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

*Findings from the national minimum data set*

## Highlights

This bulletin presents summary findings of the 2007–08 Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS–NMDS). It is the eighth in a series of annual bulletins focusing on clients of government-funded alcohol and other drug treatment services. In particular, it highlights the drug use clients are concerned about and the types of treatment they receive. The data presented in this bulletin are derived from the comprehensive AODTS–NMDS 2007–08 national report (AIHW 2009).

## Clients

Around 154,000 treatment episodes were provided during 2007–08, an increase of about 7,000 episodes compared to 2006–07. The vast majority of treatment episodes (96%) were for people seeking treatment for their own drug use. The largest group of clients was males aged 20–29 years; this finding has been remarkably consistent over time. Younger clients were more likely to receive treatment for cannabis use and older clients for alcohol use.

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## Drugs

Alcohol remains the most common principal drug of concern increasing to 44% of all treatment episodes in 2007–08 compared with 38% in 2002–03. Treatment for heroin use has been declining over time to 11% in 2007–08 compared with 18% in 2002–03; also the actual number of episodes has declined. Treatment for cannabis and amphetamines has remained stable, at about 22% and 11% respectively.

## Treatment

Counselling remained the most common treatment provided at about 2 in 5 episodes. The proportion of clients in withdrawal management (detox) has declined since 2002–03, even though the number of detox episodes has increased.

## Agencies

In 2007–08, more treatment episodes were provided in more treatment agencies compared with previous years. Integration and collocation of government and non-government services may have an increasing impact on the profile of alcohol and other drug treatment agencies in future years.

## The AODTS–NMDS collection

The AODTS–NMDS was implemented to help monitor and evaluate key objectives of the National Drug Strategy 2004–2009 and to help plan, manage and improve the quality of alcohol and other drug treatment services.

The AODTS–NMDS is a nationally agreed set of data items collected by government-funded service providers in both the government and non-government sectors. These data are collated by state and territory health authorities and compiled into a national data set by the Australian Institute of Health and Welfare (AIHW). The AODTS–NMDS provides demographic information about clients who use treatment services, data about the drugs of concern to clients and information about the treatment provided. Some information about treatment agencies, such as where they are located, is also collected.

## Which agencies and clients?

In scope for the collection were the following agencies and clients:

- all publicly funded (at state, territory and/or Australian Government level) government and non-government agencies that provided one or more specialist alcohol and/or other drug treatment services
- all clients who received treatment at an in-scope alcohol and other drug treatment service during the period 1 July 2007 to 30 June 2008.

There is a large and diverse range of alcohol and other drug treatment services in Australia, not all of which provide information for the AODTS–NMDS. Details of clients and agencies excluded from the AODTS–NMDS are available in Section 1.2 of the AODTS–NMDS 2007–08 report (AIHW 2009).

### Closed treatment episodes

The AODTS–NMDS counts ‘closed treatment episodes’ rather than clients. A closed treatment episode refers to a period of contact, with defined start and end dates, between a client and a treatment agency.

The number of episodes is not the same as the number of people receiving alcohol and other drug treatment. Some clients participate in more than one treatment episode during the year or more than one episode at a time. Clients may also be accessing treatment from more than one agency at the same time.

### Data quality issues

The data quality for 2007–08 was good overall. For example, nationally, non-response for Indigenous status was 5%. Readers requiring details about data quality issues should consult the AODTS–NMDS 2007–08 report (AIHW 2009).

### Treatment agencies

A total of 658 government-funded alcohol and other drug treatment agencies supplied data for 2007–08. New South Wales had the largest number of treatment agencies (41% of all agencies in Australia), followed by Victoria (21%) and Queensland (16%).

Government and non-government agencies had around 50% of agencies each, keeping in mind that Western Australia has been moving to integrated government and non-government services. (These integrated services are reported as government services.)

As expected, most treatment agencies were located in Major cities (57%), followed by Inner regional areas (26%).

### Client profile

There were 153,998 episodes reported in the 2007–08 AODTS–NMDS collection. This is an increase of 6,673 treatment episodes compared with 2006–07. The increase in episodes is partly related to New South Wales reporting consultation liaison services this year. Most jurisdictions also had small increases in the number of episodes.

Most episodes (96%) involved clients seeking treatment for their own alcohol or other drug use; 4% of episodes were provided to people seeking treatment in relation to someone else's alcohol or other drug use.

### Age and sex

The median age of persons receiving treatment for their own drug use was 32 years. For people receiving treatment relating to someone else's drug use, the median age was 42 years.

Around one-third (31%) of all episodes were for persons aged 20–29 years, and more than one-quarter (29%) were for persons aged 30–39 years. Male clients again accounted for two-thirds (66%) of all episodes. Male clients consistently make up the majority of clients in the collection each year.

In episodes where the person was seeking treatment in relation to someone else's drug use, females accounted for the majority of episodes (66%).

### Special population groups

Around 11% (16,440) of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin. There is more information about alcohol and other drug services provided to Indigenous Australians in other data collections; the NMDS does not collect data from all Aboriginal and Torres Strait Islander treatment services.

The majority (86%) of episodes were for clients born in Australia and 96% of episodes were for clients whose preferred language was English. The next most common preferred language was Australian Indigenous languages, albeit at less than 1% of episodes.

It is not appropriate to compare population groups in the AODTS–NMDS with population groups in the Australian community because the AODTS–NMDS is based on a count of treatment episodes rather than clients.

### Drugs of concern

Drugs of concern are recorded only for clients seeking assistance for their own drug use. Therefore this section of the bulletin excludes the 6,277 episodes where clients were seeking assistance related to someone else's drug use.

#### Principal drug of concern

The 'principal drug of concern' refers to the main substance that the client stated led them to seek treatment from the alcohol and other drug treatment agency.

**Table 1: Trends in principal drug of concern<sup>(a)</sup>, 2001–02 to 2007–08 (per cent)**

Principal drug of concern	2001–02 <sup>(b)</sup>	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08
Alcohol	37.0	38.0	37.5	37.2	38.7	42.3	44.5
Amphetamines	10.8	10.7	11.0	10.9	11.0	12.3	11.2
Benzodiazepines	2.4	2.1	2.1	1.9	1.8	1.6	1.7
Cannabis	21.0	22.0	22.0	23.0	24.6	22.8	21.6
Cocaine	0.7	0.3	0.2	0.3	0.3	0.3	0.3
Ecstasy	0.2	0.3	0.4	0.4	0.6	0.7	0.9
Heroin	17.7	18.4	18.0	17.2	13.6	10.6	10.5
Methadone	2.3	1.8	1.9	1.8	1.7	1.6	1.6
Other opioids	2.0	1.8	1.9	2.0	2.0	2.2	2.4
All other drugs <sup>(c)</sup>	5.2	3.9	4.6	5.3	5.7	5.5	5.4
Not stated	0.7	0.5	0.5	—	—	—	—
<b>Total (per cent)</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>Total (number)</b>	<b>113,231</b>	<b>123,032</b>	<b>129,331</b>	<b>135,202</b>	<b>144,963</b>	<b>140,475</b>	<b>147,721</b>

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

(b) Queensland supplied data for police diversion clients only and South Australia supplied client registration data rather than treatment episode data.

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

Source: AIHW 2009, Table 4.2.

Nationally in 2007–08, alcohol was again the most common principal drug of concern reported in episodes (44%), followed by cannabis (22%), opioids (14%, with heroin accounting for 11%) and amphetamines (11%) (Table 1). These proportions are very similar to previous years, with alcohol continuing its slow increase.

## Age and sex

Younger clients (aged 10–19 years) most frequently reported cannabis as their principal drug of concern (43% of episodes) followed by alcohol (34%). For clients aged 20 years and over, alcohol was the most common principal drug of concern. In the 20–29 year age group, alcohol made up 32% of episodes, rising to 84% of episodes for those aged 60 years and over.

Most episodes were provided to male clients (66%). Males have accounted for the majority of episodes since 2001–02. The largest group of clients was males aged 20–29 years. This finding has been remarkably consistent over time. Females make up the large majority of clients seeking treatment related to the drug use of someone else (66%).

## Special population groups

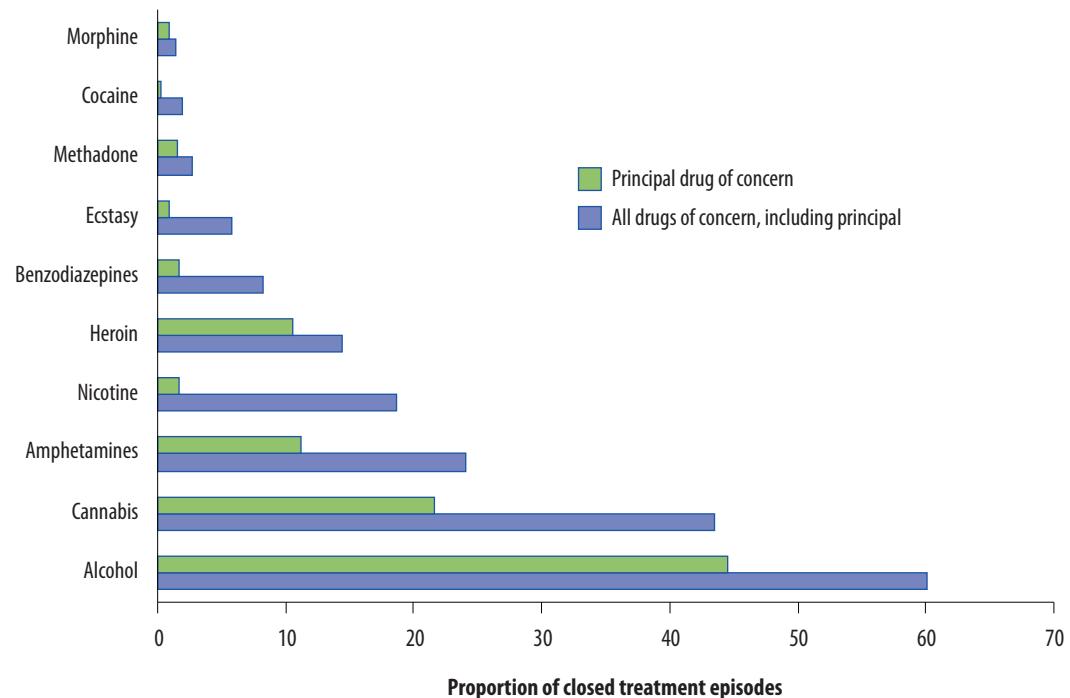
Indigenous Australian clients reported the same leading principal drugs of concern as the whole treatment population—alcohol (53% of episodes), cannabis (22%), opioids (10%, with heroin accounting for 7%) and amphetamines (9%).

Alcohol was more likely to be nominated by Indigenous Australian clients (53% of episodes compared with 44% for non-Indigenous Australians), and opioids less likely (10% compared with 15%). However, these proportions have not been adjusted for age.

### 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).

Just over half (54%) of all episodes involved at least one other drug of concern (in addition to the principal drug of concern). When all drugs of concern are considered, more than half (60%) of all episodes included alcohol as a drug of concern, and 44% of episodes included cannabis as a drug of concern (Figure 1).



*Note:* Excludes 6,277 episodes where clients were seeking treatment for another person's drug use.  
*Source:* AIHW 2009, Figure 4.2.

**Figure 1: Principal drug of concern and all drugs of concern, 2007–08**

## Alcohol

Alcohol was the most common principal drug of concern for which treatment was sought in 2007–08. Alcohol accounted for 44% of episodes; the next most common principal drug of concern was cannabis (22%).

Alcohol has been the most common principal drug of concern in each year since the data collection started in 2001–02. It has always accounted for 37% or more of episodes as the principal drug of concern.

In 2007–08, alcohol was involved in 60% of all episodes as either the principal or other nominated drug of concern.

Of the 65,702 episodes where alcohol was nominated as the principal drug of concern:

- The majority of episodes (69%) involved male clients and the median age of persons receiving treatment was 36 years. Approximately 13% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Other drug/s of concern were mentioned in 45% of episodes where alcohol was the principal drug of concern. Cannabis was most likely to be mentioned as a secondary drug of concern in alcohol-focused treatments (making up 36% of other drugs).
- Counselling was the most common main treatment received (39% of episodes), followed by withdrawal management (detoxification) (19%)
- The median number of days for a treatment episode was 16.

## Cannabis

Cannabis was the second most common principal drug of concern for which treatment was sought in 2007–08, accounting for 22% of episodes. When all drugs of concern are considered, 44% of episodes included cannabis.

In 2007–08, of the 31,864 episodes where cannabis was nominated as the principal drug of concern:

- The majority (70%) of episodes were for male clients and the median age of persons receiving treatment was 26 years. Approximately 11% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Smoking was the most common method of use (91% of episodes), followed by inhaling (4%).
- 60% of episodes had at least one other drug of concern reported. Of these episodes, 32,566 instances of other drugs of concern were recorded—36% were for alcohol, 21% nicotine and 19% amphetamines.
- Counselling was the most common main treatment received (33% of episodes), followed by information and education only (26%) and withdrawal management (detoxification) (12%).
- The median number of days for a treatment episode was 12.

## Amphetamines

Amphetamines were the third most common principal drug of concern for which treatment was sought in 2007–08, accounting for 11% of episodes. When all drugs of concern are considered, 24% of episodes included amphetamines.

In 2007–08, of the 16,588 episodes where amphetamines were nominated as the principal drug of concern:

- The majority (68%) of episodes were for male clients and the median age of persons receiving treatment was 29 years. Approximately 9% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Injecting was the most common method of use (66% of episodes), followed by smoking (17%). The majority (51%) of episodes involved clients who reported being current injectors, and 21% involved clients who reported they had injected drugs in the past.
- Two-thirds included at least one other drug of concern. From these episodes, 21,028 instances of other drugs of concern were reported—33% were for cannabis, 22% alcohol and 10% for nicotine.
- Counselling was the most common main treatment received (42% of episodes), followed by assessment only (17%) and rehabilitation (14%).
- The median number of days for a treatment episode was 23, representing a 5-day increase since 2006–07.

## Heroin

Heroin was the fourth most common principal drug of concern for which treatment was sought in 2007–08, accounting for 11% of episodes. When all drugs of concern are considered, 14% of episodes included heroin.

In 2007–08, of the 15,571 episodes where heroin was nominated as the principal drug of concern:

- The majority (66%) of episodes were for male clients and the median age of persons receiving treatment was 31 years. Approximately 7% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Injecting was the most common usual method of use (91% of episodes), followed by smoking (5%). The majority (62%) of episodes involved clients who reported being current injectors, and 28% involved clients who reported they had injected drugs in the past.
- 67% of episodes included at least one other drug of concern. Of these episodes, 20,653 instances of other drugs of concern were recorded—25% were for cannabis and 19% for amphetamines.
- Counselling was the most common main treatment received (29% of episodes), followed by withdrawal management (detoxification) (23%) and assessment only (16%).
- The median number of days for a treatment episode was 29.

## Benzodiazepines

Benzodiazepines as a principal drug of concern accounted for less than 2% of episodes in 2007–08. When all drugs of concern are considered, 8% of episodes included benzodiazepines.

In 2007–08, of the 2,487 episodes where benzodiazepines were nominated as the principal drug of concern:

- The majority (52%) of episodes were for female clients and the median age of persons receiving treatment was 35 years. Approximately 5% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Ingestion was the most common method of use (94% of episodes), followed by injecting (4%).
- 66% of episodes included at least one other drug of concern. Of these episodes, 2,926 instances of other drugs of concern were recorded—21% were for alcohol, 19% for cannabis, 12% each for amphetamines and nicotine.
- Withdrawal management (detoxification) was the most common main treatment received (32% of episodes), followed by counselling (30%).
- The median number of days for a treatment episode was 18.

## Ecstasy

Ecstasy as a principal drug of concern accounted for less than 1% of episodes in 2007–08. When all drugs of concern are considered, 6% of episodes included ecstasy.

In 2007–08, of the 1,321 episodes where ecstasy was nominated as the principal drug of concern:

- The majority (76%) of episodes were for male clients and the median age of persons receiving treatment was 21 years. Approximately 4% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Ingestion was the most common method of use (91% of episodes), followed by injecting (3%), smoking (2%) and sniffing (1%).
- 64% of episodes included at least one other drug of concern. Of these episodes, 1,558 instances of other drugs of concern were recorded—33% for alcohol, 24% for cannabis and 20% for amphetamines.
- Counselling was the most common main treatment received (37% of episodes), followed by information and education only (35%) and assessment only (10%).
- The median number of days for a treatment episode was 4 (half the 8-day duration in 2006–07).

## Cocaine

Cocaine as a principal drug of concern accounted for a very small proportion of episodes in 2007–08 (< 1%). When all drugs of concern are considered, 2% of episodes included cocaine.

In 2007–08, of the 457 closed treatment episodes where cocaine was nominated as the principal drug of concern:

- The majority (71%) of episodes were for male clients and the median age of persons receiving treatment was 30 years. Approximately 6% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Sniffing was the most common method of use (46% of episodes), followed by injecting (29%).
- 69% of episodes included at least one other drug of concern. Of these episodes, 602 instances of other drugs of concern were recorded—20% were for alcohol, 18% each for amphetamines and cannabis.
- Counselling was the most common main treatment received (44% of episodes), followed by assessment only (15%) and withdrawal management (detoxification) (13%).
- The median number of days for a treatment episode was 22 (up from 17 in 2006–07).

## Treatment programs

'Main treatment type' is defined as 'the main activity determined at assessment by the treatment provider to treat the client's alcohol and/or other drug problem'. Data presented in this section relate to all clients—both those seeking treatment for their own use and those seeking treatment about someone else's alcohol or other drug use. (The subsections relating to principal drug of concern only relate to clients seeking treatment for their own use.)

Nationally in 2007–08, as in previous years, counselling was the most common main treatment provided (37% of episodes), followed by withdrawal management (16%), assessment only (14%) and information and education only (10%) (Table 2). The proportional increase in 'other' main treatments since 2006–07 is related to changes in reporting in New South Wales.

**Table 2: Trends in main treatment type, 2001–02 to 2007–08 (per cent)**

Main treatment type	2001–02 <sup>(a)</sup>	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08
Withdrawal management (detox)	19.1	18.9	18.4	17.9	17.1	16.6	16.2
Counselling	38.9	41.5	37.6	40.2	37.8	38.7	37.3
Rehabilitation	6.3	7.5	8.6	7.7	7.5	7.4	7.2
Support & case management only	6.1	6.9	8.4	7.9	8.2	8.3	8.0
Information and education only	9.8	8.0	7.6	8.9	9.7	9.3	9.8
Assessment only	14.6	12.7	14.9	12.4	15.3	15.1	14.3
Other <sup>(b)</sup>	5.1	4.4	4.5	5.0	4.4	4.5	7.2
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<b>Total (number)</b>	<b>113,705</b>	<b>130,930</b>	<b>136,869</b>	<b>142,144</b>	<b>151,362</b>	<b>147,325</b>	<b>153,998</b>

(a) Excludes South Australia.

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

Source: AIHW 2009, Table 5.1.

17% of episodes (excluding Victoria where this data item is not collected) involved at least one other treatment type in addition to the main treatment. This proportion is likely to be an underestimate of treatment clients who received multiple treatment types because different treatments may be reported as separate episodes.

Episodes involving Indigenous clients were most likely to involve counselling (35%), followed by assessment only (18%) and withdrawal management (12%).

## Counselling

Counselling was the most common main treatment provided in 2007–08, accounting for 37% of episodes. Of these episodes:

- 8% were for clients seeking treatment in relation to the drug use of someone else; the balance of episodes were for people seeking treatment for their own substance use.
- The majority (64%) of episodes were for male clients and the median age of persons receiving treatment was 33 years. Approximately 10% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Treatment was most likely to occur in a non-residential treatment facility (94% of episodes), rather than residential, outreach or home-based settings.
- The median number of days for a treatment episode was 47.
- Alcohol was the most common principal drug of concern reported (50% of episodes) by people seeking treatment for their own drug use, followed by cannabis (20%), amphetamines (13%) and heroin (9%).

### Withdrawal management (detoxification)

Withdrawal management was the second most common main treatment provided in 2007–08, accounting for 16% of episodes. Of these episodes:

- By definition, all episodes were for clients seeking treatment for their own drug use.
- The majority (65%) of episodes were for male clients and the median age of persons receiving treatment was 35 years. Approximately 8% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- The majority (60%) of episodes occurred in a residential treatment facility; 30% of episodes were provided in a non-residential setting; and 8% at the client's home.
- The median number of days for a treatment episode was 8.
- Alcohol was the most common principal drug of concern reported (49% of episodes), followed by cannabis (15%) and heroin (14%).

### Assessment only

Assessment only was the third most common main treatment provided in 2007–08, accounting for 14% of episodes. Of these episodes:

- Almost all (99%) episodes were for clients seeking treatment for their own drug use.
- The majority (74%) of episodes were for male clients and the median age of persons receiving treatment was 32 years. Approximately 13% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- The majority (84%) of episodes occurred in a non-residential treatment facility.
- The median number of days in treatment was 2 compared with 1 day in 2006–07.
- Alcohol was the most common principal drug of concern reported (50% of episodes) by people seeking treatment for their own drug use, followed by cannabis (15%) and amphetamines (13%).

The method of counting assessment episodes may differ among states/territories and comparison of data nationally and across jurisdictions should be made with caution.

### Information and education only

Information and education only was the fourth most common main treatment provided in 2007–08, accounting for 10% of episodes. Of these episodes:

- 97% were for clients seeking treatment for their own drug use.
- The majority (72%) of episodes were for male clients and the median age of persons receiving treatment was younger than most other treatment types: 25 years. Approximately 12% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- The majority (71%) of episodes occurred in a non-residential treatment facility.
- The median number of days for a treatment episode was 1.

- For clients who received information and education about their own drug use, cannabis was the most common principal drug of concern reported (57% of episodes), followed by alcohol (22%).

### **Support and case management only**

Support and case management only as a main treatment accounted for 8% of episodes in 2007–08. Of these episodes:

- 94% were for clients seeking treatment for their own drug use.
- The majority (63%) of episodes were for male clients and the median age of persons receiving treatment was the youngest of all treatment types: 24 years. Approximately 11% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- Treatment was most likely to occur in either an outreach setting (50% of episodes) or a non-residential treatment facility (46%).
- The median number of days in treatment was 52 (up from 47 days in 2006–07).
- Alcohol was the most common principal drug of concern reported (32% of episodes) by people seeking treatment for their own drug use, followed by cannabis (29%) and heroin (13%).

### **Rehabilitation**

Rehabilitation as the main treatment accounted for 7% of episodes in 2007–08. Of these episodes:

- Two-thirds were for male clients and the median age of persons receiving treatment was 32 years. Approximately 13% of episodes involved clients who identified as being of Aboriginal and/or Torres Strait Islander origin.
- The majority (65%) of episodes occurred in a residential treatment facility.
- The median number of days for a treatment episode was 37.
- Alcohol was the most common principal drug of concern reported (47% of episodes), followed by amphetamines (21%), cannabis (15%) and heroin (11%).

### **Accessing data from the AODTS–NMDS**

The AIHW has an interactive alcohol and other drug treatment data site containing subsets (data cubes) of national data on alcohol and other drug treatment services from the 2001–02 to 2007–08 collections. This site can be found at <[www.aihw.gov.au/drugs/datacubes/index.cfm](http://www.aihw.gov.au/drugs/datacubes/index.cfm)>.

The document *Alcohol and other drug treatment services NMDS 2009–10: Specifications and collection manual* contains information about data items collected and outlines the process to be followed for data requests. This document is available from the AIHW website at <[www.aihw.gov.au/publications/index.cfm/title/10726.doc](http://www.aihw.gov.au/publications/index.cfm/title/10726.doc)>.

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- AIHW (Australian Institute of Health and Welfare) 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.



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