The number of treatment agencies has remained relatively stable

The report includes data from publicly-funded treatment services in all states and territories, including those directly funded by the Department of Health and Ageing (DoHA).

Agencies deliver treatment through a variety of service delivery settings, including outreach locations or clients’ homes.

- In 2010–11, 666 alcohol and other drug treatment agencies provided data. This is the second highest number of reporting treatment agencies since reporting began in 2001–02.
- The proportion of non-government agencies to government agencies was 54% to 46%.
- In most jurisdictions, there were more non-government than government agencies. However, New South Wales and South Australia both had more government agencies (75% and 68%, respectively).
- As in previous years, in 2010–11 most treatment agencies were in Major cities (52%, 344 agencies) and Inner regional areas (27%, 182 agencies) (see Figure 3).

Alcohol and other drug treatment services 2010–11

Alcohol and other drug use is a significant concern to governments and the community and remains a leading cause of illness and disability in Australia. Alcohol and other drug treatment services are available across Australia to support people who are concerned about their own or someone else’s drug use, or who enter the criminal justice system as a result of drug use.

The AIHW reports annually on publicly-funded alcohol and other treatment services (AODTS) in Australia.

Fast facts

Clients:
- 67% of clients were male
- Median age of clients was 33
- 1 in 8 clients identified as being Aboriginal or Torres Strait Islander
- 87% of clients were born in Australia
- 96% of treatment episodes were for clients seeking treatment for their own drug use

Drugs of concern:
- 47% of treatment episodes were for alcohol use
- 22% of treatment episodes were for cannabis use
- 9% of treatment episodes were for heroin use
- 9% of treatment episodes were for amphetamine use

Agencies:
- 54% of treatment agencies were non-government agencies that provided 61% of treatment episodes
- 52% of treatment agencies were in Major cities and 27% were in Inner regional areas

Treatment:
- Counselling was provided in 2 in 5 episodes
- 68% of episodes were closed due to an ‘expected/compliant completion’

Related data sets

In addition to reporting data from the 2010–11 AODTS-National Minimum Data Set collection, the report also presents some information sourced from the following data sets:

- Specialist Homelessness Services National Minimum Data Set
- Mental health care service collections
- National Prisoner Health Census
The total number of treatment episodes provided to clients has increased

In 2010–11, there were around 150,500 closed treatment episodes—that is, specific interventions that ended in 2010–11. This is an increase of almost 5% on the number of closed treatment episodes in 2009–10.

Counselling continues to be the most common treatment type

Nationally, counselling was the most common main treatment type (41% of episodes), followed by withdrawal management (16%) (see Figure 1). Counselling was nearly twice as common for those seeking treatment for someone else’s drug use (75%) as for those seeking treatment for their own drug use (40%).

- Tasmania reported the highest rate of counselling (66%) and the Australian Capital Territory the lowest (17%).
- In the Northern Territory and the Australian Capital Territory, assessment only was the most common treatment (39% and 20% respectively).
- In Queensland, ‘information and education only’ was the most frequent main treatment type (33%).

Alcohol continues to be the most common principal drug of concern

Nationally, the most common principal drugs of concern were alcohol (47% of episodes) and cannabis (22%), followed by heroin and amphetamines (both 9%) and opioids other than heroin (5%) (see Figure 2). Reflecting the national picture, alcohol was also the most common principal drug of concern in all jurisdictions except Tasmania, where cannabis was equally common.

- Queensland had the lowest proportion of episodes where alcohol was the principal drug of concern (38%), while the Northern Territory had the highest (64%).
- There has been a steady decline in episodes with heroin as a principal drug of concern, from a peak of 18% (23,300 episodes) in 2003–04 to 9% (13,400 episodes) in 2010–11.

Clients may nominate up to five drugs of concern for each episode in addition to the principal drug of concern.

- Just under half of all episodes (70,900 episodes, 49%) had at least one other drug of concern in addition to their principal drug of concern.
- Alcohol was both the most commonly reported principal drug of concern (47%) and the most common drug of concern when all drugs of concern were considered (62%) (see Figure 2).
- Despite being reported as a principal drug of concern in only 1% of treatment episodes, nicotine was the fourth most common drug of concern reported overall, reported in 19% of all episodes.

Clients are mostly male, and mostly seeking treatment for their own substance use

Overall, most episodes involved male clients (67%) and the median age of clients was 33. Nearly all (96%) treatment episodes involved a client seeking treatment for their own substance use—just 4% were for clients seeking assistance for someone else’s drug use.

For most of the episodes where the client was seeking treatment for their own drug use, the client was male (68%), while the reverse was true for episodes where the client was seeking treatment for someone else’s drug use—for these episodes, 63% involved female clients.

While around 2% of the general population aged 10 or older were Aboriginal or Torres Strait Islanders, 13% of episodes involved Indigenous clients. Treatment episodes for Indigenous Australians were more likely to have alcohol as a principal drug of concern than episodes for non-Indigenous Australians (52% compared with 46%) and less likely to have amphetamines (7% compared with 9%) or heroin (6% compared with 10%).

Most episodes involved clients who were born in Australia (130,300 episodes, 87%)—this proportion was higher than Australian-born people in the general population (70%).

‘Keith’, an AODTS client*

Keith never thought of himself as the kind of person who would receive a drug or alcohol treatment. But when he decided to do something about his drinking in early 2011, he found that he was a fairly typical AODTS client. He was in his early thirties, was born in Australia and lived in a big city. He was primarily seeking treatment for his alcohol use, although he was also concerned about his cannabis habit.

He had always imagined alcohol and other drug treatment to be like the residential rehabilitation clinics that celebrities seemed to frequent, but his counsellor told him that rehabilitation represented the smallest proportion of government-funded treatment in Australia. Keith received counselling in a non-residential treatment facility. His treatment lasted about three weeks and ended when he completed the treatment.

The result for Keith was that he now feels he has more control over his drinking and is proud of what he has achieved through treatment.

* This is a hypothetical example constructed from common demographic and treatment characteristics and is not based on any one treatment episode.
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For more information

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