Ringsend District Response to Drugs

Annual Report 2000

Funded by the South Inner City Local Drug Taskforce

GRADUATION EVENT AND ANNUAL REPORT
SPONSORED BY DUBLIN PORT

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Chairperson's Introduction

The Ringsend District Response to Drugs goes on to celebrate their Fifth anniversary.

One of the major highlights for the project in the year was after a successful evaluation through the National Strategic Team RDRD was recommended for mainstream funding. It was a fantastic achievement for the community-based project.



The project now has a team of six full time workers. Having the two additional workers has enabled us to develop the aftercare programmes further, also deliver extra educational programmes for the community, which was identified as a growing need. I take this opportunity to wish Paul Meleady past staff member congratulations on his successful application as staff member of Coalmine. Paul is still voluntary involved with RDRD and is a huge support to the project.

As well as young people graduating one year clean, tonight at the launch of our Annual report local people who completed the education awareness course facilitated by RDRD will also receive a certificate.

Once again a very special thanks to Dublin Port for sponsoring tonight's event we look forward to their continued support. On behalf of the management and staff, I take this opportunity to thank Jerry Kileen for all the support and wish him well in his retirement.

I commend the staff team for their dedication and excellent work they have done over the past year. The work has been both vital and unique in combating the drug problem. It is through the co-operation of staff, management, clients and all relevant agencies combined working together that has proven to be the best Impact and shown positive results.

In the report you will see a wide range of activities and achievement's. The project has seriously grown from strength to strength with wide community support.

A special thanks to the South Inner City Local Drugs Task force for all their support in helping develop RDRD. We will continue to represent RDRD on the local Task Force and support them in their vital work.

A special thanks to the local community for the continued support towards the project. The support of the community is imperative to the client's recovery in the local area. To the local groups and organisations in the area for their most vital expertise and encouragement it is deeply appreciated.

Once again I take this opportunity to thank Minister Eoin Ryan for the dedication towards our clients and project. To all the local representatives for the huge support and ongoing commitment our very special thanks. Thanks to Clanna Gael for the use of the facilities through out the year.

Congratulations to the young people who graduate tonight and to their families for that vital support. We also congratulate the local people who will receive their certificate for completion of the RDRD Awareness prevention course. A special Thanks to the facilitators Breda Murphy, Mary Doolin, Joe Grennell, Teresa Rooney and John Burke.

Finally on behalf of the management, staff, clients and indeed the local community it is most important to us all to take some time to remember our local parish priest Paul Spellman whom recently past away. Paul was not just a member of the management committee but a very special friend who gave so much of his quality time to us all, stood strong in our time of need and was a true leader. Paul will be sadly missed. The parish and all that knew him will never forget his work and kindness.

Management of the Ringsend & District Response to Drugs LTD. 28 Fitzwilliam Street, Ringsend, Dublin 4 Tel. 6677666

Flizaheth Rissett

enan person, birector	LIIZUDCIII DISSCII
Vice Chair	Patsie Doolin
Secretary	Garda Kevin Byme
Treasurer	Lisa Byrne
PRO	Daithi Doolin
Director	Tomas Crilly

MemberMargaret EarleyMemberDr. Cathaul O Sullivan

Staff Team

Chairnerson/Director

Teresa Weafer	Co-ordinator	 Staff support/supervision/managing the project.
Teresa Rooney	Project Worker	- Family Worker/Education/Housecalls
John Burke Niamh Fitzpatrick	Project Worker Support Worker	Programme Planning/Education/HousecallsClient outreach & facilitation/Housecalls
Michael Kelly Paul Clancy	Support Worker Key Worker	Client outreach & Facilitation/HousecallsAdmin/Buddy system/Contacts.

Project Management Liaison.

Lisa Byrne Daithi Doolin

As a means of ensuring good employment practices the Combat Poverty Agency publication "A Guide to Good Employment Practice in the Community & Voluntary Sector" has formed the basis for procedures.

Management meet on a monthly basis in the local Community Centre.

Full project report on operations to date presented to the management.

Management Liaison meets with staff weekly. Staff team meeting once per week.

Ringsend & District Response to Drugs. Service Structure.

Management Committee.

Monthly Meetings.

Management Staff Liaison Weekly Reports Feedback R.A.P. C.D.P

Staff Project Team.

Client.

Assessment Team Family Addict Support.

Referrals.

Satellite Clinic. R.D.R.D. Programmes. Coolmine/Marist Residential

G.P. Day

Programmes.

Beaumont Hospital.

Buddy System.

Visits. Court Cases. G.P. Appointments. House Calls. Individual Care Plans.

Dublin Corporation. Clover Hill Prison. Mountjoy Prison.

Charles St. Homeless Section. Health Board Services

Other Agencies.

Ringsend Community Centre. Ringsend Playgroup/Creche. Regal House Workshop.

Service provision in the Ringsend Irishtown Area.

Clinics - Health Board	Clients		Aftercare	Clients
Baggot Street	74	RDRD		78
Baggot Street (u 24 yrs)	29			
				_
3 G.P. Treating addicts in the	e local area			
Irishtown	19			

Assessment and Treatment options.

The core clinical team in an addiction centre consists of a Consultant Psychiatrist, GP, nursing and counselling staff. Additional services include outreach. Pharmacy Liaison, Community welfare and administration. Client assessments are carried out by the clinical team. A range of treatment options is offered including stabilisation, detoxification, methadone maintenance and in-patient detoxification. Suitability for out patient detoxification is determined by client motivation and length of usage. A multi-disciplinary approach is required as the relapse rates are high. People are prioritised for residential treatment on the basis of a range of clinical criteria (age, HIV, pregnancy, potential suicide, etc.)

Assessment and rehabilitation options through RDRD.

Services/Activities.

Client care is offered on an individual basis with access to a range of supports and Programme activities. The service centres on an individual client care plan, one-to-one Support and group activities. The approach provides the flexibility to cater for individual Needs and a support structure for clients. Clients are encouraged to take responsibility for Planning and organising activities and family members are encouraged to participate.

Clients care plan — RDRD

An initial interview is held with clients in order to assess needs and to document relevant information on drug use, treatment, medical care, legal issues and family contracts. A care plan is then drawn up to reflect the individual needs of the client. If the client has medical or Psychiatric needs the client's GP is involved in drawing up the care plan. Clients are referred to relevant agencies for detoxification if required. A contract is drawn up between the client and RDRD giving authorisation to gain feedback and urine test results from the relevant drug agency and client agreement to follow the care plan. A number of clients are referred for residential treatment in consultation with the drug treatment agency. A client care plan reflects a wide variety of needs but typically includes;

- * Breaking the cycle of drug addiction
- * Lifestyle changes
- * Personal development
- * Education and work skills
- * Re-entry and re-integration with family and community.

Each client is assigned a project worker who reviews and develops the care plan on a one-to-one basis with the client. Regular staff team assessments of client progress are carried out. An important aspect of the approach is that support is offered on an open-ended basis. The care plan may also involve a family member.

Support Services

An integral part of the approach of RDRD is developing an appropriate support system for clients. Under the Buddy System each client is assigned a project worker or a member of the addict support group. The support worker will accompany clients on visits to relevant agencies and will maintain regular contact with clients undergoing residential care. Clients have access to the support worker at weekends and can make contact by telephone when necessary. Support workers are alternated between clients in order to avoid dependency on one individual. A project worker or member of the family support group may be assigned to the family as part of the Buddy System. Outreach services are a vital component of the approach adopted by our project. Client contact is maintained through Home visits, street contact and visits to residential centres, prison, hospitals, etc. The outreach approach allows easier access to support and services for both the drug user and family member who may be reluctant to approach the project.

Programmes/Activities

A range of programmes and activities are run on a regular basis for the clients, family members and local people. Clients are encouraged to become involved to become involved in planning programme activities such as horse riding, fishing, boat trips, swimming and activity weekends. Family members and local people are also encouraged to participate in events run by RDRD. Clients are given assistance in job seeking through identification of needs, preparation of Curriculum Vitae, mock interviews, development of computer skills and referral to the local Employment Service.

The project has developed links with local businesses that provide that provide job opportunities for clients. RDRD also runs regular Parent-to-Parent Programmes in local schools in order to inform and educate parents on the drug issues. Staff members are also available to give talks on drug addiction.

Links

RDRD is linked into a strong local network of support and services. Key resources are provided by the Ringsend Action Project (Support/facilitation/Evaluation), Ringsend Training workshop (office space)Ringsend Community Centre (use of facilities) Ringsend Playgroup & Creche (support for clients) The project has links with the S. E. Health Board & S.W. Health Board, the Garda, the local Employment Service, Drug treatment clinics and residential Treatment services such as the Marist Centre in Athlone and Coolmine. There is a strong ethos of community involvement with the project and continuous feedback is provided to the community through the publication of our Annual report , Graduation ceremony, open days and events. News Four and the Ringsend Action Project News letter.

AIB Better Ireland Awards 2000.

In July 2000 the General Manager Hugh F. Calway informed the Ringsend District Response to Drugs that they were chosen as one of the 100 local award winners. This achievement was even more special as the adjudicators selected our project from almost 1,300 entries.

As a local winner, our group won £1,000, which was presented, to us at a special presentation reception. The project was then put forward to the next adjudication stage, whereby, 24 recognition award winners would be selected.

Six of these groups chosen would win a further £4,000, which was presented on the night. The atmosphere was magic with excitement filling the whole hall as the six groups were about to be announced. Our project was one of the six that was chosen as a winner. It was a fantastic achievement for the community.

The participants from RDRD were thrilled as they were for the first time part of drawing up the application. The application was supported by strong input from the families and addict support, work of the project to date, the impact on the community and peoples lives and of course achievement met by the clients.

The funding enabled us to upgrade our office equipment, the family support and addict support group were also given the opportunity to get away for a weekend to look at how the project could further their after care programmes.

We are very grateful to the AIB Better Ireland Awards and take this opportunity in thanking them for the recognition of our project.

Family Support

Family support has played a huge role in the work of RDRD. Regular calls are made **to** the family member which we call the sponsor.

The support is provided in many ways. Through regular appointments, housecalls groupwork, buddy system or just a one to one over coffee.

In the year 2000 the family support got away on weekends to look at what's important to them. After years of support one family member said "It's about looking after and caring for me now". The family support group has grown not only in numbers but also in strength and support for one another.

The group are also looking at further education for themselves. One important point the group made was the strong need for further courses to be provided in the local community for parents raising children such as prevention /education, parent to parent early signs, agencies available and knowledge of the drug issue.

RDRD plans to support the group in providing these courses and organising the programmes in the coming year.

The family support group meets every week in the Ringsend Community Centre and is given an opportunity to share in the group. In some cases issues may not be appropriate to discuss in a group setting so a one to one with a staff member is organised early in the week.

Staff members facilitating the group keep records of the group members attendance and progress to date. Regular follow up calls are made to the family member who is struggling with addiction in the home and the support is on going to that individual.

RDRD recognises that support to the father of the drug misuser is also essential in most cases this is done over the phone or a housecall. We found that the fathers of the drug misuser finds it difficult to talk in a group setting or in some cases the mother wont share in the Husbands presence. This is noted particularly in the early stages both tend to blame the other through pure frustration or denial. We encourage a united front to combat the addiction in the home.

Relationship & Trust Building

The staff team of the Ringsend District Response to Drags along with the support groups plan and organise events. RDRD encourage the clients to bring along their children to fun events organised.

The weekends away with the clients and children is an essential time out for both the parent and the child. Staff members of RDRD support the client in rebuilding a positive relationship and gaining trust again with the young person.

RDRD also use fun events and weekends away as an opportunity to get to know the children such as their hobbies, like and dislikes.

The children are also given an opportunity to engage in planning the activities and and organising weekends.

It is essential after weekend events that staff members follow up on both the clients and the child/children. This is done through housecalls or appointments made.

Staff members are also available to talk to the school if deemed appropriate. However we do encourage the parent in recovery to make the contact themselves with the school and the relevant agencies.

We have an excellent relationship with the local playgroups and crèche. Clients preparing to return to the work force or further education are given an opportunity to engage their children into the local playgroup and Crèche. This not only supports the parents but also encourages routine in the child's life.

We take this opportunity to thank the Ringsend & District Playgroups and Crèche for their vital support to the project.

Support for Parent's in recovery.

RDRD has identified the serious need of young women and men in our community. Young parents with children have little or no opportunity to go into residential treatment. This brings up the importance of developing women and children's residential with crèche facilities and appropriate supports. In most cases we found parents are inclined to refuse residential treatment due to not wanting to leave their children behind.

Education Awareness course

Education awareness programme.

The Ringsend & District Response to drugs with the support of the South Eastern Health Authority organised a six - week intense training course for local people.

We identified local people in the area with facilitation skills and asked the local people to facilitate some of the working groups on the course.

Thirteen local people attended the programmes. The attendance was excellent.

CONTENT

Guest speaker - Gary Broderick from Anna Liffey project.

Main points.

The way teenagers perceive drugs.

The way parents perceive drugs.

Alcohol was a real issue raised in the work groups.

Information on Cannabis and the effects.

Naming the drugs mentioned within the local community and looking at the effects.

Looking at prevention plans.

Plan of action for families.

Guest speakers – recovering Drug misusers.

Two guest speakers, one drug free and one stabilised.

Discussion on how drugs effected their lives.

Questions & Answers.

Work groups

Questions put to the work groups.

- 1. When would your alarm bells go off?
- 2. How would you deal with the situation?
- 3. What do you know about drugs and the dangers?

Feedback

Signs; Changed behaviour, new faces, attitudes, lost interest in hobbies, appearance, sleeping habits, Eating habits, money missing, school work falling etc.

(NOTED. Some of the above signs may also be related to other issues such as bullying, going through puberty etc.

Discussions and feedback was the start point of a plan.

- 1. Parents need to inform themselves on the drug issue.
- 2. Seek help for themselves and try maintain a positive relationship with the young person.

Video work shops.

Video based on the true stories of women in a family support group. Looking at support groups. In the local area and the inner city. Informing yourself on what's available.

Two guest speaker – Family members.

Questions and answers.

Drug squad. Display of drugs and discussion on effects. Useful contacts.

Guest speaker Gary Broderick, covering in detail the different drug projects.

Benefits of support groups and counselling in relation to drug use.

Work groups worked on designing a plan, which will be presented in the near future.

Case History.

Noel (name changed)

Age. 21

Drug Use Alcohol

Hash Ecstasy Benzos Methadone

Heroin (Smoking)

Within one year Heroin (Injecting)

Detox Two (2)

Parents aware of situation. Yes.

Is there any person at home using Drugs? Yes

(Two Brothers)

Have you any legal charges pending?

Yes

Have you ever undertaken psychiatric treatment? Yes

Referred to psychiatrist hospital for five (5) days.

Are you currently receiving medical care? Yes

Noel is currently in residential detox unit.

School.

Noel left school at the age of fourteen (14). He began loitering on street comers and met with a group of older teenagers. From this his drug use spiralled.

By the age of fifteen Noel was injecting heroin.

Noel came to R.D.R.D. two years ago. He became involved in one to one's with staff members. Through his motivation he decided he wanted to become drug free.

R.D.R.D. referred Noel to a residential detox unit from where he will go on to a drug free rehabilitation centre.

Noel is now well on his way to becoming drug free.

Case History.

Joan (name changed)

Age. 25

Drug Use Alcohol

Hash Benzos Methadone

Heroin (Smoking)

Within two years. Heroin (Injecting)

DetoxTwoParents aware of situation.YesPartner aware of situation.YesIs there any person at home using Drugs?NoHave you any legal charges pending?NoHave you ever undertaken psychiatric treatment?No

Are you currently receiving medical care?

Joan is currently on a methadone programme.

School.

Joan left school when she was sixteen years old. While at school she was experimenting with drugs. After leaving school her drug use became more frequent.

By seventeen (17) she was injecting heroin.

Through support of RDRD Joan is progressing very well and is stabilised on a methadone programme.

Joan is also holding down full time employment, and is enhancing her career prospects by taking various courses.

Working together makes all the difference

The Ringsend Action Project the local community development organisation acts as a key support for RDRD. The staff and management regularly avails of the expertise from the RAP project. Evaluation, facilitation and project planning is supported by the community development organisation and recorded performance.

The in built evaluation system has become an essential part of the RDRD project. It has helped the project to become more focused in the delivery of service and concentrate on work that can

be achieved. It has also played a strong role in developing RDRD staff and management into a strong task oriented team.

A very special Thank you to the RAP management and project leader Joseph Grennell for the time and effort put into our organisation.

Major issues facing young people in Ringsend & Irishtown

(Feedback from young people report Playing Behind The Pramsheds -SICDG)

On the issue of Alcohol and drugs there is some disagreement about the relative size of each problem. Within one group there was a virtual consensus that illegal drugs pose a bigger problem for young people than alcohol. One young person did, however, point to the significance of the alcohol problem -' alcohol gets boring, you go on to drugs.'

Most young people start to drink at 12/13 years, buying from the off-licence (or having others buy for them). It is thought that young people can start to smoke cannabis as early as 12/13 years or younger. Ecstasy is described by one group as being widespread for 15 year olds - a progression which is explained very simply - 'If you've been taking hash for a while, its not going to give you the same buzz...' Hash and E are understood to be available locally. While Heroin is described as a serious problem in the area, it is understood to be a problem for the twenty upward age group.

Young people can identify *other* young people 'at risk' within the community. They can identify 'young drug misusers' who are not accessing care and in denial. They also identify 'a lot of drinking' among young people - dangerous amounts' of alcohol and young people 'left lying on the street.' They would also, in some cases, appear to be aware of young people who are being put out of their homes. Neither the extent of such problems nor numbers of young people affected is, however, clear.

More generally young people cite the above issues - alcohol, drugs - and others - early school leaving and treatment by some statutory personnel - among the difficulties facing young people.

RDRD, Recommendations.

Further parent to parent education courses.

Wider creative opportunities for young people. (RDRD is represented on the new Youth services board for

Ringsend & Irishtown)

Research on the drug issue to date, this is not only identified as an essential need by the young people also recognised by the South Inner City Task Force, RDRD, local Network, Community groups and organisations.

RDRD are represented on the following......

South Inner City Task Force.
City-Wide Family Network.
S.I.C. Treatment/Rehabilitation
S.I.C. Education/Prevention
Ringsend & Irishtown Network group
Ringsend & Irishtown Monitoring Committee
Recommendations made by RDRD

The Review of the National Strategic Team

In our submission we highlighted the importance of the local drug Task Forces as an essential positive step in the right direction.

Local communities were given an opportunity in decision making. It gave the statutory bodies an opportunity to engage with voluntary and community this happened at various degrees of success.

With the help of the Local Task Force RDRD has built up a strong working relationship with the local satellite clinic. A member of the Health Board is also on the Ringsend District Response to Drugs management committee.

RDRD recommended that the NST needs to ensure that community based drug projects have a clear partnership approach with the local satellite clinics and the Community Development Projects. The satellite clinics need to recognise organisations like RDRD in the local community as a resource and use this as a resource.

In Ringsend a monitoring committee was set up. The group is made up of local people, Garda, EHB and RDRD. The committee worked on a contract for the satellite clinic which was welcomed by both the community and the Health Board.

Through our experience there is a need to have in every community 'project Link workers". The workers work between both the projects and the clinics. The workers build up relationships with the clients in the local clinic and provide the necessary information on all the relevant services and contact names in the relevant area. They also provide if deemed appropriate a buddy system to the client who shows an interest in rehabilitation.

Research/Policy

In our experience the community don't have the luxury or space to deal with policy development and research. It has clearly been identified by a wide range of services a need to support policy and research development at a community level. It is proposed to have this recommendation highlighted in the Forthcoming South Inner City Drug TF plan.

Survey done with 30 clients.

1. Career interests

Drama	Art	Community/Drug Work	Administration	istration Not sure	
5	3	15	2	5	

Other interests mentioned.

Computers

Literacy

Health information

Job seeking skills

News letter.

Personal Development

Parenting programmes

2. Would you take up the opportunity of developing/gaming skills.

Yes No 30 0

3. Would you avail of a day CEP programme?

Yes No 27 3

4. Would you be prepared to travel outside the local area?

Yes No

3 27

5. What is your preferred location for a day programme?

Outside area Local area Shared premises with local groups.

3 22 5

Should the Ringsend District Response to Drugs offer C.E.P opportunities to recovering drug misusers.

Yes No 30 0

On the basis of the survey outcome and a clear growing need identified over the past year the Ringsend District Response to Drugs with the support of the South Inner City Local Drug Task Force has made an application to FAS for a C.E. programme for recovering drug misusers.

Poetry from a Mother

Lord I'm getting on now Someday I'll pass away So please hear my prayer Lord Before My Final Day

Please help my son Lord
Because he's injecting Heroin the Gear
I don't want to bury him
But it's my biggest fear
My son's just a young man
With his whole life ahead
But the more Heroin he's injecting
The more I picture him dead
My son is a father
With kid's of his own
So please try to cure him
So they won't be left alone

He looks so tired and so frail now I get frightened and scared Because he's just a shadow Of the boy I once reared Lord I will not lie down now Lord I will not die Until I have your promise That you'll cure my boy.

NIGHT WATCH

I creep in your room
To see if you're there
Beside you your works
In your eyes the painful glare
I watch over you as much as I can
But each time I wonder if I'll find
A dead man
I wish I could take all that craving away
It's hard to watch I don't want to stay
But I won't leave you all on your own
Because before you became an addict
I remember the love that you had shown

MY SON

This a profile of my only son He had a problem with heroin He could not overcome Some nights he just sat there Dying sick and he'd cry He'd say I hate being an addict Mam I just want to die.

Mam I went down the wrong road And I was offered the stuff I've been living in hell since Now I've had enough

Mam please tell the young folk
Not to take gear
They might listen to you now
If I'm no longer here
He said Mam I don't want to hurt you
I don't want you to cry
But I hate being an addict
So I might as well die.

GRADUATION 2000

During April, Ringsend District Response to Drugs held a celebration night in the Clanna Gael Hall to congratulate ten of the participants who achieved drug free. Minister Eoin Ryan awarded the ten young people on the evening.

Jerry Killeen representing Dublin Port who sponsored the event presented seventeen family members with bouquets.

Jerry Killeen was thanked by RDRD chairperson Elizabeth Bissett for Dublin Port's support and commitment to the project over the years and particularly their generous donation, which enabled such a great night to be enjoyed by all.

We also take this opportunity to wish Jerry Killeen well in his future retirement. Jerry has always been a tower of strength to the staff and project of RDRD and will be missed by all.

FINANCE

Auditors

Farrell-Grant-Sparks Chartered Accountants Molyneux House Bride St. Dublin 8.

Acknowledgements

We wish to acknowledge the support and assistance of the following people.

Dublin Port

We wish to say a very special thanks to Dublin Port for all their support and assistance to our project. Dublin Port has also once again funded the launch of our Annual report and the graduation of some of our clients.

South Inner City Taskforce.

Drugs Strategy Team.

Ringsend Action Project.

Ringsend District Community centre.

Ringsend Play Group & Creche.

Ringsend Training Workshop.

Ringsend & Irishtown Satellite Clinic.

Coolmine.

Baggot St.

Trinity Court.

Rutland Centre

.Marist Rehabilitation Centre.

Cuan Dara.

Aiseiri.

Ringsend Girls National National

Ringsend Boys National School.

Ringsend Technical School.

Ana Liffey Drug Project

St Patrick's Church Ringsend

St. Andrews Resource Centre.

Merchants Quay Project.

Irishtown Garda Station.

Money Advice Budgeting Ser.