

Evaluation of the Pilot Cocaine Project in Tallaght

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1. Tallaght Pilot Cocaine Project

1.1 Introduction

Following a request from the Department of Community, Rural and Gaeltacht Affairs to put forward proposals in relation to tackling the growing problem of cocaine misuse in Ireland, the National Drugs Strategy Team established a Cocaine Sub-Group to recommend pilot interventions aimed at particular types of cocaine users.

Tallaght was chosen by the Sub-Group to be the subject of a community-based pilot project working with problematic intranasal cocaine users. The Tallaght project involved a partnership approach comprising two established community projects in the Tallaght area, namely St. Dominic's Community Response Project and Killinarden's Community Addiction Response Programme (CARP). Both projects were active in the delivery of drug-related services in the area since 1995.

The target group in this pilot were nasal cocaine-only users who had developed problematic levels of usage from an initial level of mild usage described as "snorting usually at weekends".

1.2 The Purpose of the Evaluation

The objectives of the evaluation were to analyse in a systematic manner what was achieved by the projects and report the findings and the lessons learned, both positive and negative, in order that they can be fully understood and integrated into long term service plans.

The evaluation was to examine the structures, effectiveness, efficiency and value for money components of the projects taking into account the use of the Maudsley Addiction Profiling System (MAPS) in the treatment projects.

1.3 Project Objectives

The stated objectives of the Tallaght Pilot Cocaine Project as set out in the initial project specification approved by the Cocaine Sub-Group were to:

- Record the social, health and personal changes of cocaine users throughout the duration of the project by outreaching to cocaine users in their places of entertainment, recreation and work;
- Devise a response to the client's cocaine use, by identifying and utilising the knowledge and skills that already exist in the area;

- Engage with both cocaine only users who were already in contact with statutory and voluntary services in the area and to encourage others into the service;
- Offer clients a stable and safe environment;
- Place special emphasis on dealing with the immediate needs of the clients;
- Meet other identified needs including holistic therapies, advice around coping strategies and one-to-one counselling; and
- Provide the clients with individual care plans.

Other project objectives as described by the Tallaght project staff include:

- Creating an awareness of the project among problematic cocaine users in the Tallaght area;
- Ascertaining if two previously heroin-driven projects could make the transition to cocaine service provision; and
- Developing best practice models of co-operation in the delivery of drug-addiction services.

1.4 Evaluation Process

Goodbody Economic Consultants were appointed external evaluators to the pilot cocaine projects. The Goodbody evaluation of the Tallaght project commenced in early October 2005. During the course of the evaluation Goodbody met with several members of the project staff team as well as with a number of participants of the Tallaght Cocaine project.

1.5 Project Activity

The pilot cocaine project represented a new area of service delivery for both the St. Dominic's and CARP projects, targeting a new client group. While it was initially intended to focus exclusively on intranasal cocaine users, a more general target group including all persons who had been taking cocaine on a recreational basis and had come to recognise their usage as problematic was targeted. A motivational and complementary therapy based approach was adopted with treatment very much focused on education, awareness and self-motivation.

As a first step, the project concentrated on identifying and sourcing key staff in the areas of outreach work as well as complementary therapy provision. It was decided to recruit an existing member of the Tallaght community as an outreach worker. It was considered that their knowledge of both the area and the local population would assist in bringing participants into the service. Having secured the necessary staff, efforts were turned to promoting and creating an awareness of the project through the project's outreach workers and an extensive advertising campaign. Contact was made with local health centres, drug projects, pharmacies, chemists, public houses and off-licenses. Contact was also made with the Health Board Addiction Services, the Gardaí and the Probation and Welfare services to establish an awareness of the existence of the project. Approximately 500 advertising leaflets were printed and distributed in the area. Advertisements were also placed in the local newspaper.

The Tallaght Cocaine project commenced service provision in February 2005, operating two evenings weekly in St. Dominic's Community Response Centre. St. Dominic's was chosen as the venue for project meetings owing to its accessibility to both the M50 motorway and Tallaght Village. At a later stage in the project's development an afternoon service was commenced one afternoon weekly in CARP's premises in Killinarden. There were two dedicated mobile phone lines manned on weekday basis.

The establishment of a strong relationship with each client represented a core element of the Tallaght project. To this end, a calm and relaxing atmosphere was provided at project meetings. When the client indicated that they were ready, a one-to-one session with a member of the project team took place where an initial assessment was made of the client's situation. Information was recorded around areas including the client's familial situation, their drug-taking habits, any supports they were in receipt of, their employment situation and any medical conditions they may have. It was decided at an early stage in the project's development not to implement the Maudsely Addiction Profiling System (MAPS) in assessing the project's clients. There was concern that the MAPs profiling system would alienate new clients to the service and reduce the likelihood of return visits owing to the personal nature of some of the questions used by the MAPs system.

Having completed the initial assessment, the project worker worked with the client to identify their patterns and associated triggers of usage. This identification was used to identify situations where misuse was likely to occur and which the client could try to avoid. The project worker also developed coping-skills with the client which could be employed when reuse was likely. Based on the outcome of the assessment process, clients were offered complementary therapies including Acupuncture, Indian Head Massage, Reiki and Stress Ball therapy in accordance with identified needs. Urinalysis tests were carried out at the client's request. The project provided the client with an on-going opportunity to talk with project staff about any issues that they were facing at project meetings or via the dedicated phone lines.

1.6 Project Inputs

In total €80,000 was allocated to the Tallaght project which it was originally intended would cover a six-month period as part of the Pilot Cocaine Project initiative. Owing to a tight management of its financial budget the project was in a position to continue operation after the six-month deadline had lapsed and obtained approval from the Department to do so.

Over the thirteen-month period February 2005 to April 2006 approximately €74,500 was spent by the project, of that 68 per cent was expended on wages and salaries. Rent and advertising represented 17 and 4 per cent of the project's expenditure respectively. Stationary and miscellaneous items accounted for the remaining expenditure items.

The project operated with a complement of six staff members including two project managers (representing the project managers at St. Dominic's and CARP), two outreach workers and two holistic therapy service providers. All staff worked on a part-time or sessional basis. The project operated two evenings and one afternoon weekly.

1.7 Project Outputs

Over the period February 2005 to May 2006, 99 clients visited the Tallaght cocaine project at least once¹. The average client age was 26 years. Seventy one per cent of clients were male. Attendance was greater at the project evenings in St. Dominic's compared to the afternoon project meeting in CARP. The majority share of clients came into the service as a result of local outreach work conducted by the project outreach staff. There were however, a number of referrals that grew in number as the project developed (see Table 1).

¹ Data regarding client attendance and interventions received are stored in paper-based files within the project. It is recommended that an electronic database of client information be created to assist with the ongoing monitoring of the project in the future.

Table 1: Sources of Client Referrals to Tallaght Cocaine Project

No. of times attended project	No. of Clients	Proportion of Clients (%)
Outreach	42	42.4
CARP or St. Dominic's	14	14.1
Probation & Welfare	11	11.1
Self	8	8.1
Other	8	8.1
Family	7	7.1
Press	5	5.1
Health Service Executive	4	4.0
Total	99	100.0

Source: Tallaght Pilot Cocaine Project

Table 2 lists the number of clients at the Tallaght Cocaine project by their level of attendance. A significant number of clients, 39 in total attended the project on just one occasion. Twenty-one clients attended the project twice, while 8 clients attended the project on three occasions. In total, 26 clients of all clients attended the project on five or more occasions.

Table 2: Number of Clients by Attendance at Tallaght Cocaine Project

No. of times attended project	No. of Clients
> 10	9
5 – 9	17
4	5
3	8
2	21
1	39
Total	99

Source: Tallaght Pilot Cocaine Project

Table 3 lists the number of client interventions by intervention type. There were 270 one-to-one sessions involving clients and staff members over the period February 2005 to May 2006. Among the alternative therapies available to clients, acupuncture was the most popular. In total, 110 sessions of acupuncture were administered to project clients. The corresponding figures for Indian Head Massage and Reiki were 46 and 21 respectively. There were also six sessions using stress balls. Five clients were referred to counselling services attending 21 counselling sessions².

Table 3: Type of Interventions by number of Times Administered

Type of Intervention	No of Clients Availing of Intervention	No of Times Intervention was Administered
One-on-one sessions	99	270
Acupuncture	53	110
Indian Head Massage	32	46
Reiki	13	21
Counselling	5	21
Stress Balls	4	6

Source: Tallaght Pilot Cocaine Project

In addition to the persons attending the project there were approximately 60 people in contact with the project through the project's outreach services. Also, 90 individuals made calls to the project's dedicated phone lines. On average 20 calls were made to the lines weekly. The calls related for the most part to individuals seeking further information about the project including making arrangements to attend the project evenings as well as individuals wishing to have a chat with a project staff member.

1.8 Findings from Client Interviews

As part of the evaluation of the Tallaght Pilot Cocaine Project seven project participants were interviewed on a one-to-one basis. The interviews captured information relating to:

- The clients' reasons for attending the project;
- The clients' circumstances and drug taking habits prior to attending the project;
- The supports received from the project by the client; and
- The clients' changed circumstances since joining the project;

² It was considered by project staff that the vast majority of clients were at too early a stage of cocaine usage to go into counselling.

Of the seven interviewees, six were male and one was female. The interviewees represented a variety of age groups. Two interviewees were aged between 15 and 19 years, one interviewee was aged between 20 and 24 years, two were aged between 25 and 29 years and the remaining two interviewees were aged between 30 and 34 years.

In terms of their employment status, two interviewees were back in employment after a break that was necessitated as a result of their drug taking, three interviewees were in full-time employment, one was self-employed and just one interviewee was unemployed. Five interviewees were living in purchased or rented accommodation. Two clients were living with family or relatives.

The interviewees were questioned in relation to their reasons for attending the cocaine project. Table 4 lists the reasons presented by the seven interviewees. As Table 4 outlines there were a variety of reasons for clients making the decision to attend the project, including to improve strained family relations, financial and work-related problems, emotional and physiologic issues, problems with the law and the need for somewhere to go to talk to someone.

Table 4: Reason(s) for Attending the Tallaght Cocaine Project

Reason	No of Clients
Physical Health	-
Family	2
Financial	1
Problems at Work	1
Emotional/Psychological	2
Problem with Law	2
Wanted to Stop Drug Usage	1
Needed Someone to Talk to	2
Project dealt specifically with Cocaine	1
Heard about Project through Outreach Worker	2

Source: Goodbody Economic Consultants

The interviewees were asked to describe their drug-taking habit prior to attending the project. The responses are outlined in Table 5. As can be seen from Table 5 the majority of interviewees were poly drug users taking cocaine and other drugs including cannabis, ecstasy, speed and alcohol. Four interviewees started taking cocaine initially at the weekend, two of which subsequently expanded their usage to mid-week. Two interviewees had consistently been taking cocaine on a daily basis. Expenditure on cocaine as reported by the interviewees varied significantly

from €300 to as much as €3,000 weekly³. Four years was the maximum length of time the interviewees had been taking cocaine, although some had been taking other drugs for significantly longer periods of time.

Table 5: Drug-taking Habits prior to attending the Cocaine Project

Frequency of drug-taking	Weekly expenditure €	Drugs consumed	Length of time spent taking cocaine (years)
Weekends	300	Cocaine and hash	1+
Daily basis (to get through work)	400-800	Cocaine	2-3
Initially weekends, then mid-week also	1,200-2,400	Cocaine, Ecstasy and Speed	3-4
Weekends (cocaine) and daily (cannabis)	Varies	Cocaine and Cannabis	3-4
Daily	3,000	Cocaine and Alcohol	-
Weekends (cocaine), nightly (hash)	350	Cocaine and Hash	-
Varies	Varies	Cocaine	2

Source: Goodbody Economic Consultants

When asked about the supports they received from the project, five interviewees referred to acupuncture therapy and its relaxing properties. Two interviewees referred to the opportunity to talk about their concerns and issues to project staff and two clients also referred to Indian Health Massage therapy. Other supports identified by the interviewees included 'knowing the project was just a phone call away' and Reiki.

³ Many cocaine users are recreational drug-users who are in employment and are likely to come from all classes in society including the very wealthy. This explains the significant expenditure on cocaine reported by some interviewees.

Table 6: Supports Received from Cocaine Project

Supports Received	No of Clients
Acupuncture	5
Talking to someone/ One-to-one sessions	2
Indian Head Massage	2
Knowing the project was a phone call away	1
Reiki	1

Source: Goodbody Economic Consultants

The interviewees were questioned in relation to their current situation compared to when they initially attended the project. Four project participants said that they had stopped taking drugs and two participants stated their quality of life had improved significantly. Other responses include improved attendance at work, improved personal relationships, moving out of home and the management of cravings.

Table 7: Current Status of Project Participants

Current Status	No of Clients
Stopped All Drug ⁴ Usage	4
Not suicidal/life going well	2
Improved attendance at work	1
Improved Personal Relationships	1
Moved out of home	1
Managing cravings	1

Source: Goodbody Economic Consultants

Finally, when asked about additional services or changes they would like to see made to the pilot cocaine project, all interviewees were of the opinion that the project fulfilled most of their needs. A number of possible areas of improvement mentioned include the conducting of more group meetings, creating a greater awareness of the project, providing more daytime services and providing more counsellors⁵.

⁴ Not including alcohol.

⁵ The interviewees referred to the project staff who provided the one-to-one sessions as counsellors. These sessions were not counselling sessions.

1.9 Project Learning

A number of areas were identified where lessons were learnt that would inform the future delivery of cocaine related services.

One such lesson included the need to create awareness of the project. The extensive outreach conducted in the initial stages of the project's development was acknowledged as vital in contributing to the success of the project. The project emphasised the importance of effective advertising and putting forward an appropriate image of the proposed service. The second and related area of learning concerned the instability associated with projects of a pilot nature. Owing to its original short-term pilot status, advertising activities were restricted because it was not considered appropriate to advertise a project whose future was uncertain⁶. This hampered the development of the project at the time.

Another area of learning related to the suitability of evening over daytime service delivery. Because many of the project's clients were recreational cocaine users, in full-time employment, providing a service after working hours was found to be appropriate in terms of attracting and retaining users into the service.

The final area of learning identified by the project staff concerned the lack of a single authority figure to spearhead the project. A joint-initiative by nature, there was no one project or person to lead the development of the project. It was considered that the existence of one person with overall responsibility for the project would enhance the project's development.

1.10 Difficulties Encountered

A number of difficulties were encountered by the project staff in the delivery of the pilot cocaine project. These difficulties included:

- Getting the project initially off the ground: Owing to the recreational nature of cocaine-usage among the client group, the clients did not perceive themselves as having a problem until a particular crisis situation emerged. As a result, it was difficult to attract these clients into the service;
- Teasing out the role of each project in the delivery of services: Issues such as co-ordinating staffing roles among the two projects had to be ironed out in the early stages of the project's development;

⁶ The Tallaght project has since been allocated continued funding.

- The destruction of advertising material (i.e. posters) circulated by the project: As a result, increasing resources were necessary to create awareness of the project; and
- The task of manning two (mobile) phones lines: Because phone calls were common outside of normal working hours the dedicated lines were necessary on a full-time daily basis during the week. There were also difficulties experienced in locating dedicated staff willing to work evenings.

1.11 Summary and Conclusions

Structure

The Tallaght cocaine project represented one of the first instances of a sharing of resources among community projects to provide drug-related services in Ireland. While the Tallaght project was successful in the delivery of drug related services to many cocaine users in the area, both St. Dominic's and CARP acknowledged the need for one overall project leader with sole responsibility for driving the project forward in the future.

Both the St. Dominic's and CARP projects had extensive experience in the provision of drug-related services in the Tallaght area prior to the setting up of the pilot project. For this reason, an awareness of the cocaine project as a specific drug project had to be created. An extensive outreach and advertising campaign was necessary to create this awareness. The project highlighted the value of having an outreach worker who was known and accepted within the community to provide a vital link to the client group.

The suitability of the evening over daytime service provision was acknowledged, by project staff, to have contributed to the higher participation rates at project meetings in St. Dominic's compared to the daytime project meetings in CARP. The lower participation levels at CARP were also attributed however, to the perceived stigma associated with methadone maintenance services available at CARP.

In terms of the service provided by the pilot project, a motivational and complementary therapy based approach with treatment very much focused on education, awareness and self-motivation was adopted by the Tallaght project. It was considered that this approach was appropriate given the recreational nature of the client's drug usage and their lack of acknowledgement of having a drug-usage problem. A great deal of importance was attached to the provision of a welcoming and stable atmosphere to encourage return visits.

Effectiveness

One of the aims of the Tallaght project was to establish itself as a cocaine specific project. Owing to its extensive outreach work and an extensive advertising campaign, it is considered that the project was successful in establishing itself as a recognised deliverer of cocaine related services in the Tallaght area.

In terms of service delivery, the aims of the Tallaght project included offering clients a stable and safe environment, placing special emphasis on dealing with the immediate needs of the clients and meeting other needs including holistic therapies, advice around coping strategies and one-to-one counselling. It is considered that the project was successful in meeting both the immediate, and in some incidences, more long term needs of its clients. Based on the data provided, there were two main types of users of the Tallaght cocaine project. The majority share of clients were once off users who found themselves in a crisis or difficult situation and needed help on a once-off basis. The project was availed of as a short-term source of help for this client group. There were also however, a minority of clients for whom, having also found themselves in a problematic situation owing to their cocaine usage, the project became an on-going source of support. These clients availed of ongoing one-to-one sessions, complementary therapies and urinalysis where required.

Efficiency and Value for Money

In total 99 persons presented at the project for treatment over the period February 2005 to May 2006. There were 270 one to one intervention sessions administered by the project with clients over this period. In addition 60 individuals who did not attend the project meetings were in contact with the project through its outreach services, while approximately 90 individuals made contact with the project through its dedicated phone lines. A large proportion of clients presented at the project on a once-off basis when a crisis situation emerged in their lives and a small number of clients used the project as an on-going form of support.

As well as direct service provision, the project provided valuable insights into the success factors associated with attracting this particular type of drug user into service provision. The success factors identified include extensive and appropriate advertising, outreach work as well as the provision of a calm welcoming and relaxing atmosphere.

Considering the modest level of funding involved relative to the services provided and the tight financial monitoring administered by the project management it appears reasonable to conclude that value for money was achieved in terms of the project's expenditure.