

CHAPTER 5

SOCIAL ISSUES AND PUBLIC ATTITUDES ASSOCIATED WITH DRUG MISUSE

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5.1 Introduction

Little research in the Irish context has examined social and environmental issues relating to drug misuse,¹ despite consistent findings from the national epidemiological database on drug misuse, the National Drug Treatment Reporting System (NDTRS), which indicates high rates of social deprivation among treated drug users (O'Hare & O'Brien, 1992; O'Higgins, 1996; Moran, O'Brien & Duff, 1997).

This chapter briefly reviews recent literature relevant to drug use and aspects of social exclusion in Ireland. Secondly, general public attitudes to drug use and drug users are considered in light of recent research pertaining to drug-related attitudes among the general population. Finally, the chapter highlights a number of drug-related issues that have emerged in the public domain in recent years.

5.2 Drug Use, Housing and Homelessness

For several years professionals working in disadvantaged communities and in the field of drug treatment have been aware that the development of long-term and damaging drug

1 The National Advisory Committee on Drugs (NACD) has called for tenders for a number of overviews of available literature on social aspects of drug misuse.

use is most often associated with social marginalisation and exclusion (McCarthy & McCarthy, 1995; Loughran, 1996). Over the past two decades research in Ireland has consistently demonstrated a link between concentrations of drug use and various indicators of poverty and social exclusion, including unemployment, poor housing, one-parent families and low educational attainment (Dean, Bradshaw & Lavelle, 1983; O'Kelly, Bury, Cullen & Dean, 1988; McKeown, Fitzgerald & Deegan, 1993; O'Higgins & O'Brien, 1995; Coveney, Murphy-Lawless, Redmond & Sheridan, 1999). In 1996 Irish Government drug policy recognised the link between poverty and concentrations of serious drug problems in the *First Report of the Ministerial Task Force on Measures to Reduce the Demand for Drugs* (Ministerial Task Force, 1996). This report signalled the first official recognition of the role of environmental or contextual factors in the development of drug-related problems (Butler, 1997). The Irish National Drugs Strategy, which aims to provide an integrated response to the problems posed by drug misuse, can be characterised as supporting general initiatives to tackle social exclusion and specific initiatives targeted at drug-related problems (see Chapter 1).

The opiate epidemic of the 1980s was followed by a period of relative stability in heroin uptake rates (Dean, O'Hare, O'Connor, Melly & Kelly, 1987). However, by the mid-1990s, suggestions of a 'new' wave of young heroin users had emerged (O'Gorman, 1998) and this coincided with renewed attention to the plight of families, parents and children living in neighbourhoods with high concentrations of drug use. Public awareness of drug use and related criminal activities increased quite dramatically around this time, a development that appears to have been prompted by a number of factors. According to O'Donnell (1999), reports of a near doubling in the number of murders between 1994 and 1995 contributed to public anxiety about violent crime, as did extensive media coverage of the lavish lifestyles of key perpetrators of organised crime. This situation intensified during 1996, when community members in a number of Dublin city areas mobilised and engaged in direct action, marching on the homes of suspected drug dealers, with the intention of 'cleaning' their communities of drug 'pushers'. Media attention on the activities of resident anti-drug and vigilante groups intensified, raising public awareness of drug-related activities as well as the link between drug use and crime. The murders of Garda Detective Gerry McCabe and journalist Veronica Guerin in 1996, which resulted in public outrage and heightened intolerance of drug-related activities, forced the drugs issue to the top of the political agenda (Memery & Kerrins, 2000).

In December 1996 the Government introduced the Housing (Miscellaneous Provisions) Bill, which was enacted in July 1997. This legislation was one of several measures taken to strengthen and extend the existing statutory framework for the control of drugs (Loughran, 1999). The aim of the legislation was to enable local authorities to evict

individuals believed to be engaged in anti-social behaviour (Silke, 1999). According to Sections (1) (a) and (1) (b) of the 1997 Act, anti-social behaviour includes either or both of the following:

- (a) the manufacture, production, preparation, importation, exportation, sale or supply, possession for the purposes of sale or supply, or distribution of a controlled drug (within the meaning of the Misuse of Drugs Act, 1977 and 1984);
- (b) any behaviour which causes or is likely to cause any significant or persistent danger, injury, damage, loss or fear to any person living, working or otherwise lawfully in or in the vicinity of a house provided by a housing authority under the Housing Acts, 1966 to 1997, or a housing estate in which the house is situated and, without prejudice to the foregoing, includes violence, threats, intimidation, coercion, harassment or serious obstruction of any person.

Kelly (1997) expressed concern about the legislation before it was passed, warning that it was likely to increase homelessness, and was particularly critical of the 'loose' definition of 'anti-social behaviour'. The legislation was, and remains, strongly criticised by several sectors involved in the care and rehabilitation of drug users. However, it was equally strongly supported and welcomed by certain community activists.

According to the Merchant's Quay Project, a voluntary service providing a range of services to drug users seeking help, the Housing Act, 1997, has contributed to an increase in the number of homeless drug users in Dublin (Memery *et al.*, 2000). In its recently-published annual report, the Merchant's Quay Project has recorded an increase in the number of young drug users sleeping rough and has claimed that 'both homelessness and lack of experience of drug use make these drug users a particularly vulnerable group in terms of risk of infection and general health and well being' (Merchant's Quay Project, 2000: 1). A recent analysis of Dublin Simon's outreach contacts has similarly highlighted drug use as a major difficulty among the total contact group presenting to the Simon Community. Its 1999 figures indicate that 25 per cent of male, and 32 per cent of female, contacts presented with drug problems (Howley, 2000).

Research undertaken by Cox & Lawless (1999) on homeless drug users in Dublin City exemplifies the extreme vulnerability of this group. The researchers found that, among the group, there were low levels of educational attainment, high unemployment and histories of serving prison sentences. Fifty-six per cent of the study's respondents reported that their drug use had escalated as a result of being out of home. In addition, homeless drug users were found to engage in very high levels of risk behaviour, with 66

per cent of clients injecting in public places, 49 per cent reporting sharing injecting equipment and a further 24 per cent stating that they had recently borrowed used injecting equipment. Moreover, the authors argued that the difficulties confronting this highly-marginalised group were further exacerbated by their exclusion from some of the homeless services, owing to a policy of non-acceptance of active drug users in most direct access accommodation such as hostels and shelters. In a small-scale qualitative study of fifteen homeless drug users, Costello & Howley (2000) also noted the numerous negative consequences of excluding drug users from accommodation services for homeless people, including increased likelihood of sharing needles, lack of safe places to store and dispose of needles, lack of access to clean injecting equipment, and the lack of a clean, safe environment in which to inject. Furthermore, several of their respondents perceived the Housing Act, 1997, as leading to their exclusion from opportunities to gain access to independent housing. The respondents' perception that they were discriminated against by local authorities and residents' committees, because of their drug use, was reported as creating a considerable barrier to their seeking accommodation. Similarly, Woods (2000), reporting on a study of female drug users' experience of parenting, found that respondents described the Housing Act, 1997, as 'anti-woman' and 'anti-family' (Woods, 2000: 279). Several women recounted cases where drug users had been delivered the ultimatum to either access treatment or leave their communities. Drugs workers interviewed for the purpose of the research also expressed anger at this situation, which they regarded as an additional exclusionary measure against extremely vulnerable individuals.

The impact of the Housing (Miscellaneous Provisions) Act, 1997, has recently been assessed by Memery *et al.* (2000). Their report documented an increase in evictions related to anti-social behaviour by Dublin Corporation since the introduction of the Housing Act, 1997. The authors concluded:

Instead of working to resolve the wider and complex drug issues for these communities and address the needs of drug users directly, a very blunt piece of legislation was put in place with the emphasis on excluding those involved with drugs from local authority housing (Memery *et al.*, 2000: 29).

Official documentation from supporters of the Housing Act, 1997, is more difficult to assess as community and local newspapers tend to be the source for such articles. Moreover, the focus of extant research on this legislation has been on the experiences of drug users themselves rather than on community members not involved in drug use. Anecdotal evidence suggests, however, that there are pockets of support for the legislation.

There is scope for more research into, and open documentation of, drug-related issues in general, and for making 'grey' literature in the drugs area more accessible. The new National Documentation Centre on Drugs, which is being established in the Drug Misuse Research Division (DMRD) of the Health Research Board (HRB), aims to provide a focus for such 'grey' literature.

5.3. Public Nuisance and Community Problems

There is relatively little research in the Irish context into living conditions and quality of life in communities where drug problems exist. However, a recent study of social housing across seven local authority estates in urban areas throughout Ireland (Fahey, 1999) highlighted a range of problems in the estates studied.

Reporting on the social order problems identified by residents, O'Higgins (1999) noted that the nature of the problems experienced across the seven estates varied. At one end of the scale, social problems consisted of relatively minor 'nuisance behaviour', while at the other end, a number of estates endured more serious problems, ranging from illegal drug use and dealing to intimidation and harassment. The findings indicated that the use of heroin and other 'hard' drugs was confined mainly to Dublin estates, and was particularly acute in one large local-authority flat complex located in Dublin's south inner city. The profound negative effects of concentrations of drug problems emerged strongly from the reports of children living in the estate, who were interviewed as part of the research. Children in focus groups recounted routine encounters with drug users and made casual reference to the presence of drugs paraphernalia on the stairs, on balconies and in the stairwells. Coupled with this, parents expressed extreme anxiety about the negative consequences of high levels of drug exposure for their children. Drug use and activities related to the distribution of illegal drugs were considered to impact negatively on the quality of life of a high proportion of residents and to be among the most enduring problems on the estate.

Corcoran (1998), reporting on research carried out in one large local authority housing complex in inner-city Dublin, found that all aspects of the drug problem, including drug-taking in public areas and the sale and distribution of drugs, were perceived as extremely problematic. Both Corcoran (1998) and O'Higgins (1999) noted that the activities surrounding the distribution of drugs drew a steady stream of non-residents onto this estate. This, among other factors, exacerbated the 'palpable sense of tension' (Corcoran, 1998: 21) in the area. Furthermore, there was a widespread belief among residents that the drug situation was out of the control of both residents and the Gardaí (McAuliffe & Fahey, 1999).

Morley (1998), in a study carried out in another inner-city flat complex with a long history of social problems, also highlighted the perceived negative impact of drug problems on the quality of life in the community. The socio-economic profile of the estate revealed in the research – high rates of long-term unemployment, low educational attainment levels and high rates of early school leaving – was again indicative of a community struggling with the issues of social exclusion and marginalisation. This estate also hosted a large number of problem opiate users.

The management of social order problems on local authority estates has involved, *inter alia*, evictions of problem tenants, particularly those individuals associated with drug dealing and related activities. Fahey (1999) concluded that, while the use of exclusionary strategies has resulted in some improvements in social order in a number of estates, such policies ultimately exacerbate social exclusion and result in further social problems. In recent years, more participatory approaches to estate management have been introduced and include communication and consultation with tenants in the planning, development and revitalisation of estates (Fahey, 1999; O’Gorman, 2000). There is a need for greater innovation and experimentation with different models of estate management, particularly in environments where drug problems exist.

5.4 Social and Economic Costs of Drug Consumption

Studies or estimates of the healthcare and other social costs of drug consumption have not been carried out in Ireland; neither have the economic costs to society from drug use been researched.

Accepting that the ‘social costs’ incurred through drug use can be defined and interpreted variously, and that no research has been undertaken in Ireland with the specific aim of estimating such costs, a number of research findings may be drawn on as indicative of significant costs to individuals, families and communities as a result of drug use.

As might be expected, this evidence arises primarily from research on a range of social problems associated mainly with disadvantaged communities. The previous section overviewed recent studies illustrating the perceived negative impact of high levels of drug misuse on communities where drug use is concentrated (Morley, 1998; Corcoran, 1998; O’Higgins, 1999). Residents of such communities consistently draw attention to the destructive effect of drug use and drug trafficking on community life. Furthermore, they are acutely aware of the negative way in which outsiders perceive their community. Mayock (2000), in a qualitative study of drug use by young people in a Dublin inner-city

community, similarly noted that respondents made constant reference to the area's drug problem. Furthermore, the young people expressed strong resentment of outside representations of their neighbourhood and were particularly critical of the negative effects of disparaging media reports on their community. Many clearly felt stigmatised by virtue of living in a locality where drug use and associated activities were concentrated.

There is relatively little research available pertaining to the consequences of drug problems for individual families.² For example, there is no estimate of the number of individuals affected by familial drug use. However, the issue of how children are affected by drug misuse has emerged as an issue of critical concern. Hogan (1997) undertook an exploratory study of the social and psychological needs of children of drug-using parents, based on interviews with key workers, teachers and carers. This study identified factors which place children of drug users 'at risk for inadequate care and for psychological difficulties' (Hogan, 1997: 36). Information attained on the school experiences of six children indicated that teachers rated half (n=3) as poor attenders and half as falling behind their age level in reading and mathematics. Key workers interviewed for the purpose of the research expressed concern about the quality and consistency of care giving by drug-using parents. However, parents who were receiving treatment for their drug problems appeared less likely to experience parenting difficulties and many were perceived to be coping competently with child rearing. Woods (2000) noted that professional workers in the drug treatment and social work fields are generally positive about women drug users and their involvement with their children. The absence of childcare facilities offered to drug-using women was identified as presenting a significant barrier to mothers' participation in further education and in the workforce. This finding also emerged from Moran's (1999) study of the availability, use and provision of crèche facilities in drug-treatment contexts.

The need for an integrated approach to services aimed at drug-using parents and their children was acknowledged in the *First Report of the Ministerial Task Force on Measures to Reduce the Demand for Drugs* (Ministerial Task Force, 1996). The Eastern Health Board's *Review of Adequacy* (1997) identified the key issues for these families as 'addiction, child care, health (physical and emotional), housing, criminality and employment' (Eastern Health Board, 1997: 51). Increased recognition of the special needs of such families led to the setting-up of a specialised service providing intensive support to families where a parent(s) has a chronic opiate problem. A recent evaluation of this community drugs service revealed positive outcomes for both parents and children (Murphy & Hogan, 1999). Reporting on parents' perceptions of the service, the authors noted that parents

2 The National Advisory Committee on Drugs (NACD) has commissioned a study to overview literature in this and related areas. Results are expected mid-2001.

particularly valued a social work approach, which acknowledged their needs both as parents and as individuals and where the emphasis was not exclusively on the care and monitoring of their children.

5.5 Developments in Public Attitudes and Debates

This section overviews empirical findings regarding public attitudes to drug-related issues. This is followed by an account of some drug-related issues, which have been the subject of political and public debate in recent times (i.e. during 2000). The intent of the latter is to provide a flavour of the types of issues currently being discussed in the public domain.

The first national survey of drug-related knowledge, attitudes and beliefs in Ireland, known as the KAB1 study, was published by the DMRD of the HRB in September 2000 (Bryan, Moran, Farrell & O'Brien, 2000). The questionnaire on which the research was based³ constituted a module of the 1998 Irish Social Omnibus Survey. A total of 1,000 adults aged 18 years and older, randomly selected from the 1997 Register of Electors for Ireland, took part in the study. Data were collected using face-to-face interviews between February and April 1998. An expanded study, KAB2, was carried out in early 2001 and results from the study will be published by the DMRD of the HRB towards the end of 2001.⁴

The main findings from KAB1 are summarised as follows:

- Members of the general public were generally aware of the kinds of illegal drugs most commonly used. Ninety-four per cent reported that they had heard of heroin, cocaine, ecstasy and cannabis, while 70 per cent had heard of LSD and amphetamines.
- Self-reported cannabis use (as measured by lifetime prevalence) stood at 12 per cent for the entire sample. The younger urban sector of society tended to have greater personal experience of cannabis and to know people who had taken cannabis or had 'a drug problem'. Males reported greater use of cannabis and knowledge of cannabis users than females.

3 Based on Moran (1977).

4 The study explores respondents' approval / disapproval of people taking different types of drugs; perceived harm / risk associated with different substances; whether respondents had ever been offered drugs, by whom, and in what environment; the ease with which respondents could access drugs; and source of first drug used. KAB2 will allow exploration of methodological issues, e.g. reliability, etc., and has been designed to provide information regarding the reliability of findings from the Kelleher (forthcoming) study and to provide comparative information with data from Northern Ireland samples.

- The results indicated a high level of concern about the current drug situation among the general public.
- A substantial proportion of respondents believed that experimentation with drugs was commonplace among young people. Over half of those who took part in the survey believed that it was 'normal' for young people to try drugs at least once, and at least 40 per cent believed that most young people experimented with cannabis and ecstasy.
- Respondents generally regarded illegal drug taking as a dangerous pursuit. Approximately three-quarters (77%) believed all illegal drugs to be equally harmful to health, while over 40 per cent believed that one could become dependent on drugs after just one experience. Half the sample (54%) believed regular use of cannabis was just as dangerous to health as regular use of heroin. This somewhat exaggerated sense of the effects of illegal drugs was less common among the younger members of the adult population surveyed.
- Social avoidance and fear of drug users and those addicted to drugs were high among respondents. Moreover, sympathy for drug-addicted individuals was relatively low. Younger respondents and respondents with a higher level of education were less inclined to perceive drug addicts in a negative light. Moreover, those with personal knowledge of someone 'with a drug problem' typically held more positive attitudes towards those who were addicted to drugs.
- Consistent with the widespread concern about the severity of the current drug situation was an overwhelmingly high level of support for drug prevention. Over 90 per cent of respondents agreed that the allocation of financial resources for drug prevention was worthwhile. Almost 95 per cent supported the notion of providing drug education to primary school children.
- Current harm reduction initiatives, including the provision of heroin substitutes such as methadone, and needle exchange facilities to heroin dependent clients, received support from two-thirds of respondents (63% and 66% respectively). Furthermore, while the provision of drug treatment on the basis of need received almost unanimous support, two-thirds of respondents (65%) felt this should only be provided to those who had abstinence as their ultimate goal.
- Regarding alternative policy options, 76 per cent of respondents agreed that cannabis use should be against the law, while over 70 per cent agreed that drug addicts convicted of petty offences should be given the option of receiving treatment instead of having a jail sentence for their crime.

The authors summarised the main findings and associated recommendations as follows:

Information about Drugs

Finding – The Irish have a good general awareness of commonly-used illegal drugs. However, their perception of the general harmfulness of these substances indicates a lack of accurate knowledge about the different effects associated with different types of drugs.

Recommendation – The provision of accurate information, of a non-sensationalist type, to all age groups, on the relative known risks associated with different types of drugs.

Societal Attitudes towards Drug Users

Finding – Societal attitudes towards drug users are mostly negative. Those with personal experience of someone ‘with a drug problem’ tend to have less negative attitudes, as do the younger adults surveyed and those with higher levels of education.

Recommendation – The promotion of more positive attitudes towards those who misuse drugs, particularly among older people and those with less education. A positive attitudinal climate is important to the social integration of problem drug users and to their willingness to avail of treatment.

Concern about Legal as well as Illegal Drugs

Finding – The public generally perceives drug taking to be common among young people, and there is a high level of concern about the current drug situation in Ireland. Notwithstanding this, alcohol abuse tends to be perceived as a more serious problem in society than drug abuse.

Recommendation – The continuation of efforts to address the problem of legal as well as illegal drugs.

Drug Problem regarded as Very Serious Issue

Finding – While societal attitudes towards those who use drugs are negative, respondents attach high priority to providing help to drug users. This high level of support for drug treatment is likely to be related to the widespread perception that the drug problem is a very serious issue in Irish society.

Recommendation – The retention of the drugs issue high on the political and social agenda.

In general, issues surrounding the misuse of drugs, and the associated public debate, receive a high level of attention in the media. Law enforcement issues receiving media attention include policing initiatives, drug seizures, drug-related crime, criminal law cases, and the lifestyles of drug 'barons'. In addition, one of the issues frequently reported on is the opposition of local communities to the opening of drug-treatment facilities in their neighbourhoods – the NIMBY phenomenon (Not In My Back Yard). In response to such opposition, health boards endeavour to involve local communities in the planning of services. More recently, the outbreak of illness and deaths among injecting drug users (IDUs) in Dublin during 2000 received a lot of media coverage, which, *inter alia*, reiterated the risks taken by drug users.

A further area, which has received a high level of media attention, is the exploratory methodological work carried out by Comiskey (1998) on estimation of prevalence of opiate use in Dublin. Comiskey concluded from her work that estimates for opiate users in Dublin 'ranged from over 6,000 among medical data sources up to approximately 14,000 among the three data sources.' (Comiskey, 1998: 1). The three data sources were the Central Patient Methadone Treatment List, the Hospital Inpatient Enquiry Database (HIPE), and records of Garda arrests, charges or suspected criminal activities (see Section 6.7). The three-data-source approach was based on a capture-recapture methodology. Uhl (2000), in a detailed technical paper, concluded that 'for the time being one has to warn seriously against regarding capture-recapture estimates as reliable, scientifically-based estimates. As we could demonstrate: the true number may easily be 50% less or 100% more than estimated' (Uhl, 2000: 2). The fact that the Dublin results are estimates is rarely noted in media reports, and rarer still is the presentation of ranges and confidence intervals or a number of estimates, as recommended by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA, 1997). As a consequence, in general media coverage has not been very balanced.

The DMRD is working with a National Working Group on Prevalence to improve the data available for such prevalence estimation. The first meeting of this group (DMRD, 2000) adopted, *inter alia*, a set of recommendations aimed at improving standards in the conduct and reporting of prevalence data (see Appendix 1).

In 2000, two issues, prescription of heroin and decriminalisation of cannabis, received some attention from the Irish parliament, Dáil Éireann, on a motion to note the Report of the Joint Committee on European Affairs on European Aspects of Drug Issues. In relation to cannabis, the Minister of State at the Department of Tourism, Sport and Recreation, with special responsibility for the Drug Problem, Mr Eoin Ryan, TD, referred to the sensitive issue of the decriminalisation of cannabis and noted that the Joint Committee's document did not come out with any specific recommendations. He

noted, however, that it drew attention to the 'diversity of approaches in the European context' and recommended that 'an objective presentation of the facts relating to different strategies' must be part of any ongoing debate or policy formulation (Ryan, 2000). Thus, there is little evidence of a desire to decriminalise cannabis, as the findings of KAB1 (Bryan *et al.*, 2000), reported above, would also indicate.

The issue of heroin prescription was also referred to in Minister Ryan's speech. The Report of the Joint Committee on European Affairs referred to a 'heroin prescription' model, which was being piloted in Switzerland. The Minister observed, 'Obviously, such a radical approach has aroused much debate, and indeed controversy, not only in Europe but also here in Ireland. I note that while the European Affairs Committee recommends that the Irish health authorities should consider the need for and be authorised to develop what it describes as "innovative drug treatment measures", the Committee stops short of specifically recommending the introduction of the Swiss model here in Ireland' (Ryan, 2000). Recent statements from Government representatives have indicated that there are no plans to introduce heroin prescription projects in this country (Department of Health and Children, personal communication).

In the course of debates among professionals regarding the need for a variety of treatment options, the desirability / feasibility of the provision of injecting rooms is beginning to be discussed. The Merchant's Quay Project made a proposal in a submission to the National Drugs Strategy Review in this regard.

In conclusion, it would appear that as a result of political initiatives – including the devolution of more powers to local and regional levels, the growing involvement of the community and voluntary sectors in policy formulation and implementation, and the inter-agency and integrated approach to the drugs problem – a more open climate for debate on drug-related issues is developing.

5.6 References

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