



# **POVERTY, DRUGS AND POLICY**

**DEVELOPING POLICIES FROM  
LOCAL RESPONSES**

**ATHLONE YOUTH COMMUNITY PROJECT**  
IN ASSOCIATION WITH  
**THE COMBAT POVERTY AGENCY**



## INTRODUCTION

Athlone Youth Community Project works with young people in five different areas in Athlone:

- Battery Heights and Surrounding Areas
- Sarsfield Square
- St. Mel's Tce.
- Halting Site and Blackberry Lane
- Tormey Villas

In these areas young people experience socio economic disadvantage, including unemployment averaging from 40% to 80% in some areas.

Another large factor in the above area is the fact that up to 85% of these young people either leave school early or do not go to post primary school at all.

### **FACT:**

- ❖ The vast majority of drug related crime and abuse in Athlone occurs in these areas.
- ❖ 68% of crime in Athlone is Drug/Alcohol related
- ❖ 90% of those involved have not completed Post Primary school
- ❖ Young people in disadvantaged areas in Athlone are three times more likely to be involved in drug and substance abuse than any of the nearby midland towns
- ❖ The number of Heroin cases has trebled in the last year within the Athlone area
- ❖ Young people of 12 – 13 years are being introduced to hard drugs
- ❖ 16 people in Athlone are injecting – usually heroin
- ❖ The majority of people using the Midland Health Board Counselling Service are from disadvantaged areas

Athlone Youth Community Project in conjunction with the Midland Health Board and The Combat Poverty Agency have invited a broad range of individuals currently working with young people, either in a voluntary/professional basis to participate as a group to:

**Examine existing Drug and Substance related policies locally**

- ❑ To obtain opinions which will be useful in developing and improving levels of service, as well as highlighting which services are most relevant
- ❑ To establish factual information as opposed to ‘hearsay’ evidence with regard to Drug/Substance abuse
- ❑ Provide detailed and accurate information as to why some of these young people fall through the system
- ❑ To develop strategies which will take account of the expectations of young people
- ❑ To develop procedures to deal with instances of drug/substance abuse in Schools, Training Centres and in the community

**To compliment the above aims, the following are the objectives:**

- Identification of the underlining problems
- Assessment of the nature and extent of the problem
- An increased awareness of the needs of young people
- Commitment to improving or developing the services to young people
- The establishment of a monitoring group consisting of voluntary/professionals to initiate more immediate responses to the problem of Drug/Substance abuse
- A written report of findings and recommendations
- More efficient resource utilisation
- Health Promotion and Disease Prevention
- Diagnosis and Treatment Services
- The development of procedures to deal with instances of Drug and Substance Abuse in Schools, Training Centres and in the Community.

**‘TO ASCERTAIN WHAT PROCEDURES/POLICIES THE ABOVE GROUPS HAVE TO DEAL WITH INSTANCES OF DRUG/SUBSTANCE ABUSE’**

No one had a ‘set policy’. The majority had what they called a ‘loose policy’ i.e., call the Gardai, tell parents, send them home. If a person was found to be ‘dealing’ on the premises, expel them from group/school/training centre.

A keen interest in being involved in the project was expressed.

The following groups both voluntary and professional were contacted for an initial consultation meeting. To ensure each sector could have maximum input, it was agreed to meet with each sector separately.

The meetings to be held throughout February, 1998.

**SECTOR I: COMMUNITY GROUPS**

Harmony Community Development Project  
National Association Traveller Training Centres  
Athlone Community Services Council  
National Parent Support Programme  
Athlone Drug Awareness  
St. Mary’s Youth Ministry  
B.U.I.L.D.

**SECTOR II: TRAINING CENTRES**

Shannon Bank Training Centre  
Athlone Community Workshop  
St. Anthony’s Training Centre  
F.A.S. Training Centre

**SECTOR III:**

**JUSTICE**

Probation Officer  
Community Gardai  
Garda Superintendent  
Garda Junior Liaison Officer

**SECTOR IV:**

**3<sup>RD</sup> LEVEL COLLEGE**

Athlone Institute of Technology  
Students Union  
Chaplaincy Service

**SECTOR V:**

**POST PRIMARY SCHOOLS**

Our Lady's Bower  
Marist College  
St. Aloysius College  
St. Joseph's College Summerhill  
Athlone Community College

**SECTOR VI:**

**PRIMARY SCHOOLS**

St. Mary's Girls' National School  
St. Mary's Boys' National School  
Cornamaddy National School  
Clonbonny National School  
St. Mary's Mixed National School  
Dean Kelly National School  
St. Peter/Paul National School  
Scoil na gCeithre Maistri

The agenda for all meetings is as follows:

This agenda was put before each group for discussion.

1. Perceived causes of drug abuse among young people in socio disadvantaged areas.
2. Role of poverty and other social problems.
3. Available policies/guidelines for Volunteers and professional workers who work with young people.
4. Do present policies on Education, Unemployment and Housing empower or disempower people in their own communities.
5. Ideas, which will help people, affected by drug/substance abuse.

## **Review of meetings held re: Poverty, Drugs and Policy.**

The following is a summary of meetings held with;

Harmony Community Development Project  
National Association of Traveller Training Centres  
National Parent Support Programme  
Athlone Community Workshop  
FAS Training Centre  
Gardai  
Athlone Institute of Technology  
Athlone Institute of Technology Students Union  
Chaplaincy Service  
Summerhill Secondary School  
St. Aloysius College  
Marist College  
Our Lady's Bower Secondary School  
Athlone Community College  
Marist National School  
Scoil na gCeithre Maistri

Over a period of two weeks from 16th February 1998 to 2nd March 1998.

Topics for discussion were put to each group in the following format.

6. Perceived causes of drug abuse among young people in socio disadvantaged areas.
7. Role of poverty and other social problems.
8. Available policies/guidelines for Volunteers and professional workers who work with young people.
9. Do present policies on Education, Unemployment and Housing empower or disempower people in their own communities.
5. Ideas, which will help people, affected by drug/substance abuse.



## **ROLE OF POVERTY AND OTHER SOCIAL PROBLEMS**

On the question of ‘The Role of Poverty and other Social Problems’, groups responded based on **their** experiences. The **main** thinking in this regard is that **Poverty** and **the home** environment has a definite effect on the uptake of substance misuse. Lack of education and training, leading to poor employment prospects was felt to be a key factor.

All groups stated that parental love, guidance and support was a major factor, coupled with the need to resort to crime to feed the habit.

**NOTE:** Groups stated that although it is accepted that substance abuse happens across the social spectrum, “middle class area” statistics are unknown due to the ability to feed their habit, and do not present themselves under the notice of the Gardai, i.e., “the crime related factor”.

## **AVAILABLE POLICIES/GUIDELINES FOR VOLUNTEERS AND PROFESSIONAL WORKERS WHO WORK WITH YOUNG PEOPLE.**

All groups present at the meetings indicated that there are no Policies/Guidelines/Procedures in place in **their** organisation. While noting this, some training courses, Health Promotion Modules, other associated information and referral systems are available.

Constraints on Youth Workers and Volunteers (who work directly with youth groups inclusive)

- Lack of ongoing training
- Lack of community support
- Time constraints
- Failure to attract new volunteers

The role of counsellor is, therefore, “piggy backed” on to workers/volunteers who are not qualified to deal with the problem.

Some groups readily admitted they did not know “where to turn” for advice/help, and, therefore, were in a position of working on their own initiative.

**NOTE:** Because of the lack of professionals available to deal with substance abuse, coupled with the absence of guidelines – the majority of educational programmes carried out are devised by volunteers based on their own experiences.

**DO PRESENT POLICIES ON EDUCATION, UNEMPLOYMENT AND HOUSING EMPOWER OR DISEMPOWER PEOPLE IN THEIR OWN COMMUNITIES.**

**EMPLOYMENT:**

Many young people, particularly in disadvantaged areas, are now in second generation unemployment (some in third). For those who actively seek work, there is a common experience that because of their address employers turn them down. It is therefore easier for them to become involved in drug dealing as a means of income.

## **HOUSING:**

There was a perception among all of the groups that while the various housing authorities may be doing their best, the system, in relation to housing estate planning, provision of facilities, actively disempowers communities from developing and maintaining their own areas. There seems to be little or no effort made to involve communities in schemes that will enable them to manage their own estates. Such disempowerment leads to a dependency culture.

One group felt strongly that

**“‘AREA MATTERS’ – Very often it depends on where you live:  
How can a child from a disadvantaged area, living with poverty,  
alcohol, drug abuse, have the same ‘buzz’ as a child coming from  
a more affluent area? They can’t!”**

Statistics countrywide, including recent research carried out by the Midland Regional Youth service prove drugs are used and abused in areas of high unemployment with overcrowding/large families and lack of planning with regard to housing.

## **Ideas which will help people affected by drug/substance abuse:**

The last topic discussed by all groups was the question of help which should be available to people affected by drug/substance abuse.

Groups felt resources were needed with quicker access to health services i.e., in the form of drug addiction counsellors etc. In general, there is a realisation of the problem, but the schools, in particular, felt the lack of outside trained personnel/back up agencies, left them on their own to deal with the problem.

Parents, in particular, felt a great need of support in relation to access to help, information and the establishment of self help groups.

In the main, this question was not fully explored as all groups reverted to the lack of early intervention with regard to drug awareness/substance misuse education, particularly at Primary School level and the lack of policy guidelines available to workers in the Youth/Community sector.

## SUMMARY

The positive response from groups involved in the discussion and their attendance clearly shows the need for information and action on Poverty, Drugs and Policy.

There is no policy/guidelines/procedures in place at present in any of the abovementioned groups/organisations. None of the people involved in this document are qualified to deal with substance misuse but are, due to lack of policy and services, trying their best to “bridge the gap”.

In producing this document, a number of interested groups participated in a review meeting attended by Liz O’Sullivan Combat Poverty Agency, including Frankie Keena, Athlone Drug Awareness Groups, the Probation Service, Athlone Youth Community Project and interested individuals.

The meeting addressed concerns and tensions felt by some group members that they were being excluded from addressing solutions to the problem.

It was agreed that this group would come together on the completion of this project and consider options in planning future actions.

In proposing options, notice must be taken of key issues raised. These are:-

1. The need for early intervention/prevention in the form of education at Primary Level.
2. The need for policies to be developed and focused, in particular, on those working with disadvantaged youth under the following headings:
  - Prevention/Education
  - Referral/Support structures
  - Ongoing Training
3. Parent support groups dealing with both of the above.

It is important that these issues be addressed with the unique mix from the wide experiences of both the voluntary and statutory sectors.

## **MAIN RECOMMENDATION**

That the group mentioned above become formalised for a fixed period and that they work from the following draft terms of reference.

## **TERMS OF REFERENCE**

- To explore adequately early intervention at Primary School level
  
- To examine and set up pilot projects which provide programmes and information for Youth Workers/Volunteers on the following subject areas:
  - Creative Educational Programmes
  
  - Training/Support Systems
  
  - Volunteer Support System
  
- To examine the referral of young people to agencies or Volunteer groups which can most benefit them
  
- To explore the setting up and supporting of Self Help Parent Groups

## **METHODOLOGY**

This methodology will refer to each Term of Reference.

1. To study existing early intervention programmes.
2. Work with existing Youth Workers/Volunteers in the creation of a short-term pilot projects e.g., 5 people, consisting of Youth Worker, Volunteers, Health Education Officer, Tonnta etc.
3. To work with the Probation Service, Social Workers, Junior Liaison Officer to devise the best system of referral to be understood by parents etc.
4. The sourcing of existing Parent Self Help Support Groups and required programmes.

The resources to this are the provision of a full time support worker for a fixed (6 month) period and the provision of a budget to cover same.



## **CASE HISTORY**

The next step was to find some parents who had a son/daughter involved in drug/substance abuse who would be willing to tell their story.

As this is a very sensitive area, it was quite difficult to find a parent to tell their story. With the help of a very gracious lady, who arranged for me to talk to the parents of a boy who has a drug problem. The following is their story.

[To protect the identity of the family involved, the names have been changed]

John, the only son in a large family, wanted to leave school at 16 years of age. He completed his Junior Cert and was adamant that he wanted to work. John was never in trouble, either at school or at home. His reports were good.

Mr. & Mrs. Jones agreed to let John leave school and work for one month. If it worked out, he could continue in his job and forget about school. He got a job within the month. He was always up in the morning, on time for work, and good at his job. If he stayed on to work late, he would sleep at the workplace and always phone and let his parents know where he was and why he would not be home.

During the year he was working, John met a girl. He was going out with her for a little while and she then went to England. A month later, unknown to his parents, John gave in his notice at work. He told his parents he was going to England for two weeks for holidays. While he was in England, he got a job and did not return home.

A month or so later, John returned from England and was lucky enough to get his old job back.

Then the trouble started. He began to do things that were totally unlike him. He broke into the managers room and made phone calls to his girlfriend in England. His employers were very good to him. They tried to help him; he kept his job and repaid the cost of the phone calls.

For the while he was home, John couldn't settle down. He returned to England and stayed with a cousin of his mother's. Things seemed to be o.k. for a while, then the cousin phoned and told John's mother that things were going missing from the house and that he was hanging around with a bad crowd and not coming home at night. Mrs. Jones did not believe her cousin. When John phoned home, his mother asked him about the allegations made by her cousin. John denied everything and told her all was well. He also told her he was getting his own place. John phoned every week and came home on holiday a year later. He looked great, had good clothes but his mother noticed he was very fidgety and nervous. The whole family noticed the difference in him.

After that, he came home fairly regularly, for family occasions. He came home unexpectedly for his youngest sister's christening – and brought a friend with him. Mr. & Mrs. Jones did not like this friend; neither did any of his family. During the time he was home, he stayed out all night, was drinking in the house (alcohol is not allowed in this home). John and his friend did not return to England when they were supposed to. Eventually Mrs. Jones told John that his friend could not stay with them any longer. There was an argument and John went back to England. Later in the year, he came home for his birthday. When he returned to England the family did not hear from him for six weeks.

In June of that year, the family got a phone call from the Irish Centre in London. They told her that John was on drugs (hard drugs) and they would arrange to get him home, provided his family arranged to repay them the fare. Mrs. Jones had to lodge the

money with the Gardai. The Irish Centre also told her that they had given him money to come home on other occasions.

When John arrived home, all he had were the clothes he stood in.

Mr. & Mrs. Jones took John to their G.P. who arranged counselling for him, gave him tablets to take and told her to look after him for seven days, don't let him mix with any of his friends.

Mrs. Jones was terrified at this stage. Her husband is an epileptic and on constant medication so she had to hide his tablets in case John might take them.

By now, the whole family was in turmoil. John would go out and not come home. When he did come home there were constant arguments, mostly with his mother. He went berserk at one stage and wrecked the kitchen.

Mrs. Jones went back to her G.P. who arranged for John to see a Psychiatrist in the local hospital. John went with his mother to see the Psychiatrist who suggested that John should go to St. Loman's for treatment.

{**Note:** To those of us who grew up in Athlone, St. Loman's Hospital was regarded as a mental hospital and until I spoke with this woman, I didn't know there was a drug treatment center there}

John refused point blank to go to St. Loman's and walked out of the consultation. Mrs. Jones was told to go home and forget about him, he didn't want help. After this, things seem to look up. John got another job and things seemed to be going well. Then his Uncle came home and told Mrs- Jones that John had forged a cheque and for the last while had not been turning up for work. He lost his job, and things went from bad to worse. John left home and went to live in a refuge for a while. During this time, Mrs.

Jones did a Drug Awareness Course and also went to a Garda she knew dealt with drug issues to ask if John was selling drugs. Mrs. Jones found this particular Garda very helpful and very easy to talk to.

At this stage, the drug dealer began calling to the house looking for John. Mrs. Jones knew John owed the dealer money and insisted he pay him and not have a drug dealer calling to her home. This dealer was taking delivery and selling in front of her house.

In 1993, John started using Heroin. Mrs. Jones believes that John had taken every drug in every form possible. When he couldn't get drugs, he was sniffing lighter fuel. He was using the lighter fuel in his mother's house, while his sisters were there. When confronted about this, he argued with his mother and wrecked the house.

In September 1997, a 'friend' of Mrs. Jones took delight in telling her that John had looked for a job but was turned down because of his record with the Gardai. At this time John was staying with cousins.

Christmas this year was the 'straw that broke the camel's back'. He came home on Christmas Eve 'twisted' with both drugs and drink. He left the house after the Christmas dinner and did not return until 9 a.m. St. Stephen's day. John's family clubbed together to get him some clothes and a jacket. By new year's day he had sold the jacket and any other Christmas presents to get some money to buy drugs. He was asked to leave his cousin's house, as he was not paying his way.

John stayed at home for a while and his father pleaded with him to get help. This request caused another row with John and he left home again. The above 'friend' took further delight in telling Mrs. Jones that John was staying at her house and had woke them up at 1 a.m. in the morning looking for somewhere to sleep.

After this Mrs. Jones went to her G.P., just to talk to her, to see if there was anything she could do to help John. The doctor told Mrs. Jones that John had looked for help himself. The Dr. sent him to St. Loman's.

John has been in St. Loman's for two weeks. He is being released on Monday. When he is released, John will go to a different town. He has accommodation and a job arranged for him and he must see his counsellor once a week. He does not want to come back to Athlone.

“The things I have told you are only some of the horrors we went through. We have been through four years of hell. My husband and I had counselling, for what we thought was to help us through our problems with our son, but we ended up being counselled for the state our marriage was in. Our marriage was fine before our son got mixed up with drugs. It didn't help us deal with his problem, so we stopped going. We had no one to talk to. We didn't know where to go for help. Our own Doctor and one particular Garda were very kind and listened to us. But they can only do so much. Apart from that, we didn't know where to go or how to deal with it. I spent a lot of time in the church, praying.

We have spent four years watching what was happening to him and could do nothing about it and had no one to talk to. It felt like no one wanted to know. It was our problem and we had to deal with it, even though we didn't know how.

Now, after just two weeks he will be let out of hospital. I think it is too soon for him to be put back on the street. Who's going to look after him now? There is no way to keep tabs on him. We won't know what he is doing or who he is doing it with. We're even more isolated.

What would I like to see? What I would like is somewhere to go to talk, to meet other parents in the same situation. I would like to know how to get help before it's too late, before things get too bad.

I know John has to want help himself before anyone can do anything, but I knew, long before this, that I needed help, that my husband needed help and my other children needed help. That help came from nowhere.

“Now I'm terrified that my other children might go the same way.”

**Youth Work Support Pack for Dealing with the Drug Issue:  
The National Youth Health Programme**

**Educational Resources/Materials for Substance Abuse Prevention**

**Youth and Drugs – The Policy of the National Youth Council of Ireland**

**FOR INFORMATION:**

**St. Martin's Centre**

**Health Promotion Unit**





**COMMUNITY GROUPS: MONDAY 16th February, 1998**  
**VENUE: HARMONY C.D.P OFFICES**  
**TIME: 8.30 p.m.**

The meeting was attended by representatives from:

**Athlone Youth Community Project**  
**Harmony Community Development Project**  
**National Association of Traveller Training Centers**

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

- Early School Leavers
- Low skills/training
- Lack of facilities within communities
- Unemployment
- Disfunctional families with problems of alcohol/violence
- Overcrowding in family homes
- Early pregnancy
- Peer Pressure
- Availability of drugs

**2. Role of poverty and other social problems:**

- Poverty begets:
  - An acceptance of poor status in the community
  - Acceptance that people from these areas do not get jobs
  - Lack of support both financial and otherwise for young people who wish to pursue further education
  - Vulnerability to offers of 'easy money' from dealers etc,
- Because status in their own area is so low that Jail and other deterrents no longer work

**3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**

- There was a feeling that volunteers and community workers are often working on their own with no guidelines/policies available.

**4. Do present policies on Education, employment, housing empower or disempower people in their own communities:**

- A feeling came across that people in these areas are overly dependent on service providers in the education/employment/housing areas.

i.e. 'The council will fix it'

'The teacher will solve my child's homework problems'

and so on.

Consequently, there are very few local community based self help initiatives.

**5. Ideas which will help people affected by drug/substance abuse:**

- More parent self help groups
- Clearer guidelines which are available to Community/Youth Workers which they can offer to people who need help
- Quicker access to help agencies
- Extra resources for the Drug Addiction Centers
- Availability of Youth Information Services.

**POST PRIMARY SCHOOLS 18<sup>TH</sup> February, 1998**  
**VENUE: Harmony C.D.P. Office**  
**TIME: 8.30p.m.**

The meeting was attended by representatives from all the Post Primary Schools in Athlone.

**Our Lady's Bower**  
**Marist College**  
**Community College**  
**St. Aloysius College**  
**St. Joseph's College, Summerhill**

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

All five schools felt they did not have a serious drug problem, but were very concerned about underage drinking:

- Easy Access
- Peer Pressure
- Using alcohol for recreation: nothing else to do
- Tolerance of underage drinking:
  - young people being sold alcohol in school uniform
- Acceptance:
  - Nothing done about underage drinking
  - Parents acceptance (alcohol) 'sure they are only having a pint'
- Lack of self esteem

## **2. Role of poverty and other social problems:**

- Curtailed ambition:
  - ‘Why bother, I can do the same as my father’
- Teenage pregnancy linked to poorer backgrounds
- Those from poorer backgrounds seem to be more susceptible and more vulnerable to drug/substance abuse
- No encouragement from home

## **3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**

- Courses available etc., but generally attended on the initiative of the teachers.
- While some of those who attended the meeting had completed some courses and found them useful they felt that they were working with an overloaded curriculum and the subject of drug/substance abuse was usually left to the religion teachers to deal with. Maths, French etc., teachers do not have the time and are not qualified to deal with the problem. “ The role of counsellor is put on teachers who are not qualified to do it. As there are very few professional people available to deal with the issue and very few guidelines, all education regarding this issue is done by the good will of the teachers.
- People expect the teachers to solve the problem but they can only do so much.
- Information was available from:
  - St. Martin’s Center (Athlone Drug Awareness Group)
  - Health Promotion Unit
  - Western Health Board
- Few guidelines

**4. Do present policies on Education, employment, housing empower or disempower people in their own communities:**

- Area matters
  - Very often it depends on where you live: how can a child from a disadvantage area, living with poverty, alcohol, drug abuse, have the same 'buzz' and a child coming from a more affluent area? They can't.
- Limited remedial resources
- Overcrowding in schools: 2nd highest class numbers in Europe
- Funding: Inequity in funding Education
- Only 3 Home/School Liaison Officers in country
- Truancy officers
- Poor literacy skills

**5. Ideas which will help people affected by drug/substance abuse:**

- Limit access to drugs/alcohol
- Enforce the law with regard to Supermarkets/Off Licences/Licensed Premises selling alcohol to underage young people
- Practical Support – School Links Programme
- Youth Programme – Youth Leadership Skills (Social)
- Smaller Classes
- Back up of outside agencies – school cannot do it alone
- More drug addiction counsellors
- Educate Children earlier with regard to Drug/Substance abuse – by the time they get to Post Primary School it is too late
- More and Better Programmes like S.A.P.P.
- More qualified personnel

**ATHLONE YOUTH COMMUNITY PROJECT**  
**TIME: 7.30 P.M. -THURSDAY 19<sup>th</sup> February, 1998**  
**VENUE: COMMUNITY CENTRE, THE BATTERIES, ATHLONE.**

The meeting was attended by;

Volunteers & Community Employment Workers Athlone Youth  
Community Project.

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

- Peer Pressure
- Sexual Abuse
- The Home
- Bullying
- Boredom
- Music that relates to drugs – ‘Rave’
- Role Models – in Music world
- Weight Problems
- Self Esteem – Lack of self confidence
- Macho image
- Suppliers-pushing

**2. Role of poverty and other social problems:**

- Drug and substance abuse is happening across the board. Could happen to anyone.
- Drugs used as a means of escape from violent home,
- Attention seeking.
- Home has a ‘major’ say in what happens to children. No one cares or bothers about what they are doing, where they are or who they are with. Some areas are worse than others.
- The Gardai are not trained to deal with the drug problem.
- Poverty leads to robbery to feed the habit.
- Heroin is in town with cannabis use widespread.

**3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**

- Talk about it – don't know after that
- Depends on situation
- Telling parents/Gardai puts more pressure on drug taker
- Wouldn't make an issue of drugs in club
- No policies/guidelines
- No knowledge of where to go for help

**4. Do present policies on Education, employment, housing empower or disempower people in their own communities:**

- Drop out – early school leaving
- Serious drug problems in schools – from primary school up
- Lunch time drug/substance abuse – sniffing, smoking tippex/thinners

**5. Ideas which will help people affected by drug/substance abuse:**

- Keep them occupied
- Show them the effects of drug/substance abuse on a continuous basis
- Leaders etc., should be aware of effects of drug users
- Educate the workers
- Secure base where children can go confidentially
- Drug Awareness
- To know that there is somewhere to go and someone to talk to - Helpline maybe?

**TRAINING CENTRES**  
**TIME: 8,30 P.M. Thursday 19th February, 1998**  
**VENUE: HARMONY C.D.P.**

**THE MEETING WAS ATTENDED BY REPRESENTATIVES FROM:**

**FAS Training Centre, Athlone**  
**Athlone Community Workshop**

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

- Disadvantaged areas
- Disadvantaged areas – missing out on education
- Social Scene
- Friends – maybe older/braver/pushing drugs
- Peer pressure very common
- Family already involved in drugs – older brother/sister – ‘hero worship’
- Escapism – background of abuse/physical/sexual/mental
  - Kills the pain
  - No support for them so they turn to the first option to let them escape
  - Used to be alcohol – now drugs
  
- Family pressure on children to achieve – i.e. education – ‘to be like your brother/sister/
- Experimenting – ‘away from home and free’!
- Early social life
- Rebellion
- Lack of confidence
- Low self esteem
- Parents not coping



## **2. Role of poverty and other social problems:**

- Poverty has a definite effect
- Escapism – living in poverty and scraping from day to day
- Smoke more – drink more
- Poorly educated
- Catch 22 situation
  - live the lives their parents lived
  - – back to poverty again
- Sexual abuse
  - not totally accurate – it can happen in any group but it seems to be more widespread among the poorer communities
- Unemployment
- Lack of Education
- Lack of Training
- Frustration
  - No job
  - No education
  - No Training
- Crime – definitely a link between poverty/drugs/crime
- Vicious circle – serious problems in home

## **3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**

- None – no actual policy
- Information – Steps Programme – just gives insight
- Nothing to help you devise a policy
- Token gestures to problem
- Working of your own bat

The services are there but not communicated enough. How accessible are they? There are not enough people to help all those who want and need help.

The Services are very stretched – not accessible – no counsellors available.

Professional workers find help inaccessible – How is a young person on the street who is in trouble or a concerned family supposed to access these services?

G.P.'s not equipped to deal with drug problems.

**4. Do present policies on Education, employment, housing empower or disempower people in their own communities:**

- Not enough education in schools re; drug abuse
- Should be started in Primary School
- Start with basics in Primary School
- Employment encouraging poverty
  - No incentive to move out of it: “Why should I work for such a sum when I can get the same or more on the dole?”
- Low wage employment a disincentive
- Need for a minimum wage
- If you treat people like animals, they will live like animals
- Does giving them good houses etc. work? Is it the solution?
  - Good housing does not necessarily help them rise above the ‘poverty trap’
- Layout of estates perpetuate problems
  - Children have nowhere to go to play or to get involved in clubs etc.
  - Turn to other ways to amuse themselves – drugs
  - Need for integration

**5. Ideas which will help people affected by drug/substance abuse:**

- Helplines
- Resources
- Education/Information
  - Education children at a younger age
  - A more innovative approach to educating young people
- Keep young people occupied
- Better funding for Youth Projects/Sport
- Parental Education/Training
- Immediate services

**GARDAI**  
**MONDAY 23<sup>rd</sup> February, 1998**  
**VENUE: GARDA STATION, ATHLONE.**

The meeting was attended by: **Inspector P. Rattigan**  
**Gda. P. Byrne – Community Garda**  
**Gda. J. Lynch – Community Garda**

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

While drug/substance abuse is not necessarily an ailment of ‘socio disadvantaged’ areas (it can happen, and does in any social group) the problem is more prevalent in disadvantaged areas.

9-10 year olds ‘sniffing’  
13- 16 year olds cannabis  
Students on “E”

- Curiosity
- Experimental
- Lack of Hope
- Boredom
- Especially with younger people
- Lack of supervision
- Hanging around in large groups
  
- Peer Pressure
- Do not get the same pressure in other areas
  
- Family
- Parents buying alcohol
- Parents in pub ~ child where? Lack of parental supervision
- Early drinking
  
- Youngsters roaming unsupervised
- Start with a few cans – short step to drugs
- When they have a problem – they don’t know what to do.

## **2. Role of poverty and other social problems:**

### **Family/Home:**

Violence in the home – particularly towards child  
Parents in trouble themselves when they were young  
Acceptance of crime

More drug abuse among the middle classes that is not known about. They don't come to the notice of the Gardai etc., because they can afford the habit and deal with it better. The disadvantaged turn to crime to feed their habit and so come to the notice of the Gardai.

## **3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**

**The Gardai have no referral system/no set policies for dealing with drug/substance abusers outside the law.**

While the Gardai do not have an official policy on referring people with a drug problem. The Junior Liaison Officer would have some training and have attended various courses and be aware of places where help is provided. The courts may refer people with a drug problem.

Anyone caught selling/using drugs are dealt with under the relevant laws. Crime is treated as crime.

### **“What if there was someone specially trained to help?”**

- In an ideal world you would have someone trained to help
- The family of the abuser needs help
- Junior Liaison Officer could have a system of referral [this is not there at the moment]
- Gardai may not be suitable for the job
- Clear policy would help

There are only two counsellors in Athlone two days a week.

The drug problem in Athlone is nearly as serious as abuse [sexual, physical etc.]

‘Pushers are intimidating people in their own homes.

**4. Do present policies on Education, employment, housing empower or disempower people in their own communities:**

**Housing:** Is well taken care of in Athlone. Yes it does disempower people in their own communities.

**School:** The education system has a failing:

The children who have no support from home start at a very young age:

- They are not achieving as well as other children
- They drop out
- They are not interested
- Not fit to go to secondary school
- If they do, they either leave early or get thrown out
- They react negatively because they can't keep up
- The system at the moment is only for those who can keep up

Bring youngsters off the streets – occupy them,

No premises for youth clubs nor the facilities and people to run them.

**5. Ideas which will help people affected by drug/substance abuse:**

- Someone to refer them for professional help
- Teachers in Secondary schools can come forward for training etc.
- Enforce the law even though it was felt that law and order will not stop the problem
- Parents need to be responsible along with publicans etc.
- Deal with unscrupulous publicans

**Is there an answer?**

- Change social ideas
- Report underage drinking/drug taking/dealing
  - Take responsibility
  - To prosecute you need evidence
  - No one wants to talk
- Change I.D. cards – they are too easy to copy at present
- Young users
  - There is no point sending them to jail it will not do anything for them
- More and better education

**Drink Culture:**

How can children grow up and behave differently if they come from a family who spend all day in the pub. Everything is drink related.

**Crime Related:**

There is very little evidence that people are committing crime to feed a habit. The crime occurs after they take the drugs/drink – they get brave.

Vandalism/petty crime is definitely related to drug/drink abuse

**PRIMARY SCHOOLS**  
**Thursday 26<sup>TH</sup> February, 1998**  
**VENUE: Scoil na gCeithre Maistri**  
**TIME: 8.30 p.m.**

The meeting was attended by representatives from:

**Scoil na gCeithre Maistri**  
**Marist Boys Primary School**  
**Scoil na gCeithre Maistri Parents Association**

**1. Perceived causes of drug/substance abuse among young people in socio disadvantaged areas:**

- Low self esteem
- Environment in which he grows up
- Peer Pressure
- Boredom – lack of involvement in .....
- Experimentation-just to see what it is like
- Leader type – who will try new things first
- Submission type – who will follow the leader
- Underprivileged child more vulnerable
- Not a common profile

Successful person feels good, good at sports so less likely to try drugs. Self esteem mirrored by those in group. Slight awareness that Alcohol/Drugs/Substances is bad when it comes to sport. The two don't mix. When a child is into sports, they have a knowledge of their body and how it works.

**2. Role of poverty and other social problems:**

- Poverty is not necessarily the cause of drug/substance abuse
- Lack of love – conditional love
- Lack of Supervision
- Poverty in sense of 'money' is not as big a factor
- Lower income estates and younger age groups
- A lot of 'upper class' children are dealing to younger children in poorer areas
- Dealers dealing to pay debts etc.

- Syringes found in new housing estate in town – all down to poverty
  - People have very little and nothing to lose
  - Cut price drugs
  - Gardai are aware but there is not a lot they can do
  - Different stages – different levels of income
  - Middle Class Estate – two houses and children where it is happening: also in neighbouring estate
  - 14-15 year olds buying drugs
  - School drop outs
  - Parents drinking
  - Children out all night – no supervision
  - No support from home
  - Praise from home – nil
- 3. What are the available policies/guidelines for volunteers and professional workers who work with young people:**
- On your own two feet: Secondary Schools
  - None
  - Substance abuse programme in the pipeline
  - R.S.E.
  - Should be top of the agenda
- 4. Do present policies on Education, Employment, Housing empower or disempower people in their own communities?**
- **POLICIES:**
    - Make people very dependent on various authorities
    - Dependency culture
    - Hand over responsibilities
      - Get house – hinge falls off – get someone to fix it – it’s the council’s problem – ‘someone else’ culture
      - They know more than the people who deal with it i.e., Council, Welfare, Education
  - The authorities are making people dependent
  - Education:
    - More emphasis on R.S.E. rather than drugs
    - Drugs are around a long time
    - Slowly spreading over the country and nothing is being done
    - Drugs issues should have been tackled years ago
    - Still is out of control
    - Money spent on R.S.E. is a waste of money and time



From the beginning to recently, drugs have been used and abused in ‘inner city’ areas. Areas with no employment and poor housing.

Politicians get involved only where people are voting.

All policies are creating dependencies.

People are not prepared to take responsibility.

Media and Department policies: Official departments are not taking the initiative or responsibility. Someone else will do it.

#### **5. Ideas which will help people affected by drug/substance abuse:**

- Primarily – this project will help
- We all know there is a problem – we know what is going on and where – but what do we do about it? There is nowhere to go.
- Athlone is only developing a Community spirit now
- Youth Clubs – getting children at risk/using to talk to those who have not
- Education
- Parent support – like Coolmine
- Don’t know who or where to go to – what do you do?
- Not a lot of support for parents to get help
- Are there services in the community to help a person with a drug problem?
- Money talks where support is concerned
- The person who is most vulnerable is least helped
- “Looking for an answer to be dropped down from above on us”