National Institute for Health Development

Web survey on drugs 2021

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Methodology

The data used in the analysis are drawn from the Web survey on drugs coordinated by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). **Data collection took place in 2021, with the participation of 21 European Union (EU) Member States and nine non-EU countries**. The survey was previously conducted in Estonia in 2018 [1]. The study aims to provide more detailed information on the socio-demographic background of those who use drugs, the frequency of use, quantities involved, types of procurement, price and the reasons for use.

In the web survey survey, questions were divided into modules for a range of drugs, and participants had to reply to at least one module to participate in the survey.

The survey modules included:

- herbal cannabis,
- cannabis resin (hashish),
- ecstasy/MDMA,
- amphetamine,
- methamphetamine,
- new psychoactive substances and heroin.

The Estonian survey was open to people aged 18 or over living in Estonia, who **had used drugs at least once during their lifetime**. Participation was anonymous, voluntary, and depended on the respondent's interest in participating.

Sample

The survey was conducted from **18 March to 13 May 2021**. The questions could be answered in Estonian, Russian and English. In total, a LimeSurvey question-naire was opened 10 666 times during this period. Of these, 1 337 **respondents** (13%) completed and were suitable for the study (had given their consent to participate in the survey and marked Estonia as their place of residence in the sample). More than 90% of the respondents to the questionnaire stated that they reached the survey via social media advertisements (Facebook, Instagram).

The web survey is based on **convenience sample**, where the survey is answered by those who are interested in the topic, who want to share their experience and find time to answer.

However, the web survey is a great opportunity to explore a larger number of people who have a real-time experience in drug use. It offers comprehensive information on recreational drug use and the drug market and is sufficient to establish links between use and the factors that may be associated with it. This factsheet presents first-hand results from a 2021 web survey **looking more closely at herbal cannabis use**. A more in-depth review of the web survey will follow in the future.

Socio-demographic background

86% of the questionnaires were completed in Estonian, 8% in Russian and 7% in English. Of the sample, 59% were male, 37% were female, and 4% identified themselves in other ways or did not want to make it public. The average age of the sample was 26 years (SD = 7.6; age range 18-61). **Respondents aged 20–29 were the most likely (56%)**.

Questions related to social background (partner, education, income) were answered by 75% (n=997) of the respondents, with 25% living alone and 75% living with another person: most often with their partner (29%), parents (24%) or with their partner and children (12%).

Of the sample, 2% were with elementary (first three classes), 24% with primary, 52% with secondary and 21% with higher education. While 78% of respondents were economically active, 30% had a monthly average net income below EUR 500, 23% had between EUR 501 and EUR 1 000, and 47% had a monthly income above EUR 1 000. Of the sample, 51% were employed, 21% were both studying and employed, 17% were studying and 6% were unemployed.

For 56% of respondents (n=742), residency data is available within the county. All the Estonian counties were represented in the sample. **The largest contributors to the sample were the Harju and Tartu populations**, with 61% and 20%, respectively. Totally 80% of respondents were living in cities, 11% in smaller towns and 9% in a rural area.
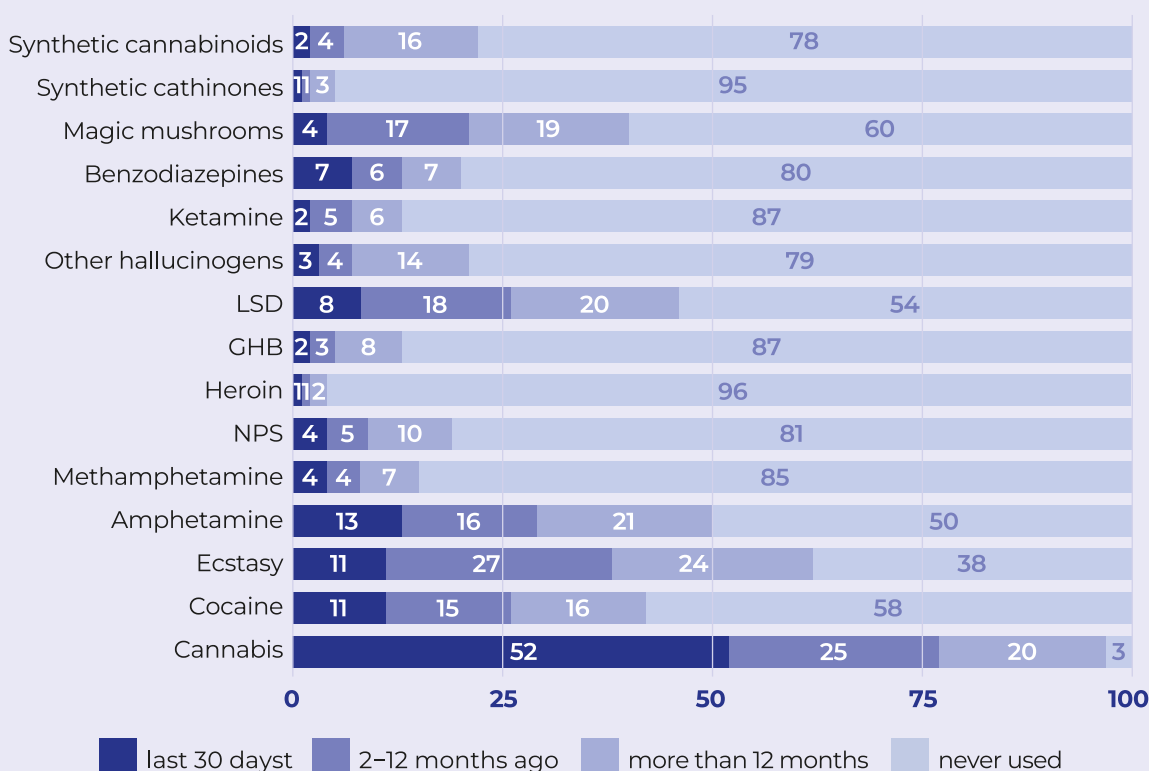
Drug use

86% of the people in the web survey had used drugs in the last 12 months, and 14% more than 12 months ago. The last 30 days use was reported by 63%. Of the respondents, 79% were a polydrug user, meaning that they had used more than one drug, while 20% had used only one drug so far. Totally 23% of the sample had use two to three drugs, **26% five to seven drugs**. Combinations of cannabis and different stimulants were the most common for polydrug use.

The most prevalent drug used was cannabis, with 97% of respondents reporting lifetime use. 62% had used ecstasy and half amphetamine. In addition to cannabis, more than half (59%) of lifetime users of cannabis also used other drugs in the past 12 months.

Compared with the 2018/19 survey, 2021 was marked by an increase in the use of LSD and other hallucinogens. Lifetime use of LSD was 46% in 2021 compared with 33% in 2018/19 (including 19% in the last 12 months), and 46% in 2021 (including 25% in the last 12 months).

Use of drugs by different substances and by period of use (%, n=1337)

Substance	last 30 dayst	2–12 months ago	more than 12 months	never used
Synthetic cannabinoids	2	4	16	78
Synthetic cathinones	1	3		95
Magic mushrooms	4	17	19	60
Benzodiazepines	7	6	7	80
Ketamine	2	5	6	87
Other hallucinogens	3	4	14	79
LSD	8	18	20	54
GHB	2	3	8	87
Heroin	1	2		96
NPS	4	5	10	81
Methamphetamine	4	4	7	85
Amphetamine	13	16	21	50
Ecstasy	11	27	24	38
Cocaine	11	15	16	58
Cannabis	52	25	20	3

Legend: ■ last 30 dayst ■ 2–12 months ago ■ more than 12 months ■ never used

In the web survey, respondents were able to indicate which events or sites they used drugs in the past 12 months. The most commonly mentioned use was home (87%), followed by a street or park in a public space (54%). Respondents include people who have used drugs at work (15%) and at school (10%).
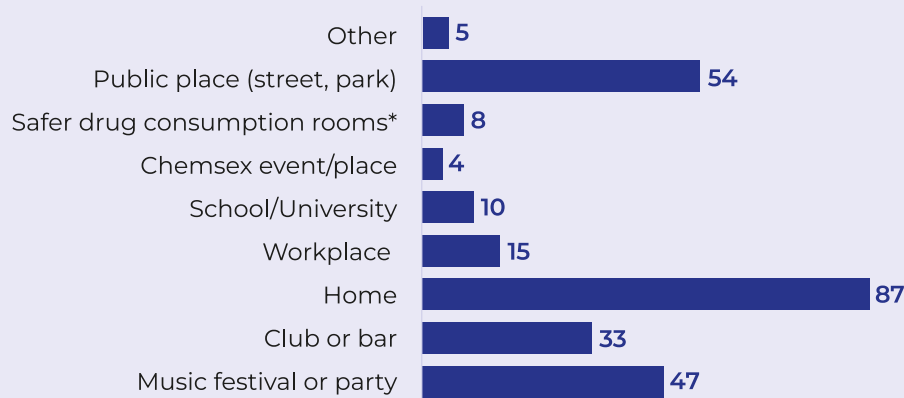
Lifetime use of legal drugs was reported by the majority of respondents, with 94% of the sample having used tobacco and nearly 100% alcohol. In the past 30 days, 69% had used tobacco products and 81% had used alcohol.

HOME
is the main place
for drug use

Drug use sites in the past 12 months (%, n=1143)

Site	%
Other	5
Public place (street, park)	54
Safer drug consumption rooms*	8
Chemsex event/place	4
School/University	10
Workplace	15
Home	87
Club or bar	33
Music festival or party	47

* There is no safe drug consumption rooms in Estonia, respondents had used one while abroad or did not understand that they were not in what they considered to be a safe place but a special service provided in other countries.

Cannabis use

Of the respondents (n=727) to the cannabis module, **93% had used illicit cannabis products in the 12 months before the survey**, 23% had been exposed to legal cannabis products (low THC content, CBD), 1% had used medicines containing cannabinoids prescribed by medical doctor, and 4% did not know the legal status of the cannabis they used.

Overall, 71% of cannabis product users used only one cannabis product in the last 12 months, with 29% reporting a range of different products. The most common drug was herbal cannabis (98%), with 24% using edible products, 8% cannabis oil and 5% cannabis resin. As the use of cannabis resin (hashish) is not very common in Estonia, the following paragraph reflects herbal cannabis users (n=707).

Herbal cannabis and supply

Totally 68% of respondents typically buy herbal cannabis, while 25% will get it for free (with friends/users sharing), and 1% grows it their own. The main contact for the purchase of herbal cannabis in the 12 months was the known dealer, with about one in five found the contact via social media. Other options were used to a significantly lesser extent.
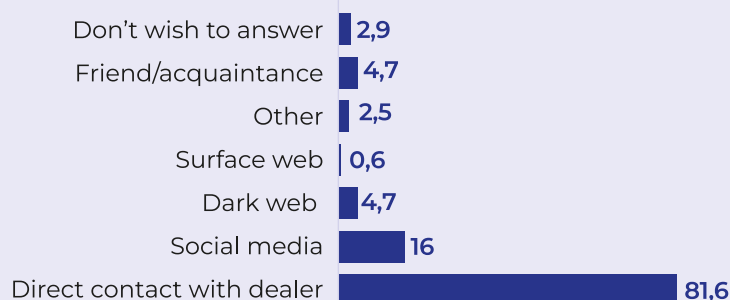
The majority (85%) of cannabis purchased in the last 12 months was delivered outside the home, meeting a dealer or a contact person. Courier delivered cannabis to the home to 22% of respondents, while 6% delivered their purchases from a contactless agreed location (hidden space). Only 1% mentioned receiving the goods via the regular mail service. Overall, 51% of respondents did not know whether the cannabis used was local or imported.

68%
of respondents
buy herbal
cannabis

Place of purchase of herbal cannabis in the last 12 months (%, n=552)

Place	%
Don't wish to answer	2,9
Friend/acquaintance	4,7
Other	2,5
Surface web	0,6
Dark web	4,7
Social media	16
Direct contact with dealer	81,6

Web survey modules provided an opportunity to highlight the reasons why a selected drug was consumed. The reasons for cannabis use were multiple, with 74% indicating reduction of **stress and relaxation and a target for intoxication and entertainment (66%)**, followed by improvement of sleep (46%) and reduction of depression and anxiety (45%). Cannabis was used for socialisation in 36% of respondents, for relief of pain and inflammation in 20% and for experimental use in 18% of respondents. Another 17% justified cannabis use by improving performance at school, at work and in sports.

Impact of COVID-19 on cannabis use

Among herbal cannabis clients, 46% estimated that the COVID-19 pandemic did not change their patterns of use. However, 30% reported that the coronavirus had increased their use of cannabis, with 16% reporting a decrease. 9% were unable to assess the impact of COVID-19 on their cannabis

30% herbal cannabis users reported that the coronavirus had increased their use of cannabis.

use pattern. The link between the coronavirus and increased cannabis use has been noted in a number of studies that have identified cannabis as a method to deal with challenging times, limitations and stress [2-4].

An assessment of the illegal status of cannabis

77% of the respondents to the web survey (n=1,334) either fully or mostly agreed that cannabis use should be legal. Among the respondents, 13% say that cannabis should not be legal, while 10% say that cannabis should not be legal.

Compared to those who used drugs in the last 12 months, among those who used drugs more than a year ago, there are more people who are not in favor of cannabis legalization (7% and 27%, respectively).

Key findings:

- The most commonly used drugs are herbal cannabis, amphetamine and ecstasy
- Polydrug use is common
- Contacts with dealers have been developed to obtain cannabis
- A large proportion of respondents are unaware of the quality and nature of cannabis use (mainly illicit products and unknown origin)
- Reduction and relaxation of stress is the most common use

References:

[1] Abel-Ollo K, Lõhmus L. (2019). Euroopa narkootikumide tarvitamise veebiküsitluse metoodika ja esmased tulemused. Eesti Arst, 98(11): 627–635.
[2] Bartel SJ, Sherry SB, Stewart SH. Self-isolation: A significant contributor to cannabis use during the COVID-19 pandemic. Subst Abus. 2020;41(4):409-412. doi: 10.1080/08897077.2020.1823550. Epub 2020 Oct 12. PMID: 33044893.

[3] Imtiaz S, Wells S, Rehm J, Hamilton HA, Nigatu YT, Wickens CM, Jankowicz D, Elton-Marshall T. Cannabis Use During the COVID-19 Pandemic in Canada: A Repeated Cross-sectional Study. J Add Med. 2021 Nov-Dec 01;15(6):484-490. doi: 10.1097/ADM.000000000000798. PMID: 33323693; PMCID: PMC8562922.
[4] Kütt V. Narkootikumide tarvitamine COVID-19 eriolukorra ajal. Tallinn: Tervise Arengu Instituut, 2020.