

**THIRD INTERIM REPORT ON RESEARCH INTO THE  
EXTENT OF SUBSTANCE ABUSE IN THE  
WESTERN HEALTH BOARD AREA IN  
CHILDREN UP TO 18 YEARS**

**Introduction**

At this stage, mid-December 1994, I have completed most of the background work, including interviews with key personnel throughout the Health Board. The survey on substance abuse among teenagers in Secondary Schools and in Training Centres for early school leavers is well under way, and will shortly be completed. The data will be collated and analysed over the next few months. The results of the Pilot Study are not available, as part of the data will be included in the main study. There was a good response rate from the General Practitioners in the Western Health Board to the postal survey on their involvement with managing cases of teenage substance use, and that information is included in this report.

Initially, I shall outline the information which was gathered by me by interviewing key personnel working in Co. Mayo and Co. Roscommon.

**A. INTERVIEWS RE CO. MAYO**

**1. Youth Workers**

Youth Workers believe that alcohol is the main substance used by teenagers in Co. Mayo. One of the Youth Workers did a survey among 25 Youth Clubs in South Mayo about 2-3 years ago.

At that stage, 50% of the teenagers had had a full drink of alcohol and 20% of these drank alcohol weekly. About 5-10% had tried cannabis, but none admitted to any other form of drug use.

It was felt that underage drinking was a problem, especially where there were no activities for teenagers. They also believed that rural pubs tend to be more lenient in serving underage drinkers than the towns like Westport, Castlebar and Ballina, but in these towns, alcohol may be bought in Off-Licences.

Cannabis was believed to be available in nearly every town in Mayo, with the supply coming from Galway City and Tuam in the south of the county and Ballina in the north. Third level students are believed to bring home cannabis to all parts of Mayo at breaks and weekends. Other drugs are not believed to be freely available in Mayo, though some tablets, e.g. Ecstasy may be available.

## **2. General Practitioners**

Some G.P.'s whose names were given to me as being particularly interested in the topic were interviewed. Again alcohol was seen as the main substance used by teenagers in Co. Mayo, especially at times of festivals and at weekends. A confidential survey done by one G.P., in second level Schools in a rural area of Mayo in 1988, on a sample size of 324, showed that the numbers of underage regular drinkers rose from 0% at 13 years old to 25% of boys and 7% of girls at 17 years. The numbers who had taken alcohol a few times rose from 44% of boys and 34% of girls at the age of 13 years, to 67% of boys and 44% of girls at 17 years.

The G.P.'s felt that the use of illicit drugs among teenagers in Co. Mayo was not widespread. Some parents reported anxieties re possible drug use by their children, but few were proved.

## **3. Psychiatric Service**

In the past year no teenagers under 18 years were admitted or counselled by the alcohol counselling service in Co. Mayo. There were 5 treated in the past year between the ages. 18 to 21 years in Mayo for alcohol problems. Two were treated who had used cannabis, in one the main problem was alcohol and the second case was treated for legal reasons.

## **4. Juvenile Liaison Service**

The duties of the J.L.O., have changed recently in that now offences, e.g. being drunk are now covered as well as crime, e.g. theft of drink in teenagers up to 18 years old. It is felt that about 20-25% of the J.L.O. workload is alcohol related.

While there have been suspicions of under 18 year olds using cannabis, none have been proved in the past year.

#### **5. Garda Service**

Drugs are available in most areas of Mayo. The main drugs used by teenagers in Mayo are cannabis and solvents. There was felt to be a relatively high level of solvent abuse among school students, especially girls. Cannabis had been found on a few occasions, but generally it is only a small group of 10-12 teenagers who would use it.

Other drugs, e.g. LSD, speed, are not found that often, though are known to be available in Galway. Heroin or cocaine have not been found in the county.

#### **6. Probation Service**

The Probation Officers felt that alcohol and drugs addiction are major factors involved in the Probation Service workload. A review of their case load in 1990 found that in 80% of their clients who were under 18 years, alcohol abuse either by the client or the clients parents, played a major factor in the referral to the Service. It was felt that when parents have alcohol problems this leads to poor parenting skills and a subsequent high prevalence of alcohol abuse among the children. They found that 50-60% of clients with alcohol problems have alcoholic parents.

The Probation Officers feel that many professionals, including medical professionals, do not recognize alcohol or drug abuse in teenagers, and so subsequently there are low official statistics on the extent of the problem.

It is only in the past few years that illicit drug use has become an issue. Prior to that, alcohol was the only substance used.

In the Ballina area, most of the clients are from County Council housing estates, or from disadvantaged areas where there is poor self-esteem and no motivation.

Ballinrobe, which has a high percentage (17%) of the population who are settled travellers, and has high unemployment, has a lot of alcohol abuse.

In Castlebar and other towns in Mayo, the clients come from across the socio-economic spectrum.

In the current caseload of under 18 year-old teenagers, about 50% use alcohol and drugs (cannabis and solvents), and 50% alcohol alone.

The illicit drug supply comes from Galway, Athlone, Limerick and Dublin. Castlebar has mainly small dealers who supply small local networks of friends. Ballina had a few larger dealers, but many have been caught.

There is a regular supply of cannabis, but a very erratic supply of tablets, e.g. LSD, Ecstasy etc.

## **7. Social Work Service**

The Social Workers feel that alcohol and drug use among teenagers is a symptom of other underlying problems, e.g. living in disadvantaged areas or housing estates with no ancillary services.

On a review of their caseload, very few of the children were known to abuse either alcohol or drugs, as many of the children were under 10 years old. However, in about 30% of cases, parental abuse of alcohol was seen to be a major factor in referral of the cases to the Social Work Department.

## **B. INTERVIEWS RE CO. ROSCOMMON**

### **1. Youth Workers**

While there is only one permanent Youth Worker based in Co. Roscommon, North Roscommon is also covered by a Youth Worker based in Sligo, and South Roscommon by a Youth Worker based in Galway. The overall impression is that the main substance used by under 18-year-olds is alcohol, who have relatively easy access to alcohol. It was also felt that cannabis could be obtained in most parts of Roscommon.

**2. Probation Service**

The Probation Officer for Co. Roscommon believes that both alcohol and drug use among teenagers is a problem in the area. The majority of teenagers on the Probation Service caseload have alcohol-related problems. While there are no teenagers on the case-load presently with drug use, it is believed that teenagers are using drugs, mainly cannabis, but they are not reaching the Courts.

**3. Garda Service**

It is felt that the issue of underage drinking and drug use is exaggerated in the area by some reports, while it was recognised that the official figures underestimate the actual numbers using alcohol and drugs.

The main time for underage drinking in the area occurs after exams, exam results or 'debs' dances - otherwise it is not a major problem.

Drugs which are available in Roscommon include cannabis tablets and solvents. There is no heroin or cocaine available. Athlone is the main centre of distribution of drugs for Roscommon.

**4. Juvenile Liaison Service**

While it was recognized that some underage drinking occurs in all parts of Roscommon, it does not cause many problems and is not a major factor in the J.L.O's case load. There are currently no juveniles on the case load with drug use problems.

**5. Psychiatric Service**

In the past year there were two female teenagers admitted with a diagnosis of 'glue-sniffing', and there were no teenagers treated for alcohol problems.

## **6. Social Work Department**

Again, underage drinking was felt to be the main substance used, being found all over Roscommon.

Drug use by teenagers in Roscommon involves mainly cannabis and solvents, but the extent of it is not known. It has been located in all towns, especially Boyle, Ballaghaderreen and Roscommon. There has been no mention of any other drugs.

Use of substances occurs across all socio-economic groups, but misuse is associated with cultural and environmental factors which favour substance misuse. It is usually only misuse in the lower socio-economic groups which come to attention, as middle and higher socio-economic groups can cover up use more easily.

## **C. GENERAL PRACTITIONER SURVEY**

189 G.P.'s in the Western Health Board were surveyed by post. They were asked questions as to the numbers of teenagers under 18 years whom they had treated in the past year with alcohol or drug problems. The answers were broken down by gender and by age into those under 15 years and those between 15 and 18 years. The G.P.'s were also asked which Service they had referred to when necessary, and what additional service, if any, the Western Health Board should provide to deal with teenage alcohol and drug use.

129 of the 189 G.P.'s in the Western Health Board replied, which is a response rate of 68%.

(i) 72 of the 103 Doctors surveyed in Galway responded, a response of 70%.

The following statistics relate to the 72 G.P.'s who replied:

46 G.P.'s treated no cases of alcohol or drug use in under 18 year-olds.

12 G.P.'s treated alcohol use only, in under 18 year-olds.

9 G.P.'s treated both alcohol and drug use in under 18 year-olds.

2 G.P.'s treated drug use only in under 18 year-olds.

The following table shows the numbers seen in Co. Galway over a one year period.

		<15		>15		
	MALE	FEMALE	MALE	FEMALE	TOTAL	
Alcohol	10	7	53	37	107	
Drugs	0	2	12	8	22	

The ratio of cases seen in Galway City versus the rest of the county was 2:1 for both alcohol and drugs.

The drugs used were as follows:

1. Cannabis . . . . . 12 cases.
2. Solvents . . . . . 6 cases.
3. Ecstasy . . . . . 5 cases.
4. L.S.D. . . . . 3 cases.
5. Opiates . . . . . 1 case.
6. Cocaine . . . . . 1 case.
7. Prescribed Medication . . . . . 1 case.

The Services used for alcohol problems were Child Psychiatry, Adult Psychiatry and the Orthopaedic Service (following a R.T.A.). In most cases no referral was deemed necessary.

The Services used for drug problems were Child Psychiatry, Adult Psychiatry and a Medical admission. In about 50% of cases, no referral was necessary.

(ii) **Co. Mayo**

43 out of the 62 G.P.'s surveyed in Mayo responded, a response of 69%.

The following statistics relate to those G.P.'s who responded:

- 25 G.P.'s treated no cases of alcohol or drug use in under 18 year-olds.
- 13 G.P.'s treated cases of alcohol use in under 18 year-olds.
- 5 G.P.'s treated cases of both alcohol and drug use in under 18 year-olds.

The following table shows the number of cases seen in Mayo over a one year period.

	<15		>15		
	MALE	FEMALE	MALE	FEMALE	TOTAL
Alcohol	6	5	34	50	95
Drugs	2	0	12	5	19

The cases were evenly distributed throughout the county.

The drugs used are as follows:

1. Solvents . . . . . 8 cases.
2. Prescribed Treatment . . . . . 6 cases.
3. Cannabis . . . . . 5 cases.
4. Ecstasy . . . . . 5 cases.
5. Amphetamines . . . . . 1 case.

Referrals were made to the Child Psychiatry Service in Galway, Adult Psychiatry, Psychology and a general medical admission. Again in many cases, referral was not necessary.

(iii) **Roscommon**

14 out of the 24 G.P.'s surveyed responded, a response rate of 58%. The following statistics relate to the 14 who responded:

- 8 G.P.'s treated no cases of alcohol or drug use in under 18 year-olds.
- 4 G.P.'s treated alcohol use in under 18 year-olds.
- 1 G.P.'s treated drug use in under 18 year-olds.
- 1 G.P.'s treated both alcohol and drug use in under 18 year-olds.



The following table shows the numbers of cases seen in Roscommon.

	<15		>15		
	MALE	FEMALE	MALE	FEMALE	TOTAL
Alcohol	8	6	12	11	37
Drugs	2	0	1	0	3

Those cases that were referred, were referred to either the Child Psychiatric Service in Galway, or the Adult Psychiatric Service in Roscommon.

The cases were evenly distributed throughout the county.

Solvent abuse was the drug in all three cases.

The total number of cases seen by G.P.'s in the Western Health Board in a one-year period is seen in the following table.

	<15		>15		
	MALE	FEMALE	MALE	FEMALE	TOTAL
Alcohol	24	18	99	98	239
Drugs	4	2	25	13	44

There were 60 cases of alcohol abuse in under 15 year-olds.

There were 6 cases of drug abuse in under 15 year-olds.

There were 197 cases of alcohol abuse in 15-18 year-olds.

There were 38 cases of drug abuse in 15-18 year olds.

Responses to question re what additional service should be provided by the Western Health Board.

1. Education of teenagers, parents and health professionals, on alcohol and drugs.
2. Extension of alcohol and addiction counselling services in the three counties.
3. Child Psychiatrist based in Co. Mayo.

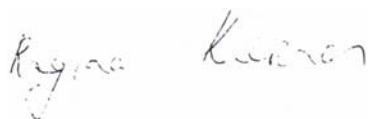
Most of the other responses relate to the setting up of an I.D. Card system for teenagers which should be strictly enforced, increased penalties or Publicans, Shop-keepers etc., who sell alcohol to minors.

### **Conclusion**

This report finishes the background information which was collected in the months since I started this research. As stated in the introduction, the gathering of data from School students and those attending Training Centres is nearly complete. The collation and analysis of data is the longest part of any research and will take up to 6 months. I hope that the final report will be prepared by June 1995.

This will be the last of the Interim Reports prior to the Final Report, but the Health Board will be kept apprised with progress in the preparation of the Report.

SIGNED:

A handwritten signature in cursive script, appearing to read "Regina Kiernan".

DR. REGINA KIERNAN,  
RESEARCH OFFICER.