Young people's attitudes and views of substance misuse in North Wexford

Research undertaken by Gorey Community Based Drugs Initiative

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Check out the Gorey CBDI website www.druggels.com
Gorey Community Based Drugs Initiative was formed just over a year ago with representatives from Gorey Community Social Services Council, Ferns Diocesan Youth Services, Gorey Youth Needs Group, Community Awareness of Drugs and local volunteers. The local initiative receives both financial and practical support from the South Eastern Health Board and operates through the Ferns Diocesan Youth Service. The role of the Gorey Committee is to develop responses to substance misuse based on local needs through raising awareness.

It is important, when looking for solutions, to know what the problems are. For this reason, the first major project undertaken by the initiative was to put together the most comprehensive survey on youth attitudes towards drugs ever undertaken in North Wexford. The results of the survey will form the foundation on which we can plan strategic programmes delivering education, promotion and services.

However to address the issues highlighted in this report will require the support of community organisations, statutory authorities and parents, all of whom will find this report an informative source of current attitudes.

While this report is not the definitive picture of drugs in North Wexford, we hope it will start people and other community organisations asking questions and raising awareness. The Gorey Community Based Drugs Initiative will offer their assistance in implementing any resulting programmes. It is important that funding is made available for various local initiatives as drug awareness is best formulated by those closest to the community.

I express my sincere thanks to all the initiative members who worked on every aspect of this report, from survey preparation and workshop facilitation to assessing the information and analysing the conclusions. Thanks to our researcher Gill Casey, who compiled the study on behalf of the Gorey CBDI, and Susan Barnes, Drugs Project Worker, for the work undertaken and their support. And finally, thanks to all the young people who participated in the survey.

Colin Webb Chairman
Gorey Community Based Drugs Initiative

The Gorey Community Based Drugs Initiative would like to thank everyone who participated in this research project in any way. In particular we would like to thank the young people who gave so generously of their experiences and views - without them this research project would not have been possible.
Glossary of Terms

For the purposes of this report the term ‘drug’ refers to any mood altering substance, whether legal or illegal, including cigarettes and alcohol.

**Acid**
An hallucinogenic drug which comes either in pill form or impregnated on a piece of blotting paper.

**Alcohol**
One of the most commonly used drugs of them all, alcohol comes in many different forms, such as wine, beer and spirits.

**Amphetamine**
Generally comes in powder form and is snorted up the nose. It can also be taken in tablet form or be injected.

**Anabolic Steroids**
Most synthetic anabolic steroids on the market are derived from testosterone. They have a building up effect on the body in that they promote the build up of muscle tissue and increase body weight.

**Cannabis**
One of the most commonly used of all illegal drugs. It can be found in a herbal form, a resin, powder or oil. Cannabis is often referred to as “pot”, “hash”, “weed”, “draw”, “dope” or “blow”.

**Cigarettes/Tobacco**
Tobacco is derived from the leaves of the plant - *nicotiana tobacum*. It contains nicotine, which affects the heart, blood vessels, stomach, kidneys and central nervous system.

**Cocaine**
Cocaine is often called “smoke” or “snow”. It is a white crystal like odourless powder. Cocaine is normally sniffed but it may also be injected. Crack is a cheaper version of cocaine, which is smoked.

**Ecstasy (E)**
The main ingredient in “E” is a chemical substance called MDMA, and this is often mixed with other substances such as amphetamines or tranquillisers. Ecstasy is often used in expectation of its pleasurable effects.

**Heroin**
Heroin most commonly comes in the form of a white powder, which is either injected or smoked.

**Tranquilisers**
There are literally thousands of different prescription tranquilisers on the market and they generally come in tablet or capsule form.

*Information provided by the Health Promotion Unit.*
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Nothing added but pure facts and figures

100% straight talk
Research Aim

The overall aim of this research was to gather information from young people in relation to four specific areas:

- To determine the prevalence of drug use by young people in North Wexford
- To identify the trends of drug use in North Wexford among young people
- To examine attitudes towards substance misuse among young people in North Wexford
- To determine the views of young people on information and supports available in North Wexford

Research Design

Gorey CBDI members themselves designed the methodology for this piece of community based research. Both quantitative (questionnaires) and qualitative (focus groups) methodologies were employed, which enabled the gathering of statistical data but also allowed for the experiences of young people to be heard and recorded.

Key Findings

Section 1
To determine the prevalence of drug use among young people in North Wexford.

1. 59% of the young people surveyed have used drugs.
2. The majority of young people who have used drugs have used cigarettes or alcohol or both and no other drug.
3. Of those that have used drugs, 54% are female and 46% male.
4. Many young people are confused about the terms “drugs”, for example a significant number of young people do not consider cigarettes and alcohol to be a drug.
5. Many young people are breaking the law by buying cigarettes and alcohol, as well as using both substances.
6. Underage drinking is taking place in some licensed premises in North Wexford.
7. Drug use from age 16 upwards appears to become more visible and takes place more often in public places.
8. Drug use from 12 - 15 years of age appears to be a somewhat ‘hidden’ activity.

Section 2
To identify trends of drug use in North Wexford among young people

1. 52% of young people stated that cannabis was the first drug they used, 44% of these young people have also used cigarettes and 41% have also used alcohol.
2. 85% of young people who have used drugs began using them between the ages of 11 and 16 years.
3. 50% of young people who have used drugs first took them out of curiosity, to experiment or to see what it was like.
4. 67% of young people said that, if they could turn back time, they would still take their first drug, the main reason being to satisfy their curiosity.
5. 33% of young people said they would not take their first drug again, if they could turn back time for two reasons. Firstly because it is dangerous and secondly because they disliked either the experience or the taste of the drug.
6. The young people who use drugs spend on average between €8.63 and €37.33 per week on drugs.
7. The vast majority of young people were introduced to drugs by a friend or friends. However, the majority of focus group members portrayed drug dealers in a stereotypical fashion, e.g. stands outside schools and on street corners.

Section 3
To examine attitudes towards substance misuse among young people in North Wexford

1. Whilst many young people showed an awareness of the dangers involved in using drugs, they also displayed an attitude of “turning a blind eye” to drug use by their peers.
2. Apart from cigarettes and alcohol, cannabis was perceived to be the most accessible drug in North Wexford.
3. Some young people felt that cigarettes and alcohol in particular were part of the social scene in North Wexford, although different types of drugs were available.
4. Most young people felt that the drug problem in North Wexford will escalate in the future.
5. The majority of young people feel the best thing about taking drugs is the enjoyment, this would include having a laugh, a buzz, getting high and so on.
6. The majority of young people felt that the worst thing about taking drugs was the sickness afterwards, some young people described this as a hangover.

Section 4
To determine the views of young people on information and supports available in North Wexford

1. 95% of young people who use drugs, do not feel they have a problem with them.
2. Only 5% of young people surveyed felt they did have a problem with drugs and only half of these young people had tried to get help.
3. Most young people access information about drugs from either school or home.
4. Some young people who accessed information about drugs from school, do not feel that the information is given to them in the way that they would like.
5. Only 25% of the young people surveyed felt they needed more information about drugs.

Main Recommendations

1. The CBDI should adopt a harm reduction approach in raising awareness of the issues relating to drug use in North Wexford.
2. A drug awareness programme should be designed for North Wexford with the overall aim of raising awareness and educating young people. The method of delivery of the above programme should be learner centred, as creative as possible, and that appropriately trained facilitators should be employed to deliver the programme to young people.
3. Parents needs should be identified in relation to information about drugs and the provision of such information.
4. CBDI should develop a partnership approach with interested individuals and organisations to identify solutions in relation to underage drinking in North Wexford.
5. The CBDI should work in partnership with local primary schools to enable the delivery of drug awareness and preventative education in primary schools to children from as early an age as possible and to target parents of 5th and 6th class students to raise awareness of drug use by young people.
6. The CBDI should consult with young people and form partnerships with other organisations to lobby for better or new facilities for the young people of North Wexford.
7. The provision of a confidential helpline service for young people and the provision of notice boards with help line numbers appropriate to young people.
The seed of this piece of research was sown in July 2000 when the Gorey Community Based Drugs Initiative first discussed gathering information by means of a survey. By September of the same year, the CBDI members had committed themselves “to carry out a survey, which would detail the cause of drug misuse in North Wexford”.

During the ensuing discussions, a more focused vision of the research began to emerge. The group refined their focus as follows:-

- To determine the prevalence of drug use by young people in North Wexford
- To identify the trends of drugs use in North Wexford among young people
- To begin to understand attitudes towards substance misuse among young people in North Wexford
- To look at young people’s views on information and supports available in North Wexford

In January of 2001, the decision was made to carry out focus groups and a survey in order to obtain both qualitative and quantitative information directly from young people.

The focus groups and survey were carried out in the Spring of 2001. From April to September, members discussed and compiled the data collected from the focus groups and the survey questionnaires.

As information on drug misuse, particularly in North Wexford is not readily available, the group felt it was important to share their knowledge and took the decision to publicly launch their research. The intention was that this would not be the end of the process, but rather the beginning. They hoped it would create dialogue and debate around the issues of drug taking and young people in North Wexford.

To ensure objectivity, the group decided to commission a consultant researcher to analyse and write up the data collected.

As a community based group, it was important to the Gorey CBDI that:

- They maintained an involvement in the process. To this end the CBDI met with the researcher during the analysis and writing up phases of the work in order to have an input into the document, particularly in relation to future recommendations.
- The document was accessible to all members of the community, particularly in terms of language. A decision was made to keep the document as jargon free as possible.
The latest figures available show that the population of County Wexford in 1996 was 104,371 and that 18.9% (19,775) of that population were young people between the ages of 10 and 19 years of age (Census of Population 1996).

The County of Wexford is characterised by concentrations of population along the east and south coasts and in the four main urban areas, Wexford town, New Ross, Enniscorthy and Gorey.

Disposable income levels in the county are amongst the lowest in the country and there is evidence of high levels of deprivation and exclusion. Indeed, indicators such as educational attainment, unemployment, home ownership and car ownership appear to show that deprivation in rural areas of Co. Wexford is much higher than the national average (Bacon, 2001).

Typically Co. Wexford has relied on traditional industries including agricultural and tourism, and has not been fortunate in attracting high technology industries into the area. Consequently, the present structure of the economy poses challenges in Co. Wexford (Bacon, 2001).

The area described locally as North Wexford includes Gorey Town and hinterlands extending to the coastline in the east, Kilmuckridge in the South, Buncloidy in the West and to Coolgreany in the North.

In recent years much building development has taken place in North Wexford, particularly in the town of Gorey and along the east coast. It would appear that new homes have been sought by the population overflow from Dublin who choose to live in North Wexford and commute to work and also for use as holiday or second homes (Bacon, 2001).

The young people who took part in the survey were from the following towns and villages of North Wexford: -

- Askamore
- Ballyduff
- Carnolin
- Cloneenmore
- Coolgreany
- Craanford
- Gorey Town
- Hollyfort
- Kilmuckridge
- Raheenagurren
- Ballycanew
- Ballyoughter
- Castletown
- Clough
- Courtown
- Ferns
- Inch
- Kilanerin
- Monaseed

About North Wexford
The County Wexford Community Based Drugs Initiative (CBDI) was established in 2000. It is funded by the South Eastern Health Board (SEHB), and is informed by the SEHB “Drug and Alcohol Misuse Prevention Strategy” published in April 1999, and National Drug Strategies.

Gorey CBDI is a community based response to substance misuse. The aim of the Gorey CBDI is to promote substance misuse prevention and education through raising awareness in local communities by achieving the following objectives:

- To increase awareness of drug misuse
- To develop strategies to reduce demand
- To help local communities identify and respond to local needs
- To assist in the development and implementation of community responses
- To enhance the capacities of communities to address drug misuse in a collective way
- To improve the quality of life of people affected by drug misuse

CBDI’s have also been established in Enniscorthy, New Ross and Wexford. One member of each of the CBDI’s represent their group on the County Wexford Co-ordinating Committee on Demand Reduction Measures for Drugs. This committee co-ordinates a range of responses being delivered in County Wexford in the areas of education and prevention, research and audit, treatment and rehabilitation and supply control.

Gorey CBDI is a community based response to substance misuse. The aim of the Gorey CBDI is to promote substance misuse prevention and education through raising awareness in local communities by achieving the following objectives:

- To increase awareness of drug misuse
- To develop strategies to reduce demand
- To help local communities identify and respond to local needs
- To assist in the development and implementation of community responses
- To enhance the capacities of communities to address drug misuse in a collective way
- To improve the quality of life of people affected by drug misuse

Two Community Based Drugs Project Workers are employed under this initiative to support the four CBDI’s.

The Gorey Committee includes the following representatives from the community:

- Ann Codd | Volunteer
- Tracey Doyle | Gorey Youth Needs Group
- Paul Leonard | FDYS
- Kerensa McRedmond | Volunteer
- Suzanne Nolan | Gorey Youth Needs Group
- Carol O’Toole | Gorey Youth Needs Group
- Maria Waddock | Community Awareness of Drugs
- Colin Webb (Chair) | Gorey Community Social Services Council
- Sara Kickham | County Wexford Partnership
- Bernie Doran | Volunteer
Methodology

Both quantitative (questionnaires) and qualitative (focus groups) methodologies were employed for this research process. This enabled the gathering of statistical data but also allowed for the experiences of young people to be heard and recorded.

Methods

The following methods were used to gather information for the research process:

Questionnaires

A questionnaire was developed by the Gorey CBDI, the aim of which was to gather quantitative information from young people in North Wexford who were between 12 and 18 years of age and of both genders. Sample questionnaires were carried out in November 2000, reviewed by Gorey CBDI members and the appropriate changes made. The sample was chosen randomly.

The young people were assured of confidentiality and were asked 14 separate questions relating to their experiences of drug use. In total 100 questionnaires were given out and 85 were completed and returned (see appendix for sample of questionnaire). 3 questionnaires were spoilt and so a total 82 questionnaires were analysed.

The age range of the young people who completed and returned questionnaires was from 12 to 18 years, 41% males and 59% females, as the table below shows.

<table>
<thead>
<tr>
<th>Age</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>13</td>
<td>12</td>
<td>18</td>
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</tr>
<tr>
<td>18</td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>48</td>
<td>82</td>
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</tbody>
</table>

56% of the young people who completed the questionnaire lived in a town, 41% in rural locations and the remaining 3% did not state where they lived.

Focus Groups

The Gorey CBDI decided on focus groups as one of their methods of research so that they could give young people the opportunity to voice their opinions and concerns about drug use to adults who were prepared to listen.

A total of 16 focus groups of mixed gender took place. In total 98 young people between the ages of 12 and 18 years of age were chosen randomly and participated in the focus groups.

Three sets of questions were devised by the CBDI (see appendix). The young people were organised into age groups and each age group was divided into three separate groups. Each group was given a different set of questions. This approach was taken due to time constraints and in order to get as wide a consultation as possible. One group was a mixed age group.

Analysis

The completed questionnaires and the information from the focus groups were given to the researcher who analysed and wrote up the findings. The researcher and the Gorey CBDI met twice during the research process, once to discuss the findings of the research and identify possible future recommendations and a second time to peruse the final draft of the document.
Section 1  To determine the prevalence of drug use among young people in North Wexford

How many young people have used drugs?

33% of the young people who completed the questionnaire said they have used drugs and 67% said they had never used drugs.

However, on closer examination of the 67% who said they have never used drugs, 26% stated later on in the questionnaire that they had used either cigarettes or alcohol or both.

This would suggest that 26% of those surveyed do not consider cigarettes and alcohol to be drugs. An example of this is one young person who said they had used alcohol and yet went on to state “I’ve never used drugs in my life”.

41% of the young people who completed the questionnaire said they had never taken drugs. Surprisingly of those who have used drugs including cigarettes, alcohol, cannabis, magic mushrooms and solvents, only 50% recognised that they were using non-prescription drugs. 33% said they had never taken drugs that had not been prescribed for them and the remainder gave no answer.

Table 1 : The number of young people who have/have not taken drugs

Table 2 : Gender breakdown of those that have used drugs

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Female</td>
<td>54%</td>
</tr>
<tr>
<td>Male</td>
<td>46%</td>
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</table>

The findings of this research do not suggest a gender divide in terms of drug use in North Wexford.

Strong feelings in relation to taking drugs were expressed by some of the 41% of young people who have not used drugs:-

“I think drugs are ridiculous and taking them means ruining your life, if you want to try to kill yourself go ahead, take drugs”

“I think people should be stopped smoking, taking drugs. Drinking when they are under age, because they could seriously hurt themselves”

The young people surveyed were asked if they had ever taken drugs which have not been prescribed for them. Surprisingly of those who have used drugs including cigarettes, alcohol, cannabis, magic mushrooms and solvents, only 50% recognised that they were using non-prescription drugs. 33% said they had never taken drugs that had not been prescribed for them and the remainder gave no answer.

Table 3 : Responses from young people who were asked if they had ever taken drugs which had not been prescribed for them

The findings would suggest that many young people are confused about the terms “drugs” and are not sure exactly what it refers to. The following quote exemplifies this confusion:-

“most young people who use drugs use cigarettes and alcohol but not really drugs”.

In contrast, the young people in the focus groups named many drugs including cigarettes and alcohol. During the discussions, they used terms such as:

- “addictive materials”
- “drugs kill you”
- “illegal”
- “something that changes your mental state”
- “uppers or downers”
- “temptation”
At the same time, the young people recognised that medicine and tablets from a doctor are also drugs, distinct in as much as they are drugs that can “cure you”.

Which drugs have young people used?

Table 4: Percentages of young people using cigarettes, alcohol and other drugs.

Of the (59%) of young people that have used drugs, the majority (72%) used cigarettes or alcohol or both and no other drug. It could be said that these young people were taking “legal” drugs even though many of them were under-age.

A young person in one of the focus groups commented, “Underage drinking is a bad problem; it’s a big attraction, as well as cigarettes”.

The remaining 28% of young people used cigarettes and/or alcohol and/or illicit drugs. This 28% is equivalent to 16% of total number of young people surveyed.

The 28% of young people who have used “illicit” drugs, have used a variety of drugs as the table below shows.

Table 5: Young people and their drugs of choice

<table>
<thead>
<tr>
<th>Drugs of choice</th>
<th>% of young people</th>
</tr>
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<tbody>
<tr>
<td>Cannabis only (no cigarettes and alcohol)</td>
<td>2%</td>
</tr>
<tr>
<td>Cigarettes, alcohol and cannabis</td>
<td>17%</td>
</tr>
<tr>
<td>Cigarettes, cannabis and magic mushrooms</td>
<td>2%</td>
</tr>
<tr>
<td>Cigarettes, alcohol and solvents</td>
<td>2%</td>
</tr>
<tr>
<td>Cigarettes, alcohol, magic mushrooms and cannabis</td>
<td>2%</td>
</tr>
<tr>
<td>Cannabis and ecstasy (no cigarettes and alcohol)</td>
<td>2%</td>
</tr>
</tbody>
</table>

None of the young people had ever used LSD, speed, heroin, cocaine or tranquillisers.

The legal age for smoking and drinking is 18 years of age. 84% of those surveyed are under 16 years of age, 99% are under 18 years of age. Many young people are breaking the law in buying cigarettes and alcohol, as well as using both substances.

Three recent reports appear to support the above findings.

The first a report on drugs misuse in the Mid Tipperary region found cigarettes and alcohol to be the main drugs of use by young people (Mid Tipperary Drugs Initiative, 2000).

Secondly, the Kilkenny Drugs Initiative carried out research on substance misuse and with a sample of 13-60 year olds. The findings show that the use of alcohol and cigarettes was commonplace among all age groups. Referring to drugs misuse in general the report states that “From age 8 usage begins in Kilkenny, some said from 12 years, alcohol especially” (Finane, 2000:8).

And finally a report entitled South Eastern Health Board Data Co-ordination Overview of Drug Misuse 2000, which found that across all treatment services in the south-east “the main drug for which treatment was sought during 2000 was alcohol”... which “accounted for 72% of clients”. The second highest was cannabis which accounted for a further 17% of clients (this study did not include cigarettes).
How frequently have young people used drugs?

The table shows that:
- 31% of young people are smoking frequently
- 10% use alcohol daily or several times a week
- A further 52% using alcohol on a regular basis (between once a week and once a month)

It is clear from the table that cigarettes and alcohol are the most frequently used drugs, a finding, which is supported by the findings of the SEHB report referred to earlier.

21% of young people have used cannabis infrequently, sometimes to experiment. One of these young people stated:

“I have only done hash four or five times and don’t take it any more”.

Where do young people take drugs?

Young people were asked where they take the drugs (location). Young people aged 12 - 15 years of age who answered this question gave the following locations:-
- In town
- At home
- Away from parents
- Behind a garden shed
- Behind a pub
- A friends house

Only 2% of young people between the ages of 12 and 15 mentioned a location that was in a public place, a disco.

However the pictures changes somewhat from age 16 upwards, whilst some of the locations given were the same as the above i.e. home and town and at a friends, other locations were: -
- School
- Night-club
- Pub

This would suggest that for this sample of young people drug use from 12 - 15 years of age is a somewhat ‘hidden’ activity and that from 16 upwards drug use among this group of young people becomes much more visible and takes place more often in public places.

Another factor could be the availability of money - young people from age 15 upwards may work in the evenings or weekends and this may give them the resources to frequent pubs and night-clubs.
The focus groups were asked where young people take drugs and the locations were very similar and could also be split into public and private places. The focus group highlighted the fact that in some pubs underage drinking is possible. This would suggest that young people are aware which pubs are open to underage drinking and which are not.

The Kilkenny Drugs Initiative Report referred to earlier found that in Kilkenny children as young as 10+ were using alcohol including underage drinking in pubs (Finane, 2000:8).
Section 2  To identify trends of drug use in North Wexford among young people

What is the first drug young people take?

Response rate - 56% of those that have used drugs.

**Table 7**: Young people’s drug of first use

The findings suggest that 52% of young people used cannabis the first time they took drugs. This data however has to be questioned. Earlier, it was suggested that 26% of young people did not consider cigarettes and alcohol to be drugs. It could be the case that young people who have used cigarettes, alcohol and cannabis may have disregarded cigarettes and alcohol when responding to this question.

Of the 52% who stated that cannabis was the first drug they used, 44% have also used cigarettes and 41% have also used alcohol.

What age do young people start taking drugs?

Response rate - 55% of the young people that have used drugs.

**Table 8**: Age of first use

The above graph shows that 85% of young people who responded to this question began using drugs between the ages of 11 and 16 years.

Focus group comment - “drugs are more of an issue for young people in the senior cycle”
Section 2  To identify trends of drug use in North Wexford among young people

Why do young people start taking drugs?

Response rate - 48% of those that have used drugs.
Table 9: Why young people started using drugs

The above graph shows that 50% of young people who have used drugs first took them out of curiosity, to experiment or to see what it was like. Only 13% of young people named peer pressure as a reason to start taking drugs.

When the focus groups were asked why young people use drugs, they felt that the main reasons were:
- peer pressure
- to relieve stress
- enjoyment

Other reasons mentioned were experimentation, depression, to increase confidence and to look cool.

Research from the Mid Tipperary region (Mid Tipperary Drugs Initiative, 2000) found that there are many social reasons why young people take drugs but almost all of those interviewed felt that curiosity was a major factor in young people taking drugs.

So it could be said that the reasons for starting to take drugs and the reasons for continuing to use drugs are different. It could be the case that once the initial curiosity factor had been satisfied, then other pressures might take over.

If young people could turn back time, would they still take their first drug?

Response rate - 44% of those that had used drugs.
Table 10: Young people who would/would not take their first drug again

Of the 67% who said that if they could turn back time, they would still take their first drug, the reasons given are shown in the following graph.

How did young people use their first drug?

Response rate - 48% of young people that have used drugs.

For the vast majority of the young people, either cigarettes, alcohol or cannabis were their first drug of use and most young people said they either smoked or drank their first drug.

However 9% of those that had used drugs, used cannabis as follows:
- through a can pipe - 4.5%
- or ate it in a cake - 4.5%

The 4.5% who took ecstasy reported that they drank it with coke.
Section 2  To identify trends of drug use in North Wexford among young people

**Table 11:** Reasons why young people would take their first drug again

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curiosity</td>
<td>80%</td>
</tr>
<tr>
<td>Enjoyment</td>
<td>50%</td>
</tr>
<tr>
<td>It did no harm</td>
<td>20%</td>
</tr>
</tbody>
</table>

**Table 12:** Reasons why young people would not take their first drug again

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Because it is dangerous/bad for you</td>
<td>50%</td>
</tr>
<tr>
<td>A dislike of either the experience or the taste of the drug</td>
<td>50%</td>
</tr>
</tbody>
</table>

One young person observed:

"Smoking is my worst habit and is uncool and a dirty habit to do"

**How young people feel generally and after taking drugs?**

Response rate - 46% of young people who have used drugs (many of whom gave multiple answers).

50% of the young people that have never taken drugs also responded to this question:

"Smoking is my worst habit and is uncool and a dirty habit to do"

**Table 13:** How young people who have used drugs feel in general and after taking drugs

<table>
<thead>
<tr>
<th>Feeling</th>
<th>In General</th>
<th>After using Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guilty</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Dizzy/relaxed</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Sick</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>That I had let my parents down</td>
<td>50%</td>
<td></td>
</tr>
</tbody>
</table>

One young person felt there should be a "crackdown on people who are using drugs as there is an increasing number of young druggies committing suicide"

A small number of young people said that whilst they felt none of the above after taking drugs, they did feel the following:

- "Guilty"
- "High"
The findings for those that have and have not taken drugs are similar, however no one in the latter group highlighted feeling suicidal.

The young people in the focus groups felt that after taking drugs, people may feel:

- “Depressed”
- “Mixed up”
- “Sick”
- “Happy but problems are still there”
- “Paranoid”
- “Good, but it only lasts a while”
- “Depressed after and problems come back”

Several of their perceptions seem to suggest that drugs are a “quick fix” for underlying problems, but that drugs do not solve anything and the problems remain.

How much do young people spend on drugs?

Response rate - 67% of those that have used drugs.

The following chart shows how much young people spend weekly on cigarettes and/or alcohol per week.

Of the remaining 9% of users, 6% used alcohol, which they obtained free of charge and 3% used substances other than cigarettes and alcohol. The average weekly spend of the latter group is €43.17.

Analysis of this chart suggests that those young people who use both cigarettes and alcohol, spend significantly more on cigarettes in a week than those who only use cigarettes. This could be due to the fact that those young people who smoke and drink may have more access to money because their average age is significantly older and they are therefore able to buy more cigarettes. Another explanation might be that because they are older they smoke more openly and therefore more frequently.

The focus groups of young people perceived their peers to be spending between £20 and £100 on drugs. They suggested that young people get their money from a number of sources:

- Working after school
- From parents
- Stealing
- Selling drugs
- Selling things to raise money
- Bullying people to get money
- Borrowing money
Section 2  To identify trends of drug use in North Wexford among young people

What image do young people have of a drug user?

A minority of the focus group members perceived drug users to be normal people, however, the majority of group members portrayed drug users in a stereotypical fashion, as follows:

- Baseball cap, long hair, scruffy, nirvana tops
- Spaced out head and bulging eyes
- Drop out of school
- Tight for cash
- Owe money to everyone
- Weird, rough appearance, out of it

Who introduces young people to drugs?

48% of young people who have used drugs responded to this question.

Table 16: Who introduces young people to drugs

![Pie chart showing 91% of young people were introduced to drugs by friends.]

This pie chart shows that of the young people who responded to this question, the vast majority (91%) were introduced to drugs by a friend or friends. As one young person asserted:

“Students are going to always take drugs in one form or another, from friends mostly...”

This finding is supported by recent research carried out by the Mid Tipperary drugs Initiative (Mid Tipperary Drugs Initiative, 2000). This research found that:

“99% of all those surveyed felt that friends introduced young people to their first drug”.

When the focus groups were asked what their image of a dealer was, the answers were stereotypical and the list did not include friends. They said a drug dealer:

- could be anybody
- is well off looking
- has a big car
- is weird
- is rich
- sells drugs but doesn’t take them
- stands outside schools and on street corners

In what seems to be contradictory, the focus groups also recognised that drugs are available from their peers. They said “everyone knows whose dealing”. As one young person put it “it’s a case of knowing the right people and you can get them (drugs) if you want them”.

"STUDENTS ARE GOING TO ALWAYS TAKE DRUGS..."
What attitudes do young people have towards drug use?

The attitudes expressed by young people in the focus groups towards drug use, show an awareness of the dangers involved:

- “Drugs mess up your life”
- “Drugs can kill you”
- “You get into a lot of trouble”
- “It’s a waste of time and money”
- “Drugs are bad for you”
- “The police and government should try and stop the people who are using drugs”

However, whilst young people displayed an awareness of the dangers, they also displayed a reluctance to get involved with other people’s drug use, as long as they were not directly affected. The following quotes illustrate this point:

- “Say nothing”
- “Don’t mind people using drugs in their own homes but not on the street”
- “Don’t agree with it but it’s personal so I wouldn’t interfere”
- “I would never tell on a dealer, I’d be too afraid”

One young person felt that “Drugs are not as big a problem as they are made out to be”.

Is drug use part of the social scene?

Some of the young people in the focus groups felt that drug taking was part of the social scene. They suggested that young people see others taking drugs and don’t want to be left out, although they agreed it depended on the person, their age and the drug involved. One young person highlighted a particular venue where drugs are available:

- “Night clubs are bad in relation to drugs, which are easily accessible in such places”.

Some felt that only cigarettes and alcohol in particular were part of the social scene.

The young people perceive the following to be available in North Wexford:

- Hash
- Ecstasy
- Steroids
- Cannabis
- Anything you want

Apart from cigarettes and alcohol, cannabis was perceived to be the most accessible drug.

What is the situation in relation to drugs in North Wexford?

The young people in the focus groups verbalised the following perceptions about the drug situation in North Wexford:

- “Most young people who use drugs use cigarettes and alcohol but not really drugs”
- “Whilst there are a lot of users, there are a small number of regular users”
- “The people that take drugs are not a major problem”
- “Gorey has a drug problem because there is absolutely NOTHING to do at all and it’s too late for our generation because we (in general) have already used drugs and it’s too late to turn back now”
- “The Sunday World reported on one incident that occurred in Gorey and now we are made out to be the drugs capital of the world”

How do young people see the drug situation in North Wexford in the future?

The young people in the focus groups painted quite a negative picture of the future as they saw it.

It was suggested that drug use will become legal or possibly that young people will go to other countries where it is legal.

Most comments suggested the drugs problem will escalate. Comments made were as follows:

- “More and more dealers will be trying to make a living from it”
- “More Gardaí will be needed to police the drug scene”
- “There won’t be enough detention centres”
- “Those who make drugs will experiment with new types of drugs”
- “It will always be a problem”
- “It will be passed on within families”
- “More and more young people will be targeted and it will get worse”
- “Easier to get as town gets bigger”

A small number of suggestions were made that might help to improve the situation, these were:

- “Parents need do be more aware”
- “Might improve with all the information and awareness out there”
What do young people think is the best and worst thing about taking drugs?

58% of young people who have used drugs responded to this question. The findings show that there are a variety of things that young people get out of taking drugs as the following chart shows.

**Table 17**: Young people’s perceptions of the best and worst thing about taking drugs

<table>
<thead>
<tr>
<th>Best thing</th>
<th>% of young people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enjoyment</td>
<td>68%</td>
</tr>
<tr>
<td>To relieve stress</td>
<td>24%</td>
</tr>
<tr>
<td>To belong to a group (peer pressure)</td>
<td>8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Worst thing</th>
<th>% of young people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sickness</td>
<td>54%</td>
</tr>
<tr>
<td>Danger</td>
<td>19%</td>
</tr>
<tr>
<td>Cost - not having any money left</td>
<td>15%</td>
</tr>
<tr>
<td>Other - smell - dirty habit</td>
<td>12%</td>
</tr>
</tbody>
</table>

The findings show that young people feel the best thing about taking drugs is the enjoyment, this would include having a laugh, a buzz, getting high and so on.

The worst thing about taking drugs appears to be the sickness afterwards, some young people described this as a hangover. The danger was also identified as one of the worst things and this included “doing things I regret”.

The focus groups identified a number of positives and negatives that they perceive young people may experience after taking drugs.

**Table 18**: Young people’s perceptions of the positive and negative effects of taking drugs

<table>
<thead>
<tr>
<th>Positives</th>
<th>Negatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Great</td>
<td>Depressed</td>
</tr>
<tr>
<td>Excited</td>
<td>Drained out</td>
</tr>
<tr>
<td>High</td>
<td>Sick</td>
</tr>
<tr>
<td>On top of the world</td>
<td>Aggressive/violent</td>
</tr>
<tr>
<td>More confident</td>
<td>Weak</td>
</tr>
<tr>
<td>Grown up</td>
<td>Down</td>
</tr>
<tr>
<td>In control</td>
<td>Needed more drugs</td>
</tr>
<tr>
<td>Hyped up</td>
<td>Want more</td>
</tr>
<tr>
<td>Good</td>
<td>Regret at taking drugs</td>
</tr>
<tr>
<td>Paranoid</td>
<td>Headaches</td>
</tr>
<tr>
<td>Loss of memory</td>
<td>Lack of concentration</td>
</tr>
<tr>
<td>Blackouts</td>
<td></td>
</tr>
</tbody>
</table>

“IT WILL ALWAYS BE A PROBLEM”
Section 4  To determine young people’s views of information and supports available in North Wexford

Do young people feel they have a problem with drugs, and if so have they tried to get help?

Response rate - 83% of young people who have used drugs.

Table 19 : Do young people feel they have a problem with drugs?

A vast majority (95%) of young people who use drugs, do not feel they have a problem with them. Only 5% of young people surveyed felt they did have a problem with drugs and only half of these young people had tried to get help.

However, whilst young people do seem to be aware of a number of options for accessing help, the findings show that the very small number (2.5%) of young people actually tried to get help and did so from friends and family.

In the words of one young person, before you can access help “first you have to admit to having a problem”.

A recent study, Teenage Tolerance (2001) the hidden lives of young Irish people looks at the experiences of young people and their responses to violence and abuse. One of the conclusions of the research was:- “that young people used their friends as their preferred sources of support about issues of abuse and violence” and “that young people are each others first port of call when experiencing difficulty”.

Whilst the context is different, it is possible that young people are unconsciously supporting each other around their drug use and this could explain why such low numbers of people have consciously looked for support in relation to drugs.

Table 20 : Where do young people access information about drugs?

Young people made the following suggestions: -

- “An information board with helpline numbers would be helpful”
- “We need a confidential advice service”

Where do young people get their information about drugs?

40% of the total respondents answered this question.

The findings show that most young people access information from school and family/home. Many young people accessed information from both. However, this may not be the ideal situation it may at first appear to be.

One young person felt that “teachers take it (drugs education) too seriously”. A second year student who participated in a focus group said “this is the first time drugs have been talked about in school apart from friends talking”. And a third student noted that in their school “first years and transition
years seem to have been given most information in classes e.g. Personal Development classes”.

This would suggest that not all students in school access information about drugs, and some of those that do, do not feel that the information is given to them in the way that they would like.

The findings from the focus groups appear to suggest that some young people feel their parents are not very well informed about drugs.

Young people made comments like:

- “parents don’t understand how easy it is to get drugs”
- “parents should know the signs of drug use”
- “stay away is the only comment”

So it would seem that whilst most young people obtained their information from parents and teachers, these are not avenues open to all young people.

Do young people need more information about drugs?

Response rate - 59% of total sample.

Table 21: Do young people need more information about drugs?

The findings show that only 25% of the young people surveyed felt they needed more information about drugs. Some young people elaborated on what they would need to know more about, as follows:-

- “The effects and dangers of taking drugs”
- “The disadvantages of using drugs”
- “The effects of specific drugs i.e. speed and ecstasy”
- “Information about different types of drugs”
- “More awareness of the dangers”

The focus groups were asked about their attitudes to anti-drug campaigns. Most young people felt that the anti-drug campaigns were uninteresting or were lacking in something. They felt that young people listen to friends more than advertisements. The following suggestions were made:-

- “The advertisements should be more shocking, harder hitting”
- “Young people should be brought to places to see the effects of drug use”
- “Talks by ex-users are good”
- “You can never have too much information”

The following quote suggest information overload for one young person:

“We get too much information and too many leaflets with too much detail when half a page of bullet points would be enough”
Recommendations

1. The findings of this research show that 59% of the young people surveyed in North Wexford have used drugs. The vast majority of young people who have used drugs, do not feel they have a problem with them and feel the best thing about taking drugs is the enjoyment they get from it.

   It is therefore recommended that the CBDI adopt a harm reduction approach when raising awareness of the issues relating to drug use in North Wexford.

2. The findings highlight the need for a drug awareness programme for young people in North Wexford with the overall aim of raising awareness and educating young people.

   It is recommended that a programme is designed, the aims of which should include the following:-

   ● To educate young people about all types of drugs and their effects
   ● To raise awareness of the laws in relation to drugs, including cigarettes and alcohol
   ● To develop peer support and peer education among young people
   ● To give young people the opportunity to explore the issue of drugs from their perspective, for example to discuss:-
     their experiences of drugs and drug use
     their perceptions and the reality of drug dealers
     making wise choices

   awareness of peer pressure
   personal, community and societal rights and responsibilities
   the use of alcohol by young people and adults
   the dangers and consequences of drug use
   stress management

3. The research shows that most young people access information about drugs from either home or school.

   Young people who accessed information from school, did not feel that the information was given to them in the way that they would like.

   It is therefore recommended that the method of delivery of the above programme is learner centred as opposed to subject centred, as creative as possible, and that facilitators trained in community education and/or youth work be employed to deliver the training in a way that meets the needs of the young people.

4. Young people felt that their parents are not very well informed about drugs.

   It is therefore recommended that a strategy is designed to engage with parents of young people in order to:-

   ● Provide opportunities to explore their own use of drugs, and in particularly alcohol
   ● Provide opportunities to explore the use of drugs by young people

5. The findings show that underage drinking is taking place in North Wexford, in ‘hidden’ places and also in some licensed premises.

   It is recommended that the CBDI actively build a partnership approach to seeking solutions to the problem of underage drinking by building relationships with local vintners, off-licence and night-club owners, Gardai, community workers, parents and other relevant local people and organisations.

6. The findings show that 85% of young people who have used drugs began using them between the ages of 11 and 16 years.

   It is recommended that the CBDI work in partnership with local primary schools to:-

   ● Implement the delivery of drug awareness and preventative education in primary schools to children from as early an age as possible
   ● Specifically target parents of 5th and 6th class students in primary schools to raise awareness of the ‘hidden’ nature of drug use from 12-15 years highlighted by this research and the link between drug taking and the availability of money to young people.
7. During the research process, young people highlighted the lack of facilities for them in the North Wexford area.

   It is recommended that the CBDI:-
   ● consult with young people to identify gaps in existing facilities and opportunities for development
   ● in partnership with other organisations, lobby for better or new facilities for the young people of North Wexford

8. During the research process, the young people themselves made the following recommendations:-

   The provision of a confidential help line service for young people and the provision of notice boards with help line numbers appropriate to young people.
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Mid Tipperary Drugs Initiative (2000)
Report on young people and drugs misuse in the Mid Tipperary Region

South Eastern Health Board (2000)

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Teenage Tolerance, the hidden lives of young Irish people (2001)
Appendix i

**Questionnaire**

Gorey Community Based Drugs Initiative

We are a community based group who would be grateful if you would complete this questionnaire as honestly as you can. Any information you give by filling in this survey cannot be traced back to you.

**Q1.** Male □ Female □

**Q2.** Age: .................

**Q3.** Please name the townland in which you live:

........................................................................
(e.g. Inch, Camolin, Kilanerin, Coolgreany, Gorey, etc.)

**Q4.** Have you ever used drugs? Yes □  No □

If yes,

4.1. What drug did you first use? ........................................................

4.2. What age were you? .................................................................

4.3. How did you use this drug?..........................................................

4.4. Who first introduced you to this drug?.........................................

4.5. Is there any reason that you started using this drug? .................................................................

4.6. If you could turn back time, would you still take your first drug? Yes □  No □

If Yes, why? ..................................................................................

If No, why? ..................................................................................

**Q5.** Have you ever taken drugs which have not been prescribed for you? Yes □  No □

5.1. If Yes, which drugs have you used and how often?

Please tick below

<table>
<thead>
<tr>
<th>Drug</th>
<th>Daily</th>
<th>Several times a week</th>
<th>Once a week</th>
<th>Once a month</th>
<th>Less often</th>
<th>Only tried once</th>
<th>Location/Place where you take it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannabis</td>
<td></td>
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<td>Speed</td>
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<td>Ecstasy</td>
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<td>Tranquilizers</td>
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<td>Solvents</td>
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<td></td>
</tr>
<tr>
<td>Cigarettes</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Q6.** Excluding alcohol and cigarettes, have you ever taken more than one drug in an eight hour period? Yes □  No □

If Yes, please tick how often?

<table>
<thead>
<tr>
<th>Daily</th>
<th>Several times a week</th>
<th>Once a week</th>
<th>Once a month</th>
<th>Less often</th>
<th>Only tried once</th>
</tr>
</thead>
</table>

**Q7.** How much money do you spend weekly on substances?

- Cigarettes €..............
- Alcohol €..............
- Other drugs named in Q.5 €..............
Q8. Please state what you get out of taking drugs
   8.1 Best thing?
   8.2 Worst thing?

Q9. In general, have you ever felt any of the following?
   - Depressed
   - Suicidal
   - Down/upset
   - Lonely
   - Socially excluded

Q10. Have you ever felt any of the above after using drugs?
     Yes ☐ No ☐ If Yes, state how you felt?

Q11. Do you think you have a problem with drugs?
     Yes ☐ No ☐

Q12. Have you ever tried to get help?
     Yes ☐ No ☐ If Yes, from whom?

Q13. Where do you get your information about drugs?
     ....................................................................................................................

Q14. Do you feel you need more information?
     Yes ☐ No ☐
     If Yes, state what you would like to know more about?
     ....................................................................................................................
     ....................................................................................................................

Would you like to make any additional comments?
..........................................................................................................................
..........................................................................................................................
..........................................................................................................................

Thank you for taking the time to complete this questionnaire
Questionnaire by Gorey Community Based Drugs Initiative
Focus Group Questions

Workshop One
- What is a drug?
- Current situation
- Experimentation
- Location
- Accessibility
- What is available?

Workshop Two
- Why do people use drugs?
- Image of drug dealers/users
- Attitudes to drug use
- Attitudes to anti-drugs and parental attitudes

Workshop Three
- How much do you spend?
- Where do you get money?
- Feelings and emotions.
- Feelings After drugs.
- Drug use in social scene.
- What services would you go for help?

Gorey CBDI Members
Colin Webb Chairman
Carol O Toole
Maria Waddock
Ann Codd
Tracey Doyle
Bernie Doran
Sara Kickham
Suzanne Nolan
Paul Leonard
Therese Celine Rowsome
Kerensa McRedmond