

Article

Drug misuse in England and Wales: year ending March 2025

An overview of the extent and trends of illicit drug use. Data are from the Crime Survey for England and Wales.

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1 . Main points

- The Crime Survey for England and Wales (CSEW) estimated that 8.7% of people aged 16 to 59 years (around 2.9 million people) reported using any drug in the last 12 months for the year ending (YE) March 2025; there was no statistically significant change compared with YE March 2024.
- Around 3.3% of people (approximately 1.1 million people) reported using a Class A drug in the last 12 months; there was no statistically significant change from the previous year.
- Drug use was higher among people aged 16 to 24 years, with 15.1% reporting any use in the last 12 months; although there was no statistically significant change compared with the previous year, there has been a general downward trend in this age group since its peak in YE December 1997 (31.8%).
- Around 2.0% of people were frequent drug users (more than once a month); there was no statistically significant change compared with the previous year.
- Use of nitrous oxide and new psychoactive substances decreased among those aged 16 to 59 years compared with the previous year, from 0.9% to 0.5%, and 0.5% to 0.3%, respectively; there were no statistically significant changes for other drug types.
- Use of hallucinogens (including magic mushrooms) among those aged 16 to 24 years decreased compared with YE March 2024, from 2.9% to 1.5%.

2 . Overall trends in drug misuse

Any drug use

The Crime Survey for England and Wales (CSEW) estimated that 8.7% of people aged 16 to 59 years (approximately 2.9 million people) and 15.1% of people aged 16 to 24 years (around 899,000 people) used "any drug" in the past 12 months, in year ending (YE) March 2025 (Figure 1). A definition of "any drug" can be found in [Section 7: Glossary](#).

There was no [statistically significant](#) change in prevalence of any drug use for people aged 16 to 59 years compared with YE March 2024 (8.8%) and YE March 2015 (8.6%).

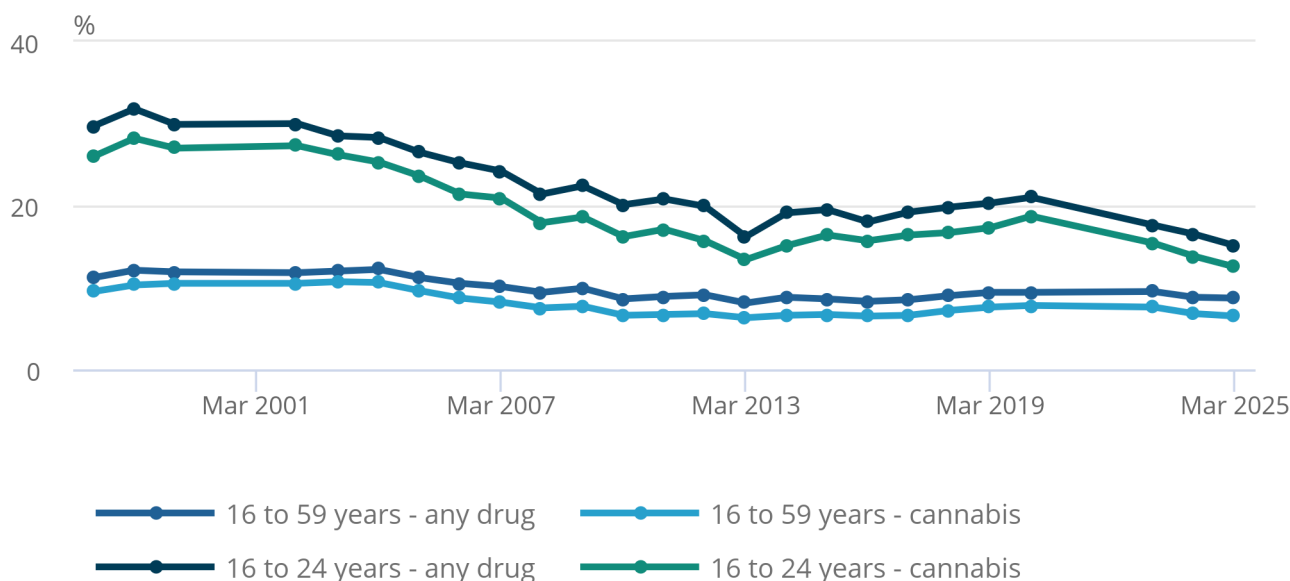
There was also no statistically significant change in any drug use for people aged 16 to 24 years compared with YE March 2024 (16.5%). However, this was lower than YE March 2015 (19.4%) and its peak in YE December 1997 (31.8%).

Figure 1: Any drug use in the last 12 months has decreased for people aged 16 to 24 years compared with year ending March 2015

Proportion of people reporting use of any drug and cannabis in the last year, England and Wales, year ending (YE) December 1995 to YE March 2025

Figure 1: Any drug use in the last 12 months has decreased for people aged 16 to 24 years compared with year ending March 2015

Proportion of people reporting use of any drug and cannabis in the last year, England and Wales, year ending (YE) December 1995 to YE March 2025



Source: Crime Survey for England and Wales from the Office for National Statistics

Notes:

1. Data for 1995, 1997 and 1999 are for year ending (YE) December. All other years are for YE March.
2. Estimates for YE March 2021 and YE March 2022 are not available because of the coronavirus (COVID-19) pandemic.

Any Class A drug use

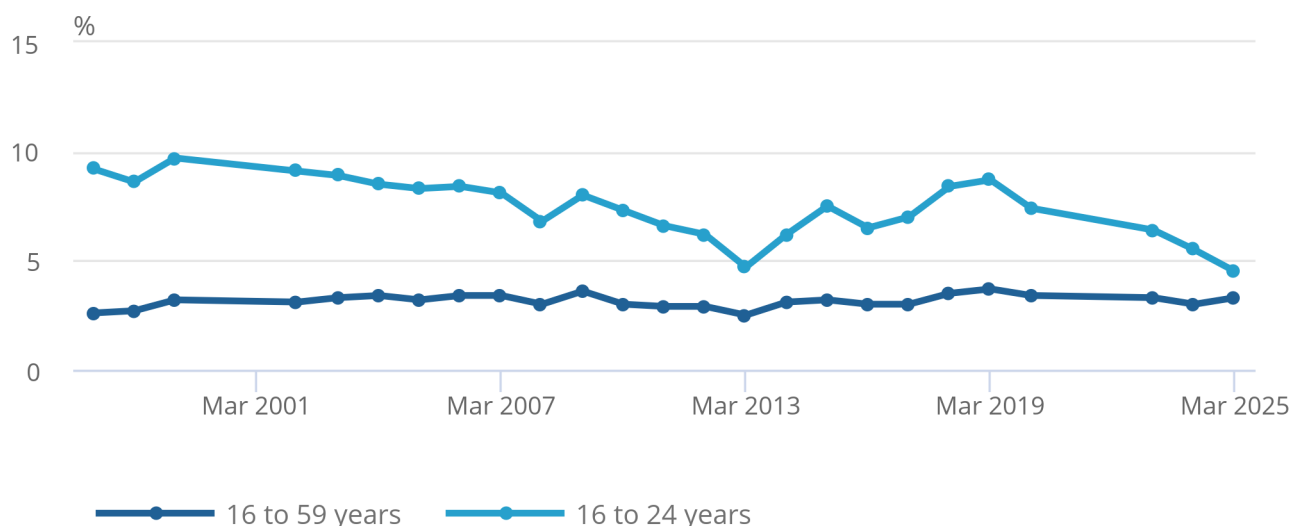
In YE March 2025, 3.3% of people aged 16 to 59 years (around 1.1 million people) and 4.5% of people aged 16 to 24 years (approximately 271,000 people) had taken a Class A drug in the last 12 months (Figure 2). These represented no statistically significant changes compared with YE March 2024. However, this was lower compared with YE March 2015 for those aged 16 to 24 years (7.5%). For a definition of "any Class A drug", please refer to [Section 7: Glossary](#).

Figure 2: Class A drug use has decreased among those aged 16 to 24 years compared with year ending March 2015

Proportion of people reporting use of Class A drugs in the last year, England and Wales, year ending (YE) December 1995 to YE March 2025

Figure 2: Class A drug use has decreased among those aged 16 to 24 years compared with year ending March 2015

Proportion of people reporting use of Class A drugs in the last year, England and Wales, year ending (YE) December 1995 to YE March 2025



Source: Crime Survey for England and Wales from the Office for National Statistics

Notes:

1. Data for 1995, 1997 and 1999 are for year ending (YE) December. All other years are for YE March.
2. Estimates for YE March 2021 and YE March 2022 are not available because of the coronavirus (COVID-19) pandemic.

Trends in use of individual drug types

Cannabis

Cannabis has consistently been the most used drug in England and Wales since estimates began in YE December 1995 (Figure 1). In YE March 2025, 6.5% of people aged 16 to 59 years and 12.5% of people aged 16 to 24 years reported having used the drug in the last 12 months. These represented no statistically significant changes compared with YE March 2024. However, levels were lower for those aged 16 to 24 years compared with YE March 2015 (16.4%).

Powder cocaine

There was no statistically significant change in the prevalence of powder cocaine use in YE March 2025 for people aged 16 to 59 years (2.1%) and 16 to 24 years (2.3%) compared with YE March 2024. However, powder cocaine use was lower among those aged 16 to 24 years compared with YE March 2015 (4.7%).

Nitrous oxide

In YE March 2025, 0.5% of people aged 16 to 59 years had used nitrous oxide. This is a decrease compared with YE March 2024 (0.9%). There was also a decrease in the use of nitrous oxide among those aged 16 to 24 years (1.3%) compared with the previous year (3.3%).

Ecstasy

Prevalence of ecstasy use in YE March 2025 remained similar to YE March 2024. Around 1.2% of people aged 16 to 59 years and 1.9% of people aged 16 to 24 years reported taking this drug in the last 12 months. However, ecstasy use was lower among those aged 16 to 59 years compared with YE March 2015 (1.7%) and among those aged 16 to 24 years compared with YE March 2015 (5.3%).

Hallucinogens

There was no statistically significant change in the prevalence of overall hallucinogen (lysergic acid diethylamide and magic mushrooms) use in YE March 2025 among people aged 16 to 59 years (1.1%) compared with YE March 2024. However, levels were lower for those aged 16 to 24 years (1.5%) compared with YE March 2024 (2.9%). There was a decrease in magic mushroom use among people aged 16 to 24 years, from 2.3% to 0.9%.

Ketamine

There was no statistically significant change in ketamine use in YE March 2025 among those aged 16 to 24 years (2.0%) compared with YE March 2024 and YE March 2015. However, there was an increase among those aged 16 to 59 years (0.8%) compared with YE March 2015 (0.5%).

Other drugs

Prevalence of use for all other individual drug types was below 1.0% in YE March 2025. There were no statistically significant changes for other individual drug types compared with YE March 2024 (Figure 3). This is except for new psychoactive substances use, which decreased from 0.5% to 0.3% among those aged 16 to 59 years and from 1.7% to 0.6% among those aged 16 to 24 years.

Figure 3: New psychoactive substances and nitrous oxide use decreased in the last 12 months for people aged 16 to 59 years

Proportion of people reporting use of drugs in the last 12 months, England and Wales, year ending (YE) December 1995 to YE March 2025

Notes

1. Data for 1995, 1997 and 1999 are for year ending (YE) December. All other years are for YE March.
2. Estimates for YE March 2021 and YE March 2022 are not available because of the coronavirus (COVID-19) pandemic.

The latest estimates of lifetime drug use and drug use in the last month can be found in section 1 of the [accompanying dataset](#).

3 . Frequency of drug use

The Crime Survey for England and Wales (CSEW) estimated that 2.0% of people aged 16 to 59 years (around 680,000 people) were frequent drug users in year ending (YE) March 2025. This represents no [statistically significant](#) change in the proportion of frequent users compared with YE March 2024.

Around 3.5% of people aged 16 to 24 years (around 206,000 people) were frequent drug users in YE March 2025, which also represents no statistically significant change compared with YE March 2024. "Frequent users" are those who took any drug more than once a month in the last 12 months.

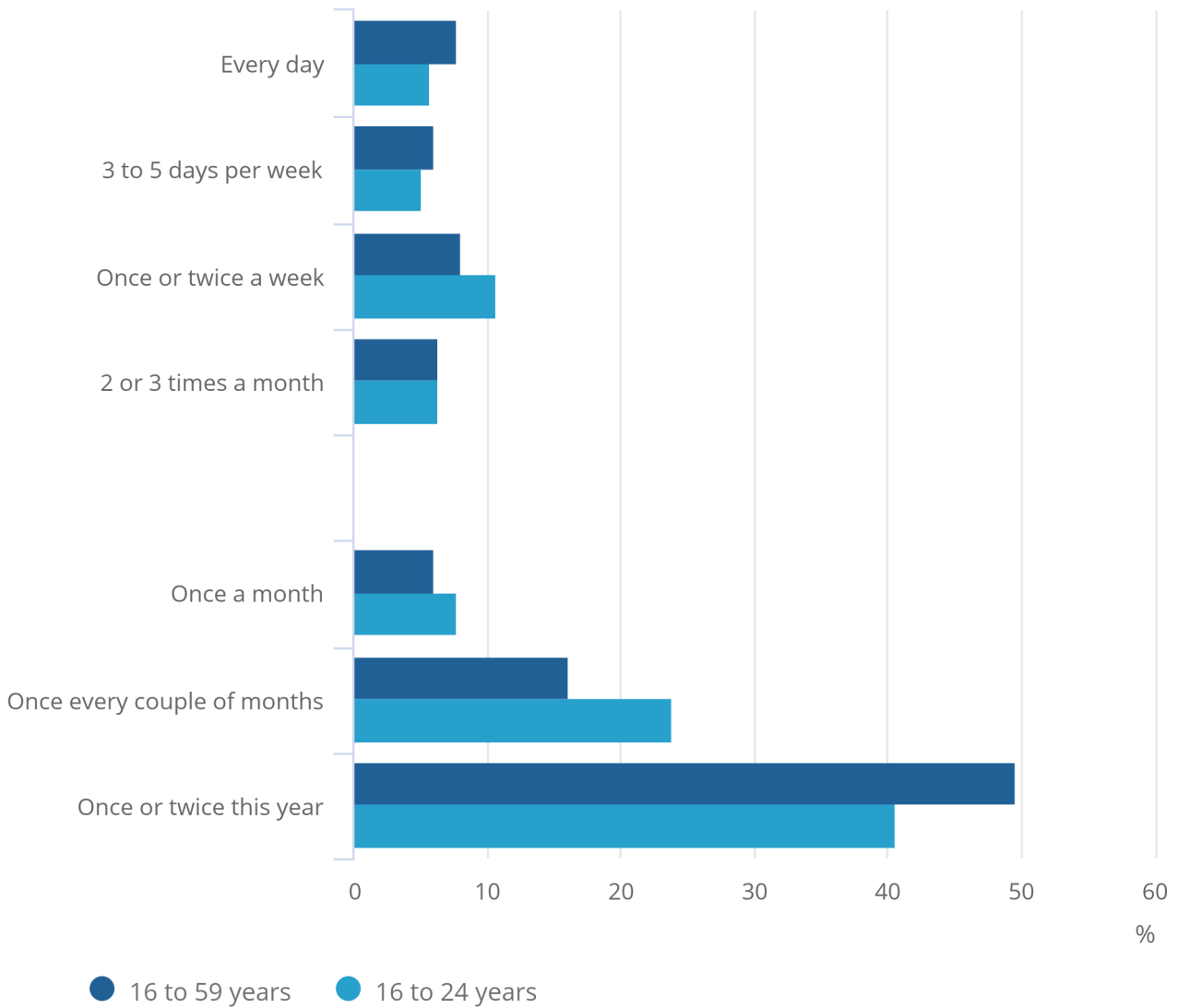
The majority of people aged 16 to 59 years who used any drug in the last 12 months were infrequent users (71.8%), with almost half (49.6%) taking them only "once or twice" (Figure 4). Around three in four (72.3%) of people aged 16 to 24 years were infrequent users.

Figure 4: Most people who had taken drugs in the last 12 months used them infrequently

Frequency of use among people aged 16 to 59 years and aged 16 to 24 years who had taken any drug in the last 12 months, England and Wales, year ending March 2025

Figure 4: Most people who had taken drugs in the last 12 months used them infrequently

Frequency of use among people aged 16 to 59 years and aged 16 to 24 years who had taken any drug in the last 12 months, England and Wales, year ending March 2025



Source: Crime Survey for England and Wales from the Office for National Statistics

Over one-third of people (36.5%) aged 16 to 59 years who used cannabis in the last 12 months used the drug more than once a month, with 10.4% using it every day. The proportion of frequent users was similar to YE March 2024 (34.0%). Around 8.0% of people aged 16 to 59 years who used powder cocaine and 2.2% of people who used ecstasy reported using these drugs frequently (more than once a month), similar to the previous year.

Frequency of drug use is not a measure of drug dependence. The latest information on drug dependence in England is reported in the NHS's [Adult Psychiatric Morbidity Survey 2023 to 2024](#). A total of 6.7% of people aged 16 to 64 years showed signs of drug dependence, an increase from 3.8% in 2014. This rise mostly related to an increase in adults reporting signs of dependence on cannabis.

There were 5,565 deaths related to drug poisoning that were registered in England and Wales in 2024. Of these deaths, 3,736 were identified as drug misuse. See our [Deaths related to drug poisoning in England and Wales: 2024 registrations bulletin](#) for further information.

More detailed figures on the frequency of drug use can be found in Section 2 of the [accompanying dataset](#).

4 . Drug user characteristics

The Crime Survey for England and Wales (CSEW) estimated the proportion of people aged 16 to 24 years (15.1%) reporting any drug use in the last 12 months was higher compared with people aged 25 to 59 years (7.3%), in year ending (YE) March 2025.

There were no [statistically significant](#) changes in any drug use in the different age groups compared with YE March 2024. However, there were decreases in any drug use for those aged 16 to 19 years and increases for those aged 45 to 54 years compared with YE March 2015 (Figure 5).

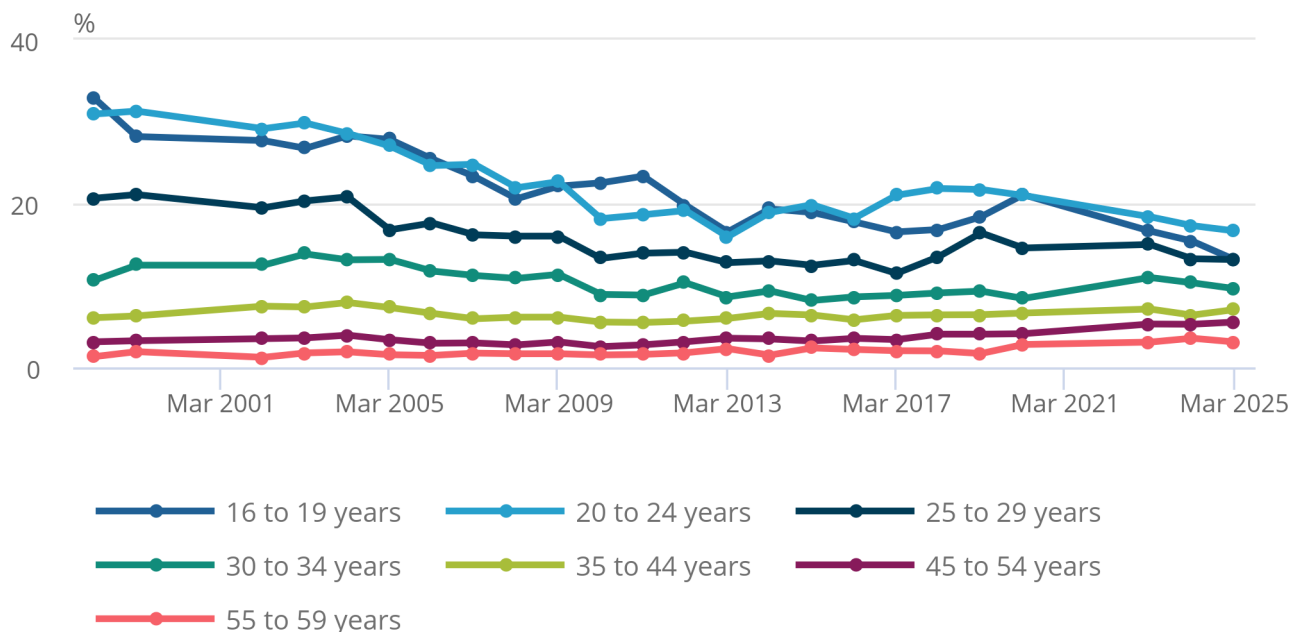
There has been a narrowing in the differences between age groups since these data were first collected in the CSEW in the 1990s. This is a result of drug use decreasing among younger age groups and increasing among older age groups.

Figure 5: Younger people were more likely to have taken a drug in the last 12 months than older people but the differences between age groups continued to narrow

Proportion of people who reported using a drug in the last year by age, England and Wales, year ending (YE) December 1997 to YE March 2025

Figure 5: Younger people were more likely to have taken a drug in the last 12 months than older people but the differences between age groups continued to narrow

Proportion of people who reported using a drug in the last year by age, England and Wales, year ending (YE) December 1997 to YE March 2025



Source: Crime Survey for England and Wales from the Office for National Statistics

Notes:

1. Data for 1997 and 1999 are for the year ending (YE) December. All other years are for YE March.
2. Estimates for YE March 2021 and YE March 2022 are not available because of the coronavirus (COVID-19) pandemic.

Prevalence of drug use varied by a range of other characteristics. For example, those who were married or in a civil partnership were less likely to have used a drug in the past year (4.3%) compared with those who were single (13.7%), cohabiting (11.4%), widowed (10.7%) or divorced or in a legally dissolved partnership (9.1%).

People with household incomes of less than £10,400 per year and between £10,400 and £20,800 were more likely to have used cannabis (10.9% and 8.1%, respectively) than those with higher incomes (Figure 6).

People with household incomes of more than £52,000 per year were more likely to have used a Class A drug (4.4%) than those with incomes between £20,800 and £41,600. Differences were not statistically significant compared with those with other household incomes.

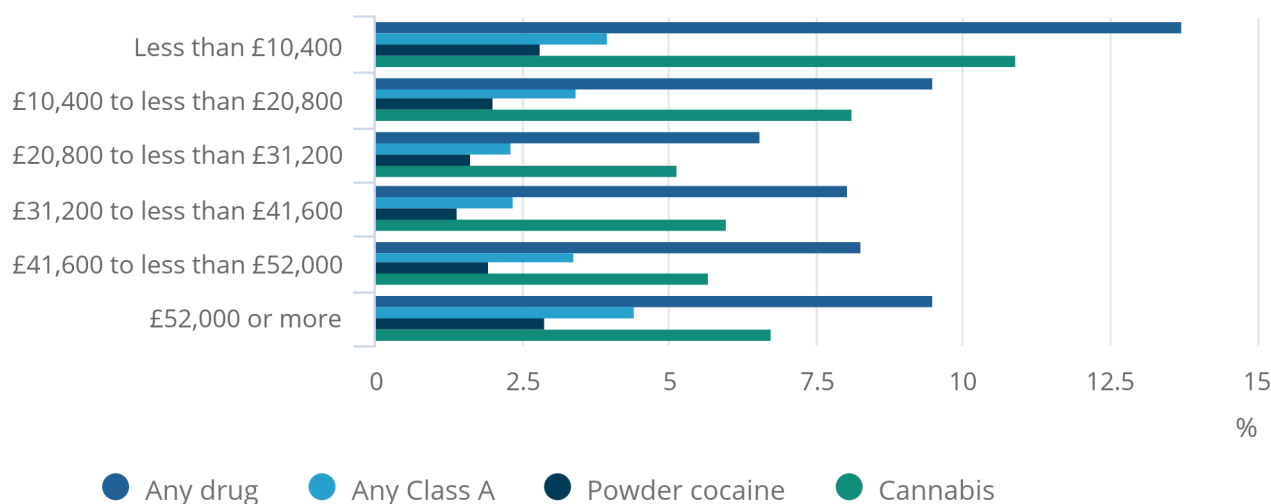
It is important to note that personal and household characteristics are not necessarily independently related to drug use. For example, the relationship between drug use and marital status may be influenced by age.

Figure 6: Levels of drug use by household income varied by drug type

Proportion of people aged 16 to 59 years who reported using a drug in the last 12 months by total household income, England and Wales, year ending March 2025

Figure 6: Levels of drug use by household income varied by drug type

Proportion of people aged 16 to 59 years who reported using a drug in the last 12 months by total household income, England and Wales, year ending March 2025



Source: Crime Survey for England and Wales from the Office for National Statistics

More detailed figures on characteristics of drug users can be found in Section 3 of the [accompanying dataset](#).

5 . Obtaining drugs

The Crime Survey for England and Wales (CSEW) estimated that a friend, neighbour or colleague was the most common source of illegal drugs (43.5%) among people aged 16 to 59 years who had taken drugs in the last 12 months in year ending (YE) March 2025. The next most common source of illegal drugs was a known dealer (13.5%).

Over a third of people aged 16 to 59 years (36.4%) claimed it would be "very" or "fairly" easy to obtain illegal drugs within 24 hours, which is similar to YE March 2024 (39.2%).

More detailed figures on the sources and ease of obtaining drugs can be found in Section 5 of the [accompanying dataset](#).

6 . Data on drug misuse in England and Wales

[Drug misuse in England and Wales – Appendix table](#)

Dataset | Released 11 December 2025

Data from the Crime Survey for England and Wales (CSEW) on the extent and trends of illicit drug use.

7 . Glossary

Any drug

The Crime Survey for England and Wales (CSEW) asks questions on the use of specific drugs. "Any drug" use is a composite variable that combines individual drugs. These include:

- amphetamines
- anabolic steroids
- cannabis
- cocaine (crack and powder)
- ecstasy
- heroin
- ketamine
- lysergic acid diethylamide (LSD)
- magic mushrooms
- mephedrone
- methadone
- methamphetamine
- nitrous oxide
- tranquillisers

In addition to these named drugs, respondents were asked whether they had taken something else in the same period. These include:

- pills or powders (not prescribed by a doctor) when the respondent did not know what they were
- smoking something (excluding tobacco) when the respondent did not know what it was
- taking anything else that the respondent knew, or thought, was a drug (not prescribed by a doctor)

These are included in the composite measure of "any drug", but are not presented individually in tables.

The definition of "any drug" has changed over time. For example, nitrous oxide was added in 2024 because it was [classified as a Class C drug under the Misuse of Drugs Act 1971 on 8 November 2023](#). More detailed descriptions on which drugs are included for each year can be found in Section 1 of the [accompanying dataset](#).

Any Class A drug

The [Misuse of Drugs Act 1971](#) classifies controlled drugs into three categories – Class A, Class B and Class C – according to the harm that they cause. Class A drugs are considered to be the most harmful. A list of drugs and their classifications can be found on the Home Office's [List of most commonly encountered drugs currently controlled under the misuse of drugs legislation guidance](#).

The CSEW asks questions on the use of specific drugs. Any Class A drug use is a composite variable that combines individual drugs. These include:

- cocaine (crack and powder)
- ecstasy
- heroin
- LSD
- magic mushrooms
- methadone
- methamphetamine

New psychoactive substances

Substances such as mephedrone, spice, Gamma-butyrolactone (GBL) or gamma-hydroxybutyric acid (GHB), salvia, and other emerging substances are collectively known as new psychoactive substances (NPS). These substances are usually intended to mimic the effects of drugs like cannabis, ecstasy, or cocaine. They come in different forms, including herbal mixtures that are smoked, powders, crystals, tablets, or liquids.

Some NPS were previously legal to supply if they were not already controlled under the Misuse of Drugs Act 1971 and were often previously referred to as "legal highs". However, under the [Psychoactive Substances Act 2016](#), all of these are now illegal to supply, produce and import.

The CSEW only measures generic rather than specific NPS. As a result, this estimate does not provide a measure of all drugs captured by the Psychoactive Substances Act 2016. This is because many substances considered to be NPS are now controlled under the Misuse of Drugs Act 1971, and it is likely that some substances captured by the Psychoactive Substances Act 2016 are not commonly considered NPS.

Frequent drug user

A drug user is defined as "frequent" if they have taken the drug more than once a month in the last year.

8 . Data sources and quality

Drug misuse data included in this release are sourced from the Crime Survey for England and Wales (CSEW). CSEW estimates are [accredited official statistics](#) and were [independently reviewed by the Office for Statistics Regulation](#) in October 2024. They comply with the standards of trustworthiness, quality and value in the [Code of Practice for Statistics](#) and should be labelled "accredited official statistics".

The CSEW is primarily an interviewer-administered face-to-face victimisation survey asked of people aged 16 years and over. It covers the population living in households in England and Wales. Estimates in this bulletin are based on data from the CSEW self-completion section. The upper age limit for respondents eligible for the self-completion module was removed from YE March 2020 onwards. However, it remains in place for questions on drug use because of the low prevalence of drug use among those aged 60 years and over.

The CSEW is recognised as a good measure of drug use for the drug types and population it covers. However, it does not include populations living in group residences (for example, care homes or student halls of residence), other institutions, such as prisons, or homeless people. This is potentially important because some of these groups may have relatively high rates of drug use.

Disclosure issues still exist around willingness to report drug use. This is despite the self-completion methodology of the survey, which is intended to encourage honest answers. An unknown proportion of respondents may not report their behaviour honestly and the CSEW is likely to underestimate drug misuse. However, the CSEW provides consistent measures of drug use and comparisons over time remain valid.

It should also be recognised that levels of drug use are relatively low. Some drugs, such as heroin, are particularly rare and only have a small number of users. The range of variability for these drugs will be quite large because of sampling variability, so figures will be liable to fluctuation from year to year. Changes from one year to the next should be interpreted with caution, and users should pay greater attention to the medium-term and longer-term trends.

It is also important to note that the definition of "any drug" changes over time as new drugs become available and the classification of drugs change. For example, nitrous oxide was added in 2024 because it was classified as a Class C drug under the Misuse of Drugs Act 1971 on 8 November 2023.

9 . Related links

[Guide to finding crime statistics](#)

Methodology | Last revised 28 July 2025

This guide collates the main sources of crime statistics produced by multiple government departments, organised by area of interest, to provide an efficient way to find the crime statistics needed.

[User guide to crime statistics for England and Wales: March 2025](#)

Methodology | Last revised 5 November 2025

Detailed information on datasets and methods used to compile our crime statistics.

[Deaths related to drug poisoning in England and Wales: 2024 registrations](#)

Bulletin | Released 17 October 2025

Deaths related to drug poisoning in England and Wales from 1993 to 2024, by cause of death, sex, age, and substances involved in the death.

[Adult substance misuse treatment statistics 2023 to 2024: report](#)

Report | Published 28 November 2024

Alcohol and drug misuse and treatment in adults from Public Health England's (PHE) national drug treatment monitoring system (NDTMS).

10 . Cite this article

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