Alcohol and other drug treatment services in South Australia 2007–08

Findings from the National Minimum Data Set (NMDS)

Highlights

In South Australia (SA) in 2007–08, 49 government and non-government funded alcohol and other drug treatment agencies provided 9,030 treatment episodes. This represented an increase of 5 treatment agencies and almost the same number of treatment episodes compared to 2006–07. The median age of persons receiving treatment for their own drug use and those seeking treatment in relation to someone else's drug use was similar to 2006–07 (34 years and 45 years respectively).

Alcohol was again the most common principal drug of concern (53%), followed by amphetamines (16%). Cannabis (10%) replaced heroin (8%) as the third most common principal drug of concern this year.

Assessment only episodes accounted for 5% more of the total treatment for South Australia in 2007–08 compared to 2006–07. Assessment only became the most common form of main treatment provided (30% of episodes), followed by counselling (26%), withdrawal management (detoxification) (19%) and rehabilitation (16%).

Contents

| Highlights | 1 |
|----------------------|---|
| Treatment agencies | 3 |
| Drugs of concern | |
| Treatment programs | 3 |
| How to find out more | |

About this bulletin

This bulletin summarises the main findings from the 2007–08 Alcohol and Other Drug Treatment Services (AODTS) NMDS data for South Australia. More detailed information about the 2007–08 collection and its findings can be found in the publication *Alcohol and other drug treatment services in Australia 2007–08: report on the National Minimum Data Set* (AIHW 2009). 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 2007–08 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 2007 to 30 June 2008.

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 2007–08 annual report (AIHW 2009).

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 658 government-funded alcohol and other drug treatment agencies supplied data for 2007–08. Of these agencies, 49 were located in South Australia, of which 41 were government agencies.

Treatment agencies in South Australia were most likely to be located in *Major cities* (65%), followed by *Inner regional* (16%) and *Outer regional* areas (14%).

Client profile

In South Australia, there were 9,030 closed treatment episodes in alcohol and other drug treatment services reported in the 2007–08 AODTS–NMDS collection. The vast majority (96%) of closed treatment episodes in South Australia involved clients seeking treatment for their own drug use. The remaining 4% 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 South Australia (69% and 31% respectively) were similar to the national proportions (66% and 34% respectively). However, of those treatment episodes reported for someone else's drug use in South Australia, female clients accounted for the majority (68%).

In South Australia, the median age of persons receiving treatment for their own drug use was 34 years. Of people seeking treatment in relation to someone else's drug use, the median age was 45 years. Persons aged 30–39 and 20–29 years accounted for the greatest proportion of episodes in South Australia (28% and 32% respectively).

Special population groups

The proportion of closed treatment episodes involving clients who identified as being of Aboriginal and/or Torres Strait Islander origin was slightly lower in South Australia than nationally (7% compared with 11%). 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 or primary health care services are not included in the AODTS–NMDS collection.

The majority (87%) of closed treatment episodes in South Australia were for clients born in Australia and 98% of treatment episodes were for clients whose preferred language was English.

Drugs of concern

This section reports only on the 8,712 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in South Australia.

Principal drug of concern

The 'principal drug of concern' refers to the main substance that the client states led them to seek treatment from the alcohol and other drug treatment agency. In South Australia in 2007–08, alcohol was the most common principal drug of concern in closed treatment episodes (53%), followed by amphetamines and total opioids (both at 16%). Included in the 16% of total opioids was heroin at 9%. Cannabis was the next most common principal drug of concern at 10% (Table 1). Compared with the national figures, South Australia had proportionally more episodes for alcohol and amphetamines and fewer for cannabis. Alcohol has risen steadily as the most common principal drug of concern from 43% in 2004–05 to 53% in 2007–08.

Table 1: Closed treatment episodes^(a) by principal drug of concern, South Australia and Australia, 2001–02 to 2007–08 (per cent)

| | South Australia | | | | | | | Total (Australia) 2007–08 | |
|---------------------------|------------------------|---------|---------|---------|---------|---------|---------|------------------------------|---------|
| Principal drug of concern | 2001-02 ^(b) | 2002-03 | 2003-04 | 2004-05 | 2005-06 | 2006-07 | 2007-08 | Per cent | Number |
| Alcohol | 41.9 | 47.4 | 46.6 | 43.4 | 44.7 | 49.3 | 52.8 | 44.5 | 65,702 |
| Amphetamines | 14.0 | 19.6 | 17.3 | 17.5 | 17.6 | 18.7 | 15.8 | 11.2 | 16,588 |
| Benzodiazepines | 1.9 | 2.3 | 2.1 | 2.5 | 1.9 | 1.9 | 2.0 | 1.6 | 2,487 |
| Cannabis | 11.6 | 10.1 | 10.2 | 11.5 | 14.4 | 10.1 | 10.3 | 21.6 | 31,864 |
| Cocaine | 0.4 | 0.3 | 0.1 | 0.3 | 0.2 | 0.3 | 0.2 | 0.3 | 457 |
| Ecstasy | 0.1 | 0.3 | 0.4 | 0.5 | 0.7 | 0.7 | 1.0 | 0.8 | 1,321 |
| Nicotine | 1.5 | 0.1 | 0.4 | 1.2 | 0.8 | 0.6 | 0.7 | 1.7 | 2,548 |
| Opioids | | | | | | | | | |
| Heroin | 10.5 | 13.2 | 14.7 | 13.1 | 9.4 | 8.3 | 8.9 | 10.5 | 15,571 |
| Methadone | 3.9 | 1.6 | 1.6 | 2.0 | 2.2 | 2.5 | 1.5 | 1.5 | 2,296 |
| Morphine | 1.8 | 2.9 | 3.9 | 3.6 | 2.7 | 3.1 | 2.4 | 0.9 | 1,390, |
| Total opioids(c) | 20.7 | 18.8 | 22.1 | 22.2 | 16.2 | 13.9 | 16.1 | 12.9 | 21,380 |
| All other drugs(d) | 2.4 | 1.0 | 0.6 | 1.1 | 3.6 | 4.6 | 1.1 | 3.6 | 5,374 |
| Not stated | 5.5 | _ | _ | _ | _ | _ | _ | _ | _ |
| Total (per cent) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.00 | 100.0 | •• |
| Total (number) | 6,699 | 6,946 | 7,234 | 7,591 | 8,766 | 8,709 | 8,712 | •• | 147,721 |

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

⁽b) In 2001–02 South Australia supplied client registration data rather than treatment episode data, therefore the percentages are based on clients, not treatment episodes.

⁽c) The total opioids row includes the balance of opioids according to the Australian Standard Classification of Drugs of Concern.

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

Age and sex

The principal drug of concern varied by age in South Australia. For clients aged 10–19 years, cannabis was the most common principal drug of concern nominated (39% of episodes), while for clients aged 20 years and over alcohol was the most common principal drug of concern—highest among those aged 60 years and over (93%).

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). Almost half (47%) of all treatment episodes in South Australia involved at least one other drug of concern (in addition to the principal drug of concern). In episodes where other drugs have been specified, 6,320 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, cannabis was reported as the principal drug of concern in around 10% of episodes, but was reported as a drug of concern (either 'principal' or 'other') in almost 30% of treatment episodes.

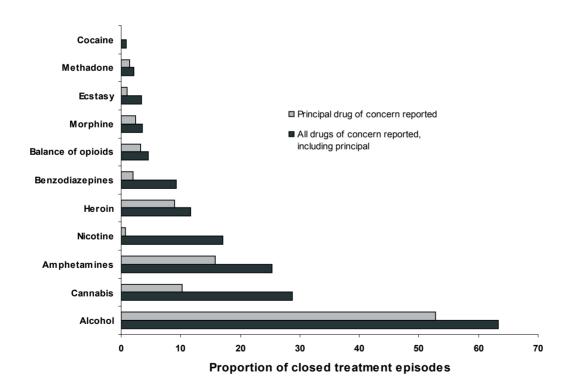


Figure 1: Closed treatment episodes by principal drug of concern and all drugs of concern, South Australia, 2007–08

Alcohol

In South Australia, alcohol was the most common principal drug of concern for which treatment was sought, accounting for 53% of closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 63% of episodes included alcohol.

Of the 4,598 episodes where alcohol was nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (72%) of episodes were for male clients.
- The median age of persons receiving treatment was 38 years (males 37 years; females 39 years).
- Around 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Referrals from 'other' sources was the most common source of referral (31% of episodes), followed by self-referral (26%) and hospitals (16%).

Drug profile

- 36% of episodes included at least one other drug of concern. In episodes where other drugs have been specified, 2,265 instances of other drugs of concern were recorded—18% were for nicotine, 16% cannabis and 7% amphetamines.
- The majority (72%) of episodes involved clients who reported never having injected drugs. Another 6% of episodes involved clients who reported being current injectors, while 15% involved clients who reported they had injected drugs in the past. Caution should be used, however, when interpreting data for 'injecting drug use' due to the 6% 'not stated' response for this item.

Treatment profile

- The most common main treatment type received was assessment only (35% of episodes), followed by counselling (22%) and withdrawal management (detoxification) (21%).
- Treatment was most likely to occur in a non-residential treatment facility (76% of episodes), followed by a residential treatment facility (19%).
- The median number of days for a treatment episode was 5.

Amphetamines

In South Australia, amphetamines were the second most common principal drug of concern for which treatment was sought, accounting for 16% of closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 25% of episodes included amphetamines.

Of the 1,375 episodes where amphetamines were nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (70%) of episodes were for male clients.
- The median age of persons receiving treatment was 31 years (males 32 years; females 30 years).
- Around 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (33% of episodes), followed by referrals from police diversion programs designed to direct people charged with drug-related crimes to treatment (20%).

Drug profile

- Injecting was the usual method of use (62% of episodes), followed by ingestion (18%).
- 62% of episodes included at least one other drug of concern. In episodes where other drugs have been specified, 1,489 instances of other drugs of concern were recorded—38% were for cannabis, 24% alcohol and 17% nicotine.
- The majority (55%) of episodes involved clients who reported being current injectors, while 19% involved clients who injected drugs in the past (11% between 3 and 12 months ago and 8% 12 or more months ago). The remaining 21% of episodes involved clients who reported never having injected drugs.

Treatment profile

- Counselling was the most common main treatment type received (36% of episodes), followed by assessment only (29%) and rehabilitation (18%).
- Treatment was most likely to take place in a non-residential treatment facility (82%), followed by a residential treatment facility (13%).
- The median number of days for a treatment episode was 17.

Cannabis

In South Australia, cannabis was the third most common principal drug of concern for which treatment was sought, accounting for 10% (or 901 of 8,712) closed treatment episodes in 2007–08. When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 29% of episodes included cannabis.

Of the 901 episodes where cannabis was nominated as the principal drug of concern in 2007–08:

Client profile

- The majority (69%) of episodes were for male clients.
- The median age of clients receiving treatment was 27 years (27.5 years for males; 26 years for females).
- Around 10% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (33% of episodes), followed by referrals from police diversions (12%) and hospitals (9%).

Drug profile

- Smoking was the most common method of use (91% of episodes), followed by ingestion (8%).
- 62% of episodes included at least one other drug of concern. In episodes where other episodes have been specified, 832 instances of other drugs of concern were recorded—35% were for alcohol, 22% amphetamines and 21% nicotine.
- The majority (60%) of episodes involved clients who reported never having injected drugs. A further 11% of episodes involved clients who reported being current injectors, while 25% 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 'not stated' response for this item (5% of episodes).

Treatment profile

- Counselling was the most common main treatment type received (35% of episodes), followed by assessment only (23%) and rehabilitation (19%).
- Treatment was most likely to occur in a non-residential treatment facility (74% of episodes) followed by a residential treatment facilities (16%).
- The median number of days for a treatment episode was 15.

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 sub-sections relating to principal drug of concern and treatment programs.

Of all closed treatment episodes in South Australia in 2007–08, assessment only was the most common form of main treatment provided (30% of episodes), followed by counselling (26%), withdrawal management (detoxification) (19%) and rehabilitation (16%) (Table 2).

Table 2: Closed treatment episodes by main treatment type, South Australia and Australia, 2002–03 to 2007–08 (per cent)

| | South Australia | | | | | | • | Total (Australia) 2007–08 | |
|--|-----------------|---------|---------|---------|---------|---------|----------|------------------------------|--|
| Main treatment type | 2002-03 | 2003-04 | 2004-05 | 2005-06 | 2006-07 | 2007-08 | Per cent | Number | |
| Withdrawal management (detoxification) | 21.6 | 19.8 | 20.8 | 18.5 | 20.3 | 18.9 | 16.2 | 24,999 | |
| Counselling | 23.3 | 22.7 | 25.2 | 27.2 | 29.4 | 26.4 | 37.3 | 57,470 | |
| Rehabilitation | 22.6 | 20.8 | 18.8 | 13.4 | 13.1 | 16.2 | 7.2 | 11,099 | |
| Support & case management only | 2.5 | 3.8 | 1.2 | 5.1 | 3.2 | 0.9 | 8.0 | 12,279 | |
| Information and education only | 1.9 | 1.3 | 1.3 | 4.4 | 1.7 | 2.0 | 9.8 | 15,086 | |
| Assessment only | 21.8 | 22.8 | 22.8 | 24.0 | 24.7 | 29.8 | 14.3 | 21,976 | |
| Pharmacotherapy ^(a) | 5.5 | 7.9 | 7.9 | 5.7 | 5.2 | 4.3 | 2.1 | 3,178 | |
| Other | 0.8 | 1.0 | 2.0 | 1.7 | 2.4 | 1.5 | 5.1 | 7,911 | |
| Total (per cent) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.00 | 100.0 | | |
| Total (number) | 7,440 | 7,613 | 7,952 | 9,100 | 9,020 | 9,030 | | 153,998 | |

⁽a) The total for pharmacotherapy as the main treatment type represents a small proportion of pharmacotherapy treatment in South Australia, as agencies whose sole activity is to prescribe and/or dose for methadone or other opioid pharmacotherapies are excluded from the AODTS—NMDS.

Note: South Australia did not provide data for main treatment in 2001—02.

Nationally, counselling accounted for proportionally more episodes but was also the most common treatment provided (37%). South Australia provided proportionally more episodes for assessment only, withdrawal management (detoxification) and rehabilitation than the whole of Australia and fewer episodes for counselling, support and case management only and information and education only.

Assessment only

Assessment only was the most common main treatment type reported in South Australia in 2007–08, accounting for 30% of closed treatment episodes. Of the 2,691 episodes where assessment only was nominated as the main treatment received in 2007–08:

Client profile

- · Almost all episodes were for clients seeking treatment for their own drug use.
- The majority (77%) of episodes were for male clients.
- The median age of persons receiving treatment was 32 years (males 32 years; females 32 years).
- Around 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Referrals from 'other' sources were the most common source of referral (45% of episodes), followed by self-referrals (22%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (98% of episodes).
- The majority of episodes ended because the treatment was completed (79%). The
 next most common reason for ending a treatment episode was the client ceased to
 participate without notifying the service provider (8% of episodes ended this way).
- The median number of days for a treatment episode was 1.

Principal drug profile

 Alcohol was the most common principal drug of concern reported (59% of episodes) by people who received assessment only, followed by amphetamines (15%) and cannabis (8%).

Counselling

Counselling was the second most common main treatment type reported in South Australia 2007–08, accounting for 26% of closed treatment episodes. Of the 2,383 episodes where counselling was nominated as the main treatment type received:

Client profile

- The vast majority (88%) of episodes were for clients seeking treatment for their own drug use. The remaining 12% were for clients seeking treatment related to someone else's drug use.
- Nearly two thirds (64%) of episodes were for male clients.
- The median age of persons receiving treatment was 34 years (males 33 years; females 36 years).
- Around 6% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (26% of episodes), followed by referrals from alcohol and other drug treatment services (12%) and referrals from 'other' sources (8%).

Treatment profile

- Most (92%) episodes took place in a non-residential treatment facility.
- The most common reason for treatment episodes to end was because the treatment was completed (45%) or because the client ceased to participate without notifying the service provider (35%).
- The median number of days for a treatment episode was 78.

Principal drug profile

Alcohol was the most common principal drug of concern reported (47% of episodes) by people seeking counselling for their own drug use, followed by amphetamines (23%) and cannabis (15%).

Withdrawal management (detoxification)

Withdrawal management (detoxification) was the third most common main treatment provided in South Australia in 2007–08, accounting for 19% of closed treatment episodes. Of the 1,707episodes where withdrawal management (detoxification) was nominated as the main treatment type received in 2007–08:

Client profile

- Due to the nature of withdrawal management (detoxification) all episodes were for clients seeking treatment for their own drug use.
- The majority (65%) of episodes were for male clients.
- The median age of persons receiving treatment was 38 years (males 38 years; females 38 years).
- Around 5% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Self-referral was the most common source of referral (70% of episodes), followed by referrals from hospitals (21%).

Treatment profile

- Treatment was most likely to occur in a residential treatment facility (70% of episodes), followed by a non-residential treatment facility (29%).
- 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 (14% of episodes ended this way).
- The median number of days for a treatment episode was 6.

Principal drug profile

 Alcohol was the most common principal drug of concern reported (56% of episodes) by people who received withdrawal management, followed by heroin (10%) then amphetamines and cannabis both at 9%.

How to find out more

If you would like more detailed data about South Australia'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 website at <www.aihw.gov.au/publications/index.cfm/title/10726>.

Acknowledgment

The AIHW would like to acknowledge the input of data providers and the IGCD AODTS-NMDS Working Group, as well as the funding provided by the Australian Government Department of Health and Ageing for this project.

Reference

AIHW 2009. Alcohol and other drug treatment services in Australia 2007–08: report on the national minimum data set. Drug treatment series no. 9. Cat. no. HSE 73. Canberra: AIHW.

| | other drug treatment se | rvices in South | | | |
|-------------|-------------------------|-----------------|--|--|--|
| Alcohol and | other are | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

© Australian Institute of Health and Welfare 2009

This work is copyright. Apart from any use as permitted under the Copyright Act 1968, no part may be reproduced without prior written permission from the Australian Institute of Health and Welfare. Requests and enquiries concerning reproduction and rights should be directed to the Head, Media and Publishing Unit, Australian Institute of Health and Welfare, GPO Box 570, Canberra ACT 2601.

A complete list of the Institute's publications is available from the Institute's website <www.aihw.gov.au>.

Cat. no. HSE 80 ISBN 978 1 74024 980 5

Suggested citation

AlHW (Australian Institute of Health and Welfare) 2009. Alcohol and other drug treatment services in South Australia 2007–08: findings from the National Minimum Data Set. Cat. no. HSW 80. Canberra: AlHW.

Australian Institute of Health and Welfare

Board Chair Director
Hon. Peter Collins, AM, QC Penny Allbon

Any enquiries or comments on this publication should be directed to:

Ms Amber Jefferson Australian Institute of Health and Welfare GPO Box 570 Canberra ACT 2601 Phone: (02) 6244 1000

Email: amber.jefferson@aihw.gov.au

Published by the Australian Institute of Health and Welfare

Printed by Union Offset Printers