

# Budget 2026 Factsheet for National Drugs Strategy & Inclusion Health



## Minister Jennifer Murnane O'Connor

### The six priorities are:

- Increase access to Buprenorphine for the treatment of opioid dependence.
- Strengthen workforce development and training in drug services.
- Enhance capacity in drug services for under-served populations.
- Expand inclusion health services for people who are homeless.
- Support early intervention initiatives to improve child health.
- Provide additional health supports for refugees and migrants.

A total of €4m in recurring funding is provided for the above priorities. Further funding of €7m is provided to cover inflation costs and pay increases for S39 workers. This brings the total additional non-pay funding for drugs and inclusion health services in Budget 2026 to €11m. A final element of Budget 2026 is the allocation of €1.99m, over two years from the Dormant Accounts Fund.

# **Description of priorities**



Access to Buprenorphine to provide an alternative OAT treatment option for an additional 200 individuals with long-term opioid dependence, which supports harm reduction, recovery and independent living.



Strategic workforce development plan to build capacity and competencies in drug services across the HSE health regions, including trauma-informed care, evidence-based prevention initiatives and engagement with people with lived and living experience.



Increased treatment capacity aimed at under-served populations to support those with medically complex needs, young people at risk and other vulnerable groups across the health regions.



Drug initiatives analysing drug related overdose in acute hospital settings. and to support individuals involved in the criminal justice system.



Inclusion health services to improve access to health services for people living in emergency homeless accommodation and those at risk of becoming homeless, with a particular focus on women and Traveller women.



Early intervention initiatives for children to support the health and wellbeing of Traveller children in two health regions and children living in disadvantaged urban areas.



Refugee and migrant health to enhances services for families in emergency accommodation, those with psychological vulnerabilities, those with experience of FGM and the Roma community.

# **Funding Breakdown**

Measure	Allocation €m	Activity
Access to Buprenorphine in OAT services	0.75	treatment for 200 people with long-term opioid dependence in areas outside of Dublin
Strategic workforce plan for drug services	0.2	national competency framework for staff     national programme to provide accredited, evidence-based training     workforce development plan in all health regions
Treatment capacity for under-served populations	0.33	additional residential treatment for medically complex cases on national waiting list     specialist supports for drug services     early intervention with young people at risk
Drug initiatives	0.1	hospital monitoring system for drug overdose     interventions for participants in the Dublin drug treatment court
Homeless health services	1.53	national in-reach care & case management those in emergency accommodation     additional residential treatment for complex cases*     interventions for women at risk of homelessness
Early intervention initiatives for children	0.5	Traveller child health initiative in 2 health regions     early childhood multidisciplinary team in the NEIC
Refugee and migrant health	0.61	in-reach services in emergency accommodation     psychosocial supports     treatment for female genital mutilation
Inclusion health initiatives	1.99**	healthcare services for the Roma population     multidisciplinary team for primary school children

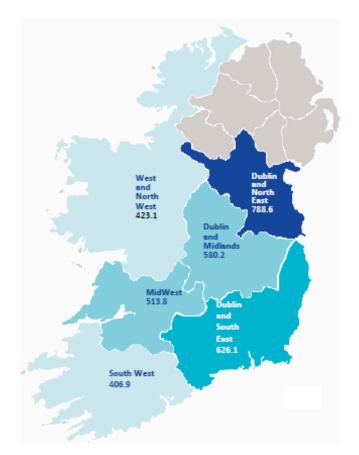
<sup>\*</sup> Funding details to be confirmed

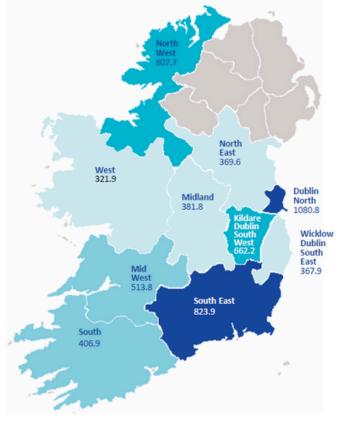
#### **Key outputs**

- More cases getting treatment for drug dependency
- Better access to drug services in health regions with lower treatment rates for problem drug
- Evidence-based interventions for those at risk of drug dependency
- More single homeless people with health care plans and access to residential treatment
- Fewer women at risk of homelessness
- Healthier lives for children at risk of poverty and social exclusion
- Better quality of healthcare for refugees and migrants

## **HRB Bulletin National Drug Treatment Reporting System**

These maps illustrate the disparity in the prevalence of treated problem drug and alcohol use among 15-64 year olds per 100,000 population, by HSE health region (on left), and task force region (on right) (2024 Data).





<sup>\*\*</sup> Funding for 2026 & 2027