



South Eastern Health Board

**Data Co-ordination  
Overview  
of  
Drug Misuse  
2001**



South  
Eastern  
Health  
Board

Bord  
Sláinte  
an Oir-  
Dheiscirt



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**South Eastern Health Board  
Data Co-ordination  
Overview  
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Drug Misuse  
2001**

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## INTRODUCTION

This, the second annual report from the Data Co-ordinator gives a brief outline of data collected for the year 2001. This report refers to persons who attended treatment for alcohol and or drug misuse and is based on information supplied by the respective Treatment Services.

There were a number of new developments during 2001 that will have implications for future data collection.

1. The report on the National Drug Strategy 2001 - 2008 “Building on Experience” from the Department of Tourism, Sport & Recreation.

The main points of the National Strategy relating to research are:

- “To have available valid, timely and comparable data on the extent of drug misuse amongst the Irish population and specifically amongst all marginalized groups; and
- To gain a greater understanding of the factors which contribute to Irish people, particularly young people, misusing drugs.

The key performance indicators for data collection are:

- Eliminate all major gaps in drug research by the end of 2003; and
  - Publish an annual report on the nature and extent of the drug problem and on progress being made in achieving the objectives set out in the Strategy.”
2. The employment of new community based counsellors in Carlow, Kilkenny, Waterford and Wexford.

## 1. South Eastern Health Board Treatment Services

In addition to the four new community based counsellors, there are five treatment services in the South Eastern Health Board region based in each of the Counties of the Region and two drug treatment clinics. Data from these Services is collected from a form supplied by the Drug Misuse Research Division of the Health Research Board and is part of the National Drug Treatment Reporting System. The forms are completed by the Services' Counsellors and one form is required to be completed for each individual treated during the twelve-month period running from 1 January to 31 December.

Below are the results of the data collected during the year 2001. The figures from the Region include data collected from both statutory and voluntary treatment services. The breakdown figures only include data from the South Eastern Health Board Treatment Services (excluding the Drug Treatment Clinics – these figures are shown under item 2 of this Report).

***The following figures are based on those presenting to the treatment services and are not representative of prevalence of general drug use.***

In the Region 1,919 clients attended for or sought treatment at the South Eastern Health Board Treatment Services, Aiséirí in Cahir and Wexford, Aislínn, Ballyragget, Co. Kilkenny and Drug Treatment Clinics in Carlow and Waterford from January to December 2001. This is an increase of 501 clients on year 2000 figures. This increase is due in part to the employment of new counsellors by the South Eastern Health Board, improved reporting from some of the existing South Eastern Health Board Treatment Services and the inclusion of assessments into the reporting system, i.e. all clients who seek treatment at the voluntary treatment services are assessed before commencing treatment, and not all of those who are assessed take up treatment. In previous years data was not collected on those who were assessed but never took up treatment, this year it is.

2% of individuals who sought or received treatment during the year made contact with more than one of the Services. This figure is down 1% on year 2000.

In the following table, with regard to the Community Counsellors, brackets refer to their reporting period, which depended on commencement of employment.

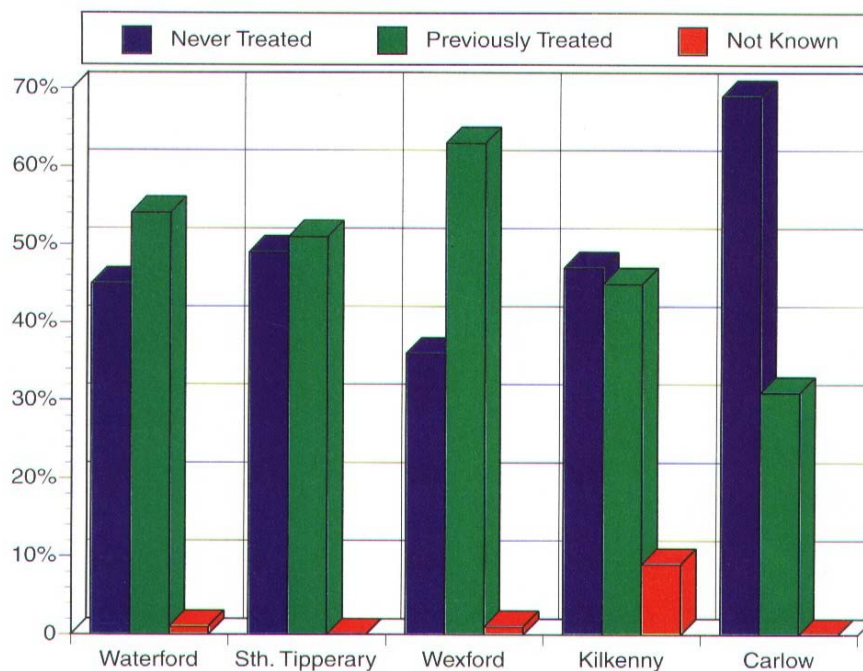
<b>S.EH.B. Treatment Service Name</b>	<b>Numbers Treated</b>	<b>Total Number Treated Per County</b>
<b>WATERFORD</b>		
<i>A.C.C.E.P.T.:</i>		
Brook House Waterford	336	
Dungarvan Centre	29	
Cappoquin Centre	13	
<i>Community Counsellor: (Aug. to Dec.)</i>	20	<b>398</b>
<b>SOUTH TIPPERARY</b>		
<i>South Tipperary Alcohol &amp; Addiction Service:</i>		
Coolgreaney House, Clonmel	192	
Carrick-on-Suir Centre	15	<b>207</b>
<b>WEXFORD</b>		
<i>Community Counselling Service:</i>		
St. Senan's Hospital Enniscorthy	76	
Gorey Health Centre	20	
New Ross Health Centre	19	
Enniscorthy Health Centre	20	
Wexford Community Mental Health Centre	55	
<i>Community Counsellor: (Nov. and Dec.)</i>	14	<b>204</b>
<b>KILKENNY</b>		
<i>Community Alcohol Treatment Service:</i>		
C.A.T.S. St. Luke's Hospital, Kilkenny	178	
St. Canice's Hospital	21	
Castlecomer Health Centre	12	
Urlingford Health Centre	8	
<i>Community Counsellor Kilkenny: (Oct. to Dec.)</i>		
Kilcreene Hospital	1	
Ballyhale Health Centre	1	
Castlecomer Health Centre	1	
<i>Community Counsellor Carlow: (June to Dec.)</i>		
Kilkenny Community Care	2	<b>224</b>
<b>CARLOW</b>		
<i>Community Alcohol Service:</i>		
Addiction Service St. Dymphna's Hospital	260	
In-patients, St. Dymphna's Hospital	44	
<i>Community Counsellor Carlow:</i>		
Community Care Centre Carlow	17	
Tullow Health Centre	2	<b>323</b>

Please find below some results from data received from the treatment services. Again, the figures for the **Region** include data from the South Eastern Health Board Services, the voluntary sector and the two drug treatment services. The other breakdown figures are from the South Eastern Health Board Services only.

# 1. **EVER PREVIOUSLY BEEN TREATED FOR DRUG MISUSE:**

<b>Region:</b>	<b>57%</b>	<b>had never previously been treated</b>
	<b>41%</b>	<b>had previously been treated</b>
	<b>1%</b>	<b>not known</b>

**South Eastern Health Board Treatment Services:**



There is a higher rate of clients who had “previously been treated” by the Waterford services in 2001 (54%) than in 2000 (27%) – this is due to the inclusion of reporting on the number of ongoing clients.

Of those who **had previously been treated for alcohol/drug misuse:**

74% of Waterford clients were ongoing

22% of South Tipperary clients

3% of Wexford clients

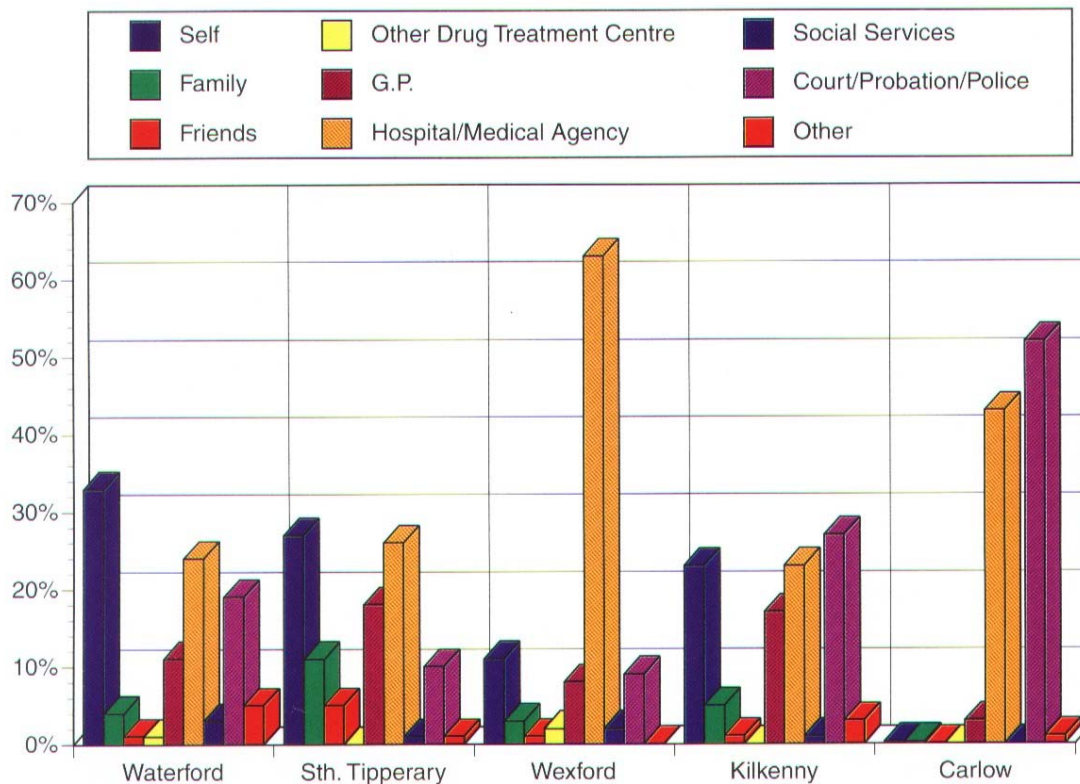
24% Kilkenny clients

50% Carlow clients.



## 2. SOURCE OF REFERRAL:

<b>Region:</b>	Self	19%
	Family	7%
	Friends	4%
	Other drug treatment center	2%
	G.P.	12%
	Hospital/Medical Agency	27%
	Social Services	2%
	Court/Probation/Police	20%
	Other	8%



Referrals from Hospital/Medical Agency are highest from Wexford and Carlow Services. The same was true of year 2000. This is due to the Counsellor being based in the in-patient hospital facility in Wexford and that access to the Carlow Service is only through a G.P. – to a psychiatrist and then to a counsellor. Referrals from the Court/Probation/Police are high within all the Services, with the majority coming from the Probation & Welfare Service. The figures for Court/Probation/Police are highest in Kilkenny and Carlow where Alcohol and Drug Awareness Programmes are run on a regular basis. These Programmes are essentially a service provided for the Courts/Probation Services.

### 3. GENDER:

As in year 2000, throughout all services the majority of those attending for treatment of problem drug/alcohol misuse were males.

**Region:** 76% male 24% female.

### 4. AGE:

		South Eastern Health Board Services				
Age Group	Region	Waterford	South Tipperary	Wexford	Kilkenny	Carlow
10- 19yrs	16%	16%	14%	8%	11%	15%
20 - 29 yrs	31%	34%	29%	29%	29%	37%
30 - 39 yrs	22%	19%	20%	26%	20%	22%
40 - 49 yrs	18%	15%	23%	23%	20%	13%
50 - 59 yrs	11%	11%	9%	12%	15%	8%
60 - 69 yrs	3%	5%^	4%	1%	4%	3%
70 - 79 yrs	1%	1%	1%	1%	1%	0%
Not Known	0%	0%	0%	0%	0%	1%

Those in the 20 to 29 year age groups had the highest numbers attending the treatment services. Again there was no significant change from year 2000 figures.

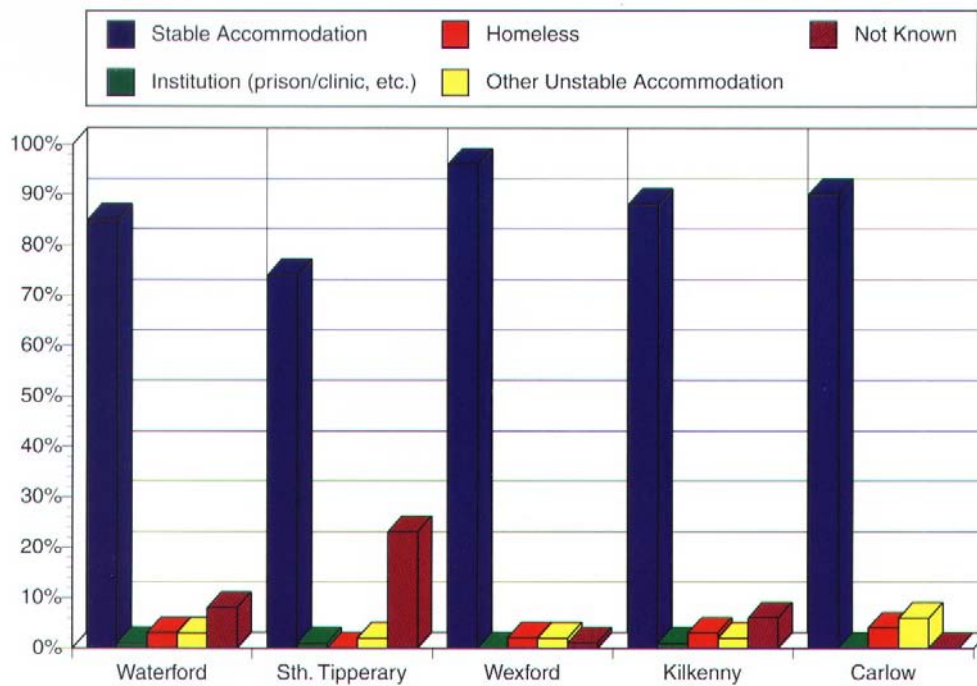
### 5. LIVING STATUS (where):

#### Region

LIVING STATUS	Percentages
1. Stable accommodation	85%
2. Institution (prison/clinic, etc.)	1%
3. Homeless	2%
4. Other unstable accommodation	3%
5. Not Known	8%

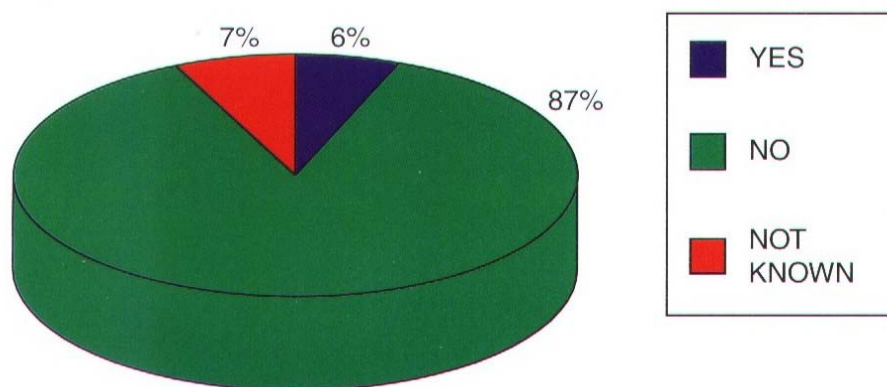


### South Eastern Health Board Services:



The majority of those who attended all of the Services during 2001 lived in stable accommodation. The figures for those who lived in institutions and who were homeless are down 1% on year 2000. There was an addition to the Health Research Board form in 2001, that of “other unstable accommodation”, which accounts for 3% of overall figures for 2001.

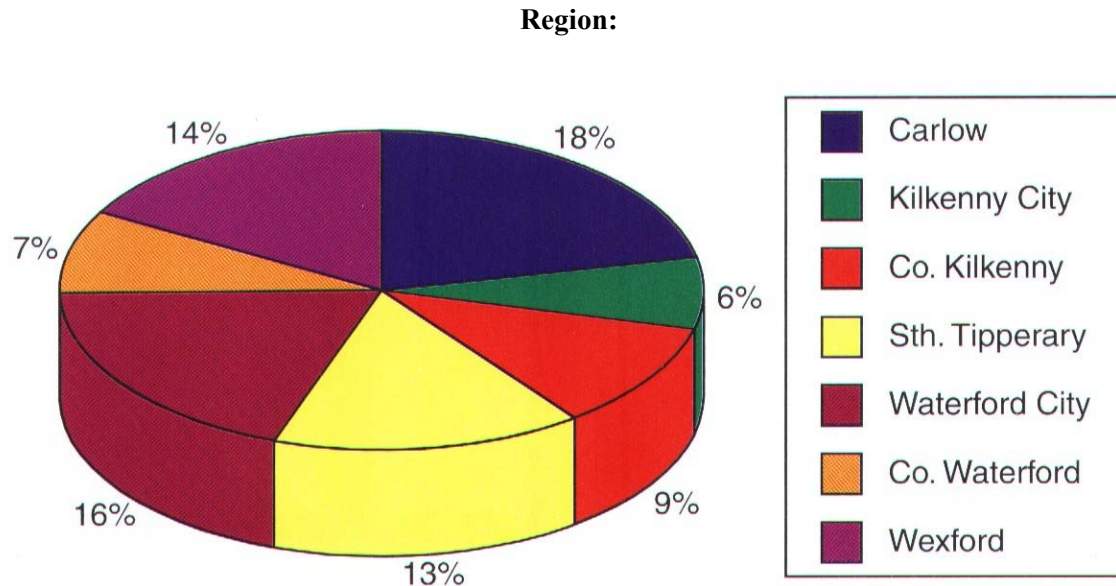
### **6. LIVING WITH DRUG MISUSER(S): Region**



Again throughout all the Services the majority of those attending for treatment were not living with a drug misuser – within the Region this accounted for 87% of clients, similar to year 2000 (85%)

**7. AREA OF RESIDENCE:**

Regionally, 83% of clients who sought treatment for problem alcohol/drug use had addresses in the South Eastern Health Board area.



**8. NATIONALITY:**

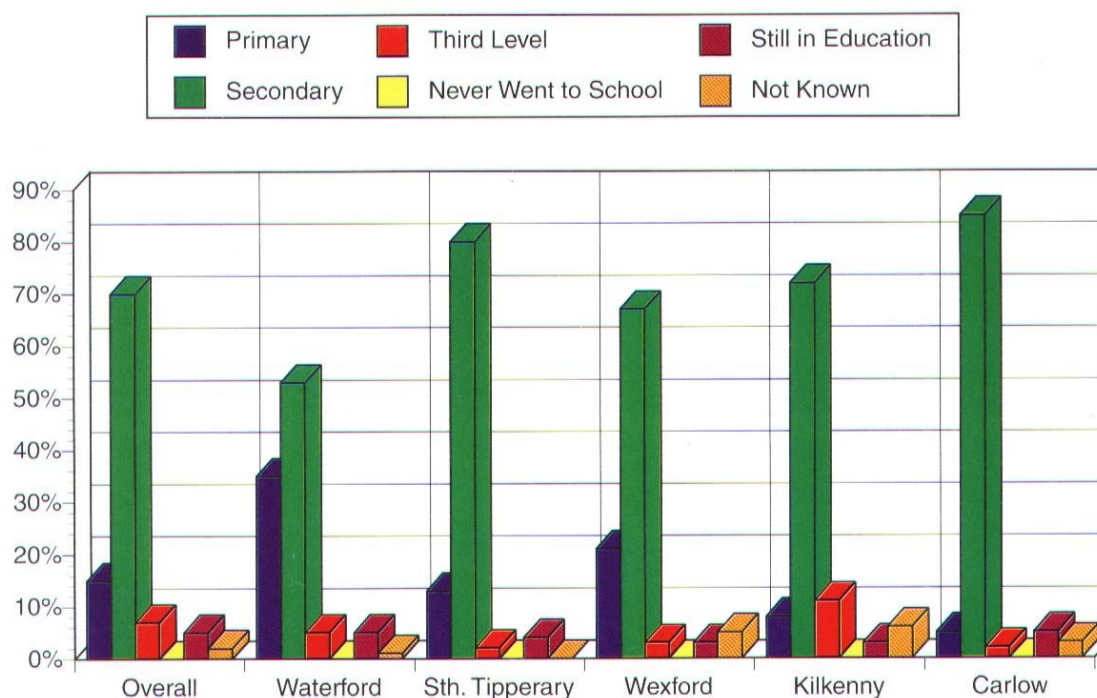
97% of those who attended for treatment were Irish. This figure is the same as year 2000. The remaining 3% were mostly European with the majority being from Great Britain.

**9. EMPLOYMENT STATUS:**

The table below refers to the employment status of clients who sought treatment or attended for treatment during 2001. As for year 2000, the majority of clients were employed. This is true for all services except for South Tipperary and Wexford where the majority of clients are unemployed. There is a large number of “not known” in the Kilkenny Service. This may be due in part to the information not being collected from clients who attend the Alcohol/Drug Awareness Programmes.

		South Eastern Health Board Services				
Employment Status	Region	Waterford	South Tipp	Wexford	Kilkenny	Carlow
In paid employment	41%	40%	34%	34%	40%	53%
Unemployed	37%	37%	42%	39%	25%	31%
FÁS/Training course	4%	3%	3%	5%	5%	3%
Student	6%	6%	5%	3%	3%	5%
Housewife/husband	5%	5%	4%	6%	5%	3%
Retired/unable to work.	6%	7%	12%	5%	8%	4%
Other	1%	0%	1%	3%	0%	1%
Not Known	2%	1%	0%	4%	13%	0%

#### 10. EDUCATION HIGHEST LEVEL REACHED:



The majority of clients, 70% of the Regional figures, had reached second level before leaving full time education. These figures are alike for 2000 within the Region, but drop for Waterford and increase for Wexford in 2001. The reverse is true for those leaving full time education at primary level – there is a decrease in Wexford and an increase in Waterford.

## 11. PROBLEM DRUG USE – MAIN DRUG:

Again, these next sets of figures relate to South Eastern Health Board Treatment Services, including the two Drug Treatment Clinics and the voluntary services.

Alcohol is still the main drug for which treatment is sought in the South Eastern Health Board region in 2001. This figure stood at 72% in 2000 and has increased to 77% in 2001. This may not be a true increase as assessments were included in 2001 figures.

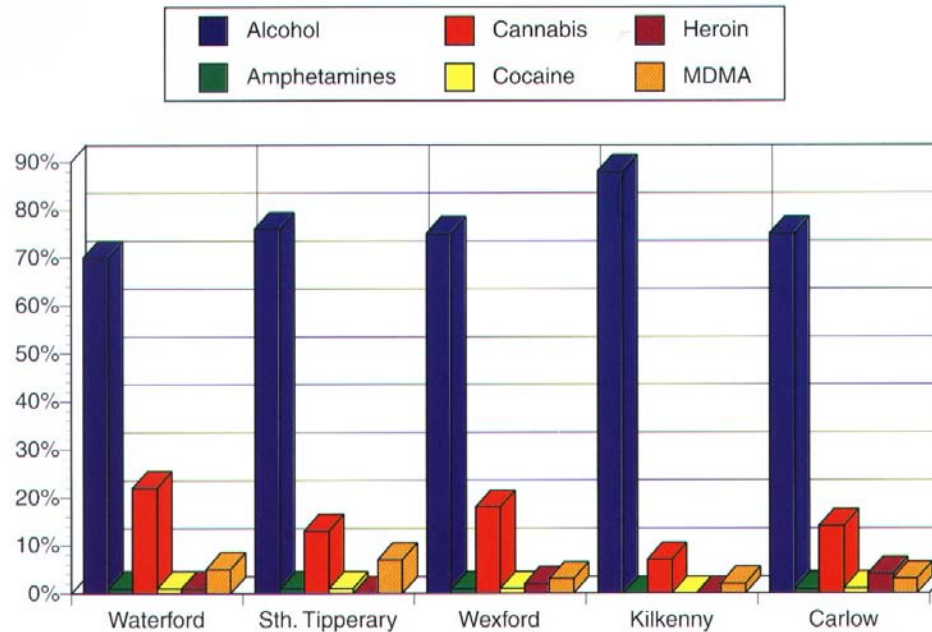
### Region:

Main Drug Name	% Year 2000	% Year 2001	Difference
<b>Alcohol</b>	<b>72%</b>	<b>77%</b>	+5%
Amphetamines	1%	1%	0%
Benzodiazepines	0.5%	1%	+0.5%
<b>Cannabis</b>	<b>17%</b>	<b>13%</b>	-4%
Cocaine	0.5%	1%	+0.5%
Hallucinogens	0.2%	0.3%	+0.1%
<b>Heroin</b>	<b>3%</b>	<b>4%</b>	+1%
<b>MDMA</b>	<b>5%</b>	<b>3%</b>	-2%
Other opiate type drugs	0.5%	0.4%	-0.1%
Prescribed medication	0.3%	0.2%	-0.1%
Volatile Inhalants	0%	0.3%	+0.2%

The four main drugs for which treatment was sought during both reporting years were Alcohol, Cannabis, Heroin and MDMA.

Below is a breakdown of figures from the **South Eastern Health Board Treatment Services** (excluding the Drug Treatment Clinics) for the main drugs for which treatment was sought in the respective Services.

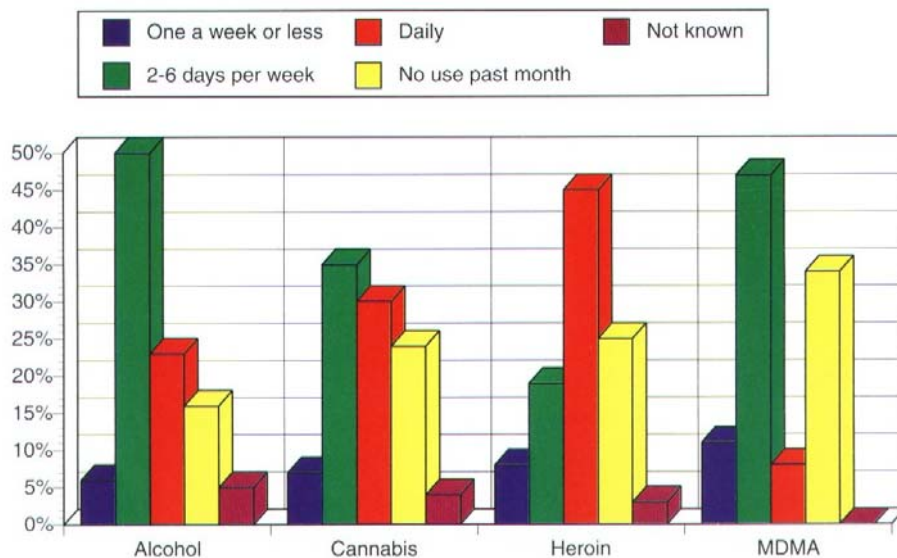
Alcohol figures for 2001 are up from those in 2000 in Waterford, South Tipperary and Kilkenny and down in Wexford and Carlow, whilst cannabis figures are up in Wexford and Carlow and down in Waterford and South Tipperary. The figure for cannabis in Kilkenny remains the same.



## 12. MAIN DRUG – FREQUENCY OF USE PAST MONTH:

**In the Region** of those who sought treatment for alcohol, cannabis, heroin and MDMA the following is a breakdown of the use of these drugs in the previous month prior to seeking treatment.

**Region:**

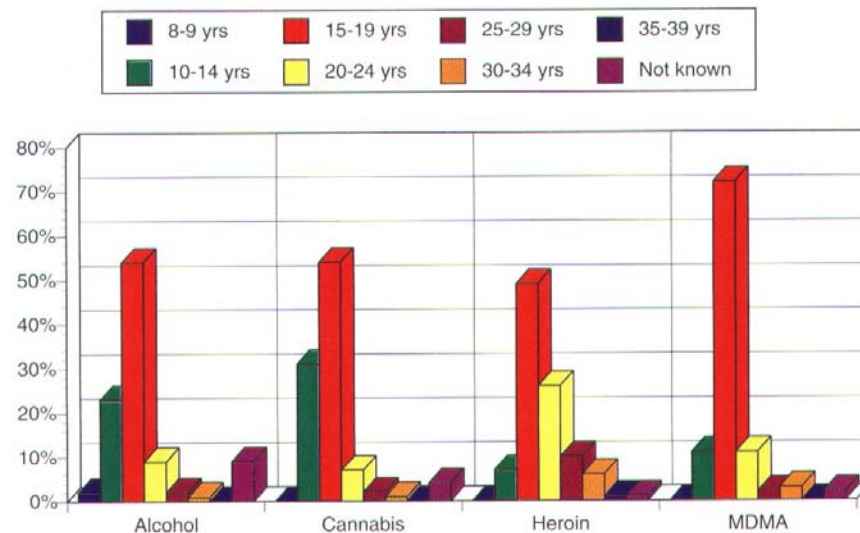


There is an increase in “no use past month” of alcohol from 8% in 2000 to 16% in 2001. There is also an increase in use of cannabis 2-6 days per week from 27% in 2000 to 35% in 2001. The daily use of heroin has increased from 28% in 2000 to 45% in 2001. However, there is a decrease in daily use of cannabis from 43% in 2000 to 30% in 2001.

### 13. MAIN DRUG – AGE AT FIRST USE:

Of those who sought treatment for alcohol, cannabis, heroin and MDMA the following is a breakdown of the age that the clients first used the respective drugs.

Again, as for item 12 above, these figures are based on data from all of the treatment services, both statutory and voluntary, within the Health Board area.



From the data received, and as with year 2000 data, the age of first use of alcohol and cannabis is highest between the ages of 10-14 yrs and 15-19 yrs, while the age of first use of heroin and MDMA is highest at 15-19 yrs.

In the Region, of those who sought treatment for heroin use, 22% had injected in the past month prior to treatment. This figure is down 13% on year 2000 figures. 4% had shared equipment – again this figure is down on year 2000 by 8%.

### 14. CONCERNED PERSONS:

In the South Eastern Health Board services, contacts were received from persons who were concerned about a family member's/friend's etc. alcohol and/or drug intake. Overall this accounted for 6% of those who attended the South Eastern Health Board's Treatment Services in 2001.

## 2. Drug Treatment Clinics

The two drug treatment clinics in the Region, based in Carlow and Waterford are essentially for those who are addicted to opiates. G.P.'s also provide a drug treatment service but this is limited.

Based on data received from the Clinics, 31 people sought treatment at the Carlow clinic and 9 at the Waterford clinic during 2001. This was 21 new referrals to Carlow Clinic and 1 new referral to Waterford Clinic. However, 19% of Carlow clients and 22% of Waterford clients were ongoing.

As with the other treatment Services the majority of those who attended both clinics were male.

The highest numbers of those attending both clinics were in the 20-29 age group – this represented 62% of clients.

6% of those who attended the Carlow clinic first used opiates between the ages of 10 and 14 – there were none in this age group at the Waterford clinic. The highest numbers of clients in both clinics who first used opiates were in the 15-19 age group. This represented 55% of Carlow clients and 56% of Waterford clients.

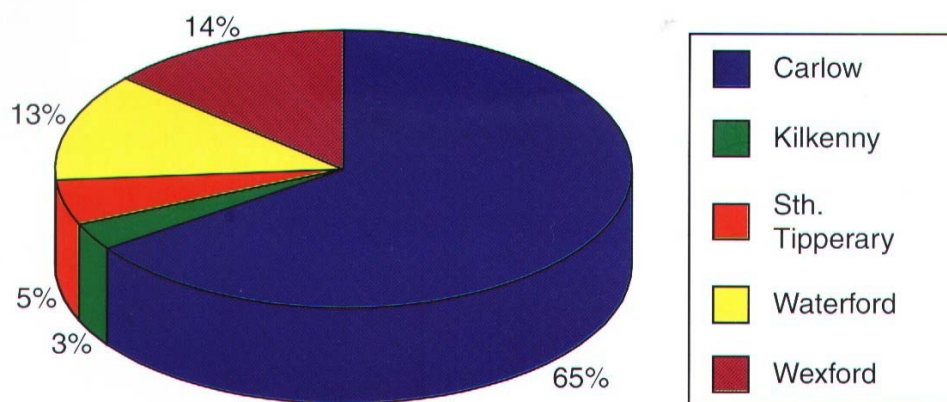
As with the other services the majority of those attending the Clinics were living in stable accommodation – 84% Carlow and 78% Waterford. However, unlike the other services the highest numbers of those who attended the Clinics were unemployed – Carlow 42% and Waterford 67%.

3% of those who attended the Carlow clinic had also sought treatment at another service in the Region during 2001. This also applied to 11% of Waterford clients.

### **Area of Residence:**

Combining data from both clinics the following chart shows the percentage of clients who had addresses in the South Eastern Health Board region.





5% of those who attended the clinics had addresses in North Tipperary.

### 3. H.I.P.E. System

The Hospital In-patient Enquiry (HIPE) Scheme is a computer based health information system designed to collect clinical and administrative data on discharges and deaths from acute hospitals in Ireland. It is the principal source of national data on discharges from acute hospitals. The data collected by the HIPE system can be logically grouped into demographic, clinical and administrative data. Each HIPE discharge record represents one episode of care and patients may have been admitted to hospital(s) more than once with the same or different diagnoses. All of the data collected is coded in a standardised format for computer input and for subsequent analysis of the data.

There are just under one thousand codes under this System. Data reports were requested under five of these codes that obviously related to alcohol and drugs. **There may be higher instances of alcohol or drug related admissions to the hospitals not accounted for under these codes.**

Data was received from the H.I.P.E. Departments of:

Waterford Regional Hospital  
 Wexford General  
 Our Lady's Hospital, Cashel  
 St. Joseph's Hospital, Clonmel  
 St. Luke's Hospital, Kilkenny

Data presented in the 2000 report was based on the first six months of 2000, data as presented below is based on the whole of year 2000.

Based on the data received and the overall number of coded cases for each of the hospitals, the following is a breakdown under one or more of the following codes:

- a. Alcoholic Psychoses
- b. Drug Psychoses
- c. Alcohol Dependence Syndrome
- d. Drug Dependence
- e. Non-Dependent Abuse of Drugs.

2% of all coded admissions to Waterford Regional Hospital cases had one or more of the above diagnoses and

3% of all coded admissions to Our Lady's Hospital, Cashel cases

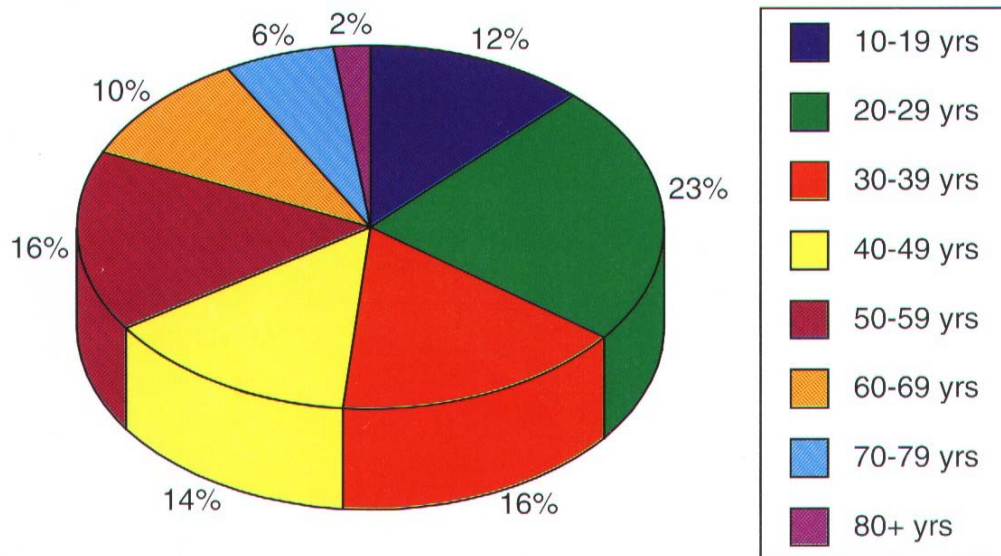
2% of all coded admissions to St. Luke's Hospital, Kilkenny cases

2% of all coded admissions to Wexford General cases and

1% of all coded admissions to St. Joseph's Hospital, Clonmel cases.

The following breakdowns include data from all five hospitals.

#### Age Group:



Overall the highest numbers of admissions to the hospitals were in the 20-29 year age group.

As with data received from all services the majority of admissions for all hospitals were male, 74%.

**Area Of Residence:**

<b>S.E.H.B.</b>	<b>%</b>
Carlow	9%
Kilkenny	18%
South Tipperary	9%
Waterford City	21%
County Waterford	11%
Wexford	23%
<b>National</b>	<b>6%</b>
<b>Great Britain</b>	<b>2%</b>

A patient can have up to five diagnoses; therefore the data as presented below includes both primary and secondary diagnoses. However, 16% of the cases had a primary diagnoses under one or more of the five H.I.P.E. codes. From 2002 it will be possible to record up to ten diagnoses and procedures.

Based on the data received from all hospitals:

<b>H.I.P.E. Codes</b>	<b>Percentage of Admissions</b>
Alcoholic Psychoses	<b>1%</b>
Drug Psychoses	<b>0.3%</b>
Alcohol Dependence Syndrome	<b>27%</b>
Drug Dependence	<b>1%</b>  (this figure includes cannabis/ cocaine/ unspecified opioids and unspecified drugs)
Non-Dependent Abuse Of Drugs	<b>67%</b> (this figure includes: 63% alcohol 2% drugs - amphetamines/ hallucinogens/ cannabis/ unspecified opioids/ unspecified drugs 2% both alcohol and drugs)
Multiple Diagnoses	<b>4%</b>

#### **4. Child Psychological Services**

In January 2001 it was agreed by the Senior Clinical Psychologists in the Region to collect data on the extent of alcohol and/or drug attendances to the Child Psychological Services by 10 to 18 year olds. This was to run for a pilot period of three months, from 1<sup>st</sup> February 2001 to 30<sup>th</sup> April 2001, at which time it would then be reviewed. Data was received from South Tipperary and Wexford Services. Four from Wexford and eight from South Tipperary attended with drug and/or alcohol use.

Combining the data received from both services the main drug of use was alcohol, followed by cannabis. Cannabis was the highest secondary drug of use but speed, ecstasy and solvents were also used. 50% of those on which data was received had lived with someone who misused either alcohol and/or drugs. 42% were not living with a drug/alcohol misuser and it was not known in 8% of the cases.

#### **5. In-Patient Psychiatric Services**

No data has been received from in-patient psychiatric services for the National Drug Treatment Reporting System at the Department of Psychiatry, Waterford Regional Hospital, St. Michael's Psychiatric Unit, St. Joseph's Hospital, Clonmel and St. Luke's Hospital, Clonmel. Some data has been received from St. Dymphna's Hospital, Carlow and to a lesser extent St. Canice's Hospital, Kilkenny by the Treatment Services. However, these are in-patient clients who are seen by the addiction service and a counsellor will not see all in-patients. However a large number of in-patients would be seen by the counsellor in St. Senan's, Enniscorthy, but some in-patient data would still not be collected, i.e. when the counsellor was not on site.

The following is data from a report from the Mental Health Division, Health Research Board "Activities of Irish Psychiatric Services 2000" by Antoinette Daly/Dermot Walsh

Health board hospitals & general hospital psychiatric units. All admissions. Diagnosis. Ireland 2000. (Rates per 100,000 population aged 16 years and over).

#### South Eastern Health Board

<b>Hospitals/Psychiatric Units</b>	<b>Numbers with percentages</b>	
	<b>Alcoholic Disorders</b>	<b>Drug Dependence</b>
St. Canice's Hospital, Kilkenny	<b>116</b> 23.6%	<b>18</b> 3.7%
St. Dymphna's Hospital, Carlow	<b>93</b> 29.9%	<b>17</b> 5.5%
St. Luke's Hospital, Clonmel	<b>15</b> 18.6%	<b>9</b> 5.1%
St. Otteran's Hospital, Waterford	<b>4</b> 8.2%	<b>1</b> 2.0%
St. Senan's Hospital, Enniscorthy	<b>137</b> 25.6%	<b>22</b> 4.1%
Psychiatric Unit, Waterford Regional Hospital	<b>114</b> 15.1%	<b>13</b> 1.7%
Psychiatric Unit, St. Joseph's Hospital, Clonmel	<b>246</b> 22.7%	<b>21</b> 1.9%

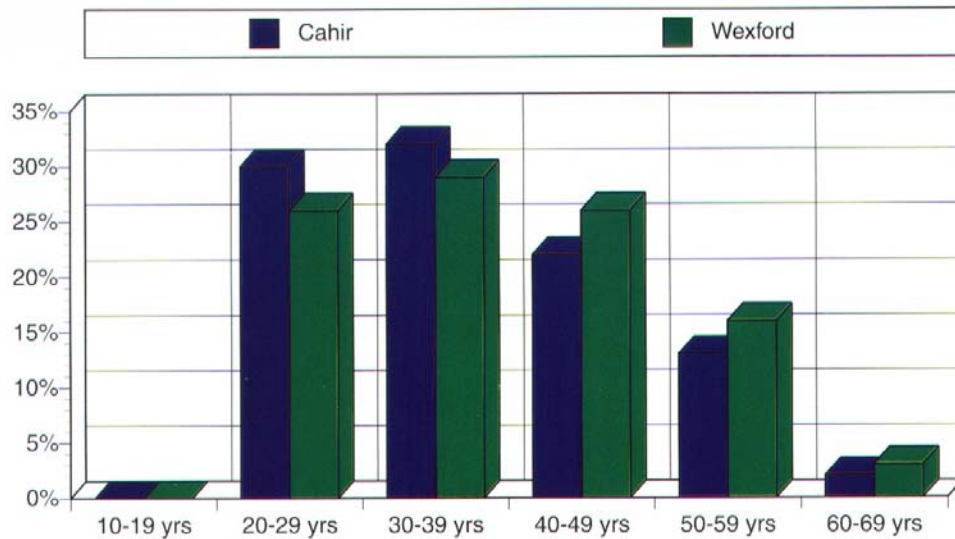
## 6. Aiséirí Services

Based on the information supplied by the two Aiséirí Services in Cahir and Wexford, 170 people sought treatment for problem alcohol/drug use at the Cahir Centre during 2001 and 212 at the Wexford Centre.

3% of those who sought treatment at Cahir and 4% at Wexford had also sought treatment at another treatment centre in the Region.

As with the South Eastern Health Board Treatment Services the majority attending these services were male.

### Age Group:



The majority of clients who sought treatment at both services during the year were in the 30-39 age group, this differs to the South Eastern Health Board services where the majority who sought treatment were in the 20-29 age group.

### Area of Residence:

35%, (down 4% on year 2000) of those who attended Aiséirí, Cahir had addresses in the South Eastern Health Board area and 55% (up 7% on year 2000) of those who attended Aiséirí, Wexford. Both Services provide treatment on a national level.



**Main Drug:**

As with the South Eastern Health Board Treatment Services the main drug for which treatment was sought was alcohol. The figure for alcohol is up 17% from 76% in year 2000 to 93% in 2001 at the Cahir Centre but remains the same for Wexford Centre. The figure for Cannabis is down to 1% from 16% at Cahir Centre and up at Wexford Centre from 4% to 6%.

Main Drug	Aiséirí Cahir	Aiséirí Wexford
Alcohol	93%	84%
Amphetamines	1%	0%
Benzodiazepines	0%	1%
Cannabis	1%	6%
Cocaine	1%	2%
Heroin	3%	5%
Other Opiate Type Drugs	0%	1%
Hallucinogens	0%	1%
MDMA	2%	1%

36% of Cahir clients also had secondary drugs of misuse and 38% of Wexford clients. Cannabis was the main secondary drug of misuse for both Centres. This was followed by speed and benzodiazepines at the Cahir centre and MDMA and alcohol at the Wexford centre.

**7. Aislinn Adolescent Treatment Service**

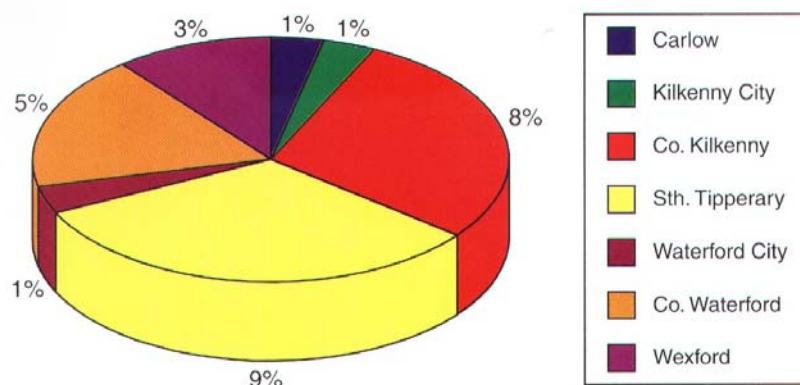
Aislinn Adolescent Treatment Service is based in Ballyragget, Co. Kilkenny and caters for 15–21 year olds. Like the Aiséirí Services, Aislinn provides treatment on a national level.

Based on information provided by the Service during 2001, 151 individuals sought treatment for problem drug and alcohol use. This was an increase of 55, which is due in part to the inclusion of assessments in this years reporting system.

**Area Of Residence:**

28% (down 7% on year 2000 figures) of those who sought treatment at Aislinn during the year had addresses in the South Eastern Health Board area. The following chart gives a breakdown of this figure.





### Main Drug:

The main drugs for which treatment was sought were:

Main Drug	Aislinn
Alcohol	70%
Cannabis	20%
MDMA	3%
Heroin	3%
Amphetamines	1%
Prescribed medication	1%
Volatile inhalants	1%

Unlike year 2000 where the main drug for which treatment was sought was cannabis at 56%, this figure is down to 20% in 2001, the main drug for which treatment was sought was alcohol at 70%, which is an increase of 58% on year 2000.

All clients who seek treatment at Aislinn are first assessed. 30% of those who were assessed did not take up treatment.

## 8. South East Regional Drug Helpline

The following is a record of calls received from the Helpline for the year 2001.

Area	No. of calls 2001	NO. of calls 2000	Difference
Carlow	37	71	-34
Wexford	119	116	+3
Tipperary	73	67	+6
Kilkenny	167	332	-165
Waterford	472	578	-106
Other areas	136	85	+51
<b>Total</b>	<b>1004</b>	<b>1249</b>	<b>-245</b>

The number of calls overall are down on year 2000, this may be due to the additional services that are now working as outreach services within the community or calls may be coming to the Helpline when the telephone is unmanned and some callers may not leave a message.

<b>Drugs Discussed</b>	<b>No. of calls</b>
Cannabis/alcohol	327
Alcohol only	102
Ecstasy	112
LSD (Acid)	157
Amphetamines (Speed)	208
Cocaine	32
Heroin	29
Mushrooms	17
Anabolic Steroids	20

### **Type of Call**

The calls to the Helpline mainly come from users, family members and professional carers. According to Ms. Roseleen Hanton, Director of the Helpline, the majority of calls come from concerned parents.

### **Information**

Those contacting the Helpline look for information on:

- a. referrals
- b. legal
- c. general

## **9. Probation & Welfare Services**

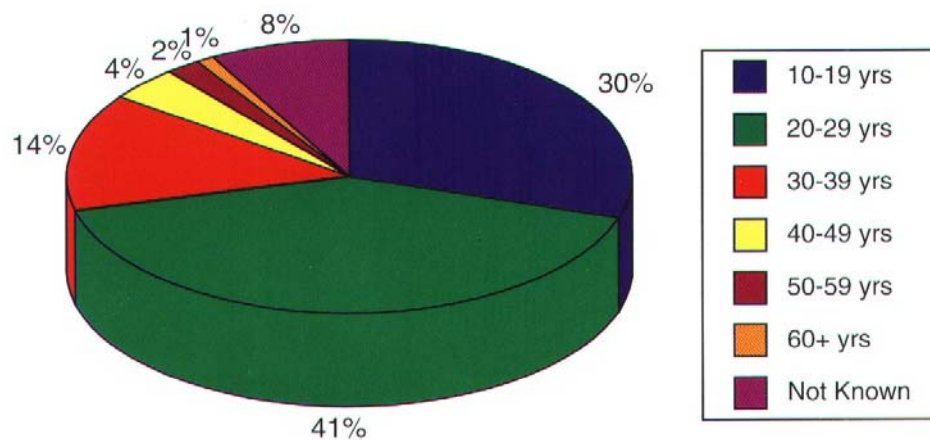
Data from the Probation & Welfare Services is collected from Form A's which are the initial client referral sheet from the Courts to the Probation & Welfare Service. The quality of data presented below for these Services is therefore dependent on the amount of information recorded on the Form A's, which in some cases is minimal. It is therefore likely that there is an underestimation of the number of cases that involved alcohol and/or drugs.

Based on the data collected, below is the percentage of cases in each area that involved alcohol and/or drugs.

Carlow	52% of cases
South Tipperary	35% of cases
Kilkenny	41% of cases
Waterford	50% of cases
Wexford	65% of cases

As with all the Treatment Services the majority are male – overall 88% male and 11% female.

#### Age Group:



As with year 2000 figures the majority of Probation & Welfare clients were in the 20 – 29 year age group, followed by those in the 10-19 year age group. The figure for 10-19 year olds is up 4% on year 2000 whilst the figure for 20-29 year olds is down 4% on year 2000 figures.

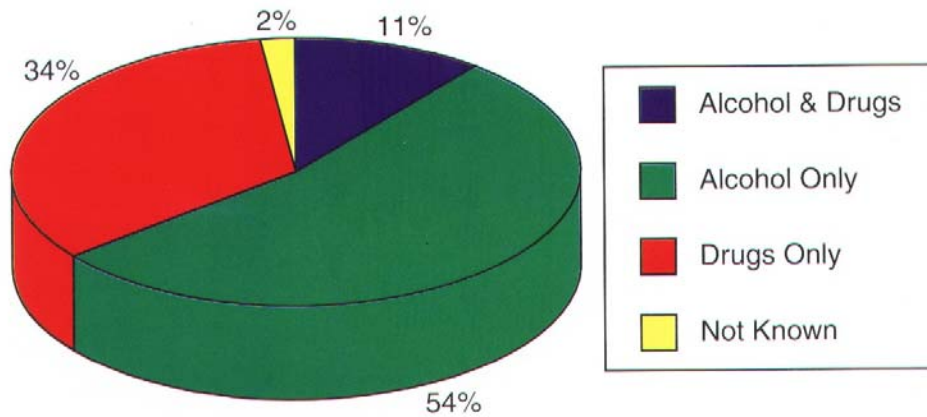
The highest percentage of “not known” cases comes from the Kilkenny Service (43% of cases). This is due to persons not yet allocated a Probation & Welfare Officer. Again this was the same in year 2000.

#### Area of Residence:

87% of clients had addresses in the South Eastern Health Board area. This is up 3% on year 2000 figures.

Area	Percentages
Waterford City	17%
County Waterford	8%
South Tipperary	9%
County Tipperary Unspecified	1%
Wexford Town	6%
County Wexford	11%
Kilkenny City	12%
County Kilkenny	3%
Carlow Town	16%
County Carlow	4%

Of the cases which involved alcohol and/or drugs:



The main drugs involved were Cannabis, Amphetamines and MDMA and to a lesser extent Benzodiazepines and Heroin.

71% of the cases were referred to a treatment service for either screening, alcohol/drug awareness programmes or counselling.

The treatment services to which clients were referred were:

South Eastern Health Board Treatment Services  
 Aiséirí Services  
 Aislínn  
 Cuan Mhuire  
 Marist Rehab Centre, Athlone  
 Counselling Service, Wexford Area Partnership  
 G.P.'s.

## **10. Community Based Drug Initiatives**

There are eight Community Based Drug Initiatives in the South Eastern Health Board region with a total of nine outreach workers in place. Agreement was reached for the collection of data from the Initiatives towards the end of 2001. There is no comparable data for 2001 available to date as data has yet to be received from some of the initiatives.

## **11. Accident & Emergency Research – Waterford Regional Hospital**

A research project was carried out at the Accident & Emergency Department of Waterford Regional Hospital to ascertain the extent of drug and alcohol attendances at that Department. The research was carried out over a three-month period from 05.03.01 to 03.06.01. Details were taken on those who were born between 1966 and 1986 (both dates inclusive).

During the three-month period there were 9,076 attendances at the Accident & Emergency Department, of which 3,234 were born between the above dates.

Of these 3,234 attendances:-

12%	were admitted.
1%	did not wait to be seen.
79%	did not relate to alcohol and/or drug misuse.
4.5%	were alcohol and drug related.

The client notes could not be located in 3.5% of these attendances.

It is probable that there were higher instances of drug/alcohol related cases at the A & E Department during this period, however one must take into account that the details of those cases who were admitted have yet to be checked and due to the busy nature of the Department, client notes sometimes contain minimal information.

Of the 4.5% of cases that involved alcohol and/or drugs:-

- 5% attended the Department on more than one occasion during the three-month period.
- 53% attended the Department between the hours of 11 p.m. and 6 a.m.

- 65% were male and 35% female.
- 32% were in the 14 to 19 age group.  
56% were in the 20 to 29 age group  
12% were in the 30 to 35 age group.
- 37% lived in a rural setting and 63% in an urban setting.
- Again, alcohol was the main legal drug involved at 88%. The main illegal drug was Ecstasy at 4%, followed by Cannabis and Speed, both at 2%.
- The main reasons for attending the Department were:
 

a. Falls	31%
b. Assaults	13%
c. Requiring detoxification and/or suicidal ideation	12%
d. Found unconscious/collapsed/fainted	10%

The information obtained from the Accident & Emergency Department did not add significantly to the data on prevalence of alcohol and or drug misuse.

## DEVELOPMENTS - 2002

### 1. Health Services: National Performance Indicators 2002

The Chief Executive Officers of the Health Boards endorsed a submission on the development and implementation of performance indicators for Health Services by a National Performance Indicators Project Team that was representative of each of the Health Boards and the Eastern Regional Health Authority.

The five key areas/domains within which Performance Indicators are categorised are:

1. Effectiveness
2. Efficiency
3. Health improvement
4. Equity/Access
5. Service User Satisfaction/Experience

The Performance Indicators which have an implication for drug and alcohol data collection are those covered under Social Inclusion – Addiction Services and those under Mental Health Services – Drug and Alcohol Services. There is a review of the Performance Indicators under these headings by a new national sub-committee,

chaired by the South Eastern Health Board's Regional Drug Co-ordinator, as the information required under the Performance Indicators needs to be adjusted in line with the current Health Research Board's National Drug Treatment Reporting System.

Training on the implementation of the Performance Indicators took place during the month of March 2002.

## **2. Youth Homeless Project (Youth Homeless Strategy)**

Collaboration has taken place on a proposed assessment form for homeless under 18's between Ms. Mara Morrissey, Youth Homeless Project and the Data Co-ordinator. The aim of which would be to collect data on the extent of alcohol and/or drug use amongst homeless under 18's.

## **3. In-Patient Psychiatric Services:**

In view of the Health Services Performance Indicators, collaboration on the collection of both alcohol and drug data from these Services will need to commence in 2002.

## **4. Aislinn Adolescent Treatment Centre:**

The Department of Health & Children requested that a monthly "census" of young people in the Centre and monthly details of new clients be collected from the Centre.



## ACKNOWLEDGEMENTS

I would like to take this opportunity to thank all the Counsellors in the South Eastern Health Board Treatment Services, and the management, staff and counsellors in Aiséirí and Aislinn for providing the data for this report. Ms. Ailish Delaney, Regional H.I.P.E. Co-ordinator, and the H.I.P.E. Coders who submit the reports to me. I would also like to thank the Probation & Welfare Services and the South East Regional Drug Helpline for their co-operation and the data they provide. Finally, to thank Dr. Neville de Souza and Mr. Tony Barden for their assistance and support.

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