



Alcohol and other drug treatment services in Queensland

Findings from the National Minimum Data Set (NMDS) 2009–10

Highlights

In Queensland in 2009–10, 118 government-funded alcohol and other drug treatment agencies provided 23,090 treatment episodes. The median¹ age of persons receiving treatment (for their own drug use and those seeking assistance for someone else’s drug use) was 29 (females 31; males 29).

Alcohol and cannabis were the most common principal drugs of concern at 38% and 36% of treatment episodes respectively, followed by opioids (8%), with heroin accounting for half of this (4%).

The greatest proportion of treatment episodes was for information and education only (42%) followed by counselling (28%) and assessment only (17%).

1 The median is the midpoint of a list of observations ranked from the smallest to the largest.

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About this bulletin

This bulletin summarises the main findings from the 2009–10 Alcohol and Other Drug Treatment Services (AODTS) NMDS data for government and non-government alcohol and drug services in Queensland. This is the second AODTS–NMDS state bulletin provided for Queensland. In previous years, Queensland did not provide comprehensive data on the alcohol and drug treatment services delivered by non-government organisations (NGOs).

In 2007, Queensland Health funded the establishment of the Queensland Network of Alcohol and Drug Agencies (QNADA), the peak body for NGOs that provide alcohol and drug services. One of the key objectives for QNADA was the establishment of a database to collect data for the AODTS–NMDS. It is expected that this database will enable a more comprehensive data set to be submitted to the AIHW in future.

More detailed information about the 2009–10 national collection and its findings is in the publication *Alcohol and other drug treatment services in Australia 2009–10: report on the National Minimum Data Set* (AIHW 2011). This report, 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 2009–10 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 episode at an alcohol and other drug treatment service that was in scope from 1 July 2009 to 30 June 2010.

It is important to note that the AODTS–NMDS collection includes pharmacotherapy clients only 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 (NOPSAD) collection.

For a complete list of clients and agencies excluded from the AODTS–NMDS, see AIHW 2011.

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, 671 government-funded alcohol and other drug treatment agencies supplied data for 2009–10. Of these agencies, 118 were in Queensland (of which 67 were non-government agencies). Treatment agencies in Queensland were more likely to be in *Major cities* (40%) than other geographical areas.

Client profile

In Queensland, there were 23,090 closed treatment episodes in alcohol and other drug treatment services reported in the 2009–10 AODTS–NMDS collection. The vast majority (99%) of closed treatment episodes in Queensland involved clients seeking treatment for their own drug use. The remaining 1% involved clients seeking treatment related to another person's alcohol or other drug use.

Age and sex

The overall proportions of male and female clients in Queensland (71% and 29%, respectively) differed slightly from the national proportions (67% and 33%, respectively).

In Queensland, the median age of persons receiving treatment for their own drug use was 29. Of people seeking treatment for someone else's drug use, the median age was 45.

Over one-third (35%) of all closed treatment episodes in Queensland were for clients aged 20–29, and one-quarter (25%) were for clients aged 30–39.

Special population groups

The proportion of treatment episodes involving clients who identified as Aboriginal and Torres Strait Islander, was slightly higher in Queensland (15%) compared with the national figure (13%). Treatment data for Aboriginal and Torres Strait Islander people need to be interpreted with caution due to the fact that the majority of Australian Government-funded Aboriginal and Torres Strait Islander substance use specific services or primary health care services are not included in the AODTS–NMDS collection. Also, Indigenous status was not stated in 8% of episodes in Queensland.

Over eight in ten (86%) of closed treatment episodes in Queensland were for clients born in Australia and almost all (98%) were for clients whose preferred language was English.

Drugs of concern

This section reports only on the 22,835 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in Queensland.

Principal drug of concern

The principal drug of concern refers to the main substance that the client stated led them to seek treatment from an alcohol and other drug treatment agency. In Queensland in 2009–10, alcohol (38%) and cannabis (36%) were the most common principal drugs of concern, followed by opioids (8%), nicotine (6%) and amphetamines (6%) (Table 1).

Nationally, alcohol was the most common principal drug of concern (48%), followed by cannabis (23%), opioids (15%, with heroin accounting for 10%) and amphetamines (7%).

The proportion of treatment episodes related to alcohol in Queensland increased between 2008–09 and 2009–10 (from 36% to 38%), but was less than the national proportion of alcohol-related episodes (48%). The proportion of episodes for cannabis treatment have remained stable at 36% between 2008–09 and 2009–10, while treatment episodes where amphetamines was the principal drug of concern have declined (8% to 6%).

Table 1: Principal drug of concern^(a), Queensland^(b) and Australia, 2003–04 to 2009–10 (per cent)

Principal drug of concern	Queensland ^(b)								Total (Australia) 2009–10	
	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	Per cent	Number
Alcohol	24.6	26.3	26.4	27.9	33.7	33.8	35.8	37.6	47.9	67,450
Amphetamines	8.9	10.3	8.7	10.2	9.9	8.8	7.7	5.9	7.1	10,038
Benzodiazepines	1.1	1.0	0.8	0.9	1.0	1.0	1.0	1.0	1.6	2,238
Cannabis	50.4	39.5	42.8	41.1	36.8	36.8	36.4	36.4	23.2	32,676
Cocaine	0.2	0.1	0.1	0.2	0.2	0.2	0.2	0.3	0.4	595
Ecstasy	0.4	0.5	0.7	1.0	1.4	2.2	2.3	1.7	0.8	1,107
Nicotine	2.8	4.4	6.3	6.6	6.4	6.1	6.1	6.0	1.8	2,553
Opioids										
Heroin	5.4	7.6	5.2	4.3	3.3	4.1	3.8	3.6	9.9	13,882
Methadone	1.7	2.4	1.2	0.8	0.9	0.7	0.7	0.6	1.4	1,907
Morphine	—	—	2.6	1.6	1.6	1.6	1.7	1.3	1.2	1,751
Total opioids ^(c)	7.1	10.0	10.0	8.1	7.5	8.0	7.9	7.9	14.7	20,709
All other drugs ^(d)	4.5	7.8	4.1	4.0	3.0	3.1	2.5	3.5	2.4	3,403
Not stated	—	—	—	—	—	—	—	—	—	—
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	13,683	17,912	19,743	24,159	24,885	26,332	24,984	22,835	..	140,769

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

(b) Numbers of episodes for Queensland have increased over time partly through improvements in data collection. However, time series comparisons should be made with caution because of concerns regarding data completeness.

(c) Total opioids includes the balance of opioids according to the Australian Standard Classification of Drugs of Concern (ASDC).

(d) Includes balance of principal drugs of concern coded according to the ASDC.

Age and sex

The principal drug of concern varied between age groups in Queensland. For clients aged 10–19 and 20–29, cannabis was the most common principal drug of concern (61% and 43% of episodes, respectively), while alcohol was the most common principal drug of concern for clients in all other age groups. The greatest proportion of treatment episodes was for those aged 20–29 (35%).

Males accounted for a larger proportion of treatment episodes for all drug types compared with females. The smallest difference between the sexes was treatment for benzodiazepines (54% males and 46% females) and the largest difference was for cocaine (88% males and 12% females).

Special population groups

In 2009–10, treatment episodes in Queensland involving clients who identified as Aboriginal and Torres Strait Islander were most likely to include alcohol as the principal drug of concern (54%, compared with 33% for non-Indigenous Australians), followed by cannabis (26%, compared with 40% for non-Indigenous Australians) or other drugs (11%).

All drugs of concern

Clients can report up to five drugs of concern in addition to the principal drug of concern. Over half (52%) of all treatment episodes in Queensland involved at least one other drug of concern (in addition to the principal drug of concern).

A breakdown of all drugs of concern by drug type is in Figure 1. Alcohol was reported as the principal drug of concern in 38% of episodes, but was reported as a drug of concern (either principal or other) in 57% of treatment episodes. Similarly, nicotine was reported as the principal drug of concern in 6% of episodes, but was reported as a drug of concern in 24% of treatment episodes.

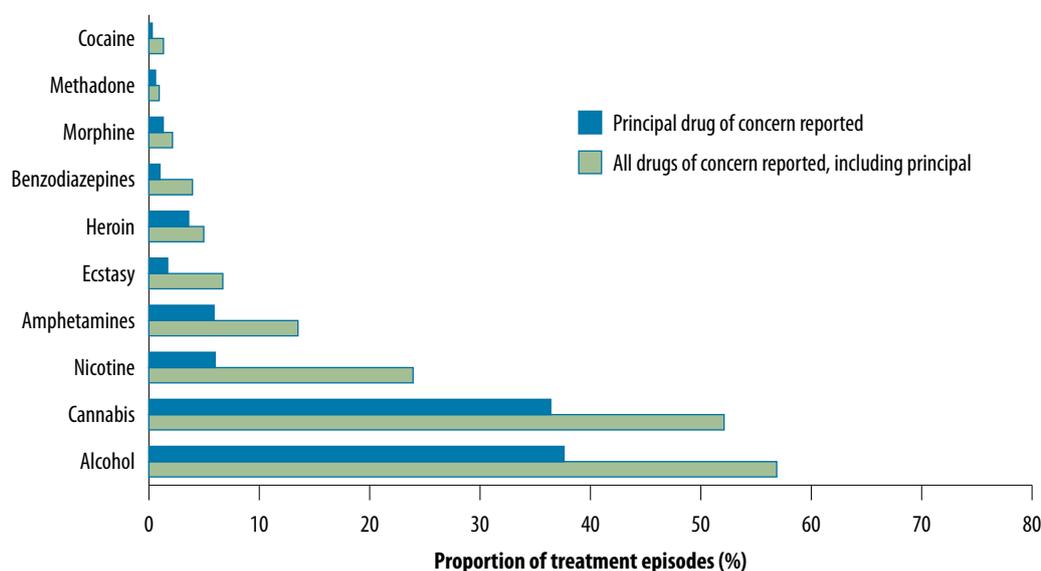


Figure 1: Principal drug of concern and all drugs of concern, Queensland, 2009–10

Alcohol

In Queensland, alcohol was the most common principal drug of concern for which treatment was sought, each accounting for around 38% of closed treatment episodes in 2009–10. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 57% of episodes included alcohol.

Of the 8,576 episodes where alcohol was the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Seven in ten (71%) episodes were for male clients.
- The median age of clients receiving treatment was 35 (males 34; females 37).
- More than one-fifth (22%) of episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (38% of episodes), followed by referrals from correctional services (16%).

Drug profile

- Over two in five (44%) alcohol episodes (3,797 treatment episodes) included at least one other drug of concern. In these episodes, 42% of other drugs were cannabis, 30% nicotine and 10% amphetamines.
- Almost two-thirds (63%) of episodes involved clients who reported never having injected drugs. Another 4% of episodes involved clients who reported as currently injecting, while 13% involved clients who reported they had injected drugs in the past.

Treatment profile

- Counselling was the most common main treatment type received (41% of episodes), followed by assessment only (26%) and information and education only (16%).
- Treatment was most likely to take place in a non-residential treatment facility (66% of episodes), followed by an outreach setting (24%).
- The median number of days for a treatment episode was 14 days.

Cannabis

In Queensland, cannabis was almost as likely as alcohol to be the principal drug of concern for which treatment was sought, accounting for around 36% of closed treatment episodes in 2009–10. Alcohol accounted for 38% of treatment episodes.

Cannabis was reported in 52% (11,898) of all episodes (as either the principal or other drug of concern).

Of the 8,317 episodes where cannabis was the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Around three-quarters (76%) of episodes were for male clients.
- The median age of clients receiving treatment was 25 (males 24; females 26).
- About one in ten (11%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Police diversion was the most common source of referral (49% of episodes), followed by court diversion (24%).

Drug profile

- Smoking was the most commonly reported usual method of use (96%), followed by ingestion at just over 1%.
- Three in five (59%) (4,923) episodes included at least one other drug of concern—30% were for nicotine and 42% for alcohol.
- Three-quarters (75%) of episodes involved clients who had never injected, while 14% involved clients who reported they had injected drugs in the past (4% between three and 12 months ago and 11% injected 12 or more months ago). Four per cent of episodes involved clients who reported currently injecting drugs.

Treatment profile

- Information and education only was the most common main treatment type received (73% of episodes), followed by counselling (14%).
- Treatment was most likely to take place in a non-residential treatment facility (76% of episodes), followed by an outreach setting (9%).
- The median number of days for a treatment episode was one day.

Nicotine

In Queensland, due to a decline in the proportion of episodes for amphetamines (from 8% in 2008–09 to 6%), nicotine was the third most common principal drug of concern in Queensland accounting for around 6% of closed treatment episodes in 2009–10. Opioids as a group (8%) was higher than nicotine but no individual opioid such as heroin (4%), methadone (<1%) and morphine (1%) accounted for a greater proportion of episodes.

When all drugs of concern are considered (i.e. the principal drug of concern and all other drugs of concern nominated by the client), 24% of episodes included nicotine.

Of the 1,359 episodes where nicotine was the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Three in five (61%) episodes were for male clients.
- The median age of clients receiving treatment was 29 and 28 (for males and females respectively).
- Around 14% of episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Police diversion was the most common source of referral (42% of episodes), followed by referrals from court diversion (21%). Similar patterns to those observed for cannabis.

Drug profile

- Smoking was the most common usual method of use (96% of episodes).
- Over half (56%) included at least one other drug of concern. Alcohol was a nominated other drug of concern in 38% of nicotine episodes, and cannabis in 37%.
- Almost three-quarters (73%) of episodes involved clients who reported having never injected. Only 3% of nicotine episodes were for those who reported being current injectors.

Treatment profile

- Information and education only was the most common main treatment type received (75% of episodes), followed by counselling and assessment only (both 11%).
- Treatment was most likely to take place in a non-residential treatment facility (55% of episodes).
- The median number of days for a treatment episode was one day.

Treatment programs

The main treatment type is the principal activity, as judged by the treatment provider, which is necessary for completing the treatment plan for the principal drug of concern. Data presented in this section relate to clients seeking treatment in relation to their own or someone else's alcohol or other drug use, except for the sub-sections 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 Queensland, information and education only was the most common form of main treatment provided (42% of episodes), followed by counselling (28%) and assessment only (17%) (Table 2). This profile is due to the significant number of clients seen under the Diversion Program.

Queensland provided more information and education only and assessment only as a proportion of all treatments than was provided nationally in 2009–10. Conversely, Queensland provided proportionately less withdrawal management, support and case management, counselling and rehabilitation.

Table 2: Main treatment type, Queensland^(a) and Australia, 2003–04 to 2009–10 (per cent)

Main treatment type	Queensland ^(a)								Total (Australia) 2009–10	
	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	Per cent	Number
Withdrawal management (detoxification)	5.4	7.9	4.4	5.4	4.7	5.4	6.4	5.5	15.4	22,534
Counselling	29.2	27.7	32.4	22.6	23.5	27.1	25.0	27.8	42.2	61,990
Rehabilitation	7.4	5.7	3.1	3.6	3.4	2.2	2.6	1.9	5.1	7,521
Support and case management only	4.2	6.4	4.5	2.3	3.7	3.8	5.7	3.8	8.7	12,718
Information and education only	45.1	37.2	45.4	48.0	44.6	46.4	40.3	41.7	8.9	13,034
Assessment only	5.6	11.5	8.0	14.2	18.4	12.5	18.0	17.3	13.5	19,803
Other ^(b)	3.1	3.6	2.2	3.8	1.6	2.6	1.9	2.1	6.3	9,186
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	14,195	18,466	20,092	24,524	25,340	26,895	25,523	23,090	..	146,786

(a) Numbers of episodes for Queensland have increased over time partly through improvements in data collection; however, time series comparisons should be made with caution because of concerns regarding data completeness.

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

Information and education only

Information and education only was the most common main treatment type reported in Queensland in 2009–10, accounting for 42% of closed treatment episodes (greater than the national proportion of 9%). Of the 9,621 episodes where information and education only was nominated as the main treatment type received, the client, drug and treatment profiles were as follows:

Client profile

- Almost all episodes (100%) were for clients seeking treatment for their own drug use.
- Nearly three quarters (74%) of episodes were for male clients.
- The median age of persons receiving treatment was 25 (males 24; females 26).
- Over one in ten (12%) of episodes involved clients who identified as being Aboriginal and Torres Strait Islander
- Police diversion was the most common source of referral (56% of episodes), followed by court diversion programs (35%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (73% of episodes).
- 92% of episodes ended because of ²expiation (the client had met all the conditions of a diversion program). The next most common reasons for episodes to end were that the client ceased to participate without notice (3%) or that the treatment was completed (3%).
- The median number of days for a treatment episode was one day.

Principal drug profile

- Cannabis was the most common principal drug of concern reported (64% of episodes) by people who received information and education for their own drug use, followed by alcohol and other drugs (both 14%).

² Ceased to participate at expiation refers to situations where the client has fulfilled their obligation to satisfy expiation requirements (e.g. participate in a treatment program to avoid having a criminal conviction being recorded against them) as part of a police or court diversion scheme and chooses not to continue with further treatment.

Counselling

Counselling was the second most common main treatment type reported in Queensland in 2009–10, accounting for 28% of closed treatment episodes. Of the 6,419 episodes where counselling was nominated as the main treatment received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Almost all (98%) episodes were for clients seeking treatment for their own drug use.
- Two-thirds (67%) of episodes were for male clients.
- The median age of persons receiving treatment was 32 (males 31; females 34).
- Almost one in five (17%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (40% of episodes), followed by referrals from correctional services (23%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (76% of episodes), followed by an outreach setting (19%).
- Two in five (41%) of episodes ended because the client ceased to participate without notifying the service provider. The next most common reason for a treatment episode to end was that treatment was completed (32% of episodes).
- The median number of days for a treatment episode was 36.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (56% of episodes), followed by cannabis (19%).

Assessment only

Assessment only was the third most common main treatment provided in Queensland in 2009–10, and accounted for 17% of closed treatment episodes. Of the 3,982 episodes where assessment only was nominated as the main treatment type received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Almost all episodes (99%) were for clients seeking treatment for their own drug use.
- Seven in ten (72%) episodes were for male clients.
- The median age of persons receiving treatment was 34 (males 34; females 36).
- One in six (15%) of episodes involved clients who identified Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (35%) of episodes, followed by referrals from correctional services (22%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (68% of episodes), followed by an outreach setting (29%).
- Around 44% of episodes ended because treatment was completed, while 24% of episodes ceased without the client notifying the service provider.
- The median number of days for a treatment episode was three days.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (56%) by people who received assessment only for their own drug use, followed by cannabis (16%) and amphetamines (7%).

Symbols

- nil or rounded to zero
- .. not applicable

How to find out more

If you would like more detailed data about Queensland'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 web site at

< <http://www.aihw.gov.au/publication-detail/?id=6442468251> >.

Reference

Australian Institute of Health and Welfare (AIHW) 2011. Alcohol and other drug treatment services in Australia 2009–10: report on the National Minimum Data Set. Drug treatment series no. 14. Cat. No. HSE 114. Canberra: AIHW.

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