

drugnet Ireland

Newsletter of the Drug Misuse Research Division

Issue 7, February 2003

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Welcome to Issue 7 of Drugnet Ireland. Drugnet Ireland is the newsletter of the Drug Misuse Research Division of the Health Research Board. The role of this publication is to disseminate information, news and research findings among those involved in the drugs area in Ireland.

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Minister Opens National Documentation Centre on Drug Use



From left: Prof. Hugh Brady, Dr. Hamish Sinclair, Brian Galvin (HRB) and Minister Ahern TD (seated) at the opening of the National Documentation Centre

The National Documentation Centre on Drug Use was opened on December 9 last by Noel Ahern TD, Minister of State with special responsibility for drugs strategy. This state of the art information centre has been established by the Drug Misuse Research Division in the offices of the Health Research Board in Dublin. Representatives from the National Drugs Strategy Team, Local Drug Task Forces, Regional Drug Co-ordinators, the community and voluntary sector, the medical professions, the Drug Court, various government agencies and academia attended the opening.

Opening the centre, Minister Ahern said that, "The National Documentation Centre on Drug Use is a unique information resource and will be a key support for researchers, policy makers and all those interested in investigating the drugs problem in Ireland in the future." Minister Ahern became the first registered user of the documentation centre's web site and used the opportunity to search the Electronic Library for information on anti-drugs work in Ballymun, an area in which he has had a strong personal interest over many years.

The work of the Drug Misuse Research Division was acknowledged by Professor Hugh Brady, Chair of the Health Research Board, who noted that, "The National Documentation Centre builds on the existing resources and expertise of the DMRD and will help it to further develop its role as a provider of vital information on drugs in Ireland."

The National Documentation Centre is now open to the public during office hours. Visitors can avail of a comfortable, well-equipped and wheelchair accessible research facility.



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Background to Establishment of NDC

The National Documentation Centre on Drug Use is a unique information resource and will be a key support for researchers, policy makers and all those interested in investigating the drugs problem in Ireland in the future

The need to establish a collection of research documentation dealing with the issue of drugs in Ireland was recognised in the report of the Interim Advisory Committee on Drugs, which was published in February 2000. The Interim Advisory Committee was established to examine how existing activities inform policy in the drugs area, highlight gaps in information and outline a multi-annual programme of work which would meet existing information needs. The committee recognised that making research documentation available in a central location was essential to ensuring a comprehensive analysis and interpretation of research. Its report emphasised the need to build on existing resources. Consequently the Drugs Misuse Research Division was identified as the most appropriate agent to develop an information resource which would make Irish research and policy related publications available to researchers, policy makers, service providers, community groups, media and the interested public.

Funding was approved by the Department of Tourism, Sport and Recreation in 2000 and the following year the DMRD began work on establishing the documentation centre. In December 2002 the National Documentation Centre's library was opened in the offices of the Health Research Board in Holbrook House and the centre's web site, including the Electronic Library of Irish research literature, was launched.

Through its collaboration with various national and international organisations the DMRD gathers, and makes available, the type of objective, reliable and comparable information essential to the understanding of the drugs issue. The National Drugs Strategy 2001-2008 recognised the work of the DMRD in research and information gathering and designated the Division as the central point to which all research data and information should be channelled. The National Documentation Centre will build on the existing resources of the DMRD and will capitalise on its role as national focal point in the European Information Network on Drugs and Drug Addiction.



From left: Minister Noel Ahern TD, Dr. Ruth Barrington (Chief Executive, HRB) and Prof. Hugh Brady (Chair, HRB) at the opening of the National Documentation Centre

National Documentation Centre's Information Service

The National Documentation Centre on Drug Use is a unique information resource providing Irish researchers with access to electronic and hard copy documentation on all aspects of drug use.



Brian Galvin (HRB), Aileen O'Gorman, Willie Collins, Mairéad Lyons (National Advisory Committee on Drugs) with Minister Ahern TD at the launch of the National Documentation Centre

Electronic Library

A central element of this resource is the Electronic Library of Irish drugs related research, which will be available to all visitors to the National Documentation Centre web site. The Electronic Library contains the full text of research reports, government publications, conference papers, journal articles and other documents dealing with the issue of drug use in Ireland. This material includes articles published in international academic journals as well as unpublished documentation and other material with limited circulation. All documents in the Electronic Library are catalogued on a special database, which contains an annotated bibliographic record for each item included.

Online Resources

In addition to this documentation the web site also contains a catalogue of the National Documentation Centre's collection of books and reports and a news archive which is updated daily. Visitors to the web site will also be able to use online bibliographic databases to help them with literature reviews and to keep abreast of current work in their area. A

National Documentation Centre's Information Service (continued)

special news section is updated daily with summaries of reports from national, local, specialist and international press.

Registered Users

All visitors to the National Documentation Centre's web site are invited to become registered users. Registered users will have access to electronic copies of documents which, because of licensing agreements with copyright holders, are only available to a limited number of users. In addition to being allowed access to this material, registered users can also have remote access to our online bibliographic databases.

Special Library

The National Documentation Centre's special library in Holbrook House contains a collection of books, reports, specialist journals and a range of online bibliographic databases covering the social sciences, psychology, medicine and addiction-related topics. Visitors will be able to use all of these information resources in a comfortable and well-equipped setting. National Documentation Centre staff will be available to help with queries.

The documentation centre is open from 9.30 AM to 4.45 PM, Monday to Friday.

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A co-ordinated approach to tackling the alcohol issue

In late January the government approved the establishment of an Inter-Departmental Group to co-ordinate responses to the recommendations contained in the Interim Report of the Strategic Task Force on Alcohol.

In elaborating how the Department of Health and Children will work with other government departments and agencies to progress the Task Force recommendations, the Minister for Health, Micheál Martin, TD, endorsed the view, already expressed in the National Health Promotion Strategy 2000-2005, that there is a need for greater inter-sectoral and multi-disciplinary approaches to address the impact which social, economic and environmental factors have on the physical, mental and social well-being of individuals and communities. He stated: 'While we can address individual topics such as alcohol, we need this approach to target the topics effectively.'

To prevent and reduce alcohol-related harm in Ireland, the Strategic Task Force on Alcohol, in its Interim Report, identified five priority objectives:

- To reduce total alcohol consumption at the population level to the EU average
- To reduce harmful consumption of alcohol at an individual level, especially binge drinking and regular heavy drinking
- To provide greater protection for children and adolescents from the pressure to drink

- To prevent and reduce the risk of alcohol-related harm on the roads
- To prevent and reduce the risk of alcohol-related harm in the drinking environment.

In recent months the Minister for Health, Micheál Martin, TD, has launched a series of new initiatives that will contribute to the achievement of these objectives.

- On 5 February the Minister launched Guidelines for the Management of Alcohol Problems in a General Hospital. They will help to increase awareness of alcohol problems, improve detection and provide straightforward instructions on how to manage alcohol problems in a general hospital setting. He noted that the guidelines were based on a pilot study at the Mater Misericordiae Hospital in Dublin, in which it was found that approximately 1 in 4 accident and emergency attendances met diagnostic criteria for alcohol abuse or dependency. The study is to be extended for a further year and conducted in four other major hospitals nationwide.
- In late January a committee was set up in the Department of Health and Children to draw up proposals specifically aimed at restricting alcohol-related advertising targeted at young people. The committee will look at placing health warnings on all drink advertising as well as banning low-cost selling by means such as discounts and vouchers. Regarding the contents of alcohol advertising, the

Guidelines were based on a pilot study at the Mater Misericordiae Hospital in Dublin, in which it was found that approximately 1 in 4 accident and emergency attendances met diagnostic criteria for alcohol abuse or dependency

A co-ordinated approach to tackling the alcohol issue (continued)

committee will consider proposals to ban advertisements that portray drinking as a challenge or associate it with social, sexual or sporting success.

- In parallel with the Department of Health committee, the All-Party Joint Oireachtas Committee on Health is reported to be developing a sub-committee to look specifically at the alcohol issue. *Medicine Weekly* (5 February 2003) reported the Committee Chairman, Batt O'Keefe, TD, as saying that the sub-committee's aim is to produce a report concentrating on the impact of the drinks industry and the education system on underage drinking. Mr O'Keefe expressed the view that the

Oireachtas Committee had its own role to play in providing an independent analysis of the problem.

- Finally, last November the Minister launched the third phase of the National Alcohol Awareness Campaign. This phase, called 'Think before You Drink – Less is More', highlights the growing problem of excessive alcohol consumption or 'binge drinking' in the 18–29 year age group. Previous phases of the campaign, which has been running since February 2000, targeted under-age drinkers, and those who buy/supply/sell alcohol to under-age drinkers.

Benzodiazepine – Report and Good Practice Guidelines Published

In December 2002 the Minister for Health and Children, Micheál Martin, TD, launched the Report of the Benzodiazepine Committee and its Good Practice Guidelines for Clinicians.

The Committee was set up by the Minister in June 2000 to 'examine the current prescribing and use of benzodiazepines; to consider recommendations on good prescribing and dispensing practice, paying particular attention to the management of drug misusers'.

The Report and Guidelines envisage the continued use of benzodiazepines as versatile and valuable drugs in clinical medicine, for example in treating insomnia, epilepsy, muscle spasms, some forms of anxiety, panic and pre-surgical stress. They anticipate that fostering rational prescribing practices for these drugs will reduce the prevalence of inappropriate use, the number of patients who become dependent on them, and consumption by known opiate users.

The Report makes 24 recommendations including recommendations that monitoring systems be put in place to inform general practitioners of their prescribing patterns and to allow appropriate action where there is a suspicion of irresponsible prescribing. The Report signals the need for greater awareness among professionals (including all hospital and institutional healthcare providers and pharmacists) and the general public about the use of benzodiazepines and makes a number of recommendations in this area. It also recommends ongoing evaluation and monitoring of the use and misuse of benzodiazepines in Ireland, particularly in the private sector, among older people and drug misusers attending drug treatment clinics.

The Committee recommended that, in implementing the Good Practice Guidelines for Clinicians, practitioners should critically and urgently review their current level of benzodiazepine prescribing, regard the prescription of benzodiazepine to opioid users (and other drug users) as an exceptional rather than a routine clinical decision, and routinely advise patients dependent on opioids that the concurrent taking of benzodiazepines can greatly increase the risk of overdose.

In noting that Action 41 of the National Drugs Strategy directs the Department of Health and Children to implement the recommendations of the Benzodiazepine Committee, the Minister for Health and Children said at the launch: 'The co-operation of key players from a wide spectrum of sectors will of course be pivotal in helping to realise this objective. I am confident that this co-operation together with a heightened public awareness of the risks inherent in inappropriate use will result in a reduction in misuse and dependency in this country.'

The Report of the Benzodiazepine Committee and the Good Practice Guidelines for Clinicians (August 2002) are available electronically at the Department of Health and Children web site www.doh.ie

Accurate recording of drug-related deaths in Ireland needed

The Citywide Family Support Network has called on the Departments of Health and Children and Justice, Equality and Law Reform to agree on the setting up of an index of drug-related deaths in Ireland.

Speaking at the fourth Service of Commemoration and Hope, held on 1 February in Dublin, to remember those who have died from drug-related causes, Marian Davitt, a member of the Network Steering Group, said, 'If we are not aware of the accurate number of deaths as a result of drug use we cannot be fully aware of the devastation caused to families and communities by these deaths, and, of course, we cannot develop correct policies unless we have correct information.'

The need for accurate recording of drug-related deaths has already been signaled at European level. The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) has identified drug-related deaths as one of five key indicators of drug misuse. These indicators are to be implemented in each member state and over time will provide information on trends and patterns of drug misuse in Europe.

Action 67 of the National Drugs Strategy 2001-2008 calls for the development of an accurate mechanism for recording the number of drug-related deaths in Ireland. Overall responsibility for this action rests with the Coroners Service and the Central Statistics Office.

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Merchants Quay Ireland reports increase in use of service

Launched by Vincent Browne in December 2002, Merchants Quay Ireland's (MQI's) annual report for 2001 shows that the numbers of drug users attending MQI's services over the year increased by 15%, from 3,818 to 4,401, with almost 700 new drug users attending over the course of the year. The numbers using MQI's homeless services increased, from 1,740 to 1,828. The level of cross-over in services also grew, with a pronounced increase in the numbers of drug users that were homeless and living on the streets.

While acknowledging the real improvements in services for homeless people and drug users during the boom years, the report states, 'we deeply regret

that the Government did not take the opportunity to eliminate the poverty which drives these problems'. Moreover, MQI is critical of the way the government is handling the economic downturn, with a moratorium placed on the development of new initiatives for drug users. The report argues, 'It is at this very juncture that we need to continue to invest in the National Drugs Strategy and the Homeless Strategy if we are not to be overwhelmed by these problems in the future.'

Copies of MQI's Annual Review 2001 may be obtained from Merchants Quay Ireland, 4 Merchants Quay, Dublin 8.

Customs Drugs Watch Scheme

A new Customs Drugs Watch scheme was launched by Revenue Commissioner Josephine Feehily on the 16 January 2003. The programme encourages members of the public, particularly those living in coastal areas, and those involved in maritime, transport or travel activities to assist Customs in tackling drug smuggling by reporting suspicious or unusual behaviour. A set of information booklets, calling cards and posters are being distributed by customs officers throughout the country to raise awareness of the scheme and to provide guidelines to the public about the operation of the scheme.

The Drugs Watch scheme, which has its origins in Australia, is intended to build upon the existing

Memorandum of Understanding Programmes, 41 of which already exist to foster cooperation between Customs and the international trade community to combat drug trafficking. The Drugs Watch scheme is designed primarily to enhance cooperation between customs and the public.

Highlighting the particular need for such a scheme in Ireland, Commissioner Feehily pointed out that Ireland, with a coastline of 2800 kilometres, was the "most remote and westerly country in the EU located along the shipping route from South America and the Azores to Northern Europe and also en route from Morocco to Northern Europe". With a "proliferation of isolated landing points, remote piers

Customs Drugs Watch Scheme (continued)

and coves and secluded landing areas", there was, she said, "clear evidence from previous seizures that Ireland is used as a transit route for smuggling drugs...into other EU member states".

Drugs Watch requests members of the public to report any abnormal or unusual activities that come to their attention by phoning its confidential telephone number at 1800 295 295.

British-Irish Council Misuse of Drugs Sectoral Group Meets in Dublin

Minister for Community Affairs and the National Drugs Strategy, Noel Ahern TD, hosted a meeting of representatives from the British-Irish Council in Dublin on the 7 February 2003. British-Irish Council members reviewed progress in the work programme agreed at the meeting of Ministers in March 2002. The UK presented a report on the British-Irish Council conference in London in July 2002 on the 'Positive Futures' initiative. This is a scheme that aims to provide sporting programmes for young people at risk of involvement in crime and drug and drug misuse.

Delegates were also updated on the conference hosted in Scotland in December 2002 on educational, training and employment opportunities for recovering drug users.

The Isle of Man reviewed its conference on Drug and Alcohol Strategies – Progress in Action, which took place in Douglas in October 2002. This focussed on a range of topics including education,

prevention, treatment and criminal justice matters. The Dublin meeting agreed a programme of work for the coming year. The Irish Government proposes to hold a conference on awareness campaigns in Dublin in June 2003. Guernsey proposes to host a conference entitled Emerging Trends in Drugs Use and Treatment Modalities on 18/19 September 2003. The British Government also plans to host a conference later this year on the theme of working with businesses to combat drug misuse. It was agreed that Ministers would meet again in early 2004 to review progress.

The British-Irish Council was created under the Agreement reached in the Multi-Party Negotiations in Belfast in 1998 to promote positive, practical relationships among its members, which included the British and Irish governments, and the devolved administrations of Northern Ireland, Scotland and Wales, and Jersey, Guernsey and the Isle of Man. For further information, see www.britishirishcouncil.org

Drug court to be extended

On 14 February the Minister for Justice, Equality and Law Reform, Michael McDowell, TD, approved the publication by the Courts Service Board of the report on the Final Evaluation of the Pilot Drug Court.

The Pilot Drug Court programme was launched in the Dublin district court on 9 January 2001. It was set up with the objective of providing court-supervised treatment programmes for less serious drug-related offences.

Although the Drug Court is modelled on similar initiatives in other jurisdictions, the report highlights the inclusion of an education co-ordinator and community welfare officer in the Irish model. This multi-disciplinary approach reflects, according to the report, the adoption of a more holistic approach than is evident elsewhere.

The evaluation, carried out by consultants Farrell Grant Sparks, considered the procedural and administrative aspects of the initiative and sought to ascertain whether or not the Drug Court succeeded in reducing recidivism and substance dependency in a more cost-effective manner than traditional criminal justice approaches. The absence of a

suitable control group with which to compare the Drug Court participants, the short time period of the evaluation, and the low number of referrals were cited as weaknesses of the evaluation.

Of the 61 offenders that were referred to the Drug Court, 37 were deemed suitable to enter the programme. The participants were primarily male, in their late 20s and unemployed with a low level of educational achievement. Between them, 35 of the participants had a total of 872 prior convictions and the majority had a high risk of reconviction. The main drug of addiction of participants was heroin. Overall, participants were using an average of 5 different illicit drugs at the time of entering the programme.

The main findings indicated that although a number of participants continued to offend while in the programme, the rate at which participants were arrested, charged and had their bail revoked declined the longer they were in the programme. In terms of substance abuse, the percentage of those testing negative for opiates increased significantly as the programme progressed, from 42 per cent over the first 3 months to 82 per cent for the last 3 months.

Drug court to be extended (continued)

Although no graduations had been anticipated during the pilot period, compliance had improved significantly and 11 of the 37 participants (30 per cent) were clean of all illicit drugs by the end of the evaluation period.

All of those interviewed as part of the evaluation believed that there continued to be a strong rationale for the continuation of the Drug Court. However, the low number of referrals and the absence of an agreed mission statement and clear identity for the Drug Court were identified as issues that needed to be addressed.

The most significant obstacle to progress identified by the evaluation was the difficulty encountered in providing participants with access to full and timely treatment services. According to the report, 'Many stakeholders believed that the Drug Court cannot continue to operate without access to full treatment within a reasonable time period'. A marked decline in offending behaviour and an increase in

compliance as the pilot progressed suggest, according to the report, 'that the Drug Court will have the desired impact if it can succeed in retaining participants over the early months'.

Research limitations of the study prevented an adequate examination of the programme's economic benefits. However, the report identified a number of areas where the efficiency and effectiveness, and ultimately the economics, of the programme could be refined. Furthermore, the authors concluded, should the Drug Court reduce recidivism, significant long-term savings to the criminal justice system would be made.

The Minister has supported the recommendation in the report that the Drug Court be extended to the full Dublin 7 catchment area.

An electronic copy of the Final Evaluation of the Pilot Drug Court is available on the Department of Justice, Equality and Law Reform website at www.justice.ie

EDDRA column

Interventions seeking to reduce demand for illicit drugs have become a key part of policy developments in this area throughout the European Union (EU). The EDDRA database includes data on some of these interventions from the 15 member EU states. These data are collected across the EU using a standardised questionnaire that has been designed to elicit information on specific characteristics of interventions. Such characteristics include target group, substances addressed, setting of intervention, specific objectives and the theoretical basis for believing that such objectives can be effective. In addition, data are collected on the evaluation of projects covering process and outcome/impact evaluation stages. Currently there

are 359 projects on the EDDRA database from 15 different countries that span from childhood interventions and school programmes through in-patient treatment and syringe exchange programmes. Initially the database was designed to be a consultative resource for project planners/designers, existing project personnel, policy makers and researchers/evaluators. Recently, the European Monitoring Centre for Drug and Drug Addiction (EMCDDA) has used the database to conduct an analysis of projects in the EDDRA database in five specific domains:

- Projects located in the party-setting, targeting 'recreational users' of synthetic drugs
- Treatment based interventions related to illegal drugs

Staff of the Drug Misuse Research Division

Back (l to r): Fionnola Kelly, Aonghus Collins, Martin Keane, Hamish Sinclair, Brian Galvin, Johnny Connolly, Joan Moore, Louise Farragher.

Front (l to r): Brigid Pike, Jean Long, Tracy Kelleher, Mary Dunne



EDDRA column (continued)

- Criminal justice-based drug demand and harm reduction programmes
 - Gender-specific approaches: women and girls
 - School based prevention programmes in the EU
- This analysis has enabled the EMCDDA to prepare a number of papers documenting key characteristics of interventions in the each of the domains. This exercise is designed to provide key personnel in the demand reduction area across the EU with an insight into the specifics of operating interventions.

These papers are available on the EDDRA database at <http://eddra.emcdda.eu.int:8008/eddra>.

For further information on this analysis or any query related to EDDRA please contact Martin Keane, EDDRA Manager, Drug Misuse Research Division, Health Research Board, Holbrooke House, Holles St. Dublin 2 Telephone: 01 6761176 x 169 or email: mkeane@hrb.ie

Mary O'Brien

Mary O'Brien retired from the Health Research Board in December 2002. Mary joined the organisation in 1973 and initially worked in the field of mental health research. However, it will be for her contribution to understanding drug misuse in Ireland and in Europe that she will be best remembered. Mary played a key role in developing the National Drug Treatment Reporting System (NDTRS). The NDTRS made available, for the first time, reliable and anonymous data on the number and characteristics of people who are treated for problem drug use. The NDTRS was established in the greater Dublin area in 1990 and was extended nation-wide in 1995. The information it has provided has proved invaluable for national policy on drug misuse and for the planning and delivery of services.

Mary's contribution to building the database, interpreting the data and reporting on trends was

outstanding. Mary also made an important contribution to building European understanding of drug misuse through her involvement in the European Monitoring Centre for Drugs and Drug Addiction and in the Pompidou Group. Her most recent publications (with her colleagues) included A Collection of Papers on Drug Issues in Ireland (2001) and Overview of Drug Issues in Ireland 2000: A Resource Document (2001). 'Children attending addiction treatment services in Dublin, 1990-1999', a paper Mary co-wrote with Dr. Bobby Smyth, will be published later this year in the journal European Addiction Research.

Mary was a good colleague and friend to many in the HRB and the organisations with which we interact. We wish her every best wish on her retirement and success with the projects she has in hand.

Dr. Ruth Barrington, Chief Executive, HRB

In Ireland, the combined phenomena of the recent rise in immigration, sensitivity around ethnic monitoring, and the lack of data on drug use amongst BME groups clearly need to be addressed

Black and minority ethnic groups and drugs

The Centre for Ethnicity and Health, University of Central Lancashire, UK, recently completed a research project on behalf of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) into drug use, its consequences and correlates among black and ethnic minority (BME) groups in the EU and Norway.

Conducted between December 2001 and October 2002, the research project surveyed key informants in each country, including Ireland. Data from informants were collated as profiles for each country and a thematic analysis conducted and a two-volume report on the research project has been completed.

A key finding is that, across the EU, drug use among BME groups has been given little attention. As a

result the prevalence of drug use among these groups is difficult to assess. However, the report argues that consistent, co-ordinated ethnic monitoring, based on a common set of classifications, is a reliable instrument to measure drug service use and, importantly, non-use, by drug users.

The difficulties faced by BME groups include a lack of cultural sensitivity by the service, a distrust of confidentiality, communication problems, a lack of awareness of drugs and drug services, the stigma surrounding drug use within their own communities, and the failure of drug services to target BME drug users. The report argues traditional needs assessment processes, which neither involve nor benefit the communities whose needs are being assessed, are inappropriate to the study of this area.

Black and minority ethnic groups and drugs (continued)

Future Directions in Ireland

Volume Two of the report includes the country profiles, which were synthesised to give the overview of drug use among BME populations throughout the EU and Norway and issues for future research. It is not intended that these profiles be used as 'stand-alone' reports of drug use among BME communities in individual countries. However, the individual country profiles include remarks about future directions that might be taken in relation to BME groups and the drugs issue in the specific country. In relation to Ireland, the report states:

'In Ireland, the combined phenomena of the recent rise in immigration, sensitivity around ethnic monitoring, and the lack of data on drug use amongst BME groups clearly need to be addressed, in order that the knowledge base is expanded and the appropriate responses can be developed. Although there is some [data] from drug treatment statistics, they cannot give the whole picture, and needs assessments – using both qualitative and quantitative research methods – should be

conducted. These should include an examination of specific BME groups – including Travellers – in relation to the link between social exclusion and drug use, and to barriers to drug service access and uptake.'

To obtain an electronic version of the report, please contact jane@drugscope.org.uk

Editor's Note: The last issue of Drugnet Ireland (Issue 6, page 6) reported that the National Advisory Committee on Drugs (NACD) has initiated research into drug misuse among Travellers, as well as other at-risk groups including the homeless, prostitutes, and early school leavers. Following a literature review, and consultation with relevant agencies, representative groups and others, the NACD is preparing to commission research on the Traveller population, using a method called RAR (Rapid Assessment Response), which allows for information to be channelled to inform service development for the betterment of people's lives.

NDTRS National Drug Treatment Reporting System

Staff at the Drug Misuse Research Division would like to take this opportunity to acknowledge the work done by all those who participate in the NDTRS.



We are aware of the considerable effort involved in collecting the data. We very much appreciate the willing support and co-operation and above all the cheerfulness with which people participate.

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From Drugnet Europe

Experts discuss supervised consumption facilities

*Cited from Dagmar Hedrich
(November – December 2002)*

In the context of an EMCDDA project on drug consumption rooms, nine experts from Spain, the Netherlands, Switzerland and Australia met at the EMCDDA on 23 and 24 September [2002] to discuss the topic from the perspectives of the service manager, service user, researcher and policy-maker. The meeting showed that the countries had similar objectives. On the one hand, they aim to reduce the negative health consequences of drug use (infectious diseases, mortality and morbidity due to overdose and other adverse reactions) and to improve drug users' access to health services. On the other hand, they aim to reduce public nuisance associated with street-based injecting. Despite this homogeneity, significant differences exist with regard to the objectives that are prioritised in the respective local contexts, the way the facilities are implemented in practice and the conditions under which they operate.

Overdose prevention and management

Cited from Dagmar Hedrich (January-February 2003)

Between 1991 and 2000, some 7000 to 8000 acute drug-related deaths were recorded per annum in the EU Member States and Norway. The victims are mostly young people in their 20s or 30s, with most

deaths occurring through accidental overdoses. Most are preventable. Some European countries are developing national and local policies to reduce the number of drug overdoses. Interventions to prevent overdoses and improve overdose management are also starting to be applied more systematically. In April 2002, the EMCDDA embarked on a project to gain an overview of these current approaches and to identify the most promising. As a result of a meeting of experts from 10 countries at the EMCDDA from 24–25 October [2002] to discuss work in this field, a new data collection tool on overdose prevention policies and interventions was developed.

Illegal drug use and addiction in popular cinema (1995-2001)

*Cited from Guido Noecker BZgA
(January – February 2003)*

Cinema plays a central role in the leisure time of young people and here they are regularly faced with images of drugs and drug addiction. The Cologne-based German Bundeszentrale für gesundheitliche Aufklärung (BZgA) has recently concluded a preliminary study into how drugs are conveyed in mainstream international movies. One of the main conclusions of the study is that the use of film in drug prevention should be carefully analysed and prepared and combined with the opportunity for personal reflection and discussion.

Conferences

Mentor Conference

Mentor, the international NGO focusing on the prevention of drug misuse among young people, held a conference in London on January 14 on the theme 'Evaluation: the Strongest Link - Drug Demand Reduction for Children and Young People'. The conference, held at the Royal Institution, covered various aspects of illicit drug use and interventions to reduce demand for these drugs, particularly among children and young people.

Baroness Susan Greenfield, Professor of Pharmacology at Oxford and Director of the Royal Institution put forward the 'scientists' view' of illicit drug use. Professor Greenfield vigorously challenged the contention that cannabis use, particularly among young people, is harmless. She argued that, because young people's brains are developing into their late teens-early twenties, the use of cannabis during adolescence can adversely affect the developmental process.

Professor Virginia Berridge, of the London School of Hygiene and Tropical Medicine, spoke on the historical dimensions of illicit drug use in the UK, particularly

addressing the question of why levels of drug use can increase and also decrease. According to Professor Berridge one of the historical lessons that can be learned is that improved access to health care can reduce the need to 'self-medicate' with illicit drugs.

Professor Ken C. Winters, Department of Psychiatry at the University of Minnesota, argued that since drug abuse is a voluntary behaviour it is also preventable. Professor Winters referred to the short-term effects that 'successful' drug prevention programmes had been shown to have on participants. Delaying the onset of alcohol/drug use and smoking, reducing the incidence of binge drinking and the associated harm of drug abuse and reducing risk factors, while increasing protective factors in young people's lives, were some of the effects shown in evaluations of programmes.

For further information on this conference, contact Martin Keane, Drug Misuse Research Division, Health Research Board. Phone 01 6761176 x 169 or email: mkeane@hrb.ie.

Recent Publications

Drug treatment services for young people: A research review

Burniston S, Dodd M, Elliott L, Orr L, Watson L *Effective Interventions Unit, Scottish Executive, Drug Misuse Research Programme 2002*

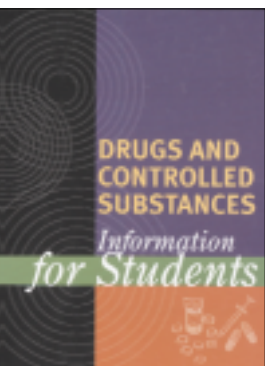
This review was carried out by a consultancy company in partnership with Dundee University and focused on children under 16, with some consideration of services for 16 to 18 year olds. The aim was to identify significant gaps in the services and to highlight specific examples of promising and innovative practice. The study combined three elements: a mapping survey of current provision based on information provided by 22 Drug Action Teams; in-depth case studies of eight selected service providers, including interviews with young service users; an appraisal of evidence from international research literature on the effectiveness of treatment and care services combined with a review of the current statutory framework affecting the provision or take up of drug services for young people.

The mapping survey found that current provision was unevenly distributed, varied widely in degrees of specialisation, and displayed little consistency of approach or exchange of effective practices between services. International research literature identified five effective interventions, of which only one, counselling, featured prominently in Scottish services. The emphasis in international literature on multi-agency interventions complemented the finding that children face a complex of needs, not all drug-related.

Drugs and controlled substances: Information for students

(Eds.) Blachford, SL, Krapp K *Thomson Gale 2003 ISBN: 0 7876 6264*

This large reference work provides information about commonly abused drugs and addictive substances. The book is aimed at students at second level and its coverage and accessible style of presentation make it appropriate for investigative assignments and project work. Each entry includes an explanation of the key terms used that may be unfamiliar to students. The scope of the entries covers illegal drugs, legal addictive drugs and other substances, herbal drugs, and commonly abused classes of prescription and over-the-counter drugs. The information is highlighted by statistics where appropriate. Sidebars provide additional information on the legal, historical or social aspects of a particular drug or controlled substance. Definitions for medical or drug-related terminology are given, and variant names for drugs are featured.



Entries are arranged alphabetically and give a comprehensive range of information in relation to each drug listed, including: official names, street names, overview (including historical background), mental and physiological effects, reactions with other drugs, treatment and rehabilitation, and personal, social and legal consequences. Common misconceptions about drug use are addressed and issues in the current debate over drug use are discussed. The entries give bibliographic citations of print and electronic sources of further information. Photographs, illustrations and charts complement the text. Other features include a chronology of key events in the history of drug and controlled substance use and abuse, a glossary of drug-related terms, and an appendix detailing the contents of the US Controlled Substances Act.

Substance abuse assessment and diagnosis: A comprehensive guide for counsellors and helping professionals

Juhnke GA *Brunner-Routledge* 2002 ISBN: 1-58391-367-X

This is an introductory textbook written for graduate counselling students and other helping professionals and provides readers with fundamental Alcohol and Other Drug (AOD) assessment and diagnostic knowledge. The book takes the approach that addictions assessment is more than a once-off paperwork procedure to be conducted at the onset of treatment. Juhnke views assessment and counselling as one – a complex and intertwined element informing the process of arriving at effective treatment – and describes how to assess without becoming lost in the assessment process or losing sight of its purpose. His intent was ‘to write a book that consistently reminds counsellors and mental health professionals of the people behind the addiction diagnoses and disease’.

The first two chapters provide a foundation on which to build the assessment process. Here Juhnke presents an overview of the CLISD-PA substance abuse assessment model, originally developed by the author in 1986 and since refined by his own clinical experiences as director of the Counselling and Consulting Clinic at the University of North Carolina. He describes how this innovative assessment model is applied through a series of steps - Clinical Interviews, Standardised Speciality, Drug Detection and Personality Assessment. He introduces the reader to DSM-IV-TR diagnostic fundamentals and addresses two important issues for counsellors working with addicted persons – dual diagnosis and Axis I and Axis II disorders common to those who are AOD abusing.

The remaining chapters provide practical directions on how to use and score the varied instruments used in each of the four tiers of the assessment process. Juhnke incorporates detailed clinical vignettes and examples to describe how the process works. One chapter deals with AOD instruments and testing – including pragmatic and practical information on drug detection testing – something that is absent from most addiction texts.

The science of prevention: Methodological advances from alcohol and substance abuse research

(Eds.) Bryant K, Windle M, West S *American Psychological Association* 2003 ISBN: 1-55798-439-5

This book aims to promote greater methodological rigour in prevention science by describing a variety of promising advances in the design and analysis of prevention research. The editors see the rapid evolution of prevention science as a challenge to researchers across many fields to develop general principles that integrate an understanding of risk and protective factors with the delivery of preventive interventions. Recent advances involve application of new analytical techniques made possible by the development of sophisticated computer programmes that allow researchers to solve multi-group structural equation models or to run customised statistical simulation programmes in a matter of minutes.

The book is divided into three parts: the first part focuses on issues in designing basic psychosocial research on the development of alcohol abuse; the second part deals with the design and analysis of interventions; the third part targets specific methodological issues related to improving the quality of prevention research. There is a common focus across many of the chapters on developing appropriate designs and statistical models for analysing longitudinal data, whether those data arise from basic psychosocial or applied intervention studies. Most of the contributors are active researchers in the field of substance abuse prevention who are also methodological experts. While the book is concerned mainly with applications to the prevention of alcohol and substance abuse, nearly all of the methodological principles and statistical models described are general and have potential application to the full range of areas in which prevention research takes place.



Upcoming Events in 2003 – A Selection

March

Tuesday 4 March 2003

Intervention, Integration and Innovation - British Prison Drug Workers Conference

Venue: Manchester
Organised by/Contact: Alcohol Concern.
 Contact Alcohol Concern
 Tel: + 44 20 7928 7377
 Email: contact@alcoholconcern.org.uk.

Information: A one day conference looking at the relationship between alcohol and severe mental illness and considering the implications for policy and practice.

5 March 2003

Partners in Prevention 2003 - Drugs, Alcohol and Prisons: Working with Families to Promote Positive Resettlement (Practice)

Venue: Paragon Hotel, Birmingham
Organised by/Contact: Adele Shepherd.
 Tel: +44 20 7202 9436
 Fax: +44 20 7928 8923
 Email: a.shepherd@adfam.org.uk

6-7 March 2003

The 1st UK National Drug Treatment Conference: Treatment Choices, What's Works, What's New and What's on Offer.

Venue: Victoria Park Plaza, London
Organised by/Contact:
 Monique Tomlinson, UK National Drug Treatment Conference, PO Box 36646, London SE1 9ZT. Tel: +44 20 7928 9152
 Email: monique@exchangeconferences.org

7 March 2003

Stockholm Conference on Cannabis

Venue: Parliamentary Building, Stockholm
Organised by/Contact: National Drug Policy Coordinator, SE-103-33 Stockholm
 Tel: +46 8 405 1000 Fax: +46 8 411 2467
 Email: registrator@social.ministry.se
 www.mobilsera.n

10 March 2003

Exploring gender in contemporary discussion (Lecture 2, Addiction Research Centre Trinity College. Spring Lecture Series, 2003)

Speaker: Fiona Measham
Venue: Trinity College Dublin
Organised by/Contact: Fiona Clarke

Tel +01 608 3647 Fax +01 6083790
 Email: clarkef@tcd.ie

13-15 March 2003

Stay in Touch: 3rd European Conference on Youth Work and Drug Prevention

Venue: Lucerne, Switzerland
Organised by/Contact: Federal Office of Public Health, Tel: +41(0)31 323 8713
 Fax: +41 (0)31 323 8789
 www.stayintouch.ch

25 March 2003

Partners in Prevention 2003 - Drugs, Alcohol and Prisons - Working with Families to Promote Positive Resettlement (Policy)

Venue: LVSRC, London
Organised by/Contact: Adele Shepherd
 Tel: 020 7202 9436 Fax: 020 7928 8923.
 Email: a.shepherd@adfam.org.uk

27-29 March 2003

1st European Congress on Addictive Disorders

Venue: Alicante, Spain
Organised by/Contact: Viajes Alicante S.A., C/ Pintor Lorenzo Casanova 56, 03003 Alicante, Spain.
 Fax: +34 96 592 65 42
 Email: viajes.alicante@alc.es
 www.europeanaddictions.org

April

4 April 2003

Drug courts: changes and trends (Lecture 4, Addiction Research Centre Trinity College. Spring Lecture Series, 2003)

Speaker: Philip Bean
Venue: Trinity College Dublin
Organised by/Contact: Fiona Clarke
 Tel +01 608 3647 Fax +01 6083790
 Email: clarkef@tcd.ie

7-9 April 2003

Client Choice: Reality or rhetoric? Community & Residential Workers Conference

Venue: Manchester
Organised by/Contact: Salma Master, Conference Coordinator, Cranstoun Independent Management Ltd., 4th Floor, Broadway House, 112-134 The Broadway, London SW19 1ZX

10 April 2003

National Young People's Drug Treatment Forum

Venue: The Zone, Dudley
Organised by/Contact: Safia Noor, DrugScope, 32-36 Loman Street, London SE1 0EE Tel: +44 20 2922 1211

30 April 2003

Developing Work Place Drug Programmes

Venue: Stillorgan Park Hotel
Organised by/Contact: Caroline Cahill, Conference Administrator, EAP Institute, 143 Barrack Street, Waterford. Tel: +353 51 855 733 Fax: +353 51 879626
 Email: eapinstitute@eircom.net

May

22-24 May 2003

European Seminar on Reduction of Drug Related Risks in Prison

Venue: Rome
Organised by/Contact: Salma Master, Conference Coordinator, Cranstoun Independent Management Ltd., 4th Floor, Broadway House, 112-134 The Broadway, London SW19 1ZX

If you have information on upcoming conferences or other events, please let us know so that we can include it in future issues of Drugnet Ireland. Send information to Drugnet Ireland, Drug Misuse Research Division, 73 Lower Baggot Street, Dublin 2. Tel: (01) 676 1176; Email: bgalvin@hrb.ie.

Drugnet Ireland Mailing List

If you wish to have your name included on the mailing list for future issues of Drugnet Ireland, please send your contact details to: Mary Dunne, Administrative Assistant, Drug Misuse Research Division, Health Research Board, 73 Lower Baggot Street, Dublin 2. Tel: (01) 6761176; Email: mdunne@hrb.ie