

# 2017 Texas Survey of Substance Use Among College Students

Miner P. Marchbanks III, PhD      Kash Krinhop, MA

Aaron Williams      Charles T. Johnson

Young-No Kim, MS      Nicholas T. Davis, PhD

Zachariah E. Brattin

August 31, 2017

## **1 Introduction**

Building on similar surveys conducted in 1997, 2005, 2013, and 2015 PPRI implemented a survey of 31,492 students at institutions of higher education across Texas in the Spring of 2017 to assess the prevalence of alcohol, tobacco, and illicit drug use on college campuses and community college districts. Out of 65 schools/districts invited to participate, 52 provided the necessary information to survey their student bodies. The original sample consists of 18 large 4-year universities, 20 small 4-year universities, and 26 2-year colleges or districts. While the 2017 survey improves and extends upon the 2015 survey, many of the same questions were asked, allowing for comparability between the 2 years.

This report summarizes the main findings of the survey. In particular, it outlines patterns of licit and illicit substance use amongst college students, behavior associated with substance use, the demographics associated with

substance use, and some of the consequences of substance use as perceived by respondents. This report also examines how substance use has changed amongst college students since the 2015 survey was conducted.

## 2 Methodology

Sampling was performed similar to the 2015 survey, with colleges being drawn at random from each of 4 strata: large 4-year universities, small 4-year universities, large 2-year colleges and small 2-year colleges. All schools and/or junior college districts with more than 10,000 students were sampled. Schools that did not include emails as "directory information" under the Family Educational Rights and Privacy Act of 1974 (FERPA) were excluded from the sample due to their inability to provide the research team emails. Participation by schools was strong, with 80% of invited schools electing to participate in the study. While much higher, response rate is not directly comparable to the 2015 survey (62%) because the 2015 study did not exclude schools based upon their classification of emails as not being directory information. We then sampled all students from each institution that provided emails to receive invitations to take the survey. Survey administration was conducted entirely online. Potential respondents received an invitation by email with a link to take the survey. They also received 4 reminders spaced 4-6 days apart. Invitations were emailed over the course of about 2 months in the Spring of 2017.

The desired population was students enrolled in at least 5 hours of college coursework between the ages of 18 and 26. Students who did not meet these requirements were excluded from the survey after answering several screening questions. Just over 694,000 survey invitations were sent out and nearly 4,500 e-mails "bounced-back." We are unable to ascertain the number of emails that were caught by institutions' filters or went to accounts that students rarely use; however, we did exclude students from 6 campuses that

had extremely low response rates—indicating they most likely were flagged as spam. The research team did, though, work with Microsoft (a major third party e-mail vendor) to ensure that our e-mails were formatted in a manner that would minimize the likelihood of triggering a spam flag. After removing incomplete responses and ineligible respondents from the 31,492, 18,393 surveys were received. As an additional safeguard, individuals who responded they used the fictitious drug somatajim were removed from the study as well. Fortunately, only 66 individuals fell in this category, leaving 18,327 responses.

The survey consisted of 9 sections, with about 200 questions total. Respondents were asked about alcohol, tobacco, prescription drug, and illicit drug use. They were also asked to answer demographic questions, questions about their parents and their personal backgrounds, questions about their mental health, questions about campus policies towards drug and alcohol use, and questions about other behaviors like internet usage and drunk driving. The survey instrument went through few modifications between 2015 and 2017, with the primary difference being the removal or rewording of a handful of questions.

Due to the sampling procedure, which first sampled campuses and then sampled students within campuses, post-stratification weights were applied to the data. A post-hoc adjustment for respondent gender was also applied. All the survey findings in this report are weighted unless otherwise noted.

## **3 Patterns of Substance Use and Abuse**

### **3.1 Overall Usage**

Table 1 shows the percentage of survey respondents who indicated they had used 1 of 15 different types of drugs in their lifetime, in the past year, or in the past month. Overall, usage declined when compared to the 2015 survey. Figure 1 shows statistically significant differences in past year drug usage

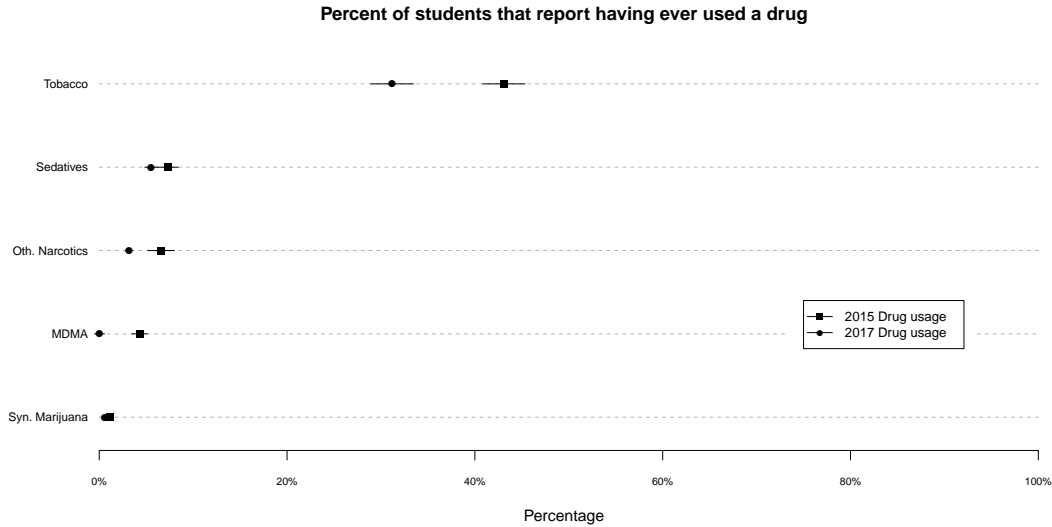


Figure 1: Percent of students that report having used a drug in the past year (statistically significant differences only)

between the 2015 and 2017 surveys. Simple logistic regression tests show that past-year college tobacco use decreased substantively, from around 43% to about 31%. None of the drugs showed a significant, past-year increase. On the other hand, sedatives use declined from approximately 7% to under 6%. Further, use of narcotics other than heroin declined from 7% to 3%. Past-year usage of MDMA declined from 4% to 3% and synthetic marijuana had a small, but significant decline from 1% to 0.6%.

### 3.2 Alcohol

About 79% of respondents report that they have used alcohol in their lifetime, while 73% report having used it in the last year and 58% report having used alcohol in the past month. Thinking about their drinking habits in the month preceding the survey, respondents reported that they typically preferred to drink liquor (27% of respondents) to anything else, with beer a close second (25%). 12% of respondents reported typically drinking wine,

Table 1: Drug usage by Texas college students, total and by gender.

Drug	Lifetime Use			Past-Year Use			Past-Month Use		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Alcohol	78.7%	78.4%	79.0%	72.6%	71.4%	73.5%	57.6%	57.5%	57.8%
Tobacco	46.5%	52.9%	41.7%	31.2%	39.1%	25.1%	18.2%	24.5%	13.3%
Inhalants	2.9%	3.8%	2.1%	1.0%	1.5%	0.6%	0.3%	0.5%	0.1%
DXM	6.2%	7.1%	5.4%	3.2%	3.5%	3.1%	1.0%	1.2%	0.9%
Marijuana	39.4%	41.5%	37.7%	27.5%	29.8%	25.7%	15.9%	17.9%	14.3%
Synthetic Marijuana	5.2%	6.1%	4.5%	0.6%	0.6%	0.6%	0.1%	0.1%	0.1%
Cocaine	7.3%	9.1%	5.9%	4.1%	5.3%	3.1%	1.5%	2.1%	1.0%
Stimulants	5.1%	7.0%	3.5%	3.0%	4.2%	2.0%	1.3%	2.0%	0.7%
Sedatives	10.2%	10.8%	9.7%	5.5%	5.9%	5.2%	2.5%	2.8%	2.2%
Hallucinogens	9.4%	13.2%	6.4%	4.6%	7.1%	2.7%	1.5%	2.5%	0.8%
Heroin	0.8%	1.3%	0.4%	0.2%	0.3%	0.1%	0.0%	0.1%	0.0%
Other Narcotics	7.9%	9.7%	6.5%	3.2%	4.0%	2.5%	1.0%	1.4%	0.7%
Steroids	1.1%	1.7%	0.6%	0.4%	0.7%	0.2%	0.2%	0.3%	0.1%
Bath Salts	0.9%	1.3%	0.6%	0.3%	0.5%	0.1%	0.1%	0.2%	0.1%
MDMA	7.0%	8.1%	6.2%	3.0%	3.9%	2.3%	0.8%	1.0%	0.7%

\* Since the cells are precise only to one decimal place, values smaller than 0.1% are displayed as 0.0%

and 9% reported typically drinking a ready-made drink like a cooler. Asked how they would describe themselves in terms of their alcohol use, 17% of respondents reported that they abstain from alcohol completely, 56% described themselves as light drinkers, 24% described themselves as moderate drinkers, 3% described themselves as heavy drinkers, and about half of 1 percent of respondents described themselves as problem drinkers.

About 37% of male respondents report that they had 5 or more drinks in a single sitting at least once in the 30 days preceding the survey. Amongst females, 34% report having had 4 or more drinks in a single sitting in the preceding 30 days. About 4% of women and 7% of men report that they drank in these quantities at least 6 times in the preceding 30 days. On average, respondents said they had had enough alcohol to feel drunk 2.2 times in the preceding 30 days. These figures represent slight decreases from the 2015 survey administration, the reduction in female binge drinking was statistically significant.

11% of underage respondents used a fake ID to obtain alcohol, but 19% reported that they were able to obtain alcohol at bars or stores because they simply weren't carded. Students were asked where they were usually able to obtain alcohol without being carded and reported that restaurants were easiest (28%), followed by off-campus bars (19%), gas stations (19%), grocery stores (15%) and finally on-campus bars (4%). Underage students frequently obtained alcohol from others: 70% obtained alcohol from a friend who was over 21, 49% report that they obtained alcohol from a parent or relative, and 35% obtained alcohol from a friend who was under 21 themselves. The decline in not being carded was a significant drop from the 2015 survey implementation, as was the decrease in being able to obtain alcohol from an off-campus bar, gas station, and from an over-21 friend.

Figure 2 shows how alcohol usage in the past year breaks down by sex, ethnicity, and age.

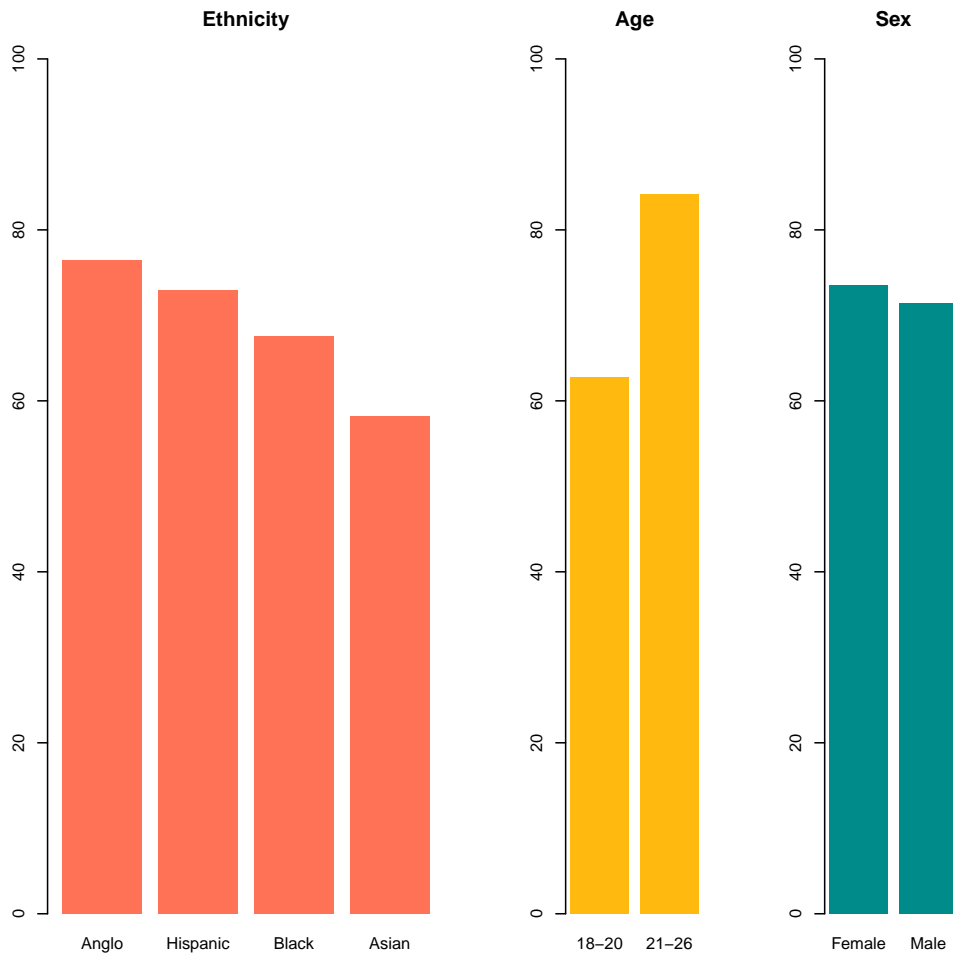


Figure 2: Percent of students that report having used alcohol in the past year, by sex, ethnicity, and age

### 3.3 Other Substances

Tobacco use fell significantly compared to the 2015 survey. 31% percent of students report having used tobacco in the past year, down from 43% in 2013. About 24% of respondents who have used drugs in the past reported that they use more drugs now than when they entered college, virtually the same as 2015 (25%). Another 48% report that their use of drugs has decreased or stopped altogether compared to 49% in 2015. The vast majority of students who report that they used drugs at least once this academic year say they typically use marijuana (89%).

Prescription drug abuse was substantive, but not the norm, with 22% of students reporting that they had used a prescription drug with the intent of getting high. This represents a substantive and statistically significant decrease from the 26% reported in 2015. Stimulants such as Ritalin were the most commonly abused prescription drug, with about 13% of respondents reporting that they had used these medicines for the experience or feeling it gave at some point in their lives. Most respondents were infrequent users; however, 7% had used stimulants in the past year, and 3% of students had used them in the preceding month. About 11% of respondents had used pain killers such as Vicodin, OxyContin, or Codeine for the feeling in their lifetime; with 4% reporting usage in the past year, compared to 1% in the past month. Over their lifetimes, 9% used a benzodiazepine to get high, 6% reported using sedatives such as Ambien, or Soma and about 7% reported using a cough suppressant such as DXM for the feeling it provided. Overall, there was a reduction in lifetime usage of pain killers such as OxyContin (11% vs.16%) and muscle relaxers such as Ambien (6% vs. 9%). For those that abuse prescription drugs, the most common way to obtain prescription drugs was from someone with a prescription (55%), followed by a doctor's prescription (about 38%), someone without a prescription (27%), home medicine cabinet (20%), stealing it (9%), and finally from an on-line outlet (4%). No significant differences existed between this survey and the 2015 survey in method of



obtaining prescription drugs.

Tables showing drug usage breakdown by demographic characteristics can be found in Appendix A.

## 4 Behaviors associated with substance use

### 4.1 Academics

Students who do not use illicit drugs have a slightly higher grade-point, on average, than those that do use drugs (3.40 vs. 3.24). Figure 3 shows all respondents reported grade point average with different colored points indicating different levels of drug or alcohol use.<sup>1</sup> Color density for each of the 3 colors is fairly uniform throughout both graphs, although there is a bit of differentiation between heavy drinkers, moderate drinkers, and light drinkers. Unweighted t-tests confirm the graphical story told in Figure 3. The difference between the grade-point average of monthly drug users (3.20) and casual drug users (3.26) is statistically significant.<sup>2</sup> Those who have never used illicit drugs have an average GPA of 3.40. In regards to drinking, there is a small but statistically significant difference between grade point averages for moderate and heavy drinkers (moving from an average GPA of 3.29 to a GPA of 3.13). Abstainers have an average GPA of 3.39, which is statistically significantly higher than the GPA of moderate drinkers.

Just over 6% of self-reported light drinkers report that drinking has caused them to miss a class. A bit more than 22% of moderate drinkers say they missed a class at least once during the school year due to drinking, while 44% of those who identify as heavy or problem drinkers have missed at least 1 class due to drinking. Heavy drinkers are also likely to report that their

---

<sup>1</sup>The vertical dimension is meaningless. The points have been vertically and horizontally “jittered” for interpretability.

<sup>2</sup>The letter grades provided in the survey and depicted in the graphic were converted to a GPA using the College Board’s formula.

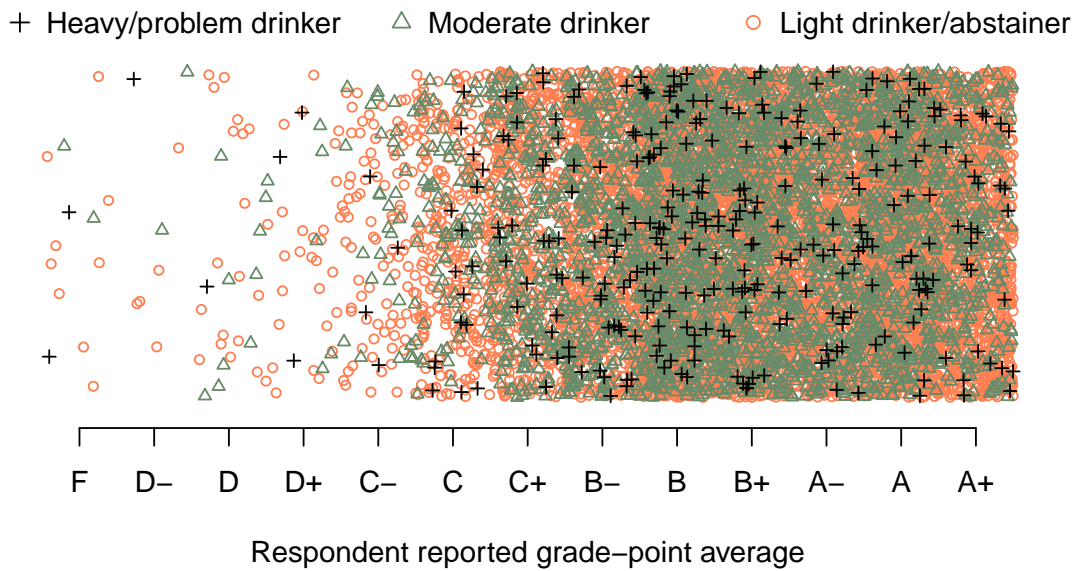
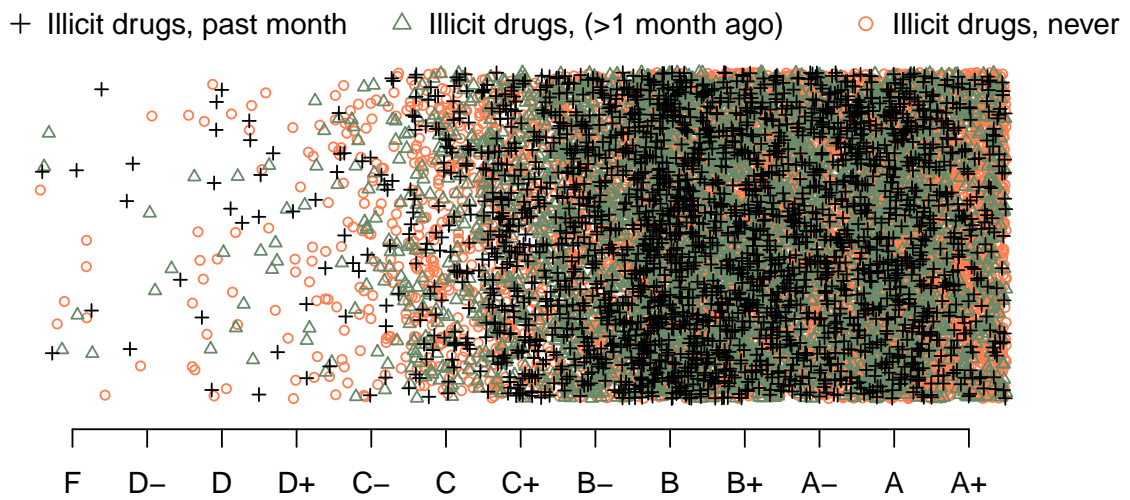


Figure 3: Grade point average vs. illicit drug use and alcohol use

drinking causes them to get behind on their school work, with 46% of heavy and problem drinkers choosing this option vs. 27% of moderate drinkers and about 9% of light drinkers. Compared to heavy drinkers, illicit drug users do not report as many problems with their academic responsibilities. Of respondents who report having used an illicit drug in the preceding month, 16% say they missed a class due to drug use and fewer than 25% of monthly drug users say that drug use has caused them to fall behind in their school work.

## 4.2 Outside the classroom

For students surveyed, alcohol use is associated with unsafe sexual practices. 24% percent of moderate drinkers and 42% of heavy or problem drinkers report that they have engaged in unplanned sex at least once during the academic school year due to alcohol consumption. The pattern is similar for engaging in unprotected sex: 21% of moderate drinkers and 37% of heavy/problem drinkers report that they engaged in unprotected sex due to alcohol consumption, compared to just under 7% of light drinkers. Unplanned and unprotected sex is not as strongly associated with drug use. 11% of students who used drugs in the preceding month say that drug use has led to unplanned sex at least once, and 11% say that drug use has led to unprotected sex.

Drug users also rarely report causing themselves physical harm due to drug use. Fewer than 6% of past-month illicit drug users reported that drug use led to them hurting or injuring themselves. Again, the rates for drinkers are higher. Over 9% of all drinkers report having hurt or injured themselves as a result of drinking. Amongst heavy or problem drinkers, almost 36% report having hurt or injured themselves. Just over 1% of all drinkers report having needed medical treatment for an alcohol overdose, and 5% of heavy/problem drinkers report having needed medical attention for an overdose. Figure 4 reports these and other data on the potentially harmful

behaviors drinkers and illicit drug (lifetime) users engage in.

## 5 Perceived risks and school policies

### 5.1 Reasons for quitting and perceptions of danger

Respondents were asked if they had ever felt they should quit using alcohol or reduce their consumption of alcohol. If a respondent replied they had, follow-up questions were asked to determine what factors influenced the respondent's decision. Just over 17% of students said that they had decided to quit consuming alcohol or reduce their consumption of it at some point in their lives, a dramatically lower number than 2015 (46%) when the survey contained the phrase, "...for even a short period of time." Given the results, this clearly affected the response. Given this, no comparisons of the reasons for considering quitting between 2015 and 2017 will be made. The most popular reason for quitting or cutting back was that it was too expensive (70%) followed by a fear of drinking and driving (62%). In addition, weight gain was mentioned by 59% of those who considered quitting drinking. Figure 5 shows each of the reasons the survey asked about and the percent of students who picked each one.

Respondents were also asked which illicit drugs they believe are the most dangerous for a person of their age. Respondents could answer that the drug was very dangerous, somewhat dangerous, not very dangerous, or not at all dangerous. For every drug except marijuana and DXM, at least 80% of respondents said that the drug was somewhat or very dangerous. 37% of respondents said that marijuana was somewhat or very dangerous. The drug students perceived as most dangerous was heroin, followed by cocaine or crack (both 96%). Figure 6 shows the percentage of students who believed a drug was somewhat or very dangerous for each of 13 drugs. Also included is the fictitious drug Somatajim, which outside of marijuana is appropriately seen as the least dangerous drug. Of concern, there was a statistically sig-

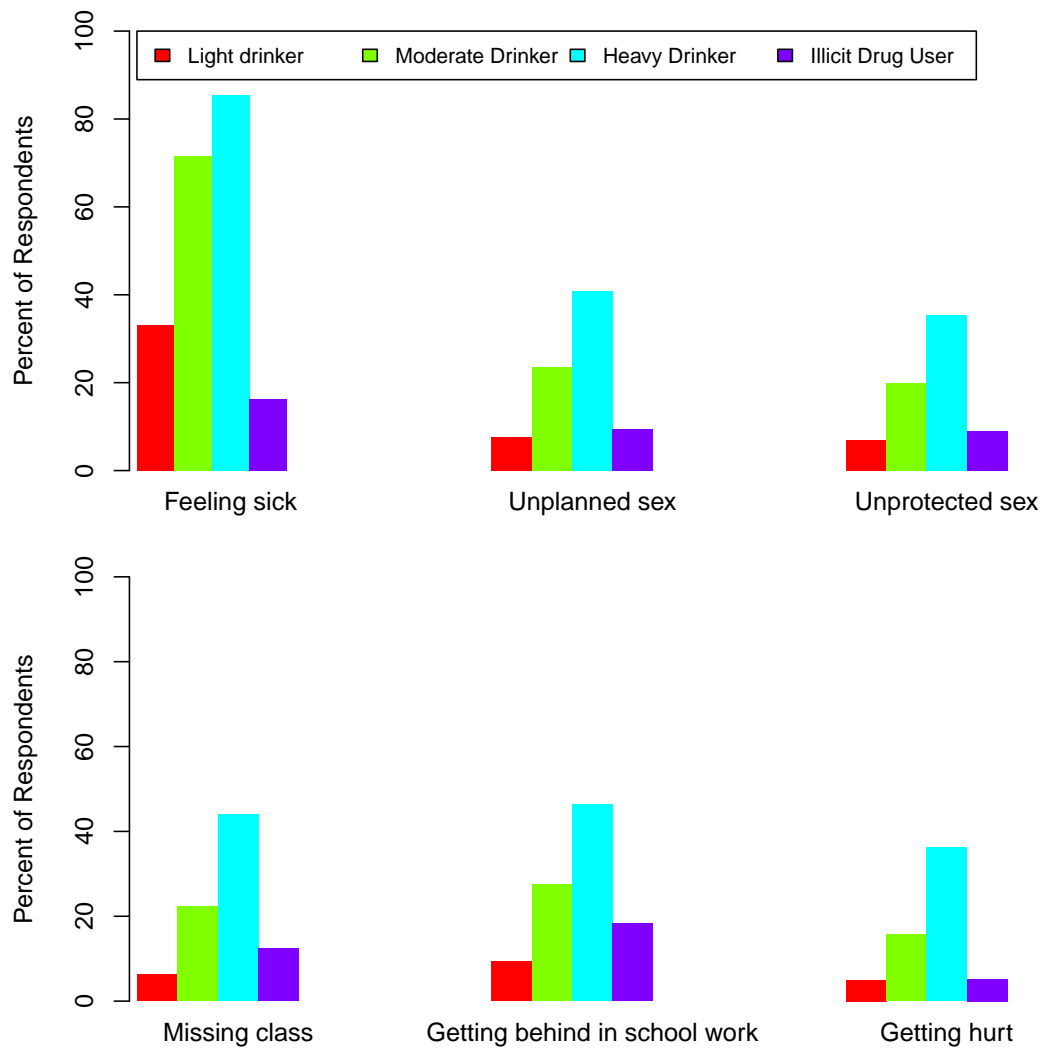


Figure 4: Percent of students who reported that they experienced 1 of 6 behaviors as a result of drinking or taking drugs, by drug and alcohol use pattern

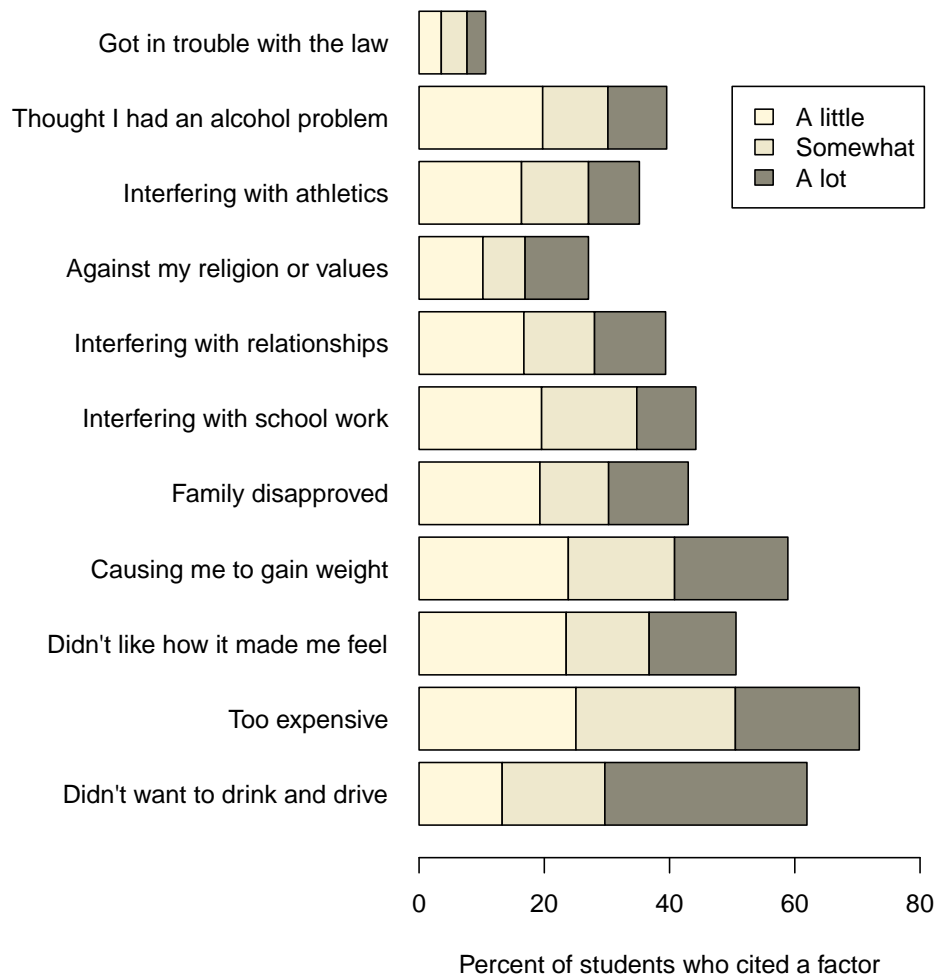


Figure 5: Reasons that students said led them to quit drinking or reduce their consumption of alcohol

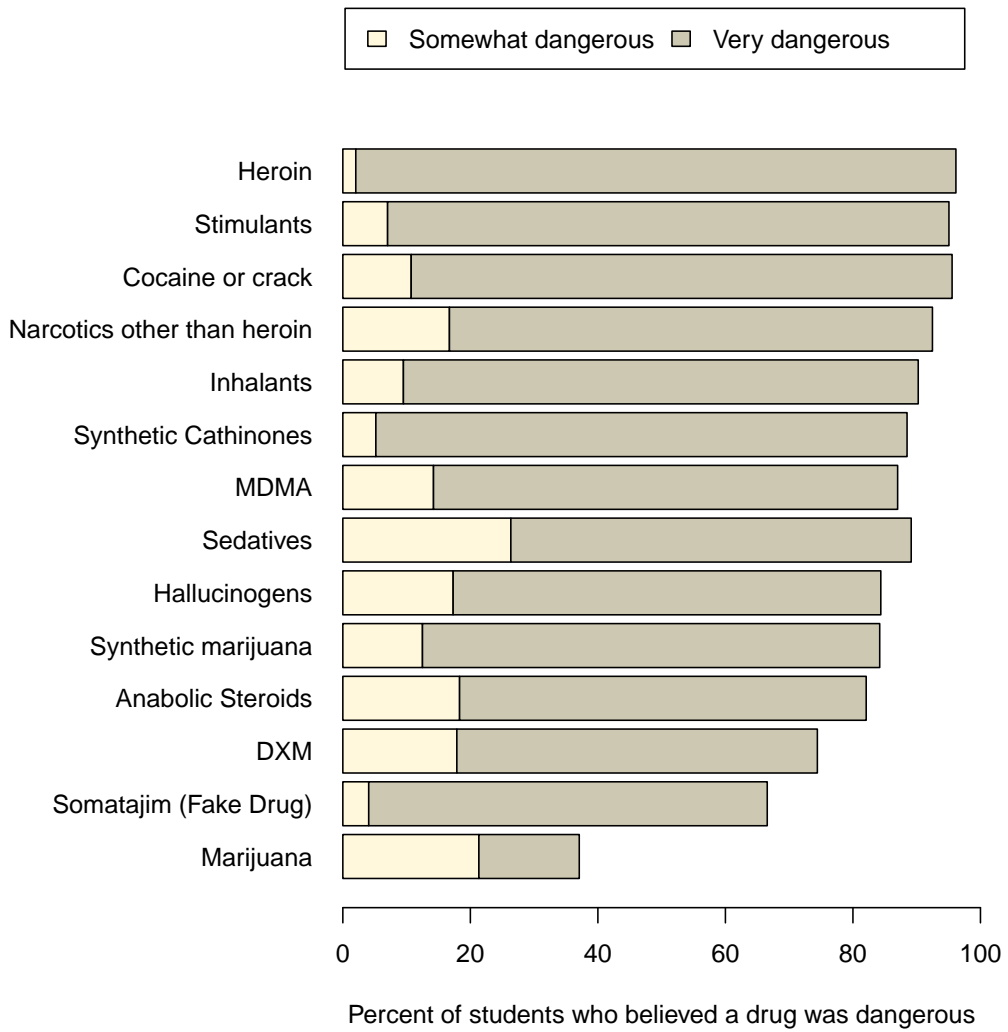


Figure 6: Percentage of students who said that a drug was somewhat or very dangerous

nificant, though slight decrease from 2015 in the perceived danger associated with Synthetic Cathinones (88.5% vs 90.0%).

A little less than 49% of respondents believed that drug abuse is either a minor, moderate, or major problem on their campus, while 32% said it is not a problem at all (19% said they were not sure). More than 64% of students said that underage drinking is a problem on campus, and about 55% said that binge drinking is a problem on their campus. Neither of these figures significantly differed from the 2015 survey.

## 5.2 School policies

Most survey respondents were poorly informed about their school's policies towards alcohol use. Over 37% of respondents did not know if their school had any policies concerning student alcohol use. Similarly, 55% did not know if their school had a drug and alcohol abuse prevention program, and 75% did not know if their campus had peer education programs for alcohol/drug use. When asked if they had received any information on campus policies related to alcohol, approximately 34% of students said they had. Of the students who were aware of their campus's programs, about 22% reported that they had attended a drug and alcohol abuse prevention presentation, lecture, or event sponsored by the college.

The survey also asked if the respondent supported or opposed several possible policies regarding alcohol and drug use. Over 65% of students in the survey support prohibiting alcohol use and possession on campus, 58% support the banning of alcohol advertising at campus events, and 77% support fining student organizations that offer alcohol to minors. About 47% of students supported denying scholarships to students with alcohol related convictions and 42% had the same opinion of individuals with drug related convictions. 81% of students favored the drug testing of athletes and 62% supported cracking down on greek organizations that offered alcohol at parties. In terms of help, 89% of students supported offering free drug and



alcohol counseling for students and 45% are in favor of a required 1 hour course on alcohol and drug abuse prevention.

## **6 Drug use and mental health**

The survey asked students to describe their mental state by noting how often they felt nervous, hopeless, depressed, worthless, or restless. Figure 7 summarizes the survey's findings on these 4 questions. As the graphs show, differences in drinking and drug use habits are related with modest variation in mental health. Heavy drinkers tended to report higher levels of feeling depressed, hopeless, or worthless. Illicit drug users also reported elevated rates of these 3 feelings.

## **7 Drunk driving**

Students were asked how often they drive after drinking alcohol in a typical month. In 2017, 18% of students answered that they drive after drinking at least once a month, compared to about 23% of students in 2015 who said the same. About 5% of students admitted to driving at least once in an average month after having 5 or more drinks, a significant reduction from 2015 (8%). There was a significant decrease in the percentage of students who said they have driven high or stoned in the past month, from 13.4% in 2015 to 11.5% in 2017. About 22% of students said they had ridden in a car with someone who was high or drunk. Encouragingly, nearly 47% of students said they serve as a designated driver at least once in a typical month and 41% of respondents had ridden with a designated driver in the past month.

1.7% of survey respondents said that they had been involved in an auto accident involving a drunk driver, down from 2.2% from 2015. About 19% of respondents who reported being involved in a drunk driving accident reported that they were the intoxicated driver in the accident.

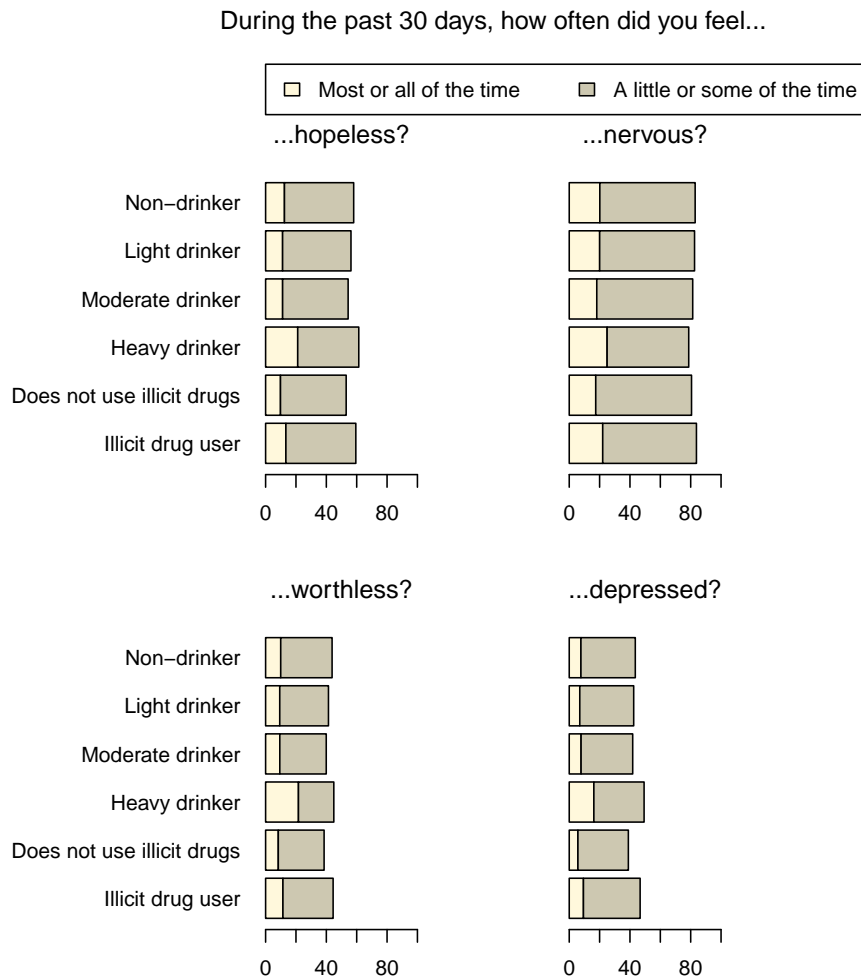


Figure 7: Percentage of students who reported various mental health problems, by drug and alcohol use.

## 8 Conclusion

The survey shows some promising trends in drug and alcohol use amongst Texas college students. Tobacco use has declined considerably. Driving after drinking or using drugs appears to have declined as well. Many students are also serving as a designated driver and/or using designated drivers. It is not clear, however, if colleges have themselves played a role in this change. Students continue to have poor awareness of campus programs designed to inform students about drug and alcohol abuse. Campus programs could be valuable contributors to accomplishing important policy goals like reducing the incidence of drunk driving. The data suggest that students are largely in favor of action by campuses to deal with drug use and excessive drinking. In addition to suggesting that awareness of these programs needs to be increased, this survey provides useful data regarding how students might be convinced to reduce or cease their consumption of alcohol and illicit drugs.

The survey also shows that underage drinking continues to be prevalent and that underage students generally find it easy to obtain alcohol. Student responses in this survey should be useful for targeting enforcement efforts. Restaurants are a particularly egregious offender, one that underage students recognize as an easy target for procuring alcohol.

Although there are fewer illegal or dangerous behaviors associated with drug use, the survey does suggest that drug use is associated with poor mental health. It is not clear which way the causal arrow runs in this case, but providing mental health services for students and advertising the existence of these kinds of programs may be a valuable tool for reducing illicit drug use and/or mitigating some of its harmful effects.

# Appendices

## **A Crosstabs for drug use by demographic characteristic**

This appendix presents tables of drug use among college students in Texas broken out by demographic categories. Drug usage is presented by gender, ethnicity, age, sorority or fraternity membership, class rank, parental income, and college type.

Table 2: Drug usage by Texas college students, total and by gender

Drug	Lifetime Use			Past-Year Use			Past-Month Use		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Alcohol	78.7%	78.4%	79.0%	72.6%	71.4%	73.5%	57.6%	57.5%	57.8%
Tobacco	46.5%	52.9%	41.7%	31.2%	39.1%	25.1%	18.2%	24.5%	13.3%
Inhalants	2.9%	3.8%	2.1%	1.0%	1.5%	0.6%	0.3%	0.5%	0.1%
DXM	6.2%	7.1%	5.4%	3.2%	3.5%	3.1%	1.0%	1.2%	0.9%
Marijuana	39.4%	41.5%	37.7%	27.5%	29.8%	25.7%	15.9%	17.9%	14.3%
Synthetic Marijuana	5.2%	6.1%	4.5%	0.6%	0.6%	0.6%	0.1%	0.1%	0.1%
Cocaine	7.3%	9.1%	5.9%	4.1%	5.3%	3.1%	1.5%	2.1%	1.0%
Stimulants	5.1%	7.0%	3.5%	3.0%	4.2%	2.0%	1.3%	2.0%	0.7%
Sedatives	10.2%	10.8%	9.7%	5.5%	5.9%	5.2%	2.5%	2.8%	2.2%
Hallucinogens	9.4%	13.2%	6.4%	4.6%	7.1%	2.7%	1.5%	2.5%	0.8%
Heroin	0.8%	1.3%	0.4%	0.2%	0.3%	0.1%	0.0%	0.1%	0.0%
Other Narcotics	7.9%	9.7%	6.5%	3.2%	4.0%	2.5%	1.0%	1.4%	0.7%
Steroids	1.1%	1.7%	0.6%	0.4%	0.7%	0.2%	0.2%	0.3%	0.1%
Bath Salts	0.9%	1.3%	0.6%	0.3%	0.5%	0.1%	0.1%	0.2%	0.1%
MDMA	7.0%	8.1%	6.2%	3.0%	3.9%	2.3%	0.8%	1.0%	0.7%

Table 3: Drug usage by Texas college students, by ethnicity

Drug	Lifetime Use				Past-Year Use				Past-Month Use			
	Anglo	Hispanic	Black	Asian	Anglo	Hispanic	Black	Asian	Anglo	Hispanic	Black	Asian
Alcohol	81.8%	79.5%	74.8%	65.4%	76.5%	72.9%	67.5%	58.2%	62.4%	57.0%	51.9%	42.6%
Tobacco	50.3%	47.3%	39.3%	30.7%	35.9%	29.3%	24.4%	21.1%	21.4%	16.4%	14.4%	12.5%
Inhalants	3.7%	2.6%	0.7%	1.7%	1.1%	1.0%	0.3%	0.8%	0.3%	0.3%	0.0%	0.3%
DXM	7.0%	5.6%	4.9%	4.8%	3.6%	2.8%	2.5%	3.4%	1.1%	0.9%	0.9%	0.8%
Marijuana	40.9%	41.3%	37.0%	25.5%	28.7%	28.0%	26.1%	20.0%	17.3%	15.5%	16.0%	10.4%
Synthetic Marijuana	6.2%	5.2%	2.3%	2.1%	0.5%	0.8%	0.3%	0.2%	0.1%	0.2%	0.0%	0.0%
Cocaine	8.7%	7.5%	2.6%	3.2%	5.1%	3.8%	2.0%	2.0%	2.0%	1.4%	0.4%	0.7%
Stimulants	6.7%	4.2%	1.7%	3.5%	4.0%	2.4%	1.4%	2.2%	1.9%	0.7%	0.5%	1.0%
Sedatives	12.2%	9.8%	5.9%	4.5%	6.8%	5.2%	3.3%	2.8%	3.0%	2.4%	1.2%	1.1%
Hallucinogens	12.2%	8.0%	3.6%	5.1%	6.0%	3.9%	2.1%	2.5%	2.2%	0.9%	1.1%	0.9%
Heroin	0.9%	0.8%	0.4%	0.7%	0.3%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other Narcotics	10.0%	7.0%	4.7%	3.5%	4.0%	2.8%	2.5%	1.7%	1.3%	0.8%	0.6%	0.3%
Steroids	1.2%	1.1%	0.6%	0.7%	0.6%	0.4%	0.2%	0.2%	0.2%	0.2%	0.1%	0.0%
Bath Salts	0.8%	1.1%	0.4%	0.8%	0.3%	0.4%	0.1%	0.2%	0.1%	0.2%	0.0%	0.0%
MDMA	8.1%	6.5%	3.4%	5.6%	3.4%	2.5%	1.5%	3.6%	1.1%	0.7%	0.4%	0.6%

Table 4: Drug usage by Texas college students, by age

Drug	Lifetime Use			Past-Year Use			Past-Month Use		
	Age 18-20	Age 21-26	Age 18-20	Age 21-26	Age 18-20	Age 21-26	Age 18-20	Age 21-26	
Alcohol	69.2%	90.0%	62.8%	84.2%	45.3%	72.2%			
Tobacco	39.1%	55.4%	28.1%	34.9%	16.1%	20.7%			
Inhalants	2.2%	3.8%	1.0%	0.9%	0.3%	0.4%			
DXM	5.0%	7.5%	3.1%	3.4%	1.0%	1.0%			
Marijuana	34.4%	45.4%	26.8%	28.3%	16.1%	15.7%			
Synthetic Marijuana	2.9%	7.9%	0.7%	0.5%	0.1%	0.1%			
Cocaine	5.1%	10.0%	3.6%	4.6%	1.3%	1.8%			
Stimulants	3.7%	6.6%	2.7%	3.4%	1.2%	1.4%			
Sedatives	7.7%	13.2%	5.4%	5.7%	2.5%	2.5%			
Hallucinogens	7.2%	12.0%	4.6%	4.7%	1.8%	1.2%			
Heroin	0.7%	1.0%	0.3%	0.1%	0.0%	0.0%			
Other Narcotics	5.5%	10.8%	3.1%	3.3%	1.0%	1.0%			
Steroids	0.9%	1.3%	0.4%	0.5%	0.1%	0.3%			
Bath Salts	0.9%	1.0%	0.3%	0.2%	0.2%	0.0%			
MDMA	4.3%	10.4%	2.6%	3.5%	0.9%	0.8%			

Table 5: Drug usage by Texas college students, by sorority/fraternity membership

Drug	Lifetime Use		Past-Year Use		Past-Month Use	
	Non-member	Member	Non-member	Member	Non-member	Member
Alcohol	76.6%	87.8%	69.9%	84.0%	54.1%	73.0%
Tobacco	45.6%	57.4%	30.3%	40.6%	17.4%	25.5%
Inhalants	2.8%	3.4%	1.0%	1.5%	0.3%	0.4%
DXM	5.9%	7.3%	3.2%	3.7%	0.9%	1.3%
Marijuana	38.1%	50.7%	26.2%	38.8%	15.1%	23.1%
Synthetic Marijuana	5.2%	5.0%	0.5%	0.6%	0.1%	0.1%
Cocaine	6.8%	13.5%	3.6%	10.2%	1.3%	3.8%
Stimulants	4.7%	8.0%	2.8%	5.9%	1.2%	2.5%
Sedatives	10.0%	11.0%	5.4%	6.3%	2.4%	3.0%
Hallucinogens	9.0%	12.9%	4.4%	7.3%	1.4%	2.7%
Heroin	0.7%	0.7%	0.2%	0.2%	0.0%	0.0%
Other Narcotics	7.7%	10.6%	3.0%	5.2%	1.0%	1.1%
Steroids	1.0%	1.8%	0.5%	0.7%	0.2%	0.3%
Bath Salts	0.8%	1.3%	0.3%	0.4%	0.1%	0.0%
MDMA	6.7%	10.8%	2.7%	6.0%	0.7%	2.1%



Table 6: Drug usage by Texas college students, by class

Drug	Lifetime Use				Past-Year Use				Past-Month Use			
	Fresh.	Soph.	Junior	Senior	Fresh.	Soph.e	Junior	Senior	Fresh.	Soph.	Junior	Senior
Alcohol	67.5%	76.3%	84.8%	90.7%	60.4%	69.5%	79.7%	85.7%	43.1%	53.3%	66.2%	73.9%
Tobacco	39.0%	45.9%	49.4%	54.9%	29.0%	31.1%	32.0%	33.6%	17.1%	19.1%	18.4%	18.2%
Inhalants	2.1%	2.9%	3.2%	3.7%	0.7%	1.2%	1.2%	0.9%	0.1%	0.4%	0.4%	0.4%
DXM	5.3%	5.8%	7.5%	6.3%	3.0%	3.1%	4.0%	3.1%	0.9%	0.9%	1.3%	1.0%
Marijuana	33.3%	39.9%	42.1%	44.3%	25.2%	27.6%	29.3%	28.8%	15.0%	17.0%	16.8%	15.1%
Synthetic Marijuana	3.7%	4.6%	6.2%	6.7%	0.8%	0.5%	0.7%	0.3%	0.1%	0.1%	0.2%	0.0%
Cocaine	5.2%	6.6%	9.2%	9.2%	3.2%	4.0%	5.1%	4.5%	0.9%	1.5%	2.0%	1.9%
Stimulants	3.7%	4.5%	6.1%	6.6%	2.0%	2.8%	4.0%	3.6%	1.0%	1.3%	1.4%	1.5%
Sedatives	8.2%	10.4%	11.5%	11.4%	5.0%	5.6%	6.8%	5.0%	2.5%	2.3%	3.0%	2.1%
Hallucinogens	7.0%	8.9%	11.5%	11.0%	4.1%	4.6%	5.3%	4.5%	1.7%	1.7%	1.5%	1.0%
Heroin	0.7%	0.9%	1.1%	0.6%	0.2%	0.1%	0.3%	0.2%	0.0%	0.0%	0.1%	0.0%
Other Narcotics	6.4%	7.6%	8.0%	10.2%	2.8%	3.2%	3.5%	3.5%	0.9%	1.0%	1.2%	0.9%
Steroids	1.0%	0.9%	1.4%	1.0%	0.4%	0.2%	0.7%	0.5%	0.1%	0.0%	0.3%	0.3%
Bath Salts	1.2%	0.8%	1.1%	0.4%	0.4%	0.3%	0.4%	0.1%	0.1%	0.1%	0.1%	0.1%
MDMA	4.4%	6.1%	9.1%	9.7%	2.1%	3.1%	3.9%	3.2%	0.8%	1.0%	1.0%	0.6%

Table 7: Drug usage by Texas college students, by parental income

Drug	Lifetime Use				Past-Year Use				Past-Month Use			
	\$0 to \$20k	\$20k to \$60k	\$60k to \$100k	More than \$100k	\$0 to \$20k	\$20k to \$60k	\$60k to \$100k	More than \$100k	\$0 to \$20k	\$20k to \$60k	\$60k to \$100k	More than \$100k
Alcohol	75.5%	75.5%	81.1%	82.1%	67.5%	69.0%	76.0%	78.4%	52.4%	52.2%	60.7%	65.0%
Tobacco	44.3%	43.7%	50.3%	53.4%	27.5%	27.2%	34.1%	39.1%	17.0%	14.5%	18.9%	24.5%
Inhalants	2.7%	2.6%	3.0%	3.8%	1.0%	0.9%	1.0%	1.5%	0.4%	0.3%	0.2%	0.5%
DXM	4.6%	5.9%	6.7%	7.3%	2.6%	3.3%	3.8%	3.5%	1.0%	1.1%	0.9%	0.9%
Marijuana	37.9%	37.9%	42.2%	46.4%	25.2%	25.0%	30.4%	35.2%	14.9%	13.7%	17.6%	21.4%
Synthetic Marijuana	6.2%	4.4%	5.3%	6.4%	1.0%	0.4%	0.5%	0.7%	0.5%	0.0%	0.1%	0.0%
Cocaine	7.0%	5.8%	7.1%	11.7%	3.3%	3.1%	4.0%	7.6%	1.5%	0.8%	1.3%	2.9%
Stimulants	4.6%	4.0%	5.1%	8.1%	2.5%	2.3%	3.6%	5.0%	0.8%	1.2%	1.3%	2.4%
Sedatives	10.5%	8.9%	9.7%	13.9%	5.0%	4.9%	5.9%	8.1%	1.9%	2.1%	2.6%	4.0%
Hallucinogens	7.9%	7.7%	9.8%	14.7%	3.8%	3.4%	5.0%	8.0%	0.9%	1.1%	1.8%	3.2%
Heroin	1.0%	0.5%	0.7%	1.0%	0.2%	0.1%	0.2%	0.4%	0.0%	0.0%	0.0%	0.1%
Other Narcotics	6.9%	6.4%	7.7%	11.8%	2.5%	2.6%	3.0%	5.5%	0.8%	0.8%	0.8%	1.9%
Steroids	0.7%	0.9%	1.2%	1.6%	0.4%	0.3%	0.7%	0.7%	0.3%	0.1%	0.3%	0.0%
Bath Salts	1.6%	0.4%	0.9%	0.8%	0.8%	0.1%	0.3%	0.3%	0.5%	0.0%	0.0%	0.0%
MDMA	6.9%	6.2%	7.2%	10.0%	2.7%	2.4%	3.2%	5.2%	0.6%	0.4%	1.0%	1.6%

Table 8: Drug usage by Texas college students, by college type

Drug	Lifetime Use			Past-Year Use			Past-Month Use					
	Large 4-year	Small 4-year	Large 2-year	Small 2-year	Large 4-year	Small 4-year	Large 2-year	Small 2-year	Large 4-year	Small 4-year	Large 2-year	Small 2-year
Alcohol	80.4%	78.4%	74.1%	79.0%	75.3%	72.5%	67.2%	68.9%	61.4%	54.6%	52.0%	52.0%
Tobacco	47.3%	41.4%	47.5%	47.0%	32.2%	27.1%	30.9%	31.9%	18.1%	14.6%	19.5%	20.4%
Inhalants	3.1%	2.8%	2.6%	2.5%	1.3%	0.6%	0.6%	0.5%	0.4%	0.2%	0.2%	0.0%
DXM	5.9%	6.4%	6.4%	6.7%	3.4%	3.3%	2.9%	3.4%	1.1%	1.1%	0.8%	1.0%
Marijuana	41.1%	32.8%	38.0%	41.5%	30.8%	21.1%	23.8%	25.2%	17.9%	12.9%	14.0%	13.2%
Synthetic Marijuana	4.4%	5.7%	5.6%	7.7%	0.6%	0.2%	0.8%	0.8%	0.1%	0.0%	0.1%	0.4%
Cocaine	7.6%	5.5%	7.8%	6.8%	5.0%	1.4%	4.1%	2.9%	1.8%	0.4%	1.7%	0.9%
Stimulants	5.4%	4.4%	4.8%	4.9%	3.6%	2.4%	2.1%	2.4%	1.5%	0.8%	1.0%	1.1%
Sedatives	9.6%	9.4%	11.3%	12.1%	5.9%	3.9%	5.9%	5.0%	2.5%	2.5%	2.5%	2.1%
Hallucinogens	10.3%	8.2%	8.2%	8.3%	5.8%	2.6%	3.6%	2.9%	2.0%	0.8%	1.0%	0.9%
Heroin	0.8%	0.6%	0.9%	1.0%	0.3%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%
Other Narcotics	7.3%	8.7%	7.7%	10.6%	3.6%	2.6%	2.4%	3.5%	1.0%	0.6%	0.9%	1.4%
Steroids	0.8%	1.9%	1.0%	1.6%	0.3%	1.2%	0.2%	0.9%	0.0%	0.7%	0.1%	0.5%
Bath Salts	0.6%	0.8%	1.3%	1.7%	0.2%	0.2%	0.3%	0.8%	0.0%	0.0%	0.2%	0.4%
MDMA	7.6%	6.0%	6.2%	7.2%	3.6%	2.5%	2.1%	2.3%	1.0%	1.1%	0.4%	0.5%