth and may be different from what is indicated on legal documents.)

O_1	Male
O_2	Female
O 3	[You don't have an option that applies to me. I identify as (please specify): / Other gender, please specify:]
□ -8	I prefer not to answer
- 9	I don't know

HWBQ01

Please rate your **physical health**, according to the following scale:

O_1	Excellent
O_2	Very good
O 3	Good
O 4	Fair
O 5	Poor
□ -8	I prefer not to answer
99	I don't know

HWBQ02

Please rate your mental health , according to the following scale:		
O_1	Excellent	
O 2	Very good	
O 3	Good	
O 4	Fair	
O 5	Poor	
-8	I prefer not to answer	
9- 🔲	I don't know	
ALC01		
Have you heard of Canada's Low Risk Drinking Guidelines?		
O_1	Yes	
O 2	No	

ALC2

-8

9- 🔲

The following questions are about your alcohol consumption. For the purpose of this survey, a **drink** means:

- 341 ml or 12 oz. of beer or cooler (bottle, can or draft)
- 142 ml or 5 oz. of wine

I prefer not to answer

I don't know

• 43 ml or 1.5 oz. of liquor or spirit (straight or mixed)

Include: light beer.

Exclude: de-alcoholised beer or coolers (0.5% alcohol) or cocktails such as Virgin Mary or Shirley Temple.



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ALC02

How many standard drinks in a typical day, do you think is considered a low risk amount *?*? Please respond for both males and females

? For the purpose of this survey, a **drink** means:

- 341 ml or 12 oz. of beer or cooler (bottle, can or draft)
- 142 ml or 5 oz. of wine
- 43 ml or 1.5 oz. of liquor or spirit (straight or mixed)

Minimum: 0, Maximum: 60

For a woman:		drinks
F	or a man:	drinks
-8	I prefer not to	o answer
٥. 🗆	I don't know	

ALC03

Have you ever had a drink *?*?

☐ -8 I prefer not to answer

☐ -9 I don't know

Drinking	does not include having a few sips of wine for religious purposes.
? For th	e purpose of this survey, a drink means:
• 341	ml or 12 oz. of beer or cooler (bottle, can or draft)
• 142	ml or 5 oz. of wine
• 43 m	ol or 1.5 oz. of liquor or spirit (straight or mixed)
O_1	Yes
O_2	No
□ -8	I prefer not to answer
-9	I don't know
ALC04	Show if ALCO3 1 Lifetime drinker
Drinking	unting small sips, how old were you when you had your first alcoholic beverage? does not include having a few sips of wine for religious purposes. m: 5, Maximum: 25 years
-8 -9	I prefer not to answer I don't know
ALC05	Show if ALCO3 1 Lifetime drinker
In the p	past 12 months, did you drink alcoholic beverages?
Drinking	does not include having a few sips of wine for religious purposes.
O_1	Yes
O_2	No
□ -8	I prefer not to answer
-9	I don't know
ALC06	Show if ALCO5 1 Past 12 month drinker
During	the past 30 days, how often did you drink alcoholic beverages?
O_1	Daily or almost daily
O 2	2 to 5 times a week
O 3	Once a week
O 4	2 to 3 times in the past 30 days
O 5	Once in the past 30 days
\bigcirc .	Not in the past 30 days

ALC07 Show if ALC05 1 Past 12 month drinker

When you paid for an alcoholic beverage for yourself in bars/restaurants/festivals, what is the cheapest amount you have paid for a drink in the **past 12 months**?

- O ₀ I have not paid for a drink in the past 12 months
- O₁ \$0.50
- O₂ \$1.00
- O₃ \$1.50
- O₄ \$2.00
- O₅ \$2.50
- O₆ \$3.00
- O₇ \$3.50
- O₈ \$4.00
- O₉ \$4.50
- O 10 \$5.00
- O 11 \$5.50
- O 12 \$6.00
- O ₁₃ \$6.50
- O ₁₄ \$7.00
- O ₁₅ \$7.50
- do oo
- O 16 \$8.00
- O ₁₇ \$8.50 O ₁₈ \$9.00
- O 19 \$9.50
- O 20 \$10.00
- O 21 \$10.50
- O 22 \$11.00
- O 23 \$11.50
- O 24 \$12.00
- O 25 \$12.50
- O 26 \$13.00
- O 27 \$13.50
- O 28 \$14.00
- O 29 \$14.50
- O 30 \$15.00
- O₃₁ \$15.50
- O 32 \$16.00
- O 33 \$16.50
- O ₃₄ \$17.00
- O 35 \$17.50
- O 36 \$18.00
- O ₃₇ \$18.50
- O 38 \$19.00
- O 39 \$19.50

\$20.00
More than \$20.00
I prefer not to answer
I don't know
Show if ALC05 1 Past 12 month drinker
the past 12 months, have you participated in the following promotions when you drank alcohol
blic drinking venue (e.g. pub, bar, club)?
Happy hour (period of the day when drinks are sold at reduced prices in a bar or restaurant) *
Low-priced promotion (ladies' night, 2 drinks for the price of 1, etc.) *
Special promotions by breweries/liquor/wine companies *
Cover charge for unlimited drinks *
narked with * are randomized
Mark .
Yes
No
I prefer not to answer
I don't know
Show if ALCO6 1 to 5 Past 30 day drinker
the past 30 days , how often did you generally consume the following alcoholic beverages?
Beer Wine
Coolers or pre-mixed cocktails (with alcohol content of less than 7%)
Coolers or pre-mixed cocktails (with alcohol content of less than 7%) Coolers or pre-mixed cocktails (with alcohol content of 7% or greater)
Cider
Spirits or liquor
Daily or almost daily (Show if ALCO6 1 Daily)
2 to 5 times a week (Show if ALCO6 2 to 5 times week or more)
Once a week (Show if ALCO6 Once a week or more)
2 to 3 times in the past 30 days (Show if ALCO6 2to3 times or more)
Once in the past 30 days
Not in the past 30 days
I prefer not to answer
I don't know

ALC10 Show if ALC06 1 to 5 Past 30 day drinker During the past 30 days, on those days when you drank alcoholic beverages, how many drinks did you usually have? Minimum: 1, Maximum: 99 drink(s) □ -8 I prefer not to answer None (I have not had a drink in the past 30 days) ٥- 🗆 ALC11a Show if ALC06 1 to 5 Past 30 day drinker In the past 30 days, what is the location where you consumed alcohol most often? Off campus O_1 On campus O 2 __ __ I prefer not to answer I don't know 9- 🔲 **ALC11b** Show if ALC11a Drank on or off campus (if Drank on campus) More specifically, when you drank on campus, where did most of the drinking take place? (if Drank off campus) More specifically, when you drank off campus, where did most of the drinking take place? (if Default) More specifically, when you drank off campus, where did most of the drinking take place? Someone's home (Show if Drank off campus) O_1 University residence (Show if Drank on campus) Campus grounds/building (Show if Drank on campus) Оз A bar/pub O_4 O 5 A restaurant A festival/event (Show if Drank off campus) O_6 Other, please specify ____ O 7 □ -8 I prefer not to answer I don't know و۔ 🔲 ALC12F Show if SEX01 Female AND ALC06 Past 30 day drinker During the past 30 days, how often did you have 4 or more drinks on one occasion? "On one occasion" means at the same time or within a couple hours of each other. O_1 Daily or almost daily (Show if ALCO6 1 Daily) O 2 2 to 5 times a week (Show if ALCO6 2 to 5 times week or more) Once a week (Show if ALCO6 Once a week or more) O_3 2 to 3 times in the past 30 days (Show if ALCO6 2to3 times or more) O_4 Once in the past 30 days O 5 Not in the past 30 days O_6

I prefer not to answer

I don't know

_-8

_ _g

ALC12IVI	Show if SEXU1 Male AND ALCU6 Past 30 day drinker
During th	ne past 30 days, how often did you have 5 or more drinks on one occasion?
"On one o	occasion" means at the same time or within a couple hours of each other.
O_1	Daily or almost daily (Show if ALC06 1 Daily)
O 2	2 to 5 times a week (Show if ALC06 2 to 5 times week or more)
О 3	Once a week (Show if ALC06 Once a week or more)
O 4	2 to 3 times in the past 30 days (Show if ALCO6 2to3 times or more)
O 5	Once in the past 30 days
O 6	Not in the past 30 days
-8	I prefer not to answer
- 9	I don't know
ALC13a S	Show if ALC06 1 to 5 Past 30 day drinker
During th	ne past 30 days, what is the highest number of alcoholic drinks you have had on a drinking day?
Minimum	: 1, Maximum: 99
	drinks
	Lauréen nat ta angular
-8	I prefer not to answer I don't know
9- 🗖	1 don't know
ALC13b	Show if ALC06 Past 30 day drinker AND ALC13a Gave response
	g did it take you to consume the < <alc13a.value>> drinks you indicated in the previous</alc13a.value>
question	
•	· : 0, Maximum: 59
Hou	
Minute	
□ -8	I prefer not to answer
	I don't know
ALC14	show if ALCO3 1 Lifetime drinker
Have you	u ever been drunk?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
9 -9	I don't know
ALC15 S	Show if ALC14 Got drunk
How old	were you when you first got drunk?
	: 4, Maximum: 25
	years
	I prefer not to answer

I don't know

-9

ALC16	Show if ALC06 Past 30 Day Drinker AND ALC14 Got drunk in lifetime	
During t	he past 30 days, how often would you say you drank enough to be drunk?	
O_1	Daily or almost daily (Show if ALCO6 1 Daily)	
O_2	2 to 5 times a week (Show if ALCO6 2 to 5 times week or more)	
O 3	Once a week (Show if ALCO6 Once a week or more)	
O 4	2 to 3 times in the past 30 days (Show if ALCO6 2to3 times or more)	
O 5	Once in the past 30 days	
O_6	Not in the past 30 days	
□ -8	I prefer not to answer	
9- 🔲	I don't know	
ALC17	Show if ALC16 1 to 5 Got Drunk past 30 days	
When yo	ou drank enough to get drunk, did you mostly consume?	
O_1	Beer	
O_2	Wine	
O_3	Coolers or pre-mixed cocktails (with alcohol content of less than 7%)	
O 4	Coolers or pre-mixed cocktails (with alcohol content of 7% or greater)	
O 5	Cider	
O 6	Spirits or liquor	
-8	I prefer not to answer	
9- 🔲	I don't know	
	Section Alcohol_7_days Show if ALCO6 1 to 5 Past 30 day drinker	
	ADW00, ADW001	
4 D\4/00		
ADW00		
	ollowing question, we are asking you to report the number of drinks you consumed each day	
during t	he past 7 days , starting with yesterday.	
Thinking	g back over the past seven (7) days , did you have a drink?	
O_1	Yes	
O_2	No	
□ -8	I prefer not to answer	
□ ₋₉	I don't know	

Page Drinking_wheelv2 Show if ADW00 Past 7 days drinker

ADW001

In the following question, we are asking you to report the number of drinks you consumed each day during the past 7 days, starting with yesterday.

During the past 7 days from <<SevenDaysAgo>> to <<OneDayAgo>>, how many drinks did you have each day?

For each day, you should be counting up to 4AM in the morning of the following day, **e.g.** Monday up to 4AM on Tuesday.

Select the actual number of drinks for each day, not an average.

Select "0" if you had no drinks on a given day.

Minimum: 0, Maximum: 99

< <twodaysago>> _</twodaysago>	
< <threedaysago>> _</threedaysago>	
< <fourdaysago>> _</fourdaysago>	
< <fivedaysago>> _</fivedaysago>	
< <sixdaysago>> _</sixdaysago>	
< <sevendaysago>> _</sevendaysago>	

Section

AEDtxt

The following questions are about energy drinks, such as Red Bull, Rockstar or another brand.

Energy drinks are beverages usually containing caffeine and other stimulant substances, such as guarana, taurine or L-carnitine. These drinks may be marketed as providing mental and physical stimulation.

Press the right arrow to continue.

AED01

In the past 30 days , how often did you drink any of the follo	wing?
---	-------

1.	An energy drink like Red Bull*, Monster* and Rockstar*, not sports drinks. *?* *?* Exclude coffee, tea, other naturally caffeinated beverages, and sports drinks marketed to replace water or electrolytes before or after exercise, e.g., Gatorade or Powerade.	
2.	Alcohol and an energy drink drank separately on one occasion (Show if ALCO5 1 Past 12 month drinker)	
3.	Alcohol and an energy drink hand-mixed together by you or someone else ALCO5 1 Past 12 month drinker) (Show if	
4.	Store-bought pre-mixed alcoholic beverages with energy drink names (such as Rockstar*+Vodka) (Show if ALCO5 1 Past 12 month drinker)	
5.	Sweetened beverages with high alcohol content (7% or higher) such as FourLoko, FCKDUP, Clubtails (Show if ALCO5 1 Past 12 month drinker)	
O 1	Daily or almost daily	
O_2	2 to 5 times a week	
О 3	Once a week	
O 4	2 to 3 times in the past 30 days	
O 5	Once in the past 30 days	
O 6	Not in the past 30 days	
-8	I prefer not to answer	
- 9	I don't know	
ALCDR01		
	- ne past 12 months , have you been a passenger in a motor vehicle *?* driven by someone who	
_	more drinks of alcohol in the previous 2 hours?	
	ehicle: (e.g., car, snowmobile, motor boat or all-terrain vehicle (ATV)	
O 1	Yes	
O 2	No	
□ ₋₈	I prefer not to answer	
9-9	I don't know	
AL CDDO	Changif ALCOS 4 Book 42 mansh dainless	
ALCDR02	•	
_	ne past 12 months, have you driven a motor vehicle *?* after having 2 or more drinks in the 2 hours?	
'?* motor v	ehicle: (e.g., car, snowmobile, motor boat or all-terrain vehicle (ATV)	
O_1	Yes	
O 2	No	
□ -8	I prefer not to answer	
□ -9	I don't know	

AHS Show if ALC05 1 Past 12 month drinker

The following is a list of things that can sometimes happen to people either during or after they have been drinking alcohol.

Please indicate whether the statement describes something that has happened to you in the **past 30** days because of your own drinking.

- While drinking, I have said or done embarrassing things *
- 2. I have had a hangover (headache, sick stomach) the morning after I had been drinking *
- 3. I have felt very sick to my stomach or thrown up after drinking *
- 4. I have ended up drinking on nights when I had planned not to drink *
- 5. I have taken foolish risks when I have been drinking *
- 6. I have passed out from drinking *
- 7. I have found that I needed larger amounts of alcohol to feel any effect, or that I could no longer get drunk on the amount that used to get me drunk *
- 8. When drinking, I have done impulsive things that I regretted later *
- 9. I've not been able to remember large stretches of time while drinking heavily *
- 10. I have driven a motor vehicle when I knew I had too much to drink to drive safely *
- 11. I have missed work or classes at school because of drinking, a hangover, or illness caused by drinking *
- 12. My drinking has gotten me into sexual situations I later regretted *
- 13. I have found it difficult to limit how much I drink *
- 14. I have become very rude, obnoxious or insulting as a result of my drinking *
- 15. I have woken up in an unexpected place after heavy drinking *
- 16. I have felt badly about myself because of my drinking *
- 17. I have had less energy or felt tired because of my drinking *
- 18. The quality of my work or schoolwork has suffered because of my drinking *
- 19. I have spent too much time drinking *
- 20. I have neglected my obligations to family, work, or school because of drinking *
- 21. My drinking has created problems between myself and my boyfriend/girlfriend/spouse/partner, parents, or other near relatives *
- 22. I have put on weight because of drinking *
- 23. My physical appearance has been harmed by my drinking *
- 24. I have felt like I needed a drink after I'd gotten up (that is, before breakfast) *

Levels marked with * are randomized

O_3	Yes, within the past 30 days
O 2	Yes, but more than 30 days ago
O 1	No, never happened to me
8	I prefer not to answer
D -9	I don't know

AHO

The following is a list of things that sometimes happen because of other student's drinking.

Please indicate whether the statement describes something that has happened to you in the **past 30** days because of another student's drinking.

- 1. Interrupted your studies *
- 2. Affected your sleep *
- 3. Made you feel unsafe *
- 4. Messed up your living space or ruined your belongings *
- 5. Harassed or bothered you, called you names or insulted you *
- 6. Pushed, hit or assaulted you *
- 7. Sexually harassed or sexually assaulted you *
- 8. Caused an argument with you *
- 9. Had to be taken care of by you *
- 10. Upset or disappointed you *
- 11. Caused a problem in your friendships or relationships *

Levels marked with * are randomized

- O₃ Yes, within the past 30 days
- O ₂ Yes, but more than 30 days ago
- O₁ No, never happened to me
- ☐ -8 I prefer not to answer
- ☐ -9 I don't know

APB Show if ALCO6 1 to 5 Past 30 day drinker

The following are strategies that can be used to slow down alcohol consumption, avoid intoxication and prevent dangerous alcohol-related consequences. Please indicate how often you have used the following strategies during the **past 30 days**.

- Alternated non-alcoholic beverages and alcohol beverages *
- 2. Determined, in advance, not to exceed a set number of drinks *
- 3. Ate before and/or during drinking *
- 4. Had a friend let you know when you've had enough *
- 5. Kept track of how many drinks you were having *
- 6. Paced your drinks to 1 or fewer per hour *
- 7. Avoided drinking games *
- Stopped drinking at least 1-2 hours before going home *
- 9. Limited money spent on alcohol *
- 10.

Only drank alcohol in safe environments (e.g., in the presence of others, at home, at a friend's house, at a restaurant) *

- 11. Made your own drinks *
- 12. Avoided hard liquor or spirits *
- 13. Refused a drink from a stranger *
- 14. Never left a drink unattended *
- 15. Drank an alcohol look-alike *

16.	Carried around a cup but did not drink any alcohol *
17.	Avoided situations where there was alcohol *
18.	Used a designated driver *
19.	Avoided getting in a car with someone who had been drinking *
evels ma	rked with * are randomized
O 5	Always
O 4	Usually
О 3	Sometimes
O 2	Rarely
O_1	Never
O 6	Does not apply
□ -8	I prefer not to answer
9- 🔲	I don't know

Section

CAN

The next questions are about cannabis. In this survey when we use the term cannabis, this includes marijuana (e.g., weed, pot), hashish, hash oil or any other products made from the cannabis plant, but not synthetic cannabinoids.

When we ask about use, this includes using cannabis in its dry form or when mixed or processed into another product such as an edible, an extract, a concentrate, including hashish, a liquid, or other product.

When we ask about use of cannabis, this may include use for medical and/or non-medical purposes.

Press the right arrow to continue.

CAN01

Since the new cannabis law came into effect (October 17, 2018), have you seen/heard **education campaigns, public health or safety messages** about cannabis in any of the following places?

	, , ,			
Select all	that apply			
□ 1	School (e.g., university campus, institutional e-mail)			
□ 2				
□ 3	Non-social media websites			
□ 4	Events (e.g., sporting events, concerts, festivals or markets)			
□ 5	Kiosks or temporary sales locations (in shopping centres or on the street)			
□ 6	Inside/outside legal stores that sell cannabis			
□ 7	Public display of posters or billboards (e.g., in public transit, at bars/restaurants)			
□ 8	Health care setting (e.g., pharmacy, doctors office)			
9	Print newspapers or magazines			
□ 10	TV/radio			
□ 11	Inside/outside illegal stores that sell cannabis			
□ 12	Other (please specify):			
□ 13	I have not noticed any education campaigns or public health messages (Exclusive)			
□ -8	I prefer not to answer			
□ -9	I don't know			
CAN02				
	n what you know			
1.	Can cannabis smoke be harmful?			
2.	Can it be harmful to use cannabis when pregnant or breastfeeding?			
3.	Can frequent use of cannabis increase the risk of mental health problems?			
4.	Are teenagers at greater risk of harm from using cannabis than adults?			
O_1	Yes			
O 2	No			
□ -8	I prefer not to answer			
9- 🔲	I don't know			
CAN03				
	a now connabis law come into effect (October 17, 2018), has your knowledge of the harm			
	e new cannabis law came into effect (October 17, 2018), has your knowledge of the harms			
	co cannabis increased?			
O 1	Yes			
O 2	No Samurabet			
O 3	Somewhat			
-8	I prefer not to answer			
9- 🗖	I don't know			

CAN05	
In the p	past 12 months, have you used cannabis?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
-9	Don't know/Not sure
CAN06	Show if CAN05 Past 12 months Cannabis user
In the p	past 30 days, how often did you use cannabis?
O_1	Not in the past 30 days
O_2	1 day in the past 30 days
O 3	2 or 3 days in the past 30 days
O 4	1 or 2 day(s) per week
O 5	3 or 4 days per week
O 6	5 or 6 days per week
O 7	Daily
□ -8	I prefer not to answer
-9	Don't know/Not sure
CAN07	Show if CAN05 Past 12 months Cannabis user
How ol	d were you when you first tried or started using cannabis?
	m: 4, Maximum: 99
	years
□ -8	I prefer not to answer
-9	I don't know
CAN08	Show if CANO5 Past 12 months Cannabis user
Are you	using a different amount of cannabis now that the new cannabis law is in effect (October 1

L7, 2018)?

C_1	I use more
) ₂	I use less
Э ₃	I use the same amount
-8	I prefer not to answer
و۔ 🗆	I don't know

CAN10	Show if CAN05 Past 12 months Cannabis user
When ch	noosing cannabis products, what levels of THC and CBD do you typically use?
O_1	Higher THC, Lower CBD
O_2	Higher CBD, Lower THC
O 3	Equal levels of THC and CBD
O 4	THC only
O 5	CBD only
O 6	Other (please specify):
☐ ₋₈	I prefer not to answer
9-9	I don't know
CAN11a	Show if CAN05 Past 12 months Cannabis user
In the pa	ust 12 months, have you used the following cannabis products?
•	that apply
	Dried flower/leaf *
	Hashish/kief *
_ ₃	Cannabis oil for oral use – e.g., in dropper/syringe, softgel/capsules, spray bottle *
	Cannabis in vape pens/cartridges *
□ ₅	Cannabis concentrate/extracts – e.g., shatter/wax/budder/butane honey oil *
☐ 6	Cannabis edible food products – e.g., cookies, candy *
_ 0 □ 7	Cannabis beverages – e.g., cola, tea, coffee *
_	Topicals – e.g., lotion, ointment, creams applied to skin *
□ 8	Other (e.g., seeds, cannabis tincture, suppository, etc.) (please specify):
□ -8	I prefer not to answer
	I don't know
_	arked with * are randomized
CAN11b	Show if CAN11a at least one
In the pa	st 12 months, how often have you used the following cannabis products?
1.	Dried flower/leaf * (Show if CAN11a 1 Dried flower)
2.	Hashish/kief * (Show if CAN11a 2 Hashish kief)
3.	Cannabis oil for oral use — e.g., in dropper/syringe, softgel/capsules, spray bottle * (Show if CAN11a 3 Cannabis oil for oral)
4.	Cannabis in vape pens/cartridges * (Show if CAN11a 4 Cannabis in vape)
5.	Cannabis concentrate/extracts – e.g., shatter/wax/budder/butane honey oil * (Show if
6.	CAN11a 5 Cannabis concentrate) Cannabis edible food products – e.g., cookies, candy * (Show if CAN11a 6 Cannabis edibles)
7.	Cannabis beverages — e.g., cola, tea, coffee * (Show if CAN11a 7 Cannabis beverages)
7. 9.	Topicals – e.g., lotion, ointment, creams applied to skin (Show if CAN11a 9 Topicals)
3. 8.	Other: < <can11a.specify(8)>> (Show if CAN11a 8 Other)</can11a.specify(8)>
- -	- man similar some some some some some some some some

100

Levels marked with * are randomized

O_1	Less than 1 day per month
O_2	1 day per month
O 3	2 or 3 days per month
O 4	1 or 2 day(s) per week
O 5	3 or 4 days per week
O_6	5 or 6 days per week
O 7	Daily
□ -8	I prefer not to answer
- 9	I don't know
CAN12	Show if CAN05 Past 12 months Cannabis user
In the p	ast 12 months, from whom did you usually buy or receive the cannabis you used?
O 1	I grew my own
O 2	It was specifically grown for me
O 3	From a legal storefront
O 4	From a legal online source (Health Canada licensed producer, provincial regulated retailer)
O 5	From an illegal storefront
O 6	From an illegal online source
O 7	It was shared around a group of friends
8 C	From a family member
O 9	From a friend
O 10	From an acquaintance
O 11	From a dealer
O 13	From other students at school (Show if Is School 19)
O 14	From non-students while on campus (Show if Is School 19)
O 15	From non-students while off campus (Show if Is School 19)
O 12	Other
□ -8	I prefer not to answer
- 9	I don't know
CAN13	Show if CAN05 Past 12 months Cannabis user
In the p	ast 12 months, how often did you use cannabis at college/university or within 2 hours before
going to	college/university?
O_1	Rarely (less than one day per month)
O_2	Sometimes (1 to 3 days per month)
O 3	Often (weekly)
O 4	Always or almost always (most days you attend school)
O 5	Have not done this in the past 12 months
-8	I prefer not to answer
_ -9	I don't know

CAN14 Show if CAN05 Past 12 months Cannabis user

During the **past 12 months**, when you used cannabis, how often did you combine it with any of the following substances?

following substances?

"Combine" means mixed or consumed at the same time.

1. Alcohol

2. Tobacco or e-cigarette ingredients with nicotine

3. Prescription opioids (e.g., oxy, Dilaudid®, morphine, Demerol®, Tylenol #3®)

4. Prescription stimulants (e.g., Ritalin®, Concerta®, Adderall®, Dexedrine®)

5. Prescription sedatives/tranquilizers (e.g., diazepam, lorazepam, Valium®, Ativan®, alprazolam, Xanax®, clonazepam, Rivotril®)

6. Illegal opioids (e.g., heroin, non-pharmaceutical fentanyl)

7. Illegal stimulants (e.g., cocaine, crack, methamphetamine, ecstasy/MDMA)

8. Illegal hallucinogens/dissociative (e.g., LSD, magic mushrooms, PCP)

O_1	Never
O 2	Rarely
O 3	Sometimes
O 4	Usually
O 5	Always
-8	I prefer not to answer
9- 🔲	I don't know

CAN15 Show if CAN05 Past 12 months Cannabis user

In the past 12 months, please indicate if you have used cannabis the following way.

- 1. Mixed or combined it with tobacco in a joint (also known as a spliff) or in a bong or in a pipe (also known as "yacht" or "popper" or "topper") for smoking
- 2. Smoked a joint and then smoked a tobacco product such as a cigarette, cigar, or cigarillo (also known as chasing)

Ο 1	Yes
O_2	No
□ -8	I prefer not to answer
9- 🔲	I don't know

CAN04

Have you ever been a passenger in a motor vehicle *?* driven by someone who had used cannabis within 2 hours before driving?

? motor \	vehicle: (e.g., car, snowmobile, motor boat or all-terrain vehicle (ATV)
O_1	Yes
O_2	No
-8	I prefer not to answer
و۔ 🔲	Don't know/Not sure

CAN16 Show if CAN05 Past 12 months Cannabis user

During the past 12 months, have you driven a motor vehicle *?* within 2 hours of smoking or vaporizing cannabis or a cannabis product?

? motor vehicle: (e.g., car, snowmobile, motor boat or all-terrain vehicle (ATV)

O 1 Yes
O 2 No

Page Show if CAN05 Past 12 months Cannabis user

I prefer not to answer

CAA

□ -8

The next few questions are about possible problems you might have had regarding the use of cannabis.

Press the right arrow to continue.

CAA00

During the past 3 months, how often have you used cannabis?

- O₁ Never
- Once or twice
- O₃ Monthly
- O₄ Weekly
- O₅ Daily or almost daily
- ☐ -8 I prefer not to answer
- ☐ -9 I don't know

CAA01

During the past **3 months**, how often have you had a strong desire or urge to use cannabis? [[School Resources]]

- O₁ Never
- Once or twice
- O₃ Monthly
- O₄ Weekly
- O₅ Daily or almost daily
- □ ₋₈ I prefer not to answer
- ☐ -9 I don't know

CAA02	Show if CAA00 Past 3 months Cannabis user
During th	ne past 3 months, how often has your use of cannabis led to health, social, legal or financial
problem	s? [[School Resources.]]
O 1	Never
O_2	Once or twice
O 3	Monthly
O 4	Weekly
O 5	Daily or almost daily
-8	I prefer not to answer
□ -9	I don't know
CAA03	Show if CAA00 Past 3 months Cannabis user
During th	ne past 3 months, how often have you failed to do what was normally expected of you because
of your u	ise of cannabis? [[School Resources.]]
	Marian
O 1	Never
O 2	Once or twice
O 3	Monthly
O 4	Weekly
O 5	Daily or almost daily
-8	I prefer not to answer
- 9	I don't know
CAA04	
Has a frie	end or relative or anyone else ever expressed concern about your use of cannabis? [[School
Resource	es.]]
O 3	Yes, in the past 3 months
	Yes, but not in the past 3 months
O ₂ O ₁	No, never
	I prefer not to answer
□ -8	I don't know
- 9	Tudit Chiow
CAA05	
Have you	u ever tried and failed to control, cut down or stop using cannabis? [[School Resources.]]
O 3	Yes, in the past 3 months
O_2	Yes, but not in the past 3 months
O_1	No, never

I prefer not to answer

I don't know

-8

9- 🔲

Section

PR

The next series of questions are about various medications, starting with pain relievers.

For the purpose of this survey, "pain relievers" are products that contain opioids such as codeine, morphine or related drugs. Most of these products require a prescription, although some do not.

Exclude drugs such as Regular Tylenol® or Extra Strength Tylenol®, Aspirin®, Advil®, Motrin® or their generic equivalents.

Include prescribed or non-prescribed drugs such as Tylenol® 1, 2, 3, and 4, or 292s.

Press the right arrow to continue.

OPI01

In the past 12 months, have you used any pain relievers?

Exclude drugs such as regular Tylenol [']	or Extra Strength Tyleno	l [®] , Aspirin [®] , Advil [®] ,	, Motrin [®]	or their generic
equivalent.				

- O₁ Yes
- O₂ No
- ☐ -8 I prefer not to answer
- ☐ -9 I don't know

Page Show if Used pain relievers

OPI01b

Did you use any of the following pain relievers?

Exclude drugs such as regular Tylenol® or Extra Strength Tylenol®, Aspirin®, Advil®, Motrin® or their generic equivalent.

Select all that apply.

1	Low-dose codeine product (e.g., Tylenol® 1, Robaxacet-8®, AC&C, Mersyndol, Calmylin)
□ 2	Oxycodone
□ 3	Fentanyl
 4	Other, please specify:
□ -8	I prefer not to answer

I don't know

OPI02	
During t	the past 12 months , did you take a higher dose of pain relievers than the recommended dose?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
- 9	I don't know
OPI03	
During t	the past 12 months, did you take pain relievers more often than recommended?
O_1	Yes
O 2	No
-8	I prefer not to answer
-9	I don't know
OPI04a	
During t	the past 12 months, did you use pain relievers for reasons other than pain relief?
	elp you sleep, to feel better, to improve your mood, to cope with stress, for the experience, for the feeling
	sed, to feel numb or for any other reason.
O 1	Yes
O 2	No
-8	I prefer not to answer
□ -9	I don't know
OPI04b	Show if OPI04a used for reasons beyond recommended
n the p a	ast 12 months, what is the main reason you used pain relievers other than for pain relief?
O_1	To help you sleep
O_2	To feel better
O 3	To improve mood
O 4	To cope with stress
O 5	For the experience
O_6	To feel numb
8 C	To party with friends
O 7	Other reason, please specify:
□ -8	I prefer not to answer
	I don't know

OPI5

For the next series of questions, please only consider those pain relievers that require a prescription, do not consider codeine products available from a pharmacist without a prescription such as Tylenol® #1 or 292s°.

Press the right arrow to continue

I don't know

9- 🔲

OPI05

During the past 12 months, were the pain relievers you have used prescribed for you?

ription such as Ty

For this	question, do not consider codeine products you obtained from a pharmacist without a presc
Tylenol	[®] #1 or 292s [®] .
Conside	er pain relievers given to you while you were admitted in hospital as being prescribed
O_2	Yes, they all were prescribed
O 3	Some were prescribed and others were not
O_1	No, none were prescribed
□ -8	I prefer not to answer
- 9	I don't know
OPI06	Show if OPI05 some or all prescribed
During	the past 12 months, did you give away pain relievers that were prescribed for you?
Exclude	e medication returned to pharmacy
O_1	Yes
O_2	No
-8	I prefer not to answer
- 9	I don't know
OPI07	Show if OPI05 some or all prescribed
During	the past 12 months, did you sell pain relievers that were prescribed to you?
O 1	Yes
O_2	No
□ -8	I prefer not to answer

OPI08 S	how if OPI05 None or some were prescribed		
Where do/did you usually obtain pain relievers that were not prescribed to you?			
Select all that apply.			
	From a friend or relative		
□ 2	From a drug dealer or stranger		
□ 3	From the internet		
□ ₇	Stolen		
□ 8	Other country		
□ 10	Other students at school (Show if Is School 19)		
□ 11	Non-students while on campus (Show if Is School 19)		
□ 12	Non-students while off campus (Show if Is School 19)		
9	Other (specify):		
□ -8	I prefer not to answer		
□ -9	I don't know		
	Cootion.		
	Section		
STI			
The next few questions are about your use of various stimulants .			
For the p	urpose of this survey, "stimulants" are products that require a prescription such as Ritalin®,		
Concerta®, Adderall®, Dexedrine® to help people who have attention or concentration problems such as			
ADHD.			
Exclude o	over-the-counter medications.		
Press the right arrow to continue.			
CT104			
STI01			
_	ne past 12 months, have you used any stimulant?		
O_1	Yes		
O_2	No		
-8	I prefer not to answer		
9- 🔲	I don't know		

Page	Show if Used stimulant
STI02	
Ouring O 1 O 2 O -8 O -9	the past 12 months , did you take higher doses of stimulants than the recommended dose? Yes No I prefer not to answer I don't know
STI03	
During	the past 12 months, did you take stimulants more often than recommended?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
9- 🗖	I don't know
STI04a	
During	the past 12 months , did you use stimulants for reasons other than why they are recommended?
	example, to cram for exams, to stay up all night to finish a project, to decrease your appetite, for the nce, to get high or for any other reason? Yes No I prefer not to answer I don't know
STI04b	Show if STI04a used for reasons beyond recommended
	past 12 months , what is the main reason you used stimulants for reasons other than why they are nended?
O_1	To cram for exams
O_2	To stay up all night to finish a project
O 3	To decrease appetite
O 4	For the experience
O 5	To get high
O 7	To party with friends
O 6	Other reason, please specify:
-8	I prefer not to answer
و۔ 🔲	I don't know

STI05

During	the past 12 months, were all the stimulants you have used prescribed to you?
O_2	Yes, they all were prescribed
O 3	Some were prescribed and others were not
O_1	No, none were prescribed
□ -8	I prefer not to answer
- 9	I don't know
STI06	Show if STI05 some or all prescribed
During	the past 12 months, did you sell any stimulants that were prescribed to you?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
9- 🔲	I don't know
STI07	Show if STI05 some or all prescribed
During	the past 12 months, did you give away any stimulant that was prescribed to you?
Exclude	returning medication to the pharmacy or drug store.
O_1	Yes
O_2	No
□ -8	I prefer not to answer
- 9	I don't know
STI08	Show if STI05 None or some were prescribed
Where	did you usually obtain stimulants that were not prescribed to you?
Select a	ll that apply.
□ 1	From a friend or relative
	From a drug dealer or stranger
□ 3	From the internet
□ 7	Stolen
□ 8	Other country
□ 10	Other students at school (Show if Is School 19)
□ 11	Non-students while on campus (Show if Is School 19)
□ 12	Non-students while off campus (Show if Is School 19)
9	Other (specify):
□ -8	I prefer not to answer
9- 🔲	I don't know

Section

SED

The next few questions are about your use of various sedatives or anti-anxiety medications. For the purpose of this survey, "sedatives or anti-anxiety medications" are products that **require a prescription** such as diazepam, Valium[®], Iorazepam, Ativan[®], alprazolam, Xanax[®], clonazepam, Rivotril[®] or others.

Sedatives or anti-anxiety medications are sometimes prescribed to help people sleep or relax.

Exclude over-the-counter medications and anti-depressants.

Press the right arrow to continue.

SED01

During the past 12 months, did you use any sedatives or anti-anxiety medication?

Exclude over-the-counter medications and anti-depressants.

- O₁ Yes
- O₂ No
- ☐ -8 I prefer not to answer
- ☐ -9 I don't know

Page Show if Used sedatives

SED02

During the **past 12 months**, did you take a **higher dose** of sedatives or anti-anxiety medications than the recommended dose?

- O₁ Yes
- O₂ No
- □ -8 I prefer not to answer
- ☐ -9 I don't know

SED03

During the **past 12 months**, did you take sedatives or anti-anxiety medication **more often** than recommended?

- O₁ Yes
- O₂ No
- ☐ -8 I prefer not to answer
- ☐ -9 I don't know

SED04a

During the past 12 months, did you use sedatives or anti	-anxiety medication for reasons other than why
they are recommended?	

e.g. for	the experience, the feeling they caused or to get high
O_1	Yes
O_2	No
□ -8	I prefer not to answer
- 9	I don't know
SED04k	Show if SED04a used for reasons beyond recommended
In the r	past 12 months, what is the main reason you used sedatives or anti-anxiety medication for
reason	s other than why they are recommended?
O_1	For the experience
O_2	To get high/the feeling they caused
O 3	Other reason, please specify:
□ -8	I prefer not to answer
9-9	I don't know
SED05	
During	the past 12 months, were all the sedatives or anti-anxiety medication you have used prescribed
to you?	
O 2	Yes, they all were prescribed
Оз	Some were prescribed and others were not
O_1	No, none were prescribed
-8	I prefer not to answer
- 9	I don't know
SED06	Show if SED05 some or all prescribed
During	the past 12 months, did you sell any sedatives or anti-anxiety medications that were prescribed
to you?	
) O 1	Yes
O 2	No
	I prefer not to answer
- 9	I don't know

SED07	Show if SED05 some or all prescribed
During	the past 12 months, did you give away any sedatives or anti-anxiety medications that were
prescri	bed to you?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
□ -9	I don't know
SED08	Show if SED05 None or some were prescribed
Where	$\ \text{do/did you } \textbf{usually} \text{ obtain sedatives or anti-anxiety medications that were not prescribed to you?}$
Select a	Il that apply.
	From a friend or relative
□ 2	From a drug dealer or stranger
□ 3	From the internet
□ 7	Stolen
□ 8	Other country
☐ ₁₀	Other students at school (Show if Is School 19)
□ 11	Non-students while on campus (Show if Is School 19)
☐ ₁₂	Non-students while off campus (Show if Is School 19)
9	Other (specify):
□ -8	I prefer not to answer
9- 🗖	I don't know
	Section
OTH01	
The ne	xt question is about over-the-counter medicine such as:
ant	ti-motion sickness or nausea medicine, e.g. Gravol®
• col	d or cough medicine, e.g. Nytol [®] , Robitussin [®] , Benylin [®] also known as robos, dex and DXM.
_	the past 12 months, have you used or tried any over-the counter medication not for health or al reasons , but for the experience, the feeling they caused, to get "high" or numb?
O_1	Yes
O 2	No
8	I prefer not to answer

I don't know

9- 🔲

OTH02

In the **past 12 months**, have you used or tried any other medication for any reasons other than why they were prescribed, for the experience or to get "high" or numb?

Please enter reasons why you may have used or tried medication in the box below:				
			_	
			_	
			_	
	None / No other		-	
9	I prefer not to answer			
□ -5	I don't know			
		Section		

DRU

The next series of questions ask about your use of illegal drugs.

Remember that all the information you provide will remain strictly confidential.

Press the right arrow to continue.

DRU01

Have you ever used or tried ...

- 1. Cocaine or crack (rock)
 - Cocaine or crack are also known as coke, freebase, powder, blow or snow or yayo.
- 2. Non-prescription amphetamines
 - Do not include legal amphetamines. Amphetamine is also known as speed.
- 3. Methamphetamine
 - Methamphetamine is also known as crystal meth or ice.
- 4. Ecstasy or similar designer drugs
 - Ecstasy is also known as MDMA, E, Xtc, Adam, Molly or X.
- Salvia
 - Salvia is also known as Salvia divinorum, Ska pastora, Herb of the Shepherdess, Hierba de María, divine sage, magic mint or Sally D.
- 6. Hallucinogens
 - Hallucinogens include PCP, angel dust, LSD, acid, ayahuasca, magic mushrooms, shrooms, psilocybin, mescaline, peyote, 2-C's, NBOMes.
- 7. Sniffed glue, gasoline or other solvents
- 8. Heroin
 - Heroin is also known as junk, horse or smack.

9.	Synthetic cannabinoids
10.	Synthetic cannabinoids are also known as Spice, K2, science, herbal mixtures or herbal incense. Mephedrone
10.	Mephedrone is also known as meph, MCAT, meow, bath salts, drone, 4-MMC, magic, meow-meow,
4.4	plant food or bubbles.
11.	BZP/TFMPP BZP or TFMPP are also known as Legal E, Legal X, piperazine, A2, frenzy or nemesis.
	22. C. T. M. C.
O 3	Yes, within the past 12 months
O_2	Yes, but not in the past 12 months
O_1	No, never
-8	I prefer not to answer
9 -9	I don't know
DRU02	
Have you	u <u>ever</u> injected any drug?
	eing injected by someone else.
Exclude:	
• Insta	ances where you have injected someone else with a drug or drugs
	drug that was prescribed for you to inject or received at the hospital or medical clinic.
O 3	Yes, within the past 12 months
O 2	Yes, but not in the past 12 months
O 1	No, never
□ -8	I prefer not to answer
 -9	I don't know
DRU03	
Have you	u ever used or tried any other substance or illegal drug to get high without asking or knowing
what it v	was?
Оз	Yes, within the past 12 months
O 2	Yes, but not in the past 12 months
O 1	No, never
-8	I prefer not to answer
9- 🔲	I don't know

DRU04

New Psychoactive Substances (NPS) are substances formulated to contain chemicals that mimic the effects of controlled substances, and are often referred to as alternatives to controlled substances. For example,

NPS may include: "legal highs", "herbal highs", synthetic cannabinoids, "research chemicals", fentanyl analogues (i.e., fentanyl-like substances), cathinone analogues (i.e., cathinone-like substances).

NPS do not include: cannabis, cocaine, speed, ecstasy, heroin.

According to this definition, have you ever used an NPS to get high?		
O 3	Yes, within the past 12 months	
O 2	Yes, but not in the past 12 months	
O_1	No, never	
□ -8	I prefer not to answer	
9- 🔲	I don't know	

DRU05

In the **past 12 months**, have you used or tried any other substance or illegal drug for the experience or to get high **apart from those mentioned so far**?

Exclude those prescribed by a health care professional and any drugs already mentioned in this survey.

Yes (specify):
No
I prefer not to answer
I don't know

Page Show if Past12Month user drugs OPI SED STI CAN

DHA

The following questions are about experiences you may have had as a result of your drug use, **exclude** cannabis and alcohol use.

Press the right arrow to continue.

DHA01

During the past 12 months, has your drug use had a harmful effect [[School Resources.]] Please do no	t
include alcohol or cannabis.	

1.	on your friendships or social life? *
2.	on your physical health? *
3.	on your home life, family or relationship? *
4.	on your work, studies, or employment opportunities? *
5.	on your financial position? *
Levels ma	rked with * are randomized
O_1	Yes
O 2	No
□ -8	I prefer not to answer
_ o	I don't know
5	
DHA02	
During th	ne past 12 months , have you had:
Logal pr	oblems because of your drug use? [[School Resources.]]
Legai pro	oblems because of your drug user [[School Resources.]]
	W
O_1	Yes
O_2	No
-8	I prefer not to answer
- 9	I don't know
DHA03	
During th	ne past 12 months , have you had:
Housing	problems because of your drug use? [[School Resources.]]
	problems because of your and about [[someon resourcest]]
O 1	Yes
=	No
O 2	INU
□ -8	I must a mark to a manual
	I prefer not to answer
_ o	I prefer not to answer I don't know

DHA04

During the **past 12 months**, have you had:

Difficulty learning things because of your drug use? [[School Resources.]]		
O 1	Yes	
O 2	No	
	I prefer not to answer	
-9	I don't know	
KAB02		
Have yo	u heard of naloxone (e.g. Narcan [®])?	
O_1	Yes	
O_2	No	
□ -8	I prefer not to answer	
9-9	I don't know	
KAB03	Show if KAB02 Heard of naxalone	
In the p	ast 12 months, have you obtained a naloxone kit?	
O_1	Yes	
O_2	No	
-8	I prefer not to answer	
9- 🗖	I don't know	
KAB04	Show if KAB03 Obtained Naxalone kit	
What is	the main reason you obtained a naloxone kit?	
O_1	In case you need it for yourself	
O_2	In case someone in your family needs it	
O 3	In case a friend needs it	
O 4	In case someone on the street or at a venue needs it	
O 5	Other (specify):	
□ -8	I prefer not to answer	
_ -9	I don't know	

Section

ТОВ

The following set of questions is about smoking tobacco.		
Press the	e right arrow to continue.	
TOB01		
Which o	of the following best applies to you?	
O_1	I smoke cigarettes (including hand-rolled) every day	
O 2	I smoke cigarettes (including hand-rolled), but not every day	
О 3	I do not smoke cigarettes at all, but I do smoke tobacco of some kind (e.g. Pipe, cigar or shisha)	
O 4	I have stopped smoking completely in the last year	
O 5	I stopped smoking completely more than a year ago	
O 6	I have never been a smoker	
-8	I prefer not to answer	
-9	I don't know	
VAP01		
During t	the past 30 days, how often did you use an e-cigarette or a vaping device?	
O_1	Daily or almost daily	
O 2	Less than daily, but at least once a week	
O 3	Less than weekly, but at least once in the past 30 days	
O 4	Not in the past 30 days, but from time to time	
O 5	Never	
□ -8	I prefer not to answer	
- 9	I don't know	
VAP02	Show if VAP01 Vape last 30 days	
On how	many of the past 30 days did you vape	
	n: 0, Maximum: 30	
	an e-liquid with nicotine?	
	cannabis / marijuana?	
	just flavoring (without nicotine and/or cannabis)?	
□ -8	I prefer not to answer	
 -9	I don't know	

VAP03	Show if VAP01 Vape user	
What is	(was) your primary reason for using an e-cigarette or vaping device?	
O_1	To quit smoking	
O_2	To cut down on smoking	
O_3	To use when I cannot or am not allowed to smoke	
O 4	To avoid returning to smoking	
O 5	Because I enjoy(ed) it	
O_6	Curiosity, just wanted to try them	
O 7	Some other reason, please specify	
□ -8	I prefer not to answer	
9- 🗖	I don't know	
STU		
We wou	ald now like to ask you a few questions to better understand your student life.	
Press the	e right arrow to continue.	
STU01		
Which fi	ield of study best represents the area in which you are currently enrolled?	
O 1	Arts/Humanities/Social Science (Show if Is NOT School 19)	
O ₁	Science/Technology (Show if Is NOT School 19)	
O 3	Engineering (Show if Is NOT School 19)	
O 5	Business/Commerce (Show if Is NOT School 19)	
O 6	Medicine (Show if Is NOT School 19)	
O 7	Health Science (Show if Is NOT School 19)	
O 8	Law (Show if Is NOT School 19)	
O 8	Education (Show if Is NOT School 19)	
O 11	Health (Practical Nursing, RCW, Dental, Physio Assist, Paramedicine, etc.) (Show	if Is
O II	School 19)	1) 10
O 12	Industrial and Technical Trades (Automotive, Welding, ESET, and Wind Turbine etc.) if Is School 19)	(Sho
O 13	Applied Science (Engineering Tech, EAST, Bioscience Tech, Computer Studies etc.) if Is School 19)	(Sho
O 14	Culinary Arts (Show if Is School 19)	
O 15	Business (Accounting, Marketing, Tourism etc.) (Show if Is School 19)	
O 16	Sport and Leisure (Show if Is School 19)	
O 17	Community (Child & Youth, ECCE, Human Services, etc.) (Show if Is School 19)	
O 18	Arts (Videogame, Graphic Design, Journalism, SOPA) (Show if Is School 19)	
O 19	APA (Police, Fire, Corrections, etc.) (Show if Is School 19)	
O 20	Marine (Diving, Power Engineering) (Show if Is School 19)	
O 10	Other, please specify	

□ -8

9- 🔲

I prefer not to answer

I don't know

STU02	
Where o	do you currently live?
O_1	Campus residence
O_2	Fraternity or sorority house
O 3	Other college/university housing
O 4	Parent/guardian's home
O 5	Other off-campus housing
O_6	Other, please specify
□ -8	I prefer not to answer
□ -9	I don't know
STU03	
What is	your current year of study?
O_1	1st year
O_2	2nd year
O 3	3rd year
O 4	4th year
O 5	5th year or more
O 6	Not seeking a degree
O 7	Other, please specify
-8	I prefer not to answer
9- 🗖	I don't know
STU04	
Are you	currently enrolled and considered as a full-time or part-time student in university or college?
O 1	Full-time
O 2	Part-time

I prefer not to answer

I don't know

□ -8

9- 🔲

DEMQ02

☐ -9 I don't know

-	
What ter	rm best describes your sexual orientation?
O_1	Straight/Heterosexual
O_2	Asexual
O_3	Bisexual
O 4	Gay
O 5	Lesbian
O 6	Pansexual
O 7	Queer
8 C	Questioning
O 9	Same Gender Loving
O 10	Another identity (please specify)
□ -8	I prefer not to answer
s 9	I don't know
DEMQ3	
	your height?
	Less than 4' 10" or 147 cm
O 1	4' 10" or 147 cm
O 2	4' 11" or 150 cm
O 3	
O 4	5' 0" or 152 cm
O 5	5' 1" or 155 cm
O 6	5' 2" or 157 cm
O 7	5' 3" or 160 cm
O 8	5' 4" or 163 cm
O 9	5' 5" or 165 cm
O 10	5' 6" or 168 cm
O 11	5' 7" or 170 cm
O 12	5' 8" or 173 cm
O 13	5' 9" or 175 cm
O 14	5' 10" or 178 cm
O_{15}	5' 11" or 180 cm
O_{16}	6' 0" or 183 cm
O 17	6' 1" or 185 cm
O_{18}	6' 2" or 188 cm
O 19	6' 3" or 190 cm
O 20	6' 4" or 193 cm
O 21	6' 5" or 195 cm
O 22	6' 6" or 198 cm
O 23	6' 7" or 200 cm
O 24	More than 6' 7" or 200 cm
□ -8	I prefer not to answer

DEMQ4

What is your weight?

- O_1 Less than 95 lb or 43 kg
- O_2 95 lb or 43 kg
- O_3 100 lb or 45 kg
- 105 lb or 48 kg O_4
- 110 lb or 50 kg O 5
- 115 lb or 52 kg O_6
- 120 lb or 54 kg O 7
- 8 C 125 lb or 57 kg
- O 9 130 lb or 59 kg
- 135 lb or 61 kg O 10
- O 11 140 lb or 64 kg
- O 12 145 lb or 66 kg
- O 13 150 lb or 68 kg
- 155 lb or 70 kg O 14
- 160 lb or 73 kg O_{15}
- 165 lb or 75 kg O 16
- 170 lb or 77 kg O 17
- 175 lb or 80 kg O 18
- 180 lb or 82 kg O 19
- 185 lb or 84 kg O 20
- O 21 190 lb or 86 kg
- O 22 195 lb or 89 kg
- 200 lb or 91 kg O 23
- O 24 205 lb or 93 kg
- 210 lb or 96 kg O 25
- 215 lb or 98 kg O 26
- 220 lb or 100 kg O 27
- 225 lb or 102 kg O 28
- 230 lb or 105 kg O 29
- 235 lb or 107 kg O 30
- 240 lb or 109 kg O_{31}
- O 32 245 lb or 112 kg
- O 33 250 lb or 114 kg
- O 34 255 lb or 116 kg
- 260 lb or 118 kg O 35
- 265 lb or 121 kg
- O 36 270 lb or 123 kg O 37
- 275 lb or 125 kg O 38
- 280 lb or 128 kg O 39
- 285 lb or 130 kg O 40
- O 41 290 lb or 132 kg
- 295 lb or 134 kg O 42

O 43	300 lb or 137 kg
O 44	More than 300 lb or 137 kg
□ -8	I prefer not to answer
-9	I don't know
DEMO5	
Are you	an international student?
O_1	Yes
O_2	No
□ -8	I prefer not to answer
-9	I don't know
end	
You have	e now completed this survey.
Thank yo	ou for your participation in this study!
	nendation for alcohol consumption to limit health and safety risks, can be found here
	ccsa.ca/sites/default/files/2019-04/2012-Canada-Low-Risk-Alcohol-Drinking-Guidelines-
Brochur	e-en.pdf)
The follo	owing resources are available to you at your school:
[[School	Resources.]]
(http://	www.advanis.net)

Status Code: -1

Appendix 3: 2019/2020 CPADS- School specific Questions University of Manitoba

Append	3. 2013/2020 CI ADS School specific Questions offiversity of Manitoba
UMAN1	Show if Is UManitoba
Please in	dicate which of the following University of Manitoba services you are aware of that support
harm red	duction for substance use.
Select all	that apply
	Naloxone Program *
□ 2	Addictions Foundation of Manitoba Counsellor *
□ 3	Health and Wellness Educator *
□ 4	University Health Service *
□ 5	Student Support Case Management *
□ 6	Healthy U *
 7	Student Counselling Centre *
□ 8	AA group on campus *
9	Other, please specify:
□ 10	None of these (Exclusive)
□ -8	I prefer not to answer
9- 🔲	I don't know
Levels ma	rked with * are randomized
UMAN2	Show if Is UManitoba
Please in	dicate which of the following services you would like to see at the University of Manitoba to
support	harm reduction for substance use.
Select all	that apply
	Addictions counselling *
	Health promotion and campaigns *
□ 3	Substance use treatment groups *
4	A safer use space (supervised room where intoxicated students could be monitored) *
□ 5	Harm reduction room (sterile needles, sterile water, etc.) *
	Other, please specify:

Levels marked with * are randomized

☐ -9 I don't know

☐ 7☐ None of these (Exclusive)☐ -8I prefer not to answer

¹ Canada's Low-Risk Alcohol Drinking Guidelines. Canadian Centre on Substance use and Additions. Available: https://ccsa.ca/canadas-low-risk-alcohol-drinking-guidelines-brochure (accessed 2020 Jun. 03)

[&]quot;Alcohol Consumption Measures. National Institute on Alcohol abuse and Alcoholism. Available: https://pubs.niaaa.nih.gov/publications/AssessingAlcohol/measures.htm (Accessed 2020 Jun. 03)

White et. al. Students lack knowledge of standard drink volumes: Implications for definitions of risk drinking based on survey data. Available: https://onlinelibrary.wiley.com/doi/abs/10.1097/01.ALC.0000158836.77407. E6?sid=nlm%3Apubmed (first published May 3, 2006).

iv Canadian Centre on Substance Abuse: Report on caffeinated alcoholic beverages, May 2012.

Available: http://www.ccdus.ca/Resource%20Library/CCSA-caffeinated-alcoholic-beverages-news-release-2012 en.pdf (accessed 2020 Jun. 6)

^{*} Patrick M., Terry – McElrath Y., Kloska D., Shulenberg J. High-intensity drinking among young adults in the United States: Prevalence, frequency and development change. Aug 4, 2016. Available: https://onlinelibrary.wiley.com/doi/full/10.1111/acer.13164 (accessed 2020 Jun. 3).

vi Seidl, Stephan & Jensen, Uwe & Alt, Andreas. (2000). The calculation of blood ethanol concentrations in males and females. International journal of legal medicine. 114. 71-7. 10.1007/s004140000154.

vii Kahler C.W., Strong D.R. Read J.P. (2006). Towards efficient and comprehensive measurement of the alcohol problems continuum in college students: The Brief Young Adult Alcohol Consequences Questionnaire. Alcoholism: Clinical and Experimental Research, Vol. 29(7), pp. 1180-1189. Available: https://www.scopus.com/record/display.uri?eid=2-s2.0-23044512529&origin=inward&txGid=e99aaf%200f1fc747 34116347%208c09fffc5e

viii Impaired Driving in Canada, 2015. Statistics Canada. Available: https://www150.statcan.gc.ca/n1/pub/85-002-x/2016001/article/14679-eng.htm (accessed 2020 Jun.03)

^{ix} House of Commons. Standing committee on health. Monday April 30, 2018. Available: https://www.ourcommons.ca/DocumentViewer/en/42-1/HESA/meeting-103/evidence

^{*} National Alcohol Strategy Advisory Committee. 2015. *Social reference prices for alcohol: A tool for Canadian governments to promote a culture of moderation.* Ottawa: Canadian Centre on Substance Abuse. Available: https://www.ccsa.ca/sites/default/files/2019-04/CCSA-Social-Reference-Prices-for-Alcohol-Canada-Report-2015-en.pdf