

DRUGS ACTION PLAN



Niall Collins TD
SPOKESPERSON FOR JUSTICE AND EQUALITY



Forward

The landscape of drug use has changed in Ireland and there are emerging needs in terms of the nature and prevalence of drug use in this country. Substance misuse is a complex and crosscutting issue and the impact of the misuse of illicit and licit drugs is far reaching.

The emerging challenges posed by substance misuse in Ireland are impacting heavily on families, communities, tourism and our health services. Alcohol and Cannabis misuse is prevalent across the Island and poly drug use is persistent. Reduced state resources and a lack of urgency by the Government to address the issue has resulted in an inadequate response.

It is now estimated that at least one person a day in Ireland dies from a drug overdose. This represents the third highest level of overdose deaths per capita in Europe. This is simply unacceptable and highlights how pressing this issue has become.

Fianna Fáil has brought forward these policy proposals seeking to address the huge challenge of drug abuse prevalent in Irish society. We will reappoint a Minister for Drugs; we will build on the National Drugs Strategy by implementing a new National Substance Misuse Strategy inclusive of all drugs including alcohol and cannabis; we will seek to address the anti-social behaviour experienced in our cities as a result of drug abuse and we will seek to improve the aftercare services for those engaged in drug rehabilitation services.

We believe the steps outlined in this policy document will help turn the tide of the current drugs crisis.

A handwritten signature in green ink that reads "Niall Collins". The signature is written in a cursive style and is underlined with a long, sweeping stroke.

Niall Collins TD

Fianna Fáil Spokesperson for Justice and Equality

Current Policy Approach

Medical treatment for opiate addiction has historically been the primary focus of the addiction response in Ireland despite the fact that for years the treatment numbers have been relatively static and represent a small cohort of people. Alcohol and Cannabis are causing problems for a vastly higher percentage of the population and there has been a minimal investment in community based supports to tackle these problems

For more than a decade the distribution of resources for drugs has been concentrated in areas designated to be disadvantaged. This has created communities that are saturated with drug services and in contrast, huge geographical areas with no services at all. There needs to be greater equity in resource and service provision. Ireland has a 'new poor' and social problems such as mental health difficulties and co-occurring substance misuse issues manifest across the entire socio-economic spectrum. For example, Health Research Board statistics evidence a huge prevalence of new treatment episodes for alcohol in the Regional Drug & Alcohol Task Force areas which is not manifesting itself in the same way in the smaller largely urban Local Drug Task Force Areas. However a disproportionate level of resources and services are concentrated in the Local Drug Task Force areas.

There needs to be a greater emphasis on 'outcomes' particularly in relation to the distribution of resources. For example; for years seriously high levels of public funding has been dispersed via the HSE into methadone maintenance for opiate substitution in this country with little or no emphasis on progression, recovery or movement to drug free status for patients

Fianna Fáil Proposals

A new strategy is required to address the current prevalence and nature of drug use in Ireland which needs to contain high level actions which can be broadly categorised under (1) National Substance Misuse Strategy, (2) Community Impact & Crime, (3) Health, Treatment & Rehabilitation, (4) Prevention & Early Intervention. These proposals are outlined below:

1. IMPLEMENT A NEW NATIONAL SUBSTANCE MISUSE STRATEGY AND REAPPOINT A MINISTER FOR DRUGS

1. Develop and implement an effective National Substance Misuse Strategy inclusive of all drugs including alcohol and cannabis
2. Re-appoint a dedicated Minister for Drugs and establish a clear governance and coordination structure (such as the Office for the Minister for Drugs) to ensure linked up strategies that are cognisant of the current prevalence of drug issues and emerging needs
3. Implement rational systems for the dispersion of funding under the new National Substance Misuse Strategy which is cognisant of (i) level of need (ii) evidence base for interventions (iii) measurement of outcomes (iv) equity of provision
4. Ensure that the National Strategy works for both rural and urban drug users

2. COMMUNITY IMPACT & CRIME

1. In city areas where drug dealing and alcohol related anti-social behaviour is most persistent establish high visibility dedicated support units within An Garda Síochána
2. Implement Community Courts to deal with low level offences such as vandalism, shoplifting and drug use with a clear focus on restorative justice and a problem-solving approach to local crime and safety concerns
3. Develop and implement a 'drug related intimidation' strategy to support families and others who are impacted by drug debt and other drug related intimidation in conjunction with the Regional Drug & Alcohol Task Forces in Ireland
4. Review Anti-Drug Legislation and Drug Treatment Policy to optimise resources so that those who engage in the exploitation of young people and other vulnerable groups through drugs should be punished in a more severe manner, including higher mandatory sentences.
5. Provide direct & seamless referral routes into treatment for low level offenders whose crimes are directly linked to drug/alcohol use
6. Implement a "Good Neighbour" Policy for Drug Treatment Centres where the centres can address any concerns held by local residents and business alike. A coordinated approach must be taken by the Gardaí, the HSE, the treatment centres and Dublin City Council to ensure that these centres can operate in an effective manner while minimising any negative impact on the areas where they are located.

3. HEALTH: TREATMENT & REHABILITATION

- 1.** Put in place a strategy so that all GPs in Ireland can prescribe opiate substitution medications such as Methadone and/or Suboxone & move away from methadone clinics
- 2.** Establish community based support services (such as the North Dublin Community Care Service) in each area where adolescents, individuals and families impacted by drug & alcohol use can receive evidence based assessment, case management and structured care planning using an integrated care model
- 3.** Strengthen the role of the 10 Regional Drug & Alcohol Drug Task Forces as commissioners and evaluators of drug and alcohol support services across Ireland
- 4.** Expand the capacity of services to provide support to those experiencing problem alcohol use and other drugs and move from predominantly opiate focussed services to a recovery service
- 5.** Ensure that treatment & rehabilitation services have comprehensive aftercare structures in recognition of the seriously high level of overdose and relapse immediately post detox/residential treatment and ensure that temporary accommodation for those in recovery should be separate from addicts
- 6.** Create a service which is responsive and focuses on the individual's needs which must be addressed in order to recover from drug addiction; addicts and those recovering from drugs must be individually assessed every six months and a progress update given on a case by case basis
- 7.** Create a path for people in rehabilitation from drug addiction to access education and training facilities in their local areas

4. PREVENTION & EARLY INTERVENTION

- 1.** Establish 'Identification & engagement teams' in conjunction with appropriate youth related services to identify the most at risk young people to interrupt their potential trajectory into problem drug & alcohol use and associate activities
- 2.** Examine best practise schools based programmes to support SPHE such as the Headstrong 'Help-seeking' schools based substance misuse programme currently in pilot phase with a view to national roll-out
- 3.** Establish family support programmes for children impacted by parental substance misuse
- 4.** Restore the funding to provide guidance counsellors in secondary level schools across the country in order to ensure that the overall wellbeing of second level students is catered for

APPENDIX ONE:

Garda Síochána Drug Unit Numbers in Ireland

QUESTION NO: 324

DÁIL QUESTION addressed to the Minister for Justice and Equality
(Deputy Frances Fitzgerald)

by **Deputy Billy Kelleher**

for WRITTEN on Tuesday, 24th February, 2015.

* To ask the Minister for Justice and Equality if she will provide the number of Gardaí assigned to each divisional drug unit for 2011, 2012, 2013, 2014 and to date in 2015.. - Billy Kelleher

REPLY.

All Gardaí have a responsibility in the prevention and detection of criminal activity whether it be in the area of burglary, drug offences or otherwise. Specifically in relation to drugs, I can assure the Deputy that An Garda Síochána continues to pro-actively and resolutely tackle all forms of drug crime in this jurisdiction. The Garda National Drugs Unit, works closely with dedicated Divisional and District Drug Units and other national units, including the Organised Crime Unit, as well as the Criminal Assets Bureau in targeting persons involved in the illicit sale and supply of drugs.

I have been informed by the Garda Commissioner that the personnel strength of each Divisional Drugs Unit on 31 December 2011-2013 and to 31 December 2014, the latest date for which figures are readily available, was as set out in the table below.

Divisional Drugs Units				
Division	2011	2012	2013	2014
DMR South Central	16	13	11	19
DMR North Central	18	20	13	20
DMR North	32	31	27	16
DMR East	15	13	13	10
DMR South	31	30	23	17
DMR West	35	28	26	24
DMR NSS	2	6	0	0
Waterford	10	10	9	5
Wexford	11	6	4	1
Kilkenny/Carlow	8	7	7	5
Tipperary	9	8	7	7
Cork City	24	26	29	28
Cork North	7	9	9	5
Cork West	7	5	4	3
Kerry	10	6	8	10
Limerick	20	12	11	12
Donegal	12	10	10	8
Cavan/Monaghan	8	5	0	0
Sligo/Leitrim	7	8	6	8
Louth	6	7	6	6
Clare	9	7	6	7
Mayo	5	5	5	5
Galway	12	11	12	8
Roscommon/Longford	7	6	7	6
Westmeath	9	7	7	6
Meath	7	6	4	4
Kildare	7	2	2	6
Laois/Offaly	6	3	0	3
Wicklow	11	3	4	4
TOTAL	361	310	270	253

APPENDIX TWO:

Methadone Programme Information**4th February 2015**

Deputy Seán Ó Feargháil, TD, Dáil Eireann, Kildare Street, Dublin 2

PQ 49567/14

* To ask the Minister for Health the average length of time for which a person remains on a methadone programme; the average cost per annum in maintaining a person on a programme; the number of locations from which methadone programmes are operated; the number of persons provided for on average at these locations; and if he will make a statement on the matter.

Dear Deputy Ó Feargháil,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position:

1. THE AVERAGE LENGTH OF TIME FOR WHICH A PERSON REMAINS ON A METHADONE PROGRAMME:

Table 1 outlines a breakdown of the length of time persons have remained in methadone treatment.

Table 1.

Years in Treatment	Total
20 yrs +	178
19 yrs +	230
18 yrs +	314
17yrs +	501
16yrs +	797
15yrs +	1326
14yrs +	1780
13yrs +	2170
12yrs +	2592
11yrs +	2984
10yrs +	3325
9yrs +	3770
8yrs +	4141
7yrs +	4571
6yrs +	5012
5yrs +	5522
4yrs +	6110
3yrs +	6716
2yrs +	7540
1yr +	8434
Overall Total	9678

Compiled by the CTL 20 June 2014

Note that - Retention in methadone is generally regarded as a positive goal in drug treatment. A recent report from the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) showed that no country of the 20 surveyed, including Ireland, imposes a limit on the amount of time a person can be on methadone

2. THE AVERAGE COST PER ANNUM IN MAINTAINING A PERSON ON A PROGRAMME;

It is not possible to extricate the cost of the methadone treatment from the overall cost in delivering the Addiction services (set out table 2 below)

Table 2

	2011 Expenditure	2012 Allocation	2012 Expenditure	2013 Allocation	2013 Expenditure	2014 Allocation
Grand Total	€92,878,435.00	€90,405,769.98	€90,751,786.32	€91,545,658.00	€90,391,525.06	€114,777,234.49

Note:

^[1] Funding in the sum of €21.57ml, was transferred to the HSE Vote in respect of Task Force Projects that were funded by the Department of Health's Drugs Programme Unit for 2014.

^[2] Budget allocation from Metal Health for Donegal, Sligo, Leitrim is included in the figures for 2012; €1,723,955, 2013; €1,590,280 and 2014; €1,701,183 figures

^[3] Budget Allocation from Mental Health for Cavan Monaghan is included in 2013; €330,000 and 2014 €250,000 figures

However the average cost per patient who received Methadone Treatment in the Community for the year 2013 is set out in the table 3 below:

Table 3

No. of Unique Methadone Patient attending a GMS Doctor Surgery	Annual Cost per Person on Methadone
4,158	€1,675.74
No. of Unique Methadone Patient attending a Pharmacy	Annual Cost per Person on Methadone
7,138	€1,723.16

3. THE NUMBER OF LOCATIONS FROM WHICH METHADONE PROGRAMMES ARE OPERATED; THE NUMBER OF PERSONS PROVIDED FOR ON AVERAGE AT THESE LOCATIONS:

During the month of December 2014 there were 5537 persons attending 74 Clinics for methadone treatment. The number of persons attending each clinic is set out in the table overleaf.

Table 4.

Area	Clinic	Location	December
HSE's National Drug Treatment Centre	National Drug Treatment Centre	Pearse St, Dublin 2	487
HSE DML	ARC Project	Crumlin, Dublin 12	85
	Arklow Clinic	Co Wickow	58
	Athlone Drug Treatment Clinic	Co Westmeath	103
	Baggot Street Clinic	Haddington Rd, Dublin 4	91
	Ballyfermot & Palmerston Primary Care Centre	Ballyfermot, Dublin 10	151
	Ballywaltrim Clinic	Bray, Co Wicklow	17
	Bride Street Clinic	Dublin 2	29
	Brookfield Project	Tallaght, Dublin 24	25
	CARP Killinarden	Tallaght, Dublin 24	68
	CASP	Clondalkin, Dublin 22	93
	Castle Street Clinic	Dublin 2	235
	Clondalkin/Lucan Treatment Centre	Lucan, Co Dublin	209
	Cork Street Addiction Centre	Dublin 10	51
	Cuan Dara Detox Unit	Cherryorchard, Dublin 10	15
	Cuan Mhuire Drug Treatment Unit	Athy, Co Kildare	<10
	Dr Steevens Addiction Centre	Dublin 8	158
	Drimnagh Clinic	Dublin 12	38
	Dundrum Clinic	Dublin 14	28
	Fassaroe Clinic	Bray, Co Wicklow	22
	Fettercairn Project	Tallaght, Dublin 24	31
	Inchicore Clinic	Dublin 8	41
	Irishtown S.C.	c/o Castle St Clinic	11
	Jobstown Clinic	Tallaght, Dublin 24	46
	Killarney Road Clinic	Bray, Co Wicklow	89
	Loughlinstown Satellite Clinic	Co Dublin	13
	Merchants Quay	Dublin 8	11
	Mullingar Clinic	Co Westmeath	47
	Old County Road	Crumlin, Dublin 12	81
	Patrick Street Clinic	Dun Laoghaire, Co Dublin	168
	Portlaoise Drug Treatment Clinic	Co Laois	92
	Rathmines Clinic	c/o Castle St Clinic	13
	Rialto Community Project	Dublin 8	53
	Safetynet Homeless Service - Simon Hostel	Harcourt St, Dublin 2	13
	Safetynet Homeless Service - Peter McVerry Hostel	Aungier St, Dublin 2	<10
	Safetynet Homeless Service - The Salvation Army	York St, Dublin 2	<10
	Sallynoggin S.C.	Co Dublin	39
	St Aengus Project	Tallaght, Dublin 24	25
	Tallaght Drug Services	Tallaght, Dublin 24	187

	Tullamore Community Alcohol & Drug Services	Co Offaly	35
HSE DNE	Ballymun Satellite Clinic	Dublin 11	33
	Beaumont Hospital	Dublin 9	14
	Bonnybrook Satellite Clinic	Coolock, Dublin 17	94
	Cabra Clinic	Dublin 11	112
	City Clinic	Amien St, Dublin 1	299
	Coolock Clinic	Coolock, Dublin 17	18
	Corduff Clinic	Dublin 15	30
	Darndale Clinic	Dublin 17	146
	Domville House	Dublin 9	220
	Donabate Clinic	Co Dublin	19
	Donnycarney Project	Killester, Dublin 5	25
	Edenmore Clinic	Dublin 5	27
	Howth Drug Clinic	Dublin 13	21
	Kilbarrack Project	Dublin 5	65
	Mountview Drug Clinic	Dublin 15	71
	Mulhuddart Clinic	Dublin 15	27
	Safetynet Homeless Service - Salvation Army	Closed	<10
	Safetynet Homeless Service - Granby Lane	Dublin 1	38
	Sean McDermott Project	Dublin 1	<10
	Swords Drug Clinic	Co Dublin	52
	The Mews Clinic	NCR, Dublin 7	128
	The Thompson Centre	Mountjoy St, Dublin 7	237
	Wellmount Clinic	Finglas, Dublin 11	206
HSE West	Galway	Galway City	39
	Limerick	Limerick City	129
HSE South	Aislinn Centre	Ballyraggert, Co Kilkenny	<10
	Arbour House	Cork City	232
	Ardú Drug Treatment Clinic	Kilkenny City	23
	Carlow Drug Treatment Clinic	Carlow Town	34
	Kerry Addiction Clinic	Tralee, Co Kerry	54
	Merchants Quay Ireland	Tullow, Co Carlow	17
	South Tipperary Methadone Clinic	Clonmel, Co Tipperary	37
	Waterford Substance Misuse Service	Waterford City	92
	Wexford Drug Treatment Clinic	Wexford Town	24
Total:	74		5537 Clients

Also, for the Deputy's information, during the period ended December 2014, 272 level one GP's and 68 level two GP's provided treatment to 3,975 patients across the country.

I trust this information is of assistance to you but should you have any further queries please contact me.

APPENDIX THREE:

Drug Related Deaths**QUESTION NO: 11**

DÁIL QUESTION addressed to the Minister for Health (Deputy Leo Varadkar)

by **Deputy Billy Kelleher**

for ORAL ANSWER on 25/02/2015

- * To ask the Minister for Health the number of deaths caused by drugs; and if he will provide a specific figure for those involving methadone, in each of the past five years; and if he will make a statement on the matter. - Billy Kelleher T.D.

REPLY.

Drug-related deaths are a human tragedy for the families and friends of the people involved and have a considerable impact on communities and society as a whole. While there are no easy solutions to addressing the problem, the Government is committed to stepping up the effort to reduce the number of drug-related deaths.

The latest annual figures from the National Drug-Related Deaths Index indicate that 350 people died in 2012 due to the toxic effects of drugs, a decrease from 387 in 2011. There were 86 deaths involving methadone in 2012 as compared with 118 in 2011, 60 in 2010, 69 in 2009 and 80 in 2008. Methadone was involved in one out of four poisoning deaths and in most of these deaths methadone was mixed with another drug.

Many drug-related deaths are avoidable, particularly those involving methadone or heroin overdoses. For this reason, I have authorised the HSE to undertake a demonstration study for the use of naloxone in the prevention of opioid overdose. Naloxone reverses the effects of drugs like heroin, morphine and methadone if someone overdoses. The study, which is being carried out this year, aims to increase access to naloxone for non-medical staff, such as the families or friends of a drug user. The HSE budget includes an extra €2.1m to support this project and other measures targeting vulnerable drug users, including the provision of enhanced residential detoxification and rehabilitation facilities.

My Department is commencing work on the development of a new National Drugs Strategy for the period after 2016. The process will involve comprehensive consultation with stakeholders and the public on the current national drugs policy and future priorities. It will also take account of evidence-based research, information and data sources on the extent and nature of problem drug use in Ireland, including drug-related deaths.

APPENDIX FOUR:

Funding for National Drugs Strategy

QUESTION NO: 427

DÁIL QUESTION addressed to the Minister for Health (Leo Varadkar)
by **Deputy Billy Kelleher**
for WRITTEN ANSWER on 24/02/2015

- * To ask the Minister for Health if he will provide in tabular form the funding provided each year since 2010 by the Health Service Executive to support implementation of the National Drugs Strategy.
- Billy Kelleher T.D.

REPLY.

The information requested by the Deputy is set out in the table below.

2010 Expenditure €m	2011 Expenditure €m	2012 Expenditure €m	2013 Expenditure €m	2014 Expenditure €m
105,400	92,878	90,752	90,392	114,777

The decrease in expenditure in 2011 compared to 2010 arose due to savings, which were achieved as a result of the public service pay cut, HSE staffing redundancies and a reduction in funding to Voluntary and Community Agencies funded under service arrangements. The increase in the 2014 allocation is due to a transfer of €21.57m in funding from my Department's Vote to the HSE Vote in respect of Drug and Alcohol Task Force projects.

In addition, a range of other services in the HSE provide frontline interventions to clients with addiction issues. These include the Health & Wellbeing, Mental Health and Acute Hospital Services Divisions as well as the Emergency Departments, Primary Care Services and General Practitioners.

QUESTION NO: 428

DÁIL QUESTION addressed to the Minister for Health (Leo Varadkar)

by **Deputy Billy Kelleher**

for WRITTEN ANSWER on 24/02/2015

- * To ask the Minister for Health if he will provide in tabular form the funding provided each year since 2010 to each of the local and regional drugs task forces - Billy Kelleher T.D.

REPLY.

In line with the National Drugs Strategy, my Department administers a Drugs Initiative which primarily funds community based drugs initiatives supported by Local and Regional Drug and Alcohol Task Forces. The budget allocation for the twenty four Local and Regional Drug and Alcohol Task Forces for each of the years referred to by the Deputy is set out in the table overleaf:

LDATFs	2010	2011	2012	2013	2014	2015
Ballyfermot	1,533,826	1,492,413	1,569,489	1,522,404	461,150	255,466
Ballymun	1,243,552	1,209,976	1,180,695	1,145,274	632,817	422,958
Blanchardstown	1,184,200	1,152,227	1,124,343	1,090,613	179,305	179,305
Bray	1,656,849	1,612,114	1,573,101	1,525,908	573,860	573,860
Canal Communities	1,645,413	1,600,987	1,562,243	1,515,376	338,605	338,605
Clondalkin	1,495,408	1,455,032	1,421,577	1,428,930	388,114	388,114
Cork	1,622,621	1,617,730	1,578,581	1,531,224	411,988	411,988
Dublin 12	1,180,005	1,148,145	1,120,360	1,086,749	74,013	70,997
Dublin North East	1,294,199	1,259,256	1,228,782	988,234	422,251	422,251
Dun Laoghaire Rathdown	975,475	949,137	926,167	898,382	94,676	94,676
Finglas Cabra	986,452	959,818	936,590	908,492	263,277	263,277
North Inner City	2,495,777	2,428,391	2,369,624	2,298,535	576,956	494,856
South Inner City	2,276,911	2,215,434	2,161,821	2,096,966	255,720	176,043
Tallaght	1,316,913	1,281,356	1,250,347	1,262,837	452,712	341,438
RDATFs	2010	2011	2012	2013	2014	2015
East Coast	896,933	872,716	851,596	584,227	58,200	58,200
Midlands	1,576,095	870,581	849,513	824,028	307,810	136,816
Mid-West	894,739	1,533,540	1,496,428	1,451,535	147,982	147,982
North East	1,038,588	1,010,546	986,091	956,508	0	0
North West	806,369	784,597	765,610	742,642	272,485	258,633
North Dublin	870,066	846,574	826,087	801,304	456,080	309,778
South East	1,193,005	1,160,794	1,132,703	1,098,722	0	0
South West	894,750	870,592	849,524	824,038	102,820	102,820
Southern	1,089,369	1,059,956	1,034,305	1,003,276	0	0
Western	740,085	720,104	702,677	681,597	136,994	136,994

The reduction in the allocation in 2014 and 2015 respectively reflects the fact that my Department transferred €21.04m in funding relating to Drug and Alcohol Task Force projects to the HSE on 1st January 2014, with a further €1.02m transferring on 1 January 2015.





Niall Collins TD

SPOKESPERSON FOR JUSTICE AND EQUALITY

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