

Alcohol and other drug treatment services in Australia

Findings from the National Minimum Data Set 2000–01

What is the AODTS-NMDS?

The Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS–NMDS) is a nationally agreed set of common data items collected by government-funded service providers for clients registered for alcohol and other drug treatment. This national collection is a subset of the information on alcohol and other drug treatment services that is routinely collected by States and Territories to monitor treatment services within their jurisdiction.

The NMDS excludes methadone maintenance treatment. Therefore, agencies whose sole activity is to prescribe and/or dose for methadone are currently excluded from the NMDS.

Why have an NMDS?

The NMDS has been implemented to assist in monitoring and evaluating key objectives of the National Drug Strategic Framework and to assist in the planning, management and quality improvement of alcohol and other drug treatment services. In general, it aims to provide ongoing information on the demographics of clients who use these services, the treatment they receive and administrative information about the agencies that provide alcohol and other drug treatment.

C O N T E N T S

What is the AODTS-NMDS	1
Why have an NMDS	1
Treatment services	2
Clients	2
Principal drug of concern	3
The national collection	5
Agencies and clients within scope	6
Exclusions to scope	6
Caveats	6
References	6

Alcohol and other drug treatment services in Australia

During 2000–01, reporting services registered a total of 83,529 clients for treatment. The aim is to provide measures of service utilisation. The NMDS does not provide population estimates or trends in alcohol and other drug use, or monitor general patterns of drug problems in Australia. Nevertheless, the information collected by the NMDS will be used with other sources of information (e.g. the National Drug Strategy Household Survey and the Illicit Drug Reporting System) to monitor patterns of drug problems in Australia.

It is important that alcohol and other drug problems in Australia are nationally monitored so that existing harm-reduction strategies can be assessed and new strategies developed.

Treatment services

• A total of 393 government-funded alcohol and other drug treatment services supplied data for 2000–01; of these 52% were non-government providers.

Clients

- During 2000–01, reporting services registered a total of 83,529 clients for treatment. Of those clients, 64% were males, 35% were females and 62% were aged between 20 and 39 years (Table 1). Of all clients, 84% were born in Australia and 92% stated that their preferred language was English.
- Of all clients receiving services for the drug use of others (e.g. a spouse seeking treatment for their partner or a parent seeking treatment for their child) two-thirds were female (66%). Of these females, 51% were aged 50 years or over.

	Males	Females	Total ^(b)	
Age group (years)	Per cent	Per cent	Per cent	Number
10–19	8.9	5.1	14.2	11,841
20–29	23.6	11.8	36.1	30,147
30–39	16.6	8.9	25.7	21,475
40–49	8.9	5.6	14.6	12,193
50–59	3.6	2.4	6.0	5,048
60+	1.1	0.7	1.9	1,562
Not stated	0.8	0.7	1.5	1,263
Total	63.5	35.3	100.0	83,529

Table 1: Client registrations by age group and sex, Australia^(a), 2000–01

(a) Excludes Queensland.

(b) Includes not stated (Sex).

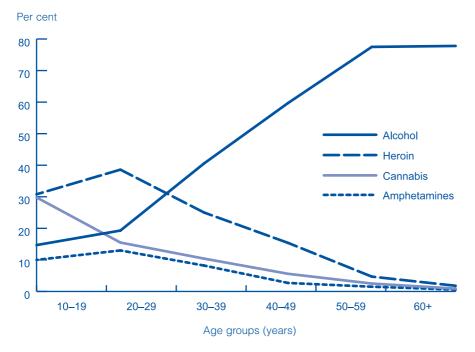
Source: AIHW 2002.

- Approximately 8% of all clients identified themselves as being of Aboriginal and/or Torres Strait Islander origin.
- Over a third of all clients (34%) were self-referred. Male clients were more likely than female clients to have been referred from correctional services, police or court diversions, with 16% of all male clients referred from these sources compared to only 6% of all female clients.

Principal drug of concern

- Nationally, alcohol was the most common drug for which clients sought treatment (34%). Heroin was the next most common, with 28% of all clients reporting it as their principal drug of concern. Cannabis (14%) and amphetamines (9%) were the next most commonly reported. The most common drug reported varied by jurisdiction.
- Of all Indigenous clients, 49% nominated alcohol as their principal drug of concern (in comparison to 33% of non-Indigenous clients). This pattern was reversed for heroin—more non-Indigenous clients (30%) nominated heroin as their principal drug compared to Indigenous clients (19%).

Figure 1: Proportion of clients seeking treatment for selected principal drugs of concern by age group, Australia, 2000–01



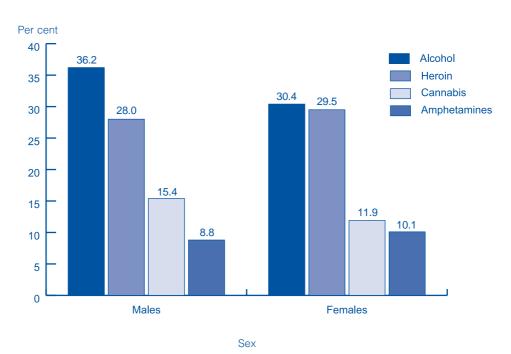
Source: AIHW 2002.

Alcohol and other drug treatment services in Australia

The proportion of clients reporting that they were current injectors was highest for the 10–19 and 20–29 age groups...

- The principal drug of concern varied with the client's age. Figure 1 shows that the proportion of clients seeking treatment for alcohol use increased with age, whereas the proportion of clients seeking treatment for heroin use decreased with age. (For example, 15% of all clients in the 10–19 age group were seeking treatment for alcohol and 31% for heroin; however, 78% of all clients in the 50–59 age group were seeking treatment for alcohol and only 5% for heroin).
- Differences between sexes for principal drugs of concern were relatively minor (Figure 2). A higher proportion of male clients reported alcohol (36%) and cannabis (15%) as their principal drug of concern compared to female clients (30% and 12% respectively). A slightly higher proportion of female clients (10%) than male clients (9%) reported amphetamines as their principal drug of concern.
- The majority of clients seeking treatment for their own drug use (58%) reported that they had injected drugs.
- Injecting drug use interacted with age. The proportion of clients reporting that they were current injectors was highest for the 10–19 and 20–29 age groups and lowest for the 60+ age group.





Source: AIHW 2002.

- Figure 3 shows that client registrations for treatment of alcohol use were highest at the beginning of the collection period (July to August 2000) and lowest in December 2000 and June 2001.
- Client registrations for heroin use started at a lower level than those for alcohol use; both then followed a similar pattern until February 2001 when a sharp drop in heroin use registrations was recorded.

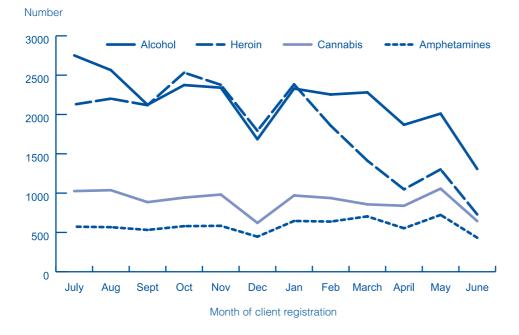


Figure 3: Number of client registrations per month by selected principal drugs of concern, Australia, 2000–01

Source: AIHW 2002.

The national collection

The Intergovernmental Committee on Drugs NMDS Working Group is responsible for developing and implementing the national collection. Members of the Working Group include representatives from the Commonwealth and each State and Territory, as well as from organisations such as the Australian Bureau of Statistics and the National Drug and Alcohol Research Centre. The Australian Institute of Health and Welfare supports the work of the Group and is the data custodian for the national data set.



Agencies and clients within scope

All publicly funded (at State and/or Commonwealth level) government and nongovernment agencies that provided one or more specialist alcohol and/or other drug treatment services, including residential and non-residential agencies, were in scope for the national data set. Specialist alcohol and drug units based in acute care hospitals or psychiatric hospitals were included if they provided treatment to non-admitted patients (e.g. outpatient services).

All clients assessed and accepted for one or more types of treatment from an alcohol and other drug treatment service within scope during the relevant reporting period (1 July 2000 to 30 June 2001) were included.

Exclusions to scope

- correctional institutions
- halfway houses and sobering-up shelters
- health promotion services (e.g. needle and syringe programs) and methadone maintenance treatments.

Caveats

Of data in scope, the following caveats must be observed:

- Data from Queensland were not included for 2000–01.
- The number of Indigenous clients may be under-counted as most Commonwealthfunded Indigenous substance-use services and Aboriginal health services that provide treatment for alcohol and other drug problems did not supply data for 2000–01. In addition, at the national level 8% of clients did not state their Indigenous status.

References

Australian Institute of Health and Welfare 2002. Alcohol and other drug treatment services in Australia 2000–01: First report on the national minimum data set. AIHW cat. no. HSE 22. Canberra: AIHW.

Further information

For further information visit our website where a number of the recent alcohol and other drug publications are available in full <www.aihw.gov.au>.

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

Ms Gail Weaving or Ms Danielle Sellick Australian Institute of Health and Welfare GPO Box 570 Canberra ACT 2601 Phone (02) 6244 1050 or (02) 6244 1277 Email: gail.weaving@aihw.gov.au or danielle.sellick@aihw.gov.au



© Australian Institute of Health and Welfare 2002

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.

This publication is part of the Australian Institute of Health and Welfare's Bulletin series. A complete list of the Institute's publications is available from the Publications Unit, Australian Institute of Health and Welfare, GPO Box 570, Canberra ACT 2601, or via the Institute's web site (http://www.aihw.gov.au).

AIHW Cat. No. AUS 30 ISSN 1446-9820 ISBN 1 74024 219 X

Suggested citation

AIHW: Alcohol and other drug treatment services in Australia: Findings from the National Minimum Data Set 2000–01. AIHW Cat. No. AUS 30. Canberra: AIHW.

Australian Institute of Health and Welfare

Board Chair Dr Sandra Hacker Director

Dr Richard Madden

Published by the Australian Institute of Health and Welfare Printed by Picton Press