

Alcohol and other drug treatment services in Victoria

Findings from the National Minimum Data Set (NMDS) 2006-07

Highlights

In Victoria in 2006–07:

- 136 government-funded alcohol and other drug treatment agencies and outlets provided 48,668 closed treatment episodes.
- The median age of persons receiving treatment for their own drug use was 31 years. Of
 people seeking treatment in relation to someone else's drug use, the median age was also
 31 years.
- Alcohol was the most common principal drug of concern in closed treatment episodes (42%), followed by cannabis (24%), opioids (16%, with heroin alone accounting for 14%), and amphetamines (8%).
- Counselling was the most common form of main treatment provided (49% of episodes), followed by withdrawal management (detoxification) (23%) and support and case management only (13%).

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About this bulletin

This bulletin summarises the main findings from the 2006–07 Alcohol and Other Drug Treatment Services (AODTS) NMDS data for Victoria. More detailed information about the 2006–07 collection and its findings can be found in the publication *Alcohol and other drug treatment services in Australia 2006–07: report on the National Minimum Data Set* (AIHW 2008). 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 2006–07 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 2006 to 30 June 2007.

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 2006–07 annual report (AIHW 2008).

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 633 government-funded alcohol and other drug treatment agencies supplied data for 2006–07. Of these agencies, 136 outlets were located in Victoria, of which all were non-government agencies.
- Treatment agencies in Victoria were most likely to be located in Major Cities (65%), followed by Inner Regional (27%) and Outer Regional areas (7%).

Client profile

- In Victoria there were 48,668 closed treatment episodes in alcohol and other drug treatment services reported in the 2006–07 AODTS–NMDS collection.
- The vast majority (94%) of closed treatment episodes in Victoria involved clients seeking treatment for their own drug use. The remaining 6% involved clients seeking treatment in relation to another person's alcohol or other drug use.
- The overall proportions of male and female clients in Victoria (64% and 36% respectively) were similar to the national proportions (66% and 34% respectively). However, of those treatment episodes reported in relation to someone else's drug use in Victoria, female clients accounted for the majority (57%).
- In Victoria, the median age of persons receiving treatment for their own drug use
 was 31 years. Of people seeking treatment in relation to someone else's drug use, the
 median age was also 31 years.
- Almost one-third (31%) of closed treatment episodes in Victoria were for clients aged 20–29 years, while 28% were for clients aged 30–39 years.
- The proportion of closed treatment episodes involving clients who identified as being of Aboriginal and/or Torres Strait Islander origin was slightly lower in Victoria than the national figure (7% and 10% respectively), but still higher than the overall proportion of Aboriginal and Torres Strait Islander peoples, aged 10 years and over, in the Australian population (2.5%) (ABS & AIHW 2008). These figures need to be interpreted with caution due to the fact that the majority of Australian Government-funded Aboriginal and Torres Strait Islander substance use services and primary health care services are not included in the AODTS–NMDS collection.
- The majority (86%) of closed treatment episodes in Victoria were for clients born in Australia and 92% of treatment episodes were for clients whose preferred language was English.
- Self-referral was the most common source of referral to treatment services in Victoria (39% of episodes).

Drugs of concern

This section reports on the 45,769 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in Victoria.

Principal drug of concern

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

- In Victoria in 2006–07, alcohol was the most common principal drug of concern in closed treatment episodes (42%) followed by cannabis (24%), closely reflecting the national trend with alcohol making up 42% of episodes across Australia and cannabis 23%.
- The proportion of episodes related to heroin dropped in Victoria between 2005–06 (18%) and 2006–07 (14%). This trend was also apparent nationally (with a drop from 14 to 11%).
- There was also an increase in the proportion of alcohol-related episodes in Victoria (from 38 to 42%), reflecting the increase nationally between 2005–06 and 2006–07.

Table 1: Closed treatment episodes^(a) by principal drug of concern, Victoria and Australia, 2001–02 to 2006–07 (per cent)

Principal drug of concern		Australia 2006–07						
	2001-02	2002-03	2003-04	2004-05 ^(b)	2005-06	2006-07	Per cent	Number
Alcohol	35.3	36.6	37.1	36.8	38.1	42.4	42.3	59,480
Amphetamines	6.2	6.1	6.5	6.1	6.3	7.5	12.3	17,292
Benzodiazepines	2.9	2.5	2.4	2.4	2.2	2.1	1.6	2,298
Cannabis	21.9	21.6	22.3	23.3	24.8	23.9	22.8	31,980
Cocaine	0.2	0.1	0.1	0.2	0.2	0.2	0.3	448
Ecstasy	0.4	0.4	0.4	0.4	0.7	0.7	0.7	1,010
Nicotine	0.7	0.7	0.8	0.6	0.6	0.8	1.7	2,450
Opioids								
Heroin	24.5	24.9	23.3	22.4	18.3	13.9	10.6	14,870
Methadone	1.9	1.4	1.2	1.5	1.5	1.4	1.6	2,268
Morphine	0.1	0.5	_	_	_	_	0.9	1,299
Total opioids	26.6	27.2	24.5	24.2	20.5	16.2	14.4	20,196
All other drugs(c)	5.8	4.8	5.8	5.9	6.5	6.3	3.8	5,321
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Total (number)	41,861	43,048	45,030	44,150	46,759	45,769	••	140,475

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

⁽b) The total number of closed treatment episodes for Victoria may be under-counted due to a change in reporting practice introduced in 2004–05.

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

- The principal drug of concern nominated by clients varied by age in Victoria:
 - For clients aged 10–19 years, cannabis was the most common principal drug of concern (45% of episodes).
 - For clients aged 20–29 years, the principal drugs of concern were more evenly distributed with alcohol being the most commonly nominated drug (29% of episodes), followed closely by cannabis (almost 29%) and heroin (19%).
 - For clients aged 30 years and over, alcohol was the most common principal drug of concern—highest for clients 60 years and over (82% of episodes).

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).

- Over half (60%) of all treatment episodes in Victoria involved at least one other drug of concern in addition to the principal drug. From these episodes, 53,584 instances of other drugs of concern were recorded.
- A breakdown of all drugs of concern by drug type is presented below (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 18% of
 treatment episodes.

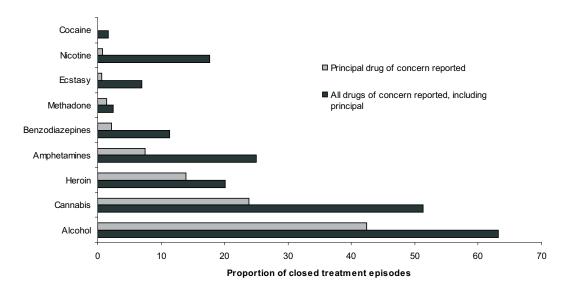


Figure 1: Closed treatment episodes by principal drug of concern and all drugs of concern, Victoria, 2006–07

Alcohol

In Victoria, alcohol was the most common principal drug of concern for which treatment was sought, accounting for 43% of closed treatment episodes in 2006–07. When all drugs of concern are considered (that is, the principal drug and all other drugs of concern nominated by the client), 63% of episodes included alcohol.

Of the 19,393 episodes where alcohol was nominated as the principal drug of concern in 2006–07:

Client profile

- The majority (68%) of episodes were for male clients.
- The median age of persons receiving treatment was 36 years (males 35 years; females 38 years).
- About 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 7% of episodes, Indigenous status was not reported).
- Self-referral was the most common source of referral (40% of episodes), followed by referrals from alcohol and other drug services (13%).

Drug profile

- 48% of episodes included at least one other drug of concern. From these episodes, 16,227 instances of other drugs of concern were recorded—38% were for cannabis, 19% nicotine, and 15% amphetamines.
- The majority (62%) of episodes involved clients who reported never having injected drugs. Around 5% of episodes involved clients who reported being current injectors, while 14% involved clients who reported they had injected drugs in the past. Caution should be taken, however, when interpreting data for 'injecting drug use' due to the high 'not stated' response for this item (19% of episodes).

Treatment profile

- Counselling was the most common main treatment type received (51% of episodes), followed by withdrawal management (detoxification) (25%).
- Treatment was most likely to occur in a non-residential treatment facility (73% of episodes), followed by a residential treatment facility (16%).
- The median number of days for a treatment episode was 33.

Cannabis

In Victoria, cannabis was the second most common principal drug of concern for which treatment was sought, accounting for 24% of closed treatment episodes in 2006–07. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 51% of episodes included cannabis.

Of the 10,934 episodes where cannabis was nominated as the principal drug of concern in 2006–07:

Client profile

- The majority (64%) of episodes were for male clients.
- The median age of persons receiving treatment was 25 years (males 25 years; females 24 years).
- Around 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 7% of episodes, Indigenous status was not reported).
- Self-referral was the most common source of referral (38% of episodes), followed by referrals from alcohol and drug treatment services (15%).

Drug profile

- Smoking was the most common usual method of use (83% of episodes), followed by inhaling (11%).
- 7,269 episodes (67%) included at least one other drug of concern. From these episodes,
 14,248 instances of other drugs of concern were recorded—35% were for alcohol,
 20% amphetamines and 16% nicotine.
- Half (51%) of all episodes involved clients who reported never having injected drugs. Nine per cent of episodes involved clients who reported being current injectors, while 19% involved clients who reported they had injected drugs in the past. Caution should be taken, however, when interpreting data for 'injecting drug use' due to the high 'not stated' response for this item (20% of episodes).

Treatment profile

- Counselling was the most common main treatment type received (43% of episodes), followed by withdrawal management (detoxification) (24%) and support and case management only (20%).
- Treatment was most likely to occur in a non-residential treatment facility (62% of episodes), followed by an outreach setting (17%).
- The median number of days for a treatment episode was 35.

Heroin

In Victoria, heroin was the third most common principal drug of concern for which treatment was sought, accounting for 14% of closed treatment episodes in 2006–07. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 20% of episodes included heroin.

Of the 6,368 episodes where heroin was nominated as the principal drug of concern in 2006-07:

Client profile

- The majority (65%) of episodes were for male clients.
- The median age of persons receiving treatment was 30 years (males 31 years; females 28 years).

- Around 5% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 6% of episodes Indigenous status was not reported).
- Self-referral was the most common source of referral (35% of episodes), followed by referrals from alcohol and drug treatment services (19%).

Drug profile

- Injecting was the most common method of use (90% of episodes), followed by smoking (5%).
- 4,534 episodes (71%) included at least one other drug of concern. From these episodes,
 9,914 instances of other drugs of concern were recorded—29% were for cannabis, 18% amphetamines and 16% alcohol.
- Almost half (49%) of episodes involved clients who reported being current injectors, while 41% involved clients who had injected drugs in the past (28% between 3 and 12 months ago and 13% 12 or more months ago).

Treatment profile

- Counselling was the most common main treatment type received (48% of episodes), followed by withdrawal management (detoxification) (18%) and assessment only (12%).
- Treatment was most likely to occur in a non-residential treatment facility (73% of episodes), followed by a residential treatment facility (18%).
- The median number of days for a treatment episode was 41.

Treatment programs

'Main treatment type' is the principal activity that the treatment provider considers necessary for the client to complete their treatment plan for the principal drug of concern. Data presented in this section relate to clients seeking treatment for their own or someone else's alcohol or other drug use, except for the subsections relating to principal drug of concern and treatment programs (which only include episodes for people seeking treatment for themselves).

- Of all closed treatment episodes in Victoria, counselling was the most common form
 of main treatment provided (49% of episodes), followed by withdrawal management
 (detoxification) (23%) and support and case management only (13%) (Table 2).
 Nationally, counselling was the most common treatment provided (39% of episodes),
 followed by withdrawal management (detoxification) (17%) and assessment only (15%).
- The balance of treatment types provided by Victoria has been stable over the period between 2001–02 and 2006–07.
- Victoria has provided proportionally less treatment as information and education only and rehabilitation over time compared with the national trends, but more counselling and withdrawal management (detoxification).

Table 2: Closed treatment episodes by main treatment type, Victoria^(a) and Australia, 2001–02 to 2006–07 (per cent)

	Victoria							Total (Australia) 2006–07	
Main treatment type	2001–02	2002-03	2003-04	2004-05 ^(b)	2005-06	2006-07	Per cent	Number	
Withdrawal management (detoxification)	21.9	21.0	22.2	22.5	21.8	22.5	16.6	24,467	
Counselling	47.2	48.6	47.1	46.9	47.5	49.0	38.7	57,017	
Rehabilitation	2.8	3.7	3.8	3.7	3.6	3.9	7.4	10,950	
Support & case management only	11.0	11.2	13.0	12.9	13.2	13.4	8.3	12,290	
Information and education only	0.1	0.3	0.7	0.7	0.4	0.5	9.3	13,723	
Assessment only	13.1	10.6	10.2	9.9	10.0	7.8	15.1	22,295	
Other ^(c)	3.9	2.0	1.8	3.4	3.3	2.8	4.5	6,583	
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
Total (number)	44,824	45,306	47,638	46,369	48,999	48,668		147,325	

⁽a) Victoria reports separate treatment episodes for main treatments and additional treatments, whereas other jurisdictions report episodes containing both main and additional treatment treatments where appropriate.

Counselling

Counselling was the most common main treatment type reported in Victoria in 2006–07, accounting for 49% of closed treatment episodes. Of the 23,828 episodes where counselling was nominated as the main treatment type received:

Client profile

- About 91% of episodes were for clients seeking treatment for their own drug use.
- The majority (63%) of episodes were for male clients.
- The median age of persons receiving treatment was 33 years (males 33 years; females 34 years).
- Around 8% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 7% of episodes, Indigenous status was not reported).
- Self-referral was the most common source of referral (44% of episodes), followed by referrals from 'other' sources (20%).

Treatment profile

- Close to all episodes occurred in a non-residential treatment facility.
- The majority (67%) of episodes ended because the treatment was completed. The next most common reason for episodes to end was that the client ceased to participate without notifying the service provider (15% of episodes ended this way).
- The median number of days for a treatment episode was 51.

⁽b) The total number of closed treatment episodes for 2004–05 may have been under-counted due to a change in reporting practice introduced that year.

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

Principal drug profile

• Alcohol was the most common principal drug of concern reported (46% of episodes) by people who received counselling for their own drug use, followed by cannabis (22%) and heroin (14%).

Withdrawal management (detoxification)

Withdrawal management (detoxification) was the second most common main treatment type reported in Victoria in 2006–07, accounting for 23% of closed treatment episodes. Of the 10,973 episodes where withdrawal management (detoxification) was nominated as the main treatment received in 2006–07:

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 33 years (males 33 years),
- 6% of episodes involved clients who identified as being of Aboriginal and Torres Strait Islander origin (for 5% of episodes Indigenous status was not reported).
- Self-referral was the most common source of referral (44% of episodes), followed by referrals from alcohol and drug treatment services (22%).

Treatment profile

- Treatment was most likely to take place in a residential treatment facility (48% of episodes), followed by a non-residential treatment facility (34%).
- The majority (71%) of episodes ended because the treatment was completed. The next most common reason for ending a treatment episode was that the client ceased to participate against advice (7% of episodes ended this way).
- The median number of days for a treatment episode was 11.

Principal drug profile

• Alcohol was the most common principal drug of concern reported (44% of episodes), followed by cannabis (24%) and heroin (10%).

Support and case management only

The third most common main treatment type provided in Victoria in 2006-07 was support and case management only, accounting for 13% of closed treatment episodes. Of the 6,524 episodes where support and case management only was nominated as the main treatment type received in 2006-07:

Client profile

• 89% of episodes were for clients seeking treatment for their own drug use.

- The majority (60%) of episodes were for male clients.
- The median age of persons receiving treatment was 19 years (males 20 years; females 19 years).
- Around 5% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin (for 5% of episodes, Indigenous status was not reported).
- Self-referral was the most common source of referral (37% of episodes), followed by referrals from 'other' sources (22%).

Treatment profile

- Treatment was most likely to occur in an outreach setting (86% of episodes), followed by a non-residential treatment facility (14%).
- The majority (72%) of episodes ended because the treatment was completed. The next most common reason for ending a treatment episode was that the client ceased to participate without notifying the service provider (9% of episodes ended this way).
- The median number of days for a treatment episode was 44.

Principal drug profile

• Cannabis was the most common principal drug of concern reported (37% of episodes) by people who received support and case management only for their own drug use, followed by alcohol (32%); and heroin and amphetamines (both 8%).

How to find out more

If you would like more detailed data about Victoria's alcohol and other treatment services please contact the AIHW to discuss your needs. The document *Alcohol and other drug treatment services NMDS Specifications* 2008–09 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/10575>.

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