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The prevalence of drug use among students of Iasi

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The prevalence of drug use among students of lasi

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Abstract

The purpose of the research is to estimate the number of drug users among students of the universities from Iasi, to identify students' behavior towards the use of drugs, drug purchase offer, solutions to reduce the use of drugs. Research using mix methods for estimating the number of drug users using a representative survey, the use of focus groups to obtain qualitative information.

Keywords: drugs, mix methods, survey, prevalence, students, weed shops.

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Introduction

At large, the word "drug" signifies any substance used in therapeutics, due to its curative properties, but whose effect is damaging or uncertain to human body. (Berchesan V. Pletea C., 1998 p.58). Since in Romania, the average age of illegal drug users has decrease over the last years from 20 to 25 years to 15, the biggest fear any parent feels is related to the possibility that their own child become tempted to use drugs and eventually turn addicted. During the year 2003, under the auspices of the Swedish Council for Information on Alcohol and Other Drugs and of the European Council, by means of Pompidou Group, the Ministry of Health, together with the National Institute for Health Research-Development has performed a study on the use of alcohol, tobacco and drugs in schools. The results show that, as compared to the year 1999, this use has increased.

According to the national study entitled ESPAD 2003, performed on a sample of students aged 16, the prevalence of tobacco use is of 64%. At the same time, 80% of them have at least once consumed alcohol. As for the rest, the use of amphetamines doubled whereas the use of ecstasy tripled, as compared to the year 1999.

The number of heroin users has been estimated to approximately 24.000 persons in Bucharest only, which represents 1% of the total population in this city. According to the 2008 yearly report on drug use around Europe, performed by The European Observer for Drugs and Drug Addiction, Romania is recorded with the smallest prevalence percentages regarding the use of certain important categories of drugs such as cannabis, amphetamines, ecstasy or cocaine.

The drug which is being experimented by people of all ages is the cannabis, whereas the other drugs are being experimented mainly by young people, aged 15 to 34. The smallest age declared for the start of cannabis use was of 11, while 76,6% of cannabis users mentioned the starting age as being of up to 24 years. In the case of ecstasy, the smallest starting age was declared 14 while the oldest age was 30.

Men, as compared to women, have tried at least once in their life any of the illegal drugs: 2,3% cannabis, 0,5% ecstasy, 0,2% heroin and 0,1% the other categories, whereas in case of women, the experimental use was recorded as follows: cannabis – 0,7%, ecstasy – 0,2%, inhalant and hallucinogenic drugs – 0,1%. In the 2008 yearly Report on drug use situation around Europe, Romania occupies the 10th place, out of 28 listed countries, as towards the number of deaths resulted from the use of drugs. This situation places in the first third of this list, although the use of drugs places her among the last of the 28 states. The current tendency in the case of psychotropes

consumed in Romania is also enhanced by the EMCDDA (2002b) report conclusions on the candidate countries, according to which, the experimental recreational use of drugs has become, more and more obviously, an integrating part of youth culture in these countries. Moreover, it is alarming the fact that studies indicate a relatively short period of time for the passage from the use of light drugs – cannabis, marijuana to the use of strong drugs (heroin and synthesis drugs).

Drug use risks

Society vehemently condemns the users of illegal drugs whereas it manifests a relative tolerance towards the users of alcohol and tobacco. Drugs such as alcohol, heroin or tranquilizers, when consumed on a regular basis, can lead to changes in the normal biochemical reactions of the body and if doses are not administered, abstinence specific symptoms will appear (trembling, perspiration, symptoms similar to influenza). Furthermore, because these drugs are also depressors, they slow down the bodily reactions and determine a state of somnolence, they affect the movement coordination capacity and the person may easily fall down and have an accident. Drugs such as amphetamines, cocaine, and ecstasy are powerful stimulators, leading to discharge of energy so intense that it can prove fatal to people with blood pressure affections. The LSD consumers suffer from hallucinations and can be extremely troubled after the intake, being capable of committing dangerous acts, especially if they were anxious or very angry before. As compared to the adult population, young people are open to what is new, thus being predisposed to experiences with a high risk degree. Many young people consider that the main causes which determine the use of drugs are the following: curiosity, group/entourage pressure, desire for hard sensations, lack of maturity/responsibility, personal or family problems, despair, loneliness, boredom, absence of interesting/attractive preoccupations, inability to integrate into a group or a collective, need to be observed.

Hints to suggest drug use

The use of drugs may be noticed as well, due to a number of direct effects on human behaviours:

- sudden change of behaviour;
- unreasonable passage from joy to sadness, sometimes even unusual aggressiveness, and from aggression to passiveness, even desertion;
- loss of food appetite, injected eyes;
- gradual loss of interest in school, work, hobbies, sports, friends;

- unusual states of somnolence and apathy, excessive tiredness without an obvious cause;
- excessive expenditures, disappearance of money or of valuable objects from the house;
- unusual spots, strange smells on the skin or on the clothes;
- change of the group of friends.

Risk and protection factors during the start of drug use

The risk factors represent the circumstances existing before starting the use, abuse or problematic use of drugs. In 1994, the Committee on Prevention of Mental Disorders of the USA Medical Institute defined the risk factors as those variable or circumstantial characteristics which contribute to the increase in the probability that one person develops a behavioural problem, as compared to any other person from the general population. Different categories of risk factors, related or framed under legal aspects or explicit social norms or perceived in relation to drug use or abuse behaviors; individual or interpersonal factors.

Contextual risk factors

Among the main contextual risk factors are the following:

- social laws and norms favorable to use and abuse bahaviours;
- a very permissive legislation, combined with a high social tolerance towards any substance represent the key contextual factor which favour the use and abuse of various psychoactive substances;
- availability;
- social deprivation. The study results show that certain indicators of social disadvantages, such as poverty, human overcrowding are associated to a high risk of antisocial behaviours;
- lack of organization in the surrounding social environment

Individual and interpersonal risk factors

Physiological factors: although the knowledge on the genetic risk factors are still limited, there is nevertheless some evidence resulted from studies on the hereditary predisposition to abuse of certain psychoactive substances (eg alcohol).

Psychological factors: certain studies point out the existence of a positive relationship between certain psychological and behavioural characteristics of the drug use and abuse, such as, the inability to control one's emotions, emotional instability or aggressiveness and hostility.

Drug permissive family attitudes and behaviours: the use of drugs inside a family will influence the use of drugs by children and teenagers.

Family educational dysfunctions / Inconsistent parental styles: various studies show the relationships which exists between the inefficiency or inconsistency in the development of parental roles and of the family's functions in establishing family behaviour norms and the drug abuse problems, especially with children who manifest some type of non-aptative behaviour (attention troubles, irritability and aggressiveness).

Lack of family affectionate relations: the absence of the parents or of some tutors who can offer positive emotional support to their children can be related to the development of certain long term drug abuse behaviours.

Learning failure: the decreased learning pace was identified as a predisposition factor for the frequency and intensity of the drug use. On the other side, there is no evidence for the low intellectual quotient to be a predictive factor for drug abuse.

Low learning engagement: various studies show a reverse relationship between drug abuse and school integration.

Association with drug consuming colleagues (entourage).

Drug consuming favourable attitudes.

Early drug use start: epidemiological studies offered enough information to demonstrate that the higher the consume frequency and intensity as well as the development of addiction related problems will be the lower the starting age is.

Protection factors

The protection factors represent those moderating circumstances of the exposition to risk factors. Protection factors improve people's resistance to risk situations, acting as elements of protection against potential problematic answers. Researches have identified two mechanisms by means of which the protection factors can contribute to reducing the influence of the risk factors:

- Risk protection mechanisms, through which the exposition to risk factors is moderated by the presence of protection factors. For example, these authors have described the way in which the risk of exposing oneself to the presence of other drug consumers can be moderated by means of certain strong pronormative affectionate relations.
- Protection protection mechanisms, through which a protection factor enhances another protection factor. The existence of a positive affectionate relation between parents and children enhances the effect of other protection factors, such as the teenager's conventional or pro-normative attitude.

According to researches, the identified protection factors are as follows:

1. Individual protection factors

Solving the problems. The child's or teenager's individual capacity to solve problems as well as the feeling of self efficiency.

Interiorizing the norms. The individual capacity to interiorize social norms about the control of drug use.

2. Family specific protection factors

Emotional atmosphere in the family environment – the existence of certain strong emotional connections between the parents/tutor and the children.

Participation – the presence of the parents/tutors in the life of their children.

Consistent family norms – the existence of certain general, clear and stable family norms.

Supervising – parents' supervising of their children's lives.

3. Educational protection factors

Learning capacity;

A good relation with the school – the existence of a positive affectionate relation with the school and/or with the teachers.

4. Contextual protection factors

Promoting and enhancing social abilities

The connection with pro-social instances, such as family, school, church or other social institutions, as well as the active participation to their activities.

Maintaining certain pro-social values by the group of peers as well as the positive appreciation of the group by parents or tutors.

Research methodology

Presenting the sample

The questionnaire was applied to 435 students of Iasi, including young people who are studying at the "Al. I Cuza" University (57,2%), the "Gheorghe Asachi" Technical University (20,2%), the "Gr. T. Popa" Medical and Pharmaceutical School (14%) and the "Ion Ionescu de la Brad" University of Agricultural Sciences and Veterinary Medicine (6,9%). Only a small number of students (1,6%) did not mention the university they are attending.

University	"Al. I. Cuza" University	"Gh.Asachi" Technical University	Medical and Pharmaceut ical School	Agricultural Science University	Non- responses
Number of responde nts	249	88	61	30	7
Percenta ge out of total	57,2	20,2	14%	6,9%	1,6%

Table 1: Sample structure according to the attended university

According to the year (or level of study – master's degree or PhD) criterion, more than half (54,9%) of the students in the sample are in their first 2 years of study whereas three quarters (74,7%) are in their first three years.

Year (level of study)	Frequen cy of answers	Percent age	Cumulated percentage
Year 1	114	26,2	26,2
Year 2	125	28,7	54,9
Year 3	86	19,8	74,7
Year 4	34	7,8	82,5
Year 5	32	7,4	89,9
Year 6	10	2,3	92,2
Master'sdegree	28	6,4	98,6
PhD	1	0,2	98,9
NR	5	1,1	100,0
Total	435	100,0	

Table 2: Sample structure according to the year/level of study

The reduced experience of the sample members is also reflected in the distribution of the ages of those who took part in this research study. Only two of them are 18 and only 16 of them are 25 or more, while 60% of the respondents are aged 19 to 21.

Age	Frequency	Percentage	Cumulated percentage
18 years	2	0,5	0,5
19 years	44	10,1	10,6
20 years	118	27,1	37,7
21 years	100	23,0	60,7
22 years	61	14,0	74,7
23 years	49	11,3	86,0
24 years	43	9,9	95,9
25 years	11	2,5	98,4
More than 26 years	5	1,1	99,5
NR	2	0,5	100,0
Total	435	100,0	

Table 3: Sample structure according to respondents' ages

Of all those to which the questionnaire was applied, approximately one third (35,4%) were men and two thirds (63,7) were women.

Sex	Frequen cy	Percenta ge	Cumulated percentage
Masculin	154	35,4	35,4
Feminin	277	63,7	99,1
NR	4	0,9	100,0
Total	435	100,0	

Table 4: Respondents' distribution according to sex

In last place, according to the marital status, most of the students who responded, more than half (61,4%) are single, the explanation being also the reduced age of those who compose our sample. The rest are, as listed, consensual marriage (22,5%) and non-responses (10,1%). There should be taken into account the high percentage of the non-responses, which can be a related to the fact that either the students are hiding their singlehood or they do not know how to define the type of relationship they are involved in. Only 2,3% of the interviewed students are married while 3,7% of them are separated.

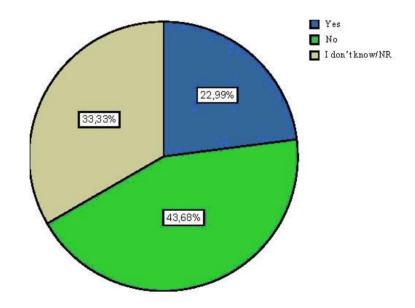
Marital status	Frequency	Percentage	Cumulated percentage
Single	267	61,4	61,4
Married	10	2,3	63,7
Separated	16	3,7	67,4
Consensual marriage	98	22,5	89,9
NR	44	10,1	100,0
Total	435	100,0	

Table 5: Respondents' distribution according to marital status

Students' behaviour towards the use of drugs

The first question "Do you have any fellow students who use drugs?" was answered to by almost a quarter of the students with YES, which can be considered as a significant percentage. Furthermore, one third of the students did not answer, which means that in some conditions the answer could be affirmative. Less than half of the students (43,7%) are absolutely sure that they do not know any fellow student to use drugs or they are not aware of this phenomenon running in their learning environment. (*Graph 1*)

The distribution of the students who do or do not know about the use of drugs in their learning environment, according to the attended university is illustrated in *Table 6*.



Do you have fellow students who use drugs?

Graph 1: Respondents' distribution according to the knowledge of some drug users fellow students

Do you have any fellow students who use drugs?	University	Frequency	Percenta ge	Cumulated percentage
	UMF	13	13,0	13,0
	UAIC	52	52,0	65,0
YES	UTI	19	19,0	84,0
TES	USAMV	14	14,0	98,0
	NR	2	2,0	100,0
	Total	100	100,0	
	UMF	24	12,6	12,6
	UAIC	93	48,9	61,6
NO	UTI	63	33,2	94,7
NO	USAMV	7	3,7	98,4
	NR	3	1,6	100,0
	Total	190	100,0	
	UMF	24	16,6	16,6
	UAIC	104	71,7	88,3
I don't know/NR	UTI	6	4,1	92,4
	USAMV	9	6,2	98,6
	NR	2	1,4	100,0
	Total	145	100,0	

 Table 6: Respondents' university-based distribution according to the knowledge of some drug users fellow students

Nevertheless, these data cannot be analysed without taking into account the number of respondents because, even if half of those who do know about the use of drugs in their learning environment attend the "Al. I. Cuza" University, it is also only half of the interviewed students that answered the questionnaire entirely. Therefore, the table below shows the percentages of those who are aware of the use of drugs, according to their attended university.

University	Answer	Frequen cy	Percenta ge	Cumulate d percenta ge
	YES	13	21,3	21,3
	NO	24	39,3	60,7
UMF	I don't know/NR	24	39,3	100,0
	Total	61	100,0	
	YES	52	20,9	20,9
	NO	93	37,3	58,2
UAIC	I don't know /NR	104	41,8	100,0
	Total	249	100,0	
	YES	19	21,6	21,6
	NO	63	71,6	93,2
UTI	I don't know /NR	6	6,8	100,0
	Total	88	100,0	
	YES	14	46,7	46,7
	NO	7	23,3	70,0
USAMV	I don't know /NR	9	30,0	100,0
	Total	30	100,0	
	YES	2	28,6	28,6
	NO	3	42,9	71,4
NR	I don't know /NR	2	28,6	100,0
	Total	7	100,0	

Table 7: Respondents' distribution – university based – according to the knowledge of some drug users fellow students

If for the Medical and Pharmaceutical School, the "Al. I. Cuza" University and the Technical University the percentage of those who are aware of the use of drugs is of 20 to 21, for the University of Agricultural Sciences and Veterinary Medicine the percentage of the aware students is almost half (46,7%), which may lead to the conclusion that in this learning environment the use of drugs is *more visible* than in the other universities.

Surprisingly, the results in the table below show that the percentage of those students who are aware of the use of drugs in their learning environment is higher among the

ones who are married (40%) than among those who are single (22,1%) or who are involved in consensual marriage (23,5%). On the other hand, this conclusion may also come from the distortion which is given by the fact that an extremely small number of married persons filled out our forms (10).

Marital status		Frequency	Percentage
	YES	59	22,1
Single	NO	116	43,4
	I don't konw/NR	92	34,5
	Total	267	100,0
	YES	4	40,0
Married	NO	2	20,0
INIAITIEU	I don't konw /NR	4	40,0
	Total	10	100,0
	YES	3	18,8
Separated	NO	11	68,8
Separateu	I don't konw /NR	2	12,5
	Total	16	100,0
	YES	23	23,5
Consensual	NO	45	45,9
marriage	I don't konw /NR	30	30,6
	Total	98	100,0
	YES	11	25,0
NR	NO	16	36,4
	I don't konw /NR	17	38,6
	Total	44	100,0

Table 8: Respondents' distribution – marital status based – according to the knowledge of some drug users fellow students

Of all the answers given by the students who know what drugs are being used in their learning environment, marijuana was said to be the mostly used one (41,57%), followed by hashish. The sedatives were remarkably mentioned by only four of the respondents (2,41%).

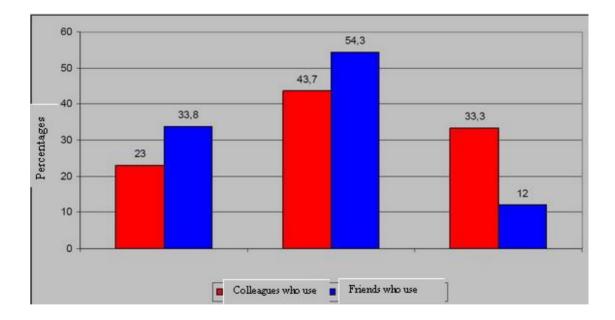
"There are many of my fellow students who consume drugs... I do not know exactly what they are taking... I do not know exactly, I just know they're smoking" (FG, April, 2009)

One third (33,8%) of the friends of the respondent students consume drugs, one way or another. If this percentage is higher than in the case of students' colleagues, than the

percentage of the friends who do *not* consume drugs (54%) is higher than that of the colleagues who do *not* consume them. Naturally, if we should also consider that friends are closer to the students than their colleagues and the formers' habits are already known. In the graph below we have comparatively illustrated the data regarding the use of drugs on the part of the respondent students' friends/colleagues.

Heroin	Marijuana	Hashish	Cocaine	LSD	Amphetamine	Sedative	Inhalant	Others	Total
10	69	40	8	7	10	4	0	18	166
6,02 %	41,57%	24,10%	4,82%	4,22 %	6,02%	2,41%	0,00%	10,84%	100 %

Table 9: The most consumed drugs among students



Graph 2: A comparative situation of the use of drugs by the respondents' colleagues/friends

Just like in the case of Question nr. 1, we have below presented in detail the answers of the students, according to the *university* they are attending and to their *friends*' drug use habits. *(Table 10)*

One can notice from the table that at the "Al. I. Cuza" University, the percentage of students who have drug user friends is the highest -36,5%, whereas at the Technical University and at the Medical and Pharmaceutical School it is the lowest -29,5%.

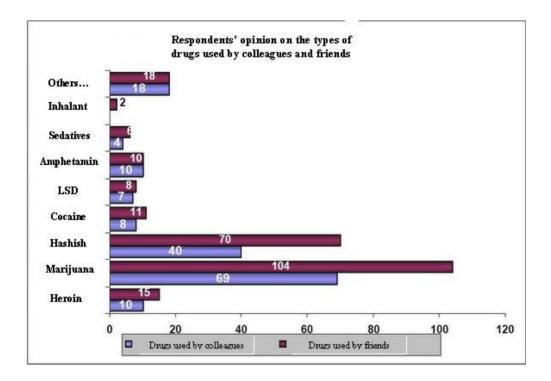
As for the drugs consumed by these friends, 147 of the respondents selected 244 multiple answers, which can be found in *Table 11*. Like in the case of the question regarding the drugs preferences of the colleagues, marijuana is on the first place (42,62%), followed by hashish (28,69). Graph 3 presents, the "colleagues" drugs preferences, as compared to those of the "friends".

Do you ha	ave friends (o	thers than you	r fellow students)	who use drugs?
University		Frequency	Frequency Percentage Cumu	
	Yes	18	29,5	29,5
	No	31	50,8	80,3
UMF	I don't know/NR	12	19,7	100,0
	Total	61	100,0	
	Yes	91	36,5	36,5
UAIC	No	129	51,8	88,4
	l don't know /NR	29	11,6	100,0
	Total	249	100,0	
	Yes	26	29,5	29,5
	No	61	69,3	98,9
UTI	I don't know /NR	1	1,1	100,0
	Total	88	100,0	
	Yes	10	33,3	33,3
	No	10	33,3	66,7
USAMV	l don't know /NR	10	33,3	100,0
	Total	30	100,0	
	Yes	2	28,6	28,6
NR	No	5	71,4	100,0
	Total	7	100,0	

 Table 10: Respondent students' distribution according to the university they attend and to their friends' drug use habits

Heroi n	Mariju ana	Hashish	Cocaine	LSD	Amphetami ne	Sedative	Inhalant	Others	Total
15	104	70	11	8	10	6	2	18	244
6,15 %	42,62 %	28,69 %	4,51%	3,28 %	4,10 %	2,46 %	0,82 %	7,38 %	100,00 %

Table 11: Main drugs consumed by the respondents' friends



Graph 3: Respondents' opinion on types of drugs consumed by colleagues and friends

This graph was made based on the frequency of the answers and it can be noticed that there are more information provided about friends than about colleagues.

If the previous question pointed towards the drug preferences of the respondents' friends, Q5 proposes to determine how large the number of each student's drug consuming acquaintances is.

Group category	Frequency	Percentage
between 1-5	131	30,11%
between 6-10	37	8,51%
between 11-15	13	2,99%
between 16-20	2	0,46%
over 21	1	0,23%
NR	251	57,70%
Total	435	100,00%

Table 12: The number of drug consuming friends

The answers point out that the number of students' drug consuming acquaintances is relatively low, between 1 and 5. Moreover, a large part of the high percentage of the non-responses (57,5%) can be caused by the fact that those respondents are not aware of any drug consuming person.

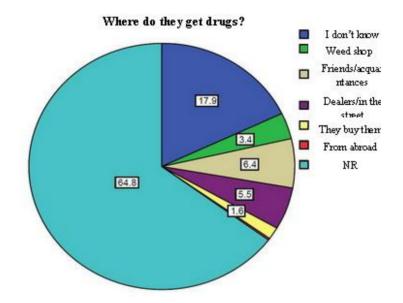
Origin of drugs

As for the origin of drugs, only 17% of the respondents have information on their acquaintances' supply sources. Out of those who provided such data, only 6,4% declared as sources their friends/colleagues, 5,5% the dealers or various people "in the street" and 3,4% the weed-shops. One can also notice the discrete character of the drug distribution network, since 82,7% of those who know drug consuming students are not aware of the source.

Source	Frequency	Percentage
weed shop	5	3.4
From friends/acquaintances	28	6.4
Dealers/in the street	24	5.5
They buy them	7	1.6
From abroad	1	.2
I don't know/NR	360	82.7
Total	435	100.0

Table 13: Drug supply sources of the students' acquaintances

The graph below presents the same data only that the "I don't know" answers and the non-responses are detailed.



Graph 4: Drug supply sources of the students' acquaintances (the "I don't know" answers and the non-responses are detailed)

"I believe that a consumer, at some point (it is very interesting how the network develops), will implicitly become a dealer. Ok, for a small network: three, four or five friends. To be dealer depends, as somebody told me, on the quantity of drugs one requests. I think it also depends on the covered area... I couldn't do it; one needs to have certain acquaintances, a certain backup; one cannot afford to simply sell it. One trembles for a single cigarette and I would have to carry a bunch of them... full packets. (!) This cannot be done by anyone. They should behave naturally, they should be born with it" (FG, April 2009).

"In Iasi, I know that in Nicolina neighborhood they are selling drugs in the street, that's what I know from those who smoke a lot...

they have a special place and only those who buy know about it." (FG, April 2009)

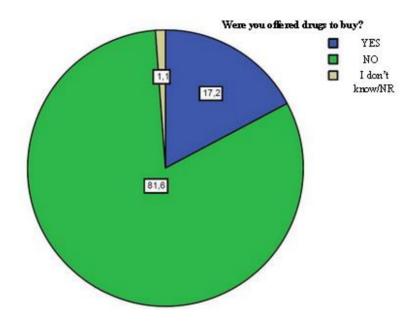
"I am not aware of colleagues to grow such kind of plants. But I am aware of some who prepare drugs. They use something else, not plants but combinations, medicines, substitutes, all sorts of synthetics. They own a real industry there. I also saw ecstasy, like some small pills. I am absolutely sure that in Iasi one can supply any kind of drugs. Any kind of drugs, really. But one must know where or at whom to look for. But in Iasi they are twice as more expensive than in Bucharest. Of course, because a friend of mine came from Bucharest and said: "Drugs here are so expensive!" I think networks here are less spread out. Bucharest is a city with more consumers. I don't know, some thousands maybe. There are also more inhabitants. People take drugs in other cities in our country as well, but Bucharest is a nest, really scary. They developed more quickly. Not to mention that Bucharest is the capital of Romania" (FG, April 2009)

Drug purchase offer

Coming back to the respondents, they were asked to explain if they were offered drugs to buy. Only five of them did not answer, and only 17,2% answered affirmatively.

Were you offered drugs to buy?						
Answer Frequency Percentage Cumulated percentage						
YES	75	17,2	17,2			
NO	355	81,6	98,9			
I don't know/NR	5	1,1	100,0			
Total	435	100,0				

Table 14: Drug offer for students



Graph 5: Drug offer for students

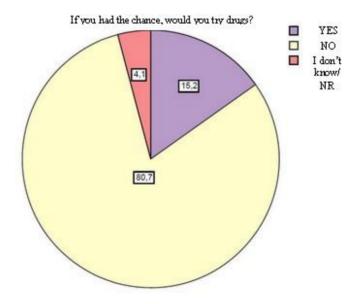
It is interesting to notice the close percentages between the answers of the people who were not offered drugs to buy and those of the people who declared that they would never try any drug even if they had the possibility.

Drug use temptation

As long as the use of drugs is a behaviour known by many students, even if they are not consumers themselves but have friends or colleagues who are, as long as they were offered drugs to buy or to use, they will be permanently tempted. In order to determine the degree of resistance under such a pressure, the students were asked to answer whether they would try any drug if they had the chance.

If you had the chance, would you try any drug?							
	Frequency Percentage Cumulated percentage						
YES	66	15,2	15,2				
NO	351	80,7	95,9				
l don't know/NR	18	4,1	100,0				
Total	435	100,0					

Table 15: Percentage of students who would try drugs if they had the possibility



Graph 6: Percentage of students who would try drugs if they had the possibility

The following two tables contain the respondents' options regarding the possibility of trying drugs, according to sex and attended university.

Sex		If you had the chance, would you try any drug?
Male	YES	39
	NO	105
	I don't know/NR	10
Female	YES	26
	NO	244
	I don't know /NR	7
NR	YES	1
	NO	2
	I don't know /NR	1

Table 16: Frequency of students who would try drugs if they had the possibility, according to sex

University	Answer	If you had the chance, would you try any drug?
Chiverenty		No
UMF	YES	8
	NO	51
	I don't know/NR	2
UAIC	YES	40
	NO	198
	I don't know /NR	11
UTI	YES	12
	NO	72
	I don't know /NR	4
USAMV	YES	5
	NO	24
	I don't know /NR	1
NR	YES	1
	NO	6

Table 17: Frequency of students who would try drugs if they had the possibility, according to attended university

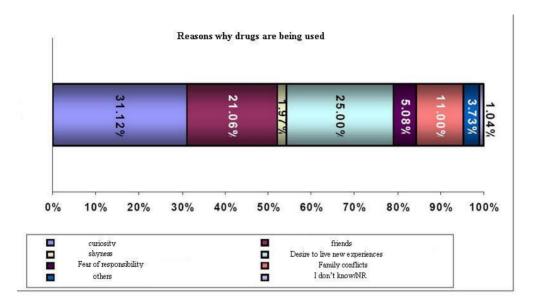
Question 14 (multiple choice) aims to capture the reasons who someone would start to use drugs. Our suggested answers were: *curiosity, friends, shyness, desire to live new experiences, fear of responsibility, family conflicts,* etc. the received answers were centralized in the table below.

curiosity	friends	shyness	Desire to live new experiences	Fear of responsibility	Family conflicts	Others	l don't know/NR	Total
300	203	19	241	49	106	36	10	964
31.12	21.06	1.97	25.00 %	5.08 %	11.00	3.73	1.04	100.00 %
	300 31.12	300 203	300 203 19 31.12 21.06 1.97	Since in the second s	SingleSingleSingleSingleSingleSingle300203192414931.1221.061.9725.005.08	300 203 10 Shynessift Curiosit 901 64 005 10 Shynessift 100 741 49 106 101 64 10 Shynessift 10 101 67 0005 10 10 101 67 0005 10 10 101 741 49 10 10 101 10 10 10 10 10 101 10 10 10 10 10 10 101 10 10 10 10 10 10 10 101 10 10 10 10 10 10 10 10 101 10	Single Single	Single Single

Table 18: Reasons why someone would use drugs

The cause most frequently brought up by respondents, regarding the temptation to use drugs, is considered the curiosity (31,12%), accompanied by the desire to live new experiences (25%). These causes may turn up as major risks for drug use temptation, if associated with the belonging to a group of friends where drugs are being consumed (21,06%).

"One could try drugs out of curiosity, but not out of the desire to shock. And even if it were so, let's say that one may try once, right? Let's say that out of the blue, one meets a strange person somewhere at a meeting, where there are no friends. But I'm thinking that this desire to shock cannot lead to regular use. So I'm telling you. This must be accompanied by the fact that one belongs to a group where one is encouraged to do so" (FG, April 2009)



Graph 7: Reasons why someone would use drugs

According to the above data, the main reasons for using drugs would be: *curiosity*, *desire to live new experiences* and *circle of friends*. Taken together, the answers which targeted these options represent more than three quarters (77,18%). 3,73% of all the answers refer to other reasons, among which the most notable was "boredom".

This question does not aim to capture the *supposed reasons* for using drugs (this is available only for those who have never used drugs) but the *real reasons* (available for drug users). In order to find their motivation, we selected from the answers to Question 13 (*Have you ever tried to use drugs?*) those persons who answered with YES and it's only for them that we tried to determine the reasons such as they result from the answers to Question 14 (*What is, in your opinion, the reason why drugs are being used?*)

Have you ever tried to use drugs?	What is, in your opinion, the reasons why drugs are being used?	curiosity	friends	shyness	Desire to live new experiences	Fear of responsibility	Family conflicts	others	l don't know/NR	Total
YES	frequency	41	24	1	34	6	5	3	1	115
	age of reason all answers	35.65 %	20.87 %	0.87 %	29.57 %	5.22 %	4.35 %	2.61 %	0.87 %	100.0 0%
	tage of drug er respondents	70.69 %	41.38 %	1.72 %	58.62 %	10.34 %	8.62 %	5.17 %	1.72 %	

Table 19: Reasons why someone would use drugs, according to drug users (Observation: In the case of percentages on the last row, the summed total is higher than 100, because Question 15 is a multiple choice one – the respondents were allowed to tick several answers)

58 persons answered affirmatively to Question 13 (they used drugs). Out of these persons, most of them (41, meaning 70,69%) consider as main reason for drug use *curiosity* (a reason which cumulates 35,65% of all the reasons ticked by the students). The next reason, according to 58,62% of the drug using students is *the desire to live new experiences* (an answer which recorded a percentage of 29,57 of the total). The list continues with: *friends, fear of responsibility* and *family conflicts*.

Drug use offer

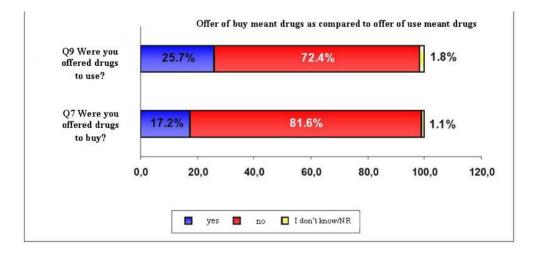
If Question Q7 referred to a possible offer to *buy* drugs, Question Q9 is a more general one, referring to *any offer*, hereby including the free drugs, offered by dealers or friends. The answers to this question appear in the graph and table below. One can notice that the percentage of drug use free offer (25,7%) is higher than that of drug buy offer (17,2%).

Were you offered drugs to use?							
	Frequency Percentage Cumulated percenta						
YES	112	25,7	25,7				
NO	315	72,4	98,2				
I don't know/ NR	8	1,8	100,0				
Total	435	100,0					

Table 20: Percentage of students who were offered drugs for usage

Naturally, the number of persons who were offered drugs for usage (generally) is bigger than the number of persons who were presented various drug sale offers. The difference – which is of 8,5% of all the respondents – is represented by free offers, "promotional" ones from the dealers, friends or other "benevolent" persons. At the same time, the correlations between the buying offer and the free consume offer indicate the risks of drug use and of developing distribution networks by means of consumers themselves. Thus, the 17,2% of the respondents who received the buying offer are also found among those who were invited to use for free.

"It happened to me: come on, take a smoke or two... The first time I tried it was for free. The first time is usually for free. I personally don't think marijuana is given to you for free at the beginning. One can give you a cigarette for free, if he or she has it. If so, this cigarette is from some acquaintances. There are certain neighborhoods, I don't know, I know people who take drugs. Yes, yes, anyway, it's a closed in circle. Now everybody's buying drugs, and clothes, and snickers. It's also true that it's hard to control it" (FG, April 2009)



Graph 8: Offer of purchase meant drugs as compared to offer of consume meant drugs

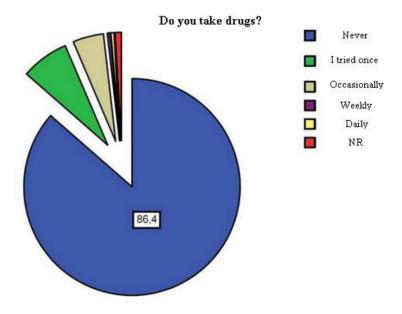
In short, one of four students was offered drugs for use and one in five students was offered drugs for sale.

Explicit drug use

Another important question is Q10 - Do you take drugs? - which asked the sample members both to define themselves from the usage viewpoint and to mention the frequency of such usage (by pre-established answers – never, I tried once, occasionally, weekly and daily). The distribution of the answers is noted and illustrated in the table, respectively the graph below.

Do you use drugs?						
	Frequency Percentage					
Never	376	86,4				
I tried once	31	7,1				
Occasionally	20	4,6				
Weekly	2	0,5				
Daily	2	0,5				
NR	4	0,9				
Total	435	100,0				

Table 21: Frequency of students' drug usage



Graph 9: Frequency of students' drug usage

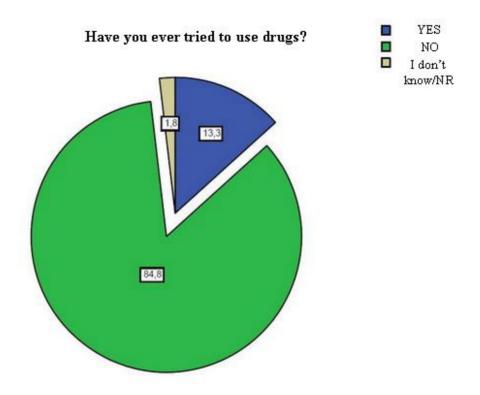
The data above show that 86,4% of the interviewed students have never taken any drugs. Of those who used drugs, 7,1% declare that they only tried once, after which they abandoned this practice, at current being non consumers. Only 5,6% of the subjects use drugs at present, on a somehow regular basis, which would mean, if turned into absolute values, 3470 students.

At the same time, if we should report the statistic data picked out from the questionnaire to the entire investigated population, one could estimate that a number of approximately 300 students take drugs on a daily basis, while other 300 students take them weekly. Furthermore, approximately 2850 students consume drugs occasionally while approximately 4400 have tried drugs once.

The honesty of the answers to this question (Q10) was checked by means of Question 13 - *Have you ever tried to use drugs?* – which was given the following answer variants: Yes, No and I don't know/NR. This question refers to the past, to a possible contact with drugs, without resulting in any appreciation over the current situation.

Have you ever tried to use drugs?					
Frequency Percentage					
YES	58	13,3			
NO	369	84,8			
I don't know/NR	8	1,8			
Total	435	100.0			

Table 22: Percentage of students who tried to use drugs in the past



Graph 10: Percentage of students who tried to use drugs in the past

By analysing the answers to the two questions – Q10 and Q13 – one can notice a difference of almost one percentage – 12,7% consumers resulted from Q10, as compared to 13,3%, as resulted from Q13 – which means that this difference allows us to appreciate that the respondents were sincere when they offered information on their past experience with this issue.

Have you ever tried to use drugs?	Have you ever tried to use drugs? Q.10 So you use drug		
	Never	8	
YES	I tried once	28	
	Occasionally	18	
	Weekly	2	
	Daily	2	
	Never	363	
NO	I tried once	2	
NO	Occasionally	2	
	NR	2	
I don't know/NR	Never	5	
	I tried once	1	
	NR	2	
Total respondents/answei	435		

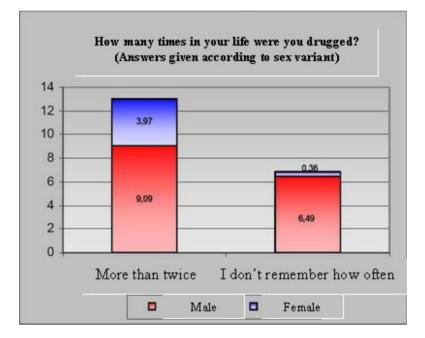
Table 23: Situation of students who tried/didn't try to use drugs in the past and				
who use/don't use drugs at present				

Question 16 asked the respondents to answer how many times they used drugs in their life. This raises for the students the problem of self-defining the status of "being drugged", which involves an important subjective component: some may define the status of being drugged after having taken a smoke from a marijuana cigarette, while others consider that one is drugged only if they injected extremely powerful drugs.

How many times in your life were you drugged?				
Sex		Frequenc y	Percent age	
Male	Never	128	83,1	
	More than twice	14	9,1	
	I don't remember how many times	10	6,5	
	NR	2	1,3	
	Total	154	100,0	
Female	Never	265	95,7	
	More than twice	11	4,0	
	I don't remember how many times	1	0,4	
	Total	277	100,0	
NR	Never	1	25,0	
	More than twice	2	50,0	
	NR	1	25,0	
	Total	4	100,0	

Table 24: Self-defining "drugged", according to sex

The results from the table above show that 83,1% of the boys and 95,7% of the girls have never been drugged, 9,1% of the boys and 4% of the girls used drugs more than two times, while 6,5% of the boys and 0,4% of the girls (namely only one person) have used drugs so many times that they lost track.



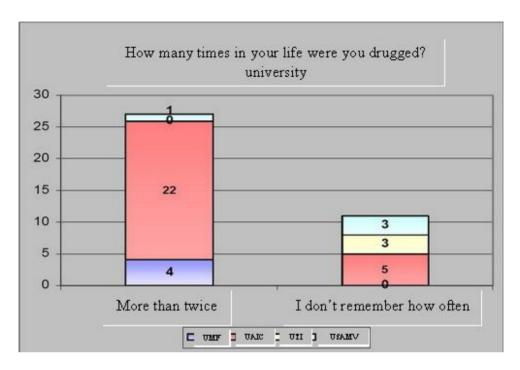
Graph 11: Self-defining "drugged", according to sex

In the graph above we illustrated, using various shades, the percentages of the boys and girls who used drugs "more than two times" and respectively "countless times".

The "Gheorghe Asachi" Technical University recorded the highest percentage of non consuming students (9,44%); the lowest percentage was recorded at the University of Agricultural Sciences and Veterinary Medicine (86,6%). Most of the students who used drugs "more than two times" are at the "Al. I. Cuza" University (8,84%) whereas the least are at the University of Agricultural Sciences and Veterinary Medicine (3,33%). Complete data on the answers provided by the students to Question 16 are found in Table 25.

How many times in your life were drugged?				
University		Frequency	Percentage	
UMF	Never	57	93.44	
	More than twice	4	6.56	
	Total	61	100.00	
UAIC	Never	221	88.76	
	More than twice	22	8.84	
	l don't			
	remember how	5	2.01	
	many times			
	NR	1	0.40	
	Total	249	100.00	
UTI	Never	84	95.45	
	l don't			
	remember how	3	3.41	
	many times			
	NR	1	1.14	
	Total	88	100.00	
	Never	26	86.67	
USAMV	More than twice	1	3.33	
	l don't			
	remember how	3	10.00	
	many times			
	Total	30	100.00	
NR	Never	6	85.71	
	NR	1	14.29	
	Total	7	100.00	

Table 25: Self-defining "drugged", according to university

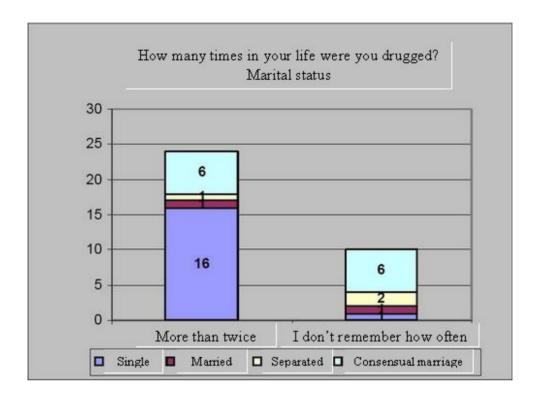


Graph 12: Self-defining "drugged", according to university

The same question referring to the use of drugs was also analysed according to the marital status of the respondent students, hereby resulting that, in percentages, most of the persons who have never used drugs are among the single ones. Among the married persons are those who used drugs more than twice.

How many times in your life were drugged?					
Marital status		Frequency	Percentage		
Single	Never	249	93.26		
	More than twice	16	5,99		
	I don't remember how many times	1	0,37		
	NR	1	0,37		
	Total	267	100,00		
	Never	8	80,00		
Morried	More than twice	1	10,00		
Married	I don't remember how many times	1	10,00		
	Total	10	100.00		
	Never	13	81,25		
Separated	More than twice	1	6,25		
Separated	I don't remember how many times	2	12,50		
	Total	16	100.00		
	Never	85	86.73		
	More than twice	6	6,12		
Consensual marriage	I don't remember how many times	6	6,12		
	NR	1	1,02		
	Total	98	100.00		
	Never	39	88,64		
NR	More than twice	3	6,82		
	I don't remember how many times	1	2,27		
	NR	1	2,27		
	Total	44	100,00		

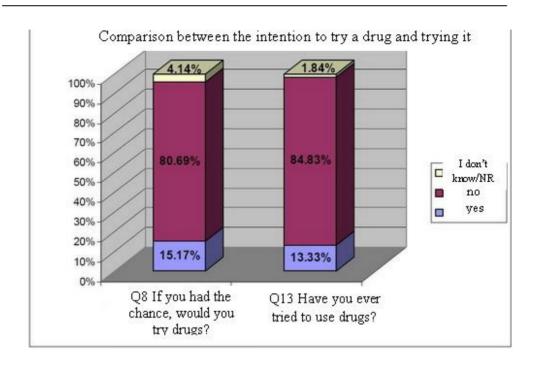
Table 26: Self-defining "drugged", according to marital status



Graph 13: Self-defining "drugged", according to marital status

From intention to usage

Question 8, *If you had the possibility, would you try drugs?* Is logically connected to Question 13, *Have you ever tried to use drugs?* since it connects two plans: the plan of intention with that of action.



Graph 14: Difference between students who would consume/have consumed or wouldn't consume/haven't consumed

Thus, as it can be seen from the graph above, the percentage of respondents who would use a drug at least out of curiosity decreases by 1,84% from the level of intention (15,17% would try a drug) to the level of action (13,33% who have already tried a drug). Such a behaviour is to be noticed also among undecided respondents or among those who did not answer the question, namely the percentage decreases from 4,15% for *Q8* to 1,84% for *Q13*, with a difference of 2,3%. In exchange, the percentage of the respondents who declared never having used drugs has increased by 4,14%, representing exactly the two differences shown above. In conclusion, we may argue that from the level of intention to use a drug up to the level of fact, the number of respondents modifies, with a decrease in the case of undecided or non respondent persons, and with an increase in the case of the ones who answers negatively (from *I wouldn't try any drug* to *I have never used drugs*).

Places where drugs are used

Questions Q11 and Q12 are multiple choice nominal questions. The respondents have the possibility to choose (to tick) several answer variants to the addressed question. Here we can calculate the frequency and the module.

Thus, for question Q 11 regarding the places where students **saw** drugs being consumed, we have the following frequency table.

		Percentage of	Percentage of
Name of	Number of	answers (in	respondents (in
answer variant	answers	total 714	total a sample of
		answers)	435 students)
Discos	118	16,53%	27,13%
Clubs	176	24,65%	40,46%
Smoke legal (weed shop)	49	6,86%	11,26%
In hostels	52	7,28%	11,95%
Private parties	130	18,21%	29,89%
Bars	31	4,34%	7,13%
At home	31	4,34%	7,13%
În other places	33	4,62%	7,59%
NR	94	13,17%	21,64%
Total	714	100,00%	

Table 27: Places where students saw drugs being used

The frequency table contains all categories of answers that were indicated by the sample members, together with the associated codes. In our case, the modal value (namely the dominant value, with the largest frequency) was recorded as the variant *Clubs* with 176 answers (24,65% of all the answers). This proves that among the places where students saw drugs being used, *Clubs* are the most preferred for such practice.

An interesting observation as to the participants to the focus group type interview relates to the fact that, even though the students saw drugs being used in the hostels, the students are not the dealers:

"But in the hostel I met students who sell drugs... there are some people who come, especially in Codrescu area, they are not students... They come from outside the hostel! Well, I don't know exactly where they come from, but I know from a friend who bought from there. Now, it also depends on which hostel we're talking about. If we're talking about SuperCopou area, there I haven't heard about drugs, the students are quiet. But if you go in Tudor area, especially in boys' rooms, you might find them. So there it is.... Mainly boys buy them, but there are also girls who buy, especially those who have money. Yes, they have a lot of money. One must have a lot of money to buy." (FG, April 2009)

This appreciation was made by the students who went frequently to such places (the fact that they saw points to the fact that they were there), and these students represent almost half (40,46%) of those investigated by the sample. The next enlisted preferred places for drug use are: *private parties* (18,21%) and *discos* (16,53%). One can notice that the place with the highest frequency of attending are those meant for having fun but also with a limited access to the public. The places which are exposed to the public (such as bars) or the intimate ones (such as home) have the lowest frequency, being both represented by 31% of all the answers.

On the other hand, weed-shops are considered places which encourage the use of drugs:

"I looked in a weed-shop, because the door was open... Well, I looked out of curiosity. There is one in Lapusneanu street. There is another one in Alexandru neighborhood. There are more. In Nicolina, in CUG areas. I saw one night on the news... they are dangerous, people got sick, they got into fights, there was scandal, between mob members. On Stefan cel Mare Avenue there is a coffee shop where drugs are used.... I understood that in Iasi there are around 30 such places. In my opinion, these shops encourage you to take even more powerful drugs... when you are not satisfied with something light, you go to a stronger one. Once you can afford something, you can try something else." (FG, April 2009)

For question Q12 regarding the places where students **heard** about drugs being used, we produced the following frequency table.

Name of answer variant	Nr – Number of selected answers	Percentage of answers (in total 1106 answers)	Percentage of Respondents (in total a sample of 435 students)
Discos	205	18,54%	47,13%
Clubs	260	23,51%	59,77%
Smoke legal (Coffee shop)	82	7,41%	18,85%
În hostels	128	11,57%	29,43%
Private parties	215	19,44%	49,43%
Bars	92	8,32%	21,15%
At home	65	5,88%	14,94%
În other places	24	2,17%	5,52%
NR	35	3,16%	8,05%
Total	1106	100,00%	

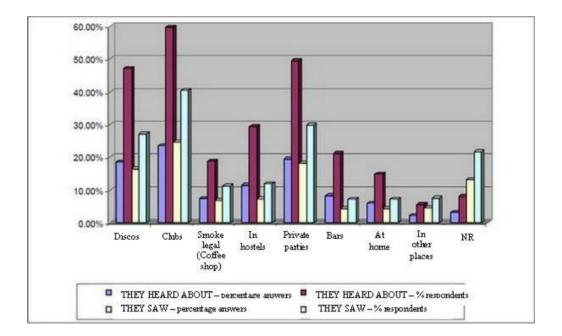
Table 28: Place where students heard about drugs being used

The dominant value here, just like in the case of the previous question, was also recorded by the variant *Clubs*, with a 23,51% percentage from all the answers provided by the respondent students. As for the preferred places where students heard about drugs being used, the previous order was kept: *private parties* (19,44%) and *discos* (18,54%).

"I never saw drugs in discos. They may be consumed there, but it's not in the open. You either go out... like I saw in hostels, but in discos, everybody is told to take off their coat and be checked, especially the boys, less the girls. The questionnaire shows that boys are more... Anyway girls are allowed to go in, while boys are stopped and controlled. I entered some club at some point, I don't remember what my business was there but there was a very strong smell inside." (FG, April 2009)

If we should compare the two previous questions from the questionnaire, we can notice that the number of the answer variants the respondents selected (ticked) are much more numerous in the second case. This may be explained by the fact that the fact-based identification of drug using places (where **have you seen** drugs being used) is a more strict one, since it supposes a sure answer given by the students\ own presence in that place, whereas the rumour-based identification (where **have you heard** drugs being used) is an easier one, and the answers can be provided more easily.

Beyond the above explanation, we can calculate for each answer variant the percentage it obtained from all the ticked variants, this operation being executed for both cases above in view of a comparison.



Graph 15: Number of respondents/answers that refer to hearing about/seeing places where drugs are being consumed

Places where drugs are being used	THEY SAW – percenta ge of answers	THEY SAW – percenta ge of responde nts	THEY HEARD ABOUT – percenta ge of answers	THEY HEARD ABOUT – percentag e of responden ts
Discos	16.53%	27.13%	18.54%	47.13%
Clubs	24.65%	40.46%	23.51%	59.77%
Smoke legal (Coffee shop)	6.86%	11.26%	7.41%	18.85%
În hostels	7.28%	11.95%	11.57%	29.43%
Private parties	18.21%	29.89%	19.44%	49.43%
Bars	4.34%	7.13%	8.32%	21.15%
At home	4.34%	7.13%	5.88%	14.94%
În other places	4.62%	7.59%	2.17%	5.52%
NR	13.17%	21.64%	3.16%	8.05%

 Table 29: Number of respondents/answers that refer to hearing about/seeing places where drugs are being consumed

Thus, it proves important to mention that not only the answer variants obtained a lower score if we compare the places where students *saw* drugs being used to the places where students *heard about* drugs being used (for example: discos – 16,53% as compared to 18,54%, private parties – 18,21% as compared to 19,44%) but also the students who "ticked" the answers were considerably less (for example discos – 27,13% as compared to 47,13%, private parties – 29,89% as compared to 49,43%).

The answer variant *Clubs* was dominant among the choices made by the respondents in both situations presented above. It is interesting to notice the fact that, even though the percentage of respondents who chose based on fact / *they saw* (40,46%) **is lower than** that of the students who chose based on rumours / *they heard about* (59,77%), the percentage of *Clubs* among all the answer variants is higher (24,65%) in the first situation as compared to the second one (23,51%). This may be explained by the fact that even if there were more students (by 19,31%) who ticked the variant *Clubs* as answer to the second question, they also ticked many other variants, which consequently lead to a diminishing percentage of *Clubs* among all the answers up to 23,51%.

Solutions to reduce the use of drugs

Ouestion 14 asked the students to formulate at most three measures which, if applied, could lead to reducing the use of drugs. We cumulated all the given answers, resulting 434 answers (only 37 of the sample members answered all three possible variants while 165 did not answer any of the questions). The classification, according to the answer frequency order, appears in the table below, where the first place (with almost one third of the answers) is taken by various coercive measures (such as increasing fees, introducing or hardening imprisonments, more drastic controls at the Customs or in places known for drug use). It must also be mentioned that, even if most of those who formulated this answer referred to coercive measures applied to dealers, few of them also meant these measures to be applied to the consumers as well. On the second place (at a small distance from the coercive measures) there are the campaigns of information about drug effects as well as the antidrug campaigns rolled out by means of mass media. The following enlisted options are: the drug use prevention methods, promoted by means of educational instances (family, school, governmental and nongovernmental institutions), forbidding the drug trade (referring mainly to the semilegal trade which flourished lately), allowing the drug trade (with the same number of answers), legalizing light drugs, etc. The name of "others" groups all the answers which obtained less than 8 answers -54 in total.

Type of measure	Frequenc y	Percentage
Coercive measures (fees, imprisonment, controls)	135	31,11%
Information/antidrug campaigns	127	29,26%
Better education/counseling in schools/courses	33	7,60%
Prohibiton of drug trade	22	5,07%
Legalizing light drugs	22	5,07%
Psychological support for addicted persons	16	3,69%
Inexistence/full prohibition	13	3,00%
Counseling/treatment centres	12	2,76%
Others	54	12,44%
Total answers	434	100,00%

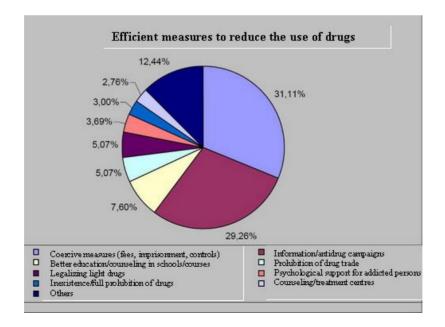
Table 30: Solution to reduce the used of drugs

We can notice that, beyond the coercive measures (31,11% of the respondents consider them as the main measure necessary to reduce the use of drugs), the antidrug information campaigns represent a way to discourage this phenomenon (29,26% of the respondents):

"I honestly do not choose the antidrug campaigns. Instead of taking drugs, I was running antidrug campaigns. It destroyed my curiosity" (FG, April 2009)

On the other hand, antidrug campaigns are considered as more efficient if oriented towards school and high school students, since they are most vulnerable to the risks of using drugs.

"It's already too late for a campaign among students... It's late. One should consider 7th or 8th grade. Or maybe some consequence awareness campaigns among children from grades 5 to 8. or even younger, in order to be more efficient. I don't know, I think more about alternatives, or making them understand that liberty means also responsibility. When I watch those films about cocaine, how you enter withdrawal...it's really impressive and scary. And when you see at some point so many fliers, you really think about this phenomenon. Now the phenomenon really exists, but when I was little it was not like that. It's something else when you receive them while you're in high school... or when you're younger, at secondary school, grades 5 to 8, only to memorize the image of that man living in cartons and peeing on himself... "(FG, April 2009)



Graph 16: Solutions to reduce the use of drugs

Conclusions

The use of drugs among students has become a more and more known practice. More and more students are no longer surprised with their drug consuming colleagues. One of five students knows about this use and less than half say that they don't have colleagues who use drugs. Likewise, one third of the respondents declared that they have friends (not necessarily colleagues) who use drugs. The students' circle of consumer friends is relatively closed; two thirds did not answer or declared not having such friends, while one third declared that the number of acquaintances with such habits is at most 5.

In Iasi there are approximately 3400 drug consumer students. Among these, approximately 600 are addicted (they use drugs daily or weekly) whereas approximately 2800 use drugs occasionally. The estimation absolute value for the number of students who tried to use drugs is of 4400.

The drug mostly consumed is marijuana, followed by hashish. Considered more accessible and less damaging, marijuana and hashish are the main drugs used by students.

The spaces mostly frequented for the use of drugs are the clubs. Although the tendency of the population is to consider discos as the spaces most exposed to the risk of drug use, the respondents consider that inside clubs drugs are being used (23,51% of the answers).

When respondents know about *the origin of drugs*, they seem to be obtained mainly from acquaintances/friends, from dealers/ in the street and from weed-shops.

Generally the use of drugs starts before becoming a student. Consequently the temptation to use drugs is lower among students. Although, as already mentioned, the phenomenon of drug use has already entered the social normality, more than 80% of the students who answered the questionnaire said that they would never use drugs if they were given the chance. Actually, 86,4% of the respondents never used drugs.

The biggest temptations for starting to use drugs are the curiosity and the desire to live new experiences. 7,1% tried drugs only once and only 5,6% use them somehow regularly. The 15% of the sample students who would, at some point, be tempted to try drugs, would do it out of curiosity (31,12%), of the desire to live new experiences (25%) or under their friends' pressure (21%).

The free offer of drugs represents a form of attracting students towards the use of drugs. These statistic data show that one quarter of the students from the sample was offered, one way or another (not only to buy), drugs to be used.

The clubs are the main place to use drugs. According to the received answers, clubs would be the best known places to use drugs, followed by private parties and discos. This classification might be useful in a future drug use prevention strategy in view of focusing the attention of competent authorities.

Involving the authorities and providing antidrug information-education-communication campaigns represent the most important solutions identified by the students in order to discourage the use of drugs. Likewise, we should mention the main measures which the students consider useful for the reduction of drug use. The most efficient measures would be the coercive ones (increasing fees, introducing or toughening the imprisonment punishment, more drastic controls at the Customs or in places mostly open to use, followed by campaigns of information about drug effects as well as antidrug campaigns rolled out by means of mass media.

Weed shops represent a temptation towards the use of drugs. The focus group participants consider that legalizing the drug trade and the use of certain types of drugs in specialized shops encourage the use of illegal drugs, especially due to the fact that young people attend such places. Therefore, a solution for diminishing the use of drugs would be to limit the activity of these distribution networks.

At the "Alexandru Ioan Cuza" University there is the most visible drug use among students. Data offered by the respondents show that 52% of the participants to this survey know fellow students who use drugs.

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Description of lasi Caritas DC 's projects

Caritas Diocesan Centre of Iasi is an association of public utility, without a patrimonial purpose, non profit, of humanitarian type, which acts in the field of community social services, having as main goal to provide Christian charity.

On the 14th of May 2008, Caritas Diocesan Centre of Iasi was acknowledged as an association of public utility by means of Romanian Governmental Decision nr 494. After receiving the Excellency prize in providing social services for the year 2007, from the Town hall of Iasi County, this governmental acknowledgement of the public utility represents the accomplishment of the quality work performed by a team of specialists, starting 1993, a conjugated effort based on the ideas of charity and love towards the others.

According to the status of the organization, here are the activities rolled out in the area of community social services:

- (1) Complex social education in the field of underprivileged children and young people
- (2) Social assistance of and participation in the rehabilitation of disabled persons
- (3) Medical, social and pharmaceutical projects
- (4) Social assistance for the elderly people in difficulty
- (5) Social assistance for the families and persons in difficulty
- (6) Social and cultural-educational programs
- (7) Promoting and supporting the development of an efficient system to protect socially assisted categories in Romania

Antidrug Prevention, Assessment and Counseling Office

The antidrug program has been working in Iasi since the 1st of November 2006. This office was founded due to the fact that our country has become, over the past few years, an open market for drug trade and not only a transitory land.

Target group: **Young people** at risk about the use/traffic of drugs as well as those who already started to use legal and illegal drugs.

On 18th of September 2008, the activities developed by the Antidrug Office within "Caritas Diocesan Centre of Iasi" were certified by the "Commission for Certification of Social Services Suppliers" within "Iasi Division for Labour, Social Solidarity and Family" as "Antidrug Prevention, Assessment and Counseling Social Service".

On 22^{nd} of September 2008, in Cluj Napoca, the post university course entitled "Basic formation in the field of addictions – De Hoop Model" ended up, with a total of 272 hours of theoretical and practical training. By obtaining the graduation certificate issued by the National Antidrug Agency and by the "Centre of Formation and Research in the field of Addictions", as a result of the exams sustained by the employees, the Antidrug Office acquired the quality to provide counseling services to drug consumers.

Antidrug team:

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Other programs implemented by Caritas Diocesan Centre of Iasi

The program for young people and children, composed of several projects and acting since 1993 up to present day:

Sf. Iosif Placement Centre hosts orphan and / or abandoned children offering the family environment necessary to a normal development.

Don Bosco Resource Centre for Chidren and Young People is an after-school type of project, whose purpose is to prevent truancy among pupils of young ages. By means of this project we offer assistance, counseling and support to every child; free tuition for basic school subjects; material help (food, clothes), counseling for direct beneficiaries and their parents.

The Socio-professional insertion centre aims at offering an alternative to young people obliged to leave the placement centres because of their age (18), by means of training them in the field of carpentry and placing them on the labour market.

The Counseling Office for Disabled Persons, initiated in 2001, has the purpose to improve the life standard and to integrate in the community the disabled persons.

The goals of the project are: providing information and moral support; providing wheel chairs, frames, crutches; organizing courses for parents and group activities inside the community; forming, informing, counseling and material support for disabled persons.

Home Care Services is a program initiated in 2000, through which we offer social assistance and medical care services at the home of those persons who, due to their social, physical and/or psychical condition as well as their age, are isolated in bed or at home. Services from this project are offered to beneficiaries in Iasi, Bacau, Roman, Suceava, Husi, Onesti, Saveni, Halaucesti, Iugani, Sabaoani, Sagna, Rachiteni Iugani. In 2008 a number of 1808 persons from all over Moldova county benefited from this project.

Social Assistance Office has been working since 1992, with the purpose to contribute to the social inclusion of underprivileged categories, by providing assistance and counseling, information and formation for adults in crisis situations. Over 300 families from Iasi are being assisted every year.

Program of intervention in case of emergency situations and natural calamities is meant to help people victims of disasters in case of floods, earthquakes or fires. It is a permanent program, which started in 2000 and which becomes operational every time nature unleashes through calamities or disasters, earthquakes, fires or floods.

Management team:

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