



Department of
**Health, Social Services
and Public Safety**
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Statistics from the Northern Ireland Drug Misuse Database: 1 April 2011 – 31 March 2012

This bulletin summarises information on people presenting to services with problem drug misuse and relates to the 12-month period ending 31 March 2012. It is the eleventh bulletin reporting on information collected through the Northern Ireland Drug Misuse Database (DMD), which was established in April 2000 and which collects detailed data on those presenting for treatment, including information on drugs misused and injecting behaviour.

Summary

In Northern Ireland during 2011/12:

- 2,999 individuals presented for treatment and gave their consent for their details to be included in the DMD. This is compared with 2,593 in 2010/11, an increase of 406 individuals (16%).
- The majority (75%) of individuals who presented were male; and just under one quarter (24%) were aged 21 years and under.
- Cannabis was the most commonly reported main drug of misuse; it was reported by 41% of individuals in 2011/12 compared with 40% in 2010/11.
- Benzodiazepines were the second most commonly reported main drug of misuse; they were reported by 24% of individuals in 2011/12 compared with 19% in 2010/11.
- Both other opiates and cocaine were the third most commonly reported main drugs of misuse; each reported by 7% of individuals in 2011/12.
- Heroin was reported as the main drug of misuse by 6% of individuals in 2011/12 compared with 7% in 2010/11. Of those who presented for treatment in 2011/12 and reported heroin as their main problem drug, 55% had been treated before.
- The proportion of individuals who had ever injected was 7% in 2011/12, compared with 8% in 2010/11.

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1. Introduction

1.1 In 1995, the Northern Ireland Drugs Policy Statement highlighted the need for a centralised database on drug misuse in Northern Ireland. The then Department of Health and Social Services (DHSS) subsequently commissioned a feasibility study that considered the experience elsewhere (databases already existed in Scotland, Wales, and regionally in England), data availability, and data quality in Northern Ireland and took due account of issues of confidentiality. The study found that the majority of agencies were supportive of the idea of a drug misuse database and identified a number as potential providers.

1.2 Subsequently the Northern Ireland Drug Misuse Database (DMD) was established and data collection commenced from April 2000. The database is maintained by the Public Health Information and Research Branch (PHIRB) located within the Department of Health, Social Services, and Public Safety (DHSSPS).

1.3 The New Strategic Direction for Alcohol and Drugs 2006-2011 was launched in October 2006. As a result the nature of the service provided by some treatment services changed to meet the needs outlined in the strategy. The NSD was reviewed, revised and extended and in December 2011 the New Strategic Direction for Alcohol and Drugs: Phase 2 - 2011-2016, was launched.

1.4 This is the eleventh bulletin to be published using data from the DMD and covers the period 1 April 2011 – 31 March 2012. By the end of 2011/12, 43 treatment services were contributing to the database of which 19 were non-statutory, 20 were statutory and 4 services were based within prisons. It is important to note that more than one treatment service may be represented by the same organisation, for

example, where an organisation has services in more than one location, and across Health and Social Care Trusts. In addition, while a client might present for treatment to services based within the prisons, this does not mean that the client is using drugs whilst in custody.

1.5 The DMD collects information on problem drug users presenting to services for the first time, or for the first time in six months or more, and who will receive treatment at the agency. A problem drug user is defined as a person who experiences social, psychological, physical or legal problems (related to intoxication and/or regular excessive consumption and/or dependence) as a consequence of their own use of drugs or chemical substances. Drugs are defined as any drug, whether prescribed or not, including solvents and tranquillisers but excluding alcohol and tobacco. The data are collected from drug treatment agencies and include selected personal details and information regarding the drugs misused and the type of agency attended: these data are passed on in an anonymised form to PHIRB for inclusion in the DMD. As provision of information to the DMD requires client consent, in a number of cases consent was withheld and full information relating to these clients has not been included in the DMD (Table 1).

1.6 The aim of the DMD is to provide high-quality, consistent information on the numbers and profiles of presenting problem drug users to inform both policy and practice. The database will be kept under review.

Compliance Exercise

1.7 In 2011, a compliance exercise was in progress to improve completion and return of DMD forms. It is important to consider this when comparing the numbers presenting to treatment services in 2011/12 with previous years, as any increase can be

partly explained by the compliance exercise and thus it may not be entirely an increase in the number of individuals presenting to treatment services.

Other Information Available

1.8 It is important to note that this report does not provide information on the overall size and nature of problem drug use or misuse in Northern Ireland. Other research commissioned and published by PHIRB complements this DMD bulletin. All PHIRB publications are available online at: http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health/stats-drug-alcohol.htm

Participation in the DMD

1.8 Client participation in the DMD depends on client consent. Information was received from 3,123 clients who presented for treatment, and client consent was withheld in 124 (4%) cases (Table 1). All figures in this report are based on the 2,999 clients who gave their consent to be included in the DMD.

2. Profile of service users

Age and Gender of Clients

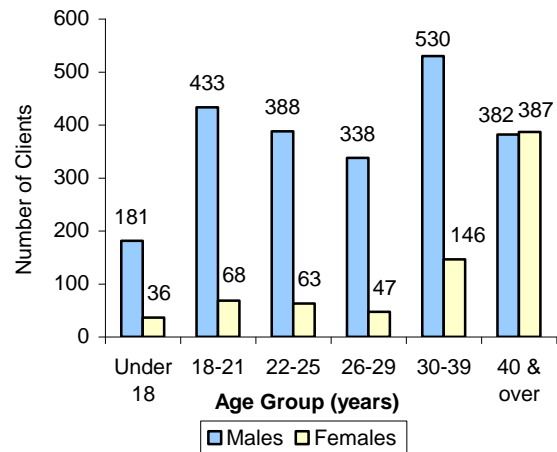
2.1 Three quarters (75%) of clients who presented for treatment were male (Table 2). This is similar to the gender split found in England where the majority (73%) of treated persons were male (Source: National Treatment Agency for Substance Misuse ‘Statistics from the National Drug Treatment Monitoring System (NDTMS), 1 April 2010 – 31 March 11’).

2.2 The average (mean) age of clients who presented for treatment was 32 years. The greatest proportion of those presenting for treatment were aged 22-29 years (28%) followed by those aged 40 years and over (26%). Just under one quarter were aged 21 years and under (24%) while 23% were aged 30-39 years (Table 3).

2.3 The age profile for female clients was older than that for male clients: Over

one half (52%) of female clients compared with 17% of male clients were aged 40 years and over, while over one quarter (27%) of male clients were aged 21 years or under, compared with 14% of female clients (Table 4; Figure 1).

Figure 1. Age and gender of clients that presented for treatment: 2011/12

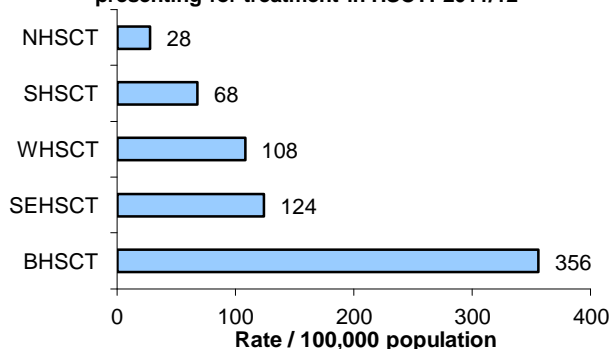


Geography

2.4 Approximately two fifths (41%) of clients presented for treatment in the Belfast Health and Social Care Trust (HSCT), 14% in the South Eastern HSCT, 11% in the Western HSCT, 8% in the Southern HSCT and 4% in the Northern HSCT (Table 1). It should be noted that these figures are based on where people presented for treatment, and not their place of residence. Data on place of residence for those registered on the DMD are incomplete, as only 5-figure postcodes are available, and in some instances postcode data are missing or erroneous. For clients whose area of residence could be determined and excluding those who were being treated in prison, 88% lived in the same HSCT as they were treated in. This suggests that HSCT of treatment is a reasonable proxy for HSCT of residence.

2.5 The incidence of treatment per 100,000 population was higher in the Belfast HSCT (356 per 100,000 population) than in the South Eastern, Western, Southern and Northern HSCTs (124, 108, 68 and 28 per 100,000 population, respectively) (Figure 2).

Figure 2. Rates per 100,000 population presenting for treatment in HSCT: 2011/12



Type of Treatment Service Agency

2.6 Over three fifths of clients (63%) presented for treatment at statutory agencies. The majority of clients in each of the five HSCTs presented for treatment at statutory agencies, varying from 79% in the South Eastern HSCT to 51% in the Belfast HSCT (Table 5).

3. Referral Details

Reason for attendance

3.1 Almost one half of clients (47%) reported that they were required by others to attend treatment, while 37% reported that their decision to attend was wholly their own choice and 16% were persuaded by others (Table 6).

3.2 The three most commonly reported reasons for attending a treatment agency were psychological (41%), family/relationships (38%) and legal (36%). Other reasons included medical e.g. detoxification (27%), financial (8%), job (7%) and housing (4%) (Table 6).

Referral Source

3.3 Two fifths (40%) of clients who presented for treatment were referred by a General Practitioner, followed by Prison/Young Offenders Centre (20%). Other sources of referral included self-referral (11%), probation services (6%), psychiatrist/mental health service (4%), social services (3%), and family/friend (2%) (Table 7).

Proposed Action

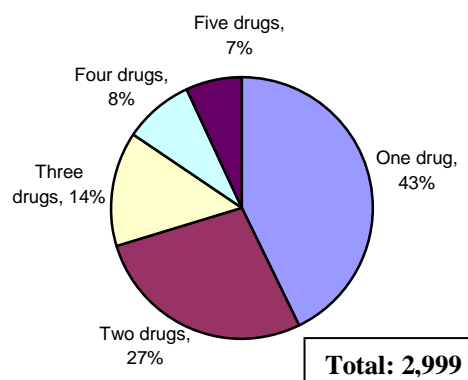
3.4 The agency reporter must record all actions which they propose to take/initiate, or have taken, in respect of the client. Counselling was proposed for over half of clients (54%), while education/information was proposed for just under half of clients (47%). Both detoxification and mentoring were a proposed action for 14% of clients (Table 8), while advised screening for HIV, Hep B or C was proposed for 5% of clients.

4. Drugs of Misuse

Background

4.1 Clients must record one main problem drug; this is the drug which is causing the client the most problems at the time they presented for treatment. They also have an option to record a further four subsidiary drugs of misuse. Figure 3 shows the number of drugs clients reported misusing. Over two fifths (43%) of clients reported misusing only one drug, while over one quarter (27%) reported misusing two drugs. Seven per cent of clients reported misusing five drugs.

Figure 3. Number of drugs misused per client: 2011/12

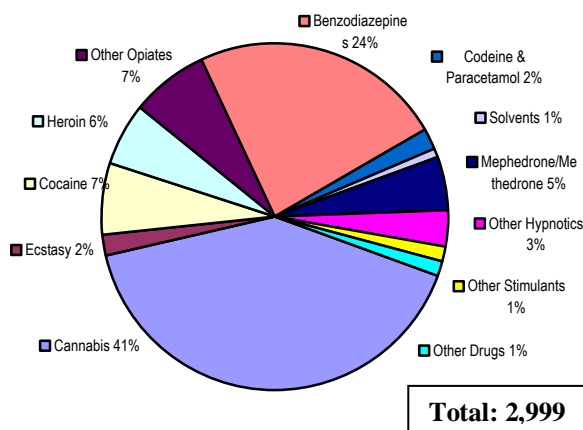


Main Drug of Misuse

4.2 The most frequently reported main drug of misuse was cannabis, accounting for two fifths (41%) of clients who presented for treatment, followed by benzodiazepines (24%). This was followed by cocaine (including crack cocaine) and other opiates (each 7%) while heroin was the main

problem drug for 6% of clients (Table 9; Figure 4).

Figure 4. Main drugs of misuse: 2011/12



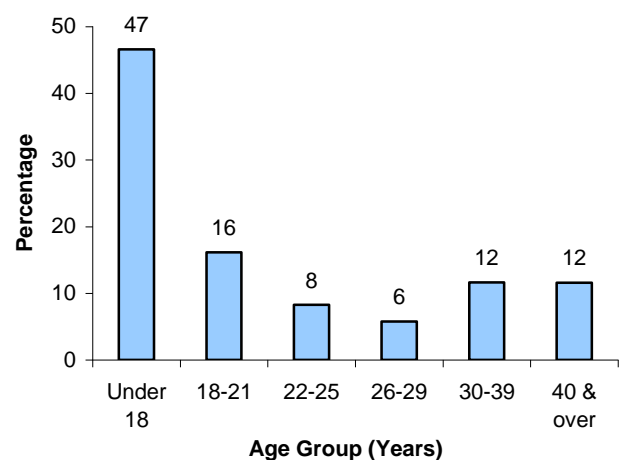
4.3 There was considerable variation between male clients and female clients in the main drug of misuse reported (Table 9). Almost one half (48%) of male clients reported that cannabis was their main problem drug, compared with just under one fifth (18%) of female clients. In addition, 8% of male clients compared with 3% of female clients reported cocaine (including crack cocaine) as their main problem drug. In contrast, a larger proportion of female clients (45%) than male clients (16%) reported benzodiazepines as their main problem drug, and 8% of female clients compared with 2% of male clients reported other hypnotics as their main problem drug.

4.4 There was also variation between the client's age group and the main drug of misuse reported (Table 10). As in previous years, cannabis was the most commonly reported main problem drug by clients in both the under 18 years and 18-25 years age groups, while for clients aged 26 years and over benzodiazepines were the most commonly reported main problem drug. For clients aged under 18, almost four fifths (78%) reported cannabis; 9% reported mephedrone/methedrone; and 6% reported solvents as their main problem drug. For clients aged 18-25 almost three fifths (58%) reported cannabis; 12% reported

benzodiazepines; 7% reported methedrone/mephedrone, and 6% reported other opiates as being their main problem drug. For clients aged 26 years and over, approximately one third (32%) reported benzodiazepines as their main problem drug. Following this, the most commonly reported main problem drug for those aged 26 years and over was cannabis (28%), other opiates (9%), cocaine (including crack cocaine) (7%), and heroin (7%).

4.5 The average (mean) age clients first used their main problem drug was 23 years. Almost one half (47%) reported first using their main problem drug before the age of 18 years, while 16% reported first using it between 18 and 21 years. Fourteen per cent of clients reported first using their main problem drug aged between 22 and 29 years, and almost one quarter (23%) reported first using it aged 30 years and over (Figure 5).

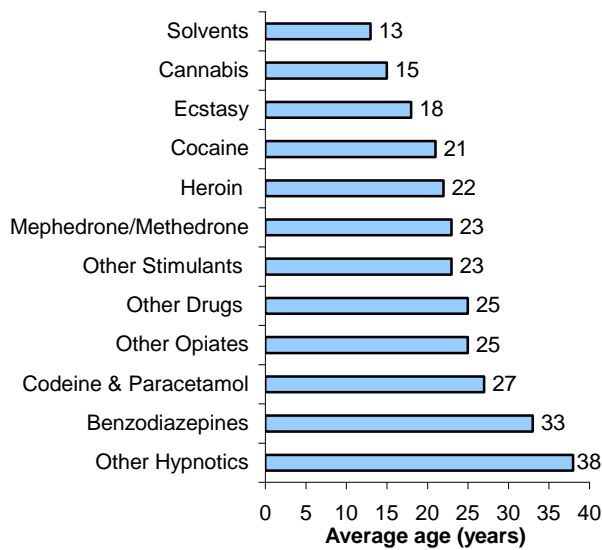
Figure 5. Age of first use: main drug of misuse: 2011/12*



*Age of first use was unknown for 109 individuals

4.6 There was considerable variation in age of first use and main problem drug reported. The lowest average (mean) age of first use was for solvents (13 years) and cannabis (15 years). The highest average (mean) age of first use was for other hypnotics (38 years) and benzodiazepines (33 years) (Figure 6).

Figure 6. Average (mean) age of first use of main problem drug: 2011/12



Geography

4.7 Cannabis was the most frequently reported main problem drug by clients in four of the five HSCTs. In the Western HSCT 64% reported their main problem drug as being cannabis, followed by 56% in the Southern HSCT, 42% in the Northern HSCT, and 36% in the Belfast HSCT. The most frequently reported main problem drug in the South Eastern HSCT was benzodiazepines (44%), followed by cannabis (28%). The Northern HSCT had the largest proportion of clients (20%) reporting heroin as their main problem drug. The Southern HSCT had the largest proportion of clients reporting cocaine (including crack cocaine) (8%) and mephedrone/ methedrone (13%) as their main problem drug (Table 11).

All drugs of misuse

4.8 Clients presenting for treatment may have more than one drug of misuse. The DMD can record up to a total of five drugs of misuse, one main problem drug and four subsidiary drugs. Over seven tenths (1,227 of 1,733 clients; 71%) of clients who reported cannabis as a problem drug reported it as their main problem drug (Tables 11 & 12). Similarly, of those who reported heroin as a problem drug, over four

fifths (174 of 227 clients; 77%) reported it as their main drug of misuse. Just over half (705 of 1,254 clients; 56%) of those who reported benzodiazepines as a problem drug reported it as their main problem drug, while 50% (219 of 442 clients) of those reporting other opiates as a problem drug reported it as their main problem drug. In contrast, a smaller proportion of clients (55 of 426 clients; 13%) who reported ecstasy as a problem drug reported it as their main drug of misuse.

4.9 The most commonly reported drug of misuse was cannabis, with almost three fifths (58%) of clients reporting it as a problem drug. Benzodiazepines was the second most commonly reported drug of misuse (42%), although it should be noted that the majority of clients presenting to treatment for these drugs were in the Belfast and South Eastern HSCTs where benzodiazepine projects exist (53% and 70%, respectively). The third most commonly reported problem drug was cocaine (including crack cocaine) (24%) followed by mephedrone/methedrone and other opiates (each 15%), and ecstasy (14%).

All drugs of misuse by Trust

4.10 There were some variations across the HSCTs and the reported drugs of misuse. A majority of clients in the South Eastern HSCT (70%) and 53% in the Belfast HSCT reported benzodiazepines as a problem drug, compared with 32% of clients in the Northern HSCT, 14% in the Western HSCT and 13% in the Southern HSCT. Cannabis was the most commonly reported drug by clients in the Western (80%), Southern (67%) and Northern (60%) HSCTs. In the South Eastern HSCT cannabis was the second most commonly reported drug of misuse, reported by 40% of clients. Mephedrone/methedrone was the second most commonly reported drug in the Western and Southern HSCTs (each 36%). (Table 12).

Reported use of alcohol

4.11 Alcohol cannot be recorded as the main problem drug or as one of the four subsidiary drugs on the DMD. However, clients can still record problem alcohol use, the average units consumed per week in the last 4 weeks and whether or not alcohol is their main problem.

4.12 Of the 2,999 individuals who presented for treatment, 38% reported problem alcohol use (Table 13). The largest proportions of clients who reported problem alcohol use were in the Southern (65%), Western (55%) and South Eastern (50%) HSCTs. Just over half (52%) of those that presented to treatment for both drug and alcohol misuse reported alcohol as being their main problem.

4.13 Of those who reported problem alcohol use, almost one half (46%) reported that they consumed between 1 and 99 units of alcohol on average per week in the four weeks before treatment. One fifth (20%) reported that they consumed between 100 and 249 units (Table 14).

5. Treatment History

5.1 Approximately one quarter (24%) of clients who presented to treatment in 2011/12 had previously been treated for drug misuse (Table 15).

5.2 There was some variation between the treatment history of clients and their main drug of misuse: 55% of clients who reported heroin, 41% of clients who reported other drugs, 35% of clients who reported ecstasy, and 34% of clients who reported other opiates and cocaine as their main problem drug, had been treated before. Smaller proportions of clients who reported benzodiazepines (11%), and other hypnotics (8%) as their main problem drug had been treated before.

5.3 There was some variation in treatment history between the four most

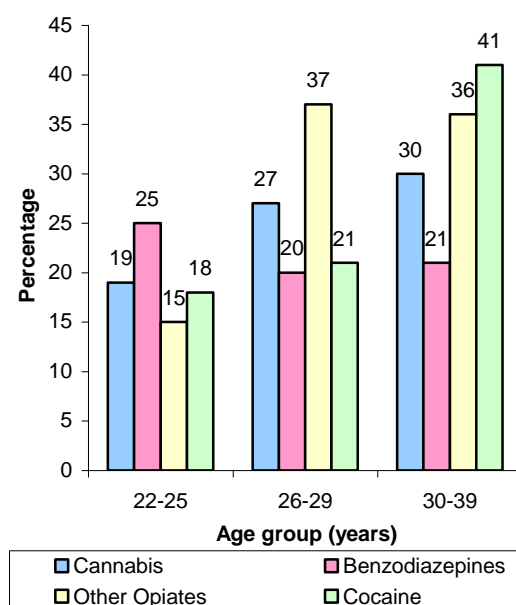
commonly reported main problem drugs and age group (Figure 7). The proportion of clients who reported benzodiazepines as their main problem drug and had been treated before differed; 25% of those aged 22-25 years, compared with 20% of those aged 26-29 years and 21% of those aged 30-39 years had been treated before.

For those who reported cannabis as their main problem drug, the proportion of clients who had been treated before ranged from 19% of those aged 22-25, to 30% of those aged 30-39 years.

For those who reported other opiates as their main problem drug, the proportion of clients who had been treated before ranged from 15% of those aged 22-25 years to 37% of those aged 26-29 years, and 36% of those aged 30-39 years.

For those who reported cocaine as their main problem drug, the proportion of clients who had been treated before ranged from 18% of those aged 22-25 years and 21% of those aged 26-29 years to 41% of those aged 30-39 years.

Figure 7. Percentage of clients previously treated for selected drugs and age groups: 2011/12



5.4 Of the clients who had previously been treated and whose age at first treatment was known (626 clients), almost one half (47%) were first treated aged 26 years and over, approximately two fifths (38%) were first treated aged 18-25 years and 15% were aged under 18 years (Table 16).

6. Injecting and Sharing Behaviour

Injecting Behaviour

6.1 Data regarding a client's injecting behaviour are collected in two different ways. The most frequent route of administration for each drug of misuse is recorded; and another question asks clients if they have ever injected any drug (injecting history).

6.2 Injecting was reported as the main route of administration by 123 clients (4%). Other main routes of administration were: oral (45%), smoking/inhalation (40%), and sniffing (11%) (Table 17).

6.3 The injecting history was known for 2,957 of the 2,999 clients (99%) who presented for treatment. Seven per cent (218 clients) of clients with a known injecting history reported that they had injected at some time in their lives (Table 18). The proportion of clients with a known injecting history that had injected varied across the five HSCTs: approximately one quarter (24%) in the Northern HSCT, compared with 9% in the Western HSCT, 6% in both the Belfast and Southern HSCTs and 5% in the South Eastern HSCT.

6.4 The age clients first injected was available for 208 of the 218 clients who had injected (injectors) (Table 19). Of these, 38% first injected at 18-21 years of age. A further 35% of injectors first injected aged 22-29 years. Nine per cent first injected at 30-39 years while 14% were under 18 years of age.

Sharing Equipment

6.5 The Department of Health, in their statistical publications on regional DMDs, suggest that reliance on a single question about sharing behaviour is likely to produce an underestimate of true sharing behaviour. The Northern Ireland DMD also uses a single question to elicit information about sharing behaviour, and thus the results quoted in this bulletin should be treated as **minimum estimates**. This question is only asked of those who have injected.

6.6 Information about the sharing of drug paraphernalia is known for 210 clients who had injected (Table 20), of which approximately three tenths (31%) reported sharing equipment. This was 35% for females and 31% for males.

7. Viral Testing

7.1 The DMD records if clients presenting for treatment have previously been tested for HIV, Hepatitis B, and Hepatitis C.

7.2 Table 21(a) shows that 92% of clients who presented for treatment had never been tested for HIV, 6% had ever been tested and 2% had been tested in the last 12 months.

7.3 Table 21(b) shows that 92% of clients who presented for treatment had never been tested for Hepatitis B, 6% had ever been tested and 2% had been tested in the last 12 months.

7.4 Table 21(c) shows that 92% of clients who presented for treatment had never been tested for Hepatitis C, 6% had ever been tested and 2% had been tested in the last 12 months.

7.5 96% of clients had not received any injections of the Hepatitis B vaccination course, 3% had completed all three injections, and 1% had started the vaccination course but not yet completed it.

The Northern HSCT had the smallest proportion of clients who had not had any injections of the Hepatitis B vaccination (83%). All other Trusts had between 96-98% of clients who had not received any injections of the Hepatitis B vaccination (Table 22).

8. Other Information

8.1 Some background information on clients who presented for treatment is given in Tables 23-26.

Living Arrangements

8.2 The greatest proportion of clients reported living alone (24%), followed by 22% who reported living in Prison/YOC. Around one fifth (21%) reported living with parents while 9% lived with spouse/partner and children, and 8% lived with spouse/partner only. Four per cent of clients were living with dependent children only. One hundred and seventy one (6%) reported living with other drug users (Table 23).

Employment Status

8.3 Thirteen percent of clients who presented for treatment were in employment at the time of presenting and almost three tenths of clients (28%) reported having worked in the 12 months before treatment commenced. Under one half (46%) of clients were unemployed and 9% were receiving other benefits. Five per cent of clients were students, while 4% were retired/receiving pension (Table 24).

EU Nationality

8.4 The vast majority (98%) of clients were EU nationals (Table 25).

Legal Status

8.5 It should be noted that clients can fall into more than one legal status category, and so percentages may not total 100. The majority of individuals (57%) reported no contact with the criminal justice system. Just over one fifth (22%) of individuals were in

prison, 8% were under community supervision and 6% had a trial pending. Others clients reported their legal status as arrest referral (5%), awaiting sentence (2%) and deferred sentence (1%) (Table 26).

9. Comparisons: 2010/11 to 2011/12

9.1 In 2011/12, 2,999 clients presented for treatment compared with 2,593 clients in 2010/11, an increase of 406 clients or 16% (Table C1).

Age of Clients

9.2 The age profile of clients who presented for treatment in 2011/12 was similar to that in 2010/11. The proportion of clients aged 21 years and under was 27% in 2010/11 compared with 24% in 2011/12. The proportion of clients aged 22-29 years was 27% in 2010/11 compared with 28% in 2011/12, while the proportion of clients aged 30 years and over was 46% in 2010/11 compared with 48% in 2011/12 (Table C1).

9.3 In the Belfast HSCT the proportion of clients aged under 18 years was 4% in 2010/11 compared with 5% in 2011/12. The proportion of clients aged 18-25 years was 32% in 2010/11, compared with 27% in 2011/12. The proportion of clients aged 26 years and over was 64% in 2010/11 compared with 68% in 2011/12 (Table C2(a)).

9.4 In the Northern HSCT the proportion of clients aged under 18 years was 38% in 2010/11 compared with 27% in 2011/12. The proportion of clients aged 18-25 years was 23% in 2010/11 compared with 26% in 2011/12, while the proportion of clients aged 26 years and over was 39% in 2010/11 compared with 47% in 2011/12 (Table C2(b)).

9.5 In the South Eastern HSCT the proportion of clients aged under 18 years was 5% in 2010/11, compared with 7% in 2011/12. The proportion of clients aged 18-

25 years was 25% in 2010/11 compared with 20% in 2011/12 and the proportion of clients aged 26 years and older was 70% in 2010/11 compared with 73% in 2011/12 (Table C2(c)).

9.6 In the Southern HSCT, the proportion of clients aged under 18 years was 22% in 2010/11, compared with 19% in 2011/12. The proportion of clients aged 18-25 years was 29% in 2010/11 compared with 26% in 2011/12 and the proportion of clients aged 26 years and over was 49% in 2010/11 compared with 55% in 2011/12 (Table C2(d)).

9.7 In the Western HSCT the proportion of clients aged under 18 years was 15% in 2010/11 compared with 12% in 2011/12. The proportion of clients aged 18-25 years was 37% in 2010/11 compared with 38% in 2011/12, whereas the proportion of clients aged 26 years and over was 49% in 2010/11 and 50% in 2011/12 (Table C2(e)).

Main Problem Drug

9.8 In both 2010/11 and 2011/12 cannabis was the most commonly reported main drug of misuse; the proportion of clients reporting it as their main problem drug was 40% in 2010/11 compared with 41% in 2011/12. Similarly, benzodiazepines was the second most commonly reported main problem drug in both 2010/11 and 2011/12; the proportion of clients reporting it as their main problem drug was 19% in 2010/11 compared with 24% in 2011/12. The proportion of clients who reported cocaine (including crack cocaine) as their main problem drug was 6% in 2010/11 compared with 7% in 2011/12, while the proportion of clients reporting heroin as their main problem drug was 7% in 2010/11 compared with 6% in 2011/12. (Table C3).

9.9 In the Belfast HSCT, the proportion of clients who presented for treatment with cannabis as their main problem drug was 38% in 2010/11 compared with 36% in

2011/12. The proportion of clients who reported benzodiazepines as their main problem drug was 26% in 2010/11 compared with 33% in 2011/12 (Table C4(a)).

9.10 In the Northern HSCT, the proportion of clients who reported cannabis as their main problem drug was 42% in both 2010/11 and 2011/12, while the proportion of clients who reported heroin as their main problem drug was 24% in 2010/11 compared with 20% in 2011/12. The proportion of those reporting other opiates as their main problem drug was 10% in 2010/11 compared with 15% in 2011/12 (Table C4 (b)).

9.11 In the South Eastern HSCT, the proportion of clients who reported cannabis as their main problem drug was 27% in 2010/11 compared with 28% in 2011/12, while the proportion of clients who reported benzodiazepines as their main problem drug was 32% in 2010/11 compared with 44% in 2011/12 (Table C4(c)).

9.12 In the Southern HSCT, the proportion of clients who reported cannabis as their main problem drug was 47% in 2010/11 compared with 56% in 2011/12, while the proportion of clients who reported other opiates as their main problem drug was 4% in 2010/11 compared with 6% in 2011/12. The proportion of clients reporting heroin as their main problem drug was 15% in 2010/11 compared with 6% in 2011/12 (Table C4(d)).

9.13 In the Western HSCT, the proportion of clients who reported cannabis as their main problem drug was 55% in 2010/11 compared with 64% in 2011/12. (Table C4(e)).

Injecting Behaviour

9.14 The proportion of clients who reported they had injected was 8% in 2010/11, compared with 7% in 2011/12. The

largest proportion of clients who had injected was in the Northern HSCT where 28% had injected in 2010/11 compared with 24% in 2011/12. The proportion of clients who had injected in the Western HSCT was 3% in 2010/11 compared with 9% in 2011/12. In the Southern HSCT the proportion of clients who had injected was 13% in 2010/11 compared with 6% in 2011/12. The proportion of those who had injected in the Belfast and South Eastern HSCTs remained similar in both years. (Table C5).

10. Acknowledgements

10.1 PHIRB would like to thank all the individuals involved in collecting the data presented in this bulletin – particularly the agencies who have collected and sent in data, and clients who presented for treatment for providing the information and allowing it to be used. PHIRB are also grateful to the DMD Project Management Group; and the Health Development Policy Branch within DHSSPS for their support and assistance.

11. Editorial Notes

11.1 Data were first collected for the DMD in Northern Ireland from 1 April 2000. The DMD was in a development stage in 2000/01, and data from that year are not suitable for publication.

11.2 This report is based on information received for 2011/12 up to and including 20 August 2012.

11.3 Percentages do not always add to 100 due to rounding.

11.4 Client's age is their age on their first face to face contact with treatment agency.

11.5 From the 1 April 2007 new procedures were implemented regarding the disclosure of information in publications. Any cell within a table that has a value of less than five (excluding zeros) has not been presented, while other cells have been masked to prevent the value in another cell

from being calculated. This is to ensure individuals cannot be identified.

11.6 Any comments or questions concerning the data contained in this publication, or requests for further information, should be addressed to:

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11.7 Further copies of this publication can be obtained on-line at:

http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health/stats-drug-alcohol.htm

Many other statistical and research reports from the Department of Health, Social Services and Public Safety's Information and Analysis Directorate are available at this web address.

The Northern Ireland Statistics and Research Agency

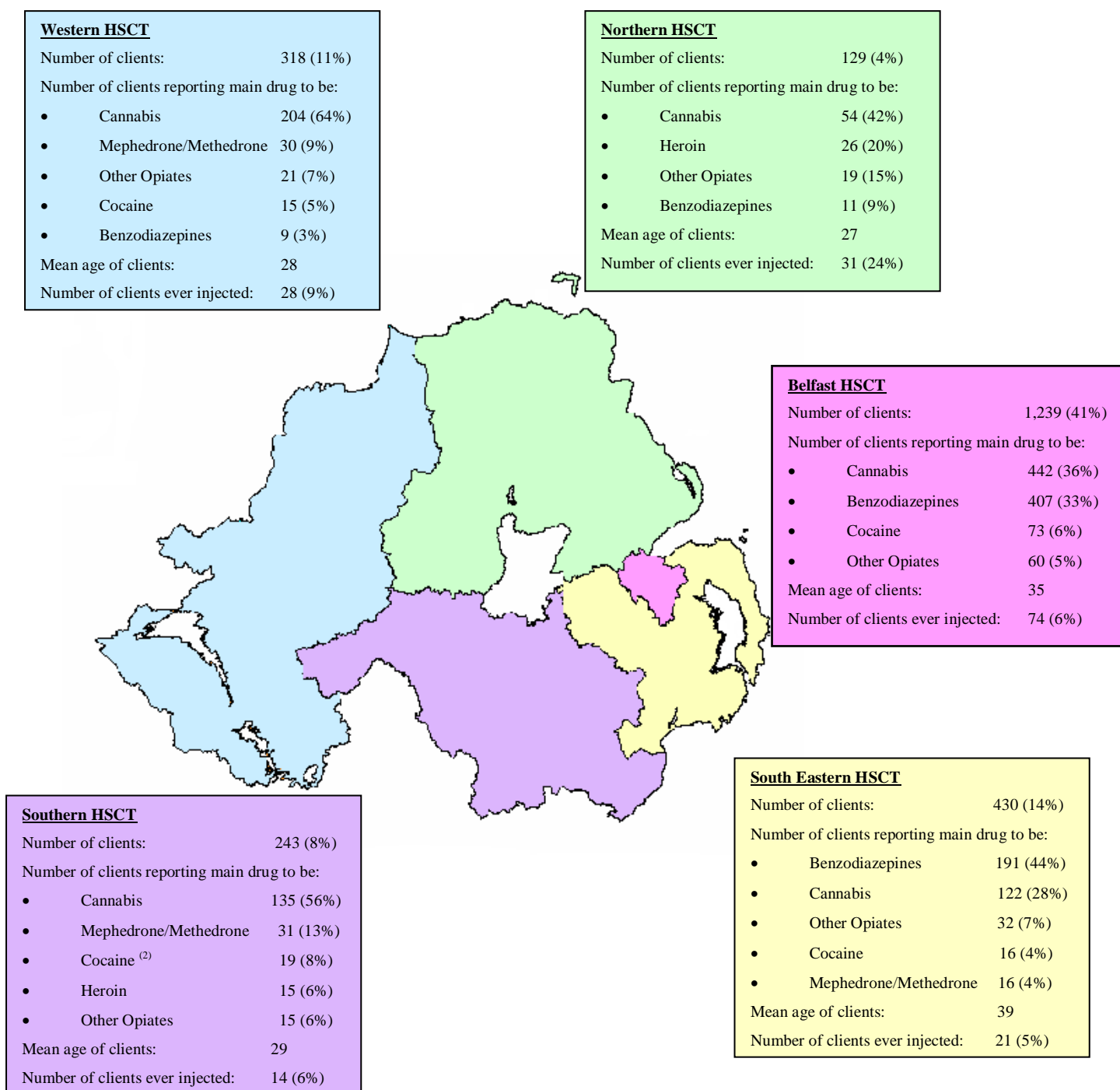
11.8 The Northern Ireland Statistics and Research Agency (NISRA) is the principal source of official statistical information about Northern Ireland. Further information is available from the NISRA website at www.nisra.gov.uk or via e-mail at info.nisra@dfpni.gov.uk.

Future Publications

11.9 This DMD publication will be updated on an annual basis. The next DMD Statistical Bulletin will be published on Thursday 3rd October 2013.

ANNEX A – MAP

Map showing summary statistics for each Health and Social Care Trust ⁽¹⁾



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⁽¹⁾ This map excludes returns received from prisons.

⁽²⁾ The services available across all Trust areas vary and this may be reflected in the main drugs of misuse. For example, in areas where benzodiazepine projects exist, there are greater proportions of individuals presenting to services with benzodiazepine misuse, than in areas where no such projects exist.

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Table 1. Total number of DMD forms received from each HSCT: 2011/12

numbers and percentages

HSCT ⁽¹⁾	Total number of forms received ⁽²⁾	Number of consent withheld forms received ⁽³⁾	Number of forms analysed ⁽⁴⁾
Belfast	1,334	95	1,239
Northern	-	-	129
South Eastern	-	-	430
Southern	-	-	243
Western	318	0	318
Prisons	640	0	640
Total	3,123	124	2,999

Percentages

Belfast	43	77	41
Northern	-	-	4
South Eastern	-	-	14
Southern	-	-	8
Western	10	0	11
Prisons	20	0	21
Total	100	100	100

⁽¹⁾ A complete HSCT has not been presented as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified. These cells have been marked '-'.

⁽²⁾ A DMD form is completed for every **problem drug user** who presents at an Agency for treatment. This covers only those problem drug users attending the Agency for the very first time, or for those who have not attended the Agency within the previous six months. They must present with a drug related problem.

⁽³⁾ The provision of information to the database requires client consent. Where consent is not given a blank form is returned with 'consent withheld' written across it, along with the designated Agency code.

⁽⁴⁾ All data in this statistical bulletin are based on an analysis of DMD forms where consent is given.

Table 2. Gender of clients who presented for treatment by HSCT: 2011/12

numbers and percentages

HSCT	Male	Female	Total
Belfast	832	407	1,239
Northern	99	30	129
South Eastern	250	180	430
Southern	209	34	243
Western	235	83	318
Prison	627	13	640
Total	2,252	747	2,999

Percentages

Belfast	67	33	100
Northern	77	23	100
South Eastern	58	42	100
Southern	86	14	100
Western	74	26	100
Prison	98	2	100
Total	75	25	100

Table 3. Age of clients who presented for treatment by HSCT: 2011/12

numbers and percentages							
HSCT	Under 18 years	18-21 years	22-25 years	26-29 years	30-39 years	40 years & over	Total
Belfast	58	165	171	139	278	428	1,239
Northern	35	18	16	12	34	14	129
South Eastern	32	43	43	38	89	185	430
Southern	46	29	34	39	52	43	243
Western	39	76	44	34	76	49	318
Prison	7	170	143	123	147	50	640
Total	217	501	451	385	676	769	2,999

Percentages

Belfast	5	13	14	11	22	35	100
Northern	27	14	12	9	26	11	100
South Eastern	7	10	10	9	21	43	100
Southern	19	12	14	16	21	18	100
Western	12	24	14	11	24	15	100
Prison	1	27	22	19	23	8	100
Total	7	17	15	13	23	26	100

Table 4. Age and gender of clients who presented for treatment: 2011/12

numbers and percentages

Age group	Male	Female	Total
Under 18 years	181	36	217
18-21 years	433	68	501
22-25 years	388	63	451
26-29 years	338	47	385
30-39 years	530	146	676
40 years & over	382	387	769
Total	2,252	747	2,999

Percentages

Under 18 years	8	5	7
18-21 years	19	9	17
22-25 years	17	8	15
26-29 years	15	6	13
30-39 years	24	20	23
40 years & over	17	52	26
Total	100	100	100

Table 5. Agency type of clients who presented for treatment in each HSCT: 2011/12

<u>numbers and percentages</u>			
HSCT ⁽¹⁾	Non-Statutory	Statutory	Total
Belfast	609	630	1,239
Northern	39	90	129
South Eastern	91	339	430
Southern	57	186	243
Western	88	230	318
Total	884	1,475	2,359

Percentages

Belfast	49	51	100
Northern	30	70	100
South Eastern	21	79	100
Southern	23	77	100
Western	28	72	100
Total	37	63	100

⁽¹⁾ Returns from Prisons are excluded from this analysis.

Table 6. Reasons clients reported for attending treatments services: 2011/12

	<u>numbers and percentages</u>	
Reason for attendance	Number	%
Wholly own choice	1,105	37
Persuaded by others	490	16
Required by others	1,404	47
Total	2,999	100
Reasons for attending: ⁽¹⁾		
Financial	254	8
Legal	1,085	36
Job	212	7
Family/Relationships	1,153	38
Medical e.g. detoxification	809	27
Psychological	1,220	41
Housing	115	4
Pregnancy	15	1
Not Known	10	0
Other	42	1

⁽¹⁾ Individuals can report more than one reason for attending treatment; percentages do not total to 100.

Table 7. Referral details of clients who presented for treatment: 2011/12

<u>numbers and percentages</u>		
Referral by	Number ⁽¹⁾	%
GP	1,194	40
Psychiatrist/mental health service	112	4
Social Services	77	3
Hospital	38	1
Community Addiction Team	70	2
Non- Statutory Agency	32	1
Legal requirement	52	2
Probation	185	6
Prison/ YOC	613	20
Self	320	11
Family/Friend	72	2
Education	32	1
Other	201	7
Total	2,998	100

⁽¹⁾ This table excludes 1 individual whose referral details were unknown.

Table 8. Proposed action of treatment for clients who presented for treatment: 2011/12

Proposed Action ⁽¹⁾⁽²⁾	numbers and percentages	
	Number	%
Persons	2,999	-
Assessment	2,622	87
Detoxification	407	14
Substitute Prescribing	105	4
Prescribing Contract	83	3
Counselling	1,623	54
Family Support	96	3
Rehabilitation	19	1
Throughcare	103	3
Mentoring	406	14
Education/Information	1,423	47
No intervention	10	0
Advised screening for HIV, HEP B or C	146	5
Not Known	-	-
Other	113	4

⁽¹⁾ Individuals can report more than one proposed action, and so percentages will not total to 100.

⁽²⁾ The Not Known category has a count of less than five.

Table 9. Main drug of misuse of clients who presented for treatment by gender: 2011/12

numbers and percentages

Main Problem Drug ⁽¹⁾	Male	Female	Total
Cannabis	1,091	136	1,227
Ecstasy	47	8	55
Cocaine ⁽²⁾	174	26	200
Heroin	142	32	174
Other opiates ⁽³⁾	160	59	219
Benzodiazepines	370	335	705
Codeine & Paracetamol	29	32	61
Solvents	14	9	23
Mephedrone/Methedrone	118	32	150
Other Hypnotics ⁽⁴⁾	43	59	102
Other Stimulants ⁽⁵⁾	32	7	39
Other Drugs ⁽⁶⁾	32	12	44
Total	2,252	747	2,999

Percentages

Cannabis	48	18	41
Ecstasy	2	1	2
Cocaine ⁽²⁾	8	3	7
Heroin	6	4	6
Other opiates ⁽³⁾	7	8	7
Benzodiazepines	16	45	24
Codeine & Paracetamol	1	4	2
Solvents	1	1	1
Mephedrone/Methedrone	5	4	5
Other Hypnotics ⁽⁴⁾	2	8	3
Other Stimulants ⁽⁵⁾	1	1	1
Other Drugs ⁽⁶⁾	1	2	1
Total	100	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽³⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁴⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁵⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁶⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table 10. Main drug of misuse of clients who presented for treatment by age: 2011/12

numbers and percentages

Main Problem Drug ⁽¹⁾⁽²⁾	Under 18 years	18-25 years	26 years & over	Total
Cannabis	169	551	507	1,227
Ecstasy	-	-	33	55
Cocaine ⁽³⁾	-	-	136	200
Heroin	-	-	137	174
Other opiates ⁽⁴⁾	0	53	166	219
Benzodiazepines	6	114	585	705
Codeine & Paracetamol	0	11	50	61
Solvents	12	-	-	23
Mephedrone/Methedrone	19	69	62	150
Other Hypnotics ⁽⁵⁾	-	-	92	102
Other Stimulants ⁽⁶⁾	-	-	26	39
Other Drugs ⁽⁷⁾	-	-	-	44
Total ⁽⁸⁾	217	952	1,830	2,999

Percentages

Cannabis	78	58	28	41
Ecstasy	-	-	2	2
Cocaine ⁽³⁾	-	-	7	7
Heroin	-	-	7	6
Other opiates ⁽⁴⁾	0	6	9	7
Benzodiazepines	3	12	32	24
Codeine & Paracetamol	0	1	3	2
Solvents	6	-	-	1
Mephedrone/Methedrone	9	7	3	5
Other Hypnotics ⁽⁵⁾	-	-	5	3
Other Stimulants ⁽⁶⁾	-	-	1	1
Other Drugs ⁽⁷⁾	-	-	-	1
Total	100	100	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ A complete age breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified. These cells have been marked '-'.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁶⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁷⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table 11. Main drug of misuse of clients who presented for treatment by HSCT: 2011/12

numbers and percentages

Main Problem Drug ^{(1) (2)}	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
Cannabis	442	54	122	135	204	270	1,227
Ecstasy	23	-	-	6	8	-	55
Cocaine ⁽³⁾	73	-	16	19	15	-	200
Heroin	57	26	11	15	8	57	174
Other opiates ⁽⁴⁾	60	19	32	15	21	72	219
Benzodiazepines	407	11	191	6	9	81	705
Codeine & Paracetamol	21	-	11	-	15	8	61
Solvents	12	-	-	-	-	-	23
Mephedrone/Methedrone	55	9	16	31	30	9	150
Other Hypnotics ⁽⁵⁾	69	0	15	-	0	-	102
Other Stimulants ⁽⁶⁾	6	0	5	6	-	-	39
Other Drugs ⁽⁷⁾	14	-	6	-	-	18	44
Total	1,239	129	430	243	318	640	2,999
<u>Percentages</u>							
Cannabis	36	42	28	56	64	42	41
Ecstasy	2	-	-	2	3	-	2
Cocaine ⁽³⁾	6	-	4	8	5	-	7
Heroin	5	20	3	6	3	9	6
Other opiates ⁽⁴⁾	5	15	7	6	7	11	7
Benzodiazepines	33	9	44	2	3	13	24
Codeine & Paracetamol	2	-	3	-	5	1	2
Solvents	1	-	-	-	-	-	1
Mephedrone/Methedrone	4	7	4	13	9	1	5
Other Hypnotics ⁽⁵⁾	6	0	3	-	0	-	3
Other Stimulants ⁽⁶⁾	0	0	1	2	-	-	1
Other Drugs ⁽⁷⁾	1	-	1	-	-	3	1
Total	100	100	100	100	100	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ A complete HSCT breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified. These cells have been marked '-'.
⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁶⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁷⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table 12. All drugs of misuse of clients who presented for treatment by HSCT: 2011/12

numbers and percentages

All Drugs ^{(1) (2)}	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
Persons	1,239	129	430	243	318	640	2,999
Cannabis	577	77	173	163	253	490	1,733
Ecstasy	158	14	26	54	91	83	426
Cocaine ⁽³⁾	236	18	54	73	100	247	728
Heroin	78	31	15	19	12	72	227
Other opiates ⁽⁴⁾	122	35	87	27	47	124	442
Benzodiazepines	661	41	303	32	45	172	1,254
Codeine & Paracetamol	43	-	77	8	30	-	177
Solvents	36	-	7	-	7	46	102
Mephedrone/Methedrone	142	26	45	87	115	40	455
Other Hypnotics ⁽⁵⁾	116	0	50	-	0	-	226
Other Stimulants ⁽⁶⁾	56	12	27	25	45	117	282
Other Drugs ⁽⁷⁾	68	5	20	7	36	99	235

Percentages

Cannabis	47	60	40	67	80	77	58
Ecstasy	13	11	6	22	29	13	14
Cocaine ⁽³⁾	19	14	13	30	31	39	24
Heroin	6	24	3	8	4	11	8
Other opiates ⁽⁴⁾	10	27	20	11	15	19	15
Benzodiazepines	53	32	70	13	14	27	42
Codeine & Paracetamol	3	-	18	3	9	-	6
Solvents	3	-	2	-	2	7	3
Mephedrone/Methedrone	11	20	10	36	36	6	15
Other Hypnotics ⁽⁵⁾	9	0	12	-	0	-	8
Other Stimulants ⁽⁶⁾	5	9	6	10	14	18	9
Other Drugs ⁽⁷⁾	5	4	5	3	11	15	8

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ A complete HSCT breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified. These cells have been marked '-'.
⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁶⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁷⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table 13. Problem alcohol use by HSCT: 2011/12

	numbers and percentages						
	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
Problem Alcohol Use ⁽¹⁾	405	30	216	157	176	154	1,138
No Problem Use	831	98	212	86	142	483	1,852
Total ⁽²⁾	1,236	128	428	243	318	637	2,990

Percentages

Problem Alcohol Use	33	23	50	65	55	24	38
No Problem Use	67	77	50	35	45	76	62
Total	100	100	100	100	100	100	100

⁽¹⁾ 596 (52%) of the 1,138 clients reported that alcohol was their main problem.

⁽²⁾ This table excludes 9 individuals for whom alcohol use was not known.

Table 14. Average units of alcohol consumed per week in the four weeks before treatment: 2011/12

	numbers and percentages	
	Number	%
None	232	23
1-99 units	461	46
100-249 units	203	20
250-549 units	87	9
550 & more units	23	2
Total ⁽³⁾	1,006	100

⁽³⁾ This table excludes 132 individuals who reported that they had problem alcohol use but did not record the average number of alcohol units consumed per week in the four weeks before treatment.

Table 15. Treatment history of clients who presented for treatment by main drug of misuse: 2011/12

numbers and percentages			
Main Problem Drug ^{(1) (2)}	Treated before	Not treated before	Total
Cannabis	288	939	1,227
Ecstasy	19	36	55
Cocaine ⁽³⁾	67	133	200
Heroin	96	78	174
Other opiates ⁽⁴⁾	74	145	219
Benzodiazepines	78	627	705
Codeine & Paracetamol	23	38	61
Solvents	-	-	23
Mephedrone/Methedrone	37	113	150
Other Hypnotics ⁽⁵⁾	8	94	102
Other Stimulants ⁽⁶⁾	-	-	39
Other Drugs ⁽⁷⁾	18	26	44
Total ⁽⁷⁾	719	2,280	2,999
<u>Percentages</u>			
Cannabis	23	77	100
Ecstasy	35	65	100
Cocaine ⁽³⁾	34	67	100
Heroin	55	45	100
Other opiates ⁽⁴⁾	34	66	100
Benzodiazepines	11	89	100
Codeine & Paracetamol	38	62	100
Solvents	-	-	100
Mephedrone/Methedrone	25	75	100
Other Hypnotics ⁽⁵⁾	8	92	100
Other Stimulants ⁽⁶⁾	-	-	100
Other Drugs ⁽⁷⁾	41	59	100
Total	24	76	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ A complete HSCT breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified. These cells have been marked '-'.
⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁶⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁷⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table 16. Age profile of clients at their current treatment, and at their first treatment: 2011/12

numbers and percentages

	Clients Age Group at Face Date			Total
	Under 18 years	18-25 years	26 years & over	
Age at first treatment ⁽¹⁾				
Under 18 years	29	44	18	91
18-25 years	0	115	125	240
26 years & over	0	0	295	295
Total	29	159	438	626

Percentages

Age at first treatment ⁽¹⁾				
Under 18 years	100	28	4	15
18-25 years	0	72	29	38
26 years & over	0	0	67	47
Total	100	100	100	100

⁽¹⁾ This table excludes 93 individuals who reported that they had been previously treated but whose age first treated was not known.

Table 17. Route of administration for main drug of misuse by clients who presented for treatment: 2011/12

numbers and percentages

Main Problem Drug ^{(1) (2)}	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	106	1,091	-	-	1,206
Ecstasy	0	-	0	-	-	55
Cocaine ⁽³⁾	0	5	19	172	0	196
Heroin	116	-	-	-	-	174
Other opiates ⁽⁴⁾	-	210	0	-	-	219
Benzodiazepines	0	705	0	0	0	705
Codeine & Paracetamol	0	61	0	0	0	61
Solvents	0	-	-	19	-	23
Mephedrone/Methedrone	0	34	13	101	0	148
Other Hypnotics ⁽⁵⁾	0	101	0	0	0	101
Other Stimulants ⁽⁶⁾	-	23	-	9	0	37
Other Drugs ⁽⁷⁾	-	38	0	-	-	43
Total ⁽⁸⁾	123	1,340	1,183	318	4	2,968
<u>Percentages</u>						
Cannabis	0	9	90	-	-	100
Ecstasy	0	-	0	-	-	100
Cocaine ⁽³⁾	0	3	10	88	0	100
Heroin	67	-	-	-	-	100
Other opiates ⁽⁴⁾	-	96	0	-	-	100
Benzodiazepines	0	100	0	0	0	100
Codeine & Paracetamol	0	100	0	0	0	100
Solvents	0	-	-	83	-	100
Mephedrone/Methedrone	0	23	9	68	0	100
Other Hypnotics ⁽⁵⁾	0	100	0	0	0	100
Other Stimulants ⁽⁶⁾	-	62	-	24	0	100
Other Drugs ⁽⁷⁾	-	88	0	-	-	100
Total ⁽⁸⁾	4	45	40	11	0	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they presented themselves to the Agency for treatment.

⁽²⁾ A complete breakdown of route of administration has not been presented for all main drugs as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other hypnotics' drug category includes various hypnotics/sedatives/tranquilizers such as Zopiclone etc.

⁽⁶⁾ The 'other stimulants' drug category includes various stimulant drugs, including amphetamines and other 'legal highs'.

⁽⁷⁾ The 'other drugs' category includes various drugs such as other hallucinogens. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

⁽⁸⁾ This table excludes 31 individuals whose route of administration for main drug was not known.

Table 18. Injecting history of clients who presented for treatment by HSCT: 2011/12

numbers and percentages

HSCT	Persons who had injected	Persons with known injecting history
Belfast	74	1,239
Northern	31	129
South Eastern	21	430
Southern	14	243
Western	28	318
Prison	50	598
Total	218	2,957

Percentages ⁽¹⁾

Belfast	6	100
Northern	24	100
South Eastern	5	100
Southern	6	100
Western	9	100
Prison	8	100
Total	7	100

⁽¹⁾ The percentage of clients who have ever injected has been based on those whose injecting history is known.

Table 19. Age first injected of clients who presented for treatment who had ever injected: 2011/12

<u>numbers and percentages</u>		
Age group	Number	%
Under 18 years	29	14
18-21 years	79	38
22-25 years	46	22
26-29 years	27	13
30-39 years	19	9
40 years & over	8	4
Total ⁽¹⁾	208	100

⁽¹⁾ This table excludes 10 individuals whose age first injected was not known.

Table 20. Gender of injectors ⁽²⁾ who presented for treatment by sharing history ⁽³⁾: 2011/12

<u>numbers and percentages</u>			
	Male	Female	Persons
Individuals who had shared equipment	53	13	66
Individuals with a known sharing history ⁽⁴⁾	173	37	210

Percentages ⁽⁵⁾

Individuals who had shared equipment	31	35	31
Individuals with a known sharing history	100	100	100

⁽²⁾ Individuals who reported that they had injected at some stage in their lives.

⁽³⁾ Injectors who answered Yes or No to "Ever Shared?"

⁽⁴⁾ This table excludes 8 individuals whose sharing history was not known.

⁽⁵⁾ The percentage of clients who have ever shared equipment has been based on those whose sharing history is known.

Table 21. Number of clients who have previously been tested for HIV, Hepatitis B and Hepatitis C: 2011/12

numbers and percentages

(a) HIV⁽¹⁾

	Number	%
Ever tested	163	6
Tested in last 12 months	63	2
Never tested	2,568	92
Test status unknown	205	-
Total	2,999	

⁽¹⁾ The percentage of clients who have ever been tested for HIV is based on those whose HIV test status is known.

(b) Hepatitis B⁽²⁾

	Number	%
Ever tested	164	6
Tested in last 12 months	61	2
Never tested	2,569	92
Test status unknown	205	-
Total	2,999	

⁽²⁾ The percentage of clients who have ever been tested for Hepatitis B is based on those whose Hepatitis B test status is known.

Table 21 (continued)

(c) Hepatitis C ⁽¹⁾

	Number	%
Ever tested	156	6
Tested in last 12 months	60	2
Never tested	2,578	92
Test status unknown	205	-
Total	2,999	

⁽¹⁾ The percentage of clients who have ever been tested for Hepatitis C is based on those whose Hepatitis C test status is known.

Table 22. Number of injections clients have completed for the Hepatitis B Vaccination Course by HSCT: 2011/12

numbers and percentages

Number of injections of the Hepatitis B vaccination course completed					
HSCT ^{(1) (2)}	Zero	One	Two	Three	Total
Belfast	1,194	-	-	23	1,228
Northern	107	-	-	17	129
South Eastern	412	0	-	-	430
Southern	237	0	-	-	242
Western	311	-	0	-	317
Prison	477	9	-	-	498
Total	2,738	18	12	76	2,844

Percentages

Belfast	97	-	-	2	100
Northern	83	-	-	13	100
South Eastern	96	0	-	-	100
Southern	98	0	-	-	100
Western	98	-	0	-	100
Prison	96	2	-	-	100
Total	96	1	0	3	100

⁽¹⁾ A complete breakdown by HSCT is not presented as some cells were masked to hide counts of less than five and some (with cell counts of more than five) to prevent the value in another cell from being calculated; this is to ensure individuals cannot be identified.

⁽²⁾ This table excludes 155 individuals whose Hepatitis B vaccination course status was not known.

Table 23. Living arrangements of clients who presented for treatment: 2011/12

<u>numbers and percentages</u>		
Living arrangements	Number	%
Alone	714	24
With spouse/ partner only	226	8
With spouse/ partner and children	276	9
With dependent children	122	4
With parents	634	21
With friends	65	2
Hostel	96	3
Homeless - Roofless	13	0
In Prison - YOC	653	22
Other Specify	200	7
Not known	0	0
Total ⁽¹⁾	2,999	100

⁽¹⁾ 171 (6%) of the 2,999 individuals reported living with other drug users.

Table 24. Employment status of clients who presented for treatment: 2011/12

<u>numbers and percentages</u>		
Employment Status	Number	%
In Employment	381	13
On Government training scheme	39	1
Student	157	5
Unemployed	1,365	46
Receiving Other Benefits	256	9
Retired/ Receiving Pension	119	4
Other	681	23
Total ^{(2) (3)}	2,998	100

⁽²⁾ 843 (28%) of the 2,999 individuals reported having worked in the 12 months before treatment commenced.

⁽³⁾ This table excludes 1 individual for whom employment status was not known.

Table 25. EU nationality of clients who presented for treatment: 2011/12

<u>numbers and percentages</u>		
Nationality	Number	%
EU National	2,925	98
Non – EU National	66	2
Total⁽¹⁾	2,991	100

⁽¹⁾ This table excludes 8 individuals whose nationality was not known.

Table 26. Legal status of clients who presented for treatment: 2011/12

<u>numbers and percentages</u>		
Legal Status ⁽²⁾	Number	%
Persons	2,999	-
None	1,705	57
Deferred Sentence	29	1
Community Supervision	228	8
Awaiting Sentence	72	2
Trial Pending	180	6
Arrest Referral	135	5
In Prison	653	22
Not Known	5	0
Other	35	1

⁽²⁾ Individuals can record more than one legal status, and so percentages may not total 100.

ANNEX C – COMPARISON TABLES 2010/11 TO 2011/12

TABLE	TITLE	PAGE
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Table C5	Number of clients who presented for treatment who had ever injected by HSCT: 2010/11 and 2011/12	56

Table C1. Age and gender of clients who presented for treatment: 2010/11 and 2011/12

Age groups	numbers and percentages					
	2010/11 ⁽¹⁾			2011/12 ⁽²⁾		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	181	38	219	181	36	217
18-21 years	401	79	480	433	68	501
22-25 years	295	74	369	388	63	451
26-29 years	268	69	337	338	47	385
30-39 years	404	137	541	530	146	676
40 years & over	326	320	646	382	387	769
Total	1,875	717	2,592	2,252	747	2,999
 <u>Percentages</u>						
Under 18 years	10	5	8	8	5	7
18-21 years	21	11	19	19	9	17
22-25 years	16	10	14	17	8	15
26-29 years	14	10	13	15	6	13
30-39 years	22	19	21	24	20	23
40 years & over	17	45	25	17	52	26
Total	100	100	100	100	100	100

⁽¹⁾ The 2010/11 figures exclude 1 individual whose date of birth was unknown.

Table C2. Age and gender of clients who presented for treatment by HSCT: 2010/11 and 2011/12

numbers and percentages

(a) Belfast HSCT

Age groups	2010/11 ⁽¹⁾			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	47	8	55	53	5	58
18-25 years	354	79	433	279	57	336
26 years & over	546	329	875	500	345	845
Total	947	416	1,363	832	407	1,239

Percentages

Under 18 years	5	2	4	6	1	5
18-25 years	37	19	32	34	14	27
26 years & over	58	79	64	60	85	68
Total	100	100	100	100	100	100

⁽²⁾ The 2010/11 figures exclude 1 individual whose date of birth was unknown.

Table C2. Age and gender (continued)

(b) Northern HSCT

Age groups ⁽¹⁾	2010/11			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	-	-	41	26	9	35
18-25 years	-	-	25	25	9	34
26 years & over	36	7	43	48	12	60
Total	94	15	109	99	30	129

Percentages

Under 18 years	-	-	38	26	30	27
18-25 years	-	-	23	25	30	26
26 years & over	38	47	39	48	40	47
Total	100	100	100	100	100	100

⁽¹⁾ A complete gender breakdown has not been presented for 2010/11 as it contained cell counts of less than five; this is to ensure individuals cannot be identified. These cells have been marked '-'.

Table C2. Age and gender (continued)

(c) South Eastern HSCT

Age groups	2010/11			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	12	5	17	27	5	32
18-25 years	61	23	84	62	24	86
26 years & over	131	110	241	161	151	312
Total	204	138	342	250	180	430

Percentages

Under 18 years	6	4	5	11	3	7
18-25 years	30	17	25	25	13	20
26 years & over	64	80	70	64	84	73
Total	100	100	100	100	100	100

Table C2. Age and gender (continued)

(d) Southern HSCT

Age groups	2010/11			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	43	8	51	39	7	46
18-25 years	47	19	66	55	8	63
26 years & over	87	26	113	115	19	134
Total	177	53	230	209	34	243

Percentages

Under 18 years	24	15	22	19	21	19
18-25 years	27	36	29	26	24	26
26 years & over	49	49	49	55	56	55
Total	100	100	100	100	100	100

Table C2. Age and gender (continued)

(e) Western HSCT

Age groups	2010/11			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	32	12	44	29	10	39
18-25 years	87	24	111	95	25	120
26 years & over	98	48	146	111	48	159
Total	217	84	301	235	83	318

Percentages

Under 18 years	15	14	15	12	12	12
18-25 years	40	29	37	40	30	38
26 years & over	45	57	49	47	58	50
Total	100	100	100	100	100	100

Table C2. Age and gender (continued)

(f) Prisons

Age groups	2010/11			2011/12		
	Males	Females	Persons	Males	Females	Persons
Under 18 years	11	0	11	7	0	7
18-25 years	125	5	130	305	8	313
26 years & over	100	6	106	315	5	320
Total	236	11	247	627	13	640

Percentages

Under 18 years	5	0	4	1	0	1
18-25 years	53	45	53	49	62	49
26 years & over	42	55	43	50	38	50
Total	100	100	100	100	100	100

Table C3. Main drug of misuse of clients who presented for treatment: 2010/11 and 2011/12

<u>numbers and percentages</u>		
Main Problem Drug ⁽¹⁾	2010/11	2011/12
Cannabis	1,048	1,227
Ecstasy	38	55
Cocaine ⁽²⁾	152	200
Heroin	193	174
Other opiates ⁽³⁾	163	219
Benzodiazepines	500	705
Codeine & Paracetamol	55	61
Other Drugs ⁽⁴⁾	444	358
Total	2,593	2,999
<u>Percentages</u>		
Cannabis	40	41
Ecstasy	1	2
Cocaine ⁽²⁾	6	7
Heroin	7	6
Other opiates ⁽³⁾	6	7
Benzodiazepines	19	24
Codeine & Paracetamol	2	2
Other Drugs ⁽⁴⁾	17	12
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽³⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁴⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified. These cells have been marked '-'.

Table C4. Main drug of misuse of clients who presented for treatment by HSCT: 2010/11 and 2011/12

numbers and percentages

(a) Belfast HSCT

Main Problem Drug ⁽¹⁾	2010/11	2011/12
Cannabis	524	442
Ecstasy	18	23
Cocaine ⁽²⁾	83	73
Heroin	60	57
Other opiates ⁽³⁾	64	60
Benzodiazepines	356	407
Codeine & Paracetamol	24	21
Other Drugs ⁽⁴⁾	235	156
Total	1,364	1,239

Percentages

Cannabis	38	36
Ecstasy	1	2
Cocaine ⁽²⁾	6	6
Heroin	4	5
Other opiates ⁽³⁾	5	5
Benzodiazepines	26	33
Codeine & Paracetamol	2	2
Other Drugs ⁽⁴⁾	17	13
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽³⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁴⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified. These cells have been marked '-'.

Table C4. Main drug of misuse (continued)

(b) Northern HSCT

Main Problem Drug ^{(1) (2)}	2010/11	2011/12
Cannabis	46	54
Ecstasy	0	-
Cocaine ⁽³⁾	-	-
Heroin	26	26
Other opiates ⁽⁴⁾	11	19
Benzodiazepines	-	11
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	21	-
Total	109	129

Percentages

Cannabis	42	42
Ecstasy	0	-
Cocaine ⁽³⁾	-	-
Heroin	24	20
Other opiates ⁽⁴⁾	10	15
Benzodiazepines	-	9
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	19	-
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ A breakdown of main problem drug in both 2010/11 and 2011/12 has not been presented for cells that have counts of less than five or if the cells were not presented in Table 11; this is to ensure individuals cannot be identified.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified. These cells have been marked '-'.

Table C4. Main drug of misuse (continued)

(c) South Eastern HSCT

Main Problem Drug ^{(1) (2)}	2010/11	2011/12
Cannabis	91	122
Ecstasy	-	-
Cocaine ⁽³⁾	20	16
Heroin	13	11
Other opiates ⁽⁴⁾	33	32
Benzodiazepines	109	191
Codeine & Paracetamol	13	11
Other Drugs ⁽⁵⁾	-	-
Total	342	430

Percentages

Cannabis	27	28
Ecstasy	-	-
Cocaine ⁽³⁾	6	4
Heroin	4	3
Other opiates ⁽⁴⁾	10	7
Benzodiazepines	32	44
Codeine & Paracetamol	4	3
Other Drugs ⁽⁵⁾	-	-
Total	100	100

(1) The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

(2) A breakdown of main problem drug in 2010/11 and 2011/12 has not been presented for cells that have counts of less than five or if the cells were not presented in Table 11; this is to ensure individuals cannot be identified. These cells have been marked '-'.

(3) The cocaine drug category includes both cocaine powder and crack cocaine.

(4) The 'other opiates' drug category includes methadone and buprenorphine.

(5) The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table C4. Main drug of misuse (continued)

(d) Southern HSCT

Main Problem Drug ^{(1) (2)}	2010/11	2011/12
Cannabis	108	135
Ecstasy	-	6
Cocaine ⁽³⁾	19	19
Heroin	34	15
Other opiates ⁽⁴⁾	9	15
Benzodiazepines	-	6
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	47	-
Total	230	243

Percentages

Cannabis	47	56
Ecstasy	-	2
Cocaine ⁽³⁾	8	8
Heroin	15	6
Other opiates ⁽⁴⁾	4	6
Benzodiazepines	-	2
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	20	-
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ A breakdown of main problem drug in 2010/11 and 2011/12 has not been presented for cells that have counts of less than five or if the cells were not presented in Table 11; this is to ensure individuals cannot be identified. These cells have been marked '-'.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table C4. Main drug of misuse (continued)

(e) Western HSCT

Main Problem Drug ^{(1) (2)}	2010/11	2011/12
Cannabis	166	204
Ecstasy	12	8
Cocaine ⁽³⁾	-	15
Heroin	8	8
Other opiates ⁽⁴⁾	22	21
Benzodiazepines	12	9
Codeine & Paracetamol	11	15
Other Drugs ⁽⁵⁾	-	38
Total	301	318

Percentages

Cannabis	55	64
Ecstasy	4	3
Cocaine ⁽³⁾	-	5
Heroin	3	3
Other opiates ⁽⁴⁾	7	7
Benzodiazepines	4	3
Codeine & Paracetamol	4	5
Other Drugs ⁽⁵⁾	-	12
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ A breakdown of main problem drug in 2010/11 has not been presented for cells that have counts of less than five or if the cells were not presented in Table 11; this is to ensure individuals cannot be identified. These cells have been marked '-'.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table C4. Main drug of misuse (continued)

(f) Prisons

Main Problem Drug ^{(1) (2)}	2010/11	2011/12
Cannabis	113	270
Ecstasy	-	-
Cocaine ⁽³⁾	18	-
Heroin	52	57
Other opiates ⁽⁴⁾	24	72
Benzodiazepines	15	81
Codeine & Paracetamol	0	8
Other Drugs ⁽⁵⁾	-	64
Total	247	640

Percentages

Cannabis	46	42
Ecstasy	-	-
Cocaine ⁽³⁾	7	-
Heroin	21	9
Other opiates ⁽⁴⁾	10	11
Benzodiazepines	6	13
Codeine & Paracetamol	0	1
Other Drugs ⁽⁵⁾	-	10
Total	100	100

⁽¹⁾ The main drug of misuse is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment.

⁽²⁾ A breakdown of main problem drug in 2010/11 and 2011/12 has not been presented for cells that have counts of less than five or if the cells were not presented in Table 11; this is to ensure individuals cannot be identified. These cells have been marked '-'.

⁽³⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽⁴⁾ The 'other opiates' drug category includes methadone and buprenorphine.

⁽⁵⁾ The 'other drugs' category includes various drugs such as amphetamines, solvents, mephedrone, other hallucinogens, other stimulants etc. Use of these individual drugs is not reported due to small cell counts; this is to ensure individuals cannot be identified.

Table C5. Number of clients who presented for treatment who had ever injected by HSCT: 2010/11 and 2011/12

numbers and percentages

HSCT	2010/11		2011/12	
	Persons who had injected	Persons with known injecting history	Persons who had injected	Persons with known injecting history
Belfast	69	1,361	74	1,239
Northern	30	109	31	129
South Eastern	21	342	21	430
Southern	31	230	14	243
Western	10	301	28	318
Prison	44	166	50	598
Total ^{(1) (2)}	205	2,509	218	2,957
<u>Percentages</u> ⁽³⁾				
Belfast	5	100	6	100
Northern	28	100	24	100
South Eastern	6	100	5	100
Southern	13	100	6	100
Western	3	100	9	100
Prison	27	100	8	100
Total	8	100	7	100

⁽¹⁾ In 2010/11 there were 84 individuals whose injecting history was not known.

⁽²⁾ In 2011/12 there were 42 individuals whose injecting history was not known

⁽³⁾ The percentage of clients who had ever injected has been based on those whose injecting history was known.

ANNEX D- DMD FORM

NORTHERN IRELAND DRUG MISUSE DATABASE <i>Please read the Guidance Notes before completing this form.</i>		DMD4 Enquiries: 028 90 522520																																																					
CLIENT DATA																																																							
First name <input type="text"/> Last name <input type="text"/>	ADDRESS <input type="text"/>																																																						
Initials <input type="text"/> <input type="text"/> <input type="text"/> Date of birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Post code (if NI) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DATE OF: Referral <input type="text"/> / <input type="text"/> / <input type="text"/> Gender Male <input type="checkbox"/> Female <input type="checkbox"/> Age completed full-time education <input type="text"/> <input type="text"/>	Elsewhere (specify) _____ Agency Code <input type="text"/> <input type="text"/> <input type="text"/> Name of Agency Reporter <input type="text"/>																																																					
REFERRAL DETAILS																																																							
REASON FOR ATTENDANCE (tick one only) Wholly own choice? <input type="checkbox"/> Persuaded by others? <input type="checkbox"/> Required by others? <input type="checkbox"/> Tick all that apply below: Financial <input type="checkbox"/> Legal <input type="checkbox"/> Job <input type="checkbox"/> Family/relationship <input type="checkbox"/> Medical e.g. detoxification <input type="checkbox"/> Psychological <input type="checkbox"/> Housing <input type="checkbox"/> Pregnancy <input type="checkbox"/> Other (specify) _____	REFERRAL BY (tick one only) Self <input type="checkbox"/> Family / friend <input type="checkbox"/> GP <input type="checkbox"/> Hospital <input type="checkbox"/> Social Services <input type="checkbox"/> Non-statutory agency <input type="checkbox"/> Legal Requirement <input type="checkbox"/> Psychiatrist / mental health services <input type="checkbox"/> Community Addiction Team <input type="checkbox"/> Education <input type="checkbox"/> Drug Arrest Referral Scheme <input type="checkbox"/> Probation <input type="checkbox"/> Prison / YOC <input type="checkbox"/> Other (specify) _____	PROPOSED ACTION (tick all that apply) Was the referral made using the Regional Initial Assessment Tool (RIAT)? Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/> Assessment <input type="checkbox"/> Detoxification <input type="checkbox"/> Substitute Prescribing <input type="checkbox"/> Prescribing Contract <input type="checkbox"/> Counselling <input type="checkbox"/> Family support <input type="checkbox"/> Residential Rehabilitation <input type="checkbox"/> Throughcare <input type="checkbox"/> Mentoring <input type="checkbox"/> Education / Information <input type="checkbox"/> No intervention <input type="checkbox"/> Advise screening for HIV / HEP B / HEP C <input type="checkbox"/> Other (specify) _____																																																					
DRUG USE PROFILE																																																							
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DRUG TREATMENT HISTORY Ever treated before? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes: age first treated? <input type="text"/> <input type="text"/> Previous Treatment: Detoxification <input type="checkbox"/> Substitute Prescribing <input type="checkbox"/> Prescribing Contract <input type="checkbox"/> Residential Rehabilitation <input type="checkbox"/> Counselling <input type="checkbox"/> Other (specify) _____	INJECTING/SHARING HISTORY Ever injected? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes: Age first injected? <input type="text"/> <input type="text"/> Ever shared? Yes <input type="checkbox"/> No <input type="checkbox"/> Injected in the last 4 weeks? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes: In the last 4 Weeks has the client... Used Needle & Syringe Exchange? Yes <input type="checkbox"/> No <input type="checkbox"/> Always used new equipment? Yes <input type="checkbox"/> No <input type="checkbox"/> Filtered? Yes <input type="checkbox"/> No <input type="checkbox"/> Bleached? Yes <input type="checkbox"/> No <input type="checkbox"/> Rotated sites? Yes <input type="checkbox"/> No <input type="checkbox"/> Shared equipment? Yes <input type="checkbox"/> No <input type="checkbox"/>	TESTING FOR HIV / HEPATITIS Please indicate the if the client has been tested for the following: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Ever Tested</th> <th>Tested in last 12 months</th> <th>Never tested</th> </tr> </thead> <tbody> <tr><td>(a) HIV</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>(b) Hepatitis B</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>(c) Hepatitis C</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table> How many injections has the client completed of the Hepatitis B vaccination course? (Please tick) <table style="width:100%; text-align: center;"> <tr> <td>0</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Ever Tested	Tested in last 12 months	Never tested	(a) HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b) Hepatitis B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(c) Hepatitis C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0	1	2	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																													
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Are any of the people you live with drug users? Yes <input type="checkbox"/> No <input type="checkbox"/> LEGAL STATUS (tick all that apply) None <input type="checkbox"/> Deferred sentence <input type="checkbox"/> Community supervision <input type="checkbox"/> Awaiting sentence <input type="checkbox"/> Trial pending <input type="checkbox"/> Arrest referral <input type="checkbox"/> In Prison / YOC <input type="checkbox"/> Other (specify) _____	ETHNIC ORIGIN White <input type="checkbox"/> Chinese <input type="checkbox"/> Irish Traveller <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Black Caribbean <input type="checkbox"/> Black African <input type="checkbox"/> Black Other <input type="checkbox"/> Mixed ethnic group (specify) _____ Any Other ethnic group (specify) _____	Has Client worked in the last 12 months? Yes <input type="checkbox"/> No <input type="checkbox"/> Are you an EU National? Yes <input type="checkbox"/> No <input type="checkbox"/> COMMUNITY BACKGROUND Catholic <input type="checkbox"/> Protestant <input type="checkbox"/> None <input type="checkbox"/> Other (specify) _____ Do not wish to reply <input type="checkbox"/>																																																					
Send this copy to: PUBLIC HEALTH INFORMATION & RESEARCH BRANCH, ANNEX 2, CASTLE BUILDINGS, BELFAST BT4 3SQ (PHONE: 028 90 522 520)																																																							

Recent and Future Publications from the Public Health Information and Research Branch (PHIRB)

Statistical Bulletins

Number	Title	Publication Date
1/2012	Statistics from the Northern Ireland Drug Addicts Index 2011	March 2012
2/2012	Statistics on Smoking Cessation Services in Northern Ireland 2011/12	October 2012

Survey Bulletins

Title	Publication Date
Adult Drinking Patterns in Northern Ireland 2011	January 2012
Drug use in Ireland and Northern Ireland: 2010/11 Regional Drug Task Force (Ireland) and Health & Social Care Trust (Northern Ireland) Results (published jointly with the National Advisory Committee on Drugs, Ireland)	June 2012
Drug Use in Ireland and Northern Ireland: 2010/11 Drug Prevalence Survey: Sedatives or Tranquillisers, and Anti-depressants Results (published jointly with the National Advisory Committee on Drugs, Ireland)	October 2012
Health Survey Northern Ireland: First Results from 2011/12 survey	November 2012

Copies of these publications can be obtained online at:

http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health.htm