

5.4.2 Alcohol and other drug treatment

- In 2013, 1% (95%CI: 0.6%, 2.2%) of Ontario students reported that they had received either alcohol and/or drug treatment during the 12 months before the survey.
- The estimate for Ottawa students is unreliable and cannot be reported.

5.4.3 Drinking and driving

- In 2013, 4% (95%CI: 3%, 5%) of 10th through 12th graders with a G-Class driver's licence in Ontario reported they had driven within an hour of consuming two or more alcoholic drinks at least once during the past year. This provincial estimate has declined significantly from 12% (95%CI: 10%, 14%) in 2009. The Ottawa estimate is too unreliable to report for 2013.

5.4.4 Being a passenger with a driver who was drinking alcohol

- **Overall:** In 2013, 16% (95%CI: 13%, 19%) of Ottawa students reported they had ridden in a vehicle with an intoxicated driver at least once during the previous 12 months.
- **Grades:** Students in grades 9 to 12 were more likely than students in grades 7 to 8 to report having been a passenger with an intoxicated driver (19% (95%CI: 15%, 23%) vs. 10%* (95%CI: 7%, 13%)).
- There were no significant differences between Ottawa and the rest of Ontario, between boys and girls or between survey years.

5.5 Alcohol Availability

- **Overall:** In 2013, 67% (95%CI: 55%, 79%) of students reported that it would be easy ("fairly easy" or "very easy") to get alcohol if they wanted some.
- **Grades:** Older students (grades 9 to 12) were more likely than younger students (grades 7 to 8) to report that it would be easy to get alcohol (78% (95%CI: 61%, 96%) vs. 34% (95%CI: 23%, 44%)).
- There were no significant differences between Ottawa and the rest of Ontario, between boys and girls, or between survey years.

5.6 Classes or Presentations on Alcohol

- **Overall:** Seventy-four percent (95%CI: 62%, 85%) of students reported attending at least one class or presentation on alcohol at school since September.
- **Ottawa vs. rest of Ontario:** A higher proportion of students in Ottawa reported attending a class or presentation on alcohol (74%) than students in the rest of Ontario (61% (95%CI: 57%, 65%)).
- **Survey years:** The proportion attending a class or presentation on alcohol was higher 2013 (74%) than in 2009 (60% (95%CI: 50%, 70%)).
- There were no significant differences between boys and girls, or between survey years

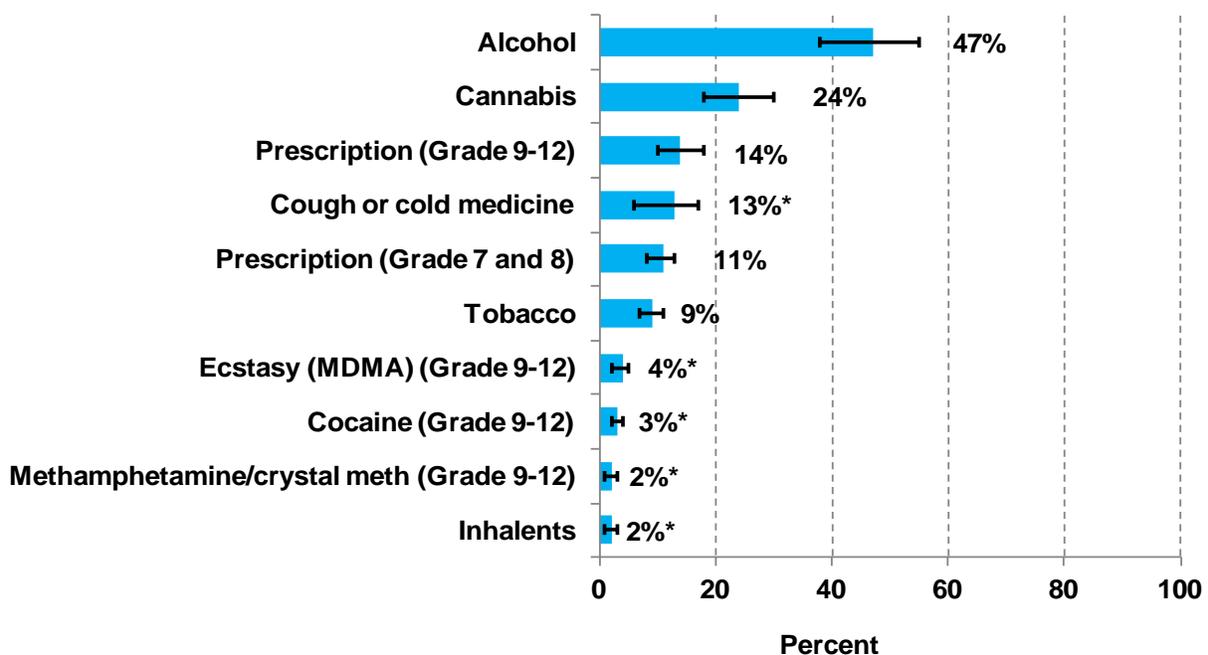
* Interpret with caution due to high sampling variability.

6.1 Drug Use

Students were asked if they had used various substances at least once in the 12 months before the survey (Figure 22).

- Overall, cannabis (24%) was the most commonly used drug after alcohol (47%). Fourteen percent (95% CI: 11%, 17%) of Ottawa students (14%) reported non-medical use of prescription drugs and thirteen percent* (95%CI: 9%, 20%) reported using over-the-counter cough/cold medication to get high at least once in the past year.
- Among grade 9 to 12 students, 4%* (95%CI: 3%, 6%) reported using ecstasy/MDMA, 3%* (95%CI: 2%, 4%) reported using cocaine and 2%* (95%CI: 1%, 3%) reported using methamphetamine/crystal meth.
- The prevalence of use of other drugs (salvia divinorum, mushrooms or mescaline, LSD, crack, heroin, jimson weed, ketamine, methoxetamine, BZP pills, mephedrone / bath salts) was too unreliable to report due to small numbers reported. In the rest of Ontario, use of each of these drugs was reported by less than 4% of students.

Figure 22. Ottawa students who reported drug use at least once in the past year by drug, 2013



Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.

* = Interpret with caution – high sampling variability. Horizontal bars represent 95% confidence intervals.

* Interpret with caution due to high sampling variability.

6.1.1 Use of any illicit drug, excluding cannabis and prescription or over-the-counter drugs

Data on students who reported having used at least one drug other than cannabis and prescription drugs that was asked about in the 2013 survey are presented herein. Cannabis and prescription drugs are discussed separately.

The estimated prevalence of use of an illicit drug other than cannabis or prescription drugs in grade 7 and 8 was too unreliable to report.

All grade 9 to 12 students were asked about the use of LSD, mushrooms or mescaline, cocaine, crack, methamphetamine (including crystal meth), heroin and ecstasy:

- **Overall:** Nine percent (95%CI: 7%, 13%) of grade 9 to 12 students reported using any of the above substances at least once in the past year.
- **Mental health visit:** Seventeen percent* (95%CI: 9%, 14%) of students who had at least one visit with a mental health professional in the past 12 months reported using any of the substances compared to 7%* (95%CI: 4%, 10%) of students who had not seen a mental health professional.
- There were no differences between Ottawa and the rest of Ontario, between boys and girls or between survey years.

When the use of solvents, salvia divinorum, jimson weed, ketamine, methoxetamine, BZP pills and mephedrone were considered along with the use of LSD, mushrooms or mescaline, cocaine, crack, methamphetamine (including crystal meth), heroin and ecstasy, 11%* (95%CI: 7%, 17%) of grades 9 to 12 students reported using any of these drugs in the past 12 months.

* Interpret with caution due to high sampling variability.

6.2 Cannabis Use

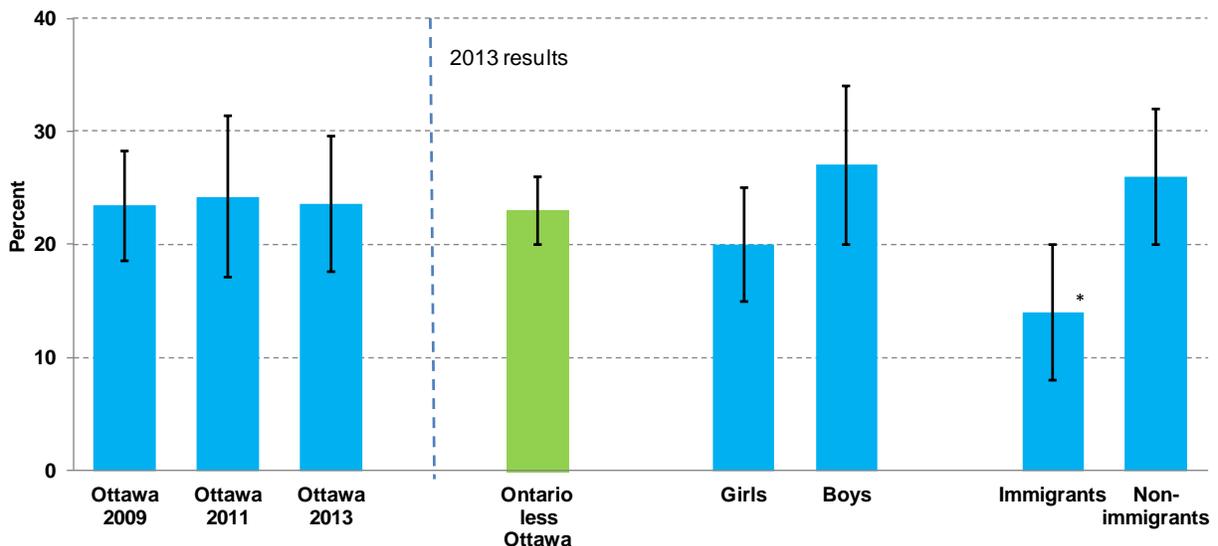
Cannabis smoke contains more tar and more of some cancer-causing chemicals than tobacco smoke. Cannabis causes difficulty in concentration, making it hard for youth to learn new things and to remember what they already know. Regular and long-term use of cannabis affects motivation.³⁹ Additionally, early cannabis use increases the risk of psychosis-related problems and schizophrenia; young brains are more susceptible to the effects of cannabis because they are still developing.⁴⁰

Cannabis use refers to any type of use of cannabis (also known as marijuana, “weed”, “grass”, “pot”, hashish, “hash”, hash oil) in the 12 months before the survey (Figure 23).

- **Overall:** In 2013, 24% (95%CI: 18%, 30%) of Ottawa students had used cannabis at least once in the past 12 months.
- **Ottawa vs. rest of Ontario:** Cannabis use in Ottawa (24%) was similar to the rest of Ontario at 23% (95%CI: 20%, 26%).
- **Immigration status:** Immigrant students were less likely to report cannabis use than non-immigrants (14%* (95%CI: 8%, 22%) vs. 26% (95%CI: 20%, 33%).
- There were no significant differences between boys and girls or between survey years.

Frequency: Fourteen percent* (95%CI: 10%, 20%) of Ottawa students reported having used cannabis in the past 4 weeks. Eighteen percent* (95%CI: 11%, 27%) of Ottawa students reported using cannabis and alcohol on the same occasion at least once in the past 12 months. Nine percent* (95%CI: 6%, 14%) of Ottawa students reported trying cannabis for the first time in the past 12 months.

Figure 23. Ottawa students in 2013 who reported using cannabis in the past year compared to 2009, 2011, the rest of Ontario and by sex and immigration status

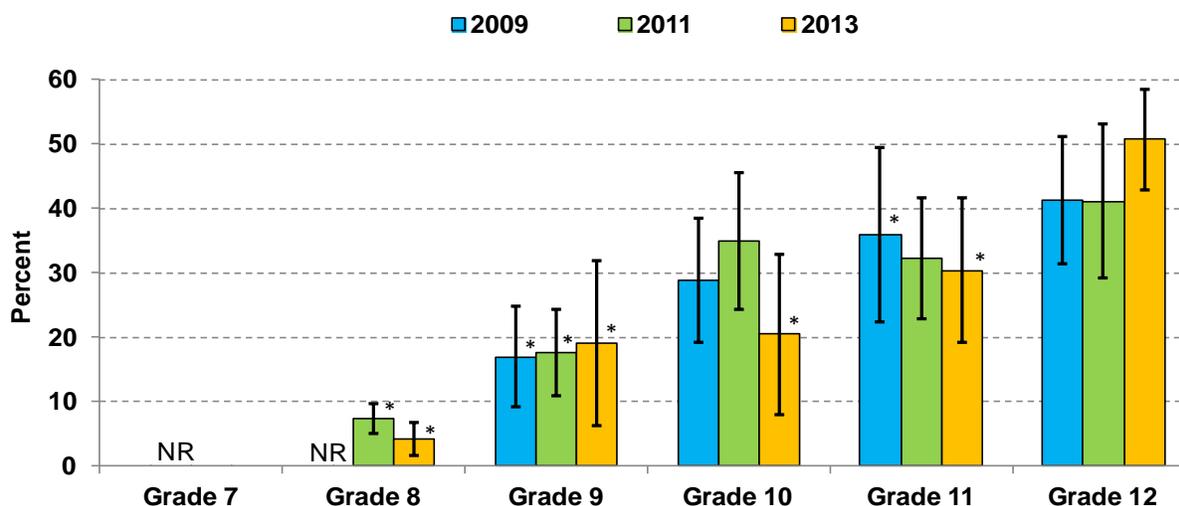


Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.
 * = Interpret with caution – high sampling variability. Horizontal bars represent 95% confidence intervals.

* Interpret with caution due to high sampling variability.

- **Grade of initiation:** About 4%* (95%CI: 2%, 7%) of students reported having first used cannabis by grade 7.
- **Cannabis use by grade:** The proportion of students who report using cannabis at least once during the 12 months before the survey increases by grade, from 4%* (95% CI: 2%, 5%) in grade 8 to 51% (95%CI: 43%, 59%) in grade 12 (Figure 24). Thirty-two percent (95% CI: 24%, 41%) of grade 9 to 12 students report using cannabis at least once during the 12 months before the survey.

Figure 24. Ottawa students using cannabis at least once in the past year by grade and survey years



Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.
 * = Interpret with caution – high sampling variability. NR – Not reportable; sampling variability greater than 33.3%

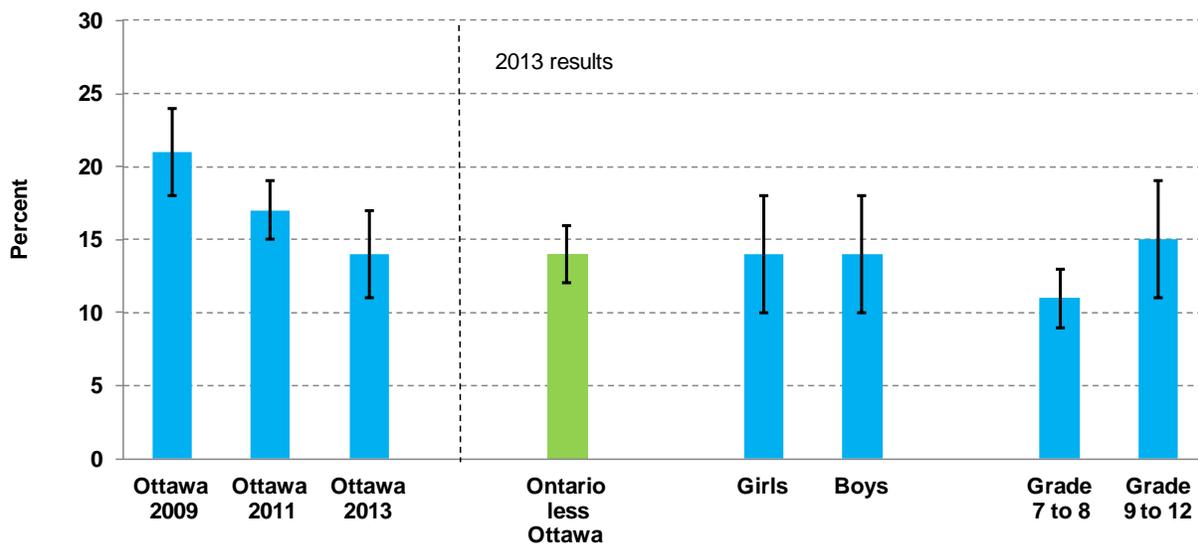
* Interpret with caution due to high sampling variability.

6.3 Non-Medical Prescription Drug Use

Students were asked about their non-medical use (without a doctor’s prescription or without a doctor telling you to take them) of prescription drugs including opioid pain relievers, ADHD medication, modafinil or tranquilizers/sedatives once or more often during the past 12 months (Figure 25).

- **Overall:** In 2013, 14% (95%CI: 11%, 17%) of students reported non-medical use of prescription drugs.
- **Grades:** Grade 7 to 8 students (11% (95%CI: 9%, 13%)) were less likely to report using at least one prescription drug non-medically in the past 12 months than students in grade 9 to 12 students (15% (11%, 19%)).
- **Mental health visit:** Students who reported using a prescription drug non-medically in the past year were more likely than those who did not report such use to also report at least one visit to a mental health professional in the past 12 months (26%* (95%CI: 16%, 39%) vs. 9% (95%CI: 8%, 12%)).
- **Survey years:** From 2009 to 2013, there was a significant decrease in the non-medical use of prescription drugs. Ottawa students in 2013 (14%) were less likely to report non-medical use of prescription drugs than students in 2011 (17% (95%CI: 15%, 18%)) and 2009 (21% (95%CI: 18%, 25%)). A similar decrease was seen provincially.
- There were no significant differences between Ottawa and the rest of Ontario or between boys and girls.

Figure 25. Ottawa students in 2013 who reported non-medical prescription drug use at least once in the past year compared to 2009, 2011, the rest of Ontario and by sex and grade



Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.. Horizontal bars represent 95% confidence intervals.

* Interpret with caution due to high sampling variability.

6.3.1 Non-medical use of prescription opioid pain relievers

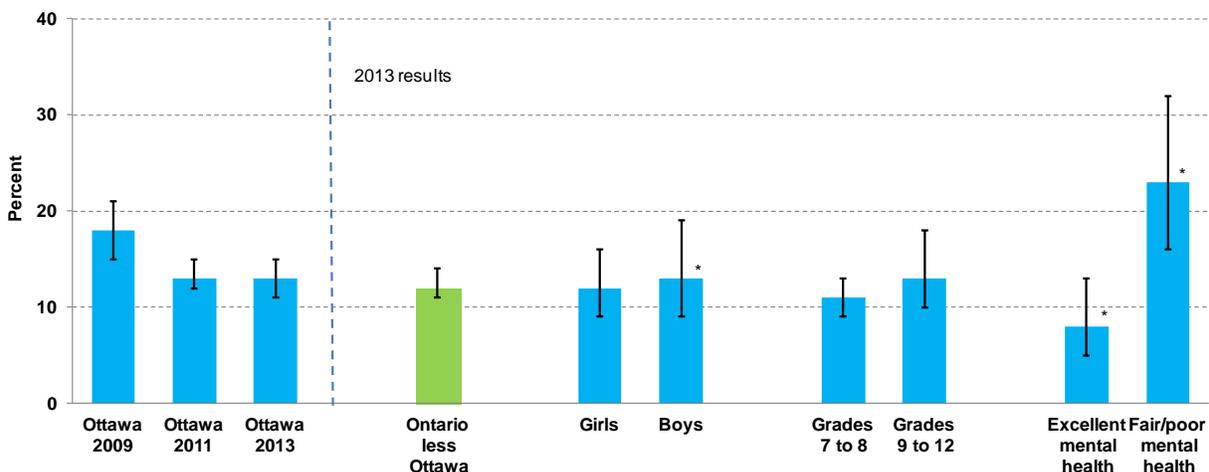
OxyContin is a brand name for a highly addictive prescription painkiller containing the opioid oxycodone. It can deliver an initial rush of euphoria, much like heroin.^{41,42} Effective March 1, 2012, OxyContin was replaced in Canada by OxyNeo, an alternative slow release formulation of the opioid oxycodone. This new formulation is intended to be more tamper resistant and so more difficult to crush and abuse.⁴³

- Overall, 2%* (95%CI: 1%, 4%) of students reported using OxyContin or OxyNeo non-medically at least once in the past 12 months.

Students were asked about non-medical use of at least one of the following opioid pain relievers during the past 12 months: OxyContin, OxyNeo, Tylenol #3, codeine, Percocet, Percodan, and Demerol (Figure 26).

- **Overall:** Thirteen percent (95%CI: 11%, 15%) of students reported using opioid pain relievers non-medically at least once in the past 12 months.
- **Mental health status:** Eight percent* (95%CI: 5%, 13%) of students with excellent mental health reported using an opioid pain medication non-medically over the past 12 months compared to 23%* (95%CI: 16%, 32%) of students with fair or poor mental.
- **Survey years:** Students in 2013 and 2011 were less likely to report non-medical use of prescription opioids than students in 2009 (13% (95% CI: 12%, 15%) in 2013 and 13% (95% CI: 12%, 15%) in 2011 vs. 18% (95% CI: 15%, 21%) in 2009). A similar pattern was seen provincially.
- There were no significant differences between Ottawa and the rest of Ontario, boys and girls or between grades 7 and 8 compared to grades 9 to 12.
- **Source of opioid:** Of the students who reported using opioid pain relievers non-medically in the past 12 months, 66% (95%CI: 51%, 78%) reported obtaining the opioids from a parent, sibling or other person living with them.

Figure 26. Ottawa students in 2013 who reported using prescription pain medication non-medically in the past year compared to 2009, 2011, the rest of Ontario and by grade, sex and self-reported mental health status



Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.
* = Interpret with caution – high sampling variability. Horizontal bars represent 95% confidence intervals.

* Interpret with caution due to high sampling variability.

6.3.2 Non-medical use of sedatives or tranquilizers

Students were asked about their non-medical use of sedatives or tranquilizers such as Valium, Ativan, or Xanax. These medications are typically prescribed to help people sleep, calm them down, or relax their muscles.

- About 3% (95%CI: 3%, 5%) of Ottawa grade 9 to 12 students reported having used sedatives or tranquilizers non-medically in the past 12 months.

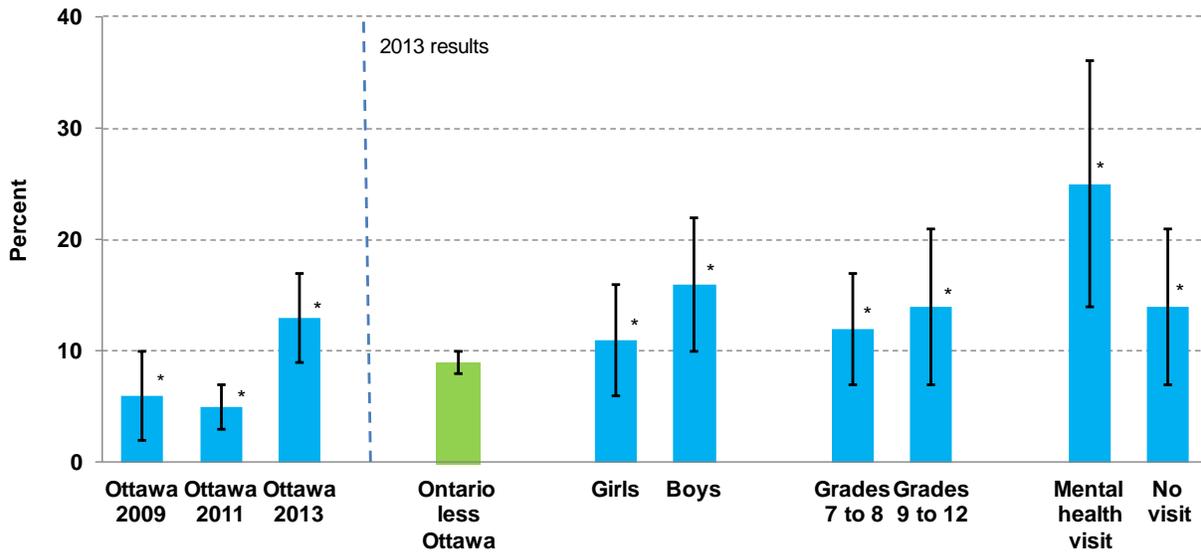
6.3.3 Non-medical use of over-the-counter (OTC) cough/cold medicine

Students were asked about their use of OTC cough or cold medications containing dextromethorphan (DXM), such as Robitussin DM or Benlyn DM, to get high (Figure 27).

- **Overall:** Thirteen percent* (95%CI: 9%, 20%) of students reported using OTC cough/cold medication to get high at least once in the past year.
- **Ottawa vs. rest of Ontario:** Ottawa students were more likely to report using OTC cough/cold medication to get high than students in the rest of Ontario (13%* (95%CI: 9%, 20%) vs. 9% (95%CI: 8%, 11%).
- **Boys vs. girls:** Boys were more likely to report using OTC cough/cold medication to get high compared to girls (16%* (95%CI: 10%, 24%) vs. 11%* (95%CI: 6%, 18%).
- **Mental health visit:** Students who reported having had at least one visit to a mental health professional in the past 12 months were more likely to report using OTC cough/cold medication to get high compared to students who had not had any visits with a mental health professional (25%* (95%CI: 14%, 40%) vs. 14%* (95%CI: 7%, 26%).
- **Survey years:** From 2009 to 2013, there was a significant increase in the use of OTC cough/cold medication to get high at least once in the past year. Ottawa students in 2013 (13%) were more likely to report using OTC cough/cold medication to get high than students in 2011(5% (95%CI: 3%, 9%)) and 2009 (6% (95%CI: 2%, 10%)).
- There were no significant differences between students in grades 7 and 8 compared to grades 9 to 12.

* Interpret with caution due to high sampling variability.

Figure 27. Ottawa students in 2013 who reported using cough or cold medication to get high in the past year compared to 2009, 2011, the rest of Ontario and by grade, sex and encounters with a mental health professional in the past year



Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.
 * = Interpret with caution – high sampling variability. Horizontal bars represent 95% confidence intervals.

6.4 Drug Use Problems

The CRAFFT screener is a six-question behavioural screening tool for use with youth under the age of 21, which tests for the presence of a potential drug use problem that may require treatment.⁴⁴ The cannabis Severity of Dependence Scale⁴⁵ is a five-item scale that measures severity of cannabis dependence.

- In Ottawa, 21% (95%CI: 15%, 28%) of grade 9 to 12 students reported symptoms of a drug abuse problem, as measured by the CRAFFT screener.
- Though not statistically significant, boys tended to be more likely to report symptoms of a drug abuse problem compared to girls (26% (95%CI: 17%, 37%) vs. 16%* (95%CI: 10%, 25%).
- Based on the cannabis Severity of Dependence Scale, 4%* (95%CI: 2%, 7%) of Ottawa grade 9 to 12 students may have a cannabis dependence problem.

6.4.1 Alcohol and other treatment

- In 2013, 1% (95%CI: 0.6%, 2.2%) of Ontario students reported that they had received either alcohol and/or drug treatment during the 12 months before the survey.
- The estimate for Ottawa students is unreliable and cannot be reported.

6.4.2 Intoxication at school

- **Overall:** Thirteen percent* (95%CI: 9%, 19%) of Ottawa students reported having been intoxicated at school at least once in the past 12 months.
- **Boys vs. girls:** Though not statistically significant, boys tended to be more likely to report having been intoxicated at school than girls (16%* (95%CI: 11%, 24%) vs. (10%* (95%CI: 5%, 16%)).

* Interpret with caution due to high sampling variability.

- **Grades:** Students in grades 9 to 12 were significantly more likely to report having been intoxicated at school in the last 12 months (16%* (95%CI: 10%, 25%)) compared to students in grade 7 and 8 (4%* (95%CI: 2%, 8%)).

6.4.3 Drug use and driving

- **Passenger:** Sixteen percent (95%CI: 12%, 20%) of Ottawa students reported having been a passenger in a car driven by someone had been using drugs at least once in the past year.
 - **Grades:** Grade 7 and 8 students were less likely to have been a passenger in a car with a driver who had been using drugs than students in grades 9 to 12 (3%* (95%CI: 2%, 5%) vs. 21% (95%CI: 16%, 26%)).
 - **Language spoken at home:** Students who spoke only English at home were more likely to have reported being a passenger in a car driven by someone who had been using drugs compared to students who spoke a language other than English or French at home (19% (95%CI: 14%, 24%) vs. 10%* (95%CI: 6%, 16%)). There was no difference compared to students who spoke French at home.
- **Driver:** Students in grades 9 to 12 were asked if they had driven within 1 hour of using cannabis in the past 12 months. Among Ottawa students holding a G1 or higher license, 14%* (95%CI: 10%, 21%) reported having driven within an hour of using cannabis.
 - **Boys vs. girls:** Boys were more likely to report having driven within an hour of using cannabis compared to girls (21%* (95%CI: 13%, 33%) vs. 7%* (95%CI: 4%, 12%)).

6.4.4 Drug environment

Students were asked about drugs at their school and in their neighbourhood.

- **Big problem:** In Ottawa, 31% (95%CI: 26%, 37%) of students identified drugs to be a big problem at their school, 53% (95%CI: 47%, 60%) identified drugs to be a small problem and 16%* (95%CI: 11%, 22%) identified drugs to not be a problem.
 - **Ottawa vs. rest of Ontario:** Though not statistically significant, compared to the rest of Ontario, more Ottawa students tended to see drugs as a big problem at school (31% (95%CI: 26%, 37%) vs. 24% (95%CI: 21%, 28%)).
 - **Grades:** Ottawa grade 7 and 8 students were less likely to identify drug use as a big problem in their school compared to students in grades 9 to 12 (18% (95%CI: 13%, 24%) vs. 36% (95%CI: 28%, 44%)).
- **Sold to at school:** Nineteen percent (95%CI: 16%, 23%) of students reported that they have been offered, sold or given an illegal drug on school property in the last 12 months.
 - **Boys vs. girls:** Boys were more likely to report having been offered, sold or given an illegal drug at school compared to girls (23% (95%CI: 18%, 29%) vs. 15% (95%CI: 11%, 20%))
 - **Grades:** Grade 9 to 12 students were more likely to report having been offered, sold or given an illegal drug at school compared to grade 7 and 8 students (23% (95%CI: 19%, 28%) vs. 9%* (95%CI: 4%, 16%)).
- **Sold to at any location:** Twenty-seven percent (95%CI: 21%, 34%) of Ottawa students reported that someone had tried to sell them drugs at any location in the past 12 months.
 - **Grades:** Students in grades 9 to 12 were more likely to report having had someone try to sell them drugs compared to students in grades 7 and 8 (34% (95%CI: 25%, 44%) vs. 8%* (95%CI: 4%, 15%)).

* Interpret with caution due to high sampling variability.

- **Seen drug selling:** Twenty-four percent (95%CI: 19%, 29%) of students reported having seen someone selling drugs in their neighbourhood in the past 12 months and an additional 14% (95%CI: 11%, 17%) think that they have seen someone selling drugs.
- **Friend using drugs:** Fifty-two percent (95%CI: 44%, 60%) of students reported that at least one of their closest friends uses illegal drugs.
 - **Grades:** Students in grades 9 to 12 were more likely to have at least one close friend who uses illegal drugs compared to students in grades 7 and 8 (65% (95%CI: 53%, 76%) vs. 15%* (95%CI: 9%, 26%)).
 - **Immigration status:** Non-immigrants were more likely to have at least one friend who uses illegal drugs compared to students who were immigrants (55% (95%CI: 46%, 64%) vs. 40% (95%CI: 28%, 52%)).

6.5 Drug Availability

Students were asked how easy or difficult it would be to get various drugs if they wanted some. Students could choose from six responses: Probably impossible, very difficult, fairly difficult, fairly easy, very easy, and don't know. Students in all grade levels were asked about availability of cannabis and prescription pain relief pills, while only students in grades 9 to 12 were asked about availability of cocaine, ecstasy and LSD (Table 4).

- **Grades:** Students in grades 9 to 12 were more likely to perceive cannabis as fairly easy or very easy ("easy") to get than students in grades 7 to 8.
- **Immigration status:** Non-immigrants were more likely to report that cannabis would be easy to access than immigrant students (54% (95%CI: 46%, 62%) vs. 36% (95%CI: 27%, 47%)).
- **Ottawa vs. rest of Ontario:** Ottawa grade 9 to 12 students were more likely to report that it would be easy to get ecstasy than grade 9 to 12 students in the rest of Ontario (26%* (95%CI: 17%, 37%) vs. 13% (95%CI: 11%, 15%)).

Table 4. Ottawa students reporting that it would be fairly easy or very easy to get a drug, by grade, 2013.

Drug	Grade 7-8 (95% CI)	Grade 9-12 (95% CI)
Cannabis	14%* (8, 22)	63% (53, 73)
Prescription pain pills without a doctor's prescription	11%* (7, 19)	24% (17, 31)
Cocaine	-	21% (15, 28)
Ecstasy	-	26%* (17, 37)
LSD	-	13%* (9, 18)

Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.
* = Interpret with caution – high sampling variability. Figures in brackets '()' represent confidence intervals.

* Interpret with caution due to high sampling variability.

6.6 Classes or Presentations on Cannabis and Other Drugs

- 56% (95%CI: 48%, 63%) of Ottawa students reported having had at least one class on cannabis and 53% (95%CI: 46%, 61%) of Ottawa students reported having had at least one class on other drugs since September.
- There were no differences by grade level or between boys and girls.

6.7 Perception of Risk

Students were asked to consider how much people risk harming themselves, physically or in other ways, if they try various drugs. Students could choose from five responses: No risk, slight risk, medium risk, great risk, or don't know (Table 5).

- **Overall:** Trying marijuana was perceived by youth to be less risky than trying either cocaine or ecstasy.
- **Grades:** Grade 9 to 12 students were more likely to report no risk of harm from trying marijuana once or twice compared to grade 7 and 8 students (36% (95%CI: 31%, 41%) vs. 35% (95%CI: 27%, 45%)). Grade 7 and 8 students were more likely to report a great risk of harm with regular marijuana use compared to grade 9 to 12 students (63% (95%CI: 54%, 71%) vs. 39% (95%CI: 34%, 45%)).
- **Boys vs. girls:** Girls were more likely to report a great risk of harm with regular marijuana use compared to boys (56% (95%CI: 51%, 60%) vs. (35% (95%CI: 27%, 44%)).

Table 5. Perception of risk of drug use among Ottawa students, 2013.

Response option	Grades	(95% CI)
Great risk of harm from trying marijuana once or twice	7 to 12	14% (10, 19)
Great risk of harm from smoking marijuana regularly	7 to 12	45% (40, 45)
Great risk of harm from taking a prescription pain reliever pill that was not prescribed for them	7 to 12	45% (38, 52)
Great risk of harm from trying cocaine once or twice	9 to 12	44% (35, 54)
Great risk of harm from trying ecstasy/MDMA once or twice	9 to 12	35% (27, 45)

Data source: Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2013), Centre for Addiction and Mental Health.

6.8 What OPH Does

OPH works with school and community partners to provide a safe and supportive community that addresses substance misuse.

At school

- Works with all Ottawa elementary and high schools to provide curriculum support, education and resources based on substance misuse prevention and health curriculum and connects students with community resources.
- Delivers the *Healthy Transitions* program promoting positive mental health to grade 7 and 8 students, parents and teachers.
- Engages high school students in activities, such as the Why Drive High display which demonstrates the effects of marijuana use on driving.
- Is a member of the Substance Abuse and Youth in School Coalition (SAYS). This coalition provides students in Grades 7 through 12 substance misuse prevention and treatment programs including access to addiction counsellors in and out of school.

In the community

- Provides access to sterile harm reduction supplies, safe disposal of injection equipment, health information, testing (HIV, hepatitis B & C, STIs), vaccinations, first aid, pregnancy testing and emergency contraception, Peer Overdose Prevention Program (POPP) training and counselling through OPH's Site Needle & Syringe Program. Safe and confidential discussion is available with referral to health and social service agencies including drug-treatment agencies.
- Partners with YSB to offer a Youth Harm Reduction Drop-in Clinic.
- Collaborates with community partners to prevent harm and injuries as a result of substance misuse.

For more information, call the Ottawa Public Health Information Line at 613-580-6744.

6.9 Community Resources

- [Rideauwood Addiction and Family Services \(www.rideauwood.org\)](http://www.rideauwood.org) is a non-profit agency serving individuals and family members who are or have been affected by addictions, substance abuse, problem gambling or related mental health issues. Rideauwood counsellors provide free School Based Programs in Ottawa English language schools for grade 7 to 12, as well as after-school and evenings at the agency for students and parents. Contact your school or Rideauwood Intake: 613-724-4881.

For a list of local mental health and addiction services, visit Ottawa Public Health online at <http://ottawa.ca/en/residents/public-health/healthy-living/mental-health-and-addiction-services>

For more mental health and addiction resources, call 211 or visit www.cominfo-ottawa.org

7.4 Problem Gambling

Research indicates that adolescents have higher rates of problem gambling than adults; however, relatively few adolescents seek help for gambling problems. The OSDUHS assessed students for the existence of gambling problems using the *South Oaks Gambling Screen Revised for Adolescents* (SOGS-RA).⁵³ This six-question screening tool asked if betting had ever caused arguments with family/friends or problems at school or work; if students had ever gambled more than they had planned to; if anyone had ever informed them they had a gambling problem; if they had ever had an argument with family/friends about the money spent on gambling; if they had ever skipped or been absent from school or work due to gambling activities; and if they had ever borrowed or stolen money to cover gambling debts. Those who responded positively to two or more of the six questions were considered to have a possible gambling problem.

- As in 2011, in 2013 a very small proportion of Ottawa students were considered to have a gambling problem. Due to the small sample size, the estimate cannot be reported. The estimate for Ottawa students in 2009 was 2%* (95%CI: 1%, 4%).
- Only 1%* (95%CI: 0.6%, 3%) of students in Ontario (including Ottawa) had a possible gambling problem in 2013.

7.5 What OPH Does

OPH works with youth, school boards, parent groups and community partners to plan and support activities to reduce risk taking behaviours, such as problem gambling.

- Delivers the *Healthy Transitions* program to grade 7 and 8 students, parents, and teachers to enhance resiliency and mental health.
- Provides funding to Maison Fraternité and Rideauwood Addiction and Family Services for treatment programs and counselling in schools.
- Provides curriculum resources such as building skills in refusing risky behaviours and demystifying gambling addiction.
- Engages youth in high schools and community to respond to local health issues.

For more information, call the Ottawa Public Health Information Line at 613-580-6744.

7.6 Community Resources

- [YMCA Youth Gambling Awareness Program \(www.ymca.qta.org\)](http://www.ymca.qta.org) is a free service offering educational prevention programs designed to raise youth awareness of gambling, healthy/active living and making informed decisions for youth from age 8-24. The YMCA also provides workshops for parents and adults involved in young people's lives. For more information contact the youth outreach worker in Ottawa at 613-237-1320, ext. 5170.
- [The Problem Gambling Institute of Ontario \(www.problemgambling.ca\)](http://www.problemgambling.ca) has developed an online quiz called [Do You Need Help?](#), which is available on their website. ProblemGambling.ca (run by the Centre for Addiction and Mental Health (CAMH)) provides information about problem gambling for individuals concerned about their own, or someone else's gambling. The website also provides an online space for professionals and educators to exchange knowledge and resources about problem gambling.
- [Gamblers Anonymous \(www.gamblersanonymousottawa.org\)](http://www.gamblersanonymousottawa.org) is an all ages fellowship of thousands of men and women who have joined together to do something about their own gambling problem and to help other compulsive gamblers to do the same. During a 12-step program, similar to AA, participants share experiences and learn to accept gambling is an illness/addiction.

* Interpret with caution due to high sampling variability.

Community partners who provide addiction counselling to youth or specific populations in Ottawa:

- [Rideauwood Addiction and Family Services \(www.rideauwood.org\)](http://www.rideauwood.org) is a non-profit agency serving individuals and family members who are or have been affected by addictions, substance abuse, problem gambling or related mental health issues. Rideauwood counsellors provide free School Based Programs in Ottawa English language schools for grade 7 to 12, as well as after-school and evenings at the agency for students and family members. Contact your school or Rideauwood Intake: 613-724-4881.
- [Maison Fraternité \(www.maisonfraternite.ca\)](http://www.maisonfraternite.ca) provides services to the Francophone population of the province who have a substance use or addiction problem. It has services for adults, adolescents, specific programming for women, and counselling services for families. Call (613) 741-2523 for more information.
- [Youth Services Bureau of Ottawa \(www.ysb.on.ca\)](http://www.ysb.on.ca): In addition to their Youth Mental Health Walk-In Clinic, YSB provides youth and family counselling and crisis support. Check out their website for more information about their services or call their intake line at (613) 562-3004. Those in crisis can call their 24/7 Crisis Line for immediate assistance at (613) 260-2360 or 1-877-377-7775 (toll-free).
- [Wabano Centre for Aboriginal Health \(www.wabano.com\)](http://www.wabano.com) provides comprehensive and culturally relevant mental health services, including individual counselling, on-going groups, events and case management to individuals, couples and families. Specifically for youth aged 10 to 24 is “I Am Connected”, a holistic substance prevention program. Contact the “I Am Connected” Program Coordinator at (613) 748-0657 x241.
- [The Royal Ottawa Mental Health Centre \(www.theroyal.ca\)](http://www.theroyal.ca) The Royal’s Substance Use and Concurrent Disorders Program offers a variety of services to help patients and their families. Counseling, skill teaching and strategies for developing a healthy lifestyle are provided. Referrals may be made to longer-term care services in the community. Call (613) 722-6521 for more information.
- [Community Health and Resource Centres \(www.coalitionottawa.ca\)](http://www.coalitionottawa.ca) offer many programs and services for youth and families. Addiction and Mental Health Services, which include Confidential counselling services for individuals, couples, family and children/adolescents seeking help for addiction (including problem gambling), mental health issues, or concurrent disorders. Satellite offices in Ottawa East, South and West also available.

For information about other community resources, call 211 or visit www.cominfo-ottawa.org.

8. Methods

The Ottawa Student Drug Use and Health Report is meant to inform program development by professionals who work with youth. During the 2008/09, 2010/11 and 2012/13 school years, Ottawa Public Health (OPH) worked with the Centre for Addiction and Mental Health (CAMH) to study Ottawa students in grades 7 through 12, using the Ontario Student Drug Use and Health Survey (OSDUHS). This chapter describes the survey and analysis methods used for the project, dubbed the Public Health Monitoring of Risk Factors in Ontario-OSDUHS.

8.1 Background and Survey Methods

The OSDUHS began in 1977 and is the longest ongoing school survey in Canada. Every two years students in grades 7 through 12 who are enrolled in the public and Catholic school systems are randomly selected to participate in the survey. Both French and English school boards are a part of the sampling frame. In 2013, the final Ontario sample size was 10,398 students (a 63% response).

The Ottawa Student Drug Use and Health Report is based on data from a representative sample of Ottawa students that completed the survey in 2009 (n=1,200, a 69% response), 2011 (n=1,015, a 55% response), and 2013 (n=1,272, a 70% response).

The OSDUHS uses a two-stage (school, class) stratified (region and school type) cluster sample design and oversampling in public health units who want region-specific results. In Ottawa, OSDUHS surveyed students from 18 local schools across the four publicly funded school boards each survey year. Active parental consent was sought for the students' participation. The self-administered, anonymous survey takes approximately 30 minutes to complete during one class. For a detailed description of the OSDUHS, please visit: <http://www.camh.net/Research/osdus.html>.

8.2 Limitations

Because the survey was conducted in major school systems, it excluded some groups, such as street youth, school non-completers, private school students and those living on First Nations reserves, military bases, or in the far Northern regions of Ontario. Thus, the results may not be generalizable to these groups. In addition, self-reporting may result in under- or over-reporting on some questions due to recall bias or social desirability bias (for example, questions about students' weight or drug use).

8.3 Data Analysis

Data were analyzed using IBM SPSS Statistics 22.0 Complex samples and Stata version 13. For 2008/09, the analysis was based on a design of 19 strata, 181 primary sampling units or schools and 9,112 students (including 1,200 from Ottawa). For 2010/11, the analysis was based on a design of 15 strata, 181 primary sampling units or schools and 9,228 students (including 1,015 from Ottawa). For 2012/13, the analysis was based on a design of 20 strata, 198 primary sampling units or schools and 10,272 students (including 1,272 from Ottawa). The final weight was based on the product of the probability of the school being selected, the probability of the class being selected, a correction factor for student non-response and a sex-by-grade population adjustment.

Statistical methods are used to determine whether an observed difference between regions, such as between Ottawa and the rest of Ontario, reflects a true difference in the underlying populations or is simply due to chance. Statistical significance testing was conducted using Chi-square tests at a significance level of $p < 0.05$. If there is less than a 5% likelihood that the observed difference was due to chance, then that difference is said to be *statistically significant*. Otherwise, there is insufficient evidence to conclude that the difference is real, even if the estimates vary by a substantial amount. Not every statistically significant difference is reported in the report.

If the Chi-square testing was significant, comparisons between pairs were performed and adjusted using a Bonferroni correction for multiple comparisons as appropriate. Findings that were statistically significant at $p < 0.05$ after adjustment are reported in the text. Interesting findings that were significant

prior to adjustment, but not after adjustment, are also presented with the acknowledgement that they are important but not statistically significant.

Ninety-five percent confidence intervals (95% CI) are presented following the estimate in smaller font and within brackets.

The use of the symbol * denotes that the estimate is unreliable due to small sample sizes and high variability in responses, and should be interpreted with caution.

Note that a “rest of Ontario” or “Ontario-less-Ottawa” estimate is not the same as an overall estimate for the entire province as it does not include Ottawa. Any differences between Ottawa and Ontario should not be interpreted as if Ottawa is different than other individual health units across Ontario; rather that Ottawa is different from the average of individuals across Ontario excluding the Ottawa area.

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Appendix

Figure 1. Ottawa students in 2013 who reported excellent physical health compared to 2009, 2011 and the rest of Ontario, and by sex, grade and SES

Group	Excellent physical health (%)
Ottawa 2009	23.2
Ottawa 2011	22.0
Ottawa 2013	24.6
Ontario less Ottawa	25.5
Boys	26.5
Girls	22.6
Grade 7 to 8	33.9
Grade 9 to 12	20.8
Low SES	12.1
High SES	28.3

Figure 2. Ottawa students in 2013 who reported that they had not eaten breakfast on any of the previous five school days compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Did not eat breakfast (%)
Ottawa 2009	11.8
Ottawa 2011	11.0
Ottawa 2013	11.3
Ontario less Ottawa	14.4
Boys	10.5
Girls	12.1
Grade 7 to 8	10.6
Grade 9 to 12	11.5

Figure 3. Ottawa students in 2013 who reported that they drank one or more sugar sweetened beverages per day in the past week compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Drank sugar sweetened beverages (%)
Ottawa 2009	12.7
Ottawa 2011	12.4
Ottawa 2013	10.0
Ontario less Ottawa	12.4
Boys	13.8
Girls	5.9
Grade 7 to 8	6.1
Grade 9 to 12	11.5

Figure 4. Ottawa students in 2013 who reported that they drank at least one high-energy caffeinated beverage in the past week compared to 2011, the rest of Ontario and by sex, grade and socioeconomic status (SES)

Group	Drank high-energy caffeinated beverage (%)
Ottawa 2011	14.9
Ottawa 2013	13.2
Ontario less Ottawa	12.3
Boys	16.3
Girls	9.8
Grade 7 to 8	7.6
Grade 9 to 12	15.4
Low SES	14.9
High SES	13.2

Figure 5. Ottawa students in 2013 who were physically active for 60 minutes or more on all of the previous seven days compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Physically active (%)
Ottawa 2009	22.2
Ottawa 2011	22.0
Ottawa 2013	24.4
Ontario less Ottawa	21.6
Boys	29.1
Girls	19.5
Grade 7 to 8	33.6
Grade 9 to 12	20.7

Figure 6. Ottawa students in 2013 who were physically active in physical education on all of the previous five school days compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Physical education (%)
Ottawa 2009	21.9
Ottawa 2011	28.1
Ottawa 2013	25.2
Ontario less Ottawa	22.1
Boys	26.3
Girls	24.1
Grade 7 to 8	41.8
Grade 9 to 12	18.6

Figure 7. Ottawa students in 2013 who reported usually using motorized transportation to get to school compared to 2011, the rest of Ontario and by sex and grade

Group	Use motorized transportation (%)
Ottawa 2011	79.0
Ottawa 2013	77.6
Ontario less Ottawa	73.6
Boys	74.2
Girls	81.1
Grade 7 to 8	80.8
Grade 9 to 12	76.3

Figure 8. Ottawa students in 2013 who reported two hours or less of screen time per day compared to 2009, 2011, the rest of Ontario and by sex, grade and socio-economic status

Group	Screen time ≤ 2hours (%)
Ottawa 2009	44.5
Ottawa 2011	36.6
Ottawa 2013	39.0
Ontario less Ottawa	39.5
Boys	36.5
Girls	41.6
Grade 7 to 8	50.8
Grade 9 to 12	34.2
Low SES	25.3
High SES	43.1

Figure 9. Ottawa students in 2013 who were classified as overweight compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Overweight (%)
Ottawa 2009	14.0
Ottawa 2011	13.0
Ottawa 2013	14.7
Ontario less Ottawa	15.6
Boys	16.6
Girls	12.6
Grade 7 to 8	11.3
Grade 9 to 12	16.0

Figure 10. Ottawa students in 2013 who were classified as obese compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Obese (%)
Ottawa 2009	8.0
Ottawa 2011	8.0
Ottawa 2013	8.2
Ontario less Ottawa	10.3
Boys	9.9
Girls	6.4
Grade 7 to 8	7.3
Grade 9 to 12	8.6

Figure 11. Ottawa students in 2013 who reported that they thought they were about the right weight compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Self-perceived as right weight (%)
Ottawa 2009	75.0
Ottawa 2011	72.0
Ottawa 2013	67.4
Ontario less Ottawa	64.5
Boys	70.9
Girls	63.8
Grade 7 to 8	74.4
Grade 9 to 12	65.0

Figure 12. Ottawa students in 2011 who reported that they were trying to lose weight compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Trying to lose weight (%)
Ottawa 2009	22.0
Ottawa 2011	21.0
Ottawa 2013	29.5
Ontario less Ottawa	29.7
Boys	14.1
Girls	45.9
Grade 7 to 8	23.8
Grade 9 to 12	31.6

Figure 13. Ottawa students in 2013 who reported excellent mental health compared to 2009, 2011 and the rest of Ontario, and by sex, grade, SES and immigration

Group	Excellent mental health (%)
Ottawa 2009	32.1
Ottawa 2011	27.7
Ottawa 2013	29.8
Ontario less Ottawa	26.4
Girls	21.3
Boys	37.8
Grades 7 to 8	36.2
Grades 9 to 12	26.9
High SES	32.8
Low SES	19.6
Non-Immigrant	27.8
immigrant	40.7

Figure 14. Ottawa students in 2013 who reported high or very high levels of psychological distress in the previous few weeks compared to the rest of Ontario and by sex, grade, and visits to a mental health professional

Group	Psychological distress (%)
Ottawa 2013	23.3
Ontario less Ottawa	26.2
Girls	34.6
Boys	12.6
Grades 7 to 8	16.3
Grades 9 to 12	26.4
High SES	20.6
Low SES	33.2
No visit	15.6
One or more visit	46.6

Figure 15. Ottawa students in 2013 who reported one or more mental health care visits in the previous year compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Mental health care visits (%)
Ottawa 2009	25.5
Ottawa 2011	17.9
Ottawa 2013	25.3
Ontario less Ottawa	21.6
Girls	30.9
Boys	20.0
Grades 7 to 8	24.9
Grades 9 to 12	25.5

Figure 16. Ottawa students in 2013 who in the past year considered suicide compared to 2009, 2011, the rest of Ontario and by sex, and grade

Group	Suicidal ideation (%)
Ottawa 2009	7.9
Ottawa 2011	12.4
Ottawa 2013	12.4
Ontario less Ottawa	13.5
Girls	18.9
Boys	6.2
Grades 7 to 8	10.9
Grades 9 to 12	13.1

Figure 17. Ottawa students in 2013 who reported that they were bullied at school at least once since September compared to 2009, 2011, the rest of Ontario and by sex, grade and mental health status

Group	Being bullied at school (%)
Ottawa 2009	23.2
Ottawa 2011	28.3
Ottawa 2013	23.1
Ontario less Ottawa	24.5
Girls	27.5
Boys	18.9
Grades 7 to 8	26.9
Grades 9 to 12	21.4
Excellent MH	10.2
Very good MH	17.7
Good MH	31.4
Fair to Poor MH	49.5

Figure 18. Ottawa students in 2013 who reported that they had been bullied at least once on the internet compared to 2011, the rest of Ontario and by sex, grade, SES, and mental health status

Group	Cyberbullying (%)
Ottawa 2009	20.6
Ottawa 2011	18.7
Ottawa 2013	19.1
Ontario less Ottawa	27.4
Girls	10.5
Boys	15.9
Grades 7 to 8	20.0
Grades 9 to 12	30.0
Excellent MH	15.7
Very good MH	13.5
Good MH	17.8
Fair to Poor MH	46.2

Figure 19. Student cigarette use in the past year in Ottawa, 2013

Type of use	Smoking status (%)
Experimental	6
Current	9
Former	3
Never	81

Figure 20. Ottawa students in 2013 who reported that they felt it would be fairly to very easy to get cigarettes compared to 2009 and 2011, the rest of Ontario and by sex and grade

Group	Easy access to cigarettes (%)
Ottawa 2009	55.7
Ottawa 2011	59.8
Ottawa 2013	57.9
Ontario less Ottawa	60.8
Girls	57.5
Boys	58.3
Grades 7 to 8	25.1
Grades 9 to 12	69.3

Figure 21. Ottawa students in 2013 who binge drank in the past month compared to 2009 and 2011 and the rest of Ontario, and by sex and grade

Group	Binge drinking (%)
Ottawa 2009	23.5
Ottawa 2011	21.7
Ottawa 2013	21.7
Ontario less Ottawa	19.7
Girls	19.0
Boys	24.3
Grades 7 to 8	2.2
Grades 9 to 12	29.5

Figure 22. Ottawa students who reported drug use at least once in the past year by drug, 2013

Type of drug	Drug use (%)
Alcohol	47
Cannabis	24
Prescription (Grade 9-12)	14
Cough or cold medicine	13
Prescription (Grade 7 and 8)	11
Tobacco	9
Ecstasy (MDMA) (Grade 9-12)	4
Cocaine (Grade 9-12)	3
Methamphetamine/crystal meth (Grade 9-12)	2
Inhalents	2

Figure 23. Ottawa students in 2013 who reported using cannabis in the past year compared to 2009, 2011, the rest of Ontario and by sex, socio-economic status (SES) and immigration status

Group	Cannabis use (%)
Ottawa 2009	23
Ottawa 2011	24
Ottawa 2013	24
Ontario less Ottawa	23
Girls	20
Boys	27
Non-Immigrant	14
immigrant	26

Figure 24. Ottawa students using cannabis at least once in the past year by grade and survey years

Grade	2009	2011	2013
Grade 7	NR	NR	NR
Grade 8	NR	7.3	4.2
Grade 9	17.0	17.6	19.2
Grade 10	28.8	35.0	20.6
Grade 11	35.9	32.3	30.4
Grade 12	41.4	41.1	50.7

Figure 25. Ottawa students in 2013 who reported non-medical prescription drug use at least once in the past year compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Non-medical prescription drug use (%)
Ottawa 2009	21
Ottawa 2011	17
Ottawa 2013	14
Ontario less Ottawa	14
Girls	14
Boys	14
Grades 7 to 8	11
Grades 9 to 12	15

Figure 26. Ottawa students in 2013 who reported using prescription pain medication non-medically in the past year compared to 2009, 2011, the rest of Ontario and by sex, grade and self-reported mental health status

Group	Non-medical prescription pain medication use (%)
Ottawa 2009	18
Ottawa 2011	13
Ottawa 2013	13
Ontario less Ottawa	12
Girls	12
Boys	13
Grades 7 to 8	11
Grades 9 to 12	13
Excellent mental health	8
Fair or poor mental health	23

Figure 27. Ottawa students in 2013 who reported using cough or cold medication to get high in the past year compared to 2009, 2011, the rest of Ontario and by grade, sex and encounters with a mental health professional in the past year

Group	Cough or cold medication use (%)
Ottawa 2009	6
Ottawa 2011	5
Ottawa 2013	13
Ontario less Ottawa	9
Girls	11
Boys	16
Grades 7 to 8	12
Grades 9 to 12	14
Mental health visit	25
No mental health visit	14

Figure 28. Ottawa students in 2013 who reported any gambling in the past year compared to 2009, 2011, the rest of Ontario and by sex and grade

Group	Any gambling (%)
Ottawa 2009	38.0
Ottawa 2011	38.0
Ottawa 2013	35.5
Ontario less Ottawa	35.1
Boys	27.8
Girls	42.7
Grade 7 to 8	33.1
Grade 9 to 12	36.5

Figure 29. Ottawa students in 2013 who reported individual types of gambling in the past year

Types of gambling	Types of gambling (%)
Other	15
Cards	14
Lottery	11
Sports pools	10
Games of skill	8
Slots	6
Bingo	6
Dice	5
Sports lottery	3
Casino	3
Internet	2

Figure 30. Largest amount of money Ottawa students gambled in the past 12 months compared to the rest of Ontario, 2013

Amount of money	Ottawa	Ontario less Ottawa
\$9 or less	51.9	65.0
\$10 - \$49	33.9	25.7
\$50 or more	14.2	9.2