

Alcohol and drugs data factsheet: HSE health regions

December 2024

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Glossary of terms

Confidence interval (CI) – A way of expressing how certain we are about the findings from a study, using statistics. It gives a range of results that is likely to include the 'true' value for the population. A wide confidence interval (CI) indicates a lack of certainty about the true effect of the test or treatment - often because a small group of patients has been studied. A narrow CI indicates a more precise estimate (for example, if a large number of patients have been studied). The CI is usually stated as '95% CI', which means that the range of values has a 95 in a 100 chance of including the 'true' value. For example, a study may state that 'based on our sample findings, we are 95% certain that the 'true' population blood pressure is not higher than 150 and not lower than 110'. In such a case the 95% CI would be 110 to 150. (From the [NICE glossary](#))

HSE health regions - The Health Service Executive (HSE) remains a single organisation with six health regions. Services will integrate across hospitals and community organisations in these health regions. The six operational regions have responsibility for the planning and coordinated delivery of health and social care services within their respective defined geographies. Note that health regions are not separate statutory bodies. They will use the HSE logo and operate under the governance of the HSE Board. The regions management structure will replace existing Community Healthcare Organisations (CHO) and Hospital Group management structures. HSE national will oversee standards, and guidelines for implementation at regional level.

Prevalence – refers to the proportion of a population that has used a drug over a particular time period.

Last month prevalence – refers to the proportion of the sample that reported using a named drug in the 30-day period prior to the survey. Last month prevalence is often referred to as current use. A proportion of those reporting current use may be occasional (or first-time) users who happen to have used in the period leading up to the survey. It should therefore be noted that current use is not synonymous with regular use.

Last year prevalence – refers to the proportion of the sample that reported using a named drug in the year prior to the survey. Last year prevalence is often referred to as recent use.

Lifetime prevalence – refers to the proportion of the sample that reported ever having used the named drug at the time they were surveyed. A person who records lifetime prevalence may or may not be currently using the

drug. Lifetime prevalence should not be interpreted as meaning that people have necessarily used a drug over a long period of time or that they will use the drug again in future.

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Introduction

This factsheet presents the most recently available drug and alcohol data on treatment demand, general population prevalence, and opioid prevalence analysed by regional health area in Ireland.

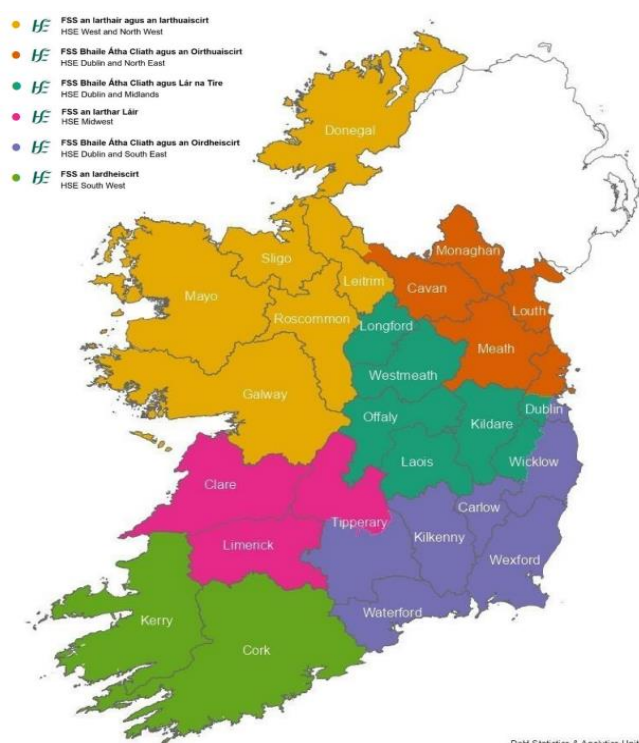
We include some alcohol data in this publication. Please also see the 2024 factsheet [Alcohol-related harm: HSE Regional Health Areas](#), which contains additional information.

Sláintecare is the Irish Government's 10-year programme for transforming how healthcare is delivered in Ireland.¹ It aims to give equal access to services, with a vision of a universal health service, under the banner of Right Care, Right Place, Right Time. Part of this process is the creation of new healthcare areas that are based on population data, including on how people currently access services, in addition to being informed by a public consultation. There are six HSE health regions (see Box 1). This is a change from previous reporting of data by nine community healthcare organisations (CHOs).¹

As the six regions each serve large populations in their own right, it is recognised that a sub-structure within each region will be required and must be designed from the ground up. It is currently proposed that these sub-structures will be called Integrated Health Areas (IHAs). They will serve a population of up to 300,000, will take account of varying geographies, population size, local needs, and services. The existing 96 Community Healthcare Networks (CHNs) and the Community Specialist Teams (CSTs) will act as the building blocks of integrated service delivery.

Box 1: HSE Health regions and county boundaries

HSE health region		Counties/Local health offices covered
HSE Dublin and North East	A	North Dublin, Meath, Louth, Cavan, Monaghan
HSE Dublin and Midlands	B	Longford, Westmeath, Offaly, Laois, Kildare, parts of Dublin and Wicklow
HSE Dublin and South East	C	Tipperary South, Waterford, Kilkenny, Carlow, Wexford, parts of South Dublin and Wicklow
HSE South West	D	Kerry and Cork
HSE Mid West	E	Limerick, Tipperary North, Clare
HSE West and North West	F	Donegal, Sligo, Leitrim, Roscommon, Mayo, Galway



Source: Department of Health (2023) [Organisational reform: HSE health regions. Implementation plan](#). Dublin: Government of Ireland.

¹ For further information on Sláintecare, visit: <https://www.gov.ie/en/campaigns/slaintecare-implementation-strategy/>

Note: West county Wicklow continues to be aligned with Kildare for health services, and a small portion of west county Cavan continues to be aligned with Sligo/Leitrim for health services, in recognition of existing patient flow patterns. In early iterations, the regions were known as areas A – F.

Treatment data for HSE health region areas

Data from the National Drug Treatment Reporting System

The data are drawn from the National Drug Treatment Reporting System (NDTRS) which is the national epidemiological surveillance database that records and reports on treated problem alcohol and drug use in Ireland. Treatment for problem alcohol and drug use in Ireland is provided by statutory and non-statutory services, including residential centres, community-based addiction services, general practices, and prison services. The dataset contains information only on those who started treatment in a particular year (for the first time or returning to treatment). It does not include service users in continuous care. As there is currently no national system-wide unique identifier in the Irish health system, the NDTRS records cases of treatment. In any given year, individuals may appear more than once if treated in different centres or if they return to treatment in the same centre. NDTRS data were analysed using HSE health regions to describe the national treatment data based on where the client resided in the 30 days prior to treatment. Data are published in [annual bulletins](#) and can be viewed in interactive tables on the [HRB National Drugs Library website](#).

Note: As participation in the NDTRS is not uniform across the country, conclusions based on geographic analyses are limited. Also, treatment figures in 2020 were impacted by the Covid-19 pandemic.

Table 1: Number of cases treated for drugs (excluding alcohol) as a main problem, by HSE health region and year, NDTRS 2017–2023

	2017	2018	2019	2020	2021	2022	2023
All cases	8922	10,274	10,664	9702	10,769	12,009	13,104
HSE Dublin and North East	2462	3006	2980	2825	3517	4026	4693
HSE Dublin and Midlands	1976	2571	2746	2365	2797	2959	3063
HSE Dublin and South East	1570	1725	1728	1553	1642	1833	2011
HSE South West	1055	1169	1216	1007	939	944	1045
HSE Mid West	749	843	851	839	859	832	907
HSE West and North West	653	588	698	716	670	770	778
Other/unknown	457	372	445	345	345	595	607

Source for tables 1-3 ²: Lynch, T et al (2024) [National Drug Treatment Reporting System: 2023 drug treatment demand](#). Dublin: HRB.

Table 2: Number of new cases treated for drugs (excluding alcohol) as a main problem, by HSE health region and year, NDTRS 2017–2023

	2017	2018	2019	2020	2021	2022	2023
All new cases	3257	3962	3979	3796	4206	4456	4792
HSE Dublin and North East	711	1006	971	1002	1259	1229	1481
HSE Dublin and Midlands	667	907	932	860	1038	1082	1164
HSE Dublin and South East	676	767	767	679	715	832	894
HSE South West	467	530	515	465	431	487	505
HSE Mid West	310	417	420	419	403	382	331
HSE West and North West	314	255	300	256	296	358	324
Other/unknown	112	80	71	115	64	86	93

Table 3: Number of previously treated cases treated for drugs (excluding alcohol) as a main problem, by HSE health region and year, NDTRS 2017–2023

	2017	2018	2019	2020	2021	2022	2023
All previously treated cases	5242	5872	5927	5441	6090	6860	7588
HSE Dublin and North East	1627	1826	1708	1659	2074	2519	2853
HSE Dublin and Midlands	1157	1579	1630	1414	1637	1706	1781
HSE Dublin and South East	846	898	864	843	895	970	1086
HSE South West	567	627	681	534	496	494	532
HSE Mid West	409	396	382	372	437	432	558
HSE West and North West	312	284	338	362	315	359	382
Other/unknown	324	262	324	257	236	380	396

Table 4: Number of cases treated for alcohol as a main problem by Regional Health Area of residence, NDTRS 2017 to 2023

	2017	2018	2019	2020	2021	2022	2023
All cases	7350	7464	7546	5824	6859	7421	8163
HSE Dublin and North East	1360	1350	1417	1181	1548	1671	2193
HSE Dublin and Midlands	1284	1273	1257	957	1278	1372	1302
HSE Dublin and South East	1619	1697	1609	1296	1474	1604	1747
HSE South West	1240	1293	1290	943	971	953	920
HSE Mid West	487	536	570	424	483	582	570
HSE West and North West	1154	1151	1306	928	1027	1122	1286
Other/unknown	209	164	97	95	78	117	145

Source for tables 4-6 ³: O'Neill, D et al (2024) [National Drug Treatment Reporting System: 2022 alcohol treatment demand](#). Dublin: HRB.

Table 5: Number of new cases treated for alcohol as a main problem by Regional Health Area of residence, NDTRS 2017 to 2023

	2017	2018	2019	2020	2021	2022	2023
All new cases	3600	3230	3296	2490	3026	3278	3625
HSE Dublin and North East	632	570	510	507	661	645	928
HSE Dublin and Midlands	585	556	583	438	657	663	643
HSE Dublin and South East	786	806	711	544	594	702	782
HSE South West	639	579	569	424	459	468	447
HSE Mid West	234	253	294	181	223	258	261
HSE West and North West	550	398	597	344	391	500	515
Other/unknown	74	68	32	52	41	42	49

Table 6: Number of previously treated cases treated for alcohol as a main problem by Regional Health Area of residence, NDTRS 2016 to 2023

	2017	2018	2019	2020	2021	2022	2023
All previously treated cases	3652	3705	3400	3170	3596	3868	4257
HSE Dublin and North East	279	688	532	624	818	926	1163
HSE Dublin and Midlands	647	633	522	470	575	647	592
HSE Dublin and South East	793	795	764	729	832	859	932
HSE South West	594	654	668	512	488	465	462
HSE Mid West	248	246	257	235	250	318	297
HSE West and North West	566	611	613	563	600	596	737
Other/unknown	125	78	44	37	33	57	74

Use of drugs in HSE health region areas

Analysis of 2019–20 National Drug and Alcohol Survey by regional health area

Introduction

The [National Drug and Alcohol Survey \(NDAS\)](#) collects information on alcohol and tobacco consumption and drug use among the general population in Ireland. It also surveys people's attitudes and perceptions relating to tobacco, alcohol, and other drug use and records the impact of drug use on people's communities. The 2019–20 NDAS collected information from 5,762 people aged 15 years and older across Ireland.

In 2018, the HRB commissioned IPSOS MRBI to conduct the [fifth Irish National Drug and Alcohol Survey \(NDAS\)](#)⁴. A regional analysis was conducted on the data for Drugnet Ireland⁵ and is presented here². The 2019–20 NDAS followed best practice guidelines recommended by the European Monitoring Centre for Drugs and Drug Addiction. The questionnaire, based on the European Model Questionnaire, was administered in face-to-face interviews with respondents aged 15 years and older. A sample comprising all households throughout Ireland was randomly selected to participate. To facilitate comparisons between the 10 regional drug and alcohol task force (RDATF) areas, sampling was undertaken by RDATF area to enable the estimation of drug use prevalence in each area and to allow for monitoring of drug prevalence trends over time. Fieldwork began in February 2019 and was

² For NDAS data by CHO (Community Healthcare Organisations) area, see https://www.drugsandalcohol.ie/regional_data/

completed in March 2020. Of the household members contacted, 5,762 agreed to take part. The sample was weighted by sex, age, and region to ensure that it was representative of the general population. A more comprehensive description of the NDAS methodology is provided in the survey's technical report.⁶

Alcohol use

Almost three-quarters (74.2%) of respondents were current drinkers (defined as those who had used alcohol in the last year). This ranged from 68.1% in Area E (HSE Mid West) to 77.3% in Area B (HSE Dublin and Midlands) (see Table 7). Hazardous drinking was measured using the World Health Organization's Alcohol Use Disorders Identification Test–Concise (AUDIT-C) screening tool. Among the whole sample, 37.9% met the criteria for hazardous drinking, which ranged from 32.3% in Area E (HSE Mid West) to 41.1% in Area C (HSE Dublin and South East). Alcohol use disorder (AUD) was measured using the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). There was considerable variation in the prevalence of AUD, from 8.2% in Area D (HSE South West) to 17.5% in Area A (HSE Dublin and North East). The overall prevalence of AUD in Ireland was 14.8%.

Table 7: Prevalence of current drinking, hazardous drinking, and alcohol use disorder, by HSE health region

Alcohol use	Ireland (%)	Dublin and North East (%)	Dublin and Midlands (%)	Dublin and South East (%)	South West (%)	Mid West (%)	West and North West (%)
<i>Respondents (unweighted) (n)</i>	5762	991	1332	1093	574	467	1305
Current drinker	74.2	76.1	77.3	73.8	73.6	68.1	71.6
AUDIT-C	37.9	39.4	38.4	41.1	35.1	32.3	36.6
Alcohol use disorder	14.8	17.5	15.3	16.7	8.2	12.1	15.4

Source: NDAS 2019–20

Illegal drug use

In Ireland, 7.4% of adults reported use of any illegal drug in the previous year (see Table 8). Last-year prevalence of any illegal drug was lowest in Area E (HSE Mid West) (6.1%) and highest in Area B (HSE Dublin and Midlands) (8.7%). There were differences in the types of drug use across HSE health region. In Area F (HSE West and North West), last-year prevalence of cannabis was relatively low (4.7% vs 5.9% nationally) and it also had the lowest prevalence of cocaine use (0.9% vs 1.9% nationally). However, it had the highest prevalence of ecstasy use (4.0% vs 2.2% nationally) and LSD use (2.8% vs 0.9% nationally).

Last-year prevalence of cannabis use was 5.9% in Ireland, ranging from 2.1% in Area E (HSE Mid West) to 7.4% in Area B (HSE Dublin and Midlands). The prevalence of ecstasy use ranged from 1.0% in Area A (HSE Dublin and North East) to 4.0% in Area F (HSE West and North West). There was less variation in the prevalence of cocaine use; last-year prevalence was low in Area D (HSE South West) and Area F (HSE West and North West) (1.0% and 0.9%, respectively) and ranged from 1.9% to 2.2% in the four other HSE health region areas.

Table 8: Prevalence of last-year drug use, by drug type and HSE health region

Drug type	Ireland (%)	Dublin and North East (%)	Dublin and Midlands (%)	Dublin and South East (%)	South West (%)	Mid West (%)	West and North West (%)
Any illegal drug	7.4	6.5	8.7	7.8	6.2	6.1	7.3
Cannabis	5.9	6.1	7.4	6.5	5.8	2.1	4.7
Ecstasy	2.2	1.0	3.2	1.3	1.3	2.5	4.0
Cocaine	1.9	2.2	2.2	2.2	1.0	1.9	0.9
LSD	0.9	0.2	1.0	0.2	0.4	0.8	2.8
Magic mushrooms	0.4	1.1	0.0	0.3	0.6	0.9	0.3
Amphetamines	0.8	0.3	1.4	0.0	0.6	0.0	2.5
Poppers	1.4	0.7	2.2	0.1	0.9	0.7	3.7
New psychoactive substances	0.6	0.1	1.0	0.2	0.6	0.0	1.8
Solvents	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Crack	0.2	0.0	0.2	0.1	0.0	0.4	0.5
Heroin	0.0	0.0	0.1	0.0	0.0	0.0	0.0

Source: NDAS 2019–20

Cannabis use disorder (CUD) was defined as any cannabis abuse or dependence in the 12 months prior to the survey and was measured using an instrument called the Munich-Composite International Diagnostic Interview

(M-CIDI). The last-year prevalence of CUD was 1.2% in Ireland and ranged from 0.7% in Area E (HSE Mid West) to 1.8% in Area A (HSE Dublin and North East) (see Table 9).

Table 9: Prevalence of last-year cannabis use disorder, by HSE health region

Cannabis use	Ireland (%)	Dublin and North East (%)	Dublin and Midlands (%)	Dublin and South East (%)	South West (%)	Mid West (%)	West and North West (%)
Cannabis use disorder	1.2	1.8	1.1	1.0	0.8	0.7	1.2

Source: NDAS 2019–20

Use of prescribable drugs

Last-year prevalence of opioid pain relievers was 32.2% in Ireland, ranging from 17.3% in Area D (HSE South West) to 37.6% in Area A (HSE Dublin and North East). There was less variation in the prevalence of sedatives or tranquilisers; last-year prevalence nationally was 5.5%, ranging from 4.2% in Area D (HSE South West) to 6.8% in Area C (HSE Dublin and South East) (see Table 10).

Table 10: Prevalence of last-year use of prescribable drugs, by drug type and HSE health region

Drug type	Ireland (%)	Dublin and North East (%)	Dublin and Midlands (%)	Dublin and South East (%)	South West (%)	Mid West (%)	West and North West (%)
Opioid pain relievers	32.2	37.6	36.3	30.7	17.3	28.6	35.4
Sedatives or tranquilisers	5.5	5.5	5.2	6.8	4.2	5.3	4.9
Anabolic steroids	0.1	0.2	0.0	0.0	0.2	0.3	0.1
Methadone	0.0	0.1	0.0	0.0	0.1	0.0	0.1

Source: NDAS 2019–20

Impact of drug use on local communities

Questions about the impact of drug use on local communities and drug-related intimidation were included in the 2019–20 NDAS for the first time. Three in 10 (30.5%) of respondents reported that there was a very big or fairly big problem with people using or dealing drugs in their local area (see Figure 1). People living in Area B (HSE Dublin and Midlands) were most likely to state that this was a big or fairly big problem (40.7%).

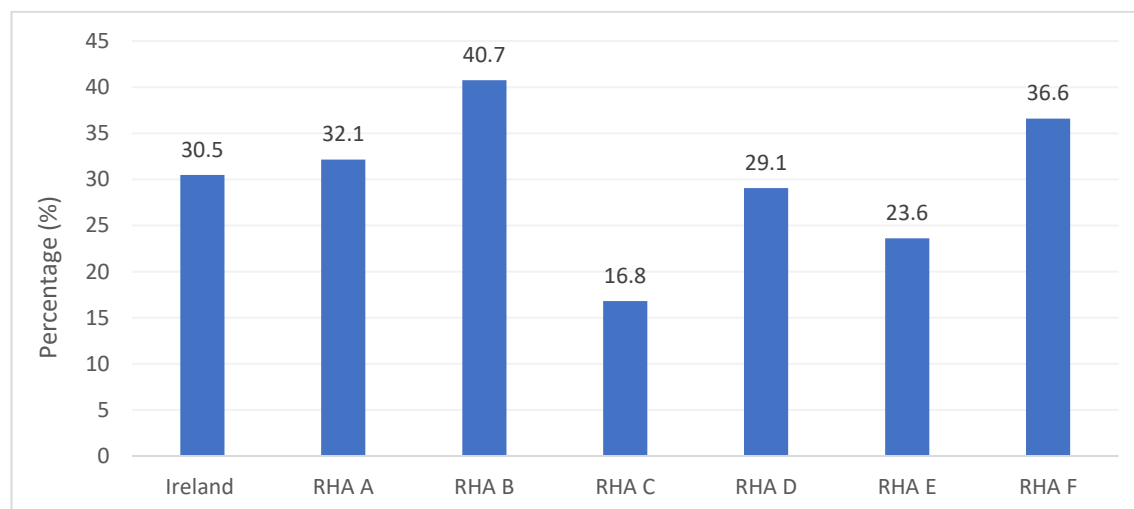


Figure 1: Proportion of respondents reporting that people using or dealing drugs was a very big or fairly big problem in their local area, by HSE health region.

One in 10 respondents (9.9%) had either personal experience of drug-related intimidation or knew somebody who had been intimidated. People living in Area A (HSE Dublin and North East) (13.0%) and Area B (HSE Dublin and Midlands) (13.8%) were most likely to report an experience of drug-related intimidation (see Figure 2).

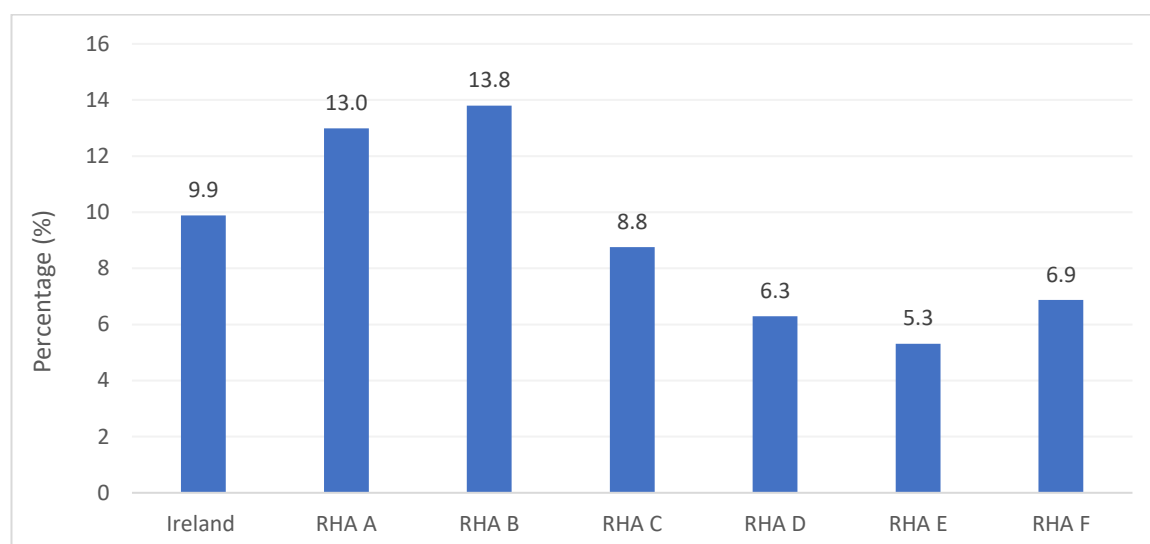


Figure 2: Proportion of respondents reporting experience of drug-related intimidation, by HSE health region.

Source: NDAS 2019–20

Data from the problematic opioid use in Ireland report

The report, [Problematic opioid use in Ireland, 2015–2019](#),⁷ estimates the prevalence of problematic opioid use in Ireland from 2015 to 2019 using a four-source capture-recapture method. Three of the four data sources used for the analysis were derived from opioid substitution treatment records from the Central Treatment List (CTL) (clinics, general practitioners (GPs) and prisons) and the fourth data source was derived from the Irish Probation Service. In total, it is estimated that there were 19,875 opioid users aged 15–64 years in Ireland in 2019. This corresponds to a prevalence rate of 6.68 per 1,000 population.

Data on opioid use for the years 2015–2019 were collected from four sources: treatment clinics, general practitioners (GPs), the Irish Prison Service, and the Probation Service⁵. Employing the capture–recapture (CRC) method, Poisson log-linear models were applied to the overlap data to find the model with the best fit in order to estimate the hidden population not identified by any of the data sources. Source-by-source interaction terms were tested by adding them to the base model in all possible combinations. The best model for estimating the size of the hidden population was determined by comparing the deviance to the chi-squared distribution and the Akaike information criterion (AIC) value. The simplest model with the lowest AIC value that provided a credible estimate was used.

Table 11: Estimates of the number of problematic opioid users, by HSE health region and rates per 1,000 population aged 15–64 years, 2019

		Known	Estimate	95% CI	Rate	95% CI
A	HSE Dublin and North East	4156	6255	5946–6797	8.69	8.27–9.45
B	HSE Dublin and Midlands	4009	6548	6146–7579	10.24	9.61–11.85
C	HSE Dublin and South East	2455	3877	3643–4583	6.37	5.99–7.53
D	HSE South West	838	1543	1400–1889	4.27	3.87–5.23
E	HSE Mid West	520	1046	915–1409	4.19	3.66–5.64
F	HSE West and North West	334	606	516–895	1.54	1.31–2.27
Total		12,312	19 875	19,522–21,608	6.68	6.57–7.27

Drug poisoning deaths for HSE health region areas

Data from the National Drug Related Deaths Index

The HRB’s [National Drug-Related Deaths Index](#) (NDRDI) is a database which records cases of death by drug and alcohol poisoning, and deaths among drug users and those who are alcohol dependent. 354 people died from poisoning in 2021.⁸

Table 10 Number of drug poisoning deaths by HSE health region of incident, NDRDI 2012 to 2021

		2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
HSE Dublin and North East	n	66	101	90	93	82	92	80	99	111	101
	%	24.2	31.2	28.9	30.0	26.7	28.3	22.2	26.4	25.3	28.5
HSE Dublin and Midlands	n	61	69	90	88	93	79	105	107	132	81
	%	22.3	21.3	28.9	28.4	30.3	24.3	29.1	28.5	30.1	22.9
HSE Dublin and South East	n	46	32	50	50	45	45	61	60	69	64
	%	16.8	9.9	16.1	16.1	14.7	13.8	16.9	16.0	15.7	18.1
HSE South West	n	22	26	31	32	39	38	39	49	58	48
	%	8.1	8.0	10.0	10.3	12.7	11.7	10.8	13.1	13.2	13.6
HSE Mid West	n	13	25	16	12	16	21	26	21	22	28
	%	4.8	7.7	5.1	3.9	5.2	6.5	7.2	5.6	5.0	7.9
HSE West and North West	n	14	27	16	23	20	25	24	28	35	17
	%	5.1	8.3	5.1	7.4	6.5	7.7	6.6	7.5	8.0	4.8
Ireland unknown / other ^a	n	51	44	18	12	12	25	26	11	12	15
	%	18.7	13.6	5.8	3.8	3.9	7.7	7.2	3.0	2.8	4.2

^a Other: relevant geocodes were not available

References

1. Department of Health (2023) [Organisational reform: HSE health regions. Implementation plan](#). Dublin: Government of Ireland.
2. Lynch T, Condon I, Lyons S and Carew AM (2024) [National Drug Treatment Reporting System: 2023 drug treatment demand](#). Dublin: Health Research Board.
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7. Hanrahan MT, Millar SR, Phillips KP, Reed TE, Mongan D and Perry IJ (2022) [Problematic opioid use in Ireland, 2015–2019](#). Dublin: Health Research Board.
8. Kelleher C, Riordan F and Lyons S (2024) [Drug poisoning deaths in Ireland in 2021: data from the National Drug-Related Deaths Index \(NDRDI\)](#). Dublin: Health Research Board.

For additional data, see:

Doyle, Anne (2024) Alcohol-related harm - HSE Regional Health Areas. Dublin: Health Research Board.

<https://www.drugsandalcohol.ie/41557/>

Doyle, Anne (2023) Regional alcohol-related harm - County level factsheet. Dublin: Health Research Board.

<https://www.drugsandalcohol.ie/39285/>

NDRS data in the interactive tables on the library website <https://www.drugsandalcohol.ie/tables/> (Under the final option, 'Select geographical region of residence' – choose 'health area').

How to cite this data factsheet:

HRB National Drugs Library (2024) Alcohol and drugs data factsheet: HSE health regions. Dublin: HRB National Drugs Library <https://www.drugsandalcohol.ie/42393>

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- Freely available collection of Irish and international drug and alcohol research
- Quick updates – e-newsletter, Drugnet Ireland and X (@hrbdrugslibrary)
- Key Irish data resources – treatment, deaths, prevalence data, alcohol webpages
- Key Irish data summaries – factsheets & annual national reports

- Policy – Policy webpage & Dail debates
- Practitioner portal – specific webpages for those working in the area
- Course directory
- Glossary – with explanations of terms and acronyms
- Research resources for those conducting literature searches and other research
- Search our collection – basic and advanced (you can save your results)

HRB National Drugs Library

Health Research Board

e drugslibrary@hrb.ie

w www.drugsandalcohol.ie