

DASSA Statistical Bulletin

Number 26 – August 2024

A Summary of South Australian Data from the National
Drug Strategy Household Survey 2022-23

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What is the National Drug Strategy Household Survey?

The NDSHS has been carried out by the Australian Institute of Health and Welfare (AIHW) every three years since 1995, and asks people aged 14 years and over about their use of alcohol, tobacco and other drugs. The survey also asks for people’s attitudes towards the use of these drugs, and their awareness of and support for government policies related to these drugs. In 2022-23, 21,663 people responded to the survey nationally; 2,928 in South Australia.

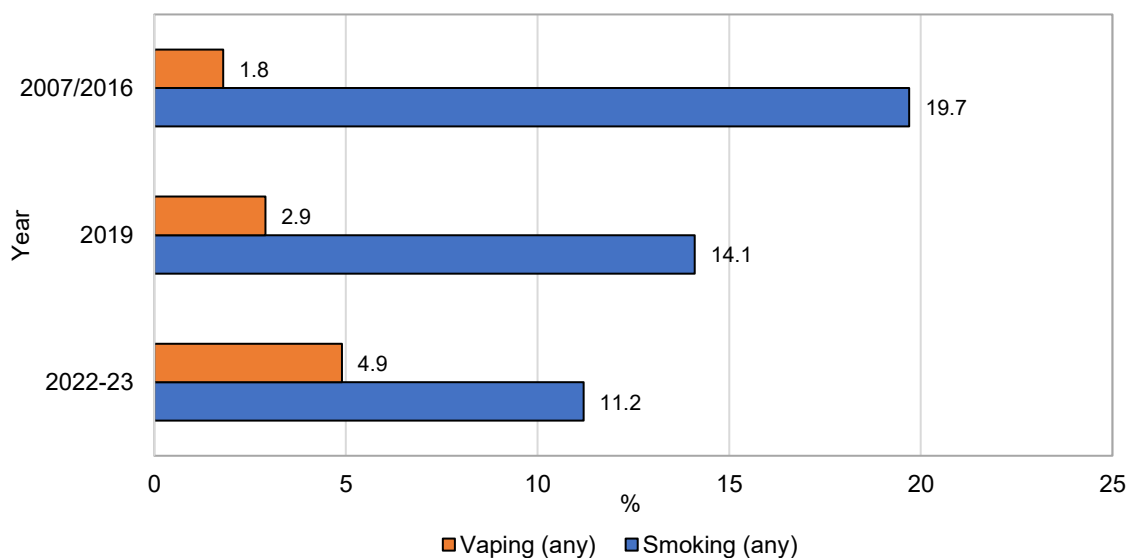
What are the important overall findings for South Australia from the 2022-23 Survey?¹

There were decreases between 2019 and 2022-23 in daily cigarette smoking and recent use² of opioids. Recent use of cannabis, ecstasy, inhalants and painkillers remained stable, as did daily and risky drinking. There were increases in recent use of e-cigarettes, cocaine and hallucinogens.

Cigarette use is decreasing but vaping is on the rise.

Smoking fell by 43% between 2007 and 2022-23 (19.7% to 11.2%; Figure 1). This equates to about 130,000 people smoking in 2022-23. In contrast, vaping increased almost three-fold between 2016 and 2022-23 (1.8% to 4.9%), an estimated 70,000 people in 2022-23.

Figure 1: Smoking and vaping (%) among South Australians aged 14 years and over, 2007 to 2022-23 *



* Data on vaping were not available prior to 2016.

Smokers tend to be older than vapers, with decreases in smoking among women but increases in vaping.

Daily smoking decreased between 2019 and 2022-23 among women (10.8% to 7.2%; Figure 2) and those aged 30-39 (12.2% to 7.4%) and 40-49 (18.5% to 10.5%) years (Figure 3). South Australians aged 50-59 years were most likely to smoke daily in 2022-23 (17.3%).

In contrast, current vaping increased between 2019 and 2022-23 among women (2% to 4.3%). There were also increases in current³ vaping among smokers (10.2% to 18.1%) and those who had never smoked (0.8% to 2.4%). South Australians aged 20-29 years were most likely to currently vape in 2022-23 (15.9%; an increase from 5.1% in 2019). Those aged 18-24 and 25-29 years had the highest proportion of current vapers (17.3% and 14.3%; increases from 5.9% and 5.8% in 2019).

Figure 2: Sex distribution (%) of smoking and vaping among South Australians aged 14 years and over, 2022-23

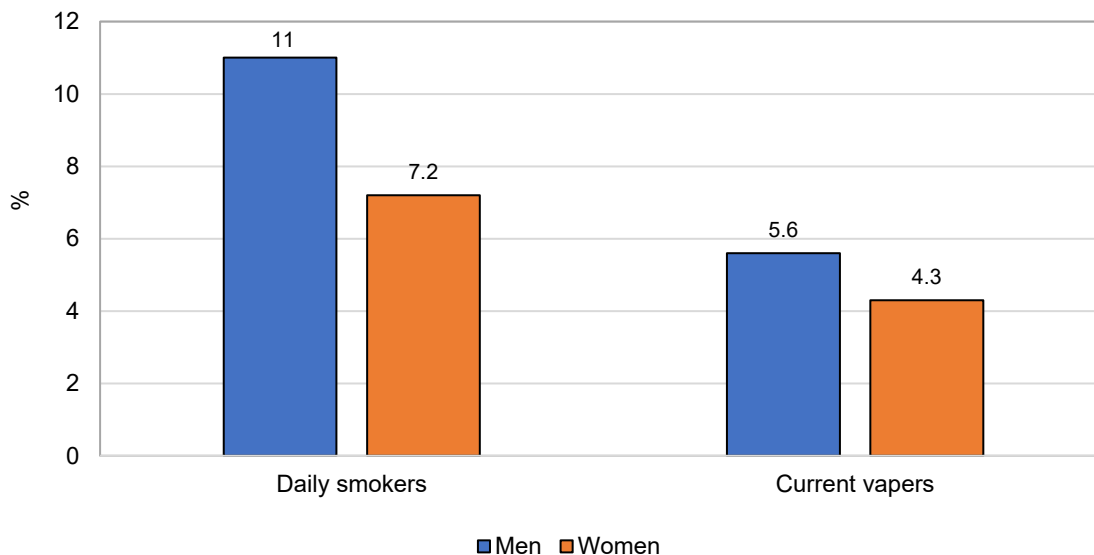
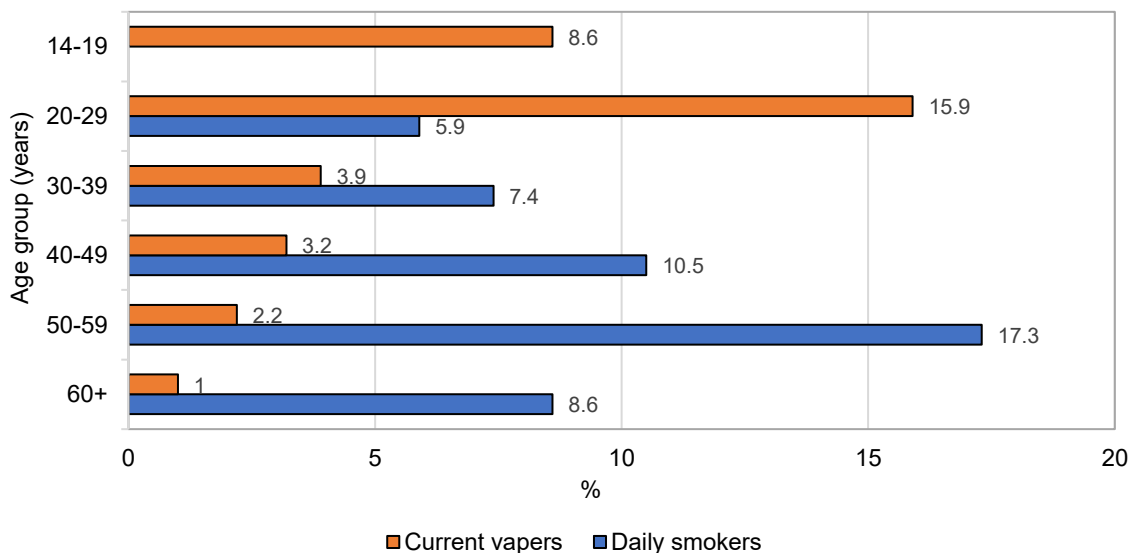


Figure 3: Age distribution (%) of smoking and vaping among South Australians aged 14 years and over, 2022-23*



* Smokers: the estimate for those aged 14-19 years was too unreliable for use, and the estimate should be used with caution for those aged 20-29 years. Vapers: estimates for all age groups except 20-29 years should be used with caution.

Is there community support to reduce problems with tobacco and e-cigarettes?

Community support for a range of measures to reduce the use of tobacco and e-cigarettes is high, with 65%-68% of South Australians agreeing to increase taxes on tobacco products, making tobacco products harder to buy (65%, an increase from 61% in 2019) and banning additives such

as flavouring to make them less appealing to young people (80%, an increase from 76% in 2019). Similarly, between 81% and 87% of South Australians support restricting the sale and use of e-cigarettes, prohibiting the sale to those under 18 years, and restricting the advertising and promotion of such products. Support increased in all areas between 2019 and 2022-23.

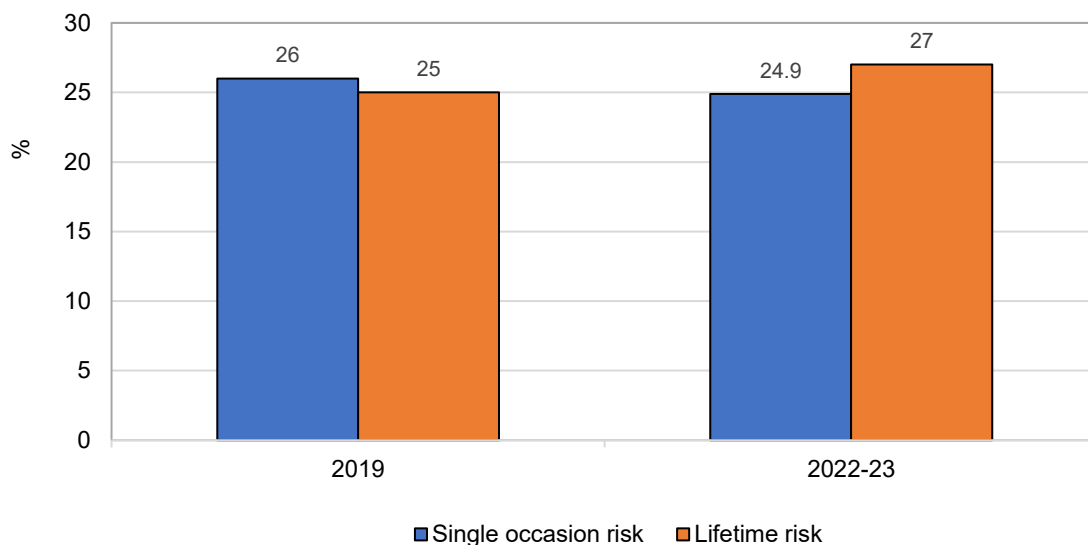
How many people drink alcohol at risky levels?⁴

About 4 in 5 South Australians (80%) had consumed alcohol in the previous 12 months. There was no change between 2019 and 2022-23 in the proportion drinking daily (5.8% to 4.7%) or weekly (36.8% to 36.7%). However, the proportion of male daily drinkers decreased from 8.1% to 5.6%.

Most South Australians did not consume alcohol at levels that exceeded the lifetime risk guidelines for injury or disease, or the single occasion risk (at least monthly) guidelines for injury. In 2022-23, 27% consumed at levels that increased their lifetime risk (32.3% of men and 18.4% of women), stable from 2019 (25%; Figure 4). Lifetime risky drinking was highest among 50-59 (31.6%) and 18-24 (30.2%) year olds. In 2022-23, 24.9% consumed alcohol at levels that increased their risk from a single occasion, stable from 2019 (26%; Figure 4). Again, this was higher among men (33.1% compared with 17% of women) and among 18-24 (47.5%) and 20-29 (36.2%) year olds.

Longer-term trends below show overall decreases in both measures of risky drinking: from 30.7% to 25% for lifetime risk and from 31.1% to 24.9% for single occasion risk.

Figure 4: Risky drinking (%) among South Australians aged 14 years and over, 2022-23



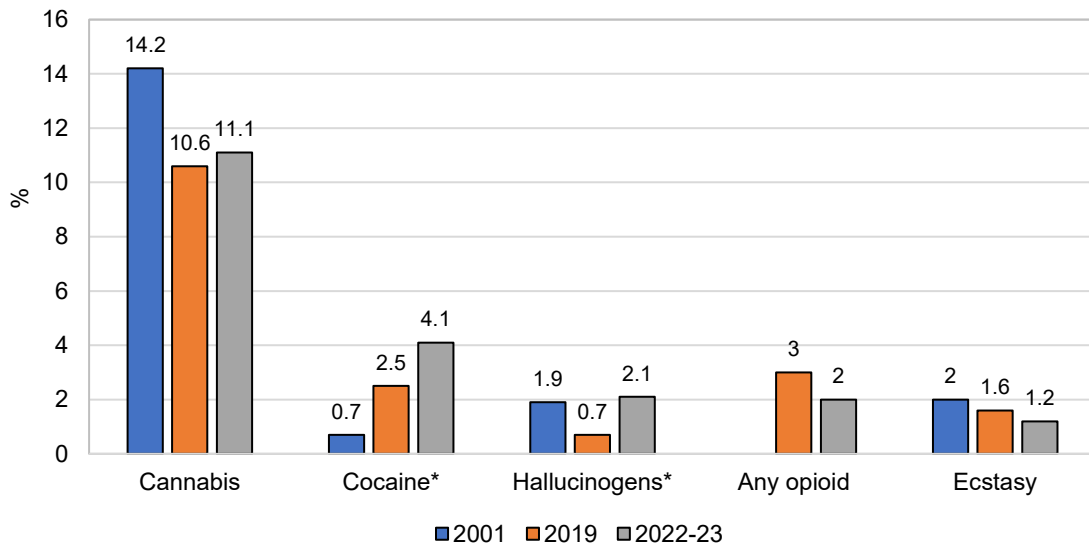
How many people use illicit drugs?

In 2022-23, 1 in 6 people (17%) in South Australia had recently⁵ used at least one illicit drug, stable from 2019 (15.4%) but lower than the national percent (17.9%). However, there was an increase among men (16.7% to 20.7%), remaining stable among women (14.1% to 13.7%). The age groups with the highest percentage reporting recent use were 18-24 (36.3%) and 20-29 (31.9%) years.

Recent Illicit drug use was stable between 2019 and 2022-23 for most drug types (Figure 5). Cannabis is the most common among South Australians and this has not changed over time, with 11.1% reporting recent use in 2022-23, stable from 10.6% in 2019. There were decreases between 2019 and 2022-23 in recent use of opioids (3% to 2%) and increases in recent use of cocaine (2.5% to 4.1%) and hallucinogens (0.7% to 2.1%). Increases in cocaine and hallucinogen use were driven by men (from 2.4% to 4.8% for cocaine and from 0.6% to 2.7% for hallucinogens⁶). Among women, there was a decrease in recent use of painkillers/pain-relievers and opioids (from 3.1% to

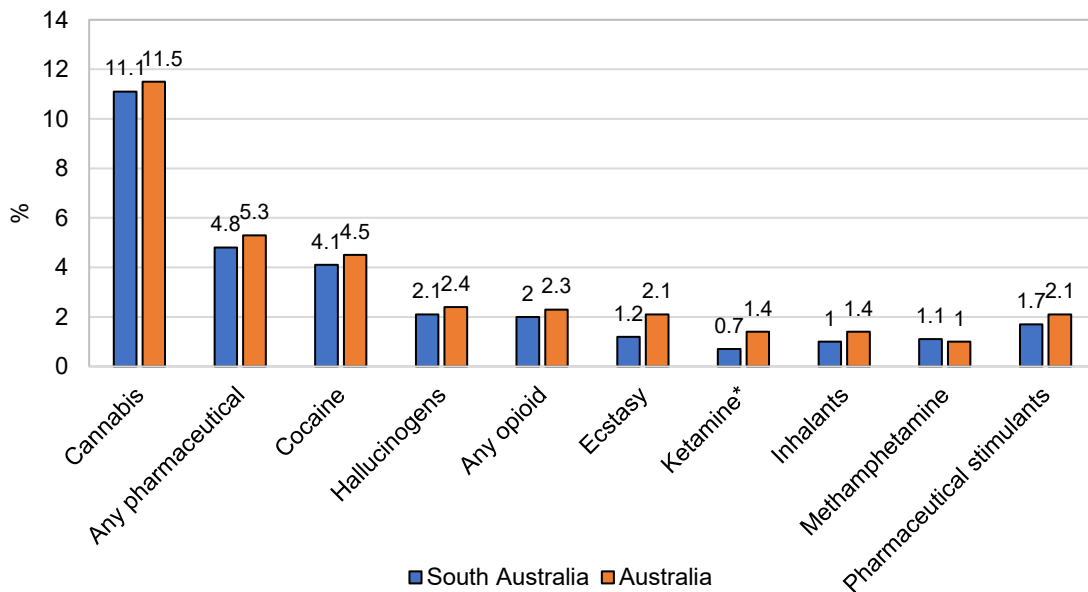
1.4%). Illicit drug use among South Australians in 2022-23 was at or below the national percentage for all drug types where comparisons were possible (Figure 6).

Figure 5: Recent illicit drug use among South Australians aged 14 years and over, 2001, 2019 and 2022-23



* Cocaine: the estimate in 2001 should be used with caution. Hallucinogens: the estimate in 2019 should be used with caution.

Figure 6: Recent illicit drug use among South Australians and Australians aged 14 years and over, 2022-23



At what age do people start using alcohol and other drugs?

In 2022-23, the average age at which South Australians aged 14 years and over first used a range of drugs is listed below. The average age of first use of vapes and illicit drugs was higher than for cigarettes and alcohol.



smoked a full cigarette: 16.4 years (16.4 in 2019, stable).



tried drinking alcohol: 17.1 years (17.1 in 2019, stable).



tried e-cigarettes/vapes: 30.2⁷ years (33.7 in 2019, a decrease).



tried cannabis: 18.7 years (18.9 in 2019; stable).



Tried illicit drugs excluding pharmaceuticals⁸: 18.8 years (18.9 in 2019; stable).



tried illicit drugs including pharmaceuticals: 19.4 years (20.1 in 2019, a decrease).

Is there community support to reduce problems with illicit drugs?

Two-thirds of South Australians (65.9%) supported allowing drug users to test their pills/drugs at designated sites to inform them of the purity and the substances the drug contained, an increase from 2019 (58%). Similarly, support for needle and syringe programs was high at 69.2%, an increase from 64.8% in 2019. Support for supervised drug consumption facilities/rooms was lower at 51.4%, but still an increase from 2019 (46%).

Where can I get more information?

[Summary on DASSA website](#)

[Information on AIHW Website](#)

For more information

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¹ Any changes highlighted are statistically significant.

² At least once in the last 12 months.

³ Any use in the last 12 months.

⁴ <https://www.nhmrc.gov.au/health-advice/alcohol>

⁵ At least once in the last 12 months.

⁶ Estimates in 2019 should be used with caution.

⁷ The margin of error (width of a 95% confidence interval) was between 1.5 and 2.5 years and should be used with caution.

⁸ For non-medical purposes.