1st November, 2018

Deputy Thomas P. Broughan, TD
Dáil Éireann
Kildare Street
Dublin 2.

Re PQ: 42611/18

To ask the Minister for Health the addiction supports available to persons under 18 years of age across the country; the number of persons under 18 years of age accessing these supports; if there are waiting lists to access supports; and if he will make a statement on the matter.

Dear Deputy Broughan,

The Health Service Executive has been requested to reply directly to your above Parliamentary Question which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position:

In general, drug treatment goals for persons under 18 years of age initially focus on reduction of immediate harm, addressing psychosocial and interpersonal factors which perpetuate substance use and then to try to move towards abstinence. Specific policy and clinical governance issues for under 18s include consideration of the young person’s ability to consent to treatment and competence (or capacity to consent) and involvement of those with parental responsibility.

For the Deputy’s information the following is an overview of available information on services for persons under 18 years of age per CHO:
CHO 1

Donegal:

A HSE youth counsellor provides assessment, 1:1 counselling, signposting and onward referral for the youth population. The youth counsellor also provides support and guidance to parents and families concerned about a young person’s substance use and provides a service to young people who are affected by parental substance misuse. The HSE North West refers young people requiring Tier 4 residential treatment to the Aislinn Adolescent Residential Addiction Centre in Kilkenny when required. A 2nd Counsellor has a brief in working with young people under 18 who are affected by parental alcohol and substance use.

A range of HSE and section 39 funded programmes are available for young people in CHO 1 including:

**Foroige:** In partnership with the HSE and the National Family Support Network (NFSN) a support group for teens is in process, this is based on the teen support model devised by the NFSN. This will commence in Dec 2018. In addition they employ a Youth Drug & Alcohol Education worker in Co Donegal.

**Jigsaw, Donegal** is a partnership between HSE, and Headstrong. Jigsaw Donegal is a youth mental health initiative supporting 15-24 year olds in County Donegal. It is a primary health care model offering free direct access, drop in services and brief intervention. Youth substance misuse is addressed within the context of an overall assessment. Referral pathways to Tier 3 under 18 year old services have been established.

The LOFT is a Youth Project & Health Cafe managed in partnership with Donegal Youth Service and Foroige. The LOFT is open to all young people aged between 12 and 18 years old, funded by the HSE. The LOFT is a place where young people can avail of a wide range of facilities. Group work programmes delivered are as follows: health information and education, drop-in centre, listening ear service, learn new skills, entertainment events and meet with friends.

**Alcohol Forum** delivers a range of programmes for young people and families such as *Streetwise for Life*, a drug and alcohol awareness programme for 6th class and 1st year students. Families Matter, a division of the Alcohol Forum is the central provider of the Strengthening Families Programme (SFP) in the Northwest. SFP targets a whole family approach to family skills interventions for children aged from 6 to 17 years old. The Alcohol Forum also delivers a community mobilisation initiative that targets reducing alcohol consumption and provides specialist awareness raising courses to schools and colleges.

**M-PACT (Moving Parents and Children Together):** This programme is co-ordinated by the Alcohol Forum, facilitated by HSE staff and other staff from the community and voluntary sector. This is an 8-week whole family programme, the aim of the programme is to give a child a voice and to instil hope and coping with parental alcohol / substance Misuse.
Sligo/Leitrim/South Donegal & West Cavan:

The HSE Alcohol & Substance Misuse Counselling Service is a Tier 3 specialist community based service. There is one dedicated HSE Young Person’s Addiction Counsellor Post. The Counsellor provides counselling advice and information service to young people (up to the age of 18 years) and their parents and/or guardians in relation to problematic alcohol and/or illicit drug use.

The Counsellor also provides a service to the HSE Child and Adolescent Mental Health Service, as a full member of the multi-disciplinary CAMHS team and offers family and individual therapy to service users and concerned others.

The Counsellor facilitates the MPACT programme for and refers young people requiring Tier 4, residential treatment, to the Aislinn Adolescent Residential Addiction Centre in Kilkenny when required.

Sligo Leitrim Directory details services in Sligo and Leitrim where children, young people and families can access health, mental health, education, disability, youth and childcare.

Foroige and North Connaught, Youth Community Service deliver a range of direct access services to young people across the Sligo/Leitrim area inclusive of individual and group work alcohol and drug awareness programmes. Through Section 39 funding Foroige to employ two Youth Drug and Alcohol Education workers in the Sligo/Leitrim area.

The Crib is health advice café for young people aged 14 – 25 years old in Sligo Town operated by Foroige. This is a youth sign-posting and engagement service designed to encourage young people to access health services.

Cavan Monaghan:

Regarding CHO 1 Cavan Monaghan, an outreach drug awareness service is being provided by Cavan Drug Awareness, via Section 39 funding. There is an identified need for a specialist under-18 treatment service. A proposal is currently being prepared to undertake a review to establish the specific needs for Addiction Services in Cavan/Monaghan, the outcome of which will be progressed in the context of resources being made available

Funding provided to the Family Addiction Support Network to support the development of local groups in, Cavan/Monaghan

Alcohol Forum contracted to deliver training and education to health & social care staff.

Provision for Clinical nurse specialist and counsellor to work with under 18s: these roles currently in the recruitment process.
CHO 2

The HSE Regional Drugs Service - Galway, Mayo and Roscommon is a specialist community based addiction service providing direct access counselling, support and treatment for those aged 12 years and upwards. Tier 4 services can be provided where appropriate by Child and Adolescent mental health services or adult mental health services. Under 18s are also funded for referral to specialist Tier 4 services where needed. Two under 18 addiction counsellors are employed since September 2018 as part of providing a dedicated service to under 18’s in the region.

A range of programmes for young people are also provided through the following services:

The Youth Health Initiative in the GAF: The GAF is health advice café for young people aged 14 – 25 years old operated by Foroige in Galway city. This is a youth sign-posting and engagement service designed to encourage young people to access health services.

NO 4 (Augustine ST) is a direct access youth homeless counselling service in Galway city operated by Galway Diocesan Youth service.

Jigsaw Galway/Roscommon is a partnership between HSE, Mental Health Ireland and Headstrong. Jigsaw Galway is a youth mental health initiative supporting 12-25 year olds in Galway city and county. It is a primary health care model offering: free direct access, drop in services and brief intervention. One of the target areas is youth substance misuse and to date; one third of those accessing services have presented with drugs and alcohol issues. HSE Community Healthcare West is supporting similar developments in Mayo, i.e. Mindspace in Castlebar which has outreach clinics throughout the county. www.mindspacemayo.ie

The Western Regional Drug Task force (WRDTF) Family Support

The WRDTF and the HSE are developing family support groups across the region to help family members living with addiction. See www.wrdtf.ie for the Western Region DATF Family Support Strategy 2017-2020.

CHO 3

The Drugs and Alcohol Service currently works with young people aged from 14 to 25 years olds and their parents and/or guardians who present with problematic alcohol and/or illicit drug use. This service is provided through Clare, Limerick and North Tipperary services and in the regional Primary Care Drug Assessment Unit which works with young people (predominantly over 18 years old) in relation to opiate misuse.

The HSE funds a dedicated counsellor working with young people in Limerick Youth Service.

The Mid Western RDATF and HSE fund a dedicated families and young people service Community Substance Misuse Team working in the region.

Provision for Clinical nurse Specialist to work with under 18s: this role has recently commenced. – Recruitment process is under way for this post.

CHO 4
Service provision for the treatment of Alcohol and other substance misuse amongst under 18 year olds is available in a number of settings. Community based Counsellors are located throughout the region and provide first point of contact and initial assessment and referral if needed.

**Arbour House** (outpatient) Substance & Alcohol Misuse Service, St Finbarrs Hospital, Cork is a Tier 3 specialist centre working with clients, families and professionals. Arbour House works with young people from the age of 12 to 22 years. They work from an inclusive framework and have established long standing working relationships with both statutory and voluntary agencies throughout. This enables them to work from a co-constructed client centred perspective. The service provides evidence based approaches such as Cognitive Behavioural Therapy, Motivational Interviewing, Reality Therapy, Rational Emotive Therapy, and Community Reinforcement Approach (CRA)

Adolescent Community Reinforcement Approach (ACRA) and Community Reinforcement Approach Family Training (CRAFT).

The following services are provided to clients, families & professionals: initial consultations and assessments, comprehensive assessment, medical assessments & treatment, psychological assessment & treatment, case management, outpatient substance free treatment in the form of individual and group programmes, harm Reduction programmes, family support and Strengthening Families Programmes, community based brief intervention programmes, referral to inpatient treatment, aftercare and information sessions and research.

**Cara Lodge Residential Treatment Centre** is run by a Matt Talbot Services and has a Service Agreement with the HSE Southern Area to provide residential treatment to Boys under 18 years old who have drug and alcohol problems with coexisting psychosocial issues. The Centre caters for six boys at any given time.

**Matt Talbot Services** also provide a non-residential service in Trabeg Lawn, Douglas, Cork. This includes an assessment and day treatment service. The organisation also provides an occupational skills programme known locally as the YES Project.

**CHO 5**

The majority of people under 18 years of age are supported through community based drugs initiatives and supported by the HSE drug education officers. Where required, substance misuse counselling is available in each county. These services provide evidence based approaches such as Motivational Interviewing, Brief Interventions, Community Reinforcement Approach (CRA) and Adolescent Community Reinforcement Approach (ACRA). Three staff are currently training as CRA/ACRA/CRAFFT supervisors to support this programme.

In general, rehabilitative pathways for under 18 year olds include referral to: substance misuse education, harm reduction (where appropriate), brief intervention, therapeutic Intervention, psychology service/referrals for under 18 year olds, referral to residential treatment and referral to another appropriate support services such as social work and/or child and Child and Family Service (Mental Health).
Tier 2 Services for under 18 year olds in the South East: Tier 2 services which provide support, education and awareness programmes are run by the Frontline Project in Waterford, Drug Education Workers and Community Based Drug Initiative (CBDI) workers in all counties in the South east. Tier 2 open access drop-in clinics are run in all counties.

Tier 3 Services for under 18s in the South East: A tier 3 counselling service for more chaotic drug users is available through the community counselling services. Where possible counselling for under 18s is provided within youth appropriate settings.

Tier 4 Services for under 18 year olds in the South East: Residential detox and rehabilitation services are provided in the Aislinn Centre. Aislinn provide a four bedded detox facility and a 12 bedded 6 week rehabilitation programme. They also provide aftercare and family support services.

Sessional psychology services are now available through the Substance Misuse Services for young people who have complex psychological needs.

There are 28 workers accredited in the Community Reinforcement Approach Family Training (CRAFT) within the Southeast.

**Wexford:**

Community Drugs Outreach Workers are the first point of referral in County Wexford. In Wexford town, a multi-agency adolescent specific open access clinic is now open. This service provides an inter-agency service to adolescents to screen, assess and provide appropriate interventions to young people and families affected by alcohol and/or drug use. The Wexford service has also developed particularly strong links with the pediatric services in Wexford General Hospital.

**South Tipperary:**

The Substance Misuse Service South Tipperary facilitates a drop in clinic for under 18’s every week in the Clonmel Clinic. This service provides a free confidential service with no appointment necessary and facilitates brief intervention and referral pathways as outlined by NDRIC best practice guidance. Drop-in Clinics in Carrick on Suir, Tipperary Town, Cashel and Cahir also facilitate under 18 year olds and their parents on a weekly basis. A debriefing meeting is facilitated every two weeks with the full SMS team to discuss referrals and rehabilitative care planning for under 18 year olds. The SMS has facilitated discussions on substance misuse issues arising for young people with education and youth service providers in the South Tipperary Community Care areas. Complex cases for U18’s are managed through a shared care case management process with CAMHs, the SMS, TUSLA and other relevant agencies. A new Family Interventions and Young Persons Support Programme has been developed in South Tipperary which engages with young people and their families.

**Carlow/Kilkenny:**

The Substance Misuse Service and Carlow Youth Service provide support to under 18 year olds. Although there is no substance misuse specific under 18 year old drop in provided by the Substance Misuse Service, Carlow Youth Service provide a Youth Drop in Carlow Town and Tullow. Assessment identifies whether it is more appropriate for the young person to be seen in a youth setting and young people are referred to the Community Based Drugs Initiative.
worker within the Youth service for substance misuse issues. Under 18 year olds can also attend Open Access accompanied by a parent.

**Waterford:**

The Frontline project in Waterford works specifically with young people who engage in drug use and their families aged 12 to 23 years. Individual support for adolescents is offered by Community Based Drug Initiative Workers in the Youth service. The Substance Misuse Service provide a Tier 3 counselling service based in Squashy couch.

**CHOs 6 and 7**

There are a number of Young Persons Programmes which are specifically developed to target and provide support and treatment for young people.

The HSE employs a dedicated Consultant Psychiatrist with special interest in Adolescents in CHOs 6 and 7.

Programmes for young people are also available through the following services:

**The Youth Drug & Alcohol (YoDA) Service** in Tallaght provides a multidisciplinary treatment service to adolescents with drug and alcohol problems from LHO area Dublin South-West and Dublin South. The team expanded to include an additional clinical nurse specialist in December 2017.

**The Adolescent Addiction Service** in Bridge House provides a dedicated treatment service to LHO Area Dublin West.

**The HALO service** provides a multidisciplinary treatment service to adolescents with drug and alcohol problems from Co Kildare.

There are also some dedicated adolescent addiction programs run by certain Local Drugs Task Forces. These include **the Ciall project** for adolescents from Dublin 12 and **The STARR project** which provides treatment to some under 18s in Dublin 10.

In **Bray**, the Bray Community Drug Team (BCAT), in partnership with the HSE (Consultant Adolescent Psychiatrist in YoDA) provides an under 18s service, using evidence based treatment interventions such as ACRA.

The Youth Prevention Programme is based at Ballyogan Family Resource Centre, funded by the Dun Laoghaire drug and alcohol task force. It provides on-site and outreach support for young people aged 12-18 years. The services deals with young people experiencing problems with drug and alcohol abuse, family problems, social and emotional difficulties, bullying, school attendance, etc. It covers the whole county of Dun Laoghaire-Rathdown.

CHO 6 is represented on the Children and Young People’s Services Committee in Wicklow and is centrally involved in the development of a Jigsaw (Young Persons Mental Health) service which will be based in Dublin City Centre.
Mental Health Services for young persons in East Wicklow are provided by Lucena Services under service level agreement with the HSE.

**CHO 8**

**Louth Meath:**

A Clinical Nurse Specialist delivers the substance misuse service for under 18 year olds. An Under 18’s Substance Abuse Counsellor is in post since August 2016. The programme to be developed will be based on Yoda and SASSY.

The HSE also refers to Aislinn, Ballyragget, Co Kilkenny Tier 4 services and the young peoples' programme in the National Drug Treatment Centre for more intense psycho-social supports when required.

The HSE works in partnership with statutory and HSE funded youth services and schools with a view to ensuring that the needs of young people are catered for within existing resources.

**CHO 8 – Midlands Area – Longford/Westmeath/Laois/Offaly**

Extern MYDAS Project is a HSE section 39 funded service and is supported by Longford/Westmeath Education & Training Board. It provides a Drug & Alcohol Prevention & Treatment Support Service for the Midlands area for people under 18 years (including those in second level education). The service provides support and treatment to under 18s experiencing difficulties in relation to their drug and/or alcohol use themselves or are affected by drug/alcohol misuse within their families. The service also provides education, information and support to service users and their families and supports the delivery of a range of education and prevention programmes in line with best practice to the community, voluntary and statutory sector.

If required, U18’s can be referred to a Consultant Psychiatrist with a special interest in Adolescents. The team consists of dedicated project workers for each county with cross cover as required, a Family Support Specialist and U18’s Addiction Counsellor and all of the midlands team is directed by a Service Co-ordinator.

Once the service user reaches 18yrs, there will be a smooth transition to our Over 18 treatment and support services provided by MQI DATS Project and/or the CADS Team

Residential treatment is provided where appropriate upon assessment. Young people attending the U18 services are referred to either CAMHS or YAMHS where appropriate as well as other appropriate U18 services across the statutory/community & voluntary services.
CHO 9

HSE Dublin North City and County provides a range of adolescent programmes for young people up to and beyond the age of 18 years who are using heroin and other drugs. These programmes are delivered under the direction of multi-disciplinary teams and individually funded projects. Services are provided free of charge to clients and can be accessed by ringing the addiction centre nearest the home address of the client for an appointment.

The services provided are as follows: counselling, psychiatric treatment, follow-up service, methadone maintenance, reduction and detox, symptomatic detox, viral screening and viral treatment follow up, vaccinations, access to liaison maternity services, contraceptive advice, and access to Services. The HSE Northern Area has referred service users to Aislinn Adolescent Treatment Centre on a case by case basis.

Further programmes for young people are also available through the following services with catchment areas based in the Dublin North Central city area:

- **Crinan Youth Project** is a community drug treatment facility, providing treatment and rehabilitation for people under 21 years. Treatment includes a three pronged or holistic approach in which medical, therapeutic and social/educational support is provided by a multi-disciplinary team who work closely with the young person and their family.

- **Talbot Centre** is committed to developing supportive relationships with children, young people and their families whose lives have been affected by drug and/or alcohol use in the North Inner City. They work on three levels; prevention work with children and young people at risk, working with young people using drugs and community development / educational input.

- **SASSY** (Substance Abuse Service Specific to Youth) team works specifically with clients under 18 years of age with addiction issues, offering counselling and psychiatric assessment. The SASSY Team will see people up to their eighteenth birthday if drug and/or alcohol use is causing a negative impact, or if gambling or gaming/internet/porn addiction is a problem. There is no lower entry age cut-off. The service accepts self-referrals and referrals from family or professionals involved.

SASSY offers 1:1 counselling, psychiatric assessment, medication, and family therapy. The main clinic is located centrally and there are 5 satellite clinics at Blanchardstown, Ballymun, Balbriggan, Swords and Kilbarrack. Treatments use evidence –based approaches such as Motivational Interviewing, Cognitive Behavioural Therapy, Relapse Prevention, and Psycho-education. The team offers support to other services in the North Dublin area, and engages in significant multi-agency work to ensure comprehensive care-planning.

The catchment area covered by the SASSY team is very large comprising of all Dublin North, both city and county, up to the county boundaries.

- **Edenmore Drug Intervention Team**: Provide abstinence based aftercare group for young persons leaving residential treatment for North Dublin Area. The service also provides counselling/keyworking and case management to persons under 18 years.

A number of Neighbourhood Youth Projects are also funded through HSE to work with under 18s in the area of prevention and Education namely Blakestown Mountview NYP in Dublin 15.
There are also individual professionals working in other services who work directly with young people who actively use drugs - some have been accredited in ACRA/CRAFT or in motivational interviewing. In particular Foroige, Crosscare and Sherrard Street Youthreach.

**National Drug Treatment Centre**

The National Drug Treatment Centre has long experience in the provision of treatment to heroin dependent adolescents, aged under 18 years. The experienced team, which includes input from clinical psychology, project workers and social work has the ability to meet the needs of such clients. The team is led by consultant child and adolescent psychiatrists. It includes opiate substitution treatment and psychological and psychiatric treatments. Demand for this service has fallen substantially in the past decade, as heroin use has become very uncommon in this age range.

Young people from Dublin and surrounding areas/counties that are opiate dependent can be offered this full treatment programme for opiate dependence at this clinic.

In relation to number of persons under 18 years of age accessing these supports:

Appendix 1 outlines the number of people under 18 years old treated for alcohol as a main problem drug, as reported to the NDTRS, 2016, 2017.

Appendix 2 outlines people under 18 years treated for drugs other than alcohol as a main problem drug, as reported to the NDTRS 2016, 2017.

In terms of waiting lists, as at the end of June 2018 the HSE Key Performance Indicator report (quarter in arrear), the percentage of under 18s for whom treatment has commenced within one week following assessment is 100%.

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,

Joseph Doyle
National Planning Specialist
Appendix 1: People under 18 years treated for alcohol as a main problem drug, as reported to the NDTRS, 2016, 2017

NDTRS Terms & Conditions

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6. The NDTRS must be provided with a copy of all documents in which NDTRS data are used.
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National Drug Treatment Reporting System

Treatment for problem alcohol and drug use in Ireland is provided by statutory and non-statutory services, including residential centres, community-based addiction services, general practices and prison services.

For the purpose of the NDTRS, treatment is broadly defined as ‘any activity which aims to ameliorate the psychological, medical or social state of individuals who seek help for their substance misuse problems’. Clients who attend needle-exchange services are not included in this reporting system. From 2004 onwards, clients who report alcohol as their main problem drug have been recorded by the system. These data have been presented in an earlier paper in the HRB Trends Series (Fanagan et al. 2008). Drug treatment options include one or more of the following: medication (detoxification, methadone reduction, substitution programmes and psychiatric treatment), brief intervention, counselling, group therapy, family therapy, psychotherapy, complementary therapy, and/or life-skills training.

Compliance with the NDTRS requires that data be collected for each new client coming for first treatment and for each previously treated client returning to treatment for problem drug use in a calendar year.

Staff at the NHIS unit in the HRB process the anonymous, aggregated data, which are analysed and reported at national and EU levels. The main elements of the reporting system are defined as follows:

- **All cases treated** – describes cases who receive treatment for problem drug and/or alcohol use at each treatment centre in a calendar year, and includes:
- **Cases assessed only** – describes cases who were assessed but who did not progress to treatment
- **Previously treated cases** – describes cases who were treated previously for problem drug/alcohol use at any treatment centre and have returned to treatment in the reporting year;
*New cases treated* – describes cases who have never been treated for problem drug/alcohol use; and

*Status unknown* – describes cases whose status with respect to previous treatment for problem drug/alcohol use is not known.

Each case refers to an episode of treatment. Therefore ‘previously treated cases’ could appear more than once in the data, in a calendar year, if for example they receive treatment at more than one centre or at the same centre more than once per year.

NDTRS does not publish figures less than five to ensure that an individual cannot be inadvertently identified.

### Results:

Between 2016 and 2017 (the latest year available) 236 cases aged under 18 were treated for alcohol as a main problem drug, as reported to the NDTRS (Table 1). Most were treated in outpatient settings (Table 1). Table 2 shows the CHO of residence of each case.

<table>
<thead>
<tr>
<th>Table 1 Number of cases aged under 18, alcohol as a main problem, treatment setting, NDTRS 2016 to 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2016</strong></td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>Outpatient</td>
</tr>
<tr>
<td>Inpatient</td>
</tr>
<tr>
<td>Low threshold/other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 2 Number of cases aged under 18, alcohol as a main problem, by CHO of residence, NDTRS 2016 to 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHO</strong></td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>Area 1</td>
</tr>
<tr>
<td>Area 2</td>
</tr>
</tbody>
</table>
Brief interventions were the most common intervention provided by services, followed by individual counselling (Table 3) as reported to the NDTRS. It should be noted that cases may have received only one intervention or multiple interventions either in the same centre or different centres.

Table 3 Main interventions provided to cases aged under 18 years, 2016 to 2017, NDTRS

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief intervention</td>
<td>136</td>
</tr>
<tr>
<td>Individual Counselling</td>
<td>88</td>
</tr>
<tr>
<td>Brief intervention: individual</td>
<td></td>
</tr>
<tr>
<td>Education/awareness programme</td>
<td>66</td>
</tr>
<tr>
<td>Family therapy</td>
<td>33</td>
</tr>
<tr>
<td>Group education/awareness programme</td>
<td>16</td>
</tr>
<tr>
<td>Medication free therapy</td>
<td>16</td>
</tr>
<tr>
<td>Complementary therapy</td>
<td>16</td>
</tr>
<tr>
<td>Group Counselling</td>
<td>11</td>
</tr>
<tr>
<td>Strengthening families</td>
<td>9</td>
</tr>
<tr>
<td>Social and/or occupational re-integration</td>
<td>6</td>
</tr>
<tr>
<td>Psychiatric treatment</td>
<td>2</td>
</tr>
<tr>
<td>Alcohol detoxification</td>
<td>3</td>
</tr>
<tr>
<td>Key working</td>
<td>94</td>
</tr>
<tr>
<td>-------------------</td>
<td>----</td>
</tr>
<tr>
<td>Care planning</td>
<td>85</td>
</tr>
</tbody>
</table>
Appendix 2: People under 18 years treated for drugs other than alcohol as a main problem drug, as reported to the NDTRS 2016, 2017

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Compliance with the NDTRS requires that data be collected for each new client coming for first treatment and for each previously treated client returning to treatment for problem drug use in a calendar year.

Staff at the NHIS unit in the HRB process the anonymous, aggregated data, which are analysed and reported at national and EU levels. The main elements of the reporting system are defined as follows:

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and

*Status unknown* – describes cases whose status with respect to previous treatment for problem drug/alcohol use is not known.

Each case refers to an episode of treatment. Therefore ‘previously treated cases’ could appear more than once in the data, in a calendar year, if for example they receive treatment at more than one centre or at the same centre more than once per year.

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**Results:**

Between 2016 and 2017 (the latest year available) 236 cases aged under 18 were treated for drugs other than alcohol as a main problem drug, as reported to the NDTRS (Table 1). Most were treated in outpatient settings (Table 1). Table 2 shows the CHO of residence of each case.

**Table 1 Number of cases aged under 18, drugs other than alcohol as a main problem, treatment setting, NDTRS 2016 to 2017**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>629</td>
<td>591</td>
</tr>
<tr>
<td>Outpatient</td>
<td>422</td>
<td>373</td>
</tr>
<tr>
<td>Inpatient</td>
<td>51</td>
<td>53</td>
</tr>
<tr>
<td>Low threshold/other</td>
<td>156</td>
<td>165</td>
</tr>
</tbody>
</table>

**Table 2 Number of cases aged under 18, drugs other than alcohol as a main problem, by CHO of residence, NDTRS 2016 to 2017**

<table>
<thead>
<tr>
<th>CHO</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>629</td>
<td>591</td>
</tr>
<tr>
<td>Area 1</td>
<td>29</td>
<td>16</td>
</tr>
<tr>
<td>Area 2</td>
<td>16</td>
<td>32</td>
</tr>
</tbody>
</table>
Individual counselling was the most common intervention provided by services, followed by brief interventions (Table 3) as reported to the NDTRS. It should be noted that cases may have received only one intervention or multiple interventions either in the same centre or different centres.

### Table 3 Main interventions provided to cases aged under 18 years, drugs other than alcohol, 2016 to 2017, NDTRS

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Counselling</td>
<td>538</td>
</tr>
<tr>
<td>Brief intervention</td>
<td>408</td>
</tr>
<tr>
<td>Brief intervention: individual</td>
<td>302</td>
</tr>
<tr>
<td>Education/awareness programme</td>
<td></td>
</tr>
<tr>
<td>Family therapy</td>
<td>243</td>
</tr>
<tr>
<td>Medication free therapy</td>
<td>140</td>
</tr>
<tr>
<td>Complementary therapy</td>
<td>118</td>
</tr>
<tr>
<td>Group education/awareness programme</td>
<td>107</td>
</tr>
<tr>
<td>Group Counselling</td>
<td>102</td>
</tr>
<tr>
<td>Strengthening families</td>
<td>64</td>
</tr>
<tr>
<td>Detox other drug</td>
<td>48</td>
</tr>
<tr>
<td>Social and/or occupational re-integration</td>
<td>28</td>
</tr>
<tr>
<td>Service</td>
<td>Code</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Psychiatric treatment</td>
<td>23</td>
</tr>
<tr>
<td>Benzodiazepine detox</td>
<td>7</td>
</tr>
<tr>
<td>Methadone substitution</td>
<td>~</td>
</tr>
<tr>
<td>Key working</td>
<td>573</td>
</tr>
<tr>
<td>Care planning</td>
<td>471</td>
</tr>
</tbody>
</table>
Appendix 3 Description of treatment as per NDTRS protocol

Please note that the description is intended as an aid for services to categorise the treatment provided however it is the responsibility of that service to ensure that the definition they choose most accurately reflects the treatment provided.

### Brief intervention

Typically, brief interventions comprise between one and four sessions with a trained interventionist (counsellor, doctor, psychologist or social worker, for example), with each session ranging from 30 minutes to one hour. Research findings indicate that brief interventions can be an effective way to reduce substance misuse, especially among non-treatment-seeking individuals who do not have severe substance misuse problems that would require more intensive treatment.

A brief intervention that includes motivational interviewing is titled a brief motivational intervention (BMI). BMI is a collaborative method that makes use of reflective listening and empathy as well as specific techniques (asking key questions, anticipating the future), in order to enable service users with substance misuse-related problems to explore and resolve their ambivalence about reducing their substance use. Brief motivational interventions often involve giving the service user feedback regarding their substance misuse and the risks associated with it. This type of brief intervention is also included in this treatment option.

### Individual counselling

In individual counselling, the relationship between the service user and the counsellor is of fundamental importance. The counsellor focuses on the development of the relationship and its progress from initial contact to effective outcome. The counsellor helps the service user identify choices for the future, and then supports the service user as they implement such choices. **Relapse prevention is considered part of the counselling process.**

Counselling theory and practice can be divided into three main areas: psychoanalytical, behavioural and cognitive. These approaches represent different ways of understanding human personality.

Psychoanalysis is concerned with how past conflicts influence present behaviour.

Behavioural therapy focuses on the problem behaviour itself.

Cognitive approaches aim to understand current problems and ways of interacting.

While counsellors work from a fundamental base of theoretical knowledge and self-awareness, in practice, they may fuse different theories and approaches in order to effectively recognise the needs of their service users and offer appropriate help.

### Group counselling

In group counselling the counsellor acts as facilitator for more than one person. The aim of a group therapy is to explore, to change, to challenge and be challenged towards personal growth. The group interacts within itself, with its members and with the counsellor. At times, the group takes over the role of counsellor by focusing, listening and helping to resolve problem areas. The strongest reason for participation in group counselling can be the support of group members for one another through explorations of self. Relapse prevention is considered as being part of counselling.

### Individual education/awareness programmes

These programmes inform service users of the effects of problem alcohol and drug use. Individual
education/awareness programmes involve individual sessions with service users, and normally comprise a predetermined number of sessions.

**Group education/awareness programmes**

These programmes inform service users of the effects of problem alcohol and drug use. Group education/awareness programmes involve group sessions with service users, and normally comprise a predetermined number of sessions.

**Medication-free therapy**

In order to break the cycle of chronic drug use, drug-dependent individuals must make important attitude and lifestyle changes, and they usually need help in order to do so. Psychosocial treatments, psychoanalysis, therapeutic community and spiritual approaches help drug misusers achieve and sustain meaningful periods of abstinence.

**Complementary therapies**

**Acupuncture** is one of the complementary therapies used for the treatment of stimulant misuse. Other complementary therapies, such as reflexology, yoga and massage, are used to manage the stressors associated with the problem drug use.

**Social and/or occupational reintegration**

The primary aim of social and/or occupational reintegration is to prepare the service user for positive participation in daily life. Social and/or occupational reintegration comprises personal development courses, work-related training and work experience projects. **CE schemes delivered by your service** should be included under this intervention.

**Family therapy**

Family therapy (a form of psychotherapy) involves discussion and problem-solving sessions with selected family members. For the purposes of the NDTRS, it **must be** delivered by a trained family therapist. The sessions may take the form of group sessions, couple sessions or one-to-one sessions. In family therapy, the web of interpersonal relationships is examined and, ideally, communication is strengthened within the family. If relevant, patterns that may contribute to problem drug use are identified during the therapy sessions, and family members are then facilitated to address these patterns.

**Strengthening family programme/Structured family intervention*Revised definition for 2017***

A **strengthening family programme** encompasses family/systemic consultation, and involves intervention within families and communities, which enhances protective factors for young people. This is a family skills training programme designed to increase resilience and reduce risk factors for substance misuse, such as depression, violence and aggression, involvement in crime and school failure in high-risk 13-17 year-old children. It is also designed to increase resilience/reduce risk factors for the parents of such children.

A **structured family intervention** is where a counsellor (not a family therapist) provides a very structured and intensive programme using a set curriculum over prescribed number of days/weeks with a service user over the **age of 18 and their family**. However, before choosing this option please...
consider whether it is more appropriate to record this as treatment for concerned person. In this case a new episode can be started in the on-line system for the concerned person.

**Psychiatric treatment**

Psychiatric treatment for problem drug use involves service users receiving a combination of counselling and prescribed medication (other than, or along with, opiate substitutes or detoxification medications) to alleviate their problems.