



Alcohol and other drug treatment services in the Northern Territory

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

Highlights

In the Northern Territory in 2009–10, 20 government-funded alcohol and other drug treatment agencies provided 3,798 treatment episodes. This represented one less treatment agency and around 40 extra treatment episodes compared with 2008–09.

The median¹ age of persons receiving treatment for their own drug use was 31 years. The median age of people seeking assistance in relation to someone else’s drug in 2009–10 was 26 years.

Alcohol accounted for 69% of treatment episodes in 2009–10, followed by cannabis (9%) and opioids (9%, with morphine accounting for 8% of all principal drugs of concern).

The most common form of main treatment provided was assessment only (39% of episodes), followed by counselling (21%), and rehabilitation (16%). The proportion of clients receiving withdrawal management (detoxification) as their main treatment decreased in 2009–10 (from 15% of episodes in 2008–09 to 7% in 2009–10); while assessment only increased by six percentage points (from 33% in 2008–09 to 39%).

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 the Northern Territory. More detailed information about the 2009–10 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, 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 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 episodes 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, or that a client can have more than one treatment episode; 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, 20 were in the Northern Territory, of which 17 were non-government agencies.

Treatment agencies in the Northern Territory were most likely to be in either *Remote* areas (40%), such as Alice Springs or *Outer regional* areas (45%) including Darwin.

Client profile

In the Northern Territory, there were 3,798 closed treatment episodes in alcohol and other drug treatment services reported in the 2009–10 AODTS–NMDS collection, similar to the proportion observed in 2008–09. The large majority (89%) of closed treatment episodes in the Territory involved clients seeking treatment for their own drug use. The remaining 11% involved clients seeking treatment for another person's alcohol or other drug use.

Age and sex

The overall proportions of male and female clients in the Northern Territory (67% and 33%, respectively) were similar to the national proportions (67% and 33%, respectively). However, of those treatment episodes reported for someone else's drug use in the Territory, females accounted for the majority (60% of treatment episodes).

In the Northern Territory, the median age of persons receiving treatment for their own drug use was 31. Of people seeking treatment in relation to someone else's drug use, the median age was 26.

Around one-thirds (32%) of closed treatment episodes in the Territory were for clients aged 20–29; another third (29%) were for clients aged 30–39.

Special population groups

The proportion of closed treatment episodes involving clients who identified as Aboriginal and Torres Strait Islander was much higher in the Northern Territory than nationally (64% compared with 13%). In the Territory, Indigenous status was not stated for about 1% of treatment episodes in 2009–10. Total treatment episodes for Aboriginal and Torres Strait Islander people need to be interpreted with caution because some Australian Government-funded Aboriginal and Torres Strait Islander substance use specific services may not be included in the Northern Territory's data. Primary health care services are also not included.

The large majority (89%) of closed treatment episodes in the Northern Territory were for clients born in Australia and 54% were for clients whose preferred language was English. Almost three in ten (29%) episodes in the Northern Territory were for clients whose preferred language was an Australian Indigenous language.

Drugs of concern

This section reports on the 3,386 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in the Northern Territory.

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 the Northern Territory in 2009–10, alcohol was the most common principal drug of concern in closed treatment episodes (69%), followed by cannabis (9%) and opioids (9%, with morphine accounting for 8%) (see Table 1). Compared with the national rate, clients in the Northern Territory were more likely to receive treatment for alcohol (69% compared with 48% nationally) and morphine (8% compared with 1% nationally), and less likely to receive treatment for heroin (1% compared with 10% nationally) and cannabis (9% compared with 23% nationally).

Over time, the Northern Territory has consistently provided the majority (between 63% and 77%) of treatment episodes to people who identify alcohol as their principal drug of concern. Nationally the trend has fluctuated between 37% and 48%.

There was little change in the proportion of treatment episodes for each principal drug of concern in 2009–10 for the Territory compared with the previous year (2008–09).

Table 1: Principal drug of concern(a), Northern Territory and Australia, 2001–02 to 2009–10 (per cent)

Principal drug of concern	Northern Territory								Australia 2009–10	
	2002–03	2003–04	2004–05	2005–06	2006–07 ^(b)	2007–08	2008–09	2009–10	Per cent	Number
Alcohol	71.7	77.2	64.4	63.0	63.4	73.1	70.7	69.0	47.9	67,450
Amphetamines	6.4	4.5	5.2	3.8	4.8	2.4	2.4	2.5	7.1	10,038
Benzodiazepines	0.9	0.4	0.5	0.8	0.5	0.6	0.4	0.5	1.6	2,238
Cannabis	9.2	7.9	13.5	14.4	13.2	9.7	10.5	9.2	23.2	32,676
Cocaine	0.2	0.1	—	—	—	—	—	0.1	0.4	595
Ecstasy	—	0.2	0.4	0.4	0.3	0.3	0.2	0.2	0.8	1,107
Nicotine	1.2	1.3	1.0	1.4	3.8	0.4	0.7	1.4	1.8	2,553
Opioids										
Heroin	1.5	0.9	1.3	0.8	0.6	1.2	0.8	0.6	9.9	13,882
Methadone	0.6	0.7	0.6	1.0	0.4	0.4	0.5	0.5	1.4	1,907
Morphine	6.0	5.3	10.1	10.0	7.8	7.1	7.1	7.7	1.2	1,751
Total opioids ^(c)	8.1	6.8	12.0	11.8	8.8	8.7	9.1	8.8	14.7	20,709
All other drugs ^(d)	2.3	1.5	3.0	4.5	5.1	4.8	5.9	8.2	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)	1,961	2,337	2,116	2,283	2,217	3,496	3,521	3,386	..	140,769

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

(b) The number of treatment episodes may be under-counted due to technical difficulties, which led to the exclusion of data from one in-scope agency and under-reporting of episodes by government agencies for two quarters.

(c) Total opioids includes the balance of opioids apart from heroin, methadone and morphine.

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

Age and sex

Alcohol was the most common principal drug of concern for clients in all age groups in 2009–10. In 2006–07, the 10–19 age group reported cannabis as the most common principal drug of concern. However, the proportion of treatment episodes for cannabis has declined notably since then, accounting for only 12% in 2009–10. Alcohol now accounts for 54% of treatment episodes for this age group.

Special population groups

In 2009–10, treatment episodes involving clients identifying as Aboriginal and Torres Strait Islander in the Northern Territory were most likely to involve alcohol as the principal drug of concern (77% compared with 56% for non-Indigenous Australians), followed by 'other drugs' (12% compared with 5% for non-Indigenous Australians).

All drugs of concern

Clients can report up to five drugs of concern in addition to the principal drug of concern.

Around one in three (36%) treatment episodes in the Northern Territory 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. For example, nicotine was reported as the principal drug of concern for only 1% of episodes, but was reported as a drug of concern (either principal or other) in 19% of treatment episodes.

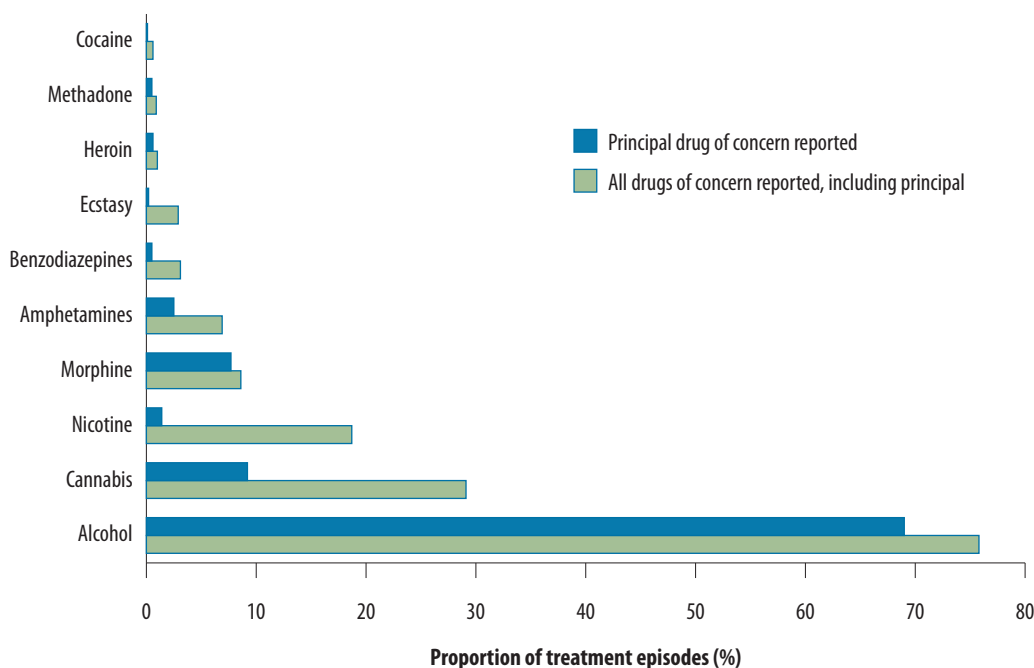


Figure 1: Principal drug of concern and all drugs of concern, Northern Territory, 2009–10

Alcohol

In the Northern Territory, alcohol was the most common principal drug of concern for which treatment was sought, accounting for 69% of closed treatment episodes in 2009–10 (higher than the national proportion of 50%). Where alcohol was reported as a drug of concern, it was generally nominated as the principal drug of concern. There were less than 250 episodes in which alcohol was nominated as an additional drug of concern to the principal drug.

Of the 2,337 episodes where alcohol was nominated as the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Seven in ten (72%) episodes were for male clients.
- The median age of clients receiving treatment was 32 (for both males and females).
- Seven in ten (72%) of episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (32% of episodes), followed by correctional services (20%, up nine percentage points from 2008–09) and referrals from court diversions (13%, unchanged from 13% in 2008–09).

Drug profile

- At least one other drug of concern was reported in 781 (or 33%) alcohol-related episodes. In these episodes, 1,211 instances of other drugs of concern were recorded, of which 42% were for cannabis and 36% were for nicotine.
- More than three-quarters (78%) of episodes involved clients who reported never having injected drugs. This data item had a high proportion of not stated responses (13%).

Treatment profile

- The most common main treatment type received was assessment only (46% of episodes; up 11 percentage points from 2008–09), followed by rehabilitation (22%) and counselling (17%).
- Treatment was most likely to occur in a residential treatment facility (36% of episodes), followed by a non-residential treatment facility (23%; up five percentage points from 2008–09).
- The median number of days for a treatment episode was three.

Cannabis

In the Northern Territory, cannabis was the second most common principal drug of concern for which treatment was sought, accounting for 9% of closed treatment episodes in 2009–10 (lower than the national proportion of 23%). When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), three in ten (29%) episodes included cannabis.

Of the 313 episodes where cannabis was nominated as the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Almost three-quarters (74%) of episodes were for male clients.
- The median age of clients receiving treatment was 26 (27 for males and 24 for females).
- Almost half the episodes (49%) involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (36% of episodes), followed by referrals from the criminal justice system (36%), including court diversion schemes (21%) correctional services (9%), and police diversion (5%).

Drug profile

- Smoking was the most common method of use (93%).
- 156 episodes (or 50%) included at least one other drug of concern. From these episodes, 260 instances of other drugs of concern were recorded: 44% for alcohol, 20% for nicotine, and 16% for amphetamines.
- Three in five (60%) episodes involved clients who reported never having injected drugs. This data item had a high proportion of not stated responses (19%).

Treatment profile

- Counselling was the most common main treatment type received (44% of episodes; compared with 33% in 2008–09), followed by assessment only (27%).
- Treatment was most likely to occur in a non-residential treatment facility (45% of episodes), followed by a residential treatment facility (35%).
- The median number of days for a treatment episode was 19 (seven days longer than in 2008–09).

Morphine

- In the Northern Territory, morphine was the third most common principal drug of concern for which treatment was sought, accounting for 8% 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), 9% of episodes included morphine.

Of the 262 episodes where morphine was nominated as the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Almost three in five (57%) episodes were for male clients.
- The median age of clients receiving treatment was 33 (males 34; females 31).
- 26% of episodes involved clients who identified as Aboriginal and Torres Strait Islander; 70% were non-indigenous.
- Self-referral was the most common source of referral (67% of episodes).

Drug profile

- Injection was the most common method of use (92% of episodes), followed by ingestion (7%).
- 111 episodes (or 42%) included at least one other drug of concern for morphine-related episodes. In these episodes, 221 instances of other drugs of concern were recorded—33% for cannabis, 22% were for benzodiazepines, and 12% for amphetamines.
- The large majority (89%) of episodes involved clients who reported as currently injecting.

Treatment profile

- The most common treatment type was assessment only (36%). 'Other' (including pharmacotherapy) accounted for 30% of treatments.
- Treatment was most likely to occur in a non-residential treatment facility (71% of episodes), followed by a residential treatment facility (22%).
- The median number of days for a treatment episode was 18.

Treatment programs

The 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, apart from the sections on principal drug of concern, which do not apply to clients seeking treatment in relation to someone else's drug use.

Of all closed treatment episodes in the Northern Territory in 2009–10, the most common form of main treatment provided was assessment only (39% of episodes), followed by counselling (21%) and rehabilitation (16%). Nationally, 14% of treatment episodes reported assessment only as their main treatment type, 42% reported counselling and 5% reported rehabilitation. It is important to note that the method of counting assessment only treatment episodes may vary between states and territories, so comparisons of data nationally and across jurisdictions should be made with caution.

Table 2: Main treatment type, Northern Territory and Australia, 2001–02 to 2009–10 (per cent)

Main treatment type	Northern Territory									Australia 2009–10	
	2001–02	2002–03	2003–04	2004–05	2005–06	2006–07 ^(a)	2007–08	2008–09	2009–10	Per cent	Number
Withdrawal management (detoxification)	21.8	8.9	8.4	11.8	14.3	11.1	14.7	15.3	7.3	15.4	22,534
Counselling	28.5	24.7	24.6	34.5	28.3	28.5	20.7	16.9	21.4	42.2	61,990
Rehabilitation	14.8	17.4	14.9	13.1	12.0	12.1	11.5	13.8	16.1	5.1	7,521
Support and case management only	2.2	3.7	0.9	1.4	1.2	4.3	6.6	6.6	1.6	8.7	12,718
Information and education only	6.9	21.4	23.9	9.0	6.9	5.3	3.3	8.5	5.2	8.9	13,034
Assessment only ^(b)	11.7	19.9	24.3	23.7	31.5	30.4	32.9	33.2	38.6	13.5	19,803
Other ^(c)	14.1	4.1	3.0	6.4	5.6	8.4	10.3	5.8	9.9	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	100.0	..
Total (number)	2,405	3,032	2,692	2,426	2,453	2,470	3,712	3,757	3,798	..	146,786

(a) The number of treatment episodes may be under-counted due to technical difficulties, which led to the exclusion of data from one in-scope agency and under-reporting of episodes by government agencies for two quarters.

(b) The method of counting assessment only may vary between states/territories, so comparison of data nationally and across jurisdictions should be made with caution.

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

Over the period since 2002–03, the Northern Territory has consistently provided more rehabilitation as a proportion of treatment episodes (12–17%) than has been provided nationally (6–9%). The Northern Territory has provided proportionally less counselling and withdrawal management (detoxification) over time compared with national trends.

Between 2007–08 and 2009–10, the proportion of treatment episodes with withdrawal management as the main treatment fell from 15% to 7%; the proportion receiving counselling increased from 17% in 2008–09 to 21% in 2009–10.

Assessment only

The most common main treatment type reported in the Northern Territory in 2009–10 was assessment only, accounting for 39% of closed treatment episodes (greater than the national proportion of 13%). Of the 1,465 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

- The vast majority (98%) of episodes were for clients seeking treatment for their own drug use.
- Almost three-quarters (74%) of episodes were for male clients.
- The median age of persons receiving treatment was 31 (males 31; females 33).
- Three-quarters (75%) of episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Correctional service was the most common source of referral (24% of episodes), followed by self-referrals (22%).

Treatment profile

- Treatment was most likely to occur in 'other' settings (45% of episodes). Treatment was also provided in non-residential and residential treatment facilities (20% for both).
- Three-quarters (76%) of episodes ended because the treatment was completed and 10% ended because there was a change in the main treatment type.
- The median number of days for a treatment episode was one.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (74% of episodes) by people who received assessment only for their own drug use, followed by other drugs (11%) and morphine (7%).

Counselling

Counselling was the second most common main treatment type reported in the Northern Territory in 2009–10, accounting for 21% of closed treatment episodes (less than half the national proportion of 42%). Of the 812 episodes where counselling was nominated as the main treatment type received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- More than three-quarters (77%) of episodes were for clients seeking treatment for their own drug use. The remaining episodes were provided to people seeking counselling related to someone else's drug use.
- More than three in five (62%) episodes were for male clients.
- The median age of persons receiving treatment was 33 (males 33; females 35).
- Three in ten (30%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (36% of episodes), followed by court diversion referrals (16%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (89% of episodes).
- The most common reason for cessation of treatment was that it was completed (43%). The next most common reason for episodes to end was that the client ceased to participate without providing notice to the service provider (26% of episodes ended this way).
- The median number of days for a treatment episode was 79.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (63% of episodes) by people who received counselling for their own drug use, followed by cannabis (22%).

Rehabilitation

Rehabilitation was the third most common main treatment type reported in the Northern Territory in 2009–10, and accounted for 16% of closed treatment episodes. Of the 610 episodes where rehabilitation was nominated as the main treatment received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- ✦ Given the nature of the treatment, all episodes 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 30 (for both males and females).
- ✦ Four in five (81%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- ✦ Self-referral was the most common source of referral 25% of episodes.

Treatment profile

- ✦ The vast majority (96%) of treatment occurred in a residential treatment facility.
- ✦ Treatment completion was the most common reason for episodes ending (23%). The next most common reasons for treatments to end were because the client ceased to participate against advice or the client ceased to participate without notifying the service provider (19% and 18% respectively).
- ✦ The median number of days for a treatment episode was 29.

Principal drug profile

- ✦ Alcohol was the most common principal drug of concern reported (82% of episodes), followed by cannabis (6%).

Symbols

- nil or rounded to zero
- .. not applicable

How to find out more

If you would like more detailed data about the Northern Territory'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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