

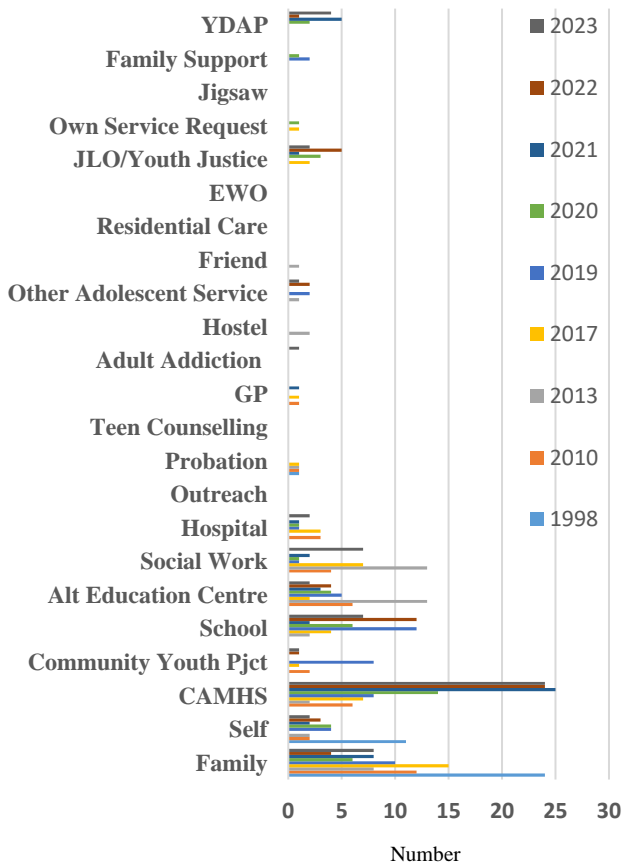


Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Adolescent Addiction Service Report 2024

In 2023, the Adolescent Addiction Service worked with 60 young people and their families, with a mean age of 15 years (range 13-18 years). In comparison to 2022, referrals were up by 13%, reflecting an annual increase in referrals over the past four years. However, 6% of referrals were from outside of catchment area and as a result, 3% were referred to services within their own area. The majority of referrals (71%) were male, which reflects a five percent reduction on 2022. Similar to previous years, referrals were received from a broad range of services. See Fig.1 for a comparison.

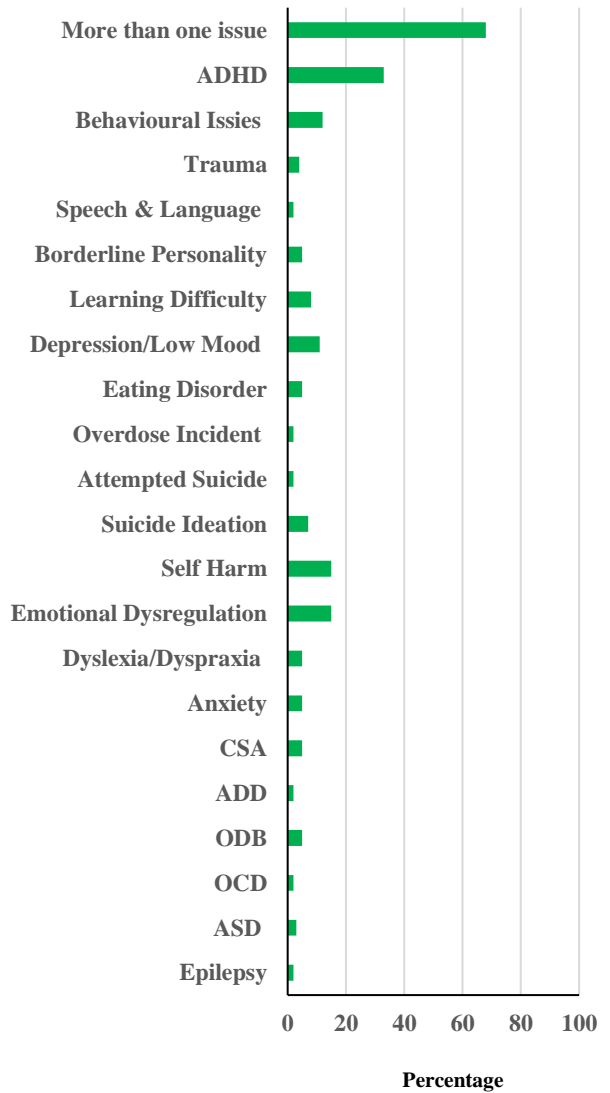
Fig 1: Referral Source



Comparable to 2022, the most common source of referral (40%) were from Child & Adolescent Mental Health Service (CAMHS) with 65% having a history of contact with CAMHS. This

reflects the extent to which Dual Diagnosis features among young people attending the service. See Fig.2 identifying co-occurring conditions. In addition to 3% having diagnosis of ASD a further 2% were identified as candidates for assessment after parents completed National Institute for Health Research Autism Spectrum (AQ-10) brief screening questionnaire.

Fig. 2: Co-occurring conditions



In addition to direct work with young people and families, the service engaged in consultations with professionals and services about young people for whom there were concerns in relation to substance misuse and maintained inter-agency collaboration with all services within catchment area in order to achieve the best outcomes for young people and their families. The service also facilitated and participated in Meitheal's and Child Welfare Case Conferences as well as submitting a number of

Child Welfare Reports to Tusla. Additionally, the service engaged in consultations with Tusla, HSE Childrens First Officer, HSE Adult Addiction Service, Childrens & Young Persons Services Committee (CYPSC), and community services around the importance of embedding ownership of requirement to act within Childrens First and Hidden Harm and for practitioners to think about children when assessing risks for adults who access services. In Addition, the service contributed to teaching modules on Masters Programme in Addiction Recovery, Trinity College Dublin, and was represented at the following conferences.

- Local Drug and Alcohol Task Forces Conference, addressing the importance of place.
- 9th Annual Irish Criminal Justice Agencies (ICJA) Conference, addressing Penal Policy Reform - Putting Community at the Heart of the Criminal Justice System.
- 4th Autism and Systemic Practice Conference on “Re-Visioning Neuro-Inclusive Therapy.
- Youth Mental Health Conference Research Informing Policy and Practice.
- Department of Health Conference: Evidence for Policy.

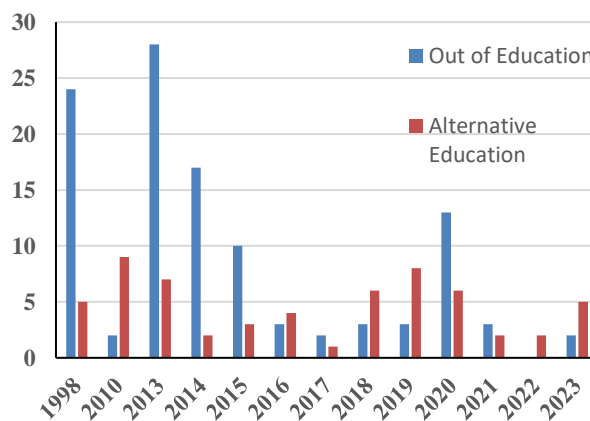
The family therapist participated in systemic practice groups by ZOOM with colleagues working within CAMHS. Additionally, the service took part in a general Addiction Services Survey exploring service user feedback on positives and areas for improvement. The following is a representative sample of feedback provided by young people and parents.

- Female - compassion, understanding and advice. Very comforting
- Female - clear communication

- Female - very relaxed and easy to talk to.
- Male - a safe space to talk facilitated by....The family are benefiting from the holistic approach
- Male - allows me to have a voice and express feelings
- Professional staff who has a wonderful way of working with families
- Male - nothing, was good

The numbers of young people attending the service of school going age, who were out of education/training at time of referral, was 3% with a further 8% in Alternative Education Programmes. Additionally a number of young people were absconding from school or had poor school attendance. This reflects a shift in comparison to 2022 when there was no young person of school going age out of education. See Fig.3 for comparison with previous years.

Fig.3: Number of young people of school going age out of education or in alternative education at time of referral

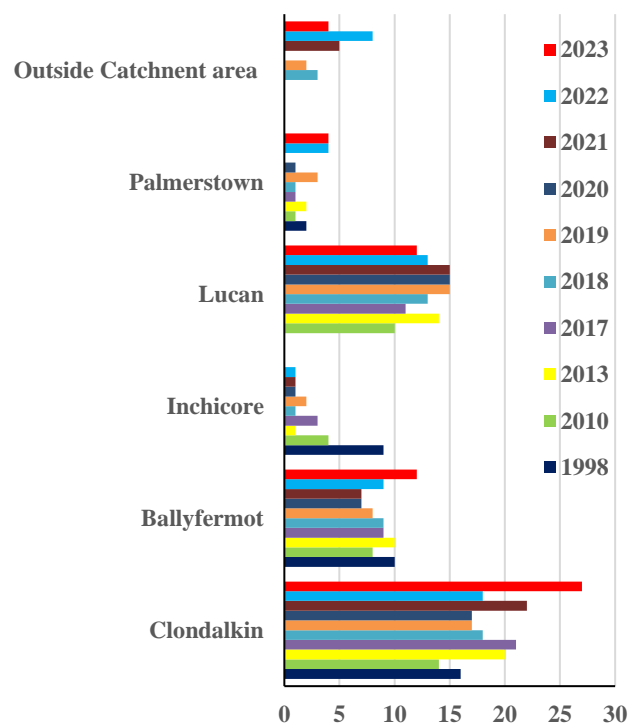


All attendees were known to a number of agencies and on average the service had contact with three agencies on behalf of young people (range: 1-5) in addition to other concerned persons. The extent to which substance misuse featured within families was slightly higher at 48% compared to 42% in 2022. The incidence of parental separation was also higher at 56% compared to 28% in 2022.

Additionally, some young people had one parent who was deceased, while others had experienced domestic violence or sexual abuse. While the majority of young people lived with their family, but 10% were in residential care or foster care.

In terms of referral areas, the greatest numbers of referrals were from Clondalkin, followed by Lucan, Ballyfermot, Palmerstown and Inchicore. See Fig.4 for comparison with previous years.

Fig.4: Referral Areas



Cannabis/Weed continues to be the primary substance of use, with an overall use rate of 87% reflecting an 11% decrease compared to 2022 and in terms of mechanism of ingestion, 8% confirmed consuming edibles as well as smoking and 2% consumed in vape. Alcohol, featured among 57% of service users reflecting a 22% increase in comparison to 2022. Other substances of reported use included Nitrous Oxide 18%, Amphetamines 12%, Cocaine 8%, Ketamine 7%, Solvents 3% and LSD 2% reflecting the changing nature of substance use. Opiates did not feature except as a consequence of over the counter medication.

The service participated in screening for synthetic cannabinoids (SPICE products) with thirty adolescents attending three services in south-west Dublin and Co Wicklow participated in screening.

One young person from across all services tested positive for any of the screened synthetic cannabinoid. This sample was sent to UK for testing, where upon further analysis; the presence of synthetic cannabinoid receptor agonists (SCRA) was confirmed. The young person was attending service associated with this report, indicating availability of synthetic cannabinoids within catchment area. There is increasing concern in relation to Hexahydrocannabinol (HHC) sold in vapes, in Ireland. The use of these products was first identified in Europe in May 2022. It is the first semi-synthetic cannabinoid reported in the EU, and is being monitored as a New Psychoactive Substance (NPS) by EU Early Warning System since October 2022. Significantly, HSE report indicates that there was no evidence during recent night-time economy drug monitoring of use of HHC at festival settings.

The HSE will add content about HHC to its website Drugs.ie. The core messaging relating to HHC indicates that there is limited available information and very little known about the risks associated with this substance and the extent of its use in Ireland. However, an article has been recently published in the Irish Journal of Psychological Medicine titled, ‘HHC-induced psychosis: a case series of psychotic illness triggered by a widely available semisynthetic cannabinoid’ (O’Mahoney et.al, 2024) which is available at:

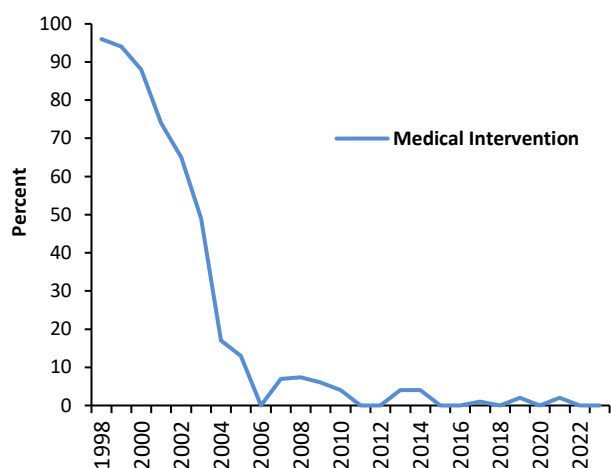
<https://www.cambridge.org/core/journals/irish-journal-of-psychological-medicine/article/hhcinduced-psychosis-a-case-series-of-psychotic-illness-triggered-by-a-widely-available-semisynthetic-cannabinoid/BFEDDF92533B619D646E2954BC5DDCE7>

In addition to co-occurring mental health issues, other issues presented included, school refusal, absconding, drug dealing, joy riding and issues around sexual/gender identity as well as unsafe sexual practices leading to a number of young people seeking advice from Sexual Health Services.

Issues affecting the lives of some families included poverty, accommodation insecurity, multiple moves and overcrowding, with three or four siblings sharing bedroom or parents having to share with children. These circumstances place added stress on all family members especially in circumstances where substance use and Domestic Violence is a feature of family life.

Tusla Social Work or Family Support Service was involved in some cases and 34% had a Juvenile Liaison Officer. All of the young people and their families attended Family Therapist with 5% having Psychiatric assessment and no young person required prescription intervention. However, 2% were referred onto CAMHS for further assessment in relation to mental health concerns. See Fig 3 for trends in relation to prescription intervention.

Fig 3: Trends in relation to Medical Intervention



As in previous years most young people had established patterns of substance use prior to referral with an average of 17 months (range: 1-60 months). As a consequence some young people struggle to maintain drug free status but most reach stability and many achieve drug free status and maintain abstinence. As always, the challenge within community is for parents and non-parental adults to identify young people within risk groups at early stage and to elevate concern for them by making referrals in a timely manner.

Given, the increasing level of tolerance for substance use within society and petitions for the

legalization of all drugs, young people are being given mixed messages, with some adults not fully appreciating the consequences of substance use for young people. Additionally, young people and indeed many adults are devoting more of their time to online activity and unsafe influences/practices. Social Media is having a significant effect on all areas of youth culture. As such, emphasis is placed on restricting mobile phone use especially at night in order to privilege sleep and dream world, to support maintenance of psychological and emotional well-being to the same extent that people privilege the updating mobile phone apps. There is increasing evidence that young people's mental health is affected by their use of social media as well as by use of substances.

In relation to drug availability, young people report receiving unsolicited messages with images of drugs. Also similar to Ice Bucket Challenge where nominated participant are filmed having a bucket of ice water poured on their heads there has been a revival of Lean Challenge in some locations. Lean is usually produced using a variation of a few key ingredients along with a multitude of additives that are interchanged such as cough syrup that contains promethazine and codeine mixed with carbonated lemon-lime soda and pieces of hard candy. In some cases, sports drinks or alcohol are substituted to produce various flavours. Further problems exist in circumstances where people do not make mixture themselves, as there is no control over what they are taking. In circumstances, where people are making the blend they are not giving consideration to impact of mixing codeine, alcohol and other medications. In the circumstances, it is essential for parents and non-parental adults be informed about trends in relation to substance use and other issues influencing young people's lives. It is important to instil hope in young people and have an expectational approach to achieving good outcomes for them. Parents and other adults ought to elevate concern for young people where it is indicated and advocate for supports/resources in order to create opportunity for young people to realize their potential.