



Proceeding Paper

Application of Cannabis Use Intention Questionnaire (CUIQ) to First Year University Students [†]

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Abstract: Cannabis is the illegal drug most used worldwide. Its long-term use increases the risk of depression and schizophrenia, causing a major public health problem. A validated questionnaire was applied to first year students of Instituto Universitário Egas Moniz to assess their intention regarding cannabis use. They do not consider cannabis to be much associated with well-being, they slightly consider the opinion of relatives, and they show a low intent to use the drug, believing themselves to have strong self-control. Scores are above average for 18-y.o. Portuguese students, except for belief in self-control.

Keywords: Cannabis; CUIQ; university students; consumption; well-being; creativity



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1. Introduction

Cannabis (CB) is the illegal drug most used and, in recent years, its consumption by adolescents and young adults has increased exponentially. In these groups, CB is mostly used recreationally, to achieve states of relaxation (61%) and feelings of joy (27%) [1]. In the long-term, CB increases the risk of depression, anxiety, and schizophrenia, representing an important public health issue [2]. A scale (cannabis use intention questionnaire—CUIQ) was designed and validated to measure attitudes towards CB consumption among young users (15–18 y.o.) in the EU, preferentially applied in the school environment [3]. The present study aimed to evaluate the intention of first year university students of Instituto Universitário Egas Moniz (IUEM) to consume CB, using the CUIQ.

2. Materials and Methods

The CUIQ is an anonymous questionnaire that was adapted for digital format through the Google Forms platform. It included four sections: (A) Attitude (At)—how consumption is judged to positively influence one's sense of well-being and creativity; (B) Subjective rule (SR)—the degree to which relatives would agree with consumption and valuation given to their opinion; (C) Self-efficacy (SE) towards abstinence and (D) Consumption intention (CI). All sections were assessed using a 5-point Likert scale, with 1 being the lowest degree of agreement or importance, and 5 the highest for sections A, B, and D. In section C, 1 corresponded to "not able at all" and 5 corresponded to "totally able". In May 2020, a cross-sectional study (approved by EM Ethics Committee) was conducted through the application of the questionnaire to 1st year, Portuguese students (who gave their electronic consent), of four courses of IUEM (Pharmacy-MICF, Forensic Sciences-LCFC, Dentistry-MIMD, and Nutrition-LCN). Data were processed with Microsoft Excel Software version 16.48 using the template supplied in the 'Application and correction manual for the CUIQ' for Portugal [3]. Mean scores for the IUEM and for each course were compared with the scale created for Portugal (18 years) for each section.

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3. Results and Discussion

Of the 122 respondents, aged 18 to 22 years, 45.9% (n = 56) were 18 years old students. Since the questionnaire applied is validated for people aged between 15 and 18 years, all participants aged over 18 were excluded. Hence, the validated sample included 8 MICF students, 8 LCN students, 17 from MIMD, and 23 LCFC students. The average results obtained are presented in Figure 1a, b.

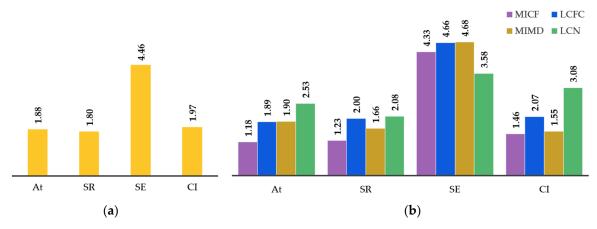


Figure 1. (a) Average score of the global sample (n = 56); (b) Average score by course. At (Attitude); SR (Subjective rule); SE (Self-efficacy); CI (Consumption intention).

The average score in At was 1.88 points which is positioned between percentile 50 and 60. Hence, our sample is slightly above the average group of 18 years-old in terms of score for positive At towards CB consumption. The mean score for section B was 1.80 points, falling within the 30% of individuals who have a higher score towards SR. The average score in SE was 4.46 points, positioning our sample within the 60% of young people of their age that have less difficulty in maintaining the attitude of abstinence. Finally, the average score in section D was 1.97 points, corresponding to a percentile between 60 and 70, which means that it is included within the 40% that have a higher score, indicating higher CI. Figure 1b illustrates the mean score of each course group. LCN students scored the highest values for At, SR, and CI. This suggests that they believe that CB consumption positively influences their well-being, and show higher intention to consume it, as well as more difficulty in maintaining abstinence. On the other hand, it is easier for LCFC and MIMD students to keep longer abstinence periods. MICF students have lower intention to consume than the others, although they take less into consideration relatives' opinion about the consumption of CB.

Our sample is above the national average for all scores but SE. Students revealed a high perception of the SE to abstain, and lower intention to consume CB which is in agreement with the low positive attitude towards CB consumption. The opinion of relatives is not overvalued.

Institutional Review Board Statement: The study was conducted according to the guidelines of the Declaration of Helsinki, and approved by the Ethics Committee of Egas Moniz (protocol code 879, 27 May 2021).

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: The data presented in this study are available on request from the corresponding author. The data are not publicly available due to privacy restrictions.

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Conflicts of Interest: The authors declare that there are no conflict of interest.

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