



Alcohol and other drug treatment services in Western Australia

Findings from the National Minimum Data Set (NMDS) 2009–10

Highlights

In Western Australia in 2009–10, 52 government-funded alcohol and other drug treatment agencies provided 17,187 treatment episodes. This was an increase of eight treatment agencies and 272 treatment episodes compared with 2008–09. The median¹ ages of persons receiving treatment for their own drug use (30) and those seeking assistance for someone else's drug use (47) were similar to 2008–09.

Alcohol (49%), cannabis (19%) and amphetamines (14%) were again the top three drugs of concern.

As in 2008–09, counselling was the most common form of main treatment provided (63% of episodes), followed by withdrawal management (8%), rehabilitation and information and education only (both 6%).

1 The median is the midpoint of a list of observations ranked from the smallest to the largest.

Contents

Highlights.....	1
Treatment agencies.....	2
Client profile.....	3
Drugs of concern.....	4
Treatment programs	9
Symbols.....	13
How to find out more	13
Reference	13

About this bulletin

This bulletin summarises the main findings from the 2009–10 Alcohol and Other Drug Treatment Services (AODTS) NMDS data for Western Australia. More detailed information about the 2009–10 collection and its findings is in the publication *Alcohol and other drug treatment services in Australia 2009–10: report on the National Minimum Data Set (AIHW 2011)*. 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 2009–10 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 from 1 July 2009 to 30 June 2010.

It is important to note that the AODTS–NMDS collection includes pharmacotherapy clients only 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 (NOPSAD) collection.

For a complete list of clients and agencies excluded from the AODTS–NMDS, see AIHW 2011.

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, 671 government-funded alcohol and other drug treatment agencies supplied data for 2009–10. Of these, 52 were in Western Australia, of which 42 were non-government agencies.

Treatment agencies in the state were most likely to be in *Major cities* (58%) or *Inner regional areas* (17%). In 2009–10, the number of agencies reporting from *Very remote* areas has increased from zero to eight while the number reporting from *Remote* areas has decreased from three to zero. Some of this change is due to a reclassification of geographical areas within Western Australia. For more information on this issue, please see Section 2.2 of the AODTS–NMDS annual report.

Client profile

In Western Australia, there were 17,187 closed treatment episodes provided by alcohol and other drug treatment services reported in the 2009–10 AODTS–NMDS collection. The large majority (93%) of closed treatment episodes in the state involved clients seeking treatment for their own drug use. The remaining 7% involved clients seeking treatment in relation to another person's alcohol or other drug use.

Age and sex

The overall proportions of male and female clients in Western Australia (65% and 35%, respectively) differed slightly from the national proportions (67% and 33%, respectively). Of those treatment episodes reported for someone else's drug use in the state, females accounted for over two-thirds of clients (71%).

In Western Australia, the median age of persons receiving treatment for their own drug use was 30. Of people seeking treatment in relation to someone else's drug use, the median age was 47.

Around three in ten closed treatment episodes in Western Australia were for clients aged 20–29 (29%), with a similar proportion observed for clients aged 30–39 (27%).

Special population groups

The proportion of closed treatment episodes involving clients who identified as Aboriginal and Torres Strait Islander was higher in Western Australia (22%) than was observed nationally (13%). Treatment statistics for Aboriginal and Torres Strait Islander people need to be interpreted with caution due to the fact that the majority of Australian Government-funded Aboriginal and Torres Strait Islander substance use specific services or primary health care services are not included in the AODTS–NMDS collection. Also, Indigenous status was not stated in 1% of episodes in the state.

The large majority (83%) of closed treatment episodes in the state were for clients born in Australia, with the remaining clients originating from England (6%), New Zealand (3%) or other countries (6%). Almost all treatment episodes (99%) were for clients whose preferred language was English.

Drugs of concern

This section reports only on the 16,048 closed treatment episodes where clients were seeking treatment for their own alcohol or other drug use in Western Australia.

Principal drug of concern

The principal drug of concern refers to the main substance that the client stated led them to seek treatment from an alcohol and other drug treatment agency. In Western Australia in 2009–10, alcohol was the most common principal drug of concern (49%), followed by cannabis (19%) and amphetamines (14%) (Table 1). Nationally, alcohol was the most common principal drug of concern (48% of treatment episodes), followed by cannabis (23%), opioids (15%, with heroin accounting for 10%) and amphetamines (7%).

The proportion of treatment episodes related to alcohol in the state has steadily increased since 2004–05 (from 33% to 49%) and is now around the same as the national average (48%). Amphetamine-related episodes have continued to decrease since 2006–07, from 26% to 14% in 2009–10, but this is still substantially higher than the national average of 7%. Episodes for cannabis use increased slightly from 2008–09 (from 16% to 19% in 2009–10) but this was still lower than reported nationally (23%).

Table 1: Principal drug of concern^(a), Western Australia and Australia, 2001–02 to 2009–10 (per cent)

Principal drug of concern	Western Australia								Total (Australia) 2009–10	
	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	Per cent	Number
Alcohol	32.7	32.6	32.5	36.5	39.9	40.6	45.5	49.3	47.9	67,450
Amphetamines	26.2	25.6	26.3	24.6	25.9	25.6	19.8	14.2	7.1	10,038
Benzodiazepines	1.5	1.5	1.3	1.2	1.0	1.2	0.8	0.9	1.6	2,238
Cannabis	24.5	22.0	19.1	18.8	15.7	14.2	15.9	18.6	23.2	32,676
Cocaine	0.1	0.2	0.1	0.2	0.2	0.2	0.2	0.2	0.4	595
Ecstasy	0.2	0.4	0.3	0.3	0.4	0.6	0.7	0.8	0.8	1,107
Nicotine	0.8	0.4	0.5	0.5	0.4	0.8	0.7	0.7	1.8	2,553
Opioids										
Heroin	8.6	9.9	12.0	10.2	7.9	8.3	8.5	8.7	9.9	13,882
Methadone	0.6	1.6	2.3	2.1	2.1	2.3	2.1	1.4	1.4	1,907
Morphine	—	—	0.1	0.2	0.1	0.1	0.2	0.4	1.2	1,751
Total opioids	9.3	11.7	14.7	12.9	10.4	11.0	11.4	11.1	14.7	20,709
All other drugs ^(b)	4.1	5.3	5.1	5.0	5.9	6.1	5.1	4.3	2.4	3,403
Not stated	0.6	0.4	—	—	—	—	—	—	—	—
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	12,142	12,479	14,235	14,251	16,110	17,014	15,570	16,048	..	140,769

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

(b) 'Total opioids' includes the balance of opioids according to the Australian Standard Classification of Drugs of Concern (ASDC).

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

Age and sex

Across every age group in Western Australia in 2009–10, the most common principal drug of concern was alcohol. However the extent to which it was reported varied with age. Two-thirds of episodes (66%) involving those aged 40 and over reported alcohol as the principal drug of concern, while among the younger age groups the proportions varied between 42% for the 20–29 group and 46% for the 10–19 group.

The second most common principal drug of concern varied between age groups. For clients aged 10–19, cannabis was the next most common principal drug of concern (41%), whereas for clients aged 30–39, amphetamines were the next most common principal drug of concern (19%). For the 20–29 age group, cannabis and amphetamines were reported equally (both 20%).

Special population groups

In 2009–10, treatment episodes involving clients who identified as Aboriginal and Torres Strait Islander in Western Australia were most likely to involve alcohol as the principal drug of concern (60%), followed by cannabis (22%) and amphetamines (10%).

All drugs of concern

Clients can report up to five drugs of concern in addition to the principal drug of concern. Around half (49% or 7,923) of all treatment episodes in Western Australia involved at least one other drug of concern (in addition to the principal drug of concern).

A breakdown of all drugs of concern by drug type is presented in Figure 1. For example, nicotine was reported as the principal drug of concern in less than 1% of episodes, but was reported as a drug of concern (either principal or other) in 16% of treatment episodes.

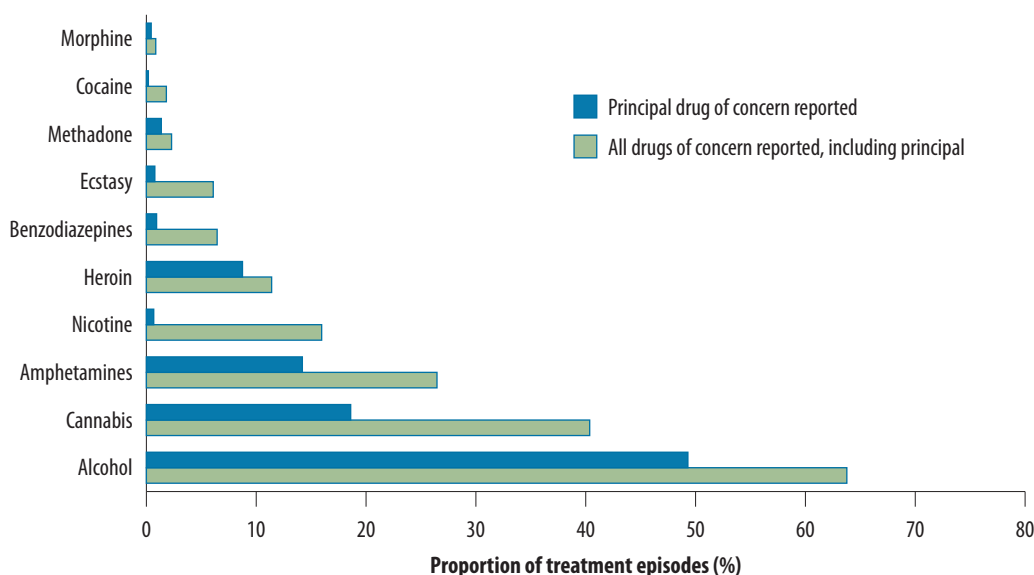


Figure 1: Principal drug of concern and all drugs of concern, Western Australia, 2009–10.

Alcohol

In Western Australia, alcohol was the most common principal drug of concern for which treatment was sought, accounting for 49% of closed treatment episodes in 2009–10.

When all drugs of concern are considered (that is, the principal drug of concern and all other drugs of concern nominated by the client), 64% of episodes included alcohol.

Of the 7,905 episodes where alcohol was the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Two-thirds (68%) of episodes were for male clients.
- The median age of clients receiving treatment was 32 (males 31; females 35).
- Just over one-quarter (28%) of episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (33% of episodes), followed by referrals from other alcohol and other drug treatment services (21%).

Drug profile

- Two in five (41%) episodes (3,221) included at least one other drug of concern. From these episodes, 5,158 instances of other drugs of concern were recorded—37% were for cannabis, 23% for nicotine and 17% for amphetamines.
- Two-thirds (68%) of episodes involved clients who reported never having injected drugs. Another 6% of episodes involved clients who reported as currently injecting, while 16% involved clients who reported they had injected drugs in the past.

Treatment profile

- Counselling was the most common main treatment type received (63% of episodes), followed by rehabilitation and withdrawal management (both 8%).
- Treatment was most likely to take place in a non-residential treatment facility (68% of episodes), followed by a residential treatment facility (13%).
- The median number of days for a treatment episode was 32.

Cannabis

In Western Australia, cannabis was the second most common principal drug of concern for which treatment was sought, accounting for 19% of closed treatment episodes in 2009–10.

When all drugs of concern are considered (including the principal drug of concern and all other drugs of concern nominated by the client), 40% of episodes included cannabis.

Of the 2,984 episodes where cannabis was the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Almost three-quarters (72%) of episodes were for male clients.
- The median age of clients receiving treatment was 22 (males 21; females 24).
- Over one in four (27%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- The most common source of referral was from court diversion (24% of episodes), followed by self-referral (23%) and referrals from other alcohol and other drug treatment services (19%).

Drug profile

- Smoking was the most common method of use (98% of episodes).
- 56% of episodes (1,663) included at least one other drug of concern. From these episodes, 2,733 instances of other drugs were recorded – 41% were for alcohol, 19% for amphetamines and 18% for nicotine.
- Almost two-thirds (61%) of episodes involved clients who reported never having injected drugs. Another 8% of episodes involved clients who reported as currently injecting, while 16% involved clients who reported they had injected drugs in the past.

Treatment profile

- Counselling was the most common main treatment type received (66% of episodes), followed by information and education only (10%). Withdrawal management and support and case management both accounted for 6% of episodes.
- Treatment was most likely to take place in a non-residential treatment facility (70% of episodes), followed by a home setting (12%).
- The median number of days for a treatment episode was 31.

Amphetamines

In Western Australia, amphetamines were the third most common principal drug of concern for which treatment was sought, accounting for 14% of closed treatment episodes in 2009–10. Amphetamines were reported in 27% of all episodes (as either the principal or other drug of concern).

Of the 2,280 episodes where amphetamines were the principal drug of concern in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Two-thirds (68%) episodes were for male clients.
- The median age of clients receiving treatment, for both males and females, was 30.
- One in six (16%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (41% of episodes), followed by referrals from other alcohol and other drug treatment services, (15%) and referrals from court diversion or correctional service (both 14%).

Drug profile

- Injecting was the most common usual method of use (74%), followed by smoking (17%) and ingestion (6%).
- Three in five (62%) episodes (1,421) included at least one other drug of concern. From these episodes, 2,890 instances of other drugs of concern were recorded—31% were for cannabis and 24% for alcohol.
- Just under half (47%) of episodes involved clients who reported as currently injecting, while 33% involved clients who reported they had injected drugs in the past. About one in five (17%) episodes involved clients who reported never having injected drugs.

Treatment profile

- Counselling was the most common main treatment type received (73% of episodes), followed by rehabilitation (8%). This is a considerable change of focus since 2008–09, when 57% of episodes involved counselling and 21% involved rehabilitation as the main treatment type.
- Treatment was most likely to take place in a non-residential treatment facility (59% of episodes), followed by other settings (10%).
- The median number of days for a treatment episode was 49.

Treatment programs

The main treatment type is the principal activity, as judged by the treatment provider, which is necessary for completing the 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 (which only include episodes for people seeking treatment for themselves).

Of all closed treatment episodes in Western Australia, counselling was the most common form of main treatment provided (63% of episodes), followed by withdrawal management (8%), rehabilitation and information and education only (both 6%) (Table 2). Other treatment types (including pharmacotherapy), comprised 7% of episodes.

Western Australia provided more counselling and rehabilitation as a proportion of all treatments than was provided nationally in 2009–10. On the other hand, the state provided proportionately less withdrawal management, support and case management only, information and education only and assessment only.

Table 2: Main treatment type, Western Australia and Australia, 2001–02 to 2009–10 (per cent)

Principal drug of concern	Western Australia									Total (Australia) 2009–10	
	2001–02	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	Per cent	Number
Withdrawal management (detoxification)	11.8	9.7	6.6	9.1	9.4	8.2	10.6	10.2	8.4	15.4	22,534
Counselling	61.4	58.0	50.2	54.8	57.1	54.0	54.6	56.4	62.9	42.2	61,990
Rehabilitation	8.5	6.1	16.4	12.2	14.1	15.0	14.6	13.8	6.3	5.1	7,521
Support and case management only	0.3	0.7	1.1	2.8	1.4	2.3	3.0	3.1	4.8	8.7	12,718
Information and education only	6.6	13.8	9.7	6.8	5.8	4.3	2.7	3.6	5.6	8.9	13,034
Assessment only	6.5	9.5	9.8	7.4	5.2	10.4	10.3	7.6	4.9	13.5	19,803
Other ^(a)	4.9	2.1	6.1	6.8	6.9	5.7	4.4	5.3	7.1	6.3	9,186
Total (per cent)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	..
Total (number)	15,232	14,122	14,256	16,092	16,342	17,802	18,705	16,915	17,187	..	146,786

(a) Other includes treatment episodes where the main treatment type was reported as pharmacotherapy.

Counselling

Counselling was the most common main treatment type reported in Western Australia in 2009–10, accounting for 63% of closed treatment episodes (higher than the national proportion of 42%). Of the 10,804 episodes where counselling was nominated as the main treatment type received, the client, drug and treatment profiles were as follows:

Client profile

- The large majority (91%) of episodes were for clients seeking treatment for their own drug use.
- Two-thirds (67%) of episodes were for male clients.
- The median age of persons receiving treatment was 31 (males 29; females 35).
- One in five (22%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (35% of episodes), followed by referrals from court diversion programs (21%).

Treatment profile

- Treatment was most likely to occur in a non-residential treatment facility (76% of episodes), followed by an outreach setting (11%).
- Around half (49%) of episodes ended because the treatment was completed. The next most common reason for episodes to end was that the client ceased to participate without notifying the service provider (28% of episodes ended this way).
- The median number of days for a treatment episode was 49.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (51% of episodes) by people who received counselling for their own drug use, followed by cannabis (20%) and amphetamines (17%).

Withdrawal management (detoxification)

Withdrawal management was the second most common main treatment provided in Western Australia, accounting for 8% of closed treatment episodes in 2009–10. Of the 1,449 episodes where withdrawal management was nominated as the main treatment type received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- Due to the nature of withdrawal management, all episodes were for clients seeking treatment for their own drug use.
- Three in five (60%) episodes were for male clients.
- The median age of persons receiving treatment was 34 (males 33; females 35).
- Around one in ten (9%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (48%) of episodes, followed by referrals from other alcohol and other drug treatment services (28%).

Treatment profile

- Treatment was most likely to occur in a residential treatment facility (48% of episodes), followed by a non-residential treatment facility (39%).
- Two thirds (67%) of episodes ended because the treatment was completed (up from 43% in 2008–09), while another 17% ended because the client ceased to participate without notice (down from 41% in 2008–09).
- The median number of days for a treatment episode was eight.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (41%) by people who received withdrawal management, followed by heroin (26%) and cannabis (12%).

Rehabilitation

Rehabilitation was the third most common main treatment type reported in Western Australia in 2009–10, accounting for six per cent of closed treatment episodes. Of the 1,078 episodes where rehabilitation was nominated as the main treatment received in 2009–10, the client, drug and treatment profiles were as follows:

Client profile

- All episodes were for clients seeking treatment for their own drug use.
- Two-thirds (67%) of episodes were for male clients.
- The median age of persons receiving treatment was 34 (both males and females).
- One in ten (10%) episodes involved clients who identified as Aboriginal and Torres Strait Islander.
- Self-referral was the most common source of referral (60% of episodes), followed by referrals from other alcohol and other drug treatment services (16%).

Treatment profile

- Treatment was most likely to occur in a residential treatment facility (89% of episodes), followed by a non-residential treatment facility (9%).
- Just under half (47%) 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 (19% of episodes ended this way).
- The median number of days for a treatment episode was 42.

Principal drug profile

- Alcohol was the most common principal drug of concern reported (61% of episodes), followed by amphetamines (17%) and cannabis (10%).

Symbols

- nil or rounded to zero
- .. not applicable

How to find out more

If you would like more detailed data about Western 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 web site at < <http://www.aihw.gov.au/publication-detail/?id=6442468251>>.

Reference

Australian Institute of Health and Welfare (AIHW) 2011. Alcohol and other drug treatment services in Australia 2009–10: report on the National Minimum Data Set. Drug treatment series no. 14. Cat. no. HSE 114. Canberra: AIHW.

The Australian Institute of Health and Welfare is a major national agency which provides reliable, regular and relevant information and statistics on Australia's health and welfare. The Institute's mission is *authoritative information and statistics to promote better health and wellbeing.*

© Australian Institute of Health and Welfare 2011



This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 3.0 (CC-BY 3.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build upon this work. However, you must attribute the AIHW as the copyright holder of the work in compliance with our attribution policy available at <www.aihw.gov.au/copyright/>. The full terms and conditions of this licence are available at <<http://creativecommons.org/licenses/by/3.0/au/>>.

Enquiries relating to copyright should be addressed to the Head of the Communications, Media and Marketing Unit, Australian Institute of Health and Welfare, GPO Box 570, Canberra ACT 2601.

The rights to the following material are owned by third parties and are excluded from the CC-BY 3.0 licence: jurisdiction logo.

This publication is part of the Australian Institute of Health and Welfare's Drug Treatment Series. A complete list of the Institute's publications is available from the Institute's website <www.aihw.gov.au>.

ISSN 1446-9820

ISBN 978-1-74249-260-5

Suggested citation

Australian Institute of Health and Welfare 2011. Alcohol and other drug treatment services in Western Australia 2009–10: findings from the National Minimum Data Set. Cat. no. AUS 153. Canberra: AIHW.

Australian Institute of Health and Welfare

Board Chair
Dr Andrew Refshauge

Director
David Kalisch

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

Communications, Media and Marketing Unit
Australian Institute of Health and Welfare
GPO Box 570
Canberra ACT 2601
Tel: (02) 6244 1032
Email: info@aihw.gov.au

Published by the Australian Institute of Health and Welfare

Please note that there is the potential for minor revisions of data in this report.
Please check the online version at <www.aihw.gov.au> for any amendments