

Regional alcohol-related harm

County level factsheet

Anne Doyle



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Abbreviations

ALD	Alcohol-related liver disease
AUDIT-C	Alcohol Use Disorders Test-Concise
BAC	Blood alcohol concentration
CSO	Central Statistics Office
DSM-5	Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
ED	Emergency department
HIPE	Hospital In-Patient Enquiry
HRB	Health Research Board
ICD-10	International Statistical Classification of Diseases and Related Health Problems, 10 th Revision
MHC	Mental Health Commission
MUP	Minimum unit pricing
NDAS	National Drug and Alcohol Survey
NDRDI	National Drug-Related Deaths Index
NDTRS	National Drug Treatment Reporting System
NPIRS	National Psychiatric Inpatient Reporting System
OECD	Organisation for Economic Co-operation and Development
PULSE	Police Using Leading Systems Effectively
RHA	Regional health area
RSA	Road Safety Authority
RTC	Road traffic collisions
WHO	World Health Organization

Glossary

Alcohol use disorder (AUD) – defined according to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) criteria. It is a maladaptive pattern of alcohol use leading to clinically significant impairment or distress, as manifested by 2 or more of the following 11 criteria, occurring at any time in the last 12 months: role impairment; hazardous use; social problems; tolerance; withdrawal; longer or more use than intended; unsuccessful attempts to quit/cut down; much time spent using alcohol; reduced activities because of drinking; continued drinking despite psychological or physical problems; and alcohol cravings.

Heavy episodic drinking (HED) – sometimes referred to as ‘binge drinking’ and defined as consuming six or more standard drinks on a single occasion. This is approximately equivalent to three pints of beer or cider, six pub measures of spirits, or just under one bottle of wine.

HSE weekly low-risk alcohol guidelines - The recommended weekly low-risk alcohol guidelines are less than 11 standard drinks for women and 17 standard drinks for men, spread out over the week with 2–3 alcohol-free days per week. No more than 6 standard drinks on any one occasion.

Non-poisoning deaths: Deaths in individuals with a history of drug dependency or non-dependent abuse of drugs, irrespective of whether the use of the drug was directly implicated in the death.

Poisoning deaths: Deaths directly due to the toxic effect of the presence in the body of a drug or drugs and/or other substance(s). Other terms used to describe such deaths include overdose, directly drug-related death and acute drug death.

Polydrug use – the use of more than one drug. It can be simultaneous, which is the use of two or more drugs on the same occasion, or concurrent, which is the use of two or more different substances in a given time period, such as during the last month or the last year.

Standard drink – 10g of pure alcohol (equivalent to approximately half a pint of beer, one pub measure (35 ml) of spirits, or one small (100 ml) glass of wine).

1 Introduction

In Ireland, alcohol contributes to a significant burden on the health of the population and in turn, the health services. There is a high level of alcohol use in Ireland, and for many, hazardous drinking is commonplace. At least three people die every day from alcohol-related conditions such as alcohol-related liver disease, cirrhosis of the liver, and alcohol dependence [1]. Alcohol use is linked with a number of cancers and cardiovascular disease [2]. In acknowledgement of the harms caused by alcohol, the government passed the Public Health (Alcohol) Act in 2018, herein referred to as the 'Act' [3].

The Act aims to reduce alcohol use at a population level and many components have been commenced to date including minimum unit pricing (MUP) which sees a minimum price that alcohol can be sold at. Also commenced is structural separation of alcohol products, this means that alcohol products must be separated from other products in mixed-retail stores. There are bans on alcohol advertising in certain places and sports sponsorship restrictions as well as a ban on price promotions. By 2026, alcohol labelling will be mandatory in Ireland for all alcohol products sold here. These health warning labels will be displayed on the alcohol product informing of the dangers of alcohol use, the link between alcohol and cancer and the danger of alcohol use when pregnant. The label must also display the quantity in grams of alcohol in the product (i.e. number of standard drinks) along with the calorie content. Details of an independent website providing public health information in relation to alcohol use will also be provided.

This report examines alcohol use and alcohol-related harms by county level, where available. Alcohol use is equally prevalent across Irish society. As the population of Ireland grows and as the components of the Act are commenced, it is important that the impact of the Act is monitored to ensure it is effective but of equal importance is that all components of the Act are implemented to ensure maximum impact.

The COVID-19 pandemic resulted in huge lifestyle changes for many and with the closure of licenced premises for long periods of time during 2020 and 2021, per capita alcohol use decreased and drinking at home became the norm for many. The long-term effects of the pandemic are still unfolding, and it may be years before we can fully understand how the pandemic changed our drinking habits and/or impacted our health.

2 Population of Ireland by county

Since the Census in 2016, the population of Ireland has grown by 7.6% [4]. The population of every county in Ireland has increased with the greatest increases shown in Longford, where the population increased by 14.1% between the 2016 Census and the 2022 Census, followed by Meath (12.9% increase) and Kildare (11.0% increase) (Table 1).

Table 1 Population of Ireland as per Census, 2016 and 2022, and percentage change during time period, by county

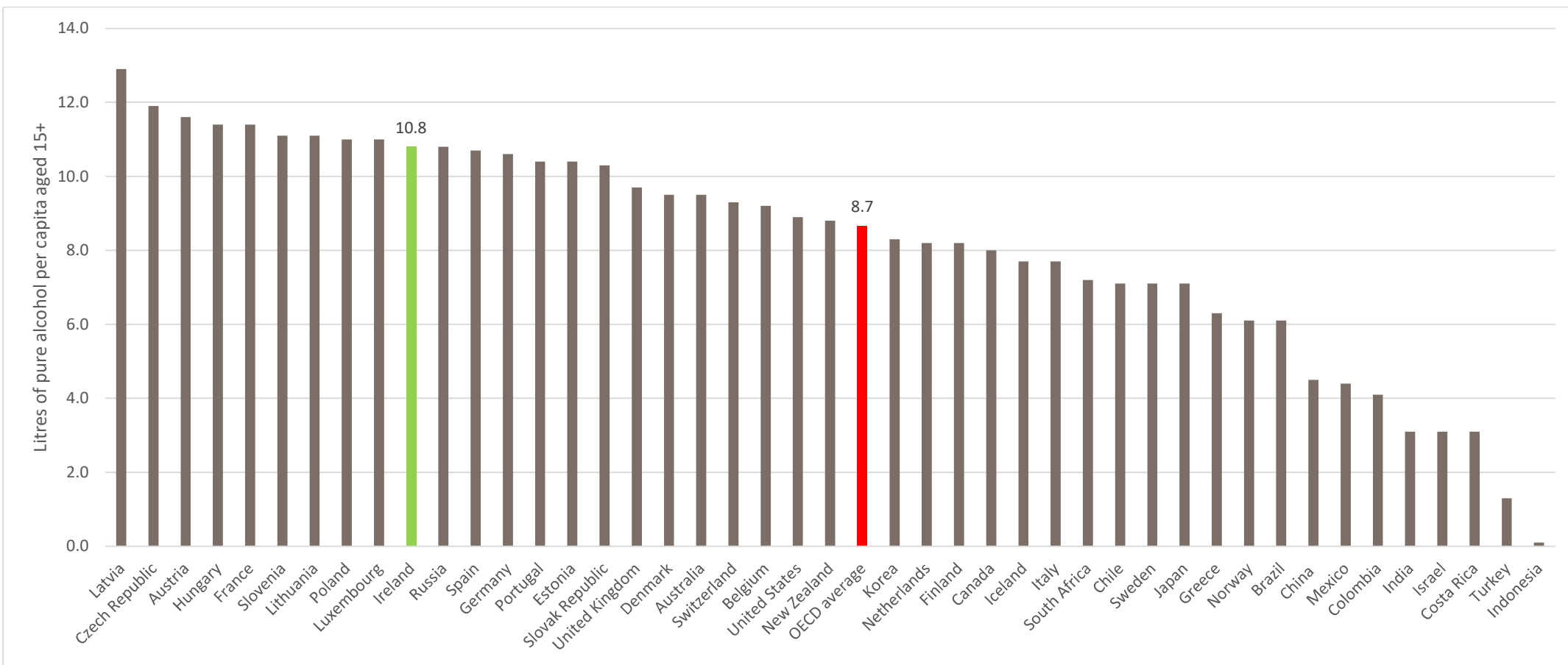
County	Population Census 2016 (n)	Population Census 2022 (n)	Change 2016—2022 Census (n)	Percentage 2016—2022 (%)
Ireland	4,761,865	5,123,536	361,671	+7.6
Carlow	56,932	61,931	4,999	+8.8
Cavan	76,176	81,201	5,025	+6.6
Clare	118,817	127,419	8,602	+7.2
Cork	542,868	581,231	38,363	+7.1
Donegal	159,192	166,321	7,129	+4.5
Dublin	1,347,359	1,450,701	103,342	+7.7
Galway	258,058	276,451	18,393	+7.1
Kerry	147,707	155,258	7,551	+5.1
Kildare	222,504	246,977	24,473	+11.0
Kilkenny	99,232	103,685	4,453	+4.5
Laois	84,697	91,657	6,960	+8.2
Leitrim	32,044	35,087	3,043	+9.5
Limerick	194,899	205,444	10,545	+5.4
Longford	40,873	46,634	5,761	+14.1
Louth	128,884	139,100	10,216	+7.9
Mayo	130,507	137,231	6,724	+5.2
Meath	195,044	220,296	25,252	+12.9
Monaghan	61,386	64,832	3,446	+5.6
Offaly	77,961	82,668	4,707	+6.0
Roscommon	64,544	69,995	5,451	+8.4
Sligo	65,535	69,819	4,284	+6.5
Tipperary	159,553	167,661	8,108	+5.1
Waterford	116,176	127,085	10,909	+9.4
Westmeath	88,770	95,840	7,070	+8.0
Wexford	149,722	163,527	13,805	+9.2
Wicklow	142,425	155,485	13,060	+9.2

Source: CSO Census of population, 2023

3 Per capita alcohol use

Per capita alcohol use is the volume of pure alcohol consumed per person aged 15 years and over each year and is calculated in Ireland using alcohol sales data from Revenue and population estimates from the Central Statistics Office (CSO) [4,5]. In 2022, per capita alcohol use for the population aged 15 years and over was 10.2 litres. Figure 1 illustrates the per capita alcohol use among Organisation for Economic Co-operation and Development (OECD) countries which places Ireland at 11th highest out of 45 countries and above the OECD average (8.7 litres) [6]. However, it is important to note that when interpreting this data, the per capita alcohol use figure for Ireland is based on 2019 data (10.8 litres), and not all countries have the most up-to-date per capita use available or updated. The data available indicates that Latvia reported the highest per capita alcohol consumption at 12.9 litres.

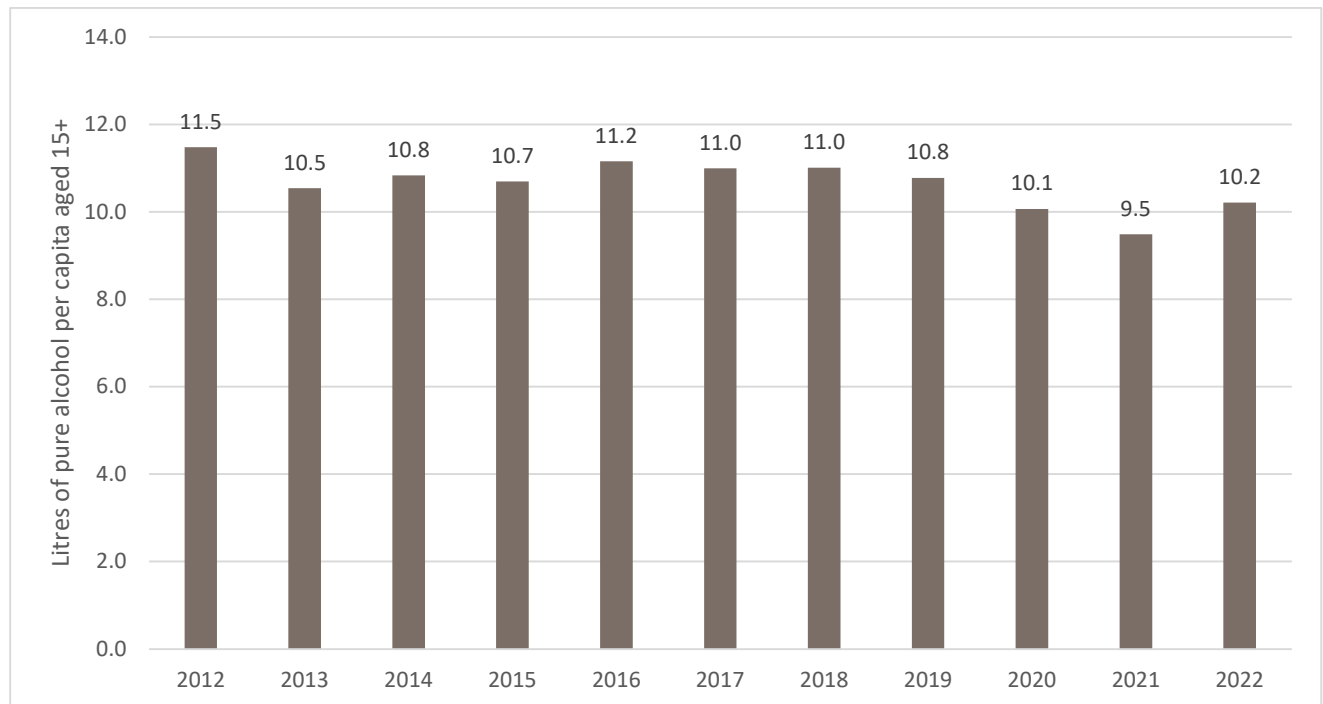
Figure 1 Per capita alcohol use among population aged 15+ years, OECD countries, 2021



Source: OECD Health Statistics 2021

Figure 2 illustrates the average alcohol use per person aged 15 years and over from 2012 to 2022 in Ireland based on the assumption that every individual aged 15 and over drinks alcohol. As approximately 25% of the population are non-drinkers, the actual per capita alcohol use is much higher [7]. Since 2012, there has been a decrease of 11% in per capita alcohol use. In 2020 and 2021, the impact of the COVID-19 pandemic and the associated closure of pubs, clubs and restaurants meant that per capita alcohol use decreased but since their re-opening, alcohol use has increased again, however not to pre-pandemic levels. Per capita alcohol use by county is not available using Revenue data.

Figure 2 Litres of pure alcohol per capita in Ireland aged 15+ years, 2012–2022



Source: Revenue Alcohol sales, 2023

4 Drinking patterns

It is not possible to examine drinking patterns by county although the National Drug and Alcohol Survey (NDAS) looks at alcohol use at a regional health area (RHA) level [7,8]. RHA's are in line with recommendations made in the Sláintecare Report, proposing that regional bodies be responsible for the planning and delivery of integrated health and social care services [9].

The NDAS, last carried out in 2019–2020, collected information on alcohol, tobacco and drug use among a representative sample (N=5,762) of the general population, aged 15 years and older, in Ireland [7].

4.1 Current drinkers

The NDAS reported that three-quarters of the population reported drinking alcohol in the last year (74.2%). This pattern was consistent when examining alcohol use by RHA with all areas reporting similar levels of alcohol use. Slightly lower than the national average was Area E (68.1%) and somewhat higher alcohol use was reported in Area B (77.3%) (Figure 3).

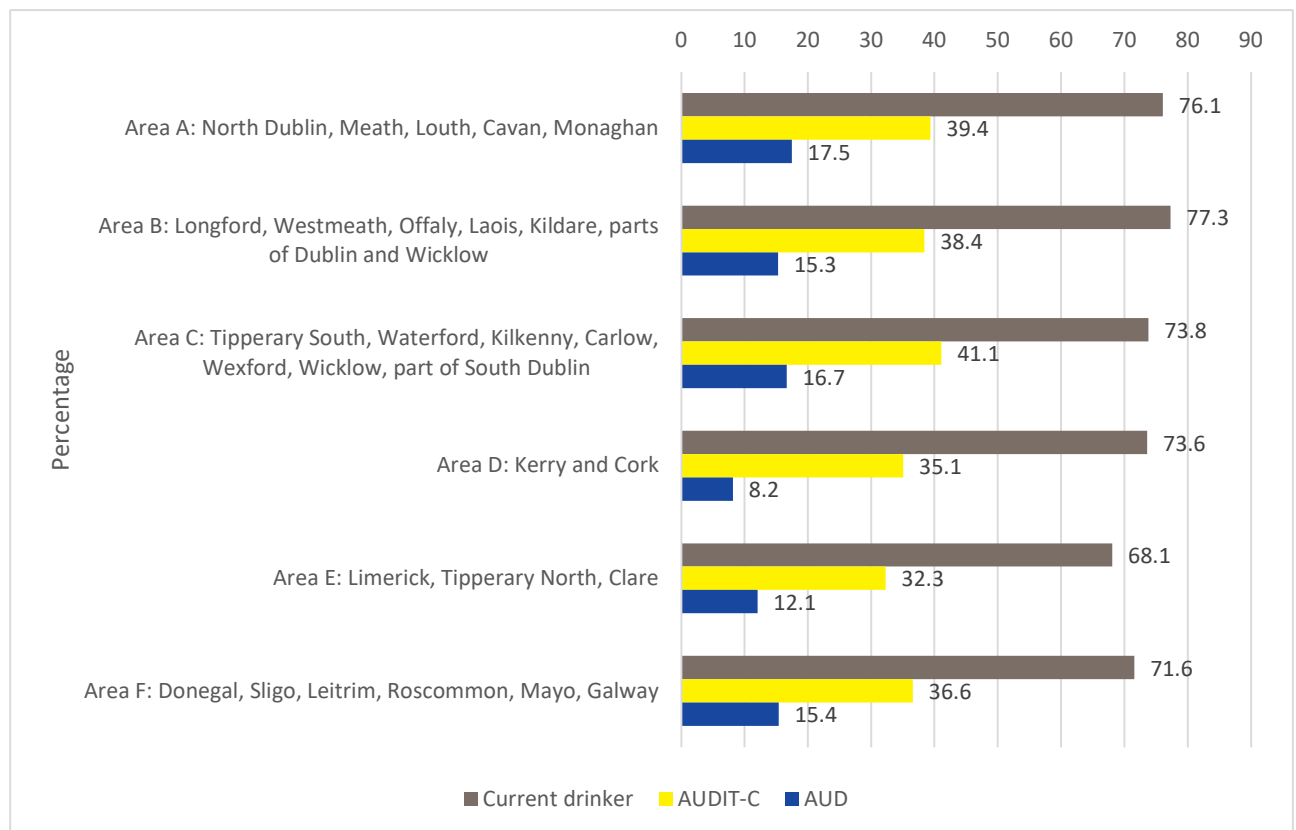
4.2 Hazardous drinkers/AUDIT-C

Over one-third of the population met the classification for hazardous drinking (37.9%). Hazardous drinking is measured using the World Health Organization’s (WHO) Alcohol Use Disorders Test-Concise (AUDIT-C) screening tool [10]. When examined by RHA, the pattern of hazardous alcohol use reflects that of the national average with slightly higher levels of hazardous drinking reported in Area C (Figure 3).

4.3 Alcohol use disorder

Alcohol use disorder (AUD) was measured using the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) [11]. The overall prevalence of AUD in the population of Ireland was 14.8% but varied by RHA; from 8.2% in Area D to 17.5% in Area A (Figure 3).

Figure 3 Prevalence of current drinking, hazardous drinking, and alcohol use disorder in general population by RHA, 2019–2020



Source: National Drug and Alcohol Survey

5 Alcohol availability

In 2006, the Government abolished the Groceries Order, which had banned below-cost selling of certain goods [1]. This policy change saw lower prices for consumers for many household goods including alcohol and allowed alcohol to be sold below cost in Ireland. Alcohol became more affordable, and consumers increasingly moved to off-licence sales. As off-licence sales grew, the number of liquor licences for on-licence premises declined. Table 2 illustrates the number of liquor

licences per county in Ireland. This information is available from Revenue but should be interpreted with the following caveats:

1. The published registers are limited to licences that were actually issued and do not represent the complete liquor licensing database.
2. Licences regularly transfer and change hands during the currency of the licensing year and from one licensing year to the next.
3. Licences may be renewed but the premises may be temporarily or permanently closed.
4. Licences are regularly extinguished by the Courts in favour of a new and different class of licence, often in a different geographical location.
5. The licensing year runs for most liquor licences from 1st October to 30th September but for Wholesale Dealer Licences and Wholesale Dealer with Retail Off Licences, the licensing year is from 1st July to 30th June. These licences are included in the registers.
6. Each register is of its time and relative to that licensing year.

According to Revenue data in 2022, the counties with the most liquor licences registered were unsurprisingly those with the largest urban centres, Dublin (n=3,114), Cork (n=1,693) and Galway (n=928) (Table 2).

The majority of counties have seen a decline in the overall number of liquor licences since 2018 with the exception of Dublin and Meath where an increase was noted (4.4% and 4.0% respectively) and Offaly, where no change was recorded.

Table 2 Number of liquor licences (all types) by county and percentage change, 2018—2022

	All licences 2018	All licences 2019	All licences 2020	All licences 2021	All licences 2022	% change 2018—2022
Carlow	186	192	187	187	179	-3.8
Cavan	289	296	292	284	276	-4.5
Clare	502	514	491	490	455	-9.4
Cork	1758	1757	1740	1731	1693	-3.7
Donegal	673	690	635	650	635	-5.6
Dublin	2984	3111	2976	3017	3114	+4.4
Galway	942	964	939	948	928	-1.5
Kerry	818	831	802	799	789	-3.5
Kildare	468	461	451	449	465	-0.6
Kilkenny	325	332	322	316	304	-6.5
Laois	234	238	229	220	224	-4.3
Leitrim	157	160	158	158	151	-3.8
Limerick	632	650	635	635	594	-6.0
Longford	151	150	143	144	136	-9.9
Louth	410	423	400	402	398	-2.9
Mayo	629	636	615	614	583	-7.3
Meath	428	442	435	449	445	+4.0
Monaghan	177	180	173	174	172	-2.8
Offaly	223	228	218	217	223	0.0

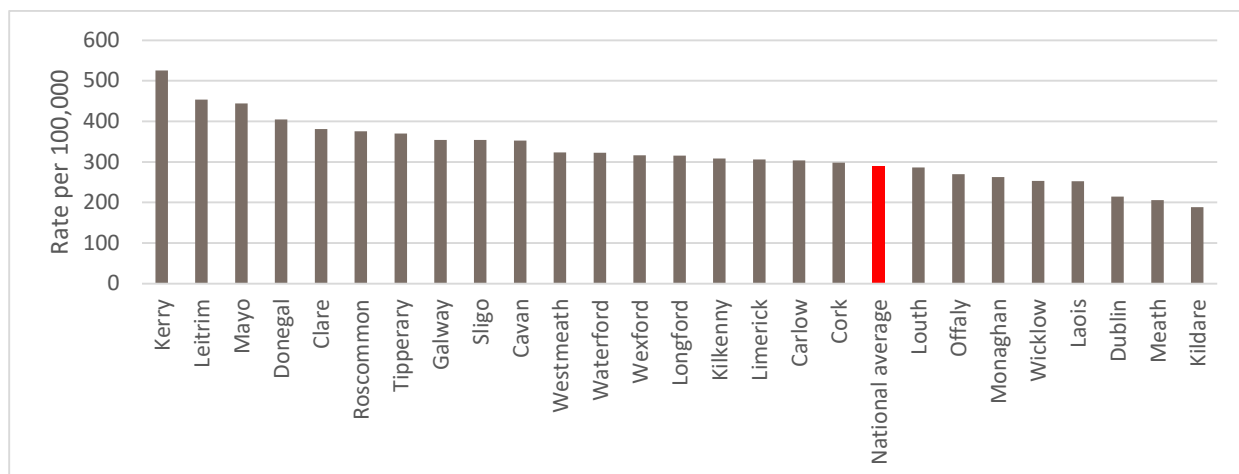
	All licences 2018	All licences 2019	All licences 2020	All licences 2021	All licences 2022	% change 2018—2022
Roscommon	270	272	266	262	251	-7.0
Sligo	246	250	245	242	236	-4.1
Tipperary	653	642	632	632	597	-8.6
Waterford	418	421	414	402	404	-3.3
Westmeath	317	318	309	313	298	-6.0
Wexford	503	522	501	509	485	-3.6
Wicklow	372	371	363	374	381	+2.4
Total	14765	15051	14571	14618	14416	-2.4

Source: Revenue Register of renewed liquor licences, 2023

Figure 4 presents the rate per 100,000 of the population (based on Census 2022 figures) of liquor licences per county. The counties with the greatest rate of liquor licences for their population were Kerry (508 per 100,000), Leitrim (430 per 100,000) and Mayo (425 per 100,000).

The number of liquor licences are fairly evenly spread in terms of population size with the most liquor licences per population in Kerry and the fewest in Kildare.

Figure 4 Rate of liquor licences in 2022 per 100,000 of the population



Source: Revenue Register of renewed liquor licences, 2023

6 Alcohol-related hospitalisations

Alcohol-related hospitalisations in Ireland was provided by the Hospital In-Patient Enquiry (HIPE) scheme managed by the Healthcare Pricing Office (HPO) in the Health Service Executive (HSE). HIPE is a computerised health information system designed to collect clinical and administrative data on discharges (including deaths) from acute Irish hospitals. Each HIPE discharge record represents one episode of care; patients may be admitted to hospital(s) more than once with the same or different diagnoses. HIPE uses discharges, which can be considered a proxy for admissions, to measure each patient contact. Emergency department (ED) and outpatient data are not collected. The records therefore facilitate analysis of hospital activity rather than epidemiological analysis of disease.

The use of HIPE for epidemiological purposes has some limitations. The HIPE system records the number of inpatient events rather than the number of patients and, as these records do not carry a unique personal identifier, it is not possible to determine accurately how many times an individual

patient was admitted for the same condition. Using HIPE to assess the burden of alcohol use on acute hospital services can lead to an underestimation of the real impact of alcohol, as ED attendances are not recorded. Note that the county information is based on the patient's home address. The patient may have travelled to another county for treatment.

Hospital discharges are coded using the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM). A full list of the alcohol-related diagnosis codes and descriptions can be found in Appendix 1.

6.1 All alcohol-related hospitalisations

Kildare, Carlow and Roscommon saw the largest increase in all alcohol-related hospitalisations between 2018—2022, and Longford, Kerry and Cavan saw the largest decreases in all alcohol-related hospitalisations (Table 3).

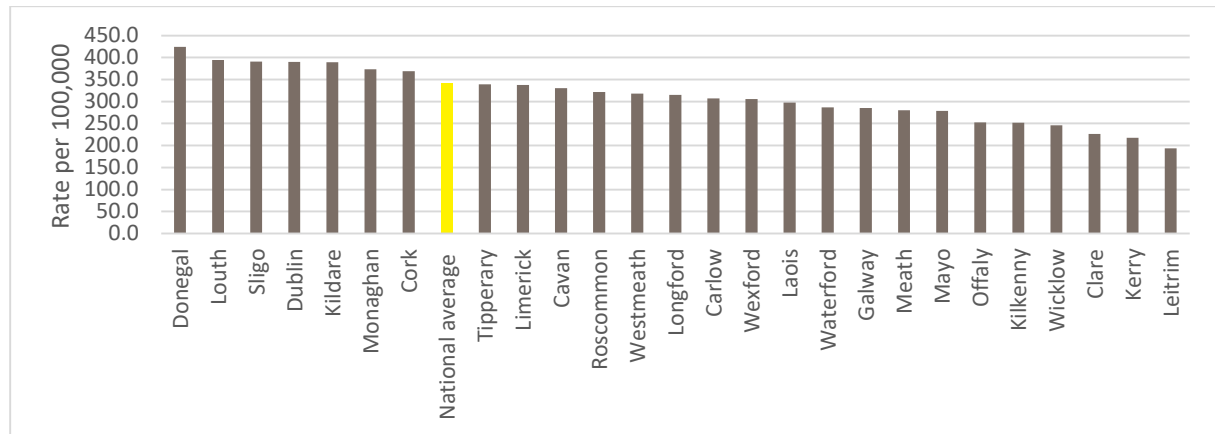
Table 3 Total number of discharges with any alcohol-related diagnosis, by county of residence, reported to HIPE, 2017-2022

	2018	2019	2020	2021	2022	% change 2018—2022
Carlow	165	213	208	211	190	+15.2
Cavan	343	338	305	256	268	-21.9
Clare	362	295	325	258	288	-20.4
Cork	2430	2358	2267	2369	2144	-11.8
Donegal	673	670	696	726	706	+4.9
Dublin	5783	6035	6046	6299	5661	-2.1
Galway	876	775	1081	1068	788	-10.0
Kerry	449	400	360	366	338	-24.7
Kildare	695	815	726	866	962	+38.4
Kilkenny	288	281	221	237	261	-9.4
Laois	315	315	226	223	273	-13.3
Leitrim	77	75	81	89	68	-11.7
Limerick	681	549	664	635	693	+1.8
Longford	215	243	181	149	147	-31.6
Louth	613	619	570	644	549	-10.4
Mayo	433	392	365	409	382	-11.8
Meath	650	595	621	676	618	-4.9
Monaghan	258	252	204	261	242	-6.2
Offaly	191	232	211	215	209	+9.4
Roscommon	200	211	326	252	225	+12.5
Sligo	253	299	265	254	273	+7.9
Tipperary	645	668	663	667	569	-11.8
Waterford	358	324	327	373	364	+1.7
Westmeath	352	398	395	295	305	-13.4
Wexford	465	553	457	581	500	+7.5
Wicklow	449	408	461	450	382	-14.9
All	18340	18444	18302	18876	17512	-4.5
Non-resident	121	131	50	47	107	-11.6

Source: HIPE, 2023

When all alcohol-related hospitalisations were applied to the population as per the Census 2022, Donegal had the highest rate of all alcohol-related hospitalisations per 100,000 of the population, followed by Louth and Sligo. Leitrim had the lowest rate per 100,000 of all alcohol-related hospitalisations (Figure 5).

Figure 5 Rate of discharges with any diagnosis related to alcohol per 100,000 of the population, by county of residence, reported to HIPE, 2022



Source: HIPE, 2023

6.2 Alcohol-related liver disease hospitalisations

Table 4 presents the number of alcohol-related liver disease (ALD) for each county from 2018 to 2022. Counties Dublin, Cork and Galway had the greatest number of ALD hospitalisations. ALD hospitalisations have increased during this 5-year period in the majority of counties in Ireland. Roscommon, Carlow and Kildare have seen the greatest increase in the number of ALD hospitalisations whereas Kerry and Sligo have seen the greatest decline between 2018—2022.

Table 4 Total number of discharges with any diagnosis of alcohol-related liver disease (diagnosis code K70) and % change, by county of residence, reported to HIPE, 2018-2022

	2018	2019	2020	2021	2022	% change 2018—2022
Carlow	14	31	36	44	31	+121.4
Cavan	45	55	52	35	52	+15.6
Clare	58	51	54	47	48	-17.2
Cork	440	528	438	552	511	+16.1
Donegal	74	54	83	86	96	+29.7
Dublin	1196	1246	1212	1412	1095	-8.4
Galway	197	200	194	266	204	+3.6
Kerry	152	118	109	96	67	-55.9
Kildare	85	157	158	190	188	+121.2
Kilkenny	40	33	44	59	56	+40.0
Laois	35	23	20	30	50	+42.9
Leitrim	16	13	15	14	14	-12.5
Limerick	123	88	139	107	114	-7.3
Longford	24	53	36	38	35	+45.8
Louth	94	89	83	153	94	0.0

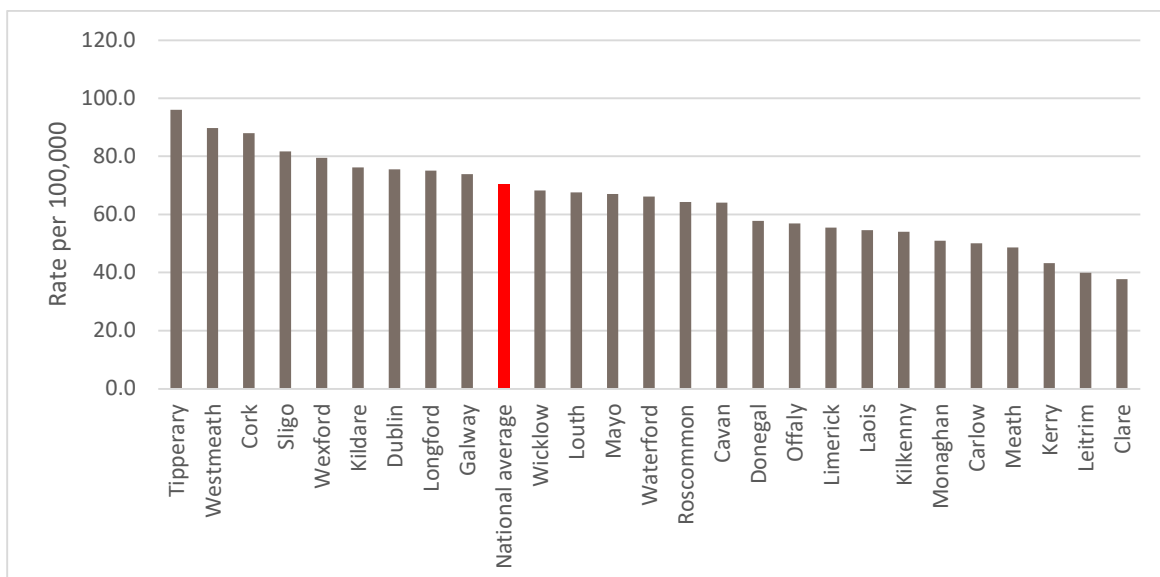
	2018	2019	2020	2021	2022	% change 2018—2022
Mayo	107	97	62	76	92	-14.0
Meath	140	142	140	177	107	-23.6
Monaghan	34	39	19	43	33	-2.9
Offaly	43	65	60	88	47	+9.3
Roscommon	16	22	144	45	45	+181.3
Sligo	85	74	51	40	57	-32.9
Tipperary	127	141	157	189	161	+26.8
Waterford	93	66	69	96	84	-9.7
Westmeath	40	56	73	80	86	+115.0
Wexford	90	84	85	122	130	+44.4
Wicklow	115	95	106	146	106	-7.8
All	3496	3627	3643	4239	3610	+3.3
Non-resident	13	7	~	8	7	-46.2

Source: HIPE, 2023

~ Denotes five or fewer discharges reported to HIPE

When ALD hospitalisations were applied to the population as per the Census 2022, Tipperary had the highest rate of ALD hospitalisations per 100,000 of the population, followed by Westmeath and Cork. Clare had the lowest rate of ALD hospitalisations per 100,000 of the population (Figure 6).

Figure 6 Rate of discharges with any diagnosis of alcohol-related liver disease (diagnosis code K70) per 100,000 of the population, by county of residence, reported to HIPE, 2022



Source: HIPE, 2023

7 Alcohol treatment

7.1 National Drug Treatment Reporting System

Treatment for alcohol use is recorded on the National Drug Treatment Reporting System (NDTRS). The NDTRS is an epidemiological database on treated problem drug and alcohol use in Ireland. It is coordinated by staff in the National Health Information Systems Unit of the Health Research Board (HRB) on behalf of the Department of Health. For the purpose of the NDTRS, 'treatment' is broadly defined as any activity that aims to ameliorate the psychological, medical, or social state of individuals who seek help for their alcohol and other drug use problems. Compliance with the NDTRS requires that one form be completed for each new client coming for their first treatment and for each previously treated client returning to treatment for problem drug use (including problem alcohol use). Data are collected on annual episodes of treatment rather than on the individuals being treated. This means that the same person could be counted more than once in the reporting year if they had more than one treatment episode in that year.

Treatment for problem use of substances in Ireland is provided by statutory and non-statutory services, including general hospitals, psychiatric hospitals, community-based services, and residential centres. Most treatment of problem alcohol use takes place in outpatient facilities. Treatment options for problem alcohol use include medication, psychiatric treatment, brief intervention, counselling (including cognitive behavioural therapy), medication-free therapy, family therapy, complementary therapy, and life skills training.

In 2022, (NDTRS) covered 70% of drug and alcohol services known to the NDTRS. The data presented here therefore underestimate the full extent of alcohol use treatment in Ireland. Data presented here are based on the most recently available information from the NDTRS, which covers alcohol treatment data for the five-year period from 2018 to 2022.

7.1.1 Alcohol as a main problem substance¹

Table 5 presents trends in the number of cases attending treatment from 2018 to 2022 by county. The county data presented for NDTRS data represents the county of residence of the cases receiving treatment. Note that those in receipt of treatment for alcohol use may travel from their own county of residence to another county to receive treatment.

The number of cases decreased by 1.0% from 2018 (7,464 cases) to 2022 (7,421 cases). This may reflect a true decrease in the number of cases presenting for treatment but may also reflect reduced levels of participation or under-reporting to the NDTRS, or it may be a combination of both of these factors. Increases in the number of cases receiving treatment for alcohol use as a main problem substance was most evident in counties Roscommon, Kildare and Monaghan. Other counties saw a decrease in the number of cases most evident in Mayo, Cork and Tipperary.

The counties with the greatest number of cases receiving treatment for alcohol as the main problem substance were Dublin, Cork and Donegal (Table 5).

¹ Main problem substance means that alcohol was the first, or most problematic substance for which treatment was received when polydrug use .

Table 5 Treatment for alcohol as main problem substance, by county 2018–2022 (number, percentage and % change)

	2018		2019		2020		2021		2022		% change 2018–2022
	n	%	n	%	n	%	n	%	n	%	%
Carlow	100	1.3	82	1.1	54	0.9	65	0.9	91	1.2	-9.0
Cavan	78	1.0	94	1.2	67	1.2	87	1.3	101	1.4	+29.5
Clare	106	1.4	111	1.5	87	1.5	112	1.6	138	1.9	+30.2
Cork	972	13.0	963	12.8	719	12.3	758	11.1	697	9.4	-28.3
Donegal	517	6.9	526	7.0	449	7.7	471	6.9	467	6.3	-9.7
Dublin	1907	25.5	1921	25.5	1593	27.4	2067	30.1	2232	30.1	+17.0
Galway	254	3.4	264	3.5	130	2.2	180	2.6	275	3.7	+8.3
Kerry	321	4.3	327	4.3	224	3.8	213	3.1	256	3.4	-20.2
Kildare	182	2.4	203	2.7	205	3.5	249	3.6	291	3.9	+59.9
Kilkenny	173	2.3	135	1.8	97	1.7	133	1.9	170	2.3	-1.7
Laois	145	1.9	122	1.6	58	1.0	85	1.2	115	1.5	-20.7
Leitrim	59	0.8	108	1.4	71	1.2	71	1.0	61	0.8	+3.4
Limerick	320	4.3	372	4.9	257	4.4	267	3.9	349	4.7	+9.1
Longford	40	0.5	50	0.7	47	0.8	32	0.5	48	0.6	+20.0
Louth	143	1.9	152	2.0	130	2.2	160	2.3	166	2.2	+16.1
Mayo	106	1.4	110	1.5	54	0.9	60	0.9	69	0.9	-34.9
Meath	125	1.7	131	1.7	87	1.5	104	1.5	110	1.5	-12.0
Monaghan	73	1.0	51	0.7	67	1.2	103	1.5	103	1.4	+41.1
Offaly	94	1.3	97	1.3	47	0.8	127	1.9	103	1.4	+9.6
Roscommon	38	0.5	64	0.8	67	1.2	84	1.2	80	1.1	+110.5
Sligo	175	2.3	224	3.0	139	2.4	152	2.2	167	2.3	-4.6
Tipperary	367	4.9	370	4.9	267	4.6	294	4.3	282	3.8	-23.2
Waterford	441	5.9	426	5.6	361	6.2	335	4.9	346	4.7	-21.5
Westmeath	81	1.1	94	1.2	62	1.1	60	0.9	81	1.1	0.0
Wexford	385	5.2	354	4.7	280	4.8	327	4.8	335	4.5	-13.0
Wicklow	180	2.4	161	2.1	166	2.9	224	3.3	244	3.3	+35.6
Unknown	33	0.4	8	0.1	8	0.1	~	~	~	~	~
Outside Ireland	49	0.7	26	0.3	31	0.5	35	0.5	43	0.6	0.0
Total	7464	100.0	7546	100.0	5824	100.0	6859	100.0	7421	100.0	-1.0

Source: National Drug Treatment Reporting System, 2023

~ Denotes five or fewer cases

7.1.2 Alcohol as an additional problem substance²

Treatment for alcohol use is often in combination with another substance. In addition to the 7,421 cases treated for alcohol as a main problem substance, there were a further 2,467 cases in 2022 treated for alcohol as an additional problem substance. Dublin, Cork and Limerick represented the

² Main problem substance means that alcohol was the first, or most problematic substance for which treatment was received when polydrug use .

counties with the greatest number of cases where alcohol use treatment was secondary to drug use treatment (Table 6). Most counties saw an increase in the number of cases receiving treatment for alcohol use as an additional problem substance.

Table 6 Treatment for alcohol as an additional problem substance, by county 2018–2022 (number, percentage and percentage change)

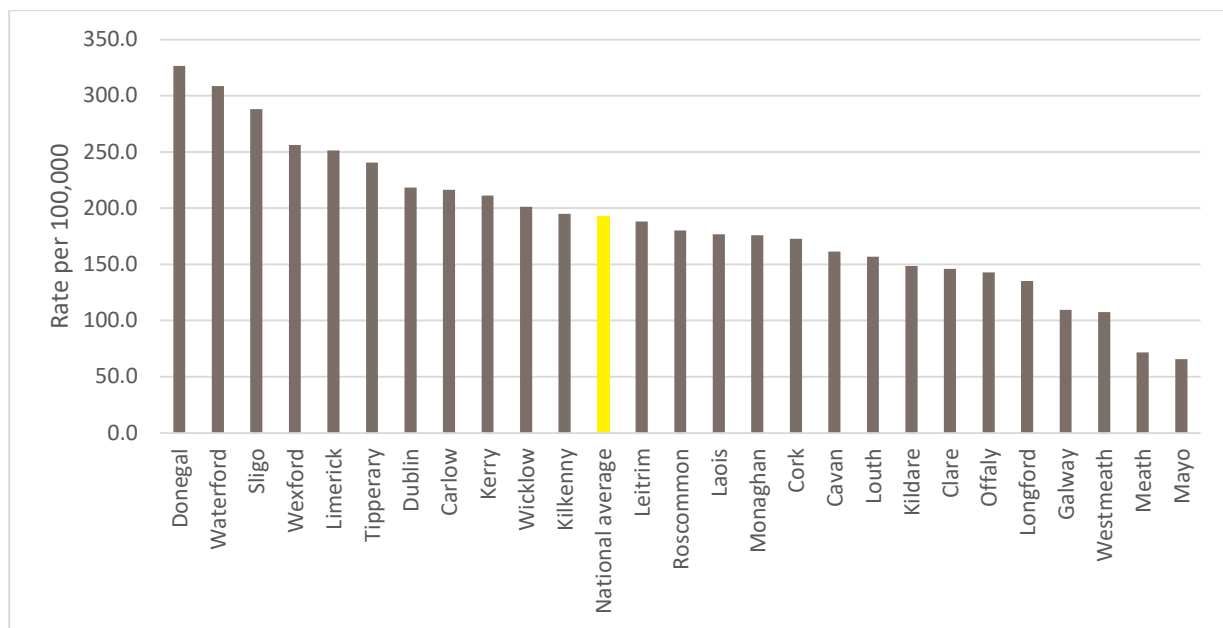
	2018		2019		2020		2021		2022		% change 2018–2022
	n	%	n	%	n	%	n	%	n	%	
Carlow	28	1.3	21	1.0	22	1.1	30	1.3	43	1.7	+53.6
Cavan	11	0.5	18	0.8	7	0.4	21	0.9	30	1.2	+172.7
Clare	62	3.0	68	3.1	41	2.1	42	1.9	48	1.9	-22.6
Cork	317	15.4	357	16.3	315	15.9	306	13.7	306	12.4	-3.5
Donegal	59	2.9	82	3.7	51	2.6	61	2.7	76	3.1	+28.8
Dublin	655	31.9	708	32.3	760	38.3	881	39.3	936	37.9	+42.9
Galway	31	1.5	32	1.5	29	1.5	41	1.8	28	1.1	-9.7
Kerry	103	5.0	71	3.2	50	2.5	73	3.3	72	2.9	-30.1
Kildare	39	1.9	47	2.1	43	2.2	53	2.4	76	3.1	+94.9
Kilkenny	22	1.1	33	1.5	22	1.1	34	1.5	32	1.3	+45.5
Laois	57	2.8	60	2.7	33	1.7	28	1.2	47	1.9	-17.5
Leitrim	5	0.2	5	0.2	6	0.3	5	0.2	5	0.2	0.0
Limerick	169	8.2	162	7.4	164	8.3	159	7.1	167	6.8	-1.2
Longford	15	0.7	18	0.8	5	0.3	~	~	15	0.6	0.0
Louth	58	2.8	50	2.3	32	1.6	50	2.2	52	2.1	-10.3
Mayo	18	0.9	12	0.5	12	0.6	14	0.6	21	0.9	+16.7
Meath	21	1.0	27	1.2	39	2.0	39	1.7	48	1.9	+128.6
Monaghan	~	~	8	0.4	10	0.5	5	0.2	11	0.4	~
Offaly	23	1.1	16	0.7	12	0.6	10	0.4	15	0.6	-34.8
Roscommon	6	0.3	26	1.2	45	2.3	46	2.1	46	1.9	+666.7
Sligo	16	0.8	31	1.4	14	0.7	24	1.1	34	1.4	+112.5
Tipperary	127	6.2	125	5.7	100	5.0	120	5.4	121	4.9	-4.7
Waterford	82	4.0	64	2.9	37	1.9	48	2.1	46	1.9	-43.9
Westmeath	22	1.0	34	1.6	13	0.7	15	0.7	22	0.9	0.0
Wexford	59	2.9	52	2.4	61	3.1	63	2.8	84	3.4	+42.4
Wicklow	28	1.4	52	2.4	55	2.8	55	2.5	69	2.8	+146.4
Unknown	11	0.5	~	~	5	0.3	~	~	~	~	~
Outside Ireland	6	0.3	6	0.3	~	~	15	0.7	16	0.6	~
Total	2053	100.0	2189	100.0	1986	100.0	2241	100.0	2467	100.0	+20.2

Source: National Drug Treatment Reporting System, 2023

~denotes cells with less than 5 cases and corresponding percentages

Figure 7 combines the number of cases that received treatment for alcohol as either a main problem substance or an additional problem substance (combined) in 2022 and presents the rate per 100,000 of the population for each county from highest (Donegal) to lowest (Mayo).

Figure 7 Treatment for alcohol as a main or an additional problem substance, by county 2022, rate per 100,000 population



Source: National Drug Treatment Reporting System, 2023

7.2 National Psychiatric Inpatient Reporting System

The National Psychiatric Inpatient Reporting System (NPIRS) is also managed by the HRB and provides detailed information on all admissions to, and discharges from, inpatient psychiatric services in Ireland. Data are collected from psychiatric hospitals, general hospital psychiatric units, private hospitals, children's centres, and the Central Mental Hospital. Each admission and discharge represents one episode or event, and not an individual patient; while a single individual may have several admissions in any given year, each one of these is recorded as a separate event. Diagnoses are categorised in accordance with the World Health Organization's (WHO) International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10) [12]. NPIRS data are available in a series of interactive tables which are hosted on the CSO's website [13].

The majority of psychiatric treatment for those with alcohol use disorders takes place in outpatient settings rather than in psychiatric facilities since 2006 when the mental health strategy, *A Vision for Change* was published [14]. The strategy recommended that those with substance use problems but without mental health problems did not fall within the remit of mental health services and as a result, numbers of alcohol-related inpatient admissions to psychiatric units in Ireland decreased considerably [15]. However, individuals continued to receive treatment for alcohol-related disorders in psychiatric units and hospitals, and where they do, they are recorded on the NPIRS. The 2020 policy document, *Sharing the vision: a mental health policy for everyone*, saw a reversal of the 2006 recommendations and states that where an individual has co-existing mental health difficulties and addiction to either alcohol or drugs, they should not be prevented from accessing mental health services [16].

Data presented here are based on all admissions to, discharges from, and deaths during the period 2018—2022 returned to the NPIRS in the 67 Irish psychiatric units and hospitals approved by the Mental Health Commission (MHC) for the reception and treatment of patients. The rates reported here and in the NPIRS publications are per 100,000 total population based on the Census of

Population 2016 [17]. As per the reasons outlined earlier, there has been a considerable decrease in the number of admissions to psychiatric hospitals for alcohol-related diagnoses since 2006 [18].

When examining by county, the rate per 100,000 of alcohol-related psychiatric admissions has fluctuated between 2018 and 2022, with a particular drop in 2020 most likely due to the COVID-19 pandemic (Table 7).

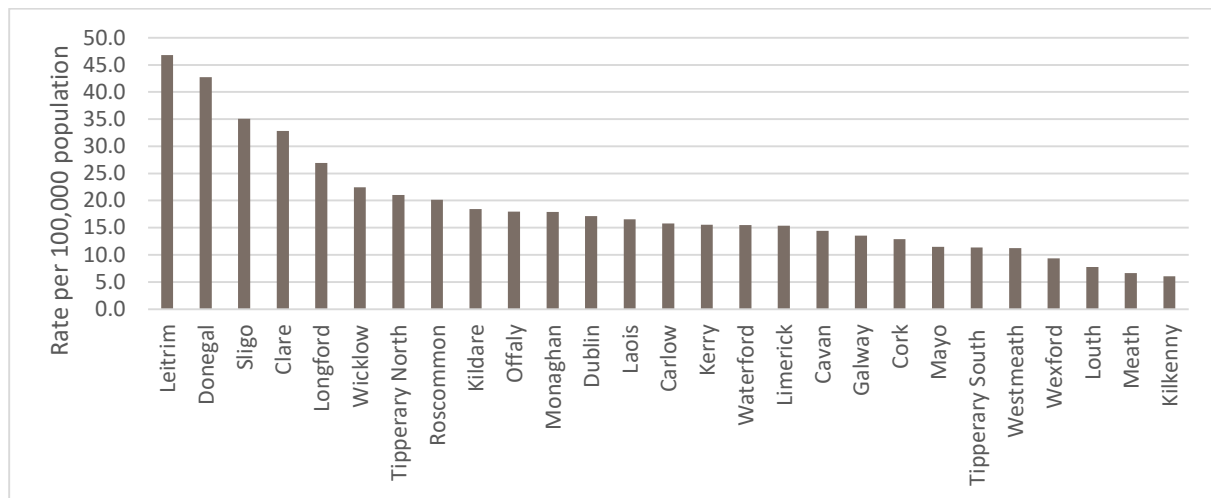
Table 7 Alcohol-related diagnoses admitted to psychiatric units/hospitals by county, 2018—2022. Rates per 100,000 total population

	2018	2019	2020	2021	2022
Carlow	10.5	28.1	14.1	8.8	15.8
Cavan	10.5	14.4	3.9	9.2	14.4
Clare	29.5	26.1	16.8	24.4	32.8
Cork	14.4	13.6	14.6	10.1	12.9
Donegal	50.3	33.3	43.3	54.0	42.7
Dublin	32.2	31.5	27.3	16.2	17.1
Galway	11.6	17.1	9.3	14.3	13.6
Kerry	28.4	28.4	17.6	10.2	15.6
Kildare	25.2	20.7	19.3	13.9	18.4
Kilkenny	21.2	20.2	20.2	12.1	6.0
Laois	11.8	2.4	5.9	4.7	16.5
Leitrim	46.8	46.8	28.1	40.6	46.8
Limerick	12.8	9.2	7.7	9.2	15.4
Longford	26.9	26.9	19.6	4.9	26.9
Louth	15.5	21.7	14.7	16.3	7.8
Mayo	13.0	14.6	12.3	17.6	11.5
Meath	14.4	17.9	18.5	10.8	6.7
Monaghan	9.8	19.5	19.5	9.8	17.9
Offaly	12.8	12.8	10.3	11.5	18.0
Roscommon	27.9	31.0	15.5	20.1	20.1
Sligo	30.5	25.9	35.1	29.0	35.1
Tipperary North	16.8	30.9	22.4	21.0	21.0
Tipperary South	12.5	10.2	11.3	18.1	11.3
Waterford	19.8	14.6	32.7	34.4	15.5
Westmeath	16.9	24.8	18.0	13.5	11.3
Wexford	11.4	12.0	11.4	11.4	9.4
Wicklow	26.7	35.8	26.7	9.8	22.5

Source: National Psychiatric Inpatient Reporting System, 2023

In 2022, Leitrim had the highest rate per 100,000 of the population of alcohol-related psychiatric hospital admissions, followed by Donegal and Sligo. Kilkenny and Meath had the lowest rate compared to other counties (Figure 8).

Figure 8 Alcohol-related diagnoses admitted to psychiatric units/hospitals by county, 2022. Rates per 100,000 total population



Source: National Psychiatric Inpatient Reporting System, 2023

The majority of alcohol-related diagnoses admissions to psychiatric hospitals and units were re-admissions. Table 8 displays the rate of *first* admissions (per 100,000 of the population) by county. Leitrim and Donegal reported the highest rate per 100,000 of the population for *first* admissions to psychiatric hospitals or units for alcohol-related diagnoses in 2022 (Table 8).

Table 8 First admissions for alcohol-related diagnoses admitted to psychiatric units/hospitals by county, 2018–2022. Rates per 100,000 total population

	2018	2019	2020	2021	2022
Carlow	1.8	8.8	7.0	1.8	1.8
Cavan	5.3	7.9	2.6	5.3	7.9
Clare	4.2	5.0	10.1	8.4	11.8
Cork	4.8	6.6	7.0	3.7	6.4
Donegal	16.3	9.4	12.6	19.5	15.1
Dublin	10.5	6.6	9.4	5.9	5.0
Galway	6.6	6.6	5.4	7.0	5.8
Kerry	16.2	7.4	8.1	4.1	6.1
Kildare	11.2	4.0	9.9	5.4	4.0
Kilkenny	9.1	6.0	5.0	6.0	0.0
Laois	8.3	0.0	1.2	3.5	3.5
Leitrim	6.2	18.7	6.2	9.4	15.6
Limerick	6.7	2.1	5.6	4.6	5.1
Longford	9.8	7.3	9.8	2.4	7.3
Louth	5.4	9.3	5.4	10.9	3.1
Mayo	6.1	4.6	3.8	7.7	3.8
Meath	6.7	6.2	10.8	6.7	3.6
Monaghan	3.3	3.3	8.1	6.5	6.5
Offaly	6.4	3.8	2.6	6.4	7.7
Roscommon	10.8	9.3	9.3	10.8	7.7
Sligo	6.1	7.6	15.3	1.5	10.7

	2018	2019	2020	2021	2022
Tipperary North	5.6	8.4	7.0	7.0	5.6
Tipperary South	5.7	1.1	4.5	12.5	2.3
Waterford	3.4	6.0	10.3	12.9	3.4
Westmeath	6.8	11.3	9.0	5.6	1.1
Wexford	4.7	4.7	5.3	7.3	2.0
Wicklow	9.1	7.0	9.8	4.9	4.9

Source: National Psychiatric Inpatient Reporting System, 2023

8 Alcohol-related deaths

The National Drug-Related Deaths Index (NDRDI) is a census of drug- and alcohol-related poisoning deaths (deaths due to the toxic effects of one or more substances on the body), and of deaths among people who used drugs and/or people who were alcohol dependent in Ireland. For more information about the criteria for which a death is registered on the NDRDI as ‘alcohol-related’, see the HRB alcohol overview as well as detailed information about alcohol-related deaths at a national level [1]. County breakdown of alcohol-related deaths can be found in the 2019 county alcohol-related harm profiles [19]. Since that publication, updated alcohol-related deaths have not yet been published due to a combination of the time delay normally experienced in collecting data from closed Coronial files but exacerbated due to limited access to coroners’ offices because of the COVID-19 public health restrictions. Up-to-date alcohol-related deaths data from the NDRDI is expected to be published in late 2023.

During the reporting period 2004—2016, there were:

- 1,756 poisonings where alcohol was implicated in the cause of death, over half (53%) involved more than one substance.
- 369 poisoning deaths among alcohol dependent persons where alcohol was *not* implicated in the death.
- 10,046 non-poisoning deaths among persons known to be alcohol dependent
- 894 non-poisoning deaths among persons *not* known to be alcohol dependent, but alcohol was implicated in the deaths.

The data presented in Table 9 summarises what was published in the 2019 county alcohol-related harm profiles [19]. Note that as data is displayed in different categories, there will be overlap of individual deaths included in different columns.

Table 9 Alcohol-related deaths by county, 2004—2016

	Poisonings where alcohol was implicated in the cause of death	Poisoning deaths among alcohol dependent persons (alcohol was NOT implicated)	Non-poisoning deaths among persons known to be alcohol dependent	Non-poisoning deaths where alcohol was implicated in the death
Carlow	30	~	54	8
Cavan	33	~	111	27
Clare	34	7	137	21
Cork	196	31	1176	99

	Poisonings where alcohol was implicated in the cause of death	Poisoning deaths among alcohol dependent persons (alcohol was NOT implicated)	Non-poisoning deaths among persons known to be alcohol dependent	Non-poisoning deaths where alcohol was implicated in the death
Donegal	58	10	298	29
Dublin	563	217	4009	253
Galway	67	5	427	20
Kerry	52	8	350	24
Kildare	53	13	339	45
Kilkenny	18	~	110	6
Laois	26	~	88	9
Leitrim	11	~	58	16
Limerick	70	9	326	39
Longford	16	~	82	21
Louth	49	9	282	19
Mayo	71	~	322	46
Meath	57	7	228	29
Monaghan	23	~	118	13
Offaly	22	~	118	~
Roscommon	13	5	133	16
Sligo	27	~	136	22
Tipperary	59	5	248	28
Waterford	51	~	215	9
Westmeath	41	~	137	20
Wexford	44	~	217	49
Wicklow	38	8	241	10

Source: National Drug-Related Deaths Index

~ denotes cells with less than 5 cases.

Note that there were alcohol-related deaths where the county of residence of the individual was not known and therefore totals do not match those reported at a national level in the 2021 HRB Alcohol Overview.

Note that as data is displayed in different categories, there will be overlap of individual deaths included in different columns.

8.1 Fatal road traffic collisions involving alcohol

On behalf of the Road Safety Authority (RSA), the NDRDI team in the HRB also collect information on fatal road traffic collisions (RTC) using the same NDRDI methodology. In 2020, the RSA published a report on the number of fatal RTCs that occurred during the period 2013—2017 [20]. During this period, there were 219³ road user fatalities with a positive toxicology for alcohol, meaning that the deceased had a Blood Alcohol Concentration (BAC) of >20g alcohol per 100mL of blood (or

³ Note that the total number of fatalities do not correspond to the county total due to cells with less than 5 people not displayed

equivalent in urine). Of these fatalities, 135 were the driver of the car, van, tractor or truck in the RTC.

Table 10 Fatal Road traffic collisions with a positive toxicology for alcohol (all and driver), by county, 2013–2017

	Fatalities with a positive toxicology for alcohol		Driver fatalities with a positive toxicology for alcohol	
	n	%	n	%
Carlow	0	0.0	0	0.0
Cavan	5	2.3	0	0.0
Clare	0	0.0	0	0.0
Cork	20	9.1	12	8.9
Donegal	13	5.9	6	4.4
Dublin	29	13.2	15	11.1
Galway	18	8.2	13	9.6
Kerry	9	4.1	0	0.0
Kildare	11	5.0	9	6.7
Kilkenny	0	0.0	0	0.0
Laois	5	2.3	0	0.0
Leitrim	0	0.0	0	0.0
Limerick	12	5.5	0	0.0
Longford	5	2.3	0	0.0
Louth	15	6.8	9	6.7
Mayo	13	5.9	9	6.7
Meath	6	2.7	0	0.0
Monaghan	7	3.2	6	4.4
Offaly	0	0.0	0	0.0
Roscommon	0	0.0	0	0.0
Sligo	0	0.0	0	0.0
Tipperary	10	4.6	7	5.2
Waterford	0	0.0	0	0.0
Westmeath	0	0.0	0	0.0
Wexford	10	4.6	8	5.9
Wicklow	5	2.3	0	0.0

Source: Road Safety Authority

9 Alcohol-related crime

The information presented here refers to alcohol-related crimes as recorded on the Police Using Leading Systems Effectively (PULSE) data system by An Garda Síochána and available through the CSO [21]. The Recorded Crimes Offences statistics published by the CSO are classified as ‘Under Reservation’ to reflect the fact that there are data quality issues in the underlying sources used to compile these statistics. PULSE data is available by Garda Division only, which corresponds largely to county level although for more populated counties as well as the least populated counties, the boundaries differ. Therefore, the rates per population are not available.

9.1 Drink-driving

In Ireland, the current drink-driving limit is a blood alcohol concentration (BAC) of 50 mg (50 mg of alcohol per 100 mL of blood). This limit reduces to 20mg for professional drivers and for learner or novice drivers. In 2022 there were 5,546 recorded offences of drink-driving (driving/in charge of a vehicle while over the legal alcohol limit).

Every Garda Division saw a decrease in the number of drink-driving offences recorded between 2018—2022 except for the Westmeath region where a 5.5% increase was recorded and the Dublin Metropolitan Region North Central region where a 2.2% increase was recorded. There was no change in the number of drink-driving offences recorded in Sligo/Leitrim Garda Division (Table 11).

Table 11 Driving/in charge of a vehicle while over legal alcohol limit offences by Garda Division, 2018-2022

	2018	2019	2020	2021	2022	% change 2018— 2022
Cavan/Monaghan	346	313	258	270	289	-16.5
Clare	180	194	114	100	123	-31.7
Cork City	304	262	231	243	241	-20.7
Cork North	291	239	204	162	211	-27.5
Cork West	188	191	121	103	134	-28.7
Dublin Metropolitan Region Eastern	143	131	122	97	121	-15.4
Dublin Metropolitan Region North Central	180	180	163	177	184	+2.2
Dublin Metropolitan Region Northern	315	298	290	266	278	-11.7
Dublin Metropolitan Region South Central	163	109	127	113	143	-12.3
Dublin Metropolitan Region Southern	229	211	217	168	206	-10.0
Dublin Metropolitan Region Western	348	417	387	304	320	-8.0
Donegal	330	371	224	252	312	-5.5
Galway	394	376	331	295	326	-17.3
Kerry	278	259	153	175	204	-26.6
Kildare	399	306	196	237	287	-28.1
Kilkenny/Carlow	238	241	166	122	139	-41.6
Laois/Offaly	277	270	165	144	158	-43.0
Limerick	290	237	159	176	190	-34.5
Louth	225	186	148	162	174	-22.7
Mayo	216	170	135	147	153	-29.2
Meath	289	283	279	258	245	-15.2
Roscommon/Longford	168	111	107	120	117	-30.4
Sligo/Leitrim	131	135	95	121	131	0.0
Tipperary	382	332	248	224	234	-38.7
Waterford	206	207	158	179	202	-1.9
Westmeath	163	146	117	127	172	+5.5
Wexford	269	232	112	153	151	-43.9
Wicklow	138	155	133	91	101	-26.8

Source: Central Statistics Office, PULSE data, 2023

9.2 Disorderly conduct

Disorderly conduct relates to behaviour that disturbs the peace or safety of the general public or behaviour that annoys, alarms, offends, or inconveniences other people. It also refers to situations where the behaviour of an individual or individuals physically injures or financially harms others. Alcohol is not always a factor in disorderly conduct, but previous research indicates that alcohol is a factor in a substantial percentage of such crimes [22]. It has also been previously noted that many disorderly crimes are not reported or not recorded. However, these facts should be borne in mind when interpreting these statistics.

In 2022, disorderly conduct offences were most commonly reported in the Garda Division of Dublin Metropolitan Region South Central, Dublin Metropolitan Region North Central and Cork City (Table 12). Many Garda Division regions saw a decline in the number of offences recorded for disorderly conduct during the period 2018—2022, particularly Cork West Garda Division and Clare Garda Division. Increases in the number of disorderly conduct offences recorded on PULSE were noted in many areas but particularly in Kildare Garda Division and Dublin Metropolitan Region Northern.

Table 12 Disorderly conduct offences by Garda Division, 2018-2022

	2018	2019	2020	2021	2022	% change 2018—2022
Cavan/Monaghan	1124	1152	787	870	940	-16.4
Clare	533	437	345	329	337	-36.8
Cork City	2145	2074	1904	2074	2109	-1.7
Cork North	781	838	672	657	728	-6.8
Cork West	515	520	317	293	290	-43.7
Dublin Metropolitan Region Eastern	490	521	637	551	503	+2.7
Dublin Metropolitan Region North Central	1838	2018	2076	1753	2253	+22.6
Dublin Metropolitan Region Northern	984	1127	1237	1115	1346	+36.8
Dublin Metropolitan Region South Central	2759	2909	2729	2618	2534	-8.2
Dublin Metropolitan Region Southern	845	959	1090	977	954	+12.9
Dublin Metropolitan Region Western	1125	1243	1448	1313	1329	+18.1
Donegal	1126	1273	743	801	993	-11.8
Galway	1528	1568	1332	1353	1377	-9.9
Kerry	1363	1299	896	831	1059	-22.3
Kildare	622	738	620	681	861	+38.4
Kilkenny/Carlow	1001	1012	814	775	823	-17.8
Laois/Offaly	705	792	613	644	856	+21.4
Limerick	991	939	837	883	862	-13.0
Louth	964	1035	897	835	1037	+7.6
Mayo	610	567	394	446	546	-10.5
Meath	418	491	492	428	392	-6.2
Roscommon/Longford	379	363	329	352	342	-9.8
Sligo/Leitrim	571	675	491	476	595	+4.2
Tipperary	1031	941	738	905	965	-6.4
Waterford	871	895	807	944	1093	+25.5
Westmeath	530	500	366	411	555	+4.7
Wexford	633	563	399	437	513	-19.0
Wicklow	452	509	481	377	357	-21.0

Source: Central Statistics Office, PULSE data, 2023

9.3 Liquor licencing offences

Any individual or organisation manufacturing or selling alcohol must hold a valid liquor licence. Examples of liquor licence offences that may be recorded on the PULSE system are where alcohol is traded without a licence, or where a liquor type is traded but not included under the licence type held, trading outside of opening hours, or if a minor is served alcohol. The Garda Divisions with the most liquor licencing offences recorded on the PULSE system in 2022 were Kerry, Clare and Cork North (Table 13). The majority of Garda Divisions saw a decrease in the number of liquor licencing offences during the period 2018 to 2022 with increases noted in Roscommon/Longford and Cork North, albeit from a low base.

Table 13 Liquor licencing offences by Garda Division, 2018-2022

	2018	2019	2020	2021	2022	% change 2018—2022
Cavan/Monaghan	30	29	12	9	5	-83.3
Clare	60	33	11	10	23	-61.7
Cork City	40	27	19	10	13	-67.5
Cork North	14	27	13	9	22	+57.1
Cork West	30	27	8	15	8	-73.3
Dublin Metropolitan Region Eastern	1	6	7	16	0	-100.0
Dublin Metropolitan Region North Central	13	16	13	10	12	-7.7
Dublin Metropolitan Region Northern	3	6	4	4	2	-33.3
Dublin Metropolitan Region South Central	27	4	3	6	11	-59.3
Dublin Metropolitan Region Southern	12	5	7	7	2	-83.3
Dublin Metropolitan Region Western	11	9	10	7	11	0.0
Donegal	33	43	27	15	8	-75.8
Galway	34	48	26	18	18	-47.1
Kerry	68	65	26	21	25	-63.2
Kildare	6	9	5	3	1	-83.3
Kilkenny/Carlow	18	27	5	5	2	-88.9
Laois/Offaly	19	13	10	11	6	-68.4
Limerick	49	29	12	18	13	-73.5
Louth	7	6	6	3	7	0.0
Mayo	13	10	8	12	5	-61.5
Meath	14	14	7	3	10	-28.6
Roscommon/Longford	5	6	7	6	9	+80.0
Sligo/Leitrim	13	7	7	7	5	-61.5
Tipperary	29	16	18	16	13	-55.2
Waterford	9	13	12	7	1	-88.9
Westmeath	7	10	1	0	2	-71.4
Wexford	9	5	4	0	4	-55.6
Wicklow	7	18	13	17	1	-85.7

Source: Central Statistics Office, PULSE data, 2023

9.4 Public order and other social code offences

Public order and other social code offences refer to how people behave in public, and the most common example is being drunk in a public place. However, it should be noted that not all public order and social code offences involve alcohol, and this should be borne in mind when interpreting the findings here.

Public order and other social code offences were more commonly recorded on the PULSE system in Dublin Metropolitan Region North Central, Dublin Metropolitan Region South Central and Cork City Garda Divisions (Table 14). The number of public order and other social code offences recorded on the PULSE system fluctuated during the period from 2018 to 2022 but the greatest decrease was noted in Cork West Garda Division and Clare Garda Division. Increases in public order and other social code offences recorded on the PULSE system were noted in Dublin Metropolitan Region Northern Garda Division and Kildare Garda Division.

Table 14 Public order and other social code offences by Garda Division, 2018-2022

	2018	2019	2020	2021	2022	% change 2018—2022
Cavan/Monaghan	1220	1254	862	929	1002	-17.9
Clare	652	505	396	381	410	-37.1
Cork City	2543	2311	2111	2311	2559	0.6
Cork North	853	911	744	725	805	-5.6
Cork West	580	583	360	337	329	-43.3
Dublin Metropolitan Region Eastern	640	738	873	721	694	+8.4
Dublin Metropolitan Region North Central	2559	2648	2858	2474	3249	+27.0
Dublin Metropolitan Region Northern	1246	1395	1510	1462	1650	+32.4
Dublin Metropolitan Region South Central	3561	3430	3152	2921	2924	-17.9
Dublin Metropolitan Region Southern	1091	1229	1341	1186	1161	+6.4
Dublin Metropolitan Region Western	1315	1494	1746	1577	1625	+23.6
Donegal	1194	1390	816	870	1068	-10.6
Galway	1749	1733	1505	1539	1523	-12.9
Kerry	1500	1431	977	918	1132	-24.5
Kildare	747	861	731	787	983	+31.6
Kilkenny/Carlow	1125	1134	887	841	873	-22.4
Laois/Offaly	815	878	688	738	922	+13.1
Limerick	1394	1226	1409	1382	1176	-15.6
Louth	1049	1129	1012	941	1152	+9.8
Mayo	684	625	436	499	580	-15.2
Meath	491	585	570	504	477	-2.9
Roscommon/Longford	417	403	368	400	391	-6.2
Sligo/Leitrim	625	727	548	517	670	+7.2
Tipperary	1117	1003	816	989	1080	-3.3
Waterford	949	963	880	1022	1160	+22.2
Westmeath	610	568	405	454	614	+0.7
Wexford	699	629	465	483	574	-17.9
Wicklow	533	611	561	467	405	-24.0

Source: Central Statistics Office, PULSE data, 2023

10 Conclusion

The data presented in this report indicate that per capita alcohol use in Ireland has declined since pre-COVID. In 2019, Ireland's per capita alcohol use ranked us at 9th highest out of 45 OECD countries and although in 2022, still above the OECD average, Ireland is now ranked 11th. Despite the decline, many drinkers continue to consume alcohol in a manner that is risky to their health and alcohol remains widely available with in excess of 14,000 liquor licences issued in 2022.

An overall national decline of 4.5% in alcohol-related hospitalisations between 2018—2022 is certainly welcome, however a number of counties saw an increase in alcohol-related hospitalisations, and alcohol-related liver disease hospitalisations increased by 3.3%.

Treatment for alcohol as a main problem substance has declined but alcohol treatment as an additional substance requiring treatment, has increased. Donegal had the highest rate of alcohol treatment per 100,000 of the population. Leitrim and Donegal had the highest rate of psychiatric hospital/unit admissions for alcohol-related disorders.

Drink-driving incidents recorded on the PULSE system have declined between 2018—2022, as have the number of incidents of disorderly conduct and liquor licensing offences. However, it is not known if these declines in alcohol-related crime detection reflect a genuine decrease, or a consequence of changing Garda priorities or the targeting of particular activities. The under-reporting of crime, particularly those in this report, suggests that this is an underrepresentation of the full extent of alcohol-related crime.

These are early indications that the commencement of several components of the Public Health (Alcohol) Act, 2018 may already have had an impact in reducing alcohol-related harms.

Commencement of the outstanding sections of the Act would likely be beneficial in further reducing alcohol-related harms in Ireland.

11 Data gaps and recommendations

There are gaps in our knowledge about alcohol use and resulting harms and for county level analysis, this report highlights the information where county level alcohol data is absent. Although there are many existing data sources, from routine surveys to national databases, the absence of alcohol-related ED presentations represents an important knowledge gap. International research and smaller ad hoc studies show that alcohol places a significant burden on our EDs. Other jurisdictions use ED data and ambulance callouts that are alcohol-related to effectively monitor policy change, the lack of this data in Ireland presents a challenge for those evaluating the full impact of the Act.

In addition, there are potentially vulnerable populations that are overlooked when examining data at county level. For example, rural areas within counties where there is a lack of treatment services or 'pockets' of socially deprived areas that may require additional intervention services as well as treatment services. It is important to fully delve into the available data to really understand the regional variations, especially at a more local level than county, to explore the potentially different needs of each community in Ireland.

12 Appendix 1

Table 15 Alcohol-related discharges ICD-10-AM diagnosis codes

ICD-10-AM code	Description
E24.4	Alcohol-induced pseudo-Cushing's syndrome
F10	Mental and behavioural disorders due to use of alcohol
F10.0	Acute intoxication
F10.1	Harmful use
F10.2	Dependence syndrome
F10.3	Withdrawal state
F10.4	Withdrawal state with delirium
F10.5	Psychotic disorder
F10.6	Amnesic syndrome
F10.7	Residual and late onset psychotic disorder
F10.8	Other mental and behavioural disorders
F10.9	Unspecified mental and behavioural disorder
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
G72.1	Alcoholic myopathy
I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis
K70	Alcoholic liver disease
K70.0	Alcoholic fatty liver
K70.1	Alcoholic hepatitis
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.3	Alcoholic cirrhosis of liver
K70.4	Alcoholic hepatic failure
K70.9	Alcoholic liver disease, unspecified
K85.2	Alcohol-induced acute pancreatitis
K86.0	Alcohol-induced chronic pancreatitis
O35.4	Maternal care for (suspected) damage to fetus from alcohol
P04.3	Fetus and newborn affected by maternal use of alcohol
Q86.0	Fetal alcohol syndrome (dysmorphic)
R78.0	Finding of alcohol in blood
T51	Toxic effect of alcohol
T51.0	Ethanol
T51.1	Methanol
T51.2	2-Propanol
T51.3	Fusel oil
T51.8	Other alcohols
T51.9	Alcohol unspecified
X45	Accidental poisoning by and exposure to alcohol
X45	Accidental alcohol poisoning
X65	Intentional self-poisoning by and exposure to alcohol

ICD-10-AM code	Description
X65	Intentional alcohol poisoning
Y15	Poisoning by and exposure to alcohol, undetermined intent
Y15	Alcohol poisoning – undetermined intent
Y90.0 – Y90.9	Evidence of alcohol involvement determined by blood alcohol level
Y91.0 – Y91.9	Evidence of alcohol involvement determined by level of intoxication
Z50.2	Alcohol rehabilitation
Z71.4	Counselling and surveillance for alcohol use disorder
Z72.1	Alcohol use
Z86.41	Personal history of alcohol use disorder

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