



Alcohol and other drug treatment services in the Australian Capital Territory 2007–08

Findings from the National Minimum Data Set (NMDS)

Highlights

In the Australian Capital Territory (ACT) in 2007–08, 10 publicly funded alcohol and other drug treatment agencies provided 3,738 treatment episodes.

The median age of persons receiving treatment for their own drug use was 30 years, similar to 2006–07 (32 years). For people seeking treatment in relation to someone else’s drug use, the median age decreased from 52 years in 2006–07 to 43 years in 2007–08.

Alcohol was again the most common principal drug of concern (49%), although accounting for a smaller proportion of episodes compared to the previous year. Other principal drugs of concern were heroin (20%), cannabis (14%) and amphetamines (10%).

Counselling accounted for 28% of treatment episodes as the main treatment type, followed by withdrawal management (21%) and assessment only (19%). This represented a substantial decrease in assessment only episodes and an increase in withdrawal management as a proportion of total treatments.

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About this bulletin

This bulletin summarises the main findings from the 2007–08 Alcohol and Other Drug Treatment Services (AODTS) NMDS data for the ACT. More detailed information about the 2007–08 collection and its findings can be found in the publication *Alcohol and other drug treatment services in Australia 2007–08: report on the National Minimum Data Set* (AIHW 2009). This report, together with further publications and interactive data, can be accessed online at <www.aihw.gov.au/drugs>.

Scope of the AODTS–NMDS

The agencies and clients that were in scope for the 2007–08 AODTS–NMDS collection were:

- all publicly funded (at state, territory and/or Australian Government level) government and non-government agencies that provide one or more specialist alcohol and/or other drug treatment services
- all clients who had completed one or more treatment episodes at an alcohol and other drug treatment service that was in scope during the period 1 July 2007 to 30 June 2008.

It is important to note that the AODTS–NMDS collection only includes pharmacotherapy clients when they receive both pharmacotherapy and another type of treatment (from the same treatment agency). Pharmacotherapy-only clients are reported under the National Opioid Pharmacotherapy Statistics Annual Data collection (NOPSAD).

For a complete list of clients and agencies excluded from the AODTS–NMDS, see Section 1.3 of the AODTS–NMDS 2007–08 annual report (AIHW 2009).

Collection count: closed treatment episodes

The unit of measurement in this bulletin is the 'closed treatment episode'. A closed treatment episode refers to a period of contact, with defined start and end dates, between a client and a treatment agency. It is possible that more than one treatment episode may be in progress for a client at any one time, therefore the number of closed treatment episodes captured in the AODTS–NMDS does not equate to the total number of persons in Australia receiving treatment for alcohol and other drugs.

Treatment agencies

Throughout Australia, a total of 658 government-funded alcohol and other drug treatment agencies supplied data for 2007–08. Of these agencies, 10 were located in the ACT, of which 9 were non-government agencies.

Client profile

In the ACT, there were 3,738 closed treatment episodes in alcohol and other drug treatment services reported in the 2007–08 AODTS–NMDS collection. The drop in treatment episodes since 2006–07 was related to a review of the reporting practices of one agency.

The vast majority (98%) of closed treatment episodes in the ACT involved clients seeking treatment for their own drug use. The remaining 2% involved clients seeking treatment in relation to another person's alcohol or other drug use.

Age and sex

The overall proportions of male and female clients in the ACT (66% and 34% respectively) were identical to the national proportions. However, of those treatment episodes reported for someone else's drug use in the ACT, female clients accounted for the majority (71% of episodes).

In the ACT, the median age of persons receiving treatment for their own drug use was 30 years. Of people seeking treatment in relation to someone else's drug use, the median age was 43 years.

One-third (33%) of closed treatment episodes in the ACT were for clients aged 20–29 years, and more than one-quarter (26%) were for clients aged 30–39 years.

Special population groups

The proportion of closed treatment episodes involving clients who identified as being of Aboriginal and/or Torres Strait Islander origin increased between 2006–07 and 2007–08 from 6% to 11%. Indigenous status was not stated in around 8% of treatment episodes in 2007–08.

The ACT now reflects the national pattern, in which 11% of treatment episodes were provided to Indigenous people. It is important to note that the majority of Australian Government-funded Aboriginal and Torres Strait Islander substance use services or primary health care services report their activities to other data collections.

The majority (88%) of closed treatment episodes in the ACT were for clients born in Australia and almost all treatment episodes were provided to clients whose preferred language was English.

Drugs of concern

This section reports only on the 3,662 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in the ACT.

Principal drug of concern

The 'principal drug of concern' refers to the main substance that the client states led them to seek treatment from the alcohol and other drug treatment agency.

In both the ACT and nationally in 2007–08, alcohol was the most common principal drug of concern in closed treatment episodes (49% and 44% respectively). This was a drop in the proportion of alcohol-related episodes in the ACT; an increase in the proportion nationally.

The decrease in the proportion of alcohol-related episodes in the ACT may be related to the overall drop in treatment episodes and/or the proportional decrease in 'assessment only' episodes.

In the ACT in 2007–08, heroin was the second most common principal drug of concern, representing 20% of treatment episodes compared with the national figure of 11%. This means the drop in heroin-related episodes seen between 2005–06 and 2006–07 has been maintained this year.

Table 1: Closed treatment episodes^(a) by principal drug of concern, Australian Capital Territory and Australia, 2001–02 to 2007–08 (per cent)

Principal drug of concern	Australian Capital Territory							Total (Australia) 2007–08	
	2001–02	2002–03	2003–04 ^(b)	2004–05	2005–06	2006–07	2007–08	Per cent	Number
Alcohol	41.6	40.3	22.4	42.7	45.4	55.3	48.9	44.5	65,702
Amphetamines	8.7	5.9	17.4	8.2	8.3	8.7	9.6	11.2	16,588
Benzodiazepines	2.1	2.1	3.3	1.0	0.9	0.7	0.8	1.7	2,487
Cannabis	11.3	15.2	29.5	18.6	15.4	12.2	14.3	21.6	31,864
Cocaine	0.2	0.1	0.8	0.2	0.3	0.2	0.3	0.3	457
Ecstasy	0.2	0.3	0.8	0.3	1.0	0.7	0.7	0.9	1,321
Nicotine	0.1	0.1	0.5	0.1	0.1	0.1	0.2	1.7	2,548
Opioids									
Heroin	8.3	20.7	20.2	27.4	26.5	20.0	19.6	10.5	15,571
Methadone	0.8	1.6	2.7	1.2	1.0	0.6	1.4	1.6	2,296
Morphine	0.1	0.1	0.4	0.2	0.2	0.2	0.4	0.9	1,390
Total opioids	9.3	22.4	24.8	28.9	27.7	22.1	23.6	14.5	21,380
All other drugs ^(c)	26.6	10.1	0.6	0.1	1.0	0.2	1.6	3.6	5,374
Not stated	—	3.5	—	—	—	—	—	—	—
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	2,800	2,958	1,317	4,206	4,529	4,340	3,662	..	147,721

(a) Excludes treatment episodes for clients seeking treatment for the drug use of others.

(b) In 2003–04, a data collection error resulted in the exclusion of one large service provider and hence the overall closed treatment episode number for the ACT is under-counted. Comparisons of data from this year with data from other collection years should therefore be done with caution.

(c) Includes balance of principal drugs of concern coded according to the Australian Standard Classification of Drugs of Concern.

The ACT again had proportionally fewer episodes for cannabis (14%) in 2007–08 than were provided across the whole of Australia (22% of all treatment episodes).

Alcohol was the principal drug of concern for all age groups. More treatment was focused on alcohol for older age groups than for younger groups. The youngest age group (10–19 years) had almost the same number of treatment episodes for alcohol and cannabis.

All drugs of concern

‘All drugs of concern’ refers to all drugs reported by clients including the principal drug of concern and all other drugs of concern (clients can report up to five other drugs of concern).

The majority (83%) of all treatment episodes in the ACT involved at least one other drug of concern (in addition to the principal drug of concern). This is a substantial increase from the previous collection period when around two thirds of treatment episodes included at least one additional drug of concern. In 2007–08, 5,384 instances of other drugs of concern were recorded.

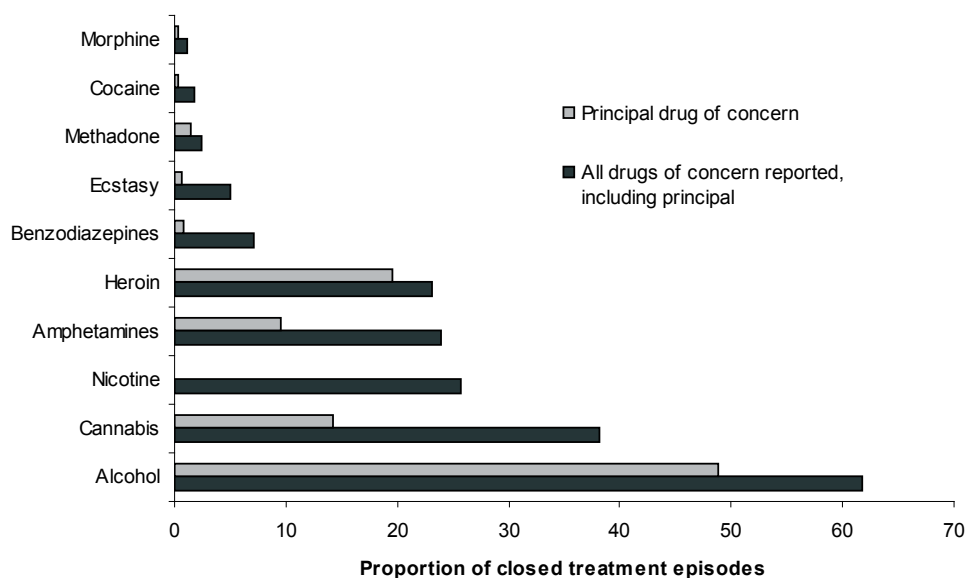


Figure 1: Closed treatment episodes by principal drug of concern and all drugs of concern, Australian Capital Territory, 2007–08

A breakdown of all drugs of concern by drug type is presented above (Figure 1). For example, nicotine was reported as the principal drug of concern in less than 1% of episodes, but was reported as a drug of concern (either ‘principal’ or ‘other’) in 26% of treatment episodes.

Alcohol

In the ACT, alcohol was the most common principal drug of concern for which treatment was sought, accounting for 49% of closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 62% of episodes included alcohol.

Of the 1,792 episodes where alcohol was nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (72%) of episodes were for male clients.
- The median age of clients receiving treatment was 35 years (males 34 years; females 37 years).

- Around 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 13% of episodes Indigenous status was not reported).
- Self-referral was the most common source of referral (60% of episodes), followed by referrals from 'other' sources (11%).

Drug profile

- 79% of episodes included at least one other drug of concern. From these episodes, 2,324 instances of other drugs of concern were recorded—42% were for other opioids, 20% for nicotine, and 18% for cannabis.
- The majority (64%) of episodes involved clients who reported never having injected drugs. Around 5% of episodes involved clients who reported being current injectors. Caution should be used, however, when interpreting data for 'injecting drug use' due to the high 'not stated' response for this item (19% of episodes).

Treatment profile

- The most common treatment type was counselling (33% of episodes), while withdrawal management accounted for 24%.
- Treatment was most likely to take place in a non-residential treatment facility (56% of episodes), followed by a residential treatment facility (43%).
- The median number of days for a treatment episode was 9.

Heroin

In the ACT, heroin was the second most common principal drug of concern for which treatment was sought, accounting for 20% of closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 23% of episodes included heroin.

Of the 717 episodes where heroin was nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (63%) of episodes were for male clients.
- The median age of clients receiving treatment was 30 years (males 32 years; females 28 years).
- Around 15% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (73% of episodes), followed by referrals from court diversion programs designed to direct people charged with drug-related crimes into treatment (8%).

Drug profile

- Most episodes (93%) involved clients whose usual method of use was injecting.
- 94% included at least one other drug of concern. From these episodes, 1,215 instances of other drugs of concern were recorded—30% for other opioids, 20% for cannabis and 17% for nicotine.
- Two thirds (66%) of episodes involved clients who reported being current injectors, while 27% involved clients who had injected drugs in the past.

Treatment profile

- The most common treatment type was 'other', which includes pharmacotherapy (31%). A quarter (26%) of episodes were for assessment only; 14% were for withdrawal management (detoxification).
- Treatment was most likely to take place in a non-residential treatment facility (61% of episodes), followed by a residential treatment facility (28%).
- The median number of days for a treatment episode was 26 (up from 9 days in 2006–07).

Cannabis

In the ACT, cannabis was the third most common principal drug of concern for which treatment was sought, accounting for 14% of closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 38% of episodes included cannabis.

Of the 522 episodes where cannabis was nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (69%) of episodes were for male clients.
- The median age of clients receiving treatment was 23 years (males 22 years; females 24 years).
- Around 14% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (40% of episodes), followed by referrals from court diversion (12%).

Drug profile

- Smoking was the most common method of use (94% of episodes).
- 83% of episodes included at least one other drug of concern. From these episodes, 840 instances of other drugs of concern were recorded—27% were for alcohol, 21% for other opioids and 16% for nicotine.

- The majority (61%) of episodes involved clients who reported never having injected drugs. Nine per cent of episodes involved clients who reported being current injectors. Caution should be used, however, when interpreting data for 'injecting drug use' due to the high 'not stated' response for this item (17% of episodes).

Treatment profile

- Counselling as the main treatment type accounted for 34% of episodes, while 20% were for withdrawal management (detoxification) and 17% were for assessment only.
- Treatment was most likely to take place in a non-residential treatment facility (51% of episodes), followed by a residential treatment facility (46%).
- The median number of days for a treatment episode was 13.

Treatment programs

'Main treatment type' is defined as the principal activity that the treatment provider considers necessary for the client to complete their treatment plan for the principal drug of concern. In practice, it may also be the main treatment type actually provided to the client. Data presented in this section relate to clients seeking treatment for their own or someone else's alcohol or other drug use, except the sub-sections relating to principal drug of concern and treatment programs.

Table 2: Closed treatment episodes by main treatment type, Australian Capital Territory and Australia, 2001–02 to 2007–08 (per cent)

Main treatment type	Australian Capital Territory							Total (Australia) 2007–08	
	2001–02	2002–03	2003–04	2004–05	2005–06 ^(a)	2006–07	2007–08 ^(b)	Per cent	Number
Withdrawal management (detoxification)	33.7	50.7	36.1	26.7	22.4	16.3	21.1	16.2	24,999
Counselling	14.8	15.8	47.2	27.7	16.3	27.4	28.5	37.3	57,470
Rehabilitation	9.5	7.4	13.1	5.2	5.0	4.8	6.2	7.2	11,099
Support & case management only	24.8	15.8	3.1	2.7	6.8	6.6	10.3	8.0	12,279
Information and education only	3.6	0.1	0.4	11.5	4.6	4.5	8.2	9.8	15,086
Assessment only	4.6	4.4	—	19.4	39.3	35.7	18.8	14.3	21,976
Other ^(c)	9.0	5.8	0.1	6.9	5.6	4.6	6.9	7.2	11,089
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	2,824	3,001	1,318	4,213	4,634	4,516	3,738		153,998

(a) The number of closed treatment episodes for assessment only in 2005–06 may be over-counted due to the inclusion of diversion assessments and changes in reporting practices.

(b) The total number of treatment episodes and proportional decrease in assessment only is related to a review of the reporting practices of one agency.

(c) 'Other' includes treatment episodes where the main treatment type was reported as pharmacotherapy.

Of all closed treatment episodes in the ACT, the most common main treatment type was counselling (28%), followed by withdrawal management (detoxification) (21%) and assessment only (19%) (Table 2). Nationally, counselling was the most common treatment provided (37% of episodes), followed by withdrawal management (detoxification) (16%) and assessment only (14%).

The proportion of episodes provided by treatment type has varied over time in the ACT. In 2007–08 there was a large drop in the proportion of assessment only episodes (from 36% in 2006–07 to 19%). This change was related to a review of reporting practices of one agency. The proportion of detoxification episodes also rose again, after a fall in 2006–07.

Counselling

Counselling accounted for 28% of closed treatment episodes in the ACT in 2007–08. Of the 1,064 episodes where counselling was nominated as the main treatment type received in 2007–08:

Client profile

- The majority (93%) of episodes were for clients seeking treatment for their own drug use. Nonetheless, out of all the treatment types, counselling was the most likely to be provided to clients seeking treatment related to the drug use of another person.
- Over two thirds (68%) of episodes were for male clients. Almost two thirds (61%) of episodes were provided to people aged 20–39 years.
- The median age of clients was 32 years.
- Around 5% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (71% of episodes), followed by referrals from 'other' sources (16%).

Treatment profile

- Most treatment took place in a non-residential treatment facility (98% of episodes) as distinct from residential, outreach, home and other settings.
- The majority (51%) of episodes were reported to have ended because the treatment was completed (see the Alcohol and other drug treatment services in Australia 2007–08: report on the national minimum data set. Drug treatment series no. 9. Cat. no. HSE 73 for more details about the meaning of 'treatment completed'). The next most common reason for episodes to end was that the client ceased to participate without notice to the service provider (42% of episodes ended this way).
- The median number of days for a treatment episode was 29 (six days shorter than the previous year).

Principal drug profile

- ♦ Alcohol was the most common principal drug of concern reported by people seeking counselling for their own drug use (59% of episodes), followed by cannabis (18%).

Withdrawal management (detoxification)

Withdrawal management (detoxification) accounted for 21% of closed treatment episodes in the ACT in 2007–08. Of the 790 episodes where withdrawal management (detoxification) was nominated as the main treatment received in 2007–08:

Client profile

- ♦ By definition, all episodes were for clients seeking treatment for their own drug use.
- ♦ The majority (66%) of episodes were for male clients.
- ♦ The median age of persons receiving treatment was 32 years (males 33 years; females 31 years).
- ♦ Around 9% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- ♦ Self-referral was the most common source of referral (78% of episodes).

Treatment profile

- ♦ Treatment almost always took place in residential treatment facilities (96%), followed by non-residential treatment settings (4%). In 2006–07, all withdrawal management took place in residential treatment facilities.
- ♦ The majority (82%) of episodes ended because the treatment was completed (up from 70% in the previous year). The next most common reason for treatment to end was because the client ceased to participate against advice (12%, down from 19% in 2006–07).
- ♦ The median number of days for a treatment episode was 7.

Principal drug profile

- ♦ Alcohol was the most common principal drug of concern reported (56% of episodes), followed by cannabis, heroin and amphetamines (each 13%).

Assessment only

Around one in five (19%) treatment episodes in the ACT in 2007–08 were for assessment only. This is a large drop from 2006–07 when assessment only made up 36% of treatments. This drop is related to a review of the reporting practices of one agency.

Of the 701 episodes where assessment only was nominated as the main treatment type received in 2007–08:

Client profile

- All episodes were for clients seeking treatment for their own drug use.
- The majority (61%) of episodes were for male clients.
- The median age of persons receiving treatment was 31 years (males 31 years; females 30 years).
- Around 13% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (61% of episodes, down from 74% in 2006–07), with other referrals coming from a variety of sources.

Treatment profile

- Treatment was most likely to occur in a residential treatment facility (63% of episodes), followed by non-residential treatment facilities (35%). This is a substantial change from the previous year when 92% of episodes were provided in non-residential treatment facilities. This change may also be related to the review of reporting practices mentioned earlier.
- The majority (76%) of episodes ended because the treatment was completed; 14% ended because the client ceased to participate without notice to the service provider.
- The median number of days for a treatment episode was 1.

Principal drug profile

- Alcohol was the most common principal drug of concern reported by people who received assessment only for their own drug use (40% of episodes), followed by heroin (26%).

How to find out more

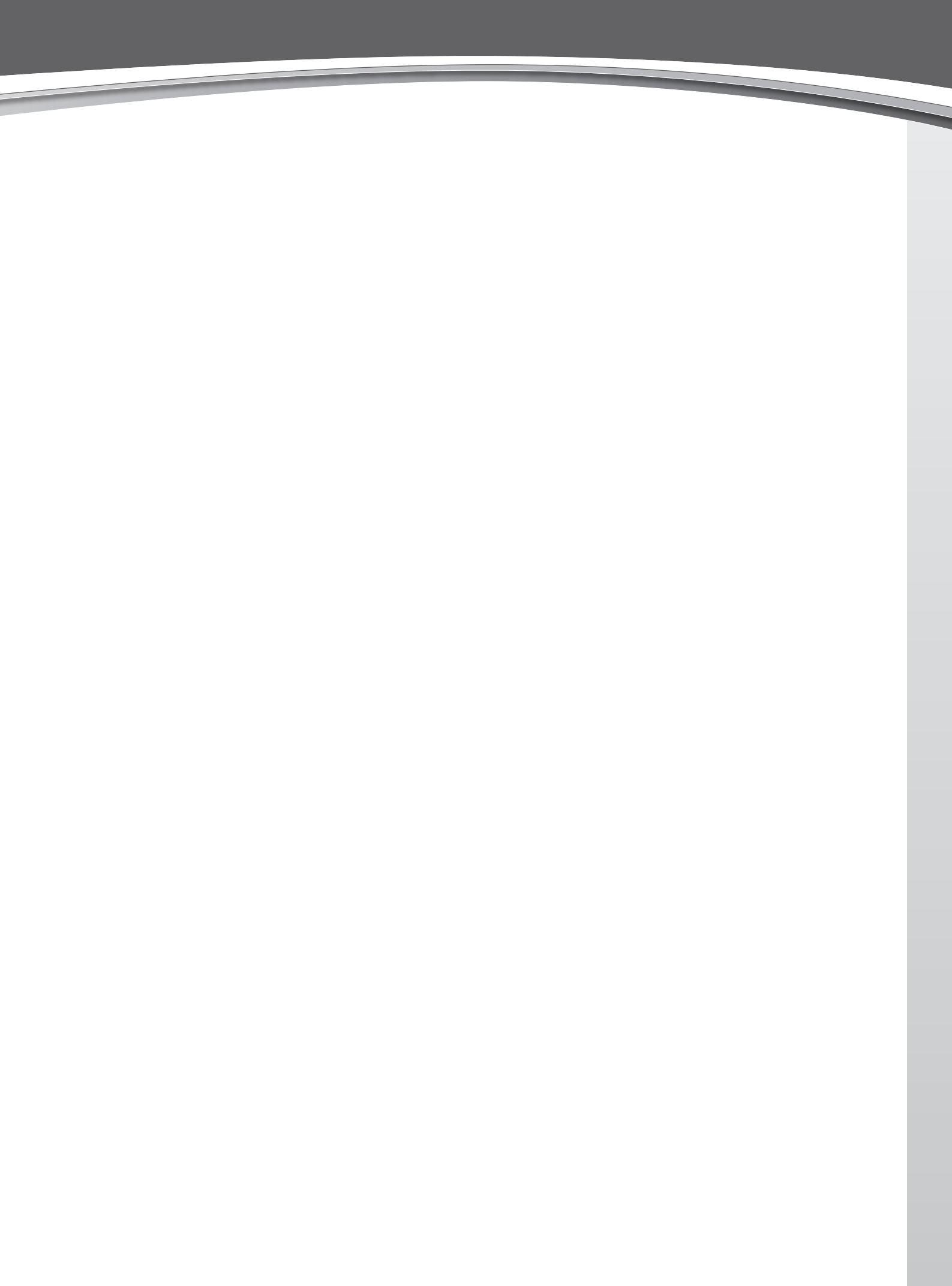
If you would like more detailed data about the ACT's alcohol and other treatment services please contact the AIHW to discuss your needs. The document *Alcohol and other drug treatment services NMDS Specifications 2009–10* outlines the process to be followed for unpublished data requests. This document is available from the AIHW website at <www.aihw.gov.au/publications/index.cfm/title/10726>.

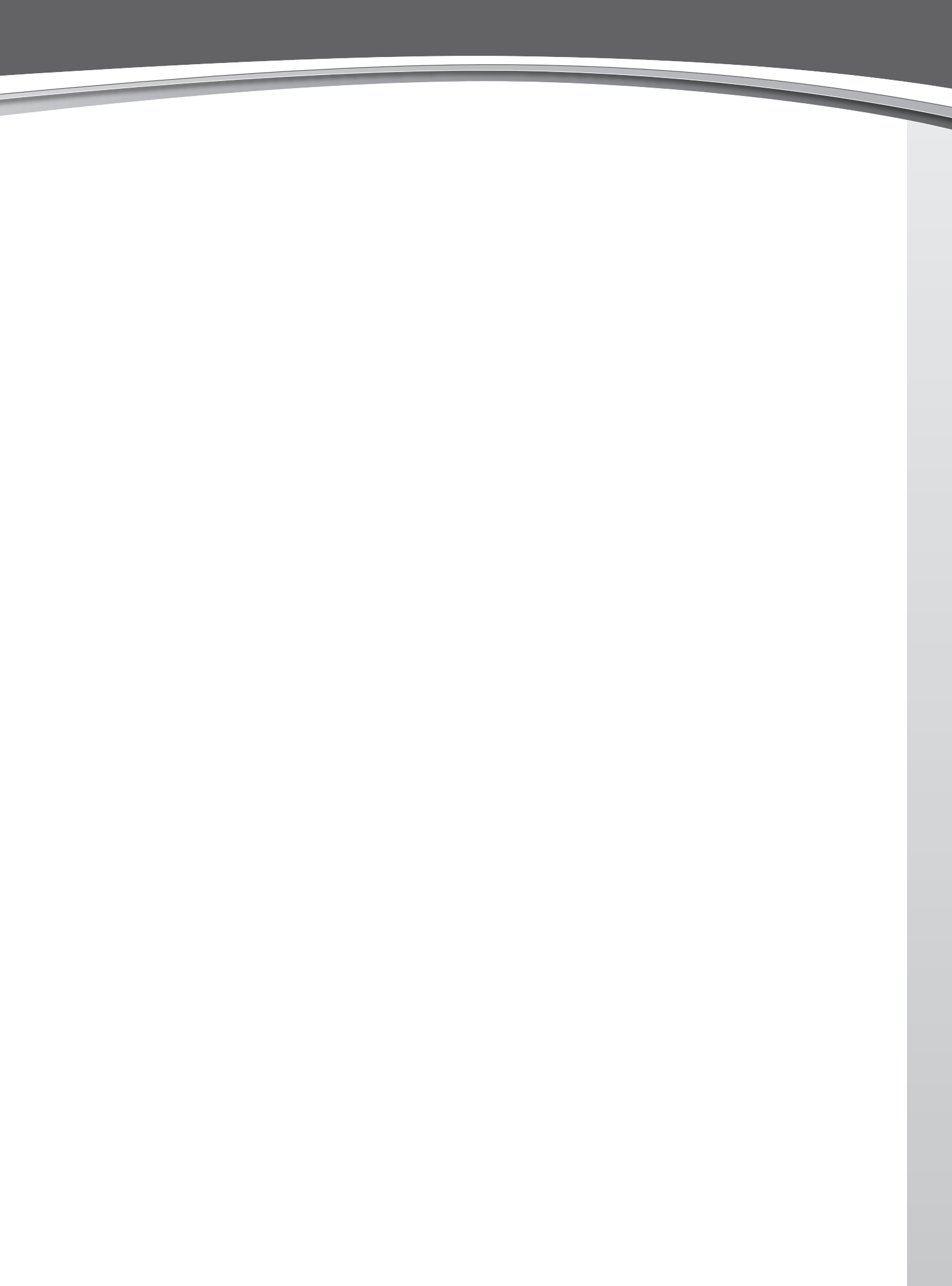
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Reference

AIHW 2009. Alcohol and other drug treatment services in Australia 2007–08: report on the national minimum data set. Drug treatment series no. 9. Cat. no. HSE 73. Canberra: AIHW.





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