Introduction to the Bray Local Drugs Task Force First Report

The Bray Local Drugs Task Force was established in early 2000 to prepare a service development plan for Bray.

The first report of the Bray Local Drugs Task Force is the result of a comprehensive public consultation process, which involved liaising with local voluntary, community and statutory groups. This report is also the result of 1:1 discussion with a number of treated and non-treated illegal drug misusers in the Bray area and their views have been taken into consideration in the preparation of this plan.

This first report is also the result of intense planning and discussion by the Bray Drugs Task Force and the four sub-groups, namely Education and Prevention (chaired by Maire Therese Kennan O’Dowd), Treatment, Rehabilitation (both chaired by Declan Donnelly) and Supply-Control (chaired by John Hand).

I would like to take the opportunity to thank the members of the sub-groups for the time and patience they invested in developing this plan, and particularly the respective Chairpersons. They have been extremely committed and generous with their time and in most cases, their commitment has gone beyond the call of duty. This process would not have been possible without the skill and determination of Vivienne O’Brien whose support and dedication to, the preparation of this plan motivated the sub-groups and drove the process in a very short space of time.

This Task Force has been in existence for 2 years and, during that time, has been assisted in particular by Bray Partnership, through the use of their offices for Task Force meetings. I would like to extend my thanks to them. I would also like to thank the National Drugs Strategy Team, and in particular Derval Howley, for the on-going support and encouragement.

This report and the implementation of the proposals will begin a process in Bray of addressing drug related issues. The Task Force is aware that the multi-faceted problem of drugs will not be solved through the implementation of this plan, but it certainly hopes that very significant changes will be made in service delivery in terms
of education and prevention, treatment, rehabilitation and supply control. However, it is just the first stage in the process of improving service delivery and meeting the needs of those addicted to drugs, their families and those at risk of substance misuse. This work will be on-going and long-term and we hope that the mechanisms we are planning to put in place will, in the future, work towards assisting people to live drug-free lifestyles.

Brian McLoughlin
Chairperson
Section 1

1.1 Background to preparing the 1st Action Plan

The Bray Partnership, community workers and activists formed the Bray Drugs Working Group in 1997. This group came together out of concern for the perceived rise of illegal drug use in Bray and sought to examine the need for expanded and more effective drug related services.

The work of the Bray Local Drugs Task Force is directly informed by a research report carried out on behalf of the Bray Drugs Working Group (Brady, C et al: 1999). This was the 2nd piece of research in a two-part process. The first piece of research, a prevalence study of treated illegal drug users, was commissioned by the Bray Partnership in 1998 (O’Sullivan & Roche:1998) with the findings of that report indicating that there were at 67 people on treatment in Bray, acknowledging the growing concern of the Bray Drugs Working Group that the problem of illegal drug use was increasing.

1.2 Towards a Drugs Service Development Plan for Bray

(Brady et al: 1999) This report concerns the nature and scope of service provision in responding to illegal drug use in Bray, pre Task Force designation. It is a research based examination of existing services and a broad needs analysis leading towards a comprehensive service plan, within the Task Force model.

Through an evaluation of service provision at that time, and individual and group interviews with drug misusers, community activists and service providers, the authors identified the gaps in service provision as follows:-

1.2.1 Gaps in Service Provision

- Rehabilitation Programmes: There is no progression route or tailored programmes to help recovering users after medical maintenance programmes.
• **Premises:** There is a lack of suitable premises for every aspect of work relating to drugs - from youth work to counselling, to methadone programmes, to follow-on programmes.

• **Needle Exchange:** Both the outreach worker and drug users stated that the lack of a needle exchange led to people exposing themselves to unnecessary health risk.

• **Pharmacies:** More pharmacies urgently need to be persuaded to engage with the methadone protocol.

• **Information Services:** There is an expressed need for the development of a walk-in counselling and advice service.

• **Socialising facilities for yours people:** A drop-in centre, or at least the provision of a drop-in place at certain was a special need identified by the lifeskills organisers

• **Sports and Leisure Activities:** The need for a drop-in centre for young people was identified by users. They also cited the need for a gym or sports complex which does not cost a huge entry fee.

• **Counselling, Personal Development Courses and Alternative Therapies:** A number of users emphasised the need for good counselling and personal development work.

• **Courses for Adults in the Community to Build Awareness of Drug. Use:** There is a need for existing clinics or educational facilities to work with parents in a supportive way at community level about the issue of drugs.

• **Youth Workers:** The provision of more paid workers to support youth initiatives was seen as critical.

• **Childcare:** Subsidised affordable childcare which is community-based would enable mothers to take up educational and working opportunities. The lack of affordable, good quality childcare has a close relationship to the drug problem on many levels.

(Brady, C. et al: 1999:4)
1.2.3 **Summary of Strategy Plan**

To complement existing services and to fill the identified gaps, the following strategy was proposed:

### Education and Prevention Priorities

<table>
<thead>
<tr>
<th>Networking</th>
<th>Auditing Current Education Provision and Training Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Training Needs</td>
<td>Present a Management Plan for current education needs</td>
</tr>
<tr>
<td>Identify and Prioritise Vulnerable Children</td>
<td></td>
</tr>
<tr>
<td>After School Group</td>
<td></td>
</tr>
<tr>
<td>Drop-in Facility</td>
<td></td>
</tr>
</tbody>
</table>

### Treatment Priorities

<table>
<thead>
<tr>
<th>Needle Exchange</th>
<th>Increased Local Pharmacy Involvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Support</td>
<td>Improved Premises for Local Clinics</td>
</tr>
<tr>
<td>Central Information Resource</td>
<td>Gender Sensitive Approach</td>
</tr>
</tbody>
</table>

### Rehabilitation Priorities

**A Multi-Layered Approach**

- Foundation Courses
- Mentoring
- Preparation of Mainstream Service Providers
- For the Special Needs of Clients
- Links with FAS, VEC and LES
- Integration Into the Overall Development Plans for the Area

(Brady, C: 1999:30)
1.3 Consultation Process

Since its establishment in early 2000, the Bray Local Drugs Task Force has had 15 full meetings. Three sub-groups were established and have met on numerous occasions. However, the delay in developing this plan was out of the control of the Bray Local Drugs Task Force, due to the area not being resourced with a full-time Coordinator until July 2001. The Task Force and sub-groups continued to meet during the first 18 months and kept the momentum going for the development of services.

Since July 2001 the Task Force and sub committees have consulted with statutory and community-groups on a wide range of issues, taking into account the aforementioned gaps in service provision and the proposed strategy for service development. Drug users on treatment and those not yet in treatment were also consulted on their various needs. This consultation process highlighted the urgency of the response needed in the town as the increase in numbers on treatment and the lack of any parallel improvement in service provision has widened the gaps in service provision (See Appendix).

In August 2001, an evaluation of current service provision was carried out with a questionnaire being sent to all groups/organisations in Bray.

It was clear following the evaluation of current service provision and during the consultation process, that organisations in Bray could provide a service under the heading of Education and Prevention and the sub-group worked directly with these organisations.

It was clear following the evaluation of current service provision and during the consultation process, that organisations in Bray could not provide a service under the heading of Treatment and Rehabilitation and the sub-group worked to generate a response to this need.
It was clear following the evaluation of current service provision and during the consultation process, that organisations in Bray could not provide a service under the heading of Supply Control and the sub-group worked to generate a response to this need.

On the 20th of September 2001, the Bray Local Drugs Task Force held a full day meeting to set tasks and targets. Following that meeting, beginning the week of 2 October, an Advertisement was placed in two local papers and on local radio, calling for interested organisations, groups and individuals to apply to fill the gaps in service provision. (See Appendix). Interested parties contacted the Task Force Office and received an Application Form and Supporting Documentation. (See Appendix). All groups were offered assistance during the application process by the relevant subgroups of the Task Force. The closing date for applications was 2 November 2001.

Throughout the application process 13 groups sought assistance to discuss their applications.

In the two-month period between 20 September and 15 November, the sub-groups held in total 15 meetings, some lasting full days and some lasting half a day. Members of various sub-groups also sought information from other Task Force projects in different areas to broaden views on what could be delivered in the area of service provision and visited a number of projects.

Throughout the first two weeks in November all applications were discussed in detail by the sub-groups, and in some cases, the applications were revised. Recommendations were made by the relevant sub-groups, to the Full Task Force on 15 November 2001, with some of the recommendations being revised by the Full Task Force.
Section 2

Bray Area Profile

Situated in the Northeast of Co. Wicklow, Bray is on the margins of the county’s administrative and political boundaries. In terms of local government structures, Bray has an Urban District Council and this in turn is linked into the Wicklow County Council based in Wicklow town. For the Department of Social, Community and Family Affairs, Bray is part of the Eastern region covering Counties Dublin, Kildare and Wicklow, while for FAS, at the time of writing of this report, it is part of the Dublin South and Wicklow Region stretching from Ringsend in Dublin 4 to the rural parts of Wicklow in the south of the county (proposed changes to FAS’ regional structures may affect the current arrangements). From an IDA perspective, Bray is part of its Eastern Region covering Meath, Kildare and Wicklow. In terms of Dail constituencies, Bray is within the Wicklow constituency, which has almost the same boundaries as the County. For tourism, the Wicklow County Tourism is based in the Wicklow County Council offices, while the Board Failte supported MERTO (Mid-Eastern Regional Tourism Organisation) has no organisational presence in the town.

This combination of administrative and political boundaries has meant that Bray has suffered by being neither regarded as an integral part of urban Dublin, nor as a regional town in its own right, which has lead to a lack of any distinctive identity.

2.1 Population

According to the 1996 census, Co Wicklow had a population of 102,683, with Bray having the largest urban concentration of population within the county (25,252). For purposes of organisation, Bray is divided into 5 District Electoral Divisions (DEDs) in the Bray Urban District Council. The population spread amongst these divisions -Bray No’s 1, 2, 3, Rathmichael and Kilmacanogue (part of) is outlined by Age in Table 1, and by Gender in Table 2.
### Table 1: Population Spread by Age Groups

<table>
<thead>
<tr>
<th>DED</th>
<th>&lt;1</th>
<th>1-4</th>
<th>5-14</th>
<th>15-24</th>
<th>25-44</th>
<th>45-64</th>
<th>65+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray No. 1</td>
<td>23</td>
<td>76</td>
<td>206</td>
<td>229</td>
<td>452</td>
<td>315</td>
<td>256</td>
<td>1557</td>
</tr>
<tr>
<td>Bray No. 2</td>
<td>49</td>
<td>231</td>
<td>699</td>
<td>900</td>
<td>1385</td>
<td>1295</td>
<td>1221</td>
<td>5870</td>
</tr>
<tr>
<td>Bray No. 3</td>
<td>66</td>
<td>282</td>
<td>1039</td>
<td>1426</td>
<td>1829</td>
<td>1641</td>
<td>671</td>
<td>6954</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>37</td>
<td>217</td>
<td>524</td>
<td>456</td>
<td>711</td>
<td>402</td>
<td>169</td>
<td>2516</td>
</tr>
<tr>
<td>Kilmacanogue</td>
<td>135</td>
<td>639</td>
<td>1704</td>
<td>1500</td>
<td>2769</td>
<td>1297</td>
<td>311</td>
<td>8355</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>310</td>
<td>1445</td>
<td>4172</td>
<td>4601</td>
<td>7146</td>
<td>4950</td>
<td>2628</td>
<td>25,252</td>
</tr>
</tbody>
</table>

### Table 2: Population Spread by Gender, 1996 Census

<table>
<thead>
<tr>
<th>DED</th>
<th>Females</th>
<th>Males</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray No. 1</td>
<td>825</td>
<td>732</td>
<td>1557</td>
</tr>
<tr>
<td>Bray No. 2</td>
<td>3130</td>
<td>2740</td>
<td>5870</td>
</tr>
<tr>
<td>Bray No. 3</td>
<td>3547</td>
<td>3407</td>
<td>6954</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>1291</td>
<td>1225</td>
<td>2516</td>
</tr>
<tr>
<td>Kilmacanogue</td>
<td>4326</td>
<td>4029</td>
<td>8335</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>13,119</td>
<td>12,133</td>
<td>25,252</td>
</tr>
</tbody>
</table>

(CSO, 1996)

#### 2.2 Socio-Demographic Profile

**2.2.1 Deprivation Score**

GAMMA conducted an analysis of deprivation in Bray using the deprivation score developed by Trutz Haase. This is based upon a ranking method of calculation where a score is given to each DED. The Haase Index measures factors such as the unemployment rate, levels of car ownership, number of medical card-holders and over-crowding. The ranking is from 1-10 (1 being the most affluent, 10 being most disadvantaged). The higher the deprivation score (10), the more deprived is the DED. Two DEDs in Bray - Bray No. 1 and Rathmichael - were found to be extremely disadvantaged with a top rating of 10, ranking them among the most disadvantaged in the country. Bray No. 2 and Bray No. 3 were found to have significant pockets of disadvantage concentrated in large local authority estates.
2.2.2 Bray No. 1 & Rathmichael

Little Bray (excluding Corke Abbey) has a population of 4,426 (CSO 1996), which represents an increase of 4.4% from 1991, with a youth population (0-19 years) of 37%, broadly in line with the national average.

44% of Little Bray’s housing stock is rented from the local authority, over four times the national average, with the unemployment rate being over twice the national average at 30%. Almost half of those living in Little Bray left school at 15 or less and are either semi-skilled or unskilled. This compares to approximately one third nationally.

The CSO figures accurately reflect some of the experiences of Little Bray as Little Bray and Fassaroe make up the overwhelming majority of the District Electoral Division of Bray No. 1, Bray - Rathmichael and Shankill-Rathmichael, with both Bray No. 1 and Rathmichael falling into the top 10% of scores and being in an acutely disadvantaged situation. Rathmichael is particularly disadvantaged, with the lowest levels of educational attainment, the most disadvantaged social class and structure and extremely high unemployment rate.

2.2.3 Ballywaltrim & Wolfe Tone

Due to the geographical basis on which the Central Statistics Office compiles its statistics, it is more difficult to assess indicators for other areas in the town with large local authority estates. Wolfe Tone is in the DED Bray No. 3, while other local authority estates including Oldcourt, Kilbride and Deerpark are in Bray -Kilmacanogue (Ballywaltrim lies entirely within the Bray-Kilmacanogue (part of) DED and includes the estates of Oldcourt, Deerpark, Ballywaltrim Heights and Kilbride).

Bray-Kilmacanogue has a population of 8,355 (1996). Unemployment, education levels, size of local authority housing stock etc are broadly in line with the national average. However, by using the CSO figures for Little Bray as an accurate baseline and the Department of Justice, Community and Family Affairs retro statistics on Unemployment Assistance/Unemployment Benefit (UA/UB), O’Sullivan & Roche
(1998), ascertained the comparative situation in Wolfe Tone and Old Court as follows:-

<table>
<thead>
<tr>
<th>Area</th>
<th>Total Housing Stock</th>
<th>No of UA/UB Claimants</th>
<th>% of Claimants to Housing Stock</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fissaroe</td>
<td>342</td>
<td>166</td>
<td>48%</td>
</tr>
<tr>
<td>Oldcourt</td>
<td>221</td>
<td>114</td>
<td>53%</td>
</tr>
<tr>
<td>Wolfe Tone</td>
<td>72</td>
<td>100</td>
<td>141%</td>
</tr>
</tbody>
</table>

(O’Sullivan & Roche: 1998:11)

The authors conclude that the level of unemployment as described by UA/UB claimants per household is in fact greater in the areas of Oldcourt and Wolfe Tone than in Little Bray. Given the accuracy of Little Bray and Fassaroe’s baseline, these UA/UB figures clearly indicate the very significant disadvantage experienced in these areas of Bray.

2.4 Housing

Research carried out in 1994 by the Bray Enterprise Support Team pointed to a picture of two Brays, one, in private estates with relatively low levels of unemployment and working mostly (60%) in Dublin, the other, in Local Authority estates with high levels of unemployment and working largely (65%) in Bray. This image is added to by the fact that 77% of Local Authority residents originally come from Bray, compared with 42% of those in private houses.

Bray Urban District Council’s current housing stock is comprised of 980 dwellings under differential rent: 184 under tenant purchase and 56 under fixed rent. The Council operates 2 estate management initiatives in Fassaroe and Oldcourt. There are plans for two additional schemes in Deerpark/Heatherwood and Ard na Greine Estates.
2.2.5 **Household Structure**

An above average proportion of lone parent households are a characteristic feature of the most deprived areas. In 1996, the figure for the country as a whole was 10%; in Bray it was 12%. Lone parent households may be further differentiated into households with all children under the age of 15. In Bray, 6% of households consisted of a lone parent with at least one child under 15: this was slightly higher than the regional and national figures (both 5%). In Rathmichael 16% of households were thus classified; over three times the regional and national averages.

**Table 3: Lone Parent Households in Bray (1996)**

<table>
<thead>
<tr>
<th></th>
<th>Lone Parent Households</th>
<th>% of Total Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray No. 1</td>
<td>94</td>
<td>15.3%</td>
</tr>
<tr>
<td>Bray No. 2</td>
<td>194</td>
<td>10.2%</td>
</tr>
<tr>
<td>Bray No. 3</td>
<td>211</td>
<td>9.7%</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>131</td>
<td>19.5%</td>
</tr>
<tr>
<td>Bray Totals</td>
<td>630</td>
<td>11.7%</td>
</tr>
<tr>
<td>National Average</td>
<td></td>
<td>10.1%</td>
</tr>
</tbody>
</table>

According to the Department of Social, Community and Family Affairs, there were 65,000 lone parents in the State in 1998. The 1999 Combat Poverty Report, “Women and Poverty in Ireland” estimates that 70% of lone parents are poor. The report looks at data from 1987 and 1994. In both years, male one-parent households were very rare. In 1987, the risk of poverty for both male and female lone parents was similar. However, by 1994 the risk of poverty for female lone parents had almost doubled. Female lone parent households increased from 7 to 10 percent of all households during the period.

The 1996 Labour Force Survey data shows that over one quarter of lone parents with a child under 5 had a job, with another 12% seeking work. About 40% of lone parents with children aged 5-15 were working and another 10% were seeking work. It is reasonable to assume that there is additional unemployment among lone parents.
who are eager to work but are not currently on active job search because of childcare problems.

The Dublin Employment Pact Policy Paper No. 2 reveals that for every five long-term unemployed people in contact with the Local Employment Service, there are two lone parents, suggesting that a significant number of lone parents want to return to work. The Bray Partnership Local Employment Service Network reports that approximately 30% of the people registered with the service are lone parents.

The table below details the numbers in receipt of Lone Parents benefits in Bray as of July 2000.

Table 4: Lone Parents Payments, Bray July 2000

<table>
<thead>
<tr>
<th>Payment</th>
<th>Category</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lone Parents</td>
<td>Unmarried Mothers</td>
<td>238</td>
</tr>
<tr>
<td>Lone Parents</td>
<td>Widows Payment</td>
<td>4</td>
</tr>
<tr>
<td>Lone Parents</td>
<td>Separated Spouses</td>
<td>77</td>
</tr>
<tr>
<td>Lone Parents</td>
<td>Widowed on CE Scheme</td>
<td>6</td>
</tr>
<tr>
<td>One Parent</td>
<td>Family Payment</td>
<td>502</td>
</tr>
<tr>
<td>Deserted Wives</td>
<td>Benefit</td>
<td>202</td>
</tr>
<tr>
<td>Deserted Wives</td>
<td>Allowance</td>
<td>19</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>1,048</strong></td>
</tr>
</tbody>
</table>

As noted earlier, there were 630 people in receipt of lone parent payments in 1996. The current total of 1,048 represents a 66% increase. This has serious implications for the provision of a range of services and supports, in particular childcare.
2.3 Unemployment

In 1996, the male unemployment rate in Bray (20%) was substantially higher than the region (13%) and the country as whole (16%). In Bray No. 1, 33% of the male population were unemployed and in Rathmichael the figure was 45%.

Table 5: Unemployment Rates, 1996

<table>
<thead>
<tr>
<th>DED</th>
<th>OVERALL</th>
<th>MALE</th>
<th>FEMALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray No. 1</td>
<td>29%</td>
<td>33%</td>
<td>22%</td>
</tr>
<tr>
<td>Bray No. 2</td>
<td>12%</td>
<td>12%</td>
<td>11%</td>
</tr>
<tr>
<td>Bray No. 3</td>
<td>13%</td>
<td>15%</td>
<td>10%</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>38%</td>
<td>45%</td>
<td>25%</td>
</tr>
<tr>
<td>Bray</td>
<td>17%</td>
<td>20%</td>
<td>13%</td>
</tr>
<tr>
<td>National Average</td>
<td>15%</td>
<td>16%</td>
<td>12%</td>
</tr>
</tbody>
</table>

Status 2000

In 1996 the national average unemployment rate was 15%. Data from early 2000 shows a national average rate of 4.5% approximately. This represents a 70% fall in the national rate over the period 1996 to 2000.

Table 6: Live Register Figures, Bray

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total UB/UA male 25 or over</td>
<td>1,992</td>
<td>1,157</td>
<td>847</td>
</tr>
<tr>
<td>Total UB/UA male less than 25</td>
<td>535</td>
<td>256</td>
<td>153</td>
</tr>
<tr>
<td>Total UB/UA female 25 or over</td>
<td>1,251</td>
<td>790</td>
<td>628</td>
</tr>
<tr>
<td>Total UB/UA female less than 25</td>
<td>316</td>
<td>139</td>
<td>224</td>
</tr>
<tr>
<td>Male &amp; Females on Credits</td>
<td>0</td>
<td>234</td>
<td>224</td>
</tr>
<tr>
<td>Live Register Totals</td>
<td>4,094</td>
<td>2,576</td>
<td>1,943</td>
</tr>
</tbody>
</table>

The figures in Table 6 above indicate a drop in the numbers on the live register of just over 52% in Bray during the same period. The percentage drop in Bray, then, is less than that nationally.
The most significant decreases occur in the under 2.5 age group; number of young men and women signing on are now both 29% of their respective 1996 figures. The profile of the unemployed therefore, is of an older population for whom the difficulties of returning to work or further training are compounded.

2.3.1 Rate of Drop in Unemployment

It is worth examining the live register figures since 1996. While there has been an overall drop of 52% since 1996, the distribution over the years does not indicate a consistent trend. The biggest drop in figures occurred between 1996 and 1997. The drop continued between 1997 and 1998 but at just half that rate. Between 1998 and 1999 there is a disturbing increase of 38%. The most recent figures show a drop in the numbers for the past year of 26%.

The situation is far from stable. Notwithstanding the live register figures are only one indicator of the numbers unemployed, the fluctuations in the numbers signing on are a reminder of the instability of the labour market. Such instability has greater consequences for people from disadvantaged communities seeking employment.

2.3.2 The Hidden Unemployed

While the labour force in Bray is characterised by an overall reduction in the unemployment rate, it conceals a hidden picture of a much higher figure of unemployment in the area. Some of the groups that are not included are:-

- Early school leavers
- Those in receipt of one parent family payments
- People with disabilities
- Some travellers
- Non-statistical women and men (i.e. those whose partners are working)
- Qualified adults (adult dependents)
- Participants on schemes such as Community Employment (CE), Full Time Job Initiative (JI) and Vocational Training Opportunities Scheme (VTOS)

2.4 Education
2.4.1 Educational Disadvantage

Educational Disadvantage is defined by Combat Poverty as “the complex interaction of factors at home, in school and in the community (including economic, social, cultural and educational factors), which result in a young person deriving less benefit from formal education than their peers. As a result they leave the formal education system with few or no qualifications, putting them at a disadvantage in the labour market, curtailing personal and social development and leading to poverty and social exclusion” (Demonstration Programme’ on Educational Disadvantage, www.cpa.ie). Educational disadvantage is found to be closely related to the educational experience of parents as well as to low income and employment instability.

1996 statistics for Bray show that the average age of those who left school at or before the age of 15 (31%) was less than the national average (35%). However, this rises to 54% for those living in Rathmichael.

Bray has 11 primary schools and 7 secondary schools. Enrolment in schools in Bray for the 1999/2000 was 7,400.

Outside of mainstream education, there are a number of pre-school and homework clubs in operation throughout the community in Bray. These are believed to be invaluable to the children who can avail of them. However, it appears there are now more children waiting to attend homework clubs than there are places available. As well as being a place where homework is done, these clubs are places of fun where children meet and express themselves outside of school. These clubs quite often offer the support and encouragement in learning that may not be forthcoming from other areas.
2.4.2 Early School Leaving

Accurate figures as to the current overall breakdown of early school leavers and what areas they come from within Bray are unavailable. In terms of the 1996 census as can be seen in Table 7, 44% and 46% of the population respectively in Bray No. 1 and Rathmichael areas, left school with just primary education, which far exceeded the national average of 29.5% at that time.

<table>
<thead>
<tr>
<th>DED</th>
<th>No formal or primary only</th>
<th>Lower secondary</th>
<th>Upper secondary</th>
<th>3rd level education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray No. 1</td>
<td>44.2</td>
<td>19.9</td>
<td>25.5</td>
<td>10.4</td>
</tr>
<tr>
<td>Bray No. 2</td>
<td>16.3</td>
<td>15.8</td>
<td>36.2</td>
<td>31.7</td>
</tr>
<tr>
<td>Bray No. 3</td>
<td>23.3</td>
<td>18.9</td>
<td>33.3</td>
<td>24.5</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>46.0</td>
<td>28.5</td>
<td>20.2</td>
<td>05.3</td>
</tr>
<tr>
<td>National</td>
<td>29.5</td>
<td>20.9</td>
<td>29.9</td>
<td>19.7</td>
</tr>
</tbody>
</table>

At 44% and 46% respectively, the percentage of the population in Bray No. 1 and Rathmichael who left school with no formal or primary only education is substantially higher than the national average. The transfer from primary to secondary school is an extremely difficult period for young people and particularly for youngsters in disadvantaged areas.

At the other end of the educational life span, only 10.4% of the population in Bray and just 5.3% in Rathmichael went on to 3rd level education. This compares with a national rate of 19.7%. The numbers staying on at upper secondary level are also lower than the national average. Anecdotal evidence suggests that the increased availability of jobs has given rise to greater numbers of young people, particularly those at risk, leaving secondary school early. This problem is further compounded, by the fact that many of these jobs have no guarantee of permanency or career prospects.
2.4.3 Training and Adult Education

County Wicklow VEC is responsible for a number of adult training and education programmes. This includes 97 on adult literacy programmes.

In 2000 there were 197 participants in the Vocational Training Opportunities Schemes (VTOS) programme.

Bray Community Enterprise (BCE), the partnership resourced enterprise support company provides a range of training courses and programmes for the key target groups in employment skills and pre-enterprise development. During the last local development programme some 100 people from the area availed of this training provision.

FAS as the national training authority, provides and supports a range of training services in the region, including in centre and external training courses.

2.5 Socio Economic Profile

Bray has become the operations base for a number of global companies, which have located in the area in recent years. The IDA client base details 12 companies with a total of 2,282 employees. The largest employer among these 12 companies is Dell and, as is the case with the computer industry globally, a majority of the jobs have been for graduates and diploma holders.

The Bray Partnership’s First Area Action Plan pointed to the tendency of the knowledge-based industries in Bray employing people from outside the area. Those who remain most distanced from the labour market in Bray are the less skilled and most poorly educated; in effect they do not match with the available jobs.

In addition to the IDA client base, there are approximately 350 employers in the Bray area, which includes manufacturing services, retail, leisure and professional establishments, all of which provide a strong base for employment opportunities.
In the preparation of the Bray Partnership’s current Action Plan, some employers and their representative organisations highlighted amongst other issues the following concerns:-

1. Adequate availability of local housing
2. Security
3. Environmental issues
4. Planning and development
5. Childcare
6. Crime and vandalism
7. Availability of a trained workforce

These were viewed as important factors in relation to maintaining the local economy and facilitating its growth and development.
Section 3

YOUNG PEOPLE’S FACILITIES AND SERVICES FUND

The Young People’s Facilities & Services Fund (YPFSF) was established in January 1998 and is a central element of the Government’s Young People at Risk Programme. An allocation of exchequer funds was earmarked for projects that would contribute to prevention of drugs misuse among the most disadvantaged youth in various communities. Initially, the thirteen Drugs Task Force Areas were prioritised; later the cities of Galway and Limerick, Waterford and Cork City South. Lastly, Bray was invited to put together a strategic plan for the distribution and utilisation of up to £300,000.

The objectives of the Young People’s Facilities & Services Fund are;

- The enhancement and integration of existing facilities and services for young people in the target areas.
- The development of new, viable facilities and amenities, including sport and recreational facilities in these areas where gaps have been identified.
- The development of strategies to attract “at risk” young people into these facilities.
- The development of additional youth services for young people at “at risk”.
- Support for voluntary and community groups and organisations working with “at risk” young people through the provision of small once-off grants to enable them to contribute to the objectives of the agreed plan for the area.

3.1 Young People At Risk

This fund was expressly established to reach those young people who experience severe disadvantage and social exclusion. Throughout the consultation process in the preparation of Bray’s submission to the YPFSF, it became clear that the sum of £300,000 would only have a minimal effect on the level of response needed to those youth who were deemed at risk of substance misuse. This sum was increased to £450,000. It was unfortunate that the initial allocation of the above sum to the Bray Area came pre-task Force designation with the allocation to other Task Force areas far outweighing the allocation to Bray as portrayed in the table overleaf.
<table>
<thead>
<tr>
<th>Task Force Area</th>
<th>YPFSF Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballyfemiot</td>
<td>1,595,000</td>
</tr>
<tr>
<td>Ballymun</td>
<td>1,825,000</td>
</tr>
<tr>
<td>Blanchardstown</td>
<td>1,925,000</td>
</tr>
<tr>
<td>Canal Communities</td>
<td>1,721,000</td>
</tr>
<tr>
<td>Clondalkin</td>
<td>1,900,000</td>
</tr>
<tr>
<td>Dublin 12</td>
<td>1,730,000</td>
</tr>
<tr>
<td>Dublin NE</td>
<td>1,735,000</td>
</tr>
<tr>
<td>Dublin North Inner City</td>
<td>1,760,000</td>
</tr>
<tr>
<td>Dublin South Inner City</td>
<td>1,780,000</td>
</tr>
<tr>
<td>Dun Laoghaire-Rathdown</td>
<td>1,540,000</td>
</tr>
<tr>
<td>Finglas-Cabra</td>
<td>1,875,000</td>
</tr>
<tr>
<td>North Cork City</td>
<td>1,700,000</td>
</tr>
<tr>
<td>Tallaght</td>
<td>1,930,000</td>
</tr>
<tr>
<td>Bray</td>
<td>450,000</td>
</tr>
</tbody>
</table>

3.2 **Overview of Services for Young People in Bray**

3.2.1 **Co Wicklow Vocational Educational Committee**

Co Wicklow VEC has worked over the years to further the development of some of the more important functions outlined in the White Paper on Education. One of the major priorities of the Committee is the development of links between formal education at primary, second and third levels, youth work and adult and community education, having particular regard to the needs of disadvantaged young people. The VEC is equally committed to effective networking among community, voluntary and statutory interests involved in youth and community development. Co Wicklow VEC has links with Bray Youth Services, through which it supports a number of projects including Ballywaltrim and Little Bray Youth Projects. In addition, the VEC distributes a number of support grants to a range of youth and sports clubs.
3.2.2 Bray Partnership

Bray Partnership is resourced through EU and central Government funds to develop a Local Area Action Plan aimed at addressing issues of exclusion, disadvantage and poverty in the Bray area. In relation to preventative education the Partnership seeks to help develop, support and implement new actions aimed at ensuring “at risk” young people remain in the formal education system and/or have opportunities to avail of complementary education based programmes/activities. A number of innovative preventative education have been assisted, such as the following:-

- The Homework Club Network seeks to provide an intervention programme at primary school level for 6-12 year olds which will encourage parental involvement in education and harness the skills of individuals in the community. This is achieved by utilising and co-ordinating the links between community groups/services and mainstream education providers.

- The At Risk Youth Programme aims to involve the target group in constructive activities, while at the same time improving their access to education and training. The programme also aims to enable the community to take responsibility for youth in the area. The ultimate goal is to retain the target group in the education system.

- The Drugs Awareness Forum was set up primarily to organise a range of preventative type services in respect of drug misuse and problems of addiction. These include training for teachers and parents, provision and coordination of information and lobbying for an addiction counsellor and the setting up of a help line. The Forum’s activities involve community groups, the Youth Service and statutory agencies.

3.2.3 The East Coast Area Health Board

The East Coast Area Health Board has one Education Officer whose area of responsibility lies in Bray. While there is no direct provision to the target group, the Education Officer delivers talks and courses to a range of adults who have direct influence on the target group. In particular, the Board delivers addiction studies courses, which enables graduates to participate in future education and prevention initiatives.
3.2.4 **Bray Youth Service**

Bray Youth Service (BYS) is a joint project of the Catholic Youth Council (CYC) and Co. Wicklow VEC. The purpose of the service is to assist and support the development of a broad-based service to all young people and to all youth organisations, clubs and groups in the area. BYS offer the following services:

- Support, information and guidance to adults who work with and for young people
- Training courses for adult learners
- Support and coordination of Summer projects
- Promotion of local and regional competitions and events
- Activities for young people at every level in the community
- Outward bound activities
- Training Courses

In the area of Youth Development the Service has 2 Development officers working in Ballywaltrim and Little Bray. The Youth Information Centre provides information free of charge to young people, youth leaders, teachers, parents and adults who work with young people.

3.2.5 **Youthreach**

Youthreach programmes are established under the Government’s Social Guarantee to provide full-time basic training and educational provision for early school leavers. The overall objective is to assist young people to develop the skills, knowledge and attitudes to help them make the transition from school to the world of work. Youthreach has been in operation in Bray for the past 11 years and is under the aegis of Co Wicklow VEC.

3.2.6 **Community Resource Centres**

There are two centres in Bray sponsored by the Department of Social Community and Family Affairs Community Development Programme.

**Little Bray Family Resource Centre**

This resource centre is based in Fassaroe Estate, and has been in existence for 12 years serving the needs of one of the two most disadvantaged areas in Bray. One third of Little Bray’s population are under the age of 14 and has a particularly large
concentration of lone parent households at 21.1%. More than half the adult population, of Little Bray left school aged fifteen or under and less than one in twenty remained beyond their twentieth birthday. In 1997 the Centre undertook a needs analysis of young people in their area. Since then the Youth Work provision includes a Life Skills Programme for young people between the ages of 13 and 18, a Youth Drama Group and a range of small issue based clubs for young people. In addition the Centre runs a summer programme for local youth.

**St Fergal’s Resource Centre**

Located in the local authority housing estate of Old Court, St Fergal’s Resource Centre has been in operation for over 10 years serving the needs of the families in Ballywaltrim. The current provision for young people include a Life Skills Programme, an Afternoon Homework Club, a Youth Group and an annual summer project.

3.2.7 **Bray Travellers Development Network**

The Traveller population of Bray is in the region of 500, with upwards of 200 below the age of 24. The Network was established in 1993, and receives funding from the Department of Social Community and Family Affairs, the Bray Partnership and FAS. The provision of both indoor and 5-aside and outdoor Soccer has been in place by the Network for more than four years. It is exclusively for Traveller boys. Matches are played with other youth Traveller teams. Among the other activities offered by the Network are 2 weeklong summer projects and Christmas parties, one for 2-6 year olds, and one for 7-10 year olds. The Network has a part-time Youth Development Worker

3.2.8 **Garda Siochana**

The Gardai Juvenile Liaison Officer has close contact with the young offenders and their families. Among the objectives of this intervention is to attempt to minimise these young people’s involvement with crime, of which drugs misuse is a factor

3.2.9 **Local Schools**

Enrolment figures for local schools have been dealt with previously.
Section 4

RAPID

(Revitalising Areas by Planning Investment & Development)

In acknowledging the level of disadvantage associated with the areas outlined in the Area Profile, 5 areas in Bray are targeted under RAPID (Revitalising Areas by Planning, Investment and Development), namely Fassaroe, Oldcourt, Ballywaltrim Heights, Kilbride Grove, Deerpark/Heatherwood/White Oaks/Ard na Greine & Cois Sleibhe, the only RAPID area in Co. Wicklow. These 5 estates fall within 25 of the most disadvantaged estates in the country based on information from the 1996 census, therefore placing them in the arena of being among the estates with the highest level of concentrated disadvantage in Ireland. RAPID is based on the model of a bottom up approach where the community identify their needs, with a top down response, whereby statutory organisations meet those needs. In this manner it is a front loading of money and resources to those areas that most need them.

Throughout the community consultation process carried out by RAPID during the months of September and October, each of these estates highlighted issues that were relevant to their lives. The key issues emerging in all of these estates were lack of facilities, lack of activities for children, vandalism, anti-social behaviour, lack of childcare facilities, lack of support for youth in the area, early school leaving, unemployment, negative environmental factors of the estates and drugs misuse, both illicit drugs misuse and underage drinking. In relation to drugs misuse the feedback from one of the community meetings highlighted the following concerns of residents in what they perceive to be the needs of their community:-

- More courses to educate people (parents) about drugs, awareness programmes etc.
- More help for those addicted.
- Same people on drugs still after years - need more programmes.
- Need to deliver.
- Different generation on drugs now. Kids are being asked “Where can I get drugs” (at night a lot of traffic through the estate).
• Not acceptable police presence.
• Methadone clinic - need holistic approach and need a lot of help. Kids are starting at 9 years of age.
• Support and rehabilitation needed
• The schools won’t let people/groups in to show what drugs do. Should be taught to children when they are young.

(Transcript:RAPID:20 September 2001)
Section 5

Understanding the Drug Problem in Bray

The research report which has informed the work of the Bray Local Drugs Task Force in terms of the development of a strategy, was conducted in 1999 (Brady et al. 1999). This report came on foot of a prevalence study of treated illegal opiate users conducted in 1998 (O’Sullivan & Roche 1998). In this report, when writing on the social context of drug use in Bray, the authors contend that “there is a somewhat different setting for Bray’s problem of heroin misuse when compared, for example, with the south and inner cities of Dublin where entrenched and extensive social exclusion has been a defining theme” (Brady et al. 1999:1-0). The findings from this piece of research was that drug misusers in Bray were not a homogenous group but rather heterogeneous, that the clientele cuts across socio-economic divides (particularly for those attending the clinic servicing the centre of the town, which includes people who are long-term unemployed, students and those in regular employment), and that the drug problem in Bray was multi-layered with some areas in Bray being known to have a range of social problems, with other areas having more hidden social problems due to the fact that they are mixed with privately owned estates.

In the first report of the Ministerial Task Force on Measures to Reduce the Demand for Drugs (1996) there was an explicit recognition of the causal connection between drugs misuse and social issues as “addicts are concentrated in communities that are also characterised by large-scale social and economic deprivation and marginalisation. The physical/environmental conditions in these neighbourhoods are poor as are the social and recreational infrastructures” (Preface: 1996). The First Report of the Task Force concluded that heroin was the most pressing of the country’s drug problems and identified geographical areas, suffering high levels of social and economic disadvantage, as having the most acute drug problem and thus requiring priority action. Bray was the 14th such area in Ireland identified being designated a Drug Task Force Area in early 2000.

As stated in the Area Profile, the 1996 GAMMA statistics for the Bray Partnership indicated higher than average indicators of social and economic disadvantage in
selected areas of Bray, in particular the Little Bray area. However, as also noted, it is difficult to disaggregate meaningful data on disadvantage for other local authority estates because of the existence of large privately owned estates in the same District Electoral Divisions. But, as noted in particular in relation to the estates included in the RAPID programme, such disadvantage and hence social exclusion, are a defining theme in those estates. These estates are the same estates that display a high prevalence of opiate misuse with the Little Bray Community Clinic servicing the area of Little Bray, which comprises the Fassaroe Estate, and the Ballywaltrim Clinic servicing the area of Oldcourt, Ballywaltrim Heights, Kilbride Grove, Deerpark/Heatherwood/White Oaks/Ard na Greine & Cois Sleibhe. The Strand Road Community Clinic services the centre of the town, an area that caters for clients with a wide range of social and economic backgrounds.

Therefore, it would appear that since the research carried out in 1999 the gap has narrowed between the social context of drugs misuse in Bray and the social context of drugs misuse in Inner City Dublin. The social context of drug use in Bray is entrenched in social exclusion and reinforces the causal connection between drug misuse and deprivation. Two further research reports have been carried out in Bray published in 2001, which enforces the environmental factors and issues of social exclusion which are extremely visible in Inner City Dublin but more hidden in Bray.

The first report is a report on the Fassaroe Estate, which is the biggest Local Authority housing estate in Co. Wicklow. The second report is a report on Social Exclusion in Bray. Both of these reports are pertinent in highlighting both the economic deprivation and marginalisation that is inherent in Bray, and which is in turn linked to drugs misuse.

Note: Both of these reports highlight the negative aspects of the Fassaroe Estate and Bray town, which are a reality, but at the same time sensitive issues to those concerned. Therefore, it must be noted that there are also positive features of all Local Authority Estates and of Bray and much work is being done by communities, groups and organisations in order to improve difficult social issues. The purpose of presenting the above 2 reports is to highlight the need to respond to social issues and to understand the link between social circumstances and drugs misuse.
5.1 **Social Housing – The Fassaroe Estate**

This section deals with a piece of research carried out in July 2001, commissioned by Bray Urban district Council, into the living conditions of the Fassaroe Estate. The purpose of presenting this material is that it can be safely assumed, that those estates targeted by RAPID and the Bray Local Drugs Task Force, will display some similar characteristics as those of Fassaroe. Whereas the needs will not be identical in the other estates mentioned in the Area Profile, there will be symmetry of needs and problems.

In introducing this report it is worth having an overview of the Fassaroe Estate.

**Overview**

The Fassaroe Estate was built during the early 1970s and comprises just over 400 housing units, almost all of which (95%) consist of two-storey terraced houses. Most dwellings (84%) are rented from the Local Authority, as the estate has a low level of private ownership. The estate has a single entrance from the Upper Dargle Road and is bounded to the West by the motorway. The estate is made up of 13 individual streets, many of which are cul-de-sacs.

Fassaroe has experienced a serious decline over the past decade, which affects both buildings and infrastructure, and its surroundings are marred by a large amount of illegally-dumped waste. The community also suffers from a concentration of social and economic problems including high levels of crime and drug abuse. As a result, of these difficulties, few prospective tenants are waiting to be housed on the estate; on the contrary, a significant proportion of its tenants would prefer to live elsewhere, as they have become frustrated in their hope of improvements in living conditions within the estate. (Haase, T: 2001: 11)

This in-depth report covered a multitude of aspects of the estate, for the purpose of this report, 3 aspects are covered a) **Local Authority Housing in Ireland** b) **The People of Fassaroe** and b) **The Physical and Social Environment**.
Extract A

Local Authority Housing in Ireland

Local authority housing in Ireland is strongly associated with poverty and disadvantage, with about half of its tenants falling below the 50 per cent relative income poverty line, compared to 22 percent of tenant purchasers, 15 per cent of private renters and 18 per cent of outright owner occupiers (based on 1994 figures).

Data on economic activity in local authority households are consistent with these findings. Local authority households had 24 per cent of households with one or two persons at work, compared to 48 per cent amongst tenant purchasers, 22 per cent amongst privately renting households and 58 per cent in the owner occupier sector (based on 1996 Labour Force Survey).

The extent of educational achievement also shows up extreme disparities between households that rent or purchase from local authorities compared to private renting and owner occupation. Over 60 per cent of local authority renting or tenant purchasing household heads attained primary level education only, compared to 12 per cent of private renters, and 31 per cent of owner occupiers (based on 1996 Labour Force Survey microdata).

Not unsimilar to household structures in general, the most frequently occurring household type in the local authority rental tenure is comprised of a couple with children under 15 years (over 30%). The next most common household type is the lone parent household, which makes up 24 per cent of local authority renting households, compared to 20 per cent of owner occupier households and 14 per cent of tenant purchase household.

Extract B

The People of Fassaroe

Most of the families living in Fassaroe have difficulty meeting their daily needs. By virtue of being a Local Authority housing estate, accommodation is provided on the basis of need, and many residents would find it impossible to obtain secure accommodation in the private housing market.

It is important to understand the different ways in which the residents of estates like Fassaroe tackle the issues of educational access, finding a job and face up to poverty and social exclusion. A recent report, *Heading in the Wrong Direction?*\(^1\) illuminates these issues within the Bray area, and provides considerable detail on the relationship between poverty, social exclusion and individual circumstances.

The distinctive contribution of the present report is that it quantifies the clustering of economic and social hardship within a single housing estate, going far beyond the data provided by the Census of Population. This additional information enables us to construct a physical, social and economic profile of the estate and to identify the basic needs of its residents.

---

Table 8: Type of Household

<table>
<thead>
<tr>
<th>Survey</th>
<th>%</th>
<th>Estate (est.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single individual living alone</td>
<td>4</td>
<td>3.4</td>
</tr>
<tr>
<td>Lone parent with dependent child(ren) at home</td>
<td>40</td>
<td>34.5</td>
</tr>
<tr>
<td>Lone parent where all child(ren) have left home</td>
<td>4</td>
<td>3.4</td>
</tr>
<tr>
<td>Two parents with dependent child(ren) at home</td>
<td>62</td>
<td>53.4</td>
</tr>
<tr>
<td>Two parents where all child(ren) have left home</td>
<td>6</td>
<td>5.2</td>
</tr>
<tr>
<td>Total</td>
<td>116</td>
<td>100.0</td>
</tr>
</tbody>
</table>

As the Fassaroe Estate comprises predominantly two-storey houses, which are allocated primarily to families, it is not surprising that very few households (3%) consist of a single individual living on their own. Although the majority of families with children contain two parents, Table 8 reveals that more than one third of households are headed by a single parent, a very large proportion, which implies that there are roughly 140 single parents on the Estate. Approximately six per cent of households span three generations (Table 5.2).

Table 9: Other Habitual Members of the Household

<table>
<thead>
<tr>
<th>Survey</th>
<th>%</th>
<th>Estate (est.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>102</td>
<td>87.9</td>
</tr>
<tr>
<td>mother and/or father</td>
<td>3</td>
<td>2.6</td>
</tr>
<tr>
<td>Other relative</td>
<td>6</td>
<td>5.2</td>
</tr>
<tr>
<td>Other non-relative</td>
<td>1</td>
<td>0.9</td>
</tr>
<tr>
<td>Grandchild(ren)</td>
<td>4</td>
<td>3.4</td>
</tr>
<tr>
<td>Total</td>
<td>116</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 10: Age Profile

<table>
<thead>
<tr>
<th>Survey</th>
<th>%</th>
<th>Estate (est.)</th>
<th>Bray %</th>
<th>Ireland %</th>
</tr>
</thead>
<tbody>
<tr>
<td>under 5</td>
<td>59</td>
<td>11.9</td>
<td>207</td>
<td></td>
</tr>
<tr>
<td>5 to 15</td>
<td>142</td>
<td>28.6</td>
<td>497</td>
<td></td>
</tr>
<tr>
<td>16 to 24</td>
<td>77</td>
<td>15.5</td>
<td>270</td>
<td></td>
</tr>
<tr>
<td>25 to 54</td>
<td>187</td>
<td>37.7</td>
<td>655</td>
<td></td>
</tr>
<tr>
<td>55 to 64</td>
<td>20</td>
<td>4.0</td>
<td>70</td>
<td></td>
</tr>
<tr>
<td>65 and over</td>
<td>11</td>
<td>2.2</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>496</td>
<td>100.0</td>
<td>1736</td>
<td>406</td>
</tr>
</tbody>
</table>

Turning now to the demographic composition of the Fassaroe Estate, we find that more than two-fifths of the local population are under the age of 16 (this represents approximately 700 children/young people), and just over one-tenth are under 5 years of age (approximately 200 young children) thus potentially requiring a place in a creche. Moreover, the estate must cater for somewhere in the region of 500 young people (aged 5 to 15), an important consideration to bear in mind when planning local amenities.

In contrast, there are very few elderly people living on the estate (approximately 40 individuals aged 65 years and over, equivalent to just over 2 per cent of the population), which has a ‘young’ age profile. The specific needs of elderly people

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2 Figures in the last column provide an estimate of the number of households within the whole estate which fall into a given category.
needs to be considered carefully, as this group has clearly difficulty making its voice heard within the estate. Indeed, many of the elderly persons interviewed clearly portrait a situation of isolation and potential intimidation.

Table 11: Educational Attainment

<table>
<thead>
<tr>
<th>Age Group</th>
<th>No Formal or Primary Education only</th>
<th>Lower Secondary Education</th>
<th>Upper Secondary Education</th>
<th>Third Level Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 to 24</td>
<td>23.3</td>
<td>39.5</td>
<td>27.9</td>
<td>9.3</td>
</tr>
<tr>
<td>25 to 54</td>
<td>44.8</td>
<td>33.1</td>
<td>18.6</td>
<td>3.4</td>
</tr>
<tr>
<td>55 to 64</td>
<td>71.4</td>
<td>14.3</td>
<td>7.1</td>
<td>7.1</td>
</tr>
<tr>
<td>65 and over</td>
<td>100.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fassaroe</td>
<td>44.3</td>
<td>31.9</td>
<td>19.0</td>
<td>4.8</td>
</tr>
<tr>
<td>Bray 1</td>
<td>44.2</td>
<td>19.9</td>
<td>25.5</td>
<td>10.4</td>
</tr>
<tr>
<td>Bray 2</td>
<td>16.3</td>
<td>15.8</td>
<td>36.2</td>
<td>31.7</td>
</tr>
<tr>
<td>Bray 3</td>
<td>23.3</td>
<td>18.9</td>
<td>33.2</td>
<td>24.5</td>
</tr>
<tr>
<td>Rathmichael</td>
<td>46.0</td>
<td>28.5</td>
<td>20.2</td>
<td>5.3</td>
</tr>
<tr>
<td><strong>Bray Partnership Area</strong></td>
<td><strong>26.2</strong></td>
<td><strong>19.3</strong></td>
<td><strong>31.6</strong></td>
<td><strong>22.8</strong></td>
</tr>
<tr>
<td><strong>Ireland</strong></td>
<td><strong>29.5</strong></td>
<td><strong>20.9</strong></td>
<td><strong>29.9</strong></td>
<td><strong>19.7</strong></td>
</tr>
</tbody>
</table>

Note: Comparison figures for the four District Electoral Divisions (DEDs), which make up the Bray Partnership area, and the national averages are based on the 1996 Census of Population. The Fassaroe Estate is located within the Rathmichael DED and accounts for about three-fifths of its population.

In relation to educational attainments (Table 11), the Fassaroe Estate falls well short of the averages for Bray and for Ireland as a whole. The proportion of adults whose full-time education has ceased and who have no formal education or-who attended Primary School only is 50 per cent higher than in Ireland and 70 per cent above the average for the Bray Partnership area. Conversely, the proportion of adults who progressed to Third Level education is only one-quarter of the national average and one-fifth of the average for the Bray Partnership area.

If we examine educational attainments within each age group, there is a clear indication that these decrease with age in the Fassaroe Estate. Nevertheless, the incidence of low educational attainments remains alarmingly high amongst young people, as almost one-quarter of young adults (between the ages of 15 and 24) have no formal education or a Primary School education only.
Table 12: Employment Status

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age Group</th>
<th>Unemployed %</th>
<th>Seeking First Job %</th>
<th>Employed Part-time %</th>
<th>Employed Full-time %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>15 to 24</td>
<td>28.6</td>
<td>7.1</td>
<td>14.3</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>25 to 54</td>
<td>28.3</td>
<td>1.7</td>
<td>8.3</td>
<td>61.7</td>
</tr>
<tr>
<td></td>
<td>55 to 64</td>
<td>50.0</td>
<td></td>
<td>12.5</td>
<td>37.5</td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td>30.2</td>
<td>3.1</td>
<td>10.4</td>
<td>56.3</td>
</tr>
<tr>
<td>Female</td>
<td>15 to 24</td>
<td>33.3</td>
<td>25.0</td>
<td>4.2</td>
<td>37.5</td>
</tr>
<tr>
<td></td>
<td>25 to 54</td>
<td>13.2</td>
<td>1.9</td>
<td>49.1</td>
<td>35.8</td>
</tr>
<tr>
<td></td>
<td>55 to 64</td>
<td></td>
<td></td>
<td>50.0</td>
<td>50.0</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td>19.0</td>
<td>8.9</td>
<td>35.4</td>
<td>36.7</td>
</tr>
<tr>
<td>Total</td>
<td>15 to 24</td>
<td>30.8</td>
<td>15.4</td>
<td>9.6</td>
<td>44.2</td>
</tr>
<tr>
<td></td>
<td>25 to 54</td>
<td>21.2</td>
<td>1.8</td>
<td>27.4</td>
<td>49.6</td>
</tr>
<tr>
<td></td>
<td>55 to 64</td>
<td>40.0</td>
<td></td>
<td>20.0</td>
<td>40.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>25.1</td>
<td>5.7</td>
<td>21.7</td>
<td>47.4</td>
</tr>
</tbody>
</table>

Despite the recent economic boom, the unemployment rate on the Fassaroe Estate has remained extremely high, at 30.8 per cent, more than six times the national average (4.7%). As a consequence, one-third of adult males living on the estate are out of work, as are almost one-fifth of adult women. The slightly lower rate of unemployment amongst women may be due to their greater access to part-time jobs, as half of the women who are in employment are working part-time. Alarming as these figures may be, they nevertheless understate the actual level of economic dependency on the estate, as many residents, lone parents in particular, may be unavailable for work due to their domestic responsibilities.

As Table 12 shows, less than half of all adults (43%) residing on the estate are in paid employment, and one-third of those who are gainfully employed are working part-time. Overall, almost three-fifths of the local population are economically dependent, being in full-time education, on a CE scheme, working part-time in the home or in retirement. Of all males over 25 years of age, only half are in paid employment, which suggests that the aspirations of young males on the estate are likely to be curtailed by the relative absence of positive role models.
Table 13: Principal Economic Status

<table>
<thead>
<tr>
<th>Age Group</th>
<th>In Full-time Education %</th>
<th>Unemployed %</th>
<th>Seeking First Job %</th>
<th>CE %</th>
<th>Employed Part-time %</th>
<th>Employed Full-time %</th>
<th>Full-time Home Duties %</th>
<th>Required %</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 to 24</td>
<td>3.3</td>
<td>26.7</td>
<td>6.7</td>
<td>13.3</td>
<td>46.7</td>
<td>3.3</td>
<td>11.1</td>
<td>100.0</td>
</tr>
<tr>
<td>25 to 54</td>
<td>8.3</td>
<td>23.3</td>
<td>1.4</td>
<td>8.2</td>
<td>6.8</td>
<td>50.7</td>
<td>1.4</td>
<td>100.0</td>
</tr>
<tr>
<td>55 to 64</td>
<td>44.4</td>
<td></td>
<td></td>
<td>11.1</td>
<td>33.3</td>
<td></td>
<td>1.1</td>
<td>100.0</td>
</tr>
<tr>
<td>65 and over</td>
<td>5.9</td>
<td>24.4</td>
<td>2.5</td>
<td>5.0</td>
<td>8.4</td>
<td>45.4</td>
<td>1.7</td>
<td>6.7</td>
</tr>
</tbody>
</table>

Table 14: Source of Household Income

<table>
<thead>
<tr>
<th>Source of Household Income</th>
<th>Owner Count</th>
<th>Tenant Count</th>
<th>Total Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No earned income</td>
<td>2</td>
<td>57</td>
<td>59</td>
</tr>
<tr>
<td>part-time income only</td>
<td>10.5</td>
<td>58.2</td>
<td>50.4</td>
</tr>
<tr>
<td>at least one income from</td>
<td>5.3</td>
<td>4.1</td>
<td>4.3</td>
</tr>
<tr>
<td>full-time employment</td>
<td>84.2</td>
<td>37.8</td>
<td>45.3</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>98</td>
<td>117</td>
</tr>
</tbody>
</table>

Note: Household Income is defined as the aggregated income of all household members; i.e. may include incomes of parent(s) other relatives or older children.

As Table 13 shows, high unemployment and economic dependency translate directly into economic hardship for many families living on the estate. Half of all households have no earned income, rising to 60 per cent amongst Local Authority tenants. Clearly, the vast majority of these households are completely dependent upon social welfare payments. Further analysis reveals that roughly two-thirds (68%) of lone parent households with dependent children living at home depend solely upon social welfare payments; less than one-third dependent children fall into this category.
Table 15: Dependent Children and Source of Household Income

<table>
<thead>
<tr>
<th>Number of Dependent Children</th>
<th>No Earned Income</th>
<th>Part-time Income Only</th>
<th>At Least One Full-time Wage</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Court</td>
<td>17</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>58.6</td>
<td>3.4</td>
<td>37.9</td>
</tr>
<tr>
<td>1</td>
<td>Court</td>
<td>8</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>38.1</td>
<td>61.9</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Court</td>
<td>13</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>44.8</td>
<td>55.2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Court</td>
<td>9</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>45.0</td>
<td>10.0</td>
<td>45.0</td>
</tr>
<tr>
<td>4</td>
<td>Court</td>
<td>8</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>61.5</td>
<td>15.4</td>
<td>23.1</td>
</tr>
<tr>
<td>5</td>
<td>Court</td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>80.0</td>
<td>20.0</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Court</td>
<td>59</td>
<td>5</td>
<td>53</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>50.4</td>
<td>4.3</td>
<td>45.3</td>
</tr>
</tbody>
</table>

Table 15 provides an interesting perspective on the relationship between economic status and family structure. There is a clear relationship between the number of dependent children within the household and the likelihood that somebody in the household is in paid employment. Whereas almost two-fifths of families (38%) with one dependent child have no wage-earner, this rises to roughly three-fifths (62%) where there are four dependent children, and four-fifths (80%) where there are five dependent children living in the household. This relationship probably reflects a number of distinct causal effects. Naturally, the presence of additional children within the household places constraints on their parents’ ability to participate in the labour market. Moreover, families with no wage-earners may have a tendency to be more numerous than other families. Finally, couples with relatively low educational attainments may have a tendency to have larger families as well as a higher risk of unemployment.
The Physical and Social Environment

The quality of life of the residents of Fassaroe is not determined by housing quality alone, but crucially depends on the physical, social and cultural aspects of the wider environment in which they live. Table 16 provides the mean score for each of 24 different items. As before, a mean score of 3 indicates that an issue is perceived as being acceptable, scores below 3 indicate greater satisfaction and scores above 3 highlight potential problem areas.

Table 16: General Satisfaction with Aspects of the Estate as a Whole

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water pressure</td>
<td>2.5</td>
<td>good to acceptable</td>
</tr>
<tr>
<td>access to schools</td>
<td>2.7</td>
<td></td>
</tr>
<tr>
<td>access, to shopping facilities</td>
<td>2.9</td>
<td></td>
</tr>
<tr>
<td>weekly rubbish collection</td>
<td>2.9</td>
<td></td>
</tr>
<tr>
<td>access to bus services</td>
<td>2.9</td>
<td></td>
</tr>
<tr>
<td>street sweeping</td>
<td>3.3</td>
<td></td>
</tr>
<tr>
<td>appearance of houses</td>
<td>3.3</td>
<td></td>
</tr>
<tr>
<td>repair of roads and pavements</td>
<td>3.3</td>
<td></td>
</tr>
<tr>
<td>access to library service</td>
<td>3.3</td>
<td></td>
</tr>
<tr>
<td>drainage &amp; sewerage</td>
<td>3.4</td>
<td></td>
</tr>
<tr>
<td>street lighting</td>
<td>3.5</td>
<td>acceptable to poor</td>
</tr>
<tr>
<td>appearance of frontages</td>
<td>3.7</td>
<td></td>
</tr>
<tr>
<td>policing of the area</td>
<td>3.8</td>
<td></td>
</tr>
<tr>
<td>Maintenance of greens</td>
<td>3.9</td>
<td></td>
</tr>
<tr>
<td>railings &amp; walls around estate</td>
<td>3.9</td>
<td></td>
</tr>
<tr>
<td>vandalism to property</td>
<td>4.0</td>
<td>poor</td>
</tr>
<tr>
<td>drinking in public spaces</td>
<td>4.2</td>
<td></td>
</tr>
<tr>
<td>drug abuse</td>
<td>4.2</td>
<td></td>
</tr>
<tr>
<td>Graffiti</td>
<td>4.3</td>
<td></td>
</tr>
<tr>
<td>removal of bulky refuse</td>
<td>4.5</td>
<td>poor to very poor</td>
</tr>
<tr>
<td>provision of play areas</td>
<td>4.6</td>
<td></td>
</tr>
<tr>
<td>tidiness of public spaces</td>
<td>4.7</td>
<td></td>
</tr>
<tr>
<td>public litter bins</td>
<td>5.0</td>
<td>very poor</td>
</tr>
<tr>
<td>public telephones</td>
<td>5.0</td>
<td>very poor</td>
</tr>
</tbody>
</table>

Scale: 1 ‘very good’ 2 ‘good’ 3 ‘acceptable’ 4 ‘poor’ 5 ‘very poor’

It is important to stress, at the outset, that concerns about the estate as a whole are greater than those, which relate to accommodation. Moreover, social problems provoke stronger feelings than problems linked with the built environment. With the exception of the availability of play areas, social issues such as vandalism to property, drinking in public spaces, drug abuse, graffiti and the tidiness of public spaces are the major issues for local residents. Grievances in relation to the built environment are based on very specific shortcomings of the estate: there are no public litter bins or telephones.
Table 17  Use of and Satisfaction with Public Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Using Service</th>
<th>Satisfied</th>
<th>Dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Numbers</td>
<td>%</td>
<td>Numbers</td>
</tr>
<tr>
<td>Cleaning Pests</td>
<td>16</td>
<td>14%</td>
<td>9</td>
</tr>
<tr>
<td>Health Centre</td>
<td>48</td>
<td>41%</td>
<td>41</td>
</tr>
<tr>
<td>Probation Service</td>
<td>4</td>
<td>3%</td>
<td>1</td>
</tr>
<tr>
<td>Local TDs/Councillors</td>
<td>70</td>
<td>60%</td>
<td>46</td>
</tr>
<tr>
<td>Social Worker</td>
<td>11</td>
<td>9%</td>
<td>9</td>
</tr>
<tr>
<td>Library Service</td>
<td>41</td>
<td>35%</td>
<td>39</td>
</tr>
<tr>
<td>Community Garda</td>
<td>25</td>
<td>21%</td>
<td>19</td>
</tr>
</tbody>
</table>

Clearing Pests: Mice and rats have, at times been a problem on the estate, notably where building work has been going on and, of course, where rubbish dumping occurs. It appears that residents frequently hire private firms to eradicate pests, rather than relying on the Local Authority.

Health Centre: Various health services are provided on the estate, including pre-natal care which is provided by a Community Nurse in the Resource Centre, and other services are available nearby in Bray. 41 per cent of respondents had contact with local health services, and most of these were satisfied with the service they received (85%).

Probation Services: Numbers effected by the service are obviously small but may also be under-reported. As further investigation of the adequacy of this service is beyond the remit of this survey, we did not contact the probation service and therefore cannot ascertain whether the high degree of dissatisfaction (75%) is of concern.

Local IPs/Councillors: A surprisingly large proportion of residents look to their public representatives ‘to get things sorted out’, and those who took this route were reasonably satisfied with the response they received (67%). It is obvious from the comments made by residents during interviews that the reason why so many residents approach their public representatives is because the public administration is perceived as being highly inefficient and unresponsive. We will in greater detail with this issue in a separate chapter.

Social Worker: Residents who have come into contact with a social worker are generally satisfied with the service they receive (82%). However, only 9 per cent of residents have actually come into contact with a social worker. In Chapter 5 we highlighted the fact that over half of the families living in Fassaroe do not have access to any earned income and are thus largely dependent on social welfare support. The proportion of households coming into contact with a social worker therefore seems rather low. This raises a question mark about the role of support services such as these within the local area, the availability of resources and the ease of access to these services.

Library Service: There is no library on the estate and thus the only access to a public library requires a trip to Bray. Those who avail of this possibility are uniformly satisfied with the service provided (95%), but clearly the level, of utilisation of this service is nowhere near what it should be (35%). Forty per cent of the local population is fifteen years of age or younger, and yet two-thirds of families do not access the local library. Serious attention should be given to making this service more
accessible to local residents in order to improve their quality of life, in order to create learning opportunities for local people - young people in particular - and in order to provide information on statutory services and entitlements. This might include the provision of a mobile library service.

**Community Garda:** About one in five households have been in contact with the Community Garda. Whilst this is relatively high compared to other estates, it may be an appropriate level of contact given the prevailing problems on the estate. Satisfaction with this service is high (83%) and indicates a well-developed service.

**Table 18 Use of and Satisfaction with Facilities and Services of Fassaroe**

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Using Service Numbers</th>
<th>Satisfied %</th>
<th>Dissatisfied %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-school Play Group</td>
<td>14</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>Resource Centre</td>
<td>36</td>
<td>31%</td>
<td>14%</td>
</tr>
<tr>
<td>Community Centre</td>
<td>40</td>
<td>34%</td>
<td>34%</td>
</tr>
<tr>
<td>Estate Management Committee</td>
<td>32</td>
<td>27%</td>
<td>22%</td>
</tr>
<tr>
<td>Open Playing Fields</td>
<td>53</td>
<td>45%</td>
<td>37%</td>
</tr>
<tr>
<td>Shopping Facilities</td>
<td>97</td>
<td>83%</td>
<td>77%</td>
</tr>
<tr>
<td>Mass Centre</td>
<td>46</td>
<td>39%</td>
<td>41%</td>
</tr>
<tr>
<td>Parish Centre</td>
<td>38</td>
<td>32%</td>
<td>38%</td>
</tr>
</tbody>
</table>

**Pre-school Playgroup:** There are two play groups in Fassaroe, one situated in the Resource Centre for parents attending courses at the Centre and one in the Community Centre. There is a 100 per cent satisfaction rating amongst parents who avail of these two facilities and clearly both centres are very well-run. However, there are approximately 100 families (27%) with one or more children under 5 years of age in Fassaroe. With less than 30 places available between the two centres, there is a clear under-provision of play group facilities. Thus, the high satisfaction rating observed may reflect a sense of relief at having obtained access to a play group.

**Resource Centre:** The Resource Centre is run in a very professional way and provides a wide range of services including education, training, CE programmes, advice, youth facilities and an addiction service, all of which are built upon a community development approach. After initially operating from prefabricated buildings for a number of years, purpose-built accommodation was completed in 1999 which now houses the Resource Centre and the adjoining Mass Centre. As well as functioning as a general advice centre, the Resource Centre addresses, above all, the needs of young mothers and their children. The available space is fully utilised and does not allow for activity-based programmes for young people, which are accommodated in the Community Centre.

**Community Centre:** The centre is overseen by a voluntary committee and its day-today running is co-ordinated by members of a CE scheme. Activities on offer include football and other sports training, dance and other activities for children and young people, a snooker hall and coffee bar. The centre also houses a Travellers project. There is a widespread feeling that the centre is under-utilised and that its full potential has not been exploited. This is not a criticism of the good efforts made by the staff running the Centre, but a reflection on the lack of funding made available to employ sufficient numbers of qualified staff. We will discuss this in greater detail below.

**Estate Management Committee:** Satisfaction with the Estate Management Committee varies considerably throughout the estate. A number of issues arising from the role
assigned to the Committee need to be addressed urgently and these will be discussed later in this report.

**Open Playing Fields:** The playing fields are used by the members of a large proportion of households (45%), and people are happy to have access to this resource. However, significant criticisms are made regarding the conditions of the playing fields. In fact, the sports grounds and their surroundings were never completed. Clearly, funding needs to be secured in order to ensure completion of this amenity and to provide for ongoing maintenance.

**Shopping Facilities:** There is only one small corner shop on the whole estate. It is patronised heavily by local residents, albeit for a limited range of goods. The shop is situated in the most unpleasant of surroundings, amongst derelict buildings which are the result of a fire some time ago. There is a Compulsory Purchase Order on these buildings and it will be crucial for the UDC to plan their future development in consultation with residents.

**Mass/Parish Centres:** Approximately thirty to forty per cent of residents avail of the Mass and/or Parish Centre and generally are very satisfied (89% and 100% respectively).

### Table 19 Crime and Reporting of Crime

<table>
<thead>
<tr>
<th>Crime</th>
<th>Victims of Crime</th>
<th>Reported</th>
<th>Not Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Numbers</td>
<td>Numbers</td>
<td>Numbers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Vandalism of property</td>
<td>44</td>
<td>38%</td>
<td>18</td>
</tr>
<tr>
<td>Verbal threats</td>
<td>32</td>
<td>27%</td>
<td>19</td>
</tr>
<tr>
<td>Burglary/Break-in</td>
<td>21</td>
<td>18%</td>
<td>12</td>
</tr>
<tr>
<td>Robbery/Mugging</td>
<td>9</td>
<td>8%</td>
<td>7</td>
</tr>
<tr>
<td>Personal assault</td>
<td>7</td>
<td>6%</td>
<td>4</td>
</tr>
<tr>
<td>Theft of care</td>
<td>7</td>
<td>6%</td>
<td>5</td>
</tr>
</tbody>
</table>

Specific comments on crime levels are beyond our expertise, particularly as comparison data are not forthcoming. However, even a cursory inspection of the data presented in Table 19 paints an alarming picture. Four out of ten households have experienced vandalism to their property, three out of ten have experienced verbal threats, two out of ten have been burgled and two out of ten have been the victim of either robbery, mugging, personal assault or car theft.

### Tidiness of the estate and illegal dumping of rubbish

One of the main issues confronting the residents of Fassaroe is the extent of illegal dumping on the estate. Anyone who drives through the estate cannot help but be appalled by the accumulation of litter in all areas. Indeed, residents generally feel ashamed of the estate, to the extent that some avoid inviting visitors.

### Antisocial behaviour (drug-abuse, drinking, vandalism etc.)

Antisocial behaviour is widespread throughout the estate and includes drug abuse, drinking in public places and vandalism. It is beyond the scope of this study to develop a comprehensive response to these problems.

### Speeding motorists and joyriding
Many local authorities have implemented extensive measures of traffic calming over the past few years. The design of speed ramps has improved greatly and there are several cost-effective options to reduce the speed of traffic in housing estates. The UDC should confer with the Estate Management Committee as a matter of urgency in order to decide where to position speed ramps; the necessary work should be carried out within a reasonable timeframe.

**Caring for children**

There are over 350 children on the estate between four and ten years of age, which represents 21 per cent of the total population, and yet there is not a single playground. Playground facilities were available, for a short period, beside the Community Centre, but these had to be closed down as they posed a security risk for children. The playground was completely unsuitable as it was not. There is an urgent need to find a suitable, highly-visible location for a playground and to provide adequate resources for designing and equipping it. The provision of paid and qualified playground staff should also be considered.

**Involving young people**

More than 300 young people (aged 11-18 years) live in Fassaroe, representing 18 per cent of the population of the estate. We have emphasised the lack of opportunities for young people to engage in meaningful activities. The two existing centres on the estate should, in principle, provide ample opportunities for these young people. The Resource Centre - for reasons of its small size and historical role within the estate-functions primarily as a community-based resource for women and small children, as well as acting as a general advice centre. Therefore, the Community Centre must take a lead in providing interesting and challenging activities which young people can take part in.

There are a number of striking inadequacies with respect to the Community Centre. In terms of its physical layout, the centre is hampered by its design, as the sports hall is too small for indoor football, the most popular activity amongst young people. The centre is run by a voluntary Management Committee which seems to need greater support to cope with the demands of developing a thriving centre for young people. Finally, in relation to its day-to-day operation, the centre is wholly dependent on staff employed through the CE scheme and on volunteers.

Whilst we acknowledge the tremendous effort made by staff-members, it is nevertheless obvious that the Centre is completely under-staffed and -lacking in professional input. Funding appears to have been made available by the UDC in the past to build and subsequently to upgrade the centre, but little consideration has been given to its day-to-day running. Indeed, the centre has remained dependent upon fund-raising in order to support its activities.
5.2 Social Exclusion and Marginalisation

“Heading in the Wrong Direction? The Reality of Social Exclusion of Bray”, was published in July 2001, the purpose of the report being to highlight the reality of exclusion in Bray, to identify the groups most at risk of exclusion, to document the human realities and consequences of exclusion, to identify some ways forward with regard to the issue and to support discussion and debates already underway in Bray on issues of exclusion. During the course of this qualitative study, there were 89 semi-structured interviews, a number of community focus group discussions, a questionnaire was administered and individual meetings with interested parties were held.

The report concluded that the groups most at risk of exclusion were - those experiencing high levels of educational disadvantage, single parents, “stay at home mothers”, long term unemployed, Travellers, people with disabilities, substance misusers, those living in particular geographic areas and individuals participating in a variety of labour market intervention programmes.

Whereas the report found that the above groups of people were most at risk of exclusion, it also found that for those engaged in full-time employment (mostly working in Dublin), did not feel they belonged in Bray, there was no sense of community, and they saw their accommodation as simply a place to rest.

The overall purpose of the report was to highlight the exclusion and marginalisation experienced by different groups in Bray. The findings point to high feelings of exclusion among the groups identified.

Whereas the report concluded that exclusion and marginalisation is widespread in Bray on different levels, for the purpose of this report the views of the residents of two designated areas of disadvantage are highlighted:-
**Extract A**

The View from Little Bray Focus Group

“The sense of community here isn’t great”.

“There is nothing for young people. There’s a community centre but they ‘re not allowed in it. Kids have no self esteem. They ’re being left behind”

“The drug problem is on the increase. There is a younger profile of those -who are on and getting on drugs and heroin is quite cheap now “

“People feel segregated simply because of where they live. The housing estate is surrounded by a large wall and virtually invisible from the road. All we need now is a gate at the entrance and they can lock us in “

“There is a great feeling of disenfranchisement especially among young men. They feel left behind and that they have no role in society. If you pass by the park, you can see grown men drinking there because they feel there is nothing else to do.

“There is a high level of literacy problems in the area. Parents who may have had horrendous experiences in school do not have the ability to help their own children and thus the vicious cycle continues. One to one literacy lessons are required. Group sessions would be lost on the majority of people “

“People in the area can’t sell their houses and the Council won’t buy them “

“My house flooded over a month, ago. The lights in the house have not functioned for about 3 weeks. I’ve three children and I have to sweep water out of the house every day. I’m a lone parent. Where am I going to get the money to buy a new lino, new paint for the walls? Where am I going to get the money to pay the bills let alone pay for Christmas? “

“Publicity is hard got if something good is happening. But if a car is on fire then straightaway, the media and cameras are up. ‘Only place anything bad happens is in Fassaroe’. People don’t think anything positive happens up here. “

“There’s a very limited bus service to the estate “

“There is no estate management in our estate as far as I’m concerned”

“No one wants to get involved in the community any more “

“Some parents direct their children towards Youthreach so they ‘Il get paid for going to school and, have an extra income into the house “

(O’Regan, C (Eds):2001:48)
Extract B

The View from Ballywaltrim Focus Group

“Young people are vulnerable, exposed and excluded. They ‘re not embraced by the community “

“No place to go if you ‘re between 12 and 16” “The Resource Centre is a house. This isn’t ideal”

“Certain, areas like Deepark, Fassaroe and Oldcourt are areas perceived to be troublesome. The profile of these areas has to be raised. Because you live in a bad area doesn’t mean all living there are bad, but your address can affect your chances of getting a job “

“Kids have no self esteem “ “There is a lack of parental involvement in sport and education “

“The Bray People portrays the town as being violent and destructive. When people know you ‘re from Bray is like ‘I’ve heard terrible things about that place’. It’s not right”

“Bray Urban doesn’t listen to everyone “

“ Caretaker for estate is needed”

“Drugs are in easy supply. Vulnerable people are targeted”

“Young people need stimulation, need to be challenged. Breaking windows and the chase after is often the only adventure available “

“The local youth club is held in the kitchen “

“Access to St. Killian ‘s Sports Hall is not for locals. It’s too expensive “

“There’s a need to invest in people as opposed to buildings “

(O’Regan,C. (Eds) :2001:49)
5.3 Drugs Misuse in Context

Through the Young People’s Facilities and Services Fund, RAPID, the Trutz Haase Report and the report on Social Exclusion, it is clear that the areas most affected by drugs misuse are those areas which also suffer from a high level of social and economic deprivation. Throughout the months of August and September 2001, 24 treated drug misusers were interviewed on a 1:1 basis. The findings show the entrenchment in social and economic deprivation experienced by these misusers.

Of those interviewed, 6 were under the age of 20, 8 between 21 and 25, 9 between the ages of 26 and 35 and one over 35. All, without exception, regretted ever having started using heroin and all, without exception expressed very negative attitudes towards themselves for their own use, what they had done with their own lives, the behaviours that they engaged in during their heroin use in order to obtain heroin and the damage that they saw they had done to their families. All also expressed alarm at the level of young people they know currently taking heroin. None of those interviewed blamed anybody else for their initial heroin use saying, in the main, that like those young people that they know now, they “wouldn’t listen to anybody”.

Educational Disadvantage

As previously outlined (O’Regan, C:2001), educational disadvantage leads to social exclusion, making the educationally disadvantaged at higher risk of marginalisation, with educational disadvantage also being a high risk factor for drugs misuse.

Only 4 of the client group had attained leaving certificate with the remaining having left school between the ages of 12 and 16, the majority leaving at the ages of 14 and 15. Many said they left school because “it did nothing” for them. All but 4 had left school early because they were expelled, saying that they “were always in trouble”. In this area, in particular, many of the clients began to feel excluded and the only attention paid to them was for bad behaviour. Some felt that they were victimised for nothing other than their family name, with a predominant feature being that older brothers or sisters had been through the school system and they felt that teachers
expected nothing from there. Only 4 left school of their own choice saying that they “left with peers”. None of those interviewed ever felt school was a safe place and many said that what may have made a difference was “if someone had valued me”. None of those interviewed blamed their heroin use on being expelled from school with all having used drugs of some kind - most notably alcohol and cannabis, and in some cases of very early use (age 9), solvents, tippex and aerosols. All first began injecting between the ages of 16 and 17, with a history of 4 - 5 months smoking heroin before first injecting. However, on further questioning, the majority did say that their teachers did not know they were using drugs and “if they did they did not care because they did nothing” and truancy and lack of follow up of truancy gave “the time to use drugs “.

Economic Disadvantage

As already outlined, in the Area Profile, and in O'Regan C:2001, economic disadvantage and unemployment are aspects, which lead to marginalisation and exclusion. Unemployment is also a risk factor in substance misuse, not only for the unemployed but for the immediate family.

18 reported being unemployed, 4 currently employed and 2 have contact with Youthreach. The majority (14) would like to work, but do not know what they would be capable of. Of those unemployed, most also feel that being a known heroin user will not help them get a job in Bray because “everybody knows everything about us”. 3 had found jobs while on treatment, but when it became known that they were on methadone, were let go. A real concern for those on treatment who feel they want to work, is making up for the lost time they have incurred through their heroin use, now being aware that basic skills of literacy and numeracy and job training will have to come first before they have any chance of employment. Of all of those unemployed, there was a sense that they felt they would never work, because they would not be given the chance by employers.
Reasons for drug misuse

20 out of 24 interviewed came from the areas of designated disadvantage in Bray, the majority had left school early, and the majority were unemployed. All felt excluded from society and were not welcomed in any area of the town. The majority of those interviewed were ‘known drug users’, that is, known in the town. For this reason, they were excluded from job opportunities, from leisure activities, from any type of activity that would encourage them back into mainstream society. On occasion, those who had found employment were subsequently let go when their employer found out about their past drug use history.

The drug misusers in Bray are no different to drug misusers anywhere else and have common needs. When asked why they started using drugs the commonplace responses were given: “it was available”, “it was cheap” “just wanted to try it” “a few family problems”, “didn’t think it was addictive” “all the lads were doing it” “just wanted to try it” “there was nothing else to do and I was bored”

It is clear that the areas most affected by drugs misuse in Bray are those areas considered to be disadvantaged and that those people who are involved in drugs misuse are themselves disadvantaged in social and economic terms. The association between disadvantage and illegal heroin misuse is as pertinent in Bray as it is in Inner City Dublin and reflects the pattern of early school leaving, social and economic exclusion and general disregard by society for the conditions under which people live.

Whereas the 1999 research report pointed to a different profile of drug users in Bray, that difference would appear to have eroded in the past 2 years, reflected also in the increase in numbers of drug misusers on treatment. Whereas there is the minority that cross the socio-economic divide, the majority of treated drug misusers in Bray display the same socio-economic profile as drug misusers elsewhere.
Section 6

The Level of Illegal Drug use in Bray

6.1 The Level of Illegal Drug Use in Bray (O’Sullivan & Roche: 1998)

In 1998 the Bray Partnership commissioned a prevalence study of treated illegal opiate users, in Bray. The figure derived at by the authors was 67 people in total as follows:

<table>
<thead>
<tr>
<th></th>
<th>April/May 1998</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bray GP’s</td>
<td>13</td>
</tr>
<tr>
<td>GP’s outside Bray</td>
<td>2</td>
</tr>
<tr>
<td>State Run Clinics</td>
<td>40</td>
</tr>
<tr>
<td>Counsellors</td>
<td>12</td>
</tr>
<tr>
<td>Total</td>
<td>67</td>
</tr>
</tbody>
</table>

(O’Sullivan & Roche: 1998:25)

With the state run clinics having the following breakdown:

<table>
<thead>
<tr>
<th>Clinic</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballywaltrim Community Clinic</td>
<td>18</td>
</tr>
<tr>
<td>Strand Road Community Clinic</td>
<td>5</td>
</tr>
<tr>
<td>Little Bray Community Clinic</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>29</td>
</tr>
</tbody>
</table>

(O’Sullivan & Roche: 1998:17)
6.2  The Current Level of Illegal Drug Use in Bray (October 2001)

The following are the figure for October 2001, attending the 3 Community Clinics and the Mobile Treatment Unit, along with the numbers on treatment with GP’s in Bray.

<table>
<thead>
<tr>
<th></th>
<th>On Treatment</th>
<th>Waiting List</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballywaltrim</td>
<td>41</td>
<td>10</td>
</tr>
<tr>
<td>Strand Road</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>Little Bray</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>GP’s</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td>Mobile Treatment Unit</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>148</strong></td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

(Source: ERHA: Information Analyst)

This represents a four-fold increase in a two year period of treated drug misusers.

The numbers can be broken down in terms of age and gender for each of the satellite clinics.

**Gender: Male**

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Under 18</th>
<th>19-24</th>
<th>25-29</th>
<th>30-39</th>
<th>Over 40</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballywaltrim</td>
<td>1</td>
<td>20</td>
<td>7</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Strand Road</td>
<td>1</td>
<td>13</td>
<td>5</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Fassaroe</td>
<td>2</td>
<td>^</td>
<td>6</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4</strong></td>
<td><strong>37</strong></td>
<td><strong>20</strong></td>
<td><strong>11</strong></td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

**Gender: Female**

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Under 18</th>
<th>19-24</th>
<th>25-29</th>
<th>30-39</th>
<th>Over 40</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ballywaltrim</td>
<td>0</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Strand Road</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Section 7

Current & Planned Service Provision (Statutory Agencies)

The following information was provided by the East Coast Area Health Board

7. Current Service Provision

7.1 East Coast Area Health Board

The East Coast Area Health Board provide a range of community based health services in the Bray area including Community Welfare, Dental services and Public Health services. The ultimate goal of the drug treatment services is to achieve and maintain a drug free outcome for individuals who misuse drugs. The Board recognises that not all individuals will achieve the aim of a drug free state, therefore a variety of interventions are provided that empowers an individual with a drug misuse problem to live as normal a lifestyle as possible. The following range of services are provided either directly in the area or by arrangement with the other health boards or through other agencies funded by the Board

1. Treatment Services
2. Education Prevention
3. Outreach Services
4. Detoxification
5. Counselling
6. Rehabilitation
7. Alcohol Services

7.1.1 Treatment Services

The treatment services recognise that initially a drug misuser must strive to achieve stabilisation and be supported to eliminate the chaotic lifestyle that is associated with drug misuse. The initial stabilisation is generally undertaken at an addiction centre or by a trained level 2 General Practitioner. Following stabilisation and particularly through the elimination of the chaotic lifestyle, the drug misuser can then be moved on to a satellite clinic, which is under the direction of a General Practitioner or referred to a practice.
Initial services focus on harm reduction programmes, which help to reduce the risk of ill health for the individual, particularly for HIV, AIDS and Hepatitis and in addition help minimise the risks to public health and safety through development of safer injecting practices, in particular with needle exchange programmes. The central aim of needle exchange programmes is to make sterile injecting equipment available to ongoing injectors so as to minimise the hazards of injecting and to actively facilitate the safe disposal of injecting equipment. Exchange schemes help to make contact with injectors who are not in contact with other services. Harm reduction specifically aims to eliminate the use of heroin through the provision of the synthetic opiate methadone as an alternative.

(Continuing Care Committee: January 2001)

The development of the drugs service in Bray is different to that outlined above. There is currently no needle exchange programme in Bray and there is currently no Treatment Centre.

7.1.1(a) **Ballywaltrim Community Clinic**

The Ballywaltrim Drug Project evolved from an existing drop-in centre, which had been set up by a group of concerned members of the community to provide a safe place for drug users in the locality. This had developed from a public meeting in Ballywaltrim to address the perceived drug problem in the area. A support group was formed which secured the use of a portocabin in the grounds of St. Fergal’s church. They set up the drop-in centre for local drug misusers for one night a week which expanded to two, with refreshments, darts, cards and games. A group of about 15 became the ‘The Get Along Gang’ and the organisers saw themselves ‘as just there to be there’ for drug users; there was no advice or counselling involved at that stage. However, it became apparent that the users themselves wanted more than simply a drop-in centre and at a subsequent public meeting the Eastern Health Board offered to support them with a methadone treatment service.

This clinic currently operates 2 nights per week, Tuesday and Thursday from 7.30pm to 9.00pm. It is run by 5 volunteers and the East Coast Area Health Board provide a Doctor, a Nurse and 3 General Assistants. An Addiction Counsellor is also available.
to clients attending this clinic. Current East Coast Area Health Board figures show a figure of 41 currently on treatment in this satellite clinic with a waiting list of 10. This clinic services clients from the Ballywaltrim Area as outlined in the Area Profile.

7.1.1(b) Strand Road Community Clinic

The Strand Road Community Clinic was originally situated in St. Cronan’s on the Main Street of Bray, and is now situated close to the sea-front, in the East Coast Area Health Boards’ Health Centre. It operates 2 nights per week, Monday and Wednesday from 5.00pm to 6.30 pm. The East Coast Area Health Board provide a Doctor, a Nurse and 3 General Assistants and an Addiction Counsellor is also available to clients attending this clinic. In its’ early years the clinic was run by 4 volunteers but that number is now down to 1. East Coast Area Health Board figures show a figure of 32 currently on treatment in this satellite clinic.

This clinic, which used to be on the Main Street of the town, services the central part of the town, from the Dargle river to the eastern half of the Boghall Road, an area of wide socio-economic differences. The clients on this clinic include students, workers and unemployed people from a variety of backgrounds.

7.1.1(c) Little Bray Community Clinic

This clinic operates out of the Little Bray Family Resource Centre, situated in the Fassaroe Estate. This clinic also had community involvement in the early years, which has since dwindled. The East Coast Area Health Board provide a GP, a Nurse and 3 General Assistants as well as the services of an Addiction Counsellor.

Current East Coast Area Health Board figures give a total of 30 on treatment in this clinic.

7.1.1(d) General Practitioners

There are currently 35 people on treatment locally with 3 General Practitioners.

8.1.1(e) Mobile Treatment Unit

There are currently 10 people on low dose methadone maintenance on the Mobile Treatment Unit.
7.1.2 **Education**

A helpline has been established which is manned 7 days of the week to provide advice and information facilities in respect of services available to drug misusers. The helpline also provides advice to any caller who is either worried or who has experienced a drug or HIV related problem either directly or amongst their family or friends.

There are three Education Officers based in the East Coast Area Health Board, one having a remit for the Bray area. The education service, in consultation with the Health Promotion Unit has been making contact with every primary and secondary level school in the area in order to encourage the adoption of Department of Education and Science Programmes, specifically designed for prevention of drug misuse and to offer support to schools currently involved in the programmes.

The education service is involved in teacher training for Substance Misuse Prevention Programmes (Walk Tall) and (On My Own Two Feet) in conjunction with the Psychological Services of the Department of Education and Science. The service also provides workshops for parents of children involved in the prevention programmes.

At community level the services have provided Drugs Awareness Programmes and deliver Addiction Study Courses targeting statutory, voluntary and community workers and youth leaders.

7.1.3 **Outreach Work**

The outreach services act as a channel of communication with drug misusers and provide advice, help and referral to either the generic health services or to the specialist services for drug misusers. The outreach services also provide a limited needle exchange service. The outreach service is often the first point of contact with drug misusers and through a process of education, advice and befriending, encourage the drug misusers to begin to access the full range of services available in the area.

Bray is serviced by 1 East Coast Area Health Board Outreach Worker, who does street work with the aim being to reach the hard to reach drug misusers and get them
into treatment, provides connections to existing HIV/drug services, counselling and drugs education.

7.1.4 Detoxification Services

A range of specific interventions are available in the region that allow an individual to withdraw from drugs by managing the physical and the psychological dependencies and by monitoring withdrawal symptoms in order to minimise discomfort. It is best achieved when a client is stable and has gained sufficient insight and is motivated to follow through to abstinence within a network of strong social support. The process is gradual where reduction of medication is negotiated over time. Both medical and psychosocial treatments are provided so as to manage withdrawal symptoms and the psychosocial impact. The specific detoxification services available are:

- Short term detoxification in local clinics using methadone or lofexidine
- Inpatient unit in Cuan Dara, Cherry Orchard Hospital
- Stabilisation Unit, Cherry Orchard Hospital
- St Michael’s Ward, Beaumont

The above services are available to drug misusers within the East Coast Area Health Board and are therefore available to drug misusers in Bray.

7.1.5 Addiction Counselling

Counselling is but one of the therapeutic interventions on a continuum of complimentary care afforded to service users, its focus in developmental and capacity building in collaboration with medical, community and other models of intervention.

Bray is serviced by 1 East Coast Area Health Board Addiction counsellor, who has an office based in the Strand Road Clinic. Clients are referred from Doctors, the probation services as well as self referrals. The level of service provided is negatively impacted by the lack of suitable premises and facilities necessary to carry out the work properly and is also negatively impacted by the nature of the satellite clinics being run in the evening.
7.1.6 **Rehabilitation Services**

Rehabilitation/Integration is a structured process whereby individuals whose lives have become marred by drugs misuse are facilitated in the process of regaining their economic and cultural benefits of life in line with their aspirations. Assisting individuals to realise their potential to live independently and responsibly is the core of the Board’s rehabilitation/integration programmes.

A Rehabilitation Blueprint has been agreed for the development of Rehabilitation services in the three Area Health Boards. In the East Coast Area a Rehabilitation Coordinator has been in post and is currently looking for a suitable premises in Bray for a Rehabilitation/Integration Centre.

7.1.7 **Liaison Pharmacist**

The Liaison Pharmacist liaises with local pharmacists to recruit them ‘to the methadone protocol scheme and support them in their subsequent involvement. There is 1 pharmacist in Bray who dispenses methadone, giving rise to problems for those who are stable and are trying to hold down a job.

7.1.8 **Planned Service Provision**

The East Coast Area Health Board are currently in the process of looking for suitable premises for a proposed Integration Centre for the Bray area. The purpose of this Centre will be to integrate ex-drug misusers back into mainstream society.

The East Coast Area Health Board are currently assessing the need for a Treatment Centre due to the numbers of people Satellite Clinics and those on waiting lists.
7.2  Garda Siochana

The following was prepared by the Gardai in Bray

7.2.1  Policing the Drug Problem in Bray

There is a drug problem in Bray like there is in every town in the country. The problem is not as severe as the notorious areas of Dublin city, but is bad enough to require serious attention by the Gardai.

Bray forms part of the ‘N’ District in the Eastern Division of the Dublin Metropolitan Region. The ‘N’ District also includes Shankill, Greystones and Enniskerry sub-districts. The District covers an area of 176 square kilometres and has a population of 70,000 (based on 1996 census). The District Headquarters is located in the newly extended and refurbished Garda Station at Convent Avenue, Bray.

7.2.2  Drugs Legislation

The primary legislation involved in combating the illegal drug trade are:-

The Misuse of Drugs Act 177/84 and
Criminal Justice (Drug Trafficking) Act 1996

Also important are the Criminal Justice Act 1994 and related Money Laundering legislation, the Licensing (Combating Drug Abuse) Act 1997 and the Housing (Miscellaneous Provisions) Act 1997.

7.2.3  The District Drugs Unit

It is part of the duty of all the Gardai stationed in Bray to enforce the Anti Drugs legislation. A District Drugs Unit was set up in 1996. It consists of one Sergeant and four Gardai. It is based in Bray, but covers the whole District.

Also to the forefront in the battle against illegal drugs are the Community Gardai. There is one Sergeant and four Community Gardai in Bray. There are five additional
Gardai working in support of the Community Police on full time foot patrols in selected areas.

The District Drug Unit is supported by the Divisional Drug Unit based in Dun Laoghaire, who also work in the Bray area” as the need arises. Regular joint operations are carried out. The resources of the Gardai National Drugs Unit, Dublin Castle are also available.

7.2.4 Operation of Drug Unit

The District Drugs Unit operates as directed by the Chief Superintendent in Dun Laoghaire and the Superintendent in Bray. The normal daily duties of the Unit includes:-

- Foot and Mobile patrol of areas frequented by dealers
- Gathering information
- Searches of suspects
- Search of vehicles
- Search of houses
- Arrest and interviews of suspects
- Preparation of files for transmission to the DPP
- Court Attendance

7.2.5 The New Directions Project

This is a Special Garda project in Bray funded by the Department of Justice, Equality and Law Reform. It has an annual budget of £50,000. The management committee includes representatives from the schools and local community as well as Gardai. The aim is the diversion of young people away from drugs through intervention and prevention programmes. The Project has a full time co-ordinator.

7.2.6 Drugs Abused in Bray

The abuse of heroin, cannabis resin, cannabis herbal, cocaine, amphetamine, MDMA, un-prescribed methadone and un-prescribed benzodiazepines, and under age drinking, have all come to the attention of the Gardai.
7.2.7 **Extent of the Drug Problem in Bray**

By virtue of the covert nature of the illegal drugs business, it is difficult to determine the extent of the problem. An indication of the extent of the heroin problem is reflected by the numbers attending satellite clinics or on waiting lists for treatment. It is more difficult to determine the number of people who use other main drugs -cannabis resin, ecstasy, amphetamine.

7.3 **Community Initiatives**

The community initiatives currently in action in Bray are outlined in the section on the Young People’s Facilities and Services Fund.
Bibliography


4. Continuing Care Committee (2001) Summary of Addiction Services in East Coast Area Health Board


Section 9

Education & Prevention

Education & Prevention

The Education & Prevention sub-group of the Bray Local Drugs Task Force understands the following as factors, which contribute, to a person being at risk of substance misuse:

1. School non-attendance.
2. Early involvement with crime, criminals and the criminal justice system.
3. An experience of being looked after by the local authority.
4. An experience of being homeless.
5. Unemployment of self and significant others.
6. Heavy use of legal drugs (tobacco and alcohol) in early life.
7. An experience of a mental health issue (e.g. low self-esteem, depression etc.).
8. Parent(s) who are/were criminally active with their own substance problems.
9. Disruption of family unit by inconsistent parenting, separation, bereavement etc.
10. Use of illegal drugs such as Cannabis, LSD and Ecstasy.

(Lifeline, 1998:4)

and have considered applications from groups/organisations who work or seek to work with children and young people displaying these characteristics.

The sub-group considers work with children at risk of early school leaving as a preventative measure.

The sub-group considers work with young people at risk of substance misuse as a preventative measure as well as encompassing a drug education component.

The sub-group considers Drug Education as direct information giving about the use of drugs, both legal and illegal, where the target group are able to make an informed choice following education, based on fact, irrespective of whether or not the target group are considered to be at risk of substance misuse.
Following on the above beliefs, the sub-group have categorised proposed responses under the following headings:

a. Children at Risk (of early school leaving)

b. Youth at Risk (of substance misuse)

c. Direct Drug Education
Aims and Objectives

The Education & Prevention Sub-Group of the Bray Local Drugs Task Force prioritised its aims and objectives based on identified gaps in service provision, as follows:

A. **Children at Risk (of early school leaving)**

**Aims:**

1. To support children and families in disadvantaged areas to access the child’s fundamental right to education in a safe and positive environment.

2. To support parents of young families who may be marginalized or excluded for various reasons.

3. To address the failure of the school system in supporting initiatives which recognise social and emotional factors which contribute to early school leaving.

**Overall Objective:**

To ensure the development of in-school and out-of-school activities, which ensure that children at risk of early school leaving are targeted and that families experiencing difficulty are offered practical, social and emotional support, thereby reducing the risk of early school leaving and consequently reducing the risk of substance misuse.

B. **Youth at Risk (of substance misuse)**

**Aims:**

1. To support the development of a drop-in service for young people who may not be attracted to structured activities.

2. To support efforts ‘being made to attract young people at risk into structured activities.

3. To support the expansion of the current Life Skills programmes in place in Bray.

**Overall Objective:**

To ensure that young people who are currently at risk of substance misuse, for some identified reason, are attracted to services with positive role models, where interventional measures can be taken, to increase their capacity to make positive life choices, thereby reducing the risk of substance misuse.
C. Drug Education

Aims

1. To seek to establish closer links with all schools in the Bray area, both at primary and secondary level, and to develop links with ECAHB Education Officer and SPHE Co-ordinator, so as to deliver a coordinated drug education programme in schools.

2. To encourage members of the community, particularly those working with young people and those in direct contact with people experiencing difficulty with drugs to undertake the Certificate in Addiction Studies.

Overall Objective:

To ensure that awareness of drugs and drug related matters is increased among the target group and to the wider community, thereby correcting misinformation, and ensuring that people can make informed choices, based on fact.

Summary of Actions Recommended to Achieve Aims and Objectives

<table>
<thead>
<tr>
<th>Children at Risk of Early School leaving</th>
<th>Aims 1, 2 &amp; 3</th>
<th>Actions 1, 2, 3, 4 &amp; 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth at Risk of Substance misuse</td>
<td>Aims 1, 2, &amp; 3</td>
<td>Actions 6, 7, &amp; 8</td>
</tr>
<tr>
<td>Drug Education</td>
<td>Aims 1 &amp; 2</td>
<td>Actions 9 &amp; 10</td>
</tr>
</tbody>
</table>
Aim 1 – Children at Risk of Early School Leaving/non attendance
To support children and families in disadvantaged areas, to access the child’s right to education in a safe and positive environment.

Action 1
To support initiatives which aim to attract children into school and offering child and family support.

Title
Bray Breakfast Club

Aims & Objectives
The aim of this project is to offer a family and child support programme, by providing a nutritious breakfast for school children in disadvantaged areas with the objective being to target those children most in need and to thereby impact on school attendance and attentiveness in school.

Proposal
Description
The target group for this proposal are the children attending four schools (St Fergal’s Junior School, St Fergal’s Senior School, St Peter’s Boys School and Ravenswell School), in the two designated areas of disadvantage in Bray (Ballywaltrim and Little Bray), who are at risk of becoming trapped in a cycle of poverty and social exclusion. The project promoters are currently involved with the target group from each of these schools, providing a Homework Club service to 182 children from those schools. A recent profile of the children and families using this service demonstrates that there is an extremely high proportion of families who are long-term unemployed/welfare dependent, a substantial number of close family members involved in the criminal justice system, and a significant number of families using the service that is currently being provided are referred by the Health Board. Drug and alcohol abuse would be a significant central or contributory factor to all of the above. The children who use the current service and who will avail of the new service are those that fall into the category of being at high risk of early school leaving, and given contributory environmental factors, at future risk of forming a drug dependency.

In such families the provision of a healthy breakfast will provide a support to parents, and will be an incentive to children to come into school, as well as giving them the nutritional requirements for active participation in class.

Resources Requested
2 coordinators
2 assistants
Costs relating to travel, heat/light, insurance, breakfast costs, repairs/materials
Linkages
Bray Youth Services, St Fergal’s Family Resource Centre

Monitoring & Evaluation
The work and progress of the project will be monitored at the monthly meetings of the Management Committee, which will be attended by the coordinator from each area. The basis of the quantitative evaluation of the success of the project will be the daily attendance sheets for the children using the service cross-referenced by their school attendance as compared to the 3-month period prior to the start of the project. The qualitative indicators will be assessed through contact with class teachers and parents for an indication of the perceived benefit to child and family.

Project Promoter
Marian Pre School and Family Centre Ltd, in conjunction with Bray Youth Service, St Fergal’s Junior School & Senior School, Ravenswell School, Home School Liaison.

Budget Requested
£28,860

Budget Recommended
£28,860

The Bray Partnership has funded this project on a pilot basis to the sum of £13,212, which included setup costs and running costs to February 2002. The pilot has commenced, and at present, 20 children are attending each morning. The BLDTF is satisfied that this is a viable project with long-term gains and recommends the support of the project to the sum requested as follows: -

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 coordinators @ £7.50 per hr x 15 hrs per week x 52 wks</td>
<td>11,694.80</td>
</tr>
<tr>
<td>2 assistants @ £7.50 per hr- x 7.5 hrs per week x 52 weeks</td>
<td>5,850.00</td>
</tr>
<tr>
<td>Employer’s PRSI</td>
<td>1,404.20</td>
</tr>
<tr>
<td>Sub Total</td>
<td>18,949.00</td>
</tr>
<tr>
<td>Petrol expenses</td>
<td>390.00</td>
</tr>
<tr>
<td>Heating/Light</td>
<td>300.00</td>
</tr>
<tr>
<td>Insurance</td>
<td>180.00</td>
</tr>
<tr>
<td>Breakfast Costs</td>
<td>8,190.00</td>
</tr>
<tr>
<td>Breakages/Repairs/Replacements</td>
<td>260.00</td>
</tr>
<tr>
<td>Cleaning materials</td>
<td>591.00</td>
</tr>
<tr>
<td>Total</td>
<td>£28,860.00</td>
</tr>
</tbody>
</table>
Aim 1 – Children at risk of early school leaving/non attendance

To support children and families in disadvantaged areas, to access the child’s right to education in a safe and positive environment.

Action 2

To provide the environment whereby children can maximise their learning capacity, promote positive attitudes to school and build on confidence.

Title

Homework Club

Aims & Objectives

The aim of the project is to extend the current Homework Club provision for 5”th and 6”th class children from St Peter’s School, Ravenswell School, St Fergal’s Senior School and St Fergal’s Junior School. Children from 5”th and 6”th class are currently attending only one day per week with an additional Friday every alternate week for computer access. The long-term objective is that children attending the Club will maximise their learning capacity.

Proposal

Description

The Homework Clubs offer support with homework, the development of good relationships with caring adults, activities and outings, which build self-esteem and confidence, to those that attend the service. This project is a preventative education programme aimed at promoting positive attitudes to school, building confidence in marginalized children and addressing the problems encountered by children from disadvantaged communities. The aim is to break the pattern of poor attendance at school, lack of self-esteem and low expectations of the children in the community. The project promoters recognise that it is difficult to achieve this aim with the limited contact that they have with the current 5th and 6th classes.

The children currently attending the Homework Club range from 5-13 years. They are referred through Social Services, Home/School Liaison, teachers and parents themselves. 23% of the children attending are from families on active social service lists. The majority are from social welfare dependent homes (over 85%) and many are from lone parent families, living with grandparents or have experienced family breakdown. There are 182 children attending the Homework Clubs each week. The current project provides a staff/child ratio of 1:3, and provides help with schoolwork, a range of free accessible activities including computers and a welcoming non-judgmental club atmosphere.

With development of extra support to 5th and 6th class the project aims to target the most vulnerable to early school leaving at the crucial period prior to the transfer into 2nd level.
Resources Requested
2 part-time Homework Club workers
Rent of Premises
Overhead Costs

Linkages
Many of the families of the children are known to agencies such as Probation Services, Social Workers and Sessa House. There is a continuum of service provision to support these families from Preschool to Homework Club to Youth Services.

Monitoring & Evaluation
The steering committee and the management committee will monitor the project. The project will be evaluated both quantitatively by the numbers of children attending and qualitatively by questionnaires to parents, staff, schools and children after each project. The project will also be evaluated externally.

Project Promoter
Marian Pre School & Family Centre Ltd in conjunction with St Philomena’s School, Bray Youth Services, St Fergal’s Senior School, St Fergal’s Junior School, St Peter’s Boys National School, Home School Liaison.

Budget Requested
£18,808

Budget Recommended
£18,808

The project has received funding for material costs, has received a staffing grant from the Department of Justice Equality and Law Reform and funding from the Bray Partnership for an extension to the St. Fergal’s area Homework Club to include 5th and 6th class. The BLDTF are satisfied that the Project Promoters have delivered high quality service in the area of childcare in Bray in the past and are confident of their ability to sustain this project and offer an after-school support to the target group which will maximise their potential to stay in school and therefore recommend the support of the project to the sum requested as follows: -

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 part time HWC workers @ £7.50 per hr x 20 hrs per week x 52 wk</td>
<td>15,600</td>
</tr>
<tr>
<td>Employers PRSI</td>
<td>1,248</td>
</tr>
<tr>
<td>Subtotal</td>
<td>16,848</td>
</tr>
<tr>
<td>Heat/Light/Premises</td>
<td>1,560</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£18,808</strong></td>
</tr>
</tbody>
</table>
Aim 2 – Children at risk of early school leaving/non attendance
To support parents of young families who identify themselves as marginalized & socially excluded

Action 3
To develop a structure whereby parents isolated due to various circumstances are supported in their parenting.

Title
Homestart

Aims & Objectives
The aim of this project is to address the issues of social exclusion, isolation, poverty and stress by providing timely and appropriate intervention. The project seeks to access parents who are experiencing difficulty in the home due to the above factors in an effort to divert parents away from substance misuse. The long term objective is that parents will acquire coping skills in the areas of early childhood parenting, finance, home management, and increase the family’s involvement in the local community.

Proposal
Description
The project promoters have identified that there is no system in place in the Bray area for personal support to parents who are experiencing difficulty in their family home due to adverse circumstances. Homestart works as a befriending service to families at risk of breakdown, by providing positive support, friendship and practical help to families with children under the age of 5. The strength of the philosophy behind the project is that the individual attention and respect offered to parents on an individual basis, in their own home, by a volunteer, will be a confidence builder to those receiving the service. The current steering committee of this new initiative are aware of the exclusion that drug use brings to the family and aims to target this group through developing it’s networking system.

Resources Requested
Staffing - Coordinator

Linkages
The current steering committee of this new initiative has links with Health Board, schools, local General Practitioner, Bray Education Network, St Vincent de Paul, Barnardos, Bray Partnership, Gardai, St. Fergal’s Junior & Senior Schools
Monitoring & Evaluation

The project will be monitored by the Management Committee and the Coordinator and evaluated quantitatively by the number of families availing of the service, and qualitatively by the feedback from parents involved in the project.

Project Promoter

**Homestart** under the management of a steering committee comprising Health Board, Schools, General Practitioners, Bray Education Network, St Vincent de Paul, Barnardos, Bray Partnership, St Vincent de Paul, Gardai, 3 members of the target group.

Budget Requested

£10,000 (estimated total cost £48,000)

Budget Recommended

£10,000

The Bray Partnership has allocated £2,000 to the project to conduct a feasibility study. The BLDTF is of the view that this initiative has the capacity to target families affected by drugs and following the outcome of the feasibility study recommend support of the project to the sum requested as follows: -

£10,000
**Aim 4 – Children at risk of early school leaving/non attendance**
To support parents of young families who identify themselves as marginalized & socially excluded

**Action 4**
To provide in-school support to children affected by substance misuse in the home.

**Title**
School Support Project

**Aims & Objectives**
The aims of this project are to address an identified current need in schools to support children who are affected by substance misuse in the home by creating a support system for those children within the school system by fostering an ethos which will enable staff to address more precisely the developmental, social and emotional needs of children who are identified as being ‘at risk’ with the long term objective being that a more holistic approach to children within school be adopted by recognising their social and emotional needs as well as their educational needs.

**Proposal**
**Description**
The three schools involved in this initiative are schools that serve areas of disadvantage in Bray. The schools concerned have surveyed, according to the criteria of ‘children at risk’ as outlined by Lifeline, the current area of need in their schools with the following findings:

- **Ravenswell GNS** (68 children experiencing 4 or more factors, 25 experiencing 5 or more factors including factors 8 and 10 within their families).
- **St Fergal’s JNS** (71 children experiencing 4 or more factors, 25 experiencing 5 or more factors including factors 8 and 10 within their families).
- **St Fergal’s SNS** (64 children experiencing 4 or more factors, 25 experiencing 5 or more factors including factors 8 and 10 within their families). The project promoters will develop criteria according to their objectives and a profile will be prepared for each child, which will form the basis for any intervention offered. Intervention will be in the form of small group activities in a supportive environment located within the school. Both parents and child will be involved in preparing the profile that may also recommend links to other support services. Each child and parent will be involved in the management of the individual child’s project developing ownership and responsibility as well as skills in communication with support services. This project will seek to complement other services available to children at risk and not replace or duplicate them. The rationale for this approach is the recognition of the gap in mainstream education provision for at risk children that renders the system insufficiently responsive to their immediate/short term and future needs and seeks to fill this gap. The programme proposed will provide a locally based approach to children with social, emotional and education difficulties whose difficulties are related to the effects of
substance misuse in their wider families, thereby providing the resource that may be specifically, and more appropriately, focused on at risk children, to keep them within the mainstream system in familiar surroundings, while addressing their needs.

**Resources Requested**

3 project workers (one per school), budget for counselling services, set up costs for a room in each of the 3 schools, activity resources for the project, project running costs (electricity, heating, secretarial support)

**Linkages**

Bray Education Network.

**Monitoring & Evaluation**

Monitoring of the project will be the responsibility of the Management Committee, project staff, school staff and agencies involved in the project. The Principal and project worker will inform the management committee of the progress of the project. The project will be evaluated quantitatively by the numbers availing of the project and qualitatively by participants, parents and project staff. Other factors which will incorporate both monitoring and evaluation will be the visible effects of the project with the child in relation to self-esteem, relationship with peers, relationships with adults, school attendance, and behaviour in class and behaviour in the playground.

**Project Promoter**

St Philomena’s Girl’s National School, St Fergal’s Junior School, St Fergal’s Senior School.

**Budget Requested**

**£180,000**

**Budget Recommended**

£169,000

The BLDTF propose that:– with employment of suitably qualified professionals the counselling service will not be necessary; set up costs be reduced from the stated £30,000 to £24,000; that a budget for advertising for posts be included; a request be made to a fourth identified school in Bray to adopt this project; and recommends the support of the project to the above sum as follows:–

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary costs for 3 project workers including PRSI</td>
<td>75,000</td>
</tr>
<tr>
<td>Set up costs for room in each of 3 schools</td>
<td>24,000</td>
</tr>
<tr>
<td>Activity resources for the project</td>
<td>24,000</td>
</tr>
<tr>
<td>Advertising</td>
<td>5,000</td>
</tr>
<tr>
<td>Fourth identified school</td>
<td>41,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£169,000</strong></td>
</tr>
</tbody>
</table>
Aim 4 – Children at risk of early school leaving/non attendance
To address the issues which contribute to early school leaving

Action 5
To support young people at risk of early school leaving.

Title
Stay in School Project

Aims & Objectives
The aim of this project is to address the issues impinging on the school community with a view to maximising the participation of the students in the education/school cycle with the objective being that there is an increased awareness of issues facing young people (aged 12-15) at school, and, with such awareness that these issues will be addressed, thereby impacting on school dropout rates.

Proposal Description
This project is a pilot project, due to commence in January of 2002. The target group for the project are second level students between the ages of 12 to 15 attending second level schools in the Bray area. The proposal aims to address issues which impinge on young people and to support them during the early years of secondary school.

Resources Requested
Coordinator
Equipment costs
Admin costs
Programme costs
Evaluation costs

Linkages
Various second level schools in Bray, Bray Education Network

Monitoring & Evaluation
The project will be monitored by the Management Committee and evaluated in terms of the impact of the programme on the target group.
**Project Promoter**

Bray Education Network, St Kilian’s Community School, St Thomas’s Community School, St Fergal’s Junior School, St Fergal’s Senior School, St Kieran’s National School, Gardai, Bray Youth Services, Family Resource Centres, Youthreach, Homework Clubs, Social Services, Bray Partnership.

**Budget Requested**

£49,590

**Budget Recommended**

£10,000

The BLDTF recognise the value of this project and its’ potential to impact on early school leaving and propose that: the pilot phase of the project be supported with matching funding as received from Bray Partnership; that a further £5,000 be committed to this project from September to December 2002: and recommends the sum above as follows: -

- Support of pilot phase of project  5,000
- Continuation of pilot (September – December)  5,000

**Total**  10,000
Aim 1 & 3 – (Youth at risk of substance misuse)
To support the development of a drop-in service for young people who may not be attracted to structured activities
To support the expansion of the current Life Skills programmes in place in Bray

Action 6
To provide an environment which attracts young people at risk of substance misuse into a non-structured programme, which engages them with qualified youth workers.

Title
Little Bray Youth Project – “Drop-In”

Aims & Objectives
This project aims to devise structures, which will enable young people in the Little Bray area to access the benefits of information, physical activities, social education and personal development through the provision of a drop-in with the objective being that those unwilling to access structured activities will progress into structured programmes.

Proposal
Description
The various groups involved with disadvantaged young people are working together in a serious attempt to put together a cohesive youth strategy to meet the physical, emotional and social needs of these young people through a partnership approach. This project aims to attract those people living and socialising in the Little Bray area who display many of the characteristics, which identify them as being at risk of substance misuse. The goal is to engage those at risk with qualified youth workers in a non-structured environment. According to the needs of those accessing the drop-in, programmes will be developed.

Resources Requested
Equipment Costs
Programme Costs
Evaluation Costs

Linkages
As the project has been developed in a co-ordinated approach local groups and agencies working with young people in the community will be directly involved in the direction of the project to meet the needs of young people in the area. It is envisaged that the project will develop close links with other initiatives in the Bray area.
Monitoring & Evaluation

The project will be monitored by the management committee and the Youth Coordinator and will be evaluated both quantitatively, by the numbers of people accessing the programme, the progression of young people into other programmes, and qualitatively, by the effectiveness of the project itself, the perceived effectiveness by participants and one to one and group evaluation. The project will also be evaluated externally.

Project Promoter

Little Bray Family Resource Centre (Lead Agency), Little Bray Community Centre, St Peter’s Football Club, St Peter’s Homework Club, Bray Youth Services, Wicklow VEC, Bray Gardai, Bray New Directions Project.

Budget Requested

£29,400

Budget Recommended

£25,000

The project has received £90,000 over a three-year period for the employment of a Youth Coordinator and management training. The Project Promoters also submitted an application for a Life Skills project to the sum of £9,175 targeted at young people at risk of substance misuse. The BLDTF propose that:- the Life Skills request be incorporated into this applications; the drop-in facility be assisted to the sum requested; due to the nature of a non-structured drop-in programme costs be reduced; and recommends the support of this project to the above sum as follows:-

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life-Skills</td>
<td>5,000</td>
</tr>
<tr>
<td>Participation Costs (room hire, childcare, resource packs, refreshments)</td>
<td>2,000</td>
</tr>
<tr>
<td>Capacity building for youth representatives on management committee</td>
<td>2,000</td>
</tr>
<tr>
<td>Programme Costs</td>
<td>4,000</td>
</tr>
<tr>
<td>General Equipment</td>
<td>12,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£25,000</strong></td>
</tr>
</tbody>
</table>
Aim 2 & 3 – Youth at risk of substance misuse
To support efforts being made to attract young people at risk into structured activities To support the expansion of the current Life Skills programmes in place in Bray

Action 7
To provide an environment which attracts young people at risk of substance misuse into structured programmes, which engage them with qualified youth workers.

Title
Ballywaltrim Youth Development Project

Aims & Objectives
This project aims to devise structures, which will enable young people in the Ballywaltrim area to access the benefits of information, physical activities, social education and personal development with the long-term objective being that the broad range of needs of young people in the community will be met.

Proposal Description
The various groups involved with disadvantaged young people are working together in a serious attempt to put together a cohesive youth strategy to meet the physical, emotional and social needs of these young people through a partnership approach. This project aims to attract those people living and socialising in the Ballywaltrim area who display many of the characteristics, which identify them as being at risk of substance misuse. The goal is to engage those at risk with qualified youth workers in a non-structured environment. According to the needs of those accessing the drop-in, programmes will be developed to meet their needs.

Resources Requested
The Youth Work Co-Coordinator will resource the project. The Project Promoter has received agreement to house the project in the proposed new community centre in Ballywaltrim. Resources are required to run the programme to include room hire, childcare, resource packs, refreshments, programme costs, equipment costs to furnish the community centre for the drop-in, capacity building for youth representatives on the management committee and external evaluation resources.

Linkages
As the project has been developed in a co-ordinated approach local groups and agencies working with young people in the community will be directly involved in the direction of the project to meet the needs of young people in the area. It is envisaged that the project will develop close links with other initiatives in the Bray area.
Monitoring & Evaluation

The project will be monitored by the management committee and the Youth Coordinator and will be evaluated both quantitatively, by the numbers of people accessing the programme, the progression of young people into other programmes, and qualitatively, by the effectiveness of the project itself, the perceived effectiveness by participants and one to one and group evaluation. The project will also be evaluated externally.

Project Promoter
St Fergal’s Resource Centre, (Lead Agency), Ballywaltrim Community Centre, St Fergal’s Football Club, Fergal Og’s GAA Club, St Fergal’s Boxing Club, Bray Youth Services, Wicklow VEC, Bray Gardai, Bray New Directions Project.

Budget Requested
£29,400

Budget Recommended
£25,000

The project has received £90,000 over a three-year period for the employment of a Youth Coordinator and management training. The Project Promoters also submitted an application for a Life Skills project to the sum of £9,175 targeted at young people at risk of substance misuse. The BLDTF propose that:- the Life Skills request be incorporated into this applications; the programme costs be supported to the sum requested; the equipment costs be reduced significantly due to the current lack of premises for a drop-in; and recommends the support of this project to the above sum as follows:-

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life-Skills</td>
<td>5,000</td>
</tr>
<tr>
<td>Participation Costs (room hire, childcare, resource packs, refreshments)</td>
<td>2,000</td>
</tr>
<tr>
<td>Capacity building for youth representatives on management committee</td>
<td>2,000</td>
</tr>
<tr>
<td>Equipment Costs</td>
<td>4,000</td>
</tr>
<tr>
<td>Programme Costs</td>
<td>12,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£25,000</strong></td>
</tr>
</tbody>
</table>
Aim 2 – Youth at risk of substance misuse
To support efforts being made to attract young people at risk into structured activities

Action 8
To support the strengths of vulnerable children by developing schemes that reward and support them, thereby attracting them to structured mainstream activities.

Title
St Fergal’s AFC

Aims & Objectives
The aims of this project are to offer activities to disadvantaged young people that provide respite from their day-to-day environment, where they can participate in sporting competitions outside their immediate environment. By organising Field trips as a reward for their ongoing participation in the clubs activities the aim is to keep them involved when outside pressures are tempting. The project aims to offer 10-13 year olds trips to adventure parks and sporting fixtures and offer those aged 13 and upwards trips to sporting fixtures. The objectives of the project are to continue to involve young people in the clubs activities with a view to supporting them to access sports training, so that they can in turn mentor the young club members, to nurture a feeling of self esteem as a result of their participation in the clubs activities, to provide an enjoyable and rewarding alternative to the young people exposed to the temptation through peer pressure to participate in anti-social behaviour, drug and alcohol misuse, to use their involvement with the activities to broaden the horizon of the young people and to provide positive mentoring and role models for those who lack parental support and/or encouragement.

Proposal
Description
St Fergal’s schoolboys football club was established in Ballywaltrim parish in 1979. The club caters for 200 young people with a waiting list of over 60. The majority of the disadvantaged young people, which this club caters for, come from designated areas of disadvantage. The club offers sporting and social activities for disadvantaged young people from this area.

The specific proposal aims attract young people in the Ballywaltrim community who are most at risk of becoming involved in drugs, alcohol misuse. The club has identified those most at risk between the ages of 10 and 18 who are currently experiencing the pull to drop out of training sessions and other activities. This proposal aims to offer an incentive for those young people to remain in the club, thereby providing opportunities for those people to have the same social activities as members of the more affluent clubs which would lend itself to equal opportunities and shared experiences. The
positive effect of planned trips and activities as a reward for continued attendance would also serve as encouragement for younger members to see this as a future goal. This proposal also aims to entice those who have dropped out of the club and currently displaying at risk behaviour, back into the club.

**Resources Requested**
Volunteers in the club will run this scheme. Resources required are in the form of costs for trips.

**Linkages**
Ballywaltrim Recreational Facilities Committee, Ballywaltrim Youth Development Project, Bray New Directions, Bray Partnership.

**Monitoring & Evaluation**
The project will be monitored the management committee of the football club and will be evaluated both quantitatively by an ongoing review of the programme and the numbers of young people accessing the programme, and qualitatively by basing with parents on the perceived benefits of the project for their children. The project will also be evaluated externally.

**Project Promoter**
St Fergal’s AFC

**Budget Requested**
£19,290 (total cost of project £20,790 - £1,500 fundraising by Club)

**Budget Recommended**
£19,290

The Project Promoters have been serving the Ballywaltrim community for many years and is a local soccer club, which has contributed to the development of youth in this area of disadvantage. The BLDTF propose that this project be supported and that a sum of £2,000 be allocated to volunteer support as opposed to the evaluation cost and recommends support of the above to the sum requested as follows:-.

| Field Trips (Juniors)     | 10,348 |
| Field Trips (Seniors)     | 8,442  |
| Volunteer support         | 2,000  |

| Less fund-raising sum     | 1,500  |
| **Total**                 | **£19,290** |
Aim 1 – Drug Education
To seek to establish closer links with all schools in the Bray area, both at primary and secondary level, and to develop links with ECAHB Education Officer and SPHE Co-ordinator, so as to deliver a coordinated drug education programme in schools.

Action 9

Provide a coordinated approach to drug education in schools in the Bray area aimed at 6th class primary schools initially with a development policy to extend the programme to second level schools, which would complement the work that is being done in the area of drugs by SPHE.

Title
Drug Education Workers

Aims & Objectives

The aims of the project are to increase the participant’s awareness of drugs and related issues, to encourage the participants to make informed decisions, to discuss self-esteem amongst participants, and to highlight the need for Drug Awareness Education. The objectives of the project are to assess the participants knowledge of drugs and related issues, to correct any misinformation about drugs, to look at drugs and related issues within participants’ peer group, to explore choices, risks and consequences of drug use, to challenge the attitude and behaviour of participants, to include parents and consequently raise their level of awareness of drug related issues and to maintain community focus in delivery of the programme.

Proposal

Description
This drug education model was used in the Finglas area in 19 primary schools and positively independently evaluated. The programme operates within the primary school setting over a period of seven weeks with one session a week per group lasting one hour and fifteen minutes. A team comprising two facilitators delivers the programme. The team should be kept constant throughout the duration of the seven weeks. This project focuses on the target group by going into schools/groups and delivering the programme directly to the target group. This programme requires the full co-operation of: the schools as well as parents as parental consent is a prerequisite. The programme has been successfully piloted in 4 schools in the Bray area with increased interest from other schools.

Resources Requested
Full-time and part-time education worker/resources Bray Drugs Awareness Week
Linkages
There is no such initiative in the Bray area other than the above pilot. Through the work of the Bray Drugs Awareness Forum there is a positive relationship between schools in the Bray area and the Project Promoters.

Monitoring & Evaluation
An Advisory Committee comprised of representatives of Bray Youth Service, Bray Drugs Awareness Forum and Bray Local Drugs Task Force will monitor the project. The project will be evaluated both quantitatively by the number of schools taking up the programme, the number of groups participating, the number of parents accessing workshops and qualitatively by feedback from course participants.

Project Promoter
Bray Youth Services

Budget Requested
£68,700

Budget Recommended
£68,700

This project will provide a coordinated response to drug education in schools and will complement SPHE programmes being run in schools and will also link with the work of the ECAHB Education Officers. The BLDTF recommends support of this project to the sum requested as follows: -

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time Education Worker &amp; Part-time Education Worker</td>
<td>60,000</td>
</tr>
<tr>
<td>Running costs (to include Bray Drugs Awareness Week)</td>
<td>8,700</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£68,700</strong></td>
</tr>
</tbody>
</table>
Aim 2 – Drug Education
To encourage members of the community, particularly those working with young people and those in direct contact with people experiencing difficulty with drugs to undertake the Certificate in Addiction Studies.

Action 10
To develop community awareness of drugs and drug related issues.

Title
N.U.I. Certificate in Addiction Studies

Aims & Objectives
The aim of this project is to increase the knowledge of addiction to communities with the long-term objective being that there is a pool of people in the area who can contribute to community initiatives relating to drug related matters.

Proposal
The Education & Prevention sub committee wish to support people in the community to participate in this course, which is an NUI certified course.

Linkages
East Coast Area Health Board Education Officers

Monitoring & Evaluation
The monitoring and evaluation of the course itself is carried out by the course deliverers. The BLDTF will evaluate its’ support of the initiative in terms of the input back into the community of course participants.

Project Promoter
Education & Prevention sub-group

Budget Requested
£4,000

Budget Recommended
£4,000 as follows:-

10 people at £400 per-person £4000
Section 10

Treatment & Rehabilitation

Map of Proposed Drug Services in Bray

Level One: Community Treatment and Stabilising Services

<table>
<thead>
<tr>
<th>STRAND ROAD, LITTLE BRAY AND BALLYWALTRIM COMMUNITY CLINICS</th>
<th>NEEDLE EXCHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Medical management of addiction including prescribing for methadone treatment programmes</td>
<td></td>
</tr>
<tr>
<td>□ Nursing service</td>
<td></td>
</tr>
<tr>
<td>□ Viral screening and vaccination a Liaison with central and other Community Health Service, Psychiatric Services and local General Practitioners</td>
<td></td>
</tr>
<tr>
<td>□ Liaison with local community via Project Committee</td>
<td></td>
</tr>
<tr>
<td>□ Facilitation of clients by Project Committee members</td>
<td></td>
</tr>
<tr>
<td>□ Drop-In</td>
<td></td>
</tr>
<tr>
<td>□ Counselling</td>
<td></td>
</tr>
</tbody>
</table>

Level Two: Advice and Information, Counselling and 1st Stage of Rehabilitation

PROPOSED COUNSELLING, INFORMATION, AND REHABILITATION CENTRE

<table>
<thead>
<tr>
<th>Advice and information for drug users and their families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselling for both users and members of their families</td>
</tr>
<tr>
<td>A full range of family support services</td>
</tr>
<tr>
<td>Creche facility</td>
</tr>
<tr>
<td>Drop-In facility</td>
</tr>
<tr>
<td>Rehabilitation programmes including</td>
</tr>
<tr>
<td>- Basic and further education both on and off site</td>
</tr>
<tr>
<td>- Range of counselling and alternative therapies</td>
</tr>
<tr>
<td>- Personal development options</td>
</tr>
<tr>
<td>- Sporting and recreational activities including ‘Alternative Highs’</td>
</tr>
</tbody>
</table>

Level Three: 2nd Stage of Rehabilitation: Mainstreaming

<table>
<thead>
<tr>
<th>FAS Linked to the rehabilitation centre with</th>
<th>VEC Linked to the rehabilitation centre with</th>
<th>LES Linked to the rehabilitation centre with</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Mentor</td>
<td>□ Mentor</td>
<td>□ Mentor</td>
</tr>
<tr>
<td>□ Integration with existing services</td>
<td>□ Eligibility for continued CE or VTOS funding</td>
<td>□ Integration into paid employment</td>
</tr>
</tbody>
</table>

(Brady, C et al: 1999: 31)
10.1 Level One: Community Treatment and Stabilising Services

Introduction

The work of the Treatment & Rehabilitation sub-group of the Bray Local Drugs Task Force is informed by the above-proposed strategy, as recommended in “Towards a Drugs Service Development Plan/or Bray” (Brady, C et al: 1999:31).

For the purpose of clarity, the Treatment & Rehabilitation sub-group focused on Treatment issues in one sub-group and on Rehabilitation issues in another group. The intention was not to treat both areas as separate but to give due time to each area. The same chairperson chairs both meetings, with feedback to and from each group a priority. Both sub-groups have had one joint meeting to date and plan in the future to have joint meetings every other month.

In response to the strategy proposed as above, the Treatment sub-group prioritised its’ aims and objectives in relation to Level One: Community Treatment and Stabilising Services as follows:–

1. To encourage the reduction of harm associated with intravenous drug use.
2. To encourage easy access to service provision.
3. To encourage a continuum of care amongst health care service providers.

With the overall objective being:–

To provide a holistic approach to the individual in treatment, thereby encouraging a progression route, while at the same time, being aware of the need for harm reduction measures.

**Summary of Actions Recommended to Achieve Aims and Objectives**

<table>
<thead>
<tr>
<th>Harm Reduction</th>
<th>Aim 1</th>
<th>Action 11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Easy Access to Service Provision</td>
<td>Aim 2</td>
<td>Action 12</td>
</tr>
<tr>
<td>Continuum of Care</td>
<td>Aim 3</td>
<td>Action 13</td>
</tr>
</tbody>
</table>
Aim 1 – Harm Reduction
To encourage the provision of open access needle exchange

**Action 11**
Encourage the provision of open access needle exchange.

**Title**
Open Access Needle Exchange

**Aims & Objectives**
The aim of this proposal is to support the provision of a service which will reduce the risk associated with intravenous drug use, with the long-term objective being to assist people remain infection free.

**Proposal**
The BLDTF support the provision of open access needle exchange with the knowledge of the risk involved in needle sharing to the intravenous drug user.

**Linkages**
East Coast Area Health Board.

**Monitoring & Evaluation**
Not applicable.

**Project Promoter**
East Coast Area Health Board & Bray Local Drugs Task Force.

**Budget Requested**
Not applicable.

**Budget Recommended**
Not applicable.
Aim 2 – Improving accessibility to service provision
To encourage the setting up of a treatment centre for Bray

Action 12

Encourage the setting up of a treatment centre

Title
Treatment Centre

Aims & Objectives
The aim of this proposal is to provide a more holistic service provision to those attending treatment, where services such as methadone prescribing, viral screening and vaccination, welfare services and counselling are provided under the one roof with the objective being that for those on treatment access to a variety of services can be provided.

Proposal
The Treatment sub-group and ECAHB service providers are aware that due to the numbers of people on treatment in satellite clinics, that a treatment centre is needed. The setting up of a treatment centre would ensure easy access to other services such as counselling, community welfare officer etc., thereby providing more than methadone.

The East Coast: Area Health Board are aware of this recommendation.

Linkages
East Coast Area Health Board

Monitoring & Evaluation
Not applicable

Project Promoter
Treatment Sub Group & East Coast Area Health Board

Budget Requested
Not applicable.

Budget Recommended
Not applicable.
Aim 3 – To encourage a continuum of care amongst health care providers
To endeavour to create a coordinated approach amongst health care professionals in Bray to the treatment of drug users

Action 13
To encourage a co-ordinated approach to those experiencing difficulty with drugs by liaising with Community Health Services, Psychiatric Services and local General Practitioners and to develop a protocol for those in contact with drug users

Title
Developing Service Provider Protocol

Aims & Objectives
The aim of this proposal is to encourage co-ordination amongst service providers to ensure that there is a continuum of care for those on methadone maintenance. The long-term objective is that service users will not receive mixed messages from different service providers and that overlapping does not occur due to lack of clarity.

Proposal
The Treatment sub-group are aware of difficulties experienced by people on methadone maintenance, who also present to other services other than the AIDS/Drugs Service, and the unavailability of methadone maintenance in the instance of inpatient facilities. The Treatment Sub Group aims to meet with all service providers to develop a protocol around the treatment of common clients.

Linkages
Psychiatric Services, Mental Health Services, General Practitioners, General Hospitals, East Coast Area Health Board

Monitoring & Evaluation
Not applicable

Project Promoter
Treatment Sub Group & East Coast Area Health Board

Budget Requested
Not applicable

Budget Recommended
Not applicable
10.2 Level Two: Advice and Information, Counselling and 1st Stage of Rehabilitation

Introduction

In response to the aforementioned proposed strategy, the Rehabilitation sub-group, being aware of the lack of resources in the Bray area to fill this gap between stabilisation services and integration into the community, identified its aims and objectives as follows: -

Services for Drug Users

1. To develop a service which provides a drop-in facility for people in difficulty with drugs and/or those currently on treatment.
2. To develop the role of counselling for drug users.
3. To develop a service which provides information and advice for drug users.
4. To develop a service, which recognises culture and gender, issues as barriers to access.
5. To develop a service which takes into account the cyclical nature of addiction and supports a range of initiatives which cater for drug users at various stages of their drug use.
6. To develop a service which links in to programmes aimed at the reintegration of drug users into mainstream society.

Services for Families of Drug Users

1. To develop the role of counselling for the families of drug users.
2. To develop a services which provides information and advice for the families of drug users.
3. To develop a service which provides a range of family support services.

Services for the Community

1. To develop a service, which addresses the needs of the community taking into account the causal link between heroin misuse and poverty.
2. To develop a service which encourages community capacity building and growth.
3. To develop a service which pays due attention to the effects of dings misuse in the community.
With the overall aim being that the those affected by drug misuse, either their own or another’s, are assisted through the process of recovery and encouraged to participate in mainstream society.

Summary of Actions Recommended to Achieve Aims and Objectives

<table>
<thead>
<tr>
<th>Services to Drug Users</th>
<th>Aim 1,2,3,4,5,6</th>
<th>Action 13, 14,15, 17,19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services to the Families of Drug Users</td>
<td>Aim 1,2,3</td>
<td>Action 13, 14,16, 17,18</td>
</tr>
<tr>
<td>Services to the Community</td>
<td>Aim 1,2,3</td>
<td>Action 13, 14, 15,17,18</td>
</tr>
</tbody>
</table>
**Overall Aim** – To address the gap in service provision at the 1st stage of the rehabilitation process

<table>
<thead>
<tr>
<th>Services for Drug Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services for Families of Drug Users</td>
</tr>
<tr>
<td>Services for the Community</td>
</tr>
</tbody>
</table>

**Action 14**

To develop a service which provides a mechanism of progression from stabilisation services to reintegration into mainstream society.

**Title**

Bray Community Drug Team

**Aims & Objectives**

a. Develop services for drug users  
b. Develop services for the families of drug users  
c. Develop community based drug education & prevention initiatives by providing

**For drug users:**

- Non-judgemental Drop-In  
- Day Services (in conjunction with ECAHB)  
- Health Promotion (in conjunction with ECAHB)  
- Prison Liaison  
- Home Visits - (to cater for those of ill health, transport difficulties)  
- One-to-one support

**For families:**

- Drop in for families of drug users (1:1 support)  
- Family support (both individual and group)  
- Siblings Project - to cater for die siblings of drug users

**For the community:**

- Education - developing & co facilitating school programmes  
- Developing and facilitating community based programmes  
- Developing and facilitating drug education programmes for parents and drug awareness programmes for the community
• Ensure the community has up to date information and resources in relation to all aspects of drug use, family support, education and prevention initiatives - latest research in the addiction field, publications, magazines etc
• Peer education - train young people to educate their peers
• Creating a positive profile of the CDT in the community

Proposal
Description

The BLDTF, in conjunction with various disciplines in the ECAHB, propose the Community Drug Team model to address gaps in service provision. As stated in the area profile, Bray is a town with areas of extreme social and economic disadvantage. The two areas displaying high levels of social and economic disadvantage as outlined earlier in the Area Profile are Little Bray and Ballywaltrim and both of these areas display high levels of illegal drug use, as demonstrated by numbers attending satellite clinics. Whereas both of these areas display similar characteristics, historically, these communities are segregated from each other, and from the town of Bray. Both of these areas have developed their own culture and identity, and, in line with the similarities-and divisions that exist, both a similar and different response to each of these communities is necessary. The similar response that is needed in each community is the provision of a service to the communities affected by the drugs issue, in their own area, which addresses the similar needs in relation to the effects of drugs on the individual and the family. Where the response differs is the identification of the needs of the community, the culture of the community and drawing on the different strengths of both communities to address these needs.

Therefore, while being aware of the similarities that exist, the BLDTF respects the differences that exist and the right of each community to direct service provision. To this end, direct service delivery in the form of premises, and staff is recommended. Throughout the consultation process, it was clear that such a structure is a prerequisite to addressing the needs of each community.

In respecting the dissimilarities in both communities, however, the BLDTF proposes that an integrated response can be delivered in both communities, which would not reinforce the divisions that already exist. With one management structure comprising of representatives from both areas of the town, one Manager for the CDT and the sharing of resources in terms of Probation & Welfare, Counselling, Outdoor Pursuits and Family support, the BLDTF proposes that needs can be addressed in both communities and at the same time, that sharing of resources in terms of Management, staff and activities will be effective in providing an integrated response.

This proposal recommends tile setting up of a Bray Community Drug Team, under the one Management Committee comprising of Statutory Representatives and Representatives from the two areas affected by drugs misuse, and one Manager, with the direct service to both areas, not to exclude the Centre of the town, to include a premises for direct access, along with skilled professionals in the area of drugs and drug addiction in the form of a Senior Project Worker for each area with a specific
responsibility for capacity building in the community and promoting the work of the CDT, and two project workers for each area, to be specified according to the needs of each of the communities but with the expectation that both workers in each area will be required to develop and deliver services for drug users and their families. In the area of family support, throughout the application process the services of Barnardos have been negotiated with the expectation that they will provide a range of family support services to both communities. In the area of counselling, throughout the application process the services of the ECAHB have been negotiated with the expectation that they will provide counselling services to both communities. In the area of leisure and outdoor pursuits, throughout the application process the services of Bray Youth services have been negotiated with the expectation being that they will provide ‘alternative high’ services to both communities. The overall proposal is outlined hereunder: -

**Aim 1**

To work with local drug users and their families using a community development approach to provide quality professional services to ideally lead towards a drug free lifestyle, while at the same time creating an environment of acceptance and respect for those you are unable to achieve a drug free lifestyle.

**Objective:**

- Establish and maintain links with those providing medical treatment for service users
- Provide a caring environment where service users can identify the supports they require and deal with their presenting needs
- Provide groupwork for service users to develop an understanding of their addiction
- Provide access to addiction counselling for service users (through the ECAHB)
- Provide recreational facilities for service users (through networking with Outward Bound services)
- Provide ongoing support and encouragement to service users in dealing with their addiction
- Set up and maintain family support groups
- Provide quality professional and experiential skills within all services being developed and provided
Aim 2

To maintain a management structure that is committed to the work and open to further evaluation, development and planning

Objective:

☐ To ensure that suitable medical treatment is delivered to clients by appropriate bodies. Set up and maintain links with medical treatment and the Community Drug Team
☐ To develop and maintain links with community, voluntary and statutory groups locally
☐ Be informed on all drug issues and identify suitable training for the management committee
☐ Keep good professional and appropriate working relationships with service users and staff. The coordinator will report to the management committee on the progress of CDT activities and services.
☐ Develop a forum whereby staff can meet with the management team to develop ways the project can further meet the needs of clients and their families
☐ The management will provide support for each other in the work of the group
☐ Support other appropriate groups and areas dealing with drug issues with the experience gained by the management committee
☐ Provide ongoing facilitation/review of he work of the management committee

Aim 3

To provide information to the wider community on the work and be open to further evaluation, development and planning

Objective:

☐ To create awareness in the community on services offered by CDT
☐ Identify gaps in drug education in local schools and in the wider community and ensure appropriate education programmes are provided
☐ Provide a help-line for those seeking referral
☐ Use local and national media outlets to give accurate and positive information on the work of the CDT
☐ Use personal contact with local people to promote the work of the CDT
☐ Arrange seminars and workshops in the CDT area on drug related issues that affect people in the area.
Aim 4

To network locally and nationally on drug issues that affects the area

Objective:

- The CDT will be represented on relevant committees
- The CDT will affiliate with the appropriate networking organisations
- The Management Committee to campaign and lobby on issues relevant to the work and ethos of the CDT.

Resources Requested

Premises, Staffing, Set up costs, running costs, programme costs

Linkages

Links have been established between community representatives in the 2 designated areas of disadvantage, ECAHB satellite clinics, ECAHB counselling service, ECAHB proposed rehabilitation service, Probation & Welfare Services, Barnardos.

Monitoring & Evaluation

The project will be monitored by a Management Committee comprising of community and statutory representatives in conjunction with the Manager and will be evaluated quantitatively by the numbers accessing the service and qualitatively by the experience of those accessing the service and those referring service users to the facility. The project will be evaluated externally on an ongoing basis, by an evaluator who will evaluate all projects recommended by the Rehabilitation sub-group and the BLDTF.

Project Promoter

Rehabilitation Sub-Group, BLDTF, ECAHB, Ballywaltrim Drugs Project.

Budget Requested

£548,026

Budget Recommended

The BLDTF recommends funding of the above project to the sum requested, taking into consideration ECAHB salary scales, overleaf:-
Manager x 1 £35,000.00
Administrator/Secretary x 1 £20,000.00
Senior Project Worker x 2 £60,000.00
Project Workers x 4 £100,000.00
Prison Links Worker x 1 £35,000.00

£245,000.00
PRSI Contributions £29,400.00

£29,400.00

£279,400.00

Shared Resources
Family Support Worker x 2 (Barnardos) £80,000.00
Ballywaltrim Drugs Project £2,800.00
Outdoor Pursuits (Bray Youth Services) £8,826.00
Counselling (ECAHB) £Nil

£91,926.00

Setup & Running Costs
Premises x 2 £50,000.00
Set up costs x 2 £60,000.00
Running costs x 2 £30,000.00
Programme costs x 2 £30,000.00
Management Training £2,000.00
Recruitment £5,000.00

£177,000.00

Total Cost £548,026.00
Aim 2 – Services to Drug Users
To develop a service, which recognises culture and gender issues as barriers to access.

Action 15
Support marginalized groups to address drug related issues.

Title
“DAISH”

Aims & Objectives
The aim of this proposal is to provide a positive response to the misuse of illegal drugs among the young Traveller population, and their families, through education programmes to ensure that children have the necessary knowledge to resist drugs, and for those who are using drugs and their families to have the necessary links to treatment and rehabilitation programmes with the objective being that this marginalized group are targeted to address their needs with due consideration to the cultural barriers which may exist for access to information, treatment and rehabilitation.

Proposal Description
This proposal aims to address the marginalized group of young travellers in Bray. Young travellers are a high-risk element within society with school non-attendance/early school leaving and literacy and numeracy commonplace among the Travelling community. These same factors place an already marginalized group at greater risk of being further marginalized through the use of illegal drugs. Within the Travelling community the drugs issue has been hidden but lobby groups such as Pavee Point have been at pains to raise awareness of the issue. This proposal aims to address these issues while at the same time recognising that the travelling community is a marginalized ethnic minority whose lifestyle can be valued and are best understood and addressed within their own cultural group setting.

This proposal seeks, to employ a Youth Development worker and a Peer Support worker to reach young traveller drug misusers who are not in contact with existing services in order to reduce the risk associated with drug misuse, establish programmes for these young people and support the families of those living with drug users and to refer drug users into treatment. The proposal aims to contact this hard to reach group through the Peer support worker working alongside the Youth Development worker.

Resources Requested
Youth Development Worker
Peer Support Worker
Programme Costs
Family Support Costs
Administration Costs

Linkages
There is no such service in the Bray area. Linkages with Exchange House, Pavee Point, Clondalkin Traveller Group, Bray community and voluntary groups, Home visiting teacher, Public Health Nurse

Monitoring & Evaluation
This project will be monitored by the Bray Travellers Development Network Management Board and evaluated quantitatively by the numbers accessing the provision of these services and qualitatively by the experience of those accessing the service and service providers.

Project Promoter
Bray Travellers Development Network

Budget Requested
£78,100

Budget Recommended
£78,100

The BLDTF proposes the funding of the above proposal to the sum requested as follows:-

Youth Development Worker 23,580
Peer Support Worker 12,810
Programme Costs 22,300
Administration 6,090
Family Support 5,200
Training & Development 8,120
Total £78,100
Aim 2 – Services to Families of Drug Users
To develop a service, provides a range of family support services.

Action 16
Provide access, to services for those who may not access mainstream services

Title
W.O.M.E.N.

Aims & Objectives
The Bray & North Wicklow Women’s Network aim to bridge marginalization through the provision of education opportunities. The aim of this specific project is to provide a more effective programme through assessing the individual needs of the families of drug users and responding accordingly. It is proposed that a programme of Education and Training for the target group will raise the awareness of related issues and have a knock-on effect of behaviour within the home and wider community. Through support to parents, and by giving them a choice of the supports they need, they will realise that addictions are a global problem and not just within their homes, with ample training it is hoped that some will become trainers within their communities.

Proposal

Description
This project aims to target parents, particularly mothers, of drug users. Through their current work, the project promoters believe that there is a wide group of parents who are not availing of services, and are prone to substance misuse themselves, in particular alcohol and prescribed drugs. Through counselling, alternative therapies and educational work, the project aims to maximise the potential of the mother/female in the home.

Resources Requested
The project requires the employment of a part-time co-ordinator, a Training grant for management,

Counselling costs, Alternative Therapies costs, Training and Education Fees, Evaluation, Networking, Insurance and overheads

Linkages
Community groups in Bray, existing support groups, ECAHB Addiction Counsellor, St Vincent de Paul.
Monitoring & Evaluation

The project will be monitored by a steering group on a weekly basis and will be evaluated by an external evaluator.

Project Promoter

Bray & North Wicklow Women’s Network

Budget Requested

£61,520

Budget Recommended

£17,200

The BLDTF wish to support this initiative and proposes that: the project be supported in terms of Management Training, Counselling & Alternative Therapies & Training & Education to half the sum requested with an evaluation to be carried out on that work to assess the need for the service by evaluation mechanisms put in place by BLDTF; and recommends the funding of the project to the sum above as follows:-

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselling</td>
<td>7,000</td>
</tr>
<tr>
<td>Alternative/Holistic Fes</td>
<td>1,500</td>
</tr>
<tr>
<td>Training &amp; Education</td>
<td>5,500</td>
</tr>
<tr>
<td>Childcare</td>
<td>1,200</td>
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<tr>
<td>Admin Costs</td>
<td>2,000</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>£17,200</strong></td>
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Aim 2 – Services to Drug Users/Families of Drug Users
To develop a service, provides a range of family support services.

Action 17
To provide a range of family support services

Title
Living Life Centre – Family and Individual support

Aims & Objectives
The aim of this proposal is to provide a service to drug users in recovery and to their families with the objective being that those who are experiencing difficulty with drugs other than heroin can access confidential services

Proposal
Description
The aim of this proposal is to address the needs of a target group to exclude those currently on methadone maintenance. This target group are those whose lives are affected by the use of other illegal drugs to include underage drinking, with the recognition that the misuse of all drugs can cause harm to the individual and family, thereby requiring intervention. This proposal aims to provide a drug free alternative to those affected by their own drug use and to offer family support to the families of drug users.

Resources Requested
Counselling

Linkages
Linkages have been made and various mechanisms of referral built up through, this organisations’ past work in the Bray area.

Monitoring & Evaluation
The project will be monitored by the Management Committee of the Living Life Centre and will be evaluated quantitatively by the numbers accessing the service. The BLDTF recommends that the BLDTF evaluate this project.

Project Promoter
Living Life Centre
Budget Requested
£20,000

Budget Recommended
£20,000

The BLDTF proposes that the above project be supported and recommends that: evaluation be carried out by external evaluation of BLDTF funded projects; BLDTF receive confirmation of training and accreditation of counsellors; links be made between this proposal and Action 18; and recommends that support of the above project to the sum requested as follows:-

| Counselling hours | £20,000 |
Aim 3 – Services to the wider community
To provide choice to young people to access counselling through a mechanism of school referral

Action 18
Provide choice in service provision for access to counselling services to vulnerable target groups, in particular young people engaged in recreational drug use and/or using illicit substances to include underage drinking

Title
Counselling

Aims & Objectives
The aim of this project is to put in place a mechanism whereby students, both at secondary and post leaving cert level have access to professional counselling as the need arises with the long term objective being that school goers and adults who have difficulty with drugs, either their own drug use or somebody else’s have the opportunity to address these problems early on in the process.

Proposal
Description
The Rehabilitation sub-group has identified this gap in service provision, both through applications received from the educational sector and from the research document referred to in this report. The sub-group wishes to initiate a response to this by eliciting the expertise of accredited counsellors in the area. The sub-group are aware that those in difficulty due to drug related issues may not access mainstream services due to issues of confidentiality and being associated with a drug project. The sub group therefore wishes to invite applicants from the Bray area to offer their services to this particular target group.

Resources Requested
The services of local counsellors in Bray who have accreditation by a recognised counselling body, and in particular in the area of addiction.

Linkages
Schools in Bray/Local Counsellors

Monitoring & Evaluation
The Rehabilitation sub-group and the Bray Drug Task Force coordinator will monitor this project. The project will be evaluated both quantitatively by the numbers accessing this service and quantitatively by the access to Supervisor’s reports on the service being provided. Due to confidentiality, the benefits to clients may not be elicited.

**Project Promoter**

Bray Drugs Task Force Rehabilitation Sub-Group

**Budget Requested**

£25,000

**Budget Recommended**

£25,000

The BLDTF proposes the support of the above project to the sum recommended as follows:-

| 600 hours of counselling | £25,000 |
Aim 1 – Services to Drug Users
To provide a range of alternatives to those attempting to become drug free

Action 19

To provide the opportunity to those wishing to enter a drug free rehabilitation programme.

Title
Drug Free Rehabilitation

Aims & Objectives

The aim of this proposal is to provide a broad range of services for those who are trying to achieve a drug free lifestyle with the long-term objective being that opportunities are provided to people to access a drug free programme should they require it.

Proposal
Description

The Rehabilitation sub-group recommend that the opportunity is given to people to access residential programmes targeted at those who wish to become drug free. As this service is not available in Bray itself, the sub-group wish to assess programmes in place in different locations and negotiate the access of Bray residents on to these programmes. The sub group recognises, in this proposal, that there is a gap in service provision in relation to addiction to other illegal drugs, other than heroin. This facility will provide access to those experiencing difficulty with other illegal substances the opportunity to address their addiction to that substance. It is also envisaged that those who wish to become methadone free will also avail of this service.

Resources Required
Access to various Rehabilitation Centres

Linkages
Various Rehabilitation Programmes

Monitoring & Evaluation

The Rehabilitation sub-group in conjunction with the coordinator will monitor the use of this facility. The project will be evaluated in terms of the numbers of people wishing to gain access to this facility and by their experience of this facility.

Project Promoter
Rehabilitation sub-group & BLDTF
Budget Requested

£50,000

Budget Recommended

£50,000
Supply Control

Aim 1 – Services to Drug Users
To put in place mechanisms to reduce supply by reducing demand

Action 20
To put in operation a proactive Garda referral mechanism which will encourage those arrested for drug related charges to seek help.

Title
Garda Referral Scheme

Aims & Objectives
The aim of this proposal is to provide a mechanism whereby those arrested by Gardai for drug related offences are referred proactively to drug agencies thereby creating an opportunity for change.

Proposal Description
The Supply Control sub-group are aware that many suspected drug misusers who come into contact with the Gardai do not avail of drug services of their own free will. To this end, the sub-group have studied Arrest Referral Schemes which operate successfully in the UK and are now considered so successful that all Police Stations in the UK are required to run such schemes. The type of scheme run in the UK would require legislation change in Ireland.

However, the sub-group wishes to be proactive and propose that a Garda Referral scheme be put in operation whereby a person arrested for a drug related offence will sign a form which will give consent to be contacted by a drugs agency - most likely the Community Drug Team.

Resources Required
Garda Training on Referral Scheme

Linkages
Gardai

Monitoring & Evaluation
The Supply control sub-group in conjunction with the BLDTF co-ordinator will monitor this project.
Project Promoter
Supply Control Sub-Group and BLDTF

Budget Requested
£5,000

Budget Recommended
£5,000
Section 12

Evaluation & Research

The BLDTF propose that all start-up projects be evaluated by an external evaluator to be appointed by the BLDTF and recommends that a sum of £20,000 be allocated to this end.

£20,000

The BLDTF propose that research be conducted to assess the needs in Bray as projects begin to commence and recommend that a sum of £10,000 be allocated to this end.

£10,000
The BLDTF recognises that needs will change as the aforementioned proposals develop and wish to allocate the following sum of money for start up projects which may occur during the process of the implementation of this plan, as follows:

| Seed Funding       | £30,000 |