



Alcohol and other drug treatment services in Australia 2016-17: key findings

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Citation

AIHW

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Newer release available

In 2016-17, 836 publicly-funded alcohol and other drug treatment services provided just over 200,000 treatment episodes to an estimated 127,000 clients.


The top four drugs that led clients to seek treatment were alcohol (32% of all treatment episodes), amphetamines (26%), cannabis (22%) and heroin (5%). The proportion of closed treatment episodes where clients were receiving treatment for amphetamines has more than doubled over the last 10 years, from 11% of treatment episodes in 2007-08 to 27% in 2016-17. Two-thirds (66%) of all clients receiving treatment in 2016-17 were male and the median age of clients remains at 33 years.

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Findings from this report:

- AOD treatment agencies provided over 200,000 treatment episodes
- A total of 836 publicly-funded alcohol and other drug treatment agencies provided services to clients
- The top four drugs that led clients to seek AOD treatment were alcohol, amphetamines, cannabis and heroin
- An estimated 127,000 clients received AOD treatment in 2016-17

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Summary

Alcohol and other drug (AOD) treatment services across Australia provide a broad range of treatment services and support to people using drugs, and to their families and friends. These key findings present high level information for 2016-17 about publicly funded AOD treatment service agencies, the people they treat, and the treatment provided.

Many types of treatment are available in Australia to assist people with problematic drug use. Most aim to reduce the harm of drug use, for example counselling, information and education, and diversion programs, while some use a structured drug-free setting with abstinence-oriented interventions to help prevent relapse and develop skills and attitudes that assist clients to make changes leading to drug-free lifestyles.

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Agencies

The Australian Government and state and territory governments fund non-government and government organisations to provide a range of alcohol and other drug (AOD) treatment services. Services are delivered in residential and non-residential settings and include treatment such as detoxification and rehabilitation, counselling, and pharmacotherapy.

The Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS NMDS) contains information on publicly-funded alcohol and other drug treatment agencies.

Number of agencies

In 2016-17, 836 publicly-funded AOD treatment agencies reported to the AODTS NMDS. The number of agencies in each jurisdiction ranged from 15 in the Australian Capital Territory to 318 in New South Wales.

The number of agencies reporting to the AODTS NMDS increased from the previous year's total of 796, largely due to improved reporting for some agencies via new systems and funding variations in a few jurisdictions.


Over the last 10 years, there has been an increase nationally in the number of participating agencies, from 658 to 836, driven largely by increases in Queensland, Western Australia and South Australia.

Service sector

A mix of government and non-government agencies deliver government-funded AOD treatment services. Nationally, 58% of AOD treatment agencies were non-government, and these agencies provided over two-thirds (70%) of closed treatment episodes. Over the last 10 years, the proportion of non-government agencies nationally has increased from 50% to 58%. In New South Wales the majority (73%) of AOD treatment agencies were government agencies.

In each of the remaining states and territories, the majority of AOD treatment agencies were non-government agencies, with proportions ranging from 57% in South Australia to 100% in Victoria.

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Clients

Client numbers and characteristics

In 2016-17, there were 127,404 clients who received treatment from publicly-funded AOD treatment agencies across Australia. This equates to a rate of 600 clients per 100,000 people, or about 1 in 167 people in the general population. Around 96% of clients received treatment for their own drug use, and the remainder received support for someone else's drug use.

Age and sex

Over half of all clients were aged 20-39 (55%), 33% were aged 40 and over and 13% were aged 10-19. The age profile of clients has remained stable over the four years in which client data has been recorded in the AODTS NMDS. Similarly, the median age of clients has remained stable at 33 years.

Consistent with previous years, just under two-thirds (66%) of all clients receiving treatment in 2016-17 were male.

Cultural and linguistic diversity

In 2016-17, despite only comprising 2.7% of the Australian population aged 10 and over, 15% of AODTS clients were Indigenous Australians aged 10 and over. This equates to a rate of 3,313 clients per 100,000 Indigenous Australians, compared with 507 clients per 100,000 non-Indigenous Australians. Indigenous clients were almost 7 times as likely to receive treatment services as non-Indigenous clients.

The proportion of clients receiving AOD treatment services who were Indigenous Australians ranged from 6.3% in Victoria to 70% in the Northern Territory.

The majority (87%) of closed treatment episodes were for clients born in Australia, with the United Kingdom (3%) and New Zealand (3%) being the most common countries of birth for clients born outside Australia. These proportions are generally consistent with the Australian population.

In 2016-17, English was the preferred language of clients in 92% of closed treatment episodes.

Drugs of concern

People may seek AOD treatment services due to the problematic use of one or more drugs. For most people, however, there is one drug that is of most concern for them, and therefore the focus of the treatment they receive. This is referred to as their principal drug of concern. Clients can also report other drugs of concern (referred to as additional drugs of concern).

In 2016-17, the most common principal drugs of concern that led clients to seek treatment were alcohol (32% of all treatment episodes), amphetamines (26%), cannabis (22%) and heroin (5%).

The national patterns in closed treatment episodes for principal drugs of concern that lead clients to seek treatment were similar for Indigenous and non-Indigenous clients, although the proportions for alcohol (35%), amphetamines (27%) and cannabis (25%) for Indigenous clients were slightly higher than for non-Indigenous clients (32%, 25% and 21% respectively).

Across the states and territories, there was some variation in the four most common principal drugs of concern. Alcohol was the most common drug of concern in the Northern Territory (56% of episodes), the Australian Capital Territory (43%), Tasmania (38%), New South Wales (37%) and Victoria (30%); whereas, in South Australia and Western Australia, amphetamines were the most common principal drug of concern (37% and 36% of episodes, respectively). In Queensland, cannabis was the most common principal drug of concern, reported in 33% of episodes.

Nationally, clients seeking treatment for their own drug use received an average of 1.6 treatment episodes and just under half (44%) of clients received treatment for more than one drug of concern.

The proportion of closed treatment episodes where clients were receiving treatment for amphetamines has more than doubled over the last 10 years, from 11% of treatment episodes in 2007-08 to 27% in 2016-17. Between 2012-13 and 2016-17, the number of closed treatment episodes with amphetamines as a principal drug of concern increased by 123% (from 22,265 to 49,670 treatment episodes), while closed treatment episodes where heroin was the principal drug of concern decreased by 22% (from 12,817 to 9,988 treatment episodes).

Treatment

Many types of treatment are available in Australia to assist people with problematic drug use. Most aim to reduce the harm of drug use, for example counselling, information and education, and diversion programs, while some use a structured drug-free setting with abstinence-oriented interventions to help prevent relapse and develop skills and attitudes that assist clients to make changes leading to drug-free lifestyles.

In 2016-17, 200,751 closed treatment episodes were provided to clients. The number of closed treatment episodes has increased by 30% over the last 10 years, up from 153,998 in 2007-08. In the last year there has been a slight decrease in the number of reported treatment episodes, down from 206,635 in 2015-16. This decrease is largely due to transition issues arising from the introduction of new systems in some states.

Treatment types

Counselling continues to be the most common main treatment type provided to clients, comprising 2 in 5 (40%) closed treatment episodes for all clients.

Assessment only was the second most common main treatment type (16%), followed by support and case management only (14%) and withdrawal management (12%).

The proportion of episodes for the four most common main treatment types has changed over the last 10 years. Support and case management only has increased (from 8% to 14% of closed treatment episodes) while withdrawal management has decreased (from 17% to 12% of closed treatment episodes). Counselling and assessment only have slightly increased (from 37% to 40% of closed treatment episodes and from 14% to 16% of closed treatment episodes, respectively) although these proportions have fluctuated over the 10 years.

Treatment delivery setting

Non-residential treatment facilities, such as hospitals outpatient services and community health centres, were the most common delivery setting for most clients receiving treatment for heroin (76%), cannabis (71%), amphetamines (69%) or alcohol (68%) as their principal drug of concern.

Residential treatment facilities, where clients reside in a facility that is not their home or usual place of residence, were the second most common treatment setting for clients with amphetamines, heroin or alcohol (all 16%) as their principal drug of concern.

Outreach settings, that is, any outreach environment where AOD specialist treatment is provided that is not a client's home or usual place of residence and is not covered by non-residential and residential treatment facilities, were the second most common for clients receiving treatment for cannabis as their principal drug of concern; outreach settings were the second most common delivery setting (for 17% of clients).

Length of treatment

In 2016-17, for those clients seeking treatment for their own drug use the median duration of closed treatment episodes was just under 3 weeks (19 days). Almost 4 in 5 (80%) closed treatment episodes ended within 6 months.

The duration of closed treatment episodes varied by main treatment type. The median duration of closed treatment episodes was 54 days for clients receiving counselling, 21 days for clients receiving support and case management only, 8 days for clients receiving withdrawal management, and 1 day for clients who were provided with an assessment only.

Treatment duration also varied by principal drug of concern. The median duration of closed treatment episodes was 29 days for clients receiving treatment for heroin and for clients receiving treatment for amphetamines, 28 days for clients receiving treatment for alcohol, and 12 days for clients receiving treatment for cannabis. The median duration of heroin treatment episodes decreased substantially in 2016-17 in comparison with the previous year (29 days in 2016-17, compared with 39 days in 2015-16).

Over the 5 years to 2016-17, clients receiving treatment for heroin as their principal drug of concern tended to have longer treatment episodes compared with those clients receiving treatment for alcohol, amphetamines or cannabis.



Data


[AODTS 2016-17 key findings data visualisations](#)

Data

Data visualisations of the AODTS NMDS 2016-17: key findings, and the associated data cubes (for more detailed data presented in tabular form).

[View](#)

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Notes

Data quality statement

Alcohol and other drug treatment services NMDS, 2015-16

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Related material

Resources

[Infographic: 1 in every 170 Australians received treatment for alcohol and other drug use in 2016-17](#)

Resource

More than half of all drug treatment clients are aged 20-39; 2 in 3 were male and 1 in 7 clients were Indigenous. Explore what the most common drug is that people seek treatment for? and which drug treatment services more than doubled in the five years from 2012-13 to 2016-17.

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