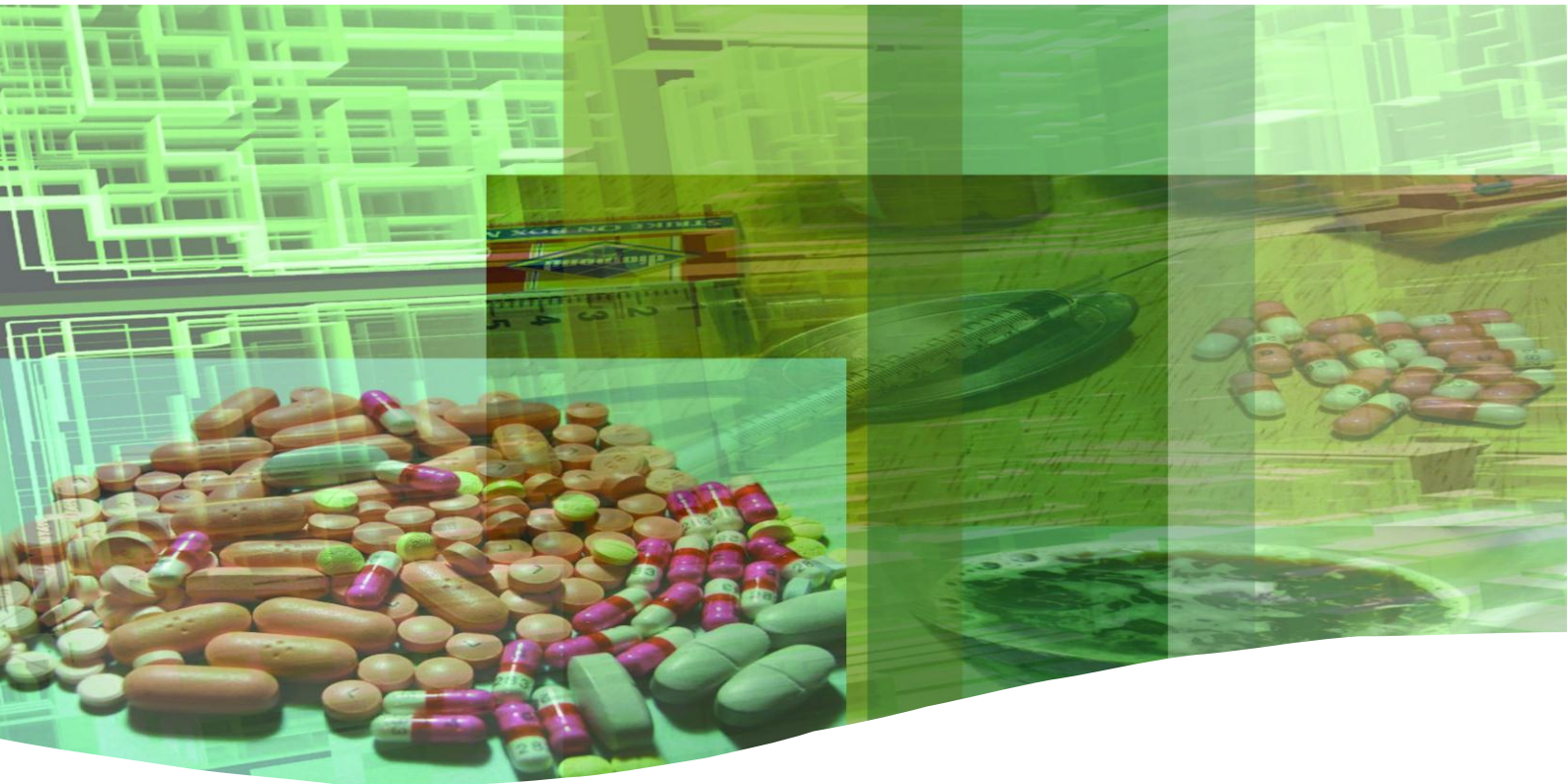




An tSeirbhís Phromhaidh
The Probation Service

DRUG AND ALCOHOL MISUSE AMONG ADULT OFFENDERS ON PROBATION SUPERVISION IN IRELAND

Findings from the Drugs and Alcohol Survey 2011



Probation Service Research Report **May 2012**

Acknowledgements

I would like to express sincere gratitude to the Steering Committee for feedback on the analysis of this report including Aidan Gormley, Gerry McNally, Joan McNamara, Brian Santry and Ursula Ferneé. Thanks also to the probation officers who participated in this study as well as the administrative and information technology staff who contributed to this document.

This report has been prepared by Michelle Martyn, an independent research consultant, undertaking the analysis of the 2011 drug and alcohol misuse research project on behalf of the Probation Service.

Contents

Acknowledgements	2	
Executive Summary	4	
Glossary of Terms	6	
1. Introduction		
Introduction	7	
Structure of Report	7	
2. Methodology		
Survey Design	7	
Limitations of the Study	8	
Data Collection and Analysis	9	
Ethics	9	
Data Storage and Retention	9	
<u>ANALYSIS</u>		
3. Prevalence of Drug and Alcohol Misuse	10	
4. Nature and Frequency of Drug & Alcohol Misuse	18	
5. Link of Alcohol/Drug Misuse to Current Offence	29	
6. Level of Engagement with Drug & Alcohol Treatment Services	40	
7. Discussion	47	
8. Bibliography	51	
<hr/>		
Appendix 1	The Drugs and Alcohol Survey 2011 Questionnaire	55
Appendix 2	The Drugs and Alcohol Survey 2011 Information Sheet	57
Appendix 3	The Drugs and Alcohol Survey 2011 Guidance Notes	59
Appendix 4	Map of Probation Service Regions	61

EXECUTIVE SUMMARY

This report presents the findings from the *Drugs and Alcohol Survey 2011* conducted by the Probation Service. The report and its findings are based on the first large-scale, nationwide survey conducted by the Service in Ireland on drug and alcohol misuse among the adult offender population on probation supervision. The overall report comprises four separate sub-reports which are detailed in section 3.

The survey involved a representative sample of 2,963 adult offenders on Probation Officers' caseloads on the 1st April 2011. A questionnaire was developed specifically for the purpose of the study. The questionnaires were completed by the supervising Probation Officers based on their knowledge of the offenders on their caseloads. The main objectives of the study were as follows:

- Ascertain the number of adult offenders on probation supervision who misused drugs and/or alcohol
- Examine the nature and frequency of drug and alcohol misuse
- Establish if there is a correlation between drug and/or alcohol misuse and offending and offending behaviour
- Identify the level and nature of engagement with drug and alcohol treatment services

The report provides the key findings of the survey. The sub-reports in chapters 3-6 present specific findings in detail. The report concludes with a discussion of issues arising in the study which merit particular attention and consideration in the management of drug and alcohol misuse policy and practice in the Probation Service.

Key Findings

- 89% of the adult offender population on probation supervision had misused drugs or alcohol either 'currently' (at the time of the survey) or in the 'past'.
- Of the 89% of those who misused either alcohol/drugs, 27% misused drugs only, 20% misused alcohol only and 42% misused both drugs and alcohol.
- While females comprised only 12% of the adult offender population both male and female adult offenders exhibit similar drug and alcohol misuse levels.
- The Dublin probation regions exhibited the highest levels of overall misuse among their offender populations at 91%.
- Almost 21% of offenders were currently misusing two or more substances and over 9% were misusing at least 3 substances. This includes misuse of alcohol.
- This study identified a considerable link between drug misuse and the current index offence committed. Based on the Probation Officers' professional judgment, for 74% of drug-misusing offenders on supervision misuse was linked to their current offending.
- In previous research carried out by the Probation Service in the Dublin Metropolitan Area in 1998, 55-60% of offenders were drug abusers. This research highlights that drug misuse is prevalent among more than 75% of offenders on supervision nationwide.

- Almost 36% of offenders in the 35+ age group misused drugs only.
- The majority of current opiate misusers were male and between the ages of 18-34 at 63.8%.
- The majority of misusers of prescribed drugs were also males in the 18-34 age-group at 72.6%. However, notably 10% of the misusers were female in the 25-34 age-group.
- The Dublin regions are proportionally highest for current opiate misuse, current prescription drugs and also current stimulant misuse.
- Alcohol is the individual substance that is most commonly misused by offenders on probation supervision nationally. The misuse of 'alcohol only' is highest in the South West and the West, North West and Westmeath regions.
- 33.5% of offenders identified as alcohol misusers were described as problematic at the time the survey was conducted. 79.7% were described as misusers in the past only. 27.1% were described as problematic misusers both currently and in the past.
- 71% of alcohol-misusing offenders had their misuse linked to the current offence committed.
- Drug-misuse linked to the offence is more pronounced in the younger age categories in this survey. Each of the age categories 18-24, 25-34 and 35-44 have in excess of 70% link to offending while the 45-54 and 55-64 age groups have a 50% or less link to offending.
- The majority of drug-related offences were either for Drug Offences (31.8%) or acquisitive crimes such as Theft (32.8%).
- The majority of alcohol related offences were crimes against the person and public order offences at almost 40%.
- 41.7% of the total drug-misusing population was currently engaged in drug treatment services.
- Half of the offenders within this survey had undergone drug treatment, in its various forms, in the past.
- 72% of drug misusers were on methadone maintenance programmes

GLOSSARY OF TERMS

Abstinence: professional judgment by the probation officer that the offender is not engaged in any drug/alcohol misuse and has not done so for a period of three months or longer.

EMCDDA: European Monitoring Centre for Drugs and Drug Addiction.

Frequency: refers to the usage of alcohol or drugs (e.g. weekly/monthly/occasional/previous).

Misuse: Drug misuse is drug taking which causes harm to the individual, their significant others or the wider community. It includes illegal or illicit drug taking or alcohol consumption which leads a person to experience social, psychological, physical or legal problems related to intoxication or regular excessive consumption and/or dependence.

NACD: National Advisory Committee on Drugs.

Current: refers to the last 12 months or part of.

Past: refers to beyond the last 12 months.

Post Release Supervision: Under the Sex Offender Act 2001, Judges can sentence sex offenders to a period of probation supervision following their release from prison. Such offenders are monitored closely. During supervision, the Probation Officer focuses on the offence committed and its implications for public safety, helping the offender to see past offending behaviour as a problem, identify risk factors and develop strategies and supports to ensure there is no repeat offending.

Prevalence: refers to the proportion of the offender population who misused drugs/alcohol.

Probation Orders: Probation orders are one of a range of options open to the courts when sentencing individuals found guilty of criminal behaviour. Offenders give an undertaking to the court that they will be of good behaviour; avoid further crime; adhere to the conditions of the order and to follow the directions of a supervising probation officer who will monitor and help them stay out of further trouble.

Relapse: this is not a 'lapse' but a relapse which relates to regular use of drugs/alcohol and related impaired functioning.

Supervision during deferment of Penalty: Supervision during deferment of penalty is a judicial practice whereby the court does not proceed to determine the appropriate penalty but instead postpones the decision to a further date, on condition that the offender complies with the supervision of a Probation Officer and avoids reoffending.

Supervised Temporary Release: the Probation Service supervises some prisoners on temporary release from custody (as provided for in the Criminal Justice Act, 1960 and the Temporary Release Act, 2003) in the community with specific conditions aimed at helping with their reintegration in the community and to avoid further offending. Life sentenced prisoners on release in the community are obliged to co-operate and comply with Probation Service supervision as a condition of temporary release. Such prisoners, in the normal course remain subject to supervision for the remainder of their lives.

Stabilisation: professional judgment by the Probation Officer that the offender has been functioning adequately with the support of identified medical treatment/s for a period of three months or longer which may include occasional lapses.

1. INTRODUCTION

This report presents the main findings from the first large-scale, nationwide representative survey by the Probation Service on drug and alcohol misuse among the offender population under supervision. The *Drugs and Alcohol Survey 2011* encompassed 2,963 adult offenders on the basis of probation officer's caseloads as of the 1st April 2011. The main objectives of the study were as follows:

- ascertain the number of adult offenders on probation supervision who misused drugs and/or alcohol;
- examine the nature and frequency of drug and alcohol misuse;
- establish if there is a correlation between drug misuse and offending and alcohol misuse and offending
- identify the level and nature of engagement with drug and alcohol treatment services;

The data obtained from the research will be used by the Probation Service to inform service delivery including management of resources and identification of further areas for follow-up research. In a broader context, the research is aimed to inform and contribute to liaison other relevant agencies in relation to drug and alcohol misuse. Furthermore, it is anticipated that the study will contribute to Action 4 of *The National Drugs Strategy 2009-2016* which relates to the collation of data on the progression of offenders with drug-related offences through the criminal justice system.

Structure of Report

Chapter three examines the prevalence of drug and alcohol misuse among the adult offender population on probation supervision. Chapter four specifically focuses on the nature and frequency of drug and alcohol misuse. Chapter five explores the link between drugs and offending behaviour and alcohol and offending behaviour. Chapter six identifies the level and nature of engagement with drug and alcohol treatment services. The final section of the report will discuss issues and factors arising in the study which merit particular attention and consideration in the management of drug and alcohol misuse policy and practice by the Probation Service.

2. METHODOLOGY

Survey Design

In order to achieve a representative sample, Probation Officers completed the survey on the basis of existing knowledge of the offender or based on information contained on the offender's file. This type of research is crucial to informing policies and practices on behalf of the organisation; where professional judgments of Probation Officers are highly regarded. While, self-reported surveys are the most common approach to estimating levels of drug/alcohol misuse among offenders, this method can have limitations. Self-reporting offending surveys carry low response rates and offenders, particularly, on probation supervision may not disclose their behaviour or at least the extent of their behaviour in case it would result in any negative outcomes.

Three documents were provided to regional managers prior to undertaking the study. These were an information sheet, guidance notes and the survey questionnaire. The information sheet explained the context, aims, submission of returns and outcomes of the study. Guidance notes were issued to Probation Officers in order to provide clarifications on definitional issues. Each Probation Officer was asked to read the guidance notes prior to completion of the questionnaire.

The questionnaire was divided into five sections. The first section focused on the background details of the offender and if the offender had ever misused drugs and/or alcohol. Section two dealt with

the details of drug and alcohol misuse and the frequency of misuse both currently (weekly, monthly and occasionally) and in the past. Section three and four examined the level and nature of engagement with drug and alcohol treatment services. Section five investigated the link of alcohol and drug misuse to the current offence committed. Section six of the questionnaire permitted Probation Officers to make any relevant comments regarding any aspect related to the study. Offenders from the following categories were included as part of the study, those on:

- Probation Orders
- All forms of Deferred Supervision
- Suspended Sentence Supervision Orders
- Post Release Supervision Orders
- Supervised Temporary Release
- Supervision of Life Sentence Prisoners

The survey excluded offenders in custody, on community service, referred for assessment reports or those under 18 years of age.

These three documents were circulated to senior Probation Officers who forwarded the documents to each member of their team. All of these documents were sent two weeks in advance in order to allow sufficient time for Probation Officers to read the material and clarify any issues prior to completion of the survey questionnaire.

Limitations of the Study

The data from this survey is based on the case records and the Probation Officers' expert knowledge. A limitation is that self-reporting or interviews with offenders were not used as part of this study. These methods may have enhanced the validity and reliability of the findings of the study. However, self-reporting studies among offenders in the community tend to result in low participation rates and offenders on probation supervision may not disclose their behaviours in case it would result in negative outcomes.

There were limitations specific to chapter four on the nature and frequency of drug and alcohol misuse regarding current alcohol-drug misusing status. Comments made by Probation Officers at the end of the survey indicated that there was uncertainty with some client's current alcohol/drug-misusing status for a variety of reasons, for example, some clients were new referrals or recently transferred. Other Probation Officers felt that they had no proof to confirm current alcohol/drug-using status as there was no urinalysis and so the probation officer indicated that they were unable to fully ascertain the offender's misuse. Typically, Probation Officers used factual evidence such as knowledge based on the client's own prior admissions of drug/alcohol misuse.

The advantage of using a survey was that it captured a large representative cohort of adult offenders on probation officer's caseloads. Representativeness is essential in order for the study to make general conclusions about drug and alcohol misuse patterns among the adult offender population on probation supervision.

It must be acknowledged that there are methodological caveats to the current study. Results of the study can only be viewed as estimations of drug and alcohol misuse patterns among the adult offender population on probation. Nonetheless, the study does add significantly to the previously limited knowledge base. It is anticipated that this study will instigate further and more rigorous research to be carried out on drug and alcohol misuse among the offender population on probation supervision in the future.

Data Collection and Analysis

Of the questionnaires completed by Probation Officers, there were 2,963 (96.7%) valid returns. Subsequently, all of the data was coded by the Probation Service for analysis. Data was collated on the caseload at 7am on 1st April 2011. The Case Tracking System¹ database was employed by the Probation Service to supply population data regarding age, gender and location. The data was analysed using SAS software. Care and attention was taken in coding the data. However it must be acknowledged that the large volume of data collected is subject to errors which can be expected when deploying any large-scale recording system.

Ethics

All of the data presented in this report has been anonymised. A password was required to gain access to the electronic data to which only the author and the Probation Service statistician had access to. Hard copies of the surveys were stored securely.

Data Storage and Retention

The data used in this study will be retained for no more than two years for the purposes of any research queries. Subsequently the data will be destroyed in the safest manner by the Probation Service.

¹ The Case Tracking System is a database that holds all offender management information for The Probation Service.

3. THE PREVALENCE OF DRUG/ALCOHOL MISUSE AMONG THE ADULT OFFENDER POPULATION ON PROBATION SUPERVISION IN IRELAND

Introduction

This chapter examines the prevalence of drug and alcohol misuse among the adult offender population on probation supervision in Ireland. Prevalence refers to the proportion of the adult offender population who misused drugs and/or alcohol.

Aims

Based on the data obtained, this chapter will:

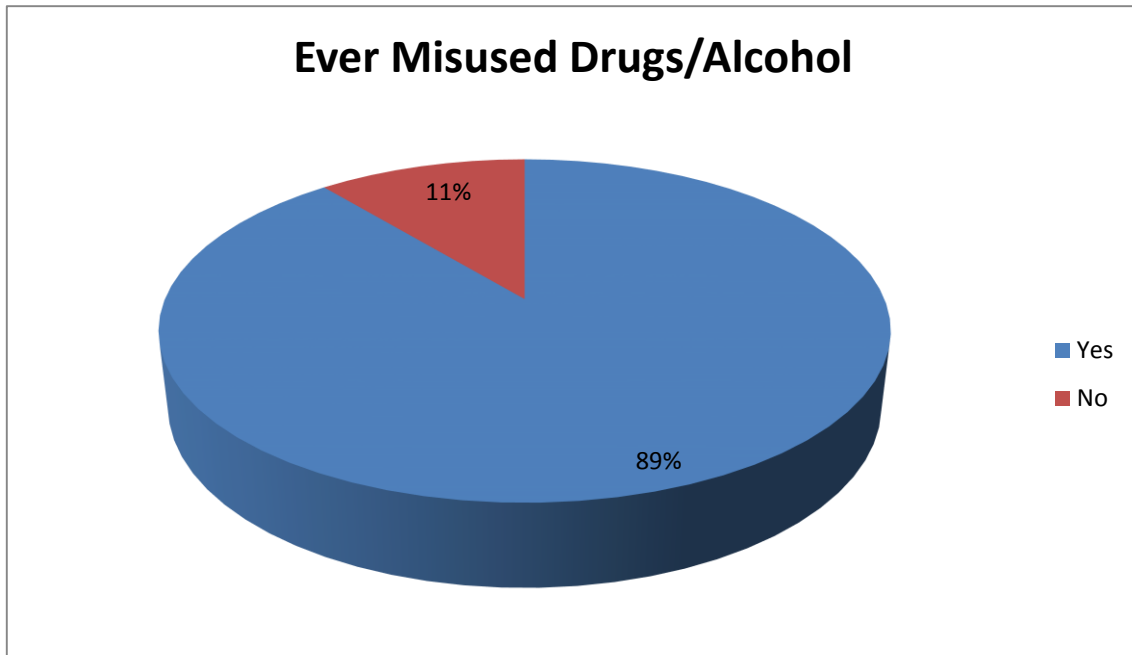
- estimate the level of drug and alcohol misuse among the adult offender population on probation supervision
- identify drug and alcohol misuse trends by age, gender and probation region

Summary of Key Findings

- Findings from this initial report indicate that drug and/or alcohol misuse levels were high among the adult offender population on probation supervision at 89%.
- 42.3% of the survey population misused drugs and alcohol. 26.5% misused drugs only. 20.2% had one misuse - alcohol only. 11% had no history of drug or alcohol misuse.
- Drug and alcohol misuse levels among females were almost on a par (85.8%) with the male adult offender population at 89.4%.
- The proportion of male offenders who misused drugs and alcohol was highest at 41.5% in the 18-24 age category. This contrasts with female offenders whose drug and alcohol misuse peaked in the 25-34 age category at 39.3%.
- 35.9% of offenders in the 35+ age group misused drugs only. This figure demonstrates the longevity of endemic drug misuse in Ireland and reflects the impact of wider societal change.
- Levels of combined drug and alcohol misuse were particularly high among the adult offender population in Dublin South and Wicklow at 91.2% and Dublin North and North East at 91.1%.
- The Dublin South and Wicklow probation region had a significant level of 'drug misuse only' among their adult offender population at 34.1%, followed by Dublin North and North East at 27.2%.
- 'Alcohol misuse only' was highest among the adult offender populations in the South West region at 27.9% followed by the West, North West and Westmeath region at 27.7%.

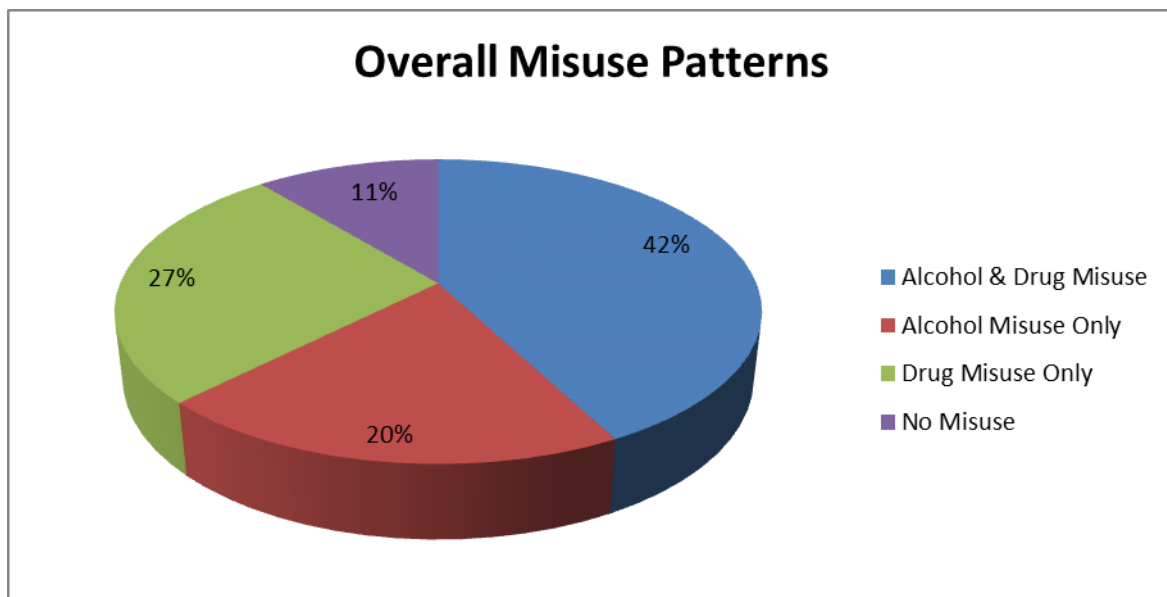
Analysis

Figure 3.1 Ever Misused Drugs/Alcohol



The prevalence of drug and/or alcohol misuse in this study was high at 89%. As this is the first study by the Probation Service that includes alcohol in the analysis, there is no comparable figure. There is an essential need for consistent and rigorous research so drug and alcohol misuse trends among the adult offender population on probation supervision can be accurately evaluated over time.

Figure 3.2 Overall Misuse Patterns



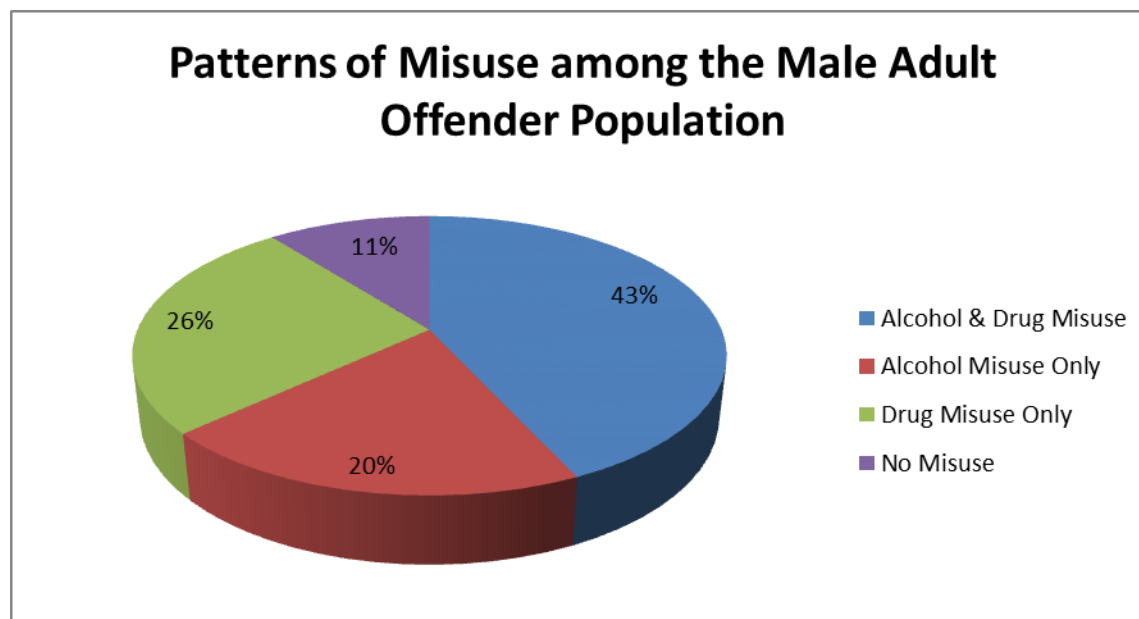
In total, 69% of adult offenders on probation supervision had misused drugs (combining alcohol and drug misuse and drug misuse only). In the last study carried out by the Probation Service 55-60% of offenders who engaged with the Service in the Dublin Metropolitan Area had misused drugs (Geiran, 1999). However as the studies are not directly comparable there is no real figure to compare overall misuse patterns in this study. Inferences can be made that drug misuse is substantially higher for the adult offender population on probation supervision compared to that of the general population in Ireland where only 27% were estimated to have used drugs in their lifetime (NACD, 2011). 62% of the survey population misused alcohol and no misuse was reported by Probation Officers in 11% of cases.

Figure 3.3 Prevalence of Drug/Alcohol Misuse by Gender

Gender	Misusers	Total	%
Males	2304	2576	89.4%
Females	332	387	85.8%

88% of the adult offender population on probation supervision were male and 12% were female. These figures are similar to the United Kingdom where 89% of offenders were male and 11% were female under probation supervision in 2009 (Ministry of Justice, 2010). Both genders had comparable levels of drug and/or alcohol misuse.

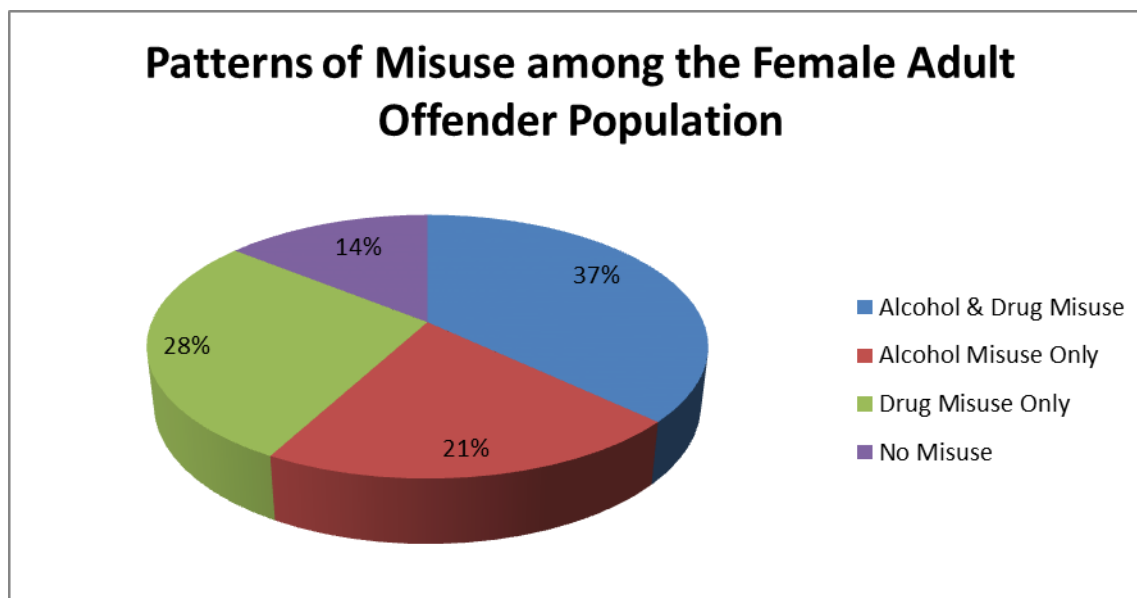
Figure 3.4 Patterns of Misuse among the Male Offender Population



In the current study, rates for alcohol misuse among males were high at 63% (combining ‘alcohol and drug misuse’ and ‘alcohol misuse only’). Though varying in definition and methodology, a similar pattern was found in Scotland by Newbury-Birch et al., (2009) where 69% of males on probation supervision in Scotland were identified as having an alcohol-use disorder.

Overall drug misuse for males in this study was 69%. There is no comparable figure for this statistic, however based on self-reporting in the U.K, The *Community Penalties Criminality Survey 2002* estimated that 63% of males on community sentences consumed drugs (Budd et al., 2001).

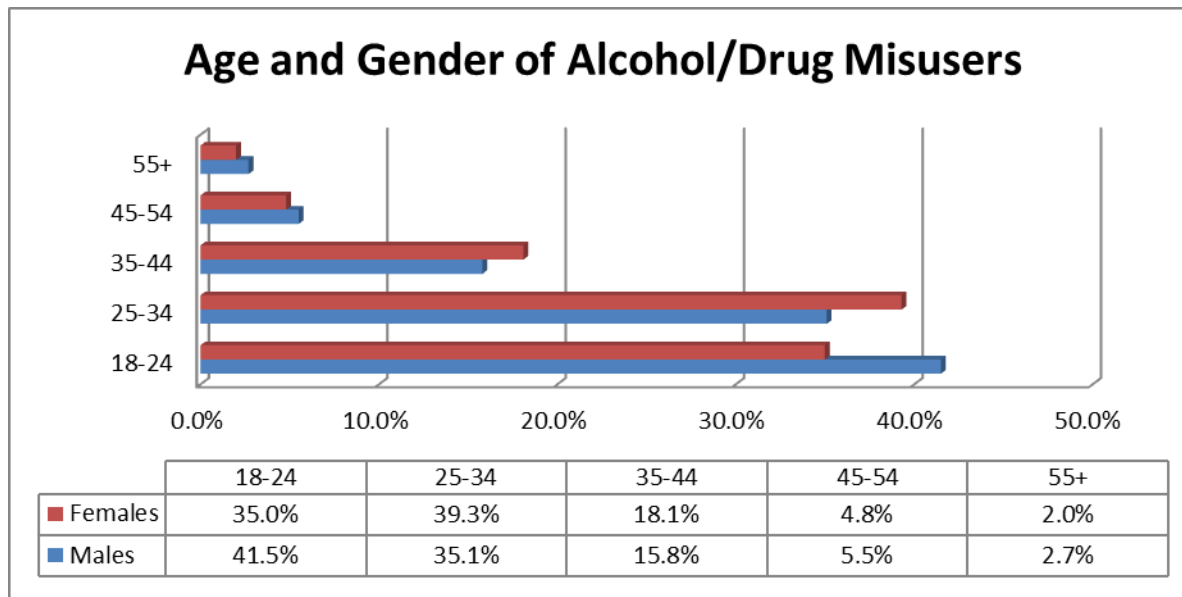
Figure 3.5 Patterns of Misuse among the Female Offender Population



58% of female adult offenders in this study misused alcohol. Again while there is no comparable figure and the study varies in its methodology, 53% of women were categorised as having an alcohol use disorder on probation in Scotland (Newbury-Birch et al., 2009).

65% of the female adult offender population misused drugs. The *Community Penalties Criminality Survey 2002* in the United Kingdom estimated that 50% of females on community sentences consumed drugs (Budd et al., 2005).

Figure 3.6 Age and Gender of Alcohol/Drug Misusers



Age is a crucial determinant of attitudes and behaviours and one of the most important indicators of personal identity (O'Mahony, 1997:29). The analysis of this study indicates that the highest numbers of drug and/or alcohol misusers were in the younger age categories for males and females. Female misuse of drugs and/or alcohol peaked later than males at 39.3% in the 25-34 age category. There are various reasons why female drug and/or alcohol misuse peaks later than for males for example, the *ROSIE* study (2008) highlights that women tend to start using alcohol and other drugs at a later age than men because their boyfriend or partner initiates use. Using a cohort of Irish female

prisoners, Comiskey et al., (2006) found that the most common reason for drug initiation was; friends were using, problems at home, problems at school and being a victim of crime.

Figure 3.7: Combined Drug & Alcohol Misuse by Age

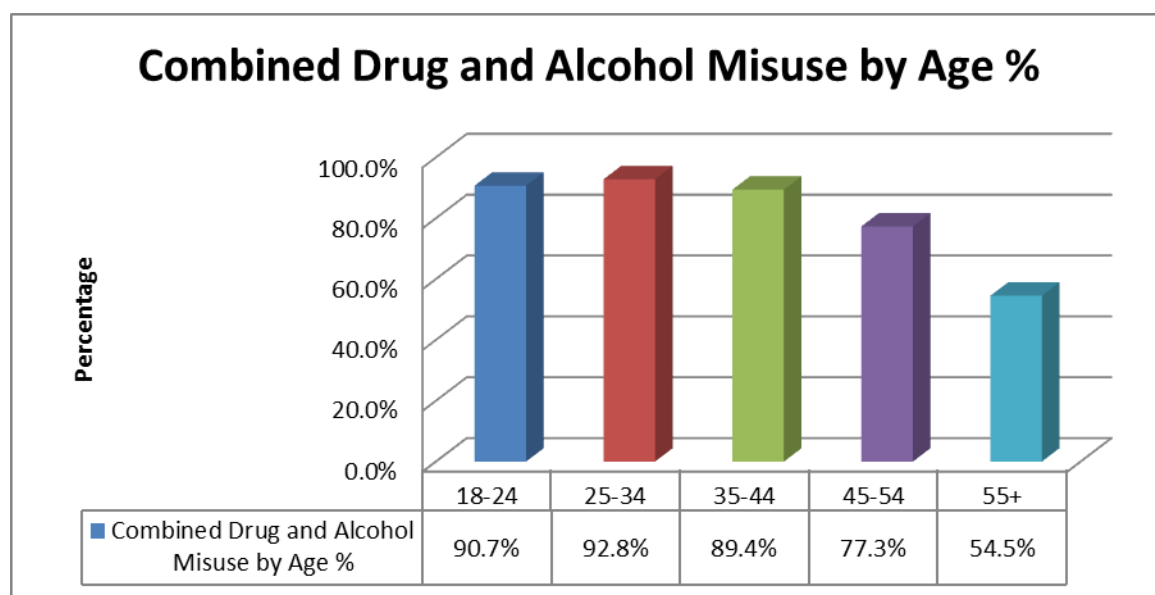


Figure 3.7 displays the combined levels of drug and alcohol misuse by the adult offenders on probation supervision. The highest percentages were in the younger adult categories, in particular, the 18-24 (90.7%) and 25-34 (92.8%) category. Misuse levels declined in the older age categories coinciding with a decrease in the number of offenders in these age categories.

Figure 3.8: 'Drug Misuse Only' by Age

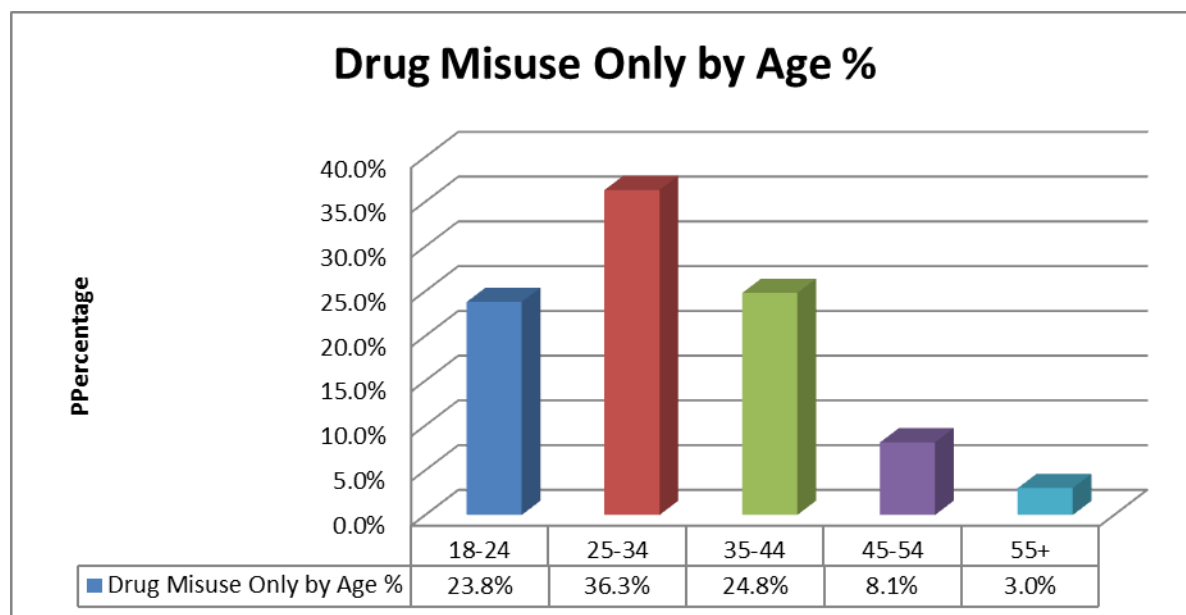


Figure 3.8 highlights the number of offenders who were misusing 'drugs only' by each age category. The analysis indicates that offenders in the younger age group had higher levels of drug misuse with 36.3% in the 25-34 age category. Drug misuse declined in the older age categories. The relationship between declining age and declining drug use was also found among arrestees in the United Kingdom (Bennett & Holloway, 2004).

Nonetheless, 35.7% of drug misusers were over 35 years of age which suggests that the profile of offenders misusing drugs has become significantly older. As described by Mullally (2011) drug treatment centres are currently faced with a third generation of misusers in Ireland.

Figure 3.9: 'Alcohol Misuse Only' by Age

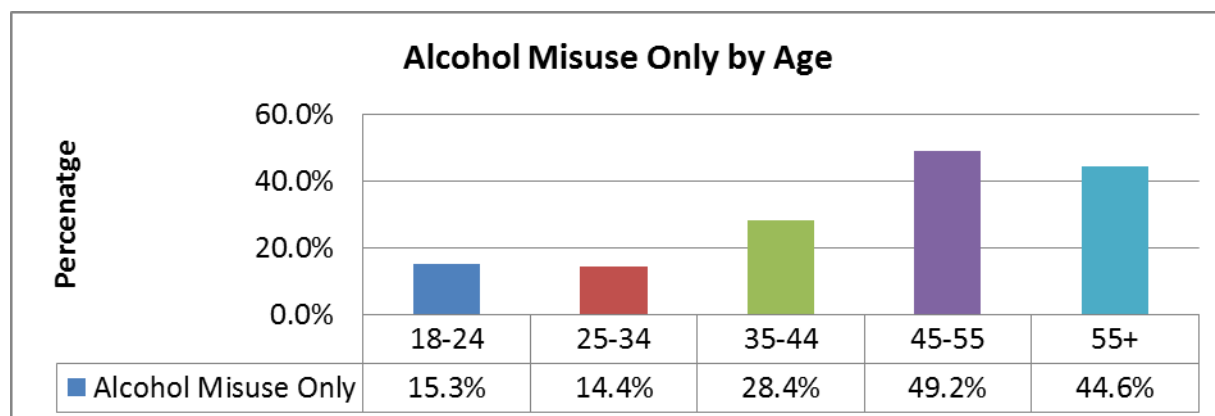


Figure 3.9 illustrates the number of adult offenders who misused alcohol only in each age category. 'Alcohol misuse only' was highest among the older adult offender population peaking in the 45-54 age category at 49.2% which indicates that alcohol misuse solely is a significant problem for older offenders on probation supervision.

Figure 3.10 Drug and Alcohol Misuse by Region

Drug & Alcohol Misuse by Region

Region	Alcohol and Drug Misuse	Total No. of offenders	%
Dublin North and North East	707	776	91.1%
Dublin South and Wicklow	642	704	91.2%
Midlands and South East	471	538	87.5%
South West	470	544	86.4%
West, North West & Westmeath	346	401	86.3%
Total	2636	2963	89.0%

Figure 3.10 highlights the combined levels of 'drug and alcohol misuse' across all probation regions². Dublin South and Wicklow had high levels of drug and alcohol misuse at 91.2% followed by Dublin North and North East at 91.1%.

² In order to adjust for regional variation in the offender population size, the actual proportion of drugs/alcohol misuse in each region was calculated.

Figure 3.11 'Drug Misuse Only' by Region

Region	Drug Misuse Only	Total No. of Offenders	%
Dublin North and North East	211	776	27.2%
Dublin South and Wicklow	240	704	34.1%
Midlands and South East	129	538	24.0%
South West	104	544	19.1%
West, North West & Westmeath	100	401	24.9%
Total	784	2963	26.5%

A high level of 'drug misuse only' occurred in the Dublin South and Wicklow region at 34.1% followed closely by the Dublin North and North East probation region at 27.2%. The main problem drug in Dublin North East and Dublin Mid-Leinster regions was opiates (Reynolds et al., 2008). Dublin's history of drug misuse, particularly the opiate epidemic during the 1980s is well-known. As highlighted by O'Mahony's (1997) study, most prisoners were characterised as being from local authority housing complexes and estates in inner-city Dublin associated with a multitude of problems including social disadvantage and high levels of drug use.

Figure 3.12 Alcohol Misuse Only by Region

Region	Alcohol Misuse Only	Total No. of Offenders	%
Dublin North and North East	126	776	16.2%
Dublin South and Wicklow	105	704	14.9%
Midlands and South East	105	538	19.5%
South West	152	544	27.9%
West, North West & Westmeath	111	401	27.7%
Total	599	2963	20.2%

27.9% of offenders from the South West misused 'alcohol only'. New cases of problem alcohol use were proportionally highest in the HSE South region over the five year period 2005-2010 (Carew et al., 2011) further indicates a problem with alcohol in this region. The West, North West and Westmeath region followed with 27.7% of adult offenders misusing alcohol only in this region.

Conclusions

The analysis provides critical information on drug and alcohol misuse among adult offenders supervised by the Probation Service:

- Based on Probation Officers' caseloads, 89% of adult offenders on probation supervision had misused drugs and/or alcohol. The lack of research on drug and alcohol misuse among the adult offender population on probation supervision means there is no comparative figure.
- On the basis of previous research undertaken by the Probation Service, drug abuse among offenders on supervision in the Dublin Metropolitan Area was 55-60%. In this study 69% of those on supervision nationwide in 2011 had misused drugs.
- Combined 'alcohol and drug misuse' was significant among the adult offender population on probation supervision at 42.3%.
- There were about ten times more males on probation supervision than females. Both populations exhibit similar levels of drug and alcohol misuse.
- Drug and alcohol misuse among males peaked at 41.5% in the 18-24 age category. For females, the peak was at 39.3% in the 25-34 age group.
- 35.9% of offenders in the 35+ age group misused 'drugs only'. This figure is evidence for the longevity of endemic drug misuse in Ireland and its presence in wider social, community and familial change.
- Dublin South and Wicklow (91.2%) and the Dublin North and North East (91.1%) probation regions had particularly high levels of 'drug and alcohol misuse' among their adult offender populations.
- Dublin South and Wicklow had the highest levels of 'drug misuse only' among the adult offender population at 34.1%.
- 'Alcohol misuse only' was highest among the adult offender populations in the South West (27.9%) and West, North West and Westmeath (27.7%).

These findings provide important data on drug and alcohol misuse among the adult offender population on supervision. The analysis demonstrates the importance of drug and alcohol misuse as a key criminogenic risk factor and target for intervention. The necessity of undertaking continued consistent and rigorous research on drug and alcohol misuse among offenders on probation supervision to track changes over time is proposed.

4. THE NATURE AND FREQUENCY OF DRUG AND ALCOHOL MISUSE AMONG THE ADULT OFFENDER POPULATION ON PROBATION SUPERVISION

Introduction

The previous chapter identified that the prevalence of drug and/or alcohol misuse among the adult offender population was high at 89%. This chapter proceeds to examine the nature and frequency of drug and alcohol misuse among the adult offender population on probation supervision.

Aims

Based on the data obtained, this chapter will:

- Examine the nature and frequency of drug and alcohol misuse among the adult offender population on probation supervision.
- Identify levels of 'current' (at the time of survey) multiple drug misuse (alcohol inclusive) among the adult offender population on probation supervision.

Summary of Key Findings

- Alcohol was the most common substance misused by the adult offender population on probation supervision both 'currently' and in the 'past'. Over two-thirds of the current alcohol misusers were male and between the ages of 18-34.
- 90.7% of 'current' cannabis misusers were male and between the ages of 18-44.
- 75.5% of 'current' opiate misusers were male and between the ages of 18-44.
- Despite comprising a very small sample size of the adult offender population on probation supervision (12%), 22.2% of 'current' opiate misusers were female offenders.
- Despite comprising a very small sample size of the adult offender population on probation supervision, 16% of 'current' prescribed drug misusers were female offenders.
- 72.6% of 'current' prescribed drug misusers were between the ages of 18-34.
- Adult male offenders on probation supervision were more likely than adult female offenders to have misused alcohol, cannabis, stimulants and miscellaneous substances.
- The South West region had the highest percentage of 'current' alcohol misuse among their offender population.
- Dublin North and North East and Dublin South and Wicklow had the highest levels of 'current' opiate misuse.
- Cannabis misuse was highest among the adult offender populations in Dublin North and North East and Dublin South and Wicklow probation regions.
- Misused prescribed drugs were high among the adult offender populations in the Dublin North and North East and Dublin South and Wicklow probation regions.
- 20.8% of offenders in the survey were currently using two or more drugs (alcohol inclusive).

Methodological Limitations

It is important to note the limitations specific to this chapter. 'Current' misuse levels (i.e. weekly, monthly and occasional) are more than likely an under-estimation of misuse among the adult offender population. Comments made by Probation Officers at the end of the survey indicated that there was some uncertainty with client's alcohol/drug-misusing status for a variety of reasons, for example, some clients were new referrals or recent referrals.

Probation Officers also felt that, in some instances, they had insufficient up-to date information regarding the clients' current alcohol/drug-misusing status. Other Probation Officers felt that they had no proof to confirm current alcohol/drug-misusing status. Officers, for example, preferred in some cases factual evidence such as knowledge based on the client's own admissions of drug/alcohol misuse rather than relying on their own assessment. It should also be noted that, in certain categories, data numbers were small and therefore not used in the analysis to avoid compromising anonymity.

Analysis

The frequency analysis composed of weekly, monthly, occasional and previous misuse of specific drugs and alcohol. Frequent use of the most harmful substances can be indicative of problematic drug use (Budd et al., 2005:18). Therefore, by examining the frequency, the report illustrates how drug and alcohol misuse are significant criminogenic risk factors.

Table 4.1: Current and Past Drug/Alcohol Misuse

Frequency of Drugs (n=2963)	Current (Weekly/Monthly/Occasional)	%	Previous	%
Alcohol	1078	36.4%	1113	37.6%
Cannabis	645	21.8%	937	31.6%
Opiates	265	8.9%	766	25.9%
Stimulants	190	6.4%	1002	33.8%
Misused Prescribed Drugs	219	7.4%	568	19.2%
Miscellaneous ³	55	1.9%	256	8.6%

Alcohol was identified as the most common substance misused on a current⁴ (36.4%) and previous (37.6%) basis by adult offenders on probation supervision. There are no statistics to compare this figure with, however, in Scotland, Stanbury (2009) found that 43% of offenders had current problem alcohol use, while 53% of these offenders had problem alcohol use in the past. According to Newbury-Birch et al., (2009) the prevalence of individuals with an alcohol use disorder in the criminal justice system in the United Kingdom is three times greater than the general population. Therefore, interventions for alcohol misuse are required and should be targeted towards offenders on probation supervision.

Furthermore, during the period of 2005-2010, alcohol was identified as the main problem substance in Ireland, accounting for more than half of all cases treated for problem substance use (Carew et al., 2011). The finding highlights the necessity to consistently include alcohol use for analysis and evaluation with illicit drug use:

“Failure to include alcohol data in reporting systems leads to an underestimation of problem substance use.” (Long et al., 2004:5)

Cannabis was the most common illicit drug misused among the adult offender population on probation supervision. This finding reflects similar trends to the offender population in the United Kingdom (Budd et al., 2005) where cannabis is the most illicit drug used.

³ Miscellaneous includes steroids, hallucinogens, headshop products and other substances.

⁴ 'Current' takes into account weekly, monthly and occasional misuse.

8.9% of the total survey population was currently misusing opiates. 25.9% misused opiates in the past. Misuse of heroin (the main opiate) is much lower among the general population where the lifetime prevalence rate is 0.8% (NACD, 2011). Hence, it is evident that offenders in the criminal justice system should be a targeted cohort for intervention with such a large proportion misusing in comparison to that of the general population. The most recent study carried out by the *EMCDDA* (2011) indicates that heroin abuse in Ireland is highest out of 17 European nations. However, a weakness of the *EMCDDA* study was that all the surveys completed in the European Union were not standardised and the data on prevalence in Ireland is only as recent as the year 2006.

Nonetheless, there are other indications which suggest higher levels of opiate misuse in Ireland. According to Bellerose et al., (2011) the proportion of new opiate cases was higher in Ireland (42%) compared to Europe (31%). Hence offenders are a target group to intervene and address opiate misuse in Ireland.

Misuse levels for stimulants such as cocaine and ecstasy in the past were high among the adult offender population at 33.8%. Data from this study suggest that the proportion of offenders misusing these drugs has declined substantially at 6.4%. This may be partially attributed to changing drug fashion trends for example, ecstasy was seized for the first time in Ireland in 1991 and by the year 1995, there was over 180,000 tablets seized (Gordon, 1995). This compares to just 389 tablets seized in 2010 (Annual Garda Report, 2010). During the 1990s, ecstasy was linked to the rave dance culture that has largely diminished in Irish society. Results from the NACD (2011) indicates a massive drop in cocaine use for example, the number of 25-34 year olds who reported using cocaine in the past year was 2.5%, one third lower than consumption levels four years previously.

7.4% of the adult offender population had misused prescribed drugs currently and past levels were higher at 19.1%. The illicit use of benzodiazepines in particular by offender populations has been a cause for concern in Scotland and elsewhere in recent years (MacGregor, Forsyth et al., 2011).

Table 4.2: Previous Drug Misuse by Gender

Previous Drug Misuse	Males (2576)		Females (387)	
		%		%
Alcohol	985	38.2%	128	33.1%
Cannabis	845	32.8%	92	23.8%
Opiates	634	24.6%	132	34.1%
Stimulants	902	35.0%	100	25.8%
Misused Prescribed Drugs	489	19%	79	20.4%
Miscellaneous	237	9.2%	19	4.9%

Over a third of adult males (38.2%) and a third of adult females (33.1%) on probation supervision in the survey misused alcohol in the past.

32.8% of the male adult offender population misused cannabis. This was higher than among the female adult offender population at 23.8%. This result reflects wider international findings where the *EMCDDA* (2005) found that males outnumber females using cannabis.

Proportionately, female adult offenders (34.1%) had higher levels of opiate misuse in the past than males (24.6%). This finding is substantiated in the wider literature (Bennett, 2000). Among the female adult offender population, there were slightly higher levels of misused prescribed drugs at 20.4% compared to the male adult offender population at 19%.

Contrastingly, males (35%) were more likely than females (25.8%) to have previous misuse of stimulants. Adult male offenders were also more likely to have previous misuse of miscellaneous substances at 9.2% than adult female offenders at 4.9%.

Table 4.3: Weekly Drug Misuse by Gender

Weekly Drug Misuse	Males (2576)		Females (387)	
		%		%
Alcohol	476	18.5%	48	12.4%
Cannabis	372	14.4%	31	8.0%
Opiates	108	4.2%	35	9.0%
Stimulants	70	2.7%	10	2.6%
Misused Prescribed Drugs	116	4.5%	33	8.5%

Table 4.3 displays a gender breakdown of the frequency of drugs and alcohol misused on a weekly basis by adult offenders on probation supervision in Ireland. Alcohol was the most common drug misused by the adult offender population for males (18.5%) and females (12.4%). Cannabis was identified as the most frequent illicit drug misused by adult males at 14.4%.

Despite the number of males misusing opiates in the survey being higher (as offenders in the sample were predominantly male), proportionately, misuse of opiates by the adult female offender population (9%) exceeded that of the male adult offender population (4.2%), consistent with international research (Adams et al., 2008; Bennett & Holloway, 2007). Previous findings by Comiskey et al., (2006) established that the most common drug used by Irish female prisoners was heroin.

Levels of misused prescribed drugs were also particularly high among the female adult offender population with 8.5% misusing on a weekly basis. This was almost double the proportion of the male adult offender population at 4.5%. In a study on treated problem drug use among the general population in Ireland, females accounted for 40% of cases with benzodiazepines as the main problem drug (Bellerose et al., 2010). Drugs were prescribed to women with young children living in socially disadvantaged areas as a coping mechanism (Ballymun Youth Action Project, 2004). These findings highlight the need for specialised drug service provision for female offenders.

Table 4.4: Monthly Drug Misuse by Gender

Monthly Drug Misuse	Males (2576)		Females (387)	
		%		%
Alcohol		3.8%		5.2%
Opiates		0.8%		1.0%

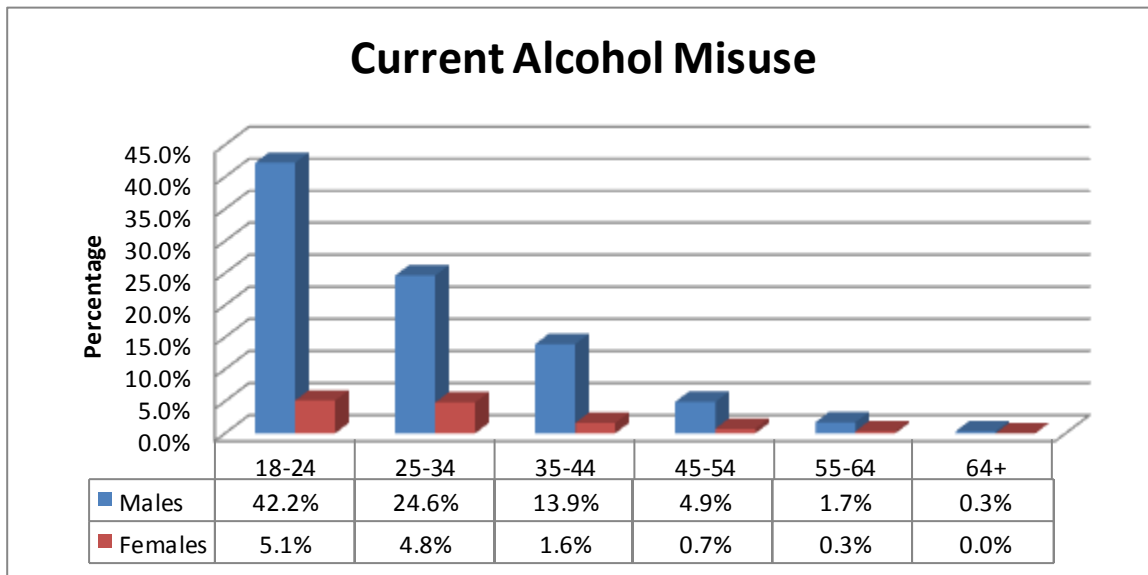
Similar patterns emerged with regard to monthly drug and alcohol misuse among the adult offender population. Alcohol misuse was highest for both males (3.8%) and females (5.2%) followed by cannabis misuse for the male adult offender population (1.2%) and opiate misuse for female adult offenders at 1%.

Table 4.5: Occasional Drug Misuse by Gender

Occasional Drug Misuse	Males (2576)		Females (387)	
		%		%
Alcohol	374	14.5%	67	17.3%
Cannabis	192	7.5%	21	5.4%
Opiates	91	3.5%	25	6.5%
Misused Prescribed Drugs	87	3.4%	13	3.4%

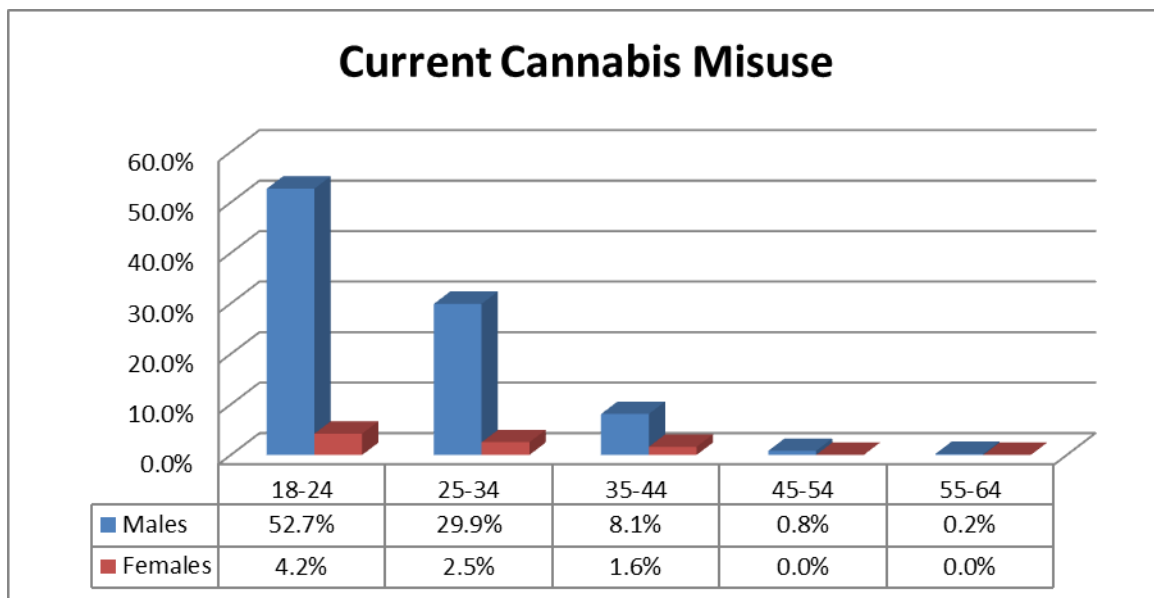
For the adult male offender population, alcohol was the substance most commonly misused on an occasional basis (14.5%) followed by cannabis (7.5%), stimulants (3.7%) and opiates (3.5%). Female occasional misuse was highest for alcohol (17.3%) followed by opiates (6.5%) cannabis (5.4%), and misused prescribed drugs (3.4%). It must be noted that monthly and occasional misuse of alcohol among the adult female offender population was proportionally higher than that of the male adult offender population. The following tables examine the profiles of current alcohol and drug misusers.

Table 4.6: Current Alcohol Misuse



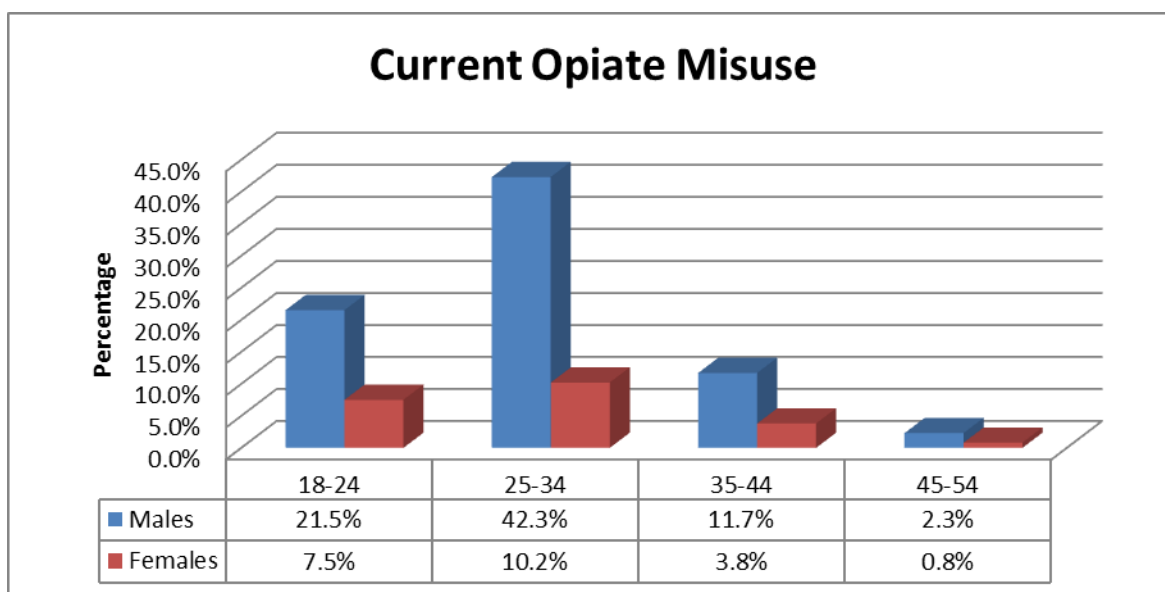
80.7% of 'current' alcohol misusers were male and between the ages of 18-44. Over two-thirds (66.8%) were male between the ages of 18-34. This would indicate that targeted prevention and intervention should be deployed at the young, male adult offender population. 11.5% of the female offenders were 'current' alcohol misusers.

Table 4.7: Current Cannabis Misuse



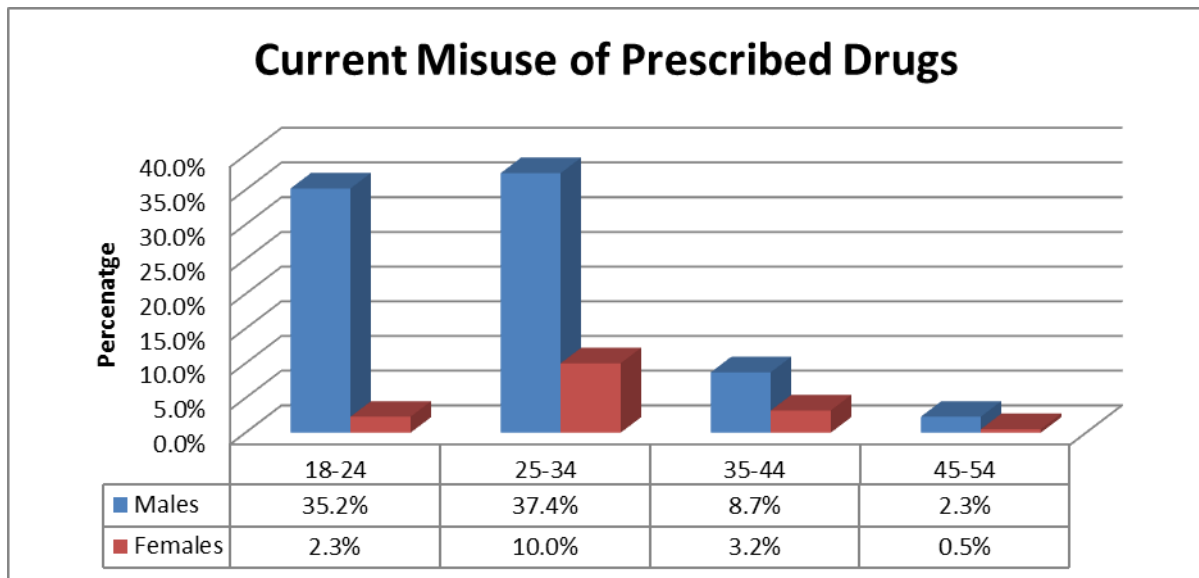
‘Current’ cannabis misuse was particularly evident for young, male adult offenders on probation supervision with 90.7% between the ages of 18-44.

Table 4.8: Current Opiate Misuse



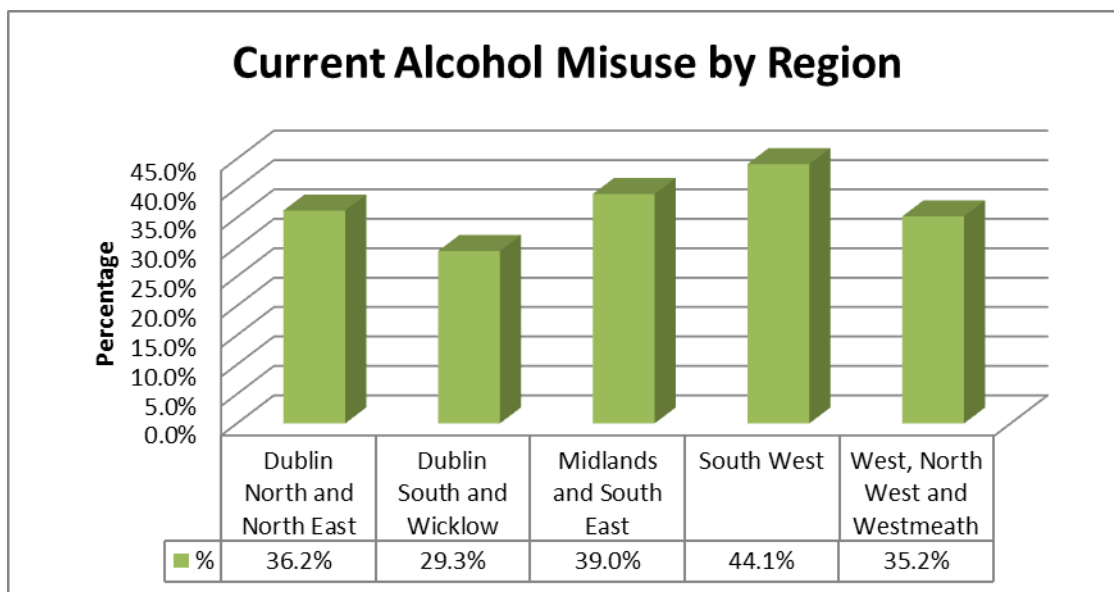
75.5% of ‘current’ opiate misusers were male and between the ages of 18-44. However, over a fifth (22.2%) of ‘current’ opiate misusers were female. Findings by Comiskey et al., (2006) suggest that female prisoners who were likely to misuse heroin were usually in their twenties. This is similarly reflected in this study with 17.7% falling between the age categories of 18-34.

Table 4.9: Current Misuse of Prescribed Drugs



The majority of the adult offender population currently misusing prescribed drugs were males and between the ages of 18-34; comprising 72.6% of the survey population. Despite comprising a small percentage of the total offender sample in the survey (12%), female adult offenders comprised 16% of those misusing prescribed drugs. 10% of these were between the ages of 25-34 which is similar to female misuse of opiates (10.2%). These findings suggest that the 25-34 age category for both males and females should be a targeted priority for drug intervention.

Figure 4.10 Current Alcohol Misuse by Region⁵



The proportion of current alcohol-misusing offenders among adult offenders on probation supervision was highest in the South West region⁶, at 44.1%.

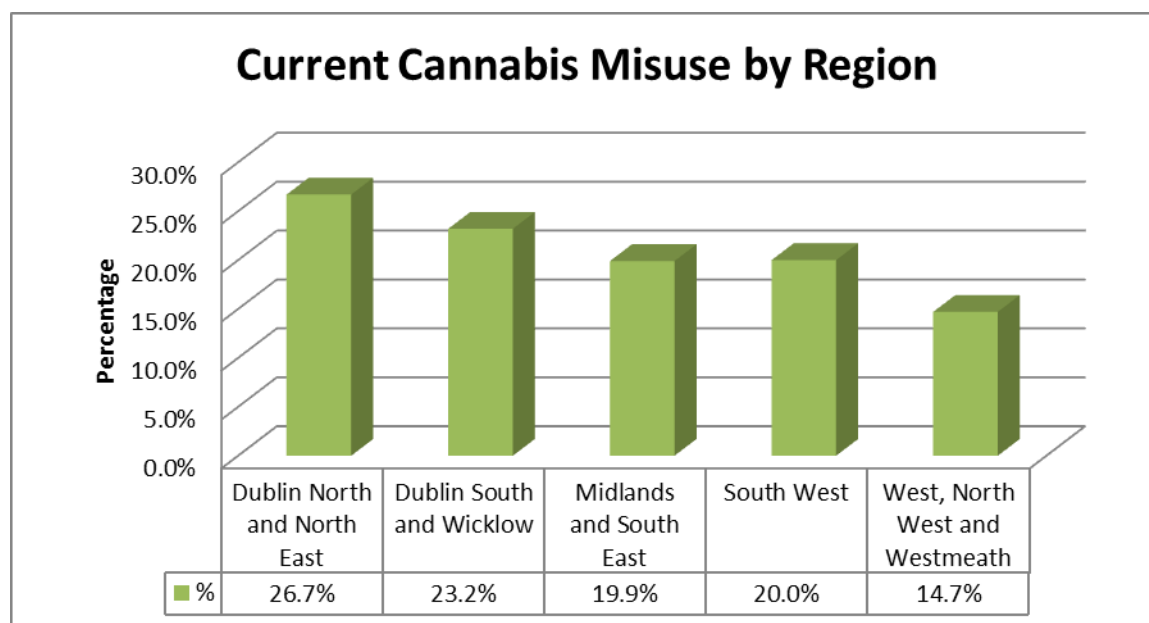
Health Research Board findings in Ireland indicated that the South region comprised 39.4% and the West region comprised 25.6% of cases of treated problem alcohol users in Ireland (Carew et al.,

⁵ Probation Service Regions are outlined in appendix 4

⁶ In order to adjust for regional variation in offender population size, the actual proportion of drugs/alcohol misuse in each region was calculated.

2011). The Midlands and South East region also had a high proportion of alcohol misusers among their offender population at 39% in this study.

Figure 4.11 Current Cannabis Misuse by Region



‘Current’ cannabis misuse was highest among offender populations in the Dublin North and North East region at 26.7% followed by Dublin South and Wicklow region at 23.2%.

Figure 4.12 Current Opiate Misuse by Region

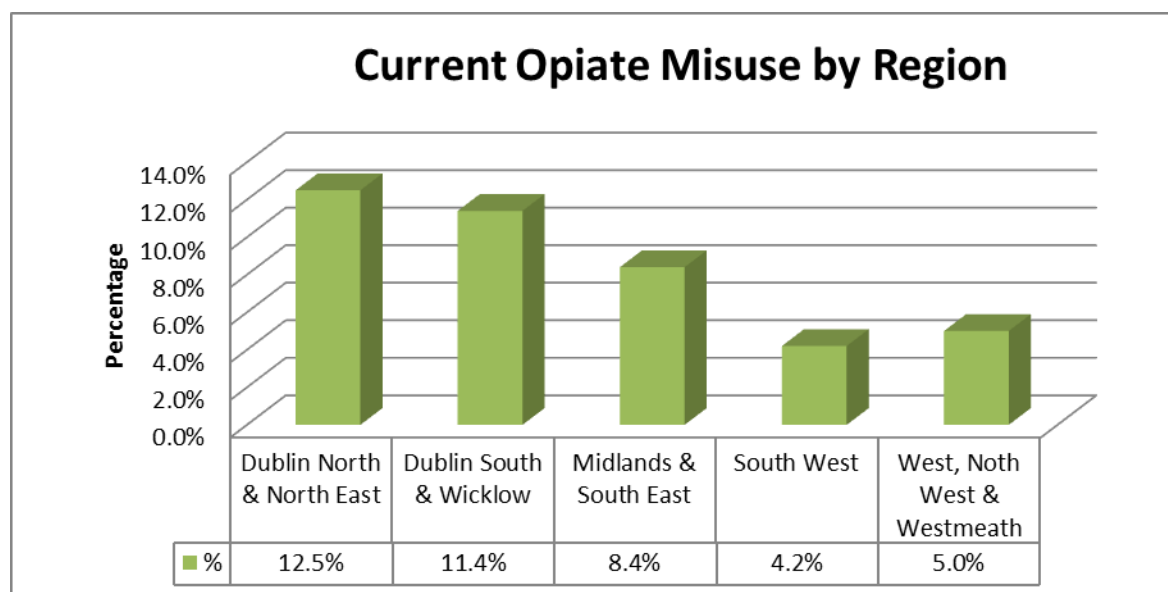
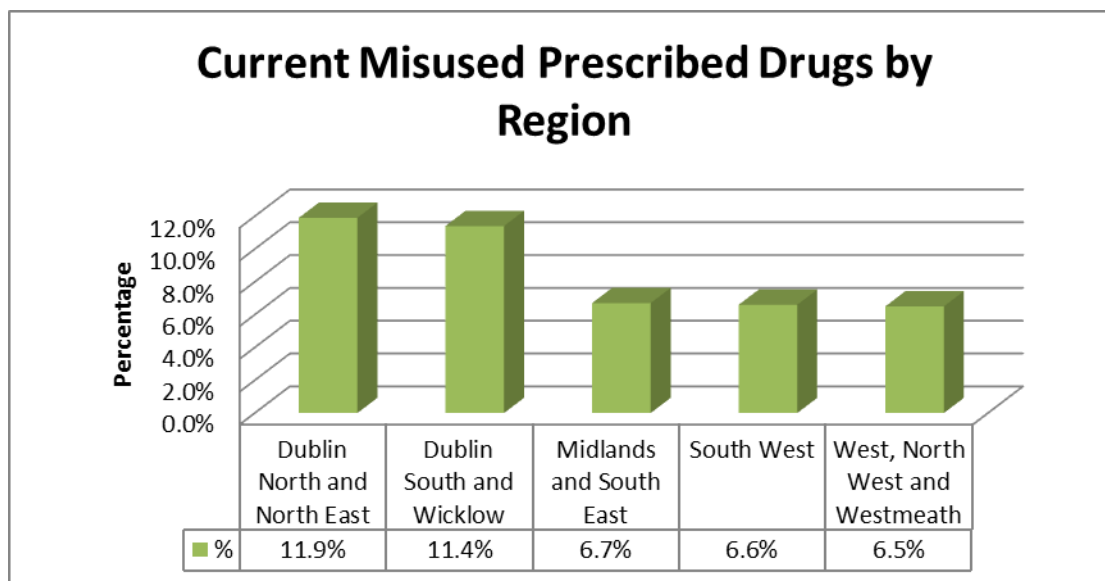


Figure 4.12 presents current opiate misuse by the five probation regions. The highest percentage of adult offenders misusing opiates by region was in the Dublin North and North East (12.5%), Dublin South and Wicklow (11.4%) and the Midlands and South East (8.4%).

In a study carried out by the Health Research Board (2008) on treated problem drug use, heroin was identified as one of the main problem drugs as reported by new cases in the Greater Dublin regions and the Midlands region (Reynolds et al., 2008). While opiate misuse was historically confined to Dublin, the proportion of opiate misusers is emerging as a significant problem in the Midlands and South East region in this survey.

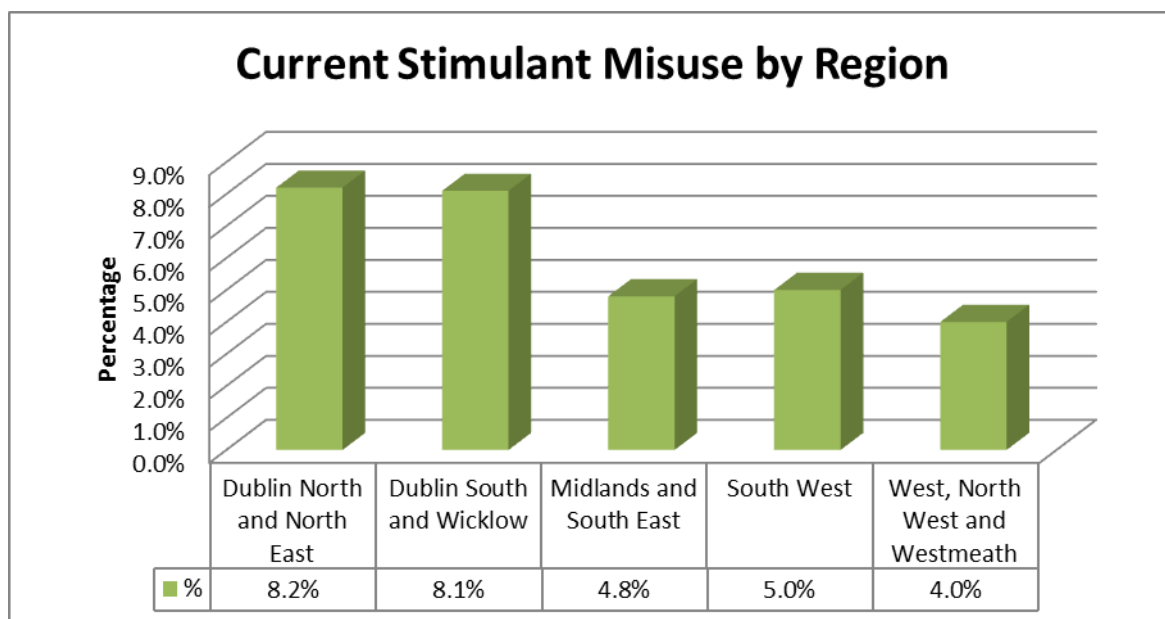
Opioids were the most common substances abused by drug-using patients from Wexford and Carlow who were admitted to hospital (Pepper, 2009). As highlighted by *Merchants Quay Ireland* (2006), the increase of treatment clinics outside Dublin indicates heroin is a growing problem for various regions. Many drug treatment clinics are now located in areas within the Midlands and South East probation region including Carlow, Portlaoise, Waterford and Tullamore.

Figure 4.13 Current Misused Prescribed Drugs by Region



‘Current’ misuse of prescribed drugs was more visible in the Dublin probation regions. In a study carried out in Ballymun, the use of benzodiazepines was found to be increasingly normalised within the region and a number of issues were identified as contributing to the benzodiazepine use situation including unemployment, poverty, marginalisation, lack of amenities and lack of education (Ballymun Youth Action Project, 2004). This finding is likely to be applicable in other historically social disadvantaged areas in Dublin. This may be a contributory factor in the higher levels of misuse in Dublin probation regions.

Figure 4.14 Current Stimulant Misuse by Region



Current stimulant misuse by region suggests that the Dublin probation regions had higher levels of misuse with 8.2% misusing in the Dublin North and North East and 8.1% in the Dublin South and Wicklow region.

Miscellaneous substances were most misused in the Midlands and South East region followed by the Dublin and South Wicklow region, these figures were very small and therefore are not presented here.

Figure 4.15 No. of Current Drugs Misused

Currently	No.	%
Two Drugs	347	11.7%
Three Drugs	138	4.7%
Four Drugs	69	2.3%
Five Drugs	36	1.2%
Six Drugs	26	0.9%

Figure 4.15 examines the number of adult offenders on the caseloads that were perceived as currently misusing more than one drug inclusive of alcohol. 11.7% of offenders misused two drugs, 4.7% of offenders were misusing three drugs, 2.3% of offenders were misusing four drugs, 1.2% of offenders were misusing five drugs and 0.9% of offenders were misusing six drugs. 20.8% of offenders were currently noted by Probation Officers to be misusing two or more drugs (alcohol inclusive).

These figures are based upon Probation Officers' professional judgment and perceptions and what is known about the client's current misusing behaviour and, therefore, may not fully represent the true level.

Conclusions

The analysis of the nature and frequency of drug/alcohol misuse highlights significant key findings:

- Alcohol was the most common substance misused by the adult offender population on probation supervision. This finding highlights the necessity to include alcohol in an analysis along with other illicit drugs.
- Cannabis misuse among the male adult offender population was higher than among the female adult offender population reflecting wider national and international patterns.
- Despite the small number of female offenders on the caseload, opiate misuse and misuse of prescribed drugs was proportionately higher in comparison to the male offender population. In total, 22.2% of the current opiate-misusing population were female with 16% of females comprised of those currently misusing prescribed drugs.
- Over two-thirds of the current alcohol misusers were male and between the ages of 18-34.
- 90.7% of current cannabis misusers were males between the ages of 18-44.
- 75.5% of current opiate misusers were male and between the ages of 18-44.
- 72.6% of current prescribed drug misusers were male and between the ages of 18-34.
- Adult male offenders on probation supervision were more likely than females to have misused cannabis, stimulants and miscellaneous substances.
- The proportion of current alcohol-misusing offenders was high for the South West region.
- Current cannabis misuse was proportionally highest among the adult offender populations in Dublin North and North East and Dublin South and Wicklow probation regions.
- Proportionally, the Dublin probation regions had the highest levels of current opiate misuse among their offender populations followed by the Midlands and South East region.
- The current misuse of prescribed drugs was higher among the offender population in the Dublin North and North East and the Dublin South and Wicklow probation regions.
- 20.8% of the survey total had misused more than two drugs (alcohol inclusive).

5. THE RELATIONSHIP BETWEEN DRUG/ALCOHOL MISUSE AND CRIME AMONG THE ADULT OFFENDER POPULATION ON PROBATION SUPERVISION IN IRELAND

Introduction

While previous chapters have examined the prevalence, nature and frequency of drug and alcohol misuse among the adult offender population, this report explores the relationship between drug misuse and crime and alcohol misuse and crime. Though it is beyond the scope of the study to assess the causal connection between drugs and crime and alcohol and crime, the report attempts to add to a minimal knowledge base and provide a broad overview on the links between alcohol misuse and crime and drug misuse and crime.

Aims

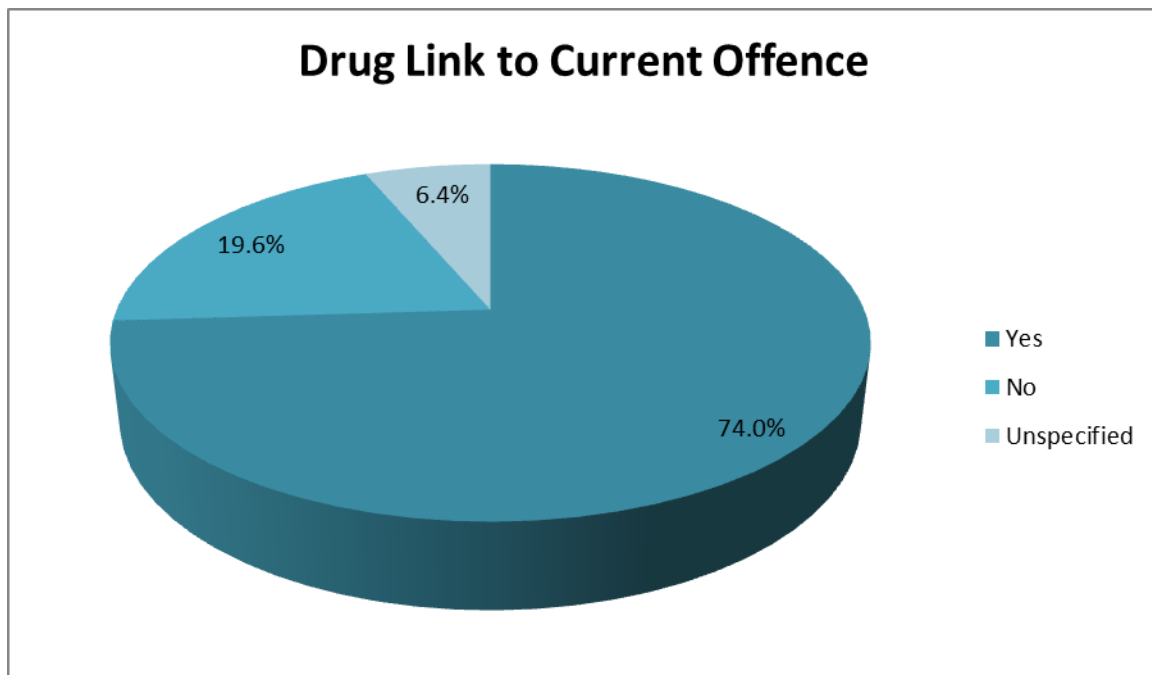
Based on the data obtained, this chapter will:

- Identify if there is a link between drug misuse and crime.
- Examine how demographic characteristics affect the drug-crime link.
- Determine the type of offence(s) associated with drug misuse.
- Identify if there is a link between alcohol misuse and crime.
- Examine how demographic characteristics influence the alcohol-crime link.
- Determine the type of offence(s) alcohol misuse is associated with.

Summary of Key Findings

- In 74% of drug-misusing offenders their misuse was linked to the current offence committed.
- For a (marginally) higher proportion of the female drug-misusing adult offender population their misuse was linked to the current offence committed than that of the male adult drug-misusing offender population.
- The perceived link between drug misuse and the current offence perpetrated was highest amongst the offender populations in the South West, Midlands and South East and Dublin North and North East probation regions.
- Of those cases where drug misuse was connected to the offence perpetrated, 36.8% were for acquisitive crimes and 31% were for drug-related offences.
- In 71.3% of alcohol-misusing offenders their misuse was linked to the current offence perpetrated.
- For a higher proportion of the male alcohol-misusing offender population their misuse was linked to their current offence committed than that of the female alcohol-misusing offender population.
- The perceived link between alcohol misuse and the current offence perpetrated was higher in rural probation regions.
- Of those cases where alcohol misuse was linked to the offence, 20.9% of offences were assaults and 18.9% were public order offences.

Figure 5.1 Drug Link to Offence



For 74% of drug-misusing offenders their misuse according to their Probation Officers was linked to the current offence committed.

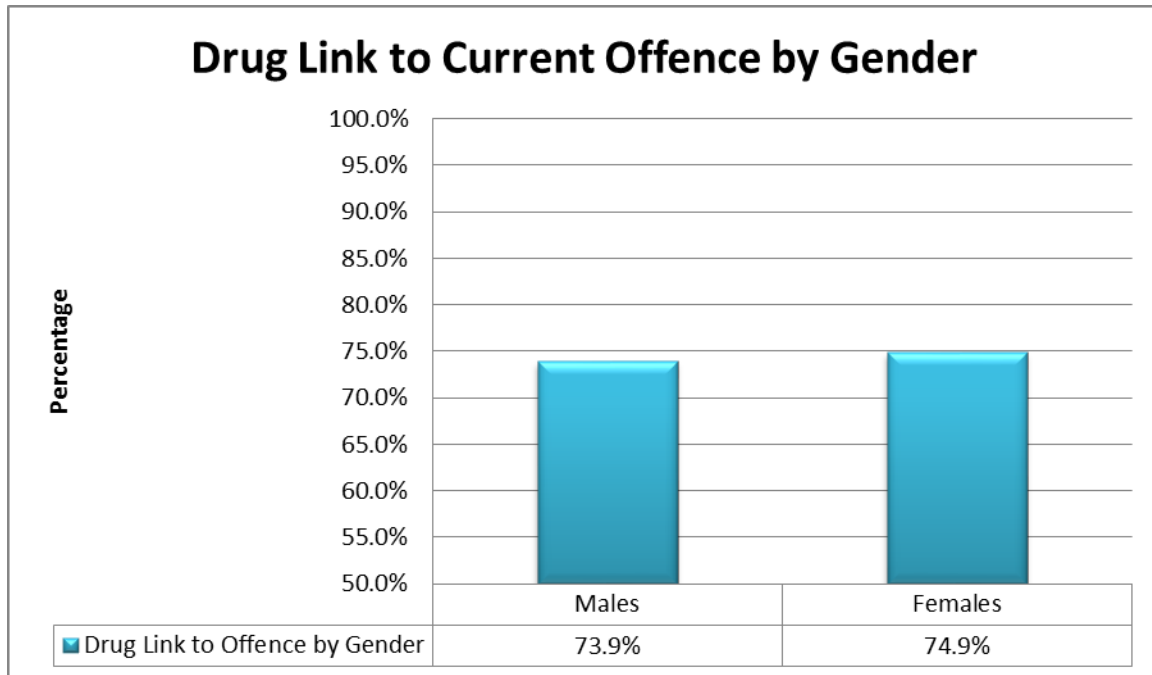
The results yielded higher drug links to the offence than self-reported research carried out in the United Kingdom where in the *Community Penalties Criminality Survey*, 38% of both males and females on community service stated that they had committed an offence related to their drug misuse (Budd et al., 2005). Previous research indicated that harder drug misusers such as heroin and/or crack/cocaine users in the *NEW-ADAM* study felt that there was some link between their drug use and offending (Bennett et al., 2001).

Almost a fifth (19.6%) of cases were identified by Probation Officers as not associated with the current offence. This reinforces the point that not all drug misuse is linked to criminal activity. As highlighted by the United Kingdom Drug Policy Commission (2008: 26):

“... not all drug use among offenders is necessarily directly associated with offending. For a considerable proportion of offenders it is just part of a way of life which includes both drug use and offending and reducing their drug use is unlikely to lead to reductions in their offending”.

6.4% of cases were not specified. Not specified cases may be attributed to the probation officer's lack of knowledge on whether the offence was positively correlated to drug misuse or in many instances, clients were recent referrals/transfers to the Probation Officer's caseload with insufficient information to answer the question.

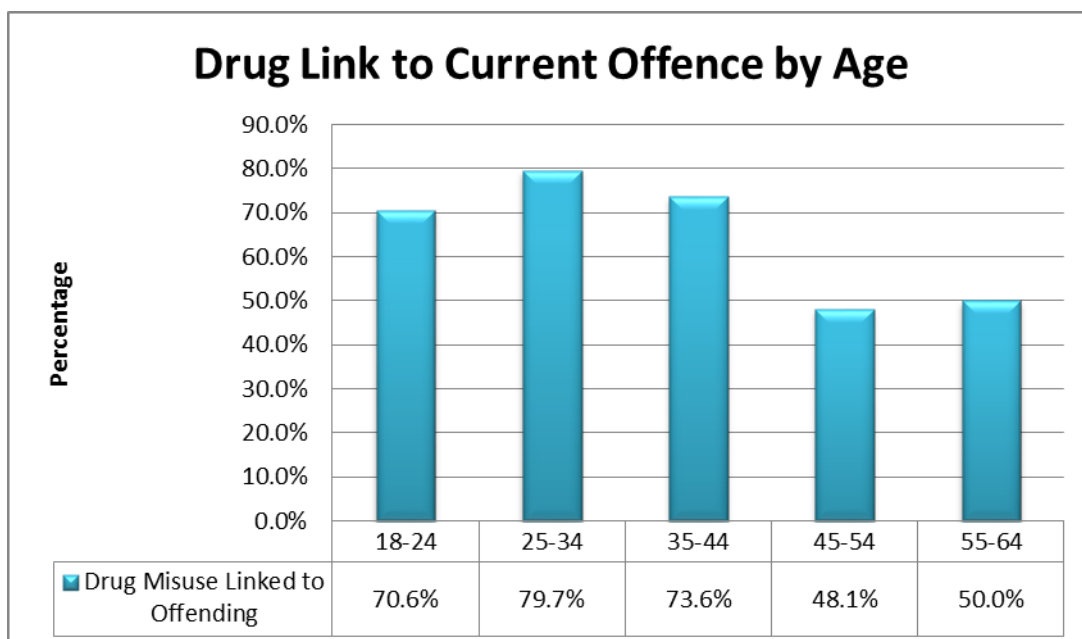
Figure 5.2 Drug Link to Offence by Gender



Drug misuse among the female adult offender population (74.9%) was marginally more likely to be linked to the offence as noted by the Probation Officer than that of the male adult offender population (73.9%) on probation supervision.

Among a sample of Irish prisoners, Dillon (2001) found that women were more likely to have become involved in crime after commencing illicit drug use, while men were more likely to have been involved in some level of criminal activity prior to illicit drug use. Furthermore, previous research based on self-reporting among prisoners in Ireland indicated that 51% of males and 69% of females stated being under the influence of drugs when they committed the offence (Hannon et al, 2000) indicating to some extent a deeper connection between drug misuse and crime for the female adult offender population.

Figure 5.3 Drug Link to Offence by Age



Of those who misused drugs, adult offenders in the younger age⁷ categories were more likely to have their misuse linked to their offending behaviour by the Probation Officer. As highlighted by Connolly (2006:19):

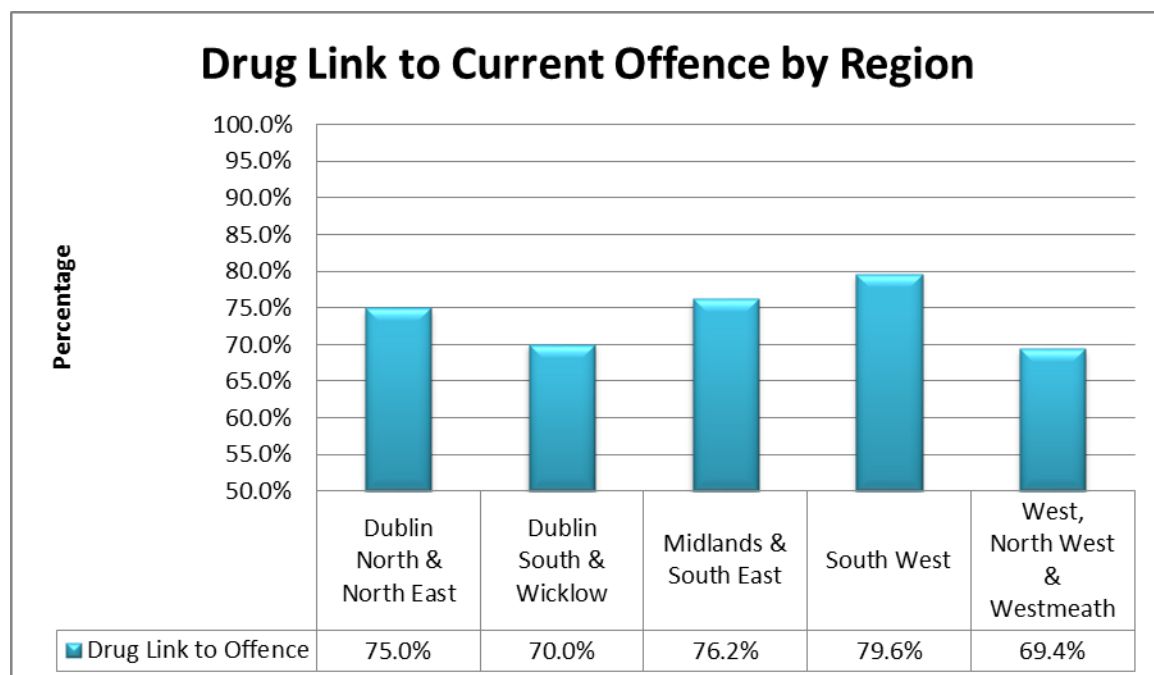
“With regard to the drugs-crime link, studies of drug users have found them typically to be single, aged between 14 and 30, male, urban, often still living in the parental home, from large and often broken families, having left school before the legal minimum age of 16, with highest levels of unemployment, with their best ever job being in the lowest socio-economic class, with a high number of criminal convictions and high rates of recidivism, with a history of family members being in prison, and a profile of extreme social disadvantage characterised by being from areas with a high proportion of local authority housing and often by the prevalence of opiate drug use and high level of long-term unemployment.”

The figures from this study suggest that drugs-crime link goes beyond the age of 30 with 73.6% of drug misusers having their current offence committed linked to their misuse in the 35-44 age category. This finding confirms the opportunity and necessity to intervene in drug misuse through the criminal justice system as early as possible.

Findings by Hearnden and Harcopos (1999) indicate the average gap between first use of any drug and first injecting was nine years. Their study also found that between first use and first perception of a problem averaged eight years for offenders on probation in London. The results of this study confirm the importance of intervening as early as possible, as highlighted by Hearnden and Harcopos (1999:4):

“Whilst it is probably hardest to work with problem drugs users during the early stages of their drug careers, when the perceived benefits of drug use still outweigh the costs, this finding reveals the potential pay-off that might be achieved from early interventions with younger offenders.”

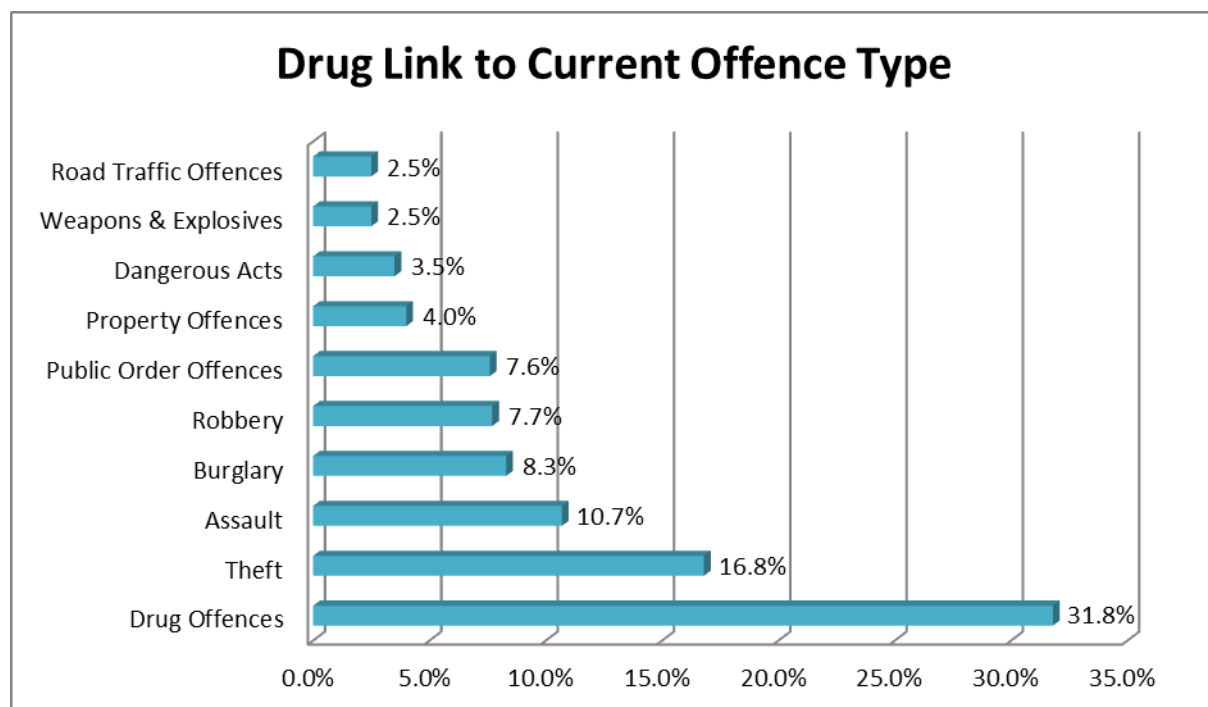
Figure 5.4 Drug Link to Offence by Region



⁷ In order to adjust for variation in the offender population size by age, the actual proportion of drug link to the offence was calculated by the total number of drug-misusing offenders in each age category.

The analysis indicates that, of those who misused drugs, a positive correlation of the perceived link between drug misuse and the offence committed was highest in the South West region⁸ (79.6%), the Midlands and South East (76.2%) and the Dublin North and North East region (75%).

Figure 5.5 Drug Link to Offence Type



31.8% of cases where drug misuse was linked by Probation Officers to offending the offence were drug-related. Drug possession accounts for most drug offences recorded.

Central Statistics Office (2010) data reporting 14,523 offences of possession of drugs for personal use in comparison to 4,159 offences of possession of drugs for sale or supply confirm that drug users are deeply embedded in the criminal justice system.

That finding also confirms that the link between drugs and crime is complex and varied. The data reflects the reality that simple possession of drugs is a crime. As O'Mahony (2008: 47-48) says:

“Because the possession of illicit drugs is by definition a crime and because the association between drugs and other forms of crime is apparently very strong, there is a distinct danger of overstating the drugs/crime nexus and slipping into the trap of automatically equating drug use with crime. In fact, there are great many drug users who do not commit crime other than ‘inherent’ drug-related crimes intrinsic to drug use.”

Nonetheless, the strong link between drug misuse and acquisitive⁹ crimes is reflected in this study and corroborated in the wider literature. 16.8% of offences that were linked to drug misuse were for theft. Theft was the most common type of offence committed by the 2009 drug-misusing cohort in the United Kingdom (Home Office, 2010). In the *NEW-ADAM* survey, theft and handling and drug dealing offences were strongly associated with drug use status (Bennett and Holloway, 2004).

⁸ In order to adjust for regional variation in the offender population size, the actual proportion of drug misusers whose misuse was linked to their offence was calculated in each probation area.

⁹ Acquisitive crime includes theft, burglary, robbery and property offences.

Of those whose drug misuse related to the current offence committed, 8.3% of offences were burglaries and 7.7% were robberies. In total, 36.8% of the perceived drug link to the offence was associated with acquisitive crime. O'Mahony (1997a) found that almost all in his sample of prisoners in Ireland admitted to funding their drug use through larceny, burglary and robbery.

In a study carried out in the United Kingdom, the most common reason offered by prisoners for the drug link to offending behaviours was to gain money to buy drugs (Budd et al., 2005). Goldstein's (1985) 'economic' model contends that drug users need to generate illicit income from crime such as robbery and burglary to support their habit.

In 10.9% of the survey the perceived link between the offence of assault and drug misuse was identified. Assault is not commonly linked to drug misuse rather alcohol misuse, as highlighted by the UK Drug Policy Commission (2008:25):

"Such offending is strongly linked to alcohol use, but may also be exacerbated by recreation use of drugs such as cocaine. Problem drug-using offenders may often act as street dealers in order to fund their drug habit and in this role may be involved in some violence associated with markets, as victims as well as perpetrators."

Stimulants such as cocaine are widely linked to violent behaviour for example:

"Although very little is known about the role drug intoxication plays in gang-related violence, uncorroborated, anecdotal evidence in Ireland suggests that gang members setting out to commit serious violence often use stimulant drugs such as cocaine." (O'Mahony, 2008:49)

The role of violence in acquisitive crimes committed might be under-estimated as drug users tend to conceal their involvement in crimes involving violence (Connolly, 2006). Goldstein's (1985) model implies that the effects of drug misuse such as withdrawal symptoms of opiates can often play a role in aggressive offending behaviour.

'Systemic' crime is another model described by Goldstein (1985) which relates to the role of the drugs trade and the impact it plays on the drug-crime link offence. As illustrated by O'Mahony (2008:59):

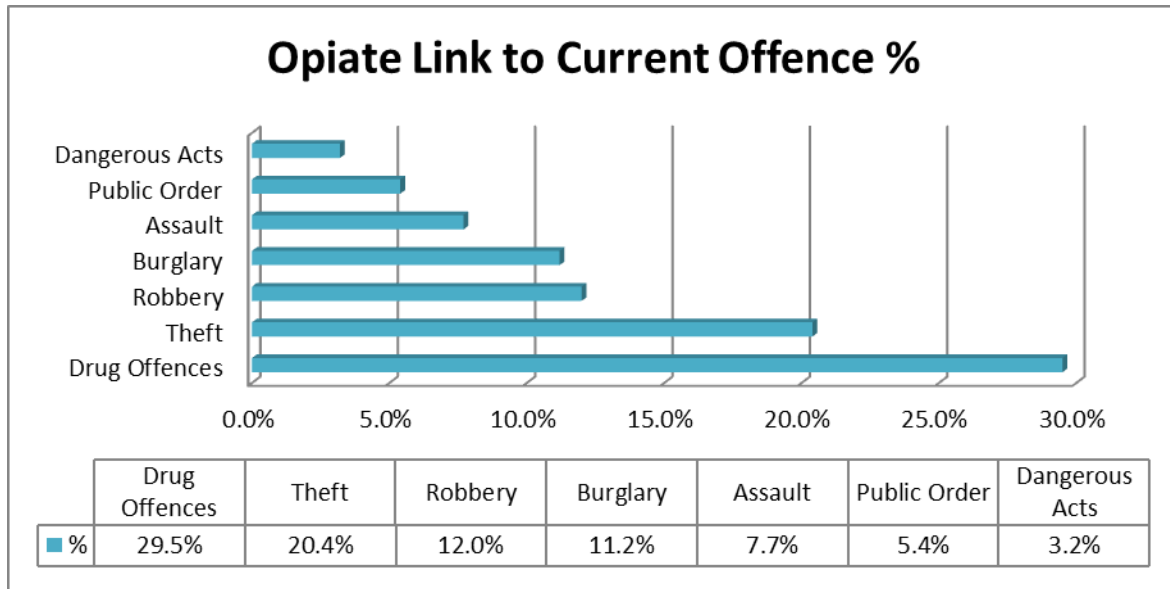
"Many addicts are recruited into the importation/distribution network at a low level, attracted by the promise of relatively small amounts of money or a continued supply of drugs. The time comes when their addiction fuelled desperation and the promise of a supply of drugs eases their path into undertaking street level dealing or other tasks useful to major drug dealers such as intimidation, smuggling or debt collection."

In this study, the link between drug misuse and offence for female adult offenders was mainly for theft-related offences (35.1%) and for drug offences (34%). The link between drug misuse and offence for male adult offenders was for drug offences at 31.5%. In contrast, theft was disproportionately lower than for the female offender population at 14.2%.

Robbery for males was double the proportion for females whose drug misuse was linked to offending, burglary was also higher for males than females. Assault and public order offences were also higher for the male drug-misusing offender population.

As highlighted by Steffensmeier & Allan (1996), the most significant gender differences in arrest profiles involve proportionately greater female involvement in minor property crimes and the relatively greater involvement of males in crime against persons and major property crime.

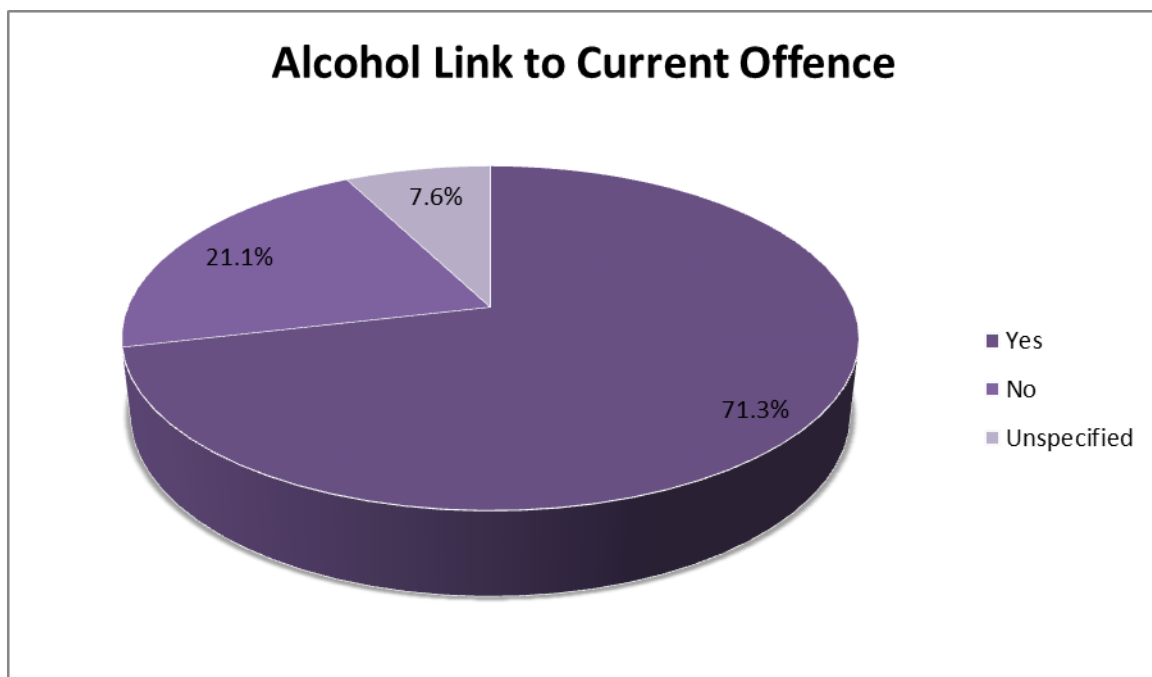
Figure 5.6 Opiate Link to Current Offence



For 85.6% of opiate misusers their misuse was linked to the current offence committed. 49% of cases were linked to theft, robbery or burglary. This finding corroborates with other Irish studies. As highlighted by O’Donnell (2005: 128-129):

“There is evidence that crime peaks in 1983 and 1995 coincided with the crests of the two waves of the heroin epidemic in Ireland. As most crime is against property, this supports the notion of heroin addicts as primarily acquisitive criminals.”

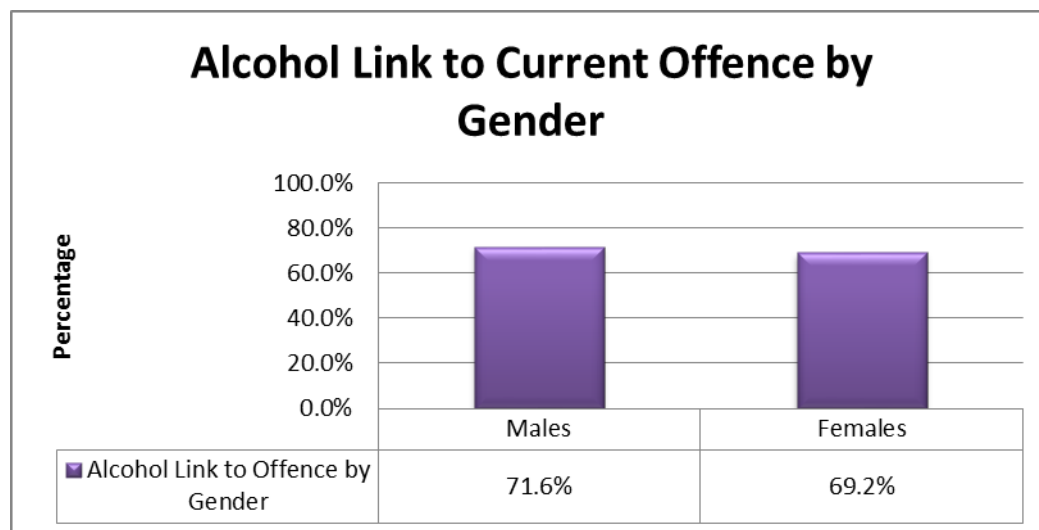
Figure 5.7 Alcohol Link to Offence



Of the alcohol-misusing offenders, 71.3% of cases were linked to the current offence perpetrated. The figure highlights the significant role alcohol plays in offending. Misuse of alcohol was directly involved in almost 70,000 crimes in 2010 (O’Keefe, 2011). Central Statistics Office figures show that there were 5,000 more alcohol-related crimes committed annually than there were six years ago (O’Keefe, 2011) which suggests that the misuse of alcohol and its link to crime is a continuing and increasing problem for Irish society.

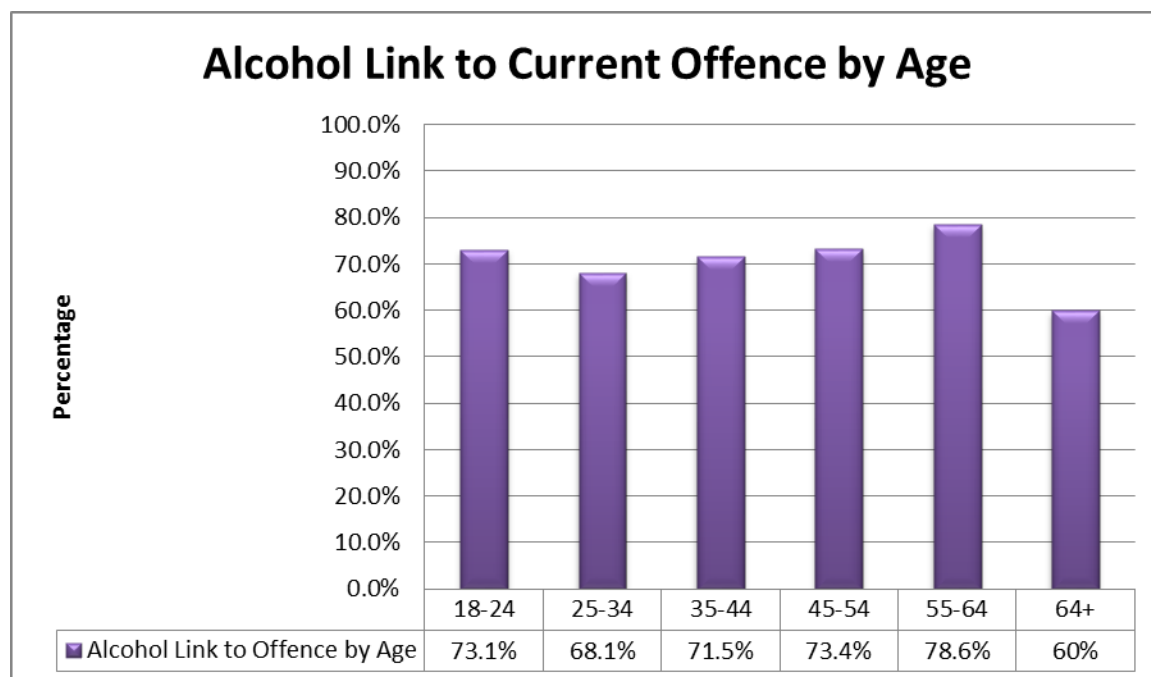
In over a fifth (21.1%) of cases misuse was not associated with the current offence. In 7.6% of cases, no answer was provided. This may be attributed to the lack of certainty by Probation Officers about whether the offence was linked to alcohol misuse due to recent placements/referrals or the client's failure to attend appointments.

Figure 5.8 Alcohol Link to Offence by Gender



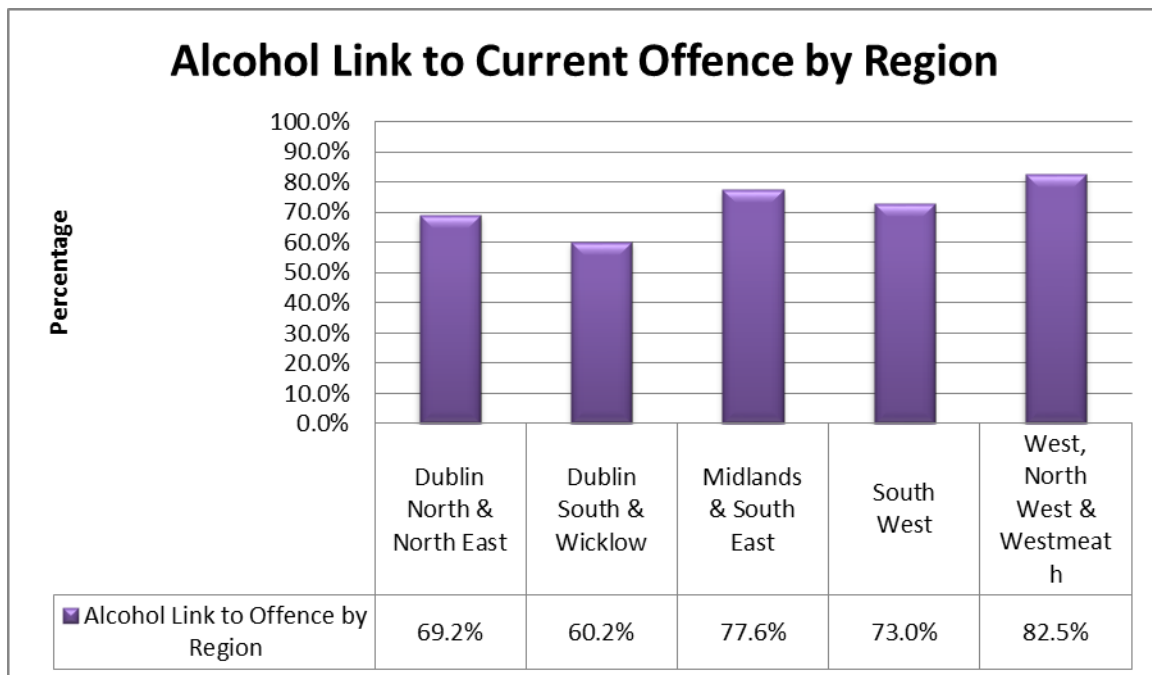
According to results, the male (71.6%) alcohol-misusing adult offender population were marginally more likely to have their offence associated with misuse than that of the female adult alcohol-misusing offender population (69.2%).

Figure 5.9 Alcohol Link to Offence by Age



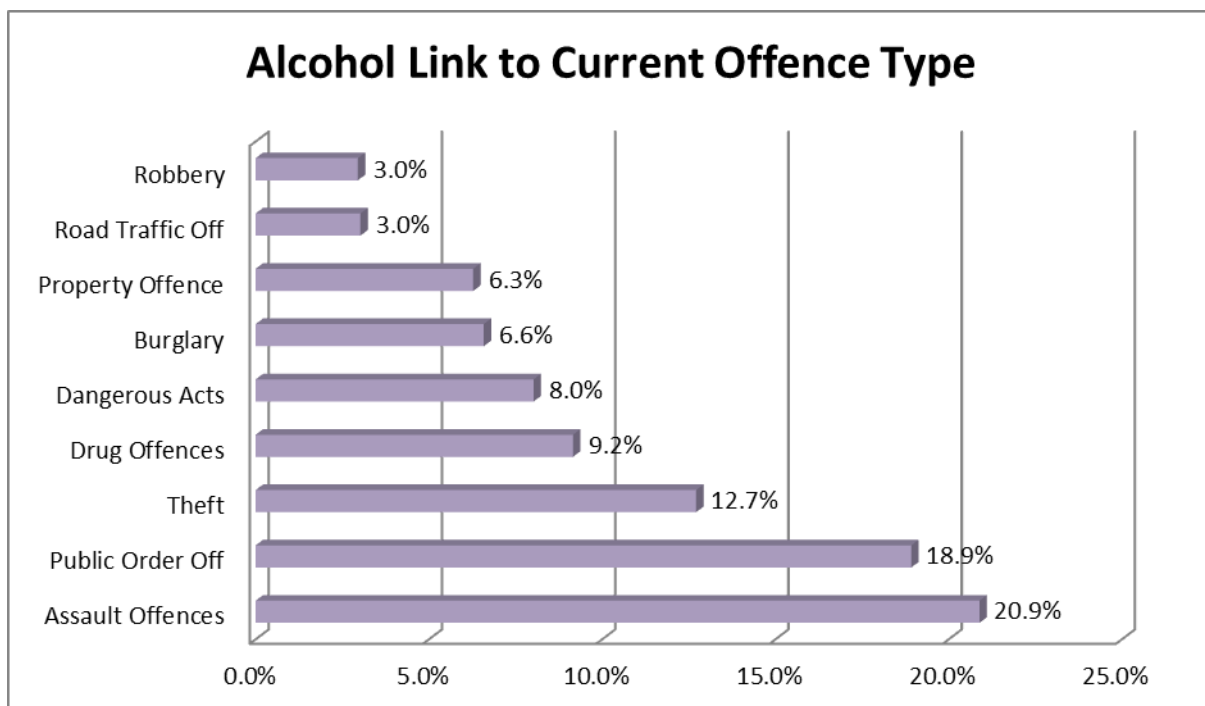
While misuse of alcohol was highly correlated to the offence committed across all age categories, it was proportionally highest at 78.6% in the 55-65 age category. However, it must be emphasised that the numbers of alcohol-misusing offenders in this and other older age categories were substantially lower than younger age categories.

Figure 5.10 Alcohol Link to Offence by Region



The perceived alcohol link to the offence by region was highest in the West, North West and Westmeath (82.5%) followed by the Midlands and South East (77.6%) and the South West (73.0%) regions.

Figure 5.11 Alcohol Link to Offence Type



Where alcohol misuse was linked to offence assault (20.9%) comprised a fifth of this category.

In a survey conducted by *Alcohol Action Ireland* (2011), one in 11 members of the general public reported that they or a family member were assaulted by someone under the influence of alcohol in the past year in Ireland (with 50% not reporting the incident to the Gardaí). This further corroborates a strong link between alcohol and assault.

18.9% of alcohol-related crimes were for public order offences. A study carried out by the Institute of Criminology (2003) indicated that 97% of public order offences recorded over a five-month period were alcohol-related in Ireland. Of 50 Garda members interviewed as part of the study, 98% believed that alcohol was a primary causal factor in public order offending. However, a further analysis of 177 observed public order incidents found that alcohol played a role in just over half the total.

The psycho-pharmacological model proposes that the effects of drugs for example, in this case intoxication, leads to criminal behaviour (Goldstein, 1985). Pharmacological mechanisms are often associated with assault (Holloway and Bennett, 2009). The results of the *Community Penalties Criminality Survey* suggest that frequency of drunkenness is associated with participation in violence, criminal damage and drug dealing (Budd et al., 2005).

Conclusions

Examining the link between drug misuse and crime and alcohol misuse and crime is significant for the Probation Service. As highlighted by Taylor et al., (2003: 271):

“The monitoring and quantifying of drugs and crime is critical to policy development. There is relatively little work that has quantified how much crime is attributable to drug use. Clearly the size of the problem will dictate the level of resources that should be devoted to the problem.” This is applicable in the context of deployment of Probation Service resources.

The key findings of this report are:

- Based on Probation Officers’ professional judgment, there were a substantial number of cases where drug misuse (74%) and alcohol misuse (71.3%) were linked to the offence committed. Although the survey confirms that there is a strong association between drug misuse and crime and alcohol misuse and crime, this does not necessarily mean that one causes the other. The relationship is complex.
- There were also other factors associated with offending behaviour. Many Probation Officers in this study cited the offender’s anger as a major concern. Mental health and mild learning difficulties were predominant across the survey population. Factors such as disrupted family background, lack of parental control, low education, child abuse and domestic violence were also stated as risk factors in offending behaviour. As outlined by the Steering Committee of the National Drugs Strategy 2009-2016, the prevalence of psychiatric co-morbidity among drug and alcohol users in Ireland is unknown. This requires further research with regard to the offender population.
- For a marginally higher proportion of the female adult drug-misusing offender population their drug misuse was linked to their offence than that of the male adult drug-misusing offender population.
- Contrastingly, a marginally higher proportion of the male alcohol-misusing offender population had their alcohol misuse was linked to their offence than that of the female alcohol-misusing offender population.

- The age cohort of offenders whose drug misuse was linked to their offending behaviour was highest in the younger adult age categories. Early intervention is essential for drug misusing offenders.
- The perceived link between drug misuse and offending was highest in the South West followed by the Midlands and South East and the Dublin North and North East region. The perceived link between alcohol misuse and offending behaviour was highest in rural probation regions.
- Of those whose drug misuse was linked to their offence, 31% were drug-related offences. 36.4% were linked to acquisitive crimes. This is consistent in the wider criminological research which indicates that drug use is widely linked to acquisitive crimes.
- The analysis substantiates international criminological research which suggests that there is a correlation between alcohol and violent crime and alcohol and public order offences. Of those whose alcohol misuse was linked to their offence, 20.9% were for assaults while 18.9% were for public order offences.
- There has been a notable absence of criminological research in Ireland that needs to be progressed in order to target criminal justice resources effectively. Decisions on the development of policies and services provided by the Probation Service for adult offenders on probation supervision should be made on the basis of sound empirical research. Research needs to be consistent and carried out in a rigorous manner in order to identify changing trends of drug and alcohol misuse among the offender population on probation supervision.
- Further research is required regarding the relationship between the misuse of specific drugs and its link to crime, as well as detailed research on the impact of polydrug misuse and offending behaviour.

6. THE LEVEL AND NATURE OF ENGAGEMENT WITH DRUG AND ALCOHOL TREATMENT SERVICES BY ADULT OFFENDERS ON PROBATION SUPERVISION.

Introduction

This chapter examines the level and nature of engagement with drug and alcohol treatment services among the adult-misusing offender population on probation supervision. A large amount of alcohol/drug misusers pass through the criminal justice system and therefore, the sector should be viewed as a site to intervene and address behaviour:

“The criminal justice system may provide an opportunity and vehicle through which to address their drug misuse and other factors which underpin their offending behaviour through access to treatment and other interventions.” (United Kingdom Drug Policy Commission, 2008: 26)

International evidence indicates that engagement with some treatment services including, pharmacotherapies (methadone), residential rehabilitation and therapeutic communities (McSweeney et al., 2008) can lead to a reduction in offending behaviour. In Ireland, the National Advisory Committee on Drugs (2009) found significant improvements in crime outcomes by misusers engaging in drug treatment services between intake and one year. These reductions were still evident three years later. The study found that the most notable reductions included, the number of those selling/supplying drugs declined from 30% to 13%, while the numbers handling stolen goods decreased from 25% to 10%. This indicates that for those whose drug misuse is linked to the offence appropriate intervention can result in a reduction in offending.

This chapter will provide a description, within the limitations of the data available, of the level and nature of engagement with drug and alcohol treatment services among adult misusing offenders on probation supervision. While it is beyond the scope of this survey to evaluate the effectiveness of drug and alcohol treatment services, the chapter provides basic data regarding the number of offenders engaging or engaged with treatment services and the nature of these interventions.

Aims

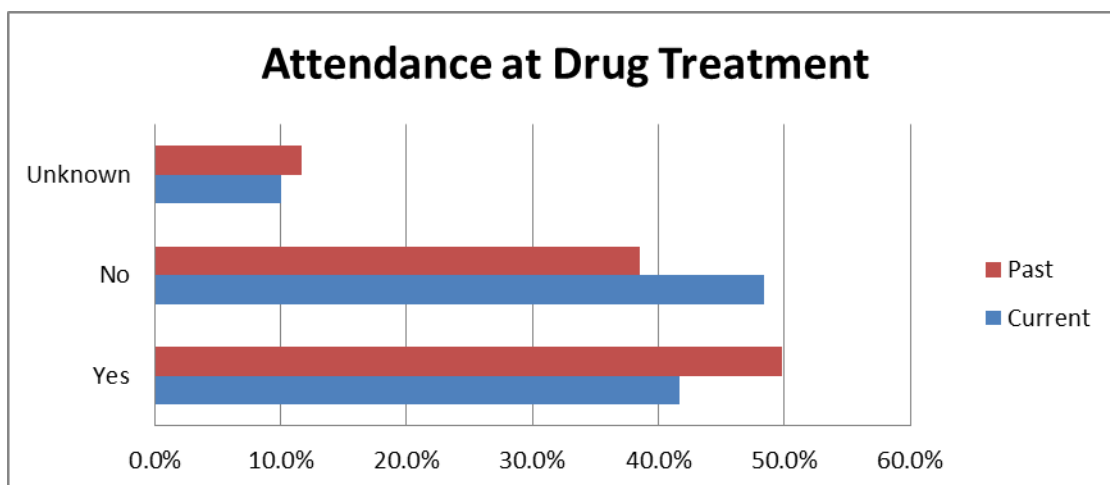
Based on the data obtained, this chapter will seek:

- To estimate levels of engagement with drug treatment services by the drug-misusing offender population.
- To identify the number of drug-misusing offenders who screened for urinalysis.
- To assess the nature of engagement with various drug treatment services by the drug-misusing offender population.
- To estimate perceived levels of problematic alcohol use among the alcohol-misusing offender population.
- To identify levels of engagement with alcohol programmes by the alcohol-misusing offender population.
- To assess the level and nature of alcohol treatment services engaged by the alcohol-misusing offender population.

Summary of Key Findings

- 41.7% of drug misusers on probation supervision were currently engaged in drug treatment. 48.4% of drug misusers were attending no current treatment and in 10% of cases this was not specified by Probation Officers.
- 49.8% of drug misusers on probation supervision attended treatment in the past. 38.5% of drug misusers had not attended treatment in the past and in 11.7% of cases this was not specified.
- 30.2% of the drug-misusing offender population on probation supervision were currently undertaking urinalysis.
- 5.8% of the total drug-misusing offender population were currently in residential treatment. 18.8% of the total drug-misusing offender population had been in residential treatment in the past. 2% were currently and in the past on residential treatment. 11.7% of cases were not specified.
- Of the opiate misusers, 72.2% were currently in receipt of methadone maintenance. 67.5% had been on methadone maintenance in the past. 26.8% of drug-misusing offenders were engaged with drug treatment services both currently and the past.
- Of those who misused drugs, 32.5% were currently attending counselling services. 38.8% engaged in counselling services in the past. 20.5% had engaged in drug treatment currently and in the past.
- Of those who misused drugs, 9.3% were currently attending narcotics anonymous, 13.7% had engaged with narcotics anonymous in the past. 5.9% had engaged with narcotics anonymous both currently and in the past.
- 33.5% of alcohol misusers were described as problematic alcohol misusers at present. 79.7% were described as problematic alcohol misusers in the past. 27.1% were described as problematic alcohol misusers both currently and in the past.

Figure 6.1 Attendance at Drug Treatment



Of those who misused drugs, 41.7% were currently attending drug treatment. This figure is on a par to previous Probation Service research which indicated that 41.8% of drug-misusing offenders (though confined to the Dublin Metropolitan area) engaged with drug treatment services (Geiran, 1999).

A large proportion (48.4%) of drug misusers appeared to be not engaging currently with any drug treatment services. As highlighted by Geiran (2009) current drug misuse levels must be established by Probation Officers in order for offenders to access drug treatment services. 10% of Probation Officers did not complete this question which may be attributed to a variety of reasons for example, the number of new referrals/ transfers on the caseload. Where no current treatment was identified, this may be attributed to the number of offenders awaiting drug treatment services but subject to waiting list delays to accessing services.

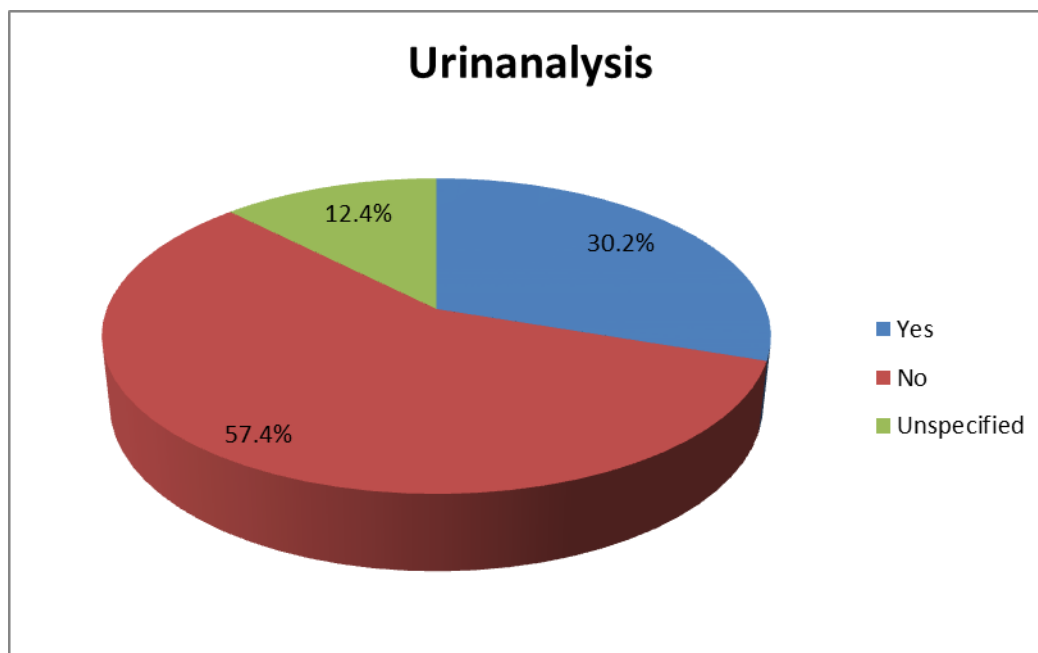
Almost half (49.8%) of the drug misusers in the sample attended treatment services in the past¹⁰. As highlighted by the UKDPC (2008) criminological desistance literature indicates that for people who recover from dependent drug use and desist from offending in this way it is a process and not an event.

38.5% of those in the survey had not attended drug treatment in the past which may indicate that for a significant number of drug misusers, the first point of contact with drug treatment services is through the criminal justice system.

In the 1970s when addiction services were limited, many offenders with misuse issues would be referred, for the first time, to treatment services following court appearances. The Probation Service initiated funding of treatment provision at that time because of limited mainstream access. While the Service has continued to provide funding to some treatment providers for dedicated services most Probation Service referrals to treatment are now primarily channelled through the mainstream services in local communities.

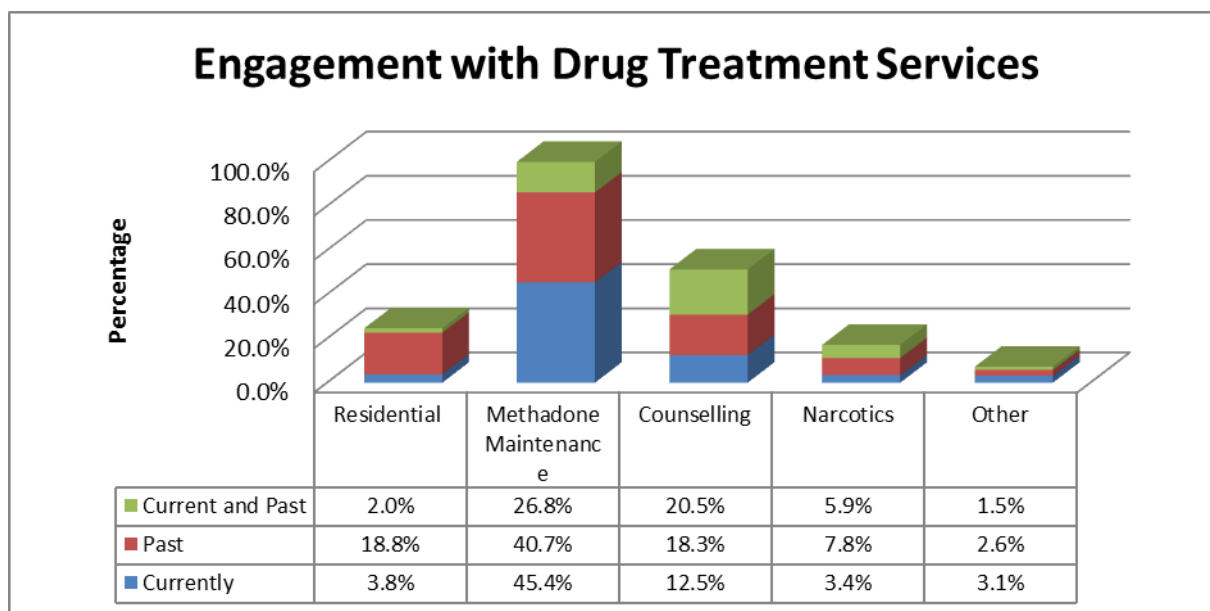
¹⁰ In this research context, the “past” refers to the last 12 months or part of.

Figure 6.2 Currently Undertaking Urinalysis



Of those who misused drugs, 30.2% were attending for urinalysis¹¹. Previous Probation Service research indicated that 41.6% were co-operating with urinalysis as part of their treatment in the Dublin Metropolitan Area (Geiran, 1999). Over half (57.4%) of the drug-misusing sample in this survey were not subject to urinalysis. 12.4% of cases were left not specified. The reduced urinalysis figures may reflect the falling use of urinalysis as part of treatment programmes and its limited value as a law enforcement instrument.

Figure 6.3 Engagement with Drug Treatment Services by total drug misusers



Of the total number of drug misusers, 20.8% attended residential treatment in the past. 5.8% were currently attending residential drug treatment. As highlighted in the National Drugs Strategy 2009-2016, the lack of residential detoxification services around the country was consistently raised and the low proportion of offenders in residential treatment may indicate shortages.

¹¹ Urinalysis can determine recent drug use and refers to screening which was in place 1st April 2011.

72.2% of opiate misusers were currently receiving methadone maintenance. 67.5% were in receipt of methadone in the past with 26.8% in receipt of methadone maintenance both currently and in the past. International literature suggests that methadone maintenance reduces offending behaviour.

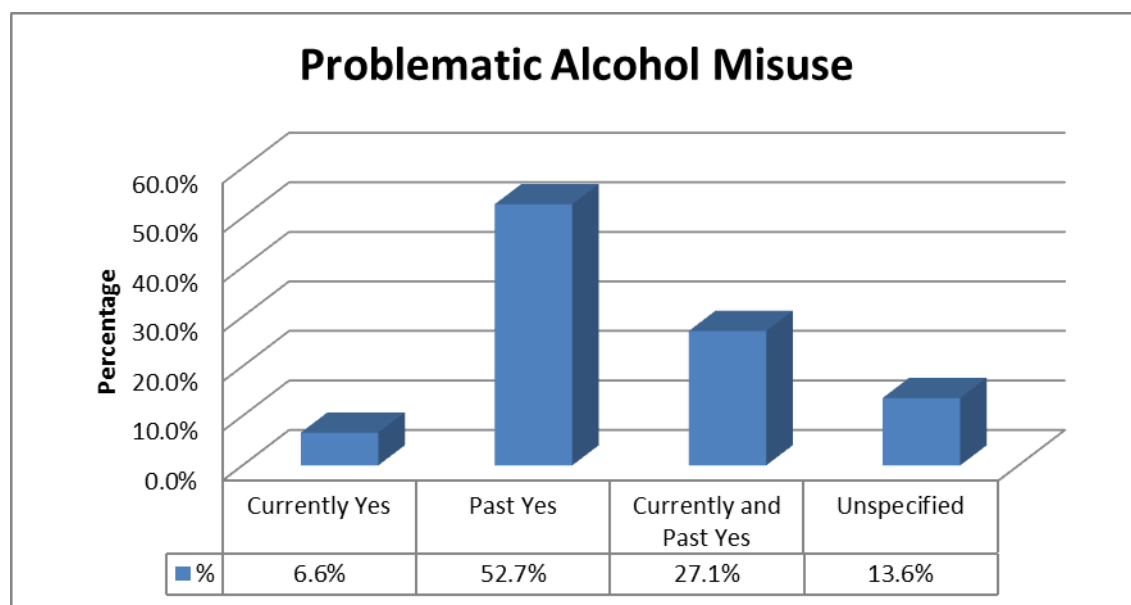
Mongan (2007) found that in Ireland the proportion of participants on methadone maintenance who reported involvement in crime decreased from 49% at treatment intake to 27% after one year. There was a notable reduction in the percentage of participants involved in acquisitive crime from 28% at treatment intake to 15% by one year. O'Donnell and O'Sullivan (2001) also found that between 1995 and 1999, recorded crime declined by 29% in the Dublin region and argued that improved methadone maintenance contributed to this drop.

33% of drug misusers were currently attending counselling services. 38.8% received counselling in the past. 20.5% of drug misusers received counselling currently and in the past.

9.3% of drug misusers were currently attending narcotics anonymous, while 13.7% engaged in Narcotics Anonymous in the past. 5.9% had attended Narcotics Anonymous both currently and in the past.

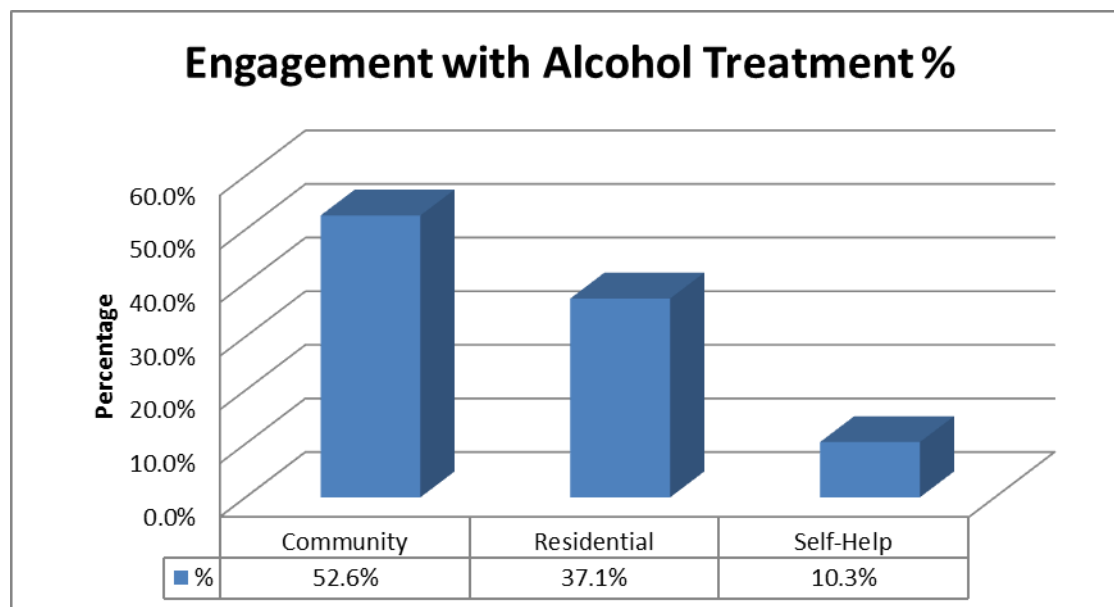
4.6% of drug misusers were currently availing of other services, 4.1% availed of other treatment services in the past. 1.5% were availing of other services currently and in the past.

Figure 6.4 Problematic Alcohol Misuse



Of the alcohol misusers, 79.8% had problematic alcohol use in the past. 27.1% had an alcohol problem both currently and in the past, while 33.7% were identified as having an alcohol problem currently. 13.6% of cases were left not specified.

Figure 6.5 Engagement with Alcohol Treatment



Of those alcohol misusers who received treatment, 52.6% were in community treatment, 37.1% were in residential treatment and 10.3% self-help.

Figure 6.6 Alcohol Treatment Outcomes

Alcohol Treatment	Community	%	Residential	%	Self-Help	%
Controlled Drinking ¹²	454	50.2%	62	19.4%	32	36.0%
Abstinence ¹³	228	28.0%	152	47.5%	36	40.4%
Relapse ¹⁴	63	13.9%	84	26.3%	17	19.1%
Unknown	36	7.9%	22	6.9%	4	4.5%

As indicated in the above table, very little inference can be drawn about the effectiveness of any one particular treatment. A more rigorous impact evaluation of drug and alcohol treatment services is required to examine the efficacy of various approaches for offenders on probation supervision. However, it must be noted that measuring effectiveness of any treatment is limited. There are a variety of factors which influence successful outcomes such as the characteristics of those receiving treatment, the quality of individuals and organisations delivering interventions and the wider context in which interventions are delivered. (UKDPC, 2008: 50). Furthermore, as highlighted by Malloch (2011: 32):

“There is evidence to indicate that retention in treatment and a consequent good outcome is consistently predicted by the relationship between readiness for treatment and change, motivation and commitment, and the therapeutic relationship.”

¹² Controlled drinking refers to having mechanisms in place for three months to monitor and review drinking

¹³ Abstinence in this context means that on the basis of a professional judgment, the offender is not engaged in any alcohol misuse and has not done so for a period of three months or longer.

¹⁴ Relapse refers to the return of regular use of alcohol and impaired functioning

Conclusions

- 41.7% of the total drug-misusing offender population were currently engaged in drug treatment services.
- 49.8% received drug treatment in the past. This figure indicates that addiction is a chronic relapsing condition. 38.5% had not attended drug treatment in the past which suggests that the criminal justice system should be used as a site for offenders to engage with drug treatment services.
- 30.2% of drug misusers were currently undertaking urinalysis.
- A small proportion (5.8%) of drug misusers in the sample was currently in residential treatment. 20.8% of drug misusers received residential treatment in the past.
- Of the total number of opiate misusers, 72.2% were currently on methadone maintenance and 67.5% had been on methadone maintenance in the past.
- Of the total number of drug misusers, 33% were currently attending counselling services. 38.8% had engaged in counselling services in the past.
- Of those who misused drugs, 9.3% were currently attending narcotics anonymous, 13.7% had engaged in narcotics anonymous in the past.
- 33.7% of alcohol misusers were described as current problematic alcohol misusers. 79.8% were described as problematic alcohol misusers in the past.

7. DISCUSSION

There is a visible link in the findings of this survey between drug and alcohol misuse and offending. While the survey confirms a strong association, this does not necessarily mean that one causes the other. The relationship is complex.

There are other factors associated with the current offence perpetrated including mental health, self control, anger and learning difficulties among others. Factors such as disrupted family background, lack of parental control, low education, personal and social circumstances, child abuse and domestic violence were also cited as risk factors with regard to offending behaviour.

Many offenders are socially marginalised with multiple social and personal problems. A holistic and multi-agency and multi-level approach to address offenders' behaviour, including drug and alcohol misuse, is required for real changes to be made and sustained.

It is clearly identifiable in research that drug and alcohol misuse are significant criminogenic factors in offending behaviour. Drug and alcohol misuse and related needs must be priority targets in the effective management of and interventions with offenders in our communities if offending is to be reduced.

The findings do indicate that in working with drug and alcohol-misusing offenders the Probation Service should prioritise addiction issues for intervention and treatment as early as practicable. The criminal justice system is still a significant early point of contact and referral source and can exercise authority in maximising engagement by offenders with the relevant treatment services and providers.

Interagency Approach to development of services

Drug treatment and rehabilitation services are presently provided through a wide range of publicly-funded agencies and other bodies. These include the Health Service Executive (HSE), community-based GPs and pharmacies under contract to the HSE, community and voluntary groups and parts of the criminal justice system including prisons. In addition, 24 area-based and 10 regional drug task forces are involved in the planning and co-ordination of drug-related services in their areas.

There is a clear necessity for enhanced co-operation, accessibility and integrated working between the Probation Service, HSE and the relevant community and voluntary drug and alcohol treatment providers in addressing addiction issues through, for example, shared assessment and integrated case management. This co-operation is needed in practice at local level and also between the bodies at strategy development, management and implementation levels.

There is a particular need for cross-cutting co-ordination and co-operation with other bodies and services in addressing the wider community, social and personal factors including housing, education and employment which can have an influence or effect on alcohol and drug misuse.

Drug Misuse

In the survey findings drug misuse was predominant among the adult offender populations in the Dublin region. Opiate misuse was highest in the Dublin area. The Midlands and South East region appears to have a significant emerging problem with opiates. This has implications for services and resources for appropriate and integrated drug services within these regions as well as the Probation Service.

Responsivity is an identified key factor in the effectiveness of interventions. It necessitates the tailoring of the intervention to the learning style, motivation, abilities, capacity and strengths of the offender. It is therefore critical that interventions should be based on quality assessment and matched with responsivity of the persons engaged.

75.5% of current opiate misusers engaged with the Probation Service were between the ages of 18-44. 35.9% of drug misusers were over the age of 35, signalling an increasing longevity of drug misusers. The lifestyle, offending and related issues for older offenders are significantly different from the younger cohort and do need specific strategies and actions to address them. The very large young adult population with current drug misuse issues does, similarly, require attention to appropriate interventions.

The finding that 41.7% of the total drug-misusing population was currently engaged in drug treatment services begs the question what the remaining cohort are doing and what their present circumstances are. Are they now drug-free, in recovery or disengaged from services? Further research particularly in-depth is required.

Misuse of Alcohol

Alcohol and its misuse have had a long and often fraught association with offending and social problems in Ireland. This study confirms that alcohol misuse remains a predominant factor among the adult offender population nationally. Alcohol is the individual substance that is most commonly misused across the offenders on probation supervision. For 71% of alcohol-misusing offenders their misuse was linked to the current crime.

It could be said that while public concern and the attention of policy-makers has focused on the rise of drug misuse and its consequences over recent decades alcohol misuse may not have received the on-going priority it merits in the light of its social, personal and criminal impacts.

The Government decided in 2009 to include alcohol in a National Substance Misuse Strategy. A Substance Misuse Strategy was developed as a result to focus on alcohol in particular. With the interim National Drugs Strategy 2009–2016 it forms part of the overall National Substance Misuse Strategy until the end of 2016.

The Steering Group Report on a National Substance Misuse Strategy published in February 2012 recommended the expansion of alcohol intervention programmes and a treatment referral option for those in particular need due to behaviour caused by harmful use of alcohol. While the Probation Service has provided alcohol and offending group programmes, involving HSE and community and voluntary addiction staff, in a number of areas this form of intervention merits renewed attention and consideration of additional community supported initiatives.

The study indicates that over two-thirds of current alcohol misusers were between the ages of 18-34. This challenges a 'traditional' perception of alcohol as primarily an older person's issue with drugs being a problem for the young. This, in turn, requires interventions matching recipient responsivity, personal circumstances and offending behaviour. The Probation Service, in taking cognisance of the high level of alcohol misuse, does need a developed strategy to ensure provision of and access to appropriate alcohol education, counselling and treatment services. Such a strategy will need to pay particular attention to the criminogenic role of cognitive distortions about and the ambivalent social attitudes regarding alcohol and its misuse in Ireland. The findings do highlight the need to prioritise action to work effectively with the large alcohol misusing adult offender population.

As highlighted earlier regarding drug misuse service provision there is a necessity for enhanced co-operation, accessibility and integrated working between the Probation Service, An Garda Síochána, HSE, education authorities, community and voluntary groups and relevant treatment providers in addressing alcohol-related issues. This includes effective information giving, intervention models and behavioural change approaches in addition to cross-cutting co-ordination and co-operation with other bodies and services in delivery of appropriate services.

While there are many community and individual initiatives in Ireland to address alcohol misuse, evidence based research on impact and effectiveness has been limited. There is a variety of factors which influence successful outcomes of addiction treatment, such as the characteristics of those receiving treatment, the quality of individuals and organisations delivering interventions and the wider context in which interventions are delivered.

Many treatment options available are based on anecdotal reports, personal experience or the conviction of leaders. A rigorous impact evaluation of alcohol (and drugs) intervention and treatment approaches and services is required to examine the effectiveness of various approaches and interventions for adult offenders on probation supervision.

Females and Gender Specific Interventions

Though females comprised a relatively small proportion of the adult offender population at 12%, misuse of drugs and/or alcohol was almost on a par at 85.8% to that of the male adult offender population at 89.4%. The study noted that current and past opiate misuse and the misuse of prescribed drugs was proportionately higher among the adult female offender population.

International studies have reported that offending and addiction behaviour and patterns have different factors in play for male and female offenders. Acknowledging that most programmes and structured interventions were based on and planned for male offender populations, the studies indicate the need for gender specific interventions for female offenders. This will ensure a more effective means of addressing and managing addiction and offending issues.

The Probation Service should further explore the feasibility, value and potential of gender specific addiction treatment and related offending approaches, initiatives and interventions for female offenders on supervision.

Further exploratory research in Ireland may provide additional information and reasons for gender variations in the prevalence of drug/alcohol misuse. Such research could inform practice and policy development and the case for gender specific (and possibly age specific) services and interventions.

Importance of Research

Research is a crucial pillar which enables the Probation Service to identify appropriate and targeted interventions as well as ensuring that resources are managed in the most effective manner. The last nearly comparable study of addiction issues among the offender population was conducted in 1998. While there are acknowledged limitations in this study, this analysis is an important step in adding to the existing underdeveloped knowledge base.

It will be important that the Probation Service alone or with relevant partners, commission rigorous research on alcohol and drug misuse among the adult offender population on supervision at regular intervals to inform policy, practice and service development. Research would, in particular, assist the Probation Service in identifying and prioritising appropriate interventions for better outcomes.

As a priority, it would be important that the Probation Service conduct, as soon as practicable, a similar or comparable alcohol and drug misuse study among the young (under 18 years of age) offender population on supervision.

8. BIBLIOGRAPHY

Adams K et al., (2008) *Drug Use Monitoring in Australia: 2007 annual report on drug use among detainees*. Research & Policy Series no. 93, Canberra: Australian Institute of Criminology.

Alcohol Action Ireland (2011) *New Findings alcohol related harm and crime*, <http://alcoholireland.ie/2011/15th-november-2011-new-findings-alcohol-related-harm-and-crime/> (accessed 25/11/11)

Allwright, S., Bradley F., Long J., Barry J., Thornton L. & Parry JV (2000) Prevalence of Antibodies to hepatitis B, hepatitis C and HIV and risk factors in Irish prisoners: results of a national cross-sectional survey, *British Medical Journal*, 321: 78-82

An Garda Síochána (2010) *Annual Report of An Garda Síochána*, The Stationery Office: Dublin.

Ballymun Youth Action Project (2004) *Benzodiazepines-whose little helper? The role of Benzodiazepines in the development of substance misuse problems in Ballymun*, Ballymun Youth Action Project: Dublin.

Bellerose, D., Lyons S., Carew A.M., Walsh S & J Long (2010) Problem benzodiazepine in Ireland: treatment (2003-2008) and deaths (1998-2007). HRB Trend Series 9, Dublin: Health Research Board.

Bellerose, D., Carew A.M & S.Lyons (2011) Trends in treated problem drug use in Ireland 2005-2010, Health Research Board: Dublin.

Bennett, T. (2000) *Drugs and Crime: The Results of the Second Developmental Stage of the NEW-ADAM programme*, Home Office Research Study 205, London: Home Office.

Bennett, T., Holloway K. and Williams, T. (2001) *Drug Use and Offending: Summary Results of the First Year of the NEW-ADAM Research Programme*, London: Home Office.

Bennett, T. & K. Holloway (2004) *Drug Use and Offending: summary results of the NEW-ADAM Programme*. Home Office Research Findings 179, London: Home Office.

Bennett, T. & K.Holloway (2004) *Drug Use and Offending: Summary Results of the first two years of the NEW-ADAM programme*, London: Home Office.

Brooker, C., Fox, C., Barrett P. & L.Syson Nibbs (2008) *A Health Needs Assessment of Offenders on Probation Caseloads in Nottinghamshire and Derbyshire* <http://www.lincoln.ac.uk/cjmh/docs/probationCaseloads.pdf> (accessed 18/10/11)

Budd, T., Collier P., Mhlanga B., Sharp C. & G.Weir (2005) *Levels of Self-report offending and drug use among offenders: findings from the criminality surveys*, Home Office: London <http://library.npia.police.uk/docs/hordsolr/rdsolr1805.pdf> (accessed 27/09/11)

Carew A.M., Bellerose D. & S.Lyons (2011) *Treated Problem Alcohol Use in Ireland 2005-2010*, Health Research Board: Dublin.

Central Statistics Office (2010) *Controlled Drug Offences*, http://www.cso.ie/Quicktables/GetQuickTables.aspx?FileName=cja01c17.asp&TableName=Controlled+drug+offences&StatisticalProduct=DB_CJ (accessed 18/01/11)

Comiskey, C.M, O'Sullivan K. & J.Cronly (2006) *Hazardous Journeys to Better Places*, Health Service Executive: Dublin.

Connolly, J. (2006) *Drugs and Crime in Ireland. Overview 3*. Dublin: Health Research Board.

Cox, G. Kelly P. & C.Comiskey (2008) *ROSIE Findings 5: Gender Similarities and differences and difference in outcome at 1 year*, National Advisory Committee on Drugs: Dublin.

Department of Community, Rural and Gaeltacht Affairs (2009) *National Drugs Strategy (interim) 2009-2016* http://www.drugsandalcohol.ie/12388/1/DCRGA_Strategy_2009-2016.pdf (accessed 01/01/12)

Dillon, L. (2001) *Drug Use among Prisoners: An Exploratory Study*. Dublin: Health Research Board.

Europe Monitoring Centre for Drugs and Drug Addiction (2005) *Differences in Patterns of drug use between women and men*. European Monitoring Centre for Drugs and Drug Addiction: Lisbon <http://www.emcdda.europa.eu/html.cfm/index34278EN.html> (accessed 25/09/11)

European Monitoring Centre for Drugs and Drug Addiction (2011) *The State of the Drugs Problem in Europe*, Luxembourg: Publications Office of the European Union.

Forsythe, L. & K. Adams (2009) Mental health, abuse, drug use and crime: does gender matter? *Trends and Issues in Crime and Criminal Justice*, No. 384 <http://www.aic.gov.au/documents/F/2/D/%7BF2D5EEFF-3E95-419D-A1F5-BF5F8579F01C%7Dtandi384.pdf> (accessed 24/11/11)

Geiran, V. (1999) *Problem Drug Use among Offenders in Contact with the Probation and Welfare Service in Dublin*, The Probation and Welfare Service: Dublin.

Geiran, V. (2009) *Principles of Probation Practice in Working with Substance Misusers*, Probation Service: Unpublished.

Goldstein, P. (1985) The Drugs-Violence Nexus: A Tripartite Framework, *Journal of Drug Issues*, 15: 493-506.

Gordon, C. (1995) *Drug Offences-Trends and Patterns-1970-1994*, <http://www.drugsandalcohol.ie/6559/1/576-0526.pdf> (accessed 04/11/11).

Hannon F, Kelleher C, Friel S, Barry M, Harrington J, McKeown D, and McMahon A (2000) *General healthcare study of the Irish prison population*. Dublin: Stationery Office.

Hearnden, I. & Harocopos, A. (1999) *Problem Drug Use and Probation in London. Home Office Research Findings 112*. London: Home Office.

Home Office (2010) *Drug-misusing offenders: results from the 2009 cohort for England and Wales* <http://library.npia.police.uk/docs/homisc/misc0410.pdf> (accessed 07/12/11)

Kilcommins, S., O'Donnell I., O'Sullivan E. & B.Vaughan (2004) *Crime, Punishment and the Search for Order in Ireland*, Institute of Public Administration: Dublin.

Institute of Criminology (2003) *Public Order Offences in Ireland*, Dublin: The Stationery Office.

Lally, C. (2011) State has EU's most acute heroin problem, *The Irish Times*, 16th November.

- Long J., Kelleher T., Kelly F. & Sinclair H. (2004) *Treatment demand for problem alcohol use in the South Eastern and Southern Health Research Board areas 2000 to 2002*, Occasional Paper 12. Dublin: Health Research Board.
- Lowry, S. & O'Donovan D. (1996) *Review of Work with Substance Misusers*, Probation and Welfare Service: Dublin.
- Lyons, S., Robinson J., Carew A.M, Gibney S., Connolly J. & J.Long (2010) *Close to Home: A Study on the Misuse of Drugs and Alcohol in the Midland Region*, The Health Research Board: Dublin.
- Mac Gregor Forsyth A.J., Khan F. & B.Mc Kinlay (2011) Diazepam, alcohol use and violence among male young offenders: 'The Devil's Mixture', *Education, Prevention & Policy*, Vol. 18. No.6 pp.468-476.
- Malloch, M. (2011) *Interventions for Drug Users in the Criminal Justice System: Scottish Review*, The Scottish Centre for Crime and Justice Research, Research Report No.5.
- Markey G. (2010) *Latest Drug Trends Across Europe*, <http://www.hrb.ie/health-information-in-house-research/alcohol-drugs/adru-news/adru-press-release-story/release/131/> (accessed 28/10/11)
- McSweeney, T., Stevens A., Hunt N. & P.J Turnbull (2006) Twisting Arms or a Helping Hand? Assessing the Impact of 'Coerced' and Comparable 'Voluntary' Drug Treatment Options, *British Journal of Criminology* 47 (3) 470-490.
- McSweeney, T., Turnball P.J & M.Hough (2008) *The treatment and supervision of drug dependent offenders: A review of the literature prepared for the UK Drug Policy Commission*, Institute for Criminal Policy Research: King's College London.
- Merchants Quay Ireland (2006) *Introduction to Problem Drug Use in Ireland*, <http://www.mqi.ie/page.php?id=15> (accessed 10/01/12)
- Ministry of Justice (2010) *Offender Management Caseload Statistics 2009: An Overview of the main findings*, Ministry of Justice Statistics Bulletin: United Kingdom.
- Mongan, D. (2007) ROSIE Findings 4: Summary of Methadone Treatment Outcomes, *DrugNet Ireland*, Issue 23:9.
- Mullally, U. (2011) Heroin: The next generation, *The Irish Times*, 14th May.
- National Advisory Committee on Drugs (2009) *The ROSIE Study: Drug Treatment Outcomes in Ireland*, Dublin: The Stationery Office.
- National Advisory Committee on Drugs (2011) *Drug Use in Ireland and Northern Ireland*, <http://www.nacd.ie/publications/NACDPolydrugUseBulletin5.pdf> (accessed 12/10/11)
- Newbury-Birch, D., Bland M, Cassidy P., Coulton S., DeLuca P., Drummond, C., Gilvarry E., Godfrey C., Heather N., Kaner E., Myles, J., Oyefeso A., Parrott S., Perryman K., Phillips T., Shenker D. & J. Shepard (2009) *Screening and Briefing Interventions for hazardous and harmful alcohol use in probation services: a cluster randomised controlled trial protocol*, 9: 418 <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2784463/> (accessed 14/11/11)

- Newbury-Birch D, Harrison B, Brown N. and E.Kaner (2009) Sloshed and Sentenced: A prevalence study of alcohol use disorders among offenders in the North-East of England, *International Journal of Prisoner Health* 5 (4): 201-211.
- O'Donnell, I. & E.O'Sullivan (2001) *Crime Control in Ireland: The Politics of Intolerance*, Cork University Press: Cork.
- O'Donnell, I. (2005) Violence and social change in the Republic of Ireland, *International Journal of the Sociology of Law*, 33 (2) p101-117.
- O'Keefe, C. 70,000 Crimes Directly Linked to Alcohol, *The Irish Examiner*, 6th May 2011.
- O'Mahony, P. (1997) *Mountjoy Prisoners: A Sociological and Criminological Profile*, The Stationery Office: Dublin.
- O'Mahony, P. (2008) *Key Issues for Drug Policy in Irish Prisons*, Dublin: Drug Policy Action Group.
- O'Mahony, P. (2008) *The Irish War on Drugs: The Seductive Folly of Prohibition*, Manchester: Manchester University Press.
- Pepper, M., Wexford Worst for alcohol and heroin abuse HSE report shows model county is South East regions blackspot, *New Ross Standard*, <http://www.newrossstandard.ie/news/wexford-worst-for-alcohol-and-heroin-abuse-hse-report-shows-model-county-is-south-east-regions-blackspot-1895863.html>, 23rd September 2009.
- Reynolds, S. (2007) A community drugs study, *Drugnet Ireland*, Issue 21, pp.1-2.
- Reynolds, S., Fanagan S., Bellerose, D. & J.Long (2008) *Trends in Treated Problem Drug Use in Ireland, 2001-2006*, The Health Research Board: Dublin.
- Sampson, R & J. Laub (2003) Life Course Desisters? Trajectories of Crime among Delinquent Boys followed to age 70, *Criminology*, 41 (3) pp.301-340.
- Stanbury, R. (2011) *Alcohol and offenders in England and Wales: The English and Welsh Perspective*, Ministry of Justice: National Offender Management Service
<http://www.healthscotland.com/uploads/documents/15169-Robert%20StanburyThe%20English%20&%20WelshPerspective.pdf> (accessed 23/01/11)
- Steffensmeier, D. & E.Allan (1996) Gender and Crime: Towards a Gendered Theory of Female Offending, *Annual Review of Sociology*, Volume 22, pp.459-487.
- Taylor, B., Brownstein H.H, Parry C., Pluddemann A., Makkai T., Bennett T. & K.Holloway (2003) Monitoring the use of illicit drugs in four countries through the International Arrestee Drug Abuse Monitoring (I-ADAM) Program, *Criminal Justice*, 3 (3): 269-286.
- The Probation Service (2010) *Probation Service: Annual Report 2010*.
- United Kingdom Drug Policy Commission (2008) *Reducing Drug Use, Reducing Reoffending: Are programmes for problem drug-using offenders in the UK supported by the evidence?* London: The UK Drug Policy Commission.
- United Nations Office on Drugs and Crime (2010) *World Drug Report 2010*, United Nations: New York.
[http://www.fawcettsociety.org.uk/documents/Provision%20for%20women%20offenders%20in%20the%20community\(1\).pdf](http://www.fawcettsociety.org.uk/documents/Provision%20for%20women%20offenders%20in%20the%20community(1).pdf) (accessed 16/11/11)

APPENDIX 1

Probation Service Drugs and Alcohol Survey 2011

Please read the guidance notes in advance of completing questionnaire.

Section 1 - Background Details

1.a Offender (Block Capitals)											
1.b Probation Officer											
1.c PWS File No:											
1. d Has the Offender ever misused drugs/alcohol?	Yes			No							

If the offender never misused drugs/alcohol do not proceed further.

Section 2 - Details of Drug Use

(Please tick as many boxes as relevant)

	Drug	Current Use (now)			Previous Use (ever)	
		Weekly	Monthly	Occasional	Previous Use	How long
2.a	Heroin					
2.b	Methadone (not prescribed)					
2.c	Other opiates					
2.d	Crack / Cocaine					
2.e	Cocaine Hydrochloride					
2.f	Misused prescribed drugs					
2.g	Amphetamines					
2.h	Hallucinogens					
2.i	Ecstasy					
2.j	Cannabis					
2.k	Steroids					
2.l	Headshop Products					
2.m	Alcohol Misuse					
2.n	Other:					

Section 3 - Drug Treatment

3. a Has Offender attended for Drug Treatment?	Currently (Y/N)		In The Past (Y/N)	
---	-----------------	--	-------------------	--

3. b What is / was the nature of the Treatment Programme?

(Please tick as many boxes as relevant)

Residential	Currently (Y/N)		In The Past (Y/N)	
Methadone Maintenance	Currently (Y/N)		In The Past (Y/N)	
Counselling	Currently (Y/N)		In The Past (Y/N)	
Narcotics Anonymous (NA)	Currently (Y/N)		In The Past (Y/N)	
Other (please specify)	Currently (Y/N)		In The Past (Y/N)	

3. c Is Offender currently undertaking Urinalysis? Yes No

3. d What is the outcome of the most recent Treatment Programme?

Abstinence		Stabilisation		Relapse	
------------	--	---------------	--	---------	--

Section 4 - Alcohol and Alcohol Treatment

4. a Is / Has alcohol use been problematic?	Currently (Y/N)		In The Past (Y/N)	
4. b Is / Has Offender been on an Alcohol Treatment Programme?	Currently (Y/N)		In The Past (Y/N)	
4. c If Yes, what type of Treatment Programme?	Yes (Residential) <input type="checkbox"/>	Yes (Community) <input type="checkbox"/>	Self Help (AA) <input type="checkbox"/>	
4. d What is the outcome of the most recent Treatment Programme?	Abstinence <input type="checkbox"/>	Controlled Drinking <input type="checkbox"/>	Relapse <input type="checkbox"/>	

Section 5 - Link To Offence

5.a In your professional judgment, did the drug misuse lead directly to the current offence? (Y/N)?	
5.b In your professional judgment, did the alcohol misuse lead directly to the current offence? (Y/N)?	

Other comments relevant to the above

Survey of Drug/Alcohol Misuse on Probation Service Adult Caseloads in the Community as at 7am on Friday 1st April 2011

Information

1. Context of the survey:

The link between drug/alcohol misuse and crime is long established and the complexities of this link continue to be discussed extensively in the academic research and practice literature.

We know from practice and previous surveys that a significant number of offenders referred to the Probation Service have drug and alcohol problems. Strategies to address ongoing drug/alcohol misuse are central to case management plans to reduce the risk of re-offending.

Last year the Probation Service launched its revised policy on “Working with Substance Misusers” which is part of a wider criminal justice response to drug misuse as outlined in the National Drugs Strategy 2009 – 2016.

2. Aim of this survey:

The primary aim is to undertake a snapshot survey of adult caseloads in the community **on the 1st April 2011** to determine:

The number of offenders on probation supervision who misuse drugs and alcohol

- the frequency of that misuse
- the nature of the substances misused by offenders
- the level and nature of engagement with drug treatment services
- the link if any to offending behaviour

3. Purpose of the survey:

The data obtained from this survey will be used to inform and enhance service delivery including training and development in key competencies, management of resources, partnership and interagency approaches and the identification of further areas for follow up research.

4. Categories of offenders to be included:

The survey will include all offenders subject to Probation **Supervision** at 7am on 1st April 2011

- Probation Orders,
- all forms of Deferred Supervision,
- Suspended Sentence Supervision Orders
- Post Release Supervision Orders
- Supervised Temporary Release
- Supervision of Life Sentence Prisoners.

Please note that referrals for reports, community service and persons under 18 years should not be included in this survey.

Information to be completed:

The data is to be collected from the relevant categories in your caseload **as it stands at 7.00am on Friday the 1st April 2011**. Staff are requested to complete the survey using the attached forms.

The forms are

1. **Guidance Notes:** These must be read carefully in advance of completion of the survey and consulted as appropriate.
2. **A survey questionnaire** which must be completed for each supervision client on your caseload. For clients who have no history of drug or alcohol misuse **only section 1 of the form needs to be completed.**

Submission of returns:

If possible, work on the survey should commence on Friday the 1st April or as near as possible to that date. **All paper returns must be made to Senior Probation Officers, by the close of business on Friday the 15th April 2011, to Regional Managers by Monday 18th April 2011 and to the designated Executive Officer in the Region by Tuesday 19th April 2011.**

In the interests of accuracy and consistency please remember that the data collected must reflect your caseload at **7.00am on 1st April 2011**.

Senior Probation Officers must check to ensure that the number of forms returned by each team member accurately reflects the number of cases under supervision.

Outcomes:

The information will be analysed with CTS data and reports will be available in summer 2011.

The areas which we will be able to report on include the following:

- The overall number of offenders on Probation Supervision who are involved in drug/alcohol misuse
- The geographical distribution of that group.
- Profiles of age and gender
- Patterns in relation to frequency of misuse and polydrug use
- Identification of range of preferred treatment options
- Treatment outcomes
- Numbers undertaking urinalysis
- Link between drug/alcohol misuse and offending.

Your assistance and co-operation in completing this survey is critical in enabling the Service to develop a more informed, targeted and effective approach to service delivery for this important group.

Thank you for your co-operation in completing this survey.

March 2011

APPENDIX 3

Survey of Drug/Alcohol Misuse on Probation Service Adult Caseloads in the Community

(1st April 2011)

Guidance Notes

- Survey forms should be completed on all adult offenders on probation supervision in the community. Probation supervision includes all forms of deferred supervision, suspended sentence supervision orders, post release supervision orders, supervised temporary release and life sentence prisoners.
- A survey form should be completed on **each** offender on your supervision caseload as outlined above. **Only section 1** needs to be completed if there is no history of drug or alcohol misuse.
- Completion should be on the basis of existing knowledge / file content on offenders and does **not** require additional interviews.
- Survey forms will be processed by the Service and analysed with CTS information to provide a comprehensive report.
- All individual identifying data will be anonymised in the course of the study and in the completion of the report.
- Please follow the guidelines below in relation to all responses based on the caseload at **7.00am on the 1st April 2011**.
- Any queries should be sent to survey@probation.ie

Section 1

1 (a). Use block capitals.

1 (b). Ensure file number is entered exactly as it is recorded on CTS. Include letters, numbers, symbols and bars.

Section 2

2. Tick all boxes that are relevant to provide as complete a picture as possible of the levels and types of drugs used.

Information for this section is based on your professional judgment and does not require access to urinalysis although, if available, it may assist in responses.

2(a). Heroin falls within the “Opiate” category of drugs. It is commonly injected but can be smoked or snorted. Often referred to as Smack.

2(b). Methadone or Physeptone also belongs in the Opiate family. It is prescribed in the treatment and management of heroin use. This question however refers to the illegal use of Methadone or Physeptone from the “black market”.

2(c). Include Morphine, Dicanol, Morphine Sulphate, Pethedine and Codeine.

2(d). Crack Cocaine (Rock) is cocaine powder that has been treated with either ammonia or sodium bicarbonate (baking soda) and heated to remove the salt (hydrochloride). It is a smokable form of cocaine.

2(e). Cocaine Hydrochloride is from the “Stimulant” category and refers to the cocaine powder which is generally used nasally or intravenously but can also be smoked.

2(f). Benzodiazepines are psychoactive drugs and prescribed sedatives. Also known as Roche on the street. This group also includes Librium, Valium, Mogadon, Prozac and other often prescribed sedatives and anti-depressant medications.

2(g). Amphetamines are preparations belonging to the stimulant family. Often referred to as ‘Uppers’.

2(h). Hallucinogens include LSD (acid), magic mushrooms and solvents.

2(i). Ecstasy, often referred to as E, is a stimulant.

2(j). Include Marijuana, Grass and Hash here.

Section 3

3(a). The “past” refers to the last 12 months or part of.

3(b). Tick as many boxes as are relevant to provide a more informed picture of the pattern of treatment. Again the “past” refers to the last 12 months or part of.

3(c). This only relates to urinalysis screening which is in place on the 1st April 2011.

3(d). Abstinence: in your professional judgement the offender is not engaged in any drug misuse and has not done so for a period of 3 months or longer.

Stabilisation: in your professional judgement the offender has been functioning adequately with the support of identified medical treatment/s for a period of 3 months or longer. (This may include occasional lapses)

Relapse: This is not a “lapse” but a relapse which relates to the return to regular use of drugs and related impaired functioning.

Section 4

4(a). The “past” refers to the last 12 months.

4(d). Abstinence: In your professional judgement the offender is not engaged in any alcohol misuse and has not done so for a period of 3 months or longer.

Controlled drinking: Mechanisms in place for the past 3 months to monitor and review drinking

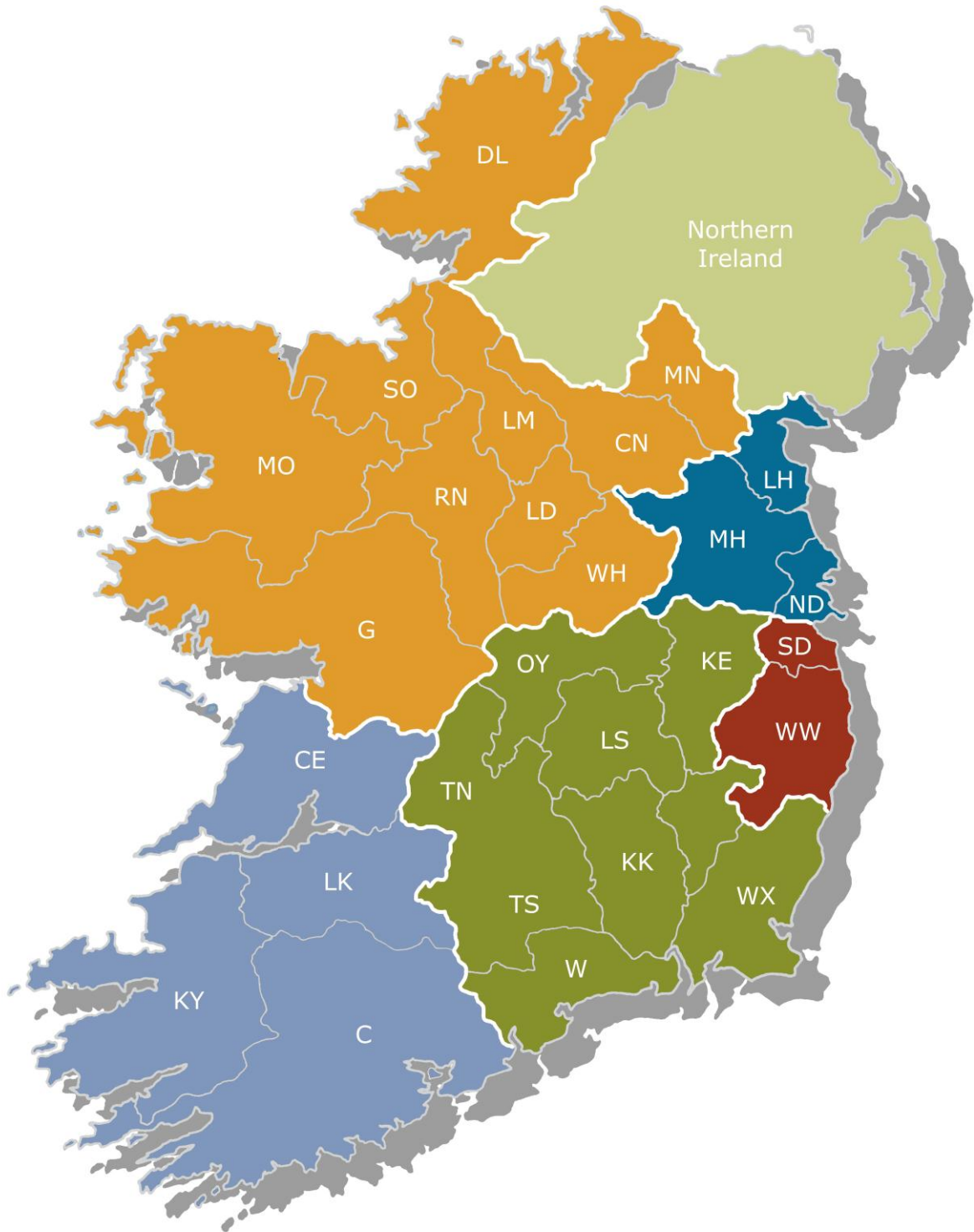
Relapse: This is not a “lapse” but a relapse which relates to the return to the regular use of alcohol and related impaired functioning.

Section 5

Comments: The purpose of this box is to provide an opportunity to add to or provide clarification in relation to any areas covered in the above sections.

March 2011

APPENDIX 4



- South West
- West, North West & Westmeath
- North Dublin & North East
- South Dublin & Wicklow
- Midlands & South East

Teach áth Luimnigh, Baile Sheáin, An Uaimh, Contae na Mí
Head Office, Athlumney House, Johnstown, Navan, Co. Meath
Tel: +353-(0)46 - 9090900 Fax: +353-(0)46-9090992

www.probation.ie