

Drugs Unplugged



Facing the reality of drug abuse in Cork City

**The results of research carried out by the
Community Outreach Drugs Awareness Project**

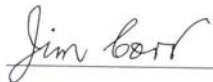
October, 1999

Foreword

The Cork City Local Drugs Task Force and Comhar Chathair Chorcaí Teo welcome the publication of this research. This research, which is one of the first of its kind in Ireland where young people have planned, implemented and produced research into the drugs problem, is a reflection of the community based approach being used in Cork by statutory agencies and non-governmental organisations. The original development of the Project comes directly from an imaginative strategy devised by the Community Forum of Comhar Chathair Chorcaí Teo and its Drugs Working Group, in partnership with the Cork Community Development Institute. This strategy sought to involve young people in providing the wider community with an understanding of the drug issue. The Project is funded by the Cork Local Drugs Task Force and FAS. Ogra Chorcaí generously sponsored the Special Community Employment Project. All those involved deserve to be congratulated for their support of this unique undertaking.

The report clearly identifies the prevalence of drug use among young people in Cork and suggests some measures, which could be taken to tackle the problem. These include the importance of adequate treatment provision such as residential and community services to provide direct assistance, to young people and parents. It also suggests that many schools and sports and youth organisations must examine current attitudes, which hinder young people using their services.

This report provides a valuable contribution to our understanding of the drug issue in Cork. It is a tremendous reflection on the commitment and determination of the young people involved who have completed this study. We believe that readers of the report will be rewarded by encountering a challenging perspective from young people on the drug issue.



Ald. Jim Corr, Chairman.
Cork Local Drugs Task Force



Mr. John O'Callaghan, Chairman.
Comhar Cathair Chorcaí Teo

Acknowledgement

We would like to sincerely thank the young people who gave their time in filling out our questionnaire and those who spoke to us in the discussion groups. Our sincere thanks also to the following;

- The staff in the youth centres and the other agencies who gave their time and expertise;
- Our sponsor Ogra Chorcaí for their administrative support;
- FAS and the Cork City Local Drug Task Force for their financial support;
- The Drugs Working Group of the Comhar Chathair Chorcaí Teo Community Forum and the Cork Community Development Institute for instigating and developing this research project;
- The staff and directors of Comhar Chathair Chorcaí Teo for providing us with office facilities and their daily encouragement and support.

Research Team

Patty O'Brien (CE Scheme Supervisor)

Donal Guerin (Research Co-ordinator)

Jason McCarthy

Avril Waters

Christine Holland

Jennifer Holland

Denise Corcoran

Rebecca O'Shea

Tammy Kavanagh

Elizabeth Blake

Louise Blake

Caroline Heaney

Evelyn Heaney

Gillian Walsh

Mary O'Flynn

Danielle Harris

Theresa O'Sullivan

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Summary of findings

The following is a summary of some of our main findings and ideas for tackling the drug problem in Cork City. In this report we have tried to give an overall picture of young people's perceptions of: school, facilities in their area, employment opportunities and their attitudes to drugs as well as the different types of drugs they use, where they use them and why.

Local Facilities

- The views of a large number of young people that we spoke to and surveyed were that there was not an adequate level of facilities for young people;
- A related issue raised by a small number of respondents were difficulties they faced in being allowed to use youth and sports clubs;
- Other issues raised by young people we spoke to and surveyed were the lack of amenities such as phones and bank link machines.

Schools

- The majority of young people we came in contact with were still attending school and spoke about their experiences of the educational system. A large number of the respondents felt that young people leave school early because of lack of money and there was also a strong belief that pupils often leave school because of negative experiences with teachers.

Use of drugs

- All our research indicates that the use of drugs is widespread among young people in Cork City. Overall 46% of respondents use cigarettes daily, 51% drink weekly, 24% smoke cannabis weekly and 13% took solvents and glue occasionally. The most common drugs used were alcohol, cigarettes and cannabis;
- The most common places where people first experimented with drugs were in public places such as fields, street corners and friend's houses;
- The vast majority of respondents were introduced to their first drug by friends;
- Just over a third said they take drugs on their own. The most common reasons given for taking drugs on their own were boredom and stress;
- The average weekly expenditure for alcohol was £25.25, cigarettes £19.81 and £23.32 on other drugs;
- The most common worry for respondents about the use of illegal drugs was getting into difficulty at school. Only a small minority said that they had concerns about the impact of drugs on their health;
- Television was rated as the most important way for getting drug information, followed closely by other media such as magazines, videos and radio. More formal sources of information such as the Gardai, and youth organisations were ranked much lower;

- Most respondents said that if they had a drug problem, they would most likely turn to their local doctor for help;
- Difficulties with friends, parents and boy friends/girl friends as a result of drugs were given as the most common relationship problems arising from drug use.

What is to be done

- Need for drop in type youth cafes/centres;
- Cheaper access to sports facilities;
- Eliminate educational disadvantage;
- More residential treatment services;
- Community based support services for young people and parents;
- Greater consultation with young people.

Background to Study

Who we are

The Community Outreach Drugs Awareness Project (C.O.D.A.P.) are a group of 15 young researchers who have studied the drug problem in Cork City. This report is the product of a year

long study. We began our work in December 1998. This report brings together the main results of our research to date.

Contents of report

The main aim of our report is to provide an opportunity for young people to give their views on the drug issue in Cork City. It also deals with attitudes towards what we feel are the related issues of: early school leaving; employment opportunities; availability and access to the services of youth and sports organisations. Their opinions were sought through a variety of research methods. This report is in four main parts. These are:

- Chapter 1 - How we did the research;
- Chapter 2 - Findings from discussion groups with young people and presentations from youth workers, drug treatment specialists and other workers;
- Chapter 3 - Findings of the survey of 291 young people in Cork City about their understanding of the drugs issue and the related topics of early school leaving, employment opportunities, availability and access to the services of youth and sports organisations;
- Chapter 4 - Recommendations on how to tackle the drugs problem.

This research project was set up as a result of recognition that young people need to have their voices heard. The unique aspect of the study is the peer research approach used in which 15 young people have designed, planned and carried out all aspects of the study. As part of the peer research approach, we have also used our own personal knowledge of the drug issue in Cork City as the basis for shaping the objectives of the study and the methods used in collecting the information.

In planning this project, we felt it was important that we should not limit ourselves to simply looking at young people's experiences of drugs without also trying to understand some of the other factors affecting their quality of life in the communities in which they live. We have explored in the study how young people generally feel about their experiences of school, their hopes of employment and the quality of the community facilities in their area. Based on our initial discussions, we felt that a young person's understanding of his/her drug use is partially linked to how they feel about schools and the areas in which they live in general. Illegal drug use is not limited to areas where there are high levels of early school leaving and lack of community facilities for young people. However, we felt that exploring attitudes towards the issues of early school leaving and access to community facilities would reveal important clues about their impact on the drugs problem and their contribution to devising possible solutions.

Where the Project came from

The background to this project is the proposal contained in the "Bridge it Beat it" strategy document, published in August 1997, for community based research into the drugs issue. In meeting this need the Cork City Local Drugs Task Force, Comhar Chathair Chorcaí Teo, FAS and Ogra Chorcaí combined their resources to establish this scheme in which 15 young people on CE schemes, supported by a research co-ordinator and a youth worker, designed and implemented this study. As well as being one of the first of its kind in Ireland, this study gives a unique opportunity for young people to voice their opinions on the drug issue in Cork City.

What other researchers have said

Many other researchers have studied the growth of the drugs problem in Ireland. A summary of some of the trends identified by researchers comes from a recent publication by the Health Research Board. It found the following:

- Schools survey data indicate that there has been an increase in the consumption of drugs, in particular cannabis;
- Problematic drug use continues to be associated with social disadvantage. The profile of the typical drug user who presents for treatment and as represented in the statistics over a number of years is significant - that of young, unemployed male, leaving school at an early age and living in a socially disadvantaged area;
- Between 1992 and 1996, there was an increase in the number and quantity of drugs seized, particularly heroin, cocaine and amphetamines. The number of ecstasy seizures has increased over the years and very significantly so in 1995.

(Taken from 'Overview of Drug Issues in Ireland 1997: A Resource Document' by Mary O'Brien and Rosalyn Moran, Health Research Board, Dublin, 1998, pp. x).

The most detailed Cork based study is the report carried out by Dr. Tim Jackson of the Southern Health Board, which surveyed 1,500 people in Cork and Kerry, aged between 15 and 44 years of age. Dr Jackson also paid particular attention to surveying young people aged between 15-24 years of age, involved in substance abuse. A summary of some of his main findings were:

- The level of smoking tobacco dramatically increased, from 10% at 15 years to 31% by 16 years (the legal age of sale of tobacco) and 40% at 20 years. Boys started smoking tobacco more than a year earlier than girls and reported smoking more cigarettes per day;
- 78% of the population drank alcohol currently - 81% of men and 75% of women. Almost 90% of those in age group 20-24 years were current drinkers. Almost half of those under the legal age of 18 years, were current drinkers (44%) - half of these were boys (50%) and a fifth were girls (20%);
- 13% of the age group 20-24 years drank in excess of recognised guidelines of 21 units of alcohol per week. Such high levels at that young age group has serious implications;
- The drug user in the Jackson survey tends to be young, male, from urban areas, is also a smoker or drinker and has smoked or drunk from an earlier age than non-drug users. Part-time employment, high frequency of pub and disco attendance and low frequency of attendance at church are all associated with increased drug use. Recent and current drug uses are highest at younger ages and fall almost to nil over 35 years.

(Taken from 'Smoking, Alcohol and Drug Use in Cork and Kerry' by Dr. Tim Jackson, Southern Health Board, Cork, 1997, pp. 6).

These findings reveal the growing extent of drug use among younger people in Cork. In our report, we have tried to explore the reality of drug use among young people in Cork City with a

much smaller sample. We also reflected upon our own experiences of the drug scene as well as using the information we gathered from study visits and experts.

We found that carrying out this research was a challenging and rewarding experience- overall it was a very enjoyable one. We think the information contained in this report gives an important insight into the reality of the drug issue in Cork City today. We hope you find this report interesting and stimulating.

How we did the research.

Introduction

In this chapter we will outline in detail the process of how the research was done. This was divided into the following stages:

- Developing the research idea and recruiting the team;
- Visits;
- Expert Presentations;
- Group discussions with other young people;
- Drawing up a draft questionnaire;
- Distribution of final questionnaires;
- Counting and recording the results;
- Analysis and discussion of results;

- The final write-up.

Developing the research idea

The research project started in October 98 with the recruitment of a research coordinator. Recruitment of our team began in December 1998 and finished in February 1999. We were employed by means of a Community Employment Scheme. Ogra Chorcaí sponsored the scheme, and we were based in the offices of Comhar Chathair Chorcaí Teo. In February 1999, a supervisor for the scheme was employed.

For the first 2 months we had lots of group discussions about the drug issue, the research process and how to go about it. First we gathered information about the types of drugs being used in Cork and their physical and social effects. We then spent some time reading reports from other researchers about how they carried out social research into the drugs issue.

We visited various local youth centres and other agencies, mainly in the Northside of the City. We spoke to the staff and young people during our visits. We listened to their different opinions on the drugs issue and recorded everything they said by taking written notes with their permission. Our aim was to find out the reality of the situation on the ground. The following are lists of the different places we visited and experts we spoke to:

- Youthlinks, Gurrabraher;
- Knocknaheeny Youth Centre;
- Estate Management Office, Knocknaheeny;
- Strawberry Hill, Youth Centre, Ogra Chorcaí;
- UCC Library;
- Farranree Community Centre;
- Cork City Library;
- Arbour House, St Finbarr's Hospital;
- Matt Talbot Centre, Ahiohill, Clonakilty;
- Gurrabraher Garda Station;
- Cork Prison.

Expert presentations

- Dr. Mary Favier, GP;
- Dermot O'Connell, Senior Probation Office;
- Oliver Scally, Cork Centre for the Unemployed;
- Colm O'Herlihy, Cork Prison;
- Staff of Comhar Chathair Chorcaí Teo.

In May we had a very informative trip to Dublin, where we saw a wide variety of drug treatment projects. These were...

- The Merchants Quay Project;
- The Soilse Project;
- Rutland Street Youth Project;
- The Criannin Project;
- Treatment projects in Blanchardstown and Kilbarrack;
- A sports activity project in Darndale for recovering heroin addicts.

The main lessons for the team, arising from the trip were:

- The seriousness of the drugs problem in Dublin;
- The lack of local drug treatment centres in Cork compared to Dublin;

- How young the addicts were;
- The development of innovative schemes such as needle exchange;
- The co-ordination of services at a local level (and the problems of setting up a community drugs treatment project);
- The production of a magazine by young people on the Soilse Project.

Workshop presentations

In June we had a full day presentation for the research team by Neil Robertson, a peer drug research expert from Edinburgh in Scotland. This workshop took place on June 8th in the Sunset Ridge Hotel. The morning session provided us with an opportunity for an outside assessment of what we the team had achieved so far. We also discussed a number of potential plans for a possible second year. In the afternoon we had a more general discussion about the peer drug research project, which Neil had developed in Scotland. A number of community representatives were present to listen to and contribute to this session.

Discussion groups

In March, we wrote letters to various youth centres in the Northside of the City asking for their assistance in organising discussions with groups of young people in their centres. Six groups agreed to take part. The following organisations helped us:

- Strawberry Hill, Youth Centre, Ogra Chorcaí;
- Gurrabraher and Knocknaheeny Community Training Workshop;
- Neighbourhood Youth Project, The Glen;
- The Glen Youth Centre;
- Youthlinks, Gurrabraher;
- Blackpool Community Training Workshop.

We divided ourselves into teams of three and each group went to a centre where we met groups of approximately 10 to 12 young people, who were aged between 14 and 17 years of age. From the six groups we met a total of 80 young people. We started off our discussions by telling the group all about what we were doing and what we planned to do through out our research. We then had an informal chat about drug issues where we asked the young people for their opinions on drugs and about the

types of facilities in their area. We finished our discussions by giving the young people a mini questionnaire to fill out. The results of this mini questionnaire and the general discussion helped us to plan and design our final questionnaire.

Carrying out the Main Phase of our Research

From March onwards, we devoted our time to designing a questionnaire, which would be suitable for a larger survey of young people. We looked to different reports for ideas e.g. Smoking, Alcohol and Drug Use in Cork and Kerry by Dr. Tim Jackson, a report which gave us facts and figures on drug use in Cork and Kerry. We referred to reports from Belfast and Dungannon (see bibliography) in which peer research has been successfully carried out. We also got ideas from the “Fast Forward” drugs project in Edinburgh - another project in which peer research played a major part. We also referred to the issues raised by our study visits, presentations received and the results of our group discussions.

We spent the first two weeks brain storming as a group trying to decide which questions would be relevant. This was very trying and frustrating for us as we all had different opinions and ideas. Questions decided on one day would be scrapped the next and picked up again the following day. It was definitely a learning experience in teamwork to finally come to an agreed decision over the wording of questions. Our final draft of the questionnaire covered the following issues:

- Personal Details (e.g. age, area and address);
- Attitudes towards facilities in their area;
- Opinions on schools and teachers;
- Attitudes towards drug abuse within their area;
- Ideas and possible solutions to the drug problem today.

In April, the draft of the questionnaire was tested among 12 young people who were friends of individual researchers. Again the results of the test questionnaire provided us with many more ideas on possible improvements. We also received helpful suggestions from other researchers and community activists on ways to improve the questionnaire.

By May we were able to finalise a completed questionnaire. Our first strategy was to write to 15 schools informing them about our research and asking for their permission to survey some of their pupils aged between 15 and 18 years of age. The following schools agreed to take part:

- Terrence Mac Sweeney Community College, Knockriaheeney;
- Mayfield Community College;
- North Presentation Secondary Girl’s School Farranree;
- Christian Brothers College, Sydney Place, Patrick’s Hill;
- St Angela’s Girl’s School, Patricks Hill;
- St Vincent’s Secondary School, St Mary’s Rd, Cork.

Two or three of us visited the schools at a time. We usually met a class of approximately 20 students. We explained the purpose of our visit and we were present to answer any queries that the students may have had. The questionnaire took approximately 30 minutes to fill out. Upon completion, we told the students not to put their name on the questionnaire but to put it into an envelope and seal it themselves so as to ensure strict confidentiality.

In June we distributed our questionnaires to young people attending the following youth projects:

- Strawberry Hill, Youth Centre, Ogra Chorcai;
- Youth Reach, Knocknaheeny;
- Gurrabraher and Knocknaheeny Community Training Workshop;
- Ogra Chorcai, Farranree,
- Blackpool Youth Group, Blackpool Community Centre;
- Blackpool Community Training Workshop; Youth Reach, The Glen;
- The Glen Neighbourhood Youth Project;
- The Butter Exchange Band, Shandon;
- Ogra Chorcai, Mayfield;
- Mahon YMCA Scheme funded by the Cork City Local Drugs Task Force.

The same rules ensuring the confidentiality of those who took part in the survey were applied.

Analysis of Results

The survey was carried out during the months of May, June and July. We obtained 291 completed questionnaires, which we filed and numbered. Each researcher was given 2 questions to analyse from the completed questionnaires. Each researcher added up the total of the answers for each of his/her 2 questions. We then converted our totals into percentages and converted our tables into graphs with the help of the Excel package. We divided ourselves into teams of 3. Each team analysed and summarised the results of 6 questions.

After a well-earned summer break we began general group discussions analysing the results of each question. This was the most interesting part! - a time in which many conclusions and recommendations were thrashed out. The month of September was taken up with producing the first draft of the report. This was followed by a discussion on the appearance and design of the report. The final document was ready by the end of September. In October, a summary of the findings was presented to the Cork Local Drugs Task Force in the Shandon Court Hotel.

Researchers study trip to Dublin



Setting the scene: some findings from young people's discussion groups

Introduction

In this chapter, we present some of the main issues arising from the group discussions we had with young people. A full list of the organisations and individuals that assisted us is contained in Chapter one.

The discussion groups formed an important basis for helping us to understand the issues, which we explored subsequently in the questionnaire itself. As well as specific information about drug use, we also felt it was important to discuss with those whom we spoke to, other issues such as:

- Access to leisure facilities for young people;
- Young people's experiences of school;
- Employment opportunities.

Much of our analysis of the themes is based on a series of group discussions we had with 80 young people from the Northside of the City. We drew up a list of questions, which we presented to six groups of young people. Altogether we interviewed 40 boys and 40 girls who were aged between 15-21 years of age.

Access to leisure facilities

An important finding from the information we gathered from the discussion groups and other people we spoke to was the impression that some leisure facilities are inaccessible for young people. Some of the most common difficulties mentioned were:

- Existing youth clubs having too many rules. This makes them unattractive for some young people;
- Some sports facilities are too expensive, which means that young people cannot use them. Another difficulty was that in many cases, groups from outside the area over book sports centres and this makes it impossible for local youth groups to gain access.

From the young people we spoke to, we also got a clear view of the need for extra facilities. Typical of the views we heard was this comment in one of the discussion groups,

If there were enough of things for youths to pass the time by, there'd be fewer hassles, e.g. discos/drop in centres. There is an outcry in most areas for extra activities.

Leaving school at an early age

A common view in the discussion groups was the belief, that young people leave school early because they lose interest. Loss of interest was linked to difficulties in communication with teachers, which often occurs as a result of overcrowding and learning difficulties. Some young people also said that the teachers have no respect for the pupils in the class. They felt that because pupils were from so-called "rough areas" that this was another reason why some teachers had little or no respect for their students. This was given as another reason as to why they left school at a young age.

Employment opportunities

Many of the people who spoke to us agreed that in applying for jobs, many young people tend to use a different address to that of the area in which they live. Many of them also felt that the media tend to focus on one area and “grind it down as much as they can”. For this reason, many young people use an address that has a good reputation and which is not seen as a “bad area”. The young people we spoke to generally agree that those who get good jobs and live in areas with bad reputations don’t get the credit they deserve. One young person said:

They could do very good in the area and the media would not publicise anything on it, but as soon as anyone gets into trouble it is splashed all over the papers and the radio.

Attitudes towards drugs

These are the main themes drawn from the issues we discussed with the young people about drugs in the discussion groups:

- Most of the crime, in their areas, was either committed while under the influence of or by people looking for money for alcohol or other drugs;
- Alcohol was widely used by young people of all ages. The majority of the young people we asked would regularly drink cans on streets and in fields;
- The majority opinion was that most types of drugs are freely available and socially acceptable. The majority didn’t consider alcohol and tobacco as drugs. Only one young person in the discussion groups said he hadn’t tried anything at all;
- The most common reasons given for taking drugs was either out of curiosity or because their friends take them. The most popular drugs used, as denned by the young people, were cannabis, ecstasy tranquilizers (some of the slang terms being ‘upjohn’s’ and ‘purple hearts’). The majority opinion was that cannabis should be legalized because it was felt that “it was the same as smoking fags” and they didn’t think its use would lead to “harder drugs”.
- There was no great concern expressed about the dangers of taking drugs (e.g. health or getting into trouble with the law). Typical of some of the answers we got was the following response “You could be hit by a bus tomorrow”. Some young people did say that they would stop taking drugs if someone they were close to died as a result of drugs.

Conclusion

The information we received was very useful to us in designing the main questionnaire. We were greatly impressed by the honesty of the professionals and young people who spoke to us. After completing this phase of the research, we were left in no doubt about the extent of the difficulties some young people face in trying to succeed in school and get a job. We were also surprised by the difficulties faced by young people in using sports and youth clubs.

We felt that the extent of alcohol and drug use was not very surprising. The overall impression was that drug use (particularly alcohol, tobacco and cannabis use) was very socially acceptable among the young people we spoke to. There did not appear to be much concern about the possible longer-term physical effects of drug abuse.

Survey Findings

Introduction

In this chapter we are going to present some of the findings of our survey of 291 young people. The chapter is divided along the following themes:

- Personal details of respondents (e.g. age, sex, etc);
- Satisfaction with facilities in local area;
- Experience of school;
- Current drugs use;
- First drug use;
- Where drugs are taken;
- Extent of drug taking alone;
- Amounts spent on drug use;
- Worries about drugs;
- Sources of education;
- Services used in dealing with drugs;
- Difficulties caused by drugs;
- Policy responses to drug problem;
- Future expectations of respondents;
- Evaluation of survey by participants.

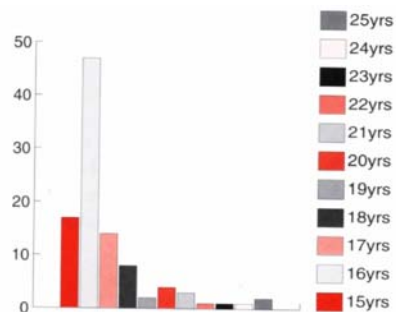
Relevant tables of data for each graph are inserted in Appendix 1.

Personal details

Age of respondents

Of the 291 people who answered the questionnaire - their ages ranged from 14 to 25 years - the average age is 16 years of age. The majority of respondents are aged between 15 and 17 years (78%).

Graph 1 Age of respondents

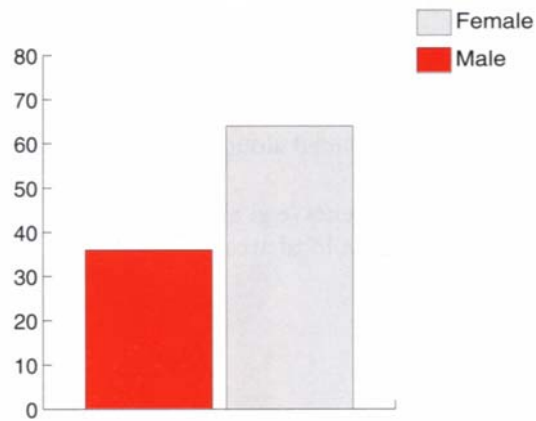


N= 291

Sex of respondents

The majority of respondents (64%) were females. The main reason for the greater number of females was due to the fact that out of the 15 schools we applied to, 6 agreed to participate - 3 of these were girl's schools, 2 were co-educational and one was a boys school. Also, in our experience, youth clubs are more likely to be attended by girls than boys.

Graph 2 Sex of respondents

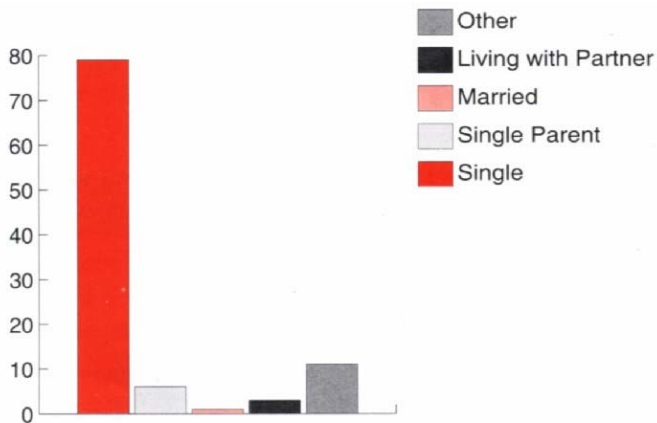


N=291

Marital status of respondents

The majority (79%) of the people we surveyed were single, 6% were lone parents, 1 % were married and 3 % were living with a partner.

Graph 3 Marital status of respondents

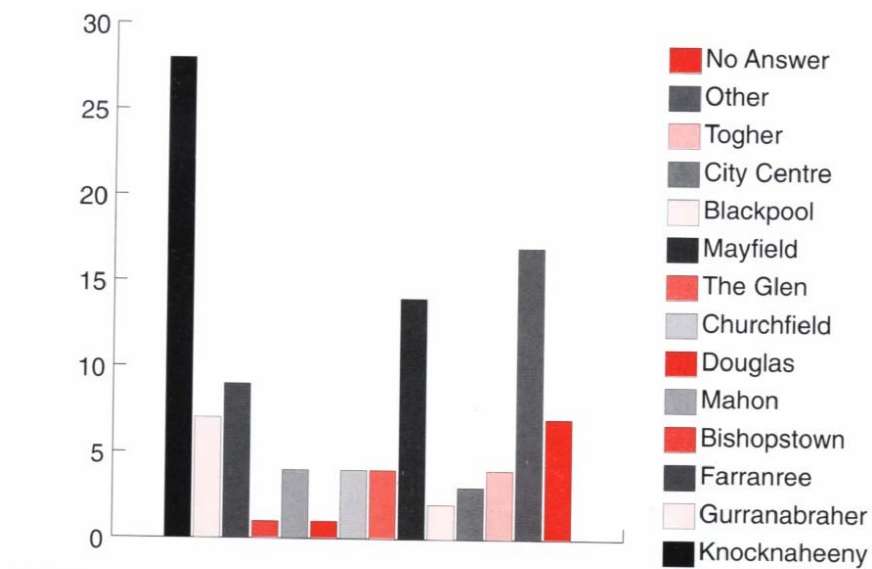


N=291

Areas where respondents live

The majority of respondents were from the Northside of the City -28% were from Knocknaheeny, 14% were from Mayfield and 9% were from Farranree. Overall 68% of respondents identified themselves as coming from the Northside of the City.

Graph 4 Address of respondents

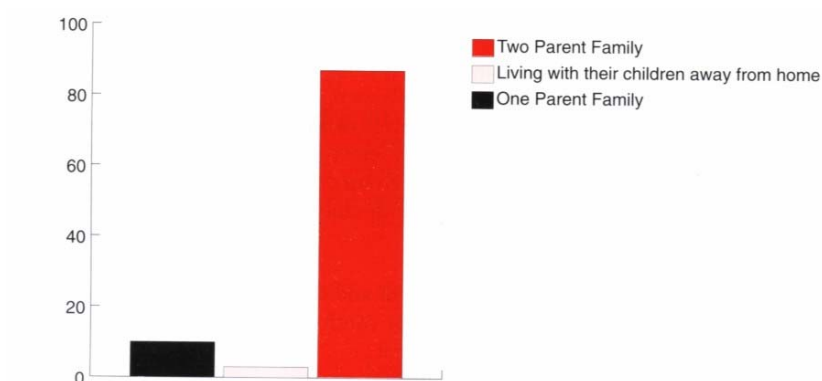


N=291

Family type of respondents

The vast majority of respondents (87%) are living with both parents, 10% of respondents are living in one-parent families and 3 % are living in their own homes with their own children.

Graph 5 Types of families, respondents are living with

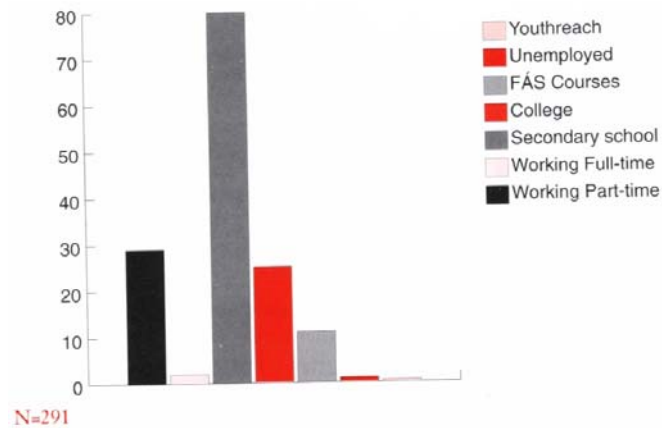


N=291

Occupation of respondents

Graph 6 shows the range of present occupations taken up by respondents. Eighty percent of people are attending secondary school and nearly one third (29%) are also working part time.

Graph 6 Occupation of respondents



Satisfaction with facilities in their area

In the questionnaire we asked respondents to comment on their levels of satisfaction with a variety of services and the possible problems they experienced in using them.

Levels of satisfaction with youth clubs, sports clubs and discos We focused on three particular issues, which were the levels of satisfaction with youth clubs, sports clubs and discos. Table 1 shows respondents levels of satisfaction with these services. These services were chosen because they emerged as important indicators of dissatisfaction with local facilities from the group discussions. Just over a half of the respondents (54%) were satisfied with youth clubs and 56% were satisfied with sports clubs.

The three main problems that featured in additional comments were:

People were either too young or too old for youth clubs

- Access to sports facilities cost too much
- Bouncers did not like the look of them in discos
- Sports clubs are booked out from outside groups.

We felt that it was surprising that nobody admitted there was a problem in getting into a pub, even though the majority of young people we surveyed were still at school.

Table 1 Levels of satisfaction with youth clubs, sports clubs and discos

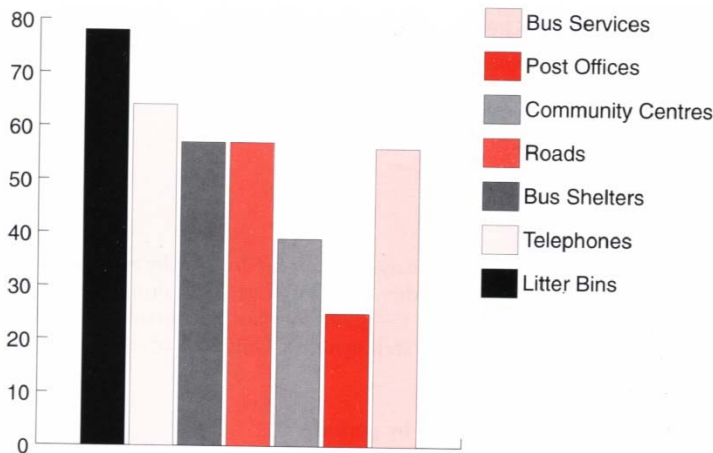
Type of facility	Satisfied	Dissatisfied	No answer
Youth clubs	54%	24%	22%
Sports clubs	56%	24%	20%
Discos	45%	35%	20%

N=291

Opinions on quality of local services

The following graph shows respondents attitudes towards the question of possible improvements in services provided locally. Services, which require the greatest possible improvements, are litterbins (78%) and the availability of public telephones (64%). These were also issues that came up in our discussion groups, e.g. some of the young people said if there was an emergency they had no way of getting to a phone if they had none at home. Some young people also complained about the vandalism that has been carried out to the bus shelters.

Graph 7 Services that need to be improved

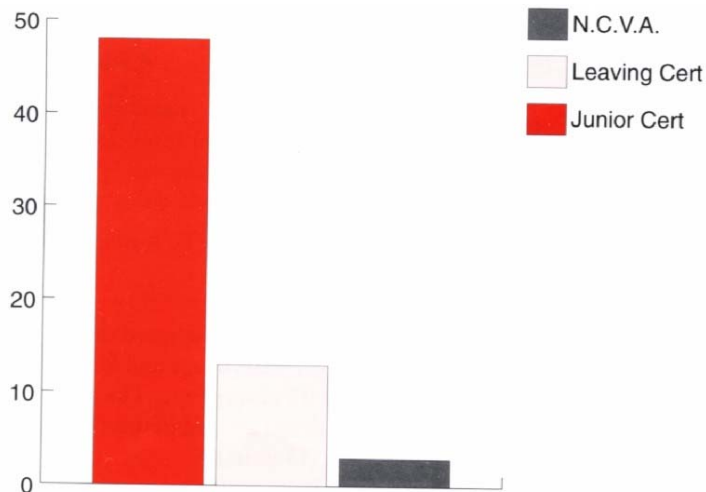


N=291

Educational experiences

Education courses taken by respondents Nearly half of the respondents (48%) had completed their junior cert and 13 % had completed their leaving cert.

Graph 8 Education courses taken by respondents



N=291

Reasons for early school leaving.

Respondents were asked to comment on why they felt that some young people leave school early. Nearly two thirds (64%) of respondents felt that young people left school early because they needed more money and 5 % said overcrowding may have been the cause of early school leaving - 54% also said that teachers disrespect could play a major role in encouraging early school leaving. This particular response also featured strongly in our discussion groups.

Table 2 Reasons given by respondents for early school leaving

Reason for leaving School	%
Fear of Failing	47%
Boring Subjects	51%
Teachers disrespect for pupils	54%
Bullying	39%
Overcrowding	55%
Lack of money	64%
Learning Difficulties	48%

N=291

Current use of drugs

The following tables provide an analysis of current drug use by respondents. Overall 46% of respondents use cigarettes daily. At least 51% drink and 24% smoke cannabis at least weekly and 13% took solvents/glue occasionally. The most common drugs used were alcohol and cigarettes. Only 16% of respondents said they had never used alcohol.

Table 3 Use of specified drugs by period

Period	Daily	Weekly	Monthly	Occasionally	Never
Cigarettes	46%	3%	4%	7%	40%
Cannabis	12%	12%	3%	19.50%	53.5%
Alcohol	9%	42%	12%	21%	16%
XTC	0.5%	6%	3.50%	9%	81%
Trips	1%	1%	1%	6%	91%
Prescribed Tablets	1%	1%	4%	7%	.87%
Solvents/Glue	0.5%	0.5%	2.5%	12.5%	84%
Poppers	0.5%	1%	1%	7%	90.5%
Heroin	0.5%	0.5%	1%	1%	97%
Magic Mushrooms	0.5%	0%	0%	4.5%	95%
Speed	0%	1%	2%	5%	92%
Cocaine	0%	0.5%	0%	3%	96.5%

N=291

First drug use

In this section we explore past experiences of drug use by respondents.

Age when first drug was taken

Table 4 shows the ages of respondents by first use of selected drugs. The youngest age given for taking cigarettes and alcohol is 7 years of age and for cannabis is 9 years of age. The youngest age for taking XTC is 12 years of age. The average age for first experimenting with each of the following drugs are: cigarettes (12.5 years), alcohol (13.5 years), cannabis (14 years) and XTC (15 years).

Table 4 Ages of respondents by first use of most common drugs

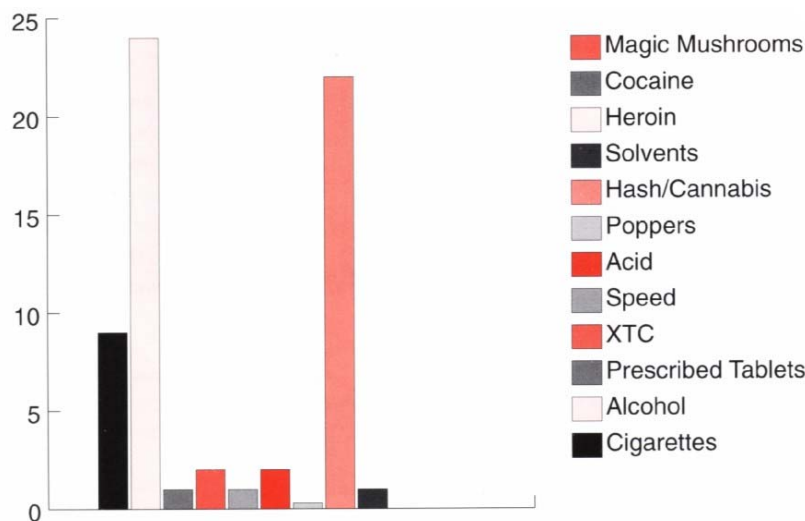
	7yrs	8	9	10	11	12	13	14	15	16
Cigs	1	2	2	6	5	8	5	12	8	3
XTC	0	0	0	0	0	2	5	3	10	13
Alcohol	1	0	2	2	5	12	17	27	20	9
Cannabis	0	0	3	2	2	18	19	29	30	19

(Note: figures represent numbers of respondents)

First drug taken

The following graph shows the substances first used by respondents. Alcohol is the most common drug first experimented with by respondents (24%) followed by cigarettes (9%) and cannabis (22%). The extraordinarily low figure for cigarettes must be interpreted in the light of the fact that some respondents did not consider cigarettes as a drug.

Graph 9 Percentage of respondents by type of first drug taken.



N=291

Where first drug was taken

The most popular locations for experimenting with the first drug respondents took were unsupervised places such as on the street (20%) and fields (19%). Friend’s homes were also a popular choice (20%). A relatively small number of respondents (5%) identified the pub as being the first location where they drank alcohol.

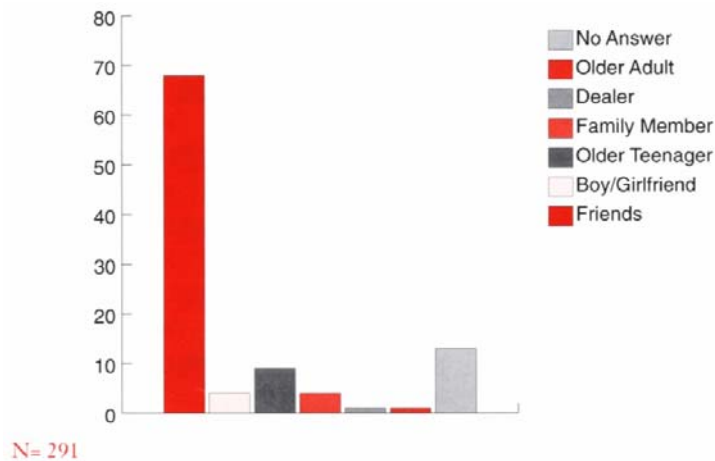
Table 5 Location where first drug was taken

Location	% of respondents
Disco	11
Friends	19
At home	9
Party	3
Field	17
Pub	5
Street	20
School	3
Holidays	2
No answer	4
Other	7
N=291	

Person who introduced first drug

Friends introduced over two thirds of respondents to their first drug (68%). Dealers were only mentioned by only 1 % of respondents.

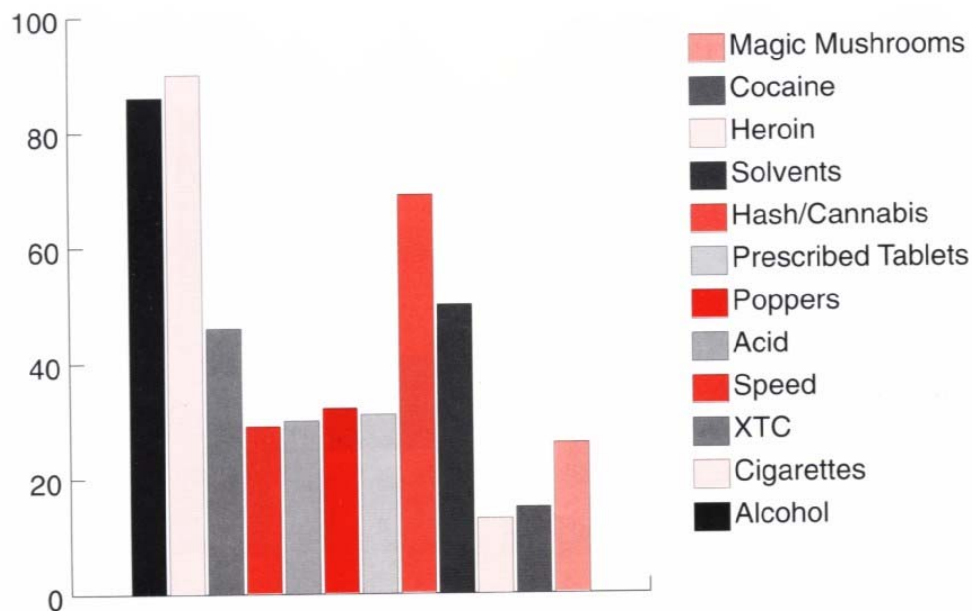
Graph 10 Person who introduced first drug



Availability of drugs locally

The overwhelming majority of respondents found it easy to get the following drugs in their area - alcohol (86%) and cigarettes (90%). There was also considerable agreement that it was easy to get other drugs such as cannabis (69%), solvents (50%) and XTC (46%). Accessibility to other drugs did not feature significantly. The accessibility of solvents refers to the fact that hair spray, deodorants and glue are being sold to young people every day from supermarkets and other shops.

Graph 11 Percentage of respondents who agree that it is easy to get the following drugs



N=291

Location for taking drugs

Social gatherings such as discos, pubs, raves and parties stand out as being the most common locations for taking drugs such as alcohol, cannabis and XTC. More informal gatherings such as going to a friend’s house, going on weekends away and hanging out in public places are also times where the most common drugs such as alcohol are used.

Table 6 Types of drugs used by location

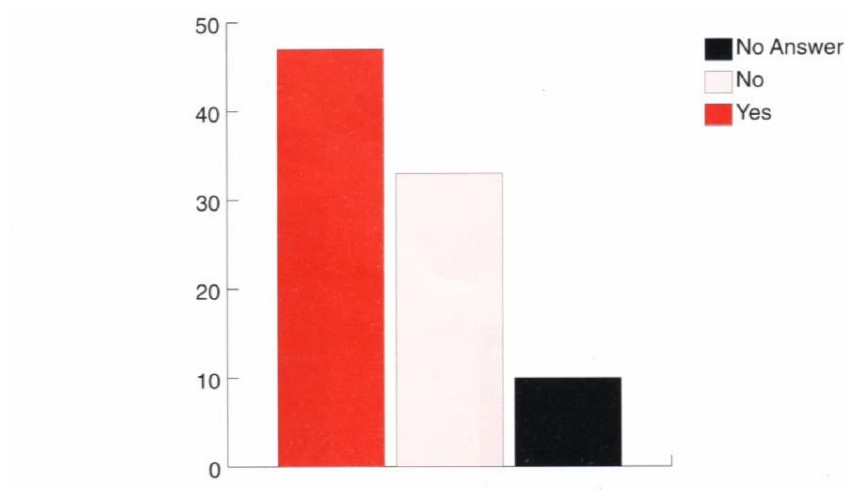
Location	Alcohol	Cannabis	XTC	Pres. tablets	Acid	Solvents	Heroin
Parties	50%	16%	17%	4%	4%	1%	3%
Discos	51%	12%	22%	3%	5%	0.6%	3%
Raves	22%	12%	19%	4%	8%	2%	4%
Family home	16%	10%	2%	5%	1%	3%	1%
Empty building	18%	2%	5%	3%	1%	2%	2%
Pubs	51%	5%	4%	1%	0.3%	0%	0.3%
Public places	36%	23%	7%	7%	3%	3%	3%
Friends house	40%	18%	7%	4%	4%	2%	1%
Weekends away	40%	18%	12%	5%	4%	2%	3%

N=291

Extent of drug taking alone

Just over a third of respondents (37%) admitted to taking drugs when they were on their own. The most common reasons given by those respondents who provided further information were feelings of boredom and stress. This finding highlights the need for more drop- in centres and youth clubs in many areas. These are needed to help young people who are experiencing loneliness and isolation.

Graph 12 Respondents who admitted to taking drugs on their own



N=291

Amount spent monthly on drugs

The following table shows the estimation of respondent's monthly expenditure on alcohol, cigarettes and other drugs. Between £20 and £29 weekly is the most common estimated amount spent on alcohol and between £40 and £49 is the figure for cigarettes. The average weekly expenditures are: alcohol - £25.25, cigarettes - £19.81 and other drugs £23.32.

Table 7 Distribution of weekly expenditure by number of respondents

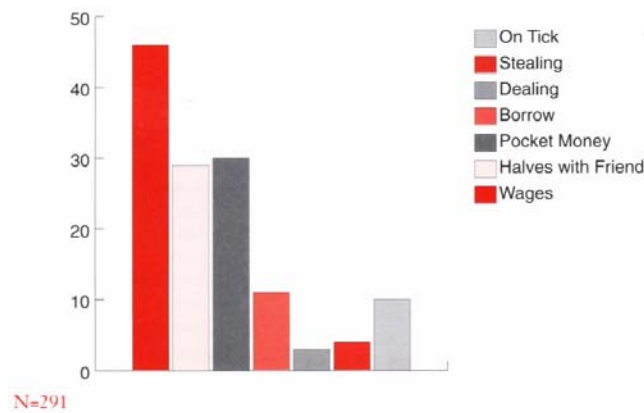
Amount	Alcohol	Cigarettes	Other Drugs
£10-£19	18	8	6
£20-£29	43	12	5
£30-£39	14	11	2
£40-£49	27	20	9
£50-£59	10	11	3
£60-£69	14	12	6
£70-£79	2	2	3
£80-£89	17	13	11
£90-£99	5	4	1
£100-£199	9	6	4
£200	23	2	12

(Figures refer to actual number of respondents)

Source of money for drugs

Nearly half of respondents (46%) chose wages as a source of income for expenditure on drugs. The other main sources of income were either sharing the cost with a friend (29%) or using pocket money (30%).

Graph 13 Source of money for drugs



Reasons for taking drugs

Some of the main reasons given for taking particular drugs are as follows:

ALCOHOL

- Thirty four percent said they drank alcohol to socialise, 28% did so because they were bored and 27% were just curious. The remaining 39% drank to cope either with personal problems, to relieve stress or because they heard it was great

CANNABIS

- Fifteen percent of respondents took cannabis out of curiosity and 10% out of boredom, 8% heard it was great, 4% did so to socialise and 6% took cannabis to cope with stress and personal problems

ECSTASY

- Eight percent of people took ecstasy because they heard it was great, 6% out of curiosity, 4% were bored, 3 % took ecstasy to socialise because they were stressed

PRESCRIBED DRUGS

- Three percent of respondents took prescribed drugs out of curiosity.

Table 8 Particular drugs by reason for taking

Reason	Alcohol	Cannabis	XTC Pres.	Tablets	Acid	Solvents	Heroin
Heard they were great	13%	8%	8%	1%	1%		
Boredom	28%	10%	4%	1%	1%	1%	
To help socialize	34%	4%	3%	2%			
Curiosity	27%	15%	6%	3%	1%	1%	1%
Personal problems	13%	3%	1%	1%			
Stress	13%	3%	1%	1%	1%	1%	1%

N=291

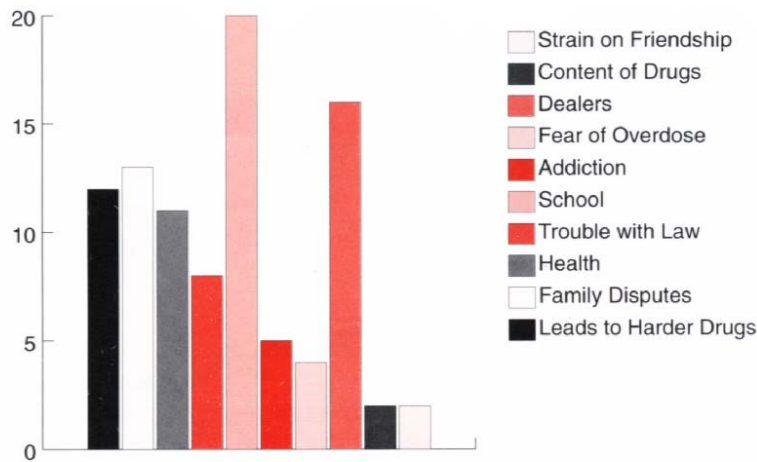
Main worries about drugs

The most significant worries, respondents expressed about drug use were: getting into debt with drug dealers (28%), moving onto harder drugs (16%) and effects on general health (15%). Other concerns were:

- 12% feared their performance could deteriorate in school,
- 9% feared drug use could lead to family disputes,
- 8% have fear of getting into trouble with the law,

- 5% have a fear of overdosing
- 3% have a fear of becoming addicted.

Graph 14 Concerns about drug taking



N=291

Opinions on drug use in Cork

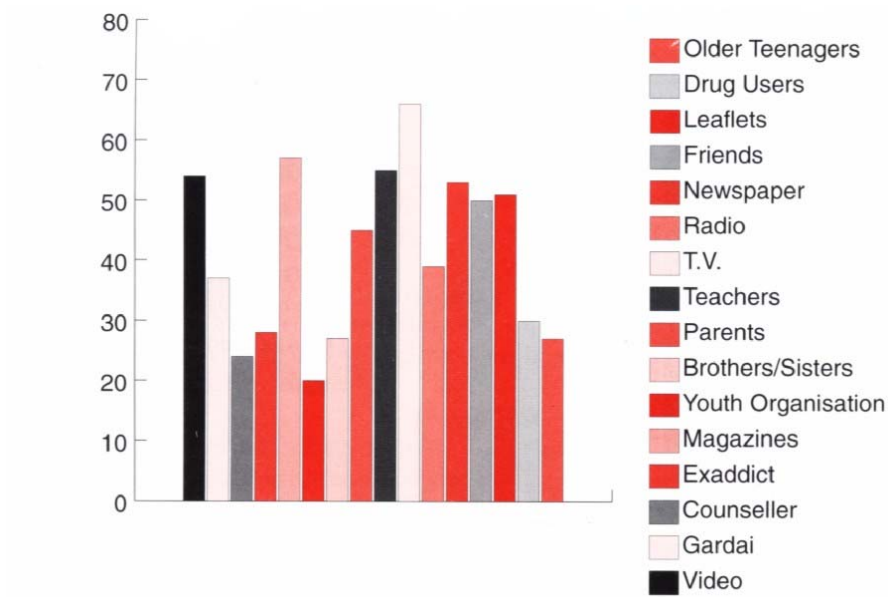
The following is a series of statements to which respondents had an opportunity to give an agree/disagree answer. The following results were obtained from completed questionnaires:

- 43% agree there is a drug problem in Cork, 8% disagree and 10% don't know
- 48% agree cannabis should be legalised, 42% disagree and 16%, don't know
- 7% agree its cool to take drugs, 69% disagree and 4% don't know
- 44% agree cannabis leads to harder drugs, 34% disagree and 16% don't know
- 44% agree alcohol is not a drug, 34% disagree and 16% don't know
- 74% agrees that one XTC tablet can kill. 7% disagree and 8% don't know
- 28% agree heroin is widely available in Cork, 21% disagree and 44% don't know
- 65% agree that the majority of young people in Cork have experimented with drugs, 35% disagree and 16% don't know
- 41% agree that locking up all the drug dealers is the real solution, 35% disagree and 17% don't know
- 77% agree drug taking affects your school work, 9% disagree and 15% don't know
- 8% agree that drug taking begins at home, 45% disagree and 11% don't know.

Sources of education/information about drugs

The most popular sources from which respondents received information about drugs were: watching television (66%), magazines (57%), teachers (55%), videos (54%), newspapers (53%) and friends (50%).

Graph 15 Sources of information about drugs



N=291

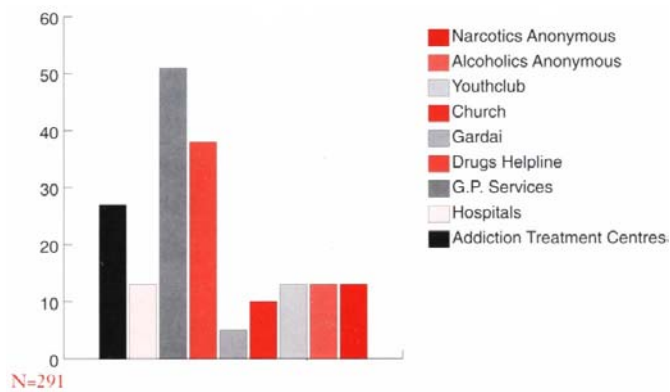
Dealing with a drug problem:

what services would be used The service, which respondents would feel most comfortable in contacting if they were worried that they had a drug problem is their local doctor (51%). Over a third of respondents (38%) would also feel comfortable in contacting a helpline.

Respondents were given an opportunity to give their reasons for their answers. A number of respondents stated that they were reluctant to contact the Gardai because they were afraid that they might be prosecuted or that their parents might be told. The majority of respondents who commented would go to their friends or family for support because they would not feel comfortable talking to strangers about their personal problems. A large number of respondents also added that G P services are good because they are confidential, caring and they are used to getting medication from their doctor. Some respondents would not phone a helpline because “you never know who you are talking to”. Some respondents also felt that ex-addicts should have say in the running of a helpline.

The majority of those who commented would not feel comfortable contacting a youth club if they had a drugs problem because they felt it would not be confidential enough. Some respondents also commented that staff are not trained properly in drugs counselling.

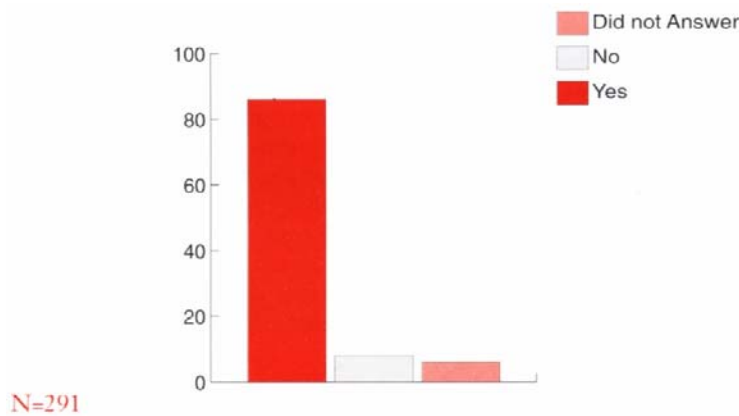
Graph 16 Service respondents would feel most comfortable contacting if they



Discussion with parents/guardians on the dangers of taking drugs

The vast majority of respondents (86%) had discussions with their parents/guardians about the dangers of taking drugs. We feel that this finding shows that parents are becoming more aware of drug abuse.

Graph 17 Respondents who discussed with their parents/guardians the dangers of taking drugs

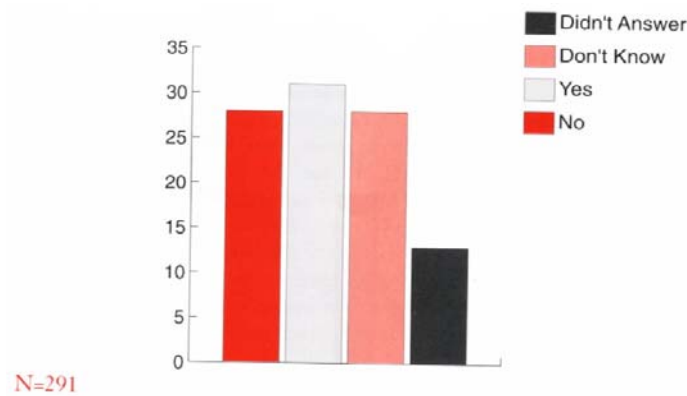


Older generations understanding of why young people take drugs

Nearly a third (31%) of respondents feel that the older generation understands why young people take drugs, while 28% disagreed. Typical comments, which we got around this theme, were:

- that the drugs today are very different and more dangerous than the drugs that were around 20 years ago
- The older generation sometimes thought that they understood the drugs problem today, but young people realised when they spoke to them that they need a lot more information and education about the new and different drugs available now.

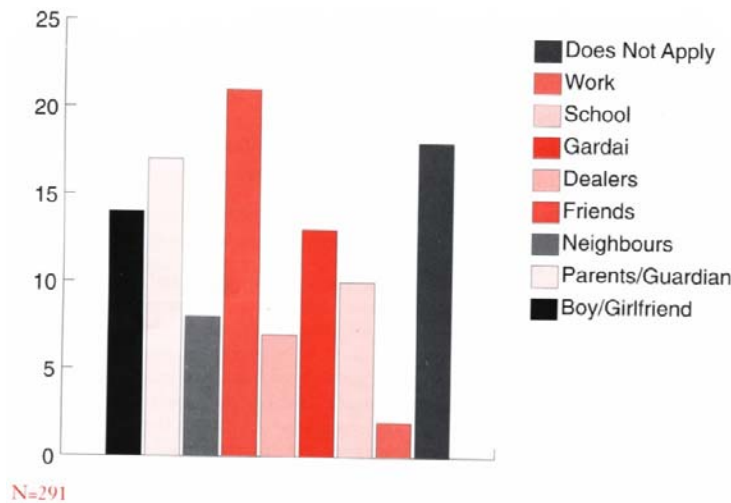
Graph 18 Respondents who agree that the older generation understands why young people take drugs



Difficulties caused by drugs

The largest number of respondents mentioned that they had been in trouble with their friends (21%), because of drugs. Other significant sources of difficulty were with parents/guardians (17%) and boyfriend/girlfriend (14%). These particular findings highlight the fact that the effects of the problems caused by drugs are often kept within families and other close relationships. Only a small percentage had been in trouble with dealers (7%). Thirteen percent have been in trouble with the Gardai because of drugs.

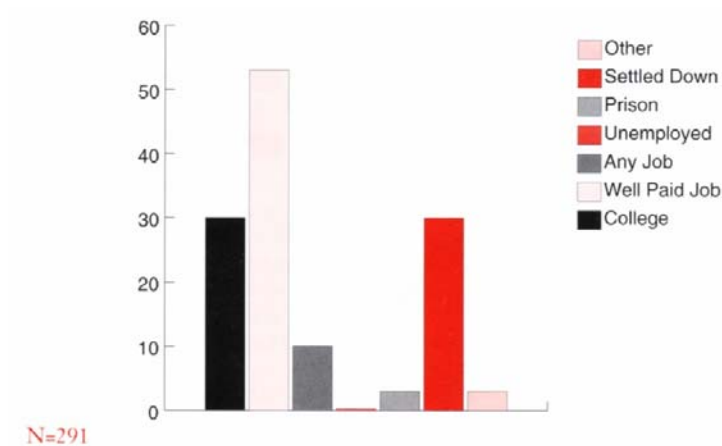
Graph 19 Range of difficulties caused by drug use



Future expectations

Generally, the majority of respondents were quite optimistic about their futures. The highest percentage of respondents (53%) saw themselves in a well-paid job and 30% hoped to go to college.

Graph 20 Future expectations of respondents.



Policy responses to the drug problem

The following are the percentages of respondents who agreed with the following suggestions on how to tackle the drug problem.

- More treatment centres for young people with drug problems (60%);
- Better drug education and information (59%);
- Help for parents to become more aware of the drugs issue (57%);
- Greater help for families having problems (48%);
- Better access to recreation and sports facilities for young people in Cork (55%);
- More centres for young people to hang out (59%);
- Asking young people what their needs are (47%);
- Better training to help young people get good jobs (56%);
- More support to help young people remain in school (58%);
- Accommodation for young people out of home (54%).

Comments on the questionnaire

We got some comments like “we hope you do really well” and “its about time somebody wants to listen to our point of view”. Numerous comments were just simply “best of luck”. Most people still felt the main reason people turn to drugs is because there is simply nothing else to do. A lot of people are waiting patiently to see the results, which they hope will be put to good use. Some other comments we got were that “drugs are a menace to society”. Some of the people we surveyed felt that we should be educating people and explaining to them that there is much more to life than drink and drugs and that we need to provide more solutions.

More comments were ‘ it’s the first positive thing I’ve seen in ages, best of luck!’ It made more people aware of the situation but one person thought the questions were irrelevant. We received a lot of other negative comments such as ‘very nosy’. Some people felt we were over inquisitive and gave comments like ‘What do you want to know about us for’ or ‘I don’t think it will make much of a difference to the drug problem in Cork, it’s gone too far and it’s too late” and “A good

idea! a start anyway, though I'm not sure it will work, but good luck". We are very grateful to all the people who took the time to leave a comment on our questionnaire

Research team at work



What is to be done?

The following are some recommendations, based on findings from the research, on how to respond to the drugs issue.

THE WIDER APPROACH

Need for youth cafes/centres

In all areas of Cork, there is a need for youth cafe/centres where young people can hang out in a relaxed atmosphere without too many rules and regulations. The success of such facilities would depend on the incorporation of the following features:

- The cafe/centres would be places where young people can sit down and talk with their friends and have coffee, soft drinks etc. These premises would have leisure facilities attractive to young people e.g.. pool, table tennis and computer and board game;
- These cafe/centres need to be open late in the evening, which would give young people an alternative option to hanging around the street. All day and evening opening is required in the summer months;
- Young people should have an important say in the running of these centres
- Meeting rooms would also need to be available for young people to plan activities in their areas;
- There is also a need for a number of paid staff to run the centres on a day to day basis and to support young people with their problems, if they require assistance. As much as possible the paid staff should be from the locality.

Need for local discos

- Many more supervised local discos are needed for young teenagers in Cork. These should be aimed at the 14-18 age group. These discos would provide teenagers with a safe drug free environment in which to enjoy themselves.

Cheaper access to sports facilities

- Access to sport halls for young people can be either too expensive or not available because of prior booking by other groups. Sport centres and clubs need to ensure that local young people have cheap access to their facilities and an appropriate amount of time is allocated to them;
- There are areas where there is a lack of opportunity for young people to participate in sport. In these areas more facilities must be provided.

Public Services

- Many communities also need a greater investment in community centres and play areas for children;
- Other services also need to be improved such as public telephones, rubbish bins, recycling centres, bus services, banks and bank link machines.

Unfair media coverage of the areas

- Unfair media coverage of local authority housing areas needs to be challenged. This should be done by highlighting the positive aspects of the area and the achievements of local people. The media should not target and label these communities because it affects young people's employment opportunities.

Combating educational disadvantage and the role of schools

- All schools should get the resources they need to combat literacy problems and early school leaving e.g. smaller classes and more remedial classes. Greater investment needs to be accompanied by compulsory evaluation and monitoring of schools and teachers;
- There needs to be greater mutual respect between teachers and pupils. Students should not be labelled because of where they come from. Teachers should get more training around the coping with the effects of drugs and alcohol in the classroom.

Employment opportunities

- Parents need help with childcare costs to help them take up employment. Greater availability of community based creches is essential, if women are to take up employment;
- CE schemes also need to be available for more than one year to ensure greater stability and continuity for the individuals concerned;
- More appropriate training schemes are needed for early school leavers, which would help them develop their careers around their own abilities.

DEALING WITH THE DRUGS ISSUE

Residential treatment services

- There should be more residential treatment centres in Cork City and Munster for young people with drug addiction problems. These centres would need to offer a variety of treatment programmes according to the needs of the individuals concerned. These services need regular funding to enable them to stay open.

Community services

- Support and information services need to operate where young people gather for example cafes, schools and youth clubs. These services should be community based and staffed by local people trained to work as educators and support workers for young people and parents who may have worries about drugs;
- Information provided should be accurate and not rely on a scare mongering approach. It should also focus on the effects of legal drugs such as alcohol and cigarettes;
- Specialised support services need to be available on a 24-hour basis.

Responsibilities of licensed premises

- The management of night clubs should be forced to provide their staff with basic medical training to deal with any emergency that may arise from drug taking

- Literature and advice needs to be available from trained workers at venues such as raves and night clubs;
- Legislation needs to be enforced to prevent pubs, off licences and nightclubs selling alcohol to people less than 18 years of age.

Role of GPs

- Young people often see GPs as the first person they would contact if they had a drug problem. GPs need to be adequately trained to listen and understand young people's concerns. There also needs to be close monitoring of the prescribing of tranquillisers.

24 hour help line

- A 24-hour helpline service needs to be available. The service would need the extensive involvement of young people with experience and training on the drug issues.

Consultation with young people

Young people must have a direct input into the design and management of services. Young people could act as peer educators and support workers. They also have an important role as peer researchers in finding out the needs of young people.

We greatly enjoyed carrying out this research. We learned a lot about team work and group dynamics as well as about the drug issue. In our opinion, this report provides a very real picture of the drug issue in Cork. It also says a lot of important things about how young people feel about schools, facilities in their areas and hopes for the future. We hope that these findings and recommendations will be put to good use, and will bring about change in improving the quality of the lives of young people in Cork City.

Thank you for taking the time to read our report.

Researchers taking a well earned break



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Appendix 1

Table 1a Age of respondents

Age	%	N
15 Years	17%	49
16 Years	47%	137
17 Years	14%	41
18 Years	8%	22
19 Years	2%	6
20 Years	4%	12
21 Years	3%	9
22 Years	1%	3
23 Years	1%	3
24 Years	1%	3
25 Years	2%	6

Table 1b Sex of respondents

Sex	%	N
Male	36%	104
Female	64%	187

Table 1c Household status of respondents

Marital Status	%	N
Single	79%	230
Lone Parent	6%	17
Married	1%	3
Living with partner	3%	9
Other	11%	87

Table 1d Where respondents live

Location	%	N
Knocknaheeny	28%	81
Gurrabraher	7%	20
Farranree	9%	26
Bishopstown	1%	3
Mahon	4%	9
Douglas	1%	3
Churchfield	4%	12
The Glen	4%	12
Mayfield	14%	41
Blackpool	2%	6
City Center	3%	9
Togher	4%	12
Other	17%	49
No Answer	2%	6

Table 1e Family status

Family type	%	N
One Parent Family	10%	29
Living with their Children away from home	3%	9
Two Parent Family (Ave. 3 brothers/Sisters)	87%	253

Table If Occupations of respondents

Occupation	%	N
Working Part time	29%	84
Working Full Time	2%	6
Secondary School	80%	233
College	25%	73
FAS Courses	11%	32
Unemployed	1%	8
Youthreach	0.50%	1

Table Ig Specified services to be improved

Service	%	N
Litter Bins	78%	227
Telephones	64%	186
Bus Shelters	57%	166
Roads	57%	166
Community Centers	39%	113
Post Offices	25%	73
Bus Services	56%	163

Table Ih Difficulties in using specified services

Facilities	Yes		No		Blank	
Sports Clubs	39%	113	47%	136	14%	40
Youth Clubs	38%	113	36%	104	26%	75
Church	2%	58	36%	104	62%	180
Library			44%	128	56%	148
Restaurant/Café	6%	17	43%	125	51%	148
Shop			41%	119	59%	171
Disco/Night Club	7%	20	45%	130	48%	139
Pubs			46%	113	54%	157
Cinema	4%	11	48%	139	48%	139

Table Ii Education courses taken by respondents

Education course	%	N
Leaving Cert	13%	38
NCVA	3%	9
Junior Cert	48%	139
No Answer	36%	105

Table Ij First drug used

Type of drug	%	N
Cigarettes	9%	25
Alcohol	24%	70
Prescribed Tablets	1%	3
XTC	2%	6
Speed	1%	3
Acid	2%	6
Poppers	0.30%	1
Cannahis	22%	64
Solvents	1%	3
Heroin	0%	0

Cocaine	0%	0
Magic Mushrooms	0%	0
No answer	38%	110

Table 1k Introduction to first drug

Person	%	N
Friends	68%	198
Boy/Girlfriend	4%	12
Older Teenagers	9%	26
Family Member	4%	12
Dealer	1%	3
Older Adult	1%	3
No Answer	13%	37

Table 1l Respondents who agree it is easy to get drugs in their areas

Drug	%	N
Alcohol	86%	250
Cigarettes	90%	262
XTC	46%	134
Speed	29%	84
Acid	30%	87
Poppers	32%	93
Prescribed Tablets	31%	90
Cannabis	69%	201
Solvents	50%	146
Heroin	13%	38
Cocaine	15%	44
Magic Mushrooms	26%	76

Table 1m Respondents who take drugs on their own

Response	%	N
Yes	47%	134
No	33%	96
No Answer	20%	58

Table 1n Period when respondents take drugs while on their own

Period	%	N
Weekly	5%	15
Occasionally	25%	73
Daily	3.50%	10
No Answer	66%	192

Table 1o Sources of income for drugs

Source	%	N
Wages	46%	134
Halves with friend	29%	84
Pocket Money	30%	87
Borrow	11%	32
Dealing	3%	9
Stealing	4%	12
On Tick	10%	29

Table 1p Concerns about drugs

Concern type	%	N
Leads to harder drugs	12%	35
Family disputes	13%	38
General health	11%	32
Trouble with law	8%	23
School	20%	58
Addiction	5%	15
Fear of overdose	4%	12
Dealers	16%	47
Content	2%	6
Strain on friendship	2%	6

Table 1 q Sources of information about drugs

Source	%	N
Video	54%	157
Gardai	37%	108
Counselor	24%	70
Exaddict	28%	81
Magazines	57%	166
Youth Organization	20%	58
Brothers/Sisters	27%	79
Parents	45%	131
Teachers	55%	160
TV	66%	192
Radio	39%	113
Newspaper	53%	154
Friends	50%	146
Leaflets	51%	148
Drug users	30%	87
Older teenagers	27%	79

Table 1r Type of service used if respondents had a drug problem

Service	%	N
Addiction Treatment Centers	27%	79
Hospitals	13%	38
GP Services	51%	148
Drugs Helpline	38%	111
Gardai	5%	15
Church	10%	29
Youthclub	13%	38
Alcoholics Anonymous	13%	38
Narcotics Anonymous	13%	38

Table 1s Parents/guardians who spoke to respondents about drugs

Response	%	N
Yes	86%	250
No	8%	23
Did Not Answer	6%	17

Table 1t Respondents who agree that the older generation understands why respondents take drugs

Response	%	N
No	28%	81
Yes	31%	90
Don't Know	28%	81
Didn't Answer	13%	38

Table 1u People whom respondents have been in trouble with because of drugs

Person	%	N
Boy/Girlfriend	14%	41
Parents/Guardian	17%	49
Neighbors	8%	23
Friends	21%	61
Dealers	7%	20
Gardai	13%	38
School	10%	29
Work	2%	6
Does Not Apply	18%	52

Table 1v Respondents expectations of the future

Person	%	N
Go to college	30%	87
Get a well paid job	53%	154
Any job	10%	29
Unemployed	0.3%	1
Go to prison	3%	9
Settle down	30%	87
Other	3%	9

Appendix 2

Members of the Comhar Chathair Chorcaí Teo Community Forum Drugs Working Group

Ms Virginia Fitzgerald

Ms Noreen Heffernan

Mr Noel Joy

Ms Margaret Kenneally

Ms Ann Long

Ms Mary Matthews

Ms Marian McCabe

Mr Maurice McCarthy

Mr Bill Murphy

Ms Julie Murphy

Ms Marion Murray

Ms Vourneen O' Mahoney

Ms Christine O' Brien

Mr Dermot O' Connell

Mr Colm O' Herlihy

Ms Geraldine Ring

Ms Deirdre Seery

Ms Patty O' Brien.