THE PREVALENCE OF DRUG USE IN THE DUBLIN NORTH-EAST AREAS OF BONNYBROOK, FAIRFIELD, EDENMORE KILMORE AND CLONSHAUGH/RIVERSIDE

A report prepared by Ray Smith of the Group Analytic Practice for the Dublin North East Drugs Task Force

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**The Report**

Ray Smith would like to thank the many people who gave their time to him during the completion of this report. Particular thanks to the groups of people and individuals working in the community who met with him. Thanks to the local Garda (Juvenile Liaison Officer), to the Area Medical Officer and General Practioners in Eastern Health Board Area 8, to the Public Health Nurses and addiction counsellors working in Area 8, to the social worker in the Infectious Diseases Clinic in Beaumont Hospital, to the School-Home Liaison Teachers working in the area, to community organisations, representatives of Dublin Corporation Community Section and Youth Services. Thanks to Ann Marie who worked with me in the compiling of the report.

Finally, special thanks to those currently using drugs who participated in the research.
Background to the Study

The purpose of the research is to examine the prevalence of drug use in the areas of Bonnybrook, Fairfield, Edenmore, Kilmore and Clonshaugh/Riverside. In the report consideration is given to the number of drug users in each of the areas, their age, gender, the types of drug used, duration of use and the method of use. While the report presents its findings according to each area, it is important to note that the areas concerned are closely situated geographically and cannot be totally separated. There is, therefore, crossover between them.

Methodology

In order to ascertain levels of drug use in the areas concerned, a questionnaire was drawn up and administered both on an individual basis and also completed following group discussion with relevant persons. These included Community Workers, Public Health Nurses, the Area Medical Officer, social workers, members of the Garda Juvenile Liaison Service, School-Home Liaison Teachers, GPs and drug users themselves from each of the five areas. While it is accepted that such an approach cannot give a fully comprehensive or absolute picture, it does provide an indication of the level of drug usage in the areas from the perspective of those with the most relevant knowledge.

In the questionnaire data sought included;

- Estimated numbers of drug users in the area,
- Most commonly used drug,
- Method of use,
- Duration of use,
- Age of user,
- Gender of user.
Structure of the Report

The report first comments on the wider situation with regard to drug use in the Dublin area, drawing on recently published material from the Garda Research Unit (1997), in addition to information from the Health Research Board and the Eastern Health Board.

The report then goes on to the areas being specifically examined, Bonnybrook, Fail-field, Edenmore, Kilmore and Clonshaugh/Riverside. A brief area profile is given on each, followed by the research findings (where available). The extent of the findings may vary according to the quality of the data provided for each area.

The report concludes by providing a summary of the findings and a list of recommendations which emerged in the course of interviews which were conducted.

Wider Current Situation

The number of individuals who are using drugs in the Dublin area cannot be established with absolute accuracy. However, a recent report published by the Garda Research Unit (1997) does provide an indication of numbers currently involved in taking of hard drugs. It should be noted however, that compared to locally provided information in this report, Garda figures of those involved in drug use represent an underestimation, as they are based only on those persons known to the Gardai.

Using data from records held at station level, the study identifies ‘with certainty’ 4,105 individuals who are involved in hard drug use.

- The majority of these individuals were male, unemployed, single and living at home.
- 80% of hard drug users are in the fifteen to thirty age group, with the youngest known user only 12 years old and the oldest, 61 years.

1 The term ‘hard drugs’ refers to opiates, stimulants, hypnotics and hallucinogens. Cannabis for the purpose of the project was not considered a hard drug.
2 These are people who have come into contact with the Gardai by being either arrested, charged, or as suspects for criminal activity. We are aware that there are many people who do not come into contact with the Gardai.
The principle drug abused is heroin.

The majority of those involved have some sort of criminal record, (p.ix)

Out of the total number of 4,105 individuals, a sample of 352 was selected and interviewed by Garda members. The results of the survey showed that;

- The majority, 90%, left school before they were 16 years old and 66% had no educational qualification on leaving school.
- The typical age at which respondents first became involved in drug taking was 15 -17 years, with 24% aged between 10 and 14 years.
- Cannabis was the initial drug for the majority, but a significant proportion, 30%, started with heroin.
- Most, 80%, had either a poor understanding or understood nothing about the effects of drug use when they first tried drugs.
- Poly drug use appeared to be the norm, but for almost all, 96%, heroin was the main drug of choice.
- Most respondents (66%) sourced their drugs within their own neighbourhood, primarily from a known local dealer.

Two group interviews were carried out, one with public health nurses working in Health Board Area 8 and the other with School-Home Liaison Officers also working in the area, in addition to an interview with the Social Worker in the Infectious Diseases Clinic in Beaumont Hospital. Together these provide a general picture of the areas this report is concerned with. Before moving on to more specific findings a summary is given of the discussions at these meetings.

**Meeting with Public Health Nurses working in Area 8**

Although the public health nurses had no exact figures, they were aware of a high level of drug use in their area. While their work did not directly involve them with drug users, through visits to families they were aware of the problem. One nurse, for example, stated that while attending a woman with a serious illness it emerged that three children in the family were abusing drugs. The nurses also attended drug users
who required dressings for abscesses etc. particularly in the case of young mothers. These young mothers had not come to their attention for ante-natal care, however they were involved with drug using mothers and their babies for post-natal care. Many of these babies had had detoxifications.

The feeling among the nurses spoken to was that their experience was one of being like ‘a fire brigade service’, ‘called in after things happened’. Instead of this being the situation, they wished to be involved ‘from the beginning’. A number of points were made by the Group;

- They were aware of women who may have considered residential drug treatment if they could bring their child with them to treatment.
- They had received a number of enquiries from drug users seeking suitable GPs.
- Some users preferred if they could be referred to GPs providing a methadone treatment service, outside of their own community.
- The nurses, in the course of their work, had listened to older people’s anxieties regarding the problem of drugs in the areas.
- They were aware of a number of deaths, which although not confirmed, may have been drug related.
- Prostitution was engaged in, in some cases, in order to buy drugs.
- The nurses felt that as they had links with other professionals in the area, in addition to contact with families, they were a valuable resource which was currently being underutilised.
- Further training in the area of drug abuse was felt necessary.

**Meeting with School-Home Liaison Teachers**

The teachers met with, in the course of the research, viewed themselves as being in a similar position to that of the Public Health Nurses interviewed. Through their work with children and their families they were aware of other problems which may exist within the household. The teachers spoken to;

- knew of at least ten families dealing in drugs in the area,
• were aware of one child (an early school leaver) now acting as a ‘runner’ for a drug pusher,
• knew of one child who had started using drugs at eleven years of age,
• were aware of many families where more than one person was using drugs,
• highlighted the fact that the local community knows of drug dealing families in their area
to the point where children of those families are ‘called names in the school yard’.

At one of these meetings, which also included a local community voluntary worker, it was stated
that very obvious drug dealing was noticeable in the area and concern was expressed regarding
the complacency with which this is treated by the community, bordering on an acceptance of drug
use in disadvantaged areas. Very often the issue of drug abuse would be brought to their attention
by children innocently reporting it in class e.g. telling of drug squad raids on their homes and the
terror they felt on seeing their father being dragged out of bed.

The teachers stated that concern regarding these children had arisen as far back as the early
1990s, at which time they had presented a proposal to the Department of Education with the
assistance of social workers, youth workers and public health nurses working in the area. The
project proposed, aimed to cater for 25 children whose needs, it was felt could not be met within
existing educational structures. An alternative programme was proposed (The Youth Encounter
Project) which would;

a) meet both the educational and emotional needs of these children with a view to improving
the ability of each child to cope in his/her own environment.

b) support the local community in looking at alternative ways of dealing with truant and
delinquent behaviour in young children and

c) to promote positive attitudes towards self and families within the community. The proposal
was however, not acted upon by the Department of Education.

A number of programmes are offered by the Home School Liaison Teachers in the area, all of
whom felt that there is a need to target children earlier, both in terms of
their educational and emotional development, in addition to involving and offering support to parents. This view was endorsed by the local voluntary community worker.

Similarly to the Public Health Nurses spoken to, the teachers felt that they were well positioned in terms of identifying and providing support or referral to families where there was a problem of drug abuse.

**Meeting with Social Worker (Infectious Diseases Clinic), Beaumont Hospital**

The social worker met with knew of twenty-two people (18 men and 4 women), attending the unit, all of whom had grown up in the area the report is concerned with, who have acquired HIV through their drug use. The majority of this group were also infected with Hepatitis C and as both viruses are acquired through needle sharing, this has serious implications for the local community. Some of the persons concerned may have shared needles while unaware of their status. The nearest needle exchanges for people from the area are in Summerhill (which operates once a week) and North Strand (also operating once a week). Experience has shown, however, that because of the cost of travel and other factors involved, many drug users do not avail of needle exchanges. However, in the case of Merchants Quay (see below) where the majority of users attended, the extra holistic services offered there, may be attractive to them.

Eastern Health Board figures for the Dublin 5 area (this only includes Edenmore and Kilmore) show that;

- a total of 130 people are attending needle exchanges around Dublin.
- 81 of these attend Merchants Quay, 17 attend North Strand, 14 attend Summerhill, 7 attend Ballymun, and 11 attend Baggot Street.

Eastern Health Board figures for the Dublin 17 area (which includes Bonnybrook and Fairfield) indicate that;

- a total of 91 people are attending needle exchange.
- 64 of these attend Merchants Quay, 11 attend Baggot Street, 7 attend Summerhill, 4 attend North Strand, 2 attend Ballyfermot and Ballymun and 1 attends Wellmount.

These low attendance figures highlight the need for a locally based service for drug users, with other services available.

Each of the areas are profiled below and the specific research findings are presented.

1. **Bonnybrook/Fairfield**

**Area Profile**

Bonnybrook and Fairfield were developed by the local authority in the 1970s, The two areas are separated by the Stardust Memorial Park. Bonnybrook has a population of 8,869, over 50% of whom are aged under 25 years. Bonnybrook is also the least well developed of the two areas with few facilities for young people. The premises of the Northside Partnership is situated in the Bonnybrook area. The local St. Joseph’s National School was the first large national school built by the Department of Education in the country, reflecting the large population of young children in the area.

In a recent report prepared by the Dublin North East Drugs Task Force (1997) the “drug problem was considered to be very bad by residents of both areas”(p.22). The report also pointed to the fact that there is currently no drug treatment service in the area.

**Bonnybrook - Research Findings**

Questionnaires were administered in the Bonnybrook area to Community leaders, Youth Workers and other local persons.
**Number, Age and Gender of Drug Users**

It is estimated that 200 people are using drugs in the Bonnybrook area. The majority of these (72%) are under 21 years of age, with 25% in the 21 to 25 age group and 3% over 25 years. Males form the majority, 60%, of those using drugs in the area while 40% are female. This male majority is consistent across the age categories. Table 1a outlines the breakdown of age and gender of drug users.

![Table 1a Age and Gender of Users - Bonnybrook](image)

**Type of Drug Used/Method of Use**

The principle drug used was heroin. People in the under 21 age category were also using acid and ecstasy, while those over 25 years used ‘sleepers’ in addition to heroin.

Method of use also varied according to age. Those in the under 21 year age category were using drugs (acid and ecstasy) orally, smoking hash and heroin in addition to skin popping heroin - subcutaneous injecting (usually in their late teens). No one in this age group was reported to be injecting or snorting drugs. However, when the older age groups are examined, it was found that those in the 21-25 age group had moved on to injecting heroin, in addition to smoking and skin popping the drug. This was similarly the case for those over 25 years of age.
**Duration of Use**

Duration of drug use varied with age, with those in the eldest age category, 25 years and over, having used drugs for the longest period of time, ten to fifteen years. However, as can be seen from Table 1b, some in the under 21 year age group had been involved in drug usage for up to eight years. (No figures are available to indicate the gender of these individuals nor their method of usage).

![Table 1b Duration of Use]

**2. Fail-field - Research Findings**

Two questionnaires were completed in the Fairfield area, one by a local voluntary community drugs worker, the second following a meeting with local community activists and community project workers. The data contained in both these questionnaires will be presented separately as one contains details on forty-five individuals (although the interviewee, in addition to having detailed knowledge of these forty-five also personally knew of eighty people using drugs in the area), while the other report represents an estimation by the groups of persons present at the meeting.

The group of local community activists and project workers estimated that there were 600 drug users in the Fairfield area. Although this may seem high compared to the number quoted by the other interviewee, it must be noted that,
• this one individual actually knew 80 people using drugs in the area and had profile details on forty-five.
• the eighty persons may or may not be included in the estimated six hundred.
• members of the group also work in the Moatview area, hence drug users from this area may have been included.

**Number, Age and Gender of Drug Users**

Of the 45 known users, over half, 51%, were in the under 21 age group, with the youngest aged sixteen years. Over a third, 31%, were aged between twenty-one and twenty-five, with the remainder, 18%, over 25 years old. Two families were known to have more than one user. In one case four adult children were abusing drugs, while in another there were three adult children.

The vast majority (71%) of drug users were male. This was the situation across the age groups, although the gender gap did narrow slightly in the 21 to 25 age category, where 36% of those using drugs were female. In the older age category two women using drugs (injecting) were known to be involved in prostitution in order to feed their habit.

While the figures differ in the second questionnaire completed in the area, the trend in terms of age and gender of drug users remains similar. Of the estimated 600 users, again over half (52%) were thought to be under 21 years, 42% were in the 21 to 25 age group, however, here only 5% were over 25 years.

Again the majority of users were thought to be male; 75% of those under 21 years. Interestingly in the 21 to 25 age category respondents felt that there was an even split between male and female users. The proportions reverted again in the over 25 year group (65%/35%).

**Type of Drug Used/Method of Use**

The principle drug used was heroin. People in the under 21 age category were also using hash, sleepers (rohipnol) and valium, with a similar usage pattern for those over
25 years of age. All drug users were reported to be using rohipnol and valium. Valium was said to be available ‘5 for a £1’ locally.

Method of usage also varied according to age. Those in the under 21 year age category were using drugs (sleepers and valium) orally, smoking hash and heroin in addition to skin popping heroin. No one in this age group was reported to be injecting or snorting drugs. However, when the older age groups are examined, it was found that those in the 21-25 age group had moved on to injecting heroin, in addition to smoking the drug. This was similarly the case for those over 25 years of age.

**Duration of Use**

Duration of drug use varied with age, with those in the eldest age category, 25 years and over, having used drugs for the longest period of time, up to fourteen years. Those in the under 21 year age group had been involved in drug usage for five to eight years. While for those in the youngest age category (under 21 years) duration of usage was 3 - 4 years. These figures were common to both questionnaires. It was reported by the local community drugs worker that the longest user known to her, who was now injecting, had started using drugs at age 10 years and was now 24 years old.

**3. Edenmore**

**Area Profile**

Edenmore is a mainly working class area, which was built in the early 1960s. According to the 1991 Census figures;

- Edenmore has a population of 7,102, 45.7% of whom are under twenty-five years of age.
- The Edenmore area has an overall unemployment rate of 24%, with an unemployment rate of 35% in the 15 to 24 year age bracket.
- The percentage of young first time job seekers without a Leaving Certificate is 80%.
- Local primary schools are designated educationally under-privileged.
A recent report prepared by the Dublin North East Drugs Task Force (1997) indicated that while there is no hard information on numbers of intravenous drug users, the information given by the addiction counsellor was that there were up to thirty users living in the area.

The counselling service, run by the health board addiction counsellors in Area 8, is available in Edenmore health centre but as yet there is no methadone stabilisation programme available. A drug awareness group has also just been established.

Following discussion with local community workers and through them, local drug users, in the course of this research, it was established that there is a growing problem in the area. Although it was recognised that a problem may have existed in a more hidden form previously, it was felt that recent changes in inner city Dublin have had ‘a reverberating effect’ on the city outskirts, resulting in places like Edenmore becoming accessible to dealers. This has resulted in the problem of drug abuse becoming more visible in the area. There was also a feeling of frustration that action will have to be taken quickly in order to prevent years of work ‘in becoming a settled area becoming undone’.

**Edenmore - Research Findings**

**Questionnaires were** administered in the Edenmore area at a meeting with **local** community workers and also to an addiction counsellor working in the area. The results are presented separately.

**Number, Age and Gender of Drug Users**

**From the group meeting with local community workers it was estimated that 79 people** are using drugs in the Edenmore area. Of these, 40% are aged under 21 years, while slightly more (42%) are 21 to 25 years of age and the remainder, 18%, are over 25 years.
Males form the majority in all age categories. However, the difference in gender is less in the under twenty-one age group, where 20 men and 12 women were using drugs. Table 3a outlines the breakdown of age and gender of drug users.

**Table 3a Age and Gender of Users - Edenmore**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
<th>Unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
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<td>20</td>
<td>12</td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>21-25</td>
<td></td>
<td></td>
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<tr>
<td>25+</td>
<td></td>
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</tr>
</tbody>
</table>

**Type of Drug Used/Method of Use**

In the under 21 age group a variety of drugs were being used, including hash, ecstasy, cocaine and speed. These were being used orally, smoked or snorted, depending on the drug being used. Of this age group, 19% (6) were smoking heroin. No one in this age group was reported to be injecting or snorting drugs.

A range of drugs were again being used in the 21 to 25 year age category - speed, hash, ecstasy and cocaine. However, in this age group 54% (18) were using heroin, with almost all (17) injecting and one smoking the drug. The majority of these (16) were male.

Heroin was the principle drug being used in the over twenty-five year age category, with all users injecting, again highlighting the progression in method of usage of heroin from smoking to injecting. Here again, the majority of users were male although the difference was less pronounced than in the younger group, with seven males and three females. The remaining 29% (4) in this age category were using hash, ecstasy or cocaine.
Duration of Use

Duration of drug usage varied with age, with those in the eldest age category, 25 years and over having used drugs for the longest period of time, up to ten years. Typically, those in the youngest age group had been using drugs for one to two years, and those in the 21-25 age group had been using for up to five years (Table 3b).

A slightly different picture emerged following consultation with an addiction counsellor in the Edenmore area. This showed that approximately fifty drug addicts had approached the service. In terms of Age and Gender:

- The majority of the group are male and over 25 years.
- Within the fifty, there is a smaller group aged between 17 and 25 years. Here again the majority are male.

Type of Drug Used

- The prevalent drug of usage for both males and females in the over 25 age category is heroin, with the majority smoking the drug.

- In the 17 to 25 age group hash and ecstacy were used, with the counsellor stating that heroin is often used to ‘come down’ from use of ecstacy.
There is strong parental support for addicts in using the counselling service, with a number of programmes available to them. The counselling service offers assessment and referral to those using the service. It also helps place drug addicts in ‘in patient’ treatment centres where possible.

Inquiries with local doctors showed that there is very little take up of mainstream medical services. Of six doctors consulted, only three persons were receiving treatment.

4. Kilmore West

Area Profile

Kilmore West, surrounded by Beaumont, Artane Coolock and Bonnybrook, was developed by the local authority in the 1960s and 1970s. Today, 70% of the houses are privately owned, most having been acquired by the local authority. The population of the area is 5,819, over 20% of whom are under 14 years old and more than 40% are under 29 years old. Lone parent families form 13% of households. Approximately 20% of 15 to 35 year olds are unemployed and a high proportion of these are low skilled or unskilled. Although there are a large number of manufacturing jobs on offer in the area’s hinterland, local young people are unattractive to employers because of their low skill base. The is also a problem of the ‘culture of unemployment’ with some young people coming from families where there is little or no tradition of regular work.

Kilmore West has a significant drug problem among teenagers and young adults. There is no local drug treatment service. Residents in the area are, however, in the process of establishing a support group for parents whose teenagers are using drugs.

Kilmore - Research Findings

Two questionnaires were administered in the Kilmore area to community leaders. Youth Workers and other local persons.
Number, Age and Gender of Drug Users

Both questionnaires estimated that there are approximately 1,000 drug users in the Kilmore area. While the number estimated was identical, the age breakdowns given differed. The first questionnaire stated that 10% were in the under 21 age category, 50% were aged between 21 and 25 years, while 40% were over 25 years of age. In the second questionnaire, 30% of users were felt to be in the under 21 year age group, with 20% aged 21 to 25 years and 50% over 25 years.

Type of Drug Used / Method of Use

In the under 21 age group a variety of drugs were being used, including hash, ecstasy, cocaine and heroin. These were being used orally, smoked or snorted, depending on the drug being used. Of this age group, 10% (10) were injecting heroin.

A range of drugs were again being used in the 21 to 25 year age category - hash, ecstasy, cocaine and heroin. However, in this age group approximately half were using heroin. It was entirely clear how many were injecting the drug. The majority of these were male.

Heroin was the principle drug being used in the over twenty-five year age category, with most users injecting. Cocaine was also popular among this age group. Other drugs used included hash and ecstasy. Here again, the majority of users were male, particularly with regard to use of heroin and cocaine.

Duration of usage

Duration of usage followed a similar pattern to that in the other areas examined (Table 4a). The youngest users, those in the under 21 year age group had been using drugs for between 18 months and 3 years. Those in the 21-25 age category had been using for
two to five years, while those over 25 years of age had been using drugs for between three and five years.

5. Clonshaugh/Riverside

Area Profile

Clonshaugh/Riverside was originally a rural area. It is situated close to Bonnybrook and is a private residential area, with no local authority housing.

A meeting was held with local residents who stated that while there were problems relating to joy riding and other ‘unruly behaviour’, insisted that no drug problem existed in the area. This however, conflicts with the views held by Home School Liaison Officers and Public Health Nurses working in the area who were aware of the existence a drugs problem. It was felt that because of where the area is situated, drug users from Clonshaugh/Riverside may travel to Bonnybrook to access drugs. It is also widely known that dealing occurs around the Stardust Memorial Park.
Conclusions

Area Profiles

- All of the areas are characterised as having a large proportion of their populations in the under twenty-five age category, ranging from 40 to over 50%.

Numbers of Persons using drugs

- It is extremely difficult to estimate numbers of drug users in the areas of Bonnybrook, Fairfield, Edenmore and Kilmore. This is highlighted by the different estimates given by those who participated in the research. However, it is clear that the numbers are very high and much greater than those presented in official figures such as those of the Gardai.

Age and Gender of Drug Users

- The age breakdown of drug users varied in the different areas. In Bonnybrook and Fairfield most were thought to be in the under 21 year age group, while in Edenmore and Kilmore estimations differed. Kilmore emerged as the area with the highest number of users in the over 25 year age category, the estimate being 40 to 50% of users. In all of the areas males formed the majority of users, in some instances the gender gap narrowed in the 21 to 25 age group. This reverted again to a male majority among over 25s. (While Garda figures may be an underestimation, compared to the figures of users provided from local sources, the profile of users seems to be consistent).

Type of Drugs Used

- In terms of type of drug used and method of usage there does seem to be a progression from ecstasy, hash and acid to heroin. Initially the heroin is smoked, moving on to skin popping and injection of the drug. Other types of drugs used included hash, ecstasy, speed (particularly those in the under 21 age group), cocaine, sleepers and valium (the later two being predominantly used by those in the older age category).
Recommendations

The recommendations that follow were proposed by some of those who were interviewed in the course of the research.

• Establishment of drug treatment services at local level.
• Promotion of a community based approach to problems facing local areas that includes parents and children.
• Provision of accessible childcare facilities.
• The targeting of children at an early age in terms of social and educational development in conjunction with support for parents.
• Provision of evening activities for children
• Linkage between all the relevant services/service providers in the areas to properly identify families and children in need of support.
• Training for persons working in the community who may come into contact with families where drug abuse is a problem.
• Availability of sufficient resources to tackle the problem of drug abuse.
• In carrying out this research it is evident that there is a definite need for more in depth research in order to examine the problem.
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