

INFORMATION
ANALYSIS
DIRECTORATE



Statistics from the Northern Ireland Substance Misuse Database:

1 April 2016 – 31 March 2017



Department of
Health

An Roinn Sláinte

Máinnstríe O Poustie

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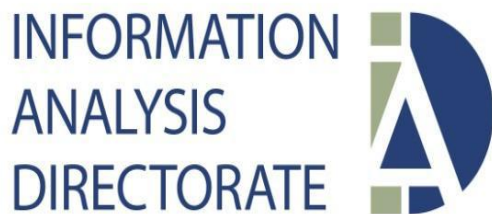
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Statistics and research for the **Department of Health** is provided by **Information Analysis Directorate (IAD)**. It comprises four statistical sections: Hospital Information, Community Information, Public Health Information & Research and Project Support Analysis.

IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.

The statisticians within IAD are out-posted from the Northern Ireland Statistics & Research Agency (NISRA) and our statistics are produced in accordance with the principles and protocols set out in the Code of Practice for Official Statistics.

About Public Health Information and Research Branch

The role of Public Health Information and Research Branch (PHIRB) is to support the public health survey function and to provide support on public health issues within the Department. The head of the branch is the Principal Statistician, Mr. Bill Stewart.

In support of the public health survey function, PHIRB is involved in the commissioning, managing and publishing of results from departmental funded surveys, such as the Health Survey Northern Ireland, All Ireland Drug Prevalence Survey, Young Persons Behaviour & Attitudes Survey, and the Adult Drinking Patterns Survey.

PHIRB provides support to a range of key DoH strategies including Making Life Better, a 10 year cross-departmental public health strategic framework as well as a range of other departmental strategies such as those dealing with suicide, sexual health, breastfeeding, tobacco control and obesity prevention. It also has a key role in supporting the Alcohol and Drug New Strategic Direction 2011-2016, by maintaining and developing key departmental databases such as, the Substance Misuse Database, Impact Measurement Tool and the Census of Drug & Alcohol Treatment Services, which are all used to monitor drug and alcohol misuse and treatments across Northern Ireland.

The branch also houses the NI Health and Social Care Inequalities Monitoring System which covers a range of different health inequality/equality based projects conducted for both the region as well as for more localised area levels.

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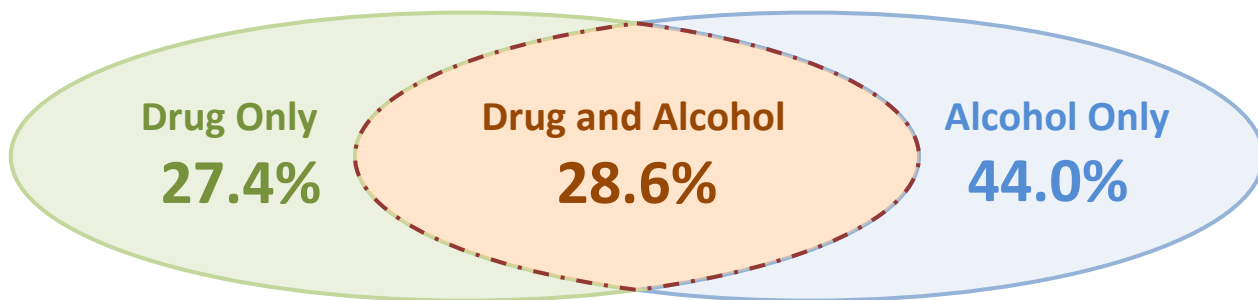
Introduction

This bulletin summarises information on people presenting to services with problem drug and/ or alcohol misuse and relates to the 12-month period ending 31 March 2017. This is the first bulletin reporting on information collected through the Northern Ireland Substance Misuse Database (SMD), which replaced the previous Northern Ireland Drug Misuse Database (DMD).

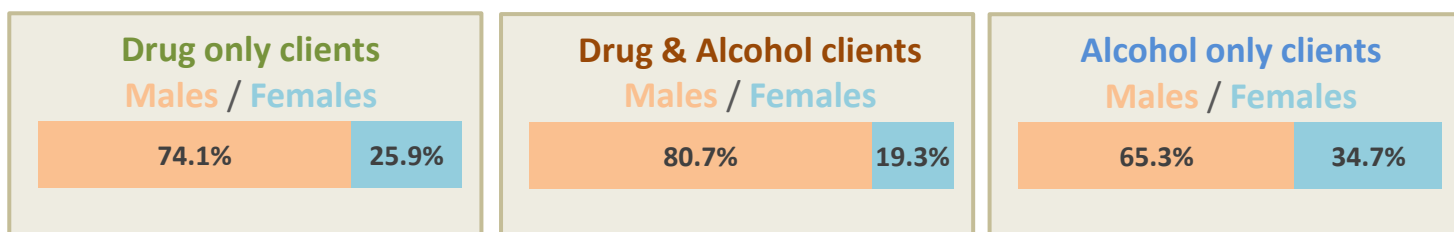
Key points

- In Northern Ireland in 2016/17, a total of 4,368 clients presented to services for problem substance misuse and gave their consent for their details to be included in the SMD.
- More than a quarter of clients (27.4%, 1,195 clients) presented to services for misuse of drugs only; 44.0% (1,923 clients) for problem alcohol use only; and 28.6% (1,250) for both drug and problem alcohol misuse.
- The majority of clients (72.1%) were male; this was true across all client types.
- The most common age group for clients generally was 25-34 years (24.4%), however clients accessing services only for problem alcohol use tended to be in older age-groups, with 45-54 years being the most common (30.9%).
- A third of clients reported living alone (32.7%).
- Less than a fifth of clients (15.6%) indicated that they were currently in employment.
- Cannabis was the most commonly used drug with almost two thirds of clients who use drugs reporting taking it (65.8%), this was followed by Cocaine (36.9%); Benzodiazepines (35.1%); Ecstasy (15.3%) and Heroin (10.9%).
- In comparison with the previous year, the proportion of clients using Cannabis has remained at a similar level, the proportion using Benzodiazepines has fallen from 37.1% to 35.1% whilst an increase was noted for both Cocaine (34.6% to 36.9%) and Ecstasy (10.5% to 15.3%).
- One in ten drug use clients reported ever having injected (10.6%); this is consistent with the 2015/16 finding. Of those who had injected, around one in five (19.4%) reported having shared injecting equipment at some time.
- Of those clients attending for problem alcohol use, two in five (44.0%) indicated daily consumption of alcohol.
- Two in five clients presenting to services for problem alcohol use (41.6%) reported previous treatment for alcohol; a smaller proportion of those presenting for drug use (26.2%) reported having previous treatment for drugs.

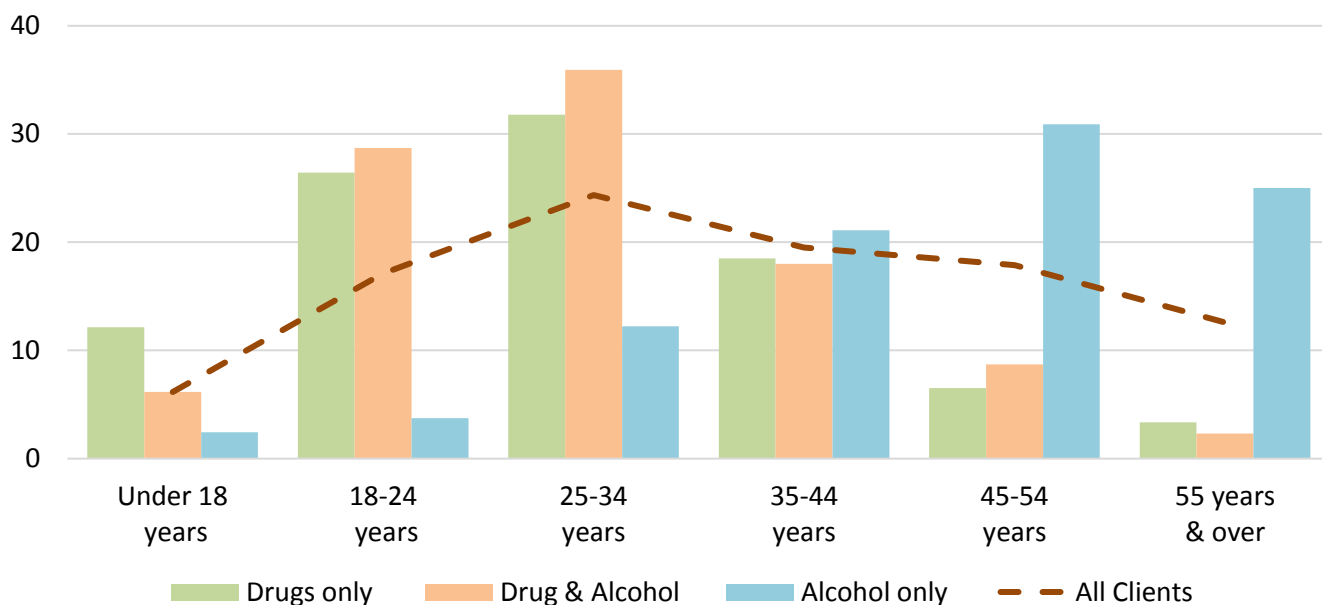
Clients presenting for substance misuse 2016/17



In 2016/17, a total of 4,368 clients presented to services for problem substance misuse for the first time or the first time in six months and gave their consent for their details to be included in the SMD.

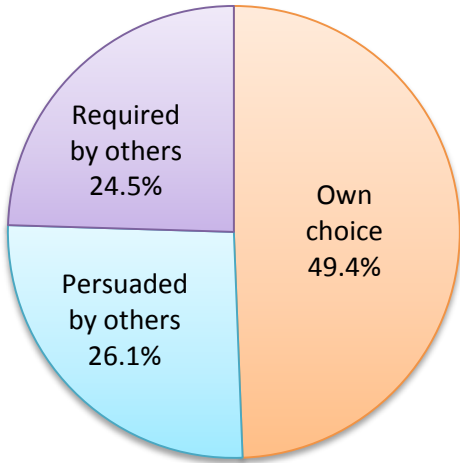


Clients presenting to substance misuse treatment services by age group

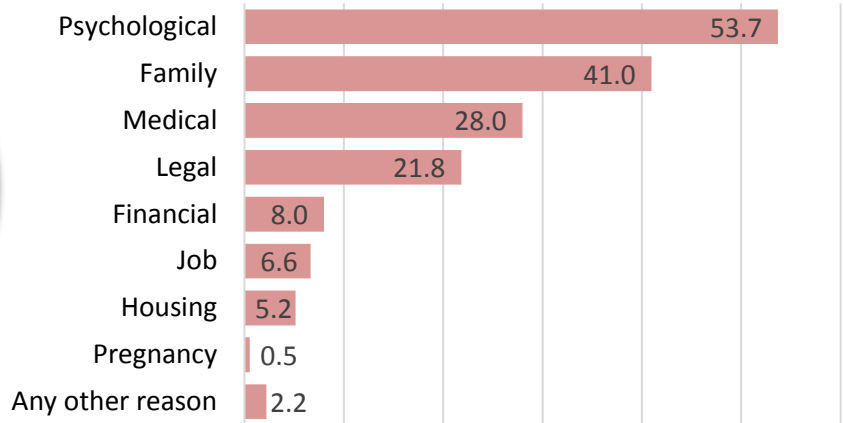


The largest proportion of clients were in the 25-34 years age-group (24.4%); this trend was observed in both those clients accessing services for drug misuse only (31.8%) and for drug & alcohol misuse (35.9%). Clients accessing treatment services only for problem alcohol use tended to be in older age groups, with 45-54 years being the most common (30.9%).

Basis for attendance



Reason for attendance (%)



Living arrangements

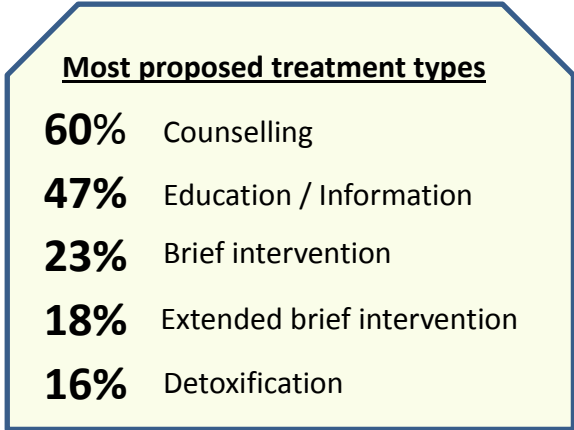
1 in 3 clients living alone (32.7%)

1 in 7 clients in prison or a young offenders centre (14.5%)

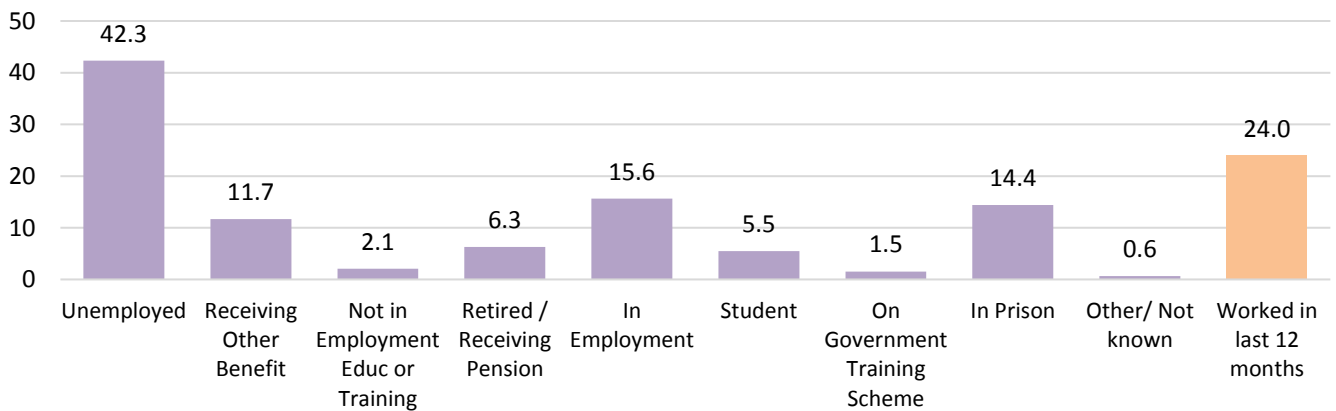
1 in 10 clients living with dependent children (9.5%)

Proposed Treatment

Counselling was the most frequently proposed treatment, being recommended for 6 out of 10 clients (60.2%).



Employment status (%)

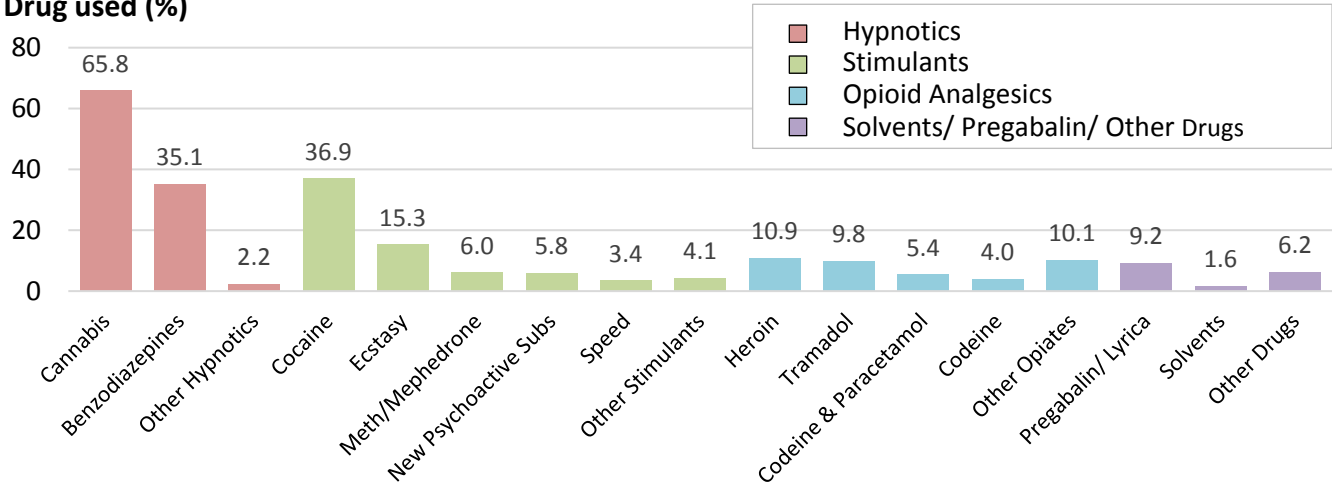


Less than a fifth of clients (15.6%) indicated that they were currently in employment. Under a quarter of clients reported having worked in the last 12 months (24.0%).

Drug Use Profile

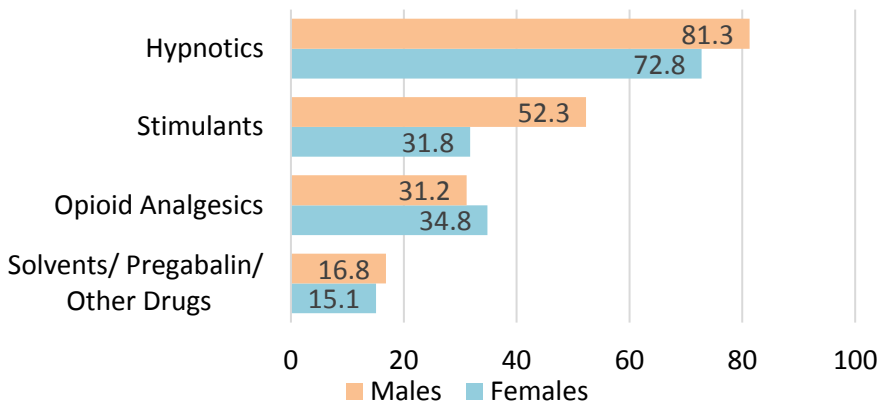
Over half of the 4,368 clients presenting to services for substance misuse (56.0%; 2,445 clients) indicated misuse of one or more drugs. Cannabis was the most common drug included, with almost two-thirds of clients who use drugs (65.8%) reporting taking it. Over a third reported using benzodiazepines (35.1%) and cocaine (36.9%).

Drug used (%)

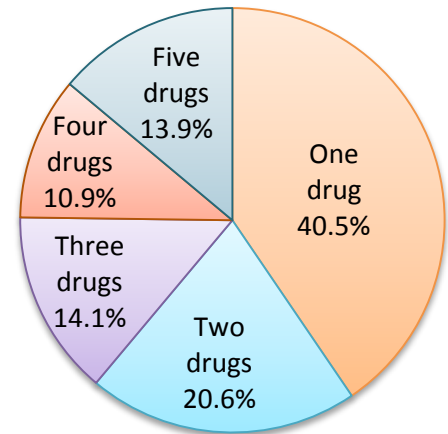


A higher proportion of females using drugs (34.8%) than males (31.2%) reported using opioid analgesics. For all other drug groups (hypnotics; stimulants; solvents/ pregabalin/ other drugs) males had a higher proportion than females.

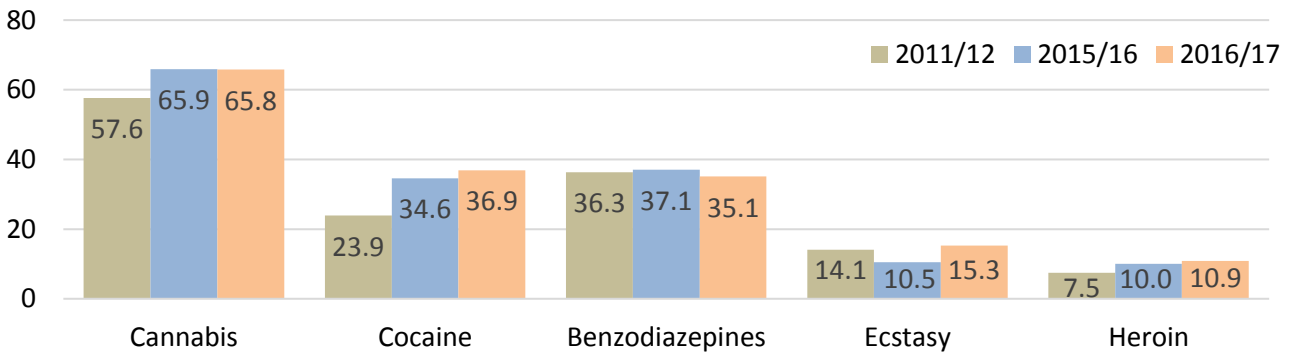
Drug group used by gender



Number of drugs taken





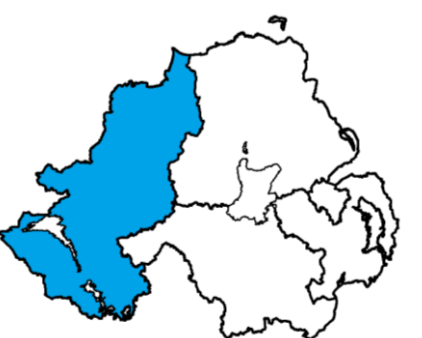
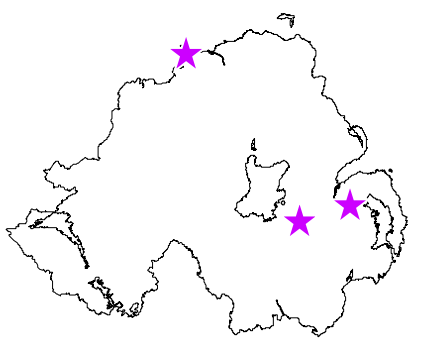


Drug use Trend



In 2016/17 a higher proportion of clients were using cocaine, ecstasy & heroin than in 2015/16 and 2011/12. While similar rates of use were recorded for cannabis in 2016/17 (65.8%) and in 2015/16 (65.9%), both years showed a marked increase since 2011/12 (57.6%). The proportion of clients using benzodiazepines was lower in 2016/17 (35.1%) than in both 2015/16 (37.1%) and 2011/12 (36.3%).

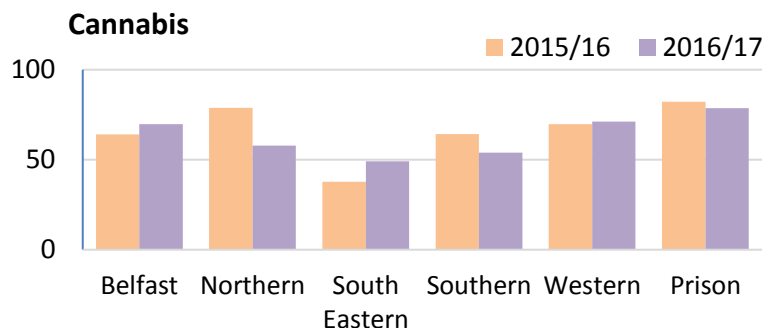
Summary Drug Statistics by HSC Trust

<p>Belfast HSC Trust</p>  <p>Number of clients: 575 (23.5%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 69.7% 2. Cocaine : 33.6% 3. Benzodiazepines: 28.9% 4. Ecstasy: 12.7% 5. Heroin: 9.4% <p>9.6% of clients have injected</p>	<p>Northern HSC Trust</p>  <p>Number of clients: 197 (8.1%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 57.9% 2. Cocaine: 29.9% 3. Benzodiazepines : 26.4% 4. Heroin: 14.7% 5. Pregabalin/Lyrica: 13.2% <p>15.7% of clients have injected</p>	<p>South Eastern HSC Trust</p>  <p>Number of clients: 435 (17.8%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 49.2% 2. Benzodiazepines: 37.0% 3. Cocaine: 21.8% 4. Ecstasy: 11.5% 5. Other Hypnotics: 9.9% <p>9.0% of clients have injected</p>
<p>Southern HSC Trust</p>  <p>Number of clients: 261 (10.7%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 54.0% 2. Cocaine: 30.3% 3. Benzodiazepines: 15.3% 4. Heroin: 14.9% 5. Ecstasy: 10.3% <p>11.9% of clients have injected</p>	<p>Western HSC Trust</p>  <p>Number of clients: 386 (15.8%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 71.2% 2. Cocaine: 29.5% 3. Benzodiazepines: 21.2% 4. Ecstasy: 17.9% 5. New Psychoactive Substances: 12.2% <p>10.6% of clients have injected</p>	<p>HM Prisons (Marked with stars ★)</p>  <p>Number of clients: 591 (24.2%)</p> <p>Most commonly used drugs:</p> <ol style="list-style-type: none"> 1. Cannabis: 78.7% 2. Cocaine: 61.3% 3. Benzodiazepines : 60.4% 4. Ecstasy: 24.0% 5. Tramadol: 22.3%/ Other Opiates: 22.0% <p>10.3% of clients have injected</p>

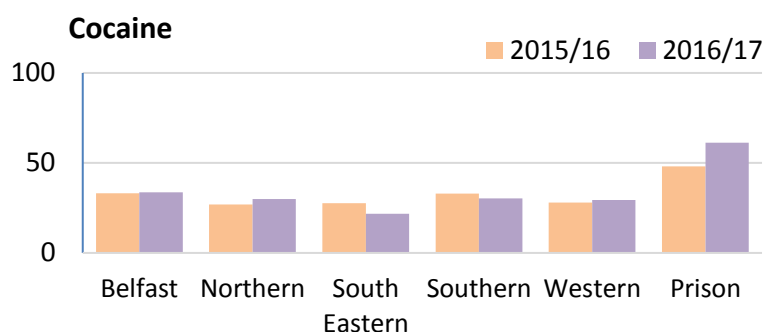
Clients by HSC Trust of service: 2015/16 & 2016/17

Trust area	Belfast	Northern	South Eastern	Southern	Western	Prison	Total
2015/16	659	104	370	143	402	551	2229
2016/17	575	197	435	261	386	591	2445

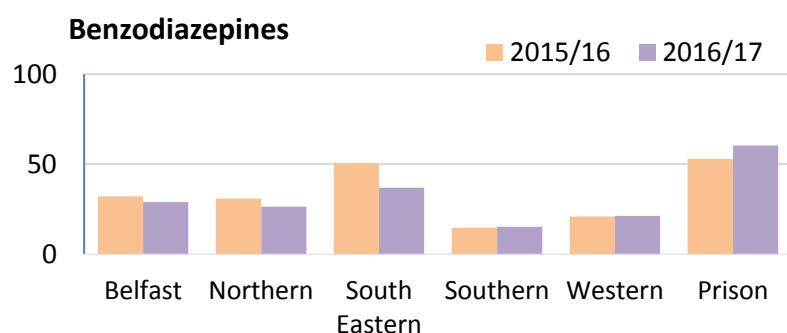
Proportion of clients using drug by HSC Trust of service



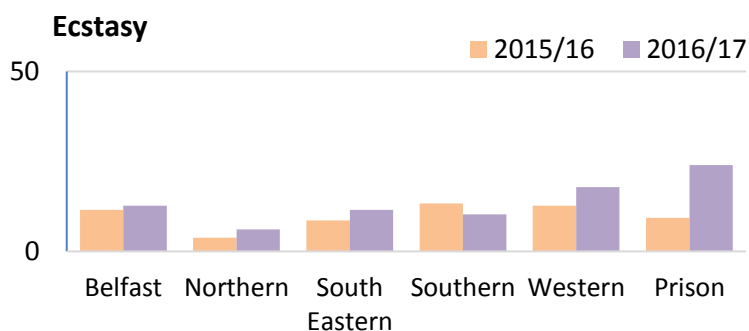
- Services in the Northern and Southern Trusts recorded decreases in the proportion of Cannabis users, whereas Belfast and South Eastern Trusts saw increases.



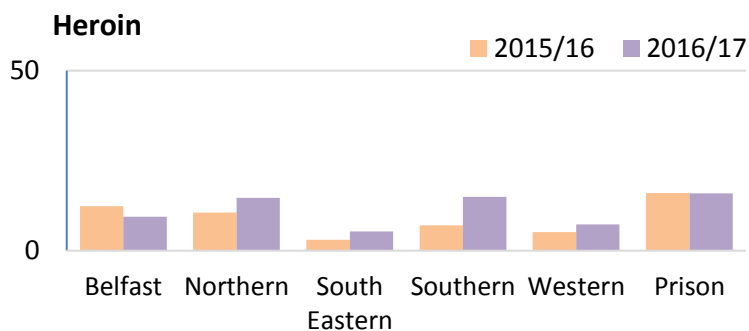
- Compared with 2015/16, the greatest change in the proportion of clients using Cocaine was seen in prison which showed an increase of 13 percentage points; South Eastern and Southern Trusts were the only Trusts to show decreases.



- While Belfast, Northern & South Eastern Trusts all showed a decrease in the proportion of clients using Benzodiazepines, the opposite was true for those clients in prison.



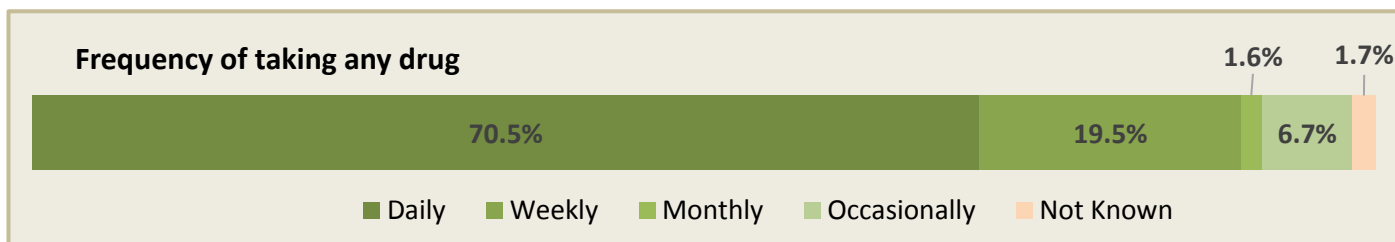
- In 2016/17 services in all HSC Trusts with the exception of the Southern showed a rise in the proportion of clients presenting using Ecstasy. The proportion in prison more than doubled, from 9% to 24%.



- Services in the Southern Trust recorded the highest increase in the proportion of clients using Heroin during 2016/17 compared with the previous year; this was followed by the Northern Trust. Belfast Trust showed the largest year-on-year proportion decrease.

Frequency of use

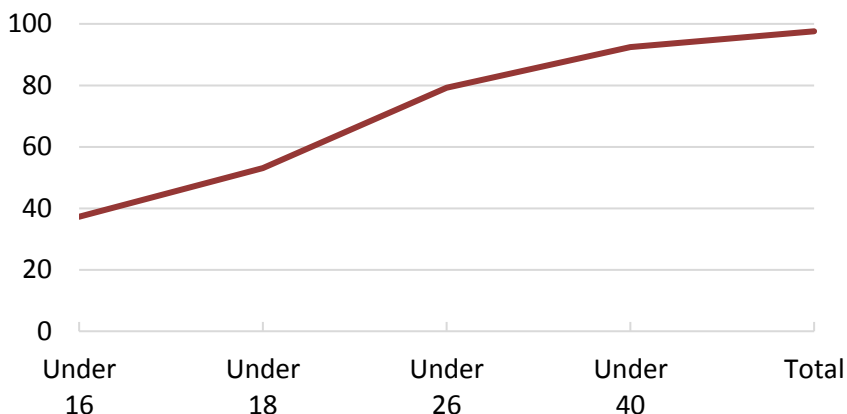
Over two-thirds of clients using drugs (70.5%) reported daily drug use.



Age of first use

Four out of five clients using drugs (79.2%) had first taken their main or only drug aged 25 or under; more than half were aged under 18 years (53.1%).

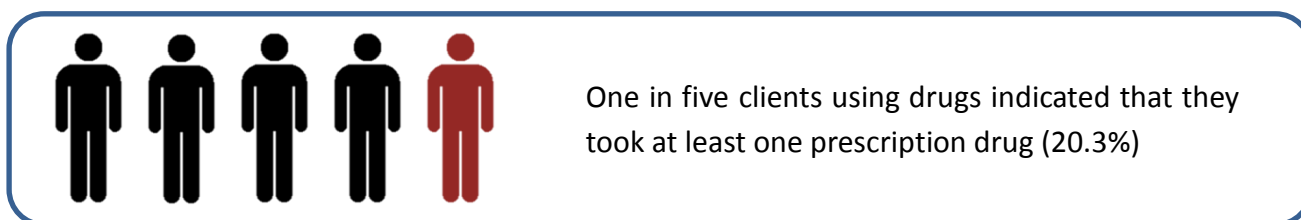
Age first used main drug



Drug treatment history

More than a quarter of clients accessing services for drug use (26.2%) had received previous treatment for drug misuse, with 6 out of 10 of those previously treated having received counselling (58.7%); this was a similar proportion to those with counselling indicated as a proposed treatment. Education/ information was the next most common treatment that had been previously received (45.6%).

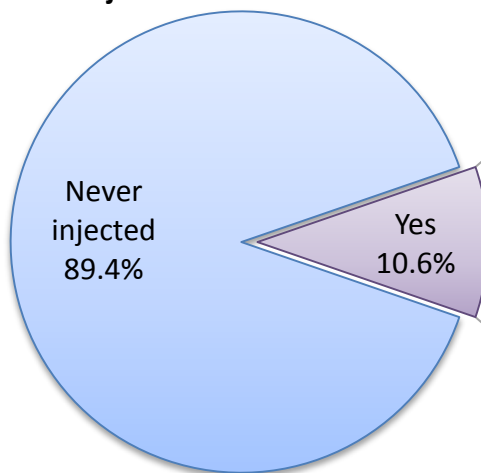
Prescribed drugs



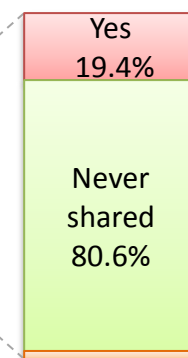
Injecting history

One in ten clients using drugs reported ever having injected (10.6%), of those, around one in five (19.4%) reported having shared injecting equipment at some time. Almost a third of those who injected drugs (30.6%) reported having injected during the last four weeks.

Ever injected?



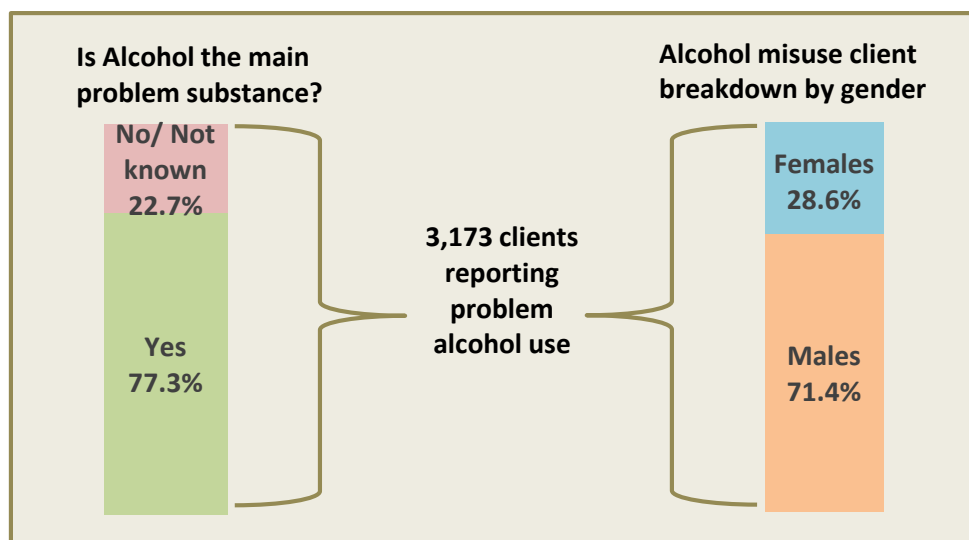
Ever shared equipment?



Not known 0.2%

Problem Alcohol Use Profile

Of the 4,368 clients accessing services for treatment for drugs and alcohol, almost three-quarters (72.6%; 3,173 clients) indicated problem use of alcohol; of these, more than three-quarters (77.3%) indicated that alcohol was their



main problem substance.

Problem alcohol use by gender

Of those clients who indicated problem alcohol use, more than two-thirds were male (71.4%). The proportion of male clients (65.3%) was lower for those clients presenting to services for alcohol misuse only.

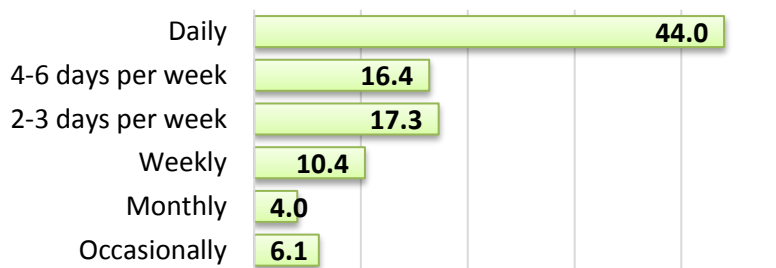
Alcohol treatment history

Two-fifths of clients accessing services for problem alcohol use (41.6%) had received previous treatment for alcohol misuse, with almost half of those previously treated (46.3%) having received counselling. Counselling was also the most frequently proposed treatment indicated. Education/ information (38.4%) and Detox (34.4%) were the next most commonly reported previous treatments.

Frequency of consumption

Of those clients attending for problem alcohol use, two in five (44.0%) indicated daily alcohol consumption, with more than three-quarters consuming more than once a week (77.7%).

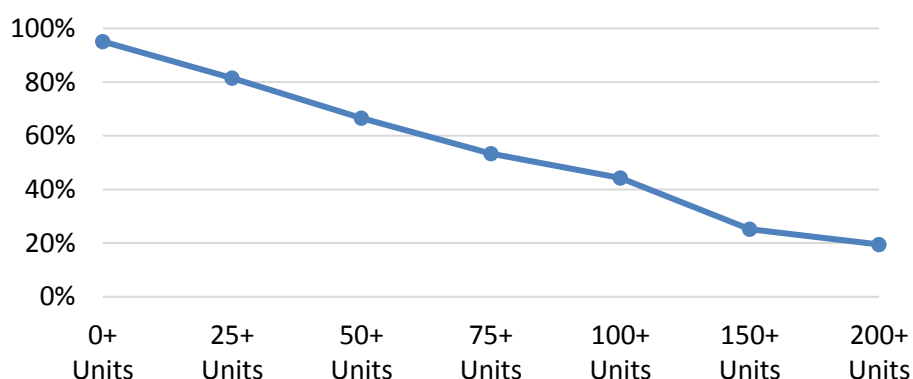
Frequency of alcohol consumption



Drank alcohol in last 4 weeks?



Quantity consumed



One in five clients that had drunk in the last four weeks (19.5%) indicated an average consumption of over 200 units of alcohol per week during the last four weeks; two-thirds indicated an average consumption of more than 50 units per week.

Technical Notes

1. An entry in the Substance Misuse Database is completed for every client who presents at an Agency with a drug and / or alcohol related problem for treatment. Only those clients attending for the very first time or those who have not attended for treatment within the previous six months are recorded on the SMD. This means that a small number of clients may be recorded twice on the SMD within one year. This amounted to 33 clients in 2016/17.
2. Clients must give their consent for their data to be entered on the SMD. Where this is not given, a 'consent withheld,' record is entered into the system without any client details. Where an SMD entry is missing data crucial to analysis, it is removed from the analysis dataset. During 2016/17 consent was withheld, or crucial data required for analyses was not provided in 221 cases.
3. Hypnotic drugs include Cannabis, Benzodiazepines and other Hypnotics. Stimulant drugs include Cocaine, Ecstasy, Methedrone / Mephedrone, New Psychoactive Substances, Speed and other Stimulants. Opioid Analgesics include Tramadol, Heroin, Codeine & Paracetamol, Codeine and other Opiates.
4. To allow for comparability with previous DMD reports, responses from clients attending services for alcohol misuse only have been excluded from responses to questions relating to drug use, including drug history. Similarly, responses from clients attending services for drug use only have been excluded from responses to questions relating to alcohol misuse.
5. Analysis by Health and Social Care Trust is based on the number of clients presenting for a service located in that Trust area. Services available across Trusts vary and this may be reflected in the drugs misused. For example, where special Benzodiazepines Projects exist, there will be greater proportions of clients presenting for treatment for problem Benzodiazepines use (e.g. in the South Eastern Trust area).
6. Pregabalin/ Lyrica was not identified as a separate category until 2016/17; prior to this they would have been included under 'Other Drugs' in previous DMD reports.
7. All percentages are rounded to one decimal place.

It should be noted that findings in this report may differ from those presented in other reports due to the discretionary engagement of individual services in SMD collection.