

Community Alcohol

RESOURCE MANUAL



make the change
An Alcohol Reduction Resource

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Foreword

I am very pleased to be able to contribute a few words of welcome to this resource manual aimed at offering practical support to individuals considering making a change to their drinking behaviour and to those providing support to the individual within their family or community.

Over the years, as Addiction Services have developed and National Substance Misuse strategies have been produced, the issue of alcohol related problems has sometimes been bypassed. In fact, it was only in the most recent strategy 'Reducing Harm, Supporting Recovery: A health-led response to drug and alcohol use in Ireland 2017-2025' that alcohol was explicitly mentioned in the title of the National Strategy. We are aware however, of the significant health related consequences associated with problematic drinking for the individual and by extension for their family and for their community. Treatment interventions have often been tailored towards specific drugs and this is

why the Community Alcohol Detoxification Project is so important as it offers a specific pathway for treatment provision to those individuals with alcohol problems.

The Community Alcohol Detoxification Project provides an opportunity for the General Practitioner to engage with an individual in terms of assessment and support, in some cases this requires medical detoxification, in the knowledge that there are supports available in the community for the individual throughout their treatment journey. The links between the GP, key worker and the community are essential in optimising the best outcome for the individual and their family. Each person has their unique set of needs and issues and there is an acknowledgement of this in the approach outlined in the manual. No one person or service is providing care in isolation within this model.

The manual will act as a resource to individuals, families and support services. Importantly, there is the facility to provide feedback to the project on aspects of the

manual thereby making it a 'live' document.

Credit is due to the Project Management Group of the Community Alcohol Detoxification Project and the four Task Forces, Ballyfermot, Canal Communities, Dublin 12 and South Inner City. The range of other stakeholders outlined in the manual is a testament to the broad consultation and buy in that the project obtained throughout the development of the manual. Finally, congratulations to Nicola Perry, service manager for Community Response who guided the project expertly to this final document.

I wish the best of luck to this resource and it will be important to monitor, evaluate and report on progress in the years ahead.



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Executive Summary

The Community Alcohol Detox Project is a strategic Drug and Alcohol Task Force project designed to improve the health and well-being of people who have alcohol dependence or are engaged in harmful drinking. The four Local Drug and Alcohol Task Force areas covered by the project are: Ballyfermot, Canal Communities, Dublin 12, and the South Inner City. The manual forms part of the Community Alcohol Detox Framework and is a support document to help people to make changes to reduce their alcohol use and prepare for alcohol detox or treatment programmes.

The Alcohol Reduction Resource Manual has been designed to offer psychosocial, informational support, options, and practical materials to anyone who would like to consider making a change. The manual can be used by people seeking help to make changes to their own drinking behaviour or can be used by people providing support as well as family members and the wider community.

This summary has two purposes:

1. To provide a brief overview of the Alcohol Reduction Resource Manual for the reader.
2. Can be produced as a standalone sheet which can be printed separately from the main document for wider distribution.

We welcome the promotion of this piece of work by displaying this summary in projects and other community based settings as a promotional and information document for the community.

We view the individual and their journey at the centre and therefore have designed all sections to be accessible and useful to individuals looking to address their own alcohol use. Because Chapter Eight explores how drinking can impact the family and parenting, it can be used by family members and carers to expand their own understanding. For members of the wider community looking for general information, we recommend you go to Chapter Four which describes the community alcohol detox process. Project workers who are supporting individuals or facilitating groups would benefit from reading all the chapters. At the end of each chapter are workshop questions which can be used to aid group work or reflection for service users.

Overview of chapters

Chapter One

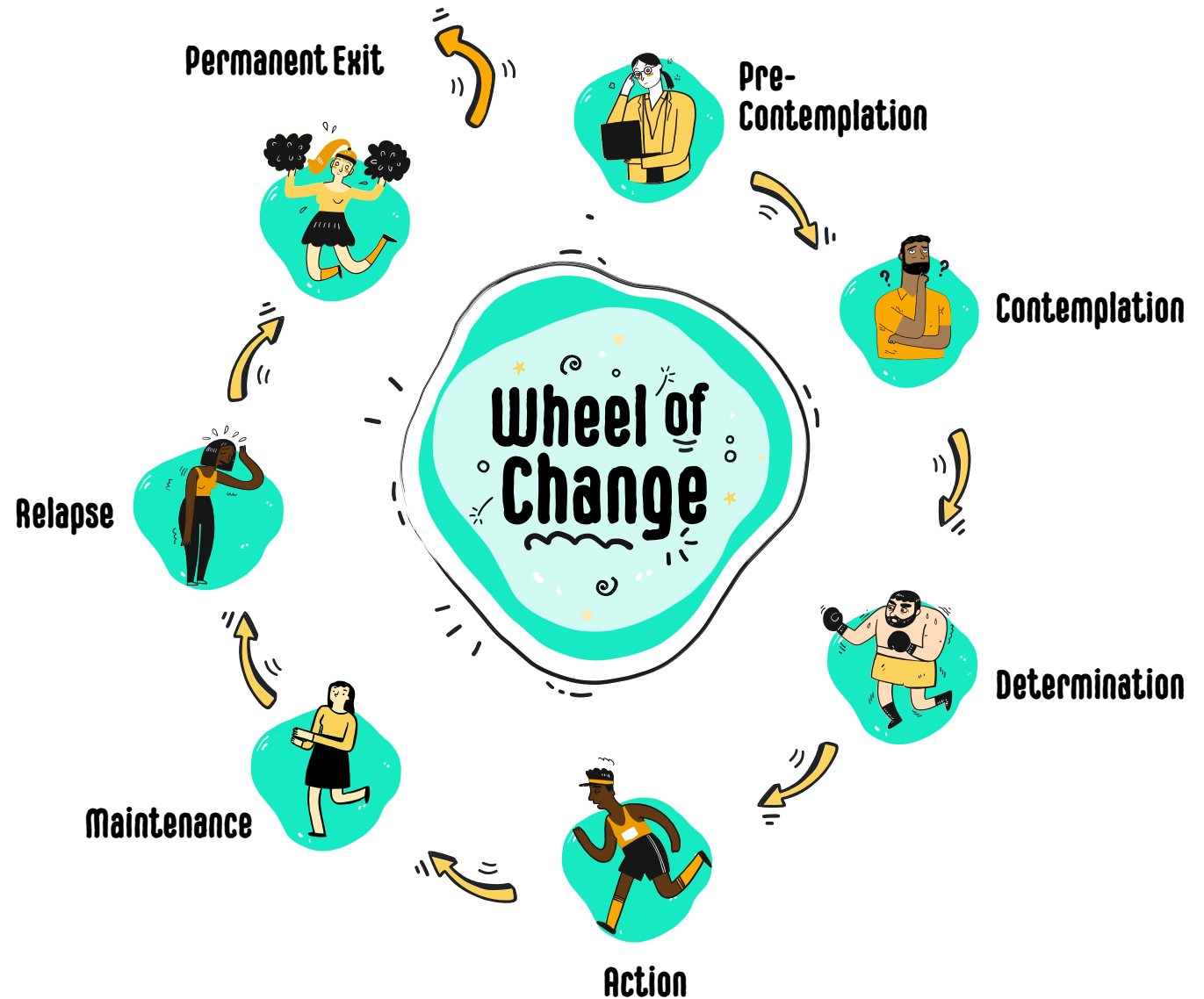
We introduce drink diaries and an audit assessment tool to help you figure out to what extent your alcohol use may be affecting you.

Chapter Two

We have provided information on the Wheel of Change model to inform people how making a change works.

Wheel Of Change Diagram: ¹

1. Reference: <https://oxfordtreatment.com/addiction-treatment/motivational-interviewing/stages-of-change/>



Chapter Three

Here we provide a decisional balance sheet which is based on the motivational interviewing model for helping people make changes in their lives. This chapter offers some practical self-help guidance for individuals.

Chapter Four

In this chapter we break down the community alcohol detox process and what it involves. We highlight the importance of engaging with your GP and also linking in with a keyworker to support you on your journey.

Chapter Five

Here we explore the medical aspect of detox. We encourage everyone to discuss medical detox with their GP where they can consider their own unique health needs. In this chapter we explore some of the benefits and the risks to medical detox.

Chapter Six

Here we look at psychosocial support, what it is and what may be helpful to you during the process of making changes to your alcohol use.

Chapter Seven

In this chapter we highlight the importance of aftercare and relapse prevention. We explore the types of activities and supports which will help you sustain the changes you have made. We emphasise that while making plans for relapse prevention does not mean relapse is inevitable, as highlighted in the wheel of change, it is part of the change process.

Chapter Eight

This chapter provides guidance and information for family and friends. A friend or family member of a person with a drinking problem, may struggle to know what to do and how best to provide

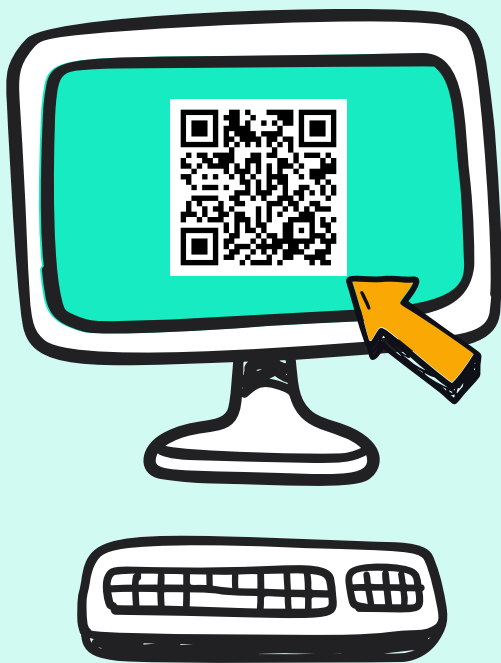
support. Here we provide some simple dos and don'ts. We also give some information on the impact of alcohol use in the family on children and how parents can support their children.

Annexes

Input and observations on this manual is a vital component to this project, and as such we have provided a feedback form in the document for anyone who has used the manual to fill out and submit to us. This will help us with any amendments or review of the document.

The final section provides a directory of services and supports. LDATFs fund a wide range of services. Readers are encouraged to contact services

Visit our **Make the Change**
service directory here!



make the change
An Alcohol Reduction Resource

Useful Resources:

www2.hse.ie/alcohol

www.drugs.ie

www.ballyfermotldatf.ie

www.dublin12ldatf.ie

www.ccldatf.ie

“ During medical detox, under the supervision of a GP, you will stop drinking alcohol and instead, receive medication to help you manage your withdrawal symptoms”

“ Psychosocial support is the support you receive to protect or promote your mental health and wellbeing. This support is provided by the community organisation and the key worker”

“ Parents are the primary caregivers of their children. Any actions which disempower or blame parents can aggravate the situation and potentially isolate both parents and children from the support they need”

“ Community alcohol detoxification is an organised process to support people to reduce their use of alcohol or make changes in their drinking patterns”

“ There are a variety of free confidential services in the community that offer support to anyone looking to address their alcohol use in a non-residential setting. These services offer supports such as key-working, day programmes, counselling supports, family supports and a variety of other services. They initially offer an assessment to determine individual needs and advise the on the best plan of action depending on individual goals and needs”



This manual has been designed to offer emotional, informational support, options, and practical materials to anyone who would like to consider making a change. The manual can be used by people seeking help to make changes to their drinking behaviour or can be used by people providing support to family members and carers.

The Community Alcohol Detox Project adheres to the principles of human rights and respects the dignity, confidentiality and privacy of the person who is seeking help. The work of the Community Alcohol Detox Project promotes inclusivity, and we will assist people and services with access to information in their language and if you need more information, please contact info@communityresponse.ie

The Alcohol Reduction Manual

The manual is a guide designed as part of the Community Alcohol Detox Project to work with people who want to make a change, look at their options and identify a range of supports. The CADP views the person looking to address their alcohol use as the end user of this manual, therefore feedback and input from people using treatment services are embedded within the manual, the resources and information.

The manual is an empathetic and non-judgmental guidance document that takes into consideration the stigma and discrimination that can often be associated with alcohol misuse. This manual is respectful of working with cultural differences and different languages. **There is a resource for translation on the website www.makethechange.ie for people who would like information and support in their language.**



Introduction

The Community Alcohol Detox Project is a strategic Drug and Alcohol Task Force project designed to improve the health and well-being of people who have alcohol dependence or are engaged in harmful drinking. The manual forms part of the Community Alcohol Detox Framework and is a support document to help people to make changes to reduce their alcohol use and prepare for alcohol detox or treatment programs.

This project is funded by the Department of Health and is governed under the HSE Addiction Service CHO 7. It is committed to the principles of Sláintecare and The National Standards for Safer Better Health Care. The project is a response to implementing the National Drug Strategy Reducing Harm, Supporting Recovery and is committed to an integrated model of care in line with The National Drug Rehabilitation Framework. This CADP approach is unique in that it does not only focus on current

people using HSE-funded addiction services, but it will also include people who have not been able to access services or do not wish to access services but may require information on different supports.

The Community Alcohol Detox Project covers four Local Drug and Alcohol Task Force areas: Ballyfermot, Canal Communities, Dublin 12, and the South Inner City.

Acknowledgements

The Project Management Group of the CADP would like to thank everyone who contributed to the Project. The Project was developed through consultation with service users, service providers, project staff and management, Task Force groups, GPs, Primary Care Centres, hospital staff, The HSE Addiction service, and a range of other stakeholders. The Project Management Group would also like to offer a particular thanks to Lena Kattendick.

Glossary and useful terms to know:

AA	Alcoholics Anonymous
CADP	Community Alcohol Detox Project
CADF	Community Alcohol Detox Framework
CBT	Cognitive Behavioural Therapy
DTF	Drugs Task Forces
DATF	Drug and Alcohol Task Forces
DOH	Department of Health
GP	General Practitioner
LDATF	Local Drug and Alcohol Task Force
LDTF	Local Drugs Task Force
LGBTI	Lesbian, Gay, Bisexual, Transgender and Intersex

In the National Standards for Safer Better Health Care the term “service user” is used throughout the standards

- People who use healthcare services
- Their parents, guardians or carers
- Their nominated advocates
- Potential users of healthcare services

Peer supports: The main focus of peer support groups is to provide a safe space where individuals with shared experience can support and empower each other. Examples of peer support groups include: LifeRing, SMART Recovery, AA, and NA.

Community Organisations /services that provide addiction support in the community: There are a variety of free confidential services in the community that offer support to anyone looking to address their alcohol use in a non-residential setting. These services offer supports such as key-working, day programmes, counselling supports, family supports and a variety of other services. They initially offer an assessment to determine individual needs

and advise them on the best plan of action depending on individual goals and needs.

Key-working: A key worker is a point of contact with a particular organisation. They help individuals identify their goals to reduce or cease alcohol consumption. The key worker will develop a care plan with the individual. This is a treatment plan that outlines the support and care required to help them with their recovery. The key worker will advocate on their behalf and will liaise with other services and make referrals with consent.

Day Programmes: Groups and day programmes offer a chance for people with similar experiences to help and inspire each other. These programmes are generally provided by community organisations and are aimed at people who are actively drinking/using substances and would like support in reducing or ceasing their consumption in a community setting. There are also day programmes aimed at individuals who are alcohol-free and in recovery.

Medically Supervised Community Alcohol

Detox: If you have been drinking large amounts of alcohol for a long period, you may need to engage in a community detoxification process. This is where an individual is prescribed medication that helps them to manage withdrawal symptoms as they cut down their drinking through medical supervision of a GP with support from a community organisation through key working or group support.

Counselling: Counselling and psychotherapy can sometimes be an effective method to overcome the challenges of alcohol misuse and alcohol dependency. The focus on treatment is generally aimed at supporting the individual to overcome urges and learn coping techniques and skills to deal with their addiction. It offers a space whereby the individual can safely explore the source of the behaviour and supports the individual to reach a level of self-awareness that assists them in recovery. Different services have different criteria for accessing counselling support, so we recommend you contact them directly for more information.

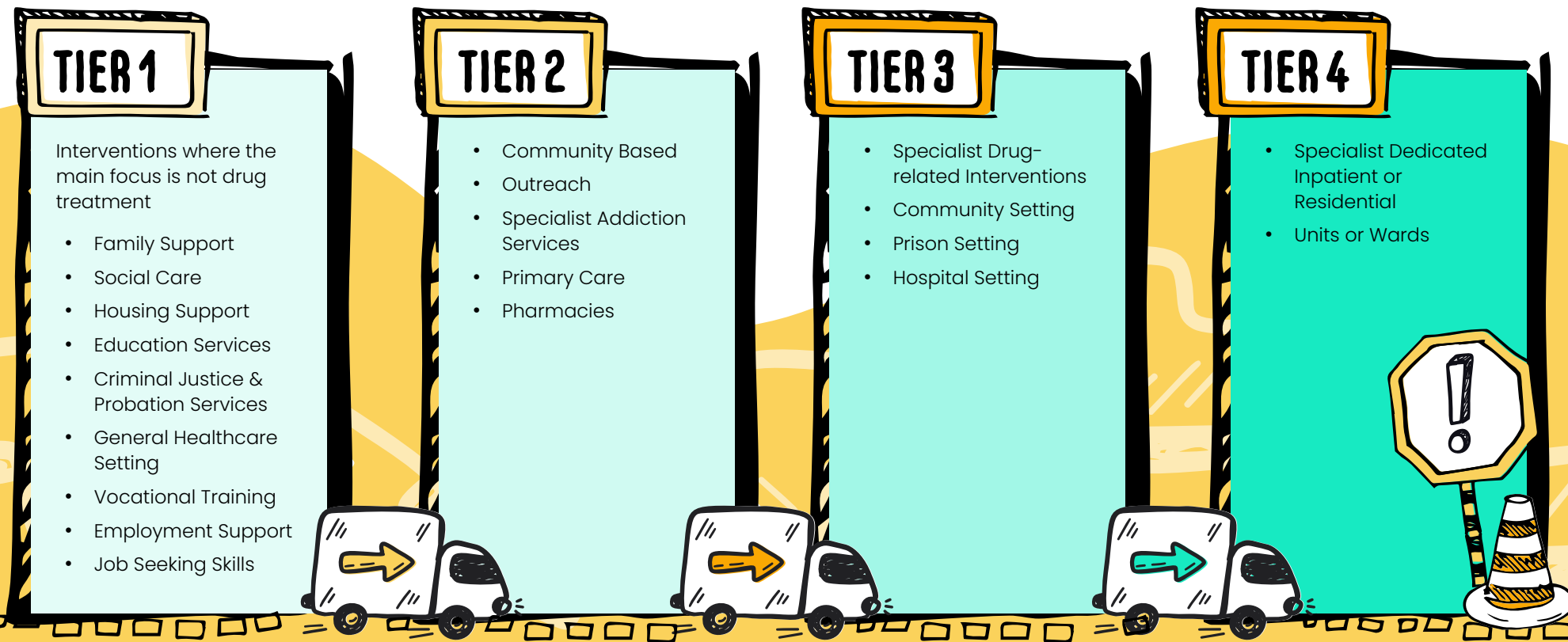
Counselling services may vary from being free to low cost sliding scale depending on the service.

Residential/Inpatient Detoxification: There are a range of both public and private residential treatment services around the country. Residential Treatment involves staying in a treatment facility for a period of time. Some individuals may require in-patient detoxification where they have medical supervision. We recommend if you are looking for a residential treatment contact one of the community organisations who will be able to advise you on accessing residential supports and support you with the referral process.

Psychosocial supports: The support you receive to protect or promote your mental health and wellbeing.

For more information on where to access these supports please visit www.makethechange.ie

Rehabilitation Services/Interventions as seen within the Four Tier Model:²



2. National Drug Rehabilitation Implementation Committee (2010) recognizes that no one agency has the range of competencies, expertise and resources to meet all the needs of a service user. The Four Tier Model acts as an overarching framework for the provision of rehabilitation pathways. When offering drug and alcohol treatment, it is essential that there is an integrated care pathway model, that if a service users' needs cannot be met by one service, the service would ensure they are referred to another appropriate service and work together as part of a care team.

How to use this Manual

This manual is aimed at people who are seeking support from services but can also be used by their families, project workers in *community organisations* or someone who is providing support.

Each chapter is designed to be used for information purposes, offering guidance or can be used as a framework for a workshop or self-reflection activity or a one-to-one piece of key working support. Workshop discussion themes are provided within each chapter for anyone operating a service to refer to as sample workshop questions to use as they see fit in their work.

The Alcohol Resource Manual is not intended to be a clinical guide.

Any person wishing to reduce their alcohol use is strongly advised to take medical advice and speak first with their GP or another health professional.

If you wish to reduce your use of alcohol, or if you are a professional working to support people who wish to reduce their use of alcohol, you will be guided towards workshop discussion questions in the chapters of this manual.

Please note:

Not everyone who wants to reduce their alcohol use will require a medical detox. If recommended, a community alcohol detoxification should be delivered under the supervision of a GP. The GP can work with you and in partnership with a key worker from a community-based drug and alcohol treatment service, or family support service. *A community alcohol reduction programme will be delivered by local addiction services – and will be different for everyone.*

Please refer to the directory of services to establish who is offering support. Depending on your needs, support may involve a combination of key working, day programmes and counselling.

We have provided a feedback form at the end of the manual, which anyone using this document is encouraged to complete and return to:

info@communityresponse.ie



Chapter One

How do I assess if my
alcohol use is problematic?

How do I know if my alcohol use is problematic?

Alcohol dependence is when your body requires alcohol to function normally, and you experience unpleasant withdrawal symptoms when you are not drinking. Stopping alcohol consumption suddenly can be dangerous if you are alcohol dependent.

Alcohol dependence can be both physical and psychological. Not everyone who is alcohol dependent will require a medical detox, but those who need alcohol to function in their daily lives may require medication to reduce their alcohol intake safely.

Warning signs or drinking patterns

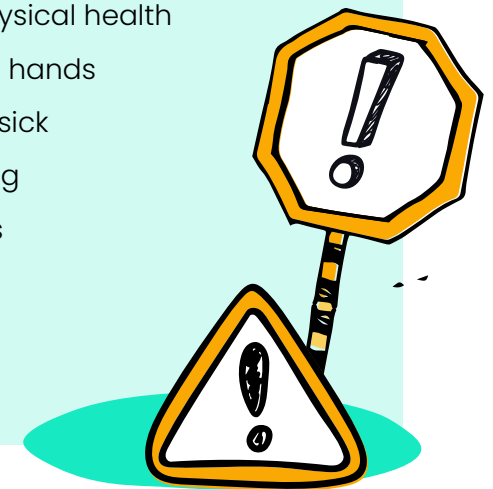
Things to be aware of in your drinking patterns

- Strong desire or even a compulsion to drink alcohol
- Difficulty in controlling drinking
- Experience withdrawal symptoms when drinking is reduced or stopped
- Need to increase the amount of alcohol to achieve the same effects
- Neglect alternative interests or pleasures because of drinking
- Persist with high levels of drinking despite being aware of harmful consequences

Warning signs or health

Things to be aware of when it comes to your health and alcohol

- Memory loss
- Anxiety and panic attacks
- Depression
- Hallucinations
- Self-harming
- Poor physical health
- Shaking hands
- Feeling sick
- Sweating
- Seizures



Please note: High-risk drinking can also lead to social, financial, professional, legal, and domestic problems

1.1 What is the spectrum of alcohol use?

There is a spectrum of alcohol use:

- Highest Risk
- High Risk
- Hazardous Drinking
- Low Risk

It is important to look at your drinking – and think about where you are on that spectrum.

Workshop Discussion Questions

Before you take the World Health Organisation Alcohol Audit, ask yourself these questions:

What is risky drinking?

Do you think your drinking is low risk, hazardous or high risk?

Do you think your level of drinking is putting your health at risk?



1.2 How do I know how much I am drinking?

One of the best ways to honestly review how much you are drinking is to complete a drink diary. An example drink diary is included below:

Day	Drink type	How much?	Where did I drink – and with who?	Cost	Why did I drink?	Thoughts, feelings and consequences afterwards (good and bad).
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

1.3 Alcohol Audit Questionnaire

For the purposes of the WHO Audit Questionnaire, one drink (or one unit) is equal to one glass, one can or bottle of beer, one small glass of wine or one pub measure of spirits. A pint would count as two drinks.

Questions	0	1	2	3	4
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2 to 4 times a month	2 to 3 times a week	4 or more times a week
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more
3. How often do you have six or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you failed to do what was normally expected from you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily

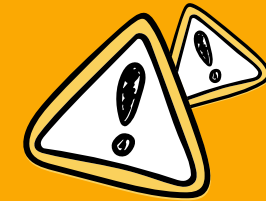
Questions	0	1	2	3	4
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
9. Have you or someone else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year
10. Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, during the last year
Total					

Once you have completed the questionnaire, you need to add up your score. Your score will show whether you are low risk - or whether you're drinking could be hazardous and put you at risk.

1.2.1 What does my score mean

Score	Meaning	Risk
0 – 7	Low Risk	Drinking any alcohol at all brings some risks. Alcohol impairs judgement, control and decision-making. Drinking at this level, however, is not likely to cause serious harm
8 – 15	Hazardous	Hazardous drinking is a widely used term often used to mean the same as 'at risk' drinking. Hazardous drinking brings an increased risk of harm including physical, mental, social, legal and financial problems
16 – 19	High Risk	High-risk drinking will eventually result in harm. There is also a risk of alcohol dependence
Over 20	Highest Risk	Drinking at this level will cause harm and you are likely to be alcohol dependent

1.3 What should I do if I think I am dependent on alcohol?



- Speak to your GP
- Seek help and support from a friend or family member

Contact one of the voluntary and community organisations listed listed in Annex Four, or visit www.askaboutalcohol.ie

Workshop Discussion Questions



Once you have your score from the World Health Organisation Alcohol Audit, answer these questions:

What do you think about your score in the Alcohol Audit? Did it surprise you?

Are you worried about your level of alcohol intake? Why?



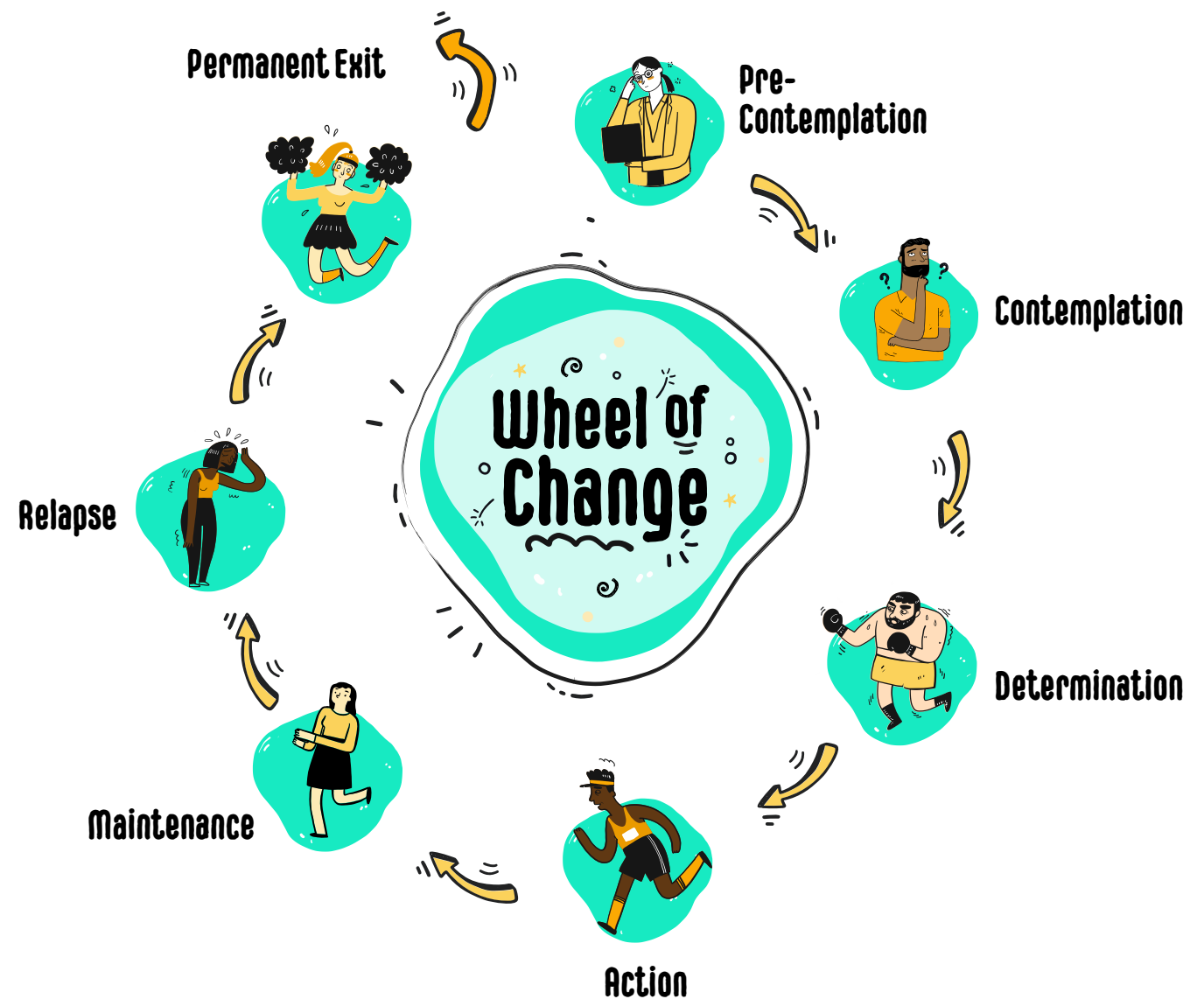
Chapter Two

How do I go about
making changes?

How do I go about making changes?

Everyone who wants to change a pattern of behaviour, be it eating, smoking, gambling, drug use or alcohol use, goes through a number of stages. A helpful way of thinking about this is the 'Wheel of Change'.

3. Reference: <https://oxfordtreatment.com/addiction-treatment/motivational-interviewing/stages-of-change/>



Wheel Of Change Diagram: ³

There are five main stages in the Wheel of Change. In the model above there is a sixth stage, Relapse. Although you hope you will not relapse, relapse is a normal part of the alcohol reduction cycle.

Relapse is included here because there is nothing to be ashamed of if you relapse. It is perfectly normal. Every time you go around the wheel of change, you will learn something about yourself and, hopefully, make a positive difference in your life.

When we make changes to our behaviour, it is very unusual for it to be a single significant event. It is much more likely that change happens as a result of a number of smaller steps.

In the Wheel of Change model, this is seen as moving from being relatively uninterested in change, to thinking about change, to deciding to make the change.

2.1 Stage One: Pre-Contemplation



I am not thinking about changing.

I like what I am doing. It is not a problem.

What can I do to move forward from Stage One?

- Learn about the harm alcohol can do
- Challenge positive attitudes towards drinking
- Find other hobbies and interests

2.2 Stage Two: Contemplation



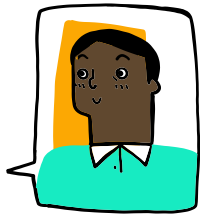
I am thinking about change.

I am considering it. That's all. I am aware of the consequences of my behaviours – but I am not yet sure I want to change.

What can I do to move forward?

- What are my reasons to change?
- What are my fears and concerns if I don't change?
- Believe you can change if you decide to do so
- What is important to you in your life?

2.3 Stage Three: Determination



I have decided to change.

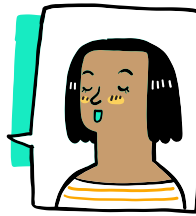
I am getting ready to change. I have made

a committed decision and I want to succeed. Now I need to work out how I am going to do it. Making a plan is critical to my success.

What can I do to move forward?

- What is the best way to make this change?
- Make a plan
- What support do I need?

2.4 Stage Four: Action



I am making some changes.

I am using short-term rewards to keep me

motivated. My family and friends and others are there to support me. This might take 3 to 6 months of hard work.

What can I do to move forward?

- Take action
- Put your plan into action
- Think about how to avoid relapse

2.5 Stage Five: Maintenance



I have made the change.

I have achieved my goal. I need to work hard to keep the change going.

What can I do to keep the change going?

- Find other hobbies and interests
- Find ways to relax and be sociable that do not involve alcohol
- Make changes to my lifestyle
- Keep thinking about ways to avoid relapse
- Do I need to change some of my friendship groups?

2.6 Relapse



If I slip back, I will learn from what has happened.

I will go back to an earlier stage in the Wheel of Change. Can I make a plan, so I do not relapse again in the same situation?

What can I do to move forward?

- Don't be too hard on yourself
- Relapse is perfectly normal
- Learn from what happened
- Get back on track and make a new plan
- Talk to people who have made the change permanent
- Get peer support
- Find help and support

2.7 Permanent Exit



I have made the change permanent.

Habit is a habit, and not to be flung out by any man, but coaxed downstairs a step at a time"

Mark Twain

It does not matter how slowly you go as long as you do not stop"

Confucius

Our greatest glory is not in never failing, but in rising up every time we fail"

Ralph Waldo Emerson

Workshop Discussion Questions

Where do you think you are on the Wheel of Change?

Why do you think this?

What is the next step?





Chapter Three

How do I go about deciding
to change my alcohol use?

How do I go about deciding to change my alcohol use?

The decision to change has to be made by you. People can only successfully stop or cut down their drinking if they have decided to do so.

Support from your GP, the community organisation and the key worker can only be an aid to following through on this critical decision by you.

For a community alcohol reduction programme to succeed, therefore, you need to have decided to change - and you need to be very clear about what your goal is. And the goal is not the same for everyone.

Many people find it helpful to write down the benefits and drawbacks of a decision before they decide to go ahead.



Continue my present drinking pattern

What are the good things?

What are the bad things?



Change my drinking pattern - and reduce or stop my alcohol intake

What are the good things?

What are the bad things?



Self-Help Tips for Alcohol Reduction³

Please note – these self-help tips could be helpful for anyone – but they are likely to be particularly useful for moderate drinkers and people at the Low-Risk end of the alcohol spectrum

- Establish some personal drinking rules for yourself and keep to them – When, where and how will you drink alcohol?
- Pace yourself
- Take smaller sips
- Put your glass down between sips
- Change your drink of choice
- Drink for the taste
- If you drink spirits, dilute them
- Have a soft drink between alcoholic drinks
- Learn to say no to drinks
- Avoid rounds. If in the company of others, buy the first round and then buy your own
- Reward yourself if you achieve your goals
- Make sure your goals are realistic and achievable
- Set yourself a drink limit and count your drinks
- Have a few alcohol-free days each week
- Swap to low alcohol or no alcohol alternatives
- Keep up your water and food intake
- Limit how much alcohol you keep in the house
- Keep attractive non-alcoholic options at home
- Change your 'after-work routine' to something that does not involve alcohol
- Delay your first drink
- Drink only in certain situations – such as with dinner
- When going out, offer to be the 'designated driver'
- Set a budget on how much you will spend on alcohol in a given period
- Meet friends socially in a context that doesn't involve alcohol – for example, the cinema, the beach, a picnic, a coffee shop
- Involve family and friends in your decision

3 (Sources 'Alcohol and You' Is it time for a change?' (2016) www.alcoholandyouni.com Alcohol Think Again Website (Australia) www.alcoholthinkagain.com)

Workshop Discussion Questions

Am I ready to decide to change?

What is my goal?

Is my goal to reduce my alcohol intake – cut down on my drinking?

Is it my goal to abstain for a period of time and then reduce my alcohol intake?

Is my goal to stop drinking completely?





Chapter Four

What does a Community
Alcohol Detox mean?

What does a Community Alcohol Detox mean?

Community alcohol detoxification is an organised process to support people to reduce their use of alcohol or make changes in their drinking patterns.

If a community alcohol detox is recommended for you, you will be prescribed medication under the supervision of a GP to help you manage the withdrawal symptoms.

It is recommended to engage with a key worker if you are accessing a community organisation. They may be in a position to provide support if you want to reduce your alcohol use and need support in your recovery. Please use the directory of services in Annex Four or go to the website www.makethechange.ie for more information on how to access these supports. The community alcohol detox process, therefore, requires the involvement of GPs, community organisations and key workers.

It is important to note that not everyone who is alcohol dependent will require a medical detox. Some people may be able to reduce their alcohol intake with just psychosocial support.

If you are unsure about whether a community alcohol detox is right for you, we recommend you either contact one of the services listed in the Services Directory (Annex Four) or speak to your GP.

Who needs to be involved in a community alcohol detox?

- A motivated service-user
- A prescribing GP who delivers the physical and mental health assessment, medical support and detoxification
- A key worker or health care professional who will prepare the aftercare plan and provide psychosocial support

4.1 What are the four main steps in Community Alcohol Detox?

1. Assessment

The support of a GP is critical to the safe and effective delivery of a community alcohol detox process. The GP will carry out a health assessment. This is a physical and mental assessment to check that you are suitable for a community alcohol detox.

Many of the key medical issues and risks in a community alcohol detox are set out and considered in more detail in Chapter Seven Medical Support.

2. Treatment

Your GP will:

- provide accurate information about what to expect during the detoxification process
- monitor all the medical aspects related

to the community alcohol detox

- assess the severity of withdrawal symptoms
- prescribe any medication such as benzodiazepines

3. Psychosocial Support

Psychosocial support is the support you receive to protect or promote your mental health and wellbeing.

Your psychosocial support will be provided by the community organisation and your key worker who will support you to take care of yourself and your relationship with others.

4. Aftercare

Following any treatment, a recovery and aftercare plan will be drawn up with you.

You may choose to stay with the same organisation for your aftercare or you may choose to engage with a different organisation.

You will continue to be supported by your key worker, the community organisation and your GP for a period of weeks and months following treatment.

The journey towards alcohol reduction and detoxification is often not a straightforward path there are many twists and turns along the way and relapse is a very common occurrence.

4.2 When is Community Alcohol Detox appropriate?

For many people, community-based alcohol detox is a safe and effective option which can be offered as part of an integrated treatment package. It can be particularly appropriate for people with mild to moderate dependence on alcohol.

In many circumstances, community-based alcohol detoxification is an

effective alternative to residential alcohol reduction treatments. As a community-based programme, it is both more readily available and more flexible.

As an alternative to residential treatment, community alcohol detox may help provide support and treatment to greater numbers of parents because childcare is usually not as much a concern when accessing community-based services.

4.3 Community Alcohol Detoxification Referral Pathways

In practice there are two common referral pathways:

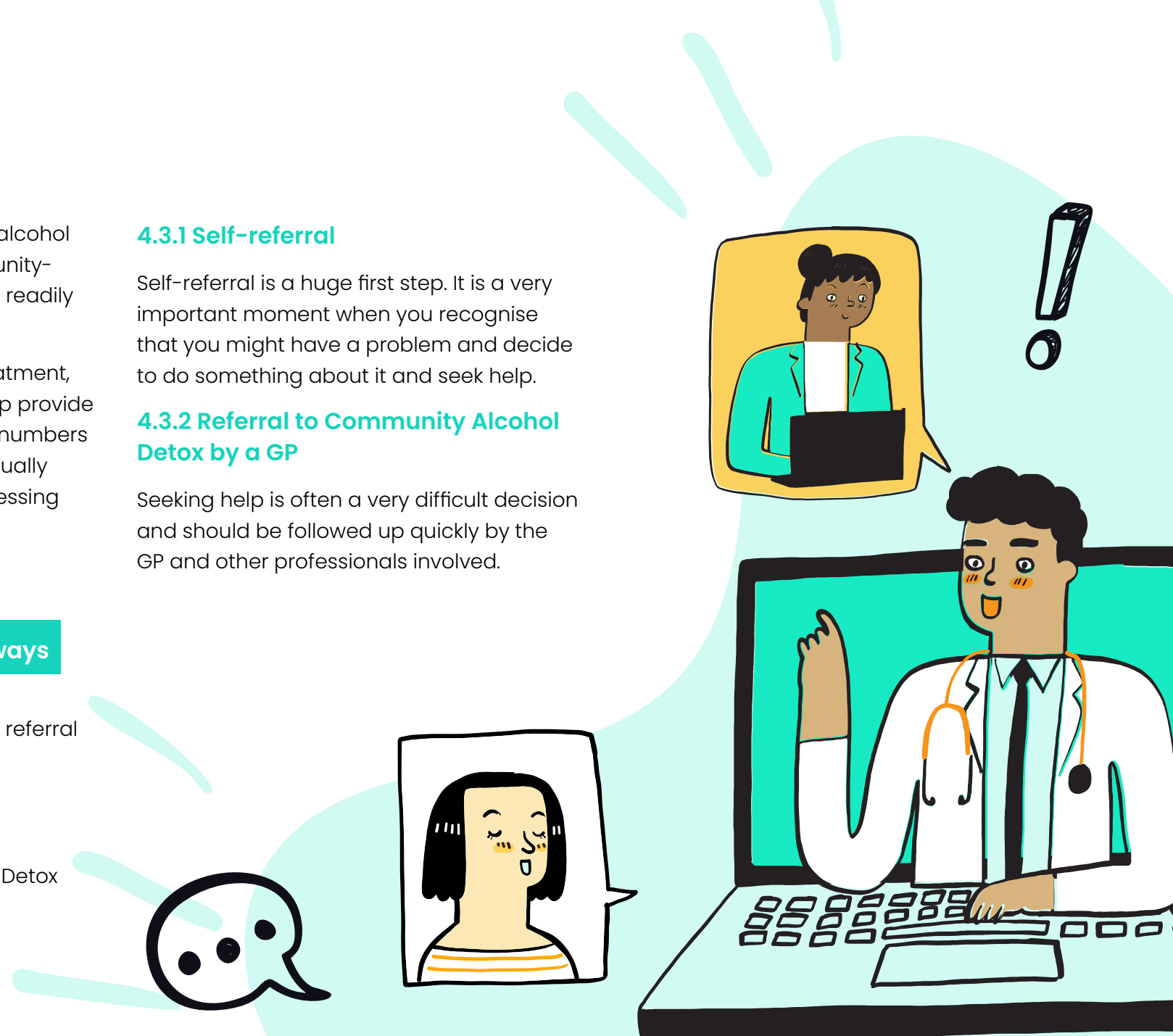
- Self-Referral to a Community Organisation
- Referral to Community Alcohol Detox by a GP

4.3.1 Self-referral

Self-referral is a huge first step. It is a very important moment when you recognise that you might have a problem and decide to do something about it and seek help.

4.3.2 Referral to Community Alcohol Detox by a GP

Seeking help is often a very difficult decision and should be followed up quickly by the GP and other professionals involved.





Chapter Five

Do I need Medical Support?

Do I need Medical Support?

If you completed the Alcohol Audit Questionnaire and your alcohol risk level was hazardous, high risk or highest risk, then there are serious potential medical risks involved in alcohol detox.



IMPORTANT – It is strongly recommended that you speak to your GP before taking any action on significantly reducing your alcohol intake.

5.1 What happens during a medical detox?

Medical detox is the phase when toxins from alcohol will clear the body. The medication helps you to better manage withdrawal symptoms by reducing or eliminating the symptoms with drugs and other treatments.

During medical detox, under the supervision of a GP, you will stop drinking alcohol and instead, receive medication to help you manage your withdrawal symptoms. This phase usually lasts between one and three weeks depending on the severity of the addiction.

The medical detox process usually triggers mild to severe withdrawal symptoms that

begin within six hours after the last drink. These withdrawal symptoms typically continue for several days or weeks and might include:

- Anxiety
- Insomnia
- Tremors or shaking
- Nausea
- Vomiting
- Headaches
- Sweating
- Seizures

For some people delirium tremens is a side effect. This can involve extreme confusion, fever, and tactile, visual, and auditory hallucinations.

5.2 Mental and Physical Reasons why a Community Alcohol Detox may not be for you

Even if you have decided to change and you have decided on your goal, there may still be good medical or physical reasons why a community alcohol detox is not for you.

Your GP will assess your physical and mental health to ensure you are suitable for community alcohol detox.

Examples of mental and physical factors that may mean you are not suitable for a community alcohol detox include:

- Severe mental health problems
- History of seizures or other medical reactions whilst undergoing detox
- Drug use
- Pregnancy

These factors do not automatically exclude you from a community alcohol detox, but you will need to discuss these issues carefully with your GP.

In assessing whether a community alcohol detox is right for you, your GP may also take into consideration other factors such as your living situation, your current relationships and other life events.

If community alcohol detox is not recommended for you, you should discuss alternatives, such as residential treatment, with your key worker, counsellor and with your GP.

5.3 Possible Risks involved in Community Alcohol Detox

It is important to understand that alcohol withdrawal can be dangerous. There are a number of serious potential risks including:

- **Withdrawal.** As noted above, if you have been drinking heavily for a long period, your body may react to the absence of alcohol. If you experience symptoms of withdrawal, you should seek medical help immediately.

- **Depression.** Some people drink because they feel down. Sometimes a person who is reducing their alcohol intake or who is abstaining from alcohol will also feel low or depressed. Depression involves feelings of sadness, loss of interest and low energy. If you are feeling depressed you should speak to someone, a supportive family member or friend, or your key worker. If the feeling of depression persists, you should see your GP.

- **Overdose.** Alcohol used in conjunction with other substances (for example – sedatives such as sleeping tablets or anti-anxiety medication) can lead to a serious risk of fatal overdose. The risk of fatal overdose is actually higher during or after alcohol detoxification. This is one of the reasons why a community alcohol detox should be supervised by your GP – who should advise you of the heightened risks involved.



Chapter Six

What is Psychosocial
Support, and do I need it?

What is Psychosocial Support, and do I need it?

Psychosocial support is the support you receive to protect or promote your mental health and wellbeing. This support is provided by the community organisation and the key worker.

It may be necessary for psychosocial support to be provided to the service user for a lengthy period.

Every person's circumstance will be different – and the psychosocial support provided should be based on the specific needs of the individual service user. Support will be service-user-led but will usually be provided every week for at least six months following the completion of the alcohol detox process.

Weekly care planning and relapse prevention support sessions will be held with the key worker. These will usually focus on:

- Keeping an alcohol diary
- Identifying high-risk situations

- Relapse prevention
- Risk of withdrawal, seizures and overdose
- Care planning

A care plan is a treatment plan agreed upon between the organisation and the service user. It will identify particular areas in a person's life where they need support, for example, housing or mental health or relationship concerns. It will include an action plan and identify the resources required to ensure support needs are met.

A critical aspect of the role of the key worker is to communicate proactively with the GP throughout the community alcohol detoxification process.

The role of the key worker:

- To be your main point of contact with the support organisation
- To support you in reducing or stopping your alcohol consumption
- To support you in identifying and achieving your goals
- To keep you informed and highlight any risks
- To develop an agreed care plan with you. This is the treatment plan that sets out the support and care you will receive to help your recovery
- To help you develop strategies to reduce the risk of relapse
- To advocate on your behalf
- To liaise with other services and make referrals with your consent
- To communicate with your GP, as required.



Chapter Seven

What happens after I have
detoxed or reduced my
alcohol use?

What happens after I have detoxed or reduced my alcohol use?

7.1 What is aftercare?

'Aftercare' refers to the wide range of services, activities and supports that you can access once you have completed your alcohol detox treatment.

It is good practice for you and your key worker to put an aftercare plan in place which might include relapse prevention techniques, as well as more enhanced plans around work, education and reconnection with family or housing issues.

This aftercare plan will be different for everyone, but every plan needs to:

- Be robust enough to navigate the many challenges you may face
- Reflect your strengths

In addition to recognising the value of a good diet, gentle exercise and fresh air, an individual aftercare plan could include:

- going to an art or crafts class
- taking up a sport or physical activity
- joining a walking group
- learning a musical instrument
- learning a language
- meeting certain family members more often
- family counselling
- stress management
- life skills training

7.2 What is relapse?

For many people, relapse is the point at which they are drinking alcohol uncontrollably again, following a period of reduction or abstinence.

7.3 What can I do to prevent relapse?

Effective relapse prevention techniques will also be different for everyone - and will often relate to your triggers. Relapse is part of the change process, but it is not inevitable. Not everyone relapses and it does not have to happen. Relapse prevention is important for care planning and self-help. If a relapse does happen, it should be regarded as an opportunity to learn and not seen as a sign of failure.

Often relapse prevention will focus on developing your skills and ability to cope in challenging situations without needing to reach for alcohol (or another drug).

Please remember that making a plan for relapse does not mean that relapse is going to happen. It is like having an insurance policy against accidents you hope you will never need it, but it is still reassuring to know that it is there.

• **Psychosocial Interventions** which have been used effectively for the prevention of relapse in alcohol dependence include:

- Counselling & Psychotherapy
- Community Employment (CE) Programmes
- Community Reinforcement Approach (CRA)
- Make Every Contact Count (MECC)
- Marital/Family Therapy
- Motivational Interviewing
- SAOR Brief Intervention Training.
- Self-Management and Recovery Training (SMART Recovery)
- Reduce The Use

Please note you should speak to your key worker, counsellor or GP if you would like more information about these interventions.

Workshop Discussion Questions

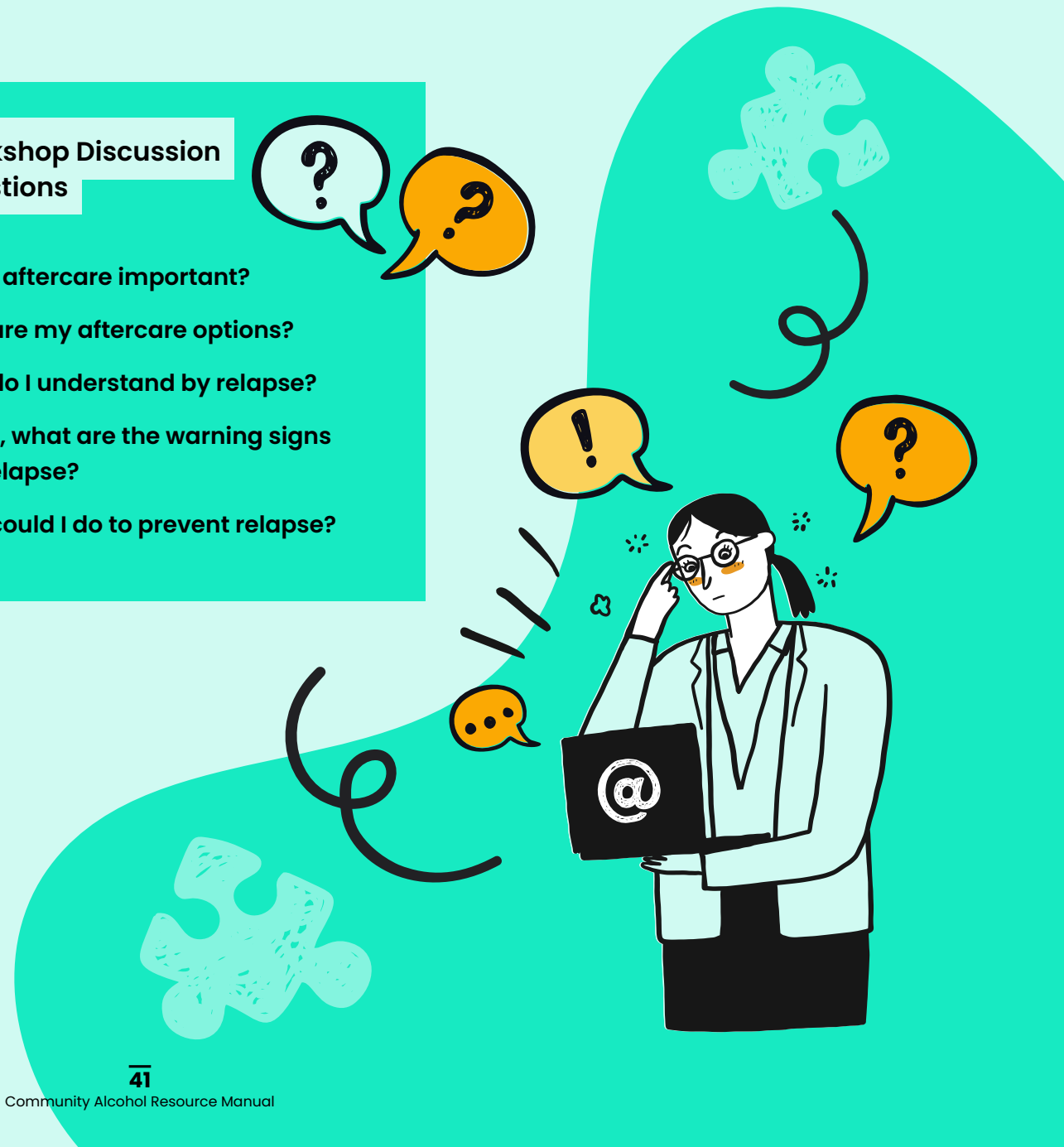
Why is aftercare important?

What are my aftercare options?

What do I understand by relapse?

For me, what are the warning signs for a relapse?

What could I do to prevent relapse?





Chapter Eight

Guidance for friends
and family

Guidance for friends and family⁴

If you are a friend or family member of a person with a drinking problem, you may be struggling to know what to do and how best to provide support.

What to do?

- Learn as much as possible about alcohol dependence
- Improve communication with the person you are supporting
- Reinforce, by encouragement or other rewards, behaviours which reduce drinking
- Discuss without recrimination – and without bickering or punishing or threatening
- Learn about the importance of your self-care
- Learn stress reduction techniques
- Restrict key messages to moments of sobriety
- Exploit alcohol-related crises in order to encourage the drinker to seek help and treatment
- Support the drinker through any treatment

What NOT to do?

- Don't attempt to punish, threaten, bribe, or preach
- Avoid emotional appeals that may only increase feelings of guilt and the compulsion to drink or use other drugs
- Don't allow yourself to cover up or make excuses for the alcohol-dependent person
- Don't shield them from the consequences of their behaviour
- Don't take over their responsibilities, leaving them with no sense of importance or dignity
- Don't hide or dump bottles or shelter them from situations where alcohol is present
- Don't argue with the person when they are drinking
- Don't try to drink along with the problem drinker
- Above all, don't feel guilty or responsible for another person's behaviour

8.1 What are the key issues for friends and family members in supporting a person to reduce their drinking?

8.1.1 Denial

Sometimes people can be in denial about a family member who is dependent on alcohol. They may refuse to acknowledge the seriousness of the problem and how it is affecting the person and their family. It is important to be sensitive to the fact that some family members may be in denial and may not be willing to accept that a member of their family has a drinking problem – and needs to reduce their alcohol.

8.1.2 Enabling

This is another common behaviour. This is where family members allow the person with a drinking problem to avoid the negative consequences of their behaviour.

Examples of enabling behaviour:

- Paying the person's debts and bills
- Giving someone money to spend on alcohol
- Making excuses for their drinking – and accepting their excuses
- Covering up for the person at work – for example, calling their employer to say they are sick
- Drinking with the person
- Always having alcohol in the house
- Pretending their behaviour is normal – and they do not have a problem
- Taking on the person's jobs or chores
- Staying silent when faced with inappropriate or even destructive behaviour

Enabling behaviour is well-intentioned as the motive is to protect the person from harm. In the long-term, however, enabling behaviour can become part of the problem as the person is protected from the negative consequences of their actions –

and it delays the moment when a person decides to change.

8.2 Children and young people

Harmful drinking can affect everyone in the family including children.

If a child is growing up in a family where someone has a drinking problem, they may need additional guidance and support.

It is important to remember that parents are the primary caregivers of their children. Any actions which disempower or blame parents can aggravate the situation and potentially isolate both parents and children from the support they need.

Children and young people

- Need to have their experiences validated as their family may be in denial and covering up their difficulties. There may be secrecy, stigma and shame in the family which makes their experiences difficult to share
- Deserve to be 'seen' and supported as individuals in their own right
- Need a safe and reliable adult for support and reassurance
- Need, as far as possible, to be given opportunities to enjoy the normal, happy experiences of childhood
- May be living in an unusually stressful and confusing family environment and may therefore be at risk of drug and alcohol use themselves, as well as physical and mental health problems
- May benefit from family support and educational support programmes. Community support groups may also help provide peer group support to children going through similar experiences.

Children often find it easier to cope when...

- Drinking takes place away from the family home and not in the home
- Rows and fights do not take place in front of them and cannot be overheard
- Family routines continue to take place like family meals or the celebration of birthdays
- There is an older person outside the immediate family that they can talk to like a grandparent or a teacher
- The parent who is not dependent on alcohol has a good relationship with them and talks to them about their concerns

8.3 Self Care

It is very important that you take good care of yourself whilst supporting a friend, partner or family member who is dealing with an alcohol problem.

There are limits to how much you can do and there are also limits to how much responsibility you should take for someone else's choices.

You do not have the power to do something or say something that is guaranteed to make another person reduce their alcohol intake or stop drinking alcohol.

No one has the power to make someone else change. You only have power over what you do yourself and your own life.

Suggestions for someone living with a partner or family member who has an alcohol problem:

- Have someone outside the family that you can talk to openly and honestly about what you are going through
- Consider joining a support group where you can get support from other people facing the same challenges
- Learn as much as you can about alcohol-related problems and alcohol dependence
- Make sure you take care of your own physical and mental health and well-being

Three key points to remember when supporting a partner or family member:

- 1** You cannot make someone stop drinking or reduce their drinking. The choice is theirs, not yours.
- 2** Your partner or family member may need help to reduce their alcohol intake, stop drinking or stay sober. They will need treatment and support - and they may need to learn new skills.
- 3** Recovery is an ongoing process and requires time and patience. Although not inevitable, it is absolutely normal for a person to relapse, and need to start the process again. And again.

Workshop Discussion Questions

How is my drinking impacting my friends and family?

What are the three most important things that a friend or family member could do to support you in reducing your alcohol intake?

What are the three most unhelpful things that friends, or family members do when supporting you to reduce your alcohol intake?

Annex One Feedback form

Please see a list of services offering support to family members or concerned others in Annex 4.

The Strand 2 DPU Health Initiative Four LDATF Area Alcohol Detox Project invites your feedback on the Alcohol Reduction Manual. If you have used this document at all either as an individual looking for support for their alcohol use, as a family member or concerned person or as a service provider, we would welcome your input with regard to any further developments of the manual and your experience of working through it.

This form is anonymous and can be emailed to:
info@communityresponse.ie

Or posted to:

Community Response,
14 Carmans Court, Carmans Hall,
Dublin 8.

The form is confidential, however, if you would be happy for us to contact you for further feedback, please provide your contact details below:

Name:.....

Phone number:

Email:.....

Are you completing this form as (please tick one):

- Individuals looking for support for alcohol use:
- Service provider:
- Family member:

Other (please state).....

.....
.....
.....
.....
.....
.....
.....

What are your recommendations on the name of the document the Alcohol Reduction Manual?

- Keep the name
- Change the name
- It doesn't matter

If you think the name should change, please share with us a recommendation for a name of the manual:

.....
.....
.....
.....
.....

What part of the manual did you use? (Tick all that apply):

- Chapter 2. What are the impacts of alcohol?
- Chapter 3. What is alcohol dependence?
- Chapter 4. What is the Wheel of Change?

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Annex Two:

Alcohol information to complement SAOR training for staff

Annex Three

Sources & Further Reading

Alcohol and You – Is it time for a change?
– Booklet produced by Alcohol and You, a partnership of South Eastern Trust, ASCERT and Addiction NI (Revised Version 2016)

Alcohol consumption, alcohol-related harm and alcohol policy in Ireland – Health Research Board Report (2021)

Alcohol Resource Kit – Toolkit developed for exploring the harmful effects of alcohol – Canal Communities Local Drug and Alcohol Task Force (August 2017)

CARE – Community Alcohol Response and Engagement Pilot Project, Evaluation Report – Quality Matters (September 2015)

Community Detoxification Protocols: Benzodiazepines – National Detoxification Steering Group (October 2011)

Community Response – Exploring Community Alcohol Detox Webinar – 17th November 2021

Dublin 12 Community Action on Alcohol Strategy 2017 (2020)

Evidence Baseline Report – Dublin 12 and Canal Communities Local Drugs Task Forces (February 2019)

Factsheet – Alcohol: The Irish situation – Health Research Board – (July 2021)

Guidelines for Community Alcohol Detoxification in Shared Care – Dr Millicent Chikoore and Dr O Lagundoye (2008)

Hidden Harm Practice Guide – Seeing Through Hidden Harm to Brighter Futures – HSE/TUSLA (2019)

HSE Alcohol Programme – Position Paper on the development of the Sale of Alcohol Bill, January (2022)

Management of harmful drinking and alcohol dependence in Primary Care – A National Clinical Guideline, Scotland (2003)

Models of Care for Alcohol Misusers, Department of Health, NHS (June 2006)

National Community Detoxification Benzodiazepine Guidelines, Ana Liffey Drug Project (2016)

National Drugs Rehabilitation Framework – HSE (July 2010)

Reduce the Use – 3rd Edition, SAOL Project (2018)

SAOR Screening and Brief Intervention for Problem Alcohol and Substance Use – O’Shea J, Goff P & Armstrong R (2nd Edition 2017)

Use of drugs and alcohol services by new communities in the Canal Communities Local Drugs and Alcohol Task Force area, Archways (2016)

Some Website Resources:

www.drugsandalcohol.ie

www.drugs.ie

www.communityresponse.ie

www.alcoholthinkagain.com

www.alcoholandyouni.com

www.askaboutalcohol.ie

www.nhs.uk

www.ballyfermotldatf.ie

www.d12ldatf.ie

www.cclldatf.ie

SICDATF:

Contact the Coordinator at

sicdatf@gmail.com



Annex Four

Directory of Service Organisations

If you are concerned about your drinking and don't know what steps to take, we have information here on a variety of services and treatment options that will offer support and assist you in meeting your goals.

The services listed are located within the South Inner City, The Canal Communities (Inchicore, Bluebell, and Rialto), Ballyfermot and Crumlin. Services vary in the supports they provide and entry criteria, so we recommend you contact them directly for more information. If you would like more

information on these services, please visit: www.makethechange.ie.

For additional information, you can also contact The HSE Drug and Alcohol Helpline on 1800 459 459 or email helpline@hse.ie

If you are looking for support around changing your drinking patterns, we recommend that you contact one of the services listed here:

Organisation	Number	Email
Addiction Response Crumlin (ARC)	01 411 3222 / 087 979 5628	info@addictionresponsecrumlin.ie
Walkinstown Greenhills Resource Centre	01 419 8630 / 086 027 8729	reception@wgrc.ie
Ballyfermot Advance	01 623 8001	info@ballyfermotadvance.ie
Ballyfermot STAR	01 623 8002	info@ballyfermotstar.ie
Fusion CPL	01 623 1499 / 087 9613 272	info@fusioncpl.ie

Directory of Service Organisations (cont'd)

Organisation	Number	Email
Community Response	01 454 9772	info@communityresponse.ie
Merchants Quay Ireland	01 524 0160	openaccess.info@mqi.ie / info@mqi.ie
Coolmine	01 679 4822 / 087 122 9307	admissions@coolminetc.ie
Casadh	01 454 8419	info@casadh.ie
Canal Communities Regional Addiction Service (CCRAS)	086 384 5542 / 086 3845565	admin@ccrass.ie
CKU	087 649 4555	info@ckudublin.org
Donore Community Drug Team	01 222 7862	donorecdt@eircom.net
Exchange House National Travellers Service	01 872 1094	info@exchangehouse.ie
Frontline Make Change	01 473 6502	info@frontlinemc.ie
Rialto Community Drug Team	01 454 0021	admin@rcdt.ie
Ringsend District Response to Drugs (RDRD)	01 667 7666 / 085 788 2802	

Directory of Service Organisations (cont'd)

Organisation	Number	Email
Matt Talbot Trust	085 765 0019	info@matttalbot.org
Ruhama	01 836 0292	admin@ruhama.ie
TURAS Training	01 450 5369	info@turastraining.ie
Recovery through Art and Drama Education (RADE).	01 454 8733 / 01 454 6406	info@rade.ie
Community Lynks Project	01 453 7842	info@lynksproject.ie

Family Support

If you are worried about someone else, family support aims to help family members and concerned persons who have been affected by drug/alcohol use in their homes or relationships. The group programmes or one-to-one sessions are designed to assist participants to cope with the stressors associated with this. It also works on learning skills to mitigate the effect addiction has on

themselves and the family.

If you are a family member or concerned person and would like to know more about family support options, we recommend you contact one of the services listed below. The services listed are located within the South Inner City, The Canal Communities (Inchicore, Bluebell, and Rialto), Ballyfermot and Crumlin. Services vary in the supports they provide and entry criteria, so we

recommend you contact them directly for more information. If you would like more information on these services, please visit:

www.makethechange.ie

For additional information, you can also contact The HSE Drug and Alcohol Helpline on 1800 459 459 or email helpline@hse.ie

If you are looking for family support, we recommend that you contact one of the services listed below:

Organisation	Number	Email
Ballyfermot Advance	01 623 8001	info@ballyfermotadvance.ie
Ballyfermot STAR	01 623 8002	info@ballyfermotstar.ie
Community Response	01 454 9772	info@communityresponse.ie
Casadh	01 454 8419	info@casadh.ie
Ringsend District Response to Drugs (RDRD).	01 667 7666 / 085 788 2802	

Family Support cont'd

Organisation	Number	Email
CKU	087 649 4555	info@ckudublin.org
Exchange House National Travellers Service	01 872 1094	info@exchangehouse.ie
Canal Communities Regional Addiction Service (CCRAS)	086 3845542 / 086 384 5565	admin@ccrass.ie
Rialto Community Drug Team	01 454 0021	admin@rcdt.ie
Frontline Make Change	01 473 6502	info@frontline.mc.ie
Walkinstown Greenhills Resource Centre	01 419 8630 / 086 027 8729	reception@wgrc.ie
Addiction Response Crumlin (ARC)	086 770 7511 / 01 411 3222	info@addictionresponsecrumlin.ie
Familibase	01 654 6800	info@familibase.ie
Barnardo's Rialto Family Centre	01 473 4746	
Blue Door	01 626 7051	info@bluedoor83.ie

Other Relevant services that may be useful for supporting family members and young people

The services listed here are located within the South Inner City, The Canal Communities (Inchicore, Bluebell, and Rialto), Ballyfermot and Crumlin. Services vary in the supports they provide so we

recommend you contact them directly for more information. If you would like more information on these services, please visit:

www.makethechange.ie

These are a list of services that provide supports to people in the community, young people and their families:

Organisation	Number	Email
Ballyfermot Youth Service	01 623 1431	admin@ballyfermotys.ie
CORE Youth Service Inchicore	01 454 4791	info@core-ys.com
Rialto Youth Project	01 453 1638	finance@rialtoyouthproject.net
The Bosco Youth Project Crumlin	01 456 0100	
Canal Communities Regional Youth Service	01 473 8439	
Candle Community Trust Ballyfermot	01 626 9111	info@candletrust.ie

Family Resource Centres	Number	Email
Ballyfermot Family Resource Centre	01 626 4147	info@ballyfermotfrc.com
Cherry Orchard Family Resource Centre (The Bungalow)	01 623 1367	
School Street Family Resource Centre Dublin 8	01 454 7018	outreach@familycentre.ie
St Andrews Family Resource Centre Dublin 2	01 677 1930	info@standrews.ie
St Michael's Family Resource Centre	01 453 3938	
Fatima Groups United	085 858 1307	d8socialprescribing@fgu.ie

Ballyfermot, Canal Communities, Dublin 12 and
South Inner-City Drug and Alcohol Task Forces

Community Alcohol Detox Project

