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Statistics from the Northern Ireland Drug Misuse Database: 1 April 2009 – 31 March 2010

This bulletin summarises information on people presenting to services with problem drug misuse and relates to the 12-month period ending 31 March 2010. It is the ninth bulletin reporting on information collected through the Northern Ireland Drug Misuse Database (DMD), which was established in April 2000 and which collects detailed data, including information on drugs misused and injecting behaviour, on those presenting for treatment.

Summary

In Northern Ireland during 2009/10:

- 2,008 individuals presented for treatment and gave their consent for their details to be included in the DMD. This is compared to 1,755 the year before, an increase of 253 individuals (14%).
- The majority (72%) of individuals who presented were male; and just over one quarter (26%) were aged 21 years and under.
- Cannabis was the most commonly reported main drug of misuse; it was reported by 42% of individuals in 2009/10 compared to 39% in 2008/09.
- Benzodiazepines were the second most commonly reported main drug of misuse; they were reported by 23% of individuals in 2009/10 compared to 22% in 2008/09.
- Cocaine (including crack cocaine) was the third most commonly reported main drug of misuse; it was reported by 9% of individuals in 2009/10 compared to 11% in 2008/09.
- Heroin was reported as the main drug of misuse by 6% of individuals in 2009/10 compared to 8% in 2008/09. Over half (57%) of those who presented for treatment in 2009/10 and reported heroin as their main problem drug had been treated before.
- The proportion of individuals who had ever injected was 7% in 2009/10, compared to 10% in 2008/09.

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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 and Wales. regionally Scotland. 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) established and data collection commenced from April 2000. The database is maintained by **Public** Health the 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.
- 1.4 This is the ninth bulletin to be published using data from the DMD and covers the period 1 April 2009–31 March 2010. By the end of 2009/10, 33 treatment services were contributing to the database of which 13 were non-statutory, 18 were statutory and 2 services were based within prisons. It is important to note that although 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. 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 selected personal details include information regarding the drugs misused and the type of agency attended: these data are passed on in anonymised form to PHIRB for inclusion in the DMD. As client participation in the DMD is voluntary, 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.

Other Information Available

1.7 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/public_health/statistics_and_research-drugs_alcohol-2.htm

Participation in the DMD

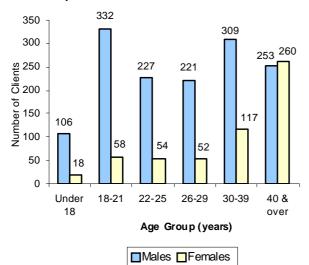
1.8 Client participation in the DMD is optional and depends on client consent. Information was received from 2,102 clients who presented for treatment, and client consent was withheld in 94 (4%) cases

(Table 1). All figures in this report are based on the 2,008 clients who gave their consent to be included in the DMD.

2. Profile of service users Age and Gender of Clients

- **2.1** Over seven tenths (72%) 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: NTA 'Statistics from the National Drug Treatment Monitoring System in England, 2008/09').
- 2.2 The average (mean) age of clients who presented for treatment was 32 years. Less than one tenth (6%) of clients were aged under 18 years, 19% were aged 18-21 years, just over one fifth (21%) were aged 30-39 years and 26% were aged 40 years and over (Table 3).
- 2.3 The age profile for female clients was older than that for male clients: Just under one half (47%) of female clients compared to 17% of male clients were aged 40 years and over, while just under one quarter (23%) of male clients were aged 18–21 years, compared to 10% of female clients (Table 4; Figure 1).

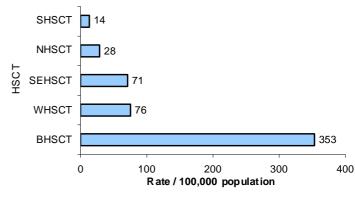
Figure 1. Age and gender of clients that presented for treatment: 2009/10



Geography

- Approximately three fifths (59%) of clients presented for treatment in the Belfast Health and Social Care Trust (HSCT), 12% in the South Eastern HSCT, 11% in the Western HSCT, 6% in the Northern HSCT and 2% in the Southern 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 people whose area of residence could be determined excluding those who were being treated in prison, 90% 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 (353 per 100,000 populations) than in the Western, South Eastern, Northern and Southern HSCTs (76, 71, 28 and 14 per 100,000 population, respectively) (Figure 2).

Figure 2. Rates per 100,000 population presenting for treatment in HSCT: 2009/10



Type of Treatment Service Agency

2.6 Over seven tenths of clients (72%) presented for treatment at statutory agencies. The majority of clients in each of

the five HSCTs presented for treatment at statutory agencies, varying from 100% in the Southern HSCT to 62% in the Northern HSCT (Table 5).

3. Referral Details Reason for attendance

- **3.1** Almost one half of clients (45%) reported that the decision to attend was wholly their own choice, approximately one third (34%) were required by others, and 21% were persuaded by others (Table 6).
- 3.2 The three most commonly reported reasons for attending a treatment agency psychological (46%),family/ relationships (38%)and medical e.g. detoxification (29%).Other reasons included legal (27%), financial (11%) and job (7%) (Table 6).

Referral Source

3.3 Just over one half (51%) of clients who presented for treatment were referred by General Practitioners, followed by self-referrals (12%). Other referral sources included Prison/YOC (8%), probation services (7%), psychiatrist/ mental health service (5%), and family and friends (2%) (Table 7).

Proposed Action

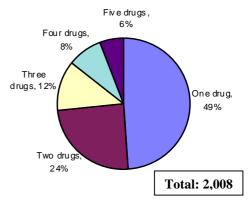
3.4 The agency reporter must record all actions which they propose to take/initiate, or have taken, in respect of the client. The proposed action for four fifths (80%) of clients was assessment. For over one half of clients, the proposed action was counselling (54%), and education/ information (51%). Detoxification was a proposed action for 16% of clients (Table 8).

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 have reported misusing. Approximately one half (49%) of clients reported misusing only one drug, while just under one quarter (24%) reported misusing two drugs.

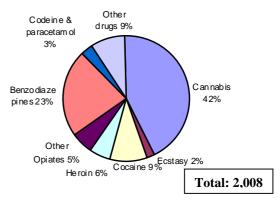
Figure 3. Number of drugs misused per client: 200 9/10



Main Drug of Misuse

4.2 The most frequently reported main drug of misuse was cannabis, accounting for just over two fifths (42%) of clients who presented for treatment, followed by benzodiazepines (23%) and cocaine (including crack cocaine) (9%). Heroin was the main problem drug for 6% of clients (Table 9; Figure 4).

Figure 4. Main drugs of misuse: 2009/10



4.3 There was considerable variation between male clients and female clients in the main drug of misuse reported (Table 9). Just over one half (52%) of male clients reported that cannabis was their main problem drug, compared to approximately one fifth (19%) of female clients. In

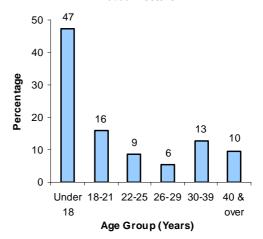
addition, a larger proportion of male clients (11%) than female clients (5%) reported cocaine (including crack cocaine) as their main problem drug. In contrast, a larger proportion of female clients (41%) than male clients (16%) reported benzodiazepines as being their main problem drug.

4.4 There was also variation between the client's age group and the main drug of misuse reported (Table 10). 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 those aged 26 years and over benzodiazepines were the most commonly reported main problem drug. For those aged under 18, approximately three quarters (76%) reported cannabis and 13% reported other drugs as being their main problem drugs. For clients aged 18-25 approximately three fifths (59%) reported cannabis; 11% reported cocaine (including crack cocaine); 8% reported other drugs; 5% reported heroin; and 2% reported codeine and paracetamol, as being their main problem drugs. For those aged 26 years and over, one third (33%) reported benzodiazepines as being their main problem drug. Following this, the most commonly reported main problem drug for those aged 26 years and over was cannabis (30%), cocaine (including crack cocaine) (9%), other drugs (10%), heroin (7%) and other opiates (7%).

4.5 The average (mean) age clients first used their main problem drug was 22 years. Almost 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 reported first using their main drug aged between 22 and 29 years, and just over one quarter (22%) reported first using it aged 30 years and over (Figure 5). Consideration of these figures needs to take account of the fact that over one half (53%) of clients who

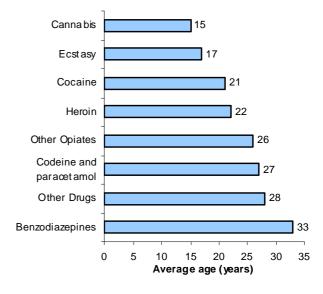
presented for treatment were aged under 30 years when they presented.

Figure 5. Age of first use: main drug of misuse: 2009/10



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 cannabis (15 years) and ecstasy (17 years). The highest average (mean) age of first use was for benzodiazepines (33 years) (Figure 6).

Figure 6. Average (me an) age of first use for main drugs: 2009/10



Geography

4.7 Cannabis was the most frequently reported main problem drug by clients in all of the five HSCTs. In the Western HSCT 64% reported their main problem drug as being cannabis, as did 58% in the Southern

HSCT. Just over one half of clients in the Northern HSCT (52%) reported cannabis as being their main problem drug, followed by 36% in the South Eastern HSCT and 34% in the Belfast HSCT. The Northern HSCT had the largest proportion of clients (21%) reporting heroin as their main drug. The Southern HSCT had the largest proportion of clients (13%) reporting cocaine (including crack cocaine) as their main problem drug, followed by the Belfast HSCT (9%) (Table 11).

All drugs of misuse

4.8 Clients presenting for treatment may be misusing more than one drug. The DMD can record up to a total of five drugs of misuse, one main problem drug and four subsidiary drugs. Almost four fifths (852 of 1,088 clients; 78%) 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, approximately seven tenths (115 of 163 clients; 71%) of them reported it as their main drug of misuse. Just over half (458 of 833 clients; 55%) of those who reported benzodiazepines as a problem drug reported it as their main problem drug, while 51% (61 of 120 clients) of those reporting codeine and paracetamol as a problem drug reported it as their main problem drug. In contrast, a smaller proportion of clients (42 of 371 clients; 11%) 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 just over half (54%) of clients reporting it as a problem drug. Benzodiazepines was the second most commonly reported drug of misuse (41%), although it should be noted that the majority of clients presenting to treatment for these drugs were in the Belfast and South Eastern HSCTs (52% and 51% respectively). The third most commonly reported problem drug

was cocaine (including crack cocaine) (28%) followed by ecstasy (18%).

All drugs of misuse by Trust

There were some variations across the HSCTs and the reported drugs of misuse. Over half of clients in the Belfast HSCT (52%) and in the South Eastern HSCT (51%) reported benzodiazepines as being a problem drug, compared to 15% of clients in the Western HSCT. Cannabis was the most commonly reported drug by clients in the Western (74%), Southern (71%) and Northern (67%) HSCTs. In the South Eastern HSCT (48%) and the Belfast HSCT (46%) cannabis was the second most commonly reported drug of misuse. Cocaine (including crack cocaine) was the second most commonly reported drug in the Western HSCT (37%), Southern HSCT (27%) and Northern (25%) HSCT. In the Belfast HSCT (26%) and South Eastern HSCT (25%) cocaine was the third most commonly reported drug of misuse. (Table 12).

Reported use of alcohol

On the DMD alcohol cannot be recorded as the main problem drug or as one of the four subsidiary drugs. 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. Of the 2,008 clients who presented for treatment, 34% also reported problem alcohol use (Table 13). The largest proportions of clients who reported problem alcohol use were in the Western (55%), Southern (44%) and Belfast (35%) HSCTs. Almost three fifths (58%) of those that presented to treatment for both drug and alcohol misuse reported alcohol to be their main problem. 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 quarter (25%) reported that

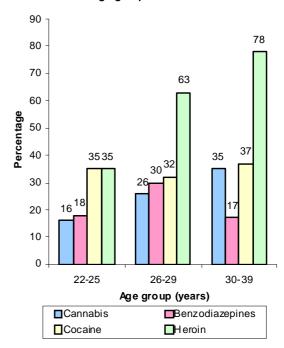
they consumed between 100 and 249 units (Table 14).

5. Treatment History

- **5.1** Just over one fifth (22%) of clients who presented to treatment in 2009/10 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: 57% of clients who reported heroin, 44% of clients who reported codeine and paracetamol, and 38% of clients who reported other opiates as their main problem drug had been treated before. Smaller proportions of clients who reported cannabis (19%) and benzodiazepines (12%) as their main problem drug had been treated before.
- 5.3 There were some variations 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 across the three age groups, from 18% of those aged 22-25 years, increasing to 30% of those aged 26-39 years, and decreasing to 17% of those aged 30-39 years. For those who reported cannabis as their main problem drug, the proportion of clients who had been treated before increased from 16% of those aged 22-25, to 26% of those aged 26-29 years and 35% of those aged 30-39 years. For those who reported cocaine (including crack cocaine) as their main problem drug, the proportion of clients who had been treated before decreased from 35% of those aged 22-25 years to 32% of those aged 26-39 years, increasing to 37% for those aged 30-39 years. For two of the three age groups a larger proportion of clients who reported heroin as their main problem drug had been treated before compared to the other three main problem drugs. Over three quarters (78%) of clients aged 30-39 years who

reported heroin as their main problem drug had been treated before compared to less than two thirds of those aged 26-29 years (63%). Of those clients aged 22-25 years, 35% reported having been treated before.

Figure 7. Percentage of clients previously treated for selected drugs and age groups: 2009/10



5.4 Of the clients who had previously been treated and whose age at first treatment was known (425 clients), one half (50%) were first treated aged 26 years and over, over two fifths (44%) were first treated aged 18-25 years and less than one tenth (6%) 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** A small proportion of clients reported that injecting was their most

frequent route of administering their main problem drug. Other main routes of administration were: swallowing or chewing (oral) (45%), smoking/inhalation (41%), and sniffing (11%) (Table 17).

- **6.3** Fifty four clients who reported that injecting was their most frequent route of administering their main problem drug, reported heroin as their main drug of misuse.
- **6.4** The injecting history was known for 2,004 of the 2,008 clients who presented for treatment. Seven per cent (146 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: over one fifth (22%) in the Northern HSCT, compared to 7% in both the Belfast HSCT and South Eastern HSCT.
- 6.5 The age clients first injected was available for 142 of the 146 clients who had injected (injectors) (Table 19). The greatest proportion of modal age group for age first injected was 18-21 years, with 37% of injectors falling into the age group when they first injected. A further 24% of injectors first injected aged 22-25 years. Over one tenth (14%) of injectors were aged 30-39 years when they first injected, while 12% of injectors were under 18 years when they first injected.

Sharing Equipment

6.6 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.

6.7 Information about the sharing of drug paraphernalia is known for 145 clients who had injected (Table 20) and approximately one third (34%) reported sharing equipment. A larger proportion of male injectors (37%) than female injectors (27%) reported that they had shared equipment.

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 90% of clients who presented for treatment had never been tested for HIV, 6% had ever been tested and 3% had been tested in the last 12 months.
- **7.3** Table 21(b) shows that 91% of clients who presented for treatment had never been tested for Hepatitis B, 6% had ever been tested and 3% had been tested in the last 12 months.
- **7.4** Table 21(c) shows that 91% of clients who presented for treatment had never been tested for Hepatitis C, 6% had ever been tested and 3% had been tested in the last 12 months.
- 7.5 More than nine tenths of clients (97%) had not had any injections of the Hepatitis B vaccination course, 2% 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 (86%). The Western HSCT (99%) had the largest proportion of clients who had not had any injections of the Hepatitis B vaccination, followed by the Southern and South Eastern HSCTs (98%), and the Belfast HSCT (97%) (Table 22).

7.6 These data from the DMD have been supplemented from June 2002 onwards with the introduction of an anonymised testing study of injecting drug users in contributing agencies in Northern Ireland. This study is being carried out in conjunction with the Public Health Laboratory Service. This study should provide robust data on levels of infection in the injecting drug-using population. The results are published in the 'Shooting Up' report by the Health Protection Agency, the next report for Northern Ireland is due for publication in October 2010.

8. Other Information

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

Living Arrangements

8.2 An equal proportion of clients who presented for treatment reported living with their parents or living alone (each 26%). Twelve per cent lived with a spouse/partner and children, and 9% lived with spouse/partner only. Six per cent of clients were living with dependent children. One hundred and fifty eight clients (8%) 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 one fifth of clients (20%) reported having worked in the 12 months before treatment commenced. Over one half (57%) of clients were unemployed and thirteen per cent were receiving other benefits. Five per cent of clients were students (Table 24).

EU Nationality

8.4 The vast majority (97%) 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. Just over one third (35%) of clients who presented for treatment had contact with the criminal justice system at the time they presented for treatment (Table 26). The largest proportions of clients who were in contact with the criminal justice system were under community supervision (9%), in prison (9%) or on an arrest referral scheme (7%). A further 6% had a trial pending while 3% were awaiting sentence.

9 Health and Social Care Trust Data 2009/10

9.1 Some of the main tables in Annex B contain a breakdown by HSCTs and Prisons. Additional analyses by HSCT and Prisons are given in Annex C.

Gender of clients

- 9.2 Table HT1 provides details of client's main problem drug and gender by HSCT. In the Belfast HSCT the most frequently reported main drug of misuse for male clients was cannabis (44%) followed by benzodiazepines (22%). In contrast, approximately one half (49%) of female clients reported benzodiazepines and 14% reported cannabis as their main problem drug (Table HT1(a)).
- 9.3 In the Northern HSCT just over one half (55%) of male clients reported cannabis and one fifth (20%) reported heroin as their main problem drug. Just under two fifths (37%) of female clients reported cannabis, and approximately one quarter (26%) reported heroin as their main problem drug (Table HT1(b)).
- 9.4 In the South Eastern HSCT just over two fifths (44%) of females and one fifth (20%) of males reported benzodiazepines as their main problem drug. Just over two fifths (44%) of males and approximately one quarter of females (24%) reported cannabis as their main problem drug (Table HT1(c)).

- **9.5** In the Southern HSCT, for both males and females, there were no cases of ecstasy or benzodiazepines being reported as a main problem drug. (Table HT1(d)).
- **9.6** In the Western HSCT the most frequently reported main problem drug was cannabis for both male (70%) and female clients (40%) (Table HT1(e)).

Age of Clients

- 9.7 Table HT2 provides details of client's main problem drug and age group by HSCT. In the Belfast HSCT just under seven tenths (69%) of those aged under 18 years and just over one half (53%) of those aged 18-25 years reported cannabis as their main problem drug. Of those in the oldest age category (26 years and over) just under two fifths (38%) reported benzodiazepines as their main problem drug (Table HT2 (a)).
- 9.8 In the Northern HSCT four fifths (80%) of clients under 18 years of age and over two fifths (44%) of those aged 18-25 years reported cannabis as their main problem drug. Almost two fifths (38%) those aged 26 years and over and just over one quarter (26%) of those aged 18-25 years reported heroin as their main problem drug (Table HT2 (b)).
- 9.9 In the South Eastern HSCT two fifths (40%) of clients aged 26 years and over reported benzodiazepines as their main problem drug, while over one half (54%) of clients aged 18-25 years reported cannabis as their main problem drug (Table HT2 (c)).
- **9.10** In the Southern HSCT, for both those aged under 18-25 years and those aged 26 years and over, 58% of clients reported cannabis as their main problem drug (Table HT2 (d)).
- **9.11** In the Western HSCT, 67% of clients aged under 18 years, 77% of those aged 18-25 years and 56% of those aged 26

years and over reported cannabis as their main problem drug (Table HT2 (e)).

Route of Administration

- **9.12** Table HT3 shows the most frequent route of administration of the main drug of misuse within each HSCT.
- 9.13 The most frequently reported route of administration for cannabis was smoking, ranging from 91% in the Belfast HSCT to 88% in the Northern HSCT. In the Northern HSCT, 56% of those who reported heroin as the main problem drug injected it. In each of the HSCTs all of the clients who reported taking benzodiazepines, took them orally (Table HT3 (a-e)).

Treatment History

9.14 Table HT4 shows that the majority of clients who presented for treatment in all HSCTs had not previously been treated. The Western (30%) and South Eastern (27%) HSCTs had the largest proportion of clients who had previously been treated, compared to 25% in the Northern HSCT, 22% in the Belfast HSCT and 19% in the Southern HSCT (Table HT4 (a-e)).

10. Comparisons: 2008/09 to 2009/10

10.1 In 2009/10, 2,008 clients presented for treatment compared to 1,755 clients in 2008/09, an increase of 253 clients or 14% (Table C1).

Age of Clients

10.2 The age profile of clients who presented for treatment in 2009/10 was similar to that in 2008/09. The proportion of clients aged 21 years and under was 21% in 2008/09 compared to 26% in 2009/10. The proportion of clients aged 22-29 years was 29% in 2008/09 compared to 28% in 2009/10, while the proportion of clients aged 30 years and over was 50% in 2008/09 compared to 47% in 2009/10 (Table C1).

- 10.3 In the Belfast HSCT the proportion of clients aged under 18 years was 5% in 2008/09 compared to 2% in 2009/10. The proportion of clients aged 18-25 years was 28% in 2009/10, similar to that in 2008/09 (29%). The proportion of clients aged 26 years and over was 65% in 2008/09 compared to 70% in 2009/10 (Table C2(a)).
- **10.4** In the Northern HSCT the proportion of clients aged under 18 years increased from 21% in 2008/09 to 38% in 2009/10. The proportion of clients aged 18-25 years was 30% in 2008/09 compared to 21% in 2009/10, while the proportion of clients aged 26 years and over was 50% in 2008/09 compared to 41% in 2009/10 (Table C2(b)).
- **10.5** In the South Eastern HSCT the proportion of clients aged under 18 years was 3% in 2009/10, while in 2008/09 there were no individuals in treatment aged under 18 years. The proportion of clients aged 18-25 years was 18% in 2008/09 compared to 30% in 2009/10 and the proportion of clients aged 26 years and older was 82% in 2008/09 compared to 67% in 2009/10 (Table C2(c)).
- 10.6 In the Southern HSCT, there were no individuals in treatment aged under 18 years in both 2008/09 and 2009/10. Meanwhile, the proportion of clients aged 18-25 years was 27% in 2008/09 compared to 50% in 2009/10 and the proportion of clients aged over 26 years was 73% in 2008/09 compared to 50% in 2009/10 (Table C2(d)).
- 10.7 In the Western HSCT the proportion of clients aged under 18 years was 11% in 2008/09 compared to 5% in 2009/10. The proportion of clients aged 18-25 years was 28% in 2008/09 compared to 36% in 2009/10, whereas the proportion of clients aged 26 years and over remained similar in 2008/09 (62%) and 2009/10 (59%) (Table C2(e)).

Main Problem Drug

- In both 2008/09 and 2009/10 cannabis was the most commonly reported main drug of misuse; the proportion of clients reporting it as their main problem drug increased from 39% in 2008/09 to 42% in 2009/10. Similarly, benzodiazepines was the second most commonly reported main drug of misuse in both 2008/09 and 2009/10; the proportion of clients reporting it as their main problem drug remained similar in 2008/09 (22%) and 2009/10 (23%). The proportion of clients who reported cocaine (including crack cocaine) as their main problem drug decreased slightly from 11% in 2008/09 to 9% in 2009/10, while the proportion of clients reporting heroin as their main problem drug also fell from 8% in 2008/09 to 6% in 2009/10 (Table C3).
- 10.9 In the Belfast HSCT, the proportion of clients who presented for treatment with cannabis as their main problem drug was 34% in both 2008/09 and 2009/10. The proportion of clients who reported benzodiazepines as their main drug of misuse remained similar in 2008/09 (29%) and 2009/10 (30%) (Table C4(a)).
- **10.10** In the Northern HSCT, the proportion of clients who reported cannabis as their main problem drug was 37% in 2008/09 compared to 52% in 2009/10, while the proportion of clients who reported heroin as their main drug of misuse was 25% in 2008/09 compared to 21% in 2009/10 (Table C4(b)).
- **10.11** In the South Eastern HSCT, the proportion of clients who reported benzodiazepines as their main problem drug was 45% in 2008/09 compared to 29% in 2009/10, while the proportion of clients who reported cannabis as their main drug of misuse was 18% in 2008/09 compared to 36% in 2009/10 (Table C4(c)).

- **10.12** In the Southern HSCT, the proportion of clients who reported cannabis as their main problem drug was 49% in 2008/09 compared to 58% in 2009/10, while the proportion of clients who reported cocaine (including crack cocaine) as their main drug of misuse was 10% in 2008/09 compared to 13% in 2009/10 (Table C4(d)).
- **10.13** In the Western HSCT, the proportion of clients who reported cannabis as their main problem drug remained similar in 2008/09 (62%) and 2009/10 (64%). The proportion of clients who reported cocaine (including crack cocaine) was 9% in 2008/09 compared to 6% in 2009/10 (Table C4(e)).

Injecting Behaviour

10.14 The proportion of clients who reported they had injected was 10% in 2008/09, compared to 7% in 2009/10. The largest proportion of clients who had injected continued to be found in the Northern HSCT where the proportion decreased from 34% in 2008/09 to 22% in 2009/10. The proportion of clients who had injected in the Belfast HSCT was similar in 2008/09 (6%) and 2009/10 (7%). In the South Eastern HSCT the proportion of clients who had injected was also similar in 2008/09 (8%) and 2009/10 (7%). (Table C5).

11. Acknowledgements

11.1 PHIRB would like to thank all the people 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; the Drug and Alcohol Coordinators; and the Health Development Policy Branch within DHSSPS for their support and assistance.

12. Editorial Notes

- **12.1** 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.
- **12.2** This report is based on information received for 2009/10 up to and including 26 August 2010.
- **12.3** Percentages do not always add to 100 due to rounding.
- **12.4** Clients age is their age on their first face to face contact with treatment agency.
- 12.5 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.
- **12.6** Any comments or questions concerning the data contained in this publication, or requests for further information, should be addressed to:

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

http://www.dhsspsni.gov.uk/index/stats_res_earch/public_health/statistics_and_research-drugs_alcohol-2.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

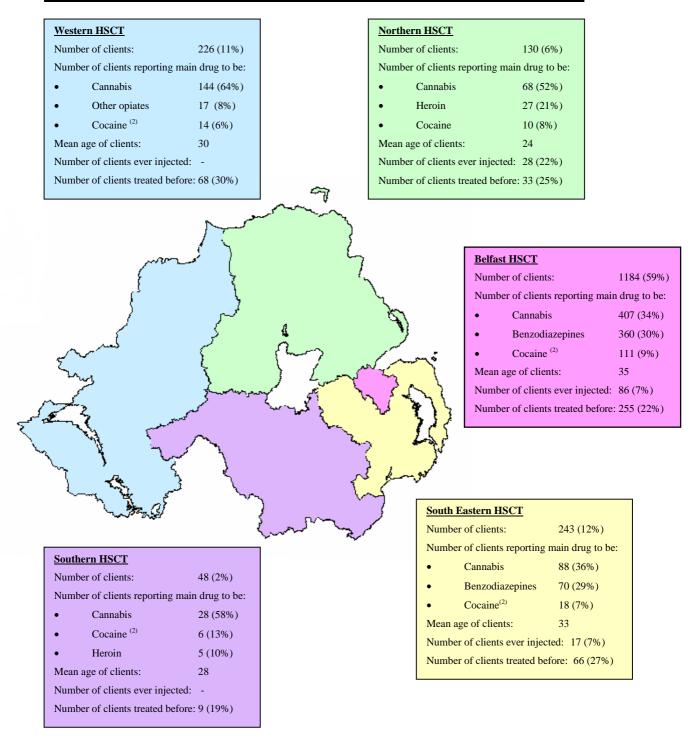
12.8 The Northern Ireland Statistics and Research Agency (NISRA) is the principal source of official statistical information about Northern Ireland. Further information is available from the NISRA website at www.nisra.gov.uk or via e-mail at info.nisra@dfpni.gov.uk.

Future Publications

12.9 This DMD publication will be updated on an annual basis. The next DMD Statistical Bulletin will be published on Thursday 6th October 2011.

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 cocaine drug category includes both cocaine powder and crack cocaine.

ANNEX B - TABLES

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Table 1. Total number of DMD forms received from each HSCT: 2009/10

numbers and percentages

нѕст	Total number of forms received ⁽¹⁾	Number of consent withheld forms received ⁽²⁾	Number of forms analysed ⁽³⁾
Belfast	1255	71	1,184
Northern	141	11	130
South Eastern	244	1	243
Southern	49	1	48
Western	235	9	226
Prisons	178	1	177
Total	2,102	94	2,008
<u>Percentages</u>			
Belfast	60	76	59
Northern	7	12	6
South Eastern	12	1	12
Southern	2	1	2
Western	11	10	11
Prisons	8	1	9
Total	100	100	100

⁽¹⁾ 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.

⁽²⁾ The provision of information to the database is a voluntary exercise requiring client consent. Where consent is not given a blank form is returned with 'consent withheld' written across it, along with the designated Agency code.

⁽³⁾ 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: 2009/10

			numb	pers and percentages
нѕст	Male	Female	Total	
Belfast	802	382	1,184	
Northern	111	19	130	
South Eastern	154	89	243	
Southern	37	11	48	
Western	176	50	226	
Prison	169	8	177	
Total	1,449	559	2,008	
<u>Percentages</u>				
Belfast	68	32	100	
Northern	85	15	100	
South Eastern	63	37	100	
Southern	77	23	100	
Western	78	22	100	
Prison	95	5	100	
Total	72	28	100	

Table 3. Age of clients who presented for treatment by HSCT: 2009/10

 $^{^{(1)}}$ This table excludes 1 individual whose date of birth was not known.

Table 4. Age and gender of clients who presented for treatment: 2009/10

numbers and percentages

				numbers and percentages
Age group	Male	Female	Total	
Under 18 years	106	18	124	
18-21 years	332	58	390	
22-25 years	227	54	281	
26-29 years	221	52	273	
30-39 years	309	117	426	
40 years & over	253	260	513	
Total ⁽¹⁾	1,448	559	2,007	
<u>Percentages</u>				
Under 18 years	7	3	6	
18-21 years	23	10	19	
22-25 years	16	10	14	
26-29 years	15	9	14	
30-39 years	21	21	21	
40 years & over	17	47	26	
Total	100	100	100	

⁽¹⁾ This table excludes 1 individual whose date of birth was not known.

Table 5. Agency type of clients who presented for treatment in each HSCT: 2009/10

numbers and percentages HSCT (1) **Non-Statutory** Statutory **Total Belfast** 400 784 1,184 Northern 50 130 80 **South Eastern** 37 206 243 0 48 48 Southern Western 31 226 195 Total 1,831 518 1,313 **Percentages Belfast** 34 66 100 Northern 38 62 100 **South Eastern** 15 85 100 Southern 0 100 100 Western 14 86 100 Total 28 72 100

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

Table 6. Reasons clients have reported for attending treatments services: 2009/10

numbers and percentages Reason for attendance Number % Wholly own choice 903 45 Persuaded by others 419 21 Required by others 34 686 Total 2,008 100 Reasons for attending: (1) **Financial** 225 11 27 Legal 536 Job 136 7 Family/Relationships 764 38 Medical e.g. detoxification 589 29 **Psychological** 917 46 Housing 75 4 **Pregnancy** Other 24 1

⁽¹⁾ Individuals can report more than one reason for attending treatment, and so percentages will not total to 100.

Table 7. Referral details of clients who presented for treatment: 2009/10

numbers and percentages Referral by Number % GP 1,021 51 Psychiatrist/mental health service 110 5 **Social Services** 2 35 Hospital 17 1 **Community Addiction Team** 21 1 **Non- Statutory Agency** 37 2 Legal requirement 1 19 **Probation** 7 134 **Prison/YOC** 164 8 Self 239 12 Family/Friend 48 2 **Education** 1 15 Other 148 7 Total 2,008 100

Table 8. Proposed action of treatment for clients who presented for treatment: 2009/10

numbers and percentages **Proposed Action** (1) Number % Persons 2,008 **Assessment** 1,600 80 Detoxification 317 16 **Substitute Prescribing** 5 100 **Prescribing Contract** 114 6 Counselling 1,093 54 **Family Support** 2 48 Rehabilitation 2 34 **Throughcare** 20 1 Mentoring 5 99 **Education/Information** 1,019 51 No intervention 35 2 Advised screening for HIV, HEP B or C 113 6 Other 15 1

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

Table 9. Main drug of misuse of clients who presented for treatment by gender: 2009/10

numbers and percentages Main Problem Drug (1) Male **Female** Total **Cannabis** 747 105 852 **Ecstasy** 32 10 42 Cocaine (2) 186 158 28 Heroin 27 115 88 Other opiates (3) 69 39 108 **Benzodiazepines** 227 231 458 Codeine & Paracetamol 25 36 61 Other Drugs⁽⁴⁾ 103 83 186 Total 2.008 1,449 559 **Percentages Cannabis** 52 19 42 2 2 **Ecstasy** 2 Cocaine (2) 11 5 Heroin 6 5 6 Other opiates (3) 5 7 5 **Benzodiazepines** 16 41 23 **Codeine & Paracetamol** 2 3 6 Other Drugs⁽⁴⁾ 7 15 9 **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 now also 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.

Table 10. Main drug of misuse of clients who presented for treatment by age: 2009/10

				numbers a	and percentages
Main Problem Drug ⁽¹⁾	Under 18 years	18-25 years	26 years & over	Total	
Cannabis	94	397	360	851	
Ecstasy	-	-	18	42	
Cocaine (2)	6	76	104	186	
Heroin	0	33	82	115	
Other opiates (3)	-	-	87	108	
Benzodiazepines	-	-	397	458	
Codeine & Paracetamol	0	13	48	61	
Other Drugs (4)	16	54	116	186	
Total ⁽⁵⁾ <u>Percentages</u>	124	671	1,212	2,007	
Cannabis	76	59	30	42	
Ecstasy	-	-	1	2	
Cocaine (2)	5	11	9	9	
Heroin	0	5	7	6	
Other opiates (3)	-	-	7	5	
Benzodiazepines	-	-	33	23	
Codeine & Paracetamol	0	2	4	3	
Other Drugs ⁽⁴⁾	13	8	10	9	
Total ⁽⁵⁾	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⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽³⁾ The 'other opiates' drug category now also 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.

⁽⁵⁾ This table excludes 1 individual whose date of birth was not known.

Table 11. Main drug of misuse of clients who presented for treatment by HSCT: 2009/10

numbers and percentages

Main Problem Drug ^{(1) (2)}	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
Cannabis	407	68	88	28	144	117	852
Ecstasy	22	-	-	0	7	-	42
Cocaine (3)	111	10	18	6	14	27	186
Heroin	57	27	11	5	8	7	115
Other opiates (4)	61	-	14	-	17	-	108
Benzodiazepines	360	-	70	0	14	-	458
Codeine & Paracetamol	36	0	-	-	11	0	61
Other Drugs ⁽⁵⁾	130	9	27	-	11	-	186
Total <u>Percentages</u>	1,184	130	243	48	226	177	2,008
Cannabis	34	52	36	58	64	66	42
Ecstasy	2	-	-	0	3	-	2
Cocaine (3)	9	8	7	13	6	15	9
Heroin	5	21	5	10	4	4	6
Other opiates (4)	5	-	6	-	8	-	5
Benzodiazepines	30	-	29	0	6	-	23
Codeine & Paracetamol	3	0	-	-	5	0	3
Other Drugs ⁽⁵⁾	11	7	11	-	5	-	9
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 HSCT breakdown has not been presented for all main drugs in some HSCTs 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 now also 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 12. All drugs of misuse of clients who presented for treatment by HSCT: 2009/10

numbers and percentages

All Drugs (1) (2)	Belfast	Northern	South Eastern	Southern	Western	Prison	 Total
Persons	1,184	130	243	48	226	177	2,008
Cannabis	550	87	117	34	168	132	1,088
Ecstasy	189	24	33	5	75	45	371
Cocaine ⁽³⁾	313	33	61	13	83	62	565
Heroin	87	30	14	5	20	7	163
Other Opiates (4)	147	20	47	-	31	-	253
Benzodiazepines	621	-	124	-	34	32	833
Codeine & Paracetamol	55	-	34	-	26	-	120
Other Drugs ⁽⁵⁾	336	41	69	9	102	19	576
<u>Percentages</u>							
Cannabis	46	67	48	71	74	75	54
Ecstasy	16	18	14	10	33	25	18
Cocaine (3)	26	25	25	27	37	35	28
Heroin	7	23	6	10	9	4	8
Other Opiates (4)	12	15	19	-	14	-	13
Benzodiazepines	52	-	51	-	15	18	41
Codeine & Paracetamol	5	-	14	-	12	-	6
Other Drugs ⁽⁵⁾	28	32	28	19	45	11	29

⁽¹⁾ The main drug is the drug which is causing the client the most problems at the time they present themselves to the Agency for treatment. A further four subsidiary drugs can be recorded. The figures for "all drugs" include all drugs recorded either as the main or a subsidiary drug. These figures add up to more than 100%.

⁽²⁾ A HSCT breakdown has not been presented for all main drugs in some HSCTs 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 now also 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 13. Problem Alcohol Use by HSCT: 2009/10

				numbers	and perce	entages	
	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
Problem Alcohol Use (1)	418	33	64	21	125	24	685
No Problem Use	766	97	179	27	101	153	1,323
Total	1,184	130	243	48	226	177	2,008
<u>Percentages</u>							
Problem Alcohol Use	35	25	26	44	55	14	34
No Problem Use	65	75	74	56	45	86	66
Total	100	100	100	100	100	100	100

^{(1) 398 (58%)} of the 685 clients reported that alcohol was their main problem.

Table 14. Average units of alcohol consumed per week in the four weeks before treatment: 2009/10

numbers and percentages Number % None 129 19 1-99 units 310 46 100-249 units 165 25 250-549 units 7 49 550 & more units 20 3 Total (2) 673 100

⁽²⁾ This table excludes 12 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: 2009/10

	numbers and percentages			
Main Problem Drug ⁽¹⁾	Treated before	Not treated before	Total	
Cannabis	160	691	851	
Ecstasy	9	33	42	
Cocaine ⁽²⁾	49	137	186	
Heroin	66	49	115	
Other Opiates (3)	41	66	107	
Benzodiazepines	55	403	458	
Codeine & Paracetamol	27	34	61	
Other Drugs ⁽⁴⁾	25	161	186	
Total ⁽⁵⁾	432	1,574	2,006	
<u>Percentages</u>				
Cannabis	19	81	100	
Ecstasy	21	79	100	
Cocaine (2)	26	74	100	
Heroin	57	43	100	
Other Opiates (3)	38	62	100	
Benzodiazepines	12	88	100	
Codeine & Paracetamol	44	56	100	
Other Drugs ⁽⁴⁾	13	87	100	
Total ⁽⁵⁾	22	78	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 now also 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.

⁽⁵⁾ This table excludes 2 individuals whose treatment history was not known.

Table 16. Age profile of clients at their current treatment, and at their first treatment: 2009/10

numbers and percentages

	Clients Age Group at Face Date					
	Under 18 years	18-25 years	26 years & over	Total		
Age at first treatment (1)						
Under 18 years	8	11	6	25		
18-25 years	0	78	110	188		
26 years & over	0	0	212	212		
Total	8	89	328	425		
<u>Percentages</u>						
Age at first treatment (1)						
Under 18 years	100	12	2	6		
18-25 years	0	88	34	44		
26 years & over	0	0	65	50		
Total	100	100	100	100		

⁽¹⁾ This table excludes 7 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: 2009/10

⁽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⁾ Only the main reported routes of administration have been presented for each main problem drug, as some cells had counts of less than five; 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 now also 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.

⁽⁶⁾ This table excludes 2 individuals whose route of administration for main drug was not known.

Table 18. Clients who presented for treatment by injecting history by HSCT: 2009/10

numbers and percentages **HSCT** Persons who had Persons with known injected injecting history **Belfast** 86 1,182 Northern 28 129 **South Eastern** 17 242 Southern 48 Western 226 **Prison** 177 Total 146 2,004 Percentages (1) **Belfast** 7 100 22 Northern 100 South Eastern 7 100 Southern 100 Western 100 **Prison** 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: 2009/10

			numbers and percentages
Age group	Number	%	
Under 18 years	17	12	
18-21 years	53	37	
22-25 years	34	24	
26-29 years	-	-	
30-39 years	20	14	
40 years & over	-	-	
Total ⁽¹⁾	142	100	

⁽¹⁾ This table excludes 4 individuals whose age first injected was not known.

Table 20. Gender of injectors (2) who presented for treatment by sharing history (3): 2009/10

	numbers and percentages		
	Male	Female	Persons
Individuals who had shared equipment	42	8	50
Individuals with a known sharing history (4)	115	30	145
Percentages (5)			
Individuals who had shared equipment	37	27	34
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 1 individual 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 had previously been tested for HIV, Hepatitis B and Hepatitis C: 2009/10

(a) HIV (1)

	Number	
Ever tested	129	6
Tested in last 12 months	58	3
Never tested	1,815	90
Test status unknown	6	0
Total	2,008	100

⁽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	121	6
Tested in last 12 months	58	3
Never tested	1,823	91
Test status unknown	6	0
Total	2,008	100

⁽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	120	6
Tested in last 12 months	62	3
Never tested	1,820	91
Test status unknown	6	0
Total	2,008	100

 $^{^{(1)}}$ 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: 2009/10

Number of injections of the Hepatitis B vaccination course completed

HSCT (1) (2)	Zero	One	Two	Three	Total
Belfast	1,150	-	-	23	1,182
Northern	112	-	-	-	130
South Eastern	238	-	-	-	242
Southern	47	-	-	-	48
Western	223	-	-	-	226
Prison	177	0	0	0	177
Total	1,947	7	6	45	2,005
<u>Percentages</u>					
Belfast	97	-	-	2	100
Northern	86	-	-	-	100
South Eastern	98	-	-	-	100
Southern	98	-	-	-	100
Western	99	-	-	-	100
Prison	100	0	0	0	100
Total	97	0	0	2	100

⁽¹⁾ A complete breakdown by HSCT is not presented as it contained some cell counts of less than five; this is to ensure individuals cannot be identified.

⁽²⁾ This table excludes 3 individuals whose Hepatitis B vaccination course status was not known.

Table 23. Living arrangements of clients who presented for treatment: 2009/10

	nun	nbers and per	rcentages
Living arrangements	Number	%	
Alone	532	26	
With spouse/ partner only	179	9	
With spouse/ partner and children	244	12	
With dependant children	120	6	
With parents	525	26	
With friends	57	3	
Hostel	88	4	
Homeless - Roofless	15	1	
In Prison - YOC	188	9	
Other Specify	60	3	
Not known	0	0	
Total ⁽¹⁾	2,008	100	

^{(1) 158 (8%)} of the 2,008 individuals reported living with other drug users.

Table 24. Employment status of clients who presented for treatment: 2009/10

	numbers and percentages		
Employment Status	Number	%	
In Employment	253	13	
On Government training scheme	16	1	
Student	92	5	
Unemployed	1,143	57	
Receiving Other Benefits	269	13	
Retired/ Receiving Pension	42	2	
Other	192	10	
Total ⁽²⁾	2,007	100	

⁽²⁾ 402 (20%) of the 2,008 individuals reported having worked in the 12 months before treatment commenced.

Table 25. EU nationality of clients who presented for treatment: 2009/10

		numbers and percentage	<u>es</u>
Nationality	Number	%	

EU National	1,943	97
Non – EU National	63	3

Total⁽¹⁾ 2,006 100

⁽¹⁾ This table excludes 2 individuals whose nationality was not known.

Table 26. Legal status of clients who presented for treatment: 2009/10

numbers and percentages

	Hullibe
Number	%
2,008	-
1,305	65
19	1
182	9
57	3
127	6
135	7
188	9
0	0
19	1
	2,008 1,305 19 182 57 127 135 188 0

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

ANNEX C - ADDITIONAL HEALTH AND SOCIAL CARE TRUST TABLES

TABLE	TITLE	PAGE
Table HT1	Main drug of misuse of clients who presented for treatment by gender: 2009/10 (For each HSCT & Prisons)	44-49
Table HT2	Main drug of misuse of clients who presented for treatment by age: 2009/10 (For each HSCT & Prisons)	50-55
Table HT3	Route of administration for main drug of misuse by clients who presented for treatment: 2009/10 (For each HSCT & Prisons)	56-61
Table HT4	Treatment history of clients who presented for treatment by main drug of misuse: 2009/10 (For each HSCT & Prisons)	62-67

Table HT1. Main drug of misuse of clients who presented for treatment by gender: 2009/10

(a) Belfast HSCT

Main Problem Drug ⁽¹⁾	Male	Female	Total
Cannabis	355	52	407
Ecstasy	15	7	22
Cocaine (2)	93	18	111
Heroin	44	13	57
Other opiates (3)	39	22	61
Benzodiazepines	174	186	360
Codeine & Paracetamol	15	21	36
Other Drugs ⁽⁴⁾	67	63	130
Total	802	382	1,184
<u>Percentages</u>			
Cannabis	44	14	34
Ecstasy	2	2	2
Cocaine (2)	12	5	9
Heroin	5	3	5
Other opiates (3)	5	6	5
Benzodiazepines	22	49	30
Codeine & Paracetamol	2	5	3
Other Drugs (4)	8	16	11
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 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 now also 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.

Table HT1. Main drug of misuse (continued)
(b) Northern HSCT

Main Problem Drug ^{(1) (2)}	Male	Female	Total
Cannabis	61	7	68
Ecstasy	-	-	-
Cocaine (3)	-	-	10
Heroin	22	5	27
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	-	-	9
Total	111	19	130
<u>Percentages</u>			
Cannabis	55	37	52
Ecstasy	-	-	-
Cocaine (3)	-	-	8
Heroin	20	26	21
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	-	-	7
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 present themselves to the Agency for treatment.

⁽²⁾ A gender breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT1. Main drug of misuse (continued)

(c) South Eastern HSCT

Main Problem Drug (1) (2)	Male	Female	Total
Cannabis	67	21	88
Ecstasy	-	-	-
Cocaine (3)	13	5	18
Heroin	-	-	11
Other opiates (4)	7	7	14
Benzodiazepines	31	39	70
Codeine & Paracetamol	-	-	-
Other Drugs ⁽⁵⁾	20	7	27
Total	154	89	243
<u>Percentages</u>			
Cannabis	44	24	36
Ecstasy	-	-	-
Cocaine (3)	8	6	7
Heroin	-	-	5
Other opiates (4)	5	8	6
Benzodiazepines	20	44	29
Codeine & Paracetamol	-	-	-
Other Drugs ⁽⁵⁾	13	8	11
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 present themselves to the Agency for treatment.

⁽²⁾ A gender breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT1. Main drug of misuse (continued)

(d) Southern HSCT

Main Problem Drug ^{(1) (2)}	Male	Female	Total
Cannabis	-	-	28
Ecstasy	0	0	0
Cocaine ⁽³⁾	-	-	6
Heroin	-	-	5
Other opiates (4)	-	-	-
Benzodiazepines	0	0	0
Codeine & Paracetamol	-	-	-
Other Drugs ⁽⁵⁾	-	-	-
Total	37	11	48
<u>Percentages</u>			
Cannabis	-	-	58
Ecstasy	0	0	0
Cocaine (3)	-	-	13
Heroin	-	-	10
Other opiates (4)	-	-	-
Benzodiazepines	0	0	0
Codeine & Paracetamol	-	-	-
Other Drugs ⁽⁵⁾	-	-	-
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 present themselves to the Agency for treatment.

⁽²⁾ A gender breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT1. Main drug of misuse (continued)

(e) Western HSCT

Main Problem Drug ^{(1) (2)}	Male	Female	Total
Cannabis	124	20	144
Ecstasy	-	-	7
Cocaine ⁽³⁾	-	-	14
Heroin	-	-	8
Other opiates (4)	11	6	17
Benzodiazepines	9	5	14
Codeine & Paracetamol	-	-	11
Other Drugs ⁽⁵⁾	6	5	11
Total	176	50	226
<u>Percentages</u>			
Cannabis	70	40	64
Ecstasy	-	-	3
Cocaine (3)	-	-	6
Heroin	-	-	4
Other opiates (4)	6	12	8
Benzodiazepines	5	10	6
Codeine & Paracetamol	-	-	5
Other Drugs ⁽⁵⁾	3	10	5
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 present themselves to the Agency for treatment.

⁽²⁾ A gender breakdown has not been presented for all main drugs as it contained cell counts of less than five; 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 now also 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 HT1. Main drug of misuse (continued)

(f) Prisons

Main Problem Drug ^{(1) (2)}	Male	Female	Total
Cannabis	-	-	117
Ecstasy	-	-	-
Cocaine (3)	27	0	27
Heroin	-	-	7
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	-	-	-
Total	169	8	177
<u>Percentages</u>			
Cannabis	-	-	66
Ecstasy	-	-	-
Cocaine (3)	16	0	15
Heroin	-	-	4
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	-	-	-
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 present themselves to the Agency for treatment.

⁽²⁾ A gender breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT2. Main drug of misuse of clients who presented for treatment by age: 2009/10

(a) Belfast HSCT

Main Problem Drug (1) (2)	Under 18 years	18-25 years	26 years & over	Total
Cannabis	18	177	211	406
Ecstasy	0	8	14	22
Cocaine (3)	0	36	75	111
Heroin	0	17	40	57
Other opiates (4)	0	15	46	61
Benzodiazepines	-	-	316	360
Codeine & Paracetamol	0	7	29	36
Other Drugs ⁽⁵⁾	-	-	93	130
Total ⁽⁶⁾	26	333	824	1,183
<u>Percentages</u>				
Cannabis	69	53	26	34
Ecstasy	0	2	2	2
Cocaine ⁽³⁾	0	11	9	9
Heroin	0	5	5	5
Other opiates (4)	0	5	6	5
Benzodiazepines	-	-	38	30
Codeine & Paracetamol	0	2	4	3
Other Drugs ⁽⁵⁾	-	-	11	11
Total ⁽⁶⁾	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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as it contained cell counts of less than five; 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 now also 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.

⁽⁶⁾ This table excludes 1 individual whose date of birth was not known.

Table HT2. Main drug of misuse by age (continued)

(b) Northern HSCT

Main Problem Drug (1) (2)	Under 18 years	18-25 years	26 years & over	Total
Cannabis	40	12	16	68
Ecstasy	-	-	-	-
Cocaine (3)	-	5	-	10
Heroin	0	7	20	27
Other opiates (4)	0	-	-	-
Benzodiazepines	0	-	-	-
Codeine & Paracetamol	0	0	0	0
Other Drugs (5)	-	-	-	9
Total	50	27	53	130
<u>Percentages</u>				
Cannabis	80	44	30	52
Ecstasy	-	-	-	-
Cocaine (3)	-	19	-	8
Heroin	0	26	38	21
Other opiates (4)	0	-	-	-
Benzodiazepines	0	-	-	-
Codeine & Paracetamol	0	0	0	0
Other Drugs (5)	-	-	-	7
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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT2. Main drug of misuse by age (continued)

(c) South Eastern HSCT

Main Problem Drug ^{(1) (2)}	Under 18 years			Total
Cannabis	-	39	-	88
Ecstasy	-	-	-	-
Cocaine (3)	0	5	13	18
Heroin	0	-	-	11
Other opiates (4)	0	-	-	14
Benzodiazepines	0	5	65	70
Codeine & Paracetamol	0	-	-	-
Other Drugs ⁽⁵⁾	-	15	-	27
Total	8	72	163	243
<u>Percentages</u>				
Cannabis	-	54	-	36
Ecstasy	0	-	-	-
Cocaine ⁽³⁾	0	7	8	7
Heroin	0	-	-	5
Other opiates (4)	0	-	-	6
Benzodiazepines	0	7	40	29
Codeine & Paracetamol	0	-	-	-
Other Drugs ⁽⁵⁾	-	21	-	11
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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT2. Main drug of misuse by age (continued)

(d) Southern HSCT

Main Problem Drug ^{(1) (2)}	Under 18 18-25 2 years years		26 years & over	Total
Cannabis	0	14	14	28
Ecstasy	0	0	0	0
Cocaine (3)	0	-	-	6
Heroin	0	-	-	5
Other opiates (4)	0	0	-	-
Benzodiazepines	0	0	0	0
Codeine & Paracetamol	0	-	-	-
Other Drugs (5)	0	-	-	-
Total	0	24	24	48
<u>Percentages</u>				
Cannabis	0	58	58	58
Ecstasy	0	0	0	0
Cocaine (3)	0	-	-	13
Heroin	0	-	-	10
Other opiates (4)	0	0	-	-
Benzodiazepines	0	0	0	0
Codeine & Paracetamol	0	-	-	-
Other Drugs ⁽⁵⁾	0	-	-	-
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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT2. Main drug of misuse by age (continued)

(e) Western HSCT

Main Problem Drug ^{(1) (2)}			26 years & over	Total
Cannabis	8	62	74	144
Ecstasy	-	-	-	7
Cocaine (3)	0	8	6	14
Heroin	-	-	-	8
Other opiates (4)	-	-	-	17
Benzodiazepines	0	-	-	14
Codeine & Paracetamol	0	-	-	11
Other Drugs ⁽⁵⁾	-	-	7	11
Total	12	81	133	226
<u>Percentages</u>				
Cannabis	67	77	56	64
Ecstasy	-	-	-	3
Cocaine (3)	0	10	5	6
Heroin	0	-	-	4
Other opiates (4)	-	-	-	8
Benzodiazepines	0	-	-	6
Codeine & Paracetamol	0	-	-	5
Other Drugs ⁽⁵⁾	-	-	5	5
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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as it contained cell counts of less than five; 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 now also 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 HT2. Main drug of misuse by age (continued)

(f) Prisons

Main Problem Drug ^{(1) (2)}	Under 18 years	_		Persons
Cannabis	-	93	-	117
Ecstasy	-	-	-	-
Cocaine (3)	-	19	-	27
Heroin	-	-	-	7
Other opiates (4)	-	-	-	-
Benzodiazepines	-	8	-	-
Codeine & Paracetamol	0	0	0	0
Other Drugs ⁽⁵⁾	0	-	-	-
Total	28	134	15	177
<u>Percentages</u>				
Cannabis	-	69	-	66
Ecstasy	-	-	-	-
Cocaine (3)	-	14	-	15
Heroin	-	-	-	4
Other opiates (4)	-	-	-	-
Benzodiazepines	-	6	-	-
Codeine & Paracetamol	0	0	0	0
Other Drugs ⁽⁵⁾	0	-	-	-
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 present themselves to the Agency for treatment.

⁽²⁾ An age group breakdown has not been presented for all main drugs as some cells were masked to hide counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT3. Route of administration for main drug of misuse by clients who presented for treatment: 2009/10

(a) Belfast HSCT					•	
Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	24	370	13	0	407
Ecstasy	0	22	0	0	0	22
Cocaine (3)	0	-	-	99	0	111
Heroin	-	-	28	0	0	57
Other opiates (4)	-	-	0	-	0	60
Benzodiazepines	0	360	0	0	0	360
Codeine & Paracetamol	0	36	0	0	0	36
Other Drugs (5)	-	94	-	-	0	130
Total ⁽⁶⁾	30	602	404	147	0	1,183
<u>Percentages</u>						
Cannabis	0	6	91	3	0	100
Ecstasy	0	100	0	0	0	100
Cocaine (3)	0	-	-	89	0	100
Heroin	-	-	49	0	0	100
Other opiates (4)	-	-	0	-	0	100
Benzodiazepines	0	100	0	0	0	100
Codeine & Paracetamol	0	100	0	0	0	100
Other Drugs (5)	-	72	-	-	0	100
Total ⁽⁶⁾	3	51	34	12	0	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⁾ Only the main reported routes of administration have been presented for each main problem drug as some cells have counts of less than five; 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 now also 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.

⁽⁶⁾ This table excludes 1 individual whose route of administration of main drug was not known.

Table HT3. Route of administration (continued)

(b) Northern HSCT

Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	-	60	-	0	68
Ecstasy	0	-	0	0	0	-
Cocaine ⁽³⁾	0	-	-	-	0	10
Heroin	15	-	-	0	0	27
Other opiates (4)	0	-	-	0	0	-
Benzodiazepines	0	-	0	0	0	-
Codeine & Paracetamol	0	0	0	0	0	0
Other Drugs ⁽⁵⁾	0	-	0	-	0	9
Total	15	26	73	16	0	130
<u>Percentages</u>						
Cannabis	0	_	88	_	0	100
Ecstasy	0	_	0	0	0	100
Cocaine (3)	0	-		_	0	100
		-	-	-	_	
Heroin	56	-	-	0	0	100
Other opiates (4)	0	-	-	0	0	100
Benzodiazepines	0	-	0	0	0	100
Codeine & Paracetamol	0	0	0	0	0	100
Other Drugs ⁽⁵⁾	0	-	0	-	0	100
Total	12	20	56	12	0	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⁾ Only the main reported routes of administration have been presented for the main problem drug as some cells have counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT3. Route of administration (continued)

(c) South Eastern HSCT

Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	-	79	-	0	88
Ecstasy	-	-	-	0	0	-
Cocaine (3)	-	-	-	14	0	18
Heroin	-	-	-	0	0	11
Other opiates (4)	0	14	0	0	0	14
Benzodiazepines	0	70	0	0	0	70
Codeine & Paracetamol	0	-	0	0	0	-
Other Drugs ⁽⁵⁾	-	-	0	-	0	27
Total	7	121	86	29	0	243
<u>Percentages</u>						
Cannabis	0	-	90	-	0	100
Ecstasy	-	-	-	0	0	100
Cocaine ⁽³⁾	-	-	-	78	0	100
Heroin	-	-	-	0	0	100
Other opiates (4)	0	100	0	0	0	100
Benzodiazepines	0	100	0	0	0	100
Codeine & Paracetamol	0	-	0	0	0	100
Other Drugs ⁽⁵⁾	-	-	0	-	0	100
Total	3	50	35	12	0	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⁾ Only the main reported routes of administration have been presented for the main problem drug as some cells had counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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 HT3. Route of administration (continued)

(d) Southern HSCT

Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	-	-	-	0	28
Ecstasy	0	0	0	0	0	0
Cocaine ⁽³⁾	0	0	-	-	0	6
Heroin	-	0	-	0	0	5
Other opiates (4)	-	-	0	0	0	-
Benzodiazepines	0	0	0	0	0	0
Codeine & Paracetamol	0	-	0	0	0	-
Other Drugs ⁽⁵⁾	-	-	-	-	0	-
Total ⁽⁶⁾	-	-	32	8	0	48
<u>Percentages</u>						
Cannabis	0	-	-	-	0	100
Ecstasy	0	0	0	0	0	100
Cocaine ⁽³⁾	0	0	-	-	0	100
Heroin	-	0	-	0	0	100
Other opiates (4)	-	-	0	0	0	100
Benzodiazepines	0	0	0	0	0	100
Codeine & Paracetamol	0	-	0	0	0	100
Other Drugs ⁽⁵⁾	-	-	-	-	0	100
Total ⁽⁶⁾	-	-	67	17	0	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⁾ Only the main reported routes of administration have been presented for the main problem drug as some cells had counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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.

⁽⁶⁾ This table excludes 1 individual whose route of administration of main drug was not known.

Table HT3. Route of administration (continued)

(e) Western HSCT

Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	32	-	-	0	144
Ecstasy	0	7	0	0	0	7
Cocaine (3)	-	-	0	-	0	14
Heroin ⁽⁴⁾	-	0	-	0	0	8
Other opiates	0	-	0	0	-	17
Benzodiazepines	0	14	0	0	0	14
Codeine & Paracetamol	0	11	0	0	0	11
Other Drugs ⁽⁵⁾	0	-	0	-	0	11
Total		0.4	444	47		000
Total	-	91	111	17	-	226
Percentages						
Cannabis	0	22	-	-	0	100
Ecstasy	0	100	0	0	0	100
Cocaine ⁽³⁾	-	-	0	-	0	100
Heroin	-	0	-	0	0	100
Other opiates (4)	0	-	0	0	-	100
Benzodiazepines	0	100	0	0	0	100
Codeine & Paracetamol	0	100	0	0	0	100
Other Drugs ⁽⁵⁾	0	-	0	-	0	100
Total	_	40	49	8	_	100
I Otal	=	40	43	O	-	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⁾ Only the main reported routes of administration have been presented for the main problem drug as some cells had counts of less than five and some were masked 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 now also 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 HT3. Route of administration (continued)

(f) Prisons

Main Problem Drug (1) (2)	Inject	Oral	Smoke	Sniff	Other	Total
Cannabis	0	-	114	0	0	117
Ecstasy	0	-	0	0	0	-
Cocaine (3)	0	18	-	-	0	27
Heroin	0	-	-	-	0	6
Other opiates (4)	0	-	0	0	0	-
Benzodiazepines	0	-	0	0	0	-
Codeine & Paracetamol	0	0	0	0	0	0
Other Drugs ⁽⁵⁾	0	-	0	0	0	-
Total ⁽⁶⁾	0	51	118	7	0	176
<u>Percentages</u>						
r ordoritageo						
Cannabis	0	-	97	0	0	100
Ecstasy	0	-	0	0	0	100
Cocaine ⁽³⁾	0	67	-	-	0	100
Heroin	0	-	-	-	0	100
Other opiates (4)	0	-	0	0	0	100
Benzodiazepines	0	-	0	0	0	100
Codeine & Paracetamol	0	0	0	0	0	100
Other Drugs ⁽⁵⁾	0	-	0	0	0	100
Total ⁽⁶⁾	0	29	67	4	0	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⁾ Only the main reported routes of administration have been presented for the main problem drug as some cells had cell counts of less than five, some to prevent the value in another cell from being calculated and some for consistency with information 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 now also 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.

⁽⁶⁾ This table excludes 1 individual whose route of administration of main drug was not known.

Table HT4. Treatment history of clients who presented for treatment by main drug of misuse: 2009/10

(a) Belfast HSCT

Main Problem Drug ⁽¹⁾	Treated before	Not treated before	Total
Cannabis	90	316	406
Ecstasy	8	14	22
Cocaine (2)	37	74	111
Heroin	36	21	57
Other opiates (3)	22	38	60
Benzodiazepines	31	329	360
Codeine & Paracetamol	16	20	36
Other Drugs ⁽⁴⁾	15	115	130
Total ⁽⁵⁾	255	927	1,182
<u>Percentages</u>			
Cannabis	22	78	100
Ecstasy	36	64	100
Cocaine ⁽²⁾	33	67	100
Heroin	63	37	100
Other opiates (3)	37	63	100
Benzodiazepines	9	91	100
Codeine & Paracetamol	44	56	100
Other Drugs ⁽⁴⁾	12	88	100
Total ⁽⁵⁾	22	78	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 now also 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.

⁽⁵⁾ This table excludes 2 individuals whose treatment history status was not known.

Table HT4. Treatment history (continued)

(b) Northern HSCT

Main Problem Drug (1) (2)	Treated before	Not treated before	Total
Cannabis	11	57	68
Ecstasy	-	-	-
Cocaine ⁽³⁾	-	-	10
Heroin	14	13	27
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	0	9	9
Total	33	97	130
<u>Percentages</u>			
Cannabis	16	84	100
Ecstasy	-	-	100
Cocaine (3)	-	-	100
Heroin	52	48	100
Other opiates (4)	-	-	100
Benzodiazepines	-	-	100
Codeine & Paracetamol	0	0	100
Other Drugs (5)	0	100	100
-			
Total	25	75	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 treatment status breakdown has not been presented for all main drugs as it contained cell counts of less than five; this is to ensure individuals cannot be identified. For some main drugs a breakdown has not been presented as the totals were not presented in Table 11.

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

⁽⁴⁾ The 'other opiates' drug category now also 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 HT4. Treatment history (continued)

(c) South Eastern HSCT

Main Problem Drug (1) (2)	Treated before	Not treated before	Total
Cannabis	17	71	88
Ecstasy	-	-	-
Cocaine (3)	5	13	18
Heroin	-	-	11
Other opiates (4)	5	9	14
Benzodiazepines	18	52	70
Codeine & Paracetamol	-	-	-
Other Drugs (5)	8	19	27
Total	66	177	243
<u>Percentages</u>			
Cannabis	19	81	100
Ecstasy	-	-	100
Cocaine (3)	28	72	100
Heroin	-	-	100
Other opiates (4)	36	64	100
Benzodiazepines	26	74	100
Codeine & Paracetamol	-	-	100
Other Drugs (5)	30	70	100
Total	27	73	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 treatment status breakdown has not been presented for all main drugs as it contained cell counts of less than five; this is to ensure individuals cannot be identified. For some main drugs a breakdown has not been presented as the totals were not presented in Table 11.

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

⁽⁴⁾ The 'other opiates' drug category now also 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 HT4. Treatment history (continued)

(d) Southern HSCT

Main Problem Drug (1) (2)	Treated before	Not treated before	Total
Cannabis	5	23	28
Ecstasy	0	0	0
Cocaine (3)	-	-	6
Heroin	-	-	5
Other opiates (4)	-	-	-
Benzodiazepines	0	0	0
Codeine & Paracetamol	-	-	-
Other Drugs ⁽⁵⁾	-	-	-
Total	9	39	48
Percentages			
<u>r creentages</u>			
Cannabis	18	82	100
Ecstasy	0	0	100
Cocaine (3)	-	-	100
Heroin	-	-	100
Other opiates (4)	-	-	100
Benzodiazepines	0	0	100
Codeine & Paracetamol	-	-	100
Other Drugs ⁽⁵⁾	-	-	100
Total	19	81	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 treatment status breakdown has not been presented for all main drugs as it contained cell counts of less than five; this is to ensure individuals cannot be identified. For some main drugs a breakdown has not been presented as the totals were not presented in Table 11.

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

⁽⁴⁾ The 'other opiates' drug category now also 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 HT4. Treatment history (continued)

(e) Western HSCT

Main Problem Drug (1) (2)	Treated before	Not treated before	Total	
Cannabis	37	107	144	
Ecstasy	-	-	7	
Cocaine (3)	-	-	14	
Heroin	-	-	8	
Other opiates (4)	8	9	17	
Benzodiazepines	5	9	14	
Codeine & Paracetamol	5	6	11	
Other Drugs ⁽⁵⁾	-	-	11	
Total	68	158	226	
Paraantagaa				
<u>Percentages</u>				
Cannabis	26	74	100	
Ecstasy	-	-	100	
Cocaine (3)	-	-	100	
Heroin	-	-	100	
Other opiates ⁽⁴⁾	47	53	100	
Benzodiazepines	36	64	100	
Codeine & Paracetamol	45	55	100	
Other Drugs ⁽⁵⁾	-	-	100	
Total	30	70	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 treatment status breakdown has not been presented for all main drugs as it contained cell counts of less than five; 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 now also 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 HT4. Treatment history (continued)

(f) Prisons

Main Problem Drug (1) (2)	Treated before	Not treated before	Total
Cannabis	0	117	117
Ecstasy	-	-	-
Cocaine (3)	-	-	27
Heroin	0	7	7
Other opiates (4)	-	-	-
Benzodiazepines	-	-	-
Codeine & Paracetamol	0	0	0
Other Drugs ⁽⁵⁾	-	-	-
Total	-	-	177
<u>Percentages</u>			
Cannabis	-	100	100
Ecstasy	-	-	100
Cocaine (3)	-	-	100
Heroin	0	100	100
Other opiates (4)	-	-	100
Benzodiazepines	-	-	100
Codeine & Paracetamol	0	0	100
Other Drugs ⁽⁵⁾	-	-	100
Total	-	-	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 treatment status breakdown has not been presented for all main drugs as it contained cell counts of less than five; this is to ensure individuals cannot be identified. For some main drugs a breakdown has not been presented as the totals were not presented in Table 11.

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

⁽⁴⁾ The 'other opiates' drug category now also 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.

ANNEX D - COMPARISON TABLES 2008/09 TO 2009/10

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Table C1. Age and gender of clients who presented for treatment: 2008/09 and 2009/10

⁽¹⁾ The 2008/09 figures exclude 1 individual whose date of birth was unknown.

⁽²⁾ The 2009/10 figures exclude 1 individual whose date of birth was unknown.

Table C2. Age and gender of clients who presented for treatment by HSCT: 2008/09 and 2009/10

(a) Belfast HSCT

Age groups ⁽¹⁾		2008/09 ⁽²⁾			2009/10 ⁽³⁾	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	-	-	50	-	-	26
18-25 years	-	-	270	-	-	333
26 years & over	352	253	605	514	310	824
Total	631	294	925	801	382	1,183
<u>Percentages</u>						
Under 18 years	-	-	5	-	-	2
18-25 years	-	-	29	-	-	28
26 years & over	56	86	65	64	81	70
Total	100	100	100	100	100	100

⁽¹⁾ A complete gender breakdown has not been presented for 2008/09 and 2009/10 as they contained cell counts of less than five; this is to ensure individuals cannot be identified.

⁽²⁾ The 2008/09 figures exclude 1 individual whose date of birth was unknown.

⁽³⁾ The 2009/10 figures exclude 1 individual whose date of birth was unknown.

Table C2. Age and gender (continued)

(b) Northern HSCT

Age groups ⁽¹⁾		2008/09			2009/10	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	31	7	38	-	-	50
18-25 years	46	8	54	-	-	27
26 years & over	70	21	91	44	9	53
Total	147	36	183	111	19	130
<u>Percentages</u>						
Under 18 years	21	19	21	-	-	38
18-25 years	31	22	30	-	-	21
26 years & over	48	58	50	40	47	41
Total	100	100	100	100	199	100

⁽¹⁾ A complete gender breakdown has not been presented for 2009/10 as it contained cell counts of less than five; this is to ensure individuals cannot be identified.

Table C2. Age and gender (continued)

(c) South Eastern HSCT

Age groups ⁽¹⁾		2008/09			2009/10	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	0	0	0	-	-	8
18-25 years	26	5	31	-	-	72
26 years & over	71	74	145	96	67	163
Total	97	79	176	154	89	243
<u>Percentages</u>						
Under 18 years	0	0	0	-	-	3
18-25 years	27	6	18	-	-	30
26 years & over	73	94	82	62	75	67
Total	100	100	100	100	100	100

⁽¹⁾ A complete gender breakdown has not been presented for 2009/10 as it contained cell counts of less than five; this is to ensure individuals cannot be identified.

Table C2. Age and gender (continued)

(d) Southern HSCT

Age groups		2008/09			2009/10	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	0	0	0	0	0	0
18-25 years	18	6	24	18	6	24
26 years & over	52	13	65	19	5	24
Total	70	19	89	37	11	48
<u>Percentages</u>						
Under 18 years	0	0	0	0	0	0
18-25 years	26	32	27	49	55	50
26 years & over	74	68	73	51	45	50
Total	100	100	100	100	100	100

Table C2. Age and gender (continued)

(e) Western HSCT

Age groups ⁽¹⁾		2008/09			2009/10	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	-	-	25	-	-	12
18-25 years	-	-	65	-	-	81
26 years & over	101	43	144	100	33	133
Total	168	66	234	176	50	226
<u>Percentages</u>						
Under 18 years	-	-	11	-	-	5
18-25 years	-	-	28	-	-	36
26 years & over	60	65	62	57	66	59
Total	100	100	100	100	100	100

 $^{^{(1)}}$ A complete gender breakdown has not been presented for 2008/09 and 2009/10 as they contained cell counts of less than five; this is to ensure individuals cannot be identified.

Table C2. Age and gender (continued)

(f) Prisons

Age groups ⁽¹⁾		2008/09			2009/10	
	Males	Females	Persons	Males	Females	Persons
Under 18 years	5	0	5	-	-	28
18-25 years	-	-	80	-	-	134
26 years & over	-	-	62	10	5	15
Total	-	-	147	169	8	177
<u>Percentages</u>						
Under 18 years	3	0	3	-	-	16
18-25 years	-	-	54	-	-	76
26 years & over	-	-	42	6	63	8
Total	100	100	100	100	100	100

⁽¹⁾ A complete gender breakdown has not been presented for 2008/09 or 2009/10 as it contained cell counts of less than five; this is to ensure individuals cannot be identified.

Table C3. Main drug of misuse of clients who presented for treatment: 2008/09 and 2009/10

			numbers and percentages
Main Problem Drug ⁽¹⁾	2008/09	2009/10	
Cannabis	685	852	
Ecstasy	59	42	
Cocaine ⁽²⁾	195	186	
Heroin	138	115	
Other opiates (3)	84	108	
Benzodiazepines	388	458	
Codeine & Paracetamol	38	61	
Other Drugs ⁽⁴⁾	168	186	
Total	1,755	2,008	
<u>Percentages</u>			
Cannabis	39	42	
Ecstasy	3	2	
Cocaine (2)	11	9	
Heroin	8	6	
Other opiates (3)	5	5	
Benzodiazepines	22	23	
Codeine & Paracetamol	2	3	
Other Drugs (4)	10	9	
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 now also 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.

Table C4. Main drug of misuse of clients who presented for treatment by HSCT: 2008/09 and 2009/10

numbers and percentages

(a) Belfast HSCT

Main Problem Drug ⁽¹⁾	2008/09	2009/10
Cannabis	312	407
Ecstasy	25	22
Cocaine (2)	110	111
Heroin	47	57
Other opiates (3)	27	61
Benzodiazepines	273	360
Codeine & Paracetamol	14	36
Other Drugs (4)	118	130
Total	926	1,184
<u>Percentages</u>		
Cannabis	34	34

Cannabis	34	34
Ecstasy	3	2
Cocaine (2)	12	9
Heroin	5	5
Other opiates (3)	3	5
Benzodiazepines	29	30
Codeine & Paracetamol	2	3
Other Drugs (4)	13	11
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 now also 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.

Table C4. Main drug of misuse (continued)

(b) Northern HSCT

Main Problem Drug (1) (2)	2008/09	2009/10
Cannabis	60	00
	68	68
Ecstasy	8	-
Cocaine (3)	15	10
Heroin	46	27
Other opiates (4)	21	-
Benzodiazepines	13	-
Codeine & Paracetamol	-	0
Other Drugs ⁽⁵⁾	-	9
Total	183	130
<u>Percentages</u>		
Cannabis	37	52
Ecstasy	4	<i>52</i>
Cocaine (3)	•	-
	8	8
Heroin	25	21
Other opiates (4)	11	-
Benzodiazepines	7	-
Codeine & Paracetamol	-	0
Other Drugs ⁽⁵⁾	-	7
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 2008/09 and 2009/10 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 now also 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)

(c) South Eastern HSCT

Main Problem Drug ^{(1) (2)}	2008/09	2009/10
Cannabis	31	88
Ecstasy	-	-
Cocaine (3)	13	18
Heroin	-	11
Other opiates (4)	15	14
Benzodiazepines	79	70
Codeine & Paracetamol	9	-
Other Drugs ⁽⁵⁾	20	27
Total	176	243
<u>Percentages</u>		
Cannabis	18	36
Ecstasy	-	-
Cocaine (3)	7	7
Heroin	-	5
Other opiates (4)	9	6
Benzodiazepines	45	29
Codeine & Paracetamol	5	-
Other Drugs ⁽⁵⁾	11	11
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 2008/09 and 2009/10 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 now also 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)	2008/09	2009/10
Cannabis	44	28
Ecstasy	5	0
Cocaine (3)	9	6
Heroin	18	5
Other opiates (4)	-	-
Benzodiazepines	-	0
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	0	-
Total	89	48
<u>Percentages</u>		
Cannabis	49	58
Ecstasy	6	0
Cocaine (3)	10	13
Heroin	20	10
Other opiates (4)	-	-
Benzodiazepines	-	0
Codeine & Paracetamol	-	-
Other Drugs ⁽⁵⁾	0	-
Total	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 2008/09 and 2009/10 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 now also 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⁾	2008/09	2009/10
Cannabis	144	144
Ecstasy	13	7
Cocaine (2)	20	14
Heroin	8	8
Other opiates (3)	11	17
Benzodiazepines	11	14
Codeine & Paracetamol	9	11
Other Drugs (4)	18	11
Total	234	226
<u>Percentages</u>		
Cannabis	62	64
Ecstasy	6	3
Cocaine (2)	9	6
Heroin	3	4
Other opiates (3)	5	8
Benzodiazepines	5	6
Codeine & Paracetamol	4	5
Other Drugs (4)	8	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⁾ The cocaine drug category includes both cocaine powder and crack cocaine.

⁽³⁾ The 'other opiates' drug category now also 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.

Table C4. Main drug of misuse (continued)

(f) Prisons

Main Problem Drug ^{(1) (2)}	2008/09	2009/10
Cannabis	86	117
Ecstasy	-	-
Cocaine (3)	28	27
Heroin	-	7
Other opiates (4)	-	-
Benzodiazepines	-	-
Codeine & Paracetamol	-	0
Other Drugs ⁽⁵⁾	-	-
Total	147	177
<u>Percentages</u>		
Cannabis	59	66
Ecstasy	-	-
Cocaine (3)	19	15
Heroin	-	4
Other opiates (4)	-	-
Benzodiazepines	-	-
Codeine & Paracetamol	-	0
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 both 2008/09 and 2009/10 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 now also 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: 2008/09 and 2009/10

numbers and percentages

HSCT	2008/09		2009	2009/10	
	Persons who had injected	Persons with known injecting history	Persons who had injected	Persons with known injecting history	
Belfast	52	926	86	1,182	
Northern	62	183	28	129	
South Eastern	14	176	17	242	
Southern	14	89	-	48	
Western	19	234	-	226	
Prison	12	147	-	177	
Total ⁽¹⁾	173	1,755	146	2,004	
Percentages (2)					
Belfast	6	100	7	100	
Northern	34	100	22	100	
South Eastern	8	100	7	100	
Southern	16	100	-	100	
Western	8	100	-	100	
Prison	8	100	-	100	
Total	10	100	7	100	

⁽¹⁾ In 2009/10 there were 4 individuals whose injecting history was not known.

⁽²⁾ The percentage of clients who had ever injected has been based on those whose injecting history was known.

NORTHERN IRELAND DRUG MISUSE D Please read the Guidance Notes before			Enquir	DMD3 ies: 028 90 522520
CLIENT DATA				
First name	ADDRESS			
Last name				
Initials	Post code (if NI)	Elsewh	here (specify)	
Date of birth	DATE OF: Referral	1	Agency Code	
Gender Male Female	First face to face contact /		Name of Agency	
			Reporter	
Age completed full-time education				
REFERRAL DETAILS REASON FOR ATTENDANCE (tick one only)	DEFERDAL BY High one cally)		DDODOSED AOXIO	
Wholly own choice?	REFERRAL BY (tick one only)	Man the section of		N (tick all that apply)
Persuaded by others? Required by others?	Self Family / friend GP	Was the referral musing the Regional	l Initial	Assessment
	Hospital	Assessment Tool (s	Detoxification ubstitute Prescribing
Tick all that apply below: Financial	Social Services Non-statutory agency	Yes No		Prescribing Contract Counselling
	Legal Requirement // chiatrist / mental health services	Not applicable		Family support Rehabilitation
Family/relationship Medical e.g. detoxification	Community Addiction Team Education			Throughcare Mentoring
Psychological Housing	Drug Arrest Referral Scheme Probation		Ec	lucation / Information
Pregnancy Other (specify) Other	Prison / YOC		Advise screening for Other (specify)	HIV / HEP B / HEP C
DRUG USE PROFILE				
Drug used	Age first Frequency	of use (please tick)	Route(s) Prescri	bed? Use in the last
Main problem drug	used Daily Wkly	Mthly Occnal	Yes/No.	/Both 4 Weeks? (Y/N)
Problem drug 2				
Problem drug 3 Problem drug 4				
Problem drug 5				
Problem Alcohol Use	Average units per	week in the last 4 weeks:	Is Alcohol the Main Pro	blem? Yes No
DRUG TREATMENT & OTHER INFORMA	TION			
DRUG TREATMENT HISTORY	INJECTING/SHARING HISTORY		TESTING FOR HIV / HEPAT	TITIS
Ever treated before? Yes No	Ever injected? Yes	No	Please indicate the if the cl the following:	ient has been tested for
If Yes: age first treated?	If Yes: Age first injected?		-	Ever Tested in Never Tested last 12 tested months
	Ever shared? Yes	No 🗀	(a) HIV	inonius
Previous Treatment:	Injected in the last 4 weeks? Yes	No 🗀	(b) Hepatitis B	
Detoxification Substitute Prescribing	If Yes: In the last 4 Weeks has the client:		(c) Hepatitis C	
Prescribing Contract Rehabilitation	Used Needle & Syringe Exchange? Yes	No No	(-/	
Counselling	Always used new equipment? Yes Filtered? Yes	No No	How many injections has the Hepatitis B vaccina	ne client completed of the tion course? (Please tick)
Other (specify)	Bleached? Yes Rotated sites? Yes	No No	0	1 2 3
	Shared equipment? Yes	No No		
CLIENT DETAILS LIVING WITH (tick one only)				
Alone	EMPLOYMENT STATUS (tick one o	In employment	LEGAL STATU	S (tick all that apply) None
With spouse/partner only With spouse/partner and children	On Govt t	raining scheme Student	Cor	Deferred sentence mmunity supervision
With dependant children only With parents		Unemployed ceiving pension		Awaiting sentence Trial pending
With friends Hostel Homeless / Roofless	Other status (specify)	y other Benefit		Arrest referral In Prison / YOC
In Prison/YOC	Has Client worked in last 12 months?	res No	Other (specify)	
Other (specify)	ETHNIC ORIGIN	es No	COMMUNITY BAC	CKGROUND
Are any of the people you		White Chinese	- Jamoini i BAC	Catholic Protestant
live with drug users? Yes No		Irish Traveller Indian	Other (specify)	None
Are you an EU National Yes No		Pakistani Bangladeshi		Do not wish to reply
	E	Black African		
		Black Other		

Send this copy to: PUBLIC HEALTH INFORMATION & RESEARCH BRANCH, ANNEX 2, CASTLE BUILDINGS, BELFAST BT4 3SQ (PHONE: 028 90 522 520)

Statistical Bulletin PHIRB 6/2010

Statistics from the Northern Ireland Drug Misuse Database, 2009/10

Recent and Future Publications from the Public Health Information and Research Branch

Statistical Bulletins

Number	Title	Publication Date
1/2010	Statistics from the Northern Irelands Drug Addicts Index 2009	March 2010
2/2010	Statistics from the Northern Ireland Needle and Syringe Exchange Scheme: 1 April 2009 – 31 March 2010	June 2010
3/2010	Census of Drug and Alcohol Treatment Services in Northern Ireland: 1 st March 2010	June 2010
4/2010	Statistics from the Northern Ireland Substitute Prescribing Database: 31 st March 2010	September 2010
5/2010	Statistics on Smoking Cessation Services in Northern Ireland: 2009/10	September 2010

Research Reports

Title	Publication Date
A Study of Cocaine Use in Northern Ireland 2009	March 2010
Research into the Social costs of Alcohol Misuse in Northern Ireland 2009	June 2010

Copies of these publications can be obtained on-line at: http://www.dhsspsni.gov.uk/index/stats_research/public_health/statistics_and_research-drugs_alcohol-2.htm